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Percutaneous Coronary Intervention Report

Facility Name				PFI Number	Sequence Number
I. Patient Information					
Patient Name					
Medical Record Number Soci	ial Security N	Number	first	Age in Years	Date of Birth
2 Female 2 Non-Hispanic 2 8	e White Black Other	Residen Code	ce (see instruction State or Country	s)	Hospital Admission Date m d y
II. Procedural Information Hospital that performed diagnostic cath					
Hospital Name Primary Physician Performing PCI Name	License	Number		Date of PCI	PFI D D D D D D D D D D D D D D D D D D D
Diagnostic Cath during same lab visit? Other PCI this admission? PCI Prior to this admission at this hospital?	1 Yes 1 Yes 1 Yes	2 No 2 No 2 No	Date of PCI	m d	v
Cardiac Enzymes CK Pre-Proc: ≤ 24 hrs: U/L	MB	ng/ml	CK-MB Tn-I	m d Troponin	Tn-T ng/ml
Post-Proc: 6-8 hrs: U/L 12-24 hrs: U/L		ng/ml		ng/ml	ng/ml
Procedure Related Medicines					
Heparin? IV Nitro within 24 hours pre-proc? IV GPIIbIIIa Platelet Inhibitors (i.e., Reo Pro) duri 3 hours post-proc? Oral GPIIbIIIa Platelet Inhibitors pre or post proc?		1 [2 [3 [oc 7 days Pre-proc	
III. Major Events Following PCI (check all that a 0 None 1 Stroke (new neurological deficit) 24 hrs or less 1A Stroke (new neurological deficit) over 24 hrs 7 Acute Occlusion at Site of Intervention 8 A/V Injury at Cath Entry Site, requiring surgery	S	14 15	Renal Failure, dialy Emergency Bypas Emergency Bypas Stent Thrombosis	s Surgery, hemod	dynamically unstable dynamically stable
IV. Discharge Information Discharged to: 11 Home 12 Hospice 13 Acute Care Fac (including rehab) 14 Skilled Nursing Home Died in 2 4 4 5 6 7 7 8 7 8 7 8 7 8 8		oom e Unit	7 In Transit to Facility 8 Elsewhere (specify)	o Other in Hospital	Hospital Discharge Date

V. Peri-Procedural MI Info	rmation								
	Timing				٦	Гiming			
	Pre-Proc Post-Proc	Both			Pre-Proc	Post-Proc	Both		
No MI	1 2	3		ST ↓ or T ↓	1	_ 2	3		
New Abnormal Wall Motion	1 2	3		LBBB	1	_ 2	3		
New Q Waves	□1 □2 □1 □2	<u></u> 3 □ 3	TIMI		1 :n □ 1	2 2	3 3		
ST Elevation Only Time from onset of chest pair		3 		emic type chest pai ping Ischemia at tin			3		
VI. Pre-intervention Risk F	-		io onge	ang isonomia at tin	no or proo				
Priority Height	Ejection Fraction	Measure		Angina:		Angina Ty	•		
1 Elective cm	%		ngiogram		CCS Functional Class 1 Class I		1 Stable2 Unstable		
2 Urgent 3 Emergency —	4 🗆 O-ll-tl		cardiogram onuclide Studies			2 Uns	stable		
3 Emergency — Weight	1 Calculated 2 Estimated		including Intra-C		-				
	9 Unknown	8 Othe	_	3 ☐ Clas 4 ☐ Clas					
kg	9 OHKHOWH	9 Unkr			50 TV				
Vessels Diseased (check all t	hat apply)								
LMT	Prox LAD or	Major Diag M	lid/Dist LAD or N	Major Diag RCA c	or PDA	LCX or Lar	ge Marg		
1 50 - 69% 3 90 -	100% 4 _ 50 - 6	9%	6 🗌 50 - 69%	8	50 - 69%	10 🗌 50 -	69%		
2 70 - 89%	5 🗌 70 - 1	00%	7 🗌 70 - 100%	9 🗌	70 - 100%	11 🗌 70 -	100%		
Lesion-Specific Information									
Complete one line for each le						enosis of at	least		
50% — even if lesion has bee		_		-	lds:	2/			
Bypassed Location (A or V)	Lesion % Pre-op Type Stenosis	Previous PCI	Primary Device	Secondary Device Ste	nt Ba		Stenosis		
	l l l l l l						1		
	ention risk factors listed								
Previous PCIs	Previous MI (most rece	ent)	Peripheral Vas	cular Disease	Hemodyna time of pro	amic Instabil	ity at		
1 One	4 <6 hours		8 Stroke	10	12 Uns				
2 Two	5 ≥6-<12 hours			/Cerebrovascular	13 Sho				
3 Three or more	6 ≥12-<24 hours	(fam Od an arana)	10 Aortoilia		33 CPI				
		for 21 or more)		al/Popliteal					
14 More than one previous MI			23 Renal Failure, creatinine > 2.5 mg/dl						
15 Hypertension history			24 Renal Failure, dialysis						
17 ECG Evidence of Left Ventricular Hypertrophy			26 IABP required at start of procedure						
18 Congestive Heart Failure, this admission			28 Previous Open Heart Surgery						
19 Congestive Heart Failure, before this admission			30 Smoking history, in past year						
20 Malignant Ventricular Arrhythmia			31 ☐ Smoking history, in past year32 ☐ Emergency PCI due to Dx cath complication						
21 Chronic Obstructive Pulmonary Disease22 Diabetes requiring medication			34 Stent Thrombosis						
	OTOLOHE IIIIOIIIDOSIS								
VII. Person Completing Re	eport								
Name									