



# INSTRUCTIONS FOR THE ORTHOSTATIC HYPOTENSION SYMPTOM QUESTIONNAIRE (OSQ) FORM

## I. General Instructions

The form is completed for all participants who agree to participate in the Orthostatic Hypotension ancillary study. This form should be completed before collecting the Orthostatic Hypotension Blood Pressure form. If the participant is not interested in participating in the OH protocol, do not collect the OSQ form and do not mark it as Permanently Missing; open the OBP form and select No for question 0c.

## II. Detailed Instructions for Each Item

- 0a. Enter the date on which the participant was seen in the clinic.
- 0b. Enter the staff ID for the person who completed this form.

### A. Symptom Assessment

- 1-5. Ask the participant whether they have experienced the listed symptoms (light-headedness, dizziness, fainting, black out, or imbalance) in the past 30 days during the process of standing up. Record the responses on a scale from 1 to 5, where 1 represents “never” and 5 represents “every time you stand without exception”.

### B. Fall History

- 6. Record whether the participant experienced a fall in the past year. If Yes, continue with item 7. If No, skip to item 8.
- 7. Record the date of the participant's first fall in item 7a1 and whether the fall resulted in a broken bone, an urgent care or emergency room visit, or hospitalization in item 7a2. If a participant had multiple falls, record the 10 most recent falls in items 7a-7j (i.e., 1<sup>st</sup> fall, 2<sup>nd</sup> fall, etc.).

If the participant is unsure of the exact date, probe for the approximate date or time of the month (e.g., early in the month, at/near the beginning of the month, late/late in the month, at/near the end of the month, around the middle of the month, etc.). If the participant reports an approximate date, record that date.

If the participant reports the fall was early in the month, record the date using the 1<sup>st</sup> day of the appropriate month (e.g., a participant says they experienced a fall in early April 2020 but are unsure of the exact date, record April 1, 2020). If they report the fall occurred late in the month, record the date using the 30<sup>th</sup> day of the month. For February, use the 28<sup>th</sup> day. If the participant says they experienced a fall around the middle of the month, record the date using the 15<sup>th</sup> day of the month. In these cases, always use either the 1<sup>st</sup>, 15<sup>th</sup>, or 30<sup>th</sup> (28<sup>th</sup> for February) day of the month.

If the participant reports the month they experienced the fall, but they cannot narrow it down (i.e., early, late, or middle of the month), record the date using the 15<sup>th</sup> day of the appropriate month.

In all cases, ensure a complete date is recorded. **Do not enter a partial date.**

8. Record whether the participant has broken a bone, visited an urgent care/emergency room, or been hospitalized because of a fall since turning 65. Save and close form.