

# EUROFOETUS

Fetoscopy  
Registry

## Clinical Record Forms



Patient initials:

Patient ID:

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Please send these forms to:  
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**U.Z. Leuven**  
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**Belgium**

Study: Fetoscopy Registry

Surgeon:

Patient:

## F48 Patient data entry

**01. Patient initials:**

Please enter the patient initials. These will be used in combination with a sequential number attributed by the program to uniquely identify the patient.

**02. Patient birth date:** (dd-mmm-yyyy)

**03. Estimated date of delivery (EDD):**

Calculated either on last menstrual period, or on ultrasound, (dd-mmm-yyyy)

**04. Date diagnosis established:**

(dd-mmm-yyyy).

**05. Gestational age (GA-D) at diagnosis:**

The program will calculate the GA.

**06. Number of fetuses:**

**07. Ruptured membranes:**

No  Yes

**08. Presumptive diagnosis prior to fetoscopy:**

Please give all details.

**09. Additional data of interest:**

**10. Date of completion of this form:**

(dd-mmm-yyyy)

Study: Fetoscopy Registry

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## F50 Fetoscopy procedure and short term complications (page 1)

01. Date of procedure: (dd-mmm-yyyy)

02. Gestational age at fetoscopy (GA):

The program will calculate the GA.

03. Which number of fetoscopic procedure in this pregnancy:

04. Anesthesia:

Please check all applicable.

- No
- Local
- Local plus sedation
- Loco-regional
- General

05. Scope used:

Please check all applicable.

- Storz 2.0 mm fibre scope
- Storz 2.3 mm rod lens
- Storz 1.2 mm fibre scope
- Olympus 1.9 mm rod lens
- Any other, specify type and diameter

06. Number of port entries during this procedure:

- 1  2  3  4

07. Outer diameter sheath/cannula:

(in mm, range 1-10 mm)

08. Uterine insertion site:

Please check all applicable.

- Upper right quadrant
- Upper left quadrant
- Lower right quadrant
- Lower left quadrant

09. Insertion technique:

Please check all applicable.

- Percutaneous
- Minilaparotomy (<5cm)
- Laparotomy

10. Placental location (predominant):

Please check one.

- anterior
- posterior
- fundal
- previa

## F50 Fetoscopy procedure and short term complications (page 2)

**At entry of any port:**

**11. Transplacental insertion:**  No  Yes

As observed at any point during the procedure

**12. Intra-amniotic bleeding:**  No  Yes

**13. Membrane dislodgement:**  No  Yes

**14. Other complications:**  No  Yes

**15. Specify complications:**

Please complete if previous question is answered yes.

**16. Intended procedure:**

**17. Performed procedure:**

(Short description)

**18. Distension medium:**

**19. Total amnioinfusion volume:**   
(in mL, range 0-99,999)

**20. Total volume drained:**   
(in mL, range 0-99,999)

**21. Net amniotic fluid balance:**   
The program will calculate this field. It is the result of infused minus drained.

Study: Fetoscopy Registry

Surgeon:

Patient:

## F50 Fetoscopy procedure and short term complications (page 3)

22. Duration of procedure (skin-to-skin):   
(in min)

23. Duration of fetoscopic procedure:   
(in min)

24. Fetal monitoring:  No  Yes

25. Monitoring technique:

26. Intra-operative complications:  No  Yes

27. Specify complications or any other comment:

Please complete if previous question is answered yes.

28. Fetal death during procedure:  No  Yes

29. (P)PROM during procedure or first 24 hours:  No  Yes

30. Prophylactic tocolysis:  No  Yes

31. Specify:

Please complete if previous question is answered yes.

32. Maternal ascites:  No  Yes

33. Maternal intraperitoneal bleeding:  No  Yes

Study: Fetoscopy Registry

Surgeon:

Patient:

## F55 In utero follow-up

**01. Outcome of the procedure:**

**02. Preterm labor requiring tocolysis:**     No     Yes

**03. (P)PROM:** (dd-mmm-yyyy)  
If yes, enter the date of rupture.

**04. Local infection:**     No     Yes

**05. Chorioamnionitis:**     No     Yes

**06. Other post-operative complications:**     No     Yes

**07. Specify other complications:**

Study: Fetoscopy Registry

Surgeon:

Patient:

## F56 Post-natal follow-up

01. Date of delivery: (dd-mmm-yyyy)

02. Labor:

- Induced  
 Spontaneous

03. Mode delivery:

- Vaginal  
 Elective CS  
 Emergency CS

04. Fetus born alive:

- No  Yes

05. Birthweight:

(in grams, range 50-5000)

06. Neonatal complications:

07. Neonatal outcome:

(in terms of the condition and of the performed procedure)

08. Any long term outcome if available: