# PAO ± Hip Arthroscopy Study

## Appendix D

**Time interval:** Pre-op

### Patient Information

1. **Subject ID:**
   
2. **Operative hip:**
   - [ ] Left
   - [ ] Right

3. **Sex:**
   - [ ] Male
   - [ ] Female

4. **Month/year of birth (mmm/yyyy):**

### Patient History

1. **Pain location:**
   - [ ] Anterior (groin)
   - [ ] Anterior (thigh)
   - [ ] Lateral
   - [ ] Posterior (buttock)
   - [ ] Other (specify):

2. **Pain chronicity:**
   - [ ] < 6 months
   - [ ] 6 months - 1 year
   - [ ] 1 - 3 years
   - [ ] 3 - 5 years
   - [ ] > 5 years
Physical Exam

1. Height: ________ cm  
2. Weight: ________ kg

3. Range of motion

1) Left leg:
   - Start of flexion: ________ °
   - End of flexion: ________ °
   - IR at 90° flexion: ________ °
   - ER at 90° flexion: ________ °
   - Abduction: ________ °
   - Adduction: ________ °
   - IRE: ________ °
   - ERE: ________ °

2) Right leg:
   - Start of flexion: ________ °
   - End of flexion: ________ °
   - IR at 90° flexion: ________ °
   - ER at 90° flexion: ________ °
   - Abduction: ________ °
   - Adduction: ________ °
   - IRE: ________ °
   - ERE: ________ °

4. 1) Left hip:
   - Anterior impingement sign: ☐  ☐
   - Anterior apprehension (groin): ☐  ☐
   - Posterior impingement pain (buttock): ☐  ☐

2) Right hip:
   - Anterior impingement sign: ☐  ☐
   - Anterior apprehension (groin): ☐  ☐
   - Posterior impingement pain (buttock): ☐  ☐

5. Prone-Apprehension Relocation Test (PART): ☐  ☐

6. FADDIR: ☐  ☐
### PAO ± Hip Arthroscopy Study

**Time interval:**
- [ ] Pre-op
- [ ] 2-4 weeks
- [ ] 6 months
- [ ] 12 months
- [ ] 24 months post-op

#### Radiographic Finding Digital Measurements

1. **Anteroposterior pelvis:**
   - [ ] No
   - [ ] Yes
   
   If yes, answer the following:
   1) **Patient is:**
      - [ ] Standing
      - [ ] Supine
   2) **Date of X-ray (dd/mmm/yyyy):** __________________________

2. **Tönnis classification (select one of the following):**
   - [ ] Grade 0 (no signs of osteoarthritis)
   - [ ] Grade 1 (increased sclerosis of the head and acetabulum)
   - [ ] Grade 2 (small cysts in the head or acetabulum, moderate joint space narrowing, moderate loss of head sphericity)
   - [ ] Grade 3 (large cysts in head or acetabulum, severe joint space narrowing or obliteration, severe deformity of femoral head, evidence of necrosis)

3. **Lateral center edge angle (Wiberg):** __________ °

4. **Acetabular inclination (Tönnis angle):** __________ °

5. **Alpha angle:** __________ °

6. **Cross over sign:**
   - [ ] No
   - [ ] Yes
   
   If yes, select crossover location below:
   - [ ] Superior 1/3 of acetabulum
   - [ ] Middle 1/3 of acetabulum
   - [ ] Inferior 1/3 of acetabulum

7. **Posterior wall sign:**
   - [ ] No
   - [ ] Yes

8. **Prominence of ischial spin (PRIS) sign:**
   - [ ] No
   - [ ] Yes

9. **Congruency classification (select one of the following):**
   - [ ] Excellent
   - [ ] Good
   - [ ] Fair
   - [ ] Poor

2. **Faux profile view:**
   - [ ] No
   - [ ] Yes

   If yes, answer the following:
   1) **Date of X-ray (dd/mmm/yyyy):** __________________________
   2) **Anterior roof angle:** __________ °
   3) **Posterior joint space narrowing:**
      - [ ] No
      - [ ] Yes
### PAO ± Hip Arthroscopy Study

**Radiographic Finding Digital Measurements (Continued)**

3. Dunn view:  
   - If yes, answer the following:  
     1) □ 45° or □ 90° Dunn  
     2) Date of X-ray (dd/mm/yyyy): ____________________________  
     3) Alpha angle: __________°

4. MRI study:  
   - If yes, answer the following:  
     1) Date of MRI (dd/mm/yyyy): ____________________________  
     2) Labral tear: □ No □ Yes  
     3) Acetabular cyst: □ No □ Yes  
     4) Femoral head cyst: □ No □ Yes  
     5) Alpha angle at 3 o’clock position: __________°  
     6) Alpha angle at 130 position: __________°

5. 3D CT scan  
   - If yes, date of scan (dd/mm/yyyy): ____________________________

CRF 3: Radiographic findings
## PAO ± Hip Arthroscopy Study

**Time interval: Intra-op**

### Surgical procedure

1. **Arthroscopy:**
   - [ ] No
   - [ ] Yes

   If yes, select one of the following:
   - [ ] Beck cartilage damage
     - [ ] 0 Normal (macroscopically sound cartilage)
     - [ ] 1 Malacia (roughening of surface, fibrillation)
     - [ ] 2 Pitting malacia (roughening, partially thinning and full-thickness defects or deep fissuring to the bone)
     - [ ] 3 Debonding (loss of fixation to the subchondral bone, macroscopically sound cartilage; carpet phenomenon)
     - [ ] 4 Cleavage (loss of fixation to the subchondral bone; frayed edges, thinning of the cartilage)
     - [ ] 5 Defect (full-thickness defect)
   - [ ] Labral damage

2. **Concurrent procedures (select all that apply):**
   - [ ] Acetabular articular cartilage grafting
   - [ ] Acetabular articular cartilage fixation
   - [ ] Acetabular chondroplasty
   - [ ] Acetabular microfracture
   - [ ] Acetabular rim osteoplasty
   - [ ] Adhesiolysis-head neck junction
   - [ ] Adhesiolysis-laboocapsular junction
   - [ ] Arthroscopic partial capsulectomy
   - [ ] Arthroscopy
   - [ ] Arthroscopic capsular incision/closure (longitudinal)
   - [ ] Capsular tightening
   - [ ] Femoral head articular cartilage fixation
   - [ ] Femoral head articular grafting
   - [ ] Femoral head microfracture
   - [ ] Femoral head/neck osteochondroplasty
   - [ ] Femoral head central resection
   - [ ] Femoral head articular grafting
   - [ ] Femoral head microfracture
   - [ ] Femoral head/neck osteochondroplasty
   - [ ] Femoral head articular cartilage fixation
   - [ ] Femoral head articular grafting
   - [ ] Femoral head microfracture
   - [ ] Femoral head/neck osteochondroplasty
   - [ ] Femoral head central resection

3. **Subspine (AIIS) decompression:**
   - [ ] No
   - [ ] Yes

4. **Duration of surgery from skin incision to wound closure:**
   - [ ] [ ] min

5. **Tranexamic acid:**
   - [ ] No
   - [ ] Yes

6. **DVT prevention:**
   - [ ] No
   - [ ] Yes

   If yes, select from the following:
   - [ ] Xarelto
   - [ ] LMW Heparin
   - [ ] ASA
   - [ ] Other (specify: ____________________________)

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CRF 5: Surgical procedure
**PAO ± Hip Arthroscopy Study**

**Time Interval**: Track all adverse events within 90 day via retrospective chart review

**Post-op Adverse Events**

Please use the below grading scheme to indicate post-op adverse events.

<table>
<thead>
<tr>
<th>Grade</th>
<th>Definition</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td><strong>Any deviation from the normal postoperative course</strong> without the need for pharmacological treatment or surgical, endoscopic and radiological interventions. Allowed therapeutic regimens are: drugs (antiemetics, antipyretics, analgesics, diuretics), electrolytes and physiotherapy.</td>
</tr>
<tr>
<td>2</td>
<td><strong>Requiring pharmacological treatment with drugs</strong> other than those allowed for Grade 1 complications. Blood transfusions and total parenteral nutrition are also included.</td>
</tr>
<tr>
<td>3a</td>
<td><strong>Requiring surgical, endoscopic or radiological intervention</strong> (not under general anaesthesia)</td>
</tr>
<tr>
<td>3b</td>
<td><strong>Requiring surgical, endoscopic or radiological intervention</strong> (under general anaesthesia)</td>
</tr>
<tr>
<td>4a</td>
<td><strong>Life-threatening complication requiring ICU management</strong> (single organ)</td>
</tr>
<tr>
<td>4b</td>
<td><strong>Life-threatening complication requiring ICU management</strong> (multi organ)</td>
</tr>
<tr>
<td>5</td>
<td><strong>Death</strong> of a patient</td>
</tr>
</tbody>
</table>

**Adverse events**

<table>
<thead>
<tr>
<th>Adverse events</th>
<th>No</th>
<th>Yes (select one)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Airway/breathing</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. Cardiac arrest/failure/arrhythmia</td>
<td></td>
<td></td>
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<tr>
<td>3. Compartment syndrome</td>
<td></td>
<td></td>
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<tr>
<td>4. Cutaneous injury (e.g., pressure sore)</td>
<td></td>
<td></td>
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<tr>
<td>5. Delirium/altered mental status</td>
<td></td>
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<tr>
<td>6. Dysphagia/dysphonia</td>
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<td></td>
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<tr>
<td>7. Fall</td>
<td></td>
<td></td>
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<tr>
<td>8. GI bleed</td>
<td></td>
<td></td>
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<tr>
<td>9. Hematoma</td>
<td></td>
<td></td>
</tr>
<tr>
<td>10. Ileus/bowel obstruction</td>
<td></td>
<td></td>
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<tr>
<td>11. Implant/instrumentation related:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>a. Loss of reduction/alignment/correction</td>
<td></td>
<td></td>
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<tr>
<td>b. Peri-implant fracture</td>
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<td></td>
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<tr>
<td>c. Joint instability/dislocation</td>
<td></td>
<td></td>
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<tr>
<td>d. Aseptic loosening</td>
<td></td>
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<tr>
<td>12. Infection:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>a. Superficial wound</td>
<td></td>
<td></td>
</tr>
<tr>
<td>b. Deep wound</td>
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<tr>
<td>c. Urinary tract</td>
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<tr>
<td>d. Systemic</td>
<td></td>
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<tr>
<td>13. Myocardial infarction</td>
<td></td>
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</tr>
</tbody>
</table>

CRF 6: Post-op adverse events
**Post-op Adverse Events (Continued)**

14. Neurological deterioration:
   - a. Sciatic nerve
   - b. Femoral nerve
   - c. Obturator nerve
   - d. Lateral femoral cutaneous nerve
   - f. Pudendal nerve

15. Non-union/mal union:
   - a. Illium
   - b. Ischium
   - c. Pubis

16. Pain - new onset

17. Pneumonia

18. Renal insufficiency

19. Thrombolytic event:
   - a. DVT
   - b. PE

20. Soft tissue reconstruction/repair fracture

21. Wound dehiscence

22. Wound drainage:
   - a. Serous (requiring treatment)

24. How many days longer than expected did this patient stay in hospital due to adverse events (provide #): ____________ day(s)

25. Did complications require:
   - ☐ Not applicable
   - ☐ Revision
   - ☐ Reoperation
   - ☐ Readmission

26. Treatment (select all that apply, and provide date of treatment):
   - ☐ Arthroscopy Date:
   - ☐ Hardware removal Date:
   - ☐ Bone excision Date:
   - ☐ Hip replacement Date:
   - ☐ Wound I&D Date:
   - ☐ Other Specify: Date:

27. Other notes: