Vascular Outcomes Review

Event Date evtdate_varw   (mm/dd/yyyy)

Cardiac Endpoint Classification and Criteria

I. Myocardial Infraction myocinf_varw
- -9
- 1 Definite
- 2 Probable
- 3 No MI (Skip to Section II)
- -6 Not on form

a. Chest Pain

chstpain_varw
- -9
- 1 Present
- 2 Absent
- 3 Unknown
- -6 Not on form

b. Cardiac Enzymes

cardenz_varw
- -9
- 1 Abnormal
- 2 Equivocal
- 3 Incomplete
- 4 Normal
- 5 Unknown
- -6 Not on form

c. ECG Serial Reading

ecgser_varw
- -9
- 1 Evolving Diagnostic ECG
- 2 Diagnostic ECG
- 3 Evolving ST-T Pattern
- 4 Equivocal ECG
- 5 Unknown, Uncodable or other ECG
- -6 Not on form

d. Procedure-Related

procrel1_varw
- -9
- 1 Yes (specify type)
- 0 No
- 3 Unknown
- -6 Not on form

Type: proctyp1_varw

II. Resuscitated Cardiac Arrest cardarr_varw
- -9
- 1 Definite
- 2 Probable
- 3 Not Present
- -6 Not on form

III. a. Congestive Heart Failure: conhrtfl_varw
- -9
- 1 Definite (Continue with Section III)
- 2 Probable (Continue with Section III)
- 3 Not Present (Skip to Section IV)
- -6 Not on form

Physician diagnosis and Hospitalization for new onset or recurrent CHF.

b. Criteria: (X all that apply)

Congestive heart failure diagnosed by physician and receiving medical treatment for CHF (e.g., diuretics, digitalis, vasodilator and/or ACE-inhibitor)   medttchf_varw ☐

Pulmonary edema/congestion by chest x-ray   pulmend_varw ☐

Dilated ventricle or poor left ventricular function (e.g., low ejection fraction or wall motion abnormalities) by echocardiography; radionuclide ventriculogram (RVG)/multigated acquisition (MUGA), or other contrast ventriculography, or evidence or left ventricular diastolic dysfunction.   dilvent_varw ☐

c. Procedure-Related procrel2_varw
- -9
- 1 Yes (specify type)
- 0 No
- -6 Not on form

Type: proctyp2_varw

d. Conditions at presentation: (X all that apply)

Coronary Disease	corondis_varw ☐	Valvular Disease	valvdis_varw ☐
Arrhythmia	arrhythm_varw ☐	Hypertension	hyperten_varw ☐
Pulmonary Disease	pulmdis_varw ☐	Pulmonary Infection	pulminf_varw ☐
Medications Withdrawal	medwithd_varw ☐	Volume Overload	volover_varw ☐
Toxins	toxins_varw ☐	Other	other_varw ☐

(specify Other) othersp_varw

IV. Coronary Revascularization (on this admission):

a. Coronary Artery Bypass Graft (CABG)

bypassgr_varw
-9
 1 Yes
 0 No
-6 Not on form

b. Percutaneous transluminal coronary angioplasty (PTCA), coronary stent, or coronary atherectomy

ptca_varw
-9
 1 Yes
 0 No
-6 Not on form

V. a. Peripheral Arterial Disease (aorta, iliac arteries, or below): perartds_varw
-9
 1 Definite (continue to b.)
 2 Probable (continue to b.)
 3 No PAD (Skip to Section VI)
-6 Not on form

Symptomatic disease including intermittent claudication

b. Diagnosis (X the <u>one</u> that best applies)

1. Abdominal Aortic Aneurysm rupture or repair — paddiag_varw value="1"

2. Lower extremity claudication — paddiag_varw value="2"

3. Atherosclerosis of arteries of the lower extremities — paddiag_varw value="3"

4. Arterial embolism and/or thrombosis of the lower extremities — paddiag_varw value="4"

c. Criteria defined by symptoms plus one or more of the following (X all that apply):

1. Ultrasound, angiogram or CT demonstrated abdominal aneurysm with rupture or repair — abaneur_varw ☐

2. Ultrasonagraphyically- or angiographically ? demonstrated obstruction, or ulcerated plaque (greater than or equal to 50% of the diameter or greater than or equal to 75% of the cross- sectional area) demonstrated on ultrasound or angiogram of the iliac arteries or below — demobstr_varw ☐

3. Absence of pulse by Doppler in any major vessel of lower extremities — abspulse_varw ☐

4. Exercise test that is positive for lower extremity claudication — leclaud_varw ☐

5. Surgery, angioplasty, or thrombolysis for peripheral arterial disease — surgery_varw ☐

6. Amputation of one or more toes or part of the lower extremity due to ischemia or gangrene — amputatn_varw ☐

7. Exertional leg pain relieved by rest and at least one of the following: 1) claudication diagnosed by a physician; or 2) ankle-arm systolic blood pressure ration less than or equal to 0.8 — legpain_varw ☐

d. Procedure-Related procrel3_varw
-9
 1 Yes (specify type)
 0 No
-6 Not on form
Type: proctyp3_varw

VI. Stroke Diagnosis stroke_varw
-9
 1 Definite
 2 Probable
 3 No Stroke (Go to Section VII)
-6 Not on form

a. Symptoms

1. Severe Headache

headache_varw
-9
 1 Yes
 0 No
-6 Not on form

2. Rapid onset of Focal Deficit lasting 24 hours of longer or cause of death

focdefmt_varw
-9
 1 Yes
 0 No
-6 Not on form

3. Rapid onset of Focal Deficit lasting longer than 1 hour, but less than 24 hours with brain image positive for a stroke.

focdeflt_varw
-9
 1 Yes
 0 No
-6 Not on form

b. Brain Image Findings brainimg_varw
-9
 1 Hemorrhage
 2 Infarct, Old
 3 Infarct, New
 4 Normal
 5 Not Done
-6 Not on form

c. Stroke Type: stroketp_varw
-9
 1 Hemorrhage
 2 Ischemic
 3 Unknown Stroke Type
-6 Not on form

(If Hemorrhage) hemorrhg_varw
-9
 1 Subarachnoid
 2 Intraparechymal
 3 Unknown
-6 Not on form

(If Ischemic) ishemic_varw
-9
 1 Lacunar
 2 Embolic
 3 Atherosclerotic
 4 Unknown
-6 Not on form

d. Procedure related? procrel4_varw
-9
 1 Yes (specify)
 0 No
 3 Unknown
-6 Not on form

If yes, please specify type: proctyp4_varw

VII. Carotid Endarterectomy (on this admission) carendar_varw
-9
 1 Yes
 0 No
 3 Unknown
-6 Not on form

a. Surgical Endarterectomy

surendar_varw
-9
 1 Yes
 0 No (Go to Section VIII)
 3 Unknown (Go to Section VIII)
-6 Not on form

b. Percutaneous Revascularization

percutrv_varw
-9
 1 Yes
 0 No
 3 Unknown
-6 Not on form

VIII. Did the patient die during the hospitalization? diedhosp_varw
-9
 1 Yes
 0 No
-6 Not on form
(If No, Complete Final Death Report)

submit