Diabetes Prevention Program

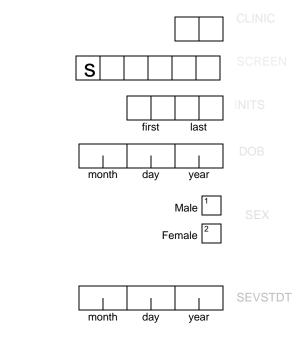
SCREENING STEP 3 INVENTORY - END

This form is completed during the End-visit of Screening Step 3. Form S06 records the following: Run-in compliance and adverse event assessment; personal and socioeconomic information.

Part I / IDENTIFICATION

A. Participant Identification

- 1. Clinic number
- 2. Screening number
- 3. Participant's initials
- 4. Participant's date of birth
- 5. Participant's Sex
- B. Visit Information
 - 1. Date of visit



C. Instructions for Form S06 Completion

Complete all sections of Form S06 unless an EXCLUSION is encountered in section D or G.

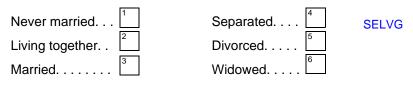
Initials of person reviewing completed form			Form entered in computer?
	first	last	

		Participant's initials Date of birth	Date of visit	DPP FORM S06.1 April, 1996 Page 2 of 3				
Part II / RUN-IN COMPLETION INFORMATION Run-in #1 Run-in #2								
D.	<u>Rur</u>	n-in Compliance	SEDATE1	(if repeated) SEDATE2				
	1.	Date run-in initiated	month day year	month day year				
	2.	Was participant compliant with placebo pill taking?	YES NO 1 2 SEPILL1	YES NO 1 2 SEPILL2				
	3.	Was participant compliant with keeping diet diary?	¹ ² SEDEIT	1 ¹ ² SEDIET2				
	4.	Was participant compliant with physical activity logs?	1 2 SELOG	1 2 SELOG2				
	5.	Was participant compliant with keeping appointments?	1 2 SEAPP1	T1 1 2 SEAPPT2				
	6.	Did participant complete interim run-in visit?	¹ ² SEINT1	1 2 SEINT2				
	7.	Was run-in completed satisfactorily?	¹ ² SESAT1	¹ ² SESAT2				
		If NO, a. Was run-in #2 started?	1 2 SERI2					
	If Run-in #1 or Run-in #2 was completed satisfactorily, continue. If neither Run-in was completed satisfactorily, STOP. Fill out eligibility checklist item E.9.							
E.	E. Adverse Events							
	1.	Since the physical exam, has the participant had an symptoms, injuries, illness or side effects, or worse pre-existing conditions?		S NO 2 SEAEQ				
lf `	YES,	an Adverse Event Report (Form EO1) MUST be cor	mpleted.					

Participa	ant's initia	ls [Date of birth		_	Date of visit			DPP FORM S06.1	
										April, 1996
first	last	-	month	day	year	-	month	day	year	Page 3 of 3

F. Personal data & Socioeconomic Status

1. What is your current marital status or living arrangement?



2. What is the highest grade or year of school you have completed? (Code GED as 12)

	mentary/ ior High	High School	College	Graduate School	
No schooling ≤ 6 7 8	1 2 3 4	9 5 10 6 11 7 12 8	13 9 14 10 15 11 16 12	$ \begin{array}{cccc} 17 & 13 \\ 18 & 14 \\ 19 & 15 \\ 20+ & 16 \\ \end{array} $	SEEDUC

3. Which of the following best describes your current employment status? (read responses)

	Seasonally employed 5	EMPL
Currently retired 2	Student	EMPL
Currently full-time homemaker 3	Other ⁷	
Currently not employed	Never worked ⁸	

4. How many individuals live in your household?

people	SEHOUSE
--------	---------

5. What is your annual household income from all sources? (show card)

less than \$10,000	1
\$10,000 to less than \$15,000	2
\$15,000 to less than \$20,000	3
\$20,000 to less than \$35,000	4

\$35,000 to less than \$50,000	5	
\$50,000 to less than \$75,000	6	SEINC
\$75,000 to more	7	
Refused	8	

G.	<u>Elic</u>	<u>jibility/Interest</u>	YES	NO	
	1.	Is participant willing to continue with the screening process?	1	2	SEWILL
		If YES, continue screening process. If NO, fill out eligibility checklist ite	m E.1		