



CRP: c-reactive protein ; ESR: erythrocyte sedimentation rate; hs-CRP: high sensitivity CRP

<sup>1</sup> **G-1. cMR abnormalities:**

- Edema on T2 weighted study, typically patchy
- Late gadolinium enhancement on T1 weighted images with an increased enhancement ratio between myocardial and skeletal muscle typically involving ≥1 non-ischemic regional distribution with recovery (myocyte injury)

<sup>2</sup> **F-1. Echocardiogram abnormalities:**

- New focal or diffuse left or right ventricular function abnormalities (e.g., decreased ejection fraction)
- Segmental wall motion abnormalities
- Global systolic or diastolic function depression/abnormality
- Ventricular dilation
- Wall thickness change

<sup>3</sup> **A-1. Cardiac symptoms:**

- Acute chest pain or pressure
- Palpitations
- Dyspnea after exercise, at rest, or lying down
- Diaphoresis
- Sudden death

<sup>4</sup> **A-2. Non-specific symptoms:**

- Fatigue
- Abdominal pain
- Dizziness or syncope
- Edema
- Cough

<sup>5</sup> **A-3. Infant/child non-specific symptoms:**

- Irritability
- Vomiting
- Poor feeding
- Tachypnea
- Lethargy

<sup>6</sup> **E-1. EKG abnormalities:**

- Paroxysmal or sustained atrial or ventricular arrhythmias (premature atrial or ventricular beats, and/or supraventricular or ventricular tachycardia, interventricular conduction delay, abnormal Q waves, low voltages
- AV nodal conduction delays or intraventricular conduction defects (atrioventricular block [grade I-III], new bundle branch block)
- Continuous ambulatory electrocardiographic monitoring that detects frequent atrial or ventricular ectopy

<sup>7</sup> **E-2 Non-specific EKG abnormalities:**

- ST-segment or T-wave abnormalities (elevation or inversion)
- Premature atrial and ventricular contractions
- Newly reduced r-wave height, low voltage or abnormal q waves