



دائرة الصحة
DEPARTMENT OF HEALTH

Bariatric Surgery Service Jawda Guidance

Version 4

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Bariatric Surgery JAWDA Performance Indicators

Executive Summary

The Department of Health– Abu Dhabi (DOH) is the regulatory body of the healthcare sector in the Emirate of Abu Dhabi and ensures excellence in healthcare for the community by monitoring the health status of its population.

The Emirate of Abu Dhabi is experiencing a substantial growth in the number of hospitals, centers and clinics. This ranges from school clinics and mobile units to internationally renowned specialist and tertiary academic centers. Although access and quality of care has improved dramatically over the last couple of decades, mirroring the economic upturn and population boom of Emirate of Abu Dhabi, however challenges remain in addressing further improvements.

The main challenges that are presented with increasingly dynamic population include an aging population with increased expectation for treatment, utilization of technology and diverse workforce leading to increased complexity of healthcare provision in Abu Dhabi. All of this results in an increased and inherent risk to quality and patient safety.

DOH has developed dynamic and comprehensive quality framework in order to bring about improvements across the health sector. This guidance relates to the quality indicators that DOH is mandating the quarterly reporting against by the operating general and specialist hospitals in Abu Dhabi.

The guidance sets out the full definition and method of calculation for patient safety and clinical effectiveness indicators. For enquiries about this guidance, please contact jawda@DoH.gov.ae

This document is subject for review and therefore it is advisable to utilize online versions available on the DOH website at all times.

| | |
|-------------------|---|
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| Published update: | Version 2, January 2020 Version 3, August 2021 Version 4, December 2024 |
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Bariatric Surgery JAWDA Performance Indicators

About this Guidance

The guidance sets out the definitions and reporting frequency of JAWDA Bariatric Surgery (BS) performance indicators. The Department of Health (DoH), with consultation from local and international expertise of obesity and weight management, has developed Bariatric Surgery Performance Indicators that are aimed for assessing the degree to which a provider competently and safely delivers the appropriate clinical services to the patient within the optimal period of time.

The Bariatric Surgery performance indicators in this guidance include measures to monitor morbidity and mortality in patients undergoing bariatric surgery i.e. (postoperative complications, readmissions, re-operation, and extended length of stay). Healthcare providers are the most qualified professionals to develop and evaluate quality of care for obesity and weight management patients; therefore, it is crucial that clinicians retain a leadership position in defining performance among Bariatric healthcare providers.

Who is this guidance for?

All DoH licensed healthcare facilities provide bariatric surgery services in the Emirate of Abu Dhabi.

How do I follow this guidance?

Each provider will nominate one member of staff to coordinate, collect, monitor and report Bariatric services quality indicators data as per communicated dates. The nominated healthcare facility lead must in the first instance e-mail their contact details (if different from previous submission) to JAWDA@doh.gov.ae and submit the required quarterly quality performance indicators through Jawda online portal.

What are the Regulation related to this guidance?

- Legislation establishing the Health Sector
- [DOH Standard for Obesity and Weight Diagnosis, Pharmacological and Surgical Management Interventions](#)
- As per DoH [Policy for Quality and Patient Safety](#) issued January 15th 2017, this guidance applies to all DOH Licensed Hospital Healthcare Facilities in the Emirate of Abu Dhabi in accordance with the requirements set out in this Standard.

Bariatric Surgery JAWDA Performance Indicators

Bariatric Surgery Quality Indicators

Type: BS Quality Indicator

Indicator Number: BS013

| | |
|---------------------------------|--|
| KPI Description (title): | Rate of Patient Complications within 30 days from Gastric Bypass Bariatric surgery. |
| Domain | <i>Safety</i> |
| Indicator Type | <i>Outcome</i> |
| Definition: | Rate of medical/surgical complications among Gastric Bypass Bariatric surgery patients (18 years or older) within 30 days of the surgery date. |
| Calculation: | <p><u>Numerator:</u> Total number of patients (18 years or older) who have undergone elective Gastric Bypass Bariatric surgery and had complications within 30 days of the surgery date.</p> <p>The 30-day timeframe: The date the patient exits the OR is POD0, etc. (See Appendix A for applicable codes)</p> <p><u>Inclusion Criteria:</u></p> <ul style="list-style-type: none"> • Unplanned admission to ICU • Surgical Site Infection: Superficial, deep incisional or organ space • Pneumonia • Unplanned intubation • PE/DVT requiring therapy • Prolonged ventilation (>48hrs) • Progressive renal insufficiency (rise in creatinine >2mg/dl from the most recent preoperative creatinine value with no requirement of post-operative dialysis. • Acute Renal failure requiring post-operative dialysis in patients who did not require dialysis within two weeks prior to surgery and subsequently have worsening renal function post-operatively requiring dialysis. • Confirmed stroke diagnosis • Cardiac arrest requiring CPR • Myocardial Infarction (MI) • Blood transfusion within 72hrs of surgery start time • Sepsis and septic shock • Bowel obstruction with or without surgical intervention • GI Bleeding requiring transfusion or other surgical intervention • Ulcer • Bowel perforation requiring surgical intervention • Stricture Urinary Tract Infection • Outpatient or ED treatment for dehydration requiring fluids • Anastomotic or staple line leak with or without surgical intervention • Any other unplanned return to OR <p><u>Denominator:</u> Total number of patients (18 years or older) who have undergone elective Gastric Bypass Bariatric surgery during the reporting period.</p> <p><u>Denominator Inclusion:</u></p> <ul style="list-style-type: none"> • Primary Gastric Bypass - 43621, 43633, 43644, 43645, 43846 • Revisional Surgery- 43771, 43848 <p><u>Denominator Exclusion:</u> Patients who were discharged against medical advice</p> |

Bariatric Surgery JAWDA Performance Indicators

| | |
|--|---|
| Reporting Frequency: | Quarterly |
| Unit of Measure: | Percentage |
| International comparison if available | Developed locally by modifying similar indicators used by MBSAQIP |
| Desired direction: | Lower is better |
| Notes for all providers | |
| Data sources and guidance: | Hospital patient data source, bariatric registry |

Type: BS Quality Indicator

Indicator Number: BS014

| | |
|--|--|
| KPI Description (title): | Unplanned Hospital Readmission within 30 days of the Gastric Bypass Bariatric Surgery |
| Domain | <i>Effectiveness</i> |
| Indicator Type | <i>Outcome</i> |
| Definition: | The percentage of unplanned readmissions for adult patients (18 years and older) after discharge from the index Gastric Bypass discharge. All related and unrelated readmissions should be included. Please indicate whether each readmission is related or unrelated in the notes section. |
| Calculation: | <p><u>Numerator:</u> Total number of Gastric Bypass patients (18 years or older) who had an unplanned hospital readmission within 30 days of the bariatric surgery encounter discharge date.</p> <p><u>Denominator:</u> Total number of discharges (18 years or older) who have undergone elective Gastric Bypass Bariatric surgery during the reporting period.</p> <p><u>Denominator Inclusion:</u></p> <ul style="list-style-type: none"> • Primary Gastric Bypass - 43621, 43633, 43644, 43645, 43846 • Revisional Surgery- 43771, 43848 <p><u>Denominator Exclusion:</u> Patients who were discharged against medical advice</p> |
| Reporting Frequency: | Quarterly |
| Unit of Measure: | % complication rate |
| International comparison if available | Developed locally by modifying similar indicators used by MBSAQIP |
| Desired direction: | Lower is better |
| Notes for all providers | |
| Data sources and guidance: | Hospital patient data source, bariatric registry |

Bariatric Surgery JAWDA Performance Indicators

Type: BS Quality Indicator

Indicator Number: BS015

| | |
|--|---|
| KPI Description (title): | Death Rate among within 30 days of the Gastric Bypass Bariatric Surgery |
| Domain | <i>Safety</i> |
| Indicator Type | <i>Outcome</i> |
| Definition: | Rate of death of patients aged ≥18, within 30 days following the Gastric Bypass bariatric surgery |
| Calculation: | <p><u>Numerator:</u> Total number of patients (18 years or older) who have undergone Gastric Bypass Bariatric surgery and died within 30 days of the surgery date.</p> <p><u>Denominator:</u> Total number patients (18 years or older) who have undergone a Gastric Bypass bariatric surgery during the reporting period.</p> <p><u>Denominator Inclusion:</u></p> <ul style="list-style-type: none"> • Primary Gastric Bypass - 43621, 43633, 43644, 43645, 43846 • Revisional Surgery- 43771, 43848 <p><u>Denominator Exclusion:</u> Patients who were discharged against medical advice</p> |
| Reporting Frequency: | Quarterly |
| Unit of Measure: | % Performance |
| International comparison if available | Developed locally by modifying similar indicators used by MBSAQIP |
| Desired direction: | Lower is better |
| Notes for all providers | |
| Data sources and guidance: | Hospital patient data source, bariatric registry |

Bariatric Surgery JAWDA Performance Indicators

Type: BS Quality Indicator

Indicator Number: BS016

| | |
|--|---|
| KPI Description (title): | Rate of Patient Complications within 30 days from Sleeve Gastrectomy Bariatric Surgery |
| Domain | <i>Safety</i> |
| Indicator Type | <i>Outcome</i> |
| Definition: | Rate of medical/surgical complications within 30 days of the surgery date among Sleeve Gastrectomy bariatric surgery patients (18 years or older). |
| Calculation: | <p>Numerator: Total number of patients (18 years or older) who have undergone an elective Sleeve Gastrectomy surgery and had complications within 30 days of the surgery date</p> <p>The 30-day timeframe: The date the patient exits the OR is POD0, etc. (See Appendix A for applicable codes)</p> <p>Inclusion Criteria:</p> <ul style="list-style-type: none"> • Unplanned admission to ICU • Surgical Site Infection: Superficial, deep incisional or organ space • Pneumonia • Unplanned intubation • PE/DVT requiring therapy • Prolonged ventilation (>48hrs) • Progressive renal insufficiency (rise in creatinine >2mg/dl from the most recent preoperative creatinine value with no requirement of post-operative dialysis. • Acute Renal failure requiring post-operative dialysis in patients who did not require dialysis within two weeks prior to surgery and subsequently have worsening renal function post-operatively requiring dialysis. • Confirmed stroke diagnosis • Cardiac arrest requiring CPR • Myocardial Infarction (MI) • Blood transfusion within 72hrs of surgery start time • Sepsis and septic shock • Bowel obstruction with or without surgical intervention • GI Bleeding requiring transfusion or other surgical intervention • Ulcer • Bowel perforation • Stricture • Staple line leak with or without surgical intervention • Urinary Tract Infection • Outpatient or ED treatment for dehydration requiring fluids • Any other unplanned return to OR <p>Denominator: Total number of patients (18 years or older) who have undergone elective Sleeve Gastrectomy surgery during the reporting period.</p> <p>Sleeve Gastrectomy CPT Code: 43775, 43848</p> <p>Denominator Exclusion: Patients who were discharged against medical advice</p> |
| Reporting Frequency: | Quarterly |
| Unit of Measure: | Percentage of complications |
| International comparison if available | Developed locally by modifying similar indicators used by MBSAQIP |

Bariatric Surgery JAWDA Performance Indicators

| | |
|-----------------------------------|--|
| Desired direction: | Lower is better |
| Notes for all providers | |
| Data sources and guidance: | Hospital patient data source, bariatric registry |

Type: BS Quality Indicator

Indicator Number: BS017

| | |
|--|--|
| KPI Description (title): | Unplanned Hospital Readmission within 30 days of the Sleeve Gastrectomy Bariatric Surgery. |
| Domain | <i>Effectiveness</i> |
| Indicator Type | <i>Outcome</i> |
| Definition: | Percentage of unplanned readmissions for adult patients (18 years and older) after discharge from the index Sleeve Gastrectomy discharge. All related and unrelated readmissions should be included. Please indicate whether each readmission is related or unrelated in the notes section. |
| Calculation: | <p><u>Numerator:</u> Total number of Sleeve Gastrectomy patients (18 years or older) who had an unplanned hospital readmission within 30 days of the principal bariatric surgery encounter discharge date.</p> <p><u>Denominator:</u> Total number of discharges (18 years or older) who have undergone elective Sleeve Gastrectomy bariatric surgery during the reporting period.</p> <p>Sleeve Gastrectomy CPT Code: 43775, 43848</p> <p><u>Denominator Exclusion:</u> Patients who were discharged against medical advice</p> |
| Reporting Frequency: | Quarterly |
| Unit of Measure: | % complication rate |
| International comparison if available | Developed locally by modifying similar indicators used by MBSAQIP |
| Desired direction: | Lower is better |
| Notes for all providers | |
| Data sources and guidance: | Hospital patient data source, bariatric registry |

Bariatric Surgery JAWDA Performance Indicators

Type: BS Quality Indicator

Indicator Number: BS018

| | |
|--|--|
| KPI Description (title): | Death Rate within 30 days from Sleeve Gastrectomy Bariatric Surgery. |
| Domain | <i>Safety</i> |
| Indicator Type | <i>Outcome</i> |
| Definition: | Rate of death within 30 days following the principal bariatric surgery among Sleeve Gastrectomy patients (18 years or older). |
| Calculation: | <p><u>Numerator:</u> Total number of patients (18 years or older) who have undergone bariatric Sleeve Gastrectomy and died within 30 days of the surgery.</p> <p><u>Denominator:</u> Total number of patients (18 years or older) who have undergone Sleeve Gastrectomy bariatric surgery during the reporting period.</p> <p>Sleeve Gastrectomy CPT Code: 43775, 43848</p> <p><u>Denominator Exclusion:</u> Patients who were discharged against medical advice</p> |
| Reporting Frequency: | Quarterly |
| Unit of Measure: | % Performance |
| International comparison if available | Developed locally by modifying similar indicators used by AHRQ, OECD, CQC, and MBSAQIP |
| Desired direction: | Lower is better |
| Notes for all providers | |
| Data sources and guidance: | Hospital patient data source, bariatric registry |

Bariatric Surgery JAWDA Performance Indicators

Type: BS Quality Indicator

Indicator Number: BS019

| | |
|---------------------------------|---|
| KPI Description (title): | Rate of Patient Complications within 30 days from Adjustable Gastric Banding Bariatric surgery. |
| Domain | <i>Safety</i> |
| Indicator Type | <i>Outcome</i> |
| Definition: | Rate of medical/surgical complications among Adjustable Gastric Banding Bariatric surgery patients (18 years or older) within 30 days of the surgery date. |
| Calculation: | <p><u>Numerator:</u> Total number of patients (18 years or older) who have undergone elective Adjustable Gastric Banding Bariatric surgery and had complications within 30 days of the surgery date.</p> <p>The 30-day timeframe: The date the patient exits the OR is POD0, etc (See Appendix A for applicable codes)</p> <p>Inclusion Criteria:</p> <ul style="list-style-type: none"> • Unplanned admission to ICU • Surgical Site Infection: Superficial, deep incisional or organ space • Pneumonia • Unplanned intubation • PE/DVT requiring therapy • Prolonged ventilation (>48hrs) • Progressive renal insufficiency (rise in creatinine >2mg/dl from the most recent preoperative creatinine value with no requirement of post-operative dialysis. • Acute Renal failure requiring post-operative dialysis in patients who did not require dialysis within two weeks prior to surgery and subsequently have worsening renal function post-operatively requiring dialysis. • Confirmed stroke diagnosis • Cardiac arrest requiring CPR • Myocardial Infarction (MI) • Blood transfusion within 72hrs of surgery start time • Sepsis and septic shock • Bowel obstruction with or without surgical intervention • GI Bleeding requiring transfusion or other surgical intervention • Ulcer • Bowel perforation requiring surgical intervention • Stricture Urinary Tract Infection • Outpatient or ED treatment for dehydration requiring fluids • Anastamotic or staple line leak with or without surgical intervention • Any other unplanned return to OR <p><u>Denominator:</u> Total number of patients (18 years or older) who have undergone elective Adjustable Gastric Banding Bariatric surgery during the reporting period.</p> <p>CPT Codes: 43770, 43771</p> <p><u>Denominator Exclusion:</u> Patients who were discharged against medical advice</p> |
| Reporting Frequency: | Quarterly |
| Unit of Measure: | Percentage |

Bariatric Surgery JAWDA Performance Indicators

| | |
|--|---|
| International comparison if available | Developed locally by modifying similar indicators used by MBSAQIP |
| Desired direction: | Lower is better |
| Notes for all providers | |
| Data sources and guidance: | Hospital patient data source, bariatric registry |

Type: BS Quality Indicator

Indicator Number: BS020

| | |
|--|---|
| KPI Description (title): | Unplanned Hospital Readmission within 30 days of the Adjustable Gastric Banding Bariatric Surgery |
| Domain | <i>Effectiveness</i> |
| Indicator Type | <i>Outcome</i> |
| Definition: | Percentage of unplanned readmissions for adult patients (18 years and older) after discharge from the index Adjustable Gastric Banding discharge. All related and unrelated readmissions should be included. Please indicate whether each readmission is related or unrelated in the notes section |
| Calculation: | <p>Numerator: Total number of Adjustable Gastric Banding patients (18 years or older) who had an unplanned hospital readmission within 30 days of the bariatric surgery encounter discharge date.</p> <p>Denominator: Total number of discharges (18 years or older) who have undergone elective Adjustable Gastric Banding Bariatric surgery during the reporting period.</p> <p>CPT Codes: 43770, 43771</p> <p>Denominator Exclusion: Patients who were discharged against medical advice</p> |
| Reporting Frequency: | Quarterly |
| Unit of Measure: | % complication rate |
| International comparison if available | Developed locally by modifying similar indicators used by MBSAQIP |
| Desired direction: | Lower is better |
| Notes for all providers | |
| Data sources and guidance: | Hospital patient data source, bariatric registry |

Bariatric Surgery JAWDA Performance Indicators

Type: BS Quality Indicator

Indicator Number: BS021

| | |
|--|---|
| KPI Description (title): | Death Rate within 30 days from Adjustable Gastric Banding Bariatric Surgery. |
| Domain | <i>Safety</i> |
| Indicator Type | <i>Outcome</i> |
| Definition: | Rate of death within 30 days following the principal bariatric surgery among Adjustable Gastric Banding patients (18 years or older). |
| Calculation: | <p><u>Numerator:</u> Total number of patients (18 years or older) who have undergone Adjustable Gastric Banding bariatric surgery and died within 30 days of the surgery.</p> <p><u>Denominator:</u> Total number of patients (18 years or older) who have undergone Adjustable Gastric Banding bariatric surgery during the reporting period.</p> <p><i>CPT Codes: 43770, 43771</i></p> <p><u>Denominator Exclusion:</u> Patients who were discharged against medical advice</p> |
| Reporting Frequency: | Quarterly |
| Unit of Measure: | % Performance |
| International comparison if available | Developed locally by modifying similar indicators used by AHRQ, OECD, CQC, and MBSAQIP |
| Desired direction: | Lower is better |
| Notes for all providers | |
| Data sources and guidance: | Hospital patient data source, bariatric registry |

Bariatric Surgery JAWDA Performance Indicators

Appendix A: Complications ICD-10 and CPT Codes: (Not limited to)

| Complications | ICD-10 CM | CPT / NOTES for Review |
|--|---|--|
| Surgical Site Infection: Superficial, or Deep Incisional, or Organ/Space With: Oral or IV antibiotic therapy - No requirement for intervention or Return to OR. | T81.4XXA, T81.4XXD, T81.4XXS, K95.01, K95.81 | N/A |
| Pneumonia | J12.0, J12.1, J12.2, J12.81, J12.89, J12.9, J13, J14, J15.0, J15.1, J15.3, J15.4, J15.20, J15.211, J15.212, J15.29, J15.3, J15.4, J15.5, J15.6, J15.7, J15.8, J15.9, J16.0, J16.8, J17, J18.0, J18.1, J18.2, J18.8, J18.9, J84.111, J84.113, J84.116, J84.117, J84.2, J85.1, J95.851, J95.4 | N/A |
| Unplanned Intubation | J96.0 - J96.9 | 31500, 94660 - 94662 |
| Venous Thromboembolism (VTE) or Pulmonary Embolus (PE) requiring therapy. With: Oral, subcutaneous, or IV antithrombotic therapy Or Embolectomy or placement of inferior vena cava filter | VTE: I80.201, I80.202, I80.203, I80.209, , I80.211, I80.212, I80.213, I80.219, I80.221, I80.222, I80.223, I80.229, I80.231, I80.232, I80.233, I80.239, I80.291, I80.292, I80.293, I80.299, , I82.401, I82.402, I82.403, I82.409, I82.411, I82.412, I82.413, I82.419, I82.421, I82.422, I82.423, I82.429, I82.431, I82.432, I82.433, I82.439, I82.441, I82.442, I82.443, I82.449, I82.491, I82.492, I82.493, I82.499, I82.4Y1, I82.4Y2, I82.4Y3, I82.4Y9, I82.4Z1, I82.4Z2, I82.4Z3, I82.4Z9, I82.890, I82.90 PE: I26.01, I26.02, I26.09, I26.90, I26.92, I26.99 | 34001; 34051; 34101; 34111; 34151; 34201; 34203; 34401; 34421; 34451, 34471, 34490; 37619; |
| Progressive Renal Insufficiency (Rise in creatinine>2mg/dl from most recent preoperative creatinine value with no requirement for dialysis) | N17.8, N17.9 | N/A |
| Acute Renal Failure with requirement of postop hemodialysis in patients who did not require dialysis preoperatively. | N17.8, N17.9, N18.1 - N18.9, N19 | 90935; 90937; 90945; 90947 |
| Confirmed Stroke Diagnosis | I60.00, I60.01, I60.02, I60.10, I60.11, I60.12, I60.2, I60.30, I60.31, I60.32, I60.4, I60.50, I60.51, I60.52, I60.6, I60.7, I60.8, I60.9, I61.0, I61.1, I61.2, I61.3, I61.4, I61.5, I61.6, I61.8, I61.9, I62.00, I62.01, I62.02, I62.03, I62.1, I62.9, I63.00, I63.011, I63.012, I63.013, I63.019, I63.02, I63.031, I63.032, I63.033, I63.039, I63.09, I63.10, I63.111, I63.112, I63.113, I63.119, I63.12, I63.131, I63.132, I63.133, I63.139, I63.19, I63.20, I63.211, I63.212, I63.213, I63.219, I63.22, I63.231, I63.232, I63.233, I63.239, I63.29, I63.30, I63.311, I63.312, I63.313, I63.319, I63.321, I63.322, I63.323, I63.329, I63.331, I63.332, I63.333, I63.339, I63.341, I63.342, I63.343, I63.349, I63.39, I63.40, I63.411, I63.412, I63.413, I63.419, I63.421, I63.422, I63.423, I63.429, I63.431, I63.432, I63.433, I63.439, I63.441, I63.442, I63.443, I63.449, I63.49, I63.50, I63.511, I63.512, I63.513, I63.519, I63.521, I63.522, I63.523, I63.529, I63.531, I63.532, I63.533, I63.539, I63.541, I63.542, I63.543, I63.549, I63.59, I63.6, I63.81, I63.89, I63.9 | N/A |
| Cardiac Arrest with CPR | I46.2, I46.8, I46.9, I97.120, I97.121, I97.710, I97.711, O03.36, O03.86, O04.86, O07.36, | 92950 |

Bariatric Surgery JAWDA Performance Indicators

| | | |
|---|--|----------------------------|
| | 008.81, 029.111, 029.112, 029.113, 029.119, P29.81 | |
| Myocardial Infarction | I21.01-29; I22.1-9; I23.0-8; I25.2 | N/A |
| Blood Transfusion ≤72 hours of Surgery Start Time | <i>Coded as per documentation</i> | 36430; 36440; 36455; 36450 |
| Sepsis or Septic Shock | A41.89, A41.9 | N/A |
| Bowel Obstruction with or without surgical intervention | K56.49 - K56.609, K63.1 | 44180; 44602; 44604; 49320 |
| Gastrointestinal hemorrhage requiring transfusion or intervention | K92.2, K91.870, K91.871 | 36430; 36440; 36455; 36450 |
| Ulcer | K28 - K28.9; K56.7 | 43235, 43236, 43239, 43259 |
| Bowel Perforation requiring surgical intervention | <i>Coded as per documentation</i> | 44602; 44604; 49320 |
| Stricture with dilatation | K91.30, K91.31, K91.32, K95.89 | 43245 |
| Urinary Tract Infection | N39.0, N30.00, N30.01, N30.30, N30.31, N30.40, N30.41, N30.80 N30.81, N30.90, N30.91, N13.6, N28.85, N28.86, A18.13, N33, N34.0, N34.1, N34.2, A18.10, A18.11, A18.12, A18.13, A54.00, A54.01, A54.1, A54.21, A56.00, A56.01, A59.03, A52.75, A52.76, B37.41, B37.49, N34.0, N34.1, N34.2, T83.510A, T83.510D, T83.510S, T83.511A, T83.511D, T83.511S, T83.512A, T83.512D, T83.512S, T83.518A, T83.518D, T83.518S, T83.590A, T83.590D, T83.590S, T83.591A, T83.591D, T83.591S, T83.592A, T83.592D, T83.592S, T83.593A, T83.593D, T83.593S, T83.598A, T83.598D, T83.598S, N15.1, N15.8, N15.9, N99.511, N99.521, N99.81 | N/A |
| Outpatient or Emergency Department encounter for Dehydration with administration of IV fluids | E86.0 | 96360, 96361 |
| Anastomotic or Staple Line leak with or without surgical intervention | Z98.0; T82.533; T85.598; T85.638A, or <i>Coded as per documentation</i> | 44602, 44604, 49320 |

Summary of Changes 2025

| KPI # | Changes |
|-----------|---|
| BS01-BS12 | <ul style="list-style-type: none"> Retired old Bariatric surgery KPIs. |
| BS13-BS21 | <ul style="list-style-type: none"> Added NEW Bariatric surgery KPIs. |
| Appendix | <ul style="list-style-type: none"> Revised table of complications |