

**AMERICAN BOARD OF UROLOGY
COMPLICATIONS NARRATIVES INSTRUCTIONS**

The Board is interested in how you approach and manage complications. **Using the Clavien classification table below as a guideline, report all complications of Grade III or higher from your practice log.** Please provide a detailed narrative description of the complication and your management using the following **MANDATORY** format. *The vast majority of candidates do experience some complications and provide narratives; however, if it is your intention to claim no complications considered Grade III or higher on the table below during your practice log period, you are required to submit a signed statement to that effect.*

COMPLICATIONS NARRATIVE

At the top of each page: Your name, diplomate number and institution: i.e., John Smith, M.D., #15361, Mercy Hospital

Patient's case #:

Age:

Gender:

Date of procedure:

Diagnosis:

Procedure(s) performed:

Brief description of complication:

Narrative: Detailed narrative description of one or more paragraphs

CLASSIFICATION OF SURGICAL COMPLICATIONS
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 such as antiemetics, antipyretics, analgesics, diuretics, 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 IIIa	Intervention not under general anesthesia.
Grade IIIb	Intervention under general anesthesia.
Grade IV	Life-threatening complication (including CNS complications)* requiring IC/ICU management.
Grade IVa	Single organ dysfunction (including dialysis).
Grade IVb	Multiorgan dysfunction.
Grade V	Death of a patient.

*Brain hemorrhage, ischemic stroke, subarachnoidal bleeding, but excluding transient ischemic attacks, CNS, central nervous system; IC, intermediate care; ICU, intensive care unit.

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Send all complications narratives with your notarized Log Verification/Notarization Statement and completed Practice Breakdown no later than the practice log deadline (courier recommended for guaranteed delivery) to:

The American Board of Urology
600 Peter Jefferson Parkway, Suite 150
Charlottesville, VA 22911