



Office of the
Provincial Health Officer

**British Columbia Chronic Disease Registries (BCCDR) Case Definitions
(Last Update: Apr 2022)**

Population Health Surveillance and Epidemiology Branch

Office of the Provincial Health Officer

British Columbia (BC) Ministry of Health

(Contact: hlth.cdrwg@gov.bc.ca)

STROKE, HOSPITALIZED ISCHEMIC

Case Definition Type: Health Service Contact Prevalence Incidence Rate Lifetime Prevalence

Case Definition:

One or more hospitalization with an ischemic stroke diagnostic code.

Signed-off BC Case Definition: Yes - V2020 No

Notes: See Traumatic Brain Injury exclusions in Diagnostic Code section below.

Age Restriction: 20+ years

Data Sources:

Data Source	ICD Code/Procedure Code/Rx	ICD Code/Procedure Code Position	Diagnosis Type	Hospital Care Level
Hospital ICD-10	H34.1,I63 (exclude I63.6), I64	First Position Only <input type="checkbox"/> All positions <input checked="" type="checkbox"/> Others <input type="checkbox"/> N/A <input type="checkbox"/>	M-Most Responsible Diagnosis <input checked="" type="checkbox"/> 1-Pre-Admit Comorbidity <input checked="" type="checkbox"/> 2-Post-Admit Comorbidity <input checked="" type="checkbox"/> 3-Secondary Diagnosis <input checked="" type="checkbox"/> 4-Morphology Code <input checked="" type="checkbox"/> 5-Admitting Diagnosis <input checked="" type="checkbox"/> 6-Proxy Most Responsible Diagnosis <input checked="" type="checkbox"/> 9-External Cause of Injury Code <input checked="" type="checkbox"/> 0-Newborn <input checked="" type="checkbox"/> W,X,Y- Service Transfer Diagnosis <input checked="" type="checkbox"/>	Acute Care <input checked="" type="checkbox"/> Rehabilitation <input checked="" type="checkbox"/> Day Surgery <input checked="" type="checkbox"/>
Hospital ICD-9	362.3, 433.x1, 434.x, 436	First Position Only <input type="checkbox"/> All positions <input checked="" type="checkbox"/> Others <input type="checkbox"/> N/A <input type="checkbox"/>	M-Most Responsible Diagnosis <input checked="" type="checkbox"/> 1-Pre-Admit Comorbidity <input checked="" type="checkbox"/> 2-Post-Admit Comorbidity <input checked="" type="checkbox"/> 3-Secondary Diagnosis <input checked="" type="checkbox"/> 4-Morphology Code <input checked="" type="checkbox"/> 5-Admitting Diagnosis <input checked="" type="checkbox"/> 6-Proxy Most Responsible Diagnosis <input checked="" type="checkbox"/> 9-External Cause of Injury Code <input checked="" type="checkbox"/> 0-Newborn <input checked="" type="checkbox"/> W,X,Y- Service Transfer Diagnosis <input checked="" type="checkbox"/>	Acute Care <input checked="" type="checkbox"/> Rehabilitation <input checked="" type="checkbox"/> Day Surgery <input checked="" type="checkbox"/>

Physician Claims ICD-9	N/A	First Position Only <input type="checkbox"/> All Positions <input type="checkbox"/> Others <input type="checkbox"/> N/A <input checked="" type="checkbox"/>	N/A	N/A
PharmaNet Drug History	N/A	N/A	N/A	N/A

Diagnostic Codes:

ICD-9/10	Description
H34.1	Central retinal artery occlusion
I63	Cerebral infarction (exclude I63.6 Cerebral infarction due to cerebral venous thrombosis, nonpyogenic)
I64	Stroke, not specified as hemorrhage or infarction
362.3	Retinal vascular occlusion
433.x1	Occlusion and stenosis of precerebral arteries
434.x	Occlusion cerebral arteries
436	Acute but ill-defined cerebrovascular disease
Exclusions: any traumatic brain injury	
S02.x	Fracture of skull and facial bones, except S02.5 fracture of tooth *
S06.x	Intracranial injury
Z50.x	Care involving use of rehabilitation procedures
800	Fracture of vault of skull
801	Fracture of base of skull
802	Fracture of face bones
803	Other and unqualified skull fractures
804	Multiple fractures involving skull or face with other bones
850	Concussion
851	Cerebral laceration and contusion
852	Subarachnoid subdural and extradural hemorrhage following injury
853	Other and unspecified intracranial hemorrhage following injury
854	Intracranial injury of other and unspecified nature
V57.x	Care involving use of rehabilitation procedures. Only excluded stroke diagnoses on the same day, and the code is the primary hospital discharge diagnosis.

Procedure Code: N/A

Drug List: N/A