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Nickn	ame		

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OVSTDT

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FORM DATA NOT INCLUDED. OGTT TIME DATA INCLUDED WITH LAB DATA

Diabetes Prevention Program Outcomes Study

## P07 BLOOD DRAW PROCEDURE

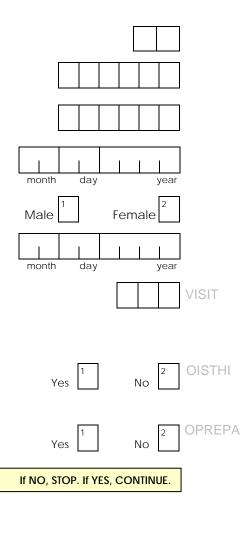
This form is completed at Mid-year and Annual visits (01M, 01A, etc...), as well as Interim visits (INT). This form is also completed if an OGTT is performed at the Diabetes Confirmation visit (CON) or the Primary Outcome visit (POV).

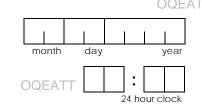
## A. Participant Identification

- 1. Clinic number
- 2. Participant number
- 3. Nickname
- 4. Date of randomization
- 5. Sex
- 6. Date of visit
- 7. Outcome visit

## B. Test qualification

- 1. Is this an Oral Glucose Tolerance Test (OGTT)?
- 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)?
- 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
  - b. Time





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Identification code of person reviewing completed form

Form entered in computer?

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Participant	ID			licknam	ne			1	Date	of visit									DS PO7	
										onth	day			year					y 2013 e 2 of	
										01111	aa,			, our						
C. <u>Test</u>	Progres	<u>sion</u>																		
1.	Was th	ne fas	ting bloc	od sar	nple	draw	'n?								Y	es 1		No	2	OTFAST
		<b>lf YES</b> samp	, give tim Ie	ne of I	fastin	g blo	od											24 hour	clock	OTTFBS
lf	OGIT, CO	ONTINU	JE. Otherv	vise ST	OP.															
2.	Time ç	glucos	e consu	mptio	on sta	rted:												24 hour	clock	OTDRKT renamed as DRNK0M in LAB data
	lf dri	nk not	entirely c	onsun	ned w	vithin 5	i minu	tes, ca	ancel	and r	esche	dule	the O	GTT.						LAD Uala
	a.	Time	30 minut	e san	nple (	drawı	ר:											24 hour	clock	OT30MT renamed as DRNK30M
		of	e sample glucose ith the OC	consu																in LAB data
	b.	Time	2 hour sa	ample	e drav	vn:												24 hour	clock	
		si	ne sample nce the st est should	art of	gluco	se co													)	LAB data
3.	The O	GTT w	'as:																	OTRESL
													Co	omple	ted <b>v</b>	_		<b>K ONLY</b> oblem	1	]
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			Vomited	d afte	r glud	cose l	oad												1	]
			Fainted	or felt	t ill af	ter gl	ucose	e load	db										2	]
			Sample			-													3	]
			Participa	ant di	d not	t drinl	k entir	e glu	icose	load	in 5	minu	tes						4	]
			Other																5	]
			1. If O	THER,	spec	cify:														
								(	OTFA	ILSF	C									]
			Ĺ																	L