Pharmaceutical Drugs of Addiction System (PHDAS) Collection – Stimulant Notification Subsystem Variable checklist

The variables listed below are available subject to data custodian and ethical approval. Please indicate the variables requested and provide justification for their inclusion in your study.

|  | Variable | Justification |
| --- | --- | --- |
|  | Patient’s residential address – postcode |  |
|  | Patient’s date of birth / age (age only unless justification for date of birth provided) |  |
|  | Patient’s sex |  |
|  | Date of prescription |  |
|  | Stimulant drug prescribed |  |
|  | Dose prescribed (mg) |  |
|  | Specialty or designation of doctor |  |

|  |
| --- |
| Other/comments |
|  |