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We think that the idea of a 2 mg/dL threshold is brilliant, and measuring the biomarker when the complication is already suspected, perhaps it can be done before patients discharge to make it safer or to keep the patient for further studies.

Leaving on a side the discussions about different cuts-off and different methods of making the biomarkers measurement more efficient in predicting complications, the message that should come up is: biomarkers can help the surgeon in his/her daily practice, improving patients outcomes.

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