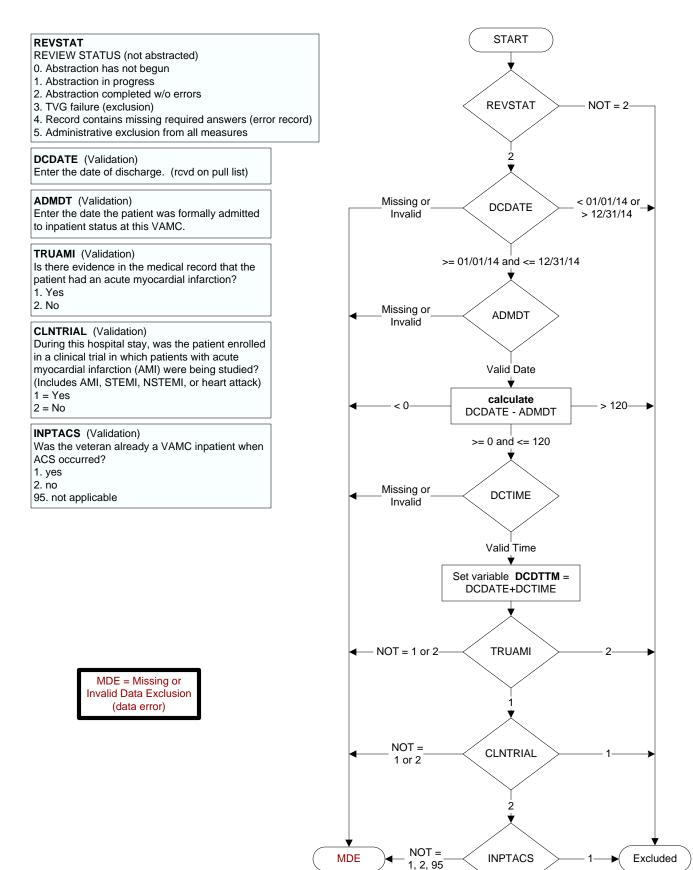
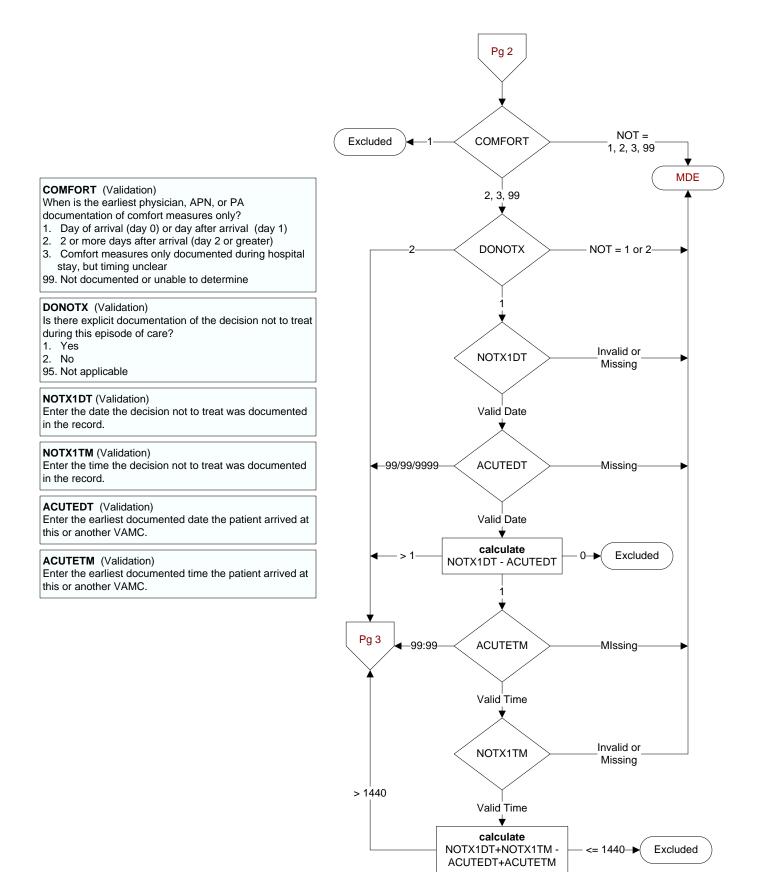
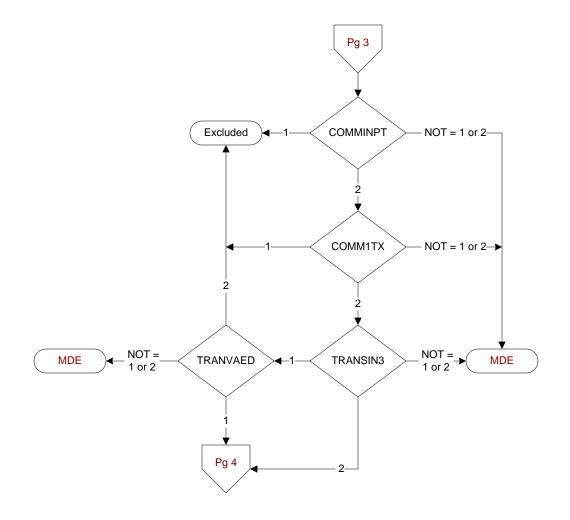
2, 95 ▼ Pg 2







COMMINPT (Validation)

Was the patient a transfer from a community hospital where he/she was an inpatient for ACS care? 1. Yes

2. No

COMM1TX (Validation)

Did the patient present initially to a community hospital where he/she received all or part of the first 24 hours of care for ACS?

- 1. Yes
- 2. No

TRANSIN3 (Validation)

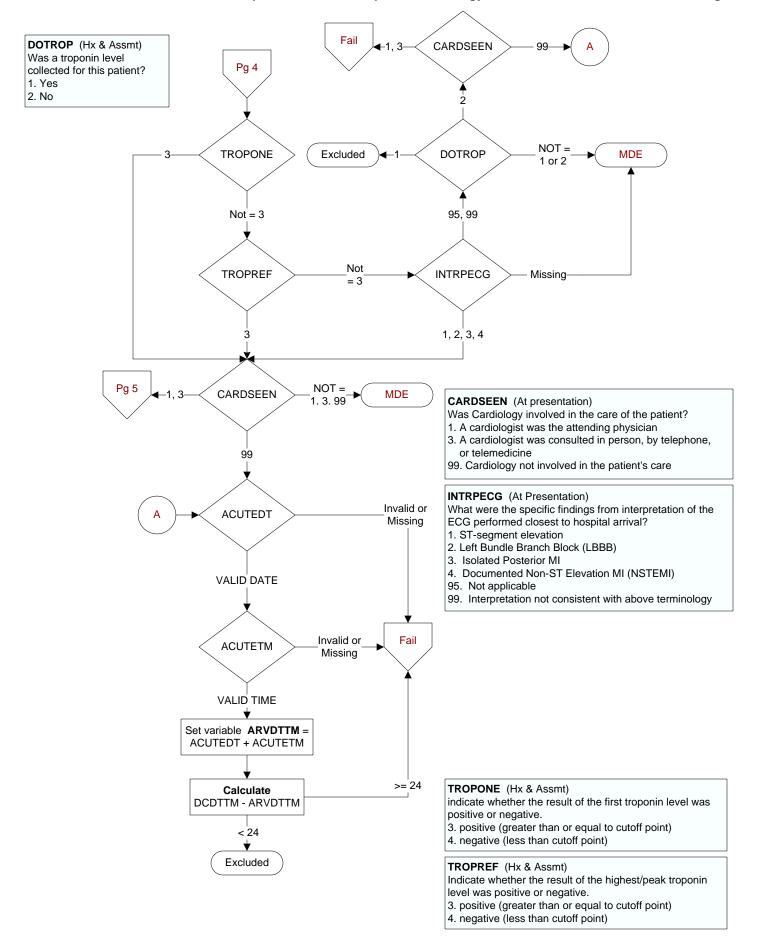
Was the patient received as a transfer from an inpatient, outpatient or emergency/observation department of an <u>outside</u> hospital or from an ambulatory surgery center? 1. Yes

2. No

TRANVAED (Validation)

Was the patient received from the emergency department of another VAMC?

- 1. Yes
- 2. No
- 95. Not applicable



ACS 1q15 – IHI45 – ACS - Inpt Risk Cardiology involvement in 24 hours STEMI Mod-high risk

