

## NINDS CDE Project

**Working group: SAH Imaging**

**Completed by: Katharina Hackenberg**

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Please answer the following questions below.

1. **Approach for selection of elements** (How did you go about drafting the recommendations and/or reviewing the current tools/instruments, and did you have any criteria for selection and classification?)  
Definition and classification of CDEs through team of topic-specific experts.
  
2. **Differential application to types of subarachnoid hemorrhage** (*Do the instruments/elements you recommended differ between the types of subarachnoid hemorrhage?*)  
No.
  
3. **Summary recommendations** (*We could consider a summary table OR each group could summarize their recommendations*).

Instrument / Scale / CRF Name <i>Name and acronym of the instrument/measure that is recommended for inclusion in the CDEs</i>	Domain	Subdomain	Classification <i>(e.g., Core, Supplemental - Highly Recommended, Supplemental, Exploratory)</i>
Electroencephalography CRF	Assessments and Examinations	Non-Imaging Diagnostics	Supplemental
Imaging Modalities CRF	Assessments and Examinations	Imaging Diagnostics	<b>Core:</b> Imaging modality used <b>Supplemental - Highly Recommended:</b> Imaging date and time collected; Scan purpose; Modified Fisher Scale grade; Presence of subdural hematoma; Presence of arteriovenous

			malformation
Parenchymal Imaging CRF	Assessments and Examinations	Imaging Diagnostics	<p><b>Core:</b> Imaging modality used</p> <p><b>Supplemental - Highly Recommended:</b> Imaging date and time collected; Scan purpose; Sequences acquired and slice thickness; CTA source image use; IVH presence; Graeb IVH scale result; Volume of IVH; Presence of SAH; Type of subdural hematoma; Presence of hydrocephalus; Presence of arteriovenous malformation</p>
Vessel Imaging Angiography CRF	Assessments and Examinations	Imaging Diagnostics	<p><b>Core:</b> Imaging modality used; arterial findings, cause and symptomology</p> <p><b>Supplemental - Highly Recommended:</b> Imaging date and time collected; Scan purpose; Type of MRA; Type of CTA; Confidence level of venous findings; Anatomic location of aneurysm; Aneurysm location; Dome size; Neck size; Largest height/largest neck diameter; Occlusion percentage of aneurysm; Raymond-Roy Occlusion Classification</p>

4. **Comparison to other subarachnoid hemorrhage standards** (Are there any notable similarities/differences in the CDE recommendations as compared with other standards?)  
Not applicable.

- 5. Issues unique to subarachnoid hemorrhage disease** (*Were there any issues encountered when developing the CDE standards which are unique to subarachnoid hemorrhage or which highlight a unique concern about subarachnoid hemorrhage data collection?*)
- Orphan disease
  - Affection of predominantly young people
  - Multidisciplinary care (Neurosurgery, Neurology, Neuro-Intensivists, Neuroradiology)
- 6. Unmet needs; unanswered questions** (*What unmet need / unanswered questions were identified via the CDE process in subarachnoid hemorrhage? What areas are in need of further research and development?*)
- Homogenous definitions of
- aneurysm morphology
  - anatomical sites
  - measurements
  - hemodynamic parameters