

<b>Idaho TSE Registry STEMI Dataset</b>
Name of initial receiving center
First Name
Last Name
Middle Name
Gender (at Birth)
Birthdate
Date of ischemic symptom onset
Time of ischemic symptom onset
Mode of arrival
Location of first evaluation
Date of first EKG
Time of first EKG
Pre-arrival notification
Date of pre-arrival notification
Time of pre-arrival notification
Date of arrival at facility
Time of arrival at facility
Date of 12 lead EKG
Time of 12 lead EKG
Date cath lab activated
Time cath lab activated
If Primary PCI not completed, exclusion criteria
Thrombolytics dose start Time
Thrombolytics dose start Date
If thrombolytics not given, exclusion criteria
Door-to-needle total elapsed time
Door-to-balloon total elapsed time
If transferred, door-in-door-out total elapsed time
Discharge location
ED discharge disposition
Hospital discharge disposition
Cause of death
Time of death
ICD-10 diagnosis code