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## Teen sleep follow up data

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Wed, Sep 13, 2017 at 5:49 PM

To: Lu Dong <lu.dong@berkeley.edu>

Hi Lulu,

My apologies, I got caught up with payroll and making sure therapist contracts were extended and paid on time. Also my laptop broke which I used to create the scoring spreadsheet for the CBCL. Sorry for the delay! Attached is a zip with the data.

Sydney was not able to come in yesterday to clarify some questions on the CBCL and Ian didn't respond. But I was able to deduce the scoring procedure and used their entries of T-scores to create a digital rubric, so, I didn't have to hand score them. I did notice that the hand scored entries had some consistency issues of T-scores due to the eye tracking numbers in the paper rubric. Also, I adjusted for the age on the FUs, I believe this was not done for the post - it should not make much of a difference since we didn't have a lot of teen in the 6-11 age bracket that would require another rubric. For the teens that were older than 18 I still used the CBCL, 12-18 scoring rubric, otherwise, we would get a lot of missing.

SSHB we only scored the sleepiness, the rest is available if needed. In the pre/post this data was not recorded.

PSQI was recoded and re-scored as question 6 is reverse coded on our dataset. I also performed all the changes I suggested to minimize the missing.

Sleep Diaries: They look more complete and with a lot less issues than the pre/post. After we cleaned them no issues popped up.

MAQ was scored the same as the rescored pre/post. Missing binder was added from the last one I sent you last week.

SAS we have more questions than at pre/post. Also protocol was not followed so for many teens we have data for not going to school in the past week and going to school. Do we have a preference for which we might want to use?

There will be more sleep diaries and CDRS than most measures for each time point, as these were prioritized. For some participants these might be all we have. The CDRS will have a lot of missing from either parent or teen, as sometimes we were not able to get a hold of both. Yet, we focused on getting some measures out of the participants to decrease our drops.

Best,  
Armando

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**Lulu\_FUS\_DATA09132017.zip**  
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