

# POSTDISCHARGE / OUTPATIENT CARE

## **PDOCMed = Post discharge and outpatient care Medication**

<b>1. CDE Variable</b>	PDOCMed = Post discharge and outpatient care medication
<b>2. CDE Definition</b>	Is the individual with TBI taking any prescribed medications? If yes, check all medication categories that apply.
<b>3. Recommended instrument for assessment</b>	Ask the individual with TBI or a reliable proxy what medications the individual with TBI is taking. It is also helpful if all medication bottles can be brought to the facility at the time of the data collection.
<b>4. Description of measure</b>	Categorical; multiple entries permitted.
<b>5. Permissible values</b>	<ul style="list-style-type: none"> <li>• No</li> <li>• Yes</li> <li>• Unknown</li> </ul> <p><u>Basic:</u> If Yes, check all that apply:</p> <ul style="list-style-type: none"> <li>• Psycho-stimulants</li> <li>• Anticonvulsants</li> <li>• Pain killers</li> <li>• Antidepressants</li> <li>• Other</li> <li>• Unknown</li> </ul> <p><u>Intermediate/Advanced:</u> If Yes, check all that apply:</p> <ul style="list-style-type: none"> <li>• Psycho-stimulants</li> <li>• Anticonvulsants</li> <li>• Narcotics</li> <li>• Other pain medication</li> <li>• Steroids</li> <li>• Antibiotics</li> <li>• Antidepressants</li> <li>• Antipsychotic agents</li> <li>• Others</li> <li>• Unknown</li> </ul>
<b>6. Classification: Basic/Intermediate/Advanced</b>	See above
<b>7. Procedure</b>	Record all names of medications and the indications (e.g., for pain) and then check the categories that apply.
<b>8. Comments/Special instructions:</b>	Indicate if the individual with TBI is taking any medications and if yes, check all medication categories that apply.
<b>9. Rationale/justification:</b>	The types of medications individuals with TBI are using can be an indication of problems or secondary conditions they have. Certain types of medications can also be a confounder that may need to be controlled for in the analysis of outcomes in certain types of clinical intervention trials.

**10. References:**

**Recommended time for assessment:**

On standardised follow up visits as required by protocol.