

APPENDIX F: DATA DEFINITIONS

ACS stratum	Risk stratum of the patient presenting with clinical features consistent with an ACS (chest pain or overwhelming shortness of breath), defined by accompanying clinical, ECG and biochemical features
Bleeding complication (TIMI criteria)	<p>The person's episode of bleeding as described by the thrombolysis in myocardial infarction (TIMI) criteria:</p> <p>Major; Overt clinical bleeding (or documented intracranial or retroperitoneal hemorrhage) associated with a drop in hemoglobin of greater than 5 g/dl (0.5 g/l) or in hematocrit of greater than 15% (absolute)</p> <p>Minor; Overt clinical bleeding associated with a fall in hemoglobin of 3 to less than or equal to 5g/dl (0.5 g/l) or in hematocrit of 9% to less than or equal to 15% (absolute)</p> <p>None; No bleeding event that meets the major or minor definition</p>
Blood pressure (diastolic) at presentation	The person's measured diastolic blood pressure (at presentation)
Blood pressure (systolic) at presentation	The person's measured systolic blood pressure (at presentation)
Cerebrovascular disease	Indicates if the patient has a history of stroke and/or transient ischaemic attack (TIA) or documented evidence of cerebrovascular disease (CT scan, MRI) prior to this hospital admission
Chronic angina (onset more than 2 weeks ago)	Indicates if the patient has an angina for more than 2 weeks prior to this hospital admission
Chronic lung disease	Indicates if the patient has a history of chronic lung disease including chronic obstructive pulmonary disease (COPD), chronic pulmonary fibrosis, cystic fibrosis or bronchiectasis, or is receiving treatments for these conditions, prior to this hospital admission. Previous acute pneumonia and ventilation for acute respiratory distress are excluded
Chronic renal disease	Indicates if the patient has documented underlying moderate to severe impairment of renal function prior to this hospital admission
'Culprit' artery	The vessel considered as responsible for the Acute Coronary Syndrome
Current smoker	Patient regularly smokes tobacco product / products one or more times per day or has smoked in the 30 days prior to this admission
Date of onset ACS symptoms	Defines the date of onset of index event resulting in admission.
Date patient presented	Defines the date that patient presented to the reporting centre.

Diabetes mellitus	Indicates if the patient has a history of diabetes mellitus diagnosed prior to this hospital admission or currently receiving treatment for diabetes. Defines TIMI UA/NSTEMI score. Defines TIMI STEMI score
Documented CAD > 50% stenosis	Indicates if the patient has angiographically-proven coronary disease involving at least 1 vessel with greater than 50% stenosis, or have undergone percutaneous angioplasty (PCI) or coronary artery bypass graft (CABG) prior to this hospital admission. Defines TIMI UA/NSTEMI score
Door to balloon time (mins)	The duration between time patients presented to the reporting centre to time of first angioplasty balloon inflation/stenting by the same centre. Applicable only to patients with STEMI undergoing urgent PCI.
Door to needle time	The duration between time patients presented to the reporting centre to time intravenous fibrinolytic therapy was administered or initiated by that same centre. Applicable only to STEMI patients receiving thrombolysis at the reporting centre
Dyslipidaemia	Indicates if the patient has a history of dyslipidaemia diagnosed prior to this hospital admission or currently receiving treatment for dyslipidaemia. Defines TIMI UA/NSTEMI score
ECG abnormalities location	Describes the area in which the main abnormalities are located on the standard 12-lead ECG
ECG abnormalities type	Describes the type of abnormalities seen on the ECG
Facilitated PCI	PCI may be performed as part of planned revascularization strategy in conjunction with pharmacological thrombolysis
Family history of premature cardiovascular disease	Indicates if the patient has a 1st degree family member (parents or siblings) who suffered a myocardial infarction and/or stroke before the age of 55 years. Defines TIMI UA/NSTEMI score
Fasting blood glucose	A method for learning how much glucose there is in a blood sample taken after an overnight fast (in mmol/L)
Fibrinolytic drug used	Identifies the fibrinolytic drugs used. Applicable only to patients presenting with STEMI. This data may be entered by the reporting centre for patients who received thrombolysis prior to transfer
Fibrinolytic therapy status	Identifies the person's fibrinolytic therapy status. Applicable only to patients presenting with STEMI. This data may be entered by the reporting centre for patients who received thrombolysis prior to transfer. Also indicates whether and where thrombolysis was given. Only thrombolysis instituted by the participating centre will be calculated for 'Door-to-Needle' time
Final diagnosis at discharge	Indicates one of the following the final diagnosis after all procedures and investigations had been performed <ul style="list-style-type: none"> ▪ Q-wave MI, or ▪ Non Q-wave MI, or ▪ Unstable angina, or ▪ Stable angina, or ▪ Non cardiac

Former smoker	Patient has stopped smoking tobacco products more than 30 days before this admission
HDL-C	The person's latest measured high-density lipoprotein cholesterol (HDL-C) latest level before event (in mmol/L)
Heart failure	Indicates if the patient has a history of heart failure or documented evidence (echocardiography, MRI, nuclear imaging, ventriculography) of left ventricular systolic dysfunction prior to this hospital admission
Heart rate at presentation	The heart rate recorded in beats per minute (at presentation)
Height (cm)	Measures the patient's height in cm. Measurements may be taken at any time prior to discharge. However, measurements taken after prolonged hospitalization (>2 weeks) or following surgery or prolonged intensive unit stay may not be accurate
Hip circumference (cm)	Measures the patient's hip circumference at presentation. Measurements may be taken at any time prior to discharge. However measurements taken after prolonged hospitalization (>2 weeks) or following surgery or prolonged intensive unit stay may not be accurate
Hypertension	Indicates if the patient has a history of hypertension diagnosed prior to this hospital admission or currently receiving treatment for hypertension. Defines TIMI UA/NSTEMI score. Defines TIMI STEMI score
Intravenous Fibrinolytic therapy (date)	The date intravenous fibrinolytic therapy was administered or initiated. Applicable only to patients presenting with STEMI. This data may be entered by the reporting centre for patients who received thrombolysis prior to transfer
Intravenous Fibrinolytic therapy (time)	The time intravenous fibrinolytic therapy was administered or initiated. Applicable only to patients presenting with STEMI. This data may be entered by the reporting centre for patients who received thrombolysis prior to transfer
Killip classification	Identifies the Killip class, as a measure of haemodynamics compromise, of the person at the time of presentation Class I includes individuals with no clinical signs of heart failure Class II includes individuals with rales in the lungs, an S3 gallop, and elevated jugular venous pressure Class III describes individuals with frank pulmonary edema Class IV describes individuals in cardiogenic shock
LDL-C	The person's latest measured low-density lipoprotein cholesterol (LDL-C) latest level before event (in mmol/L)
Left Main Stem Involvement	Left main disease (>50%) is counted as TWO-vessel disease (LAD and Circumflex). This field to be entered if there is at least 50% stenosis in the left main stem
Lipid Profile (fasting)	The person's measured lipid profile values
LVEF (%)	Ejection fraction is the percentage of the blood that fills the left ventricle during diastole that is then pumped into the body during systole. It measures the blood-pumping efficiency of the left ventricle

Myocardial infarction history	Indicates if the patient has a history of myocardial infarction prior to this hospital admission. Defines TIMI UA/NSTEMI score
New onset angina (Less than 2 weeks)	Indicates if the patient has an angina in the past 2 weeks prior to this hospital admission
No of days in CCU / ICU / CICU	Total number of days spent in a cardiac care unit (CCU) at the reporting centre only, either consecutively or intermittently
NSTEMI	Patients with chest pains characteristic of unstable angina AND showing evidence of biochemical myocardial necrosis. For patients who have received thrombolysis prior to admission to reporting centre, NSTEMI may also be diagnosed if after early reperfusion there may be rapid resolution of existing ST elevation associated with CK rise <2xULN or small Trop rise only
Number of diseased vessels	The number of major coronary vessels systems (LAD system, Circumflex system, and / or Right System) with > 50% narrowing in any angiographic view, or significant lesion defined by IVUS or pressure wire assessment
Number of distinct episodes of angina in past 24 hours	Number of distinct episodes of anginal pain that occurred in the 24 hours before hospital presentation
Peak CK	The person's maximum measured CK level over 48 hours from the time of presentation (in Unit/L)
Peak CK-MB	The person's maximum measured CK-MB isoenzyme over 48 hours from the time of presentation (in Unit/L)
Peak Troponin T / I	The person's maximum measured troponin (T / I / or both) over 48 hours from the time of presentation (in microgram/L) or state as positive or negative
Peripheral vascular disease	Indicates if the patient has a history and/or documented evidence and/or have undergone treatment for peripheral vascular disease (including aortic aneurysm; peripheral artery disease, intermittent claudication and/or previous peripheral artery stenting or bypass; renal artery stenosis and/or previous renal artery stenting)
Primary PCI	PCI intended as the primary mode of coronary revascularization
Rescue PCI	After initial thrombolysis, PCI may be performed when there is on-going cardiac ischemia or perceived failure of thrombolytic drug to achieve adequate reperfusion
Smoking status	Indicates if the patient has a history confirming any form of tobacco use in the past. This includes use of cigarettes / cigars / pipes/ tobacco chewing
STEMI	History consistent with diagnosis plus ST elevation in contiguous leads or new LBBB
Time of onset ACS symptoms	Defines the time of onset of index event resulting in admission using the 24-hour clock
Time patient presented	Defines the time that patient presented to the reporting centre

TIMI flow classification	<p>Angiographic criteria of severity of coronary flow impediment prior to PCI as defined by the TIMI score.</p> <ul style="list-style-type: none"> 0 No perfusion; I Penetration without perfusion; II Partial perfusion. Contrast opacifies the entire coronary bed distal to the stenosis. However the rate of entry and/or clearance is slower in the coronary bed distal to the obstruction than in comparable areas not perfused by the vessel; III Complete perfusion. Filling and clearance of contrast equally rapid in the coronary bed distal to stenosis as in other coronary beds
TIMI Risk score for STEMI	<p>Thrombolysis in myocardial infarction (TIMI) risk score for STEMI is based on the following criteria: (Max 14 points)</p> <ul style="list-style-type: none"> a) Age \geq 75 - 3 point, Age 65 to 74 - 2 points b) Diabetes OR Hypertension OR Chronic angina (onset more than 2 weeks ago) OR New onset angina (Less than 2 weeks) - 1 point c) Systolic BP $<$100 mmHg - 3 points d) Heart Rate $>$ 100 beat per minute - 2 points e) Killip II-IV - 2 points f) Weight $<$ 67 kg - 1 point g) Anterior Leads: V1 to V4, Bundle Branch block (BBB) - 1 point h) Time to Treatment $>$4 - 1 point
TIMI Risk score for UA/NSTEMI	<p>Thrombolysis in myocardial infarction (TIMI) risk score for UA/NSTEMI is based on the following criteria: 1 point for each of the following criteria</p> <ul style="list-style-type: none"> a) Age \geq 65 b) At least 3 risk factors (Past medical history: dyslipidaemia, HPT, diabetes, premature cardiovascular disease family history status) c) Known CAD (stenosis \geq 50%) (Past medical history: Myocardial infarction history, Documented CAD $>$50% stenosis) d) ST (ECG) deviation \geq 0.5mm (ECG Abnormalities Type: ST-segment elevation \geq 1mm (0.1 mV) in \geq 2 contiguous leads, ST-segment elevation \geq 2mm (0.2 mV) in \geq 2 contiguous leads, ST-segment depression \geq 0.5mm (0.05 mV) in \geq 2 contiguous leads (includes reciprocal changes) e) Recent (\leq 24 hrs) Severe angina (\geq 2 angina in last 24 hrs) f) Use of anti-platelet agent (ASA) in last 7 days (Used at least one of ASA, ADP Antagonist) g) Elevated cardiac enzymes/markers: CK-MB (Peak CKMB value $>$ CKMB Reference Upper limit) and Troponin (Peak Troponin value $>$ Troponin Reference Upper limit)
Total cholesterol	The person's latest measured total cholesterol latest level before event (in mmol/L)
Total days of admission	Total number of days spent at reporting centre from the day of admission till the day of outcome, because of discharge, transfer or patient death

Triglycerides	The person's latest measured triglycerides latest level before event (in mmol/L)
Unstable angina	Angina (or other distinct chest pain patterns) without evidence of biochemical myocardial necrosis BUT with any 1 of the following: (1) Angina occurring at rest and prolonged >20mins; (2) New-onset angina of at least CCS III severity; (3) Recent acceleration of angina by at least 1 CCS class.
Waist circumference (cm)	Measures the patient's waist circumference at presentation. Measurements may be taken at any time prior to discharge. However measurements taken after prolonged hospitalization (>2 weeks) or following surgery or prolonged intensive unit stay may not be accurate
Weight (kg)	Measures the patient's weight in kg. Measurements may be taken at any time prior to discharge. However, measurements taken after prolonged hospitalization (>2 weeks) or following surgery or prolonged intensive unit stay may not be accurate