



CLNTRIAL (VTE)

During this hospital stay, was the patient enrolled in a clinical trial in which patients with venous thromboembolism (VTE) were being studied?

- 1. Yes
- 2. No

VTETEST (VTE)

Is there documentation that a diagnostic test for VTE was performed?

- 1. Yes
- 2. No

POSVTE (VTE)

Is there physician/APN/PA documentation that the patient had a diagnosis of VTE <u>confirmed in one of the defined locations?</u> **VTE Location:** DVT located in the proximal leg veins, including the inferior vena cava (IVC), iliac, femoral or popliteal veins, or to pulmonary emboli (PE).

- 1. Yes
- No or unable to determine from medical record documentation

WARFRXDC (VTE)

Is there documentation that warfarin was prescribed at discharge?

- 1. Yes
- 2. No

DCDISPO (VTE)

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

- 1. Home
- -- Assisted Living Facilities
- -- Court/Law Enforcement includes detention facilities, jails, and prison
- -- Board and care, domiciliary, foster or residential care, group or personal care homes, 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
- 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)
- 6. Expired
- 7. Left Against Medical Advice/AMA
- 99. Not documented or unable to determine



Did the WRITTEN discharge instructions or other educational material given to the patient/caregiver address compliance issues related to warfarin therapy prescribed after discharge?

- 1. Yes
- 2. No

PTEDIET (VTE)

Did the WRITTEN discharge instructions or other educational material given to the patient/caregiver address dietary advice related to warfarin therapy prescribed after discharge?

- 1. Yes
- 2. No

PTEDFOLO (VTE)

Did the WRITTEN discharge instructions or other educational material given to the patient/caregiver address follow-up monitoring related to warfarin therapy prescribed after discharge?

- 1. Yes
- 2. No

PTEDADR (VTE)

Did the WRITTEN discharge instructions or other educational material given to the patient/caregiver address potential for adverse drug reactions and interactions related to warfarin therapy prescribed after discharge?

- 1. Yes
- 2. No

