			Time Points									
Form Name	Fom ID	Pre-operative (baseline)	Month 6	Month 12	Month 18	Month 24	Month 36	Month 48	Month 60	Month 72	Month 84	
Affect Intensity Measure	AIM	. ,								Х	Х	
Adult Temperament Questionnaire	ATQ									Х	Х	
Alcohol Use Disorders Identification Test	AUD							Х	Х	Х	Х	
Brief Call	BC									Х	Х	
Beck Depression Inventory	BDI							Х	Х	Х	Х	
Childhood Trauma Questionnaire	CTQ						Х	Х	Х	Х	Х	completed only once per participant
Delay Discounting Task - Raw	DDRAW									Х	Х	completed only once per participant
Delay Discounting Task - Summary	DDSUM									Х	Х	completed only once per participant
Difficulties in Emotion Regulation Scale	DERS									X	X	
Demographic Information Form	DIF							Х	Х	Х	Х	
Eating Disorder Examination	EDEC	Х		Х		Х	Х	Х	Х		Х	
EDE Short Form	EDES						X	X	X	Х	X	
LABS-3 PIBS Enrollment Form	EF3PI	Х										
Go/No Go Task - Raw	GORAW									Х	Х	completed only once per participant
Go/No Go Task - Summary	GOSUM									X	X	completed only once per participant
Modified ICD-SCID	ICD3						Х	Х	Х	X	X	
Inactivation Form - LABS3	IN3PI						~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	~	~	~	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	
Interpersonal Support Evaluation List	ISEL							Х	Х	Х	Х	
Impact of Weight on Quality of Life Questionnaire-								~	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	~	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	
Lite	IW		х					х	х	х	х	
Medication Form	MED/MEDRX				Х			X	X	X	X	
McKnight Follow-Up for Eating Disorders					~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~			~	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	~	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	
(M-FED) Baseline	MFEDB	Х										
McKnight Follow-Up for Eating Disorders (M-FED) Follow-up	MFEDF		х	х	х	х	х	х	x	х	х	
McKnight Follow-Up for Eating Disorders												
(M-FED) Modified Short	MFEDS						х	х				
Nutritional Data System for Research	NDS	Х	Х	Х		Х	Х	X	Х		Х	
NDS- Eating Grid	NDSEG	X	X	X		X	X	X	X		X	
LABS-3 Off Protocol Form	OFF3	X	X	X	Х	X	X	X	X	Х	X	
LABS-3 Psychosocial Adverse Event Form	PAE	~ ~	~	~	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	~	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	~	~	~	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	
Psychiatric & Emotional Test Survey - Followup	PETSF							х	Х	х	Х	
Psychiatric & Emotional Test Survey - Modified	PETSM		Х		х			^	~	^	~	
Structured Clinical Interview for DSM-IV (SCID) -	SCIDA		~		^							
Annual (36-60 month)	OCIDA						Х	Х	Х		Х	
Structured Clinical Interview for DSM-IV (SCID) - Baseline	SCIDC	х										
Structured Clinical Interview for DSM-IV (SCID) - 24 Month	SCIDT					х						
SF-36 Health Survey	SF36							Х	х	Х	Х	
Sexual Functioning Follow-up	SF36 SFF							X	X	X	X	
Sexual Functioning Follow-up Short Form	SHORT							X	X	X	X	
	SUCKI							Ă	X	X	X	
Sensitivity to Punishment and Sensitivity to Reward	SPSRQ									х	х	
Impulsive Behavior Scale	UPP									Х	Х	
Medical Weight Form	WGT3							Х	Х	Х	Х]
Weight Form - Self reported	WGT							Х	Х	Х	Х	
Work Productivity and Activity Impairment	WPAI							Х	Х	Х	Х	