



## Australasian Pelvic Floor Procedure Registry

## Data Dictionary

Version 2.0

July 11, 2024

Date	Version	Description of changes
31 March 2023	1.0	Initial version
11 July 2024	2.0	Major updates to the database structure to streamline data entry

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#### 1 Registration Form

#### 1.1 Record ID

**Description:** This identifier is auto-generated and updated by the system which is combination of

individual patient ID and Hospital/site ID.

Field Name: patient\_site\_record\_id

Purpose: Registration Requirement

**Data Collection:** Always Collected

Auto-generated

**Data Obligation:** Mandatory

Permitted Values: Text format

Data Source, Standard/ Terminology:

N/A

#### 1.2 Did the patient visit the same HOSPITAL in the past?

**Description:** The system auto-updates this identifier when the data is saved. The system checks if

there is an existing record with the same patient names, dob, and hospital.

Field Name: reg\_is\_prev\_patient

**Purpose:** Operational Requirement. To count the number of unique patients within the hospital.

**Data Collection:** Always Collected

Auto-generated

**Data Obligation:** Optional

**Permitted Values:** 

Code Description

1 Yes

0 No

Data Source, Standard/Terminology:

N/A

#### 1.3 Date the Registration form is created

**Description:** An auto-generated date field, that records the date the Record ID was created. Can be

used to analyse patient record numbers over time.

Field Name: pt\_record\_created

**Purpose:** Operational Requirement. To count the number of records created within a specific

date.

**Data Collection:** Always Collected

Auto-generated

**Data Obligation:** Mandatory

Permitted Values: Date (DD/MM/YYYY)

**Data Source, Standard/Terminology:** 

N/A

#### 1.4 First Name

**Description:** The person's identifying name(s) within the family group or by which the person is

socially identified, as represented by text.

Field Name: pt\_firstname

Purpose: Registration Requirement

**Data Collection:** Always Collected

Entered by Hospital staff/Surgeon

**Data Obligation:** Mandatory

Permitted Values: Text format

Data Source, Standard/ Terminology:

METEOR identifier: 613340 / Australian Institute of Health and Welfare (AIHW)

#### 1.5 Last Name

**Description:** The name a person has in common with some other members of their family, as

represented by text. It is often hereditary, and is distinguished from that person's first

given name.

Field Name: pt\_lastname

**Purpose:** Registration Requirement

**Data Collection:** Always Collected

Entered by Hospital staff/Surgeon

**Data Obligation:** Mandatory

Permitted Values: Text format

**Data Source, Standard/Terminology:** 

METEOR identifier: 613331 / Australian Institute of Health and Welfare (AIHW)

#### 1.6 Date of Birth

**Description:** Patient's date of birth

Field Name: pt\_dob

**Purpose:** Registration Requirement

**Data Collection:** Always Collected

Entered by Hospital staff/Surgeon

**Data Obligation:** Mandatory

Permitted Values: Date (DD/MM/YYYY) between 1910-01-01 and today

Data Source, Standard/ Terminology:

METEOR identifier: 287007 / Australian Institute of Health and Welfare (AIHW)

#### 1.7 Age at time of Registration

**Description:** The person's age (completed) in years at time of registration.

Field Name: pt\_age

Purpose: Consent

**Data Collection:** Always Collected

Derived from 'Date Record Created' and the 'Date of Birth'

Derived/Calculated Value

**Data Obligation:** Optional

Permitted Values: round(datediff([pt\_record\_created], [pt\_dob], "y"),2)

Data Source, Standard/ Terminology:

METEOR identifier: 303794 / Australian Institute of Health and Welfare (AIHW)

#### 1.8 Individual Health Identifier (IHI):

**Description:** The numerical identifier that uniquely identifies each individual in the Australian

healthcare system.

Field Name: pt\_ihi

Purpose: Linking with other Health Services

**Data Collection:** Conditional Collection

Entered by Hospital staff/Surgeon

Collected When: [rct\_status] <> '6'

**Data Obligation:** Optional

Permitted Values: Integer Number

Data Source, Standard/Terminology:

METEOR identifier: 432495 / Australian Institute of Health and Welfare (AIHW)

#### 1.9 Country list

**Description:** The country in which the person was born.

Field Name: pt\_birth\_country\_list

Purpose: Registration Requirement

**Data Collection:** Conditional Collection

Entered by Hospital staff/surgeon

Collected When: [rct\_status] <> '6'

**Data Obligation:** Optional

**Permitted Values:** 

Code	Description
1101	Australia
1201	New Zealand
2102	England
8104	United States of America
6101	China
3207	Greece
3104	Italy
7103	India
3307	Poland
5105	Vietnam
99	Other

#### **Data Source, Standard/Terminology:**

METEOR identifier: 269686/ Australian Institute of Health and Welfare (AIHW)

#### 1.10 Country of Birth - Other

**Description:** The country in which the person was born if not listed in the above list.

Field Name: pt\_birth\_country\_other

**Purpose:** Registration Requirement

**Data Collection:** Conditional Collection

Entered by Hospital staff/Surgeon only if 'Other' is selected.

Collected When: [pt\_birth\_country\_list]='99'

**Data Obligation:** Optional

Permitted Values: Text format

Data Source, Standard/ Terminology:

METEOR identifier: 269686/ Australian Institute of Health and Welfare (AIHW)

#### 1.11 Patient Preferred Language

**Description:** The language most preferred by the person for communication, as represented by a

code for the parent or Guardian.

Field Name: pt\_language

Purpose: Consent

**Data Collection:** Conditional Collection

Entered by Hospital staff/Surgeon

Default Value is "1201"

Collected When: [rct\_status] <> '6'

**Data Obligation:** Mandatory

**Permitted Values:** 

Code	Description
1201	English
2201	Greek
2401	Italian
4202	Arabic
7104	Mandarin/Cantonese
5203	Hindi

3602 Polish

4301 Turkish

6302 Vietnamese

99 Other

#### Data Source, Standard/Terminology:

METEOR identifier: 659407/ Australian Bureau of Statistics 2016a. Australian Standard Classification of Languages (ASCL) 2016. ABS cat. no.1267.0. Canberra: ABS Ref: https://www.abs.gov.au/statistics/classifications/australian-standard-classification-languages-ascl/latest-release

#### 1.12 Preferred Language Other

**Description:** The language in which the person prefers if not listed in the above list.

Field Name: pt\_language\_other

Purpose: Consent

**Data Collection:** Conditional Collection

Entered by Hospital staff/Surgeon

Collected When: [pt\_language] = '99'

Data Obligation: Optional

Permitted Values: Text format

#### Data Source, Standard/Terminology:

METEOR identifier: 659407/ Australian Bureau of Statistics 2016a. Australian Standard Classification of Languages (ASCL) 2016. ABS cat. no.1267.0. Canberra: ABS Ref: https://www.abs.gov.au/statistics/classifications/australian-standard-classification-languages-ascl/latest-release

#### 1.13 Is the patient of Aboriginal and/or Torres Strait Islander origin?

**Description:** Whether a person identifies as being of Aboriginal or Torres Strait Islander origin, as

represented by a code.

Field Name: pt\_aboriginal\_status

**Purpose:** Registration Requirement

**Data Collection:** Conditional Collection

Entered by Hospital staff/Surgeon

Collected When: [rct\_status] <> '6'

**Data Obligation:** Optional

**Permitted Values:** 

Code	Description
1	Yes
0	No
-9	Unknown or unsure

#### **Data Source, Standard/Terminology:**

METEOR identifier: 723676 / Australian Institute of Health and Welfare (AIHW)

#### 1.14 Capacity to consent to the Registry

**Description:** Patient's cognitive capacity to understand that their data is collection by the registry

as represented by a code.

Field Name: pt\_consent

Purpose: Consent

**Data Collection:** Conditional Collection

Entered by Hospital staff/Surgeon

Collected When: [rct\_status] <> '6'

**Data Obligation:** Mandatory

**Permitted Values:** 

Code	Description
1	Yes
2	NO - Recruited by Waiver
3	NO - Patient Under 18

#### **Data Source, Standard/Terminology:**

METEOR identifier: 338737/ Australian Institute of Health and Welfare (AIHW)

#### 1.15 Parent / Guardian Name:

**Description:** If the patient is Under 18, then Parent or guardian's full name as stated in medical

records.

Field Name: pt\_guardian\_name

**Purpose:** Registration Requirement

**Data Collection:** Conditional Collection

Entered by Hospital staff/Surgeon

Collected When: ([pt\_age]<18 or [pt\_consent] = '3') and [rct\_status] <> '6'

**Data Obligation:** Mandatory

Permitted Values: Text format

Data Source, Standard/ Terminology:

METEOR identifier: 613340, 613331 / Australian Institute of Health and Welfare

(AIHW)

#### 1.16 Patient Address Street Name

**Description:** The name of the road applicable to the address site or complex, as represented by

text where the patient normally resides, including house number (if applicable).

Field Name: pt\_street

Purpose: Registration Requirement

**Data Collection:** Conditional Collection

Entered by Hospital staff/Surgeon

Collected When: [rct\_status] <> '6'

**Data Obligation:** Mandatory

Permitted Values: Text format

Data Source, Standard/ Terminology:

METEOR identifier: 429747 / Australian Institute of Health and Welfare (AIHW)

#### 1.17 Patient Address Suburb Name

**Description:** The name of the locality/suburb of the address, as represented by text where the

patient normally resides.

Field Name: pt\_suburb

**Purpose:** Registration Requirement

**Data Collection:** Conditional Collection

Entered by Hospital staff/Surgeon

Collected When: [rct\_status] <> '6'

**Data Obligation:** Mandatory

Permitted Values: Text format

Data Source, Standard/Terminology:

METEOR identifier: 429889 / Australian Institute of Health and Welfare (AIHW).

#### 1.18 Patient Address State/Territory

**Description:** An identifier of the state or territory of an address where the patient normally resides,

as represented by a code.

Field Name: pt\_state

Purpose: Registration Requirement

**Data Collection:** Conditional Collection

Entered by Hospital staff/Surgeon

Collected When: [rct\_status] <> '6'

**Data Obligation:** Mandatory

**Permitted Values:** 

Code	Description
1	ACT
2	NSW
3	NT
4	QLD
5	SA
6	TAS
7	VIC

8 WA

0 Overseas

#### Data Source, Standard/ Terminology:

METeOR identifier: 722751 / Australian Institute of Health and Welfare (AIHW)

#### 1.19 Patient Address Postcode

**Description:** The Australian numeric descriptor for a postal delivery area for an address where the

patient normally resides.

Field Name: pt\_postcode

Purpose: Registration Requirement

**Data Collection:** Conditional Collection

Entered by Hospital staff/Surgeon

Collected When: [rct\_status] <> '6'

**Data Obligation:** Mandatory

Permitted Values: Australian Postal Code

Data Source, Standard/ Terminology:

METeOR identifier: 611398 / Australian Institute of Health and Welfare (AIHW)

#### 1.20 Patient Landline Phone Number

**Description:** The patient's contact home telephone number.

Field Name: pt\_landline

**Purpose:** Registration Requirement

**Data Collection:** Conditional Collection

Entered by Hospital staff/Surgeon

Collected When: [rct\_status] <> '6'

**Data Obligation:** Optional

Permitted Values: Australian Phone Number

**Data Source, Standard/Terminology:** 

METEOR identifier: 611164 / Australian Institute of Health and Welfare (AIHW)

#### 1.21 Patient Mobile Number

**Description:** The patient's contact mobile number.

Field Name: pt\_mobile

**Purpose:** Registration Requirement

**Data Collection:** Conditional Collection

Entered by Hospital staff/Surgeon

Collected When: [rct\_status] <> '6'

**Data Obligation:** Optional

Permitted Values: Australian Phone Number

Data Source, Standard/ Terminology:

METEOR identifier: 270266 / Australian Institute of Health and Welfare (AIHW)

#### 1.22 Email

**Description:** The patient's electronic internet contact address, used for communication purposes,

as represented by text.

Field Name: pt\_email

**Purpose:** Registration Requirement

**Data Collection:** Always Collected

Entered by Hospital staff/Surgeon

**Data Obligation:** Optional

Permitted Values: Email Address

**Data Source, Standard/Terminology:** 

METEOR identifier: 452649 / Australian Institute of Health and Welfare (AIHW)

#### 2 Diagnosis/Assessment Form

#### 2.1 Date the Diagnosis form is created

**Description:** An auto-generated date field, that records the date the diagnosis form was first

opened and saved. Can be used to analyse diagnosis record numbers over time.

Field Name: df\_date\_created

**Purpose:** Operational Requirement. To count the number of records created within a specific

date.

**Data Collection:** Always Collected

Auto-generated

Data Obligation: Optional

Permitted Values: Date (DD/MM/YYYY)

**Data Source, Standard/Terminology:** 

N/A

#### 2.2 Diagnosis/ Indication for Surgery

**Description:** Clinical diagnosis for the procedure performed.

Field Name: df\_diagnosis

Purpose: Assessment/Diagnostic Info

**Data Collection:** Always Collected

Entered by Hospital/Surgeon

**Data Obligation:** Mandatory

**Permitted Values:** 

Code	Description
1	SUI
2	POP
3	POP+SUI

#### Data Source, Standard/Terminology:

https://www.ics.org/glossary/symptom/stressurinaryincontinence?q=Stress%20Urinary% 20Incontinence, (Used in BSUG, BAUS, TVT, DUD, Swedish GYNop, SDD, TMR, VIGI-MESH, PMD)

#### 2.3 Is this the first surgery/procedure to treat this diagnosis?

**Description:** Clinical indication if this is the first or subsequent procedure performed

Field Name: df\_procedure\_type

Purpose: Assessment/Diagnostic Info

**Data Collection:** Always Collected

Entered by Hospital staff/Surgeon

**Data Obligation:** Mandatory

**Permitted Values:** 

Code Description
 Yes (Primary Procedure)
 No (Subsequent Procedure)

Data Source, Standard/ Terminology:

N/A

#### 2.4 Recurrence or Management of complications including Mesh Removal

**Description:** Indication whether it is to manage recurrence of condition or to manage

complications of the previous procedure.

Field Name: df\_subsequent\_type

**Purpose:** Assessment/Diagnostic Info

**Data Collection:** Conditional Collection

Entered by Hospital staff/Surgeon

Collected When: [df\_procedure\_type] = '0'

**Data Obligation:** Mandatory

**Permitted Values:** 

Code	Description
1	Procedure to manage recurrence (after initial or no improvement)
2	Management of a complication from a procedure (Including Mesh Removal)
3	Asymptomatic/ Patient Request for mesh removal

#### **Data Source, Standard/Terminology:**

N/A

#### 2.5 POP Anterior

**Description:** A point that represents the most distal (i.e., most dependent) position of any part of

the upper anterior vaginal wall from the vaginal cuff or anterior vaginal fornix to point Aa. By definition, point Ba is at -3 cm in the absence of prolapse and would have a positive value equal to the position of the cuff in women with total posthysterectomy

vaginal eversion.

Field Name: df\_pop\_anterior

Purpose: Assessment/Diagnostic Info

**Data Collection:** Always Collected

Entered by Hospital staff/Surgeon

**Data Obligation:** Optional

Permitted Values: Number between -3 and 10

**Data Source, Standard/Terminology:** 

Reference: Haylen BT, Maher CF, Barber MD, Camargo SFM, Dandolu V, Digesu A, Goldman HB, Huser M, Milani A, Moran P, Schaer GN, Withagen MI. An International Urogynecological Association (IUGA) / International Continence Society (ICS) Joint Report on the Terminology for Female Pelvic Organ Prolapse (POP). Int Urogynecol

J,2016, 27(2):165-194; Erratum,2016, 27(4): 655-684; Neurourol

Urodyn,2016,35(2):137-168.

#### 2.6 POP Anterior Calc

**Description:** Ordinal staging of anterior compartment (0-3), based on POP Anterior

Field Name: df\_pop\_anterior\_calc

**Purpose:** Assessment/Diagnostic Info

**Data Collection:** Always Collected

Derived/Calculated Value

**Data Obligation:** Optional

**Permitted Values:** Stage 0/1, Stage 2, or Stage 3

**Data Source, Standard/Terminology:** 

Reference: Haylen BT, Maher CF, Barber MD, Camargo SFM, Dandolu V, Digesu A, Goldman HB, Huser M, Milani A, Moran P, Schaer GN, Withagen MI. An International Urogynecological Association (IUGA) / International Continence Society (ICS) Joint Report on the Terminology for Female Pelvic Organ Prolapse (POP). Int Urogynecol J,2016, 27(2):165-194; Erratum,2016, 27(4): 655-684; Neurourol Urodyn,2016,35(2):137-168.

#### 2.7 POP Posterior

**Description:** Diagnosis point that represents the most distal (i.e., most dependent) position of any

part of the upper posterior vaginal wall from the vaginal cuff or poste- rior vaginal fornix to point Ap. By definition, point Bp is at-3 cm in the absence of prolapse and would have a positive value equal to the position of the cuff in a woman with total

posthysterectomy vaginal eversion.

Field Name: df\_pop\_posterior

Purpose: Assessment/Diagnostic Info

**Data Collection:** Always Collected

Entered by Hospital staff/Surgeon

**Data Obligation:** Optional

Permitted Values: Number between -3 and 10

Data Source, Standard/ Terminology:

Reference: Haylen BT, Maher CF, Barber MD, Camargo SFM, Dandolu V, Digesu A, Goldman HB, Huser M, Milani A, Moran P, Schaer GN, Withagen MI. An International Urogynecological Association (IUGA) / International Continence Society (ICS) Joint Report on the Terminology for Female Pelvic Organ Prolapse (POP). Int Urogynecol

J,2016, 27(2):165-194; Erratum,2016, 27(4): 655-684; Neurourol

Urodyn,2016,35(2):137-168.

#### 2.8 POP Posterior Calc

**Description:** Ordinal staging of posterior compartment (0-3), based on POP Posterior

Field Name: df\_pop\_posterior\_calc

Purpose: Assessment/Diagnostic Info

**Data Collection:** Always Collected

Derived/Calculated Value

Data Obligation: Optional

**Permitted Values:** Stage 0/1, Stage 2, or Stage 3

#### **Data Source, Standard/Terminology:**

Reference: Haylen BT, Maher CF, Barber MD, Camargo SFM, Dandolu V, Digesu A, Goldman HB, Huser M, Milani A, Moran P, Schaer GN, Withagen MI. An International Urogynecological Association (IUGA) / International Continence Society (ICS) Joint Report on the Terminology for Female Pelvic Organ Prolapse (POP). Int Urogynecol J,2016, 27(2):165-194; Erratum,2016, 27(4): 655-684; Neurourol Urodyn,2016,35(2):137-168.

#### 2.9 POP Apical

**Description:** A point that represents either the most distal (i.e., most dependent) edge of the cervix

or the leading edge of the vaginal cuff (hysterectomy scar) after total hysterectomy

Field Name: df\_pop\_apical

Purpose: Assessment/Diagnostic Info

**Data Collection:** Always Collected

Entered by Hospital staff/Surgeon

Data Obligation: Optional

Permitted Values: Number between -10 and 10

**Data Source, Standard/Terminology:** 

Reference: Haylen BT, Maher CF, Barber MD, Camargo SFM, Dandolu V, Digesu A, Goldman HB, Huser M, Milani A, Moran P, Schaer GN, Withagen MI. An International Urogynecological Association (IUGA) / International Continence Society (ICS) Joint Report on the Terminology for Female Pelvic Organ Prolapse (POP). Int Urogynecol

J,2016, 27(2):165-194; Erratum,2016, 27(4): 655-684; Neurourol

Urodyn,2016,35(2):137-168.

#### 2.10 POP Apical Calc

**Description:** Ordinal staging of apical compartment (0-4), based on POP Apical

Field Name: df\_pop\_apical\_calc

**Purpose:** Assessment/Diagnostic Info

**Data Collection:** Always Collected

Derived/Calculated Value

**Data Obligation:** Optional

**Permitted Values:** Stage 0/1, Stage 2, or Stage 3

Data Source, Standard/ Terminology:

Reference: Haylen BT, Maher CF, Barber MD, Camargo SFM, Dandolu V, Digesu A, Goldman HB, Huser M, Milani A, Moran P, Schaer GN, Withagen MI. An International Urogynecological Association (IUGA) / International Continence Society (ICS) Joint Report on the Terminology for Female Pelvic Organ Prolapse (POP). Int Urogynecol J,2016, 27(2):165-194; Erratum,2016, 27(4): 655-684; Neurourol Urodyn,2016,35(2):137-168.

#### 2.11 POP Apex/Fornix

**Description:** The status of the apex (the uppermost part) or the fornix (the arch-like space) of the

vagina during an evaluation for Pelvic Organ Prolapse (POP). It assesses the degree of

prolapse present at these anatomical sites.

Field Name: df\_pop\_apex

Purpose: Assessment/Diagnostic Info

**Data Collection:** Always Collected

Entered by Hospital staff/Surgeon

Data Obligation: Optional

Permitted Values: Number between -10 and 10

**Data Source, Standard/Terminology:** 

Reference: Haylen BT, Maher CF, Barber MD, Camargo SFM, Dandolu V, Digesu A, Goldman HB, Huser M, Milani A, Moran P, Schaer GN, Withagen MI. An International Urogynecological Association (IUGA) / International Continence Society (ICS) Joint Report on the Terminology for Female Pelvic Organ Prolapse (POP). Int Urogynecol

J,2016, 27(2):165-194; Erratum,2016, 27(4): 655-684; Neurourol

Urodyn,2016,35(2):137-168.

#### 2.12 Bowel symptoms/ Obstruction

**Description:** Obstructed defecation: incomplete evacuation of fecal contents from rectum due to

physical blockage of the fecal stream during defecation attempts. It includes symptoms such as straining to defecate, sensation of blockage, digitation, and

splinting.

Field Name: df\_obstruction

Purpose: Risk adjustment

**Data Collection:** Conditional Collection

Entered by Hospital staff/Surgeon

Collected When: ([df\_diagnosis]='2' or [df\_diagnosis]='3') and ([df\_procedure\_type]='1'

or [df\_subsequent\_type] = '1')

**Data Obligation:** Optional

**Permitted Values:** 

Code	Description
1	Yes
0	No

#### **Data Source, Standard/Terminology:**

https://www.ics.org/glossary/diagnosis/obstructeddefecationsyndrome?q=bowel

#### 2.13 Dyspareunia

**Description:** Complaint of persistent or recurrent pain or discomfort associated with attempted or

complete vaginal penetration.

Field Name: df\_dyspareunia

**Purpose:** Assessment/Diagnostic Info

**Data Collection:** Conditional Collection

Entered by Hospital staff/Surgeon

Collected When: ([df\_procedure\_type]='1' or [df\_subsequent\_type]='1')

Data Obligation: Optional

**Permitted Values:** 

Code	Description
1	Yes
0	No
2	Not sexually active
-9	Unknown

#### **Data Source, Standard/Terminology:**

https://www.ics.org/glossary/symptom/dyspareunia?q=dyspareunia , ACSQHC credentialing guidance relating to patient outcome monitoring and reporting

#### 2.14 Pelvic pain

**Description:** The complaint of pain perceived to arise in the pelvis, not associated with symptoms

suggestive of lower urinary tract, sexual, bowel, or gynecological dysfunction. It is less

well defined than the above types of localized pain.

Field Name: df\_pelvic\_pain

Purpose: Assessment/Diagnostic Info

**Data Collection:** Conditional Collection

Entered by Hospital staff/Surgeon

Collected When: ([df\_procedure\_type]='1' or [df\_subsequent\_type]='1')

Data Obligation: Optional

**Permitted Values:** 

Code	Description	
1	Yes	
0	No	

#### Data Source, Standard/Terminology:

Haylen BT, de Ridder D, Freeman RM, Swift SE, Berghmans B, Lee J, Monga A, Petri E, Rizk DE, Sand PK, Schaer GN; International Urogynecological Association; International Continence Society. An International Urogynecological Association (IUGA)/International Continence Society (ICS) joint report on the terminology for female pelvic floor dysfunction. Neurourol Urodyn. 2010;29(1):4-20. doi: 10.1002/nau.20798. PMID: 19941278.

#### 2.15 Recurrent UTI

**Description:** Recurrent urinary tract infections (UTI): A diagnosis by clinical history assisted by the

results of diagnostic tests involves the determination of the occurrence of at least three symptomatic and medically diagnosed urinary tract infections (UTI) over the

previous 12 months

Field Name: df\_recurrent\_uti

Purpose: Assessment/Diagnostic Info

**Data Collection:** Conditional Collection

Entered by Hospital staff/Surgeon

Collected When: ([df\_procedure\_type]='1' or [df\_subsequent\_type]='1')

**Data Obligation:** Optional

#### **Permitted Values:**

Code	Description
1	Yes
0	No

#### Data Source, Standard/Terminology:

https://www.ics.org/glossary/diagnosis/possibleprolapserelateddiagnoses?q=voiding% 20dysfunction#:~:text=Recurrent%20urinary%20tract%20infections , ACSQHC credentialing guidance relating to patient outcome monitoring and reporting

#### 2.16 Voiding Dysfunction

**Description:** A diagnosis by symptoms and urodynamic investigations that is defined as abnormally

slow and/or incomplete micturition, based on abnormal slow urine flow rates and/or abnormally high post void residuals, ideally on repeated measurement to confirm

abnormality.

Field Name: df\_voiding\_dysfunc

Purpose: Assessment/Diagnostic Info

**Data Collection:** Conditional Collection

Entered by Hospital staff/Surgeon

Collected When: ([df\_procedure\_type]='1' or [df\_subsequent\_type]='1')

Data Obligation: Optional

**Permitted Values:** 

Code	Description
1	Yes
0	No
-9	Unknown

#### Data Source, Standard/Terminology:

https://www.ics.org/glossary/diagnosis/possibleprolapserelateddiagnoses?q=voiding%20 dysfunction, ACSQHC credentialing guidance relating to patient outcome monitoring and reporting

#### 2.17 Does patient require a catheter?

**Description:** Whether urinary catheter is required to manage voiding dysfunction; used as a safety

and risk adjustment variable

Field Name: df\_require\_catheter

Purpose: Risk adjustment

**Data Collection:** Conditional Collection

Entered by Hospital staff/Surgeon

Collected When: [df\_voiding\_dysfunc] = '1'

**Data Obligation:** Optional

**Permitted Values:** 

Code Description

1 Yes

0 No

Data Source, Standard/ Terminology:

N/A

#### 2.18 Overactive Bladder

**Description:** Complaint of Urinary urgency, usually accompanied by increased daytime frequency

and/or nocturia, with urinary incontinence (OAB-wet) or without (OAB-dry), in the

absence of urinary tract infection or other detectable disease.

Field Name: df\_oab

Purpose: Risk adjustment

**Data Collection:** Conditional Collection

Entered by Hospital staff/Surgeon

Collected When: ([df\_procedure\_type]='1' or [df\_subsequent\_type]='1')

**Data Obligation:** Optional

**Permitted Values:** 

Code	Description
1	Yes
0	No
-9	Unknown

#### Data Source, Standard/ Terminology:

https://www.ics.org/glossary/symptom/overactive bladder oaburgency syndrome ? q=Overactive % 20 bladder

#### 2.19 Indication for treatment of complication

**Description:** Indication for treatment of complications

Field Name: df\_comp\_indxn

Purpose: Assessment/Diagnostic Info

**Data Collection:** Conditional Collection

Entered by Hospital staff/Surgeon

Collected When: [df\_procedure\_type] = '0' and [df\_subsequent\_type] = '2'

Data Obligation: Optional

**Permitted Values:** 

Code	Description
1	Pain/ Tenderness
2	Vaginal bleeding
3	Mesh exposure/ Erosion/ Extrusion
4	Organ/ tissue injury
5	Urethral obstruction
7	Discharge
8	Fistula formation
9	Recurrent UTI
10	Overactive bladder syndrome
99	Other
6	MCCS Coded Complication

#### **Data Source, Standard/Terminology:**

ACSQHC credentialing guidance relating to patient outcome monitoring and reporting. REF: <a href="https://www.safetyandquality.gov.au/sites/default/files/migrated/">https://www.safetyandquality.gov.au/sites/default/files/migrated/</a> Credentialing-of-Senior-Medical-Practitioners-to-Undertake-Transvaginal-Mesh-Impla nt-Surgery-for-Pelvic-Organ-Prolapse.pdf

#### 2.20 Site of Pain

**Description:** Subclassification of Complication Categories to specify location of pain symptoms and

associated provocatory activity

Field Name: df\_comp\_pain\_site

Purpose: Assessment/Diagnostic Info

**Data Collection:** Conditional Collection

Entered by Hospital staff/Surgeon

Collected When: [df\_comp\_indxn(1)] = '1'

**Data Obligation:** Optional

**Permitted Values:** 

Code	Description
2	Vaginal
1	Groin
4	Pubic
3	Pelvic

#### Data Source, Standard/Terminology:

IUGA/ICS Joint Terminology and Classification of Complications Related Directly to the Insertion of Prostheses (Meshes, Implants, Tapes) or Grafts In Female Pelvic Floor Surgery, REF: https://www.ics.org/complication

#### 2.21 Organ/Tissue injury

**Description:** The organ or tissue that was injured as a results of the procedure.

Field Name: df\_tissue\_injury

Purpose: Assessment/Diagnostic Info

Data Collection: Conditional Collection

Entered by Hospital staff/Surgeon

Collected When: [df\_comp\_indxn(4)] = '1'

Data Obligation: Optional

# Permitted Values: Code Description 1 Urethral 2 Bladder 3 Vaginal

#### Data Source, Standard/Terminology:

4

5

6

**Bowel** 

Rectum

Ureter

https://www.ics.org/glossary/surgery complication related/native tissue surgery complication scts classification category c5? q=tissue %20 in jury

#### 2.22 MCCS Complication Code

**Description:** Complication code including Category, Division, Pain, Time and Site in the format

CDpTxSy using https://www.ics.org/complication e,g, 2Bc-T3-S1 - Small mesh exposure with symptoms and dyspareunia diagnosed at between 2 and 12 months

and at the vaginal suture line

Field Name: df\_comp\_mccs

Purpose: Assessment/Diagnostic Info

**Data Collection:** Conditional Collection

Entered by Hospital staff/Surgeon

Collected When: [df\_comp\_indxn(6)]='1'

**Data Obligation:** Optional

Permitted Values: Text format

#### Data Source, Standard/ Terminology:

IUGA/ICS Joint Terminology and Classification of Complications Related Directly to the Insertion of Prostheses (Meshes, Implants, Tapes) or Grafts In Female Pelvic Floor Surgery, https://www.ics.org/complication.

#### 2.23 Other Complication

**Description:** Other complication if not mentioned in the above list

Field Name: df\_comp\_other

Purpose: Assessment/Diagnostic Info

**Data Collection:** Conditional Collection

Entered by Hospital staff/Surgeon

Collected When: [df\_comp\_indxn(99)] = '1'

**Data Obligation:** Optional

Permitted Values: Text format

Data Source, Standard/Terminology:

N/A

#### 2.24 Reason for asymptomatic request

**Description:** The primary rationale for requesting a pelvic floor assessment or procedure in the

absence of symptoms.

Field Name: df\_comp\_pp

Purpose: Assessment/Diagnostic Info

**Data Collection:** Conditional Collection

Entered by Hospital staff/Surgeon

Collected When: [df\_procedure\_type] = '0' and [df\_subsequent\_type]='3'

**Data Obligation:** Optional

**Permitted Values:** 

Code Description

1 No clinical symptoms?

2 Psychological symptoms?

Data Source, Standard/ Terminology:

N/A

#### 2.25 Method of objective assessment:

**Description:** Objective investigation to diagnose the condition-SUI in this instance.

Field Name: df\_obj\_assessment

Purpose: Assessment/Diagnostic Info

**Data Collection:** Conditional Collection

Entered by Hospital staff/Surgeon

Collected When: ([df\_diagnosis]='1' or [df\_diagnosis]='3') and [df\_procedure\_type]='1'

**Data Obligation:** Mandatory

**Permitted Values:** 

Code	Description
1	Cough Stress Test (CST)
2	Cough Stress Test with Prolapse Reduction
3	Urodynamic Studies (UDS)
4	Transperineal Ultrasound
0	Not Performed

#### Data Source, Standard/ Terminology:

Abrams P, Andersson KE, Apostolidis A, Birder L, Bliss D, Brubaker L, Cardozo L, Castro-Diaz D, O'connell PR, Cottenden A, Cotterill N. 6th International Consultation on Incontinence. Recommendations of the International Scientific Committee: evaluation and treatment of urinary incontinence, pelvic organ prolapse and faecal incontinence. Neurourology and urodynamics. 2018;37(7):2271-2.

#### 2.26 Objective Assessment Result for CST at Diagnosis

**Description:** The result of Cough Stress Test

Field Name: df\_cst\_result

Purpose: Assessment/Diagnostic Info

**Data Collection:** Conditional Collection

Entered by Hospital staff/Surgeon

Collected When: [df\_obj\_assessment(1)] = '1' and ([df\_diagnosis]='1' or

 $[df\_diagnosis] = \verb|'3'|) \ \ and \ [df\_procedure\_type] = \verb|'1'|$ 

Data Obligation: Optional

#### **Permitted Values:**

Code	Description
1	Positive
0	Negative

#### **Data Source, Standard/Terminology:**

ACSQHC credentialing guidance relating to patient outcome monitoring and reporting

## 2.27 Objective Assessment Result for CST with Prolapse Reduction Result at Diagnosis

**Description:** The result of Cough Stress Test with Prolapse reduction.

Field Name: df\_cst\_prolapse\_result

Purpose: Assessment/Diagnostic Info

**Data Collection:** Conditional Collection

Entered by Hospital staff/Surgeon

Collected When: [df\_obj\_assessment(2)] = '1' and ([df\_diagnosis]='1' or

[df\_diagnosis]='3') and [df\_procedure\_type]='1'

**Data Obligation:** Optional

**Permitted Values:** 

Code	Description
1	Positive
0	Negative

#### **Data Source, Standard/Terminology:**

ACSQHC credentialing guidance relating to patient outcome monitoring and reporting

#### 2.28 Objective Assessment Result for Urodynamic Studies (UDS) at Diagnosis

**Description:** The result of (artificial) bladder filling with a specified liquid (ICS recommends

physiological saline solution or X-ray contrast if video studies) at a specified rate.

Field Name: df\_uds\_result

Purpose: Assessment/Diagnostic Info

**Data Collection:** Conditional Collection

Entered by Hospital staff/Surgeon

Collected When: [df\_obj\_assessment(3)] = '1' and ([df\_diagnosis]='1' or

[df\_diagnosis]='3') and [df\_procedure\_type]='1'

Data Obligation: Optional

Permitted Values: Code Description

1 Urodynamic Stress Incontinence

2 Detrusor overactivity

3 Intrinsic Sphincter Deficiency

4 Voiding Dysfunction

#### Data Source, Standard/Terminology:

https://www.ics.org/glossary/investigation/urodynamicstudies?q=urodynamics

#### 2.29 Objective Assessment Result for Transperineal Ultrasound at Diagnosis

**Description:** The result of 2D/3D/4D imaging scan of pelvic floor structures using a convex transducer

placed against the perineum/vulva. The transducer may be oriented

longitudinally/sagittally (for bladder neck/urethra, prolapse, and levator ani muscle assessment), or oriented transversely (for assessment of anal canal, sphincters).

Field Name: df\_ultrasound\_result

**Purpose:** Assessment/Diagnostic Info

Data Collection: Conditional Collection

Entered by Hospital staff/Surgeon

Collected When: [df\_obj\_assessment(4)] = '1' and ([df\_diagnosis]='1' or [df\_diagnosis]='3')

and [df procedure type] = '1'

Data Obligation: Optional

**Permitted Values:** 

Code Description

Positive

Negative

#### Data Source, Standard/Terminology:

https://www.ics.org/glossary/imaging/pelvicfloorultrasoundperineal?q=Transperineal%2 
OUltrasound

# 2.30 Height (cm)

**Description:** The height of a person measured in centimetres.

Field Name: df\_height

Purpose: Risk adjustment

**Data Collection:** Conditional Collection

Entered by Hospital staff/Surgeon

Collected When: [df\_procedure\_type] = '1'

Data Obligation: Optional

Permitted Values: Text format

Data Source, Standard/ Terminology:

METEOR identifier: 270361 Australian Institute of Health and Welfare (AIHW)

# 2.31 Weight (Kg)

**Description:** The weight (body mass) of a person measured in kilograms.

Field Name: df\_weight

Purpose: Risk adjustment

**Data Collection:** Conditional Collection

Entered by Hospital staff/Surgeon

Collected When: [df\_procedure\_type] = '1'

**Data Obligation:** Optional

Permitted Values: Text format

**Data Source, Standard/Terminology:** 

METEOR identifier: 702085 Australian Institute of Health and Welfare (AIHW)

## 2.32 Body Mass Index (BMI)

**Description:** A measure of an adult's weight (body mass) relative to height used to assess the

extent of weight deficit or excess where height and weight have been measured.

Field Name: df\_bmi\_text

Purpose: Risk adjustment

**Data Collection:** Conditional Collection

Entered by Hospital staff/Surgeon

Collected When: ([df\_height]='' or [df\_height]='0') or ([df\_weight]='' or

[df\_weight] = '0')

Data Obligation: Optional

Permitted Values: Number between 15 and 60

**Data Source, Standard/Terminology:** 

## 2.33 Smoking

**Description:** A person's current and past smoking behaviour.

Field Name: df\_smoking

Purpose: Risk adjustment

**Data Collection:** Conditional Collection

Entered by Hospital/Surgeon

Collected When: [df\_procedure\_type] = '1'

**Data Obligation:** Optional

**Permitted Values:** 

Code	Description
1	Current smoker
2	Stopped
3	Never smoked
-9	Unknown

#### **Data Source, Standard/Terminology:**

METEOR identifier: 270311 Australian Institute of Health and Welfare (AIHW)

## 2.34 Postmenopausal

**Description:** Women >45 years with menopausal symptoms in women who have not had a period

for at least 12 months and are not using hormonal contraception or menopause based

on symptoms in women without a uterus.

Field Name: df\_postmenopausal

**Purpose:** Risk adjustment

**Data Collection:** Conditional Collection

Entered by Hospital/Surgeon

Collected When: [df\_procedure\_type] = '1'

Data Obligation: Optional

**Permitted Values:** 

Code	Description
1	Yes
0	No
-9	Unknown

#### **Data Source, Standard/Terminology:**

https://www.nice.org.uk/guidance/ng23/chapter/Recommendations#diagnosis-of-per imenopause-and-menopause

### 2.35 Diabetes

**Description:** Whether a person has been diagnosed with diabetes mellitus, as represented by a

simplified code.

Field Name: df\_diabetes

Purpose: Risk adjustment

**Data Collection:** Conditional Collection

Entered by Hospital staff/Surgeon

Collected When: [df\_procedure\_type] = '1'

Data Obligation: Optional

**Permitted Values:** 

Code Description

1 Yes

0 No

-9 Unknown

#### Data Source, Standard/Terminology:

METEOR Identifier: 730236 ABS (http://abs.gov.au/AUSSTATS/

## 2.36 Topical vaginal oestrogen

**Description:** Use of a topical vaginally applied oestrogen for the management of SUI or POP

symptoms, as part of first line management of pelvic floor conditions.

Field Name: df\_tvo

Purpose: Risk adjustment

**Data Collection:** Conditional Collection

Entered by Hospital staff/Surgeon

Collected When: [df\_procedure\_type]='1' or [df\_subsequent\_type]='1'

**Data Obligation:** Optional

**Permitted Values:** 

Code Description

1 Yes

0 No

-9 Unknown

## Data Source, Standard/ Terminology:

Ref: Tzur T, Yohai D, Weintraub AY. The role of local estrogen therapy in the management of pelvic floor disorders. Climacteric. 2016 Mar 3;19(2):162-71.

### 2.37 Indication

**Description:** Indication for use of topical vaginally applied oestrogen - SUI or POP

Field Name: df\_tvo\_indication

Purpose: Risk adjustment

**Data Collection:** Conditional Collection

Entered by Hospital staff/Surgeon

Collected When: [df\_tvo] = '1'

**Data Obligation:** Optional

**Permitted Values:** 

Code Description
 1 Treatment of vaginal atrophy
 2 Treatment of mesh exposure

## **Data Source, Standard/Terminology:**

# 3 Surgery Detail Form

## 3.1 Date the Surgery form is created

**Description:** An auto-generated date field, that records the date the surgery form was first opened

and saved. Used to count the number of surgery data entered over time.

Field Name: sx\_date\_created

**Purpose:** Operational Requirement.

**Data Collection:** Always Collected

Auto-generated

Data Obligation: Optional

Permitted Values: Date (DD/MM/YYYY)

Data Source, Standard/ Terminology:

N/A

## 3.2 Date of Surgery

**Description:** Date when the procedure was performed.

Field Name: sx\_date

**Purpose:** Surgical/procedural

**Data Collection:** Always Collected

Entered by Hospital staff/Surgeon

**Data Obligation:** Mandatory

Permitted Values: Date (DD/MM/YYYY) between [pt\_dob] and today

Data Source, Standard/ Terminology:

METEOR identifier: 270300 / Australian Institute of Health and Welfare (AIHW)

## 3.3 Surgeon Name:

**Description:** Name of consultant surgeon performing/supervising the procedure with the hospital

where it is being performed.

Field Name: sx\_surgeon

**Purpose:** Surgical/procedural

**Data Collection:** Always Collected

Entered by Hospital/Surgeon

**Data Obligation:** Mandatory

Permitted Values: < Hospital Name> - < Surgeon Name>

Due to sensitive issues, the list of surgeons is not listed in this document.

#### Data Source, Standard/Terminology:

ACSQHC credentialing guidance relating to patient outcome monitoring and reporting.

REF:

https://www.safetyandquality.gov.au/sites/default/files/migrated/Credentialing-of-Senior-Medical-Practitioners-to-Undertake-Transvaginal-Mesh-Implant-Removal-Surgery.

pdf

## 3.4 If Other, please specify

**Description:** Name of consultant surgeon performing or supervising the procedure if not

mentioned in the above list

Field Name: sx\_surgeon\_oth

**Purpose:** Surgical/procedural

**Data Collection:** Conditional Collection

Entered by Hospital staff/Surgeon

**Collected When:** 'Other' is selected from the above list.

**Data Obligation:** Mandatory

Permitted Values: Text format

Data Source, Standard/Terminology:

N/A

### 3.5 SUI Procedure

**Description:** SUI procedure defined as a procedure performed to treat stress urinary incontinence

or involuntary loss of urine on effort or physical exertion including sporting activities,

or on sneezing or coughing.

Field Name: sx\_sui\_primary

**Purpose:** Surgical/procedural

**Data Collection:** Conditional Collection

Entered by Hospital staff/Surgeon

Collected When: [rct\_status] <> '6' and (([df\_diagnosis] = '1' or [df\_diagnosis] = '3') and

([df\_procedure\_type]='1' or [df\_subsequent\_type]='1'))

**Data Obligation:** Mandatory

**Permitted Values:** 

Code	Description
1	Mid urethral sling (synthetic mesh)
2	Fascial sling (native tissue)
3	Burch colposuspension
4	Bulking agent injection
99	Other

### Data Source, Standard/ Terminology:

N/A

## 3.6 SUI Procedure Other

**Description:** SUI procedure performed if not mentioned in the above list

Field Name: sx\_sui\_primary\_oth

**Purpose:** Surgical/procedural

**Data Collection:** Conditional Collection

Entered by Hospital staff/Surgeon

Collected When: [sx\_sui\_primary] = '99'

**Data Obligation:** Mandatory

Permitted Values: Text format

**Data Source, Standard/Terminology:** 

## 3.7 Fascial Sling Options

**Description:** The type of tissue used to perform the fascial sling procedure.

Field Name: sx\_fs

**Purpose:** Surgical/procedural

**Data Collection:** Conditional Collection

Entered by Hospital staff/Surgeon

Collected When: [sx\_sui\_primary] = '2'

**Data Obligation:** Mandatory

**Permitted Values:** 

Code Description

Rectus Fascia

Fascia Lata

Other

#### Data Source, Standard/Terminology:

https://www.ics.org/glossary/surgeryfemale/graft?q=rectus%20fascia

# 3.8 Fascial sling other

**Description:** Fascial sling procedure if not mentioned in the above list

Field Name: sx\_fs\_other

**Purpose:** Surgical/procedural

**Data Collection:** Conditional Collection

Entered by Hospital staff/Surgeon

Collected When: [sx\_fs] = '99'

**Data Obligation:** Optional

Permitted Values: Text format

**Data Source, Standard/Terminology:** 

## 3.9 Burch colposuspension method

**Description:** Elevation or attachment of the upper paraurethral tissue adjacent to the bladder neck region

to the iliopectineal ligament bilaterally. Although a recognized treatment for stress incontinence, this procedure will often correct associated anterior wall prolapse

Field Name: sx\_bc\_method

**Purpose:** Surgical/procedural

**Data Collection:** Conditional Collection

Entered by Hospital staff/Surgeon

Collected When: [sx\_sui\_primary] = '3'

Data Obligation: Mandatory

**Permitted Values:** 

Code	Description
1	Laparoscopy
2	Open
3	Robotic

#### Data Source, Standard/Terminology:

 $https://www.ics.org/glossary/surgeryfemale/burchcolposuspension open laparoscopic robotic \\ ?q=Burch\%20 colposuspension$ 

## 3.10 SUI procedure to treat the complication

**Description:** Type of procedure being undertaken to treat complication from previous SUI

procedure

Field Name: sx\_sui\_comp

**Purpose:** Surgical/procedural

**Data Collection:** Conditional Collection

Entered by Hospital staff/Surgeon

Collected When: ([df\_diagnosis] = '1' or [df\_diagnosis]='3') and ([df\_procedure\_type]='0'

and ([df\_subsequent\_type]='2' or [df\_subsequent\_type]='3') )

**Data Obligation:** Mandatory

**Permitted Values:** 

Code Description

- 2 Vaginal mesh revision (no excision)
- 3 Partial vaginal mesh excision
- 4 Complete vaginal mesh excision
- 5 Extra-vaginal mesh excision
- 6 Total mesh excision
- 1 Sling division
- 7 Bulking agent removal
- 99 Other

#### **Data Source, Standard/Terminology:**

ACSQHC credentialing guidance relating to patient outcome monitoring and reporting. REF:

https://www.safetyandquality.gov.au/sites/default/files/migrated/Credentialing-of-Se nior-Medical-Practitioners-to-Undertake-Transvaginal-Mesh-Implant-Surgery-for-Pelvic -Organ-Prolapse.pdf

## 3.11 Complication procedure(s)

**Description:** SUI procedure to treat complication if not mentioned in the above list

Field Name: sx\_sui\_comp\_other

**Purpose:** Surgical/procedural

**Data Collection:** Conditional Collection

Entered by Hospital staff/Surgeon

Collected When: [sx\_sui\_comp] = '99'

Data Obligation: Optional

Permitted Values: Notes format

**Data Source, Standard/Terminology:** 

## 3.12 POP Procedure

**Description:** Procedure to treat pelvic organ prolapse

Field Name: sx\_pop\_primary

Purpose: Surgical/procedural

**Data Collection:** Conditional Collection

Entered by Hospital staff/Surgeon

Collected When: ([df\_diagnosis] = '2' or [df\_diagnosis] = '3') and ([df\_procedure\_type] = '1'

or [df\_subsequent\_type] = '1')

**Data Obligation:** Mandatory

**Permitted Values:** 

Code	Description
1	Sacrocolpopexy with mesh
2	Sacrohysteropexy with mesh
5	Sacrospinous hysteropexy with mesh
6	Sacrospinous colpopexy with mesh
7	Transvaginal apical support with mesh
8	Transvaginal Anterior repair with mesh
9	Transvaginal Posterior repair with mesh
99	Other

#### Data Source, Standard/Terminology:

https://www.ics.org/glossary/diagnosis/pelvicorganprolapseclinicaldiagnosis?q=Pelvic%20 Organ%20Prolapse

# 3.13 Surgery type other if not mentioned above:

**Description:** Other POP surgery if not mentioned in the above list

Field Name: sx\_pop\_primary\_oth

**Purpose:** Surgical/procedural

**Data Collection:** Conditional Collection

Entered by Hospital staff/Surgeon

Collected When: [sx\_pop\_primary] = '99'

**Data Obligation:** Mandatory

Permitted Values: Text format

**Data Source, Standard/Terminology:** 

N/A

## 3.14 POP procedure to treat the complication

**Description:** Type of surgery to treat complication from a previous prosthesis related POP

procedure.

Field Name: Sx\_pop\_comp

**Purpose:** Surgical/procedural

**Data Collection:** Conditional Collection

Entered by Hospital staff/Surgeon

Collected When: ([df\_diagnosis] = '2' or [df\_diagnosis] = '3') and ([df\_procedure\_type] = '0'

and ([df\_subsequent\_type]='2' or [df\_subsequent\_type]='3') )

**Data Obligation:** Mandatory

**Permitted Values:** 

Code	Description
1	Vaginal mesh revision (no excision)
4	Partial vaginal mesh excision
5	Complete vaginal mesh excision
6	Extra-vaginal mesh excision
7	Total mesh excision

### Data Source, Standard/ Terminology:

https://www.acog.org/clinical/clinical-guidance/committee-opinion/articles/2017/04/management-of-mesh-and-graft-complications-in-gynecologic-surgery

# 3.15 Accompanying/Associated/Concomitant Procedures

**Description:** Additional procedure undertaken concurrently with the core procedure.

Field Name: sx\_concomitant

**Purpose:** Surgical/procedural

**Data Collection:** Conditional Collection

Entered by Hospital staff/Surgeon

Collected When: [df\_procedure\_type]='1' or [df\_subsequent\_type]='1' or

[df\_subsequent\_type] = '2'

**Data Obligation:** Optional

**Permitted Values:** 

Code	Description
3	Anterior colporrhaphy
5	Bulking agent injection
6	Fascial sling
1	Hysterectomy
2	Perineorrhaphy
4	Posterior colporrhaphy
99	Other

### Data Source, Standard/ Terminology:

N/A

# 3.16 Any other additional concomitant procedure:

**Description:** Any other concomitant procedure not mentioned in the above list

Field Name: sx\_concomitant\_other

**Purpose:** Surgical/procedural

**Data Collection:** Conditional Collection

Entered by Hospital staff/Surgeon

Collected When: [sx\_concomitant(99)]='1'

**Data Obligation:** Optional

Permitted Values: Text format

**Data Source, Standard/Terminology:** 

# 3.17 Cystoscopy performed

**Description:** Endoscopy of the urethra and urinary bladder via the urethra; represents an

important clinical quality process indicator

Field Name: sx\_cystoscopy

**Purpose:** Surgical/procedural

**Data Collection:** Conditional Collection

Collected When: [rct\_status] <> '6'

**Data Obligation:** Mandatory

**Permitted Values:** 

Code	Description
1	Yes
0	No
-1	Not applicable (e.g. for Posterior repair)

#### **Data Source, Standard/Terminology:**

Australian Institute of Health and Welfare (AIHW)

# 3.18 Mesh Sling (Product name)

**Description:** Mesh Sling product used in the procedure

Field Name: sx\_device\_mesh

**Purpose:** Device information

**Data Collection:** Conditional Collection

Entered by Hospital staff/Surgeon

Collected When: ([df\_diagnosis] = '1' or [df\_diagnosis] = '3') and [sx\_sui\_primary] = '1'

**Data Obligation:** Mandatory

Permitted Values:

Code	Description
MN039	MN039 - Gynecare TVT ABBREVO™ Continence System
JJ442	JJ442 - Gynecare TVT-O
JJ070	JJ070 - Gynecare TVT Exact

CT021 CT021 - Supris Retropubic Sling CT013 CT013 - Aris Transobturator Sling System BS226 BS226 - Obtryx II Transobturator Mid-Urethral Sling System BS140 BS140 - Advantage Fit, Advantage Fit Blue BS097 BS097 - Obtryx Transoburator Mid-Urethral Sling System BS096 BS096 - Lynx, Lynx Blue BS078 BS078 - Advantage, Advantage Blue LH379 LH379 - Durasphere SUI LH376 LH376 - Durasphere SUI GN002 GN002 - Opsys Injectable SUI GN001 GN001 - Opsys Injectable SUI **Boston Solyx** 99 Other -9 Unknown

### Data Source, Standard/ Terminology:

Manufacturer

# 3.19 Mesh Sling (Other), please specify

**Description:** Other Mesh Sling product not mentioned in the above list

Field Name: sx\_device\_mesh\_oth

**Purpose:** Device information

**Data Collection:** Conditional Collection

Entered by Hospital staff/Surgeon

Collected When: [sx\_device\_mesh] = '99'

**Data Obligation:** Mandatory

Permitted Values: Text format

Data Source, Standard/ Terminology:

## 3.20 Bulking Agent (Product name)

**Description:** Bulking Agent product name

Field Name: sx\_device\_ba

**Purpose:** Device information

**Data Collection:** Conditional Collection

Entered by Hospital staff/Surgeon

Collected When: ([df\_diagnosis] = '1' or [df\_diagnosis] = '3') and [sx\_sui\_primary] = '4'

**Data Obligation:** Mandatory

**Permitted Values:** 

Code Description

ET053 ET053 - Macroplastique

SC001 - BULKAMID Urethral Bulking System

99 Other

-9 Unknown

#### Data Source, Standard/Terminology:

N/A

# 3.21 Bulking Agent (Other), please specify

**Description:** Other Bulking Agent not mentioned in the above list

Field Name: sx\_device\_ba\_oth

**Purpose:** Device information

**Data Collection:** Conditional Collection

Entered by Hospital staff/Surgeon

Collected When: [sx\_device\_ba] = '99'

**Data Obligation:** Mandatory

Permitted Values: Text format

**Data Source, Standard/Terminology:** 

## 3.22 POP Devices (Product name)

**Description:** Pprosthesis product name.

Field Name: sx\_device\_pop

**Purpose:** Device information

**Data Collection:** Conditional Collection

Entered by Hospital staff/Surgeon

Collected When: ([df\_diagnosis] = '2' or [df\_diagnosis] = '3') and

([df\_procedure\_type]='1' or ([df\_procedure\_type]='2' and

[df\_subsequent\_type] = '1'))

**Data Obligation:** Mandatory

**Permitted Values:** 

Code	Description
1	TiLene Mesh Extralight 6000674
2	TiLene Mesh Extralight 6000676
5	TiMesh Extralight
6	TiLoop
99	Other
-9	Not known

### **Data Source, Standard/Terminology:**

N/A

# 3.23 POP Devices (Other), please specify

**Description:** Other POP device product not mentioned in the above list

Field Name: sx\_device\_pop\_oth

**Purpose:** Device information

**Data Collection:** Conditional Collection

Entered by Hospital staff/Surgeon

Collected When: [sx\_device\_pop] = '99'

**Data Obligation:** Mandatory

Permitted Values: Text format

**Data Source, Standard/Terminology:** 

N/A

## 3.24 Unique Device Identifier for SUI device(s)

**Description:** The UDI-Device Identifier (UDI-DI) which indicates the model of medical device for

SUI.

Field Name: sx\_device\_udi\_sui

Purpose: Device information

**Data Collection:** Conditional Collection

Entered by Hospital staff/Surgeon

Collected When: ( ([df\_diagnosis]='1' or [df\_diagnosis]='3') and ([df\_procedure\_type]='1'

or [df subsequent type] = '1') and ([sx sui primary] = '1' or

[sx\_sui\_primary] = '4') )

**Data Obligation:** Optional

Permitted Values: Notes format

**Data Source, Standard/Terminology:** 

https://www.tga.gov.au/how-we-regulate/manufacturing/manufacture-medical-devic

e/unique-device-identification-udi-hub/udi-information-healthcare-providers

## 3.25 Unique Device Identifier for POP device(s)

**Description:** The UDI-Device Identifier (UDI-DI) which indicates the model of medical device for

POP.

Field Name: sx\_device\_udi\_pop

**Purpose:** Device information

**Data Collection:** Conditional Collection

Entered by Hospital staff/Surgeon

Collected When: (([df\_diagnosis]='2' or [df\_diagnosis]='3') and ([df\_procedure\_type]='1'

or [df\_subsequent\_type] = '1') )

Data Obligation: Optional

Permitted Values: Notes format

**Data Source, Standard/Terminology:** 

https://www.tga.gov.au/how-we-regulate/manufacturing/manufacture-medical-devic e/unique-device-identification-udi-hub/udi-information-healthcare-providers

# 3.26 Intraoperative complications during procedure?

**Description:** Indicator whether a complication occurred during the procedure.

Field Name: Sx\_io\_comp

Purpose: Outcomes

**Data Collection:** Conditional Collection

Entered by Hospital staff/Surgeon

Collected When: [rct\_status] <> '6'

**Data Obligation:** Mandatory

**Permitted Values:** 

Code Description

1 Yes

0 No

**Data Source, Standard/Terminology:** 

N/A

# 3.27 Intraoperative complication type

**Description:** Complication types

Field Name: sx\_io\_comp\_type

**Purpose:** Outcomes

**Data Collection:** Conditional Collection

Entered by Hospital staff/Surgeon

Collected When: [sx\_io\_comp] = '1'

**Data Obligation:** Mandatory

**Permitted Values:** 

Code Description

3 Bladder Injury

2 Haemorrhage (Blood loss > 500 ml)

4 Sepsis

5 Death from all causes with cause recorded

99 Other complication(s)

1 MCCS Coded Complication

#### Data Source, Standard/Terminology:

ACSQHC credentialing guidance relating to patient outcome monitoring and reporting.

https://www.safetyandquality.gov.au/publications-and-resources/resource-library/gui dance-hospital-credentialing-senior-medical-practitioners-undertake-transvaginal-mes h-surgery-stress-urinary-incontinence

### 3.28 Cause of death

**Description:** Cause of death.

Field Name: sx\_death\_cause

**Purpose:** Surgical/procedural

**Data Collection:** Conditional Collection

Entered by Hospital staff/Surgeon

Collected When: [sx\_io\_comp\_type(5)]="1"

**Data Obligation:** Mandatory

Permitted Values: Text format

Data Source, Standard/Terminology:

METEOR identifier: 719784, Australian Institute of Health and Welfare (AIHW)

## 3.29 Intraoperative complication type Other, please specify

**Description:** Other complication if not mentioned in the above list

Field Name: sx\_io\_comp\_other

**Purpose:** Surgical/procedural

**Data Collection:** Conditional Collection

Entered by Hospital staff/Surgeon

Collected When: [sx\_io\_comp\_type(99)]='1'

**Data Obligation:** Mandatory

Permitted Values: Text format

Data Source, Standard/ Terminology:

N/A

# 3.30 MCCS Complication Code:IUGA/ICS MCCS:

https://www.ics.org/complication

**Description:** Complication code including Category, Division, Pain, Time and Site in the format

CDpTxSy using https://www.ics.org/complication e,g, 2Bc-T3-S1 - Small mesh exposure with symptoms and dyspareunia diagnosed at between 2 and 12 months

and at the vaginal suture line

Field Name: sx\_io\_comp\_mccs

Purpose: Surgical/procedural

**Data Collection:** Conditional Collection

Entered by Hospital staff/Surgeon

Collected When: [sx\_io\_comp\_type(1)]='1'

**Data Obligation:** Optional

Permitted Values: Text format

Data Source, Standard/Terminology:

IUGA/ICS Joint Terminology and Classification of Complications Related Directly to the Insertion of Prostheses (Meshes, Implants, Tapes) or Grafts In Female Pelvic Floor Surgery, https://www.ics.org/complication.

## 4 Recruitment Data

### 4.1 Recruit Date

**Description:** The date when the patient is recruited to the registry, this is usually 14 days after the

recruitment material sent.

Field Name: rct\_date

Purpose: Registration Requirement

**Data Collection:** Always Collected

Entered by APFPR staff

**Data Obligation:** Optional

Permitted Values: Date (DD/MM/YYYY)

Data Source, Standard/ Terminology:

N/A

## 4.2 Patient Recruitment Status

**Description:** The status of the patient

Field Name: rct\_status

**Purpose:** Registration Requirement

**Data Collection:** Always Collected

Entered by Hospital staff/Surgeon

**Data Obligation:** Mandatory

**Permitted Values:** 

Code	Description
0	Ready for Recruitment (Registered)
1	Recruited-ADULT
2	Recruited-CHILD
4	Waiver of consent
5	Pending
6	Opt out-COMPLETE
7	Opt out-PROM ONLY
-1	Draft

### Data Source, Standard/ Terminology:

N/A

# 4.3 Opt Out Date

**Description:** The date when the patient opted out from the registry

Field Name: pt\_optout\_dt

**Purpose:** Registration Requirement

**Data Collection:** Conditional Collection

Entered by APFPR staff

Collected When: [rct\_status] = '6' or [rct\_status] = '7'

**Data Obligation:** Mandatory

Permitted Values: Date (DD/MM/YYYY) with maximum value of today

**Data Source, Standard/Terminology:** 

N/A

## 4.4 Opt Out Reason

**Description:** The reason why the patient wish to opt out from the registry.

Field Name: pt\_optout\_reason

Purpose: Registration Requirement

**Data Collection:** Conditional Collection

Entered by APFPR staff

Collected When: [rct\_status] = '6' or [rct\_status] = '7'

**Data Obligation:** Mandatory

Permitted Values: Code Description

Not interested
 Privacy
 Other
 Not stated/inadequately described

### Data Source, Standard/ Terminology:

N/A

# 4.5 Opt Out Reason - Other

**Description:** The other reasons not listed above why the patient wish to opt out from the registry.

Field Name: pt\_optout\_other

**Purpose:** Registration Requirement

**Data Collection:** Conditional Collection

Entered by APFPR staff

Collected When: [pt\_optout\_reason] = '99'

**Data Obligation:** Mandatory

Permitted Values: Text format

Data Source, Standard/ Terminology:

N/A

### 4.6 Date recruitment material sent via Mail

**Description:** The date when the recruitment materials were sent to the patient via mail

Field Name: rct\_mail\_date

**Purpose:** Registration Requirement

**Data Collection:** Always Collected

Entered by APFPR staff

**Data Obligation:** Mandatory

Permitted Values: Date (DD/MM/YYYY)

Data Source, Standard/ Terminology:

# 5 Postop Visit 6/12 Months

## 5.1 Date the Post-op form is created

**Description:** An auto-generated date field, that records the date the post-operative form was first

opened and saved. Used to analyse post-op data entered over time.

Field Name: po\_date\_created

**Purpose:** Operational Requirement.

**Data Collection:** Always Collected

Auto-generated

Data Obligation: Optional

Permitted Values: Date (DD/MM/YYYY)

Data Source, Standard/ Terminology:

N/A

## 5.2 Date of post operative follow up

**Description:** Date of post-operative follow-up, expressed as DDMMYYYY.

Field Name: po\_date

**Purpose:** Surgical/procedural

**Data Collection:** Conditional Collection

Entered by Hospital staff/Surgeon

Collected When: [po\_deceased(1)] = '0' and [rct\_status] <> '6'

**Data Obligation:** Mandatory

Permitted Values: Date (DD/MM/YYYY) between [sx\_date] and today

**Data Source, Standard/Terminology:** 

ACSQHC credentialing guidance relating to patient outcome monitoring and reporting

### 5.3 Patient Deceased

**Description:** An indication if patient is alive or deceased

Field Name: po\_deceased

Purpose: Risk adjustment

**Data Collection:** Conditional Collection

Entered by Hospital staff/Surgeon

Collected When: [rct\_status] <> '6'

**Data Obligation:** Optional

**Permitted Values:** 

Code Description

1,

Data Source, Standard/ Terminology:

N/A

## 5.4 Date of Death

**Description:** The date upon which a person ceases to live, expressed as DDMMYYYY.

Field Name: po\_dod

**Purpose:** Risk adjustment

**Data Collection:** Conditional Collection

Entered by Hospital staff/Surgeon

Collected When: [po\_deceased(1)] = '1'

Data Obligation: Optional

Permitted Values: Date (DD/MM/YYYY) with maximum value of today

**Data Source, Standard/Terminology:** 

METEOR identifier: 646025, Australian Institute of Health and Welfare (AIHW)

# 5.5 Mortality within 30 days of related surgery?

**Description:** Patient ceases to live within 30 days of SUI or POP procedure

Field Name: po\_dead\_sx

Purpose: Risk adjustment

**Data Collection:** Conditional Collection

Entered by Hospital staff/Surgeon

Collected When: [po\_deceased(1)] = '1'

**Data Obligation:** Optional

**Permitted Values:** 

Code Description
1 Yes

0 No

### Data Source, Standard/ Terminology:

ACSQHC credentialing guidance relating to patient outcome monitoring and reporting

## 5.6 Mortality details

**Description:** Details related to mortality within 30 days of SUI/POP procedure.

Field Name: po\_dead\_sx\_detail

**Purpose:** Outcomes

**Data Collection:** Conditional Collection

Entered by Hospital staff/Surgeon

Collected When: [po\_dead\_sx] = '1'

**Data Obligation:** Optional

Permitted Values: Notes format

#### **Data Source, Standard/Terminology:**

ACSQHC credentialing guidance relating to patient outcome monitoring and reporting

## 5.7 SUI outcome status compared to baseline

**Description:** Outcome of SUI procedure compared to baseline status.

Field Name: po\_outcome\_sui

Purpose: Outcomes

**Data Collection:** Conditional Collection

Entered by Hospital staff/Surgeon

Collected When: ([df\_diagnosis] = '1' or [df\_diagnosis] = '3') and [rct\_status]<>'6' and

[po deceased(1)] = '0'

**Data Obligation:** Mandatory

**Permitted Values:** 

Code	Description
1	Improved
2	Same
3	Worse
0	Not evaluated

### Data Source, Standard/ Terminology:

ACSQHC credentialing guidance relating to patient outcome monitoring and reporting

## 5.8 POP outcome status compared to baseline

**Description:** Outcome of POP procedure compared to baseline status.

Field Name: po\_outcome\_pop

Purpose: Outcomes

**Data Collection:** Conditional Collection

Entered by Hospital staff/Surgeon

Collected When: ([df\_diagnosis] = '2' or [df\_diagnosis] = '3') and [rct\_status] <> '6'

and [po deceased(1)] = '0'

**Data Obligation:** Mandatory

**Permitted Values:** 

Code Description

1 Improved

2 Same

3 Worse

0 Not evaluated

#### **Data Source, Standard/Terminology:**

ACSQHC credentialing guidance relating to patient outcome monitoring and reporting

### 5.9 POP Anterior

**Description:** A point that represents the most distal (i.e., most dependent) position of any part of

the upper anterior vaginal wall from the vaginal cuff or anterior vaginal fornix to point Aa. By definition, point Ba is at -3 cm in the absence of prolapse and would have a positive value equal to the position of the cuff in women with total posthysterectomy

vaginal eversion.

Field Name: po\_pop\_anterior

Purpose: Outcomes

**Data Collection:** Always Collected

Entered by Hospital staff/Surgeon

**Data Obligation:** Optional

Permitted Values: Number between -3 and 10

Data Source, Standard/ Terminology:

Reference: Haylen BT, Maher CF, Barber MD, Camargo SFM, Dandolu V, Digesu A, Goldman HB, Huser M, Milani A, Moran P, Schaer GN, Withagen MI. An International Urogynecological Association (IUGA) / International Continence Society (ICS) Joint Report on the Terminology for Female Pelvic Organ Prolapse (POP). Int Urogynecol

J,2016, 27(2):165-194; Erratum,2016, 27(4): 655-684; Neurourol

Urodyn,2016,35(2):137-168.

### 5.10 POP Anterior Calc

**Description:** Ordinal staging of anterior compartment (0-3), based on POP Anterior

Field Name: po\_pop\_anterior\_calc

**Purpose:** Outcomes

**Data Collection:** Always Collected

Derived/Calculated Value

Data Obligation: Optional

**Permitted Values:** Stage 0/1, Stage 2, or Stage 3

#### **Data Source, Standard/Terminology:**

Reference: Haylen BT, Maher CF, Barber MD, Camargo SFM, Dandolu V, Digesu A, Goldman HB, Huser M, Milani A, Moran P, Schaer GN, Withagen MI. An International Urogynecological Association (IUGA) / International Continence Society (ICS) Joint Report on the Terminology for Female Pelvic Organ Prolapse (POP). Int Urogynecol

J,2016, 27(2):165-194; Erratum,2016, 27(4): 655-684; Neurourol

Urodyn,2016,35(2):137-168.

### 5.11 POP Posterior

**Description:** Diagnosis point that represents the most distal (i.e., most dependent) position of any

part of the upper posterior vaginal wall from the vaginal cuff or poste- rior vaginal fornix to point Ap. By definition, point Bp is at-3 cm in the absence of prolapse and would have a positive value equal to the position of the cuff in a woman with total

posthysterectomy vaginal eversion.

Field Name: po\_pop\_posterior

Purpose: Outcomes

**Data Collection:** Always Collected

Entered by Hospital staff/Surgeon

**Data Obligation:** Optional

Permitted Values: Number between -3 and 10

## Data Source, Standard/ Terminology:

Reference: Haylen BT, Maher CF, Barber MD, Camargo SFM, Dandolu V, Digesu A, Goldman HB, Huser M, Milani A, Moran P, Schaer GN, Withagen MI. An International Urogynecological Association (IUGA) / International Continence Society (ICS) Joint Report on the Terminology for Female Pelvic Organ Prolapse (POP). Int Urogynecol

J,2016, 27(2):165-194; Erratum,2016, 27(4): 655-684; Neurourol

Urodyn,2016,35(2):137-168.

#### 5.12 POP Posterior Calc

**Description:** Ordinal staging of posterior compartment (0-3), based on POP Posterior

Field Name: po\_pop\_posterior\_calc

Purpose: Outcomes

**Data Collection:** Always Collected

Derived/Calculated Value

Data Obligation: Optional

Permitted Values: Stage 0/1, Stage 2, or Stage 3

**Data Source, Standard/Terminology:** 

Reference: Haylen BT, Maher CF, Barber MD, Camargo SFM, Dandolu V, Digesu A, Goldman HB, Huser M, Milani A, Moran P, Schaer GN, Withagen MI. An International Urogynecological Association (IUGA) / International Continence Society (ICS) Joint Report on the Terminology for Female Pelvic Organ Prolapse (POP). Int Urogynecol

J,2016, 27(2):165-194; Erratum,2016, 27(4): 655-684; Neurourol

Urodyn,2016,35(2):137-168.

## 5.13 POP Apical

**Description:** A point that represents either the most distal (i.e., most dependent) edge of the cervix

or the leading edge of the vaginal cuff (hysterectomy scar) after total hysterectomy

Field Name: po\_pop\_apical

Purpose: Outcomes

**Data Collection:** Always Collected

Entered by Hospital staff/Surgeon

Data Obligation: Optional

Permitted Values: Number between -10 and 10

Data Source, Standard/ Terminology:

Reference: Haylen BT, Maher CF, Barber MD, Camargo SFM, Dandolu V, Digesu A, Goldman HB, Huser M, Milani A, Moran P, Schaer GN, Withagen MI. An International Urogynecological Association (IUGA) / International Continence Society (ICS) Joint Report on the Terminology for Female Pelvic Organ Prolapse (POP). Int Urogynecol

J,2016, 27(2):165-194; Erratum,2016, 27(4): 655-684; Neurourol

Urodyn,2016,35(2):137-168.

## 5.14 POP Apical Calc

**Description:** Ordinal staging of apical compartment (0-3), based on POP Apical

Field Name: po\_pop\_apical\_calc

Purpose: Outcomes

**Data Collection:** Always Collected

Derived/Calculated Value

Data Obligation: Optional

Permitted Values: Stage 0/1, Stage 2, or Stage 3

**Data Source, Standard/Terminology:** 

Reference: Haylen BT, Maher CF, Barber MD, Camargo SFM, Dandolu V, Digesu A, Goldman HB, Huser M, Milani A, Moran P, Schaer GN, Withagen MI. An International Urogynecological Association (IUGA) / International Continence Society (ICS) Joint Report on the Terminology for Female Pelvic Organ Prolapse (POP). Int Urogynecol

J,2016, 27(2):165-194; Erratum,2016, 27(4): 655-684; Neurourol

Urodyn,2016,35(2):137-168.

## 5.15 POP Apex/Fornix

**Description:** The status of the apex (the uppermost part) or the fornix (the arch-like space) of the

vagina during an evaluation for Pelvic Organ Prolapse (POP). It assesses the degree of

prolapse present at these anatomical sites.

Field Name: po\_pop\_apex

**Purpose:** Outcomes

**Data Collection:** Always Collected

Entered by Hospital staff/Surgeon

Data Obligation: Optional

Permitted Values: Number between -10 and 10

Data Source, Standard/ Terminology:

Reference: Haylen BT, Maher CF, Barber MD, Camargo SFM, Dandolu V, Digesu A, Goldman HB, Huser M, Milani A, Moran P, Schaer GN, Withagen MI. An International Urogynecological Association (IUGA) / International Continence Society (ICS) Joint Report on the Terminology for Female Pelvic Organ Prolapse (POP). Int Urogynecol

J,2016, 27(2):165-194; Erratum,2016, 27(4): 655-684; Neurourol

Urodyn,2016,35(2):137-168.

# 5.16 Pain/tenderness

**Description:** Outcome in relation to pain/tenderness if it was specified at diagnosis.

Field Name: po\_oc\_pain

Purpose: Outcomes

**Data Collection:** Conditional Collection

Entered by Hospital staff/Surgeon

Collected When: [df\_comp\_indxn(1)]='1' and [rct\_status]<>'6' and [po\_deceased(1)] = '0'

**Data Obligation:** Optional

**Permitted Values:** 

Code	Description
1	Resolved
2	Improved
3	Same as prior to surgery
4	Worse
0	Not evaluated

#### **Data Source, Standard/Terminology:**

ACSQHC credentialing guidance relating to patient outcome monitoring and reporting

## 5.17 Vaginal bleeding

**Description:** Outcome of previously diagnosed complication of vaginal bleeding

Field Name: po\_oc\_vag\_bleed

Purpose: Outcomes

**Data Collection:** Conditional Collection

Entered by Hospital staff/Surgeon

Collected When: [df\_comp\_indxn(2)]='1' and [rct\_status]<>'6' and [po\_deceased(1)] = '0'

**Data Obligation:** Optional

**Permitted Values:** 

Code Description

1 Resolved

2 Improved

3 Same as prior to surgery

4 Worse

0 Not evaluated

### Data Source, Standard/ Terminology:

ACSQHC credentialing guidance relating to patient outcome monitoring and reporting

# 5.18 Mesh exposure/erosion/extrusion

**Description:** Outcome of previously diagnosed complication of mesh exposure/erosion/extrusion

Field Name: po\_oc\_mesh\_ee

Purpose: Outcomes

**Data Collection:** Conditional Collection

Entered by Hospital staff/Surgeon

Collected When: [df\_comp\_indxn(3)]='1' and [rct\_status]<>'6' and [po\_deceased(1)] = '0'

**Data Obligation:** Optional

**Permitted Values:** 

Code	Description
1	Resolved
2	Improved
3	Same as prior to surgery
4	Worse
0	Not evaluated

### Data Source, Standard/ Terminology:

ACSQHC credentialing guidance relating to patient outcome monitoring and reporting

# 5.19 Organ/Tissue injury

**Description:** Outcome of previously diagnosed complication of organ/tissue injury

Field Name: po\_oc\_oti

Purpose: Outcomes

**Data Collection:** Conditional Collection

Entered by Hospital staff/Surgeon

Collected When: [df\_comp\_indxn(4)]='1' and [rct\_status]<>'6' and [po\_deceased(1)] = '0'

**Data Obligation:** Optional

**Permitted Values:** 

Code	Description
1	Resolved
2	Improved
3	Same as prior to surgery
4	Worse
0	Not evaluated

#### **Data Source, Standard/Terminology:**

ACSQHC credentialing guidance relating to patient outcome monitoring and reporting

## 5.20 Urethral obstruction

**Description:** Outcome of previously diagnosed complication of urethral obstruction

Field Name: po\_oc\_ureth\_obs

Purpose: Outcomes

**Data Collection:** Conditional Collection

Entered by Hospital staff/Surgeon

Collected When: [df\_comp\_indxn(5)]='1' and [rct\_status]<>'6' and [po\_deceased(1)] = '0'

**Data Obligation:** Optional

**Permitted Values:** 

Code Description

1 Resolved

2 Improved

3 Same as prior to surgery

4 Worse

0 Not evaluated

## Data Source, Standard/ Terminology:

ACSQHC credentialing guidance relating to patient outcome monitoring and reporting

## 5.21 MCCS coded complication

**Description:** Outcome of previously diagnosed complication of MCCS coded complication.

Field Name: po\_oc\_mccs

Purpose: Outcomes

**Data Collection:** Conditional Collection

Entered by Hospital staff/Surgeon

Collected When: [df\_comp\_indxn(6)]='1' and [rct\_status]<>'6' and [po\_deceased(1)] = '0'

**Data Obligation:** Optional

**Permitted Values:** 

Code	Description
1	Resolved
2	Improved
3	Same as prior to surgery
4	Worse
0	Not evaluated

## **Data Source, Standard/Terminology:**

ACSQHC credentialing guidance relating to patient outcome monitoring and reporting

## 5.22 Vaginal Discharge

**Description:** Outcome of previously diagnosed complication of vaginal discharge

Field Name: po\_oc\_discharge

Purpose: Outcomes

**Data Collection:** Conditional Collection

Entered by Hospital staff/Surgeon

Collected When: [df\_comp\_indxn(7)]='1' and [rct\_status]<>'6' and [po\_deceased(1)] = '0'

**Data Obligation:** Optional

**Permitted Values:** 

Code	Description
1	Resolved
2	Improved
3	Same as prior to surgery
4	Worse
0	Not evaluated

## Data Source, Standard/ Terminology:

ACSQHC credentialing guidance relating to patient outcome monitoring and reporting

## 5.23 Fistula formation

**Description:** Outcome of previously diagnosed complication of fistula formation

Field Name: po\_oc\_fistula

Purpose: Outcomes

**Data Collection:** Conditional Collection

Entered by Hospital staff/Surgeon

Collected When: [df\_comp\_indxn(8)]='1' and [rct\_status]<>'6' and [po\_deceased(1)] = '0'

**Data Obligation:** Optional

**Permitted Values:** 

Code	Description	
1	Resolved	
2	Improved	
3	Same as prior to surgery	
4	Worse	
0	Not evaluated	

## **Data Source, Standard/Terminology:**

ACSQHC credentialing guidance relating to patient outcome monitoring and reporting

## 5.24 Recurrent UTI

**Description:** Outcome of previously diagnosed complication of recurrent UTI

Field Name: po\_oc\_uti

Purpose: Outcomes

**Data Collection:** Conditional Collection

Entered by Hospital staff/Surgeon

Collected When: [df\_comp\_indxn(9)]='1' and [rct\_status]<>'6' and [po\_deceased(1)] = '0'

**Data Obligation:** Optional

**Permitted Values:** 

Code	Description
1	Resolved
2	Improved
3	Same as prior to surgery
4	Worse
0	Not evaluated

## Data Source, Standard/ Terminology:

ACSQHC credentialing guidance relating to patient outcome monitoring and reporting

## 5.25 Overactive bladder syndrome

**Description:** Outcome of previously diagnosed complication of overactive bladder syndrome

Field Name: po\_oc\_oab

Purpose: Outcomes

**Data Collection:** Conditional Collection

Entered by Hospital staff/Surgeon

Collected When: [df\_comp\_indxn(10)]='1' and [rct\_status]<>'6' and [po\_deceased(1)] = '0'

**Data Obligation:** Optional

#### **Permitted Values:**

Code	Description
1	Resolved
2	Improved
3	Same as prior to surgery
4	Worse
0	Not evaluated

## **Data Source, Standard/Terminology:**

ACSQHC credentialing guidance relating to patient outcome monitoring and reporting

# 5.26 Any other complication

**Description:** Outcome of previously diagnosed other complication not mentioned above

Field Name: po\_oc\_other

Purpose: Outcomes

**Data Collection:** Conditional Collection

Entered by Hospital staff/Surgeon

Data Obligation: Optional

**Permitted Values:** 

Code	Description
1	Resolved
2	Improved
3	Same as prior to surgery
4	Worse
0	Not evaluated

## Data Source, Standard/ Terminology:

ACSQHC credentialing guidance relating to patient outcome monitoring and reporting

## 5.27 Bladder Injury

**Description:** Indicator whether the previously diagnosed intra-op complication for Bladder Injury is

resolved or still on-going.

Field Name: po\_ioc\_bi

Purpose: Outcomes

**Data Collection:** Conditional Collection

Entered by Hospital staff/Surgeon

Collected When: [sx\_io\_comp\_type(3)]='1' and [rct\_status]<>'6' and [po\_deceased(1)] = '0'

**Data Obligation:** Optional

**Permitted Values:** 

Code Description

Resolved

On-going

## Data Source, Standard/ Terminology:

ACSQHC credentialing guidance relating to patient outcome monitoring and reporting

# 5.28 Haemorrhage (Blood loss > 500 ml)

**Description:** Indicator whether the previously intraoperative complication for Haemorrhage is

resolved or still on-going

Field Name: po\_ioc\_bloodloss

Purpose: Outcomes

**Data Collection:** Conditional Collection

Entered by Hospital staff/Surgeon

Collected When: [sx\_io\_comp\_type(2)]='1' and [rct\_status]<>'6' and [po\_deceased(1)] = '0'

**Data Obligation:** Optional

**Permitted Values:** 

Code	Description
1	Resolved
2	On-going

## **Data Source, Standard/Terminology:**

ACSQHC credentialing guidance relating to patient outcome monitoring and reporting

## 5.29 MCCS Coded:

**Description:** Indicator whether the previously intraoperative MCCS coded complication is resolved

or still on-going.

Field Name: po\_ioc\_mccs

Purpose: Outcomes

**Data Collection:** Conditional Collection

Entered by Hospital staff/Surgeon

Collected When: [sx\_io\_comp\_type(1)]='1' and [rct\_status]<>'6' and [po\_deceased(1)] = '0'

**Data Obligation:** Optional

**Permitted Values:** 

Code Description

Resolved

On-going

## **Data Source, Standard/Terminology:**

ACSQHC credentialing guidance relating to patient outcome monitoring and reporting

## 5.30 Other Complications

**Description:** Indicator whether the previously intraoperative other complication is resolved or still

on-going.

Field Name: po\_ioc\_other

Purpose: Outcomes

**Data Collection:** Conditional Collection

Entered by Hospital staff/Surgeon

Collected When: [sx\_io\_comp\_type(99)]='1' and [rct\_status]<>'6' and [po\_deceased(1)] =

0'

Data Obligation: Optional

#### **Permitted Values:**

Code	Description
1	Resolved
2	On-going

## Data Source, Standard/ Terminology:

ACSQHC credentialing guidance relating to patient outcome monitoring and reporting

## 5.31 Method of objective assessment:

**Description:** Objective assessment method for SUI.

Field Name: po\_obj\_assessment

Purpose: Outcomes

**Data Collection:** Conditional Collection

Entered by Hospital staff/Surgeon

Collected When: ([df\_diagnosis]='1' or [df\_diagnosis]='3') and [df\_procedure\_type]='1'

and [po deceased(1)] = '0'

**Data Obligation:** Mandatory

**Permitted Values:** 

Code	Description
1	Cough Stress Test (CST)
2	Cough Stress Test with Prolapse Reduction
3	Urodynamic Studies (UDS)
4	Transperineal Ultrasound
0	Not Performed

## **Data Source, Standard/Terminology:**

Abrams P, Andersson KE, Apostolidis A, Birder L, Bliss D, Brubaker L, Cardozo L, Castro-Diaz D, O'connell PR, Cottenden A, Cotterill N. 6th International Consultation on Incontinence. Recommendations of the International Scientific Committee: evaluation and treatment of urinary incontinence, pelvic organ prolapse and faecal incontinence. Neurourology and urodynamics. 2018;37(7):2271-2.

## 5.32 CST Result

**Description:** The result of Cough Stress Test.

Field Name: po\_cst\_result

Purpose: Outcomes

**Data Collection:** Conditional Collection

Entered by Hospital staff/Surgeon

Collected When: [po\_obj\_assessment(1)] = '1'

**Data Obligation:** Optional

**Permitted Values:** 

Code Description1 Positive0 Negative

## **Data Source, Standard/Terminology:**

ACSQHC credentialing guidance relating to patient outcome monitoring and reporting

## 5.33 CST Result with Prolapse Reduction result

**Description:** The result of Cough Stress Test with Prolapse reduction result

Field Name: po\_cst\_prolapse\_result

Purpose: Outcomes

**Data Collection:** Conditional Collection

Entered by Hospital staff/Surgeon

Collected When: [po\_obj\_assessment(2)] = '1'

Data Obligation: Optional

**Permitted Values:** 

Code Description1 Positive0 Negative

## Data Source, Standard/ Terminology:

ACSQHC credentialing guidance relating to patient outcome monitoring and reporting

## 5.34 Urodynamic studies (UDS) Testing Result

**Description:** The result of (artificial) bladder filling with a specified liquid (ICS recommends

physiological saline solution or X-ray contrast if video studies) at a specified rate.

Field Name: po\_uds\_result

Purpose: Outcomes

**Data Collection:** Conditional Collection

Entered by Hospital staff/Surgeon

Collected When: [po\_obj\_assessment(3)] = '1'

**Data Obligation:** Optional

**Permitted Values:** 

Code	Description
1	Urodynamic Stress Incontinence
2	Detrusor overactivity
3	Intrinsic Sphincter Deficiency
4	Voiding Dysfunction

#### Data Source, Standard/Terminology:

https://www.ics.org/glossary/investigation/urodynamicstudies?q=urodynamics

## 5.35 Transperineal Ultrasound Result

**Description:** The result of 2D/3D/4D imaging scan of pelvic floor structures using a convex transducer

placed against the perineum/vulva. The transducer may be oriented

longitudinally/sagittally (for bladder neck/urethra, prolapse, and levator ani muscle assessment), or oriented transversely (for assessment of anal canal, sphincters).

Field Name: po\_ultrasound\_result

Purpose: Outcomes

**Data Collection:** Conditional Collection

Entered by Hospital staff/Surgeon

Collected When: [po\_obj\_assessment(4)] = '1'

Data Obligation: Optional

#### **Permitted Values:**

Code	Description
1	Positive
0	Negative

## Data Source, Standard/ Terminology:

https://www.ics.org/glossary/imaging/pelvicfloorultrasoundperineal?q=Transperineal%2 
OUltrasound

# 5.36 Re-admission to hospital within 30 Days?

**Description:** Indicator of re-admission to hospital within 30 days of surgery.

Field Name: po\_readmission

Purpose: Outcomes

**Data Collection:** Conditional Collection

Entered by Hospital staff/Surgeon

Collected When: [rct\_status]<>'6' and [po\_deceased(1)] = '0'

**Data Obligation:** Optional

**Permitted Values:** 

Code Description

1 Yes

0 No

## Data Source, Standard/ Terminology:

ACSQHC credentialing guidance relating to patient outcome monitoring and reporting

## 5.37 Return to theatre within 30 days?

**Description:** Indicator of return to theatre within 30 days of surgery

Field Name: po\_reoperation

Purpose: Outcomes

**Data Collection:** Conditional Collection

Entered by Hospital staff/Surgeon

Collected When: [rct\_status]<>'6' and [po\_deceased(1)] = '0'

**Data Obligation:** Optional

**Permitted Values:** 

Code	Description
1	Yes
0	No

## Data Source, Standard/ Terminology:

ACSQHC credentialing guidance relating to patient outcome monitoring and reporting

# 5.38 New onset of Complications?

**Description:** Indicator of whether there is a new onset complications

Field Name: po\_comp\_new

Purpose: Outcomes

**Data Collection:** Conditional Collection

Entered by Hospital staff/Surgeon

Collected When: [rct\_status] <> '6' and [po\_deceased(1)] = '0'

**Data Obligation:** Optional

**Permitted Values:** 

Code Description

1 Yes

0 No

## Data Source, Standard/ Terminology:

N/A

## 5.39 Complication Type

**Description:** The type of complications

Field Name: po\_comp\_type\_new

**Purpose:** Outcomes

**Data Collection:** Conditional Collection

Entered by Hospital staff/Surgeon

Collected When: [po\_comp\_new] = 1

**Data Obligation:** Optional

**Permitted Values:** 

Code	Description
1	Pain/ TendernessSite:
2	Vaginal bleeding
3	Mesh exposure/ Erosion/ Extrusion
4	Organ/ tissue injurySite:
5	Urethral obstruction
7	Discharge
8	Fistula formation
9	Dyspareunia
10	Recurrent UTI
11	Voiding difficulty
12	Overactive bladder syndrome
13	Urinary retention
6	MCCS Coded Complication

## Data Source, Standard/ Terminology:

ACSQHC credentialing guidance relating to patient outcome monitoring and reporting. REF:

https://www.safetyandquality.gov.au/publications-and-resources/resource-library/gui dance-hospital-credentialing-senior-medical-practitioners-undertake-transvaginal-mes h-surgery-stress-urinary-incontinence

## 5.40 Catheter still required after 14 Days (Retention)?

**Description:** Indicator of whether patient still requires use of catheter

Field Name: po\_cath\_required

Purpose: Outcomes

**Data Collection:** Conditional Collection

Entered by Hospital staff/Surgeon

Collected When: [rct\_status]<>'6' and [po\_deceased(1)] = '0' and [po\_comp\_type\_new(13)] =

111

Data Obligation: Optional

**Permitted Values:** 

Code Description

1 Catheter still required after 14 Days

Data Source, Standard/Terminology:

N/A

# 5.41 MCCS Complication Code

**Description:** Complication code including Category, Division, Pain, Time and Site in the format

CDpTxSy using https://www.ics.org/complication e,g, 2Bc-T3-S1 - Small mesh exposure with symptoms and dyspareunia diagnosed at between 2 and 12 months

and at the vaginal suture line

Field Name: po\_comp\_mccs

Purpose: Outcomes

**Data Collection:** Conditional Collection

Entered by Hospital staff/Surgeon

Collected When: [po\_comp\_type\_new(6)] = '1'

Data Obligation: Optional

Permitted Values: Text format

**Data Source, Standard/Terminology:** 

IUGA/ICS Joint Terminology and Classification of Complications Related Directly to the Insertion of Prostheses (Meshes, Implants, Tapes) or Grafts In Female Pelvic Floor

Surgery, https://www.ics.org/complication.

## 5.42 Pain/Tenderness

**Description:** Outcome of procedure with regards to pain/tenderness complication

Field Name: po\_comp\_pain

Purpose: Outcomes

**Data Collection:** Conditional Collection

Entered by Hospital staff/Surgeon

Collected When: [po\_comp\_type\_new(1)] = '1'

**Data Obligation:** Optional

**Permitted Values:** 

Code Description
 New onset
 Pre-existing persistent
 Pre-existing worsening

## **Data Source, Standard/Terminology:**

ACSQHC credentialing guidance relating to patient outcome monitoring and reporting

## 5.43 Site of Pain

**Description:** Pelvic pain location due with regards to pain/tenderness complication

Field Name: po\_comp\_pain\_site

Purpose: Outcomes

**Data Collection:** Conditional Collection

Entered by Hospital staff/Surgeon

Collected When: [po\_comp\_type\_new(1)] = '1'

Data Obligation: Optional

**Permitted Values:** 

Code Description

2 Vaginal

1 Groin

4 Pubic

3 Pelvic

## Data Source, Standard/Terminology:

 $https://www.ics.org/glossary/symptom/chronicpelvicpaincharacteristics? q=pelvic\%20 pain \ , ACSQHC \ credentialing \ guidance \ relating \ to \ patient \ outcome \ monitoring \ and \ reporting$ 

## 5.44 Vaginal bleeding

**Description:** Outcome of procedure with regards to vaginal bleeding complication

Field Name: po\_comp\_vag\_bleed

Purpose: Outcomes

**Data Collection:** Conditional Collection

Entered by Hospital staff/Surgeon

Collected When: [po\_comp\_type\_new(2)] = '1'

**Data Obligation:** Optional

**Permitted Values:** 

Code	Description
1	New onset
2	Pre-existing persistent
3	Pre-existing worsening

## **Data Source, Standard/Terminology:**

ACSQHC credentialing guidance relating to patient outcome monitoring and reporting

# 5.45 Mesh exposure/ Erosion

**Description:** Outcome of procedure with regards to mesh exposure/erosion complication

Field Name: po\_comp\_mesh\_exp

Purpose: Outcomes

**Data Collection:** Conditional Collection

Entered by Hospital staff/Surgeon

Collected When: [po\_comp\_type\_new(3)]='1'

**Data Obligation:** Optional

**Permitted Values:** 

Code	Description
1	New onset
2	Pre-existing persistent
3	Pre-existing worsening

## Data Source, Standard/ Terminology:

ACSQHC credentialing guidance relating to patient outcome monitoring and reporting

# 5.46 Organ/ Tissue injury

**Description:** Outcome of mesh complication procedure for treating organ or tissue injury

Field Name: po\_comp\_oti

**Purpose:** Outcomes

**Data Collection:** Conditional Collection

Entered by Hospital staff/Surgeon

Collected When: [po\_comp\_type\_new(4)]='1'

**Data Obligation:** Optional

**Permitted Values:** 

Code	Description	
1	New onset	
2	Pre-existing persistent	
3	Pre-existing worsening	

## Data Source, Standard/ Terminology:

ACSQHC credentialing guidance relating to patient outcome monitoring and reporting

## 5.47 Site of Injury

**Description:** Organ tissue injury site due to mesh complication procedure

Field Name: po\_comp\_oti\_site

**Purpose:** Outcomes

**Data Collection:** Conditional Collection

Entered by Hospital staff/Surgeon

Collected When: [po\_comp\_type\_new(4)]='1'

Data Obligation: Optional

**Permitted** 

Values:	Code	Description
	1	Urethral
	2	Bladder
	3	Vaginal
	4	Bowel
	5	Rectum
	6	Ureter
	7	Gastrointestinal tract
	8	Persistent neurologic injury

## Data Source, Standard/ Terminology:

https://www.ics.org/glossary/surgeryfemale/outcomes of female pelvic floors urgery reporting complications? q=organ % 20 tissue % 20 injury

## 5.48 Urethral Obstruction

**Description:** Outcome of mesh complication procedure for treating urethral obstruction

Field Name: po\_comp\_ureth\_obs

Purpose: Outcomes

**Data Collection:** Conditional Collection

Entered by Hospital staff/Surgeon

Collected When: [po\_comp\_type\_new(5)]='1'

**Data Obligation:** Optional

**Permitted Values:** 

Code	Description
1	New onset
2	Pre-existing persistent
3	Pre-existing worsening

## Data Source, Standard/ Terminology:

ACSQHC credentialing guidance relating to patient outcome monitoring and reporting

# 5.49 Vaginal Discharge Outcome

**Description:** Outcome of mesh complication procedure for treating vaginal discharge

po\_comp\_discharge Field Name:

**Purpose:** Outcomes

**Data Collection: Conditional Collection** 

Entered by Hospital staff/Surgeon

[po\_comp\_type\_new(7)] = '1' **Collected When:** 

**Data Obligation:** Optional

**Permitted Values:** 

Code	Description
1	New onset
2	Pre-existing persistent
3	Pre-existing worsening

## Data Source, Standard/ Terminology:

ACSQHC credentialing guidance relating to patient outcome monitoring and reporting

# 5.50 Fistula formation

**Description:** Outcome of mesh complication procedure for treating fistula formation

po\_comp\_fistula Field Name:

Purpose: Outcomes

**Data Collection:** Conditional Collection

Entered by Hospital staff/Surgeon

Collected When: [po\_comp\_type\_new(8)] = '1'

**Data Obligation:** Optional

**Permitted Values:** 

Code	Description
1	New onset
2	Pre-existing persistent
3	Pre-existing worsening

## Data Source, Standard/ Terminology:

ACSQHC credentialing guidance relating to patient outcome monitoring and reporting

# 5.51 Dyspareunia

**Description:** Outcome of mesh complication procedure for treating dyspareunia

Field Name: po\_comp\_dyspareunia

Purpose: Outcomes

**Data Collection:** Conditional Collection

Entered by Hospital staff/Surgeon

Collected When: [po\_comp\_type\_new(9)]='1'

Data Obligation: Optional

**Permitted Values:** 

Code	Description
1	New onset
2	Pre-existing persistent
3	Pre-existing worsening

## Data Source, Standard/ Terminology:

https://www.ics.org/glossary/symptom/dyspareunia?q=dyspareunia

## 5.52 Recurrent UTI

**Description:** This diagnosis by clinical history assisted by the results of diagnostic tests involves the

determination of the occurrence of at least three symptomatic and medically diagnosed

urinary tract infection (UTI) over the previous 12 months.

Field Name: po\_comp\_uti

**Purpose:** Outcomes

**Data Collection:** Conditional Collection

Entered by Hospital staff/Surgeon

Collected When: [po\_comp\_type\_new(10)] = '1'

**Data Obligation:** Optional

**Permitted Values:** 

Code	Description
1	New onset
2	Pre-existing persistent
3	Pre-existing worsening

## **Data Source, Standard/Terminology:**

https://www.ics.org/glossary/diagnosis/recurrenturinarytractinfectiondiagnosisfemale?q=Recurrent%20UTI

# 6 PROMs 6/12/24 Follow-Up Form

# 6.1 Q1. How many times do you pass urine in a day?

**Description:** Bladder Function Question 1

Field Name: prom\_6m\_bladder\_func\_q1

Purpose: Outcomes

**Data Collection:** Always Collected

**Entered by Patient** 

**Data Obligation:** Mandatory

**Permitted Values:** 

Code	Description
1	Up to 7
2	Between 8-10
3	Between 11-15
4	More than 15

## **Data Source, Standard/Terminology:**

https://urogynaecology.com.au/wp-content/uploads/2018/08/australian-pelvic-floor-questionnaire-V2018.pdf

## 6.2 Q2. How many times do you get up at night to pass urine?

**Description:** Bladder Function Question 2

Field Name: prom\_6m\_bladder\_func\_q2

Purpose: Outcomes

**Data Collection:** Always Collected

**Entered by Patient** 

**Data Obligation:** Mandatory

**Permitted Values:** 

Code	Description
1	0-1
2	2

3 3

4 More than 3 times

## **Data Source, Standard/Terminology:**

https://urogynaecology.com.au/wp-content/uploads/2018/08/australian-pelvic-floor-questionnaire-V2018.pdf

# 6.3 Q3. Do you wet the bed before you wake up at night?

**Description:** Bladder Function Question 3

Field Name: prom\_6m\_bladder\_fun\_q3

Purpose: Outcomes

**Data Collection:** Always Collected

**Entered by Patient** 

**Data Obligation:** Mandatory

**Permitted Values:** 

Code	Description
1	Never
2	Occasionally- less than once per week
3	Frequently- once or more per week
4	Always- every night

## Data Source, Standard/ Terminology:

https://urogynaecology.com.au/wp-content/uploads/2018/08/australian-pelvic-floor-questionnaire-V2018.pdf

# 6.4 Q4. Do you need to rush/hurry to pass urine when you get the urge?

**Description:** Bladder Function Question 4

Field Name: prom\_6m\_bladder\_func\_q4

Purpose: Outcomes

**Data Collection:** Always Collected

**Entered by Patient** 

**Data Obligation:** Mandatory

**Permitted Values:** 

Code	Description
1	Can hold on
2	Occasionally have to rush- less than once/ week
3	Frequently have to rush- once or more/week
4	Daily

## Data Source, Standard/ Terminology:

https://urogynaecology.com.au/wp-content/uploads/2018/08/australian-pelvic-floor-questionnaire-V2018.pdf

# 6.5 Q5. Does urine leak when you rush or hurry to the toilet or can't you make it in time?

**Description:** Bladder Function Question 5

Field Name: prom\_6m\_bladder\_func\_q5

Purpose: Outcomes

**Data Collection:** Always Collected

**Entered by Patient** 

**Data Obligation:** Mandatory

**Permitted Values:** 

Code	Description
1	Not at all
2	Occasionally- less than once per week
3	Frequently- once or more per week
4	Daily

## Data Source, Standard/ Terminology:

https://urogynaecology.com.au/wp-content/uploads/2018/08/australian-pelvic-floor-questionnaire-V2018.pdf

# 6.6 Q6. Do you leak with coughing, sneezing, laughing or exercising?

**Description:** Bladder Function Question 6

Field Name: prom\_6m\_bladder\_func\_q6

Purpose: Outcomes

**Data Collection:** Always Collected

**Entered by Patient** 

**Data Obligation:** Mandatory

**Permitted Values:** 

Code	Description
1	Not at all
2	Occasionally- less than once per week
3	Frequently- once or more per week
4	Daily

## **Data Source, Standard/Terminology:**

https://urogynaecology.com.au/wp-content/uploads/2018/08/australian-pelvic-floor-questionnaire-V2018.pdf

# 6.7 Q7. Is your urinary stream (urine flow) weak, prolonged or slow?

**Description:** Bladder Function Question 7

Field Name: prom\_6m\_bladder\_func\_q7

Purpose: Outcomes

**Data Collection:** Always Collected

Entered by Patient

**Data Obligation:** Mandatory

**Permitted Values:** 

Code	Description
1	Never
2	Occasionally- less than once per week
3	Frequently- once or more per week
4	Daily

## Data Source, Standard/ Terminology:

https://urogynaecology.com.au/wp-content/uploads/2018/08/australian-pelvic-floor-questionnaire-V2018.pdf

# 6.8 Q8. Do you have a feeling of incomplete bladder emptying?

**Description:** Bladder Function Question 8

Field Name: prom\_6m\_bladder\_func\_q8

Purpose: Outcomes

**Data Collection:** Always Collected

**Entered by Patient** 

**Data Obligation:** Mandatory

**Permitted Values:** 

Code	Description
1	Never
2	Occasionally- less than once per week
3	Frequently- once or more per week
4	Daily

## **Data Source, Standard/Terminology:**

https://urogynaecology.com.au/wp-content/uploads/2018/08/australian-pelvic-floor-questionnaire-V2018.pdf

## 6.9 Q9. Do you need to strain to empty your bladder?

**Description:** Bladder Function Question 9

Field Name: prom\_6m\_bladder\_func\_q9

Purpose: Outcomes

**Data Collection:** Always Collected

**Entered by Patient** 

**Data Obligation:** Mandatory

#### **Permitted Values:**

Code	Description
1	Never
2	Occasionally- less than once per week
3	Frequently- once or more per week
4	Daily

## **Data Source, Standard/Terminology:**

https://urogynaecology.com.au/wp-content/uploads/2018/08/australian-pelvic-floor-questionnaire-V2018.pdf

# 6.10 Q10. Do you have to wear pads because of urinary leakage?

**Description:** Bladder Function Question 10

Field Name: prom\_6m\_bladder\_func\_q10

Purpose: Outcomes

**Data Collection:** Always Collected

**Entered by Patient** 

**Data Obligation:** Mandatory

**Permitted Values:** 

Code	Description	
1	None- never	
2	As a precaution	
3	When exercising/during a cold	
4	Daily	

## Data Source, Standard/ Terminology:

https://urogynaecology.com.au/wp-content/uploads/2018/08/australian-pelvic-floor-questionnaire-V2018.pdf

# 6.11 Q11. Do you limit your fluid intake to decrease urinary leakage?

**Description:** Bladder Function Question 11

Field Name: prom\_6m\_bladder\_func\_q11

Purpose: Outcomes

**Data Collection:** Always Collected

**Entered by Patient** 

**Data Obligation:** Mandatory

**Permitted Values:** 

Code Description

Never

Before going out

Moderately

Always

## **Data Source, Standard/Terminology:**

https://urogynaecology.com.au/wp-content/uploads/2018/08/australian-pelvic-floor-questionnaire-V2018.pdf

# 6.12 Q12. Do you have frequent bladder infections?

**Description:** Bladder Function Question 12

Field Name: prom\_6m\_bladder\_func\_q12

Purpose: Outcomes

**Data Collection:** Always Collected

**Entered by Patient** 

**Data Obligation:** Mandatory

**Permitted Values:** 

Code	Description	
1	No	
2	1-3 per year	
3	4-12 per year	
4	More than one per month	

## **Data Source, Standard/Terminology:**

https://urogynaecology.com.au/wp-content/uploads/2018/08/australian-pelvic-floor-questionnaire-V2018.pdf

# 6.13 Q13. Do you have pain in your bladder or urethra when you empty your bladder?

**Description:** Bladder Function Question 13

Field Name: prom\_6m\_bladder\_func\_q13

Purpose: Outcomes

**Data Collection:** Always Collected

**Entered by Patient** 

**Data Obligation:** Mandatory

**Permitted Values:** 

Code	Description
1	Never
2	Occasionally- less than once per week
3	Frequently- once or more per week
4	Daily

## Data Source, Standard/ Terminology:

https://urogynaecology.com.au/wp-content/uploads/2018/08/australian-pelvic-floor-questionnaire-V2018.pdf

# 6.14 Q14. Does urine leakage affect your routine activities like recreation, socializing, sleeping, shopping etc?

**Description:** Bladder Function Question 14

Field Name: prom\_6m\_bladder\_func\_q14

Purpose: Outcomes

**Data Collection:** Always Collected

**Entered by Patient** 

**Data Obligation:** Mandatory

**Permitted Values:** 

Code	Description
1	Not at all
2	Slightly
3	Moderately
4	Greatly

## Data Source, Standard/ Terminology:

https://urogynaecology.com.au/wp-content/uploads/2018/08/australian-pelvic-floor-questionnaire-V2018.pdf

# 6.15 Q15. How much does your bladder problem bother you?

**Description:** Bladder Function Question 15

Field Name: prom\_6m\_bladder\_func\_q15

**Purpose:** Outcomes

**Data Collection:** Always Collected

**Entered by Patient** 

**Data Obligation:** Mandatory

**Permitted Values:** 

Code	Description
1	Not at all
2	Slightly
3	Moderately
4	Greatly

## **Data Source, Standard/Terminology:**

https://urogynaecology.com.au/wp-content/uploads/2018/08/australian-pelvic-floor-questionnaire-V2018.pdf

## 6.16 Other symptoms (haematuria, pain etc)

**Description:** Other bladder function symptoms not mentioned above.

Field Name: prom\_6m\_bladder\_func\_othr

Purpose: Outcomes

**Data Collection:** Always Collected

**Entered by Patient** 

**Data Obligation:** Optional

Permitted Values: Text format

Data Source, Standard/ Terminology:

https://urogynaecology.com.au/wp-content/uploads/2018/08/australian-pelvic-floor-

questionnaire-V2018.pdf

# 6.17 Q16. How often do you usually open your bowels?

**Description:** Bowel Function Question 16

Field Name: prom\_6m\_bwl\_func\_q16

Purpose: Outcomes

**Data Collection:** Always Collected

**Entered by Patient** 

**Data Obligation:** Mandatory

**Permitted Values:** 

Code	Description
1	Every other day or daily
2	Less than every 3 days
3	Less than once a week
4	More than once per day

## Data Source, Standard/ Terminology:

https://urogynaecology.com.au/wp-content/uploads/2018/08/australian-pelvic-floor-questionnaire-V2018.pdf

## 6.18 Q17. How is the consistency of your usual stool?

**Description:** Bowel Function Question 17

Field Name: prom\_6m\_bwl\_func\_q17

Purpose: Outcomes

**Data Collection:** Always Collected

**Entered by Patient** 

**Data Obligation:** Mandatory

**Permitted Values:** 

Code	Description
1	Soft
2	Firm
3	Hard (pebbles)
4	Variable
5	Watery

## **Data Source, Standard/Terminology:**

https://urogynaecology.com.au/wp-content/uploads/2018/08/australian-pelvic-floor-questionnaire-V2018.pdf

## 6.19 Q18. Do you have to strain to empty your bowels?

**Description:** Bowel Function Question 18

Field Name: prom\_6m\_bwl\_func\_q18

**Purpose:** Outcomes

**Data Collection:** Always Collected

Entered by Patient

**Data Obligation:** Mandatory

**Permitted Values:** 

Code	Description
1	Never
2	Occasionally- less than once per week
3	Frequently- once or more per week

4 Daily

## **Data Source, Standard/Terminology:**

https://urogynaecology.com.au/wp-content/uploads/2018/08/australian-pelvic-floor-questionnaire-V2018.pdf

## 6.20 Q19. Do you use laxatives to empty your bowels?

**Description:** Bowel Function Question 19

Field Name: prom\_6m\_bwl\_func\_q19

Purpose: Outcomes

**Data Collection:** Always Collected

**Entered by Patient** 

**Data Obligation:** Mandatory

**Permitted Values:** 

Code	Description
1	Never
2	Occasionally- less than once per week
3	Frequently- once or more per week
4	Daily

## Data Source, Standard/ Terminology:

https://urogynaecology.com.au/wp-content/uploads/2018/08/australian-pelvic-floor-questionnaire-V2018.pdf

## 6.21 Q20. Do you feel constipated?

**Description:** Bowel Function Question 20

Field Name: prom\_6m\_bwl\_func\_q20

Purpose: Outcomes

**Data Collection:** Always Collected

**Entered by Patient** 

**Data Obligation:** Mandatory

#### **Permitted Values:**

Code	Description
1	Never
2	Occasionally- less than once per week
3	Frequently- once or more per week
4	Daily

## **Data Source, Standard/Terminology:**

https://urogynaecology.com.au/wp-content/uploads/2018/08/australian-pelvic-floor-questionnaire-V2018.pdf

# 6.22 Q21. When you get wind or flatus, can you control it, or does wind leak?

**Description:** Bowel Function Question 21

Field Name: prom\_6m\_bwl\_func\_q21

**Purpose:** Outcomes

**Data Collection:** Always Collected

**Entered by Patient** 

**Data Obligation:** Mandatory

**Permitted Values:** 

Code	Description
1	Never
2	Occasionally- less than once per week
3	Frequently- once or more per week
4	Daily

## Data Source, Standard/ Terminology:

https://urogynaecology.com.au/wp-content/uploads/2018/08/australian-pelvic-floor-questionnaire-V2018.pdf

# 6.23 Q22. Do you get an overwhelming sense of urgency to empty bowels?

**Description:** Bowel Function Question 22

Field Name: prom\_6m\_bwl\_func\_q22

Purpose: Outcomes

**Data Collection:** Always Collected

**Entered by Patient** 

**Data Obligation:** Mandatory

**Permitted Values:** 

Code	Description
1	Never
2	Occasionally- less than once per week
3	Frequently- once or more per week
4	Daily

## **Data Source, Standard/Terminology:**

https://urogynaecology.com.au/wp-content/uploads/2018/08/australian-pelvic-floor-questionnaire-V2018.pdf

# 6.24 Q23. Do you leak watery stool when you don't mean to?

**Description:** Bowel Function Question 23

Field Name: prom\_6m\_bwl\_func\_q23

**Purpose:** Outcomes

**Data Collection:** Always Collected

**Entered by Patient** 

**Data Obligation:** Mandatory

**Permitted Values:** 

Code	Description
1	Never
2	Occasionally- less than once per week
3	Frequently- once or more per week
4	Daily

## Data Source, Standard/ Terminology:

https://urogynaecology.com.au/wp-content/uploads/2018/08/australian-pelvic-floor-questionnaire-V2018.pdf

## 6.25 Q24. Do you leak normal stool when you don't mean to?

**Description:** Bowel Function Question 24

Field Name: prom\_6m\_bwl\_func\_q24

Purpose: Outcomes

**Data Collection:** Always Collected

**Entered by Patient** 

**Data Obligation:** Mandatory

**Permitted Values:** 

Code	Description
1	Never
2	Occasionally- less than once per week
3	Frequently- once or more per week
4	Daily

## Data Source, Standard/ Terminology:

https://urogynaecology.com.au/wp-content/uploads/2018/08/australian-pelvic-floor-questionnaire-V2018.pdf

# 6.26 Q25. Do you have a feeling of incomplete bowel emptying?

**Description:** Bowel Function Question 25

Field Name: prom\_6m\_bwl\_func\_q25

Purpose: Outcomes

**Data Collection:** Always Collected

**Entered by Patient** 

**Data Obligation:** Mandatory

#### **Permitted Values:**

Code	Description
1	Never
2	Occasionally- less than once per week
3	Frequently- once or more per week
4	Daily

## **Data Source, Standard/Terminology:**

https://urogynaecology.com.au/wp-content/uploads/2018/08/australian-pelvic-floor-questionnaire-V2018.pdf

# 6.27 Q26. Do you use finger pressure to help empty your bowel?

**Description:** Bowel Function Question 26

Field Name: prom\_6m\_bwl\_func\_q26

Purpose: Outcomes

**Data Collection:** Always Collected

**Entered by Patient** 

**Data Obligation:** Mandatory

**Permitted Values:** 

Code	Description
1	Never
2	Occasionally- less than once per week
3	Frequently- once or more per week
4	Daily

## Data Source, Standard/ Terminology:

https://urogynaecology.com.au/wp-content/uploads/2018/08/australian-pelvic-floor-questionnaire-V2018.pdf

## 6.28 Q27. How much does your bowel problem bother you?

**Description:** Bowel Function Question 27

Field Name: prom\_6m\_bwl\_func\_q27

Purpose: Outcomes

**Data Collection:** Always Collected

Entered by Patient

**Data Obligation:** Mandatory

**Permitted Values:** 

Code	Description
1	Not at all
2	Slightly
3	Moderately
4	Greatly

### **Data Source, Standard/Terminology:**

https://urogynaecology.com.au/wp-content/uploads/2018/08/australian-pelvic-floor-questionnaire-V2018.pdf

# 6.29 Q28. Do you have a sensation of tissue protrusion/lump/bulging in your vagina?

**Description:** Prolapse Symptoms Question 28

Field Name: prom\_6m\_prolapse\_sym\_q28

Purpose: Outcomes

**Data Collection:** Always Collected

**Entered by Patient** 

**Data Obligation:** Mandatory

Code	Description
1	Never
2	Occasionally- less than once per week
3	Frequently- once or more per week

4 Daily

## **Data Source, Standard/Terminology:**

https://urogynaecology.com.au/wp-content/uploads/2018/08/australian-pelvic-floor-questionnaire-V2018.pdf

# 6.30 Q29. Do you experience vaginal pressure or heaviness or a dragging sensation?

**Description:** Prolapse Symptoms Question 29

Field Name: prom\_6m\_prolapse\_sym\_q29

Purpose: Outcomes

**Data Collection:** Always Collected

**Entered by Patient** 

**Data Obligation:** Mandatory

**Permitted Values:** 

Code	Description
1	Never
2	Occasionally- less than once per week
3	Frequently- once or more per week
4	Daily

## Data Source, Standard/ Terminology:

https://urogynaecology.com.au/wp-content/uploads/2018/08/australian-pelvic-floor-questionnaire-V2018.pdf

## 6.31 Q30. Do you have to push back your prolapse in order to void?

**Description:** Prolapse Symptoms Question 30

Field Name: prom\_6m\_prolapse\_sym\_q30

Purpose: Outcomes

**Data Collection:** Always Collected

**Entered by Patient** 

**Data Obligation:** Mandatory

**Permitted Values:** 

Code	Description
1	Never
2	Occasionally- less than once per week
3	Frequently- once or more per week
4	Daily

## Data Source, Standard/ Terminology:

https://urogynaecology.com.au/wp-content/uploads/2018/08/australian-pelvic-floor-questionnaire-V2018.pdf

# 6.32 Q31. Do you have to push back your prolapse to empty your bowels?

**Description:** Prolapse Symptoms Question 31

Field Name: prom\_6m\_prolapse\_sym\_q31

**Purpose:** Outcomes

**Data Collection:** Always Collected

**Entered by Patient** 

**Data Obligation:** Mandatory

**Permitted Values:** 

Code	Description
1	Never
2	Occasionally- less than once per week
3	Frequently- once or more per week
4	Daily

### **Data Source, Standard/Terminology:**

https://urogynaecology.com.au/wp-content/uploads/2018/08/australian-pelvic-floor-questionnaire-V2018.pdf

## 6.33 Q32. How much does your prolapse bother you?

**Description:** Prolapse Symptoms Question 32

Field Name: prom\_6m\_prolapse\_sym\_q32

Purpose: Outcomes

**Data Collection:** Always Collected

**Entered by Patient** 

**Data Obligation:** Mandatory

**Permitted Values:** 

Code	Description
1	Not at all
2	Slightly
3	Moderately
4	Greatly

### **Data Source, Standard/Terminology:**

https://urogynaecology.com.au/wp-content/uploads/2018/08/australian-pelvic-floor-questionnaire-V2018.pdf

# 6.34 Other symptoms: (problems: walking/sitting, pain, vaginal bleeding)

**Description:** Other Prolapse Symptoms not mentioned above

Field Name: prom\_6m\_prolapse\_sym\_othr

Purpose: Outcomes

**Data Collection:** Always Collected

**Entered by Patient** 

**Data Obligation:** Optional

Permitted Values: Text format

## **Data Source, Standard/Terminology:**

https://urogynaecology.com.au/wp-content/uploads/2018/08/australian-pelvic-floor-

questionnaire-V2018.pdf

## 6.35 Q33. Are you sexually active?

**Description:** Sexual Function Question 33

Field Name: prom\_6m\_sexual\_func\_q33

Purpose: Outcomes

**Data Collection:** Always Collected

**Entered by Patient** 

**Data Obligation:** Mandatory

**Permitted Values:** 

Code Description

1 No

2 Less than once per week

3 Once or more per week

4 Daily or most days

### **Data Source, Standard/Terminology:**

https://urogynaecology.com.au/wp-content/uploads/2018/08/australian-pelvic-floor-questionnaire-V2018.pdf

# 6.36 Q34. If you are not sexually active, please tell us why?

**Description:** Sexual Function Question 34

Field Name: prom\_6m\_sexual\_func\_q34

Purpose: Outcomes

**Data Collection:** Always Collected

**Entered by Patient** 

**Data Obligation:** Mandatory

Code	Description
1	Do not have a partner
2	I am not interested
3	My partner is unable
4	Vaginal dryness

5 Too painful

6 Embarrassment due to the prolapse/incontinence

7 Other reasons

#### **Data Source, Standard/Terminology:**

https://urogynaecology.com.au/wp-content/uploads/2018/08/australian-pelvic-floor-questionnaire-V2018.pdf

## 6.37 Q35. Do you have sufficient vaginal lubrication during intercourse?

**Description:** Sexual Function Question 35

Field Name: prom\_6m\_sexual\_func\_q35

Purpose: Outcomes

**Data Collection:** Conditional Collection

**Entered by Patient** 

Collected When: [prom\_6m\_sexual\_func\_q33] <> '1'

**Data Obligation:** Mandatory

**Permitted Values:** 

Code Description

1 Yes

0 No

#### Data Source, Standard/Terminology:

https://urogynaecology.com.au/wp-content/uploads/2018/08/australian-pelvic-floor-questionnaire-V2018.pdf

## 6.38 Q36. During intercourse vaginal sensation is:

**Description:** Sexual Function Question 36

Field Name: prom\_6m\_sexual\_func\_q36

Purpose: Outcomes

**Data Collection:** Conditional Collection

**Entered by Patient** 

Collected When: [prom\_6m\_sexual\_func\_q33] <> '1'

**Data Obligation:** Mandatory

**Permitted Values:** 

Code	Description
1	Normal/ pleasant
2	Minimal
3	Painful
4	None

## Data Source, Standard/ Terminology:

https://urogynaecology.com.au/wp-content/uploads/2018/08/australian-pelvic-floor-questionnaire-V2018.pdf

# 6.39 Q37. Do you feel that your vagina is too loose or lax?

**Description:** Sexual Function Question 37

Field Name: prom\_6m\_sexual\_func\_q37

**Purpose:** Outcomes

**Data Collection:** Conditional Collection

**Entered by Patient** 

Collected When: [prom\_6m\_sexual\_func\_q33] <> '1'

**Data Obligation:** Mandatory

**Permitted Values:** 

Code	Description
1	Never
2	Occasionally
3	Frequently
4	Always

### **Data Source, Standard/Terminology:**

https://urogynaecology.com.au/wp-content/uploads/2018/08/australian-pelvic-floor-questionnaire-V2018.pdf

## 6.40 Q38. Do you feel that your vagina is too tight?

**Description:** Sexual Function Question 38

Field Name: prom\_6m\_sexual\_func\_q38

Purpose: Outcomes

**Data Collection:** Conditional Collection

**Entered by Patient** 

Collected When: [prom\_6m\_sexual\_func\_q33] <> '1'

**Data Obligation:** Mandatory

**Permitted Values:** 

Code	Description
1	Never
2	Occasionally
3	Frequently
4	Always

### **Data Source, Standard/Terminology:**

https://urogynaecology.com.au/wp-content/uploads/2018/08/australian-pelvic-floor-questionnaire-V2018.pdf

# 6.41 Q39. Do you experience pain with sexual intercourse?

**Description:** Sexual Function Question 39

Field Name: prom\_6m\_sexual\_func\_q39

Purpose: Outcomes

**Data Collection:** Conditional Collection

**Entered by Patient** 

Collected When: [prom\_6m\_sexual\_func\_q33] <> '1'

**Data Obligation:** Mandatory

Code	Description
1	Never
2	Occasionally

3 Frequently

4 Always

### **Data Source, Standard/Terminology:**

https://urogynaecology.com.au/wp-content/uploads/2018/08/australian-pelvic-floor-questionnaire-V2018.pdf

# 6.42 Q40. Where does the pain during intercourse occur?

**Description:** Sexual Function Question 40

Field Name: prom\_6m\_sexual\_func\_q40

Purpose: Outcomes

**Data Collection:** Conditional Collection

**Entered by Patient** 

Collected When: [prom\_6m\_sexual\_func\_q33] <> '1'

**Data Obligation:** Mandatory

**Permitted Values:** 

Code	Description
1	Not applicable, I do not have pain
2	At the entrance to the vagina
3	Deep inside, in the pelvis
4	Both at the entrance & in the pelvis

## Data Source, Standard/ Terminology:

https://urogynaecology.com.au/wp-content/uploads/2018/08/australian-pelvic-floor-questionnaire-V2018.pdf

## 6.43 Q41. Do you leak urine during sexual intercourse?

**Description:** Sexual Function Question 41

Field Name: prom\_6m\_sexual\_func\_q41

Purpose: Outcomes

**Data Collection:** Conditional Collection

**Entered by Patient** 

Collected When: [prom\_6m\_sexual\_func\_q33] <> '1'

**Data Obligation:** Mandatory

**Permitted Values:** 

Code	Description
1	Never
2	Occasionally
3	Frequently
4	Always

### **Data Source, Standard/Terminology:**

https://urogynaecology.com.au/wp-content/uploads/2018/08/australian-pelvic-floor-questionnaire-V2018.pdf

# 6.44 Q42. How much do these sexual issues bother you?

**Description:** Sexual Function Question 42

Field Name: prom\_6m\_sexual\_func\_q42

Purpose: Outcomes

**Data Collection:** Always Collected

**Entered by Patient** 

**Data Obligation:** Mandatory

**Permitted Values:** 

Code	Description
1	Not applicable
2	Not at all
3	Slightly
4	Moderately
5	Greatly

## Data Source, Standard/ Terminology:

https://urogynaecology.com.au/wp-content/uploads/2018/08/australian-pelvic-floor-questionnaire-V2018.pdf

## 6.45 Other symptoms? (faecal incontinence, vaginismus etc.)

**Description:** Other Sexual function symptoms not listed above

Field Name: prom\_6m\_sexual\_func\_othr

Purpose: Outcomes

**Data Collection:** Always Collected

**Entered by Patient** 

**Data Obligation:** Optional

Permitted Values: Text format

**Data Source, Standard/Terminology:** 

https://urogynaecology.com.au/wp-content/uploads/2018/08/australian-pelvic-floor-

questionnaire-V2018.pdf

## 6.46 Post-Operative Conditions

**Description:** The best description of the post-operative condition now, compared with how it was

before the surgery

Field Name: prom\_6m\_pgii\_q43

Purpose: Outcomes

**Data Collection:** Always Collected

**Entered by Patient** 

**Data Obligation:** Mandatory

Code	Description
1	1- Very much better
2	2- Much better
3	3- A little better
4	4- No change
5	5- A little worse
6	6- Much worse
7	7- Very much worse

## Data Source, Standard/ Terminology:

https://bsug.org.uk/budcms/includes/kcfinder/upload/files/BSUG%20PGI-I%20Incontinence.pdf

The Patient Reported Outcomes Measures (PROMs) are also gathered using the EuroQoL 5-Dimension 5-Level (EQ-5D-5L) instrument, a standardised tool developed to assess health outcomes. Due to copyright restrictions, we are unable to provide detailed visibility into the individual data collection items of the tool.

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