

ID { WISE ID _____
Name Code _____

done

WISE

PHARMACOLOGIC ECG STRESS TEST

To be completed by Clinical Site (Do not include exercise stress tests)

1. Date of test ___/___/___ PHDAT
mm dd yy

2. WISE Study? 1 () Yes 0 () No PHWIS

3. Medications taken within 24 hours of study:

	Yes	No	Unknown
	1	0	2
3.1 Beta Blocker PHBET	()	()	()
3.2 Calcium Antagonist PHCAL	()	()	()
3.3 Nitrates PHNIT	()	()	()
3.4 ACE Inhibitors PHACE	()	()	()
3.5 Other Antihypertensive PHOTH	()	()	()
3.6 Digoxin PHDIG	()	()	()
3.7 Estrogen PHEST	()	()	()
3.8 Progesterone PHPRO	()	()	()
3.9 Diuretics PHDIU	()	()	()

4. Type of protocol: (Check only one) PHTPR

- () 1 IV Adenosine
- () 2 IV Persantin
- () 3 IV Dobutamine
- () 4 Other---> Specify: PHDOT

5. Indication for stopping test: (Check all that apply)

- () 1 Max HR achieved STMHR
- () 2 Chest pain STCP
- () 3 Obvious new wall motion abnormality STWA
- () 4 Hypotension (SBP \geq 20 mmHg less than baseline or absolute <90 mmHg) STHO
- () 5 Hypertension (SBP \geq 200 mmHg; DBP \geq 120 mmHg) STHY
- () 6 Sustained SVT STSTV
- () 7 VT or complex VEA STVT
- () 8 Maximum infusion rate STMIR
- STOT () 9 Other---> Specify: DHSOT
- () 10 Protocol completed
PHPC

6. Baseline heart rate PHBHR bpm
7. Maximum heart rate PHMHR bpm
8. % age predicted Maximum Heart Rate PH % HR
9. Baseline SBP PHBBP mmHg
10. Maximum SBP PHMBP mmHg
11. Symptoms at peak stress: (Check all that apply)

- 1 () Chest pain SYMCP
- 2 () Dyspnea SYMDY
- 3 () Fatigue SYMFA
- 4 () Lightheadedness SYMLH
- SYMOT 5 () Other--> Specify: PHSYO
- 6 () None
PHNOW

12. Baseline ECG (Check all that apply)

- 0 () Normal PHNOR
- 1 () LBBB PHLBB
- 2 () ST changes 2° LVH PHSTL
- 3 () ST changes 2° Dig PHSTD
- 4 () Nonspecific ST-T changes PHNST
- 5 () Other--> Specify: PHTHR
PHTXT

13. Maximum exercise-induced ST shift PHSTS mm
14. # Leads with ≥ 1 mm ST segment shift PHLEA
15. Person completing form PHPER