Case Report Form CovidSurg-Cancer-Lung

NB: Additional data points may be required for specific cancer types

NIHR Global Health Research Unit on Global Surgery | CovidSurg

Patient **REDCap ID**:_____

Age: 0-4w | 4-52w | 1-9y | 10-16y | 17-19y | 20-29y | 30-39y | 40-49y | 50-59y | 60-69y | 70-79y | 80-89y | 90y+ **Sex**: Female | Male **ASA Grade**: 1 | 2 | 3 | 4 | 5 **Weight** (<52 weeks only):_____ kg

WHO/ECOG Performance status: 0 | 1 | 2 | 3 | 4

BMI:

□ Underweight (<18.5)
□ Normal/healthy weight (18.5-24.9)
□ Overweight (25-29.9)
□ Moderately obese (30-34.9)
□ Severely obese (35-39.9)
□ Very severely obese (≥40)

Comorbidities:

□ Current smoker
□ Asthma
□ Current cancer disease
□ CKD (Moderate/Severe)
□ COPD
□ Congenital abn (cardiac)
□ Congenital abn (non cardiac)
□ Congestive heart failure
□ Dementia
□ Diabetes Mellitus
□ Hypertension
□ Myocardial Infarction
□ Peripheral Vascular Dis
□ Stroke/TIA
□ Other: _____

Cancer-specific details:

Tumour type

□ Primary lung cancer
□ Mediastinal tumour
□ Pulmonary metastasis
□ Pleural mesothelioma
□ Other:_____

Baseline **staging at decision** for surgery:
T stage: T1 | T2 | T3 |T4 | unknown
N stage: N0 | N1 |N2 | unknown
M stage: M0 | M1 | unknown

Date of cancer **diagnosis**: ___/__/____
Date of **decision** for curative surgery: ___/___/____

Referral route:
□ Screening programme □ From primary care
□ From secondary care □ Other:_____

Was the initial MDT (tumour board) decision for primary surgical treatment?
Yes – decision for surgical Rx (optimal treatment option) | Yes – decision for surgical Rx (compromised option due to COVID-19) | No – decision for non-surgical Rx (optimal treatment option) | No – decision for non-surgical Rx (compromised option due to COVID-19)

Did the patient have an operation related to this cancer during the 3-month study window? No / Yes

If a cancer operation WAS performed:

Date of **surgery**: ___/__/____

Op performed in: Dedicated COVID-free hospital | Dedicated COVID Rx hospital | Undesignated hospital type with ED | Undesignated hospital type without ED | Other:_____

COVID-19 CRITCON level: 0 | 1 | 2 | 3 | 4 | 5

Did the patient have a ***resolved* COVID-19 infection** before the time of surgery? Yes – lab test/CT thorax | Clinical suspicion | No

Was **COVID-19 screening** performed preoperatively?
Laboratory test | CT thorax | Other: _____

Did patient have mandatory self-isolation before surgery?
Yes, > 2 weeks | Yes - < 2 weeks | No**COVID-19** suspected at time of surgery? Yes | No

Tests performed to investigate SARS-CoV-2 status:

	CT (neg)	CT (pos)	Swab (neg)	Swab (pos)
4-7 days prior surgery	□	□	□	□
1-3 days prior surgery	□	□	□	□

Urgency of surgery:
Immediate | Urgent | Expedited | Elective

If a cancer operation WAS performed:

Anaesthesia: Local | Regional | General
Operation performed? _____
Approach: Open | Minimally invasive | Converted to open
Surgical **intent**: Curative | Palliative

Post-operative histology:
T stage: T1 | T2 | T3 |T4 | unknown
N stage: N0 | N1 |N2 | unknown
M stage: M0 | M1 | unknown
Resection margin status: R0 | R1 | R2 | Unknown

Did any change to treatment occur due to the COVID-19 pandemic (operated patients)**?**
No change to care, no neoadjuvant Rx | No change – neoadjuvant equivalent to pre-COVID | Delayed Rx – higher operative risk | Delayed Rx – lower malignancy risk | Delayed Rx – no capacity | Expedited definitive surgery | Change in choice of operation | IR performed before surgery, not typically indicated | Neoadj, not typically indicated | No Neoadj treatment, typically indicated | No adjuvant chemotherapy, typically indicated | No adjuvant radiotherapy, typically indicated | Other: _____

Did this represent a change to your typical operative approach in the pre-COVID-19 era?
□ No change to operative approach
□ Yes, chose to avoid minimally invasive surgery related to COVID
□ Yes, chose to avoid open surgery related to COVID
Surgical **intent**: Curative | Palliative

Environment in which patient cared for:
Operative theatre – Designated COVID theatre | Designated non-COVID theatre | No designation for theatre
ITU – Designated COVID treatment area | Designated non-COVID treatment area | No designation for this area
Postop ward– Designated COVID ward| Designated non-COVID ward| No designation for this ward

Change to operation choice
Thoracotomy, not VATS | Change of lung isolation (single lumen ETT, not DLT) | Other: _____

Reason for deviation from practice in pre-COVID-19 era? MDT (tumour board) recommendation | Patient choice | Other:_____
Details of neoadj Rx: _____

COVID-19 post-operatively (30 days): Yes – lab test | Yes – CT thorax | Yes– clinical only | No
If yes: Inpatient | Required Admission | Community

Mortality: Died on table | d0-7 | d8-30 |
Alive still in hosp 30d | transferred | discharged to rehab | discharged home **Re-operation**: Yes | No

Post-op intensive care: No | planned from theatre | unplanned from theatre | unplanned from ward
(If no/unplanned from ward): **Would post-operative ICU bed have been planned pre-COVID-19 era?** Yes, not available ~ COVID| Yes, not available (other)| No

Total **length of hospital stay**: ____days

If a cancer operation WAS performed:

Complications:

□ Acute kidney injury
□ ARDS
□ Anastomotic leak
□ Blood transfusion
□ Cardiac arrest
□ Coma >24h
□ Deep Vein Thrombosis
□ Graft/prothesis/flap fail
□ Myocardial infraction
□ Pneumonia
□ Respiratory failure
□ Sepsis
□ Septic shock
□ Stroke/TIA
□ SSI superficial/deep
□ SSI organ space
□ UTI
□ Wound dehiscence

If NO operation was performed (by 3 months from study entry)

Is there **still** a plan for curative surgery? Yes | No

Why was no operation performed in the 3 months?
If still plan for surgery:
□ Patient choice to avoid surgery during pandemic
□ MDT decision to delay surgery due to risk to patient
□ Ongoing neoadjuvant treatment
□ No bed / Critical care space / Operating room space
□ Change of recommendations in society guidelines related to COVID-19
If no ongoing plan for surgery:
□ Patient choice to avoid surgery during pandemic
□ MDT decision to delay surgery due to risk to patient
□ Disease progression, surgery no longer indicated
□ Change in clinical status unrelated to cancer e.g. MI
□ Died awaiting surgery
□ Other: _____

Has the cancer been **re-staged**? No | Yes
If so, date__/__/__

T stage: T1 | T2 | T3 |T4 | unknown
N stage: N0 | N1 |N2 | unknown
M stage: M0 | M1 | unknown

Did any change to treatment occur due to the COVID-19 pandemic (non-operated patients)**?**
No change to care – delayed/cancelled other reason | Operation cancelled because of COVID-19 | Operation delayed because of COVID-19 | Neodj treatment, not typically indicated | Neoadj treatment longer than typical | Neoadj treatment shorter than typical | Less access to staging procedures | Less access to staging investigations | Other :_____

Change in definitive treatment modality
Radical radiotherapy | SBRT | Other:_____

NIHR Global Health Research Unit on Global Surgery

Case Report Form CovidSurg

*NB: Complete this CRF <u>only</u> for patients that are eligible for **both** studies (operated cancer patients with COVID-19 infection)*

CovidSurg

Patient **REDCap ID**:_____

COVID-19 Patient Information

BCG/Tuberculosis(TB) status
Vaccine - <15yrs ago | Vaccine – 15>yrs ago | TB diagnosis <15yrs ago | TB diagnosis >15yrs ago | Close contact with individual with known TB <15yrs ago | Close contact with individual with known TB >15yrs ago | No previous BCG vaccine/TB exposure | BCG vaccination/TB exposure unknown

Findings at admission:

- ☐ Abdominal pain
- ☐ Dyspnoea
- ☐ Cough
- ☐ Diarrhoea
- ☐ Fatigue
- ☐ Fever >38C
- ☐ Haemoptysis
- ☐ Myalgia
- ☐ Nausea/vomiting
- ☐ Sputum
- ☐ Other:_____

COVID-19 Preoperative Investigations

Last available data from before surgery:
Resp rate: _____ rpm **Heart rate**:_____ bpm
Systolic BP:_____ mmHg Diastolic BP:_____ mmHg

Tests performed to investigate SARS-CoV-2 status:

	CT (neg)	CT (pos)	Swab (neg)	Swab (pos)
4-7 days prior surgery	☐	☐	☐	☐
1-3 days prior surgery	☐	☐	☐	☐
Day of surgery (preop)	☐	☐	☐	☐
After surgery (during index admission)	☐	☐	☐	☐
After discharge from index admission (within 30 days of surgery)	☐	☐	☐	☐

How was SARS-CoV-2 confirmed?

- ☐ Positive swab – result received before surgery
- ☐ Positive swab – result received after surgery
- ☐ CT scan of chest confirming COVID-19 – before surgery
- ☐ CT scan of chest confirming COVID-19 – after surgery
- ☐ Clinical diagnosis/chest X-Ray – before surgery
- ☐ Clinical diagnosis/chest X-Ray – after surgery

<u>Pre-op investigations:</u>
Haemoglobin:_____g/L WCC:_____10^9/L CRP:_____mg/L

Pre-op x-ray:

- ☐ Not performed
- ☐ Yes- normal
- ☐ Yes- abnormal

Pre-op chest CT:

- ☐ Not performed
- ☐ Yes- normal
- ☐ Yes- consolidation
- ☐ Yes- ground glass opacity
- ☐ Yes- pulmonary infiltration
- ☐ Yes- other abnormality

<u>Management</u>

Time from admission to operation (pre-op delay)
<6 hrs | 6-23 hrs | 24-47 hrs | 48-71 hrs | 72+hrs

COVID-19 Treatment

Did patient receive NSAIDs? No | Yes before admission | After admission | Both

Patient received during index admission?

- ☐ Antibiotics
- ☐ Antivirals
- ☐ Quinine/derivative
- ☐ Corticosteroids
- ☐ IV Immunoglobulins
- ☐ Interferon
- ☐ IL-6 blocker

Antiviral (name & dose):_____
Corticosteroid (name & dose):_____

Renal dialysis during index admission?
No | Yes but not at 30 days after surgery
Yes and ongoing dialysis at 30 days after surgery

Pre-op respiratory support:

- ☐ None
- ☐ Low-flow O2
- ☐ High-flow O2
- ☐ Non-invasive ventilation
- ☐ Invasive vent
- ☐ ECMO

Post-op respiratory support:

- ☐ None
- ☐ Low-flow O2
- ☐ High-flow O2
- ☐ Non-invasive ventilation
- ☐ Invasive vent
- ☐ ECMO

Duration of post-op mechanical ventilation:
1-23h | 24-47h | 48-71h | 72-167h | 168h+