



ACHIEVE ALERT AND RESULTS REPORTING FORM

ID NUMBER:

FORM CODE:

DATE: 11/08/2017
Version 1.0

Instructions: The purpose of this form is to acknowledge receipt of and document notification of alerts and results that occur as a result of the exam visit. Listings of alerts are available in the Alerts Report in CDART.

A. VISIT EXIT INTERVIEW

1. Were there any alert notifications at the time of the visit? Yes
No **GO TO ITEM 6**
2. Seated blood pressure alert: date notified / /
Month Day Year
3. CES-D Depression alert: date notified / /
Month Day Year
4. Was a copy of the Exit Interview results report provided to the participant? Yes
No
5. Date the Exit Interview results report was provided: / /
Month Day Year
6. Date neurocognitive status letter sent to the participant: / /
Month Day Year

B. EXTERNAL ALERTS or RESULTS (see AAR QxQ for list of ALERT or RESULT CODES)

7. Alert or result code: 7a. Date notified: / /
Month Day Year

8. Alert or result code: 8a. Date notified: / /
Month Day Year

9. Alert or result code: 9a. Date notified: / /
Month Day Year

10. Alert or result code: 10a. Date notified: / /
Month Day Year

11. Alert or result code: 11a. Date notified: / /
Month Day Year

12. Alert or result code: 12a. Date notified: / /
Month Day Year

13. Alert or result code: 13a. Date notified: / /
Month Day Year

14. Alert or result code: 14a. Date notified: / /
Month Day Year

15. Alert or result code: 15a. Date notified: / /
Month Day Year