



Surgery TaTME

Patient seqnr.

|_|_|_|_|_|_|_|_|_|_|_|_|_|_|

Hospital:

Physician:.....

1. Pre-operative

Name of Senior surgeon.....

Date of surgery |_|_|||_|_|||_|_|_|_|

Did you conduct any functional tests? (0=No, 1=Yes) |_|

Did you plan for de-functioning ileostomy? (0=No, 1=Yes)..... |_|

Did you give bowel preparation? (0=No, 1=Yes, enema only, 2= bowel prep + enema)..... |_|

Did you give SDD (Selective Digestive Decontamination) (0=No, 1=Yes) |_|

2. Peri-operative Steps

Do you use prophylactic i.v. antibiotics (no, 1=yes) |_|

Do you rinse the rectum (0=No, 1=Yes)..... |_|

How do you start the operation? (1=Abdominal, 2=Transanal)..... |_|

One team approach (abdominal and transanal) or two team approach* (1=One, 2=Two)..... |_|

* Defined as simultaneous dissection during connection between abdominal and retroperitoneal transanal surgical field, this means the simultaneous use of two team can last 30 min. or more. Does not mean tow team during entire procedure.

3. Abdominal phase

Difficulty operation (0 -10, 0 very easy-10 most difficult case imaginable) |_|_|

Use of robotics for abdominal part (0=No, 1=Yes)..... |_|

Presence of radiation damage (0=No, 1=Yes, 9=NA)..... |_|

Degree of autonomic nerve preservation |_|

1=Hypogastric and later bundles seen and preserved

2= Possible damage to the nerve bundle

3= Significant bundle

4= Unable to visualize

Macroscopic metastasis (0=No, 1=Yes)..... |_|

Macroscopic invasion adj. organs (0=No, 1=Yes)..... |_|

Mobilisation splenic flexure (0=No, 1= Yes, lateral to Medial, 2= Yes, medial to lateral) |_|

Ligation IMV (1= Near Pancreas, 2= Origin IMA)..... |_|

Level of ligation blood supply to left colon and rectum (1= IMA ligation close to aorta, 2= Left colic artery sparing ligation of IMA |_|

Extra mesorectal lymphnode dissection in internal iliac artery (0=No, 1=Yes) |_|

If yes, (1=unilateral, 2= bilateral) |_|

Abdominal dissection TME plane posteriorly (0=None, 1=yes, 1/3, 2=yes, 2/3, 3=yes, total)..... |_|

Do you dissect TME plane anteriorly (0=No, 1= Just peritoneum, 2= Until vesicles, 3= More) |_|

Date:..... Investigator's signature:.....



Surgery TaTME

Patient seqnr.

|_|_|_|_|_|_|_|_|_|_|_|_|_|_|

Hospital:

Physician:.....

- Additional resection to other organs (0=No, 1=Yes)|_|
- If yes stomach (0=No, 1=Yes)|_|
- Duodenum (0=No, 1=Yes).....|_|
- Small bowel (0=No, 1=Yes)|_|
- Appendix (0=No, 1=Yes)|_|
- Omentum (0=No, 1=Yes)|_|
- Peritoneum(0=No, 1=Yes).....|_|
- Abdominal wall (0=No, 1=Yes).....|_|
- Ovaries (0=No, 1=Yes).....|_|
- Uterus (0=No, 1=Yes).....|_|
- Bladder (0=No, 1=Yes).....|_|
- Prostate (0=No, 1=Yes).....|_|

4. Transanal phase

- Transanal port (1=Gelpoint, 2= Rigid, 3=Other)|_|
- Lone star retractor (0=No, 1=Yes).....|_|
- Type of camera (1=0 °, 2=30°, 3=3D)|_|
- Level of purse string below tumor|_|
- 1= 3 cm above proximal anal sphincter
- 2= 0-3 cm above proximal anal sphincter
- 3= within proximal anal sphincter
- 4= within distal anal sphincter
- Purse string open or laparoscopic (1= Laparoscopic, 2= Open)|_|
- Level of transanal dissection (1= 1/3 TME, 2= 2/3 TME, 3= Until promontory)|_|
- Entry of the abdomen (1= Anterior, 2=Posterior, 3= Lateral)|_|
- In Two team approach simultaneous dissection (0=No, 1=Yes, 9=NA).....|_|

- Complications transanally (0=No, 1=Yes)|_|
- Purse string failure(0=No, 1=Yes)|_|
- Bleeding(0=No, 1=Yes)|_|
- Urethra injury(0=No, 1=Yes).....|_|
- Prostate injury(0=No, 1=Yes)|_|
- Rectal perforation(0=No, 1=Yes).....|_|
- Gas embolism(0=No, 1=Yes)|_|
- Nerve injury(0=No, 1=Yes)|_|
- Perforation(0=No, 1=Yes).....|_|

Date:..... Investigator's signature:.....



Surgery TaTME

Patient seqnr.

|_|_|_|_|_|_|_|_|_|_|_|_|_|_|

Hospital:

Physician:.....

Entering wrong plane posterior (0=No, 1=Yes to deep, 2= Yes in mesorectum).....|_|

Entering wrong plane anterior (0=No, 1= Yes, rectal perforation, 2= Yes prostate perforation, 3, Yes urethra injury)|_|

Entering wrong plane lateral (0=No, 1= Yes, into mesorectum, 2= Yes, too deep laterally, 3, Yes urethra injury)|_|

5 Completion

How do you extract the specimen(1= Transanal, 2= Transabdominal)|_|

If transabdominal, extraction site

Pfannenstiel (0=No, 1=Yes)|_|

Midline abdomen (0=No, 1=Yes).....|_|

Right/left lower quadrant (0=No, 1=Yes)|_|

Future ileostomy site (0=No, 1=Yes)|_|

If transabdominal, wound protection (0=No, 1=Yes).....|_|

Diverting ileostomy (0=No, 1=Yes).....|_|

Length rectal stump (cm).....|_|_|

Second purse string (0=No, 1=Yes)|_|

If yes, (1=Open, 2= Laparoscopic)|_|

Anastomosis (1= Stapled, 2= Hand sewn, 2= Non, colostomy)|_|

ICG (Indocyanine green) used (0=No, 1=yes)|_|

If stapled, which stapler was used for configuration of anastomosis|_|

1= EEA hemorrhoidal stapler 33,

2= Circular <31,

3= Circular > 31

If stapled, stapler rows (2= 2 row stapler, 3= 3 row stapler)|_|

Anastomosis configuration (1=End-to-end, 2= Side-to-end)|_|

Anastomosis (1=Coloanal, 2=Colorectal).....|_|

Anastomosis height from ARJ (cm).....|_|_|

Location anastomosis (1= Below ARJ, 2= Including ARJ, 3= Above ARJ).....|_|

Donuts intact (0=No, 1=Yes, 9=NA)|_|

Additional suturing of anastomosis (0=No, 1= Endoluminal)|_|

Total blood loss (ml)|_|_|_|_|

Skin to skin time (total procedure (min).....|_|_|_|

Transanal phase time (min).....|_|_|_|

Conversion (0=No, including pfannenstiel for specimen extraction, 1= Yes, to open surgery)|_|

Reason conversion.....

Performed operative procedure (1= Laparoscopic TME, 2= TaTME, 3=Open)|_|_|

Date:..... Investigator's signature:.....