



Surgery LapTME

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=Yes, 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)..... |_|

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

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 adjacent 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) |_|

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)..... |_|

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



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Bladder (0=No, 1=Yes).....|__|

Prostate (0=No, 1=Yes).....|__|

Intraoperative complications (0=No, 1=Yes)|__|

Bleeding (0=No, 1=Yes)|__|

Ureter injury (0=No, 1=Yes).....|__|

Prostate injury (0=No, 1=Yes)|__|

Rectal perforation (0=No, 1=Yes).....|__|

Anastomosis related problems (0=No, 1=Yes).....|__|

Nerve injury (0=No, 1=Yes)|__|

Perforation tumor (0=No, 1=Yes)|__|

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)|__|

Transanal (0=No, 1=Yes)|__|

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

Wound protection (0=No, 1=Yes).....|__|

Type of stapler used to transect the rectum|__|

1= Laparoscopic linear stapler,

2= Abdominal TA stapler,

3= Lonestar assisted transanal open transection)

How many firings (1=1, 2=2, 3=3, 4=3+)|__|

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

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, cross stapling (0=No, 1=Yes)|__|

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).....|__|

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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).....|_|_|_|

Conversion|_|

0=No, including pfannenstiel for specimen extraction

1=Yes, to open surgery

2= Yes, to TaTME for dissection and anastomosis

3= Yes, to transanal anastomosis

If open, reason conversion

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

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