## **APPENDIX A:**

# **SNF/IRF PATIENT SCREENING FORM**

		LABEL 01	Patien	t's Study	Status
Date	of Admission to SNF/IRF:		1 ☐ Ineligib	ole	
	hth Day Year		2 □ Eligible	e	
Month Day Year <b>Age:</b>   _   _		SNF/IRF PATIENT	Patient/Proxy must be interviewed by: (7 days after Admission to your		
Sex:	□ Male □ Female	SCREENING FORM	Facility)		
		SOREEI MICE I ORIVI			<u>                                     </u>
ADN	IISSION CRITERIA	•			
			CIRCLE YES		
1. 2a.		ospital discharge diagnosis or primary	. Yes	No⇒	CHECK BOX 1
za.	post-acute care admitting diagnosi	is a Study Specific ICD code? (Codes		No	AND END REVIE
			CODE THEN, GO TO Q3)		
2b.	Was the patient classified in the ac	cute hospital with a DRG of 014 or 015?		No	
2c.	care facility/agency "stroke" or "CV may indicate an admission for stro dysphasia, or dysphagia, etc. If pre discharge diagnosis was a study s	ndary admitting diagnosis to this health 'A"? If not, review other diagnoses that ke i.e. abnormality of gait, hemiplegia, esent, verify that the acute hospital pecific ICD code. (Codes are on the		N <sub>2</sub> N	
	back of the page—circle)		Yes (GO TO Q3)		CHECK BOX 1 AND END REVIE
3.	, ,	nysical, occupational, and/or speech		No	
4.	Is the patient English-speaking?		. Yes	No	
5. 6.		ee-for-service benefits (not HMO)? a acute stroke (first or recurrent) within	Yes	No	
	the prior 30 days?		. Yes	No	
7.	(e.g., the patient has not been see	ng facility, or home health agency for the	. Yes	No	
8.	Was the patient admitted to this fa	cility within the prior 7 days?	. Yes	No	
8a.	What are the answers to question	ons 3 through 8?			
	ALL ARE "YES"	01 <b>⇒ GO TO Q.9</b>			
	ONE OR MORE ARE "NO"	00 <b>⇒ INELIGIBLE, CHECK BOX 1 AE</b>	BOVE AND ⇒ G	O TO Q.	9
				(CIDCI E	YES OR NO)
9.	Is the patient comatose?			Yes	No
	(e.g., does not respond to interper	,			
10.	Was the patient a long-term nursing (immediately prior to his or her reconstruction)	ng home resident just prior to this episode? The read it is the resident for stroke is the pisode?	'	Yes	No

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#### 11. What are the answers to Questions 9 and 10?

ONE OR BOTH ARE "YES"01 → DISCONTINUE REVIEW, CHECK BOX 1 (INELIGIBLE) ABOVE IF NOT		
ALREADY CHECKED.		
BOTH ARE "NO"00 <b>⇒ GO TO Q. 12</b>		

#### 12. Is box 1 "ineligible" checked above under Patient's Study Status?

YES, INELIGIBLE BOX CHECKED	01 → DISCONTINUE REVIEW, PATIENT INELIGIBLE
NO, BOX NOT CHECKED	00 → CHECK BOX 2 (ELIGIBLE) ABOVE AND GO TO Q. 13

#### 13. Does the patient have aphasia or severe dysarthria?

YES	01
NO	00 <b>⇒</b> END REVIEW AND INTERVIEW PATIENT

#### 14. Does patient have a DPOA?

NOTE: IF THE PATIENT HAS DURABLE POWER OF ATTORNEY FOR HEALTH (DPOA), YOU MUST CONTACT THAT PERSON FOR PERMISSION TO CONDUCT A PROXY INTERVIEW. SEE CHAPTER II.B OF YOUR MANUAL FOR COMPLETE GUIDELINES.

YES	01
NO	00 → LOCATE AND INTERVIEW PROXY (SEE BOX BELOW)

#### 15. Has DPOA given permission by signing the Informed Consent?

YES	01 → CIRCLE RECOMMENDED PROXY BELOW, INTERVIEW PROXY
NO, REFUSED	00 ⇒ STOP HERE AND CODE AS REFUSAL
COULD NOT CONTACT	00 4 100 17 100 107 107 107 107 107 107 107

WITHIN 48 HOURS......02 → LOCATE AND INTERVIEW A PROXY (SEE BOX BELOW)

PRIORITIES FOR IDENTIFYING A PROXY: SELECT/ASK DPOA FOR THE PERSON WHO KNOWS THE MOST ABOUT PATIENT'S HEALTH AND HEALTH CARE USE:

- a. DPOA
- b. CLOSE RELATIVE WHO LIVES WITH THE PATIENT, SUCH AS SPOUSE, SON, DAUGHTER, SISTER, BROTHER, OR "SIGNIFICANT OTHER."
- c. CLOSE FRIEND/COMPANION WHO LIVES WITH THE PATIENT.
- d. CLOSE RELATIVE/FRIEND WHO LIVES IN THE SAME AREA, AND IS IN FREQUENT (AT LEAST WEEKLY) CONTACT WITH THE PATIENT.

STUDY SPECIFIC ICD-CM CODES:				
Hemorrhage, subarachnoid	433.81	Occlusion & stenosis, other spec'd precerebral		
Hemorrhage, intracerebral		artery, w/cerebral infarction		
Hemorrhage, non-traumatic extradural	433.91	Occlusion & stenosis, unspecified precerebral artery, w/cerebral infarction		
Hemorrhage, subdural	434.01	Thrombosis, cerebral, with cerebral infarction		
Hemorrhage, unspecified intracranial	434.11	Embolism, cerebral, with cerebral infarction		
Occlusion and stenosis, basilar artery with cerebral infarction	434.91	Occlusion, cerebral artery, unspecified, with cerebral infarction		
Occlusion and stenosis, carotid artery, with cerebral infarction	436	Disease, cerebrovascular, acute but ill-defined		
Occlusion and stenosis, vertebral artery, with cerebral infarction	438	Late effects of cerebrovascular disease		
Occlusion & stenosis, multiple and bilateral arteries, w/cerebral infarction	Examples of other diagnoses/codes that may indicate an admission for stroke include but are not limited to: 781.2 Abnormality of gait 342.0-342.9 Hemiplegia 784.5 Dysphasia 787.2 Dysphagia			
	Hemorrhage, subarachnoid Hemorrhage, intracerebral Hemorrhage, non-traumatic extradural Hemorrhage, subdural Hemorrhage, unspecified intracranial Occlusion and stenosis, basilar artery with cerebral infarction Occlusion and stenosis, carotid artery, with cerebral infarction Occlusion and stenosis, vertebral artery, with cerebral infarction Occlusion and stenosis, vertebral artery, with cerebral infarction Occlusion & stenosis, multiple and bilateral	Hemorrhage, subarachnoid  Hemorrhage, intracerebral  Hemorrhage, non-traumatic extradural  Hemorrhage, subdural  Hemorrhage, subdural  Hemorrhage, unspecified intracranial  Occlusion and stenosis, basilar artery with cerebral infarction  Occlusion and stenosis, carotid artery, with cerebral infarction  Occlusion and stenosis, vertebral artery, with cerebral infarction  Occlusion & stenosis, multiple and bilateral admission arteries, w/cerebral infarction  Example admission 781.2  342.0-34		

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# A STUDY OF STROKE POST-ACUTE CARE COSTS AND OUTCOMES

### Files Available for This Report

Main Report (not including appendices)

HTML: <a href="http://aspe.hhs.gov/daltcp/reports/2006/strokePAC.htm">http://aspe.hhs.gov/daltcp/reports/2006/strokePAC.htm</a>
<a href="http://aspe.hhs.gov/daltcp/reports/2006/strokePAC.pdf">http://aspe.hhs.gov/daltcp/reports/2006/strokePAC.htm</a>

APPENDIX A: SNF/IRF Patient Screening Form (Appendix A only)

PDF: http://aspe.hhs.gov/daltcp/reports/2006/strokePAC-A.pdf

APPENDIX B: Post-Acute Care Admission Interview and 90-Day Telephone Follow-Up

Interview (Appendix B only)

PDF: http://aspe.hhs.gov/daltcp/reports/2006/strokePAC-B.pdf

APPENDIX C: Barthel Index Creation (Appendix C only)

PDF: http://aspe.hhs.gov/daltcp/reports/2006/strokePAC-C.pdf