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All collaborators are Pub-Med citable.

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PanSurg-Predict Database Site Registration Form Dear Colleagues,

As part of the response to COVID-19, we are collecting data on the impact of COVID-19 on surgical services worldwide.

As you are aware, our ability to deliver healthcare services will be changing rapidly in the immediate future and this will strongly affect patient morbidity and mortality.

Understanding the impact on each unit will be essential to help us model the true effects of COVID-19 on the surgical population and plan appropriate response strategies.

Thank you very much once again for agreeing to participate and your support, your help is invaluable.

Stay safe.

The PanSurg collaborative

Please complete as much information as you can below. Exact information would be preferable but if you do not have it at present, please insert an estimated number. We will send you an email to confirm the information in 3 days time so you may update your site registration with the correct numbers then.

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- Cardiff and Vale University Health Board
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- Hywel Dda University Health Board
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Hospital name

- Barnet Hospital
- Barts Hospital
- Central Middlesex Hospital
- Charing Cross Hospital
- Chase Farm Hospital
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- Great Ormond Street Hospital
- Guy's Hospital
- Hammersmith Hospital
- Harefield Hospital
- Hillingdon Hospital
- Homerton University Hospital
- King George's Hospital
- King's College Hospital
- Kingston Hospital
- Lewisham Hospital
- Moorfields Eye Hospital
- Newham University Hospital
- North Middlesex University Hospital NHS Trust
- Northwick Park Hospital
- Princess Royal University Hospital
- Queen Elizabeth Hospital
- Queen's Hospital
- Queen Mary's Hospital Sidcup
- Royal Brompton Hospital
- Royal Free London
- University College London Hospital
- Royal London Hospital
- Royal Marsden Hospital
- Royal National Orthopaedic Hospital
- St George's Hospital
- St Helier Hospital
- St Mary's Hospital
- St Thomas' Hospital
- West Middlesex University Hospital
- Whipps Cross University Hospital
- Whittington Hospital
- Other

Hospital Name

Team Name

i.e. General Surgery St Marys, Breast Surgery Charing Cross

Please confirm that you have hospital ethical approval for entering data into the PanSurg Predict Database

- Our site has ethical approval from our local institution to enter data into the PanSurg Predict Database

What specialty is the department you are registering for?

- Emergency surgery
- Colorectal surgery
- Oesophago-gastric surgery
- Hepatopancreaticobiliary surgery
- Bariatric surgery
- Vascular surgery
- General surgery
- Breast surgery
- Orthopaedic surgery
- Gynaecology & Obstetrics
- Paediatric surgery
- Maxillofacial Surgery
- ENT surgery
- Plastic surgery
- Neurosurgery
- Cardiac surgery
- Thoracic surgery
- Sarcoma and soft tissue cancer surgery
- Endocrine Surgery
- Other - please confirm below

Other specialty

Your Team PRE-COVID CRISIS

How many consultants/attending surgeons are on your surgical team rota?

How many surgical registrars/residents are on your surgical team rota?

How many junior doctors/interns are on your surgical team rota?

How many physicians associates/surgical nurse practitioners are on your surgical team rota?

Your Team since the COVID CRISIS

Has your team been restructured since the covid crisis began?

- Yes
 No

How many consultants are now on your surgical team rota?

How many registrars are now on your surgical team rota?

How many junior doctors are now on your surgical team rota?

How many physicians associates/surgical nurse practitioners are now on your surgical team rota ?

Your Hospital Facilities PRE-COVID CRISIS

Number of ITU/HDU beds in your hospital

Number of dedicated operating theatres in you hospital

Of these how many are dedicated daycase theatres?

Number of recovery beds in you hospital

Your Hospital Facilities since the COVID CRISIS

Have your facilities been restructured since the covid crisis began?

- Yes
 No

New number of ITU/HDU beds in your hospital

New number of Operating theatres in you hospital

Of these how many are dedicated daycase theatres?

New number of Recovery beds in you hospital

Lead User Details

Title

- Dr
 Prof
 Miss
 Mr
 Mrs
 Ms

First name

Surname

Email

Additional User registration

Please register other members of the team whom will be collecting data. You can consider adding generic email addresses if you have any. Please add all sprs in your team that will be oncall in your department and will be able to complete the daily surveys. We suggest this may be best completed at the start of the morning handover meeting

How many additional users at your site will be entering data to this project?

- 0
- 1
- 2
- 3
- 4
- 5
- 6
- 7
- 8
- 9
- 10
- 11
- 12
- 13

Team User 1

Title

- Dr
- Prof
- Miss
- Mr
- Mrs

First name

Surname

Email

Team User 2

Title

- Dr
- Prof
- Miss
- Mr
- Mrs

First name

Surname

Email

Team User 3

Title Dr
 Prof
 Miss
 Mr
 Mrs

First name _____

Surname _____

Email _____

Team User 4

Title Dr
 Prof
 Miss
 Mr
 Mrs

First name _____

Surname _____

Email _____

Team User 5

Title Dr
 Prof
 Miss
 Mr
 Mrs

First name _____

Surname _____

Email _____

Team User 6

Title Dr
 Prof
 Miss
 Mr
 Mrs

First name

Surname

Email

Team User 7

Title

- Dr
- Prof
- Miss
- Mr
- Mrs

First name

Surname

Email

Team User 8

Title

- Dr
- Prof
- Miss
- Mr
- Mrs

First name

Surname

Email

Team User 9

Title

- Dr
- Prof
- Miss
- Mr
- Mrs

First name

Surname

Email _____

Team User 10

Title Dr
 Prof
 Miss
 Mr
 Mrs

First name _____

Surname _____

Email _____

Team User 11

Title Dr
 Prof
 Miss
 Mr
 Mrs

First name _____

Surname _____

Email _____

Team User 12

Title Dr
 Prof
 Miss
 Mr
 Mrs

First name _____

Surname _____

Email _____

Team User 13

Title

- Dr
 Prof
 Miss
 Mr
 Mrs

First name

Surname

Email

After you select 'Submit', below, you will be asked to check if there are any missing fields in your registration.

Your registration will not be completed until all missing fields have been filled.

Exact information would be preferable but if you do not have it at present, please insert an estimated number. We will send you an email to confirm the information in 3 days time so you may update your site registration with the correct numbers then.

Thank you very much for you collaboration

The PanSurg Collaborative

Presentation

Record ID. Please record this number on your local in house file with associated local record number so that you may return to complete data collection later.

Please confirm that you have local approval for entering data into the PanSurg Predict Database

Our site has local approval to enter data into the PanSurg Predict Database

PanSurg-Predict Database Patient Presentation

Demographics

Date & time of presentation to clinic or A&E

(Please complete time to best of your ability)

Date of birth

Gender

Male
 Female
 Other

BMI

Enter Height / Weight (if known)
 Enter BMI (if known)
 Height, Weight and BMI unavailable

BMI

Height

(m)

Weight

(kg)

BMI

EthnicityFor details see this link

White (1-4)
 Mixed / Multiple Ethnic Groups' (5-8)
 Asian / Asian British (9-13)
 Black / African / Caribbean / Black British (14-16)
 Other Ethnic Group (17-18)
 Unknown

Presentation

Presentation	<input type="radio"/> Elective <input type="radio"/> Emergency
Is patient presenting with a new or suspected cancer diagnosis?	<input type="radio"/> Yes <input type="radio"/> No
Was the patient's case discussed at the Multi Disciplinary meeting?	<input type="radio"/> Yes <input type="radio"/> No
Referral or Admission Speciality	<input type="radio"/> Emergency surgery <input type="radio"/> Colorectal surgery <input type="radio"/> Oesophago-gastric surgery <input type="radio"/> Hepatopancreaticobiliary surgery <input type="radio"/> Bariatric surgery <input type="radio"/> Vascular surgery <input type="radio"/> General surgery <input type="radio"/> Paediatric surgery <input type="radio"/> Urology <input type="radio"/> Thoracic Surgery <input type="radio"/> Cardiac Surgery <input type="radio"/> Endocrine Surgery <input type="radio"/> Trauma & Orthopaedics <input type="radio"/> Trauma Surgery <input type="radio"/> Other
Date of Cancer diagnosis if applicable	_____
Date of MDT discussion if applicable	_____ (MDT = Multidisciplinary cancer panel)
TNM at time of MDT discussion/presentation if applicable	_____
MDT/clinicians decision	<input type="radio"/> Proceed to surgery <input type="radio"/> Defer surgery <input type="radio"/> Not for surgery
NHS patient categorisation if applicable	<input type="radio"/> PRIORITY LEVEL 1a: EMERGENCY operation needed within 24 hrs to save life <input type="radio"/> PRIORITY LEVEL 1b: URGENT operation needed with 72 hrs <input type="radio"/> PRIORITY LEVEL 2: ELECTIVE surgery/treatment with the expectation of cure needed within four weeks to save life/stop progression, taking into account symptoms and potential complications from lack of treatment <input type="radio"/> PRIORITY LEVEL 3: ELECTIVE surgery can be delayed for 10 to 12 weeks and will have no predicted negative outcome.
Decision to defer	<input type="checkbox"/> Not deemed sufficiently urgent according to national guidelines <input type="checkbox"/> Patient comorbidities makes admission/surgery too high risk at time of COVID-19 <input type="checkbox"/> Lack of resources (eg theatre staff/ITU bed unavailable due to COVID) <input type="checkbox"/> Other

Deferral due to comorbidities

- Diabetes
- Heart disease
- Respiratory disease
- Renal failure
- Transplant patient
- Unlikely to survive hospital acquired COVID infection
- Requires level 2-3 post-operative care
- current COVID illness
- Other

Other comorbidity causing deferral

Other decision to defer

Deferral time

- 1-3 months
- 3- 6 months
- > 6 months
- Post pandemic
- Other non defined

Paediatric Surgery presentation

- Appendicitis
- Hernia
- Intussusception
- Hypertrophic pyloric stenosis
- Testicular torsion
- Foreign body
- Oesophageal atresia
- Malrotation or Volvulus
- Hirschprung's disease
- Intestinal obstruction
- Abdominal wall defect
- Necrotising Enterocolitis
- Undescended testes
- Other

Other Paediatric Surgery presentation

Acute Surgical presentation

- Abscess
- Appendicitis
- Cholecystitis
- Biliary colic
- Obstructive jaundice
- Pancreatitis
- UGI perforation
- Lower GI perforation
- Upper GI bleed
- Bowel obstruction
- Meckel's diverticulitis
- Diverticulitis
- Lower GI Bleed
- Benign anorectal condition
- Hernia - please enter details below
- Unspecified abdominal pain
- O&G related presentation

Thoracic pathology

- Benign
- Malignant - Lung
- Malignant - Pleural
- Malignant - Secondary
- Other

Other thoracic pathology details

Endocarditis

- Yes
- No

Acute aortic syndrome

- Yes
- No

Endocrine disease

- Thyroid disease
- Parathyroid disease
- Adrenal disease

Indication for Thyroid surgery

- Biopsy result
- Clinically worrying lesion
- Completion thyroidectomy for cancer
- Compressive symptoms
- Quality of Life
- Recurrent cancer
- Recurrent cyst
- Thyroglossal cyst
- Thyrotoxicosis

Thyroid Fine Needle Aspiration biopsy Classification

- NHS
- Bethesda

Thyroid FNA biopsy - NHS classification

- Thy1 Non diagnostic
- Thy2 Non neoplastic
- Thy3a Neoplasm possible (atypical)
- Thy3f Follicular neoplasm
- Thy4 Suspicious of malignancy
- Thy5 Diagnostic of malignancy

Thyroid FNA biopsy - Bethesda classification

- I - Non-diagnostic
- II - Benign
- III - AUS/FLUS
- IV - Suspicion for follicular neoplasm
- V - Suspicion for malignancy
- VI - Malignant

Goitre size

- Cervical
- Retroclavicular
- Above Aortic arch
- Below Aortic arch

Indication for Parathyroid surgery

- Primary Hyperparathyroidism
- Hyperparathyroidism of renal origin
- Suspicion of malignancy

Corrected Calcium level (mmol/L)

Indication for Adrenal surgery

- Pheochromocytoma
 - Adrenocortical Carcinoma
 - Suspicious on imaging
 - Conn's adenoma
 - Cushing's adenoma
 - Control of Cushing's
 - Metastasis
-

Bowel obstruction

- Adhesional SB obstruction
 - Internal Hernia after bariatric surgery
 - Other hernia - see below
 - Colorectal ca
 - Volvulus
 - Benign stricture
 - Other
-

Paediatric bowel obstruction

- Duodenal Atresia
 - Jejunal-ileal atresia
 - Meconium ileus
 - Hernia
 - Other
-

Hinchey classification

- 0 - Mild clinical diverticulitis - Diverticuli ± colonic wall thickening
 - Ia - Confined pericolic inflammation or phlegmon - Colonic wall thickening with pericolic soft tissue changes
 - Ib - Ia + Pericolic or mesocolic abscess
 - II - Ia + Pelvic, distant intraabdominal, or retroperitoneal abscess
 - III - Generalized purulent peritonitis
 - IV - Generalized fecal peritonitis
-

Hernia type

- Inguinal
 - Femoral
 - Umbilical
 - Epigastric
 - Hiatus
 - Diaphragmatic
 - Ventral
 - Incisional
 - Spigellian
 - Lumbar
-

Hernia severity

- Painful uncomplicated
 - Incarcerated uncomplicated
 - Incarcerated with bowel obstruction
 - Strangulated
-

Colorectal

- Colonic cancer
 - Rectal cancer
 - Diverticular
 - IBD
 - Haemorrhoids
-

Oesophago-gastric

- Esophageal cancer
- Gastric cancer
- GORD
- Hiatal hernia
- Achalasia

Hepatopancreaticobiliary

- Liver cancer
- Pancreatic cancer
- Gallstone disease

Bariatric

- Weight loss surgery
- Postoperative complication (specific)

Vascular

- Amputation
- Lower limb revascularisation
- AAA
- TAAA
- Carotid surgery
- Aortic dissection
- Other

General

- Abdominal wall hernia non-emergent

Number of injuries

- 1
- 2
- 3
- 4
- 5
- 6
- 7
- 8
- 9
- 10

Date of injury

Underlying pathology/mechanism of injury

- Arthritis
- Cartilage damage
- Ligamentous instability
- Infection
- Foreign body
- Pathological
- Crush injury
- Trauma
- Other

Mechanism of Injury

- Blast
- Blow - Accidental
- Blow - Assault
- Burn
- Burn - chemical
- Cardiac Arrest
- Crush Injury
- Deliberate self harm
- Drowning
- Electrocution
- Fall less than 2m
- Fall more than 2m
- Hanging
- Inhalation
- Jump less than 2m
- Jump more than 2m
- One Under (train)
- Shooting - Accidental
- Shooting - Assault
- Shooting - Deliberate Self Harm
- Slashing (laceration) - Assault
- Slashing (laceration) - Accidental
- Slashing (laceration) - Self-harm
- Sports injury
- Stabbing - Accidental
- Stabbing - Assault
- Stabbing - Deliberate Self Harm
- Unknown
- Vehicle Incident/Collision - Cyclist
- Vehicle Incident/Collision - Motorcyclist
- Vehicle Incident/Collision - Mobility Vehicle
- Vehicle Incident/Collision - Passenger
- Vehicle Incident/Collision - Pedestrian
- Vehicle Incident/Collision - Vehicle driver
- DIY (do-it-yourself)/Home improvements & repairs

Trauma called

- Yes
- No

Injury 001

Area of procedure

- Cervical spine
- Scapula
- Clavicle
- Shoulder
- Humerus
- Elbow
- Radius
- Ulna
- Hand & Wrist
- Thorax & Ribs
- Thoracic spine
- Lumbosacral spine
- Pelvis/Pelvic Ring
- Acetabulum
- Femur & Hip
- Knee
- Patella
- Tibia
- Fibula
- Ankle
- Foot

T&O Area of Injury 001

- Cervical spine
- Scapula
- Clavicle
- Shoulder
- Humerus
- Elbow
- Radius
- Ulna
- Hand & Wrist
- Thorax & Ribs
- Thoracic spine
- Lumbosacral spine
- Pelvis/Pelvic Ring
- Acetabulum
- Femur & Hip
- Knee
- Patella
- Tibia
- Fibula
- Ankle
- Foot

Affected side

- Left
- Right
- Bilateral

Fracture Location

- Proximal third segment
- Diaphyseal/middle third segment
- Distal third segment

Articular involvement

- Extra-articular
- Intra-articular

 Proximal end segment

- 31A1, Simple pertrochanteric
 - 31A2, Multifragmentary pertrochanteric, lateral wall incompetent (≤ 20.5 mm)
 - 31A3, Intertrochanteric (reverse obliquity)
 - 31B1, Subcapital
 - 31B2, Transcervical
 - 31B3, Basicervical
 - 31C1, Split of femoral head
 - 31C2, Depression of femoral head
 - Subtrochanteric fracture
-

Localisation of Hand injury 001

- Lunate
 - Scaphoid
 - Capitate
 - Hamate
 - Trapezium
 - Other carpal bones
 - Metacarpals
 - Phalanges
-

Localisation of Foot injury 001

- Talus
 - Calcaneus
 - Navicular
 - Cuboid
 - Cuneiforms
 - Metatarsals
 - Phalanges
-

T&O Type of injury 001

- Non displaced fracture
 - Displaced fracture
 - Open fracture
 - Closed fracture
 - Dislocation
 - Subluxation/ligamentous instability
 - Traumatic Amputation
 - Paediatric fracture
 - None of the above
-

Pelvic Fracture Classification Injury 001

- Lateral compression
 - Anterior-Posterior compression
 - Vertical shear
 - Combined
 - Other
-

Acetabular Fracture Classification Injury 001

- Wall OR column fracture
 - Wall AND column fracture
 - Transverse
 - Other
-

Spinal Injury Classification Injury 001

- Stable fracture
- Unstable fracture \pm dislocation
- Ligamentous instability
- Cord injury/neurological compromise

 Salter-Harris Classification

- Type I - transverse fracture through the growth plate.
 - Type II - A fracture through the growth plate and the metaphysis, sparing the epiphysis
 - Type III - A fracture through growth plate and epiphysis, sparing the metaphysis.
 - Type IV - A fracture through all three elements of the bone, the growth plate, metaphysis, and epiphysis.
 - Type V - A compression fracture of the growth plate (resulting in a decrease in the perceived space between the epiphysis and metaphysis on x-ray)
-

Other injury 001

- Periprosthetic fracture
 - Native joint dislocation
 - Arthroplasty dislocation
 - Prosthetic Joint Infection
 - Soft tissue infection
 - Haematoma
 - Compartment syndrome
 - Neurovascular injury
 - Ligament/tendon injury
 - Other
 - None
-

Other injury 001

 Injury 002

T&O Area of Injury 002

- Cervical spine
 - Scapula
 - Clavicle
 - Shoulder
 - Humerus
 - Elbow
 - Radius
 - Ulna
 - Hand & Wrist
 - Thorax & Ribs
 - Thoracic spine
 - Lumbosacral spine
 - Pelvis/Pelvic Ring
 - Acetabulum
 - Femur & Hip
 - Knee
 - Patella
 - Tibia
 - Fibula
 - Ankle
 - Foot
-

Affected side of injury 002

- Left
 - Right
 - Bilateral
-

Fracture Location

- Proximal third segment
 - Diaphyseal/middle third segment
 - Distal third segment
-

Articular involvement

- Extra-articular
 - Intra-articular
-

 Proximal end segment

- 31A1, Simple pertrochanteric
- 31A2, Multifragmentary pertrochanteric, lateral wall incompetent (≤ 20.5 mm)
- 31A3, Intertrochanteric (reverse obliquity)
- 31B1, Subcapital
- 31B2, Transcervical
- 31B3, Basicervical
- 31C1, Split of femoral head
- 31C2, Depression of femoral head
- Subtrochanteric fracture

 Localisation of Hand injury 002

- Lunate
- Scaphoid
- Capitate
- Hamate
- Trapezium
- Other carpal bones
- Metacarpals
- Phalanges

 Localisation of Foot injury 002

- Talus
- Calcaneus
- Navicular
- Cuboid
- Cuneiforms
- Metatarsals
- Phalanges

 T&O Type of injury 002

- Non displaced fracture
- Displaced fracture
- Open fracture
- Closed fracture
- Dislocation
- Subluxation/ligamentous instability
- Traumatic Amputation
- Paediatric fracture
- None of the above

 Pelvic Fracture Classification Injury 002

- Lateral compression
- Anterior-Posterior compression
- Vertical shear
- Combined
- Other

 Acetabular Fracture Classification Injury 002

- Wall OR column fracture
- Wall AND column fracture
- Transverse
- Other

 Spinal Injury Classification Injury 002

- Stable fracture
- Unstable fracture \pm dislocation
- Ligamentous instability
- Cord injury/neurological compromise

 Salter-Harris Classification

- Type I - transverse fracture through the growth plate.
 - Type II - A fracture through the growth plate and the metaphysis, sparing the epiphysis
 - Type III - A fracture through growth plate and epiphysis, sparing the metaphysis.
 - Type IV - A fracture through all three elements of the bone, the growth plate, metaphysis, and epiphysis.
 - Type V - A compression fracture of the growth plate (resulting in a decrease in the perceived space between the epiphysis and metaphysis on x-ray)
-

Other injury 002

- Periprosthetic fracture
 - Native joint dislocation
 - Arthroplasty dislocation
 - Prosthetic Joint Infection
 - Soft tissue infection
 - Haematoma
 - Compartment syndrome
 - Neurovascular injury
 - Ligament/tendon injury
 - Other
 - None
-

Other injury 002

 Injury 003

T&O Area of Injury 003

- Cervical spine
 - Scapula
 - Clavicle
 - Shoulder
 - Humerus
 - Elbow
 - Radius
 - Ulna
 - Hand & Wrist
 - Thorax & Ribs
 - Thoracic spine
 - Lumbosacral spine
 - Pelvis/Pelvic Ring
 - Acetabulum
 - Femur & Hip
 - Knee
 - Patella
 - Tibia
 - Fibula
 - Ankle
 - Foot
-

Affected side of injury 003

- Left
 - Right
 - Bilateral
-

Fracture Location

- Proximal third segment
 - Diaphyseal/middle third segment
 - Distal third segment
-

Articular involvement

- Extra-articular
 - Intra-articular
-

 Proximal end segment

- 31A1, Simple pertrochanteric
- 31A2, Multifragmentary pertrochanteric, lateral wall incompetent (≤ 20.5 mm)
- 31A3, Intertrochanteric (reverse obliquity)
- 31B1, Subcapital
- 31B2, Transcervical
- 31B3, Basicervical
- 31C1, Split of femoral head
- 31C2, Depression of femoral head
- Subtrochanteric fracture

 Localisation of Hand injury 003

- Lunate
- Scaphoid
- Capitate
- Hamate
- Trapezium
- Other carpal bones
- Metacarpals
- Phalanges

 Localisation of Foot injury 003

- Talus
- Calcaneus
- Navicular
- Cuboid
- Cuneiforms
- Metatarsals
- Phalanges

 T&O Type of injury 003

- Non displaced fracture
- Displaced fracture
- Open fracture
- Closed fracture
- Dislocation
- Subluxation/ligamentous instability
- Traumatic Amputation
- Paediatric fracture
- None of the above

 Pelvic Fracture Classification Injury 003

- Lateral compression
- Anterior-Posterior compression
- Vertical shear
- Combined
- Other

 Acetabular Fracture Classification Injury 003

- Wall OR column fracture
- Wall AND column fracture
- Transverse
- Other

 Spinal Injury Classification Injury 003

- Stable fracture
- Unstable fracture \pm dislocation
- Ligamentous instability
- Cord injury/neurological compromise

 Salter-Harris Classification

- Type I - transverse fracture through the growth plate.
 - Type II - A fracture through the growth plate and the metaphysis, sparing the epiphysis
 - Type III - A fracture through growth plate and epiphysis, sparing the metaphysis.
 - Type IV - A fracture through all three elements of the bone, the growth plate, metaphysis, and epiphysis.
 - Type V - A compression fracture of the growth plate (resulting in a decrease in the perceived space between the epiphysis and metaphysis on x-ray)
-

Other injury 003

- Periprosthetic fracture
 - Native joint dislocation
 - Arthroplasty dislocation
 - Prosthetic Joint Infection
 - Soft tissue infection
 - Haematoma
 - Compartment syndrome
 - Neurovascular injury
 - Ligament/tendon injury
 - Other
 - None
-

Other injury 003

Injury 004

T&O Area of Injury 004

- Cervical spine
 - Scapula
 - Clavicle
 - Shoulder
 - Humerus
 - Elbow
 - Radius
 - Ulna
 - Hand & Wrist
 - Thorax & Ribs
 - Thoracic spine
 - Lumbosacral spine
 - Pelvis/Pelvic Ring
 - Acetabulum
 - Femur & Hip
 - Knee
 - Patella
 - Tibia
 - Fibula
 - Ankle
 - Foot
-

Affected side of injury 004

- Left
 - Right
 - Bilateral
-

Fracture Location

- Proximal third segment
 - Diaphyseal/middle third segment
 - Distal third segment
-

Articular involvement

- Extra-articular
 - Intra-articular
-

 Proximal end segment

- 31A1, Simple pertrochanteric
- 31A2, Multifragmentary pertrochanteric, lateral wall incompetent (≤ 20.5 mm)
- 31A3, Intertrochanteric (reverse obliquity)
- 31B1, Subcapital
- 31B2, Transcervical
- 31B3, Basicervical
- 31C1, Split of femoral head
- 31C2, Depression of femoral head
- Subtrochanteric fracture

 Localisation of Hand injury 004

- Lunate
- Scaphoid
- Capitate
- Hamate
- Trapezium
- Other carpal bones
- Metacarpals
- Phalanges

 Localisation of Foot injury 004

- Talus
- Calcaneus
- Navicular
- Cuboid
- Cuneiforms
- Metatarsals
- Phalanges

 T&O Type of injury 004

- Non displaced fracture
- Displaced fracture
- Open fracture
- Closed fracture
- Dislocation
- Subluxation/ligamentous instability
- Traumatic Amputation
- Paediatric fracture
- None of the above

 Pelvic Fracture Classification Injury 004

- Lateral compression
- Anterior-Posterior compression
- Vertical shear
- Combined
- Other

 Acetabular Fracture Classification Injury 004

- Wall OR column fracture
- Wall AND column fracture
- Transverse
- Other

 Spinal Injury Classification Injury 004

- Stable fracture
- Unstable fracture \pm dislocation
- Ligamentous instability
- Cord injury/neurological compromise

 Salter-Harris Classification

- Type I - transverse fracture through the growth plate.
 - Type II - A fracture through the growth plate and the metaphysis, sparing the epiphysis
 - Type III - A fracture through growth plate and epiphysis, sparing the metaphysis.
 - Type IV - A fracture through all three elements of the bone, the growth plate, metaphysis, and epiphysis.
 - Type V - A compression fracture of the growth plate (resulting in a decrease in the perceived space between the epiphysis and metaphysis on x-ray)
-

Other injury 004

- Periprosthetic fracture
 - Native joint dislocation
 - Arthroplasty dislocation
 - Prosthetic Joint Infection
 - Soft tissue infection
 - Haematoma
 - Compartment syndrome
 - Neurovascular injury
 - Ligament/tendon injury
 - Other
 - None
-

Other injury 004

 Injury 005

T&O Area of Injury 005

- Cervical spine
 - Scapula
 - Clavicle
 - Shoulder
 - Humerus
 - Elbow
 - Radius
 - Ulna
 - Hand & Wrist
 - Thorax & Ribs
 - Thoracic spine
 - Lumbosacral spine
 - Pelvis/Pelvic Ring
 - Acetabulum
 - Femur & Hip
 - Knee
 - Patella
 - Tibia
 - Fibula
 - Ankle
 - Foot
-

Affected side of injury 005

- Left
 - Right
 - Bilateral
-

Fracture Location

- Proximal third segment
 - Diaphyseal/middle third segment
 - Distal third segment
-

Articular involvement

- Extra-articular
 - Intra-articular
-

Proximal end segment

- 31A1, Simple pertrochanteric
- 31A2, Multifragmentary pertrochanteric, lateral wall incompetent (≤ 20.5 mm)
- 31A3, Intertrochanteric (reverse obliquity)
- 31B1, Subcapital
- 31B2, Transcervical
- 31B3, Basicervical
- 31C1, Split of femoral head
- 31C2, Depression of femoral head
- Subtrochanteric fracture

Localisation of Hand injury 005

- Lunate
- Scaphoid
- Capitate
- Hamate
- Trapezium
- Other carpal bones
- Metacarpals
- Phalanges

Localisation of Foot injury 005

- Talus
- Calcaneus
- Navicular
- Cuboid
- Cuneiforms
- Metatarsals
- Phalanges

T&O Type of injury 005

- Non displaced fracture
- Displaced fracture
- Open fracture
- Closed fracture
- Dislocation
- Subluxation/ligamentous instability
- Traumatic Amputation
- Paediatric fracture
- None of the above

Pelvic Fracture Classification Injury 005

- Lateral compression
- Anterior-Posterior compression
- Vertical shear
- Combined
- Other

Acetabular Fracture Classification Injury 005

- Wall OR column fracture
- Wall AND column fracture
- Transverse
- Other

Spinal Injury Classification Injury 005

- Stable fracture
- Unstable fracture \pm dislocation
- Ligamentous instability
- Cord injury/neurological compromise

 Salter-Harris Classification

- Type I - transverse fracture through the growth plate.
 - Type II - A fracture through the growth plate and the metaphysis, sparing the epiphysis
 - Type III - A fracture through growth plate and epiphysis, sparing the metaphysis.
 - Type IV - A fracture through all three elements of the bone, the growth plate, metaphysis, and epiphysis.
 - Type V - A compression fracture of the growth plate (resulting in a decrease in the perceived space between the epiphysis and metaphysis on x-ray)
-

Other injury 005

- Periprosthetic fracture
 - Native joint dislocation
 - Arthroplasty dislocation
 - Prosthetic Joint Infection
 - Soft tissue infection
 - Haematoma
 - Compartment syndrome
 - Neurovascular injury
 - Ligament/tendon injury
 - Other
 - None
-

Other injury 005

Injury 006

T&O Area of Injury 006

- Cervical spine
 - Scapula
 - Clavicle
 - Shoulder
 - Humerus
 - Elbow
 - Radius
 - Ulna
 - Hand & Wrist
 - Thorax & Ribs
 - Thoracic spine
 - Lumbosacral spine
 - Pelvis/Pelvic Ring
 - Acetabulum
 - Femur & Hip
 - Knee
 - Patella
 - Tibia
 - Fibula
 - Ankle
 - Foot
-

Affected side of injury 006

- Left
 - Right
 - Bilateral
-

Fracture Location

- Proximal third segment
 - Diaphyseal/middle third segment
 - Distal third segment
-

Articular involvement

- Extra-articular
 - Intra-articular
-

 Proximal end segment

- 31A1, Simple pertrochanteric
 - 31A2, Multifragmentary pertrochanteric, lateral wall incompetent (≤ 20.5 mm)
 - 31A3, Intertrochanteric (reverse obliquity)
 - 31B1, Subcapital
 - 31B2, Transcervical
 - 31B3, Basicervical
 - 31C1, Split of femoral head
 - 31C2, Depression of femoral head
 - Subtrochanteric fracture
-

Localisation of Hand injury 006

- Lunate
 - Scaphoid
 - Capitate
 - Hamate
 - Trapezium
 - Other carpal bones
 - Metacarpals
 - Phalanges
-

Localisation of Foot injury 006

- Talus
 - Calcaneus
 - Navicular
 - Cuboid
 - Cuneiforms
 - Metatarsals
 - Phalanges
-

T&O Type of injury 006

- Non displaced fracture
 - Displaced fracture
 - Open fracture
 - Closed fracture
 - Dislocation
 - Subluxation/ligamentous instability
 - Traumatic Amputation
 - Paediatric fracture
 - None of the above
-

Pelvic Fracture Classification Injury 006

- Lateral compression
 - Anterior-Posterior compression
 - Vertical shear
 - Combined
 - Other
-

Acetabular Fracture Classification Injury 006

- Wall OR column fracture
 - Wall AND column fracture
 - Transverse
 - Other
-

Spinal Injury Classification Injury 006

- Stable fracture
- Unstable fracture \pm dislocation
- Ligamentous instability
- Cord injury/neurological compromise

 Salter-Harris Classification

- Type I - transverse fracture through the growth plate.
 - Type II - A fracture through the growth plate and the metaphysis, sparing the epiphysis
 - Type III - A fracture through growth plate and epiphysis, sparing the metaphysis.
 - Type IV - A fracture through all three elements of the bone, the growth plate, metaphysis, and epiphysis.
 - Type V - A compression fracture of the growth plate (resulting in a decrease in the perceived space between the epiphysis and metaphysis on x-ray)
-

Other injury 006

- Periprosthetic fracture
 - Native joint dislocation
 - Arthroplasty dislocation
 - Prosthetic Joint Infection
 - Soft tissue infection
 - Haematoma
 - Compartment syndrome
 - Neurovascular injury
 - Ligament/tendon injury
 - Other
 - None
-

Other injury 006

Injury 007

T&O Area of Injury 007

- Cervical spine
 - Scapula
 - Clavicle
 - Shoulder
 - Humerus
 - Elbow
 - Radius
 - Ulna
 - Hand & Wrist
 - Thorax & Ribs
 - Thoracic spine
 - Lumbosacral spine
 - Pelvis/Pelvic Ring
 - Acetabulum
 - Femur & Hip
 - Knee
 - Patella
 - Tibia
 - Fibula
 - Ankle
 - Foot
-

Affected side of injury 007

- Left
 - Right
 - Bilateral
-

Fracture Location

- Proximal third segment
 - Diaphyseal/middle third segment
 - Distal third segment
-

Articular involvement

- Extra-articular
 - Intra-articular
-

 Proximal end segment

- 31A1, Simple pertrochanteric
 - 31A2, Multifragmentary pertrochanteric, lateral wall incompetent (≤ 20.5 mm)
 - 31A3, Intertrochanteric (reverse obliquity)
 - 31B1, Subcapital
 - 31B2, Transcervical
 - 31B3, Basicervical
 - 31C1, Split of femoral head
 - 31C2, Depression of femoral head
 - Subtrochanteric fracture
-

Localisation of Hand injury 007

- Lunate
 - Scaphoid
 - Capitate
 - Hamate
 - Trapezium
 - Other carpal bones
 - Metacarpals
 - Phalanges
-

Localisation of Foot injury 007

- Talus
 - Calcaneus
 - Navicular
 - Cuboid
 - Cuneiforms
 - Metatarsals
 - Phalanges
-

T&O Type of injury 007

- Non displaced fracture
 - Displaced fracture
 - Open fracture
 - Closed fracture
 - Dislocation
 - Subluxation/ligamentous instability
 - Traumatic Amputation
 - Paediatric fracture
 - None of the above
-

Pelvic Fracture Classification Injury 007

- Lateral compression
 - Anterior-Posterior compression
 - Vertical shear
 - Combined
 - Other
-

Acetabular Fracture Classification Injury 007

- Wall OR column fracture
 - Wall AND column fracture
 - Transverse
 - Other
-

Spinal Injury Classification Injury 007

- Stable fracture
- Unstable fracture \pm dislocation
- Ligamentous instability
- Cord injury/neurological compromise

 Salter-Harris Classification

- Type I - transverse fracture through the growth plate.
 - Type II - A fracture through the growth plate and the metaphysis, sparing the epiphysis
 - Type III - A fracture through growth plate and epiphysis, sparing the metaphysis.
 - Type IV - A fracture through all three elements of the bone, the growth plate, metaphysis, and epiphysis.
 - Type V - A compression fracture of the growth plate (resulting in a decrease in the perceived space between the epiphysis and metaphysis on x-ray)
-

Other injury 007

- Periprosthetic fracture
 - Native joint dislocation
 - Arthroplasty dislocation
 - Prosthetic Joint Infection
 - Soft tissue infection
 - Haematoma
 - Compartment syndrome
 - Neurovascular injury
 - Ligament/tendon injury
 - Other
 - None
-

Other injury 007

 Injury 008

T&O Area of Injury 008

- Cervical spine
 - Scapula
 - Clavicle
 - Shoulder
 - Humerus
 - Elbow
 - Radius
 - Ulna
 - Hand & Wrist
 - Thorax & Ribs
 - Thoracic spine
 - Lumbosacral spine
 - Pelvis/Pelvic Ring
 - Acetabulum
 - Femur & Hip
 - Knee
 - Patella
 - Tibia
 - Fibula
 - Ankle
 - Foot
-

Affected side of injury 008

- Left
 - Right
 - Bilateral
-

Fracture Location

- Proximal third segment
 - Diaphyseal/middle third segment
 - Distal third segment
-

Articular involvement

- Extra-articular
 - Intra-articular
-

Proximal end segment

- 31A1, Simple pertrochanteric
- 31A2, Multifragmentary pertrochanteric, lateral wall incompetent (≤ 20.5 mm)
- 31A3, Intertrochanteric (reverse obliquity)
- 31B1, Subcapital
- 31B2, Transcervical
- 31B3, Basicervical
- 31C1, Split of femoral head
- 31C2, Depression of femoral head
- Subtrochanteric fracture

Localisation of Hand injury 008

- Lunate
- Scaphoid
- Capitate
- Hamate
- Trapezium
- Other carpal bones
- Metacarpals
- Phalanges

Localisation of Foot injury 008

- Talus
- Calcaneus
- Navicular
- Cuboid
- Cuneiforms
- Metatarsals
- Phalanges

T&O Type of injury 008

- Non displaced fracture
- Displaced fracture
- Open fracture
- Closed fracture
- Dislocation
- Subluxation/ligamentous instability
- Traumatic Amputation
- Paediatric fracture
- None of the above

Pelvic Fracture Classification Injury 008

- Lateral compression
- Anterior-Posterior compression
- Vertical shear
- Combined
- Other

Acetabular Fracture Classification Injury 008

- Wall OR column fracture
- Wall AND column fracture
- Transverse
- Other

Spinal Injury Classification Injury 008

- Stable fracture
- Unstable fracture \pm dislocation
- Ligamentous instability
- Cord injury/neurological compromise

 Salter-Harris Classification

- Type I - transverse fracture through the growth plate.
 - Type II - A fracture through the growth plate and the metaphysis, sparing the epiphysis
 - Type III - A fracture through growth plate and epiphysis, sparing the metaphysis.
 - Type IV - A fracture through all three elements of the bone, the growth plate, metaphysis, and epiphysis.
 - Type V - A compression fracture of the growth plate (resulting in a decrease in the perceived space between the epiphysis and metaphysis on x-ray)
-

Other injury 008

- Periprosthetic fracture
 - Native joint dislocation
 - Arthroplasty dislocation
 - Prosthetic Joint Infection
 - Soft tissue infection
 - Haematoma
 - Compartment syndrome
 - Neurovascular injury
 - Ligament/tendon injury
 - Other
 - None
-

Other injury 008

Injury 009

T&O Area of Injury 009

- Cervical spine
 - Scapula
 - Clavicle
 - Shoulder
 - Humerus
 - Elbow
 - Radius
 - Ulna
 - Hand & Wrist
 - Thorax & Ribs
 - Thoracic spine
 - Lumbosacral spine
 - Pelvis/Pelvic Ring
 - Acetabulum
 - Femur & Hip
 - Knee
 - Patella
 - Tibia
 - Fibula
 - Ankle
 - Foot
-

Affected side of injury 009

- Left
 - Right
 - Bilateral
-

Fracture Location

- Proximal third segment
 - Diaphyseal/middle third segment
 - Distal third segment
-

Articular involvement

- Extra-articular
 - Intra-articular
-

 Proximal end segment

- 31A1, Simple pertrochanteric
- 31A2, Multifragmentary pertrochanteric, lateral wall incompetent (≤ 20.5 mm)
- 31A3, Intertrochanteric (reverse obliquity)
- 31B1, Subcapital
- 31B2, Transcervical
- 31B3, Basicervical
- 31C1, Split of femoral head
- 31C2, Depression of femoral head
- Subtrochanteric fracture

 Localisation of Hand injury 009

- Lunate
- Scaphoid
- Capitate
- Hamate
- Trapezium
- Other carpal bones
- Metacarpals
- Phalanges

 Localisation of Foot injury 009

- Talus
- Calcaneus
- Navicular
- Cuboid
- Cuneiforms
- Metatarsals
- Phalanges

 T&O Type of injury 009

- Non displaced fracture
- Displaced fracture
- Open fracture
- Closed fracture
- Dislocation
- Subluxation/ligamentous instability
- Traumatic Amputation
- Paediatric fracture
- None of the above

 Pelvic Fracture Classification Injury 009

- Lateral compression
- Anterior-Posterior compression
- Vertical shear
- Combined
- Other

 Acetabular Fracture Classification Injury 009

- Wall OR column fracture
- Wall AND column fracture
- Transverse
- Other

 Spinal Injury Classification Injury 009

- Stable fracture
- Unstable fracture \pm dislocation
- Ligamentous instability
- Cord injury/neurological compromise

 Salter-Harris Classification

- Type I - transverse fracture through the growth plate.
 - Type II - A fracture through the growth plate and the metaphysis, sparing the epiphysis
 - Type III - A fracture through growth plate and epiphysis, sparing the metaphysis.
 - Type IV - A fracture through all three elements of the bone, the growth plate, metaphysis, and epiphysis.
 - Type V - A compression fracture of the growth plate (resulting in a decrease in the perceived space between the epiphysis and metaphysis on x-ray)
-

Other injury 009

- Periprosthetic fracture
 - Native joint dislocation
 - Arthroplasty dislocation
 - Prosthetic Joint Infection
 - Soft tissue infection
 - Haematoma
 - Compartment syndrome
 - Neurovascular injury
 - Ligament/tendon injury
 - Other
 - None
-

Other injury 009

Injury 010

T&O Area of Injury 010

- Cervical spine
 - Scapula
 - Clavicle
 - Shoulder
 - Humerus
 - Elbow
 - Radius
 - Ulna
 - Hand & Wrist
 - Thorax & Ribs
 - Thoracic spine
 - Lumbosacral spine
 - Pelvis/Pelvic Ring
 - Acetabulum
 - Femur & Hip
 - Knee
 - Patella
 - Tibia
 - Fibula
 - Ankle
 - Foot
-

Affected side of injury 010

- Left
 - Right
 - Bilateral
-

Fracture Location

- Proximal third segment
 - Diaphyseal/middle third segment
 - Distal third segment
-

Articular involvement

- Extra-articular
 - Intra-articular
-

Proximal end segment

- 31A1, Simple pertrochanteric
- 31A2, Multifragmentary pertrochanteric, lateral wall incompetent (≤ 20.5 mm)
- 31A3, Intertrochanteric (reverse obliquity)
- 31B1, Subcapital
- 31B2, Transcervical
- 31B3, Basicervical
- 31C1, Split of femoral head
- 31C2, Depression of femoral head
- Subtrochanteric fracture

Localisation of Hand injury 010

- Lunate
- Scaphoid
- Capitate
- Hamate
- Trapezium
- Other carpal bones
- Metacarpals
- Phalanges

Localisation of Foot injury 010

- Talus
- Calcaneus
- Navicular
- Cuboid
- Cuneiforms
- Metatarsals
- Phalanges

T&O Type of injury 010

- Non displaced fracture
- Displaced fracture
- Open fracture
- Closed fracture
- Dislocation
- Subluxation/ligamentous instability
- Traumatic Amputation
- Paediatric fracture
- None of the above

Pelvic Fracture Classification Injury 010

- Lateral compression
- Anterior-Posterior compression
- Vertical shear
- Combined
- Other

Acetabular Fracture Classification Injury 010

- Wall OR column fracture
- Wall AND column fracture
- Transverse
- Other

Spinal Injury Classification Injury 010

- Stable fracture
- Unstable fracture \pm dislocation
- Ligamentous instability
- Cord injury/neurological compromise

 Salter-Harris Classification

- Type I - transverse fracture through the growth plate.
 - Type II - A fracture through the growth plate and the metaphysis, sparing the epiphysis
 - Type III - A fracture through growth plate and epiphysis, sparing the metaphysis.
 - Type IV - A fracture through all three elements of the bone, the growth plate, metaphysis, and epiphysis.
 - Type V - A compression fracture of the growth plate (resulting in a decrease in the perceived space between the epiphysis and metaphysis on x-ray)
-

Other injury 010

- Periprosthetic fracture
 - Native joint dislocation
 - Arthroplasty dislocation
 - Prosthetic Joint Infection
 - Soft tissue infection
 - Haematoma
 - Compartment syndrome
 - Neurovascular injury
 - Ligament/tendon injury
 - Other
 - None
-

Other injury 010

Fascio-Iliacus Nerve block at presentation

- Yes
 - No
-

Meets Best Practice Tariff (UK only)

- Yes
 - No
-

Injury

- Blunt
 - Penetrating
-

Number of injuries

- 1
 - 2
 - 3
 - 4
 - 5
 - 6
 - 7
 - 8
 - 9
 - 10
-

Area on injury #1

- Head & Neck
 - Face
 - Thorax
 - Abdomen
 - Pelvis
 - Limbs
-

Primary intended treatment at presentation

- Surgery
- Conservative including Abx or radiology or endoscopy
- No intervention

Radiological and Endoscopic Interventions

- Drain insertion
- ERCP
- Therapeutic endoscopy
- Other
- None

Other Radiological or endoscopic intervention details

Investigations During Presentation

Blood Tests

Did patient have blood test on presentation?

- Yes
- No

Serum creatinine

Blood lactate

C-reactive protein

Albumin

Sodium

Potassium

Urea

Haemoglobin

White cell count

Lymphocyte count

Bilirubin

Observations

Did patient have observations taken on presentation?

- Yes
- No

 Temperature

 SpO2

 FiO2

 (Fraction Inspired Oxygen for Saturation measurement above)

 Pulse Rate

 Systolic blood pressure

 Glasgow coma scale

- 0
- 1
- 2
- 3
- 4
- 5
- 6
- 7
- 8
- 9
- 10
- 11
- 13
- 14
- 15

 Radiological Investigations

 Did patient undergo radiological investigations on presentation?

- Yes
- No

 Select which radiological investigations the patient received during presentation

- Abdominal XRay
- Chest XRay
- Computerised Tomography Abdomen Pelvis
- Computerised Tomography Chest Abdomen Pelvis
- Computerised Tomography Chest
- Magnetic Resonance Imaging
- Ultrasound Doppler
- Abdominal/Pelvis Ultra Sound Scan
- Ultra Sound Scan Neck
- Computerised Tomography Neck
- Computerised Tomography Adrenal
- Xray other
- Computerised Tomography other
- Limb XRay
- Trauma Xray Series
- Computerised Tomograph Limb +/- Angiogram
- Computerised Tomograph Spine
- Trauma Computerised Tomograph (Head to Pelvis +/- limbs)
- Other

Date of AXR

Paste AXR Result

(Please do not include patient identifiable information.)

Date of CXR

Paste CXR Result

(Please do not include patient identifiable information.)

Date of CT AP

Paste CT AP Result

(Please do not include patient identifiable information.)

Date of CT CAP

Paste CT CAP Result

(Please do not include patient identifiable information.)

Date of CT Chest

Paste CT Chest Result

(Please do not include patient identifiable information.)

Date of Magnetic resonance imaging

Paste Magnetic resonance imaging Result

(Please do not include patient identifiable information.)

Date of Ultrasound Doppler

Paste Ultrasound Doppler Result

(Please do not include patient identifiable information.)

Date of Abdominal/Pelvis Ultrasound

Paste Abdominal/Pelvis Ultrasound Result

(Please do not include patient identifiable information.)

Date of USS Neck

Paste USS Neck Result

(Please do not include patient identifiable information.)

Date of CT Neck

Paste CT Neck Result

(Please do not include patient identifiable information.)

Date of CT Adrenal

Paste CT Adrenal Result

(Please do not include patient identifiable information.)

Other Xray - body area

Date of Other Xray

Paste Other Xray Result

(Please do not include patient identifiable information.)

Other Computerised Tomography - body area

Date of Other Computerised Tomography

Paste Other Computerised Tomography Result

(Please do not include patient identifiable information.)

Date of Limb Xray

Paste Limb Xray Result

(Please do not include patient identifiable information.)

Date of Trauma Xray Series

Paste Trauma Xray Series Result

(Please do not include patient identifiable information.)

Date of Computerised Tomograph Limb +/- Angiogram

Paste Computerised Tomograph Limb +/- Angiogram Result

(Please do not include patient identifiable information.)

Date of Computerised Tomograph Spine

Paste Computerised Tomograph Spine Result

(Please do not include patient identifiable information.)

Date of Trauma Computerised Tomograph (Head to Pelvis +/- limbs)

Paste Trauma Computerised Tomograph (Head to Pelvis +/- limbs) Result

(Please do not include patient identifiable information.)

Other Investigation - body area

Date of Other Investigation

Paste Other Investigation Result

(Please do not include patient identifiable information.)

COVID-19 Investigations

Known COVID-19 Status at time of presentation

Known
 Unknown

COVID-19 status at time of presentation

Positive
 Negative

Was COVID-19 status newly assessed at presentation?

Yes
 No

How was Covid Status newly assessed at time of presentation?

Swab test
 CXR
 CT

What was the result of COVID-19 swab test at time of presentation

Positive
 Negative
 Pending

Date of swab test at presentation

What was the result of CXR test for COVID-19 at time of presentation

Positive
 Negative
 Pending

Date of CXR at presentation

What was the result of CT test for COVID-19 at time of presentation

Positive
 Negative
 Pending

Date of CT at presentation

Management Decisions

Has surgical department capacity affected decision to operate?

Yes
 No

Has the patients Covid Status affected decision to operate?

Yes
 No

Has the Covid pandemic affected the decision to operate?

Yes
 No

Patient Details

Date of Birth[pres_dob]

Gender[pres_gen]

Past Medical History

Record ID. Please record this number on your local in house file with associated local record number so that you may return to complete data collection later.

PanSurg-Predict Database Past Medical History

Patient Details

Date of Birth[pres_dob]

Gender[pres_gen]

Respiratory history / CXR appearance

- No dyspnoea /
- Dyspnoea on exertion or CXR: mild COAD
- Dyspnoea limiting exertion to < 1 flight or CXR: moderate COAD
- Dyspnoea at rest/rate >30 at rest or CXR: fibrosis or consolidation
- Unknown

Medical Research Council Dyspnea Score

- category 0, No dyspnea
- category 1, Slight degree of dyspnea (troubled by shortness of breath when hurrying on the level or walking up a slight hill)
- category 2, Moderate degree of dyspnea (walks slower than people of the same age on the level because of breathlessness)
- category 3, Moderately severe degree of dyspnea (has to stop because of breathlessness when walking at own pace on the level)
- category 4, Severe degree of dyspnea (stops for breath after walking about 100 yards or after a few minutes on the level)
- category 5, Very severe degree of dyspnea (too breathless to leave the house or breathless when dressing or undressing)

FEV1

FVC

ppoFEV1 if applicable

TLCO / KCO

Cardiovascular system - ECG

- No abnormalities /
- AF rate 60-90bpm /
- AF rate >90/
- Any other abnormal rhythm/paced rhythm/ >5VE/min/ Q, ST or T wave abnormalities
- Unknown

Pulmonary Hypertension

- No
 Moderate (systolic PA 31-55 mmHg)
 Severe (systolic PA >55 mmHg)
-

Smoking status

- Smoker
 Not a smoker
 Ex smoker
 Unknown
-

World Health Organization (WHO) Zubrod Performance Status Scale

- 0: Normal activity
 1: Symptoms, but nearly fully ambulatory
 2: Some bed time, but needs to be in bed less than 50% of normal daytime
 3: Need to be in bed greater than 50% of normal daytime
 4: Unable to get out of bed
-

Clinical Frailty Scale See above image

- 1
 2
 3
 4
 5
 6
 7
 8
 9
-

Residence

- Home
 Nursing home
 Residential home
 Hospice
 Sheltered accommodation
 Homeless
 Prison
 Hospital/health care units
 Institution
 Other
-

Pre-fracture mobility

- Without aids
 Walking stick(s)
 Zimmer Frame/Walking frame
 Wheelchair
 Bedbound
-

Where did the injury take place?

- Home/place of residence
 Hospital
 Outside home/place of residence

Charlson Co-Morbidity Factors

- Myocardial infarction
- Congestive heart failure
- Peripheral vascular disease
- Cerebrovascular disease or TIA
- Dementia
- Chronic pulmonary disease
- Rheumatic disease
- History of Peptic ulcer disease
- Liver disease
- Diet-controlled Diabetes
- Diabetes with no complication
- Diabetes with end-organ damage
- Hemiplegia or paraplegia
- Any malignancy without metastasis
- Leukaemia
- Lymphoma
- Metastatic solid tumour
- AIDS (excluded asymptomatic infection)
- None of the above

Other Cardiac History

- Hypertension
- Hypercholesterolaemia
- Myocardial infarction within 90 days
- CCS class 4 angina (Canadian Cardiovascular Society)
- Previous Cardiac surgery
- Pre-op cardiogenic shock
- IABP requirement pre-op

New York Heart Association Functional Classification

- I - No limitation of physical activity. Ordinary physical activity does not cause undue fatigue, palpitation, dyspnea (shortness of breath).
- II - Slight limitation of physical activity. Comfortable at rest. Ordinary physical activity results in fatigue, palpitation, dyspnea (shortness of breath).
- III - Marked limitation of physical activity. Comfortable at rest. Less than ordinary activity causes fatigue, palpitation, or dyspnea.
- IV - Unable to carry on any physical activity without discomfort. Symptoms of heart failure at rest. If any physical activity is undertaken, discomfort increases.

Left Ventricular function

- Good (LVEF >50%)
- Moderate (LVEF 31% - 50%)
- Poor (LVEF 21-30%)
- Very poor (LVEF 20% or less)

Critical preoperative state

- Yes
- No
(ventricular tachycardia or ventricular fibrillation or aborted sudden death, preoperative cardiac massage, preoperative ventilation before anaesthetic room, preoperative inotropes or IABP, preoperative acute renal failure (anuria or oliguria < 10ml/hr))

Liver disease Severe, cirrhosis and portal hypertension with variceal bleeding history
 Moderate, cirrhosis and portal hypertension but no variceal bleeding history
 Mild, chronic hepatitis (or cirrhosis without portal hypertension)

- Mild
 Moderate to severe

Does patient have moderate or severe renal disease
 Severe, on dialysis, status post kidney transplant, uremia
 Moderate, creatinine >3 mg/dL (270 micromol/L)

- Yes
 No

Any active malignancy in last 20 years?
 (excluding SCC and BCC)

- Yes
 No

Alcohol dependence?

- Yes
 No

Any additional co-morbidities?

- Yes
 No

Other medical comorbidities

Relevant medication

- ACE inhibitors
 Cardiac drugs
 NSAIDS
 Warfarin
 Steroids
 Other immunosuppressants (specify)
 Insulin
 None
 NOAC
 UFH (Unfractionated heparin)
 LMWH (low molecular weight heparin)
 Clopidogrel/antiplatelet (other than NSAIDS)

Other immunosuppressants

Which NSAIDs did the patient receive?

- Aspirin
 Ibuprofen
 Diclofenac
 Celecoxib
 Indomethacin
 Naproxen
 Ketorolac
 Ketoprofen
 Other

Other NSAID - please give details

Endocrine drugs

- Cinacalcet
- Phenoxybenzamine
- Beta-blocker
- Other
- None

Endocrine drugs Other

Patient Details

Date of Birth[pres_dob]

Gender[pres_gen]

Evaluation Of Operative Management

Record ID. Please record this number on your local in house file with associated local record number so that you may return to complete data collection later.

PanSurg-Predict Database Evaluation of Operative Management

Patient Details

Date of Birth[pres_dob]

Gender[pres_gen]

Was patient tested for COVID-19 pre-operatively?

Yes - Nasopharyngeal swab

Yes - Antibody test

Yes - Serum Antibody titre

No

(This includes testing prior to elective admission eg in pre-operative assessment clinic, with a home kit or on at a specifically arranged outpatient attendance as well as at the time of elective admission.)

Date of COVID-19 testing

Was patient radiologically tested for COVID-19 pre-operatively?

Yes - Chest XRay

Yes - Computerised Tomography

No

Date of COVID-19 Imaging testing

On the basis of these investigations what was the patient's COVID19 status?

Negative

Positive - current infection

Positive - previous infection

Inconclusive/Unknown

Still pending

COVID-19 swab testing during the patient's presentation was recorded as pending. Has the result been processed at the time operative management evaluation?

Pending result is now positive

Pending result is now negative

Result is still pending

COVID-19 CXR scan assessment during the patient's presentation was recorded as pending. Has the result been processed at the time operative management evaluation?

Pending result is now positive

Pending result is now negative

Result is still pending

COVID-19 computerised tomography scan assessment during the patient's presentation was recorded as pending. Has the result been processed at the time operative management evaluation?

Pending result is now positive

Pending result is now negative

Result is still pending

Admission Details

Was patient admitted under your surgical team?

Yes

No

Was patient admitted under your surgical team prior to the day of surgery? Yes
 No

Was patient asked to isolate pre-operatively? Yes - 7 days
 Yes - 14 days
 Other
 No

Date of admission _____

Was patient's surgery previously delayed due to a positive COVID-19 diagnosis? Yes
 No

Was patient previously deferred from surgery due to the COVID-19 pandemic? Yes
 No

Was this patient previously entered by your team in the RedCap PREDICT Database? Yes
 No

Please enter REDCap ID number _____

Has the patients Covid Status affected decision to admit? Yes
 No

Has surgical department capacity affected decision to admit? Yes
 No

Management Decisions

Was operative management evaluated for this patient? Yes
 No

Primary intended treatment after operative management evaluation Surgery
 Conservative including Abx or radiology or endoscopy
 No intervention

ASA - American Society of Anaesthesiologists' classification of Physical Health Grade 1: A normal healthy patient
 Grade 2: A patient with mild systemic disease
 Grade 3: A patient with severe systemic disease
 Grade 4: A patient with severe systemic disease that is a constant threat to life
 Grade 5: A moribund patient who is not expected to survive >24 hours

Abbreviated Mental Test Score (AMTS) < 7
 ≥ 7

Was a geriatric assessment completed? Yes
 No

Was this performed by a Consultant Geriatrician? Yes
 No

Time to geriatric assessment from presentation

< 24 hrs
 < 36 hrs
 < 72 hrs
 >72 hrs

Nottingham Hip Fracture Score if known

Pre-operative voice change

Yes
 No

Pre-operative vocal cord check performed

Yes - Normal
 Yes - Vocal Cord palsy
 No

Radiological and Endoscopic Interventions

Drain insertion
 ERCP
 Therapeutic endoscopy
 Other
 None

Other Radiological or endoscopic intervention details

Has surgical department capacity affected decision to operate?

Yes
 No

Has the patients Covid Status affected decision to operate?

Yes
 No

Further Investigations

Most recent blood tests at time of surgery or when evaluating operative management

Did patient have additional blood tests since presentation?

Yes
 No

Serum creatinine

Blood lactate

C-reactive protein

Albumin

Sodium

Potassium

Urea _____

Haemoglobin _____

White cell count _____

Lymphocyte count _____

D-Dimer _____

Bilirubin _____

Most recent observations at time of surgery when evaluating operative management

Are most recent observations different from those at presentation? Yes No

Temperature _____

SpO2 _____

FiO2 _____
(Fraction Inspired Oxygen for Saturation measurement above)

Pulse Rate _____

Systolic blood pressure _____

Glasgow coma scale 0
 1
 2
 3
 4
 5
 6
 7
 8
 9
 10
 11
 13
 14
 15

Radiological Investigations

Did patient have further relevant radiological investigations since presentation?

- Yes
 No
-

Select which radiological investigations the patient received during presentation

- Abdominal XRay
 Chest XRay
 Computerised Tomography Abdomen Pelvis
 Computerised Tomography Chest Abdomen Pelvis
 Computerised Tomography Chest
 Magnetic Resonance Imaging
 Ultrasound Doppler
 Abdominal/Pelvis Ultra Sound Scan
 Ultra Sound Scan Neck
 Computerised Tomography Neck
 Computerised Tomography Adrenal
 Xray other
 Computerised Tomography other
 Other
-

Date of AXR

Paste AXR Result

(Please do not include patient identifiable information.)

Date of CXR

Paste CXR Result

(Please do not include patient identifiable information.)

Date of CT AP

Paste CT AP Result

(Please do not include patient identifiable information.)

Date of CT CAP

Paste CT CAP Result

(Please do not include patient identifiable information.)

Date of CT Chest

Paste CT Chest Result

(Please do not include patient identifiable information.)

Date of Magnetic resonance imaging

Paste Magnetic resonance imaging Result

(Please do not include patient identifiable information.)

Date of Ultrasound Doppler

Paste Ultrasound Doppler Result

(Please do not include patient identifiable information.)

Date of Abdominal/Pelvis Ultrasound

Paste Abdominal/Pelvis Ultrasound Result

(Please do not include patient identifiable information.)

Date of USS Neck

Paste USS Neck Result

(Please do not include patient identifiable information.)

Date of CT Neck

Paste CT Neck Result

(Please do not include patient identifiable information.)

Date of CT Adrenal

Paste CT Adrenal Result

(Please do not include patient identifiable information.)

Other Xray - body area

Date of Other Xray

Paste Other Xray Result

(Please do not include patient identifiable information.)

Other Computerised Tomography - body area

Date of Other Computerised Tomography

Paste Other Computerised Tomography Result

(Please do not include patient identifiable information.)

Other Investigation - body area

Date of Abdominal/Pelvis Ultrasound

Paste Abdominal/Pelvis Ultrasound Result

(Please do not include patient identifiable information.)

Date of Other Investigation

Paste other investigation result

Paste Other Investigation Result

(Please do not include patient identifiable information.)

COVID-19 Investigations

Known COVID-19 Status at time of operative management evaluation

Known
 Unknown
(This includes testing prior to elective admission eg in pre-operative assessment clinic, with a home kit or on at a specifically arranged outpatient attendance as well as at the time of elective admission or during an emergency admission.)

COVID-19 status at time of operative management evaluation

Positive
 Negative

Was COVID-19 status newly assessed time of operative management evaluation?

Yes
 No

How was Covid Status newly assessed at time of operative management evaluation?

Swab test
 CXR
 CT

What was the result of COVID-19 swab test at time of operative management evaluation

Positive
 Negative
 Pending

Date of swab-test time of operative management evaluation

What was the result of the CXR for COVID-19 at time of operative management evaluation

Positive
 Negative
 Pending

Date of CXR at time of operative management evaluation

What was the result of the CT for COVID-19 at time of operative management evaluation

Positive
 Negative
 Pending

Date of CT at time of operative management evaluation

Patient Details
Date of Birth[pres_dob]
Gender[pres_gen]

Surgery

Record ID. Please record this number on your local in house file with associated local record number so that you may return to complete data collection later.

PanSurg-Predict Database Surgery

Patient Details

Date of Birth[pres_dob]

Gender[pres_gen]

COVID-19 Test Results

COVID-19 swab testing during the patient's presentation was recorded as pending. Has the result been processed by the time of surgery?

- Pending result is now positive
 Pending result is now negative
 Result is still pending

COVID-19 CXR scan assessment during the patient's presentation was recorded as pending. Has the result been processed by the time of surgery?

- Pending result is now positive
 Pending result is now negative
 Result is still pending

COVID-19 computerised tomography scan assessment during the patient's presentation was recorded as pending. Has the result been processed by the time of surgery?

- Pending result is now positive
 Pending result is now negative
 Result is still pending

COVID-19 swab testing during the patient's operative management evaluation was recorded as pending. Has the result been processed by the time of surgery?

- Pending result is now positive
 Pending result is now negative
 Result is still pending

COVID-19 CXR scan assessment during the patient's operative management evaluation was recorded as pending. Has the result been processed by the time of surgery?

- Pending result is now positive
 Pending result is now negative
 Result is still pending

COVID-19 computerised tomography scan assessment during the patient's operative management evaluation was recorded as pending. Has the result been processed by the time of surgery?

- Pending result is now positive
 Pending result is now negative
 Result is still pending

Known COVID-19 Status at time of surgery?

- Known
 Unknown

COVID-19 status at time of surgery

- Positive
 Negative

Was COVID-19 status newly assessed at time of surgery?

- Yes
 No

How was Covid Status newly assessed at time of surgery?

- Swab test
 CXR
 CT

What was the result of COVID-19 swab test at time of surgery?

- Positive
 Negative
 Pending

Date of swab-test at time of surgery

What was the result of CXR test for COVID-19 at time of surgery?

- Positive
 Negative
 Pending

Date of CXR at time of surgery

What was the result of CT test for COVID-19 at time of surgery?

- Positive
 Negative
 Pending

Date of CT at time of surgery

Date and Time of Decision to operate

Surgery Data

Urgency when listed for surgery

- Immediate (< 2 hours)
 Urgent (2-6 hours)
 Urgent (6-18 hours)
 Expedited (>18 hours)

Did the patient undergo a surgical intervention?

- Yes
 No

TNM at time of surgery if different from original staging at time of MDT/presentation

Date and time of entry into operating theatre/anaesthetic room

(Please complete time to best of your ability.)

Delay to surgery

- < 24 hrs
 < 36 hrs
 < 72 hrs
 >72 hrs

Reason for delay if > 36 hours

- Not fit for surgery
 Theatre capacity
 Anticoagulation
 COVID test pending
 Other

Other reason for delay > 36 hours

Date of surgery

Surgical Approach

- Open
- Laparoscopic
- Lap Assisted
- Hybrid
- Other

Grade of Primary surgeon

- Consultant/Attending surgeon
- Senior Fellow
- Specialist Registrar/Resident surgeon
- Core Trainee
- Foundation Year doctor/Intern
- Medical student
- Advanced Surgical Nurse Practitioner
- Other

Other Primary surgeon

Grade of Secondary surgeon

- Consultant/Attending surgeon
- Senior Fellow
- Specialist Registrar/Resident surgeon
- Core Trainee
- Foundation Year doctor/Intern
- Medical student
- Advanced Surgical Nurse Practitioner
- Other

Other Secondary surgeon

Grade of Anaesthetist

- Consultant/Attending Anaesthesiologist
- Senior Fellow
- Specialist Registrar/Resident Anaesthesiologist
- Core Trainee
- Foundation Year doctor/Intern
- Advanced Surgical Nurse Practitioner
- Other

Was planned procedure performed?

- Yes
- No

Reason for unplanned procedure

- Covid-related decision
- More advanced disease than expected
- Other

Other reason for unplanned procedure

Emergency Surgery

- Abscess drainage
- Appendicectomy
- Cholecystectomy
- Peptic ulcer repair
- Small bowel resection
- Colectomy
- Hartmann's
- Hernia repair
- Diagnostic procedure
- Laparoscopic washout
- Laparoscopy revealing O&G pathology

Colorectal surgery

- Colectomy
- Anterior resection
- AP resection
- Pelvic exenteration

Oesophagogastric surgery

- Oesophagectomy
- Total Gastrectomy
- Partial gastrectomy
- Anti-reflux or hiatal procedure
- Myotomy

HPB surgery

- Liver resection
- Whipple procedure
- Distal pancreatectomy
- Cholecystectomy

Planned Thyroid procedure

- Total thyroidectomy
- Hemithyroidectomy
- Isthmusectomy
- Thyroglossal cyst excision

Unplanned Thyroid procedure performed

- Total thyroidectomy
- Hemithyroidectomy
- Isthmusectomy
- Thyroglossal cyst excision

Nodal procedure planned

- Yes - central compartment dissection
- Yes - lateral compartment dissection
- No

Unplanned Nodal procedure performed

- Yes - central compartment dissection
- Yes - lateral compartment dissection
- No

Planned Parathyroid procedure

- Focused surgery
- Bilateral exploration

Planned Hemithyroidectomy

- Yes
- No

Unplanned Parathyroid procedure

- Focused surgery
- Bilateral exploration

Unplanned hemithyroidectomy

- Yes
- No

Planned Adrenal procedure

- Right
 Left
 Bilateral

Planned Adrenal approach

- Open
 Transperitoneal laparoscopic
 Retroperitoneal laparoscopic

Unplanned Adrenal approach

- Open
 Transperitoneal laparoscopic
 Retroperitoneal laparoscopic

Nerve monitor used

- Yes
 No

Reason for unplanned procedure

- Covid-related decision
 Disease more advanced than anticipated
 Loss of nerve monitor signal
 Other

Reason for unplanned procedure

- Covid-related decision
 Disease more advanced than anticipated
 Bleeding
 Size of tumour
 Other

Other reason for unplanned procedure

Bariatric Surgery

- RYGB
 Sleeve
 Band

Amputation

- Major
 Minor

Lower Limb Revascularisation

- Endovascular
 Open
 Hybrid

T&O interventions

- Manipulation/Exploration under anaesthesia
- Arthroscopy
- Open reduction and internal fixation
- Closed reduction and internal fixation
- Intramedullary nail
- Hemiarthroplasty
- Total Arthroplasty
- Amputation
- Arthrodesis/Fusion
- Soft tissue repair/reconstruction
- Incision/drainage/debridement/washout
- External fixation
- Traction
- Plaster Immobilisation
- Open reduction
- Revisional surgery
- Decompression/Fasciotomy
- Other

Revisional Surgery

- Revision arthroplasty
- Revision Internal fixation
- Revision Intramedullary nailing
- 1st Stage revision Arthroplasty
- Other

Fracture Neck of Femur Operation

- Cannulated hip screw
- DHS
- Intramedullary nail
- Hemiarthroplasty
- Total Hip replacement
- Other

Other T&O procedure

AAA

- EVAR
- Complex EVAR
- Open

TAAA

- EVAR
- Complex EVAR
- Open

Aortic dissection

- Endovascular
- Open
- Hybrid

Thoracic procedure

- Wedge Resection
- Segmentectomy
- Lobectomy
- Bi-Lobectomy
- Pneumonectomy
- Resection of Mediastinal Mass
- Pleurectomy/Decortication
- Extended Pleurectomy/Decortication
- Bullectomy & Pleural Symphysis
- Pleural Biopsies
- Airway Debulking / Stenting
- Other

 Other Thoracic procedure

 Access

- Sternotomy
- Mini-Sternotomy
- Thoracotomy
- Video Assisted Thoracoscopic surgery
- Robotic Assisted Thoracoscopic Surgery
- Rigid Bronchoscopy
- Flexible Bronchoscopy down Endotracheal Tube
- Other

 Access

- Sternotomy- Full
- Sternotomy- Partial/Mini
- Anterior thoracotomy
- Posterior thoracotomy
- Video assisted
- Robotic
- Other

 Cardiopulmonary bypass

- Yes
- No

 Myocardial protection

- Beating Heart
- Fibrillation
- Cardioplegia

 Lowest temperature

 Circulatory arrest

- Yes
- No

 Cardiac Procedure

- CABG
- Aortic Valve repair or replacement
- Mitral Valve repair or replacement
- Tricuspid valve repair or replacement
- Thoracic Aorta procedure
- Procedure for Atrial Fibrillation
- Other

 Left Main Stem disease

- Yes
- No

 Grafted vessels

- LAD - Left Anterior Descending artery
- OM - Obtuse Marginal artery
- PDA - Posterior Descending artery
- RCA - Right Coronary artery
- Intermediate artery
- Diagonal artery

 Left Anterior Descending graft

- LIMA
- RIMA
- LSV
- Radial

Obtuse marginal graft

LIMA
 RIMA
 LSV
 Radial

Posterior descending artery graft

LIMA
 RIMA
 LSV
 Radial

Right coronary artery graft

LIMA
 RIMA
 LSV
 Radial

Intermediate artery graft

LIMA
 RIMA
 LSV
 Radial

Diagonal artery graft

LIMA
 RIMA
 LSV
 Radial

Aortic Valve

Repair
 Tissue replacement
 Mechanical replacement

Mitral Valve

Repair
 Tissue replacement
 Mechanical replacement

Tricuspid Valve

Repair
 Tissue replacement
 Mechanical replacement

Aortic segment replaced - select all that apply

Ascending
 Hemi arch
 Arch
 Descending thoracic

Procedure for AF

Ablation
 Left atrial appendage occlusion
 Other

Other procedure for AF

Other Cardiac Procedure

Anaesthesia

General Anaesthesia
 General + Regional Anaesthesia
 Regional Anaesthesia
 Local Anaesthesia

Number of intended procedures

Including this operation, how many operations has the patient had in the 30 day period prior to this procedure?

- 1
 2
 >2
-

Estimated blood loss (mls)

- =< 100
 101-500
 501-999
 >=1000
 Not applicable
-

Estimated contamination if applicable

- None
 Serous fluid
 Localised pus
 Free bowel content, pus or blood
-

Malignancy at time of surgery

- None
 Primary only
 Nodal metastases
 Distant metastases
 Unknown
-

Thoracic pathology

- Benign
 Malignant - Lung
 Malignant - Pleural
 Malignant - Secondary
 Other
-

Other thoracic pathology details

Operative Severity Moderate

Includes appendicectomy

Cholecystectomy

Mastectomy

TURP

Major

All colonic resections (excluding colostomy alone)

All gastrectomy (but not repair perforated or bleeding ulcer)

Small bowel tumour resection

Re-operations for ongoing sepsis or bleeding

Laparostomy

Intestinal bypass

Major+

All other procedures including:

Stoma formation

Small bowel resection

Division adhesions

Repair perforated or bleeding ulcer

- Minor
 Moderate
 Major
 Major+

Patient Details

Date of Birth[pres_dob]

Gender[pres_gen]

Outcome

Record ID. Please record this number on your local in house file with associated local record number so that you may return to complete data collection later.

PanSurg-Predict Database Patient Outcome

Patient Details

Date of Birth[pres_dob]

Gender[pres_gen]

COVID-19

COVID-19 swab testing during the patient's presentation was recorded as pending. Has the result been processed by the time of discharge?

- Pending result is now positive
 Pending result is now negative
 Result is still pending

COVID-19 CXR scan assessment during the patient's presentation was recorded as pending. Has the result been processed by the time of discharge?

- Pending result is now positive
 Pending result is now negative
 Result is still pending

COVID-19 computerised tomography scan assessment during the patient's presentation was recorded as pending. Has the result been processed by the time of discharge?

- Pending result is now positive
 Pending result is now negative
 Result is still pending

COVID-19 swab testing during the patient's evaluation of operative management was recorded as pending. Has the result been processed by the time of discharge?

- Pending result is now positive
 Pending result is now negative
 Result is still pending

COVID-19 CXR scan assessment during the patient's evaluation of operative management was recorded as pending. Has the result been processed by the time of discharge?

- Pending result is now positive
 Pending result is now negative
 Result is still pending

COVID-19 computerised tomography scan assessment during the patient's evaluation of operative management was recorded as pending. Has the result been processed by the time of discharge?

- Pending result is now positive
 Pending result is now negative
 Result is still pending

COVID-19 swab testing during at the time of the patient's surgery was recorded as pending. Has the result been processed by the time of discharge?

- Pending result is now positive
 Pending result is now negative
 Result is still pending

COVID-19 swab testing during at the time of the patient's surgery was recorded as pending. Has the result been processed by the time of discharge?

- Pending result is now positive
 Pending result is now negative
 Result is still pending

COVID-19 swab testing during at the time of the patient's surgery was recorded as pending. Has the result been processed by the time of discharge?

- Pending result is now positive
 Pending result is now negative
 Result is still pending

ICU

ICU stay

Yes planned
 Yes unplanned
 No

Has the patients Covid Status affected decision to admit to ICU?

Yes
 No

Has surgical department capacity affected decision to admit to ICU?

Yes
 No

Reason for ICU stay

COVID related
 Post-Operative support
 Other

Length of ICU stay

(nights)

Did the patient return to ICU?

Yes
 No

Has the patients Covid Status affected decision to readmit to ICU?

Yes
 No

Has surgical department capacity affected decision to readmit to ICU?

Yes
 No

Reason for return to ICU

COVID related
 Post-Operative support
 Other

Length of returning ICU stay

(nights)

Complications

Return to theatre

Yes - unplanned
 Yes - planned
 Yes - unplanned AND planned
 No
 Unknown

Date of Return to Theatre

T&O Return to Theatre

- Haemorrhage
 - Sepsis/Infection/Abscess
 - Failure of fixation
 - Periprosthetic fracture
 - VTE
 - Wound problems
 - Neurovascular injury
 - Dislocation
 - Compartment syndrome
 - Deteriorating patients
 - Other
-

Other Return to theatre

Reason for unplanned return to theatre

- Anastomotic leak
 - Abscess
 - Bleeding or Haematoma
 - Decompression of abdominal/other compartment syndrome
 - Bowel obstruction
 - Abdominal wall dehiscence
 - Accidental damage to bowel or other organ
 - Stoma viability or retraction
 - Ischaemia / non-viable bowel
 - Sepsis / infection / inadequate source control
 - Deteriorating patient
 - Missed pathology at first laparotomy
 - Other
 - Unknown
- ((Select most significant reason))
-

Reason for planned return to theatre

- Removal of packs / ensure haemostasis/ washout
 - Closure of laparostomy
 - Removal of bogota bag / formation of formal laparostomy with mesh / vac dressing insertion
 - Definitive procedure following 'damage control surgery' +/- stoma formation, +/- restoration of intestinal continuity
 - Assess viability of GI tract, +/- stoma formation, +/- restoration of intestinal continuity
 - Other
 - Unknown
- ((Select most significant reason))
-

Reason for return to theatre

General complications

- None
 - Myocardial infarction
 - Pulmonary embolism
 - Respiratory complications/Lower respiratory tract infection
 - Deep Venous thrombosis
 - Cerebral Vascular Accident/Strokes
 - Hospital Acquired COVID
 - Community Acquired COVID
 - Haematoma
 - Ileus
 - Urinary retention
 - Surgical Site Infection
 - AF
 - Re-intubation
 - NIV
 - Acute Kidney injury
 - Dialysis
 - Intra-aortic balloon pump
 - Mechanical cardiac support
 - Other
-

Other surgical complication

Other thoracic complications

- Pneumonia
 - Atelectasis
 - Pleural Effusion
 - ARDS
 - None
-

COVID-related respiratory complication

- Yes
 - No
-

Endocrinology Complications

- Hypocalcaemia
 - Tracheostomy
 - Voice change
 - Other
 - None
-

Was patient treated for hypocalcaemia?

- Yes
 - No
-

Post-operative Vocal Cord check

- Not performed
 - Abnormal
 - Normal
-

Re-intervention
(endoscopic or radiological)

- Yes
 - No
-

Re-intervention details

Was bone protection medication started during admission?

- Yes
- Not required
- Pending further tests
- Patient already on treatment
- Other

Was patient mobilised on the first post-operative day? Yes
 No

Was a delirium assessment completed both pre- and post-operatively? Yes
 No

Histopathology

Thyroid histopathology Colloid goitre
 Colloid nodule
 Simple cyst
 Follicular adenoma
 Oncocytic adenoma
 FTC
 Oncocytic carcinoma
 PTC
 MTC
 Anaplastic
 Lymphoma
 Metastatic
 C-cell hyperplasia
 Graves' disease
 Auto-immune thyroiditis
 Other (Specify)

Other thyroid histopathology _____

Parathyroid histopathology Adenoma
 Hyperplasia
 Cancer
 Uncertain
 Other (Specify)

Other parathyroid histopathology _____

Adrenal histopathology Adenoma benign
 Adenoma indeterminate
 Adrenocortical carcinoma
 Adrenal hyperplasia
 Pheochromocytoma
 Metastases
 Other (Specify)

Other adrenal histopathology _____

TNM Classification _____

Loco-regional residual tumour after resection R0
 R1
 R2
 Rx

Outcome

Patient outcome

Discharge
 In hospital mortality
 Still in hospital

Date of discharge

Date of mortality

Discharge destination

Usual place of residence
 Rehabilitation facility
 Other hospital
 Intermediate care
 Other

Primary cause of death

COVID related
 Not COVID related

Primary cause of death

COVID-19 status at discharge

Known COVID-19 Status at time of discharge

Known
 Unknown

COVID-19 status at time of discharge

Positive
 Negative

Was COVID-19 status newly assessed at discharge?

Yes
 No

How was Covid Status newly assessed at time of discharge?

Swab test
 CXR
 CT

What was the result of COVID-19 swab test at time of discharge

Positive
 Negative
 Pending

Date of swab-test at discharge

What was the result of CXR test for COVID-19 at time of discharge

Positive
 Negative
 Pending

Date of CXR at discharge

What was the result of CT test for COVID-19 at time of discharge

Positive
 Negative
 Pending

Date of CT at discharge

Patient Details

Date of Birth[pres_dob]

Gender[pres_gen]

Follow up

Record ID. Please record this number on your local in house file with associated local record number so that you may return to complete data collection later.

Follow up

- Yes - planned
 Yes - unplanned
 No - not planned
 No - lost to follow up
-

Date of Follow up

Re-admission related to original surgical pathology

- Yes
 No
-

Did patient acquire COVID-19 infection between hospital discharge and the first outpatient clinic?

- Yes
 No
-

Did patient require admission due to COVID-19 infection since discharge?

- Yes
 No
-

Did patient require Intensive Care admission due to COVID-19 infection since discharge?

- Yes
 No
-

Vocal Cord check

- Not performed
 Abnormal
 Normal
-

Is the patient on T3 or T4?

- Yes
 No
-

Is the patient taking Vitamin D or Calcium supplements in order to maintain normocalcaemia at 6 months?

- Yes
 No
-

Persistent Hypercalcaemia

- Yes
 No

Supplement 4. Table of contributing teams and respective numbers of emergency patients entered.

Centre Name	Country	N	% of Cases
Department of General and Vascular Surgery, St Mary's Hospital, Imperial College Healthcare NHS Trust, London.	United Kingdom	826	26.01
Department of Trauma and Orthopaedics, Queen Elizabeth Hospital, Gateshead Health NHS Foundation Trust, Gateshead.	United Kingdom	285	8.97
Department of Gastrointestinal surgery, Southmead Hospital, North Bristol NHS Trust, Bristol.	United Kingdom	182	5.73
Department of General Surgery, Charing Cross Hospital, Imperial College Healthcare NHS Trust, London.	United Kingdom	175	5.51
Department of General Surgery, University Hospital Galway, Galway.	Republic of Ireland	128	4.03
Department of General Surgery, Royal Derby Hospital, University Hospitals Of Derby And Burton, Derby.	United Kingdom	114	3.59
Department of General Surgery, St George's Hospital, St George's University Hospital NHS Foundation Trust, London.	United Kingdom	107	3.37
Department of Upper Gastrointestinal Surgery, Amsterdam UMC, University of Amsterdam, Cancer Center Amsterdam, Amsterdam.	The Netherlands	104	3.27
Department of Trauma and Orthopaedic Surgery, Chelsea and Westminster Hospital NHS Foundation Trust, London.	United Kingdom	95	2.99
Department of Orthopaedic Surgery, Hillingdon hospital, Hillingdon Hospitals NHS Foundation Trust, London.	United Kingdom	91	2.86
Department of General surgery, Worthing Hospital, Western Sussex Hospitals NHS Foundation Trusts, Worthing.	United Kingdom	87	2.74
Carol Davila University of Medicine and Pharmacy, Bucharest, Department of General Surgery, Emergency Clinic Hospital of Bucharest, Bucharest	Romania	86	2.71
Department of General Surgery, St Peter's Hospital, Ashford and St Peter's Hospitals NHS Foundation Trust, Chertsey.	United Kingdom	84	2.64
Department of Hepatopancreaticobiliary Surgery, Addenbrooke's Hospital, Cambridge University Hospitals NHS Foundation Trust, Cambridge.	United Kingdom	78	2.46
Department of General Surgery, East Surrey Hospital, Surrey and Sussex Healthcare NHS Trust, London.	United Kingdom	77	2.42
Department of General Surgery, Whittington Hospital, Whittington Health NHS Trust, London.	United Kingdom	72	2.27
Department of General and Colorectal Surgery, QEOM Margate, East Kent Hospitals University NHS Foundation Trust, Margate.	United Kingdom	61	1.92
Department of Trauma and Orthopaedic Surgery, Ibrahim Malik Teaching Hospital, Khartoum.	Sudan	58	1.82
Department of Trauma and Orthopaedics, St Mary's Hospital, Imperial College Healthcare NHS Trusts, London.	United Kingdom	54	1.70
Department of Emergency and General Surgery, Royal Cornwall Hospitals NHS Trust, Truro.	United Kingdom	52	1.64
Department of General Surgery, Birmingham Heartlands Hospital, Birmingham.	United Kingdom	40	1.26
Department of General Surgery, University of Ilorin Teaching Hospital, Ilorin.	Nigeria	36	1.13
Department of General Surgery, University Hospital Lewisham, Lewisham and Greenwich NHS Trust, London.	United Kingdom	35	1.10
Department of General Surgery, University College Hospital, University College London Hospitals NHS Foundation Trust, London.	United Kingdom	27	0.85
Department of Emergency Surgery, Stoke Mandeville Hospital, Buckinghamshire Healthcare NHS Trust, Aylesbury.	United Kingdom	27	0.85
Department of General Surgery, Sher I Kashmir Institute of Medical Sciences, Srinagar.	India	21	0.66
Department of Hepatopancreaticobiliary Surgery, Hammersmith Hospital, Imperial College Healthcare NHS Trusts, London.	United Kingdom	18	0.57

Department of General Surgery, Afe Babalola University Multisystem Hospital (ABUAD), Ado-Ekiti.	Nigeria	13	0-41
Department of General Surgery, University Hospital Limerick, Limerick.	Republic of Ireland	13	0-41
Department of Surgery, Gazi University Faculty of Medicine, Ankara.	Turkey	11	0-35
Department of General Surgery, Aseer Central Hospital, Abha City.	Saudi Arabia	11	0-35
First Department of Surgery, Semmelweis University, Budapest.	Hungary	10	0-31
Department of Surgery, Colchester General Hospital, East Suffolk and North Essex NHS Foundation Trust, Colchester.	United Kingdom	9	0-28
Department of Vascular Surgery, University Hospital Galway, Galway.	Republic of Ireland	9	0-28
Department of General Surgery, Royal North Shore Hospital, St Leonards.	Australia	8	0-25
Department of Surgery, Saint Savvas Cancer Hospital, Athens.	Greece	7	0-22
Department of Trauma and Orthopaedics, Lady Reading Hospital, Peshawar.	Pakistan	7	0-22
Department of General Surgery, Azienda Unità Sanitaria Locale Ferrara – Università di Ferrara, Ferrara.	Italy	6	0-19
Department of Surgery, AZ Rivierenland Hospital, Bornem.	Belgium	5	0-16
2nd Department of Surgery, Athens Naval and Veterans Hospital, Athens, Greece.	Greece	5	0-16
Department of Pleural and peritoneal Surgery, Northumbria Specialist Emergency Care Hospital, Northumbria Healthcare NHS Foundation Trust, Newcastle upon Tyne.	United Kingdom	5	0-16
Department of General Surgery, Royal Free Hospital, Royal Free London NHS Foundation Trust, London.	United Kingdom	5	0-16
Department of General Surgery, Samsun Training and Research Hospital, Samsun.	Turkey	5	0-16
Department of General surgery, Kanuni Sultan Süleyman Training and Research Hospital, Istanbul.	Turkey	4	0-13
Department of Endocrine Surgery, Churchill Hospital, Oxford University Hospitals NHS Foundation Trust, Oxford.	United Kingdom	4	0-13
Department of Upper Gastrointestinal Surgery, Humanitas Clinical and Research Center IRCCS, Humanitas University, Milano.	Italy	4	0-13
Department of General Surgery, Hospital General Universitario Morales Meseguer, Murcia.	Spain	3	0-09
Department of Endocrine Surgery, Royal North Shore Hospital, St Leonards.	Australia	3	0-09
First Department of Surgery, Laiko General Hospital, National and Kapodistrian University of Athens, Athens.	Greece	2	0-06
Department of Trauma and Orthopaedic Surgery, Whipps Cross Hospital, Barts Health NHS Trust, London.	United Kingdom	2	0-06
Department of Paediatric Orthopaedic surgery, Starship Child Health, Auckland.	New Zealand	1	0-03
Department of Surgery, Damietta Specialized Hospital, Damietta, Egypt.	Egypt	1	0-03
Department of Thoracic Surgery, Glenfield General hospital, University Hospital of Leicester NHS Trust, Leicester.	United Kingdom	1	0-031
Department of Endocrine Surgery, Hammersmith Hospital, Imperial College Healthcare NHS Trust, London	United Kingdom	1	0-031
Department of Colorectal Surgery, Amsterdam UMC, University of Amsterdam, Cancer Center Amsterdam, Amsterdam.	The Netherlands	1	0-031