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.