PARTICIPANT QUESTIONS

1. Do you bleed or bruise easily?  
   - Yes  
   - No  
   - Don’t know

2. Have you ever been told you have a disorder relating to blood clotting or coagulation?  
   - Yes  
   - No  
   - Don’t know

3. Have you ever experienced fainting spells while having blood drawn?  
   - Yes  
   - No  
   - Don’t know

4. Do you have diabetes for which you take insulin or oral hypoglycemics?  
   - Yes  
   - No  
   - Don’t know

PROCEDURE

5. Was urine sample filled?  
   - Yes  
   - No  
   - Partial

   **Skip to #6**

   Why was urine sample not taken?  
   - Participant unable to void  
   - Refused  
   - Other: 

6. Time at start of venipuncture:  
   - Hr:  
   - Min:  
   - AM  
   - PM

7. Was any blood drawn?  
   - Yes, full sample  
   - Yes, partial sample  
   - No, refused  
   - No, hard to stick  
   - No, other:

8. Elapsed time until tourniquet released:  
   - **seconds**
   - (120-seconds optimum)

9. Time at end of venipuncture:  
   - Hr:  
   - Min:  
   - AM  
   - PM
10. Quality of venipuncture:  
- ☐ Traumatic  
- ☐ Clean  

Mark all that apply:  
- ☐ Vein collapsed  
- ☐ Excessive duration of draw  
- ☐ Vein hard to get at  
- ☐ Hematoma  
- ☐ Multiple sticks  
- ☐ Leakage at venipuncture site

*If tube is not full, but is at least half full, please indicate “Partial” and enter the volume to the nearest mL.*

11. Blood volume per tube:  

<table>
<thead>
<tr>
<th>Exam 6A:</th>
<th>Filled</th>
<th>Specify volume (mL):</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. Serum 7.5 mL</td>
<td>☐ Yes ☐ No ☐ Partial</td>
<td>☐ min 1/2 full</td>
</tr>
<tr>
<td>b. Paxgene 2.5 mL</td>
<td>☐ Yes ☐ No ☐ Partial</td>
<td>☐</td>
</tr>
</tbody>
</table>

*Include if consented to vitD study*

12. Participant selected as a quality control subject?  

(Blood)  
- ☐ NO  
- ☐ YES  
- ☐ YES, but not enough blood for QC

(Urine)  
- ☐ NO  
- ☐ YES, but not enough urine for QC

Comments: ________________________________________________________

____________________________________________________________________

____________________________________________________________________