LIST OF CURRENT OCCLUDED ARTERY TRIAL FORMS

Form	Description	Rev	Date of Form	Date of Instructions*
А	ATRS Hospital Application and Time Zone Form		12/07/2001	instructions
AA	OAT Clinical Site Personnel Changes	3	4/01/2004	8/07/2002
В	ATRS Voice Response Worksheet	4	11/19/04	11/19/04
С	ATRS Demonstration Treatment Allocation		8/13/2003	8/13/2003
CA	OAT - Angioplasty Site Certification		12/04/2002	
CI	Cath/Interventional Profile		12/04/2002	
CL	OAT - Angioplasty Operator Certification for Lead		12/04/2002	
CO	Interventionalist Angioplasty Operator Certification Other Than Lead Interventionalist		12/04/2002	
D	Inclusion Criteria Checklist		5/11/2001	
Е	Exclusion Criteria Checklist		5/07/2001	
F	OAT Transmittal List of FAX ENTRY Forms		12/03/2004	
G	OAT Form Order Form		5/09/2001	
Н	Test Fax Form	0	3/30/2000	
Κ	Oat Clinical Site Questionnaire on Site Resources		5/12/2001	5/15/2001
L	OAT Transmittal List of Follow up and Long-Term Follow-up Forms		06/14/2007	6/19/2007
00	Randomized Patient Information		5/07/2001	5/07/2001
0S	Supplement to OAT Form 00 and OAT Form 25 - Patient Information for Randomized and Fully Eligible, Non-Randomized Registry Patients to be Utilized for National Death Index Search		5/07/2001	
01	Medical History Form	2	4/14/2003	7/15/2002
02	Intake Physical Examination	0	4/14/2003	5/12/2001
03	Documentation of Qualifying MI	4	4/14/2003	12/10/2001
3A	ECG Documentation of Qualifying MI	0	4/14/2003	5/12/2001
04	Qualifying Angiography, Stress Test and Ejection Fraction Form	1	4/14/2003	5/12/2001
05	Percutaneous Coronary Intervention (PCI) Report Form	2	4/14/2003	5/12/2001
06	Complications Within 48 Hours of Study Entry Report	2	4/14/2003	12/07/2001
6A	Complications of Delayed Protocol PCI	0	10/24/2003	10/24/2003
07	Report of Reinfarction Within 48 Hours of Study Entry	2	4/14/2003	12/07/2001
8A	Cardiac Serum Marker Results Form	1	4/14/2003	8/14/2001
8B	Cardiac Serum Marker Results Form	1	4/14/2003	8/14/2001

*No specific instructions for forms that do not have a date for the instructions.

LIST OF CURRENT OCCLUDED ARTERY TRIAL FORMS

Form	Description	Rev	Date of Form	Date of Instructions*
8C	Cardiac Serum Marker Results for PCI Assigned Patients and PCI Was Delayed	0	4/14/2003	8/14/2001
09	Medication Form	2	4/14/2003	12/07/2001
10	Hospital Discharge or Outpatient Contact Form	2	4/14/2003	12/07/2001
11	Outcome Follow-up Form	1	4/14/2003	5/12/2001
12	Cardiovascular Status Outcome Follow-up Data Form	1	4/14/2003	12/14/2001
13	Medication Follow-up Form	3	4/14/2003	5/12/2001
14	Cause of Death	1	4/14/2003	5/12/2001
15	Subsequent Hospitalization and Secondary Events Form	1	4/14/2003	5/15/2001
16	Non-Protocol PCI Form	1	4/14/2003	5/15/2001
17	Recurrent Myocardial Infarction	0	4/14/2003	5/19/2003
18	Congestive Heart Failure Event Form	2	4/14/2003	8/05/2002
19	CABG Surgery Form	0	4/14/2003	5/15/2001
20	AICD Follow Up Form	0	4/14/2003	8/05/2002
21	Cardiac Serum Marker Results	1	4/14/2003	5/12/2001
25	Fully Eligible, Non-Randomized Patient	3	4/14/2003	4/14/2003
26	Screening Log	3	4/14/2003	4/14/2003
30	Angiography Transmittal Form	3	4/14/2003	1/24/2003
31	Follow-Up Angiography Form (TOSCA-2 Patients Only)	0	4/14/2003	12/07/2001
32	EP Enrollment Form (EP Patients Only)	0	4/14/2003	1/17/2003
33	Holter Monitoring Form (EP Patients Only)	0	4/14/2003	12/18/2002
34	NUC Enrollment Form	0	3/5/2004	2/26/2004
35	SPECT Imaging Form	0	3/23/2004	2/26/2004
36	NUC Biomarker Study Enrollment Form	0	3/5/2004	2/26/2004
37	NUC Biomarker Study Blood Sample Form	0	3/23/2004	7/26/2004
38	SPECT Imaging for Patients Not Randomized Form	0	5/20/2004	7/26/2004
39	OAT-NUC Study Pt. Data Transmittal Form	0	3/17/2004	
41	TOSCA-2 DES Enrollment Form	0	9/22/2004	
60	Transfer of Follow-up Form	0	7/27/2005	9/7/2005
70	Consent for Long-Term Follow-up Form	0	7/18/2005	7/26/2005
71	Long-Term Outcome Follow-up Form	0	3/13/2006	3/24/2006
72	Cardiovascular Status Outcome Follow-Up Data Form	0	3/13/2006	3/24/2006

*No specific instructions for forms that do not have a date for the instructions.

11/19/2001

LIST OF CURRENT OCCLUDED ARTERY TRIAL FORMS

LIST OF CORRENT OCCLUDED ARTERT TRIAL FORMS						
Form Description	Rev	Date of	Date of			
		Form	Instructions*			
75 Vital Status Form	0	05/14/2007				

ATTACHMENT

Schedule of Measurements and Data Collection

Patient's Initials are replaced by Letter Code on all forms dated 4/14/2003. Revised instructions will not be issued.