

Did the patient have one or more of the following active diagnoses? (Validation)

SELCKD - Chronic Kidney (Renal) Disease, stage 5 or ESRD (end stage renal disease) or dialysis (hemodialysis or peritoneal dialysis) documented any time prior to the study end date ICD-10 codes N185, N186, Z9115, Z992, 3E1M39Z,

ICD-10 codes N185, N186, Z9115, Z992, 3E1M39Z, 5A1D00Z, 5A1D60Z, 5A1D70Z, 5A1D80Z, 5A1D90Z

-1 = Yes

0 = No

### **CIRRHOSIS** (Validation)

Does the record document a diagnosis of cirrhosis during the past two years?

1. Yes

2. No

#### MUSCLEDX (Validation)

Does the record document a diagnosis of myalgia, myositis, myopathy, or rhabdomyolysis during the past year?

1. Yes

2. No

## SEX (Rcvd on pull list)

Patient Gender

1. Male

2. Female

3. Unknown

#### AGE (Calculated field)

Nexus Clinic Visit date - BIRTHDT

## IVFPREG (Validation)

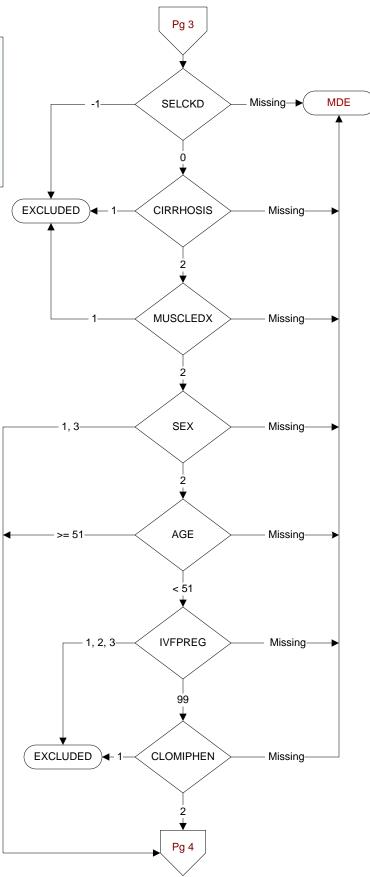
Does the record document any one of the following during the past two years:

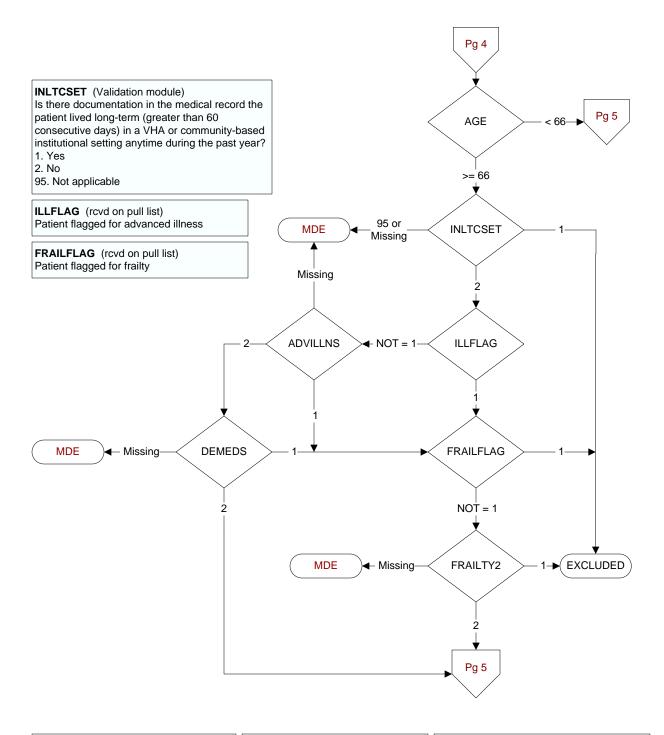
- 1. Pregnancy
- 2. In vitro fertilization (IVF)
- 3. Both in vitro fertilization and pregnancy
- 99. None of the above

# **CLOMIPHEN** (Validation)

Does the record document the patient was prescribed clomiphene during the past two years?

- 1. Yes
- 2. No





**DEMEDS** (Validation module) Is there physician, NP, PA, CNS or pharmacist documentation in the medical record the patient has an active prescription for a dementia medication? 1. Yes

2. No

**ADVILLNS** (Validation module) Is there documentation in the medical record the patient has an active condition/diagnosis considered an advanced illness?

1. Yes

2. No

FRAILTY2 (Validation module) During the past year, is there documentation in the medical record the patient has anycondition/diagnosis consistent with frailty documented on two different dates?

1. Yes

2. No

