Pre-Registration Questionnaire

The taTME didactic session is open to all registrants for a nominal fee. The hands-on cadaver lab will be limited to surgeons with prerequisite skills in minimally invasive TME and Transanal endoscopic surgery (TEM, TEO, SILS, or TAMIS). Participants should plan to attend the course with a surgical partner from their own institution OR a partner can be assigned to you. Both participants are required to pay the registration fee. Interested surgeons must complete the following questionnaire. Individuals who meet the eligibility requirements will be enrolled in the course, and will receive a confirmation email. First-come, first-served.

SURGEON #1

Name  Hospital/Institution

City  State/Province  Country

Email  Telephone Number

1. What is your surgical specialty? □ Colorectal surgeon  □ Surgical Oncologist  □ Other __________________________

2. How many years have you been in clinical practice (post-fellowship)? ____________________________

3. What is your combined annual volume of rectal cancer resections (TME) using MIS Lap/Robotics/SILS? __________________

4. What is your combined annual volume of TEM/TEO/ TAMIS/SILS cases? ____________________________

5. What is your combined annual volume of intersphincteric/TATA/coloanal anastomosis cases? ____________________________
   Open, lap, or robotic? ____________________________ Benign disease and/or malignancy? ____________________________

6. Have you performed a taTME in a human cadaver model? □ Yes  □ No
   If yes, how many?

7. Have you preformed clinical taTME in patients? □ Yes  □ No
   If yes, how many were for benign disease? _____ Rectal cancer? _____ APR? _____ LAR? _____

8. Which statement reflects your goals in taking the taTME course? I want to train in taTME using (check one):
   □ A reusable rigid platform  □ A disposable platform  □ Multiple Transanal platforms

9. Do you agree to enter your clinical taTME cases into the OSTRiCh taTME Registry? □ Yes  □ No

10. Will you be willing to complete five short surveys over the course of 2 years post-lab, to update us on your clinical experience with taTME (your survey results will be kept anonymous)? □ Yes  □ No
☐ Please assign a partner for me. (If you already have a partner, please complete the remainder of the questionnaire.)

SURGEON #2

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1. What is your surgical specialty?  
   - ☐ Colorectal surgeon  
   - ☐ Surgical Oncologist  
   - ☐ Other __________________________

2. How many years have you been in clinical practice (post-fellowship)?   _____________________________________________

3. What is your combined annual volume of rectal cancer resections (TME) using MIS Lap/Robotics/SILS?   __________________

4. What is your combined annual volume of TEM/TEO/ TAMIS/SILS cases?   __________________

5. What is your combined annual volume of intersphincteric/TATA/coloanal anastomosis cases?   __________________

   - Open, lap, or robotic?   _______________________________  
   - Benign disease and/or malignancy?   __________________

6. Have you performed a taTME in a human cadaver model?   ☐ Yes  ☐ No

   If yes, how many?

7. Have you preformed clinical taTME in patients?  
   - ☐ Yes  ☐ No

   If yes, how many were for benign disease?  _____  
   - Rectal cancer?  _____  
   - APR?  _____  
   - LAR?  _____

8. Which statement reflects your goals in taking the taTME course?   I want to train in taTME using (check one):

   - ☐ A reusable rigid platform  
   - ☐ A disposable platform  
   - ☐ Multiple Transanal platforms

9. Do you agree to enter your clinical taTME cases into the OSTRiCh taTME Registry?  
   - ☐ Yes  ☐ No

10. Will you be willing to complete five short surveys over the course of 2 years post-lab, to update us on your clinical experience with taTME (your survey results will be kept anonymous)?  
    - ☐ Yes  ☐ No

Course assignments will be made on a first-come, first-served basis. Both surgeons must be registered for the Annual International Colorectal Disease Symposium prior to filling out this pre-questionnaire. Once your questionnaire is accepted by the committee, you will be contacted by the CME Office to provide payment information for the $1000 registration fee.

Observer options are also available if you wish to bring a member of your team. A fee of $500 is required to observer the cadaver portion of the meeting.

Please send completed questionnaire, as well as any questions about the workshop, to cme@ccf.org. Reference “taTME Lab” in subject field.