

Digestive System Treatments and Procedures

Texas Administrative Code

Chapter 602 -- Procedures Requiring Full Disclosure of Specific Risks and Hazards--List A

§602.3 Digestive System Treatments and Procedures

- (a) Cholecystectomy with or without common bile duct exploration.
 - (1) Pancreatitis.
 - (2) Injury to the tube between the liver and the bowel.
 - (3) Retained stones in the tube between the liver and the bowel.
 - (4) Narrowing or obstruction of the tube between the liver and the bowel.
 - (5) Injury to the bowel and/or intestinal obstruction.
- (b) Bariatric surgery.
 - (1) Failure of wound to heal or wound dehiscence (separation of wound).
 - (2) Injury to organs.
 - (3) Failure of device requiring additional surgical procedure.
 - (4) Obstructive symptoms requiring additional surgical procedure.
 - (5) Development of gallstones (Roux-En-Y).
 - (6) Development of metabolic and vitamin disorders (Roux-En-Y).
- (c) Pancreatectomy (subtotal or total).
 - (1) Pancreatitis (subtotal).
 - (2) Diabetes (total).
 - (3) Lifelong requirement of enzyme and digestive medication.
 - (4) Anastomotic leaks.
- (d) Total colectomy.
 - (1) Permanent ileostomy.
 - (2) Injury to organs.
 - (3) Infection.
- (e) Subtotal colectomy.
 - (1) Anastomotic leaks.
 - (2) Temporary colostomy.
 - (3) Infection.
 - (4) Second surgery.
 - (5) Injury to organs.
- (f) Hepatobiliary drainage/intervention including percutaneous transhepatic cholangiography, percutaneous biliary drainage, percutaneous cholecystostomy, biliary stent placement (temporary or permanent), biliary stone removal/therapy.
 - (1) Leakage of bile at the skin site or into the abdomen with possible peritonitis (inflammation of the abdominal lining and pain or if severe can be life threatening).
 - (2) Pancreatitis (inflammation of the pancreas).
 - (3) Hemobilia (bleeding into the bile ducts).
 - (4) Cholangitis, cholecystitis, sepsis (inflammation/infection of the bile ducts, gallbladder or blood).
 - (5) Pneumothorax (collapsed lung) or other pleural complications (complication involving chest cavity).
- (g) Gastrointestinal tract stenting.

- (1) Stent migration (stent moves from location in which it was placed).
 - (2) Esophageal/bowel perforation (creation of a hole or tear in the tube from the throat to the stomach or in the intestines).
 - (3) Tumor ingrowth or other obstruction of stent.
 - (4) For stent placement in the esophagus (tube from the throat to the stomach).
 - (A) Tracheal compression (narrowing of windpipe) with resulting or worsening of shortness of breath.
 - (B) Reflux (stomach contents passing up into esophagus or higher).
 - (C) Aspiration pneumonia (pneumonia from fluid getting in lungs) (if stent in lower part of the esophagus).
 - (D) Foreign body sensation (feeling like there is something in throat) (for stent placement in the upper esophagus).
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Chapter 603 -- Procedures Requiring No Disclosure of Specific Risks and Hazards--List B

§603.3 Digestive System Treatments and Procedures

- (a) Appendectomy.
- (b) Hemorrhoidectomy with fistulectomy or fissurectomy.
- (c) Hemorrhoidectomy.
- (d) Incision or excision of perirectal tissue.
- (e) Local excision and destruction of lesion, anus, and rectum.
- (f) Operations for correction of cleft palate.
- (g) Repair of inguinal or ventral hernia.
- (h) Repair and plastic operations on anus and rectum.
- (i) Colonoscopy.
- (j) Tonsillectomy with adenoidectomy.
- (k) Tonsillectomy without adenoidectomy.