PAUL **Coverdell**
NATIONAL ACUTE STROKE PROGRAM

Coverdell Program

Data Elements Manual

Edition 1.0

Contents

INTRODUCTION

This Coverdell Data Elements Manual was written to provide guidance on the collection and submission of data elements (DEs) for the Paul Coverdell National Acute Stroke Program (PCNASP). The Program currently funds 13 recipients of the cooperative agreement ("recipients") across the United States. Recipients are required to collect and report DEs as part of standardized data reporting for the Coverdell Program. DEs are used by the CDC and its recipients to describe, monitor, and assess progress and performance of the program.

The DEs in this manual (Edition 1) received approval in September 2021 from the Federal Office of Management and Budget. This manual pertains to the cooperative agreement DP21-2102. Data for the 163 DEs can be separated into two sections: *Pre-Hospital* and *In-Hospital*. There are 4 additional administrative DEs that will precede both sections and will be used to append the *Pre-Hospital* and *In-Hospital* data files together. These 4 administrative DEs, bring the total number of DEs to 167.

The DE manual includes information about technical specifications for the DE variables included in each of the categories, guidance for their submission, and conventions for processing the data. Specifications for each DE include variable name, prompt, format, source of data, denominator population, acceptable values, description, and use for data analysis. ***Please note that the format provided is relevant for data submitted by recipients for a four-month reporting period, which corresponds to three submissions per year.*** *V*ariables are reported for each patient. The values for each patient establish a record for their hospital visit. The manual is organized as follows:

Pre-Hospital. This section includes 8 DE variables. It includes data about the *Pre-Hospital* aspect within the stroke continuum of care. It includes Emergency Medical System (EMS) arrival, EMS departure, patient age and gender, as well as the performance of a stroke screen and glucose level.

In-Hospital. This section contains 155 DE variables. It includes data about the *In-Hospital* aspect within the stroke continuum of care. It includes demographic information that includes age, gender, race, ethnicity, and insurance status. Additional information includes EMS information, data and time of hospital arrival, hospital admission status, comfort measures, medications taken prior to admission, medical history, admission data, telestroke, imaging, patient last known to be well, first discovery of stroke-like symptoms, NIH Stroke Scale score, stroke treatment, other complications, active bacterial or viral infection at admission or during hospitalization, date of discharge from hospital, principal discharge ICD-10-CM diagnosis, clinical diagnosis related to stroke that was ultimately responsible for this admission, discharge disposition, functional status at discharge, antihypertensive treatment at discharge, lipid treatment, atrial fibrillation, antithrombotics at discharge, smoking counseling, stroke education, and rehabilitation.

Administrative. This section contains 4 DE variables that are necessary for analytical utility, data quality, and program fidelity. These are State FIPS, unique patient identifier, residential zip code, and unique hospital identifier. Theses DEs assist with monitoring program fidelity, where the expectation is to serve participants disproportionately impacted by high prevalence of risk factors for stroke events, as well as stroke outcomes. **At this time, these DEs are formally being added through an OMB Change request.**

This manual is a living document that will be updated occasionally. When modifications are necessary, CDC will notify recipients that the updated manual is available on the Awards Management Platform (AMP).

PRE-HOSPITAL DATA ELEMENTS

Administrative Data

Item Pre-0A: STFIPS	**State FIPS Code**
	State FIPS Code
ADMINSTRATIVE *(requesting approval)*	
FORMAT	**Type:** Character
	Item Length: 2
	Leading Zeros: Yes
	Beginning Position: 1
	Valid Range: Specific Values
SOURCE	National FIPS Code ID List
DENOMINATOR POPULATION	The denominator includes all patients
VALUES AND DESCRIPTION	
	05 Arkansas
	12 Florida
	13 Georgia
	15 Hawaii
	21 Kentucky
	25 Massachusetts
	26 Michigan
	27 Minnesota
	36 New York
	37 North Carolina
	39 Ohio
	51 Virginia
	55 Wisconsin

Item Pre-0B: PATIENTID	**Unique Participant ID Number** Unique Participant ID Number		
ADMINSTRATIVE *(requesting approval)*			
FORMAT	**Type:**	Character	
	Item Length:	15	
	Leading Zeros:	Yes	
	Beginning Position:	3	
	Valid Range:	Unique Coded Values	
SOURCE	Not applicable; State-specific variable		
DENOMINATOR POPULATION	The denominator includes all patients		
VALUES AND DESCRIPTION	State Assigns Unique Identifier up to 15 characters		

Item Pre-0C: ZIP	**Residence Zip Code**
	Zip Code of Residence
ADMINSTRATIVE *(requesting approval)*	

FORMAT	**Type:** Character
	Item Length: 5
	Leading Zeros: Yes
	Beginning Position: 18
	Valid Range: Valid Zip Code

SOURCE	National ZIP Code ID List
DENOMINATOR POPULATION	The denominator includes all patients
VALUES AND DESCRIPTION	Valid Zip Code

Item Pre-0D: HOSPID	**Unique Hospital ID Assigned by State**
	A Hospital ID Number generated by State. State Keeps Key
ADMINSTRATIVE *(requesting approval)*	
FORMAT	**Type:** Alphanumeric
	Item Length: 5
	Leading Zeros: Yes
	Beginning Position: 23
	Valid Range: Unique Coded Values
SOURCE	Not applicable; State-specific variable
DENOMINATOR POPULATION	The denominator includes all patients
VALUES AND DESCRIPTION	Confidential Value Assigned by State
OTHER INFORMATION	Historically, Coverdell funded recipients have used a "unique hospital identifier", which was a random 5-digit code generated by state health departments and the key was retained at the state level. For the purposes of this data manual, this practice will be continued. These randomized hospital identifiers will be submitted in the data file.

Item Pre-1a: SCNARRD	Scene Arrival Date
	This variable indicates the scene arrival date
FORMAT	**Type:** Date
	Item Length: 8
	Leading Zeros: Yes
	Beginning Position: 28
	Valid Range: Valid date
SOURCE	Not applicable; COVERDELL-specific variable
DENOMINATOR POPULATION	The denominator includes all patients
VALUES AND DESCRIPTION	Valid date in MMDDYY format
	MM= Month (01-12), DD=Day (01-31) and YYYY = Year (20XX)

Item Pre-1b: SCNARRT	Scene Arrival Time
	This variable indicates the scene arrival time
FORMAT	**Type:** Time
	Item Length: 4
	Leading Zeros: Yes
	Beginning Position: 36
	Valid Range: Valid time
SOURCE	Not applicable; COVERDELL-specific variable
DENOMINATOR POPULATION	The denominator includes all patients
VALUES AND DESCRIPTION	
	Valid time in HH:MM format
	Time must be recorded in military time. HH=Hour (00-23) and MM=Minutes (00-59)

Item Pre-2a: SCNDPTD	Scene Departure Date
	This variable indicates the scene departure date
FORMAT	**Type:** Date
	Item Length: 8
	Leading Zeros: Yes
	Beginning Position: 40
	Valid Range: Valid date
SOURCE	Not applicable; COVERDELL-specific variable
DENOMINATOR POPULATION	The denominator includes all patients
VALUES AND DESCRIPTION	Valid date in MMDDYY format MM= Month (01-12), DD=Day (01-31) and YYYY = Year (20XX)

Item Pre-2b: SCNDPTT	Scene Departure Time
	This variable indicates the scene departure time
FORMAT	**Type:** Time
	Item Length: 4
	Leading Zeros: Yes
	Beginning Position: 48
	Valid Range: Valid time
SOURCE	Not applicable; COVERDELL-specific variable
DENOMINATOR POPULATION	The denominator includes all patients
VALUES AND DESCRIPTION	Valid time in HH:MM format Time must be recorded in military time. HH=Hour (00-23) and MM=Minutes (00-59)

Item Pre-3a: AGE	Age This variable indicates the patient's age	
FORMAT	**Type:**	Character
	Item Length:	3
	Leading Zeros:	Yes
	Beginning Position: 52	
	Valid Range:	000-125; values cannot be blank
SOURCE	Not applicable; COVERDELL-specific variable	
DENOMINATOR POPULATION	The denominator includes all patients	
VALUES AND DESCRIPTION	Valid age in 000 format with a leading 0	

Item Pre-4a: GENDER	Gender
	This variable indicates the patient's gender

FORMAT	**Type:** Numeric
	Item Length: 1
	Leading Zeros: No
	Beginning Position: 55
	Valid Range: See values; cannot be blank

SOURCE	Not applicable; COVERDELL-specific variable

DENOMINATOR POPULATION	The denominator includes all patients

VALUES AND DESCRIPTION	
	1 Male
	2 Female
	3 Unknown

Item Pre-5a: STKSCN	**Did EMS perform a pre-hospital stroke screen?**
	This variable indicates whether EMS performed a pre-hospital stroke screen
FORMAT	**Type:** Numeric
	Item Length: 1
	Leading Zeros: No
	Beginning Position: 56
	Valid Range: See values; cannot be blank
SOURCE	Not applicable; COVERDELL-specific variable
DENOMINATOR POPULATION	The denominator includes all patients
VALUES AND DESCRIPTION	1 Yes
	2 No
	3 Not Documented

Item Pre-5b: EMSGLU	Glucose level	
	This variable indicates the patient's glucose level	
FORMAT	Type:	Numeric
	Item Length:	3
	Leading Zeros:	No
	Beginning Position:	57
	Valid Range:	See values; cannot be blank
SOURCE	Not applicable; COVERDELL-specific variable	
DENOMINATOR POPULATION	The denominator includes all patients	
VALUES AND DESCRIPTION		
	Valid glucose value	

IN-HOSPITAL DATA ELEMENTS

Administrative Data

Item IN-0A: STFIPS	**State FIPS Code**
	State FIPS Code
ADMINSTRATIVE *(request approval)*	
FORMAT	**Type:** Character
	Item Length: 2
	Leading Zeros: Yes
	Beginning Position: 1
	Valid Range: Specific Values
SOURCE	National FIPS Code ID List
DENOMINATOR POPULATION	The denominator includes all patients
VALUES AND DESCRIPTION	05 Arkansas 12 Florida 13 Georgia 15 Hawaii 21 Kentucky 25 Massachusetts 26 Michigan 27 Minnesota 36 New York 37 North Carolina 39 Ohio 51 Virginia 55 Wisconsin

Item IN-0B: PATIENTID	Unique Participant ID Number
	Unique Participant ID Number
ADMINSTRATIVE *(request approval)*	
FORMAT	**Type:** Character
	Item Length: 15
	Leading Zeros: Yes
	Beginning Position: 3
	Valid Range: Unique Coded Values
SOURCE	Not applicable; State-specific variable
DENOMINATOR POPULATION	The denominator includes all patients
VALUES AND DESCRIPTION	State Assigns Unique Identifier up to 15 characters

Item IN-0C: ZIP	**Residence Zip Code** Zip Code of Residence		
ADMINSTRATIVE *(request approval)*			
FORMAT	**Type:**	Character	
	Item Length:	5	
	Leading Zeros:	Yes	
	Beginning Position:	18	
	Valid Range:	Valid Zip Code	
SOURCE	National ZIP Code ID List		
DENOMINATOR POPULATION	The denominator includes all patients		
VALUES AND DESCRIPTION	Valid Zip Code		

Item IN-0D: HOSPID	**Unique Hospital ID Assigned by State**
	A Hospital ID Number generated by State. State Keeps Key
ADMINSTRATIVE *(request approval)*	
FORMAT	**Type:** Alphanumeric
	Item Length: 5
	Leading Zeros: Yes
	Beginning Position: 23
	Valid Range: Unique Coded Values
SOURCE	Not applicable; State-specific variable
DENOMINATOR POPULATION	The denominator includes all patients
VALUES AND DESCRIPTION	Confidential Value Assigned by State
OTHER INFORMATION	Historically, Coverdell funded recipients have used a "unique hospital identifier", which was a random 5-digit code generated by state health departments and the key was retained at the state level. For the purposes of this data manual, this practice will be continued. These randomized hospital identifiers will be submitted in the data file.

Demographic Data

Item IN-1a: AGE	Age This variable indicates the patient's age	
FORMAT	**Type:**	Character
	Item Length:	3
	Leading Zeros:	Yes
	Beginning Position:	28
	Valid Range:	000-125; cannot be blank
SOURCE	Not applicable; COVERDELL-specific variable	
DENOMINATOR POPULATION	The denominator includes all patients	
VALUES AND DESCRIPTION	Valid age in 000 format with a leading 0	

Item IN-1b: GENDER	**Gender**
	This variable indicates the patient's gender
FORMAT	**Type:** Numeric
	Item Length: 1
	Leading Zeros: No
	Beginning Position: 31
	Valid Range: See values; cannot be blank
SOURCE	Not applicable; COVERDELL-specific variable
DENOMINATOR POPULATION	The denominator includes all patients
VALUES AND DESCRIPTION	
	1 Male
	2 Female
	3 Unknown

Item IN-1c: RACEW	White
	This variable indicates the patient identifies White as a race (select all response options that apply)
FORMAT	**Type:** Numeric
	Item Length: 1
	Leading Zeros: No
	Beginning Position: 32
	Valid Range: See values; cannot be blank
SOURCE	Not applicable; COVERDELL-specific variable
DENOMINATOR POPULATION	The denominator includes all patients
VALUES AND DESCRIPTION	0 No 1 Yes

Item IN-1d: RACEAA	**Black or African American**
	This variable indicates the patient identifies Black or African American as a race (select all response options that apply)
FORMAT	**Type:** Numeric
	Item Length: 1
	Leading Zeros: No
	Beginning Position: 33
	Valid Range: See values; cannot be blank
SOURCE	Not applicable; COVERDELL-specific variable
DENOMINATOR POPULATION	The denominator includes all patients
VALUES AND DESCRIPTION	0 No
	1 Yes

Item IN-1e: RACEAS	Asian
	This variable indicates the patient identifies Asian as a race (select all response options that apply)
FORMAT	**Type:** Numeric
	Item Length: 1
	Leading Zeros: No
	Beginning Position: 34
	Valid Range: See values; cannot be blank
SOURCE	Not applicable; COVERDELL-specific variable
DENOMINATOR POPULATION	The denominator includes all patients
VALUES AND DESCRIPTION	0 No 1 Yes

Item IN-1f: RACEHPI	**Native Hawaiian or Other Pacific Islander**
	This variable indicates the patient identifies Native Hawaiian or Other Pacific Islander as a race (select all response options that apply)
FORMAT	**Type:** Numeric
	Item Length: 1
	Leading Zeros: No
	Beginning Position: 35
	Valid Range: See values; cannot be blank
SOURCE	Not applicable; COVERDELL-specific variable
DENOMINATOR POPULATION	The denominator includes all patients
VALUES AND DESCRIPTION	0 No 1 Yes

Item IN-1g: RACEAIAN	American Indian or Alaskan Native
	This variable indicates the patient identifies American Indian or Alaskan Native as a race (select all response options that apply)
FORMAT	**Type:** Numeric
	Item Length: 1
	Leading Zeros: No
	Beginning Position: 36
	Valid Range: See values; cannot be blank
SOURCE	Not applicable; COVERDELL-specific variable
DENOMINATOR POPULATION	The denominator includes all patients
VALUES AND DESCRIPTION	0 No 1 Yes

Item IN-1h: RACEUNK	**Unknown or unable to determine**
	This variable indicates the patient identifies Unknown or Unable to Determine as a race (select all response options that apply)
FORMAT	**Type:** Numeric
	Item Length: 1
	Leading Zeros: No
	Beginning Position: 37
	Valid Range: See values; cannot be blank
SOURCE	Not applicable; COVERDELL-specific variable
DENOMINATOR POPULATION	The denominator includes all patients
VALUES AND DESCRIPTION	0 No 1 Yes

Item IN-1i: HISP	**Hispanic or Latino Ethnicity**
	This variable indicates whether the participant is of Hispanic or Latino origin
FORMAT	**Type:** Numeric
	Item Length: 1
	Leading Zeros: No
	Beginning Position: 38
	Valid Range: See values; cannot be blank
SOURCE	Not applicable; COVERDELL-specific variable
DENOMINATOR POPULATION	The denominator includes all patients
VALUES AND DESCRIPTION	0 Not Hispanic or Latino, or unknown 1 Hispanic or Latino

Item IN-1j: HLTHINSM	Medicare/Medicare Advantage
	This variable indicates Medicare/Medicare Advantage as their health insurance
FORMAT	**Type:** Numeric
	Item Length: 1
	Leading Zeros: No
	Beginning Position: 39
	Valid Range: See values; cannot be blank
SOURCE	Not applicable; COVERDELL-specific variable
DENOMINATOR POPULATION	The denominator includes all patients
VALUES AND DESCRIPTION	0　No 1　Yes

Item IN-1k: HLTHINSC	**Medicaid**
	This variable indicates Medicaid as their health insurance
FORMAT	**Type:** Numeric
	Item Length: 1
	Leading Zeros: No
	Beginning Position: 40
	Valid Range: See values; cannot be blank
SOURCE	Not applicable; COVERDELL-specific variable
DENOMINATOR POPULATION	The denominator includes all patients
VALUES AND DESCRIPTION	0 No
	1 Yes

Item IN-1I: HLTHINSP	Private/VA/Champus/Other
	This variable indicates Private/VA/Champus/Other as their health insurance
FORMAT	**Type:** Numeric
	Item Length: 1
	Leading Zeros: No
	Beginning Position: 41
	Valid Range: See values; cannot be blank
SOURCE	Not applicable; COVERDELL-specific variable
DENOMINATOR POPULATION	The denominator includes all patients
VALUES AND DESCRIPTION	0 No 1 Yes

Item IN-1m: HLTHINSN	Self-Pay/No Insurance
	This variable indicates Self-Pay/No Insurance as their health insurance
FORMAT	**Type:** Numeric
	Item Length: 1
	Leading Zeros: No
	Beginning Position: 42
	Valid Range: See values; cannot be blank
SOURCE	Not applicable; COVERDELL-specific variable
DENOMINATOR POPULATION	The denominator includes all patients
VALUES AND DESCRIPTION	0 No
	1 Yes

Item IN-1n: HLTHINND	**Not Documented**
	This variable indicates Not Documented as their health insurance
FORMAT	**Type:** Numeric
	Item Length: 1
	Leading Zeros: No
	Beginning Position: 43
	Valid Range: See values; cannot be blank
SOURCE	Not applicable; COVERDELL-specific variable
DENOMINATOR POPULATION	The denominator includes all patients
VALUES AND DESCRIPTION	0 No 1 Yes

Pre-Hospital/Emergency Medical System (EMS) Data

Item IN-2a: PLCOCCUR	**Where was the patient when stroke was detected or when symptoms were discovered? In the case of a patient transferred to your hospital where they were an inpatient, ED patient, or NH/long-term care resident, from where was the patient transferred?** This variable indicates the location of the patient when the stroke was detected
FORMAT	**Type:** Numeric **Item Length:** 1 **Leading Zeros:** No **Beginning Position:** 44 **Valid Range:** See values; cannot be blank
SOURCE	Not applicable; COVERDELL-specific variable
DENOMINATOR POPULATION	The denominator includes all patients
VALUES AND DESCRIPTION	1 Not in a healthcare setting 2 Another acute care facility 3 Chronic health care facility 4 Stroke occurred while patient was an inpatient in your hospital 5 Outpatient healthcare setting 9 Not documented or cannot be determined

Item IN-2b: ARRMODE	How did the patient get to your hospital for treatment of their stroke?
	This variable indicates the means of transportation to get to the hospital for treatment of their stroke
FORMAT	**Type:** Numeric
	Item Length: 2
	Leading Zeros: Yes
	Beginning Position: 45
	Valid Range: See values; cannot be blank
SOURCE	Not applicable; COVERDELL-specific variable
DENOMINATOR POPULATION	The denominator includes all patients
VALUES AND DESCRIPTION	
	1　EMS from home or scene
	2　Private transportation/taxi/other
	3　Transfer from another hospital
	9　Not documented or unknown
	10　Mobile Stroke Unit

Item IN-2c: EMSNOTE	**Advance notification by EMS**
	This variable indicates whether there was an advance notification by EMS
FORMAT	**Type:** Numeric
	Item Length: 1
	Leading Zeros: No
	Beginning Position: 47
	Valid Range: See values; cannot be blank
SOURCE	Not applicable; COVERDELL-specific variable
DENOMINATOR POPULATION	The denominator includes all patients
VALUES AND DESCRIPTION	0 No/Not documented 1 Yes 9 Not applicable

Date and Time of Arrival at your Hospital

Item IN-3a: EDTRIAGD	**Date of arrival at your hospital**
	This variable indicates the date of arrival at the hospital
FORMAT	**Type:** Date
	Item Length: 8
	Leading Zeros: Yes
	Beginning Position: 48
	Valid Range: Valid date
SOURCE	Not applicable; COVERDELL-specific variable
DENOMINATOR POPULATION	The denominator includes all patients
VALUES AND DESCRIPTION	
	Valid date in MMDDYYYY format
	MM= Month (01-12), DD=Day (01-31) and YYYY = Year (20XX)

Item IN-3b: EDTRIAGT	**Time of arrival at your hospital** This variable indicates the time of arrival at the hospital
FORMAT	**Type:** Time **Item Length:** 4 **Leading Zeros:** Yes **Beginning Position:** 56 **Valid Range:** Valid time
SOURCE	Not applicable; COVERDELL-specific variable
DENOMINATOR POPULATION	The denominator includes all patients
VALUES AND DESCRIPTION	Valid time in HH:MM format Time must be recorded in military time. HH=Hour (00-23) and MM=Minutes (00-59)

Patient Not Admitted

Item IN-4a: NOTADMIT	Was the patient not admitted?
	This variable indicates whether the patient was not admitted to the hospital
FORMAT	**Type:** Numeric
	Item Length: 1
	Leading Zeros: No
	Beginning Position: 60
	Valid Range: See values; cannot be blank
SOURCE	Not applicable; COVERDELL-specific variable
DENOMINATOR POPULATION	The denominator includes all patients
VALUES AND DESCRIPTION	
	0 No, patient admitted as inpatient
	1 Not admitted

Comfort Measures

Item IN-5a: CMODOC	**When is the earliest time that the physician, advanced practice nurse, or PA documented that patient was on comfort measures only?**
	This variable indicates the earliest time the physician, advanced practice nurse, or PA documented that patient was on comfort measures only
FORMAT	**Type:** Numeric
	Item Length: 1
	Leading Zeros: No
	Beginning Position: 61
	Valid Range: See values; cannot be blank
SOURCE	Not applicable; COVERDELL-specific variable
DENOMINATOR POPULATION	The denominator includes all patients
VALUES AND DESCRIPTION	1 Day of arrival or first day after arrival
	2 2nd day after arrival or later
	3 Timing unclear
	4 Not documented/Unable to determine

Medications Currently Taking Prior to Admission

Item IN-6a: LIPADMYN	Statin or other cholesterol reducer medication
	This variable indicates whether a statin or other cholesterol reducer medication is currently being taken prior to admission
FORMAT	**Type:** Numeric
	Item Length: 1
	Leading Zeros: No
	Beginning Position: 62
	Valid Range: See values; cannot be blank
SOURCE	Not applicable; COVERDELL-specific variable
DENOMINATOR POPULATION	The denominator includes only patients that were admitted
VALUES AND DESCRIPTION	0　No/Not documented
	1　Yes

Documented Past Medical History

Item IN-7a: MEDHISDM	**Is there a history of Diabetes Mellitus (DM)?**
	This variable indicates whether the patient has a medical history of Diabetes Mellitus (DM)
FORMAT	**Type:** Numeric
	Item Length: 1
	Leading Zeros: No
	Beginning Position: 63
	Valid Range: See values; cannot be blank
SOURCE	Not applicable; COVERDELL-specific variable
DENOMINATOR POPULATION	The denominator includes only patients that were admitted
VALUES AND DESCRIPTION	0 No/Not documented 1 Yes

Item IN-7b: MEDHISST	**Is there a history of prior Stroke?**
	This variable indicates whether the patient has a medical history of prior Stroke
FORMAT	**Type:** Numeric
	Item Length: 1
	Leading Zeros: No
	Beginning Position: 64
	Valid Range: See values; cannot be blank
SOURCE	Not applicable; COVERDELL-specific variable
DENOMINATOR POPULATION	The denominator includes only patients that were admitted
VALUES AND DESCRIPTION	0 No/Not documented 1 Yes

Item IN-7c: MEDHISTI	Is there a history of TIA/Transient ischemic attack/VBI?
	This variable indicates whether the patient has a medical history of TIA/Transient ischemic attack/VBI
FORMAT	**Type:** Numeric
	Item Length: 1
	Leading Zeros: No
	Beginning Position: 65
	Valid Range: See values; cannot be blank
SOURCE	Not applicable; COVERDELL-specific variable
DENOMINATOR POPULATION	The denominator includes only patients that were admitted
VALUES AND DESCRIPTION	0 No/Not documented
	1 Yes

Item IN-7d: MEDHISCS	Is there a history of carotid stenosis?
	This variable indicates whether the patient has a medical history of carotid stenosis
FORMAT	**Type:** Numeric
	Item Length: 1
	Leading Zeros: No
	Beginning Position: 66
	Valid Range: See values; cannot be blank
SOURCE	Not applicable; COVERDELL-specific variable
DENOMINATOR POPULATION	The denominator includes only patients that were admitted
VALUES AND DESCRIPTION	0 No/Not documented
	1 Yes

Item IN-7e: MEDHISMI	Is there a history of myocardial infarction (MI) or coronary artery disease (CAD)?
	This variable indicates whether the patient has a medical history of myocardial infarction (MI) or coronary artery disease (CAD)
FORMAT	**Type:** Numeric
	Item Length: 1
	Leading Zeros: No
	Beginning Position: 67
	Valid Range: See values; cannot be blank
SOURCE	Not applicable; COVERDELL-specific variable
DENOMINATOR POPULATION	The denominator includes only patients that were admitted
VALUES AND DESCRIPTION	0 No/Not documented
	1 Yes

Item IN-7f: MEDHISPA	Is there a history of peripheral arterial disease (PAD)?
	This variable indicates whether the patient has a medical history of peripheral arterial disease (PAD)
FORMAT	**Type:** Numeric
	Item Length: 1
	Leading Zeros: No
	Beginning Position: 68
	Valid Range: See values; cannot be blank
SOURCE	Not applicable; COVERDELL-specific variable
DENOMINATOR POPULATION	The denominator includes only patients that were admitted
VALUES AND DESCRIPTION	0 No/Not documented 1 Yes

Item IN-7g: MEDHISVP	Does the patient have a valve prosthesis (heart valve)?
	This variable indicates whether the patient has a valve prosthesis (heart valve)
FORMAT	**Type:** Numeric
	Item Length: 1
	Leading Zeros: No
	Beginning Position: 69
	Valid Range: See values; cannot be blank
SOURCE	Not applicable; COVERDELL-specific variable
DENOMINATOR POPULATION	The denominator includes only patients that were admitted
VALUES AND DESCRIPTION	0 No/Not documented
	1 Yes

Item IN-7h: MEDHISHF	**Is there a history of Heart Failure (CHF)?**
	This variable indicates whether the patient has a medical history of Heart Failure (CHF)
FORMAT	**Type:** Numeric
	Item Length: 1
	Leading Zeros: No
	Beginning Position: 70
	Valid Range: See values; cannot be blank
SOURCE	Not applicable; COVERDELL-specific variable
DENOMINATOR POPULATION	The denominator includes only patients that were admitted
VALUES AND DESCRIPTION	
	0 No/Not documented
	1 Yes

Item IN-7i: MEDHISSS	**Does the patient have a history of sickle cell disease (sickle cell anemia)?**
	This variable indicates whether the patient has a medical history of sickle cell disease (sickle cell anemia)
FORMAT	**Type:** Numeric
	Item Length: 1
	Leading Zeros: No
	Beginning Position: 71
	Valid Range: See values; cannot be blank
SOURCE	Not applicable; COVERDELL-specific variable
DENOMINATOR POPULATION	The denominator includes only patients that were admitted
VALUES AND DESCRIPTION	
	0 No/Not documented
	1 Yes

Item IN-7j: MEDHISPG	**Did this event occur during pregnancy or within 6 weeks after a delivery or termination of pregnancy?**
	This variable indicates whether this event occurred during pregnancy or within 6 weeks after a delivery or termination of pregnancy
FORMAT	**Type:** Numeric
	Item Length: 1
	Leading Zeros: No
	Beginning Position: 72
	Valid Range: See values; cannot be blank
SOURCE	Not applicable; COVERDELL-specific variable
DENOMINATOR POPULATION	The denominator includes only patients that were admitted
VALUES AND DESCRIPTION	0 No/Not documented 1 Yes

Item IN-7k: MEDHISAF	**Is there documentation in the patient's medical history of atrial fibrillation/flutter?**
	This variable indicates whether the patient has a medical history of atrial fibrillation/flutter
FORMAT	**Type:** Numeric
	Item Length: 1
	Leading Zeros: No
	Beginning Position: 73
	Valid Range: See values; cannot be blank
SOURCE	Not applicable; COVERDELL-specific variable
DENOMINATOR POPULATION	The denominator includes only patients that were admitted
VALUES AND DESCRIPTION	0 No/Not documented
	1 Yes

Item IN-7I: MEDHISSM	Is there documented past medical history of Smoking (at least one cigarette during the year prior to hospital arrival)?
	This variable indicates whether the patient has a history of smoking within the past year
FORMAT	**Type:** Numeric
	Item Length: 1
	Leading Zeros: No
	Beginning Position: 74
	Valid Range: See values; cannot be blank
SOURCE	Not applicable; COVERDELL-specific variable
DENOMINATOR POPULATION	The denominator includes only patients that were admitted
VALUES AND DESCRIPTION	0 No/Not documented
	1 Yes

Item IN-7m: MEDHISEC	Is there history of E-Cigarette Use (Vaping)? (Use of electronic nicotine delivery system or electronic cigarettes (e-cigarettes))
	This variable indicates whether the patient has medical history of e-Cigarette Use (Vaping) (Use of electronic nicotine delivery system or electronic cigarettes (e-cigarettes))
FORMAT	**Type:** Numeric
	Item Length: 1
	Leading Zeros: No
	Beginning Position: 75
	Valid Range: See values; cannot be blank
SOURCE	Not applicable; COVERDELL-specific variable
DENOMINATOR POPULATION	The denominator includes only patients that were admitted
VALUES AND DESCRIPTION	0 No/Not documented

1 Yes |

Item IN-7n: MEDHISDL	Is there a medical history of Dyslipidemia?
	This variable indicates whether the patient has a medical history of Dyslipidemia
FORMAT	**Type:** Numeric
	Item Length: 1
	Leading Zeros: No
	Beginning Position: 76
	Valid Range: See values; cannot be blank
SOURCE	Not applicable; COVERDELL-specific variable
DENOMINATOR POPULATION	The denominator includes only patients that were admitted
VALUES AND DESCRIPTION	
	0 No/Not documented
	1 Yes

Item IN-7o: MEDHISHT	Is there a documented past medical history of hypertension?
	This variable indicates whether the patient has a medical history of hypertension
FORMAT	**Type:** Numeric
	Item Length: 1
	Leading Zeros: No
	Beginning Position: 77
	Valid Range: See values; cannot be blank
SOURCE	Not applicable; COVERDELL-specific variable
DENOMINATOR POPULATION	The denominator includes only patients that were admitted
VALUES AND DESCRIPTION	
	0 No/Not documented
	1 Yes

Item IN-7p: MEDHISDT	Is there a history of dementia?
	This variable indicates whether the patient has a medical history of dementia
FORMAT	**Type:** Numeric
	Item Length: 1
	Leading Zeros: No
	Beginning Position: 78
	Valid Range: See values; cannot be blank
SOURCE	Not applicable; COVERDELL-specific variable
DENOMINATOR POPULATION	The denominator includes only patients that were admitted
VALUES AND DESCRIPTION	
	0 No/Not documented
	1 Yes

Item IN-7q: MH_EID	**Is there a history of Emerging Infectious Disease?**
	This variable indicates whether the patient has a medical history of Emerging Infectious Disease
FORMAT	**Type:** Numeric
	Item Length: 1
	Leading Zeros: No
	Beginning Position: 79
	Valid Range: See values; cannot be blank
SOURCE	Not applicable; COVERDELL-specific variable
DENOMINATOR POPULATION	The denominator includes only patients that were admitted
VALUES AND DESCRIPTION	0 No/Not documented 1 Yes

Item IN-7r: MH_COV1	Is there a history of SARS-COV-1?
	This variable indicates whether the patient has a medical history of SARS-COV-1
FORMAT	**Type:** Numeric
	Item Length: 1
	Leading Zeros: No
	Beginning Position: 80
	Valid Range: See values; cannot be blank
SOURCE	Not applicable; COVERDELL-specific variable
DENOMINATOR POPULATION	The denominator includes only patients that were admitted
VALUES AND DESCRIPTION	
	0 No/Not documented
	1 Yes

Item IN-7s: MH_COV2	**Is there a history of SARS-COV-2 (COVID-19)?**
	This variable indicates whether the patient has a medical history of SARS-COV-2 (COVID-19)
FORMAT	**Type:** Numeric
	Item Length: 1
	Leading Zeros: No
	Beginning Position: 81
	Valid Range: See values; cannot be blank
SOURCE	Not applicable; COVERDELL-specific variable
DENOMINATOR POPULATION	The denominator includes only patients that were admitted
VALUES AND DESCRIPTION	0 No/Not documented 1 Yes

Item IN-7t: MH_MERS	Is there a history of MERS?
	This variable indicates whether the patient has a medical history of MERS
FORMAT	**Type:** Numeric
	Item Length: 1
	Leading Zeros: No
	Beginning Position: 82
	Valid Range: See values; cannot be blank
SOURCE	Not applicable; COVERDELL-specific variable
DENOMINATOR POPULATION	The denominator includes only patients that were admitted
VALUES AND DESCRIPTION	0 No/Not documented 1 Yes

Item IN-7u: MH_OTH	**Is there a history of other infectious respiratory pathogen?**
	This variable indicates whether the patient has a medical history of other infectious respiratory pathogen
FORMAT	**Type:** Numeric
	Item Length: 1
	Leading Zeros: No
	Beginning Position: 83
	Valid Range: See values; cannot be blank
SOURCE	Not applicable; COVERDELL-specific variable
DENOMINATOR POPULATION	The denominator includes only patients that were admitted
VALUES AND DESCRIPTION	
	0 No/Not documented
	1 Yes

Hospital Admission Data

Item IN-8a: HOSPADD	Date of hospital admission
	This variable indicates the date of hospital admission
FORMAT	**Type:** Date
	Item Length: 8
	Leading Zeros: Yes
	Beginning Position: 84
	Valid Range: Valid date
SOURCE	Not applicable; COVERDELL-specific variable
DENOMINATOR POPULATION	The denominator includes only patients that were admitted
VALUES AND DESCRIPTION	Valid date in MMDDYYYY format
	MM= Month (01-12), DD=Day (01-31) and YYYY = Year (20XX)

Item IN-8b: AMBSTATA	Was patient ambulatory prior to the current stroke/TIA?
	This variable indicates whether the patient was ambulatory prior to the current stroke/TIA
FORMAT	**Type:** Numeric
	Item Length: 1
	Leading Zeros: No
	Beginning Position: 92
	Valid Range: See values; cannot be blank
SOURCE	Not applicable; COVERDELL-specific variable
DENOMINATOR POPULATION	The denominator includes only patients that were admitted
VALUES AND DESCRIPTION	
	1 Able to ambulate independently with or without device
	2 Yes, but with assistance from another person
	3 Unable to ambulate
	9 Not documented

Item IN-8c: SXRESOLV	**Did symptoms completely resolve prior to presentation?**
	This variable indicates whether the symptoms completely resolve prior to presentation
FORMAT	**Type:** Numeric
	Item Length: 1
	Leading Zeros: No
	Beginning Position: 93
	Valid Range: See values; cannot be blank
SOURCE	Not applicable; COVERDELL-specific variable
DENOMINATOR POPULATION	The denominator includes only patients that were admitted
VALUES AND DESCRIPTION	0 No
	1 Yes
	9 Not documented

Telestroke

Item IN-9a: TELEYN	**Was telestroke consultation performed?**
	This variable indicates whether a telestroke consultation was performed
FORMAT	**Type:** Numeric
	Item Length: 1
	Leading Zeros: No
	Beginning Position: 94
	Valid Range: See values; cannot be blank
SOURCE	Not applicable; COVERDELL-specific variable
DENOMINATOR POPULATION	The denominator includes only patients that were admitted
VALUES AND DESCRIPTION	
	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 Not documented

Imaging

Item IN-10a: IMAGEYN	Was brain imaging performed at your hospital after arrival as part of the initial evaluation for this episode of care or this event?
	This variable indicates whether a brain imaging was performed at the hospital after arrival as part of the initial evaluation for this episode of care or this event
FORMAT	**Type:** Numeric
	Item Length: 1
	Leading Zeros: No
	Beginning Position: 95
	Valid Range: See values; cannot be blank
SOURCE	Not applicable; COVERDELL-specific variable
DENOMINATOR POPULATION	The denominator includes all patients
VALUES AND DESCRIPTION	0 No/Not documented 1 Yes 9 Not collected

Item IN-10b: IMAGEYCT	If brain imaging performed, was it a CT scan?
	This variable indicates whether the brain imaging performed was a CT scan
FORMAT	**Type:** Numeric
	Item Length: 1
	Leading Zeros: No
	Beginning Position: 96
	Valid Range: See values; cannot be blank
SOURCE	Not applicable; COVERDELL-specific variable
DENOMINATOR POPULATION	The denominator includes patients with a brain imaging performed at the hospital after arrival as part of the initial evaluation for this episode of care
VALUES AND DESCRIPTION	0 No/Not documented
	1 Yes

Item IN-10c: IMAGEYMR	If brain imaging performed, was it an MRI?
	This variable indicates whether the brain imaging performed was an MRI
FORMAT	**Type:** Numeric
	Item Length: 1
	Leading Zeros: No
	Beginning Position: 97
	Valid Range: See values; cannot be blank
SOURCE	Not applicable; COVERDELL-specific variable
DENOMINATOR POPULATION	The denominator includes patients with a brain imaging performed at the hospital after arrival as part of the initial evaluation for this episode of care
VALUES AND DESCRIPTION	0 No/Not documented 1 Yes

Item IN-10d: IMAGED	**Date brain imaging first initiated at your hospital**
	This variable indicates the date brain imaging first initiated at the hospital
FORMAT	**Type:** Date
	Item Length: 8
	Leading Zeros: Yes
	Beginning Position: 98
	Valid Range: Valid date
SOURCE	Not applicable; COVERDELL-specific variable
DENOMINATOR POPULATION	The denominator includes patients with a brain imaging performed at the hospital after arrival as part of the initial evaluation for this episode of care
VALUES AND DESCRIPTION	Valid date in MMDDYYYY format
	MM= Month (01-12), DD=Day (01-31) and YYYY = Year (20XX)

Item IN-10e: IMAGET	**Time brain imaging first initiated at your hospital**
	This variable indicates the time brain imaging first initiated at the hospital
FORMAT	**Type:** Time
	Item Length: 4
	Leading Zeros: Yes
	Beginning Position: 106
	Valid Range: Valid time
SOURCE	Not applicable; COVERDELL-specific variable
DENOMINATOR POPULATION	The denominator includes patients with a brain imaging performed at the hospital after arrival as part of the initial evaluation for this episode of care
VALUES AND DESCRIPTION	
	Valid time in HH:MM format
	Time must be recorded in military time. HH=Hour (00-23) and MM=Minutes (00-59)

Item IN-10f: IMAGERES	What were the initial brain imaging findings?
	This variable indicates the initial brain imaging findings
FORMAT	**Type:** Numeric
	Item Length: 1
	Leading Zeros: No
	Beginning Position: 110
	Valid Range: See values; cannot be blank
SOURCE	Not applicable; COVERDELL-specific variable
DENOMINATOR POPULATION	The denominator includes patients with a brain imaging performed at the hospital after arrival as part of the initial evaluation for this episode of care
VALUES AND DESCRIPTION	0 No acute hemorrhage 1 Acute hemorrhage 9 Not documented or not available

Item IN-11a: IMAGEVAS	Was acute vascular or perfusion imaging (e.g., CTA, MRA, DSA) performed at your hospital?
	This variable indicates whether acute vascular or perfusion imaging (e.g., CTA, MRA, DSA) was performed at the hospital
FORMAT	**Type:** Numeric
	Item Length: 1
	Leading Zeros: No
	Beginning Position: 111
	Valid Range: See values; cannot be blank
SOURCE	Not applicable; COVERDELL-specific variable
DENOMINATOR POPULATION	The denominator includes all patients
VALUES AND DESCRIPTION	0 No/Not documented 1 Yes

Date and Time the Patient was Last Known to be Well Prior to the Beginning of the Current Stroke or Stroke-like Symptoms

Item IN-12a: LKWD	**What date was the patient last known to be well, i.e., in their usual state of health or at their baseline, prior to the beginning of the current stroke or stroke-like symptoms? (recording within 15 minutes of exact time is acceptable)**
	This variable indicates the date the patient was last known to be well
FORMAT	**Type:** Date
	Item Length: 8
	Leading Zeros: Yes
	Beginning Position: 112
	Valid Range: Valid date
SOURCE	Not applicable; COVERDELL-specific variable
DENOMINATOR POPULATION	The denominator includes all patients
VALUES AND DESCRIPTION	
	Valid date in MMDDYYYY format
	MM= Month (01-12), DD=Day (01-31) and YYYY = Year (20XX)

Item IN-12b: LKWT	What time was the patient last known to be well, i.e., in their usual state of health or at their baseline, prior to the beginning of the current stroke or stroke-like symptoms? (recording within 15 minutes of exact time is acceptable)
	This variable indicates the time the patient was last known to be well
FORMAT	**Type:** Time
	Item Length: 4
	Leading Zeros: Yes
	Beginning Position: 120
	Valid Range: Valid time
SOURCE	Not applicable; COVERDELL-specific variable
DENOMINATOR POPULATION	The denominator includes all patients
VALUES AND DESCRIPTION	
	Valid time in HH:MM format
	Time must be recorded in military time. HH=Hour (00-23) and MM=Minutes (00-59)

Date and Time the Patient First Discovered to Have the Current Stroke or Stroke-like Symptoms

Item IN-13a: DISCD	**What date was the patient first discovered to have the current stroke or stroke-like symptoms? (recording within 15 minutes of exact time of discovery is acceptable)**
	This variable indicates the date the patient first discovered to have the current stroke or stroke-like symptoms
FORMAT	**Type:** Date
	Item Length: 8
	Leading Zeros: Yes
	Beginning Position: 124
	Valid Range: Valid date
SOURCE	Not applicable; COVERDELL-specific variable
DENOMINATOR POPULATION	The denominator includes all patients
VALUES AND DESCRIPTION	
	Valid date in MMDDYYYY format
	MM= Month (01-12), DD=Day (01-31) and YYYY = Year (20XX)

Item IN-13b: DISCT	**What time was the patient first discovered to have the current stroke or stroke-like symptoms? (recording within 15 minutes of exact time of discovery is acceptable)**
	This variable indicates the time the patient first discovered to have the current stroke or stroke-like symptoms
FORMAT	**Type:** Time
	Item Length: 4
	Leading Zeros: Yes
	Beginning Position: 132
	Valid Range: Valid time
SOURCE	Not applicable; COVERDELL-specific variable
DENOMINATOR POPULATION	The denominator includes all patients
VALUES AND DESCRIPTION	Valid time in HH:MM format
	Time must be recorded in military time. HH=Hour (00-23) and MM=Minutes (00-59)

NIH Stroke Scale Score

Item IN-14a: NIHSSYN	**Was NIH Stroke Scale score performed as part of the initial evaluation of the patient?**
	This variable indicates whether a NIH Stroke Scale score was performed as part of the initial evaluation of the patient
FORMAT	**Type:** Numeric
	Item Length: 1
	Leading Zeros: No
	Beginning Position: 136
	Valid Range: See values; cannot be blank
SOURCE	Not applicable; COVERDELL-specific variable
DENOMINATOR POPULATION	The denominator includes all patients
VALUES AND DESCRIPTION	0 No
	1 Yes

Item IN-14b: NIHSTRKS	If performed, what is the first NIH Stroke Scale total score recorded by hospital personnel?
	This variable indicates the first NIH Stroke Scale total score recorded by hospital personnel
FORMAT	**Type:** Numeric
	Item Length: 2
	Leading Zeros: Yes
	Beginning Position: 137
	Valid Range: 00-42; cannot be blank
SOURCE	Not applicable; COVERDELL-specific variable
DENOMINATOR POPULATION	The denominator includes patients with a NIH Stroke Scale performed as part of the initial evaluation of the patient
VALUES AND DESCRIPTION	Valid NIH Stroke Scale Score

Stroke Treatment

Item IN-15a: TRMIVM	Was IV thrombolytic initiated for this patient at this hospital?
	This variable indicates whether the IV thrombolytic therapy was initiated for this patient at this hospital
FORMAT	**Type:** Numeric
	Item Length: 1
	Leading Zeros: No
	Beginning Position: 139
	Valid Range: See values; cannot be blank
SOURCE	Not applicable; COVERDELL-specific variable
DENOMINATOR POPULATION	The denominator includes all patients
VALUES AND DESCRIPTION	
	0 No
	1 Yes

Item IN-15b: TRMIVMD	What date was IV thrombolytic initiated for this patient at this hospital?
	This variable indicates the date the IV thrombolytic therapy was initiated for this patient at this hospital
FORMAT	**Type:** Date
	Item Length: 8
	Leading Zeros: Yes
	Beginning Position: 140
	Valid Range: Valid date
SOURCE	Not applicable; COVERDELL-specific variable
DENOMINATOR POPULATION	The denominator includes patients with IV thrombolytic therapy initiated at this hospital
VALUES AND DESCRIPTION	
	Valid date in MMDDYYYY format
	MM= Month (01-12), DD=Day (01-31) and YYYY = Year (20XX)

Item IN-15c: TRMIVMT	What time was IV thrombolytic initiated for this patient at this hospital?
	This variable indicates the time the IV thrombolytic therapy was initiated for this patient at this hospital
FORMAT	**Type:** Time
	Item Length: 4
	Leading Zeros: Yes
	Beginning Position: 148
	Valid Range: Valid time
SOURCE	Not applicable; COVERDELL-specific variable
DENOMINATOR POPULATION	The denominator includes patients with IV thrombolytic therapy initiated at this hospital
VALUES AND DESCRIPTION	
	Valid time in HH:MM format
	Time must be recorded in military time. HH=Hour (00-23) and MM=Minutes (00-59)

Item IN-15d: TRMALT	**Thrombolytic used: Alteplase (Class 1 evidence)**
	This variable indicates whether the thrombolytic Alteplase (Class 1 evidence) therapy was initiated for this patient at this hospital
FORMAT	**Type:** Numeric
	Item Length: 1
	Leading Zeros: No
	Beginning Position: 152
	Valid Range: See values; cannot be blank
SOURCE	Not applicable; COVERDELL-specific variable
DENOMINATOR POPULATION	The denominator includes patients with IV thrombolytic therapy initiated at this hospital
VALUES AND DESCRIPTION	0 No 1 Yes

Item IN-15e: TRMALDS	**Alteplase, total dose (mg)**
	This variable indicates the total Alteplase dose in milligrams (mg)
FORMAT	**Type:** Numeric
	Item Length: 4
	Leading Zeros: No
	Beginning Position: 153
	Valid Range: Valid dosage
SOURCE	Not applicable; COVERDELL-specific variable
DENOMINATOR POPULATION	The denominator includes patients with thrombolytic alteplase (Class 1 evidence) initiated at this hospital
VALUES AND DESCRIPTION	--.- (up to 1 decimal place)

Item IN-15f: TRMTNK	**Thrombolytic used: Tenecteplase (Class 2b evidence)**
	This variable indicates whether the thrombolytic Tenecteplase (Class 2b evidence) therapy was initiated for this patient at this hospital
FORMAT	**Type:** Numeric
	Item Length: 1
	Leading Zeros: No
	Beginning Position: 157
	Valid Range: See values; cannot be blank
SOURCE	Not applicable; COVERDELL-specific variable
DENOMINATOR POPULATION	The denominator includes patients with IV thrombolytic therapy initiated at this hospital
VALUES AND DESCRIPTION	0 No 1 Yes

Item IN-15g: TRMTNDS	**Tenecteplase, total dose (mg)**
	This variable indicates the total Tenecteplase dose in milligrams (mg)
FORMAT	**Type:** Numeric
	Item Length: 4
	Leading Zeros: No
	Beginning Position: 158
	Valid Range: Valid dosage
SOURCE	Not applicable; COVERDELL-specific variable
DENOMINATOR POPULATION	The denominator includes patients with thrombolytic tenecteplase (Class 2b evidence) initiated at this hospital
VALUES AND DESCRIPTION	--.- (up to 1 decimal place)

Item IN-15h: TRMTNRSN	**Reason for selecting tenecteplase instead of alteplase** This variable indicates the reason for selecting tenecteplase instead of alteplase
FORMAT	**Type:** Numeric **Item Length:** 1 **Leading Zeros:** No **Beginning Position:** 162 **Valid Range:** See values; cannot be blank
SOURCE	Not applicable; COVERDELL-specific variable
DENOMINATOR POPULATION	The denominator includes patients with thrombolytic tenecteplase (Class 2b evidence) initiated at this hospital
VALUES AND DESCRIPTION	1 Large Vessel Occlusion (LVO) with potential thrombectomy 2 Mild stroke 3 Other

Item IN-15i: TRMEXTND	**If IV thrombolytic administered beyond 4.5-hour, was imaging used to identify eligibility?**
	This variable indicates whether imaging was used to identify eligibility for patients to whom IV thrombolytic was administered beyond 4.5-hour
FORMAT	**Type:** Numeric
	Item Length: 1
	Leading Zeros: No
	Beginning Position: 163
	Valid Range: See values; cannot be blank
SOURCE	Not applicable; COVERDELL-specific variable
DENOMINATOR POPULATION	The denominator includes patients with IV thrombolytic therapy initiated at this hospital beyond 4.5 hours
VALUES AND DESCRIPTION	1 Yes, Diffusion-FLAIR mismatch
	2 Yes, Core-Perfusion mismatch
	3 None
	4 Other

Item IN-15j: TRMIVT	IV thrombolytic at an outside hospital or EMS / mobile stroke unit?
	This variable indicates whether IV thrombolytic was initiated at an outside hospital or EMS/mobile stroke unit
FORMAT	**Type:** Numeric
	Item Length: 1
	Leading Zeros: No
	Beginning Position: 164
	Valid Range: See values; cannot be blank
SOURCE	Not applicable; COVERDELL-specific variable
DENOMINATOR POPULATION	The denominator includes patients with IV thrombolytic therapy initiated at this hospital
VALUES AND DESCRIPTION	0 No 1 Yes

Item IN-15k: TRMIVTAT	If yes, select thrombolytic administered at outside hospital or Mobile Stroke Unit
	This variable indicates the thrombolytic treatment administered to patients to whom the treatment was administered outside the hospital or Mobile Stroke Unit
FORMAT	**Type:** Numeric
	Item Length: 1
	Leading Zeros: No
	Beginning Position: 165
	Valid Range: See values; cannot be blank
SOURCE	Not applicable; COVERDELL-specific variable
DENOMINATOR POPULATION	The denominator includes patients with IV thrombolytic therapy initiated at outside hospital or Mobile Stroke Unit
VALUES AND DESCRIPTION	1 Alteplase 2 Tenecteplase

Item IN-15I: CATHTX	Was catheter-based treatment administered at this hospital?
	This variable indicates whether a catheter-based treatment was administered at this hospital
FORMAT	**Type:** Numeric
	Item Length: 1
	Leading Zeros: No
	Beginning Position: 166
	Valid Range: See values; cannot be blank
SOURCE	Not applicable; COVERDELL-specific variable
DENOMINATOR POPULATION	The denominator includes all patients
VALUES AND DESCRIPTION	0 No 1 Yes

Item IN-15m: CATHTXD	**Date of IA alteplase or MER initiation at this hospital**
	This variable indicates the date of IA alteplase or MER initiation at this hospital
FORMAT	**Type:** Date
	Item Length: 8
	Leading Zeros: Yes
	Beginning Position: 167
	Valid Range: Valid date
SOURCE	Not applicable; COVERDELL-specific variable
DENOMINATOR POPULATION	The denominator includes patients with catheter-based treatment administered at the hospital
VALUES AND DESCRIPTION	Valid date in MMDDYYYY format
	MM= Month (01-12), DD=Day (01-31) and YYYY = Year (20XX)

Item IN-15n: CATHTXT	**Time of IA alteplase or MER initiation at this hospital**
	This variable indicates the time of IA alteplase or MER initiation at this hospital
FORMAT	**Type:** Time
	Item Length: 4
	Leading Zeros: Yes
	Beginning Position: 175
	Valid Range: Valid time
SOURCE	Not applicable; COVERDELL-specific variable
DENOMINATOR POPULATION	The denominator includes patients with catheter-based treatment administered at the hospital
VALUES AND DESCRIPTION	Valid time in HH:MM format
	Time must be recorded in military time. HH=Hour (00-23) and MM=Minutes (00-59)

Item IN-16a: THRMCMP	Complication of reperfusion therapy (Thrombolytic or MER)
	This variable indicates the complications of reperfusion therapy (Thrombolytic or MER)
FORMAT	**Type:** Numeric
	Item Length: 1
	Leading Zeros: No
	Beginning Position: 179
	Valid Range: See values; cannot be blank
SOURCE	Not applicable; COVERDELL-specific variable
DENOMINATOR POPULATION	The denominator includes patients with thrombolytic or MER therapy initiated at this hospital
VALUES AND DESCRIPTION	0 None 1 Symptomatic ICH within 36 hours (< 36 hours) of tPA 2 Life threatening, serious systemic hemorrhage within 36 hours of tPA 3 Other serious complications 9 Unknown/Unable to Determine

Item IN-16b: THRMCMPT	Were there bleeding complications in a patient transferred after IV tPA (alteplase)?
	This variable indicates whether there were bleeding complications in a patient transferred after IV tPA (alteplase)
FORMAT	**Type:** Numeric
	Item Length: 1
	Leading Zeros: No
	Beginning Position: 180
	Valid Range: See values; cannot be blank
SOURCE	Not applicable; COVERDELL-specific variable
DENOMINATOR POPULATION	The denominator includes patients with IV tPA (alteplase) initiated at this hospital
VALUES AND DESCRIPTION	
	1 Yes and detected prior to transfer
	2 Yes but detected after transfer
	3 Unable to determine
	9 Not applicable

Item IN-17a: TPANC	**Documented exclusions or relative exclusions (contraindications or warnings) were recorded for not initiating IV thrombolytic in the 0-3 hour treatment window**
	This variable indicates whether exclusions or relative exclusions (contraindications or warnings) were documented for not initiating IV thrombolytic in the 0-3 hour treatment window
FORMAT	**Type:** Numeric
	Item Length: 1
	Leading Zeros: No
	Beginning Position: 181
	Valid Range: See values; cannot be blank
SOURCE	Not applicable; COVERDELL-specific variable
DENOMINATOR POPULATION	The denominator includes all patients
VALUES AND DESCRIPTION	0 No 1 Yes

Item IN-18a: TPA4NC	Documented exclusions or relative exclusions (contraindications or warnings) were recorded for not initiating IV thrombolytic in the 3-4.5 hour treatment window
	This variable indicates whether exclusions or relative exclusions (contraindications or warnings) were documented for not initiating IV thrombolytic in the 3-4.5 hour treatment window
FORMAT	**Type:** Numeric
	Item Length: 1
	Leading Zeros: No
	Beginning Position: 182
	Valid Range: See values; cannot be blank
SOURCE	Not applicable; COVERDELL-specific variable
DENOMINATOR POPULATION	The denominator includes all patients
VALUES AND DESCRIPTION	0 No 1 Yes

Item IN-19a: TPADELAY	If IV thrombolytic was initiated greater than 60 minutes after hospital arrival, were eligibility or medical reasons documented as the cause for delay?
	This variable indicates whether there were eligibility or medical reasons documented as the cause for delay for patients to whom IV thrombolytic was initiated greater than 60 minutes after hospital arrival
FORMAT	**Type:** Numeric
	Item Length: 1
	Leading Zeros: No
	Beginning Position: 183
	Valid Range: See values; cannot be blank
SOURCE	Not applicable; COVERDELL-specific variable
DENOMINATOR POPULATION	The denominator includes patients to whom IV thrombolytic was initiated greater than 60 minutes after hospital arrival
VALUES AND DESCRIPTION	0 No 1 Yes

Item IN-19b: TPADEL45	**If IV thrombolytic was initiated greater than 45 minutes after hospital arrival, were eligibility or medical response documented as the cause for delay?** This variable indicates whether there were eligibility or medical response documented as the cause for delay for patients to whom IV thrombolytic was initiated greater than 45 minutes after hospital arrival
FORMAT	**Type:** Numeric **Item Length:** 1 **Leading Zeros:** No **Beginning Position:** 184 **Valid Range:** See values; cannot be blank
SOURCE	Not applicable; COVERDELL-specific variable
DENOMINATOR POPULATION	The denominator includes patients to whom IV thrombolytic was initiated greater than 45 minutes after hospital arrival
VALUES AND DESCRIPTION	0 No 1 Yes

Item IN-19c: DELAYRSN	**Eligibility or Medical reason(s) were documented as the cause for delay in thrombolytic administration: Need for additional PPE for suspected/ confirmed infectious disease** This variable indicates whether the eligibility or medical reason(s) were documented as the cause for delay in thrombolytic administration.
FORMAT	**Type:** Numeric **Item Length:** 1 **Leading Zeros:** No **Beginning Position:** 185 **Valid Range:** See values; cannot be blank
SOURCE	Not applicable; COVERDELL-specific variable
DENOMINATOR POPULATION	The denominator includes patients to whom thrombolytic therapy was delayed
VALUES AND DESCRIPTION	0 No 1 Yes

Item IN-20a: ATHR2DAY	Was antithrombotic therapy received by the end of hospital day 2?
	This variable indicates whether antithrombotic therapy was received by the end of hospital day 2
FORMAT	**Type:** Numeric
	Item Length: 1
	Leading Zeros: No
	Beginning Position: 186
	Valid Range: See values; cannot be blank
SOURCE	Not applicable; COVERDELL-specific variable
DENOMINATOR POPULATION	The denominator includes all patients
VALUES AND DESCRIPTION	
	0 No
	1 Yes
	2 Not collected

Item IN-21a: VTELDUH	VTE Prophylaxis. Low dose unfractionated heparin (LDUH)
	This variable indicates low dose unfractionated heparin (LDUH) as the type of VTE Prophylaxis
FORMAT	**Type:** Numeric
	Item Length: 1
	Leading Zeros: No
	Beginning Position: 187
	Valid Range: See values; cannot be blank
SOURCE	Not applicable; COVERDELL-specific variable
DENOMINATOR POPULATION	The denominator includes all patients
VALUES AND DESCRIPTION	0 No 1 Yes

Item IN-21b: VTELMWH	VTE Prophylaxis. Low molecular weight heparin (LMWH)
	This variable indicates low molecular weight heparin (LMWH) as the type of VTE Prophylaxis
FORMAT	**Type:** Numeric
	Item Length: 1
	Leading Zeros: No
	Beginning Position: 188
	Valid Range: See values; cannot be blank
SOURCE	Not applicable; COVERDELL-specific variable
DENOMINATOR POPULATION	The denominator includes all patients
VALUES AND DESCRIPTION	0 No 1 Yes

Item IN-21c: VTEIPC	VTE Prophylaxis. Intermittent pneumatic compression devices
	This variable indicates intermittent pneumatic compression devices as the type of VTE Prophylaxis
FORMAT	**Type:** Numeric
	Item Length: 1
	Leading Zeros: No
	Beginning Position: 189
	Valid Range: See values; cannot be blank
SOURCE	Not applicable; COVERDELL-specific variable
DENOMINATOR POPULATION	The denominator includes all patients
VALUES AND DESCRIPTION	0 No 1 Yes

Item IN-21d: VTEGCS	**VTE Prophylaxis. Graduated compression stockings (GCS)**
	This variable indicates graduated compression stockings (GCS) as the type of VTE Prophylaxis
FORMAT	**Type:** Numeric
	Item Length: 1
	Leading Zeros: No
	Beginning Position: 190
	Valid Range: See values; cannot be blank
SOURCE	Not applicable; COVERDELL-specific variable
DENOMINATOR POPULATION	The denominator includes all patients
VALUES AND DESCRIPTION	
	0 No
	1 Yes

Item IN-21e: VTEXAI	VTE Prophylaxis. Factor Xa Inhibitor
	This variable indicates factor Xa Inhibitor as the type of VTE Prophylaxis
FORMAT	**Type:** Numeric
	Item Length: 1
	Leading Zeros: No
	Beginning Position: 191
	Valid Range: See values; cannot be blank
SOURCE	Not applicable; COVERDELL-specific variable
DENOMINATOR POPULATION	The denominator includes all patients
VALUES AND DESCRIPTION	0 No
	1 Yes

Item IN-21f: VTEWAR	VTE Prophylaxis. Warfarin
	This variable indicates Warfarin as the type of VTE Prophylaxis
FORMAT	**Type:** Numeric
	Item Length: 1
	Leading Zeros: No
	Beginning Position: 192
	Valid Range: See values; cannot be blank
SOURCE	Not applicable; COVERDELL-specific variable
DENOMINATOR POPULATION	The denominator includes all patients
VALUES AND DESCRIPTION	0 No 1 Yes

Item IN-21g: VTEVFP	VTE Prophylaxis. Venous foot pumps
	This variable indicates Venous foot pumps as the type of VTE Prophylaxis
FORMAT	**Type:** Numeric
	Item Length: 1
	Leading Zeros: No
	Beginning Position: 193
	Valid Range: See values; cannot be blank
SOURCE	Not applicable; COVERDELL-specific variable
DENOMINATOR POPULATION	The denominator includes all patients
VALUES AND DESCRIPTION	0 No 1 Yes

Item IN-21h: VTEOXAI	VTE Prophylaxis. Oral Factor Xa Inhibitor
	This variable indicates Oral Factor Xa Inhibitor as the type of VTE Prophylaxis
FORMAT	**Type:** Numeric
	Item Length: 1
	Leading Zeros: No
	Beginning Position: 194
	Valid Range: See values; cannot be blank
SOURCE	Not applicable; COVERDELL-specific variable
DENOMINATOR POPULATION	The denominator includes all patients
VALUES AND DESCRIPTION	0 No 1 Yes

Item IN-21i: VTEASPRN	VTE Prophylaxis. Aspirin
	This variable indicates Aspirin as the type of VTE Prophylaxis
FORMAT	**Type:** Numeric
	Item Length: 1
	Leading Zeros: No
	Beginning Position: 195
	Valid Range: See values; cannot be blank
SOURCE	Not applicable; COVERDELL-specific variable
DENOMINATOR POPULATION	The denominator includes all patients
VALUES AND DESCRIPTION	0 No 1 Yes

| Item IN-21j: VTEND | **VTE Prophylaxis. Not Documented or none of the above** |
	This variable indicates Not documented or none of the above as the type of VTE Prophylaxis
FORMAT	**Type:** Numeric
	Item Length: 1
	Leading Zeros: No
	Beginning Position: 196
	Valid Range: See values; cannot be blank
SOURCE	Not applicable; COVERDELL-specific variable
DENOMINATOR POPULATION	The denominator includes all patients
VALUES AND DESCRIPTION	0 No
	1 Yes

Item IN-21k: VTEDATE	What date was the initial VTE prophylaxis administered?
	This variable indicates the date the initial VTE prophylaxis was administered
FORMAT	**Type:** Date
	Item Length: 8
	Leading Zeros: Yes
	Beginning Position: 197
	Valid Range: Valid date
SOURCE	Not applicable; COVERDELL-specific variable
DENOMINATOR POPULATION	The denominator includes all patients
VALUES AND DESCRIPTION	Valid date in MMDDYYYY format
	MM= Month (01-12), DD=Day (01-31) and YYYY = Year (20XX)

Item IN-21I: NOVTEDOC	**If not documented or none of the above types of prophylaxis apply, is there documentation why prophylaxis was not administered at hospital admission?** This variable indicates whether there is documentation on why prophylaxis was not administered at hospital admission
FORMAT	**Type:** Numeric **Item Length:** 1 **Leading Zeros:** No **Beginning Position:** 205 **Valid Range:** See values; cannot be blank
SOURCE	Not applicable; COVERDELL-specific variable
DENOMINATOR POPULATION	The denominator includes patients to whom prophylaxis was not administered at hospital admission
VALUES AND DESCRIPTION	0 No 1 Yes

Item IN-21m: OFXAVTE	Is there a documented reason for using Oral Factor Xa Inhibitor for VTE?
	This variable indicates whether there is a documented reason for using Oral Factor Xa Inhibitor for VTE
FORMAT	**Type:** Numeric
	Item Length: 1
	Leading Zeros: No
	Beginning Position: 206
	Valid Range: See values; cannot be blank
SOURCE	Not applicable; COVERDELL-specific variable
DENOMINATOR POPULATION	The denominator includes all patients
VALUES AND DESCRIPTION	0 No
	1 Yes

Item IN-22a: LDUHIV	**Other Therapeutic Anticoagulation. Unfractionated heparin IV**
	This variable indicates Unfractionated heparin IV as other therapeutic anticoagulation
FORMAT	**Type:** Numeric
	Item Length: 1
	Leading Zeros: No
	Beginning Position: 207
	Valid Range: See values; cannot be blank
SOURCE	Not applicable; COVERDELL-specific variable
DENOMINATOR POPULATION	The denominator includes all patients
VALUES AND DESCRIPTION	0 No
	1 Yes

Item IN-22b: DABIGAT	Other Therapeutic Anticoagulation. Dabigatran (Pradaxa)
	This variable indicates Dabigatran (Pradaxa) as other therapeutic anticoagulation
FORMAT	**Type:** Numeric
	Item Length: 1
	Leading Zeros: No
	Beginning Position: 208
	Valid Range: See values; cannot be blank
SOURCE	Not applicable; COVERDELL-specific variable
DENOMINATOR POPULATION	The denominator includes all patients
VALUES AND DESCRIPTION	0 No 1 Yes

Item IN-22c: ARGATRO	Other Therapeutic Anticoagulation. Argatroban
	This variable indicates Argatroban as other therapeutic anticoagulation
FORMAT	**Type:** Numeric
	Item Length: 1
	Leading Zeros: No
	Beginning Position: 209
	Valid Range: See values; cannot be blank
SOURCE	Not applicable; COVERDELL-specific variable
DENOMINATOR POPULATION	The denominator includes all patients
VALUES AND DESCRIPTION	0 No 1 Yes

Item IN-22d: DESIRUD	Other Therapeutic Anticoagulation. Desirudin (Iprivask)
	This variable indicates Desirudin (Iprivask) as other therapeutic anticoagulation
FORMAT	**Type:** Numeric
	Item Length: 1
	Leading Zeros: No
	Beginning Position: 210
	Valid Range: See values; cannot be blank
SOURCE	Not applicable; COVERDELL-specific variable
DENOMINATOR POPULATION	The denominator includes all patients
VALUES AND DESCRIPTION	0 No 1 Yes

Item IN-22e: ORALXAI	Other Therapeutic Anticoagulation. Oral Factor Xa Inhibitors (e.g., rivaroxaban/Xarelto)
	This variable indicates Oral Factor Xa Inhibitors (e.g., rivaroxaban/Xarelto) as other therapeutic anticoagulation
FORMAT	**Type:** Numeric
	Item Length: 1
	Leading Zeros: No
	Beginning Position: 211
	Valid Range: See values; cannot be blank
SOURCE	Not applicable; COVERDELL-specific variable
DENOMINATOR POPULATION	The denominator includes all patients
VALUES AND DESCRIPTION	0 No 1 Yes

Item IN-22f: LEPIRUD	Other Therapeutic Anticoagulation. Lepirudin (Refludan)
	This variable indicates Lepirudin (Refludan) as other therapeutic anticoagulation
FORMAT	**Type:** Numeric
	Item Length: 1
	Leading Zeros: No
	Beginning Position: 212
	Valid Range: See values; cannot be blank
SOURCE	Not applicable; COVERDELL-specific variable
DENOMINATOR POPULATION	The denominator includes all patients
VALUES AND DESCRIPTION	0 No 1 Yes

Item IN-22g: OTHACOAG	Other Therapeutic Anticoagulation. Other Anticoagulant
	This variable indicates other coagulants as other therapeutic anticoagulation
FORMAT	**Type:** Numeric
	Item Length: 1
	Leading Zeros: No
	Beginning Position: 213
	Valid Range: See values; cannot be blank
SOURCE	Not applicable; COVERDELL-specific variable
DENOMINATOR POPULATION	The denominator includes all patients
VALUES AND DESCRIPTION	0 No 1 Yes

Item IN-23a: NPO	Was the patient NPO throughout the entire hospital stay? (That is, this patient never received food, fluids, or medication by mouth at any time. This includes any medications delivered in the Emergency Room phase of care.)
	This variable indicates whether the patient was NPO throughout the entire hospital stay, meaning the patient never received food, fluids, or medication by mouth at any time, including any medications delivered in the Emergency Room phase of care
FORMAT	**Type:** Numeric
	Item Length: 1
	Leading Zeros: No
	Beginning Position: 214
	Valid Range: See values; cannot be blank
SOURCE	Not applicable; COVERDELL-specific variable
DENOMINATOR POPULATION	The denominator includes all patients
VALUES AND DESCRIPTION	0 No/Not documented
	1 Yes

Item IN-23b: DYSPHAYN	Was patient screened for dysphagia prior to any oral intake, including food, fluids or medications?
	This variable indicates whether the patient was screened for dysphagia prior to any oral intake, including food, fluids or medications
FORMAT	**Type:** Numeric
	Item Length: 1
	Leading Zeros: No
	Beginning Position: 215
	Valid Range: See values; cannot be blank
SOURCE	Not applicable; COVERDELL-specific variable
DENOMINATOR POPULATION	The denominator includes all patients
VALUES AND DESCRIPTION	0 No or Not documented
	1 Yes
	2 NC - a documented reason for not screening exists in the medical record

Item IN-23c: DYSPHAPF	If patient was screened for dysphagia, what were the results of the most recent screen prior to oral intake?
	This variable indicates the results of the most recent dysphagia screening prior to oral intake for patients
FORMAT	**Type:** Numeric
	Item Length: 1
	Leading Zeros: No
	Beginning Position: 216
	Valid Range: See values; cannot be blank
SOURCE	Not applicable; COVERDELL-specific variable
DENOMINATOR POPULATION	The denominator includes patients that were screened for dysphagia
VALUES AND DESCRIPTION	1 Pass 2 Fail 9 Not documented

Other Complications

Item IN-24a: PNEUMYN	**Was there documentation that the patient was treated for hospital acquired pneumonia (pneumonia not present at admission) during this admission?**
	This variable indicates whether there was documentation that the patient was treated for hospital acquired pneumonia (pneumonia not present at admission) during this admission
FORMAT	**Type:** Numeric
	Item Length: 1
	Leading Zeros: No
	Beginning Position: 217
	Valid Range: See values; cannot be blank
SOURCE	Not applicable; COVERDELL-specific variable
DENOMINATOR POPULATION	The denominator includes only patients that were admitted
VALUES AND DESCRIPTION	
	0 No or Not documented
	1 Yes
	2 NC - a documented reason for not screening exists in the medical record

Item IN-25a: DVTDOCYN	Did patient experience a DVT or pulmonary embolus (PE) during this admission?
	This variable indicates whether the patient experienced a DVT or pulmonary embolus (PE) during this admission
FORMAT	**Type:** Numeric
	Item Length: 1
	Leading Zeros: No
	Beginning Position: 218
	Valid Range: See values; cannot be blank
SOURCE	Not applicable; COVERDELL-specific variable
DENOMINATOR POPULATION	The denominator includes only patients that were admitted
VALUES AND DESCRIPTION	0 No/Not documented 1 Yes

Active Bacterial or Viral Infection at Admission or During Hospitalization

Item IN-26a: INF_COLD	Active bacterial or viral infection at admission or during hospitalization. Seasonal cold or flu
	This variable indicates whether the patient contracted seasonal cold or flu at admission or during hospitalization
FORMAT	**Type:** Numeric
	Item Length: 1
	Leading Zeros: No
	Beginning Position: 219
	Valid Range: See values; cannot be blank
SOURCE	Not applicable; COVERDELL-specific variable
DENOMINATOR POPULATION	The denominator includes only patients that were admitted
VALUES AND DESCRIPTION	
	0 No
	1 Yes

Item IN-26b: INF_FLU	**Active bacterial or viral infection at admission or during hospitalization. Influenza**
	This variable indicates whether the patient contracted influenza at admission or during hospitalization
FORMAT	**Type:** Numeric
	Item Length: 1
	Leading Zeros: No
	Beginning Position: 220
	Valid Range: See values; cannot be blank
SOURCE	Not applicable; COVERDELL-specific variable
DENOMINATOR POPULATION	The denominator includes only patients that were admitted
VALUES AND DESCRIPTION	0 No

1   Yes |

Item IN-26c: INF_BAC	**Active bacterial or viral infection at admission or during hospitalization. Bacterial infection**
	This variable indicates whether the patient contracted a bacterial infection at admission or during hospitalization
FORMAT	**Type:** Numeric
	Item Length: 1
	Leading Zeros: No
	Beginning Position: 221
	Valid Range: See values; cannot be blank
SOURCE	Not applicable; COVERDELL-specific variable
DENOMINATOR POPULATION	The denominator includes only patients that were admitted
VALUES AND DESCRIPTION	
	0 No
	1 Yes

Item IN-26d: INF_OTH	**Active bacterial or viral infection at admission or during hospitalization. Other viral infection**
	This variable indicates whether the patient contracted another viral infection at admission or during hospitalization
FORMAT	**Type:** Numeric
	Item Length: 1
	Leading Zeros: No
	Beginning Position: 222
	Valid Range: See values; cannot be blank
SOURCE	Not applicable; COVERDELL-specific variable
DENOMINATOR POPULATION	The denominator includes only patients that were admitted
VALUES AND DESCRIPTION	0 No 1 Yes

Item IN-26e: INF_EMID	**Active bacterial or viral infection at admission or during hospitalization. Emerging Infectious Disease**
	This variable indicates whether the patient contracted an emerging infectious disease at admission or during hospitalization
FORMAT	**Type:** Numeric
	Item Length: 1
	Leading Zeros: No
	Beginning Position: 223
	Valid Range: See values; cannot be blank
SOURCE	Not applicable; COVERDELL-specific variable
DENOMINATOR POPULATION	The denominator includes only patients that were admitted
VALUES AND DESCRIPTION	0 No 1 Yes

Item IN-26f: INF_COV1	**Active bacterial or viral infection at admission or during hospitalization. SARS-COV-1**
	This variable indicates whether the patient contracted SARS-COV-1 at admission or during hospitalization
FORMAT	**Type:** Numeric
	Item Length: 1
	Leading Zeros: No
	Beginning Position: 224
	Valid Range: See values; cannot be blank
SOURCE	Not applicable; COVERDELL-specific variable
DENOMINATOR POPULATION	The denominator includes only patients that were admitted
VALUES AND DESCRIPTION	0 No
	1 Yes

Item IN-26g: INF_COV2	**Active bacterial or viral infection at admission or during hospitalization. SARS-COV-2 (COVID-19)**
	This variable indicates whether the patient contracted SARS-COV-2 (COVID-19) at admission or during hospitalization
FORMAT	**Type:** Numeric
	Item Length: 1
	Leading Zeros: No
	Beginning Position: 225
	Valid Range: See values; cannot be blank
SOURCE	Not applicable; COVERDELL-specific variable
DENOMINATOR POPULATION	The denominator includes only patients that were admitted
VALUES AND DESCRIPTION	0 No 1 Yes

Item IN-26h: INF_MERS	**Active bacterial or viral infection at admission or during hospitalization. MERS**
	This variable indicates whether the patient contracted MERS at admission or during hospitalization
FORMAT	**Type:** Numeric
	Item Length: 1
	Leading Zeros: No
	Beginning Position: 226
	Valid Range: See values; cannot be blank
SOURCE	Not applicable; COVERDELL-specific variable
DENOMINATOR POPULATION	The denominator includes only patients that were admitted
VALUES AND DESCRIPTION	0 No 1 Yes

Item IN-26i: INF_OEID	**Active bacterial or viral infection at admission or during hospitalization. Other Emerging Infectious Disease**
	This variable indicates whether the patient contracted another emerging infectious disease at admission or during hospitalization
FORMAT	**Type:** Numeric
	Item Length: 1
	Leading Zeros: No
	Beginning Position: 227
	Valid Range: See values; cannot be blank
SOURCE	Not applicable; COVERDELL-specific variable
DENOMINATOR POPULATION	The denominator includes only patients that were admitted
VALUES AND DESCRIPTION	0 No
	1 Yes

Item IN-26j: INF_NONE	**Active bacterial or viral infection at admission or during hospitalization. None/Not documented**
	This variable indicates whether the patient had not contracted an active bacterial or viral infection or was not documented at admission or during hospitalization
FORMAT	**Type:** Numeric
	Item Length: 1
	Leading Zeros: No
	Beginning Position: 228
	Valid Range: See values; cannot be blank
SOURCE	Not applicable; COVERDELL-specific variable
DENOMINATOR POPULATION	The denominator includes only patients that were admitted
VALUES AND DESCRIPTION	0 No 1 Yes

Date of discharge from hospital

Item IN-27a: DSCHRGD	What date was the patient discharged from hospital?
	This variable indicates the date the patient was discharged from hospital
FORMAT	**Type:** Date
	Item Length: 8
	Leading Zeros: Yes
	Beginning Position: 229
	Valid Range: Valid date
SOURCE	Not applicable; COVERDELL-specific variable
DENOMINATOR POPULATION	The denominator includes only patients that were admitted
VALUES AND DESCRIPTION	Valid date in MMDDYYYY format
	MM= Month (01-12), DD=Day (01-31) and YYYY = Year (20XX)

Principal discharge ICD-10-CM diagnosis

Item IN-28a: ICD10DX	Principal discharge ICD-10-CM code
	This variable indicates the principal discharge ICD-10-CM code
FORMAT	**Type:** Character
	Item Length: 8
	Leading Zeros: No
	Beginning Position: 237
	Valid Range: See values; cannot be blank
SOURCE	Not applicable; COVERDELL-specific variable
DENOMINATOR POPULATION	The denominator includes only patients that were admitted
VALUES AND DESCRIPTION	Alphanumeric, 3 before decimal, 4 after decimal

Clinical diagnosis related to stroke that was ultimately responsible for this admission

Item IN-29a: ADMDXSH	Clinical diagnosis related to stroke that was ultimately responsible for this admission. Subarachnoid hemorrhage
	This variable indicates subarachnoid hemorrhage as the clinical diagnosis related to the stroke that was ultimately responsible for this admission
FORMAT	**Type:** Numeric
	Item Length: 1
	Leading Zeros: No
	Beginning Position: 245
	Valid Range: See values; cannot be blank
SOURCE	Not applicable; COVERDELL-specific variable
DENOMINATOR POPULATION	The denominator includes only patients that were admitted
VALUES AND DESCRIPTION	0 No 1 Yes

Item IN-29b: ADMDXIH	**Clinical diagnosis related to stroke that was ultimately responsible for this admission. Intracerebral hemorrhage**
	This variable indicates intracerebral hemorrhage as the clinical diagnosis related to the stroke that was ultimately responsible for this admission
FORMAT	**Type:** Numeric
	Item Length: 1
	Leading Zeros: No
	Beginning Position: 246
	Valid Range: See values; cannot be blank
SOURCE	Not applicable; COVERDELL-specific variable
DENOMINATOR POPULATION	The denominator includes only patients that were admitted
VALUES AND DESCRIPTION	0 No 1 Yes

Item IN-29c: ADMDXIS	Clinical diagnosis related to stroke that was ultimately responsible for this admission. Ischemic stroke
	This variable indicates ischemic stroke as the clinical diagnosis related to the stroke that was ultimately responsible for this admission
FORMAT	**Type:** Numeric
	Item Length: 1
	Leading Zeros: No
	Beginning Position: 247
	Valid Range: See values; cannot be blank
SOURCE	Not applicable; COVERDELL-specific variable
DENOMINATOR POPULATION	The denominator includes only patients that were admitted
VALUES AND DESCRIPTION	0 No 1 Yes

Item IN-29d: ADMDXTIA	**Clinical diagnosis related to stroke that was ultimately responsible for this admission. Transient ischemic attack**
	This variable indicates transient ischemic attack as the clinical diagnosis related to the stroke that was ultimately responsible for this admission
FORMAT	**Type:** Numeric
	Item Length: 1
	Leading Zeros: No
	Beginning Position: 248
	Valid Range: See values; cannot be blank
SOURCE	Not applicable; COVERDELL-specific variable
DENOMINATOR POPULATION	The denominator includes only patients that were admitted
VALUES AND DESCRIPTION	0 No 1 Yes

Item IN-29e: ADMDXSNS	**Clinical diagnosis related to stroke that was ultimately responsible for this admission. Stroke not otherwise specified**
	This variable indicates stroke not otherwise specified as the clinical diagnosis related to the stroke that was ultimately responsible for this admission
FORMAT	**Type:** Numeric
	Item Length: 1
	Leading Zeros: No
	Beginning Position: 249
	Valid Range: See values; cannot be blank
SOURCE	Not applicable; COVERDELL-specific variable
DENOMINATOR POPULATION	The denominator includes only patients that were admitted
VALUES AND DESCRIPTION	0 No
	1 Yes

Item IN-29f: ADMDXNOS	**Clinical diagnosis related to stroke that was ultimately responsible for this admission. No stroke related diagnosis**
	This variable indicates whether there was no stroke related diagnosis
FORMAT	**Type:** Numeric
	Item Length: 1
	Leading Zeros: No
	Beginning Position: 250
	Valid Range: See values; cannot be blank
SOURCE	Not applicable; COVERDELL-specific variable
DENOMINATOR POPULATION	The denominator includes only patients that were admitted
VALUES AND DESCRIPTION	0 No 1 Yes

Item IN-29g: ADMCE	**Was patient admitted for the sole purpose of performance of a carotid intervention?**
	This variable indicates whether the patient was admitted for the sole purpose of performance of a carotid intervention
FORMAT	**Type:** Numeric
	Item Length: 1
	Leading Zeros: No
	Beginning Position: 251
	Valid Range: See values; cannot be blank
SOURCE	Not applicable; COVERDELL-specific variable
DENOMINATOR POPULATION	The denominator includes only patients that were admitted
VALUES AND DESCRIPTION	
	0 No or Unable to determine
	1 Yes

Item IN-29h: CLNTRIAL	Was the patient enrolled in a stroke clinical trial?
	This variable indicates whether the patient was enrolled in a stroke clinical trial
FORMAT	**Type:** Numeric
	Item Length: 1
	Leading Zeros: No
	Beginning Position: 252
	Valid Range: See values; cannot be blank
SOURCE	Not applicable; COVERDELL-specific variable
DENOMINATOR POPULATION	The denominator includes only patients that were admitted
VALUES AND DESCRIPTION	
	0 No or Unable to determine
	1 Yes

Discharge disposition

Item IN-30a: DSCHDISP	Discharge disposition
	This variable indicates the discharge disposition
FORMAT	**Type:** Numeric
	Item Length: 1
	Leading Zeros: No
	Beginning Position: 253
	Valid Range: See values; cannot be blank
SOURCE	Not applicable; COVERDELL-specific variable
DENOMINATOR POPULATION	The denominator includes only patients that were admitted
VALUES AND DESCRIPTION	
	1 Discharged to home or self-care (routine discharge), with or without home health, discharged to jail or law enforcement, or to assisted living facility
	2 Discharged to home hospice
	3 Discharged to hospice in a health care facility
	4 Discharged to an acute care facility (includes critical access hospitals, cancer and children's hospitals, VA, and DOD hospitals
	5 Discharged to another healthcare facility
	6 Expired
	7 Left against medical advice or discontinued care
	8 Not documented or unable to determine

Item IN-30b: OHFTYPE	**If discharged to another healthcare facility above (option 5), what type of facility was it?**
	This variable indicates the type of healthcare facility the patient was discharged to
FORMAT	**Type:** Numeric
	Item Length: 1
	Leading Zeros: No
	Beginning Position: 254
	Valid Range: See values; cannot be blank
SOURCE	Not applicable; COVERDELL-specific variable
DENOMINATOR POPULATION	The denominator includes all patients that were discharged to another healthcare facility
VALUES AND DESCRIPTION	1 Skilled nursing facility 2 Inpatient rehabilitation 3 Long-term care facility, or hospital 4 Intermediate care facility 5 Other

Functional Status at Discharge

Item IN-31a: MRSSCORE	Modified Rankin Scale Score
	This variable indicates the modified Rankin Scale Score for the patient
FORMAT	**Type:** Numeric
	Item Length: 1
	Leading Zeros: No
	Beginning Position: 255
	Valid Range: See values; cannot be blank
SOURCE	Not applicable; COVERDELL-specific variable
DENOMINATOR POPULATION	The denominator includes only patients that were admitted
VALUES AND DESCRIPTION	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
	6 Death

Item IN-31b: AMBSTATD	Ambulatory status at discharge
	This variable indicates the ambulatory status at discharge
FORMAT	**Type:** Numeric
	Item Length: 1
	Leading Zeros: No
	Beginning Position: 256
	Valid Range: See values; cannot be blank
SOURCE	Not applicable; COVERDELL-specific variable
DENOMINATOR POPULATION	The denominator includes only patients that were admitted
VALUES AND DESCRIPTION	
	1 Able to ambulate independently with or without device
	2 With assistance from another person
	3 Unable to ambulate
	9 Not documented

Antihypertensive Treatment at Discharge

Item IN-32a: HBPTREAT	Is there documentation that antihypertensive medication was prescribed at discharge?
	This variable indicates whether there was documentation that antihypertensive medication was prescribed at discharge
FORMAT	**Type:** Numeric
	Item Length: 1
	Leading Zeros: No
	Beginning Position: 257
	Valid Range: See values; cannot be blank
SOURCE	Not applicable; COVERDELL-specific variable
DENOMINATOR POPULATION	The denominator includes only patients that were admitted
VALUES AND DESCRIPTION	0 No/Not documented 1 Yes 2 A documented reason for not screening exists in the medical record

Lipid Treatment

Item IN-33a: LIPNONE	**No cholesterol reducing treatment prescribed at discharge**
	This variable indicates whether no cholesterol reducing treatment was prescribed at discharge
FORMAT	**Type:** Numeric
	Item Length: 1
	Leading Zeros: No
	Beginning Position: 258
	Valid Range: See values; cannot be blank
SOURCE	Not applicable; COVERDELL-specific variable
DENOMINATOR POPULATION	The denominator includes only patients that were admitted
VALUES AND DESCRIPTION	0 No/Not documented
	1 Yes

Item IN-33b: LIPSTATN	**Was a statin medication prescribed at discharge?**
	This variable indicates whether statin medication was prescribed at discharge
FORMAT	**Type:** Numeric
	Item Length: 1
	Leading Zeros: No
	Beginning Position: 259
	Valid Range: See values; cannot be blank
SOURCE	Not applicable; COVERDELL-specific variable
DENOMINATOR POPULATION	The denominator includes only patients that were admitted
VALUES AND DESCRIPTION	0 No/Not documented
	1 Yes

Item IN-33c: LIPOTHNC	If other lipid lowering medications not prescribed, was there a documented contraindication to other lipid lowering medication?
	This variable indicates whether there was a documented contraindication to other lipid lowering medication when other lipid lowering medications were not prescribed
FORMAT	**Type:** Numeric
	Item Length: 1
	Leading Zeros: No
	Beginning Position: 260
	Valid Range: See values; cannot be blank
SOURCE	Not applicable; COVERDELL-specific variable
DENOMINATOR POPULATION	The denominator includes patients to whom lipid lowering medications was not prescribed
VALUES AND DESCRIPTION	0 No/Not documented 1 Yes

Item IN-33d: LIPFIBRT	**Cholesterol reducing treatment prescribed. Fibrate** This variable indicates whether Fibrate was prescribed as a cholesterol reducing treatment
FORMAT	**Type:** Numeric **Item Length:** 1 **Leading Zeros:** No **Beginning Position:** 261 **Valid Range:** See values; cannot be blank
SOURCE	Not applicable; COVERDELL-specific variable
DENOMINATOR POPULATION	The denominator includes only patients to whom a cholesterol reducing treatment was prescribed
VALUES AND DESCRIPTION	0 No/Not documented 1 Yes

Item IN-33e: LIPOTHRX	Other cholesterol reducing medication
	This variable indicates whether other cholesterol reducing medication was prescribed
FORMAT	**Type:** Numeric
	Item Length: 1
	Leading Zeros: No
	Beginning Position: 262
	Valid Range: See values; cannot be blank
SOURCE	Not applicable; COVERDELL-specific variable
DENOMINATOR POPULATION	The denominator includes only patients to whom a cholesterol reducing treatment was prescribed
VALUES AND DESCRIPTION	0 No/Not documented 1 Yes

Item IN-33f: LIPNIACN	Cholesterol reducing treatment prescribed. Niacin
	This variable indicates whether Niacin was prescribed as a cholesterol reducing treatment
FORMAT	**Type:** Numeric
	Item Length: 1
	Leading Zeros: No
	Beginning Position: 263
	Valid Range: See values; cannot be blank
SOURCE	Not applicable; COVERDELL-specific variable
DENOMINATOR POPULATION	The denominator includes only patients to whom a cholesterol reducing treatment was prescribed
VALUES AND DESCRIPTION	0 No/Not documented
	1 Yes

Item IN-33g: LIPABSIN	Cholesterol reducing treatment prescribed. Absorption inhibitor
	This variable indicates whether an absorption inhibitor was prescribed as a cholesterol reducing treatment
FORMAT	**Type:** Numeric
	Item Length: 1
	Leading Zeros: No
	Beginning Position: 264
	Valid Range: See values; cannot be blank
SOURCE	Not applicable; COVERDELL-specific variable
DENOMINATOR POPULATION	The denominator includes only patients to whom a cholesterol reducing treatment was prescribed
VALUES AND DESCRIPTION	0 No/Not documented 1 Yes

Item IN-33h: LIPPCSK	**Cholesterol reducing treatment prescribed. PCSK9 inhibitor**
	This variable indicates whether PCSK9 inhibitor was prescribed as a cholesterol reducing treatment
FORMAT	**Type:** Numeric
	Item Length: 1
	Leading Zeros: No
	Beginning Position: 265
	Valid Range: See values; cannot be blank
SOURCE	Not applicable; COVERDELL-specific variable
DENOMINATOR POPULATION	The denominator includes only patients to whom a cholesterol reducing treatment was prescribed
VALUES AND DESCRIPTION	0 No/Not documented 1 Yes

Item IN-33i: STATNNC	If statin not prescribed, was there a documented contraindication to statins?
	This variable indicates whether there was a documented contraindication to statins for patients to whom statin was not prescribed
FORMAT	**Type:** Numeric
	Item Length: 1
	Leading Zeros: No
	Beginning Position: 266
	Valid Range: See values; cannot be blank
SOURCE	Not applicable; COVERDELL-specific variable
DENOMINATOR POPULATION	The denominator includes patients to whom statin was not prescribed
VALUES AND DESCRIPTION	0 No/Not documented
	1 Yes

Item IN-33j: STATNINT	**What intensity was the statin that was prescribed at discharge?**
	This variable indicates the intensity of the statin prescribed at discharge
FORMAT	**Type:** Numeric
	Item Length: 1
	Leading Zeros: No
	Beginning Position: 267
	Valid Range: See values; cannot be blank
SOURCE	Not applicable; COVERDELL-specific variable
DENOMINATOR POPULATION	The denominator includes patients to whom statin was prescribed
VALUES AND DESCRIPTION	1 High-intensity statin
	2 Moderate-intensity statin
	3 Low-intensity statin
	9 Unknown

Item IN-33k: STATNWHY	**Was there a documented reason for not prescribing the guideline recommended statin dose?**
	This variable indicates whether there was a documented reason for not prescribing the guideline recommended statin dose
FORMAT	**Type:** Numeric
	Item Length: 1
	Leading Zeros: No
	Beginning Position: 268
	Valid Range: See values; cannot be blank
SOURCE	Not applicable; COVERDELL-specific variable
DENOMINATOR POPULATION	The denominator includes patients that were not prescribed the guideline recommended statin dose
VALUES AND DESCRIPTION	
	1 Intolerant to moderate (>75 years) or high (<=75 years) intensity statin
	2 No evidence of atherosclerosis (cerebral, coronary, or peripheral vascular disease)
	3 Other documented reason
	9 Unknown

Atrial Fibrillation

Coverdell DE Manual   197   November 1, 2021
Edition 1.0

Item IN-34a: AFIBYN	Was atrial fibrillation/flutter or paroxysmal atrial fibrillation (PAF), documented during this episode of care?
	This variable indicates whether atrial fibrillation/flutter or paroxysmal atrial fibrillation (PAF) was documented during this episode of care
FORMAT	**Type:** Numeric
	Item Length: 1
	Leading Zeros: No
	Beginning Position: 269
	Valid Range: See values; cannot be blank
SOURCE	Not applicable; COVERDELL-specific variable
DENOMINATOR POPULATION	The denominator includes only patients that were admitted
VALUES AND DESCRIPTION	0 No/Not documented
	1 Yes

Item IN-34b: AFIBRX	**If a history of atrial fibrillation/flutter or PAF is documented in the medical history or if the patient experienced atrial fibrillation/flutter or PAF during this episode of care, was patient prescribed anticoagulation medication upon discharge?** This variable indicates whether the patient was prescribed anticoagulation medication upon discharge atrial fibrillation/flutter or PAF during this episode of care
FORMAT	**Type:** Numeric **Item Length:** 1 **Leading Zeros:** No **Beginning Position:** 270 **Valid Range:** See values; cannot be blank
SOURCE	Not applicable; COVERDELL-specific variable
DENOMINATOR POPULATION	The denominator includes patients with a history of atrial fibrillation/flutter or PAF or patients that experienced atrial fibrillation/flutter or PAF during this episode of care
VALUES AND DESCRIPTION	0 No/Not documented 1 Yes 2 A documented reason for not screening exists in the medical record

Antithrombotics at Discharge

Item IN-35a: ATHDSCYN	Was antithrombotic (antiplatelet or anticoagulant) medication prescribed at discharge?
	This variable indicates whether antithrombotic (antiplatelet or anticoagulant) medication was prescribed at discharge
FORMAT	**Type:** Numeric
	Item Length: 1
	Leading Zeros: No
	Beginning Position: 271
	Valid Range: See values; cannot be blank
SOURCE	Not applicable; COVERDELL-specific variable
DENOMINATOR POPULATION	The denominator includes only patients that were admitted
VALUES AND DESCRIPTION	0 No/Not documented
	1 Yes
	2 A documented reason for not screening exists in the medical record

Item IN-35b: DC_PLT	If patient was discharged on an antithrombotic medication, was it an antiplatelet?
	This variable indicates whether the patient was discharged with an antiplatelet medication
FORMAT	**Type:** Numeric
	Item Length: 1
	Leading Zeros: No
	Beginning Position: 272
	Valid Range: See values; cannot be blank
SOURCE	Not applicable; COVERDELL-specific variable
DENOMINATOR POPULATION	The denominator includes patients discharged on antithrombotic medication
VALUES AND DESCRIPTION	0 No/Not documented
	1 Yes

Item IN-35c: DC_COAG	**If patient was discharged on an antithrombotic medication, was it an anticoagulant?**
	This variable indicates whether the patient was discharged with an anticoagulant medication
FORMAT	**Type:** Numeric
	Item Length: 1
	Leading Zeros: No
	Beginning Position: 273
	Valid Range: See values; cannot be blank
SOURCE	Not applicable; COVERDELL-specific variable
DENOMINATOR POPULATION	The denominator includes patients discharged on antithrombotic medication
VALUES AND DESCRIPTION	
	0 No/Not documented
	1 Yes

Smoking Counseling

Item IN-36a: SMKCESYN	**If past medical history of smoking is checked as yes, was the adult patient or their caregiver given smoking cessation advice or counseling during the hospital stay?**
	This variable indicates whether the adult patient or their caregiver was given smoking cessation advice or counseling during the hospital stay
FORMAT	**Type:** Numeric
	Item Length: 1
	Leading Zeros: No
	Beginning Position: 274
	Valid Range: See values; cannot be blank
SOURCE	Not applicable; COVERDELL-specific variable
DENOMINATOR POPULATION	The denominator includes patients with past medical history of smoking
VALUES AND DESCRIPTION	0 No or not documented in the medical record 1 Yes 2 A documented reason exists for not performing counseling

Stroke Education

Item IN-37a: EDUCRF	Stroke Education. Risk factors for stroke
	This variable indicates whether the patient received education regarding risk factors for stroke
FORMAT	**Type:** Numeric
	Item Length: 1
	Leading Zeros: No
	Beginning Position: 275
	Valid Range: See values; cannot be blank
SOURCE	Not applicable; COVERDELL-specific variable
DENOMINATOR POPULATION	The denominator includes only patients that were admitted
VALUES AND DESCRIPTION	0 No/Not documented 1 Yes

Item IN-37b: EDUCSSX	Stroke Education. Stroke Warning Signs and Symptoms
	This variable indicates whether the patient received education regarding stroke warning signs and symptoms
FORMAT	**Type:** Numeric
	Item Length: 1
	Leading Zeros: No
	Beginning Position: 276
	Valid Range: See values; cannot be blank
SOURCE	Not applicable; COVERDELL-specific variable
DENOMINATOR POPULATION	The denominator includes only patients that were admitted
VALUES AND DESCRIPTION	0 No/Not documented
	1 Yes

Item IN-37c: EDUCEMS	Stroke Education. How to activate EMS for stroke
	This variable indicates whether the patient received education regarding how to activate EMS for stroke
FORMAT	**Type:** Numeric
	Item Length: 1
	Leading Zeros: No
	Beginning Position: 277
	Valid Range: See values; cannot be blank
SOURCE	Not applicable; COVERDELL-specific variable
DENOMINATOR POPULATION	The denominator includes only patients that were admitted
VALUES AND DESCRIPTION	0 No/Not documented
	1 Yes

Item IN-37d: EDUCCC	**Stroke Education. Need for follow-up after discharge**
	This variable indicates whether the patient received education regarding need for follow-up after discharge
FORMAT	**Type:** Numeric
	Item Length: 1
	Leading Zeros: No
	Beginning Position: 278
	Valid Range: See values; cannot be blank
SOURCE	Not applicable; COVERDELL-specific variable
DENOMINATOR POPULATION	The denominator includes only patients that were admitted
VALUES AND DESCRIPTION	0 No/Not documented 1 Yes

Item IN-37e: EDUCMEDS	Stroke Education. Medications prescribed at discharge
	This variable indicates whether the patient received education regarding medications prescribed at discharge
FORMAT	**Type:** Numeric
	Item Length: 1
	Leading Zeros: No
	Beginning Position: 279
	Valid Range: See values; cannot be blank
SOURCE	Not applicable; COVERDELL-specific variable
DENOMINATOR POPULATION	The denominator includes only patients that were admitted
VALUES AND DESCRIPTION	0 No/Not documented 1 Yes

Rehabilitation

Item IN-38a: REHAPLAN	Is there documentation in the record that the patient was assessed for or received rehabilitation services?
	This variable indicates whether there is documentation that the patient was assessed for or received rehabilitation services
FORMAT	**Type:** Numeric
	Item Length: 1
	Leading Zeros: No
	Beginning Position: 280
	Valid Range: See values; cannot be blank
SOURCE	Not applicable; COVERDELL-specific variable
DENOMINATOR POPULATION	The denominator includes only patients that were admitted
VALUES AND DESCRIPTION	0 No 1 Yes

APPENDIX

Appendix A

Data Elements Submission* Timeline

February 15, 2022
Data collected from: October 2021 to December 2021

June 15, 2022
Data collected from: January 2022 to April 2022

October 15, 2022
Data collected from: May 2022 to August 2022

February 15, 2023
Data collected from: September 2022 to December 2022

June 15, 2023
Data collected from: January 2023 to April 2023

October 15, 2023
Data collected from: May 2023 to August 2023

February 15, 2024
Data collected from: September 2023 to December 2023

June 15, 2024
Data collected from: January 2024 to April 2024

July 29, 2024
Cooperative Agreement Closeout Data Submission

*All Data Elements files submitted to CDC are expected to be cumulative files from the beginning of the current cooperative agreement.

Appendix B

TECHNICAL ASSISTANCE RESOURCES

CDC has developed several strategies and tools to provide technical assistance and support in collecting and submitting data. This appendix describes the various types of technical assistance available to Coverdell recipients

Types of Data Technical Assistance Available

Technical assistance available to recipients can be broadly categorized as individualized technical assistance, group technical assistance, and tools. Below, specific types of technical assistance/tools within these categories are described. The table at the end of this subsection summarizes the types of technical assistance/tools by category, provider, and timeline.

Individualized Technical Assistance

- ***Data Review Calls.*** After each data element submission, data reports are generated and may be reviewed with recipients during a data review call. As needed, data quality reports and other materials may also be reviewed.

- ***Helpdesk Requests.*** Recipients can request individualized technical assistance through the Helpdesk (coverdell@rti.org). A health scientist from the CDC data team will collaborate with the data contractor to respond to technical assistance requests. This type of assistance is tailored to the recipient and the request. More information is provided in the following subsections of this appendix, "Requesting Individualized Technical Assistance" and "Helpdesk for Technical Assistance Requests."

Group Technical Assistance

- ***Ad Hoc Data Calls and Trainings.*** Throughout the course of the year, data issues affecting a majority of or all recipients may be identified, either through individualized technical assistance or as a

result of changes to the data elements submission process and specifications (e.g., modification of data elements specifications, added data elements variables). As a result, trainings or group communications may be needed, which can be fulfilled by holding ad hoc data calls and/or training seminars.

Tools

- ***Coverdell Data Manual.*** This manual is a technical assistance tool for recipients. It provides detailed guidance on the data element submission process and data element specifications, and it will be updated as necessary to stay current with the data submission and collection requirements. Recipients can access the current edition in the Awards Management Platform (AMP).

Summary of Types of Technical Assistance and Tools Available

TA Type	Provider	Timeline
Individual		
Data review calls	Project officers and/or data contractor	Tri-annually, after data element submission and release of data reports
Helpdesk requests	Data contractor	As needed
Group		
Ad hoc data calls and trainings	Data contractor	As needed
Tools		
Coverdell Data Manual	Data contractor	Ongoing

Helpdesk for Individualized Data Technical Assistance Requests

Technical assistance may be requested by emailing the data contractor at coverdell@rti.org. Once a request for technical assistance related to a data element is received, Helpdesk will automatically confirm receipt of the request and collaborate with the Health Scientists to resolve the request. For more complex requests or those requiring project officer input, responses may take more than 24 hours. All requests are tracked by Helpdesk staff and the health scientists to ensure that follow-up is completed for all requests and that responses are satisfactory to the requester. In addition, project officers will be kept abreast of the technical assistance needs of their programs. The tracking of technical assistance requests by the Helpdesk, health scientists, and project officers allows

CDC to identify common issues to inform Program-wide technical assistance.