



Belgian Cancer Registry

## Barrett Esophagus - RadioFrequency Ablation (BE-RFA) - Follow-up registration form

All variables are 'necessary' variables and are obliged to fill in unless stated otherwise (denoted by 'if applicable' or 'if possible').

The variables with a  are single select variables; only one answer can be selected.

The variables with a  are multi-select variables; more than one answer can be selected.

The follow-up registration form needs to be filled out yearly for the first two years and every two years afterwards (i.e. 1, 2, 4, 6, 8, ... years after the last RFA session).

The first follow-up registration needs to be completed one year after the last RFA session (i.e. the patient should be one year RFA-free).

In case of recurrence of Barrett's esophagus for which it is decided to perform a new RFA treatment, the follow-up registration form should be closed (including the data from the endoscopy after which the decision was made to start the new RFA treatment). Then a new primary registration form should be initiated.

## ***Administrative patient data***

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Hospital: .....

Health insurance institution: .....

National number for social security (INSZ/NISS): .....

Last name: .....

First name: .....

Postal code: .....

City: .....

Country: .....

Health insurance number: .....

Date of birth: ...../...../..... (dd/mm/yyyy)

Date of death: ...../...../..... (dd/mm/yyyy) (if applicable)

Sex:  Male

Female

## 1. General follow-up data

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Date of last RFA treatment session prior to this follow-up period: ...../...../..... (dd/mm/yyyy)

Follow-up time point (number of years after the last RFA treatment session):

- |                               |                                |                                |
|-------------------------------|--------------------------------|--------------------------------|
| <input type="radio"/> 1 year* | <input type="radio"/> 8 years  | <input type="radio"/> 16 years |
| <input type="radio"/> 2 years | <input type="radio"/> 10 years | <input type="radio"/> 18 years |
| <input type="radio"/> 4 years | <input type="radio"/> 12 years | <input type="radio"/> 20 years |
| <input type="radio"/> 6 years | <input type="radio"/> 14 years |                                |

\* Was the patient treated with only 1 RFA treatment session?

- No  
 Yes

If yes; late complications (more than 24h after first RFA session and before the first follow-up):

No

Unknown

Yes

Severe bleeding

Symptomatic stenosis/strictures with need for dilatation

- Number of dilatations needed before the first follow-up, if possible: .....

- Was this complication resolved at the first follow-up?

No

Unknown

Yes

Poor healing (significant inflammation still present  $\geq$  3 months post-RFA)

Severe esophageal pain

Other, specify: .....

Is the follow-up information of this follow-up period available?

No

Patient is completely lost to follow-up,

please specify the reason: .....

Patient died in the beginning of this follow-up period

Partially\*

Patient is lost to follow-up

Patient died

Other, please specify the reason: .....

Yes\*

\* Number of endoscopies performed during this follow-up period for which information is available:

- |                         |                         |
|-------------------------|-------------------------|
| <input type="radio"/> 1 | <input type="radio"/> 5 |
| <input type="radio"/> 2 | <input type="radio"/> 6 |
| <input type="radio"/> 3 | <input type="radio"/> 7 |
| <input type="radio"/> 4 | <input type="radio"/> 8 |

## 2. *First follow-up endoscopy*

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Date of first follow-up endoscopy: ...../...../..... (dd/mm/yyyy)

Prague classification: C: ..... (cm) M: ..... (cm)

Endoscopic (macroscopic) diagnosis:

- No Barrett esophagus
- Remaining islands of intestinal metaplasia
  - Number of islands, if possible: .....
  - Smallest diameter of islands, if possible: ..... (mm)
  - Largest diameter of islands, if possible: ..... (mm)
- Barrett esophagus without visible focal lesion (flat Barrett)
- Barrett esophagus with visible focal, suspicious lesion
- Esophagitis
  - Los Angeles classification:  A  B  C  D  Unknown
- Other, specify: .....

What was performed during the follow-up endoscopy of this follow-up period?

- Biopsy\*
- Ablation techniques (other than RFA)
  - Argon plasma coagulation (APC)
  - Cryoablation
  - Other, specify: .....
- New EMR/ESD\*\*
- Esophagectomy
  - Note: The current FU registration can be terminated here, subsequent FU is not necessary anymore.**
- Other, specify: .....
- None

\* If option 'Biopsy' is selected, please fill out the following variables:

- Please specify the worst histology on biopsy:

- No Barrett esophagus / no intestinal metaplasia
- Intestinal metaplasia at cardia with or without dysplasia
- Barrett esophagus with intestinal metaplasia
- Barrett esophagus with low grade dysplasia (LGIN)
- Barrett esophagus with high grade dysplasia (HGIN, 8148/2)
- In situ* cancer (other than HGIN)

- Please specify the histological diagnosis:

- Adenocarcinoma *in situ*, NOS (8140/2)
- Squamous cell carcinoma *in situ*, NOS (8070/2)
- Other, specify: .....

Invasive cancer

- Please specify the histological diagnosis:

- Adenocarcinoma, NOS (8140/3)
- Squamous cell carcinoma, NOS (8070/3)
- Other, specify: .....

- Were there buried Barrett glands?

- No
- Yes

\*\* If option 'New EMR/ESD' is selected, please fill out the following variables:

- Please specify the worst histology on EMR/ESD:

- No Barrett esophagus / no intestinal metaplasia
- Intestinal metaplasia at cardia with or without dysplasia
- Barrett esophagus with intestinal metaplasia
- Barrett esophagus with low grade dysplasia (LGIN)
- Barrett esophagus with high grade dysplasia (HGIN, 8148/2)
- In situ* cancer (other than HGIN)

- Please specify the histological diagnosis:

- Adenocarcinoma *in situ*, NOS (8140/2)
- Squamous cell carcinoma *in situ*, NOS (8070/2)
- Other, specify: .....

Invasive cancer

- Please specify the histological diagnosis:

- Adenocarcinoma, NOS (8140/3)
- Squamous cell carcinoma, NOS (8070/3)
- Other, specify: .....

- Depth of tumor invasion:

- T1a
- T1a m1 (into the lamina propria)
- T1a m2 (into the superficial muscularis mucosae)
- T1a m3 (in between the muscularis mucosae layers)
- T1a m4 (into the deep muscularis mucosae)
- T1b
- T1b sm1
- T1b sm2
- T1b sm3
- Not applicable
- Unknown

- Differentiation grade (if possible):

- 1 = Well differentiated
- 2 = Moderately differentiated
- 3 = Poorly differentiated
- 4 = Undifferentiated (anaplastic)
- 9 = Unknown

- Lymphovascular invasion (if possible):

- No
- Yes
- Cannot be determined
- Not reported

- Deep margin of the resected specimen (if possible):

- Negative for carcinoma (margin < 1 mm)
- Negative for carcinoma (margin  $\geq$  1 mm)
- Negative for carcinoma (margin not reported)
- Positive for carcinoma
- Cannot be determined
- Unknown

- Lateral margin of the resected specimen (if possible):

(only the most advanced histology has to be mentioned)

- Negative for metaplasia / dysplasia / carcinoma
- Positive for intestinal metaplasia
- Positive for LGIN
- Positive for HGIN or carcinoma
- Cannot be determined (i.e. piecemeal resection)
- Unknown

Next treatment steps/Long-term follow-up decision: (only to be completed if NO esophagectomy was performed)

Endoscopic surveillance

New RFA

**Note:** For this new RFA treatment, a new primary registration form should be started!

New EMR/ESD

Ablation techniques (other than RFA)

Esophagectomy

Other, specify: .....

*If only one follow-up endoscopy was performed during this follow-up period or has available information, the registration can be terminated here.*

*If multiple follow-up endoscopies were performed or have available information (2-8), please fill out the following variables for **each** of these endoscopies!*

### 3. *Second follow-up endoscopy*

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Date of second follow-up endoscopy: ...../...../..... (dd/mm/yyyy)

Prague classification: C: ..... (cm) M: ..... (cm)

Endoscopic (macroscopic) diagnosis:

- No Barrett esophagus
- Remaining islands of intestinal metaplasia
  - Number of islands, if possible: .....
  - Smallest diameter of islands, if possible: ..... (mm)
  - Largest diameter of islands, if possible: ..... (mm)
- Barrett esophagus without visible focal lesion (flat Barrett)
- Barrett esophagus with visible focal, suspicious lesion
- Esophagitis
  - Los Angeles classification:  A  B  C  D  Unknown
- Other, specify: .....

What was performed during the follow-up endoscopy of this follow-up period?

- Biopsy\*
- Ablation techniques (other than RFA)
  - Argon plasma coagulation (APC)
  - Cryoablation
  - Other, specify: .....
- New EMR/ESD\*\*
- Esophagectomy
  - Note: The current FU registration can be terminated here, subsequent FU is not necessary anymore.**
- Other, specify: .....
- None

\* If option 'Biopsy' is selected, please fill out the following variables:

- Please specify the worst histology on biopsy:

- No Barrett esophagus / no intestinal metaplasia
- Intestinal metaplasia at cardia with or without dysplasia
- Barrett esophagus with intestinal metaplasia
- Barrett esophagus with low grade dysplasia (LGIN)
- Barrett esophagus with high grade dysplasia (HGIN, 8148/2)
- In situ* cancer (other than HGIN)

- Please specify the histological diagnosis:

- Adenocarcinoma *in situ*, NOS (8140/2)
- Squamous cell carcinoma *in situ*, NOS (8070/2)
- Other, specify: .....



- Invasive cancer
  - Please specify the histological diagnosis:
    - Adenocarcinoma, NOS (8140/3)
    - Squamous cell carcinoma, NOS (8070/3)
    - Other, specify: .....

- Were there buried Barrett glands?
  - No
  - Yes

**\*\* If option 'New EMR/ESD' is selected, please fill out the following variables:**

- Please specify the worst histology on EMR/ESD:
  - No Barrett esophagus / no intestinal metaplasia
  - Intestinal metaplasia at cardia with or without dysplasia
  - Barrett esophagus with intestinal metaplasia
  - Barrett esophagus with low grade dysplasia (LGIN)
  - Barrett esophagus with high grade dysplasia (HGIN, 8148/2)
  - In situ* cancer (other than HGIN)
    - Please specify the histological diagnosis:
      - Adenocarcinoma *in situ*, NOS (8140/2)
      - Squamous cell carcinoma *in situ*, NOS (8070/2)
      - Other, specify: .....

- Invasive cancer
  - Please specify the histological diagnosis:
    - Adenocarcinoma, NOS (8140/3)
    - Squamous cell carcinoma, NOS (8070/3)
    - Other, specify: .....

- Depth of tumor invasion:
  - T1a
    - T1a m1 (into the lamina propria)
    - T1a m2 (into the superficial muscularis mucosae)
    - T1a m3 (in between the muscularis mucosae layers)
    - T1a m4 (into the deep muscularis mucosae)
  - T1b
    - T1b sm1
    - T1b sm2
    - T1b sm3
  - Not applicable
  - Unknown

- Differentiation grade (if possible):
  - 1 = Well differentiated
  - 2 = Moderately differentiated
  - 3 = Poorly differentiated
  - 4 = Undifferentiated (anaplastic)
  - 9 = Unknown

- Lymphovascular invasion (if possible):
  - No
  - Yes
  - Cannot be determined
  - Not reported

- Deep margin of the resected specimen (if possible):
  - Negative for carcinoma (margin < 1 mm)
  - Negative for carcinoma (margin ≥ 1 mm)
  - Negative for carcinoma (margin not reported)
  - Positive for carcinoma
  - Cannot be determined
  - Unknown

- Lateral margin of the resected specimen (if possible):
 

(only the most advanced histology has to be mentioned)

  - Negative for metaplasia / dysplasia / carcinoma
  - Positive for intestinal metaplasia
  - Positive for LGIN
  - Positive for HGIN or carcinoma
  - Cannot be determined (i.e. piecemeal resection)
  - Unknown

Next treatment steps/Long-term follow-up decision: (only to be completed if NO esophagectomy was performed)

- Endoscopic surveillance
- New RFA
  - Note: For this new RFA treatment, a new primary registration form should be started!**
- New EMR/ESD
- Ablation techniques (other than RFA)
- Esophagectomy
- Other, specify: .....

#### 4. Third follow-up endoscopy

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Date of third follow-up endoscopy: ...../...../..... (dd/mm/yyyy)

Prague classification: C: ..... (cm) M: ..... (cm)

Endoscopic (macroscopic) diagnosis:

- No Barrett esophagus
- Remaining islands of intestinal metaplasia
  - Number of islands, if possible: .....
  - Smallest diameter of islands, if possible: ..... (mm)
  - Largest diameter of islands, if possible: ..... (mm)
- Barrett esophagus without visible focal lesion (flat Barrett)
- Barrett esophagus with visible focal, suspicious lesion
- Esophagitis
  - Los Angeles classification:  A  B  C  D  Unknown
- Other, specify: .....

What was performed during the follow-up endoscopy of this follow-up period?

- Biopsy\*
- Ablation techniques (other than RFA)
  - Argon plasma coagulation (APC)
  - Cryoablation
  - Other, specify: .....
- New EMR/ESD\*\*
- Esophagectomy
  - Note: The current FU registration can be terminated here, subsequent FU is not necessary anymore.**
- Other, specify: .....
- None

\* If option 'Biopsy' is selected, please fill out the following variables:

- Please specify the worst histology on biopsy:

- No Barrett esophagus / no intestinal metaplasia
- Intestinal metaplasia at cardia with or without dysplasia
- Barrett esophagus with intestinal metaplasia
- Barrett esophagus with low grade dysplasia (LGIN)
- Barrett esophagus with high grade dysplasia (HGIN, 8148/2)
- In situ* cancer (other than HGIN)

- Please specify the histological diagnosis:

- Adenocarcinoma *in situ*, NOS (8140/2)
- Squamous cell carcinoma *in situ*, NOS (8070/2)
- Other, specify: .....

- Invasive cancer
  - Please specify the histological diagnosis:
    - Adenocarcinoma, NOS (8140/3)
    - Squamous cell carcinoma, NOS (8070/3)
    - Other, specify: .....

- Were there buried Barrett glands?
  - No
  - Yes

**\*\* If option 'New EMR/ESD' is selected, please fill out the following variables:**

- Please specify the worst histology on EMR/ESD:
  - No Barrett esophagus / no intestinal metaplasia
  - Intestinal metaplasia at cardia with or without dysplasia
  - Barrett esophagus with intestinal metaplasia
  - Barrett esophagus with low grade dysplasia (LGIN)
  - Barrett esophagus with high grade dysplasia (HGIN, 8148/2)
  - In situ* cancer (other than HGIN)
    - Please specify the histological diagnosis:
      - Adenocarcinoma *in situ*, NOS (8140/2)
      - Squamous cell carcinoma *in situ*, NOS (8070/2)
      - Other, specify: .....

- Invasive cancer
  - Please specify the histological diagnosis:
    - Adenocarcinoma, NOS (8140/3)
    - Squamous cell carcinoma, NOS (8070/3)
    - Other, specify: .....

- Depth of tumor invasion:
  - T1a
    - T1a m1 (into the lamina propria)
    - T1a m2 (into the superficial muscularis mucosae)
    - T1a m3 (in between the muscularis mucosae layers)
    - T1a m4 (into the deep muscularis mucosae)
  - T1b
    - T1b sm1
    - T1b sm2
    - T1b sm3
  - Not applicable
  - Unknown

- Differentiation grade (if possible):
  - 1 = Well differentiated
  - 2 = Moderately differentiated
  - 3 = Poorly differentiated
  - 4 = Undifferentiated (anaplastic)
  - 9 = Unknown

- Lymphovascular invasion (if possible):
  - No
  - Yes
  - Cannot be determined
  - Not reported

- Deep margin of the resected specimen (if possible):
  - Negative for carcinoma (margin < 1 mm)
  - Negative for carcinoma (margin ≥ 1 mm)
  - Negative for carcinoma (margin not reported)
  - Positive for carcinoma
  - Cannot be determined
  - Unknown

- Lateral margin of the resected specimen (if possible):
 

(only the most advanced histology has to be mentioned)

  - Negative for metaplasia / dysplasia / carcinoma
  - Positive for intestinal metaplasia
  - Positive for LGIN
  - Positive for HGIN or carcinoma
  - Cannot be determined (i.e. piecemeal resection)
  - Unknown

Next treatment steps/Long-term follow-up decision: (only to be completed if NO esophagectomy was performed)

- Endoscopic surveillance
- New RFA
  - Note: For this new RFA treatment, a new primary registration form should be started!**
- New EMR/ESD
- Ablation techniques (other than RFA)
- Esophagectomy
- Other, specify: .....

## 5. Fourth follow-up endoscopy

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Date of fourth follow-up endoscopy: ...../...../..... (dd/mm/yyyy)

Prague classification: C: ..... (cm) M: ..... (cm)

Endoscopic (macroscopic) diagnosis:

- No Barrett esophagus
- Remaining islands of intestinal metaplasia
  - Number of islands, if possible: .....
  - Smallest diameter of islands, if possible: ..... (mm)
  - Largest diameter of islands, if possible: ..... (mm)
- Barrett esophagus without visible focal lesion (flat Barrett)
- Barrett esophagus with visible focal, suspicious lesion
- Esophagitis
  - Los Angeles classification:  A  B  C  D  Unknown
- Other, specify: .....

What was performed during the follow-up endoscopy of this follow-up period?

- Biopsy\*
- Ablation techniques (other than RFA)
  - Argon plasma coagulation (APC)
  - Cryoablation
  - Other, specify: .....
- New EMR/ESD\*\*
- Esophagectomy
  - Note: The current FU registration can be terminated here, subsequent FU is not necessary anymore.**
- Other, specify: .....
- None

\* If option 'Biopsy' is selected, please fill out the following variables:

- Please specify the worst histology on biopsy:

- No Barrett esophagus / no intestinal metaplasia
- Intestinal metaplasia at cardia with or without dysplasia
- Barrett esophagus with intestinal metaplasia
- Barrett esophagus with low grade dysplasia (LGIN)
- Barrett esophagus with high grade dysplasia (HGIN, 8148/2)
- In situ* cancer (other than HGIN)

- Please specify the histological diagnosis:

- Adenocarcinoma *in situ*, NOS (8140/2)
- Squamous cell carcinoma *in situ*, NOS (8070/2)
- Other, specify: .....

- Invasive cancer
  - Please specify the histological diagnosis:
    - Adenocarcinoma, NOS (8140/3)
    - Squamous cell carcinoma, NOS (8070/3)
    - Other, specify: .....

- Were there buried Barrett glands?
  - No
  - Yes

**\*\* If option 'New EMR/ESD' is selected, please fill out the following variables:**

- Please specify the worst histology on EMR/ESD:
  - No Barrett esophagus / no intestinal metaplasia
  - Intestinal metaplasia at cardia with or without dysplasia
  - Barrett esophagus with intestinal metaplasia
  - Barrett esophagus with low grade dysplasia (LGIN)
  - Barrett esophagus with high grade dysplasia (HGIN, 8148/2)
  - In situ* cancer (other than HGIN)
    - Please specify the histological diagnosis:
      - Adenocarcinoma *in situ*, NOS (8140/2)
      - Squamous cell carcinoma *in situ*, NOS (8070/2)
      - Other, specify: .....

- Invasive cancer
  - Please specify the histological diagnosis:
    - Adenocarcinoma, NOS (8140/3)
    - Squamous cell carcinoma, NOS (8070/3)
    - Other, specify: .....

- Depth of tumor invasion:
  - T1a
  - T1a m1 (into the lamina propria)
  - T1a m2 (into the superficial muscularis mucosae)
  - T1a m3 (in between the muscularis mucosae layers)
  - T1a m4 (into the deep muscularis mucosae)
  - T1b
  - T1b sm1
  - T1b sm2
  - T1b sm3
  - Not applicable
  - Unknown

- Differentiation grade (if possible):
  - 1 = Well differentiated
  - 2 = Moderately differentiated
  - 3 = Poorly differentiated
  - 4 = Undifferentiated (anaplastic)
  - 9 = Unknown

- Lymphovascular invasion (if possible):
  - No
  - Yes
  - Cannot be determined
  - Not reported

- Deep margin of the resected specimen (if possible):
  - Negative for carcinoma (margin < 1 mm)
  - Negative for carcinoma (margin ≥ 1 mm)
  - Negative for carcinoma (margin not reported)
  - Positive for carcinoma
  - Cannot be determined
  - Unknown

- Lateral margin of the resected specimen (if possible):
 

(only the most advanced histology has to be mentioned)

  - Negative for metaplasia / dysplasia / carcinoma
  - Positive for intestinal metaplasia
  - Positive for LGIN
  - Positive for HGIN or carcinoma
  - Cannot be determined (i.e. piecemeal resection)
  - Unknown

Next treatment steps/Long-term follow-up decision: (only to be completed if NO esophagectomy was performed)

- Endoscopic surveillance
- New RFA
  - Note: For this new RFA treatment, a new primary registration form should be started!**
- New EMR/ESD
- Ablation techniques (other than RFA)
- Esophagectomy
- Other, specify: .....



## 6. Fifth follow-up endoscopy

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Date of fifth follow-up endoscopy: ...../...../..... (dd/mm/yyyy)

Prague classification: C: ..... (cm) M: ..... (cm)

Endoscopic (macroscopic) diagnosis:

- No Barrett esophagus
- Remaining islands of intestinal metaplasia
  - Number of islands, if possible: .....
  - Smallest diameter of islands, if possible: ..... (mm)
  - Largest diameter of islands, if possible: ..... (mm)
- Barrett esophagus without visible focal lesion (flat Barrett)
- Barrett esophagus with visible focal, suspicious lesion
- Esophagitis
  - Los Angeles classification: O A O B O C O D O Unknown
- Other, specify: .....

What was performed during the follow-up endoscopy of this follow-up period?

- Biopsy\*
- Ablation techniques (other than RFA)
  - Argon plasma coagulation (APC)
  - Cryoablation
  - Other, specify: .....
- New EMR/ESD\*\*
- Esophagectomy
  - Note: The current FU registration can be terminated here, subsequent FU is not necessary anymore.**
- Other, specify: .....
- None

\* If option 'Biopsy' is selected, please fill out the following variables:

- Please specify the worst histology on biopsy:
  - O No Barrett esophagus / no intestinal metaplasia
  - O Intestinal metaplasia at cardia with or without dysplasia
  - O Barrett esophagus with intestinal metaplasia
  - O Barrett esophagus with low grade dysplasia (LGIN)
  - O Barrett esophagus with high grade dysplasia (HGIN, 8148/2)
  - O *In situ* cancer (other than HGIN)
    - Please specify the histological diagnosis:
      - O Adenocarcinoma *in situ*, NOS (8140/2)

- Squamous cell carcinoma *in situ*, NOS (8070/2)
- Other, specify: .....

Invasive cancer

- Please specify the histological diagnosis:
  - Adenocarcinoma, NOS (8140/3)
  - Squamous cell carcinoma, NOS (8070/3)
  - Other, specify: .....

- Were there buried Barrett glands?

- No
- Yes

**\*\* If option 'New EMR/ESD' is selected, please fill out the following variables:**

- Please specify the worst histology on EMR/ESD:
  - No Barrett esophagus / no intestinal metaplasia
  - Intestinal metaplasia at cardia with or without dysplasia
  - Barrett esophagus with intestinal metaplasia
  - Barrett esophagus with low grade dysplasia (LGIN)
  - Barrett esophagus with high grade dysplasia (HGIN, 8148/2)
  - In situ* cancer (other than HGIN)
    - Please specify the histological diagnosis:
      - Adenocarcinoma *in situ*, NOS (8140/2)
      - Squamous cell carcinoma *in situ*, NOS (8070/2)
      - Other, specify: .....
- Invasive cancer
  - Please specify the histological diagnosis:
    - Adenocarcinoma, NOS (8140/3)
    - Squamous cell carcinoma, NOS (8070/3)
    - Other, specify: .....

- Depth of tumor invasion:

- T1a
  - T1a m1 (into the lamina propria)
  - T1a m2 (into the superficial muscularis mucosae)
  - T1a m3 (in between the muscularis mucosae layers)
  - T1a m4 (into the deep muscularis mucosae)
- T1b
  - T1b sm1
  - T1b sm2
  - T1b sm3
  - Not applicable
  - Unknown

- Differentiation grade (if possible):
  - 1 = Well differentiated
  - 2 = Moderately differentiated
  - 3 = Poorly differentiated
  - 4 = Undifferentiated (anaplastic)
  - 9 = Unknown

- Lymphovascular invasion (if possible):
  - No
  - Yes
  - Cannot be determined
  - Not reported

- Deep margin of the resected specimen (if possible):
  - Negative for carcinoma (margin < 1 mm)
  - Negative for carcinoma (margin ≥ 1 mm)
  - Negative for carcinoma (margin not reported)
  - Positive for carcinoma
  - Cannot be determined
  - Unknown

- Lateral margin of the resected specimen (if possible):
 

(only the most advanced histology has to be mentioned)

  - Negative for metaplasia / dysplasia / carcinoma
  - Positive for intestinal metaplasia
  - Positive for LGIN
  - Positive for HGIN or carcinoma
  - Cannot be determined (i.e. piecemeal resection)
  - Unknown

Next treatment steps/Long-term follow-up decision: (only to be completed if NO esophagectomy was performed)

- Endoscopic surveillance
- New RFA
  - Note: For this new RFA treatment, a new primary registration form should be started!**
- New EMR/ESD
- Ablation techniques (other than RFA)
- Esophagectomy
- Other, specify: .....

## 7. Sixth follow-up endoscopy

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Date of sixth follow-up endoscopy: ...../...../..... (dd/mm/yyyy)

Prague classification: C: ..... (cm) M: ..... (cm)

Endoscopic (macroscopic) diagnosis:

- No Barrett esophagus
- Remaining islands of intestinal metaplasia
  - Number of islands, if possible: .....
  - Smallest diameter of islands, if possible: ..... (mm)
  - Largest diameter of islands, if possible: ..... (mm)
- Barrett esophagus without visible focal lesion (flat Barrett)
- Barrett esophagus with visible focal, suspicious lesion
- Esophagitis
  - Los Angeles classification: O A O B O C O D O Unknown
- Other, specify: .....

What was performed during the follow-up endoscopy of this follow-up period?

- Biopsy\*
- Ablation techniques (other than RFA)
  - Argon plasma coagulation (APC)
  - Cryoablation
  - Other, specify: .....
- New EMR/ESD\*\*
- Esophagectomy
  - Note: The current FU registration can be terminated here, subsequent FU is not necessary anymore.**
- Other, specify: .....
- None

\* If option 'Biopsy' is selected, please fill out the following variables:

- Please specify the worst histology on biopsy:
  - O No Barrett esophagus / no intestinal metaplasia
  - O Intestinal metaplasia at cardia with or without dysplasia
  - O Barrett esophagus with intestinal metaplasia
  - O Barrett esophagus with low grade dysplasia (LGIN)
  - O Barrett esophagus with high grade dysplasia (HGIN, 8148/2)
  - O *In situ* cancer (other than HGIN)
    - Please specify the histological diagnosis:
      - O Adenocarcinoma *in situ*, NOS (8140/2)

- Squamous cell carcinoma *in situ*, NOS (8070/2)
- Other, specify: .....

Invasive cancer

- Please specify the histological diagnosis:
  - Adenocarcinoma, NOS (8140/3)
  - Squamous cell carcinoma, NOS (8070/3)
  - Other, specify: .....

- Were there buried Barrett glands?

- No
- Yes

**\*\* If option 'New EMR/ESD' is selected, please fill out the following variables:**

- Please specify the worst histology on EMR/ESD:
  - No Barrett esophagus / no intestinal metaplasia
  - Intestinal metaplasia at cardia with or without dysplasia
  - Barrett esophagus with intestinal metaplasia
  - Barrett esophagus with low grade dysplasia (LGIN)
  - Barrett esophagus with high grade dysplasia (HGIN, 8148/2)
  - In situ* cancer (other than HGIN)
    - Please specify the histological diagnosis:
      - Adenocarcinoma *in situ*, NOS (8140/2)
      - Squamous cell carcinoma *in situ*, NOS (8070/2)
      - Other, specify: .....
- Invasive cancer
  - Please specify the histological diagnosis:
    - Adenocarcinoma, NOS (8140/3)
    - Squamous cell carcinoma, NOS (8070/3)
    - Other, specify: .....

- Depth of tumor invasion:

- T1a
  - T1a m1 (into the lamina propria)
  - T1a m2 (into the superficial muscularis mucosae)
  - T1a m3 (in between the muscularis mucosae layers)
  - T1a m4 (into the deep muscularis mucosae)
- T1b
  - T1b sm1
  - T1b sm2
  - T1b sm3
  - Not applicable
  - Unknown

- Differentiation grade (if possible):
  - 1 = Well differentiated
  - 2 = Moderately differentiated
  - 3 = Poorly differentiated
  - 4 = Undifferentiated (anaplastic)
  - 9 = Unknown

- Lymphovascular invasion (if possible):
  - No
  - Yes
  - Cannot be determined
  - Not reported

- Deep margin of the resected specimen (if possible):
  - Negative for carcinoma (margin < 1 mm)
  - Negative for carcinoma (margin ≥ 1 mm)
  - Negative for carcinoma (margin not reported)
  - Positive for carcinoma
  - Cannot be determined
  - Unknown

- Lateral margin of the resected specimen (if possible):
 

(only the most advanced histology has to be mentioned)

  - Negative for metaplasia / dysplasia / carcinoma
  - Positive for intestinal metaplasia
  - Positive for LGIN
  - Positive for HGIN or carcinoma
  - Cannot be determined (i.e. piecemeal resection)
  - Unknown

Next treatment steps/Long-term follow-up decision: (only to be completed if NO esophagectomy was performed)

- Endoscopic surveillance
- New RFA
  - Note: For this new RFA treatment, a new primary registration form should be started!**
- New EMR/ESD
- Ablation techniques (other than RFA)
- Esophagectomy
- Other, specify: .....

## 8. Seventh follow-up endoscopy

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Date of seventh follow-up endoscopy: ...../...../..... (dd/mm/yyyy)

Prague classification: C: ..... (cm) M: ..... (cm)

Endoscopic (macroscopic) diagnosis:

- No Barrett esophagus
- Remaining islands of intestinal metaplasia
  - Number of islands, if possible: .....
  - Smallest diameter of islands, if possible: ..... (mm)
  - Largest diameter of islands, if possible: ..... (mm)
- Barrett esophagus without visible focal lesion (flat Barrett)
- Barrett esophagus with visible focal, suspicious lesion
- Esophagitis
  - Los Angeles classification:  A  B  C  D  Unknown
- Other, specify: .....

What was performed during the follow-up endoscopy of this follow-up period?

- Biopsy\*
- Ablation techniques (other than RFA)
  - Argon plasma coagulation (APC)
  - Cryoablation
  - Other, specify: .....
- New EMR/ESD\*\*
- Esophagectomy
  - Note: The current FU registration can be terminated here, subsequent FU is not necessary anymore.**
- Other, specify: .....
- None

\* If option 'Biopsy' is selected, please fill out the following variables:

- Please specify the worst histology on biopsy:
  - No Barrett esophagus / no intestinal metaplasia
  - Intestinal metaplasia at cardia with or without dysplasia
  - Barrett esophagus with intestinal metaplasia
  - Barrett esophagus with low grade dysplasia (LGIN)
  - Barrett esophagus with high grade dysplasia (HGIN, 8148/2)
  - In situ* cancer (other than HGIN)
- Please specify the histological diagnosis:

- Adenocarcinoma *in situ*, NOS (8140/2)
- Squamous cell carcinoma *in situ*, NOS (8070/2)
- Other, specify: .....
- Invasive cancer
  - Please specify the histological diagnosis:
    - Adenocarcinoma, NOS (8140/3)
    - Squamous cell carcinoma, NOS (8070/3)
    - Other, specify: .....

- Were there buried Barrett glands?

- No
- Yes

**\*\* If option 'New EMR/ESD' is selected, please fill out the following variables:**

- Please specify the worst histology on EMR/ESD:
  - No Barrett esophagus / no intestinal metaplasia
  - Intestinal metaplasia at cardia with or without dysplasia
  - Barrett esophagus with intestinal metaplasia
  - Barrett esophagus with low grade dysplasia (LGIN)
  - Barrett esophagus with high grade dysplasia (HGIN, 8148/2)
  - In situ* cancer (other than HGIN)
    - Please specify the histological diagnosis:
      - Adenocarcinoma *in situ*, NOS (8140/2)
      - Squamous cell carcinoma *in situ*, NOS (8070/2)
      - Other, specify: .....
- Invasive cancer
  - Please specify the histological diagnosis:
    - Adenocarcinoma, NOS (8140/3)
    - Squamous cell carcinoma, NOS (8070/3)
    - Other, specify: .....

- Depth of tumor invasion:

- T1a
  - T1a m1 (into the lamina propria)
  - T1a m2 (into the superficial muscularis mucosae)
  - T1a m3 (in between the muscularis mucosae layers)
  - T1a m4 (into the deep muscularis mucosae)
- T1b
  - T1b sm1
  - T1b sm2
  - T1b sm3
  - Not applicable
  - Unknown



- Differentiation grade (if possible):
  - 1 = Well differentiated
  - 2 = Moderately differentiated
  - 3 = Poorly differentiated
  - 4 = Undifferentiated (anaplastic)
  - 9 = Unknown

- Lymphovascular invasion (if possible):
  - No
  - Yes
  - Cannot be determined
  - Not reported

- Deep margin of the resected specimen (if possible):
  - Negative for carcinoma (margin < 1 mm)
  - Negative for carcinoma (margin ≥ 1 mm)
  - Negative for carcinoma (margin not reported)
  - Positive for carcinoma
  - Cannot be determined
  - Unknown

- Lateral margin of the resected specimen (if possible):
 

(only the most advanced histology has to be mentioned)

  - Negative for metaplasia / dysplasia / carcinoma
  - Positive for intestinal metaplasia
  - Positive for LGIN
  - Positive for HGIN or carcinoma
  - Cannot be determined (i.e. piecemeal resection)
  - Unknown

Next treatment steps/Long-term follow-up decision: (only to be completed if NO esophagectomy was performed)

- Endoscopic surveillance
- New RFA
  - Note: For this new RFA treatment, a new primary registration form should be started!**
- New EMR/ESD
- Ablation techniques (other than RFA)
- Esophagectomy
- Other, specify: .....

## 9. Eighth follow-up endoscopy

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Date of eighth follow-up endoscopy: ...../...../..... (dd/mm/yyyy)

Prague classification: C: ..... (cm) M: ..... (cm)

Endoscopic (macroscopic) diagnosis:

- No Barrett esophagus
- Remaining islands of intestinal metaplasia
  - Number of islands, if possible: .....
  - Smallest diameter of islands, if possible: ..... (mm)
  - Largest diameter of islands, if possible: ..... (mm)
- Barrett esophagus without visible focal lesion (flat Barrett)
- Barrett esophagus with visible focal, suspicious lesion
- Esophagitis
  - Los Angeles classification:  A  B  C  D  Unknown
- Other, specify: .....

What was performed during the follow-up endoscopy of this follow-up period?

- Biopsy\*
- Ablation techniques (other than RFA)
  - Argon plasma coagulation (APC)
  - Cryoablation
  - Other, specify: .....
- New EMR/ESD\*\*
- Esophagectomy
  - Note: The current FU registration can be terminated here, subsequent FU is not necessary anymore.**
- Other, specify: .....
- None

\* If option 'Biopsy' is selected, please fill out the following variables:

- Please specify the worst histology on biopsy:

- No Barrett esophagus / no intestinal metaplasia
- Intestinal metaplasia at cardia with or without dysplasia
- Barrett esophagus with intestinal metaplasia
- Barrett esophagus with low grade dysplasia (LGIN)
- Barrett esophagus with high grade dysplasia (HGIN, 8148/2)
- In situ* cancer (other than HGIN)

- Please specify the histological diagnosis:

- Adenocarcinoma *in situ*, NOS (8140/2)
- Squamous cell carcinoma *in situ*, NOS (8070/2)
- Other, specify: .....

- Invasive cancer
  - Please specify the histological diagnosis:
    - Adenocarcinoma, NOS (8140/3)
    - Squamous cell carcinoma, NOS (8070/3)
    - Other, specify: .....

- Were there buried Barrett glands?
  - No
  - Yes

**\*\* If option 'New EMR/ESD' is selected, please fill out the following variables:**

- Please specify the worst histology on EMR/ESD:
  - No Barrett esophagus / no intestinal metaplasia
  - Intestinal metaplasia at cardia with or without dysplasia
  - Barrett esophagus with intestinal metaplasia
  - Barrett esophagus with low grade dysplasia (LGIN)
  - Barrett esophagus with high grade dysplasia (HGIN, 8148/2)
  - In situ* cancer (other than HGIN)
    - Please specify the histological diagnosis:
      - Adenocarcinoma *in situ*, NOS (8140/2)
      - Squamous cell carcinoma *in situ*, NOS (8070/2)
      - Other, specify: .....

- Invasive cancer
  - Please specify the histological diagnosis:
    - Adenocarcinoma, NOS (8140/3)
    - Squamous cell carcinoma, NOS (8070/3)
    - Other, specify: .....

- Depth of tumor invasion:
  - T1a
  - T1a m1 (into the lamina propria)
  - T1a m2 (into the superficial muscularis mucosae)
  - T1a m3 (in between the muscularis mucosae layers)
  - T1a m4 (into the deep muscularis mucosae)
  - T1b
  - T1b sm1
  - T1b sm2
  - T1b sm3
  - Not applicable
  - Unknown

- Differentiation grade (if possible):
  - 1 = Well differentiated
  - 2 = Moderately differentiated
  - 3 = Poorly differentiated
  - 4 = Undifferentiated (anaplastic)
  - 9 = Unknown

- Lymphovascular invasion (if possible):
  - No
  - Yes
  - Cannot be determined
  - Not reported

- Deep margin of the resected specimen (if possible):
  - Negative for carcinoma (margin < 1 mm)
  - Negative for carcinoma (margin ≥ 1 mm)
  - Negative for carcinoma (margin not reported)
  - Positive for carcinoma
  - Cannot be determined
  - Unknown

- Lateral margin of the resected specimen (if possible):
 

(only the most advanced histology has to be mentioned)

  - Negative for metaplasia / dysplasia / carcinoma
  - Positive for intestinal metaplasia
  - Positive for LGIN
  - Positive for HGIN or carcinoma
  - Cannot be determined (i.e. piecemeal resection)
  - Unknown

Next treatment steps/Long-term follow-up decision: (only to be completed if NO esophagectomy was performed)

- Endoscopic surveillance
- New RFA
  - Note: For this new RFA treatment, a new primary registration form should be started!**
- New EMR/ESD
- Ablation techniques (other than RFA)
- Esophagectomy
- Other, specify: .....