



## Exam 7

### Stress Reactivity Study Completion Form

Participant ID #:

Acrostic:

Technician ID:

Date:

Month

Day

Year

1. Was the Cardea SOLO sensor applied?

- ☐ Yes →
- ☐ No (go to Q2)

Application:

- ☐ Self-applied
- ☐ Replacement Sensor (self-applied)
- ☐ Applied by FC staff

→ Technician ID: \_\_\_\_\_

Date heart monitor activated:

 /  /   
Month Day Year

Time heart monitor activated:

 :  *Use military time*  
4:00pm = 16:00.

Cardea SOLO Heart Monitor Serial number: \_\_\_\_\_

Note any issues with sensor application: \_\_\_\_\_

**Please schedule the first daily stress phone survey for the day after the heart monitor was activated, on [insert next day] after 16:00 (4pm)."**

Date for first call:

 /  /   
Month Day Year

Preferred language:

- ☐ English ☐ Spanish ☐ Mandarin ☐ Cantonese

Participant preferred contact time for  
daily phone surveys (after 4pm): :   
*Use military time*  
4:00pm = 16:00.

Time Zone:

- ☐ Eastern ☐ Central ☐ Mountain ☐ Pacific
- ☐ Arizona ☐ East Indiana ☐ Indiana-Starke ☐ Michigan

Participant phone number for telephone surveys:

 (  )  - 

Tracking number for return envelope: \_\_\_\_\_

**Go to Question 3**



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2. If no, why sensor was not applied?

- ☐ Participant refused
- ☐ Unknown
- ☐ Other: \_\_\_\_\_

#### Post Clinic Visit Tasks (Do not fill out until check-in calls are made).

**Please complete check-in call two days after sensor placed and after first daily stress phone survey.**

3. Check-in call two days after sensor placed and after first daily stress phone survey?

- ☐ Yes →
- ☐ No

Date:   /   /      
Month Day Year

#### **Please complete reminder call to return heart monitor 8 days after sensor placed.**

4. Reminder phone call to return sensor [8 days after sensor placement]?

- ☐ Yes →
- ☐ No

Date:   /   /      
Month Day Year

5. Was replacement sensor needed due to wear time less than 48hours?

- ☐ Yes →
- ☐ No

Date replacement sensor mailed to participant:

/   /      
Month Day Year

*Start a new completion form if a replacement sensor is shipped.*

6. Should all future phone calls be cancelled? *Mark yes if a new sensor is sent.*

- ☐ Yes
- ☐ No

Comments: \_\_\_\_\_  
\_\_\_\_\_



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#### Alerts Reporting:

7. Date study report received from the  
Stress Reading Center:

<input type="text"/>	<input type="text"/>	/	<input type="text"/>	<input type="text"/>	/	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Month			Day			Year			

The following **Urgent alert** was reported by the Sleep Reading Center:

*List Urgent Report selected on the Heart Monitor Alert Form or None*

Was the alert reported to the Participant?

☐ Yes      →      Date: 

<input type="text"/>	<input type="text"/>	/	<input type="text"/>	<input type="text"/>	/	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Month			Day			Year			

☐ No

Comment: \_\_\_\_\_