



PVDOMICS Study Cardiac MRI Transmittal Form #251

Instructions: This form is used for both uploading data to AG Mednet for the Imaging Core Lab (ICL) and uploading data to the DCC database. Review MOP Chapter 70 prior to testing.

Study Coordinator Completes Questions 1-5.

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1. Identification Number

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2. Alphacode

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3a. Date of Cardiac MRI (mm/dd/yyyy)

3. b. Was a cardiac MRI done? _____

1=Yes, MRI completed per PVDOMICS study protocol

2=Yes, MRI done but did not use PVDOMICS MRI protocol (missing study variables),
logistically had a clinical MRI

3= Yes, MRI done but had non-contrast MRI due to Gadolinium allergy

4=No, excluded from MRI per MOP Chapter 70.8 medical contraindications

5=No, excluded from MRI due to other medical contraindication not listed in MOP 70.8/safety issue

6=No, attempted but participant could not tolerate procedure

7=No, scheduling issue

8=No, neither insurance nor research funds cover MRI

9=No, other logistical issue at the site

10=No, logistical issue with participant (could not fit into the scanner, unable to hold breath)

11=No, participant refused even after study PI talked with participant

99=DCC ONLY: Form entered before Q3b was added to the form

4. Gender (1=Male, 2=Female) (database will auto populate from Form100).....

5. Visit Type _____

1=Qualification, 2=Baseline, 3=Follow-up

MRI Technologist Completes Questions 6-20.

6. a. Blood pressure measured at the beginning of cardiac MRI?..... _____

0=No, BP measures not collected, 1=Yes

b. If yes, blood pressure measures (mmHg) (systolic/diastolic) /

7. a. Was there a cardiac rhythm disturbance during MRI? (0=No, 1=Yes)..... _____

b. If yes, what type of rhythm disturbance? _____

1=Atrial fibrillation

8=Other, specify _____

2=Bradycardia

8. a. Was average heart rate collected during MRI? (0=No, 1=Yes)..... _____

b. If yes, average heart rate during MRI (bpm) _____

9. a. Was contrast agent used? _____

0=No contrast agent used

6=Omniscan (gadodiamide)

1=Ablavar (gadofoset trisodium)

7=ProHance (gadoteridol)

2=Magnevist (gadopentetate dimeglumine)

8=Other, specify _____

3=MultiHance (gadopentetate dimeglumine)

4=OptiMARK (gadoversetamide)

5=Dotarem (gadoterate meglumine)

b. Total contrast volume (mL)..... _____

10. MRI start time (24-hr clock) (hh:mm) :

11. Injection start time (24-hr clock) (hh:mm)..... :

12. Look-Locker sequence start time (24-hr clock) (hh:mm)

13. Delayed enhancement sequence start time (24-hr clock) (hh:mm)..... :

14. MOLLI sequence start time (24-hr clock) (hh:mm), if performed..... :

15. MRI end time (24-hr clock) (hh:mm)

Comments

16. Is the MRI Tech name known (0=No, 1=Yes).....

a. If yes, username of MRI Tech who performed cardiac MRI

b. Name of MRI Tech who performed cardiac MRI *(will not be entered into the database)*

Imaging Equipment Used for this Cardiac MRI

17. MRI manufacturer

1=GE

3=Siemens

2=Philips

8=Other, specify

18. Model #

19. Serial Number #

20. Field Strength: Tesla (1=1.5 T, 2=3.0 T)

Transmission Details for Cardiac MRI to AG Mednet- Coordinator completes Q21 through end of form.

21. Method of transmission (1=Digital transfer, 8=Other, specify _____) ..

22. Date MRI file transmitted to AG Mednet (mm/dd/yyyy) / /

(Date file transmitted must be greater or equal to the date the form is completed.)

200. Date this 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