

PARTICIPANT ID: «subjid» CO: «co1» SEQ: «seq1» EPID: «EPID» **Blind_EPID**
 EVENT TYPE AND NUMBER: «event1» **MAD0B** EVENT DATE: «date1» **MAD0C**

NO YES

1. Ischemic Symptoms: (pain, dyspnea, pressure) at rest or accelerated ischemic symptoms, either of which lasts >= 10 minutes and is determined by the investigator to be secondary to ischemia? **MAD1**

NO YES

2. ECG changes consistent with infarction? **MAD2**

Check all that apply to this event:

2a. New significant Q waves (or R waves in V1-V2) in two contiguous leads in the absence of previous LVH or conduction abnormalities. **MAD2A**

2b. Evolving ST-segment to T-wave changes in two or more contiguous leads. **MAD2B**

2c. Development of new left bundle branch block. **MAD2C**

2d. ST segment elevation requiring thrombolytics or PCI. **MAD2D**

2e. New pathologic Q waves* **MAD2E**

*May also have other clearly documented wall motion abnormalities attributed to infarct.

NO YES

3. Cardiac Marker criteria (please check below for specific criteria) **MAD3**

4. Type of MI for adjudication **MAD4**

A. Non-Procedural MI

B. Peri-PCI MI

C. Peri-CABG MI

5. Specific Marker Criteria that was met for this event: **MAD5**

A. Troponin in necrosis range

B. Troponin not in necrosis range, CKMB >= 2 x ULN

C. No Troponin, CK and CKMB are both >= ULN

D. No Troponin, CK < ULN, CKMB >= 2 x ULN

E. No Troponin, CKMB < ULN, CK >= 2 x ULN

F. No Troponin or CK, CKMB >= 2 x ULN

G. Only CK drawn, serial changes in CK >= 2 x ULN

H. Marker >= 3 x ULN and >= 50% above last measurement, if last measure was >= ULN.

I. CKMB >= 5 x ULN and >= 50% above last measurement, if last measure was >= ULN.

6. FAVORIT MI Criteria Not Met **MAD6**

7. FAVORIT MI Criteria Met: **MAD7**

A. Non-Procedural

B. Peri-PCI

C. Peri-CABG

Date of Event:

8a. SITE REPORTED DATE OF EVENT AS ABOVE **MAD8A**

8b. ADJUDICATED DATE OF EVENT ____/____/____ **MAD8B**
 day month year

9. CEC Request for Additional Information: **MAD9**

10. Additional Information Rec'd **MAD10**

11. Initial review match final adj.? YES NO, explain : **MADB11**

12. Comments: **MAD11 & MAD11A**

13. Physician Reviewer Signature: **Blind_MD_ID** 14. Date: ____/____/____ **MAD13**
 day month year

15. CEC Administrative Signature: **Blind_staff_ID** 16. Date: ____/____/____ **MAD15**
 day month year

MAD0D Date final adjudication received at the Data Coordinating Center

PARTICIPANT ID: «subjid» CO: 0«co1» SEQ: 0«seq1» EPID: «EPID» **Blind_EPID**
 EVENT TYPE AND NUMBER: «event1» **MAD0B** EVENT DATE: «date1» **MAD0C**

NO YES

1. Ischemic Symptoms: (pain, dyspnea, pressure) at rest or accelerated ischemic symptoms, either of which lasts >= 10 minutes and is determined by the investigator to be secondary to ischemia? **MAD1**

NO YES

2. ECG changes consistent with infarction? **MAD2**

Check all that apply to this event:

- 2a. New significant Q waves (or R waves in V1-V2) in two contiguous leads in the absence of previous LVH or conduction abnormalities. **MAD2A**
 - 2b. Evolving ST-segment to T-wave changes in two or more contiguous leads. **MAD2B**
 - 2c. Development of new left bundle branch block. **MAD2C**
 - 2d. ST segment elevation requiring thrombolytics or PCI. **MAD2D**
 - 2e. New pathologic Q waves* **MAD2E**
- *May also have other clearly documented wall motion abnormalities attributed to infarct.

NO YES

3. Cardiac Marker criteria (please check below for specific criteria) **MAD3**

- | | |
|--|---|
| <p>4. Type of MI for adjudication</p> <p><input type="checkbox"/> A. Non-Procedural MI MAD4</p> <p><input type="checkbox"/> B. Peri-PCI MI</p> <p><input type="checkbox"/> C. Peri-CABG MI</p> | <p>5. Specific Marker Criteria that was met for this event: MAD5</p> <p><input type="checkbox"/> A. Troponin in necrosis range</p> <p><input type="checkbox"/> B. Troponin not in necrosis range, CKMB >= 2 x ULN</p> <p><input type="checkbox"/> C. No Troponin, CK and CKMB are both >= ULN</p> <p><input type="checkbox"/> D. No Troponin, CK < ULN, CKMB >= 2 x ULN</p> <p><input type="checkbox"/> E. No Troponin, CKMB < ULN, CK >= 2 x ULN</p> <p><input type="checkbox"/> F. No Troponin or CK, CKMB >= 2 x ULN</p> <p><input type="checkbox"/> G. Only CK drawn, serial changes in CK >= 2 x ULN</p> <p><input type="checkbox"/> H. Marker >= 3 x ULN and >= 50% above last measurement, if last measure was >= ULN.</p> <p><input type="checkbox"/> I. CKMB >= 5 x ULN and >= 50% above last measurement, if last measure was >= ULN.</p> |
|--|---|

6. FAVORIT MI Criteria Not Met **MAD6**

7. FAVORIT MI Criteria Met:

A. Non-Procedural **MAD7**

B. Peri-PCI

C. Peri-CABG

Date of Event:

8a. SITE REPORTED DATE OF EVENT AS ABOVE **MAD8A**

8b. ADJUDICATED DATE OF EVENT ____/____/____ **MAD8B**
day month year

9. CEC Request for Additional Information: **MAD9**

11. Comments: **MAD11 & MAD11A**

10. Additional Information Rec'd **MAD10**

12. Physician Reviewer Signature: **Blind_MD_ID** **MAD13**

13. Date: ____/____/____
day month year

14. CEC Administrative Signature: **Blind_staff_ID** **MAD15**

15. Date: ____/____/____
day month year

MAD0D Date final adjudication received at the Data Coordinating Center