

 <b>RHSCIR</b>	<h1>Form Checklist</h1> <h2>Community Follow-Up</h2>
	<p>FC-CFU</p> <p>Page 1 of 2</p>

Form Checklist					
Data Collection Point	Form Name	Form Code	Version	Completed	Reason Not Completed
<b>18 Month Community Follow-Up</b>  <input type="checkbox"/>	Contact Information*	CONTACT-CFU	V13Dec2019	<input type="checkbox"/>	
	Community Questionnaire	CQ-CFU	V22Jan2020	<input type="checkbox"/>	
	Neurology Pack	NS-MULT & N-MULT	V13Dec2019	<input type="checkbox"/>	
			V22Jan2020	<input type="checkbox"/>	
	If participant will complete Community Follow-up questionnaires by mail:				
	Community Questionnaire Mail Cover Page	CQ-Cover-CFU	V13Dec2019	<input type="checkbox"/>	
	If participant has withdrawn consent, is lost to follow up, or has passed away:				
	End of Study	EOS	V13Dec2019	<input type="checkbox"/>	
	If participant's consent status has changed:				
	Consent Tracking	CT-All	V13Dec2019	<input type="checkbox"/>	
<b>5 Year Community Follow-Up</b>  <input type="checkbox"/>	Contact Information*	CONTACT-CFU	V13Dec2019	<input type="checkbox"/>	
	Community Questionnaire	CQ-CFU	V22Jan2020	<input type="checkbox"/>	
	If participant will complete Community Follow-up questionnaires by mail:				
	Community Questionnaire Mail Cover Page	CQ-Cover-CFU	V13Dec2019	<input type="checkbox"/>	
	If participant has withdrawn consent, is lost to follow up, or has passed away:				
	End of Study	EOS	V13Dec2019	<input type="checkbox"/>	
	If participant's consent status has changed:				
	Consent Tracking	CT-All	V13Dec2019	<input type="checkbox"/>	

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

### Form Checklist - continued

<b>10 Year Community Follow-Up</b> <input type="checkbox"/>	Contact Information*	CONTACT-CFU	V13Dec2019	<input type="checkbox"/>	
	Community Questionnaire	CQ-CFU	V22Jan2020	<input type="checkbox"/>	
	If participant will complete Community Follow-up questionnaires by mail:				
	Community Questionnaire Mail Cover Page	CQ-Cover-CFU	V13Dec2019	<input type="checkbox"/>	
	If participant has withdrawn consent, is lost to follow up, or has passed away:				
	End of Study	EOS	V13Dec2019	<input type="checkbox"/>	
	If participant's consent status has changed:				
	Consent Tracking	CT-All	V13Dec2019	<input type="checkbox"/>	
<b>15 Year Community Follow-Up</b> <input type="checkbox"/>	Contact Information*	CONTACT-CFU	V13Dec2019	<input type="checkbox"/>	
	Community Questionnaire	CQ-CFU	V22Jan2020	<input type="checkbox"/>	
	If participant will complete Community Follow-up questionnaires by mail:				
	Community Questionnaire Mail Cover Page	CQ-Cover-CFU	V13Dec2019	<input type="checkbox"/>	
	If participant has withdrawn consent, is lost to follow up, or has passed away:				
	End of Study	EOS	V13Dec2019	<input type="checkbox"/>	
	If participant's consent status has changed:				
	Consent Tracking	CT-All	V13Dec2019	<input type="checkbox"/>	
<b>20 Year Community Follow-Up</b> <input type="checkbox"/>	Contact Information*	CONTACT-CFU	V13Dec2019	<input type="checkbox"/>	
	Community Questionnaire	CQ-CFU	V22Jan2020	<input type="checkbox"/>	
	If participant will complete Community Follow-up questionnaires by mail:				
	Community Questionnaire Mail Cover Page	CQ-Cover-CFU	V13Dec2019	<input type="checkbox"/>	
	If participant has withdrawn consent, is lost to follow up, or has passed away:				
	End of Study	EOS	V13Dec2019	<input type="checkbox"/>	
	If participant's consent status has changed:				
	Consent Tracking	CT-All	V13Dec2019	<input type="checkbox"/>	

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