

Data element	Response							
Fresh tissue received	No	Yes	<i>If yes, describe any additional tests/ frozen sections/biobanking performed</i>					
Procedure	Text		<i>As stated by the clinician</i>					
Specimen dimensions	__ x __ x __ mm							
Specimen description								
Number of cusp leaflets	__							
Commissures	Absent	Present	Number __	Fused	No	Yes		
Annular tissue/valve ring	Absent	Present	Circumference __ mm					
Calcification	Absent	Present	Number of cusps involved __					
Vegetation(s)	Absent	Present	Number of deposits __	Size __ mm in max. dimension				
Scarring/thickening	Absent	Present	Number of specific valves involved (if known) __					
Atrioventricular valves	Absent	Present	Normal	Abnormal, <i>describe</i>				
			Fused	Shortened	Elongated	Regular	Irregular	Ruptured
Papillary muscle	Absent	Present, <i>describe</i>						
		Intact with smooth surgical cut		Ruptured	Attenuated (e.g. scarred/hypertrophied)			
Semilunar valves	Absent	Present						
Fenestrations	Absent	Present	Number __	<b>For each</b>	Size __ mm in max. dim.	Location _____		
Other relevant macroscopic information	Text		<i>E.g. any additional orientation; specimen integrity (if disrupted)</i>					
Describe nature and site of blocks	Text							