

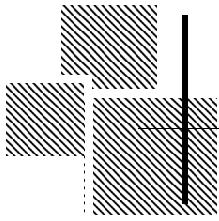
Case Report Form – Non



FONDAZIONE I.R.C.A.B.

GENERAL DATA

CRF1	Center	<input type="text"/>	CRF2	Patient ID	<input type="text"/>			
CRF3	Investigator							
CRF4	Name and surname	<input type="text"/>			CRF5	Sex	<input type="checkbox"/> M <input type="checkbox"/> F	
CRF6	Date of birth	<input type="text"/> ^{dd}	<input type="text"/> ^{mm}	<input type="text"/> ^{yy}	CRF7	Age	<input type="text"/>	yrs
CRF8	Admission Date	<input type="text"/> ^{dd}	<input type="text"/> ^{mm}	<input type="text"/>	CRF9	Time	<input type="text"/> ^{hrs}	<input type="text"/> ^{min}
CRF10	Smoker	<input checked="" type="checkbox"/>	<input type="checkbox"/>					
CRF11	Hypertension	<input checked="" type="checkbox"/>	<input type="checkbox"/>					
CRF12	Previous Angina	<input checked="" type="checkbox"/>	<input type="checkbox"/>					
CRF13	Previous AMI	<input checked="" type="checkbox"/>	<input type="checkbox"/>					
CRF14		<input checked="" type="checkbox"/>	<input type="checkbox"/>					
CRF16	Cholesterol level	<input type="text"/>	<input type="text"/>	<input type="text"/>			mg/dl	
CRF17	ECG Modifications Admission		<input type="radio"/> ST elevation			<input type="radio"/> anterior/lateral		
CRF18	ECG Modifications Day 3		<input type="radio"/> Q Wave AMI			<input type="radio"/> anterior	<input type="radio"/> lateral	



Case Report Form – Non



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PAGE 2

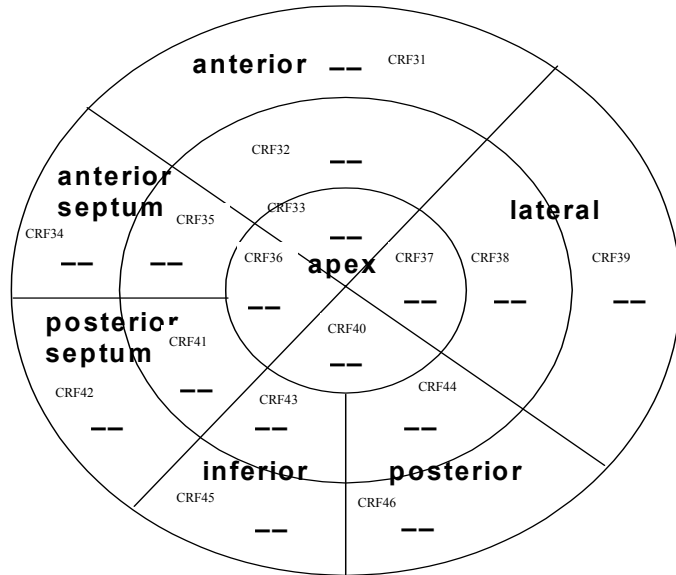
THERAPY AT ADMISSION AND DURING THE FIRST 24 HOURS

- CRF19 Thrombolysis Y N
- CRF20 Beta blockers Y N
- CRF21 Calcium Antagonist Y N
- CRF22 Nitroderivatives Y N
- CRF23 Heparin Y N
- CRF24 Acetilsalilic Acid Y N
- CRF25 Diuretics Y N
- CRF26 ACE Inhibitors Y N

CRF28 Clinical signs of heart failure (Day 1-3) Absent Present

CRF29 **ECHOCARDIOGRAM (Day 3)** Date ^{dd} ^{mm}

CRF30 Quality of registration Good Sufficient

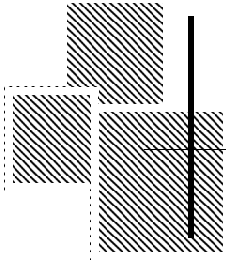


WALL MOTION SCORE

- 1 = normal
- 2 = hypokinetic
- 3 = akinetic
- 4 = dyskintetic

rest CRF47

CRF48 WMSI ,
 CRF49 %



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FONDAZIONE I.R.C.A.B.

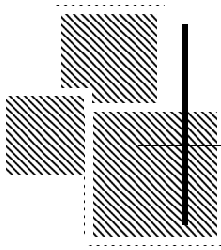
PAGE 3

- | | | |
|-------|---------------------------------------------|-------------------------------------------------------|
| CRF50 | Signs of heart failure present | <input type="checkbox"/> Y <input type="checkbox"/> N |
| CRF51 | Quality of ECO registration not good enough | <input type="checkbox"/> Y <input type="checkbox"/> N |
| CRF52 | Angina | <input type="checkbox"/> Y <input type="checkbox"/> N |
| CRF53 | Major arrhythmias | <input type="checkbox"/> Y <input type="checkbox"/> N |
| CRF54 | EF < 40% | <input type="checkbox"/> Y <input type="checkbox"/> N |
| CRF55 | Informed Consent NOT obtained | <input type="checkbox"/> Y <input type="checkbox"/> N |

If you answered yes to any of the previous questions, DO NOT include the patients in the study

Status at the end of day 3

- | | | | | | |
|-------|-------------------|-------------------------------------------------------|-------|----------|-------------------------------------------------------------------------------------------------|
| CRF56 | Randomized | <input type="checkbox"/> Y <input type="checkbox"/> N | CRF57 | Strategy | <input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 |
|-------|-------------------|-------------------------------------------------------|-------|----------|-------------------------------------------------------------------------------------------------|



Case Report Form – Non



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PAGE 4

CRF58

STRESS ECHO Strategy 1-3

Date

dd mm

CRF59

Dipyridamole Dobutamine Performed Not performed

CRF60

Not performed because of: _____

CRF61

DAY 3 4 5

CRF62

Total dose injected Low High

CRF63

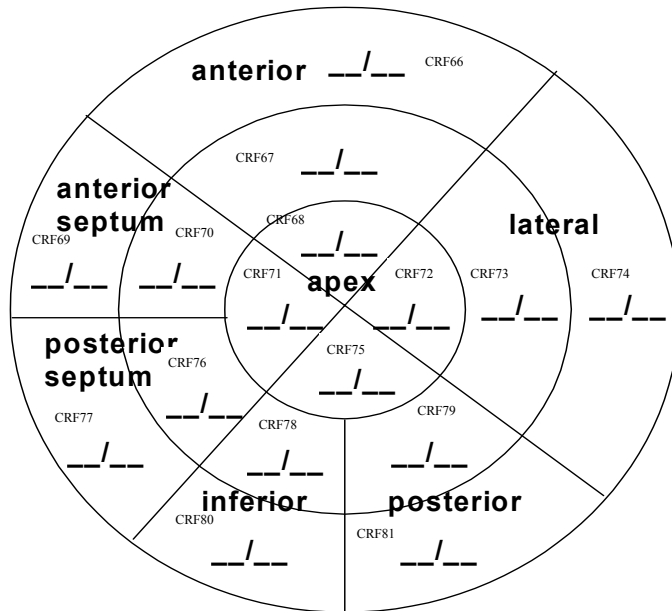
Test interrupted because of Test positive due to new dyssynergies
 Angina (without ECG modifications)
 Significant arrhythmias

CRF64

WMSI rest ,

CRF65

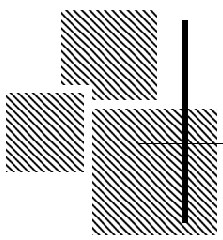
WMSI peak ,



WALL MOTION SCORE

- 1 = normal
- 2 = hypokinetic
- 3 = akinetic
- 4 = diskinetik

rest / stress
___ / ___ CRF82



Case Report Form – Non



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CRF83 Date

CRF84 Performed Not performed

CRF85 Not performed because of: _____

CRF86 Reason to stop _____

CRF87 Heart Rate at rest b/min

CRF88 Heart Rate at peak b/min

CRF89 Max workload Watt

CRF90 Blood Pressure at rest / mm/Hg

CRF91 Blood Pressure at peak / mm/Hg

CRF92 Double Product at rest b/min x mm/Hg

CRF93 Double Product at peak b/min x mm Hg

Watt

CRF95 Angina Y N

CRF96 ST changes Y N

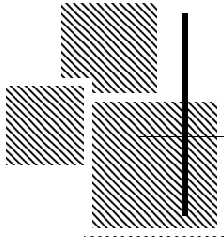
CRF97 Elevation mV mm

CRF98 Depression mV mm

Watt

CRF100 Presence of arrhythmias Y N CRF101 Specify _____

CRF102 Conclusions Negative Not interpretable Positive for ECG



Case Report Form – Non



FONDAZIONE I.R.C.A.B.

PAGE 6

IN HOSPITAL EVALUATION

CRF103

Coronary Angiography

Date ^{dd} ^{mm}

CRF104

Description _____

CRF105 Center _____

CRF106

PTCA

Date ^{dd} ^{mm}

CRF107

Description _____

CRF108 Center _____

CRF109

CABG

Date ^{dd} ^{mm}

CRF110

Description _____

CRF111 Center _____

CRF112

Other tests after admission

Date ^{dd} ^{mm}

CRF113

CRF114 Center _____

CRF115

Non cardiac complications

Y N

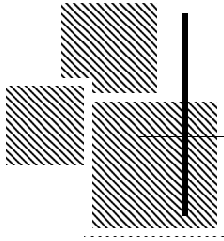
CRF116 Specify _____

CRF117

Patient transferred to other departments

Y N

CRF118 Where _____



Case Report Form – Non



FONDAZIONE I.R.C.A.B.

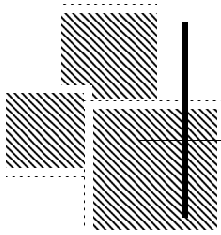
PAGE 7

DISCHARGE

- CRF119 From CCU Date ^{dd} ^{mm}
- CRF120 From Hospital Date ^{dd} ^{mm}
- CRF121 From Cardiology Department Date ^{dd} ^{mm}
- CRF122 Drugs prescribed at discharge
 - Calcium-antagonists
 - Diuretics
 - Betablockers
 - Acetilsalicylic Acid
 - Statins
 - Ace inhibitors
 - Nitroderivatives

IN-HOSPITAL EVENTS Please specify the date

- CRF123 Death Date ^{dd} ^{mm}
- CRF124 Reinfarction Date ^{dd} ^{mm}
- CRF125 Angina Date ^{dd} ^{mm}
- CRF126 Heart Failure Date ^{dd} ^{mm}
- CRF127 Ventricular fibrillation Date ^{dd} ^{mm}
- CRF128 Ventricular tachicardia Date ^{dd} ^{mm}
- CRF129 Atrio-ventricular block Grade
- CRF131 Atrial Fibrillation Date ^{dd} ^{mm}
- CRF132 Cerebrovascular events Date ^{dd} ^{mm}
- CRF133 Readmission to CCU for any reason after day 3 Date ^{dd} ^{mm}



Case Report Form – Non



FONDAZIONE I.R.C.A.B.

PAGE 8

CRF135 FOLLOW UP 2-4 weeks Date ^{dd} ^{mm}

CRF136 Center _____

CRF137 Name and surname _____

CRF138 Patient's Status Alive Dead Dead at home Dead in hospital

CRF139 Date of death ^{dd} ^{mm}

CRF140 Cause of death Cardiovascular Not cardiovascular Unknown

CRF141 Sudden Y N

CRF142 Hospitalization 1 Y N CRF143 Reason _____

CRF144 Duration of Hospitalization days

CRF145 Diagnosis at discharge _____

CRF146 Coronary angiography Y N CRF147 Date ^{dd} ^{mm}

CRF148 Reinfarction Y N CRF149 Date ^{dd} ^{mm}

CRF150 Bypass Y N CRF151 Date ^{dd} ^{mm}

CRF152 Y N CRF153 Date ^{dd} ^{mm}

CRF154 Angina Y N CRF155 Date of first event ^{dd} ^{mm}

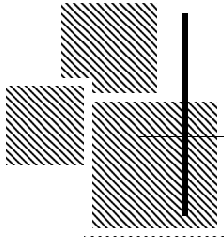
CRF156 Canadian CV Society Functional Classification I II III IV

CRF157 Acute pulmonary edema Y N CRF158 Date of first event ^{dd} ^{mm}

CRF159 NYHA Class I II III IV

CRF160 Other relevant co-morbidities _____ CRF161 Back to work Y N

CRF162 Drugs prescribed at discharge Betablockers Ace inhibitors
 Calcium-antagonists Acetilsalilic Acid Nitroderivatives



Case Report Form – Non



FONDAZIONE I.R.C.A.B.

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FOLLOW UP 2-4 weeks

CRF163 Hospitalization 2 CRF164 Reason _____

CRF165 Duration of Hospitalization days

CRF166 Diagnosis at discharge _____

CRF167 Coronary angiography CRF168 Date ^{dd} ^{mm}

CRF169 Reinfarction CRF170 Date ^{dd} ^{mm}

CRF171 Bypass CRF172 Date ^{dd} ^{mm}

CRF173 CRF174 Date ^{dd} ^{mm}

CRF175 Angina CRF176 Date of first event ^{dd} ^{mm}

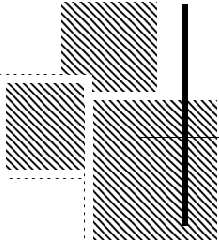
CRF177 Canadian CV Society Functional Classification I II III IV

CRF178 Acute pulmonary edema CRF179 Date of first event ^{dd} ^{mm}

CRF180 NYHA Class I II III IV

CRF181 Other relevant co-morbidities _____ CRF182 Back to work

CRF183 Drugs prescribed at discharge
 Calcium-antagonists Betablockers Ace inhibitors
 Diuretics Acetilsalilic Acid Nitroderivatives
 Statins



Case Report Form – Non



FONDAZIONE I.R.C.A.B.

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FOLLOW UP 2-4 weeks

CRF184 Hospitalization 3 Y N CRF185 Reason _____

CRF186 Duration of Hospitalization days

CRF187 Diagnosis at discharge _____

CRF188 Coronary angiography Y N CRF189 Date

CRF190 Reinfarction Y N CRF191 Date

CRF192 Bypass Y N CRF193 Date

CRF194 PTCA Y N CRF195 Date

CRF196 Angina Y N CRF197 Date of first event

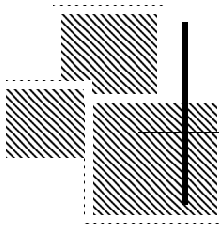
CRF198 Canadian CV Society Functional Classification I II III IV

CRF199 Acute pulmonary edema Y N CRF200 Date of first event

CRF201 NYHA Class I II III IV

CRF202 Other relevant co-morbidities _____ CRF203 Back to work Y N

CRF204 Drugs prescribed at discharge Betablockers Ace inhibitors
 Calcium-antagonists Acetilsalilic Acid Nitroderivatives
 Diuretics Statins



Case Report Form – Non



FONDAZIONE I.R.C.A.B.

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EXAM PERFORMED NOT IN HOSPITALIZATION

CRF205	Cardiologic examination	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	CRF206	Date	<input type="text"/>	<input type="text"/>	<input type="text"/>
CRF207	ECG	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	CRF208	Date	<input type="text"/>	<input type="text"/>	<input type="text"/>
CRF209	Holter	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	CRF210	Date	<input type="text"/>	<input type="text"/>	<input type="text"/>
CRF211	Exercise testing	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	CRF212	Date	<input type="text"/>	<input type="text"/>	<input type="text"/>
CRF213	Echo	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	CRF214	Date	<input type="text"/>	<input type="text"/>	<input type="text"/>
CRF215	Other (specify) _____	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	CRF216	Date	<input type="text"/>	<input type="text"/>	<input type="text"/>

EXERCISE TESTING

CRF219 Date

CRF220 Performed Not performed

CRF221 Not performed because of: _____

CRF222 Reason to stop _____

CRF223	Heart Rate at rest	<input type="text"/>	b/min
CRF224	Heart Rate at peak	<input type="text"/>	b/min
CRF225	Max workload	<input type="text"/>	Watt
CRF226	Blood Pressure at rest	<input type="text"/>	/ <input type="text"/> mm/Hg
CRF227	Blood Pressure at peak	<input type="text"/>	/ <input type="text"/> mm/Hg
CRF228	Double Product at rest	<input type="text"/>	b/min x mm/Hg
CRF229		<input type="text"/>	b/min x mm Hg
CRF230		<input type="text"/>	Watt

CRF231 Angina Y N

CRF232 ST changes Y N

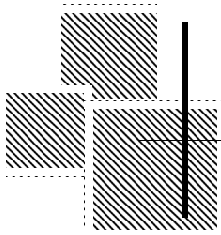
CRF233 Elevation mV mm

CRF234 Depression mV mm

CRF235 Watt

CRF236 Presence of arrhythmias Y N CRF237 Specify _____

CRF238 Conclusions Negative Not interpretable Positive for ECG



Case Report Form – Non



FONDAZIONE I.R.C.A.B.

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CRF239 FOLLOW UP 6 months Date ^{dd} ^{mm}

CRF240 Center _____

CRF241 Name and surname _____

CRF242 Patient's Status Alive Dead Dead at home Dead in hospital

CRF243 Date of death ^{dd} ^{mm}

CRF244 Cause of death Cardiovascular Not cardiovascular Unknown

CRF245 Sudden Y N

CRF246 Hospitalization 1 Y N CRF247 Reason _____

CRF248 Duration of Hospitalization days

CRF249 Diagnosis at discharge _____

CRF250 Coronary angiography Y N CRF251 Date ^{dd} ^{mm}

CRF252 Reinfarction Y N CRF253 Date ^{dd} ^{mm}

CRF254 Bypass Y N CRF255 Date ^{dd} ^{mm}

CRF256 Y N CRF257 Date ^{dd} ^{mm}

CRF258 Angina Y N CRF259 Date of first event ^{dd} ^{mm}

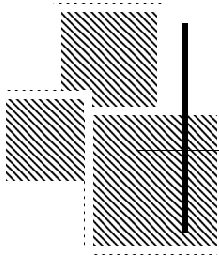
CRF260 Canadian CV Society Functional Classification I II III IV

CRF261 Acute pulmonary edema Y N CRF262 Date of first event ^{dd} ^{mm}

CRF263 NYHA Class I II III IV

CRF264 Other relevant co-morbidities _____ CRF265 Back to work Y N

CRF266 Drugs prescribed at discharge Betablockers Ace inhibitors
 Calcium-antagonists Acetilsalilic Acid Nitroderivatives



Case Report Form – Non



FONDAZIONE I.R.C.A.B.

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FOLLOW UP 6 months

CRF267

Hospitalization 2

CRF268

Reason _____

CRF269

Duration of Hospitalization

days

CRF270

Diagnosis at discharge _____

CRF271

Coronary angiography

CRF272

Date

^{dd} ^{mm}

CRF273

Reinfarction

CRF274

Date

^{dd} ^{mm}

CRF275

Bypass

CRF276

Date

^{dd} ^{mm}

CRF277

PTCA

CRF278

Date

^{dd} ^{mm}

CRF279

Angina

CRF280

Date of first event

^{dd} ^{mm}

CRF281

Canadian CV Society Functional Classification

I II III IV

CRF282

Acute pulmonary edema

CRF283

Date of first event

^{dd} ^{mm}

CRF284

NYHA Class

I II III IV

CRF285

Other relevant co-morbidities _____

CRF286

Back to work

CRF287

Drugs prescribed at discharge

Betablockers

Ace inhibitors

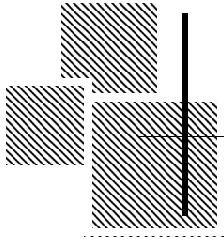
Calcium-antagonists

Acetilsalicylic Acid

Nitroderivatives

Diuretics

Statins



Case Report Form – Non



FONDAZIONE I.R.C.A.B.

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FOLLOW UP 6 months

CRF288

Hospitalization 3

CRF289

Reason _____

CRF290

Duration of Hospitalization

days

CRF291

Diagnosis at discharge _____

CRF292

Coronary angiography

CRF293

Date

^{dd} ^{mm}

CRF294

Reinfarction

CRF295

Date

^{dd} ^{mm}

CRF296

Bypass

CRF297

Date

^{dd} ^{mm}

CRF298

CRF299

Date

^{dd} ^{mm}

CRF300

Angina

CRF301

Date of first event

^{dd} ^{mm}

CRF302

Canadian CV Society Functional Classification

I II III IV

CRF303

Acute pulmonary edema

CRF304

Date of first event

^{dd} ^{mm}

CRF305

NYHA Class

I II III IV

CRF306

Other relevant co-morbidities _____

CRF307

Back to work

CRF308

Drugs prescribed at discharge

Betablockers

Ace inhibitors

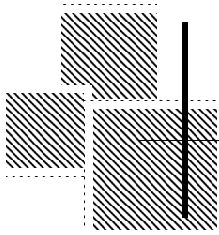
Calcium-antagonists

Acetilsalicylic Acid

Nitroderivatives

Diuretics

Statins



Case Report Form – Non



FONDAZIONE I.R.C.A.B.

PAGE 15

CRF309 FOLLOW UP 1 year Date ^{dd} ^{mm}

CRF310 Center _____

CRF311 Name and surname _____

CRF312 Patient's Status Alive Dead Dead at home Dead in hospital

CRF313 Date of death ^{dd} ^{mm}

CRF314 Cause of death Cardiovascular Not cardiovascular Unknown

CRF315 Sudden Y N

CRF316 Hospitalization 1 Y N CRF317 Reason _____

CRF318 Duration of Hospitalization days

CRF319 Diagnosis at discharge _____

CRF320 Coronary angiography Y N CRF321 Date ^{dd} ^{mm}

CRF322 Reinfarction Y N CRF323 Date ^{dd} ^{mm}

CRF324 Bypass Y N CRF325 Date ^{dd} ^{mm}

CRF326 Y N CRF327 Date ^{dd} ^{mm}

CRF328 Angina Y N CRF329 Date of first event ^{dd} ^{mm}

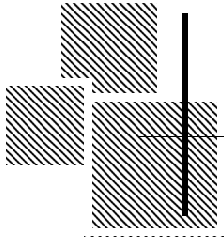
CRF330 Canadian CV Society Functional Classification I II III IV

CRF331 Acute pulmonary edema Y N CRF332 Date of first event ^{dd} ^{mm}

CRF333 NYHA Class I II III IV

CRF334 Other relevant co-morbidities _____ CRF335 Back to work Y N

CRF336 Drugs prescribed at discharge Betablockers Ace inhibitors
 Calcium-antagonists Acetilsalicylic Acid Nitroderivatives



Case Report Form – Non



FONDAZIONE I.R.C.A.B.

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FOLLOW UP 1 year

CRF337

Hospitalization 2

CRF338

Reason _____

CRF339

Duration of Hospitalization

days

CRF340

Diagnosis at discharge _____

CRF341

Coronary angiography

CRF342

Date

^{dd} ^{mm}

CRF343

Reinfarction

CRF344

Date

^{dd} ^{mm}

CRF345

Bypass

CRF346

Date

^{dd} ^{mm}

CRF347

CRF348

Date

^{dd} ^{mm}

CRF349

Angina

CRF350

Date of first event

^{dd} ^{mm}

CRF351

Canadian CV Society Functional Classification

I II III IV

CRF352

Acute pulmonary edema

CRF353

Date of first event

^{dd} ^{mm}

CRF354

NYHA Class

I II III IV

CRF355

Other relevant co-morbidities _____

CRF356

Back to work

CRF357

Drugs prescribed at discharge

Betablockers

Ace inhibitors

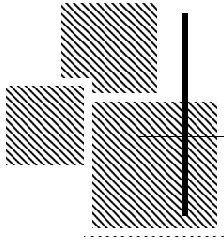
Calcium-antagonists

Acetilsalicylic Acid

Nitroderivatives

Diuretics

Statins



Case Report Form – Non



FONDAZIONE I.R.C.A.B.

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FOLLOW UP 1 year

CRF358 Hospitalization 3 Y N CRF359 Reason _____

CRF360 Duration of Hospitalization days

CRF361 Diagnosis at discharge _____

CRF362 Coronary angiography Y N CRF363 Date ^{dd} ^{mm}

CRF364 Reinfarction Y N CRF365 Date ^{dd} ^{mm}

CRF366 Bypass Y N CRF367 Date ^{dd} ^{mm}

CRF368 Y N CRF369 Date ^{dd} ^{mm}

CRF370 Angina Y N CRF371 Date of first event ^{dd} ^{mm}

CRF372 Canadian CV Society Functional Classification I II III IV

CRF373 Acute pulmonary edema Y N CRF374 Date of first event ^{dd} ^{mm}

CRF375 NYHA Class I II III IV

CRF376 Other relevant co-morbidities _____ CRF377 Back to work Y N

CRF378 Drugs prescribed at discharge
 Calcium-antagonists Betablockers Ace inhibitors
 Diuretics Acetilsalicylic Acid Nitroderivatives
 Statins