



VA COOPERATIVE STUDIES PROGRAM # 424

Clinical Outcomes Utilizing Revascularization and Aggressive DruG Evaluation

Operations Memo No. 28

Date: November 17, 2000
From: Dr.s William E. Boden and Robert A. O'Rourke, Co-Chairmen
Subj: **ECG Collection Techniques**
To: All Study Personnel
Thru: Trial Leadership

All standard 12 lead resting ECGs are to be obtained using an ECG machine. They are not to be tracings taken from the treadmill test.

Rationale:

The standard recommendation when performing an exercise test is to obtain a resting, supine ECG with the limb leads in the standard position. Prior to exercise the limb leads are moved to the torso. However, this is not performed uniformly at all participating sites. Every physician and every exercise lab has a different approach to obtaining exercise stress tests and the order of the tracings prior to exercise.

When the coordinator selects a tracing from the treadmill test, there is no way of verifying where the leads have been placed or if the patient is supine or standing. This is a very important consideration when comparing ECGs serially. The core lab will be comparing all future ECGs to the baseline ECG. If any of the tracings are from a treadmill test it is possible that the measurements will not accurately reflect the level of ST depression or elevation for that patient. Therefore, we may be diagnosing a myocardial infarction when there is not one. It is also possible that we could miss the diagnosis since we are not comparing similar types of tests.

Please contact one of the study Co-Chairmen if you have any questions.