📖 Data Dictionary Codebook

	#	Variable / Field Name	Field Label *Field Note*	Field Attributes (Field Type, Validation, Choices, Calculations, etc.)
Instrument:		**Demographic Info** (demographic_info_toronto_only)		**[collapsed]**
Instrument:		**Mini MDD** (mini_mdd)		**[collapsed]**
Instrument:		**Mini MDD Note** (mini_mdd_note)		**[collapsed]**
Instrument:		**Medical History Form (Revised 3/27/17)** (medical_history_form_revised_32717)		**[collapsed]**
Instrument:		**Medical History Form (Revised 3/30/17): USE THIS ONE!** (medical_history_form_revised_33017_use_this_one)		**[collapsed]**
Instrument:		**Psychiatric Medication Form V2** (psychiatric_medication_form_v2)		**[collapsed]**
Instrument:		**Drug Abuse Screening Test (DAST)** (drug_abuse_screening_test_dast)		**[collapsed]**
Instrument:		**Medication Form V2** (medication_form_v2)		**[collapsed]**
Instrument:		**NIH Toolbox Baseline** (nih_toolbox_baseline)		**[collapsed]**
Instrument:		**Randomization Form Step 2** (randomization_form_step_2_please_do_not_actually_c)		**[collapsed]**
Instrument:		**Baseline Suicide History Risk And Protective Factors** (baseline_suicide_history_risk_and_protective_facto)		**[collapsed]**
Instrument:		**Blinded Central MADRS** (blinded_central_madrs)		**[collapsed]**
Instrument:		**Cumulative Illness Rating Scale For Geriatrics (CIRS-G)** (cumulative_illness_rating_scale_for_geriatrics_cir)		**[collapsed]**
Instrument:		**Baseline Forms** (baseline_forms)		
	654	[baseline_forms_date]	Date	text (date_mdy)
	655	[phq9_win_past_wk]	Section Header: *The Patient Health Questionnaire (PHQ-9)* Has the PHQ-9 been completed within the past week?	yesno 1 Yes 0 No Custom alignment: RH Field Annotation: @DEFAULT='0'
	656	[base_phq9_1] Show the field ONLY if: [phq9_win_past_wk] = '0'	Section Header: 1. Little interest or pleasure in doing things	radio, Required 0 0- Not at all 1 1- Several days 2 2- More than half the days 3 3- Nearly every day
	657	[base_phq9_2] Show the field ONLY if: [phq9_win_past_wk] = '0'	2. Feeling down, depressed, or hopeless	radio, Required 0 0- Not at all 1 1- Several days

				2	2- More than half the days
				3	3- Nearly every day

658	[base_phq9_3] Show the field ONLY if: [phq9_win_past_wk] = '0'	3. Trouble falling or staying asleep, or sleeping too much	radio, Required
				0	0- Not at all
				1	1- Several days
				2	2- More than half the days
				3	3- Nearly every day

659	[base_phq9_4] Show the field ONLY if: [phq9_win_past_wk] = '0'	4. Feeling tired or having little energy	radio, Required
				0	0- Not at all
				1	1- Several days
				2	2- More than half the days
				3	3- Nearly every day

660	[base_phq9_5] Show the field ONLY if: [phq9_win_past_wk] = '0'	5. Poor appetite or overeating	radio, Required
				0	0- Not at all
				1	1- Several days
				2	2- More than half the days
				3	3- Nearly every day

661	[base_phq9_6] Show the field ONLY if: [phq9_win_past_wk] = '0'	6. Feeling bad about yourself -- or that you are a failure or have let yourself or your family down	radio, Required
				0	0- Not at all
				1	1- Several days
				2	2- More than half the days
				3	3- Nearly every day

662	[base_phq9_7] Show the field ONLY if: [phq9_win_past_wk] = '0'	7. Trouble concentrating on things, such as reading the newspaper or watching television	radio, Required
				0	0- Not at all
				1	1- Several days
				2	2- More than half the days
				3	3- Nearly every day

663	[base_phq9_8] Show the field ONLY if: [phq9_win_past_wk] = '0'	8. Moving or speaking so slowly that other people could have noticed? Or the opposite -- being so fidgety or restless that you have been moving around a lot more than usual	radio, Required
				0	0- Not at all
				1	1- Several days
				2	2- More than half the days
				3	3- Nearly every day

664	[base_phq9_9] Show the field ONLY if: [phq9_win_past_wk] = '0'	9. Thoughts that you would be better off dead or of hurting yourself in some way	radio, Required
				0	0- Not at all
				1	1- Several days
				2	2- More than half the days
				3	3- Nearly every day

665	[base_phq9_suicide]	Please conduct the Suicide Risk Management protocol	descriptive

		Show the field ONLY if: [phq9_9] = '3' or [phq9_9] = '2' or [phq9_9] = '1'	
666	[base_phq9_total_score] Show the field ONLY if: [phq9_win_past_wk] = '0'	PHQ-9 Total Score:	calc Calculation: [base_phq9_1]+ [base_phq9_2]+[base_phq9_3]+ [base_phq9_4]+[base_phq9_5]+ [base_phq9_6]+[base_phq9_7]+ [base_phq9_8]+[base_phq9_9] Custom alignment: LV
667	[base_phq9_how_difficult] Show the field ONLY if: [phq9_win_past_wk] = '0'	If you checked off any problems, how difficult have these problems made it for you to do your work, take care of things at home, or get along with other people?	radio 1 | 1- Not difficult at all 2 | 2- Somewhat difficult 3 | 3- Very difficult 4 | 4- Extremely difficult
668	[base_se_1]	Section Header: *Side Effect* 1. Have you had any side effects from any of your medications?	yesno 1 | Yes 0 | No
669	[base_se1_name] Show the field ONLY if: [base_se_1] = '1'	Please list the Side Effect?	text BIOPORTAL:SNOMEDCT | BIOPORTAL:SNOM
670	[base_se1_curr_sev] Show the field ONLY if: [base_se_1] = '1'	Current Severity (how bad is it now?) Would you say that it's mild, moderate, or severe? If clarification is needed: Mild: Discomfort noticed, but no disruption of normal daily activityModerate: Discomfort sufficient to reduce or affect normal daily activitySevere: Incapacitating, with inability to work or to perform normal daily activity	radio 1 | Mild 2 | Moderate 3 | Severe Custom alignment: LV
671	[base_se1_onset] Show the field ONLY if: [base_se_1] = '1'	Onset Date (When did it start?)	text (date_mdy)
672	[base_se1_ongoing] Show the field ONLY if: [base_se_1] = '1'	Is it still going on?	yesno 1 | Yes 0 | No
673	[base_se1_end] Show the field ONLY if: [base_se1_ongoing] = '0'	End Date (When did it stop?)	text (date_mdy)
674	[base_se2_name]	Section Header:	text

		Show the field ONLY if: [base_se_1] = '1'	Please list the next side effect?	BIOPORTAL:SNOMEDCT	BIOPORTAL:SNOM
	675	[base_se2_curr_sev] Show the field ONLY if: [base_se_1] = '1'	Current Severity (how bad is it now?) Would you say that it's mild, moderate, or severe? If clarification is needed: Mild: Discomfort noticed, but no disruption of normal daily activityModerate: Discomfort sufficient to reduce or affect normal daily activitySevere: Incapacitating, with inability to work or to perform normal daily activity	radio 1 Mild 2 Moderate 3 Severe Custom alignment: LV	
	676	[base_se2_onset] Show the field ONLY if: [base_se_1] = '1'	Onset Date (When did it start?)	text (date_mdy)	
	677	[base_se2_ongoing] Show the field ONLY if: [base_se_1] = '1'	Is it still going on?	yesno 1 Yes 0 No	
	678	[base_se2_end] Show the field ONLY if: [base_se2_ongoing] = '0'	End Date (When did it stop?)	text (date_mdy)	
	679	[base_se3_name] Show the field ONLY if: [base_se_1] = '1'	Section Header: Please list the next side effect?	text BIOPORTAL:SNOMEDCT	BIOPORTAL:SNOM
	680	[base_se3_curr_sev] Show the field ONLY if: [base_se_1] = '1'	Current Severity (how bad is it now?) Would you say that it's mild, moderate, or severe? If clarification is needed: Mild: Discomfort noticed, but no disruption of normal daily activityModerate: Discomfort sufficient to reduce or affect normal daily activitySevere: Incapacitating, with inability to work or to perform normal daily activity	radio 1 Mild 2 Moderate 3 Severe Custom alignment: LV	
	681	[base_se3_onset] Show the field ONLY if: [base_se_1] = '1'	Onset Date (When did it start?)	text (date_mdy)	
	682	[base_se3_ongoing]	Is it still going on?	yesno	

| | | Show the field ONLY if: [base_se_1] = '1' | | 1 | Yes |
| | | | | 0 | No |

| 683 | [base_se3_end]
Show the field ONLY if: [base_se3_ongoing] = '0' | End Date (When did it stop?) | text (date_mdy) | | |

| 684 | [base_se4_name]
Show the field ONLY if: [base_se_1] = '1' | Section Header:
Please list the next side effect? | text
BIOPORTAL:SNOMEDCT \| BIOPORTAL:SNOM |

| 685 | [base_se4_curr_sev]
Show the field ONLY if: [base_se_1] = '1' | Current Severity (how bad is it now?)

Would you say that it's mild, moderate, or severe?

If clarification is needed:

Mild: Discomfort noticed, but no disruption of normal daily activityModerate: Discomfort sufficient to reduce or affect normal daily activitySevere: Incapacitating, with inability to work or to perform normal daily activity | radio
1 \| Mild
2 \| Moderate
3 \| Severe

Custom alignment: LV |

| 686 | [base_se4_onset]
Show the field ONLY if: [base_se_1] = '1' | Onset Date (When did it start?) | text (date_mdy) |

| 687 | [base_se4_ongoing]
Show the field ONLY if: [base_se_1] = '1' | Is it still going on? | yesno
1 \| Yes
0 \| No |

| 688 | [base_se4_end]
Show the field ONLY if: [base_se4_ongoing] = '0' | End Date (When did it stop?) | text (date_mdy) |

| 689 | [base_se5_name]
Show the field ONLY if: [base_se_1] = '1' | Section Header:
Please list the next side effect? | text
BIOPORTAL:SNOMEDCT \| BIOPORTAL:SNOM |

| 690 | [base_se5_curr_sev]
Show the field ONLY if: [base_se_1] = '1' | Current Severity (how bad is it now?)

Would you say that it's mild, moderate, or severe?

If clarification is needed: | radio
1 \| Mild
2 \| Moderate
3 \| Severe

Custom alignment: LV |

		Mild: Discomfort noticed, but no disruption of normal daily activityModerate: Discomfort sufficient to reduce or affect normal daily activitySevere: Incapacitating, with inability to work or to perform normal daily activity	
691	[base_se5_onset] Show the field ONLY if: [base_se_1] = '1'	Onset Date (When did it start?)	text (date_mdy)
692	[base_se5_ongoing] Show the field ONLY if: [base_se_1] = '1'	Is it still going on?	yesno 	1	Yes
0	No	
693	[base_se5_end] Show the field ONLY if: [base_se5_ongoing] = '0'	End Date (When did it stop?)	text (date_mdy)
694	[base_adherence_1]	Section Header: *Expectations for Adherence* 1. Do you anticipate having any problems taking the antidepressant we prescribe daily?	yesno 	1	Yes
0	No	
695	[base_adherence_2]	2. Can you think of anything that might make it difficult for you to take the medication every day without missing doses?	yesno 	1	Yes
0	No	
696	[base_adherence_3] Show the field ONLY if: [base_adherence_2] = '1' or [base_adherence_1] = '1'	3. Describe & provide adherence counseling as needed *Note: procedures not yet developed	notes
697	[base_fall_1]	Section Header: *Falls* 1. In the past six months, how many times have you had a fall, including a slip or trip in which you lost your balance and landed on the floor or ground or lower level?	radio 	1	Zero (0)
2	One time (1)
3	Two times (2)
4	Three or more (>2)	
698	[base_fall_2] Show the field ONLY if: [base_fall_1] = '2' or [base_fall_1] = '3' or [base_fall_1] = '4'	2. Did any of your falls result in the following? *(check all that apply)*	checkbox | 1	base_fall_2___1	1. No injury
2	base_fall_2___2	2. Minor bruising or cuts
3	base_fall_2___3	3. Reduced mobility
4	base_fall_2___4	4. Severe and persistent pain
5	base_fall_2___5	5. Injury	
699	[base_fall_3] Show the field ONLY if: [base_fall_1] = '2' or [base_fall_1] = '3' or [base_fall_1] = '4'	Description:	notes

| 700 | [baseline_forms_complete] | Section Header: *Form Status*

 Complete? | dropdown

 0 Incomplete
 1 Unverified
 2 Complete |

Instrument: ATHF Form1 (athf_form1_treatments_110)   **[collapsed]**

Instrument: Alcohol Use Disorders Identification Test (AUDIT)
 (alcohol_use_disorders_identification_test_audit)   **[collapsed]**

Instrument: ATHF Form2 (If Needed - Treatments 11-20) (athf_form2_if_needed_treatments_1120)   **[collapsed]**

Instrument: ATHF Form3 (If Needed - Treatments 21-30) (athf_form3_if_needed_treatments_2130)   **[collapsed]**

Instrument: ATHF Form4 (If Needed - Treatments 31-40) (athf_form4_if_needed_treatments_3140)   **[collapsed]**

Instrument: Contact Information Form (contact_information_form)   **[collapsed]**

Instrument: Participant Tracking Form (participant_tracking_form)   **[collapsed]**

Instrument: Decision Support Form (decision_support_form)

| 3550 | [decision_d] | Review the following information in the tracking arm:

 patient name, contact info, preferred contact method, contact log <br> medication list (specifically psychiatric medications)
 running side effect list <br> running adverse event list <br> physician name, contact info, preferred contact method, contact log | descriptive |

| 3551 | [decision_date] | Date: | text (date_mdy), Required |

| 3552 | [decision_rater] | Rater | text, Required |

| 3553 | [phq9_1] | Section Header: *The Patient Health Questionnaire (PHQ-9) Over the last 2 weeks how often have you been bothered by any of the following problems? (Click the circle to indicate your answer)*

 1. Little interest or pleasure in doing things | radio

 0 0- Not at all
 1 1- Several days
 2 2- More than half the days
 3 3- Nearly every day |

| 3554 | [phq9_2] | 2. Feeling down, depressed, or hopeless | radio

 0 0- Not at all
 1 1- Several days
 2 2- More than half the days
 3 3- Nearly every day |

| 3555 | [phq9_3] | 3. Trouble falling or staying asleep, or sleeping too much | radio

 0 0- Not at all
 1 1- Several days |

			2	2- More than half the days
			3	3- Nearly every day

3556 [phq9_4]	4. Feeling tired or having little energy	radio		
			0	0- Not at all
			1	1- Several days
			2	2- More than half the days
			3	3- Nearly every day

3557 [phq9_5]	5. Poor appetite or overeating	radio		
			0	0- Not at all
			1	1- Several days
			2	2- More than half the days
			3	3- Nearly every day

3558 [phq9_6]	6. Feeling bad about yourself -- or that you are a failure or have let yourself or your family down	radio		
			0	0- Not at all
			1	1- Several days
			2	2- More than half the days
			3	3- Nearly every day

3559 [phq9_7]	7. Trouble concentrating on things, such as reading the newspaper or watching television	radio		
			0	0- Not at all
			1	1- Several days
			2	2- More than half the days
			3	3- Nearly every day

3560 [phq9_8]	8. Moving or speaking so slowly that other people could have noticed? Or the opposite -- being so fidgety or restless that you have been moving around a lot more than usual	radio		
			0	0- Not at all
			1	1- Several days
			2	2- More than half the days
			3	3- Nearly every day

3561 [phq9_9]	9. Thoughts that you would be better off dead or of hurting yourself in some way	radio		
			0	0- Not at all
			1	1- Several days
			2	2- More than half the days
			3	3- Nearly every day

3562 [phq9_suicide] Show the field ONLY if: [phq9_9] = '3' or [phq9_9] = '2' or [phq9_9] = '1'	For any score > 0 on #9, conduct Suicide Risk Management protocol	descriptive
3563 [phq9_total_score]	PHQ-9 Total Score:	calc Calculation: [phq9_1]+[phq9_2]+[phq9_3]+ [phq9_4]+[phq9_5]+[phq9_6]+[phq9_7]+ [phq9_8]+[phq9_9]

3564 [phq9_how_difficult]	If you checked off any problems, how difficult have these problems made it for you to do your work, take care of things at home, or get along with other people?	radio
		1 | 1- Not difficult at all
		2 | 2- Somewhat difficult
		3 | 3- Very difficult
		4 | 4- Extremely difficult

3565 [decision_se_1]	Section Header: *Side Effect* 1. Have you had any side effects in the past week from your antidepressant?	yesno 1 | Yes 0 | No
3566 [decision_se_y] Show the field ONLY if: [decision_se_1] = '1'	If Yes, access and add to running list in tracking arm.	descriptive
3567 [decision_se_2] Show the field ONLY if: [decision_se_1] = '1'	2. Given the side effect (s) you told me about, would you be comfortable with continuing at this dose?	radio 1 | Yes 0 | No 2 | Unsure
3568 [decision_se_3] Show the field ONLY if: [decision_se_1] = '1'	3.(If side effects and a dose increase is otherwise warranted) Given the side effect (s) you told me about, would you be comfortable with increasing this dose?	radio 1 | Yes 0 | No 2 | Unsure
3569 [decision_change_1]	Section Header: *Health and Medical Changes* 1. Have you had any new problems with your health since we last spoke with you?	yesno 1 | Yes 0 | No
3570 [decision_change_1y] Show the field ONLY if: [decision_change_1] = '1'	If Yes, access and add to running AE list in tracking arm.	descriptive
3571 [decision_change_2]	2. Have you seen a medical professional since we last talked with you?"	yesno 1 | Yes 0 | No
3572 [decision_change_2y] Show the field ONLY if: [decision_change_2] = '1'	Reason for visit: "What for"?	text
3573 [desicision_change_3]	3. Have you had any medication changes since we last talked with you?	yesno 1 | Yes 0 | No
3574 [dicision_change_3y] Show the field ONLY if: [desicision_change_3] = '1'	If Yes, update medication list in tracking arm.	descriptive

3575	[desicion_change_4]	4. Have you had any medical procedures since we last talked with you?	yesno 1 Yes 0 No
3576	[decision_change_4y] Show the field ONLY if: [desicion_change_4] = '1'	If Yes, access and add to running AE list in tracking arm.	descriptive
3577	[decision_change_5]	5. Note specific details from the patient and follow up with physician and or medical records if unclear:	notes
3578	[decision_alc_cons_text]	Section Header: *Alcohol Consumption* 1. How many drinks containing alcohol did you have in the last week (7 days)? Record a numeric response of the patient's best estimation. Probe for specifics if needed on frequency, # of drinks, and volume estimations. Document any additional pertinent information in the comments field and report to study psychiatrist any amount greater than 7 drinks in a week.	descriptive
3579	[decision_num_drinks]	Number of drinks	text (number)
3580	[decision_alc_cons_comm]	Comments:	notes Custom alignment: LV
3581	[decision_fall_1]	Section Header: *Falls* 1. Have you had any falls since your last assessment? A fall is defined as a slip or trip in which you lost your balance and landed on the floor or ground or lower level.	radio 1 Zero (0) 2 One time (1) 3 Two times (2) 4 Three or more (>2)
3582	[decision_fall_2] Show the field ONLY if: [decision_fall_1] = '2' or [decision_fall_1] = '3' or [decision_fall_1] = '4'	2. Did any of your falls result in the following?	checkbox 1 decision_fall_2___1 1. No injury 2 decision_fall_2___2 2. Minor bruising or cuts 3 decision_fall_2___3 3. Reduced mobility 4 decision_fall_2___4 4. Severe and persistent pain 5 decision_fall_2___5 5. Injury
3583	[decision_fall_3] Show the field ONLY if: [decision_fall_2(3)] = '1' or [decision_fall_2(4)] = '1' or [decision_fall_2(5)] = '1'	Please add the Fall to the AE form!	descriptive
3584	[decision_fall_5] Show the field ONLY if:	NO NEED to add the Fall to the AE form!	descriptive

		[decision_fall_2(1)] = '1' or [decision_fall_2(2)] = '1'	
3585	[decision_fall_4] Show the field ONLY if: [decision_fall_1] = '2' or [decision_fall_1] = '3' or [decision_fall_1] = '4'	Description:	notes
3586	[adherence_1]	Section Header: *Adherence* 1. Review the decisional support provided at the last assessment with the participant: SAY "At your last assessment, we recommended that your doctor continue/ reduce/ increase your dose of ___ to ___ mg per day (if applicable - while continuing to take ___ mg of ___)."	descriptive
3587	[adherence_2]	2. Did you receive the recommended medication and dose?	yesno <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table>
3588	[adherence_2_d] Show the field ONLY if: [adherence_2] = '0'	Describe and problem solve any barriers to obtaining medication:	notes
3589	[adherence_3]	3. Since your last assessment, how often did you miss your recommended dose of each medication?	descriptive
3590	[adherence_3_med1]	Section Header: *Recommended medication 1* Drug name	text BIOPORTAL:RXNORM | BIOPORTAL:RXNORM
3591	[type_in_rec_med1]	Please type in the drug name.	text
3592	[adherence_3_dose1]	Recommended dose	text
3593	[adherence_3_unit1]	Unit	dropdown <table><tr><td>1</td><td>g</td></tr><tr><td>2</td><td>kg</td></tr><tr><td>3</td><td>mcg</td></tr><tr><td>4</td><td>mg</td></tr><tr><td>5</td><td>mL</td></tr><tr><td>6</td><td>tab</td></tr><tr><td>7</td><td>tabs</td></tr><tr><td>8</td><td>tbsp</td></tr><tr><td>9</td><td>tsp</td></tr><tr><td>10</td><td>L</td></tr><tr><td>11</td><td>umol</td></tr><tr><td>12</td><td>mmol</td></tr><tr><td>13</td><td>ng</td></tr></table>

			14	puff
			15	drop
			16	IU
			17	%
			18	mEq

3594	[adherence_3_freq1]	Frequency	dropdown	
			1	Not taking it at all (missed all doses)
			2	Missed dose more often than not
			3	Missed dose more often than 2 times a week
			4	Missed dose more often than 1 time a week
			5	Missed dose 1 time a week
			6	Missed dose less than 1 time a week
			7	Never missed a dose

3595	[adherence_3_med2]	Section Header: *Recommended medication 2* Drug name	text BIOPORTAL:RXNORM BIOPORTAL:RXNORM
3596	[type_in_rec_med2]	Please type in the drug name.	text
3597	[adherence_3_dose2]	Recommended dose	text

3598	[adherence_3_unit2]	Unit	dropdown	
			1	g
			2	kg
			3	mcg
			4	mg
			5	mL
			6	tab
			7	tabs
			8	tbsp
			9	tsp
			10	L
			11	umol
			12	mmol
			13	ng
			14	puff
			15	drop
			16	IU
			17	%
			18	mEq

3599	[adherence_3_freq2]	Frequency	dropdown

			1	Not taking it at all (missed all doses)
			2	Missed dose more often than not
			3	Missed dose more often than 2 times a week
			4	Missed dose more often than 1 time a week
			5	Missed dose 1 time a week
			6	Missed dose less than 1 time a week
			7	Never missed a dose

3600	[adherence_4]	4.Have you been taking a different antidepressant medication instead of or in addition to the ones we recommended?	yesno
			1 Yes
			0 No

3601	[adherence_4_name] Show the field ONLY if: [adherence_4] = '1'	Name of medication	text BIOPORTAL:RXNORM BIOPORTAL:RXNORM

3602	[adherence_5]	5. Have you been taking a different dose of the medication than what we recommended?	yesno
			1 Yes
			0 No

3603	[adherence_5_dose] Show the field ONLY if: [adherence_5] = '1'	Dose *mg*	text

3604	[adherence_comments]	Comments	notes
3605	[tip]	Treatment Initiation and Participation (TIP) as needed	descriptive
3606	[phq9_total_score_copy]	Section Header: *Decision Support Recommendation* PHQ-9 Total Score:	calc Calculation: [phq9_1]+[phq9_2]+[phq9_3]+[phq9_4]+[phq9_5]+[phq9_6]+[phq9_7]+[phq9_8]+[phq9_9]
3607	[dose_chg_table]	Please use this table to determine what dose change, if any, is needed.	descriptive
3608	[decision_rec_dose1_name]	Section Header: *Documentation of Recommendation* Recommended Medication 1:	text BIOPORTAL:RXNORM BIOPORTAL:RXNORM
3609	[rec_med1]	Please type in Recommended Medication 1	text

3610	[decision_rec_dose1]	Recommended Medication 1:	radio
			1 Increase dose
			2 Continue taking
			3 Reduce dose
			4 Stop taking
			5 Start taking

3611	[decision_rec_dose1_1] Show the field ONLY if:	Increase dose of Med. 1 to ___ mg *mg*	text (number)

		[decision_rec_dose1] = '1'	
3612	[decision_rec_dose1_2]	Continue taking Med. 1 at ___ mg *mg*	text (number)
	Show the field ONLY if: [decision_rec_dose1] = '2'		
3613	[decision_rec_dose1_3]	Reduce dose of Med. 1 to ___ mg *mg*	text (number)
	Show the field ONLY if: [decision_rec_dose1] = '3'		

3614	[decision_rec_dose2_name]	Recommended Medication 2:	text

			BIOPORTAL:RXNORM	BIOPORTAL:RXNORM

3615	[rec_med2]	Please type in Recommended Medication 2	text

3616	[decision_rec_dose2]	Recommended Medication 2:	radio

1	Increase dose
2	Continue taking
3	Reduce dose
4	Stop taking
5	Start taking

3617	[decision_rec_dose2_1]	Increase dose of Med. 2 to ___ mg *mg*	text (number)
	Show the field ONLY if: [decision_rec_dose2] = '1'		
3618	[decision_rec_dose2_2]	Continue taking Med. 2 at ___ mg *mg*	text (number)
	Show the field ONLY if: [decision_rec_dose2] = '2'		
3619	[decision_rec_dose2_3]	Reduce dose of Med. 2 to ___ mg *mg*	text (number)
	Show the field ONLY if: [decision_rec_dose2] = '3'		

3620	[decision_check]	Section Header: *Decision Support Checklist* Decision Support Checklist	checkbox

1	decision_check___1	Communicated with study Dr. regarding patient status and dose recommendation
2	decision_check___2	Communicated dose recommendation to patient

				3	decision_check___3	Patient verbalized understanding and agreement with dose recommendation
				4	decision_check___4	Communicated dose recommendation and patient status to provider
				5	decision_check___5	Provider or representative acknowledged receipt of recommendation

3621	[decision_check_com] Show the field ONLY if: [decision_check(4)] = '1'	Method of Communication	checkbox

			1	decision_check_com___1	via EHR
			2	decision_check_com___2	via fax
			3	decision_check_com___3	via e-mail
			4	decision_check_com___4	via phone

3622	[decision_note]	Decision Support Note:	notes
3623	[date_next_call]	Section Header: Date of next Decision Support Call	text (date_mdy)
3624	[decision_support_form_complete]	Section Header: *Form Status* Complete?	dropdown

			0	Incomplete
			1	Unverified
			2	Complete

Instrument: Suicide Risk Management Protocol (SRMP) (suicide_risk_management_protocol_srmp)	**[collapsed]**
Instrument: Blinded SRMP (suicide_risk_management_protocol_srmp_2)	**[collapsed]**
Instrument: NIH Toolbox Followup (nih_toolbox_followup)	**[collapsed]**
Instrument: Spontaneous Report of Side Effects V2 (spontaneous_report_of_side_effects_v2)	**[collapsed]**
Instrument: Adverse Event V2 (adverse_event_v2)	

3865	[adverse_d_v2]	See OPTIMUM Study Protocol for Adverse Event definitions and reporting procedures. The Redcap database will be the primary method for documenting Adverse Events. The presence of Adverse Events will be assessed at each timepoint by asking whether the patient has had any new problems with their health, but new AE's should be documented promptly if they occur between timepoints. If clarification is needed: Mild: Discomfort noticed, but no disruption of normal daily activityModerate: Discomfort	descriptive

		sufficient to reduce or affect normal daily activitySevere: Incapacitating, with inability to work or to perform normal daily activity Note that determining expectedness should take into account the product information AND the population under study (depressed older adults).	
3866	[date_ae_entered]	Section Header: Date Entered	text (date_mdy)
3867	[ae_rater]	Documented by:	text
3868	[reference_guide]	Reference Guide	descriptive
3869	[ae_title]	Section Header: Brief title for AE *NOTE: PLEASE DO NOT ENTER INTO THIS FIELD ANYMORE. THIS FIELD WILL SOON BE DEACTIVATED.*	text Field Annotation: @HIDDEN

3870	[uku_sym_cat]	Symptom Category (UKU)	dropdown, Required	
			20	Accommodation Disturbances
			16	Akathesia
			38	Amenorrhea
			2	Asthenia/Lassitude/Increased Fatiguability
			40	Breast Enlargement
			52	Cold/Flu Symptoms
			1	Concentration Difficulties
			25	Constipation
			60	COVID-19
			54	Decreased Appetite Without Weight Loss
			24	Diarrhea
			42	Diminished Sexual Desire
			55	Dizziness
			46	Dry Vagina
			11	Dystonia
			44	Ejaculatory Dysfunction
			10	Emotional Indifference
			17	Epileptic Seizures
			43	Erectile Dysfunction
			4	Failing Memory
			56	Fall
			39	Galactorrhea
			19	Headache
			49	Hospitalization (non-psychiatric)
			48	Hospitalization (psychiatric)

				50	Hospitalization (With Surgery)
				14	Hyperkinesia
				13	Hypokinesia/Akinesia
				57	Increased Appetite Without Weight Gain
				9	Increased Dream Activity
				7	Increased Duration of Sleep
				34	Increased Pigmentation
				21	Increased Salivation
				41	Increased Sexual Desire
				30	Increased Tendency to Sweating
				58	Irritability or Emotional Lability
				37	Menorrhagia
				26	Micturition Disturbances
				23	Nausea/Vomiting
				45	Orgasmic Dysfunction
				59	Outpatient Surgery
				29	Palpitations/Tachycardia
				18	Paraesthesias
				33	Photosensitivity
				27	Polyuria/Polydipsia
				32	Pruritus
				31	Rash
				8	Reduced Duration of Sleep
				22	Reduced Salivation (Dryness of Mouth)
				12	Rigidity
				3	Sleepiness/Sedation
				6	Tension/Inner Unrest
				15	Tremor
				35	Weight Gain
				36	Weight Loss (Baseline=0)
				47	Other Side Effect That Does Not Fit Any Above
	3871	[sae_text] Show the field ONLY if: [uku_sym_cat] = '48' or [uku_sym_cat] = '49' or [uku_sym_cat] = '50'	PLEASE RECORD THIS AS AN SAE.	descriptive	
	3872	[psychic_side_effect 1]	Difficulties in ability to concentrate, to collect one's thoughts, or sustain one's attention.	radio	

	Show the field ONLY if: [uku_sym_cat] = '1'		1	1: The patient must try harder than usual to collect his/her thoughts, but not to the degree that it hampers the patient in his everyday life.
			2	2: The difficulties in concentrating are pronounced enough to hamper the patient in his everyday life.
			3	3: The patient's difficulties in concentrating are obvious to the interviewer during the interview.
				Custom alignment: LV
3873	[psychic_side_effect 2] Show the field ONLY if: [uku_sym_cat] = '2'	The patient's experience of lassitude and lack of endurance. The assessment is based upon the patient's reported statements.	radio 1	1: The patient tires more easily than usual; however, this does not mean that the patient needs to rest more than usual during the day.
			2	2: Must rest now and then during the day because of lassitude.
			3	3: Must rest most of the day because of lassitude.
				Custom alignment: LV
3874	[psychic_side_effect 3] Show the field ONLY if: [uku_sym_cat] = '3'	Diminished ability to stay awake during the day. When possible, the assessment is based on clinical signs during the interview.	radio 1	1: Slightly sleep/drowsy as regards facial expression and speech.
			2	2: More markedly sleepy/drowsy. The patient yawns and tends to fall asleep when there is a pause in the conversation.
			3	3: Difficult to keep the patient awake and to wake the patient, respectively.
				Custom alignment: LV
3875	[psychic_side_effect 4] Show the field ONLY if: [uku_sym_cat] = '4'	Impaired memory. Assessment should be independent of any concentration difficulties.	radio 1	1: Slight, subjective feeling of reduced memory compared with the patient's usual condition; however, not interfering with functioning.
			2	2: The failing memory hampers the patient and or slight signs of this are observed during the interview.
			3	3: The patient shows clear signs of failing memory during the interview.
				Custom alignment: LV

3876	[psychic_side_effect 6] Show the field ONLY if: [uku_sym_cat] = '6'	Inability to relax, nervous restlessness. This item is to be assed on the basis of the patient's experience and must be distinguished from motor akathesia.	radio 1 | 1: The patient states that he is slightly tense and restless; however, this does not interfere with his functioning. 2 | 2: Considerable tension and inner unrest; however, without this being so intense or constant that the patient's daily life is influenced to any marked degree. 3 | 3: The patient feels tension or restlessness that is so marked that his daily life is clearly affected. Custom alignment: LV
3877	[psychic_side_effect 7] Show the field ONLY if: [uku_sym_cat] = '7'	This should be assessed on the basis of the average of sleep over three preceding nights. The assessment is to be made in relation the patient's usual pre-illness state.	radio 1 | 1: Sleep up to 2 hours longer than usual. 2 | 2: Sleeps 2 or 3 hours longer than usual. 3 | 3: Sleeps more than 3 hours longer than usual. Custom alignment: LV
3878	[psychic_side_effect 8] Show the field ONLY if: [uku_sym_cat] = '8'	Should be assessed on the basis of the average of sleep over the preceding nights. The assessment is to be made in relation to the patient's usual pre-illness state.	radio 1 | 1: Sleep up to 2 hours shorter than usual. 2 | 2: Sleeps 2 or 3 hours shorter than usual. 3 | 3: Sleeps more than 3 hours shorter than usual. Custom alignment: LV
3879	[psychic_side_effect 9] Show the field ONLY if: [uku_sym_cat] = '9'	Should be assessed independently of dream content and based on the average of sleep over the preceding nights in relation to the usual pre-illness dream activity.	radio 1 | 1: Slightly increase dream activity, which does not disturb the nights sleep, however. 2 | 2: More pronounced increase of dream activity. 3 | 3: Very pronounced increase of dream activity. Custom alignment: LV
3880	[psychic_side_effect1 0] Show the field ONLY if: [uku_sym_cat] = '10'	A diminution of the patient's empathy, leading to apathy.	radio 1 | 1: Slight subduing of the patient's empathy. 2 | 2: Obvious emotional indifference. 3 | 3: Pronounced indifference so that the patient behaves apathetically in

		relation to his surroundings.
		Custom alignment: LV

3881 [neuro_side_effect11] Show the field ONLY if: [uku_sym_cat] = '11'	Acute forms of dystonia in the forms of tonic muscular contractions localized to one or several muscle groups, particularly in the mouth, tongue, and/or neck. The assessment is to be made on the basis of the last seven days preceding the examination.	radio

	1	1: Very slight or short spasms, for instance in the musculature of the jaws or neck.
	2	2: More pronounced contractions of a longer duration and/or a wider localization.
	3	3: Marked forms of, for instance, oculogyric crisis or opisthotonos.

Custom alignment: LV

3882 [neuro_side_effect12] Show the field ONLY if: [uku_sym_cat] = '12'	Increased muscle tone of a uniform and general nature, observed on the basis of a uniform, steady resistance to passive movements of the limbs. Special importance is attached to the muscles around the elbow joints and shoulders.	radio

	1	1: Slight rigidity in neck, shoulder, and extremities. It must be possible to observe the rigidity on the basis or resistance to passive movements of the elbow joints.
	2	2: Medium rigidity assessed on the basis of resistance to passive movements of for instance the elbow joints.
	3	3: Very marked rigidity.

Custom alignment: LV

3883 [neuro_side_effect13] Show the field ONLY if: [uku_sym_cat] = '13'	Slow movements (bradykinesia), reduced facial expression, reduced arm swinging, reduced length of stride, perhaps leading to cessation of movement (Akinesia).	radio

	1	1: Slights reduced movement, for instance slightly reduced swinging of an arm when walking or slightly reduced facial expression.
	2	2: More clear reduction of mobility, for instance slow walking.
	3	3: Very marked reduction of mobility, bordering on and including akinesia, e.g. Parkinsonian mask and/or very short length of stride.

Custom alignment: LV

3884 [neuro_side_effect14] Show the field ONLY if: [uku_sym_cat] = '14'	Involuntary movements, most frequently affecting the oro-facial region in the form of the so-called bucco-lingual-masticatory syndrome. However, it is often also seen in the extremities, especially the finger, more rarely in the musculature of the body and respiratory system. Both initial and tardive hyperkinesias are included.	radio

	1	1: Slight hyperkinesias. Only present intermittently.
	2	2: Moderate hyperkinesias present most of the time.
	3	3: Severe hyperkinesias, present most of the time with marked tongue protrusion, opening of the mouth, facial hyperkinesia, with or without involvement of the extremities.

			Custom alignment: LV
3885 [neuro_side_effect15] Show the field ONLY if: [uku_sym_cat] = '15'	This item comprises all forms of tremor.	radio	
			1 | 1: Very slight tremor that does not hamper the patient.
			2 | 2: Clear tremor hampering the patient. The amplitude of finger tremor being less than 3 cm.
			3 | 3: Clear tremor with an amplitude of more than 3 cm and which cannot be controlled by the patient. Custom alignment: LV
3886 [neuro_side_effect16] Show the field ONLY if: [uku_sym_cat] = '16'	A subjective felling and objective signs of muscle unrest, particularly in the lower extremities, so that it may be difficult for the patient to remain seated. Assessment of this item is based on clinical signs observed during the interview, as well as on the patient's report.	radio	
			1 | 1: Slight akathesia; however, the patient can keep still without effort.
			2 | 2: Moderate akathesia; however, the patient can, with an effort, remain sitting during the interview.
			3 | 3: When the patient has to rise to his feet several times during the interview because of akathesia. Custom alignment: LV
3887 [neuro_side_effect17] Show the field ONLY if: [uku_sym_cat] = '17'	Only generalized tonic-clonic seizures are to be recorded here.	radio	
			1 | 1: One seizure within the last six months.
			2 | 2: 2 or 3 seizures within the last six months.
			3 | 3: More than 3 seizures within the last six months. Custom alignment: LV
3888 [neuro_side_effect18] Show the field ONLY if: [uku_sym_cat] = '18'	Pricking, creeping, or burning sensations in the skin.	radio	
			1 | 1: Mild paraethesias, scrarely bothering the patient.
			2 | 2: Moderate paraesthesias, clearly bothering the patient.
			3 | 3: Sever paraesthesia, markedly bothering the patient. Custom alignment: LV
3889 [neuro_side_effect19] Show the field ONLY if: [uku_sym_cat] = '19'		radio	
			1 | 1: Slight headache.
			2 | 2: Moderate hampering headache which does not interfere with the patient's daily life.

				3	3: Pronounced headache interfering with the patient's daily life.

Custom alignment: LV

3890	[autonomic_side_effect20] Show the field ONLY if: [uku_sym_cat] = '20'	Difficulty in seeing clearly or distinctly at close quarters (with or without glasses), whereas the patient sees clearly in a long distance. If the patients uses bifocal glasses, the condition must be asses on the basis of the use of the distance glasses.	radio

1	1: Newspaper text can be read, but the patient's eyes tire rapidly and/or he must hold the paper further away.
2	2: The patient cannon read an ordinary newspaper text, but still manages to read texts printed in larger types.
3	3: The patient can read large type, such a as headlines, only with aid, such as a magnifying glass.

Custom alignment: LV

3891	[autonomic_side_effect21] Show the field ONLY if: [uku_sym_cat] = '21'	Increased, non-stimulated salivation.	radio

1	1: Salivation clearly increased, but not bothersome.
2	2: Disturbing increase of salivation; need for spitting or frequent swallowing of saliva; only exceptional dribbling, perhaps concomitant speech disturbances.
3	3: Frequent or constant dribbling, perhaps concomitant speech disturbances

Custom alignment: LV

3892	[autonomic_side_effect22] Show the field ONLY if: [uku_sym_cat] = '22'	Dryness of mouth because of diminished salivation. May result in increased consumption of liquids, buy must be distinguished from thirst.	radio

1	1: Slight dryness of mouth not disturbing to the patient.
2	2: Moderate and slightly disturbing dryness of mouth.
3	3: Dryness of mouth which clearly disturbs the patient's daily life.

Custom alignment: LV

3893	[autonomic_side_effect23] Show the field ONLY if: [uku_sym_cat] = '23'	To be recorded on the basis of the last seven days.	radio

1	1: Slight nausea.
2	2: Disturbing nausea, but without vomiting.
3	3: Nausea and vomiting.

Custom alignment: LV

3894	[autonomic_side_effect24] Show the field ONLY if:	Increased frequency and/or thinner consistency of feces.	radio

1	1: Clearly present, but does not disturb work, or other performance.

	[uku_sym_cat] = '24'		2	2: Disturbing, with need for several daily, inconvenient stools.
			3	3: Marked, imperative need for defecation, threatening or actual incontinence, results in frequent interruptions of work.
			Custom alignment: LV

3895	[autonomic_side_effect25] Show the field ONLY if: [uku_sym_cat] = '25'	Reduced frequency of defecation and/or thicker consistence of feces. (rate on pts response & if on laxative add 1 point)	radio
			1	1: Slight constipation, but bearable. (if take fiber = 1)
			2	2: More marked constipation which hampers the patient. (slight constipation on laxative =2)
			3	3: Very pronounced constipation.
			Custom alignment: LV

3896	[autonomic_side_effect26] Show the field ONLY if: [uku_sym_cat] = '26'	Feeling of difficulty in starting and of resistance to micturition, weaker stream and/or increased time of nicturition. Should be assessed on the basis of the last 7 days.	radio
			1	1: Clearly present, but bearable.
			2	2: Poor stream, considerable increased time of micturition, feeling of incomplete emptying of bladder.
			3	3: Retention of urine with high volume residual urine and/or threatened or actual or acute retention.
			Custom alignment: LV

3897	[autonomic_side_effect27] Show the field ONLY if: [uku_sym_cat] = '27'	Increased urine production resulting in inreaced frequency of miturition and discharge of an abundant quantity of urine at each micturiton; secondarily increased consumption of fluid.	radio
			1	1: Clearly present, but not hampering. Nocturia: At most once per night (in young people.
			2	2: Moderately hampering because of frequent thirst, nocturia two or three times a night, or micturition more frequent than every two hours.
			3	3: Very hampering, almost constant thirst, nocturia at least four times a night, or micturition at least every hour.
			Custom alignment: LV

3898	[autonomic_side_effect29] Show the field ONLY if: [uku_sym_cat] = '29'	Palpitations, feeling of rapid, strong and/or irregular heartbeats.	radio
			1	1: Clearly present, but not hampering, only short occasional attacks or more constant, but not marked palpitations.
			2	2: Hampering frequent or constant palpitations that worries the patient

			or disturbs his night's sleep; however, without concomitant symptoms.
		3	3: Suspicion of real tachycardia, for instance because of concomitant feeling of weakness and need to lie down, dypsnea, tendency to fainting, or precordial pain.
			Custom alignment: LV

3899	[autonomic_side_effect30] Show the field ONLY if: [uku_sym_cat] = '30'	Localized to the whole body, not only palms and soles of the foot.	radio
			1	1: Clearly present, but mild, for example a profuse outburst of sweat only after considerable effort.
			2	2: Hampering, requires frequent change of clothes, profuse sweating after moderate activity, for instance walking upstairs.
			3	3: Profuse outbursts of sweat after slight activity or when resting, the patient is constantly wet, must change clothes several times a day and must also change night clothes or bedclothes.
			Custom alignment: LV

3900	[other_side_effect31] Show the field ONLY if: [uku_sym_cat] = '31'		radio
			1	1: Localized to less than 5 percent of the skin surface, for instance to the palms.
			2	2: Scattered all over the skin, but covers less than 1/3 of the skin surface.
			3	3: Universal, i.e. covers more than 1/3 of the skin surface.
			Custom alignment: LV

3901	[other_side_effect32] Show the field ONLY if: [uku_sym_cat] = '32'		radio
			1	1: Slight pruritus.
			2	2: Pronounced pruritus, so that the patient is being hampered. There may be scratch marks.
			3	3: Severe pruritus that markedly hampers the patient. There are distinct skin changes because of scratching.
			Custom alignment: LV

3902	[other_side_effect33] Show the field ONLY if: [uku_sym_cat] = '33'	Increased sensitivity to sunlight	radio
			1	1: Slight, but not hampering.

				2	2: More pronounced and hampering to the patient.
				3	3: So pronounced that drug withdraw is clearly necessary.

Custom alignment: LV

3903 [other_side_effect34] Show the field ONLY if: [uku_sym_cat] = '34'	Increased skin pigmentation of brown or other color, often localized to parts of the skin exposed to light.	radio	
		1	1: Slightly increased pigmentation.
		2	2: Such marked pigmentation, generally or localized, that it worries the patient but is not conspicuous to others.
		3	3: So pronounced that the pigmentation can easily be observed by other people.

Custom alignment: LV

3904 [other_side_effect35] Show the field ONLY if: [uku_sym_cat] = '35'	The rating is to be made on the basis of the preceding month. May or may not be associated with increased appetite.	radio	
		1	1: Weight gain amounting to 1-2 kg during the preceding month.
		2	2: Weight gain amounting to 3-4 kg during the preceding month.
		3	3: Weight gain amounting to more than 4 kg during the preceding month.

Custom alignment: LV

3905 [other_side_effect36] Show the field ONLY if: [uku_sym_cat] = '36'	The rating is to be made on the basis of the preceding month. May or may not be associated with reduced appetite.	radio	
		1	1: Weight loss amounting to 1-2 kg during the preceding month.
		2	2: Weight loss amounting to 3-4 kg during the preceding month.
		3	3: Weight loss amounting to more than 4 kg during the preceding month.

Custom alignment: LV

3906 [other_side_effect37] Show the field ONLY if: [uku_sym_cat] = '37'	Hypermenorrhoea, polymenorrhoea, or metrorrhagia during the last 3 months.	radio	
		1	1: Hypermenorrhoea, i.e. the menstrual flow is more intense than usla, the intervals being normal.
		2	2: Polymenorrhoea, i.e. the menstrual flow occurs more frequently and is more intense than normal.
		3	3: Metrorrhagia, i.e. irregular intervals and intensity, the blood loss being more frequent and intense compared with the usual pattern.

				Custom alignment: LV
3907	[other_side_effect38] Show the field ONLY if: [uku_sym_cat] = '38'	Hypomenorrhea, oligomenorrhea, or amenorrhea during the last 3 months.	radio	
			1	1: Hypomenorrhea, i.e. uterine bleeding of less than the normal amount, but occurring at normal intervals.
			2	2: Oligomenorrhea, i.e. prolonged intervals compared with the usual condition; the intensity may also be lower than usual.
			3	3: Amenorrhea, i.e. menstruation has been absent for more than 3 months.
				Custom alignment: LV
3908	[other_side_effect39] Show the field ONLY if: [uku_sym_cat] = '39'	Increased secretion of milk outside periods of breast feeding.	radio	
			1	1: Galactorrhea present, but to a very slight degree.
			2	2: Galactorrhea is present to a moderate degree and is felt to be somewhat disturbing.
			3	3: Galactorrhea is very pronounced and clearly disturbing.
				Custom alignment: LV
3909	[other_side_effect40] Show the field ONLY if: [uku_sym_cat] = '40'	Excessive development of the mammary glands.	radio	
			1	1: Gynecomastia present to a very slight degree compared with the usual state.
			2	2: Gynecomastia clearly present; however, only hampering when patient is undressed.
			3	3: Gynecomastia present to such a severe degree that it affects the patient cosmetically as it can be observed even if he is dressed.
				Custom alignment: LV
3910	[other_side_effect41] Show the field ONLY if: [uku_sym_cat] = '41'	Increased desire for sexual activity.	radio	
			1	1: Slight increase, which is, however, still felt as natural by the partner.
			2	2: Clear increase that has given rise to comments and discussions with the partner.
			3	3: When the usual desire has increased to such a severe extent that the patient's life with his partner is considerably disturbed.
				Custom alignment: LV

3911 [other_side_effect42] Show the field ONLY if: [uku_sym_cat] = '42'	Reduced desire for sexual activity.	radio

		1	1: The desire for sexual activity is slightly diminished, but without hampering the patient.
		2	2: A distinct reduction of the patient's desire for and interest in sexual activity so that it becomes a problem for the patient.
		3	3: Desire and interest have diminished to such an extent that sexual intercourse occurs extremely seldom or has stopped.

Custom alignment: LV

3912 [other_side_effect43] Show the field ONLY if: [uku_sym_cat] = '43'	Difficulty in attaining or maintaining an erection.	radio

		1	1: Slightly diminished ability to attain or maintain an erection.
		2	2: A distinct change in the patient's ability to attain or maintain an erection.
		3	3: The patient only rarely (or never) can attain or maintain an erection.

Custom alignment: LV

3913 [other_side_effect44] Show the field ONLY if: [uku_sym_cat] = '44'	Dysfunction of the patient's ability to control ejaculation. Includes a) premature or b) delayed ejaculation.	radio

		1	1: It is somewhat more difficult than usual for the patient to control ejaculation, but it does not trouble him.
		2	2: A distinct change in the patient's ability to control ejaculation, so that is becomes a problem for him.
		3	3: The patient's ability to control ejaculation is influenced to such an extent that it has become a dominating problem in his sexual intercourse and thus to a great extent influences his experience of orgasm.

Custom alignment: LV

3914 [other_side_effect45] Show the field ONLY if: [uku_sym_cat] = '45'	Difficulty in obtaining and experiencing satisfactory orgasm.	radio

		1	1: It is more difficult for the patient than usual to obtain orgasm and/or the experience of orgasm is slightly influenced.
		2	2: The patient states that there is a clear change in the ability to obtain orgasm and or in the experience of orgasm. This change has reached such a degree that it troubles the patient.

				3	3: When the patient rarely or never can obtain orgasm and/or the experience of orgasm is markedly reduced.

Custom alignment: LV

3915	[other_side_effect46] Show the field ONLY if: [uku_sym_cat] = '46'	Dryness of vagina with sexual stimulation.	radio		
			1	1: Slight dryness of vagina with sexual stimulation.
			2	2: Moderately disturbing dryness of vagina with sexual stimulation.
			3	3: Severely disturbing, marked dryness of vagina making coitus difficult (or necessitating the use of lubricants)

Custom alignment: LV

3916	[other_side_effect_de sc] Show the field ONLY if: [uku_sym_cat] = '47'	Please list the side effect in 1 or 2 words.	text

3917	[side_effect_52] Show the field ONLY if: [uku_sym_cat] = '52'	Cold/Flu Symptoms Severity.	radio		
			1	1: Mild: Discomfort noticed, but no disruption of normal daily activity
			2	2: Moderate: Discomfort sufficient to reduce or affect normal daily activity
			3	3: Severe: Incapacitating, with inability to work or to perform normal daily activity

Custom alignment: LV

3918	[side_effect_54] Show the field ONLY if: [uku_sym_cat] = '54'	Decreased Appetite Without Weight Loss Severity.	radio		
			1	1: Mild: Discomfort noticed, but no disruption of normal daily activity
			2	2: Moderate: Discomfort sufficient to reduce or affect normal daily activity
			3	3: Severe: Incapacitating, with inability to work or to perform normal daily activity

Custom alignment: LV

3919	[side_effect_55] Show the field ONLY if: [uku_sym_cat] = '55'	Feeling of dizziness, weakness, everything going black, buzzing in the ears, or increased tendency to faint. May be associated with changing from supine or sitting position to upright position.	radio		
			1	1: Clearly present, but requires no special countermeasures
			2	2: Hampering, but can be neutralized (for example, by slow and/or stagewise change to upright position).

			3	3: Threatening fainting or real episodes of fainting despite careful change of position, with a tendency to this type of dizziness as long as the patient is in an upright position.
			Custom alignment: LV	
3920	[side_effect_56] Show the field ONLY if: [uku_sym_cat] = '56'	Note that falls are also assessed on the Decision Support Form and all falls should be captured there. Only falls resulting in reduced mobility, severe and persistent pain, or injury should be documented as Adverse Events. A fall resulting in injury and/or hospitalization should only be documented as one Adverse Event.	radio	
			1	1: Mild: Discomfort noticed, but no disruption of normal daily activity.
			2	2: Moderate: Discomfort sufficient to reduce or affect normal daily activity.
			3	3: Severe: Incapacitating, with inability to work or to perform normal daily activity.
			Custom alignment: LV	
3921	[side_effect_49] Show the field ONLY if: [uku_sym_cat] = '49'	Hospitalization (Non-Psychiatric) Severity	radio	
			3	3: Severe
			Custom alignment: LV	
3922	[side_effect_48] Show the field ONLY if: [uku_sym_cat] = '48'	Hospitalization (Psychiatric) Severity	radio	
			3	3: Severe
			Custom alignment: LV	
3923	[side_effect_50] Show the field ONLY if: [uku_sym_cat] = '50'	Hospitalization (With Surgery) Severity	radio	
			3	3: Severe
			Custom alignment: LV	
3924	[side_effect_57] Show the field ONLY if: [uku_sym_cat] = '57'	Increased Appetite Without Weight Gain Severity.	radio	
			1	1: Mild: Noticeable, but no disruption of normal daily activity.
			2	2: Moderate: Discomfort sufficient to reduce or affect normal daily activity.
			3	3: Severe: Incapacitating, with inability to work or to perform normal daily activity.
			Custom alignment: LV	
3925	[side_effect_58] Show the field ONLY if: [uku_sym_cat] = '58'	Irritability or Emotional Lability Severity.	radio	
			1	1: Mild: Discomfort noticed, but no disruption of normal daily activity.
			2	2: Moderate: Discomfort sufficient to reduce or affect normal daily activity.
			3	3: Severe: Incapacitating, with inability to work or to perform normal daily activity.

			Custom alignment: LV
3926 [side_effect_59] Show the field ONLY if: [uku_sym_cat] = '59'	Outpatient Surgery Severity.		radio 2 | 2: Moderate (minimally invasive procedure with minimal recovery time) 3 | 3: Severe (more extensive recovery needed) Custom alignment: LV
3927 [side_effect_60] Show the field ONLY if: [uku_sym_cat] = '60'	COVID-19		radio 1 | 1: Mild: Treated at home 2 | 2: Moderate: Required inpatient hospitalization 3 | 3: Severe: Required ICU
3928 [covid_status] Show the field ONLY if: [uku_sym_cat] = '60'	COVID-19 Test status		radio 1 | 1. Confirmed positive 2 | 2. Suspected but not tested
3929 [ae_sev] Show the field ONLY if: [uku_sym_cat] = '47'	Severity		radio 1 | 1: Mild 2 | 2: Moderate 3 | 3: Severe
3930 [ae_severity] Show the field ONLY if: [uku_sym_cat] = '47'	Severity *NOTE: PLEASE DO NOT ENTER INTO THIS FIELD ANYMORE. THIS FIELD WILL SOON BE DEACTIVATED.*		radio 1 | Mild 2 | Moderate 3 | Severe Field Annotation: @HIDDEN
3931 [ae_onset_date]	Section Header: Onset Date:		text (date_mdy), Required
3932 [ae_onset_during]	Onset occurred during:		dropdown, Required 1 | Step 1 Acute 2 | Step 2 Acute 3 | Step 1 Continuation 4 | Step 2 Continuation 5 | Neuro Follow-up
3933 [ae_narrative]	Section Header: Narrative Description of AE (if needed).		notes Custom alignment: LV
3934 [ae_outcome]	Section Header: Outcome		radio, Required 1 | Resolved 2 | Ongoing 3 | Death

3935 [ae_death_notify] Show the field ONLY if: [ae_outcome] = '3'	Please notify site PI and Dr. Lenze (lenzee@wustl.edu)!	descriptive
3936 [ae_end_date] Show the field ONLY if: [ae_outcome] = '1'	Section Header: End Date:	text (date_mdy)
3937 [ae_relevant_info]	Section Header: List any relevant tests, laboratory data, history, including preexisting medical conditions	notes Custom alignment: LV
3938 [ae_relationship]	Section Header: Relationship	radio 1 | Probably related 2 | Possibly related 3 | Not likely related
3939 [ae_reported_as_se]	Section Header: Was this AE described by the patient as a side effect of a study medication?	yesno 1 | Yes 0 | No
3940 [ae_expected]	Section Header: Expected?	radio 1 | Yes 2 | No, it is an Unexpected AE
3941 [ae_action]	Section Header: Action Taken *NOTE: PLEASE DO NOT ENTER INTO THIS FIELD ANYMORE. THIS FIELD WILL SOON BE DEACTIVATED.*	radio 1 | Study Medication Stopped 2 | Study Medication Dose Reduced 3 | Study Medication Dose Increased 4 | Study Medication Dose Delayed 5 | Other Field Annotation: @HIDDEN
3942 [ae_action_taken]	Action Taken	radio, Required 5 | No Change to Study Med 1 | Study Medication Stopped 2 | Study Medication Dose Reduced 3 | Study Medication Dose Increased 4 | Study Medication Dose Delayed 6 | Other
3943 [ae_action_other] Show the field ONLY if: [ae_action_taken] = '6'	Other:	text Field Annotation: @HIDDEN
3944 [ae_study_term]	Section Header: AE resulted in study termination (withdrawn from study)?	yesno, Required 1 | Yes 0 | No

3945	[ae_study_term_text] Show the field ONLY if: [ae_study_term] = '1'	Please complete the Termination Form!	descriptive
3946	[ae_serious]	Section Header: Serious AE?	yesno, Required 1 Yes 0 No
3947	[ae_death_notify2] Show the field ONLY if: [ae_serious] = '1'	Please notify site PI and Dr. Lenze (lenzee@wustl.edu)!	descriptive
3948	[ae_category] Show the field ONLY if: [ae_serious] = '1'	Category of SAE:	radio 1 Death 2 Life-threatening 3 Hospitalization - initial or prolonged 4 Disability / incapacityCongenital anomaly / birth defect 5 Required intervention to prevent 6 Permanent impairment 7 Other
3949	[ae_category_other] Show the field ONLY if: [ae_category] = '7'	Other	text
3950	[ae_other_category]	Other AE Category *this variable was added after data collection*	dropdown 0 None apply 1 Accommodation problems/blurry vision 2 Akathesia 3 Anxiety / Tension 5 Asthenia/Lassitude/Increased Fatiguability 6 Bronchitis 7 Chest Pain 8 Cold/ flu symptoms 9 Concentration Difficulties 10 Decreased Appetite Without Weight Loss 11 Diarrhea 12 Disturbed Sleep 13 dizziness/impaired balance 14 elevated blood sugar 15 Extremity Swelling 37 Failing memory

				16	Fall
				17	GI distress
				35	Hospitalization - non-psychiatric
				34	Hospitalization - with surgery
				18	Hypertension
				19	Increased Appetite Without Weight Gain
				20	Increased Dream Activity
				38	Increased Salivation
				21	Irritability or Emotional lability
				39	Micturition Disturbances
				22	Muskuloskeletal Pain
				36	Outpatient surgery
				23	Pneumonia
				24	Polyuria/Polydipsia
				25	Pruritus
				40	Rash
				26	Reduced Salivation (Dryness of Mouth)
				27	shakiness
				28	Shortness of breath
				29	slurred speech
				30	Tinnitus
				41	Tremor
				31	Urinary Incontinence
				32	Urinary tract infection
				33	Vertigo

Field Annotation: @HIDDEN

3951	[ae_imp_to_pt_safety] Show the field ONLY if: [ae_serious] = '0' and (((([psychic_side_effect1] = '1' or [psychic_side_effect1] = '2') or ([psychic_side_effect2] = '1' or [psychic_side_effect2] = '2') or ([psychic_side_effect3] = '1' or [psychic_side_effect3] = '2') or ([psychic_side_effect4] = '1' or [psychic_side_effect4] = '2') or ([psychic_side_effect6] = '1' or [psychic_side_effect6] = '2') o	Section Header: AE deemed important to participant safety?	yesno

yesno	
1	Yes
0	No

r ([psychic_side_effect
7] = '1' or [psychic_side
_effect7] = '2') or ([psyc
hic_side_effect8] = '1' o
r [psychic_side_effect8]
= '2') or ([psychic_side_
effect9] = '1' or [psychic
_side_effect9] = '2') or
([psychic_side_effect10]
= '1' or [psychic_side_ef
fect10] = '2') or ([neuro
_side_effect11] = '1' or
[neuro_side_effect11] =
'2') or ([neuro_side_effe
ct12] = '1' or [neuro_sid
e_effect12] = '2') or ([ne
uro_side_effect13] = '1'
or [neuro_side_effect1
3] = '2') or ([neuro_side
_effect14] = '1' or [neur
o_side_effect14] = '2') o
r ([neuro_side_effect15]
= '1' or [neuro_side_eff
ect15] = '2') or ([neuro_
side_effect16] = '1' or
[neuro_side_effect16] =
'2') or ([neuro_side_effe
ct17] = '1' or [neuro_sid
e_effect17] = '2') or ([ne
uro_side_effect18] = '1'
or [neuro_side_effect1
8] = '2') or ([neuro_side
_effect19] = '1' or [neur
o_side_effect19] = '2') o
r ([autonomic_side_effe
ct20] = '1' or [autonomi
c_side_effect20] = '2') o
r ([autonomic_side_effe
ct21] = '1' or [autonomi
c_side_effect21] = '2') o
r ([autonomic_side_effe
ct22] = '1' or [autonomi
c_side_effect22] = '2') o
r ([autonomic_side_effe
ct23] = '1' or [autonomi
c_side_effect23] = '2') o
r ([autonomic_side_effe
ct24] = '1' or [autonomi
c_side_effect24] = '2') o
r ([autonomic_side_effe
ct25] = '1' or [autonomi
c_side_effect25] = '2') o
r ([autonomic_side_effe
ct26] = '1' or [autonomi
c_side_effect26] = '2') o
r ([autonomic_side_effe
ct27] = '1' or [autonomi
c_side_effect27] = '2') o

r ([autonomic_side_effe
ct29] = '1' or [autonomi
c_side_effect29] = '2') o
r ([autonomic_side_effe
ct30] = '1' or [autonomi
c_side_effect30] = '2') o
r ([other_side_effect31]
= '1' or [other_side_effe
ct31] = '2') or ([other_si
de_effect32] = '1' or [ot
her_side_effect32] = '2')
or ([other_side_effect3
3] = '1' or [other_side_e
ffect33] = '2') or ([other
_side_effect34] = '1' or
[other_side_effect34] =
'2') or ([other_side_effe
ct35] = '1' or [other_sid
e_effect35] = '2') or ([ot
her_side_effect36] = '1'
or [other_side_effect3
6] = '2') or ([other_side_
effect37] = '1' or [other
_side_effect37] = '2') or
([other_side_effect38] =
'1' or [other_side_effect
38] = '2') or ([other_side
_effect39] = '1' or [othe
r_side_effect39] = '2') or
([other_side_effect40] =
'1' or [other_side_effect
40] = '2') or ([other_side
_effect41] = '1' or [othe
r_side_effect41] = '2') or
([other_side_effect42] =
'1' or [other_side_effect
42] = '2') or ([other_side
_effect43] = '1' or [othe
r_side_effect43] = '2') or
([other_side_effect44] =
'1' or [other_side_effect
44] = '2') or ([other_side
_effect45] = '1' or [othe
r_side_effect45] = '2') or
([other_side_effect46] =
'1' or [other_side_effect
46] = '2') or ([side_effect
_52] = '1' or [side_effect
_52] = '2') or ([side_effe
ct_54] = '1' or [side_effe
ct_54] = '2') or ([side_eff
ect_55] = '1' or [side_eff
ect_55] = '2') or ([side_e
ffect_56] = '1' or [side_e
ffect_56] = '2') or ([side_
effect_57] = '1' or [side_
effect_57] = '2') or ([side
_effect_58] = '1' or [side

		_effect_58] = '2') or ([side_effect_59] = '2')) or (([ae_sev]='1' or [ae_sev]='2')))	
3952	[ae_dod] Show the field ONLY if: [ae_category] = '1'	Section Header: Date of death	text (date_mdy)
3953	[adverse_event_v2_complete]	Section Header: *Form Status* Complete?	dropdown 0 Incomplete 1 Unverified 2 Complete

Instrument: **Relapse (IF MADRS>=15)** (relapse_if_madrs15)	[collapsed]
Instrument: **Termination Form** (termination_form)	[collapsed]
Instrument: **Medication Form (Please use V2)** (medication_form_please_use_v2)	[collapsed]
Instrument: **Psychiatric Medication Form (Please use V2)** (psychiatric_medication_form_please_use_v2)	[collapsed]
Instrument: **Spontaneous Report Of Side Effects (Please use V2)** (spontaneous_report_of_side_effects_please_use_v2)	[collapsed]
Instrument: **Adverse Event (Please use V2)** (adverse_event_please_use_v2)	[collapsed]
Instrument: **Partial Remission (Toronto only)** (partial_remission_toronto_only)	[collapsed]
Instrument: **Short Blessed Test (Toronto only)** (short_blessed_test_toronto_only)	[collapsed]
Instrument: **Medical Conditions (Toronto only)** (medical_conditions_toronto_only)	[collapsed]
Instrument: **Athf Form (under testing, DO NOT USE)** (athf_form_under_testing_do_not_use)	[collapsed]
Instrument: **Running Clinical Notes (Please transition to v2)** (running_clinical_notes)	[collapsed]
Instrument: **Running Clinical Notes (v2)** (running_clinical_notes_v2)	[collapsed]
Instrument: **Height and Weight** (height_and_weight)	[collapsed]
Instrument: **Local Repeat MADRS** (local_repeat_madrs)	[collapsed]
Instrument: **Local Repeat PHQ-9** (repeat_phq9)	[collapsed]
Instrument: **Labs** (labs)	[collapsed]
Instrument: **Labs (Follow-up)** (labs_fup)	[collapsed]
Instrument: **ECG (Follow-up)** (ecg_followup)	[collapsed]
Instrument: **Survey Reminder** (survey_reminder)	[collapsed]
Instrument: **ATHF Form1 V2** (athf_form1_v2)	[collapsed]
Instrument: **ATHF Form2 (If Needed - Treatments 11-20) V2** (athf_form2_if_needed_treatments_1120_v2)	[collapsed]
Instrument: **ATHF Form3 (If Needed - Treatments 21-30) V2** (athf_form3_if_needed_treatments_2130_v2)	[collapsed]

Instrument: ATHF Form4 (If Needed - Treatments 31-40) V2 (athf_form4_if_needed_treatments_3140_v2)	
	[collapsed]
Instrument: Neuro MRI Form (optimum_neuro_mri)	[collapsed]
Instrument: Analyzed MRI Data - Brain Volumes (analyzed_mri_data)	[collapsed]
Instrument: Demographics (demographics)	[collapsed]
Instrument: Consent Termination Reconsent (consent_termination_reconsent)	[collapsed]
Instrument: Clinical Assessments Dates (clinical_assessments_dates)	[collapsed]
Instrument: Neurocog Assessments Dates (neurocog_assessments_dates)	[collapsed]
Instrument: Biomarkers MRI (biomarkers_mri)	[collapsed]
Instrument: Payment (payment)	[collapsed]
Instrument: Storage (storage)	[collapsed]
Instrument: GUID (guid)	[collapsed]
Instrument: Self Reporting Hearing and Noise Exposure (HNE) (self_reporting_hearing_and_noise_exposure_hne)	[collapsed]
Instrument: Documentation of Missing and Verified Data (missing_data_documentation)	[collapsed]
Instrument: Participant Email (participant_email)	[collapsed]
Instrument: WU COVID 19 Verbal Consent (wu_covid_19_verbal_consent)	[collapsed]
Instrument: Columbia's COVID E-Consent (columbias_covid_econsent)	[collapsed]
Instrument: Columbia's Compensation Form (columbia_compensation_form)	[collapsed]
Instrument: Duke Social Support (DSSI) (duke_social_support_dssi)	[collapsed]
Instrument: Perceived Stress Scale (perceived_stress_scale)	[collapsed]
Instrument: UCLA Revised Loneliness Scale (ucla_revised_loneliness_scale)	[collapsed]
Instrument: Connor-Davidson Resilience Scale (CD-RISC) (connordavidson_resilience_scale_cdrisc)	
	[collapsed]
Instrument: CAAM COVID Survey (caam_covid_survey)	[collapsed]
Instrument: CAAM COVID Survey Antidepressant Section (complete the CAAM COVID Survey First) (covid_survey_antidepressant_section)	[collapsed]
Instrument: PHQ-9 (COVID) (phq9_covid)	[collapsed]
Instrument: Physical Activity (physical_activity_optn_at_month_24)	[collapsed]
Instrument: COVID-19 (covid19)	[collapsed]