SPINE TANGO



FOLLOW-UP 2011

Directions						40	
 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. 		ı≽ ner	Last name	Last name First name Street		Gender	
		Internal Use Only lot read by scanner	Street			M.R.N.	
	inswers.	Internal U Not read by	Country code Zip	code	City		
c only 1 answer allowed m	uitipie answers allowed	Not	Social security nu	mber	Birthdate (DD.MM.YYYY)		MM.YYYY)
Level of intervention — management of the level of t	andatory information						
• •			oracic oracolumbar	C > thoraco-l		lumbo-sacral sacral	с э соссух
Follow-up							
_	୦ (୫) (୧) ପଉ ପୀ) ପଥ ପଃ ପ ୦ (୫) (୧) ପଉ ପୀ) ପଥ Ye ;		5) (16) (17) (18) (19 1) (12) (13) (14) (15			0 (28) (29) (30) (31)
C ⊃ 6 weeks C ⊃ 1 year C ⊃ 3 months C ⊃ 2 years C ⊃ 6 months C ⊃ other (yrs. (Ex. 4 months=0.3	3 yrs. (4/12)) c resumed	artiall egrat work	ly, same job led s, but quit again	C) has beer C) retired si C) retired be	nce OP efore OP	C o child/s	tudent
	se goals/measures which were						et ashiswad
Therapeutic goals/measures ach none axial pain relief peripheral pain relief functional improvement sensory improvement bladder/sex function improvem spinal stabilization stop deformity progression prophylactic decompression cosmetic improvement diagnostic measures other	none axial pain periphera functional motor imp sensory in ent bladder/s spinal sta stop defo	n relied al paid limp prove mpro sex fu abilizat ormity ctic d impr c me	n relief rovement ement vement inction improvem ation r progression ecompression ovement asures		Therapeutic goa none axial pain re peripheral p functional ir motor impre sensory imp bladder/sex spinal stabi stop deform prophylactic cosmetic im diagnostic r other	elief pain relief mprovement provement of function improvilization nity progression of decompression provement measures	vement
■ NSAID,Paracetamol (WHO I)	strong opiates (WHO III) steroids	□an	amin B complex tibiotics	Overall outc Onot appli Oexcellent			oor
Rehabilitation ☐ none ☐ outpatient rehab / physio ☐ home-based ☐ inpatient rehab / physio ☐ other				Decision C on o further follow-up C of further follow-up C of further follow-up C of further follow-up C of the primary intervention foreseen			
Comments regarding follow-up							
 Complications 							
Complications one (Answer "no" excludes all remaining questions.) yes				Time C D early, Op-day - 28 days postop C D sub-acute, 2 - 6 months C D late, > 6 months			
Type sensory dysfunction spondylitis discitis oldscitis bowel / bladder dysfunction epidural her extravertebr or implant failure wrong level instability implant malp CSF leak / pseudomeningocele wound infection superficial graft complicit wound infection deep sequelae are			hematoma sition symptoms tion	adjac. segment pathology recurrent tumor decompensation of spine cardiovascular gastrointestinal central nervous system fx vertebral structures thrombembolism other			
Therapeutic consequences () none () non-operative inpatient () non-operative outpatient () reintervention () other Comments regarding complications Individual consequences Individual consequences Increased pain In			es	Examiner			
Comments regarding complication	ons						