



Affix Patient I.D. Here

1 Date recording started: ^{DATE 04} / /
mo dy yr

2 Time recording started: ^{TIME 04} :
hr min (24 hour)

3 Holter technician code:

REASON FOR RECORDING

- 4 REASON 04 1 Qualifying Holter (original baseline).
 2 New baseline obtained prior to open label titration (optional).
 3 New baseline obtained prior to restarting open label titration.
 4 Verification of suppression (or best drug and dose) during initial titration.
 5 Followup Holter. Complete page 1 and send with the Holter tape. DO NOT READ THE HOLTER.
 6 Holter obtained after washout and prior to blinded retitration.
 7 Blinded retitration Holter obtained on new drug and/or dose after blinded retitration. Complete page 1 and send with Holter tape. DO NOT READ THE HOLTER.
 8 Prospective new baseline obtained during open label titration (must be approved by Coordinating Center).

STUDY DRUG

- 5 THERAPY 04 1 No drug (before open label titration)
 2 CAST Therapy ^{DRUG 04}
 1 CAST-ENC 2 CAST-FLEC 3 CAST-MOR
 1 Dose 1 2 Dose 2 3 Other: mg/day
 3 Washout ^{DOSE 04}
 4 Individualized Therapy
 1 No antiarrhythmic therapy
 2 Non-CAST antiarrhythmic therapy
specify:

ANALYSIS

If Holter was overread for presence of atrial flutter/fibrillation, permanent pacemaker, or LBBB, or prior to evaluation of drug and dose level in open label titration, record the results of the overread, and record the code number of the person overreading the tape on line 11.

6 Length of interpretable recording: ^{LENGTH04} :
hr min

7 Presence of:

	yes	intermittent	no
^{AF04} Atrial flutter/fibrillation	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃
^{PA04} Permanent pacemaker	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃
^{LBBB04} LBBB	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃

If YES or INTERMITTENT checked above, Holter will require special overread.

8 Total number of VPD's. ^{VPD04}

9 Total number of VPD runs at a rate < 120 bpm. ^{RUNSL04}
 Length of longest run ^{RUNSLN04} complexes or ≥ 30 sec ₁
 Average rate of longest run ^{RUNSR04} bpm

10 Total number of VPD runs at a rate ≥ 120 bpm. ^{RUNFST04}
 Length of longest run ^{RUNFLN04} complexes
 or ≥ 15 complexes ₁
 Average rate of longest run ^{RUNFRT04} bpm
 IF ≥ 15 COMPLEXES, COMPLETE VT FORM, CAST 21.

OVERREAD

11 Code number for person overreading Holter:
 (if tape was overread for any reason)