PTCA PROCEDURES: T3 FORM 6B (Rev. 2)

PURPOSE: To collect data relevant to the PTCA procedure in order to monitor the immediate results, complications within 24 hours, and location of dilatation(s) performed.

PERSONS RESPONSIBLE: Certified Research Coordinator, Certified T-3 Angioplasty Operator.

SOURCES OF INFORMATION: Cineangiograms, medical record, cardiac catheterization technical worksheet, PTCA report, and persons performing procedure.

TIME OF DATA COLLECTION: Immediately after the PTCA and during the subsequent 24 hours.

GENERAL INSTRUCTIONS: This form is completed every time the patient undergoes an attempted PTCA procedure. An attempted procedure is defined as one in which a patient undergoes left heart catheterization and a guiding catheter is introduced into the patient's body. Each stage of a staged procedure as well as a repeat PTCA for abrupt reclosure occurring outside the catheterization laboratory or repeat PTCA for restenosis requires a separate form.

For patients who undergo PTCA initially and have CABG within 24 hours of the PTCA, record any major events that occur prior to the CABG on the PTCA Form 6B. Events that occur during or within 24 hours after the CABG should be recorded only on the CABG form.

The original Form 6B is sent to the DCC. The cineangiograms with labels attached and a special shipping log are sent to the Qualitative Core Laboratory. The Form 6B is not sent to the Qualitative Core laboratory.

PART I: IDENTIFICATION

1. **NAME CODE:** As previously defined for the patient.

2. **DATE AND TIME OF PTCA:** Record the date of the PTCA procedure being described on this form, and record in military time the estimated time that the patient arrived in the catheterization laboratory.

PART II: PROCEDURE NOTES

3. **When was PTCA performed?** Record the timing of the PTCA procedure relative to treatment initiation.

4. **Why was PTCA performed?** Record whether the PTCA was done because patient was randomized to the invasive strategy, or a patient assigned to the conservative strategy reached a defined study end point, or because of another reason not mandated by the protocol.

5. **If PTCA was performed in a patient randomized to the conservative strategy or the PTCA was "non-protocol":** Record all reasons for PTCA. Items A through G are considered to be protocol defined end points and require documentation using event forms. Items H through K are not considered to be protocol defined end points and this PTCA will be considered a major protocol violation if PTCA is performed within the six weeks following study treatment and none of the Items A through G is checked.

6. **PRIORITY OF PTCA:**

   Emergency: Patient is undergoing PTCA on an emergent basis. The patient is clinically unstable, and his/her condition requires immediate revascularization. (Revascularization must occur within 24 hours of the onset of the event precipitating the PTCA requirement.)

   Urgent: Patient is undergoing PTCA on an urgent basis. The patient may be unstable, have disease that warrants revascularization within 7 days of the precipitating event, or patient is stable but has suffered a complication or event within the past 14 days that substantially increases the risk of an adverse event (e.g., myocardial infarction) if revascularization is not undertaken.

   Elective: Patient is undergoing PTCA on an elective basis. At the time of revascularization, the patient is clinically stable (Heart Failure Classification <4), and

his/her overall medical condition does not necessitate immediate revascularization.

7. **ANGINAL STATUS AT TIME OF PTCA:**

Stable: Patient is experiencing a pattern of angina that is predictably brought on by the activities in which the patient engages. The frequency and severity of anginal episodes do not vary to a significant degree from day to day.

Unstable: A pattern of angina that is distinctly changing in severity and frequency in comparison to a previous pattern. The chest discomfort of unstable angina, while similar in quality to stable angina, may be more intense and persist for longer periods of time. Specific categories of unstable angina are: accelerating angina, recurrence of angina within 14 days after infarction, angina lasting more than 20 minutes, angina associated with transient ECG changes, and angina at rest.

Acute Event: The patient is currently hospitalized for an MI or has sustained an abrupt closure following attempted PTCA.

8. **PTCA ATTEMPTED AT THE SITE OF PRESUMED OCCLUSION OR ISCHEMIA-RELATED ARTERY:** Check "yes" if a PTCA was attempted at the site of the culprit artery. If the culprit artery cannot be determined, check "no."

9. **PTCA ATTEMPTED AT OTHER LESIONS:** Self-explanatory.

10. **THERAPY PRE-PROCEDURE:** Record all therapies administered to the patient during the 48 hours preceding the PTCA procedure.

11. **FOR EACH LESION ATTEMPTED:** Record the lesion code from the coronary diagram, the percent stenosis before PTCA, the TIMI perfusion grade 0-3 before PTCA, the percent stenosis post-PTCA, the TIMI perfusion grade immediately post-PTCA and the outcome for the lesion attempted.

TIMI Perfusion Grade:

Grade 0 = No perfusion: No antegrade flow beyond the point of occlusion.

Grade 1 = Penetration without perfusion: The contrast material passes beyond the area of obstruction, but "hangs up" and fails to opacify the entire coronary bed distal to the obstruction for the duration of the cine run.

Grade 2 = Partial perfusion: The contrast material passes across the obstruction and opacifies the coronary bed distal to the obstruction. However, the rate of entry of contrast into the vessel distal to the obstruction and/or its rate of clearance from the distal bed are perceptibly slower than its entry into and/or clearance from comparable areas not perfused by the previously occluded vessel, e.g., the opposite coronary artery or the coronary bed proximal to the obstruction.

Grade 3 = Complete perfusion: Antegrade flow into the bed distal to the obstruction occurs as promptly as into the bed proximal to the obstruction and clearance of contrast material from the involved bed is as rapid as from an uninvolved bed in the same vessel or the opposite artery.

12. **THROMBOLYTIC THERAPY ADMINISTERED DURING PROCEDURE:** Check "yes" if the patient received a thrombolytic agent while the patient was still in the catheterization lab for the PTCA procedure.

13. **CONDITION OF PATIENT LEAVING CATHETERIZATION LABORATORY:** Check the condition according to the following criteria:

    Stable: Patient is clinically and hemodynamically stable upon leaving the catheterization laboratory.

    Unstable: Patient is clinically unstable, that is, experiencing angina at rest or is hemodynamically unstable (low output requiring pressors, intra-aortic balloon pump).

    Deceased: Self-explanatory.

14. **DID OPERATOR PLAN TO ATTEMPT ADDITIONAL PROCEDURE WITHIN 2 WEEKS:** Check "yes" if it is known that the initial PTCA procedure was planned as a staged event and the operator plans to do additional angioplasty at a separate setting within the following 2 weeks.

15. **POST PTCA THERAPY:** Check "yes" if the patient received any of the following therapies within 24 hours after leaving the laboratory.

    Thrombolytic therapy: e.g. Alteplase, streptokinase, urokinase.
    Intra-aortic balloon pump: Self-explanatory.
    IV nitroglycerin: Self-explanatory.

Heparin: If patient received heparin after the procedure, record the total number of hours the heparin was administered, even if the patient received heparin for more than 48 hours.
Fish oils: Self-explanatory.
Aspirin: Self-explanatory.
Persantine: Self-explanatory.
Dextran: Self-explanatory.

16. **WAS REVASCULARIZATION COMPLETE:** Check "yes" if at the end of the procedure all lesions in major coronary segments supplying viable myocardium are <50% stenosed. Major coronary segments are all segments listed on the coronary diagram whose diameter is at least 1.5 mm.

PART III: MAJOR EVENTS

17. **MAJOR EVENTS DURING OR WITHIN THE 24 HOURS AFTER PTCA:** Check "yes" if the patient experienced any of the listed events, either in the catheterization laboratory or within 24 hours after the PTCA procedure.

    A. **Death:** Check "yes" if death occurred within 24 hours after PTCA. Submit Death Notification Form 15 and Cause of Death Form 16 if death has occurred.

    B. **Non-fatal cardiac arrest:** A cardiac arrest that requires CPR or countershock.

    C. **Suspected non-fatal MI:** Check "yes" if there is a reason to suspect the occurrence of myocardial infarction, defined as an episode of ischemic pain lasting > 20 minutes in duration, abnormal rise in CK to > 2 times upper limit of normal, or presence of positive CK-MB above the upper limit of normal, or the development of new Q-waves. A Myocardial Infarction Event Form 23 should be completed and submitted if this is checked "yes."

    D. **Transient abrupt reclosure:** Obstruction of contrast flow in the dilated segment where there previously had been a patent segment and documented antegrade flow. For an initial subtotal lesion prior to PTCA, transient abrupt closure describes total obstruction during the PTCA procedure or within the 24 hours following the PTCA procedure, that is reversed either mechanically or pharmacologically. In a situation where the dilated segment was closed at the beginning of the PTCA procedure (e.g., the PTCA operator is attempting to open a total occlusion), transient abrupt closure should only be used

to describe the outcome if there was a period of vessel patency during the PTCA procedure documented by normal antegrade contrast flow beyond the vessel with balloon dilatation equipment removed from the vessel followed by closure of the vessel during the PTCA procedure or within the 24 hours following the PTCA procedure.

E. **Sustained abrupt closure:** Sustained obstruction of contrast flow in the dilated segment where there previously had been a patent segment and documented antegrade flow. For an initial subtotal lesion prior to PTCA, sustained abrupt closure describes total obstruction that is still present at termination of the PTCA procedure or abrupt closure that occurs within the 24 hours following the PTCA procedure and is not reversed either mechanically or pharmacologically. In a situation where the dilated segment was closed at the beginning of the PTCA procedure (e.g., the PTCA is attempting to open a total occlusion), sustained abrupt closure should only be used to describe the outcome if there was a period of vessel patency during the PTCA procedure documented by normal antegrade contrast flow beyond the vessel with balloon dilatation equipment removed from the vessel followed by closure of the vessel (that is not reversed either mechanically or pharmacologically) during the PTCA procedure or within the 24 hours following the PTCA procedure.

F. **Congestive heart failure (isolated):** Isolated episode of congestive heart failure documented by chest x-ray or treatment with diuretics. CHF is a difficult diagnosis. Verification by a physician statement in the medical record is required. In general, CHF is clinically manifest by one or more features including: dyspnea on exertion (DOE--shortness of breath on exertion), bilateral pedal edema, fatigue, orthopnea (sleeping on two or more pillows to facilitate breathing), paroxysmal nocturnal dyspnea (shortness of breath that awakens the patient from sleep). Other findings supporting the clinical manifestations include but are not restricted to: presence of S^3 gallup by auscultation, elevated venous jugular pressure > 8 cm H_2O by physical exam, or radiographic evidence of pulmonary congestion.

G. **Pulmonary edema (cardiac):** Acute profound left sided congestive heart failure resulting in the accumulation of intra-bronchial and alveolar fluid, reflected by pulmonary rales, a characteristic "bat-wing" appearance on the chest radiograph, and almost always associated with marked dyspnea and hypoxia. If hemodynamic measurements are performed, they will invariably show

elevation of the pulmonary capillary wedge pressure above 25 mm Hg.

H. **Cardiogenic shock:** Shock defined as a systolic blood pressure < 80 mm Hg which either persists for more than one hour or requires specific treatment for at least one hour. In general, shock is associated with a low urine output, decreased mental acuity or coma, and compensatory vasoconstriction (decreased blood vessel caliper). Hypotension (very low blood pressure) without these associated manifestations of low cardiac output will not be considered as shock.

I. **Cardiac tamponade:** The appearance of the following three manifestations are typical of cardiac tamponade from intra-pericardial hemorrhage due to penetrating heart wounds, aortic dissections, and intra-pericardial rupture of an aorta, or cardiac aneurysm: decline in systemic arterial pressure, elevation of systemic venous pressure, and a small, quiet heart.

J. **Hemorrhage requiring transfusion:** Bleeding sufficient to require a transfusion of packed red blood cells. Submit Hemorrhagic Event Form 24 if event has occurred.

K. **Arterial embolus of extremity or loss of pulse requiring treatment:** Arterial embolus is the acute occlusion of a main or distal arterial trunk supply in a limb, due to formation and distal migration of thrombotic or atherosclerotic material, associated with decreased or loss of limb perfusion, and treated by surgical embolectomy or local thrombolytic therapy. Permanent loss of pulse is the lack of detectable distal arterial pulsations (by pulsation or Doppler examination) which had previously been observable prior to instrumentation of a more proximal arterial branch. Loss of pulse may or may not be associated with ischemia of the affected limb.

L. **Hypotension requiring treatment:** Reduction in systolic blood pressure to < 90 mm Hg, or reduction by ≥ 30 mm Hg compared to baseline value which persists for more than one minute and requires a fluid bolus > 500 cc, Trendelenburg position, or pressor support (dopamine, leafafed, etc.) to restore baseline blood pressure.

M. **TIA -- transient ischemic attack:** A partial, focal, neurologic deficit which is transient in nature and completely clears within 24 hours after its onset.

N. **Stroke:** A focal neurologic deficit which appears and is still at least partially evident more than 24 hours after its onset. Submit Severe Neurologic Event Form 27 if event has occurred.

O. **Coma:** Profound depression in the level of consciousness reflected by loss of contact with the environment and loss of spontaneous movement. Brain stem activity (respiration and response to deep pain) may or may not be preserved. Submit Severe Neurologic Event Form 27 if event has occurred.

P. **Hypersensitivity reaction:** Allergic reaction to iodine containing radiographic contrast media or protamine, marked by the development of urticaria, wheezing, prolonged hypotension, or laryngospasm.

Q. **Respiratory failure:** Inability of the patient to maintain adequate gas exchange during spontaneous ventilation, even with the assistance of supplemental oxygen. This may be reflected either by marked hypoxia ($PO_2 < 50$ TORR) or respiratory acidosis with $PCO_2 > 45$ TORR and pH < 7.30. Respiratory failure meeting the above criteria would usually require endotracheal intubation or tracheostomy, and mechanical ventilatory assistance. In the setting where a patient is receiving mechanical ventilatory assistance following surgery, respiratory failure shall be inability to wean the patient from mechanical ventilation within 48 hours of completion of the surgical procedure.

R. **Pulmonary embolus:** Occlusion (partial or complete) of one or more of the pulmonary artery branches with thrombus dislodged from the systemic venous circulation. Newly occurring acute events (e.g., within 24 hours of PTCA) are often (but not always) characterized by chest pain and decreases in arterial oxygenation; increased pulmonary artery pressure and even frank hemodynamic collapse may occur. The diagnosis must be supported by a "high probability" (multiple mismatched defects) lung scan and/or a confirmatory (and more definitive) pulmonary angiogram.

S. **Renal failure requiring dialysis:** Deteriorating renal function requiring dialysis.

T. **Emergency CABG:** Patient's condition is clinically unstable such that coronary bypass surgery is performed within 24 hours of PTCA procedure.

U. **Other Events:** Check "yes" and specify any other major event occurring within 24 hours after PTCA.

PART IV: ADMINISTRATIVE MATTERS

Self-explanatory.

PTCA PROCEDURES FORM 6B

Complete this form each time the patient undergoes an attempted PTCA procedure.

Clinic No.			-					
ID No.			-					
Form Type	P	B						

PART I: IDENTIFICATION

1. Patient's NAME CODE: ---------- ___ ___ ___ ___ ___

2. Date and time of PTCA: ---------- fm6bday ___ ___ - ___ ___ - ___ ___
   Month Day Year

   A. Military time: ---------- ptcahr ptcamin
   ___ ___ : ___ ___
   Hours Minutes

PART II: PROCEDURE NOTES

3. When was this PTCA performed? ptcatimb

   Less than 18 hours after study treatment initiation ---------- (1)

   18 to 48 hours after study treatment initiation ---------- (2)

   Greater than 48 hours after study treatment initiation but before or at six-week follow-up visit ---------- (3)

   After six-week follow-up visit ---------- (4)

4. Why was this PTCA performed? ptcatype

   Protocol (Invasive Strategy) ---------- (1)*

   Protocol (Conservative Strategy patient with study end point) ---------- (2)

   Non-protocol ---------- (3)

**If Protocol (Invasive Strategy), skip to Item 6, page 3.*

ID No.			-					

5. If Protocol PTCA (Conservative Strategy Patient) or non-protocol PTCA for patients in either strategy, check all the reasons for revascularization which were fulfilled at the time of performance of this angioplasty:

A. MI after study drug treatment miptca ---------- (1)*

B. Ischemic pain at rest with ECG changes meeting study criteria painptca --- (1)*

(*Check all that apply.*)

1) Single episode of pain lasting at least 5 minutes with ischt1 ST elevation/depression ≥ 2 mm in ≥ 2 contiguous leads ----- (1)

2) Single episode of pain lasting at least 20 minutes with: ischt2 a) ST elevation/depression ≥ 1 mm in ≥ 2 contiguous leads; or b) T-wave inversion in ≥ 2 contiguous leads ---------- (1)

3) Two or more episodes of pain lasting at least 5 minutes ischt3 with: a) ≥ 1 mm ST elevation/depression in ≥ 2 contiguous leads; or b) T-wave inversion in ≥ 2 contiguous leads ------ (1)

C. Notification from Holter Core Lab of abnormal Holter Test ------- (1)* holtptca

D. Positive Thallium Imaging Test: a) abnormal lung uptake and ≥ 1 region with reversible hypoperfusion; or b) tptptca ≥ 2 regions with reversible hypoperfusion ---------- (1)*

E. Positive ETT Test: a) ischemic pain prior to completion of Stage II; or b) ≥ 2 mm ST elevation/depression with or ettptca without symptoms; or c) ≥ 10 mm Hg reduction in SBP compared to previous recording ---------- (1)*

F. Post-discharge Canadian Cardiovascular Society Class III ccscptca or IV angina confirmed by ETT ---------- (1)*

G. Rest angina requiring re-hospitalization rangptca ---------- (1)*

H. Coronary anatomy anatptca ---------- (1)**

I. Decision of personal physician pmdptca ---------- (1)**

J. Clinical decision not specified by protocol pvptca ---------- (1)**

K. Other othptca ---------- (1)**

Specify: _____

**Submit appropriate event, ECGs and test forms to Core Laboratories and the DCC.*

***PROTOCOL VIOLATION if angioplasty performed within six weeks of study treatment and none of Items A-G is checked.*

ID No.			-					
Form Type	P	B						

6. Indicate priority of PTCA:

ptcaptio

Emergency ---------- (1)

Urgent ---------- (2)

Elective ---------- (3)

7. Patient's anginal status at time of PTCA:

ptcaang

Stable ---------- (1)

Unstable ---------- (2)

Acute Event ---------- (3)

ptcaocc

8. Was PTCA attempted at the site(s) of the presumed occlusion or stenosis responsible for the ischemia? ---------- (1) Yes (2) No (3) Unknown

ptcasite

9. Was PTCA attempted at other lesion sites? ---------- (1) Yes (2) No (3) Unknown

ID No.			-					
Form Type	P	B						

10. Were any of the following therapies administered during the 48 hours prior to the procedure? (*Answer each item.*)

			Yes	No	Unknown
A.	Heparin	prpthep	(1)	(2)	(3)
B.	Nitrates	prptnitr	(1)	(2)	(3)
C.	Beta-Blocker therapy	prptbeta	(1)	(2)	(3)
D.	Calcium channel blockers	prptccb	(1)	(2)	(3)
E.	Persantine/sulfinpyrazone	prptpers	(1)	(2)	(3)
F.	Antiplatelet agents other than ASA or persantine	prptplat	(1)	(2)	(3)
G.	Aspirin	prptasa	(1)	(2)	(3)
H.	Anticoagulant other than heparin	prptcoag	(1)	(2)	(3)
I.	Lipid-lowering agent	prptlipl	(1)	(2)	(3)
J.	Diuretics	prptdiur	(1)	(2)	(3)
K.	ACE inhibitors	prptacei	(1)	(2)	(3)
L.	Vasodilator other than ACE inhibitors/nitrates or calcium channel blockers	prptdila	(1)	(2)	(3)
M.	Digitalis or derivative	prptdigi	(1)	(2)	(3)
N.	Inotropic agent	prptinot	(1)	(2)	(3)
O.	Antiarrhythmic agent	prptrhyt	(1)	(2)	(3)
P.	Fish oil therapy	prptfish	(1)	(2)	(3)
Q.	IV nitroglycerin	prptivni	(1)	(2)	(3)
R.	Thrombolytic therapy	prptthrm	(1)	(2)	(3)
S.	Intra-aortic balloon pump (IABP)	prptiabp	(1)	(2)	(3)

ID No.			-					
Form Type	P	B						

Refer to the diagram at the end of this form to answer Question 11.

11. Complete this section for each lesion attempted by operator.

A. Lesion Code: ---------- lesiona ___ ___

(1) Stenosis pre-PTCA ---------- lesapre ___ ___ ___%

(2) TIMI Perfusion Grade pre-PTCA ---------- grdapre ___ (0-3)

(3) Stenosis post-PTCA ---------- lesapost ___ ___ ___%

(4) TIMI Perfusion Grade post-PTCA ---------- grdapost ___ (0-3)

(5) PTCA outcome* ---------- lesarslt (1) Success (2) Partial (3) Failed

B. Lesion Code: ---------- lesionb ___ ___

(1) Stenosis pre-PTCA ---------- lesbpre ___ ___ ___%

(2) TIMI Perfusion Grade pre-PTCA ---------- grdbpre ___ (0-3)

(3) Stenosis post-PTCA ---------- lesbpost ___ ___ ___%

(4) TIMI Perfusion Grade post-PTCA ---------- grdbpost ___ (0-3)

(5) PTCA outcome* ---------- lesbrslt (1) Success (2) Partial (3) Failed

**PTCA Outcome:*
Success - *a ≥ 20% improvement in luminal diameter narrowing and the residual stenosis is < 50% with no decline in flow grade.*
Partial - *a ≥ 20% improvement in luminal diameter narrowing or the residual stenosis is < 50% with no decline in flow grade.*
Failed - *a < 20% improvement in luminal diameter narrowing and the residual stenosis is ≥ 50%.*

ID No.			-					
Form Type	P	B						

Refer to the diagram at the end of this form to answer Question 11.

11. Complete this section for each lesion attempted by operator. (Continued)

C. Lesion Code: ---------- lesionc ___ ___

(1) Stenosis pre-PTCA ---------- lescpre ___ ___ ___%

(2) TIMI Perfusion Grade pre-PTCA ---------- grdcpre ____ (0-3)

(3) Stenosis post-PTCA ---------- lescpost ___ ___ ___%

(4) TIMI Perfusion Grade post-PTCA ---------- grdcpost ____ (0-3)

(5) PTCA outcome* ---------- lescrslt (1) Success (2) Partial (3) Failed

D. Lesion Code: ---------- lesiond ___ ___

(1) Stenosis pre-PTCA ---------- lesdpre ___ ___ ___%

(2) TIMI Perfusion Grade pre-PTCA ---------- grddpre ____ (0-3)

(3) Stenosis post-PTCA ---------- lesdpost ___ ___ ___%

(4) TIMI Perfusion Grade post-PTCA ---------- grddpost ____ (0-3)

(5) PTCA outcome* ---------- lesdrslt (1) Success (2) Partial (3) Failed

**PTCA Outcome:*
Success - a ≥ 20% improvement in luminal diameter narrowing and the residual stenosis is < 50% with no decline in flow grade.
Partial - a ≥ 20% improvement in luminal diameter narrowing or the residual stenosis is < 50% with no decline in flow grade.
Failed - a < 20% improvement in luminal diameter narrowing and the residual stenosis is ≥ 50%.

ID No.			-					
Form Type	P	B						

Refer to the diagram at the end of this form to answer Question 11.

11. Complete this section for each lesion attempted by operator. (Continued)

E. Lesion Code: ---------- lesione ___ ___

(1) Stenosis pre-PTCA ---------- lesepre ___ ___ ___%

(2) TIMI Perfusion Grade pre-PTCA ---------- grdepre ___ (0-3)

(3) Stenosis post-PTCA ---------- lesepost ___ ___ ___%

(4) TIMI Perfusion Grade post-PTCA ---------- grdepost ___ (0-3)

(5) PTCA outcome* ---------- leserslt (1) Success (2) Partial (3) Failed

F. Lesion Code: ---------- lesionf ___ ___

(1) Stenosis pre-PTCA ---------- lesfpre ___ ___ ___%

(2) TIMI Perfusion Grade pre-PTCA ---------- grdfpre ___ (0-3)

(3) Stenosis post-PTCA ---------- lesfpost ___ ___ ___%

(4) TIMI Perfusion Grade post-PTCA ---------- grdfpost ___ (0-3)

(5) PTCA outcome* ---------- lesfrslt (1) Success (2) Partial (3) Failed

**PTCA Outcome:*
Success - a ≥ 20% improvement in luminal diameter narrowing and the residual stenosis is < 50% with no decline in flow grade.
Partial - a ≥ 20% improvement in luminal diameter narrowing or the residual stenosis is < 50% with no decline in flow grade.
Failed - a < 20% improvement in luminal diameter narrowing and the residual stenosis is ≥ 50%.

ID No.			-					
Form Type	P	B						

thrmbotx

12. Was thrombolytic therapy administered during procedure? ---------- (1) Yes (2) No (3) Unknown

13. Condition of patient upon leaving Cath Lab:

ptcastat

Stable ---------- (1)
Unstable ---------- (2)
Deceased ---------- (3)

↓

If deceased, Submit Death Notification Form 15 and Cause of Death Form 16.

futptca

14. At the end of this procedure, did the PTCA operator plan to attempt an additional procedure within two weeks? ---------- (1) Yes (2) No (3) Unknown

15. Were any of the following therapies administered within 24 hours post-angioplasty? (*Answer each item.*)

		Yes	No	Unknown
A. Thrombolytic therapy	ptcathrm	(1)	(2)	(3)
B. Intra-aortic balloon pump (IABP)	ptcaiabp	(1)	(2)	(3)
C. IV nitroglycerin	ptcanitr	(1)	(2)	(3)
D. Heparin	ptcahep	(1)	(2)	(3)

↓

Indicate duration of infusion post-procedure: ptcahdr hours.

		Yes	No	Unknown
E. Fish oil	ptcafish	(1)	(2)	(3)
F. Aspirin	ptcaasa	(1)	(2)	(3)
G. Persantine	ptcapers	(1)	(2)	(3)
H. Dextran	ptcadex	(1)	(2)	(3)

16. Was revascularization complete? ptcarevs ---------- (1) (2) (3)

ID No.			-					
Form Type	P	B						

PART III: MAJOR EVENTS

17. Did patient experience any major events during or within 24 hours after PTCA? ptcaevnt ---------- (1) Yes (2) No (3) Unknown

Answer each item:	Did Not Occur	Occurred in Lab	Occurred Within 24 Hours
A. Death dth24	(1)	(2)*	(3)*
CARDIOVASCULAR EVENTS			
B. Non-fatal cardiac arrest ptcaca	(1)	(2)	(3)
C. Suspected non-fatal MI ptcami	(1)	(2)**	(3)**
D. Transient abrupt reclosure ptcatrcl	(1)	(2)	(3)
E. Sustained abrupt reclosure ptcasrcl	(1)	(2)	(3)
F. Congestive heart failure (isolated) ptcachf	(1)	(2)	(3)
G. Pulmonary edema (cardiac) ptcaedem	(1)	(2)	(3)
H. Cardiogenic shock ptcashck	(1)	(2)	(3)
I. Cardiac tamponade ptcatamp	(1)	(2)	(3)
J. Hemorrhage requiring transfusion ptcahemo	(1)	(2)***	(3)***
K. Arterial embolus of extremity or loss of pulse requiring treatment ptcaembo	(1)	(2)	(3)
L. Hypotension requiring treatment ptcalbp	(1)	(2)	(3)
NEUROLOGIC EVENTS			
M. TIA ptcatia	(1)	(2)	(3)
N. Stroke ptcastrk	(1)	(2)****	(3)****
O. Coma ptcacoma	(1)	(2)****	(3)****
ALLERGIC EVENT			
P. Hypersensitivity reaction ptcaalrg	(1)	(2)	(3)
PULMONARY EVENTS			
Q. Respiratory failure (include ARDS & non-cardiac edema) ptcaards	(1)	(2)	(3)
R. Pulmonary embolus ptcaplem	(1)	(2)	(3)
RENAL EVENT			
S. Renal failure requiring dialysis ptcadial	(1)	(2)	(3)
PROCEDURAL EVENTS			
T. Emergency CABG ptcacabg	(1)	(2)	(3)
OTHER EVENTS			
U. Other events ptcaotev	(1)	(2)	(3)

Specify: _____

_____

**Submit Death Notification Form 15 and Cause of Death Form 16.*
***Submit Myocardial Infarction Event Form 23.*
****Submit Hemorrhagic Event Form 24.*
*****Submit Severe Neurologic Event Form 27.*

ID No.			-					
Form Type	P	B						

PART IV: ADMINISTRATIVE MATTERS

ptcaform

18. Was the cineangiogram and shipping log mailed to the Qualitative Core Lab? ---------- (1) Yes (2) No ↓

A. Reason not sent:

Required in Clinical Center ---- (1)
Cannot be located ---------- (2)
Other ---------- (3)

Specify: _____

19. PTCA Operator:

Name: _____ T3 Staff No.: __ __ - __ __ __

20. Research Coordinator:

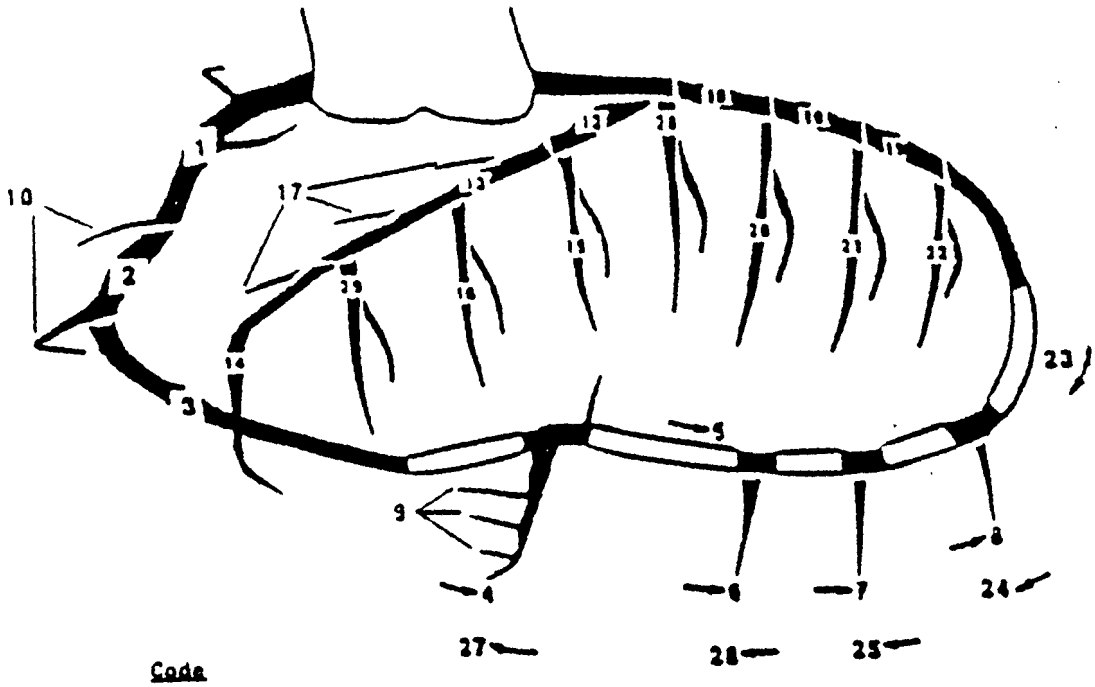
Signature: _____ T3 Staff No.: __ __ - __ __ __

21. Date form completed: ---------- __ __ - __ __ - __ __

Month Day Year

ID No.			-					
Form Type	P	B						

Coronary Artery Diagram



Code

01 Proximal right coronary artery (Prox RCA)
02 Mid-right coronary artery (Mid RCA)
03 Distal right coronary artery (Dist RCA)
04 Right posterior descending artery (RDPA)
05 Right posterior atrioventricular (RPLS)
06 First right posterolateral (1st RPL)
07 Second right posterolateral (2nd RPL)
08 Third right posterolateral (3rd RPL)
09 Posterior descending septal perforators (Inf septal)
10 Acute marginal (Ac marg)
11 Left main coronary artery (LMCA)
12 Proximal LAD artery (Prox LAD)
13 Mid LAD artery (Mid LAD)
14 Distal LAD artery (Dist LAD)
15 First diagonal branch (1st Diag)
16 Second diagonal branch (2nd Diag)
17 First septal perforator (1st Septal)
18 Proximal circumflex artery (Prox CX)
19 Mid circumflex artery (Mid, dist CX)
20 First obtuse marginal branch (1st Ob marg)
21 Second obtuse marginal branch (2nd Ob marg)
22 Third obtuse marginal branch (3rd Ob marg)
23 Circumflex artery AV groove continuation (LAV)
24 First left posterolateral branch (1st LPL)
25 Second left posterolateral branch (2nd LPL)
26 Third left posterolateral branch (3rd LPL)
27 Left posterior descending artery (LPDA)
28 Ramus intermedius (Ramus)
29 Third diagonal branch (3rd Diag)

T3 Form 6B: Variables from earlier revisions

HR24PTCA Revision 1 Item 3A
When was this PTCA performed?
1=Within 24 hours of study enrollment

BETWPTCA Revision 1 Item 3B
When was this PTCA performed?
1=Between 24 hours after enrollment and 6-week follow-up

AFTPTCA Revision 1 Item 3C
When was this PTCA performed?
1=After 6-week follow-up

T3 Form 6B: Data Set Revisions

The following items were recoded:

FormType
1 record changed from PBO2 to PB02

Item 11A Lesion Code A
1 record changed from code 48 (invalid code) to missing

Item 11B Lesion Code B
1 record changed from code 34 (invalid code) to missing

T3B form6b

The CONTENTS Procedure

Data Set Name:	WORK.FORM6B	**Observations:**	672
Member Type:	DATA	**Variables:**	120
Engine:	V8	**Indexes:**	0
Created:	13:50 Friday, January 30, 2004	**Observation Length:**	512
Last Modified:	13:50 Friday, January 30, 2004	**Deleted Observations:**	0
Protection:		**Compressed:**	NO
Data Set Type:		**Sorted:**	NO
Label:			

-----Alphabetic List of Variables and Attributes-----					
#	**Variable**	**Type**	**Len**	**Pos**	**Label**
8	AFTPTCA	Num	4	44	f6Bq3C: PTCA after 6wk follow-up
20	ANATPTCA	Num	4	92	f6Bq5H: Coronary anatomy
7	BETWPTCA	Num	4	40	f6Bq3B: PTCA 24 hrs - 6 wks
18	CCSCPTCA	Num	4	84	f6Bq5F: Post-discharge class III or IV
97	DTH24	Num	4	348	f6Bq17A: Death
15	ETTPTCA	Num	4	72	f6Bq5E: Positive ETT test
120	FM6BDAY	Num	8	16	f6Bq2: Days to PTCA
2	FMTYP	Char	4	436	Form Type
85	FUTPTCA	Num	4	304	f6Bq14: Additional procedure within 2 wk
51	GRDAPOST	Num	4	208	f6Bq11A4: Grade post PTCA lesion A
49	GRDAPRE	Num	4	204	f6Bq11A2: Grade pre PTCA lesion A
57	GRDBPOST	Num	4	224	f6Bq11B4: Grade post PTCA lesion B
55	GRDBPRE	Num	4	220	f6Bq11B2: Grade pre PTCA lesion B
63	GRDCPOST	Num	4	240	f6Bq11C4: Grade post PTCA lesion C
61	GRDCPRE	Num	4	236	f6Bq11C2: Grade pre PTCA lesion C
69	GRDDPOST	Num	4	256	f6Bq11D4: Grade post PTCA lesion D
67	GRDDPRE	Num	4	252	f6Bq11D2: Grade pre PTCA lesion D
75	GRDEPOST	Num	4	272	f6Bq11E4: Grade post PTCA lesion E
73	GRDEPRE	Num	4	268	f6Bq11E2: Grade pre PTCA lesion E
81	GRDFPOST	Num	4	288	f6Bq11F4: Grade post PTCA lesion F
79	GRDFPRE	Num	4	284	f6Bq11F2: Grade pre PTCA lesion F
17	HOLTPTCA	Num	4	80	f6Bq5C: abnormal Holter test

T3B form6b

The CONTENTS Procedure

-----Alphabetic List of Variables and Attributes-----					
#	Variable	Type	Len	Pos	Label
6	HR24PTCA	Num	4	36	f6Bq3A: PTCA within 24 hrs
12	ISCHT1	Num	4	60	f6Bq5B1: single episode ischemic pain
13	ISCHT2	Num	4	64	f6Bq5B2: ischemic pain 20 min
14	ISCHT3	Num	4	68	f6Bq5B3: ischemic pain multiple episodes
50	LESAPOST	Num	5	445	f6Bq11A3: Stenosis post PTCA lesion A
48	LESAPRE	Num	5	440	f6Bq11A1: Stenosis pre PTCA lesion A
52	LESARSLT	Num	4	212	f6Bq11A5: PTCA Outcome lesion A
56	LESBPOST	Num	5	455	f6Bq11B3: Stenosis post PTCA lesion B
54	LESBPRE	Num	5	450	f6Bq11B1: Stenosis pre PTCA lesion B
58	LESBRSLT	Num	4	228	f6Bq11B5: PTCA Outcome lesion B
62	LESCPOST	Num	5	465	f6Bq11C3: Stenosis post PTCA lesion C
60	LESCPRE	Num	5	460	f6Bq11C1: Stenosis pre PTCA lesion C
64	LESCRSLT	Num	4	244	f6Bq11C5: PTCA Outcome lesion C
68	LESDPOST	Num	5	475	f6Bq11D3: Stenosis post PTCA lesion D
66	LESDPRE	Num	5	470	f6Bq11D1: Stenosis pre PTCA lesion D
70	LESDRSLT	Num	4	260	f6Bq11D5: PTCA Outcome lesion D
74	LESEPOST	Num	5	485	f6Bq11E3: Stenosis post PTCA lesion E
72	LESEPRE	Num	5	480	f6Bq11E1: Stenosis pre PTCA lesion E
76	LESERSLT	Num	4	276	f6Bq11E5: PTCA Outcome lesion E
80	LESFPOST	Num	5	495	f6Bq11F3: Stenosis post PTCA lesion F
78	LESFPRE	Num	5	490	f6Bq11F1: Stenosis pre PTCA lesion F
82	LESFRSLT	Num	4	292	f6Bq11F5: PTCA Outcome lesion F
47	LESIONA	Num	4	200	f6Bq11A: Lesion Code A
53	LESIONB	Num	4	216	f6Bq11B: Lesion Code B
59	LESIONC	Num	4	232	f6Bq11C: Lesion Code C
65	LESIOND	Num	4	248	f6Bq11D: Lesion Code D
71	LESIONE	Num	4	264	f6Bq11E: Lesion Code E
77	LESIONF	Num	4	280	f6Bq11F: Lesion Code F
11	MIPTCA	Num	4	56	f6Bq5A: MI after treatment
119	NEWID	Num	8	8	Patient Identification
23	OTHPTCA	Num	4	104	f6Bq5K: Other reason

T3B form6b

The CONTENTS Procedure

-----Alphabetic List of Variables and Attributes-----					
#	Variable	Type	Len	Pos	Label
10	PAINPTCA	Num	4	52	f6Bq5B: ischemic pain w/ecg changes
21	PMDPTCA	Num	4	96	f6Bq5I: Personal physician decision
38	PRPTACEI	Num	4	164	f6Bq10K: ACE inhibitors pre PTCA
34	PRPTASA	Num	4	148	f6Bq10G: Aspirin pre PTCA
30	PRPTBETA	Num	4	132	f6Bq10C: Beta-blocker pre PTCA
31	PRPTCCB	Num	4	136	f6Bq10D: Calcium Channel Blocker pre PTC
35	PRPTCOAG	Num	4	152	f6Bq10H: Other anticoagulant pre PTCA
40	PRPTDIGI	Num	4	172	f6Bq10M: Digitalis pre PTCA
39	PRPTDILA	Num	4	168	f6Bq10L: Other vasodilator pre PTCA
37	PRPTDIUR	Num	4	160	f6Bq10J: Diuretics pre PTCA
43	PRPTFISH	Num	4	184	f6Bq10P: Fish oil therapy pre PTCA
28	PRPTHEP	Num	4	124	f6Bq10A: Heparin pre PTCA
46	PRPTIABP	Num	4	196	f6Bq10S: IABP pre PTCA
41	PRPTINOT	Num	4	176	f6Bq10N: Inotropic agent pre PTCA
44	PRPTIVNI	Num	4	188	f6Bq10Q: IV nitroglycerin pre PTCA
36	PRPTLIPL	Num	4	156	f6Bq10I: Lipid lowering agent pre PTCA
29	PRPTNITR	Num	4	128	f6Bq10B: Nitrates pre PTCA
32	PRPTPERS	Num	4	140	f6Bq10E: Persantine pre PTCA
33	PRPTPLAT	Num	4	144	f6Bq10F: Other antiplatelet pre PTCA
42	PRPTRHYT	Num	4	180	f6Bq10O: Antiarrhythmic pre PTCA
45	PRPTTHRM	Num	4	192	f6Bq10R: Thrombolytic pre PTCA
112	PTCAALRG	Num	4	408	f6Bq17P: Hypersensitivity reaction
25	PTCAANG	Num	4	112	f6Bq7: Anginal status
113	PTCAARDS	Num	4	412	f6Bq17Q: Respiratory failure
92	PTCAASA	Num	4	328	f6Bq15F: Aspirin post PTCA
98	PTCACA	Num	4	352	f6Bq17B: Non-fatal cardiac arrest
116	PTCACABG	Num	4	424	f6Bq17T: Emergency CABG
102	PTCACHF	Num	4	368	f6Bq17F: CHF
111	PTCACOMA	Num	4	404	f6Bq17O: Coma
94	PTCADEX	Num	4	336	f6Bq15H: Dextran post PTCA
115	PTCADIAL	Num	4	420	f6Bq17S: Renal failure

T3B form6b

The CONTENTS Procedure

-----Alphabetic List of Variables and Attributes-----					
#	Variable	Type	Len	Pos	Label
103	PTCAEDEM	Num	4	372	f6Bq17G: Pulmonary edema
107	PTCAEMBO	Num	4	388	f6Bq17K: Aterial embolus
96	PTCAEVNT	Num	4	344	f6Bq17: Events during/post PTCA
91	PTCAFISH	Num	4	324	f6Bq15E: Fish oil post PTCA
118	PTCAFORM	Num	4	432	f6Bq18: Cineangiogram mailed
90	PTCAHDR	Num	5	500	f6Bq15D1: Duration heparin post PTCA
106	PTCAHEMO	Num	4	384	f6Bq17J: Hemorrhage req tranfusion
89	PTCAHEP	Num	4	320	f6Bq15D: Heparin post PTCA
3	PTCAHR	Num	4	24	f6Bq2AHR: Time of ptca - hour
87	PTCAIABP	Num	4	312	f6Bq15B: IABP post PTCA
108	PTCALBP	Num	4	392	f6Bq17L: Hypotension
99	PTCAMI	Num	4	356	f6Bq17C: Suspect MI
4	PTCAMIN	Num	4	28	f6Bq2AMIN: Time of ptca - min
88	PTCANITR	Num	4	316	f6Bq15C: Nitroglycerin post PTCA
26	PTCAOCC	Num	4	116	f6Bq8: PTCA at presumed occlusion
117	PTCAOTEV	Num	4	428	f6Bq17U: Other events
93	PTCAPERS	Num	4	332	f6Bq15G: Persantine post PTCA
114	PTCAPLEM	Num	4	416	f6Bq17R: Pulmonary embolus
24	PTCAPRIO	Num	4	108	f6Bq6: PTCA priority
95	PTCAREVS	Num	4	340	f6Bq16: Revascularization complete
104	PTCASHCK	Num	4	376	f6Bq17H: Cardiogenic shock
27	PTCASITE	Num	4	120	f6Bq9: PTCA at other site
101	PTCASRCL	Num	4	364	f6Bq17E: Sustained abrupt reclosure
84	PTCASTAT	Num	4	300	f6Bq13: Status leaving Cath Lab
110	PTCASTRK	Num	4	400	f6Bq17N: Stroke
105	PTCATAMP	Num	4	380	f6Bq17I: Cardiac tamponade
86	PTCATHRM	Num	4	308	f6Bq15A: Thrombolytic post PTCA
109	PTCATIA	Num	4	396	f6Bq17M: TIA
5	PTCATIMB	Num	4	32	f6Bq3: When PTCA performed
100	PTCATRCL	Num	4	360	f6Bq17D: Transient abrupt reclosure
9	PTCATYPE	Num	4	48	f6Bq4: Why PTCA performed

T3B form6b

The CONTENTS Procedure

-----Alphabetic List of Variables and Attributes-----					
#	**Variable**	**Type**	**Len**	**Pos**	**Label**
22	PVPTCA	Num	4	100	f6Bq5J: Clinical decision
19	RANGPTCA	Num	4	88	f6Bq5G: Angina requiring re-hospitalizat
1	REV	Num	8	0	Revision
83	THRMBOTX	Num	4	296	f6Bq12: Thrombolytic therapy during proc
16	TPTPTCA	Num	4	76	f6Bq5D: postive Thallium Imaging test

T3B form6b

Variable	Label	Value	N	%	<= 20
REV	Revision	0	14	2.1	*
		1	91	13.5	
		2	567	84.4	
FMTYP	Form Type	PB01	524	78.0	
		PB02	121	18.0	
		PB03	22	3.3	
		PB04	5	0.7	*
PTCATIMB	f6Bq3: When PTCA performed	.	107	15.9	
		1	12	1.8	*
		2	145	21.6	
		3	259	38.5	
		4	149	22.2	
HR24PTCA	f6Bq3A: PTCA within 24 hrs	.	660	98.2	
		1	12	1.8	*
BETWPTCA	f6Bq3B: PTCA 24 hrs - 6 wks	.	591	87.9	
		1	81	12.1	
AFTPTCA	f6Bq3C: PTCA after 6wk follow-up	.	660	98.2	
		1	12	1.8	*
PTCATYPE	f6Bq4: Why PTCA performed	.	2	0.3	*
		1	281	41.8	
		2	207	30.8	
		3	182	27.1	
MIPTCA	f6Bq5A: MI after treatment	.	637	94.8	
		1	35	5.2	

T3B form6b

Variable	Label	Value	N	%	<= 20
PAINPTCA	f6Bq5B: ischemic pain w/ecg changes	.	560	83.3	
		1	112	16.7	
ISCHT1	f6Bq5B1: single episode ischemic pain	.	656	97.6	
		1	16	2.4	*
ISCHT2	f6Bq5B2: ischemic pain 20 min	.	628	93.5	
		1	44	6.5	
ISCHT3	f6Bq5B3: ischemic pain multiple episodes	.	623	92.7	
		1	49	7.3	
HOLTPTCA	f6Bq5C: abnormal Holter test	.	664	98.8	
		1	8	1.2	*
TPTPTCA	f6Bq5D: postive Thallium Imaging test	.	597	88.8	
		1	75	11.2	
ETTPTCA	f6Bq5E: Positive ETT test	.	570	84.8	
		1	102	15.2	
CCSCPTCA	f6Bq5F: Post-discharge class III or IV	.	661	98.4	
		1	11	1.6	*
RANGPTCA	f6Bq5G: Angina requiring re-hospitalizat	.	547	81.4	
		1	125	18.6	
ANATPTCA	f6Bq5H: Coronary anatomy	.	602	89.6	
		1	70	10.4	
PMDPTCA	f6Bq5I: Personal physician decision	.	594	88.4	
		1	78	11.6	

T3B form6b

Variable	Label	Value	N	%	<= 20
PVPTCA	f6Bq5J: Clinical decision	.	644	95.8	
		1	28	4.2	
OTHPTCA	f6Bq5K: Other reason	.	638	94.9	
		1	34	5.1	
PTCAPRIO	f6Bq6: PTCA priority	.	2	0.3	*
		1	40	6.0	
		2	263	39.1	
		3	367	54.6	
PTCAANG	f6Bq7: Anginal status	.	2	0.3	*
		1	439	65.3	
		2	203	30.2	
		3	28	4.2	
PTCAOCC	f6Bq8: PTCA at presumed occlusion	.	2	0.3	*
		1	657	97.8	
		2	8	1.2	*
		3	5	0.7	*
PTCASITE	f6Bq9: PTCA at other site	.	2	0.3	*
		1	69	10.3	
		2	600	89.3	
		3	1	0.1	*
PRPTHEP	f6Bq10A: Heparin pre PTCA	.	1	0.1	*
		1	531	79.0	
		2	133	19.8	
		3	7	1.0	*

T3B form6b

Variable	Label	Value	N	%	<= 20
PRPTNITR	f6Bq10B: Nitrates pre PTCA	.	1	0.1	*
		1	485	72.2	
		2	177	26.3	
		3	9	1.3	*
PRPTBETA	f6Bq10C: Beta-blocker pre PTCA	.	1	0.1	*
		1	511	76.0	
		2	151	22.5	
		3	9	1.3	*
PRPTCCB	f6Bq10D: Calcium Channel Blocker pre PTC	.	1	0.1	*
		1	566	84.2	
		2	96	14.3	
		3	9	1.3	*
PRPTPERS	f6Bq10E: Persantine pre PTCA	.	1	0.1	*
		1	151	22.5	
		2	513	76.3	
		3	7	1.0	*
PRPTPLAT	f6Bq10F: Other antiplatelet pre PTCA	.	1	0.1	*
		1	4	0.6	*
		2	656	97.6	
		3	11	1.6	*
PRPTASA	f6Bq10G: Aspirin pre PTCA	.	1	0.1	*
		1	630	93.8	
		2	32	4.8	
		3	9	1.3	*

T3B form6b

Variable	Label	Value	N	%	<= 20
PRPTCOAG	f6Bq10H: Other anticoagulant pre PTCA	.	1	0.1	*
		1	4	0.6	*
		2	658	97.9	
		3	9	1.3	*
PRPTLIPL	f6Bq10I: Lipid lowering agent pre PTCA	.	1	0.1	*
		1	75	11.2	
		2	588	87.5	
		3	8	1.2	*
PRPTDIUR	f6Bq10J: Diuretics pre PTCA	.	2	0.3	*
		1	43	6.4	
		2	618	92.0	
		3	9	1.3	*
PRPTACEI	f6Bq10K: ACE inhibitors pre PTCA	.	1	0.1	*
		1	38	5.7	
		2	624	92.9	
		3	9	1.3	*
PRPTDILA	f6Bq10L: Other vasodilator pre PTCA	.	1	0.1	*
		1	3	0.4	*
		2	659	98.1	
		3	9	1.3	*
PRPTDIGI	f6Bq10M: Digitalis pre PTCA	.	1	0.1	*
		1	22	3.3	
		2	640	95.2	
		3	9	1.3	*

T3B form6b

Variable	Label	Value	N	%	<= 20
PRPTINOT	f6Bq10N: Inotropic agent pre PTCA	.	1	0.1	*
		1	8	1.2	*
		2	653	97.2	
		3	10	1.5	*
PRPTRHYT	f6Bq10O: Antiarrhythmic pre PTCA	.	1	0.1	*
		1	26	3.9	
		2	635	94.5	
		3	10	1.5	*
PRPTFISH	f6Bq10P: Fish oil therapy pre PTCA	.	1	0.1	*
		1	5	0.7	*
		2	657	97.8	
		3	9	1.3	*
PRPTIVNI	f6Bq10Q: IV nitroglycerin pre PTCA	.	1	0.1	*
		1	270	40.2	
		2	390	58.0	
		3	11	1.6	*
PRPTTHRM	f6Bq10R: Thrombolytic pre PTCA	.	1	0.1	*
		1	22	3.3	
		2	615	91.5	
		3	34	5.1	
PRPTIABP	f6Bq10S: IABP pre PTCA	.	1	0.1	*
		1	7	1.0	*
		2	655	97.5	
		3	9	1.3	*

T3B form6b

Variable	Label	Value	N	%	<= 20
LESIONA	f6Bq11A: Lesion Code A	.	3	0.4	*
		1	71	10.6	
		2	81	12.1	
		3	34	5.1	
		4	10	1.5	*
		6	2	0.3	*
		12	153	22.8	
		13	89	13.2	
		14	9	1.3	*
		15	14	2.1	*
		16	6	0.9	*
		17	3	0.4	*
		18	52	7.7	
		19	51	7.6	
		20	52	7.7	
		21	16	2.4	*
		22	6	0.9	*
		23	7	1.0	*
		27	2	0.3	*
		28	11	1.6	*
GRDAPRE	f6Bq11A2: Grade pre PTCA lesion A	.	25	3.7	
		0	55	8.2	
		1	52	7.7	
		2	121	18.0	
		3	419	62.4	
GRDAPOST	f6Bq11A4: Grade post PTCA lesion A	.	26	3.9	
		0	27	4.0	
		1	6	0.9	*
		2	17	2.5	*
		3	596	88.7	

T3B form6b

Variable	Label	Value	N	%	<= 20
LESARSLT	f6Bq11A5: PTCA Outcome lesion A	.	2	0.3	*
		1	605	90.0	
		2	27	4.0	
		3	38	5.7	
LESIONB	f6Bq11B: Lesion Code B	.	533	79.3	
		1	7	1.0	*
		2	15	2.2	*
		3	10	1.5	*
		4	4	0.6	*
		5	2	0.3	*
		6	1	0.1	*
		7	1	0.1	*
		9	1	0.1	*
		12	9	1.3	*
		13	26	3.9	
		14	8	1.2	*
		15	10	1.5	*
		16	1	0.1	*
		17	2	0.3	*
		18	5	0.7	*
		19	10	1.5	*
		20	12	1.8	*
		21	9	1.3	*
		22	2	0.3	*
		23	1	0.1	*
		25	1	0.1	*
		28	2	0.3	*

T3B form6b

Variable	Label	Value	N	%	<= 20
GRDBPRE	f6Bq11B2: Grade pre PTCA lesion B	.	540	80.4	
		0	8	1.2	*
		1	6	0.9	*
		2	16	2.4	*
		3	102	15.2	
GRDBPOST	f6Bq11B4: Grade post PTCA lesion B	.	541	80.5	
		0	6	0.9	*
		1	2	0.3	*
		2	6	0.9	*
		3	117	17.4	
LESBRSLT	f6Bq11B5: PTCA Outcome lesion B	.	532	79.2	
		1	122	18.2	
		2	6	0.9	*
		3	12	1.8	*
LESIONC	f6Bq11C: Lesion Code C	.	644	95.8	
		2	1	0.1	*
		3	5	0.7	*
		13	4	0.6	*
		14	2	0.3	*
		15	3	0.4	*
		18	5	0.7	*
		19	3	0.4	*
		20	4	0.6	*
		22	1	0.1	*

T3B form6b

Variable	Label	Value	N	%	<= 20
GRDCPRE	f6Bq11C2: Grade pre PTCA lesion C	.	645	96.0	
		0	3	0.4	*
		1	1	0.1	*
		2	4	0.6	*
		3	19	2.8	*
GRDCPOST	f6Bq11C4: Grade post PTCA lesion C	.	645	96.0	
		0	3	0.4	*
		2	2	0.3	*
		3	22	3.3	
LESCRSLT	f6Bq11C5: PTCA Outcome lesion C	.	644	95.8	
		1	23	3.4	
		2	1	0.1	*
		3	4	0.6	*
LESIOND	f6Bq11D: Lesion Code D	.	670	99.7	
		20	2	0.3	*
GRDDPRE	f6Bq11D2: Grade pre PTCA lesion D	.	670	99.7	
		2	1	0.1	*
		3	1	0.1	*
GRDDPOST	f6Bq11D4: Grade post PTCA lesion D	.	670	99.7	
		3	2	0.3	*
LESDRSLT	f6Bq11D5: PTCA Outcome lesion D	.	670	99.7	
		1	2	0.3	*
LESIONE	f6Bq11E: Lesion Code E	.	671	99.9	
		4	1	0.1	*

T3B form6b

Variable	Label	Value	N	%	<= 20
GRDEPRE	f6Bq11E2: Grade pre PTCA lesion E	.	671	99.9	
		3	1	0.1	*
GRDEPOST	f6Bq11E4: Grade post PTCA lesion E	.	671	99.9	
		2	1	0.1	*
LESERSLT	f6Bq11E5: PTCA Outcome lesion E	.	671	99.9	
		1	1	0.1	*
LESIONF	f6Bq11F: Lesion Code F	.	672	100.0	
GRDFPRE	f6Bq11F2: Grade pre PTCA lesion F	.	672	100.0	
GRDFPOST	f6Bq11F4: Grade post PTCA lesion F	.	672	100.0	
LESFRSLT	f6Bq11F5: PTCA Outcome lesion F	.	672	100.0	
THRMBOTX	f6Bq12: Thrombolytic therapy during proc	.	1	0.1	*
		1	27	4.0	
		2	641	95.4	
		3	3	0.4	*
PTCASTAT	f6Bq13: Status leaving Cath Lab	.	2	0.3	*
		1	653	97.2	
		2	17	2.5	*
FUTPTCA	f6Bq14: Additional procedure within 2 wk	.	1	0.1	*
		1	22	3.3	
		2	639	95.1	
		3	10	1.5	*

T3B form6b

Variable	Label	Value	N	%	<= 20
PTCATHRM	f6Bq15A: Thrombolytic post PTCA	.	1	0.1	*
		1	5	0.7	*
		2	660	98.2	
		3	6	0.9	*
PTCAIABP	f6Bq15B: IABP post PTCA	.	1	0.1	*
		1	14	2.1	*
		2	651	96.9	
		3	6	0.9	*
PTCANITR	f6Bq15C: Nitroglycerin post PTCA	.	1	0.1	*
		1	394	58.6	
		2	262	39.0	
		3	15	2.2	*
PTCAHEP	f6Bq15D: Heparin post PTCA	.	1	0.1	*
		1	594	88.4	
		2	64	9.5	
		3	13	1.9	*
PTCAFISH	f6Bq15E: Fish oil post PTCA	.	1	0.1	*
		1	10	1.5	*
		2	650	96.7	
		3	11	1.6	*
PTCAASA	f6Bq15F: Aspirin post PTCA	.	1	0.1	*
		1	600	89.3	
		2	59	8.8	
		3	12	1.8	*

T3B form6b

Variable	Label	Value	N	%	<= 20
PTCAPERS	f6Bq15G: Persantine post PTCA	.	1	0.1	*
		1	155	23.1	
		2	503	74.9	
		3	13	1.9	*
PTCADEX	f6Bq15H: Dextran post PTCA	.	1	0.1	*
		1	13	1.9	*
		2	645	96.0	
		3	13	1.9	*
PTCAREVS	f6Bq16: Revascularization complete	.	1	0.1	*
		1	445	66.2	
		2	221	32.9	
		3	5	0.7	*
PTCAEVNT	f6Bq17: Events during/post PTCA	.	1	0.1	*
		1	84	12.5	
		2	586	87.2	
		3	1	0.1	*
DTH24	f6Bq17A: Death	.	603	89.7	
		1	67	10.0	
		3	2	0.3	*
PTCACA	f6Bq17B: Non-fatal cardiac arrest	.	588	87.5	
		1	79	11.8	
		2	5	0.7	*
PTCAMI	f6Bq17C: Suspect MI	.	588	87.5	
		1	65	9.7	
		2	5	0.7	*
		3	14	2.1	*

T3B form6b

Variable	Label	Value	N	%	<= 20
PTCATRCL	f6Bq17D: Transient abrupt reclosure	.	588	87.5	
		1	64	9.5	
		2	14	2.1	*
		3	6	0.9	*
PTCASRCL	f6Bq17E: Sustained abrupt reclosure	.	588	87.5	
		1	73	10.9	
		2	1	0.1	*
		3	10	1.5	*
PTCACHF	f6Bq17F: CHF	.	588	87.5	
		1	80	11.9	
		2	1	0.1	*
		3	3	0.4	*
PTCAEDEM	f6Bq17G: Pulmonary edema	.	588	87.5	
		1	81	12.1	
		2	1	0.1	*
		3	2	0.3	*
PTCASHCK	f6Bq17H: Cardiogenic shock	.	588	87.5	
		1	79	11.8	
		2	1	0.1	*
		3	4	0.6	*
PTCATAMP	f6Bq17I: Cardiac tamponade	.	588	87.5	
		1	84	12.5	
PTCAHEMO	f6Bq17J: Hemorrhage req tranfusion	.	588	87.5	
		1	71	10.6	
		3	13	1.9	*

T3B form6b

Variable	Label	Value	N	%	<= 20
PTCAEMBO	f6Bq17K: Aterial embolus	.	588	87.5	
		1	80	11.9	
		2	1	0.1	*
		3	3	0.4	*
PTCALBP	f6Bq17L: Hypotension	.	588	87.5	
		1	62	9.2	
		2	9	1.3	*
		3	13	1.9	*
PTCATIA	f6Bq17M: TIA	.	588	87.5	
		1	84	12.5	
PTCASTRK	f6Bq17N: Stroke	.	588	87.5	
		1	84	12.5	
PTCACOMA	f6Bq17O: Coma	.	588	87.5	
		1	84	12.5	
PTCAALRG	f6Bq17P: Hypersensitivity reaction	.	588	87.5	
		1	82	12.2	
		2	2	0.3	*
PTCAARDS	f6Bq17Q: Respiratory failure	.	588	87.5	
		1	82	12.2	
		3	2	0.3	*
PTCAPLEM	f6Bq17R: Pulmonary embolus	.	588	87.5	
		1	84	12.5	
PTCADIAL	f6Bq17S: Renal failure	.	588	87.5	
		1	84	12.5	

T3B form6b

Variable	Label	Value	N	%	<= 20
PTCACABG	f6Bq17T: Emergency CABG	.	588	87.5	
		1	73	10.9	
		2	3	0.4	*
		3	8	1.2	*
PTCAOTEV	f6Bq17U: Other events	.	588	87.5	
		1	61	9.1	
		2	12	1.8	*
		3	11	1.6	*
PTCAFORM	f6Bq18: Cineangiogram mailed	.	2	0.3	*
		1	541	80.5	
		2	129	19.2	

T3B form6b

Variable	Label	N	Percentile	Value	n	<= 20
LESAPRE	f6Bq11A1: Stenosis pre PTCA lesion A	670	5	65	34	
			25	80	190	
			50	90	172	
			75	95	133	
			95	100	141	
			100	100	0	*
LESAPOST	f6Bq11A3: Stenosis post PTCA lesion A	668	5	0	48	
			25	20	305	
			50	20	0	*
			75	30	186	
			95	75	96	
			100	100	33	
LESBPRE	f6Bq11B1: Stenosis pre PTCA lesion B	139	5	50	9	*
			25	70	36	
			50	80	34	
			75	90	37	
			95	100	23	
			100	100	0	*
LESBPOST	f6Bq11B3: Stenosis post PTCA lesion B	138	5	0	13	*
			25	20	53	
			50	25	5	*
			75	35	34	
			95	95	27	
			100	100	6	*

T3B form6b

Variable	Label	N	Percentile	Value	n	<= 20
LESCPRE	f6Bq11C1: Stenosis pre PTCA lesion C	28	5	60	3	*
			25	70	7	*
			50	80	7	*
			75	90	6	*
			95	100	5	*
			100	100	0	*
LESCPOST	f6Bq11C3: Stenosis post PTCA lesion C	28	5	0	2	*
			25	20	6	*
			50	30	12	*
			75	40	2	*
			95	100	6	*
			100	100	0	*
LESDPRE	f6Bq11D1: Stenosis pre PTCA lesion D	2	5	65	1	*
			25	65	0	*
			50	67.5	0	*
			75	70	1	*
			95	70	0	*
			100	70	0	*
LESDPOST	f6Bq11D3: Stenosis post PTCA lesion D	2	5	20	2	*
			25	20	0	*
			50	20	0	*
			75	20	0	*
			95	20	0	*
			100	20	0	*

T3B form6b

Variable	Label	N	Percentile	Value	n	<= 20
LESEPRE	f6Bq11E1: Stenosis pre PTCA lesion E	1	5	50	1	*
			25	50	0	*
			50	50	0	*
			75	50	0	*
			95	50	0	*
			100	50	0	*
LESEPOST	f6Bq11E3: Stenosis post PTCA lesion E	1	5	30	1	*
			25	30	0	*
			50	30	0	*
			75	30	0	*
			95	30	0	*
			100	30	0	*
LESFPRE	f6Bq11F1: Stenosis pre PTCA lesion F	0	100		0	*
LESFPOST	f6Bq11F3: Stenosis post PTCA lesion F	0	100		0	*
PTCAHDR	f6Bq15D1: Duration heparin post PTCA	584	5	7	32	
			25	16	129	
			50	22	143	
			75	30	135	
			95	91	118	
			100	382	27	

T3B form6b

Variable	Label	N	Mean	Std Dev	Minimum	Maximum
FM6BDAY	f6Bq2: Days to PTCA	672	61.9	143.4	1.0	1223.0
PTCAHR	f6Bq2AHR: Time of ptca - hour	650	11.9	3.2	3.0	24.0
PTCAMIN	f6Bq2AMIN: Time of ptca - min	650	22.3	18.0	0.0	59.0