

Instructions: The purpose of this form is to acknowledge receipt of and document notification of local and central alerts that occur as a result of the exam visit, as well as document distribution of results to the participant. 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 GOTOITEM 6
2.	Seated blood pressure alert: date notified
3.	CES-D Depression alert: date notified
4.	Otoscopy alert: date notified
5.	Falls risk alert: date notified
	Month Day Year
6.	Was a copy of the Exit Interview results report provided to the participant? Yes No
7.	
8.	Date neurocognitive status letter sent to the participant:
В.	EXTERNAL ALERTS
9.	Alert code: 9a. Date notified: Month Day Year
10.	Alert code: 10a. Date notified: Month Day Year
11.	Alert code: 11a. Date notified: Month Day Year



ALERT CODES:

- CAC CT: Alert from CT scan reading center
- ECH Echo: Alert from Echocardiography Alerts Notification Form (ECA)
- LGU Lab: Glucose
- LSC Lab: Serum Creatinine
- LTG Lab: Triglycerides
- LAC Lab: Albumin:creatinine ratio
- LGF Lab: eGFR
- LSP Lab: Serum potassium
- LHG Lab: Hemoglobin
- MRL MRI: Alert from local radiologist
- MRB MRI: Alert from brain MRI reading center
- MRV MRI: Alert from vascular MRI reading center
- Z1a Ziopatch: Wide QRS tachycardia >120 for >30 secs
- Z1b Ziopatch: Complete heart block
- Z1c Ziopatch: 2nd degree AV Block, Mobitz II
- Z1d Ziopatch: Pause > 6 seconds
- Z1e Ziopatch: Bradycardia <40 bpm for > 30 seconds
- Z1f Ziopatch: Afib with average HR <40bpm or >180 bpm for 60 seconds
- Z1g Ziopatch: Narrow QRS tachycardia >180 bpm for 60 seconds

C. RESULTS REPORTING



TYPE OF RESULTS:

- A Diabetes Lab
- B Accelerometer
- C Ziopatch
- D Lipid Lab
- E MRI
- F PET
- G Gait Mat
- H CT
- I Echo
- J PYP
- к ОН
- L ABPM
- M CGM
- N Audiology
- O Peripheral Neuropathy



INSTRUCTIONS FOR RESULTS AND ALERT REPORTING FORM (RAR)

I. General Instructions

The results and alerts reporting form is designed to track the date when participants were notified of any alert value as well as track when study results were reported to participants.

Notifications of alert values can occur under different circumstances:

- While the participant is at the field center (e.g., blood pressure, depression and otoscopy).
- Urgent, or expedited, alerts may be communicated to the field center from a central reading center when time is of the essence and waiting for the results to be reported to the ARIC CC is not timely enough
- Alerts that are processed through the ARIC CC from a reading center or lab will show up in the 'Alerts report' on CDART until the RAR form indicates that the alert has been reported.

The Alert Report should be run **daily** by the data manager. All new alerts that show up in the report should be processed and resolved in a timely manner. Sometimes a phone call to the participant is the mechanism for reporting. Other times mailing the Summary of Results report that includes the alert value(s) is the appropriate mechanism. In other instances, the proxy or even the physician, when the participant is unreachable, is the person notified.

The visit 'Alerts Report' and ancillary studies 'Alerts Report' in CDART will list all unreported alerts, and the corresponding alert code for each one. Data managers will also have the ability to run the Alerts Report for all alerts (resolved or not) for a given participant, in case they want to see when alert values were reported to the participant.

Field center staff are responsible for notifying the participant and, as determined from the participant's informed consent, the participant's physician. (Notification of alerts requires that the field center staff member review the instructions for reporting study results provided by the participant in his/her informed consent.) The level of the alert determines the length of time allowed to notify the participant and/or their physician – specific timelines for specific alerts are given in Manual 2. If the participant and/or physician could not be contacted within the time frame specified for an alert value, the Field Center PI must be notified on the day of expiration of that notification time window.

Some study participants do not identify a personal physician or another provider of medical care. Field centers keep a list of local physicians whom participants can call. The local medical society is typically a good source for such a list and one that is acceptable to practitioners in the community.

This form may be accessed more than once, since alert value information may be obtained from the central laboratories or the study reading centers at different times. Similarly, it is possible that notification may take place on a different date than the date of receipt of the alert notification at the field center. Only one occurrence of this form is allowed, so updates are made to a single record in CDART.

The study participant does not need to be present when this form is completed. The information required is gathered at the time of the study visit or after laboratory tests have been completed or the results of other components processed by reading centers.

Alerts will continue to appear in the CDART Alerts Report until the participant and/or physician is notified and the notification details (Alert Code and Date Participant Notified) are entered in this form. Consequently, field center staff should make every effort to notify participants and/or physicians as soon as possible.

II. Detailed Instructions for Each Item

The RAR is organized into three sections:

A: Visit Exit Interview – alerts and reporting. This section denotes alerts that are known in realtime as data are collected during the visit. If there is an alert value for blood pressure or depression, the alert will show up in the Alert Report once the values have been keyed into CDART (SBP, CES). The Alert Report should be run at the end of the visit. These alerts will also be displayed in the Participant Preparation Report. These alerts reported to the participant while still present. The date the participant is notified is recorded. Most often this will be the date of the visit, but the system will allow for later dates. For ACHIEVE participants who are not receiving neurocognitive results, leave RAR item 8 blank and mark the field status as missing.

B: External Alerts – select from the Alert Codes found in the dropdown list.

C: Results Reporting – Whenever possible, it is preferable (mainly from an operational standpoint) to send the Summary of Results one time with complete results. This means ensuring that all of the lab values are available, any other results (e.g., CGM, accelerometry) are available, and other visit information is available and complete in the Summary of Results report. The Results Status Report is available in CDART to show what results are ready.

Because there may be additional studies that are added after the start of the visit, the date that each set of results is reported to the participant must be recorded. Often, this will be the same date; which is the date the full report is available and compiled.