

Document Links:

[Stroke Instrument](#)

CATNUM (rcvd on pull list)
Sample category number
71 – Stroke

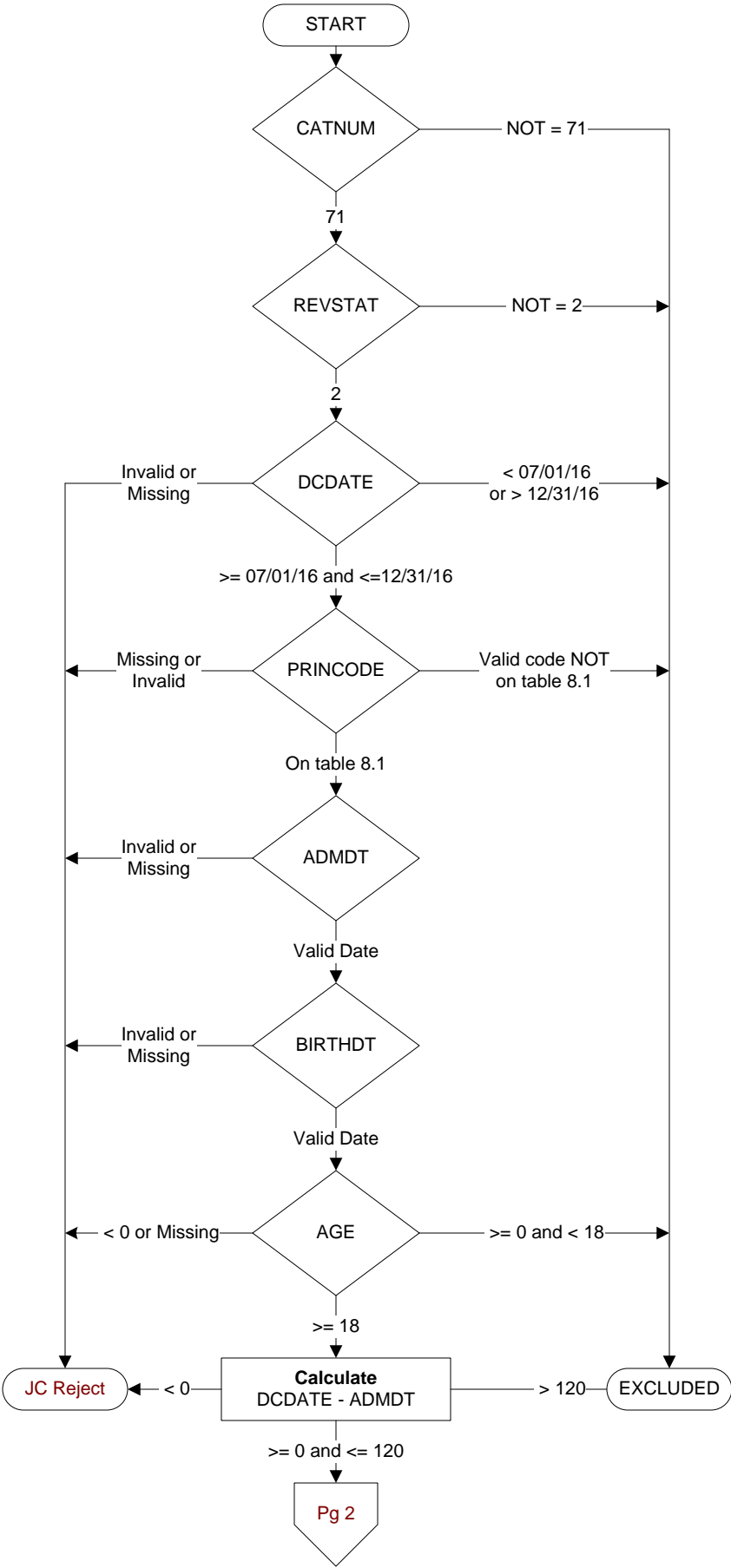
REVSTAT
REVIEW STATUS (not abstracted)
0. Abstraction has not begun
1. Abstraction in progress
2. Abstraction completed w/o errors
3. TVG failure (exclusion)
4. Record contains missing required answers
5. Administrative exclusion from all measures

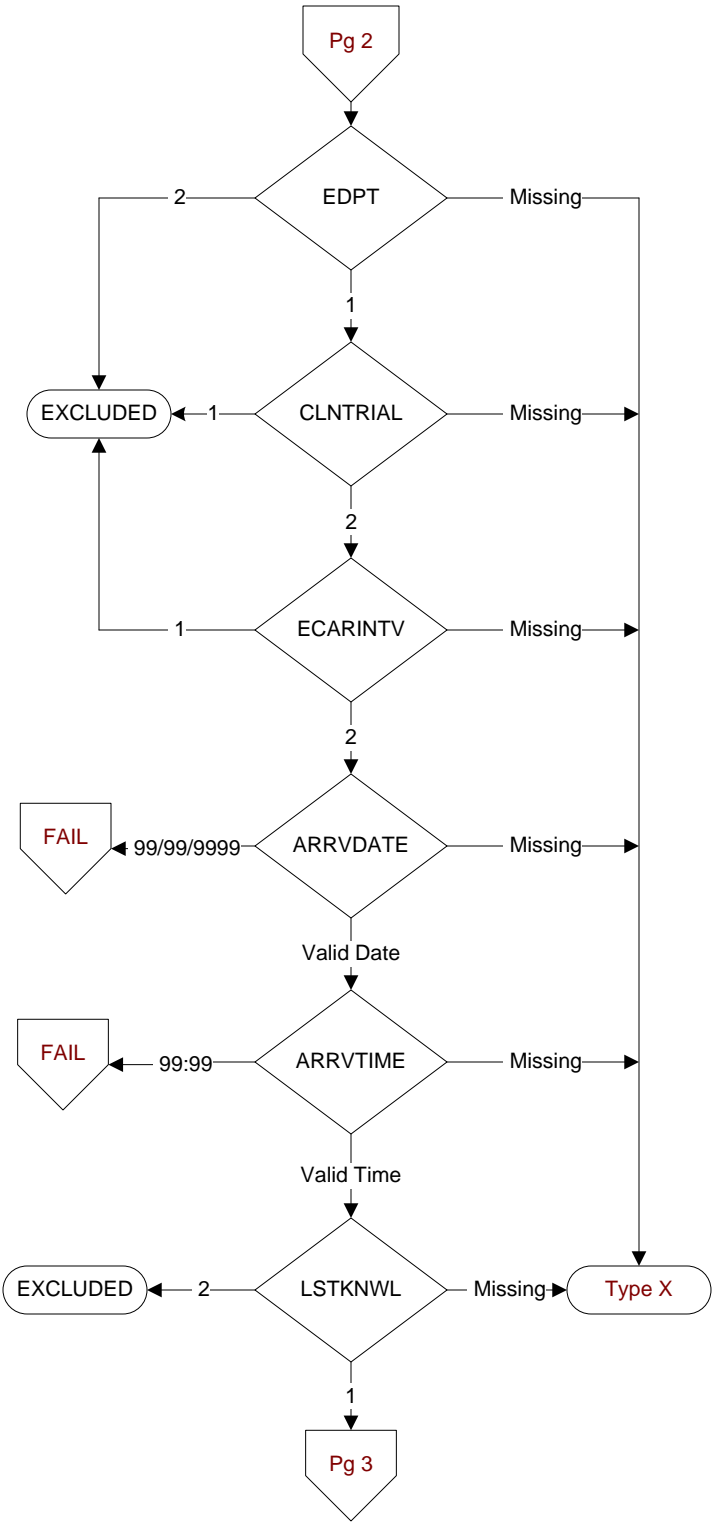
AGE - calculated field
ADMDT - Patient date of birth

DCDATE (STK)
Discharge Date

ADMDT (STK)
Admission date

PRINCODE (STK)
ICD-10-CM principal diagnosis code





EDPT (STK)
Did the patient receive care/services in the **Emergency Department of this VAMC?**
1. Yes
2. No

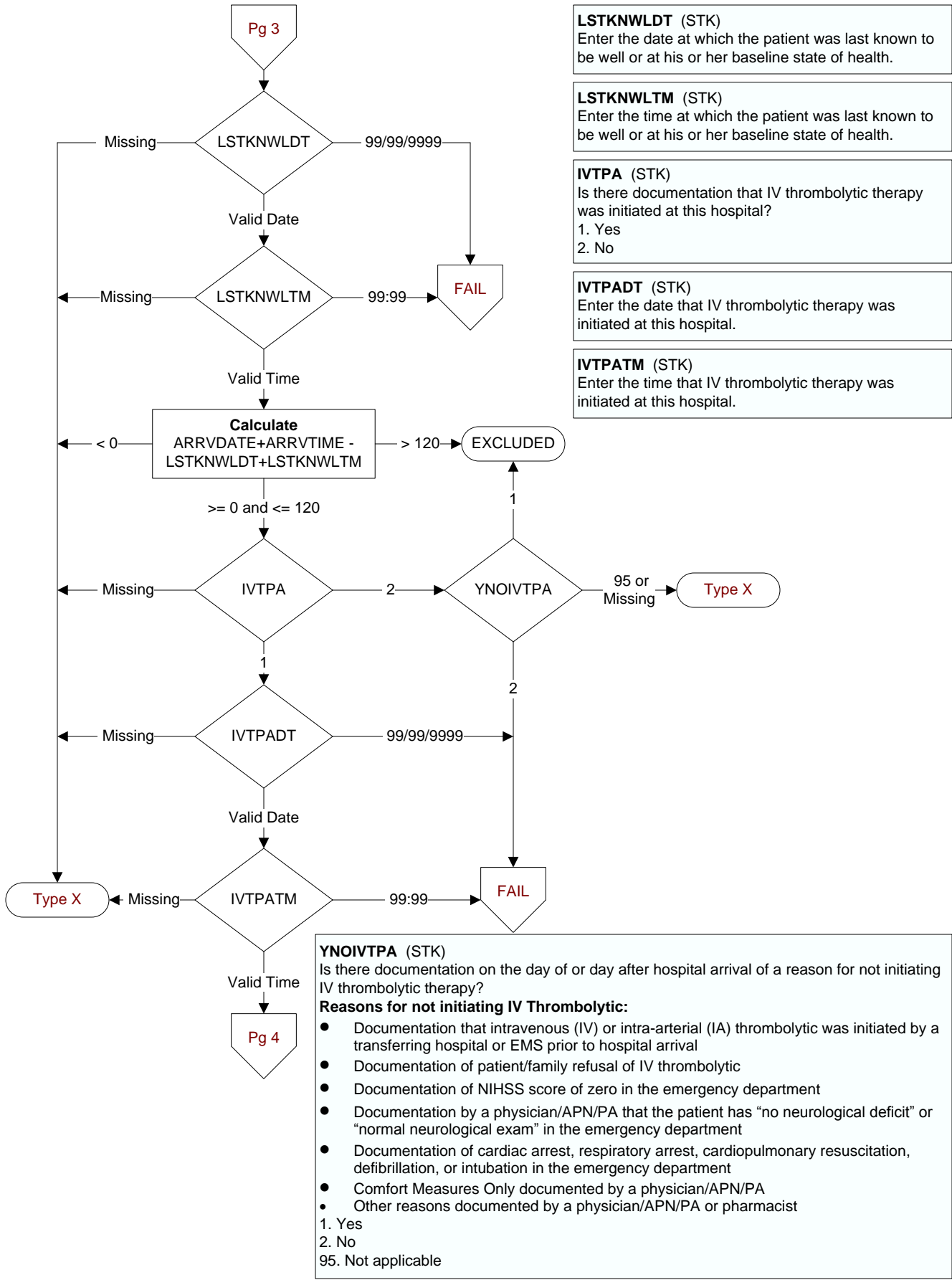
CLNTRIAL (STK)
During this hospital stay, was the patient enrolled in a clinical trial in which patients with stroke were being studied?
1. Yes
2. No

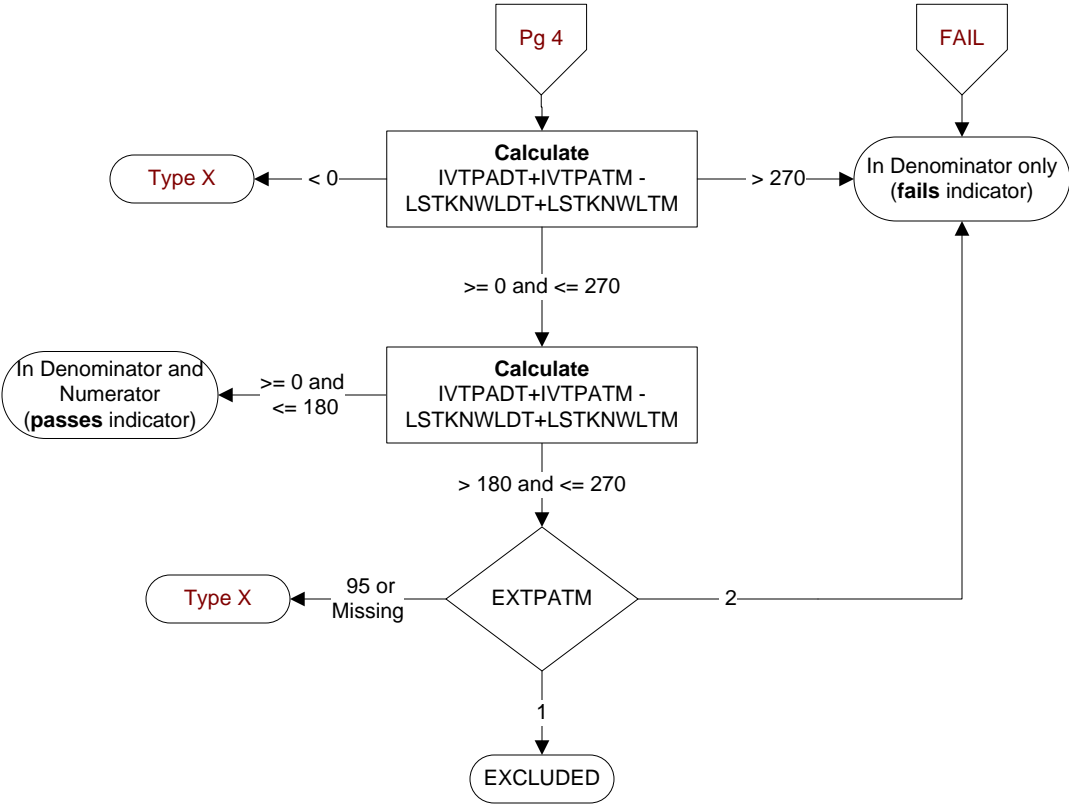
ECARINTV (STK)
Is there documentation that this admission was for the sole purpose of performance of an elective carotid intervention procedure (e.g., elective carotid endarterectomy, carotid angioplasty, carotid stenting)?
1. Yes
2. No

ARRVDAT (STK)
Enter the **earliest** documented date the patient arrived at acute care at this VAMC.

ARRVTIME (STK)
Enter the **earliest** documented time the patient arrived at acute care at this VAMC.

LSTKNWL (STK)
Is there documentation that the date AND time of last known well was witnessed or reported?
1. Yes
2. No





EXTPATM (STK)
Is there documentation on the day of or day after hospital arrival of a reason for extending the initiation of IV thrombolytics to 3 to 4.5 hours from Time Last Known Well?

Reasons for extending the initiation of IV thrombolytic to 3 to 4.5 hours:

- Documentation of treatment to lower blood pressure, (e.g., nicardipine, hydralazine, prior to IV thrombolytic initiation
- Documentation of patient/family refusal of IV thrombolytic which was recanted/reversed prior to IV thrombolytic initiation
- Documentation of cardiac arrest, respiratory arrest, cardiopulmonary resuscitation, defibrillation, or intubation in the emergency department prior to IV thrombolytic initiation
- Other reasons documented by physician/APN/PA or pharmacist

1. Yes
2. No
95. Not applicable