



## Patient Information Form

### **GENERAL INSTRUCTIONS**

The Patient Information form is to be completed by the parent/guardian at the 6 month and 12 month visit. This form captures information about the patient's family, insurance status, both past and recent health conditions and recent mental health diagnoses.

The form is available in English or Spanish. For parents/caregivers not fluent in English or Spanish, information may be obtained via interview by a certified translator. If the parent/caregiver is unable to understand the questions because of educational, cultural or language difficulties, and a trained translator is not available, help may be provided by the parent/caregiver's next of kin or friend. In these situations the person helping the parent/caregiver can read the questions to the parent/caregiver and record the answers, or supply the answers to the best of his/her knowledge.

If the parent/guardian has a question about what an item means or how they should answer it, do not interpret the question for them. Repeat the item to them verbatim. Ask them to answer according to what they think the question means. If they have trouble deciding on an answer, ask them to choose the response that comes closest to how they feel. The parent/guardian has the option of not answering a question if they truly do not understand the question. If a parent/guardian asks you to interpret the responses, tell her/him that you are not trained to interpret and remind them that there are no right or wrong answers.

Review the questionnaire for completeness while the parent/guardian is still present.

### **Specific Instructions**

Patient ID: Record the Patient ID in the top right hand corner.

Date of Evaluation: Record the date (month/day/year) that the patient completed the questionnaire.

Protocol visit: Record the protocol timepoint that corresponds to the visit.