Clavien Dindo Grading system

Grades	Definition
Grade I	Any deviation from the normal postoperative course without the need for pharmacological treatment or surgical, endoscopic and radiological interventions Allowed therapeutic regimens are: drugs as antiemetics, antipyretics, analgetics, diuretics and electrolytes and physiotherapy. This grade also includes wound infections opened at the bedside.
Grade II	Requiring pharmacological treatment with drugs other than such allowed for grade I complications. Blood transfusionsand total parenteral nutritionare also included.
Grade III	Requiring surgical, endoscopic or radiological intervention
- IIIa	Intervention not under general anesthesia
- IIIb	Intervention under general anesthesia
Grade IV	Life-threatening complication (including CNS complications)* requiring IC/ICU-management
- IVa	single organ dysfunction (including dialysis)
- IVb	multiorgandysfunction
Grade V	Death of a patient

*brain hemorrhage, ischemic stroke, subarrachnoidalbleeding,but excluding transient ischemic attacks (TIA);IC: Intermediate care; ICU: Intensive care unit.

Grade I:

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Allowed therapeutic regimens are: drugs as antiemetics, antipyretics, analgetics, diuretics and electrolytes and physiotherapy. This grade also includes wound infections opened at the bedside.

Grade II:

Requiring pharmacological treatment with drugs other than such allowed for grade I complications. Blood transfusions and total parenteral nutrition are also included.

Grade III:

Requiring surgical, endoscopic or radiological intervention

Grade III:

Grade III-a:

intervention not under general anesthesia

Grade III-b:

intervention under general anesthesia

Grade IV:

Life-threatening complication (including CNS complications)‡ requiring IC/ICU-management

Grade IV:

Grades IVa & IVb

Grade IV-a:

single organ dysfunction (including dialysis)

Grade IV-b:

multi organ dysfunction

Grade V:

Death of a patient

Grade V:

If the patients suffers from a complication at the time of discharge, the suffix "d" (for 'disability') is added to the respective grade of complication. This label indicates the need for a follow-up to fully evaluate the complication.

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Last update: 2024/06/07 02:54

