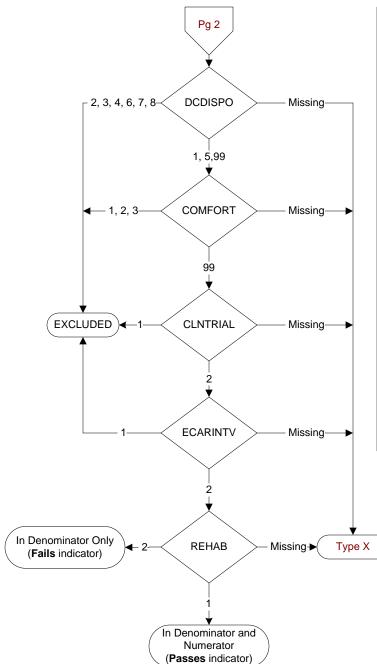


# STK 2q16 - STK10 - Assessed for Rehabilitation (STK-10)



# DCDISPO (STK)

What was the patient's discharge disposition on the day of discharge? 1. Home

-- Assisted Living Facilities (ALFs) – includes assisted living care at nursing home/facility

-- Court/Law Enforcement – includes detention facilities, jails, and prison -- Home – includes board and care, domiciliary, foster or residential care, group or personal care homes, retirement communities, and homeless shelters

-- Home with Home Health Services

-- Outpatient Services including outpatient procedures at another hospital,

- outpatient Chemical Dependency Programs and Partial Hospitalization
- 2. Hospice Home (or other home setting as listed in #1 above)
- 3. Hospice Health Care Facility

-- General Inpatient and Respite, Residential and Skilled Facilities, and Other Health Care Facilities

4. Acute Care Facility

- -- Acute Short Term General and Critical Access Hospitals
- -- Cancer and Children's Hospitals
- -- Department of Defense and Veteran's Administration Hospitals
- 5. Other Health Care Facility
- -- Extended or Immediate Care Facility (ECF/ICF)
- -- Long Term Acute Care Hospital (LTACH)

-- Nursing Home or Facility including Veteran's Administration Nursing Facility

- -- Psychiatric Hospital or Psychiatric Unit of a Hospital
- -- Rehabilitation Facility including Inpatient Rehabilitation Facility/Hospital or Rehabilitation Unit of a Hospital
- -- Skilled Nursing Facility (SNF), Sub-Acute Care or Swing Bed
- -- Transitional Care Unit (TCU)
- -- Veteran's Home
- 6. Expired
- 7. Left Against Medical Advice/AMA
- 99. Not documented or unable to determine

## COMFORT (STK)

When is the earliest physician, APN, or PA documentation of comfort measures only?

- 1. Day of arrival (day 0) or day after arrival (day 1)
- 2. Two or more days after arrival (day 2 or greater)
- 3. Comfort measures only documented during hospital stay, but timing unclear
- 99. Comfort measures only was not documented by the physician/ APN/PA or unable to determine

### CLNTRIAL (STK)

During this hospital stay, was the patient enrolled in a clinical trial in which patients with stroke were being studied?

1. Yes 2. No

# ECARINTV (STK)

Is there documentation that this admission was for the sole purpose of performance of an elective carotid intervention procedure (e.g., elective carotid endarterectomy, carotid angioplasty, carotid stenting)? 1. Yes

2. No

### REHAB (STK)

Is there documentation that the patient was assessed for and/or received rehabilitation services during this hospitalization?

- 1. Yes
- 2. No