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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  FIN  PTNAMEF  PTNAMEL  BIRTHDT  SEX  MARISTAT  RACE  Ethnicity | Patient SSN  FIN  First Name  Last Name  Birth Date  Sex  Marital Status  Race  Ethnicity | Auto-fill: no change  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  Auto-fill: no change |  |
| 1 | neurodt | Enter the date of the most recent outpatient neurology encounter during the timeframe from 10/01/2016 to 09/30/2020. | mm/dd/yyyy  Computer will pre-fill   |  | | --- | | >= 10/01/2016 and <=09/30/2020 | | Computer will prefill the date of the most recent outpatient neurology encounter during the specified timeframe. |
| 2 | validenc | On (computer to display neurodt) is there documentation of an outpatient encounter with a neurology physician/APN/PA.  1. Yes  2. No | 1,2  If 1 go to neuroenc | An outpatient neurology encounter may include:   * Face-to-face visit * Telehealth visit * Telephone note * e-Consult   **Exclude** encounters that were for the purpose of procedures only, such as electroencephalograms (EEGs), telephone calls to inform patient of test results.  **Exclude** encounters that were at non-VHA facilities. |
| 3 | neurodt2 | During the timeframe from 10/01/2016 to 09/30/2020, enter the date of the most recent outpatient neurology encounter at a VHA facility. | mm/dd/yyyy   |  | | --- | | >= 10/01/2016 and <= 09/30/2020 |   Abstractor may enter 99/99/9999.  **If 99/99/9999, the case is excluded.** | **Enter the exact date.**  An outpatient neurology encounter may include:   * Face-to-face visit * Telehealth visit * Telephone note * e-Consult   **Exclude** encounters that were for the purpose of procedures only, such as electroencephalograms (EEGs), telephone calls to inform patient of test results.  **Exclude** encounters that were at non-VHA facilities.  **If there is no VA outpatient neurology encounter in the specified timeframe, enter 99/99/9999**  **Suggested data sources:** Neurology notes, neurology clinic notes, Seizure clinic notes, neurology telephone notes, tele-video notes  **Exclusion Statement**: **Although the sample information indicated the patient had a neurology outpatient encounter, medical record documentation did not find an encounter within the specified timeframe.** |
| 4 | neuroenc | On (if validenc = 1, computer to display neurodt or if validenc = 2, computer to display neurodt2) is there documentation of the patient’s seizure management by a neurology physician/APN/PA?  1. Yes  2. No | 1,2  If 2, go to brvdt1 | Documentation of the patient’s seizure (epilepsy) management may include but is not limited to:   * Evaluation of antiepileptic drug (AED) effects * A numerical report of seizure frequency, e.g., 1 seizure per week, 2 seizures in past month, etc. * “Patient is seizure free” * “No change in frequency of seizures” * “Continues to have absence seizures several times a month.”   **Suggested data sources:** Neurology notes, neurology clinic notes, Seizure clinic notes, neurology telephone notes, tele-video notes |
| 5 | sznum | For the neurology encounter on (if validenc = 1, computer to display neurodt or if validenc = 2, computer to display neurodt2), select the number of seizures within the past year documented by a neurology physician/APN/PA.  1. 0 or no seizures  2. 1 - 5  3. 6 - 10  4. > 10  99. Number of seizures within past year not documented or unable to determine | 1,2,3,4,99  If 1 or 99, go to brvdt1 | Select the option that corresponds with the number of seizures documented within the past year.   * Physicians may use terms such as spells, events, blank stares, episodes to describe seizure activity. * Other descriptions of seizure activity may include but are not limited to: * Generalized tonic-clonic (GTC) (grand mal) seizures * Absence seizures (petit mal) other terms include * Focal seizures (partial seizures) * Any type of seizure activity documented should be counted when determining the number of seizures. * Examples of documentation: * “Patient has had only 1 generalized tonic-clonic seizure (GTC) since last visit”; * “Continues to have 1 - 2 staring spells with loss of consciousness (LOC) 2 or 3 times a week.” * If the exact number is not documented, it may be calculated.   **Examples:**   * 1 - 2 GTC/month x 12 months = 12 - 24 in past year and 5 - 6 spells/month x 12 months = 60 - 72 in past year. Select value “4”. * Provider notes 2 seizures last month without other documentation (no mention of past year). Select value “2”. |
| 6 | szdt | During the timeframe from [(if validenc = 1, computer to display neurodt – 12 months to neurodt) OR (if validenc = 2, computer to display neurodt2 – 12 months to neurodt2)], enter the date of the most recent seizure documented by a neurology physician/APN/PA. | mm/dd/yyyy  Abstractor may enter 99/99/9999   |  | | --- | | If validenc = 1, <= 1 year prior to or = neurodt OR If validenc = 2, <= 1 year prior to or = neurodt2 | | Enter the exact date if documented. If the exact date is not documented, it may be estimated.  **Example:** If a note is dated 11/16/2019 and indicates the most recent seizure was 2 months ago, enter “09” for the month, 01 for day and 2019 for year. If there is no reference to how long ago the most recent seizure was and the year is known, but not the month or day, enter “07” for month and “15” for the day.  If there is no documentation of when the most recent seizure was and there is no way to estimate, enter 99/99/9999. |
| **If case is flagged for brivaracetam (Briviact) go to brvdt1, else go to clbdt1** | | | | |
| 7 | brvdt1  brvdos1 | Enter the earliest date brivaracetam (Briviact) was first prescribed and the initial total daily dose.   |  |  |  |  | | --- | --- | --- | --- | | Date (mm/dd/yyyy)   |  | | --- | | >= 10/01/16 and <= 09/30/2020 | | Dose ( \_ \_ \_) mg/day   |  | | --- | | > 0 and <= 600 | | |  |  | | mm/dd/yyyy  Computer to prefill date and initial total daily dose | Computer will prefill the earliest date brivaracetam (Briviact) was first prescribed and the initial total daily dose. |
| 8 | valbrvdt | On (computer to display brvdt1) is there documentation the patient was prescribed brivaracetam (Briviact)?  1. Yes  2. No | 1,2  If 2, go to docbrvdt | Brivaracetam (Briviact) is an antiepileptic drug (AED) used for treatment of seizures.  Please review all suggested data sources for prescription of brivaracetam (Briviact) on the specified date.  In order to select “1,” brivaracetam (Briviact) must be listed among the patient’s medications recorded during the specified timeframe or entered in the pharmacy package.   * If there is documentation the drug was prescribed, but also documentation the patient did not start or take the drug, select value “2”.   **Suggested data sources:** neurology note, neurology clinic notes, physician orders, pharmacy package |
| 9 | valbrvdos | On (computer to display brvdt1), was the total daily dose documented as (computer to display brvdos1).  1. Yes  2. No | 1,2  If 2, go to docbrvdos | Confirm that the total daily dose of brivaracetam (Briviact) displayed matches the total daily dose found in the medical record on the specified date.  For example, patient prescribed 25 mg twice per day, the total daily dose would be 50 mg.  If the dose found in the medical record is not the same as the dose displayed, select value “2” |
| 10 | ptbrvdos1 | During the timeframe from (computer to display brvdt1) to 9/30/2020, is there documentation that the patient was taking the total daily dose of (computer to display brvdos1) that was prescribed?   1. Yes 2. No | 1,2  If 1 or 2, go to szprebrv | Confirm that the patient reports taking the total daily dose of brivaracetam (Briviact) displayed.  Ensure that there is no conflicting documentation in the notes indicating the patient was not taking the daily dose as prescribed.  For example, patient prescribed 25 mg twice per day (total daily dose of 50 mg), but notes indicate “patient reports only taking brivaracetam (Briviact) one per day (i.e. total daily dose of 25 mg).  If there is documentation the patient is not taking the total daily dose as indicated or no information about the dose the patient is taking , select value “2”  **Suggested Data Sources:** neurology notes (clinic visits, telehealth, telephone), medication reconciliation note, physician orders, pharmacy package |
| 11 | docbrvdt | During the timeframe from 10/01/2016 to 09/30/2020 enter the earliest documented date brivaracetam (Briviact) was first prescribed. | mm/dd/yyyy   |  | | --- | | >= 10/01/16 and <= 09/30/2020 |   Abstractor may enter 99/99/9999   |  | | --- | | **Warning if 99/99/9999** |   If 99/99/9999 go to lcmdt1 as applicable | Please review all suggested data sources for prescription of brivaracetam (Briviact) during the specified timeframe and enter the date the medication was first prescribed.  In order to select “1,” brivaracetam (Briviact) must be listed among the patient’s medications recorded during the specified timeframe or entered in the pharmacy package.   * If there is documentation the drug was prescribed, but also documentation the patient did not start or take the drug, enter 99/99/9999.   **If there is no documentation brivaracetam (Briviact) was prescribed during the specified timeframe, enter 99/99/9999.**  **Suggested data sources:** neurology note, neurology clinic notes, physician orders, pharmacy |
| 12 | docbrvdos | Enter the total daily dose of brivaracetam (Briviact) documented on (if valbrvdos = 2, computer to display brvdt1; else display docbrvdt). | \_ \_ \_ mg/day   |  | | --- | | > 0 and <= 600 | | Enter the total daily dose of brivaracetam (Briviact) prescribed on the specified date.  **Suggested data sources:** physician orders, pharmacy package, neurology notes |
| 13 | ptbrvdos2 | Is there documentation that the patient was taking the total daily dose of (computer to display docbrvdos) that was prescribed?   1. Yes 2. No | 1,2 | Confirm that the patient reports taking the total daily dose. Ensure that there is no conflicting documentation in the notes indicating the patient was not taking the daily dose as prescribed.  For example, patient prescribed 25 mg twice per day (total daily dose of 50mg), but notes indicate “patient reports only taking brivaracetam (Briviact) one per day (i.e. total daily dose of 25 mg)  If there is conflicting information, select value “2”  **Suggested Data Sources:** physician orders, pharmacy package, neurology notes |
| 14 | szprebrv | During the timeframe from [(If valbrvdt = 1, computer to display brvdt1 – 12 months) OR if valbrvdt = 2, computer to display docbrvdt - 12 months)] to (If valbrvdt = 1, computer display brvdt1 OR if valbrvdt = 2, computer to display docbrvdt), select the number of seizures documented by a neurology physician/APN/PA within the year before starting brivaracetam (Briviact).  1. 0 or no seizures  2. 1 - 5  3. 6 - 10  4. > 10  99. Number of seizures within the year before starting the medication not documented or unable to determine | 1,2,3,4,99 | Start reviewing with the most recent encounter prior to the date brivaracetam (Briviact) was first prescribed, and look for documentation of the number of seizures during the year prior to the specified date.  Select the option that corresponds with the number of seizures documented within the year before starting brivaracetam (Briviact). Includes any type of seizure activity documented, e.g., “Only 1 generalized tonic-clonic (GTC) since last visit”; “Continues to have 1 - 2 staring spells with loss of consciousness (LOC) 2 or 3 times a week.” If the exact number is not documented, it may be calculated.  **Examples:**   * Note states “patient has had 1 or 2 GTC seizures a month during the past year and several staring spells weekly.” 1 - 2 GTC seizures x 12 months = 12 - 24 seizures in past year as well as multiple staring spells. Select value “4”. * Provider notes 2 seizures last month without other documentation (no mention of past year). Select value “2”.   If there is no documentation of the number of seizures in the year prior to starting the medication, select “99”. |
| 15 | szpostbrv | During the timeframe from [(If valbrvdt = 1, computer display brvdt1 +1 day OR if valbrvdt = 2, computer to display docbrvdt + 1 day)] to (If valbrvdt = 1, computer display brvdt1 + 12 months OR if valbrvdt = 2, computer to display docbrvd + 12 months), select the number of seizures documented by a neurology physician/APN/PA after starting brivaracetam (Briviact).  1. 0 or no seizures  2. 1 - 5  3. 6 - 10  4. > 10  99. Number of seizures after starting the medication not documented or unable to determine | 1,2,3,4,99 | Start reviewing with the first encounter after starting brivaracetam (Briviact) and look for documentation of the number of seizures since starting the medication.   * Select the option that corresponds with the number of seizures documented. Includes any type of seizure activity documented, e.g., “Only 1 generalized tonic-clonic (GTC) since last visit”; “Continues to have 1 - 2 staring spells with loss of consciousness (LOC) 2 or 3 times a week.” * If the exact number is not documented, it may be calculated.   **Examples:**   * Note dated 2 months after starting the medication states “patient has had 1 or 2 GTC seizures and 2-3 staring spells weekly.” 1 - 2 GTC seizures since starting the medication as well as multiple staring spells weekly equals > 10 seizures. Select value “4”. * Provider notes 2 seizures last month without other documentation (no mention of past year). Select value “2”.   If there is no documentation of the number of seizures since starting the medication, select “99”. |
| 16 | brvchng | During the time frame from [(If valbrvdt = 1, computer to display brvdt1 + 1 day) OR (if valbrvdt = 2, computer to display docbrvdt +1 day)] to 9/30/2020 is there physician/APN/PA or pharmacist documentation the initial dose of brivaracetam (Briviact) was decreased?   1. Yes 2. No | 1,2  If 2, go to brvdc | Please review all suggested data sources for documentation of a decrease in the dose of brivaracetam (Briviact) during the specified timeframe.  **Exclude** tapering down of the dose prior to a procedure or admission to an Epilepsy Monitoring Unit (EMU) for a procedure.  **Suggested data sources:** neurology note, neurology clinic notes, physician orders, pharmacy package |
| 17 | newbrvdt  newbrvdos  brvrsn1  brvrsn2  brvrsn3 brvrsn4 brvrsn5 brvrsn6 brvrsn7 brvrsn8 brvrsn9 brvrsn10 brvrsn11 brvrsn12 brvrsn13 brvrsn14  brvrsn15 brvrsn16 brvrsn17 brvrsn18 brvrsn19 brvrsn20 brvrsn21 brvrsn22 brvrsn23 brvrsn24 brvrsn25 brvrsn99 | Beginning with the earliest date after [(If valbrvdt = 1, computer to display brvdt1 +1 day) OR (if valbrvdt = 2, computer to display docbrvdt +1 day)] to 9/30/2020, enter each date the brivaracetam (Briviact) dose was decreased, the new total daily dose, and physician/APN/PA or pharmacist documentation of the reason(s).  **May enter multiple dates.**   |  |  |  |  |  | | --- | --- | --- | --- | --- | | **Date**(mm/dd/yyyy)   |  | | --- | | If valbrvdt = 1, >1 day after brvdt1 and <=09/30/2020 OR if valbrvdt = 2, >1 day after docbrvdt and <=09/30/2020 | | **Dose**  (\_ \_ \_ \_)mg/day   |  | | --- | | >0 and <=600 | | **Reason(s)**  If 25, go to brvothrsn  **Select all that apply:** | |  |  | 1. Drowsiness  2. Dizziness  3. Vertigo  4. Unsteadiness  5. Fatigue  6. Diplopia  7. Skin rash  8. Gingival hypertrophy  9. Nausea  10. Vomiting  11. Insomnia  12.Cognitive impairment  13. Irritability  14. Aggression  15. Depression  16. Psychosis  17. Weight gain  18. Weight loss  19. Anorexia  20. Anemia  21. Hyponatremia  22. Edema  23. Birth defects  24. Drug not effective  25. Other  99. No reason documented | | | Please review all suggested data sources for documentation of a decrease in the dose of brivaracetam (Briviact). Then enter the exact date, the new total daily dose prescribed and the documented reason(s) for the change in the dosage. For example, if order states brivaracetam 100 mg bid (twice a day), then total daily dose would be 200 mg/day.  If the reason for decreasing the dose documented in the medical record is not in the list, select value “25”.  **Suggested data sources:** neurology note, neurology clinic notes, physician orders, pharmacy package |
| 18 | brvothrsn | Enter the other reason for the change in dosage documented by the physician/APN/PA or pharmacist.   |  | | --- | |  | | Free text | PLEASE enter the exact reason documented in the medical record. |
| 19 | brvdc | During the time frame from [(If valbrvdt = 1, computer display brvdt1 + 1 day) OR (if valbrvdt = 2, computer to display docbrvdt + 1 day)] to 9/30/2020 is there documentation by a physician/APN/PA, or pharmacist that brivaracetam (Briviact) was discontinued?   1. Yes 2. No | 1, 2  If 2, go to clbdt1 as applicable, else go to dcbrvdt | Please review all suggested data sources for documentation that brivaracetam (Briviact) was discontinued during the specified timeframe.  **Suggested data sources:** neurology note, neurology clinic notes, physician orders, pharmacy package |
| 20 | dcbrvdt | Enter the date brivaracetam (Briviact) was discontinued. | mm/dd/yyyy   |  | | --- | | If valbrvdt = 1, >=1 day after brvdt1 and <=09/30/2020 OR if valbrvdt = 2, >=1 day after docbrvdt and <=09/30/2020 | | Enter the exact date brivaracetam (Briviact) was discontinued.   * If the order to discontinue the medication included a titrating off schedule, enter the date the medication was actually to be stopped. **Example:** Titration started 10/15/2019 and was titrated off by 10/31/2019. The date to enter would be 10/31/2019.   **Suggested data sources:** neurology note, neurology clinic notes, physician orders, pharmacy package |
| 21 | brvdcrsn1  brvdcrsn2  brvdcrsn3  brvdcrsn4  brvdcrsn5  brvdcrsn6  brvdcrsn7  brvdcrsn8  brvdcrsn9  brvdcrsn10  brvdcrsn11  brvdcrsn12  brvdcrsn13  brvdcrsn14  brvdcrsn15  brvdcrsn16  brvdcrsn17  brvdcrsn18  brvdcrsn19  brvdcrsn20  brvdcrsn21  brvdcrsn22  brvdcrsn23  brvdcrsn24  brvdcrsn25  brvdcrsn99 | During the time frame from (computer to display dcbrvdt to 9/30/2020) is there physician/APN/PA or pharmacist documentation of a reason for discontinuing the drug?  **Select all that apply:**  1. Drowsiness  2. Dizziness  3. Vertigo  4. Unsteadiness  5. Fatigue  6. Diplopia  7. Skin rash  8. Gingival hypertrophy  9. Nausea  10. Vomiting  11. Insomnia  12. Cognitive impairment  13. Irritability  14. Aggression  15. Depression  16. Psychosis  17. Weight gain  18. Weight loss  19. Anorexia  20. Anemia  21. Hyponatremia  22. Edema  23. Birth defects  24. Drug not effective  25. Other  99. No reason documented | 1,2,3,4,5,6,7,8,9,10,11,12,13,14,15,16,17,18,19,20,21,22,23,  24,25,99  If 25, go to brvothrdc | Please review all suggested data sources for documentation for the reason for discontinuation of this antiepileptic drug during the specified timeframe.  If the reason for discontinuing the medication documented in the medical record is not in the list, select value “25”.  **Suggested data sources:** neurology note, neurology clinic notes, physician orders, pharmacy package |
| 22 | brvothrdc | Enter the other reason for discontinuing the briviacetam (Briviact) documented by the physician/APN/PA or pharmacist.   |  | | --- | |  | | Free text | PLEASE enter the exact reason documented in the medical record. |
| **If case is flagged for clobazam (Frisium, Onif), go to clbdt1, else go to end** | | | | |
| 23 | clbdt1  clbdos1 | Enter the earliest date clobazam (Frisium, Onif) was first prescribed and the initial total daily dose.   |  |  |  |  | | --- | --- | --- | --- | | Date (mm/dd/yyyy)   |  | | --- | | >= 10/01/16 and <= 09/30/2020 | | Dose ( \_ \_ \_ \_) mg/day   |  | | --- | | > 0 and <= 120 | | |  |  | | mm/dd/yyyy | Computer will prefill the earliest date clobazam (Frisium, Onif) was first prescribed and the initial total daily dose. |
| 24 | valclbdt | On (computer to display clbdt1), is there documentation the patient was prescribed clobazam (Frisium, Onif)?  1. Yes  2. No | 1,2  If 2, go to docclbdt | Please review all suggested data sources for prescription of clobazam (Frisium, Onif) during the specified timeframe.  In order to select value “1,” clobazam (Frisium, Onif) must be listed among the patient’s medications recorded during the specified timeframe or entered in the pharmacy package.   * If there is documentation the drug was prescribed, but also documentation the patient did not start or take the drug, select value “2”.   **Suggested data sources:** neurology note, neurology clinic notes, physician orders, pharmacy package |
| 25 | valclbdos | On (computer to display clbdt1), was the total daily dose documented as (computer to display clbdos1)?  1. Yes  2. No | 1,2  If 2, go to docclbdos | Confirm that the total daily dose of clobazam (Frisium, Onif) displayed matches the total daily dose found in the medical record on the specified date.  For example, patient prescribed 20 mg twice per day, the total daily dose would be 40 mg.  If the dose found in the medical record is not the same as the dose displayed, select value “2” |
| 26 | ptclbdos1 | During the timeframe from (computer to display clbdt1) to 9/30/2020, is there documentation that the patient was taking the total daily dose of (computer to display clbdos1) that was prescribed?  1. Yes  2. No | 1,2  If 1 or 2, go to szpreclb | Confirm that the patient reports taking the total daily dose of clobazam (Frisium, Onif) displayed.  Ensure that there is no conflicting documentation in the notes indicating the patient was not taking the daily dose as prescribed.  For example, patient prescribed 20 mg twice per day (total daily dose of 40 mg), but notes indicate “patient reports only taking clobazam (Frisium, Onif) one per day (i.e. total daily dose of 20 mg).  If there is documentation the patient is not taking the total daily dose as indicated or no information about the dose the patient is taking , select value “2”  **Suggested data sources** : neurology note, medication reconciliation note |
| 27 | docclbdt | During the timeframe from 10/01/2016 to 09/30/2020 enter the earliest documented date clobazam (Frisium, Onif) was first prescribed. | mm/dd/yyyy   |  | | --- | | >= 10/01/16 and <= 09/30/2020 |   Abstractor may enter 99/99/9999   |  | | --- | | **Warning if 99/99/9999** |   **If 99/99/9999 go to end** | Please review all suggested data sources for prescription of clobazam (Frisium, Onif) during the specified timeframe and enter the date the medication was first prescribed.  In order to select “1,” clobazam (Frisium, Onif) must be listed among the patient’s medications recorded during the specified timeframe or entered in the pharmacy package.   * If there is documentation the drug was prescribed, but also documentation the patient did not start or take the drug, enter 99/99/9999.   **If there is no documentation clobazam (Frisium, Onif) was prescribed during the specified timeframe, enter 99/99/9999.**  **Suggested data sources:** neurology note, neurology clinic notes, physician orders, pharmacy |
| 28 | docclbdos | Enter the total daily dose of clobazam (Frisium, Onif) documented on (if valclbdos = 2, computer to display clbdt1; else display docclbdt). | \_ \_ \_ mg/day   |  | | --- | | > 0 and <= 120 | | Enter the total daily dose of clobazam (Frisium, Onif) prescribed on the specified date.  **Suggested data sources**: physician orders, pharmacy package, neurology notes |
| 29 | ptclbdos2 | Is there documentation that the patient was taking the total daily dose of (computer to display docclbdos) that was prescribed?   1. Yes 2. No | 1,2 | Confirm that the patient reports taking the total daily dose. Ensure that there is no conflicting documentation in the notes indicating the patient was not taking the daily dose as prescribed.  For example, patient prescribed 20 mg twice per day (total daily dose of 40 mg), but notes indicate “patient reports only taking clobazam (Frisium, Onif) one per day (i.e. total daily dose of 20 mg )  If there is conflicting information, select value “2”  Suggested Data Sources: neurology note, neurology clinic notes, physician orders, pharmacy |
| 30 | szpreclb | During the timeframe from [(if valclbdt = 1, computer display clbdt1 - 12 months) OR (if valclbdt = 2, computer to display docclbdt - 12 months)] to (If valclbdt = 1, computer display clbdt1 OR if valclbdt = 2, computer to display docclbdt)], select the number of seizures documented by a neurology physician/APN/PA within the year before starting clobazam (Frisium, Onif).  1. 0 or no seizures  2. 1 - 5  3. 6 - 10  4. > 10  99. Number of seizures within the year before starting the medication not documented or unable to determine | 1,2,3,4,99 | Start reviewing with the most recent encounter prior to the date clobazam (Frisium, Onif) was first prescribed, and look for documentation of the number of seizures during the year prior to the specified date.  Select the option that corresponds with the number of seizures documented within the year before starting clobazam (Frisium, Onif). Include any type of seizure activity documented, e.g., “Only 1 generalized tonic-clonic (GTC) since last visit”; “Continues to have 1 - 2 staring spells with loss of consciousness (LOC) 2 or 3 times a week.” If the exact number is not documented, it may be calculated.  **Examples:**   * Note states “patient has had 1 or 2 GTC seizures a month during the past year before starting the medication and several staring spells weekly.” 1 - 2 GTC seizures x 12 months = 12 - 24 seizures in past year as well as multiple staring spells. Select value “4”. * Provider notes “2 seizures last month” without other documentation (no mention of past year). Select value “2”.   If there is no documentation of the number of seizures in the year prior to starting the medication, select “99”. |
| 31 | szpostclb | During the timeframe from [(If valclbdt = 1, computer display clbdt1 + 1 day) OR (if valclbdt = 2, computer to display docclbdt + 1 day)] to (if valclbdt = 1, computer display clbdt1 + 12 months) OR (if valclbdt = 2, computer to display docclbdt + 12 months)], select the number of seizures documented by a neurology physician/APN/PA after starting clobazam (Frisium, Onif).  1. 0 or no seizures  2. 1 - 5  3. 6 - 10  4. > 10  99. Number of seizures after starting the medication not documented or unable to determine | 1,2,3,4,99 | Start reviewing with the first encounter after starting clobazam (Frisium, Onif) and look for documentation of the number of seizures since starting the medication.   * Select the option that corresponds with the number of seizures documented. Includes any type of seizure activity documented, e.g., “Only 1 generalized tonic-clonic (GTC) since last visit”; “Continues to have 1 - 2 staring spells with loss of consciousness (LOC) 2 or 3 times a week.” * If the exact number is not documented, it may be calculated.   **Examples:**   * Note dated 2 months after starting the medication states “patient has had 1 or 2 GTC seizures since starting the medication and several staring spells weekly.” 1 - 2 GTC seizures as well as multiple staring spells weekly equals > 10. Select value “4”. * Provider notes “2 seizures last month” without other documentation (no mention of past year). Select value “2”.   If there is no documentation of the number of seizures since starting the medication, select “99”. |
| 32 | clbchng | During the time frame from [(If valclbdt = 1, computer to display clbdt1 + 1 day) OR (if valclbdt = 2, computer to display docclbdt +1 day)] to 9/30/2020 is there physician/APN/PA or pharmacist documentation the initial dose of clobazam (Frisium, Onif) was decreased?   1. Yes 2. No | 1,2  If 2, go to clbdc | Please review all suggested data sources for documentation of a decrease in the dose of clobazam (Frisium, Onif) during the specified timeframe.  **Exclude** tapering down of the dose prior to a procedure or admission to an Epilepsy Monitoring Unit (EMU) for a procedure.  **Suggested data sources:** neurology note, neurology clinic notes, physician orders, pharmacy package |
| 33 | newclbdt  newclbdos  clbrsn1  clbrsn2  clbrsn3  clbrsn4  clbrsn5  clbrsn6  clbrsn7  clbrsn8  clbrsn9  clbrsn10 clbrsn11  clbrsn12  clbrsn13  clbrsn14  clbrsn15  clbrsn16  clbrsn17  clbrsn18  clbrsn19  clbrsn20 clbrsn21  clbrsn22  clbrsn23  clbrsn24  clbrsn25  clbrsn99 | Beginning with the earliest date after (If valclbdt = 1, computer display clbdt1 + 1 day OR if valclbdt = 2, computer to display docclbdt +1 day) to 9/30/2020, enter each date the clobazam (Frisium, Onif) dose was decreased, the new total daily dose, and physician/APN/PA or pharmacist documentation of the reason(s).  **May enter multiple dates.**   |  |  |  |  |  | | --- | --- | --- | --- | --- | | **Date**(mm/dd/yyyy)   |  | | --- | | If valclbdt = 1, > 1 day after clbdt1 and <=09/30/2020OR if valclbdt = 2, >1 day after docclbdt and <=09/30/2020 | | **Dose**  (\_ \_ \_ \_)mg/day   |  | | --- | | >0 and <=120 | | **Reason(s)**  If 25, go to clbothrsn  **Select all that apply:** | |  |  | 1. Drowsiness  2. Dizziness  3. Vertigo  4. Unsteadiness  5. Fatigue  6. Diplopia  7. Skin rash  8. Gingival hypertrophy  9. Nausea  10. Vomiting  11. Insomnia  12.Cognitive impairment  13. Irritability  14. Aggression  15. Depression  16. Psychosis  17. Weight gain  18. Weight loss  19. Anorexia  20. Anemia  21. Hyponatremia  22. Edema  23. Birth defects  24. Drug not effective  25. Other  99. No reason documented | | | Please review all suggested data sources for documentation of a decrease in the dose of clobazam (Frisium, Onif). Then enter the exact date, the new total daily dose prescribed and the documented reason(s) for the change in the dosage. For example, if order states clobazam 20 mg bid (twice a day), then total daily dose would be 40 mg/day.  If the reason for decreasing the dose documented in the medical record is not in the list, select value “25”.  **Suggested data sources:** neurology note, neurology clinic notes, physician orders, pharmacy package |
| 34 | clbothrsn | Enter the other reason for the change in dosage documented by the physician/APN/PA or pharmacist.   |  | | --- | |  | | Free text | PLEASE enter the exact reason documented in the medical record |
| 35 | clbdc | During the time frame from [(If valclbdt = 1, computer display clbdt1 + 1 day) OR (if valclbdt = 2, computer to display docclbdt + 1 day)] to 09/30/2020 is there documentation by a physician/APN/PA, or pharmacist that clobazam (Frisium, Onif) was discontinued?   1. Yes 2. No | 1,2  If 2, go to end | Please review all suggested data sources for documentation that clobazam (Frisium, Onif) was discontinued during the specified timeframe.  **Suggested data sources:** neurology note, neurology clinic notes, physician orders, pharmacy package |
| 36 | dcclbdt | Enter the date clobazam (Frisium, Onif) was discontinued | mm/dd/yyyy   |  | | --- | | If valclbdt = 1, > = 1 day after clbdt1 and <=09/30/2020 OR if valclbdt = 2,  > =1 day after docclbdt and <=09/30/2020 | | Enter the exact date clobazam (Frisium, Onif) was discontinued.   * If the order to discontinue the medication included a titrating off schedule, enter the date the medication was actually to be stopped. **Example:** Titration started 10/15/2019 and was titrated off by 10/31/2019. The date to enter would be 10/31/2019.   **Suggested data sources:** neurology note, neurology clinic notes, physician orders, pharmacy package |
| 37 | clbdcrsn1  clbdcrsn2  clbdcrsn3  clbdcrsn4  clbdcrsn5  clbdcrsn6  clbdcrsn7  clbdcrsn8  clbdcrsn9  clbdcrsn10  clbdcrsn11  clbdcrsn12  clbdcrsn13  clbdcrsn14  clbdcrsn15  clbdcrsn16  clbdcrsn17  clbdcrsn18  clbdcrsn19  clbdcrsn20  clbdcrsn21  clbdcrsn22  clbdcrsn23  clbdcrsn24  clbdcrsn25  clbdcrsn99 | During the time frame from (computer to display dcclbdt to 9/30/2020) is there physician/APN/PA or pharmacist documentation of a reason for discontinuing the drug?  **Select all that apply:**  1. Drowsiness  2. Dizziness  3. Vertigo  4. Unsteadiness  5. Fatigue  6. Diplopia  7. Skin rash  8. Gingival hypertrophy  9. Nausea  10. Vomiting  11. Insomnia  12. Cognitive impairment  13. Irritability  14. Aggression  15. Depression  16. Psychosis  17. Weight gain  18. Weight loss  19. Anorexia  20. Anemia  21. Hyponatremia  22. Edema  23. Birth defects  24. Drug not effective  25. Other  99. No reason documented | 1,2,3,4,5,6,7,8,9,10,11,12,13,14,15,16,17,18,19,20,21,22,23,24,25,99  If 25 go to clbothrdc | Please review all suggested data sources for documentation for the reason for discontinuation of this antiepileptic drug during the specified timeframe.  If the reason for discontinuing the drug documented in the medical record is not in the list, select value “25”.  **Suggested data sources:** neurology note, neurology clinic notes, physician orders, pharmacy package |
| 38 | clbothrdc | Enter the other reason for discontinuing the clobazam (Frisium, Onif) documented by the physician/APN/PA or pharmacist.   |  | | --- | |  | | Free text | PLEASE enter the exact reason documented in the medical record |