

Appendix 1 to DeGirolamo K, D'Souza K, Apte S, et al. A day in the life of emergency general surgery in Canada: a multicentre observational study. *Can J Surg* 2018.

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Appendix 1 – A day in the life of Emergency General Surgery (EGS) data collection form

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Project Principal Investigator
 S. Morad Hameed, MD MPH FRCSC
 Vancouver General Hospital – Trauma Services,
 855 W 12th Avenue, Vancouver, BC, V5Z 1M9
 Fax: (604) 875-5358

For Final Reviewer ONLY: Please check off your institution, ensure no duplicate forms for patients, fill out any missing fields if possible and REMEMBER to redact patient identifiers prior to faxing to Dr. Hameed at (604) 875-5348.

- Vancouver General Royal Columbian Eagle Ridge Victoria Gen. Foothills Red Deer Regional
 University of Alberta St. Boniface Health Sciences Centre Ottawa Sunnybrook Toronto General
 St. Michael's Brampton General Etobicoke General McGill University Health Centre
 QEII – Halifax Infirmary SJHH

Age: _____	Past Medical History/ Co-Morbidities:	Admitting Diagnosis:
Gender: Male	Diabetes Mellitus	Appendicitis
Female	Smoking	Cholecystitis
Other: _____	COPD	Intestinal Obstruction
Days since admission: _____	Myocardial Infarction/ Angina	Mesenteric Ischemia
	TIA/ Stroke	Abdominal Pain
	Congestive Heart Failure	Skin and Soft Tissue Infections
	Previous Abdominal Surgery	Other: _____
	Previous VTE or PE	Final Diagnosis (if different from above)
	Other: _____	_____

Depending on the management of the patient, you may fill both or just one of the sections. Please choose appropriately.

NON-OPERATIVE

OPERATIVE

For the checkboxes that below are ticked, please provide relevant details regarding management
 Pain Medications or Other Medications

Antibiotics

Fluids

Total Parental Nutrition Ordered

Radiological Interventions

Procedure: _____

Date of Procedure: ___/___/___

Planned Procedure: ___/___/___

Operative Management of Patient:

Open Abdominal Surgery

Laparoscopic Surgery

Laparoscopic to Open Conversion

Intraoperative Complications (if yes, list below)

Post-Operative Complications (if yes, list below)

Did/ Will this patient be transferred to the Intensive Care Unit during this hospital visit Yes No

If yes, please answer the following if applicable:

Patient is or will be mechanically ventilated Yes No

No. of days patient has been in the ICU: _____

Discharge Information:

N/A

To Home

Which other medical staff were asked to consult on this patient's care (Check more than one if applicable)

General Internal Medicine

Gastroenterology

Oncology

Urology

Plastics and Reconstructive Surgery

Other: _____

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Appendix 2 – A day in the life of Emergency General Surgery (EGS) data summary form

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S. Morad Hameed, MD MPH FRCS
Vancouver General Hospital – Trauma Services,
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SUMMARY DATA COLLECTION FORM

Total Number of Consults Seen	_____
Total Number of Patients Admitted	_____
Total Number of Patients under the Care of the Acute Care Surgery (ACS) Service	_____
Total Number of ICU patients the ACS Service is following	_____
Total Number of Open Abdomen Patients	_____
Total Number of patients the ACS Service is following as <u>Consult ONLY</u> (i.e. Not Admitted under the ACS Service):	_____
OPERATIVE DATA:	
Total Number of Laparoscopic ORs	_____
Total Number of Open ORs	_____
Total Procedures Completed	_____
Total Intraoperative Complications	_____
NON-OPERATIVE DATA:	
Total Number of Patients Admitted with Plans for Non Operative Management	_____
Total Number of Non Operative Patients admitted for Antibiotic Treatment	_____
CASE MIX DATA:	
Total Appendicitis Cases	_____
Total Cholecystitis Cases	_____
Total Pancreatitis Cases	_____
Total Intestinal Obstruction Cases	_____
Total Upper GI Bleed Cases	_____
Total Lower GI Bleed Cases	_____
Total Mesenteric Ischemia Cases	_____