

| Contor Nº                           | Center number where the patient is monitored      |                   |
|-------------------------------------|---|-------------------|
|                                     | Name of the context where the retiret is          |                   |
| Name of the center                  | monitored   |                   |
|                                     | The investigator who recruited the patient        |                   |
|                                     | into the study                                    |                   |
|                                     |   |                   |
| Investigator                        |   |                   |
|                                     | Patient ID created automatically thanks to the    |                   |
|                                     | center N°, the first letter of the first name and |                   |
|                                     | first letter of the patient's name.               |                   |
|                                     |   |                   |
| Patient ID                          |   |                   |
|                                     | HTAD identifier                                   |                   |
| HTAD identifier                     |   |                   |
|                                     | National rare disease identifier                  |                   |
|                                     |   |                   |
| National rare disease identifier    |   |                   |
|                                     | National anonymous identifier                     |                   |
| National anonymous identifier       |   |                   |
|                                     | National health identifier                        |                   |
| National health identifier          |   |                   |
|                                     | EUPID Pseudonym of the patient                    |                   |
|                                     |   |                   |
| EUPID Identifier                    | Date on which the nationt signed the consent      |                   |
|                                     | Date on which the patient signed the consent      |                   |
| Date of consent                     |   | DD/MM/YYYY        |
|                                     | First letter of the patient's last name           |                   |
| Last Name                           |   |                   |
|                                     | First letter of the patient's first name          |                   |
| First Name                          |   |                   |
|                                     | Patient's date of birth                           |                   |
| Date of birth                       |   | MM/YYYY           |
|                                     | Patient's sex at birth                            |                   |
|                                     |   | Male              |
|                                     |   |                   |
|                                     |   | Female            |
| Sex                                 |   |                   |
|                                     |   |                   |
|                                     |   | Unknown           |
|                                     |   |                   |
|                                     |   | Foetus unknown    |
|                                     | Patient alive, deceased, opted-out or lost.       | Alive             |
|                                     | cessation of participation form.                  | Dead              |
| Patient's status                    |   | Dedu              |
|                                     |   | Lost in follow-up |
|                                     |   | Opted-out         |
| Date of general patient information | Date of general patient information               | Yes, No           |



| Information and non-opposition of the<br>participant to the collection of his health data<br>in the Marfan HTAD database | Information and non-opposition of the patient<br>to the collection of his health data in the<br>Marfan HTAD database | Yes, No   |
|--|--|---|
|  | Agreement for the reuse of biological samples  |   |
| Availability of biological samples   | (carried out exclusively within the framework  |   |
|  | of treatment) in the context of subsequent research  | Yes. No   |
|  | Agreement for the conservation of biological   |   |
| Biological sample stored in a biobank  | samples (carried out exclusively within the  | Voc. No   |
|  | Information provided and no objection of the   |   |
| No objection to be contacted for research  | patient to be contacted for a later research   |   |
|  | objective  | Yes, No   |
| No objection to the reuse of health data in subsequent research projects   | patient to the reuse of their health data in the<br>context of subsequent research projects                          | Yes, No   |
|  | Contact method to be used to contact the   | E-mail  |
| Contact method   | patient in the context of subsequent research  | Phone   |
|  | projects   | Postal email  |
| Written and signed consent of the nations for  | Written and signed consent of the nations for  |   |
| the re-use of genetic data for further research  | the re-use of genetic data for further research  | Voc. No   |
| Written and signed consent of the patient for  | Written and signed consent of the patient for  |   |
| the reuse of biological samples (carried out   | the reuse of biological samples (carried out   |   |
| exclusively as part of the treatment) in the   | exclusively as part of the treatment) in the   |   |
| context of other genetic research<br>Reason for the 1st consultation   | Context of other genetic research<br>The reason for the natient's first consultation                                 | Yes, NO   |
|  |  | Aortic dissection                                       |
|  |  | Aortic aneurysm   |
|  |  | Aneurysm/dissection non aortic                          |
|  |  | Bicuspid aortic valve                                   |
|  |  | Mitral surgery  |
|  |  | Mitral vavle prolapse                                   |
|  |  | Other cardiovascular                                    |
|  |  | Ophtalmology  |
|  |  | Skeletal  |
|  |  | Pneumothorax  |
|  |  | On his own  |
|  |  | Family history (parent with clear diagnosis)            |
|  |  | Family history (parent with dissection or sudden death) |
|  |  | Unknown   |
|  |  | Other   |
| Date of first visit  | The date of the patient's first visit  | DD/MM/YYYY  |
| Clinical diagnosis by expert center  | Clinical diagnosis of the patient provided by  | Marfan Syndrome (Ghent 2)                               |
|  | the expert center  | Loeys Dietz (syndromic)                                 |
|  |  | Aortic aneurysm/dissection                              |
|  |  | Non aortic aneurysm/dissection                          |
|  |  | BAV without aneurysm                                    |
|  |  | isolated MVP  |



|  |   | Beals (CCA)                        |
|--|---|------------------------------------|
|  |   | Arterial tortuosity syndrome (ATS) |
|  |   | Ectopia lentis syndrome            |
|  |   | FBLN4/EFEMP2 related cutis laxa    |
|  |   | Vascular Ehlers Danlos             |
|  |   | Coronary artery dissection         |
|  |   | ELN related cutis laxa             |
|  |   | нсм                                |
|  |   | DCM                                |
|  |   | LQTS                               |
|  |   | No diagnosis                       |
|  |   | unaffected                         |
|  |   | Other                              |
|  | Clinical diagnosis of the patient provided by<br>the expert center (except the following<br>diseases: Marfan Syndrome (Ghent 2), Loeys<br>Dietz (syndromic), Aortic<br>aneurysm/dissection, Non aortic<br>aneurysm/dissection, BAV without aneurysm,<br>Isolated MVP, Beals (CCA), Arterial tortuosity<br>syndrome (ATS), Ectopia lentis syndrome,<br>FBLN4/EFEMP2 related cutis laxa, Vascular |                                    |
|  | Ehlers Danlos, Coronary artery dissection, ELN  |                                    |
| Uther, in clear                        | related cutis laxa, HCM, DCM, LQTS) Phenotype (HPO) or Genotype (HGVS) in the   |                                    |
|  | case the patient is waiting for diagnoses.  | Phenotype (HPO)                    |
| Pare disease diagnosis (orphanet code) | Orpha code of the rare disease's diagnosis.   |                                    |
| Diagnosis before arrival (BNDMR)       | Status of the patient's diagnosis before the  | No diagnosis                       |
|  | consultation  | Wrong diagnosis                    |
|  |   |                                    |
| Period of diagnosis                    | Period in the patient's life when the diagnosis   | Antenatal                          |
|  | was made  | At hirth                           |
|  |   | Postnatal                          |
|  |   |                                    |
|  | Patient's age at diagnosis. Automatically filled<br>in according to the period of diagnosis and the   |                                    |
| Age at diagnosis                       | Date of clinical diagnosis  |                                    |
| Date of clinical diagnosis             | Date of molecular diagnosis   |                                    |
| Diagnosis status (BNDMR)               | Status of the current patient's diagnosis   |                                    |
|  |   | Ongoing                            |
|  |   | Probable                           |
|  |   | Undetermined                       |
|  |   | Net eleccifiable                   |
| Mode of diagnosis (BNDMR)              | Mode of diagnosis established for the patient   |                                    |
|  |   |                                    |
|  |   | Allay-COT                          |



|                                      |   | Sanger                  |
|--------------------------------------|---|-------------------------|
|                                      |   | NGS                     |
|                                      |   | Other                   |
| Period of first symptoms             | Period in the patient's life when first   | Antenatal               |
|                                      | symptoms appeared   | At birth                |
|                                      |   | Postnatal               |
|                                      |   | Undetermined            |
| Age at onset                         | Age of onset of the first symtoms.<br>Automatically filled in according to the period<br>of symptoms and the date at first symptoms |                         |
| Date at first symptom                | Date of onset of patient's first symptoms   | DD/MM/YYYY              |
| Commentary                           | Free field for adding comments on the patient's diagnosis   |                         |
| Family number in the clinical center | Family number in the clinical center  |                         |
| Familial form                        | The patient's disease comes from a familial   | Yes                     |
|                                      | form  | No                      |
|                                      |   | Unknown                 |
| Family history                       | Family history of aortic dissection or aortic   | Dissection              |
|                                      | aneurysm  | Aneurysm                |
| Transmission                         | Paternal, maternal transmission or  | Father                  |
|                                      | neomutation   | Mother                  |
|                                      |   | Neomutation             |
|                                      |   | Unknown                 |
| Proband                              | is the patient the proband  | Yes                     |
|                                      |   | No                      |
| Identifier (BNDMR)                   | Proband's identifier  |                         |
| Relation with proband (BNDMR)        | family relation of the patient with the   | Brother                 |
|                                      | proband   | Sister                  |
|                                      |   | Mother                  |
|                                      |   | Father                  |
|                                      |   | Grandfather             |
|                                      |   | Grandmother             |
| DNA available                        | A genetic sample was taken from the patient   | Yes                     |
|                                      |   | No                      |
|                                      |   | Unknown                 |
| Date of DNA collection               | Date of DNA collection  | DD/MM/YYYY              |
| Family N° (lab)                      | Family number in the laboratory   |                         |
| Genetic testing                      | is a genetic testing done in the patient  | Performed               |
|                                      |   | Ongoing                 |
|                                      |   | No                      |
| Variant present                      | A genetic variant was found in the patient  | Pathogenic (Classe 4/5) |
|                                      |   | VUS (Classe 3)          |
|                                      |   | None                    |
| Conos                                | Gene identified in the natient  | EDN14                   |



|                                  |   | _                          |
|----------------------------------|---|----------------------------|
|                                  |   | TGFBR1                     |
|                                  |   | TGFBR2                     |
|                                  |   | SMAD2                      |
|                                  |   | SMAD3                      |
|                                  |   | TGFB2                      |
|                                  |   | TGFB3                      |
|                                  |   | ACTA2                      |
|                                  |   | MYH11                      |
|                                  |   | MYLK                       |
|                                  |   | PRKG1                      |
|                                  |   | LOX                        |
|                                  |   | FBN2                       |
|                                  |   | SLC2A10                    |
|                                  |   | FBLN4                      |
|                                  |   | NOTCH1                     |
|                                  |   | SMAD6                      |
|                                  |   | Other                      |
|                                  | Mutation in the patient's DNA. Please use the |                            |
| Constic Diagnosis (HGVS)         | International classification of mutations     |                            |
| Mutatian protain                 | Patient's protein mutation.                   |                            |
| Type of mutation                 | Type of mutation                              | DTC                        |
|                                  |   | Inframe                    |
|                                  |   |                            |
| If PTC, specify                  | If PTC, specify                               | Deletion                   |
|                                  |   |                            |
|                                  |   |                            |
|                                  |   | Duplication                |
|                                  |   | Nonsonso                   |
|                                  |   | Colicing                   |
| If Inframe, specify              | If Inframe, specify                           | Spinning<br>Cristoine loss |
|                                  |   | Addition of systems        |
|                                  |   | Addition of cystelline     |
| If large rearrangements, specify | If large rearrangements, specify              |                            |
|                                  |   |                            |
|                                  | Exon number                                   |                            |
| 2nd gene variant                 | Presence of a second gene variant in the      | Vac                        |
|                                  | patient                                       | Tes No                     |
| Genes                            | Second gene identified in the patient         |                            |
|                                  |   |                            |
|                                  |   |                            |
|                                  |   |                            |
|                                  |   | SMAD2                      |
|                                  |   | SMAD3                      |



|                                  |  | TGFB2                               |
|----------------------------------|--|-------------------------------------|
|                                  |  | TGFB3                               |
|                                  |  | ACTA2                               |
|                                  |  | MYH11                               |
|                                  |  | MYLK                                |
|                                  |  | PRKG1                               |
|                                  |  | LOX                                 |
|                                  |  | FBN2                                |
|                                  |  | SLC2A10                             |
|                                  |  | FBLN4                               |
|                                  |  | NOTCH1                              |
|                                  |  | SMAD6                               |
|                                  |  | Other                               |
|                                  | Second mutation in the patient's DNA. Please           |                                     |
|                                  | use the International classification of                |                                     |
| Genetic Diagnosis (HGVS)         | mutations (HGVS) The patient's second protein mutation |                                     |
| Mutation protein                 |  |                                     |
|                                  |  | РТС                                 |
|                                  |  | Inframe                             |
| If DTC, specify                  | If DTC, specify  | Large rearrangements                |
|                                  | IT PTC, specify  | Deletion                            |
|                                  |  | Insertion                           |
|                                  |  | Del/Ins                             |
|                                  |  | Duplication                         |
|                                  |  | Nonsense                            |
|                                  |  | Splicing                            |
| If Inframe, specify              | If Inframe, specify                                    | Cysteine loss                       |
|                                  |  | Addition of cysteine                |
|                                  |  | No modification in cysteine content |
| If large rearrangements, specify | If large rearrangements, specify                       | Large deletion                      |
|                                  |  | Large duplication                   |
| Exons                            | Exon number  |                                     |
| Date of last follow-up           | Date of last ophthalmologic follow-up                  | DD/MM/YYYY                          |
| Муоріа                           | The patient has myopia in the right eye                | Absent                              |
|                                  |  | Moderate                            |
|                                  |  | Important                           |
|                                  |  | Unknown                             |
| Ectopia lentis                   | The patient has ectopia lentis in the right eye        | Absent                              |
|                                  |  | Doubtful                            |
|                                  |  | Presence                            |
|                                  |  | Unknown                             |
|                                  | Date of diagnosis of ectopia lentis in the             |                                     |
| Date of diagnosis                | patient's right eye                                    | DD/MM/YYYY                          |



|                           | Age of diagnosis of ectopia lentis in the<br>patient's right eye. Automatically calculated<br>using the date of birth and the date of               |            |
|---------------------------|---|------------|
| Age<br>Aphakia            | diagnosis   |            |
|                           |   | Yes        |
|                           | Date of removal of the lens of the right eve  | NO         |
| Date of ablation          | Age of removal of the long of the right ave   | DD/MM/YYYY |
| Age                       | Automatically calculated using the date of<br>birth and the date of ablation  |            |
| Lens implant              | The patient has a lens implant in the right eye   | Yes        |
|                           |   | Νο         |
| Date of implant placement | Date of implant placement in the patient's right eye.   | DD/MM/YYYY |
| Але                       | Age of implant placement in the patient's right<br>eye. Automatically calculated using the date<br>of birth and the date of implant placement       |            |
| Cataract                  | The patient has the cataract in the right eye   | Vec        |
|                           |   | No         |
|                           | Date of cataract surgery on the patient's right   |            |
| Date of surgery           | eye   | DD/MM/YYYY |
| Age                       | Age of cataract surgery on the patient's right<br>eye. Automatically calculated using the date<br>of birth and the date of surgery.                 |            |
| Retinal detachment        | The patient has a retinal detachment in the   | Yes        |
|                           | right eye   | No         |
| Date of first detachment  | Date of retinal detachment in the patient's right eye   | DD/MM/YYYY |
| Age                       | Age of retinal detachment in the patient's<br>right eye. Automatically calculated using the<br>date of birth and the date of retinal<br>detachment. |            |
| Iris flocculi             | The patient has the iris flocculi in the right eye  | Yes        |
|                           |   | No         |
| Муоріа                    | The patient has myopia in the left eye  | Absent     |
|                           |   | Moderate   |
|                           |   | Important  |
|                           |   |            |
| Ectopia lentis            | The patient has the ectopia lentis in the left  |            |
|                           | eye   | Absent     |
|                           |   | Doubtful   |
|                           |   | Presence   |
|                           |   | Unknown    |
| Date of diagnosis         | patient's left eve  | DD/MM/YYYY |
| Age                       | Age of diagnosis of ectopia lentis in the<br>patient's left eye. Automatically calculated<br>using the date of birth and the date of<br>diagnosis   |            |
| Aphakia                   | The patient has the aphakia in the left eye   | Yes        |
|                           |   | No         |



| Date of ablation             | Date of removal of the lens of the left eye   | DD/MM/YYYY |
|------------------------------|---|------------|
| Аде                          | Age of removal of the lens of the left eye.<br>Automatically calculated using the date of<br>birth and the date of ablation                     |            |
| Lens implant                 | The patient has a lens implant in the left eye  | Yes        |
|                              |   | No         |
| Date of implant placement    | Date of implant placement in the patient's left eye   | DD/MM/YYYY |
| Age                          | Age of implant placement in the patient's left<br>eye. Automatically calculated using the date<br>of birth and the date of implant placement.   |            |
| Cataract                     | The patient has the cataract in the left eye  | Yes        |
|                              |   | No         |
| Date of surgery              | Date of cataract surgery on the patient's left eye  | DD/MM/YYYY |
| Age                          | Age of cataract surgery on the patient's left<br>eye. Automatically calculated using the date<br>of birth and the date of surgery.              |            |
| Retinal detachment           | The patient has a retinal detachment in the   | Yes        |
|                              | left eye  | No         |
|                              | Date of retinal detachment in the patient's left  |            |
| Date of first detachment     | eye   | DD/MM/YYYY |
| Age                          | Age of retinal detachment in the patient's left<br>eye. Automatically calculated using the date<br>of birth and the date of retinal detachment. |            |
| Iris flocculi                | The patient has the iris flocculi in the left eye   | Yes        |
|                              |   | No         |
| Date of last follow-up       | Date of last follow-up of the patient's cardiological risk factors  | DD/MM/YYYY |
| Treated HT (Hypertension)    | The patient is being treated for hypertension   | Yes        |
|                              |   | No         |
| Number of medicines          | Number of treatments taken by the patient for hypertension  |            |
| Treated hypercholesterolemia | The patient is being treated for  | Yes        |
|                              | hypercholesterolemia  | No         |
| Treated Diabetes             | The patient is being treated for diabetes   | Yes        |
|                              |   | No         |
| Туре                         | Type of patient's diabetes  |            |
|                              |   |            |
| Insulin                      | The patient takes insulin treatment to  | Vec        |
|                              | regulate his level of diabetes  | No         |
| Tabacco, past or present     | Is the patient a smoker or former smoker?   |            |
|                              |   |            |
|                              | Number of hours per week of sport practiced   | NO         |
| Exercise: hours/week         | by the patient  |            |
| Type of exercise practiced   | Type of exercise practiced by the patient   | Isometic   |
|                              |   | Endurance  |
|                              |   | Both       |



|                                       | Date of last follow-up of the patient's        |                                     |
|---------------------------------------|--|-------------------------------------|
| Date of last follow-up                | cardiological complications                    | DD/MM/YYYY                          |
| Complications The p                   | complications                                  | Yes                                 |
|                                       |  | No                                  |
|                                       |  | Unknown                             |
| First Aortic dissection               | The patient had to perform a first aortic      | Yes                                 |
|                                       | dissection                                     | No                                  |
|                                       |  | Unknown                             |
| If yes                                | Type of first aortic dissection performed on   | Ascending aorta                     |
|                                       | the patient                                    | Ascending aorta + arch              |
|                                       |  | Ascending aorta + arch + descinding |
|                                       |  | Descending thoracic + abdominal     |
|                                       |  | Abdominal aorta alone               |
|                                       | Date of the first aortic dissection performed  |                                     |
| Date                                  | on the patient                                 | DD/MM/YYYY                          |
|                                       | Age of patient at first aortic dissection.     |                                     |
| Age                                   | birth and the date of first aortic dissection  |                                     |
| Second Aortic dissection              | The patient had to perform a second aortic     | Yes                                 |
|                                       | dissection                                     | No                                  |
|                                       |  | Unknown                             |
| If yes                                | Type of second aortic dissection performed on  | Ascending aorta                     |
|                                       | the patient                                    | Ascending aorta + arch              |
|                                       |  | Ascending aorta + arch + descinding |
|                                       |  | Descending thoracic + abdominal     |
|                                       |  | Abdominal aorta alone               |
|                                       | Date of the second aortic dissection           |                                     |
| Date                                  | performed on the patient                       | DD/MM/YYYY                          |
|                                       | Age of patient at second aortic dissection.    |                                     |
| Age                                   | birth and the date of second aortic dissection |                                     |
| Third Aortic dissection               | The patient had to perform a third aortic      | Yes                                 |
|                                       | dissection                                     | No                                  |
|                                       |  | Unknown                             |
| lf yes                                | Type of third aortic dissection performed on   | Ascending aorta                     |
|                                       | the patient                                    | Ascending porta + arch              |
|                                       |  | Ascending ports + arch + descinding |
|                                       |  | Ascending abrta + arch + descinding |
|                                       |  | Descending thoracic + abdominal     |
|                                       | Date of the third agentic dissection performed | Abdominal aorta alone               |
| Date                                  | on the patient                                 | DD/MM/YYYY                          |
|                                       | Age of patient at third aortic dissection.     |                                     |
| 100                                   | Automatically calculated using the date of     |                                     |
| Age<br>First Ascending aortic surgery | The patient had to perform a first according   | Vez                                 |
|                                       | aortic surgery                                 |                                     |
|                                       |  | NO                                  |
|                                       |  | Unknown                             |



|                                     | Date of the first ascending aortic surgery     |                        |
|-------------------------------------|--|------------------------|
| Date                                | performed on the patient                       | DD/MM/YYYY             |
|                                     | surgery. Automatically calculated using the    |                        |
|                                     | date of birth and the date of first ascending  |                        |
| Age                                 | aortic surgery                                 |                        |
| Reason for surgery                  | Reason for the first ascending aortic surgery  | Aortic dilatation      |
|                                     |  | Aortic dissection      |
|                                     |  | Valvular heart disease |
| Last aortic diameter known          | Last aortic diameter known                     |                        |
| Type of aortic surgery              | Type of aortic surgery                         | Supra coronary         |
|                                     |  | Coronary implantation  |
| Valve surgery type                  | Valve surgery type                             | Valve sparing          |
|                                     |  | Valve replaced         |
| Type of valvular prothesis          | Type of valvular prothesis                     | Bioprothesis           |
|                                     |  | Mecannical valve       |
| Second Ascending aortic surgery     | The patient had to perform a second            | Yes                    |
|                                     | ascending aortic surgery                       | No                     |
|                                     |  | Unknown                |
|                                     | Date of the second ascending aortic surgery    |                        |
| Date                                | performed on the patient                       | DD/MM/YYYY             |
|                                     | surgery. Automatically calculated using the    |                        |
|                                     | date of birth and the date of second ascending |                        |
| Age                                 | aortic surgery                                 |                        |
| Reason for surgery                  | Reason for the second ascending aortic         | Aortic dilatation      |
|                                     | Surgery  | Aortic dissection      |
|                                     |  | Valvular heart disease |
| Last aortic diameter before surgery | Last aortic diameter before surgery            |                        |
| Type of aortic surgery              | Type of aortic surgery                         | Supra coronary         |
|                                     |  | Coronary implantation  |
| Valve surgery type                  | Valve surgery type                             | Valve sparing          |
|                                     |  | Valve replaced         |
| Type of valvular prothesis          | Type of valvular prothesis                     | Bioprothesis           |
|                                     |  | Mecannical valve       |
| Surgery of cross                    | The patient had to perform a cross surgery     | Yes                    |
|                                     |  | No                     |
|                                     |  | Unknown                |
|                                     | Date of the cross surgery performed on the     |                        |
| Date                                | patient  | DD/MM/YYYY             |
|                                     | Age of the patient at the time of the cross    |                        |
| Age                                 | date of birth and the date of cross surgery    |                        |
| Surgery type                        | Type of cross surgery performed on the         | Thoracotomy            |
|                                     | patient  | Endoprothesis          |
| Elephant trunk                      | Was elephant technique used in the patient ?   | Yes                    |
|                                     |  | No                     |
|                                     |  | 1 · · · ·              |



| First Descending aortic surgery  | a first descending aortic surgery was  | Yes                  |
|----------------------------------|--|----------------------|
|                                  | peformed   | Νο                   |
|                                  |  | Unknown              |
|                                  | Date of the first descending aortic surgery                                      |                      |
| Date                             | performed on the patient   | DD/MM/YYYY           |
|                                  | Age of patient at the first descending aortic                                    |                      |
|                                  | surgery. Automatically calculated using the                                      |                      |
| A.g.o.                           | date of birth and the date of first descending                                   |                      |
| Age<br>Surgery type              | Type of first descending portic surgery  |                      |
| Surgery type                     | performed on the patient   | Thoracotomy          |
|                                  |  | Endoprothesis        |
| Second Descending aortic surgery | The patient had to perform a second  | Yes                  |
|                                  | descending aortic surgery  | No                   |
|                                  |  | Unknown              |
|                                  | Date of the second descending aortic surgery                                     |                      |
| Date                             | performed on the patient   | DD/MM/YYYY           |
|                                  | Age of patient at the second descending aortic                                   |                      |
|                                  | surgery. Automatically calculated using the date of hirth and the date of second |                      |
| Age                              | descending aortic surgery  |                      |
| Surgery type                     | Type of second descending aortic surgery   | Thoracotomy          |
|                                  | performed on the patient   | Endoprothesis        |
| First Mitral surgery             | The patient had to perform a first mitral  | Voc                  |
|                                  | surgery  |                      |
|                                  |  | NO .                 |
|                                  | Data of the first without surgery as a formed on                                 | Unknown              |
| Date                             | the patient  | DD/MM/ΥΥΥΥ           |
|                                  | Age of patient at the first mitral surgery.                                      |                      |
|                                  | Automatically calculated using the date of                                       |                      |
| Age                              | birth and the date of first mitral surgery                                       |                      |
| Surgery type                     | Type of first mitral surgery performed on the                                    | Mitral valvuloplasty |
|                                  | patient  | Mechanical valve     |
|                                  |  | Bioprothesis         |
| Second Mitral surgery            | The patient had to perform a second mitral                                       | Yes                  |
|                                  | surgery  | No                   |
|                                  |  |                      |
|                                  | Date of the second mitral surgery performed                                      |                      |
| Date                             | on the patient   | DD/MM/YYYY           |
|                                  | Age of patient at the second mitral surgery.                                     |                      |
|                                  | Automatically calculated using the date of                                       |                      |
| Age                              | birth and the date of second mitral surgery                                      |                      |
| Surgery type                     | the patient  | Mitral valvuloplasty |
|                                  |  | Mechanical valve     |
|                                  |  | Bioprothesis         |
| Congenital cardiopathy           | The patient has a congenital cardiopathy   | Yes                  |
|                                  |  | No                   |
|                                  |  | Unknown              |
| Atrial Septal Defect             | The patient has an atrial septal defect  | Vec                  |



|                             |  | No             |
|-----------------------------|--|----------------|
|                             |  |                |
|                             | Date of diagnosis of the natient's atrial sental |                |
| Date                        | defect   | DD/MM/YYYY     |
|                             | Patient's age at diagnosis of atrial septal      |                |
| 4.70                        | defect. Automatically calculated using the       |                |
| Age<br>Mode of care         | Mode of care of the natient's atrial sental      |                |
|                             | defect   | Surgery        |
|                             |  | Endovascular   |
| Mantai autor Canatal Dafaat | The period has a contribute event of the fact    | No treatment   |
| Ventricular Septal Defect   | The patient has a ventricular septal defect      | Yes            |
|                             |  | No             |
|                             |  | Unknown        |
|                             | Date of diagnosis of the patient's ventricular   |                |
| Date                        | septal defect                                    | DD/MM/YYYY     |
|                             | defect. Automatically calculated using the       |                |
| Age                         | date of birth and the date of diagnosis          |                |
| Mode of care                | Mode of care of the patient's ventricular        | Surgery        |
|                             | septal defect                                    | Endovascular   |
|                             |  | No treatment   |
| Aortic Coarctation          | The patient has an aortic coarctation            | Yes            |
|                             |  | No             |
|                             |  |                |
|                             | Date of diagnosis of the patient's aortic        |                |
| Date                        | coarctation                                      | DD/MM/YYYY     |
|                             | Patient's age at diagnosis of aortic             |                |
| 4.50                        | coarctation. Automatically calculated using      |                |
| Mode of care                | Mode of care of the patient's aortic             | Current .      |
|                             | coarctation                                      |                |
|                             |  | Endovascular   |
| Patant Ductus Artoriosus    | The patient has a patent ductus arteriosus       | No treatment   |
| Patent Ductus Artenosus     | The patient has a patent ductus alteriosus       | Yes            |
|                             |  | No             |
|                             |  | Unknown        |
| Data                        | Date of diagnosis of the patient's patent        |                |
| Date                        | Patient's age at diagnosis of the natent ductus  |                |
|                             | arteriosus. Automatically calculated using the   |                |
| Age                         | date of birth and the date of diagnosis          |                |
| Mode of care                | Mode of care of the patient's patent ductus      | Surgery        |
|                             | arteriosus                                       | Endovascular   |
|                             |  | No treatment   |
| Heart transplantation       | The patient has a heart transplantation          | Yes            |
|                             |  | No             |
|                             |  | Linknown       |
| Dete                        | Date of heart transplantation                    |                |
| Date                        | Date of ficare transplatitution                  | υυ/Ινιίνι/ΥΥΥΥ |



|                             | Patient's age at the heart transplantation.<br>Automatically calculated using the date of |                      |
|-----------------------------|---|----------------------|
| Age                         | birth and the date of heart transplantation   |                      |
| Date of last follow-up      | peripheral vascular disease   | DD/MM/YYYY           |
| Peripheral vascular disease | The patient has a peripheral vascular disease   | Yes                  |
|                             |   | No                   |
|                             |   | Unknown              |
| Location                    | The physical location of the peripheral   | Cerebral             |
|                             | vascular disease  | Carotid              |
|                             |   | Vertebral            |
|                             |   | Subclavian           |
|                             |   | Axillary             |
|                             |   | Mesenteric           |
|                             |   | Celiac               |
|                             |   | Renal                |
|                             |   | Hepatic              |
|                             |   | Splenic              |
|                             |   | Iliac                |
|                             |   | Femoral              |
|                             |   | Popliteal            |
|                             |   | Other                |
| Side                        | The side of the peripheral vascular disease   | Left                 |
|                             |   | Right                |
| Type of events              | Type of peripheral vascular event   | Aneurysm             |
|                             |   | Dissection           |
|                             |   | Rupture              |
|                             |   | Arterial tortuosity  |
|                             |   | MoyaMoya type        |
| Date of diagnosis           | Date of diagnosis of the peripheral vascular event  | DD/MM/YYYY           |
| Imaging technique           | Imaging technique used to visualise the   | Echography           |
|                             | peripheral vascular disease   | CT scanner           |
|                             |   | MRI                  |
| Surgery                     | Surgery performed on the patient for the  | Yes                  |
|                             | treatment of the peripheral vascular disease  | No                   |
|                             |   | Unknown              |
| Mode of surgery             | Mode of surgery performed on the patient for  | Classic surgery      |
|                             | disease   | Percutaneous surgery |
| Date of surgery             | Date of surgery for peripheral vascular disease   | DD/MM/YYYY           |
| Stroke                      | The patient has suffered a stroke   | Yes                  |
|                             |   | No                   |
|                             |   | Unknown              |
| Commentary                  | Free field for adding comments on the patient's peripheral vascular disease               |                      |



| Treatments                 | Type of treatment taken by the patient to   | Betablocker                  |
|----------------------------|---|------------------------------|
|                            | solve heart problems  | ARA2                         |
|                            |   | ACEI                         |
|                            |   | Calcium blocker              |
|                            |   | Diuretic including aldactone |
|                            |   | Statins                      |
|                            |   | Anticoagulation              |
|                            |   | Aspirin                      |
| If anticoagulants, specify | Type of anticoagulant taken by the patient  | VKA                          |
|                            |   | NOAC                         |
| Start date                 | Start date of treatment   | DD/MM/YYYY                   |
| Ongoing                    | Ongoing treatment   | Yes                          |
|                            |   | No                           |
| If no, end date :          | End date of treatment   | DD/MM/YYYY                   |
| Date                       | Date of cardiology examination  | DD/MM/YYYY                   |
| Height (cm)                | Patient's height (cm)   |                              |
| Weight (kg)                | Patient's weight (kg)   |                              |
|                            | Body surface area with the Dubois and Dubois<br>formula : 0,007184 x Height (cm)^0,725 x<br>Weight (kg)^0,425. Automatically calculated |                              |
| Body surface area          | using the patient's height and weight   |                              |
| Systolic BP (mmHg)         | Patient's systolic BP (mmHg)  |                              |
| Diastolic BP (mmHg)        | Cieve the three vieweliand with an  |                              |
| Sinus rnythm               | electrocardiogram/Holter  | Yes                          |
|                            |   | No                           |
|                            | The estimate relation during the estimate   | Unknown                      |
| Heart rate (bpm)           | electrocardiogram/Holter  |                              |
| Holter available           | The cardiac holter device was used on the   | Yes                          |
|                            | patient   | Νο                           |
|                            |   | Unknown                      |
| Aortic valve               | Aortic valve structure of the patient visualised  | Tricuspid                    |
|                            | by echocardiography   | Bicuspid                     |
|                            |   | Unknown                      |
|                            |   | Bioprothesis                 |
|                            |   | Mechanical                   |
|                            |   | Valvular plasty              |
| If BAV                     | Number and type of raphe of the patient's   | 0 raphe, vertical opening    |
|                            | bicupid aortic valve visualized by  | 0 raphe, horizontal opening  |
|                            |   | 1 raphe, LR                  |
|                            |   | 1 raphe, RN                  |
|                            |   | 1 raphe, LN                  |
|                            |   | 2 raphe                      |



|                                    | Mean gradient at the aortic valve of the patient with an aortic bioprosthesis or a        |            |
|------------------------------------|---|------------|
| Mean gradient (mmHg)               | mechanical aortic valve   |            |
|                                    | Maximum aortic valve velocity of the patient with an aortic bioprosthesis or a mechanical |            |
| Max velocity (m/sec)               | aortic valve  |            |
| Aortic regurgitation               | Importance of the aortic regurgitation in +   | 0          |
|                                    | (10110 to 4+)   | 1+         |
|                                    |   | 2+         |
|                                    |   | 3+         |
|                                    |   | 4+         |
|                                    | Telediastolic velocity in the arch of the patient   |            |
| Telediastolic velocity in the arch | with a 1+, 2+, 3+ or 4+ aortic regurgitation  |            |
| · · · · · ·                        | Patient's aortic annulus diameter (mm)  |            |
| Aortic annulus (mm)                | calculated by echocardiography  |            |
|                                    | Patient's sinus of Valsalva diameter (mm)   |            |
| Sinus of Valsalva (mm)             | calculated by echocardiography  |            |
| Singtubular junction (mm)          | Patient's sinotubular junction diameter (mm)  |            |
|                                    | Calculated by echocardiography  |            |
| Ascending aorta (mm)               | calculated by echocardiography  |            |
|                                    | Patient's aorta arch diameter (before   |            |
|                                    | subclavian)(mm) calculated by   |            |
| Aorta arch (before subclavian)(mm) | echocardiography  |            |
|                                    | Patient's descending thoracic aorta diameter  |            |
| Descending thoracic aorta (mm)     | (mm) calculated by echocardiography   |            |
|                                    | Patient's abdominal aorta diameter (mm)   |            |
| Abdominal aorta (mm)               | calculated by echocardiography  |            |
| Pulmonary artery (mm)              | Patient's pulmonary artery diameter (mm)<br>calculated by echocardiography                |            |
| Myxoid aspect                      | Presence of a myxoid aspect of the patient's  | Yes        |
|                                    | mitral valve observed on echocardiography   | No         |
|                                    |   | Unknown    |
| Prolapse                           | The type of mitral valve prolapse of the  | Normal     |
|                                    | patient observed on echocardiography  | Ballooning |
|                                    |   | Prolapse   |
| Mitral regurgitation               | Importance of the mitral valve regurgitation in   | 0          |
|                                    | + (from 0 to 4+)  | 1+         |
|                                    |   | 2+         |
|                                    |   | 3+         |
|                                    |   | 4+         |
|                                    | Left ventricular end-diastolic diameter (mm)  |            |
| LVEDD (mm)                         | calculated by echocardiography  |            |
| LVESD (mm)                         | Left ventricular end-systolic diameter (mm)   |            |
|                                    | Left Ventricular Election Fraction by Simpson's   |            |
| LVEF Simpson (%)                   | method  |            |



|                          | Left Ventricular Ejection Fraction by Teicholz's  |     |
|--------------------------|---|-----|
|                          | method. Automatically calculated using the  |     |
|                          | LVEDD and LVESD. Formula : [7   |     |
|                          | LVEDD^3/(2.4+LVEDD) - 7   |     |
|                          | LVESD^3/(2.4+LVESD)]/ [7  |     |
| LVEF Teicholz (%)        | LVEDD^3/(2.4+LVEDD)] * 100  |     |
| Patent Ductus Arteriosus | Presence of a persistence in the patient's  | Ves |
|                          | ductus arteriosus   |     |
|                          |   | NO  |
| Other                    | Free field for adding comments on the   |     |
| Other                    | patient's echocardiography  |     |
|                          | Calculation of the patient's valsava Z-score  |     |
|                          | from echocardiography according to campens.   |     |
|                          | Automatically calculated using the patient's  |     |
|                          | age, the sinus valsava diameter, height and   |     |
|                          | weight.   |     |
|                          |   |     |
|                          | Man : $(Lg10(SOV) - (1.108 + 0.136 \times Lg10(Age))$   |     |
|                          | + 0.099 x BSA DB))/0.0381   |     |
|                          | woman : (Lg10(SoV) - (1.100 + 0.129 x   |     |
|                          | $Lg10(Age) + 0.091 \times BSA DB))/0.0421$  |     |
|                          | BSA DB = BSA calculated with the Dubois and   |     |
|                          | Dubois formula : 0,007184 x Height  |     |
| Assessible to Company    | $(cm)^{1}/25 \times Weight (kg)^{1}/425$  |     |
| According to Campens     | Sov = sinuses of vaisaiva.  |     |
|                          | Calculation of the patient's valsava 2-score  |     |
|                          | from echocardiography according to Roman.   |     |
|                          | Automatically calculated using the patient's  |     |
|                          | age, the sinus vaisava diameter, neight and   |     |
|                          | Formula :   |     |
|                          | Formula:  |     |
|                          | <20 years : $2 = (measured root diameter - 1.02+0.08 × BSA)/0.18$                                       |     |
|                          | $1.02+0.50 \times \text{DSA}//0.10$<br>$20-40 \cdot 7 = (\text{measured root diameter} - 0.97 + 10.00)$ |     |
|                          | $1 12 \times BSA)/0.24$   |     |
|                          | $>40 \cdot 7 = (measured root diameter - 1.92 +$  |     |
|                          | $0.74 \times BSA)/0.37$   |     |
|                          | BSA calculated with the Dubois and Dubois   |     |
|                          | formula : 0.007184 x Height (cm)^0.725 x  |     |
| According to Roman       | Weight (kg)^0.425   |     |
|                          | Calculation of the patient's valsava Z-score  |     |
|                          | from echocardiography according to Gautier.   |     |
|                          | Automatically calculated, for patients under  |     |
|                          | 18 years, using the patient's age, the sinus  |     |
|                          | valsava diameter, height and weight.  |     |
|                          | Formula :   |     |
|                          | Man : Z=[ln(d) - 3.1 - 0.49 x ln(BSA)]/0.1  |     |
|                          | Woman : Z=[ln(d) - 3.1 - 0.44 x ln(BSA)]/0.09   |     |
|                          | BSA calculated with the Dubois and Dubois   |     |
|                          | formula : 0,007184 x Height (cm)^0,725 x  |     |
|                          | Weight (kg)^0,425   |     |
| According to Gautier     |   |     |



|  | Calculation of the patient's valsava Z-score   |            |
|--|--|------------|
|  |  |            |
|  | Automatically calculated, for patients 15 years  |            |
|  | and over using the patient's age, the sinus  |            |
|  | valsava diameter, height and weight.   |            |
|  | Formula :  |            |
|  | Man : Z = (diameter of the sinus of Valsava -  |            |
|  | (2.423 + (age x 0.009) + (BSA x 0.461) - (1 x  |            |
|  | Woman : $7 = (diameter of the sinus of Valsava$  |            |
|  | $-(2.423 + (age \times 0.009) + (BSA \times 0.461) - (2 \times 10^{-10})$  |            |
|  | 0.267)))/0.261   |            |
|  | with the diameter of the sinus of Valsava in   |            |
|  | cm   |            |
|  | BSA DB = BSA calculated with the Dubois and  |            |
| Assessible to Development                  | Dubois formula : 0,007184 x Height   |            |
| According to Devereux                      | (cm)^0,725 X Weight (kg)^0,425   |            |
|  | from echocardiography according to Devereux  |            |
|  | on size only.  |            |
|  | Automatically calculated using the patient's   |            |
|  | age, the sinus valsava diameter, height and  |            |
|  | weight.  |            |
|  | Z = (diameter of the sinus of Valsava - (1.519 +   |            |
|  | $(age \times 0.010) + (taille \times 0.010) - (sex \times 0.010) + (taille \times 0.010) - (sex \times 0.010) + (taille \times 0.010) + (sex \times 0.010) + (taille \times 0.010) + (tai$ |            |
|  | for women  |            |
| According to Devereux on size only         | The diameter of the sinus of Valsava is in cm.   |            |
|  | Calculation of the patient's tubular aorta from  |            |
|  | echocardiography according to campens.   |            |
|  | Man : (Lg10(AA) - (1.033 + 0.188 x Lg10(Age) +   |            |
|  | 0.070 x BSA))/0.0431   |            |
|  | Woman : $(Lg10(AA) - (1.033 + 0.188 x))$   |            |
|  | $Lg10(Age) + 0.070 \times BSA)//0.0431$  |            |
|  | calculated with the Dubois and Dubois :  |            |
|  | 0,007184 x Height (cm)^0,725 x Weight  |            |
| According to Campens                       | (kg)^0,425   |            |
|  | Calculation of the patient's tubular aorta from  |            |
|  | echocardiography according to Gautier.   |            |
|  | Homme : $Z = [ln(d) - 2.9 - 0.46 \times ln(BSA)]/0.11$   |            |
|  | Femme : $Z = [In(d) - 2.9-0.46 \times In(BSA)]/0.1$  |            |
|  | calculated with the Dubois and Dubois :  |            |
|  | 0,007184 x Height (cm)^0,725 x Weight  |            |
| According to Gautier                       | (kg)^0,425   |            |
| Other imaging studies performed since last | The patient has had imaging (e.g. MRI or CT  | Yes        |
| consultation                               | scanner) since the last consultation other than  |            |
|  | echocardiography or ECG/Holter .   | No         |
|  | i ne patient has had an MRI since the last   | Yes        |
|  |  | No         |
| Date                                       | Date of the patient's MRI  | DD/MM/YYYY |
|  | Patient's ascending aorta size (mm) calculated   |            |
| Ascending aorta (mm)                       | Dy IVIKI<br>Patient's aorta arch (before subclavian) size  |            |
| Aorta arch (before subclavian)(mm)         | (mm) calculated by MRI   |            |
|  |  |            |



| Descending thoracic aorta (mm)     | Patient's descending thoracic aorta size (mm)  |            |
|------------------------------------|--|------------|
|                                    | Patient's abdominal aorta size (mm)            |            |
| Abdominal aorta (mm)               | calculated by MRI                              |            |
|                                    | Technique for measuring max diameters:         |            |
|                                    | Diameter perpendicular to the axis of the      |            |
|                                    | largest vessel, diameters at the level of the  |            |
|                                    | sinuses of valsalva are from cusp to cusp.     |            |
| Diameter 1                         | Calculation of max diameter 1 from an MRI.     |            |
|                                    | Technique for measuring max diameters:         |            |
|                                    | Diameter perpendicular to the axis of the      |            |
|                                    | largest vessel, diameters at the level of the  |            |
|                                    | sinuses of valsalva are from cusp to cusp.     |            |
| Diameter 2                         | Calculation of max diameter 2 from an MRI.     |            |
|                                    | Technique for measuring max diameters:         |            |
|                                    | Diameter perpendicular to the axis of the      |            |
|                                    | largest vessel, diameters at the level of the  |            |
|                                    | sinuses of valsalva are from cusp to cusp.     |            |
| Diamotor 2                         | Calculation of max diameter 3 from an MRI.     |            |
| CT scanner                         | The patient has had an CT scanner since the    | No.        |
|                                    | last consultation                              | Yes        |
|                                    |  | No         |
| Date                               | Date of the patient's CT scanner               | DD/MM/YYYY |
|                                    | Patient's ascending aorta size (mm) calculated |            |
| Ascending aorta (mm)               | by CT scanner                                  |            |
|                                    | Patient's aorta arch (before subclavian) size  |            |
| Aorta arch (before subclavian)(mm) | (mm) calculated by CT scanner                  |            |
|                                    | Patient's descending thoracic aorta size (mm)  |            |
| Descending thoracic aorta (mm)     | calculated by CT scanner                       |            |
|                                    | Patient's abdominal aorta size (mm)            |            |
| Abdominal aorta (mm)               | calculated by CT scanner                       |            |
|                                    | Technique for measuring max diameters:         |            |
|                                    | Diameter perpendicular to the axis of the      |            |
|                                    | largest vessel, diameters at the level of the  |            |
|                                    | sinuses of valsalva are from cusp to cusp.     |            |
| Diameter 1                         | Calculation of max diameter 1 from an CI       |            |
| Diameter 1                         | Scanner.                                       |            |
|                                    | Diameter perpendicular to the axis of the      |            |
|                                    | largest vessel, diameters at the level of the  |            |
|                                    | sinuses of valsalva are from cush to cush      |            |
|                                    | Calculation of max diameter 2 from an CT       |            |
| Diameter 2                         | scanner  |            |
|                                    | Technique for measuring may diameters:         |            |
|                                    | Diameter perpendicular to the axis of the      |            |
|                                    | largest vessel, diameters at the level of the  |            |
|                                    | sinuses of valsalva are from cusp to cusp.     |            |
|                                    | Calculation of max diameter 3 from an CT       |            |
| Diameter 3                         | scanner.                                       |            |
|                                    | Date of orthopaedic rheumatological            |            |
| Date of examination                | examination                                    | DD/MM/YYYY |
| Height (cm)                        | Patient's height (cm)                          |            |
| Weight (kg)                        | Patient's weight (kg)                          |            |
| WCIBIIL (NB)                       |  |            |



|  | Patient's BMI (Body Mass Index).<br>Automatically calculated using the patient's<br>height and weight.   |            |
|--|--|------------|
| вмі                                      | Formula : weight/height <sup>2</sup> (kg/m)  |            |
|  | Patient's Zscore/Height only for patients  |            |
| Z score / Height                         | under 18 years of age  |            |
| Arm span (cm)                            | Patient's arm span (cm)  |            |
| Calculation (Arm span / Height)          | height and arm span.   |            |
| Lower segment (cm)                       | Patient's lower segment (cm)   |            |
| Upper segment (cm)                       | Patient's upper segment (cm)   |            |
| Calculation (lower / upper segment) (cm) | Automatically calculated using the patient's upper and lower segment   |            |
|  | Date of last follow-up of the patient's  |            |
| Date of last follow-up                   | orthopaedic and rheumatological history  | DD/MM/YYYY |
| Surgery for cervical instability         | The patient had an operation for cervical  | Yes        |
|  | instability  | No         |
|  |  | Unknown    |
| Date                                     | Date of the patient's operation for cervical<br>instability  | DD/MM/YYYY |
| Age                                      | Age of the patient at the time of his operation<br>for cervical instability.<br>Automatically calculated using the patient's<br>date of birth and the date of the surgery. |            |
| Bone fracture                            | The patient had a bone fracture  | Yes        |
|  |  | No         |
|  |  | Unknown    |
| Recurrent sprains                        | The patient has recurrent sprains  | Yes        |
|  |  | No         |
|  |  | Unknown    |
| Recurring dislocations                   | The patient has recurrent dislocations   | Yes        |
|  |  | No         |
|  |  | Unknown    |
| Chronic fatigue                          | The patient has chronic fatigue  | Yes        |
|  |  | No         |
|  |  | Unknown    |
| Joint pain                               | The patient has joint pain   | Yes        |
|  |  | No         |
|  |  | Unknown    |
| Migraine                                 | The patient has migraine   | Yes        |
|  |  | No         |
|  |  | Unknown    |
| Headache increased by orthostatism       | The patient has headache increased by  | Yes        |
|  | orthostatism   | No         |
|  |  | Unknown    |
| Eosinophyllous esophagitis               | The patient has eosinophyllous esophagitis   | Yes        |
|  |  | No         |



|                            |  | Unknown    |
|----------------------------|--|------------|
| Inflammatory bowel disease | The patient has a inflammatory bowel disease   | Yes        |
|                            |  | No         |
|                            |  | Unknown    |
| Food allergy               | The patient has a food allergy   | Yes        |
|                            |  | Νο         |
|                            |  | Unknown    |
| Severe allergy             | The patient has a severe allergy   | Yes        |
|                            |  | No         |
|                            |  | Unknown    |
|                            | Free field for adding comments on the  |            |
| Cancer                     | patient's cancer   |            |
|                            | Free field for adding comments on the  |            |
| Commentary                 | history  |            |
| ,                          | Date of last follow-up of patient's limbs,   |            |
| Date of last follow-up     | thorax and face  | DD/MM/YYYY |
| Pectus                     | The patient has a deformity of the thorax called pectus                                | No         |
|                            |  | Mild       |
|                            |  | Carinatum  |
|                            |  | Excavatum  |
| Surgery for pectus         | The patient had surgery for his thoracic   | Yes        |
|                            | deformity (pectus)   | No         |
|                            |  | Unknown    |
| Date                       | Date of patient's pectus operation   | DD/MM/YYYY |
|                            | The age of the patient at the time of his thoracic surgery for the treatment of pectus |            |
| Thumb sign                 | The thumb is going beyond the auricular when   | Yes        |
|                            | the hand is closed   | Νο         |
|                            |  | Unknown    |
| Wrist sign                 | Ability to cross the last phalanger of the   | Yes        |
|                            | auricular and the last phalanger of the thumb  | No         |
|                            | across the wrist   | Unknown    |
| Beighton Score             | Calculation of Score according to Beighton's rule                                      |            |
| Hyperlaxity                | If the patient has a Beighton score greater  | Yes        |
|                            | than 5 and is under 18 years of age then the   | No         |
|                            | If the patient has a Beighton score greater  |            |
|                            | than 4 and is over 18 years of age then the  |            |
|                            | patient has hyperlaxity. Otherwise he is not   |            |
|                            | hyperiaxed.<br>Automatically filled in using the natient's                             |            |
|                            | Beighton score and patient's age.  |            |
|                            | -  | Unknown    |
| Elbow extension degree     | What is the degree of extension of the   | > 170°     |
|                            | patient's elbows?  | < 170°     |



| Pes Planus                      | The patient has pes planus                  | No                          |
|---------------------------------|---|-----------------------------|
|                                 |   | Yes                         |
|                                 |   | Yes with hindfoot deformity |
|                                 |   | Unknown                     |
| Camptodactyly                   | The patient has camptodactyly               | Yes                         |
|                                 |   | No                          |
|                                 |   | Unknown                     |
| Facial dysmorphism              | The patient has facial dysmorphism          | Yes                         |
|                                 |   | No                          |
|                                 |   | Unknown                     |
| Dolichocephaly                  | The patient has dolichocephaly              | Yes                         |
|                                 |   | No                          |
| Downslanting palpebral fissures | The patient has downslanting palpebral      | Yes                         |
|                                 | fissures                                    | No                          |
| Enophthalmia                    | The patient has enophthalmia                | Yes                         |
|                                 |   | No                          |
| Retrognathia                    | The patient has retrognathia                | Yes                         |
|                                 |   | No                          |
| Malar hypoplasia                | The patient has malar hypoplasia            | Yes                         |
|                                 |   | No                          |
| Hypertelorism                   | The patient has hypertelorism               | Yes                         |
|                                 |   | No                          |
|                                 |   | Unknown                     |
| Blue sclerotic                  | The patient has blue sclerotic              | Yes                         |
|                                 |   | No                          |
|                                 |   | Unknown                     |
| Dental malocclusion             | The patient has dental malocclusion         | Yes                         |
|                                 |   | No                          |
|                                 |   | Unknown                     |
| Ogival palate                   | The patient has ogival palate               | Yes                         |
|                                 |   | No                          |
|                                 |   | Unknown                     |
| Craniosynostosis                | The patient has craniosynostosis            | Yes                         |
|                                 |   | No                          |
| Uvula                           | Shape of the uvula                          | Normal                      |
|                                 |   | Bifid                       |
|                                 |   | Wide                        |
|                                 |   | Wide with raphe             |
|                                 |   | Short                       |
| Osteoarthritis                  | The patient has osteoarthritis              | Yes                         |
|                                 |   | No                          |
|                                 |   | Unknown                     |
| Date                            | Patient's osteoarthritis symptom onset date | DD/MM/YYYY                  |



| Hand                          | The patient has osteoarthritis in the hands                | Yes           |
|-------------------------------|--|---------------|
|                               |  | No            |
| Cervical                      | The patient has osteoarthritis in the cervical             | Yes           |
|                               |  | No            |
| Lumbar rachis                 | The patient has osteoarthritis in the lumbar               | Yes           |
|                               | rachis   | No            |
| Нір                           | The patient has osteoarthritis in the hip                  | Yes           |
|                               |  | No            |
| Клее                          | The patient has osteoarthritis in the knee                 | Yes           |
|                               |  | No            |
| Other                         | The patient has osteoarthritis elsewhere than              | Yes           |
|                               | in the knees, hands, cervical, lumbar rachis               | No            |
|                               | Date of last follow-up of patient's spine and              |               |
| Date of last follow-up        | hip  | DD/MM/YYYY    |
| Scoliosis                     | The patient has a scoliosis                                | Yes           |
|                               |  | No            |
|                               |  | Unknown       |
| Angle                         | Angle of the patient's scoliosis                           |               |
| Surgery                       | Surgery of the patient's scoliosis                         | Yes           |
|                               |  | No            |
| Date                          | Patient's scoliose surgery date                            | DD/MM/YYYY    |
| Age                           | Age of the patient at the time of the scoliosis surgery    |               |
| Kyphosis                      | The patient has kyphosis                                   | Yes           |
|                               |  | No            |
|                               |  | Unknown       |
| Spondylolisthesis             | The patient gas spondylolisthesis                          | Yes           |
|                               |  | No            |
|                               |  | Unknown       |
| Acetabular protrusion (stage) | The patient has an acettabular protrusion                  | No            |
|                               | (stage)  | Stage 1       |
|                               |  | Stage 2 and + |
|                               |  | Unknown       |
|                               | Date of patient's skin and integument                      |               |
| Date of examination           | examination  | DD/MM/YYYY    |
| Stretch marks                 | The patient has stretch marks                              | None          |
|                               |  | Stretch marks |
|                               |  | Micro striae  |
| Shoulders                     | Stretch marks or micro striae are on the patient's shouder | Yes           |
| Descet                        |  | No            |
| Breast                        | stretch marks or micro striae are on the patient's breast  | Yes           |
|                               |  | No            |
| вену                          | Stretch marks or micro striae are on the patient's belly   | Yes           |
|                               | parter o beny  | No            |



| Нір                                 | Stretch marks or micro striae are on the   | Yes   |
|-------------------------------------|--|---|
|                                     | patient's hip  | No  |
| Buttock                             | Stretch marks or micro striae are on the   | Yes   |
|                                     | patient's buttock  | No  |
| Thigh                               | Stretch marks or micro striae are on the   | Yes   |
|                                     | patient's thigh  | No  |
| Lumbar or back                      | Stretch marks or micro striae are on the   | Yes   |
|                                     | patient's lumbar or back   | No  |
| Hernias                             | The patient has hernias  | Yes   |
|                                     |  | No  |
| Inguinal                            | The patient has an inguinal hernia   | Yes   |
|                                     |  | No  |
| Hiatus hernia                       | The patient has an hiatus hernia   | Yes   |
|                                     |  | No  |
| Ombilic                             | The patient has an ombilic hernia  | Yes   |
|                                     |  | No  |
| On scar                             | The patient has a hernia on a scar   | Yes   |
|                                     |  | No  |
| Surgery                             | The patient had surgery to treat the hernia  | Yes   |
|                                     |  | No  |
|                                     |  | Unknown   |
| Date                                | Date of the patient's hernia surgery   | DD/MM/YYYY  |
| Аде                                 | Age of the patient at the time of hernia<br>surgery. Automatically calculated using the<br>patient's date of birth and the date of the<br>surgery. |   |
| Recurrence                          | The hernia reappeared after surgery  | Yes   |
|                                     |  | No  |
|                                     |  | Unknown   |
| Cutaneous hyperlaxity               | The patient has a cutaneous hyperlaxity  | Yes   |
|                                     |  | No  |
|                                     |  | Unknown   |
| Thin, translucent skin              | The patient has a thin skin and translucent  | Yes   |
|                                     |  | No  |
|                                     |  | Unknown   |
| Large scar                          |  |   |
|                                     | The patient has large scar   | Yes   |
|                                     | The patient has large scar   | Yes   |
|                                     | The patient has large scar   | Yes<br>No<br>Unknown                                      |
| Livedoid vasculitis                 | The patient has large scar<br>The patient has livedoid vasculitis  | Yes<br>No<br>Unknown<br>Yes                               |
| Livedoid vasculitis                 | The patient has large scar<br>The patient has livedoid vasculitis  | Yes<br>No<br>Unknown<br>Yes<br>No                         |
| Livedoid vasculitis                 | The patient has large scar<br>The patient has livedoid vasculitis  | Yes<br>No<br>Unknown<br>Yes<br>No<br>Unknown              |
| Livedoid vasculitis<br>Velvety skin | The patient has large scar The patient has livedoid vasculitis The patient has velvety skin  | Yes<br>No<br>Unknown<br>Yes<br>No<br>Unknown<br>Yes       |
| Livedoid vasculitis<br>Velvety skin | The patient has large scar The patient has livedoid vasculitis The patient has velvety skin  | Yes<br>No<br>Unknown<br>Yes<br>No<br>Unknown<br>Yes<br>No |



| No           Atrophic scars         The patient has atrophic scars         Yes           No         Unknown           Easy bruising         The patient has easy bruising         Yes           Easy bruising         The patient has easy bruising         Yes           Delayed healing         The patient has delayed healing         Yes           Delayed healing         The patient has delayed healing         Yes           Date of last follow-up         Date of the patient's last pneumological follow-up         No           Date of last follow-up         DD/MM/YYYY         DD/MM/YYYY  |
|--|
| Atrophic scars       The patient has atrophic scars       Yes         No       Unknown         Easy bruising       The patient has easy bruising       Yes         No       Unknown         Delayed healing       The patient has delayed healing       Yes         Delayed healing       The patient has delayed healing       Yes         Date of last follow-up       Date of the patient's last pneumological follow-up       DD/MM/YYYY   |
| Atrophic scars       Yes         No       Unknown         Easy bruising       The patient has easy bruising       Yes         No       No         Delayed healing       The patient has delayed healing       Yes         Dote of the patient's last pneumological follow-up       DD/MM/YYYY       DD/MM/YYYY         Spontaneous pneumothorax       The patient had a spontaneous pneumothorax       Yes   |
| Image: state of last follow-up       Date of last follow-up       Delayed heat of the patient had a spontaneous pneumothorax       No         Image: state of last follow-up       The patient had a spontaneous pneumothorax       No   |
| Easy bruising       The patient has easy bruising       Yes         Easy bruising       No       Unknown         Delayed healing       The patient has delayed healing       Yes         Delayed healing       The patient has delayed healing       Yes         Delayed healing       Det patient has delayed healing       Yes         Date of last follow-up       Date of the patient's last pneumological follow-up       DD/MM/YYYY         Spontaneous pneumothorax       The patient had a spontaneous pneumothorax       Yes  |
| Easy bruising       The patient has easy bruising       Yes         No       Unknown         Delayed healing       The patient has delayed healing       Yes         No       Unknown         Delayed healing       Yes         Dote of the patient's last pneumological follow-up       DD/MM/YYYY         Spontaneous pneumothorax       The patient had a spontaneous pneumothorax  |
| Delayed healing       The patient has delayed healing       Yes         Delayed healing       Yes         Delayed healing       Ves         Delayed healing       Dote of the patient's last pneumological follow-up         Date of last follow-up       DD/MM/YYYY         Spontaneous pneumothorax       The patient had a spontaneous pneumothorax   |
| Delayed healing     The patient has delayed healing     Unknown       Delayed healing     Yes     No       Date of the patient's last pneumological     Unknown       Date of last follow-up     DD/MM/YYYY       Spontaneous pneumothorax     The patient had a spontaneous pneumothorax  |
| Delayed healing     The patient has delayed healing     Yes       No     Unknown       Date of last follow-up     Date of the patient's last pneumological follow-up     DD/MM/YYYY       Spontaneous pneumothorax     The patient had a spontaneous pneumothorax     No   |
| No       Unknown       Date of the patient's last pneumological<br>follow-up     DD/MM/YYYY       Spontaneous pneumothorax     The patient had a spontaneous pneumothorax  |
| Date of last follow-up     Date of the patient's last pneumological       Date of last follow-up     DD/MM/YYYY  |
| Date of the patient's last pneumological       Date of last follow-up       Spontaneous pneumothorax   |
| Date of last follow-up     follow-up     DD/MM/YYYY       Spontaneous pneumothorax     The patient had a spontaneous pneumothorax     Variation  |
| I Spontaneous preumotriorax I i ne patient nau a spontaneous preumotriorax I v -   |
| Yes  |
| No   |
| Unknown  |
| Type of spontaneous pneumothorax that Right  |
| Left   |
| Both sides   |
| Unknown  |
| Date of onset Date of patient's spontaneous pneumothorax DD/MM/YYYY  |
| Treatment Type of treatment for the patient's Exsuflation  |
| and a supervised by a second sec |
| pneumothorax Surgery   |
| pneumothorax<br>Surgery<br>Unknown   |
| pneumothorax     Surgery       Surgery     Unknown       Date of last monitoring of the patient's     DD/MM/YYYY   |
| pneumothorax     Surgery       Surgery     Unknown       Date of last follow-up     Date of last monitoring of the patient's nervous system       Dural ectasia     The patient has a dural ectasia  |
| pneumothorax     Surgery       Surgery     Unknown       Date of last follow-up     Date of last monitoring of the patient's nervous system     DD/MM/YYYY       Dural ectasia     The patient has a dural ectasia     No       Yes     Yes  |
| pneumothorax     Surgery       Surgery     Unknown       Date of last follow-up     Date of last monitoring of the patient's nervous system     DD/MM/YYYY       Dural ectasia     The patient has a dural ectasia     No       Yes     Doubtful   |
| pneumothorax     Surgery       Surgery     Unknown       Date of last follow-up     Date of last monitoring of the patient's nervous system     DD/MM/YYYY       Dural ectasia     No       Yes     Doubtful       Unknown     Doubtful  |
| pneumothorax     Surgery       Surgery     Unknown       Date of last follow-up     Date of last monitoring of the patient's nervous system     DD/MM/YYYY       Dural ectasia     No       Yes     Doubtful       Doubtful     Unknown       Diagnosis based on     Tool used to diagnose the patient as having     X ray   |
| pneumothorax       Surgery         Surgery       Unknown         Date of last follow-up       Date of last monitoring of the patient's nervous system       DD/MM/YYYY         Dural ectasia       The patient has a dural ectasia       No         Yes       Doubtful       Unknown         Diagnosis based on       Tool used to diagnose the patient as having dural ectasia       X ray         MRI  |
| pneumothorax         Surgery           Surgery         Unknown           Date of last follow-up         Date of last monitoring of the patient's nervous system         DD/MM/YYYY           Dural ectasia         The patient has a dural ectasia         No           Yes         Doubtful         Doubtful           Diagnosis based on         Tool used to diagnose the patient as having dural ectasia         X ray           MRI         CT scanner         CT scanner   |
| pneumothorax         Surgery           Surgery         Unknown           Date of last follow-up         Date of last monitoring of the patient's nervous system         DD/MM/YYYY           Dural ectasia         The patient has a dural ectasia         No           Diagnosis based on         Tool used to diagnose the patient as having dural ectasia         X ray           MRI         CT scanner         Unknown  |
| pneumothorax         Surgery           Surgery         Unknown           Date of last follow-up         Date of last monitoring of the patient's nervous system         DD/MM/YYYY           Dural ectasia         No         Yes           Diagnosis based on         Tool used to diagnose the patient as having dural ectasia         X ray           Diagnosis based on         Tool used to diagnose the patient as having dural ectasia         X ray           Peripheral neuropathy         The patient has a peripheral neuropathy         Yes  |
| pneumothorax         Surgery           Surgery         Unknown           Date of last follow-up         Date of last monitoring of the patient's nervous system         DD/MM/YYYY           Dural ectasia         The patient has a dural ectasia         No           Yes         Doubtful         Unknown           Diagnosis based on         Tool used to diagnose the patient as having dural ectasia         X ray           Peripheral neuropathy         The patient has a peripheral neuropathy         Yes  |
| pneumothorax         Surgery           Surgery         Unknown           Date of last follow-up         Date of last monitoring of the patient's<br>nervous system         DD/MM/YYYY           Dural ectasia         No         Yes           Doubtful         Unknown         Unknown           Diagnosis based on         Tool used to diagnose the patient as having<br>dural ectasia         X ray           Peripheral neuropathy         The patient has a peripheral neuropathy         Yes           No         Unknown         Unknown           Unknown         Ves         No           Diagnosis based on         Tool used to diagnose the patient as having<br>dural ectasia         X ray           MRI         CT scanner         No           Unknown         Unknown         Unknown  |
| pneumothorax         Surgery           Surgery         Unknown           Date of last follow-up         Date of last monitoring of the patient's<br>nervous system         DD/MM/YYYY           Dural ectasia         The patient has a dural ectasia         No           Yes         Doubtful         Unknown           Diagnosis based on         Tool used to diagnose the patient as having<br>dural ectasia         X ray           Peripheral neuropathy         The patient has a peripheral neuropathy         Yes           Diagnosis based on         Tool used to diagnose the patient as having<br>dural ectasia         X ray           Peripheral neuropathy         The patient has a peripheral neuropathy         Yes           No         Unknown         Unknown           Diagnosis based on         Tool used to diagnose the patient as having<br>dural ectasia         Yes           Peripheral neuropathy         The patient has a peripheral neuropathy         Yes           No         Unknown         Unknown           Diagnosis based on         Tool used to diagnose the patient as having         Physical examination  |
| pneumothorax         Surgery           Date of last follow-up         Date of last monitoring of the patient's nervous system         DD/MM/YYYY           Dural ectasia         The patient has a dural ectasia         No           Yes         Doubtful         Unknown           Diagnosis based on         Tool used to diagnose the patient as having dural ectasia         X ray           Peripheral neuropathy         The patient has a peripheral neuropathy         Yes           Diagnosis based on         Tool used to diagnose the patient as having dural ectasia         X ray           MRI         CT scanner         Unknown           Diagnosis based on         The patient has a peripheral neuropathy         Yes           Peripheral neuropathy         The patient has a peripheral neuropathy         Yes           Diagnosis based on         Tool used to diagnose the patient as having peripheral neuropathy         Yes           Diagnosis based on         Tool used to diagnose the patient as having peripheral neuropathy         Yes           Diagnosis based on         Tool used to diagnose the patient as having peripheral neuropathy         Yes           Diagnosis based on         Tool used to diagnose the patient as having peripheral neuropathy         Physical examination  |
| pneumothorax         Surgery           Date of last follow-up         Date of last monitoring of the patient's<br>nervous system         DD/MM/YYYY           Dural ectasia         No         Yes           Date of last follow-up         The patient has a dural ectasia         No           Parameter         Yes         Doubtful         Unknown           Diagnosis based on         Tool used to diagnose the patient as having<br>dural ectasia         X ray           Peripheral neuropathy         The patient has a peripheral neuropathy         Yes           Diagnosis based on         The patient has a peripheral neuropathy         X ray           Peripheral neuropathy         The patient has a peripheral neuropathy         Yes           Diagnosis based on         Tool used to diagnose the patient as having<br>peripheral neuropathy         Yes           Diagnosis based on         Tool used to diagnose the patient as having<br>peripheral neuropathy         Yes           Diagnosis based on         Tool used to diagnose the patient as having<br>peripheral neuropathy         Physical examination           Diagnosis based on         Tool used to diagnose the patient as having<br>peripheral neuropathy         Physical examination   |



| Date of interview  | Date of the patient's interview about his<br>children in the case of a man or about her<br>pregnancies in the case of a woman | DD/MM/YYYY                        |
|--|---|-----------------------------------|
| Number of pregnancies / Number of children                 | Number of pregnancies (woman) / Number of children (man)  |                                   |
| Prenatal diagnosis   | Diagnosis made prior to birth<br>(preimplantatory, or prenatal)   | PID                               |
|  |   | PND                               |
|  |   | Not choosen                       |
|  |   | Not possible                      |
|  |   | Not available in the center       |
| Prenatal diagnosis result                                  | Result of the prenatal diagnosis. Is the child a mutation carrier?  | Non mutation carrier              |
|  |   | Mutation carrier                  |
| Child Ranking (N° of child)                                | Child Ranking (N° of child)   |                                   |
| Pregnancy Ranking (N° of pregnancies)                      | Pregnancy Ranking (N° of pregnancies)   |                                   |
| Marfan diagnosis known at the beginning of                 | Had the patient been diagnosed with Marfan's disease at the beginning of pregnancy ?  | Yes                               |
| pregnancy  |   | No                                |
| Type of pregnancy  | Number of fetuses in the patient's womb   | 1                                 |
|  |   | >1                                |
| Beta-Blocker treatment during pregnancy                    | The patient is taking beta-blocker treatment during her pregnancy   | Yes                               |
|  |   | No                                |
| Maximum aortic diameter at the beginning of pregnancy (mm) | Maximum aortic diameter of the patient at the beggining of pregnancy (mm)   |                                   |
| Ovarian stimulation  | The patient has had ovarian stimulatio  | Yes induction                     |
|  |   | Yes for intrauterine insemination |
|  |   | Yes in vitro fertilization        |
|  |   | No                                |
| Aortic event during pregnancy                              | The patient had an aortic event during her  | Yes                               |
|  | pregnancy   | No                                |
| Type of events   | Type of aortic event during the patient's pregnancy   | Dissection type A                 |
|  |   | Dissection type B                 |
|  |   | Surgery                           |
|  |   | Other                             |
| Date of onset  | Timing of the patient's pregnancy at the time<br>of the aortic event  | 1° trimester                      |
|  |   | 2° trimester                      |
|  |   | 3° trimester                      |
|  |   | post partum (<6 months)           |
| Pregnancy reached full-term                                | Did the patient have a full term pregnancy?   | Yes                               |
|  |   | No                                |
| Term of the pregnancy                                      | Patient's term of pregnancy   | 1st trimester                     |
|  |   | 2nd trimester                     |
|  |   | 3rd trimester                     |
|  |   | Unknown                           |
| Reason for early termination                               | Reason for patient's early termination  | Miscarriage/foetal death in utero |
|  |   | Elective abortion                 |



|   |   | Therapeutic abortion   |
|---|---|--|
| Medical termination of pregnancy related with Marfan syndrome                               | Medical termination of pregnancy related with Marfan syndrome   | Yes  |
|   |   | No   |
| Reason  | Are the causes of pre-term termination due to the mother or the fœtus ?   | Mother   |
|   |   | Foetus   |
| Date of the Delivery  | Date of patient's delivery  | DD/MM/YYYY   |
| Term of the Delivery (amenorrhea weeks)   | Patient's term of delivery  |  |
| Prematurity (between 26 and 37 amenorrhea weeks)  | Mother's reason for premature delivery  | Spontaneous  |
|   |   | For maternal cardiac problem   |
|   |   | For obstetrical problems (RCIU/PE)   |
| Delivery mode   | The patient's mode of delivery  | Vaginal  |
|   |   | Vaginal with help  |
|   |   | Scheduled Caesarean section  |
|   |   | Caesarean section during labor   |
| Epidural administration   | The patient had an epidural   | Yes  |
|   |   | Refused  |
|   |   | Not possible dural ectasia   |
| Breast-feeding  | The patient is breastfeeding her child  | Yes  |
|   |   | No   |
| If not breast-feeding   | Reason for mother's refusal to breastfeed   | Mother choice  |
|   |   | Impossible due to BB   |
| Aortic diameter of the mother within 6 months after delivery (mm)                           | Aortic diameter of the mother within 6 months after delivery (mm)   |  |
| Continuation of Beta-Blocker treatment after delivery                                       | Patient continues beta-blocker treatment after delivery   | Yes  |
|   |   | No   |
| Obstetric complications   | Type of obstetrical complications that  | Premature delivery threats   |
|   |   |  |
|   | occurred in the patient   | Premature rupture of membranes   |
|   | occurred in the patient   | Premature rupture of membranes<br>Fetal growth restriction   |
|   | occurred in the patient   | Premature rupture of membranes<br>Fetal growth restriction<br>Preeclampsia   |
|   | occurred in the patient   | Premature rupture of membranes<br>Fetal growth restriction<br>Preeclampsia<br>Other  |
| The patient is still followed-up?   | occurred in the patient<br>The patient is still followed-up?  | Premature rupture of membranes<br>Fetal growth restriction<br>Preeclampsia<br>Other<br>Yes   |
| The patient is still followed-up?   | occurred in the patient<br>The patient is still followed-up?  | Premature rupture of membranes<br>Fetal growth restriction<br>Preeclampsia<br>Other<br>Yes<br>No   |
| The patient is still followed-up?<br>If no, specify the reason for premature                | The patient is still followed-up?   | Premature rupture of membranes<br>Fetal growth restriction<br>Preeclampsia<br>Other<br>Yes<br>No<br>Death of the patient   |
| The patient is still followed-up?<br>If no, specify the reason for premature<br>termination | occurred in the patient<br>The patient is still followed-up?<br>Reason for discontinuation of patient follow-<br>up in the study  | Premature rupture of membranes         Fetal growth restriction         Preeclampsia         Other         Yes         No         Death of the patient         Patient's refusal to continue collecting data and / or samples (patient data / samples collected up to this date may be used)   |
| The patient is still followed-up?<br>If no, specify the reason for premature<br>termination | Coccurred in the patient<br>The patient is still followed-up?<br>Reason for discontinuation of patient follow-<br>up in the study | Premature rupture of membranes         Fetal growth restriction         Preeclampsia         Other         Yes         No         Death of the patient         Patient's refusal to continue collecting data<br>and / or samples (patient data / samples<br>collected up to this date may be used)         Refusal of the patient to continue collecting<br>his data and written request made by the<br>patient for the deletion of all his data and / or<br>samples |
| The patient is still followed-up?<br>If no, specify the reason for premature<br>termination | occurred in the patient<br>The patient is still followed-up?<br>Reason for discontinuation of patient follow-<br>up in the study  | Premature rupture of membranesFetal growth restrictionPreeclampsiaOtherYesNoDeath of the patientPatient's refusal to continue collecting dataand / or samples (patient data / samplescollected up to this date may be used)Refusal of the patient to continue collectinghis data and written request made by thepatient for the deletion of all his data and / orsamplesDecision of the investigator   |
| The patient is still followed-up?<br>If no, specify the reason for premature<br>termination | occurred in the patient<br>The patient is still followed-up?<br>Reason for discontinuation of patient follow-<br>up in the study  | Premature rupture of membranesFetal growth restrictionPreeclampsiaOtherYesNoDeath of the patientPatient's refusal to continue collecting dataand / or samples (patient data / samplescollected up to this date may be used)Refusal of the patient to continue collectinghis data and written request made by thepatient for the deletion of all his data and / orsamplesDecision of the investigatorLost of follow-up  |
| The patient is still followed-up?<br>If no, specify the reason for premature<br>termination | Cause of patient's death  | Premature rupture of membranesFetal growth restrictionPreeclampsiaOtherYesNoDeath of the patientPatient's refusal to continue collecting dataand / or samples (patient data / samplescollected up to this date may be used)Refusal of the patient to continue collectinghis data and written request made by thepatient for the deletion of all his data and / orsamplesDecision of the investigatorLost of follow-upCardiovascular                                  |



|  |  | Unknown                       |
|--|--|-------------------------------|
|  |  | Other                         |
| If cardiovascular                            | What was the cardiovascular cause of death of the patient?                   | Aortic dissection             |
|  |  | Sudden cardiac death          |
|  |  | Heart failure                 |
|  |  | Post surgery (within 30 days) |
| If non cardiovascular                        | What was the non cardiovascular cause of death of the patient?               | Cancer                        |
|  |  | Infection                     |
| If other                                     | Cause of death of the patient other than cardiovascular, infection or cancer |                               |
| Death due to rare disease: (BNDMR)           | Is the patient's death due to his rare disease?                              | Yes                           |
|  |  | No                            |
| Date of death                                | Date of the patient's death  | DD/MM/YYYY                    |
| If decision of the investigator, specify the | Reason for investigator's decision to  |                               |
| reason                                       | discontinue patient follow-up  |                               |
|  | The end of study date corresponds to the date                                |                               |
|  |  |                               |
|  | The study end date corresponds to the date of                                |                               |
|  | the patient's refusal to continue collecting                                 |                               |
|  | data and / or samples (patient data / samples                                |                               |
|  | collected up to this date may be used).                                      |                               |
|  | The end of the study date corresponds to the                                 |                               |
|  | date of the patient's refusal to continue                                    |                               |
|  | collecting his data and a written request made                               |                               |
|  | by the patient for the deletion of all his data                              |                               |
|  | and / or samples.  |                               |
|  | The study end date corresponds to the  |                               |
|  | investigator's decision date.  |                               |
|  | The end of study date corresponds to the date                                |                               |
| Date end of study                            | of the latest news.  | DD/MM/YYYY                    |