



ACCELEROMETRY FORM

ID NUMBER:

FORM CODE:

DATE: 12/09/2019
Version 3.0

ADMINISTRATIVE INFORMATION

0a. Completion Date: / /
Month Day Year

0b. Staff ID:

0c. Was the log returned to the clinic?

Yes.....

No → **Go to item 12**

Instructions: This questionnaire is started when the accelerometer is given to the participant and completed when the accelerometer is returned to the clinic.

A. ACCELEROMETRY INITIATION

1. Accelerometer ID

2. Accelerometer serial number max length=20

3. Time/date accelerometer started:

a. Time accelerometer started: :
h h m m

b. Date accelerometer started: / /
M M D D Y Y Y Y

4. Accelerometry technician ID.....

B. SLEEPING LOG

5. Day 1:

a. Went to bed :
h h : m m

b. Got out of bed :
h h : m m

6. Day 2:

a. Went to bed :
h h : m m

b. Got out of bed :
h h : m m

7. Day 3:

a. Went to bed

□	□	:	□	□
h	h	:	m	m

b. Got out of bed

□	□	:	□	□
h	h	:	m	m

8. Day 4:

a. Went to bed

□	□	:	□	□
h	h	:	m	m

b. Got out of bed

□	□	:	□	□
h	h	:	m	m

9. Day 5:

a. Went to bed

□	□	:	□	□
h	h	:	m	m

b. Got out of bed

□	□	:	□	□
h	h	:	m	m

10. Day 6:

a. Went to bed

□	□	:	□	□
h	h	:	m	m

b. Got out of bed

□	□	:	□	□
h	h	:	m	m

11. Day 7:

a. Went to bed

□	□	:	□	□
h	h	:	m	m

b. Got out of bed

□	□	:	□	□
h	h	:	m	m

C. ACCELEROMETRY COMPLETION

12. Was the accelerometer returned to the clinic?

Yes.....

No → **Save and close form**

13. Accelerometry technician ID.....

14. Date accelerometer returned to clinic://
M M D D Y Y Y Y

a. Data successfully downloaded?

Yes

No.....

Complete the remaining items if the log was returned to the clinic (question 0c = Yes).

15. Did the participant remove the accelerometer (1st time)?

Yes.....

No → **Save and close form**

16. Time/date accelerometer removed (1st time):

a. Time accelerometer removed (1st time)::
h h m m

b. Date accelerometer removed://
M M D D Y Y Y Y

17. Time/date accelerometer replaced (1st time):

a. Time accelerometer replaced (1st time)::
h h m m

b. Date accelerometer replaced://
M M D D Y Y Y Y

18. Reason for removal (1st time):

19. Did the participant remove the accelerometer (2nd time)?

Yes.....

No → **Save and close form**

20. Time/date accelerometer removed (2nd time):

a. Time accelerometer removed (2nd time): :
h h m m

b. Date accelerometer removed: / /
M M D D Y Y Y Y

21. Time/date accelerometer replaced (2nd time):

a. Time accelerometer replaced (2nd time): :
h h m m

b. Date accelerometer replaced: / /
M M D D Y Y Y Y

22. Reason for removal (2nd time):

23. Did the participant remove the accelerometer (3rd time)?

Yes.....

No → **Save and close form**

24. Time/date accelerometer removed (3rd time):

a. Time accelerometer removed (3rd time): :
h h m m

b. Date accelerometer removed: / /
M M D D Y Y Y Y

25. Time/date accelerometer replaced (3rd time):

a. Time accelerometer replaced (3rd time): :
h h m m

b. Date accelerometer replaced: / /
M M D D Y Y Y Y

26. Reason for removal (3rd time):
