

**Endoscopy: BASIC, LOGIC, PROBE, MITOHEP**

**A. Endoscopy**

A1

Endoscopy date

MM	DD	YYYY

A2

Indication

- Evaluation of GI bleeding
- Screening (PHT with no previous episodes of bleeding)
- Follow up therapy of varices (ongoing treatment or post-eradication surveillance)
- Endoscopy performed for reason other than portal hypertension

A3

Bleed date

MM	DD	YYYY

Not Done

**B. Esophageal Varices**

B1

Esophageal varices

- Absent
- Present

B2

Grade of the largest size of varices identified

- Grade I (Small)
- Grade I-II (Small to Medium, Flat)
- Grade II-III (Flatten with Insufflation)
- Grade III (Large)
- Grade III-IV (Very large, Protuberant)
- Grade IV (Filling entire lumen, do not flatten with insufflations)
- Not specified/unknown

B3

Red markings

- Absent
- Present

Not Done

|

B4

Active bleeding

Not Done

- Absent
- Present

B5

Interventions performed (check all that apply)

- None
- Band Ligation
- Sclerotherapy

C. Stomach Findings

C1

Were there stomach findings?

- No
- Yes

C2

Stomach findings reported (check all that apply)

- Portal Gastropathy
- Gastric varices
- Ulcer disease (includes gastric or duodenal ulcers)

C3

Which endoscopic interventions were performed? (check all that apply)

- None
- Banding
- Glue injection
- Topical coagulant powder (e.g. Hemospray)
- Monopolar/Bipolar Cautery

D. Other Interventions

D1

Which other interventions were reported? (check all that apply)

- None
- Porto-systemic Shunt
- Non-selective Beta Blocker
- TIPPS

Z. Questionnaire Completion

Z1

Checking "Yes" to this question indicates that the current questionnaire or task has been completed with all available information. It will be removed from the Task list, but will remain available from the Details page through the CENSUS.

This questionnaire or task has been completed with all available data:

Yes

---