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# QuICR Stroke Registry Standard Operating Procedures

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# 1 Standard Operating Procedures Summary

## 1.1 Ensuring Access to the QuICR Registry and Two-Factor Authentication

As a first step, you need to ensure that you have access to the registry and set-up your Two-Factor Authentication. Please refer to Section 2, 3 and 4 (pg. 3 to 8).

## 1.2 Enter Patient, Stroke, and Treatment Data

For all patients that are treated with acute reperfusion therapy (intravenous alteplase (tPA) and/or endovascular therapy), **enter data about the patient, the stroke, and the treatment.** This data should be entered within 3 days of admission. Instructions about how to enter patient, stroke, and treatment data can be found in Sections 5, 6, and 7 (pg. 8-61).

Here are standard operation procedures for entering this data:

1. Please ensure that you do not add a patient that is already registered in the QuICR. Registry. A person is only entered once. Each person can have multiple stroke events. Please first search for the patient before adding a new patient (pg. 8)
  - a. If the patient exists in the registry, add a new stroke event for this patient (pg. 19)
  - b. If the patient does not exist in the registry, please create a new patient (pg. 8)
  - c. Once the patient has been selected or created, please add the new stroke details for patient if they were treated with alteplase (tPA) or endovascular therapy (EVT) (pg. 19)
2. Enter data about the treatment with alteplase (tPA) and/or EVT for the stroke (pg. 32)

## 1.3 Inpatient Data

For all patients that were treated with alteplase (tPA)/endovascular treatment, **collect the Inpatient data about the stroke event.** This page is to be filled out within 24 hours of treatment. Instructions about how you enter Inpatient data can be found in Section 8 (pg. 61-67).

## 1.4 Acute Stroke 72- Hour Report

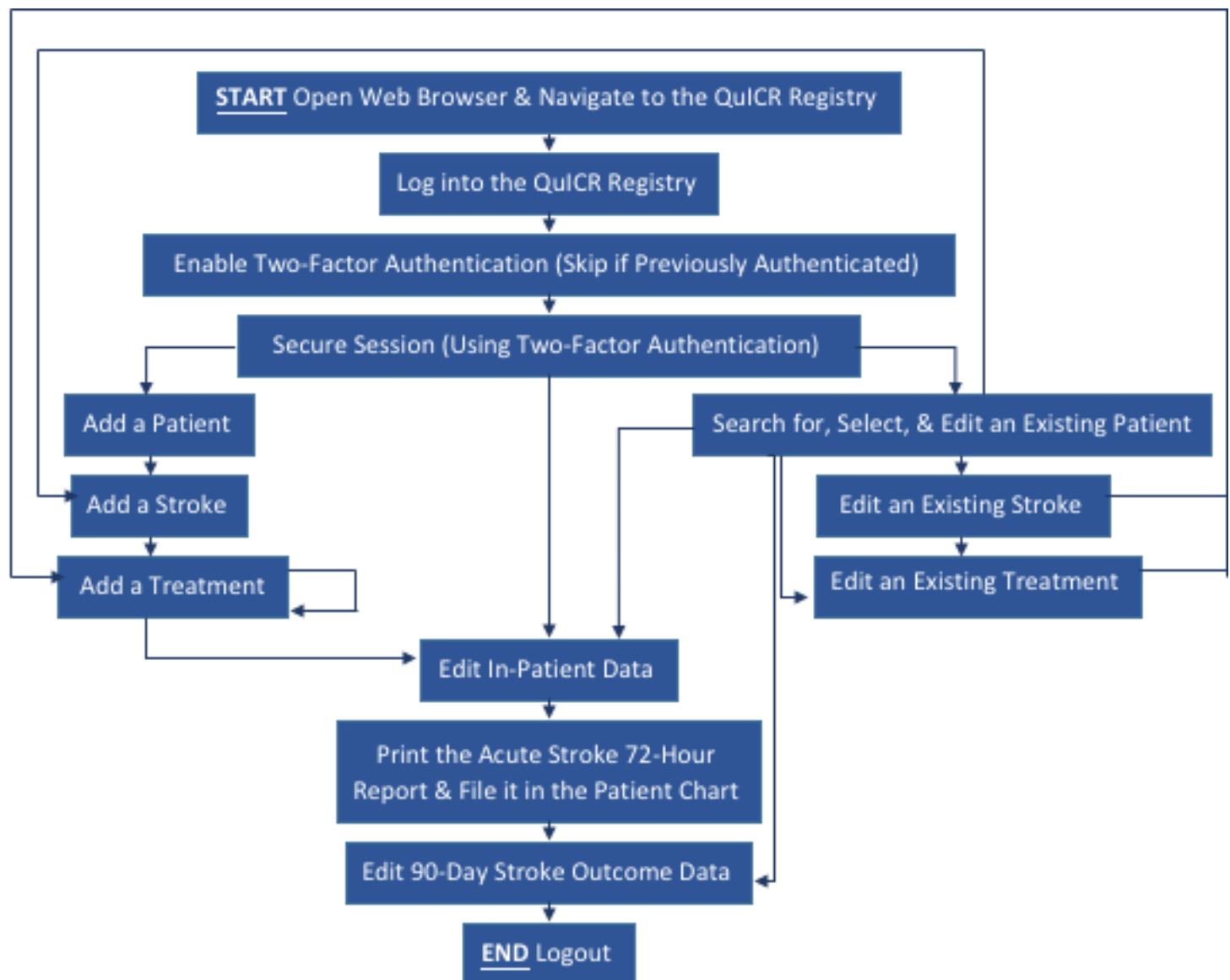
After completing the steps outlined in Sections 1.2 and 1.3 above, **print off the Acute Stroke 72-Hour Report and place this report into the patient's chart.** Instructions about how to generate the report can be found in Section 9 (pg. 67). The data that you have entered will now be the central data about the treatment that this stroke patient received and will become part of the medical record.

## 1.5 90-Day Stroke Outcome Data

For all patients that were treated with alteplase (tPA)/endovascular treatment, please **collect data about outcomes after 90-days of the stroke.** This can be done via a telephone follow-up or from the clinic follow-up for the patient. Instructions about how you enter 90-Day Stroke Outcome data can be found in Section 10 (pg. 70-75).

**If at any point you require additional clarification on a specific term, please hover over the term and a definition will appear (only in edit mode pages).**

Figure 1: Standard Operating Procedures



## 2 Accessing the QuICR Registry

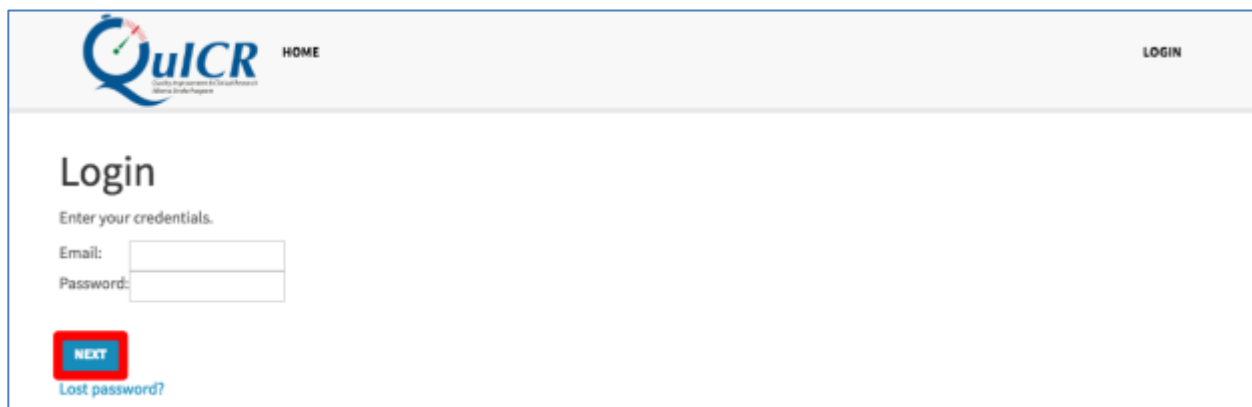
The registry can be accessed by navigating to <https://quicr.cru.ualgary.ca/> on your web browser (Chrome, Safari, Firefox, Internet Explorer, etc.).

## 3 Logging into the QuICR Registry & Enabling Two-Factor Authentication

You will be assigned a user name and password by QuICR Support. If you do not have a password, please contact [quicr@ualgary.ca](mailto:quicr@ualgary.ca).

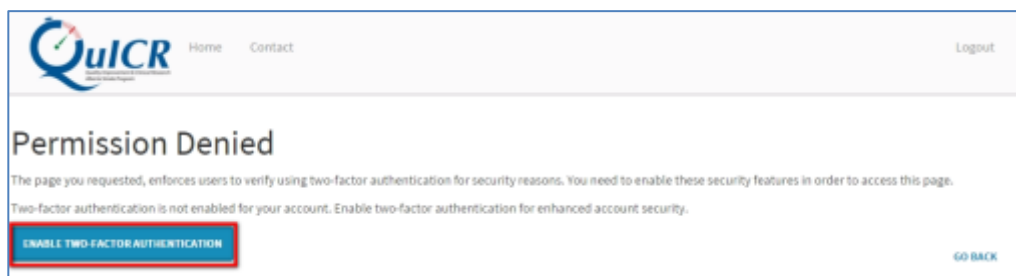
From the Homepage of the QuICR Registry enter your email address and password then select “Next” (boxed in red) as shown in Figure 2. You will be provided login credentials by contacting your Site Administrator. If the Site Administrator is unable to create an account, please email QuICR Support at [quicr@ualgary.ca](mailto:quicr@ualgary.ca) or by calling (403) 220-8256.

Figure 2: Login Page



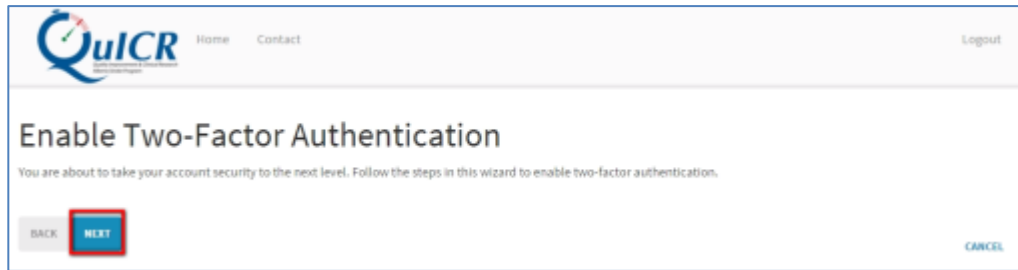
**If you are logging into the QuICR Registry for the first time, you will have to enable Two-Factor Authentication.** Click on the “Enable Two-Factor Authentication” button, as shown in Figure 3 (boxed in red). If you have already enabled Two-Factor Authentication, please skip Section 4.

Figure 3: Enabling Two-Factor Authentication (1)



After clicking “*Enable Two-Factor Authentication*” you will then see the screen below. Click on the “*Next*” (boxed in **red**) button as shown in Figure 4.

*Figure 4: Enabling Two-Factor Authentication (2)*



Please follow the instructions found in Section 4 to complete the enable Two-Factor Authentication process.

### **Rationale for Two-Factor Authentication**

Not all hospitals in Alberta are within the AHS network. Because we are dealing with patient information, privacy considerations demand that we have adequate e-security for accessing the database.

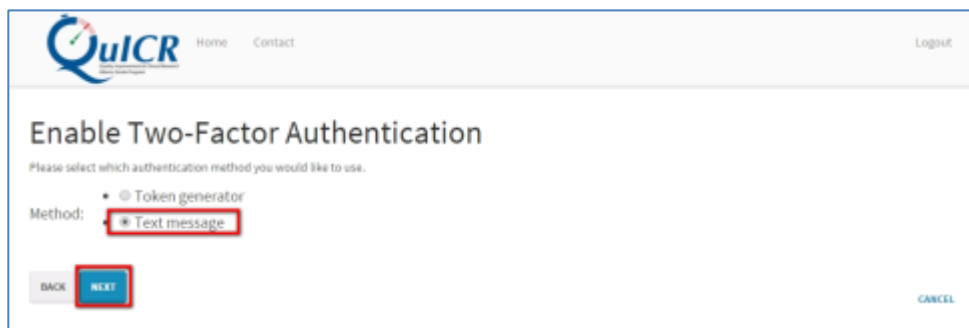
## 4 Two-Factor Authentication

There are two choices for Two-Factor Authentication. To authenticate via Text Message please refer to Section 4.1. To authenticate via Token Generator please refer to Section 4.2. We recommend that you use Text Message as your authentication method if you have reliable cellular reception at your site.

### 4.1 Enabling Two-Factor Authentication (Text Message)

To enable Two-Factor Authentication via Text Message, first ensure that “Text Message” is selected and click “Next” (boxed in red) as shown in Figure 5. If you would like to enable Two-Factor Authentication by Token Generator (this is done through Google authentication app for smart phones), please see Section 4.2.

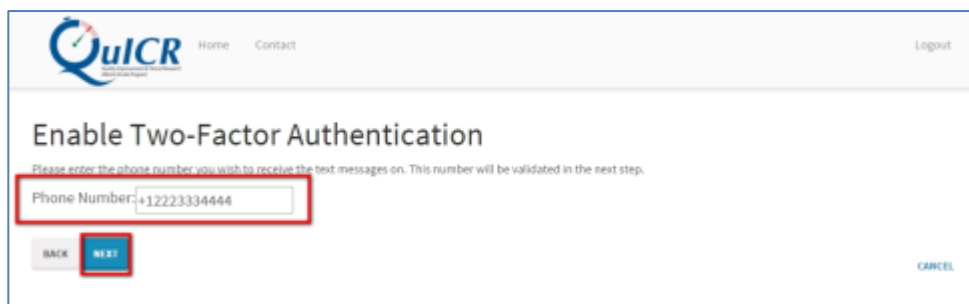
Figure 5: Enabling Two-Factor Authentication via Text Message (1)



The screenshot shows the 'Enable Two-Factor Authentication' page. At the top, there is a header with the QuICR logo and navigation links for Home, Contact, and Logout. The main heading is 'Enable Two-Factor Authentication'. Below it, a subheading says 'Please select which authentication method you would like to use.' There are two radio button options: 'Token generator' and 'Text message'. The 'Text message' option is selected and highlighted with a red box. Below the options, there are three buttons: 'BACK', 'NEXT' (highlighted with a red box), and 'CANCEL'.

Enter the phone number you wish to receive the Text Messages on. **Preface the phone number by “+” and the country code (e.g. +1 for Canada so an example phone number would be +1403555555).** Once your phone number has been entered, select “Next” (boxed in red) as shown in Figure 6.

Figure 6: Enabling Two-Factor Authentication via Text Message (2)

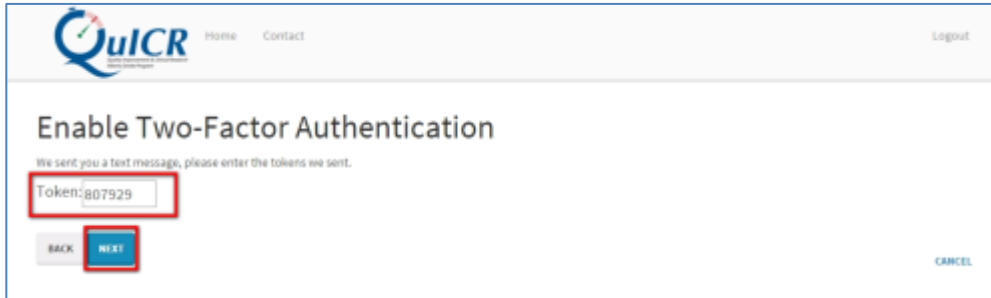


The screenshot shows the 'Enable Two-Factor Authentication' page. At the top, there is a header with the QuICR logo and navigation links for Home, Contact, and Logout. The main heading is 'Enable Two-Factor Authentication'. Below it, a subheading says 'Please enter the phone number you wish to receive the text messages on. This number will be validated in the next step.' There is a text input field labeled 'Phone Number' containing the value '+12223334444', which is highlighted with a red box. Below the input field, there are three buttons: 'BACK', 'NEXT' (highlighted with a red box), and 'CANCEL'.



On your mobile device, you will receive a 6-digit number through Text Message. Enter the 6-digit number into the Token box on the QuICR Registry and click “Next” (boxed in red) as shown in Figure 7.

*Figure 7: Enabling Two-Factor Authentication via Text Message (3)*



You should now be able to enter the QuICR Registry.

#### **4.1.1 Logging into The Registry After Enabling Two-Factor Authentication (Text Message)**

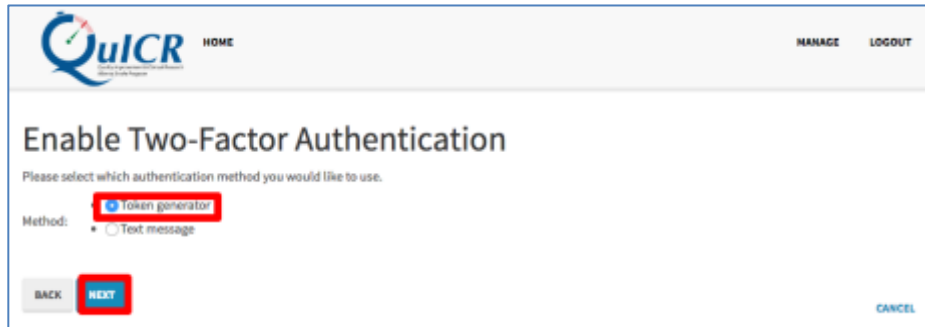
If Two-Factor Authentication is enabled via Text Message, you will no longer need to enable Two-Factor Authentication. Instead, subsequent logins to the QuICR Registry will require you to enter a 6-digit number sent to your phone as a Text Message.

## 4.2 Enabling Two-Factor Authentication (Token Generator)

**STOP! On your mobile device, download and install Google Authenticator. This is an app that can be found through the Apple app store or Google Play.**

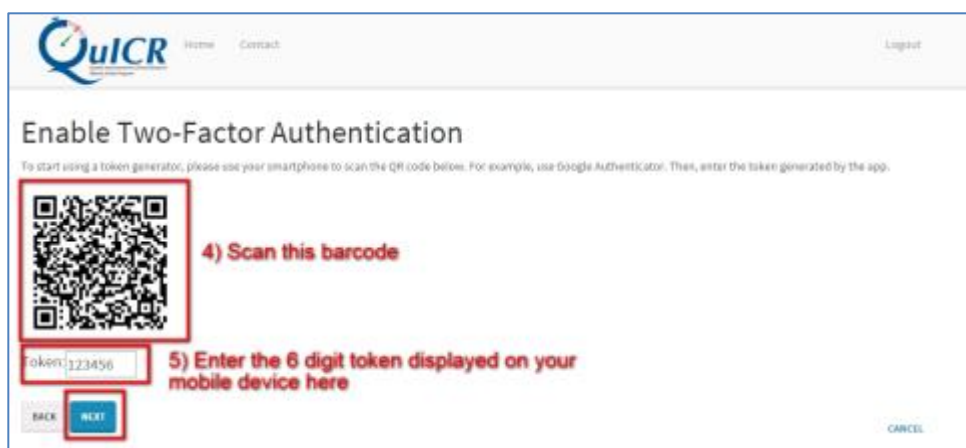
To enable Two-Factor Authentication by a Token Generator, first ensure that “*Token Generator*” is selected and click “*Next*” (boxed in **red**) as shown in Figure 8. If you would like to enable Two-Factor Authentication by Text Message, please go to Section 4.1 instead.

Figure 8: Enabling Two-Factor Authentication via Token Generator (1)



- 1) On your mobile device, open Google Authenticator
- 2) Select “*Begin Setup*”
- 3) Under “*Manually add an account*”, select “*Scan a barcode*”.
- 4) Using your mobile device, scan the barcode shown on the QuICR Registry
- 5) Enter the 6-digit token displayed on your mobile device in the QuICR Registry and click “*Next*” (boxed in **red**) as shown in Figure 9.

Figure 9: Enabling Two-Factor Authentication via Token Generator (2)



You will now be able to enter the QuICR Registry.

#### 4.2.1 Logging into The Registry After Enabling Two-Factor Authentication (Token Generator)

If Two-Factor Authentication is enabled via Token Generator, you will no longer need to enable Two-Factor Authentication. Instead, subsequent logins to the QuICR Registry will require you to enter a 6-digit number sent to periodically to the Google Authenticator app (or your preferred authenticator) on the mobile device used to enable Two-Factor Authentication.

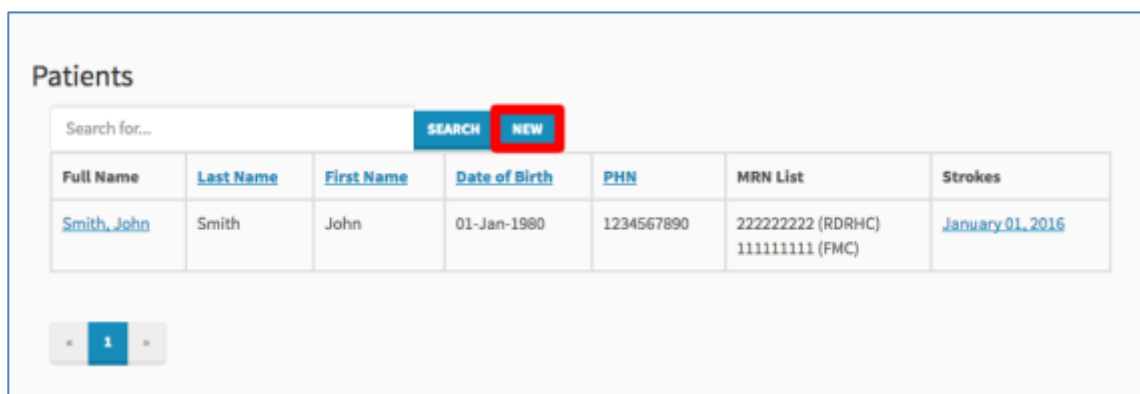
## 5 Step 1 – Searching for and Adding Patient Data

Searching for and/or adding a patient is the first step when entering data about a stroke event. To add a new patient to the QuICR Registry, please refer to Section 5.1. If the patient exists in the QuICR Registry, go to Section 5.2 and follow the instructions to navigate to and edit the patient data.

### 5.1 Adding a New Patient

To add a new patient, select “New” (boxed in red) on the Homepage as shown below in Figure 10.

Figure 10: Navigating to the Add New Patient Page



The screenshot shows the 'Patients' section of the QuICR interface. At the top, there is a search bar with the placeholder text 'Search for...'. To the right of the search bar are two buttons: 'SEARCH' and 'NEW'. The 'NEW' button is highlighted with a red box. Below the search bar is a table with the following columns: Full Name, Last Name, First Name, Date of Birth, PHN, MRN List, and Strokes. The table contains one row of data for a patient named John Smith, born on 01-Jan-1980, with PHN 1234567890 and MRN 222222222 (RDRHC) and 111111111 (FMC). The Strokes column shows 'January 01, 2016'. At the bottom left of the table, there is a pagination control showing '1' in a blue box, indicating the first of one page.

Full Name	Last Name	First Name	Date of Birth	PHN	MRN List	Strokes
Smith, John	Smith	John	01-Jan-1980	1234567890	222222222 (RDRHC) 111111111 (FMC)	January 01, 2016

You are now at the **Find or Add Patient** page. Here you will be able to add patient data to the QuICR Registry. Figure 11 shows the Find or Add Patient page filled in with a sample patient. Once patient data is entered and you are ready to enter stroke data select “*Continue*” (boxed in **red**). If you do not have stroke data at this time and will be entering it later select “*Create and Return Home*” (boxed in **orange**).

Figure 11: Find or Add Patient Page

Home > New Patient

## Find or Add Patient

- 1 Patient
- 2 Stroke
- 3 Treatment
- 4 In-Patient
- 5 90-Day Outcome

Last Name\* Smith First Name\* John Middle Initials B

Date of Birth (dd-MMM-yyyy)\* 01-Jan-1980 Sex\* Male Race\* Caucasian

Personal Health Number\* 1234567890 Personal Health Number Type\* British Colum

### Hospital/Healthcare Centre Identification Numbers

Hospital/Healthcare Centre*	Identification Number*	
Red Deer Regional Hospital Centre	22222222	<input type="checkbox"/> Delete
Foothills Medical Centre	11111111	<input type="checkbox"/> Delete

[ADD ADDITIONAL HOSPITAL/HEALTHCARE CENTRE NUMBER](#)

**CONTINUE** **CREATE AND RETURN HOME** CANCEL

On this page you will enter the patient's demographic data and medical record numbers.

- Type the patient's Last Name, First Name, and Middle Initial(s) in the boxes.
- The patient's Date of Birth can be typed into the box (dd-MMM-yyyy or an example would be 01-Jan-1955) *or* by clicking in the box a drop down menu will appear and the date of birth can be selected.
- The patient's Sex is selected from the dropdown menu. Select "*undetermined*" if the patient's sex cannot be determined.
- The patient's Race is selected from the dropdown menu. For general guidance on Race, please refer to Table 1 below. Select "*utd*" if the patient's race cannot be determined.
- Enter the patient's Personal Health Number (or ULI) in the box and then select the Personal Health Number Type from the dropdown menu (province, military, treaty, etc.). Entering the PHN is not necessary when the patient is from out of the country.
- Add the patient's Medical Record Number (MRN) by selecting the appropriate institution from the Hospital or Healthcare Centre drop down menu and typing the ID number in the box. To add a secondary MRN, select the "*Add Additional Hospital Number*" button.

**It is important that you enter the correct data into the QuICR Registry. For a list of definitions on the Find or Add Patient page, please refer to Table 1.**

*Table 1: Find or Add Patient Definitions*

Term	Definition
Last Name	Patient's last name as shown on their Alberta Personal Health Card. If Alberta Health Card is not available, this should be a family name provided on a government issued identification card.
First Name	Patient's first name as shown on their Alberta Personal Health Card. If Alberta Health Card is not available, this should be a family name provided on a government issued identification card.
Middle Initials	Initial of the patient's middle name (if applicable).
Date of Birth (DOB)	Day on which the patient is born as shown on their Alberta Personal Health Card or a government issued identification card. If not known, then a close approximation where first day if day is not known and January if month is not known. Format: dd-MMM-yyyy (e.g. 01-Jan-1950).
Sex	Either of two main categories (male and female) on the basis of genetics. Select " <i>undetermined</i> " if unknown.
Race	Group the patient is related by common descent or heredity as self-described. <b>First Nations:</b> Indigenous peoples within the boundaries of present-day Canada. <b>Asian:</b> A person having origins in any of the original peoples of the Far East and Southeast Asia. <b>South Asian:</b> A person having origins from India, Pakistan, Bangladesh, Sri Lanka, Nepal, Bhutan, and the Maldives. <b>Black:</b> A person having origins in any of the black racial groups of Africa. <b>Caucasian:</b> A person having origins in any of the original peoples of Europe, the Middle East, or North Africa. <b>Hispanic:</b> A person of Cuban, Puerto Rican, South or Central American, Mexican, or other Spanish culture or origin. <b>Pacific Islander:</b> A person having origins in any of the original peoples of Guam, Samoa, Hawaii, or other Pacific Islands.
Personal Health Number (PHN)	Identifier issued to Albertans who are eligible for basic coverage with Alberta Health Care Insurance Plan. This number is the same as the ULI (if applicable). PHN may apply to other provinces in Canada for visitors to Alberta.
Personal Health Number Type	Select the province or national organization that is associated with the PHN. If the patient is not from Canada, select " <i>out of country</i> ".
Hospital/Healthcare Centre	Institution where the patients has received care including the emergency department.
Medical Record Number (MRN)	Medical record number is health-facility specific. The number is used by the hospital as a systematic documentation of a patient's medical history and care during each hospital stay.

You will then be asked to confirm if the data entered are correct as shown in Figure 12. If the data is correct, select “Save” (boxed in red). If modifications are needed, select “Cancel”.

Figure 12: Find or Add Patient - Confirmation

If the patient already exists in the database (meaning they have had a prior stroke) you will see a screen similar to Figure 13. If this is the same patient select “Use This Patient” (boxed in red) and you will be able to update data for their current stroke. If this is not the correct patient (just one with a similar name or PHN) select “Create New” (boxed in orange). If you would like to make any additional changes, click “Cancel”.

Figure 13: Matching Patient

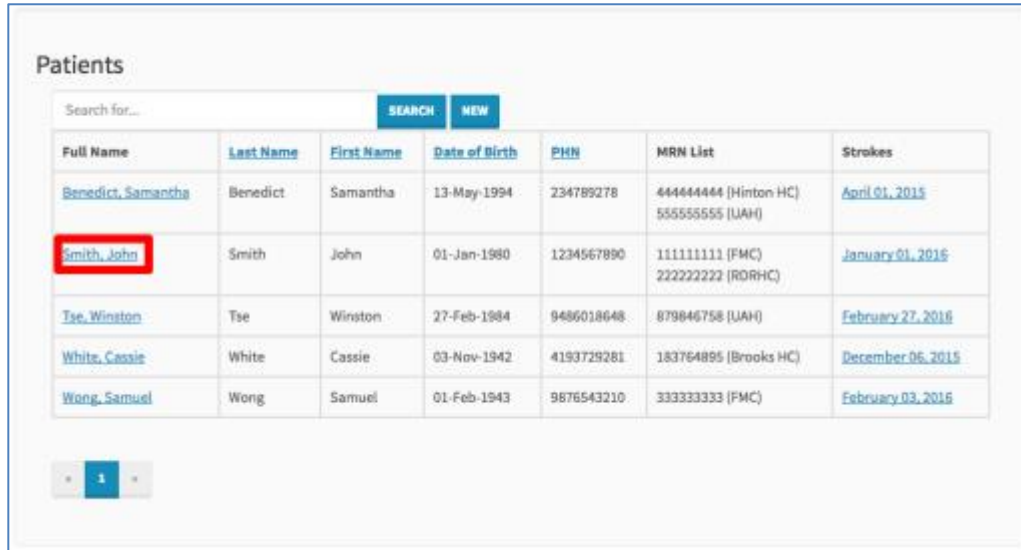
If you click either “Use This Patient” or “Create New”, you will be directed to the **Add Stroke** page.



## 5.2 Editing Existing Patient Data

To navigate to the Edit Patient page for the patient that you wish to edit, go to the Homepage and click on the patient's full name (boxed in **red**) as shown in Figure 14.

Figure 14: Navigating to the Edit Patient Page (1)

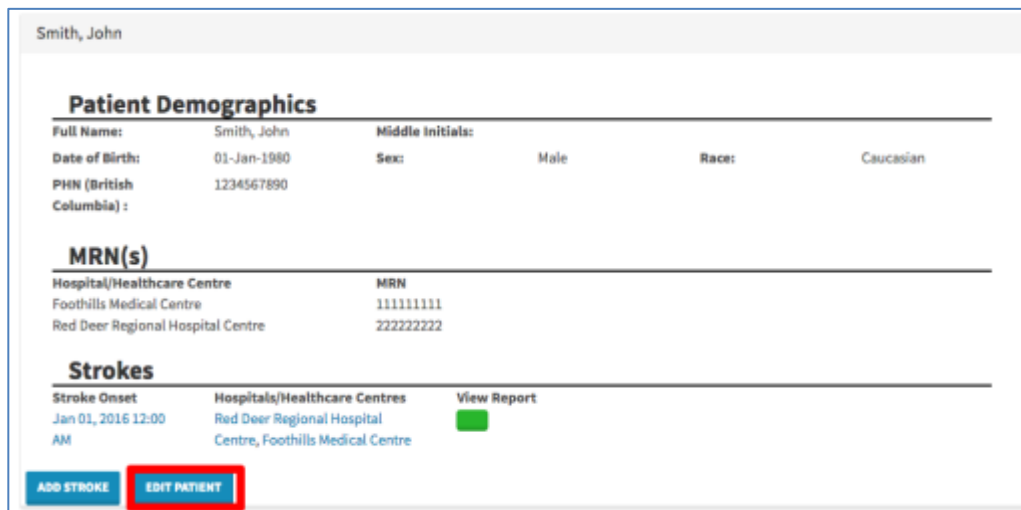


The screenshot shows a 'Patients' table with columns: Full Name, Last Name, First Name, Date of Birth, PHN, MRN List, and Strokes. The row for 'Smith, John' is highlighted with a red box. Below the table is a pagination control showing '1'.

Full Name	Last Name	First Name	Date of Birth	PHN	MRN List	Strokes
<b>Smith, John</b>	Smith	John	01-Jan-1980	1234567890	111111111 (FMC) 222222222 (RDRHC)	January 01, 2016
Tse, Winston	Tse	Winston	27-Feb-1984	9486018648	879846758 (UAH)	February 27, 2016
White, Cassie	White	Cassie	03-Nov-1942	4193729261	183764895 (Brooks HC)	December 06, 2015
Wong, Samuel	Wong	Samuel	01-Feb-1943	9876543210	333333333 (FMC)	February 03, 2016

Next, click on the “Edit Patient” button (boxed in **red**) as shown in Figure 15.

Figure 15: Navigating to the Edit Patient Page (2)



The screenshot shows the 'Edit Patient' page for John Smith. It includes sections for Patient Demographics, MRN(s), and Strokes. The 'EDIT PATIENT' button is highlighted with a red box.

**Patient Demographics**

Full Name:	Smith, John	Middle Initials:	
Date of Birth:	01-Jan-1980	Sex:	Male
PHN (British Columbia):	1234567890	Race:	Caucasian

**MRN(s)**

Hospital/Healthcare Centre	MRN
Foothills Medical Centre	111111111
Red Deer Regional Hospital Centre	222222222

**Strokes**

Stroke Onset	Hospital/Healthcare Centres	View Report
Jan 01, 2016 12:00 AM	Red Deer Regional Hospital Centre, Foothills Medical Centre	<input type="button" value="View Report"/>

**Buttons:** ADD STROKE, **EDIT PATIENT**

You are now at the **Edit Patient** page. Figure 16 shows the Edit Patient page filled in with a sample patient. Once the patient data is entered and you are ready to enter stroke data select “Continue” (boxed in **red**). If you do not have stroke data at this time and will be entering it later select “Create and Return Home” (boxed in **orange**).

Figure 16: Edit Patient Page

1

2

3

4

5

Patient

Stroke

Treatment

In-Patient

90-Day Outcome

## Patient: Smith, John

Last Name*	Smith	First Name*	John	Middle Initials	
Date of Birth (dd-MMM-yyyy)*	01-Jan-1980	Sex*	Male	Race*	Caucasian
Personal Health Number*	1234567890	Personal Health Number Type*	British Colum		

### Hospital/Healthcare Centre Identification Numbers

Hospital/Healthcare Centre*	Identification Number*	
Foothills Medical Centre	111111111	<input type="checkbox"/> Delete
Hospital/Healthcare Centre*	Identification Number*	
Red Deer Regional Hospital Centre	222222222	<input type="checkbox"/> Delete

ADD ADDITIONAL HOSPITAL/HEALTHCARE CENTRE NUMBER

### Strokes

Stroke on January 01, 2016

CONTINUE

SAVE AND RETURN HOME

CANCEL

On this page you will edit the patient's demographic data and medical record numbers.

- Type the patient's Last Name, First Name, and Middle Initials in the boxes.
- The patient's Date of Birth can be typed into the box (dd-MMM-yyyy or an example would be 01-Jan-1955) *or* by clicking in the box a drop down menu will appear and the date of birth can be selected.
- The patient's Sex is selected from the dropdown menu. Select "*undetermined*" if unknown.
- The patient's Race is selected from the dropdown menu. For general guidance on Race, please refer to Table 2 below. Select "*utd*" if unknown.
- Enter the patient's Personal Health Number (or ULI) in the box and then select the Personal Health Number Type from the dropdown menu (province, military, treaty, etc.). Entering the PHN is not necessary when the patient is from out of the country.
- Add the patient's Medical Record Number (MRN) by selecting the appropriate institution from the Hospital or Healthcare Centre drop down menu and typing the ID number in the box. To add a secondary MRN, select the "*Add Additional Hospital Number*" button.

**It is important that you enter the correct data into the QuICR Registry. For a list of definitions on the Find or Add Patient page, please refer to Table 2.**

*Table 2: Edit Patient Definitions*

Term	Definition
Last Name	Patient's last name as shown on their Alberta Personal Health Card. If Alberta Health Card is not available, this should be a family name provided on a government issued identification card.
First Name	Patient's first name as shown on their Alberta Personal Health Card. If Alberta Health Card is not available, this should be a family name provided on a government issued identification card.
Middle Initials	Initial of the patient's middle name (if applicable).
Date of Birth (DOB)	Day on which the patient is born as shown on their Alberta Personal Health Card or a government issued identification card. If not known, then a close approximation where first day if day is not known and January if month is not known. Format: dd-MMM-yyyy (e.g. 01-Jan-1950).
Sex	Either of two main categories (male and female) on the basis of genetics. Select " <i>undetermined</i> " if unknown.
Race	Group the patient is related by common descent or heredity as self-described. <b>First Nations:</b> Indigenous peoples within the boundaries of present-day Canada. <b>Asian:</b> A person having origins in any of the original peoples of the Far East and Southeast Asia. <b>South Asian:</b> A person having origins from India, Pakistan, Bangladesh, Sri Lanka, Nepal, Bhutan, and the Maldives. <b>Black:</b> A person having origins in any of the black racial groups of Africa. <b>Caucasian:</b> A person having origins in any of the original peoples of Europe, the Middle East, or North Africa. <b>Hispanic:</b> A person of Cuban, Puerto Rican, South or Central American, Mexican, or other Spanish culture or origin. <b>Pacific Islander:</b> A person having origins in any of the original peoples of Guam, Samoa, Hawaii, or other Pacific Islands.
Personal Health Number (PHN)	Identifier issued to Albertans who are eligible for basic coverage with Alberta Health Care Insurance Plan. This number is the same as the ULI (if applicable). PHN may apply to other provinces in Canada for visitors to Alberta.
Personal Health Number Type	Select the province or national organization that is associated with the PHN. If the patient is not from Canada, select " <i>out of country</i> ".
Hospital/Healthcare Centre	Institution where the patients has received care including the emergency department.
Medical Record Number (MRN)	Medical record number is health-facility specific. The number is used by the hospital as a systematic documentation of a patient's medical history and care during each hospital stay.

You will then be asked to confirm if the data entered is correct as shown in Figure 17. If the data is correct, select “Save” (boxed in red). If modifications are needed, select “Cancel”. If “Save” is selected, you will be redirected to the most recent strokes Edit Stroke page. If the patient does not have a stroke added to the QuICR Registry, selecting “Save” will redirect you to the **Add Stroke** page.

Figure 17: Edit Patient - Confirmation

**Patient: Smith, John**

1 Patient 2 Stroke 3 Treatment 4 In-Patient 5 90-Day Outcome

**Please review and confirm patient details before continuing**

**Patient Demographics**

Last Name:	Smith	First Name:	John	Initials:	K
Date of Birth:	01-Jan-1980	Sex:	Male	Race:	Caucasian
Personal Health Number:	1234567890	Personal Health Number Type:	British Columbia		

**Hospital/Healthcare Centre Identification Numbers**

Hospital/Healthcare Centre	Identification Number
Foothills Medical Centre	111111111
Red Deer Regional Hospital Centre	222222222

**SAVE** CANCEL

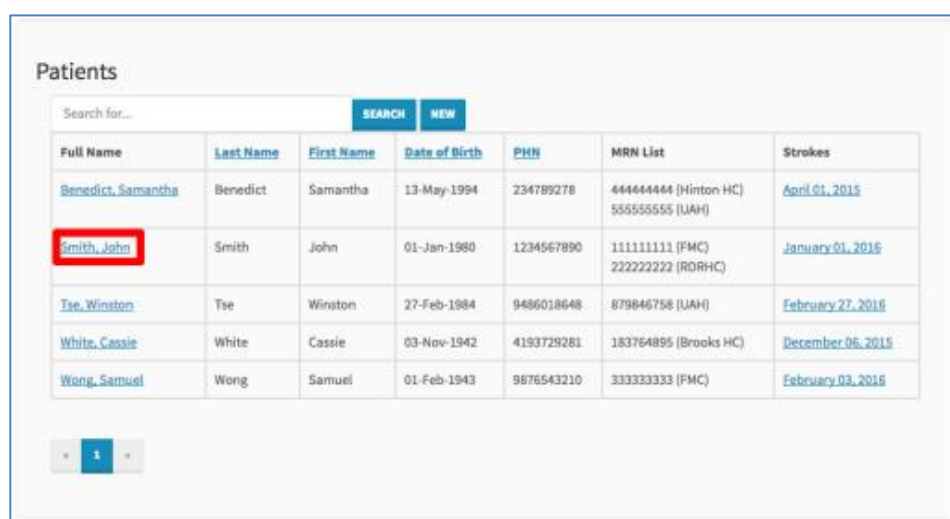
## 6 Step 2 - Adding a Stroke Event

Adding a stroke event is typically the second step when entering data about a stroke patient. To add a new stroke to the QuICR Registry, please refer to Section 6.1. If the stroke exists in the QuICR Registry, go to Section 6.2 and follow the instructions to navigate to and edit the stroke data.

### 6.1 Adding a New Stroke

To add a new stroke, select the patient's full name (boxed in red) from the Homepage as shown in Figure 18.

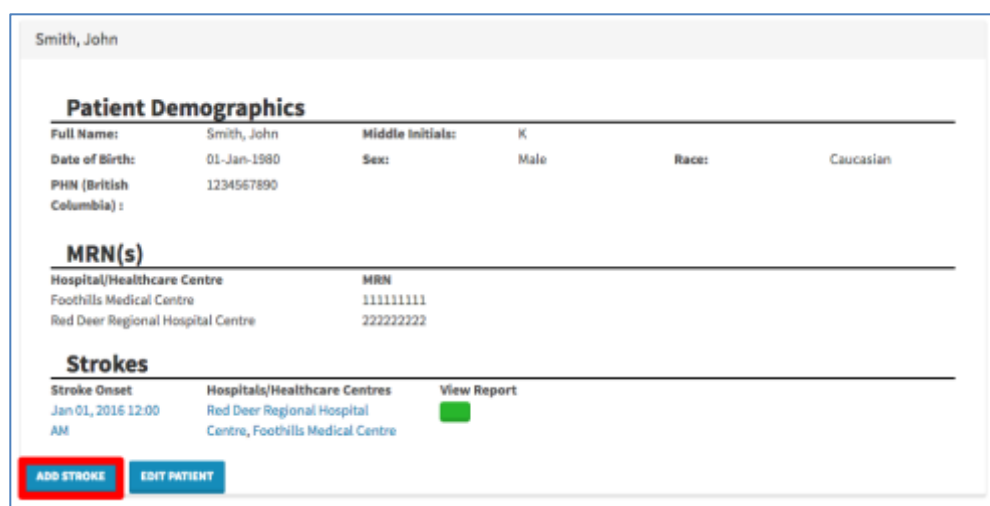
Figure 18: Navigating to the Add New Stroke Page (1)



Patients						
Search for...				SEARCH	NEW	
Full Name	Last Name	First Name	Date of Birth	PHN	MRN List	Strokes
<a href="#">Benedict, Samantha</a>	Benedict	Samantha	13-May-1994	234789278	444444444 (Hinton HC) 555555555 (UAH)	<a href="#">April 01, 2015</a>
<b>Smith, John</b>	Smith	John	01-Jan-1980	1234567890	111111111 (FMC) 222222222 (RORHC)	<a href="#">January 01, 2016</a>
<a href="#">Tse, Winston</a>	Tse	Winston	27-Feb-1984	9486018648	879846758 (UAH)	<a href="#">February 27, 2016</a>
<a href="#">White, Cassie</a>	White	Cassie	03-Nov-1942	4193729281	183764895 (Brooks HC)	<a href="#">December 06, 2015</a>
<a href="#">Wong, Samuel</a>	Wong	Samuel	01-Feb-1943	9876543210	333333333 (FMC)	<a href="#">February 03, 2016</a>

Next, click on the “Add Stroke” button (boxed in red) as shown in Figure 19.

Figure 19: Navigating to the Add New Stroke Page (2)



Smith, John

---

### Patient Demographics

Full Name:	Smith, John	Middle Initials:	K		
Date of Birth:	01-Jan-1980	Sex:	Male	Race:	Caucasian
PHN (British Columbia):	1234567890				

---

### MRN(s)

Hospital/Healthcare Centre	MRN
Foothills Medical Centre	111111111
Red Deer Regional Hospital Centre	222222222

---

### Strokes

Stroke Onset	Hospitals/Healthcare Centres	View Report
Jan 01, 2016 12:00 AM	Red Deer Regional Hospital Centre, Foothills Medical Centre	

**ADD STROKE** **EDIT PATIENT**

You are now at the **Add Stroke** page. Here you will be able to add the patient's stroke to the registry. Figure 20 shows the Add Stroke page filled in for a sample patient. Once the required stroke data are entered and you are ready to enter treatment data select “*Continue*” (boxed in **red**). If you do not have treatment data at this time and will be entering it later select “*Save And Return Home*” (boxed in **orange**). If you would like to cancel, select “*Cancel*”.

Figure 20: Add Stroke Event Page

[Home >](#)

1
2
3
4
5

Patient
Stroke
Treatment
In-Patient
90-Day Outcome

## Add Stroke

### Intake Data

Status	Active	<input type="checkbox"/> Ems verified	
Date of Onset: (dd-MMM-yyyy)*	01-Jan-2016	Time of Onset: (HH:mm 24hr)*	00:00
Stroke occurred in	Community	Patient Postal Code at time of Stroke	T2N1N4

### EMS Data (to be loaded via EMS registry)

911 Call Date: (dd-MMM-yyyy)	01-Jan-2016	911 Call Time: (HH:mm 24hr)	00:05
EMS Dispatch Date: (dd-MMM-yyyy)	01-Jan-2016	EMS Dispatch Time: (HH:mm 24hr)	00:10
EMS on Scene Date: (dd-MMM-yyyy)	01-Jan-2016	EMS on Scene Time: (HH:mm 24hr)	00:15
EMS Depart Scene Date: (dd-MMM-yyyy)	01-Jan-2016	EMS Depart Scene Time: (HH:mm 24hr)	00:20

CONTINUE

SAVE AND RETURN HOME

CANCEL

On this page enter Intake and EMS time data (if applicable).

**Intake:**

- The Date of Onset can be typed in the box (dd-MMM-yyyy) *or* by clicking in the box a drop down menu will appear and the Date of Onset can be selected. For additional information on Date of Onset, please refer to Table 3 below.
- The Time of Onset can be typed in the box (hh:mm using 24-hour clock) *or* by clicking in the box a drop down menu will appear and the Time of Onset can be selected. For additional information on Time of Onset, please refer to Table 3 below.
- Using the drop down menu next to Stroke Occurred in select if the stroke occurred in the community or in hospital. Select "Hospital" if stroke (re)occurs while the patient is in a hospital with Inpatient beds (including in the Emergency Department). If the stroke occurred in Hospital, Recognition Date and Recognition Time fields need to be completed.
- Enter the Patient's Postal Code in the box. This is the patient's home postal code at the time of stroke onset. (e.g. If a patient's primary residence is British Columbia and displays stroke symptoms while at their residence in Alberta; the postal code will be that of the primary residence in British Columbia).

**Status & EMS Verified (for Site Administrators only):**

- You may change the status of the stroke from "*Active*" to "*Closed*" after all the data for a stroke has been collected and reviewed.
- Check "*EMS Verified*" if EMS has uploaded EMS time stamp data for the stroke event. If this is checked, you will not be able to make changes to the EMS time stamp data until the box is unchecked.

**EMS Time Stamp:**

- If the EMS print out (yellow sheet) is available fill in the appropriate dates and times
- All dates can be typed in the box (dd-MMM-yyyy) *or* by clicking in the box a drop down menu will appear and the date can be selected.
- All times can be typed in the box (hh:mm using 24-hour clock) *or* by clicking in the box a drop down menu will appear and the time can be selected.
- **Please use the EMS dates and times from the Community to the first Site. Do not fill in the EMS dates and times for inter-hospital transfers.**

**It is important that you enter the correct data into the QuICR Registry. For a list of definitions for the Add Stroke page, please refer to Table 3.**



Table 3: Add Stroke Definitions

Term	Definition
Status	Either of two categories (Active or Closed). After all the data for a stroke has been collected and reviewed, it should be closed. Otherwise, the record should remain open.
EMS Verified	Check " <i>EMS Verified</i> " if EMS has uploaded EMS time stamp data for the stroke event. If this is checked, you will not be able to make changes to the EMS time stamp data until the box is unchecked.
Date of Onset	Date at which the patient was last known to be without the signs and symptoms of the current stroke or at his or her prior baseline. If the symptoms resolve and then stroke symptoms resume, the date of onset is the later or last time the symptoms appeared. Format: dd- <i>MMM</i> -yyyy (e.g. 01-Jan-1950).
Time of Onset	Time at which the patient was last known to be without the signs and symptoms of the current stroke or at his or her prior baseline. If the symptoms resolve and then stroke symptoms resume, the time of onset is the later or last time the symptoms appeared. Format HH:mm 24hr (e.g. 23:10).
Stroke Occurred In	Either of two categories (community or hospital). Select " <i>Community</i> " if stroke occurs while the patient is outside the hospital. Select " <i>Hospital</i> " if stroke (re)occurs while the patient is in a hospital with Inpatient beds (including in the Emergency Department).
Recognition Date	Date at which the patient was identified as having a stroke. Format dd- <i>MMM</i> -yyyy (e.g. 01-Jan-1950).
Recognition Time	Time at which the patient was identified as having a stroke. Format HH:mm 24hr (e.g. 23:10).
Patient Home Postal Code at Time of Stroke	Patient's home postal code at the time of stroke. (e.g. If a patient's primary residence is British Columbia and displays stroke symptoms while at their residence in Alberta; the postal code will be that of the primary residence in British Columbia). If the patient is from out-of-country, then leave the postal code field blank.
911 Call Date	Date that 911 was called for the current stroke. Format: dd- <i>MMM</i> -yyyy (e.g. 01-Jan-1950).
911 Call Time	Time that 911 was called for the current stroke. Format HH:mm 24hr (e.g. 23:10).
EMS Dispatch Date	Date that EMS was dispatched to go to the scene of the stroke. Format: dd- <i>MMM</i> -yyyy (e.g. 01-Jan-1950).
EMS Dispatch Time	Time that EMS was dispatched to go to the scene of the stroke. Format HH:mm 24hr (e.g. 23:10).
EMS on Scene Date	Date that the EMS arrived at the scene of the stroke. Format: dd- <i>MMM</i> -yyyy (e.g. 01-Jan-1950).
EMS on Scene Time	Time that the EMS arrived at the scene of the stroke. Format HH:mm 24hr (e.g. 23:10).
EMS Depart Scene Date	Date that the EM left the scene of the stroke en route to the hospital. Format: dd- <i>MMM</i> -yyyy (e.g. 01-Jan-1950).

EMS Depart Scene Time	Time that the EM left the scene of the stroke en route to the hospital. Format HH:mm 24hr (e.g. 23:10).
--------------------------	---

You will then be asked to confirm if the data entered are correct as shown in Figure 21. If the data is correct, select “Save” (boxed in red) if modifications are needed select “Cancel”. If you click “Save”, you will be directed to the **Add Treatment** page.

Figure 21: Add Stroke – Confirmation

Home >

Add Stroke

1

2

3

4

5

Patient

Stroke

Treatment

In-Patient

90-Day Outcome

Please review and confirm stroke details before continuing

Stroke History

Full Name: Smith, John

Stroke Onset: 01-Jan-2016 00:00

Stroke occurred in: Community

Postal Code: T2N1N4

EMS Time Stamps

911 Call: 01-Jan-2016 00:05

EMS Dispatch: 01-Jan-2016 00:10

EMS on Scene : 01-Jan-2016 00:15

EMS Depart Scene : 01-Jan-2016 00:20

SAVE

CANCEL

## 6.2 Editing Existing Stroke Data

To navigate to the Edit Stroke page for the stroke that you wish to edit, go to the Homepage and click on the patient's full name (boxed in **red**) as shown in Figure 22.

Figure 22: Navigating to the Edit Stroke Page (1)

Patients

Search for... SEARCH NEW

Full Name	Last Name	First Name	Date of Birth	PHN	MRN List	Strokes
<a href="#">Benedict, Samantha</a>	Benedict	Samantha	13-May-1994	234789278	444444444 (Hinton HC) 555555555 (UAH)	<a href="#">April 01, 2015</a>
<b><a href="#">Smith, John</a></b>	Smith	John	01-Jan-1980	1234567890	111111111 (FMC) 222222222 (RORHC)	<a href="#">January 01, 2016</a>
<a href="#">Tse, Winston</a>	Tse	Winston	27-Feb-1984	9486018648	879846758 (UAH)	<a href="#">February 27, 2016</a>
<a href="#">White, Cassie</a>	White	Cassie	03-Nov-1942	4193729281	183764895 (Brooks HC)	<a href="#">December 06, 2015</a>
<a href="#">Wong, Samuel</a>	Wong	Samuel	01-Feb-1943	9876543210	333333333 (FMC)	<a href="#">February 03, 2016</a>

1

Next, click on the existing stroke (boxed in **red**) you would like to edit as shown in Figure 23.

Figure 23: Navigating to the Edit Stroke Page (2)

Smith, John

**Patient Demographics**

Full Name:	Smith, John	Middle Initials:	K		
Date of Birth:	01-Jan-1980	Sex:	Male	Race:	Caucasian
PHN (British Columbia):	1234567890				

**MRN(s)**

Hospital/Healthcare Centre	MRN
Foothills Medical Centre	111111111
Red Deer Regional Hospital Centre	222222222

**Strokes**

Strokes Onset	Hospital/Healthcare Centres	View Report
<b>Jan 01, 2016 12:00 AM</b>	Red Deer Regional Hospital Centre, Foothills Medical Centre	<span>View Report</span>

ADD STROKE EDIT PATIENT

Next, click on the “*Edit Stroke*” button (boxed in **red**) as shown in Figure 24.

Figure 24: Navigating to the Edit Stroke Page (3)

Stroke on Stroke on January 01, 2016

### Stroke History

Full Name:	Smith, John
Date of Stroke Onset:	01-Jan-2016 00:00
Stroke occurred in:	Community
Patient Postal Code at time of Stroke:	T2N4V6

### EMS Time Stamp

911 Call DateTime:	01-Jan-2016 00:04
EMS Dispatch DateTime:	01-Jan-2016 00:07
EMS on Scene DateTime:	01-Jan-2016 00:18
EMS Depart Scene DateTime:	01-Jan-2016 00:23

### Hospital or Health Centres

Hospitals/Healthcare Centre	Arrival DateTime	Thrombolysis	Endovascular
<a href="#">Treatment at Red Deer Regional Hospital Centre</a>	01-Jan-2016 00:35	Yes	No
<a href="#">Treatment at Foothills Medical Centre</a>	01-Jan-2016 02:10	No	Yes

### In-Patient

24hr NIHSS: 5

Quality Metrics	
DVT Prophylaxis	Yes
Dysphagia Swallowing Screen	No

### 90-Day Outcome

Determination Date: 01-Apr-2016  
Modality: Telephone

Disability Scales	
90-Day NIHSS:	3
mRS:	1
BI:	10

### Adverse Events

Adverse Event	Neurological Worsening
DVT/PE	No

Edit Stroke

Patient Stroke Report

Add Additional Treatment Centre

You are now at the **Edit Stroke** page. Figure 25 shows the Edit Stroke page filled in for a sample patient. Once the required stroke data are entered and you are ready to enter treatment data select “Continue” (boxed in red). If you do not have treatment data at this time and will be entering it later select “Save And Return Home” (boxed in orange). If you would like to cancel, select “Cancel”.

Figure 25: Edit Stroke Page

## Stroke for patient: Smith, John

1

2

3

4

5

Patient

Stroke

Treatment

In-Patient

90-Day Outcome

### Intake Data

Status	Active	<input type="checkbox"/> Ems verified	
Date of Onset: (dd-MMM-yyyy)*	01-Jan-2016	Time of Onset: (HH:mm 24hr)*	00:00
Stroke occurred in	Community	Patient Postal Code at time of Stroke	T2N4V6

### EMS Data (to be loaded via EMS registry)

911 Call Date: (dd-MMM-yyyy)	01-Jan-2016	911 Call Time: (HH:mm 24hr)	00:04
EMS Dispatch Date: (dd-MMM-yyyy)	01-Jan-2016	EMS Dispatch Time: (HH:mm 24hr)	00:07
EMS on Scene Date: (dd-MMM-yyyy)	01-Jan-2016	EMS on Scene Time: (HH:mm 24hr)	00:18
EMS Depart Scene Date: (dd-MMM-yyyy)	01-Jan-2016	EMS Depart Scene Time: (HH:mm 24hr)	00:23

CONTINUE

SAVE AND RETURN HOME

CANCEL

On this page enter Intake and EMS time data (if applicable).

**Intake:**

- The Date of Onset can be typed in the box (dd-MMM-yyyy) *or* by clicking in the box a drop down menu will appear and the Date of Onset can be selected. For additional information on the Date of Onset, please refer to Table 4 below.
- The Time of Onset can be typed in the box (hh:mm using 24-hour clock) *or* by clicking in the box a drop down menu will appear and the Time of Onset can be selected. For additional information on the Time of Onset, please refer to Table 4 below.
- Using the drop down menu next to Stroke Occurred in select if the stroke occurred in the community or in hospital. Select "Hospital" if stroke (re)occurs while the patient is in a hospital with Inpatient beds (including in the Emergency Department).
- Enter the Patient's Postal Code in the box. This is the patient's home postal code at the time of stroke onset. (e.g. If a patient's primary residence is British Columbia and displays stroke symptoms while at their residence in Alberta; the postal code will be that of the primary residence in British Columbia).

**Status & EMS Verified (for Site Administrators only):**

- You may change the status of the stroke from "*Active*" to "*Closed*" after all the data for a stroke has been collected and reviewed.
- Check "*EMS Verified*" if EMS has uploaded EMS time stamp data for the stroke event. If this is checked, you will not be able to make changes to the EMS time stamp data until the box is unchecked.

**EMS Time Stamp:**

- If the EMS print out (yellow sheet) is available fill in the appropriate dates and times
- All dates can be typed in the box (dd-MMM-yyyy) *or* by clicking in the box a drop down menu will appear and the date can be selected.
- All times can be typed in the box (hh:mm using 24-hour clock) *or* by clicking in the box a drop down menu will appear and the time can be selected.
- EMS times should be times from the Community and does not include times from when.
- EMS dates and times are the ones recorded from the Community to the First Hospital. They do not include inter-hospital EMS travel.
- **Please use the EMS dates and times from the Community to the first Site. Do not fill in the EMS dates and times for inter-hospital transfers.**

**It is important that you enter the correct data into the QuICR Registry. For a list of definitions for the Add Stroke page, please refer to Table 4.**

Table 4: Edit Stroke Definitions

Term	Definition
Status	Either of two categories (Active or Closed). After all the data for a stroke has been collected and reviewed, it should be closed. Otherwise, the record should remain open.
EMS Verified	Check " <i>EMS Verified</i> " if EMS has uploaded EMS time stamp data for the stroke event. If this is checked, you will not be able to make changes to the EMS time stamp data until the box is unchecked.
Date of Onset	Date at which the patient was last known to be without the signs and symptoms of the current stroke or at his or her prior baseline. If the symptoms resolve and then stroke symptoms resume, the date of onset is the later or last time the symptoms appeared. Format: dd- <i>MMM</i> -yyyy (e.g. 01-Jan-1950).
Time of Onset	Time at which the patient was last known to be without the signs and symptoms of the current stroke or at his or her prior baseline. If the symptoms resolve and then stroke symptoms resume, the time of onset is the later or last time the symptoms appeared. Format HH:mm 24hr (e.g. 23:10).
Stroke Occurred In	Either of two categories (community or hospital). Select " <i>Community</i> " if stroke occurs while the patient is outside the hospital. Select " <i>Hospital</i> " if stroke (re)occurs while the patient is in a hospital with Inpatient beds (including in the Emergency Department).
Recognition Date	Date at which the patient was identified as having a stroke. Format dd- <i>MMM</i> -yyyy (e.g. 01-Jan-1950).
Recognition Time	Time at which the patient was identified as having a stroke. Format HH:mm 24hr (e.g. 23:10).
Patient Home Postal Code at Time of Stroke	Patient's home postal code at the time of stroke. (e.g. If a patient's primary residence is British Columbia and displays stroke symptoms while at their residence in Alberta; the postal code will be that of the primary residence in British Columbia). If the patient is from out-of-country, then leave the postal code field blank.
911 Call Date	Date that 911 was called for the current stroke. Format: dd- <i>MMM</i> -yyyy (e.g. 01-Jan-1950).
911 Call Time	Time that 911 was called for the current stroke. Format HH:mm 24hr (e.g. 23:10).
EMS Dispatch Date	Date that EMS was dispatched to go to the scene of the stroke. Format: dd- <i>MMM</i> -yyyy (e.g. 01-Jan-1950).
EMS Dispatch Time	Time that EMS was dispatched to go to the scene of the stroke. Format HH:mm 24hr (e.g. 23:10).
EMS on Scene Date	Date that the EMS crew arrived at the scene of the stroke. Format: dd- <i>MMM</i> -yyyy (e.g. 01-Jan-1950).
EMS on Scene Time	Time that the EMS crew arrived at the scene of the stroke. Format HH:mm 24hr (e.g. 23:10).
EMS Depart Scene Date	Date that the EMS crew left the scene of the stroke en route to the hospital. Format: dd- <i>MMM</i> -yyyy (e.g. 01-Jan-1950).



EMS Depart Scene Time	Time that the EMS crew left the scene of the stroke en route to the hospital. Format HH:mm 24hr (e.g. 23:10).
--------------------------	--

You will then be asked to confirm if the data entered are correct as shown in Figure 26. If the data is correct, select “Save” (boxed in red) if modifications are needed select “Cancel”. If “Save” is selected, you will be redirected to the most recent treatments Edit Treatment page. If the patient does not have a treatment added to the QuICR Registry, selecting “Save” will redirect you to the **Add Treatment** page.

Figure 26: Edit Stroke – Confirmation

Stroke for patient: Smith, John

1 Patient 2 Stroke 3 Treatment 4 In-Patient 5 90-Day Outcome

Please review and confirm stroke details before continuing

**Stroke History**

Full Name: Smith, John  
Stroke Onset: 01-Jan-2016 00:00  
Stroke occurred in: Community  
Postal Code: T2N4V6

**EMS Time Stamps**

911 Call: 01-Jan-2016 00:05  
EMS Dispatch: 01-Jan-2016 00:07  
EMS on Scene : 01-Jan-2016 00:18  
EMS Depart Scene : 01-Jan-2016 00:23

**SAVE** CANCEL

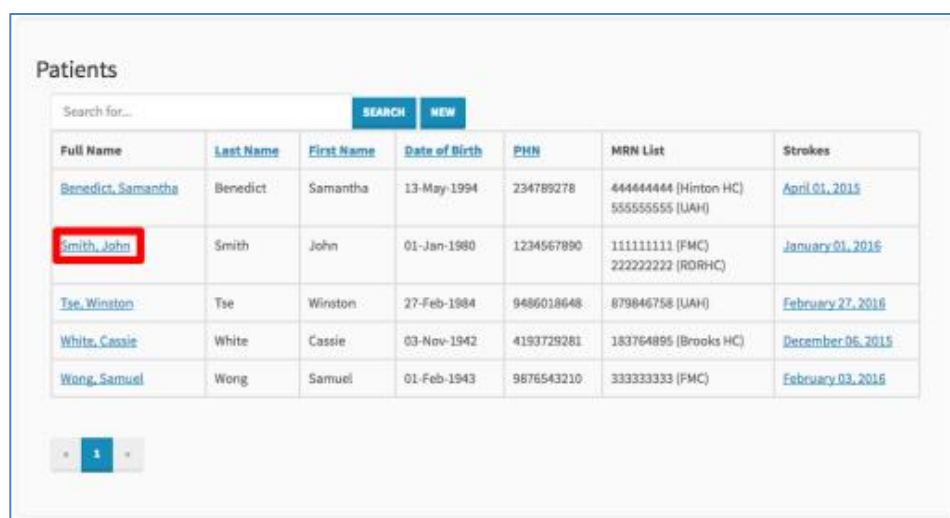
## 7 Step 3 - Adding Treatments

Adding a treatment is typically the third step when entering data about a stroke patient. To add a new treatment to the QuICR Registry, please refer to Section 7.1. If the treatment exists in the QuICR Registry, go to Section 7.2 and follow the instructions to navigate to and edit the treatment data. To enter treatment data for a patient that exists in the QuICR Registry but is not listed on the Homepage (the QuICR Registry is designed so that you are unable to view patients that were treated at other Stroke Centre) please see Section 7.3.

### 7.1 Adding a New Treatment

To add a new treatment, select the patient's full name (boxed in **red**) from the Homepage as shown in Figure 27.

Figure 27: Navigating to the Add New Treatment Page (1)



The screenshot shows the 'Patients' section of the QuICR Registry. At the top, there is a search bar with the text 'Search for...' and two buttons: 'SEARCH' and 'NEW'. Below the search bar is a table with the following columns: Full Name, Last Name, First Name, Date of Birth, PHN, MRN List, and Strokes. The table contains five rows of patient data. The second row, for 'Smith, John', has the full name highlighted with a red rectangular box. Below the table, there is a pagination control showing '1' in a blue box, indicating the first page of results.

Full Name	Last Name	First Name	Date of Birth	PHN	MRN List	Strokes
<a href="#">Benedict, Samantha</a>	Benedict	Samantha	13-May-1994	234789278	444444444 (Hinton HC) 555555555 (UAH)	<a href="#">April 01, 2015</a>
<b>Smith, John</b>	Smith	John	01-Jan-1980	1234567890	111111111 (FMC) 222222222 (RORHC)	<a href="#">January 01, 2016</a>
<a href="#">Tse, Winston</a>	Tse	Winston	27-Feb-1984	9486018648	879846758 (UAH)	<a href="#">February 27, 2016</a>
<a href="#">White, Cassie</a>	White	Cassie	03-Nov-1942	4193729281	183764895 (Brooks HC)	<a href="#">December 06, 2015</a>
<a href="#">Wong, Samuel</a>	Wong	Samuel	01-Feb-1943	9876543210	333333333 (FMC)	<a href="#">February 03, 2016</a>

Next, click on the existing stroke (boxed in **red**) you would like to edit as shown in Figure 28.

Figure 28: Navigating to the Add New Treatment Page (2)

Smith, John

### Patient Demographics

Full Name:	Smith, John	Middle Initials:	K
Date of Birth:	01-Jan-1980	Sex:	Male
PHN (British Columbia):	1234567890	Race:	Caucasian

### MRN(s)

Hospital/Healthcare Centre	MRN
Foothills Medical Centre	111111111
Red Deer Regional Hospital Centre	222222222

### Strokes

Stroke Onset	Hospitals/Healthcare Centres	View Report
Jan 01, 2016 12:00 AM	Red Deer Regional Hospital Centre, Foothills Medical Centre	<input type="button" value="View Report"/>

Next, click the “Add Additional Treatment Centre” button (boxed in **red**) as shown in Figure 29.

Figure 29: Navigating to the Add New Treatment Page (3)

Stroke on Stroke on January 01, 2016

### Stroke History

Full Name:	Smith, John
Date of Stroke Onset:	01-Jan-2016 00:00
Stroke occurred in:	Community
Patient Postal Code at time of Stroke:	T2N4V6

### EMS Time Stamp

911 Call DateTime:	01-Jan-2016 00:05
EMS Dispatch DateTime:	01-Jan-2016 00:07
EMS on Scene DateTime:	01-Jan-2016 00:18
EMS Depart Scene DateTime:	01-Jan-2016 00:23

### Hospital or Health Centres

Hospitals/Healthcare Centre	Arrival DateTime	Thrombolysis	Endovascular
-----------------------------	------------------	--------------	--------------

### In-Patient

24hr NIHSS: None

Quality Metrics	
DVT Prophylaxis	No
Dysphagia Swallowing Screen	No

### 90-Day Outcome

Determination Date:

Modality: Telephone

Disability Scales	
90-Day NIHSS:	
mRS:	
BI:	

You are now at the **Add Treatment page**. Here you will be able to add site specific, acute imaging, thrombolysis, and endovascular details to the QuICR Registry. Please enter all treatments given at **YOUR SITE** (unless adding or editing data for a referring site). Figure 30 shows the top half of the Add Treatment page filled in for a sample patient.

Figure 30: Add Treatment Page (Top Half)

## Add Treatment

1

2

3

4

5

Patient
Stroke
Treatment
In-Patient
90-Day Outcome

SAVE AND ADD ADDITIONAL TREATMENT CENTRE

Hospital/Healthcare Centre\*
Red Deer Regional Hospital Centre

Arrival Date: (dd-MMM-yyyy)
01-Jan-2016

Arrival Time: (HH:mm 24hr)
00:45

Arrival Method
EMS

Pre-treatment NIHSS
13

Discharge Date: (dd-MMM-yyyy)
01-Jan-2016

Discharge Time: (HH:mm 24hr)
02:00

Discharge Disposition
Transfer to another Hospital

### Acute Imaging

Type of Imaging*	First Slice Date:(dd-MMM-yyyy)	First Slice Time:(HH:mm 24hr)	Delete
CT	01-Jan-2016	00:55	
-----			Delete
-----			Delete

ADD ADDITIONAL ACUTE IMAGING

### Processes

Treatment With Telemedicine	Team Pre-notified by EMS
No	Yes
Direct To CT	Patient Registered as Unknown
Yes	UTD

#### Treatment Site Specific:

- Select the Hospital or Healthcare Centre from the drop down menu.
- The Arrival Date can be typed in the box (dd-MMM-yyyy) *or* by clicking in the box a drop down menu will appear and the Arrival Date can be selected.
  - **Leave the Arrival Date field blank for an in hospital stroke.**
- The Arrival Time can be typed in the box (hh:mm using 24-hour clock) *or* by clicking in the box a drop down menu will appear and the Arrival Time can be selected.
  - **Leave the Arrival Time field blank for an in hospital stroke.**
- Select the patient's method of arrival from the Arrival Method drop down menu.
- Enter the patient's Pre-Treatment NIHSS score in the box.
- When the patient is discharged from acute care, please enter the Discharge Date. The Discharge Date can be typed in the box (dd-MMM-yyyy) *or* by clicking in the box a drop down menu will appear and the Discharge Date can be selected. **Leave this field blank if the patient is still at your site. Please remember to fill the discharge date in when you receive the data.**
- When the patient is discharged from acute care, please enter the Discharge Time. The Discharge Time can be typed in the box (hh:mm using 24-hour clock) *or* by clicking in the box a drop down menu will appear and Discharge Time can be selected. **Leave this field blank if the patient is still at your site. Please remember to fill the discharge time in when you receive the data**

#### Acute Imaging:

- Select the type of imaging from the Type of Imaging drop down menu.
- The First Image Date can be typed in the box (dd-MMM-yyyy) *or* by clicking in the box a drop down menu will appear and the First Image Date can be selected.
- The First Image Time can be typed in the box (hh:mm using 24-hour clock) *or* by clicking in the box a drop down menu will appear and the First Image Time can be selected.
- If more than three types of imaging were performed, press “*Add Additional Acute Image*” button and another imaging field will appear. Repeat this as many times as necessary.
- If an imaging field needs to be deleted check the delete box and it will be removed when you save.

#### Processes:

If any of the following apply to the treatment, please select “Yes”:

- Treatment with Telemedicine: if telestroke was involved Inpatient care or treatment decisions.
- Stroke Team Pre-notified: if the stroke team was pre notified of the patient's arrival.
- Direct to CT: if the patient traveled directly from the emergency room to the CT scanner.
- Patient Admitted as Unknown: if the patient was initially admitted as “*unknown*” or if another rapid registration process was used in order to save time.

**It is important that you enter the correct data into the QuICR Registry. For a list of definitions for the top half of the Add Treatment page, please refer to Table 5 below.**

*Table 5: Add Treatment (Top Half) Definitions*

<b>Term</b>	<b>Definition</b>
Arrival Date	The earliest arrival date available from any of the following time stamps: 1) EMS arrival date 2) Patient registration or triage date or 3) CT start date If this is an in-hospital stroke, leave the arrival date blank. Format: dd-MMM-yyyy (e.g. 01-Jan-1950).
Arrival Time	Enter the earliest arrival time available from any of the following time stamps: 1) EMS arrival time; 2) Patient registration or triage time; or 3) CT start time. If this is an in-hospital stroke, leave the arrival time blank. Format HH:mm 24hr (e.g. 23:10).
Arrival Method	Modality of transportation used by the patient to arrive at the emergency department.
Pre-treatment NIHSS	National Institute of Health Stroke Scale (NIHSS) score given to the patient prior to treatment. The NIHSS is a standardized stroke severity scale used to describe neurological deficits in acute stroke patients. Minimum: 0, Maximum: 42.
Discharge Date	Date at which the patient leaves acute care at the hospital and either returns home or is transferred to another facility. (e.g. if the patient is discharged from acute care and transferred to a rehab or long term care ward (within the same institution) then date of discharge is the date of transfer). If the patient is not admitted to the hospital, use the date of discharge from the Emergency Department. If the patient is treated in a CT Ambulance, the date of discharge is the departure date after tPA has started. Format: dd-MMM-yyyy (e.g. 01-Jan-1950).
Discharge Time	Time at which the patient leaves acute care at the hospital and either returns home or is transferred to another facility. (e.g. if the patient is discharged from acute care and transferred to a rehab or long term care ward (within the same institution) then time of discharge is the time of transfer). If the patient is not admitted to the hospital, use the time of discharge from the Emergency Department. If the patient is treated in a CT Ambulance, the time of discharge is the departure time after tPA has started. Format HH:mm 24hr (e.g. 23:10).
Type of Imaging	Type of neuroimaging used for the patient in the acute phase (prior to treatment at the site).
First Slice Date	The date displayed on the first slice image. Format dd-MMM-yyyy (e.g. 01-Jan-1950).
First Slice Time	The time displayed on the first slice image. Format HH:mm 24hr (e.g. 23:10).
Treatment with Telemedicine	Select "Yes" if telestroke was used in diagnosis or treatment decisions. Select "No" if telestroke was not used in diagnosis or treatment decisions. Select "UTD" if it cannot be determined if telestroke was used in diagnosis or treatment decisions.
Stroke Team Pre-notified	Select "Yes" if the stroke/care team was notified of the incoming stroke before the patient's arrival. Select "No" if the stroke/care team was not notified of the incoming stroke before the patient's arrival. Select "UTD" if it cannot be determined if the stroke/care team was notified of the incoming stroke before the patient's arrival.
Direct to CT	Select "Yes" if the patient was transported directly from triage to the CT scanner on the EMS stretcher. Select "No" if the patient was not transported directly from triage to the CT scanner on the EMS stretcher. Select "UTD" if it cannot be determined if

	the patient was transported directly from triage to the CT scanner on the EMS stretcher.
Patient Registered as Unknown	Select "Yes" if the patient was registered as unknown, pre-registered prior to arrival, or another rapid registration process where the full registration of the patient was done in a rapid manner (as per your site's trauma protocol). Select "No" if there was no rapid registration process used and full registration was completed upon patient arrival in the ED. Select "UTD" if it cannot be determined if a rapid registration process was used.

You can then scroll down to enter more treatment data. If thrombolysis is administered at your site, check the **Thrombolysis Checkbox** to expand the selection. Here you will be able to edit or add a patient's thrombolysis data. Figure 31 shows the Thrombolysis portion of the Add Treatment page filled in with a sample patient.

*Figure 31: Add Treatment Page (Thrombolysis)*

### Thrombolysis

☒ Thrombolysis Administered

Thrombolysis Date: (dd-MMM-yyyy)

Thrombolysis Time: (HH:mm 24hr)

Thrombolysis Physician

Thrombolysis Location

Thrombolytic Drug

Patient Weight Est (kg)

Drug Dose (mg)

#### Thrombolysis Data:

- Thrombolysis Date can be typed in the box (dd-MMM-yyyy) *or* by clicking in the box a drop down menu will appear and the Thrombolysis Date can be selected.
- Thrombolysis Time can be typed in the box (hh:mm using 24-hour clock) *or* by clicking in the box a drop down menu will appear and the Thrombolysis Time can be selected.
- The Thrombolysis Physician can be selected from the drop down menu. If the physician's name is not listed "Add New" can be selected from the list and the physician's name can be entered.
- Select the Thrombolysis Location from the drop down menu.
- Select the Thrombolysis Drug from the drop down menu.
- Enter the patient's Weight in kilograms.
- Enter the Drug Dose in milligrams.



**It is Important that you enter the correct data into the QuICR Registry. For a list of definitions for the thrombolysis portion of the Add Treatment page, please refer to Table 6 below.**

*Table 6: Add Treatment (Thrombolysis) Definitions*

<b>Term</b>	<b>Definition</b>
Thrombolysis Administered	Check "Thrombolysis Administered" if thrombolysis (intravenous alteplase (tPA)) has been administered at the hospital.
Thrombolysis Date	Date when thrombolysis bolus was initiated. Format: dd-MMM-yyyy (e.g. 01-Jan-1950).
Thrombolysis Time	Time when thrombolysis bolus was initiated. Format HH:mm 24hr (e.g. 23:10).
Thrombolysis Physician	Name of the Most Responsible Physician that ordered thrombolysis at your site. If telemedicine was utilized, the Thrombolysis Physician is the physician at your site.
Thrombolysis Location	Location in the hospital where the patient was administered thrombolysis. Select Emergency Bay if it was administered in the ED; CT Scanner/Imaging area if it was administered while the patient was in the scanner or in the imaging area; Inpatient unit if the it was administered in an Inpatient bed (includes ICU and the Step Down Unit); angio suite if it was administered in the angio suite; or unable to determine.
Thrombolysis Drug	Thrombolytic drug name administered.
Drug Dose (mg)	Thrombolytic drug dose (mg).
Patient Weight est. (kg)	Estimated weight (kg). Do not enter the patient's weight in pounds.

You can then scroll down to enter more treatment data. If endovascular treatment is administered at your site, check the **Endovascular Checkbox** to expand the selection. shows the Endovascular portion of the Add Treatment page filled in with a sample patient. **This section only applies to Calgary (Foothills Hospital) and Edmonton (UAH) sites.**

Figure 32: Add Treatment Page (Endovascular)

### Endovascular

☒ Endovascular Treatment

Interventionist

Eesa, Muneer

Medical/Neurology

Bal, Simer

Groin Puncture Date: (dd-MMM-yyyy)

01-Jan-2016

Groin Puncture Time: (HH:mm 24hr)

03:28

TICI Scale (final)

Grade 2a (Less than 50%)

First Reperfusion Date: (dd-MMM-yyyy)

01-Jan-2016

First Reperfusion Time: (HH:mm 24hr)

03:45

### Endovascular Device Used

Device Used\*

EKOS US Catheter

Delete

Device Used\*

-----

Delete

ADD ADDITIONAL ENDOVASCULAR TREATMENT

#### Endovascular Data:

- The Interventionist can be selected from the drop down menu. If the physician's name is not listed "*Add New*" can be selected from the list and the physician's name can be entered.
- The Neurologist can be selected from the drop down menu. If the physician's name is not listed "*Add New*" can be selected from the list and the physician's name can be entered.
- Groin Puncture Date can be typed in the box (dd-MMM-yyyy) *or* by clicking in the box a drop down menu will appear and the Groin Puncture Date can be selected.
- Groin Puncture Time can be typed in the box (hh:mm using 24-hour clock) *or* by clicking in the box a drop down menu will appear and the Groin Puncture Time can be selected.
- Select the final TICI score from the drop down menu.
- First Reperfusion Date can be typed in the box (dd-MMM-yyyy) *or* by clicking in the box a drop down menu will appear and the First Reperfusion Date can be selected.
- First Reperfusion Time can be typed in the box (hh:mm using 24-hour clock) *or* by clicking in the box a drop down menu will appear and the First Reperfusion Time can be selected.
- Select the type of device used for endovascular treatment from the Device Used drop down menu.
- If more than two types of devices were used, press "*Add Additional Device*" button and another treatment field will appear. Repeat this as many times as necessary.
- If a device field needs to be deleted check the delete box and it will be removed when you move to the next screen.

**It is important that you enter the correct data into the QuICR Registry. For a list of definitions for the endovascular portion of the Add Treatment page, please refer to Table 7 below.**

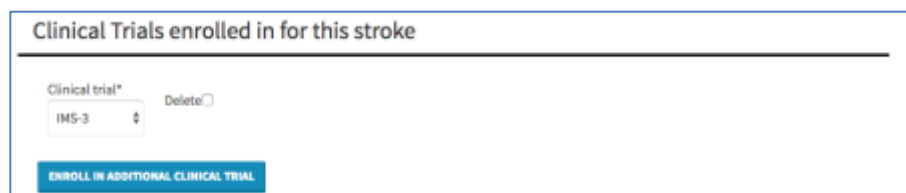
*Table 7: Add Treatment (Endovascular) Definitions*

<b>Term</b>	<b>Definition</b>
Endovascular Administered	Check " <i>Endovascular Administered</i> " if endovascular treatment has been administered at the hospital.
Interventionist	Name of the interventionist that performed the endovascular procedure.
Medical/Neurology	Name of the physician who was the medical/neurology lead during the procedure.
Groin Puncture Date	Date when the arterial access is obtained during endovascular treatment. Format: dd-MMM-yyyy (e.g. 01-Jan-1950).
Groin Puncture Time	Time when the arterial access is obtained during endovascular treatment. Format: HH:mm (e.g. 23:10).
mTICI Scale (final)	Final reperfusion that was achieved after the endovascular procedure.
First Reperfusion Date	Date of first re-flow into the affected vascular territory. The vascular territory could be defined by the major proximal vessel that the stent is opened in (this definition would cover posterior circulation). For example, it could mean complete reflow OR it could mean flow into one major M2 branch while the other remained occluded. Format: dd-MMM-yyyy (e.g. 01-Jan-1950).
First Reperfusion Time	Time of first re-flow into the affected vascular territory. The vascular territory could be defined by the major proximal vessel that the stent is opened in (this definition would cover posterior circulation). Format: HH:mm (e.g. 23:10).
Device Used	Device used during endovascular treatment.

You can then scroll down to enter more treatment data. Next you will see the Clinical Trials data entry fields. Here you will be able to add the patient's clinical trials.

The Clinical Trials page is shown below in Figure 33.

*Figure 33: Add Treatment Page (Enter Clinical Trials)*



Clinical Trials:

- If the patient was enrolled in a Clinical Trial, you can select it from the drop down menu.
- If the patient was enrolled in more than one clinical trial, press the “*Enroll in Additional Clinical Trial*” button and another clinical trial field will appear. Repeat this as many times as necessary.
- If a clinical trial field needs to be deleted check the delete box and it will be removed when you move to the next screen.

**It is important that you enter the correct data into the QuICR Registry. For a list of definitions for the clinical trials portion of the Add Treatment page, please refer to Table 8 below.**

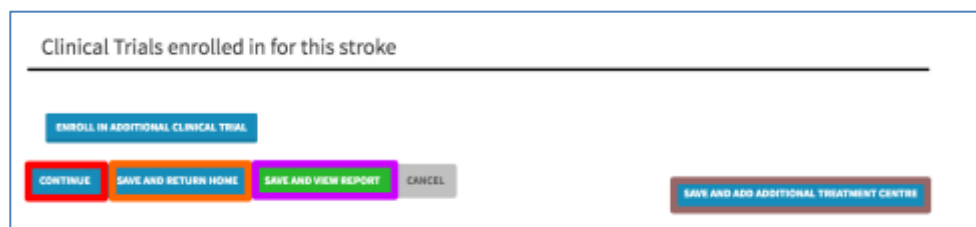
*Table 8: Add Treatment (Clinical Trial) Definition*

Term	Definition
Clinical Trial	Select the clinical trials that the patient was enrolled in at your site.

Once all treatment data are entered and you are ready to enter Inpatient data, select “*Continue*” (boxed in **red**). If you do not have Inpatient data at this time, and do not wish to print the Acute Stroke 72-Hour Report select “*Save And Return Home*” (boxed in **orange**). If you have data from a different Treatment Centre to enter press “*Save and Add Additional Treatment Centre*” (boxed in **brown**). If you would like to view or print the Acute Stroke 72-Hour Report, select “*Save and View Report*” (boxed in **purple**). The save and navigation options are shown in Figure 34.

If you would like to add additional details about the patient’s treatment or stroke, that is not captured in the QuICR Registry, feel free to utilize the Notes section on this page.

*Figure 34: Add Treatment Page – Save and Navigation Options*



The screenshot displays a web interface for the 'Add Treatment Page'. At the top, there is a header 'Clinical Trials enrolled in for this stroke' followed by a horizontal line. Below this, there is a blue button labeled 'ENROLL IN ADDITIONAL CLINICAL TRIAL'. Underneath, there is a row of four buttons: 'CONTINUE' (highlighted with a red border), 'SAVE AND RETURN HOME' (highlighted with an orange border), 'SAVE AND VIEW REPORT' (highlighted with a purple border), and 'CANCEL' (grey). To the right of these buttons, there is a larger button labeled 'SAVE AND ADD ADDITIONAL TREATMENT CENTRE' (highlighted with a brown border).

You will then be asked to confirm if the data entered are correct. If the data is correct, select “Save” (boxed in **red**). If modifications are needed select “Cancel”. This is shown in Figure 35.

Figure 35: Add Treatment - Confirmation

Home > Smith, John > Stroke on January 01, 2016 > New Treatment

1
2
3
4
5

Patient
Stroke
Treatment
In-Patient
90-Day Outcome

## Add Treatment

Please review and confirm treatment details before continuing

### Treatment Details

Stroke on:	Jan 01, 2016	Hospital/Healthcare Centre:	Foothills Medical Centre
Arrived on:	01-Jan-2016 03:00	Arrival Method:	EMS
Pre-treat NIHSS:		Discharge Disposition:	Rehab Hospital
Discharged on:	02-Jan-2016 12:00		

### Acute Imaging

Type of Imaging	First Slice DateTime
CT	01-Jan-2016 03:10
CTA	01-Jan-2016 03:15

### Processes

Treatment With Telemedicine:	UTD	Team Pre-notified by EMS:	UTD
Direct To CT:	UTD	Patient Registered as Unknown:	UTD

### Thrombolysis

Thrombolysis Administered:	No
----------------------------	----

### Endovascular

Endovascular Treatment:	Yes	Neurologist:	Bal, Simer
Interventionist:	Eesa, Muneer	TICI:	Grade 2a (Less than 50%)
Groin Puncture Datetime:	01-Jan-2016 3:30 a.m.		
First Reperfusion Datetime:	01-Jan-2016 3:45 a.m.		

Devices/Thrombolytic  
EKOS US Catheter

### Clinical Trials

IMS-3 (FMC)

SAVE

CANCEL

By clicking “Continue” then “Save”, you will be re-directed to the **Edit Inpatient** page.

## 7.2 Editing Existing Treatment Data

To navigate to the Edit Treatment page for the treatment you wish to edit, go to the Homepage and click on the patient's full name (boxed in **red**) as shown in Figure 36.

Figure 36: Navigating to the Edit Treatment Page (1)

Patients

Search for... SEARCH NEW

Full Name	Last Name	First Name	Date of Birth	PHN	MRN List	Strokes
<a href="#">Benedict, Samantha</a>	Benedict	Samantha	13-May-1994	234789278	44444444 (Hinton HC) 55555555 (UAH)	<a href="#">April 01, 2015</a>
<b><a href="#">Smith, John</a></b>	Smith	John	01-Jan-1980	1234567890	11111111 (FMC) 22222222 (RORHC)	<a href="#">January 01, 2016</a>
<a href="#">Tse, Winston</a>	Tse	Winston	27-Feb-1984	9486018648	879846758 (UAH)	<a href="#">February 27, 2016</a>
<a href="#">White, Cassie</a>	White	Cassie	03-Nov-1942	4193729281	183764895 (Brooks HC)	<a href="#">December 06, 2015</a>
<a href="#">Wong, Samuel</a>	Wong	Samuel	01-Feb-1943	9876543210	33333333 (FMC)	<a href="#">February 03, 2016</a>

1

Next, click on the existing treatment (boxed in **red**) you would like to edit as shown in Figure 37.

Figure 37: Navigating to the Edit Treatment Page (2)

Home > Smith, John > Smith, John

Smith, John

### Patient Demographics

Full Name:	Smith, John	Middle Initials:	K		
Date of Birth:	01-Jan-1980	Sex:	Male	Race:	Caucasian
PHN (British Columbia):	1234567890				

### MRN(s)

Hospital/Healthcare Centre	MRN
Foothills Medical Centre	111111111
Red Deer Regional Hospital Centre	222222222

### Strokes

Stroke Onset	Hospital/Healthcare Centres	View Report
Jan 01, 2016 12:00 AM	Red Deer Regional Hospital Centre, <b>Foothills Medical Centre</b>	<input type="checkbox"/>

ADD STROKE EDIT PATIENT



Next, click on the “*Edit Treatment*” button (boxed in **red**) as shown in Figure 38.

*Figure 38: Navigating to the Edit Treatment Page (3)*

[← PREVIOUS HOSPITAL/HEALTHCARE CENTRE](#)

Treatment at Foothills Medical Centre

### Treatment Details

Stroke:	Stroke on January 01, 2016	Hospital/Healthcare Centre:	Foothills Medical Centre
Arrival Datetime:	01-Jan-2016 02:10	Arrival Method:	EMS
Pre-treatment NIHSS:	13		

### Acute Imaging

Type of Imaging	First Slice DateTime
CT	01-Jan-2016 02:20

### Treatment

#### Thrombolysis

Thrombolysis Administered:	No
----------------------------	----

#### Endovascular

Endovascular Device Used:	Yes	Neurologist:	Coutts, Shelagh
Interventionist:	Wong, John	TICI:	Grade 2a (Less than 50%)
Groin Puncture Datetime:	01-Jan-2016 02:38		
First Reperfusion Datetime:	01-Jan-2016 02:56		

#### Endovascular Device Used

Device Used	Drug (if applicable)
MERC1 Retriever	
TREVO Stentriever	

### Clinical Trials

Name
ALIAS-1

EDIT TREATMENT

ADD ADDITIONAL TREATMENT CENTRE

You are now at the **Edit Treatment** page. Here you will be able to edit site specific, acute imaging, thrombolysis, and endovascular details to the QuICR Registry. Please enter all treatments given at **YOUR SITE** (unless adding or editing data for a referring site). Figure 39 shows the top half of the Edit Treatment page filled in for a sample patient.

Figure 39: Edit Treatment Page (Top Half)

## Add Treatment

1

2

3

4

5

Patient
Stroke
Treatment
In-Patient
90-Day Outcome

SAVE AND ADD ADDITIONAL TREATMENT CENTRE

Hospital/Healthcare Centre\*
Red Deer Regional Hospital Centre
Arrival Date: (dd-MMM-yyyy)
01-Jan-2016
Arrival Time: (HH:mm 24hr)
00:45

Arrival Method
EMS
Pre-treatment NIHSS
13

Discharge Date: (dd-MMM-yyyy)
01-Jan-2016
Discharge Time: (HH:mm 24hr)
02:00
Discharge Disposition
Transfer to another Hospital

### Acute Imaging

Type of Imaging*	First Slice Date:(dd-MMM-yyyy)	First Slice Time:(HH:mm 24hr)	Delete
CT	01-Jan-2016	00:55	
			Delete
			Delete

ADD ADDITIONAL ACUTE IMAGING

### Processes

Treatment With Telemedicine	Team Pre-notified by EMS
No	Yes
Direct To CT	Patient Registered as Unknown
Yes	UTD

#### Treatment Site Specific:

- Select the Hospital or Healthcare Centre from the drop down menu.
- The Arrival Date can be typed in the box (dd-MMM-yyyy) *or* by clicking in the box a drop down menu will appear and the Arrival Date can be selected.
  - **Leave the Arrival Date field blank for an in hospital stroke.**
- The Arrival Time can be typed in the box (hh:mm using 24-hour clock) *or* by clicking in the box a drop down menu will appear and the Arrival Time can be selected.
  - **Leave the Arrival Time field blank for an in hospital stroke.**
- Select the patient's method of arrival from the Arrival Method drop down menu.
- Enter the patient's Pre-Treatment NIHSS score in the box.
- When the patient is discharged from acute care, please enter the Discharge Date. The Discharge Date can be typed in the box (dd-MMM-yyyy) *or* by clicking in the box a drop down menu will appear and the Discharge Date can be selected. **Leave this field blank if the patient is still at your site. Please remember to fill the discharge date in when you receive the data.**
- When the patient is discharged from acute care, please enter the Discharge Time. The discharge Time can be typed in the box (hh:mm using 24-hour clock) *or* by clicking in the box a drop down menu will appear and Discharge Time can be selected. **Leave this field blank if the patient is still at your site. Please remember to fill the discharge time in when you receive the data**

#### Acute Imaging:

- Select the type of imaging from the Type of Imaging drop down menu.
- The First Image Date can be typed in the box (dd-MMM-yyyy) *or* by clicking in the box a drop down menu will appear and the First Image Date can be selected.
- The First Image Time can be typed in the box (hh:mm using 24-hour clock) *or* by clicking in the box a drop down menu will appear and the First Image Time can be selected.
- If more than three types of imaging were performed, press “*Add Additional Acute Image*” button and another imaging field will appear. Repeat this as many times as necessary.
- If an imaging field needs to be deleted check the delete box and it will be removed when you save.

#### Processes:

If any of the following apply to the treatment, please select “Yes”:

- Treatment with Telemedicine: if telestroke was involved Inpatient care or treatment decisions.
- Stroke Team Pre-notified: if the stroke team was pre notified of the patient's arrival.
- Direct to CT: if the patient traveled directly from the emergency room to the CT scanner.
- Patient Admitted as Unknown: if the patient was initially admitted as “*unknown*” or if another rapid registration process was used in order to save time.

**It is important that you enter the correct data into the QuICR Registry. For a list of definitions for the top half of the Edit Treatment page, please refer to Table 9 below.**

*Table 9: Edit Treatment Page (Top Half) Definitions*

<b>Term</b>	<b>Definition</b>
Arrival Date	The earliest arrival date available from any of the following time stamps: 1) EMS arrival date 2) Patient registration or triage date or 3) CT start date If this is an in-hospital stroke, leave the arrival date blank. Format: dd-MMM-yyyy (e.g. 01-Jan-1950).
Arrival Time	Enter the earliest arrival time available from any of the following time stamps: 1) EMS arrival time; 2) Patient registration or triage time; or 3) CT start time. If this is an in-hospital stroke, leave the arrival time blank. Format HH:mm 24hr (e.g. 23:10).
Arrival Method	Modality of transportation used by the patient to arrive at the emergency department.
Pre-treatment NIHSS	National Institute of Health Stroke Scale (NIHSS) score given to the patient prior to treatment. The NIHSS is a standardized stroke severity scale used to describe neurological deficits in acute stroke patients. Minimum: 0, Maximum: 42.
Discharge Date	Date at which the patient leaves acute care at the hospital and either returns home or is transferred to another facility. (e.g. if the patient is discharged from acute care and transferred to a rehab or long term care ward (within the same institution) then date of discharge is the date of transfer). If the patient is not admitted to the hospital, use the date of discharge from the Emergency Department. If the patient is treated in a CT Ambulance, the date of discharge is the departure date after tPA has started. Format: dd-MMM-yyyy (e.g. 01-Jan-1950).
Discharge Time	Time at which the patient leaves acute care at the hospital and either returns home or is transferred to another facility. (e.g. if the patient is discharged from acute care and transferred to a rehab or long term care ward (within the same institution) then time of discharge is the time of transfer). If the patient is not admitted to the hospital, use the time of discharge from the Emergency Department. If the patient is treated in a CT Ambulance, the time of discharge is the departure time after tPA has started. Format HH:mm 24hr (e.g. 23:10).
Type of Imaging	Type of neuroimaging used for the patient in the acute phase (prior to treatment at the site).
First Slice Date	The date displayed on the first slice image. Format dd-MMM-yyyy (e.g. 01-Jan-1950).
First Slice Time	The time displayed on the first slice image. Format HH:mm 24hr (e.g. 23:10).
Treatment with Telemedicine	Select "Yes" if telestroke was used in diagnosis or treatment decisions. Select "No" if telestroke was not used in diagnosis or treatment decisions. Select "UTD" if it cannot be determined if telestroke was used in diagnosis or treatment decisions.
Stroke Team Pre-notified	Select "Yes" if the stroke/care team was notified of the incoming stroke before the patient's arrival. Select "No" if the stroke/care team was not notified of the incoming stroke before the patient's arrival. Select "UTD" if it cannot be determined if the stroke/care team was notified of the incoming stroke before the patient's arrival.
Direct to CT	Select "Yes" if the patient was transported directly from triage to the CT scanner on the EMS stretcher. Select "No" if the patient was not transported directly from triage

	to the CT scanner on the EMS stretcher. Select "UTD" if it cannot be determined if the patient was transported directly from triage to the CT scanner on the EMS stretcher.
Patient Registered as Unknown	Select "Yes" if the patient was registered as unknown, pre-registered prior to arrival, or another rapid registration process where the full registration of the patient was done in a rapid manner (as per your site's trauma protocol). Select "No" if there was no rapid registration process used and full registration was completed upon patient arrival in the ED. Select "UTD" if it cannot be determined if a rapid registration process was used.

You can then scroll down to enter more treatment data. If thrombolysis is administered at your site, check the **Thrombolysis Checkbox** to expand the selection. Here you will be able to edit or add a patient's thrombolysis data. **Figure 40** shows the Thrombolysis portion of the Edit Treatment page filled in with a sample patient.

*Figure 40: Edit Treatment Page (Thrombolysis)*

### Thrombolysis

☒ Thrombolysis Administered

Thrombolysis Date: (dd-MMM-yyyy)

01-Jan-2016

Thrombolysis Time: (HH:mm 24hr)

01:15

Thrombolysis Physician

Barber, Philip

Thrombolysis Location

Emergency Bay

Thrombolytic Drug

Alteplase (tPA)

Patient Weight Est (kg)

50

Drug Dose (mg)

40

#### Thrombolysis Data:

- Thrombolysis Date can be typed in the box (dd-MMM-yyyy) *or* by clicking in the box a drop down menu will appear and the Thrombolysis Date can be selected.
- Thrombolysis Time can be typed in the box (hh:mm using 24-hour clock) *or* by clicking in the box a drop down menu will appear and the Thrombolysis Time can be selected.
- The Thrombolysis Physician can be selected from the drop down menu. If the physician's name is not listed "Add New" can be selected from the list and the physician's name can be entered.
- Select the Thrombolysis Location from the drop down menu.
- Select the Thrombolysis Drug from the drop down menu.
- Enter the patient's Weight in kilograms.
- Enter the Drug Dose in milligrams.

**It is Important that you enter the correct data into the QuICR Registry. For a list of definitions for the thrombolysis portion of the Edit Treatment page, please refer to Table 10 below.**

*Table 10: Edit Treatment (Thrombolysis) Definitions*

<b>Term</b>	<b>Definition</b>
Thrombolysis Administered	Check "Thrombolysis Administered" if thrombolysis (intravenous alteplase (tPA)) has been administered at the hospital.
Thrombolysis Date	Date when thrombolysis bolus was initiated. Format: dd-MMM-yyyy (e.g. 01-Jan-1950).
Thrombolysis Time	Time when thrombolysis bolus was initiated. Format HH:mm 24hr (e.g. 23:10).
Thrombolysis Physician	Name of the Most Responsible Physician that ordered thrombolysis at your site. If telemedicine was utilized, the Thrombolysis Physician is the physician at your site.
Thrombolysis Location	Location in the hospital where the patient was administered thrombolysis. Select Emergency Bay if it was administered in the ED; CT Scanner/Imaging area if it was administered while the patient was in the scanner or in the imaging area; Inpatient unit if the it was administered in an Inpatient bed (includes ICU and the Step Down Unit); angio suite if it was administered in the angio suite; or unable to determine.
Thrombolysis Drug	Thrombolytic drug name administered.
Drug Dose (mg)	Thrombolytic drug dose (mg).
Patient Weight est. (kg)	Estimated weight (kg). Do not enter the patient's weight in pounds.

You can then scroll down to enter more treatment data. If endovascular is administered at your site, check the **Endovascular Checkbox** to expand the selection. Here you will be able to edit or add a patient's endovascular data. Figure 41 shows the Endovascular portion of the Edit Treatment page filled in with a sample patient.

*Figure 41: Edit Treatment Page (Endovascular)*

### Endovascular

☒ Endovascular Treatment

Interventionist  
Eesa, Muneer

Medical/Neurology  
Bal, Simer

Groin Puncture Date: (dd-MMM-yyyy)  
01-Jan-2016

Groin Puncture Time: (HH:mm 24hr)  
03:28

TICI Scale (final)  
Grade 2a (Less than 50%)

First Reperfusion Date: (dd-MMM-yyyy)  
01-Jan-2016

First Reperfusion Time: (HH:mm 24hr)  
03:45

### Endovascular Device Used

Device Used\*  
EKOS US Catheter

Delete

Device Used\*  
-----

Delete

ADD ADDITIONAL ENDOVASCULAR TREATMENT

#### Endovascular Data:

- The Interventionist can be selected from the drop down menu. If the physician's name is not listed "*Add New*" can be selected from the list and the physician's name can be entered.
- The Neurologist can be selected from the drop down menu. If the physician's name is not listed "*Add New*" can be selected from the list and the physician's name can be entered.
- Groin Puncture Date can be typed in the box (dd-MMM-yyyy) *or* by clicking in the box a drop down menu will appear and the Groin Puncture Date can be selected.
- Groin Puncture Time can be typed in the box (hh:mm using 24-hour clock) *or* by clicking in the box a drop down menu will appear and the Groin Puncture Time can be selected.
- Select the final TICI score from the drop down menu.
- First Reperfusion Date can be typed in the box (dd-MMM-yyyy) *or* by clicking in the box a drop down menu will appear and the First Reperfusion Date can be selected.
- First Reperfusion Time can be typed in the box (hh:mm using 24-hour clock) *or* by clicking in the box a drop down menu will appear and the First Reperfusion Time can be selected.
- Select the type of device used for endovascular treatment from the Device Used drop down menu.
- If more than two types of devices were used, press "*Add Additional Device*" button and another treatment field will appear. Repeat this as many times as necessary.
- If a device field needs to be deleted check the delete box and it will be removed when you move to the next screen.



**It is important that you enter the correct data into the QuICR Registry. For a list of definitions for the endovascular portion of the Edit Treatment page, please refer to Table 11 below.**

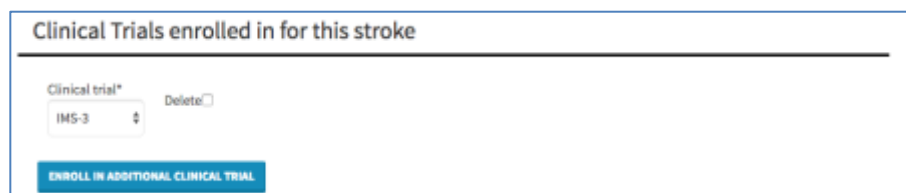
*Table 11: Edit Treatment (Endovascular) Definitions*

<b>Term</b>	<b>Definition</b>
Endovascular Administered	Check " <i>Endovascular Administered</i> " if endovascular has been administered at the hospital.
Interventionist	Name of the interventionist that performed the endovascular procedure.
Medical/Neurology	Name of the physician who was the medical/neurology lead during the procedure.
Groin Puncture Date	Date when arterial access was obtained during endovascular treatment. Format: dd-MMM-yyyy (e.g. 01-Jan-1950).
Groin Puncture Time	Time when the arterial access is obtained during endovascular treatment. Format: HH:mm (e.g. 23:10).
mTICI Scale (final)	Final reperfusion that was achieved after the endovascular procedure.
First Reperfusion Date	Date of first re-flow into the affected vascular territory. The vascular territory could be defined by the major proximal vessel that the stent is opened in (this definition would cover posterior circulation). It could mean complete reflow OR it could mean flow into one major M2 branch while the other remained occluded. Format: dd-MMM-yyyy (e.g. 01-Jan-1950).
First Reperfusion Time	Time of first re-flow into the affected vascular territory. The vascular territory could be defined by the major proximal vessel that the stent is opened in (this definition would cover posterior circulation). It could mean complete reflow OR it could mean flow into one major M2 branch while the other remained occluded. Format: HH:mm (e.g. 23:10).
Device Used	Device used during endovascular treatment.

You can then scroll down to enter more treatment data. Next you will see the Clinical Trials data entry fields. Here you will be able to edit the patient's clinical trials.

The Clinical Trials page is shown below in Figure 33.

*Figure 42: Edit Treatment Page (Clinical Trials)*



Clinical Trials:

- If the patient was enrolled in a Clinical Trial, you can select it from the drop down menu.
- If the patient was enrolled in more than one clinical trial, press the “*Enroll in Additional Clinical Trial*” button and another clinical trial field will appear. Repeat this as many times as necessary.
- If a clinical trial field needs to be deleted check the delete box and it will be removed when you move to the next screen.


**It is important that you enter the correct data into the QuICR Registry. For a list of definitions for the clinical trials portion of the Edit Treatment page, please refer to Table 12 below.**

*Table 12: Edit Treatment (Clinical Trial) Definition*

Term	Definition
Clinical Trial	Select the clinical trials that the patient was enrolled in at your site.

Once all the treatment data are edited and you would like to view or print the Acute Stroke 72-Hour Report, select “*Save and View Report*” (boxed in **purple**) Once all treatment data are edited and you are ready to enter Inpatient data, select “*Continue*” (boxed in **red**). If you do not have Inpatient data at this time, and do not wish to print the Acute Stroke 72-Hour Report select “*Save And Return Home*” (boxed in **orange**). If you have data from a different Treatment Centre to enter press “*Save and Add Additional Treatment Centre*” (boxed in **brown**). The save and navigation options are shown in Figure 43.

*Figure 43: Edit Treatment Page – Save and Navigation Options*



The screenshot shows a web interface for clinical trials. At the top, there is a header "Clinical Trials enrolled in for this stroke" followed by a horizontal line. Below the line, there is a blue button labeled "ENROLL IN ADDITIONAL CLINICAL TRIAL". Underneath this, there is a row of four buttons: "CONTINUE" (boxed in red), "SAVE AND RETURN HOME" (boxed in orange), "SAVE AND VIEW REPORT" (boxed in purple), and "CANCEL" (grey). To the right of these buttons, there is a separate brown button labeled "SAVE AND ADD ADDITIONAL TREATMENT CENTRE".

You will then be asked to confirm if the data entered are correct. If the data is correct, select “Save” (boxed in red). If modifications are needed select “Cancel”. This is shown in Figure 44.

Figure 44: Edit Treatment - Confirmation

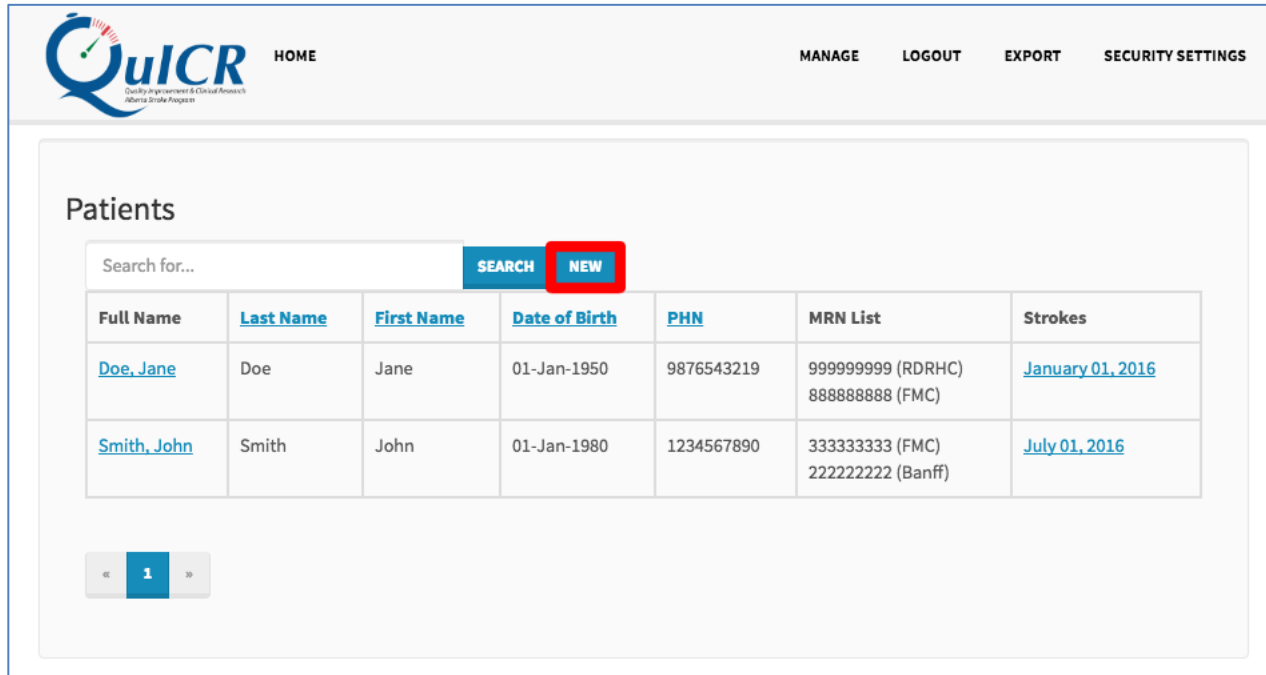
The screenshot shows a web application interface for editing patient data. At the top, a breadcrumb trail reads: Home > Smith, John > Stroke on January 01, 2016 > In-Patient. On the right, patient information is displayed: Smith, John; DOB: 01-JAN-1980; PHN: 1234567890. A progress bar at the top center shows five steps: 1 Patient, 2 Stroke, 3 Treatment, 4 In-Patient (current step), and 5 90-Day Outcome. The main heading is 'Edit In-Patient'. Below it, the '24-Hour Follow-Up' section contains the text 'Cannot determine the 24-Hour NIHSS' with a small icon. The 'NIHSS At 24h' field has a value of '10'. The 'Quality Metrics' section includes two dropdown menus: 'DVT Prophylaxis' set to 'Yes' and 'Dysphagia Swallowing Screen' set to 'No'. The 'Adverse Events' section has a table with columns: Neurological Worsening, Adverse Event Type, and Delete. One event is listed with a checked box in the first column, 'DVT/PE' in the second, and a delete icon in the third. Below the table is a button labeled 'ADD ADDITIONAL ADVERSE EVENT'. At the bottom, there are four buttons: 'CONTINUE' (highlighted with a red border), 'SAVE AND RETURN HOME' (highlighted with an orange border), 'SAVE AND VIEW REPORT' (highlighted with a green border), and 'CANCEL' (greyed out).

By clicking “Continue” then “Save”, you will be re-directed to the **Edit Inpatient** page.

### 7.3 Adding A New Treatment (For Existing Patients Not Listed On The Homepage)

To enter treatment data for a patient that exists in the QuICR Registry but is not listed on the Homepage (the QuICR Registry is designed so that you are unable to view patients that were treated at other Stroke Centre) click “New” (boxed in **red**) from the Homepage as shown in Figure 45. You will be redirected to the Find or Add Patient page.

Figure 45: Navigating to the Add New Treatment Page (1)



The screenshot shows the QuICR homepage. At the top, there is a navigation bar with the QuICR logo, a 'HOME' link, and links for 'MANAGE', 'LOGOUT', 'EXPORT', and 'SECURITY SETTINGS'. Below the navigation bar, the 'Patients' section is displayed. It features a search bar with a 'SEARCH' button and a 'NEW' button, which is highlighted with a red box. Below the search bar is a table with two rows of patient data. At the bottom of the 'Patients' section, there is a pagination control showing '1'.

Full Name	Last Name	First Name	Date of Birth	PHN	MRN List	Strokes
<a href="#">Doe, Jane</a>	Doe	Jane	01-Jan-1950	9876543219	999999999 (RDRHC) 888888888 (FMC)	<a href="#">January 01, 2016</a>
<a href="#">Smith, John</a>	Smith	John	01-Jan-1980	1234567890	333333333 (FMC) 222222222 (Banff)	<a href="#">July 01, 2016</a>

On the Find or Add Patient page, please enter the existing patient's demographic data and click “Continue” (boxed in red) as shown in Figure 46. For additional information and guidance on how to enter data for the Find or Add Patient page.

Figure 46: Navigating to the Add New Treatment Page (2)

HOME MANAGE LOGOUT EXPORT SECURITY SETTINGS

Home > New Patient

## Find or Add Patient

1 Patient 2 Stroke 3 Treatment 4 In-Patient 5 90-Day Outcome

Last Name\* Smith First Name\* John Middle Initials  
 Date of Birth (dd-MM-yyyy)\* 01-Jan-1980 Sex\* Male Race\* Caucasian  
 Personal Health Number 1234567890 Personal Health Number Type\* British Colum

### Hospital/Healthcare Centre Identification Numbers

Hospital/Healthcare Centre\* Identification Number\* ☐ Delete

ADD ADDITIONAL HOSPITAL/HEALTHCARE CENTRE NUMBER

CONTINUE CREATE AND RETURN HOME CANCEL

If the patient already exists in the database (meaning they have had a prior stroke) you will see a screen similar to Figure 47. If this is the same patient select “Use This Patient” (boxed in red) and you will be able to update data for their current stroke and add additional treatments. If this is not the correct patient (just one with a similar name or PHN) select “Cancel” and ensure that the information entered is correct.

Figure 47: Navigating to the Add New Treatment Page (3)

The registry contains a similar patient.  
Would you like to continue with the patient below or create a new one?

Patient Demographics	Hospital Identification Numbers
Full Name: Smith, John A	Medicine Hat Regional Hospital: 111111111
Date of Birth: 01-Jan-1980	Foothills Medical Centre: 222222222
Sex: Male	
Race: Caucasian	
PHN: 1234567890 (British Columbia)	

**Strokes**

**USE THIS PATIENT** **CREATE NEW** **CANCEL**

If you click “Use This Patient” you will be redirected to the Edit Patient page. The Edit Patient page is shown in Figure 48. From the Edit Patient page, use the navigation options to 1) edit the patient data, 2) edit the stroke event data, 3) add a new stroke event and add a new treatment, 4) edit an existing stroke event and edit an existing treatment, and 4) edit an existing stroke and add a new stroke event.

Figure 48: Edit Patient Page

HOME MANAGE LOGOUT EXPORT SECURITY SETTINGS

Home > Smith, John

**Patient: Smith, John**

1 Patient 2 Stroke 3 Treatment 4 In-Patient 5 90-Day Outcome

Last Name\* Smith First Name\* John Middle Initials A  
 Date of Birth (dd-mm-yyyy)\* 01-Jan-1980 Sex\* Male Race\* Caucasian  
 Personal Health Number 1234567890 Personal Health Number Type\* British Colum

**Hospital/Healthcare Centre Identification Numbers**

Hospital/Healthcare Centre\* Identification Number\* ☐ Delete  
 Foothills Medical Centre 333333333  
 Hospital/Healthcare Centre\* Identification Number\* ☐ Delete  
 Banff - Mineral Springs Hospital 222222222

**ADD ADDITIONAL HOSPITAL/HEALTHCARE CENTRE NUMBER**

**Strokes**

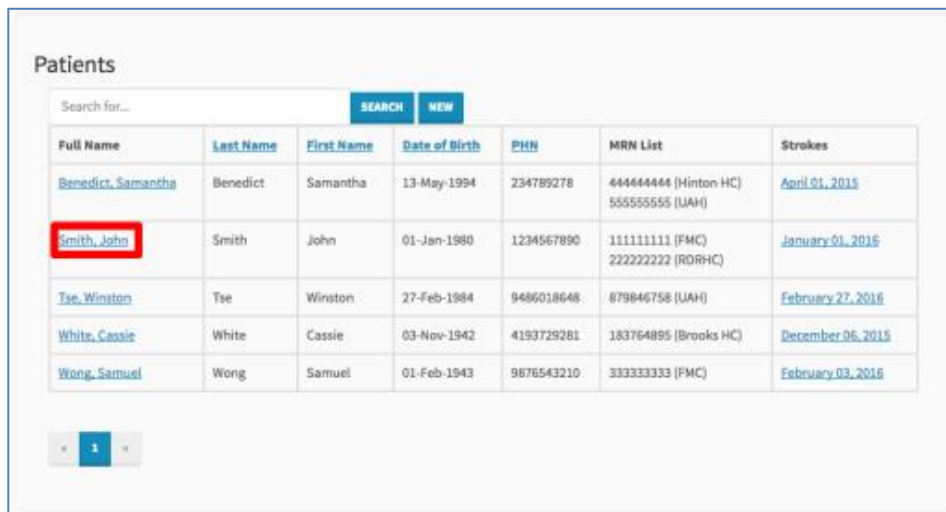
Stroke on July 01, 2016

**CONTINUE SAVE AND RETURN HOME CANCEL**

## 8 Step 4 – Edit Inpatient Data

Editing a patient's Inpatient data is typically the fourth step when entering data about a stroke patient. To add or edit a patient's Inpatient data, select the patient's full name (boxed in **red**) from the Homepage as shown in Figure 49.

Figure 49: Navigating to the Edit Inpatient Page (1)



Patients

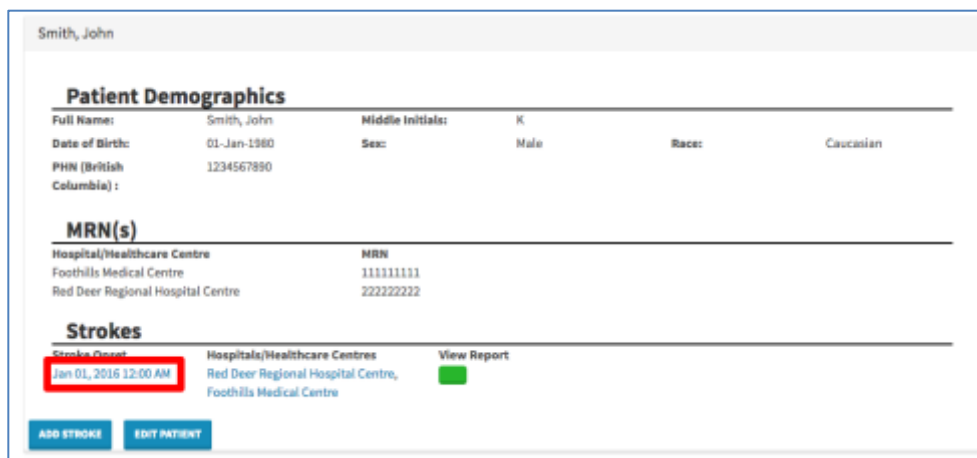
Search for... SEARCH NEW

Full Name	Last Name	First Name	Date of Birth	PHN	MRN List	Strokes
<a href="#">Benedict, Samantha</a>	Benedict	Samantha	13-May-1994	234789278	44444444 (Hinton HC) 55555555 (UAH)	<a href="#">April 01, 2015</a>
<b>Smith, John</b>	Smith	John	01-Jan-1980	1234567890	11111111 (FMC) 22222222 (RDRHC)	<a href="#">January 01, 2016</a>
<a href="#">Tse, Winston</a>	Tse	Winston	27-Feb-1984	9486018648	879846758 (UAH)	<a href="#">February 27, 2016</a>
<a href="#">White, Cassie</a>	White	Cassie	03-Nov-1942	4193729281	183764895 (Brooks HC)	<a href="#">December 06, 2015</a>
<a href="#">Wong, Samuel</a>	Wong	Samuel	01-Feb-1943	9876543210	33333333 (FMC)	<a href="#">February 03, 2016</a>

1

Next, click on the existing stroke (boxed in **red**) you would like to edit as shown in Figure 50.

Figure 50: Navigating to the Edit Inpatient Page (2)



Smith, John

### Patient Demographics

Full Name:	Smith, John	Middle Initials:	K		
Date of Birth:	01-Jan-1980	Sex:	Male	Race:	Caucasian
PHN (British Columbia):	1234567890				

### MRN(s)

Hospital/Healthcare Centre	MRN
Foothills Medical Centre	111111111
Red Deer Regional Hospital Centre	222222222

### Strokes

Stroke Onset	Hospital/Healthcare Centres	View Report
<b>Jan 01, 2016 12:00 AM</b>	Red Deer Regional Hospital Centre, Foothills Medical Centre	<span>View Report</span>

ADD STROKE EDIT PATIENT



Next, click on “In-Patient” text (boxed in red) as shown in Figure 51.

Figure 51: Navigating to the Edit Inpatient Page (3)

Stroke on Stroke on January 01, 2016

Stroke History

Full Name:

Smith, John

Date of Stroke Onset:

01-Jan-2016 00:00

Stroke occurred in:

Community

Patient Postal Code at time of Stroke:

T2N4V6

EMS Time Stamp

911 Call DateTime:

01-Jan-2016 00:05

EMS Dispatch DateTime:

01-Jan-2016 00:07

EMS on Scene DateTime :

01-Jan-2016 00:18

EMS Depart Scene DateTime :

01-Jan-2016 00:23

Hospital or Health Centres

Hospitals/Healthcare Centre	Arrival DateTime	Thrombolysis	Endovascular
<a href="#">Treatment at Red Deer Regional Hospital Centre</a>	01-Jan-2016 00:35	Yes	No
<a href="#">Treatment at Foothills Medical Centre</a>	01-Jan-2016 02:10	No	Yes

In-Patient

24hr NIHSS: 5

Quality Metrics

DVT Prophylaxis	Yes
Dysphagia Swallowing Screen	No

90-Day Outcome

Determination Date: 01-Apr-2016

Modality: Telephone

Disability Scales

90-Day NIHSS:	3
mRS:	1
BI:	10

Adverse Events

Adverse Event	Neurological Worsening
DVT/PE	No

EDIT STROKE

PATIENT STROKE REPORT

ADD ADDITIONAL TREATMENT CENTRE

You are now at the **Edit Inpatient** page. Here you will be able to add and edit the patient's Inpatient data. Figure 52 shows the Edit Inpatient page filled in for a sample patient. Once the Inpatient data is entered, you are now ready to print the Acute Stroke 72-Hour Report. Please click “*View and Print Report*” (boxed in **purple**) to view and print the Acute Stroke 72-Hour Report. If you would like to enter stroke outcome data now, select “*Continue*” (boxed in **red**). If you select “*Continue*” please remember to print the Acute Stroke 72-Hour Report after entering the stroke outcome data. If you do not have stroke outcome data at this time and will be entering it later select “*Create and Return Home*” (boxed in **orange**). If you would like to cancel, select “*Cancel*”.

The Edit Inpatient page is shown below in Figure 52.

Figure 52: Edit Inpatient Page

Home > Smith, John > Stroke on January 01, 2016 > In-Patient

Smith, John  
DOB: 01-Jan-1980  
Phone: 1234567890

## Edit In-Patient

1 Patient 2 Stroke 3 Treatment 4 In-Patient 5 90-Day Outcome

### 24-Hour Follow-Up

Cannot determine the 24-Hour NIHSS ☐

NIHSS At 24h  
10

### Quality Metrics

DVT Prophylaxis  
Yes

Dysphagia Swallowing Screen  
No

### Adverse Events

Neurological Worsening	Adverse Event Type	Delete
<input checked="" type="checkbox"/>	DVT/PE	<input type="checkbox"/>

[ADD ADDITIONAL ADVERSE EVENT](#)

[CONTINUE](#) [SAVE AND RETURN HOME](#) [SAVE AND VIEW REPORT](#) [CANCEL](#)

On this page you will enter 24-Hour Follow-up, Quality Metrics, and Adverse Events data (if applicable).

24-Hour Follow-Up:

- Enter the patients NIHSS 24 hours after stroke in the box. If the 24-Hour NIHSS cannot be determined, Check “*24-Hour NIHSS UTD*”.

Quality Metrics:

- If any of the following apply to the patient, check the appropriate check box.
  - DVT Prophylaxis: if the patient received DVT Prophylaxis at any hospital.
  - Dysphagia Swallowing Screen: if the patient was screened using a Dysphagia Swallowing Screen AND the screen was done appropriately prior to any oral intake.

Adverse Events:

- Select the type of Adverse Event from the Adverse Event drop down menu.
- If the Adverse Event was associated with neurological worsening check the Neurological Worsening checkbox.
- If more than one Adverse Event happened, press the “*Add Additional Adverse Event*” button and another Adverse Event box will appear. Repeat this as many times as necessary.
- If an Adverse Event needs to be deleted check the delete box and it will be removed when you save.

**It is important that you enter the correct data into the QuICR Registry. For a list of definitions for the Add Stroke page, please refer to Table 13.**

*Table 13: Edit Inpatient Definitions*

<b>Term</b>	<b>Definition</b>
24-Hour NIHSS UTD	Check "24-Hour NIHSS UTD" if the 24-Hour NIHSS cannot be determined. If this is checked, you will not be able to fill in the 24-Hour NIHSS until the box is unchecked.
24-Hour NIHSS	National Institute of Health Stroke Scale (NIHSS) score 24 hours after treatment. The NIHSS is a standardized stroke severity scale used to describe neurological deficits in acute stroke patients. Minimum: 0, Maximum: 42.
DVT Prophylaxis	Medical or physical measure to prevent deep venous thrombosis. Select "Yes" if the patient received DVT prophylaxis while in hospital. Select "No" if the patient did not receive DVT prophylaxis while in hospital. Select "UTD" if it cannot be determined if the patient received DVT prophylaxis while in hospital.
Dysphagia Swallowing Screen	Select "Yes" if the patient was screened using a Dysphagia Swallowing Screen AND the screen was done appropriately prior to any oral intake. Select "No" if the patient was not screened using a Dysphagia Swallowing Screen OR the screen was not done appropriately prior to any oral intake. Select "UTD" if it cannot be determined if the patient received a Dysphagia Swallowing Screen while in hospital.
Neurological Worsening	Check " <i>Neurological Worsening</i> " if there is an increase of 2 or more points (compared to baseline) on the NIHSS or a clear deterioration in neurological status with new or worsening signs on physical examination.
Adverse Event Type	An adverse event is an undesired harmful effect resulting from the stroke or a secondary complication. Select the type of event from list. Add adverse events to list all events that occurred.

You will then be asked to confirm if the data entered are correct as shown in Figure 53. If the data is correct, click “Save” (boxed in red). If modifications are needed, select “Cancel”.

Figure 53: Edit Inpatient - Confirmation

Home > Smith, John > Stroke on January 01, 2016 > In-Patient

## Edit In-Patient

1 Patient 2 Stroke 3 Treatment 4 In-Patient 5 90-Day Outcome

**Please review and confirm in-patient details before continuing**

**24-Hour Follow-Up**

24hr NIHSS: Yes

**Quality Metrics**

DVT Prophylaxis: Yes

Dysphagia Swallowing Screen: No

**Adverse Events**

Adverse Event	Neurological Worsening
Sub-Occipital Craniectomy	Yes

**SAVE** CANCEL

If you select “Continue” then “Save”, you will be directed to the **Edit Stroke Outcome** page. **Please note that this will not take you to the Acute Stroke 72-Hour Report. It is standard practice to print the Acute Stroke 72-Hour Report once Inpatient data has been entered.**

## 9 Step 5 - Printing the Acute Stroke 72-Hour Report

Typically, this will be the fifth step when entering data about a stroke patient. The Acute Stroke 72-Hour Report is a one page per stroke report using the QuICR Registry for the Patient Chart. It is planned to be pushed to Alberta Netcare. The report highlights hospital performance metrics such as DTN and CT-to-Groin Puncture times.


The Acute Stroke 72-Hour Report can be accessed by clicking


- 1) “*Finish*” button in the Stroke Outcomes Entry/Editing page
- 2) Any Green Button in the QuICR Registry

**After entering patient, stroke, treatment, and Inpatient data to the QuICR Registry it is important that you PRINT this report and file it in the Patient Chart.** Figure 54 below shows the Acute Stroke 72-Hour Report.

Figure 54: Acute Stroke 72-Hour Report

Home > Smith, John > Stroke on January 01, 2016



**Alberta Health Services**  
Cardiovascular Health & Stroke SCN  


## Acute Stroke 72-Hour Report

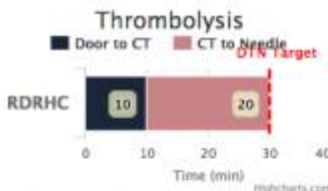
Print

**Smith, John**  
Birthdate: 01-Jan-1980  
PHN: 1234567890 (British Columbia)  
MRN(s): 222222222 (RDRHC)  
111111111 (FMC)

Alteplase (tPA) + Endovascular

Stroke Onset: 01-Jan-2016 00:00  
Pretreatment NIHSS: 13

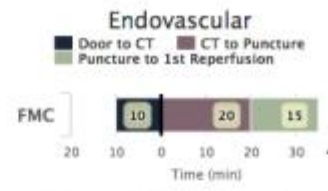
### Thrombolysis



Red Deer Regional Hospital Centre (RDRHC)

Door to CT (Target = 10 min)	10 min	✓
CT to Needle (Target = 20 min)	20 min	✓
Door to Needle (Target = 30 min)	30 min	✓

### Endovascular



Foothills Medical Centre (FMC)

Door to CT (Target = 10 min)	10 min	✓
CT to Puncture (Target = 45 min)	20 min	✓
Puncture to Reperfusion (Target = 15 min)	15 min	✓
CT to 1st Reperfusion (Target = 75 min)	35 min	✓

RDRHC

Arrived: (01-Jan-2016 00:45)  
Discharged: (01-Jan-2016 02:00)

Imaging First Slice  
CT  
01-Jan-2016 00:55

Treatment

Alteplase (tPA)

01-Jan-2016 01:15

Physician: Jeerakathil, Thomas

Location: Emergency Bay

Telemedicine: ⊘

Processes:

Team Pre-notified by EMS	✓
Direct to CT	✓
Patient Registered as Unknown	⊘

FMC

Arrived: (01-Jan-2016 03:00)  
Discharged: (02-Jan-2016 12:00)

Imaging First Slice  
CT  
01-Jan-2016 03:10  
CTA  
01-Jan-2016 03:15

Treatment

Endovascular

Groin Puncture: 01-Jan-2016 03:30

1st Reperfusion: 01-Jan-2016 03:45

TICI: Grade 2a (Less than 50%)

Interventionist: Eesa, Muneer

Neurologist: Bal, Simer

Processes:


Team Pre-notified by EMS	⊘
Direct to CT	⊘
Patient Registered as Unknown	⊘


### Quality Measures

- Dysphagia Swallowing Screen: ⊘
- DVT Prophylaxis: ✓

### Clinical Trials

- IMS-3


**Alberta Health Services**


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The Acute Stroke 72-Hour Report is to be physically printed and placed in the patient's Patient Chart. It will be kept as a physical record of the patient's stroke. Figure 55 shows the steps on how to print the report (boxed in red).

To print the Acute Stroke-72-Hour Report to the Patient Chart:

- 1) Click on the "Print" button on the top right corner (a print dialog box should pop up)
- 2) Choose the printer you would like to print to
- 3) Select the number of copies you would like to print
- 4) Select the Portrait layout
- 5) Click the new "Print" button

Figure 55: Printing the Acute Stroke 72-Hour Report

The screenshot displays the 'Acute Stroke 72-Hour Report' for patient John Smith. The report includes patient information, treatment details (Alteplase and Endovascular), and performance metrics for thrombolysis and endovascular procedures. A print dialog box is open on the right, showing the steps to print the report.

**Acute Stroke 72-Hour Report Data:**

Section	Category	Time (min)	Target
Thrombolysis Performance (RDRHC)	Door to CT	10	DTN Target: 20
	CT to Needle	20	
Endovascular Performance (FMC)	Door to CT	12	DTN Target: 20
	CT to Puncture	16	
	Puncture to 1st Reperfusion	17	

**Print Dialog Box Settings:**

- Print button (Step 1)
- Printer: Xerox WorkCentre 783... (Step 2)
- Copies: 1 (Step 3)
- Layout: Portrait (Step 4)
- Print button (Step 5)

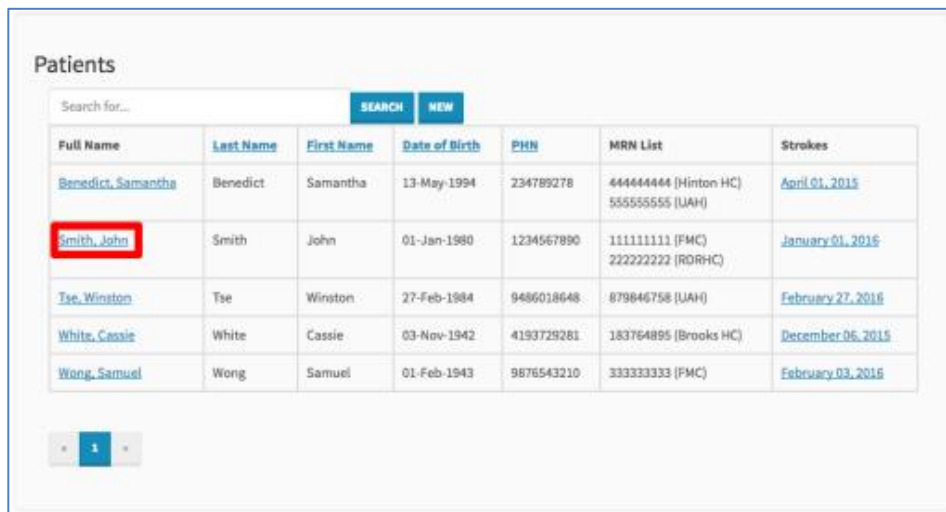
Steps to print the report may vary based on the web browser used. The above steps are for Google Chrome but can be modified and adapted for use in other browsers.



## 10 Step 6 - Edit 90-Day Stroke Outcome and Quality Metrics Data

Editing a patient's 90-Day Stroke Outcome is typically the last step when entering data about a stroke patient. To add or edit a patient's 90-Day Stroke Outcome data, select the patient's full name (boxed in **red**) from the Homepage as shown in Figure 56.

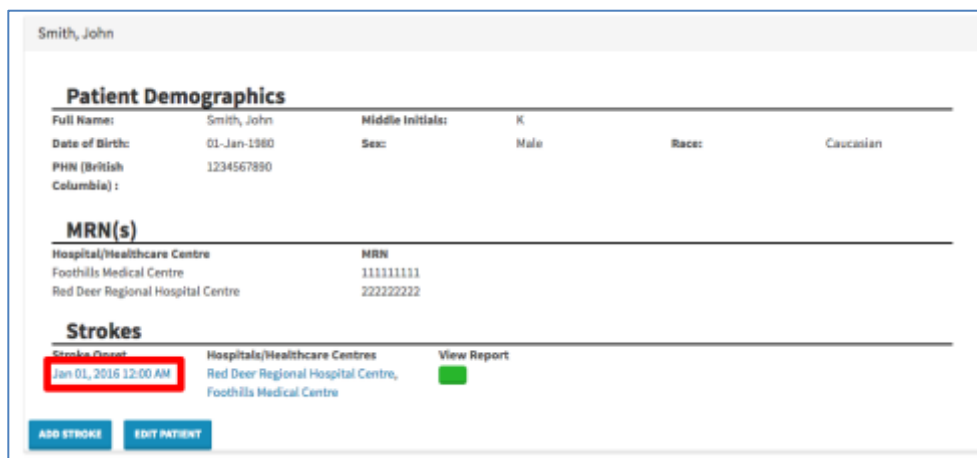
Figure 56: Navigating to the Edit 90-Day Stroke Outcome Page (1)



Patients						
Search for...						
<input type="button" value="SEARCH"/> <input type="button" value="NEW"/>						
Full Name	Last Name	First Name	Date of Birth	PHN	MRN List	Strokes
<a href="#">Benedict, Samantha</a>	Benedict	Samantha	13-May-1994	234789278	44444444 (Hinton HC) 55555555 (UAH)	<a href="#">April 01, 2015</a>
<b>Smith, John</b>	Smith	John	01-Jan-1980	1234567890	11111111 (FMC) 22222222 (RDRHC)	<a href="#">January 01, 2016</a>
<a href="#">Tse, Winston</a>	Tse	Winston	27-Feb-1984	9486018648	879846758 (UAH)	<a href="#">February 27, 2016</a>
<a href="#">White, Cassie</a>	White	Cassie	03-Nov-1942	4193729281	183764895 (Brooks HC)	<a href="#">December 06, 2015</a>
<a href="#">Wong, Samuel</a>	Wong	Samuel	01-Feb-1943	9876543210	33333333 (FMC)	<a href="#">February 03, 2016</a>

Next, click on the existing stroke (boxed in **red**) you would like to edit as shown in Figure 57.

Figure 57: Navigating to the Edit 90-Day Stroke Outcome Page (2)



Smith, John

### Patient Demographics

Full Name:	Smith, John	Middle Initials:	K		
Date of Birth:	01-Jan-1980	Sex:	Male	Race:	Caucasian
PHN (British Columbia):	1234567890				

### MRN(s)

Hospital/Healthcare Centre	MRN
Foothills Medical Centre	111111111
Red Deer Regional Hospital Centre	222222222

### Strokes

Stroke Onset	Hospital/Healthcare Centres	View Report
<b>Jan 01, 2016 12:00 AM</b>	Red Deer Regional Hospital Centre, Foothills Medical Centre	<input type="button" value="View Report"/>

Next, click on “90-Day Stroke Outcome” text (boxed in red) as shown in Figure 58.

Figure 58: Navigating to the Edit 90-Day Stroke Outcome Page (3)

**QuICR** HOME MANAGE LOGOUT EXPORT SECURITY SETTINGS

Home > Smith, John > Stroke on January 01, 2016

Stroke on Stroke on January 01, 2016

### Stroke History

Full Name: Smith, John  
Date of Stroke Onset: 01-Jan-2016 00:00  
Stroke occurred in: Community  
Patient Postal Code at time of Stroke: T2N4V6

### EMS Time Stamp

911 Call DateTime: 01-Jan-2016 00:05  
EMS Dispatch DateTime: 01-Jan-2016 00:07  
EMS on Scene DateTime: 01-Jan-2016 00:18  
EMS Depart Scene DateTime: 01-Jan-2016 00:23

### Hospital or Health Centres

Hospitals/Healthcare Centre	Arrival DateTime	Thrombolysis	Endovascular
<a href="#">Treatment at Red Deer Regional Hospital Centre</a>	01-Jan-2016 00:35	Yes	No
<a href="#">Treatment at Foothills Medical Centre</a>	01-Jan-2016 02:10	No	Yes

### In-Patient

24hr NIHSS: 5

Quality Metrics	
DVT Prophylaxis	Yes
Dysphagia Swallowing Screen	No

**90-Day Outcome**

Determination Date: 01-Apr-2016  
Modality: Telephone

Disability Scales	
90-Day NIHSS:	3
mRS:	1
BI:	10

### Adverse Events

Adverse Event	Neurological Worsening
DVT/PE	No

[EDIT STROKE](#) [PATIENT STROKE REPORT](#) [ADD ADDITIONAL TREATMENT CENTRE](#)

You are now at **the Edit 90-Day Stroke Outcome** page. Typically, this will be the final step when entering data about a stroke patient. Here you will be able to edit the patient's 90-Day Stroke Outcome and Quality Metrics data. You will add 90-Day Stroke Outcome data after you have entered the patient, stroke, treatment, and Inpatient data. If you have not already printed the 72-Hour Acute Stroke Report, please do so before or after editing the patient's 90-Day Stroke Outcome. Figure 59 shows the 90-Day Stroke Outcome page filled in for a sample patient. Once the required stroke outcome data are entered, select “*Finish*” (boxed in **red**). This will take you to the 72-Hour Acute Stroke Report.

If you do not have 90-Day Stroke Outcome data at this time and will be entering it later select “*Cancel*”.

*Figure 59: Edit 90-Day Stroke Outcome Page*

Home > Smith, John > Stroke on January 01, 2016 > 90-Day Outcome

## Edit 90 Day Outcome

1 Patient 2 Stroke 3 Treatment 4 In-Patient 5 90-Day Outcome

**90-Day Follow Up UTD** ☐

Determination Date (dd-MMM-yyyy) 07-Jan-2016 Outcome modality UTD

Death ☒

Date of Death (dd-MMM-yyyy) 07-Jan-2016 Death Occurred in Hospital/Healthcare Centre Yes

### Disability Scales

mRS	90-Day NIHSS	BI
6	42	0

**FINISH** SAVE AND RETURN HOME CANCEL

Stroke Outcome:

- Check "90-Day Follow-Up UTD" if the 90-Day Outcome cannot be reasonably determined. If this is checked, you will not be able to make add or more changes to the 90-Day Outcomes Page until the box is unchecked. (e.g. If the patient is from out of country or if the stroke was a mimic, check "90-Day Follow-Up UTD").
- Select the appropriate outcome modality check box (in-person or telephone interview).
- The Determination Date can be typed in the box (dd-MMM-yyyy) *or* by clicking in the box a drop down menu will appear and the Determination Date can be selected.
- Check the "Death" checkbox if the patient has died. If the patient has died, fill in the date of death (dd-MMM-yyyy) and whether the death occurred in hospital or outside of the hospital.

Disability Scales:

- Enter the appropriate mRS, 90-Day NIHSS, and BI scores in the boxes

**It is important that you enter the correct data into the QuICR Registry. For a list of definitions for the edit 90-Day Stroke Outcomes page, please refer to Table 14 below.**

*Table 14: Edit 90-Day Stroke Outcome Definitions*

Term	Definition
Determination Date	Date when the 90-day stroke outcome was determined. Format: dd-MMM-yyyy (e.g. 01-Jan-1950).
Modality	The method used to determine the 90-day stroke outcome. Can be either in "Person" or by "Telephone".
Death	Check "Death" if the patient died.
Date of Death	Date when the patient died. Format: dd-MMM-yyyy (e.g. 01-Jan-1950).
Death Occurred in Hospital	Either of two categories (yes or no). Select "Yes" if the patient died in hospital (including in the Emergency Department). Select "No" if the patient died while outside the hospital.
mRS	The Modified Rankin Scale (mRS) measures the degree of functional neurological disability/dependence after a stroke. This scale can be assessed in person or by telephone with the patient or caregiver. Minimum: 0, Maximum: 6 (lower is better).
90-Day NIHSS	National Institute of Health Stroke Scale (NIHSS) score after 3 months +/- 30 days from the stroke onset date. The NIHSS is a standardized stroke severity scale used to describe neurological deficits in acute stroke patients. Minimum: 0, Maximum: 42 (lower is better).
BI	The Barthel Index (BI) rates simple activities of daily living (ADLs). This scale can be assessed in person or by telephone with the patient or caregiver. Minimum: 0, Maximum: 100 (higher is better).

You will then be asked to confirm the data entered are correct as shown in Figure 60. If the data is correct, select “*Finish*” (boxed in **red**) if modifications are needed select “*Cancel*”.

*Figure 60: Edit 90-Day Stroke Outcome - Confirmation*

Home > Smith, John > Stroke on January 01, 2016 > 90-Day Outcome

## Edit 90 Day Outcome

1 Patient 2 Stroke 3 Treatment 4 In-Patient 5 90-Day Outcome

**Please review and confirm 90-day outcome details before continuing**

90-Day Follow Up UTD: No  
Determination Date: 07-Jan-2016  
Modality: UTD  
Date of Death: 07-Jan-2016  
Death Occurred in Hospital: Yes

**Disability Scales**

90-Day NIHSS: 42  
mRS: 6  
BI: 0

**SAVE** CANCEL

If you click “Finish” then “Save”, you will be directed to the **Acute Stroke 72-Hour Report**.

**You have now entered all data necessary for your patient!**

**If you have not already printed the Acute Stroke 72-Hour Report, please print and file it in the Patient Chart.**

**Please log out.**

## Appendix A QuICR Registry Definitions

Term	Definition
Last Name	Patient's last name as shown on their Alberta Personal Health Card. If Alberta Health Card is not available, this should be a family name provided on a government issued identification card.
First Name	Patient's first name as shown on their Alberta Personal Health Card. If Alberta Health Card is not available, this should be a family name provided on a government issued identification card.
Middle Initials	Initial of the patient's middle name (if applicable).
Date of Birth (DOB)	Day on which the patient is born as shown on their Alberta Personal Health Card or a government issued identification card. If not known, then a close approximation where first day if day is not known and January if month is not known. Format: dd-MMM-yyyy (e.g. 01-Jan-1950).
Sex	Either of two main categories (male and female) on the basis of genetics. Select " <i>undetermined</i> " if unknown.
Race	Group the patient is related by common descent or heredity as self-described. <b>First Nations:</b> Indigenous peoples within the boundaries of present-day Canada. <b>Asian:</b> A person having origins in any of the original peoples of the Far East and Southeast Asia. <b>South Asian:</b> A person having origins from India, Pakistan, Bangladesh, Sri Lanka, Nepal, Bhutan, and the Maldives. <b>Black:</b> A person having origins in any of the black racial groups of Africa. <b>Caucasian:</b> A person having origins in any of the original peoples of Europe, the Middle East, or North Africa. <b>Hispanic:</b> A person of Cuban, Puerto Rican, South or Central American, Mexican, or other Spanish culture or origin. <b>Pacific Islander:</b> A person having origins in any of the original peoples of Guam, Samoa, Hawaii, or other Pacific Islands.
Personal Health Number (PHN)	Identifier issued to Albertans who are eligible for basic coverage with Alberta Health Care Insurance Plan. This number is the same as the ULI (if applicable). PHN may apply to other provinces in Canada for visitors to Alberta.
Personal Health Number Type	Select the province or national organization that is associated with the PHN. If the patient is not from Canada, select " <i>out of country</i> ".
Hospital/Healthcare Centre	Institution where the patients has received care including the emergency department.
Medical Record Number (MRN)	Medical record number is health-facility specific. The number is used by the hospital as a systematic documentation of a patient's medical history and care during each hospital stay.
Status	Either of two categories (Active or Closed). After all the data for a stroke has been collected and reviewed, it should be closed. Otherwise, the record should remain open.
EMS Verified	Check " <i>EMS Verified</i> " if EMS has uploaded EMS time stamp data for the stroke event. If this is checked, you will not be able to make changes to the EMS time stamp data until the box is unchecked.
Date of Onset	Date at which the patient was last known to be without the signs and symptoms of the current stroke or at his or her prior baseline. If the symptoms resolve and then stroke symptoms resume, the date of onset is the later or last time the symptoms appeared. Format:

	dd- <u>MMM</u> - <u>yyyy</u> (e.g. 01-Jan-1950).
Time of Onset	Time at which the patient was last known to be without the signs and symptoms of the current stroke or at his or her prior baseline. If the symptoms resolve and then stroke symptoms resume, the time of onset is the later or last time the symptoms appeared. Format HH:mm 24hr (e.g. 23:10).
Stroke occurred in	Either of two categories (community or hospital). Select " <i>Community</i> " if stroke occurs while the patient is outside the hospital. Select " <i>Hospital</i> " if stroke (re)occurs while the patient is in a hospital with Inpatient beds (including in the Emergency Department).
Patient Home Postal Code at Time of Stroke	Patient's home postal code at the time of stroke. (e.g. If a patient's primary residence is British Columbia and displays stroke symptoms while at their residence in Alberta; the postal code will be that of the primary residence in British Columbia). If the patient is from out-of-country, then leave the postal code field blank.
911 Call Date	Date that 911 was called for the current stroke. Format: dd- <u>MMM</u> - <u>yyyy</u> (e.g. 01-Jan-1950).
911 Call Time	Time that 911 was called for the current stroke. Format HH:mm 24hr (e.g. 23:10).
EMS Dispatch Date	Date that EMS was dispatched to go to the scene of the stroke. Format: dd- <u>MMM</u> - <u>yyyy</u> (e.g. 01-Jan-1950).
EMS Dispatch Time	Time that EMS was dispatched to go to the scene of the stroke. Format HH:mm 24hr (e.g. 23:10).
EMS on Scene Date	Date that the EMS crew arrived at the scene of the stroke. Format: dd- <u>MMM</u> - <u>yyyy</u> (e.g. 01-Jan-1950).
EMS on Scene Time	Time that the EMS crew arrived at the scene of the stroke. Format HH:mm 24hr (e.g. 23:10).
EMS Depart Scene Date	Date that the EMS crew left the scene of the stroke en route to the hospital. Format: dd- <u>MMM</u> - <u>yyyy</u> (e.g. 01-Jan-1950).
EMS Depart Scene Time	Time that the EMS crew left the scene of the stroke en route to the hospital. Format HH:mm 24hr (e.g. 23:10).
Arrival Date	The earliest arrival date available from any of the following time stamps: 1) EMS arrival date 2) Patient registration or triage date or 3) CT start date If this is an in-hospital stroke, leave the arrival date blank. Format: dd- <u>MMM</u> - <u>yyyy</u> (e.g. 01-Jan-1950).
Arrival Time	Enter the earliest arrival time available from any of the following time stamps: 1) EMS arrival time; 2) Patient registration or triage time; or 3) CT start time. If this is an in-hospital stroke, leave the arrival time blank. Format HH:mm 24hr (e.g. 23:10).
Arrival Method	Modality of transportation used by the patient to arrive at the emergency department.
Pre-treatment NIHSS	National Institute of Health Stroke Scale (NIHSS) score given to the patient prior to treatment. The NIHSS is a standardized stroke severity scale used to describe neurological deficits in acute stroke patients. Minimum: 0, Maximum: 42.
Type of Imaging	Type of neuroimaging used for the patient in the acute phase (prior to treatment at the site).
First Slice Date	The date displayed on the first slice image. Format dd- <u>MMM</u> - <u>yyyy</u> (e.g. 01-Jan-1950).
First Slice Time	The time displayed on the first slice image. Format HH:mm 24hr (e.g. 23:10).
Thrombolysis Administered	Check "Thrombolysis Administered" if thrombolysis (intravenous alteplase (tPA)) has been administered at the hospital.
Thrombolysis Date	Date of thrombolysis bolus was initiated. Format: dd- <u>MMM</u> - <u>yyyy</u> (e.g. 01-Jan-1950).
Thrombolysis Time	Time of thrombolysis bolus was initiated. Format HH:mm 24hr (e.g. 23:10).
Thrombolysis Physician	Name of the Most Responsible Physician that ordered thrombolysis at your site. If telemedicine was utilized, the Thrombolysis Physician is the physician at your site.
Thrombolysis Location	Location in the hospital where the patient was administered thrombolysis. Select Emergency Bay if it was administered in the ED; CT Scanner/Imaging area if it was administered while



	the patient was in the scanner or in the imaging area; Inpatient unit if the it was administered in an Inpatient bed (includes ICU and the Step Down Unit); angio suite if it was administered in the angio suite; or unable to determine.
Thrombolysis Drug	Thrombolytic drug name administered.
Patient Weight Est. (kg)	Estimated weight (kg). Do not enter the patient's weight in pounds.
Drug Dose (mg)	Thrombolytic drug dose (mg).
Treatment with Telemedicine	Select "Yes" if telestroke was used in diagnosis or treatment decisions. Select "No" if telestroke was not used in diagnosis or treatment decisions. Select "UTD" if it cannot be determined if telestroke was used in diagnosis or treatment decisions.
Stroke Team Pre-notified	Select "Yes" if the stroke/care team was notified of the incoming stroke before the patient's arrival. Select "No" if the stroke/care team was not notified of the incoming stroke before the patient's arrival. Select "UTD" if it cannot be determined if the stroke/care team was notified of the incoming stroke before the patient's arrival.
Direct to CT	Select "Yes" if the patient was transported directly from triage to the CT scanner on the EMS stretcher. Select "No" if the patient was not transported directly from triage to the CT scanner on the EMS stretcher. Select "UTD" if it cannot be determined if the patient was transported directly from triage to the CT scanner on the EMS stretcher.
Patient Registered as Unknown	Select "Yes" if the patient was registered as unknown, pre-registered prior to arrival, or another rapid registration process where the full registration of the patient was done in a rapid manner (as per your site's trauma protocol). Select "No" if there was no rapid registration process used and full registration was completed upon patient arrival in the ED. Select "UTD" if it cannot be determined if a rapid registration process was used.
Endovascular Treatment	Check "Endovascular Administered" if the patient was treated with endovascular procedure.
Interventionist	Name of the interventionist that performed the endovascular procedure.
Medical/Neurology	Name of the physician who was the medical/neurology lead during the procedure.
Groin Puncture Date	Date when arterial access was obtained during endovascular treatment. Format: dd-MMM-yyyy (e.g. 01-Jan-1950).
Groin Puncture Time	Time when arterial access was obtained during endovascular treatment. Format HH:mm 24hr (e.g. 23:10).
mTICI Scale (final)	Final reperfusion that was achieved after the endovascular procedure.
First Reperfusion Date	Date of first re-flow into the affected vascular territory. The vascular territory could be defined by the major proximal vessel that the stent is opened in (this definition would cover posterior circulation). It could mean complete reflow OR it could mean flow into one major M2 branch while the other remained occluded. Format: dd-MMM-yyyy (e.g. 01-Jan-1950).
First Reperfusion Time	Time of first re-flow into the affected vascular territory. The vascular territory could be defined by the major proximal vessel that the stent is opened in (this definition would cover posterior circulation). It could mean complete reflow OR it could mean flow into one major M2 branch while the other remained occluded. Format HH:mm 24hr (e.g. 23:10).
Device Used	Device used during endovascular treatment.
Clinical Trial	Select the clinical trials that the patient was enrolled in at your site.
24-Hour NIHSS UTD	Check "24-Hour NIHSS UTD" if the 24-Hour NIHSS cannot be determined. If this is checked, you will not be able to fill in the 24-Hour NIHSS until the box is unchecked.
24-Hour NIHSS	National Institute of Health Stroke Scale (NIHSS) score 24 hours after treatment. The NIHSS is a standardized stroke severity scale used to describe neurological deficits in acute stroke patients. Minimum: 0, Maximum: 42.



Discharge Date	Date at which the patient leaves acute care at the hospital and either returns home or is transferred to another facility. (e.g. if the patient is discharged from acute care and transferred to a rehab or long term care ward (within the same institution) then date of discharge is the date of transfer). If the patient is not admitted to the hospital, use the date of discharge from the Emergency Department. If the patient is treated in a CT Ambulance, the date of discharge is the departure date after tPA has started. Format: dd-MMM-yyyy (e.g. 01-Jan-1950).
Discharge Time	Time at which the patient leaves acute care at the hospital and either returns home or is transferred to another facility. (e.g. if the patient is discharged from acute care and transferred to a rehab or long term care ward (within the same institution) then time of discharge is the time of transfer). If the patient is not admitted to the hospital, use the time of discharge from the Emergency Department. If the patient is treated in a CT Ambulance, the time of discharge is the departure time after tPA has started. Format HH:mm 24hr (e.g. 23:10).
Discharge Disposition	Patient's discharge location with disposition after discharge from the hospital. If the patient died in hospital, select "Death". If the patient is not admitted to the hospital, use the date of discharge from the Emergency Department.
DVT Prophylaxis	Medical or physical measure to prevent deep venous thrombosis. Select "Yes" if the patient received DVT prophylaxis while in hospital. Select "No" if the patient did not receive DVT prophylaxis while in hospital. Select "UTD" if it cannot be determined if the patient received DVT prophylaxis while in hospital.
Dysphagia Swallowing Screen	Select "Yes" if the patient was screened using a Dysphagia Swallowing Screen AND the screen was done appropriately prior to any oral intake. Select "No" if the patient was not screened using a Dysphagia Swallowing Screen OR the screen was not done appropriately prior to any oral intake. Select "UTD" if it cannot be determined if the patient received a Dysphagia Swallowing Screen while in hospital.
Neurological Worsening	Check "Neurological Worsening" if there is an increase of 2 or more points on the NIHSS or a clear deterioration in neurological status with new or worsening signs on physical examination.
Adverse Event Type	An adverse event is an undesired harmful effect resulting from the stroke or a secondary complication. Select the type of event from list. Add adverse events to list all events that occurred.
90-Day follow-Up UTD	Check "90-Day Follow-Up UTD" if the 90-Day Outcome cannot be reasonably determined. If this is checked, you will not be able to make add or more changes to the 90-Day Outcomes Page until the box is unchecked. (e.g. If the patient is from out of country or if the stroke was a mimic, check "90-Day Follow-Up UTD").
Determination Date	Date when the 90-day stroke outcome was determined. Format: dd-MMM-yyyy (e.g. 01-Jan-1950).
Modality	The method used to determine the 90-day stroke outcome. Can be either in "Person" or by "Telephone".
Death	Check "Death" if the patient died.
Date of Death	Date when the patient died. Format: dd-MMM-yyyy (e.g. 01-Jan-1950).
Death Occurred in Hospital	Either of two categories (yes or no). Select "Yes" if the patient died in hospital (including in the Emergency Department). Select "No" if the patient died while outside the hospital.
mRS	The Modified Rankin Scale (mRS) measures the degree of functional neurological disability/dependence after a stroke. This scale can be assessed in person or by telephone with the patient or caregiver. Minimum: 0, Maximum: 6 (lower is better).

90-Day NIHSS	National Institute of Health Stroke Scale (NIHSS) score after 3 months +/- 30 days from the stroke onset date. The NIHSS is a standardized stroke severity scale used to describe neurological deficits in acute stroke patients. Minimum: 0, Maximum: 42 (lower is better).
BI	The Barthel Index (BI) rates simple activities of daily living (ADLs). This scale can be assessed in person or by telephone with the patient or caregiver. Minimum: 0, Maximum: 100 (higher is better).

## Appendix B Navigating the QulCR Registry

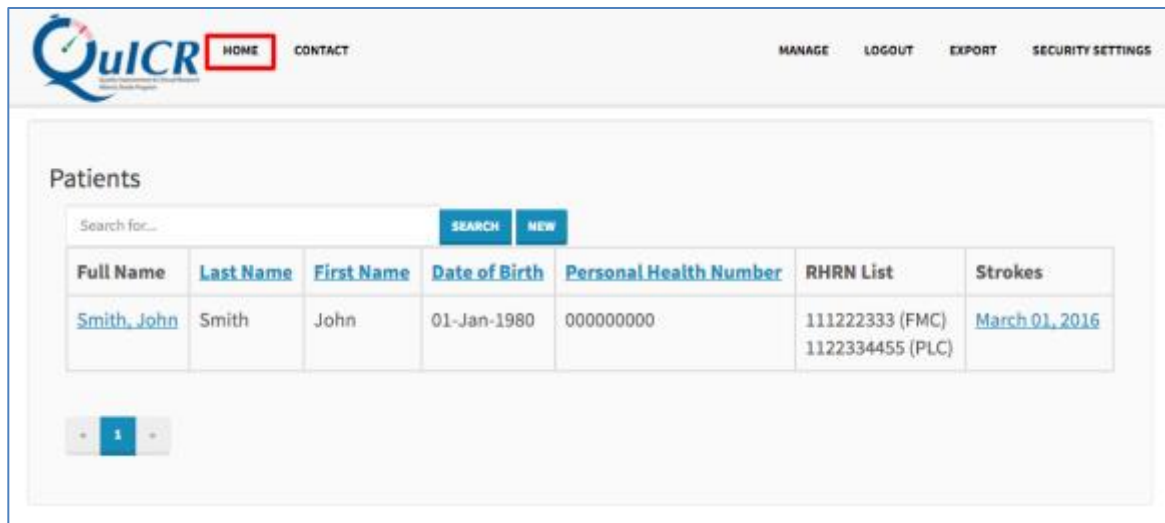
After entering data in the Edit pages and confirming the data in Confirmation pages, Summary pages are created. This section will help you understand the navigation options available on the Homepage, Summary pages, Breadcrumb, and Progress bar.

- For navigation options on the **Homepage**, please refer to Appendix B.1.
- For navigation options on the **Patient Summary** page, please refer to Appendix B.2.
- For navigation options on the **Stroke Summary** page, please refer to Appendix B.3.  
For navigation options on the **Treatment Summary** page, please refer to Appendix B.4.
- For navigation options on the **Breadcrumb**, please refer to Appendix B.5.
- For navigation options on the **Progress Bar**, please refer to Appendix B.6.

## Appendix B.1 Navigating the Homepage

Log into the QuICR Registry, as described in Section 3, and click “*Home*” (boxed in **red**) on any page. You will then see a screen similar to Figure 61.

Figure 61: Navigating to the Homepage

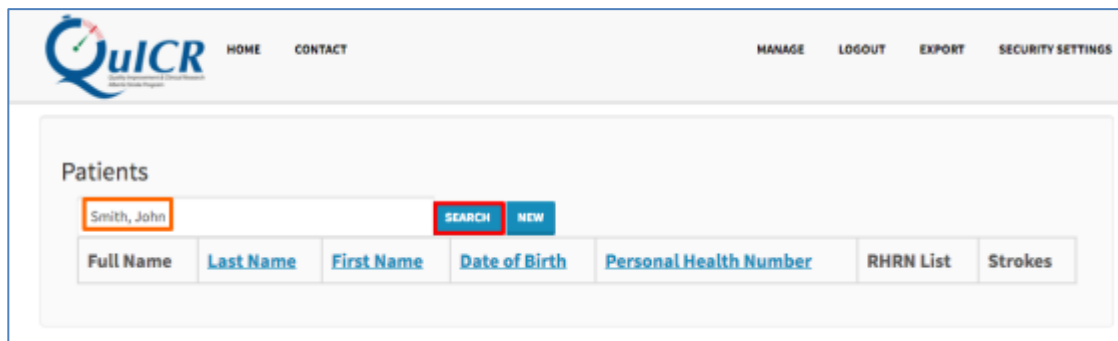


The screenshot shows the QuICR Registry homepage. At the top left is the QuICR logo. To its right are navigation links: **HOME** (boxed in red), **CONTACT**, **MANAGE**, **LOGOUT**, **EXPORT**, and **SECURITY SETTINGS**. Below the navigation bar is a section titled "Patients". It contains a search bar with the placeholder text "Search for..." and two buttons: **SEARCH** and **NEW**. Below the search bar is a table with the following columns: **Full Name**, **Last Name**, **First Name**, **Date of Birth**, **Personal Health Number**, **RHRN List**, and **Strokes**. The table contains one row of data for a patient named John Smith, born 01-Jan-1980, with PHN 000000000. The RHRN List shows two entries: 111222333 (FMC) and 1122334455 (PLC). The Strokes column shows a date: March 01, 2016. Below the table is a pagination control showing "1" of 1 pages.

Full Name	Last Name	First Name	Date of Birth	Personal Health Number	RHRN List	Strokes
Smith, John	Smith	John	01-Jan-1980	000000000	111222333 (FMC) 1122334455 (PLC)	March 01, 2016

From the Homepage search for a patient by typing the patients name or PHN in the search box (boxed in **orange**) and select “*Search*” (boxed in **red**) i.e. the desired patient’s name is John Smith, we type John Smith in the search box. These steps are shown in Figure 62.

Figure 62: Homepage – Searching for a Patient



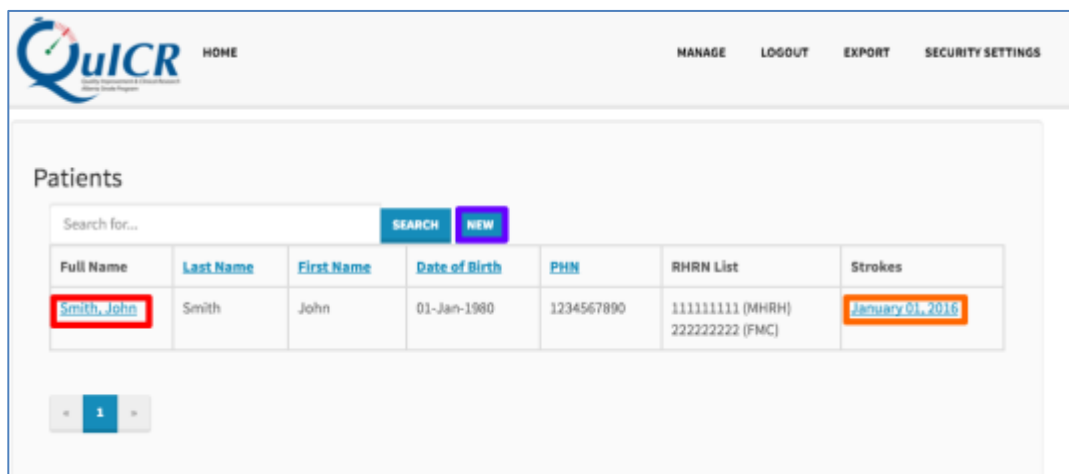
This screenshot is similar to Figure 61, but the search bar now contains the text "Smith, John" (boxed in orange). The **SEARCH** button is also boxed in red. The table below it is empty, indicating that the search results have not yet been displayed.

Full Name	Last Name	First Name	Date of Birth	Personal Health Number	RHRN List	Strokes
-----------	-----------	------------	---------------	------------------------	-----------	---------

All patients matching your description will be listed. An example search result for “John Smith” is shown below in Figure 63. From this page you can either:

- 1) **Add a new patient** by clicking “New” (boxed in purple). For instructions on how to add a new patient, please refer to Section 5.1.
- 2) **Edit the patient’s data** by clicking on the patient’s name (boxed in red). You will then be navigated to the selected patient’s edit page. For instructions on the fields in the edit patient page, please refer to Section 5.2.
- 3) **Edit an existing stroke** by clicking on the stroke occurrence date (boxed in orange). For instructions on how to enter stroke data, please refer to Section 6.2.

Figure 63: Homepage – Selecting a Patient or Stroke



The screenshot shows the QuICR homepage with a search bar and a table of patients. The search bar has a 'SEARCH' button and a 'NEW' button. The table has columns for Full Name, Last Name, First Name, Date of Birth, PHN, RHRN List, and Strokes. The first row shows a patient named John Smith, born 01-Jan-1980, with PHN 1234567890. The stroke date is listed as January 01, 2018. The patient's name and the stroke date are highlighted with red and orange boxes respectively.

Full Name	Last Name	First Name	Date of Birth	PHN	RHRN List	Strokes
Smith, John	Smith	John	01-Jan-1980	1234567890	111111111 (MHRH) 222222222 (FMC)	January 01, 2018

If a patient is selected on the Homepage, you will be redirected to the Patient Summary page. For instructions on how to navigate through the Patient Summary page, please refer to **Appendix B.2**.

If a stroke date is selected on the Homepage, you will be redirected to the Stroke Summary page. For instructions on how to navigate through the Stroke Summary page, please refer to **Appendix B.3**.

## Appendix B.2 Navigating the Patient Summary Page

If a patient is selected on the Homepage, you will be directed to the Patient Summary page. The Patient Summary page is shown below in Figure 64. From the Patient Summary page, you will be able to:

- 1) **Edit the patient's data** by clicking on the patient's name (boxed in **red**). For instructions on how to edit a new patient, please refer to Section 8.
- 2) **Navigate to the Stroke Summary page and edit an existing stroke** by clicking on the stroke occurrence date (boxed in **purple**). For instructions on how to navigate through the Stroke Summary page, please refer to **Appendix B.3**.
- 3) **Add a new stroke event** to the patient by clicking the "Add Stroke" button (boxed in **orange**). For instructions on how to enter stroke data, please refer to Section 6.1.
- 4) **Navigate to the Treatment Summary page and edit an existing treatment** by clicking on the hospital name (boxed in **brown**). For instructions on how to navigate through the Treatment Summary page, please refer to **Appendix B.4**.
- 5) **View and print the Acute Stroke 72-Hour Report** by clicking on the **green** button associated with the stroke event of interest. For instructions on how to print the Acute Stroke 72-Hour Report, please refer to Section 9.

Figure 64: Patient Summary Page

QuICR HOME MANAGE LOGOUT EXPORT SECURITY SETTINGS

Home > Smith, John

Smith, John

### Patient Demographics

Full Name:	Smith, John	Middle Initials:	
Date of Birth:	01-Jan-1980	Sex:	Male
PHN (British Columbia):	1234567890	Race:	Caucasian

### MRN(s)

Hospital/Healthcare Centre	MRN
Medicine Hat Regional Hospital	111111111
Foothills Medical Centre	222222222

### Strokes


Stroke Onset	Hospitals/Healthcare Centres	View Report
Jan 01, 2016 12:00 AM	Red Deer Regional Hospital Centre Foothills Medical Centre	<input type="button" value="View Report"/>

## Appendix B.3 Navigating the Stroke Summary Page

If a stroke is selected on the Homepage, or Patient Summary page, you will be directed to a Stroke Summary page for the patient. The sample patient's Stroke Summary is shown below in Figure 65. From the Stroke Summary page, you will be able to:

- 1) **Edit the stroke** by clicking on “*Edit Stroke*” button (boxed in **red**). For instructions on how to enter stroke data, please refer to Section 6.2.
- 2) **Navigate to the Treatment Summary page and edit an existing treatment** by clicking on the hospital name (boxed in **brown**). For instructions on how to navigate through the Treatment Summary page, please refer to **Appendix B.4**.
- 3) **Edit the Inpatient data** by clicking on the heading “*Inpatient*” (boxed in **orange**). For Instructions on how to enter Inpatient data, please refer to Section 8.
- 4) **View and print the Acute Stroke 72-Hour Report** by clicking on the **green** button. For instructions on how to print the Acute Stroke 72-Hour Report please refer to Section 9.
- 5) **Edit the 90-Day Stroke Outcome data** by clicking on the heading “*90-Day Stroke Outcome*” (boxed in **purple**). For instructions on how to enter 90-Day Stroke Outcome data please refer to Section 10.

Figure 65: Stroke summary


HOME
MANAGE
LOGOUT
EXPORT
SECURITY SETTINGS

[Home](#) > [Smith, John](#) > Stroke on January 01, 2016

Stroke on Stroke on January 01, 2016

### Stroke History

Full Name:	Smith, John
Date of Stroke Onset:	01-Jan-2016 00:00
Stroke occurred in:	Community
Patient Postal Code at time of Stroke:	T2N1N4

### EMS Time Stamp

911 Call DateTime:	01-Jan-2016 00:05
EMS Dispatch DateTime:	01-Jan-2016 00:10
EMS on Scene DateTime :	01-Jan-2016 00:15
EMS Depart Scene DateTime :	01-Jan-2016 00:20

### Hospital or Health Centres

Hospitals/Healthcare Centre	Arrival DateTime	Thrombolysis	Endovascular
<a href="#">Treatment at Foothills Medical Centre</a>	01-Jan-2016 01:00	Yes	Yes

### In-Patient

24hr NIHSS: 15

Quality Metrics	
DVT Prophylaxis	Yes
Dysphagia Swallowing Screen	Yes

### 90-Day Outcome

Determination Date: 31-Jan-2016

Modality: In-person

Disability Scales	
90-Day NIHSS:	42
mRS:	6
BI:	



Date of Death: 30-Jan-2016

Death Occurred in Hospital/Healthcare Centre: Yes

### Adverse Events

Adverse Event	Neurological Worsening
Symptomatic ICH	Yes

[EDIT STROKE](#)
[PATIENT STROKE REPORT](#)



## Appendix B.4 Navigating the Treatment Summary Page

If a treatment is selected on the Stroke Summary page, or Patient Summary page, you will be directed to a Treatment Summary page for the patient. The sample patient's Treatment Summary is shown below in Figure 66. From the Treatment Summary page, you will be able to:

- 1) **Edit the treatment** by clicking on the “*Edit Treatment*” button (boxed in red). For instructions on how to enter stroke data, please refer to Section 7.2.
- 2) **Navigate to the previous or next treatment site's summary page** by clicking on the “*Previous Hospital*” or “*Next Hospital*” button respectively (boxed in purple).

Figure 66: Treatment Summary Page

HOME MANAGE LOGOUT EXPORT SECURITY SETTINGS

Home > Wong, Samuel > Stroke on April 01, 2016 > Treatment at Foothills Medical Centre

← PREVIOUS HOSPITAL/HEALTHCARE CENTRE NEXT HOSPITAL/HEALTHCARE CENTRE →

Treatment at Foothills Medical Centre

### Treatment Details

Stroke:	Stroke on April 01, 2016	Hospital/Healthcare Centre:	Foothills Medical Centre
Arrival Datetime:	01-Apr-2016 03:01	Arrival Method:	EMS
Pre-treatment NIHSS:	12		

### Acute Imaging

Type of Imaging	First Slice DateTime
CT	01-Apr-2016 03:01

### Treatment

#### Thrombolysis

Thrombolysis Administered:	Yes	Thrombolysis Physician:	
Thrombolysis Datetime:		Thrombolytic Drug:	
Thrombolysis Location:		Drug Dose:	
Patient Weight Estimated:		Team Pre-notified by EMS:	
Treatment With Telemedicine:	No	Patient Registered as Unknown:	No
Direct To CT:	No		

#### Endovascular

Endovascular Treatment:	Yes	Neurologist:	Couillard, Philippe
Interventionist:	Goyal, Mayank	TICI:	Grade 2b (More than 50%)
Groin Puncture Datetime:	01-Apr-2016 03:10		
First Reperfusion Datetime:	01-Apr-2016 03:20		

#### Endovascular Treatment

Device Used	Drug (if applicable)
EXOS US Catheter	
MERC Retriever	

### Clinical Trials

Name
IMS-3
VASTT

**EDIT TREATMENT**

CRU Alberta Health Services

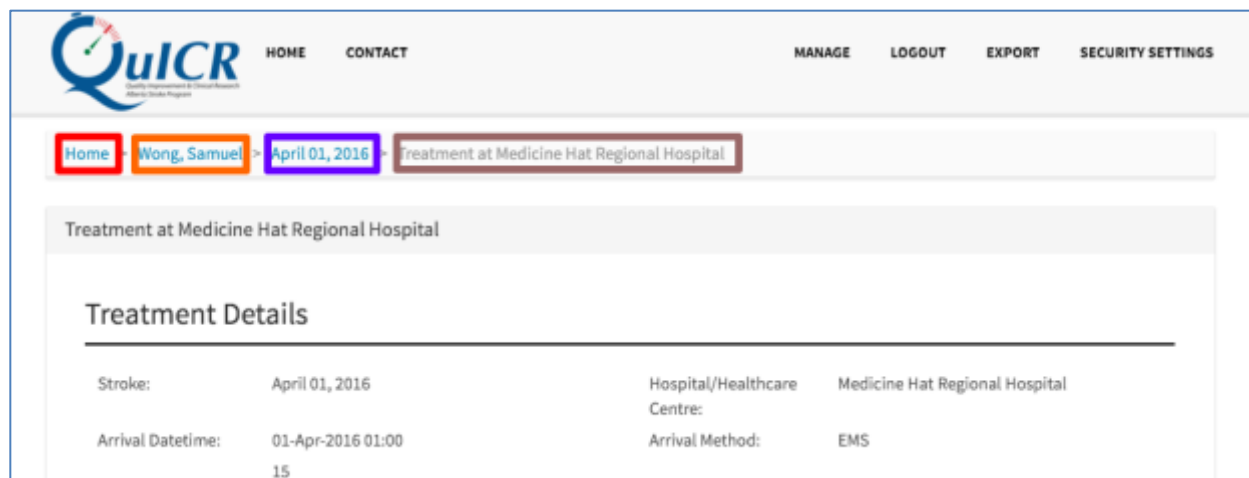
## Appendix B.5 Navigating Using the Breadcrumb

The Breadcrumb is a useful navigation tool that can help you navigate to a previous step in the data entry process. **If there are any outstanding changes, please remember to save before navigating with the breadcrumb.** As you progress through the data entry process, new links will appear on the breadcrumb:

- The “Home” link (boxed in **red**) is shown when a patient is selected. This link will take you to the Homepage. For more information on the Homepage, please refer to **Appendix B.1**.
- The “Patient” link (boxed in **orange**) is shown when a stroke is selected. This link will take you to the Patient Summary page. For more information on the Patient Summary page, please refer to **Appendix B.2**.
- The “Stroke” link (boxed in **purple**) is shown when you are on a treatment, Inpatient, or 90-Day Stroke Outcome page. This link will allow you to navigate back to the Stroke Summary page. For more information on the Stroke Summary page, please refer to **Appendix B.3**.

The breadcrumb is shown below in Figure 67.

Figure 67: The Breadcrumb



## Appendix B.6 Navigating Using the Progress Bar

The Progress Bar is a useful tool that can help you navigate to the previous and next steps in the data entry process. It is only shown on the Edit/Add pages. Blue circles represent steps that have data filled in or the step that you are currently on. Green circles represent previous steps in the data entry process. Grey circles represent steps where you have yet to enter data. The Progress Bar is shown below in Figure 68 (boxed in red)

Figure 68: Progress Bar

**Add Treatment**

Progress Bar: 1 Patient (Green), 2 Stroke (Green), 3 Treatment (Blue), 4 In-Patient (Grey), 5 90-Day Outcome (Grey)

**SAVE AND ADD ADDITIONAL TREATMENT CENTRE**

Hospital/Healthcare Centre\*

Arrival Date: (dd-MMM-yyyy)

Arrival Time: (HH:mm 24hr)

Arrival Method

Pre-treatment NIHSS

Discharge Date: (dd-MMM-yyyy)

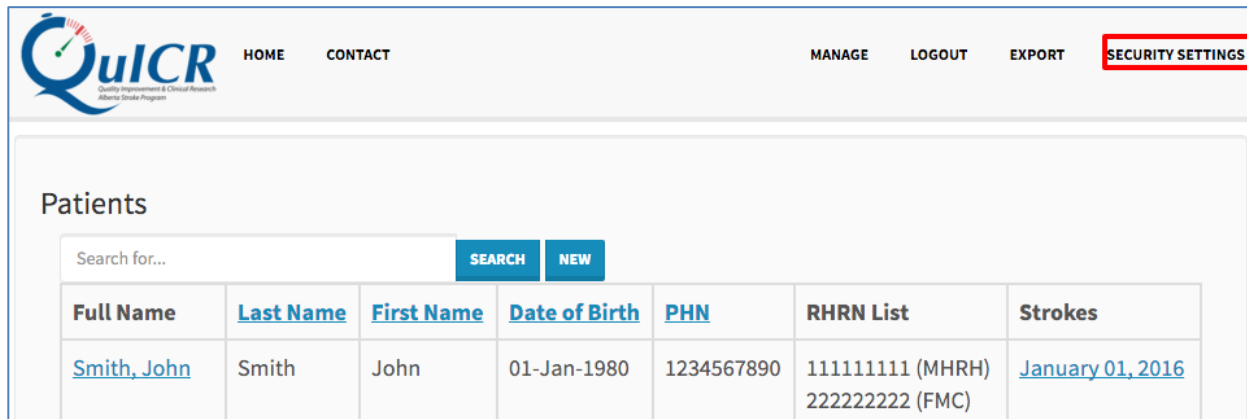
Discharge Time: (HH:mm 24hr)

Discharge Disposition

## Appendix C Security

To access Account Security, select “*Security Settings*” at the top of any page as shown in Figure 69 below. (boxed in red). If you are adding or editing patient data, please remember to save first.

Figure 69: Security Settings



The screenshot shows the QuICR web application interface. At the top, there is a navigation bar with the QuICR logo on the left and links for HOME, CONTACT, MANAGE, LOGOUT, EXPORT, and SECURITY SETTINGS. The SECURITY SETTINGS link is highlighted with a red box. Below the navigation bar, there is a section titled 'Patients'. This section includes a search bar with the placeholder text 'Search for...' and two buttons labeled 'SEARCH' and 'NEW'. Below the search bar is a table with the following columns: Full Name, Last Name, First Name, Date of Birth, PHN, RHRN List, and Strokes. The table contains one row of data for a patient named John Smith, born on 01-Jan-1980, with PHN 1234567890, RHRN List 111111111 (MHRH) and 222222222 (FMC), and a Strokes date of January 01, 2016.

Full Name	Last Name	First Name	Date of Birth	PHN	RHRN List	Strokes
<a href="#">Smith, John</a>	Smith	John	01-Jan-1980	1234567890	111111111 (MHRH) 222222222 (FMC)	<a href="#">January 01, 2016</a>

Here you will have the ability to add additional backup phone numbers, create backup tokens, and disable Two-Factor Authentication.

**Backup Phone Numbers** are used to access the QuICR Registry should the primary token device be unavailable. Please see **Appendix C.1** for more details.

**Backup Tokens** can be used to access the QuICR Registry when your primary token device and backup devices are not available. Backup Tokens can only be used once per code. It is recommended that you print and store a list of backup tokens at a secure location. Please see Appendix C.2 for more details.

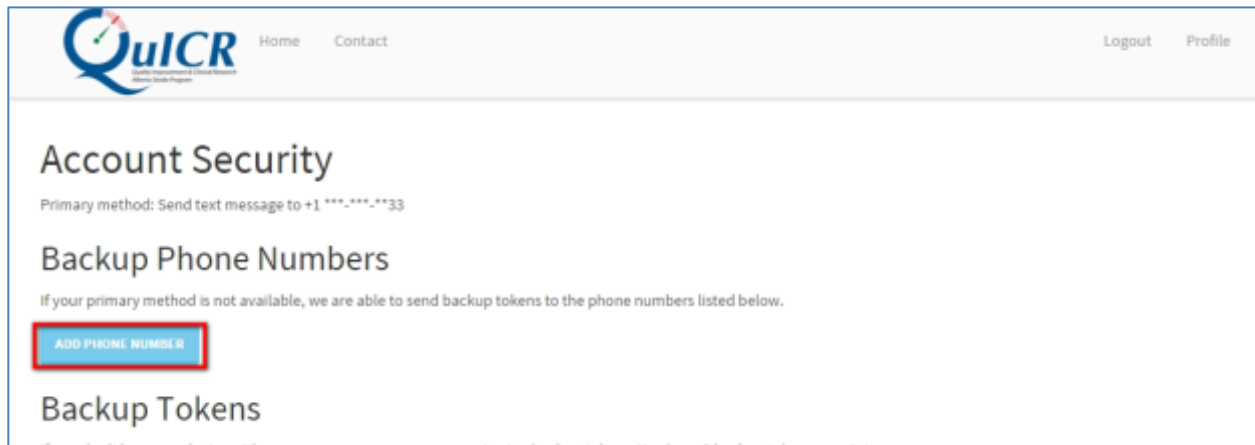
**Disabling Two-Factor Authentication** is not recommended. If you disable Two-Factor Authentication, you will have to redo the process and enable Two-Factor Authentication. Disabling Two-Factor Authentication is recommended only if you are deleting account saves from your Google Authenticator mobile application. This includes resetting your phone or reinstalling Google Authenticator. Please see Appendix C.3 for more details.

## Appendix C.1 Security – Adding Backup Phone Numbers

Adding a backup phone number is a feature that helps you access the QuICR Registry if your primary authentication method (Text Message or Token Generator) fails.

To add Backup Phone Numbers, navigate to the Account Security page and select “*Add Phone Number*” as shown in Figure 70 (boxed in red).

*Figure 70: Adding a Backup Phone (1)*



Enter the phone number you wish to receive the Text Messages on. **Ensure that the beginning of the phone number has “+” and the country code.** Once your phone number has been entered, ensure that “Text Message” is selected and click “Next” as shown in Figure 71 (boxed in red).

Figure 71: Adding a Backup Phone (2)

QuICR Home Contact Logout Profile

## Add Backup Phone

You'll be adding a backup phone number to your account. This number will be used if your primary method of registration is not available.

Phone Number: +12223334444

Method: ☒ Text message

BACK NEXT CANCEL

On your mobile device, you will receive a 6-digit number through Text Message. Enter the 6-digit number into the Token box on the QuICR Registry as shown in Figure 72 (boxed in red).

Figure 72: Adding a Backup Phone (3)

QuICR Home Contact Logout Profile

## Add Backup Phone

We've sent a token to your phone number. Please enter the token you've received.

Token: 807910

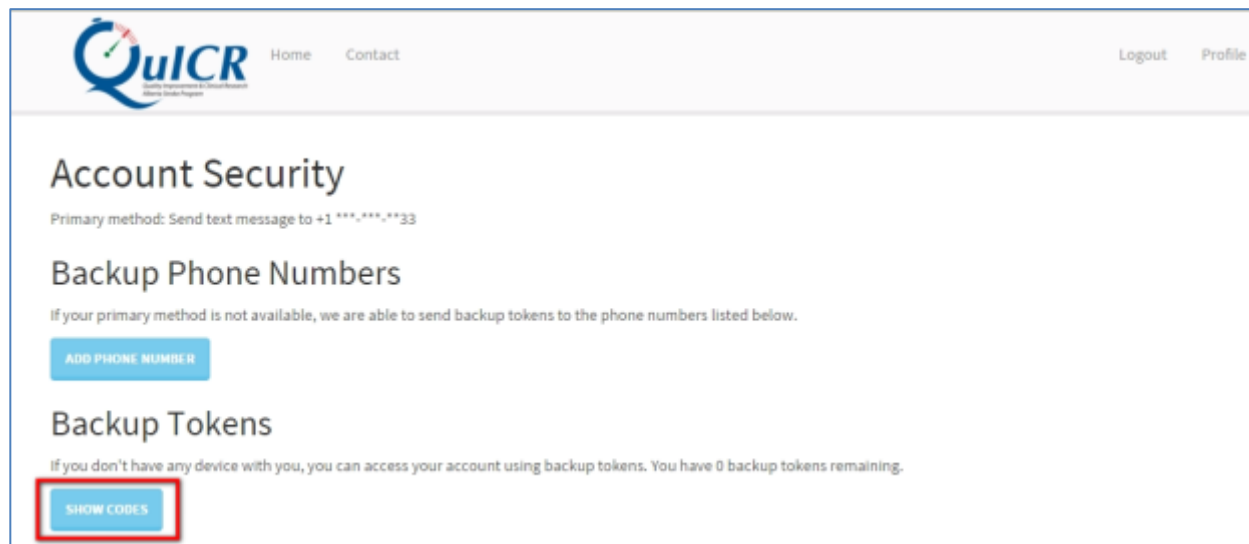
BACK NEXT CANCEL

## Appendix C.2 Generating and Using Backup Tokens

Backup Tokens are useful if you do not have access to your primary authentication method or registered backup phone number. Please generate the backup tokens and store them in a safe location for future use.

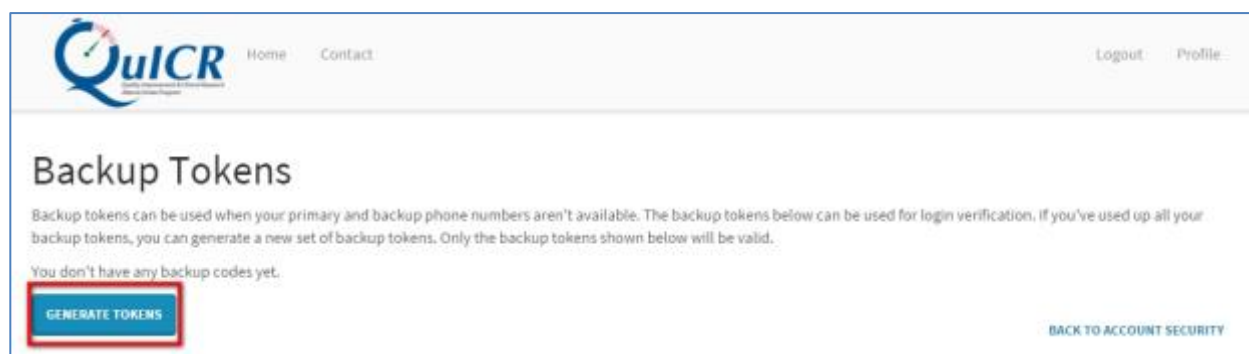
To create a list of Backup Tokens, navigate to the Account Security, select “*Show Codes*” (boxed in red) as shown below in Figure 73.

Figure 73: Generating Backup Tokens (1)



Next, select “Generate Tokens” as shown below in Figure 74 (boxed in red).

Figure 74: Generating Backup Tokens (2)



## Appendix C.3 Disabling Two-Factor Authentication

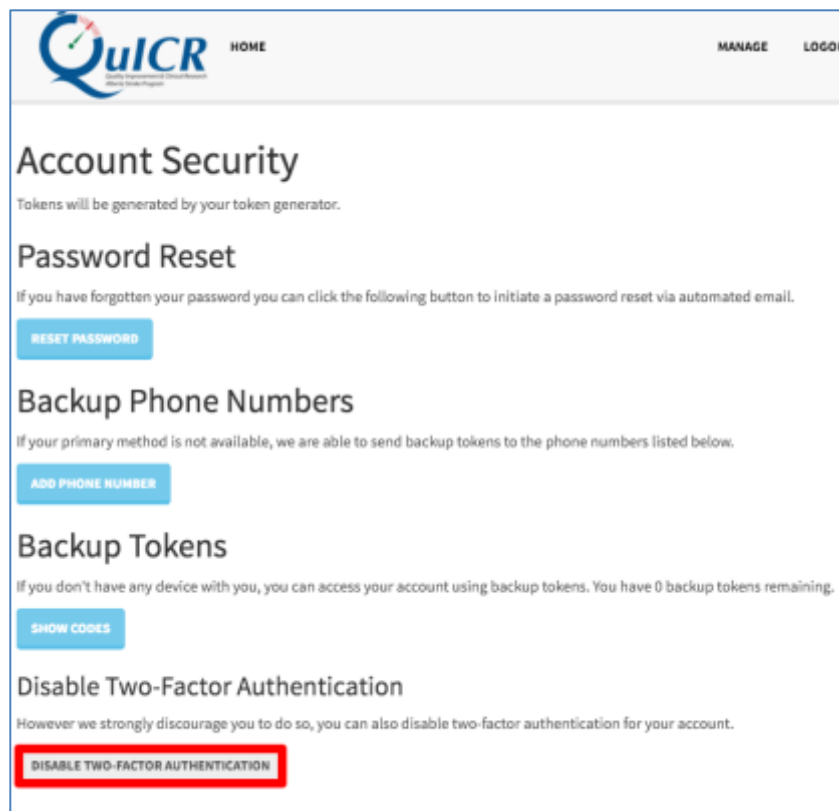
It is not recommended to disable Two-Factor Authentication, as you will have to re-enable Two-Factor Authentication upon login. Disabling Two-Factor Authentication may be useful in the following scenarios:

- 1) If the authentication method is “*Text Message*” and you are going to switch to a new phone number.
- 2) If the authentication method is “*Token Generator*” and you are going to remove Google Authenticator from your mobile device.
- 3) If the authentication method is “*Token Generator*” and you are going to remove reformat/reset your mobile authentication device.
- 4) If the authentication method is “*Token Generator*” and you would like to transfer your Two-Factor Authentication device to another device.

If you did not disable Two-Factor Authentication before acting upon these scenarios’ you will be locked out of the QuICR Registry. If this happens to you, email QuICR Support at [quicr@ucalgary.ca](mailto:quicr@ucalgary.ca) or by calling (403) 220-8256. QuICR Support will reset your Two-Factor Authentication and you will have to re-enable it.

To disable Two-Factor Authentication, please click “*Disable Two-Factor Authentication*” (boxed in red) from the Security Settings page as shown in Figure 75.

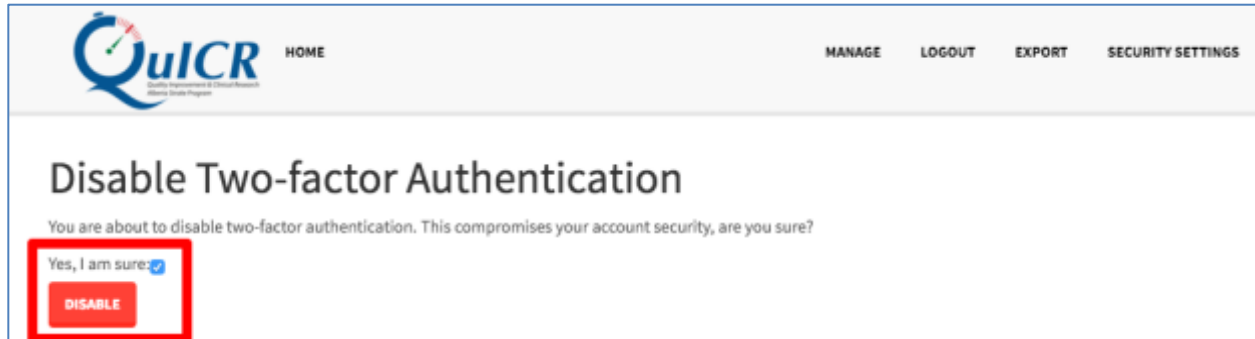
Figure 75: Disabling Two-Factor Authentication (1)



Next, check “*Yes, I am sure*” and click “*Disable*” as shown in Figure 76 (boxed in red).



Figure 76: Disabling Two-Factor Authentication (2)



QuICR HOME MANAGE LOGOUT EXPORT SECURITY SETTINGS

## Disable Two-factor Authentication

You are about to disable two-factor authentication. This compromises your account security, are you sure?

Yes, I am sure: ☒

**DISABLE**

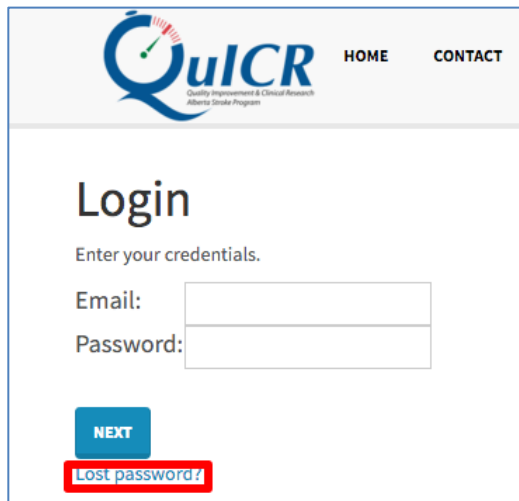
You have now disabled Two-Factor Authentication. If you would like to re-enable Two-Factor Authentication, please follow the steps found in Section 4.

## Appendix D Changing Your Password

If you have forgotten your password or would like to change your password, navigate to the login page at: <https://quicr.cru.ucalgary.ca/account/login/>.

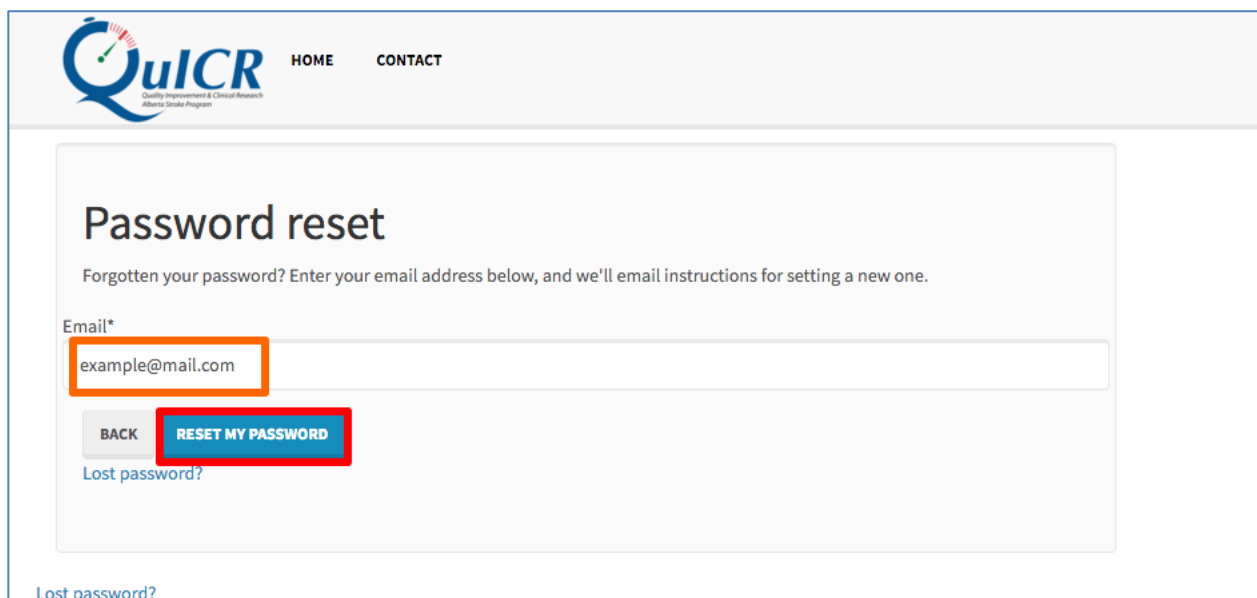
Next, click on the “Lost password” text (boxed in **red**). This is shown in Figure 77.

Figure 77: Password Reset (1)



You will be redirected to the Password Reset page. Enter your login email address in the text box (boxed in **orange**) and click “Reset my password” (boxed in **red**). This is shown in Figure 78. If you would like to go back to the Login page, please click the “Back” button.

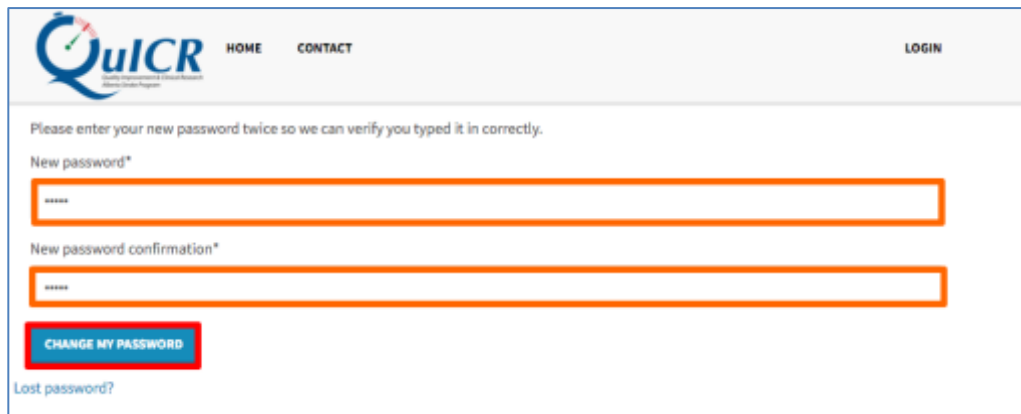
Figure 78: Password Reset (2)



After you have completed the previous step, log into the email that you typed in the text box. You will receive an email from [quicr@ucalgary.ca](mailto:quicr@ucalgary.ca). Open the email and click on the attached hyperlink.

You will be redirected to the Change Password page. Please enter your desired password in the two text boxes provided (boxed in **orange**) then click the “*Change my password*” button (boxed in **red**). These steps are shown in Figure 79.

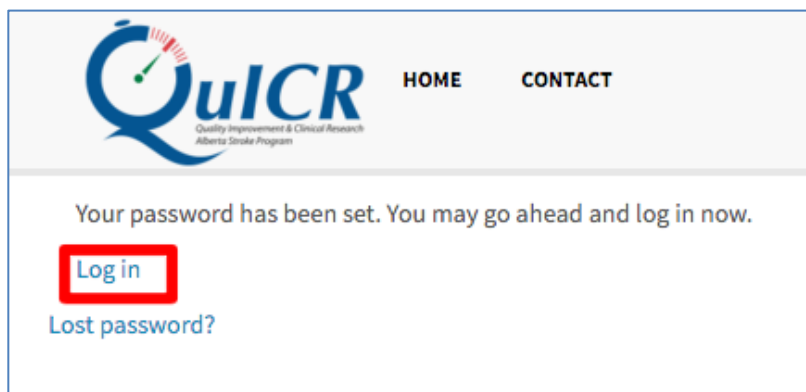
Figure 79: Password Reset (3)



The screenshot shows the QuICR website header with the logo, 'HOME', 'CONTACT', and 'LOGIN' links. Below the header, a message reads: 'Please enter your new password twice so we can verify you typed it in correctly.' There are two text input fields for 'New password\*' and 'New password confirmation\*', both highlighted with orange borders. Below these fields is a red button with the text 'CHANGE MY PASSWORD'. At the bottom left, there is a link for 'Lost password?'.

If the password’s match, you will be redirected to a Password Reset Confirmation page. From here, click “*Login*” (boxed in **red**) to login with your new password. This step is shown in Figure 80.

Figure 80: Password Reset (4)



The screenshot shows the QuICR website header with the logo, 'HOME', and 'CONTACT' links. Below the header, a message reads: 'Your password has been set. You may go ahead and log in now.' There is a red button with the text 'Log in'. Below the button, there is a link for 'Lost password?'.

**If you are having difficulties changing your password, please email QuICR Support at [quicr@ucalgary.ca](mailto:quicr@ucalgary.ca) or by calling (403) 220-8256.**