EPAD LCS V.IMI - Data definitions

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An electronic version of these data definitions will be provided online at:

https://fair.addi.ad-datainitiative.org/#/data/home

1 Consent & Eligibility

1.1 Consent (v_imi_epadlcs_consent)

Protocol version consent dates and record of individual consent to optional consent items

FIELD	TYPE	CONSTRAINTS	DESCRIPTION
patient_id	Integer		Patient ID
date_study_partner	Date		What was the date of the signature on informed consent by Study Partner?
date_research_participant	Date		What was the date of the signature on informed consent by Research Participant?
date_protocol	Date		What was the Protocol Version date?
opt1	Text	AGREE	I agree to receive information about clinically relevant incidental findings not related to Alzheimer's disease.
opt2	Text	AGREE	I agree to my GP/treating physician being contacted in relation to these clinically relevant incidental findings not related to Alzheimer's disease.
opt3	Text	AGREE	I agree to the researchers contacting my GP and other relevant doctors I am seeing for further medical information if this is required.
opt4	Text	AGREE	I agree to the data previously collected in the original PC being exported and used in this study.
opt5	Text	AGREE	I agree to the data collected from me during this study to be returned to the PI of the original PC.
opt6	Text	AGREE	I agree to the storage of my material for 15 years after the end of this study, so that it can be used for future research.
opt7	Text	AGREE	I agree to be re-contacted about future research with the same objective.
opt8	Text	AGREE	I agree to be re-contacted about future research with other objectives.

1.2 Eligibility (v_imi_epadlcs_eligibility)

Eligibility confirmation or record of reason for non-eligibility

FIELD	TYPE	CONSTRAINTS	DESCRIPTION
patient_id	Integer		Patient ID
visit	Text		Visit Number
subject_met_elig_criteria	Text	ELIGIBILITY	Did the subject meet all eligibility criteria?
criterion_category_not_met	Text	CATEGORY	What was the category of the criterion?
criterion_id_not_met	Text		Criterion ID Not Met

1.3 Recruitment Link (v_imi_epadlcs_derids)

Derived ID or Velocity ID linking participant to source of recruitment via Parent Cohort (Derived ID) or from a clinic (Velocity IS)

FIELD	TYPE	CONSTRAINTS	DESCRIPTION
patient_id	Integer		Patient ID
derived_id	Text		Derived ID from Parent Cohort
velocity_id	Text		Velocity ID from Clinic

2 Demographics & History

2.1 Socio-demographics (v_imi_epadlcs_socio_demographics)

General demographic data

FIELD	TYPE	CONSTRAINTS	DESCRIPTION
patient_id	Integer		Patient ID
site_name	Text		Site Short Name
site_id	Text		Site ID
sex	Text	SEX	What is the sex of the subject?
age_years	Integer		What is the subject's age?
age_months	Integer		Month
handedness	Text	HANDEDNESS	Handedness
years_education	Integer		Number of years of formal education
marital_status	Text	MARITAL_STATUS	Marital status
ethnicity	Text	ETHNICITY	What is the ethnicity of the subject?

2.2 Dementia (v_imi_epadlcs_family_history)

Family History of Alzheimer's Disease / Dementia

FIELD	TYPE	CONSTRAINTS	DESCRIPTION
patient_id	Integer		Patient ID
family_dementia_history	Text	FAMILY_DEMENTIA_HISTORY	Any family history compatible with Alzheimer's disease or other cause of dementia?
family_member	Text	FAMILY_MEMBER	List any first degree family members with history compatible with AD/Dementia?
bio_relative	Text	BIOLOGICAL_RELATIVE	Biological relative
age_at_diagnosis	Integer		Age at diagnosis

2.3 Physical Examination (v_imi_epadlcs_physical_exam)

FIELD	TYPE	CONSTRAINTS	DESCRIPTION
patient_id	Integer		Patient ID
visit	Text		Visit Number
was_physical_exam_performed	Text	PERFORMED	Was the physical examination performed?
reason_not_performed	Text	REASON_NOT_PERFORMED	Reason not performed
physical_exam_date	Date		Exam Date
was_ecg_performed	Text	PERFORMED	Was ECG performed?
abdomen_results	Text	RESULT	Abdomen - Results
abdomen_abnormal_findings	Text		Abdomen - Abnormal Findings
abdomen_clin_signif	Text	SIGNIFICANT	Abdomen - Clinically Significant
chest_results	Text	RESULT	Chest - Results
chest_abnormal_findings	Text		Chest - Abnormal Findings

chest_clin_signif	Text	SIGNIFICANT	Chest - Clinically Significant
ears_nose_throat_results	Text	RESULT	Ears Nose Throat - Results
ears_nose_throat_abnormal_findings	Text		Ears Nose Throat - Abnormal Findings
ears_nose_throat_clin_signif	Text	SIGNIFICANT	Ears Nose Throat - Clinically Significant
eyes_results	Text	RESULT	Eyes - Results
eyes_abnormal_findings	Text		Eyes - Abnormal Findings
eyes_clin_signif	Text	SIGNIFICANT	Eyes - Clinically Significant
general_appearance_results	Text	RESULT	General Appearance - Results
general_appearance_abnormal_findings	Text		General Appearance - Abnormal Findings
general_appearance_clin_signif	Text	SIGNIFICANT	General Appearance - Clinically Significant
heart_results	Text	RESULT	Heart - Results
heart_abnormal_findings	Text		Heart - Abnormal Findings
heart_clin_signif	Text	SIGNIFICANT	Heart - Clinically Significant
head_neck_throat_results	Text	RESULT	Head Neck Throat - Results
head_neck_throat_abnormal_findings	Text		Head Neck Throat - Abnormal Findings
head_neck_throat_clin_signif	Text	SIGNIFICANT	Head Neck Throat - Clinically Significant
respiratory_results	Text	RESULT	Respiratory - Results
respiratory_abnormal_findings	Text		Respiratory - Abnormal Findings
respiratory_clin_signif	Text	SIGNIFICANT	Respiratory - Clinically Significant
lymph_nodes_results	Text	RESULT	Lymph Nodes - Results
lymph_nodes_abnormal_findings	Text		Lymph Nodes - Abnormal Findings
lymph_nodes_clin_signif	Text	SIGNIFICANT	Lymph Nodes - Clinically Significant
musculoskeletal_results	Text	RESULT	Musculoskeletal - Results
musculoskeletal_abnormal_findings	Text		Musculoskeletal - Abnormal Findings
musculoskeletal_clin_signif	Text	SIGNIFICANT	Musculoskeletal - Clinically Significant
neurological_results	Text	RESULT	Neurological - Results
neurological_abnormal_findings	Text		Neurological - Abnormal Findings
neurological_clin_signif	Text	SIGNIFICANT	Neurological - Clinically Significant
skin_results	Text	RESULT	Skin - Results
skin_abnormal_findings	Text		Skin - Abnormal Findings
skin_clin_signif	Text	SIGNIFICANT	Skin - Clinically Significant

2.4 Vital Signs (v_imi_epadlcs_vital_signs)

FIELD	TYPE	CONSTRAINTS	DESCRIPTION
patient_id	Integer		Patient ID
visit	Text		Visit Number
vital_signs_collected	Text	COLLECTED	Were vital signs collected?
reason_not_collected	Text	REASON_NOT_COLLECTED	If No, Please provide reason.
date_collected	Date		Date
height	Decimal		Height
weight	Decimal		Weight
hip_circumference	Decimal		Hip Circumference
waist_circumference	Decimal		Waist Circumference
systolic_bp	Decimal		Systolic Blood Pressure
diastolic_bp	Decimal		Diastolic Blood Pressure
pulse	Decimal		Pulse

2.5 General Medical History (v_imi_epadlcs_medical_history)

FIELD	TYPE	CONSTRAINTS	DESCRIPTION
patient_id	Integer		Patient ID

medical_history_term	Text	TERM	Medical History Term
medical_history_code	Text	CODE	Medical History Term Coded Value
lowest_level_term	Text		Lowest Level Term
lowest_level_code	Text		Lowest Level Term Code
preferred_term	Text		Preferred Term
preferred_term_code	Text		Preferred Term Code
high_level_term	Text		High Level Term
high_level_term_code	Text		High Level Term Code
high_level_group_term	Text		High Level Group Term
high_level_group_term_code	Text		High Level Group Term Code
body_system_or_organ_class	Text		Body System or Organ Class
body_system_or_organ_class_code	Text		Body System or Organ Class Code
meddra_version_number	Text		MedDRA Version Number

2.6 Current Medication (v_imi_epadlcs_current_medication)

FIELD	TYPE	CONSTRAINTS	DESCRIPTION
patient_id	Integer		Patient ID
medication_therapy	Text		Medication or Therapy
start_date_interpolated	Date		Start Date
start_date_raw	Text		Start Date
end_date_interpolated	Date		End Date
end_date_raw	Text		End Date
ongoing	Text	ONGOING	Is the medication/therapy still ongoing?
indication	Text		Indication
route_of_admin	Text		Route of Administration
whodd_drugname	Text		WHODD Drug Name
whodd_prefname	Text		WHODD Preferred Name
whodd_drugcode	Text		WHODD Drug Code
whodd_version_number	Text		WHODD Version Number

3 Lifestyle Assessment

3.1 Lifestyle Factors (v_imi_epadlcs_life)

FIELD	TYPE	CONSTRAINTS	DESCRIPTION
patient_id	Integer		Patient ID
visit	Text		Visit Number
lifestyle_assessment_completed	Text	PERFORMED	Was the assessment performed?
reason_not_completed	Text	REASON_NOT_PERFORMED	If No, please provide reason.
current_health	Text	CURRENT_HEALTH	How is your current health?
physical activity	Text	PHYSICAL_ACTIVITY	How often do you participate in leisure-time physical activity that lasts at least 20-30 minutes and causes breathlessness and sweating?
physical fitness	Text	PHYSICAL_FITNESS	How is your current physical fitness?
smoking	Text	SMOKING	Smoking
drug_abuse	Text	DRUG_ABUSE	Drug abuse/misuse
drug_name	Text		Name of drug where applicable

3.2 HATICE (v_imi_epadlcs_hatice)

HATICE (Healthy Aging Through Internet Counselling in the Elderly) Questionnaire

FIELD	TYPE	CONSTRAINTS	DESCRIPTION
patient_id	Integer		Patient ID
visit	Text		Visit Number
assessment_performed	Text	PERFORMED	Was the assessment performed?
assessment_date	Date		If Yes, provide date of assessment
reason_not_performed	Text	REASON_NOT_PERFORMED	If No, please provide reason
lcs1	Text	LCS1	Q1. In total how many times do you usually have something to eat or drink during a weekday?
lcs2_1	Decimal		Q2. On average how many servings do you eat a week of the following dishes as a main course? 1. Fish and seafood
lcs2_2	Decimal		Q2. On average how many servings do you eat a week of the following dishes as a main course? 2. Sausage
lcs2_3	Decimal		Q2. On average how many servings do you eat a week of the following dishes as a main course? 3. Poultry or rabbit
lcs2_4	Decimal		Q2. On average how many servings do you eat a week of the following dishes as a main course? 4. Meat (excluding sausage)
lcs2_5	Decimal		Q2. On average how many servings do you eat a week of the following dishes as a main course? 5. Vegetarian
lcs3_1	Decimal		Q3. How many slices of cold cuts do you usually eat per day? 1. slices of cold cuts with greater than 10% fat (local examples)
lcs3_2	Decimal		Q3. How many slices of cold cuts do you usually eat per day? 2. slices of cold cuts with greater than 10% fat (bacon, salami, local examples)
lcs4	Text	LCS4	Q4. How many servings of vegetable based sauces (e.g. made with vegetable oil, tomato, garlic, onion, or other vegetables) do you usually consume with your main meal (e.g. with boiled vegetables, pasta, rice)?
lcs5	Text	LCS5	Q5. What type of cooking fat or oil is most often used in your household?
lcs6	Text	LCS6	Q6. How much olive or vegetable oil do you usually consume per day (including that used in frying, salads, meals eaten away from home, etc.)?
lcs7	Text	LCS7	Q7. How many servings of nuts or seeds do you usually eat?
lcs8	Text	LCS8	Q8. How many servings of legumes (e.g. lentils, beans, peas) do you usually eat?
lcs9	Text	LCS9	Q9. How many servings of other raw or cooked vegetables do you usually eat (e.g. tomatoes, carrots, cabbage, lettuce)?
lcs10	Text	LCS10	Q10. What kind of salad dressing do you usually use?
lcs11	Text	LCS11	Q11. How many servings of fruit do you usually eat?
lcs12_1	Decimal		Q12. How many servings of milk or milk products (excluding butter, cream and cheese) such as yoghurt do you usually consume per day? 1. servings of milk products with less than 1 % fat (skimmed milk or fat-free yogurt)
lcs12_2	Decimal		Q12. How many servings of milk or milk products (excluding butter, cream and cheese) such as yoghurt do you usually consume per day? 2. servings of milk products with 1- less than 2 % fat (semi-skimmed milk)
lcs12_3	Decimal		Q12. How many servings of milk or milk products (excluding butter, cream and cheese) such as yoghurt do you usually consume per day? 3. servings of milk products with 2-3 % fat (full fat milk or regular yogurt)
lcs12_4	Decimal		Q12. How many servings of milk or milk products (excluding butter, cream and cheese) such as yoghurt do you usually consume per day? 4. servings of milk products with greater than 3 % fat or more
lcs12_5	Decimal		Q12. How many servings of milk or milk products (excluding butter, cream and cheese) such as yoghurt do you usually consume per day? 5. servings of sweet milk products such as ice cream or pudding
lcs13	Text	LCS13	Q13. How many servings of butter or cream do you usually consume?

lcs14_1	Decimal		Q14. On average how much bread and these other cereals do you eat per day? 1. slices of rye- or crispbread (greater than;10 g fibre/100g)
lcs14_2	Decimal		Q14. On average how much bread and these other cereals do you eat per day? 2. slices of graham or mixed grain bread (4-10 g fibre/100g)
lcs14_3	Decimal		Q14. On average how much bread and these other cereals do you eat per day? 3. slices of white bread (less than 4 g fibre/100g)
lcs14_4	Decimal		Q14. On average how much bread and these other cereals do you eat per day? 4. servings of cooked porridge (e.g. rye, oat or wheat flake porridge, 1 serving is a medium size cup or about 2.5dl)
lcs14_5	Decimal		Q14. On average how much bread and these other cereals do you eat per day? 5. servings of low-fibre breakfast cereals (e.g. corn flakes or rice crispies, 1 serving is about half a medium size cup or about 1.25 dl)
lcs14_6	Decimal		Q14. On average how much bread and these other cereals do you eat per day? 6. servings of muesli or high-fibre breakfast cereals (1 serving is a small size cup or about 0.8 dl)
lcs14_7	Decimal		Q14. On average how much bread and these other cereals do you eat per day? 7. slices of sweet bread
lcs15_1	Decimal		Q15. On average how many servings of the following starchy food (cooked) do you eat per week? 1. serving of pasta or rice (1 serving of pasta is 1 medium size cup or 2.5 dl, 1 serving of rice is about half a medium size cup or 1.25 dl)
lcs15_2	Decimal		Q15. On average how many servings of the following starchy food (cooked) do you eat per week? 2. serving of potatoes (baked, boiled, mashed) or servings of gnocchi or gateau (1 serving is a medium size cup or 2.5 dl)
lcs15_3	Decimal		Q15. On average how many servings of the following starchy food (cooked) do you eat per week? 3. serving of fries (1 serving is a medium size cup or 2.5dl)
lcs16	Text	LCS16	Q16. What kind of spread do you usually use on your bread?
lcs17_1	Decimal		Q17. How much cheese do you usually eat per day? 1. slices of cheese with less than 20% fat (reduced-fat cheese)
lcs17_2	Decimal		Q17. How much cheese do you usually eat per day? 2. slices of cheese with greater than 20% fat (e.g. Emmenthal, Roquefort, feta)
lcs17_3	Decimal		Q17. How much cheese do you usually eat per day? 3. slices of cheese with vegetable fat
lcs18	Text	LCS18	Q18. How many servings of sweet patisseries or cookies do you eat?
lcs19	Text	LCS19	Q19. How many servings of sugar, honey, sweets or chocolate do you eat?
lcs20_1	Decimal		Q20. On average how often do you drink the following beverages a day? 1. cups of regular tea (1 cup = 2 dl or 200 mls)
lcs20_2	Decimal		Q20. On average how often do you drink the following beverages a day? 2. cups of decaffeinated tea (1 cup = 2 dl)
lcs20_3	Decimal		Q20. On average how often do you drink the following beverages a day? 3. cups of regular coffee (1 cup = 1 dl)
lcs20_4	Decimal		Q20. On average how often do you drink the following beverages a day? 4. cups of decaffeinated coffee (1 cup = 1 dl)
lcs20_5	Decimal		Q20. On average how often do you drink the following beverages a day? 5. bottles of soft drink with sugar (1 bottle = 1/3 liters)
lcs20_6	Decimal		Q20. On average how often do you drink the following beverages a day? 6. bottles of sugar-free soft drink (e.g. Coca Cola Light)
lcs20_7	Decimal		Q20. On average how often do you drink the following beverages a day? 7. glasses of fruit juice (1 glass = about 2 dl)

lcs20_8	Decimal		Q20. On average how often do you drink the following beverages a day? 8. glasses of sugar-sweetened juice (1 glass = about 2 dl)
lcs21	Text	LCS21	Q21. How many units of wine do you usually drink per week?
lcs22	Text	LCS22	Q22. How many units of alcohol do you usually drink per week?

3.3 SNAC (v_imi_epadlcs_snac)

SNAC (Swedish National Study on Aging and Care) Questionnaire

FIELD	TYPE	CONSTRAINTS	DESCRIPTION
patient_id	Integer		Patient ID
visit	Text		Visit Number
assyn	Text	PERFORMED	Was the assessment performed?
assyn_std	Text	PERFORMED_CODE	Was the assessment performed? Coded Value
assdat	Text		If Yes, provide date of assessment
assdat_raw	Text		If Yes, provide date of assessment (Character)
assdat_int	Text		If Yes, provide date of assessment Interpolated
assdat_yyyy	Text		If Yes, provide date of assessment Year
assdat_mm	Text		If Yes, provide date of assessment Month
assdat_dd	Text		If Yes, provide date of assessment Day
hq_2	Text	REASON_NOT_PERFORMED	If No, Please provide reason.
hq_2_std	Text	REASON_NOT_PERFORMED_CODE	If No, Please provide reason. Coded Value
lcs23_1	Text	EVENT	Event
lcs23_1_std	Text	EVENT_CODE	Event Coded Value
lcs23_2	Text	EXPERIENCED	Have you experienced the event?
lcs23_2_std	Text	EXPERIENCED_CODE	Have you experienced the event? Coded Value
lcs23_3	Text		Age
lcs_3_raw	Text		Age (Character)

4 Dementia Assessments

4.1 Dementia Diagnosis (v_imi_epadlcs_dementia_diag)

Dementia status assessed by PI

FIELD	TYPE	CONSTRAINTS	DESCRIPTION
patient_id	Integer		Patient ID
visit	Text		Visit Number
dementia_diagnosed	Text	DIAGNOSED	Dementia diagnosed by the participant's physician?
date_of_diagnosis	Date		Date of diagnosis
type_of_dementia	Text	TYPE	Type of dementia
lowest_level_term	Text		Lowest Level Term
high_level_term	Text		High Level Term
high_level_group_term	Text		High Level Group Term
preferred_name	Text		Preferred Term
body_system_organ_or_class	Text		Body System or Organ Class
meddra_version_number	Text		MedDRA Version Number

4.2 MMSE (v_imi_epadlcs_mmse)

Mini–Mental State Examination (MMSE)

FIELD	TYPE	CONSTRAINTS	DESCRIPTION
patient_id	Integer		Patient ID
visit	Text		Visit Number
mmse_total	Decimal		Total Score
mmse_Calculation_1	Text	SCORE	What is 100 take away 7?
mmse_Calculation_2	Text	SCORE	Keep going
mmse_Calculation_3	Text	SCORE	Keep going
mmse_Calculation_4	Text	SCORE	Keep going
mmse_Calculation_5	Text	SCORE	Keep going
mmse_Comprehension_1	Text	SCORE	Take in right hand
mmse_Comprehension_2	Text	SCORE	Fold in half
mmse_Comprehension_3	Text	SCORE	Put on floor
mmse_drawing_1	Text	SCORE	Copy this design
mmse_naming_1	Text	SCORE	Pencil or Pen
mmse_naming_2	Text	SCORE	Watch
mmse_orientation_1	Text	SCORE	Year?
mmse_orientation_2	Text	SCORE	Season?
mmse_orientation_3	Text	SCORE	Month of the Year?
mmse_orientation_4	Text	SCORE	Day of the week?
mmse_orientation_5	Text	SCORE	Date?
mmse_orientation_6	Text	SCORE	State?
mmse_orientation_7	Text	SCORE	County?
mmse_orientation_8	Text	SCORE	City/town?
mmse_orientation_9	Text	SCORE	Building?
mmse_orientation_10	Text	SCORE	Floor of building?
mmse_reading_1	Text	SCORE	Close your eyes
mmse_recall_1	Text	SCORE	Apple
mmse_recall_2	Text	SCORE	Penny
mmse_recall_3	Text	SCORE	Table
mmse_registration_1	Text	SCORE	Trial 1- Apple
mmse_registration_2	Text	SCORE	Trial 1- Penny
mmse_registration_3	Text	SCORE	Trial 1- Table
mmse_registration_4	Text	SCORE	Trial 2- Apple
mmse_registration_5	Text	SCORE	Trial 2- Penny
mmse_registration_6	Text	SCORE	Trial 2- Table
mmse_registration_7	Text	SCORE	Trial 3- Apple
mmse_registration_8	Text	SCORE	Trial 3- Penny
mmse_registration_9	Text	SCORE	Trial 3- Table
mmse_registration_10	Text	SCORE	Trial 4- Apple
mmse_registration_11	Text	SCORE	Trial 4- Penny
mmse_registration_12	Text	SCORE	Trial 4- Table
mmse_registration_13	Text	SCORE	Trial 5- Apple
mmse_registration_14	Text	SCORE	Trial 5- Penny
mmse_registration_15	Text	SCORE	Trial 5- Table
mmse_repetition_1	Text	SCORE	No ifs, ands, or buts
mmse_writing_1	Text	SCORE	Write a sentence
assessment_performed	Text	PERFORMED	Was the assessment performed?
assessment_date	Date		If Yes, provide date of assessment
reason_not_performed	Text	REASON_NOT_PERFORMED	If No, Please provide reason.

4.3 CDR (v_imi_epadlcs_cdr)

Clinical Dementia Rating (CDR)

FIELD	TYPE	CONSTRAINTS	DESCRIPTION
patient_id	Integer		Patient ID
visit	Text		Visit Number
cdr_global_score	Decimal		Global CDR Score
cdr_sum_of_box	Decimal		CDR Sum of Boxes
cdr_community_affairs	Text	COMMUNITY_AFFAIRS	Community Affairs
cdr_home_hobbies	Text	HOME_HOBBIES	Home and Hobbies
cdr_judgement	Text	JUDGEMENT	Judgement and Problem Solving
cdr_memory	Text	MEMORY	Memory
cdr_orientation	Text	ORIENTATION	Orientation
cdr_personal_care	Text	PERSONAL_CARE	Personal Care
assessment_performed	Text	PERFORMED	Was the assessment performed?
assessment_date	Date		If Yes, provide date of assessment
reason_not_performed	Text	REASON_NOT_PERFORMED	If No, Please provide reason.

5 EPAD ENE (Neuropsychological Examination)

5.1 RBANS (v_imi_epadlcs_rbans)

RBANS (Repeatable Battery for the Assessment of Neuropsychological Status)

FIELD	TYPE	CONSTRAINTS	DESCRIPTION
patient_id	Integer		Patient ID
visit	Text		Visit Number
rbans_total_scale	Decimal		Total Scale
rbans_sum_of_index	Decimal		Sum Of Index Scores
rbans_attention_index	Decimal		Attention Index Score
rbans_delayed_memory_index	Decimal		Delayed Memory Index Score
rbans_immediate_memory_index	Decimal		Immediate Memory Index Score
rbans_language_index	Decimal		Language Index Score
rbans_visuo_constructional_index	Decimal		Visuospatial / Constructional Index Score
rbans_coding	Decimal		Coding
rbans_digit_span	Decimal		Digit Span
rbans_figure_copy	Decimal		Figure Copy
rbans_figure_recall	Decimal		Figure Recall
rbans_list_learning	Decimal		List Learning
rbans_line_orientation	Decimal		Line Orientation
rbans_list_recall	Decimal		List Recall
rbans_list_recognition	Decimal		List Recognition
rbans_picture_naming	Decimal		Picture Naming
rbans_semantic_fluency	Decimal		Semantic Fluency
rbans_story_memory	Decimal		Story Memory
rbans_story_recall	Decimal		Story Recall
assessment_performed	Text	PERFORMED	Was the assessment performed?
assessment_date	Date		If Yes, provide date of assessment
reason_not_performed	Text	REASON_NOT_PERFORMED	If No, Please provide reason.

5.2 Dot Counting (v_imi_epadlcs_dot_counting)

FIELD	TYPE	CONSTRAINTS	DESCRIPTION
patient_id	Integer		Patient ID
visit	Text		Visit Number

dotcount_t1	Integer		Trial 1: Number of correct responses
dotcount_t2	Integer		Trial 2: Number of correct responses
dotcount_t3	Integer		Trial 3: Number of correct responses
dotcount_t4	Integer		Trial 4: Number of correct responses
dotcount_t5	Integer		Trial 5: Number of correct responses
dotcount_t6	Integer		Trial 6: Number of correct responses
dotcount_total	Integer		Total number of correct responses across all trials
assessment_performed	Text	PERFORMED	Was the assessment performed?
assessment_date	Date		If Yes, provide date of assessment
reason_not_performed	Text	REASON_NOT_PERFORMED	If No, please provide reason

5.3 Flanker (v_imi_epadlcs_flanker)

FIELD	TYPE	CONSTRAINTS	DESCRIPTION
patient_id	Integer		Patient ID
visit	Text		Visit Number
flanker_total_trials	Integer		Total trials
flanker_score	Decimal		All trials: Global score that combines accuracy and reaction time scores
flanker_error_diff	Integer		All trials: Global score error differential between congruent and incongruent trials
flanker_total_corr	Integer		All Trials: Total number of correct trials
flanker_total_mean	Decimal		All Trials: Mean reaction time of correct trials
flanker_total_median	Decimal		All Trials: Median reaction time of correct trials
flanker_total_stdev	Decimal		All trials: Standard deviation of reaction time of all trials
flanker_congr_corr	Integer		Congruent Trials: Total number of correct trials
flanker_congr_mean	Decimal		Congruent Trials: Mean reaction time of correct trials
flanker_congr_median	Decimal		Congruent Trials: Median reaction time of correct trials
flanker_congr_stdev	Decimal		Congruent Trials: Standard deviation of reaction time of correct trials
flanker_incongr_corr	Integer		Incongruent Trials: Total number of correct trials
flanker_incongr_mean	Decimal		Incongruent Trials: Mean reaction time of correct trials
flanker_incongr_median	Decimal		Incongruent Trials: Median reaction time of correct trials
flanker_incongr_stdev	Decimal		Incongruent Trials: Standard deviation of reaction time of correct trials
flanker_left_corr	Integer		Left Trials: Total number of correct trials
flanker_left_mean	Decimal		Left Trials: Mean response time of correct trials
flanker_left_median	Decimal		Left Trials: Median response time of correct trials
flanker_left_stdev	Decimal		Left Trials: Standard deviation of response times of correct trials
flanker_right_corr	Integer		Right Trials: Total number of correct trials
flanker_right_mean	Decimal		Right Trials: Mean response time of correct trials
flanker_right_median	Decimal		Right Trials: Median response time of correct trials
flanker_right_stdev	Decimal		Right Trials: Standard deviation of response times of correct trials
flanker_up_corr	Integer		Up Trials: Total number of correct trials
flanker_up_mean	Decimal		Up Trials: Mean response time of correct trials
flanker_up_median	Decimal		Up Trials: Median response time of correct trials
flanker_up_stdev	Decimal		Up Trials: Standard deviation of response times of correct trials
flanker_down_corr	Integer		Down Trials: Total number of correct trials
flanker_down_mean	Decimal		Down Trials: Mean response time of correct trials
flanker_down_median	Decimal		Down Trials: Median response time of correct trials
flanker_down_stdev	Decimal		Down Trials: Standard deviation of response times of correct trials
assessment_performed	text	PERFORMED	Was the assessment performed?
assessment_date	Date		If Yes, provide date of assessment
reason_not_performed	text	REASON_NOT_PERFORMED	If No, please provide reason

5.4 Favourites (v_imi_epadlcs_favourites)

FIELD	TYPE	CONSTRAINTS	DESCRIPTION
patient_id	Integer		Patient ID
visit	Text		Visit Number
fav_learn_r1_food_1	Text		Recall 1 Food 1: Subject's Response
fav_learn_r1_food_1_score	Text	SCORE	Recall 1 Food 1: Subject's Score
fav_learn_r1_animal_1	Text		Recall 1 Animal 1: Subject's Response
fav_learn_r1_animal_1_score	Text	SCORE	Recall 1 Animal 1: Subject's Score
fav_learn_r1_food_2	Text		Recall 1 Food 2: Subject's Response
fav_learn_r1_food_2_score	Text	SCORE	Recall 1 Food 2: Subject's Score
fav_learn_r1_animal_2	Text		Recall 1 Animal 2: Subject's Response
fav_learn_r1_animal_2_score	Text	SCORE	Recall 1 Animal 2: Subject's Score
fav_learn_r1_food_3	Text		Recall 1 Food 3: Subject's Response
fav_learn_r1_food_3_score	Text	SCORE	Recall 1 Food 3: Subject's Score
fav_learn_r1_animal_3	Text		Recall 1 Animal 3: Subject's Response
fav_learn_r1_animal_3_score	Text	SCORE	Recall 1 Animal 3: Subject's Score
fav_learn_r1_food_4	Text		Recall 1 Food 4: Subject's Response
fav_learn_r1_food_4_score	Text	SCORE	Recall 1 Food 4: Subject's Score
fav_learn_r1_animal_4	Text		Recall 1 Animal 4: Subject's Response
fav_learn_r1_animal_4_score	Text	SCORE	Recall 1 Animal 4: Subject's Score
fav_learn_r1_correct	Integer		Number of correct responses across the first learning trial
fav_learn_r1_sme	Integer		Number of source memory errors across the first learning trial, i.e., answering a food/animal that was presented but matching it with an incorrect face
fav_learn_r1_int	Integer		Number of intrusions across the first learning trial, i.e., answering a food/animal that was never presented
fav_learn_r2_food_1	Text		Recall Two Food 1: Subject's Response
fav_learn_r2_food_1_score	Text	SCORE	Recall Two Food 1: Subject's Score
fav_learn_r2_animal_1	Text		Recall Two Animal 1: Subject's Response
fav_learn_r2_animal_1_score	Text	SCORE	Recall Two Animal 1: Subject's Score
fav_learn_r2_food_2	Text		Recall Two Food 2: Subject's Response
fav_learn_r2_food_2_score	Text	SCORE	Recall Two Food 2: Subject's Score
fav_learn_r2_animal_2	Text		Recall Two Animal 2: Subject's Response
fav_learn_r2_animal_2_score	Text	SCORE	Recall Two Animal 2: Subject's Score
fav_learn_r2_food_3	Text		Recall Two Food 3: Subject's Response
fav_learn_r2_food_3_score	Text	SCORE	Recall Two Food 3: Subject's Score
fav_learn_r2_animal_3	Text		Recall Two Animal 3: Subject's Response
fav_learn_r2_animal_3_score	Text	SCORE	Recall Two Animal 3: Subject's Score
fav_learn_r2_food_4	Text		Recall Two Food 4: Subject's Response
fav_learn_r2_food_4_score	Text	SCORE	Recall Two Food 4: Subject's Score
fav_learn_r2_animal_4	Text		Recall Two Animal 4: Subject's Response
fav_learn_r2_animal_4_score	Text	SCORE	Recall Two Animal 4: Subject's Score
fav_learn_r2_correct	Integer		Number of correct responses across the second learning trial
fav_learn_r2_sme	Integer		Number of source memory errors across the second learning trial, i.e., answering a food/animal that was presented but matching it with an incorrect face
fav_learn_r2_int	Integer		Number of intrusions across the second learning trial, i.e., answering a food/animal that was never presented
fav_delay_food_1	Text		Delayed Recall Food 1: Subject's Response
fav_delay_food_1_score	Text	SCORE	Delayed Recall Food 1: Subject's Score
fav_delay_animal_1	Text		Delayed Recall Animal 1: Subject's Response
fav_delay_animal_1_score	Text	SCORE	Delayed Recall Animal 1: Subject's Score

Protective Marking: Internal

fav_delay_food_2	Text		Delayed Recall Food 2: Subject's Response
fav_delay_food_2_score	Text	SCORE	Delayed Recall Food 2: Subject's Score
fav_delay_animal_2	Text		Delayed Recall Animal 2: Subject's Response
fav_delay_animal_2_score	Text	SCORE	Delayed Recall Animal 2: Subject's Score
fav_delay_food_3	Text		Delayed Recall Food 3: Subject's Response
fav_delay_food_3_score	Text	SCORE	Delayed Recall Food 3: Subject's Score
fav_delay_animal_3	Text		Delayed Recall Animal 3: Subject's Response
fav_delay_animal_3_score	Text	SCORE	Delayed Recall Animal 3: Subject's Score
fav_delay_food_4	Text		Delayed Recall Food 4: Subject's Response
fav_delay_food_4_score	Text	SCORE	Delayed Recall Food 4: Subject's Score
fav_delay_animal_4	Text		Delayed Recall Animal 4: Subject's Response
fav_delay_animal_4_score	Text	SCORE	Delayed Recall Animal 4: Subject's Score
fav_delay_correct	Integer		Number of correct responses across the delayed recall trial
fav_delay_sme	Integer		Number of source memory errors across the second learning trial, i.e., answering a food/animal that was presented but matching it with an incorrect face
fav_delay_int	Integer		Number of intrusions across the second learning trial, i.e., answering a food/animal that was never presented
fav_delay_total_correct	Integer		Total number of correct responses summed across the two learning trials in Favorites Learning and the recall trial in Favorites Delay
fav_delay_total_sme	Integer		Total number of source memory errors summed across the two learning trials in Favorites Learning and the recall trial in Favorites Delay
fav_delay_total_int	Integer		Total number of intrusions summed across the two learning trials in Favourites Learning and the recall trial in Favourites Delay
fav_rec_t1	Text	CORRECT	Trial 1: Subject's response of whether the food or animal presented is paired with the correct face.
fav_rec_t2	Text	CORRECT	Trial 2: Subject's response of whether the food or animal presented is paired with the correct face.
fav_rec_t3	Text	CORRECT	Trial 3: Subject's response of whether the food or animal presented is paired with the correct face.
fav_rec_t4	Text	CORRECT	Trial 4: Subject's response of whether the food or animal presented is paired with the correct face.
fav_rec_t5	Text	CORRECT	Trial 5: Subject's response of whether the food or animal presented is paired with the correct face.
fav_rec_t6	Text	CORRECT	Trial 6: Subject's response of whether the food or animal presented is paired with the correct face.
fav_rec_t7	Text	CORRECT	Trial 7: Subject's response of whether the food or animal presented is paired with the correct face.
fav_rec_t8	Text	CORRECT	Trial 8: Subject's response of whether the food or animal presented is paired with the correct face.
fav_rec_t9	Text	CORRECT	Trial 9: Subject's response of whether the food or animal presented is paired with the correct face.
fav_rec_t10	Text	CORRECT	Trial 10: Subject's response of whether the food or animal presented is paired with the correct face.
fav_rec_t11	Text	CORRECT	Trial 11: Subject's response of whether the food or animal presented is paired with the correct face.
fav_rec_t12	Text	CORRECT	Trial 12: Subject's response of whether the food or animal presented is paired with the correct face.
fav_rec_t13	Text	CORRECT	Trial 13: Subject's response of whether the food or animal presented is paired with the correct face.
fav_rec_t14	Text	CORRECT	Trial 14: Subject's response of whether the food or animal presented is paired with the correct face.
fav_rec_t15	Text	CORRECT	Trial 15: Subject's response of whether the food or animal presented is paired with the correct face.
fav_rec_t16	Text	CORRECT	Trial 16: Subject's response of whether the food or animal presented is paired with the correct face.

fav_rec_t17	Text	CORRECT	Trial 17: Subject's response of whether the food or animal presented is paired with the correct face.
fav_rec_t18	Text	CORRECT	Trial 18: Subject's response of whether the food or animal presented is paired with the correct face.
fav_rec_t19	Text	CORRECT	Trial 19: Subject's response of whether the food or animal presented is paired with the correct face.
fav_rec_t20	Text	CORRECT	Trial 20: Subject's response of whether the food or animal presented is paired with the correct face.
fav_rec_t21	Text	CORRECT	Trial 21: Subject's response of whether the food or animal presented is paired with the correct face.
fav_rec_t22	Text	CORRECT	Trial 22: Subject's response of whether the food or animal presented is paired with the correct face.
fav_rec_t23	Text	CORRECT	Trial 23: Subject's response of whether the food or animal presented is paired with the correct face.
fav_rec_t24	Text	CORRECT	Trial 24: Subject's response of whether the food or animal presented is paired with the correct face.
fav_rec_total_correct	Integer		Total number of correct responses summed across all Recognition trials
fav_rec_total_sme	Integer		Total number of source memory errors summed across all Recognition trials
fav_rec_total_int	Integer		Total number of intrusions summed across all Recognition trials
fav_rec_dprime	Integer		Score that reflects the recognition discriminability accuracy across all Favourites Recognition trials. Higher scores reflect better performance.
fav_rec_bias	Integer		Score that reflects the response bias across all Favourites Recognition trials. Higher scores reflect worse performance.
assessment_performed	Text	PERFORMED	Was the assessment performed?
assessment_date	Date		If Yes, provide date of assessment
reason_not_performed	Text	REASON_NOT_PERFORMED	If No, please provide reason

5.5 4MT – Examiner (v_imi_epadlcs_four_mountains_medavante)

Four Mountains Test (4MT) - Examiner recorded

FIELD	TYPE	CONSTRAINTS	DESCRIPTION
patient_id	Integer		Patient ID
visit	Text		Visit Number
fms_med_item1_answer	Text	ANSWER	Four Mountains Test Medavante Item 1 Answer
fms_med_item2_answer	Text	ANSWER	Four Mountains Test Medavante Item 2 Answer
fms_med_item3_answer	Text	ANSWER	Four Mountains Test Medavante Item 3 Answer
fms_med_item4_answer	Text	ANSWER	Four Mountains Test Medavante Item 4 Answer
fms_med_item5_answer	Text	ANSWER	Four Mountains Test Medavante Item 5 Answer
fms_med_item6_answer	Text	ANSWER	Four Mountains Test Medavante Item 6 Answer
fms_med_item7_answer	Text	ANSWER	Four Mountains Test Medavante Item 7 Answer
fms_med_item8_answer	Text	ANSWER	Four Mountains Test Medavante Item 8 Answer
fms_med_item9_answer	Text	ANSWER	Four Mountains Test Medavante Item 9 Answer
fms_med_item10_answer	Text	ANSWER	Four Mountains Test Medavante Item 10 Answer
fms_med_item11_answer	Text	ANSWER	Four Mountains Test Medavante Item 11 Answer
fms_med_item12_answer	Text	ANSWER	Four Mountains Test Medavante Item 12 Answer
fms_med_item13_answer	Text	ANSWER	Four Mountains Test Medavante Item 13 Answer
fms_med_item14_answer	Text	ANSWER	Four Mountains Test Medavante Item 14 Answer
fms_med_item15_answer	Text	ANSWER	Four Mountains Test Medavante Item 15 Answer
fms_med_item1_mark	Text	MARK	Four Mountains Test Medavante Item 1 Mark
fms_med_item2_mark	Text	MARK	Four Mountains Test Medavante Item 2 Mark
fms_med_item3_mark	Text	MARK	Four Mountains Test Medavante Item 3 Mark
fms_med_item4_mark	Text	MARK	Four Mountains Test Medavante Item 4 Mark

fms_med_item5_mark	Text	MARK	Four Mountains Test Medavante Item 5 Mark
fms_med_item6_mark	Text	MARK	Four Mountains Test Medavante Item 6 Mark
fms_med_item7_mark	Text	MARK	Four Mountains Test Medavante Item 7 Mark
fms_med_item8_mark	Text	MARK	Four Mountains Test Medavante Item 8 Mark
fms_med_item9_mark	Text	MARK	Four Mountains Test Medavante Item 9 Mark
fms_med_item10_mark	Text	MARK	Four Mountains Test Medavante Item 10 Mark
fms_med_item11_mark	Text	MARK	Four Mountains Test Medavante Item 11 Mark
fms_med_item12_mark	Text	MARK	Four Mountains Test Medavante Item 12 Mark
fms_med_item13_mark	Text	MARK	Four Mountains Test Medavante Item 13 Mark
fms_med_item14_mark	Text	MARK	Four Mountains Test Medavante Item 14 Mark
fms_med_item15_mark	Text	MARK	Four Mountains Test Medavante Item 15 Mark
assessment_performed	Text	PERFORMED	Was the assessment performed?
assessment_date	Date		If Yes, provide date of assessment
reason_not_performed	Text	REASON_NOT_PERFORMED	If No, Please provide reason.

5.6 4MT – Tablet (v_imi_epadlcs_four_mountains_tabcat)

Four Mountains Test (4MT) - Tablet recorded

FIELD	TYPE	CONSTRAINTS	DESCRIPTION
patient_id	Integer		Patient ID
visit	Text		Visit Number
fms_t1_choice	Text	CHOICE	Trial 1: Subject's response
fms_t1_rt	Decimal		Trial 1: Subject's reaction time
fms_t1_score	Text	SCORE	Trial 1: Subject's score
fms_t2_choice	Text	CHOICE	Trial 2: Subject's response
fms_t2_rt	Decimal		Trial 2: Subject's reaction time
fms_t2_score	Text	SCORE	Trial 2: Subject's score
fms_t3_choice	Text	CHOICE	Trial 3: Subject's response
fms_t3_rt	Decimal		Trial 3: Subject's reaction time
fms_t3_score	Text	SCORE	Trial 3: Subject's score
fms_t4_choice	Text	CHOICE	Trial 4: Subject's response
fms_t4_rt	Decimal		Trial 4: Subject's reaction time
fms_t4_score	Text	SCORE	Trial 4: Subject's score
fms_t5_choice	Text	CHOICE	Trial 5: Subject's response
fms_t5_rt	Decimal		Trial 5: Subject's reaction time
fms_t5_score	Text	SCORE	Trial 5: Subject's score
fms_t6_choice	Text	CHOICE	Trial 6: Subject's response
fms_t6_rt	Decimal		Trial 6: Subject's reaction time
fms_t6_score	Text	SCORE	Trial 6: Subject's score
fms_t7_choice	Text	CHOICE	Trial 7: Subject's response
fms_t7_rt	Decimal		Trial 7: Subject's reaction time
fms_t7_score	Text	SCORE	Trial 7: Subject's score
fms_t8_choice	Text	CHOICE	Trial 8: Subject's response
fms_t8_rt	Decimal		Trial 8: Subject's reaction time
fms_t8_score	Text	SCORE	Trial 8: Subject's score
fms_t9_choice	Text	CHOICE	Trial 9: Subject's response
fms_t9_rt	Decimal		Trial 9: Subject's reaction time
fms_t9_score	Text	SCORE	Trial 9: Subject's score
fms_t10_choice	Text	CHOICE	Trial 10: Subject's response
fms_t10_rt	Decimal		Trial 10: Subject's reaction time
fms_t10_score	Text	SCORE	Trial 10: Subject's score
fms_t11_choice	Text	CHOICE	Trial 11: Subject's response

fms_t11_rt	Decimal		Trial 11: Subject's reaction time
fms_t11_score	Text	SCORE	Trial 11: Subject's score
fms_t12_choice	Text	CHOICE	Trial 12: Subject's response
fms_t12_rt	Decimal		Trial 12: Subject's reaction time
fms_t12_score	Text	SCORE	Trial 12: Subject's score
fms_t13_choice	Text	CHOICE	Trial 13: Subject's response
fms_t13_rt	Decimal		Trial 13: Subject's reaction time
fms_t13_score	Text	SCORE	Trial 13: Subject's score
fms_t14_choice	Text	CHOICE	Trial 14: Subject's response
fms_t14_rt	Decimal		Trial 14: Subject's reaction time
fms_t14_score	Text	SCORE	Trial 14: Subject's score
fms_t15_choice	Text	CHOICE	Trial 15: Subject's response
fms_t15_rt	Decimal		Trial 15: Subject's reaction time
fms_t15_score	Text	SCORE	Trial 15: Subject's score
fms_total_target	Text		Total target responses
fms_total_configural	Text		Total configural responses
fms_total_spatial	Text		Total spatial responses
fms_total_elemental	Text		Total elemental responses
fms_total_noresponse	Text		Total no response
fms_total_avgtr	Decimal		Total average reaction time
fms_total_perccorr	Decimal		Total percentage correct responses
fms_total_score	Text		Total score
assessment_performed	Text	PERFORMED	Was the assessment performed?
assessment_date	Date		If Yes, provide date of assessment
reason_not_performed	Text	REASON_NOT_PERFORMED	If No, please provide reason

5.7 4MT – Tablet (v_imi_epadlcs_four_mountains_uedin)

Four Mountains Test (4MT) - Tablet recorded

FIELD	TYPE	CONSTRAINTS	DESCRIPTION
patient_id	Integer		Patient ID
visit	Text		Visit Number
fms_uedin_answer1	Text	ANSWER	Selected Answer - Trial 1
fms_uedin_answer2	Text	ANSWER	Selected Answer - Trial 2
fms_uedin_answer3	Text	ANSWER	Selected Answer - Trial 3
fms_uedin_answer4	Text	ANSWER	Selected Answer - Trial 4
fms_uedin_answer5	Text	ANSWER	Selected Answer - Trial 5
fms_uedin_answer6	Text	ANSWER	Selected Answer - Trial 6
fms_uedin_answer7	Text	ANSWER	Selected Answer - Trial 7
fms_uedin_answer8	Text	ANSWER	Selected Answer - Trial 8
fms_uedin_answer9	Text	ANSWER	Selected Answer - Trial 9
fms_uedin_answer10	Text	ANSWER	Selected Answer - Trial 10
fms_uedin_answer11	Text	ANSWER	Selected Answer - Trial 11
fms_uedin_answer12	Text	ANSWER	Selected Answer - Trial 12
fms_uedin_answer13	Text	ANSWER	Selected Answer - Trial 13
fms_uedin_answer14	Text	ANSWER	Selected Answer - Trial 14
fms_uedin_answer15	Text	ANSWER	Selected Answer - Trial 15
fms_uedin_mark1	Text	MARK	Answer - Trial 1
fms_uedin_mark2	Text	MARK	Answer - Trial 2
fms_uedin_mark3	Text	MARK	Answer - Trial 3
fms_uedin_mark4	Text	MARK	Answer - Trial 4
fms_uedin_mark5	Text	MARK	Answer - Trial 5

fms_uedin_mark6	Text	MARK	Answer - Trial 6
fms_uedin_mark7	Text	MARK	Answer - Trial 7
fms_uedin_mark8	Text	MARK	Answer - Trial 8
fms_uedin_mark9	Text	MARK	Answer - Trial 9
fms_uedin_mark10	Text	MARK	Answer - Trial 10
fms_uedin_mark11	Text	MARK	Answer - Trial 11
fms_uedin_mark12	Text	MARK	Answer - Trial 12
fms_uedin_mark13	Text	MARK	Answer - Trial 13
fms_uedin_mark14	Text	MARK	Answer - Trial 14
fms_uedin_mark15	Text	MARK	Answer - Trial 15
fms_uedin_reactiontime1	Decimal		Time Taken to provide an Answer - Trial 1
fms_uedin_reactiontime2	Decimal		Time Taken to provide an Answer - Trial 2
fms_uedin_reactiontime3	Decimal		Time Taken to provide an Answer - Trial 3
fms_uedin_reactiontime4	Decimal		Time Taken to provide an Answer - Trial 4
fms_uedin_reactiontime5	Decimal		Time Taken to provide an Answer - Trial 5
fms_uedin_reactiontime6	Decimal		Time Taken to provide an Answer - Trial 6
fms_uedin_reactiontime7	Decimal		Time Taken to provide an Answer - Trial 7
fms_uedin_reactiontime8	Decimal		Time Taken to provide an Answer - Trial 8
fms_uedin_reactiontime9	Decimal		Time Taken to provide an Answer - Trial 9
fms_uedin_reactiontime10	Decimal		Time Taken to provide an Answer - Trial 10
fms_uedin_reactiontime11	Decimal		Time Taken to provide an Answer - Trial 11
fms_uedin_reactiontime12	Decimal		Time Taken to provide an Answer - Trial 12
fms_uedin_reactiontime13	Decimal		Time Taken to provide an Answer - Trial 13
fms_uedin_reactiontime14	Decimal		Time Taken to provide an Answer - Trial 14
fms_uedin_reactiontime15	Decimal		Time Taken to provide an Answer - Trial 15
assessment_performed	Text	PERFORMED	Was the assessment performed?
assessment_date	Date		If Yes, provide date of assessment
reason_not_performed	Text	REASON_NOT_PERFORMED	If No, Please provide reason.

5.8 SMT (v_imi_epadlcs_vr_supermarket_trolley_medavante)

Virtual Reality Supermarket Trolley (SMT) – Examiner recorded

FIELD	TYPE	CONSTRAINTS	DESCRIPTION
patient_id	Integer		Patient ID
visit	Text		Visit Number
st_trial_1_mark	Text	MARK	Trial 1 Mark
st_trial_2_mark	Text	MARK	Trial 2 Mark
st_trial_3_mark	Text	MARK	Trial 3 Mark
st_trial_4_mark	Text	MARK	Trial 4 Mark
st_trial_5_mark	Text	MARK	Trial 5 Mark
st_trial_6_mark	Text	MARK	Trial 6 Mark
st_trial_7_mark	Text	MARK	Trial 7 Mark
st_trial_8_mark	Text	MARK	Trial 8 Mark
st_trial_9_mark	Text	MARK	Trial 9 Mark
st_trial_10_mark	Text	MARK	Trial 10 Mark
st_trial_11_mark	Text	MARK	Trial 11 Mark
st_trial_12_mark	Text	MARK	Trial 12 Mark
st_trial_13_mark	Text	MARK	Trial 13 Mark
st_trial_14_mark	Text	MARK	Trial 14 Mark
assessment_date	Date		If Yes, provide date of assessment
assessment_performed	Text	PERFORMED	Was the assessment performed?
reason_not_performed	Text	REASON_NOT_PERFORMED	If No, Please provide reason.

5.9 SMT (v_imi_epadlcs_vr_supermarket_trolley_tabcat)

Virtual Reality Supermarket Trolley (SMT) – Tablet recorded

FIELD	TYPE	CONSTRAINTS	DESCRIPTION
patient_id	Integer		Patient ID
visit	Text		Visit Number
smt_1_rt	Decimal		Trial 1: Subject's reaction time
smt_1_score	Text	SCORE	Trial 1: Subject's score
smt_2_rt	Decimal		Trial 2: Subject's reaction time
smt_2_score	Text	SCORE	Trial 2: Subject's score
smt_3_rt	Decimal		Trial 3: Subject's reaction time
smt_3_score	Text	SCORE	Trial 3: Subject's score
smt_4_rt	Decimal		Trial 4: Subject's reaction time
smt_4_score	Text	SCORE	Trial 4: Subject's score
smt_5_rt	Decimal		Trial 5: Subject's reaction time
smt_5_score	Text	SCORE	Trial 5: Subject's score
smt_6_rt	Decimal		Trial 6: Subject's reaction time
smt_6_score	Text	SCORE	Trial 6: Subject's score
smt_7_rt	Decimal		Trial 7: Subject's reaction time
smt_7_score	Text	SCORE	Trial 7: Subject's score
smt_8_rt	Decimal		Trial 8: Subject's reaction time
smt_8_score	Text	SCORE	Trial 8: Subject's score
smt_9_rt	Decimal		Trial 9: Subject's reaction time
smt_9_score	Text	SCORE	Trial 9: Subject's score
smt_10_rt	Decimal		Trial 10: Subject's reaction time
smt_10_score	Text	SCORE	Trial 10: Subject's score
smt_11_rt	Decimal		Trial 11: Subject's reaction time
smt_11_score	Text	SCORE	Trial 11: Subject's score
smt_12_rt	Decimal		Trial 12: Subject's reaction time
smt_12_score	Text	SCORE	Trial 12: Subject's score
smt_13_rt	Decimal		Trial 13: Subject's reaction time
smt_13_score	Text	SCORE	Trial 13: Subject's score
smt_14_rt	Decimal		Trial 14: Subject's reaction time
smt_14_score	Text	SCORE	Trial 14: Subject's score
smt_sec1_totalcorr	Decimal		Total number of correct responses across trials 1-7
smt_sec2_totalcorr	Decimal		Total number of correct responses across trials 8-14
smt_all_totalcorr	Decimal		Total number of correct responses across all trials
smt_all_avgcorr	Text		Subject's percent of correct responses across all trials
smt_all_avgrt	Decimal		Subject's mean reaction time across all trials
assessment_date	Date		If Yes, provide date of assessment
assessment_performed	Text	PERFORMED	Was the assessment performed?
reason_not_performed	Text	REASON_NOT_PERFORMED	If No, please provide reason

6 Clinical Outcomes

6.1 GDS (v_imi_epadlcs_gds)

Geriatric Depression Scale (GDS)

FIELD	TYPE	CONSTRAINTS	DESCRIPTION
patient_id	Integer		Patient ID

visit	Text		Visit Number
gds_total	Decimal		GDS Total Score
gds_1	Text	ANSWER	Are you basically satisfied with your life?
gds_2	Text	ANSWER	Have you dropped many of your activities and interests?
gds_3	Text	ANSWER	Do you feel that your life is empty?
gds_4	Text	ANSWER	Do you often get bored?
gds_5	Text	ANSWER	Are you hopeful about the future?
gds_6	Text	ANSWER	Are you bothered by thoughts you can t get out of your head?
gds_7	Text	ANSWER	Are you in good spirits most of the time?
gds_8	Text	ANSWER	Are you afraid that something bad is going to happen to you?
gds_9	Text	ANSWER	Do you feel happy most of the time?
gds_10	Text	ANSWER	Do you often feel helpless?
gds_11	Text	ANSWER	Do you often get restless and fidgety?
gds_12	Text	ANSWER	Do you prefer to stay at home, rather than going out and doing new things?
gds_13	Text	ANSWER	Do you frequently worry about the future?
gds_14	Text	ANSWER	Do you feel you have more problems with memory than most?
gds_15	Text	ANSWER	Do you think it is wonderful to be alive now?
gds_16	Text	ANSWER	Do you often feel downhearted and blue?
gds_17	Text	ANSWER	Do you feel pretty worthless the way you are now?
gds_18	Text	ANSWER	Do you worry a lot about the past?
gds_19	Text	ANSWER	Do you find life very exciting?
gds_20	Text	ANSWER	Is it hard for you to get started on new projects?
gds_21	Text	ANSWER	Do you feel full of energy?
gds_22	Text	ANSWER	Do you feel that your situation is hopeless?
gds_23	Text	ANSWER	Do you think that most people are better off than you are?
gds_24	Text	ANSWER	Do you frequently get upset over little things?
gds_25	Text	ANSWER	Do you frequently feel like crying?
gds_26	Text	ANSWER	Do you have trouble concentrating?
gds_27	Text	ANSWER	Do you enjoy getting up in the morning?
gds_28	Text	ANSWER	Do you prefer to avoid social gatherings?
gds_29	Text	ANSWER	Is it easy for you to make decisions?
gds_30	Text	ANSWER	Is your mind as clear as it used to be?
assessment_date	Date		If Yes, provide date of assessment
assessment_performed	Text	PERFORMED	Was the assessment performed?
reason_not_performed	Text	REASON_NOT_PERFORMED	If No, Please provide reason.

6.2 STAI (v_imi_epadlcs_stai_40)

State-Trait Anxiety Inventory (STAI)

FIELD	TYPE	CONSTRAINTS	DESCRIPTION
patient_id	Integer		Patient ID
visit	Text		Visit Number
stai_40_total_score	Integer		STAI Total Score
stai_40_form1_total_score	Integer		Form1 Total Score
stai_40_form2_total_score	Integer		Form2 Total Score
stai_40_form1_q1	Text	FORM1_SCALE_REVERSE	I feel calm
stai_40_form1_q2	Text	FORM1_SCALE_REVERSE	I feel secure
stai_40_form1_q3	Text	FORM1_SCALE	I am tense
stai_40_form1_q4	Text	FORM1_SCALE	I feel strained
stai_40_form1_q5	Text	FORM1_SCALE_REVERSE	I feel at ease
stai_40_form1_q6	Text	FORM1_SCALE	I feel upset

stai_40_form1_q7	Text	FORM1_SCALE	I am presently worrying over possible misfortunes
stai_40_form1_q8	Text	FORM1_SCALE_REVERSE	I feel satisfied
stai_40_form1_q9	Text	FORM1_SCALE	I feel frightened
stai_40_form1_q10	Text	FORM1_SCALE_REVERSE	I feel comfortable
stai_40_form1_q11	Text	FORM1_SCALE_REVERSE	I feel self-confident
stai_40_form1_q12	Text	FORM1_SCALE	I feel nervous
stai_40_form1_q13	Text	FORM1_SCALE	I am jittery
stai_40_form1_q14	Text	FORM1_SCALE	I feel indecisive
stai_40_form1_q15	Text	FORM1_SCALE_REVERSE	I am relaxed
stai_40_form1_q16	Text	FORM1_SCALE_REVERSE	I feel content
stai_40_form1_q17	Text	FORM1_SCALE	I am worried
stai_40_form1_q18	Text	FORM1_SCALE	I feel confused
stai_40_form1_q19	Text	FORM1_SCALE_REVERSE	I feel steady
stai_40_form1_q20	Text	FORM1_SCALE_REVERSE	I feel pleasant
stai_40_form2_q21	Text	FORM2_SCALE_REVERSE	I feel pleasant
stai_40_form2_q22	Text	FORM2_SCALE	I feel nervous and restless
stai_40_form2_q23	Text	FORM2_SCALE_REVERSE	I feel satisfied with myself
stai_40_form2_q24	Text	FORM2_SCALE	I wish I could be as happy as others seem to be
stai_40_form2_q25	Text	FORM2_SCALE	I feel like a failure
stai_40_form2_q26	Text	FORM2_SCALE_REVERSE	I feel rested
stai_40_form2_q27	Text	FORM2_SCALE_REVERSE	I am 'calm, cool, and collected'
stai_40_form2_q28	Text	FORM2_SCALE	I feel that difficulties are piling up so that I cannot overcome them
stai_40_form2_q29	Text	FORM2_SCALE	I worry too much over something that really doesn't matter
stai_40_form2_q30	Text	FORM2_SCALE_REVERSE	I am happy
stai_40_form2_q31	Text	FORM2_SCALE	I have disturbing thoughts
stai_40_form2_q32	Text	FORM2_SCALE	I lack self-confidence
stai_40_form2_q33	Text	FORM2_SCALE_REVERSE	I feel secure
stai_40_form2_q34	Text	FORM2_SCALE_REVERSE	I make decisions easily
stai_40_form2_q35	Text	FORM2_SCALE	I feel inadequate
stai_40_form2_q36	Text	FORM2_SCALE_REVERSE	I am content
stai_40_form2_q37	Text	FORM2_SCALE	Some unimportant thought runs through my mind and bothers me
stai_40_form2_q38	Text	FORM2_SCALE	I take disappointments so keenly that I can't put them out of my mind
stai_40_form2_q39	Text	FORM2_SCALE_REVERSE	I am a steady person
stai_40_form2_q40	Text	FORM2_SCALE	I get in a state of tension or turmoil as I think over my recent concerns and interests
assessment_date	Date		If Yes, provide date of assessment
assessment_performed	Text	PERFORMED	Was the assessment performed?
reason_not_performed	Text	REASON_NOT_PERFORMED	If No, Please provide reason.

6.3 PSQI (v_imi_epadlcs_psqi)

Pittsburgh Sleep Quality Index (PSQI)

FIELD	TYPE	CONSTRAINTS	DESCRIPTION
patient_id	Integer		Patient ID
visit	Text		Visit Number
psqi_total	Integer		PSQI Total
psqi_component1_score	Integer		Component 1 Total
psqi_component2_score	Integer		Component 2 Total
psqi_component3_score	Integer		Component 3 Total
psqi_component4_score	Integer		Component 4 Total

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psqi_component5_score	Integer		Component 5 Total
psqi_component6_score	Integer		Component 6 Total
psqi_component7_score	Integer		Component 7 Total
psqi_item1	Text		1. During the past month, what time have you usually gone to bed at night?
psqi_item2	Text	ITEM2	2. During the past month, how long (in minutes) has it usually taken you to fall asleep each night?
psqi_item3	Text		3. During the past month, what time have you usually gotten up in the morning?
psqi_item4	Text	ITEM4	4. During the past month, how many hours of actual sleep did you get at night? (This may be different than the number of hours you spent in bed)
psqi_item5_a	Text	ITEM5	5a. Cannot get to sleep within 30 minutes
psqi_item5_b	Text	ITEM5	5b. Wake up in the middle of the night or early morning
psqi_item5_c	Text	ITEM5	5c. Have to get up to use bathroom
psqi_item5_d	Text	ITEM5	5d. Cannot breathe comfortably
psqi_item5_e	Text	ITEM5	5e. Cough or snore loudly
psqi_item5_f	Text	ITEM5	5f. Feel too cold
psqi_item5_g	Text	ITEM5	5g. Feel too hot
psqi_item5_h	Text	ITEM5	5h. Had bad dreams
psqi_item5_i	Text	ITEM5	5i. Have pain
psqi_item5_j	Text	ITEM5	5j. How often during the past month have you had trouble sleeping because of this?
psqi_item5_yesno	Text	ITEM5_YN	Other reason(s)?
psqi_item6	Text	ITEM6	6. During the past month, how would you rate your sleep quality overall?
psqi_item7	Text	ITEM7	7. During the past month, how often have your taken medicine to help you sleep (prescribed or over the counter)?
psqi_item8	Text	ITEM8	8. During the past month, how much of a trouble staying awake while driving, eating meals, or engaging in social activity?
psqi_item9	Text	ITEM9	9. During the past month, how much of a problem has it been for you to keep up enough enthusiasm to get things done?
psqi_item10	text	ITEM10	10. Do you have a bed partner or room mate?
psqi_item10_a	text	ITEM10_AE	10a. Loud snoring
psqi_item10_b	text	ITEM10_AE	10b. Long pauses between breaths while asleep
psqi_item10_c	text	ITEM10_AE	10c. Legs twitching or jerking while you sleep
psqi_item10_d	text	ITEM10_AE	10d. Episodes of disorientation or confusion during sleep
psqi_item10_e	text	ITEM10_AE	10e. Other restlessness while you sleep?
psqi_item10_yesno	text	ITEM10_YN	Other restlessness while you sleep?
assessment_date	Date		If Yes, provide date of assessment
assessment_performed	Text	PERFORMED	Was the assessment performed?
reason_not_performed	Text	REASON_NOT_PERFORMED	If No, Please provide reason.

6.4 AIADL Questionnaire (v_imi_epadlcs_aiadl)

Amsterdam Instrumental Activities of Daily Living (AIADL) Questionnaire

FIELD	TYPE	CONSTRAINTS	DESCRIPTION
patient_id	Integer		Patient ID
visit	Text		Visit Number
total_score	Decimal		Total Score
sum_of_scores	Integer		Sum of Scores
items_scored	Integer		Total Number of Items Scored
dont_know_count	Integer		Total Number of Items Not Known
q1	Text	YNDK	Did he/she carry out household duties?

q1a	Text	DIFFICULTY	Did he/she find it more difficult to perform household duties than he/she had in the past?
q1b	Text	REASON	He/she did not carry out any household duties for the following reason;
q2	Text	YNDK	Did he/she do the shopping?
q2a	Text	DIFFICULTY	Did he/she find it more difficult to do the shopping than he/she had in the past?
q2b	Text	REASON	He/she did not do the shopping for the following reason;
q3	Text	YNDK	Did he/she buy the correct amounts when doing the shopping?
q3a	Text	DIFFICULTY	Did he/she find it more difficult to buy the correct amounts than he/she had in the past?
q3b	Text	REASON	He/she did not buy the correct amount for the following reason;
q4	Text	YNDK	Did he/she buy the correct items when doing the shopping?
q4a	Text	DIFFICULTY	Did he/she find it more difficult to buy the correct items than he/she had in the past?
q4b	Text	REASON	He/she did not buy the correct items for the following reason;
q5	Text	YNDK	Did he/she pay?
q5a	Text	DIFFICULTY	Did he/she find it more difficult to pay for things than he/she had in the past?
q5b	Text	REASON	He/she did not pay for the following reason;
q6	Text	YNDK	Did he/she do the cooking?
q6a	Text	DIFFICULTY	Did he/she fiind it more difficult to do the cooking than he/she had in the past?
q6b	Text	REASON	He/she did not do the cooking for the following reason;
q7	Text	YNDK	Did he/she measure out the ingredients needed to cook the meal?
q7a	Text	DIFFICULTY	Did he/she find it more difficult to measure out the correct amount of ingredients needed to cook the meal than he/she had in the past?
q7b	Text	REASON	He/she did not measure out the correct amount of ingredients needed to cook the meal for the following reason;
q8	Text	YNDK	Did he/she prepare hot meals?
q8a	Text	DIFFICULTY	Did he/she find it more difficult to prepare a hot meal than he/she had in the past?
q8b	Text	REASON	He/she has not prepared any hot meals for the following reason;
q9	Text	YNDK	Did he/she prepare sandwiches?
q9a	Text	DIFFICULTY	Did he/she find it more difficult to prepare sandwiches than he/she had in the past?
q9b	Text	REASON	He/she has not prepared any sandwiches for the following reason;
q10	Text	YNDK	Did he/she make any minor repairs to the house?
q10a	Text	DIFFICULTY	Did he/she find it more difficult to perform minor repairs to the house than he/she had in the past?
q10b	Text	REASON	He/she has not performed any minor repairs to the house for the following reason;
q11	Text	YNDK	Did he/she use household appliances?
q11a	Text	DIFFICULTY	Did he/she find it more difficult to use household appliances than he/she had in the past?
q11b	Text	REASON	He/she did not use any household appliances for the following reason;
q12	Text	YNDK	Did he/she use the microwave oven?
q12a	Text	DIFFICULTY	Did he/she find it more difficult to use the microwave oven than he/she had in the past?
q12b	Text	REASON	He/she did not use the microwave oven for the following reason;
q13	Text	YNDK	Did he/she use the various functions of the microwave oven?
q13a	Text	DIFFICULTY	Did he/she find it more difficult to use the various functions of the microwave oven than he/she had in the past?
q13b	Text	REASON	He/she did not use the various functions of the microwave oven for the following reason;
q14	Text	YNDK	Did he/she use the oven?

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q14a	Text	DIFFICULTY	Did he/she find it more difficult to use the oven than he/she had in the past?
q14b	Text	REASON	He/she did not use the oven for the following reason;
q15	Text	YNDK	Did he/she use the dishwasher?
q15a	Text	DIFFICULTY	Did he/she find it more difficult to use the dishwasher than he/she had in the past?
q15b	Text	REASON	He/she did not use the dishwasher for the following reason;
q16	Text	YNDK	Did he/she use the coffee maker?
q16a	Text	DIFFICULTY	Did he/she find it more difficult to use the coffee maker than he/she had in the past?
q16b	Text	REASON	He/she did not use the coffee maker for the following reason;
q17	Text	YNDK	Did he/she use the washing machine?
q17a	Text	DIFFICULTY	Did he/she find it more difficult to use the washing machine than he/she had in the past?
q17b	Text	REASON	He/she did not use the washing machine for the following reason;
q18	Text	YNDK	Did he/she attempt to understand his/her paperwork?
q18a	Text	DIFFICULTY	Did he/she find it more difficult to understand his/her paperwork than he/she had in the past?
q18b	Text	REASON	He/she did not understand his/her paperwork for the following reason;
q19	Text	YNDK	Did he/she pay any bills?
q19a	Text	DIFFICULTY	Did he/she find it more difficult to pay any bills than he/she had in the past?
q19b	Text	REASON	He/she did not pay any bills for the following reason;
q20	Text	YNDK	Did he/she pay the bills on time?
q20a	Text	DIFFICULTY	Did he/she find it more difficult to pay the bills on time than he/she had in the past?
q20b	Text	REASON	He/she did not pay the bills on time for the following reason;
q21	Text	YNDK	Did he/she find it more difficult to look up telephone numbers?
q21a	Text	DIFFICULTY	Did he/she find it more difficult to look up telephone numbers in order to make calls than he/she had in the past?
q21b	Text	REASON	He/she did not look up telephone numbers for the following reason;
q22	Text	YNDK	Did he/she use a cell phone?
q22a	Text	DIFFICULTY	Did he/she find it more difficult to use a cell phone than he/she had in the past?
q22b	Text	REASON	He/she did not use a cell phone for the following reason;
q23	Text	YNDK	Did he/she manage the paperwork?
q23a	Text	DIFFICULTY	Did he/she find it more difficult to manage paperwork than he/she had in the past?
q23b	Text	REASON	He/she did not manage the paperwork for the following reason;
q24	Text	YNDK	Did he/she understand his/her personal finances?
q24a	Text	DIFFICULTY	Did he/she find it more difficult to understand his/her personal finances than he/she had in the past?
q24b	Text	REASON	He/she did not understand his/her personal finances for the following reason;
q25	Text	YNDK	Did he/she use online banking?
q25a	Text	DIFFICULTY	Did he/she find it more difficult to use online banking than he/she had in the past?
q25b	Text	REASON	He/she did not use online banking for the following reason;
q26	Text	YNDK	Did he/she log in to do online banking?
q26a	Text	DIFFICULTY	Did he/she find it more difficult to log in to online banking than he/she had in the past?
q26b	Text	REASON	He/she has not logged in to do online banking for the following reason;
q27	Text	YNDK	Did he/she use online banking to make payments?
q27a	Text	DIFFICULTY	Did he/she find it more difficult to use online banking to make payments than he/she had in the past?

q27b	Text	REASON	He/she has not used online banking to make payments for the following reason;
q28	Text	YNDK	Did he/she use the PIN code?
q28a	Text	DIFFICULTY	Did he/she find it more difficult to use the PIN code than he/she had in the past?
q28b	Text	REASON	He/she did not use the PIN code for the following reason;
q29	Text	YNDK	Did he/she obtain money from a cash machine (ATM)?
q29a	Text	DIFFICULTY	Did he/she find it more difficult to obtain the correct amount from a cash machine (ATM)?
q29b	Text	REASON	He/she has not obtained money a cash machine (ATM) for the following reason;
q30	Text	YNDK	Did he/she pay for something using cash?
q30a	Text	DIFFICULTY	Did he/she find it more difficult to use cash than he/she had in the past?
q30b	Text	REASON	He/she did not make cash payments for the following reason;
q31	Text	YNDK	Did he/she make appointments?
q31a	Text	DIFFICULTY	Did he/she find it more difficult to keep appointments than he/she had in the past?
q31b	Text	REASON	He/she did not any appointments for the following reason;
q32	Text	YNDK	Did he/she fill in forms?
q32a	Text	DIFFICULTY	Did he/she find it more difficult to fill in forms than he/she had in the past?
q32b	Text	REASON	He/she did not fill in forms for the following reason;
q33	Text	YNDK	Did he/she work?
q33a	Text	DIFFICULTY	Did he/she find it more difficult to work than he/she had in the past?
q33b	Text	REASON	He/she did not work for the following reason;
q34	Text	YNDK	Did he/she function adequately at work?
q34a	Text	DIFFICULTY	Did he/she find it more difficult to function adequately at work than he/she had in the past?
q34b	Text	REASON	He/she did not function adequately at work for the following reason;
q35	Text	YNDK	Did he/she use a computer?
q35a	Text	DIFFICULTY	Did he/she find it more difficult to use a computer than he/she had in the past?
q35b	Text	REASON	He/she did not use a computer for the following reason;
q36	Text	YNDK	Did he/she search the Internet for information?
q36a	Text	DIFFICULTY	Did he/she find it more difficult to search the Internet for information than he/she had in the past?
q36b	Text	REASON	He/she did not search the Internet for information for the following reason;
q37	Text	YNDK	Did he/she use e-mail?
q37a	Text	DIFFICULTY	Did he/she find it more difficult to use email than he/she had in the past?
q37b	Text	REASON	He/she did not use e-mail for the following reason;
q38	Text	YNDK	Did he/she use the computer to type?
a38a	Text	DIFFICULTY	Did he/she find it more difficult to type on the computer than he/she had in the past?
q38b	Text	REASON	He/she did not type on the computer for the following reason;
q39	Text	YNDK	Did he/she use a computer to print documents?
q39a	Text	DIFFICULTY	Did he/she find it more difficult to print documents using a computer than he/she had in the past?
q39b	Text	REASON	He/she did not use a computer to print documents for the following reason;
q40	Text	YNDK	Did he/she use a computer to view photographs?
q40a	Text	DIFFICULTY	Did he/she find it more difficult to use a computer to view photographs than he/she had in the past?
q40b	Text	REASON	He/she did not use a computer to view photographs for the following reason;

q41	Text	YNDK	Did he/she use a computer to edit photographs?
q41a	Text	DIFFICULTY	Did he/she find it more difficult to use a computer to edit photographs than he/she had in the past?
q41b	Text	REASON	He/she did not use a computer to edit photographs for the following reason;
q42	Text	YNDK	Did he/she install software updates on the computer?
q42a	Text	DIFFICULTY	Did he/she install software updates on the computer than he/she had in the past?
q42b	Text	REASON	He/she did not install software updates on the computer to edit photographs for the following reason;
q43	Text	YNDK	Did he/she install new programs on the computer?
q43a	Text	DIFFICULTY	Did he/she find it more difficult to install new programs than he/she had in the past?
q43b	Text	REASON	He/she did not install new programs on the computer for the following reason:
q44	Text	YNDK	Did he/she learn how to do new things on the computer?
q44a	Text	DIFFICULTY	Did he/she find it more difficult to learn how to do new things on the computer than he/she had in the past?
q44b	Text	REASON	He/she did not learn how to do new things on the computer for the following reason:
q45	Text	YNDK	Did he/she book a trip on the Internet?
q45a	Text	DIFFICULTY	Did he/she find it more difficult to book a trip on the Internet than he/she had in the past?
q45b	Text	REASON	He/she did not book a trip on the Internet for the following reason:
q46	Text	YNDK	Did he/she use devices?
q46a	Text	DIFFICULTY	Did he/she find it more difficult to use devices than he/she had in the past?
q46b	Text	REASON	He/she did not use any devices for the following reason:
q47	Text	YNDK	Did he/she use the television remote control?
q47a	Text	DIFFICULTY	Did he/she find it more difficult to use the television remote control than he/she had in the past?
q47b	Text	REASON	He/she did not use the television remote control for the following reason:
q48	Text	YNDK	Did he/she record television programs (e.g. use a DVR)?
q48a	Text	DIFFICULTY	Did he/she find it more difficult to record television programs (e.g. use a DVR) than he/she had in the past?
q48b	Text	REASON	He/she did not record television programs (e.g. use a DVR) for the following reason:
q49	Text	YNDK	Did he/she program a DVR (or other device to record a television program)?
q49a	Text	DIFFICULTY	Did he/she find it more difficult to program a DVR (or other device to record a television program) than he/she had in the past?
q49b	Text	REASON	He/she did not program a DVR (or other device to record a television program) for the following reason:
q50	Text	YNDK	Did he/she use a DVD player?
q50a	Text	DIFFICULTY	Did he/she find it more difficult to use a DVD player than he/she had in the past?
q50b	Text	REASON	He/she did not use a DVD player for the following reason:
q51	Text	YNDK	Did he/she use a DVD recorder?
q51a	Text	DIFFICULTY	Did he/she find it more difficult to use a DVD recorder than he/she had in the past?
q51b	Text	REASON	He/she did not use a DVD recorder for the following reason:
q52	Text	YNDK	Did he/she use an answering machine/voicemail?
q52a	Text	DIFFICULTY	Did he/she find it more difficult to use an answering machine/voicemail than he/she had in the past?
q52b	Text	REASON	He/she did not use an answering machine/voicemail for the following reason:
q53	Text	YNDK	Did he/she refer to an instruction manual?

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q53a	Text	DIFFICULTY	Did he/she find it more difficult to refer to an instruction manual than he/she had in the past?
q53b	Text	REASON	He/she did not refer to an instruction manual for the following reason:
q54	Text	YNDK	Did he/she try to understand an instruction manual?
q54a	Text	DIFFICULTY	Did he/she find it more difficult to understand an instruction manual than he/she had in the past?
q54b	Text	REASON	He/she did not try to understand an instruction manual for the following reason:
q55	Text	YNDK	Did he/she use a smartphone (such as an iPhone or Blackberry)?
q55a	Text	DIFFICULTY	Did he/she find it more difficult to use a smartphone than he/she had in the past?
q55b	Text	REASON	He/she did not use a smartphone for the following reason:
q56	Text	YNDK	Did he/she learn to use new devices?
q56a	Text	DIFFICULTY	Did he/she find it more difficult to learn to use new devices than he/she had in the past?
q56b	Text	REASON	He/she did not learn to use new devices for the following reason:
q57	Text	YNDK	Did he/she play card and board games?
q57a	Text	DIFFICULTY	Did he/she find it more difficult to play card and board games than he/she had in the past?
q57b	Text	REASON	He/she did not play card and board games for the following reason:
q58	Text	YNDK	Did he/she plan a vacation?
q58a	Text	DIFFICULTY	Did he/she find it more difficult to plan a vacation than he/she had in the past?
q58b	Text	REASON	He/she did not plan a vacation for the following reason:
q59	Text	YNDK	Did he/she drive a car?
q59a	Text	DIFFICULTY	Did he/she find it more difficult to drive a car than he/she had in the past?
q59b	Text	REASON	He/she did not drive a car for the following reason:
q60a	Text	DIFFICULTY	Did he/she find it more difficult to drive a car without losing his/her way than in the past?
q61	Text	YNDK	Was he/she a safe driver?
q61a	Text	DIFFICULTY	Did he/she find it more difficult to drive a car safely than he/she had in the past?
q61b	Text	REASON	He/she did not drive a car safely for the following reason:
q62	Text	YNDK	Did he/she read a map?
q62a	Text	DIFFICULTY	Did he/she find it more difficult to read a map than he/she had in the past?
q62b	Text	REASON	He/she did not read a map for the following reason:
q63	Text	YNDK	Did he/she read a map of an unfamiliar city or area?
q63a	Text	DIFFICULTY	Did he/she find it more difficult to read a map of an unfamiliar city or area than he/she had in the past?
q63b	Text	REASON	He/she did not read a map of an unfamiliar city or area for the following reason:
q64	Text	YNDK	Did he/she use a map to find his/her way to an unfamiliar place?
q64a	Text	DIFFICULTY	Did he/she find it more difficult to use a map to find his/her way to a new place than he/she had in the past?
q64b	Text	REASON	He/she did not use a map to find his/her way to a new place for the following reason:
q65	Text	YNDK	Did he/she use GPS (navigation system)?
q65a	Text	DIFFICULTY	Did he/she find it more difficult to use GPS (navigation system) than he/she had in the past?
q65b	Text	REASON	He/she did not use GPS (navigation system) for the following reason:
q66	Text	YNDK	Did he/she use public transport?
q66a	Text	DIFFICULTY	Did he/she find it more difficult to use public transport than he/she had in the past?

q66b	Text	REASON	He/she did not make use of public transport for the following reason:
q67	Text	YNDK	Did he/she look for important things at home?
q67a	Text	DIFFICULTY	Did he/she find it more difficult to look for important things at home than in the past?
q67b	Text	REASON	He/she did not look for important things at home for the following reason:
q68	Text	YNDK	Did he/she look for his/her keys?
q68a	Text	DIFFICULTY	Did he/she find it more difficult to find his/her keys than in the past?
q68b	Text	REASON	He/she did not look for his/her keys for the following reason:
q69	Text	YNDK	Has he/she experienced unexpected circumstances?
q69a	Text	DIFFICULTY	Did he/she find it more difficult to deal with unexpected circumstances than he/she had in the past?
q70	Text	YNDK	Does he/she use medication?
q70a	Text	DIFFICULTY	Did he/she have more trouble being responsible for his/her own medication than in the past?
assessment_date	Date		If Yes, provide date of assessment
assessment_performed	Text	PERFORMED	Was the assessment performed?
reason_not_performed	Text	REASON_NOT_PERFORMED	If No, Please provide reason.

7 Biomarkers

7.1 MRI Radiological Read (v_imi_epadlcs_radiological_read)

Assessment of MRI brain scan for study eligibility/safety

FIELD	TYPE	CONSTRAINTS	DESCRIPTION
patient_id	Integer		Patient ID
visit	Text		Visit Number
date_of_mri	Date		Date of MRI
SEQC	Text	SEQC	Safety / Eligibility Suitability QC Grade
AHMIC	Text	AHMIC	Are Microhaemorrhages present?
AHMICLC	Text	AHMICLC	Total microhaemorrhage count
AHMICGLC	Text		Microhaemorrhages Cortex Grey White Junction <5mm Left Certain
AHMICGLU	Text		Microhaemorrhages Cortex Grey White Junction <5mm Left Uncertain
AHMICGRC	Text		Microhaemorrhages Cortex Grey White Junction <5mm Right Certain
AHMICGRU	Text		Microhaemorrhages Cortex Grey White Junction <5mm Right Uncertain
AHMIMGLC	Text		Microhaemorrhages Cortex Grey White Junction 5-10mm Left Certain
AHMIMGLU	Text		Microhaemorrhages Cortex Grey White Junction 5-10mm Left Uncertain
AHMIMGRC	Text		Microhaemorrhages Cortex Grey White Junction 5-10mm Right Certain
AHMIMGRU	Text		Microhaemorrhages Cortex Grey White Junction 5-10mm Right Uncertain
AHMICWLC	Text		Microhaemorrhages Subcortical White Matter <5mm Left Certain
AHMICWLU	Text		Microhaemorrhages Subcortical White Matter <5mm Left Uncertain
AHMICWRC	Text		Microhaemorrhages Subcortical White Matter <5mm Right Certain
AHMICWRU	Text		Microhaemorrhages Subcortical White Matter <5mm Right Uncertain
AHMIMWLC	Text		Microhaemorrhages Subcortical White Matter 5-10mm Left Certain
AHMIMWLU	Text		Microhaemorrhages Subcortical White Matter 5-10mm Left Uncertain

AHMIMWRC	Text		Microhaemorrhages Subcortical White Matter 5-10mm Right Certain
AHMIMWRU	Text		Microhaemorrhages Subcortical White Matter 5-10mm Right Uncertain
AHMICBLC	Text		Microhaemorrhages Basal Ganglia Grey Matter, Excluding Thalamus <5mm Left Certain
AHMICBLU	Text		Microhaemorrhages Basal Ganglia Grey Matter, Excluding Thalamus <5mm Left Uncertain
AHMICBRC	Text		Microhaemorrhages Basal Ganglia Grey Matter, Excluding Thalamus <5mm Right Certain
AHMICBRU	Text		Microhaemorrhages Basal Ganglia Grey Matter, Excluding Thalamus <5mm Right Uncertain
AHMIMBLC	Text		Microhaemorrhages Basal Ganglia Grey Matter, Excluding Thalamus 5-10mm Left Certain
AHMIMBLU	Text		Microhaemorrhages Basal Ganglia Grey Matter, Excluding Thalamus 5-10mm Left Uncertain
AHMIMBRC	Text		Microhaemorrhages Basal Ganglia Grey Matter, Excluding Thalamus 5-10mm Right Certain
AHMIMBRU	Text		Microhaemorrhages Basal Ganglia Grey Matter, Excluding Thalamus 5-10mm Right Uncertain
AHMICILC	Text		Microhaemorrhages Internal And External Capsule, Excluding Thalamus <5mm Left Certain
AHMICILU	Text		Microhaemorrhages Internal And External Capsule, Excluding Thalamus <5mm Left Uncertain
AHMICIRC	Text		Microhaemorrhages Internal And External Capsule, Excluding Thalamus <5mm Right Certain
AHMICIRU	Text		Microhaemorrhages Internal And External Capsule, Excluding Thalamus <5mm Right Uncertain
AHMIMILC	Text		Microhaemorrhages Internal And External Capsule, Excluding Thalamus 5-10mm Left Certain
AHMIMILU	Text		Microhaemorrhages Internal And External Capsule, Excluding Thalamus 5-10mm Left Uncertain
AHMIMIRC	Text		Microhaemorrhages Internal And External Capsule, Excluding Thalamus 5-10mm Right Certain
AHMIMIRU	Text		Microhaemorrhages Internal And External Capsule, Excluding Thalamus 5-10mm Right Uncertain
AHMICTLC	Text		Microhaemorrhages Thalamus <5mm Left Certain
AHMICTLU	Text		Microhaemorrhages Thalamus <5mm Left Uncertain
AHMICTRC	Text		Microhaemorrhages Thalamus <5mm Right Certain
AHMICTRU	Text		Microhaemorrhages Thalamus <5mm Right Uncertain
AHMIMTLC	Text		Microhaemorrhages Thalamus 5-10mm Left Certain
AHMIMTLU	Text		Microhaemorrhages Thalamus 5-10mm Left Uncertain
AHMIMTRC	Text		Microhaemorrhages Thalamus 5-10mm Right Certain
AHMIMTRU	Text		Microhaemorrhages Thalamus 5-10mm Right Uncertain
AHMICSLC	Text		Microhaemorrhages Brainstem <5mm Left Certain
AHMICSLU	Text		Microhaemorrhages Brainstem <5mm Left Uncertain
AHMICSRC	Text		Microhaemorrhages Brainstem <5mm Right Certain
AHMICSRU	Text		Microhaemorrhages Brainstem <5mm Right Uncertain
AHMIMSLC	Text		Microhaemorrhages Brainstem 5-10mm Left Certain
AHMIMSLU	Text		Microhaemorrhages Brainstem 5-10mm Left Uncertain
AHMIMSRC	Text		Microhaemorrhages Brainstem 5-10mm Right Certain
AHMIMSRU	Text		Microhaemorrhages Brainstem 5-10mm Right Uncertain
AHMICCLC	Text		Microhaemorrhages Cerebellum <5mm Left Certain
AHMICCLU	Text		Microhaemorrhages Cerebellum <5mm Left Uncertain
AHMICCRC	Text		Microhaemorrhages Cerebellum <5mm Right Certain
AHMICCRU	Text		Microhaemorrhages Cerebellum <5mm Right Uncertain
AHMIMCLC	Text		Microhaemorrhages Cerebellum 5-10mm Left Certain
AHMIMCLU	Text		Microhaemorrhages Cerebellum 5-10mm Left Uncertain

AHMIMCRC	Text		Microhaemorrhages Cerebellum 5-10mm Right Certain
AHMIMCRU	Text		Microhaemorrhages Cerebellum 5-10mm Right Uncertain
AHSWISLI	Text		Comment on slice number of microhaemorrhages
AHSWICOM	Text		Comment on any discrepancies between the microhaemorrhage count in the SWI image compared to the T2-star
SS	Text	SS	Evidence of Superficial Siderosis
SSCH	Text	SSCH	Superficial Siderosis Change from Previous Scan
SSL	Text		Superficial Siderosis Comment, including side, lobar region and if it is focal/disseminated
FSD	Text	FSD	Fazekas Scale Deep
FSPV	Text	FSPV	Fazekas Scale Periventricular
ARWMCFR	Text	ARWMCFR	ARWMC Frontal
ARWMCPO	Text	ARWMCPO	ARWMC Parieto-Occipital
ARWMCTE	Text	ARWMCTE	ARWMC Temporal
ARWMCIN	Text	ARWMCIN	ARWMC Infratentorial
ARWMCBG	Text	ARWMCBG	ARWMC Basal Ganglia
MTAL	Text	MTAL	MTA score on left side
MTAR	Text	MTAR	MTA score on right side
KOEDAM	Text	KOEDAM	Koedam Score
EPSBG	Text	EPSBG	Enlarged Perivascular Spaces Basal Ganglia
EPSCS	Text	EPSCS	Enlarged Perivascular Spaces Centrum Semiovale
EPSPM	Text	EPSPM	Enlarged Perivascular Spaces Perivascular Midbrain
AE	Text	AE	Findings consistent with ARIA-E?
AECH	Text	AECH	ARIA-E Change from Previous Scan
AE1SL	Text		ARIA-E 1 Slice Number
AE1AB	Text	AE1AB	ARIA-E 1 Abnormality
AE1LOC	Text	AE1LOC	ARIA-E 1 Location
AE1SID	Text	AE1SID	ARIA-E 1 Side
AE2SL	Text		ARIA-E 2 Slice Number
AE2AB	Text	AE2AB	ARIA-E 2 Abnormality
AE2LOC	Text	AE2LOC	ARIA-E 2 Location
AE2SID	Text	AE2SID	ARIA-E 2 Side
OTHFND	Text	OTHFND	Other Clinically Relevant Findings?
OTHPFND	Text	OTHPFND	Other potentially Clinically Relevant Findings? (For new findings only at visit)
OTHFNDT	Text	OTHFNDT	Other Finding Type (For new findings only at visit)
OTHFNDL	Text	OTHFNDL	Other Finding Location (For new findings only at visit)
OTHFNDCO	Text		Other Finding Comment
RCO	Text		Other Comment - Non Significant Findings
SAFFND	Text	SAFFND	New Safety Finding?
DISCMET	Text	DISCMET	Has the Discontinuation Criteria been met?
READDAT	Date		Read done on
READWHO	Text		Read done by
ELIG	Text	ELIG	Subject suitable for Study?
assessment_performed	Text	PERFORMED	Was the assessment performed?
assessment_date	Date		If Yes, provide date of assessment
reason_not_performed	Text	REASON_NOT_PERFORMED	If No, please provide reason

7.2 MRI Lacunes & Infarcts (v_imi_epadlcs_lacunes_infarcts)

Measurement of brain lacunes & infarcts

FIELD	TYPE	CONSTRAINTS	DESCRIPTION
Patient ID	Integer		Patient ID

visit	Text		Visit Number
Date of MRI	Date		Date of MRI
TIOC	Text	TIOC	Is there evidence of any territorial infarct outside of the cerebellum, including full, partial, or watershed infarct?
TIFC	Text	TIFC	Is there evidence of any full territory cerebellar infarct?
TICOM	Text		Comments on Infarcts
LACM	Text	LACM	Are there more than 4 lacunes?
LACN	Text	LACN	Are there any new lacunes?
LACCOU	Text	LACCOU	Lacune Count
LAC1LOC	Text	LOCATION	Lacune 1 Location
LAC1SLI	Text		Lacune 1 Slice Number
LAC1SID	Text	SIDE	Lacune 1 Side
LAC1DEF	Text	DEFINITION	Lacune 1 Definition
LAC2LOC	Text	LOCATION	Lacune 2 Location
LAC2SLI	Text		Lacune 2 Slice Number
LAC2SID	Text	SIDE	Lacune 2 Side
LAC2DEF	Text	DEFINITION	Lacune 2 Definition
LAC3LOC	Text	LOCATION	Lacune 3 Location
LAC3SLI	Text		Lacune 3 Slice Number
LAC3SID	Text	SIDE	Lacune 3 Side
LAC3DEF	Text	DEFINITION	Lacune 3 Definition
LAC4LOC	Text	LOCATION	Lacune 4 Location
LAC4SLI	Text		Lacune 4 Slice Number
LAC4SID	Text	SIDE	Lacune 4 Side
LAC4DEF	Text	DEFINITION	Lacune 4 Definition
LACCOM	Text		Lacunes Comment
assessment_performed	Text	PERFORMED	Was the assessment performed?
assessment_date	Date		If Yes, provide date of assessment
reason_not_performed	Text	REASON_NOT_PERFORMED	If No, please provide reason

7.3 MRI Volumetric (v_imi_epadlcs_volumetric)

Measurement of brain volumetric parameters

FIELD	TYPE	CONSTRAINTS	DESCRIPTION
patient_id	Integer		Patient ID
visit	Text		Visit Number
date_of_mri	Date		Scan Date of MRI
LBV	Decimal		WBLEAP Volume
LBVQC	Text	PASSFAIL	WBLEAP QC Grade
LBVQCC	Text		WBLEAP QC Comment
KNBBSI	Decimal		K-means Brain Boundary Shift Integral (KN-BBSI) (whole brain atrophy since screening measured with the BBSI technique). Positive results denote atrophy.
KNBBSIQC	Text	PASSFAIL	KNBBSI Endpoint QC Result
LHVL	Decimal		LEAP Left Hippocampus Volume
LHVR	Decimal		LEAP Right Hippocampus Volume
LHQCG	Text	PASSFAIL	LEAP Hippocampus QC Grade
LHQCC	Text		LEAP Hippocampus Volume QC Comment
LLHVL	Text		LLEAP Hippocampus Volume Left
LLHLA	Text		LLEAP Hippocampus Atrophy Left
LLHLPA	Text		LLEAP Hippocampus Percent Atrophy Left
LLHVR	Text		LLEAP Hippocampus Volume Right
LLHLR	Text		LLEAP Hippocampus Atrophy Right

LLHRPA	Text		LLEAP Hippocampus Percent Atrophy Right
LLHQCG	Text	PASSFAIL	LLEAP Hippocampus QC Grade
LLHQCC	Text		LLEAP Hippocampus QC Comment
LVV	Decimal		LEAP Ventricular Volume
LVVQC	Text	PASSFAIL	LEAP Ventricular Volume QC Grade
LVVQCC	Text		LEAP Lateral Ventricles Volume QC Comment
LLVV	Text		LLEAP Ventricle Volume
LLVA	Text		LLEAP Ventricle Atrophy
LLPA	Text		LLEAP Ventricle Percent Atrophy
LLVVQC	Text	PASSFAIL	LLEAP Ventricular Volume QC Grade
LLVVQCC	Text		LLEAP Lateral Ventricles Volume QC Comment
PTIV	Decimal		PTIV Factor
PTIVQC	Text	PASSFAIL	PTIV Factor QC Grade
PTIVQCC	Text		PTIV Factor QC Comment
LWMV	Decimal		LEAP White Matter Lesion Volume
LWMJVV	Decimal		LEAP White Matter Juxtaventricular Lesion Volume
LWMJVP	Decimal		LEAP White Matter Juxtaventricular Lesion Percentage
LWMJCV	Decimal		LEAP White Matter Juxtacortical Lesion Volume
LWMJCP	Decimal		LEAP White Matter Juxtacortical Lesion Percentage
LWMDV	Decimal		LEAP White Matter Deep Lesion Volume
LWMDP	Decimal		LEAP White Matter Deep Lesion Percentage
LWMPVV	Decimal		LEAP White Matter Periventricular Lesion Volume
LWMPVP	Decimal		LEAP White Matter Periventricular Lesion Percentage
LWMQC	Text	PASSFAIL	LEAP White Matter Endpoint QC Grade
LWMQCC	Text		LEAP White Matter QC Comment
LTVV	Decimal		LEAP Third Ventricle Volume
LFVV	Decimal		LEAP Fourth Ventricle Volume
LRACCU	Decimal		LEAP Right Accumbens Area Volume
LLACCU	Decimal		LEAP Left Accumbens Area Volume
LRAMYG	Decimal		LEAP Right Amygdala Volume
LLAMYG	Decimal		LEAP Left Amygdala Volume
LRCV	Decimal		LEAP Right Caudate Volume
LLCV	Decimal		LEAP Left CaudateVolume
LRCBEV	Decimal		LEAP Right Cerebellum Exterior Volume
LLCBEV	Decimal		LEAP Left Cerebellum Exterior Volume
LRCBWMV	Decimal		LEAP Right Cerebellum White Matter Volume
LLCBWMV	Decimal		LEAP Left Cerebellum White Matter Volume
LRCWMV	Decimal		LEAP Right Cerebral White Matter Volume
LLCWMV	Decimal		Left Cerebral White Matter Volume
LCSFV	Decimal		LEAP Cerebrospinal Fluid Volume
LRILVV	Decimal		LEAP Right Inferior Lateral Ventricle Volume
LLILVV	Decimal		LEAP Left Inferior Lateral Ventricle Volume
LRPALV	Decimal		LEAP Right Pallidum Volume
LLPALV	Decimal		LEAP Left Pallidum Volume
LRPUTV	Decimal		LEAP Right Putamen Volume
LLPUTV	Decimal		LEAP Left Putamen Volume
LRTHAPV	Decimal		LEAP Right Thalamus Proper Volume
LLTHAPV	Decimal		LEAP Left Thalamus Proper Volume
LRVENDCV	Decimal		LEAP Ventral Diencephalon Volume
LLVENDCV	Decimal		LEAP Left Ventral Diencephalon Volume
LCVLVIVV	Decimal		LEAP Cerebellar Vermal Lobules I-V Volume
LCVLVIVII	Decimal		LEAP Cerebellar Vermal Lobules Vi-Vii Volume
LCVLVIIIX	Decimal		LEAP Cerebellar Vermal Lobules Viii-X Volume
LRBFBV	Decimal		LEAP Right Basal Forebrain Volume

LLBFBV	Decimal		LEAP Left Basal Forebrain Volume
LRACGCV	Decimal		LEAP Right Anterior Cingulate Gyrus Volume
LLACGCV	Decimal		LEAP Left Anterior Cingulate Gyrus Volume
LRAINSV	Decimal		LEAP Right Anterior Insula Volume
LLAINSV	Decimal		LEAP Left Anterior Insula Volume
LRAOGV	Decimal		LEAP Right Anterior Orbital Gyrus Volume
LLAOGV	Decimal		LEAP Left Anterior Orbital Gyrus Volume
LRANGV	Decimal		LEAP Right Angular Gyrus Volume
LLANGV	Decimal		LEAP Left Angular Gyrus Volume
LRCALCV	Decimal		LEAP Right Calcarine Cortex Volume
LLCALCV	Decimal		LEAP Left Calcarine Cortex Volume
LRCOPERV	Decimal		LEAP Right Central Operculum Volume
LLCOPERV	Decimal		LEAP Left Central Operculum Volume
LRCUNV	Decimal		LEAP Right Cuneus Volume
LLCUNV	Decimal		LEAP Left Cuneus Volume
LRENTAV	Decimal		LEAP Right Entorhinal Area Volume
LLENTAV	Decimal		LEAP Left Entorhinal Area Volume
LRFOPV	Decimal		LEAP Right Frontal Operculum Volume
LLFOPV	Decimal		LEAP Left Frontal Operculum Volume
LRFPV	Decimal		LEAP Right Frontal Pole Volume
LLFPV	Decimal		LEAP Left Frontal Pole Volume
LRFUSIGV	Decimal		LEAP Right Fusiform Gyrus Volume
LLFUSIGV	Decimal		LEAP Left Fusiform Gyrus Volume
LRGYRRV	Decimal		LEAP Right Gyrus Rectus Volume
LLGYRRV	Decimal		LEAP Left Gyrus Rectus Volume
LRINFOGV	Decimal		LEAP Right Inferior Occipital Gyrus Volume
LLINFOGV	Decimal		LEAP Left Inferior Occipital Gyrus Volume
LRINFTGV	Decimal		LEAP Right Inferior Temporal Gyrus Volume
LLINFTGV	Decimal		LEAP Left Inferior Temporal Gyrus Volume
LRLINGGV	Decimal		LEAP Right Lingual Gyrus Volume
LLLINGGV	Decimal		LEAP Left Lingual Gyrus Volume
LRLATOGV	Decimal		LEAP Right Lateral Orbital Gyrus Volume
LLLATOGV	Decimal		LEAP Left Lateral Orbital Gyrus Volume
LRMCINGGV	Decimal		LEAP Right Middle Cingulate Gyrus Volume
LLMCINGGV	Decimal		LEAP Left Middle Cingulate Gyrus Volume
LRMFCV	Decimal		LEAP Right Medial Frontal Cortex Volume
LLMFCV	Decimal		LEAP Left Medial Frontal Cortex Volume
LRMFGYV	Decimal		LEAP Right Middle Frontal Gyrus Volume
LMFGYV	Decimal		LEAP Left Middle Frontal Gyrus Volume
LRMOCCGV	Decimal		LEAP Right Middle Occipital Gyrus Volume
LLMOCCGV	Decimal		LEAP Left Middle Occipital Gyrus Volume
LRMORBGV	Decimal		LEAP Right Medial Orbital Gyrus Volume
LLMORBGV	Decimal		LEAP Left Medial Orbital Gyrus Volume
LRPOSTGV	Decimal		LEAP Right Postcentral Gyrus Medial Segment Volume
LLPOSTGV	Decimal		LEAP Left Postcentral Gyrus Medial Segment Volume
LRPREGV	Decimal		LEAP Right Precentral Gyrus Medial Segment Volume
LLPREGV	Decimal		LEAP Left Precentral Gyrus Medial Segment Volume
LRSFGV	Decimal		LEAP Right Superior Frontal Gyrus Volume
LLSFGV	Decimal		LEAP Left Superior Frontal Gyrus Volume
LRSFGMV	Decimal		LEAP Right Middle Temporal Gyrus Volume
LLSFGMV	Decimal		LEAP Left Middle Temporal Gyrus Volume
LRMTGV	Decimal		LEAP Right Occipital Pole Volume
LLMTGV	Decimal		LEAP Left Occipital Pole Volume
LROCCPV	Decimal		LEAP Right Occipital Pole Volume

LLOCCPV	Decimal		LEAP Left Occipital Pole Volume
LROCFUGV	Decimal		LEAP Right Occipital Fusiform Gyrus Volume
LLOCFUGV	Decimal		LEAP Left Occipital Fusiform Gyrus Volume
LROPIFGV	Decimal		LEAP Right Opercular Part of The Inferior Frontal Gyrus Volume
LLOPIFGV	Decimal		LEAP Left Opercular Part of The Inferior Frontal Gyrus Volume
LRORIFGV	Decimal		LEAP Right Orbital Part of The Inferior Frontal Gyrus Volume
LLORIFGV	Decimal		LEAP Left Orbital Part of The Inferior Frontal Gyrus Volume
LRPCINGV	Decimal		LEAP Right Posterior Cingulate Gyrus Volume
LLPCINGV	Decimal		LEAP Left Posterior Cingulate Gyrus Volume
LRPRECV	Decimal		LEAP Right Precuneus Volume
LLPRECV	Decimal		LEAP Left Precuneus Volume
LRPAHIPGV	Decimal		LEAP Right Parahippocampal Gyrus Volume
LLPAHIPGV	Decimal		LEAP Left Parahippocampal Gyrus Volume
LRPINSV	Decimal		LEAP Right Posterior Insula Volume
LLPINSV	Decimal		LEAP Left Posterior Insula Volume
LRPAROPV	Decimal		LEAP Right Parietal Operculum Volume
LLPAROPV	Decimal		LEAP Left Parietal Operculum Volume
LRPGV	Decimal		LEAP Right Postcentral Gyrus Volume
LLPGV	Decimal		LEAP Left Postcentral Gyrus Volume
LRPOBGV	Decimal		LEAP Right Posterior Orbital Gyrus Volume
LLPOBGV	Decimal		LEAP Left Posterior Orbital Gyrus Volume
LRPLANPV	Decimal		LEAP Right Planum Polare Volume
LLPLANPV	Decimal		LEAP Left Planum Polare Volume
LRPRGV	Decimal		LEAP Right Precentral Gyrus Volume
LLPRGV	Decimal		LEAP Left Precentral Gyrus Volume
LRPLANTV	Decimal		LEAP Right Planum Temporale Volume
LLPLANTV	Decimal		LEAP Left Planum Temporale Volume
LRSUBCAV	Decimal		LEAP Right Subcallosal Area Volume
LLSUBCAV	Decimal		LEAP Left Subcallosal Area Volume
LRSUPMCV	Decimal		LEAP Right Supplementary Motor Cortex Volume
LLSUPMCV	Decimal		LEAP Left Supplementary Motor Cortex Volume
LRSUPRGV	Decimal		LEAP Right Supramarginal Gyrus Volume
LLSUPRGV	Decimal		LEAP Left Supramarginal Gyrus Volume
LRSUOGV	Decimal		LEAP Right Superior Occipital Gyrus Volume
LLSUOGV	Decimal		LEAP Left Superior Occipital Gyrus Volume
LRSUPALV	Decimal		LEAP Right Superior Parietal Lobule Volume
LLSUPALV	Decimal		LEAP Left Superior Parietal Lobule Volume
LRSTPGV	Decimal		LEAP Right Superior Temporal Gyrus Volume
LLSTPGV	Decimal		LEAP Left Superior Temporal Gyrus Volume
LRTPV	Decimal		LEAP Right Temporal Pole Volume
LLTPV	Decimal		LEAP Left Temporal Pole Volume
LRTRIFGV	Decimal		LEAP Right Triangular Part of The Inferior Frontal Gyrus Volume
LLTRIFGV	Decimal		LEAP Left Triangular Part of The Inferior Frontal Gyrus Volume
LRTTGV	Decimal		LEAP Right Transverse Temporal LEAP Gyrus Volume
LLTTGV	Decimal		LEAP Left Transverse Temporal Gyrus Volume
LMIDBV	Decimal		LEAP Midbrain Volume
LPONSV	Decimal		LEAP Pons Volume
LMEDUV	Decimal		LEAP Medulla Volume
LSCEREPV	Decimal		LEAP Superior Cerebellar Peduncle Volume
assessment_performed	Text	PERFORMED	Was the assessment performed?
assessment_date	Date		If Yes, provide date of assessment
reason_not_performed	Text	REASON_NOT_PERFORMED	If No, please provide reason

Protective Marking: Internal

7.4 MRI Scanner Information (v_imi_epadlcs_mri_scanner_information)

FIELD	TYPE	CONSTRAINTS	DESCRIPTION
patient_id	Integer		Patient ID
visit	Text		Visit Number
date_of_mri	Date		Date of MRI
MAGFS	Text		Magnetic field Strength
SCMAN	Text		Scanner Manufacturer
MANMON	Text		Manufacturer Model Name
DSERNUM	Text		Device Serial Number
SOFTVER	Text		Software Version

7.5 APOE (v_imi_epadlcs_apoe)

Laboratory Kit Identification, results from DNA extracted from blood for Apolipoprotein E (APOE) genotype

FIELD	TYPE	CONSTRAINTS	DESCRIPTION
patient_id	Integer		Patient ID
visit	Text		Visit Number
apoe_result	Text	APOE	Result
apoe_sample_collected	Text	COLLECTED	Was the sample collected?
apoe_sample_date	Date		Date of collection
apoe_reason_not_collected	Text	REASON_NOT_COLLECTED	If No, please provide reason
apoe_blood_sample_id	Text		Blood Sample ID

7.6 CSF (v_imi_epadlcs_csf)

Laboratory Kit Identification, results from CSF analysis for beta-amyloid, t-tau, ptau

FIELD	TYPE	CONSTRAINTS	DESCRIPTION
patient_id	Integer		Patient ID
visit	Text		Visit Number
ptau_result	Text		pTau Result
ttau_result	Text		tTau Result
abeta_1_42_result	Text		Abeta(1-42) Result
abeta_1_42_comments	Text		Abeta(1-42) Comments
csf_sample_collected	Text	COLLECTED	Was the sample collected?
csf_sample_date	Date		Date of collection
csf_reason_not_collected	Text	REASON_NOT_COLLECTED	If No, please provide reason
ptau_reason_not_analysed	Text		pTau Reason Test Not Done
ttau_reason_not_analysed	Text		tTau Reason Test Not Done
abeta_1_42_reason_not_analysed	Text		Abeta(1-42) Reason Test Not Done
csf_sample_id	Text		CSF Sample ID
csf_retest	Text	RETEST	Where any samples retested
csf_retest_reason	Text	RETEST_REASON	Reason for sample retest
csf_retest_visit	Text	RETEST_VISIT	If Yes, select the visit the sample was taken

8 Adverse Events

8.1 Adverse Events (v_imi_epadlcs_adverse_events)

Adverse Events related to study procedures

FIELD	TYPE	CONSTRAINTS	DESCRIPTION
patient_id	Integer		Patient ID
adverse_event_term	Text		What is the adverse event term?
start_date	Date		Start Date
end_date	Date		End Date
event_ongoing	Text	ONGOING	Is the adverse event still ongoing?
severity	Text	SEVERITY	Severity
therapy_given	Text	THERAPY_GIVEN	Concomitant or additional therapy given for this adverse event?
outcome	Text	OUTCOME	Outcome
stabilized	Text	STABILIZED	If Not recovered or Not resolved, has the event stabilized?
stabilized_date	Date		If yes, date of stabilization
related_trial_procedure	Text	RELATED_TRIAL_PROCEDURE	Related Trial Procedure
serious	Text	SERIOUS	Is the adverse event serious?
death	Text	DEATH	Death
cause_of_death	Text		Cause of Death
life_threatening	Text	LIFE_THREATENING	Is life-threatening
hospitalization	Text	HOSPITALIZATION	Requires hospitalization
significant_disability	Text	SIGNIFICANT_DISABILITY	Persistent/significant disability/incapacity
lowest_level_term	Text		Lowest Level Term
preferred_term	Text		Preferred Term
high_level_term	Text		High Level Term
high_level_group_term	Text		High Level Group Term
meddra_version_number	Text		MedDRA Version Number
body_system_or_organ_class	Text		Body System or Organ Class

9 Study Events

9.1 Visit Identification (v_imi_epadlcs_visits)

Visit number and Visit dates

FIELD	TYPE	CONSTRAINTS	DESCRIPTION
patient_id	Integer		Patient ID
visit	Text		Visit Number
foldername	Text		Visit Number
visdat_int	Date		Visit Date
was_visit_performed	Text	PERFORMED	Was the visit performed?
reason_not_performed	Text	REASON_NOT_PERFORMED	If No, please provide reason
visit_site	Text		Visit Site

9.2 Discontinuation (v_imi_epadlcs_discontinuation)

Data on discontinuation of participants

FIELD	TYPE	CONSTRAINTS	DESCRIPTION
patient_id	Integer		Patient ID
dscat	Text	CATEGORY	Category
dsscat	Text	SUBCATEGORY	Subcategory
dsdecod	Text	STATUS	What was the subject's status?
dsstdat_int	Date		Completion/Disposition Date
dsdecod_reas	Text	REASON	What was the subject's primary reason for discontinuation?

aedsl1	Text		If Adverse Event, choose corresponding AE log line, start date, and term
aedsl2	Text		AE log line, start date, and term
aedsl3	Text		AE log line, start date, and term
aedsl4	Text		AE log line, start date, and term
aedsl5	Text		AE log line, start date, and term

Protective Marking: Internal