Date family history taken (MM/DD/YYYY):

## Has a doctor or other medical professional ever told an immediate family member (i.e., parent, sibling, child) that he/she has or has had the following?

|  |  |
| --- | --- |
| 1. \*\*Stroke | [ ]  Yes [ ]  No (Skip to 2) [ ]  Unknown (Skip to 2)Youngest age immediate family member suffered a stroke (years):[ ]  Unknown |
| a. Ischemic stroke  | [ ]  Yes [ ]  No [ ]  Unknown |
| b. Hemorrhagic stroke | [ ]  Yes [ ]  No [ ]  Unknown |
| c. Subarachnoid hemorrhage (SAH) | [ ]  Yes [ ]  No [ ]  Unknown\*\*\*If YES, please indicate relationship to patient (i.e., parents, siblings, children): |
| 2. \*\*Coronary artery disease (e.g., heart attack) | [ ]  Yes [ ]  No [ ]  UnknownIf YES, youngest age immediate family member was diagnosed with condition/ suffered a heart attack (years):[ ]  Unknown |
| 3. Brain aneurysm | [ ]  Yes [ ]  No [ ]  Unknown\*\*\*If YES, please indicate relationship to patient (i.e., parents, siblings, children): |
| 4. Migraines | [ ]  Yes [ ]  No [ ]  Unknown |
| 5. Epilepsy | [ ]  Yes [ ]  No [ ]  Unknown |
| 6. Dementia | [ ]  Yes [ ]  No [ ]  Unknown |
| 7. Psychiatric illness | [ ]  Yes [ ]  No [ ]  Unknown |
| 8. Multiple miscarriages | [ ]  Yes [ ]  No [ ]  Unknown |
| 9. Bleeding disorder (e.g., hemophilia) | [ ]  Yes [ ]  No [ ]  Unknown |
| 10. Clotting disorder (e.g., thrombophilia) | [ ]  Yes [ ]  No [ ]  Unknown |
| 11. Sudden deaths of unknown etiology | [ ]  Yes [ ]  No [ ]  Unknown |
| 12. Intracranial vascular malformations | [ ]  Yes [ ]  No [ ]  Unknown |
| 13. \*\*\*Abdominal aortic aneurysm | [ ]  Yes [ ]  No [ ]  Unknown |
| 14. \*\*\*Hereditary Hemorrhagic Telangiectasia (HHT) | [ ]  Yes [ ]  No [ ]  Unknown |
| 15. \*\*\*Polycystic kidney disease | [ ]  Yes [ ]  No [ ]  Unknown |
| 16. \*\*\*Multiple endocrine neoplasia type I | [ ]  Yes [ ]  No [ ]  Unknown |
| 17. \*\*\*Ehlers-Danlos Syndrome Type IV | [ ]  Yes [ ]  No [ ]  Unknown |
| 18. \*\*\*Marfan Syndrome | [ ]  Yes [ ]  No [ ]  Unknown |
| 19. \*\*\*Neurofibromatosis type I (NF1) | [ ]  Yes [ ]  No [ ]  Unknown |
| 20. \*\*\*Arterial dissection | [ ]  Yes [ ]  No [ ]  Unknown |
| 21. \*\*\*Mitochondrial disorders | [ ]  Yes [ ]  No [ ]  Unknown |
| 22. \*\*\*Other, specify: | [ ]  Yes [ ]  No [ ]  Unknown |

## General Instructions

Family history data are collected to determine if stroke or other related diseases/disorders run in the participant’s/ subject’s immediate family.

Important note: None of the data elements included on this CRF Module are considered Core (i.e., strongly recommended for all stroke clinical studies to collect). Data elements included on this CRF Module are considered Supplemental – Highly Recommended, or Exploratory as indicated by the asterisks below.

\*\*Element is classified as Supplemental – Highly Recommended

\*\*\*Element is classified as Exploratory

The remaining data elements (i.e., non Core) are Supplemental and should only be collected if the research team considers them appropriate for their study.

## Specific Instructions

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

Most of the data elements on the CRF have the following instructions:

History can be obtained from participant/ subject, family member, friend, or chart/ medical record.

There are no other specific instructions for the data elements not already included on the CRF.