



PVDOMICS STUDY

Center Arterial Blood Gases (ABG) Form #207

Instructions: Complete this form if blood was drawn for arterial blood gases (ABG) measures. Although ABG's are not required by protocol, ABGs may be captured during the course of study visits and if so, the PVDOMICS study would like to obtain these results. Please complete and enter this form even if ABG's are not done.

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1. Identification Number

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2. Alphacode

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|--|--|--|--|--|--|--|--|

3. Date of ABG collection (mm/dd/yyyy)

4. Was arterial blood drawn for ABG's? (0=No, skip to end of form, 1=Yes, continue to Q5)

5. When was ABG measured?

1=At time of PFTs completed for PVDOMICS study

4=Other, specify (not entered):

2=At time of RHC only

3=At time of invasive CPET (includes RHC)

6. Using supplemental oxygen at the time blood drawn for ABG's? (0=No, skip to Q7, 1=Yes)

a. If yes, how was oxygen delivered?.....

1=Nasal Cannula

3=Venturi mask/trach collar

2=Nasal Cannula with a reservoir

4=Non-rebreather mask

1. If Q6a = 2, was participant switched to a nasal cannula prior to drawing blood?

b. What was range of O₂ use reported by participant?

1=0 to <2 L/m

3=4 to <6 L/m

5=> 8 L/m

2=2 to <4 L/m

4=6 to 8 L/m

7. Device used to obtain arterial blood (1=Syringe, 2=Arterial line)

8. pH (pH units)

9. pCO₂ (mmHg).....10. pO₂ (mmHg)11. Bicarbonate (HCO₃) (mmol/L)

12. Carboxyhemoglobin (HbCO) (%)

(Use the single space to indicate "<" or ">")

13. Methemoglobin (MetHb) (%).....

(Use the single space to indicate "<" or ">")

14. Oxygen Saturation (O₂Sat) (%)15. Oxyhemoglobin (HbO₂) (%).....16. FiO₂ (%) (see page 2 for O₂ flow rate and FiO₂ delivery).....

200. Date form completed (mm/dd/yyyy)/...../.....

201. Username of person completing/reviewing completeness of this form

Clinical Center Use Only

Date form entered (mm/dd/yyyy)/...../.....

Username of person entering this form



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| Oxygen Delivery Equipment | | |
|--|--|------------------------------------|
| Device | Flow Rate in Liters/minute | Percent FiO ₂ delivered |
| Nasal Cannula <ul style="list-style-type: none"> Indicated for low-flow, low-percentage supplemental oxygen. Flow rate of 1–6 L/min. Delivers 25%–45% oxygen. Pt can eat, drink, and talk. Extended use can be very drying; use with a humidifier. | 1 | 25% |
| | 2 | 29% |
| | 3 | 33% |
| | 4 | 37% |
| | 5 | 41% |
| | 6 | 45% |
| Simple Face Mask <ul style="list-style-type: none"> Indicated for higher percentage supplemental oxygen. Flow rate of 6–10 L/min. Delivers 35%–60% oxygen. Lateral perforations permit exhaled CO₂ to escape. Permits humidification. | 6 | 35% |
| | 7 | 41% |
| | 8 | 47% |
| | 9 | 53% |
| | 10 | 60% |
| Nonrebreather Mask <ul style="list-style-type: none"> Indicated for high percentage FiO₂. Incorporates use of reservoir bag. Flow rate of 10–15 L/min. Delivers up to 100% oxygen. One-way flaps prevent entrainment of room air during inspiration and retention of exhaled gases (namely CO₂) during expiration. | 10–15 | 80%–100%* |
| | * Both flaps removed results in lower (80%–85%) FiO ₂ . | |
| | * One flap removed results in higher (85%–90%) FiO ₂ . | |
| | * Both flaps in place results in maximum (95%–100%) FiO ₂ . | |
| Venturi Mask (venti-mask) <ul style="list-style-type: none"> Indicated for precise titration of percentage of oxygen. Flow rate of 4–8 L/min. Delivers 24%–60% oxygen. Uses either a graduated dial set to desired FiO₂ or colored adapters selected to deliver desired FiO₂. | Blue | 24% |
| | White | 28% |
| | Orange | 31% |
| | Yellow | 35% |
| | Red | 40% |
| | Green | 60% |