

# Data Cleaning Example

 Codebook ▾

## Data Dictionary Codebook

04/08/2018 6:04pm

#	Variable / Field Name	Field Label <i>Field Note</i>	Field Attributes (Field Type, Validation, Choices, Calculations, etc.)				
Instrument: <b>Demographics</b> (demographics)							
1	study_id	Study ID	text				
2	date_enrolled	Section Header: <i>Consent Information</i> Date subject signed consent <i>YYYY-MM-DD</i>	text (date_ymd)				
3	patient_document	Upload the patient's consent form	file				
4	family_name	Section Header: <i>Contact Information</i> Family Name	text, Identifier				
5	given_name	Given Name	text, Identifier				
6	street_address	Street Address	text				
7	city_prefecture	City, Prefecture	notes, Identifier				
8	postal_code	Postal Code <i>Format: xxx-xxxx</i>	text				
9	phone	Phone number	text (phone), Identifier				
10	email	E-mail	text (email), Identifier				
11	dob	Date of birth	text (date_ymd, Min: 1900-05-31, Max: 2000-05-31), Identifier				
12	age	Age (years)	calc Calculation: rounddown(datediff([dob],'today','y'))				
13	age_warning  Show the field ONLY if: [age] < 18	WARNING: If patient is < 18 years old, he or she should not be enrolled in this study.	descriptive				
14	gender	Gender	radio <table><tr><td>0</td><td>Female</td></tr><tr><td>1</td><td>Male</td></tr></table>	0	Female	1	Male
0	Female						
1	Male						
15	given_birth  Show the field ONLY if: [gender] = "0"	Has the patient given birth before?	yesno <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table>	1	Yes	0	No
1	Yes						
0	No						

16	num_children  Show the field ONLY if: [gender] = "0" and [given_birth] = "1"	How many times has the patient given birth?	text (integer, Min: 0)																					
17	gym	Section Header: <i>Please provide the patient's weekly schedule for the activities below.</i>  Gym (Weight Training)	checkbox <table><tr><td>0</td><td>gym__0</td><td>Monday</td></tr><tr><td>1</td><td>gym__1</td><td>Tuesday</td></tr><tr><td>2</td><td>gym__2</td><td>Wednesday</td></tr><tr><td>3</td><td>gym__3</td><td>Thursday</td></tr><tr><td>4</td><td>gym__4</td><td>Friday</td></tr><tr><td>5</td><td>gym__5</td><td>Saturday</td></tr><tr><td>6</td><td>gym__6</td><td>Sunday</td></tr></table>	0	gym__0	Monday	1	gym__1	Tuesday	2	gym__2	Wednesday	3	gym__3	Thursday	4	gym__4	Friday	5	gym__5	Saturday	6	gym__6	Sunday
0	gym__0	Monday																						
1	gym__1	Tuesday																						
2	gym__2	Wednesday																						
3	gym__3	Thursday																						
4	gym__4	Friday																						
5	gym__5	Saturday																						
6	gym__6	Sunday																						
18	aerobics	Aerobics	checkbox <table><tr><td>0</td><td>aerobics__0</td><td>Monday</td></tr><tr><td>1</td><td>aerobics__1</td><td>Tuesday</td></tr><tr><td>2</td><td>aerobics__2</td><td>Wednesday</td></tr><tr><td>3</td><td>aerobics__3</td><td>Thursday</td></tr><tr><td>4</td><td>aerobics__4</td><td>Friday</td></tr><tr><td>5</td><td>aerobics__5</td><td>Saturday</td></tr><tr><td>6</td><td>aerobics__6</td><td>Sunday</td></tr></table>	0	aerobics__0	Monday	1	aerobics__1	Tuesday	2	aerobics__2	Wednesday	3	aerobics__3	Thursday	4	aerobics__4	Friday	5	aerobics__5	Saturday	6	aerobics__6	Sunday
0	aerobics__0	Monday																						
1	aerobics__1	Tuesday																						
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3	aerobics__3	Thursday																						
4	aerobics__4	Friday																						
5	aerobics__5	Saturday																						
6	aerobics__6	Sunday																						
19	eat	Eat Out (Dinner/Lunch)	checkbox <table><tr><td>0</td><td>eat__0</td><td>Monday</td></tr><tr><td>1</td><td>eat__1</td><td>Tuesday</td></tr><tr><td>2</td><td>eat__2</td><td>Wednesday</td></tr><tr><td>3</td><td>eat__3</td><td>Thursday</td></tr><tr><td>4</td><td>eat__4</td><td>Friday</td></tr><tr><td>5</td><td>eat__5</td><td>Saturday</td></tr><tr><td>6</td><td>eat__6</td><td>Sunday</td></tr></table>	0	eat__0	Monday	1	eat__1	Tuesday	2	eat__2	Wednesday	3	eat__3	Thursday	4	eat__4	Friday	5	eat__5	Saturday	6	eat__6	Sunday
0	eat__0	Monday																						
1	eat__1	Tuesday																						
2	eat__2	Wednesday																						
3	eat__3	Thursday																						
4	eat__4	Friday																						
5	eat__5	Saturday																						
6	eat__6	Sunday																						
20	drink	Drink (Alcoholic Beverages)	checkbox <table><tr><td>0</td><td>drink__0</td><td>Monday</td></tr><tr><td>1</td><td>drink__1</td><td>Tuesday</td></tr><tr><td>2</td><td>drink__2</td><td>Wednesday</td></tr><tr><td>3</td><td>drink__3</td><td>Thursday</td></tr><tr><td>4</td><td>drink__4</td><td>Friday</td></tr><tr><td>5</td><td>drink__5</td><td>Saturday</td></tr><tr><td>6</td><td>drink__6</td><td>Sunday</td></tr></table>	0	drink__0	Monday	1	drink__1	Tuesday	2	drink__2	Wednesday	3	drink__3	Thursday	4	drink__4	Friday	5	drink__5	Saturday	6	drink__6	Sunday
0	drink__0	Monday																						
1	drink__1	Tuesday																						
2	drink__2	Wednesday																						
3	drink__3	Thursday																						
4	drink__4	Friday																						
5	drink__5	Saturday																						
6	drink__6	Sunday																						

21	mood	Section Header: <i>Other information</i> Specify the patient's mood.	slider Slider labels: Very sad, Indifferent, Very happy Custom alignment: RH															
22	any_antidep	Is the patient taking any antidepressants?	checkbox <table><tr><td>1</td><td>any_antidep__1</td><td>Yes</td></tr><tr><td>0</td><td>any_antidep__0</td><td>No</td></tr></table>	1	any_antidep__1	Yes	0	any_antidep__0	No									
1	any_antidep__1	Yes																
0	any_antidep__0	No																
23	which_antidep  Show the field ONLY if: [any_antidep(1)] = '1'	Which antidepressant(s) is the patient taking? (check all that apply)	checkbox <table><tr><td>1</td><td>which_antidep__1</td><td>Lexapro</td></tr><tr><td>2</td><td>which_antidep__2</td><td>Celexa</td></tr><tr><td>3</td><td>which_antidep__3</td><td>Prozac</td></tr><tr><td>4</td><td>which_antidep__4</td><td>Paxil</td></tr><tr><td>5</td><td>which_antidep__5</td><td>Zoloft</td></tr></table>	1	which_antidep__1	Lexapro	2	which_antidep__2	Celexa	3	which_antidep__3	Prozac	4	which_antidep__4	Paxil	5	which_antidep__5	Zoloft
1	which_antidep__1	Lexapro																
2	which_antidep__2	Celexa																
3	which_antidep__3	Prozac																
4	which_antidep__4	Paxil																
5	which_antidep__5	Zoloft																
24	height	Height (cm)	text (number, Min: 130, Max: 215)															
25	weight	Weight (kilograms)	text (integer, Min: 35, Max: 200)															
26	bmi	BMI	calc Calculation: round(((weight]*10000)/([height])^(2)),1)															
27	demographics_complete	Section Header: <i>Form Status</i> Complete?	dropdown <table><tr><td>0</td><td>Incomplete</td></tr><tr><td>1</td><td>Unverified</td></tr><tr><td>2</td><td>Complete</td></tr></table>	0	Incomplete	1	Unverified	2	Complete									
0	Incomplete																	
1	Unverified																	
2	Complete																	
Instrument: <b>Baseline Data</b> (baseline_data)																		
28	date_visit_b	Section Header: <i>Baseline Measurements</i> Date of baseline visit	text (date_ymd)															
29	creat_b	Creatinine (mg/dL)	text (number, Min: 0.5, Max: 20)															
30	hdl_b	HDL Cholesterol (mg/dL)	text (number, Min: 20, Max: 100)															
31	ldl_b	LDL Cholesterol (mg/dL)	text (number, Min: 30, Max: 300)															
32	drywt_b	Dry weight (kilograms)	text (number, Min: 35, Max: 200)															
33	plasma1_b	Collected Plasma 1?	dropdown <table><tr><td>0</td><td>No</td></tr><tr><td>1</td><td>Yes</td></tr></table>	0	No	1	Yes											
0	No																	
1	Yes																	
34	plasma2_b	Collected Plasma 2?	dropdown <table><tr><td>0</td><td>No</td></tr><tr><td>1</td><td>Yes</td></tr></table>	0	No	1	Yes											
0	No																	
1	Yes																	

35	serum1_b	Collected Serum 1?	dropdown <table><tr><td>0</td><td>No</td></tr><tr><td>1</td><td>Yes</td></tr></table>	0	No	1	Yes						
0	No												
1	Yes												
36	serum2_b	Collected Serum 2?	dropdown <table><tr><td>0</td><td>No</td></tr><tr><td>1</td><td>Yes</td></tr></table>	0	No	1	Yes						
0	No												
1	Yes												
37	sga_b	Subject Global Assessment (score = 1-7)	text (number, Min: 0.9, Max: 7.1)										
38	date_supplement_dis pensed	Date patient begins supplement	text (date_ymd)										
39	baseline_data_compl ete	Section Header: <i>Form Status</i> Complete?	dropdown <table><tr><td>0</td><td>Incomplete</td></tr><tr><td>1</td><td>Unverified</td></tr><tr><td>2</td><td>Complete</td></tr></table>	0	Incomplete	1	Unverified	2	Complete				
0	Incomplete												
1	Unverified												
2	Complete												
Instrument: <b>Monthly Data</b> (monthly_data)													
40	date_visit_m	Section Header: <i>Month 1</i> Date of Monthly Visit	text (date_ymd)										
41	creat_m	Creatinine (mg/dL)	text (number, Min: 0.5, Max: 20)										
42	hdl_m	HDL Cholesterol (mg/dL)	text (number, Min: 20, Max: 100)										
43	ldl_m	LDL Cholesterol (mg/dL)	text (number, Min: 30, Max: 300)										
44	drywt_m	Dry weight (kilograms)	text (number, Min: 35, Max: 200)										
45	trt_missed	Number of treatments missed	text (number, Min: 0, Max: 7)										
46	compliance	How compliant was the patient in drinking the supplement?	dropdown <table><tr><td>0</td><td>100 percent</td></tr><tr><td>1</td><td>99-75 percent</td></tr><tr><td>2</td><td>74-50 percent</td></tr><tr><td>3</td><td>49-25 percent</td></tr><tr><td>4</td><td>0-24 percent</td></tr></table>	0	100 percent	1	99-75 percent	2	74-50 percent	3	49-25 percent	4	0-24 percent
0	100 percent												
1	99-75 percent												
2	74-50 percent												
3	49-25 percent												
4	0-24 percent												
47	hosp_yn	Section Header: <i>Hospitalization Data</i> Was patient hospitalized since last visit?	dropdown <table><tr><td>0</td><td>No</td></tr><tr><td>1</td><td>Yes</td></tr></table>	0	No	1	Yes						
0	No												
1	Yes												
48	hosp_cause	What was the cause of hospitalization?	dropdown <table><tr><td>1</td><td>Vascular access related events</td></tr><tr><td>2</td><td>CVD events</td></tr><tr><td>3</td><td>Other</td></tr></table>	1	Vascular access related events	2	CVD events	3	Other				
1	Vascular access related events												
2	CVD events												
3	Other												
49	hosp_adm	Date of hospital admission	text (date_ymd)										
50	hosp_dis	Date of hospital discharge	text (date_ymd)										

51	hosp_summary_binder	Discharge summary in patients binder?	dropdown <table><tr><td>0</td><td>No</td></tr><tr><td>1</td><td>Yes</td></tr></table>	0	No	1	Yes						
0	No												
1	Yes												
52	monthly_data_complete	Section Header: <i>Form Status</i> Complete?	dropdown <table><tr><td>0</td><td>Incomplete</td></tr><tr><td>1</td><td>Unverified</td></tr><tr><td>2</td><td>Complete</td></tr></table>	0	Incomplete	1	Unverified	2	Complete				
0	Incomplete												
1	Unverified												
2	Complete												
Instrument: <b>Completion Data</b> (completion_data)													
53	completed_study	Section Header: <i>Study Completion Information</i> Has patient completed study?	dropdown <table><tr><td>0</td><td>No</td></tr><tr><td>1</td><td>Yes</td></tr></table>	0	No	1	Yes						
0	No												
1	Yes												
54	completed_date  Show the field ONLY if: [completed_study] = '1'	Date of study completion	text (date_ymd)										
55	studywd_yn  Show the field ONLY if: [completed_study] = '0'	Did the patient ever withdraw from the study?	dropdown <table><tr><td>0</td><td>No</td></tr><tr><td>1</td><td>Yes</td></tr></table>	0	No	1	Yes						
0	No												
1	Yes												
56	studywd_date  Show the field ONLY if: [studywd_yn] = '1'	Date of study withdrawal	text (date_ymd)										
57	studywd_reason  Show the field ONLY if: [studywd_yn] = '1'	Reason patient withdrew from study	dropdown <table><tr><td>0</td><td>Non-compliance</td></tr><tr><td>1</td><td>Did not wish to continue in study</td></tr><tr><td>2</td><td>Could not tolerate the supplement</td></tr><tr><td>3</td><td>Hospitalization</td></tr><tr><td>4</td><td>Other</td></tr></table>	0	Non-compliance	1	Did not wish to continue in study	2	Could not tolerate the supplement	3	Hospitalization	4	Other
0	Non-compliance												
1	Did not wish to continue in study												
2	Could not tolerate the supplement												
3	Hospitalization												
4	Other												
58	death_yn  Show the field ONLY if: [completed_study] = '0'	Did the patient die during the study?	dropdown <table><tr><td>0</td><td>No</td></tr><tr><td>1</td><td>Yes</td></tr></table>	0	No	1	Yes						
0	No												
1	Yes												

59	death_date  Show the field ONLY if: [death_yn] = '1'	Date of death	text (date_ymd)						
60	death_cause  Show the field ONLY if: [death_yn] = '1'	Cause of death	dropdown <table><tr><td>0</td><td>All cause</td></tr><tr><td>1</td><td>Cardiovascular event</td></tr></table>	0	All cause	1	Cardiovascular event		
0	All cause								
1	Cardiovascular event								
61	study_comments	Section Header: <i>General Comments</i> Comments	notes						
62	completion_data_complete	Section Header: <i>Form Status</i> Complete?	dropdown <table><tr><td>0</td><td>Incomplete</td></tr><tr><td>1</td><td>Unverified</td></tr><tr><td>2</td><td>Complete</td></tr></table>	0	Incomplete	1	Unverified	2	Complete
0	Incomplete								
1	Unverified								
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