**CONGENITAL DIAPHRAGMATIC HERNIA FORM**

**(To be used for patients born on or after 1/1/2015)**

Center #:  Patient #:

Date of Birth:  Time of Birth:

Inborn

Outborn: Date of Admission:  Time of Admission:

Sex:  M  F

Race:  Asian  Black  Hispanic  Native American  White  Other:

EGA (at birth):  weeks

Birthweight:  kg Length:  cm Head circumference:  cm

APGARs (1/5/10): //SNAP II Score (if done):

CPR (Cardio-Pulmonary-Resuscitation) in Delivery Room:  Yes  No

Method of Delivery:  Vaginal (Spontaneous)  Vaginal (Induced)

C-section (Elective)  C-section (Urgent/Non-elective)

Prenatal diagnosis of CDH:  Yes  No

If **Yes**, diagnosis made at  weeks gestation

[Please provide Ultrasound and/or MRI information on pages 7-8 if data available]

If **No**, diagnosis made at Date:  Time:

Prenatal steroids:  Yes  No  Unknown- If yes, # doses:

Surfactant (after delivery):  Yes  No  Unknown- If yes, # doses:

Associated Non-Cardiac Anomalies (Check all that apply and please provide DX if known):

Karyotype sent:  Yes  No, if Yes, result:  Normal  Abnormal  Pending/Unknown

Chromosomal – If Yes, please describe:

Other Anomalies – If Yes, please describe:

**Associated Structural Cardiac Anomalies (Check all that apply):**

ASD

VSD

AVSD (AV Canal)

Pulmonic Valvular Stenosis/Atresia

Pulmonary Artery Stenosis/Atresia

TOF (Tetralogy of Fallot)

Coarctation of Aorta

TOGV (Transposition of Great Vessels or Transposition of Great Arteries)

### Truncus Arteriosus

Complex biventricular anatomy (i.e. heterotaxy syndrome)

Anomalous Pulmonary Venous Return

Single Ventricle Variant (hypoplastic left heart syndrome)

Other- please describe:

(You may explain or elaborate on cardiac diagnosis and /or treatment in the Comments section at the end of the form)

Pulmonary Hypertension (PHTN):

First ECHO done on Date:

PHTN:  None  < 2/3 systemic  between 2/3 and systemic  > systemic

PDA:  L to R  Bidirectional  R to L  No shunt (closed)

Diameter of ductus:       mm

Atrial shunt:  L to R  Bidirectional  R to L  No shunt (closed)

Tricuspid regurgitation peak velocity:       m/sec Systemic BP       /

RV size:  Normal  Dilated

RV function:  Normal  Impaired (If impaired,  Systolic dysfunction  Diastolic dysfunction

LV size:  Below normal  Normal  Dilated

LV function:  Normal  Impaired

Plasma level       (pg/ml) of  BNP or  pro\_BNP

To calculate modified McGoon Index:

Diameter of Aorta:       mm

Diameter of Left Pulmonary Artery:       mm

Diameter of Right Pulmonary Artery:       mm

Second (closest to pre-op) ECHO done on Date:

PHTN:  None  < 2/3 systemic  between 2/3 and systemic  > systemic

PDA:  L to R  Bidirectional  R to L  No shunt (closed)

Diameter of ductus:       mm

Atrial shunt:  L to R  Bidirectional  R to L  No shunt (closed)

Tricuspid regurgitation peak velocity:       m/sec Systemic BP       /

RV size:  Normal  Dilated

RV function:  Normal  Impaired (If impaired,  Systolic dysfunction  Diastolic dysfunction

LV size:  Below normal  Normal  Dilated

LV function:  Normal  Impaired

Plasma level       (pg/ml) of  BNP or  pro\_BNP

Last (closest to end of hospital course) ECHO done on Date:

PHTN:  None  < 2/3 systemic  between 2/3 and systemic  > systemic

PDA:  L to R  Bidirectional  R to L  No shunt (closed)

Diameter of ductus:       mm

Atrial shunt:  L to R  Bidirectional  R to L  No shunt (closed)

Tricuspid regurgitation peak velocity:       m/sec Systemic BP       /

RV size:  Normal  Dilated

RV function:  Normal  Impaired (If impaired,  Systolic dysfunction  Diastolic dysfunction

LV size:  Below normal  Normal  Dilated

LV function:  Normal  Impaired

Plasma level       (pg/ml) of  BNP or  pro\_BNP

Treatment of Pulmonary Hypertension (PHTN):

|  |  |  |  |
| --- | --- | --- | --- |
| Check if Used (use “Other” for additional courses of iNO as well as unlisted medications) | | Date Started | Date Ended |
|  | Inhaled Nitric Oxide –  Maximum dose:  ppm |  |  |
|  | Sildenafil  Oral  iv |  |  |
|  | Endothelial Receptor Blockade |  |  |
|  | Prostacyclin |  |  |
|  | Alprostadil (PGE1) |  |  |
|  | Milrinone |  |  |
|  | Other (specify): |  |  |
|  | Other (specify): |  |  |
|  | Other (specify): |  |  |
|  | Other (specify): |  |  |
|  | Other (specify): |  |  |

**Ventilation:**

Intubated at: Date:  Time:

Extubated at: Date:   Never extubated

Values in the first 24 hours of life (pre-ECMO):

|  |  |
| --- | --- |
| Highest **pre**-ductal PaO2:  mm Hg (or kPascal)  O2 sat: % | Highest **post**-ductal PaO2:  mm Hg (or kPascal)  O2 sat: % |
| Highest PaCO2:  mm Hg (or kPascal) | Lowest PaCO2:  mm Hg (or kPascal) |

**Pneumothorax (PRIOR to repair):**  Yes  No

If Yes, Date of diagnosis:

Side of pneumothorax:  Left  Right  Bilateral

Intervention (check all that apply):

None (observation only)

Thoracentesis

Chest tube

ECMO

Other:

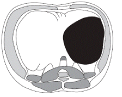
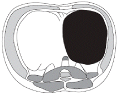
Date of resolution:

**Side of Diaphragmatic Hernia:**  Left  Right  Bilateral  Central

**Repair:** Doneon Date:  Time:  Not repaired

Location where repair done:  OR/Operating theatre  NICU/Intensive care unit

Diaphragm Defect:  A  B  C  D

(Have surgeon identify which diagram (A, B, C, D) most closely approximates defect noted intra-operatively. Orientation: diagram is drawn with the diaphragm (defect) on the patient’s left and you are looking up from the abdomen towards the chest)

Type of Diaphragm Repair:  Primary  Patch

If patch:  PTFE  Alloderm  Dacron  Mesh plug

Muscle flap  Surgisis  Other:

Hernia Sac:  Yes  No

Liver:  Chest  Abdomen

Approach:  Subcostal  Thoracic  Thoracoscopic  Laparoscopic

Both subcostal and Thoracic  Other:

Hepato-pulmonary fusion:  Yes  No

Pulmonary sequestration:  Yes  No

**ECMO Data:**

Placed on ECMO: started at Date:  Time:

ended at Date:  Time:

ECMO Mode:  VA  VA (+V)  VV (DL)  VV to VA

Last ABG (blood gas) before going on ECMO:

PaO2:  mm Hg (or kPascal) Preductal Postductal

O2 Sat:  % Preductal Postductal

PaCO2:  mm Hg (or kPascal)

Second ECMO run: started at Date:  Time:

ended at Date:  Time:

ECMO Mode:  VA  VA (+V)  VV (DL)  VV to VA

**Other Surgical Procedures** (Check all that apply and provide dates):

|  |  |  |
| --- | --- | --- |
|  | Repair of recurrent CDH | Date: |
|  | Gastrostomy tube (no fundoplication) | Date: |
|  | Fundoplication, G-tube  Yes  No | Date: |
|  | Lysis of adhesions / surgery for SBO | Date: |
|  | Closure of ventral hernia | Date: |
|  | Cardiac catheterization | Date: |
|  | Cardiac surgery (details: ) | Date: |
|  | Other surgery (details: ) | Date: |

**Outcome:**

**Death**: Date of death:  Time of death:

**Survived** to discharge home or transfer

Transferred out of NICU/Intensive Care Unit on Date:

Discharged home or transferred on Date: **-** disposition:

Discharged home

Transferred to another hospital

Transferred to in-hospital service for long-term care

Pulmonary Status at **30 Days of Age**:

Extubated and on room air

Extubated and on nasal cannula

Nasal CPAP

Mechanical ventilation

ECMO

Pulmonary status at Time of **discharge/transfer**:

Extubated and on room air

Extubated and on nasal cannula

Nasal CPAP

Mechanical ventilation

Eye exam:  Normal  Abnormal  Not done

Head U/S:  Normal  Abnormal  Not done

Head CT:  Normal  Abnormal  Not done

Cranial MRI:  Normal  Abnormal  Not done

Hearing eval:  Normal  Abnormal  Not done

At Time of (or closest to) discharge:

Weight:  kg Length:  cm Head circumference:  cm

Feeding at Time of discharge/transfer:

PO (> 50 % feeds po)

NG (≥ 50 % feeds by gavage)

GT (≥ 50 % feeds by G-tube)

Date on full enteral feeds:

GER (Gastro-esophageal reflux) diagnosed:  Yes  No

**Discharge medications** (Check all that apply):

|  |  |
| --- | --- |
| Respiratory:  Diuretics  Inhaled bronchodilators  Inhaled steroids  iNO  Prostacyclin  Sildenafil  Theophylline  Antibiotics  Seizure medications  Sedatives/analgesics | Gastrointestinal:  Prokinetic agents  Antacids(ranitidine, proton pump inhibitors, etc.)  Erythromycin (used to increase motility)  Hyperalimentation  Cardiac:  Digoxin  Captopril  Aspirin |

(Any medications not listed here, please list in comments section below)

Additional Comments about this Patient: