



### Directions

- Use a #2 soft pencil for marking.
- Text answers must be entered with the web interface.
- All questions must be answered unless otherwise indicated.
- Completely fill in boxes to record answers.

### Question types

- only 1 answer allowed     multiple answers allowed

Internal Use Only  
Not read by scanner

Last name		First name		Gender
Street			M.R.N.	
Country code	Zip code	City		
Occupation	Birthdate (DD.MM.YYYY)		Telephone	

### Level of procedure

- upper cervical     cervicothoracic     thoracic     thoraco-lumbo-sacral     lumbo-sacral     coccyx  
 mid lower cervical     cervico-thoraco-lumbar     thoracolumbar     lumbar     sacral

## Follow-up

**Day**  1  2  3  4  5  6  7  8  9  10  11  12  13  14  15  16  17  18  19  20  21  22  23  24  25  26  27  28  29  30  31  
**Month**  1  2  3  4  5  6  7  8  9  10  11  12    **Year**  00  01  02  03  04  05  06  07  08  09  10  11  12  13  14  15  16

### Follow up interval

- 6 weeks     1 year  
 3 months     2 years  
 6 months     other .....

### Work status

- not at work since OP     resumed work, different job     housewife  
 started partially, same job     has been dismissed     child/student  
 fully reintegrated     retired since OP     other .....  
 resumed work, but quit again     retired before OP

Only comment on those goals/measures which were indicated for the "Goal of surgery" question on the "SURGERY" form.

### Surgical goals/measures achieved

- none  
 pain relief  
 functional improvement  
 neurological improvement  
 cosmetic improvement  
 diagnostic measures  
 other .....

### Surgical goals/measures partially achieved

- none  
 pain relief  
 functional improvement  
 neurological improvement  
 cosmetic improvement  
 diagnostic measures  
 other .....

### Surgical goals/measures not achieved

- none  
 pain relief  
 functional improvement  
 neurological improvement  
 cosmetic improvement  
 diagnostic measures  
 other .....

### Medication

- none     steroids     antibiotics  
 NSAIDs     antidepressives     other .....  
 opiates     vitamin B complex

### Overall outcome (examiner)

- not applicable     good     poor  
 excellent     fair

### Rehabilitation

- none     outpatient rehab / physio     other .....  
 home-based     inpatient rehab / physio

### Decision

- no further follow-up     revision foreseen  
 further follow-up     other primary intervention foreseen

### Comments regarding follow-up

## Complications

### Complications

- no (Answer "no" excludes all remaining questions.)  
 yes

### Time

- early, Op-day - 28 days postop  
 sub-acute, 2 - 6 months  
 late, > 6 months .....

### Type

- sensory disturbance     liquor fistula     malposition of implant  
 motor disturbance     superficial wound infection     recurrence of symptoms  
 sphincter disturbance     deep subfascial wound infection     graft complication  
 non-union     spondylitis     sequelae anaesthesia  
 implant failure     discitis     internal medicine  
 instability     wrong segment     other .....

### Therapeutic consequences

- none  
 non-operative inpatient  
 non-operative outpatient  
 reintervention  
 other .....

### Individual consequences

- none  
 increased pain  
 prolonged impairment  
 reduced social activities  
 permanent impairment  
 other .....

Examiner .....

### Comments regarding complications