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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 ↓)   |  | | --- | |  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) | | | | | | | | | | | | | | | |
| **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) | | | | | | | | | | | | | | |
| BLW  STJ | 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 | | | | | | | | | | | | | | |