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|  |  | **Organizational Identifiers** |  |  |
|  | VAMC  CONTROL  QIC  BEGDTE  REVDTE | Facility ID  Control Number  Abstractor ID  Abstraction Begin Date  Abstraction End Date | Auto-fill  Auto-fill  Auto-fill  Auto-fill  Auto-fill |  |
|  |  | **Patient Identifiers** |  |  |
|  | SSN  PTNAMEF  PTNAMEL  BIRTHDT  SEX  MARISTAT  RACE | Patient SSN  First Name  Last Name  Birth Date  Sex  Marital Status  Race | Auto-fill: no change  Auto-fill: no change  Auto-fill: no change  Auto-fill: no change  Auto-fill: can change  Auto-fill: no change  Auto-fill: no change |  |
|  |  | **Index FOBT** |  |  |
| 1 | indfobtdt | Enter the date of the index fecal occult blood test (FOBT) completed during the timeframe from 4/01/2011 through 3/31/2012. | mm/dd/yyyy  **Computer will pre-fill from pull list**   |  | | --- | | >= 04/01/2011 and <= 03/31/2012 | | Computer will pre-fill the date of the index FOBT completed during the specified timeframe. |
| 2 | indfobt | Is there documentation of the index FOBT in the medical record on (computer to display indfobtdt)?  1. Yes  2. No | 1,2  If 1, auto-fill othfobt as 95, othfobtdt as 99/99/9999, and go to fobtype | In order to answer “1”, FOBT results must be documented in the medical record.  Patient self-report of FOBT is NOT acceptable.  Suggested data sources: lab reports, VISTA imaging |
| 3 | othfobt | During the timeframe from (computer to display indfobtdt – 180 days to indfobtdt + 180 days), is there documentation of FOBT in the medical record?   1. Yes 2. No   95. Not applicable | 1,2,95  Will be auto-filled as 95 if indfobt = 1  **If 2, go to fpretac** | In order to answer “1”, FOBT results must be documented in the medical record.  Patient self-report of FOBT is NOT acceptable.  Suggested data sources: lab reports, VISTA Imaging |
| 4 | othfobtdt | Enter the date of the most recent FOBT completed during the timeframe from (computer to display indfobtdt – 180 days to indfobtdt + 180 days). | mm/dd/yyyy  Will be auto-filled as 99/99/9999 if indfobt = 1   |  | | --- | | <= 180 days prior to or after indfobtdt | | If more than one FOBT was completed during the specified timeframe, enter the date of the most recent FOBT result. |
| 5 | fobtype | What type of FOBT was performed?  1. Guaiac (gFOBT)  2. Immunochemical (iFOBT/FIT)  99. Unable to determine | 1,2,99 | If unable to determine whether the fecal occult blood testing was guaiac (gFOBT) or immunochemical (iFOBT), select “99”.  Suggested data source: lab reports |
| 6 | ifobtnum | Enter the number of FOBT results reported in the record on (computer to display indfobtdt or othfobtdt). | \_\_   |  | | --- | | Whole numbers 1 - 3 | | Enter the exact number of FOBT results reported on the date entered in INDFOBTDT or OTHFOBTDT. |
| 7 | fobtpos | Was at least one result of the most recent FOBT or (set of screening FOBTs) reported as positive?  1. Yes  2. No | 1,2 | If at least one FOBT test result was reported as positive, select “1”. If all reported results were negative, select “2”. |
| 8 | whyfobt | What reason (indication) for performing the FOBT was documented by the physician/APN/PA?  3. Screening  4. Diagnostic (bleeding, anemia, etc.)  99. No reason documented or unable to determine | 3,4,99 | Look in progress notes surrounding the date the FOBT was ordered for documentation of the reason (indication) by the physician/APN/PA.  If request for FOBT (e.g., stool cards given to patient) is documented in a Colorectal Cancer Screening Clinical Reminder note and there is NO documentation of a diagnostic indication, enter “3”.  Suggested data source: progress notes |
| 9 | fpretac | Prior to the most recent FOBT (or prior to 4/01/2011 if FOBT not found), is there evidence in the record that the patient had a total abdominal colectomy?  1. Yes  2. No | 1,2 | **Total abdominal colectomy** = Complete removal of the colon including the rectum |
| 10 | lifexpec | During FY2011 or FY2012, is there documentation that the patient’s life expectancy was less than 6 months?   1. Yes 2. No | 1,2 | Patient’s life expectancy of less than six months must be documented on the problem list or in the computer field “health factors,” without exception. |
|  |  | **Colonoscopy** |  |  |
| 11 | fcolnpx | Is there documentation of a colonoscopy performed during the 10 years prior to the index FOBT (or if no index FOBT, 10 years prior to 4/01/2011)?  1. Yes  2. No | 1,2  **If 2, go to nindfobt** | Search procedure reports, surgical reports, progress notes, and VISTA imaging for documentation that a colonoscopy was performed during the 10 years prior to the index FOBT (INDFOBTDT or OTHFOBTDT). |
| 12 | fcolndt | Enter the date the most recent colonoscopy was performed. | mm/dd/yyyy   |  | | --- | | If indfobt = 1,  <= 10 years prior to indfobtdt and < indfobtdt  If othfobt = 1, <= 10 years prior to othfobtdt and < othfobtdt  If othfobt = 2, <= 10 years prior to 04/01/2011 and < 04/01/2011 | | If more than one colonoscopy was performed during the 10 years prior to the index FOBT, enter the date of the most recent colonoscopy. |
| 13 | fcolnva | Was the colonoscopy performed (or paid for) by the VHA?  1. Yes  2. No | 1,2  If 2, go to nindfobt | If the colonoscopy was performed in the VHA, enter “1”. For the purpose of this question, if documentation clearly indicates the colonoscopy was performed as fee-basis (e.g., consult request for fee-basis colonoscopy), consider the colonoscopy to be performed (paid for) by the VHA and enter “1”.  If the colonoscopy was performed outside the VHA or unable to determine if fee-basis, answer “2”. |
| 14 | fcolnrpt | Was the colonoscopy procedure report found in the medical record?  3. Procedure report found in CPRS  4. Procedure report found in VISTA imaging  99. Procedure report not found in medical record | 3,4,99  If 99, go to nindfobt | If the actual colonoscopy procedure report is not found in CPRS or VISTA imaging, enter “99”.  Suggested data sources: notes, consults, procedures, VISTA imaging |
| 15 | anatext | Is there documentation of the anatomic **extent reached** during the most recent colonoscopy?  1. Yes  2. No | 1,2  If 2, auto-fill anareach as 95, and go to qualprep | Anatomic extent reached may be documented under a heading (e.g., **Extent of Examination:** Cecum) or in body of procedure report/note. For example:  **Description of Procedure and Findings:** Informed consent was obtained. Rectal examination by finger was unremarkable. The scope was introduced all the way up to the cecum without any difficulty. |
| 16 | anareach | Is there documentation the cecum, appendix, appendiceal orifice, ileum, or small bowel was reached during the most recent colonoscopy?  1. Yes  2. No  95. Not applicable | 1,2,95  Will be auto-filled as 95 if anatext = 2 | If there is documentation that the cecum, appendix, appendiceal orifice, ileum, or small bowel was reached during the colonoscopy, answer “1”. |
| 17 | qualprep | Is there documentation of the **quality of bowel preparation** in the most recent colonoscopy report?  1. Yes  2. No | 1,2  If 2, auto-fill poorprep as 95, bprep as 95, and go to nindfobt | Quality of preparation may be documented under a heading or in the body of the procedure report/note. For example:  **Quality of Preparation:** Excellent. |
| 18 | poorprep | Is there any mention of the bowel preparation being suboptimal, poor, or inadequate in the index colonoscopy report/note?  1. Yes  2. No  95. Not applicable | 1,2,95  Will be auto-filled as 95 if qualprep = 2 | If there is any mention that the quality of bowel preparation was suboptimal, poor, or inadequate (or similar term indicating the prep was unsatisfactory), answer “1”. |
| 19 | bprep1  bprep2  bprep3  bprep4  bprep5  bprep95  bprep99 | Indicate the quality of bowel preparation documented in the procedure report/note.  **Indicate all that apply:**  1. Adequate (or satisfactory)  2. Good (or excellent)  3. Fair  4. Inadequate (or unsatisfactory)  5. Suboptimal (or poor)  95. Not applicable  99. None of the above or unable to determine | 1,2,95  Will be auto-filled as 95 if qualprep = 2  Cannot enter 99 with any other number  Cannot enter 1 or 2 with 3, 4, or 5 | Select the value(s) that indicate the quality of bowel preparation documented in the procedure report/note. If the term used to describe the quality of bowel preparation is not listed or is not similar to one of the terms listed, select “99”.  If quality of bowel prep documentation is conflicting (e.g. adequate except cecum was poor), select “99”. |
|  |  | **Non-index FOBT** |  |  |
| 20 | nindfobt | During the 12 months prior to the FOBT on {computer to display (indfobtdt or othfobtdt) OR (if othfobt = 2, 4/01/2011)}, does the medical record contain results of another FOBT?  1. Yes  2. No | 1,2  **If 2, go to end** | * In order to answer “1”, there must be documentation of the FOBT results during the 12 months prior to the FOBT completed on the date entered in INDFOBTDT or OTHFOBTDT. * Do not consider any FOBT result that was part of serial screening for FOBT performed on date entered in INDFOBTDT or OTHFOBTDT. * Patient self-report of FOBT is NOT acceptable.   Suggested data sources: lab reports, VISTA imaging |
| 21 | nfobtdt | Enter the date of the most recent FOBT completed prior to the index FOBT. | mm/dd/yyyy   |  | | --- | | If indfobt = 1,  <= 12 months prior to indfobtdt and < indfobtdt  If othfobt = 1, <= 12 months prior to othfobtdt and < othfobtdt  If othfobt = 2, <= 12 months prior to 04/01/2011 and < 04/01/2011 | | Enter the exact date. |
| 22 | nfobtype | What type of FOBT was performed?  1. Guaiac (gFOBT)  2. Immunochemical (iFOBT/FIT)  99. Unable to determine | 1,2,99 | If unable to determine whether the fecal occult blood testing was guaiac (gFOBT) or immunochemical (iFOBT), select “99”.  Suggested data source: lab reports |
| 23 | nifobtnum | Enter the number of FOBT results reported in the record on (computer to display nfobtdt). | \_\_   |  | | --- | | Whole numbers 1 - 3 | | Enter the exact number of FOBT results reported on the date entered in NFOBTDT. |
| 24 | nfobtpos | Was at least one result of the most recent FOBT (or set of screening FOBTs) reported as positive?  1. Yes  2. No | 1,2 | If at least one FOBT test result was reported as positive, select “1”. If all reported results were negative, select “2”. |