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Questionnaire for Verifying Stroke-Free Status (QVSFS)

Availability	Please visit this website for more information about the instrument: Questionnaire for Verifying Stroke-Free Status .
Classification	Supplemental: Stroke
Short Description of Instrument	<p>Purpose: The Questionnaire for Verifying Stroke-Free Status (QVSFS) is a practical instrument for confirming absence of previous symptomatic stroke or transient ischemic attack in control subjects participating in stroke research.</p> <p>Overview: The QVSFS is an 8-item structured questionnaire, designed to quickly and accurately identify prospectively screened study subjects who are free of symptomatic cerebrovascular disease.</p> <p>Time: Administration time is 5 minutes or less for all subjects.</p>
Scoring	QVSFS scores range from 0 (no questions positive) to 8 (all 8 questions positive). Subjects were considered QVSFS negative (stroke/TIA free) if their sum score was 0. If any of the 8 items were positive (sum score 1 to 8), the QVSFS was considered positive (not stroke/TIA free). Any question that was answered “unknown” was scored as a negative response.
Rationale/Justification	Psychometric Properties: The QVSFS can effectively identify stroke-free individuals with a high degree of accuracy, even in a population with a large proportion of patients with prior stroke or TIA. Accuracy for identifying subjects with stroke and/or TIA is lower, but the QVSFS may still be useful as a screening tool in that regard.
References	<p>Jones WJ, Williams LS, Meschia JF. Validating the Questionnaire for Verifying Stroke-Free Status (QVSFS) by neurological history and examination. <i>Stroke</i>. 2001;32(10):2232–2236.</p> <p>Meschia JF, Lojacono MA, Miller MJ, Brott TG, Atkinson EJ, O'Brien PC. Reliability of the questionnaire for verifying stroke-free status. <i>Cerebrovasc Dis</i>. 2004;17(2-3):218–223.</p> <p>Meschia JF, Brott TG, Chukwudelunzu FE, Hardy J, Brown RD Jr, Meissner I, Hall LJ, Atkinson EJ, O'Brien PC. Verifying the stroke-free phenotype by structured telephone interview. <i>Stroke</i>. 2000 31(5):1076–1080.</p>