

Post-Stroke Risk Reduction Strategies

Collection date of post-stroke risk reduction strategies: _____
(DD-MM-YYYY)

POST-STROKE RISK REDUCTION STRATEGIES

Has the participant ever employed any post-stroke risk reduction strategies? ☐ Yes ☐ No

(If Yes) Specify post-stroke risk reduction strategies employed:

- ☐ Antiarrhythmics
- ☐ Anticoagulant therapy
- ☐ Antidiabetics
- ☐ Antihypertensive drug therapy
- ☐ Antilipids
- ☐ Antiplatelet therapy
- ☐ Smoking Cessation
- ☐ Dietary changes
- ☐ Physical Activity changes
- ☐ Statin therapy
- ☐ Surgical Procedure
- ☐ Other

(If Other) Specify other post-stroke risk reduction strategies employed: _____

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