

Subject Consented
Subject ID
Surgeon's Name
Surgeon's Email
Has this subject consented to be a part of this study per the IRB approval at ____?

Initial Enrollment
Age
Sex
Body Mass Index
Current Tobacco Use
Current Narcotic Medication Use
Diabetes
Hemoglobin A1C within the past three months
Payer Status
Race
Marital Status

<i>Shoulder Characteristics</i>
Laterality
Sinus Tract Communicating with Prosthesis
Unexpected Wound Drainage
Radiographic Humeral Loosening
Radiographic Humeral Osteolysis
Radiographic Glenoid Loosening
Skin/Wound Erythema

Initial Enrollment (PHI)
First Name <i>(Recommended, required if patient is receiving email surveys from REDCap)</i>
Last Name <i>(Recommended, required if patient is receiving email surveys from REDCap)</i>
Medical Record Number <i>(Optional)</i>
Date of Birth <i>(Optional)</i>
Anticipated Surgery Date <i>(Required)</i>
Preferred Method of Contact for Subject's Pre-Op Questionnaires <i>(Required)</i>
Preferred Method of Contact for Subject's Follow-Up Questionnaires <i>(Required)</i>
Subject's Email Address <i>(Required if patient is receiving email surveys from REDCap)</i>
Subject's Preferred Contact Method, If Not Email <i>(Optional)</i>
Telephone Number <i>(Optional)</i>
Street Address <i>(Optional)</i>
City, State Zip Code <i>(Optional)</i>

Contact Information Notes (*Optional*)

Surgery Date Check (PHI)

Is the revision surgery for *subject ID* still scheduled for tomorrow?

Was the surgery date re-scheduled or cancelled?

Surgery Date - Rescheduled Later

Please describe the reason for cancelling the surgery.

Preoperative & Intraoperative Characteristics

Did the patient receive antibiotics within 3 months prior to surgery?

Serum ESR Obtained

Serum ESR Value

Serum ESR Level Above Institution Threshold

Serum CRP Obtained

Serum CRP Value

Serum CRP Level Above Institution Threshold

Serum D-dimer Obtained

Serum D-dimer Value

Serum D-dimer Level Above Institution Threshold

Was a synovial aspiration performed in clinic?

Pre-revision arthroscopic or open biopsy

Intra-Operative Data

Indication for revision

Antibiotic Type Administered in OR

Timing of Antibiotic Administration

ASA Class

Was a synovial aspiration performed in OR?

Frozen Section

Number of neutrophils per 5 HPF

Intra-operative humeral component loosening

Intra-operative glenoid component loosening

Gross intra-articular pus (definite)

Cloudy fluid

Humeral membrane

Osteolysis

Cuff Tendons Torn/Absent

Type of Prosthesis Explanted

Type of Surgery Performed

Do you have definitive plans to bring the patient back to the operating room for another procedure?

Type of subsequent procedure planned

Timing of subsequent procedure planned

Type of Prosthesis Implanted

Allograft used

Did you implant the humeral component with cement?

Humeral Component with Cement - Antibiotic Type

Home Prep

Surgical Prep

Irrigation

Other Infection Adjuvant Treatments

Surgery Date Confirm (PHI)

Please confirm the date of surgery

Microbiology

Clinic Aspiration, OR Aspiration, and Pre-Revision Biopsy Results

Synovial neutrophil % from clinic aspiration

Synovial neutrophil percentage from clinic aspiration

Synovial WBC from clinic aspiration

Synovial WBC value from clinic aspiration

Synovial alpha-defensin from clinic aspiration

Synovial alpha-defensin value from clinic aspiration

Synovial D-dimer from clinic aspiration

Synovial D-dimer value from clinic aspiration

Synovial neutrophil % from OR aspiration

Synovial neutrophil percentage from OR aspiration

Synovial WBC from OR aspiration

Synovial WBC value from OR aspiration

Synovial alpha-defensin from OR aspiration

Synovial alpha-defensin value from OR aspiration

Synovial D-dimer from OR aspiration

Pre-revision arthroscopic biopsy - Number of cultures taken

Pre-revision arthroscopic biopsy - Number of cultures positive

Pre-revision arthroscopic biopsy - Type of bacteria

Pre-revision open biopsy - Number of cultures taken

Pre-revision open biopsy - Number of cultures positive

Pre-revision open biopsy - Type of bacteria

Postop Management

What was the initial postop antibiotic regimen upon discharge from the hospital after revision surgery?

How long were IV antibiotics administered?

Did the patient need to be restarted on IV antibiotics / PICC line after discharge?

How long were IV antibiotics administered?

What was / is the total length of antibiotic therapy?

Did postop antibiotic regimen change as a result of cultures?

Has patient had unexpected wound drainage?

Has patient had any complications related to antibiotic therapy?

PO: What types of complications?

PO: Other types of complications

IV: What types of complications?

IV: Other types of complications

Culture Results

Culture Type

Cutibacterium

Coagulase Negative Staph

Other Bacteria

Other Bacteria

Other Bacteria

Annual Post-Op Update

Signs/symptoms of obvious infection since last survey

Signs and Symptoms

Radiographic Failure

Subsequent revision surgery

Number of revision surgeries

Revision Type

Time elapsed since initial revision

Number of cultures taken

Number of cultures positive

Bacterial types grown

Bacteria Type - Other (1 Culture)

Bacteria Type - Other (>=2 Culture)

Simple Shoulder Test

Is your shoulder comfortable with your arm at rest by your side?

Does your shoulder allow you to sleep comfortably?

Can you reach the small of your back to tuck in your shirt with your hand?

Can you place your hand behind your head with the elbow straight out to the side?
Can you place a coin on a shelf at the level of your shoulder without bending your elbow?
Can you lift one pound (a full pint container) to the level of your shoulder without bending your elbow?
Can you lift eight pounds (a full gallon container) to the level of your shoulder without bending your elbow?
Can you carry twenty pounds at your side with this extremity?
Do you think you can toss a softball under-hand twenty yards with this extremity?
Do you think you can toss a softball over-hand twenty yards with this extremity?
Can you wash the back of your opposite shoulder with this extremity?
Would your shoulder allow you to work full-time at your regular job?
Aggregate Scores
Simple Shoulder Test Score

SANE Score
How would you rate your _____ shoulder today on a scale of 0 to 100, with 100 being normal?

ASES Score
Intensity of Pain?
Please list your usual work (employment or housework)
Please list your usual sport or leisure activity
Is it difficult for you to put on a coat?
Is it difficult for you to sleep on the affected side?
Is it difficult for you to wash your back/do up bra?
Is it difficult for you manage toileting?
Is it difficult for you to comb your hair?
Is it difficult for you to reach a high shelf?
Is it difficult for you to lift 10lbs. (4.5kg) above your shoulder?
Is it difficult for you to throw a ball overhand?
Is it difficult for you to do your usual work?
Is it difficult for you to do your usual sport/leisure activity?
Aggregate Scores
ASES Score - Aggregate

VR-12
<i>This survey asks for your views about your health. This information will help you keep track of how you feel and how well you are able to do your usual activities. Answer each question by choosing just one answer. If you are unsure about how to answer a question, please give the best answer you can.</i>
In general, would you say your health is:

The following questions are about activities you might do during a typical day. Does your health limit you in these activities? If so, how much?

Moderate activities, such as moving a table, pushing a vacuum cleaner, bowling, or playing golf
Climbing several flights of stairs

During the past 4 weeks, how much time have you had any of the following problems with your work or other regular daily activities as a result of your physical health?

Accomplished less than you would like?

Were limited in the kind of work or other activities

During the past 4 weeks, how much of the time have you had any of the following problems with your work or other regular daily activities as a result of any emotional problems (such as feeling depressed or anxious)

Accomplished less than you would like

Did work or other activities less carefully than usual

During the past 4 weeks, how much did pain interfere with your normal work (both work outside of home and housework)?

The next questions are about how you feel and how things have been during the past 4 weeks. For each question, give one answer that comes closest to the way you have been feeling. How much of the time during the past 4 weeks:

Have you felt calm and peaceful?

Did you have a lot of energy?

Have you felt downhearted and depressed?

During the past four weeks, how much of the time has your physical health or emotional problems interfered with your social activities?

Aggregate Scores

Physical Component Score - Aggregate Score

Mental Component Score - Aggregate Score

SF-12

This survey asks for your views about your health. This information will help you keep track of how you feel and how well you are able to do your usual activities. Answer each question by choosing just one answer. If you are unsure about how to answer a question, please give the best answer you can.

In general, would you say your health is:

The following questions are about activities you might do during a typical day. Does your health limit you in these activities? If so, how much?

Moderate activities, such as moving a table, pushing a vacuum cleaner, bowling, or playing golf
Climbing several flights of stairs

During the past 4 weeks, how much time have you had any of the following problems with your work or other regular daily activities as a result of your physical health?

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During the past 4 weeks, how much of the time have you had any of the following problems with your work or other regular daily activities as a result of any emotional problems (such as feeling depressed or anxious)?

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Aggregate Scores

Physical Component Score - Aggregate Score

Mental Component Score - Aggregate Score

Subject Withdrawal

Study Completion Information

Should the patient stop receiving follow-up questionnaires?

Reason patient did not complete study

List other reason for not completing study