

THROMBOLYSIS IN MYOCARDIAL ISCHEMIA

T3 Form 7T
Rev 0 2/8/91
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CARDIAC CATHETERIZATION
AND ANGIOGRAPHY FORM 7B
SUPPLEMENT

Complete this form for the catheterization and angiography procedures identified on this form. The ID Number, Name Code, and Date of Catheterization of the patient and catheterization in question are printed on this form. A Form 7B Rev 0 or Rev 1 was previously submitted for this patient. The information on this form is needed to supplement the Form 7B previously submitted.

COMPUTER GENERATED

Clinic No.

ID No.

Form Type

PART I: IDENTIFICATION

1. Patient's NAME CODE: -----

2. Date of catheterization (Month-Day-Year) -----

fm7tday

A. Military time: -----

cthr : ctmn
Hours Minutes

PART II: PROCEDURE NOTES

3. When were catheterization and angiography performed?

ctperf

Less than 18 hours after study treatment initiation ----- (1)

18 to 48 hours after study treatment initiation ----- (2)

Greater than 48 hours after study treatment initiation
but before or at six-week follow-up visit ----- (3)

After six-week follow-up visit ----- (4)

4. Why were catheterization and angiography performed?

ctwhy

Protocol (Invasive Strategy) ----- (1)

Protocol (Conservative Strategy patient with study end point) ----- (2)

Non-protocol ----- (3)

PART III: ADMINISTRATIVE MATTERS

5. Research Coordinator:

Signature: _____ T3 Staff No.: --- -- -- - -- --

6. Date form completed: -----

Month - Day - Year

*T3B form 7t**The CONTENTS Procedure*

Data Set Name:	WORK.FORM7T	Observations:	372
Member Type:	DATA	Variables:	8
Engine:	V8	Indexes:	0
Created:	13:26 Monday, February 2, 2004	Observation Length:	48
Last Modified:	13:26 Monday, February 2, 2004	Deleted Observations:	0
Protection:		Compressed:	NO
Data Set Type:		Sorted:	NO
Label:			

----Alphabetic List of Variables and Attributes----					
#	Variable	Type	Len	Pos	Label
3	CTHR	Num	4	24	f7Tq2AHR: Hour of cath
4	CTMN	Num	4	28	f7Tq2AMIN: Minute of cath
5	CTPERF	Num	4	32	f7Tq3: When cath/ang performed
6	CTWHY	Num	4	36	f7Tq4: Why cath/ang performed
8	FM7TDAY	Num	8	16	f7Tq2: Days to catheterization
2	FMTYP	Char	4	40	Form Type
7	NEWID	Num	8	8	Patient Identification
1	REV	Num	8	0	Revision

(02FEB04--13:26)

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Variable	Label	Value	N	%	<= 20
REV	Revision	0	372	100.0	
FMTYP	Form Type	CT01	314	84.4	
		CT02	43	11.6	
		CT03	11	3.0	*
		CT04	3	0.8	*
		CT05	1	0.3	*
CTPERF	f7Tq3: When cath/ang performed	1	11	3.0	*
		2	189	50.8	
		3	145	39.0	
		4	27	7.3	
CTWHY	f7Tq4: Why cath/ang performed	1	192	51.6	
		2	135	36.3	
		3	45	12.1	

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Variable	Label	N	Mean	Std Dev	Minimum	Maximum
FM7TDAY	f7Tq2: Days to catheterization	372	14.7	35.9	1.0	308.0
CTHR	f7Tq2AHR: Hour of cath	372	11.8	3.1	7.0	23.0
CTMN	f7Tq2AMIN: Minute of cath	372	23.6	18.2	0.0	59.0