

PF01-General Information, Demographics, Medical History

Record ID _____

DEMOGRAPHICS

Social Security Number (for Greece = AMKA)

(Only Numbers in this field)

Date of Birth

Gender

- Male
 Female

Hospital

- Creta InterClinic
 Venizeleio Hospital of Heraklion Crete
 University Hospital of Larissa
 "Achilopouleio" Hospital of Volos
 Hospital of Veroia
 Ippokrateio Hospital of Thessaloniki
 "Agios Savvas" Hospital of Athens
 "Aretaieio" University Hospital of Athens
 Naval & Veterans Hospital of Athens
 BioClinic Hospital of Athens

Weight (kg)

(Only Numbers in this field)

Height (m)

(Only Numbers in this field. Use "." as decimal point)

Body Mass Index (BMI)

(This field is automatically calculated based on the values you provided above.)

Nationality

- Greek
 Other

Race

- White
 Black
 Asian
 Pacific Islander

PRIMARY PATHOLOGY

Rectal Pathology

- Rectal Carcinoma
 Benign Polyp
 Multiple Polyps

Lesion Location

- Upper Rectum
 Mid Rectum
 Lower Rectum

Lesion Distance (cm)

(Estimated Distance of Lower Border of Lesion from Anal Verge)

PRESENT MEDICAL HISTORY

ECOG Performance Status (at Admission)

- Grade 0
 Grade 1
 Grade 2
 Grade 3
 Grade 4
 Grade 5

(You can find the classification in the "Project Bookmarks" section on your left-hand side)

ASA score

- ASA I
 ASA II
 ASA III
 ASA IV
 ASA V
 ASA VI

(You can find the classification in the "Project Bookmarks" section on your left-hand side)

Co-Morbidities

	Yes	No
Diabetes Mellitus	<input type="radio"/>	<input type="radio"/>
Chronic Obstructive Restrictive Pulmonary Disease	<input type="radio"/>	<input type="radio"/>
Cardiac Failure	<input type="radio"/>	<input type="radio"/>
Hypertension	<input type="radio"/>	<input type="radio"/>
Ischaemic Heart Disease	<input type="radio"/>	<input type="radio"/>
Renal Failure	<input type="radio"/>	<input type="radio"/>
Cachexia	<input type="radio"/>	<input type="radio"/>
Active Smoker	<input type="radio"/>	<input type="radio"/>
Chronic Use of Steroids	<input type="radio"/>	<input type="radio"/>
Chronic Use of Immunosuppressants	<input type="radio"/>	<input type="radio"/>
Neo-Adjuvant Chemo- or/and Radio- Therapy	<input type="radio"/>	<input type="radio"/>
Bleeding Disorders	<input type="radio"/>	<input type="radio"/>
Treatment with Anti-coagulants	<input type="radio"/>	<input type="radio"/>

Management of Diabetes

- Dietary Restrictions
 Oral Medication
 Insulin

LABORATORY TESTS

Haemoglobin (mg/dl)

(Only Numbers in this field. Use "." as decimal point)

White Blood Cell Count (WBC)

(Only Numbers in this field)

SGOT

(Only Numbers in this field)

Serum Albumin

(Only Numbers in this field. Use "." as decimal point)

Serum Sodium (Na)

(Only Numbers in this field)

Serum Potassium (K)

(Only Numbers in this field. Use "." as decimal point)

Serum Urea

(Only Numbers in this field)

Serum Creatinine

(Only Numbers in this field. Use "." as decimal point)

PF02-Randomization

Randomization

- ARM A: Mechanical Bowel Preparation (MBP)
 ARM B: Mechanical Bowel Preparation + Oral Antibiotics (MBP+OA)

Reaction to the Regime

	Yes	No
Full Compliance with the Regime	<input type="radio"/>	<input type="radio"/>
Nausea, Vomiting	<input type="radio"/>	<input type="radio"/>
Allergic Reactions	<input type="radio"/>	<input type="radio"/>
Electrolyte Disturbance	<input type="radio"/>	<input type="radio"/>
Renal Failure	<input type="radio"/>	<input type="radio"/>

Serum Na+

(Only Numbers in this field)

Serum K+

(Only Numbers in this field. Use "." as decimal point)

Serum Urea

(Only Numbers in this field)

Serum Creatinine

(Only Numbers in this field. Use "." as decimal point)

PF03-Preoperative Data

Low Residue Diet from Day 4 Preoperatively

- Yes
- No

Was the patient in a designed Enhanced Recovery Protocol (Fast-Track)?

- Yes
- No

PF04-Intraoperative Data

Date of Surgery _____

Type of Approach

- Open
 Laparoscopic
 Conversion

Type of Incision

- Mid-Line Hyper- Hypo- Umbilical
 Mid-Line Hypo- Umbilical
 Transverse Supra-Pubic (Pfannestiel)
 Transverse Right Subcostal or at Umbilical Level
 Transverse Left Subcostal or at Umbilical Level

Length of Incision (cm) _____

(Only Numbers in this field)

Site of Specimen Extraction

- Peri-Umbilical Incision
 Transverse at Right Abdominal Wall
 Transverse at Left Abdominal Wall
 Transverse Supra-Pubic (Pfannestiel)
 Transperineal

Length of Extraction Incision (cm) _____

(Only Numbers in this field)

Intraoperative Status of Lesion (Both for Benign and Malignant Pathologies)

	Yes	No
Obstruction	<input type="radio"/>	<input type="radio"/>
Pericolic Abscess	<input type="radio"/>	<input type="radio"/>
Free Perforation	<input type="radio"/>	<input type="radio"/>

Intention to Treat

- Therapeutic with TME
 Therapeutic without TME
 Non-therapeutic with Tumor Resection

Type of Procedure

- LARR
 LARR Intersphincteric
 Classic APR
 Extralevator APR (ELAPE)
 Proctocolectomy

Anastomosis

- Yes
 No
 (If no, patient must have an end-stoma)

Localization of Anastomosis

- Ascending Colon
 Proximal Transverse
 Mid Transverse
 Distal Transverse
 Descending Colon
 Sigmoid
 Proximal Rectum
 Distal Rectum

Estimated Distance of Anastomosis from Anal Verge (cm) _____

(Only Numbers in this field)

- Pouch Construction
 Yes
 No
- Pouch Type
 Colon J Type
 Coloplasty
 Colon Side-to-End Anastomosis
 Ileal J Type
- Protective Stoma
 Yes
 No
- Protective Stoma Type
 Ileostomy
 Colostomy
- Anastomosis Fashioning
 Stapled
 Hand-sewn
- Resection of Other Organs
 Yes
 No
- If "yes", please specify:
 Uterus
 Ovaries
 Bladder
 Abdominal Wall
 Small Bowel
 Additional Large Bowel Segment
 Stomach
 Spleen
 Pancreas
 Liver Segment
 (More than one answer possible)

Intraoperative Assessment of Anastomosis

- | | Yes | No |
|----------------|-----------------------|-----------------------|
| Proctoscopy | <input type="radio"/> | <input type="radio"/> |
| Check with Air | <input type="radio"/> | <input type="radio"/> |
| Check with Dye | <input type="radio"/> | <input type="radio"/> |
- Result of Proctoscopy
 Normal
 Bleeding
 Dehiscence
- Result of Anastomotic Assessment (Dye or Air)
 Normal
 Small Leak
 Dehiscence
- Use of Drains
 Yes
 No
- How many?
 One
 Multiple
 Multiple (+ transperineal)
- Duration of Operation (from initial incision to last skin suture - mins)

 (Only Numbers in this field)

PF05-Postoperative Data

MORBIDITY (30-day)

- Yes
 No

Surgical Site Infections (SSIs)

- Yes
 No

If yes, what level?

- Superficial-Incisional
 Deep Incisional
 Organ or Space Infection
(You can find the classification in the "Project Bookmarks" section on your left-hand side)

Dindo Clavien Classification of SSI

- Grade I
 Grade II
 Grade IIIa
 Grade IIIb
 Grade IVa
 Grade IVb
 Grade V
(You can find the classification in the "Project Bookmarks" section on your left-hand side)

Treatment of SSI

- Nothing
 Conservative
 Minimally Invasive (includes radiologically guided drainage and bedside wound drainage)
 Reoperation

COMPLICATIONS

	Yes	No
Anastomotic Leak	<input type="radio"/>	<input type="radio"/>
Bleeding	<input type="radio"/>	<input type="radio"/>
Perforation	<input type="radio"/>	<input type="radio"/>
Injury of Ureter	<input type="radio"/>	<input type="radio"/>
Persisting Postoperative Ileus (>3 Days)	<input type="radio"/>	<input type="radio"/>
Urinary Infection	<input type="radio"/>	<input type="radio"/>
Wound Infection	<input type="radio"/>	<input type="radio"/>
Cardiac Failure	<input type="radio"/>	<input type="radio"/>
Arrhythmias	<input type="radio"/>	<input type="radio"/>
DVT	<input type="radio"/>	<input type="radio"/>
Myocardial Ischaemia or Infarction	<input type="radio"/>	<input type="radio"/>
Renal Failure	<input type="radio"/>	<input type="radio"/>
Respiratory Failure or Infection	<input type="radio"/>	<input type="radio"/>
Pulmonary Embolism	<input type="radio"/>	<input type="radio"/>

Pseudomembranous Colitis (C. Diff Infection)	<input type="radio"/>	<input type="radio"/>
Perineal Wound Complications	<input type="radio"/>	<input type="radio"/>
Was a toxin test performed?	<input type="radio"/> Yes <input type="radio"/> No	
Result	<input type="radio"/> Positive for C. Diff. <input type="radio"/> Negative for C. Diff.	
State the most Serious Complication	<input type="radio"/> Anastomotic Leak <input type="radio"/> Bleeding <input type="radio"/> Perforation <input type="radio"/> Injury of Ureter <input type="radio"/> Persisting Postoperative Ileus <input type="radio"/> Urinary Infection <input type="radio"/> Wound Infection <input type="radio"/> Cardiac Failure <input type="radio"/> Arrhythmias <input type="radio"/> DVT <input type="radio"/> Myocardial Ischaemia or Infarction <input type="radio"/> Renal Failure <input type="radio"/> Respiratory Failure or Infection <input type="radio"/> Pulmonary Embolism <input type="radio"/> Pseudomembranous Colitis	
Dindo Clavien Classification of most Serious Complication	<input type="radio"/> Grade I <input type="radio"/> Grade II <input type="radio"/> Grade IIIa <input type="radio"/> Grade IIIb <input type="radio"/> Grade IVa <input type="radio"/> Grade IVb <input type="radio"/> Grade V (You can find the classification in the "Project Bookmarks" section on your left-hand side)	
Treatment of Complications (most invasive one)	<input type="radio"/> Nothing <input type="radio"/> Conservative <input type="radio"/> Minimally Invasive <input type="radio"/> Reoperation	
ICU Admission	<input type="radio"/> Yes <input type="radio"/> No	
Reoperation?	<input type="radio"/> Yes <input type="radio"/> No	
Readmission?	<input type="radio"/> Yes <input type="radio"/> No	
Hospital Stay (including possible readmissions-days)	<hr/> (Only Numbers in this field)	
MORTALITY (30-Day)	<input type="radio"/> Yes <input type="radio"/> No	