



دائرة الصحة
DEPARTMENT OF HEALTH

Bariatric Surgery Service Jawda Guidance

Version 4

Table ofContents

Executive Summary	3
About thisGuidance	4
Who is this guidance for?	4
How do I follow this guidance?	4
What are the Regulation related to this guidance?.....	4
Bariatric Surgery Quality Indicators.....	5
Rate of Patient Complications within 30 days from Gastric Bypass Bariatric surgery.....	5
Unplanned Hospital Readmission within 30 days of the Gastric Bypass Bariatric Surgery	6
Death Rate among within 30 days of the Gastric Bypass Bariatric Surgery.....	7
Rate of Patient Complications within 30 days from Sleeve Gastrectomy Bariatric Surgery	8
Unplanned Hospital Readmission within 30 days of the Sleeve Gastrectomy Bariatric Surgery.	9
Death Rate within 30 days from Sleeve Gastrectomy Bariatric Surgery.	10
Rate of Patient Complications within 30 days from Adjustable Gastric Banding Bariatric surgery.	11
Unplanned Hospital Readmission within 30 days of the Adjustable Gastric Banding Bariatric Surgery	12
Death Rate within 30 days from Adjustable Gastric Banding Bariatric Surgery.	13
Appendix A: Complications ICD-10 and CPT Codes: (Not limited to).....	14
Summary of Changes 2025	15

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 is ranging 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 pertains to the quality indicators that the Department of Health (DOH) is requiring for quarterly reporting by healthcare facilities operating bariatric surgery services in the Emirate of 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.

Issued: October 2019
Published update: Version 2, January 2020
Version 3, August 2021
Version 4, December 2024

Effective: Q1 Version 4, 2025

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 providing 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 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	Safety
Indicator Type	Outcome
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>Numerator: 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>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 • Anastomotic or staple line leak with or without surgical intervention • Any other unplanned return to OR <p>Denominator: Total number of patients (18 years or older) who have undergone elective Gastric Bypass Bariatric surgery during the reporting period.</p> <p>Denominator Inclusion:</p> <ul style="list-style-type: none"> • Primary Gastric Bypass - 43621, 43633, 43644, 43645, 43846 • Revisional Surgery- 43771, 43848

JAWDA Quarterly Guidelines for Bariatric Surgery

	Denominator Exclusion: Patients who were discharged against medical advice
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	Effectiveness
Indicator Type	Outcome
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>Numerator: 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>Denominator: Total number of discharges (18 years or older) who have undergone elective Gastric Bypass Bariatric surgery during the reporting period.</p> <p>Denominator Inclusion:</p> <ul style="list-style-type: none"> Primary Gastric Bypass - 43621, 43633, 43644, 43645, 43846 Revisional Surgery- 43771, 43848 <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

JAWDA Quarterly Guidelines for Bariatric Surgery

Type: BS Quality Indicator

Indicator Number: BS015

KPI Description (title):	Death Rate among within 30 days of the Gastric Bypass Bariatric Surgery
Domain	Safety
Indicator Type	Outcome
Definition:	Rate of death of patients aged ≥ 18 , within 30 days following the Gastric Bypass bariatric surgery
Calculation:	<p>Numerator: 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>Denominator: Total number patients (18 years or older) who have undergone a Gastric Bypass bariatric surgery during the reporting period.</p> <p>Denominator Inclusion:</p> <ul style="list-style-type: none"> • Primary Gastric Bypass - 43621, 43633, 43644, 43645, 43846 • Revisional Surgery- 43771, 43848 <p>Denominator Exclusion: 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

JAWDA Quarterly Guidelines for Bariatric Surgery

Type: BS Quality Indicator

Indicator Number: BS016

KPI Description (title):	Rate of Patient Complications within 30 days from Sleeve Gastrectomy Bariatric Surgery
Domain	Safety
Indicator Type	Outcome
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

JAWDA Quarterly Guidelines for Bariatric Surgery

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	Effectiveness
Indicator Type	Outcome
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>Numerator: 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>Denominator: 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>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

JAWDA Quarterly Guidelines for Bariatric Surgery

Type: BS Quality Indicator

Indicator Number: BS018

KPI Description (title):	Death Rate within 30 days from Sleeve Gastrectomy Bariatric Surgery.
Domain	Safety
Indicator Type	Outcome
Definition:	Rate of death within 30 days following the principal bariatric surgery among Sleeve Gastrectomy patients (18 years or older).
Calculation:	<p>Numerator: Total number of patients (18 years or older) who have undergone bariatric Sleeve Gastrectomy and died within 30 days of the surgery.</p> <p>Denominator: 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>Denominator Exclusion: 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

JAWDA Quarterly Guidelines for Bariatric Surgery

Type: BS Quality Indicator

Indicator Number: BS019

KPI Description (title):	Rate of Patient Complications within 30 days from Adjustable Gastric Banding Bariatric surgery.
Domain	Safety
Indicator Type	Outcome
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>Numerator: 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 <u>(See Appendix A for applicable codes)</u></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>Denominator: 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>Denominator Exclusion: Patients who were discharged against medical advice</p>
Reporting Frequency:	Quarterly
Unit of Measure:	Percentage

JAWDA Quarterly Guidelines for Bariatric Surgery

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	Effectiveness
Indicator Type	Outcome
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

JAWDA Quarterly Guidelines for Bariatric Surgery

Type: BS Quality Indicator

Indicator Number: BS021

KPI Description (title):	Death Rate within 30 days from Adjustable Gastric Banding Bariatric Surgery.
Domain	Safety
Indicator Type	Outcome
Definition:	Rate of death within 30 days following the principal bariatric surgery among Adjustable Gastric Banding patients (18 years or older).
Calculation:	<p>Numerator: 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>Denominator: Total number of patients (18 years or older) who have undergone 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:	% 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

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

JAWDA Quarterly Guidelines for Bariatric Surgery

	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