**NACR DATASET - RECORD FORM**

(mandatory fields are shown in red)

**Patient Information**

**NHS No. Date of Birth:**

**Forename: Surname:**

|  |  |
| --- | --- |
| **Hospital No.** | **Date of Death:** |
| **Gender:**[ ] Female | [ ] Not Known[ ] Not specified | [ ] Male  |
| **Marital Status:**[ ] Permanent Partnership[ ] Separated | [ ] Single[ ] Divorced[ ] Unknown | [ ] Married[ ] Widowed |
| **Ethnic Group:**[ ] British[ ] White/Black Caribb [ ] Any other mixed[ ] Bangladeshi[ ] African[ ] Other Ethnic Group | [ ] Irish[ ] White/Black African[ ] Indian[ ] Other Asian[ ] Black Other[ ] Not Stated | [ ] White (other)[ ] White/Asian[ ] Pakistani[ ] Black Caribbean[ ] Chinese[ ] Not Known |
| **Address:** |  |  |
| **Postcode:** | **Telephone No:** | **GP Practice Code:** |
| **Did you measure Patient Satisfaction?** [ ] Yes [ ]  No  |

**Initiating Event**

|  |  |  |
| --- | --- | --- |
| **Initiating Event (IE)**[ ] MI (NStemi)[ ] Unstable Angina[ ] CHD[ ] Cardiomyopathy[ ] Prehab[ ] Peripheral Arterial Disease  | [ ] MI Unknown[ ] MI with Heart Failure[ ] Heart Failure[ ] Arrhythmia[ ] Congenital Heart[ ] Other[ ] Unknown | [ ] MI Stemi[ ] Angina[ ] Valve Disease[ ] Cardiac Arrest[ ] High Risk[ ] Use Treatment |
| **IE Date: Ankle Brachial Indice Ratio** (assoc. with PAD) |
| **Treatment associated with IE**[ ] CABG[ ] Tricuspid Repair/Replace[ ] Transplant[ ] Staged PCI[ ] Other | [ ] PCI[ ] Mitral Valve Repair/Replace[ ] Medical Management[ ] LV Assist Device[ ] TAVI | [ ] PPCI[ ] Aortic Valve Repair/Replace[ ] Pacemaker[ ] ICD[ ] Other Surgery |
| **Treatment Date:** | **Discharge Date:** | **Invited to Join Date:** |
| **Source of Referral:** [ ] BMI Hospital [ ] Private Hospital [ ] GP [ ] NHS Trust**Referring Trust (Initiating Event):****Referred by:** [ ] Consultant [ ] Cardiac Nurse [ ] GP [ ] PC Nurse [ ] Other |
| **Risk Ass** [ ] Low | [ ] Medium | [ ] High |
| **Acute Events During Rehab**[ ]  Angioplasty/PCI[ ]  Other Surgery[ ]  ICD[ ] LV Assist Device[ ]  Readmission other cause | [ ]  MI[ ]  Cardiac Arrest[ ]  Heart Failure [ ]  Congenital Heart[ ]  Other[ ]  Period Acute Non Card Illness | [ ]  Bypass Surgery[ ]  Angina[ ]  Pacemaker[ ]  Transplant[ ]  Readmission CHD[ ]  Unknown |
| **Previous Events**[ ] Pacemaker[ ]  ICD[ ]  Congenital Heart[ ]  Transplant[ ]  Arrhythmia | [ ] MI[ ] LV Assist Device[ ]  Bypass Surgery [ ]  Angioplasty/PCI[ ]  Other[ ] Unknown | [ ] Cardiac Arrest[ ]  Angina[ ]  Other Surgery[ ]  Heart Failure[ ] No/None |
| **Comorbidity**[ ] Cancer[ ] Stroke[ ] Chronic Bronchitis (COPD)[ ] Claudication[ ] Depression[ ] Hypercholesterolaemia/Dislipidaemia | [ ] Angina[ ] Diabetes[ ] Osteoporosis[ ] Emphysema (COPD)[ ] Chronic Back Problems[ ] Family History[ ] No/None | [ ] Arthritis (Osteo)[ ] Rheumatism [ ] Hypertension[ ] Asthma[ ] Anxiety[ ] Erectile Dysfunction[ ] Other Comorbid Complaint |

**Rehabilitation (NB: Please complete either Commissioning Pack or Phases, not both)**

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| --- |
| **COMMISSIONING PACK:** |
| **Early Rehab****Referred Date:****Start Date:** | **Core Rehab****Referred Date:****Start Date:****End Date:** |
| **Reason Not Taking Part:**[ ] Not Interest/Refused[ ] Ongoing Investigation[ ] Physical Incapacity[ ] Returned to work[ ] Local Exclus Criteria[ ] Language Barrier[ ] Holidaymaker[ ] Mental Incapacity[ ] No transport[ ] Died[ ] Not Referred[ ] Too Ill[ ] Rehab Not Needed[ ] Rehab Not Appropriate[ ] Staff Not Available[ ] Rapid transfer/tertiary[ ] DNA/No Contact[ ] Patient Req transfer [ ] No Service Available[ ] Transfer for PCI Interv[ ] Transfer to DGH/Trust[ ] Other[ ] Unknown | **Reason Not Taking Part:**[ ] Not Interest/Refused[ ] Ongoing Investigation[ ] Physical Incapacity[ ] Returned to work[ ] Local Exclus Criteria[ ] Language Barrier[ ] Holidaymaker[ ] Mental Incapacity[ ] No transport[ ] Died[ ] Not Referred[ ] Too Ill[ ] Rehab Not Needed[ ] Rehab Not Appropriate[ ] Staff Not Available[ ] Rapid transfer/tertiary[ ] DNA/No Contact[ ] Patient Req transfer [ ] No Service Available[ ] Transfer for PCI Interv[ ]  Transfer to DGH/Trust[ ] Other[ ] Unknown | **Reason Not Taking Part:**[ ] Not Interest/Refused[ ] Ongoing Investigation[ ] Physical Incapacity[ ] Returned to work[ ] Local Exclus Criteria[ ] Language Barrier[ ] Holidaymaker[ ] Mental Incapacity[ ] No transport[ ] Died[ ] Not Referred[ ] Too Ill[ ] Rehab Not Needed[ ] Rehab Not Appropriate[ ] Staff Not Available[ ] Rapid transfer/tertiary[ ] DNA/No Contact[ ] Patient Req transfer [ ] No Service Available[ ] Transfer for PCI Interv[ ]  Transfer to DGH/Trust[ ] Other[ ] Unknown | **Reason Not Taking Part:**[ ] Not Interest/Refused[ ] Ongoing Investigation[ ] Physical Incapacity[ ] Returned to work[ ] Local Exclus Criteria[ ] Language Barrier[ ] Holidaymaker[ ] Mental Incapacity[ ] No transport[ ] Died[ ] Not Referred[ ] Too Ill[ ] Rehab Not Needed[ ] Rehab Not Appropriate[ ] Staff Not Available[ ] Rapid transfer/tertiary[ ] DNA/No Contact[ ] Patient Req transfer [ ] No Service Available[ ] Transfer for PCI Interv[ ]  Transfer to DGH/Trust[ ] Other[ ] Unknown |
| **Reason Not Completing:**[ ] DNA/Unknown Reason[ ] Returned to work[ ] Left this area[ ] Planned/Emerg Interv[ ] Too Ill[ ] Died[ ] Other [ ] Hospital Readmission[ ] Unknown | **Reason Not Completing:**[ ] DNA/Unknown Reason[ ] Returned to work[ ] Left this area[ ]  Planned/Emerg Interv[ ] Too Ill[ ] Died[ ] Other [ ] Hospital Readmission[ ] Unknown | **Reason Not Completing:**[ ] DNA/Unknown Reason[ ] Returned to work[ ] Left this area[ ]  Planned/Emerg Interv[ ] Too Ill[ ] Died[ ] Other [ ] Hospital Readmission[ ] Unknown | **Reason Not Completing:**[ ] DNA/Unknown Reason[ ] Returned to work[ ] Left this area[ ]  Planned/Emerg Interv[ ] Too Ill[ ] Died[ ] Other [ ] Hospital Readmission[ ] Unknown |
| **Rehab Delivery:**[ ] Group Based Exercise[ ] Group Based Education[ ] Self-mngd: Heart Man.[ ] Self-mngd: REACH-HF[ ] Self-mngd: Angina Plan[ ] Self-mngd: Angioplasty[ ] Self-mngd: Other[ ] Self-mngd: Web: Activate your Heart [ ] Self-mngd: Web Other[ ] Self-mngd: App Based[ ] Self-mngd: Patient Led / Reduced CR Staff support[ ] Teleph: Phase 2/Early[ ] Ward: Phase 1/Early | **Rehab Delivery:**[ ] Group Based Exercise[ ] Group Based Education[ ] Self-mngd: Heart Man.[ ] Self-mngd: REACH-HF[ ] Self-mngd: Angina Plan[ ] Self-mngd: Angioplasty[ ] Self-mngd: Other[ ] Self-mngd: Web: Activate your Heart [ ] Self-mngd: Web Other[ ] Self-mngd: App Based[ ] Self-mngd: Patient Led / Reduced CR Staff support[ ] Teleph: Phase 2/Early[ ] Ward: Phase 1/Early | **Rehab Delivery:**[ ] Group Based Exercise[ ] Group Based Education[ ] Self-mngd: Heart Man.[ ] Self-mngd: REACH-HF[ ] Self-mngd: Angina Plan[ ] Self-mngd: Angioplasty[ ] Self-mngd: Other[ ] Self-mngd: Web: Activate your Heart [ ] Self-mngd: Web Other[ ] Self-mngd: App Based[ ] Self-mngd: Patient Led / Reduced CR Staff support[ ] Teleph: Phase 2/Early[ ] Ward: Phase 1/Early | **Rehab Delivery:**[ ] Group Based Exercise[ ] Group Based Education[ ] Self-mngd: Heart Man.[ ] Self-mngd: REACH-HF[ ] Self-mngd: Angina Plan[ ] Self-mngd: Angioplasty[ ] Self-mngd: Other[ ] Self-mngd: Web: Activate your Heart [ ] Self-mngd: Web Other[ ] Self-mngd: App Based[ ] Self-mngd: Patient Led / Reduced CR Staff support[ ] Teleph: Phase 2/Early[ ] Ward: Phase 1/Early |
| **Onward Referral:**[ ] Hospital Programme[ ] Comm Based Prog[ ] Ph 4 Exercise Prog[ ] Patient Support Group[ ] Medical Spec/Treat[ ] Sexual Health Clinic[ ] GP (Med Treatment)[ ] Prim Care CHD Clinic[ ] Community Matron[ ] Specialist Nurse[ ] Clinical Psychology[ ] Counselling Service[ ] IAPT[ ] Voc/Welf/Ben/CAB[ ] Council Activity [ ] Social Services[ ] Voluntary Body[ ] Smoking Cessation [ ] Home Based[ ] Dietitian | **Onward Referral:**[ ] Hospital Programme[ ] Comm Based Prog[ ] Ph 4 Exercise Prog[ ] Patient Support Group[ ]  Medical Spec/Treat[ ] Sexual Health Clinic[ ]  GP (Med Treatment)[ ]  Prim Care CHD Clinic[ ] Community Matron[ ] Specialist Nurse[ ] Clinical Psychology[ ] Counselling Service[ ] IAPT[ ] Voc/Welf/Ben/CAB[ ] Council Activity [ ] Social Services[ ] Voluntary Body[ ] Smoking Cessation [ ] Home Based[ ] Dietitian | **Onward Referral:**[ ] Hospital Programme[ ] Comm Based Prog[ ] Ph 4 Exercise Prog[ ] Patient Support Group[ ]  Medical Spec/Treat[ ] Sexual Health Clinic[ ]  GP (Med Treatment)[ ]  Prim Care CHD Clinic[ ] Community Matron[ ] Specialist Nurse[ ] Clinical Psychology[ ] Counselling Service[ ] IAPT[ ] Voc/Welf/Ben/CAB[ ] Council Activity [ ] Social Services[ ] Voluntary Body[ ] Smoking Cessation [ ] Home Based[ ] Dietitian | **Onward Referral:**[ ] Hospital Programme[ ] Comm Based Prog[ ] Ph 4 Exercise Prog[ ] Patient Support Group[ ]  Medical Spec/Treat[ ] Sexual Health Clinic[ ]  GP (Med Treatment)[ ]  Prim Care CHD Clinic[ ] Community Matron[ ] Specialist Nurse[ ] Clinical Psychology[ ] Counselling Service[ ] IAPT[ ] Voc/Welf/Ben/CAB[ ] Council Activity [ ] Social Services[ ] Voluntary Body[ ] Smoking Cessation [ ] Home Based[ ] Dietitian |
| Discharge to Trust: | Discharge to Trust: | Discharge to Trust: | Discharge to Trust: |
| **How likely are you to recommend the service?**[ ] Extremely Likely[ ] Likely[ ] Neither Likely/Unlikely[ ] Unlikely[ ] Extremely Unlikely[ ] Don’t Know | **How likely are you to recommend the service?**[ ] Extremely Likely[ ] Likely[ ]  Neither Likely/Unlikely[ ] Unlikely[ ] Extremely Unlikely[ ] Don’t Know | **How likely are you to recommend the service?**[ ] Extremely Likely[ ] Likely[ ]  Neither Likely/Unlikely[ ] Unlikely[ ] Extremely Unlikely[ ] Don’t Know | **How likely are you to recommend the service?**[ ] Extremely Likely[ ] Likely[ ]  Neither Likely/Unlikely[ ] Unlikely[ ] Extremely Unlikely[ ] Don’t Know |
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| **PHASES** |
| **Phase 1** | **Phase 2** | **Phase 3** | **Phase 4** |
| **Referred Date** | **Referred Date** | **Referred Date** | **Referred Date** |
| **Date Started** | **Date Started** | **Date Started** | **Date Started** |
| **Date Complete** | **Date Complete** | **Date Complete** | **Date Complete** |
| **Reason Not Taking Part:**[ ] Not Interest/Refused[ ] Ongoing Investigation[ ] Physical Incapacity[ ] Returned to work[ ] Local Exclus Criteria[ ] Language Barrier[ ] Holidaymaker[ ] Mental Incapacity[ ] No transport[ ] Died[ ] Not Referred[ ] Too Ill[ ] Rehab Not Needed[ ] Rehab Not Appropriate[ ] Staff Not Available[ ] Rapid transfer/tertiary[ ] DNA/No Contact[ ] Patient Req transfer [ ] No Service Available[ ] Transfer for PCI Interv[ ] Transfer to DGH/Trust[ ] Other[ ] Unknown | **Reason Not Taking Part:**[ ] Not Interest/Refused[ ] Ongoing Investigation[ ] Physical Incapacity[ ] Returned to work[ ] Local Exclus Criteria[ ] Language Barrier[ ] Holidaymaker[ ] Mental Incapacity[ ] No transport[ ] Died[ ] Not Referred[ ] Too Ill[ ] Rehab Not Needed[ ] Rehab Not Appropriate[ ] Staff Not Available[ ] Rapid transfer/tertiary[ ] DNA/No Contact[ ] Patient Req transfer [ ] No Service Available[ ] Transfer for PCI Interv[ ]  Transfer to DGH/Trust[ ] Other[ ] Unknown | **Reason Not Taking Part:**[ ] Not Interest/Refused[ ] Ongoing Investigation[ ] Physical Incapacity[ ] Returned to work[ ] Local Exclus Criteria[ ] Language Barrier[ ] Holidaymaker[ ] Mental Incapacity[ ] No transport[ ] Died[ ] Not Referred[ ] Too Ill[ ] Rehab Not Needed[ ] Rehab Not Appropriate[ ] Staff Not Available[ ] Rapid transfer/tertiary[ ] DNA/No Contact[ ] Patient Req transfer [ ] No Service Available[ ] Transfer for PCI Interv[ ]  Transfer to DGH/Trust[ ] Other[ ] Unknown | **Reason Not Taking Part:**[ ] Not Interest/Refused[ ] Ongoing Investigation[ ] Physical Incapacity[ ] Returned to work[ ] Local Exclus Criteria[ ] Language Barrier[ ] Holidaymaker[ ] Mental Incapacity[ ] No transport[ ] Died[ ] Not Referred[ ] Too Ill[ ] Rehab Not Needed[ ] Rehab Not Appropriate[ ] Staff Not Available[ ] Rapid transfer/tertiary[ ] DNA/No Contact[ ] Patient Req transfer [ ] No Service Available[ ] Transfer for PCI Interv[ ]  Transfer to DGH/Trust[ ] Other[ ] Unknown |
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| Discharge to Trust: | Discharge to Trust: | Discharge to Trust: | Discharge to Trust: |
| **How likely are you to recommend the service?**[ ] Extremely Likely[ ] Likely[ ]  Neither Likely/Unlikely[ ] Unlikely[ ] Extremely Unlikely[ ] Don’t Know | **How likely are you to recommend the service?**[ ] Extremely Likely[ ] Likely[ ]  Neither Likely/Unlikely[ ] Unlikely[ ] Extremely Unlikely[ ] Don’t Know | **How likely are you to recommend the service?**[ ] Extremely Likely[ ] Likely[ ]  Neither Likely/Unlikely[ ] Unlikely[ ] Extremely Unlikely[ ] Don’t Know | **How likely are you to recommend the service?**[ ] Extremely Likely[ ] Likely[ ]  Neither Likely/Unlikely[ ] Unlikely[ ] Extremely Unlikely[ ] Don’t Know |

**Assessment**

|  |  |  |
| --- | --- | --- |
| **Examinations and Tests tab** | **Assessment Date:** | **Assessment No:** |
| **Reason Not Sending Q’naire**[ ] Illiterate[ ] No resources[ ] Ass sent and not returned | [ ] Mental Incapacity[ ] Language Barrier[ ] Left the Area[ ] Died | [ ] Too Ill[ ] Not Interested/Refused[ ] Other[ ] Unable to Contact |
| **Weight:** | **Height:** | **BMI** *(auto-calc)* |
| **Waist:** | **Blood Pressure:** |  |
| **Smoked:** [ ] Never Smoked[ ] Ex Smoker[ ] Stopped since event[ ] Currently Smoking | **Cholesterol:**TotalHDL LDLRatio Triglycerides | **HbA1c**Mmol/L Or % |
| **Units of Alcohol/wk** | **Canadian Angina Scale** |  |
| **TAM2: Strenuous:** No.Sessions:Minutes: **Moderate:** No.Sessions Minutes: |
|  **Mild:** No.Sessions: Minutes: |  |
| **METS (other measures)** | **150 mins mod/wk** | **75 Mins Vigorous ex/wk** |
| **Heart Failure (NYHA)** | **Mediterranean Diet Score:** |  |
| **6 min walk:** Metres Minutes |
| **Shuttle Walk:** Level | Sub Level | Total Metres |
| **Quality of Life tab:**  |
| **Dartmouth Co-op:** |  |  |
| **Physical Fitness** | **Feelings** | **Daily Activities** |
| **Social Activities** | **Pain** | **Change in Health** |
| **Overall Health** | **Social Support** | **Quality of life** |
| **HAD Anxiety Score** | **HAD Depression Score** |  |
| **Current Employment Status** | [ ] Employed Full Time | [ ] Employed Part Time |
| [ ] Self-Employed Full Time | [ ] Self-Employed Part Time | [ ] Unemploy/Looking for work |
| [ ] Govt Training Course | [ ] Looking after Family/Home | [ ] Retired |
| [ ] Permanently Sick/Disabled | [ ] Temp Sick/Injured | [ ] Student |
| [ ] Other Reasons |  |  |
| **GAD 7** | **PHQ9** | **Minnesota** |

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| --- | --- |
| **Drugs tab:** |  |
| **ACE Inhibitors**[ ] Captopril[ ] Enalapril[ ] Lisinopril[ ] Perindopril[ ] Ramipril[ ] Trandolapril[ ] Quinapril[ ] Other/Not Specified | **Angiotensin receptor blockers (ARB)**[ ] Candesartan[ ] Losartan[ ] Valsartan[ ] Other/Not Specified | **Heart Rate Meds**[ ] Bisoprolol[ ] Carvedilol[ ] Nebivolol[ ] Atenolol[ ] Propranolol[ ] Metoprolol[ ] Ivabradine[ ] Other/Not Specified | **Diuretic: loop**[ ] Bumetanide[ ] Ethancrynic acid[ ] Frusemide[ ] Torasemide[ ] Other/Not Specified |
| **Diuretic: Thiazide**[ ] Bendroflumethiazide[ ] Metolazone[ ] Other/Not Specified | **Selective aldosterone receptor antagonist (SARA) Diuretic/antihypertensive**[ ] Eplerenone[ ] Spironolactone[ ] Other/Not Specified | **Anti-platelet**[ ] Aspirin[ ] Clopidogrel[ ] Other/Not Specified | **Antiarrhythmics**[ ] Digoxin[ ] Other/Not Specified |
| **Calcium channel blockers (CCB)**[ ] Amlodipine[ ] Felodipine[ ] Diltiazem[ ] Verapamil[ ] Other/Not Specified | **Therapy for Lipids (Statins)**[ ] Atorvastatin[ ] Pravastatin[ ] Rosuvastatin[ ] Simvastatin[ ] Other/Not Specified | **Anticoagulant**[ ] Warfarin [ ] Other/Not Specified | **Vasodilators**[ ] Nitrates (incl GTN Spray)[ ] Other/Not Specified |
| **Current Diabetes Therapy**[ ] Metformin[ ] Sulphonylurea[ ] Glitazone[ ] Insulin[ ] Other/Not Specified |  |  |  |
| **Core Components tab** |  |  |
| **Health Behaviour** **Change & Education** | [ ] Individual assessment of health behaviour[ ] Agreed & written treatment plan[ ] Goal setting for health behaviour change for core components[ ] Regular review of progress with goals |
| **Lifestyle Risk** **Factor Management** | [ ] Education about smoking[ ] Individual counselling/motivational interviewing for smoking cessation[ ] Individual assessment of diet needs[ ] Education about healthy diet[ ] Individual goal setting for dietary change[ ] Referral to dietetics/weight management prog[ ] Baseline assessment of activity level[ ] Education about physical activity[ ] Group based exercise programme[ ] Individual Exercise |
| **Psychosocial Health** | [ ] Assessment of illness beliefs / misconceptions[ ] Relaxation & stress management training[ ] Referral to psychological care[ ] Vocational advice[ ] Financial Social Security / Benefits advice[ ] ADL, aids or home adaption assessment |
| **Medical Risk Factor Mgt** | [ ] Regular monitoring & education of risk factors |
| **Cardioprotective Therapies** | [ ] Regular monitoring & education of cardioprotective therapies |
| **Long Term Management** | [ ] Long-term maintenance plan for goals |
| **Audit & Evaluation** | [ ] Final review of goals & progress |
| **Other** | [ ] Other |