99.93 MONITORING OF S	Page 1 of 2 HEP DEATHS 30-32 33
(4) $(5)$ $(4-27)$ $(6)$ $(28-29)$ $(9)$ $(41-46)$	$ \begin{array}{cccccccccccccccccccccccccccccccccccc$
Patient ID	Form No. SH 091 Ver No. 2 Seq No.
3 36-37 38-39 34-35	CAUSE OF DEATH:
Date Received (Form Date)	a. Stroke $\square$ (b/1) $26$ $118$
Date of Initial Report	a. Guore (0/1) (20)
Date of Death: Death: 53-58	b. Sudden death (<1 hour) (b/1) (27) 119
Date of Final Report	c. Rapid death (1-24 hours) (b/1) (51) 120
	d. Myocardial infarction (b/1) (28) 121
DOCUMENTATION:	e. Left ventricular failure (b/1) (29) 122
b=Not received 1= Received 2=N/A, won't receive	
Death Certificate Autopsy Report 46 66	f. Other cardiovascular; specify: $\Box$ (b/1) $(55)$ 153
Hospital Records $\Box 47^{67}$ CT Scan $\Box 48$	g. Renal disease (b/1) 56 154
SH25 $\square$ $49$ $69$ SH26 $\square$ $50$ $70$	h. Diabetes mellitus (b/1) (57) 155
Date documentation complete:	i. Neoplastic disease; specify site(s): (b/1) (50) 156
CT scan to be coded? $\square$ (b/1, 2) $\bigcirc$ 71-76	Cancer primary site #1 $\Box\Box$ 65 166-167
Date all CT coding received:	Cancer primary site #2 $\Box\Box\Box$ 66 168-169
CT coding final? $\Box$ $\bigcirc$	Cancer primary site #3 $\Box\Box$ $\boxed{67}$ 170-171
CT to be adjudicated? $\Box$ (b/1) 86-91	j. Gastrointestinal disease (b/1) 59 157
Date CT adjudication complete:	k. Respiratory disease (b/1) 60 158
	I. Infectious disease (b/1) (b1) 159
98-99(19)	m. Accident, suicide, or homicide (b/1) 62 160
Date all received from Coders:	n. Other noncardiovascular; specify: $\square$ (b/1) $\bigcirc$ $\bigcirc$ $\bigcirc$ $\bigcirc$ $\bigcirc$ 161
Coding final? $\Box$ (b/1) 23 110 104-109	o. Indeterminate (b/1) (32) 125
Cause to be adjudicated? (b/1) (24) 111	ICDA Code: 0 162-165
Date adjudication complete: $\Box\Box\Box\Box\Box\Box\Box\Box\Box\Box\Box\Box$ 112	-117

## **MONITORING OF SHEP DEATHS**

Patient ID	Form No. <b>SH 091</b>	Ver No. 2	Seq No.
STROKE SUBTYPING:			
Date stroke subtyping sent: $\Box\Box\Box\Box\Box\Box\Box\Box\Box\Box\Box\Box\Box$			
Date subtyping received:			
Subtyping final ? $\square$ (b/1) $\bigcirc$ 138			
Adjudicated? (b/1) (36) 139			
Date subtype adjudication complete:			
STROKE SUBTYPE:			
Subarachnoid hemorrhage $\square$ (38) 146			
Intra parenchymal hemorrhage $\boxed{39}$ 147			
Lacunar (b/1) 40 148			
Embolic $\square$ (b/1) $\boxed{41}$ 149			
Atherosclerotic (b/1) (42) 150			
Other unknown/ischemic (b/1) (43) 151			
Unknown type $\Box$ (प्य) $_{152}$			
$ \begin{array}{c c} \hline 52 \\ \hline 53 \\ \hline 64 \\ \end{array} $ Obsolete fields There are no corresponding data item	ns.		