



ACCELEROMETRY FORM

ID NUMBER:

FORM CODE:

DATE: 01/09/2020
Version 4.0

ADMINISTRATIVE INFORMATION

0a. Completion Date: / /
Month Day Year

0b. Staff ID:

0c. Was the log returned to the clinic?

Yes.....

No → **Go to item 12**

Instructions: This questionnaire is started when the accelerometer is given to the participant and completed when the accelerometer is returned to the clinic.

A. ACCELEROMETRY INITIATION

1. Accelerometer ID.....

2. Accelerometer serial number max length=80

3. Time/date accelerometer started:

a. Time accelerometer started: :
h h m m

b. Date accelerometer started: / /
M M D D Y Y Y Y

4. Accelerometry technician ID

B. SLEEPING LOG

5. Day 1:

a. Went to bed :
h h : m m

b. Got out of bed :
h h : m m

6. Day 2:

a. Went to bed :
h h : m m

b. Got out of bed :
h h : m m

7. Day 3:

a. Went to bed

:
h h : m m

b. Got out of bed

:
h h : m m

8. Day 4:

a. Went to bed

:
h h : m m

b. Got out of bed

:
h h : m m

9. Day 5:

a. Went to bed

:
h h : m m

b. Got out of bed

:
h h : m m

10. Day 6:

a. Went to bed

:
h h : m m

b. Got out of bed

:
h h : m m

11. Day 7: (Not applicable for ARIC visit)

a. Went to bed

:
h h : m m

b. Got out of bed

:
h h : m m

C. ACCELEROMETRY COMPLETION

12. Was the accelerometer returned to the clinic?

Yes.....

No → **Save and close form**

13. Accelerometry technician ID

14. Date accelerometer returned to clinic: / /
M M D D Y Y Y Y

a. Data successfully downloaded?

Yes.....

No

Complete the remaining items if the log was returned to the clinic (question 0c = Yes).

15. Did the participant remove the accelerometer (1st time)?

Yes.....

No → **Save and close form**

16. Time/date accelerometer removed (1st time):

a. Time accelerometer removed (1st time): :
h h m m

b. Date accelerometer removed: / /
M M D D Y Y Y Y

17. Time/date accelerometer replaced (1st time):

a. Time accelerometer replaced (1st time): :
h h m m

b. Date accelerometer replaced: / /
M M D D Y Y Y Y

18. Reason for removal (1st time):

19. Did the participant remove the accelerometer (2nd time)?

Yes.....

No → **Save and close form**



INSTRUCTIONS FOR THE ACCELEROMETRY (ACC) FORM

I. General Instructions

The Accelerometry Form is completed for all participants who receive an accelerometer as part of the visit exam. The accelerometer collects information on the participant's physical activity. Begin by completing section A when giving the accelerometer to the participant. Complete item 0c and sections B and C when the participant returns the accelerometer and the completed paper log. Most of the information in sections B and C comes from the participant's paper log. Note that the date the device was removed for the last time (the last item on the log) is not recorded in a specific field in the ACC form. It is more of an indicator that the participant completed the form all the way to the end. If the participant removed the accelerometer for the last time earlier than expected, that may be recorded in Section C.

NOTE: If the ARIC participant is not interested in participating, please be sure to mark the form as permanently missing. Also, the ARIC ACC form is not completed for ACHIEVE/ARIC shared cohorts.

II. Detailed Instructions for Each Item– Clinic Exam

- 0a. Enter the date the form was started (i.e., the date the accelerometer was given to the participant).
- 0b. Enter the staff ID # of the person who completed this form.
- 0c. This item should be completed when the accelerometer is returned. Enter whether the participant's log was returned to the clinic. If "no," make sure ACC1-ACC4 are complete, and then go to ACC12 and complete ACC12, ACC13 and ACC14.

A. ACCELEROMETRY INITIATION

- 1. Enter 000 for the accelerometer ID.
- 2. Scan the accelerometer serial number found on the back of the device into CDART, using the bar code / QR code scanner. For the older accelerometers, the bar code, when scanned, produces a 13 character combination of letters and numbers usually beginning with "TAS". For the new accelerometers, the QR (Zebra) code on the back, when scanned, produces a 30-character combination of letters and numbers, the last 13 of which are the Serial Number beginning with "TAS".
- 3a. Enter the time (hour and minute) that the participant started the Two Minute Walk. There is a place to record this on the Exam Checklist, beside the TMW checkbox. It is critical that the accelerometer be initialized to start before the Two Minute Walk, and that the accelerometer be placed on the participant just prior to the Two Minute Walk. Field center set-up and accommodations may vary, but the important thing is to record the start time of the Two Minute Walk, and to ensure that the accelerometer is recording at that time. It is also important that the clock on the computer used to initialize the Accelerometer and the clock that is used to determine the start time of the Two Minute Walk are synchronized. If the accelerometer is initialized to start first thing in the morning, it is important that the device remain still, and in a

location close to the start of the Two Minute Walk, for the duration of time leading up to the walk (see Manual 33 for further details). If the participant is unwilling or unable to do the Two Minute Walk, then record the time the Accelerometer was placed on the participant during the visit.

- 3b. Enter the month, day, and year the accelerometer began recording.
- 4. Enter the staff ID # of the technician who initialized the accelerometer

B. SLEEPING LOG

The sleeping log may be returned with invalid data, for example, text instead of valid times of day. When the data is invalid, open the notelog and enter the invalid information there. Select 'Missing' or 'Not Applicable' or 'No Response' in the field status dropdown. Leaving the field blank will prompt a query.

- 5a. Enter the time the participant reported going to bed on the first day the accelerometer was worn (the day of their clinic visit)
- 5b. Enter the time the participant reported getting out of bed on the second day the accelerometer was worn
- 6a. Enter the time the participant reported going to bed on the second day the accelerometer was worn
- 6b. Enter the time the participant reported getting out of bed on the third day the accelerometer was worn
- 7a. Enter the time the participant reported going to bed on the third day the accelerometer was worn
- 7b. Enter the time the participant reported getting out of bed on the fourth day the accelerometer was worn
- 8a. Enter the time the participant reported going to bed on the fourth day the accelerometer was worn
- 8b. Enter the time the participant reported getting out of bed on the fifth day the accelerometer was worn
- 9a. Enter the time the participant reported going to bed on the fifth day the accelerometer was worn
- 9b. Enter the time the participant reported getting out of bed on the sixth day the accelerometer was worn
- 10a. Enter the time the participant reported going to bed on the sixth day the accelerometer was worn
- 10b. Enter the time the participant reported getting out of bed on the seventh day the accelerometer was worn

Device should be removed at 8pm on the 7th day.

11a-11b. These items are not applicable for the ARIC visit. They should be left blank.

C. ACCELEROMETRY COMPLETION

These dates should be sequential. If a participant takes the accelerometer off, check that the date the accelerometer is replaced follows the date/time the device was removed.

12. Enter whether the accelerometer was returned to the clinic. If **"no,"** save and close the form
13. Enter the staff ID# of the technician who downloaded the data
14. Enter the month, date, and year the accelerometer was returned to the clinic. The date should be **AFTER** the date the accelerometer was initiated (ACC3b).
- 14a. Enter whether or not the data were able to be downloaded from the accelerometer. This field will usually be answered as "Yes" except when the technician is unable to download the data due to a compromised accelerometer and following unsuccessful efforts to troubleshoot.
15. Enter whether the participant reported removing the accelerometer. If **"no,"** save and close the form
- 16a. Enter the **first** time (hour and minutes) the participant reported removing the accelerometer
- 16b. Enter whether this time was AM or PM
- 16c. Enter the month, date, and year the accelerometer was removed
- 17a. Enter the time (hour and minutes) the accelerometer was replaced
- 17b. Enter whether this time was AM or PM
- 17c. Enter the month, date, and year the accelerometer was replaced
18. Enter the reason for removal
19. Enter whether the participant reported removing the accelerometer a **second** time. If **"no,"** save and close the form
- 20a. Enter the **second** time (hour and minutes) the participant reported removing the accelerometer
- 20b. Enter whether this time was AM or PM
- 20c. Enter the month, date, and year the accelerometer was removed the second time
- 21a. Enter the time (hour and minutes) the accelerometer was replaced the second time
- 21b. Enter whether this time was AM or PM
- 21c. Enter the month, date, and year the accelerometer was replaced the second time
22. Enter the reason for removal the second time
23. Enter whether the participant reported removing the accelerometer a **third** time. If **"no,"** save and close the form

- 24a. Enter the **third** time (hour and minutes) the participant reported removing the accelerometer
- 24b. Enter whether this time was AM or PM
- 24c. Enter the month, date, and year the accelerometer was removed the third time
- 25a. Enter the time (hour and minutes) the accelerometer was replaced the third time
- 25b. Enter whether this time was AM or PM
- 25c. Enter the month, date, and year the accelerometer was replaced the third time
- 26. Enter the reason for removal the third time
- 27. Enter whether the participant reported removing the accelerometer a **fourth** time. If "**no**," save and close the form
- 28a. Enter the **fourth** time (hour and minutes) the participant reported removing the accelerometer
- 28b. Enter whether this time was AM or PM
- 28c. Enter the month, date, and year the accelerometer was removed the fourth time
- 29a. Enter the time (hour and minutes) the accelerometer was replaced the fourth time
- 29b. Enter whether this time was AM or PM
- 29c. Enter the month, date, and year the accelerometer was replaced the fourth time
- 30. Enter the reason for removal the fourth time