

Patient Initials Date of Birth / / Trial Number **R**

Date of Surgery / /

This CRF should be completed prior to randomisation.

A. Surgery Details

1 min **Duration of surgery** 6 units **Blood transfused**

2 days **Duration of hospital stay** 7 **ASA grade**

3 **Nephrectomy**
 Total (radical)
 Partial

4 **Laterality**
 Left
 Right
 Bilateral

5 ml **Measured blood loss** 8 kg/m² **BMI on date of surgery**

7 **ASA grade**
 1 – A normal healthy patient
 2 – A patient with mild systemic disease
 3 – A patient with severe systemic disease
 4 – A patient with severe systemic disease that is a constant threat to life
 5 – A moribund patient who is not expected to survive without the operation

B. Surgeon Details

1 **Grade of surgeon**
 Consultant/attending surgeon
 Trainee surgeon


2 **Name of surgeon**

3 **Surgery hospital**

C. Surgical Approach

1 **Surgical approach**
 Open loin
 Open transabdominal
 Open thoraco-abdominal
 Hand-assisted laparoscopic
 Robotic
 Minimally invasive transperitoneal
 Minimally invasive retroperitoneal
 Other, please specify:

D. Lymph Node Dissection

1 **Was lymph node dissection (LND) performed?**
 No —  go to section E
 Yes

Please indicate below which groups were and were not removed during the LND:

2 **Hilar** 3 **Paraaortic** 4 **Paracaval** 5 **Interaortocaval** 6 **Retrocaval**

No No No No No
 Yes Yes Yes Yes Yes

Signature Printed Name Date Completed / /

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E. Additional Procedures**1 Was there a venous extension that was removed?**

- No —  go to question E3
 Yes

2 Level of venous extension

- Tumour thrombus confined to renal vein
 Tumour thrombi extend into IVC < 2 cm from the renal vein ostium
 Tumour thrombi extend \geq 2 cm from the renal vein ostium but are below the level of hepatic veins
 Tumour thrombi extend above the hepatic veins but are below the cavo-atrial junction
 Tumour thrombi extend above the cavo-atrial junction to the atrium

3 Ipsilateral adrenalectomy

- No
 Yes

4 Excision of other structures/organs

- No
 Yes, please specify:

5 Additional procedures

- No
 Yes, please specify:

F. Complications**1 Intra-operative complications**

- No
 Yes, please specify:

2 Post-operative complications

- No
 Yes, please specify:

3 Clavien-Dindo classification (skip if F1 and F2 are no)

- Grade I — Any deviation from the normal postoperative course without the need for pharmacological treatment or surgical, endoscopic and radiological interventions. Allowed therapeutic regimens are: drugs as antiemetics, antipyretics, analgetics, diuretics and electrolytes and physiotherapy. This grade also includes wound infections opened at the bedside
 Grade II — Requiring pharmacological treatment with drugs other than such allowed for grade I complications. Blood transfusions and total parenteral nutrition are also included
 Grade IIIa — Requiring surgical, endoscopic or radiological intervention not under general anaesthetic
 Grade IIIb — Requiring surgical, endoscopic or radiological intervention under general anaesthetic
 Grade IVa — Life-threatening complication (including CNS complications) requiring IC/ICU management (single organ dysfunction)
 Grade IVb — Life-threatening complication (including CNS complications) requiring IC/ICU management (multiple organ dysfunction)
 Grade V — Death of a patient

① If both F1 and F2 are answered yes, please provide the highest Clavien-Dindo classification.

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