

FILL IN IMMEDIATELY AFTER THE OPERATION

Right Hemicolectomy Global Assessment Score

(GAS) form

| A. SURGEON(S) | | | | | | | |
|--|--|--|--|--|--|--|--|
| | | | | | | | |
| A1 Name of surgeon(s) | | | | | | | |
| A2 This is the surgeon's th case in phase 4 of the right study | | | | | | | |
| A3 Operating date | | | | | | | |
| A4 Name of hospital | | | | | | | |
| A5 Name of proctor | | | | | | | |
| A6 Was the proctoring on site or online? On site Online | | | | | | | |
| A7 Has the CT scan and thus the colonic anatomy been reviewed before surgery? Yes No | | | | | | | |
| A7 Was the second participating surgeon of the hospital present? Yes No | | | | | | | |
| B. PATIENT | | | | | | | |
| B1 Patient study number (Alea) | | | | | | | |
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| C. ASSESSMENT | | | | | | | |
|--|--|--------|--------|--------|--------|----------|--------------|
| 1 Not performed, step had to be done by proc 3 Performed, with substantial verbal support 5 Competent performance, safe | 2 Partly performed, step had to be partly done by 4 Performed with minor verbal support 6 Proficient performance, couldn't be better | | | | | | |
| 1&2 are not applicable during teleproctoring (online) | | | | | | | |
| SET UP | | | | | | | |
| C1: Appropriate patient positioning | 1 | 2 | 3 | 4 | 5 | 6 | N/A |
| C2: Correct Set-up of trocars and laparoscopic instruments | 1 | 2 | 3 | 4 | 5 | 6 | N/A |
| MESENTERIC DISSECTION | | | | | | | |
| C3: Appropriate dissection of the avascular plane between the visceral peritoneum of the mesentery and the retroperitoneum with dissection of the duodenum and ventral aspect of pancreatic head | 1 | 2 | 3 | 4 | 5 | 6 | N/A |
| CENTEAL APPROACH AND VESSEL LIGATION | . — | | | | - | د | |
| C4: Safe approach and dissection of the VMS | 1 <u></u> 1□ | 2 2 | 3 3 | 4 4 | 5 5 | 6 6 | N/A□ N/A□ |
| C5: Safe vessel ligation (CVS) | י∟ 1□ | 2 | 3 | 4 | 5 5 | 6 | |
| C6. Safe dissection anterior side of the VMS cranially towards Henle's trunk | ' | - | - | · | - |] | |
| | | | | | | | |

| C7: vess | | on of Henle and midd | lle colic | 1 | 2 | 3 | 4 | 5 | 6 | N/A | | | |
|-------------|---|---|-------------|----------|-------------------------|-------------------------|---------------------|---------------------------|---------------------------|------------------------------|-----------------|--|--|
| C8: | Safe creation | ND EXTRACTION | 1 1 | 2 2 | 3 3 | 4 4 | 5 5 | 6 6 | N/A N/A | | | | |
| | D. QUALITY OF RESECTED SPECIMEN RIGHT HEMICOLECTOMY | | | | | | | | | | | | |
| D1. | D1. Specimen score by the proctor 0 | | | 1 | 2[| | 3 | | | | | | |
| | Type (Benz) | DESCRIPTION | | | | | | | | | | | |
| | The stalks of the ileocolic vessels and middle colic vessels are connected by tissue of the surgical trunk (lymphatic tissue package covering the SMV). The mesocolic window has a complete medial frame of mesocolic tissue. | | | | | | | | | | | | |
| | The stalks of ileocolic and middle colic vessels are present but are not connected by tissue. The frame of the mesocolic window is not complete on its medial aspect. | | | | | | | | | | | | |
| | 2 | The stalks of the ilec geometric configura window has a media | tion of the | specimen | esent with but the m | more tha iddle colic | n 50% of vessels | their antie are not de | cipated len etectable. | gth accordin The frame of | g to the the | | |
| | 3 | lleocolic vessels hav geometric configura | | | | | | | ated length | according to | o the | | |
| E. | OVERA | LL GLOBAL / | ASSES | SMEN | T SCC | RE | | | | | | | |
| | E1. O | verall Proficienc | y: | | 1 | 2 | 3 | 4 | 5 | 6 | N/A | | |
| | E2. L | evel of case diff | very easy | /) 1 | 2 | 3 | 4 | 5[] (| very difficult |) | | | |
| F. | ADDITIC | NAL COMME | NTS | | | | | | | | | | |
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| G. / | G. ADDITIONAL PROCTORING | | | | | | | | | | | | |
| G1. N | G1. Need for additional proctoring according to surgeon | | | | | | Yes No | | | | | | |
| G2. N | leed for addit | ional proctoring acco | rding to pr | octor | | Ye | s 🗌 1 | lo 🗌 | | | | | |

¹ Benz S, Tannapfel A, Tam Y, Grünenwald A, Vollmer S, Stricker I. Proposal of a new classification system for complete mesocolic excison in right-sided colon cancer. Tech Coloproctol. 2019 Mar;23(3):251-257. doi: 10.1007/s10151-019-01949-4. Epub 2019 Mar 5. PMID: 30838463.