

**The Society of Thoracic Surgeons**

**General Thoracic Surgery Database**

**Data Collection Form Version 5.21.1**



Blue Highlight – Field Added Green Highlight – Field Moved

 \*\* - Risk Model variable **BLUE Underlined Fields – Required for record inclusion**

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| **A. Demographics** |
| Patient ID: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_PatID (90) | Medical Record #:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ MedRecN (100) |
| First Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ PatFName (110) | Middle Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_PatMName (120) | Last Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ PatLName (130) |
| SSN/National Identifier Known 􀀀 Yes 􀀀 No 􀀀 Pt. Refused *(If Yes →)* SSNKnown (140)  | SSN:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ SSN (150) |
| Permanent Street Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ PatAddr (160) | City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_PatCity (170) | State/ Region: \_\_\_\_\_\_\_\_\_\_\_\_PatRegion (180) |
| Country: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ PatientCountry (190) | Patient Postal Code:\_\_\_\_\_\_\_\_\_ PostalCode (200) |
| Patient participating in STS-related clinical trial: 🞎 None 🞎 Trial 1 🞎 Trial 2 🞎 Trial 3 🞎 Trial 4 🞎 Trial 5 🞎 Trial 6 ClinTrial (210) *(If not None →)* Clinical trial patient ID: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  ClinTrialPatID (220) |
| Date of Birth:\_\_\_\_/\_\_\_\_/\_\_\_\_\_\_ (mm/dd/yyyy)DOB (230) (mm/dd/yyyy)  | **Age:** \*\*\_\_\_\_\_\_\_\_Age (240) | **Gender:** \*\*  Male  Female Gender (250) |
| **Is the Patient's Race Documented**? 􀀀 Yes 􀀀 No 􀀀 Patient Declined to Disclose *(If Yes, select all that apply ↓)*RaceDocumented (260) |
| **Race\*\***:RaceMulti (270) |  White/Caucasian  |  Black/African American \*\*  |
|  Asian  |  American Indian/Alaskan Native  |
|  Native Hawaiian/Pacific Islander  |  Other  |
| Hispanic or Latino Ethnicity:  Yes  No  Not Documented Ethnicity (340) |
| **B. Admission** |
| **Admission Status:**  Inpatient  Outpatient / ObservationAdmissionStat (350) | *(If Inpatient →)* AdmitDt (360)  | Admission Date: \_\_\_\_/\_\_\_/\_\_\_\_\_ *(mm/dd/yyyy)* |
| **Payor:** Indicate the **Primary** Payor: PayorPrim (370) | *(If Primary Payor is not None/Self↓)*Indicate the **Secondary (supplemental)** Payor: PayorSecond (420) |
|  None/Self |  None/Self |
|  Medicare (includes commercially managed options) |  Medicare (includes commercially managed options) |
| *(If Medicare →)* | Commercially Managed Medicare Plan: Yes No *(If No ↓)*ComMngMedPlnPrim (380) | *(If Medicare →)* | Commercially Managed Medicare Plan: Yes No *(If No ↓)*ComMngMedPlnSec (430) |
|  | HICN/MBI Known:  Yes  No *(If Yes ↓)*HICNMBIKnown (390) |  | HICN/MBI Known:  Yes  No *(If Yes ↓)*HICNMBIKnownSec (440) |
|  | HICN/MBI: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_HICNMBI (400) |  | HICN/MBI: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_HICNMBINumberSec (450) |
| Primary Payor Medicare Part B:  Yes  No PrimMCareFFS (410) | Secondary Payor Medicare Part B:  Yes  No SecondMCareFFS (460) |
| Medicaid (includes commercially managed options) Military Health Commercial Health Insurance Health Maintenance Organization Non U.S. Plan Other |  Medicaid (includes commercially managed options) Military Health Commercial Health Insurance Health Maintenance Organization Non U.S. Plan Other |
| Surgeon Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Surgeon (470) | **Surgeon’s National Provider ID:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_SurgNPI (480) |
| **Taxpayer ID#:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_TIN (490) |
| Hospital Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_HospName (500)*(If Hospital Name →)* | Hospital Region:\_\_\_\_\_\_\_\_\_\_\_\_ HospStat (510) |
| Hospital Postal Code:\_\_\_\_\_\_\_\_\_\_\_\_\_ HospZIP (520) |
| Hospital National Provider ID:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ HospNPI (530) |
| **C. Pre-Operative Evaluation** |
| Height: \*\*\_\_\_\_\_\_\_\_\_\_\_(cm) HeightCm (540) | Weight:\*\*\_\_\_\_\_\_\_\_\_\_(kg) WeightKg (550) | Calculated BMI (system calculation) \_\_\_\_\_\_CalculatedBMI (560) |
| Prior Surgical History in Planned Operative Field Yes   No   Reop (580) |
| **Cardiopulmonary History**  |
| **History of Cardiopulmonary Disease** *(*Select all that apply or ‘None’ *↓*) HistCarPulDis (590) |
|   |  None  |  Hypertension\*\*  |  Coronary Artery Disease (CAD)\*\* |
|  Atrial Fibrillation within the last year; with or without treatment |  Pulmonary Hypertension |  Congestive Heart Failure (CHF)\*\* *(If CHF →)* | EF \_\_\_\_\_\_% EF (600) |
|  Myocardial Infarction |  Aortic Valve Disease |  Mitral Valve Disease |
|  Tricuspid Valve Disease |  Pulmonic Valve Disease |  Interstitial Fibrosis/ Interstitial Lung Disease  |
| **Vascular History**  |
| **History of Vascular Disease**  *(*Select all that apply or ‘None’ *↓*) HistVasDis (610) |
|  |  None  |
|  Major Aortic or Peripheral Vascular Disease (PVD) \*\*  |
|  Deep Vein Thrombosis/Pulmonary Embolism (DVT/PE) |
|  Transient Ischemic Attack (TIA) |
|  Cerebrovascular Accident (CVA) |
| *(If CVA →)* | Permanent Neurologic impairment  Yes  No PNI (620) |
| **Endocrine / GI / Renal History**  |
| **History of Endocrine/GI/Renal Disease***(*Select all that apply or ‘None’ *↓*)HistEndoGiRenDis (630) |
|  |  None |
|  |  Diabetes \*\*  *(If Diabetes→)* | Type of therapy: DiabCtrl (640)  |  None  Diet Only Oral  Insulin  Other Subcutaneous Medication  Other Unknown  |
|  Liver Dysfunction  |
|  Dialysis\*\* |
| **Cancer History**  |
| **History of Cancer** *(*Select all that apply or None *↓*) HistCancer (650) |
|  |  None |
|  |  Coexisting Cancer  |
|  Preoperative Chemotherapy/ Immunotherapy \*\*(If Preop chemo/immunotherapy - Select all that apply →)   | When and for what disease: \*\*PreopChemoCurWhenMulti (675)  |  Same disease, ≤ 6 months  Same disease,> 6 months Unrelated disease, ≤ 6 months\*\*  Unrelated disease, >6 months  |
|  Preop Thoracic Radiation Therapy(If Preop Thoracic Radiation - Select all that apply →)  | When and for what disease:PreopXRTDisWhenMulti (685) |  Same disease, ≤ 6 months  Same disease,> 6 months Unrelated disease, ≤ 6 months  Unrelated disease, >6 months  |
| **Preoperative Medication History**  |
| **Preoperative Medication History**  *(*Select all that apply or None*↓*) HistPreopMeds (690) |
|  |  None |
|  | Chronic Immunosuppressive Therapy \*\* |
| Chronic anticoagulation (defined as any anticoagulation medication other than ASA) |
| Home Oxygen Therapy (Home O2) |
| **Pre-Operative Testing**  |
| Creatinine level measured  Yes   No  *(If Yes → )*CreatMeasured (700) | Last creatinine level \_\_\_\_\_\_\_\_ CreatLst (710) |
| Hemoglobin level measured  Yes   No  *(If Yes →)*HemoglobinMeasured (720) | Last hemoglobin level \_\_\_\_\_\_\_ HemoglobinLst (730) |
| **Pulmonary Function Tests performed?:**   Yes  NoPFT (740) |
| *(If Yes →)* | **FEV1 % predicted: \*\* \_\_\_\_\_\_\_\_\_** FEVPred (750) |
| DLCO test performed?  Yes  No  Not Applicable *(If Yes→)* DLCO (770) | Lowest DLCO % predicted: \_\_\_\_\_\_\_\_\_\_DLCOPredLow (781) |
| **Psychosocial History** |
| **History of Substance Abuse** *(*Select all that apply or None*↓*) HistSubAbus (790) |
|  |  None |
|  |  Cigarette smoking**\*\***  |
| *(*If Cigarette Smoking *→)* | **Smoking History:**  Past smoker (stopped >1 month prior to operation)\*\* Current smoker\*\* CigSmoking (800) |
| Pack Year Known or can be estimated:  Yes  NoPackYearKnown (810) | *(If Yes →)* Pack-Years \_\_\_\_\_\_\_\_\_PackYear (820) |
|  Substance Dependency/Abuse of Non-Prescription Medications or Illicit Drugs |
|  Alcohol Abuse  |
| Dementia/neurocognitive dysfunction:  Yes  No DemNeroDys (830) | Major Psychiatric Disorder:  Yes  No PsychDisorder (840) |
| Living Status:  Lives alone  Lives with family or friend  Assisted Living  Nursing HomeLiveStat (850) |
| Functional Status: FuncStat (860) |  Independent  Partially Dependent  Totally Dependent  Unknown |
| **ECOG Score:\*\*** ECOGScore (870) |  0 - Fully active, able to carry on all pre-disease performance without restriction |  1 - Restricted in physically strenuous activity but ambulatory and able to carry out work of a light or sedentary nature, e.g., light housework, office work |  2 - Ambulatory and capable of all self-care but unable to carry out any work activities. Up and about morethan 50% of waking hours |
|  3 - Capable of only limited self-care, confined to bed or chair more than 50% of waking hours |  4 - Completely disabled. Cannot carry on any self-care. Totally confined to bed or chair |  |

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| **D. Diagnosis (Category of Disease)** Note: Diagnosis is based on final pathology report. |
| Indicate the **Primary** Diagnosis (Category of Disease) **(ICD-10)**. CategoryPrim (1250) |
| **Lung Cancer** |
|  Lung cancer, main bronchus, carina (C34.00)  |  Lung cancer, lower lobe (C34.30) |
|  Lung cancer, upper lobe (C34.10) |  Lung cancer, location unspecified (C34.90) |
|  Lung cancer, middle lobe (C34.2) |  |
| **Esophagus Cancer** |
|  Esophageal cancer, esophagogastric junction (cardia) (C16.0) |  Esophageal cancer, lower third (C15.5) |
|  Esophageal cancer, upper third (C15.3) |  (Stomach Cancer) Malignant neoplasm stomach unspecified (C16.9) |
|  Esophageal cancer, middle third (C15.4) |  (Esophageal Cancer) Malignant neoplasm of the esophagus, unspecified (C15.9) |
| **Thymoma/Thymectomy/Myasthenia Gravis/Mediastinal Mass** |
|  Malignant neoplasm of thymus (thymoma, thymic carcinoma) (C37) |  Benign neoplasm thymus (D15.0)  |
|  Myasthenia gravis (G70.00) |  Mediastinal nodes, metastatic (C77.1) |
|  Anterior/Posterior mediastinal tumor; metastatic (C78.1) |  Non-Hodgkin Lymphoma, intrathoracic lymph nodes (C85.92) |
|  Posterior mediastinal malignant tumor primary (C38.2) |  Mediastinal abscess (J85.3) |
|  Anterior mediastinal malignant tumor primary (germ cell cancer, seminoma) (C38.1) |  Disease of the mediastinum, not otherwise classified (J98.5) |
|  Mediastinal Mass/Neoplasm of uncertain behavior of pleura, thymus, mediastinum (D38.2-D38.4) |  Mediastinal nodes, benign (D36.0) |
|  Anterior/Posterior mediastinal tumor; benign (i.e. teratoma) (D15.2) |  Unspecified disease of thymus gland (E32.9) |
| **Trachea**  |
|  Tracheal tumor, malignant (C33) |  Tracheal stenosis, congenital (Q32.1) |
|  Tracheal tumor, benign (D14.2) |  Subglottic stenosis-congenital (Q31.1) |
|  Tracheal tumor, metastatic (C78.30) |  Subglottic stenosis-acquired (post intubation) (J38.6) |
|  Tracheal stenosis, acquired (J39.8) |  Tracheostomy related stenosis (J95.03) |
| **Diaphragmatic Hernia / GERD** |
|  Esophageal reflux (GERD) (K21.9) |  Diaphragmatic Hernia with obstruction (K44.0) |
|  Reflux esophagitis (K21.0) |  Diaphragmatic Hernia with gangrene (K44.1) |
|  Barrett’s esophagus (K22.70) |  Diaphragmatic Hernia without obstruction or gangrene (K44.9) |
|  Barrett’s esophagus with High Grade Dysplasia (K22.711) |  |
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| **Cardiovascular** |
|  Cardiac tamponade (I31.4) |  SVC Syndrome (I87.1) |
|  Pericardial effusion, malignant (I31.3) |  Pericardial disease (I31) |
|  Pericarditis with effusion (I30.9) |  Unspecified disease of the pericardium (I31.9) |
|  Pericarditis, constrictive (I31.1) |  |
| **Chest Wall** |
|  Pectus carinatum (Q67.7) |  Rib tumor, metastatic (C79.51) |
|  Pectus excavatum (Q67.6) |  Thoracic outlet syndrome (G54.0) |
|  Rib tumor, benign (e.g., fibrous dysplasia) (D16.7) |  Chest wall abscess (L03.31) |
|  Rib tumor, malignant (e.g., osteosarcoma, chondrosarcoma) (C41.3) |  |
| **Diaphragm** |
|  Diaphragm tumor, benign (D21.3) |  Diaphragmatic paralysis (J98.6) |
|  Diaphragm tumor, malignant (C49.3) | (Diaphragm hernias are captured in the hernia section ↑ ) |
| **Esophagus - Other** |
|  Achalasia of esophagus (K22.0) |  Other disease of the esophagus (K22.8) |
|  Acquired absence of esophagus ( post esophagectomy) (Z90.89) |  Foreign body esophagus (T18.108a) |
|  Dyskinesia/spasm of esophagus (K22.4) |  Gastric outlet obstruction, pyloric stenosis, acquired (K31.1) |
|  Epiphrenic diverticulum (K22.5) |  Mallory Weiss tear (K22.6) |
|  Esophageal perforation (K22.3) |  Tracheoesophageal fistula (J95.04) |
|  Esophageal stricture (K22.2) |  Ulcer esophagus with bleeding (K22.11) |
|  Esophageal tumor-benign (i.e., leiomyoma) (D13.0) |  Ulcer esophagus without bleeding (K22.10) |
|  Esophagitis (K20.9) |  |
| **Lung – Other**  |
|  Acute respiratory failure (ARDS) (J96.00) |  Chronic respiratory failure (J96.1) |
|  Aspergillosis (B44.9) |  Lung tumor, benign (e.g., hamartoma) (D14.30) |
|  Bronchiectasis (J47.9) |  Pneumonia (J18.9) |
|  Cystic fibrosis (E84.0) |  Post inflammatory pulmonary fibrosis (J84.89) |
|  COPD/Emphysema (J44.9/J43.8) |  Primary pulmonary hypertension (I27.0) |
|  Emphysematous bleb (J43.9) |  Postprocedural Respiratory Failure (J95.82) |
|  Lung abscess (J85.2) |  Pulmonary sequestration (Q33.2) |
|  Interstitial lung disease/fibrosis (J84.1) |  Transplanted lung complication(s) (T86.8XX) |
|  Pneumothorax (J93.1) |  Gangrene and necrosis of lung (J85.0) |
|  Solitary pulmonary nodule (not a tumor, e.g., granuloma, subpleural lymph node, pulmonary infarct) (R91.1) |  Hemothorax (J94.2) |
|  Atelectasis (J98.11) |  Lung tumor, metastatic (C78.00) |
|  Bronchopleural fistula (J98.09) |  Lung nodule/Mass/Other disorders of lung (J98.4) |
| **Pleura** |
|  Empyema with fistula (J86.0) |  Pleural tumor, metastatic/Secondary malignant neoplasm of pleura (C78.2) |
|  Empyema without fistula (J86.9) |  Malignant neoplasm of pleura; other than mesothelioma (C38.4) |
|  Pleural effusion, malignant (J91.0) |  Mesothelioma (C45) |
|  Pleural effusion sterile (J90) |  Pleural effusion, TB; (Tuberculous pleurisy) (A15.6) |
|  Pleural thickening (J94.9) |  Fibrothorax (J94.1) |
|  Pleural tumor, benign (D19.0) |  |
| **Trachea & Larynx** |
|  Dysphagia, unspecified (R13.10) |  Vocal cord paralysis unspecified (J38.00) |
|  Tracheomalacia-congenital (Q32.0) |  Vocal cord paralysis , unilateral (J38.01) |
|  Tracheostomy-hemorrhage (J95.01) |  Vocal cord paralysis, bilateral (J38.02) |
| **Trauma** |
|  Flail chest (S22.5) |  Sternal fracture (S22.20) |
|  Rib fracture (S22.39xa) |  Tracheal injury (S12.8) |
|  Rib fractures, multiple (S22.49) |  Traumatic pneumothorax (S27.0) |
| **Miscellaneous** |
|  Abnormal radiologic finding (R91) |  Lymphadenopathy (R59.9) |
|  Chylothorax (I89.8)  |  Malignant poorly differentiated neuroendocrine carcinoma, any site (C74.1) |
|  Disruption of internal operation, surgical wound (T81.32) |  Other complication of procedure, not elsewhere specified (i.e. Non-healing surgical wound) (T81.89) |
|  Hemorrhage complicating a procedure (multiple codes) |  Other post- op infection (T81.4XXA) |
|  Hematoma complicating a procedure (multiple codes) |  Persistent post-op fistula not otherwise classified (T81.83) |
|  Hemoptysis unspecified (R04.2) |  Post-operative air leak (J95.812) |
|  Hyperhidrosis, focal axilla (L74.510) |  Secondary malignant neoplasm of other specified sites (C79.89) |
|  Hyperhidrosis, focal, face (L74.511) |  Shortness of breath (R06.02) |
|  Hyperhidrosis, focal, palms (L74.512) |  Other unlisted category of disease |
| (If other unlisted category of disease →) | Other Primary Specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Refer to Diagnosis list)CategoryPrimOth (1260) |
| Other Primary ICD: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Refer to Diagnosis list)CategoryPrimOthICD (1270) |
| **E. Operative** |
| **Date of Surgery**: \*\*\_\_\_\_\_\_/\_\_\_\_\_\_/\_\_\_\_\_\_\_ (mm/dd/yyyy) SurgDt (1310) |
| **OR Entry Time**: \_\_\_\_\_\_:\_\_\_\_\_\_\_ OREntryT (1320) | Anesthesia Start Time: \_\_\_\_\_\_:\_\_\_\_\_\_\_ AnesthStartT (1340) | **Procedure Start Time**: \_\_\_\_\_\_:\_\_\_\_\_\_\_ ProcStartT (1360) |
| **OR Exit Time:** \_\_\_\_\_\_:\_\_\_\_\_\_\_ ORExitT (1330) | Anesthesia End Time: \_\_\_\_\_\_\_:\_\_\_\_\_\_\_ AnesthEndT (1350) | **Procedure End Time:** \_\_\_\_\_\_\_:\_\_\_\_\_\_\_ ProcEndT (1370) |
| Multi-Day Operation: (operation continued through midnight) MultiDay (1380) |  Yes  No |
| Status of Operation:\*\*  Emergent  Urgent  Elective\*\*  PalliativeStatus (1390) |
| Assisted by Robotic Technology:  Yes  No Robotic (1400) |
| Unanticipated Surgical Approach Conversion**:**  Yes, VATS→ Open  Yes, Robotic → VATS  Yes, Robotic→ Open  No UnanticConv (1410) |
|  | (If Conversion any ‘Yes’→) | Unanticipated Conversion Type:  Elective  Emergent UnanticConvTy (1420) |
| Conversion Reason:  Vascular  Anatomy  Lymph Nodes  OtherUnanticConvRsn (1430) |
| Blood transfusion intraoperatively (packed red blood cells):  Yes  NoIntraopPRBC (1440) | (If Yes→) #Red Blood Cell Units: \_\_\_\_\_\_\_\_\_ IntraopPRBCNum (1450) |
| **ASA****Classification: \*\*** ASA (1460) |  I *Normal, healthy*  |  II*Mild systemic disease* |  III*Severe systemic disease*  |  IV*Life threatening severe systemic disease*  |  V*Moribund, not expected to survive without operation* |  VI*Declared brain dead, organ donor* |

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| **Check ALL of the procedures performed.**  *Indicate (circle) the* **Primary Procedure\*\*** Proc (1470) Primary (1480) |
| **Major/Analyzed Procedures**(must complete required fields that are underlined and in blue) |
| **Lung Cancer Resection (Required)** |
| **Analyzed Cases** |  Thoracoscopy, surgical; with lobectomy (32663) \*\* |  Removal of lung, two lobes (bilobectomy) (32482) \*\* |
|  Thoracoscopy with therapeutic wedge resection (eg mass or nodule) initial, unilateral (32666) \*\* |  Removal of lung, single segment (segmentectomy) (32484) \*\* |
|  Thoracoscopy with removal of a single lung segment (segmentectomy) (32669) \*\* |  Removal of lung, sleeve lobectomy (32486) \*\* |
|  Thoracoscopy with removal of two lobes (bilobectomy) (32670) \*\* |  Removal of lung, completion pneumonectomy (32488) \*\* |
|  Thoracoscopy with removal of lung, pneumonectomy (32671) \*\* |  Resection and repair of portion of bronchus (bronchoplasty) when performed at time of lobectomy or segmentectomy (32501) \*\* |
|  Thoracotomy with therapeutic wedge resection (eg mass nodule) initial (32505) \*\* |  Resection of apical lung tumor (e.g., Pancoast tumor), including chest wall resection, without chest wall reconstruction(s) (32503) |
|  Removal of lung, total pneumonectomy; (32440) \*\* |  Resection of apical lung tumor (e.g., Pancoast tumor), including chest wall resection, with chest wall reconstruction (32504) |
|  Removal of lung, sleeve (carinal) pneumonectomy (32442) \*\* |  Resection of lung with resection of chest wall |
|  Removal of lung, single lobe (lobectomy) (32480) \*\* |  |
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| **Concomitant Procedures** |  Thoracoscopy with therapeutic wedge resection (eg mass or nodule) each additional resection, ipsilateral (32667) List separately in addition to primary procedure code  |  Thoracotomy with diagnostic wedge resection followed by anatomic lung resection (+32507), List separately in addition to primary proc code  |
|  Thoracoscopy with mediastinal and regional lymphadenectomy (+32674) List separately in addition to primary procedure code |  Thoracoscopy with diagnostic wedge resection followed by anatomic lung resection (32668), List separately in addition to primary procedure code  |
|  Thoracotomy with therapeutic wedge resection (eg mass nodule) each additional resection, ipsilateral (+32506) List separately in addition to primary procedure code  |  |
| **Esophagus Resection (Required)** |
|  Transhiatal-Total esophagectomy, without thoracotomy, with cervical esophagogastrostomy (43107) \*\* |  Partial esophagectomy, distal two-thirds, with thoracotomy only (43121) \*\* |
|  Total esophagectomy without thoracotomy; with colon interposition or small intestine reconstruction (43108) \*\* |  Thoracoabdominal-Partial esophagectomy, thoracoabdominal approach (43122) \*\* |
|  Three Incision -Total esophagectomy with thoracotomy; with cervical esophagogastrostomy (43112) \*\* |  Partial esophagectomy, thoracoabdominal with colon interposition or small intestine (43123) \*\* |
|  Total esophagectomy with thoracotomy; with colon interposition or small intestine reconstruction (43113) \*\* |  Total or partial esophagectomy, without reconstruction with cervical esophagostomy (43124) |
|  Partial esophagectomy, cervical, with free intestinal graft, including microvascular anastomosis (43116) |  Minimally invasive three incision esophagectomy (McKeown) (43288) |
|  Ivor Lewis-Partial esophagectomy, distal two-thirds, with thoracotomy and separate abdominal incision (43117) \*\* |  Minimally invasive esophagectomy, Ivor Lewis approach (43287) \*\* |
|  Partial esophagectomy, with thoracotomy and separate abdominal incision with colon interposition or small intestine (43118) \*\* |  Minimally invasive esophagectomy, Abdominal and neck approach (43286) \*\* |
| **Hiatal Hernia / GERD Procedures (Optional)** |
|  Laparoscopy, surgical, esophagogastric fundoplasty (e.g., Nissen, Toupet procedures) (43280)  |  Repair, paraesophageal hiatal hernia via laparotomy with mesh (43333) |
|  Laparoscopy, surgical with repair of paraesophageal hernia (fundoplasty) without mesh (43281) |  Repair, paraesophageal hiatal hernia via thoracotomy without mesh (43334) |
|  Laparoscopy, surgical with repair of paraesophageal hernia (fundoplasty) with mesh (43282) |  Repair, paraesophageal hiatal hernia via thoracotomy with mesh (43335) |
|  Nissen fundoplasty- laparotomy (includes partial fundoplication/wrap) (43327) |  Repair, paraesophageal hiatal hernia via thoracoabdominal approach without mesh (43336) |
|  Transthoracic Fundoplication- open thoracotomy (includes Belsey/Nissen) (43328) |  Repair, paraesophageal hiatal hernia via thoracoabdominal approach with mesh (43337) |
|  Repair, paraesophageal hiatal hernia via laparotomy without mesh (43332) |  LINX Procedure (43284 ) |
| **Tracheal Resection (Optional)** |
|  Carinal reconstruction (31766) |  Tracheal tumor or carcinoma excision; cervical (31785) |
|  Excision tracheal stenosis, cervical (31780) |  Tracheal tumor or carcinoma excision; thoracic (31786) |
|  Excision tracheal stenosis, thoracic (31781) |  |
| **Thymus / Mediastinal Mass Resection (Optional)** |
|  Thoracoscopy, surgical; with excision of mediastinal cyst, tumor, or mass (32662) |  Thymectomy, transcervical approach (60520) |
|  Thymus, resection via Thoracoscopy unilateral or bilateral (32673) |  Thymectomy, transthoracic approach (60521) |
|  Mediastinal tumor, excision, open, Transthoracic approach (39220) |  Thymectomy, transthoracic approach, with radical mediastinal dissection (60522) |
| **Minor/Non-Analyzed Procedures (Concomitant Procedures)** |
| **Trachea, Bronchi, Larynx** |
|  Laryngectomy, partial (31370) |  Tracheostomy replacement (tube change) prior to est. of fistula tract (31502) |
|  Tracheal wound or injury suture repair; cervical (31800) |  Tracheostomy, planned (31600) |
|  Tracheal wound or injury suture repair; intrathoracic (31805) |  Tracheostomy revision simple, without flap (31613) |
|  Unlisted procedure, trachea, bronchi (31899) |  Tracheostomy revision complex, with flap (31614) |
|  Bronchopleural fistula closure (32906) |  Tracheoplasty; cervical (31750) |
|  Bronchogenic cyst removal |  Tracheoplasty; intrathoracic (31760) |
|  Bronchial laceration suture |  Bronchial sleeve resection |
|  Bronchoplasty, graft repair (31770) |  Tracheostomy mediastinal |
|  Bronchoplasty; excision stenosis and anastomosis (31775) |  Rigid stent removal |
| **Bronchoscopy** |
|  Tracheobronchoscopy through established tracheostomy incision (31615) |  Bronchoscopy, with transbronchial lung biopsy(s), each additional lobe (31632) |
|  Endobronchial ultrasound (EBUS) during bronchoscopy diagnostic or therapeutic intervention(s) (31620) |  Bronchoscopy, with transbronchial needle aspiration biopsy(s), each additional lobe (31633) |
|  Bronchoscopy, diagnostic, with or without cell washing (31622) |  Bronchoscopy, with removal of foreign body (31635) |
|  Bronchoscopy, with brushing or protected brushings (31623) |  Bronchoscopy, with placement of bronchial stent(s) (includes tracheal/bronchial dilation as required), initial bronchus (31636) |
|  Bronchoscopy, with bronchial alveolar lavage (BAL) (31624) |  Bronchoscopy, each additional major bronchus stented (31637) |
|  Bronchoscopy, with bronchial or endobronchial biopsy(s), single or multiple sites (31625) |  Bronchoscopy, with revision of tracheal or bronchial stent inserted at previous session (31638) |
|  Bronchoscopy, with placement of Fiducial markers (31626) |  Bronchoscopy, with excision of tumor (31640) |
|  Bronchoscopy, navigational (31627) |  Bronchoscopy, with destruction of tumor or relief of stenosis by any method other than excision (e.g., laser therapy) (31641) |
|  Bronchoscopy, with transbronchial lung biopsy(s), single lobe (31628) |  Bronchoscopy, with placement of catheter(s) for intracavitary radioelement application (31643) |
|  Bronchoscopy, with transbronchial needle aspiration biopsy(s) (31629) |  Bronchoscopy, with therapeutic aspiration of tracheobronchial tree, initial (drainage of lung abscess) (31645) |
|  Bronchoscopy, with tracheal/bronchial dilation or closed reduction of fracture (31630) |  Bronchoscopy, with therapeutic aspiration of tracheobronchial tree, subsequent (31646) |
|  Bronchoscopy, with placement of tracheal stent(s) (includes tracheal/bronchial dilation as required) (31631) |  |
| **Pleural Space and Lung** |
|  Thoracostomy; with rib resection for empyema (32035) |  Insertion indwelling tunneled pleural catheter (32550) |
|  Thoracostomy; with open flap drainage for empyema (32036) |  Thoracoscopy, diagnostic lungs and pleural space, without biopsy (32601) |
|  Thoracotomy with biopsy(s) lung infiltrate(s) (e.g. wedge), unilateral (32096) |  Thoracoscopy, diagnostic; with biopsy(s) of lung infiltrate(s) (e.g. wedge), unilateral (32607) |
|  Thoracotomy with biopsy(s) lung nodule(s) or masses (e.g. incisional), unilateral (32097) |  Thoracoscopy, diagnostic; with biopsy(s) of lung nodule(s) or mass(es) (eg incisional), unilateral (32608) |
|  Thoracotomy with biopsy(s) of pleura (32098) |  Thoracoscopy, diagnostic; with biopsy(s) of pleura (32609) |
|  Thoracotomy, with exploration (32100) |  Thoracoscopy, surgical; with pleurodesis (e.g., mechanical or chemical) (32650) |
|  Thoracotomy, major; with control of traumatic hemorrhage and/or repair of lung tear (32110) |  Thoracoscopy, surgical; with partial pulmonary decortication (32651) |
|  Thoracotomy, major; for postoperative complications (32120) |  Thoracoscopy, surgical; with total pulmonary decortication (32652) |
|  Pneumolysis, any approach (32124) |  Thoracoscopy, surgical; with removal of intrapleural foreign body or fibrin deposit (32653) |
|  Thoracotomy, major; with cyst(s) removal, with or without a pleural procedure (32140) |  Thoracoscopy, surgical; with control of traumatic hemorrhage (32654) |
|  Thoracotomy, major; with excision-plication of bullae, with or without any pleural procedure (32141) |  Thoracoscopy, surgical; with excision-plication of bullae, including any pleural procedure (32655) |
|  Thoracotomy, major; with removal of intrapleural foreign body or hematoma (32150) |  Thoracoscopy, surgical; with parietal pleurectomy (32656) |
|  Thoracotomy with cardiac massage (32160) |  Thoracoscopy with resection-plication for emphysematous lung (bullous or non-bullous) for lung volume reduction- LVRS, unilateral including any pleural procedure (32672) |
|  Decortication, pulmonary, total (32220) |  Repair lung hernia through chest wall (32800) |
|  Pleural scarification for repeat pneumothorax (32215) |  Closure of chest wall following open flap drainage for empyema (Clagett type procedure) (32810) |
|  Decortication, pulmonary, partial (32225) |  Total lung lavage (for alveolar proteinosis) (32997) |
|  Pleurectomy, parietal (32310) |  Radio-frequency ablation (RFA) lung tumor (32998) |
|  Decortication and parietal pleurectomy (32320) |  Removal of lung, total pneumonectomy; extrapleural (32445) |
|  Removal of lung, excision-plication of emphysematous lung(s) for lung volume reduction (LVRS) (32491) |  |
| **Lung Other Procedures** |
|  Open closure of major bronchial fistula (32815) |  Pulmonary artery arterioplasty (33926) |
|  Single lung transplant (32851) |  Double lung transplant (32853) |
|  Single lung transplant with CPB (32852) |  Double lung transplant with CPB (32854) |
|  Cryoablation (32994) |  Unlisted procedure, lung (32999) |
| **Mediastinum and Diaphragm** |
|  Thoracoscopy, diagnostic; mediastinal space, with biopsy (32606) |  Diaphragmatic hernia repair (other than neonatal), traumatic; acute (39540) |
|  Mediastinotomy with exploration or biopsy; cervical approach (39000) |  Diaphragmatic hernia repair (other than neonatal), traumatic; chronic (39541) |
|  Mediastinotomy with exploration or biopsy; transthoracic approach (39010) |  Diaphragm imbrication (i.e., plication) of (39545) |
|  Mediastinal cyst, excision, open, Transthoracic approach (39200) |  Diaphragm; resection with simple repair (e.g., primary suture) (39560) |
|  Mediastinoscopy, with or without biopsy (39400) |  Diaphragm; resection with complex repair (e.g., prosthetic material, local muscle flap) (39561) |
|  Unlisted procedure, mediastinum (39499) |  Unlisted procedure, diaphragm (39599) |
|  Diaphragm, laceration repair, any approach (39501) |  |
| **Esophagoscopy** |
|  Esophagoscopy (43200) |  Upper gastrointestinal endoscopy with endoscopic ultrasound examination limited to the esophagus (43237) |
|  Esophagoscopy with biopsy (43202) |  Upper gastrointestinal endoscopy with transendoscopic ultrasound-guided FNA (43238) |
|  Esophagoscopy with removal of foreign body (43215) |  Upper gastrointestinal endoscopy with biopsy (43239) |
|  Esophagoscopy with insertion of stent (43219) |  Upper gastrointestinal endoscopy with dilation of gastric outlet for obstruction (43245) |
|  Esophagoscopy with balloon dilation (43220) |  Upper gastrointestinal endoscopy with directed placement of percutaneous gastrostomy tube (43246) |
|  Esophagoscopy with insertion of guide wire followed by dilation over guide wire (43226) |  Upper gastrointestinal endoscopy with removal of foreign body (43247) |
|  Esophagoscopy with ablation of tumor (43228) |  Upper gastrointestinal endoscopy with insertion of guide wire followed by dilation of esophagus (43248) |
|  Esophagoscopy with endoscopic ultrasound examination (EUS) (43231) |  Upper gastrointestinal endoscopy with balloon dilation of esophagus (43249) |
|  Esophagoscopy with transendoscopic ultrasound-guided fine needle aspiration (43232) |  Upper gastrointestinal endoscopy with transendoscopic stent placement (43256) |
|  Upper gastrointestinal endoscopy, diagnostic (43235) |  Upper gastrointestinal endoscopy with ablation of tumor (43258) |
|  Endoflip endoluminal balloon (91040) |  |
| **Esophagus Other Procedures** |
|  Thoracoscopy, surgical; with esophagomyotomy (Heller type) (32665) |  Esophagostomy, fistulization of esophagus, external; cervical approach (43352) |
|  Cricopharyngeal myotomy (43030) |  Gastrointestinal reconstruction for previous esophagectomy with stomach (43360) |
|  Excision esophageal lesion with primary repair, cervical approach (43100) |  Gastrointestinal reconstruction for previous esophagectomy with colon interposition or small intestine (43361) |
|  Excision Esophageal lesion with primary repair, thoracic approach (eg: leiomyoma) (43101) |  Suture of esophageal wound or injury; cervical approach (43410) |
|  Diverticulectomy of hypopharynx or esophagus, with or without myotomy; cervical approach (43130) |  Suture of esophageal wound or injury; transthoracic or transabdominal approach (43415) |
|  Diverticulectomy of esophagus, with or without myotomy; thoracic approach (43135) |  Closure of esophagostomy or fistula; cervical approach (43420) |
|  Laparoscopic esophageal myotomy (Heller Myotomy, with or without fundoplication) (43279) |  Total gastrectomy with esophagoenterostomy (43620) |
|  Laparoscopy, surgical, esophageal lengthening procedure (Collis) (43283) Secondary Procedure code |  Total gastrectomy with Roux-en-Y reconstruction (43621) |
|  Unlisted laparoscopy, esophagus (43289) |  Conduit revision s/p esophagectomy |
|  Esophagoplasty with repair of TEF, cervical approach (43305) |  Per oral endoscopic myotomy (POEM) |
|  Esophagoplasty with repair TEF, thoracic approach (43312) |  Trans oral fundoplication |
|  Esophagomyotomy (Heller type); thoracic approach (43331) |  Esophageal lengthening procedure - open (Collis) Secondary Procedure code (43338) |
|  Free jejunum transfer with microvascular anastomosis (43496) |  Ligation or stapling at gastroesophageal junction for esophageal perforation (43405) |
|  Unlisted procedure, esophagus (43499) |  |
| **Chest Wall and Neck** |
|  Muscle flap, neck (15732) |  Radical resection of sternum (21630) |
|  Muscle flap; trunk (i.e., intercostal, pectoralis or serratus muscle) (15734) |  Radical resection of sternum; with mediastinal lymphadenectomy (21632) |
|  Excision of chest wall tumor including ribs (19260) |  Hyoid myotomy and suspension (21685) secondary procedure code |
|  Excision of chest wall tumor involving ribs, with reconstruction (19271) |  Division of scalenus anticus; without resection of cervical rib (21700) |
|  Excision tumor, soft tissue of neck or thorax; subcutaneous (21555) |  Division of scalenus anticus; with resection of cervical rib (21705) |
|  Excision tumor, soft tissue of neck or thorax; deep, subfascial, intramuscular (21556) |  Reconstructive repair of pectus excavatum or carinatum; open (21740) |
|  Radical resection of tumor (e.g., malignant neoplasm), soft tissue of neck or thorax (21557) |  Reconstructive repair of pectus, minimally invasive approach (Nuss procedure), without thoracoscopy (21742) |
|  Excision of rib, partial (21600) |  Open treatment of sternum fracture with or without skeletal fixation (21825) |
|  Excision first and/or cervical rib (21615) |  Removal of sternal wire(s) |
|  Excision first and/or cervical rib; with sympathectomy (21616) |  Reconstructive repair of pectus, minimally invasive approach (Nuss procedure), with thoracoscopy (21743) |
|  Major reconstruction, chest wall (posttraumatic) (32820) |  Intercostal nerve block (64220-1) |
|  Unlisted procedure, neck or thorax (21899) |  |
| **Miscellaneous** |
|  Thoracoscopy, diagnostic pericardial sac, with biopsy (32604) |  SVC resection and reconstruction (34502) |
|  Thoracoscopy, surgical; with removal of clot or foreign body from pericardial sac (32658) |  Ligation thoracic duct (38381) |
|  Thoracoscopy, surgical; with creation of pericardial window or partial resection of pericardial sac for drainage (32659) |  Omental flap (49904) |
|  Thoracoscopy, surgical; with total pericardiectomy (32660) |  Transthoracic thyroidectomy (60270) |
|  Thoracoscopy, surgical; with excision of pericardial cyst, tumor, or mass (32661) |  Removal substernal thyroid, cervical approach (60271) |
|  Thoracoscopy, surgical; with thoracic sympathectomy (32664) |  Application of wound vac (97605, 97606) |
|  Stereotactic radiosurgery (SRS) and stereotactic body radiotherapy (SBRT),surgeon participation (32701) |  Pericardial window (33025) |
|  Tube pericardiostomy (33015) |  Other Minor Procedure |
|  Insertion of Tunneled CV Catheter (36561) |  Robotic-Assisted Surgery (capture as an additional code) (S2900)  |
|  Other  |  |
| *(If “Other Minor Procedure”, “Other” or one of the “unlisted” procedures→)* | Enter Name of unlisted Procedure(s): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ProcOth (1490) |
| Enter 5 digit CPT code(s) of unlisted procedure, if known: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ProcOthCPT (1500) |

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| Procedure Laterality:  Right  Left  Bilateral  Not applicable Laterality (1505) |
| **Primary Lung Cancer Resection Performed** LungCancer (1510) |  Yes  No *(If yes, complete Section F)* |
| **Esophageal Cancer Resection Performed** EsophCancer (1530) |  Yes  No *(If yes, complete Section G)* |
| **Thymus / Mediastinal Mass Resection/ Myasthenia Gravis** ThymusMediastinalData (1540) |  Yes  No *(If yes, complete Section H)* |
| **Tracheal Resection** TrachealData (1550) |  Yes  No *(If yes, complete Section I)* |
| **Hiatal Hernia / Diaphragmatic Hernia / GERD** HiatalHerniaData (1560) |  Yes  No *(If yes, complete Section J)*  |
| **F. Lung Cancer** *(If Primary Lung Cancer Resection Performed is Yes↓)* |
| ***Diagnosis:*** |
| **Clinical Staging Done** ClinStagDoneLung (1600) |  Yes  No *(If yes ↓)* |
|  | **Clinical Staging Methods:** *(Select all that apply ↓)* |
| Clinical Staging:ClinStagMeth (1620) |  PET/CT  CT  Brain CT  Brain MRI  Invasive mediastinal staging performed  |
|  | *(If Invasive mediastinal staging performed - select all that apply →)*MedLymNodSam (1630) | Method of Mediastinal Lymph Node Sampling: EBUS  IR Needle Biopsy  EUS  Chamberlain  Mediastinoscopy  VATS/Lymph Node Biopsy  Other |
| Lung CA tumor size in cm (the dominant/most concerning lesion per CT Scan) \_\_\_\_\_\_\_\_\_\_cm *(ex. 2.3cm)* LungCaTumSz (1800) |
| Lung CA T Stage (tumor stage)  Tis  T1  T2  T3  T4ClinStageLungTumor (1810) |
| Lung CA Nodes: ClinStageLungN (1820) |  N0*No regional lymph node metastasis* |  N1*Metastasis in ipsilateral peribronchial or hilar and intrapulmonary nodes. Includes direct extension.* |
|  N2*Metastasis in ipsilateral mediastinal and/or subcarinal lymph nodes* |  N3*Metastasis in contralateral mediastinal or contralateral hilar nodes, ipsilateral or contralateral scalene or supraclavicular nodes* |
| Lung CA Metastases: ClinStageLungM (1830) |  M0*No distant metastasis* | M1*Distant Metastasis* |

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| ***Lung - FINAL Pathological Staging*** ***To be completed if lung resection performed. (8th Edition)*** |
| **Lung Cancer Tumor Present:** ClinStageTumorPres (1841) |  Yes  No *(If yes ↓)*  |
| *(If Cancer Tumor Present→)* \*\* | Indicate Final Pathological Tumor Staging:PathStageLungT (1850) |
|  TX*Primary Tumor cannot be assessed, or tumor proven by the presence of malignant cells in sputum or bronchial washings but not visualized by imaging or bronchoscopy* |  T0*No evidence of primary tumor* |
|  Tis*Carcinoma in situ; squamous cell carcinoma in situ (SCIS); Adenocarcinoma in situ (AIS): adenocarcinoma with pure lepidic pattern, <3 cm in greatest dimension* |  T1mi*Minimally invasive adenocarcinoma: adenocarcinoma (<3 cm in greatest dimension) with a predominantly lepidic pattern and <5 mm invasion in greatest dimension.* |
|  T1a*Tumor <1 cm in greatest dimension. A superficial, spreading tumor of any size whose invasive component is limited to the bronchial wall and may extend proximal to the main bronchus also is classified as T1a, but these tumors are uncommon.* |  T1b*Tumor > 1 cm but < 2 cm in greatest dimension* |
|  T1c*Tumor > 2 cm but < 3 cm in greatest dimension* |
|  T2a*Tumor > 3 cm but < 4 cm at greatest dimension, or having any of the following features: 1. involves the main bronchus regardless of distance to the carina, 2. but without involvement of the carina; invades visceral pleura (PL1 or PL2); 3. associated with atelectasis or obstructive pneumonitis that extends to the hilar region, involving part or all of the lung.*  |  T2b*Tumor > 4 cm but < 5 cm at greatest dimension* |
|  T3*Tumor > 5 cm but < 7 cm in greatest dimension or directly invading any of the following: parietal pleura (PL3), chest wall (including superior sulcus tumors), phrenic nerve, parietal pericardium; or separate tumor nodule(s) in the same lobe as the primary* |  T4*Tumor > 7 cm or tumor of any size invading one or more of the following: diaphragm, mediastinum, heart, great vessels, trachea, recurrent laryngeal nerve, esophagus, vertebral body, or carina; separate tumor nodule(s) in an ipsilateral lobe different from that of the primary* |
|  | *(If tumor is T2a or T2b →)* | Visceral Pleura Invasion  Yes  NoVisPleuraInv (1860) |
| Invasion of Adjacent Structures *(Select all that apply or None↓)*LCInvAdjStrMulti (1875) |
|  |  None |  Phrenic nerve |  Chest wall |
|  Esophagus |  Heart |  Pericardium |
|  Diaphragm |  Recurrent Laryngeal Nerve |  Great Vessels |
|  Vertebral Body |  |  |
| Lung CA Nodes Assessed:  Yes  No LungNodeAsses (1880) |
| *(If Yes →)* | Node Station: |  |
| 1 (N2) NS1 (1890) |  Not Sampled |  Malignant |  Benign |
| 2 (N2) NS2 (1900) |  Not Sampled |  Malignant |  Benign |
| 3 (N2) NS3 (1910) |  Not Sampled |  Malignant |  Benign |
| 4 (N2) NS4 (1920) |  Not Sampled |  Malignant |  Benign |
| 5 (N2) NS5 (1930) |  Not Sampled |  Malignant |  Benign |
| 6 (N2) NS6 (1940) |  Not Sampled |  Malignant |  Benign |
| 7 (N2) NS7 (1950) |  Not Sampled |  Malignant |  Benign |
| 8 (N2) NS8 (1960) |  Not Sampled |  Malignant |  Benign |
| 9 (N2) NS9 (1970) |  Not Sampled |  Malignant |  Benign |
| 10 (N1) (Hilar) NS10 (1980) |  Not Sampled |  Malignant |  Benign |
| 11 (N1) (Interlobar) NS11 (1990) |  Not Sampled |  Malignant |  Benign |
| 12-14 (N1) (Lobar) NS12\_14 (2000) |  Not Sampled |  Malignant |  Benign |
| Contralateral (N3) NSContraLat (2010) |  Not Sampled |  Malignant |  Benign |
| Total number malignant nodes: \_\_\_\_\_\_\_\_\_NumMaligNodes (2020) |
| Total number of all nodes assessed: \_\_\_\_\_\_\_\_\_\_\_\_LungCANodes (2030) |
|  | Lung CA Nodes: \*\*PathStageLungN (2040) |  N0 No regional lymph node metastasis/All benign N1 Metastasis in ipsilateral peribronchial and/or ipsilateral hilar lymph nodes and intrapulmonary nodes, includes involvement by direct extension/No N2 or N3 marked malignant N2 Metastasis in ipsilateral mediastinal and/or subcarinal lymph node(s)/No N3 marked malignant  N3 Metastasis in contralateral mediastinal, contralateral hilar, ipsilateral or contralateral scalene or supraclavicular lymph node(s)/Any N3 marked malignant NX Regional lymph nodes cannot be assessed/Not Sampled  |
| Lung CA Metastases: PathStageLungM (2060) |  M0*No distant metastasis* |  M1a*Malignant pleural or pericardial effusion; pleural or pericardial nodules or separate tumor nodule(s) in contralateral lobe* |  M1b*Single extrathoracic metastasis* |  M1c*Multiple extrathoracic metasteses (1 or >1organ)* |
| Lung CA Histology: LungCAHist (2070) |  Adenocarcinoma |  Squamous cell |  Large cell |
|  Small cell |  Mixed |  Low Grade Neuroendocrine (typical carcinoid) |
|  Intermediate grade neuroendocrine, atypical carcinoid |  Carcinoma in situ |  Other |
| Grade:LungCAHistGrade (2080) |  Low grade (well differentiated)  |  Intermediate grade |  High grade (poorly differentiated) |  Unknown / Not reported |
| Lung CA Resection Margins Positive: LungCAPathMarg (2100) |  Yes  No  *(If Yes*$\downright $*)* |
|  |  | Lung CA Resection Margins Positive Pathology:LungCAPathMargPosR (2110) |  R1 *(microscopic residual tumor present)*  |  R2 *(macroscopic (gross) residual tumor present)* |

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| **G. Esophageal Cancer** *(If Esophageal Cancer Resection Performed is Yes↓)* |
| **Clinical Staging: Pre-treatment Esophageal cancer staging. - Clinical staging determines the treatment plan.** |
| **Pre-Operative Evaluation**  |
| Has the patient lost 10% of body weight in the last 3 months?   Yes   No  Not Documented  WtLos10Pct (2120) |
| **Staging Procedures**  |
| **Clinical Staging Done** *(*Select all that apply or ‘None’*↓*)ClinStagDoneEsophMulti (2135) |
|  |  None |  PET/CT |  CT |  Bronchoscopy |  EUS |
|  VATS – for staging |  Laparoscopy – for staging  | Endoscopic Mucosal/Submucosal Resection |  Other |
| *(If Clinical Staging Done is not ‘None’ →)* | Esophageal Tumor: ClinStageEsophT (2220) |  T0*No evidence of primary tumor* |  Tis*High grade dysplasia* |
|  T1*Tumor invades lamina propria, mucosa or submucosa* |  T1a |  T1b |  T1 unspecified |
|  T2*Tumor invades muscularis propria* |
|  T3*Tumor invades adventitia* |  T4*Tumor invades adjacent structures* |
| Clinical Diagnosis of Nodal Involvement: ClinStageEsophNode (2230) |  Yes (N1, N2 or N3)  No |
| Esophageal CA Metastases ClinStageEsophM (2240) |  M0 No *Distant Metastasis*  M1 Distant *Metastasis* |
| **Tumor Location** (*Select all that apply↓):* EsoTumLoc (2250) |  |
|   |  Cervical Esophagus (15 – < 20 cm)  |
|  Upper Thoracic (20 - < 25 cm)  |
|  Middle Thoracic (25 - < 30 cm) |
|  Lower Thoracic, including EG Junction (30 – 42 cm) |
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| *(If Esophageal Cancer Resection Performed is Yes↓)* |
| Planned, staged procedure? PlanStageProc (2300) |  Yes  No  |
| Neck Approach:EsoNeckAppr (2310) |  None  Open Cervicoscopic  Robotic |
| *(If Neck Approach is not ‘None’ →)*  | Neck lymphadenectomy performed?  Yes – With Neck dissection   Yes – Without Neck dissection   No NeckLymphAden (2320) |
| Thorax Approach:EsoThorAppr (2330) |  None  Thoracotomy  Thoracoscopic  Robotic  Thoracoabdominal |
| Abdomen Approach: EsoAbdAppr (2340) |  None  Laparotomy  Laparoscopic  Robotic |
| *(If ‘Laparoscopic’ or ‘Robotic’ →)* | Hand Assist:  Yes  No EsoAbdApprHandAss (2350) |
| Anastomotic Method:  Stapled Partial hand-sewn Hand-sewnAnastoMeth (2360) |
| Esophageal Conduit:  Stomach  Small bowel  Colon EsopConduit (2370)  Supercharged Small Bowel  Supercharged Colon |
| Pylorus Management:PylorusManage (2380)*(Select all that apply or ‘None’ →)*  |  None  Botox Injection  Balloon Dilation  Pyloroplasty  Pyloromyotomy |
| J-Tube Placement:  None  Pre-existing  During Surgery  Post Surgery JTubePlac (2390) |

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| **Pathological Staging - Esophagus** |
| E**sophagus *to be completed if esophageal cancer documented AND esophageal resection performed (Pre-Operative Evaluation – Esophageal Cancer = Yes) (8th Edition)*** |
| **Esophageal Cancer Present:** Yes  No EsophCancerPres (2401) |
| *(If Cancer**Present = Yes →)* | Esophageal Tumor: \*\* PathStageEsophT (2410) |  T0*No evidence of primary tumor* |  Tis*High Grade dysplasia, defined as malignant cells confined to the epithelium by the basement membrane* |
|  T1a*Tumor invades lamina propria or muscularis mucosa* |  T1b*Tumor invades submucosa* |
|  T2*Tumor invades muscularis propria* |  T3*Tumor invades adventitia* |
|  T4a*Tumor invades pleura, pericardium, azygos vein, diaphragm or peritoneum* |  T4b*Tumor invades other adjacent structures such as aorta, vertebral body, or airway.* |
| Esophageal CA Nodes: PathStageEsophN (2420) |  NX*Regional lymph nodes cannot be assessed* |  N0*No regional lymph node metastasis* |  N1*Metastasis in 1-2 regional nodes* |
|  N2*Metastasis in 3-6 regional lymph nodes* |  N3*Metastasis in 7 or more regional lymph nodes* |
| Esophageal CA Metastases: PathStageEsophM (2430) |  M0*No distant metastasis* |  M1*Distant metastasis* |
| Esoph Histopathologic Type: \*\*PathStageEsophH (2440) |  H1 Squamous Carcinoma |  H2 Adenocarcinoma |  Other |
| Esophageal CA Histologic Grade: PathStageEsophG (2450) |  GX *Grade cannot be assessed* |  G1 *Well differentiated* |  G2 *Moderately differentiated* |  G3*Poorly differentiated, undifferentiated* |
| Total # of Lymph Nodes sampled/harvested: \_\_\_\_\_\_\_ EsophCANodes (2460) |
| Esophageal CA Resection Margins Positive:  Yes  No EsophCAPathMarg (2470) |
|  |  *(If Yes, select all that apply→)* | Location:  Proximal (Esophageal)PosMargLocate (2480) Distal (Gastric) Radial |

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| **H. Thymoma/Thymectomy/Mediastinal Mass Resection/Myasthenia Gravis***(If Thymus / Mediastinal Mass Resection/ Myasthenia Gravis is Yes↓)* |
| **Preoperative** |
| Symptomatic myasthenia: MyastheniaSympt (2490) |  Yes  No |
|  *(If Yes, select all that apply) →)*  | Chronic Medical Treatment:  Mestinon  Steroids  Other Immunosuppressive Therapy ChronMedTreat (2500)  |
| **Preoperative management** |
| IVIG:  Yes  No IVIG (2540) |
| Plasmaphereis:  Yes  No Plasmaphereis (2550) |
| Size of mass known:  Yes  No MassSizeKnown (2560)  |
|  | *(If Yes →)* | Largest diameter in cm derived from preop axial, coronal or sagittal image \_\_\_\_\_\_\_\_\_\_\_cm MassSizeCm (2571) |
| **Operative** |
| Initial Surgical Approach ThyInitSurgAp (2580) |
|  |  Full Sternotomy |  Clamshell or Hemiclamshell |  Transcervical |
|  Partial Sternotomy |  Robotic  |  VATS  |  Thoracotomy |
|  | *(If ‘Robotic’,’VATS’, or ‘Thoracotomy’ →)* ThyRobVATSLoc (2590) | Location:  Right  Left  Bilateral |
| *(If ‘Transcervical’, ‘Robotic’ or ‘VATS’ →)*  ThyConvToOpen (2600) | Conversion to open approach during procedure?  Yes, Planned  Yes, Unplanned  No |
|  | *(If Yes, planned/unplanned→)* ThyConvAp (2610) | Conversion approach: Sternotomy  Clamshell  Thoracotomy  |
| Intentional resection of functioning phrenic nerve**:**  Yes  No PhrenicNerveResect (2620) |
| **Was a thymoma procedure performed?**  Yes  No ThymomaProc (2630) |
| *(If Yes →)* | Pathologic Staging PathRptStage (2640) |
| No Cancer Found |  Stage I*Grossly and microscopically encapsulated. Also called a noninvasive thymoma. That is, it has not spread beyond the thymus.* |
|  Stage II *The thymoma invades beyond the capsule (outer boundary of the thymus) and into the nearby fatty tissue or to the pleura (outer covering of the lung).* *Sometimes divided into:* |  Stage IIa*Microscopic transcapsular invasion* |  Stage IIb*Macroscopic capsular invasion* |
|  Stage III *Macroscopic invasion of neighboring organs. The thymoma extends into the neighboring tissues or organs of the lower neck or upper chest area, including the pericardium (covering of the heart), the lungs, or the main blood vessels leading into or exiting from the heart.* |
|  Stage IVa *Pleural or pericardial dissemination. The thymoma has spread widely throughout the pleura and/or pericardium.* |  Stage IVb*Hematogenous or lymphatic dissemination. The thymoma has spread to distant organs.* |
|    | *(if not ‘No cancer found’ →)* | WHO classification **(**from path report – Thymoma only) ThymomaType (2650) |  Type A  |  Type AB  |
|  Type B1  |  Type B2  |  |
|  Type B3  |  Thymic Carcinoma or Type C  |
| Completeness of resection (from operative note or pathology report): ResectCompleteness (2660) |  R0  R1  R2 |
| Patient alive at 30 days post-op: Yes  No PtAlive30Day (2670) |
| *(If Yes →)* | Myasthenic crisis requiring return to ICU or intervention (intubation, plasmapheresis):  Yes  NoMYAL (2680) |
| Unintentional phrenic nerve palsy:  Yes  NoPhrenicNervePalsy (2690) |
| Patient alive at 90 days post-op: Yes  No PtAlive90Day (2700) |
|  | *(If Yes →)* | Adjuvant thoracic radiation:  Yes  NoThoracicRadiation (2710) |
| Persistent unintentional phrenic nerve palsy:  Yes  NoPhrenNrvPalsyPersis (2720) |

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| **I. Tracheal Resection** *(If Tracheal Resection is Yes↓)* |
| **Pre-Operative** |
| Current Airway: AirwayCurr (2730) |  Native  Oral ETT  Trach  T-Tube |
| Prior tracheostomy: TracheostomyPrior (2740) |  Yes  No  |
| Prior intubation: IntubatePrior (2750) |  Yes  No  |
| Prior Tracheal Resection: TrachealResectPrior (2760) |  Yes  No  |
| Recent Bronchoscopic Intervention (within 6 weeks): BronchInt6Wks (2770) |  Yes  No *(includes: core out, dilation, ablation, stent)* |
| Recurrent nerves intact preoperatively:  Yes  No  Unknown RecurrNervesIntact (2780) |
|  *(If No →)*   | Which nerve?  Right  Left  Both RecurrNervNotIntact (2790) |
| **Operative** |
| Airway management during resection *(Select all that apply or ‘None’↓)* ArWyMgtDurngTrachResc (2800) |
|  |  None |  Cross – table ventilation |  VA ECMO |  Jet ventilation  |  VV ECMO  |  Cardiopulmonary bypass |
| Incision *(Select all that apply, must have at least one indicated↓)*TrachIncis (2860) |
|   |  Cervical  |  Partial sternotomy  |  Full sternotomy  |
|  |  Right thoracotomy  |  Clamshell  |
| Length of tracheal resection \_\_\_\_\_\_\_\_\_\_cm TrachealResectLen (2920) | *(Surgical or pathological measurement acceptable)* |
| Cricoid resection required: CricoidResect (2930) |  Yes  No  |
| Carinal resection required: CarinalResect (2940) |  Yes  No  |
| Release Maneuvers Type:  None  Suprahyoid  Suprathyroid  Hilar Suprahyoid - Hilar Suprathyroid - HilarReleaseManeuverType (2960) |
| **Additional Post-Operative Events** *(Select all that apply or ‘None’↓)*TrachAddlPOEve (2970) |
|  None |
|  Anastomotic dehiscence requiring drainage, revision, stent, tracheostomy, T-tube  |
|  Anastomotic stricture requiring intervention  |
|  Airway obstruction requiring intervention (e.g., unscheduled bronchoscopy)  |
|  Recurrent nerve palsy  |  |  |
|  | *(If Recurrent nerve palsy →)*  | Which nerve? Right  Left  BilateralNervePalsyRecurr (2980) |
| Did the patient leave the hospital with tracheal appliance? (tracheostomy, T-tube or stent) TrachealAppliance (3020) |  Yes  No  Patient Died In Hospital |
| Stent/tube free at 30 days post procedure:  Yes  No  Patient died within 30 days of procedureStentTubeFree30days (3040) |
| *(If No→)* | Stent/tube free at 90 days post procedure:  Yes  No  Patient died within 90 days of procedureStentTubeFree90days (3060) |
| **J. Hiatal Hernia / GERD** *(If Hiatal Hernia / GERD is Yes↓)* |
| Symptoms *(Select all that apply or None↓)*HiatHernSymp (3070) |
|  |  None |  Heartburn |  Cough |  Regurgitation |
|  |  Hoarseness |  Dysphagia |  Sore throat |  Epigastric/chest pain |
|  |  Asthma |  Early satiety |  Reflux laryngitis |  Anemia |
| **PPIs**  |
| PPI use: PPIUse (3190) |  Yes  No *(If Yes →)* | PPI relief: PPIRelief (3200) |   Complete  Partial  No |
| **EGD** |
| EGD Done: Yes  No EGDDone (3210) |
| *(If Yes→)* | Esophagitis: Esophagitis (3220) |  Yes  No *(If Yes →)* | LA Grade:  A  B  C  DLAGrade (3230) |
| Barrett’s metaplasia: MetaplasiaBarrett (3240) |  Yes  No *(If Yes →)* | Barrett’s metaplasia grade:BarMetGrade (3250) |  Low grade dysplasia  Indeterminate for dysplasia High grade dysplasia Without dysplasia |
|  |  |  |
| pH Testing:  Yes  No *(If Yes →)*pHTest (3260) | DeMeester score DeMeesterScore (3270) : \_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **Manometry** |
| Manometry performed: Manometry (3280) |  Yes  No  |
| *(If Yes →)* | Motility:Motility (3290) |  Normal  Decreased  Aperistalsis |
| LES resting pressure: \_\_\_\_\_\_\_\_\_\_\_\_ RestPressure (3300) |
| % of failed swallows: \_\_\_\_\_\_\_\_\_\_\_\_\_SwallowFail (3310) |
| **Radiology Imaging** |
| Imaging performed: ImagePerform (3320) |  Yes  No  | *(If Yes, Select all that apply→)*  | Type of imaging:ImageTypeMulti (3331). |  Barium swallow / Upper GI CT Scan CXR |
| Hiatal hernia type:  I  II  III  IVHerniaType (3350) |
| Hernia repair status: HerniaRepStat (3360) |  Primary repair  Re-operation  |
| *(If Re-operation →)*  | Surgical approach used in the initial procedure: HerniaReopApp (3370) |  Laparoscopic |  Laparotomy |
|  Thoracotomy |  LINX  |  Not documented |
| Procedure Approach*(Select all that apply↓)*HHProcAppro (3380) |
|  |  Laparoscopic  |  Robotic Chest  |
|  |  Robotic Abdomen  |  Laparotomy  |
|  |  Thoracotomy  |  Thoracoscopic |
| Fundoplication: ProcFundoplicate (3430) |  Yes  No *(If Yes →)*  | Type:  Partial  Complete FundoplicateType (3440) |
| Gastroplasty: ProcGastroplasty (3450) |  Yes  No  |
| Mesh: ProcMesh (3460) |  Yes  No  |
| Relaxing incision: ProcRelaxIncision (3470) |  Yes  No  |
| Magnetic sphincter augmentation (LINX):MagSphAugmen (3480) |  Yes  No  |
| Is patient alive at 30 days post – Op?  Yes  NoGERDPtAliveMth (3490)*(If Patient alive at 30 days post-Op is Yes ↓→)* | Is patient alive at 1 year post – Op? Yes  NoGERDPtAliveYr (3550) |
| *(If Yes, Select all that apply or ‘None’) →)* | 30 Day Post-Operative Follow Up **:**HH30dFU (3500) | *(If Yes, Select all that apply or ‘None’) →)* | 1 Year Post-Operative Follow Up:HH1yFU (3560) |
|  None |  None |
|  Radiographic recurrence  |  Radiographic recurrence  |
|  Symptomatic recurrence  |  Symptomatic recurrence  |
|  Endoscopic Intervention  |  Endoscopic Intervention  |
|  Redo Operation  |  Redo operation  |

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| **Post-Operative Events** |
| Indicate all adverse events that occurred within 30 days of surgery if discharged from the hospital or those that occur during the same admission, regardless of the length of stay. |
| **Postoperative Events?**  Yes  No  No – Patient Died in OR POEvents (3660) |
| *(If Post-Operative Events Yes →)* | Did the patient have another operation through a new or existing incision?  Yes  No PostOpProc (3670) |
| *(If Yes →)* | Was reoperation related to bleeding:  Yes  No BleedOperate (3680) |
| **Pulmonary** |
| Air leak > 5 days duration AirLeak5 (3690) |  Yes  No |  |
| Therapeutic BronchoscopyPOTherBronc (3700) |  Yes  No |
| Pleural Effusion requiring drainage CPlEff (3710) |  Yes  No |
| Pneumonia Pneumonia (3720) |  Yes  No*(If Yes,**Grade →)* | Grade:POGrdPnu (3730) Grade 2 – Moderate symptoms; oral intervention indicated (oral antibiotics, antifungal, or antiviral)  |
|  Grade 3 – Invasive intervention indicated; IV antibiotic, antifungal, or antiviral intervention indicated  |
|  Grade 4 – Urgent Intervention indicated; Life threatening consequences (escalation of care/intubation/hemodynamic support) |
|  Grade 5 - Death |
| Acute Respiratory Distress Syndrome (ARDS) ARDS (3740) |  Yes  No*(If Yes,**Grade →)* | Grade:POGrdARDS (3750) Grade 3 - Present with radiologic findings; intubation not indicated |
|  Grade 4 - Life-threatening respiratory or hemodynamic compromise; intubation or urgent intervention indicated |
|  Grade 5 - Death |
| Respiratory FailureRespFail (3760) |  Yes  No |  |
| Bronchopleural Fistula Bronchopleural (3770) |  Yes  No |
|  | Pulmonary Embolus PE (3780) |  Yes  No*(If Yes, Grade→)* | Grade:POGrdPE (3790) Grade 1 - Medical intervention not indicated |
|  Grade 2 - Medical intervention indicated |
|  Grade 3 - Urgent medical intervention indicated  |
|  Grade 4 - Life-threatening consequences with hemodynamic or neurologic instability |
|  Grade 5 - Death  |
| Pneumothorax requiring CT reinsertion Pneumo (3800) |  Yes  No |  |
| Initial Vent Support > 48 Hr Vent (3810) |  Yes  No |
| Tracheostomy Trach (3820) |  Yes  No |
| **Cardiovascular** |
| Atrial arrhythmiaAtrialArryth (3830) |  Yes  No*(If Yes →)* | Discharged on Anticoagulation :  Yes  NoDCAntiCoag (3840) |
| Ventricular arrhythmia |  Yes  No |   |
| Myocardial infarct MI (3870) |  Yes  No*(If Yes →)* | Grade:POGrdMI (3880)Grade 2 - Asymptomatic and cardiac enzymes minimally abnormal and no evidence of ischemic ECG changes |
| Grade 3 - Severe symptoms; cardiac enzymes abnormal; hemodynamically stable; ECG changes consistent with infarction  |
|  Grade 4 - Life-threatening consequences; hemodynamically unstable  |
|  Grade 5 - Death |
| Deep venous thrombosis (DVT) requiring treatment DVT (3890) |  Yes  No |  |
|  | **Gastrointestinal** |
|  | Ileus Ileus (3900) |  Yes  No |  |
| Delayed conduit emptying requiring intervention (pyloric dilatation or botox) or maintenance of NG drainage > 7days post-op DelayCondEmp (3910) |  Yes  No |  |
| Esophagogastric leak from anastomosis, staple line or localized conduit necrosisPosOpProcAL (3920) |  Yes  No*(If Yes →)* | Type:POTypeAnasLeak (3930) |
|  Type 1 - Local defect requiring no change in therapy or treated medically or with dietary modification |
|  Type 2 - Localized defect requiring interventional but not surgical therapy |
|  Type 3 - Localized defect requiring surgical therapy |
| Conduit necrosis/Failure POConNec (3940) |  Yes  No*(If Yes →)* | Type:POCondNecType (3950) |
|  Type 1 - Identified endoscopically; additional monitoring or non-surgical therapy |
|  Type 2 - Identified endoscopically; not associated w/ free anastomotic or conduit leak; surgical therapy w/out esophageal diversion |
|  Type 3 - Extensive necrosis; conduit resection/diversion |
| **Hematology** |
| Packed red blood cells PostopPRBC (3970) |  Yes  No*(If Yes→)*  | ***\*transfusions documented here do not include blood given in OR\**** | # Units \_\_\_\_\_\_\_\_\_ PostopPRBCUnits (3980) |
| **Urologic** |
| Urinary tract infection UTI (3990) |  Yes  No | Urinary retention requiring Catheterization UrinRetent (4000) |  Yes  No | Discharged with Foley catheter DischFoley (4010) |  Yes  No |
| **Infection** |
| Empyema requiring treatment Empyema (4020) |  Yes  No |
| Surgical Site Infection SurgSiteInfect (4030) |  None  Superficial  Deep  Organ space |
| Sepsis Sepsis (4040) |  Yes  No |
| Other infection requiring IV antibiotics OtherInfect (4050) |  Yes  No |
| **Neurology** |
| New central neurological event CentNeuroEvt (4060) |  Yes  No *(If Yes →)* | Event Type:CentNeuroEvtTyp (4070) Postoperative transient neurologic deficit (TIA recovery within 24 hours) |
|  RIND recovery within 72 hours |
|  Central neurologic deficit persisting postoperatively for > 72 hours  |
|  New postoperative coma that persists for at least 24 hours secondary to anoxic/ischemic and/or metabolic encephalopathy, thromboembolic event |
| Recurrent laryngeal nerve paresis-new onsetLaryngealNerve (4080) |  Yes  No *(If Yes →)* | Severity:LaryNerPareSev (4090) |  Unilateral |
|  Bilateral |
| Grade:LaryNerParGrade (4100) |  Medical Therapy/Dietary Modification Only |
| Elective Procedural Intervention |
| Emergent Procedural Intervention |
| Delirium Delirium (4110) |  Yes  No |
| **Miscellaneous** |
| New renal failure per RIFLE criteria RenFailRIFLE (4120) |  Yes  No *(If Yes →)*  | Discharged on Dialysis:  Yes  No  Patient died in hospitalDCDialys (4130) |
|  | Unexpected escalation of carePOEscCare (4140) |  Yes  No |
| Chyle LeakPOChylLeak (4150) |  Yes  No  *(If Yes →)* | Severity: POChyLeakSev (4170) |  < 1 liter per day maximum |
|  >= 1 liter per day maximum |
| Grade:POChyLeakGrade (4180) |  Type I - Enteric dietary modifications |
|  Type II - TPN |
|  Type III Treatment |
|  |  *(If Type III →)* | IR EmbolizationPOChyLeakIIIIR (4190) |  Yes – Successful Yes – Failed No |
| Surgical ligationPOChyLeakIIISL (4191) |  Yes – Successful Yes – Failed No |

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| **L. Discharge/Mortality** |
| Patient still in the hospital:  Yes  No *(If No ↓)*StillInHosp (4200) |
|  | **Hospital Discharge Date:**  \_\_\_\_\_\_/\_\_\_\_\_\_/\_\_\_\_\_\_\_\_ (mm/dd/yyyy) DischDt (4210) |
| **Status at Hospital Discharge: \*\***MtDCStat (4220) |  Discharged Alive, last known status Alive (other than hospice) Discharged Alive, died after discharge Discharged to Hospice Died in Hospital |
| *(If ‘Discharge Alive, last known status alive’ OR ‘Discharged Alive, died after discharge’ →)* | Discharge location:  Home  Extended Care/Transitional Care Unit /Rehab DisLoctn (4230)  Other Hospital  Nursing Home  Other |
| Discharged with chest tube: CTubeDis (4235) |  Yes  No |
| Discharged with home O2:(new; not using O2 pre-op) DischHomeO2 (4240) |  Yes  No |
| *(If Yes →)* | On O2 at 30 days postoperative? OnOxygen30DayPOp (4260) |  Yes  No  Unknown Patient Died Within 30 Days Post Op |
| Readmit to any hospital within 30 days of discharge: Readm30Dis (4270) |  Yes  No  Unknown |
| Substance Use Screening and Counseling Performed (NQF 2597): DCSubUseScre (4290) |  Yes  No  Not Applicable |
| *(If Status at Hospital Discharge is ‘Discharged Alive, Died after discharge’ OR ‘Discharged to Hospice’→ )* | Mortality – Date: \_\_ \_\_/\_\_ \_\_/\_\_ \_\_ \_\_ \_\_ (mm/dd/yyyy)MortDate (4300) |
| **Status at 30 days after surgery** (either discharged or in-hospital): \*\* Mt30Stat (4310) |  Alive  Dead  Unknown |