*Data Dictionary Codebook*

# Venous Ultrasonography Data Intake (PID: 313)

10/12/2025 6:27pm

| Instruments | |
|---|---|
| **Instrument** | **Form Name** |
| Venous Ultrasonography Data Intake | venous_ultrasonography_data_intake |

| # | Variable / Field Name | Field Label *Field Note* | Field Attributes (Field Type, Validation, Choices, Calculations, etc.) |
|---|---|---|---|
| | **Instrument: Venous Ultrasonography Data Intake** (venous_ultrasonography_data_intake)  📺 **Enabled as survey** | | |
| 1 | [record_id] | Record ID | text |
| 2 | [date] | Date: | text (date_mdy) |
| 3 | [initials] | RN/EMT/APP initials: | text |
| 4 | [medrec] | MR#: | text |
| 5 | [age] | Age: | radio<br>1 \| Months 2-23 months<br>2 \| Years >2 |
| 6 | [years]<br>Show the field ONLY if:<br>[age] = '2' | Please specify age in years: *years* | text |
| 7 | [months]<br>Show the field ONLY if:<br>[age] = '1' | Please specify age in months: *months* | text |
| 8 | [gender] | Patient Gender: | radio<br>1 \| Male<br>2 \| Female |
| 9 | [temp] | Temp: | text |
| 10 | [hr] | HR: | text |
| 11 | [rr] | RR: | text |
| 12 | [bp] | BP: | text |
| 13 | [height] | Height: *cm* | text |
| 14 | [weight] | Weight: *kg* | text |
| 15 | [bmi] | BMI: | text |

| 16 | [diseases] | Disease Condition: | radio |
|---|---|---|---|
| | | | 1  Infectious |
| | | | 2  Respiratory |
| | | | 3  GI |
| | | | 4  GU |
| | | | 5  Surgical |
| | | | 6  Trauma |
| | | | 7  Ingestion |
| | | | 8  Electrolyte |
| | | | 9  Neurologic |
| | | | 10  Psychiatric Disorder |
| | | | 11  Other |
| 17 | [infectious]<br><br>Show the field ONLY if:<br>[diseases] = '1' | Infectious, please specify: | radio<br>1  Neonatal Fever<br>2  Febrile illness<br>3  Meningitis<br>4  Sepsis |
| 18 | [respiratory]<br><br>Show the field ONLY if:<br>[diseases] = '2' | Respiratory, please specify: | radio<br>1  Bronchiolitis<br>2  Asthma<br>3  Pneumonia |
| 19 | [gi]<br><br>Show the field ONLY if:<br>[diseases] = '3' | GI, please specify: | radio<br>1  Vomiting<br>2  Diarrhea<br>3  Gastroenteritis |
| 20 | [gu]<br><br>Show the field ONLY if:<br>[diseases] = '4' | GU, please specify: | radio<br>1  UTI/Pyelonephritis<br>2  Renal colic |
| 21 | [surgical]<br><br>Show the field ONLY if:<br>[diseases] = '5' | Surgical, please specify: | radio<br>1  Pyloric stenosis<br>2  Intussusception<br>3  Appendicitis |
| 22 | [electrolyte_derangement]<br><br>Show the field ONLY if: | Electrolyte Derangement, please specify: | radio<br>1  Hypoglycemia<br>2  Diabetes with ketosis |

| | | | |
|---|---|---|---|
| | [diseases] = '8' | | 3 | DKA |
| 23 | [neurologic]<br><br>Show the field ONLY if:<br>[diseases] = '9' | Neurologic, please specify: | radio<br><table><tr><td>1</td><td>Headache</td></tr><tr><td>2</td><td>Syncope</td></tr><tr><td>3</td><td>VP Shunt</td></tr><tr><td>4</td><td>Seizure</td></tr></table> |
| 24 | [other_disease]<br><br>Show the field ONLY if:<br>[diseases] = '11' | Other, please specify | notes |
| 25 | [reasoniv] | Reason for IV (Check all that apply): | checkbox<br><table><tr><td>1</td><td>reasoniv___1</td><td>General access</td></tr><tr><td>2</td><td>reasoniv___2</td><td>Fluids</td></tr><tr><td>3</td><td>reasoniv___3</td><td>Medications</td></tr><tr><td>4</td><td>reasoniv___4</td><td>Blood draw</td></tr><tr><td>5</td><td>reasoniv___5</td><td>Diagnostic procedure</td></tr></table> |
| 26 | [access_attempts] | How many venous access attempts PRIOR to attempting USGPIV? | text |
| 27 | [attempts_during_usgpiv] | How many attempts DURING USGPIV? | text |
| 28 | [location] | Location of successful cannulation: | dropdown<br><table><tr><td>1</td><td>Upper arm</td></tr><tr><td>2</td><td>Right Anticubital</td></tr><tr><td>3</td><td>Right Forearm</td></tr><tr><td>4</td><td>Right Hand</td></tr><tr><td>5</td><td>Right Lower leg</td></tr><tr><td>6</td><td>Right Saphenous</td></tr><tr><td>7</td><td>Right Foot</td></tr><tr><td>8</td><td>Left Anticubital</td></tr><tr><td>9</td><td>Left Forearm</td></tr><tr><td>10</td><td>Left Hand</td></tr><tr><td>11</td><td>Left Lower leg</td></tr><tr><td>12</td><td>Left Saphenous</td></tr><tr><td>13</td><td>Left Foot</td></tr><tr><td>14</td><td>Other:</td></tr></table> |
| 29 | [otherlocation] | Other, please specify: | text |

|   |   | Show the field ONLY if:<br>[location] = '14' |   |   |
|---|---|---|---|---|
| 30 | [needle] | Size of needle: | dropdown | |

| 1 | 18 |
|---|---|
| 2 | 20 |
| 3 | 21 |
| 4 | 22 |
| 24 | 24 |

| 31 | [needlelength] | Length of needle:<br>*inch(es)* | text |
|---|---|---|---|

| 32 | [analgesia] | Use of local analgesia? | yesno |
|---|---|---|---|

| 1 | Yes |
|---|---|
| 0 | No |

| 33 | [diameter_of_vein] | Estimated diameter of vein:<br>*cm* | text |
|---|---|---|---|
| 34 | [depth_of_vein] | Depth of vein art inferior margin:<br>*cm* | text |
| 35 | [minutes_for_procedure] | # Minutes for procedure completion (Time from needle to skin to dressing site): | text |
| 36 | [level_of_cannulation] | Rate level of cannulation difficulty: | radio |

| 1 | 1-very difficult |
|---|---|
| 2 | 2-difficult |
| 3 | 3-neither easy nor difficult |
| 4 | 4-easy |
| 5 | 5-very easy |

| 37 | [prior_vus_placement] | Check approximate # of prior VUS placement you have completed: | radio |
|---|---|---|---|

| 1 | 1-2 |
|---|---|
| 2 | 3-5 |
| 3 | 6-10 |
| 4 | 11-15 |
| 5 | 16-20 |
| 6 | 21-25 |
| 7 | 26-30 |
| 8 | >30 |

| 38 | [level_of_discomfort] | Rate patient's level of discomfort with stick:<br>*1=least discomfort, 10=most discomfort* | radio |
|---|---|---|---|

| 1 | 1 |
|---|---|
| 2 | 2 |

| | | | |
|---|---|---|---|
| | | | 3 \| 3 |
| | | | 4 \| 4 |
| | | | 5 \| 5 |
| | | | 6 \| 6 |
| | | | 7 \| 7 |
| | | | 8 \| 8 |
| | | | 9 \| 9 |
| | | | 10 \| 10 |

Custom alignment: RH

| 39 | [venous_ultrasonography_data_intake_complete] | Section Header: *Form Status*<br><br>Complete? | dropdown<br><br>0 \| Incomplete<br>1 \| Unverified<br>2 \| Complete |
|---|---|---|---|