

Data Entry Done

Participant ID

Affix label here

**HAPO FOLLOW-UP STUDY
OGTT SAMPLE PROCESSING FORM - MOTHER**

Processing	
1. HAPO staff ID of person processing these specimens:	_____
2. Were glucose, A1c and any DNA samples received on ice? CHECK ONLY ONE BOX	<input type="checkbox"/> Yes <input type="checkbox"/> No
3. Were all samples processed according to HAPO protocol? CHECK ONLY ONE BOX	<i>(If Yes, SKIP to Question 6.)</i> <input type="checkbox"/> Yes <input type="checkbox"/> No
Glucose	
4. Were the fasting and 2-hour glucose samples processed according to HAPO protocol? CHECK ONLY ONE BOX	<i>(If Yes, SKIP to Question 5.)</i> <input type="checkbox"/> Yes <input type="checkbox"/> No
a. How many aliquots (yellow top cryovials, Bar-code label 700) were made from the fasting glucose sample (Grey top, Bar-code label 700)? CHECK ONLY ONE BOX	<i>(STOP-Return form to HAPO Follow-Up Study.)</i> <input type="checkbox"/> 0 <input type="checkbox"/> 1 <input type="checkbox"/> 2
b. How many aliquots (yellow top cryovials, Bar-code label 720) were made from the 2-hour glucose sample (Grey top, Bar-code label 720)? CHECK ONLY ONE BOX	<input type="checkbox"/> 0 <input type="checkbox"/> 1 <input type="checkbox"/> 2

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Insulin/C-peptide, Lipids, Storage, A1c, Urine

5. Were the insulin/C-peptide, lipids, storage, A1c and urine samples processed according to HAPO protocol?

CHECK ONLY ONE BOX

(If Yes, SKIP to Question 6.) Yes
 No

a. How many aliquots (green top cryovials, Bar-code label 701) were made from the fasting insulin/C-peptide sample (Red top, Bar-code label 701)?
CHECK ONLY ONE BOX

0
 1
 2

b. How many aliquots (clear top cryovials, Bar-code label 702) were made from the fasting lipids sample (Red top, Bar-code label 702)?
CHECK ONLY ONE BOX

0
 1
 2

c. How many aliquots (blue top cryovials, Bar-code label 703) were made from the fasting storage sample (Red top, Bar-code label 703)?
CHECK ONLY ONE BOX

0
 1
 2

d. How many aliquots (red top cryovials, Bar-code label 705) were made from the fasting A1c sample (Purple top, Bar-code label 705)?
CHECK ONLY ONE BOX

0
 1
 2

e. How many aliquots (orange top cryovials, Bar-code label 706) were made from the urine sample (Specimen cup, Bar-code label 706)?
CHECK ONLY ONE BOX

0
 1
 2

f. How many aliquots (blue top cryovials, Bar-code label 723) were made from the 2-hour storage sample (Red top, Bar-code label 723)?
CHECK ONLY ONE BOX

0
 1
 2

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6. Time samples were separated or aliquotted (use 24-hour clock):	___ : ___
7. Date samples were separated or aliquotted: ENTER YEAR, MONTH, AND DAY	201__ / __ / __ Year Mo Day
Form Completion	
8. HAPO staff ID of person completing form:	_____
9. HAPO staff ID of person entering data into Data Entry System:	_____