

Entered: \_\_/\_\_/20\_\_

Initials: \_\_\_\_\_

Verified: \_\_/\_\_/20\_\_

Initials: \_\_\_\_\_

**For office use only.**

**LABS-3 Psychosocial Enrollment Form (EF3PI) – Version: 7/31/2007 FORMV**

Patient ID \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

**ID**

**EF3PIDAT**

Form Completion Date \_\_/\_\_/20\_\_  
mm dd yy

Certification number: \_\_\_\_\_ **CERT**

1. Did the patient provide consent to **CONS3** Participate in LABS-3 Psychosocial?  0. No →

- 1.1 Reason for refusing or not enrolling (*check all that apply*):
- General lack of interest **LACK**
  - Does not want to be bothered; follow-up too burdensome **NOBOTHER**
  - Lack of trust (e.g. that personal information will remain confidential) **TRUST**
  - Concerned that information provided will impact ability to have surgery **IMPACT**
  - No perceived personal benefit from participating **NOBENE**
  - Already on a liquid diet/unable to complete baseline by day 7 on diet. **LIQDIET**
  - Ingterested but not enough time to do baseline before surgery **NOTIME**
  - Other **REFOTH** (Specify: **REFOTHS** \_\_\_\_\_ )
  - Unknown **REFUNK**

1. Yes →

1.2 Date of consent: \_\_/\_\_/20\_\_  
mm dd yy

**CONS3DAT**

**If patient did not consent to LABS-3, STOP HERE and do not continue.**

2. Did the patient provide consent **CONSAE** to participate in additional eating behavior interviews?  0. No →

- 2.1 Reason for refusing (*check all that apply*):
- General lack of interest **LACKAE**
  - Lack of trust (e.g. that personal information will remain) **TRUSTAE**
  - No perceived personal benefit from participating **NOBENEAE**
  - Does not want to be bothered; additional participation too burdensome **NOBOTHAE**
  - Already on a liquid diet **LIQDIEAE**
  - Interested but not able to complete baseline **NOTIMEAE**
  - Participant not approached **NOTAPPAE**
  - Other **REFOTHAE** (Specify: **REFOTHAS** \_\_\_\_\_ )
  - Unknown **REFUNKAE**

1. Yes →

2.2 Date of consent: \_\_/\_\_/20\_\_  
mm dd yy

**CONAEDAT**

3. Did the patient provide consent **CONRAR** to allow investigators to audio record interviews?  0. No →

- 3.1 Reason for refusing (*check all that apply*):
- Lack of trust (e.g. that personal information will remain) **TRUSTAR**
  - Other **REFOTHAR** (Specify: **REFOTHRS** \_\_\_\_\_ )
  - Unknown **REFUNKAR**

1. Yes →

3.2 Date of consent: \_\_/\_\_/20\_\_  
mm dd yy

**CONARAT**