



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

Admission / Pathology

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

Main pathology

- degenerative disease fracture/trauma spondylolisthesis infection failed surgery
 deformity pathological fracture inflammation tumor other: specify

Specification of Main Pathology

Only answer questions related to Main Pathology (Main Pathology "other" requires no specification.).

Degenerative Disease	Type of degeneration <input type="checkbox"/> black disc <input type="checkbox"/> spondylarthrosis <input type="checkbox"/> disc degeneration <input type="checkbox"/> spinal stenosis <input type="checkbox"/> disc herniation <input type="checkbox"/> adjacent segment degen. <input type="checkbox"/> spondylosis <input type="checkbox"/> other	Spondylolisthesis	Type of spondylolisthesis <input type="checkbox"/> Type I (congenital, dysplastic) <input type="checkbox"/> Type II (isthmic) <input type="checkbox"/> Type III (degenerative) <input type="checkbox"/> Type IV (traumatic) <input type="checkbox"/> Type V (pathologic) <input type="checkbox"/> Type VI (postsurgical)	Grade of spondylolisthesis <input type="checkbox"/> Grade 0 <input type="checkbox"/> Grade I <input type="checkbox"/> Grade II <input type="checkbox"/> Grade III <input type="checkbox"/> Grade IV <input type="checkbox"/> Spondyloptosis (V)
	Deformity		Type of deformity <input type="checkbox"/> scoliosis <input type="checkbox"/> combined <input type="checkbox"/> kyphosis <input type="checkbox"/> other	Inflammation
(Pathological) Fracture/Trauma		Type of scoliosis <input type="checkbox"/> single curve <input type="checkbox"/> double curve	Infection	
	Predominant etiology <input type="checkbox"/> idiopathic <input type="checkbox"/> posttraumatic <input type="checkbox"/> congenital <input type="checkbox"/> M. Scheuermann <input type="checkbox"/> neuromuscular <input type="checkbox"/> other <input type="checkbox"/> degenerative	Tumor		Type of tumor <input type="checkbox"/> primary malignant <input type="checkbox"/> primary benign <input type="checkbox"/> secondary malignant <input type="checkbox"/> tumor like lesion <input type="checkbox"/> other
Additional fractures w/different treatments require separate forms. Type of (pathological) fracture/trauma <input type="checkbox"/> condylar (C0) <input type="checkbox"/> C2 other fracture <input type="checkbox"/> C0/1 dissoziation <input type="checkbox"/> soft tissue injury neck <input type="checkbox"/> C1 fracture <input type="checkbox"/> fracture C3-L5/S1 <input type="checkbox"/> C1/2 instability <input type="checkbox"/> sacrum fracture <input type="checkbox"/> C2 dens fracture <input type="checkbox"/> other Dens fracture type C3-L5/S1 AO fracture type <input type="checkbox"/> I <input type="checkbox"/> A1 <input type="checkbox"/> B1 <input type="checkbox"/> C1 <input type="checkbox"/> II <input type="checkbox"/> A2 <input type="checkbox"/> B2 <input type="checkbox"/> C2 <input type="checkbox"/> III <input type="checkbox"/> A3 <input type="checkbox"/> B3 <input type="checkbox"/> C3 Pathological fracture due to ... Fracture age <input type="checkbox"/> osteoporosis <input type="checkbox"/> fresh fracture <input type="checkbox"/> tumor <input type="checkbox"/> old fracture <input type="checkbox"/> other <i>(In case of tumor, answer questions "Type of tumor" and "Localization" in section "TUMOR")</i>	Failed surg.		Type of failed surgery <input type="checkbox"/> non-union <input type="checkbox"/> postop. infection <input type="checkbox"/> frontal imbalance <input type="checkbox"/> instability <input type="checkbox"/> implant failure <input type="checkbox"/> other <input type="checkbox"/> neurocompression <input type="checkbox"/> sagittal imbalance	

Comments regarding main pathology:

Most severely affected segment/vertebral body

- | | | | | | | |
|--|---------------------------------|-----------------------------------|----------------------------------|------------------------------------|------------------------------------|--|
| <input type="checkbox"/> not applicable/assessable | <input type="checkbox"/> C3 | <input type="checkbox"/> C7 | <input type="checkbox"/> Th4 | <input type="checkbox"/> Th8 | <input type="checkbox"/> Th12 | <input type="checkbox"/> L4 |
| <input type="checkbox"/> unknown | <input type="checkbox"/> C3 / 4 | <input type="checkbox"/> C7 / Th1 | <input type="checkbox"/> Th4 / 5 | <input type="checkbox"/> Th8 / 9 | <input type="checkbox"/> Th12 / L1 | <input type="checkbox"/> L4 / 5 |
| <input type="checkbox"/> C0 | <input type="checkbox"/> C4 | <input type="checkbox"/> Th1 | <input type="checkbox"/> Th5 | <input type="checkbox"/> Th9 | <input type="checkbox"/> L1 | <input type="checkbox"/> L5 |
| <input type="checkbox"/> C0 / 1 | <input type="checkbox"/> C4 / 5 | <input type="checkbox"/> Th1 / 2 | <input type="checkbox"/> Th5 / 6 | <input type="checkbox"/> Th9 / 10 | <input type="checkbox"/> L1 / 2 | <input type="checkbox"/> L5 / S1 |
| <input type="checkbox"/> C1 | <input type="checkbox"/> C5 | <input type="checkbox"/> Th2 | <input type="checkbox"/> Th6 | <input type="checkbox"/> Th10 | <input type="checkbox"/> L2 | <input type="checkbox"/> S1 |
| <input type="checkbox"/> C1 / 2 | <input type="checkbox"/> C5 / 6 | <input type="checkbox"/> Th2 / 3 | <input type="checkbox"/> Th6 / 7 | <input type="checkbox"/> Th10 / 11 | <input type="checkbox"/> L2 / 3 | <input type="checkbox"/> sacrum (S2-5) |
| <input type="checkbox"/> C2 | <input type="checkbox"/> C6 | <input type="checkbox"/> Th3 | <input type="checkbox"/> Th7 | <input type="checkbox"/> Th11 | <input type="checkbox"/> L3 | <input type="checkbox"/> coccyx |
| <input type="checkbox"/> C2 / 3 | <input type="checkbox"/> C6 / 7 | <input type="checkbox"/> Th3 / 4 | <input type="checkbox"/> Th7 / 8 | <input type="checkbox"/> Th11 / 12 | <input type="checkbox"/> L3 / 4 | |

Extent of lesion

- 1 segment/vertebral body 2-3 segments/vertebral bodies 4-5 segments/vertebral bodies >5 segments/vertebral bodies

Additional pathology

(Answer to question "Main pathology" is excluded.)

- none deformity pathological fracture inflammation tumor
 degenerative disease fracture/trauma spondylolisthesis infection failed surgery
 other: specify

Number of previous spine surgeries

0 1 2 3 4 5 6

Answer "0" excludes both "Previous surgery" questions ("at same level" and "at same hospital").

Previous surgeries at same level

no yes partially

Previous surgeries at same hospital

no yes partially

Previous treatment for main pathology

- none 3-6 mon. conservative
 surgical 6-12 mon. conservative
 < 3 mon. conservative > 12 mon. conservative

Surgeon Assistant

Surgery

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)

SURGICAL PROCEDURE

Surgeon credentials

- specialized spine
- board cert. orthopaedic
- board certified neuro
- orthopaedic in training
- neuro in training
- other

Goal of surgery

- pain relief
- functional improvement
- neurological improvement
- cosmetic improvement
- diagnostic measures
- other

Morbidity state

- unknown
- ASA1 (no disturbance)
- ASA2 (mild/moderate)
- ASA3 (severe)
- ASA4 (life threatening)
- ASA5 (moribund)

Anterior access

- no anterior access
- transoral
- anterior
- anterolateral
- cervicothorac. anterolat.
- cervicothorac. a.lat. w/sternotomy

Posterior access

- no posterior access
- midline
- paramedian
- posterolateral
- other

Technology

- conventional
- MISS/LISS
- loops
- microscope

Blood loss

- unknown
- none
- < 500 ml
- 500 - 1000 ml
- 1000 - 2000 ml
- > 2000 ml

Operation time

- unknown
- < 1 hr.
- 1-2 hrs.
- 2-3 hrs.
- 3-4 hrs.
- 4-5 hrs.
- 5-6 hrs.
- 6-8 hrs.
- 8-10 hrs.
- > 10 hrs.

Components

- yes
- no

Component description

Not needed if SEDICO implant tracking is used.

Supplier: Article No:

Article name:

Surgical Measures

Note: "anterior" / "posterior" refers to location of MEASURES in the spine, NOT to access!

Decompression

- none
- anterior } specify ...
- posterior }
- Location in spine, choose at least one!
- discectomy
- vertebrectomy partial
- vertebrectomy full
- other
- osteotomy
- laminotomy
- hemi-laminectomy
- laminectomy
- facet joint resection partial
- facet joint resection full
- flavectomy
- foraminotomy
- sequestrectomy

Fusion

- none
- anterior } specify ...
- posterior }
- Location in spine, choose at least one!
- interbody fusion between adjct. vertebrae (ant. appr.)
- interbody fusion between adjct. vertebrae (post. appr.)
- interbody fusion between dist. vertebrae (ant. appr.)
- interbody fusion between dist. vertebrae (post. appr.)
- posterolat. fusion
- posterior fusion
- other
- Fusion material**
- none
- bone subst.
- autol. bone
- cement
- allog. bone
- other

Stabilization rigid

- none
- anterior } specify ...
- posterior }
- Location in spine, choose at least one!
- interbody stabil. with cage (ant. approach)
- interbody stabil. with cage (post. approach)
- vertebral body replacement by cage
- plates
- pedicle screws with rod
- pedicle screws with plate
- facet screws
- transarticular screw
- laminar hooks with rod
- pedicle hooks with rod
- lateral mass screw with rod
- lateral mass screw with plate
- odontoid screws
- other

Stabil. motion preserving

- none
- anterior } specify ...
- posterior }
- Location in spine, choose at least one!
- disc replacement
- dynamic stabilizat.
- other

Percutan. measures

- none
- post. } specify ...
- Choose one!
- facet block
- root block
- discography
- vertebroplasty
- kyphoplasty
- other

Other surgical measures

- no
- yes } specify ...
- Choose one!

Surgical notes

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Discharge

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)

(Answer "none" in both "Surgical" and "General complications" excludes all remaining questions.)

Surgical complications

- none
- wrong level
- nerve root damage
- cauda equina damage
- spinal cord damage
- bleeding in spinal canal
- bleeding outside spinal canal
- malposition of implant
- dural lesion
- wound infection
- implant failure
- other

General complications

- none
- anaesthesiological
- cardiovascular
- pulmonary
- cerebral
- kidney/urinary
- liver/GI
- death
- other

Measures taken

- none
- intervention during surgery
- re-intervention after surgery
- conservative medical
- conservative functional
- extended hospital stay
- other

Surgical intervention/re-intervention

- none
- hematoma evacuation
- abscess drainage
- metal removal
- re-implantation
- refusion
- suture
- other

Comments regarding discharge

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Status of Complications

- Surgical** resolved improved persisting
- General** resolved improved persisting