

# Percutaneous Coronary Intervention Report

Facility Name \_\_\_\_\_ PFI Number \_\_\_\_\_ Sequence Number \_\_\_\_\_

## I. Patient Information

Patient Name \_\_\_\_\_ (last) \_\_\_\_\_ (first)

Medical Record Number \_\_\_\_\_ Social Security Number \_\_\_\_\_ Date of Birth \_\_\_\_\_  
 m d y

Sex: 1  Male 2  Female  
 Ethnicity: 1  Hispanic 2  Non-Hispanic  
 Race: 1  White 4  Asian 2  Black 5  Pacific Islander 3  Native American 8  Other \_\_\_\_\_

Residence Code (see instructions) \_\_\_\_\_ Hospital Admission Date \_\_\_\_\_  
 m d y

Primary payer \_\_\_\_\_ Medicaid  State or Country (if 99 code is used) \_\_\_\_\_ Transfer PFI \_\_\_\_\_

Hospital that performed diagnostic cath  
 Hospital Name \_\_\_\_\_ PFI \_\_\_\_\_

Primary Physician Performing PCI  
 Name \_\_\_\_\_ License Number \_\_\_\_\_ Date of PCI \_\_\_\_\_  
 m d y

Time of first interventional device: \_\_\_\_ : \_\_\_\_ in Military Time

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

Is this a follow-up PCI as part of a staged treatment strategy? 0  No 1  Yes, with PCI 2  Yes, with CABG

Total Contrast Volume (72 hours) \_\_\_\_\_ cc  
 Additional Procedure  Access Site:  Arm  Leg  
 Thrombolytics: 1  <3 hrs Pre-Proc 2  3-6 hrs Pre-Proc 3  >6 hrs - within 7 days Pre-proc  
 Contraindicated

Vessels Diseased (check *all* that apply)

LMT		Proximal LAD		Mid/Dist LAD or Major Diag		RCA or PDA		LCX or Large Marg		
1 <input type="checkbox"/> 50 - 69%	3 <input type="checkbox"/> 90 - 100%	4 <input type="checkbox"/> 50 - 69%	6 <input type="checkbox"/> 50 - 69%	8 <input type="checkbox"/> 50 - 69%	10 <input type="checkbox"/> 50 - 69%	2 <input type="checkbox"/> 70 - 89%	5 <input type="checkbox"/> 70 - 100%	7 <input type="checkbox"/> 70 - 100%	9 <input type="checkbox"/> 70 - 100%	11 <input type="checkbox"/> 70 - 100%

Previous LIMA use (chose one) 1  Used, remains patent 2  Used, graft not functional 3  Never used

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%.

Location	Byp (A/V)	Byp Sten	% Pre-op Stenosis	IVUS	FFR	Previous PCI	Devices #1	Devices #2	Stents #1	Stents #2	Lesion Description	% Post-op Stenosis
_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____

Devices	Lesion Description	Stents
0 - Not Attempted / No Devices	1 - Small Vessel (< 2.5 mm)	0 - No Stent Used
1 - Balloon	2 - Long Lesion (> 33 mm)	1 - Un-Coated (BMS)
3 - Rotational Atherectomy	3 - Bifurcation	2 - Covered
4 - Protective Devices	4 - Heavily calcified/unyielding	4 - Paclitaxel
5 - Cutting Balloon	5 - Tortuous/angled	6 - Sirolimus
11 - Angiojet		7 - Zotarolimus
12 - Mech. Thrombus Extrac.		8 - Everolimus
98 - Failed PCI - No Device		9 - Other Coated
99 - Other		
	6 - Complex - details not doc.	
	7 - CTO	
	8 - Dissection w/o prev. lesion	
	9 - None of the above	

**IV. Acute MI Information** (Complete this section for ALL patients with an MI less than 24 hours prior to PCI.)

Onset of Ischemic Symptoms: Date       Time  :  Estimated   New ST Elevation  
 Arrival at Transferring Hospital:       Time  :   New ST ↓ or T ↓  
 Arrival at PCI Hospital:       Time  :   New LBBB  
 TIMI ≤ II  
 Ongoing Ischemia at Time of Proc  
 Killip Class 2 or 3

**V. Pre-intervention Risk Factors** (answer all that apply)

Priority: 1  Elective, 2  Urgent, 3  Emergency  
 Height:    cm, Weight:    kg  
 Stress Test:  Done,  Type,  Result  
 Anti-anginal Med Therapy (check all that apply):  Beta Blockers,  Ca Channel Blockers,  Long Acting Nitrates,  Ranolazine,  Other  
 Ejection Fraction:   % Measure   
 Creatinine:   mg/dl  
 Angina: CCS Class  Type

0  None of the pre-intervention risk factors listed below were present

Previous PCIs: 1  One, 2  Two, 3  Three or more  
 Previous MI (most recent): 4  <6 hours, 5  ≥6-<12 hours, 6  ≥12-<24 hours, 7   days (use 21 for 21 or more)  
 Hemodynamic Instability at time of procedure: 9  Cerebrovascular Disease, 10  Peripheral Vascular Disease, 12  Unstable, 13  Shock

18  Congestive Heart Failure, Current, 19  Congestive Heart Failure, Past, 20  Malignant Ventricular Arrhythmia, 21  Chronic Obstructive Pulmonary Disease, 22  Diabetes Requiring Medication, 23  Emergency PCI due to Dx cath complication, 24  Renal Failure, Dialysis, 25  Stent Thrombosis, 26  Any Previous Organ Transplant, 27  Previous CABG Surgery, 28  Contraindication to ASA/Plavix

**VI. Major Events Following PCI** (check all that apply)

0  None, 1  Stroke (new neurological deficit) 24 hrs or less, 1A  Stroke (new neurological deficit) over 24 hrs, 2  Q-Wave MI, 7A  Acute Occlusion in the Targeted Lesion, 7B  Acute Occlusion in a Significant Side Branch, 8  A/V Injury at Cath Entry Site, requiring intervention, 9  Renal Failure, 10  Emergency Cardiac Surgery, 11  Stent Thrombosis, 12  Emergency Return to Cath Lab for PCI, 13  Coronary Perforation

**VII. Discharge Information**

Is a follow-up procedure planned, as part of a staged treatment strategy? 0  No, 1  Yes, PCI, 2  Yes, CABG

Discharged alive to: 11  Home, 12  Hospice, 13  Acute Care Facility, 14  Skilled Nursing Home, 15  In-Patient Physical Medicine & Rehab, 16  Other (specify) \_\_\_\_\_  
 Died in: 17  Operating Room, 18  Recovery Room, 19  Critical Care Unit, 20  Medical/Surgical Floor, 21  Cath Lab, 22  In Transit to Other Facility, 23  Elsewhere in Hospital (specify) \_\_\_\_\_  
 Hospital Discharge Date:       m d y  
 30 Day Status: 1  Live, 2  Dead, 3  Unknown

Stress Test Done	Stress Test Type	Stress Test Result	Ejection Fraction Measure
1 - Yes	1 - Stdnd Exercise	1 - Neg.	1 - LV Angiogram
2 - No	2 - Stress Echo	2 - Pos., Low	2 - Echo
9 - Unknown	3 - w/SPECT MPI	3 - Pos., Intermed	3 - Radionuclide
	4 - w/CMR	4 - Pos., High	4 - TEE
	9 - Not Done/Unknown	5 - Pos., Risk unavail.	8 - Other
		6 - Indeterminate	9 - Not Done/Unknown
		7 - Unavailable	
		9 - Not Done/Unknown	