



INSTRUCTIONS FOR ADDITIONAL DE NOVO INFORMATION FORM (ADI)

I. General Instructions

Collect the Additional De Novo Information (ADI) on **de novo participants** only at the baseline visit.

II. Detailed instructions for each item

0a. Enter the date the form was completed.

0b. Enter staff ID of the person who administered the form

A. Recruitment

0c. Select the primary method through which the participant heard about the ACHIEVE study. If there is more than one correct response, then the first way in which the participant heard about the ACHIEVE study should be selected

B. Consent Status

Each question in this section has three possible responses “Agree”, “do NOT agree”, and “Not applicable to site consent form”. QxQ instructions for completing this section differ between sites due to site specific IRB approved consent forms. Please follow the instructions for your site below.

Forsyth

The following instructions correspond to:

- *Version 3, 10.05.17*

If you are using a different consent version please review the documented consent changes (if you do not have these please ask your site coordinator for them) and inform ARIC Help (arichelp@unc.edu) of any necessary updates to this QxQ.

0d. Enter the response from consent form question **1 (page 18)**.

0e. Enter response from consent form question **2 (page 18)**.

0f. Enter response from consent form question **3 (page 18)**.

0g. Enter response from consent form question **4 (page 19)**.

- 0h. Enter response from consent form question **5 (page 19)**.
- 0i. Enter the response from consent form question **6 (page 19)**.
- 0j. Enter the response from consent form question **8 (page 19)**.

Jackson

The following instructions correspond to:

- *Version 1.0. Version date: February 8 2018.*

If you are using a different consent version please review the documented consent changes (if you do not have these please ask your site coordinator for them) and inform ARIC Help (arichelp@unc.edu) of any necessary updates to this QxQ.

- 0d. Enter the response from consent form question **1 (page 10)**.
- 0e. Enter response from consent form *addendum* question **1 (page 12)**.
- 0f. Enter response from consent form *addendum* question **1 (page 12)**.
- 0g. Enter response from consent form *addendum* question **2 (page 13)**.
- 0h. Enter response from consent form *addendum* question **3 (page 13)**.
- 0i. Enter the response from consent form *addendum* question **4 (page 14)**
- 0j. Enter the response from consent form question **3 (page 10)**.

Minnesota

The following instructions correspond to:

- *Main Consent Form, De Novo participant. Version date: 02-13-2018*

If you are using a different consent version please review the documented consent changes (if you do not have these please ask your site coordinator for them) and inform ARIC Help (arichelp@unc.edu) of any necessary updates to this QxQ.

- 0d. Select "Not applicable to site consent form".
- 0e. Enter response from **page 5 Box 1**.
- 0f. Enter response from **page 5 Box 2**.
- 0g. Enter response from **page 6 Box 1**.
- 0h. Enter response from **page 7 Box 1**.
- 0i. Enter response from **page 7 Box 2**.

Oj. Enter response from **page 8 Box 1**.

Washington County

The following instructions correspond to:

- *Main Study Consent Form B (de novo) Version date: December 21 2017.*

If you are using a different consent version please review the documented consent changes (if you do not have these please ask your site coordinator for them) and inform ARIC Help (arichelp@unc.edu) of any necessary updates to this QxQ.

Od. Enter the response from consent form question **1 (page 10)**.

Oe. Enter response from consent form question **2 (page 10)**.

Of. Enter response from consent form question **3 (page 10)**.

Og. Enter response from consent form question **4 (page 11)**.

Oh. Enter response from consent form question **5 (page 11)**.

Oi. Enter the response from consent form question **6 (page 11)**.

Oj. Enter the response from consent form question **8/9 (page 12)**.

C. Measured Height

1. Record height in centimeters. Round to the nearest centimeter.

IV. Physician Information

The physician listed in this section may receive participant's study results if the participant agrees.

2a-2b. Enter physician first and last name

3a-3f. Enter mailing address of physician.