Form Approved

 OMB No. 0920-xxxx

 Exp. Date xx/xx/xxxx

**Instructions for Paul Coverdell National Acute Stroke Program (PCNASP) Post-Hospital Transition of Care Data Elements**

Public reporting of this collection of information is estimated to average 30 minutes/hours per response, including the time for reviewing instructions and completing and reviewing the collection of information. An agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a current valid OMB control number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to: CDC/ATSDR Reports Clearance Officer, 1600 Clifton Road NE, MS D-74, Atlanta, Georgia 30333; ATTN: PRA (0920-xxxx)

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| 1 | Hospital Discharge Date | <DschDate> | Patient's date of hospital discharge | \_ \_/ \_ \_/ \_ \_ \_ \_  | Date MMDDYYYY |   |
| 2 | Date of follow-up | <FUDate> |  | \_ \_/ \_ \_/ \_ \_ \_ \_  | Date MMDDYYYY |   |
| 3 | Follow-up Method | <FUType> |   | Numeric # = 1-digit | 1 = Phone; 2 = In home; 3 = Other |   |
| 4 | Informant | <Informnt> | Who provided responses to this follow-up? | Numeric # = 1-digit | 1 = Patient; 2 = Familiy Member; 3 = Other Lay Caregiver; 4 = Home Health Aide; 5 = Other; |   |
| 5 | Post-Discharge Appointment | <DApptYN> | Was appointment made prior to discharge? | Numeric # = 1-digit | 1 = Yes; 0 = No |   |
| <DAppKept> | If yes, was appointment kept or pending? | Numeric # = 1-digit | 1 = Kept; 2 = Pending; |   |
| <DAppPend> | If no, has an appointment been scheduled since discharge? | Numeric # = 1-digit | 1 = Yes; 0 = No |   |
| <DAppType> | Who did patient see or will see? | Numeric # = 1-digit | 1 = Neurologist; 2 = Primary Care Physician; 3 = Other; |   |
| 6 | Patient Location | <CurrLoc> | Where is the patient at the time of follow-up? | Numeric # = 1-digit | 1 = Home; 2 = Nursing home or long-term care; 3 = Rehabilitation Hospital; 4 = Acute Care Hospital; 5 = Died |   |
| 7 | ED Visits | <EDYN> | Has patient been seen in ED since discharge? | Numeric # = 1-digit | 1 = Yes; 0 = No; 2 = Not sure |   |
| <EDNum> | How many ED visits since discharge? | Numeric # = 1-digit | 1 = 1; 2 = 2; 3 = 3 or more; 4 = unknown or not sure |   |
| <EDDate> | If yes, Date of first ED visit | \_ \_/ \_ \_/ \_ \_ \_ \_  | Date MMDDYYYY |   |
| <EDReasn> | If yes, Reason for first ED visit | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Text. 75 characters |   |
| <EDDispn> | Was patient admitted to hospital or discharge to home? | Numeric # = 1-digit | 1 = Discharged to home; 0 = Admitted to hospital |   |
| 8 | Readmissions | < ReAd> | Has patient been readmitted to a hospital since discharge? | Numeric # = 1-digit | 1 = Yes; 0 = No; 2 = Not sure | This is a readmission to an acute care hospital. It could be the same hospital or another acute care hospital |
| <ReAdNum> | How many readmissions since discharge? | Numeric # = 1-digit | 1 = 1; 2 = 2; 3 = 3 or more; 4 = unknown or not sure |   |
|  <ReAdDate. | If yes, date of first readmission | \_ \_/ \_ \_/ \_ \_ \_ \_  | Date MMDDYYYY |   |
|  <ReAdWhy> | If yes, reason for first readmission | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Text. 75 characters |   |
|  <ReAd30D> | Readmitted within 30 days of discharge? | Numeric # = 1-digit | 1 = Yes; 0 = No; 2 = Not sure |   |
| 9 | Complications | <DCFalls>> | Falls | Numeric # = 1-digit | 1 = Yes; 0 = No | Default = 0 |
| <MedPrblm> | Medication problem |
| <DCPneum>> | Pneumonia |
| <DCUTI> | Urinary tract infection |
| <DCVTE> | Venous thromboembolic event |
| 10 | Death | <DthDate> | If patient died, date of death | \_ \_/ \_ \_/ \_ \_ \_ \_  | Date MMDDYYYY |   |
| <DthCause> | If patient died, cause of death | Numeric # = 1-digit | 1 = cerebrovascular; 2 = cardiovascular; 3 = other; 4 = unknown |   |
| <Dth30Day> | Died within 30 days of discharge? | Numeric # = 1-digit | 1 = Yes; 0 = No |   |
| 11 | Tobacco | <CurrTobac> | If patient was a smoker before stroke, have they smoked tobacco since discharge? | Numeric # = 1-digit | 1 = Yes; 0 = No |   |
| <SmkMeds> | If patient was a smoker before stroke, are they using any medications to help stop smoking? | Numeric # = 1-digit | 1 = Yes; 0 = No |   |
| 12 | Blood Pressure | <BPMonitr> | Has patient been monitoring their blood pressure at home? | Numeric # = 1-digit | 1 = Yes; 0 = No |   |
| <BPSys> | If yes, most recent systolic blood pressure | Numeric # = 3-digit |   | mm Hg; Suggested range 50-250 |
| <BPDia> | If yes, most recent diastolic blood pressure | Numeric # = 3-digit |   | mm Hg; Suggested range 30-150 |
| <BPReport> | Have they reported their blood pressure to their health care provider since discharge? | Numeric # = 1-digit | 1 = Yes; 0 = No |   |
| <BPUsual> | Is this blood pressure usual for you? | Numeric # = 1-digit | 1 = Yes; 0 = No |   |
| 13 | Medications Prescribed at Discharge | <DCBPMed> | Antihypertensive | Numeric # = 1-digit | 1 = Yes; 0 = No |   |
| <DCStatn> | Statin |   |
| <DCDiab> | Antidiabetic agent |   |
| <DCAsprn> | Aspirin or other antiplatelet |   |
| <DCACoag> | Anticoagulant |   |
| 14 | Medications Currently Taking | <BPMedNow> | Antihypertensive | Numeric # = 1-digit | 1 = Yes; 0 = No |   |
| <StatnNow> | Statin |   |
| <DiabNow> | Antidiabetic agent |   |
| <AsprnNow> | Aspirin or other antiplatelet |   |
| <ACoagNow> | Anticoagulant |   |
| <StopMeds> | Have you stopped any medications since you were discharged? | Numeric # = 1-digit | 1 = Yes; 0 = No |   |
|   | If yes, which meds? |  |   |   |
| <StopBP> | Antihypertensive | Numeric # = 1-digit | 0= No; 1 = Yes - side effects; 2 = Yes - cost; 3 = Yes - no transportation; 4 = Yes - Dr. told them to stop; 5 = Yes - forget to take them; 6 =Yes - Other |   |
| <StopStn> | Statin | Numeric # = 1-digit |   |
| <StopDiab> | Antidiabetic agent | Numeric # = 1-digit |   |
| <StopASA> | Aspirin or other antiplatelet | Numeric # = 1-digit |   |
| <StopCoag> | Anticoagulant | Numeric # = 1-digit |   |
| 15 | Rehabilitation | <Rehab> | Is patient receiving rehabilitation | Numeric # = 1-digit | 1 = Outpatient; 2 = In the home; 3 = Inpatient; 4 = Was at discharge but stopped; 0 = No |   |
| 16 | Symptoms | <mRS30Day> | What is the level of the patient's disability? This is the 30-day modified Rankin Scale score | Numeric # = 1-digit | 0 = No symptoms; 1 = Some symptoms but able to carry out all usual duties and activities; 2 = Some disability, unable to carry out all previous activities, but able to look after own affairs without assistance; 3 = Moderate disability; requiring some help, but able to walk without assistance; 4 = Moderately severe disability; unable to walk without assistance and unable to attend to own bodily needs without assistance; 5 = Severe disability; bedridden, incontinent, and requiring constant nursing care and attention. |   |