



# EYEDOC RECRUITMENT TRACKING AND SCHEDULING FORM



ID NUMBER:

FORM CODE:  E  R  E

DATE: 03/01/2017  
Version 1.0

## ADMINISTRATIVE INFORMATION

0a. Completion Date:   /        
Month Day Year

0b. Staff ID:

0c. Participant agreed to recruitment?

1  Yes

0  No → **END OF FORM**

## Section A. Recruitment attempts (Completed by the ARIC/EyeDOC Interviewer or Recruiter)

Date of Recruitment Attempt	a. Result Code	b. Reason for Refusal*	c. Staff code	d. Participant or Proxy? (Specify)	e. Re-contact Notes
<i>i.</i>					
<i>ii.</i>					
<i>iii.</i>					
<i>iv.</i>					
<i>v.</i>					
<i>vi.</i>					
<i>vii.</i>					
<i>viii.</i>					
<i>ix.</i>					
<i>x.</i>					

**RESULT CODE**

- 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
- H - Lost to follow-up
- I - Hard Refusal – contact not attempted
- J - Hard Refusal – no response to recruitment attempts

**REASON FOR REFUSAL\***

- A - Too busy/ too many tests and medical appointments already
- B - Exam too long/ requires too much
- C - Not interested/ just doesn't want to
- D - Fearful of study procedures
- E - Family responsibilities/ caring for relatives
- F - Unable to travel
- G - Distance/ living out of area
- H - Too ill/ too old/ disabled
- I - No proxy
- J - Other: \_\_\_\_\_

**Section B. Recruitment Result (Completed by the ARIC/EyeDOC Interviewer)**

1. Did participant agree to the study?

1  Yes

0  No → **END OF FORM**

**Section C. Appointment (Completed by the ARIC/EyeDOC Interviewer)**

2a. Appointment date:

//  
Month Day Year

2b. Appointment time:

:  
Hour Min

**Section D. Consent**

3. Date of informed consent:

//  
Month Day Year