



Cohort Stroke Abstraction Form

FORM CODE: STR
VERSION: F 5/6/2019

ID NUMBER:

CONTACT YEAR:

LAST NAME:

INITIALS:

Instructions: The Stroke Form is completed for each eligible Cohort hospitalization for stroke as determined by the Cohort Eligibility Form. Event ID must be entered above. *NOTE: In this version Questions 3a-13 are deleted. For ICD diagnoses and procedure codes, demographics, date and time of arrival at hospital, or transfer information please see the CHI form*

Cohort Stroke Abstraction Form

<p>A. HOSPITAL INFORMATION</p> <p>1.a. Hospital number: <input type="text"/> <input type="text"/></p> <p>1.b. Medical record number:</p> <p><input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <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>2. Has the hospital chart for this event been located?.....Yes Y</p> <p style="margin-left: 100px;">No N</p> <div style="border: 1px solid black; display: inline-block; padding: 2px; margin-left: 50px;">Go to Item 56</div>	<p><i>**Question 3-13 deleted. For ICD codes, demographics, date and time of arrival at this hospital, transfer information see the CHI form.**</i></p> <p>14. Date of discharge or death:</p> <p style="text-align: center;"> <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> m m d d y y y y </p> <p>15. Discharged Alive A</p> <p style="margin-left: 100px;">Dead D</p> <div style="border: 1px solid black; display: inline-block; padding: 2px; margin-left: 50px;">Go to Item 17</div>
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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, I65.x, I66.x, or I67.x?

Yes Y → Go to Item 19a.

No... N

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

Go to Item 56 No N

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

Go to Item 21 No N

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

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<p>27. Month/year of first and most recent TIA:</p> <p>a. First: <table border="1" style="display: inline-table; border-collapse: collapse; text-align: center; width: 100px; height: 20px;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table> <div style="display: flex; justify-content: space-around; width: 100%; font-size: small;"> m m y y y y </div> <p>b. Most Recent: <table border="1" style="display: inline-table; border-collapse: collapse; text-align: center; width: 100px; height: 20px;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table> <div style="display: flex; justify-content: space-around; width: 100%; font-size: small;"> m m y y y y </div> <p>28. History of myocardial infarction prior to the onset of this event: Yes Y No N Unknown U</p> </p></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 No N Unknown U</p> <p>b. Intracardiac thrombus or intracardiac tumor (myxoma) Yes Y No N</p>

<p>29.c. Atrial fibrillation or flutter Yes Y No N</p> <p>d. Rheumatic heart disease, valvular heart disease (e.g., mitral stenosis, artificial heart valve) Yes Y No N</p> <p>e. Subacute bacterial endocarditis Yes Y No N</p> <p>f. Systemic embolus (including angiographically identified embolus) ... Yes Y No N</p>	<p>29.g.1. Hematologic abnormality: hypercoagulable state e.g., DIC Yes Y No N</p> <p>g.2. Hematologic abnormality: hemorrhagic e.g., leukemia, thrombocytopenia, DIC Yes Y No N</p> <p>h. Brain tumor (benign or malignant, primary or metastatic) Yes Y No N</p>
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<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-bottom: 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-bottom: 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
Less than 24 hours	L																				
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Both sides	B																				
Unknown	U																				
Less than 24 hours	L																				
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<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-bottom: 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																										
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<p>43.a. Loss of sensation, tingling, paresthesias, hemianesthesia affecting the face Yes Y No N</p> <p>Go to Item 44.</p> <p>b. Indicate affected side(s):</p> <table style="width: 100%;"> <tr><td>Right side</td><td>R</td></tr> <tr><td>Left side</td><td>L</td></tr> <tr><td>Both sides</td><td>B</td></tr> <tr><td>Unknown</td><td>U</td></tr> </table> <p>c. What was the duration?</p> <table style="width: 100%;"> <tr><td>Less than 24 hours</td><td>L</td></tr> <tr><td>24 hours or more</td><td>M</td></tr> <tr><td>Unknown</td><td>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%;"> <tr><td>Yes</td><td>Y</td></tr> <tr><td>No</td><td>N</td></tr> </table> <p>Go to Item 45.</p> <p>b. Arm: (Circle one)</p> <table style="width: 100%;"> <tr><td>Affected, side unspecified</td><td>U</td></tr> <tr><td>Right Only</td><td>R</td></tr> <tr><td>Left Only</td><td>L</td></tr> <tr><td>Both</td><td>B</td></tr> <tr><td>Neither</td><td>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																												
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Unknown	U																												
Less than 24 hours	L																												
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Affected, side unspecified	U																												
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Neither	N																												

<p>44.c. Leg: (Circle one)</p> <table style="width: 100%;"> <tr><td>Affected, side unspecified</td><td>U</td></tr> <tr><td>Right Only</td><td>R</td></tr> <tr><td>Left Only</td><td>L</td></tr> <tr><td>Both</td><td>B</td></tr> <tr><td>Neither</td><td>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%;"> <tr><td>Less than 24 hours</td><td>L</td></tr> <tr><td>24 hours or more</td><td>M</td></tr> <tr><td>Unknown</td><td>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 No N</p> <p>Go to Item 46.</p> <p>b. What was the duration?</p> <table style="width: 100%;"> <tr><td>Less than 24 hours</td><td>L</td></tr> <tr><td>24 hours or more</td><td>M</td></tr> <tr><td>Unknown</td><td>U</td></tr> </table> <p>46.a. Cranial Nerve III Palsy: Yes Y 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																						
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Unknown	U																						
Less than 24 hours	L																						
24 hours or more	M																						
Unknown	U																						

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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; margin-left: 10px;">Go to Item 49.</div> <p style="margin-left: 10px;">└───┬───┘</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 border="0" style="width: 100%;"> <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 border="0" style="width: 100%;"> <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; margin: 5px 0;">If B, C, D, or E, specify percentage.</div> <p>d.1. <input type="text"/> <input type="text"/> <input type="text"/> %</p> <p>e. Stenosis - Left internal carotid</p> <table border="0" style="width: 100%;"> <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; margin: 5px 0;">If B, C, D, or E, specify percentage.</div> <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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≥ 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; margin-left: 10px;">Go to Item 51.</div> <p style="margin-left: 10px;">└───┬───┘</p> <p>b. What was approximate time between symptom onset and the first CT scan?</p> <table border="0" style="width: 100%;"> <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 border="0" style="width: 100%;"> <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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Ischemic infarction, with no evidence of hemorrhage	G																						

Cohort Stroke Abstraction Form)

<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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<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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Cohort Stroke Abstraction Form

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

