Critical data elements for Pharmacological Stress MPI
Forms the basis for the final report

Indications:
- ☐ Diagnosis of coronary artery disease
- ☐ Evaluation of severity of coronary artery disease
- ☐ Risk stratification- post MI/preoperative/multiple risk factors
- ☐ Assessment of acute chest pain
- ☐ Evaluation of myocardial viability

Clinical History:
- ☐ Known coronary artery disease
- ☐ No known coronary artery disease
- ☐ Typical angina
- ☐ Atypical chest pain
- ☐ SOBOE
- ☐ Heart failure
- ☐ Asymptomatic

Risk factors (optional):

Procedure:
- ☐ Protocol
- ☐ Pharm Stress agent used
- ☐ Peak heart rate (Dobutamine only)
- ☐ % maximal predicted heart rate (Dobutamine only)
- ☐ Symptoms
- ☐ Side effects
- ☐ Dose and type of agent used to reverse side effects
- ☐ ECG: Presence of LBBB or pacing
- ☐ ECG: Changes in response to Pharm stress agent (only if present)
- ☐ Interpretation of test (Dobutamine only)

For both rest and stress studies:
- ☐ Tomographic/non tomographic images
- ☐ Attenuation corrected/non attenuation corrected images
- ☐ Amount of activity injected (MBq)
- ☐ Radiopharmaceutical used
- ☐ Gated/non gated

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Clinical findings:

- Quality of the images
- Artifacts
- Size of the LV (rest/stress) (if enlarged)
- Size of the right ventricle (rest/stress) (only if applicable)
- Transient ischemic dilatation (on report if present)
- Location, size (small, medium, large) and severity (mild, moderate, severe) of defects (stress/rest)
- % of the myocardium that is ischemic/infarcted
- Fixed or reversible
- Viability
- Qualitative wall motion assessment
- Qualitative defects
- LVEF at rest and stress (% if abnormal) (Normal >55%; Mildly abnormal (45-54%; Moderately abnormal: 30-44%; Severely abnormal <30%)

Impression:

- Stress test results (for Dobutamine; for Persantine only if abnormal)
- Normal/abnormal
- Location of ischemia (size and severity) or fixed defect
- % of the myocardium that is ischemic/infarcted
- Viability (if applicable)
- Quantitative (% if abnormal)
- Comparison to previous study
- LV systolic function at rest (% of abnormal)
- LV systolic function post stress (% of abnormal)

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