

V5_GEN_FORM



RCP Intraop

Date of Surgery	
	(mm/dd/yyyy)
Procedure Aborted	Yes
	No
If yes to Procedure Aborted, Reason(s) for Procedure Abortion	Quality of donor liver
	Insufficient liver mass
	Technical difficulties in donor
	Donor Instability
	Recipient Instability
	Unexpected medical findings in recipient
	Recipient death on table
	Other (specify)
Graft Type	Cadaveric Whole
	Cadaveric Split
	Cadaveric Other
	Right lobe living donor
	Living donor other
If cadaveric whole graft, Whole cadaveric arterial anatomy	Normal
	Total Replaced L
	Total Replaced R
	Replaced L and R
	Accessory L
	Accessory R
	Accessory L and R
Other	

Back-table arterial reconstruction for whole cadaveric donor	Not Required
	Celiac to superior mesenteric artery
	Accessory or replaced R to splenic
	Accessory or replaced R to gastroduodenal artery
	Other

Cold Ischemia Time	
	(in minutes)

Portal and Arterial Reperfusion Information	Separately	Simultaneously	Unknown
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	If previous answer is separately, Warm Ischemia Time	
		(in minutes)

	If previous answer is separately, Time to Arterialization	
		(in minutes)

	If portal & arterial perfusion are performed simultaneously, Warm Ischemia Time	
		(in minutes)

Total Time of Surgery	
	(in minutes)

If yes to Living Donor, Number of Living Donor Hepatic Venous Anastomoses	1	2	3	4
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Describe the first living donor to recipient hepatic venous anastomosis site.

Describe the second living donor to recipient hepatic venous anastomosis site.

Describe the third living donor to recipient hepatic venous anastomosis site.

Describe the 4th living donor to recipient hepatic venous anastomosis site.

Back-Table Hepatic Venous Reconstruction

Yes

No

If yes, to back-table hepatic venous reconstruction, Type of Back-Table Hepatic Venous Reconstruction

Venoplasty

Graft venous anastomosis

Other

If Graft Venous Anastomosis Chosen, Type of Graft Venous Anastomosis (e.g. donor ileac vein)

CADAVERIC Donors ONLY

If yes to cadaveric donor, Cadaveric Donor Piggy Back

Yes

No

Number of Cadaveric Donor Portal Anastomoses

1

2

3

4

5

Describe the first cadaveric donor to recipient portal vein anastomosis site.

Describe the second cadaveric donor to recipient portal vein anastomosis site.

Describe the third cadaveric donor to recipient portal vein anastomosis site.

Describe the fourth cadaveric donor to recipient portal vein anastomosis site.

Describe the fifth cadaveric donor to recipient portal vein anastomosis site.

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LIVING DONOR and CADAVERIC

Back-Table Portal Reconstruction

Yes

No

If yes to back-table portal venous reconstruction, Type of Back-Table Portal Venous Reconstruction

Venoplasty

Graft venous anastomosis

Other

If Graft Venous Anastomosis Chosen, Type of Graft Venous Anastomosis

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Number of Arterial Anastomoses

1

2

3

Arterial Anastomosis Graft Utilization

Yes

No

Arcuate Ligament released

Yes

No

LIVING DONOR

If LDLT, Number of biliary Anastomoses

1

2

3

4

5

Describe the first LDLT to recipient biliary anastomosis site.

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Describe the second LDLT to recipient biliary anastomosis site.

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Describe the third LDLT to recipient biliary anastomosis site.

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Describe the fourth LDLT to recipient biliary anastomosis site.

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Describe the fifth LDLT to recipient biliary anastomosis site.

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ALL DONORS

Back-Table Hepatic Biliary Reconstruction	Yes	No
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If yes to Back-Table Hepatic Biliary Reconstruction, Description of Back-Table Biliary Reconstruction	Ductoplasty	Graft Anastomosis	Other
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Other Non-Transplant Procedures	Yes	No
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If yes to other procedure, specify	
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How much ascites, (in cc's) was suctioned out during the operation? If none, record 0.	
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How many units of packed red blood cells did the recipient receive during the transplant? Mark 0 for none.	
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Total Length of Operative Procedure. Defined as incision to skin closure and dressing	
	(in minutes)

Total Anesthesia Time Defined as induction to skin closure and dressing	
	(in minutes)

Start Time: 14:01:16 Stop Time: 14:01:17 Time To Generate: 0 seconds