Modified question	Deleted question	New required question	New optional question	Item	Variable name
	1			Pre-Hospital/ Emergency Medical System (EMS) Data	InhospStk
1				Reasons not admitted	WhyNoAdm
1				Hospital admission data	AmbStatA
1			1	Initial glucose	AdmGlucose
1				Medications currently taking prior to admission	APltAdmYN
1				Medications currently taking prior to admission	ACoagAdmY N

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1			Thrombolytic Treatment	TrmIAM

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1			Thrombolytic Treatment	TrmIAMD
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1			Thrombolytic Treatment	TrmIAMT
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1			Complications of thrombolytic therapy	ThrmCmpTX
1			Reasons for no tPA - 0-3 hour window.	NonTrtC
1			Reasons for no tPA - 0-3 hour window.	NonTrtCT

1			Reasons for no tPA - 0-3 hour window.	NonTrtWN
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1			Reasons for no tPA - 3-4.5 hour window	NonTrtC4

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1			Reasons for no tPA - 3-4.5 hour window NonTrtC	T4
1			Reasons for no tPA - 3-4.5 hour window NonTrtV	VN4
1			Reasons for no tPA - 3-4.5 hour window NonTrtN	IC4
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1			Reasons for no tPA - 3-4.5 hour window NonTrtIL	_4
1			Reasons for no tPA - 3-4.5 hour window NonTrtF	R4
1			Reasons for no tPA - 3-4.5 hour window NonTrtR	14

Reasons for no tPA - 3-4.5 hour window NonTo	
contraindicatiosn or	tSM4
warnings, do these factors apply in the 3-4.5 hour time window? NonTo	rtTD4
If no documented contraindicatiosn or warnings, do these factors apply in the 3-4.5 hour time window? NonTo	rtDX4
If no documented contraindicatiosn or warnings, do these factors apply in the 3-4.5 hour time window? NonTi	rtIV4
If no documented contraindicatiosn or warnings, do these factors apply in the 3-4.5 hour time window?	rtOC4
Other warnings for patients treated in the 3-4.5 hour window? NonTo	·MCA

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1			VTE Prophylaxis	OFXaVTERea son
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1			Dysphagia Screening	DysphaPF

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				Antithrombotics at	
1				discharge	AthDCPlts
1				Antithrombotics at discharge	AthDCCoag
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^{*}Variables in the table with the green background are required data elements. Vari

Text prompt	Legal values	Ite	em	Variable name
Did this stroke occur as in-patient?	1 -Yes; 0 - No			
	1 - discharged directly from ED to home or other location			
	that is not an acute care hospital; 4 - Transferred from your ED to another acute care hosptial; 6 - died in ED; 7 -			
Reasons that the patient was not	Left ED AMA; 8 - discharged from observation status without an inpatient			
admitted	admission; 0 - Other;	Reasons no	t admitted	WhyNoAdm
Was patient ambulatory prior to	1 – Able to ambulate independently w/or w/o device; 2 - Yes but with assistance from another person; 3 - Unable to			
stroke/TIA?	ambulate; 0 - ND	Hospital adı	mission data	AmbStatA
		Functional s to stroke	status prior	mRS_pre
If patient received IV tPA (alteplase),				
what was the first blood glucose?	Numeric # = 3 digit	Initial gluco	se	AdmGluc
Antiplatelet medication	1 - Yes; 0 - No/ND	Medications taking prior admission		APIAdm
Anticoagulant	1 - Yes; 0 - No/ND	Medications taking prior admission		ACoagAdm

	Telestroke	TeleYN
	Telestroke	TeleVid
	Telestroke	TeleRad
	Telestroke	TelePho
	Imaging: prior hospital	ImagTYN
	Imaging: prior hospital	ImagTCT
	Imaging: prior hospital	ImagTCTA
	Imaging: prior hospital	ImagTCTP
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	Imaging: prior hospital	ImagTMRI
	Imaging: prior hospital	ImagTMRA
	Imaging: prior hospital	ImagTMRP

		Imaging: prior hospital	ImagTDSA
		Imaging: prior hospital	ImagTND
		Imaging: prior hospital	ImagTD
		Imaging: prior hospital	ImagTDND
		Imaging: prior hospital	ImagTT
		imaging, prior nospitar	IIIugiii
		lucación i de la serio	los s aTTMD
		Imaging: prior hospital	ImagTTND
		Imaging	ImageYCT
		Imaging	ImageYMR
Date of brain imaging	MMDDYYYY	Imaging	ImageD
		lungaine	Ima na DNID
		Imaging	ImageDND
Time of brain imaging	Time HHMM	Imaging	ImageT
		Imaging	ImageTND
	1- Hemorrhage; 0 - No hemorrhage; 9 - ND or not		
Initial brain imaging findings?	available	Imaging	ImageRes
		Last known well	LKWDNK
		Last known well	LKWTNK
		Discovery of stroke symptoms	DiscDNK
		Discovery of stroke symptoms	DiscTNK
		Thrombolytic Treatment	TrmIVMDN
		Thrombolytic Treatment	TrmIVMTN
IA catheter-based reperfusion at the hospital?	nis 1 - Yes; 0 - No	Thrombolytic Treatment	CathTx

	,		
Date of IA catheter-based reperfusion at this hospital	MMDDYYYY	Thrombolytic Treatment Thrombolytic Treatment	CathTxD CathTDND
		Treatment	Catifibre
Time of IA catheter-based reperfusion at this hospital	Time HHMM	Thrombolytic Treatment	CathTxT
		Thrombolytic Treatment	CathTTND
Were there bleeding complications in a patient transferred after IV tPA (alteplase)	1 - yes & detected prior to transfer; 2 - yes but detected after transfer; 3 - UTD; 9 - Not applicable	Complications of thrombolytic therapy	ThrmCmpt
Contraindications, which include any of the following: SBP > 185 or DBP > 110 mmHg Seizure at onset; Recent surgery/trauma (<15 days) Recent intracranial or spinal surgery, head trauma, or stroke (<3 mo.) History of intracranial hemorrhage or brain aneurysm or vascular malformation or brain tumor; Active internal bleeding (<22 days) Platelets <100,000, PTT> 40 sec after heparin use, or PT > 15 or INR > 1.7, or known bleeding diathesis; Suspicion of subarachnoid hemorrhage (CT findings of ICH, SAH, or major infarct signs);		Reasons for no tPA - 0-3 hour window. Reasons for no tPA - 0-3 hour window.	NonTrtC NonTrtCT

Warnings: conditions that might lead to unfavorable outcomes: Stroke severity – too severe Glucose < 50 or > 400 mg/dl; left heart thrombus; increased risk of bleeding due to: acute (or recent) pericarditis, subacute bacterial endocarditis (SBE), hemostatic defects including those secondary to severe hepatic or renal disease, pregnancy, diabetic hemorrhagic retinopathy, or other hemorrhagic ophthalmic conditions, septic thrombophlebitis or occluded AV cannula at seriously infected site;			
patients currently receiving oral anticoagulants, e.g., Warfarin sodium;	1 Yes; 0 No	Reasons for no tPA - 0- 3 hour window.	NonTrtWN
		If no documented contraindications or warnings, do these factors apply in the 0-3 hour time window?	NonTrtS
		If no documented contraindications or warnings, do these factors apply in the 0-3 hour time window?	NonTrtOT
Contraindications, which include any of the following: SBP > 185 or DBP > 110 mmHg Seizure at onset; Recent surgery/trauma (<15 days) Recent intracranial or spinal surgery, head trauma, or stroke (<3 mo.) History of intracranial hemorrhage or brain aneurysm or vascular malformation or brain tumor; Active internal bleeding (<22 days) Platelets <100,000, PTT> 40 sec after heparin use, or PT > 15 or INR > 1.7, or known bleeding diathesis;	1 Yes; 0 No	Reasons for no tPA - 3- 4.5 hour window	NonTrtC4

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Suspicion of subarachnoid hemorrhage (CT findings of ICH, SAH, or major infarct signs);	1 Yes; 0 No	Reasons for no tPA - 3- 4.5 hour window	NoT4_CT
Warnings: conditions that might lead to unfavorable outcomes: Stroke severity – too severe Glucose < 50 or > 400 mg/dl; left heart thrombus; increased risk of bleeding due to: acute (or recent) pericarditis, subacute bacterial endocarditis (SBE), hemostatic defects including those secondary to severe hepatic or renal disease, pregnancy, diabetic hemorrhagic retinopathy, or other hemorrhagic ophthalmic conditions, septic thrombophlebitis or occluded AV cannula at seriously infected site; patients currently receiving oral anticoagulants, e.g., Warfarin sodium;	1 Yes; 0 No	Reasons for no tPA - 3- 4.5 hour window	NoT4_WN
Care team unable to determine eligibility	1 Yes; 0 No	Reasons for no tPA - 3- 4.5 hour window	NoT4_NC
		Reasons for no tPA - 3- 4.5 hour window	NoT4_OH
Life expectancy <1 year or severe co- morbid illness or CMO on admission	1 Yes; 0 No	Reasons for no tPA - 3- 4.5 hour window	NoT4_ILL
Family refusal	1 Yes; 0 No	Reasons for no tPA - 3-4.5 hour window	NoT4_FR
Rapid improvement	1 Yes; 0 No	Reasons for no tPA - 3- 4.5 hour window	NoT4_RI

		Reasons for no tPA - 3-	
Stroke severity too mild	1 Yes; 0 No	4.5 hour window	NoT4_SM
		If no documented contraindicatiosn or	
		warnings, do these	
Inhospital time delay	1 Yes; 0 No	factors apply in the 3-4.5 hour time window?	NoT4_ED
		If no documented	
		contraindicatiosn or warnings, do these	
Unable to diagnose or did not		factors apply in the 3-	
diagnose in 3 hour time frame	1 Yes; 0 No	4.5 hour time window?	NoT4_DX
		If no documented contraindicatiosn or	
		warnings, do these	
No IV access	1 Yes; 0 No	factors apply in the 3-4.5 hour time window?	NoT4_PT
		If no documented	
		contraindicatiosn or warnings, do these	
		factors apply in the 3-	
Other:	1 Yes; 0 No	4.5 hour time window?	NoT4_O
Were there other documented			
warning conditions for patients		Other warnings for	
treated in the 3-4.5 hour time window?	1 Yes; 0 No	patients treated in the 3-4.5 hour window?	NonTrMCA
window:	1 165, 0 110	4.5 flour willdow:	Nontrivica
		IV tPA delay	tPADel45
		Brain imaging	ImageVas
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		Brain imaging	ImageCTA

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	Brain imaging	ImageCTP
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	Brain imaging	ImageMRP
	Brain imaging	ImageDSA
	Brain imaging	ImageND
	Brain imaging	ImagVD
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	Catheter-based	
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	Catheter-based endovascular stroke treatment	FPassD
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	Catheter-based endovascular stroke treatment	WhyMERD1
	Catheter-based endovascular stroke treatment	WhyMERD2
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	Catheter-based endovascular stroke	
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		Catheter-based endovascular stroke treatment	TICID
		Catheter-based endovascular stroke treatment	TICIDND
		endovascular stroke treatment	TICIT
		Catheter-based endovascular stroke treatment	TICITND
			NIHSSPre
Drug or alcohol abuse?	1 - Yes; 0 - No/ND	Documented past medical history	MHDRUG
Family history of stroke	1 - Yes; 0 - No/ND	Documented past medical history	MHFHSTK
Hormone replacement therapy	1 - Yes; 0 - No/ND	Documented past medical history	MHHRTX
Obesity	1 - Yes; 0 - No/ND	Documented past medical history	MHOBESE
Migraines	1 - Yes; 0 - No/ND	Documented past medical history	MHMIGRN
Chronic renal insufficiency (serum cr	1 - Yes; 0 - No/ND	Documented past medical history	MHRENAL
		Dysphagia Screening	Dyspha24
Is there a documented reason for using Oral Factor Xa Inhibitor for VTE?	1 - Yes; 0 - No	VTE Prophylaxis	OFXAVTE
If patient was screened for dysphagia, what were the results of the screen?	1 - Pass; 2 - Fail; 9 - ND	Dysphagia Screening	DysphaPF

	NIHSS ICD-10-CM	
	code	NIHSSICD
	Ctroko otiology	FtioDos
	Stroke etiology	EtioDoc
	Stroke etiology	EtioType
	Lipid Treatment	CholesTx

		Lipid Treatment	StatnDos
		Lipid Treatment	StatnInt
		Lipia ireatilient	Statimit
		Lipid Treatment	StatnWhy
If patient was discharged on an antithrombotic medication, was it an antiplatelet?	1 - Yes; 0 - No/ND	Antithrombotics at discharge	DC_PLT
If patient was discharged on an antithrombotic medication, was it an anticoagulant?	1 - Yes; 0 - No/ND	Antithrombotics at discharge	DC_Coag

ables in the table with the blue background are optional data elements.

Text prompt	Legal values	Change description
		Variable is deleted, because it can be captured through an existing variable.
Reasons that the patient was not admitted	1 - discharged directly from ED to home or other location that is not an acute care hospital; 4 - Transferred from your ED to another acute care hospital; 6 - died in ED; 7 - Left ED AMA; 8 - discharged from observation status without an inpatient admission; 9 - Other;	Legal values will be modified to align with GWTG
Was patient ambulatory prior to stroke/TIA?	1 – Able to ambulate independently w/or w/o device; 2 - Yes but with assistance from another person; 3 - Unable to ambulate; 9 - ND	Legal values will be modified to align with GWTG
Modified Rankin Score pre-stroke	0 - No symptoms; 1 - no significant disability despite symptoms; 2 - slight disability; 3 - moderate disability, can walk without assistance; 4 - moderate to severe disability, needs assistance to walk; 5 - severe disability, bedridden; 9 - ND	This new data element was added by GWTG, which is the data collection method for a majority of Coverdell participating hospitals. Its addition aligns exactly with GWTG to reduce data burden. This question will help compare functional status before and after a stroke to improve quality of care.
If patient received IV tPA (alteplase), what was the first blood glucose?	Numeric # = 3 digit	Variable name modified to align with GWTG
Antiplatelet medication	1 - Yes; 0 - No/ND	Variable name modified to align with GWTG
Anticoagulant	1 - Yes; 0 - No/ND	Variable name modified to align with GWTG

Was telestroke consultation performed?	1- Yes, the patient received telestroke consultation from my hospital staff when the patient was located at another hospital; 2- Yes, the patient received telestroke consultation from someone other than my staff when the patient was located at another hospital; 3- Yes, the patient received telestroke consultation from a remotely located expert when the patient was located at my hospital; 4- No telestroke consult performed; 9-ND	This new data element was added by GWTG. It aligns exactly with GWTG to reduce data burden. This optional question will allow CDC and states to better understand the use of telemedicine to improve stroke care.
Telestroke consultation performed via interactive video	1 - Yes; 0 - No	This new question is being added by GWTG. This optional question will allow CDC and states to better understand the use of telemedicine to improve stroke care.
Telestroke consultation performed via teleradiology	1 - Yes; 0 - No	This new question is being added by GWTG. This optional question will allow CDC and states to better understand the use of telemedicine to improve stroke care.
Telestroke consultation performed via telephone call	1 - Yes; 0 - No	This new question is being added by GWTG. This optional question will allow CDC and states to better understand the use of telemedicine to improve stroke care.
Was brain or vascular imaging performed prior to transfer to your facility?	1 – Yes; 0 – No/ND	This optional question is added in alignment with GWTG to understand advanced stroke care
If yes, which imaging tests were performed: CT	1 – Yes; 0 – No/ND	This optional question is added in alignment with GWTG to understand advanced stroke care
If yes, which imaging tests were performed: CTA	1 – Yes; 0 – No/ND	This optional question is added in alignment with GWTG to understand advanced stroke care
If yes, which imaging tests were performed: CT Perfusion	1 – Yes; 0 – No/ND	This optional question is added in alignment with GWTG to understand advanced stroke care
If yes, which imaging tests were performed: MRI	1 – Yes; 0 – No/ND	This optional question is added in alignment with GWTG to understand advanced stroke care
If yes, which imaging tests were performed: MRA	1 – Yes; 0 – No/ND	This optional question is added in alignment with GWTG to understand advanced stroke care
If yes, which imaging tests were performed: MR Perfusion	1 – Yes; 0 – No/ND	This optional question is added in alignment with GWTG to understand advanced stroke care

If yes, which imaging tests were performed: DSA	1 – Yes; 0 – No/ND	This optional question is added in alignment with GWTG to understand advanced stroke care
If yes, which imaging tests were performed: Image type not documented	1 – Yes; 0 – No/ND	This optional question is added in alignment with GWTG to understand advanced stroke care
Date 1 st vessel or perfusion imaging initiated at prior hospital	MMDDYYYY	This optional question is added in alignment with GWTG to understand advanced stroke care
Date 1 st vessel or perfusion imaging initiated at prior hospital not documented	1 – Yes; 0 – No	This optional question is added in alignment with GWTG to understand advanced stroke care
Time 1 st vessel or perfusion imaging initiated at prior hospital	Time HHMM	This optional question is added in alignment with GWTG to understand advanced stroke care
Time 1 st vessel or perfusion imaging initiated at prior hospital not documented	1 – Yes; 0 – No	This optional question is added in alignment with GWTG to understand advanced stroke care
If brain imaging performed was it a CT?	1- Yes; 0-No/ND	New question added to align with changes made by GWTG. Only required if selected "yes" to ImageYN
If imaging perfomred was it a diffusion MRI?	1- Yes; 0-No/ND	New question added to align with changes made by GWTG. Only required if selected "yes" to ImageYN
Date brain imaging first initiated at your hospital	MMDDYYYY	The modified wording of this question will align with changes made by GWTG
Date imaging first initiated not documented	1 - Yes; 0 - No	This variable is added to align with GWTG
Time brain imaging first initiated at your hospital	Time HHMM	The modified wording of this question will align with changes made by GWTG
Date imaging first initiated not documented	1 - Yes; 0 - No	This variable is added to align with GWTG
Initial brain imaging findings?	1- acute hemorrhage; 0 - No acute hemorrhage; 9 - ND or not available	Wording of legal values changed to align with GWTG
last known well date not documented	1 - Yes; 0 - No	This variable is added to align with GWTG
Last known well time not documented	1 - Yes; 0 - No	This variable is added to align with GWTG
Discovery date not documented	1 - Yes; 0 - No	This variable is added to align with GWTG
Discovery time not documented	1 - Yes; 0 - No	This variable is added to align with GWTG
IV tPA initiation date not documented	1 - Yes; 0 - No	This variable is added to align with GWTG
IV tPA initiation time not documented	1 - Yes; 0 - No	This variable is added to align with GWTG
Catheter-based treatment at this hospital?	1 - Yes; 0 - No	The modified wording and variable of this question will align with changes made by GWTG, and to capture scientific advances in stroke care

Date of IA t-PA or MER initiation at this hospital	MMDDYYYY	The modified wording and variable of this question will align with changes made by GWTG to provide clarity, and to capture scientific advances in stroke care
Date of IA t-PA or MER initiation not documented	1 - Yes; 0 - No	This variable is added to align with GWTG
Time of IA t-PA or MER initiation at this hospital	Time HHMM	The modified wording and variable of this question will align with changes made by GWTG, and to capture scientific advances in stroke care
Time of IA t-PA or MER initiation not documented	1 - Yes; 0 - No	This variable is added to align with GWTG
Were there bleeding complications in a patient transferred after IV tPA (alteplase)	1 - yes & detected prior to transfer; 2 - yes but detected after transfer; 3 - UTD; 9 - Not applicable	Variable is modified to align with GTWG and adhere to character length guidelines
Contraindications, which include any of the following: Elevated blood pressure (systolic > 185 or diastolic > 110 mmHg) despite treatment; Recent intracranial or spinal surgery or significant head trauma, or prior stroke in previous 3 months; History of previous intracranial hemorrhage, intracranial neoplasm, arteriovenous malformation, or aneurysm; Active internal bleeding; Acute bleeding diathesis (low platelet count, increased PTT, INR ≥ 1.7 or use of NOAC); Arterial puncture at noncompressible site in previous 7 days; Blood glucose concentration <50 mg/dL (2.7 mmol/L) Symptoms suggest subarachnoid hemorrhage; CT demonstrates multilobar infarction (hypodensity >1/3 cerebral hemisphere)		Updates are needed to align with the most recent FDA-approved contraindications and warnings for thrombolytics administration. Updates will also better align with changes in GWTG Updates are needed to align with the most recent FDA-approved contraindications and warnings for thrombolytics administration. Updates will also better align with changes in GWTG

Warnings: Pregnancy; Recent acute myocardial infarction (within previous 3 months); Seizure at onset with postictal residual neurological impairments; Major surgery or serious trauma within previous 14 days; Recent gastrointestinal or urinary tract hemorrhage (within previous 21 days)	1 Yes; 0 No	Updates are needed to align with the most recent FDA-approved contraindications and warnings for thrombolytics administration. Updates will also better align with changes in GWTG
Stroke too severe	1 Yes; 0 No	This will be added to align with its new addition in GWTG
Other reasons (text)	1 Yes; 0 No	This will be added to align with its new addition in GWTG
Contraindications, which include any of the following: Elevated blood pressure (systolic > 185 or diastolic > 110 mmHg) despite treatment; Recent intracranial or spinal surgery or significant head trauma, or prior stroke in previous 3 months; History of previous intracranial hemorrhage, intracranial neoplasm, arteriovenous malformation, or aneurysm; Active internal bleeding; Acute bleeding diathesis (low platelet count, increased PTT, INR ≥ 1.7 or use of NOAC); Arterial puncture at non-compressible site in previous 7 days; Blood glucose	1 Yes; 0 No	Updates are needed to align with the most recent FDA-approved contraindications and warnings for thrombolytics administration. Updates will also better align with changes in GWTG

Symptoms suggest subarachnoid hemorrhage; CT demonstrates multi- lobar infarction (hypodensity >1/3 cerebral hemisphere)	1 Yes; 0 No	Updates are needed to align with the most recent FDA-approved contraindications and warnings for thrombolytics administration. Variable name was also modified to adhere to character length guidelines set by GWTG. This will ultimately reduce burden for states that use a mix of GWTG and other systems.
Warnings: Pregnancy; Recent acute myocardial infarction (within previous 3 months); Seizure at onset with postictal residual neurological impairments; Major surgery or serious trauma within previous 14 days; Recent gastrointestinal or urinary tract hemorrhage (within previous 21 days)	1 Yes; 0 No	Updates are needed to align with the most recent FDA-approved contraindications and warnings for thrombolytics administration. Variable name is also modified to adhere to character length guidelines set by GWTG. This will ultimately reduce burden for states that use a mix of GWTG and other systems.
Care team unable to determine	1 Yes; 0 No	Variable name is modified to adhere to character length guidelines set by GWTG. This will ultimately reduce burden for states that use a mix of GWTG and other systems.
IV or IA thrombolysis/thrombectomy at an outside hospital prior to arrival	1 Yes; 0 No	New optional variable will be collected to capture thrombolytic administration prior to hospital arrival
Life expectancy <1 year or severe co- morbid illness or CMO on admission	1 Yes; 0 No	Variable name is modified to adhere to character length guidelines set by GWTG. This will ultimately reduce burden for states that use a mix of GWTG and other systems.
Patient/family refusal	1 Yes; 0 No	Variable name is modified to adhere to character length guidelines set by GWTG. This will ultimately reduce burden for states that use a mix of GWTG and other systems.
Rapid improvement	1 Yes; 0 No	Variable name is modified to adhere to character length guidelines set by GWTG. This will ultimately reduce burden for states that use a mix of GWTG and other systems.

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Stroke severity too mild	1 Yes; 0 No	Variable name is modified to adhere to character length guidelines set by GWTG. This will ultimately reduce burden for states that use a mix of GWTG and other systems.
In-hospital time delay	1 Yes; 0 No	Variable name is modified to adhere to character length guidelines set by GWTG. This will ultimately reduce burden for states that use a mix of GWTG and other systems.
Delay in stroke diagnosis	1 Yes; 0 No	Variable name is modified to adhere to character length guidelines set by GWTG. This will ultimately reduce burden for states that use a mix of GWTG and other systems.
No IV access	1 Yes; 0 No	Variable name is modified to adhere to character length guidelines set by GWTG. This will ultimately reduce burden for states that use a mix of GWTG and other systems.
Other reasons	1 Yes; 0 No	Variable name is modified to adhere to character length guidelines set by GWTG. This will ultimately reduce burden for states that use a mix of GWTG and other systems.
Additional relative exclusion criteria: Age >80; History of both diabetes and prior ischemic stroke; Taking an oral anticoagulant regardless of INR; Severe stroke (NIHSS >25)	1 Yes; 0 No	Updates are needed to align with the most recent FDA-approved contraindications and warnings for thrombolytics administration.
If IV tPA (alteplase) was initiated greater than 45 minutes after hospital arrival, were eligibility or medical reasons documented as the cause for delay?	1 Yes; 0 No	New required element to align with new national time goals set by AHA/ASA.
Was vascular or perfusion imaging performed at your hospital?	1 - Yes; 0 - No/ND	Added as optional to collect information for advanced stroke treatment performance measures. Question is only available for certain stroke patients
If yes, type of imaging: CTA	1 - Yes; 0 - No/ND	Added as optional to collect information for advanced stroke treatment performance measures. Question is only available for certain stroke patients

If yes, type of imaging: CT Perfusion	1 - Yes; 0 - No/ND	Added as optional to collect information for advanced stroke treatment performance measures. Question is only available for certain stroke patients
If yes, type of imaging: MRA	1 - Yes; 0 - No/ND	Added as optional to collect information for advanced stroke treatment performance measures. Question is only available for certain stroke patients
If yes, type of imaging: MR Perfusion	1 - Yes; 0 - No/ND	Added as optional to collect information for advanced stroke treatment performance measures. Question is only available for certain stroke patients
If yes, type of imaging: DSA (catheter angiography)	1 - Yes; 0 - No/ND	Added as optional to collect information for advanced stroke treatment performance measures. Question is only available for certain stroke patients
If yes, type of imaging: ND	1 - Yes; 0 - No/ND	Added as optional to collect information for advanced stroke treatment performance measures. Question is only available for certain stroke patients
Date 1 st vessel or perfusion imaging initiated at your hospital	MMDDYYYY	Added as optional to collect information for advanced stroke treatment performance measures. Question is only available for certain stroke patients
Date 1 st vessel or perfusion imaging initiated at your hospital not documented	1 - Yes; 0 - No	Added as optional to collect information for advanced stroke treatment performance measures. Question is only available for certain stroke patients
Time 1 st vessel or perfusion imaging initiated at your hospital	Time HHMM	Added as optional to collect information for advanced stroke treatment performance measures. Question is only available for certain stroke patients
Time 1 st vessel or perfusion imaging initiated at your hospital not documented	1 - Yes; 0 - No	Added as optional to collect information for advanced stroke treatment performance measures. Question is only available for certain stroke patients
Was a target lesion (large vessel occlusion) visualized?	1 - Yes; 0 - No	Added as optional to collect information for advanced stroke treatment performance measures. Question is only available for certain stroke patients

If yes, site of large vessel occlusion: ICA	1 - Yes; 0 - No	Added as optional to collect information for advanced stroke treatment performance measures. Question is only available for certain stroke patients
If yes, site of large vessel occlusion: Intracranial ICA	1 - Yes; 0 - No	Added as optional to collect information for advanced stroke treatment performance measures. Question is only available for certain stroke patients
If yes, site of large vessel occlusion: Cervical ICA	1 - Yes; 0 - No	Added as optional to collect information for advanced stroke treatment performance measures. Question is only available for certain stroke patients
If yes, site of large vessel occlusion: ICA other/UTD	1 - Yes; 0 - No	Added as optional to collect information for advanced stroke treatment performance measures. Question is only available for certain stroke patients
If yes, site of large vessel occlusion: MCA	1 - Yes; 0 - No	Added as optional to collect information for advanced stroke treatment performance measures. Question is only available for certain stroke patients
If yes, site of large vessel occlusion: MCA M1	1 - Yes; 0 - No	Added as optional to collect information for advanced stroke treatment performance measures. Question is only available for certain stroke patients
If yes, site of large vessel occlusion: MCA M2	1 - Yes; 0 - No	Added as optional to collect information for advanced stroke treatment performance measures. Question is only available for certain stroke patients
If yes, site of large vessel occlusion: MCA Other/UTD	1 - Yes; 0 - No	Added as optional to collect information for advanced stroke treatment performance measures. Question is only available for certain stroke patients
If yes, site of large vessel occlusion: Basilar artery	1 - Yes; 0 - No	Added as optional to collect information for advanced stroke treatment performance measures. Question is only available for certain stroke patients
If yes, site of large vessel occlusion: Other cerebral artery branch	1 - Yes; 0 - No	Added as optional to collect information for advanced stroke treatment performance measures. Question is only available for certain stroke patients

If yes, site of large vessel occlusion: Vertebral artery	1 - Yes; 0 - No	Added as optional to collect information for advanced stroke treatment performance measures. Question is only available for certain stroke patients
What is the date of skin puncture at this hospital to access the arterial site selected for endovascular treatment of a cerebral artery occlusion?	MMDDYYYY	Added as optional to collect information for advanced stroke treatment performance measures. Question is only available for certain stroke patients
What is the time of skin puncture at this hospital to access the arterial site selected for endovascular treatment of a cerebral artery occlusion?	Times HHMM	Added as optional to collect information for advanced stroke treatment performance measures. Question is only available for certain stroke patients
Was a mechanical endovascular reperfusion procedure attempted during this episode of care (at this hospital)?	1 - Yes; 0 - No	Added as optional to collect information for advanced stroke treatment performance measures. Question is only available for certain stroke patients
Are reasons for not performing mechanical endovascular reperfusion therapy documented?	1 - Yes; 0 - No	Added as optional to collect information for advanced stroke treatment performance measures. Question is only available for certain stroke patients
Reasons for not performing mechanical endovascular therapy includes: significant pre-stroke disability (pre-stroke mRS >1); no evidence of proximal occlusion; NIHSS <6; brain imaging not favorable/hemorrhage transformation (ASPECTS score <6); groin puncture could not be initiated within 6 hours of symptom onset; anatomical reason- unfavorable vascular anatomy that limits access to the occluded artery; patient/family refusal; and/or MER performed at outside hospital	1 - Yes; 0 - No	Added as optional to collect information for advanced stroke treatment performance measures. Question is only available for certain stroke patients
Reason for not performing mechanical endovascular therapy: equipment-related delay	1 - Yes; 0 - No	Added as optional to collect information for advanced stroke treatment performance measures. Question is only available for certain stroke patients
Reason for not performing mechanical endovascular therapy: no endovascular specialist available	1 - Yes; 0 - No	Added as optional to collect information for advanced stroke treatment performance measures. Question is only available for certain stroke patients

Reason for not performing mechanical endovascular therapy: delay in stroke diagnosis Reason for not performing mechanical endovascular therapy: vascular imaging not performed	1 - Yes; 0 - No 1 - Yes; 0 - No	Added as optional to collect information for advanced stroke treatment performance measures. Question is only available for certain stroke patients Added as optional to collect information for advanced stroke treatment performance measures. Question is only available for certain stroke patients
Reason for not performing mechanical endovascular therapy: advanced age	1 - Yes; 0 - No	Added as optional to collect information for advanced stroke treatment performance measures. Question is only available for certain stroke patients
Reason for not performing mechanical endovascular therapy: other reason	1 - Yes; 0 - No	Added as optional to collect information for advanced stroke treatment performance measures. Question is only available for certain stroke patients
If MER treatment at this hospital, type of treatment: retrievable stent	1 - Yes; 0 - No	Added as optional to collect information for advanced stroke treatment performance measures. Question is only available for certain stroke patients
If MER treatment at this hospital, type of treatment: other mechanic al clot removal device besides stent retrieval	1 - Yes; 0 - No	Added as optional to collect information for advanced stroke treatment performance measures. Question is only available for certain stroke patients
If MER treatment at this hospital, type of treatment: clot suction device	1 - Yes; 0 - No	Added as optional to collect information for advanced stroke treatment performance measures. Question is only available for certain stroke patients
If MER treatment at this hospital, type of treatment: intracranial angioplasty, with or without permanent stent	1 - Yes; 0 - No	Added as optional to collect information for advanced stroke treatment performance measures. Question is only available for certain stroke patients
If MER treatment at this hospital, type of treatment: cervical carotid angioplasty, with or without permanent stent	1 - Yes; 0 - No	Added as optional to collect information for advanced stroke treatment performance measures. Question is only available for certain stroke patients
If MER treatment at this hospital, type of treatment: other mechanic al clot removal device besides stent retrieval	1 - Yes; 0 - No	Added as optional to collect information for advanced stroke treatment performance measures. Question is only available for certain stroke patients

What is the date of the first pass of a clot retrieval device at this hospital?	MMDDYYYY	Added as optional to collect information for advanced stroke treatment performance measures. Question is only available for certain stroke patients
Date of the first pass of clot retrieval device at this hospital not documented	1 - Yes; 0 - No	
What is the time of the first pass of a clot retrieval device at this hospital?	Time HHMM	Added as optional to collect information for advanced stroke treatment performance measures. Question is only available for certain stroke patients
Time of the first pass of clot retrieval device at this hospital not documented	1 - Yes; 0 - No	
Is a cause(s) for delay in performing mechanical endovascular reperfusion therapy documented?	1 - Yes; 0 - No	Added as optional to collect information for advanced stroke treatment performance measures. Question is only available for certain stroke patients
Reasons for delay: social/religious; initial refusal; care-team unable to determine eligibility; management of concomitant emergent/acute conditions such as cardiopulmonary arrest, respiratory failure (requiring intubation); and/or investigational or experimental protocol for thrombolysis	1 - Yes; 0 - No	Added as optional to collect information for advanced stroke treatment performance measures. Question is only available for certain stroke patients
Reasons for delay: delay in stroke diagnosis	1 - Yes; 0 - No	Added as optional to collect information for advanced stroke treatment performance measures. Question is only available for certain stroke patients
Reasons for delay: in-hospital time delay	1 - Yes; 0 - No	Added as optional to collect information for advanced stroke treatment performance measures. Question is only available for certain stroke patients
Reasons for delay: equipment-related delay	1 - Yes; 0 - No	Added as optional to collect information for advanced stroke treatment performance measures. Question is only available for certain stroke patients
Reasons for delay: other	1 - Yes; 0 - No	Added as optional to collect information for advanced stroke treatment performance measures. Question is only available for certain stroke patients
(TICI) Post-Treatment Reperfusion Grade	Grade 2a; 4 – Grade 2b; 5 – Grade 3; 6 - ND	This optional question is added to capture advanced stroke treatment

Date a post-treatment TICI Reperfusion Grade of 2B/3 was first documented during the mechanical thrombectomy procedure?	Date MMDDYYYY	This optional question is added to capture advanced stroke treatment
Date a post-treatment TICI reperfusion grade 2B/3 not documented	1 - Yes; 0 - No	
during the mechanical thrombectomy procedure?	Time HHMM	This optional question is added to capture advanced stroke treatment
Time a post-treatment TICI reperfusion grade 2B/3 not documented	1 - Yes; 0 - No	
documented prior to initiation of IA t-PA or MER at this hospital?	Numeric # = 1 digit	advanced stroke treatment performance measures
Drug or alcohol abuse?	1 - Yes; 0 - No/ND	This variable name is modified to align with GWTG
Family history of stroke	1 - Yes; 0 - No/ND	This variable name is modified to align with GWTG
Hormone replacement therapy	1 - Yes; 0 - No/ND	This variable name is modified to align with GWTG
Obesity	1 - Yes; 0 - No/ND	This variable name is modified to align with GWTG
Migraines	1 - Yes; 0 - No/ND	This variable name is modified to align with GWTG
Chronic renal insufficiency (serum creati	1 - Yes; 0 - No/ND	This variable name is modified to align with GWTG
Was the patient screened for dysphagia within 24 hours of admission?	1 – Yes; 0 - No or ND; 2 - NC	Question is needed to capture this data for dysphagia screening performance measure.
Is there a documented reason for using Oral Factor Xa Inhibitor for VTE?	1 - Yes; 0 - No	Variable name is modified to align with GWTG
If patient was screened for dysphagia, what were the results of the most recent screen prior to oral intake?	1 - Pass; 2 - Fail; 9 - ND	Question wording is changed to align with GWTG.

	0 - R29.700; 1 - R29.701; 2 - R29.702; 3 - R29.703; 4 - R29.704; 5 - R29.705; 6 - R29.706; 7 - R29.707; 8 - R29.708; 9 - R29.709; 10 - R29.710; 11 - R29.711; 12 - R29.712; 13 - R29.713; 14 - R29.714; 15 - R29.715; 16 - R29.716; 17 - R29.717; 18 - R29.716; 17 - R29.717; 18 - R29.720; 21 - R29.721; 22 - R29.722; 23 - R29.723; 24 - R29.724; 25 - R29.725; 26 - R29.726; 27 - R29.727; 28 - R29.726; 27 - R29.727; 28 - R29.728; 29 - R29.729; 30 - R29.730; 31 - R29.731; 32 - R29.732; 33 - R29.733; 34 - R29.734; 35 - R29.735; 36 - R29.736; 37 - R29.737; 38 - R29.738; 39 - R29.739; 40 - R29.740; 41 - R29.741; 42 - R29.742; 70 - R29.70; 71 - R29.71; 72 - R29.72; 73 - R29.73; 74 - R29.74; 75 - R29.7	Addition of this optional variable will provide an understanding of agreement between clinically documented NIHSS and those that are included as ICD-10-CM codes before stroke severity is added into
ICD-10-CM code for first captured NIHSS score (any position)	R25./3, /4 – R25./4, /3 – R25./	nationally reported risk-adjustment models
Was stroke etiology documented in the patient medical record?	1 – Yes; 0 - No	Addition of this optional variable is needed to capture information on mechanism of the stroke documented in the patient record. It aligns directly with GWTG.
If the stroke etiology was documented, select the type.	1 – Large-artery atherosclerosis (e.g., carotid or basilar stenosis); 2 – Cardioembolism (e.g., atrial fibrillation/flutter, prosthetic heart valve, recent MI); 3 – Smallvessel occlusion (e.g., subcortical or brain stem lacunar infarction <1.5 cm); 4 – Stroke of other determined etiology (e.g., dissection, hypercoagulability, other); 5 – Cryptogenic stroke (multiple potential etiologies, undetermined etiology); 9 - Unspecified	Addition of this optional variable is needed to capture information on mechanism of the stroke documented in the patient record. It aligns directly with GWTG.
Was a cholesterol-reducing treatment prescribed at discharge?	1 – None; 2 – None- contraindicated; 3 – Statin; 4 – Fibrate; 5 – Other med; 7 – Niacin; 8 – Absorption inhibitor; 9 – PCSK9	This new variable is needed for the calculation of a new intensive statin therapy perfoirmance measure. It aligns directly with GWTG, which requires the collection of this question.

Statin dose	Text 25 characters	This new variable is needed for the calculation of a new intensive statin therapy perfoirmance measure. It aligns directly with GWTG, which requires the collection of this question.
What intensity was the statin that was prescribed at discharge?	1 - High-intensity statin; 2 - Moderate-intensity statin; 3 – Low-intensity statin; 9 - Unknown	This new variable is needed for the calculation of a new intensive statin therapy perfoirmance measure. Specific medications that are collected by GWTG are mapped to the legal value categories to reduce burden.
Was there a documented reason for not prescribing guideline recommended statin dose?	1 - Intolerant to moderate or greater intensity; 2 - No evidence of atherosclerosis (cerebral, coronary, or peripheral vascular disease); 3 - Other documented reason; 9 - Unknown	This new variable is needed for the calculation of a new intensive statin therapy perfoirmance measure. It aligns directly with GWTG, which requires the collection of this question.
If patient was discharged on an antithrombotic medication, was it an antiplatelet?	1 - Yes; 0 - No/ND	Variable name is modified to align with GWTG
If patient was discharged on an antithrombotic medication, was it an anticoagulant?	1 - Yes; 0 - No/ND	Variable name is modified to align with GWTG