

Supplementary Online Content

Vinden C, Rangrej J, Shariff S, et al. Complications of daytime elective laparoscopic cholecystectomies performed by surgeons who had operated the night before. JAMA. doi:10.1001/jama.2013.280372

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This supplementary material has been provided by the authors to give readers additional information about their work.

eTable 1. Checklist of Recommendations for Reporting of Observational Studies Using the STROBE (STrengthening the Reporting of OBservational studies in Epidemiology) Guidelines

	Item No	Recommendation	Reported
Title and abstract			
Title and abstract	1	(a) Indicate the study's design with a commonly used term in the title or the abstract	abstract
		(b) Provide in the abstract an informative and balanced summary of what was done and what was found	abstract
Introduction			
Background/rationale	2	Explain the scientific background and rationale for the investigation being reported	introduction
Objectives	3	State specific objectives, including any prespecified hypotheses	introduction
Methods			
Study design	4	Present key elements of study design early in the paper	methods
Setting	5	Describe the setting, locations, and relevant dates, including periods of recruitment, exposure, follow-up, and data collection	methods
Participants	6	(a) Give the eligibility criteria, and the sources and methods of selection of participants. Describe methods of follow-up	methods
		(b) For matched studies, give matching criteria and number of exposed and unexposed	methods
Variables	7	Clearly define all outcomes, exposures, predictors, potential confounders, and effect modifiers. Give diagnostic criteria, if applicable	methods
Data sources/ measurement	8	For each variable of interest, give sources of data and details of methods of assessment (measurement). Describe comparability of assessment methods if there is more than one group	methods
Bias	9	Describe any efforts to address potential sources of bias	methods
Study size	10	Explain how the study size was arrived at	methods
Quantitative variables	11	Explain how quantitative variables were handled in the analyses. If applicable, describe which groupings were chosen and why	methods
		(a) Describe all statistical methods, including those used to control for confounding	methods
		(b) Describe any methods used to examine subgroups and interactions	not applicable
Statistical methods	12	(c) Explain how missing data were addressed	not applicable
		(d) If applicable, explain how loss to follow-up	not applicable

eTable 1. continued

	No	Recommendation	Reported
		was addressed	
		(e) Describe any sensitivity analyses	not applicable
Results			
		(a) Report numbers of individuals at each stage of study—e.g. numbers potentially eligible, examined for eligibility, confirmed eligible, included in the study, completing follow-up, and analysed	results
Participants	13	(b) Give reasons for non-participation at each stage	results
		(c) Consider use of a flow diagram	not applicable
		(a) Give characteristics of study participants (e.g. demographic, clinical, social) and information on exposures and potential confounders	table 1
Descriptive data	14	(b) Indicate number of participants with missing data for each variable of interest	not applicable
		(c) Summarise follow-up time (e.g. average and total amount)	not applicable
Outcome data	15	Report numbers of outcome events or summary measures over time	results, table 2
		(a) Give unadjusted estimates and, if applicable, confounder-adjusted estimates and their precision (e.g. 95% confidence interval). Make clear which confounders were adjusted for and why they were included	results, table 2
Main results	16	(b) Report category boundaries when continuous variables were categorized	table 1
		(c) If relevant, consider translating estimates of relative risk into absolute risk for a meaningful time period	not applicable
Other analyses	17	Report other analyses done—e.g. analyses of subgroups and interactions, and sensitivity analyses	not applicable
Discussion			
Key results	18	Summarise key results with reference to study objectives	discussion
Limitations	19	Discuss limitations of the study, taking into account sources of potential bias or imprecision. Discuss both direction and magnitude of any potential bias	discussion
Interpretation	20	Give a cautious overall interpretation of results considering objectives, limitations, multiplicity of analyses, results from similar studies, and other relevant evidence	discussion
Generalizability	21	Discuss the generalizability (external validity) of the study results	discussion
Other information			
Funding	22	Give the source of funding and the role of the funders for the present study and, if applicable, for the original study on which the present article is based	cover page

eTable 2. Administrative Healthcare Database Codes Used in This Study:
Cholecystectomy

One of the following CCI codes with CIHI-DAD or CIHI-SDS variable inatstat = c (indicating that the surgery was converted to open)^a:

Code	Code type	Code description
1OD89DA	CCI	Excision total, gallbladder endoscopic [laparoscopic] approach without extraction (of calculi) cholecystectomy alone
1OD89DTAG	CCI	Excision total, gallbladder endoscopic [laparoscopic] approach with extraction (of calculi) from bile ducts using laser probe
1OD89DTAM	CCI	Excision total, gallbladder endoscopic [laparoscopic] approach with extraction (of calculi) from bile ducts using basket device
1OD89DTAS	CCI	Excision total, gallbladder endoscopic [laparoscopic] approach with extraction (of calculi) from bile ducts using electrohydraulic probe
1OD89DTBD	CCI	Excision total, gallbladder endoscopic [laparoscopic] approach with extraction (of calculi) from bile ducts using balloon device
1OD89DTGX	CCI	Excision total, gallbladder endoscopic [laparoscopic] approach with extraction (of calculi) from bile ducts using device NEC [e.g. forceps, metal probe]
1OD89EC	CCI	Excision total, gallbladder endoscopic [laparoscopic] approach cholecystectomy with bile duct exploration and no stones extracted
1OD89LA	CCI	Excision total, gallbladder open approach without extraction of calculi cholecystectomy alone
1OD89SMAG	CCI	Excision total, gallbladder open approach with extraction (of calculi) from bile ducts using laser probe
1OD89SMAM	CCI	Excision total, gallbladder open approach with extraction (of calculi) from bile ducts using basket device
1OD89SMAS	CCI	Excision total, gallbladder open approach with extraction (of calculi) from bile ducts using electrohydraulic probe
1OD89SMBD	CCI	Excision total, gallbladder open approach with extraction (of calculi) from bile ducts using balloon device
1OD89SMGX	CCI	Excision total, gallbladder open approach with extraction (of calculi) from bile ducts using device NEC [e.g. forceps, metal probe]
1OD89TP	CCI	Excision total, gallbladder open approach cholecystectomy with bile duct exploration and no stones extracted

Abbreviations: CIHI-DAD, Canadian Institute for Health Information Discharge Abstract Database; CIHI-SDS, Canadian Institute for Health Information Same Day Surgery; CCI, Canadian Classification of Health Interventions.

^aPlease note that the correct coding of a laparoscopic surgery converted to an open surgery includes a laparoscopic code accompanied by the inatstat = c variable; however, the incorrect coding using the open code accompanied by the inatstat = c variable is sometimes used, so we also used this to ensure that we capture all possible outcomes of conversion.

**eTable 3. Administrative Healthcare Database Codes Used in This Study:
Cholecystectomy: Outcome of Iatrogenic Injuries**

Evidence of at least one of the following codes:

Code	Code type	Code description
T812	ICD-10 CM	Accidental puncture and laceration during a procedure, not elsewhere classified
Y600	ICD-10 CM	Unintentional cut, puncture, perforation or haemorrhage during surgical operation

Abbreviations: ICD-10 CM, the 10th edition of the Canadian Modified International Classification of Disease system.

**eTable 4. Administrative Healthcare Database Codes Used in This Study:
Cholecystectomy: Baseline Covariate of Morbid Obesity**

Evidence of at least one of the following codes:

Code	Code type	Code description
E676	OHIP Feecode	Morbidly obese patient; the patient has a Body Mass Index (BMI) greater than 40 ^a for major surgery on the peritoneal cavity, pelvis, retroperitoneum and hip
E010C ^b	OHIP Feecode	Patient with body mass index (BMI) > 40 ^c

Abbreviations: BMI, body mass index; OHIP, Ontario Health Insurance Plan.

^aSeptember 1st 2011 this was changed from BMI > 45 to BMI > 40.

^bOctober 1st, 2010 this was changed from BMI > 45 to BMI > 40

^cFeecodes with a 'C' suffix are billed by anesthesiologists

eTable 5. Administrative Healthcare Database Codes Used in This Study:
Cholecystectomy: Baseline Covariate of Acute Pancreatitis

Evidence of the following code:

Code	Code type	Code description
K85	ICD-10 CM	Acute pancreatitis

Abbreviations: ICD-10 CM, the 10th edition of the Canadian Modified International Classification of Disease system.

**eTable 6. Administrative Healthcare Database Codes Used in This Study:
Cholecystectomy: Baseline Covariate of Chronic Liver Diseases**

Evidence of at least one of the following codes:

Code	Code type	Code description
4561	ICD-9 CM	Esophageal varices without bleed
4562	ICD-9 CM	Bleeding esophageal varices other disorder/not elsewhere specified
070	ICD-9 CM	Hepatitis - various types with and without coma
5722	ICD-9 CM	Hepatic coma
5723	ICD-9 CM	Portal hypertension
5724	ICD-9 CM	Hepatorenal syndrome
5728	ICD-9 CM	Other sequela, chronic liver disease
573	ICD-9 CM	Chronic passive congestive liver/hepatitis in viral disorder/hepatitis other/hepatitis not elsewhere specified /hepatic infraction/ liver disorder not elsewhere specified
7824	ICD-9 CM	Jaundice not elsewhere specified
V026	ICD-9 CM	Viral hepatitis carrier
571	ICD-9 CM	Cirrhosis of the liver, e.g. alcoholic cirrhosis
2750	ICD-9 CM	Disorder of iron metabolism
2751	ICD-9 CM	Disorder of copper metabolism
7891	ICD-9 CM	Hepatomegaly
7895	ICD-9 CM	Ascites
B16	ICD-10 CM	Acute hepatitis B
B17	ICD-10 CM	Other acute viral hepatitis
B18	ICD-10 CM	Chronic viral hepatitis
B19	ICD-10 CM	Unspecified viral hepatitis
I85	ICD-10 CM	Esophageal varices
R17	ICD-10 CM	Unspecified jaundice
R18	ICD-10 CM	Ascites
R160	ICD-10 CM	Hepatomegaly, not elsewhere classified
R162	ICD-10 CM	Hepatomegaly with splenomegaly, not elsewhere classified
B942	ICD-10 CM	Sequelae of viral hepatitis
Z225	ICD-10 CM	Carrier of viral hepatitis (B and C)
E831	ICD-10 CM	Disorder of iron metabolism
E830	ICD-10 CM	Disorder of copper metabolism
K70	ICD-10 CM	Alcoholic liver disease
K713	ICD-10 CM	Toxic liver disease with chronic persistent hepatitis
K714	ICD-10 CM	Toxic liver disease with chronic lobular hepatitis
K715	ICD-10 CM	Toxic liver disease with chronic active hepatitis
K717	ICD-10 CM	Toxic liver disease with fibrosis and cirrhosis of liver
K721	ICD-10 CM	Chronic hepatic failure
K729	ICD-10 CM	Hepatic failure, unspecified
K73	ICD-10 CM	Chronic hepatitis, not elsewhere classified
K74	ICD-10 CM	Fibrosis and cirrhosis of liver
K753	ICD-10 CM	Granulomatous hepatitis, not elsewhere classified
K754	ICD-10 CM	Autoimmune hepatitis
K758	ICD-10 CM	Other specified inflammatory liver diseases
K759	ICD-10 CM	Inflammatory liver disease, unspecified
K76	ICD-10 CM	Other diseases of liver
K77	ICD-10 CM	Liver disorders in diseases classified elsewhere

eTable 6. *continued*

Code	Code Type	Code description
571	OHIP diagnosis codes	Cirrhosis of the liver, e.g. alcoholic cirrhosis
573	OHIP diagnosis codes	Other diseases of the liver
070	OHIP diagnosis codes	Viral hepatitis
Z551	OHIP Feecodes	Liver-incision-biopsy, needle
Z554	OHIP Feecodes	Liver-incision-biopsy

Abbreviations: ICD-9 CM, the 9th edition of the Canadian Modified International Classification of Disease system; ICD-10 CM, the 9th edition of the Canadian Modified International Classification of Disease system; OHIP, Ontario Health Insurance Plan.

**eTable 7. Administrative Healthcare Database Codes Used in This Study:
Cholecystectomy: Baseline Covariate of Previous Abdominal Surgery**

Evidence of at least one of the following codes:

Code	Code type	Code description
R905	OHIP Feecode	Haemic & lymphatic - spleen & marrow - excision - splenectomy - partial or complete
S080	OHIP Feecode	Digestive - oesophagus - incision - oesophageal-gastric devascularisation (including splenectomy and oesophageal division/anastomosis)
S090	OHIP Feecode	Digestive - oesophagus - excision - total thoracic oesophageal resection
S091	OHIP Feecode	Digestive - oesophagus - repair - oesophageal hiatus hernia repair - abdominal or transthoracic approach with fundal plication
S092	OHIP Feecode	Digestive - oesophagus - repair - recurrent oesophageal hiatus hernia
S095	OHIP Feecode	Digestive - oesophagus - repair - oesophageal stricture (thal) - may include oesophageal hiatus hernia repair w/ or w/o gastroplasty
S096	OHIP Feecode	Digestive - oesophagus - repair - ruptured oesophagus, suture and drainage
S097	OHIP Feecode	Digestive - oesophagus - repair - oesophago-gastrostomy for bypass (when sole procedure performed)
S098	OHIP Feecode	Digestive - oesophagus - repair - oesophageal bypass, abdomen to neck - with stomach
S099	OHIP Feecode	Digestive - oesophagus - repair - oesophageal bypass, abdomen to neck - with colon or jejunum
S100	OHIP Feecode	Digestive - oesophagus - repair - total thoracic oesophageal myotomy when sole procedure performed
S104	OHIP Feecode	Repair of esophageal atresia with or without tracheal fistula
S116	OHIP Feecode	Digestive - stomach - incision - gastrotomy - with removal of tumour or foreign body
S117	OHIP Feecode	Digestive - stomach - incision - pyloromyotomy (ramstedt's)
S118	OHIP Feecode	Digestive - stomach - incision - gastrostomy
S120	OHIP Feecode	Digestive - stomach - gastrectomy - gastric bypass or partition, for morbid obesity
S121	OHIP Feecode	Digestive - stomach - gastrectomy - transabdominal vagotomy after previous vagotomy
S122	OHIP Feecode	Digestive - stomach - gastrectomy - wedge resection for ulcer
S123	OHIP Feecode	Digestive - stomach - gastrectomy - partial or subtotal - distal
S124	OHIP Feecode	Digestive - stomach - gastrectomy - vagotomy - highly selective (as sole procedure without pyloroplasty or gastroenterostomy)
S125	OHIP Feecode	Digestive - stomach - gastrectomy - partial or subtotal - proximal
S129	OHIP Feecode	Digestive - stomach - gastrectomy - conversion of previous gastrectomy to roux-en-y
S131	OHIP Feecode	Digestive - stomach - gastrectomy - vagotomy - truncal or selective
S132	OHIP	Digestive - stomach - repair - pyloroplasty

eTable 7. continued

Code	Code type	Code description
	Feecode	
S133	OHIP Feecode	Digestive - stomach - repair - pyloroplasty and vagotomy
S134	OHIP Feecode	Digestive - stomach - repair - gastroduodenostomy or gastrojejunostomy
S137	OHIP Feecode	Digestive - stomach - repair - pyloroplasty or gastroenterostomy plus vagotomy and cholecystectomy
S138	OHIP Feecode	Digestive - stomach - suture - closure of gastrostomy or other external fistula of stomach
S139	OHIP Feecode	Digestive - stomach - suture - gastrorrhaphy (for perforated gastric or duodenal ulcer or wound)
S140	OHIP Feecode	Digestive - stomach - suture - closure of gastrocolic fistula
S149	OHIP Feecode	Digestive - intestines (except rectum) - incision - enterotomy - ileostomy
S150	OHIP Feecode	Digestive - intestines (except rectum) - incision - enterotomy - small intestine - including excision of polyps or biopsy
S151	OHIP Feecode	Digestive - intestines (except rectum) - incision - enterotomy - insertion of feeding enterostomy
S154	OHIP Feecode	Digestive - intestines (except rectum) - incision - enterotomy - large intestine - including excision of polyps
S155	OHIP Feecode	Digestive - intestines (except rectum) - incision - colonoscopy with laparotomy
S156	OHIP Feecode	Digestive - intestines (except rectum) - incision - enterotomy - exteriorization of intestine (mickulicz)
S157	OHIP Feecode	Digestive - intestines (except rectum) - incision - colostomy
S158	OHIP Feecode	Digestive - intestines (except rectum) - incision - caecostomy
S159	OHIP Feecode	Digestive - meckel's diverticulum - excision - meckel's diverticulum - with small bowel resection
S160	OHIP Feecode	Digestive - intestines (except rectum) - incision - entero-enterostomy
S162	OHIP Feecode	Digestive - intestines (except rectum) - excision - local excision of lesion of intestine
S164	OHIP Feecode	Digestive - intestines (except rectum) - excision - small intestine - duodenum
S165	OHIP Feecode	Digestive - intestines (except rectum) - excision - resection with anastomosis - small intestine - other than duodenum
S166	OHIP Feecode	Digestive - intestines (except rectum) - excision - small and large intestine terminal ileum, cecum and ascending colon (right hemicolectomy)
S167	OHIP Feecode	Digestive - intestines (except rectum) - excision - resection with anastomosis - large intestine - any portion
S168	OHIP Feecode	Digestive - intestines (except rectum) - excision - ileostomy, subtotal colectomy
S169	OHIP Feecode	Digestive - intestines (except rectum) - excision - total colectomy with ileo-rectal anastomosis
S170	OHIP Feecode	Digestive - intestines (except rectum) - excision - ileostomy plus total colectomy plus abdomino-perineal resection
S171	OHIP Feecode	Digestive - intestines (except rectum) - excision - left hemicolectomy with anterior resection or proctosigmoidectomy (anastomosis below

eTable 7. continued

Code	Code type	Code description
		peritoneal reflection & mobilization of splenic flexure)
S172	OHIP Feecode	Digestive - intestines (except rectum) - excision - total colectomy with mucosal proctectomy with ileal pouch, ileoanal anastomosis and loop ileostomy
S173	OHIP Feecode	Digestive - intestines (except rectum) - excision - two-surgeon team - abdominal
S174	OHIP Feecode	Digestive - intestines (except rectum) - excision - two-surgeon team - perineal
S175	OHIP Feecode	Digestive - intestines (except rectum) - excision - intestinal obstruction (mechanical) - one stage - without resection
S176	OHIP Feecode	Digestive - intestines (except rectum) - excision - intestinal obstruction (mechanical) - one stage - with entero-enterostomy
S177	OHIP Feecode	Digestive - intestines (except rectum) - excision - intestinal obstruction (mechanical) - one stage - with resection
S178	OHIP Feecode	Digestive - intestines (except rectum) - excision - intestinal atresia (newborn)
S179	OHIP Feecode	Digestive - intestines (except rectum) - excision - meconium ileus
S180	OHIP Feecode	Digestive - intestines (except rectum) - excision - intestinal obstruction (mechanical) - one stage - with enterotomy
S181	OHIP Feecode	Digestive - intestines (except rectum) - repair - revision of ileostomy or colostomy - skin level
S182	OHIP Feecode	Digestive - intestines (except rectum) - repair - revision of ileostomy or colostomy - full thickness
S183	OHIP Feecode	Digestive - intestines (except rectum) - repair - caecopexy or sigmoidopexy when sole procedure performed
S184	OHIP Feecode	Digestive - intestines (except rectum) - suture - suture of intestine
S185	OHIP Feecode	Digestive - intestines (except rectum) - suture - closure of colostomy or enterostomy - with or without resection and/or anastomosis
S187	OHIP Feecode	Digestive - intestines (except rectum) - suture - plication of small intestine for adhesions
S188	OHIP Feecode	Digestive - intestines (except rectum) - excision - bowel resection without anastomosis (colostomy and mucous fistula)
S189	OHIP Feecode	Digestive - intestines (except rectum) - excision - intestinal bypass for morbid obesity
S191	OHIP Feecode	Digestive - intestines (except rectum) - repair - complete reconstruction of continent ileostomy to include valve repair
S192	OHIP Feecode	Digestive - intestines (except rectum) - repair - simple revision of continent ileostomy pouch
S193	OHIP Feecode	Digestive - intestines (except rectum) - repair - revision of standard ileostomy into continent ileostomy pouch
S194	OHIP Feecode	Digestive - meckel's diverticulum - excision - meckel's diverticulum
S195	OHIP Feecode	Digestive - mesentery - excision - local excision of lesion
S196	OHIP Feecode	Multivisceral transplant - donor
S197	OHIP Feecode	Multivisceral transplant - recipient, without evisceration
S199	OHIP Feecode	Digestive - mesentery - excision - resection of mesentery

eTable 7. continued

Code	Code type	Code description
S201	OHIP Feecode	Small bowel transplant - donor
S202	OHIP Feecode	Small bowel transplant - recipient
S203	OHIP Feecode	Digestive - abdomen, peritoneum & omentum - incision - insertion of peritoneo-jugular shunt for ascites - primary
S204	OHIP Feecode	Digestive - appendix - incision - drainage of abscess
S209	OHIP Feecode	Digestive - abdomen, peritoneum & omentum - incision - insertion of peritoneo-jugular shunt for ascites - revision
S213	OHIP Feecode	Digestive - rectum - excision - proctectomy - anterior resection or proctosigmoidectomy (anastomosis below peritoneal reflection)
S214	OHIP Feecode	Digestive - rectum - excision - abdomino-perineal resection or pull-through
S215	OHIP Feecode	Digestive - rectum - excision - two-surgeon team - abdominal surgeon
S216	OHIP Feecode	Digestive - rectum - excision - two surgeon team - perineal surgeon
S217	OHIP Feecode	Digestive - rectum - excision - hartmann procedure
S218	OHIP Feecode	Digestive - rectum - excision - colon reconstruction following hartmann procedure
S222	OHIP Feecode	Digestive - rectum - excision - presacral or trans-sacral proctotomy and excision of lesion
S223	OHIP Feecode	Digestive - rectum - repair - anastomosis of rectum
S227	OHIP Feecode	Digestive - rectum - repair - rectal prolapse - abdominal approach
S231	OHIP Feecode	Multi - suture - closure of fistula - recto vaginal (any repair)
S253	OHIP Feecode	Digestive - anus - repair - low imperforate anus repair
S265	OHIP Feecode	Living donor hepatectomy
S266	OHIP Feecode	Living donor orthotopic liver transplantation - recipient
S267	OHIP Feecode	Digestive - liver - excision - hepatectomy - formal anatomical resection of three or four liver segments
S268	OHIP Feecode	Digestive - liver - incision - insertion of implantable pump for continuous liver perfusion
S269	OHIP Feecode	Digestive - liver - excision - hepatectomy - local excision of lesion (less than 5 cm)
S270	OHIP Feecode	Digestive - liver - excision - hepatectomy - formal anatomical resection of one or two liver segments
S271	OHIP Feecode	Digestive - liver - excision - hepatectomy - formal anatomical resection of five or more liver segments
S272	OHIP Feecode	Digestive - liver - excision - laparotomy, cholangiogram and biopsy (neonatal jaundice)
S273	OHIP Feecode	Digestive - liver - repair - marsupialization and/or decompression of cyst(s) or abscess(es)
S274	OHIP Feecode	Digestive - liver - excision - liver transplant - donor

eTable 7. continued

Code	Code type	Code description
S275	OHIP Feecode	Digestive - liver - excision - hepatectomy - partial lobectomy (excision greater than 5 cm)
S276	OHIP Feecode	Digestive - biliary tract - incision - choledochotomy (previous cholecystectomy)
S278	OHIP Feecode	Digestive - biliary tract - incision - cholecystostomy
S280	OHIP Feecode	Digestive - biliary tract - incision - transduodenal sphincterotomy and choledochotomy (previous cholecystectomy)
S281	OHIP Feecode	Digestive - biliary tract - incision - choledochoduodenostomy or choledochoenterostomy or choledochocholeochostomy
S282	OHIP Feecode	Digestive - biliary tract - incision - cholecystogastrostomy
S283	OHIP Feecode	Digestive - biliary tract - incision - cholecystoenterostomy
S285	OHIP Feecode	Digestive - biliary tract - incision - intrahepatic choledochoenterostomy (anastomosis above the common hepatic duct bifurcation)
S291	OHIP Feecode	Digestive - biliary tract - excision - choledochectomy for tumour (for reconstruction, refer to s281)
S292	OHIP Feecode	Digestive - biliary tract - repair - common duct stricture, dissection and/or resection (for reconstruction, refer to s281)
S293	OHIP Feecode	Digestive - biliary tract - repair - Biliary duct atresia, infant
S294	OHIP Feecode	Digestive - liver - excision - liver transplant - recipient
S295	OHIP Feecode	Digestive - liver - excision - repeat liver transplant
S297	OHIP Feecode	Digestive - pancreas - incision - drainage of acute pancreatitis or abscess or marsupialization of cyst
S298	OHIP Feecode	Digestive - pancreas - excision - pancreatectomy - complete with splenectomy
S299	OHIP Feecode	Pancreatectomy-distal-body, tail with preservation of spleen, with or without anastomosis
S300	OHIP Feecode	Digestive - pancreas - excision - pancreatectomy - "whipple type" procedure
S301	OHIP Feecode	Digestive - pancreas - excision - pancreatectomy - local complete excision of tumour or lesion
S303	OHIP Feecode	Pancreas Transplant - back-bench pancreas graft preparation
S304	OHIP Feecode	Digestive - pancreas - repair - lateral pancreatoduodenostomy or anastomosis of filleted pancreatic duct to intestine (puestow)
S305	OHIP Feecode	Digestive - pancreas - repair - pancreatic cyst - gastrostomy
S306	OHIP Feecode	Digestive - pancreas - repair - pancreatic cyst - duodenostomy
S307	OHIP Feecode	Digestive - pancreas - repair - pancreatic cyst - jejunostomy
S308	OHIP Feecode	Pancreas Transplant - pancreas transplantation
S309	OHIP Feecode	Digestive - pancreas - excision - pancreatectomy - distal - body, tail with or without splenectomy with or without anastomosis
S312	OHIP Feecode	Digestive - abdomen, peritoneum & omentum - incision - laparotomy, with or without biopsy or for hirschsprung's disease (except biopsies of

eTable 7. continued

Code	Code type	Code description
		stomach, liver, pancreas and multiple para-aortic lymph nodes)
S313	OHIP Feecode	Digestive - abdomen, peritoneum & omentum - incision - peritoneal abscess - subphrenic
S314	OHIP Feecode	Digestive - abdomen, peritoneum & omentum - incision - peritoneal abscess - abdominal
S316	OHIP Feecode	Digestive - abdomen, peritoneum & omentum - excision - excision of full thickness abdominal wall tumour and primary closure
S319	OHIP Feecode	Digestive - abdomen, peritoneum & omentum - excision - mesenteric cyst
S321	OHIP Feecode	Digestive - abdomen, peritoneum & omentum - incision - laparotomy for acute trauma
S325	OHIP Feecode	Digestive - abdomen, peritoneum & omentum - repair - omentopexy, sole operative procedure
S340	OHIP Feecode	Digestive - abdomen, peritoneum & omentum - repair - ventral hernia repair - post-operative
S343	OHIP Feecode	Digestive - abdomen, peritoneum & omentum - suture - secondary closure for evisceration - sole operative procedure in abdomen
S344	OHIP Feecode	Digestive - abdomen, peritoneum & omentum - repair - massive incisional hernia repair
S346	OHIP Feecode	Congenital Diaphragmatic hernia - primary or first stage repair
S347	OHIP Feecode	Congenital Diaphragmatic hernia - secondary
S348	OHIP Feecode	Omphalocele or gastroschisis repair primary or first stage repair
S349	OHIP Feecode	Omphalocele or gastroschisis - second repair
S525	OHIP Feecode	Multi - bladder - suture - closure of fistula - vesicorectal or vesicosigmoid

Abbreviations: OHIP, Ontario Health Insurance Plan.