STS/ACC TVT Registry™
An initiative of the STS National Database and the ACC's NCDR

The Society of Thoracic Surgeons | AMERICAN COLLEGE of CARDIOLOGY

STS/ACC TVT Registry™ v2.0
For Transcatheter Aortic Valve Replacement Procedures

A. Demographics

Last Name[2000]:	First Name[2010]:	Middle Name[2020]:
SSN[2030]: - - o SSN N/A[2031]	Patient ID[2040]: (auto)	Other ID[2045]:
Birth Date[2050]: mm / dd / yyyy	Sex[2060]: O Male O Female	Hispanic or Latino Ethnicity[2076]: O No O Yes

Race: (check all that apply)
o White[2070] o Black/African American[2071] o Asian[2072]
o American Indian/Alaskan Native[2073] o Native Hawaiian/Pacific Islander[2074]

B. Episode of Care

Arrival Date/Time[3000,3001]: mm / dd / yyyy HH:MM

Insurance Payors: (check all that apply)
o Private Health Insurance[3005] o Medicare[3006] o Medicaid[3007] o Military Health Care[3008]
o State-Specific Plan (non-Medicaid)[3009] o Indian Health Service[3010] o Non-US Insurance[3011] o None[3012]

HIC[3015]: | Research Study[3030]: O No O Yes →If Yes, Study Patient ID[3032]:

C. History and Risk Factors (patient history and risk factors up to the procedure)

Cardiac History

Infective Endocarditis[4000]: O No O Yes
→If Yes, Infective Endocarditis Type[4005]: O Treated O Active

Permanent Pacemaker[4010]: O No O Yes
→If Yes, Previous Pacer Date[4012]: mm / dd / yyyy

Previous ICD[4015]: O No O Yes

Prior PCI[4020]: O No O Yes
→If Yes, Most Recent PCI Date[4025]: mm / dd / yyyy

Prior CABG[4030]: O No O Yes
→If Yes, Most Recent CABG Date[4035]: mm / dd / yyyy

Prior Other Cardiac Surgery[4040]: O No O Yes

Previous Cardiac Surgeries[4055]: O 0 O 1 O 2 O 3 O >=4

Prior Aortic Valve Procedure[4060]: O No O Yes
→If Yes, Most Recent AV Procedure Date[4065]: mm / dd / yyyy
→If Yes, AV Replacement – Surgical[4070]: O No O Yes
→If Yes, AV Type[4075]: O Bioprosthetic stented O Bioprosthetic stentless O Not Documented
→If Yes, AV Model ID[4078]: Refer to Device List
→If Yes, AV Repair – Surgical[4080]: O No O Yes
→If Yes, AV Balloon Valvuloplasty[4085]: O No O Yes
→If Yes, AV Transcatheter Valve Replacement[4090]: O No O Yes
→If Yes, AV Transcath Valve Model ID[4092]: Refer to Device List
→If Yes, AV Transcatheter Valve Intervention[4091]: O No O Yes

Prior Non-Aortic Valve Procedure[4095]: O No O Yes
→If Yes, MV Replacement – Surgical[4100]: O No O Yes
→If Yes, MV Type[4105]: O Mechanical O Bioprosthetic stented O Bioprosthetic stentless O Not Documented
→If Yes, MV Repair – Surgical[4110]: O No O Yes

Other History and Risk Factors

Prior Stroke[4120]: O No O Yes
→If Yes, Most Recent Stroke Date[4125]: mm / dd / yyyy

Transient Ischemic Attack[4130]: O No O Yes

Carotid Stenosis[4135]: O None O Right O Left O Both O N/A

→If Right, Left or Both, Prior CEA/CAS[4140]: O No O Yes
→If R or B, Rt Carotid Severity[4141](%): O 50-79 O 80-99 O 100 O N/A
→If L or B, Lt Carotid Severity[4142](%): O 50-79 O 80-99 O 100 O N/A

Peripheral Arterial Disease[4145]: O No O Yes

Current/Recent Smoker[4150]: (<1 Year) O No O Yes

Hypertension[4155]: O No O Yes

Diabetes Mellitus[4165]: O No O Yes
→If Yes, Diabetes Therapy[4170]: O None O Diet O Oral O Insulin O Other

Currently on Dialysis[4175]: O No O Yes

Chronic Lung Disease[4180]: O None O Mild O Moderate O Severe

Home Oxygen[4181]: O No O Yes

Hostile Chest[4182]: O No O Yes

Immunocompromise Present[4185]: O No O Yes

D. PRE-PROCEDURE STATUS (COMPLETE FOR THE PROCEDURE)

CAD Presentation[5000]: O No Sxs, no angina *(14 days)* O Sx unlikely to be ischemic *(14 days)* O Stable angina *(42 days)*
O Unstable angina *(60 days)* O Non-STEMI *(7 days)* O STEMI *(7 days)*

Prior MI[5005]: O No O Yes →If Yes, Prior MI Timeframe[5010]: O < 30 Days O >= 30 days

Heart Failure w/in 2 Weeks[5020]: O No O Yes

NYHA Class w/in 2 Weeks[5025]: O I O II O III O IV

Cardiogenic Shock w/in 24 Hours[5030]: O No O Yes

Cardiac Arrest w/in 24 Hours[5035]: O No O Yes

Cardiac Procedure w/in 30 Days[5040]: O No O Yes

Porcelain Aorta[5045]: O No O Yes

Conduction Defect[5055]: O No O Yes

Five Meter Walk Test[5085]: O Not performed O Yes O Unable to walk
→If Yes, Time 1[5090]: _ seconds
→If Yes, Time 2[5095]: _ seconds
→If Yes, Time 3[5100]: _ seconds

STS Risk Score[5105]: %:

Atrial Fibrillation/Flutter[5050]: O No O Yes
→If Yes, AF Class w/in past 30 days[5052]: O None O Persistent O Paroxysmal

KCCQ-12 Performed[5169]: O No O Yes
→If Yes, KCCQ-12[5170-5181]: Q1a: _ Q1b: _ Q1c: _ Q2: _ Q3: _ Q4: _
(See separate questionnaire) Q5: _ Q6: _ Q7: _ Q8a: _ Q8b: _ Q8c: _

CLINICAL DATA (CLOSEST TO THE PROCEDURE)

Height[5200]: _ cm

Weight[5205]: _ kg

Hemoglobin[5250]: g/dL o Not Drawn[5251]

Creatinine[5255]: _ mg/dL o Not Drawn[5256]

Platelet Count[5260]: µL o Not Drawn[5261]

INR[5265]: _____ o Not Drawn[5266]

Albumin[5270]: g/dL o Not Drawn[5271]

Bilirubin[5275]: _ mg/dL o Not Drawn[5276]

FEV1 Predicted[5280]: % o Not Performed[5281]

DLCO (Adjusted)[5285]: _ % o Not Performed[5286]

MEDICATIONS (ADMINISTERED WITHIN 24 HOURS PRIOR TO THE PROCEDURE)

Anticoagulants[5400,5405](any): O No O Yes O Contraindicated O Blinded

Inotropes[5400,5405] (positive): O No O Yes O Contraindicated O Blinded

DIAGNOSTIC CATH FINDINGS / ECHOCARDIOGRAM FINDINGS

Diagnostic Cath[5500]: O No O Yes → If Yes, Diagnostic Cath Date[5505]: mm / dd / yyyy

Number of Diseased Vessels[5506]: O None O 1 O 2 O 3

Left Main Stenosis >=50%[5507]: O No O Yes

Proximal LAD >=70%[5508]: O No O Yes

Right Ventricular Systolic Pressure[5568]: (highest) _ mmHg

LVEF[5565]: _ % o LVEF Not Assessed[5566]

Left Vent Internal Systolic Dim[5595]: _ cm o Not Measured[5608]

Left Vent Internal Diastolic Dim[5600]: _ cm o Not Measured[5609]

Septal Wall Thickness[5605]: _ cm

Posterior Wall Thickness[5610]: cm

Left Atrial Volume[5606]: _ ml or LA Volume Index[5607]: _ mL/m2

AV Disease Etiology[5620]: O Degenerative O Endocarditis O Congenital O Rheumatic O Primary aortic disease
O LV outflow tract obstruction O Supravalvular aortic stenosis O Tumor O Trauma O Other

Aortic Insufficiency[5630]: (highest) O None O Trace/Trivial O 1+/Mild O 2+/Moderate O 3-4+/Severe

Valve Morphology[5640]: O Unicuspid O Bicuspid O Tricuspid O Quadracuspid O Uncertain

Annular Calcification[5645]: O No O Yes

AV Peak Velocity (CW)[5650]: _ m/s

AV Annulus Size[5655]: _ mm

→Annulus Size Assessment Method[5660]: O TTE O TEE O CTA O Angiography

DIAGNOSTIC CATH FINDINGS / ECHOCARDIOGRAM FINDINGS CONT'D

Aortic Stenosis[5665]: O No O Yes
→If Yes, AV Area[5670]: (smallest) _ cm^2
→If Yes, AV Mean Gradient[5675]: (highest) _ mmHg
→If Yes, AV Peak Gradient[5680]: (highest) _ mmHg

Mitral Valve Disease[5685]: O No O Yes
→If Yes, Mitral Insufficiency[5695]: (highest) O None O Trace/Trivial O 1+/mild O 2+/moderate O 3+/mod/severe O 4+/severe
→If Yes, Mitral Stenosis[5705]: O No O Yes
→If Yes, MV Area[5710]: (smallest) _ cm^2
→If Yes, MV Mean Gradient[5715]: (highest) _ mmHg

Tricuspid Insufficiency[5735]: (highest) O None O Trace/Trivial O Mild O Moderate O Severe

E. PROCEDURE INFORMATION

Procedures: o Transcatheter Aortic Valve Replacement[6600] o Transcatheter Mitral Valve Replacement[6601] o Mitral Leaflet Clip Procedure[6602]
Other Procedure Performed Concurrently[6620]: O No O Yes-PCI O Yes-Other

Operator A Name[6000,6005,6010]: Operator A NPI[6015]:
Operator B Name[6020,6025,6030]: Operator B NPI[6035]:
Procedure Start Date/Time[6040,6041]: mm / dd / yyyy HH:MM Procedure Stop Date/Time[6045,6046]: mm / dd / yyyy HH:MM

Procedure Location[6050]: O Hybrid OR Suite O Hybrid Cath Suite O CathLab O Other

Procedure Status[6055]: O Elective O Urgent O Emergency O Salvage

Primary Procedure Indication[6060]: O Primary AS O Primary AI O Mixed AS/AI O Failed Bioprosthetic Valve

Valve-in-Valve Procedure[6065]: O No O Yes →If Yes, Status[6070]: O Elective O Immediate intraprocedure

Operator Reason for Procedure[6071]: O Inoperable/Extreme Risk (technically inoperable, co-morbid or deconditioned patient)
O High risk (>=8% risk of 30 day mortality)
O Intermediate risk (4-7% risk of 30 day mortality)
O Low risk (<4% risk of 30 day mortality)

Evaluation of Suitability for Open AVR by Two Surgeons[6072]: O No O Yes

Procedure Aborted[6075]: O No O Yes
→If Yes, Reason[6080]: O Access related O Navigation Issue after successful access O Device/delivery system malfunction
O New clinical findings O Patient status O Consent Issue
O System issue O Other (not specified)

→If Yes, Action[6082]: O Balloon valvuloplasty O Rescheduled transcatheter procedure O Conversion to open heart surgery
O Converted to medical therapy O Converted to clinical trial O Other

Conversion to Open Heart Surgery[6085]: O No O Yes
→If Yes, Reason[6090]: O Valve dislodged to aorta O Valve dislodged to left ventricle O Ventricular rupture
O Annulus rupture O Aortic dissection O Coronary occlusion O Other

Mechanical Assist Device in Place at Start of Procedure[6095]: O No O Yes – IABP O Yes - Catheter-based assist device (Impella, Tandem Heart)

CardioPulmonary Bypass Used[6100]: O No O Yes
→If Yes, Status[6101]: O Elective O Emergent →If Yes, CPB Time[6105]: _ mins

Type of Anesthesia[6110]: O Moderate sedation O General anesthesia O Epidural O Combination

INTRA-PROCEDURE MEDICATIONS (ADMINISTERED DURING THE PROCEDURE)

Inotropes[6120,6125]: (positive) O No O Yes O Contraindicated O Blinded

DEVICE INFORMATION

Valve Sheath Access Site[6200]: O Femoral O Axillary O Transapical O Transaortic O Subclavian O Transiliac O Transseptal O Transcarotid O Other

Valve Sheath Access Method[6205]: O Percutaneous O Cutdown O Mini thoracotomy O Mini sternotomy O Other

Valve Sheath Delivery Size[6210]: French

Device 1 Used[6225]: Refer to Device List

Device 2 Used[6225]: Refer to Device List

Device Serial Number[6230]:
UDI[6236, 6237, 6238]: (future)

Device Implanted Successfully[6232]: O No O Yes

Device Success[6235]: O No O Yes

E. PROCEDURE INFORMATION – CONTINUED: POST IMPLANT

AV Gradient (mean)[6385]: mmHg

Calculated Aortic Valve Area[6395]: cm^2

Contrast Volume[6450]: ml

Radiation Dose Measurement Method[6455]: O Single Plane O Biplane

→Fluoroscopy Time[6460]: minutes

→Cumulative Air Kerma[6465]: mGy

→Dose Area Product[6470]: →DAP Units[6475]: O Gy-cm2 O cGy-cm2 O mGy-cm2 O µGy-M2

F. ADVERSE EVENTS, INTERVENTIONS AND SURGICAL PROCEDURES (SPECIFY THE EVENT DATE FOR EACH EVENT OCCURRENCE.)

Intra or Post Procedure Events Occurred[7300]: O No O Yes →If Yes, specify the Event[7301] and Event Date(s)[7302]:

Myocardial Infarction[E059]: mm / dd / yyyy	Bleeding at Access Site[E017]: mm / dd / yyyy
Coronary Compression or Obstruction[E002]: mm / dd / yyyy	Hematoma at Access Site[E018]: mm / dd / yyyy
Endocarditis[E003]: mm / dd / yyyy	Retroperitoneal Bleeding[E019]: mm / dd / yyyy
Conduction/Native Pacer Disturbance Req Pacer[E039]: mm / dd / yyyy	GI Bleed[E020]: mm / dd / yyyy
Conduction/Native Pacer Disturbance Req ICD[E040]: mm / dd / yyyy	GU Bleed[E021]: mm / dd / yyyy
Cardiac Arrest[E005]: mm / dd / yyyy	Other Bleed[E022]: mm / dd / yyyy
Atrial Fibrillation[E006]: mm / dd / yyyy	Device Migration[E023]: mm / dd / yyyy
Annular Dissection[E007]: mm / dd / yyyy	Device Embolization Left Ventricle[E024]: mm / dd / yyyy
Aortic Dissection[E008]: mm / dd / yyyy	Device Embolization Aorta[E025]: mm / dd / yyyy
Perforation with or w/o Tamponade[E009]: mm / dd / yyyy	Device Recapture or Retrieval[E026]: mm / dd / yyyy
Transient Ischemic Attack[E010]: (complete Adjudication) mm / dd / yyyy	Device Thrombosis[E027]: mm / dd / yyyy
Ischemic Stroke[E011]: (complete Adjudication) mm / dd / yyyy	Other Device Related Event[E028]: mm / dd / yyyy
Hemorrhagic Stroke[E012]: (complete Adjudication) mm / dd / yyyy	New Requirement for Dialysis[E029]: mm / dd / yyyy
Undetermined Stroke[E013]: (complete Adjudication) mm / dd / yyyy	Aortic Valve Re-intervention[E030]: (complete Adjudication) mm / dd / yyyy
Transapical Related Event[E014]: mm / dd / yyyy	Unplanned Other Cardiac Surgery or Intervention[E031]: (not AVR or PCI) mm / dd / yyyy
Transaortic Related Event[E015]: mm / dd / yyyy	Unplanned Vascular Surgery or Intervention[E032]: mm / dd / yyyy (for Bleeding or Access Site Complication)
Major Vascular Complication[E041]: mm / dd / yyyy	
Minor Vascular Complication[E042]: mm / dd / yyyy	PCI[E033]: mm / dd / yyyy

G. Post-Procedure Labs and Tests

Lowest Hemoglobin[8040]: _ g/dL o Not Drawn[8041]

Highest Creatinine[8050]: _ mg/dL o Not Drawn[8051]

Discharge Creatinine[8055]: _ mg/dL o Not Drawn[8056]

12-Lead ECG Findings[8060]: O Not performed O No significant changes O New pathological Q-wave or LBBB

Echocardiogram[8065]: O Not Performed O Yes - TTE O Yes - TEE

→If TTE, TEE, Date[8070]: mm / dd / yyyy

→If TTE, TEE, Mitral Regurgitation[8075]: O None O Trace/Trivial O 1+/mild O 2+/moderate O 3+/mod/severe O 4+/severe

→If TTE, TEE, Aortic Stenosis[8080]: O No O Yes

→If TTE, TEE, AV Area[8085]: (smallest) _ cm^2

→If TTE, TEE, AV Peak Doppler Velocity[8086]: _ m/sec

→If TTE, TEE, Mean Gradient[8090]: (highest) _ mmHg

→If TTE, TEE, Aortic Insufficiency Severity[8095]: O None O Trace/Trivial O 1+/Mild O 2+/Moderate O 3-4+/Severe

→If Trace/Trivial, Mild, Moderate, or Severe Perivalvular Severity[8106]: O None O Mild O Moderate O Severe O Not documented

→If Trace/Trivial, Mild, Moderate, or Severe Central Severity[8107]: O None O Mild O Moderate O Severe O Not documented

H. Discharge (Complete for each episode of care)

RBC/Whole Blood Transfusion[9011]: O No O Yes

Note: Code the total # of units between start of the procedure and discharge

→If Yes, # Units Transfused[9012]: _

Number of Hours in ICU[9040]: _

Discharge Date[9045]: mm / dd / yyyy

Discharge Status[9050]: O Alive O Deceased

→If Alive, Discharge Location[9055]: O Home O Extended care/TCU/rehab O Other acute care hospital O Nursing home O Hospice O Other O Left against medical advice (AMA)

→If Deceased, Death in Lab/OR[9060]: O No O Yes

→If Deceased, Primary Cause of Death[9065]: O Cardiac O Neurologic O Renal O Vascular O Infection O Valvular O Pulmonary O Unknown O Other

Discharge Medications (Discharge medications are not required for patients who expired or were discharged to 'Other acute care hospital', 'Hospice', or 'AMA')

ACE Inhibitor[9100,9105]: (any)	O No	O Yes	O Contraindicated	O Blinded
Warfarin[9100,9105]:	O No	O Yes	O Contraindicated	O Blinded
ARB[9100,9105]: (any)	O No	O Yes	O Contraindicated	O Blinded
Aspirin[9100,9105]: (any)	O No	O Yes	O Contraindicated	O Blinded
Dabigatran[9100,9105]:	O No	O Yes	O Contraindicated	O Blinded
Beta Blocker[9100,9105]: (any)	O No	O Yes	O Contraindicated	O Blinded
Antiarrhythmics[9100,9105]: (any)	O No	O Yes	O Contraindicated	O Blinded
P2Y12[9100,9105]: (any)	O No	O Yes	O Contraindicated	O Blinded
Factor Xa inhibitor[9100,9105]: (any)	O No	O Yes	O Contraindicated	O Blinded

I. FOLLOW-UP (30 DAYS, 1 YEAR FROM DATE OF PROCEDURE)

Last Name[2000]: First Name[2010]: Patient ID[2040]:

Reference Procedure Start Date[6040]: mm / dd / yyyy Other ID[2045]: Study Patient ID[3032]: (optional)

Assessment Date[10000]: mm / dd / yyyy (If the patient has not been discharged at 30 days, capture the 30 day F/U while still in the facility.)

Primary Method to Determine Status[10005]: O Clinic O Medical record O Letter from medical provider O Phone call to patient/family O Social Security death master file O Other

Status[10010]: O Alive O Deceased O Lost to follow-up O Withdrawn

→If Deceased, Primary Cause of Death[10015]: O Cardiac O Neurologic O Renal O Vascular O Infection O Valvular O Pulmonary O Unknown O Other

→If Deceased, Date of Death[10020]: mm / dd / yyyy

Hemoglobin[10085]: g/dL o Not Drawn[10086]

Creatinine[10090]: mg/dL o Not Drawn[10091]

NYHA Classification at Follow-up[10100]: O I O II O III O IV

Five Meter Walk[10135]: O Not performed O Yes O Unable to walk →If Yes, Time 1[10140]: sec Time 2[10145]: sec Time 3[10150]: sec

12-Lead ECG Findings[10155]: O Not performed O No significant changes O New changes noted

→If New changes noted, ECG Changes Noted[10160]: O Pathological Q-wave or LBBB O Arrhythmia O Both

Echocardiogram[10206]: O Not Performed O Yes - TTE O Yes - TEE →If TTE, TEE, Date[10207]: mm / dd / yyyy

→If TTE, TEE, LVEF[10210]: % o LVEF Not Assessed[10211]

→If TTE, TEE, Mean Gradient[10215]: (highest) _ mmHg

→If TTE, TEE, Aortic Insufficiency Severity[10220]: O None O Trace/Trivial O 1+/Mild O 2+/Moderate O 3-4+/Severe

→If Trace/Trivial, Mild, Moderate, or Severe Perivalvular Severity[10225]: O None O Mild O Moderate O Severe O Not documented

→If Trace/Trivial, Mild, Moderate, or Severe Central Severity[10227]: O None O Mild O Moderate O Severe O Not documented

KCCQ-12 Performed[10230]: O No O Yes

→If Yes, KCCQ-12[10231-10242]: (See separate questionnaire) Q1a: Q1b: Q1c: Q2: Q3: Q4: _

Q5: Q6: Q7: Q8a: Q8b: Q8c: _

I. Follow-Up CONT'D (30 days, 1 Year from date of Procedure)

Adverse Events, Readmissions, Interventions and Surgical Procedures (Specify the event date for each Event that occurred between discharge and 30-day F/U, or between F/U assessment date #1 and F/U assessment date #2.)

Follow-Up Event(s) Occurred[10245]: O No O Yes →If Yes, specify the Event[10246] and Event Date(s)[10247]:

Myocardial Infarction[E059]: mm / dd / yyyy	Aortic Valve Re-intervention[E030]: (complete Adjudication) mm / dd / yyyy
Endocarditis[E003]: mm / dd / yyyy	Unplanned Other Cardiac Surgery or Intervention[E031]: (not AVR or PCI) mm / dd / yyyy
Conduction/Native Pacer Disturbance Req Pacer[E039]: mm / dd / yyyy	Unplanned Vascular Surgery or Intervention[E032]: mm / dd / yyyy (for Bleeding or Access Site Complication)
Conduction/Native Pacer Disturbance Req ICD[E040]: mm / dd / yyyy	PCI[E033]: mm / dd / yyyy
Transient Ischemic Attack[E010]: (complete Adjudication) mm / dd / yyyy	Valve Related Readmission[E034]: mm / dd / yyyy
Ischemic Stroke[E011]: (complete Adjudication) mm / dd / yyyy	Non-Valve Related Readmission[E035]: mm / dd / yyyy
Hemorrhagic Stroke[E012]: (complete Adjudication) mm / dd / yyyy	Major Vascular Complication[E041]: mm / dd / yyyy
Undetermined Stroke[E013]: (complete Adjudication) mm / dd / yyyy	Minor Vascular Complication[E042]: mm / dd / yyyy
Device Fracture[E038]: mm / dd / yyyy	Transapical Related Event[E014]: mm / dd / yyyy
Device Thrombosis[E027]: mm / dd / yyyy	Major Bleeding Event[E043]: mm / dd / yyyy
New Requirement for Dialysis[E029]: mm / dd / yyyy	Life Threatening Bleeding[E037]: mm / dd / yyyy

Follow-Up Medications (medications prescribed or taken at the time of follow-up)

ACE Inhibitor[10250,10255]: O No O Yes O Contraindicated O Blinded	Beta Blocker[10250,10255]: O No O Yes O Contraindicated O Blinded
Warfarin[10250,10255]: O No O Yes O Contraindicated O Blinded	Antiarrhythmics[10250,10255]: O No O Yes O Contraindicated O Blinded
ARB[10250,10255]: O No O Yes O Contraindicated O Blinded	P2Y12[10250,10255]: (any) O No O Yes O Contraindicated O Blinded
Aspirin[10250,10255]: O No O Yes O Contraindicated O Blinded	Factor Xa inhibitor[10250,10255] O No O Yes O Contraindicated O Blinded
Dabigatran[10250,10255]: O No O Yes O Contraindicated O Blinded	

J. ADJUDICATION FORM (COMPLETE FOR EACH ISCHEMIC, HEMORRHAGIC, UNDETERMINED STROKE, TIA OR AORTIC VALVE RE-INTERVENTION)

Last Name[2000]: First Name[2010]: Patient ID[2040]:

Reference Procedure Start Date[6040]: mm / dd / yyyy Other ID[2045]: Study Patient ID[3032]: (optional)

Adjudication Event[12000]:

O Ischemic Stroke(In-hospital) O Hemorrhagic Stroke(In-hospital) O Undetermined Stroke(In-hospital) O TIA(In-hospital) O Aortic Valve Re-intervention(In-hospital)

O Ischemic Stroke(F-U) O Hemorrhagic Stroke(F-U) O Undetermined Stroke(F-U) O TIA(F-U) O Aortic Valve Re-intervention(F-U)

Event Date[12005]: mm / dd / yyyy

Status[12010]: O Alive O Deceased →If Deceased, Date of Death[12011]: mm / dd / yyyy

→If Event[12000] = Stroke or TIA

Date of Symptom Onset[12015]: (approximate) mm / dd / yyyy

Neurologic Deficit with Rapid Onset[12020]: O No O Yes

→If Yes, Clinical Presentation[12025]: O Stroke/TIA O Non-Stroke

→If Stroke/TIA, Symptom Duration ≥ 24 hours[12030]: O No O Yes

→If Stroke/TIA, Neuroimaging Performed[12040]: O No O Yes

→If Yes, Deficit Type[12045]: O No deficit O Infarction O Hemorrhage O Both (hem/infarc) O Subarachnoid Hemorrhage

→If Stroke/TIA, Neurologist/Neurosurgeon Confirmation of Diagnosis[12055]: O No O Yes

→If Stroke/TIA, Social/Recreational Activities Impaired[12056]: O No O Yes

→If Stroke/TIA, Neurocognitive Functions Essential to Pt or their Livelihood Impaired[12057]: O No O Yes

→If Stroke/TIA, New Aids or Assistance Required[12058]: O No O Yes

→If Stroke/TIA, Death as a Result of Neurologic Deficit[12060]: O No O Yes

Clinical Comments[12065]: (information and details that may assist in assessing the stroke or TIA)

→If Event[12000] = Aortic Valve Re-intervention

Aortic Valve Re-intervention Date[12100]: mm / dd / yyyy

Aortic Valve Re-intervention Type[12105]: O Surgical AV Repair/Replacement O Transcatheter AVR O Balloon Valvuloplasty O Other Transcatheter Intervention

→If Other Transcatheter Intervention, Type[12110]:

Primary Indication[12115]: O Aortic insufficiency O Aortic stenosis O Device migration O Device fracture O Endocarditis O Valve thrombosis O Other

→If Aortic Insufficiency, AI Severity[12120]: (highest) O None O Trace/Trivial O 1+/Mild O 2+/Moderate O 3-4+/Severe

→If Trace/Trivial, Mild, Moderate, or Severe Perivalvular Severity[12125]: O None O Mild O Moderate O Severe

→If Trace/Trivial, Mild, Moderate, or Severe Central Severity[12130]: O None O Mild O Moderate O Severe

→If Aortic Stenosis, AS Severity[12135]: (highest) O Possible stenosis O Significant stenosis

→If Other, Other Indication[12140]: Clinical

Comments[12145]: (information and details that may assist in assessing this re-intervention)