

Flatulence to Blame for Failed Laparoscopic Procedure

IOWA CITY, IA - Yesterday was a typical operating day at Holy Cross Hospital in room #12 until 1:45 p.m. The room was a [general surgery](#) room full of appendectomies and other laparoscopic procedures. Cases had been running smoothly for surgeon Dr. Emilio Anthony and anesthesiologist Dr. Rudy Williams until after [lunch](#).

Halfway into the case Williams developed increased flatulence due to infamous Taco Tuesday in the [cafeteria](#). "I thought I had things under control at first. After passing gas, my own that is... Haha, I would just take my suction Yankauer and conspicuously place it behind me. Standard practice for me."



An event at 1:45 p.m. would change everything during a laparoscopic umbilical hernia repair.

"By far the quietest and longest one that I have ever produced came out," said Williams. "The suction was maxed out but just couldn't keep up." Dr. Anthony was the first to recognize the smell. "Dammit, I must have nicked bowel." After running the bowel, Anthony found no nick, but the hideous smell was still lingering. "I had to open to find the culprit."

Williams, too far into his silence, didn't have the courage to speak up. "Listen, I was actually embarrassed. That's the only reason I didn't speak up," said Williams. After running the bowel several times, Anthony gave up and finished the procedure, still baffled. Upon closing with Steri-Strips, Williams' cover was blown, when the circulating nurse came over for room times and fainted directly behind him.

"I had to say something about it now. It was a final wakeup call for me to confess and to see a [gastroenterologist](#)," said Williams. Dr. Williams was placed on administrative duty by hospital officials, in a well-ventilated negative pressure

room until further notice.