INTRODUCTION:

I need to ask you a few short questions about decedent name’s death. Someone else may also contact you in the future to ask additional questions if necessary. We really appreciate your help.

(If appropriate, interviewer may use information from other Follow-Up forms to fill in parts of this form. Ask only necessary questions.)

1. On what date did decedent name die?

   / / 
Month Day Year

2. Do you happen to know whether s/he died because of a heart problem, a stroke, or some other cause? (Interviewer, please mark appropriate category below.)

   [ ] Cardiac death
   [ ] Cerebrovascular death
   [ ] Non-CVD death. Specify:

   ____________________________________________

   [ ] Unknown (Interviewer, please write as many details in notes section as possible.)

3. Did s/he die in or out of the hospital?

   [ ] In-Hospital
   [ ] Out of Hospital (put ER deaths here)

Notes:
Please record any additional information that might help the Events staff investigate this death.

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END: Thank you so much for your time. (If appropriate) Again, please accept our condolences for your loss. We are very grateful for decedent name’s participation in our study.

Abstractor ID: ___________

Date of this interview

/ / 
Month Day Year

03/06/2004