

Form Checklist

Data Collection Point	Form Name	Form Code	Version	Completed	Reason Not Completed
18 MonthYear Community Follow-Up <input type="checkbox"/>	Contact Information*	CONTACT-CFU	V08Nov2013V 07May2019	<input type="checkbox"/>	
	Community Questionnaire	CQ-CFU <u>or</u> CQ-CFU Core	V07May2019V 09Apr2015	<input type="checkbox"/>	
	Neurology Pack	NS-MULT & N-MULT	V07May2019V 09Apr2015 V07May2019V	<input type="checkbox"/> <input type="checkbox"/>	
	If participant will complete Community Follow-up questionnaires by mail:				
	Community Questionnaire Mail Cover Page	CQ-Cover-CFU	V07May2019V 08Nov2013	<input type="checkbox"/>	
	If participant has passed away:				
	End of Study	EOS	V07May2019V 08Nov2013	<input type="checkbox"/>	
	If participant's consent status has changed:				
18 MonthYear Community Follow-Up – Standing and Walking Mobility Group site <input type="checkbox"/>	Clinical Information – 10MWT	CI-Mobility-10MWT-MULT	V07May2019V 09Apr2015	<input type="checkbox"/>	
	Clinical Information – Modified Activities Specific Balance Confidence Scale	CI-Mobility-ABC-MULT	V07May2019V 09Apr2015	<input type="checkbox"/>	
2-Year Community Follow-Up <input checked="" type="checkbox"/>	Contact Information*	CONTACT-CFU	V07May2019V 08Nov2013	<input checked="" type="checkbox"/>	
	Community Questionnaire	CQ-CFU	V07May2019V 09Apr2015	<input checked="" type="checkbox"/>	
	If participant will complete Community Follow-up questionnaires by mail:				
	Community Questionnaire Mail Cover Page	CQ-Cover-CFU	V07May2019V 08Nov2013	<input checked="" type="checkbox"/>	
	If participant has passed away:				
	End of Study	EOS	V07May2019V 08Nov2013	<input checked="" type="checkbox"/>	
	If participant's consent status has changed:				
Consent Tracking	CT-All	V07May2019V 08Nov2013	<input checked="" type="checkbox"/>		
5 Year Community Follow-Up <input type="checkbox"/>	Contact Information*	CONTACT-CFU	V07May2019V 08Nov2013	<input type="checkbox"/>	
	Community Questionnaire	CQ-CFU <u>or</u> CQ-CFU Core	V07May2019V 09Apr2015	<input type="checkbox"/>	
	If participant will complete Community Follow-up questionnaires by mail:				

	Community Questionnaire Mail Cover Page	CQ-Cover-CFU	V07May2019V 08Nov2013	<input type="checkbox"/>	
	If participant has passed away:				
	End of Study	EOS	V07May2019V 08Nov2013	<input type="checkbox"/>	
	If participant's consent status has changed:				
	Consent Tracking	CT-All	V08Nov20130 7May2019	<input type="checkbox"/>	

* Contains personal identifiers and must be stored separately from main case report forms.

Form Checklist - continued

10 Year Community Follow-Up <input type="checkbox"/>	Contact Information*	CONTACT-CFU <u>or</u> CQ-CFU Core	V07May2019V 08Nov2013	<input type="checkbox"/>	
	Community Questionnaire	CQ-CFU	V07May2019V 09Apr2015	<input type="checkbox"/>	
	If participant will complete Community Follow-up questionnaires by mail:				
	Community Questionnaire Mail Cover Page	CQ-Cover-CFU	V07May2019V 08Nov2013	<input type="checkbox"/>	
	If participant has passed away:				
	End of Study	EOS	V07May2019V 08Nov2013	<input type="checkbox"/>	
	If participant's consent status has changed:				
	Consent Tracking	CT-All	V07May2019V 08Nov2013	<input type="checkbox"/>	
15 Year Community Follow-Up <input type="checkbox"/>	Contact Information*	CONTACT-CFU	V07May2019V 08Nov2013	<input type="checkbox"/>	
	Community Questionnaire	CQ-CFU <u>or</u> CQ-CFU Core	V07May2019V 09Apr2015	<input type="checkbox"/>	
	If participant will complete Community Follow-up questionnaires by mail:				
	Community Questionnaire Mail Cover Page	CQ-Cover-CFU	V07May2019V 08Nov2013	<input type="checkbox"/>	
	If participant has passed away:				
	End of Study	EOS	V07May2019V 08Nov2013	<input type="checkbox"/>	
	If participant's consent status has changed:				
	Consent Tracking	CT-All	V07May2019V 08Nov2013	<input type="checkbox"/>	
20 Year Community Follow-Up <input type="checkbox"/>	Contact Information*	CONTACT-CFU	V07May2019V 08Nov2013	<input type="checkbox"/>	
	Community Questionnaire	CQ-CFU <u>or</u> CQ-CFU Core	V07May2019V 09Apr2015	<input type="checkbox"/>	
	If participant will complete Community Follow-up questionnaires by mail:				
	Community Questionnaire Mail Cover Page	CQ-Cover-CFU	V07May2019V 08Nov2013	<input type="checkbox"/>	
	If participant has passed away:				
	End of Study	EOS	V07May2019V 08Nov2013	<input type="checkbox"/>	

	If participant's consent status has changed:			
	Consent Tracking	CT-All	V07May2019V 08Nov2013	<input type="checkbox"/>
<i>* Contains personal identifiers and must be stored separately from main case report forms.</i>				