



DATA SUBMISSION FILE FORMAT GUIDANCE

VERSION 2.0

OCTOBER 2009



October 5, 2009

Dear Colleague,

Thank you for your participation in the Minnesota Stroke Registry!

Data collection for the Minnesota Stroke Registry is limited to core data elements as required by the Centers for Disease Control and Prevention (CDC) Paul Coverdell National Acute Stroke Registry program. We at the Minnesota Stroke Registry request that you collect a few additional data elements (that is, **protected health information, aka "PHI"**) and **store them in a separate electronic file locally**. Please do not send us this information at this time. The purpose of collecting these data are to link records with other datasets in the future.

This document includes instructions about how to enter core data and collection and storage of additional data elements. If you have any questions, please feel free to contact me at (651) 201-5413 or albert.tsai@health.state.mn.us.

Sincerely,

A handwritten signature in black ink that reads "Albert W. Tsai". The signature is written in a cursive, flowing style.

Albert W. Tsai, PhD, MPH

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I. Instructions

Hospitals participating in American Heart Association Get With The Guidelines – Stroke program:

1. Submit an amendment to your contract with Outcome for MDH to access the Patient Management Tool (Coverdell Version).
2. Enter data through the Patient Management Tool (Coverdell Version). The Minnesota Department of Health will upload all of your core “Coverdell” data into the Minnesota Stroke Registry database every two weeks.

Protected Health Information Data Collection:

3. Please create the file with the additional data elements per instructions below (section II, page 4)
. Please use your GWTG ID for the PATIENTID field.
4. Store this file locally until further notice.

Hospitals using the Minnesota Stroke Registry Tool (MSRT):

1. Enter data directly into the MSRT.

Protected Health Information Data Collection:

2. Please create the file with the additional data elements per instructions below (section II, page 4).
3. Store this file locally until further notice.

Hospitals Uploading Data from Your Own Database:

1. Please create a unique patient identifier field for your database if you have not already done so.
2. Please contact Curtis Fraser (651-201-5477, curtis.fraser@health.state.mn.us) for him to work directly with your database staff to map your database to the Minnesota Stroke Registry (minus the data elements discussed below).
3. On a monthly basis minimum, please upload your core “Coverdell” data to the Minnesota Stroke Registry. (You may do this as frequently as you wish, but we recommend to do so at least once a month.) To do this, go to the secure login data entry site (via www.mnstrokeregistry.org) and click on “Data Exchange” and follow the instructions.

Protected Health Information Data Collection:

4. Please either:
 - a. keep a separate file with the additional data elements as instructed below (section II, page 4) or
 - b. add the additional data elements below to your data collection system if they are not already there.
 - c. Store this file locally until further notice.

II. Data Elements, File Format, and Record Layout Definitions

The additional (protected health information) data elements that we ask you to collect are the following:

1. Patient ID
2. Medical Record Number
3. Account Number
4. First Name
5. Last Name
6. Middle Initial
7. Birth Month
8. Birth Day
9. Birth Year
10. Zip Code

The desired format is a comma-delimited file (CSV). This means that commas delimit the fields, rather than each field filled to its capacity. The first record in the file must contain the field name. A sample file is attached.

Layout: For each field, the following is defined:

1. Width. Maximum length of the field
2. Field Name. Name of the field
3. Definition. Description of the field
4. Data Type. Indicates whether the value should be alphanumeric (A) or numeric (N)
5. Format Required. Indicates whether the information in the field should have a specific format. The legend for the symbols used for this are as follows:
 9= Any numeric character, 0-9 only. 0 is default for all numeric fields
 X= Any character, including letters, numbers, symbols and punctuation. At least one space should be inserted for blank fields.
6. Valid Values. Defines the list of all possible acceptable choices for a field.

Width	Field Name	Field Definition	Data Type	Format Required	Valid Values
20	PatientId	Patient Id (or Get With the Guidelines ID)	A	XXX...X	Any text
10	MedRecNum	Patient medical record number	A	XXX...X	Any text
20	AcctNum	Patient's account number	A	XXX...X	Any text
30	PFName	Patient first name	A	XXX...X	Any text
30	PLName	Patient last name	A	XXX...X	Any text
1	PMI	Patient middle initial	A	X	Any text
2	PMOB	Patient month of birth	N	99	Leading zeroes
2	PDOB	Patient day of birth	N	99	Leading zeroes
4	PYOB	Patient year of birth	N	9999	Year with century
5	PZip	Patient zip code	A	XXXXX	Valid 5-digit U.S. zip code

*For example, a file may look like:

"PatientId", "MedRecNum", "AcctNum", "PFName", "PLName", "PMI", "PMOB", "PDOB", "PYOB", "PZip"
 "GWTG034", "655562", "8759665-4A", "Ted", "Bear", "E", "12", "01", "2007", "55420"
 "GWTG83743", "94584954", "HR03403", "John", "Smith", "", "05", "17", "1968", "55420"