



The American Board of Neurological Surgery

Member Board of The American Board of Medical Specialties

NeuroLog

Candidate Practice Data Entry Manual

Introduction

Congratulations on beginning the American Board of Neurological Surgery Certification Process! The purpose of this manual is to assist you in your entry of your practice data into the NeuroLog database, for assessment by the ABNS in your progress towards the oral examination, and eventual board certification in Neurological Surgery.

Data Requirements

The requirements for completion of your candidate practice data set and review of the data are:

1. The minimum requirements for data submitted are:

- 12 months of practice data
- Minimum of three months follow-up on every case
- Minimum of 100 operative cases for review
 - Cranial
 - Spinal
 - Peripheral nerve
 - Endovascular
 - Other

2. The NeuroLog data entry site requires the following to satisfactorily complete data entry for any case:

- Patient information
- Clinical diagnosis
- Diagnostic studies
- Operation
- CPT codes

3. All submitted cases must have:

- Minimum follow-up of 90 days
 - Exceptions:
 - Death within the follow-up interval

- Lost to follow-up

4. In addition, candidates must make narrative comment in the following text box fields:

- Clinical and operative summary
 - **This summary should give the reviewer a clear picture of the clinical scenario, and facts relevant to clinical decision making and the decision for surgery, if any was performed. If the data presented in any case is inadequate for the reviewer to understand both the thought process involved, and surgical procedures performed, then the data is incomplete. The candidate must then respond to a query on that case. If the reviewer finds that the clinical history and surgical details are generally inadequate in the candidate data, then the entire data set must be resubmitted.**
- Complications (if any)
- Outcome (at each of the following time points)
 - Immediate outcome is that immediately following the procedure
 - Early outcome is defined as < 30 days)AT
 - Late outcome is defined as > 90 days

5. All candidate comments must conform to the following:

- Candidate comments must be:
 - **Concise**
 - **Narrative**
 - **Readable**
 - **Relevant**
- Candidate comments should not:
 - Be extracts from correspondence, chart notes, other dictation
 - Contain references to candidate's hospital, or other hospitals by name
 - Contain references to referring physicians or colleagues

Complications

The Neurolog Database glossary addresses postoperative complications as follows:

“Were there any surgical complications, peri-operative morbidity, or death? This includes expected and unexpected adverse events during the surgical procedure through first post discharge follow up visit up to 30 days.”

In general, any postoperative or post treatment event or condition that required some treatment or intervention should be noted as a complication in the clinical summary along with some indication of how it was treated.

Some further guidelines to the definition of “complication” are:

1. Any adverse event that happens within 30 days of Surgery is usually attributed to the surgery.
2. Major complications include:
 - a. Any complication that:
 - i. Delays discharge
 - ii. Requires reoperation (even minor, e.g., lumbar CSF drain)
 - iii. Requires re-admission
 - b. Neurologic deficit (unexpected)
 - c. Stroke
 - d. Hemorrhage
 - i. Wound or intraparenchymal hematoma requiring surgical or medical treatment
 - e. Infection (wound, pneumonia)
 - f. Wound dehiscence
 - g. DVT, pulmonary embolism, or other thrombotic event
 - h. CSF leak
 - i. Dural tear
 - j. Myocardial infarction
3. Minor complications:
 - a. Does not meet major complication definition (above), for example:
 - i. increased pain without objective findings, not requiring readmission or reoperation
 - ii. IV site phlebitis, not requiring prolonged treatment

Queries

At the completion of data entry, and after initial review by the ABNS, questions may arise concerning your data. These can be resolved by responding to specific queries that will be posted by the ABNS on your data set web pages. *Candidates must answer all queries to the satisfaction of the reviewer before moving on in the process.*

Questions

On behalf of the ABNS, we wish every success in your final steps toward board certification. If you have any questions or concerns about this process, please contact the ABNS at:

6550 Fannin Street, Suite 2139
Houston, TX 77030
PH: (713) 441-6015
FAX: (713) 794-0207
abns@tmhs.org

Procedures for Neurolog Data Entry

All Candidates will be given a username and password by the ABNS Office.

Commonly Used Abbreviations:

CRF	Case Report Form
EDC	Electronic Data Capture
URL	Uniform Resource Locator (i.e., web address)

- First, open a web browser (ex. Internet Explorer) and go to <https://www.abns-neurolog.org> by typing it in the “Address” bar.
**Be sure to enter it in the “Address” bar and not a “Search” bar.
- Your web browser will open the NeuroLog login page. To access the EDC (electronic data capture) system you must always enter your username and password on this page.

**Please note your username and passwords are case sensitive.

- Upon login, you will view the Data Entry tab:

- The Search Grid options and filters let you search for records previously saved in the system. You can hide the Advanced Search options (everything but the Medical Record Number) if you do not need them
- The legend identifies the status of each form in the Patient Grid. You can see at a glance which forms have been entered and what data entry remains to be done. This is useful to determine which case report forms (CRFs) require further work prior to data submission.

- From the Data Entry tab, you may enter patient data by selecting “Enter New Patient” and a CRF will open in the same window:

The screenshot shows a web form with the following sections:

- Patient Information:** Includes fields for Last Name, First, Middle, Hospital (dropdown), Medical Record Number, Date of Birth (MM/DD/YYYY), Gender (Male/Female radio buttons), Admission Date, and Discharge Date (MM/DD/YYYY).
- Clinical Diagnosis:** Includes three dropdown menus for Diagnosis 1, 2, and 3.
- Diagnostic Studies:** A grid of checkboxes for various studies: X-ray, Angiography, Isotope Scan, Myelography, TCD, CT Scan, EEG, Lumbar Puncture, PET Scan, MR Scan, EMG, Duplex Ultrasonography, and SPECT Scan.

- Using the Errors and Warnings window will assist in completing the CRFs:

The image shows two overlapping windows:

- Errors and Warnings Window:** A red-tinted window with a title bar containing a minus sign and the text "Errors". The content lists:
 - critical errors:** "Operation Date: Required field; please enter a value."
 - errors:** "Patient Last Name: Patient Last Name is required to complete the form, please enter a value." (req_od_patlastname), "Patient First Name: Patient First Name is required to complete the form, please enter a value." (req_od_patfirstname), "Hospital: Hospital is required to complete the form, please enter a value." (req_od_hospital), and "Medical Record Number: Medical Record Number is required to complete the form, please enter a value." (req_od_mrn).
- Main Form Window:** A partial view of the "Case Log Submission" form. It includes a "Contact Us | Logout" link, an "Exit Form" button, and a "+]Errors" button with an arrow pointing to a "Show Errors and Warnings" button below it.

- After all data entry is complete, please check the “Complete Form” checkbox and select the “Submit” button to save all data. Exiting the CRF without selecting “Submit” will result in all data being lost.

The screenshot shows the bottom section of the form with the following elements:

- Complete Form: Check to mark this form as complete.
- Print after saving
-

- You will be taken back to the Data Entry tab where you can view all CRF entry, in ascending Operation Date order.
- To re-access any previously submitted data, select the Operation Date link under the “Practice Data” column.

- If you have incorrectly entered a form, select the “delete” link next to the corresponding CRF you would like to remove:



**If you inadvertently select the “delete” link for a CRF and it is accidentally removed from your Patient Grid, please contact the ABNS Office for assistance.



- The **Download Tab** may be used to export all form data into a spreadsheet file. For further instructions on how to use the Data Download Tool, please access the “Data Download Tool Help” file under the Download tab.
- The **Reports Tab** may be used to review all Candidate data in Procedural categories:



- The **My Account Tab** may be used to change your password at any time and/or review your account information.
- The **Case Log Submission Tab** may be used to submit data to the ABS Office for review.

****Please note: after data is submitted to the ABNS Office, you will no longer have access to your CRFs. Please update any data and/or print off any case forms prior to submitting to the ABNS Office.**

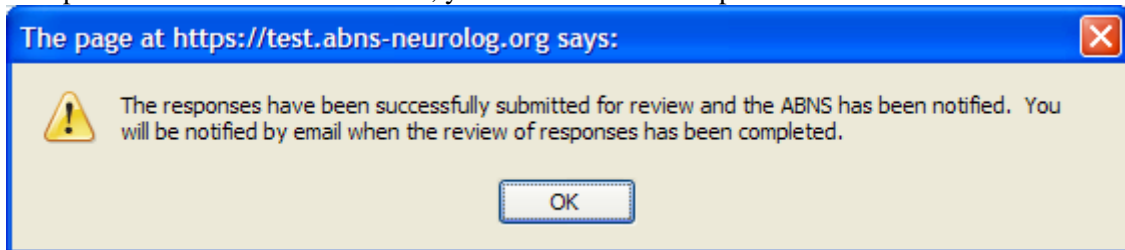
Case Log Submission

Case Log Submission	
Submission of Cases:	Please enter the start and end date for the range of cases you would like to submit for review. The case operation date is used as the range delimiter. The ABNS will be notified that cases have been submitted and they will assign a reviewer to the cases. You will be notified via email when the review is complete.
Start Date:	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
End Date:	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
<input type="button" value="Submit Cases"/>	

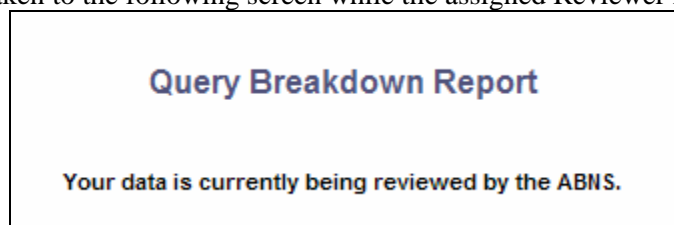
- To submit data to the ABNS Office, your data must fall into the following criteria:
 - At least 100 complete CRFs;
 - Operation dates on CRFs must span over one (1) year – be at least 366 days; and
 - Operation dates on CRFs cannot be greater than two (2) years.
- Enter the earliest Operation Date for CRFs you would like to submit in the “Start Date” field.
 - Enter the latest Operation Date for CRFs you would like to submit in the “End Date” field.
 - Select the “Submit Cases” button.

Case Log Submission	
1. Confirm Email Address:	<input type="text"/>
2. Provide a Short Practice Description:	<input type="text"/>
3. Print a Hospital Verification Form (only required for initial submission):	<input type="button" value="Print Form"/>
4. Print a List Of Cases Being Submitted:	<input type="button" value="Print Case List"/>
5. Complete Case Submission:	<input type="button" value="Complete Case Submission"/>

- You will be asked to confirm your email address so that you may be notified in the future. **Please confirm that the email address is correct.**
- You must enter a short practice description in the space provided. You will be limited to 500 characters.
- You must select the “**Print Form**” button to access the Hospital Verification Form. This form must be completed and sent to the ABNS Office to be added to your Candidate file.
- Next, select the “**Print Case List**” button. This will print the list of cases you have submitted to the ABNS Office for review.
- Once you have completed all steps, you will be prompted to “Complete Case Submission”. If all data entry is complete, please select the “**Complete Case Submission**” button and await further direction from the ABNS Office.
- Upon successful data submission, you will receive the response:



Also, you will be taken to the following screen while the assigned Reviewer reviews your data:



- You will then receive the following email, indicating that your data has been received:

Dear Candidate , your case list has successfully been submitted to the ABNS. You must now have the Hospital Verification Form signed by each hospital in your case list. Your case list will NOT be reviewed until that is received in the ABNS office with your case logs attached to each form.

Thank you.

Query Response/Resolution

- When the assigned Reviewer has completed the initial review of data, you may receive the following email:

Dear Candidate , the ABNS has finished commenting on your case list. Please review your cases and respond accordingly. All cases with queries posted will appear in your patient grid. Thank you.

Do not try to respond to this email.

- You may now re-enter the database to respond to any query postings.
- Upon login, you will see the following report:

Query Breakdown Report								
Operation Date	Medical Record Number	Age	Gender	Diagnosis	Procedure(s)	Results	Reviewer Query	Candidate Response
08/06/2005	000460004	50	M	Cranial Vascular Hemorrhage, intraparenchymal	Cranial Procedures Vascular Hematoma Non-Traumatic CPT Code(s): 61312-36489 was in-patient for heart failure, and had a ventricular assist device implanted, was on plavix, aspirin, heparin, large ICH per CT, family demanded evacuation.	Complications Major Death Death 08/06/2005 progressed to brain death on post-op day 1. 08/06/2005 progressed to brain death on post-op day 1.	Type in Query Text regarding the case in review.	Add/Edit Response

Reviewer query

- Select the “Add/Edit Response” to enter your resolution/answer.
- Type your response into the Candidate Response window:

Ad-hoc Queries -- Web Page Dialog

Candidate Workflow Queries

Reviewer Comments:
Type in Query Text regarding the case in review.

Candidate Response:

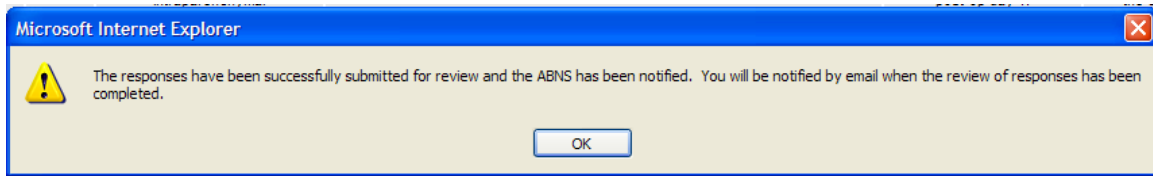
Save Query Cancel

- Selecting “Save Query” will post your response to the report:

Query Breakdown Report								
Operation Date	Medical Record Number	Age	Gender	Diagnosis	Procedure(s)	Results	Reviewer Query	Candidate Response
08/06/2005	000460004	50	M	Cranial Vascular Hemorrhage, intraparenchymal	Cranial Procedures Vascular Hematoma Non-Traumatic CPT Code(s): 61312-36489 was in-patient for heart failure, and had a ventricular assist device implanted, was on plavix, aspirin, heparin, large ICH per CT, family demanded evacuation.	Complications Major Death Death 08/06/2005 progressed to brain death on post-op day 1. 08/06/2005 progressed to brain death on post-op day 1.	Type in Query Text regarding the case in review.	Type in Query resolution text regarding the case in review. Add/Edit Response

Submit to Reviewer

- You may add/edit your query resolution prior to submitting back to the Reviewer. After you have completed answering all queries, select the “Submit to Reviewer” button for submission back to the ABNS Office.
- Upon successful submission, you will see the following pop-up message appear:



- You will also receive the following confirmation email:

Dear Candidate , you have successfully submitted your query responses to the ABNS. Please wait to hear from the ABNS regarding your final evaluation.

Thank you.