

Q27 Please list the minimum requirements for an endoscopy report of an Endoscopic Resection procedure.

Answered: 12 Skipped: 0

#	RESPONSES	DATE
1	-Who the practitioners were - ? trainee involved -Medications used -Lesion appropriately described (location, size, morphology (Paris, topography) -Injectate used -Snares used - Documentation of any intra-procedural bleeding requiring intervention of lack thereof -Any evidence of deep mural injury and what was done about it -Whether or not STSC was applied to the margin -Instructions for follow-up	1/13/2018 6:50 AM
2	Location, size, paris classification, advanced endoscopic features, duration of the procedure , possible complications and how they were treated, instructions for follow-up and readmission in case of complications	12/7/2017 5:50 PM
3	- Details of Polyp - Details of procedure - Details of any intra-procedure complications - Plans for follow up - Warning signs to look out for and what to do in case of any	12/3/2017 9:59 PM
4	* all lesion aspects * type of resection * intraprocedural complications * endoscopic assessment of radically	11/18/2017 9:39 PM
5	Prep quality Equipment used Size/location/Paris/Kudo Injectate Snare used/pieces Completeness Adjunctive measures IPB Perf/target sign where relevant	11/14/2017 6:10 AM
6	Polyp location - anatomically, folds from, distance from dentate line Polyp size, morphology, Kudo Injectate used, current for resection Documentation of significant bleeding, propria defect Post-procedural fasting instructions Post-procedural anti-platelet / anti-coagulant plan Follow-up plan Details regarding where pathology has been sent	11/13/2017 1:55 PM
7	1. Indication and findings of previous endoscopy including previous attempt to resect, histology if available and family history of colon cancer 2. Description of the polyp: Size Morphology (LST-granular vs non granular), Paris classification Findings using advanced imaging techniques such as optical chromoendoscopy (NBI) or chromoendoscopy Location Description of technique - en bloc or piecemeal, injection performed or not and solution used, type of snares used, ablation performed or not, whether complete resection was achieved or not, mucosal defect closed or not post resection Clear documentation of any adverse events (bleeding, perforation) Clear instructions post procedure regarding diet, resumption of anti-platelet or anticoagulation agents. Alarm symptoms that should prompt evaluation or at least a phone call to the treating endoscopist Tentative surveillance interval based on histology.	11/5/2017 3:58 PM
8	1. Lesion location, ease of access and positioning 2. Distance from anal verge 3. Lesion description including Size, Paris, Granularity, Modified Sano, Kudo's pit pattern 4. Injectate used and number of injections. 5. Number of resections performed for a piecemeal EMR 6. Difficulties encountered including intra-procedural complications if any and how it was tackled 7. Base at the end of the procedure and if any adjunct treatment performed (for instance STSC) 8. Bowel prep and any other additional lesions present which were or were not tackled 9. Samples retrieved 10. Follow up plan	11/5/2017 3:40 AM
9	- Name of the patient - Name of the staff involved - type of endoscop - drugs used; sedation anesthesia - indication - bowel prep (scale by segments) - completeness of the colonoscopy (ceaceum, ...) - Location, size, morphology of each polyp . Technique for polypectomy and if enbloc or piecemeal. Retrieved for histology - Difficulties for reaching the colon - In case of LSL: location, size, Paris morphology,Kudo/NICE/JNET, lifting sign, piecemeal or en bloc resection, injected solution, significant intraprocedural events, inspection of the defect, prophylactic techniques	11/3/2017 3:11 PM
10	size, site, Paris classification, pit/vessel pattern description, sedation, endoscopist name, technique employed, main resection device used, intraprocedural complication, endoscopic completeness of resection, other pathology, emergency contact details, photo documentation	11/3/2017 12:53 PM
11	Indication and essential pre procedural details on medication and prior histor, relevant for procedure. Involved staff, timeout procedure, sedation and other perprocedural medication, instruments used, bowelprep score, discomfort score, description of procedure including total time, intraprocedural complications and estimated amount of blood loss. Possible and expected complications, instructions for post procedural medications and appointments	11/1/2017 11:50 AM

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12	Site, size, morphology, techniques used. Images pre and post resection. Whether site was tattooed and where in relation to resection. Retrieval of tissue. Follow up arrangement and time of next procedure. Any need for further tests or investigations.	10/31/2017 11:09 PM
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