Instructions: This form is used by the Parkinson’s disease experts who are reviewing ARIC historical data to adjudicate if an ARIC participant may have Parkinson’s disease. See the detailed QxQ instructions for completion of the PDA form.

1. Record which sources positively identified PD. (Check Y/N/U in items 1a-1d based on evidence in the participant report.)

<table>
<thead>
<tr>
<th>Source</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>Self-report</td>
<td>1a</td>
</tr>
<tr>
<td>Medication</td>
<td>1b</td>
</tr>
<tr>
<td>Hospitalization discharge</td>
<td>1c</td>
</tr>
<tr>
<td>Death certificate</td>
<td>1d</td>
</tr>
</tbody>
</table>

2. Parkinson’s disease adjudication code .................................................................

3. How many independent sources indicate PD? ....................

4. Month of PD diagnosis..............................

5. Year of PD diagnosis..............................

6. PD diagnosis date documented?

   Yes, documented.................................
   No, estimated ......................................
   Unknown ...........................................

Date: 04/22/2024
Version 1.0
7. Adjudicator’s notes:

__________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________

8. Record which relevant diagnoses are documented. (Check Y/N/U in items 8a-8d based on evidence in the participant report.)

<table>
<thead>
<tr>
<th>Diagnosis</th>
<th>8a</th>
<th>8b</th>
<th>8c</th>
<th>8d</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lewy body dementia</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other dementias</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Restless leg syndrome</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other notable conditions</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Yes, documented …….Y
Not documented …….N
Unsure …….U

9. Adjudicator’s notes about other relevant diagnoses:

__________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________