

VA COOPERATIVE STUDY #578

Participant ID: _____ - _____

**SOURCE DOCUMENT WORKSHEET FOR
FORM 06: PRE PROCEDURE LABORATORY VALUES**

To be completed by study personnel during angiography visit. Once completed, this data should be entered into eDC and this form should be filed in the Participant's Study Binder.

1. Was the study related baseline urine sample for urine albumin and creatinine measurement collected prior to the angiography procedure? **BaseUrinePerf** **Blank: -1**

Yes **If yes, answer Q2-Q6** **1**

No **If no, complete a Protocol Deviation Form and proceed to Q7** **2**

2. Date urine sample collected: **BaseUrineDat**

____/____/____

3. Urine albumin/urine microalbumin unit of measurement: **UrineALBUnit** **Blank: -1**

mg/dL **1**

mcg/mL **2**

mg/L **3**

g/dL **4**

4. Urine albumin result:

_____ **UrineALB**

5. Urine creatinine unit of measurement: **UrineCREATUnit** **Blank: -1**

mg/dL **1**

mmol/L **2**

6. Urine creatinine result:

_____ **UrineCREAT**

7. Did the participant have a **hemoglobin (HGB)** measurement taken as part of routine clinical care within 30 days prior to their index angiography procedure? **HGBPerf** **Blank: -1**

Yes **If yes, answer Q8-Q10** **1**

No **If no, proceed to Q11** **2**

8. Date of HGB measurement most proximate to and within the 30 days prior to the participant's index angiography procedure: **HGBDat**

____/____/____

9. HGB unit of measurement: **HGBUnit** **Blank: -1**

g/dL **1**

g/L **2**

10. HGB result:

_____ **HGB**

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11. Did the participant have a **serum glucose** measurement taken as part of routine clinical care within 30 days prior to their index angiography procedure? **GLUCPerf** **Blank: -1**

- Yes **If yes, answer Q12-Q14** **1**
- No **If no, proceed to Q15** **2**

12. Date of serum glucose measurement most proximate to and within the 30 days prior to the participant's index angiography procedure: **GLUCDat**

___/___/___

13. Serum glucose unit of measurement: **GLUCUnit** **Blank: -1**

- mg/dL **1**
- mmol/L **2**

14. Serum glucose result:

___ **GLUC** ___

15. Did the participant have a **serum bicarbonate (HCO₃ or Total CO₂)** measurement taken as part of routine clinical care within 30 days prior to their index angiography procedure?

HCO3Perf **Blank: -1**

- Yes **If yes, answer Q16-Q17** **1**
- No **If no, proceed to Q18** **2**

16. Date of serum bicarbonate (HCO₃ or Total CO₂) measurement most proximate to and within the 30 days prior to the participant's index angiography procedure:

___/___/___ **HCO3Dat**

17. Serum bicarbonate (HCO₃ or Total CO₂) result:

___ **HCO3** ___ mEq/L or mmol/L

18. Did the participant have a serum **sodium (Na)** measurement taken as part of routine clinical care within 30 days prior to their index angiography procedure? **SODIUMPerf** **Blank: -1**

- Yes **If yes, answer Q19-Q20** **1**
- No **If no, proceed to Q21** **2**

19. Date of serum sodium measurement most proximate to and within the 30 days prior to the participant's index angiography procedure: **SODIUMDat**

___/___/___

20. Serum Sodium result:

___ **SODIUM** ___ mEq/L or mmol/L

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21. Did the participant have a serum **potassium (K)** measurement taken as part of routine clinical care within 30 days prior to their index angiography procedure?

KPerf **Blank: -1**

- Yes **If yes, answer Q22-Q23** **1**
- No **If no, proceed to Q24** **2**

22. Date of serum potassium (K) measurement most proximate to and within the 30 days prior to the participant's index angiography procedure: **KDat**

___/___/___

23. Serum Potassium result:

___ **KResult** ___ mEq/L or mmol/L

24. Did the participant have a **blood urea nitrogen (BUN)/serum urea** measurement taken as part of routine clinical care within 30 days prior to their index angiography procedure?

BUNPerf **Blank: -1**

- Yes **If yes, answer Q25-Q27** **1**
- No **If no, proceed to Q28** **2**

25. Date of BUN/serum urea measurement most proximate to and within the 30 days prior to the participant's index angiography procedure: **BUNDat**

___/___/___

26. BUN/serum urea unit of measurement: **BUNUnit** **Blank: -1**

- mg/dL **1**
- mmol/L **2**

27. BUN/serum urea result:

___ **BUN** ___

28. Is the participant diabetic (defined as the use of oral hypoglycemic medications and/or insulin at the time of angiography)? **Diabetic** **Blank: -1**

- Yes **If yes, answer Q29** **1**
- No **If no, proceed to Q33** **2**

29. Did the participant have a **hemoglobin A1C (HbA1C)** measurement taken as part of routine clinical care within the past year prior to their index angiography procedure?

HBA1CPerf **Blank: -1**

- Yes **If yes, answer Q30-Q32** **1**
- No **2**

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30. Date of most recent HbA1C measurement taken within the past year prior to the participant's index angiography procedure: **HBA1CDat**

____/____/____

31. HbA1C unit of measurement: **HBA1CUnit** **Blank: -1**
 percent (%) **1**
 mmol/mol **2**

32. HbA1C Result:
HBA1C

33. Date form completed: **F06Complete**

Signature of person completing the form: _____