

16. Length of time between onset of new neurologic symptoms/signs and death:

- Less than 24 hours L
- 24-48 hours E
- Greater than 48 hours G
- Unknown U
- Not Applicable N

Go to Item 19a.

17. Did the discharge diagnosis include any of these codes?
 ICD-9: 430, 431,432, 433, 434, 436 OR
 ICD-10: I60.x, I61.x, I62.x, I63.x

Yes Y → Go to Item 19a.

No... N

18. Did any neurologic symptoms/signs last > 24 hours? Yes Y

No N

Go to Item 56

19.a. Were there new neurological symptoms/signs leading to or present upon admission to this hospital?

Yes Y

No N

Go to Item 21

a. If no, what was the condition(s) causing admission?

20. Did new neurological symptoms/signs develop during this hospitalization? Yes Y

No N

Unknown U

Go to Item 56

21. Date of onset of current neurological event:

 [] [] / [] [] / [] [] [] []

 m m d d y y y y

22. Was the onset of the predominant neurologic symptom(s)/sign(s) either sudden or rapid? Yes Y

No N

Unknown U

23. History of previous stroke (also review previous discharge diagnoses) Yes Y

No N

Unknown U

Go to Item 26.

24. Month/year of first stroke:

 [] [] / [] [] [] []

 m m y y y y

25. Month/year of most recent stroke:

 [] [] / [] [] [] []

 m m y y y y

26. History of previous TIA: Yes Y

No N

Unknown U

Go to Item 28

Cohort Stroke Abstraction Form

<p>27. Month/year of first and most recent TIA:</p> <p>a. First: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/></p> <p style="margin-left: 100px;">m m y y y y</p> <p>b. Most Recent: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/></p> <p style="margin-left: 100px;">m m y y y y</p> <p>28. History of myocardial infarction prior to the onset of this event: Yes Y</p> <p style="margin-left: 150px;">No N</p> <p style="margin-left: 150px;">Unknown U</p>	<p>29. Are any of the following conditions documented as having been present within four weeks prior to or during this hospitalization?</p> <p>a. Myocardial infarction (IF YES, COMPLETE HRA FORM) Yes Y</p> <p style="margin-left: 150px;">No N</p> <p style="margin-left: 150px;">Unknown U</p> <p>b. Intracardiac thrombus or intracardiac tumor (myxoma) Yes Y</p> <p style="margin-left: 150px;">No N</p>
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<p>29.c. Atrial fibrillation or flutter Yes Y</p> <p style="margin-left: 150px;">No N</p> <p>d. Rheumatic heart disease, valvular heart disease (e.g., mitral stenosis, artificial heart valve) Yes Y</p> <p style="margin-left: 150px;">No N</p> <p>e. Subacute bacterial endocarditis Yes Y</p> <p style="margin-left: 150px;">No N</p> <p>f. Systemic embolus (including angiographically identified embolus) ... Yes Y</p> <p style="margin-left: 150px;">No N</p>	<p>29.g.1. Hematologic abnormality: hypercoagulable state e.g., DIC Yes Y</p> <p style="margin-left: 150px;">No N</p> <p>g.2. Hematologic abnormality: hemorrhagic e.g., leukemia, thrombocytopenia, DIC Yes Y</p> <p style="margin-left: 150px;">No N</p> <p>h. Brain tumor (benign or malignant, primary or metastatic) Yes Y</p> <p style="margin-left: 150px;">No N</p>
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Cohort Stroke Abstraction Form

<p>40.a. Dysphagia (difficulty in swallowing), dysarthria, dysphonia, or tongue deviation Yes Y</p> <p style="text-align: right;">No N</p> <div style="border: 1px solid black; display: inline-block; padding: 2px 5px; margin-left: 10px;">Go to Item 41.</div> <p>b. What was the duration?</p> <table style="width: 100%; border: none;"> <tr> <td style="padding-left: 20px;">Less than 24 hours</td> <td style="text-align: right;">L</td> </tr> <tr> <td style="padding-left: 20px;">24 hours or more</td> <td style="text-align: right;">M</td> </tr> <tr> <td style="padding-left: 20px;">Unknown</td> <td style="text-align: right;">U</td> </tr> </table>	Less than 24 hours	L	24 hours or more	M	Unknown	U	<p>41.a. Weakness, paresis or paralysis affecting the face Yes Y</p> <p style="text-align: right;">No N</p> <div style="border: 1px solid black; display: inline-block; padding: 2px 5px; margin-left: 10px;">Go to Item 42.</div> <p>b. Indicate affected side(s):</p> <table style="width: 100%; border: none;"> <tr> <td style="padding-left: 20px;">Right side</td> <td style="text-align: right;">R</td> </tr> <tr> <td style="padding-left: 20px;">Left side</td> <td style="text-align: right;">L</td> </tr> <tr> <td style="padding-left: 20px;">Both sides</td> <td style="text-align: right;">B</td> </tr> <tr> <td style="padding-left: 20px;">Unknown</td> <td style="text-align: right;">U</td> </tr> </table> <p>c. What was the duration?</p> <table style="width: 100%; border: none;"> <tr> <td style="padding-left: 20px;">Less than 24 hours</td> <td style="text-align: right;">L</td> </tr> <tr> <td style="padding-left: 20px;">24 hours or more</td> <td style="text-align: right;">M</td> </tr> <tr> <td style="padding-left: 20px;">Unknown</td> <td style="text-align: right;">U</td> </tr> </table>	Right side	R	Left side	L	Both sides	B	Unknown	U	Less than 24 hours	L	24 hours or more	M	Unknown	U
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Left side	L																				
Both sides	B																				
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Less than 24 hours	L																				
24 hours or more	M																				
Unknown	U																				

<p>42.a. Weakness, paresis or paralysis affecting the extremities Yes Y</p> <p style="text-align: right;">No N</p> <div style="border: 1px solid black; display: inline-block; padding: 2px 5px; margin-left: 10px;">Go to Item 43.</div> <p>b. Arm: (Circle one)</p> <table style="width: 100%; border: none;"> <tr> <td style="padding-left: 20px;">Affected, side unspecified</td> <td style="text-align: right;">U</td> </tr> <tr> <td style="padding-left: 20px;">Right Only</td> <td style="text-align: right;">R</td> </tr> <tr> <td style="padding-left: 20px;">Left Only</td> <td style="text-align: right;">L</td> </tr> <tr> <td style="padding-left: 20px;">Both</td> <td style="text-align: right;">B</td> </tr> <tr> <td style="padding-left: 20px;">Neither</td> <td style="text-align: right;">N</td> </tr> </table>	Affected, side unspecified	U	Right Only	R	Left Only	L	Both	B	Neither	N	<p>42.c. Leg: (Circle one)</p> <table style="width: 100%; border: none;"> <tr> <td style="padding-left: 20px;">Affected, side unspecified</td> <td style="text-align: right;">U</td> </tr> <tr> <td style="padding-left: 20px;">Right Only</td> <td style="text-align: right;">R</td> </tr> <tr> <td style="padding-left: 20px;">Left Only</td> <td style="text-align: right;">L</td> </tr> <tr> <td style="padding-left: 20px;">Both</td> <td style="text-align: right;">B</td> </tr> <tr> <td style="padding-left: 20px;">Neither</td> <td style="text-align: right;">N</td> </tr> </table> <p>d. What was the duration of the weakness, paresis, or paralysis affecting the extremities?</p> <table style="width: 100%; border: none;"> <tr> <td style="padding-left: 20px;">Less than 24 hours</td> <td style="text-align: right;">L</td> </tr> <tr> <td style="padding-left: 20px;">24 hours or more</td> <td style="text-align: right;">M</td> </tr> <tr> <td style="padding-left: 20px;">Unknown</td> <td style="text-align: right;">U</td> </tr> </table>	Affected, side unspecified	U	Right Only	R	Left Only	L	Both	B	Neither	N	Less than 24 hours	L	24 hours or more	M	Unknown	U
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Less than 24 hours	L																										
24 hours or more	M																										
Unknown	U																										

Cohort Stroke Abstraction Form

<p>43.a. Loss of sensation, tingling, paresthesias, hemianesthesia affecting the face Yes Y</p> <p style="text-align: right;">No N</p> <div style="border: 1px solid black; display: inline-block; padding: 2px 5px; margin-left: 20px;">Go to Item 44.</div> <p>b. Indicate affected side(s):</p> <table style="width: 100%; border: none;"> <tr><td style="padding-left: 40px;">Right side</td><td style="text-align: right;">R</td></tr> <tr><td style="padding-left: 40px;">Left side</td><td style="text-align: right;">L</td></tr> <tr><td style="padding-left: 40px;">Both sides</td><td style="text-align: right;">B</td></tr> <tr><td style="padding-left: 40px;">Unknown</td><td style="text-align: right;">U</td></tr> </table> <p>c. What was the duration?</p> <table style="width: 100%; border: none;"> <tr><td style="padding-left: 40px;">Less than 24 hours</td><td style="text-align: right;">L</td></tr> <tr><td style="padding-left: 40px;">24 hours or more</td><td style="text-align: right;">M</td></tr> <tr><td style="padding-left: 40px;">Unknown</td><td style="text-align: right;">U</td></tr> </table>	Right side	R	Left side	L	Both sides	B	Unknown	U	Less than 24 hours	L	24 hours or more	M	Unknown	U	<p>44.a. Loss of sensation, tingling, paresthesias, hemianesthesia affecting the extremities</p> <table style="width: 100%; border: none;"> <tr><td style="text-align: right;">Yes</td><td style="text-align: right;">Y</td></tr> <tr><td style="text-align: right;">No</td><td style="text-align: right;">N</td></tr> </table> <div style="border: 1px solid black; display: inline-block; padding: 2px 5px; margin-left: 20px;">Go to Item 45.</div> <p>b. Arm: (Circle one)</p> <table style="width: 100%; border: none;"> <tr><td style="padding-left: 40px;">Affected, side unspecified</td><td style="text-align: right;">U</td></tr> <tr><td style="padding-left: 40px;">Right Only</td><td style="text-align: right;">R</td></tr> <tr><td style="padding-left: 40px;">Left Only</td><td style="text-align: right;">L</td></tr> <tr><td style="padding-left: 40px;">Both</td><td style="text-align: right;">B</td></tr> <tr><td style="padding-left: 40px;">Neither</td><td style="text-align: right;">N</td></tr> </table>	Yes	Y	No	N	Affected, side unspecified	U	Right Only	R	Left Only	L	Both	B	Neither	N
Right side	R																												
Left side	L																												
Both sides	B																												
Unknown	U																												
Less than 24 hours	L																												
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Unknown	U																												
Yes	Y																												
No	N																												
Affected, side unspecified	U																												
Right Only	R																												
Left Only	L																												
Both	B																												
Neither	N																												

<p>44.c. Leg: (Circle one)</p> <table style="width: 100%; border: none;"> <tr><td style="padding-left: 40px;">Affected, side unspecified</td><td style="text-align: right;">U</td></tr> <tr><td style="padding-left: 40px;">Right Only</td><td style="text-align: right;">R</td></tr> <tr><td style="padding-left: 40px;">Left Only</td><td style="text-align: right;">L</td></tr> <tr><td style="padding-left: 40px;">Both</td><td style="text-align: right;">B</td></tr> <tr><td style="padding-left: 40px;">Neither</td><td style="text-align: right;">N</td></tr> </table> <p>d. What was the total duration of the loss of sensation, tingling, paresthesias, hemianesthesia affecting the extremities?</p> <table style="width: 100%; border: none;"> <tr><td style="padding-left: 40px;">Less than 24 hours</td><td style="text-align: right;">L</td></tr> <tr><td style="padding-left: 40px;">24 hours or more</td><td style="text-align: right;">M</td></tr> <tr><td style="padding-left: 40px;">Unknown</td><td style="text-align: right;">U</td></tr> </table>	Affected, side unspecified	U	Right Only	R	Left Only	L	Both	B	Neither	N	Less than 24 hours	L	24 hours or more	M	Unknown	U	<p>45.a. Gait disturbance Yes Y</p> <p style="text-align: right;">No N</p> <div style="border: 1px solid black; display: inline-block; padding: 2px 5px; margin-left: 20px;">Go to Item 46.</div> <p>b. What was the duration?</p> <table style="width: 100%; border: none;"> <tr><td style="padding-left: 40px;">Less than 24 hours</td><td style="text-align: right;">L</td></tr> <tr><td style="padding-left: 40px;">24 hours or more</td><td style="text-align: right;">M</td></tr> <tr><td style="padding-left: 40px;">Unknown</td><td style="text-align: right;">U</td></tr> </table> <p>46.a. Cranial Nerve III Palsy: Yes Y</p> <p style="text-align: right;">No N</p>	Less than 24 hours	L	24 hours or more	M	Unknown	U
Affected, side unspecified	U																						
Right Only	R																						
Left Only	L																						
Both	B																						
Neither	N																						
Less than 24 hours	L																						
24 hours or more	M																						
Unknown	U																						
Less than 24 hours	L																						
24 hours or more	M																						
Unknown	U																						

<p>46.b. Other neurologic symptom: Yes Y</p> <p style="text-align: right;">No N</p> <p>If yes, specify: _____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>c. Did any neurologic sign/symptom last > 24 hours or did death occur < 24 hours after onset of new sign/symptom? Yes Y</p> <p style="text-align: right;">No N</p>	<p>C. LABORATORY TESTS PERFORMED THIS ADMISSION:</p> <p>47.a. Was lumbar puncture performed? Yes Y</p> <p style="text-align: right;">No N</p> <div style="border: 1px solid black; padding: 2px; display: inline-block; margin-bottom: 10px;">Go to Item 48.</div> <p>Record for the first nontraumatic LP after onset of symptoms or first LP if all traumatic.</p> <p>b. Date: <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/></p> <p style="text-align: center;">m m d d y y y y</p> <p>c. Traumatic? Yes Y</p> <p style="text-align: right;">No N</p>
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<p>47.d. Appearance: .. Clear fluid C</p> <p style="text-align: right;">Xanthochromic X</p> <p style="text-align: right;">Gross blood B</p> <p style="text-align: right;">Unknown U</p> <p>e. Microscopic RBCs (Tube 1):</p> <p style="text-align: right;">Zero RBCs cu.mm. Z</p> <p style="text-align: right;">1-999 RBC cu.mm. L</p> <p style="text-align: right;">1000+ RBC cu.mm. G</p> <p style="text-align: right;">Unknown U</p>	<p>47.f. Microscopic RBCs (Tube 2):</p> <p style="text-align: right;">No tube N</p> <p style="text-align: right;">Zero RBCs cu.mm. Z</p> <p style="text-align: right;">1-999 RBC cu.mm. L</p> <p style="text-align: right;">1000+ RBC cu.mm. G</p> <p style="text-align: right;">Unknown U</p> <p>g. Lumbar puncture diagnosis:</p> <p style="text-align: right;">Normal Study A</p> <p style="text-align: right;">Exclusionary pathology B</p> <p style="text-align: right;">Unrelated pathology or traumatic tap C</p> <p style="text-align: right;">Bloody (non-traumatic) or xanthochromic D</p>
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<p>48.a. Was cerebral angiography performed? Yes Y</p> <p style="margin-left: 100px;">No N</p> <div style="border: 1px solid black; display: inline-block; padding: 2px 5px; margin-left: 10px;">Go to Item 49.</div> <p style="margin-left: 100px;">_____</p> <p>b. Date: <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/></p> <p style="margin-left: 40px;">m m d d y y y y</p> <p>c. Angiography diagnosis</p> <table style="width: 100%; border: none;"> <tr><td>Normal study</td><td style="text-align: right;">A</td></tr> <tr><td>Exclusionary pathology</td><td style="text-align: right;">B</td></tr> <tr><td>Unrelated pathology</td><td style="text-align: right;">C</td></tr> <tr><td>Ruptured aneurysm</td><td style="text-align: right;">D</td></tr> <tr><td>Avascular mass without evidence ruptured aneurysm/AVM</td><td style="text-align: right;">E</td></tr> </table>	Normal study	A	Exclusionary pathology	B	Unrelated pathology	C	Ruptured aneurysm	D	Avascular mass without evidence ruptured aneurysm/AVM	E	<p>48.d. Stenosis - Right internal carotid</p> <table style="width: 100%; border: none;"> <tr><td>Not studied</td><td style="text-align: right;">A</td></tr> <tr><td>0-29% stenosis</td><td style="text-align: right;">B</td></tr> <tr><td>30-69% stenosis</td><td style="text-align: right;">C</td></tr> <tr><td>70-89% stenosis</td><td style="text-align: right;">D</td></tr> <tr><td>≥ 90% stenosis</td><td style="text-align: right;">E</td></tr> </table> <div style="border: 1px solid black; display: inline-block; padding: 2px 5px; margin-left: 10px;">If B, C, D, or E, specify percentage.</div> <p style="margin-left: 10px;">_____ %</p> <p>d.1. <input type="text"/> <input type="text"/> <input type="text"/> %</p> <p>e. Stenosis - Left internal carotid</p> <table style="width: 100%; border: none;"> <tr><td>Not studied</td><td style="text-align: right;">A</td></tr> <tr><td>0-29% stenosis</td><td style="text-align: right;">B</td></tr> <tr><td>30-69% stenosis</td><td style="text-align: right;">C</td></tr> <tr><td>70-89% stenosis</td><td style="text-align: right;">D</td></tr> <tr><td>≥ 90% stenosis</td><td style="text-align: right;">E</td></tr> </table> <div style="border: 1px solid black; display: inline-block; padding: 2px 5px; margin-left: 10px;">If B, C, D, or E, specify percentage.</div> <p style="margin-left: 10px;">_____ %</p> <p>e.1. <input type="text"/> <input type="text"/> <input type="text"/> %</p>	Not studied	A	0-29% stenosis	B	30-69% stenosis	C	70-89% stenosis	D	≥ 90% stenosis	E	Not studied	A	0-29% stenosis	B	30-69% stenosis	C	70-89% stenosis	D	≥ 90% stenosis	E
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70-89% stenosis	D																														
≥ 90% stenosis	E																														

<p>49.a. Was at least one CT scan performed during this hospitalization? Yes Y</p> <p style="margin-left: 100px;">No N</p> <div style="border: 1px solid black; display: inline-block; padding: 2px 5px; margin-left: 10px;">Go to Item 51.</div> <p style="margin-left: 100px;">_____</p> <p>b. What was approximate time between symptom onset and the first CT scan?</p> <table style="width: 100%; border: none;"> <tr><td>Less than 24 hours</td><td style="text-align: right;">A</td></tr> <tr><td>24-48 hours</td><td style="text-align: right;">B</td></tr> <tr><td>Greater than 48 hours</td><td style="text-align: right;">C</td></tr> <tr><td>Unknown</td><td style="text-align: right;">U</td></tr> </table>	Less than 24 hours	A	24-48 hours	B	Greater than 48 hours	C	Unknown	U	<p>49.c. Date of first CT scan: <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/></p> <p style="margin-left: 40px;">m m d d y y y y</p> <p>d. First CT diagnosis</p> <table style="width: 100%; border: none;"> <tr><td>Normal study</td><td style="text-align: right;">A</td></tr> <tr><td>Exclusionary pathology</td><td style="text-align: right;">B</td></tr> <tr><td>Unrelated pathology</td><td style="text-align: right;">C</td></tr> <tr><td>Normal study, but done within 48 hours of symptom onset</td><td style="text-align: right;">D</td></tr> <tr><td>Subarachnoid hemorrhage</td><td style="text-align: right;">E</td></tr> <tr><td>Intracerebral hematoma</td><td style="text-align: right;">F</td></tr> <tr><td>Ischemic infarction, with no evidence of hemorrhage</td><td style="text-align: right;">G</td></tr> </table>	Normal study	A	Exclusionary pathology	B	Unrelated pathology	C	Normal study, but done within 48 hours of symptom onset	D	Subarachnoid hemorrhage	E	Intracerebral hematoma	F	Ischemic infarction, with no evidence of hemorrhage	G
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Intracerebral hematoma	F																						
Ischemic infarction, with no evidence of hemorrhage	G																						

<p>50.a. Were two or more CT scans performed during this hospitalization? Yes Y</p> <p style="text-align: right;">No N</p> <div style="border: 1px solid black; display: inline-block; padding: 2px 5px; margin-top: 10px;">Go to Item 51.</div> <p style="margin-left: 100px;">└───┬───</p> <p>b. What was approximate time between symptom onset and the last CT scan?</p> <table style="width: 100%; border: none;"> <tr> <td style="width: 80%;">Less than 24 hours</td> <td style="width: 20%;">A</td> </tr> <tr> <td>24-48 hours</td> <td>B</td> </tr> <tr> <td>Greater than 48 hours</td> <td>C</td> </tr> <tr> <td>Unknown</td> <td>U</td> </tr> </table>	Less than 24 hours	A	24-48 hours	B	Greater than 48 hours	C	Unknown	U	<p>50.c. Date of last CT scan during this hospitalization:</p> <table style="margin-left: auto; margin-right: auto; border: none;"> <tr> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="width: 10px; text-align: center;">/</td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="width: 10px; text-align: center;">/</td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> </tr> <tr> <td style="text-align: center;">m</td> <td style="text-align: center;">m</td> <td></td> <td style="text-align: center;">d</td> <td style="text-align: center;">d</td> <td></td> <td style="text-align: center;">y</td> <td style="text-align: center;">y</td> <td style="text-align: center;">y</td> <td style="text-align: center;">y</td> </tr> </table> <p>50.d. Last CT diagnosis</p> <table style="width: 100%; border: none;"> <tr> <td style="width: 80%;">Normal study</td> <td style="width: 20%;">A</td> </tr> <tr> <td>Exclusionary pathology</td> <td>B</td> </tr> <tr> <td>Unrelated pathology</td> <td>C</td> </tr> <tr> <td>Normal study, but done within 48 hours of symptom onset</td> <td>D</td> </tr> <tr> <td>Subarachnoid hemorrhage</td> <td>E</td> </tr> <tr> <td>Intracerebral hematoma</td> <td>F</td> </tr> <tr> <td>Ischemic infarction, with no evidence of hemorrhage</td> <td>G</td> </tr> </table>			/			/					m	m		d	d		y	y	y	y	Normal study	A	Exclusionary pathology	B	Unrelated pathology	C	Normal study, but done within 48 hours of symptom onset	D	Subarachnoid hemorrhage	E	Intracerebral hematoma	F	Ischemic infarction, with no evidence of hemorrhage	G
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m	m		d	d		y	y	y	y																																		
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Subarachnoid hemorrhage	E																																										
Intracerebral hematoma	F																																										
Ischemic infarction, with no evidence of hemorrhage	G																																										

<p>51.a. Were any other CT scans performed after the onset of acute neurologic symptoms/signs, but before admission to this hospital? Yes Y</p> <p style="text-align: right;">No N</p> <div style="border: 1px solid black; display: inline-block; padding: 2px 5px; margin-top: 10px;">Go to Item 52.</div> <p style="margin-left: 100px;">└───┬───</p> <p>b. What was approximate time between symptom onset and the first CT scan prior to this hospitalization?</p> <table style="width: 100%; border: none;"> <tr> <td style="width: 80%;">Less than 24 hours</td> <td style="width: 20%;">A</td> </tr> <tr> <td>24-48 hours</td> <td>B</td> </tr> <tr> <td>Greater than 48 hours</td> <td>C</td> </tr> <tr> <td>Unknown</td> <td>U</td> </tr> </table>	Less than 24 hours	A	24-48 hours	B	Greater than 48 hours	C	Unknown	U	<p>51.c. Date of pre-admission CT scan:</p> <table style="margin-left: auto; margin-right: auto; border: none;"> <tr> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="width: 10px; text-align: center;">/</td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="width: 10px; text-align: center;">/</td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> </tr> <tr> <td style="text-align: center;">m</td> <td style="text-align: center;">m</td> <td></td> <td style="text-align: center;">d</td> <td style="text-align: center;">d</td> <td></td> <td style="text-align: center;">y</td> <td style="text-align: center;">y</td> <td style="text-align: center;">y</td> <td style="text-align: center;">y</td> </tr> </table> <p>d. Pre-admission CT diagnosis</p> <table style="width: 100%; border: none;"> <tr> <td style="width: 80%;">Normal study</td> <td style="width: 20%;">A</td> </tr> <tr> <td>Exclusionary pathology</td> <td>B</td> </tr> <tr> <td>Unrelated pathology</td> <td>C</td> </tr> <tr> <td>Normal study, but done within 48 hours of symptom onset</td> <td>D</td> </tr> <tr> <td>Subarachnoid hemorrhage</td> <td>E</td> </tr> <tr> <td>Intracerebral hematoma</td> <td>F</td> </tr> <tr> <td>Ischemic infarction, with no evidence of hemorrhage</td> <td>G</td> </tr> </table>			/			/					m	m		d	d		y	y	y	y	Normal study	A	Exclusionary pathology	B	Unrelated pathology	C	Normal study, but done within 48 hours of symptom onset	D	Subarachnoid hemorrhage	E	Intracerebral hematoma	F	Ischemic infarction, with no evidence of hemorrhage	G
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52.a. Was Magnetic Resonance Imaging (MRI) including the head performed? ... Yes Y
 No N

Go to Item 53.

b. What was approximate time between symptom onset and the MRI? (If > 1 MRI, pick the most meaningful.)

Less than 24 hours A
 24-48 hours B
 Greater than 48 hours C
 Unknown U

c. Date: / /
 m m / d d / y y y y

52.d. MRI diagnosis:

Normal study A
 Exclusionary pathology B
 Unrelated pathology C
 Normal study, but done within 48 hours of symptom onset D
 Subarachnoid hemorrhage E
 Intracerebral hematoma F
 Ischemic infarction, with no evidence of hemorrhage G

53.a. Was B-Mode and/or Doppler Ultrasound on carotid(s) performed? Yes Y
 No N

Go to Item 54.

b. Date: / /
 m m / d d / y y y y

53.c. Ultrasound diagnosis - Right internal carotid

Not studied A
 0-29% stenosis B
 30-69% stenosis C
 70-89% stenosis D
 ≥ 90% stenosis E
 "Hemodynamically significant lesion" F

If B, C, D, or E, specify percentage:

c.1. %

53.d. Ultrasound diagnosis - Left internal carotid

Not studied A
 0-29% stenosis B
 30-69% stenosis C
 70-89% stenosis D
 ≥ 90% stenosis E
 "Hemodynamically significant lesion" F

If B, C, D, or E, specify percentage:

d.1. %

54.a. Was a craniotomy performed (post event)? Yes Y
 No N

Go to Item 55.

b. Date: / /
 m m / d d / y y y y

<p>54.c. Craniotomy diagnosis</p> <table style="width: 100%; border: none;"> <tr> <td style="padding-left: 20px;">No pathology</td> <td style="text-align: right;">A</td> </tr> <tr> <td style="padding-left: 20px;">Exclusionary pathology</td> <td style="text-align: right;">B</td> </tr> <tr> <td style="padding-left: 20px;">Unrelated pathology</td> <td style="text-align: right;">C</td> </tr> <tr> <td style="padding-left: 20px;">Ruptured aneurysm</td> <td style="text-align: right;">D</td> </tr> <tr> <td style="padding-left: 20px;">Intracerebral hematoma</td> <td style="text-align: right;">E</td> </tr> <tr> <td style="padding-left: 20px;">Infarction</td> <td style="text-align: right;">F</td> </tr> </table>	No pathology	A	Exclusionary pathology	B	Unrelated pathology	C	Ruptured aneurysm	D	Intracerebral hematoma	E	Infarction	F	<p>55.a. Was an autopsy performed? Yes Y</p> <p style="padding-left: 100px;">No N</p> <div style="border: 1px solid black; display: inline-block; padding: 2px 5px; margin-left: 50px;">Go to Item 56.</div> <p>C. Autopsy diagnosis</p> <table style="width: 100%; border: none;"> <tr> <td style="padding-left: 20px;">b. Recent bleeding of saccular aneurysm</td> <td style="text-align: right;">Yes Y</td> <td style="text-align: right;">No N</td> </tr> <tr> <td style="padding-left: 20px;">c. Intracerebral hemorrhage</td> <td style="text-align: right;">Yes Y</td> <td style="text-align: right;">No N</td> </tr> <tr> <td style="padding-left: 20px;">d. Recent nonhemorrhagic infarction of brain ...</td> <td style="text-align: right;">Yes Y</td> <td style="text-align: right;">No N</td> </tr> </table>	b. Recent bleeding of saccular aneurysm	Yes Y	No N	c. Intracerebral hemorrhage	Yes Y	No N	d. Recent nonhemorrhagic infarction of brain ...	Yes Y	No N
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d. Recent nonhemorrhagic infarction of brain ...	Yes Y	No N																				

<p>55.e. Recent infarcted area (bland or hemorrhagic) Yes Y</p> <p style="padding-left: 100px;">No N</p> <p>f. Source of emboli in a vessel of any organ, or an embolus in the brain Yes Y</p> <p style="padding-left: 100px;">No N</p> <p>D. ADMINISTRATIVE INFORMATION:</p> <p>56. Abstractor Number: <input style="width: 20px; height: 15px;" type="text"/> <input style="width: 20px; height: 15px;" type="text"/> <input style="width: 20px; height: 15px;" type="text"/></p> <p>57. Date Abstracted: <input style="width: 20px; height: 15px;" type="text"/> <input style="width: 20px; height: 15px;" type="text"/> / <input style="width: 20px; height: 15px;" type="text"/> <input style="width: 20px; height: 15px;" type="text"/> / <input style="width: 20px; height: 15px;" type="text"/> <input style="width: 20px; height: 15px;" type="text"/> <input style="width: 20px; height: 15px;" type="text"/> <input style="width: 20px; height: 15px;" type="text"/></p> <p style="padding-left: 40px;">m m d d Y Y Y Y</p>	<p>E. ADDITIONAL FORMS TO BE FILLED OUT:</p> <p><i>Autofilled by DMS</i></p> <table style="width: 100%; border: none;"> <tr> <td style="padding-left: 20px;">Form</td> <td style="padding-left: 20px;">Criteria based on this form</td> <td></td> <td></td> </tr> </table> <p><i>*Question 58 Removed. (See CHI8).</i></p> <table style="width: 100%; border: none;"> <tr> <td style="padding-left: 20px;">59. DTH</td> <td style="padding-left: 20px;">Item 15 = D</td> <td style="text-align: right;">Yes Y</td> <td style="text-align: right;">No N</td> </tr> <tr> <td style="padding-left: 20px;">60. HRA</td> <td style="padding-left: 20px;">Item 29a = Y ...</td> <td style="text-align: right;">Yes Y</td> <td style="text-align: right;">No N</td> </tr> <tr> <td style="padding-left: 20px;">61. Xerox Autopsy Report</td> <td style="padding-left: 20px;">Item 55a = Y ...</td> <td style="text-align: right;">Yes Y</td> <td style="text-align: right;">No N</td> </tr> <tr> <td style="padding-left: 20px;">62. CFD</td> <td style="padding-left: 20px;">Item 2 = Y ...</td> <td style="text-align: right;">No N</td> <td style="text-align: right;">No N</td> </tr> </table> <p><i>*Items 63, 63a.1-63a.6 deleted and captured on the CEL form*</i></p>	Form	Criteria based on this form			59. DTH	Item 15 = D	Yes Y	No N	60. HRA	Item 29a = Y ...	Yes Y	No N	61. Xerox Autopsy Report	Item 55a = Y ...	Yes Y	No N	62. CFD	Item 2 = Y ...	No N	No N
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