

*Forbes C, et al. Defining postoperative ileus and associated risk factors in patients undergoing radical cystectomy with an Enhanced Recovery After Surgery (ERAS) program*

**Appendix. Enhanced Recovery After Surgery (ERAS) protocol items and adherence**

*Supplementary Fig. 1.* Key components of Enhanced Recovery After Surgery (ERAS) pathway utilized at our institution for radical cystectomy.

<b>Active Patient Involvement</b>		
<b>Pre-operative</b>	<b>Intra-operative</b>	<b>Post-operative</b>
•Pre-admission education	•Active warming	•Early oral nutrition
•Early discharge planning	•Opioid-sparing technique	•Early ambulation
•Reduced fasting duration	•Surgical techniques	•Early catheter removal
•Carbohydrate loading	•Avoidance of prophylactic NG tubes & drains	•Use of chewing gum
•No/selective bowel prep		•Defined discharge criteria
•Venous thromboembolism prophylaxis	•Pain & nausea management	
•Antibiotic prophylaxis	•Goal directed peri-operative fluid management	
•Pre-warming		
<b>Audit of compliance &amp; outcomes</b>		
<b>Whole Team Involvement</b>		

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**Supplementary Fig. 2.** Adherence to 12 key Enhanced Recovery After Surgery (ERAS) pathway components post-radical cystectomy from October 2014 to September 2016 (n=152). POD: postoperative day.

