

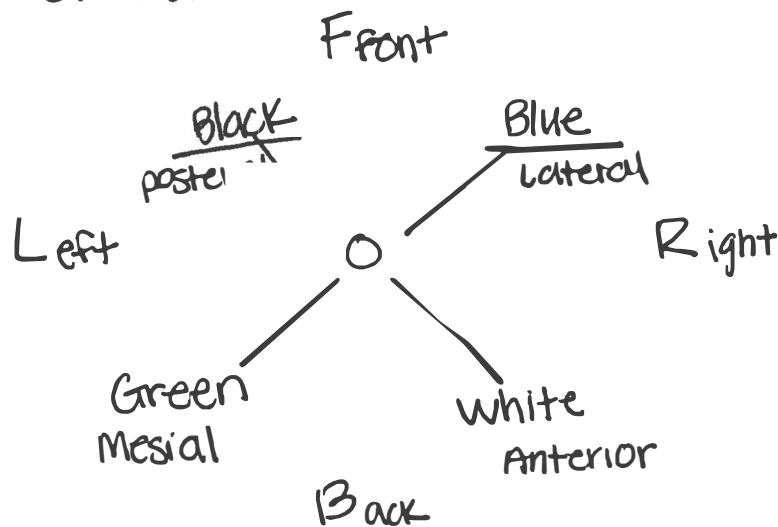
MCC 19970 Data Collection

Date: 6/21/2019

Procedure	Time	Comments
In OR	7:42am	
Shave	8:11am	
Incision	8:56am	
Stereotactical Biop	9:17am	
Stereotac. Biop. Stop	9:47am	When Pathology report confirmed
Catheter Primed	9:24am	Magnevist
Cath insert start	9:51am	
Cath insert stop	10:05am	
Leave OR	10:26am	
Arrive @ MRI	10:29am	In MRI room: 10:41am; In Tube - 10:57am
MRI Start initial	11:00am	For initial placement
MRI Stop Final	2:59 pm	
Topotecan	11:09 am	
Pathology Confirm	9:47 am	confirmation of disease: Recurrent GBM
Leave MRI	3:11 pm	
Arrive at PACU	3:17pm	
Cath Removal start	3:20pm	
Cath Removal Stop	3:28 pm ^{3:21 ES}	
Sew up start	3:21 pm	
Sew up End	3:28 pm	

Catheter #: VA00552 catalog# exp: 6/2019
 Catheter placement: 121.5mm to top of black disk
 40mm surface of bone → target
 Diameter: 2 1/2 - 3mm

Placement of Cath:



Green - pump 5
 Black - pump 6
 Blue - pump 7
 White - pump 8

MRI #	Topotecan rate (5,6,7,8) microliters/min	Time started	Time interval
	None	11:00am	-
	5, 5, 5, 5	11:09am	30min
3	10, 10, 10, 10	11:34am	30mi
4	15, 10, 10, 15	12:05pm	15mi
5	15 10 10, 15	12:28pm	30mi
	15, 15, 10, 10	1:09pm	15mi
7	15 15 10, 10	1:31pm	30 in
8	15, 15, 10, 10	2:00pm	30min
9	5 5 5 5	2:30pm	30min
10			

Topotecan Pumps

- Pump 5 - Green - Mesial
 - Initial Volume: 10mL
 - Final Volume: 2.766
- pump 6 - Black - Posterior
 - initial Volume: 10mL
 - Final Volume: 2.76
- pump 7 - Blue - Lateral
 - initial volume: 10mL
 - Final volume: 2.035
- pump 8 - white - Anterior
 - initial volume: 10mL
 - final volume: 2.317

Research Coordinator
 Emily Sparr
 Emily Sparr

MCC 19970 Procedure Form

MCC 19970

SUB ID	2
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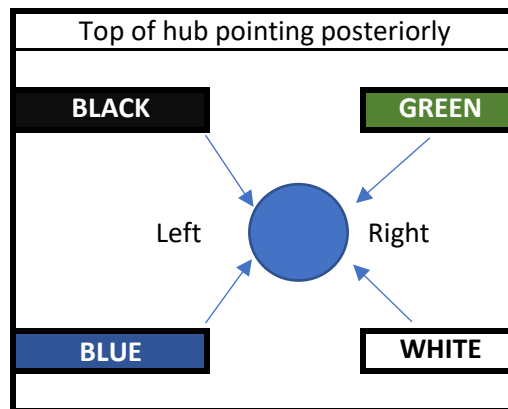
Catheter:	Column1	VA00516
Lot		1912007
Serial#		138L
exp:		Dec-21

Placement	Column1
Bone -> targ	41.5mm
to disk	121.0 mm

Biopsy Confirmed	12:02pm
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Microcatheter		Anatomical Location	Pump #	Topotecan Initial volume	Total Infused	
Black		posterior latera	6	5mL	0.581	
Blue		anterior lateral	7	5mL	3.043	
White		anterior mesial	5	5mL	2.989	
Green		posterial mesial	8	5mL	3.306	



MCC 19970 Procedure Form

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MCC 19970 Infusion Data Collection

Protocol Version: <u>2.2</u>		Subject#: <u>003</u>	Cohort# <u>1</u> (1-3)
SECTION 1: REPORT TYPE			
☒ Study Infusion		Start Date: <u>23-Feb-2023</u> DD-MMM-YYYY	
SECTION 2: STUDY EVENTS (Print another sheet, if needed)			
Event (e.g., procedure, imaging):	Date :	Time :	Comment :
Procedure Start Time		<u>8:25</u>	In OR
Patient under anesthesia		<u>07:29</u>	Pharmacy notified to start DP prep @
Time of Biopsy Collection		<u>8:50</u>	
Catheter Priming solution delivered		<u>08:04</u>	DP syringes fridge time expires @
Catheter Primed		<u>09:14</u>	
Procedure End Time		<u>10:04</u>	Leave OR
DP arrives at MRI		<u>10:25</u>	Coincides with patient arrival to MRI:
Infusion Starts		<u>10:34</u>	
Catheter removal start		10:50	
Catheter removal stop			
Patient arrives at PACU/ICU		<u>3:16</u>	Time may be unknown
SECTION 3: CATHETER IMPLANTATION			
Catheter 1 Serial#: <u>02204073</u> Expiry Date: <u>05-05-2024</u> DD-MMM-YYYY		Catheter Placement time: Start Time: <u>9-19</u> HH:mm End Time: <u>9-29</u> HH:mm	
Microcatheter/Pump Identification Part I: Entry #1: <u>Posterior - Green</u> Entry #2: <u>Inferior - black</u> Entry #3: <u>Anterior - blue</u> Entry #4: <u>Superior - white</u> Entries format: [pump #][microcatheter line color][placement location]			
Was there a technical issue during catheter placement? ☒ No ☐ Yes If Yes, Specify:	Was catheter placement confirmed by imaging? ☐ No ☒ Yes If yes, type of imaging: ☐ MRI ☒ CT If NO, Specify Why:	Was an AE Encountered? ☒ No ☐ Yes If Yes, Specify AE and complete SAE form, if applicable:	

MCC 19970 Infusion Data Collection

Protocol Version: <u>2.2</u>		Subject#: <u>003</u>	Cohort# <u>1</u> (1-3)
SECTION 4: INFUSION OVERVIEW 1			
Part 1 Infusion: Start Time: 2:39 <u>10:39</u> HH:mm End Time: <u>14:39</u> HH:mm		Pump # for catheter Green: Pump <u>5</u> Black: Pump <u>7</u> Blue: Pump <u>8</u> White: Pump <u>6</u>	
Anatomical Location for Catheters Posterior Lateral: Catheter <u>1</u> Anterior Lateral: Catheter <u>3</u> Anterior Mesial: Catheter <u>2</u> Inferior Posterior Mesial: Catheter <u>4</u> Superior Notes: posterior, inferior, anterior, Superior were used		Clinical Final Volume in each syringe AFTER infusion is complete Microcatheter/Pump Entry #1: _____ mL Microcatheter/Pump Entry #2: _____ mL Microcatheter/Pump Entry #3: _____ mL Microcatheter/Pump Entry #4: _____ mL N/A	
Total Volume of Topotecan Infusion achieved from Catheter #1: Microcatheter/Pump Entry #1: <u>2.049</u> Microcatheter/Pump Entry #2: <u>2.051</u> mL Microcatheter/Pump Entry #3: <u>4.133</u> mL Microcatheter/Pump Entry #4: <u>4.133</u> mL TOTAL=SUM of microcatheters: <u>12.366</u> mL			

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Was infusion completed per protocol? ☐ No ☒ Yes

If Not completed, provide overview of Infusion Complications:

If Not completed, provide reason of Infusion Complications:

- ☐ Adverse Event
☐ Technical Issues with Infusion
☐ Other (Specify):

~~Was max tumor coverage obtained?~~

☒ Yes, ☐ No, Specify: N/A

SECTION 5: Topotecan INFUSION 1 (print another sheet, if needed)

Catheter # (Pump#)	Topotecan infusion rate (µL/min)	Volume of infused Topotecan (per pump in mL)	Volume of Topotecan (left) in Syringe (mL)	Time (HH: mm)	Infusion Status (Start, Rate Change, Interrupted, Resumed, Discontinued)	Notes Regarding Infusion: (include MRI#, if applicable)
1	5	0		10:34	Start	
2	5	0		10:34	Start	
3	5	0		10:34	Start	
4	5	0		10:34	Start	
1	10	0.082		10:56	Change	
2	10	0.082		10:56	Change	
3	10	0.082		10:56	Change	
4	10	0.082		10:56	Change	
1	15	0.326		11:24	Change	
2	15	0.325		11:24	Change	
3	15	0.325		11:24	Change	
4	15	0.326		11:24	Change	
1	10	0.846		11:56	Change	
2	10	0.846		11:56	Change	
3	20	0.852		11:56	change	
4	20	0.852		11:56	Change	

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