

THROMBOLYSIS IN MYOCARDIAL ISCHMIA  
ELECTROCARDIOGRAM ACQUISITION FORM

Complete this form for all protocol ECGs. Send the original ECG to the Core Lab. Sent this form and a copy of the ECG to the DCC. Do not submit Form 09 for ECGs associated with an ETT or Persantine/Thallium Test. ECGs associated with an ETT should be submitted with Form 8E. ECGs associated with a Persantine/Thallium Imaging test should not be submitted.

Clinic No.			-					
ID No.			-					
Form Type	E	C						

**PART I: IDENTIFICATION**

1. Patient's NAME CODE: -----
2. Date of ECG:----- *fm09dys* -----  
 Month Day Year
3. Military time:----- *ecg* : *hr* *min* *sec* -----  
 Hours Minutes Unknown
4. Type of ECG: (Specify one.)
- A. Qualifying with protocol ECG evidence of myocardial ischemia: *ecgtype2*
    - 1) without prequalifying reference ECG ----- (1)
    - 2) with prequalifying reference ECG ----- (2)
  - B. Qualifying without protocol ECG evidence of myocardial ischemia ----- (3)
  - C. Baseline (T3B) or before first cath (T3A) ----- (4)
  - D. Pre-discharge ----- (5)
  - E. Six-week follow-up ECG (12-lead standard) (T3B) ----- (6)
  - F. Ischemic episode or suspect MI after study drug treatment initiation ----- (7) # \_\_\_ of \_\_\_

	Yes	No
1) Ischemic episode with ECG criteria changes -----	(1)	(2)
2) Ischemic episode - resolved ECG changes -----	(1)	(2)
3) Other, specify -----	(1)	(2)

*ecgchg*  
*ecgrchg*  
*ecgothr*

5. Did patient take digitalis during 7 days prior to ECG? ----- (1) (2) (3)  
 Yes No Unknown *ecgdigit*

**PART II: ADMINISTRATIVE MATTERS**

6. Date labeled ECG sent to ECG Core Lab:----- *deleted* -----  
 Month Day Year
- A. Check here to indicate a copy of ECG is being sent with this form to the Data Coordinating Center ----- *deleted* (1)
7. Research Coordinator:  
 Signature: \_\_\_\_\_ T3 Staff No.: \_\_\_\_\_
8. Date form completed: :-----  
 Month Day Year

Data Coordinating Center Use Only
9. ECG received -----(1)

ID No.			-					
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T3 Form 09: Variables from earlier revisions

- ECGTYPE Revision 1 Item 4  
Type of ECG  
1=Qualifying  
2=Baseline  
3=Thallium/Persantine Test  
4=Thallium exercise treadmill test (hospital discharge)  
5=Exercise treadmill test (6-week follow-up)  
6=Ischemic episode or suspect MI  
7=Pre-discharge  
8=Exercise treadmill test to confirm CCSC Stage III or IV angina post-discharge
- ECGDOC Revision 1 Item 4F1  
(Answered if ECGTYPE=6)  
Documenting ECG criteria  
1=Yes 2=No
- ECGRSLV Revision 1 Item 4F2  
(Answered if ECGTYPE=6)  
Resolved ECG changes  
1=Yes 2=No

T3 Form 09: Data Set Revisions

The following items are being deleted – no relevant information provided

Item 6: Date labeled ECG set to ECG Core Lab

Item 6A: Check here to indicate a copy of ECG is being sent with this form to the Data  
Coordinating Center

Item 9 (Data Coordinating Center Use Only): ECG received

**T3B form09****The CONTENTS Procedure**

<b>Data Set Name:</b>	WORK.FORM09	<b>Observations:</b>	7333
<b>Member Type:</b>	DATA	<b>Variables:</b>	15
<b>Engine:</b>	V8	<b>Indexes:</b>	0
<b>Created:</b>	13:54 Friday, February 6, 2004	<b>Observation Length:</b>	72
<b>Last Modified:</b>	13:54 Friday, February 6, 2004	<b>Deleted Observations:</b>	0
<b>Protection:</b>		<b>Compressed:</b>	NO
<b>Data Set Type:</b>		<b>Sorted:</b>	NO
<b>Label:</b>			

----Alphabetic List of Variables and Attributes----					
#	Variable	Type	Len	Pos	Label
8	ECGCHG	Num	4	44	f09q4F1: Ischemic episode with ecg chg
13	ECGDIGIT	Num	4	64	f09q5: Patient take digitalis
11	ECGDOC	Num	4	56	f09q4F1: Document ecg criteria
3	ECGHR	Num	4	24	f09q3HR: hour ecg taken
4	ECGMIN	Num	4	28	f09q3MN: minutes ecg taken
10	ECGOTHR	Num	4	52	f09q4F3: other
9	ECGRCHG	Num	4	48	f09q4F2: Ischemic episode-resolved chg
12	ECGRSLV	Num	4	60	f09q4F2: Resolved ecg changes
6	ECGTYPE	Num	4	36	f09q4A: Type of ecg
7	ECGTYPE2	Num	4	40	f09q4: Type of ecg
5	ECGUNK	Num	4	32	f09q3: Time of ecg unknown
15	FM09DYS	Num	8	16	f09q2: Days to Form
2	FMTYP	Char	4	68	Form Type
14	NEWID	Num	8	8	Patient Identification
1	REV	Num	8	0	Revision

**(06FEB04--13:54)**

*T3B form09*

<b>Variable</b>	<b>Label</b>	<b>Value</b>	<b>N</b>	<b>%</b>	<b>&lt;= 20</b>
REV	Revision	0	144	2.0	
		1	1619	22.1	
		2	5570	76.0	

*T3B form09*

<b>Variable</b>	<b>Label</b>	<b>Value</b>	<b>N</b>	<b>%</b>	<b>&lt;= 20</b>
FMTYP	Form Type	EC01	1468	20.0	
		EC02	1431	19.5	
		EC03	1423	19.4	
		EC04	1282	17.5	
		EC05	638	8.7	
		EC06	395	5.4	
		EC07	254	3.5	
		EC08	158	2.2	
		EC09	93	1.3	
		EC10	62	0.8	
		EC11	38	0.5	
		EC12	27	0.4	
		EC13	16	0.2	*
		EC14	10	0.1	*
		EC15	8	0.1	*
		EC16	3	0.0	*
		EC17	3	0.0	*
		EC18	3	0.0	*
		EC19	3	0.0	*
		EC20	2	0.0	*
		EC21	2	0.0	*
		EC22	2	0.0	*
		EC23	2	0.0	*
		EC24	2	0.0	*
		EC25	2	0.0	*
		EC26	2	0.0	*
		EC27	2	0.0	*
		EC28	1	0.0	*
		EC29	1	0.0	*
ECGUNK	f09q3: Time of ecg unknown	.	7112	97.0	
		1	221	3.0	

*T3B form09*

<b>Variable</b>	<b>Label</b>	<b>Value</b>	<b>N</b>	<b>%</b>	<b>&lt;= 20</b>
ECGTYPE2	f09q4: Type of ecg	.	1764	24.1	
		1	712	9.7	
		2	280	3.8	
		3	276	3.8	
		4	987	13.5	
		5	1102	15.0	
		6	1065	14.5	
		7	1147	15.6	
ECGTYPE	f09q4A: Type of ecg	.	5570	76.0	
		1	430	5.9	
		2	255	3.5	
		3	10	0.1	*
		4	220	3.0	
		5	244	3.3	
		6	261	3.6	
		7	341	4.7	
		8	2	0.0	*
ECGCHG	f09q4F1: Ischemic episode with ecg chg	.	6186	84.4	
		1	691	9.4	
		2	456	6.2	
ECGDOC	f09q4F1: Document ecg criteria	.	7068	96.4	
		1	177	2.4	
		2	88	1.2	
ECGRCHG	f09q4F2: Ischemic episode-resolved chg	.	6188	84.4	
		1	233	3.2	
		2	912	12.4	

*T3B form09*

<b>Variable</b>	<b>Label</b>	<b>Value</b>	<b>N</b>	<b>%</b>	<b>&lt;= 20</b>
ECGRSLV	f09q4F2: Resolved ecg changes	.	7068	96.4	
		1	48	0.7	
		2	217	3.0	
ECGOTHR	f09q4F3: other	.	6188	84.4	
		1	235	3.2	
		2	910	12.4	
ECGDIGIT	f09q5: Patient take digitalis	.	1	0.0	*
		1	469	6.4	
		2	6843	93.3	
		3	20	0.3	*

*T3B form09*

<b>Variable</b>	<b>Label</b>	<b>N</b>	<b>Mean</b>	<b>Std Dev</b>	<b>Minimum</b>	<b>Maximum</b>
FM09DYS	f09q2: Days to Form	7327	24.5	62.4	-5.0	878.0
ECGHR	f09q3HR: hour ecg taken	7111	11.0	4.8	0.0	24.0
ECGMIN	f09q3MN: minutes ecg taken	7111	27.5	17.8	0.0	59.0