



# HCHS/SOL Annual Follow-Up Interview Outpatient Revascularization Procedures – RPE – QxQ

Updated on 5/17/2026

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## Background

The purpose of the yearly follow-up phone interviews for HCHS/SOL is to document medical events occurring every year from the baseline examination (Visit 1). These annual follow-up interviews maintain and update cohort contact information and ascertain vital status. The follow-up interviews are to be conducted by telephone in English or Spanish. Annual follow-up interviews will continue to occur approximately every 12 months from the baseline (Visit 1) anniversary date. The timing of the annual follow-up interviews is described in more detail in Manual 3-Retention and Follow-up (formerly Manual 3 and Manual 16) available on the HCHS/SOL website.

**Note on using alternate designated respondent (ADR):** Before initiating an AFU interview, HCHS/SOL personnel should review records from the last completed interview with the participant. If the previous interview was conducted with an ADR due to participant’s cognitive impairment, the ADR should again be contacted to schedule the follow-up interview. Historic ADR information (if available) can be obtained from the CIE(S) form from the previous year or from the latest occurrence of the PCIE(S) form.

## RPE(S) (Outpatient Revascularization Procedures)

In this section we seek information about revascularization procedures that occurred in an outpatient setting. For the purposes of this section, outpatient treatment is defined as treatment that is given in a setting other than a hospital admission or care in an emergency room.

The RPE(S) is a multi-occurrence form. Like the HOE(S), additional occurrences should be created as needed to capture all outpatient revascularization procedures that occurred since the last AFU interview.

Start this section out by saying the following introduction:

English: *“Now I would like to ask you about procedures you may had had in an outpatient or ambulatory surgery center or facility, without being admitted to the hospital or visiting an emergency room.”*

Spanish: *“Ahora me gustaría preguntarle sobre procedimientos que puede haber tenido en un centro de atención ambulatorio o de cirugía ambulatoria, sin haber sido admitido(a) al hospital y sin haber visitado la sala de emergencias.”*

- Q10** Since our last interview with you on (date), did you have a surgical procedure to open up the arteries in your heart (balloon angioplasty or stent)?  
If the answer is No or the participant is UNSURE, then go to PCIE(S).

The purpose of this question is to identify instances of outpatient cardiac catheterizations that resulted in one or more interventions (angioplasty and/or stent insertion) to restore blood flow in the participant’s heart. This procedure is now being performed in outpatient settings, such as stand-alone catheterization facilities and ambulatory/outpatient surgery centers where the procedure is performed and the patient is observed and then discharged home without being admitted to the hospital.

If clarification is needed to help the participant identify if they have had a heart catheterization **and** received balloon angioplasty or had a stent inserted, please use these definitions:

**Cardiac catheterization:**

*A procedure where a physician inserts a thin tube (catheter) through a blood vessel in the arm or groin up to the heart to diagnose and treat narrowed arteries or blockages that prevent good blood flow to the heart muscle.*

**Cateterismo cardíaco:**

*Un procedimiento en el que un médico inserta un tubo delgado (catéter) a través de un vaso sanguíneo en el brazo o la ingle hasta llegar al corazón para diagnosticar y tratar el estrechamiento de las arterias o las obstrucciones que impiden un buen flujo sanguíneo al músculo cardíaco.*

**Balloon Angioplasty:**

*A medical procedure used to open narrowed or blocked arteries in the heart. A small balloon is inserted into the artery and inflated to widen the vessel and improve blood flow.*

**Angioplastia con balón:**

*Un procedimiento médico utilizado para abrir arterias del corazón que están estrechas o bloqueadas. Se inserta un pequeño globo en la arteria y se infla para ensanchar el vaso y mejorar el flujo sanguíneo.*

**Stenting:**

*Often done during angioplasty, this involves placing a small mesh tube (called a stent) inside the artery to keep it open after the balloon is removed. The stent helps prevent the artery from narrowing again.*

**Colocación de stent:**

*Generalmente se realiza durante la angioplastia. Consiste en colocar un pequeño tubo de malla (llamado stent) dentro de la arteria para mantenerla abierta después de retirar el globo. El stent ayuda a prevenir que la arteria se vuelva a estrechar.*

If Yes, specify the facility name, location and date.

- 10a.** Enter the facility name.
- 10b.** Is the facility located in the US? Select Yes or No.
- 10b1.** This field will be enabled if Q10b = No (facility not located in the US). Enter the location (city, state, country) of the facility located outside the US.
- 10c.** This field will be enabled if Q10b= Yes (facility located inside the US). Enter the US city where the facility is located.
- 10d.** This field will be enabled if Q10b= Yes (facility located inside the US). Select the US state where the facility is located from the dropdown menu.
- 10e.** (Enter the date of the procedure: mm/dd/yyyy)
- 10f.** Did you have any additional procedures to open up the arteries of your heart since your last telephone interview?

It is possible that a participant will have had multiple coronary revascularization procedures since the last interview, even within a single year. In these cases, we want to collect facility information and date for each procedure. After completing RPE(S)11-11f, save and exit the form, then create a next occurrence of the RPE(S) to collect information on additional revascularization procedures. Create as many occurrences as needed of the RPE to capture all procedures.

- Q11** Since our last interview with you on *(date)*, did you have a surgical procedure to open up the arteries in your neck (carotid endarterectomy, angioplasty, or stent)?  
If the answer is No or the participant is UNSURE, then go to PCIE(S).

The purpose of this question is to identify instances of outpatient carotid catheterizations that resulted in one or more interventions (carotid endarterectomy, angioplasty, or stent) to restore blood flow to the participant's brain. This procedure is now being performed in outpatient settings, such as stand-alone catheterization facilities and ambulatory/outpatient surgery centers where the procedure is performed and the patient is observed and then discharged home without being admitted to the hospital.

If clarification is needed to help the participant identify if they have had a carotid catheterization procedure, please use these definitions:

***Carotid endarterectomy:***

*A surgical procedure to remove plaque (fat and cholesterol buildup) from the carotid arteries in the neck, which restores normal blood flow to the brain to prevent strokes.*

***Endarterectomía Carotídea:***

*Un procedimiento quirúrgico para eliminar la placa (acumulación de grasa y colesterol) de las arterias carótidas en el cuello, lo que restablece el flujo sanguíneo normal al cerebro para prevenir derrames cerebrales (accidentes cerebrovasculares).*

***Carotid angioplasty:***

*A procedure to open narrowed or blocked carotid arteries in the neck by inflating a small balloon to compress plaque and restore blood flow to the brain.*

***Angioplastia carotídea:***

*Un procedimiento para abrir las arterias carótidas estrechas o bloqueadas en el cuello, mediante el inflado de un pequeño globo que comprime la placa y restablece el flujo sanguíneo al cerebro.*

***Carotid stenting:***

*Often done during angioplasty, this involves placing a small mesh tube (called a stent) inside the carotid artery to keep it open after the balloon is removed. The stent helps prevent the artery from narrowing again.*

***Colocación de stent carotídeo:***

*Generalmente se realiza durante la angioplastia. Consiste en colocar un pequeño tubo de malla (llamado stent) dentro de la arteria para mantenerla abierta después de retirar el globo. El stent ayuda a prevenir que la arteria se vuelva a estrechar.*

If Yes, specify the facility name, location and date.

- 11a.** Enter the facility name.
- 11b.** Is the facility located in the US? Select Yes or No.
- 11b1.** This field will be enabled if Q11b = No (facility not located in the US). Enter the location (city, state, country) of the facility located outside the US.
- 11c.** This field will be enabled if Q11b= Yes (facility located inside the US). Enter the US city where the facility is located.
- 11d.** This field will be enabled if Q11b= Yes (facility located inside the US). Select the US state where the facility is located from the dropdown menu.

- 11e.** Enter the date of the procedure: mm/dd/yyyy
- 11f.** Did you have any additional procedures to open up the arteries of your neck since your last telephone interview?

It is possible that a participant will have had multiple carotid revascularization procedures since the last interview, even within a single year. In these cases, we want to collect facility information and date for each procedure. If Yes, save and exit the form, then create a next occurrence of the RPE(S) to collect information on additional revascularization procedures. Create as many occurrences as needed of the RPE to capture all procedures.

*Once all instances of coronary or carotid revascularization since last AFU are recorded, read:*

“Thank you so much for answering these questions. We greatly appreciate your participation in the SOL study. Now, I would like to make sure our records are up to date. Have there been any changes to your address, phone number, or email address; or for those of your alternate contacts?”

*If No: Open the latest occurrence of the PCIE form in read-only mode and confirm the information with the participant. If the participant indicates that any of their information has changed, close the read-only form. Copy the latest occurrence of the PCIE into a new occurrence and confirm/update the information with the participant.*

*If Yes: Copy the latest occurrence of the PCIE form to a new occurrence and confirm/update the information with the participant.*