

ANZELA-QI | INCLUSION AND EXCLUSION CRITERIA

Feb 2020

	Included	Excluded
BASIC	<p>Adults (> 18 years)</p> <p>Booked to undergo an abdominal procedure where urgency for surgical intervention is < 24 hours from surgical decision</p> <p>Acute abdomen requiring emergency assessment but ultimately not operated on</p>	<p>Children (< 18 years)</p> <p>Elective laparotomy / laparoscopy</p>
APPROACH & INTENT	<p>Open, laparoscopic, or laparoscopic-assisted procedures</p> <p>Diagnostic laparotomy/laparoscopy where no procedure is performed due to inoperable pathology e.g. peritoneal/hepatic metastases</p>	<p>Diagnostic laparotomy/laparoscopy only, where no subsequent procedure performed (unless due to inoperable pathology)</p>
ANATOMY	<p>Procedures involving the stomach, small or large bowel, or rectum</p>	
INDICATION	<p>Conditions involving perforation, ischaemia, abdominal abscess, bleeding or obstruction</p>	
APPENDIX		<p>Appendicectomy +/- drainage of localised collection (unless the procedure is incidental to a non-elective procedure on the GI tract)</p>
BILIARY & GALL	<p>Operations on the biliary tract or gallbladder that are not an acute cholecystectomy</p>	<p>Cholecystectomy +/- drainage of localised collection (unless the procedure is incidental to a non-elective procedure on the GI tract)</p>
DEHISCENCE	<p>Return to theatre for repair of substantial dehiscence of major abdominal wound (i.e. "burst abdomen")</p>	<p>Minor abdominal wound dehiscence (unless this causes bowel complications requiring resection)</p>
VASCULAR	<p>Vascular surgery where the resection of ischaemic bowel was a separate visit to theatre following abdominal aortic aneurysm repair</p>	<p>Vascular surgery, including abdominal aortic aneurysm repair</p>
GYNAE	<p>Bowel resection performed as a non-elective procedure for obstruction due to gynaecological cancer</p>	<p>Caesarean section or obstetric laparotomies</p> <p>Gynaecological laparotomy</p> <p>Ruptured ectopic pregnancy</p>
PERITONEUM	<p>Washout/evacuation of intra-peritoneal haematoma</p>	<p>Surgery relating to sclerosing peritonitis</p>

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HERNIA	<p>Bowel resection/repair due to incarcerated umbilical, inguinal and femoral hernias (but not umbilical, inguinal and femoral hernia repair without bowel resection/repair)</p> <p>Obstructing/incarcerated incisional hernias with or without bowel resection provided the presentation and findings were acute.</p>	
ADHESION & ABSCESS	Laparoscopic/Open Adhesiolysis	Pelvic abscesses due to pelvic inflammatory disease
OTHER	<p>Operations on the oesophagus (e.g. perforation, incarcerated hernia etc.) with or without bowel resection provided the presentation and findings were acute and managed via a laparotomy and not thoracotomy</p> <p>Any re-operation/return to theatre meeting the criteria above is included, such as patients:</p> <ul style="list-style-type: none"> • with ischaemic bowel following elective or emergency aortic aneurysm surgery, or for ischaemic bowel following cardiac surgery • requiring non-elective surgery with or without bowel resection following prior gynaecological or obstetric surgery • return to theatre for post-operative complications (e.g. bleeding, sepsis, bowel injury) following prior urological, renal or transplant surgery even if the original procedure would have been excluded • If multiple procedures are performed on different anatomical sites within the abdominal/pelvic cavity, the patient would be included if the major procedure is general surgical. e.g. <ul style="list-style-type: none"> – non-elective colonic resection with hysterectomy for a fistulating colonic cancer would be included as the bowel resection is the major procedure – bowel resection at the same time as emergency abdominal aortic aneurysm repair would not be included as the aneurysm repair is the major procedure 	<p>Laparotomy/laparoscopy for pathology caused by blunt or penetrating trauma</p> <p>All surgery relating to organ transplantation unless the return to theatre for a bowel injury</p> <p>Surgery for removal of dialysis catheters</p> <p>Laparotomy/laparoscopy for pathology of the spleen, renal tract, kidneys, liver, pancreas or urinary tract that involve a bowel injury</p>

The above criteria are not exhaustive.

Any intra-abdominal procedure not identifiable within the exclusion criteria should be included. Please contact the ANZELA-QI team if you require any clarification.