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| OPTIONAL: Local Event ID: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Did pt. receive chest compressions and/or defibrillation during this event? ❑ Yes ❑ No/Not Documented (Does NOT meet inclusion criteria) Where did the event occur? ❑ Out of hospital ❑ In-hospital  Did patient have subsequent cardiac arrest event(s) during the course of this hospitalization? ❑ Yes ❑ No/Not Documented Date/Time the need for chest compressions ( or defibrillation when initial rhythm was VF or Pulseless VT) was FIRST recognized: \_\_\_\_/\_\_\_\_/\_\_\_\_\_\_\_ \_\_\_\_:\_\_\_\_ ❑ Time Not DocumentedSystem Entry Date: \_\_\_\_/\_\_\_\_/\_\_\_\_\_\_\_ \_\_\_\_:\_\_\_\_ ❑ Time Not Documented |
| PCAC 2.1 Pre-Existing Conditions | *Pre-Event Tab* |
| Pre-existing Conditions at Time of Event (check all that apply):❑ None (review options below carefully) ❑ Acute CNS non-stroke event ❑ Acute stroke ❑ Baseline depression in CNS function ❑ Cardiac malformation/abnormality – acyanotic (pediatric and newborn/neonate only) ❑ Cardiac malformation/abnormality – cyanotic (pediatric and newborn/neonate only) ❑ Congenital malformation/abnormality (Non-Cardiac) (pediatric and newborn/neonate only) ❑ Congestive heart failure (this admission) ❑ Congestive heart failure (prior to this admission) ❑ Diabetes mellitus ❑ Hepatic insufficiency ❑ Hypotension/hypoperfusion ❑ Major trauma ❑ Metastatic or hematologic malignancy ❑ Metabolic/electrolyte abnormality ❑ Myocardial ischemia/infarction (this admission) ❑ Myocardial ischemia/infarction (prior to admit) ❑ Pneumonia ❑ Renal insufficiency ❑ Respiratory insufficiency ❑ Sepsis❑ Prior CPR Event  |
| PCAC 3.1 Cardiac Arrest Event  | *Event Tab* |
| Gender: Male Female UnknownDate/Time of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_\_\_\_ \_\_\_\_:\_\_\_\_Age at Event:\_\_\_\_\_\_\_ in years | months | weeks | days | hours | minutes ❑ Estimated? ❑ Age Unknown/Not Documented Event Witnessed? ❑ Yes ❑ No/Not Documented  Did patient receive chest compressions (includes open cardiac massage)? ❑ Yes ❑ No/Not Documented ❑ No, Per Advance DirectiveDate/Time compressions started : \_\_\_\_/\_\_\_\_/\_\_\_\_\_\_\_ \_\_\_\_:\_\_\_\_ ❑ Time Not DocumentedWas out of hospital CPR performed? ❑ Yes ❑ No ❑ Not DocumentedIf yes, out of hospital CPR performed first by: ❑ Healthcare provider/ EMS ❑ Layperson ❑ Not DocumentedCondition that best describes this event:❑ Patient was PULSELESS when need for chest compressions and/or need for defibrillation of initial rhythm VF/Pulseless VT was first identified❑ Patient had a pulse (poor perfusion) requiring chest compressions PRIOR to becoming pulseless❑ Patient had a pulse (poor perfusion) requiring chest compressions, but did NOT become pulseless at any time during this event  If pulseless at ANY time during event:Date/Time pulselessness was first identified: \_\_\_\_/\_\_\_\_/\_\_\_\_\_\_\_ \_\_\_\_:\_\_\_\_ ❑ Time Not Documented First documented pulseless rhythm: ❑ Asystole❑ Pulseless Electrical Activity (PEA)❑ Pulseless Ventricular Tachycardia❑ Ventricular Fibrillation (VF) ❑ Unknown/Not DocumentedTotal time patient without a pulse prior to CPR (in minutes): \_\_\_\_\_\_\_\_\_ ❑ Not DocumentedDuration of CPR (in minutes) : \_\_\_\_\_\_\_\_\_ ❑ Not DocumentedSustained Return of Spontaneous Circulation (ROSC) achieved? ❑ Yes ❑ No ❑ Not Documented  For out-of hospital events, ROSC attained? ❑ At scene ❑ En-route ❑ After arrival to hospital ❑ Not Documented Date/Time sustained ROSC *began* *(lasting > 20 min)* OR resuscitation efforts were terminated (End of event): \_\_\_\_/\_\_\_\_/\_\_\_\_\_\_\_ \_\_\_\_:\_\_\_\_ ❑ Time Not Documented ❑ Time Estimated  |

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| PCAC 4.1 Arrival Information | *Arrival Tab* |
| Arrival Date/Time \_\_\_/\_\_\_/\_\_\_\_\_\_ \_\_\_: \_\_\_\_ ❑ Time Not DocumentedWas patient transferred from another hospital? ❑ Yes ❑ NoNeurological assessment performed within 1-hr of ROSC? ❑ Yes ❑ No/Not Documented ❑ Neurological Assessment obtained at transferring facilityDate/Time of neurological assessment: \_\_\_\_/\_\_\_\_/\_\_\_\_\_\_\_ \_\_\_\_:\_\_\_\_ ❑ Time Not Documented ❑ Unknown/Not Documented

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Neurological Assessment Findings:

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| Pupils equal  | ❑ Yes  | ❑ No  | ❑ Not Documented |
| Are pupils fixed and dilated?  | ❑ Yes  | ❑ No  | ❑ Not Documented |
| Right pupil reaction  | ❑ Yes  | ❑ No  | ❑ Not Documented |
| Left pupil reaction | ❑ Yes  | ❑ No  | ❑ Not Documented |

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| Follows commands at time of initial assessment?  | ❑ Yes  | ❑ No  | ❑ Not Documented |

Glasgow Coma Scale (GCS) within 1-hr of ROSC: ❑ Unknown/Not Documented

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| --- | --- | --- | --- |
| Motor:  | \_\_\_\_\_\_\_ | ❑ Sedation/Paralytic  | ❑ Unknown/Not Documented  |
| Eye:  | \_\_\_\_\_\_\_ | ❑ Sedation/Paralytic  | ❑ Unknown/Not Documented  |
| Verbal:  | \_\_\_\_\_\_\_ | ❑ Sedation/Paralytic  | ❑ Unknown/Not Documented  |
| Total GCS:  | \_\_\_\_\_\_\_ | ❑ Sedation/Paralytic  | ❑ Unknown/Not Documented  |

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| PCAC 4.2 Targeted Temperature Management |  |
| Did you utilize targeted temperature management? ❑ Yes ❑ No ❑ Unknown/Not Documented  If yes, what was the targeted temperature (choose one)? ❑ ≤38.0 degrees Celsius ❑ ≤ 37.0 degrees Celsius❑ ≤ 36.0 degrees Celsius❑ ≤ 35.0 degrees Celsius❑ ≤ 34.0 degrees Celsius❑ ≤ 33.0 degrees Celsius❑ ≤ 32.0 degrees Celsius ❑ ≤ 31.0 degrees Celsius Temperature control method (select all that apply): ❑ Surface Cooling ❑ Cold IV Saline Bolus ❑ Intravascular device or catheter (continuous) ❑ Intranasal ❑Antipyretics ❑ Other ❑ NoneWhere was targeted temperature management initiated?❑ Pre-hospital (by EMS)❑ In-hospital (either at another hospital prior to transfer or in my hospital)❑ Unknown/Not documentedDate/Time targeted temperature management initiated: \_\_\_\_/\_\_\_\_/\_\_\_\_\_\_\_ \_\_\_\_:\_\_\_\_ ❑ Time Not Documented ❑ Unknown/Not DocumentedIf targeted temperature was ≤ 36.0 degrees CelsiusWas goal temperature met? ❑ Yes ❑ No ❑ Not DocumentedIf yes, Date/Time goal temperature met: \_\_\_\_/\_\_\_\_/\_\_\_\_\_\_\_ \_\_\_\_:\_\_\_\_ ❑ Time Not Documented ❑ Unknown/Not Documented Date/Time re-warming started? \_\_\_\_/\_\_\_\_/\_\_\_\_\_\_\_ \_\_\_\_:\_\_\_\_ ❑ Time Not Documented ❑ Unknown/Not DocumentedDate/Time re-warming completed? \_\_\_\_/\_\_\_\_/\_\_\_\_\_\_\_ \_\_\_\_:\_\_\_\_ ❑ Time Not Documented ❑ Unknown/Not DocumentedWas there a documented temperature of ≤ 31.0 degrees Celsius 6 hours after the initiation of the temperature controlled period? ❑ Yes ❑ No ❑ Not Documented Did patient receive a paralytic drug during induction? ❑ Yes ❑ No ❑ Not Documented *For patients that are not treated with targeted temperature management:* Clinical rationale documented by medical team why targeted temperature management was not initiated (check all that apply):❑ DNAR with limitation on technologic support❑ Awake, alert, following commands❑ Increased risk of bleeding❑ Pregnancy ❑ Hemodynamic instability❑ Limited life expectancy ❑ Poor functional status pre-arrest (including dementia) ❑ Facility does not routinely treat patients with targeted temperature management❑ Clinician preference❑ Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_❑ Unknown/Not Documented*For all patients:*Was there ever a documented temperature of ≥38 degrees Celsius? ❑ Yes ❑ No If yes, when was a temperature of ≥38 degrees Celsius documented? (check all that apply)❑ Day 1 🡪 Was patient following commands at time of fever ❑ Yes ❑ No ❑ Day 2 🡪 Was patient following commands at time of fever ❑ Yes ❑ No ❑ Day 3 🡪 Was patient following commands at time of fever ❑ Yes ❑ No Documented Adverse Events (check all that apply)❑ None❑ Bleeding requiring blood product transfusion❑ Skin breakdown ❑ Hemodynamically significant bradycardia, heart block, and/or pacemaker requirement❑ Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_❑ Not Documented  |
| PCAC 5.1 Measurements & Medications |  |
| If patient was transferred to your hospital, vital signs prior to transfer? ❑ Yes ❑ No/ Not Documented If yes, Date/Time of vital signs prior to transfer: \_\_\_\_/\_\_\_\_/\_\_\_\_\_\_\_ \_\_\_\_:\_\_\_\_ ❑ Time Not Documented ❑ Unknown/Not DocumentedVital signs prior to transfer:Temperature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ C | F ❑ Not documentedSite: Axillary | Bladder | Blood | Brain | Oral | Rectal | Surface (skin, temporal) | Tympanic | Other | Unknown/Not Documented

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| --- | --- |
| Heart Rate: \_\_\_\_\_\_\_\_\_\_ bpm  | ❑ Not Documented |
| Systolic BP: \_\_\_\_\_\_\_\_\_\_ mmHg  | ❑ Not Documented |
| Diastolic BP: \_\_\_\_\_\_\_\_\_ mmHg  | ❑ Not Documented |
| Respiratory Rate: \_\_\_\_\_\_\_\_\_\_\_\_\_\_ breaths/min | ❑ Not Documented |
|  Intubated or on mechanical ventilator?  Yes  No |  |
|  |  |
|   |  |
| Pulse Oximetry Saturation (SpO2): \_\_\_\_\_\_\_\_ % | ❑ Not Documented |

*Initial Measurements:* Initial Vital SignsDate/Time of initial vital sign measurements : \_\_\_\_/\_\_\_\_/\_\_\_\_\_\_\_ \_\_\_\_:\_\_\_\_ ❑ Time Not Documented ❑ Unknown/Not DocumentedTemperature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ C | F ❑ Not documentedSite: Axillary | Bladder | Blood | Brain | Oral | Rectal | Surface (skin, temporal) | Tympanic | Other | Unknown/not Documented

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| --- | --- |
| Heart Rate: \_\_\_\_\_\_\_\_\_\_ bpm  | ❑ Not Documented |
| Respiratory Rate: \_\_\_\_\_\_\_\_\_\_\_\_\_\_ breaths/min | ❑ Not Documented |
|  Intubated or on mechanical ventilator?  Yes  No |  |
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|  |  |
| Systolic BP: \_\_\_\_\_\_\_\_\_\_ mmHg  | ❑ Not Documented |
| Diastolic BP: \_\_\_\_\_\_\_\_\_ mmHg  | ❑ Not Documented |
| MAP: \_\_\_\_\_\_\_\_\_\_ mmHg  | ❑ Not Documented |
| Pulse Oximetry Saturation (SpO2): \_\_\_\_\_\_\_\_ % FiO2 at time SpO2 assessed: \_\_\_\_\_\_\_\_\_\_\_\_\_% | ❑ Not Documented |

*Initial Electrolytes (Post ROSC)*Date/Time of initial electrolyte & lab measurements: \_\_\_\_/\_\_\_\_/\_\_\_\_\_\_\_ \_\_\_\_:\_\_\_\_ ❑ Time Not Documented ❑ Unknown/Not Documented

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| Serum Creatinine: \_\_\_\_\_\_\_\_\_\_  | mg/dL | micromol/L |  |  Not documented |
| Bicarbonate/CO2: \_\_\_\_\_\_\_\_\_\_  | mmol/L | mEq/L |  |  Not documented |
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|  |  |  |  |
| Glucose : \_\_\_\_\_\_\_\_\_\_  | mg/dL |  |  Not documented |
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Date/Time of initial Lactate: \_\_\_\_/\_\_\_\_/\_\_\_\_\_\_\_ \_\_\_\_:\_\_\_ ❑ Time Not Documented ❑ Unknown/Not Documented

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| Lactate: \_\_\_\_\_\_\_\_\_\_  | mmol/L | mg/dL |  |  Not documented |

Date/Time of initial Troponin: \_\_\_\_/\_\_\_\_/\_\_\_\_\_\_\_ \_\_\_\_:\_\_\_ ❑ Time Not Documented ❑ Unknown/Not DocumentedTroponin: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ng/dL | mcg/L ❑ T ❑ I ❑ Not documented

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Date/Time of initial arterial blood gas measurements: \_\_\_\_/\_\_\_\_/\_\_\_\_\_\_\_ \_\_\_\_:\_\_\_\_  Time Not Documented  Unknown/Not DocumentedpH: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ❑ Not documented pCO2: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ mmHg ❑ Not documented Was there a pCO2 in the first 24 hours of <30 or >50mmHg? ❑ Yes ❑ No ❑ Not Documented 24hr <auto-pop> \_\_\_\_/\_\_\_\_/\_\_\_\_\_\_\_ \_\_\_\_:\_\_\_paO2: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ mmHg ❑ Not documentedWas there a PaO2 in the first 24 hours of >300mmHg?  Yes  No  Not Documented 24hr <auto-pop> \_\_\_\_/\_\_\_\_/\_\_\_\_\_\_\_If yes, FiO2 at time PaO2 assessed: %Was there a PaO2 in the first 24 hours of <60mmHg?  Yes  No  Not Documented 24hr <auto-pop> \_\_\_\_/\_\_\_\_/\_\_\_\_\_\_\_If yes, FiO2 at time PaO2 assessed: %Is there documentation that Central Venous Saturation (ScvO2) or mixed venous saturation was tracked within the first 24 hours? `❑ Yes ❑ No ❑ Not Documented***Serial Measurements***6hr post ROSC: Date/Time: <auto-pop> \_\_\_\_/\_\_\_\_/\_\_\_\_\_\_\_ \_\_\_\_:\_\_\_ ❑ Patient did not survive 6hr post ROSC❑ Not Documented (6hr post ROSC measurements Not Documented)

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| Lactate: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ mmol/L | mg/dL  | ❑ Not Documented |
| Glucose: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ mg/dL  | ❑ Not Documented |

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| MAP: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ mmHg  | ❑ Not Documented |

Did patient receive any sedatives in the 0-6 hour time period post ROSC? ❑ Yes ❑ No ❑ Not Documented ❑ None-ContraindicatedDid patient receive any paralytics in the 0-6 hour time period post ROSC? ❑ Yes ❑ No ❑ Not Documented ❑ None-Contraindicated24hr post ROSC: Date/Time: <auto-pop> \_\_\_\_/\_\_\_\_/\_\_\_\_\_\_\_ \_\_\_\_:\_\_\_ ❑ Patient did not survive 24hr post ROSC❑ Not Documented (24hr post ROSC measurements Not Documented)

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| Lactate: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ mmol/L | mg/dL  | ❑ Not Documented |
| Glucose: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ mg/dL  | ❑ Not Documented |
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| MAP: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ mmHg  | ❑ Not Documented |

Did patient receive any sedatives in the 6-24 hour time period post ROSC? ❑ Yes ❑ No ❑ Not Documented ❑ None-ContraindicatedDid patient receive any paralytics in the 6-24 hour time period post ROSC? ❑ Yes ❑ No ❑ Not Documented ❑ None-ContraindicatedDid patient receive any sedatives in the 24-48 hour time period post ROSC? ❑ Yes ❑ No ❑ Not Documented ❑ None-ContraindicatedDid patient receive any paralytics in the 24-48 hour time period post ROSC? ❑ Yes ❑ No ❑ Not Documented ❑ None-ContraindicatedDid patient receive any sedatives in the 48-72 hour time period post ROSC? ❑ Yes ❑ No ❑ Not Documented ❑ None-ContraindicatedDid patient receive any paralytics in the 48-72 hour time period post ROSC? ❑ Yes ❑ No ❑ Not Documented ❑ None-Contraindicated***Serial Blood Pressure Measurements*** Enter lowest Systolic BP for each of the following time periods:Hours 0-6 post ROSCDate/Time: <auto-pop time: 0hr> \_\_\_\_/\_\_\_\_/\_\_\_\_\_\_\_ \_\_\_\_:\_\_\_ Date/Time: <auto-pop time: 6hr> \_\_\_\_/\_\_\_\_/\_\_\_\_\_\_\_ \_\_\_\_:\_\_\_❑ Patient did not survive 6hr post ROSCSystolic BP: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ mmHg ❑ Not documentedWere there at least two consecutive systolic blood pressure readings of <90mmHg separated by at least one hour in the first 0-6 hours post ROSC?  Yes  No  Not DocumentedMAP: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ mmHg ❑ Not DocumentedSelect all vasopressors/inotropes patient was on during the first 0-6 hours post ROSC: ❑ None

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| ❑ Epinephrine (adrenaline) | ❑ dobutamine (Dobutrex) | ❑ dopamine |  |
| ❑ isoproterenol (Isuprel) | ❑ milrinone (Primacor) | ❑ noradrenaline (norepinephrine (Levophed)) |  |
| ❑ phenyelphrine (NeoSynephrine) | ❑ vasopressin (Pitressin) |  |  |

Hours 6-24 post ROSCDate/Time: <auto-pop time: 6hr> \_\_\_\_/\_\_\_\_/\_\_\_\_\_\_\_ \_\_\_\_:\_\_\_ Date/Time: <auto-pop time: 24hr> \_\_\_\_/\_\_\_\_/\_\_\_\_\_\_\_ \_\_\_\_:\_\_\_❑ Patient did not survive 24hr post ROSCSystolic BP: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ mmHg ❑ Not documentedWere there at least two consecutive systolic blood pressure readings of <90mmHg separated by at least one hour in the 6-24 hours post ROSC?  Yes  No  Not DocumentedMAP: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ mmHg ❑ Not DocumentedSelect all vasopressors/inotropes patient was on during hours 6-24 post ROSC:❑ None

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| ❑ Epinephrine (adrenaline) | ❑ dobutamine (Dobutrex) | ❑ dopamine |  |
| ❑ isoproterenol (Isuprel) | ❑ milrinone (Primacor) | ❑ noradrenaline (norepinephrine (Levophed)) |  |
| ❑ phenyelphrine (NeoSynephrine) | ❑ vasopressin (Pitressin) |  |  |

Hours 24-48 post ROSCDate/Time: <auto-pop time: 24hr> \_\_\_\_/\_\_\_\_/\_\_\_\_\_\_\_ \_\_\_\_:\_\_\_ Date/Time: <auto-pop time: 48hr> \_\_\_\_/\_\_\_\_/\_\_\_\_\_\_\_ \_\_\_\_:\_\_\_❑ Patient did not survive 48hr post ROSCSystolic BP: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ mmHg ❑ Not documentedSelect all vasopressors/inotropes patient was on during hours 24-48 post ROSC:❑ None

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| ❑ ❑ Epinephrine (adrenaline) | ❑ dobutamine (Dobutrex) | ❑ dopamine |  |
| ❑ isoproterenol (Isuprel) | ❑ milrinone (Primacor) | ❑ noradrenaline (norepinephrine (Levophed)) |  |
| ❑ phenyelphrine (NeoSynephrine) | ❑ vasopressin (Pitressin) |  |  |

Hours 48-72 post ROSCDate/Time: <auto-pop time: 48hr> \_\_\_\_/\_\_\_\_/\_\_\_\_\_\_\_ \_\_\_\_:\_\_\_ Date/Time: <auto-pop time: 72hr> \_\_\_\_/\_\_\_\_/\_\_\_\_\_\_\_ \_\_\_\_:\_\_\_❑ Patient did not survive 72hr post ROSCSystolic BP: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ mmHg ❑ Not documented Select all vasopressors/inotropes patient was on during hours 48-72 post ROSC:❑ None

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| ❑ ❑ Epinephrine (adrenaline) | ❑ dobutamine (Dobutrex) | ❑ dopamine |  |
| ❑ isoproterenol (Isuprel) | ❑ milrinone (Primacor) | ❑ noradrenaline (norepinephrine (Levophed)) |  |
| ❑ phenyelphrine (NeoSynephrine) | ❑ vasopressin (Pitressin) |  |  |

Did patient receive any anticonvulsants in the 0-72 hour time period post ROSC? ❑ Yes ❑ No ❑ Not Documented |
| PCAC 5.2 Clinical Study Data |  |
| Was a 12-lead ECG performed? ❑ Yes ❑ No/Not documentedECG interpretation (check all that apply): ❑ STEMI❑ Ischemic changes (not a STEMI)❑ New Left Bundle Branch Block (BBB)❑ Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ❑ Unknown/Not Documented Did patient go to the cath lab at any time during this admission?  ❑ Yes  ❑ No/Not Documented Date/Time at cath lab: \_\_\_\_/\_\_\_\_/\_\_\_\_\_\_\_ \_\_\_\_:\_\_\_\_ ❑ Time Not DocumentedReason went to cath lab: ❑ ST elevation❑ Cardiogenic shock❑ VF arrest❑ Abnormal ECG (not including STEMI)❑ Elevated cardiac enzymes❑ Routine cath post arrest❑ New BBB❑ Focal wall motion abnormality on echocardiogram❑ Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ❑ Unknown/Not Documented Cath lab interventions:❑ Stent/PCI❑ Balloon pump❑ LVAD❑ No intervention❑ Other❑ Unknown/Not Documented Date/Time of cath lab intervention: \_\_\_\_/\_\_\_\_/\_\_\_\_\_\_\_ \_\_\_\_:\_\_\_\_ ❑ Time Not DocumentedICD placed during this admission? ❑ Yes ❑ No/Not DocumentedWas an Echo performed? ❑ Yes ❑ No/Not DocumentedDate/Time of FIRST Echo: \_\_\_\_/\_\_\_\_/\_\_\_\_\_\_\_ \_\_\_\_:\_\_\_\_ ❑ Time Not DocumentedFIRST Echo Findings: LVEF: \_\_\_\_\_\_\_\_ ❑ LVEF Not DocumentedHead CT performed? ❑ Yes ❑ No/Not DocumentedDate/Time of initial head CT: \_\_\_\_/\_\_\_\_/\_\_\_\_\_\_\_ \_\_\_\_:\_\_\_\_ ❑ Time Not DocumentedHead CT findings:❑ Normal❑Cerebral edema❑ Intracranial hemorrhage❑ Herniation❑ Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ❑ Unknown/Not Documented Cerebral MRI performed? ❑ Yes ❑ No/Not DocumentedDate/Time of initial MRI: \_\_\_\_/\_\_\_\_/\_\_\_\_\_\_\_ \_\_\_\_:\_\_\_\_ ❑ Time Not DocumentedEEG performed within the first 24 hours post ROSC? ❑ Yes ❑ No/Not documented If EEG performed, was there evidence of any seizure activity? ❑ Yes ❑ No/Not documented If evidence of seizure activity, was there evidence of Status Epilepticus (sustained seizures)? ❑ Yes ❑ No/Not documented If yes, was an anticonvulsant administered? ❑ Yes ❑ No/Not documented  |
| PCAC 6.1 Outcome Data |  |
| Did patient survive to hospital discharge?❑ Yes, patient lived❑ No, patient diedDate/Time of discharge from ICU: \_\_\_\_/\_\_\_\_/\_\_\_\_\_\_\_ \_\_\_\_:\_\_\_\_ ❑ Time Not Documented ❑ Patient was not discharged from ICUDid patient ever follow commands?❑ Yes❑ No❑ Not DocumentedDate/Time of first documented following of commands: \_\_\_\_/\_\_\_\_/\_\_\_\_\_\_\_ \_\_\_\_:\_\_\_\_ ❑ Time Not DocumentedDischarge Modified Rankin Scale: \_\_\_\_\_\_\_ ❑ Not Documented

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| Modified Rankin Scale | ❑ 0 – No symptoms at all❑ 1 – No significant disability despite symptoms: ability to carry out all usual activities❑ 2 – Slight disability❑ 3 – Moderate disability: Requiring some help but able to walk without assistance❑ 4 – Moderate to severe disability: Unable to walk without assistance and unable to attend to own bodily needs without assistance❑ 5 - Severe disability: Bedridden, incontinent and requiring constant nursing care and attention❑ 6 - Death |

 |
| Comments \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| Field 1 | Field 2 |
| Field 3 | Field 4 |
| Field 5 | Field 6 |
| Field 7 | Field 8 |
| Field 9 | Field 10 |
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