SURVEILLANCE EVENT INVENTORY AND LINKAGE FORM
INSTRUCTIONS
SXI, Version D, 11/05/08
QxQ 11/05/08

1. General Instructions

The Surveillance Event Inventory and Linkage Form (SXI) is the last form completed at the Field Center for an identified event. SXI must be completed for all Surveillance events (excluding Cohort events determined to be ineligible during completion of CEL), regardless of the sources of information used.

One SXI Form for each event ID number is completed and entered into the data-base. The form should be completed and entered only after all other forms for that event ID have been completed and entered, as one purpose of the SXI is to signal the Coordinating Center that the Field Center considers the event "closed", or that all information expected has been collected.

Another purpose of the SXI Form is for Field Center reporting and verification of "linkages" between multiple events, as defined by separate ID numbers, that may have occurred in a single individual. At the time the SXI Form is first added to the database, it may include under Items 6-23 the ID numbers of any other events that are already known by Field Center Surveillance staff to have occurred in this same individual. These ID numbers of events "linked" to the ID number of the SXI Form being entered may have come to the attention of Field Center staff by Informant Interviews or hospital records containing multiple admissions. It is not expected, however, that Field Center staff will carry out a comprehensive linkage investigation on its own prior to entry of SXI.

Subsequent to initial entry of the SXI for an event ID, the Coordinating Center will use identifiers such as name and Social Security Number to match this event to others in the database, and will send a list of possible new linkages for this ID to the Field Center for verification. A "change" record for an SXI Form will then be entered by the Field Center to report any of the proposed linkages that it verifies as genuine. (See below)

A. Inventory

2. Detailed Instructions for Various Questions

1. a.-i. and l.-n. Inventory of Forms: For each of the nine possible forms, specify whether that form was or was not completed and keyed into the database by circling the appropriate response.

j.-k. Materials sent indicate if stroke or autopsy materials were sent to appropriate center.

0. Materials sent indicate if HF supplemental materials were sent to the CSCC
p. Materials sent indicate if Hospital discharge summary was sent to the CSCC. This does not apply to strokes, as the stroke abstractor takes care of this with the stroke packets.

2. a. Hospitalizations: Indicate whether the event does or does not involve a hospitalization.

b. ECG's Sent to Minneapolis: Indicate if any of the three possible 12-lead ECG's have been photocopied and sent to Minneapolis.

B. Event Determination

3. a. EVENT TYPE. Out-of-Hospital Deaths include those deaths in which the victim makes it to a hospital but is DOA, dies in the ER, or dies in the hospital without ever showing any vital signs (see HRA and its QxQs). In-Hospital Deaths are all other deaths occurring after admission to a hospital. Non-Fatal Hospitalizations are hospitalizations not ending in death.

b. Date of Discharge. For non-fatal hospitalizations record the date of discharge. For out of hospital deaths and fatal hospitalizations record the date of death.

4. EVENT DATE. For all Deaths, the event date is taken as the date of death as it appears on the death certificate. If non-fatal event, put admit date here. It is important that the date be determined correctly, because it is used to decide whether other events linked to this ID are to be treated as additional parts of one compound event, or as separate events (see below).

C. Linkage

6. Other ID(s) belonging to this person. If an ID for an earlier event is confirmed then record "yes".

7-12. Linkage Fields. What this statement means is that if there are occurrences for this person in the past, list the ones that are within 12 months. If none of the previous occurrences are within 12 months, then list the most recent among those in item 7. For example, if there are 2 previous events, one 18 months ago and one 24 months ago the one that occurred 18 months ago should be listed in item 7. This would be the only item listed.

24. Date of Completion or Update of Paper Form. Record the date when SXI is initially completed if this is a new form, or the update date if you are modifying an existing SXI in order to report new linkages, new forms, etc.

25. Code Number of Person Completing Form. The Field Center staff member who has completed or updated the SXI form must enter his/her valid ARIC code number in the boxes provided.