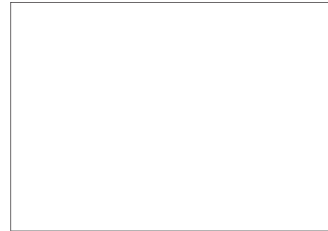




# Revascularization AUC Data Reporting Sheet

Patient Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Medical Record #: \_\_\_\_\_



## Patient Information

- CCS IV (Inability to carry on any physical activity without discomfort)
- Maximal Medical Therapy (2 or more classes of medications)
- No non-invasive testing performed
- Previous CABG

Data reporting sheet provided by:

**SCAI-QIT Cath Lab Guidelines & Appropriate Use Criteria App**

App available at:

[www.SCAI-QIT.org](http://www.SCAI-QIT.org)

## Native 3V-CAD, failure of multiple grafts, depressed LVEF, patent LIMA graft

- ☐ **A** CABG: Indication: 68; Score: 7
- ☐ **U** PCI: Indication: 68; Score: 6

## Native 3V-CAD, failure of multiple grafts, depressed LVEF, nonfunctional LIMA graft

- ☐ **U** CABG: Indication: 69; Score: 6
- ☐ **A** PCI: Indication: 69; Score: 8

## Compiled By:

\_\_\_\_\_  
Date/Time: \_\_\_\_\_

Signature: \_\_\_\_\_

## Operating Physician:

Operating Physician Comments:

\_\_\_\_\_  
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\_\_\_\_\_  
\_\_\_\_\_

Date/Time: \_\_\_\_\_

Signature: \_\_\_\_\_

## Confirming Physician / Interventionalist:

Comments:

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Date/Time: \_\_\_\_\_

Signature: \_\_\_\_\_

