		e 2: AEs not harmonized with CATS database	
Classification System Type of Complication (CATS classifications)	STS 4.1 ³ Complication	ECCG ⁴ Complication	NSQIP ^{5,6} Complication
C C d i o v a s c u l a r		Cardiac Arrest Requiring CPR (Cardiac)	Occurrences Cardiac Arrest Requiring CPR (CDAREST) The absence of cardiac rhythm or presence of chaodic cardiac rhythm, intraoperatively or within 30 days following surgery, which results in a cardiac arrest requiring the initiation of CPR, which includes chest compressions
G a s		Reoperation for Abdominal Bleeding (Other)	
t r o i n t		Acute Diaphragmatic Herria (Wound/Diaphragm)	
e	Clostridium Difficile Infection	Clostridium Difficile Infection	Occurrences Clostridium Difficile Colitis [OTHCDIFF]
s	Dilation of The Esophagus		Postoperative Clostridium Difficile (C.diff) Colitis
t	Indicate whether the patient required dilation of the esophagus within the		
0	postoperative period	Feeding J-tube Complication	
n		Liver Dysfunction	
a		Pancreatitis	
		Pyloromyotomy/Pyloroplasty Complication	
		Small Bowel Obstruction	
N e u r o l o g i c a l		Delirium Tremens (Neurologic/Psychiatric)	
P l u r a l	Discharged With Chest Tube Indicate whether the patient was discharged with a chest tube for persistent airleak or to drain a postoperative effusion (Discharge)		
P u m o n a r y	Discharged With Home O2 New; not using O2 pre-op (Discharge)		
		Acute Aspiration	
S y s t e m			Other postoperative surgical occurrence [PODIAG_0THER] Other postoperative surgical occurrences which are as significant and that are not covered by other postoperative outcome criteria
W o u n d	Other Infection Requiring IV Antibiotics Inidicate whether the patient experienced any other infection requiring IV antibiotics (Infection)	Other infections requiring antibiotics (Infection)	
	(Infection) Sepsis Indicate whether the patient experienced sepsis (septicema) requiring positive blood cultures in the postoperative period (Infection)	Generalized septis – CDC definition (Infection)	Decrements sepsis (DTISYSEP) Sepsis is the systemic response to infection. Report this vanable if the patient has two of the following clinical signs and symptoms of SIRS. The pase of Clinica of a for < 36 or (66 s of) HR 390 bern RR 240 branth, finical Pace CO 242 mmsg(of 3 kPa) WE 43.200 cell/mm3, <4000 cells/mm3, or 2005 immature (band) forms Anion papa actions: this is defined by better: [Na k-1], cl-1k-C3] or sensus (C20)]. If this number is greater than 16, then an anion gapa actions is present. Na Cl-1k-KC3 (or sensus) classification and the spreater han 11, then an anion gap actions is present. "If alion gap lab values are performed a your facilities lab, accertains which formulas a totube a for solar gabilence retera. And either A or B below: Clinical documentation of purulence or positive culture from any ste for which there is documentation noting the site as the acute cause of sepsis Operative Procedure. Confirmed infracted boader lengting resection purulence in the operative site, or Purulence in th
	Postoperative Packed Red Blood Cells Indicate whether the patient received packed Red Blood Cells (RBC) postoperatively (Hematology)	Central IV line infection requiring removal or antibiotics	Occurrences Bleeding Transfusions [OTHBLEED] At least 1 unit of packed or whole red blood cells given from the surgical start time up to and including 72 hours postoperatively
		Central IV line intection requiring removal or antibiotics (Infection) Intrathoracic/Intra-abdominal Abscess (Infection)	
			Occurrences Septis Shock [OTHSESHOCK] Sepsis is considered severe when it is associated with organ and/or circulatory dysfunction. Report this variable if the patient has the clinical signs and symptons of SIRS or septis AND documented organ and/or circulatory dysfunction