

	Data element	Response				
	Fresh tissue received	No	Yes	<i>If yes, describe any additional tests/ frozen sections/biobanking performed</i>		
	Procedure	Text		<i>As stated by the clinician</i>		
	Specimen dimensions	__ x __ x __ mm				
	Anatomical components	Femoral head	Humeral head	Femoral neck	Other, <i>specify</i>	
	Specimen description					
	Shape of weight-bearing surface	Flattened		Saddle-shaped		
	Articular cartilage	Linear folds		Eburnation	Step depressions	Other, <i>specify</i>
	Osteophytes	Absent	Present		<i>If present, describe</i>	
				Surface	Peripheral	Size __mm in max. dimension
	Synovium	Pannus	Absent		Present	<i>If present, record location</i>
		Chalky white material		Absent	Present	
	Cut surface description					
	Articular surface	Text				
	Subchondral dome	Text				
	Presence of abnormalities (<i>more than one may apply</i>)	Discolouration of bone or cartilage		Softening Sclerosis Cysts	Fibrous or fibrocartilaginous areas Fracture	
	Dimensions of abnormal areas (<i>for each</i>)	__ x __ x __ mm		<i>Length x width x depth</i>		
	Other relevant macroscopic information	Text	<i>E.g. any additional orientation; specimen integrity (if disrupted); presence of internal fixation devices</i>			
	Describe nature and site of blocks	Text				