

- 10%** = If gastric retention of a test meal exceeds this threshold *4 hours* into a scintigraphic emptying study, then the study is consistent with gastroparesis.
- 10%** = If the local *H pylori* prevalence exceeds this threshold, then *H pylori* “test-and-treat” is the first-line approach in uninvestigated dyspepsia. If below this threshold, then empiric PPI therapy is warranted.
- 10%** = Hematocrit threshold to score a point for Hct drop on 48-hour Ranson’s criteria.
- 10x ULN** = If the AST exceeds this threshold in AIH, then initiate medical therapy regardless of the gamma globulin level.
- 10 mmol/L** = The goal of diuretic therapy is to induce natriuresis, defined by a spot urine sodium exceeding this threshold.
- 10 cm** = If an echinoccal liver cyst exceeds this size, then it likely requires surgery for definitive therapy due to high risk of rupture.
- 10 mm Hg** = Target pressure less than this for lower esophageal sphincter in achalasia after dilation.
- 10 to 12 cm** = If the cecum diameter exceeds this threshold in Ogilvie’s syndrome, then the risk of perforation increases significantly. Neostigmine is warranted in this setting (see Vignette 86 for details).
- 10 to 12 years** = Start annual flex sig in patients at risk for FAP.
- 10 to 30 mm Hg** = Normal resting tone of lower esophageal sphincter.
- 12 hours** = Need to get out impacted food by this time in order to minimize esophageal pressure necrosis.
- 12 mm** = Critical narrowing for esophageal dysphagia onset.
- 12 mm Hg** = If the hepatic venous pressure gradient (HVPG) exceeds this, then variceal formation is enhanced. Goal of beta blocker therapy is to reduce beneath this threshold.
- 15 years** = Consider periodic endoscopic surveillance after having a diagnosis of achalasia for this period of time.
- 15 cm** = Average distance from incisors to upper esophageal sphincter (ie, cricopharyngeus).
- 15** = Eosinophilic esophagitis is diagnosed when the density of eosinophils per high power field on microscopy of esophageal biopsies exceeds this threshold.
- 15 to 30 grams** = Target daily intake of dietary fiber for patients with chronic constipation.
- 20 mm Hg** = Goal of treatment in acute liver failure complicated by intracranial pressure (ICP) is to drop intracranial pressure below this threshold.
- 20 mg/dL** = Ceruloplasmin levels below this are sensitive (but not specific) for Wilson disease.
- 20 cm** = Average distance from incisors to aortic arch.
- 20%** = If nonpropagating high pressure waves occur in at least 20% of wet swallows during manometry, then criteria are met for diffuse esophageal spasm (see Vignette 111 for details).
- 20 to 25 years** = Start screening for colorectal cancer at this age in Lynch syndrome; also start screening foregut with side-viewing endoscopy at this age in patients with FAP.