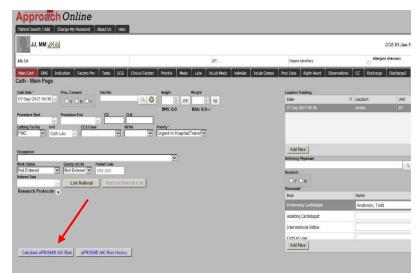


## **CONTRAST INDUCED APPROACH QUICK REFERENCE SHEET**

- 1. Enter information prior to procedure
- 2. Click Calculate ePRISM AKI Risk button on Main Cath page



3. Pop Up Window display will appear, review and click SAVE and Calculate button

| PRISM® Data input variables for A    | cute Kidney Injury    | / Dialysis Predictive Mod | lels               |        |  |
|--------------------------------------|-----------------------|---------------------------|--------------------|--------|--|
| AKI Pre-Procedure no contrast - Th   | e patient's risk of A | AKI .                     |                    |        |  |
| AKI Target Risk - The desired contr  | ast level to reduce   | the risk of AKI           |                    |        |  |
| Dialysis Pre-Procedure no contrast   | - The patient's risk  | of Dialysis               |                    |        |  |
| Age in years *                       | 54                    | ]                         |                    |        |  |
| Sex at birth *                       | Male                  | ~                         |                    |        |  |
| Race-Black or African American *     | • Y O N               |                           |                    |        |  |
| indications:                         |                       |                           |                    |        |  |
| AD Presentation *                    | NSTEMI                | 100                       |                    |        |  |
| actors Pre:                          |                       |                           |                    |        |  |
| ardiac Arrest *                      | ● Y ○ N               |                           |                    |        |  |
| Cardiogenic Shock *                  | • Y O N               |                           |                    |        |  |
| ABP *                                | • Y O N               |                           |                    |        |  |
| linical Factors:                     |                       |                           |                    |        |  |
| listory of Heart Failure *           | • Y O N               |                           |                    |        |  |
| eart Failure within 2 weeks *        | • Y O N               |                           |                    |        |  |
| iabetes *                            | • Y O N               |                           |                    |        |  |
| listory of Cerebrovascular Disease * | OY ON                 |                           |                    |        |  |
| abs:                                 |                       |                           |                    |        |  |
| fost Recent Serum Creatinine (µmo    | VL) 86                | 07-Sep-2017 11:45 🖂       | Creatinine (mg/dL) | 0.97   |  |
| lost Recent Hemoglobin (g/L) *       | 127                   | 07-Sep-2017 11:45         | Hemoglobin (g/dL)  | 12.7   |  |
| Saue and (                           | alculate Diek         | _                         |                    | Cancel |  |
| Save and C                           | Calculate Risk        |                           |                    | Cancel |  |

- 4. Risk Displayed and contrast cc recommendation (for ABOVE average and High Risk patients only)
  - Low Risk is in Green and no cc bar graph

Blue is Above Average

**Red is High Risk** 





- 5. **Communicate** the safe contrast volume limit to the cardiologist **PRIOR** to the start of the procedure if they have entered into the initiative
- 6. Enter LVEDP and Weight to obtain the recommend post procedure IV fluid order
- 7. **Communicate the recommended IV rate to the cardiologist if they have** entered into the initiative, indicate if they decide to follow the recommendations or not. If not please enter reason.

| ath Procedura  | Indication Factors Pre Tests  | ECG Clinical Factors                                   | PriorHx Meds                   | Labs        | InLab Meds | Valvular | InLab Comps                           | Proc Data | Right Heart    |
|--|---|--|--------------------------------|-------------|------------|----------|---------------------------------------|-----------|----------------|
| Access Sites   |   |  |                                |             |            |          |                                       |           |                |
| Access Type  | Access Site   | French Size  | Successful                     |             |            |          | Lock Interface                        |           |                |
|  | 20  |  | 1                              |             | -          | Pro      | cedures Complete<br>ocedures Category | ed<br>y   | Proces         |
|  | No da   | ta to display  |                                |             |            |          | Adjunct                               |           |                |
|  |   |  |                                |             | ~          | 100      | Diagnostic                            |           |                |
|  |   |  |                                |             | _          |          | Non-coronary -                        |           |                |
| Add New  |   |  |                                |             |            |          | Non-coronary -                        |           |                |
| Extent of Native Coro  |   |  | Initial Recommendation         | on 👘        |            |          | Peripheral Inte                       | rventions | ✓ □ P          |
| VEF - Angiography  | OY ON C   | ) NA   |                                |             |            |          | ints                                  |           |                |
| VEF - Angiography<br>Calc (%) Estin  | Entered V   | t Possible   | _                              |             |            | D        | evice                                 |           |                |
| adherence with LVED  | dure IV fluid orders in Why no<br>P fluid recommendations   | t adhered to LVEDP fluid reco                          | mmendations?*                  | )           |            | No       | sure Device                           | ~         | in Discharger  |
| 65 🕞 kg<br>Prescribed post-proce<br>alherence with LVED<br>Y • N<br>Wean PA (mg) Hg)   | dure IV fluid orders in Pluid recommendation Radiation Dose (mGy) Collina I Dase Collina I Collina I Dase Avoid LV/Aortogram Avoid LV/Aortogram Stage PCI   | cGycm2)<br>Dye 1 Volkey<br>0<br>0 Oye 2 Type           |                                | ye 2 Vol(cc | )<br>20    |          |                                       |           | n Dischargeu   |
| 65         kg           Vrescribed post-procedure         hypechal           Main PA (mail Hg)         Y         N           Main PA (mail Hg)         Y         Y           "Suport Time (mil)         O         Y           Pre BP (mm Hg)         O         Y           Ore BP (mm Hg)         O         Y           Ore SP (mm Hg)         O         Y   | P fluid recommendations Radiation Dose (mGy) Total DAP( Contrast memorations Avoid LVAtorogram D Avoid LVAtorogram Rotational or biplane anglography  | CGycm2)<br>Dye 1 Voltery<br>0 Gyc 1 Type<br>Dye 2 Type | e C<br>Tet. Dye Vol(cc)<br>0 ♀ |             |            |          |                                       |           | nt Discharged  |
| 65 € kg<br>Prescribed post-proce<br>Mean PA (mea Hg)<br>Proce Dime (min)<br>Pre BP (mm Hg)<br>€ /<br>ABP   | P fluid recommendations  Radiation Dose (mGy) Total DAPi Contract mechanisms Contract | Cfyrm2)<br>Dyn 1 Yoler - Dyn 1 Type<br>0<br>Dyn 2 Type | rot. Dye Vol(cc)<br>v 0 ↔      |             |            |          |                                       |           | n oriental geo |
| AS kg<br>AS kg<br>Arrescribed post-freed<br>Arrescribed post-freed<br>V ≤ N<br>V ≤ N<br>Hean PA (mar Hg)<br>Tisoro Time (mi)<br>Arrescribed post-freed<br>V ≤ N<br>Arrescribed post-freed<br>Arrescribed | P fluid recommendations  Radiation Dose (mGy) Total DAPi Contract mechanisms Contract | Cfyrm2)<br>Dyn 1 Yoler - Dyn 1 Type<br>0<br>Dyn 2 Type | rot. Dye Vol(cc)<br>v 0 ↔      |             |            |          |                                       |           |                |

8. Enter actual contrast volume used + any strategies used to minimize contrast volume

| ath Procedura   | I Data   |   |   |         |                           |                |
|---|--|---|---|---------|---------------------------|----------------|
| Access Sites  | Access Site  | French Size   | Successful                                  |         | Lock Interface Updates    |                |
| Access Type   | Access Site  | French Size   | Successrui                                  |         | Procedures Completed      |                |
|   | Ne   | o data to display   |   | ~       | Procedures Category       | Proce          |
|   |  |   |   |         | Diagnostic                |                |
|   |  |   |   | ~       | Non-coronary - Congenital |                |
| Add New   |  |   |   |         | Non-coronary - Structural |                |
| stent of Native Coro  | pary Artery Disease Instent Throm  | hosis Angiographers   | Initial Recommendation                      |         | Peripheral Interventions  |                |
|   | - OY 01  | N O NA  |   |         | Counts                    |                |
| /EF - Angiography<br>Calc (%) Estin   |  |   |   |         | Counts Device             |                |
|   | Entered V  | © Not Possible  |   |         |                           |                |
| VEDP (mm Hg)  | Recommended LVEDP directed post-p  |   |   | L/hr)   |                           |                |
| 3   | 5 ml/kg/hr for LVEDP < 13 mm   | Hq  | 325   | -0-     |                           |                |
| Weight  |  |   |   |         |                           | ent Discharged |
|   |  |   |   |         |                           |                |
| 65 😌 kg   |  |   |   |         | None                      |                |
| rescribed post-proce  | edure IV fluid orders in Why   | not adhered to LVEDP fluid reco                                       | ommendations?                               |         | None                      |                |
| rescribed post-proc<br>dherence with LVED   | edure IV fluid orders in Why<br>P fluid recommendations  | v not adhered to LVEDP fluid reco                                     | ommendations?*                              | ~       | None                      |                |
| rescribed post-proce  | edure IV fluid orders in Why<br>P fluid recommendations  | v not adhered to LVEDP fluid reco                                     | ommendations?*                              | 0       | None                      |                |
| Prescribed post-proce<br>dherence with LVED   | P fluid recommendations  | r not adhered to LVEDP fluid reco                                     | ommendations?*                              |         | None                      |                |
| trescribed post-proce<br>dherence with LVED<br>O Y  N<br>Mean PA (mm Hg)  | P fluid recommendations  | AP(cGycm2)  |   | ~       | None 💌                    |                |
| trescribed post-proce<br>dherence with LVED<br>O Y  N<br>Mean PA (mm Hg)  | P fluid recommendations<br>Radiation Dose (mGy) Total D<br>Contrast Minimization Strategies  | AP(cGycm2)<br>⊖<br>Dye 1 Yorkec) Dye 1 Typ                            | e Dye 2                                     | Vol(cc) | None 😒                    |                |
| trescribed post-proce<br>dherence with LVED<br>O Y  N<br>Mean PA (mm Hg)  | P fluid recommendations Radiation Dose (mGy) Total D Contrast Minimization Strategies Avoid LV/Aortogram   | AP(cGycm2)<br>Dye 1 Volker) Dye 1 Typ<br>0 O                          |   | ~       | None 😒                    |                |
| trescribed post-proce<br>dherence with LVED<br>O Y  N<br>Mean PA (mm Hg)  | P fluid recommendations  Radiation Dose (mGy) Total D  Contrast Minimization Strategies  Avoid LV/Aortogram Rotational or biplane anglograph   | AP(cGycm2)<br>Dye 1 Volkec)<br>Dye 2 Type<br>Dye 2 Type               | e Dye 2<br>✓ 0                              | Vol(cc) | None 🕑                    |                |
| trescribed post-proce<br>dherence with LVED<br>O Y  N<br>Mean PA (mm Hg)  | P fluid recommendations Radiation Dose (mGy) Total D Contrast Minimization Strategies Avoid LV/Aortogram   | AP(cGycm2)<br>Dye 1 Volkec)<br>Dye 2 Type<br>Dye 2 Type               | e Dye 2<br>↓ 0<br>Tot. Dye Vol(cc)          | Vol(cc) | None 🔽                    |                |
| rescribed post-proc<br>dherence with LVED<br>○ Y ● N<br>lean PA (mm Hg)<br>Suoro Time (min)   | P fluid recommendations Radiation Dose (mGy) Total D Contrast Minimization Strategies Avoid LVAroforgram Rotational or biplane anglograph Stage PCI  | AP(cGycm2)<br>Dre 1 Voice<br>Dre 2 Type                               | e Dye 2<br>▼ 0<br>Tot. Dye Vol(cc)<br>∑ 0 ↔ | Vol(cc) | None 💟                    |                |
| respring the transformer that | P fluid recommendations  Radiation Dose (mGy) Total D  Contrast Minimization Strategies  Avoid LV/Aortogram Rotational or biplane anglograph   | AP(cGycm2)<br>De 1796c<br>Dye 2 Type<br>N<br>H(b)<br>Post HR (bpt     | e Dye 2<br>▼ 0<br>Tot. Dye Vol(cc)<br>∑ 0 ↔ | Vol(cc) | None 🔽                    |                |
| rescribed post-proc<br>dherence with LVED<br>○ Y ● N<br>lean PA (mm Hg)<br>luoro Time (min)<br>the BP (mm Hg)   | P fluid recommendations      Radiation Dose (mGy) Total D      Control to the test of      | AP(cGycm2)<br>De 190%cc Dye 1 Typ<br>Dye 2 Type<br>n Hg) Post HR (bp) | e Dys 2<br>Tot. Dys Vol(cc)<br>0 \$         | Vol(cc) | None 💟                    |                |
| rescribed post-proc<br>dherence with LVED<br>○ Y ● N<br>lean PA (mm Hg)<br>luoro Time (min)<br>the BP (mm Hg)   | P fluid recommendations  Radiation Does (mGy)  Total D  Commandation Strategie  A word UV/Antorgam  Radiational or biplane anglograp  Stage PCI  PH HR (bpm) Post BP (m  PH R (bpm) Pos | AP(cGycm2)<br>De 1796c<br>Dye 2 Type<br>N<br>H(b)<br>Post HR (bpt     | e Dys 2<br>Tot. Dys Vol(cc)<br>0 \$         | Vol(cc) | None 🔽                    |                |
| rescribed post-proce<br>difference with LVED<br>○ Y ○ N<br>dean PA (mm Hg)<br>↓uoro Time (min)<br>Yre BP (mm Hg)<br>○ / ABP   | P fluid recommendations Redistion Does (mDy) Total E Confirmed Minimization Strengtes Confirmed Minimization Strengtes Confirmed Strengtes Confirm | AP(cGycm2)<br>De 1796c<br>Dye 2 Type<br>N<br>H(b)<br>Post HR (bpt     | e Dys 2<br>Tot. Dys Vol(cc)<br>0 \$         | Vol(cc) | None 🗵                    |                |
| rescribed post-proceed<br>diverse with LVED<br>○ Y • N<br>Hean PA (mm Hg)<br>Suoro Time (min)<br>Yre BP (mm Hg)<br>○ / ↓<br>ADP<br>○ Y • N  | P fluid recommendations Redistion Does (mDy) Total E Confirmed Minimization Strengtes Confirmed Minimization Strengtes Confirmed Strengtes Confirm | AP(cGycm2)<br>De 1796c<br>Dye 2 Type<br>N<br>H(b)<br>Post HR (bpt     | e Dys 2<br>Tot. Dys Vol(cc)<br>0 \$         | Vol(cc) | None 🕑                    |                |
| reacritised post-proceeds<br>determine with VED<br>$Y \oplus N$<br>kean PA (nm Hg)<br>blooro Time (min)<br>Ye BP (mm Hg)<br>$Y \oplus N$<br>https://www.second.com/<br>ABP<br>$Y \oplus N$<br>https://www.second.com/<br>$Y \oplus N$   | P fluid recommendations Redistion Does (mDy) Total E Confirmed Minimization Strengtes Confirmed Minimization Strengtes Confirmed Strengtes Confirm | AP(cGycm2)<br>De 1796c<br>Dye 2 Type<br>N<br>H(b)<br>Post HR (bpt     | e Dys 2<br>Tot. Dys Vol(cc)<br>0 \$         | Vol(cc) | None 🗵                    |                |

- 9. **Complete a minimum** of 2 hours and up to 4 hours of post-procedure IV fluids **for above average and high risk patients** before discharge.
- 10. Provide the one page patient information sheet and lab requisition to above average and high risk patients.
- 11. Provide the Primary Care Physician letter for above average and high risk patients.