



## Inclusion Criteria Queries: FAQs

1. A patient who has undergone a primarily vascular procedure, with or without a bowel resection as a secondary procedure

- a. If the emergency laparotomy is for a primary vascular procedure then it should be **excluded**, regardless of whether a secondary bowel resection was performed
- b. If there is a separate return to theatre following an emergency or elective vascular procedure, and at the second laparotomy a bowel resection is performed as the primary procedure then the second laparotomy should be **excluded**

2. Formation of colostomy/ileostomy

- a. If a midline laparotomy is performed, with the primary procedure being formation of stoma then it should be included
- b. If the stoma is performed as a trephine or laparoscopically (i.e. without a midline laparotomy) then it should be **excluded**

3. Oversewing of a duodenal ulcer

- a. Both repair of a perforated gastric or duodenal ulcer, and oversewing of a bleeding gastric or duodenal ulcer are **included**

4. A patient with intra-abdominal sepsis from Crohn's who undergoes drainage of intra-abdominal abscesses

- a. This would be **included**

5. A patient who has undergone a small bowel resection due to iatrogenic small bowel injury at the time of a C-Section

- a. If the small bowel resection was performed as a secondary procedure at the time of a primarily gynaecological procedure it would be **excluded**
- b. If there is a separate return to theatre following an emergency or elective gynaecological

procedure, and at the second laparotomy a bowel resection is performed as the primary procedure then the second laparotomy should be **excluded**

6. A patient who requires a return to theatre following elective surgery undertaken by an oncological gynaecology surgeon (ie gynae-oncology) to manage a gastrointestinal or bowel complication that requires the assistance of a general surgeon is **included**, so long as the pathology and surgery meets general NELA inclusion/ exclusion criteria as listed elsewhere. If the complication is managed entirely by an oncological gynaecology surgeon without the assistance of a general surgeon, the patient is **excluded**. If the patient had generalist gynaecology surgery as their index operation, and requires a return to theatre, even when a general surgeon is required to assist in management, the patient is **excluded** as per point 5 above.

7. A patient who requires general surgery to manage a gastrointestinal or bowel complication following an interventional radiological procedure that requires the assistance of a general surgeon is **included**, so long as the pathology and surgery meets general NELA inclusion/ exclusion criteria as listed elsewhere.

8. A patient who has undergone refashioning of gangrenous stoma 3 days post elective laparotomy

- a. If a midline laparotomy is performed, with the primary procedure being refashioning of stoma then it should be **included**
- b. If the stoma is refashioned without a midline laparotomy then it should be **excluded**

9. Laparotomy and excision of Meckel's diverticulum

- a. This would be **included** (this is a new procedure category in the 2015-2016 year of data collection)

10. Laparotomy/enterotomy for a gallstone ileus

- a. This would be **included** ("enterotomy" is a new procedure category in the 2015-2016 year of data collection)

11. Laparotomy for a perforated appendix and abscess which caused bowel obstruction, dead bowel and resulted in small bowel resection

- a. All laparotomies where the primary pathology is appendicitis are **excluded**, regardless of the severity of the procedure. We acknowledge that there may be severe cases of contamination, and

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bowel resection may be required, but complete exclusion avoids subjective judgement calls about the severity of contamination

12. Laparotomy for a gastric bleed

a. This would be **included**

13. Laparotomy for caecal perforation the day following colonoscopy and polypectomy

a. This would be **included**

14. Emergency laparoscopic reduction of gastric volvulus with gastric outlet obstruction, Nissen fundoplication and repair of hiatus hernia

a. This would be **included**