SUPPLEMENTARY TABLE
PAD-UCD DATABASE DEFINITIONS
VERSION OCTOBER 29, 2012

Page 1: Demographics

Data Element	Definition
PtID	Patient ID, from the identification file
DOB	Date of birth, in mm/dd/yyyy
Gender	Male, female, or unknown
Race	Caucasian, Black, East Asian, South Asian, Hispanic, Other, or Unknown

Page 2: Baseline History

Data Element	Definition
PtID	Patient ID, from the identification file
Angio Date	Initial Angio date, starting with 6/1/2006
PMH CHF	History of heart failure, as documented by clinic note or hospital admission
PMH DM	History of DM, as documented by clinic note or HbA1C >7.0
PMH HTN	History of hypertension, as documented by clinic notes and/or prescription of antihypertensives.
PMH Dyslipidemia	History of dyslipidemia, as documented by clinic notes and/or taking statins, fibrates, or niacin
PMH CAD	History of documented CAD (cath, CABG or positive stress test)
PMH Stroke/TIA	History of documented stroke/TIA, as documented by clinic notes or hospital d/c
PMH ESRD	History of CrCl <30
PMH Malignancy	History of any malignancy, excluding noninvasive skin cancer
PMH COPD	History of COPD, as documented by clinic notes or hospital discharge
PMH Carotid Artery Stenosis	History of carotid artery stenosis, as documented by clinic notes, carotid artery revascularization, or carotid ultrasound showing stenosis >50%
PMH GI Bleed	History of any GI ulcer or bleeding, as documented by clinic notes, discharge, or endoscopy
PMH R leg amputated	History of right leg amputation (any amputation above the ankle)
PMH L leg amputated	History of left leg amputation (any

	amputation above the ankle)
Weight (kg)	Patient's weight in kg, within 3 months pre-procedure
Height (cm)	Patient's height in cm
Smoking history at baseline	Patient's smoking history pre-procedure (never, quit > 3 months ago, current, or unknown)
Attempted smoking cessation	Whether the patient attempted smoking cessation
Smoking history at 12 months	12 months post-procedure smoking status
Hormonal therapy	None, estrogen, progesterone, or combination
DM treatment	Treatment of DM with oral medications, insulin, or other injectables.
HbA1C at first visit	HbA1C value within 3 months pre-procedure
HbA1C at 12 months	HbA1C values 9-12 months post-procedure
Creatinine	Baseline creatinine, within 3 months pre-procedure
eGFR	Automatically calculated
1st visit SBP	SBP in mm Hg within 3 months pre-procedure
SBP at 12 months	SBP in mm Hg 9-12 months post-procedure
BP ACE	Whether patient was prescribed ACE inhibitor within 3 months pre-procedure
BP ARB	Whether patient was prescribed ARB inhibitor within 3 months pre-procedure
BP Beta Blocker	Whether patient was prescribed a beta blocker within 3 months pre-procedure
BP Ca Blocker	Whether patient was prescribed a calcium channel blocker within 3 months pre-procedure
BP lasix	Whether patient was prescribed lasix within 3 months pre-procedure
BP thiazide	Whether patient was prescribed a thiazide diuretic within 3 months pre-procedure
BP clonidine	Whether patient was prescribed clonidine within 3 months pre-procedure
BP minoxidil	Whether patient was prescribed minoxidil within 3 months pre-procedure
BP other med	Whether patient was prescribed any other anti-hypertensive medications within 3 months pre-procedure
Secondary cause of HTN	Whether patient has a history of pheochromocytoma, renal artery stenosis,

	fibromuscular dysplasia, steroids, or other contribution to HTN
Pre DUS	Whether a duplex ultrasound of the lower extremities was performed within 3 months pre-procedure
Pre CTA	Whether a CTA of the lower extremities was performed within 3 months pre-procedure
Pre MRA	Whether a MRA of the lower extremities was performed within 3 months pre-procedure
Post DUS	Whether a DUS of the lower extremities was performed within one year post-procedure
Post CTA	Whether a CTA of the lower extremities was performed within one year post-procedure
Post MRA	Whether a MRA of the lower extremities was performed within one year post-procedure
TC at baseline	Total cholesterol within 6 months pre-procedure
LDL at baseline	LDL within 6 months pre-procedure
HDL at baseline	HDL within 6 months pre-procedure
TG at baseline	Triglycerides within 6 months pre-procedure
TC at 1 year	Total cholesterol within 6-12 months post-procedure
LDL at 1 year	LDL within 6-12 months post-procedure
HDL at 1 year	HDL within 6-12 months post-procedure
TG at 1 year	Triglycerides within 6-12 months post-procedure
Statin	Type of statin the patient is prescribed
Other lipid med	Any other lipid medications the patient is prescribed
Other lipid med2	Any other lipid medications the patient is prescribed, if they are prescribed an additional two.
Reason not on statin	If patient has an indication for a statin, reason they are not taking it.
Walking exercise recommended	Whether walking exercise was recommended (applies to patients with claudication). If this is not definitely documented, list it as “unknown”
Aspirin	Whether patient taking aspirin pre-procedure

Clopidogrel	Whether patient taking clopidogrel pre-procedure
Ticlopidine	Whether patient taking ticlopidine pre-procedure
Prasugrel	Whether patient taking prasugrel pre-procedure
Cilostazol	Whether patient taking cilostazol pre-procedure
Coumadin	Whether patient taking coumadin pre-procedure
Aggrenox	Whether patient taking aggrenox pre-procedure
Pentoxifylline	Whether patient taking pentoxifylline pre-procedure
Other antiplatelet/antithrombotic	Whether patient taking any other antiplatelet or antithrombotic pre-procedure
Aspirin at 12 months	Whether patient taking aspirin at 9-12 months
Clopidogrel at 12 months	Whether patient taking clopidogrel at 9-12 months
Ticlopidine at 12 months	Whether patient taking ticlopidine at 9-12 months
Prasugrel at 12 months	Whether patient taking prasugrel at 9-12 months
Cilostazol at 12 months	Whether patient taking cilostazol at 9-12 months
Coumadin at 12 months	Whether patient taking coumadin at 9-12 months
Aggrenox at 12 months	Whether patient taking aggrenox at 9-12 months
Pentoxifylline at 12 months	Whether patient taking pentoxifylline at 9-12 months
Other antiplatelet/antithrombotic at 12 months	Whether patient taking any other antiplatelet or antithrombotic at 9-12 months

Page 3: Angiography

Data Element	Definition
Patient ID	Patient ID, from the identification file
Date of Admission	Admission Date for the associated angiogram
Date of Discharge	Discharge date for the associated angiogram
Date Symptom Onset	Date of symptom onset based on clinic or H&P notes. If date is a year, use 6/1/20xx. If date is months, use x/1/20xx. If note states "several months" of symptoms, date the symptoms as three months prior to the clinic visit. If note states "several years," date the symptoms as 6/1/20xx, where xx is three years before the year of the clinic visit.
Presentation	Symptoms at presentation, based on clinic notes
Rutherford	Rutherford Classification of symptoms (see appendix). Applies only to lower extremity disease. Rutherford class 1 = Mild claudication. Pain after walking more than 2 blocks Rutherford class 2 = Moderate claudication. Pain after walking 1-2 blocks Rutherford class 3 = Severe claudication. Pain after walking less than a block
Right ABI	Right ankle brachial index up to 3 months pre-procedure
Right TBI	Right toe brachial index up to 3 months pre-procedure
Left ABI	Left ankle brachial index up to 3 months pre-procedure
Left TBI	Left toe brachial index up to 3 months pre-procedure
Angio Date	Date of angiogram
Type of Procedure	Diagnostic, single vessel intervention, or multi-vessel intervention
Procedure Urgency	Elective, urgent, or emergency
Access Site	Access site, based on procedure description and/or angiogram. If a left sided lower extremity was intervened on from a right sided access, it's retrograde arterial access
Closure Device	If sheath left in at end of procedure, it is manual compression

Fluoro time (min)	Total fluoroscopy time in minutes
Contrast volume (mL)	Total contrast used in mL
Procedural Success	If diagnostic only, indicate. If intervention, success is defined as <30% stenosis in all target vessels at conclusion of procedure.
Access Site Complication	Whether there was an access site complication at the conclusion of the procedure.
Transfusion	Whether a blood transfusion was necessary during the procedure.
Death in Lab	Whether the patient died during the procedure
Stroke in Lab	Whether patient suffered a stroke during the procedure
MI in Lab	Whether the patient had an MI during the procedure
Contrast Reaction	Whether a contrast reaction occurred
Other Complication	Write-in any other complication

Page 4: Intervention

Data Element	Definition
Target Lesion 1	Target lesion for intervention
Length (mm)	Approximate lesion length, based on angiography
TASC Class	TASC II class, if applicable
Calcification	Semi-quantitative calcification score of the lesion, based on angiography
Thrombus	Whether there was thrombus in the target lesion
Chronic occlusion	Whether the lesion was a chronic occlusion
Max dia (mm)	Maximal diameter of vessel, based on balloon sizing
Restenosis intervention	Whether the intervention was performed for restenosis (due to in-stent restenosis or POBA restenosis)
Stent placed	Whether a stent was placed
PTA	Whether just balloon angioplasty was performed
Cutting balloon	Whether a cutting balloon was used
Atherectomy	Whether atherectomy was used
Thrombolysis	Whether thrombolysis was used
Aspiration	Whether aspiration thrombectomy was performed
Angiojet	Whether angiojet was used
Type stent	If a stent was placed, the type of stent used (see appendix)
Cryotherapy	Whether cryotherapy was used
Other technique	Whether another technique was used (write-in)
Complication	Whether a complication occurred in the target vessel. Dissection counts as a complication if it lead to prolonged balloon inflation and/or placement of a stent as treatment for bifurcation.
Success?	Whether there was procedural success (<30% stenosis at conclusion)

Page 5: Outcomes

Data Element	Definition
Patient ID	Patient ID, from the identification file
Angio Date	Date of the associated angiogram
Date last follow-up	Date of last available follow-up in the electronic medical record
Death	Whether patient died by point of last follow up
Date Death	Date of Death. If patient is known to be dead but date of death unknown, list the date as "1/1/1900"
MI	Whether an MI occurred during the follow up period
Date MI	Date of MI
Stroke	Whether a stroke occurred during the follow up period
Date stroke	Date of stroke
Right limb loss (above foot)	Whether right limb loss occurred during follow up, above the foot (i.e., a TMA does not count)
Date right limb loss	Date of limb loss
Left limb loss (above foot)	Whether left limb loss occurred during follow up, above the foot (i.e., a TMA does not count)
Date left limb loss	Date of limb loss during follow up period
Post R ABI 0-30 day	R Ankle brachial index at 0-30 day follow up
Post R TBI 0-30 day	R toe brachial index at 0-30 day follow up
Post L ABI 0-30 day	L Ankle brachial index at 0-30 day follow up
Post L TBI 0-30 day	L toe brachial index at 0-30 day follow up
Post Rutherford 30 day	Rutherford classification at 30 day clinic visit follow up
Target Lesion 1	Identification of target lesion 1
Lesion 1 12 month patency	Primary patency, primary assisted patency, secondary patency (see appendix definitions)
Lesion 1 target revasc	Whether lesion 1 had revascularization during the follow up period
Lesion 1 target revasc date	If target revascularization was performed, date
Lesion 1 urgent revasc	Whether lesion 1 was revascularized urgently during the follow up period
Lesion 1 urgent revasc date	If urgent revascularization was performed, date

Lesion 1 peak systolic velocity 0-30 days	Peak systolic velocity of the vessel at 0-30 days. Take highest PSV value within the lesion segment. If revascularization was performed prior to this measurement, list as "NA"
Lesion 1 0-30 days date	The actual date (mm/dd/20yy) on which the follow-up DUS was performed
Lesion 1 0-30 days >50% stenosis	Whether the official read of the DUS for that vessel was that there was a >50% stenosis (y/n)
Lesion 1 peak systolic velocity 4-6 months	Peak systolic velocity of the vessel at 4-6 months. Take highest PSV value within the lesion segment. If revascularization was performed prior to this measurement, list as "NA"
Lesion 1 4-6 months date	The actual date (mm/dd/20yy) on which the follow-up DUS was performed
Lesion 1 4-6 months >50% stenosis	Whether the official read of the DUS for that vessel was that there was a >50% stenosis (y/n)
Lesion 1 peak systolic velocity 9-12 months	Peak systolic velocity of the vessel at 9-12 months. Take highest PSV value within the lesion segment. If revascularization was performed prior to this measurement, list as "NA"
Lesion 1 9-12 months date	The actual date (mm/dd/20yy) on which the follow-up DUS was performed
Lesion 1 9-12 months >50% stenosis	Whether the official read of the DUS for that vessel was that there was a >50% stenosis (y/n)