ICD Registry™ — DRAFT NCDR® ICD Registry™ v2.2
Data Collection Form – Generator & Leads

A. Demographics

Last Name[2000]: Evans	**First Name**[2010]: Robert	**Middle Name**[2020]: James
SSN[2030]: 222 - 55 - 9999 ☐ SSN N/A[2031]	**Patient ID**[2040]: 987665 (auto)	**Other ID**[2045]: MR555555
Birth Date[2050]: 06/12/1952	**Sex**[2060]: X Male O Female	**Patient Zip Code**[2065]: 88765 ☐ **Zip Code NA**[2066]

Race: (check all that apply)
☐ White[2070] ☐ Black/African American[2071] ☐ American Indian/Alaskan Native[2073]
☐ Asian[2072] → **If** Yes, ☐ Asian - Indian[2080] ☐ Chinese[2081] ☐ Filipino[2082] ☐ Japanese[2083] ☐ Korean[2084] ☐ Vietnamese[2085] ☐ Other[2086]
X Native Hawaiian/Pacific Islander[2074] → **If** Yes, ☐ Native Hawaiian[2090] ☐ Guamanian or Chamorro[2091] X Samoan[2092] ☐ Other Island[2093]

Hispanic or Latino Ethnicity[2076]: O No O Yes → **If** Yes, **Ethnicity Type:** (check all that apply)
☐ Mexican, Mexican-American, Chicano[2100] X Puerto Rican[2101] ☐ Cuban[2102] ☐ Other Hispanic, Latino or Spanish Origin[2103]

B. Episode of Care (Admission)

Arrival Date[3000]: 04/25/2014 | **Reason for Admission**[3010]: X Admitted for this procedure O Cardiac - Heart Failure O Other

Insurance[3020]: O No X Yes

→ **If** Yes, **Payor**[3025]: (Select all that apply)
☐ Private Health Insurance X Medicare ☐ Medicaid ☐ Military Health Care
☐ State-Specific Plan (non-Medicaid) ☐ Indian Health Service ☐ Non-US Insurance

HIC #[3030]: 223-33-6666A | **Research Study**[3035]: O No X Yes → **If** Yes, **Study Name**[3036], **Patient ID**[3037]: 15, 256

C. History and Risk Factors

Heart Failure[4000]: O No X Yes
→ **If** Yes, **NYHA Functional Classification**[4005]: O Class I O Class II X Class III O Class IV

LVEF Assessed[4020]: O No X Yes
→ **If** Yes, **Most Recent LVEF Date**[4025]: 03/25/2014
→ **If** Yes, **Most Recent LVEF**[4030]: 31 %

Syndromes w/Risk of Sudden Death[4040]: O No X Yes
→ **If** Yes, **Syndrome Type**[4045]: O Long QT syndrome O Short QT syndrome O Brugada syndrome O Catecholaminergic polymorphic VT X Idiopathic/Primary VT/VF

Familial Syndrome with Risk of Sudden Death[4050]: O No O Yes
Familial Hx of Non-Ischemic Cardiomyopathy[4055]: O No X Yes

Ischemic Cardiomyopathy[4070]: O No X Yes → **If** Yes, **Timeframe**[4075]: O <3 months X >= 3 months
→ **If** Yes, **Guideline Directed Medical Therapy Maximum Dose**[4080]: O Yes (for 3 mos) O Not Documented O Not Attempted X Inability to Complete

Non-Ischemic Cardiomyopathy[4090]: O No X Yes → **If** Yes, **Timeframe**[4095]: X <3 months O >= 3 months
→ **If** Yes, **Guideline Directed Medical Therapy Maximum Dose**[4100]: X Yes (for 3 mos) O Not Documented O Not Attempted O Inability to Complete

On Inotropic Support[4105]: O No X Yes

Cardiac Arrest[4120]: O No X Yes
→ **If** Yes, **Most Recent Arrest Date**[4125]: 02/06/2014
→ **If** Yes, **VFib Arrest**[4135]: O No X Yes
→ **If** Yes, **VTach Arrest**[4130]: O No X Yes
→ **If** Yes, **Bradycardia Arrest**[4140]: O No X Yes

Ventricular Tachycardia[4150]: O No X Yes
→ **If** Yes, **Most Recent VT Date**[4155]: 02/06/2014
→ **If** Yes, **Reversible Cause**[4170]: O No X Yes
→ **If** Yes, **Occurred Post Cardiac Surgery**[4160]: *(w/in 48 hrs)* O No X Yes
→ **If** Yes, **Hemodynamic Instability**[4175]: O No X Yes
→ **If** Yes, **Bradycardia Dependent**[4165]: O No X Yes
→ **If** Yes, **VT Type**[4180]: O Non-sustained VT O Monomorphic VT X Polymorphic VT O Monomorphic and polymorphic VT

Syncope[4190]: O No X Yes
Coronary Artery Disease[4195]: O No X Yes

Prior MI[4200]: O No X Yes
→ **If** Yes, **Most Recent MI Date**[4205]: 12/14/2014

Coronary Angiography[4210]: O No X Yes

→ **If** Yes, **Performed after Most Recent Cardiac Arrest**[4215]: O No X Yes

→ **If** Yes, **Revascularization Performed**[4220]:

O No, no significant disease
O No, non-revascularizable significant disease
X Yes, complete revascularization
O Yes, partial/incomplete revascularization

Prior Cardiovascular Implantable Electronic Device[4230]: O No X Yes *(Includes previously placed)*

Indications for Permanent Pacemaker[4235]: O No X Yes

→ **If** Yes, **Class I or Class II Guideline Bradycardiac Pacemaker Indication Present**[4240]: O No X Yes

→ **If** Yes, **Pacing Type**[4245]: O Atrial O Ventricular X Both

→ **If** Yes, **Reason Pacing Indicated**[4250]:
X Sick sinus syndrome
O Complete heart block
O Chronotropic Incompetence
O Mobitz Type II
O 2:1 AV Block
O Atrial lead implant for SVT discrimination
O Other

→ **If** Yes, **Anticipated Requirement of >40% RV pacing**[4255]: O No X Yes

On Heart Transplant Waiting List[4260]: O No X Yes
Candidate for LVAD[4270]: O No X Yes
Candidate for Transplant[4265]: O No X Yes
Currently on LVAD[4275]: O No X Yes

Atrial Fibrillation[4280]: O No X Yes

→ **If** Yes, **AFib Classification**[4285]: O Paroxysmal O Persistent O Long standing persistent X Permanent O Not Documented

→ **If** Yes, **Plans for Cardioversion of AFib**[4290]: O No X Yes

Paroxysmal SVT History[4295]: O No X Yes

OTHER HISTORY

Prior PCI[4300]: O No X Yes

→ **If** Yes, **Most Recent PCI Date**[4305]: mm / dd / yyyy
→ **If** Yes, **Elective**[4310]: O No X Yes

→ **If** Yes, **Pre-existing Cardiomyopathy**[4315]: O No X Yes

Prior CABG[4320]: O No O Yes

→ **If** Yes, **Most Recent CABG Date**[4325]: 06/12/2013
→ **If** Yes, **Elective**[4330]: O No X Yes

→ **If** Yes, **Pre-existing Cardiomyopathy**[4335]: O No X Yes

Primary Valvular Heart Disease[4340]: O No X Yes *(Moderate to Severe)*

Other Structural Abnormalities[4350]: O No X Yes

→ **If** Yes, **Structural Abnormality Type**[4355]: (Select all that apply)

☐ LV structural abnormality associated with risk for sudden cardiac arrest
X Hypertrophic cardiomyopathy (HCM) with high risk features
☐ Infiltrative
☐ Arrhythmogenic right ventricular cardiomyopathy (ARVC)
X Congenital heart disease associated with sudden cardiac arrest

Cerebrovascular Disease[4365]: O No X Yes
Currently on Dialysis[4375]: O No X Yes
Diabetes Mellitus[4370]: O No X Yes
Chronic Lung Disease[4380]: O No X Yes

D. DIAGNOSTIC STUDIES

Electrophysiology Study[5000]: O No X Yes

→ **If** Yes, **Most Recent Electrophysiology Study Date**[5005]: 08/18/2013 ☐ Date Unknown[5010]

→ **If** Yes, **Clinically Relevant Ventricular Arrhythmias Induced**[5015]: O No X Yes

D. Diagnostic Studies (cont.)

ECG Performed[5030]: O No X Yes

→ **If** Yes, **ECG Date**[5035]: 04/25/2014

→ **If** Yes, **Was ECG Normal**[5040]: O No X Yes

Only Ventricular Paced QRS Complexes Present[5045]: O No X Yes

→ **If** Yes, **Ventricular Paced QRS Duration**[5050]: .12 msec

→ **If** No, **QRS Duration (Non-Ventricular Paced Complex)**[5055]: _____ msec

Abnormal Intraventricular Conduction[5070]: O No X Yes

→ **If** Yes, **Intraventricular Conduction Types**[5075]: (Select all that apply)

X Left Bundle Branch Block (LBBB) ☐ Delay, Nonspecific

☐ Right Bundle Branch Block (RBBB) ☐ Alternating RBBB and LBBB

Atrial Rhythm[5100]: (Select all that apply) ☐ Sinus X Afib ☐ Atrial tach ☐ Aflutter ☐ Sinus arrest X Atrial paced ☐ Not Documented

Ventricular Paced[5120]: O No X Yes

E. Labs

Hemoglobin[5220]: 15.2 g/dL ☐ Not Drawn[5221]

Sodium[5230]: 124 mEq/L ☐ Not Drawn[5231]

BUN[5210]: _____ mg/dL X Not Drawn[5211]

F. Procedure Information (Complete for each lab visit)

Procedure Start Date/Time[6000/6001]: 04/26/2014 10:13 **Procedure End Date/Time**[6005/6006]: 04/26/2014 13:15

Procedure Type[6010]: O Initial generator implant X Generator change O Generator explant O Lead only

ICD Indication[6015]: X Primary prevention O Secondary prevention

Premarket Clinical Trial[6020]: O No X Yes

G. ICD Implant / Explant (Complete for each Lab Visit in which an initial generator implant or generator change was performed)

Operator Name[6100,6105,6110]: Samuel Adams **Operator NPI**[6115]: 1238765498

Device Implanted[6130]: O No X Yes

→ **If** Yes, **Final Device Type**[6135]: O Single chamber O Dual chamber X CRT-D O S-ICD (Sub Q)

→ **If** Yes, **CS/LV Lead**[6140]: O No, attempt unsuccessful O No, not attempted O Yes X Previously implanted

Device Information for Implanted devices

→ **If** Yes, **Device ID**[6150]: 10 → **If** Yes, **Serial Number**[6175]: 123-234-3212345 → **If** Yes, **UDI**[6180]: 987654321

→ If Procedure Type[6010] = 'Generator Change' or 'Generator Explant'

Reason(s) for Re-Implantation[6190]: (Select all that apply)

☐ End of expected battery life ☐ Replaced at time of lead revision ☐ Upgrade X Infection

☐ Under manufacturer advisory/recalled ☐ Faulty Connector/Header ☐ Device relocation ☐ Malfunction

→ **If** Upgrade, **Reason for Upgrade**[6200]: O Single ICD to Dual ICD X ICD to CRT-D

Device Explanted[6225]: O No X Yes O Previously explanted

→ **If** Previously Explanted, **Explant Date**[6230]: mm / dd / yyyy

Explant Treatment Recommendation[6235]: O No Re-implant X Downgrade

Device Information for Changed or Explanted Devices

Device ID[6245]: 12 **Serial Number**[6250]: 123456 **UDI**[6255]: (future)

+25PLHH123C123456789+26Q5+1TL23456789+14D20110101

H. Lead Assessment (Complete for all leads, including new leads implanted, existing leads extracted, abandoned, or reused)

Operator Name[7000,7005,7010]: David Jones **Operator NPI**[7015]: 9123456789

Lead Counter[7025]:	1	2	3
Identification[7030]:	O New Lead X Existing Lead	O New Lead X Existing Lead	O New Lead O Existing Lead
Device ID[7035]:	8	33	
Serial Number[7055]:	5555555	998765	
UDI[7060]:	111111	55555	(future)
Lead Location[7065]:	O RA endocardial O LV epicardial X RV endocardial O SVC/subclavian O LV via CVS O Subcutaneous (S-ICD) O Subcutaneous array O Other	O RA endocardial O LV epicardial O RV endocardial X SVC/subclavian O LV via CVS O Subcutaneous (S-ICD) O Subcutaneous array O Other	O RA endocardial O LV epicardial O RV endocardial O SVC/subclavian O LV via CVS O Subcutaneous (S-ICD) O Subcutaneous array O Other
Complete for Existing Leads only			
Existing Lead Implant Date[7070]:	08/15/2012	08//15//2012	mm / dd / yyyy
Existing Lead Status[7075]:	O Extracted O Abandoned X Reused	O Extracted X Abandoned O Reused	O Extracted O Abandoned O Reused

I. Intra or Post procedure Events (Complete for each Lab Visit)

Cardiac Arrest[8000]:	O No	X Yes	**Myocardial Infarction**[8030]:	O No	X Yes
Cardiac Perforation[8005]:	O No	X Yes	**Pericardial Tamponade**[8035]:	O No	X Yes
Coronary Venous Dissection[8010]:	O No	X Yes	**Pneumothorax**[8040]:	O No	X Yes
Hematoma (Req re-op, evacuation or transfusion)[8015]:	O No	X Yes	**TIA**[8045]:	X No	O Yes
Hemothorax[8020]:	O No	X Yes	**Stroke (CVA)**[8050]:	O No	X Yes
Infection Requiring Antibiotics[8025]:	O No	X Yes	**Urgent Cardiac Surgery**[8055]:	O No	X Yes

Post Procedure Event(s)

Set Screw Problem[8080]:	O No	X Yes
Lead Dislodgement[8085]:	O No	X Yes

→ **If** Yes, **Lead Location**[8090]: O RA endocardial; O LV epicardial; O RV endocardial; X SVC/subclavian; O LV via CVS; O Subcutaneous (S-ICD); O Subcutaneous array; O Other

J. Discharge (Complete for each episode of care/Admission)

CABG[9000]**:** *(During this admission)* O No X Yes → **If** Yes, **CABG Date**[9005]**:** 04/028/2014

PCI[9010]**:** *(During this admission)* O No X Yes → **If** Yes, **PCI Date**[9015]**:** 04/25/2014

Discharge Date[9020]**:** 05/01/2014

Discharge Status[9025]**:** X Alive O Deceased

→ **If** Alive, **Discharge Location**[9030]**:**
O Home
O Extended care/TCU/rehab
O Other acute care hospital
O Skilled Nursing facility
O Other
X Left against medical advice (AMA)

→ **If** Deceased, **Cause of Death**[9035]**:** O Cardiac O Non-Cardiac

→ **If** Deceased, **Death During the Procedure**[9040]**:** O No O Yes

Discharge Medications (Prescribed at Discharge)

Medications prescribed at discharge are not required for patients who expired or discharged to "Other acute care Hospital," or "AMA".

Medication[9500]	Prescribed[9505]				
	Yes	No - No Reason	No - Medical Reason	No - Pt. Reason	No - System Reason
ACE-Inhibitor (Any)	X	O	O	O	O
Antiarrhythmic Agents	X	O	O	O	O
ARB (Any)	O	O	X	O	O
Beta Blocker (Any)	O	X	O	O	O
Mineralocorticoid Receptor Antagonist	O	O	O	X	O
Aldosterone Antagonist	O	X	O	O	O
ASA (Any)	X	O	O	O	O
Lipid Lowering Statin (Any)	X	O	O	O	O
Warfarin (Coumadin)	X	O	O	O	O
Antiplatelet Agents	O	O	O	O	X
Non-Vitamin K Dependent Oral Anticoagulants	O	O	O	X	O