Case Report Form CovidSurg-Cancer-Neuro

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 | 5 | Unknown

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:

Location: □ Supratentorial □ Infratentorial

Tumour:

Low grade glioma | High grade glioma | Meningioma | Primary CNS lymphoma | Vestibular schwannoma | Pituitary adenoma | Metastasis | Other:_____

Tumour type:

□ Primary resection □ Recurrence
□ Malignant transformation of known grade 2 glioma

Date of cancer **diagnosis**: ___/__/____

Date of **decision** for curative surgery: ___/___/____

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:

If **emergency cancer surgery** was required, why?

□ Drop in GCS □ Neurological deficit
□ Obstructive hydrocephalus □ Other:_____

Anaesthesia: Local | Regional | General

Operation performed? _____

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

Extent of resection

Biopsy | Subtotal resection (residual tumour on imaging) | Gross total resection (no residual tumour is seen on imaging) | Resection of unknown extent (no postoperative imaging)

Intraoperative adjuncts used

5-aminolevulinic acid (5-ALA) | intraoperative ultrasound | Intraoperative MRI | Image guidance ('neuronavigation') | Tractography guidance | Awake craniotomy | Direct cortical stimulation

Operation length

□ <1hour □ 1-2 hours. □ 2-4 hours □ 4+ hours

Histopathological / molecular tumour type:

Glioma | Meningioma | Primary CNS lymphoma | Vestibular schwannoma | Pituitary adenoma | Metastasis | Other:_____

Metastasis, site of primary tumour

Lung | Breast | Melanoma | Renal | Other:_____

Pituitary adenoma type:

Non-functioning | Functioning, ACTH | Functioning, GH | Other:_____

Meningioma grade:

Grade 1 | 2 | 3

Glioma grade:

Grade 1 | 2 | 3 | 4

Glioma type:

Anaplastic | Oligendendroglioma | Oligo-astrocytoma | Astrocytoma | Glioblastoma

IDH-1 status:

Wildtype | Mutated | Not tested/unknown | N/A

MGMT status:

Unmethylated | Methylated | Not tested/unknown | N/A

1p19q status:

Intact | Deleted | Not tested/unknown | N/A

Did any change to treatment occur due to the COVID-19 pandemic (operated patients)**?**

No change to care | Delay to definitive surgery | Expedited definitive surgery | Change in choice of operation | Op performed in alt. hospital | Adjuvant radiotherapy delayed | Adjuvant radiotherapy dose changed | Adjuvant chemotherapy delayed | Adjuvant chemotherapy type/dose changed | Adjuvant chemotherapy given | Concomitant chemo-/radio-therapy not given | 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

Did surgeons contract COVID-19 (30-days): Yes | No

If a cancer operation WAS performed:

Complications:

□ Acute kidney injury
□ ARDS
□ Anastomotic leak
□ Blood transfusion
□ Cardiac arrest needing CPR
□ Coma >24h
□ Deep Vein Thrombosis
□ Graft/prothesis/flap fail
□ Myocardial infraction
□ Pneumonia
□ PE
□ Sepsis
□ Septic shock
□ Stroke/TIA
□ SSI-superficial/deep
□ SSI-organ space
□ UTI
□ Wound dehiscence
□ Intracranial haemorrhage
□ Seizures
□ CSF leak
□ New focal neurological deficit
□ Other:_____

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 / intensive care space / theatre space
□ Change of recommendations in society guidelines related to COVID-19
□ Other:_____

NB: Continued on next page

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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
□ Change of recommendations in society guidelines
□ Other: _____

Did any change to treatment occur due to the COVID-19 pandemic (non-operated patients)**?**

No change to care – cancelled other reason | Operation cancelled because of COVID-19 | Operation delayed because of COVID-19 | Change in Rx strategy | IR procedure before/instead of surgery, not typically indicated | Neodj treatment, not typically indicated | Less access to staging procedures | Less access to staging investigations | Other_____

NIHR Global Health Research Unit on Global Surgery

Case Report Form CovidSurg

*NB: Complete this CRF only 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

Pre-op investigations:

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

Management

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+