

Tenth Patient Report of the National Emergency Laparotomy Audit

April 2023 to April 2024

Glossary

October 2025

Abdomen/Abdominal
Anatomical area between chest and pelvis, which contains numerous organs, including the bowe
Adhesiolysis
Surgical procedure to remove intraabdominal adhesions that often cause bowel obstruction
ASA
American Society of Anesthesiologists Physical Status score (ASA-PS)
Bowel
Part of the continuous tube starting at the mouth and finishing at the anus. It includes the stomach, small intestine, large intestine and rectum
BP
Blood pressure
BPT
Best Practice Tariff
CC
Critical Care
CFS
Clinical Frailty Scale
Colon/Colonic
Part of the large intestine
CT
Computed tomography – a very advanced form of X-ray used in diagnosis and treatment
ED
Emergency Department
Elective
In this report, refers to both to mode of hospital admission and to urgency of surgery. The timing of elective care can usually be planned to suit both patient and hospital (can be weeks to months). In contrast, urgent/emergency care usually has to take place within very short timescales (hours)
Emergency laparotomy
Opening of the abdomen to undertake emergency bowel surgery that, due to underlying conditions, must be carried out without undue delay
EmLap
Emergency laparotomy
Geriatrician
A clinician specialising in care of older patients
GI
Gastrointestinal
Hartmann's Procedure
Surgical procedure to remove part of the large bowel resulting in the formation of an end colostomy, and leaving part of the rectum in-situ
HES
Hospital Episode Statistics

High-risk
All patients are assumed to be high risk, unless the NELA risk score is less than 5% AND the patient was considered to be low risk according to clinical judgement (where documented). Therefore, either a NELA risk score of $\geq 5\%$, CFS ≥ 5 , or clinical judgement that a patient is high risk will put a patient into the high-risk category. Where the NELA risk model is incomplete and cannot be calculated, the patient will be assumed to be high risk
HQIP
Healthcare Quality Improvement Partnership
Intestine/Intestinal
Part of the bowel
Intra-abdominal
Inside the abdomen/tummy
IQR
Interquartile range – the middle 50% of observations either side of the median
Ischaemia
Loss of, or insufficient, blood supply to an affected area or organ
Laparoscopic
Keyhole surgery
LOS
Length of Stay
Median
Midpoint of all observations when ranked in order from smallest to largest
NCEPOD
National Confidential Enquiry into Patient Outcome and Deaths
NELA
National Emergency Laparotomy Audit
NEWS2
National Early Warning Score
Obstruction
Blockage of the bowel. It can be caused by a variety of conditions and can cause the bowel to burst (perforate). It has the potential to make people very unwell and can be life threatening
PEDW
Patient Episode Database of Wales
Perforation
One or more holes in the wall of the bowel. It can be caused by a variety of conditions. It has the potential to make people very unwell very quickly and can be life threatening
Perioperative
Around the time of surgery (incorporating preoperative, intraoperative and postoperative)
Peritonitis
Infection or inflammation within the abdomen, causing severe pain. It has the potential to make people very unwell very quickly and can be life threatening
Postoperative
After surgery
Preoperative
Before surgery

PRS Parsimonious Risk Score
QI Quality Improvement
RAG Red, Amber, Green
RCoA Royal College of Anaesthetists
RCS Royal College of Surgeons of England
Stoma A small opening on the surface of the abdomen created to divert faeces to the outside of the body