Arch Obstruction Cath Data Collection Form

Study # _______  Date of Cath(DD/MMM/YYYY): ☐ ☐ \ ☐ ☐ \ ☐ ☐ ☐ ☐

Weight _____ kg  Height _______ cm  BSA _______ m2

Blood Pressure:  Systolic_______ mmHg

Diastolic_______ mmHg

Peak to Peak Arch Gradient _________ mmHg

Echo data concordant with re-intervention  Yes ☐  No ☐
Arch Obstruction Clinic Data Collection Form

Study # _______  Date of Clinic (DD/MMM/YYYY): ☐☐\☐☐\☐☐\☐☐☐

Weight _____ kg  Height ______ cm  BSA _____ m2

**Blood Pressure:** Upper Extremity  Systolic _____ mmHg

Diastolic _____ mmHg

**Blood Pressure:** Lower Extremity  Systolic _____ mmHg

Diastolic _____ mmHg
Arch Obstruction Echo Data Collection Form

Study #_______  Date of ECHO (DD/MMM/YYYY): ☐☐\☐☐\☐☐\☐☐\☐☐\☐☐\☐☐\☐☐

Weight _____kg  Height ______cm  BSA_______m2

SBP______mmHg  DBP______mmHg

Peak Arch Gradient_______mmHg
Mean Arch Gradient_______mmHg

Peak arch velocity _____m/s or cm/sec
Mean arch velocity _____m/s or cm/sec

Diameter of Narrowed Segment_______cm or mm
Diameter of Descending Aorta_______cm or mm

Subjective comments about Arch:  Narrowed  Yes☐  No☐  Not Recorded☐
Obstructed  Yes☐  No☐  Not Recorded☐
Stenotic  Yes☐  No☐  Not Recorded☐