



RECRUITMENT TRACKING AND SCHEDULING FORM

ID NUMBER:

FORM CODE:

DATE: 09/01/2011
Version 2.0

ADMINISTRATIVE INFORMATION

0a. Completion Date: / /
Month Day Year

0b. Staff ID:

Instructions: This form is completed by the Annual Follow-up Interviewers in conjunction with the Recruiters (if separate staff) to track and document the status of each attempt to recruit the ARIC participants for visit 5 exam. **It is to be completed for ALL participants who are eligible for visit 5 exam once contact is made.** Only one form per participant is allowed. This form is opened prior to scheduling the participant.

Section A. Completed by the AFU Interviewer

- Is there evidence that the participant is interested in visit 5 and needs to be scheduled for stage 1?
 - Yes
 - No → **Administer the Telephone Interview for Cognitive Status for those who refuse.**
Note – question #1 identifies potential participants when the AFU interviewer turns over scheduling to a recruiter for a later call.
- Contact for scheduling:
 - Participant
 - Other; Specify Name: _____
- What type of exam is being scheduled? (select one)
 - Clinic Exam – Full
 - Clinic Exam – Abbreviated
 - Home
 - Long Term Care Facility [LTCF]

Section B. Completed by the Stage 1 Recruiter or AFU Interviewer

- Is a proxy necessary for the exam?
 - Yes → **Go to item 5**
 - No → **Go to item 5**
 - Requires MMSE confirmation → **Open the 6-item MMSE**
- Record the number of correct answers for the orientation items (1-3) of the 6-item MMSE:

If 4=R and 4a is < 2, then an exam proxy is necessary. Otherwise, an exam proxy is not necessary.
- Record the number of correct answers for the memory items (4-6) of the 6-item MMSE:

If 4=R and 4b is < 2, then an informant is necessary. Otherwise, an informant is not necessary.
- Does the participant have any special needs to be considered when scheduling the exam?
 - Yes, Specify: _____
 - No

(Note: A response of 'C' to Result Code should lead the recruiter to the TICS form.)

Date of Recruitment Attempt for Stage 1	Participant Result Code*	Proxy Result Code^	Interviewer Code
6.			
7.			
8.			
9.			
10.			
11.			
12.			
13.			
14.			
15.			

RESULT CODES

- *^A - Contacted and scheduled
 - *^B - Contacted and need to schedule
 - *^C - Contacted, refused to participate
 - *D - Reported alive, will continue to attempt contact
 - *E - Reported alive, contact not possible this year
 - *^F - Cancelled
 - *^G - No-show
- } Use these codes if a proxy is needed.
- } Use these codes if a proxy is needed.

16a. Stage 1 appointment date: / /

Month Day Year

Section C. Completed by the Stage 2 Recruiter

Date of Recruitment Attempt for Stage 2	Participant Result Code*	Proxy Result Code^	Interviewer Code
17.			
18.			
19.			
20.			
21.			
22.			
23.			
24.			
25.			
26.			

RESULT CODES

- *^A - Contacted and scheduled
 - *^B - Contacted and need to schedule
 - *^C - Contacted, refused to participate
 - *D - Reported alive, will continue to attempt contact
 - *E - Reported alive, contact not possible this year
 - *^F - Cancelled
 - *^G - No-show
- } Use these codes if a proxy is needed.
- } Use these codes if a proxy is needed.

27a. Stage 2 appointment date: / /

Month Day Year

Section D. Completed by the Stage 3 Recruiter

Date of Recruitment Attempt for Stage 3	Participant Result Code*	Proxy Result Code^	Interviewer Code
28.			
29.			
30.			
31.			
32.			
33.			
34.			
35.			
36.			
37.			

RESULT CODES

- *^A - Contacted and scheduled
 - *^B - Contacted and need to schedule
 - *^C - Contacted, refused to participate
 - *D - Reported alive, will continue to attempt contact
 - *E - Reported alive, contact not possible this year
 - *^F - Cancelled
 - *^G - No-show
- } Use these codes if a proxy is needed.
- } Use these codes if a proxy is needed.

38. Stage 3 appointment date: / /

Month Day Year



RECRUITMENT TRACKING AND SCHEDULING FORM

Appendix 1

Basic Recruitment Scripts

A. Initial Script	<p>“Next, I want to tell you about a new ARIC examination. As we mentioned in the letter and DVD we mailed to you, we are now recruiting and scheduling people to be part of this new exam focused on heart disease and memory.”</p> <p>“This ARIC clinic visit will be similar to previous visits, and will take place [SITE LOCATION INFORMATION HERE]. We expect it will take 6 to 7 hours, beginning in the morning. You will need to fast 8 hours unless you have a medical reason to not fast. We will reimburse you for your travel, or we can provide taxi services. In addition, we will give you some monetary compensation for your participation in this visit. Our appointment times are at [TIMES]. Is there a day or time that would be best for you?”</p>	→	Pick next script from B to G, below
B. Schedule later	Ad lib	→	Thank
C. Another clinic	Ad lib	→	Thank
D. Clinic appointment	“We will be mailing instructions to you. We also will give you a reminder call the day before your scheduled visit.”	→	Do Special Needs
E. Abbrev Clinic	“We understand that 6 - 7 hours is a long visit. Would you be willing to complete an abbreviated clinic visit which will last approximately 3 hours?”	Yes → Later → No →	D (above) B (below) F or G
F. Home/LTC	“Even if you cannot or prefer not to participate in the clinic exam, we would be happy to come to your home (or current residence [if at LTCF]) and conduct an abbreviated exam there.”	Yes → Later → No →	Do Special Needs B G

G. Refusal	<p>“We are sorry that you cannot participate in this new exam. However, we would like to ask you just a few additional questions now to assess your memory. These questions will take approximately 10 minutes and will provide us with valuable information in understanding the risk factors for memory decline in the general population. Would you like to complete the questions now or would you rather make an appointment to answer the questions at another time?”</p>	Yes →	TICS, close
		Later →	Arrange
		No →	Close

Special Needs/Safety Scripts after Appointment Made

Clinic	6-item screener if needed		
	“To help us prepare for your visit to the ARIC center, do you need assistance in arranging for transportation?”	Yes →	Arrange
	“Do you need any kind of assistance reading, hearing questions, walking or in getting on an examination table?”	Yes →	RTS-5

Home	6-item screener if needed		
	“To help us prepare for our visit to your home, do you have a quiet room that has a table and at least two chairs that we can meet in?”		
	“Will there be anyone there with you during our visit?”	Yes →	“How many persons?” “Would that/those person(s) be a spouse?” “Caretaker?” “Your proxy?” “Other?”
	““Would any person be dependent upon you for their care during our visit?”	Yes →	“Would someone else be able to provide their care while we are in your home?”
	“Do you have pets?”	Yes →	“So that we aren’t interrupted, would it be possible to put your pets in another room while we complete the home visit?”

LTC	6-item screener if needed	
	“To help us prepare for our visit to your home, do you have a quiet room that has a table and at least two chairs that we can meet in?”	
	“Will there be anyone there with you during our visit?”	Yes → “How many persons?” “Would that/those person(s) be a spouse?” “Caretaker?” “Your proxy?” “Other?”
	““Would any person be dependent upon you for their care?”	Yes → “Would someone else be able to provide their care while we are in your residence?”

6-Item Screener

“Before we continue, I would like to ask you some questions that will help us to decide the best way to conduct the new ARIC visit. Specifically, I will ask you some questions that will require memory and concentration. I am going to name three objects. Please wait until I say all three words, then repeat them. Remember what they are because I am going to ask you to name them again in a few minutes. Please repeat these words for me: BALL—FLAG—TREE.”

(Interviewer may repeat names 3 times if necessary but repetition not scored.)

Did patient correctly repeat all three words?	Yes	No
	Incorrect	Correct
1. “What year is this?”	0	1
2. “What month is this?”	0	1
3. “What is the day of the week?”	0	1

“What were the three objects I asked you to remember?”

4. Ball	0	1
5. Flag	0	1
6. Tree	0	1

Record answers to the 6-item screener in form RTS. If score < 2 in questions 1-3, recruitment of a proxy is required. If score < 2 in memory questions (questions 4-6), recruitment of an informant is required.

A response of “I don’t know” is scored as “Incorrect”. A self-corrected response is scored as “Correct”. If the participant is unable to complete the screener due to disability or refusal, attempts will be made to recruit an exam proxy and/or informant.

Proxy and Informant Request

“We think that it might be helpful to have someone [come with you to the clinic/be with you while we visit you at home]. This person could assist you in making decisions about participation in the study [if recruiting proxy] and could help in completing questionnaires and answering questions [if recruiting informant]. Do you agree to have someone [come with you to the clinic/be with you during the exam]?”

If YES:

“This person should be someone who can provide consent for your participation in case you do not feel comfortable providing this consent without additional advice [if recruiting proxy] and who knows you well enough to help you answering the study questionnaires [if recruiting informant]. Who would this person be?”

Record name, address, phone number.

“We ask you to tell [PROXY’S OR INFORMANT’S NAME] about your decision. In the next few days we will also contact [HIM/HER] to provide information about the exam.”

If NO:

“Having a trusted someone would help to make decisions about participation in the study [if recruiting proxy] and to provide accurate information during the study exam [if recruiting informant].

If the participant still does not agree, move forward with scheduling unless there are serious concerns about the ability of the participant to make informed decisions about participation. Consult your supervisor or ARIC Principal Investigator if need be.

Converting Reluctant Subjects

“Is there a specific reason you are not willing to participate in this ARIC visit?”
 [Do not read responses unless the participant does not offer a reason.]

A. Too busy?	“As part of the exam, you would receive a number of different tests including an electrocardiogram and a comprehensive cognitive assessment.” If participant still does not agree to complete full exam, offer abbreviated exam.
B. Exam requires too much time?	“As part of the exam, you would receive a number of different tests including an electrocardiogram and a comprehensive cognitive assessment.” If participant still does not agree to complete full exam, offer abbreviated exam.
C. Not interested?	Highlight the value of the knowledge that will be gained from the study. Try to work out a way that it will work.
D. Fearful of study procedures?	“All the examinations done by ARIC are considered safe. Some tests can cause minor discomfort, but you can always withdraw from the study at any moment without negative consequences. Do you have any additional concern?” Answer questions from the participants.
E. Because of their, or a family member’s health?	Offer home visit.
F. Unable to travel?	Offer home visit.
G. Distance	“We might schedule the appointment at some other time, before the end of the study, when you are in the area. Do you expect to come back to the area before June 2013?” If YES, try to schedule a follow-up call closer to the date or schedule visit. If NOT, try to negotiate travel arrangements. Some field centers have limited funds for airfare. Another possibility is a visit to another ARIC field center.
H. Another reason?	Try to work out a way that it will work.



INSTRUCTIONS FOR THE RECRUITMENT TRACKING AND SCHEDULING (RTS) FORM (v 2.0)

I. General Instructions

The Recruitment Tracking and Scheduling Form is completed by the Annual Follow-Up (AFU) Interviewer in conjunction with the Recruiters (if separate staff) to track and document the status of each attempt to schedule the ARIC participants for visit 5 exam. The form is opened and initiated when the recruitment process begins for a cohort participant. Ultimately, it is to be completed for ALL ARIC cohort participants who are eligible for visit 5 exam. Only one record per eligible participant is expected for this form. An RTS form is not completed for deceased participants.

The purpose of the RTS is to allow field centers to track the scheduling status of eligible participants. It is not intended to identify those who need to be recruited (the CC provides those lists), but instead to track the scheduling status of participants already identified. This form will serve as the basis for the real-time DMS Scheduling Report. That report will provide real-time information on recruited, eligible participants (Question 1) but who have not yet completed Stage 1 (or Stage 2 or Stage 3 – as applicable) of the exam and who have not refused to participate. Each recruited participant's last status will print in the report.

The recruitment and scheduling calls for visit 5 exam can be made as part of the AFU call or performed separately. Only stage 1 can be scheduled during the AFU call. Recruitment to and scheduling of stages 2 and 3 are completed by clinic staff at the end of stage 1.

This form is updated as different steps to the recruitment process occur.

II. Detailed Instructions for Each Item

- 0a. Enter the date on which this form was last updated. Enter the date using either the calendar function or by keying the date with MM/DD/YYYY format. Leading zeroes are not necessary in the DMS, but are acceptable. For example, May 3, 2011, would be entered as:

0	5	/	0	3	/	2	0	1	1
---	---	---	---	---	---	---	---	---	---

- 0b. The person at the clinic who has last updated this form must enter his/her code number in the boxes provided.

Section A. Completed by the AFU Interviewer

1. Indicate whether there is evidence that the participant is (or might be) interested in visit 5 and needs to be scheduled for the exam. This item identifies potential participants when the AFU interviewer turns over scheduling to a recruiter for a later call. [Follow the script in Appendix 2 of the Recruitment MOP].

If the participant or contact person expresses interest in the exam, answer "Yes" and go on to question 2. Even if the participant MIGHT be interested, but was not spoken to directly, answer "Yes" to this question and continue to question 2.

If the participant refused to participate in the exam, answer "No". Ask the participant if he or she would be willing to answer just a few more questions on the Telephone Interview for Cognitive Status. Save and close the form and open the Telephone Interview for Cognitive Status form in the DMS.

If the participant expressed some interest but later on refuses to participate (code C in questions 6-15, see below), the answer to item 1 should still be "Yes", and the final refusal to

participate should be tracked in questions 6-15.

2. Select “a” for Item 2 if the contact for scheduling is the participant or “b” if other. If the answer is “b”, please specify the name of the contact.
3. Determine and record the correct type of exam that is being scheduled. A full complete clinic visit is strongly preferred. If the participant is unwilling or unable to participate in the complete exam, but is able to come to the exam site, offer the possibility of conducting an abbreviated exam. If this is not possible, suggest the option of having a shorter, home visit. Also, for the participant who is clearly unable to come to the clinic (for example, those in LTCF), the home or LTCF visit will be offered. If the participant requires a home/LTCF exam, scheduling the exam directly with the participant may not be possible. Instead, contact the participant’s proxy and request authorization to conduct the exam.

In the case of participants offered a Mini Exam due to infirmity or inability to schedule a more extensive exam, record as “Clinic Exam – Abbreviated” when it is conducted in the clinic. If the exam is conducted at home or at a long term care facility, the corresponding response is recorded in the RTS.

Section B. Completed by the Stage 1 Recruiter or AFU Interviewer

4. Record “Yes” if proxy is considered necessary for the exam by the recruiter (for example, the participant is not able to provide informed consent or accurate information) or if the participant is already established as needing a proxy by the AFU interviewer (for example, if the participant already required a proxy for AFU calls or a relative indicates that the participant is unable to collaborate). Record “No” if the participant has agreed to a clinic exam and the recruiter is reasonably certain that proxy is not necessary for the exam. Record “Requires MMSE confirmation” if the participant has agreed to a clinic exam AND there are doubts about his/her capacity to provide informed consent or accurate information, OR the participant has agreed to home/LTCF exam and the need of proxy is not already established. A response of “Requires MMSE confirmation” will lead the recruiter to the 6-item Cognitive Screener, the outcome of which will be used to determine whether the participant has the capacity to provide informed consent, which would require recruitment of a proxy, and whether he/she has memory problems, which would require the recruitment of an informant. The 6-item screener should be introduced in a way that is not discourteous to the participant.

The script to follow is below. Record the scores in items 4a and 4b appropriately.

“Before we continue, I would like to ask you some questions that will help us to decide the best way to conduct the new ARIC visit. Specifically, I will ask you to use your memory. I am going to name three objects. Please wait until I say all three words, then repeat them. Remember what they are because I am going to ask you to name them again in a few minutes. Please repeat these words for me:”

“BALL”

“FLAG”

“TREE”

(Interviewer may repeat the words as many as 3 times if necessary)

	Correct	Incorrect
1. “What year is this?”	1	0
2. “What month is this?”	1	0
3. “What is the day of the week?”	1	0

“What were the three objects I asked you to remember?”

	Correct	Incorrect
4. “BALL”	1	0
5. “FLAG”	1	0
6. “TREE”	1	0

- 4a. Record the number of correct answers for the orientation items (1-3) of the 6-item MMSE. If the number correct is smaller than 2, recruitment of an exam proxy is necessary. Otherwise, an exam proxy is not necessary.
- 4b. Record the number of correct answers for the memory items (4-6) of the 6-item MMSE. If the number correct is smaller than 2, recruitment of an informant is necessary. Otherwise, an informant is not necessary.

An exam proxy is a person who can provide informed consent for ARIC participants incapacitated to do so (for example, if they are demented). The proxy has to have the legal authority to make this decision for the participant.

An informant is a person who can provide adequate information on behaviors and functional ability of the ARIC participant. For most participants, the exam proxy and the informant are the same person, though this is not required.

If recruitment of an exam proxy is necessary, request contact information for the proxy, include it in Contact Information Update (CIU) form, ask the ARIC participant to communicate this information to his/her proxy, and perform proxy/informant recruitment a few days after the participant recruitment.

5. Record “Y” if the participant has any special needs to be considered when scheduling the exam, and specify the special needs. Otherwise, record “N”.
- 6-15. For each recruitment attempt for Stage 1, regardless of whether successful or not, use a separate line in the table to record the date on which the recruitment call is made in MM/DD/YYYY format, the participant result code or the proxy result code (if the recruitment scheduling is occurring with the proxy) and the code number of the staff who keys the data. A maximum of 10 recruitment attempts for Stage 1 are allowed to be recorded on this form. The acceptable participant result codes are A, B, C, D, E, F and G. The acceptable proxy result codes are A, B, C, F and G only. A response of “C” to result code requires the recruiter to administer the TICS form to the participant.

If an appointment is scheduled, record the expected appointment date in item 16a (“Stage 1 appointment date”, see below).

If an appointment is canceled and then rescheduled, record the initial appointment in the first row with the initial recruitment date (Row 6 for example), using code 'A= Contacted and Scheduled' for the result code. Then, record the date in which the appointment was cancelled using code 'F=Cancelled' in the next row (Row 7 for example). Finally, record the rescheduled appointment in the next row with the rescheduled recruitment date (Row 8 for example), again using 'A= Contacted and Scheduled' for the result code, and including the new appointment date in item 16a. The process for recording 'no-shows' (missed appointments) is similar, but instead of using code 'F=Cancelled', the staff recording the missed appointment should use code 'G=No-show'.

If more than 10 recruitment attempts for Stage 1 need to be recorded, please open a new RTS form, enter items 0a and 0b and start from item 6 to record the extra attempts. You don't need to re-enter items 1-5.

- 16a. Once an appointment has been scheduled for Stage 1, record the appointment date in this item using the format MM/DD/YYYY. If the participant cancels or misses this appointment and a new appointment date is arranged, record the new date in this item. If a new appointment is not scheduled, do not modify the original date recorded in this item. The interviewer code should be the staff code of the person who keys the data.

There are three scenarios provided at the end of QxQ for your reference.

Section C. Completed by the Stage 2 Recruiter

The Scheduling Report (available in DMS) lists all participants who are eligible for Stage 2 based upon the responses in items 12 and 13 of the NSS [NCS Stage 2/3 Selection] form. All participants selected for Stage 2 require an informant for the Clinical Dementia Rating. Stage 2 does not require a separate consent form for the participant.

- 17-26 For each recruitment attempt for Stage 2, regardless of whether successful or not, use a separate line in the table to record the date on which the recruitment call is made in MM/DD/YYYY format, the participant result code or the proxy result code (if the recruitment scheduling is occurring with the proxy) and the code number of the staff who keys the data. A maximum of 10 recruitment attempts for Stage 2 are allowed to be recorded on this form. The acceptable participant result codes are A, B, C, D, E, F and G. The acceptable proxy result codes are A, B, C, F and G only.

If an appointment is scheduled, record the expected appointment date in item 27a ("Stage 2 appointment date", see below).

If an appointment is canceled and then rescheduled, record the initial appointment in the first row with the initial recruitment date (Row 6 for example), using code 'A= Contacted and Scheduled' for the result code. Then, record the date in which the appointment was cancelled using code 'F=Cancelled' in the next row (Row 7 for example). Finally, record the rescheduled appointment in the next row with the rescheduled recruitment date (Row 8 for example), again using 'A= Contacted and Scheduled' for the result code, and including the new appointment date in item 27a. The process for recording 'no-shows' (missed appointments) is similar, but instead of using code 'F=Cancelled', the staff recording the missed appointment should use code 'G=No-show'.

If more than 10 recruitment attempts for Stage 2 need to be recorded, please open a new RTS form, enter items 0a and 0b and start from item 16 to record the extra attempts. You don't need to re-enter items 1-16a.

- 27a. Once an appointment has been scheduled for Stage 2, record the appointment date in this item using the format MM/DD/YYYY. If the participant cancels or misses this appointment and a new appointment date is arranged, record the new date in this item. If a new appointment is not scheduled, do not modify the original date recorded in this item.

There are three scenarios provided at the end of QxQ for your reference. The scenarios are for Stage 1. The same rules apply for Stage 2.

Section D. Completed by the Stage 3 Recruiter

The Scheduling Report (available in DMS) lists all participants who are eligible for Stage 3 (the MRI) based upon the responses in items 12 and 13 of the NSS [NCS Stage 2/3 Selection] form. A separate MRI consent form for MRI is required to be signed by the participant selected for Stage 3. For participant's requiring an exam proxy, the MRI consent form is signed by the exam proxy.

- 28-37. For each recruitment attempt for Stage 3, regardless of whether successful or not, use a separate line in the table to record the date on which the recruitment call is made in MM/DD/YYYY format, the participant result code or the proxy result code (if the recruitment scheduling is occurring with the proxy) and the code number of the staff who keys the data. A maximum of 10 recruitment attempts for Stage 3 are allowed to be recorded on this form. The acceptable participant result codes are A, B, C, D,E, F and G. The acceptable proxy result codes are A, B, C, F and G only.

If an appointment is scheduled, record the expected appointment date in item 38 ("Stage 3 appointment date", see below).

If an appointment is canceled and then rescheduled, record the initial appointment in the first row with the initial recruitment date (Row 6 for example), using code 'A= Contacted and Scheduled' for the result code. Then, record the date in which the appointment was cancelled using code 'F=Cancelled' in the next row (Row 7 for example). Finally, record the rescheduled appointment in the next row with the rescheduled recruitment date (Row 8 for example), again using 'A= Contacted and Scheduled' for the result code, and including the new appointment date in item 38. The process for recording 'no-shows' (missed appointments) is similar, but instead of using code 'F=Cancelled', the staff recording the missed appointment should use code 'G=No-show'.

In the event that a participant is ineligible for the MRI, it is essential that the reason for ineligibility is recorded in the MEF form (or PRO for some special cases). These ineligible participants will not be in the Stage 3 scheduling report. If desired, the last RTS Participant Result Code in Section D can be set to the special missing value of 'Not Applicable' by using clicking the >> beside the empty result code box. The Date and Interviewer Code are from the last contact with the participant.

If more than 10 recruitment attempts for Stage 3 need to be recorded, please open a new RTS form, enter items 0a and 0b and start from item 27 to record the extra attempts. You don't need to re-enter items 1-27a.

38. Once an appointment has been scheduled for Stage 3, record the appointment date in this item using the format MM/DD/YYYY. If the participant cancels or misses this appointment and a new appointment date is arranged, record the new date in this item. If a new appointment is not scheduled, do not modify the original date recorded in this item.

There are three scenarios provided at the end of the QxQ for your reference. The scenarios are for Stage 1. The same rules apply to Stages 2 and 3.

Scenario A:

- 1) On 9/11/2011, Mr. Smith is scheduled for an appointment on 10/1/2011. Please enter row 6 as below and code stage 1 appointment date (item 15a) as 10/1/2011.
- 2) On 9/23/2011, Mr. Smith asked for the appointment to be rescheduled to 10/15/2011. Please enter rows 7 and 8 as below and update item 15a to be 10/15/2011.
- 3) Mr. Smith comes in for his visit on 10/15/2011. No action needed in the RTS form

Date of Recruitment Attempt for Stage 1	Participant Result Code*	Proxy Result Code**	Interviewer Code
6. 9/11/2011	A		
7. 9/23/2011	F		
8. 9/23/2011	A		

Scenario B:

- 1) On 10/3/2011, Mrs. Penguin is scheduled for an appointment on 10/30/2011. Please enter row 6 as below and code stage 1 appointment date (item 15a) as 10/30/2011.
- 2) On the same day, Mrs. Penguin would like to cancel the scheduled appointment. She would like to be rescheduled at a later point. Please enter row 7 as below and leave item 15a as 10/30/2011.
- 3) On 10/7/2011, Mrs. Penguin is contacted and her appointment is rescheduled to 11/15/2011. Please enter row 8 as below and update item 15a to be 11/15/2011.
- 4) Mrs. Penguin does not show up on 11/15/2011 for her appointment. Please add row 9 as below and leave item 15a as 11/15/2011.
- 5) Mrs. Penguin is called on 11/16/2011 to reschedule. She agrees to come back on 12/02/2011. Please enter row 10 as below and update item 15a to be 12/02/2011.

Date of Recruitment Attempt for Stage 1	Participant Result Code*	Proxy Result Code**	Interviewer Code
6. 10/3/2011	A		
7. 10/3/2011	F		
8. 10/7/2011	A		
9. 11/15/2011	G		
10. 11/16/2011	A		

Scenario C:

- 1) On 11/1/2011, Mr. Kirk is scheduled for an appointment on 12/07/2011. Please enter row 6 as below and code Stage 1 appointment date (item 15a) as 12/07/2011.
- 2) On 11/2/2011, Mr. Kirk calls back to cancel the appointment and refuses to come in for the visit. Please enter rows 7 and 8 as below and leave item 15a as 12/07/2011.

Date of Recruitment Attempt for Stage 1	Participant Result Code*	Proxy Result Code**	Interviewer Code
6. 11/1/2011	A		
7. 11/2/2011	F		
8. 11/2/2011	C		

ARIC Visit 5 Recruitment Tracking and Scheduling Webinar
Version 2.0 of the RTS form – Tracking no-shows and Cancellations
Thursday, October 6, 2011 from 1:00-1:30 Eastern time

This webinar will cover two topics:

- When and how to key version 2.0 of the RTS form
- How to use the updated Scheduling report

These updates are based upon the request from NHLBI that as part of recruitment, field centers track 'no-shows' and 'cancellations' in the DMS, so that the CSCC can report on this information.

As you recall from the memo dated 9/14/2011 from Alvaro and Kim, field centers were asked to record no-shows and cancellations in the DMS. This was to be collected using RTS version 1.0 until the RTS version 2.0 was available. The RTS version 2.0 is available in the DMS starting Friday, 10/7/2011. I am assuming that this audience is familiar with the changes to the form and QxQ; today I am illustrating how to put those to use in the DMS.

RTS version 2.0

Currently, there are two possibilities:

- A) RTS form has not yet been keyed in DMS
- B) RTS version 1.0 exists in DMS

A) RTS form has not yet been keyed in DMS

ACTION: Key RTS version 2.0 into DMS (this is the default version)

B) RTS version 1.0 exists in DMS

There are four possible options for Scenario B:

1. Ppt has completed Stage 1 without any cancellations or no-shows. Continue to use existing RTS version 1.0 record for scheduling Stage 2 and Stage 3 (where applicable). If a no-show or cancellation occurs when scheduling Stage 2 or 3, enter a new, version 2.0 RTS and key items 1, 2, 3, 4 and then the Stage 2/Stage 3 scheduling sections. No need to re-key the Stage 1 scheduling information.
2. Ppt has completed Stage 1 but had at least one cancellation or no-show in the process – rekey the RTS version 1.0 into RTS version 2.0. Leave RTS version 1.0 in DMS.
3. Ppt has been scheduled for Stage 1. Continue to use existing RTS version 1.0 record for scheduling Stages 1, 2 and Stage 3. If a no-show or cancellation occurs when scheduling Stage 1, 2 or 3, enter a new, version 2.0 RTS and key **all** items.
4. Ppt has 'agreed' to participate but has not yet been scheduled, key those few items on the first and second tab into Version 2.0 and use Version 2.0 from that point forward.

Real-time DMS Scheduling Report

The Scheduling report in DMS has been updated to include both versions of the RTS form. Scheduling for Stage 1 is based upon eligible participants who have indicated interest in Visit 5 (item #1 of the RTS form). Scheduling for Stages 2 and 3 is based upon selection to Stages 2 and 3. Items 12 and 13 of the NSS form indicate whether or not a participant is scheduled for Stage 2 and/or 3. That information forms the basis for the Scheduling Report.