

**Appendix A
Participant and Field Center Forms**

NUMERICAL LIST OF FORMS - ENGLISH

Form #	Form Name	Bulletin #	Ver. #	Date of Form	Printed by GPO	Copy at FC	Date at CC
9	Participation Status	2	V8.1	5/15/06		X	5/06
23	Search to Locate Participant	2	V8.1	5/15/06		X	5/06
24	Retention Worksheet	-	V8	10/1/05		X	10/05
33 *	Medical History Update	2	V8.1	5/15/06	X		5/06
33D	Medical History Update (Detail)	7	V10	3/30/07	X		3/07
85	Mammogram	-	V8	5/1/05	X		5/05
111	Extension (Non-HT) Consent Status	2	V1.2	5/15/06		X	5/06
112	Extension (HT) Consent Status	2	V1.2	5/15/06		X	5/06
113	Supplemental Use Consent Status	2	V1.2	5/15/06		X	5/06
114	WHI Genetic Studies Consent Status	2	V1.2	5/15/06		X	5/06
120	Initial Notification of Death	2	V8.1	5/15/06	X		5/06
125	Summary of Hospitalization Diagnosis	2	V8.1	5/15/06	X		5/06
134 *	Addendum to Medical History Update	2	V8.1	5/15/06	X		5/06
150 *	Hormone Use Update (HT)	4	V9	3/30/07	X		3/07
151 *	Activities of Daily Living	4	V9	3/30/07	X		3/07
152	Health Follow-Up by Proxy	6	V1	6/6/08	X		6/08
153	Medication and Supplement Inventory	7	V1	7/1/09	X		8/09
154	Breast Health Supplement to the Medication Inventory	7	V1	7/1/09	X		8/09

NUMERICAL LIST OF FORMS - SPANISH

Form #	Form Name	Ver. #	Date of Form	Printed by GPO	Copy at FC	Date at CC
33S *	Medical History Update	V8.1	5/15/06	X		5/06
33DS	Medical History Update (Detail)	V9	3/30/07	X		3/07
134S *	Addendum to Medical History Update	V8.1	5/15/06	X		5/06
150S *	Hormone Use Update (HT)	V9	3/30/07	X		3/07
151S *	Activities of Daily Living	V9	3/30/07	X		3/07
152S	Health Follow-Up by Proxy	V1	6/6/08	X		6/08
153S	Medication and Supplement Inventory	V1	7/1/09	X		8/09
154S	Breast Health Supplement to the Medication Inventory	V1	7/1/09	X		8/09

- * Denotes marksense scannable form
- Denotes form was provided in initial manual. Not in a Bulletin.

FORMS FOR CCC USE ONLY

Form #	Form Name	Ver. #	Date
121	Report of Cardiovascular Outcome	V8.1	5/15/06
123	Report of Fracture Outcome	V8.1	5/15/06
124	Report of Death (Final)	V8.1	5/15/06
126	Report of Venous Thromboembolic Disease (HT)	V8.1	5/15/06
130	Report of Cancer Outcome	V8.2	10/30/08
131	Report of Hysterectomy (HT)	V8	10/1/05

132	Report of Stroke Outcome	V8.2	10/30/08
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Description

Each WHI form has a unique number as indicated in List of Forms. The List of Forms also indicates if you will receive copies of the forms from the Government Printing Office (GPO) or if you need to make copies of the form at your Field Center (FC). In general, forms that you use in large quantities and all the mark-sense forms are printed by the GPO and shipped to your FC semi-annually. (See *Form 170 - Forms Order* for more information about shipping schedule.) One to two-page forms you use less frequently are copied at the FC. To make copies at your FC, use the most current version of the form located either in this manual or in the Public Folders.

General information on completing, editing, and key-entry of forms is provided in *Section 10 - Data Management*.

Appendix A contains forms number completed by FC staff and/or ES participants. The forms are sorted by number. Turn to the appropriate numbered tab. For easy reference, the header of each page of the instructions indicates the form number and the form version number. The following information is provided for each form:

- A copy of the form
- A cover sheet detailing:
 - the form version number and date
 - a brief description of the form
 - when to use the form
 - purpose of the form
 - general step-by step instructions for handling the form
- An item-by-item description and instructions for each data item on the form

When you receive updates to the Appendix, follow the instructions for inserting and replacing forms and instructions in the manual. When you replace a form and corresponding instructions, keep a copy of the replaced or discontinued form for reference. You may occasionally need to refer back to older versions of forms or discontinued forms when you review previous participant forms. The List of Forms includes discontinued forms and gives discontinued dates.