

Registry ID Number:	Registration Date:	
Site of registry:	National ID Number:	

“Socio-demographic Information”						
History taken from: Proband ☐ Non Proband ☐						
First name:		Last name:				
Weight (kg):		Height (cm):		Abdominal circumference (cm):		
Date of birth:						
Sex: Male ☐ Female ☐		Family numbers:				
Marital status: Single ☐ Married ☐ Divorced ☐ Widow ☐						
Twin or more: Yes ☐ (Number:; Same sex: Yes ☐ No ☐)						
Place of Birth : (Rural ☐ Urban ☐); Place of living(during last 6 mo): Rural ☐ Urban ☐						
Immigration (living there more than 6 month): Yes ☐ No ☐ if yes:						
Date (yr/mo)						
Place of living						
Rural0/ Urban1						
Ethnicity: Fars ☐ Kord ☐ Turk ☐ Lor ☐ Arab ☐ Mazandarani ☐ Gilani ☐ Baloch ☐ Other.....						
Father Ethnicity: Fars ☐ Kord ☐ Turk ☐ Lor ☐ Arab ☐ Mazandarani ☐ Gilani ☐ Baloch ☐ Other.....						
Mother Ethnicity: Fars ☐ Kord ☐ Turk ☐ Lor ☐ Arab ☐ Mazandarani ☐ Gilani ☐ Baloch ☐ Other.....						
Religion: Islam ☐ Cristian ☐ Jew ☐ Zoroastrian ☐ others.....						
Education: Illiterate ☐ Primary ☐ Secondary ☐ Bachelor ☐ Master ☐ PhD or MD and more ☐						
Monthly family income(million): <1 ☐ 1- 2.5 ☐ 2.5-5 ☐ >5 ☐ Refused ☐						
Insurance type: Private ☐ Governmental ☐ Without insurance ☐				Supplement insurance: Yes ☐ No ☐		
Home address:				District:		
Home phone number:				Job phone number:		
Cell phone number:				Relative phone number:		

Smoking (at least one cigarette per day for 3 months or longer): Yes ☐ No ☐ Refused ☐ If yes: Cigarettes packs per day; Age at first use:; Age at stop: Hookah: Yes ☐ No ☐ Refused ☐ (if Yes:.....times a week) Alcohol abuse (at least once a week for ≥6 mo): Yes ☐ No ☐ Refused ☐ if yes: Age at first use; Age at stop Frequency: Daily ☐ 1-2 times a week ☐ 3 or more times a week ☐ Addiction: Yes ☐ No ☐ Refused ☐ if yes: Type (opiate ☐ Heroin ☐ Crack ☐ Others:); Route (Smoking ☐ Snuffling ☐ Oral ☐ IV ☐); Age at first use:; Age at stop: Occupation exposure (during last 10 yrs): Agriculture ☐ Industrial ☐ Administrative ☐ Housewife ☐ ; if industrial, which one:
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Dietary Hx during last 10 yrs (servings / mo): Fruit:; Vegetables and leafy green salads consumption:; Red meat: Barbecue meat:; Processed Food:

Physical activity (during last 10 yrs; 30 minutes or longer per week): Yes ☐ No ☐ Refused ☐ (if yes: min per wk)

Socio-demographic information: psc ☐ acute pancreatitis ☐ chronic pancreatitis ☐ biliary stone ☐ pancreatic mass ☐ biliary stricture ☐ unexplained dilated CBD ☐ Non-specific abdominal pain ☐ submucosal luminal lesion ☐ luminal cancer staging ☐ lung cancer staging ☐ fecal inconsistency ☐ perianal abscess/ fistula ☐
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Medical HX					
1. Malignancy : - Location: Esophagus ☐ Stomach ☐ Small intestine ☐ Colon ☐ Pancreas ☐ Ampulla ☐ Biliary ☐ GB ☐ Liver ☐ Testis ☐ Bladder ☐ Kidney ☐ Ureter ☐ Ovary ☐ Uterine ☐ Cervix ☐ Lung ☐ Oropharyngeal ☐ Brain ☐ Skin ☐ Bladder ☐ - Type of pathology: Adenocarcinoma ☐ SCC ☐ BCC ☐ Melanoma ☐ Lymphoma ☐ NET ☐ Others: - Age at diagnosis (yr): - Underwent: Curative surgery ☐ Palliative Surgery ☐ Chemotherapy ☐ Radiotherapy ☐ - Lynch syndrom ☐ Familial X-syndrome ☐					
2. Polyp : - Location: Esophagus ☐ Stomach ☐ Ampulla ☐ Small intestine ☐ Colon ☐ - Type of pathology: Adenoma ☐ (Tubular ☐ Tubulovillous ☐ Villus ☐; FAP ☐ MAP ☐) Hyperplastic ☐ Serrated ☐ Hamartoma ☐ (Peutz-jeghers ☐ Others:) Juvenile ☐					
3. Surgery ☐ (Appendectomy ☐ Cholecystectomy ☐ Gastrectomy ☐ Others:)					
4. DM ☐ (Type1 ☐ Type2 ☐), Duration (yr):					
5. Cirrhosis (Child A ☐ Child B ☐ Child C ☐) Esophageal varice ☐ Fundal varice ☐ Ectopic varice ☐ Encephalopathy ☐ Ascites ☐					
6. Chronic liver disease (HBV ☐ HCV ☐ AIH ☐ PBC ☐ PSC-AIH overlap syndrome ☐ PSC ☐ (Small duct ☐ Large duct ☐ mixed type ☐) Fatty liver disease/NASH ☐ Alcoholic hepatitis ☐ Wilson ☐ Hemochromatosis ☐ Idiopathic ☐)					
7. IBD ☐ (UC ☐ Crohn's disease ☐ Indeterminate colitis ☐ Pouchitis ☐ Backwash ileitis ☐) - Location: Rectum ☐ Sigmoid ☐ Descending colon ☐ Transverse colon ☐ Ascending colon ☐ Cecum ☐ Ileum ☐ Jejunum ☐ Duodenum ☐ Stomach ☐ - Duration (yr):					
8. Celiac disease ☐ (On GFD ☐; Duration (yr):)					
9. Pancreatitis (Acute ☐ if yes days ago; Chronic ☐ if yes duration (yr):) Etiology: Alcoholic ☐ Biliary ☐ Drug ☐ Hereditary ☐ Hyper TG ☐ Others:					
10. HTN ☐ 11. CKD/ESRD ☐ 12. COPD ☐ 13. Asthma ☐ 14. IHD ☐ 15. CHF ☐					
Family History					
1. Malignancy ☐ Esophagus ☐ (Upper ☐ Middle ☐ Lower ☐ EGJ ☐) Stomach ☐ (Cardia ☐ Fundus ☐ Body ☐ Antrum ☐) Small intestine ☐ (Bulb ☐ D2 ☐ D3 ☐ Ampulla ☐) Colon ☐ (Ascending ☐ Transverse ☐ Descending ☐) Pancreas ☐ (Head ☐ Body ☐ Tail ☐ Neck ☐ Uncinate ☐) Ampulla ☐ - Location: Biliary ☐ GB ☐ Liver ☐ Testis ☐ Bladder ☐ Kidney ☐ Ureter ☐ Ovary ☐ Uterine ☐ Cervix ☐ Lung ☐ Oropharyngeal ☐ Brain ☐ Skin ☐ Adenocarcinoma ☐ - Type of pathology: Adenocarcinoma ☐ SCC ☐ Bcc ☐ Melanoma ☐ Lymphoma ☐ NET ☐ Others: - Age at diagnosis: - Kindership: First degree ☐ (Number:) Second degree ☐ (Number:) Third degree ☐ (Number:)					
2. Chronic pancreatitis (Kindership: First degree ☐ (Number:) Second degree ☐ (Number:); Earliest age at diagnosis:)					
3. IBD ☐ 4. Cirrhosis ☐ 5. PSC ☐ 6. Others:					
Drug History					
Drug	Daily dose	Duration (mo)	Drug	Daily dose	Duration (mo)
ACE-I or ARB			Metformin		
Anti-TNF			NSAID		
ASA			Prednisolone		
Azathioprine			Tacrolimus		
Calcium			GLP1 agonist		
Cellcept			Statin		
Cyclosporine			MTX		
EStrogen			Fibrate		
Glibenclamide			Vit D3		
Gliclazide			Folic acid		
GnRH(Dcapeptide)			Insulin		

Clinical manifestations	
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Pruritus ☐ Jaundice ☐ Fever ☐ Shaking Chill ☐ Significant weight loss ☐ Nausea & Vomiting ☐
 Abdominal pain ☐ (Location: Epigastric ☐ LUQ ☐ RUQ ☐ Back ☐; Severity (1 to 10):)
 Back pain ☐ Muscle weakness ☐ Muscle cramps ☐ Diarrhea ☐ (Bloody ☐ Watery ☐) RUQ mass ☐ Tenderness ☐
 Guarding ☐ Shifting dullness ☐ Duration(d):

Date:	Lab findings
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AST		FT4		Iron	
ALT		TSH		TIBC	
ALP		TG		Ferritin	
Bili (T)		Chol		AFP	
Bili D					
γ-GT		LDL		CEA	
Albumin		HDL		CA19-9	
Protein		Anti tTG (IgA)		ANA	
Hb		AEM IgA (+/-)		ASMA	
HCT(%)		ESR			
PLT		CRP		IgG4	
WBC (%)		HIV		IgE	
PMN (%)		HCV Ab		Total IgG	
EO (%)		HBS Ag		γ - globulin	
25 OHD ₃				AMA	
INR				P-ANCA	
PT					
PTT					

Pancreatitis severity score	
0	0
1	1
2	2
3	3
4	4
5	5
6	6
7	7
8	8
9	9
10	10
11	11
12	12
13	13
14	14
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99	99
100	100

- | Pancreatitis severity score | |
|--|------------------|
| 1. SIRS score: 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ | |
| 2. BISAP score: 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ | 3. APACHE score: |
| 4. End organ failure (during first 24yr): PO ₂ <60 ☐ Cr≥1.9 ☐ Systolic BP<90 (refractory to hydration ☐
(Transient organ failure (<48 hr) ☐ ; Persistent organ failure (>48 hr) ☐ | |
| 5. Harmless criteria: yes ☐ (if lack of rebound tenderness /guarding, Hct <44% and cr<1.4 ☐ No ☐ | |

Date:	Bone Densitometry
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	Hip	Lumbar	Wrist	Femor	other
T-Score					
Z-Score					

[illegible]

- | Date: | Ultrasonography |
|---|----------------------------|
| 1. Gallstone ☐ (Largest Size (mm):; Number: 1-2 ☐ 3-4 ☐ ≥ 5 ☐ | |
| 2. CBD diameter (mm):; | |
| 3. CBD stone ☐ (Largest size (mm):; Number: 1-2 ☐ 3-4 ☐ ≥ 5 ☐ | |
| 4. Intrahepatic dilatation ☐ Hilar mass ☐ | 5. PV diameter (mm): |
| 6. Thrombosis ☐ (Portal vein ☐ Splenic vein ☐ SMV ☐ Hepatic vein ☐ IVC ☐ SMA portal vein ☐ | |
| 7. Pancreatic mass ☐ (Head ☐ Body ☐ Tail ☐ Neck ☐ Uncinate ☐ | |
| 8. Fatty liver grade 1 ☐ fatty liver grade 2 ☐ fatty liver grade 3 ☐ fatty liver grade 4 ☐ | |

Date: _____ Fibroscan _____

Fibrosis Score:
CAP Score:

[illegible]

Terminal ileum									
Date:									
Endoscopy									
Normal ☐ Abnormal ☐									
1. Tumor:									
• Location: Esophagus ☐ (Upper ☐ Middle ☐ Lower ☐ EGJ ☐ Stomach ☐ (Cardia ☐ Fundus ☐ Body ☐ Antrum ☐ Duodenum ☐ (Bulb ☐ D2 ☐ D3 ☐ Ampulla ☐									
• Size: (mm):									
• Other features: Ulcerative ☐ Fragile ☐ Circumferential ☐ Semi-circumferential ☐ Complete obstruction ☐ Partial obstruction ☐ Dilatation before EUS (with: Savary ☐ Ballon TTS ☐									
2. Polyp:									
• Location: Esophagus ☐ (Upper ☐ Middle ☐ Lower ☐ EGJ ☐ Stomach ☐ (Cardia ☐ Fundus ☐ Body ☐ Antrum ☐ Duodenum ☐ (Bulb ☐ D2 ☐ D3 ☐ Ampulla ☐									
3. Submucosal lesion:									
• Location: Esophaguses ☐ (Upper ☐ Middle ☐ Lower ☐ EGJ ☐ Stomatch ☐ (Cardia ☐ fundus ☐ Body ☐ Antrum ☐ Duodenuem ☐ (Bulb ☐ D2 ☐ D3 ☐ Ampulla ☐									
• Size: (mm):									
• Other Features: Normal Mucoca ☐ Fragile ☐ Umblicated ☐									
4. Other findings: Esophageal varice ☐ Fundal varice ☐ PHG ☐ Watermelon stomach ☐									
Date:									
MRI / CT Scan									
Type: CT scan ☐ MRI ☐									
- Mass Lesion:									
• Location: Pancreas ☐ (Uncinate ☐ Head ☐ Neck ☐ Body ☐ Tail ☐ Stamatch ☐ (Cardia ☐ Fundus ☐ Body ☐ Antrum ☐ Esophagus ☐ (Upper ☐ Middle ☐ Lower ☐ Ampulla ☐ Duodenum ☐ Gall bladder ☐ Distal CBD ☐ Hilar ☐ Liver ☐									
• Calcification ☐									
• Size (mm):									
• Metastasis ☐ (Liver ☐ Ascites ☐ Lung ☐									
• Lymphadenopathy ☐ (Mediastinal ☐ Celiac plexus ☐ Perigastric ☐ Peripancreatic ☐ Hilar ☐ Para-aortic ☐ other:									
• Vascular involvement: Aorta ☐ IVC ☐ Portal vein ☐ Celiac artery ☐ Hepatic artery ☐ SMA ☐ SMV ☐ Splenic artery ☐ Splenic vein ☐ other:									
✓ Type of vascular involvement: Abutment ☐ Encasement ☐ Invasion ☐ Thrombosis ☐ unknown ☐									
- Pancreas (non-tumoral) abnormalities:									
• Size of MPD (mm): Head: Body: Tail:									
• Pancreatic cyst: Unilocular ☐ Multilocular ☐ (Microcystic ☐ Macrocystic ☐ Solid-systic ☐ Mural nodule ☐ (With enhancement ☐ Without enhancement ☐ Wall thickness ☐ (With enhancement ☐ Without enhancement ☐ Calcification ☐ (Central ☐ Peripheral ☐ Size (mm):									
• Pancreatitis:									
1. Pancreatic enlargement ☐									
2. Peripancreatic inflammation ☐									
3. Peripancreatic fluid collection ☐ (1 ☐ ≥ 2 ☐									

4. Peripancreatic gas collection 5. Necrosis ☐ (<33% ☐ 33-50% ☐ > 50% ☐ • Other findings: WOPN ☐ Pseudocyst ☐ Calcification ☐ Atrophy ☐	
Date:	MRCP
CBD diameter (mm):; MPD diameter(mm): Head: Body: Tail: CBD stone ☐ (Largest size (mm):; Number: 1 ☐ 2-3 ☐ 3-4 ☐ ≥ 5 ☐ Gall stone ☐ (Largest size (mm):; Number: 1 ☐ 2-3 ☐ 3-4 ☐ ≥ 5 ☐ Biliary stricture ☐ (Location: Distal CBD ☐ Mid CBD ☐ Proximal CBD ☐ Hilar ☐ RHD ☐ LHD ☐ ; Size (mm):; Prestenotic dilatation ☐ ; Beading ☐ ; Prunding ☐ ; Diverticulum ☐ Pancreatic cyst: Unilocular ☐ Multilocular ☐ (Microcystic ☐ Macrocystic ☐ Solid-cystic ☐ PD-cyst connection ☐ Size: number: Others: Pancreas divisum ☐ Annular pancreas ☐ Biloma ☐	
- Submucosal lesion ☐	
• Location:	Esophagus ☐ (Lower ☐ Middle ☐ Upper ☐ Stomach ☐ (Cardia ☐ Fundus ☐ Body ☐ Antrum ☐ Duodenom ☐ (Bulb ☐ D2 ☐ Ampulla ☐ D3 ☐ Rectum ☐ other ☐ • Size (mm): Number: • Layer: Muscularis mucosa ☐ Submucosa ☐ Muscularis propria ☐ Serosal/Adventitia ☐ External effect ☐ (Due to: Spleen ☐ Spine ☐ Heart ☐ Pancreas ☐ Lymph node ☐ • Echo pattern: Isoechoic ☐ Hypoechoic ☐ Hyperechoic ☐ Anechoic ☐
- Pancreas (non-tumoral) ☐	
• Pancreatitis features ☐	
1. Paranchymal changes	Hyperechoic foci ☐ (with shadowing ☐ Without shadowing ☐ Stranding ☐ Cysts ☐ Lobularity ☐ (with honeycombing ☐ without honeycombing ☐ Elastography strain ratio: CE-EUS: Hypoenhance ☐ Hyperenhance ☐ Isoenhance ☐
2. Ductal changes:	MPD diameter (mm): Head: Body: Tail: Irregular MPD contour ☐ Dilated side branches ☐ Hyperechoic margin ☐ - MPD Stone ☐ Location: Head ☐ Body ☐ Tail ☐ Largest size (mm): Number: 1-2 ☐ 3-4 ☐ ≥ 5 ☐
3. Others:	Pancreas divisum ☐ Annular pancreas ☐
• Pancreatic cystic lesions ☐	
- Location:	Head ☐ Unilocular ☐ Body ☐ Tail ☐
- Morphology:	Unilocular ☐ Multilocular ☐ (Microcystic ☐ Macrocystic ☐ Solid-cystic ☐ Mural nodule ☐ Mucin ☐ Debris ☐ Thick septation ☐ size(mm): Thick wall ☐ size(mm): Calcification ☐ (Central ☐ Peripheral ☐
- CE-EUS of cyst wall/nodule:	Hyperenhance ☐ Isoenhance ☐ Hypoenhance ☐
- Elastography strain ratio:	
- Gross FNA fluid features:	String sign ☐
• Colour:	Clear ☐ Brown ☐ Bloody ☐
• EUS needle:	FNA ☐ (19G ☐ 22G ☐ 25G ☐ FNB ☐ Pinch biopsy ☐
- Anorectal (non-tumoral) lesion ☐	
• IAS thickness (mm):; EAS thickness (mm):	
• IAS defect ☐ (Size (mm):; Location: Ant ☐ Lat ☐ Post ☐	
• IAS defect ☐ (Size (mm):; Location: Ant ☐ Lat ☐ Post ☐	
• Abscess ☐ (Largest size (mm):; Number:)	

• Fistula ☐ (Location: Transsphincteric ☐ Extrasphincteric ☐ Recto vaginal ☐ Others:; Number:)

Interventional EUS

- Drainage ☐ (Biliary ☐ Pancreatic duct ☐)
- Pancreatic cystic drainage ☐
- Celiac plexus neurolysis ☐ Celiac plexus block ☐ (Bupropion ☐ Lidocaine ☐ Etonol ☐)
- Fine needle injection ☐ (Alcohol ☐ Paxitaxol ☐ Others) RFA ☐
- Pancreatic necrosis debridement ☐

Complications of EUS

Abdominal pain ☐ Pancreatitis ☐ Luminal GIB ☐
Intracystic bleeding ☐ Cyst infection ☐
Cardio-pulmonary arrest ☐ Mortality due to EUS complications ☐ (..... days after

Post ERCP/EUS drugs

Supp NSAIDs (Before ☐ , After ☐)
Serum: Ringer ☐ , Ringer lactate ☐ , Normal saline ☐; Vol during first 8 hr: 1lit ☐ 2lit ☐ 3lit ☐
Pear TNG ☐ Octreotide ☐ (Dose (mg/d):)
NAC after ERCP ☐
Antibiotic ☐ (Ceftriaxone ☐ Ciprofloxacin ☐ Metronidazole ☐ Meropenem/Imipenem ☐)

Sedation for ERCP/EUS

1. Drugs: Midazolam ☐ Fentanyl ☐ Propofol ☐ Ketamine ☐ Others:
2. Hypoxemia (O₂ sat<90%) ☐ (Duration: <5min ☐ 5-10min ☐ >10min ☐)
3. Hypotension (BP <90/60) ☐ (Duration: <5min ☐ 5-10min ☐ >10min ☐)
4. Cardiac arrest necessitate CPR ☐

Date: _____ ERCP									
1. Patient's information: Registry ID number: _____ Site of registry: First name: _____ Last name: _____									
2. Indication for ERCP: CBD stone ☐ Hilar stricture ☐ Stricture of distal CBD ☐ Bile leak ☐ Periampullary tumor ☐ Parasitic infestation ☐ PD stricture ☐ PD stone ☐ CBD dilation ☐									
- ERCP was: Successful ☐ Unsuccessful ☐ - Manipulation time around papillary orifice: <5 min ☐ 5-10 min ☐ >10 min ☐ - Number of cannulation attempts: 5 ☐ 5-10 ☐ >10 ☐ - ERCP difficulty grading: 1 ☐ 2 ☐ 3 ☐ - Duration of ERCP: <20 min ☐ 20-60 min ☐ >60 min ☐									
Major papilla features: Normal ☐ Small ☐ Long ☐ Bulging ☐ Tumoral ☐ Preuious sphinctero tomy ☐ Periampullary diverticulum ☐									
Minor papilla features: Normal ☐ Edematous ☐									
CBD findings: CBD diameter (mm): 1-5 ☐ 5-10 ☐ 11-15 ☐ 16-20 ☐ >20 ☐ Choledochal cyst ☐ Type: 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ Biliary stone ☐ Largest size (mm): <10 ☐ 10-15 ☐ 15-20 ☐ >20 ☐ Number: 1-2 ☐ 3-5 ☐ >5 ☐ color: Yellow ☐ black ☐ brown ☐									
Biliary sludge ☐ sludge extraction: successful ☐ unsuccessful ☐									
Biliary stricture ☐ Location: Distal CBD ☐ Mid CBD ☐ Proximal CBD ☐ Hilar ☐ intrahepatic ☐									
Papillary fibrosis/stenosis ☐ SOD ☐ Beading ☐ diverticulum ☐ Multifocal strictures ☐ Prunding ☐									
Bile leak ☐ Location: CBD ☐ Cystic duct stump ☐ Luschka ☐ Prunding ☐									
Worm infestation ☐ Ascaris ☐ Hydatic membrane ☐ Intrahepatic dilation ☐									
PD findings: PD stone ☐ Largest size (mm): 1-4 ☐ 5-10 ☐ >10 ☐ Number: 1-2 ☐ 3-4 ☐ ≥5 ☐									
PD leakage ☐ Head ☐ Body ☐ Tail ☐									
PD diameter (mm): 1-3 ☐ 4-6 ☐ 7-10 ☐ >10 ☐									
Gallbladder opacified Filling defect in cystic duct ☐ Filling defect in GB ☐									
Cannulation approach Standard sphincterolomy ☐ Difficult cannulation ☐ Primary NKF ☐									
Secondary NKF ☐ Precult papillotomy ☐ Trans-sphincteric sphicterolomy ☐									
Double guide wire technique ☐ Intramucosal incision ☐ Non successful ☐									

Sphincterotomy:	Full size ☐	Mid-size ☐
Electrocautery current:	Blended current ☐	Pure coagulation current ☐
Ballon dilation of sphineter of oddi:	Dilation of intact sphineter ☐	
	Size of ballon (mm): 6-8 ☐ 8-10 ☐ 10-12 ☐ 12-15 ☐ 15-18 ☐ 18-20 ☐	
Biliary Stent:	Plastic ☐	FCSEMS ☐ UCSEMS ☐ PCSEMS ☐
	Number: 1 ☐ 2 ☐ 3 ☐ 4 ☐	Size (fr /cm):
Pancreatic stent:	Number: 1 ☐ 2 ☐ 3 ☐	Size (fr /cm):
Naso biliary catheter	☐	
CBD stone extraction with:	Balloon ☐	Basket ☐ Mechanical lithotripsy ☐
Pancreatic endotherapy:	ESWL ☐	Stone extraction ☐ With: balloon ☐ basket ☐
Tissue sampling:	Brush cytology ☐	From biliary stricture ☐ From pancreatic stricture ☐
	With negative pressure ☐	Blind BX stricture ☐
PD entrance:	PD guide wire entrance ☐	Number of episodes: 1 ☐ 2 ☐ ≥3 ☐
	PD injection ☐	Visible side branches seen ☐
Contrast drainage after ERCP:	Complete ☐	Partial ☐ Failed ☐
Minor papilla cannulation:	Minor papilla sphincterotomy ☐ Minor papilla stenting ☐	
Stricture dilation:	balloon TTS 6-8 ☐ Savary ☐ Balloon max force 4 ☐ Balloon max force 6 ☐	
Treatments during ERCP:	Adrenalin injection ☐ APC ☐ Adrenalin spray ☐ PTD ☐ hemoclips ☐ RFA ☐	
Probability for PEP:	Low ☐ Moderate-high ☐	Age <40 years and non-dilated CBD ☐ Female and age <40 year ☐
		Difficult cannulation ☐ Previous sphincterctomy ☐
		≥ 2 guide wire entrance into PD ☐ Past history of PEP ☐
		Recent history of acute pancreatitis ☐ SOD ☐
Post ERCP drugs:		
Supp NSAIDs: (Before ☐ After ☐)	Pear TNG ☐	Octceotide ☐ (Dose (mg/dl):)
	NAC ☐	Melatonin ☐ Somatostatin ☐
Antibiotic:	Ceftriaxone ☐	Ciprofloxacin ☐ Metronidazole ☐ Meropenem/lmipenem ☐
	Other:	
Serum :	Ringer ☐	Ringer lactate ☐ Normal saline ☐
Vol during first 8hr:	1 lit ☐	2 lit ☐ 3 lit ☐
Complications:		
pancreatitis ☐	Type: Mild ☐	Mod ☐ Severe ☐
Bleeding ☐	Type: Mild ☐	Mod ☐ Severe ☐
Perforation ☐	Type: Type 1 ☐	Type 2 ☐ Type 3 ☐ Esophagus ☐
Gas embolism ☐	Cholangitis ☐	cholecystitis ☐ pneumonia ☐ Sepsis ☐
Other:		

Medical Follow Up								
Date								
Lab								
AST								
ALT								
ALP								
Bili (T)								
γ-GT								
Albumin								
Hb								
PIT								
INR								
Cr								
IgG4								
CA19-9								
MELD score								
Drug /dose								

* 1. UDCA 2. Fenofibraie 3. Ofloxacin 4. Ciprofloxacin 5. Azithromycin 6. Prednisolone 7. Mesalamine
8. Azathioprine 9. Other

Date:

Follow Up after EUS/ERCP

Day	Pain/Score (1-10)	Overt GIB	BP	PR	Tem	Amylase	Lipase	Hb	WBC	BUN	Cr	CRP	P.C. unit transfused	FFP Unit transfused	PLT unit transfused	PTC Drainage	Surgery*	Complication**	Death
1	0hr																		
	4hr																		
	12hr																		
2																			
3																			
4																			
5																			

* For 1. Perforation 2. Necrosectomy 3. Bleeding 4. Cholecystectomy 5. CBD exploration

** 1. Pancreatitis ☐ (mild ☐ mod ☐ severe ☐) 2. Bleeding ☐ (mild ☐ mod ☐ severe ☐) 3. Perforation ☐ (type 1 ☐ type 2 ☐ type3 ☐ esophagus ☐) 4. Gas embolism ☐

5. Cholangitis ☐ 6. cholecystitis ☐ 7. Pneumonia ☐ 8. Sepsis ☐

Date:		Cytopathology						
Sampling route	Report	(1) Location	(2) Report of cytopathology	(3) Grade of malignancy	(4) Surgical staging	(4) Ancillary Studies	IgG 4+cell/HPF	FISH
ROSE	1							
	2							
	3+							
Etanol fixed cytology	1							
	2							
	3+							
Cell block preparation	1							
	2							
	3+							
FNB	1							
	2+							
Brush cytology	1							
	2							
	3+							
Forceps biopsy	1							
	2							
	3+							
Surgical biopsy	1							
	2+							

(1)

1. Pancreas ☐ (Mass ☐ Cyst ☐ Paranchyma ☐)
2. Lymph-node ☐
3. Biliary stricture ☐
4. Ampulla ☐
5. Liver ☐
6. Colon ☐ (Rectum ☐ Descending ☐ Transverse ☐ Ascending ☐ Cecum ☐)
7. Ileum ☐
8. Duodenum ☐

(2)

1. Non-diagnostic
2. Atypical cells☐
3. Suspicious for malignancy ☐
4. Malignant ☐ (Adenocarcinoma ☐ NET ☐ Lymphoma ☐ Metastasis ☐ Adenoma ☐ Others:)
5. IBD ☐
6. Microscopic colitis ☐ (Lymphocytic colitis ☐ Collagenous colitis ☐)
7. Duodenal mucosal pathology ☐ Marsh1 ☐ Marsh2 ☐ Marsh3 ☐

(3)

1. Poorly differentiated ☐
2. Moderately differentiated ☐
3. Well differentiated ☐

(4)

1. Number of excised lymphnodes:;
Number of involved lymphnodes:
2. T Staging: T1 ☐ T2 ☐ T3 ☐ T4 ☐
3. Margin involvement: R0 ☐ R1 ☐ R2 ☐
4. Lymphovascular involvement ☐
5. Neural involvement ☐

(5)

1. IHC staining positive for: KRAS ☐ SMAD4 ☐ CDX2 ☐ MUC1 ☐ CK7 ☐ CK8 ☐ CK18 ☐ K19 ☐ Maspin ☐ MUC5AC ☐ B-Catenin ☐
2. Molecular studies positive for: KRAS ☐ VHL ☐ APC ☐ HER2 ☐ CDKN2A ☐ PTCH ☐ PTEN ☐ TP53 ☐
3. Positive mucin stain ☐ (Mucicarmin ☐ Alcian blue ☐)