

Screenshots for Documentation of Capsule Endoscopy Procedures in CORI v4

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Above each screenshot or set of screenshots is the name of the table in the v4 National Endoscopic Database where the data collected on that screen is found. Some screenshots show the content of subscreens that are also documented in the same table. Controls which have subscreens are evidenced by the orange arrows: 

HISTORY

Table: History

Capsule Endoscopy

History

Physical exam

Liver Disease

Indications

Preprocedure

Procedure

UGI Findings

Sm. Bowel Findings

Colon Findings

Events

Assessment/Plan

Letters/Instructions

Save

Sign

Print Preview

Close

Pathology

Images

Print

Fax

Orders

First name

Middle name

Last name

MRN

Birth date

Procedure date

Fake

Patient

00000000

1/1/1901

1/ 1/2000 12:00 PM

Medications

Within the last 7 days, has the patient taken anti-inflammatory, anti-coagulant or anti-platelet medications?

Yes

No

Which medications

Stopped prior to exam?

of days prior

ASA

NSAID

COX-2

Heparin

LMWH

Coumadin

Plavix

Other

Other antiinflammatory/anticoagulant/antiplatelet meds

Anticoagulation plan

Other medications

Patient habits

Smoking history

Amount

Number of years

Smokes every day

Current alcohol consumption (wine, beer, liquor)

No prior surgeries

Surgical history

No history of major medical illness

Medical history

Recent labs/studies

Allergies

History comments

Patient habits

Smoking history

Amount

Number of years

Smokes every day

Current alcohol consumption (wine, beer, liquor)

Patient habits

Smoking history

Amount

Number of years

Smokes every day

Current alcohol consumption (wine, beer, liquor)

Patient habits

Smoking history

Amount *

Number of years

Smokes every day ☐ Yes ☐ No

Current alcohol consumption (wine, beer, liquor)

☐ No prior surgeries

☐ Surgical history

Abstains
Occasional (average less than daily)
Moderate (1-2 drinks per day)
Heavy (>2 drinks per day)

Surgical History

Table: HxSurgHx

Patient History > Surgical History

Biliary/Pancreatic	GI, Upper	Genitourinary
☐ Biliary bypass ☐ Cholecystectomy ☐ Cyst removal ☐ Liver surgery ☐ Pancreatic resection ☐ Pancreatic surgery ☐ Sphincteroplasty ☐ Whipple procedure	☐ Anti-reflux surgery ☐ Billroth I ☐ Billroth II ☐ Esophageal myotomy (Heller) ☐ Esophagectomy ☐ partial ☐ total ☐ Gastrectomy ☐ partial ☐ total Gastric bypass ☐ Banded gastroplasty ☐ Roux-en-Y gastric bypass (RYGB) ☐ Sleeve gastrectomy ☐ Gastrojejunostomy ☐ Gastrostomy tube ☐ Jejunostomy tube ☐ Pyloroplasty	☐ Cesarean Section ☐ Total abdominal hysterectomy ☐ Tubal ligation ☐ Vaginal hysterectomy ☐ Partial hysterectomy ☒ TURP
Cardiovascular ☐ Coronary artery bypass ☐ Valve replacement		Pulmonary ☐ Lobectomy
GI, Lower ☐ Colostomy ☐ Left hemicolectomy ☐ Right hemicolectomy ☐ Segmental colectomy ☐ Total colectomy with ☐ ileostomy ☐ ileo-anal pouch ☐ Koch pouch ☐ Hemorrhoidectomy ☐ Terminal ileum resection ☐ Appendectomy		Organ Transplant ☐ Heart ☐ Liver ☐ Lung ☐ Kidney ☐ Pancreas ☐ Small Bowel ☐ Bone marrow
		Other ☐ Other surgical history ▶ ☐ Tonsillectomy

Save Cancel

Other: Other surgical history

Table: SurgHxOther

Other surgical history

Save Cancel

Medical History

Table: HxMedHx

Patient history > Medical history

Cardiovascular	Gastrointestinal	Infection
☒ Angina ☐ Congestive heart failure (CHF) ☐ Coronary artery disease (CAD) ☐ Dysrhythmia ☐ Deep vein thrombosis/PE ☐ Hypertension (HTN) ☐ Implanted defibrillator ☐ Murmur ☐ Myocardial Infarction (MI) ☐ Pacemaker ☐ Peripheral vascular disease (PVD) ☐ Rheumatic fever ☐ Valvular heart disease	☐ Adenomatous polyps ☐ Barrett's esophagus ☐ Cancer ☐ Anal Cancer ☐ Colorectal Cancer ☐ Esophageal Cancer ☐ Gastric Cancer ☐ Small bowel Cancer ☐ Crohn's disease ☐ Diverticulitis ☐ Dysphagia ☐ Esophagitis ☐ Eosinophilic esophagitis ☐ Food impaction ☐ Gastritis ☐ Gastroesophageal reflux disease (GERD) ☐ H. pylori ☐ Inflammatory bowel disease (IBD) ☐ Irritable bowel syndrome (IBS) ☐ Pancreatitis ☐ acute ☐ chronic ☐ Small bowel obstruction ☐ Sphincter of Oddi dysfunction ☐ Ulcerative colitis ☐ Ulcers	☐ Human immunodeficiency virus (HIV) ☐ Methicillin resistant Staph. aureus (MRSA) ☐ Sepsis ☐ Vancomycin resistant Staph. aureus (VRSA)
Endocrine	Genitourinary	Neurological/Musculoskeletal
☐ Diabetes ☐ Hyperlipidemia ☐ Osteoporosis ☐ Steroid use ☐ Thyroid abnormality ☐ Weight change > 10 lbs (recent)	☐ Benign prostatic hypertrophy ☐ Nephrolithiasis ☐ Prostate cancer	☐ Arthritis ☐ Back problems ☐ Dementia ☐ Depression ☐ Lupus/SLE ☐ Migraines ☐ Neuromuscular disease ☐ Stroke ☐ Seizure ☐ Syncope ☐ Transient ischemic attack
Gynecological	Liver/Biliary	Pulmonary
☐ Ovarian cancer Age at diagnosis: ☐ Endometrial cancer Age at diagnosis: ☐ Breast cancer Age at diagnosis: ☐ Pregnancy	☐ Cirrhosis ☐ Portal hypertension ☐ Viral hepatitis ☐ Hepatitis B ☐ Hepatitis C ☐ Other hepatitis ☐ Cholelithiasis ☐ Cholecystitis	☐ Asthma ☐ Chronic obstructive lung disease ☐ Dyspnea ☐ Orthopnea ☐ Pneumonia ☐ Sleep apnea ☐ Tuberculosis ☐ Upper respiratory infection (recent)
Hematological	Other	Renal
☐ Anemia ☐ Thrombocytopenia ☐ Hematological cancer ☐ Chemotherapy ☐ Hemophilia ☐ Radiation therapy ☐ Sickle cell disease/trait	☐ Obesity ☐ Other medical history	☐ Continuous abdominal peritoneal dialysis (CAPD) ☐ Hemodialysis ☐ Renal failure ☐ Urinary tract infection (recent)

Save Cancel

Hematological: Hematological cancer

Table: HemeCaType

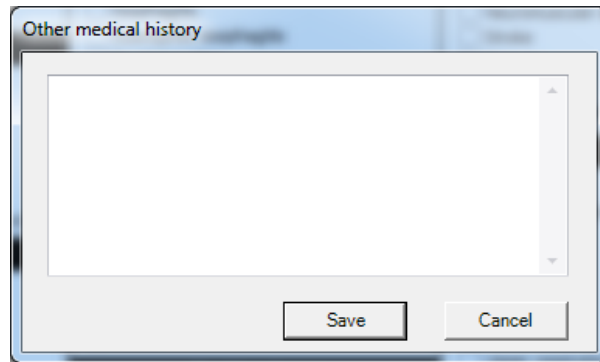
Hematological cancer

Please indicate type of hematological cancer

Save Cancel

Other: Other medical history

Table: MedHxOther



The image shows a software dialog box titled "Other medical history". It features a large, empty text area for input, a vertical scrollbar on the right side of the text area, and two buttons at the bottom: "Save" and "Cancel".

PHYSICAL EXAMINATION

Table: PE

Capsule Endoscopy

History

Physical exam

Liver Disease

Indications

Preprocedure

Procedure

UGI Findings

Sm. Bowel Findings

Colon Findings

Events

Assessment/Plan

Letters/Instructions

Save

Sign

Print Preview

Close

Pathology

Images

Print

Fax

Orders

First name

Middle name

Last name

MRN

Birth date

Procedure date

Fake

Patient

00000000

1/1/1901

1/ 1/2000 12:00 PM

Physical exam performed

Physical exam(s)

Entire PE WNL

Abdominal Exam

Normal

Abnormal

Not performed

Airway Exam

Normal

Abnormal

Not performed

Cardio-pulmonary Exam

Normal

Abnormal

Not performed

Extremity Exam

Normal

Abnormal

Not performed

HEENT Exam

Normal

Abnormal

Not performed

Mental status Exam

Normal

Abnormal

Not performed

Neurological Exam

Normal

Abnormal

Not performed

Rectal Exam

Normal

Abnormal

Not performed

Measurements

Height/length

in

Units

English

Metric

Weight

lbs

BMI #

BMI class (adults)

Systolic BP

mm. Hg

Diastolic BP

mm. Hg

Pulse

beats / min.

Physical exam comments

Please do not use this field if you can document the information using other fields on the screen

LIVER DISEASE

Table: Liver

Capsule Endoscopy		Pathology	Images	Print	Fax	Orders	
History Physical exam Liver Disease Indications Preprocedure Procedure UGI Findings Sm. Bowel Findings Colon Findings Events Assessment/Plan Letters/Instructions		First name Fake	Middle name	Last name Patient	MRN 00000000	Birth date 1/1/1901	Procedure date 1/ 1/2000 12:00 PM
		History of varices ☒ Known history of varices ☐ No known history of varices ☐ Unknown history of varices		What is the etiology of the liver disease? ☐ Alcohol ▶ ☐ Autoimmune hepatitis ☐ Biliary atresia ☐ Cryptogenic ☐ Cystic fibrosis ☐ Hepatitis B ☐ Hepatitis C ☐ Non-alcoholic steato-hepatitis (NASH) ☐ Primary biliary cirrhosis (PBC) ☐ Primary sclerosing cholangitis (PSC) ☐ Other etiology ▶			
		Prior variceal bleed Has there been a prior bleed? Status of the eradication Prior variceal bleed comments					
		Specify the type of varices ☐ Esophageal ☐ Duodenal ☐ Gastric ☐ Other type ▶		Childs-Pugh classification Encephalopathy Ascites Serum bilirubin Serum albumin Prothrombin time (INR) Final classification			
		Prior surveillance? History of prior surveillance No known prior surveillance Unknown if prior surveillance Prior surveillance exam date					
		Evidence of liver disease ☐ Abnormal laboratory values ☐ Portal hypertension ☐ Histologic cirrhosis ☐ Portal vein thrombosis ☐ Other evidence ▶					

Save

Sign

Print Preview

Close

Prior variceal bleed

Has there been a prior bleed?

Status of the eradication

Prior variceal bleed comments

Known prior bleed

No prior bleed known

Unknown if prior bleed

Prior variceal bleed

Has there been a prior bleed?

Status of the eradication

Prior variceal bleed comments

Complete

Incomplete

Not attempted

Unknown

Childs-Pugh classification

Encephalopathy

Ascites

Serum bilirubin

Serum albumin

Prothrombin time (INR)

Final classification

Childs-Pugh classification

Encephalopathy

Ascites

Serum bilirubin

Serum albumin

Prothrombin time (INR)

Final classification

Childs-Pugh classification

Encephalopathy

Ascites

Serum bilirubin

Serum albumin

Prothrombin time (INR)

Final classification

Childs-Pugh classification

Encephalopathy

Ascites

Serum bilirubin

Serum albumin

Prothrombin time (INR)

Final classification

Childs-Pugh classification

Encephalopathy

Ascites

Serum bilirubin

Serum albumin

Prothrombin time (INR)

Final classification

- < 1.7
- 1.7 - 2.3
- > 2.3

Specify the type of varices: Other type

Table: LiverVaricesOther

Other type of varices

Save Cancel

Evidence of liver disease: Other evidence of liver disease

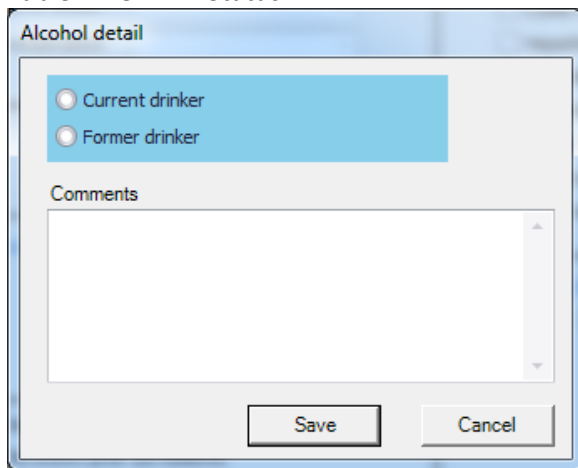
Table: LiverEvidenceOther

Other evidence of liver disease

Save Cancel

Etiology of liver disease: Alcohol

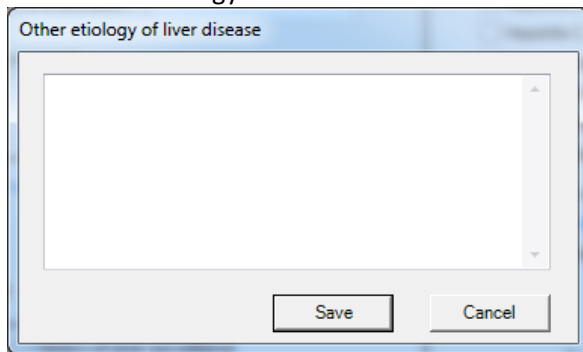
Table: LiverDrinkStatus



The form is titled "Alcohol detail". It contains two radio buttons: "Current drinker" and "Former drinker". The "Current drinker" option is selected and highlighted with a blue background. Below the radio buttons is a text area labeled "Comments". At the bottom of the form are two buttons: "Save" and "Cancel".

Etiology of liver disease: Other etiology of liver disease

Table: LiverEtiologyOther



The form is titled "Other etiology of liver disease". It contains a large text area for input. At the bottom of the form are two buttons: "Save" and "Cancel".

INDICATIONS

Table: CapInd

Capsule Endoscopy	
History Physical exam Liver Disease Indications Preprocedure Procedure UGI Findings Sm. Bowel Findings Colon Findings Events Assessment/Plan Letters/Instructions	Pathology Images Print Fax Orders First name Middle name Last name MRN Birth date Procedure date Fake Patient 00000000 1/1/1901 1/ 1/2000 12:00 PM Evaluation of symptoms ☐ Abdominal pain ☐ Change in bowel habits ☐ Diarrhea ☐ GI Sx in immunocompromised host ☐ Weight loss ☐ Other symptoms Evaluation of GI blood loss ☐ Evaluation of active/recent bleeding ☐ Anemia ☐ Low ferritin without anemia ☐ Positive fecal occult blood test (FOBT) ☐ Suspected GI bleed without active bleeding ☐ Other GI blood loss Prior Abnormal Exams, Studies, X-Rays Abnormal endoscopic procedure ☐ Capsule Endoscopy ☐ EGD ☐ Enteroscopy ☐ Double balloon enteroscopy ☐ Colonoscopy Abnormal imaging study or X-Ray ☐ CT scan ☐ CT enterography ☐ Enterodysis ☐ Meckel's Scan ☐ MRI ☐ Small bowel X-Ray ☐ Upper GI X-Ray ☐ Other abnormal exams, studies or X-Rays Evaluation of suspected or established diagnosis ☐ Barrett's Esophagus ☐ Chronic acid reflux ☐ Crohn's disease ☐ Celiac disease ☐ Esophageal varices ☐ Graft v host disease ☐ Infectious enteritis ☐ Ischemic enteritis ☐ Radiation enteritis ☐ Familial polyposis ☐ Other suspected or known diagnosis Indications comments Please do not use this field if you can document the information using other fields on the screen Colon Cancer Screening (no prior pathology) ☐ Average risk ☐ Family history of colorectal cancer ☐ Family history of adenomatous polyps Primary Indication

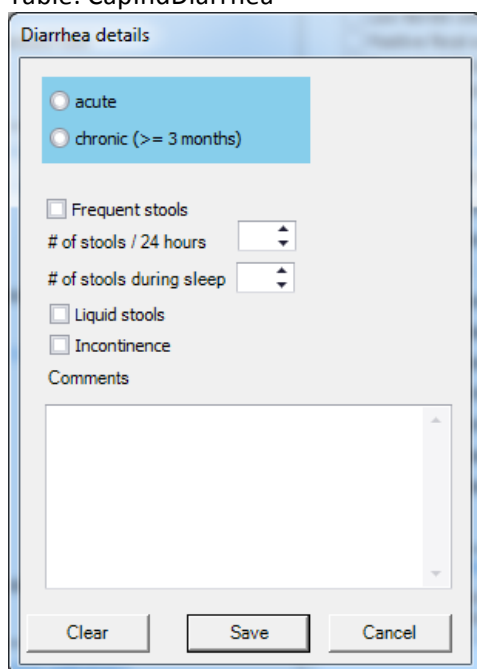
Evaluation of Symptoms: Abdominal pain

Table: CapAbdPain

Abdominal pain detail	
Abdominal pain is associated with	
☐ bloating ☐ dyspepsia ☐ duration > 2 months	
Other abdominal pain details	
Save	Cancel

Evaluation of Symptoms: Diarrhea

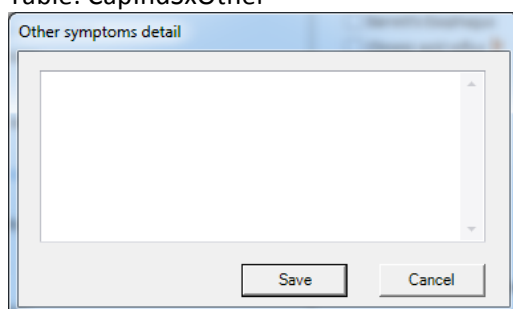
Table: CapIndDiarrhea



A screenshot of a software window titled "Diarrhea details". It contains two radio buttons: "acute" (selected) and "chronic (>= 3 months)". Below these are two checkboxes: "Frequent stools" and "Liquid stools". The "Frequent stools" checkbox is followed by two spinners for "# of stools / 24 hours" and "# of stools during sleep". The "Liquid stools" checkbox is followed by an "Incontinence" checkbox. At the bottom is a large text area labeled "Comments" and three buttons: "Clear", "Save", and "Cancel".

Evaluation of Symptoms: Other symptoms

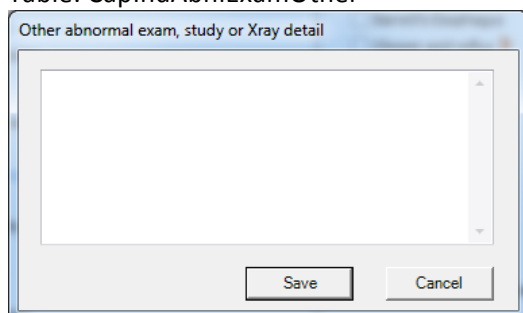
Table: CapIndSxOther



A screenshot of a software window titled "Other symptoms detail". It features a large text area for notes and two buttons at the bottom: "Save" and "Cancel".

Prior Abnormal Exams, Studies or X-rays: Other abnormal exams, studies or X-rays

Table: CapIndAbnExamOther



A screenshot of a software window titled "Other abnormal exam, study or Xray detail". It features a large text area for notes and two buttons at the bottom: "Save" and "Cancel".

Colon cancer screening (no prior pathology): Positive family history of colorectal cancer

Table: CapIndFamHxCRC (no data)

Family history grid: CapIndFamHxCRC_Family_history_grid (no data)

Positive family history of colorectal cancer

Family history Add relative

Relation	Age at onset
----------	--------------

☐ Other

Save Cancel

Family history Add relative

Relation	Age at onset
Parent	

Parent
Grandparent
Sibling
Child

Colon cancer screening (no prior pathology): Positive family history of adenomatous polyps

Table: CapIndFamHxPolyp (no data)

Family history grid: CapIndFamHxPolyp_Family_history_grid (no data)

Positive family history of adenomatous polyps

Family history Add relative

Relation	Age at onset
----------	--------------

☐ Other

Save Cancel

Family history Add relative

Relation	Age at onset
Parent	

Parent
Grandparent
Sibling
Child

Evaluation of Blood Loss: Evaluation of active / recent bleeding

Table: CapIndActiveBld

Evaluation of active/recent bleeding detail

Please specify the type of bleeding (check all that apply)

☒ Hematemesis

☐ <= 24 hours ago or currently bleeding

☐ > 24 hours ago

☐ Hematochezia

☐ <= 24 hours ago or currently bleeding

☐ > 24 hours ago

☐ Melena

☐ <= 24 hours ago or currently bleeding

☐ > 24 hours ago

☐ Positive NG tube aspirate

☐ <= 24 hours ago or currently bleeding

☐ > 24 hours ago

☐ Other active/recent GI bleeding

Save Cancel

Evaluation of Blood Loss: Anemia

Table: CapIndAnemia

Anemia detail

Type of anemia

☒ Iron deficiency/low ferritin anemia

☐ Pernicious anemia

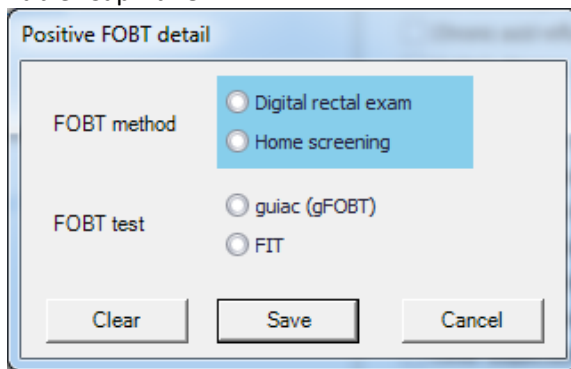
☐ Other type

Specify other type of anemia

Save Cancel

Evaluation of Blood Loss: Positive FOBT

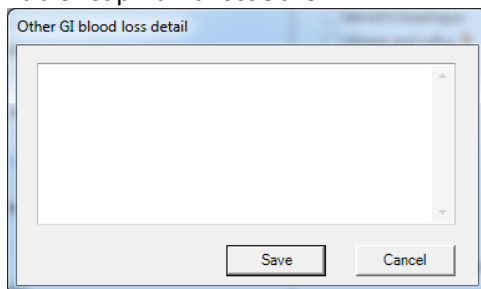
Table: CapIndFOBT



A screenshot of a software window titled "Positive FOBT detail". It contains two sections: "FOBT method" with radio buttons for "Digital rectal exam" and "Home screening", and "FOBT test" with radio buttons for "guiaac (gFOBT)" and "FIT". At the bottom are "Clear", "Save", and "Cancel" buttons.

Evaluation of Blood Loss: Other GI blood loss

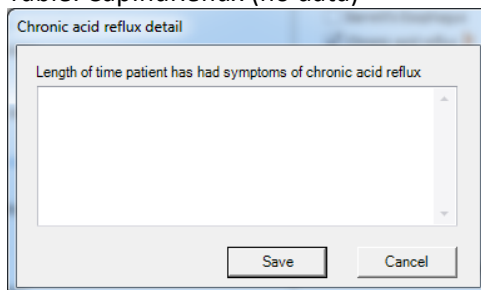
Table: CapIndBldLossOther



A screenshot of a software window titled "Other GI blood loss detail". It features a large empty text area for notes and "Save" and "Cancel" buttons at the bottom.

Evaluation of Suspected or Established Diagnosis: Chronic acid reflux

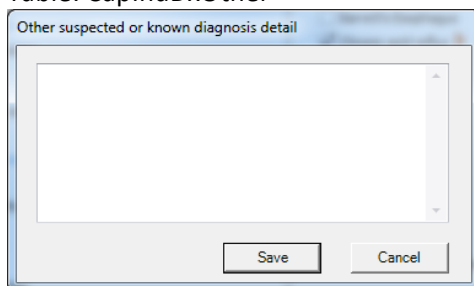
Table: CapIndReflux (no data)



A screenshot of a software window titled "Chronic acid reflux detail". It includes a label "Length of time patient has had symptoms of chronic acid reflux" above a large empty text area, with "Save" and "Cancel" buttons at the bottom.

Evaluation of Suspected or Established Diagnosis: Other suspected or known diagnosis

Table: CapIndDxOther



A screenshot of a software window titled "Other suspected or known diagnosis detail". It features a large empty text area for notes and "Save" and "Cancel" buttons at the bottom.

PREPROCEDURE

Table: CapPreProc

Procedure Personnel Grid: CapPreProc_Procedure_personnel_grid

Menu containing only site-specific data: Performed by

Menu containing only site-specific data: Interpreted by

Did the patient consent to be contacted for research purposes?

Consented

Did not consent

Not asked for consent

Implantable defibrillator device? ☐ Yes ☐ No

Procedure personnel

Add staff

Role	Name
Endoscopist - Attending physician	Corey Cori, MD
Endoscopist - Fellow	
Endoscopist - Attending physician	
Endoscopist - Fellow	
Nurse	
Nurse anesthetist	
Nurse assistant	
Nurse practitioner	

Perform: Corey Cori, MD

Patient assessment

ASA classification

I

II

III

IV

V

Emergency

Urgent

Elective

Assessed by

☐ Reassessment performed

Patient assessment

ASA classification

Emergency

Urgent

Elective

Assessed by

Anesthesiologist

Assistant

Endoscopist (Attending physician)

Endoscopist (Fellow)

Endoscopist (Nurse Practitioner)

Endoscopist (Physician assistant)

ENT staff

ICU staff

Nurse

Nurse anesthetist

Nurse assistant

Nurse practitioner

Oncology staff

Pathology staff

Physician assistant

Primary care physician

Radiology staff

Research staff

Resident

Student

Surgeon

Technician

Hours fasted

Time last food ingested

Time last fluid ingested

☐ Prokinetic used

Exam prep

Prep used

Prep dose used

Over # hours

Preprocedure comments

Please do not use this field or other fields on the screen

Exam prep

Prep used

Prep dose used

Over # hours

Preprocedure comments

Please do not use this field or other fields on the screen

B prep kit

Fleets enema

Fleets prep kit

Golytely

Halflytely

None

phospho soda

Visicol

Mag citrate

Miralax

Nulytely

MoviPrep

Gatorade & MiraLAX

OsmoPrep

SUPREP

Save as Default

Prokinetic used

Table:CapProkinetic

Prokinetic used

☒ tegaserod	Dose	
☐ metaclopramide	Dose	
☐ erythromycin	Dose	

PROCEDURE

Table: CapProc

Capsule Endoscopy	
History Physical exam Liver Disease Indications Preprocedure Procedure UGI Findings Sm. Bowel Findings Colon Findings Events Assessment/Plan Letters/Instructions	Pathology Images Print Fax Orders First name Middle name Last name MRN Birth date Procedure date Fake Patient 00000000 1/1/1901 1/ 1/2000 12:00 PM Procedure performed ☐ Esophageal capsule endoscopy ☐ Small bowel capsule endoscopy ☐ Colon capsule endoscopy ☒ Other Capsule Transit Information Esophagus first seen ---:--:-- Squamocolumnar junction seen? ☐ Yes ☐ No Stomach first seen ---:--:-- Duodenum first seen ---:--:-- Colon first seen ---:--:-- Total transit time (from first image to last bowel image) ---:--:-- Depth reached Visualization # Quadrants of esophagus adequately visualized Was the exam quality compromised? ☐ Yes ☐ No Exam quality compromised due to ☐ Inability to swallow ☐ Retained food ☐ Obstruction ☐ Stricture ☐ Poor prep ☐ Slow motility Procedure comments Please do not use this field if you can document the information using other fields on the screen Patient tolerance Procedure Description Capsule Lot # Recorder Serial # Sensor array applied Sensor array removed Recorder applied Recorder removed Capsule activated Capsule excreted Total reading time

Depth reached	Oropharynx
Visualization	Esophagus
	Stomach
	Duodenum (1st/2nd portions)
	Duodenum (3rd/4th portions)
# Quadrants of esop	Proximal small bowel
	Jejunum
	Mid small bowel
	Ileum
	Distal small bowel
	Distal ileum
	Ileocecal valve
	Cecum
	Ascending colon
	Proximal colon
	Transverse colon
	Middle colon
	Descending colon
	Distal colon
	Sigmoid colon
	Rectum
	Anus

Depth reached

Visualization

Excellent – no debris obscuring view
 # Good – small amounts of debris only
 Fair – intermittent large amounts of debris, adequate visualization
 Poor – large amount of debris, inadequate visualization

Was the exam quality compromised? ☐ Yes ☐ No

[Exam quality compromised due to](#)

☐ Inability to swallow
☐ Obstruction
☐ Poor prep

☐ Retained food
☐ Stricture
☐ Slow motility

Visualization

Quadrants of esophagus adequately visualized
 0
1
2
3
4

Was the exam quality compromised? ☐ Yes ☐ No

[Exam quality compromised due to](#)

☐ Inability to swallow
☐ Obstruction

☐ Retained food
☐ Stricture

Patient tolerance
 excellent
good
fair
poor

[Procedure Description](#)

Procedure performed: Other

Table: CapOtherProc

Other Procedure

UGI FINDINGS

Table: CapUGIFind

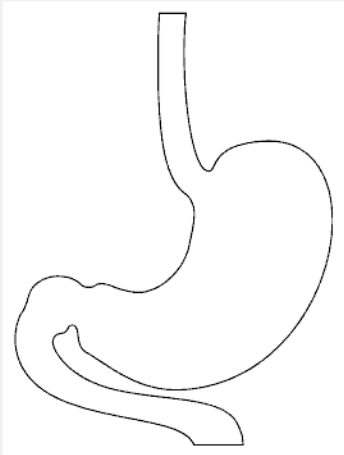
Capsule Endoscopy

Pathology Images Print Fax Orders

First name: Fake Middle name: Last name: Patient MRN: 00000000 Birth date: 1/1/1901 Procedure date: 1/ 1/2000 12:00 PM

UGI Findings

Import Images



Normal findings

☐ Esophagus
☐ Stomach
☐ Duodenum

Check all

Findings Instructions

Add a Finding: left click the diagram, or left click and drag to shade a region
Delete a Finding: right click on the finding label
View/Edit Details: double click on the finding label
Move a Label: left click and drag the finding label

Save Sign Print Preview Close

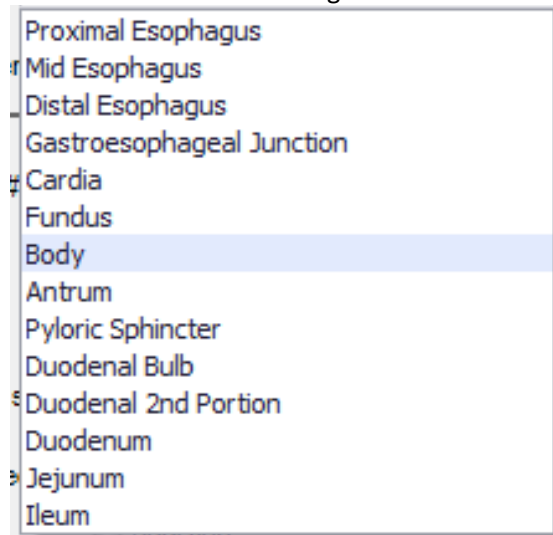
Finding Menu

Finding

- Anatomical deformity
- Arteriovenous malformation (AVM)
- Barrett's esophagus
- Duodenal diverticulum
- Esophageal ulcer
- Foreign body / Retained food
- Hiatal hernia
- Mallory-Weiss tear
- Mucosal abnormality – Esophagus
- Mucosal abnormality – Stomach / Duodenum
- Nodule / Polyp
- Normal
- Prior surgery
- Stricture / Stenosis
- Tumor
- Ulcer
- Varices
- Other finding

OK Cancel

Location menu used for UGI Findings:



Anatomical Deformity

Table: CapUGIAnatDeform

Anatomical Deformity	
Location Proximal Esophagus ▼	☐ Image(s) taken
Description 	Diagnosis
	Comments
Save Cancel	

Arteriovenous Malformation (AVM)

Table: CAPUGIAVM

Arteriovenous Malformation (AVM)	
Location Proximal Esophagus	☒ Image(s) taken
Time of identification	
Estimated # of AVMs ☐ 1 ☐ 2-5 ☐ 6-20 ☐ >20	Diagnosis
Maximum size (mm)	Comments
Rate of bleed ☐ Oozing ☐ Spurting ☐ Inactive ☐ Uncertain	
Save Cancel	

Barrett's Esophagus

Table CapUGIBarretts (no data)

Barrett's esophagus	
Time of identification	Diagnosis
Description ☐ Established by prior biopsy, seen on this exam ☐ Established by prior biopsy, not seen on this exam ☐ Suspected Length of Barrett's (cm)	Comments
Associated findings: ☐ Inflammation ☐ Nodules ☐ Ulcer	
☒ Image(s) taken	
Save Cancel	

Duodenal Diverticulum

Table: CapUGIDuoDivertic

Duodenal Diverticulum	
Location Proximal Esophagus	☒ Image(s) taken
Time of identification	
Description Relationship to ampulla	Diagnosis
Estimated # of diverticula ☐ 1 ☐ 2-5 ☐ 6-20 ☐ >20	Comments
Rate of bleed ☐ Oozing ☐ Spurting ☐ Inactive ☐ Uncertain	
Save Cancel	

Description	
Relationship to ampulla	
Estimated # of diverticula	☐ 2-5 ☐ 6-20 ☐ >20
Rate of bleed	☐ Oozing ☐ Spurting ☐ Inactive ☐ Uncertain

Esophageal Ulcer

Table: CapUGIEsophUlcer (no data)

Esophageal ulcer	
Location: Proximal Esophagus	Rate of bleed: ☐ Oozing ☐ Spurting ☐ Inactive ☐ Uncertain
Time of identification:	☒ Image(s) taken
Description: ☐ Single ☐ Multiple Estimated size (mm): ☐ 1-5 mm ☐ 6-10 mm ☐ > 10 mm Characteristics: ☐ Radiating folds ☐ Heaped up margin ☐ Deep ☐ Superficial ☐ Edematous	Diagnosis:
Suspected etiology: ☐ Caustic ☐ suspected ☐ established ☐ GERD ☐ suspected ☐ established ☐ Pill-related ☐ suspected ☐ established ☐ Other Infectious: ☐ CMV ☐ suspected ☐ established ☐ HSV ☐ suspected ☐ established ☐ Candida ☐ suspected ☐ established Ulcer stigmata: ☐ Active / Recent bleed ☐ Visible vessel ☐ Adherent clot ☐ Dark spot ☐ Non-bleeding, Clean ☐ Healed / Scarred	Comments:
Save Cancel	

Foreign body / Retained food

Table: CapUGIFB

Foreign body / Retained food	
Location: Proximal Esophagus	Diagnosis:
Time of identification:	Comments:
☐ Foreign body ☐ Retained food Description: ☒ Image(s) taken	
Save Cancel	

Hiatal Hernia

Table: CapUGIHiatalHernia

Hiatal Hernia	
Time of identification	☒ Image(s) taken
Description	
☐ Regular (type 1) ☐ Paraesophageal	
Length (cm)	Diagnosis
Cameron Erosions ☐ Yes ☐ No	Comments
Save Cancel	

Mallory – Weiss Tear

Table:CapUGIMalloryWeissTear

Mallory-Weiss Tear	
Time of identification	Diagnosis
Rate of bleed ☐ Oozing ☐ Spurting ☐ Inactive ☐ Uncertain	Comments
☒ Image(s) taken	
Save Cancel	

Mucosal Abnormality / Esophagus

Table: CapUGIMucosalAbnlEsoph

Mucosal abnormality / Esophagus	
Time of identification	☒ Image(s) taken
Length of inflammation (cm)	
Suspected etiology ☐ Reflux disease ☐ Caustic ☐ Infection ☐ Radiation ☐ Pill - Related ☐ Other 	Diagnosis
Description ☐ Erosions ☐ Mosaic / Scaly ☐ Erythema ☐ Mottled ☐ Friable ☐ Ulcers ☐ Granular ☐ Nodularity ☐ Edema ☐ Red spots ☐ Hemorrhage (oozing) ☐ Subepithelial hemorrhage	Comments
Rate of bleed ☐ Oozing ☐ Spurting ☐ Inactive ☐ Uncertain	
Save Cancel	

Suspected etiology: Reflux disease

Table: CapLAClass

LA Classification

☒ Grade A One or more mucosal breaks no longer than 5 mm, none of which extends between the tops of the mucosal folds

☐ Grade B One or more mucosal breaks more than 5 mm long, none of which extends between the tops of two mucosal folds

☐ Grade C Mucosal breaks that extend between the tops of two or more mucosal folds, but which involve less than 75% of the esophageal

☐ Grade D Mucosal breaks which involve at least 75% of the esophageal circumference

Clear Save Cancel Examples

Suspected etiology: Infection

Table: CapMucosalAbnlInf (no data)

Infection detail

☒ Candida ☐ Suspected ☐ Established

☐ CMV ☐ Suspected ☐ Established

☐ HSV ☐ Suspected ☐ Established

☐ Other

Save Cancel

Mucosal abnormality / Stomach - Duodenum

Table: CAPUGIMucosalAbnlStomach

Mucosal abnormality / Stomach - Duodenum

Location: Proximal Esophagus

Time of identification: [Time Picker]

Length of inflammation (cm): [Slider]

Folds: [Dropdown]

Description:

☐ Erosions ☐ Mosaic / Scaly

☐ Erythema ☐ Mottled

☐ Friable ☐ Ulcers

☐ Granular ☐ Nodularity

☐ Edema ☐ Red spots

☐ Hemorrhage (oozing) ☐ Subepithelial hemorrhage

☐ Suspected Portal Hypertensive Gastropathy

Rate of bleed

☐ Oozing

☐ Spurting

☐ Inactive

☐ Uncertain

☒ Image(s) taken

Diagnosis: [Text Box]

Comments: [Text Area]

Save Cancel

Length of inflammation (cm): [Slider]

Folds: [Dropdown]

Description: [Text Box]

Thick folds

Normal folds

Thin (atrophic) folds

Nodule / Polyp

Table: CapUGIPolyp

Nodule / Polyp	
Location: Proximal Esophagus	☒ Image(s) taken
Time of identification:	
Description	
☐ Mucosal	☐ Nodule
☐ Submucosal	☐ Polyp
Number of nodules or polyps	
☐ 1	
☐ 2-5	
☐ 6-20	
☐ >20	
Attachment	
☐ Flat	
☐ Pedunculated	
☐ Sessile	
Minimum size (mm):	
Maximum size (mm):	
Diagnosis:	
Comments:	
Save Cancel	

Normal

Table: CapUGINormal

Normal	
Location: Proximal Esophagus	
Time of identification:	
☒ Image(s) taken	
Comments:	
Save Cancel	

Prior surgery

Table: CapUGIPriorSurg

Prior surgery	
Location: Proximal Esophagus	Prior Biopsies ?
Time of identification: [Time Picker]	☒ Image(s) taken
Prior surgery ☐ Anti-reflux surgery ☐ Billroth I ☐ Billroth II ☐ Esophagectomy ☐ Gastrectomy Gastric bypass ☐ Banded gastroplasty ☐ Roux-en-Y gastric bypass (RYGB) ☐ Sleeve Gastrectomy ☐ Gastrojejunostomy ☐ Gastrostomy tube ☐ Jejunostomy tube ☐ Pyloroplasty ☐ Other	Diagnosis: Comments:
Save Cancel	

Prior Biopsies ?	No prior biopsies taken Prior biopsies taken Unknown if prior biopsies taken
☒ Image(s) taken	

Stricture / Stenosis

Table: CapUGIStructure

Stricture / Stenosis	
Location: Proximal Esophagus	☒ Image(s) taken
Time of identification: [Time Picker]	
Description Estimated lumen diameter (mm): [Slider] Obstruction:	Diagnosis: Comments:
Etiology ☐ Reflux disease ☐ Schatzki's ring (lower esophageal ring) ☐ Malignancy ☐ Web ☐ Extrinsic compression ☐ Benign inflammation ☐ Anastomosis site ☐ Other	
Save Cancel	

Description Estimated lumen diameter (mm): [Slider] Obstruction: capsule passes through capsule temporarily delayed capsule retained	
Etiology ☐ Reflu ☐ Schatzki's ring (lower esophageal ring)	

Tumor

Table: CapUGITumor

Tumor	
Location: Proximal Esophagus	☒ Image(s) taken
Time of identification: [Time Picker]	
Description ☐ Suspected malignant ☐ Established malignant by prior biopsy ☐ Suspected benign ☐ Established benign by prior biopsy Dimensions: [mm] X [mm] ☐ Circumferential ☐ Mucosal ☐ Fungating ☐ Submucosal Obstruction: [Dropdown]	Diagnosis: [Text Field] Comments: [Text Area]
Save Cancel	

Description ☐ Suspected malignant ☐ Established malignant by prior biopsy ☐ Suspected benign ☐ Established benign by prior biopsy Dimensions: [mm] X [mm] ☐ Circumferential ☐ Mucosal ☐ Fungating ☐ Submucosal Obstruction: [Dropdown]	capsule passes through capsule temporarily delayed capsule retained
---	---

Ulcer

Table: CapUGIUlcer

Ulcer	
Location: Proximal Esophagus	☒ Image(s) taken
Time of identification: [Time Picker]	
Estimated # of ulcers: ☐ 1 ☐ 2-5 ☐ 6-20 ☐ >20 Estimated size (mm): ☐ 1-5 ☐ 6-10 ☐ > 10 Characteristics: ☐ Radiating folds ☐ Heaped up margin ☐ Deep ☐ Superficial ☐ Edematous Ulcer stigmata ☐ Active/Recent bleed ☐ Visible vessel ☐ Adherent clot ☐ Dark spot ☐ Non-bleeding, Clean ☐ Healed / Scarred Rate of bleed: ☐ Oozing ☐ Spurting ☐ Inactive ☐ Uncertain	Diagnosis: [Text Field] Comments: [Text Area]
Save Cancel	

Varices

Table: CapUGIVarices

Varices	
Location: Proximal Esophagus	☒ Image(s) taken
Time of identification: 1:00	
Number of varices: 1	
Size: ☐ < 5mm ☐ < 1/3 lumen ☐ > 1/3 lumen	Diagnosis:
Stigmata of recent hemorrhage (cherry red spots, red wale marking or hematocystic spot) ☐ present ☐ absent	Comments:
Esophagitis: ☐ present ☐ absent	
Rate of bleed: ☐ Oozing ☐ Spurting ☐ Inactive ☐ Uncertain	
Save Cancel	

Other Finding

Table: CapUGIOtherFind

Other Finding	
Location: Proximal Esophagus	
Time of identification: 1:00	
☒ Image(s) taken	
Diagnosis:	
Description / Comments:	
Save Cancel	

SMALL BOWEL FINDINGS

Table: CapSBFind

Capsule Endoscopy

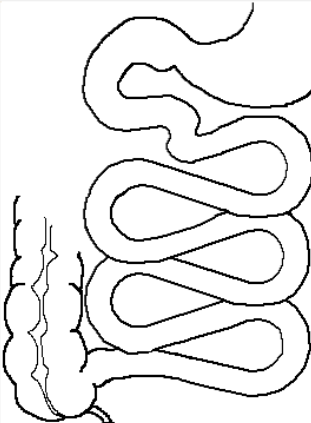
Pathology Images Print Fax Orders

First name Middle name Last name MRN Birth date Procedure date

Fake Patient 00000000 1/1/1901 1/ 1/2000 12:00 PM

Small bowel Findings

Import Images



Normal findings

☐ Entire small bowel

Findings Instructions

Add a Finding: left click the diagram, or left click and drag to shade a region
Delete a Finding: right click on the finding label
View/Edit Details: double click on the finding label
Move a Label: left click and drag the finding label

Save Sign Print Preview Close

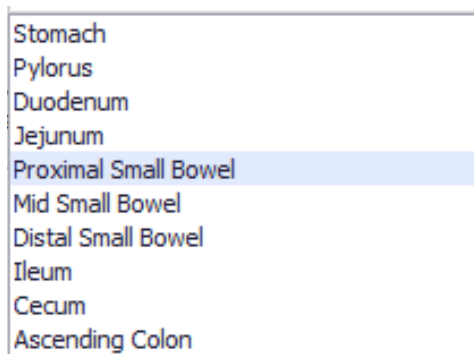
Finding Menu

Finding

- Anatomical deformity
- Arteriovenous malformation (AVM)
- Carcinoid tumor
- Diverticulosis
- Fluid / debris
- Foreign body / Retained food
- Lymphangiectasia
- Mucosal abnormality
- Nematodes
- Normal
- Polyp
- Prior surgery
- Sprue (Celiac disease)
- Stricture / Stenosis
- Tumor
- Ulcer
- Xanthoma
- Other finding

OK Cancel

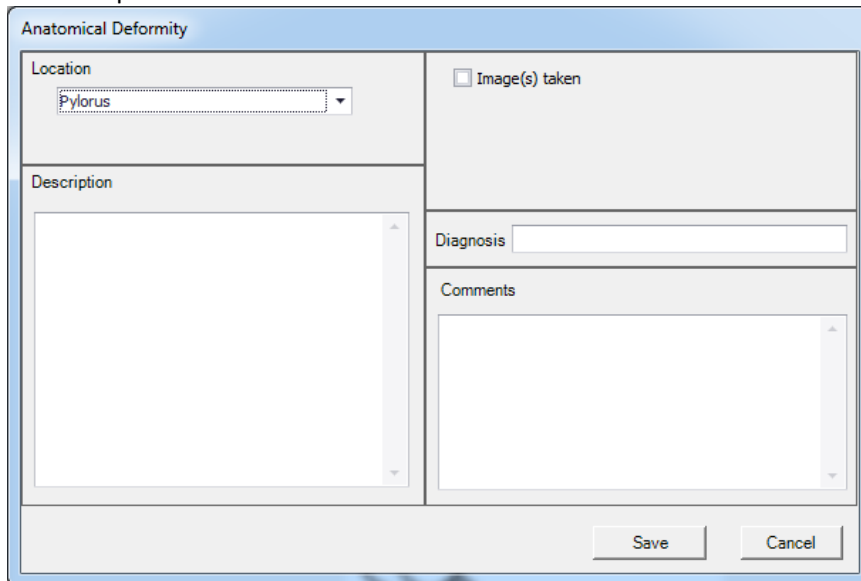
Location menu used for multiple findings:



Stomach
Pylorus
Duodenum
Jejunum
Proximal Small Bowel
Mid Small Bowel
Distal Small Bowel
Ileum
Cecum
Ascending Colon

Anatomical Deformity

Table: CapSBAnatDeform



Anatomical Deformity

Location: Pylorus

☐ Image(s) taken

Description

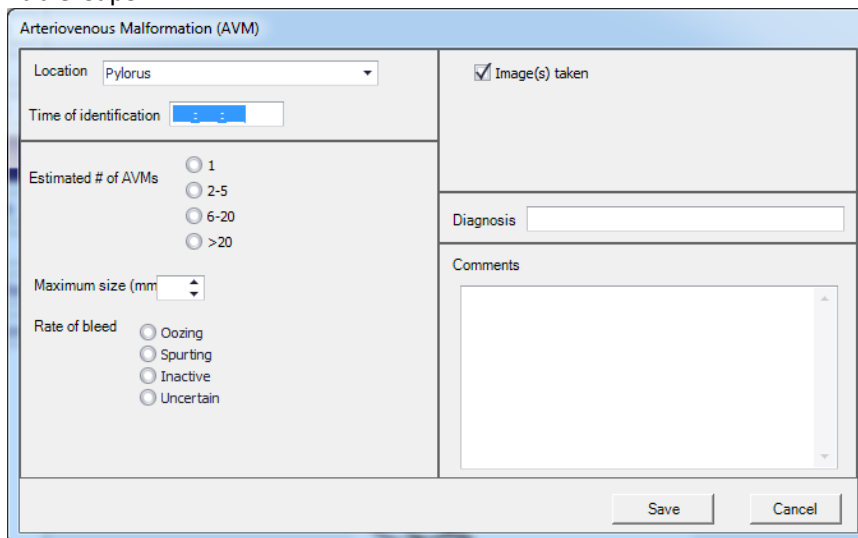
Diagnosis

Comments

Save Cancel

Arteriovenous Malformation (AVM)

Table: CapSBAVM



Arteriovenous Malformation (AVM)

Location: Pylorus

Time of identification

☒ Image(s) taken

Estimated # of AVMs

Maximum size (mm)

Rate of bleed

Diagnosis

Comments

Save Cancel

Carcinoid Tumor

Table: CapSBCarcinoidTumor (no data)

Carcinoid Tumor	
Location Pylorus	☒ Image(s) taken
Time of identification : :	Diagnosis
☐ Suspected ☐ Established	Comments
Estimated # of carcinoid tumors	
☐ 1 ☐ 2-5 ☐ 6-20 ☐ >20	
Save Cancel	

Diverticulosis

Table: CapSBDiverticula

Diverticulosis	
Starting location Pylorus	☒ Image(s) taken
Ending location Pylorus	Diagnosis
Time of identification : :	Comments
☐ Meckels ☐ Small bowel	
Estimated # of diverticula	
Rate of bleed ☐ Oozing ☐ Spurting ☐ Inactive ☐ Uncertain	
Save Cancel	

Fluid / Debris

Table: CapSBFluid

Fluid / Debris	
Location Pylorus	☒ Image(s) taken
Time of identification	
Degree of visual impairment	
Description	
Save Cancel	

Degree of visual impairment
none
minimal
moderate
significant

Foreign body / Retained food

Table: CapSBFB

Foreign body / Retained food	
Location Pylorus	Diagnosis
Time of identification	Comments
☐ Foreign body ☐ Retained food	
Description	
☒ Image(s) taken	
Save Cancel	

Lymphangiectasia

Table: CapSBLymphantiectasia

Lymphangiectasia	
Location Pylorus	☒ Image(s) taken
Time of identification : : :	
Estimated # of lymphangiectasia	Diagnosis
☐ 1	Comments
☐ 2-5	
☐ 6-20	
☐ >20	
Save Cancel	

Mucosal abnormality

Table: CapSBMucosalAbnl

Mucosal abnormality	
Location Pylorus	☒ Image(s) taken
Time of identification : : :	
Description	Diagnosis
☐ Red spots	Comments
☐ White spots	
☐ Edema	
☐ Blunted villi	
☐ Erythema	
☐ Petechiae	
☐ White stippling	
☐ Erosions	
☐ Absent villi	
Save Cancel	

Nematodes

Table: CapSBNematodes (no data)

Nematodes	
Location: Pylorus	☒ Image(s) taken
Time of identification: [Time Picker]	Diagnosis: [Text Field]
Type of nematode: [List Box]	Comments: [Text Area]
Save Cancel	

Normal

Table: CapSBNorml

Normal
Location: Pylorus
Time of identification: [Time Picker]
☒ Image(s) taken
Comments: [Text Area]
Save Cancel

Polyp

Table: CapsBPolyp

Polyp	
Location: Pylorus	☒ Image(s) taken
Time of identification: [Time Picker]	
Description	
Estimated # of polyps	
☐ 1	
☐ 2-5	
☐ 6-20	
☐ >20	
Attachment	
☐ flat	
☐ pedunculated	
☐ sessile	
Minimum size (mm): [Spinner]	
Maximum size (mm): [Spinner]	
Diagnosis: [Text Box]	
Comments: [Text Area]	
Save Cancel	

Prior Surgery

Table: CapSBPriorSurg

Prior Surgery
Location: Pylorus
Time of identification: [Time Picker]
☒ Image(s) taken
Diagnosis: [Text Box]
Comments: [Text Area]
Save Cancel

Sprue (Celiac disease)

Table: CapSBSprue

Sprue (Celiac disease)	
Location Pylorus	☒ Image(s) taken
Time of identification	
Description ☐ Suspected ☐ Established by prior biopsy	Diagnosis
Mucosal appearance ☐ Scalloped folds ☐ Flat (missing folds)	Comments
Save Cancel	

Stricture / Stenosis

Table: CapSBStricture

Stricture / Stenosis	
Location Pylorus	☒ Image(s) taken
Time of identification	
Description Estimated lumen diameter (mm) Obstruction	Diagnosis
Etiology ☐ NSAID diaphragm ☐ Crohn's disease ☐ Malignancy ☐ Web ☐ Extrinsic compression ☐ Benign inflammation ☐ Anastomosis site ☐ Other	Comments
Save Cancel	

Description	
Estimated lumen diameter (mm)	
Obstruction	
Etiology	☐ NSAID ☐ capsule passes through ☐ capsule temporarily delayed ☐ capsule retained

Tumor

Table: CapSBTumor

Tumor	
Location Pylorus	☒ Image(s) taken
Time of identification	
Description ☐ Suspected malignant ☐ Established malignant by prior biopsy ☐ Suspected benign ☐ Established benign by prior biopsy	Diagnosis
Dimensions (mm) X (mm)	Comments
☐ Circumferential ☐ Mucosal ☐ Fungating ☐ Submucosal	
Obstruction	
Save Cancel	

Description ☐ Suspected malignant ☐ Established malignant by prior biopsy ☐ Suspected benign ☐ Established benign by prior biopsy
Dimensions (mm) X (mm)
☐ Circumferential ☐ Mucosal ☐ Fungating ☐ Submucosal
Obstruction
capsule passes through capsule temporarily delayed capsule retained

Ulcer

Table: CapSBUlcer

Ulcer	
Location Pylorus	☒ Image(s) taken
Time of identification	
Estimated # of ulcers ☐ 1 ☐ 2-5 ☐ 6-20 ☐ >20	Diagnosis
Estimated size (mm) ☐ 1-5 ☐ 6-10 ☐ > 10	Comments
Characteristics ☐ Radiating folds ☐ Heaped up margin ☐ Deep ☐ Superficial ☐ Edematous	
Ulcer stigmata ☐ Active/Recent bleed ☐ Rate of bleed ☐ Visible vessel ☐ Oozing ☐ Adherent clot ☐ Spurting ☐ Dark spot ☐ Inactive ☐ Non-bleeding, Clean ☐ Uncertain ☐ Healed / Scarred	
Save Cancel	

Xanthoma

Table: CapSBXanthoma

Xanthoma	
Location: Pylorus	☒ Image(s) taken
Time of identification: : : :	Diagnosis:
Estimated number of xanthomas: ☐ 1 ☐ 2-5 ☐ 6-20 ☐ >20	Comments:
Save Cancel	

Other Finding

Table: CapSBOtherFind

Other Finding
Location: Pylorus
Time of identification: : : :
☒ Image(s) taken
Diagnosis:
Description / Comments:
Save Cancel

COLON FINDINGS

Table: CapColFind

Capsule Endoscopy

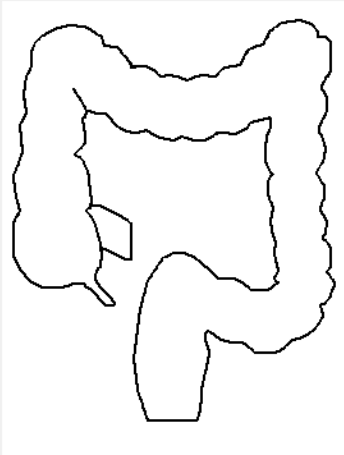
Pathology Images Print Fax Orders

First name Middle name Last name MRN Birth date Procedure date

Fake Patient 00000000 1/1/1901 1/ 1/2000 12:00 PM

Colon Findings

Import Images



Were any of the following NOT SEEN on the exam ?

☐ AVM
☐ Diverticulosis / Diverticulitis
☐ Hemorrhoids

Normal findings

☐ Entire colon

Findings Instructions

Add a Finding: left click the diagram, or left click and drag to shade a region
Delete a Finding: right click on the finding label
View/Edit Details: double click on the finding label
Move a Label: left click and drag the finding label

Save
 Sign
 Print Preview
 Close

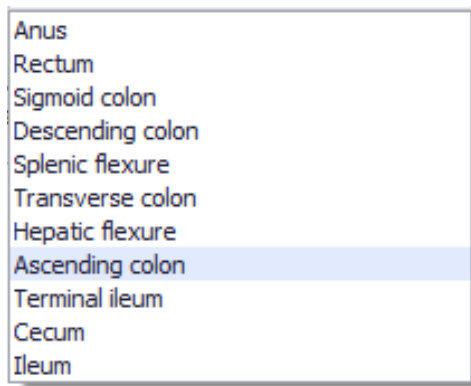
Finding Menu

Finding

- Anatomical deformity
- Arteriovenous malformation (AVM)
- Diverticulosis
- Fissure / Fistula
- Hemorrhoids
- Melanosis
- Mucosal abnormality
- Normal
- Polyp cluster
- Polyp
- Prior surgery
- Solitary rectal ulcer
- Stricture / Stenosis
- Tumor
- Other finding

OK Cancel

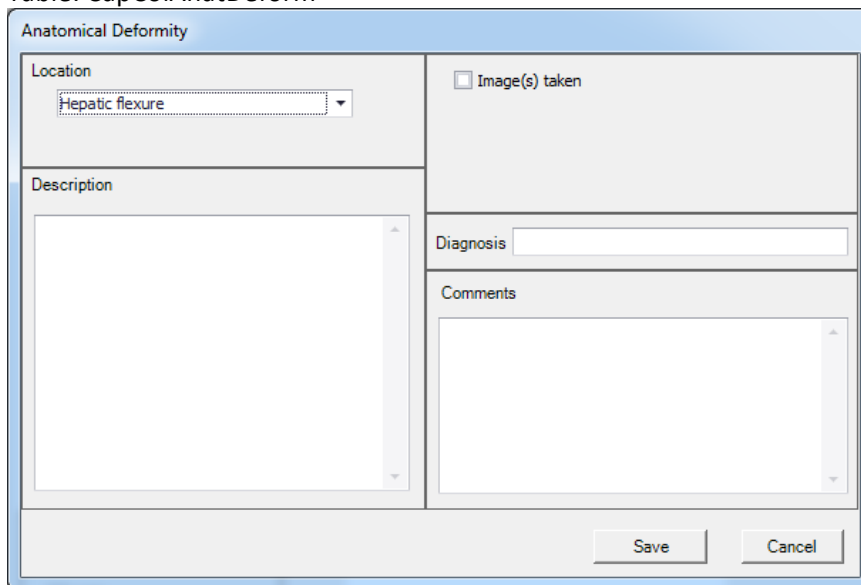
Location menu used in Colon Findings:



A vertical list of anatomical locations for colon findings. The items are: Anus, Rectum, Sigmoid colon, Descending colon, Splenic flexure, Transverse colon, Hepatic flexure, Ascending colon (highlighted in blue), Terminal ileum, Cecum, and Ileum.

Anatomical Deformity

Table: CapColAnatDeform

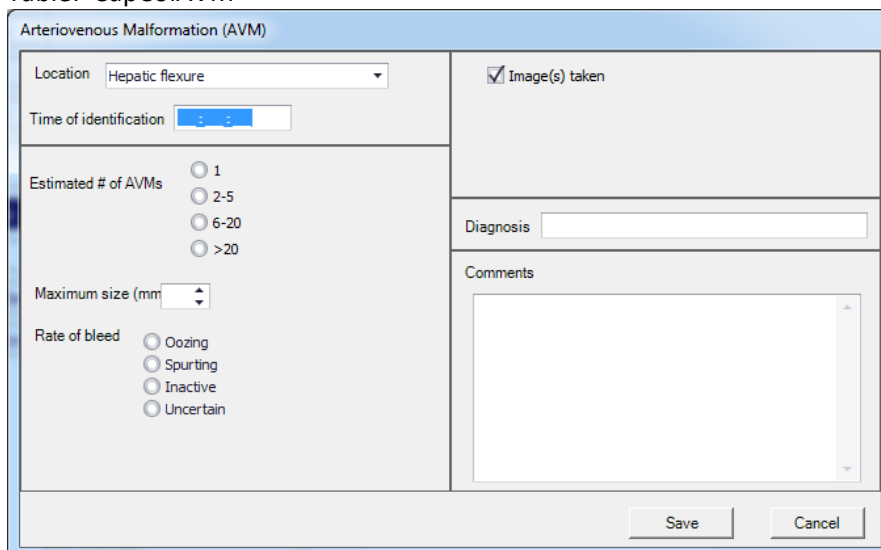


The 'Anatomical Deformity' form contains the following fields:

- Location:** A dropdown menu with 'Hepatic flexure' selected.
- Description:** A large text area for describing the deformity.
- Image(s) taken:** A checkbox, currently unchecked.
- Diagnosis:** A text input field.
- Comments:** A large text area for additional notes.
- Buttons:** 'Save' and 'Cancel' buttons at the bottom right.

Arteriovenous Malformation (AVM)

Table: CapColAVM



The 'Arteriovenous Malformation (AVM)' form contains the following fields:

- Location:** A dropdown menu with 'Hepatic flexure' selected.
- Time of identification:** A time selection field.
- Estimated # of AVMs:** Radio button options for 1, 2-5, 6-20, and >20.
- Maximum size (mm):** A spinner field.
- Rate of bleed:** Radio button options for Oozing, Spurting, Inactive, and Uncertain.
- Image(s) taken:** A checkbox, currently checked.
- Diagnosis:** A text input field.
- Comments:** A large text area for additional notes.
- Buttons:** 'Save' and 'Cancel' buttons at the bottom right.

Diverticulosis

Table: CapColDivertic

Diverticulosis	
Starting location Hepatic flexure	☒ Image(s) taken
Ending location Hepatic flexure	
Time of identification	
☐ Diverticulitis suspected	Diagnosis
Estimated # of diverticula	Comments
☐ 1 ☐ 2-5 ☐ 6-20 ☐ >20	
Rate of bleed	
☐ Oozing ☐ Spurting ☐ Inactive ☐ Uncertain	
Save Cancel	

Fissure / Fistula

Table CapColFissure (no data)

Fissure / Fistula	
Time of identification	☒ Image(s) taken
Description	Diagnosis
☐ Fissure ☐ Fistula	Comments
Maximum size (mm)	
Save Cancel	

Hemorrhoids

Table: CapColHemorrhoids (no data)

Hemorrhoids	
Time of identification	☒ Image(s) taken
Type	Diagnosis
Classification	
Size	Comments
☐ Thrombosis present	
Rate of bleed ☐ Oozing ☐ Spurting ☐ Inactive ☐ Uncertain	
Save Cancel	

Type	
Classification	External Internal Internal + External
Size	
☐ Thrombosis present	
Rate of bleed	☐ Oozing ☐ Spurting ☐ Inactive ☐ Uncertain

Type	
Classification	Grade I: Non-prolapsed Grade II: Spontaneously reduced Grade III: Reducible (manually / endoscopically) Grade IV: Permanent prolapse
Size	
☐ Thrombosis present	
Rate of bleed	☐ Oozing ☐ Spurting ☐ Inactive ☐ Uncertain

Type	
Classification	
Size	
☐ Thrombosis	Small Medium Large
Rate of bleed	☐ Oozing ☐ Spurting ☐ Inactive ☐ Uncertain

Melanosis

Table: CapColMelanosis

Melanosis	
Starting location	Hepatic flexure
Ending location	Hepatic flexure
Time of identification	
☒ Image(s) taken	
Diagnosis	
Comments	
Save Cancel	

Mucosal Abnormality / Colitis / IBD

Table: CapColMucosalAbnl

Mucosal Abnormality / Colitis / IBD	
Location: Hepatic flexure	☒ Image(s) taken
Time of identification: : : :	
Activity:	
Description ☐ Erosions present ☐ Fistula ☐ Friability ☐ Loss of haustral folds ☐ Loss of vascularity ☐ Pseudopolyps ☐ Stenosis ☐ Ulcer	Diagnosis: Comments:
Etiology ☐ Crohn's disease ☐ Infectious colitis ☐ Ischemic colitis ☐ Microscopic colitis ☐ Pseudomembranous colitis ☐ Radiation colitis ☐ Ulcerative colitis ☐ Uncertain etiology ☐ Other	
Rate of bleed: ☐ Oozing ☐ Spurting ☐ Inactive ☐ Uncertain	Save Cancel

Activity:
Description: Inactive ☐ Erosion Mild ☐ Fistula Moderate ☐ Friability Severe ☐ Loss of haustral folds ☐ Loss of vascularity ☐ Pseudopolyps ☐ Stenosis ☐ Ulcer

Normal

Table: CapColNormal

Normal
Location: Hepatic flexure
Time of identification: : : :
☒ Image(s) taken
Comments:
Save Cancel

Polyp cluster

Table: CapColPolypCluster (no data)

Polyp cluster	
Location Hepatic flexure	☒ Image(s) taken
Time of identification	
Estimated # of polyps ☐ 2-5 ☐ 6-20 ☐ >20	Diagnosis
Minimum size (mm)	Comments
Maximum size (mm)	
Save Cancel	

Polyp

Table: CapColPolyp

Polyp	
Location Hepatic flexure	☒ Image(s) taken
Time of identification	
Description ☐ Diminutive polyp (<5 mm)	Diagnosis
Size (mm)	Comments
Attachment ☐ Flat ☐ Pedunculated ☐ Sessile	
Save Cancel	

Prior surgery

Table: CapColPriorSurg

Prior surgery

Location

Time of identification

Prior surgery

☐ Colostomy

☐ Left hemicolectomy

☐ Right hemicolectomy

☐ Segmental colectomy

☐ Terminal Ileum Resection

☐ Total colectomy

☐ Ileostomy

☐ Ileo-anal pouch

☐ Koch pouch

☐ Other prior surgery

☒ Image(s) taken

Diagnosis

Comments

Save Cancel

Solitary rectal ulcer

Table: CapColRectalUlcer (no data)

Solitary rectal ulcer	
Time of identification	☒ Image(s) taken
Description Distance from anal verge (cm)	Diagnosis
Maximum size (mm)	
	Comments
Save Cancel	

Stricture / Stenosis

Table: CapColStricture

Stricture / Stenosis	
Location Hepatic flexure Time of identification : : :	☒ Image(s) taken
Distance from anus (cm) Obstruction Estimated lumen diameter (mm)	Diagnosis Comments Save Cancel
Suspected etiology ☐ Crohn's disease ☐ Diverticulitis ☐ Extrinsic compression ☐ Indeterminant colitis ☐ Ischemic colitis ☐ Malignancy ☐ Post surgical ☐ Radiation colitis ☐ Other 	

Distance from anus (cm)	
Obstruction	
Estimated lumen	 capsule passes through capsule temporarily delayed capsule retained

Tumor

Table: CapColTumor

Tumor	
Location Hepatic flexure Time of identification : : :	☒ Image(s) taken
Description ☐ Suspected malignant ☐ Established malignant by prior biopsy ☐ Suspected benign ☐ Established benign by prior biopsy Dimensions (mm) X (mm) ☐ Circumferential ☐ Mucosal ☐ Fungating ☐ Submucosal Obstruction	Diagnosis Comments Save Cancel

Description

☐ Suspected malignant
☐ Established malignant by prior biopsy
☐ Suspected benign
☐ Established benign by prior biopsy

Dimensions (mm) X (mm)

☐ Circumferential ☐ Mucosal
☐ Fungating ☐ Submucosal

Obstruction

- capsule passes through
- capsule temporarily delayed
- capsule retained

Other Finding

Table: CapColOtherFind

Other Finding

Location Hepatic flexure

Time of identification

☒ Image(s) taken

Diagnosis

Description / Comments

EVENTS

Table: Intervention

Intervention medication grid: Intervention_Intervention_medication_grid

Capsule Endoscopy

Pathology Images Print Fax Orders

First name: Fake Middle name: Last name: Patient MRN: 00000000 Birth date: 1/1/1901 Procedure date: 1/ 1/2000 12:00 PM

Were there any unplanned events? ☐ Yes ☐ No

Cardiac events	Pulmonary events	Gastrointestinal events	Other events
☐ Arrhythmia	☐ Elevated pCO ₂	☐ Abdominal pain	☐ Death
☐ Bradycardia	☐ Hypoxia – prolonged (> 15 sec) ▶	☐ Bleeding ▶	☐ Deep vein thrombosis
☐ Chest pain	☐ O ₂ sat < 95%	☐ > 10 cc	☐ Drug reaction
☐ Hypertension	☐ O ₂ sat < 90%	☐ ≤ 10 cc	☐ Paradoxical reaction
☐ Hypotension	☐ Hypoxia – transient (≤ 15 sec)	☐ Nausea/vomiting	☐ Prolonged sedation
☐ Tachycardia	☐ Respiratory distress	☐ Perforation	☐ Rash/hives
☐ Vasovagal reaction	☐ Wheezing	☐ Other GI event ▶	☐ Seizure
☐ Other cardiac event ▶	☐ Other pulmonary event ▶		☐ Phlebitis
			☐ Other event ▶

Interventions required? ☐ Yes ☐ No

If yes, specify the intervention(s)

Intervention medication	Dose	Route
☐ Cautery required		
☐ Code 99/CPR		
☐ IV fluids administered		
☐ Oxygen administered ▶		
☐ Patient admitted to hospital		
☐ Patient admitted to ED		
☐ Procedure stopped prematurely		
☐ Sedation reversed		
☐ Surgery required		
☐ Transfusion required		
☐ Other intervention ▶		
☐ Other intervention medication ▶		

Were the interventions successful? ☐ Yes ☐ No

Select all that apply

Intervention medication	Dose	Route
☐ Hemostasis achieved		
☐ O ₂ desaturation reversed		
☐ Spontaneous resolution of event		
☐ Vital signs stabilized		

Unplanned events/interventions comments

Please do not use this field if you can document the information using other fields on the screen

Save Sign Print Preview Close

Intervention medication Add med

Medication	Dose	Route
atropine		
atropine		
diphenhydramine		
epinephrine		
epinephrine 1:1,000		
epinephrine 1:10,000		
flumazenil		
glucagon		
glycopyrrolate		
hydrocortisone		
hydroxyzine		
lidocaine		
meprobamate		
naloxone		
promethazine		

Unplanned events
Please do not use this field if you can document the information using other fields on the screen

Intervention medication Add med

Medication	Dose	Route
atropine	1 mg	
	2 mg	
	3 mg	
	4 mg	
	5 mg	
	6 mg	
	7 mg	
	8 mg	
	9 mg	
	10 mg	
☐ Other intervention medication ▶		

(menu customized to Medication selection)

Intervention medication			Add med
Medication	Dose	Route	
atropine		Aerosol IM IV PO PR SC SL Topical	
☐ Other intervention medication			

Cardiac events: Other cardiac event

Table: EventCardiacOther

Other cardiac events

Save
Cancel

Pulmonary events: Hypoxia – prolonged (>15 sec)

Table: EventHypoxia

Prolonged hypoxia comments

Save
Cancel

Pulmonary events: Other pulmonary event

Table: EventPulmOther

Other pulmonary events

Save
Cancel

Gastrointestinal events: Bleeding

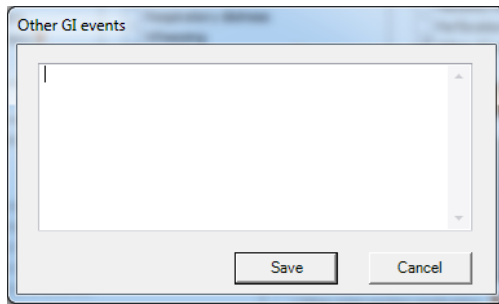
Table: EventBleeding

Bleeding comments

Save
Cancel

Gastrointestinal events: Other GI event

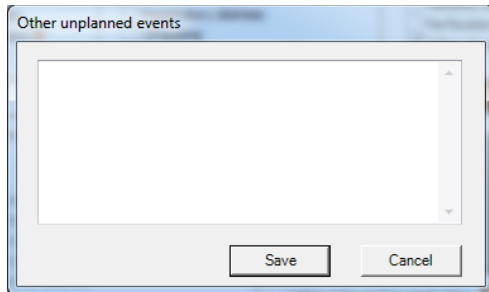
Table: EventGIOther



The screenshot shows a dialog box titled "Other GI events". It contains a large, empty text area for input. At the bottom right, there are two buttons: "Save" and "Cancel".

Other events: Other event

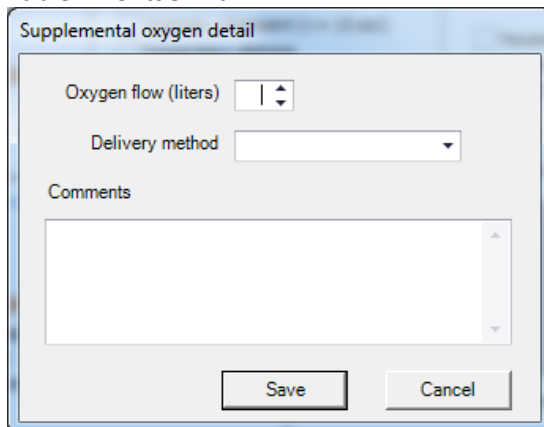
Table: EventOther



The screenshot shows a dialog box titled "Other unplanned events". It contains a large, empty text area for input. At the bottom right, there are two buttons: "Save" and "Cancel".

If yes, specify the intervention(s): Oxygen administered

Table: EventsO2Admin



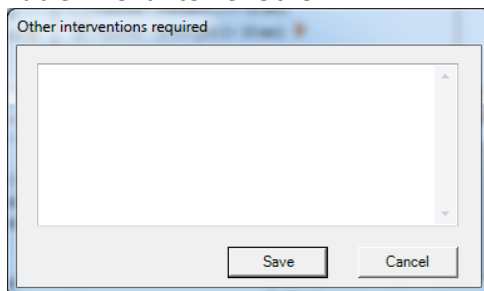
The screenshot shows a dialog box titled "Supplemental oxygen detail". It contains the following fields:

- "Oxygen flow (liters)" with a numeric input field and up/down arrows.
- "Delivery method" with a dropdown menu.
- "Comments" with a large text area.

At the bottom right, there are two buttons: "Save" and "Cancel".

If yes, specify the interventions: Other interventions

Table: EventIntervenOther



The screenshot shows a dialog box titled "Other interventions required". It contains a large, empty text area for input. At the bottom right, there are two buttons: "Save" and "Cancel".

Intervention medications: Other intervention medication

Table: IntervenMedOther

The image shows a screenshot of a software window titled "Other intervention medication". The window has a standard Windows-style border. Inside the window, there is a large, empty rectangular text area with a vertical scrollbar on the right side. At the bottom of the window, there are two buttons: "Save" on the left and "Cancel" on the right. The window appears to be a form for entering or editing data related to other intervention medications.

ASSESSMENT / PLAN

Table: TreatmentPlan

New medications grid: TreatmentPlan_New_medications_grid

Scheduling and Referring grid: TreatmentPlan_Scheduling_and_Referring_grid (redacted)

Capsule Endoscopy						
Pathology	Images	Print	Fax	Orders		
First name Fake	Middle name	Last name Patient	MRN 00000000	Birth date 1/1/1901	Procedure date 1/ 1/2000 12:00 PM	
Assessment						
Recommended screening or surveillance interval						
☐ Recommendation is pending, based on pathology ☐ Recommended next exam in years months ☐ No further examination needed						
Medication plan						
☐ Start new medications ☐ Await pathology ☐ Discontinue current medications ▶ ☐ Medications per referring provider ☐ Continue current medications ▶ ☐ No medications required						
New medications Add med						
Medication Type	Medication	Dose	Route	Sig	Disp	Comments
☐ Other new medications ▶						
Scheduling and Referring New activity						
Activity Type	Activity	When	Date	Comments		
☐ Other plan ▶						

Save
 Sign
 Print Preview
 Close

New medications	Add med						
Medication Type	Medication	Dose	Route	Sig	Disp	Comments	
▶ 5-ASA	mesalazine						
5-ASA							
Anti-constipation							
Anti-diarrheal							
Antibiotics							
Antiemetic							
☐ Antispasmodics							
Bile Acids							
Fiber supplements							
H ₂ Blocker							
Hemorrhoidal Agent							
Hormone therapy							
HP Med							
Immunosuppressants							
Non-Steroidals							
Other GI Medications							
PPI							
Promotility							
Psychotropics							
☐ Steroids							
Venous Meds							

New activity				
Activity	When	Date	Comments	

(Medication menu customized to Medication Type selection)

New medications							Add med
Medication Type	Medication	Dose	Route	Sig	Disp	Comments	
5-ASA	mesalamine	1500 mg					
☐ Other new medications							

(Dose menu customized to Medication selection)

New medications							Add med
Medication Type	Medication	Dose	Route	Sig	Disp	Comments	
5-ASA	mesalamine		Aerosol				
☐ Other new medications							
Scheduling and Referring			New activity				

New medications							Add med
Medication Type	Medication	Dose	Route	Sig	Disp	Comments	
5-ASA	mesalamine		AC				
☐ Other new medications							
Scheduling and Referring			New activity				

Scheduling and Referring					New activity
Activity Type	Activity	When	Date	Comments	
Admit to hospital					
☐ Other plan					

Scheduling and Referring					New activity
Activity Type	Activity	When	Date	Comments	
Followup					
☐ Other plan					

(Activity menu customized to Activity Type selection)

Scheduling and Referring					New activity
Activity Type	Activity	When	Date	Comments	
Followup		Around			
☐ Other plan					

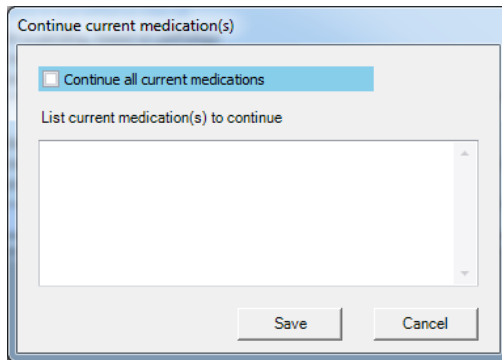
Medication plan: Discontinue current medications

Table: DiscontinueCurMeds

Discontinue current medication(s)	
List current medication(s) to discontinue	
Save	Cancel

Medication plan: Continue current medications

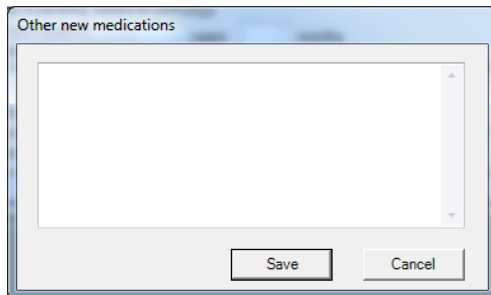
Table: ContinueMeds



A dialog box titled "Continue current medication(s)". It features a checkbox labeled "Continue all current medications" which is currently checked. Below the checkbox is a text label "List current medication(s) to continue" followed by a large, empty text area with a vertical scrollbar. At the bottom right of the dialog are two buttons: "Save" and "Cancel".

New medications: Other new medications

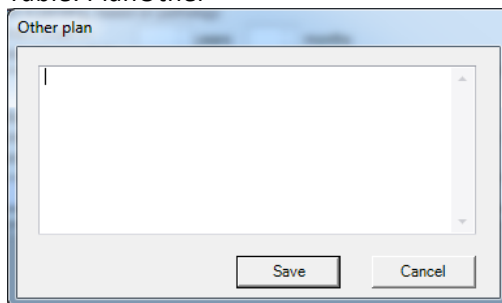
Table: OtherNewMeds



A dialog box titled "Other new medications". It contains a large, empty text area with a vertical scrollbar. At the bottom right of the dialog are two buttons: "Save" and "Cancel".

Scheduling and Referring: Other plan

Table: PlanOther



A dialog box titled "Other plan". It contains a large, empty text area with a vertical scrollbar. At the bottom right of the dialog are two buttons: "Save" and "Cancel".

LETTERS / INSTRUCTIONS

Table: Letters

Capsule Endoscopy

Pathology Images Print **Fax** Orders

First name: Fake Middle name: Last name: Patient MRN: 00000000 Birth date: 1/1/1901 Procedure date: 1/ 1/2000 12:00 PM

Use Defaults

Select Providers to receive copies of the report

Search by last name: Providers

Gissel, Theodore Whoville Clinic
Nimble, Jack
Provider, A Generic Clinic
Provider, Default Oregon Health and Science University
Provider, First
Provider, Second Second Tier Medical
Slughom, Prof Hogwarts
Test, Tom Northwest Test Center of Lower hoboken New Jersey
Turtle, Mertle Turtle Pond Digestive Care

Add ->
<- Remove

Referring provider: _____
Other providers to be copied: _____

☐ Print these providers at bottom of procedure report

Finding-specific instructions

Upper GI Small bowel Colon

☐ Achalasia ☐ Food impaction ☐ Nodule / Polyp ☐ Tumor
☐ Arteriovenous malformations (AVM) ☐ Foreign body ☐ Normal ☐ Ulcer
☐ Barrett's esophagus ☐ Hiatal hernia ☐ Prior endotherapy ☐ Varices
☐ Blood clot ☐ Mallory-Weiss tear ☐ Prior surgery
☐ Duodenal diverticulum ☐ Mucosal abnormality - Esophagus ☐ Sprue (Celiac disease)
☐ Esophageal ulcer ☐ Mucosal abnormality - Stomach / Duodenum ☐ Stricture / Stenosis

Instructions given in: _____

Standardized instructions given
☐ Sedation ☐ High-fiber diet

Post-exam instructions given

NPO _____
Liquids only _____
Resume prior diet _____
No alcohol _____
ASA / NSAIDS _____
Restart medications _____

Other specific post-exam instructions

Save as Default

Save
Sign
Print Preview
Close