NEW YORK STATE DEPARTMENT OF HEALTH State Cardiac Advisory Committee

Percutaneous Coronary Intervention Report

I. Patient Information ("mo:) Patient Name		~					
Patient Name ten ten ten ten ten ten ten ten ten t	Facility Name				PFI Number	Sequence	Number
Patient Name ten ten ten ten ten ten ten ten ten t			I Dationt Inform	nation			
Image Image <th< td=""><td></td><td></td><td>1. Patient Inform</td><td></td><td></td><td></td><td></td></th<>			1. Patient Inform				
Medical Record Number Social Security Number Age in Years Date of Birth ge in Years Date of Birth m d y Sex Ethnicity Race Residence Code (we instruction) Hospital Admission Date Primary payer Medicaid State of Country (if 99 code is used) m d y Primary payer Medicaid Transfer PFI m d y Primary payer Medicaid Transfer PFI m d y Vinary payer Medicaid Transfer PFI m d y Primary Physician Performing PCI Medicaid Transfer PFI m d y Vinary Physician Performing PCI License Number Date of PCI m d y Vame License Number Date of PCI m d y Vinary Physician Performing PCI License Number m d y m d y Vame License Number Im Military Time Poeroious PCI this admission 1 Yes No Parotocus PCI this admission at this hospital 1 Yes No Date of PCI m d y Previous PCI this admission at this hospital 1 Yes No Date of PCI m d y Procedure Related Medicines:				(first)			
t Male 1 Hispanic 1 White 4 Asian 2 Female 2 Non-Hispanic 2 Black 5 Pacific Islander 3 Native American 8 Other State or Country (# 99 code is used) m d y Primary payer Medicaid II. Procedural Information Image: State or Country (# 99 code is used) m d y Hospital that performed diagnostic cath II. Procedural Information PFI Image: State or PCI	Medical Record Number	Social Security Nu	mber				th y
2 Non-Hispanic 2 Black 5 Pacific Islander m	Sex Ethnicity	Race		Residence Code (se	e instructions)	Hospital Ad	mission Date
3 Native American 8 Other State or Country (if 90 code is used) m d y Primary payer Medicaid Transfer PFI m d y IL Procedural Information PFI m d y Original Name PFI m d y Timary Physician Performing PCI License Number Date of PCI m d y Timary Physician State of Procedure (first balloon inflation or stent deployment): : in Military Time m d y Diagnostic Cath during same lab visit 1 Yes 2 No Date of PCI m d y Procedure Related Medicines: im d y m d y Procedure Related Medicines: im d y m d y Procedure Related Medicines: im d a Antyper Proc d a Antyper Proc intert.thrombin Inhibitors 2 Clinical Evidence 2 Post a -6 hrs Pre-Proc intert.thrombin Inhibitors 3 Standard Practice/Prophylactic <td>1 Male 1 Hispanic</td> <td>1 White</td> <td>4 Asian</td> <td></td> <td></td> <td></td> <td></td>	1 Male 1 Hispanic	1 White	4 Asian				
Primary payer Medicaid Transfer PFI IL Procedural Information Modicaid Primary Physician Performing PCI Name PFI Date of PCI mine at Start of Procedure (first balloon inflation or stent deployment): : in Military Time Diagnostic Cath during same lab visit 1 Yes 2 No Previous PCI this admission 1 Yes 2 No Date of PCI	2 Female 2 Non-Hispan	ic 2 Black	5 Pacific Island	ler			
II. Procedural Information Hospital Name PFI Optimary Physician Performing PCI Vame Date of PCI Primary Physician Performing PCI Date of PCI Vame Date of PCI m m d Primary Physician Performing PCI Date of PCI m d Vame Date of PCI m d Oragnostic Cath during same lab visit 1 Osa Date of PCI m d Oragnostic Cath during same lab visit 1 Yes No Date of PCI m d Price Colspan="2">Colspan= Call Standard Practice Thrombolytics: Oracle Plant Indications for Use of IV GPIIbIIIa Platelet Inhibitors: Timing: Thrombolytics: Output Indications for Use of IV GPIIbIIIa Platelet Inhibitors: Timing: Thrombolytics: Output Indications for Use of IV GPIIbIIIa Platelet Inhibitors:<		3 Native Americ	an 8 Other	State or Country (i	f 99 code is used)	m d	У
Adopital that performed diagnostic cath PFI Adoptial Name PFI Primary Physician Performing PCI License Number Wame Date of PCI Mame m Diagnostic Cath during same lab visit 1 Yes No Previous PCI this admission 1 Yes No Previous PCI this admission 1 Yes No Date of PCI m m d Procedure Related Medicines: m Fractionated Heparin Indications for Use of IV GPIIbIIIa Platelet Inhibitors: Timing: Infractionated Heparin 1 Abciximab All others 2 Contractionated Heparin 1 Angiographic Evidence 1 Abciximab All others 2 Post 2 Bite of PCI Threationated Heparin 1 Angiographic Evidence 1 Prevect Intercet Thrombin Inhibitors 2 Clinical Evidence 3 Both 3 6 hrs Pre-Proc Contraindicated Diso e 69% 3 0 - 0 hrs - w	Primary payer	Medicaid		Transfer PFI			
Hospital Name PFI Primary Physician Performing PCI License Number Date of PCI Vame License Number Date of PCI Image Image Market Start of Procedure (first balloon inflation or stent deployment): Image Diagnostic Cath during same lab visit 1 Yes No Previous PCI this admission 1 Yes No PCI Prior to this admission at this hospital 1 Yes No Procedure Related Medicines: m d y Image Indications for Use of IV GPIIbIIIa Platelet Inhibitors: Timing: Thrombolytics: Image 1 Yes 2 No Date of PCI Image d y m d y Procedure Related Medicines: m d y m Image 1 Angiographic Evidence 1 Pre 1 3 hrs Pre-Proc Image 1 Angiographic Evidence 2 Post 2 3 - 6 hrs re-Proc Image 1 Another Reason To dys Pre-proc Contraindicated Pre			II. Procedural Info	rmation			
Name License Number Date of PCI m d y Time at Start of Procedure (first balloon inflation or stent deployment): : in Military Time m d y Diagnostic Cath during same lab visit 1 Yes 2 No Parevious PCI this admission 1 Yes 2 No Previous PCI this admission at this hospital 1 Yes 2 No Date of PCI m d y Procedure Related Medicines: m d y m d y Procedure Related Heparin Indications for Use of IV GPIIbIIIa Platelet Inhibitors: Timing: Thrombolytics: In-Fractionated Heparin 1 Angiographic Evidence 2 Post 2 3-6 hrs Pre-Proc IV GPIIbIIIa Platelet Inhibitors 3 Standard Practice/Prophylactic 3 Both 3 6 hrs - within // So - 69% 3 9 - 100% 4 50 - 69% 6 50 - 69% 8 50 - 69% 10 50 - 69% 1 On No 1 Yes Yes Yes Yes Yes Yes	Hospital that performed diagnost Hospital Name	tic cath				PFI	
Imme at Start of Procedure (first balloon inflation or stent deployment): immedian immedi	Primary Physician Performing PCI						
Diagnostic Cath during same lab visit 1 Yes 2 No Previous PCI this admission 1 Yes 2 No Date of PCI m d y PCI Prior to this admission at this hospital 1 Yes 2 No Date of PCI m d y PCI Prior to this admission at this hospital 1 Yes 2 No Date of PCI m d y PCI Prior to this admission at this hospital 1 Yes 2 No Date of PCI m d y PCI Prior to this admission at this hospital 1 Yes 2 No Date of PCI m d y PCI Prior to this admission at this hospital 1 Yes 2 No Date of PCI m d y PCI Prior to this admission at this hospital 1 Yes 2 No Date of PCI m d y PCI Prior to this admission at this hospital 1 Yes 2 No Date of PCI m d y PCI Prior to this admission at this hospital 1 Yes 2 No Date of PCI m d y PCI Prior to this admission at this hospital 1 Yes 2 No Date of PCI m d y PCI Prior to this admission at this hospital 1 Yes 2 No Date of PCI m d y PCI Prior to this admission at this hospital 1 Yes 2 No Date of PCI m d y PCI Prior to this admission at this hospital 1 Yes 2 No Date of PCI m d y PCI Prior to this admission at this hospital 1 Yes 2 No Date of PCI m d y PCI Prior to this admission at this hospital 1 Yes 2 No Date of PCI m d y PCI Prior to this admission at this hospital 1 Angiographic Evidence 1 Pre 1 3 hrs Pre-Proc 2 Post 2 3 -6 hrs - within 7 days Pre-proc C Ontraindicated III. Vessels Disease and Lesion-Specific Information // Adsp Pre-proc C Contraindicated III. Vessels Disease and Lesion-Specific Information // Adsp Pre-proc 2 Pro - 100% 1 So - 69% 3 9 0 - 100% 4 5 0 - 69% 6 5 0 - 69% 8 5 0 - 69% 1 0 5 0 - 69% 2 70 - 89% 5 70 - 100% 7 7 70 - 100% 9 70 - 100% 1 70 - 100% 1 70 - 100% 1 70 - 100% 1 Yes Complete one line for each lesion for which PCI was attempted, and one line for each non-attempted lesion with stenosis of at least 50%. See instructions for diagram and codes for the following fields: Bypassed Bypass % Pre-op Previous Priorus	Name		License Number		Date of P		y
Previous PCI this admission 1 Yes 2 No Date of PCI m d y PCI Prior to this admission at this hospital 1 Yes 2 No Date of PCI m d y Procedure Related Medicines: m d y m d y Procedure Related Heparin Indications for Use of IV GPIIbIIIa Platelet Inhibitors: Timing: Thrombolytics: Un-Fractionated Heparin 1 Angiographic Evidence 1 Pre 1 <d><d>>d shrs Pre-Proc Direct Thrombin Inhibitors 2 Clinical Evidence 2 Post 2 3-6 hrs Pre-Proc f IV GPIIbIIIa Platelet Inhibitors 3 Standard Practice/Prophylactic 3 Both 3 >d +sr - within Abciximab All others 4 Another Reason Contraindicated LMT Prox LAD or Major Diag Mid/Dist LAD or Major Diag RCA or PDA LCX or Large Marg 1 50 - 69% 5 70 - 100% 7 70 - 100% 9 70 - 100% 10 50 - 69% 2 70 - 89%<td>Time at Start of Procedure (first</td><td>balloon inflation or stent</td><td>deployment):</td><td>: in Military Ti</td><td>me</td><td></td><td></td></d></d>	Time at Start of Procedure (first	balloon inflation or stent	deployment):	: in Military Ti	me		
PCI Prior to this admission at this hospital 1 Yes 2 No Date of PCI m d y Procedure Related Medicines:	Diagnostic Cath during same lab	visit	1 Yes 2 No				
PCI Prior to this admission at this hospital 1 Yes 2 No Date of PCI m m d y Procedure Related Medicines: indications for Use of IV GPIIbIIIa Platelet Inhibitors: Timing: Thrombolytics: Un-Fractionated Heparin 1 Angiographic Evidence 1 Pre 1 <3 hrs Pre-Proc	Previous PCI this admission		1 Yes 2 No	Date of PCI			
Fractionated Heparin Indications for Use of IV GPIIbIIIa Platelet Inhibitors: Timing: Thrombolytics: Un-Fractionated Heparin 1 Angiographic Evidence 1 Pre 1 <3 hrs Pre-Proc	PCI Prior to this admission at thi	s hospital	1 Yes 2 No	Date of PCI			
Un-Fractionated Heparin 1 Angiographic Evidence 1 Pre 1 <3 hrs Pre-Proc	Procedure Related Medicines:						
Direct Thrombin Inhibitors 2 Clinical Evidence 2 Post 2 3-6 hrs Pre-Proc if IV GPIIbIIIa Platelet Inhibitors 3 Standard Practice/Prophylactic 3 Both 3 >6 hrs - within Abciximab All others 4 Another Reason 3 Both 3 >6 hrs - within // Approximation 1 Another Reason 7 days Pre-proc Contraindicated // Approximation 1 Prox LAD or Major Diag Mid/Dist LAD or Major Diag RCA or PDA LCX or Large Marg 1 50 - 69% 3 90 - 100% 4 50 - 69% 6 50 - 69% 8 50 - 69% 10 50 - 69% 2 70 - 89% 5 70 - 100% 7 70 - 100% 9 70 - 100% 11 70 - 100% IVUS Used 0 No 1 Yes Yes <td>Fractionated Heparin</td> <td>Indications</td> <td>for Use of IV GPIIbIIIa</td> <td>Platelet Inhibitors:</td> <td>Timing:</td> <td>Thrombolyt</td> <td>ics:</td>	Fractionated Heparin	Indications	for Use of IV GPIIbIIIa	Platelet Inhibitors:	Timing:	Thrombolyt	ics:
f IV GPIIbIIIa Platelet Inhibitors 3 Standard Practice/Prophylactic 3 Both 3 6 hrs - within 7 days Pre-proc Abciximab All others 4 Another Reason 7 days Pre-proc Image: Standard Practice/Prophylactic 3 Standard Practice/Prophylactic 3 Standard Practice/Prophylactic 3 Standard Practice/Prophylactic Abciximab All others 4 Another Reason 7 days Pre-proc Image: Standard Practice/Prophylactic 3 Standard Practice/Prophylactic 3 Standard Practice/Prophylactic 3 Standard Practice/Prophylactic Image: Standard Practice/Prophylactic 4 Another Reason 1 Standard Practice/Prophylactic 3 Standard Practice/Prophylactic 3 Standard Practice/Prophylactic Vessels Diseased (check all that apply) Image: Standard Practice/Prophylactic 3 Standard Practice/Prophylactic 3 Standard Practice/Prophylactic 3 Standard Practice/Prophylactic Lessels Diseased (check all that apply) Image: Standard Practice/Prophylactic 3 Standard Practice/Prophylactic 3 Standard Practice/Prophylactic 3 Standard Practice/Prophylactic Lessels Diseased (check all that apply) Image: Standard Practice/Prophylactic 1 Standard Practice/Prophylactic 3 Standard Practice/Prophylactic 3 Standard Practice/Prophylactic Lessels Diseased (check all that apply) Image: Standar	Un-Fractionated Heparin	1 [1 Angiographic Evidence		1 Pre	1 <3	hrs Pre-Proc
Abciximab All others 4 Another Reason 7 days Pre-proc Contraindicated III. Vessels Disease and Lesion-Specific Information Vessels Diseased (check all that apply) LMT Prox LAD or Major Diag Mid/Dist LAD or Major Diag RCA or PDA LCX or Large Marg 1 50 - 69% 3 90 - 100% 4 50 - 69% 6 50 - 69% 8 50 - 69% 10 50 - 69% 2 70 - 89% 5 70 - 100% 7 70 - 100% 7 70 - 100% 10 70 - 100% 11 70 - 100% 70 - 100% 11 70 - 100% 70 - 100% 8 9 70 - 100% 11 70 - 100% 70 - 100% 9 70 - 100% 70 - 100% 8 9 70 - 100% 9	Direct Thrombin Inhibitor	s 2	2 Clinical Evidence		2 Post	2 3-6	hrs Pre-Proc
III. Vessels Disease and Lesion-Specific Information /essels Diseased (check all that apply) LMT Prox LAD or Major Diag Mid/Dist LAD or Major Diag RCA or PDA LCX or Large Marg 1 50 - 69% 2 70 - 89% 5 70 - 100% IVUS Used 0 No 1 Yes Complete one line for each lesion for which PCI was attempted, and one line for each non-attempted lesion with stenosis of at least 50%. See instructions for diagram and codes for the following fields: Bypassed Bypass % Pre-op Previous Primary Secondary			Standard Practice/Pro	ophylactic	3 Both		
III. Vessels Disease and Lesion-Specific Information Vessels Diseased (check all that apply) LMT Prox LAD or Major Diag Mid/Dist LAD or Major Diag RCA or PDA LCX or Large Marg 1 50 - 69% 3 90 - 100% 4 50 - 69% 6 50 - 69% 8 50 - 69% 10 50 - 69% 2 70 - 89% 5 70 - 100% 7 70 - 100% 9 70 - 100% 11 70 - 100% IVUS Used 0 No 1 Yes Vestor Large marget for each lesion for which PCI was attempted, and one line for each non-attempted lesion with stenosis of at least 50%. See instructions for diagram and codes for the following fields: Bypassed Bypass % Pre-op Previous Primary Secondary % Post-op	Abciximab All o	thers 4	Another Reason				-
Vessels Diseased (check all that apply) LMT Prox LAD or Major Diag Mid/Dist LAD or Major Diag RCA or PDA LCX or Large Marg 1 50 - 69% 3 90 - 100% 4 50 - 69% 6 50 - 69% 8 50 - 69% 10 50 - 69% 2 70 - 89% 5 70 - 100% 7 70 - 100% 9 70 - 100% 11 70 - 100% IVUS Used 0 No 1 Yes Yes Complete one line for each lesion for which PCI was attempted, and one line for each non-attempted lesion with stenosis of at least 50%. See instructions for diagram and codes for the following fields: Westor Westor Westor Bypassed Bypass % Pre-op Previous Primary Secondary % Post-op						Con	traindicated
Vessels Diseased (check all that apply) LMT Prox LAD or Major Diag Mid/Dist LAD or Major Diag RCA or PDA LCX or Large Marg 1 50 - 69% 3 90 - 100% 4 50 - 69% 6 50 - 69% 8 50 - 69% 10 50 - 69% 2 70 - 89% 5 70 - 100% 7 70 - 100% 9 70 - 100% 11 70 - 100% IVUS Used 0 No 1 Yes Yes Complete one line for each lesion for which PCI was attempted, and one line for each non-attempted lesion with stenosis of at least 50%. See instructions for diagram and codes for the following fields: Westor Westor Westor Bypassed Bypass % Pre-op Previous Primary Secondary % Post-op		III. Vessel	s Disease and Lesion-S	Specific Information			
LMT Prox LAD or Major Diag Mid/Dist LAD or Major Diag RCA or PDA LCX or Large Marg 1 50 - 69% 3 90 - 100% 4 50 - 69% 6 50 - 69% 8 50 - 69% 10 50 - 69% 2 70 - 89% 5 70 - 100% 7 70 - 100% 9 70 - 100% 11 70 - 100% IVUS Used 0 No 1 Yes Yes Vector of the form of the following fields: See instructions for diagram and codes for the following fields: 8 Secondary % Post-op	Vessels Diseased (check all that :			·			
2 70 - 89% 5 70 - 100% 7 70 - 100% 9 70 - 100% 11 70 - 100% IVUS Used 0 No 1 Yes Complete one line for each lesion for which PCI was attempted, and one line for each non-attempted lesion with stenosis of at least 50%. See instructions for diagram and codes for the following fields: Bypassed Bypass % Pre-op Previous Primary Secondary % Post-op		11 0/	jor Diag Mid/Di	st LAD or Major Diag	RCA or PDA	LCX or	Large Marg
IVUS Used 0 No 1 Yes Complete one line for each lesion for which PCI was attempted, and one line for each non-attempted lesion with stenosis of at least 50%. See instructions for diagram and codes for the following fields: Bypassed Bypass % Pre-op Previous Primary Secondary	1 50 - 69% 3 90 - 1	00% 4 50 - 69	9% 6	50 - 69%	8 50 - 69%	6 10 5	0 - 69%
Complete one line for each lesion for which PCI was attempted, and one line for each non-attempted lesion with stenosis of at least 50%. See instructions for diagram and codes for the following fields: Bypassed Bypass % Pre-op Previous Primary Secondary % Post-op	2 70 - 89%	5 70 - 10	00% 7	70 - 100%	9 70 - 100	0% 11 7	0 - 100%
Complete one line for each lesion for which PCI was attempted, and one line for each non-attempted lesion with stenosis of at least 50%. See instructions for diagram and codes for the following fields: Bypassed Bypass % Pre-op Previous Primary Secondary % Post-op	IVUS Used 0 No	1 Yes					
				each non-attempted le	sion with stenos	is of at least 5	50%.
Location (A or V) Stenosis Stenosis PCI Device Device Stent Radiation Stenosis Image: Ima					-		% Post-op
	Location (A or V)	Stenosis Stenosis	PCI D	evice Device	Stent	Radiation	Stenosis

IV. Acute MI Information (0	Complete this section for Al	L patients with an MI lo	ess than 24 hours prior	to PCI.)
	nl New Q W New ST E New ST √ New LBB /ml TIMI ≤ II /ml Ischemic	levation or T↓ B	Transfer Time: boor to Balloon	minutes
V. F	Pre-intervention Risk Fact	ors (answer <i>all</i> that a	pply)	
Priority Height 1 Elective 2 Urgent 3 Emergency	Weight kg	Ejection Fraction % Measure	Creatinine	Angina CCS Class
0 None of the pre-intervention risk factors	listed below were present			
Previous PCIsPrevious MI (model1One4<6 hours	ost recent) nours	9 Cerebrovascula 10 Peripheral Vasc	r Disease of prod ular Disease 12	lynamic Instability at time cedure Unstable Shock
 18 Congestive Heart Failure, Current 19 Congestive Heart Failure, Past 20 Malignant Ventricular Arrhythmia 21 Chronic Obstructive Pulmonary Disease 	 22 Diabetes requiri 24 Renal Failure, di 28 Previous CABG S 29 Immune System 	alysis urgery	cath com 34 Stent Thr	-
0 None 1 Stroke (new neurological deficit) 24 hrs of 1A Stroke (new neurological deficit) over 24 2 Transmural MI (New Q Waves) 3 Non-Transmural MI (No New Q Waves) 7A Acute Occlusion in the Targeted Lesion		7B Acute Occlusio 8 A/V Injury at (10 Renal Failure 14 Emergency Car 17 Stent Thrombo	n in a Significant Side Cath Entry Site, requiri diac Surgery	ng intervention
Medications on Discharge: Aspirin Aspirin Contraindic Beta Blocker Use Beta Blocker Use C	ated	e Information oid Lowering Meds	Lipid Lo	wering Meds Contraindicated
Discharged alive to: 11 Home 12 Hospice 13 Acute Care Facility 14 Skilled Nursing Home 15 In-Patient Physical Medicine & Rehab 19 Other (specify)	Died in: 2 Operating Room 3 Recovery Room 4 Critical Care Uni 5 Medical/Surgical 6 Cath Lab	Facility t 8 Elsewho (specifi	ere in Hospital	Hospital Discharge Date