Pediatric Heart Transplant Study
Form 04r: Coronary Angiography or PTCA

ID# P [ ][ ][ ] [ ][ ][ ][ ] [ ][ ][ ]

P	Institution Code	Sequential Patient Number	Patient Initials

1. Date of Angiograms: [ ][ ] - [ ][ ] - [ ][ ]

2. Indication for Angiograms (check only one):

- ❑ Routine, per established protocol
- ❑ Research Protocol
- ❑ Objective evidence of graft dysfunction
- ❑ Symptoms (suggesting CHF or angina equivalent)
- ❑ Non-invasive test indicative of coronary disease, (Specify test:_____)
- ❑ Pre PTCA or for PTCA followup

3. Left ventricular function evaluation (nearest to coronary angiograms):

a. Date of study: __ __ - __ __ - __ __. ❑ None performed within 30 days of angiograms (skip to #4)

b. Method: ❑ Radionuclide angiogram (MUGA) ❑Contrast ventriculogram ❑ MRI ❑ Echocardiogram (only if others not performed)

c. Left Ventricular Ejection Fraction: _____ % Fractional Shortening: _____%

d. Wall Motion (check all that apply):

- ❑ Normal (skip to number 4) ❑ Not interpreted for wall motion abnormalities (skip to number 4)
- ❑ Hypokinesis: → ❑ 1 segment or wall ❑ > 1 segment or wall ❑ diffuse
- ❑ Akinesis: → ❑ 1 segment or wall ❑ > 1 segment or wall ❑ diffuse
- ❑ Dyskinesis: → ❑ 1 segment or wall ❑ > 1 segment or wall ❑ diffuse

4. Angiography:

a. Injection sites (check all that apply): ❑ Left Ventricle ❑ Aorta ❑ Selective Left Coronary ❑ Selective right coronary

b. Dominance: ❑ Right ❑ Left ❑ Co-dominant

c. Method of Interpretation: ❑ Visual Estimate ❑ Caliper ❑ Computer Assisted (specify system):_____

5.Results:

a. ❑ Normal (all arteries visualized), skip the remainder of this form ❑ Abnormal (complete form)

b. If LV or aorta injection only: ❑ Left main stenosis ❑ LAD Stenosis ❑ RCA stenosis ❑ LCx stenosis

c. Selective Coronary Angiograms (place "X" in appropriate check box indicating findings for each artery/segment*):

	L Main	LAD	D1	D2	D3	LCx	M1	M2	M3	RCA	PDA	PLSA	PLB
Normal	❑	❑	❑	❑	❑	❑	❑	❑	❑	❑	❑	❑	❑
Not Visualized	❑	❑	❑	❑	❑	❑	❑	❑	❑	❑	❑	❑	❑
Absent (congenital)	❑	❑	❑	❑	❑	❑	❑	❑	❑	❑	❑	❑	❑
Proximal(or entire segment):													
< 50%	❑	❑	❑	❑	❑	❑	❑	❑	❑	❑	❑	❑	❑
50-70%	❑	❑	❑	❑	❑	❑	❑	❑	❑	❑	❑	❑	❑
70-99%	❑	❑	❑	❑	❑	❑	❑	❑	❑	❑	❑	❑	❑
100%	❑	❑	❑	❑	❑	❑	❑	❑	❑	❑	❑	❑	❑
Mid:													
< 50%		❑	❑	❑	❑	❑	❑	❑	❑	❑	❑	❑	❑
50-70%		❑	❑	❑	❑	❑	❑	❑	❑	❑	❑	❑	❑
70-99%		❑	❑	❑	❑	❑	❑	❑	❑	❑	❑	❑	❑
100%		❑	❑	❑	❑	❑	❑	❑	❑	❑	❑	❑	❑
Distal													
< 50%		❑	❑	❑	❑	❑	❑	❑	❑	❑	❑	❑	❑
50-70%		❑	❑	❑	❑	❑	❑	❑	❑	❑	❑	❑	❑
70-99%		❑	❑	❑	❑	❑	❑	❑	❑	❑	❑	❑	❑
100%		❑	❑	❑	❑	❑	❑	❑	❑	❑	❑	❑	❑
Diffuse Narrowing	❑	❑	❑	❑	❑	❑	❑	❑	❑	❑	❑	❑	❑

* L Main = Left main coronary artery; LAD = Left anterior descending. D1-3 = diagnonals 1-3; LCx=left circumflex; M1-3=marginals 1-3; RCA = Right coronary artery; PDA = posterior descending; PLSA = posterior lateral segment artery; PLB = branch of the PLSA

Person Completing this form:_____ Date Original Form Mailed (do not send copy):_____

PRINT IN BLACK INK ONLY: USE THIS FORM FOR ALL PATIENTS OR EVENTS FROM JULY 1, 1996.

8/1/96 RCB