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| **Family history of disease of aorta**:  Aneurysm  Dissection  Both Aneurysm and Dissection  Sudden Death  Unknown  None |
| **Patient’s genetic history**:  Marfan  Ehlers-Danlos  Loeys-Dietz  Non-Specific familial thoracic aortic syndrome   Aortic Valve Morphology  Turner syndrome  Other  Unknown  None  |
| **Prior aortic intervention:**  |  Yes  No  Unknown (If Yes ↓) |
| Location | Previous Repair Type | Current Procedure r/t Repair failure(If Yes ↓) | Disease progression(If Yes ↓) |
|  | Select all that apply | Select all that apply | Select all that apply |
|  Root (Zone 0 –A) |  Open  Endovascular  Hybrid  |  Yes  No  |  Yes  No  |
|  Ascending (Zone 0 – B&C) |  Open  Endovascular  Hybrid  |  Yes  No  |  Yes  No  |
|  Arch (Zones 1,2,3) |  Open  Endovascular  Hybrid  |  Yes  No  |  Yes  No  |
|  Descending (Zones 4,5) |  Open  Endovascular  Hybrid |  Yes  No  |  Yes  No  |
|  Suprarenal abdominal(Zones 6,7) |  Open  Endovascular  Hybrid  |  Yes  No  |  Yes  No  |
|  Infrarenal abdominal(Zone 8,9,10,11) |  Open  Endovascular  Hybrid  |  Yes  No  |  Yes  No  |
|  **Current Procedure with Endoleak involvement:**  | Type I → Ia-proximal  Ib-distal  Ic-iliac occluder |
| Type II →  IIa  Iib |
| Type III → IIIa IIIb |
| Type IV  |
| Type II  |
| **Current Procedure with Aorta Infection** |  Graft infection  Valvular endocarditis  Nonvalvular endocarditis  Native aorta Multiple infection types |
| **Current Procedure with Trauma** |  Root  Ascending  Arch  |  Descending  Thoracoabdominal  Abdominal |
| **Primary Presenting Symptom:**  Pain  CHF  Cardiac Arrest  Syncope Infection  Asymptomatic   Injury related to Surgical Complication Neuro Deficit Other Unknown  (If Neuro Deficit→)  Stroke Limb numbness Paralysis Hoarseness (acute vocal cord dysfunction) |
| **Other - PRE-PROCEDURAL INFORMATION (Not Aneurysm or Dissection Case)** |
| **Other Reason :**  Valvular Dysfunction  Stenosis/Obstruction  Intramural Hematoma Coarctation  Endoleak Infection   Injury related to Surgical Complication/Perforation  Trauma  |

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| **Additional Anatomical Information** |
| **Root:** 🞎Aorto-annular ectasia  🞎Asymmetric Root Dilation (if yes→) 🞎Right 🞎Left 🞎Non-coronary 🞎Sinus of Valsalva aneurysm (if yes→) 🞎Right 🞎Left 🞎Non-coronary |
| **Arch Anomalies Type(s): select all that apply:** 🞎Arch Type Right 🞎Aberrant Right Subclavian 🞎Kommerell/Ductus Bulge 🞎Variant vertebral origin 🞎Aberrant Left Subclavian 🞎Bovine  |
| **Patent Internal Mammary Artery Bypass Graft**  Yes  No  N/A |
| **Ascending:** 🞎 Asymmetric Dilatation 🞎 Proximal coronary artery bypass grafts |
| **Measurements (Largest Diameter)**  |
| **Treated Zone with the Largest Diameter:** 🞎 Below STJ 🞎STJ-midascending 🞎 Midascending-distal ascending 🞎Zone 1 🞎 Zone 2 🞎Zone 3  🞎 Zone 4 🞎Zone 5 🞎Zone 6 🞎Zone 7 🞎Zone 8 🞎 Zone 9 🞎 Zone 10 🞎Zone 11 **Measurement\_\_\_\_\_\_\_\_mm Method Obtained:** 🞎 3D or 4D Reconstruction 🞎PreOp CT 🞎 PreOp MRI 🞎PreOp Echo 🞎 Intra Operatively  |
| **Proximal to Treated Zone(s) (Largest Diameter)** 🞎 Below STJ 🞎STJ-midascending 🞎 Midascending-distal ascending 🞎Zone 1 🞎 Zone 2 🞎Zone 3  🞎 Zone 4 🞎Zone 5 🞎Zone 6 🞎Zone 7 🞎Zone 8 🞎 Zone 9 🞎 Zone 10 🞎Zone 11 **Measurement\_\_\_\_\_\_\_\_mm Method Obtained:** 🞎 3D or 4D Reconstruction 🞎PreOp CT 🞎 PreOp MRI 🞎PreOp Echo 🞎 Intra Operatively |
| **Distal to Treated Zone(s) (Largest Diameter**🞎 Below STJ 🞎STJ-midascending 🞎 Midascending-distal ascending 🞎Zone 1 🞎 Zone 2 🞎Zone 3  🞎 Zone 4 🞎Zone 5 🞎Zone 6 🞎Zone 7 🞎Zone 8 🞎 Zone 9 🞎 Zone 10 🞎Zone 11 **Measurement\_\_\_\_\_\_\_\_mm Method Obtained:** 🞎 3D or 4D Reconstruction 🞎PreOp CT 🞎 PreOp MRI 🞎PreOp Echo 🞎 Intra Operatively |

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| **Procedural Information** |
| 🞎 **Root Procedure** 🞎 Root Replacement with Coronary Ostial Reimplantation (If Yes ↓)

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|   Composite Valve Conduit (If Yes →)  Mechanical Stented Valve Conduit Stentless Valve Conduit Stentless Biologic Full Root Homograft Root Replacement  Autograft with Native Pulmonary Valve (Ross)  🞎Valve-sparing root operation (If Yes →) 🞎Reimplantation (David) 🞎Remodeling (Yacoub) 🞎Reconstruction (Florida Sleeve)  |
| 🞎 Coronary Reimplantation (If Yes ↓)  🞎Direct to root prosthesis (Button) 🞎With vein graft extension (SVG Cabrol) 🞎With Dacron graft extension (Classic Cabrol) |
| 🞎Major root reconstruction/debridement without coronary ostial reimplantation 🞎Replacement of non-coronary sinus (Modified Wheat/Modified Yacoub) |

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| **Endo Procedure Information** |
| Access:  Femoral  Iliac  Abdominal Aorta  Lt. Subclavian/Axila  Rt. Subclavian/Axila  Ascending Aorta Carotid LV Apex |
| 🞎 Percutaneous  |
| **Proximal and Distal Landing Zones:** (P = Proximal) (D=Distal) |
| BLWSTJ | STJ-Mid | Mid-Dist. | **1** | **2** | **3** | **4** | **5** | **6** | **7** | **8** | **9** | **10** | **11** |
|  **Ascending TEVAR:**  Dedicated IDE  Off Label Stent  No |
|  **Arch Vessel Management** |
| **Innominate:**  Native Flow  Endovascular Branch Graft  Endovascular Parallel Graft  Fenestrated Extra-anatomic Bypass → Aorta-Innominate  Aorta-right carotid Aorta- right subclavian  Right Carotid- Right Subclavian  Other No Flow Restored | **Left Carotid:** Native Flow  Endovascular Branch Graft  Endovascular Parallel Graft  Fenestrated Extra-anatomic Bypass → Aorta- left carotid   Innominate- left carotid  Right carotid- Left carotid  Other  No Flow Restored |
| **Left Subclavian:**  Native Flow  Endovascular Branch Graft  Endovascular Parallel Graft  Fenestrated  No Flow Restored Extra-anatomic Bypass → Aorta- left subclavian  Left carotid- left subclavian  Other |
| **Visceral Vessel Management**  |
| **Celiac:** Native Flow  Endovascular Branch Graft  Endovascular Parallel Graft  Fenestrated  Extra-anatomic Bypass → Aorta- celiac  Iliac-celiac  Other  No Flow Restored | **Superior Mesenteric:**  Native Flow  Endovascular Branch Graft  Endovascular Parallel Graft  Fenestrated Extra-anatomic Bypass → Aorta- superior mesenteric  Iliac- superior mesenteric  Other  No Flow Restored |
| **Right Renal:** Native Flow  Endovascular Branch Graft  Endovascular Parallel Graft  Fenestrated Extra-anatomic Bypass →  Aorta- right renal  Iliac- right renal  Other No Flow Restored | **Left Renal:**  Native Flow  Endovascular Branch Graft  Endovascular Parallel Graft  Fenestrated  Extra-anatomic Bypass → Aorta- left renal  Iliac – left renal  Other No Flow Restored |
| **Right Iliac:** Native Flow  Bifurcated Graft  Extra-anatomic Bypass → Femoral- Femoral Other No Flow Restored | **Left Iliac:** Native Flow  Bifurcated Graft  Extra-anatomic Bypass → Femoral- Femoral Other No Flow Restored |
| **Internal iliac Preserved:**  Right Iliac only Left Iliac only Both No |
| **Other Visceral Vessel(s) Extra-anatomic Bypass:** Aorta-other Iliac-other Other |
| **Planned Staged Hybrid:** Yes No  |
| **Other Endovascular Procedural Information** |
|  Dissection proximal entry tear covered Endoleak at end of procedure → Type:  Ia Ib  II III IV  V  Conversion to open → Deployment failure Endoleak Rupture Occlusion/loss of branch Intraop Dissection Extension →  None Antegrade Retrograde. Both Unintentional rupture of dissection septum → Below STJ STJ-midascending Midascending-distal ascending  Zone 1  Zone 2   Zone 3 Zone 4 Zone 5  Zone 6 Zone 7 Zone 8 Zone 9 Zone 10 Zone 11 |
| **Additional Procedure Information (Check all that apply):** |
|  🞎 Spinal drain placement → 🞎 Pre-Aortic procedure 🞎 Post-Aortic procedure  🞎 IntraOp Motor Evoked Potential → Documented MEP abnormality → 🞎 Yes 🞎 No  🞎 IntraOp Somatosensory Evoked Potential → Documented SEP abnormality → 🞎 Yes 🞎 No  🞎 IntraOp EEG → Documented EEG abnormality → 🞎 Yes 🞎 No 🞎 Unknown 🞎 IVUS Performed Intra-Op 🞎 IntraOp Transcutaneous Doppler Performed Intra-Op 🞎 IntraOp Angiogram → Volume of Contrast \_\_\_\_\_\_\_\_\_ml Fluoro time\_\_\_\_\_\_\_\_\_\_\_min 🞎 Endovascular Balloon Fenestration of the Dissection Flap: PreOp IntraOp PostOp IntraOp |