



Use with Appendix B (Dat	Report For							REDCap unique ID													
	a Dictionary) to help data collection. Section 1: Pre-operative data fields							Data collection period													
Age	Sex 🗆	M DF	ASA			BMI		Frailty	-1-2-	3-4-5-	_6_7_8_										
Age						i	 חווי	Trait,		504050											
Comorbidities (Tick <u>all</u> that apply)	□ MI □ CHF □ PVD □ CVA/TIA □ Dementia □ COPD □ Hemiplegia □ Leukaemia □ Lymphoma □ HIV/AIDS □ H								ute cholecy	e cholecystitis or											
	Diabetes mellitus 🛛 🗆 Diet-controlled 🗆 Non-insulin 🗆 Insu							History of acute cholecystitis or cholangitis			🗆 Yes 🗆 N										
	Solid tumour 🛛 Localised 🗆 Metastat																				
	Liver dise	Liver disease					Caucana			4h h:l:											
	CKD						Number of			admissions with biliary in previous 12 months											
								prior to surgery													
					icated ⊓ No -	- patient declined 🗆 Unknown															
Descusation	USS:  □ Yes □ No - not available □ No - not indicated □ No CT: □ Yes □ No: not available □ No: not indicated □ No:																				
Preoperative imaging						patient decline															
(Tick <u>all</u> that apply)		ERCP: 🗆 Yes 🗆 No: not available 🗆 No: not indicated 🗆 No: patient declined 🗆 Unknown																			
		EUS: □ Yes □ No: not available □ No: not indicated □ No: patient declined □ Unknown HIDA: □ Yes □ No: not available □ No: not indicated □ No: patient declined □ Unknown																			
Imaging findings	🗆 Ga	allstones r			lder 🗆 Perichole						n (1dp))										
	First s	symptom	onset and	admission:	1	Irgency															
Days between	-			o operate: _	0	Urgency  □ Elective □ Delayed of surgery □ Emergency (patient was on elective waiting list? □ Yes □ N															
	•			surgery: _		• •	-	· · ·		· · · · ·											
Indication for	E				Tokyo grade: □ us cholecystitis						No)										
surgery	🗆 Gall					nta criteria doci			es □ No)												
					ion 2: Intraoper						,										
					aneous 🗆 Intra					n Yes - I	Prophylactic										
Mode of		🗆 Regi	ional ( <b>Rou</b> t	•	elated □ regiona	al nerve blo	ock)	Intrao			tra-op spillag										
anaesthesia (Tick all that apply)	General	inhaled ( <b>1</b>	vne: 🗆 sev		dation nalothane □ des	flurane 🗆 N	l20 □ isoflura	antik	oiotics	□ Yes -	cholecystitis										
(There and that apply)		Innaicu (I			Volatile Anaes					[	⊐ No										
					ecialty: 🗆 Gener						)										
Primary operator	🗆 Surgical trainee (Grade: 🗆 Senior 🗆 Junior; Training operation? 🗆 Yes 🗆 No; Consultant present? 🗆 Yes 🗆 No)																				
, ,	Numł	per of cho	lecvstecto	mies nerfor	med by primary	□ Non-sui		rocedure: □ 0-5	0 □ 51-100	0 - 101-200	0 □ >200										
					n not trained in																
Operative	Open cor	nversion (	Why? 🗆 Si	uboptimal vi	ew 🗆 Adhesions	s 🗆 Unable	to safely disse	ect CVS 🗆 Susp	ected BDI	Pneumop	eritoneum no										
approach	tolerate										□ Open conversion ( <b>Why?</b> □ Suboptimal view □ Adhesions □ Unable to safely dissect CVS □ Suspected BDI □ Pneumoperitoneum not tolerated □ Bleeding □ Bowel injury □ Equipment failure □ Suspected or actual cholecystoduodenal or cholecystocolonic fistula										
				□ Laparoscopic ( <b>Type</b> : □ Standard □ SILS; <b>Gasless?</b> □ Yes □ No; <b>Reusable equipment</b> : □ Yes □ No) □ Robotic ( <b>Type</b> : □ Standard □ SILS; <b>Gasless?</b> □ Yes □ No; <b>Reusable equipment</b> : □ Yes □ No)																	
				$(\mathbf{I}\mathbf{v}\mathbf{D}\mathbf{e}) + \mathbf{S}\mathbf{i}$	andard 🗆 SILS: <b>(</b>	Gasless? □ \	∕es ⊓ No: <b>Re</b> ι														
Intropporativo					andard 🗆 SILS; <b>(</b>	Gasless?															
Intraoperative difficulty (Nassar)		CVS	obtained		If No, which cr	□ Yes □ i <b>teria was n</b>	No n <b>et? (Tick <u>all</u> t</b> l	usable equipme hat apply)	nt: 🗆 Yes 🗆	No)											
		CVS succe			If No, which cri □ Clearance	□ Yes □ i <b>teria was n</b> e of the hep	No n <b>et? (Tick <u>all</u> tl</b> patocystic tria	usable equipme hat apply) angle	nt: 🗆 Yes 🗆 Was		□ Yes □ N										
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## Section 4: BDI data fields

GECXO

BDI identified at	Section 4: BDI data fields									
30-day follow-up of index cholecystectomy	□ Yes ( <u>if yes, please fill in the rest of the data points below</u> ) □ No ( <b>Was BDI identified at one-year of index cholecystectomy</b> : □ Yes □ No ( <u>if yes, please fill in the rest of the data points below</u> )									
Presentation of BDI	□ Intraoperatively □ Controlled bile leak from abdominal drain □ Abdominal pain due to uncontrolled bile leak □ Obstructive jaundice or cholangitis □ Intra-abdominal abscess or biloma Days from index cholecystectomy to diagnosis (0 = intraoperatively)									
BDI grade (Strasberg)	□ A □ B □ C □ D □ E1 □ E2 □ E3 □ E4 □ E5	□ A □ B □ C □ D □ E1 □ E2 □ E3 Concomitant vascular injugy □ Yes (□ Right hepatic artery □ Common hepatic artery □ Main portal vein □ Right por							ht portal vein)	
Imaging modality to investigate and confirm BDI	OTC      USS      MRCP      CT      ERCP      PTC     Nuclear medicine scan      Tubogram     None     Discussion with     specialist HPB     centre     ON     Not required - Injury occurred at specialist HPB									
Management of BDI (Tick <u>all</u> that apply)	<ul> <li>ERCP alone (Days after index cholecystectomy: )</li> <li>ERCP and stent (Days after index cholecystectomy: )</li> <li>PTC (Days after index cholecystectomy: )</li> <li>Washout only (Days after index cholecystectomy: )</li> <li>Surgical repair (Days after index cholecystectomy: )</li> </ul>									
Specialty of surgeon performing BDI repair	□ HPB surgeon □ UGI surgeon □ General surgeon	Method of repair	□ Roux-en-Y He □ CBD repair □ CBD repai □ CBD end to e □ Hepaticod	without T- ir with T-tu end anasto	tube ube mosis	Vascular repair	□ Yes □ No			
One-year complications (Tick <u>all</u> that apply)	□ Stricture formation ( <b>Days from repair to complication</b> : ) □ Cholangitis ( <b>Days from repair to complication</b> : ) Anastomotic leakage ( <b>Days from repair to complication</b> : ) □ Intra-abdominal abscess or biloma ( <b>Days from repair to complication</b> : ) □ Re-repair ( <b>Days from repair to complication</b> : )									
			Section 5: H	istology da	ata fields					
Postoperative histology	□ Not sent for examination □ Sent for examination ( <b>Indication</b> : □ Routine □ Selective; <b>Days from index cholecystectomy to histology result</b> : ; <b>Result</b> : □ Benign □ Malignant ( <u>if malignant, please fill in the rest of the data points below</u> )									
Staging investigations after index cholecystectomy	<ul> <li>CT thorax abdomen pelvis (Days from histology result to staging: )</li> <li>MRI liver (Days from histology result to staging: )</li> <li>PET-CT (Days from histology result to staging: )</li> <li>Staging laparoscopy (Days from histology result to staging: )</li> </ul>									
TNM grade (AJCC 8 <sup>th</sup> edition)	T category: □ Tis □ T1a (lamina propria) □ T1b (muscularis) □ T2a (peritoneal side) □ T2b (hepatic side) □ T3 □ T4 N category: □ N0 □ N1 (1-3 nodes) □ N2 (>3 nodes) M category: □ M0 □ M1									
Discussed at MDT	□ Yes □ No Adjuvant treatment □ Chemotherapy □ Radiotherapy □ None									
Revisional surgery	□ Yes □ No - not required □ No - unresectable tumour									
Type of revisional surgery (Tick <u>all</u> that apply)	( <b>Extent</b> : □ Liver bed □ Bile duct		histol to re	ys from ogy result evisional urgery		<u>If revision</u>	al surgerv			
Pathology results	Resection margin status:   R0  R1  R2 Lymphovascular invasion:  Yes  No Perineural invasion:  Yes  No									
Recurrence on imaging at one year	□ Yes ( <b>Days from surgery to recurrence</b> : ) □ No									
			Section 6: C	ne-year o	utcomes					
Highest one-year Clavien-Dindo (CD)	□ IIIa (F □ II □ IVa □		Total number of readmissions							
One-year complications (Tick <u>all</u> that apply)	□ IVa □ IVb □ V (Postop day of death: ) □ Surgical site infection (CD Grade: □ I □ II □ IIIa □ IIIb □ IVa □ IVb □ V) □ Pulmonary complications (CD Grade: □ I □ II □ IIIa □ IIIb □ IVa □ IVb □ V) □ Bile leak (CD Grade: □ I □ II □ IIIa □ IIIb □ IVa □ IVb □ V) □ Biliary stricture (CD Grade: □ I □ II □ IIIa □ IIIb □ IVa □ IVb □ V) □ Bleeding (CD Grade: □ I □ II □ IIIa □ IIIb □ IVa □ IVb □ V) □ Intra-abdominal collection (CD Grade: □ I □ II □ IIIa □ IIIb □ IVa □ IVb □ V) □ Acute pancreatitis (CD Grade: □ I □ II □ IIIa □ IIIb □ IVa □ IVb □ V)									