Directions
- Use a #2 soft pencil for marking.
- Text answers must be entered with the web interface.
- All questions in blue must be completed.
- Completely fill in boxes to record answers.

Question types
- only 1 answer allowed
- multiple answers allowed
- mandatory information

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

Follow-up

<table>
<thead>
<tr>
<th>Day</th>
<th>Month</th>
<th>Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>☐</td>
<td>☐ 1 year</td>
<td></td>
</tr>
<tr>
<td>☐</td>
<td>☐ 2 years</td>
<td></td>
</tr>
<tr>
<td>☐</td>
<td>☐ other (yrs.)</td>
<td></td>
</tr>
</tbody>
</table>

Work status
- not at work since OP
- started partially, same job
- fully reintegrated
- resumed work, but quit again
- retired since OP
- other

Therapeutic goals/measures achieved
- none
- axial pain relief
- peripheral pain relief
- functional improvement
- motor improvement
- sensory improvement
- bowel / bladder function improvement
- spinal stabilization
- stop deformity progression
- deformity correction
- prophylactic decompression
- cosmetic improvement
- diagnostic measures
- other

Therapeutic goals/measures partially achieved
- none
- axial pain relief
- peripheral pain relief
- functional improvement
- motor improvement
- sensory improvement
- bowel / bladder function improvement
- spinal stabilization
- stop deformity progression
- deformity correction
- prophylactic decompression
- cosmetic improvement
- diagnostic measures
- other

Therapeutic goals/measures not achieved
- none
- axial pain relief
- peripheral pain relief
- functional improvement
- motor improvement
- sensory improvement
- bowel / bladder function improvement
- spinal stabilization
- stop deformity progression
- deformity correction
- prophylactic decompression
- cosmetic improvement
- diagnostic measures
- other

Complications

<table>
<thead>
<tr>
<th>Type</th>
<th>Individual consequences</th>
</tr>
</thead>
<tbody>
<tr>
<td>sensory dysfunction</td>
<td>none</td>
</tr>
<tr>
<td>motor dysfunction</td>
<td>increased pain</td>
</tr>
<tr>
<td>bowel / bladder dysfunction</td>
<td>prolonged impairment</td>
</tr>
<tr>
<td>non-union</td>
<td>reduced social activities</td>
</tr>
<tr>
<td>implant failure</td>
<td>permanent impairment</td>
</tr>
<tr>
<td>instability</td>
<td>other</td>
</tr>
<tr>
<td>CSF leak / pseudomeningocele</td>
<td>none</td>
</tr>
<tr>
<td>wound infection superficial</td>
<td>none</td>
</tr>
<tr>
<td>wound infection deep</td>
<td>none</td>
</tr>
</tbody>
</table>

Examiner

Comments regarding complications

Comments regarding follow-up

Medication for spinal surgery/pathology
- none
- strong opiates (WHO III)
- vitamin B complex
- NSAID, Paracetamol (WHO I)
- steroids
- weak opiates (WHO II)
- antidepressives
- other

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

Overall outcome (examiner)
- not applicable
- good
- poor
- excellent
- fair

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

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

Type
- sensory dysfunction
- motor dysfunction
- bowel / bladder dysfunction
- non-union
- implant failure
- instability
- CSF leak / pseudomeningocele
- wound infection superficial
- wound infection deep
- spondylitis
- discitis
- epidural hematoma
- extradural hematoma
- wrong level
- implant malposition
- recurrence of symptoms
- graft complication
- sequelae anaesthesia
- adjacent segment pathology
- recurrent tumor
- decomposition of spine
- cardiovascular
- gastrointestinal
- central nervous system
- fx vertebral structures
- thromboembolism
- other

Comments regarding complications

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