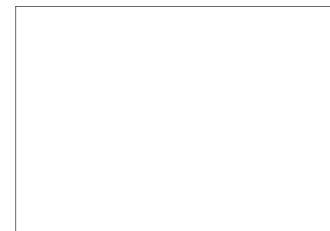




# Revascularization AUC Data Reporting Sheet

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

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



## Patient Information

- UA/NSTEMI and low-risk features (e.g., TIMI score  $\leq 2$ ) for short-term risk of death or nonfatal MI
- Revascularization of multiple coronary arteries when the culprit artery cannot clearly be determined

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)

**A**

**Indication: 12; Score: 9**

## Compiled By:

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

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

## Operating Physician:

Operating Physician Comments:

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

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

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

## Confirming Physician / Interventionalist:

Comments:

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

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

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

