



22719

OCCLUDED ARTERY TRIAL (OAT) Cardiac Serum Marker Results Form

OAT Form 8B
Rev 1 (email)
04/14/2003
1 of 1 Page

Please Use Black Pen To Fill Out Form.

Patient's ID Number:

Letter Code:

Correction

Date of OAT Randomization:

mmm

dd

yyyy

hh

mm

Laboratory data for time period (after randomization)

seqno

0-7 hours 8-15 hours 16-23 hours 24-31 hours 32-39 hours 40-47 hours 48-55 hours

SERIAL LABORATORY DATA Creatine Kinase Levels / Troponin levels

1. Date and Time

mmm

dd

yyyy

hh

mm

24 hour clock

A. Total CPK

Unit of measurement:

U/L ukat/L
ckutb

 NA **ckbuk**

B. CPK-MB

Unit of measurement:

ng/ml %
 U/L Index
 ug/L **ckmbutb**

 <5 **ckmblt5b** NA **ckmbbuk**

C. Troponin (ng/ml)

 NA **tropbuk**

2. Upper limit of normal (ULN) for levels reported above.

A. Where were levels obtained?

OAT Clinical Center Laboratory **ulnwherb**
 Other Laboratory

B. Total CPK

Unit of measurement:

U/L ukat/L
uckutb

C. CPK-MB

Unit of measurement:

ng/ml %
 U/L Index
 ug/L **uckmbutb**

D. Troponin (ng/ml)

Signature: _____

OAT Staff Number

FAX to MMRI (410) 323 - 4729