К\_\_\_\_\_

Comments:			- Affix label here-
			Clinical Center/ID:
			First NameM.I
			Last Name
1. C	ontact Date:	(Complete	Question 5 before interview.)
2. S	taff Person:	-	e/Adherence
_	ontact Type:		aking Standard WHI Dosage:
	Phone		No Adherence rate
	_ <sub>2</sub> Mail □ <sub>8</sub> Other		Yes $\longrightarrow$ Unable to do
4. V	isit Type:	5.2. T	aking Altered Dosage:
	Semi-Annual # ┗	_	No Adherence rate
	Annual # <b>L</b> J	_	Yes Unable to do
	$\int_{4}^{3}$ Non-Routine	5.3.	Current CaD Formulation:
-	-4	_	Chewable Swallowable
6.1 6.2	<b>"Are you now taking, or has your doctor prescribed, any of these medications?" "Calcium</b> containing medications, multivitamins, or supplements (such as Oscal or Tums?)" a. Dosage mg/day b. Name <b>"Vitamin D Pills or </b> No  Yes multivitamins containing Vitamin D?" a. Dosage IU/Day <b>"Calcitriol</b> (such as IU/Day	9. Res	e there any worries, discomforts, or questions a would like to discuss?" here and discuss with participant. Refer to Clinic ctitioner if there are any concerns. sulting action from Questions 6-8. <i>(This item <u>must</u> completed. Mark all that apply.)</i> Participant reassured and advised to continue with current study medications.
	efer any "Yes" responses in 6.2 - 6.3 to CP.		<sup>2</sup> evaluation Date and time of next appointment:
	Since your last contact, have you been told you have any of the following medical conditions?"		<sup>3</sup> Clinic Practitioner or Consulting Gynecologist
	"Hypercalcemia (too much $\Box_0$ No $\Box_1$ Yes calcium in the blood)?"		Participant referred to primary physician:
:	<b>"Kidney Problems</b> (such as D <sub>0</sub> No D <sub>1</sub> Yes stones in your kidney or bladder)?"		<ul> <li>Physician:</li> <li>Medications changed or stopped (<i>complete</i></li> <li><i>Form 54 - Change of Medications</i>)</li> </ul>
	"Are you undergoing No Yes kidney dialysis?"		<ul> <li>Form 54 - Change of Medications)</li> <li>Other (Specify):</li> </ul>
Refer	any "Yes" responses in 7.1 - 7.3 to CP.		o

## WHI

## Form 17 - CaD Management and Safety Interview

- 10. "I'd like to talk with you about your CaD study pills." 10.1. "Since your last contact, how often did you take the study pills? Would you say ... " (Mark response most often true.) (Read responses to participant.) □<sub>0</sub> "Not at all" "Less than once per week" 📃 ୁ "1 - 2 days per week" 🔲 ຼ "3 - 4 days per week" ☐ "5 - 6 days per week"  $\Box_{5}$  "Every day of the week" 10.2. "How do you take your pills on the days you take them?" (Read responses to participant.) "One pill twice a day" , "Two pills once a day" , "One pill once a day" □<sub>8</sub> Other\_ 10.3. "It is common for people to miss taking pills. How many days have you missed taking any of your pills in the last month?" days in the last month 10.4. "What helped you remember to take your pills?" 10.5. "People miss taking their study pills for many reasons. If there were days you did not take the pills, what were the reasons you didn't?" (Mark all that apply.) Took all pills every day Experienced symptoms 3 Forgot pill(s) Forgot bottle Needed/Took a break 6 Afraid of health problems Family/Friend recommendation  $\square_8$ MD recommendation Didn't have any pills | |a 88 Other
  - 10.6 Determine the participant's preference for CaD formulation.

Chewable Swallowable

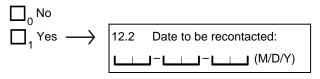
- 10.7. Strategies to improve adherence (Refer to forms instructions for specific examples.)
  - Ask participant to describe the reason(s) given.
  - Provide reassurance, using validation, review of facts.
  - \_\_\_\_ Recommend palliative measures using specific examples.
  - \_\_\_\_ Recommend steps to improve adherence, such as ways to deal with problem at home, self-motivation, mobilizing social support.
  - \_\_\_\_ Put concerns into perspective-emphasize safety of study, importance of WHI in answering health problems.

## Refer to CP if adherence strategies seem complicated.

11.1 Should participant be put on Intensive Adherence Program? (See instructions for entry criteria.)



12.1 Should participant be recontacted in one month by phone for clinical follow-up?



13. Comments: