SCOTTISH STROKE CARE AUDIT
THROMBOLYSIS CORE DATASET
DEFINITIONS AND VALUES
Version 4.1 Updated November 2016
For review November 2017

(This form would be completed in addition to the inpatient form <u>only for those patients who have undergone thrombolysis or clot retrieval</u> therefore all demographics etc. already entered)

DATA ITEMS *(26 excluding demographics)*	DEFINITIONS	VALUES *(Information required on proforma or options available on SSCAS)*
Pre Thrombolysis		
1. Source of referral to thrombolysing hospital	Record the type of organisation, service, care professional or other individual referring the patient to the thrombolysing hospital.	Drop down pick list of referral sources: *999, GP, NHS24, other Out of Hours, self, this hospital, other hospital, not recorded, unknown, ambiguous/ illegible, other*
2. Was the patient thrombolysed for a stroke event other than the index stroke event?	Record yes if the patient was **thrombolysed for a stroke event other than the index stroke event**. *NB: By index stroke event we mean the event for which the patient has been entered in the inpatient audit.*	Enter yes, no, not recorded, unknown, or ambiguous/ illegible
3. Method of assessment used by most senior clinician prior to thrombolysis	Record the method of assessment used e.g. face to face, telephone etc. by the most senior clinician prior to thrombolysis. *This information is important to monitor telemedicine developments.*	Drop down pick list of methods of assessment: *Face to face, telephone, video conference, web conference, telemedicine, not recorded, unknown, ambiguous/ illegible, other*
4. Method of interpretation of the brain imaging prior to thrombolysis	Record the method of interpretation used.	Drop down pick list of methods of interpretation: *On site, remote, not recorded, unknown, ambiguous/ illegible*
5. Was National Institutes of Health Stroke Scale (NIHSS) recorded pre-treatment?	Record yes if NIHSS score was recorded pre-treatment.	Enter yes, no, not recorded, unknown, ambiguous/ illegible
6. If yes, record pre-treatment score	Record pre-treatment score (Score 0-42). *NB: This should be the total score recorded*	Enter pre-treatment score. **The permitted range is 0 to 42.**
7. Does the patient have a diagnosis of diabetes recorded?	Record yes if the patient has a diagnosis of diabetes clearly documented in their notes.	Enter yes, no, not recorded, unknown, ambiguous/ illegible
8. Was a pre-treatment glucose recorded?	Record yes if a glucose measurement was recorded immediately pre-treatment.	Enter yes, no, not recorded, unknown, ambiguous/ illegible

9. If yes, record pre-treatment glucose	Enter glucose measurement recorded immediately pre-treatment. (Range is 0.5 to 50)	Enter glucose measurement (mmol/l) reading recorded immediately pre-treatment. Enter the measurement as it is recorded in the notes. **The permitted range is 0.5 to 50.**
10. Was blood pressure recorded immediately pre-treatment?	Record yes if blood pressure was recorded immediately pre-treatment.	Enter yes, no, not recorded, unknown, ambiguous/ illegible
11. If yes, record pre-treatment blood pressure	Enter blood pressure reading recorded immediately pre-treatment.	Enter blood pressure reading recorded immediately pre-treatment. **The permitted ranges are:** **Systolic Blood pressure between 50 and 300.** **Diastolic Blood pressure between 20 and 200.**
12. Evidence of new haemorrhage on pre-thrombolysis brain imaging	Record yes if evidence of a new haemorrhage is clearly documented in the pre-thrombolysis brain imaging (CT or MRI scan) results. Use information from the formal report, the initial hand written notes are not sufficient.	Enter yes, no, not recorded, unknown, ambiguous/ illegible
Thrombolysis		
13. Type of thrombolysis given	Record the type of thrombolysis given following current cerebrovascular event, e.g. intravenous, intra arterial or clot retrieval etc. If the patient is enrolled in a clinical trial where thrombolysis treatment is allocated, and the allocation is blinded so that it is impossible to tell whether the patient is actually prescribed thrombolysis or not, code 'maybe yes' and complete the date and time appropriately for the start of that treatment.	Drop down pick list of types of thrombolysis: *None, intravenous, intravenous + intra arterial, intravenous + clot retrieval, intravenous + intra arterial + clot retrieval, intra arterial, intra arterial + clot retrieval, clot retrieval, maybe yes (blinded treatment allocated in clinical trial – regardless of method), not recorded, unknown, ambiguous/ illegible*
14. Date and time when thrombolysis treatment was started	**Enter the date and time when thrombolysis treatment started, i.e. when the bolus was given or the clot retrieval procedure commenced.**	**Enter date *(DD/MM/CCYY)*** **Enter time *(HH/MM)*** Enter 8 characters (DDMMCCYY) You do not need to enter the "/" If date is not recorded then enter 07/07/0707. If the time is not recorded then enter 77:77. If date is unknown then enter 08/08/0808. If the time is unknown then enter 88:88. If the date is illegible then enter 09/09/0909. If the time is illegible then enter 99:99.

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15. Where was thrombolysis given?	Record the name of the hospital where thrombolysis was given. (Information stored will include hospital code)	Drop down pick list of hospitals from a SSCA Reference File. Hospitals from the user's Health Board should be at the top of the list. *(NB: Please contact the SSCA central team if you require a hospital to be added or taken off this list)*
16. Thrombolysis completed	Record yes if thrombolysis treatment regime was completed.	Enter yes, no, not recorded, unknown, ambiguous/ illegible
17. If not completed, why not?	Enter reason, e.g. re-analysis of brain imaging, seizure, deterioration of clinical state etc. If the reason why thrombolysis was not completed is not on the drop down list there is an option to select other and add information in the text box.	Enter reason from drop down pick list: *Re-analysis of brain imaging, seizure, deterioration of clinical state, technical issues around infusion, nausea/ vomiting, ADR (bruising, other extra cranial bleeding, intracranial bleeding with clinical worsening, intracranial bleeding without clinical worsening, angioedema), increased BP, cardiac event, e.g. arrhythmia, death, not recorded, unknown, ambiguous/ illegible, other (enter details of 'other' in text box)*
18. Record adverse reaction(s)	Add a tick against each relevant adverse reaction (the user may choose more than one). If not listed, use 'other' and enter details in text box. Record any adverse reaction(s) relating to thrombolysis treatment clearly documented in the patients records.	Enter a tick against each relevant adverse reaction from the list provided: *Bruising, other extra cranial bleeding, intracranial bleeding with clinical worsening, intracranial bleeding without clinical worsening, angioedema, other (enter details of 'other' in text box)*

Post Thrombolysis		
19. **Repeat** brain imaging performed post thrombolysis	Record yes if repeat brain imaging was performed post thrombolysis.	Enter yes, no, not recorded, unknown, ambiguous/ illegible
20. Date and time of **repeat** brain imaging	Record the date and time of the repeat brain imaging performed post thrombolysis.	Enter date *(DD/MM/CCYY)* Enter time *(HH/MM)* Enter 8 characters (DDMMCCYY) You do not need to enter the "/" If date is not recorded then enter 07/07/0707. If the time is not recorded then enter 77:77. If date is unknown then enter 08/08/0808. If the time is unknown then enter 88:88. If the date is illegible then enter 09/09/0909. If the time is illegible then enter 99:99.
21. Where was **repeat** brain imaging performed?	Record the name of the hospital where repeat brain imaging was performed. (Information stored will include hospital code)	Drop down pick list of hospitals from a SSCA Reference File. Hospitals from the user's Health Board should be at the top of the list. *(NB: Please contact the SSCA central team if you require a hospital to be added or taken off this list)*
22. Evidence of	Record yes if evidence of a new haemorrhage is clearly	Enter yes, no, not recorded, unknown,

new haemorrhage on **repeat** brain imaging?	documented on repeat brain imaging (CT or MRI scan) results post thrombolysis. Use information from the formal report, <u>the initial hand written notes are not sufficient</u>.	ambiguous/ illegible
23. Final diagnosis of presenting complaint	Record the most likely diagnosis of the presenting acute neurological event which led to the administration of thrombolysis which takes account of all information available to the clinicians during the hospital admission, e.g. ischaemic stroke, TIA, migraine, epilepsy etc. *NB: In SSCA we report the performance related to the management of patients with definite or probable cerebrovascular disease - primarily strokes and TIAs. For the audit of thrombolysis, the vast majority of patients receiving the treatment will have a final diagnosis of stroke, or TIA if they recover very rapidly. However, inevitably because the diagnosis and treatment has to be given so rapidly some patients will receive thrombolysis who turn out to have non-stroke diagnoses. For instance the final diagnosis may turn out to be migraine, functional weakness or a range of other stroke mimics. It is important from the audits perspective to capture data on the patients treated who have a final diagnosis of non stroke.*	Drop down pick list *Ischaemic stroke, TIA, migraine, epilepsy, functional, worsening of old deficits due to inter-current illness, not recorded, unknown, ambiguous/ illegible, other*
24. Was NIHSS recorded post-treatment?	Record yes if NIHSS score was recorded post treatment, i.e. within 48 hours following treatment.	Enter yes, no, not recorded, unknown, ambiguous/ illegible
25. If yes, record score post-treatment	Enter post-treatment score (recorded within 48 hours following treatment) (Score 0-42). *NB: This should be the total score recorded*	Enter post-treatment score. **The permitted range is 0 to 42.**
26. When was NIHSS recorded post-treatment?	If NIHSS score has been done enter the date the score was recorded post treatment.	Enter date *(DD/MM/CCYY)* Enter 8 characters (DDMMCCYY) You do not need to enter the "/" If date is not recorded then enter 07/07/0707. If date is unknown then enter 08/08/0808. If the date is illegible then enter 09/09/0909.