

Participant ID

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Nickname

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Date of visit

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Diabetes Prevention Program Outcomes Study

**P07 BLOOD DRAW PROCEDURE**

This form is completed at Mid-year and Annual visits (01M, 01A, etc...), as well as Interim (INT). This form is also completed if an OGTT is performed at the Diabetes Confirmation visit or the Primary Outcome visit.

A. Participant Identification

1. Clinic number [ ] [ ]
2. Participant number [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ]
3. Nickname [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ]
4. Date of randomization 

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month      day                      year
5. Sex 
Male 1      Female 2
6. Date of visit 

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month      day                      year
7. Outcome visit

01M	01A	02M	02A	03M	03A	04M	04A	05M	05A	06M	06A	
07M	07A	08M	08A	09M	09A	10M	10A	11M	11A	CON	POV	INT

OVSTD  
replaced with  
DAYSRAND  
VISIT

B. Test qualification

1. Is this an Oral Glucose Tolerance Test (OGTT)? 
Yes 1      No 2
  2. Is the participant prepared for the fasting blood draw and/or glucose tolerance test (No concomitant conditions/drugs, no illness within the past week, no exercising within the past 10 hrs, no fasting less than 10 hrs or greater than 18 hrs, regular diet over last 3 days. See MOO for more details)? 
Yes 1      No 2
- IF NO, STOP. IF YES, CONTINUE.**
3. What time and date did you last eat and drink anything other than water? (**Do not** continue with test if less than 10 hrs or greater than 18 hrs.)
    - a. Date 

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month      day                      year
    - b. Time 

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24 hour clock

OISTHI  
OPREPA  
OQEATD  
OQEATT

Identification code of person reviewing completed form [ ] [ ] [ ] Form entered in computer? [ ]

FORMIN

Participant ID

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Nickname

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Date of visit

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C. Test Progression

1. Was the fasting blood sample drawn?

Yes  1 No  2 OTFAST

:  OTTFBS  
24 hour clock

a. **If YES**, give time of fasting blood sample

**If OGTT, CONTINUE. Otherwise STOP.**

2. Time glucose consumption started:

:  OTDRKT  
24 hour clock **renamed as DRNK0M**

**If drink not entirely consumed within 5 minutes, cancel and reschedule the OGTT.**

a. Time 30 minute sample drawn:

:  OT30MT  
24 hour clock **renamed as DRNK30M**

**The sample should be drawn within 2 minutes of the 30 minute interval (before or after). If the sample is drawn outside that window, record the time and continue with the OGTT.**

b. Time 2 hour sample drawn:

:  OT2HRT  
24 hour clock **renamed as DRNK2H**

**The sample should be drawn within 20 minutes of the 2 hour interval (with a goal of + / - 10 minutes). If the sample cannot be obtained within that window, the test should be rescheduled.**

3. The OGTT was:

OTRESL  
**CHECK ONLY ONE**

Completed **without** problem.....  1

Completed **with** problem.....  2

Not completed.....  3

**If completed without a problem, STOP. Otherwise complete 3a.**

a. Why was the OGTT "completed with problem" or "not completed"?

OTFAIL  
**CHECK ONLY ONE**

Vomited after glucose load.....  1

Fainted or felt ill after glucose load.....  2

Sample not obtained within the 20 minute window of 2 hour blood draw.....  3

Participant did not drink entire glucose load in 5 minutes.....  4

Other (please specify ).....  5