Attachment C2
Data Collection Instruments – West Virginia
A-1. Decedent Data Entry Form

File Edit Options Help

Unintentional Pharmaceutical Poisoning Fatalities, WV, 2006: Decedent Data

Data Sources

1. Abstractor Initials [ ]   2. Death Certificate # [ ]   3. OCME Record # [.]

4. OCME data sources (check all that apply)
- ☐ Death investigation (OCME-1)   ☐ DC supplement   ☐ OTP query
- ☐ Autopsy report   ☐ Medical record   ☐ Board of pharmacy
- ☐ Toxicology report

Medical History: Autopsy, OCME-1, Medical record

5. History of pain [▼]

    5a. If yes, check all that apply
- ☐ Abdominal/GI   ☐ Headache   ☐ Infection
- ☐ Arthritis/Joint pain   ☐ Heart/Chest pain   ☐ Recent dental/surgical procedure
- ☐ Cancer   ☐ Neck/Back pain   ☐ Recent trauma
- ☐ Fibromyalgia   ☐ Neuralgia   ☐ Unspecified
- ☐ Genitourinary   ☐ Orofacial/Dental/Sinus   ☐ Other   specify [ ]

6. History of cardiovascular disease [▼]

7. History of pulmonary disease [▼]

Must Enter

Note: response options for #5, #6, and #7 included yes or no/unknown.

File Edit Options Help

Unintentional Pharmaceutical Poisoning Fatalities, WV, 2006: Decedent Data

Medical History continued: Autopsy, OCME-1, Medical record

8. Cumulative list of problems

9. Contributory autopsy findings

10. Decedent height (inches)   11. Decedent weight (lbs)

12. Information available on last visit with medical care provider
    (prior to overdose)

    12a. If yes, date of visit (MM-DD-YYYY)

    12b. If yes, type of visit   if other, specify

    12c. If yes, chief complaint

Note: response options for #12 included yes or no/unknown; response options for #12b included inpatient, emergency room, outpatient, drug treatment facility, other, or unknown.

File   Edit   Options   Help

Unintentional Pharmaceutical Poisoning Fatalities, WV, 2006: Decedent Data

Mental Illness and Substance Abuse History: Autopsy, OCME-1, Medical record, OTP query

13. History of mental illness, excluding substance abuse [▼]

    13a. If yes, check all that apply
        ☐ Mental retardation or pervasive developmental disorders   ☐ Eating disorders
        ☑ Attention deficit hyperactivity disorder   ☐ Sleep disorders
        ☐ Psychotic disorders (including schizophrenia)   ☐ Sexual disorders
        ☐ Bipolar disorders   ☐ Impulse-control disorders
        ☐ Major depression   ☐ Personality disorders
        ☐ Anxiety disorders

14. History of substance abuse or dependence [▼]

    14a. If yes, check all that apply
        ☐ Heroin   ☐ Inhalants (e.g., gases, glue, solvents)
        ☐ Cocaine   ☐ Prescription drugs
        ☐ Methamphetamine (nonprescription)   ☐ OTC drugs
        ☐ Marijuana   ☐ Alcohol
        ☐ Hallucinogens, PCP   ☐ Unspecified substance
                                               ☐ Other substance(s)   specify [ ]

15. History of previous drug overdose [▼]

16. Enrolled in an Opiate Treatment Program (OTP) at time of death [▼]

Note: response options for #13, #14, #15, and #16 included yes or no/unknown.

File Edit Options Help

Unintentional Pharmaceutical Poisoning Fatalities, WV, 2006: Decedent Data

Aggregate Drug Data: Autopsy, OCME-1, BOP

18. Route of adminstration for drugs contributing to death (check all that apply)

☐ Swallowed or ingested   ☐ Suppository or per rectum
☐ Oral mucosa   ☐ Injection (IV, ID, IM)
☐ Snorted   ☐ Applied to skin (e.g., patch)
☐ Huffed or inhaled   ☐ Unknown or unspecified
                                 ☐ Other   specify [_____]

19. Total number of controlled prescriptions in [____]
     year prior to death
20. Number of prescribing providers in year prior to death [____]

21. Number of dispensing pharmacies in year prior to death [____]

22. Number of different narcotics prescribed in year prior to death [____]

23. Number of different benzodiazepines prescribed in year prior to death [____]

Click on button to enter drug-specific data

[Drugs Contributing to Death]

Appendix A: Data Abstraction Instrument
A-2. Drug-Specific Data Entry Form

File   Edit   View   Options   Help

Unintentional Pharmaceutical Poisoning Fatalities, WV, 2006: Drug Data

Include only those drugs stated on autopsy report to have been contributory to death

Drug-Specific Data: Autopsy, Toxicology report, BOP, Medical record, OCME-1

1. OCME Record #

2. Chemical name of drug

   2a. If other, specify

     3. Blood   units
   concentration

4. Metabolite present and noted in comments

5. Is this a prescription drug

   5a. If yes, was this drug prescribed to the decedent

   5b. If yes, record of prescription in 30 days prior to death
     (based on BOP, Medical Record, and/or OCME-1)

   5c. If yes, date of first prescription in BOP record (MM-DD-YYYY)

6. Pharmaceutical preparation(s) implicated

Note: response options for #2 included list of 100 drugs previously noted on death certificates as contributory to death or other; response options for #4, #5, #5a, and #5b included yes or no/unknown.