

All patients completing form E

E1	Has the patient had previous abdominal surgery? (tick one) ☐ No ☐ Yes, open surgery ☐ Yes, minimally invasive surgery ☐ Yes, open and minimally invasive surgery
E2	Only if: B 20 = Open Abdominal incision (tick one) ☐ Vertical midline ☐ Paramedian ☐ Transverse ☐ Oblique (e.g. Kocher / McBurney) ☐ Flank ☐ Pfannenstiel ☐ Chevron/Rooftop ☐ Thoraco-abdominal ☐ Not applicable
E3	Only if: B 20 = minimally invasive or robotic assisted Was there an extraction site? (tick one) ☐ No ☐ Yes - Vertical midline ☐ Yes - Paramedian ☐ Yes - Transverse ☐ Yes - Oblique (e.g. Kocher / McBurney) ☐ Yes - Flank ☐ Yes - Pfannenstiel ☐ Yes - Chevron/Rooftop ☐ Yes - Thoraco-abdominal ☐ Yes - Other, please specify _____
E4	Was a stoma created? (tick all that apply) ☐ No ☐ Yes - end ileostomy ☐ Yes - loop ileostomy ☐ Yes - double-barrelled ileostomy ☐ Yes - end colostomy ☐ Yes - loop colostomy ☐ Yes - double-barrelled colostomy ☐ Yes - urostomy ☐ Yes - mucus fistula ☐ Other, please specify _____
E5	Was a bowel anastomosis performed? (tick one) ☐ No ☐ Yes - Stapled and intracorporeal ☐ Yes - Stapled and extracorporeal ☐ Yes - handsewn and intracorporeal ☐ Yes - handsewn and extracorporeal
E6	Did any of the following intra-operative events occur? (tick all that apply) ☐ Operating time >4h ☐ Solid organ injury ☐ Ureteric injury ☐ Vascular injury ☐ Blood transfusion ☐ Haemodynamic instability ☐ Vasopressor requirement ☐ None of the above
E7	Was tranexamic acid used intra-operatively? (tick one) ☐ No ☐ Yes - given prophylactically on induction ☐ Yes - given in response to bleeding
E8	Did the patient have mechanical bowel preparation pre-operatively (if there was a colonic resection)? (tick one) ☐ No ☐ Yes ☐ No colonic resection
E9	Only if: B 22 = clean-contaminated, contaminated or dirty Were gloves and instruments changed prior to abdominal wall closure? (tick one) ☐ No ☐ Yes ☐ Unknown
E10	Only if: E2 answered, or E3 = open incision or extraction site What suture was used for primary fascial closure of the main abdominal incision or extraction site? (tick one) ☐ PDS / PDS II (polydioxanone) ☐ PDS Plus (triclosan-coated polydioxanone) ☐ Maxon (polyglyconate) ☐ Vicryl (polyglactin 910) ☐ Vicryl Plus (triclosan-coated polyglactin 910) ☐ Vicryl Rapide (irradiated polyglactin 910) ☐ Polysorb (lactomer 9-1) ☐ Other please specify _____ ☐ Unknown — operation note does not record suture material
E11	Only if: E2 answered, or E3 = open incision or extraction site Was the fascial closure technique (tick all that apply) ☐ Continuous running suture ☐ Interrupted sutures ☐ Small bite technique ☐ Large bite technique ☐ Unknown
E12	Only if: B 21 = laparoscopic or robotic assisted Which port sites were closed at fascial level (not including extraction site)? (tick one) ☐ None ☐ All ports sized 5mm and above ☐ All ports sized 8mm and above ☐ All ports sized 10mm and above
E13	Only if: E12 = one or more ports closed What suture was used for fascial closure of the port sites? (tick one) ☐ PDS / PDS II (polydioxanone) ☐ PDS Plus (triclosan-coated polydioxanone) ☐ Maxon (polyglyconate) ☐ Vicryl (polyglactin 910) ☐ Vicryl Plus (triclosan-coated polyglactin 910) ☐ Vicryl Rapide (irradiated polyglactin 910) ☐ Polysorb (lactomer 9-1) ☐ Other please specify _____ ☐ Unknown — operation note does not record suture material
E14	Only if: B 24.1 = skin closed at primary closure How was the skin closed? (tick all that apply) ☐ Staples ☐ Interrupted transcutaneous monocryl ☐ Interrupted transcutaneous biosyn ☐ Interrupted transcutaneous other, please specify ☐ Continuous transcutaneous monocryl ☐ Continuous transcutaneous biosyn ☐ Continuous transcutaneous other, please specify ☐ Interrupted subcuticular monocryl ☐ Interrupted subcuticular biosyn ☐ Interrupted subcuticular other, please specify ☐ Continuous subcuticular monocryl ☐ Continuous subcuticular biosyn ☐ Continuous subcuticular other, please specify ☐ Left open (i.e. skin not closed) or delayed closure ☐ Other, please specify _____ ☐ Unknown
E15	Did the patient experience any of the following post-operative complications? (tick all that apply) ☐ Stoma complications (high output/prolapse/necrosis) ☐ Ileus ☐ Intra-abdominal collection ☐ Fistula (enterocutaneous/enteroenteric) ☐ Hernia ☐ Acute Kidney injury ☐ Electrolyte disturbance ☐ Adhesive small bowel obstruction ☐ None of the above

Breast operation — only if B 19 is a breast operation

E16	Did the patient have any other following complications? (tick all that apply) ☐ No ☐ Seroma ☐ Haematoma ☐ Skin necrosis ☐ Nipple necrosis ☐ Implant loss ☐ Flap necrosis ☐ Flap loss
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Emergency laparotomy — only if A 9 = emergency, A 11 = abdomen and pelvis, B 20 (all modalities) and B 21 = open, excluding appendicectomy or cholecystectomy

E17	Did the patient have an emergency laparotomy? (tick one) ☐ No ☐ Yes	
E18	Was the patient seen by or discussed with a Consultant or equivalent surgeon prior to a decision to operate? (tick one) ☐ Not seen or discussed with a Consultant or equivalent surgeon ☐ Patient discussed with a Consultant or equivalent surgeon ☐ Patient seen by a Consultant or equivalent surgeon	
E19	Was the patient seen by or discussed with a Consultant anaesthetist or equivalent prior to the operation? (tick one) ☐ Not seen or discussed with a Consultant or equivalent anaesthetist ☐ Patient discussed with a Consultant or equivalent anaesthetist ☐ Patient seen by a Consultant or equivalent anaesthetist	
E20	Did the patient have a CT scan pre-operatively? ☐ No ☐ Yes	E21 Was a risk prediction model used before the operation to predict post-operative mortality? ☐ No ☐ Yes
E22	Did the patient have a history of active cancer in the last 5 years? (tick one) ☐ No ☐ Yes	
E23	What was the indication for the emergency laparotomy? (tick all that apply) ☐ Perforation – Oesophagus ☐ Perforation – Stomach ☐ Perforation – Duodenum ☐ Perforation – Small bowel ☐ Perforation – Large bowel ☐ Perforation – other ☐ Sepsis – perforation ☐ Sepsis – anastomotic leak ☐ Sepsis – abdominal abscess ☐ Sepsis – intestinal fistula ☐ Sepsis – iatrogenic injury ☐ Sepsis – not specified ☐ Obstruction - Tender small bowel obstruction ☐ Obstruction - Non-tender small bowel obstruction ☐ Obstruction - Tender large bowel obstruction ☐ Obstruction - Non-tender large bowel obstruction ☐ Obstruction - Gastric outlet obstruction ☐ Obstruction - Incarcerated/strangulated hernia ☐ Obstruction - Hiatus hernia / para-oesophageal hernia ☐ Obstruction - Volvulus ☐ Obstruction - Internal hernia ☐ Obstruction - Incisional hernia ☐ Obstruction - Intussusception ☐ Obstruction - Pseudo-obstruction ☐ Obstruction - Foreign body ☐ Ischaemia – small bowel ☐ Ischaemia – large bowel ☐ Ischaemia – stomach ☐ Ischaemia – oesophagus ☐ Ischaemia – other ☐ Other – abdominal wall dehiscence ☐ Other – bleeding or haemorrhage ☐ Other – abdominal compartment syndrome ☐ Other - colitis ☐ Other – planned re look laparotomy ☐ Other – please specify _____	
E24	Did the patient have a white cell count and/or CRP tested? (tick all that apply) ☐ No ☐ White cell count ☐ CRP	
E25	Only if: E24 = white cell count tested White cell count (x10⁹/L) _____ (Please record the value closest to the time of decision to operate/booking patient for theatre)	E26 Only if: E24 = CRP tested C-Reactive Protein (CRP) (mg/L) _____ (Please record the value closest to the time of decision to operate/booking patient for theatre)
E27	Did the patient have a blood lactate tested? (tick one) ☐ No - cannot measure in our hospital ☐ No - can measure in our hospital, but not performed ☐ Yes – arterial blood gas ☐ Yes- venous blood gas	
E28	Only if: E27 = blood lactate tested What was the blood lactate (mmol/L)? _____ (If multiple blood lactate readings done please record the value closest to the time of decision to operate/booking patient for theatre)	
E29	Only if: A 3 = adult Estimated blood loss (tick one) ☐ < 100 ml ☐ 100-500 ml ☐ 501-1000 ml ☐ >1000 ml ☐ Not recorded	
E30	Only if: A 3 = child Estimated blood loss as percentage of estimated blood volume (tick one) ☐ <5% ☐ 5-10% ☐ 11-20% ☐ >20% ☐ Not recorded	
E31	Was the abdomen left open at the end of the operation (i.e. a damage control laparotomy)? (tick one) ☐ No ☐ Yes	
E32	Only if: E31 = abdomen left open How many more re-look laparotomies did the patient undergo? _____	
E33	Only if: E31 = abdomen left open Which technique was used for the open abdomen at the primary operation? (tick one) ☐ Traditional temporary abdominal closure methods, including but not limited to Bogota bag, Opsite sandwich etc. ☐ Vacuum-assisted or negative pressure therapy device ☐ Mesh mediated or dynamic fascial closure techniques ☐ Skin-only closure options ☐ Other, please specify _____	
E34	Only if: E31 = abdomen left open What was the closure technique for the open abdomen at the final relook laparotomy? (tick one) ☐ Primary fascial closure ☐ Mesh mediated or assisted fascial closure ☐ Component separation techniques ☐ Bridged fascial closure (when midline cannot be closed) ☐ Skin only closure ☐ Other, please specify _____	
E35	What was the frequency of post-operative observations for the first 24 hours following the operation? (tick one) (Observations include blood pressure, heart rate, temperature, oxygen saturations, respiratory rate and conscious level) ☐ No observations done in the first 24 hours ☐ Observations done between every 0-4 hours ☐ More than 4 hours between each set of observations	
E36	When were they first reviewed by a Consultant or equivalent surgeon following the operation? (tick one) ☐ Within 6 hours ☐ Over 6 hours but less than 12 hours ☐ Over 12 hours but less than 24 hours ☐ Over 24 hours ☐ Not reviewed by a Consultant or equivalent surgeon in the post-operative period	