ATTACHMENT C.

CASE REPORT FORMS 13, 16, 17, 19, AND 20

DEVICE: LUBRICOAT GEL

PROTOCOL: PTL-0013

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LIFECORE BIOMEDICAL

ABDOMINAL DIAGRAM — I

POSTERIOR PELVIS

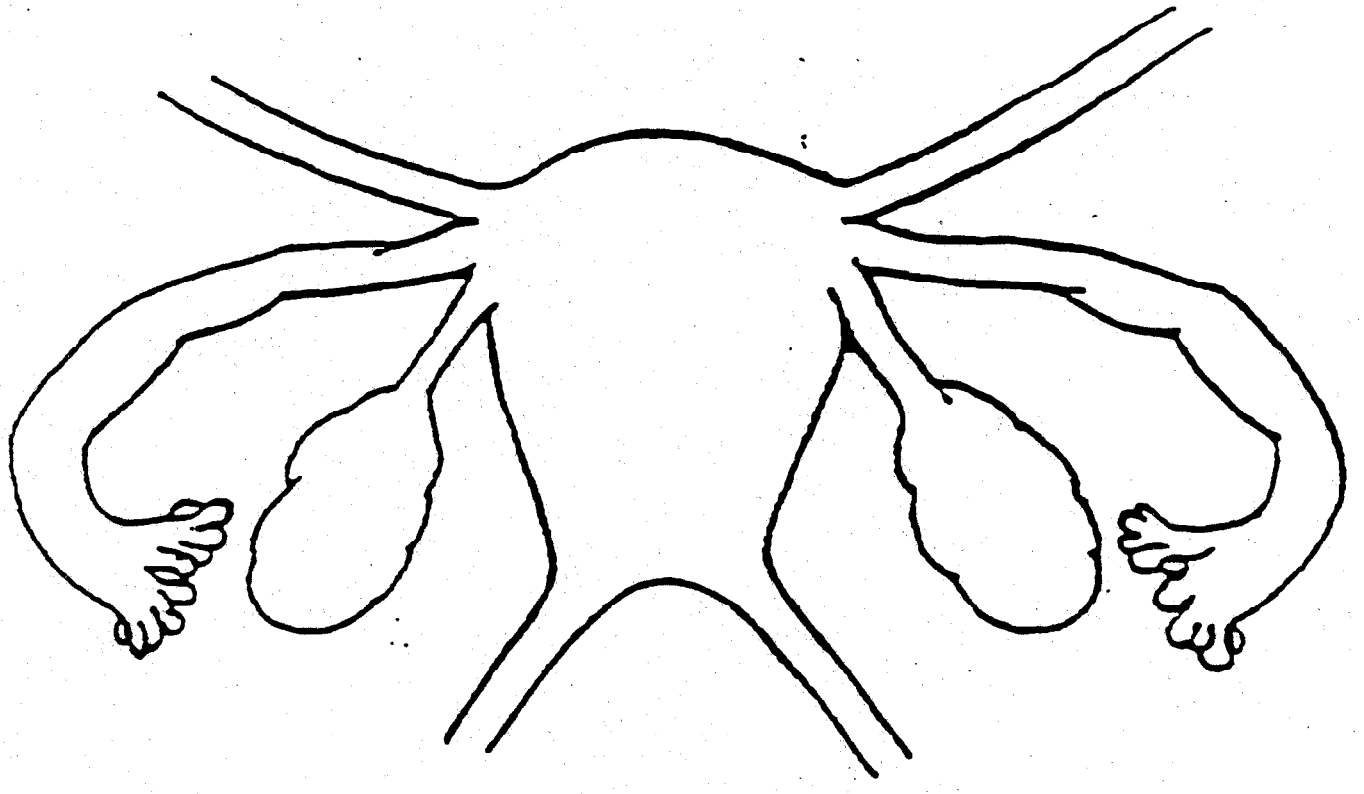
PATIENT INITIALS: ___

PATIENT NO.: ___

VISIT DATE: ___ Mo ___ Day ___ Yr

Were all the adhesions illustrated below lysed? (1=Yes; 2=No*; 3=Not Applicable) ☐

R L



Indicate adhesions to other sites by careful labeling.

Indicate incisional lines and suture use.

For each adhesion specify "D" for dense adhesions or "F" for filmy adhesions, also specify "L" for localized, "M" for moderate or "E" for extensive.

*If No, specify "N" for each adhesion not lysed.

Drawn By: _____ Date: ___

LB00055

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DEVICE: LUBRICOAT GEL

PROTOCOL: PTL-0013

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LIFECORE BIOMEDICAL

ABDOMINAL DIAGRAM — I

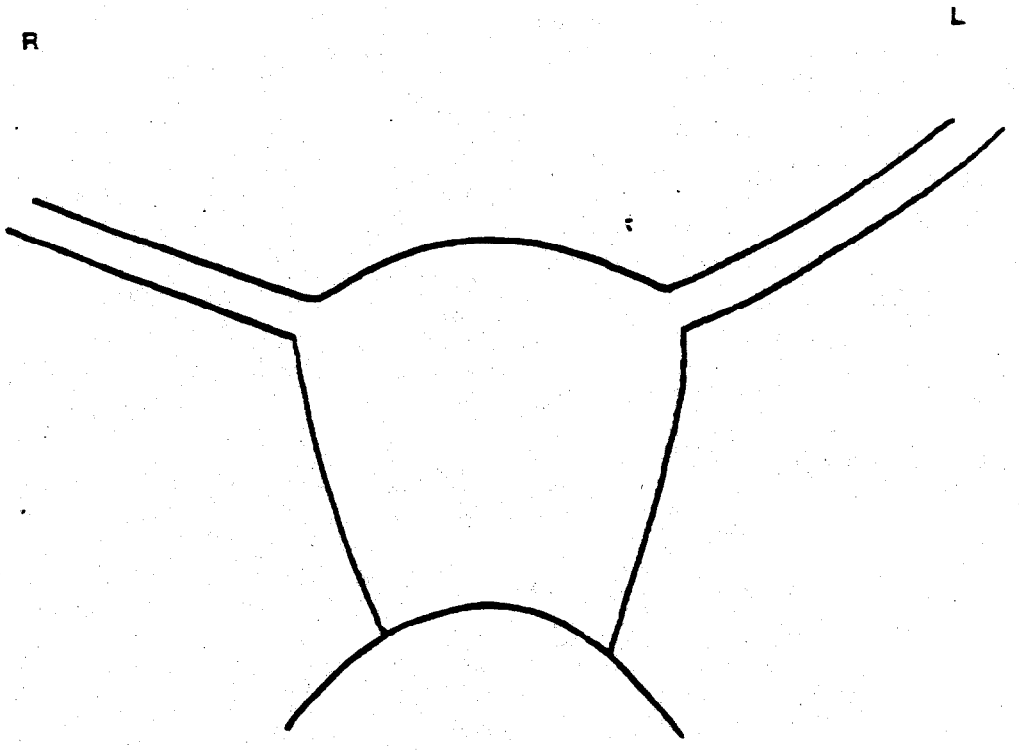
ANTERIOR PELVIS

PATIENT INITIALS: ___

PATIENT NO.: ___

VISIT DATE: ___ Mo ___ Day ___ Yr

Were all the adhesions illustrated below lysed? (1=Yes; 2=No*; 3=Not Applicable) ☐



Indicate adhesions to other sites by careful labeling.

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Drawn By: _____ Date: ___

LB0006N

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PROTOCOL: PTL-0013

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LIFECORE BIOMEDICAL

ABDOMINAL DIAGRAM — I

RIGHT SAGITTAL

PATIENT INITIALS:

PATIENT NO.:

VISIT DATE: Mo Day Y

Adhesion Present	Yes	No
Caudal Anterior Peritoneum	1	2
Cephalad Anterior Peritoneum – Right	1	2
Omentum	1	2

Adhesion Present	Yes	No
Small Bowel	1	2
Large Bowel – Right	1	2
Right Pelvic Sidewall	1	2

Were all the adhesions illustrated below lysed? (1=Yes; 2=No*; 3=Not Applicable)

Indicate adhesions to other sites by careful labeling.
Indicate incisional lines and suture use.
For each adhesion specify "D" for dense adhesions or "F" for filmy adhesions, also specify "L" for localized, "M" for moderate or "E" for extensive.
*If No, specify "N" for each adhesion not lysed.

Drawn By: _____ Date:

DEVICE: LUBRICOAT GEL

PROTOCOL: PTL-0013

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LIFECORE BIOMEDICAL

ABDOMINAL DIAGRAM — I

LEFT SAGITTAL

PATIENT INITIALS: ___

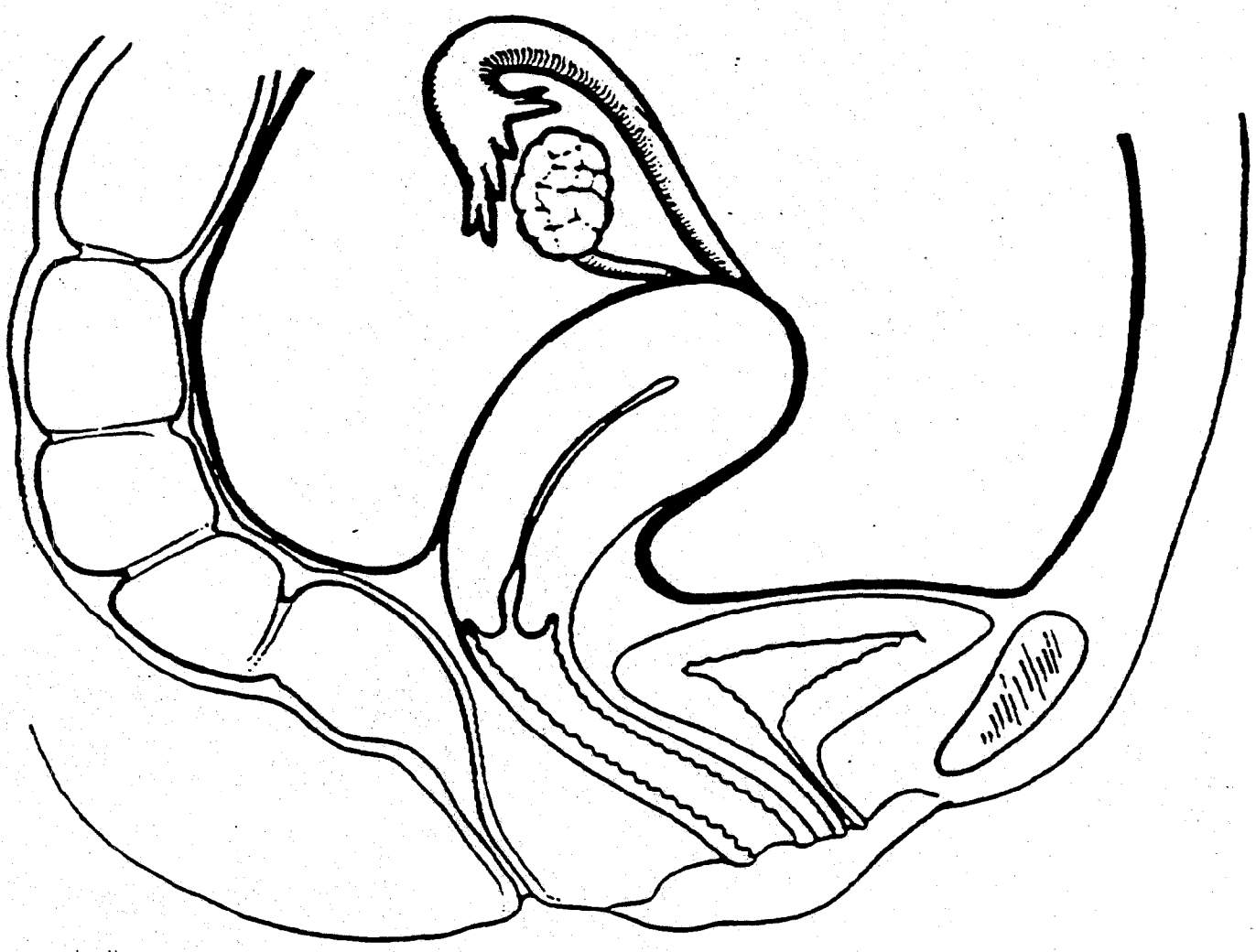
PATIENT NO.: ___

VISIT DATE: ___ Mo ___ Day ___ Yr

Adhesion Present	Yes	No
Caudal Anterior Peritoneum	☐ 1	☐ 2
Cephalad Anterior Peritoneum - Left	☐ 1	☐ 2
Omentum	☐ 1	☐ 2

Adhesion Present	Yes	No
Small Bowel	☐ 1	☐ 2
Large Bowel - Left	☐ 1	☐ 2
Left Pelvic Sidewall	☐ 1	☐ 2

Were all the adhesions illustrated below lysed? (1=Yes; 2=No*; 3=Not Applicable) ☐



Indicate adhesions to other sites by careful labeling.
Indicate incisional lines and suture use.
For each adhesion specify "D" for dense adhesions or "F" for filmy adhesions, also specify "L" for localized, "M" for moderate or "E" for extensive.
*If No, specify "N" for each adhesion not lysed.

Drawn By: _____ Date: ___

LB0005V

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DEVICE: LUBRICOAT GEL

PROTOCOL: PTL-0013

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LIFECORE BIOMEDICAL

ASSESSMENT OF ADHESIONS I

PATIENT INITIALS:

PATIENT NO.:

VISIT DATE: Mo Day Yr

Anatomical Site	Adhesion Present?		Adhesion Severity?*		Adhesion Extent?**			If Present, Lysed?		***Method of Lysis?
	Yes	No	Mild	Severe	Local.	Mod.	Exten.	Yes	No	1, 2, 3, 4
Caudal Anterior Peritoneum	1	2	1	2	1	2	3	1	2	
Cephalad Anterior Peritoneum – Right	1	2	1	2	1	2	3	1	2	
Cephalad Anterior Peritoneum – Left	1	2	1	2	1	2	3	1	2	
Anterior Peritoneum Incision										
Small Bowel	1	2	1	2				1	2	
Anterior Uterus	1	2	1	2	1	2	3	1	2	
Posterior Uterus	1	2	1	2	1	2	3	1	2	
Omentum	1	2	1	2				1	2	
Large Bowel – Right	1	2	1	2				1	2	
Large Bowel – Left	1	2	1	2				1	2	
Rectosigmoid portion of Large Bowel	1	2	1	2	1	2	3	1	2	
Cul-de-sac (posterior)	1	2	1	2	1	2	3	1	2	
Right Pelvic Sidewall	1	2	1	2	1	2	3	1	2	
Left Pelvic Sidewall	1	2	1	2	1	2	3	1	2	
Right Ovary – Lateral Aspect	1	2	1	2	1	2	3	1	2	
Right Ovary – Medial Aspect	1	2	1	2	1	2	3	1	2	
Right Ovarian Fossa	1	2	1	2	1	2	3	1	2	
Left Ovary – Lateral Aspect	1	2	1	2	1	2	3	1	2	
Left Ovary – Medial Aspect	1	2	1	2	1	2	3	1	2	
Left Ovarian Fossa	1	2	1	2	1	2	3	1	2	
Right Tube	1	2	1	2	1	2	3	1	2	
Right Ampulla	1	2	1	2	1	2	3	1	2	
Left Tube	1	2	1	2	1	2	3	1	2	
Left Ampulla	1	2	1	2	1	2	3	1	2	

*Adhesion Severity
Mild = Flimy Avascular
Severe = Organized, Cohesive, Vascular, Dense

**Adhesion Extent
Localized = less than ½ of the site covered
Moderate = ½ to ⅔ of the site covered
Extensive = more than ⅔ of the site covered

***Methods
1 = Sharp Dissection
2 = Cautery
3 = Laser
4 = Blunt Dissection