Revision of 07/09/2018 Form #254 Page 1 of 2



PVDOMICS STUDY Clinical Center Ventilation/Perfusion (V/Q) Scan Report Form #254

Instructions: All patients are required to have a ventilation-perfusion lung scan for detection of possible pulmonary emboli*. V/Q scans performed within 4 years prior to enrollment can be used provided acceptable results are made available to the DCC and there has been no change in clinical status of the participant.

*A V/Q scan is not required if the participant has known parenchymal lung disease or has had a positive CT angiogram in the past year for which the results (DICOM images) and final report are provided to the DCC Lung Imaging Core. If the CTA is non-diagnostic or negative, then a V/Q scan is required.

As of 06/14/2018, the clinical center physician should review the local radiologist's final report to interpret the probability of a pulmonary embolus. Radiopharmaceutical agents should be

trai	cumented on this first, if available on the report. (The V/Q scan report no longer needs to be assmitted to the DCC but should be retained in the participant's study binder as source cumentation.)						
	1. Identification Number 2. Alphacode 3. Date of V/Q scan (mm/dd/yyyy)						
4.	Was a lung ventilation/perfusion (V/Q) scan performed for the PVDOMICS Study?						
5.	What was the nuclear medicine report reading on the probability of a pulmonary embolism?						
Ra	diopharmaceutical Materials Used						
6.	Was a radiopharmaceutical agent for $\underline{\text{Ventilation scan}}$ identified on local report (0=No, 1=Yes)						
	If yes, complete Q6a-b: a. Type of radiopharmaceutical agent administered						
	b. Activity (mCi)						

6/14/2018- Q6 & 7-radiopharmaceutical agents added. Dropped transmission of V/Q report to DCC via secure portal. Added Q197physician review of form; *not obtained retrospectively. Q198 & Q199 removed. V/Q Core Form 256 dropped. 7/5/2018, Q6 & 7: a code of 9=Unspecified was added. Q7 reworded for consistency with Q6. Q4 added: 7=No, participant has parenchymal lung disease. 7/9/18: Q6b & Q7b format width increased to 2 digits.

Revis	sion of 07/09/2018	PID:	Date: _	//_		Form #254 Page 2 of 2	
7.	Was a radiopharmaceutical agent for <u>Perfusion scan</u> identified on the local report (0=No, 1=Yes)						
	If yes, comple	ete Q7a - b:					
	1=99mTc-MAA 9=Unspecified	A	agent administered				
	b. 99mTc-MAA	activity (mCi)				-·	
8. <i>I</i>	Any comments?	(0=No comments, 1:	=Yes, specify below)			<u> </u>	
	Comments (ente	ered into database):					
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