



Atrial fibrillation: annual stroke risk assessment

NICE indicator

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Indicator

The percentage of patients with atrial fibrillation in whom stroke risk has been assessed using the CHA₂DS₂-VASc score risk stratification scoring system in the preceding 12 months (excluding those patients with a previous CHADS₂ or CHA₂DS₂-VASc score of 2 or more).

Indicator type

General practice indicator suitable for use in the Quality and Outcomes Framework.

This document does not represent formal NICE guidance. For a full list of NICE indicators, see our [menu of indicators](#).

To find out how to use indicators and how we develop them, see our [NICE indicator process guide](#).

Rationale

This indicator aims to support the identification of people with atrial fibrillation who are at increased risk of stroke so that they may be offered anticoagulation drug therapy.

People with symptomatic or asymptomatic paroxysmal, persistent or permanent atrial fibrillation, atrial flutter and/or a continuing risk of arrhythmia recurrence after cardioversion back to sinus rhythm, should have an assessment of their stroke risk using the CHA₂DS₂-VASc risk assessment tool.

The CHA₂DS₂-VASc system scores points up to a maximum of 9, for each of the following risk factors:

- age: <65 (0 points), 65 to 74 (1 point), ≥75 (2 points)
- gender: male (0 points), female (1 point)
- congestive heart failure (1 point)
- hypertension (1 point)
- stroke, transient ischaemic attack (TIA) or thromboembolism (2 points)
- vascular disease (1 point)
- diabetes mellitus (1 point).

A score of 0 indicates low risk, a score of 1 indicates low-to-medium risk and a score of 2 or more indicates moderate-to-high risk. It also notes that aspirin monotherapy should not be offered solely for stroke prevention in these people.

Source guidance

Atrial fibrillation: diagnosis and management. NICE guideline 196 (2021), recommendation 1.2.1

Specification

Numerator: For example: The number of patients in the denominator in whom stroke risk has been assessed using the CHA₂DS₂-VASc score risk stratification scoring system in the preceding 12 months.

Denominator: The number of patients with atrial fibrillation.

Calculation: Numerator divided by the denominator, multiplied by 100.

Exclusions: Patients with a previous CHADS₂ or CHA₂DS₂-VASc score of 2 or more.

Minimum population: The indicator would be appropriate to assess performance at individual general practice level.

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