

Form A2: Co-participant Demographics

ADRC name: _____ Participant ID: _____ Form date: ____ / ____ / ____

Visit #: _____ Examiner's initials: _____

INSTRUCTIONS: This form is to be completed by intake interviewer based on co-participant's report. For additional clarification and examples, see the UDS Coding Guidebook for Initial Visit Packet, Form A2. Check only one box per question.

1. What is the co-participant's relationship to the participant?

Check the most appropriate box:

- ☐ 1 Spouse, partner, or companion (include ex-spouse, ex-partner, fiancé(e), boyfriend, girlfriend)
- ☐ 2 Child (by blood or through marriage or adoption)
- ☐ 3 Sibling (by blood or through marriage or adoption)
- ☐ 4 Other relative (by blood or through marriage or adoption)
- ☐ 5 Friend, neighbor, or someone known through family, friends, work, or community (e.g., church)
- ☐ 6 Paid caregiver, health care provider, or clinician

2. How long has the co-participant known the participant?

____ Years (999 = Unknown)

No

Yes

3. Does the co-participant live with the participant?

☐ 0

☐ 1

4. What is the primary mode of contact with the participant?

Check the most appropriate box:

- ☐ 1 In-person ☐ 6 Other (SPECIFY): _____
- ☐ 2 Telephone
- ☐ 3 Video conferencing
- ☐ 4 Texting or email
- ☐ 5 Social media platforms

5. What is the approximate frequency of contact?

Check the most appropriate box:

- ☐ 1 Daily ☐ 4 At least three times per month
- ☐ 2 At least three times per week ☐ 5 Monthly
- ☐ 3 Weekly ☐ 6 Less than once a month

continued...

6.	<p>What is the average amount of time spent in contact with the participant during each encounter?</p>	<p>Check the <u>most</u> appropriate box:</p> <div> <input type="checkbox"/> 1 Less than 5 minutes <i>(appropriate for texting or email and may be applicable to other modes of contact as well)</i> </div> <div> <input type="checkbox"/> 2 5-15 minutes <input type="checkbox"/> 3 15-30 minutes <input type="checkbox"/> 4 30-60 minutes <input type="checkbox"/> 5 Longer than one hour </div>	
		No	Yes
7.	<p>Is there a question about the co-participant's reliability?</p>	<input type="checkbox"/> 0	<input type="checkbox"/> 1