Ventricular Shunt (VSHN)

Definitions of Data Fields on Supplemental Data Collection Form

Date of operation: Date the operation was performed. This date must match the date of operation entered into the basic surgical patient denominator data entry screen.

Enter date in *MM/DD/YY* format, i.e., *MM* is the number of the month, *DD* is the day, and *YY* is the year. For example, April 15, 1997 is entered as 04/15/97.

Patient ID #: Patient identifier assigned by the hospital and may consist of any combination of no more than 12 letters and/or numbers. This number must match the patient ID # entered into the basic surgical patient denominator data entry screen.

Discharge date: Date the patient was discharged from the hospital.

Enter date in *MM/DD/YY* format, i.e., *MM* is the number of the month, *DD* is the day, and *YY* is the year. For example, April 15, 1997 is entered as 04/15/97.

Birth weight (for <= 3 mos old only): If the patient undergoing ventricular shunt is three months old or less, record the birth weight in grams (g); otherwise, skip this field.

For reasons other than surgical prophylaxis, was patient on antibiotics at the time of this surgery? If the patient was on antibiotics at the time of this surgery for suspected or confirmed infection at any body site, circle *Y* for yes; otherwise, circle *N* for no.

Parenteral antibiotic prophylaxis given within 2 hours before skin incision: If the first dose of a parenterally administered (IV or IM) antibiotic(s) is given within two hours $\underline{\text{before}}$ the skin is incised, circle Y for yes; otherwise circle N for no.

If *Y*, enter the code of the antibiotic *Agent* and the *Dose* in milligrams (*mg*) that was administered. List one or two agents and their dosages. If the dosage exceeds the allotted space of four digits, enter 9999. The names and codes of the antibiotics are on the attached list.

Internalization of external ventricular drain: If the patient with a ventricular drain that terminates outside the body has a ventricular shunt operation to bring the system inside the body, circle *Y* for yes; otherwise, circle *N* for no.

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Type of operation: Circle *Primary* if this is the patient's first ventricular shunt operation; *Revision* if an existing shunt is being revised or removed and replaced; or *ReMoval without replacement* if an existing shunt is removed and <u>not</u> replaced.

<u>If Primary</u>: Etiology of hydrocephalus: For primary ventricular shunt operations only, circle the most specific condition from the list that describes the etiology of hydrocephalus. For example, if a patient has congenital meningomyelocele, circle meningomyelocele only.

Etiology of hydrocephalus

Meningomyelocele		Intraventricular hemorrhage	
Congenital (not otherwise defined)	Tumor	P ost M eningitis	
PostTrauma		Other	Unknown

<u>If Revision or removal without replacement</u>: Reason for revision/removal: For ventricular shunt operations performed for revision or removal of shunt without replacement only, circle *Shunt Infection* if the shunt is being revised or removed because of an existing shunt infection. Circle *Shunt Maintenance* if the shunt is being revised or removed for noninfectious complications such as patient has outgrown shunt, equipment failure, or preventive maintenance.