1. Aneurysm re-rupture after primary treatment has been completed:

Yes

No

1. Date of re-rupture:
2. Aneurysm retreatment required after primary treatment:

Yes

No

1. Date of retreatment:
2. Aneurysm re-treatment type:

Surgical

If surgical:

Clipping

Trapping alone

Wrapping

Hunterian ligation alone

Bypass

Other

Attempted/failed

Endovascular

If endovascular:

Coil

Coil with balloon remodeling

Stent only

Stent/coil

Vessel occlusion

Flow diverter

Other

Attempted/failed

## General Instructions

This CRF Module is recommended to collect information on aneurysm re-treatment and re-rupture for subarachnoid hemorrhage (SAH) studies.

The elements on this CRF are classified as Exploratory.

## Specific Instructions

Please see the Data Dictionary for definitions for each of the data elements included in this CRF Module.

* Aneurysm re-rupture: Re-rupture of the aneurysm after completed primary treatment. Rupture of further, previously untreated aneurysms (e.g. in case of multiple aneurysms) are not considered re-rupture. Hemorrhages during initial or follow-up treatment are also not considered re-ruptures.
* Date of re-rupture: The earliest day the physician/APN/PA documented re-rupture of the aneurysm after completed primary treatment.
* Aneurysm re-treatment: Retreatment of a previously ruptured aneurysm.
* Date of re-treatment: The earliest day the physician/APN/PA documented retreatment of the aneurysm after completed primary treatment following the ictus.
* Surgery involves craniotomy and microsurgery, including one or more of the following: clipping, trapping, Hunterian ligation, bypass, or wrapping; attempted/failed includes all aneurysms which did not receive definitive treatment via one of the aforementioned modalities; "definitive" means that at the conclusion of the procedure the prevention of immediate re-rupture has been achieved.
  + A craniotomy was performed and one or more of the listed techniques was performed. Bypass includes some other treatment for the aneurysm, e.g. trapping.
* Endovascular treatment will include use of coils, stents, and/or other endovascular devices alone or in combination to occlude the aneurysm; attempted/failed includes all aneurysms, which did not receive definitive treatment via one of the aforementioned modalities; "definitive" means that at the conclusion of the procedure the prevention of immediate re-rupture has been achieved.
  + Type of endovascular repair described in detail including all endovascular devices utilized, alone or in combination. Flow diverters include all stent technology intended to alter flow into the aneurysm sac; stent in this context means a non-flow diverting stent.

## References

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