

IPEC Data Management Acute Stroke Measures User Guide

Types of Accesses

Access to the data and reports on the IPEC Data Management Site is restricted to people approved by Facility or Network leadership. There are four types of accesses to this site:

- 1). Facility Edit/Network View – allows the user to enter data for a facility and view only access to all other facilities in the facility's network
- 2). Network View – allows the user to view only the data for all facilities in their network
- 3). Network Edit – allows the user to edit data for all facilities in their network

Access must be granted by the Facility Director, Chief of Staff, or Network Leadership. This approval can come in the form of a simple [e-mail to ipec@va.gov](mailto:ipec@va.gov) from the appropriate leadership person requesting that an individual be given access.

Welcome! You have been assigned by your Facility or Network to input or review Acute Stroke Measure data in the IPEC Database. This user guide will take you step by step through the process. Please note that you should not use the Back button in your web browser to navigate through the website. Use the tabs at the top of the page or the buttons at the bottom of the page to navigate the website.

IPEC Data Management

home data views reports utilities

home [get help](#)

Enter your username and password and click the [log in] button

username:

password:

Click [get help](#) at the top right at any time for instructions.

Don't remember your username or password?
Enter your va.gov email address below and your account information will be emailed to you.

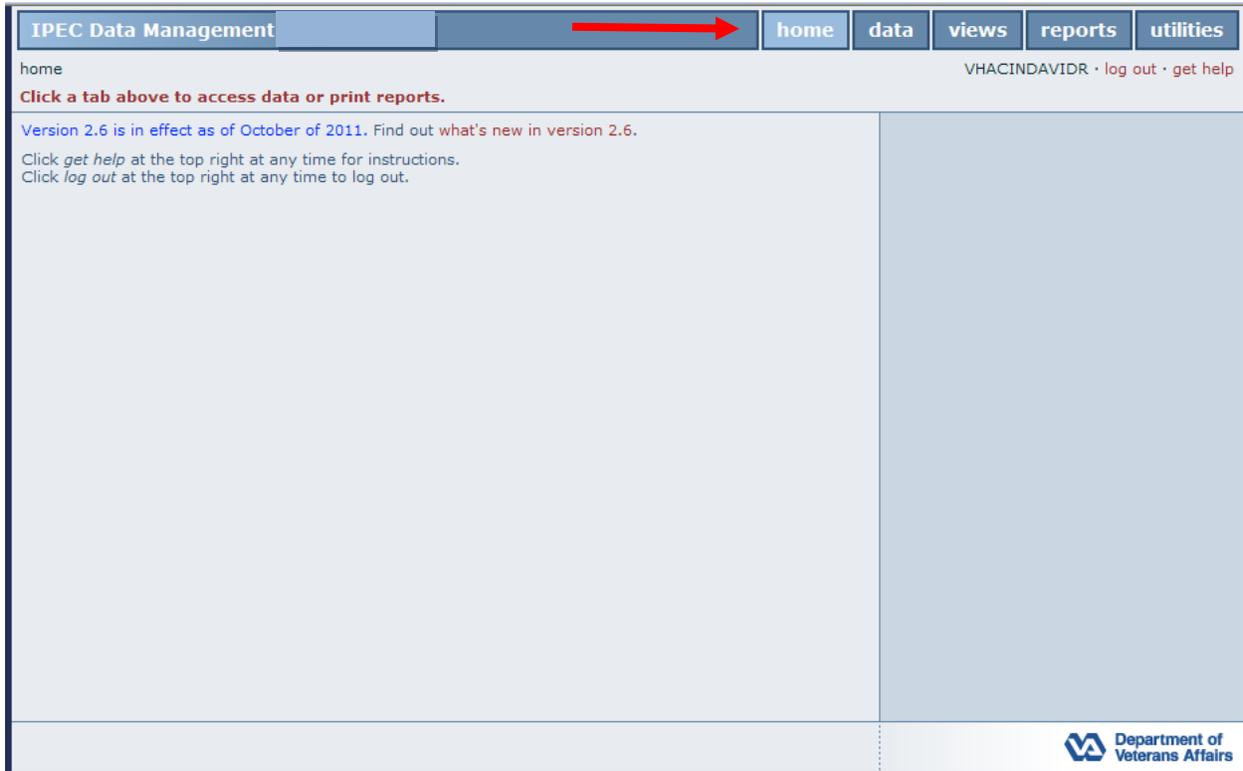
email address @va.gov

If you do not have an account, find out how to [request access to the system](#).

UNITED STATES DEPARTMENT OF VETERANS AFFAIRS

You will be assigned a username and password by the IPEC, which you will use the first time you log on. After you enter your username and password, click the Log In button (green arrow).

If you have forgotten your password, you must enter your VA e-mail address in the space provided (red arrow) and press Enter. The website will automatically send your username and password to your e-mail account.



This is the home page for the IPEC Data Management website. The red arrow indicates the toolbar that will allow you to navigate through the website.

IPEC Data Management - Production System

home data views reports utilities

home > data

VHACINDAVIDR · log out · get help

Select a data module

data module	edit or view...
CLAB Infections	central line associated bloodstream infections
CLAB Compliance	central line associated bloodstream infection compliance
VAP Infections	ventilator associated pneumonia
VAP Compliance	ventilator associated pneumonia compliance
RRS/RRT Measures	rapid response system/team measures
MRSA in Acute Care Facilities	MRSA measures in acute care facilities
MRSA in Acute Care Units	MRSA measures in acute care units
CDI in Acute Care Facilities	C. difficile infections in acute care facilities
CDI in SCI Units	C. difficile infections in spinal cord injury units
MRSA in CLC Facilities	MRSA measures in community living center facilities
MRSA in CLC Units	MRSA measures in community living center units
MedRecon Measures	medication reconciliation measures
VTE Prophylaxis Measures	VTE prophylaxis measures
CAP Compliance	community acquired pneumonia compliance
CAUTI Symptomatic Infections	catheter associated urinary tract infections (symptomatic)
CAUTI Compliance	catheter associated urinary tract infection compliance
Dialysis Access & Infectious Events	dialysis associated vascular access and infectious events
Falls	falls with or without major injury
Acute Stroke Measures	acute ischemic stroke patient measures

go back

Department of Veterans Affairs

To enter the Dialysis database, select the data tab (red arrow). A screen like the one above will appear. Place the cursor over, "Acute Stroke Measures," (blue arrow) and click. A screen like the one below will appear.

IPEC Data Management - Production System

home data views reports utilities

home > data > acute stroke measures

VHACINDAVIDR · log out · get help

Enter data and click [save]

01.402 Togus, ME		May 2012 (fiscal QTR3 2012)
01		total number of patients given tPA
Patients With Acute Ischemic Stroke in "2 hour" Group — see footnote (1) below		
02		patients with acute ischemic stroke in "2 hour" group
03a		number of (02) not given tPA due primarily to excess bleeding risk per NINDS criteria/tPA checklist
03b		number of (02) not given tPA due primarily to CT signs of infarct > 1/3 of MCA territory
03c		number of (02) not given tPA due primarily to symptoms rapidly improving
03d		number of (02) not given tPA due primarily to minor stroke (NIHSS score < 3)
03e		number of (02) not given tPA due primarily to patient/family refusal
03f		number of (02) not given tPA due to some other reason
03		total number of (02) not given tPA due to an exluding factor
04		total number of (02) eligible to receive tPA
05		number of (04) who received timely IV thrombolytic therapy — see footnote (2) below
06		% rate of timely IV thrombolytic therapy for "2 hour" patient group
07		number of (02) for whom a tPA checklist was documented (optional)
08		% rate of checklist documentation for "2 hour" patient group
Patients With Acute Ischemic Stroke in "3 1/2 hour" Group — see footnote (3) below		
09		patients with acute ischemic stroke in "3 1/2 hour" group
10a		number of (09) not given tPA due primarily to excess bleeding risk per NINDS criteria/tPA checklist
10b		number of (09) not given tPA due primarily to CT signs of infarct > 1/3 of MCA territory

save << >> refresh

go back

Department of Veterans Affairs

Data facility and month...

network

01 New England

facility (see indicator key below)

- 402 Togus, ME
- 405 White River Junction, VT
- 518 Bedford
- 523A4 Boston HCS
- 523A5 Brockton VAMC
- 608 Manchester
- 631 Northampton
- 650 Providence, RI
- 699 Connecticut HCS

00=complete 00=pending 00=no data

month (see month color key below)

year	01	02	03	04	05	06	07	08	09	10	11	12
2012												
2011												
2010												
2009												
2008												
2007												
2006												
2005												
2004												
2003												

00=complete 00=pending 00=no data

no data for station 402 Togus, ME

Select your network using the drop down menu (red arrow) and select your facility (blue arrow) by clicking on your choice. Your choice will be highlighted in orange. Select the year and month (yellow arrow) by clicking on your choice. Once again, your selection will be highlighted in orange.

Note the small indicator circles (green oval) under the facility box in the screen shot above. Green indicates that data has been entered and is complete, red indicates that your data is pending, and gray indicates that no data has been entered.

month (see month color key below)

2012	01	02	03	04	05	06							
2011	01	02	03	04	05	06	07	08	09	10	11	12	
2010	01	02	03	04	05	06	07	08	09	10	11	12	
2009	01	02	03	04	05	06	07	08	09	10	11	12	
2008	01	02	03	04	05	06	07	08	09	10	11	12	
2007	01	02	03	04	05	06	07	08	09	10	11	12	
2006	01	02	03	04	05	06	07	08	09	10	11	12	
2005	01	02	03	04	05	06	07	08	09	10	11	12	
2004	01	02	03	04	05	06	07	08	09	10	11	12	
2003										10	11	12	

00=complete 00=pending 00=no data

+ data complete for station 561 New Jersey HCS

The data status will also be reflected in the month box (above). As you can see from the screen shot above, the data is complete for all months as indicated by the color green.

IPEC Data Management - Production System home data views reports utilities

home > data > acute stroke measures VHACINDAVIDR · log out · get help

Enter data and click [save]

01.402 Togus, ME May 2012 (fiscal QTR3 2012)

01	total number of patients given tPA
Patients With Acute Ischemic Stroke in "2 hour" Group – see footnote (1) below	
02	patients with acute ischemic stroke in "2 hour" group
03a	number of (02) not given tPA due primarily to excess bleeding risk per NINDS criteria/tPA checklist
03b	number of (02) not given tPA due primarily to CT signs of infarct > 1/3 of MCA territory
03c	number of (02) not given tPA due primarily to symptoms rapidly improving
03d	number of (02) not given tPA due primarily to minor stroke (NIHSS score < 3)
03e	number of (02) not given tPA due primarily to patient/family refusal
03f	number of (02) not given tPA due to some other reason
03	total number of (02) not given tPA due to an exluding factor
04	total number of (02) eligible to receive tPA
05	number of (04) who received timely IV thrombolytic therapy – see footnote (2) below
06	% rate of timely IV thrombolytic therapy for "2 hour" patient group
07	number of (02) for whom a tPA checklist was documented (optional)
08	% rate of checklist documentation for "2 hour" patient group
Patients With Acute Ischemic Stroke in "3 1/2 hour" Group – see footnote (3) below	
09	patients with acute ischemic stroke in "3 1/2 hour" group
10a	number of (09) not given tPA due primarily to excess bleeding risk per NINDS criteria/tPA checklist
10b	number of (09) not given tPA due primarily to CT signs of infarct > 1/3 of MCA territory

save << >> refresh go back Department of Veterans Affairs

Data facility and month...

network
01 New England

facility (see indicator key below)

- 402 Togus, ME
- 405 White River Junction, VT
- 518 Bedford
- 523A4 Boston HCS
- 523A5 Brockton VAMC
- 608 Manchester
- 631 Northampton
- 650 Providence, RI
- 689 Connecticut HCS

⊕=complete ⊖=pending ○=no data

month (see month color key below)

2012	01	02	03	04	05	06							
2011	01	02	03	04	05	06	07	08	09	10	11	12	
2010	01	02	03	04	05	06	07	08	09	10	11	12	
2009	01	02	03	04	05	06	07	08	09	10	11	12	
2008	01	02	03	04	05	06	07	08	09	10	11	12	
2007	01	02	03	04	05	06	07	08	09	10	11	12	
2006	01	02	03	04	05	06	07	08	09	10	11	12	
2005	01	02	03	04	05	06	07	08	09	10	11	12	
2004	01	02	03	04	05	06	07	08	09	10	11	12	
2003										10	11	12	

00=complete 00=pending 00=no data

no data for station 402 Togus, ME

Before you begin entering your data, you must select your network, facility and timeframe as mentioned in the screen shots above.

Enter your data, beginning with line 01 (red arrow) while following the guidelines outlined in Footnote #1.

(1) Patients with acute ischemic stroke with hospital arrival time within 2 hours (*arrived* ≤ 120 min) after symptom onset, and patients who had a stroke while admitted for any reason whose stroke symptoms were recognized within 2 hours (*recognized* ≤ 120 min) after symptom onset.

Enter your data in lines 02, and 03a, 03b, 03c, 03d, 03e, 03f (blue bracket). Lines 03 and 04 (green bracket) will calculate and populate automatically.

Questions 03a through 03f are all based on your response to question 02.

IPEC Data Management · Production System		home	data	views	reports	utilities
home > data > acute stroke measures		VHACINDAVIDR · log out · get help				
Enter data and click [save]						
01.402 Togus, ME		January 2012 (fiscal QTR2 2012)				
01	45	total number of patients given tPA				
Patients With Acute Ischemic Stroke in "2 hour" Group — see footnote (1) below						
02	20	patients with acute ischemic stroke in "2 hour" group				
03a	5	number of (02) not given tPA due primarily to excess bleeding risk per NINDS criteria/tPA checklist				
03b	1	number of (02) not given tPA due primarily to CT signs of infarct > 1/3 of MCA territory				
03c	1	number of (02) not given tPA due primarily to symptoms rapidly improving				
03d	1	number of (02) not given tPA due primarily to minor stroke (NIHSS score < 3)				
03e	1	number of (02) not given tPA due primarily to patient/family refusal				
03f	1	number of (02) not given tPA due to some other reason				
03	10	total number of (02) not given tPA due to an excluding factor				
04	10	total number of (02) eligible to receive tPA				
05		number of (04) who received timely IV thrombolytic therapy — see footnote (2) below				
06		% rate of timely IV thrombolytic therapy for "2 hour" patient group				
07		number of (02) for whom a tPA checklist was documented (optional)				
08		% rate of checklist documentation for "2 hour" patient group				
Patients With Acute Ischemic Stroke in "3 1/2 hour" Group — see footnote (3) below						
09		patients with acute ischemic stroke in "3 1/2 hour" group				
10a		number of (09) not given tPA due primarily to excess bleeding risk per NINDS criteria/tPA checklist				
10b		number of (09) not given tPA due primarily to CT signs of infarct > 1/3 of MCA territory				
save		<<	>>	refresh		
				go back		

For Line 05 (red arrow), your response will be based upon your data in Line 04 while using the criteria set forth in footnote #2. Once data has been entered into Line 05, Line 06 will automatically calculate.

(2) Patients in "2 hour" group for whom IV thrombolytic therapy was initiated at this hospital within 3 hours (*initiated* ≤ 180 min) of symptom onset.

Line 07 (green arrow) is also based on your response to line 02. Collection of this data is optional.

IPEC Data Management - Production System			home	data	views	reports	utilities
home > data > acute stroke measures			VHACINDAVIDR · log out · get help				
Enter data and click [save]							
01.402 Togus, ME			January 2012 (fiscal QTR2 2012)				
01	45	total number of patients given tPA					
Patients With Acute Ischemic Stroke in "2 hour" Group — see footnote (1) below							
02	20	patients with acute ischemic stroke in "2 hour" group					
03a	5	number of (02) not given tPA due primarily to excess bleeding risk per NINDS criteria/tPA checklist					
03b	1	number of (02) not given tPA due primarily to CT signs of infarct > 1/3 of MCA territory					
03c	1	number of (02) not given tPA due primarily to symptoms rapidly improving					
03d	1	number of (02) not given tPA due primarily to minor stroke (NIHSS score < 3)					
03e	1	number of (02) not given tPA due primarily to patient/family refusal					
03f	1	number of (02) not given tPA due to some other reason					
03	10	total number of (02) not given tPA due to an excluding factor					
04	10	total number of (02) eligible to receive tPA					
05	5	number of (04) who received timely IV thrombolytic therapy — see footnote (2) below					
06	50.0	% rate of timely IV thrombolytic therapy for "2 hour" patient group					
07	3	number of (02) for whom a tPA checklist was documented (optional)					
08	15.0	% rate of checklist documentation for "2 hour" patient group					



Line 07 (green arrow) is also based on your response to line 02. Collection of this data is optional. If data is entered, Line 08 (blue oval) will calculate and populate automatically.

Before entering data into Lines 09 through 10f, please follow the criteria set forth in Footnote #3.

(3) Patients with acute ischemic stroke with hospital arrival time within 3 1/2 hours but later than 2 hours (121 min ≤ arrived ≤ 210 min) after symptom onset, and patients who had a stroke while admitted for any reason whose stroke symptoms were recognized within 3 1/2 hours but later than 2 hours (121 min ≤ recognized ≤ 210 min) after symptom onset.

IPEC Data Management - Production System			home	data	views	reports	utilities
home > data > acute stroke measures			VHACINDAVIDR · log out · get help				
Enter data and click [save]							
05			January 2012 (fiscal QTR2 2012)				
05	5	number of (04) who received timely IV thrombolytic therapy — see footnote (2) below					
06	50.0	% rate of timely IV thrombolytic therapy for "2 hour" patient group					
07	3	number of (02) for whom a tPA checklist was documented (optional)					
08	15.0	% rate of checklist documentation for "2 hour" patient group					
Patients With Acute Ischemic Stroke in "3 1/2 hour" Group — see footnote (3) below							
09	25	patients with acute ischemic stroke in "3 1/2 hour" group					
10a	10	number of (09) not given tPA due primarily to excess bleeding risk per NINDS criteria/tPA checklist					
10b		number of (09) not given tPA due primarily to CT signs of infarct > 1/3 of MCA territory					
10c	1	number of (09) not given tPA due primarily to symptoms rapidly improving					
10d	1	number of (09) not given tPA due primarily to minor stroke (NIHSS score < 3)					
10e	0	number of (09) not given tPA due primarily to patient/family refusal					
10f	0	number of (09) not given tPA due to some other reason					
10	12	total number of (09) not given tPA due to an excluding factor					
11	13	total number of (09) eligible to receive tPA					
12	0	number of (11) who received timely IV thrombolytic therapy — see footnote (4) below					
13	0.0	% rate of timely IV thrombolytic therapy for "3 1/2 hour" patient group					
14		number of (09) for whom a tPA checklist was documented (optional)					
15		% rate of checklist documentation for "3 1/2 hour" patient group					
Dysphagia Screening Before Oral Intake — see footnote (5) below							
16		patients with ischemic stroke with any oral intake during hospital stay					
17		number of (16) with a documented dysphagia screening performed before oral intake					



save << >> refresh

go back



Once data has been entered into Lines 09, 10a, 10b, 10c, 10d and 10f (blue bracket above) your data will calculate and populate automatically in Lines 10 and 11 (green bracket below).

IPEC Data Management - Production System

home data views reports utilities

home > data > acute stroke measures VHACINDAVIDR · log out · get help

Enter data and click [save]

05	5	number of (04) who received timely IV thrombolytic therapy — see footnote (2) below
06	50.0	% rate of timely IV thrombolytic therapy for "2 hour" patient group
07	3	number of (02) for whom a tPA checklist was documented (optional)
08	15.0	% rate of checklist documentation for "2 hour" patient group
Patients With Acute Ischemic Stroke in "3 1/2 hour" Group — see footnote (3) below		
09	25	patients with acute ischemic stroke in "3 1/2 hour" group
10a	10	number of (09) not given tPA due primarily to excess bleeding risk per NINDS criteria/tPA checklist
10b		number of (09) not given tPA due primarily to CT signs of infarct > 1/3 of MCA territory
10c	1	number of (09) not given tPA due primarily to symptoms rapidly improving
10d	1	number of (09) not given tPA due primarily to minor stroke (NIHSS score < 3)
10e	0	number of (09) not given tPA due primarily to patient/family refusal
10f	0	number of (09) not given tPA due to some other reason
10	12	total number of (09) not given tPA due to an excluding factor
11	13	total number of (09) eligible to receive tPA
12	0	number of (11) who received timely IV thrombolytic therapy — see footnote (4) below
13	0.0	% rate of timely IV thrombolytic therapy for "3 1/2 hour" patient group
14		number of (09) for whom a tPA checklist was documented (optional)
15		% rate of checklist documentation for "3 1/2 hour" patient group
Dysphagia Screening Before Oral Intake — see footnote (5) below		
16		patients with ischemic stroke with any oral intake during hospital stay
17		number of (16) with a documented dysphagia screening performed before oral intake

Data facility and month...

network
01 New England

facility (see indicator key below)

- 402 Togus, ME
- 405 White River Junction, VT
- 518 Bedford
- 523A4 Boston HCS
- 523A5 Brockton VAMC
- 608 Manchester
- 631 Northampton
- 650 Providence, RI
- 689 Connecticut HCS

=complete =pending =no data

month (see month color key below)

2012	01	02	03	04	05	06	07	08	09	10	11	12
2011	01	02	03	04	05	06	07	08	09	10	11	12
2010	01	02	03	04	05	06	07	08	09	10	11	12
2009	01	02	03	04	05	06	07	08	09	10	11	12
2008	01	02	03	04	05	06	07	08	09	10	11	12
2007	01	02	03	04	05	06	07	08	09	10	11	12
2006	01	02	03	04	05	06	07	08	09	10	11	12
2005	01	02	03	04	05	06	07	08	09	10	11	12
2004	01	02	03	04	05	06	07	08	09	10	11	12
2003										10	11	12

=complete =pending =no data

no data for station 402 Togus, ME

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save << >> refresh go back

Line 12 (red arrow) is based on the calculation of Line 11 and the criteria set forth in footnote #4.

(4) Patients in "3 1/2 hour" group for whom IV thrombolytic therapy was initiated at this hospital within 4 1/2 hours (*initiated* ≤ 270 min) of symptom onset.

Once that data has been entered, Line 13 (blue arrow below) will calculate and populate automatically.

IPEC Data Management - Production System

home > data > acute stroke measures

Enter data and click [save]

05	5	number of (04) who received timely IV thrombolytic therapy — see footnote (2) below
06	50.0	% rate of timely IV thrombolytic therapy for "2 hour" patient group
07	3	number of (02) for whom a tPA checklist was documented (optional)
08	15.0	% rate of checklist documentation for "2 hour" patient group
Patients With Acute Ischemic Stroke in "3 1/2 hour" Group — see footnote (3) below		
09	25	patients with acute ischemic stroke in "3 1/2 hour" group
10a	10	number of (09) not given tPA due primarily to excess bleeding risk per NINDS criteria/tPA checklist
10b		number of (09) not given tPA due primarily to CT signs of infarct > 1/3 of MCA territory
10c	1	number of (09) not given tPA due primarily to symptoms rapidly improving
10d	1	number of (09) not given tPA due primarily to minor stroke (NIHSS score < 3)
10e	0	number of (09) not given tPA due primarily to patient/family refusal
10f	0	number of (09) not given tPA due to some other reason
10	12	total number of (09) not given tPA due to an excluding factor
11	13	total number of (09) eligible to receive tPA
12	10	number of (11) who received timely IV thrombolytic therapy — see footnote (4) below
13	76.9	% rate of timely IV thrombolytic therapy for "3 1/2 hour" patient group
14		number of (09) for whom a tPA checklist was documented (optional)
15		% rate of checklist documentation for "3 1/2 hour" patient group
Dysphagia Screening Before Oral Intake — see footnote (5) below		
16		patients with ischemic stroke with any oral intake during hospital stay
17		number of (16) with a documented dysphagia screening performed before oral intake

save << >> refresh

go back

Department of Veterans Affairs



Line 14 (red arrow below) is based on your response to Line 09. Entering this data is optional. If data is entered into Line 14, Line 15 (blue arrow below) is calculated and populated automatically.

IPEC Data Management - Production System

home > data > acute stroke measures

Enter data and click [save]

10c	1	number of (09) not given tPA due primarily to symptoms rapidly improving
10d	1	number of (09) not given tPA due primarily to minor stroke (NIHSS score < 3)
10e	0	number of (09) not given tPA due primarily to patient/family refusal
10f	0	number of (09) not given tPA due to some other reason
10	12	total number of (09) not given tPA due to an excluding factor
11	13	total number of (09) eligible to receive tPA
12	10	number of (11) who received timely IV thrombolytic therapy — see footnote (4) below
13	76.9	% rate of timely IV thrombolytic therapy for "3 1/2 hour" patient group
14	15	number of (09) for whom a tPA checklist was documented (optional)
15	60.0	% rate of checklist documentation for "3 1/2 hour" patient group
Dysphagia Screening Before Oral Intake — see footnote (5) below		
16		patients with ischemic stroke with any oral intake during hospital stay
17		number of (16) with a documented dysphagia screening performed before oral intake
18		% rate of patients with a documented dysphagia screening performed before oral intake
NIH Stroke Scale (NIHSS) Documentation		
19a		total number of ischemic stroke patients cared for at your facility (admitted and in-hospital strokes, not transferred out for stroke care)
19b		total number of ischemic stroke patients transferred out from your facility for stroke care
19		total number of ischemic stroke patients
20		number of (19) with timely documentation of NIHSS score — see footnote (6) below
21		% rate of patients with with timely documentation of NIHSS score

save << >> refresh

go back

Department of Veterans Affairs



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home > data > acute stroke measures			VHACINDAVIDR · log out · get help																																																																																																																																						
Enter data and click [save]																																																																																																																																									
10c	1	number of (09) not given tPA due primarily to symptoms rapidly improving	Data facility and month...																																																																																																																																						
10d	1	number of (09) not given tPA due primarily to minor stroke (NIHSS score < 3)	network																																																																																																																																						
10e	0	number of (09) not given tPA due primarily to patient/family refusal	01 New England																																																																																																																																						
10f	0	number of (09) not given tPA due to some other reason	facility (see indicator key below)																																																																																																																																						
10	12	total number of (09) not given tPA due to an excluding factor	<input type="radio"/> 402 Togus, ME <input type="radio"/> 405 White River Junction, VT <input type="radio"/> 518 Bedford <input type="radio"/> 523A4 Boston HCS <input type="radio"/> 523A5 Brockton VAMC <input type="radio"/> 608 Manchester <input type="radio"/> 631 Northampton <input type="radio"/> 650 Providence, RI <input type="radio"/> 689 Connecticut HCS <input checked="" type="radio"/> =complete <input type="radio"/> =pending <input type="radio"/> =no data																																																																																																																																						
11	13	total number of (09) eligible to receive tPA	month (see month color key below)																																																																																																																																						
12	10	number of (11) who received timely IV thrombolytic therapy — see footnote (4) below	<table border="1"> <tr> <td>2012</td> <td>01</td> <td>02</td> <td>03</td> <td>04</td> <td>05</td> <td>06</td> <td>07</td> <td>08</td> <td>09</td> <td>10</td> <td>11</td> <td>12</td> </tr> <tr> <td>2011</td> <td>01</td> <td>02</td> <td>03</td> <td>04</td> <td>05</td> <td>06</td> <td>07</td> <td>08</td> <td>09</td> <td>10</td> <td>11</td> <td>12</td> </tr> <tr> <td>2010</td> <td>01</td> <td>02</td> <td>03</td> <td>04</td> <td>05</td> <td>06</td> <td>07</td> <td>08</td> <td>09</td> <td>10</td> <td>11</td> <td>12</td> </tr> <tr> <td>2009</td> <td>01</td> <td>02</td> <td>03</td> <td>04</td> <td>05</td> <td>06</td> <td>07</td> <td>08</td> <td>09</td> <td>10</td> <td>11</td> <td>12</td> </tr> <tr> <td>2008</td> <td>01</td> <td>02</td> <td>03</td> <td>04</td> <td>05</td> <td>06</td> <td>07</td> <td>08</td> <td>09</td> <td>10</td> <td>11</td> <td>12</td> </tr> <tr> <td>2007</td> <td>01</td> <td>02</td> <td>03</td> <td>04</td> <td>05</td> <td>06</td> <td>07</td> <td>08</td> <td>09</td> <td>10</td> <td>11</td> <td>12</td> </tr> <tr> <td>2006</td> <td>01</td> <td>02</td> <td>03</td> <td>04</td> <td>05</td> <td>06</td> <td>07</td> <td>08</td> <td>09</td> <td>10</td> <td>11</td> <td>12</td> </tr> <tr> <td>2005</td> <td>01</td> <td>02</td> <td>03</td> <td>04</td> <td>05</td> <td>06</td> <td>07</td> <td>08</td> <td>09</td> <td>10</td> <td>11</td> <td>12</td> </tr> <tr> <td>2004</td> <td>01</td> <td>02</td> <td>03</td> <td>04</td> <td>05</td> <td>06</td> <td>07</td> <td>08</td> <td>09</td> <td>10</td> <td>11</td> <td>12</td> </tr> <tr> <td>2003</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>10</td> <td>11</td> <td>12</td> </tr> </table>					2012	01	02	03	04	05	06	07	08	09	10	11	12	2011	01	02	03	04	05	06	07	08	09	10	11	12	2010	01	02	03	04	05	06	07	08	09	10	11	12	2009	01	02	03	04	05	06	07	08	09	10	11	12	2008	01	02	03	04	05	06	07	08	09	10	11	12	2007	01	02	03	04	05	06	07	08	09	10	11	12	2006	01	02	03	04	05	06	07	08	09	10	11	12	2005	01	02	03	04	05	06	07	08	09	10	11	12	2004	01	02	03	04	05	06	07	08	09	10	11	12	2003										10	11	12
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NIH Stroke Scale (NIHSS) Documentation																																																																																																																																									
19a		total number of ischemic stroke patients cared for at your facility (admitted and in-hospital strokes, not transferred out for stroke care)																																																																																																																																							
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20		number of (19) with timely documentation of NIHSS score — see footnote (6) below																																																																																																																																							
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<input type="button" value="save"/> <input type="button" value="<<"/> <input type="button" value=">>"/> <input type="button" value="refresh"/>			<input type="button" value="go back"/> 																																																																																																																																						

Enter your data into Line 16 (green arrow above) based on the criteria set forth in footnote #5.

(5) Oral intake includes medications, fluids, or food. Patients being transferred to another facility for acute stroke care are eligible if they have any oral intake between the time of stroke onset and the time of transfer.

Line 16 (yellow arrow above) is based on your response to Line 15. The data is then calculated and populated in Line 18 (black oval below).

IPEC Data Management - Production System

home > data > acute stroke measures

VHACINDAVIDR · log out · get help

Enter data and click [save]

10c	1	number of (09) not given tPA due primarily to symptoms rapidly improving
10d	1	number of (09) not given tPA due primarily to minor stroke (NIHSS score < 3)
10e	0	number of (09) not given tPA due primarily to patient/family refusal
10f	0	number of (09) not given tPA due to some other reason
10	12	total number of (09) not given tPA due to an exluding factor
11	13	total number of (09) eligible to receive tPA
12	10	number of (11) who received timely IV thrombolytic therapy – see footnote (4) below
13	76.9	% rate of timely IV thrombolytic therapy for "3 1/2 hour" patient group
14	15	number of (09) for whom a tPA checklist was documented (optional)
15	60.0	% rate of checklist documentation for "3 1/2 hour" patient group

Dysphagia Screening Before Oral Intake – see footnote (5) below

16	16	patients with ischemic stroke with any oral intake during hospital stay
17	15	number of (16) with a documented dysphagia screening performed before oral intake
18	93.8	% rate of patients with a documented dysphagia screening performed before oral intake

NIH Stroke Scale (NIHSS) Documentation

19a		total number of ischemic stroke patients cared for at your facility (admitted and in-hospital strokes, not transferred out for stroke care)
19b		total number of ischemic stroke patients transferred out from your facility for stroke care
19		total number of ischemic stroke patients
20		number of (19) with timely documentation of NIHSS score – see footnote (6) below
21		% rate of patients with with timely documentation of NIHSS score

notes (enter in yellow box below)

save << >> refresh

Data facility and month...

network
01 New England

facility (see indicator key below)

- 402 Togus, ME
- 405 White River Junction, VT
- 518 Bedford
- 523A4 Boston HCS
- 523A5 Brockton VAMC
- 608 Manchester
- 631 Northampton
- 650 Providence, RI
- 689 Connecticut HCS

●=complete ●=pending ●=no data

month (see month color key below)

2012	01	02	03	04	05	06	07	08	09	10	11	12
2011	01	02	03	04	05	06	07	08	09	10	11	12
2010	01	02	03	04	05	06	07	08	09	10	11	12
2009	01	02	03	04	05	06	07	08	09	10	11	12
2008	01	02	03	04	05	06	07	08	09	10	11	12
2007	01	02	03	04	05	06	07	08	09	10	11	12
2006	01	02	03	04	05	06	07	08	09	10	11	12
2005	01	02	03	04	05	06	07	08	09	10	11	12
2004	01	02	03	04	05	06	07	08	09	10	11	12
2003										10	11	12

00=complete 00=pending 00=no data

no data for station 402 Togus, ME

go back

Department of Veterans Affairs

Enter your data in Line 19a and 19b (blue arrows below) and Line 19 (green arrow below) will calculate and populate automatically.

IPEC Data Management - Production System

home > data > acute stroke measures

VHACINDAVIDR · log out · get help

Enter data and click [save]

17	15	number of (16) with a documented dysphagia screening performed before oral intake
18	93.8	% rate of patients with a documented dysphagia screening performed before oral intake

NIH Stroke Scale (NIHSS) Documentation

19a	50	total number of ischemic stroke patients cared for at your facility (admitted and in-hospital strokes, not transferred out for stroke care)
19b	2	total number of ischemic stroke patients transferred out from your facility for stroke care
19	52	total number of ischemic stroke patients
20		number of (19) with timely documentation of NIHSS score – see footnote (6) below
21		% rate of patients with with timely documentation of NIHSS score

notes (enter in yellow box below)

save << >> refresh

Data facility and month...

network
01 New England

facility (see indicator key below)

- 402 Togus, ME
- 405 White River Junction, VT
- 518 Bedford
- 523A4 Boston HCS
- 523A5 Brockton VAMC
- 608 Manchester
- 631 Northampton
- 650 Providence, RI
- 689 Connecticut HCS

●=complete ●=pending ●=no data

month (see month color key below)

2012	01	02	03	04	05	06	07	08	09	10	11	12
2011	01	02	03	04	05	06	07	08	09	10	11	12
2010	01	02	03	04	05	06	07	08	09	10	11	12
2009	01	02	03	04	05	06	07	08	09	10	11	12
2008	01	02	03	04	05	06	07	08	09	10	11	12
2007	01	02	03	04	05	06	07	08	09	10	11	12
2006	01	02	03	04	05	06	07	08	09	10	11	12
2005	01	02	03	04	05	06	07	08	09	10	11	12
2004	01	02	03	04	05	06	07	08	09	10	11	12
2003										10	11	12

00=complete 00=pending 00=no data

no data for station 402 Togus, ME

go back

Department of Veterans Affairs

(1) Patients with acute ischemic stroke with hospital arrival time within 2 hours (arrived ≤ 120 min) after symptom onset, and patients who had a stroke while admitted for any reason whose stroke symptoms were recognized within 2 hours (recognized ≤ 120 min) after symptom onset.

(2) Patients in "2 hour" group for whom IV thrombolytic therapy was initiated at this hospital within 3 hours (initiated ≤ 180 min) of symptom onset.

(3) Patients with acute ischemic stroke with hospital arrival time within 3 1/2 hours but later then 2 hours (121 min ≤ arrived ≤ 210 min) after symptom onset, and patients who had a stroke while admitted for any reason whose stroke symptoms were recognized within 3 1/2 hours but later then 2 hours (121 min ≤ recognized ≤ 210 min) after symptom onset.

(4) Patients in "3 1/2 hour" group for whom IV thrombolytic therapy was initiated at this hospital within 4 1/2 hours (initiated ≤ 270 min) of symptom onset.

For Line 20 (red arrow below), your response will be based upon your data in Line 19 while using the criteria set forth in footnote #6. Line 21 (blue oval) will calculate and populate automatically.

IPEC Data Management - Production System

home data views reports utilities

home > data > acute stroke measures VHACINDAVIDR · log out · get help

Enter data and click [save]

11	13	total number of (09) eligible to receive tPA
12	10	number of (11) who received timely IV thrombolytic therapy — see footnote (4) below
13	76.9	% rate of timely IV thrombolytic therapy for "3 1/2 hour" patient group
14	15	number of (09) for whom a tPA checklist was documented (optional)
15	60.0	% rate of checklist documentation for "3 1/2 hour" patient group

Dysphagia Screening Before Oral Intake — see footnote (5) below

16	16	patients with ischemic stroke with any oral intake during hospital stay
17	15	number of (16) with a documented dysphagia screening performed before oral intake
18	93.8	% rate of patients with a documented dysphagia screening performed before oral intake

NIH Stroke Scale (NIHSS) Documentation

19a	50	total number of ischemic stroke patients cared for at your facility (admitted and in-hospital strokes, not transferred out for stroke care)
19b	2	total number of ischemic stroke patients transferred out from your facility for stroke care
19	52	total number of ischemic stroke patients
20	42	number of (19) with timely documentation of NIHSS score — see footnote (6) below
21	80.8	% rate of patients with with timely documentation of NIHSS score

notes (enter in yellow box below)

Notes go here.

(1) Patients with acute ischemic stroke with hospital arrival time within 2 hours (*arrived* ≤ 120 min) after symptom onset, and patients who had a stroke while admitted for any reason whose stroke symptoms were recognized within 2 hours (*recognized* ≤ 120 min) after symptom onset.

save << >> refresh

Data facility and month...

network

01 New England

facility (see indicator key below)

- 402 Togus, ME
- 405 White River Junction, VT
- 518 Bedford
- 523A4 Boston HCS
- 523A5 Brockton VAMC
- 608 Manchester
- 631 Northampton
- 650 Providence, RI
- 689 Connecticut HCS

●=complete ●=pending ○=no data

month (see month color key below)

2012	01	02	03	04	05	06	07	08	09	10	11	12
2011	01	02	03	04	05	06	07	08	09	10	11	12
2010	01	02	03	04	05	06	07	08	09	10	11	12
2009	01	02	03	04	05	06	07	08	09	10	11	12
2008	01	02	03	04	05	06	07	08	09	10	11	12
2007	01	02	03	04	05	06	07	08	09	10	11	12
2006	01	02	03	04	05	06	07	08	09	10	11	12
2005	01	02	03	04	05	06	07	08	09	10	11	12
2004	01	02	03	04	05	06	07	08	09	10	11	12
2003										10	11	12

●●=complete ○○=pending ○○=no data

no data for station 402 Togus, ME

go back

Department of Veterans Affairs

To enter a note, place your cursor in the yellow box (green arrow above) and begin typing.

To save your data, click the save button (yellow arrow above).

IPEC Data Management - Production System

home > data > acute stroke measures

Enter data and click [save]

05	5	number of (04) who received timely IV thrombolytic therapy — see footnote (2) below
06	50.0	% rate of timely IV thrombolytic therapy for "2 hour" patient group
07	3	number of (02) for whom a tPA checklist was documented (optional)
08	15.0	% rate of checklist documentation for "2 hour" patient group
Patients With Acute Ischemic Stroke in "3 1/2 hour" Group — see footnote (3) below		
09	25	patients with acute ischemic stroke in "3 1/2 hour" group
10a	10	number of (09) not given tPA due primarily to excess bleeding risk per NINDS criteria/tPA checklist
10b		number of (09) not given tPA due primarily to CT signs of infarct > 1/3 of MCA territory
10c		number of (09) not given tPA due primarily to symptoms rapidly improving
10d		number of (09) not given tPA due primarily to minor stroke (NIHSS score < 3)
10e		number of (09) not given tPA due primarily to patient/family refusal
10f		number of (09) not given tPA due to some other reason
10g		total number of (09) not given tPA due to an excluding factor
10h		total number of (09) eligible to receive tPA
11	2	total number of (09) eligible to receive tPA
12	10	number of (11) who received timely IV thrombolytic therapy — see footnote (4) below
13	over	% rate of timely IV thrombolytic therapy for "3 1/2 hour" patient group
14		number of (09) for whom a tPA checklist was documented (optional)
15		% rate of checklist documentation for "3 1/2 hour" patient group
Dysphagia Screening Before Oral Intake — see footnote (5) below		
16		patients with ischemic stroke with any oral intake during hospital stay
17		number of (16) with a documented dysphagia screening performed before oral intake

save << >> refresh

go back

Department of Veterans Affairs

network: 01 New England

facility (see indicator key below): 402 Togus, ME, 405 White River Junction, VT, 518 Bedford, 523A4 Boston HCS, 523A5 Brockton VAMC, 608 Manchester, 631 Northampton, 650 Providence, RI, 689 Connecticut HCS

month (see month color key below): 2012 01 02 03 04 05 06 07 08 09 10 11 12

To refresh your screen to the last save, click refresh (red arrow above) and the dialogue box (yellow oval) will appear. Click OK (blue arrow above) to refresh your screen to the last save, or click Cancel (green arrow above) to keep what is on your screen currently.

Use the scroll bars (blue oval below) to see your monthly data. You can also see your monthly data by clicking on the year and month in the calendar (green oval).

IPEC Data Management - Production System

home > data > acute stroke measures

Enter data and click [save]

01.402 Togus, ME February 2012 (fiscal QTR2 2012)

01		total number of patients given tPA
Patients With Acute Ischemic Stroke in "2 hour" Group — see footnote (1) below		
02		patients with acute ischemic stroke in "2 hour" group
03a		number of (02) not given tPA due primarily to excess bleeding risk per NINDS criteria/tPA checklist
03b		number of (02) not given tPA due primarily to CT signs of infarct > 1/3 of MCA territory
03c		number of (02) not given tPA due primarily to symptoms rapidly improving
03d		number of (02) not given tPA due primarily to minor stroke (NIHSS score < 3)
03e		number of (02) not given tPA due primarily to patient/family refusal
03f		number of (02) not given tPA due to some other reason
03g		total number of (02) not given tPA due to an excluding factor
04		total number of (02) eligible to receive tPA
05		number of (04) who received timely IV thrombolytic therapy — see footnote (2) below
06		% rate of timely IV thrombolytic therapy for "2 hour" patient group
07		number of (02) for whom a tPA checklist was documented (optional)
08		% rate of checklist documentation for "2 hour" patient group
Patients With Acute Ischemic Stroke in "3 1/2 hour" Group — see footnote (3) below		
09		patients with acute ischemic stroke in "3 1/2 hour" group
10a		number of (09) not given tPA due primarily to excess bleeding risk per NINDS criteria/tPA checklist
10b		number of (09) not given tPA due primarily to CT signs of infarct > 1/3 of MCA territory

save << >> refresh

go back

Department of Veterans Affairs

network: 01 New England

facility (see indicator key below): 402 Togus, ME, 405 White River Junction, VT, 518 Bedford, 523A4 Boston HCS, 523A5 Brockton VAMC, 608 Manchester, 631 Northampton, 650 Providence, RI, 689 Connecticut HCS

month (see month color key below): 2012 01 02 03 04 05 06 07 08 09 10 11 12

To run a report of your data, click reports (red arrow) from any screen. Select Acute Stroke Rates (blue arrow).

IPEC Data Management · Production System

home data views **reports** utilities

home > reports VHACINDAVIDR · log out · get help

Select a report

report
VAP Compliance rates
RRS/RRT Rates
MRSA Rates in Acute Care Facilities
MRSA Rates in Acute Care Units
Composite Swabbing Rates in Acute Care Units
CDI Rates in Acute Care Facilities
CDI Rates in SCI Units
MRSA Rates in CLC Facilities
MRSA Rates in CLC Units
MedRecon Rates
VTE Prophylaxis Rates
CAP Compliance Rates
CAUTI Symptomatic Infection Rates
CAUTI Symptomatic Infection Rates (Aggregated)
CAUTI Compliance Rates
Dialysis Access & Infectious Event Rates
Dialysis Access & Infectious Event Rates (Aggregated)
Falls Rates
Falls Rates (Aggregated)
Acute Stroke Rates
Data Completion

go back

Department of Veterans Affairs

IPEC Data Management · Production System

home data views **reports** utilities

home > reports > Acute Stroke Rates VHACINDAVIDR · log out · get help

Check report criteria in the right-hand pane and click [run...]

Report criteria...

time interval
quarterly

fiscal year
2012 (10-11 through 09-12)

network
01 New England

facility
402 Togus, ME

facility ICU level
all facility ICU levels

facility complexity level
all facility complexity levels

include...

data values

notes

optional data elements

facilities with no data

run...

run... save...

go back

Department of Veterans Affairs

Make your selections using the drop down and check boxes (red bracket). Click either run button (green arrows), and the following pdf report will appear.

IPEC Data Management 2

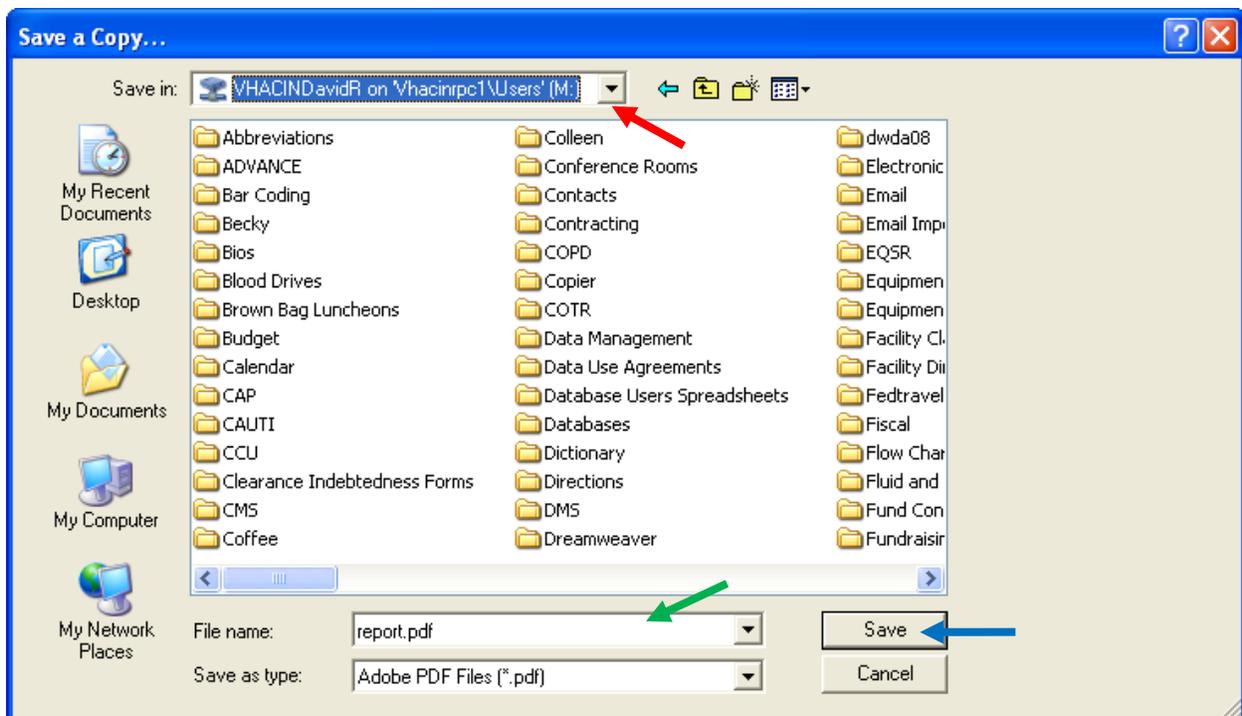
Acute Stroke Rates - Quarterly

26 June 2012, page 1 of 2

limits: fiscal year = 2012; facility = 01.402 Togus, ME; including data values

QTR1	QTR2	QTR3	QTR4	FY12	01.402 Togus, ME [i3,c2]
		45		45	(01) total number of patients given tPA
Patients With Acute Ischemic Stroke in "2 hour" Group					
		20		20	(02) patients with acute ischemic stroke in "2 hour" group
		5		5	(03a) number of (02) not given tPA due primarily to excess bleeding risk per NINDS cr...
		1		1	(03b) number of (02) not given tPA due primarily to CT signs of infarct > 1/3 of MCA te...
		1		1	(03c) number of (02) not given tPA due primarily to symptoms rapidly improving
		1		1	(03d) number of (02) not given tPA due primarily to minor stroke (NIHSS score < 3)
		1		1	(03e) number of (02) not given tPA due primarily to patient/family refusal
		1		1	(03f) number of (02) not given tPA due to some other reason
		10		10	(03) total number of (02) not given tPA due to an excluding factor
		10		10	(04) total number of (02) eligible to receive tPA
		5		5	(05) number of (04) who received timely IV thrombolytic therapy
		50.0		50.0	(06) % rate of timely IV thrombolytic therapy for "2 hour" patient group
Patients With Acute Ischemic Stroke in "3 1/2 hour" Group					
		25		25	(09) patients with acute ischemic stroke in "3 1/2 hour" group
		10		10	(10a) number of (09) not given tPA due primarily to excess bleeding risk per NINDS cr...
		1		1	(10b) number of (09) not given tPA due primarily to CT signs of infarct > 1/3 of MCA te...
		1		1	(10c) number of (09) not given tPA due primarily to symptoms rapidly improving
		1		1	(10d) number of (09) not given tPA due primarily to minor stroke (NIHSS score < 3)
		0		0	(10e) number of (09) not given tPA due primarily to patient/family refusal
		0		0	(10f) number of (09) not given tPA due to some other reason
		13		13	(10) total number of (09) not given tPA due to an excluding factor
		12		12	(11) total number of (09) eligible to receive tPA
		0		0	(12) number of (11) who received timely IV thrombolytic therapy
		0.0		0.0	(13) % rate of timely IV thrombolytic therapy for "3 1/2 hour" patient group
Dysphagia Screening Before Oral Intake					

To print your document, click the printer button (blue arrow). To save a copy of your report, click the save button (red arrow) and the following dialogue box will appear.



Select a file location (red arrow), name your file (green arrow), and click save (blue arrow).



To save a report to the Data Management site, make your selections using the drop down menu boxes (blue bracket), check your criteria (red bracket), and click save (green arrow). The following screen will appear.

IPEC Data Management · Production System

home data views reports utilities

home > reports > Acute Stroke Rates > saved report

VHACINDAVIDR · log out · get help

Confirm title of saved report and click [save]

title: Acute Stroke Rates

type: Acute Stroke Rates

criteria:

- time interval = quarterly
- fiscal year = 2012 (10-11 through 09-12)
- network = 01 New England
- facility = 402 Togus, ME
- facility ICU level = all facility ICU levels
- facility complexity level = all facility complexity levels
- data values = include
- notes = exclude
- optional data elements = exclude
- facilities with no data = exclude

save go back

Department of Veterans Affairs

Name your report if desired (red arrow), and click save (blue arrow).

A confirmation screen will appear like the one below.

IPEC Data Management · Production System

home data views reports utilities

home > reports > Acute Stroke Rates

VHACINDAVIDR · log out · get help

report has been saved.

Report criteria...

- time interval: quarterly
- fiscal year: 2012 (10-11 through 09-12)
- network: 01 New England
- facility: 402 Togus, ME
- facility ICU level: all facility ICU levels
- facility complexity level: all facility complexity levels
- include...
 - data values
 - notes
 - optional data elements
 - facilities with no data

run... save... go back

Department of Veterans Affairs

To view your saved report, click reports (blue arrow) from any screen, and the following screen will appear.

IPEC Data Management · Production System

home data views reports utilities

home > reports

VHACINDAVIDR · log out · get help

Select a report

report
Your saved reports (2) ←
CLAB Infection Rates
CLAB Infection Rates (Aggregated)
CLAB Compliance Rates
VAP Infection Rates
VAP Infection Rates (Aggregated)
VAP Compliance Rates
RRS/RRT Rates
MRSA Rates in Acute Care Facilities
MRSA Rates in Acute Care Units
Composite Swabbing Rates in Acute Care Units
CDI Rates in Acute Care Facilities
CDI Rates in SCI Units
MRSA Rates in CLC Facilities
MRSA Rates in CLC Units
MedRecon Rates
VTE Prophylaxis Rates
CAP Compliance Rates
CAUTI Symptomatic Infection Rates
CAUTI Symptomatic Infection Rates (Aggregated)
CAUTI Compliance Rates

go back



Click your saved reports (green arrow), and the following screen will appear.

IPEC Data Management · Production System

home data views reports utilities

home > reports > saved reports

VHACINDAVIDR · log out · get help

Select a saved report

saved report	last ran
Acute Stroke Rates	
Becky	

go back



Click on your selection and you are returned to the following screen.

IPEC Data Management · Production System

home data views reports utilities

home > reports > saved reports > Acute Stroke Rates

VHACINDAVIDR · log out · get help

Check report criteria in the right-hand pane and click [run...]

Report criteria...

time interval
quarterly

fiscal year
2012 (10-11 through 09-12)

network
01 New England

facility
402 Togus, ME

facility ICU level
all facility ICU levels

facility complexity level
all facility complexity levels

include...

data values

notes

optional data elements

facilities with no data

run...

run... save... delete...

go back

Department of Veterans Affairs

Click run (red arrow) to open a pdf report. To delete the report, click delete (blue arrow).

If your report does not show, please follow the directions on the screen.

IPEC Data Management · Production System

home

home > reports > Acute Stroke Rates

Report is finished (if report does not appear in pop-up window see note below)

To run another report, modify report criteria in the right-hand pane and click [run...].

If your report does not appear in a pop-up window, try opening your [report here](#).

If a yellow bar appears above the data management title...

 Pop-up blocked. To see this pop-up or additional options click [here](#)...

...then find out what to do [when your report is blocked by IE's pop-up blocker](#).

http://vhacinsql1.v10.med.va.gov/ipec/report.cfm?delete=no&path=d:\download\ipec\vhacindavidr_2 - Windows Internet Expl...

IPEC Data Management 2

Acute Stroke Rates - Monthly 10 July 2012, page 1 of 4

lims: facility = 01402 Togus, ME; including data values

10-11	11-11	12-11	01-12	02-12	03-12	04-12	05-12	06-12	07-12	08-12	09-12	FY12	01.402 Togus, ME [3,c2]
								45					45
Patients With Acute Ischemic Stroke in "2 hour" Group													
								20					20
								5					5
								1					1
								1					1
								1					1
								1					1
								1					1
								10					10
								10					10
								5					5
								50.0					50.0
Patients With Acute Ischemic Stroke in "3 1/2 hour" Group													
								25					25
								10					10
								1					1
								1					1
								1					1
								0					0
								0					0
								13					13
								12					12
								0					0
								0.0					0.0
Dysphagia Screening Before Oral Intake													
								16					16
								15					15
								93.8					93.8





1 / 4




To print your report, click the printer icon (blue arrow). To save a copy, click the save (green arrow) button and the following screen will appear.

Save a Copy...

Save in: 2011-12 (Dec) 


 2012-06-11


 Picasa Export

File name: 

Save as type: Adobe PDF Files (*.pdf)



Specify a file location (red arrow), name your file if desired (blue arrow), and click save (green arrow). To export your data to an Excel file, click utilities (red arrow) from any screen. Click export data (blue arrow).

IPEC Data Management · Production System

home data views reports **utilities**

home > utilities VHACINDAVIDR · log out · get help

Select a utility

utility	description
import	import data
export	export data 
password	change your account password
accounts	manage accounts
networks	view network definitions
facilities	manage facility and unit definitions
units	view and manage all unit definitions
unit types	manage unit type definitions (and association with data modules)
audit trail	view audit trail
online	see who's online (maybe)
offline	set offline time
\$modules	view data modules
\$elements	view data module elements
reports	view report definitions
modules	define version 3 data modules
scripts	generate SQL scripts for views and data modules
history	view version/change history
punch list	view punch list of items to be handled

[go back](#) 

IPEC Data Management · Production System

home data views reports utilities

home > utilities > export > acute stroke measures VHACINDAVIDR · log out · get help

Check export criteria in the right-hand pane and click [export...]

Export criteria...

network
01 New England

facility
402 Togus, ME

facility ICU level
all facility ICU levels

fiscal year
all fiscal years

format
"standard" format

[go back](#) 

Make your selections using the drop down boxes (blue bracket) and click either export button (green arrows).

IPEC Data Management - Production System

home data views reports utilities

home > utilities > export > acute stroke measures

VHACINDAVIDR · log out · get help

Export file is ready for download

To download another export, modify export criteria in the right-hand pane and click [export...].

Export criteria...

network
New England

facility
402 Togus, ME

facility ICU level
facility ICU levels

fiscal year
fiscal years

format
standard" format

export...

File Download

Do you want to open or save this file?

Name: ipec_as_20120710.xls
Type: Microsoft Office Excel 97-2003 Worksheet
From: vhcinsql1.v10.med.va.gov

Open Save Cancel

While files from the Internet can be useful, some files can potentially harm your computer. If you do not trust the source, do not open or save this file. [What's the risk?](#)

export...

go back

Department of Veterans Affairs

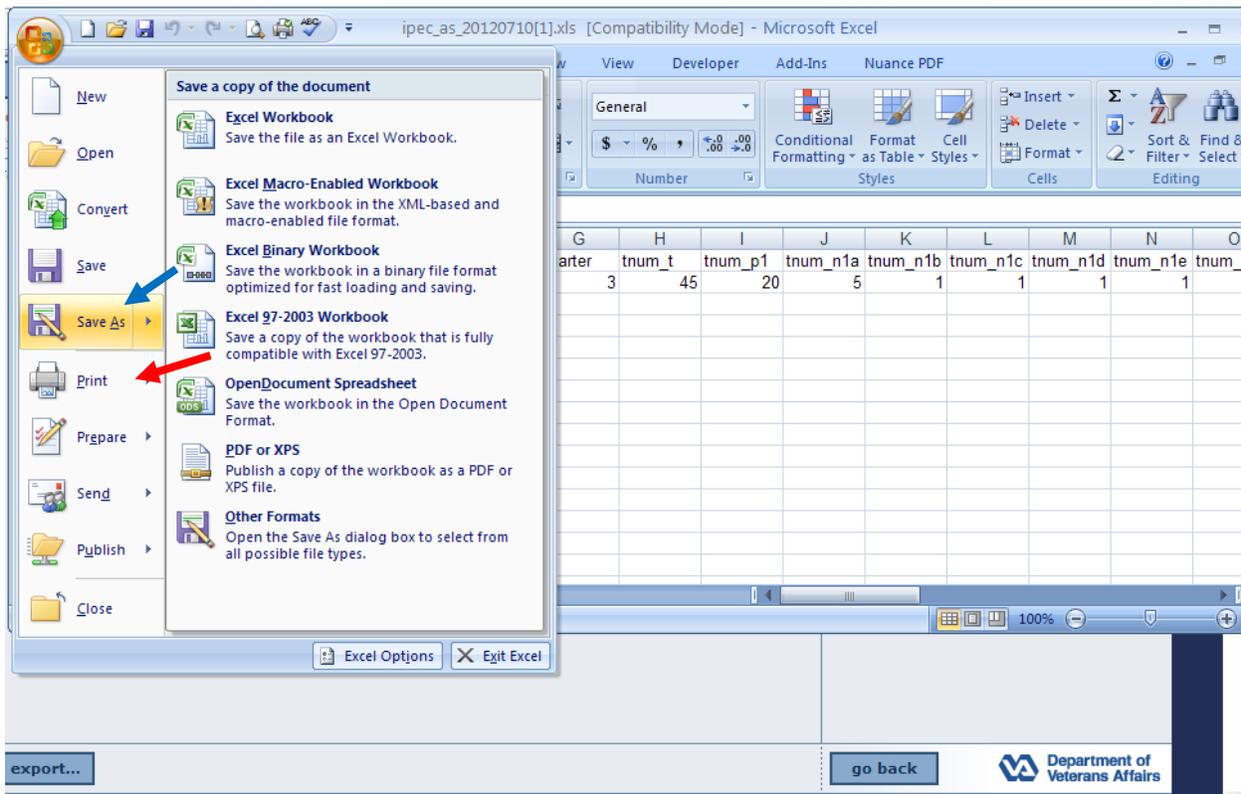
To view your file, click open (red arrow). A file like the one below will appear.

ipec_as_20120710[1].xls [Compatibility Mode] - Microsoft Excel

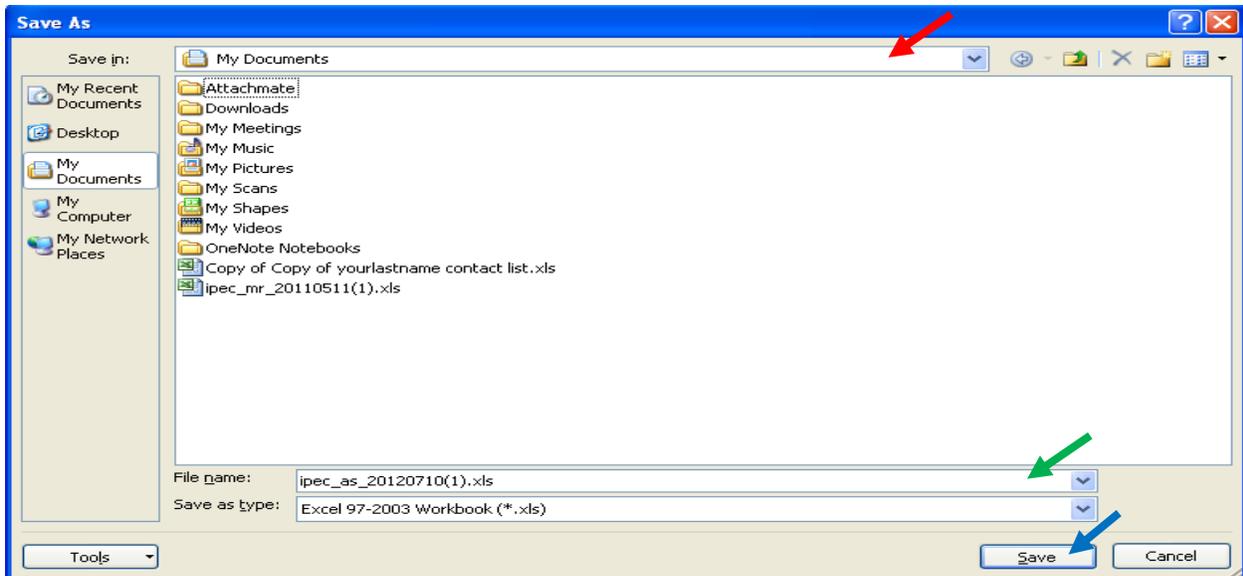
	A	B	C	D	E	F	G	H	I	J	K	L	M	N	O
1	network	station	facility	level	month	year	quarter	tnum_t	tnum_p1	tnum_n1a	tnum_n1b	tnum_n1c	tnum_n1d	tnum_n1e	tnum_n1f
2	1	402	Togus, ME	3	6/1/2012	2012	3	45	20	5	1	1	1	1	1
3															
4															
5															
6															
7															
8															
9															
10															
11															
12															
13															
14															
15															

data description

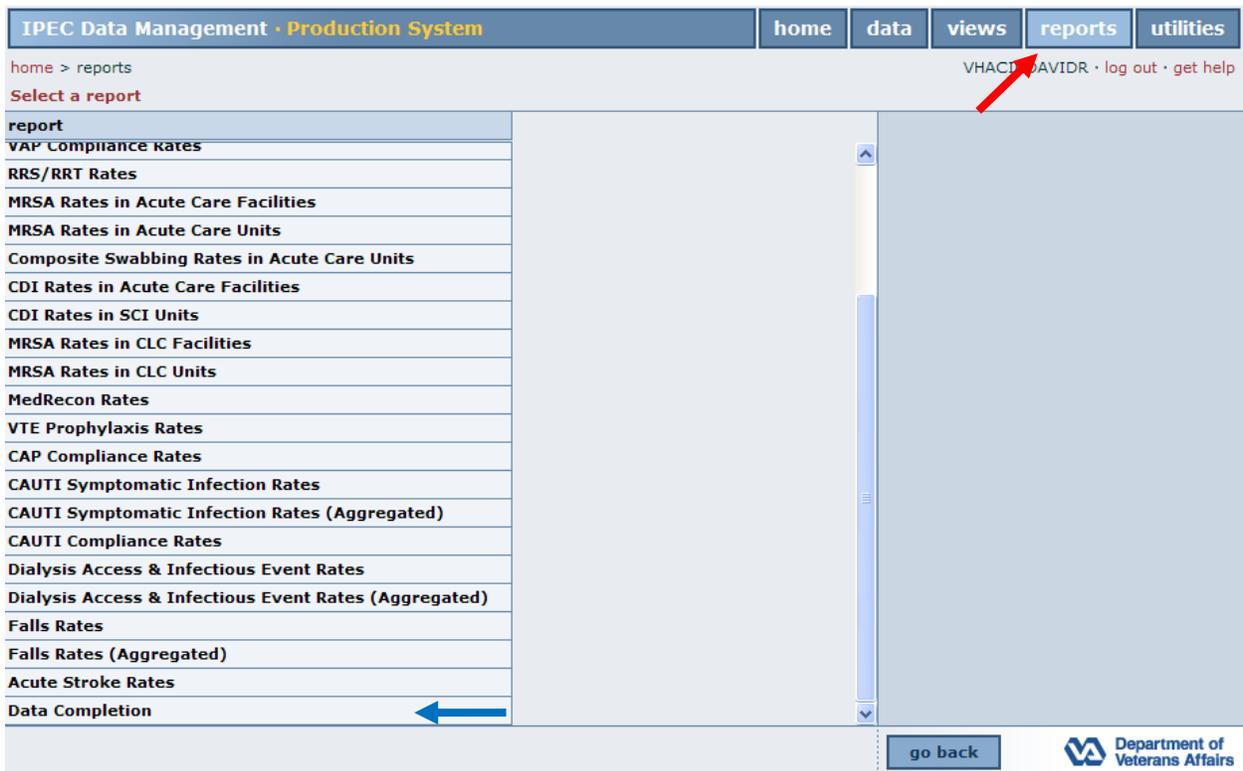
Ready



To print a copy of your file, click print (red arrow). To save a copy of your file, click, save as (blue arrow) and the following screen will appear.



Specify a file location (red arrow). Name your file if desired (green arrow), and click save (blue arrow). To run a data completion report, click reports (red arrow) from any screen. Click data completion (blue arrow).



IPEC Data Management · Production System

home data views reports utilities

home > reports > Data Completion VHCINDAVIDR · log out · get help

Check report criteria in the right-hand pane and click [run...]

Report criteria...

fiscal year (required)
2012 (10-11 through 09-12)

data module (required)
Acute Stroke Measures

network
01 New England

facility
402 Togus, ME

facility ICU level
all facility ICU levels

facility complexity level
all facility complexity levels

include...

notes

facilities with no data for fiscal year

facilities with complete data for fiscal year

symbols to denote completion

run...

run... save...

go back Department of Veterans Affairs

Make your selections using the drop down and check boxes (blue bracket) and click either run button (green arrows).

IPEC Data Management · Production System

home data views reports utilities

home > reports > Data Completion VHCINDAVIDR · log out · get help

Report is finished (if report does not appear in pop-up window see note below)

To run another report, modify report criteria in the right-hand pane and click [run...].

If your report does not appear in a pop-up window, try opening your [report here](#).

If a yellow bar appears above the data management title...

Pop-up blocked. To see this pop-up or additional options click [here](#)...

...then find out what to do [when your report is blocked by IE's pop-up blocker](#).

Report criteria...

fiscal year (required)
2012 (10-11 through 09-12)

data module (required)
Acute Stroke Measures

network
01 New England

facility
402 Togus, ME

facility ICU level
all facility ICU levels

facility complexity level
all facility complexity levels

include...

notes

facilities with no data for fiscal year

facilities with complete data for fiscal year

symbols to denote completion

run...

run... save...

go back Department of Veterans Affairs

If your report does not appear, follow the directions that appear on your screen.

http://vhacinsql1.v10.med.va.gov/ipec/report.cfm?delete=no&path=d:\download\ipec\vhacindavidr_2 - Windows Internet Expl...

IPEC Data Management 2

Data Completion - Acute Stroke Measures - FY 2012 10 July 2012, page 1 of 1

limit: facility = 01.402 Togus, ME, including symbols to denote completion

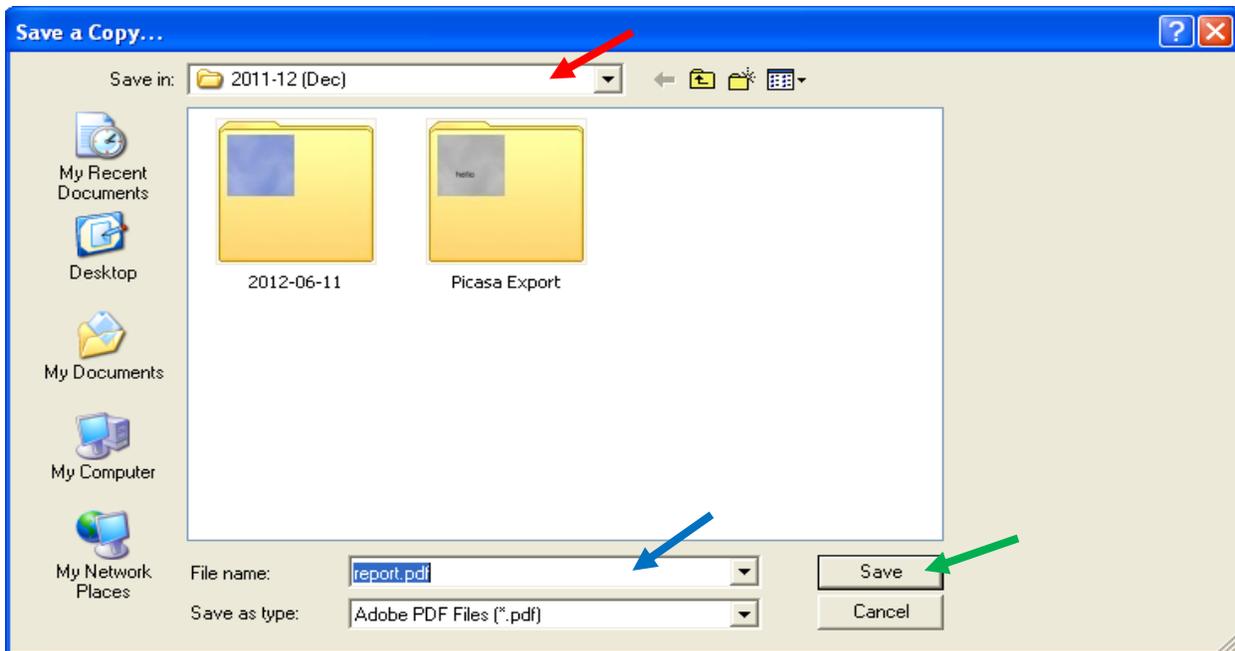
10-11	11-11	12-11	01-12	02-12	03-12	04-12	05-12	06-12	07-12	08-12	09-12	FY12	Notes	Facility
														01.402 Togus, ME [3.c2]

Completion: complete incomplete no data unit offline

run... save... go back

With this report, you are able to see if data has been entered for any given month.

To print your report, click the printer icon (blue arrow). To save a copy, click the save (green arrow) button and the following screen will appear.



Specify a file location (red arrow), name your file if desired (blue arrow), and click save (green arrow). To export your data to an Excel file, click utilities (red arrow) from any screen. Click export data (blue arrow).

IPEC Data Management - Production System

home data views reports **utilities**

home > data VHACINDAVIDR · log out · [get help](#)

Select a data module

data module	edit or view...
CLAB Infections	central line associated bloodstream infections
CLAB Compliance	central line associated bloodstream infection compliance
VAP Infections	ventilator associated pneumonia
VAP Compliance	ventilator associated pneumonia compliance
RRS/RRT Measures	rapid response system/team measures
MRSA in Acute Care Facilities	MRSA measures in acute care facilities
MRSA in Acute Care Units	MRSA measures in acute care units
CDI in Acute Care Facilities	C. difficile infections in acute care facilities
CDI in SCI Units	C. difficile infections in spinal cord injury units
MRSA in CLC Facilities	MRSA measures in community living center facilities
MRSA in CLC Units	MRSA measures in community living center units
MedRecon Measures	medication reconciliation measures
VTE Prophylaxis Measures	VTE prophylaxis measures
CAP Compliance	community acquired pneumonia compliance
CAUTI Symptomatic Infections	catheter associated urinary tract infections (symptomatic)
CAUTI Compliance	catheter associated urinary tract infection compliance
Dialysis Access & Infectious Events	dialysis associated vascular access and infectious events
Falls	falls with or without major injury
Acute Stroke Measures	acute ischemic stroke patient measures

go back

For additional help with any page, click get help (red arrow).

IPEC Data Management · Production System

home data views reports **utilities**

home > utilities VHACINDAVIDR · log out · get help

Select a utility

utility	description
import	import data
export	export data
password	change your account password 
accounts	manage accounts
networks	view network definitions
facilities	manage facility and unit definitions
units	view and manage all unit definitions
unit types	manage unit type definitions (and association with data modules)
audit trail	view audit trail
online	see who's online (maybe)
offline	set offline time
\$modules	view data modules
\$elements	view data module elements
reports	view report definitions
modules	define version 3 data modules
scripts	generate SQL scripts for views and data modules
history	view version/change history
punch list	view punch list of items to be handled

[go back](#) 

To change your password, click utilities (red arrow) from any page and select password (green arrow).

IPEC Data Management · Production System

home data views reports **utilities**

home > utilities > password VHACINDAVIDR · log out · get help

Enter a new password (twice) and click [save]

password: } enter new password

confirm: } enter new password again

score: 0 new password strength score *

show: show password you are entering

* A valid password is made up of letters, numbers, and special characters, and has a strength score of 40-100. You must typically make your password 5 or more characters long and include at least one digit or special character.

[save](#) [go back](#) 

Enter and confirm (blue bracket) your password. Click save (red arrow).