Achalasia Assessment Tool V1.1

| Hospital Number: Age: | | |
|---|--|--------------------------|
| Gender: Referral (i.e.: Inpatient / 0 | GP / Gastroenterolo | ogy): |
| Initial Symptoms: | | |
| Dysphagia: Chest Pain: Regurgitation: Pulmonary Symptoms: | Yes / No Yes / No Yes / No Yes / No | Score: |
| Current weight: Estimated % weight loss of Malnutrition Universal Sc | • | • |
| Comorbidities: WHO Performance Score | / ASA Grade: | |
| Score 0 – Able to eat r Score 1 – Able to swal Score 2 – Able to swal Score 3 – Able to swal | low semi-solid food | agia |
| <u>Diagnosis</u> : | | |
| OGD Date: Findings: Barium Swallow | | |
| Date: Findings: | | |
| HRM: Date: Findings: Chicago Classificat | ion: | |
| Management: | | |
| Treatment Decision: Surgo Date of treatment(s): | ery / Delayed Surge | ery + Botox / Botox only |

<u>Post-Treatment Assessment:</u>

Symptom assessment at 6 weeks:

Dysphagia: Yes / No Score:

Chest Pain: Yes / No Regurgitation: Yes / No Pulmonary Symptoms: Yes / No

If symptoms ongoing, are they improved?

Current weight: % weight change:

Malnutrition Universal Screening Tool Score:

Presence of Reflux: Yes / No

If yes: GORD-HRQoL Score

Need for regular PPI treatment

Treatment Complications:

Length of Hospital Stay: Days
Complications (+ Clavien Dindo Classification):

Longevity of Treatment Resolution:

Symptom Recurrence: Yes / No

If yes: What symptoms?

Timeframe?

Need for recurrent treatment (i.e.: repeated Botox):

Date: