

▼ Identification

▶ Patient

Gender:

Male Female

Birth Date (dd-mm-yyyy) ____ / ____ / ____

Area of Residency _____

Nationality: _____

▶ Surgical Team

Main Surgeon (ID nr. of the Medical Bar Association) _____

Degree of the Surgeon:

Assistant Head of Department Senior Surgeon Fellow/Scholar
 Graduate Surgeon Resident Junior Surgeon

Degree of the first help:

Assistant Head of Department Senior Surgeon Fellow/Scholar
 Graduate Surgeon Resident Junior Surgeon

▶ Pre-Op

Hospital _____

Date of the Surgery (dd-mm-yyyy) ____ / ____ / ____

Anesthesia

Regional General

ASA

I II III IV

Weight _____ kg

Height _____ m

Body Mass Index (kg : height²) _____

Physical activity

- 1- inactive or dependent
 2- sedentary without any compensatory physical activity
 3- light to moderate physical activity
 4- hard occupation; physical activity as a hobby
 5- very intense physical activity; contact or radical sports

Financial coverage

Private National Health System
 Sub-system Insurance

Surgery

Procedure

- Cemented revision
- Non-cemented revision
- Hybrid revision
 - Femur
 - Acetabulum

Position

- Lateral
- Supine

Approach

- Anterior
- Posterior
- Lateral
- Anterolateral

Transfemoral osteotomy

- No
- Yes

Bone Cement

- No
- Yes - Which one? _____
 - Without antibiotics
 - With antibiotics
Which one? _____

Graft

- No
 - Yes
 - Acetabulum
 - Femur
- Type
- Autologous
 - Allograft
 - Bone substitute

Shape

- Structural
- Fragmented

VTE prophylaxy

- Chemical
 - Nadroparin (Fraxiparin)
 - Enoxaparin (Lovenox)
 - Rivaroxaban (Xarelto)
 - Dabigatran (Pradaxa)
 - Fondaparinux (Arixtra)
 - Other _____
- Mechanical
- No prophylaxy

Antibiotic prophylaxy

- No
- Yes - Which one ? _____
 - 24H
 - 48H
 - >48H

Additional fixation elements

- Acetabulum reinforcement - Specify _____
- Augmentation - Specify _____
- Cables and nets - Specify _____
- Plates - Specify _____

▼ Notes

Surgeon notes (previous conditions; surgical findings and intraoperative events)

(You should mention all surgical occurrences)

▼ Stickers

(Include screws, cement and bone graft or bone substitute)

- ▶ Glue here the stickers of all the implanted material or list below the components, models and manufacturers of all the implanted material