DATASHEET : UCL LONDON

British Regional Heart Study 2010-2012

Batch / Study #	Name	**Please amend your details if necessary:**
DOB:	Age:	
Tel:		
GP:		

STATION 1 Observer ☐☐ Initials, Time ☐☐ ☐☐ (24 hr)

Sit/Stand 5 times No reas ☐ ref=1 dis=2 ☐☐ ☐☐ secs N at 30sec? ☐ Hands ☐ P/T

Walk 3 metres No reas ☐ ref=1 dis=2 ☐☐ ☐☐ secs Incompl at 30 sec ☐ P/T

Height (cm) ☐☐☐ ☐ Problem? ☐ P/T

Weight

Pacemaker? No →TANITA BODY COMPOSITION ☐☐☐ ☐ (kg) Problem? ☐ P/T

Yes →SCALES ☐☐☐ ☐ (kg)

1. Waist circ 1 (cm) ☐☐☐ ☐ 3. Waist circ 2 ☐☐☐ ☐ Problem? ☐ P/T

2. Hip circ 1 (cm) ☐☐☐ ☐ 4. Hip circ 2 ☐☐☐ ☐ Problem? ☐ P/T

Arm circ R (cm) ☐☐ ☐ Problem? ☐ P/T

1. Triceps R1 (mm) ☐☐ ☐ 3. TricepsR2 ☐☐ ☐ Problem? ☐ P/T

2. SubscapR1 (mm) ☐☐ ☐ 4. SubscapR2 ☐☐ ☐ Problem? ☐ P/T

Cuff size Armcirc < 22 cm = **1 (small)** 22-32 cm = **2 (medium)** >32 cm = **3 (large)**

Blood pressure R	SITTING 1			SITTING 2			STANDING 1			STANDING 2		
Systolic (mmHg)												
Diastolic (mmHg)												
Heart rate (per min)												

Cuff ☐ Instr ☐ Problem? ☐ P/T Faintness ☐ Y =1 Breathless? ☐ Y = 1

Room temp (°C) ☐☐ ☐ Ethnicity WE =1 BAC = 2 SA = 3 Ch/J/O = 4 Other = 5 ☐

Spirometry Instr ☐ Inhal 24hr ☐ Y = 1 Time24hr ☐☐ ☐☐

BTV % ☐☐ ☐ C I ☐ Y=1 Problem? ☐ P/T

Grip Instr ☐

Grip strength (R) ☐☐ ☐☐ ☐☐ Dom ☐ P/T Problem? ☐ P/T

Grip strength (L) ☐☐ ☐☐ ☐☐ Dom ☐ P/T Problem? ☐ P/T

P = Participant T= Technical

STAPLED DATA RECORDS

SPIROMETRY DATA

Ref number

N blows BTV %

FVC

FEV1

FEV0.5

PEF

FEF25-75%

FEF75-85%

FEF25%

FEF50%

FEF75%

BIOIMPEDANCE DATA (TANITA)

TANITA BODY COMPOSITION ANALYSER

Date DD MM YYYY Time (24hr)

Body type Standard=1/Athletic=2

Gender Female=1/Male=2

Age
Height cm
Weight kg
BMI kg/m2
BMR kJ
Kcal
Fat % %
Fat mass kg
FFM kg
TBW kg
Visceral fat rating

IMPEDANCE
Whole Body
Right leg
Left leg
Right arm
Left arm

Segmental Analysis
Right leg
Fat % %
Fat mass kg
FFM kg
Predicted Muscle Mass kg

Left leg
Fat % %
Fat mass kg
FFM kg
Predicted Muscle Mass kg

Right arm
Fat % %
Fat mass kg
FFM kg
Predicted Muscle Mass kg

Left arm
Fat % %
Fat mass kg
FFM kg
Predicted Muscle Mass kg

Trunk
Fat % %
Fat mass kg
FFM kg
Predicted Muscle Mass kg

DATASHEET: CARDIFF UNIVERSITY
British Regional Heart Study 2010-2012

Batch / Study #	Date
DOB:	

BIOIMPEDANCE

Pacemaker? ☐ No = 2 Both Bio impedance measurements

YES = 1→ NO BIOIMPEDANCE MEASUREMENTS GO DIRECT TO BLOOD TEST

NO Pacemaker: BOTH BIOIMPEDANCE MEASUREMENTS

1. Bodystat Instrument ☐ Reading ☐☐☐☐

STATION 2: Observer ID.☐☐ ROOM TEMP☐☐.☐ °C SKIN TEMP☐☐.☐ °C

RIGHT SIDE **Comments**

RCCA □ ……..

RDist □ ……..

PLAQUE ☐ **Y=1**

RCCA ☐ RCCB ☐ RICA ☐ RECA ☐

Cuff size (Armcirc < 22 cm = 1 (small), 22-32 cm = 2 (medium), >32 cm = 3 (large)

RBP1 Sys ☐☐☐ Dia ☐☐☐ HR ☐☐☐

RBP2 Sys ☐☐☐ Dia ☐☐☐ HR ☐☐☐

Left side **Comments**

LCCA □ ……..

LDist □ ……..

PLAQUE ☐ **Y=1**

LCCA ☐ LCB ☐ LICA ☐ LECA ☐

LBP1 Sys ☐☐☐ Dia ☐☐☐ HR ☐☐☐

LBP2 Sys ☐☐☐ Dia ☐☐☐ HR ☐☐☐

Observer ID ☐☐ **Comments**

APBI (PPG)

1.Sys BP R brachial ☐☐☐	Sys BP R toe ☐☐☐	RABPI ☐.☐☐
2.Sys BP R brachial ☐☐☐	Sys BP R toe ☐☐☐	RABPI ☐.☐☐
3.Sys BP R brachial ☐☐☐	Sys BP R toe ☐☐☐	RABPI ☐.☐☐
1.Sys BP L brachial ☐☐☐	Sys BP L toe ☐☐☐	LABPI ☐.☐☐
2.Sys BP L brachial ☐☐☐	Sys BP L toe ☐☐☐	LABPI ☐.☐☐
3.Sys BP L brachial ☐☐☐	Sys BP L toe ☐☐☐	LABPI ☐.☐☐

STATION 3 Observer ID: ☐☐

Comments

PWA (Sphyg)

R BP Sys ☐☐☐ Dia ☐☐☐ HR ☐☐☐

R BP Sys ☐☐☐ Dia ☐☐☐ HR ☐☐☐

Reading 1 Augmentation (mmHg) ☐☐☐ AIx (%) ☐☐☐

Reading 2 Augmentation (mmHg) ☐☐☐ AIx (%) ☐☐☐

PWA (Vicorder)

R BP Sys ☐☐☐ Dia ☐☐☐ HR ☐☐☐

Reading 1 Augmentation (mmHg) ☐☐☐ AIx (%) ☐☐☐

Reading 2 Augmentation (mmHg) ☐☐☐ AIx (%) ☐☐☐

Comments

R BP1 Sys ☐☐☐ Dia ☐☐☐ HR ☐☐☐

R BP2 Sys ☐☐☐ Dia ☐☐☐ HR ☐☐☐

PWV (Sphyg) **Accepted**

1 CAR-FEM Dis ☐☐☐ Prox ☐☐☐(mm) ☐☐.☐ ± ☐.☐m/s ☐

2 CAR-FEM Dis ☐☐☐ Prox ☐☐☐(mm) ☐☐.☐ ± ☐.☐m/s ☐

3 CAR-FEM Dis ☐☐☐ Prox ☐☐☐(mm) ☐☐.☐ ± ☐.☐m/s ☐

4 CAR-FEM Dis ☐☐☐ Prox ☐☐☐(mm) ☐☐.☐ ± ☐.☐m/s ☐

PWV (Vicorder)

1 CAR-FEM Dis ☐☐.☐ Prox ☐☐.☐(cm) ☐☐.☐ m/s

2 CAR-FEM Dis ☐☐.☐ Prox ☐☐.☐(cm) ☐☐.☐ m/s

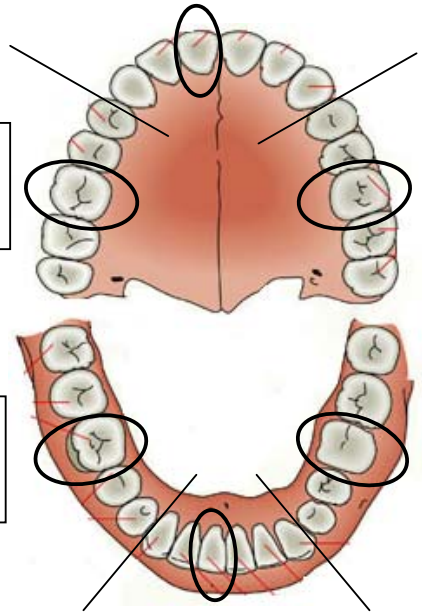
STATION 4 Observer ID ☐☐ ☐ Refusal=1 ☐ Prob =1 ORAL HEALTH

I. TOTAL NUMBER OF NATURAL TEETH: **Upper** ☐☐ **Lower** ☐☐ Batch No: ☐☐☐

II. PERIODONTAL POCKET

2. Mesial = ☐☐
Distal = ☐

1. Mesial = ☐☐
Distal = ☐



3. Mesial = ☐☐
Distal = ☐

6. . Mesial = ☐☐
Distal = ☐

4. . Mesial = ☐☐
Distal = ☐

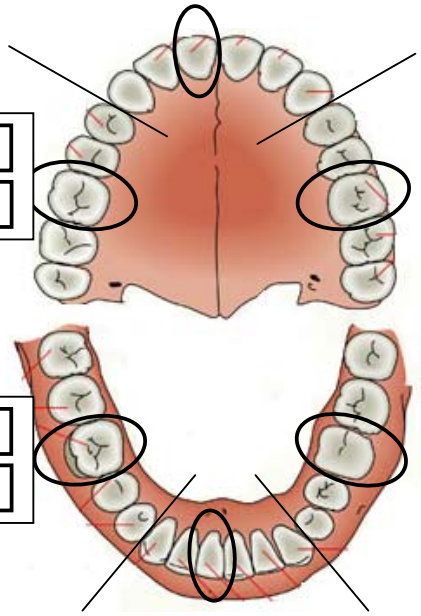
5. . Mesial = ☐☐
Distal = ☐

Score -
0 = Up to 3.5 mm (first probe band)
1 = 4 to 5.5 mm (first dark band)
2 = 6 to 8.5 mm (between two dark bands)
3 = 9 to 11.5 mm (second dark band)
8 = Unscorable
9 = Missing

III. GINGIVAL BLEDING

2. . Mesial = ☐
Distal = ☐

1. . Mesial = ☐
Distal = ☐



3. . Mesial = ☐
Distal = ☐

6. . Mesial = ☐
Distal = ☐

4. . Mesial = ☐
Distal = ☐

5. . Mesial = ☐
Distal = ☐

Score -
Yes = 1
No = 0
Missing = 9

BLOODS

Blood test Success? ☐ Full = 2 Part = 1 None = 0 Problem? ☐ Refusal = 1 Technical = 2

Time (blood test) ☐☐☐☐ (24 hour) Fasting instructions followed? ☐ Yes= 1 No=2 Diabetes =3

Time last eaten? ☐☐☐☐ (24 hour) Day last eaten ☐ Today = 1, Yesterday = 2

ID AFFIX BLOOD LABEL HERE

Incomplete sample – mark completed tubes with 1

☐	☐	☐	☐	☐	☐	☐	☐	☐
A	B	C	DE	FJ	K	LN	PS	T

ECG

Electrocardiogram ☐ Yes= 1 No=2

Ankle oedema: Left ☐ Right ☐ Yes= 1 No=2

PHYSICAL ACTIVITY SURVEY

Would you be prepared to wear this small monitor (which will measure how much activity you do) around your waist for the next week or so and then post it back to us?

Actigraph? ☐ Yes= 1 No =2 Tel Number: _____ (if not already recorded on the front of the datasheet)

If activity survey has not been **prepacked**, please use a spare and record the Monitor Serial number below. Ensure the participant ID is recorded on the questionnaire, diary & monitor.
If no telephone number is provided, the participant will be unable to take part in the Activity Survey.

ID: AFFIX BLOOD LABEL HERE

M	A	T	2	C	0												

CONSENT

We will arrange to have your blood sample checked for cholesterol and other factors which are important for heart disease risk. The results of the blood tests and other measurements will be sent back to your doctor in the next four to five weeks. If any of the results give cause for concern, you will be asked to make an appointment with your doctor.

1. Do you agree to us passing the test results to your doctor?

☐$_1$ Agreed ☐$_2$ Not Agreed

Part of your blood sample will be frozen and kept for special scientific studies of factors affecting heart disease risk, which may help us to understand how to prevent heart disease in the future. Among the factors we may need to study will be the way in which genetic factors affect heart disease risk.

2. Would you allow us to use your sample in this way?

☐$_1$ Agreed ☐$_2$ Not Agreed

Following the future health of all the men taking part remains a very important part of the study. However, because of new data protection laws, we are only able to continue to do this if you give us **specific written permission**.

In order to update your health record effectively, we need to obtain routine information from your family doctor and, where appropriate, from hospitals and several National Health Service agencies listed below*. We are particularly concerned to know about illnesses of the heart and circulation, diabetes, cancer and other disabling conditions. Even if you do not have any of these conditions, the review of your medical records is of very great importance to us. The information we obtain is kept securely and is only seen by members of our small research team.

3. Do you agree to us following your future health through your health records?

☐$_1$ Agreed ☐$_2$ Not Agreed

I agree to allow the Research Team to continue to study my health in accordance with the criteria above. I understand that any details recorded will be treated in complete confidence.

Signed: _____

Print name: _____

Date: _____

*The agencies related to the National Health Service are:-

-the NHS Information Centre
-the General Register Office
-the National Cancer Intelligence Centre
-the Primary Care Patient Registration Service

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http://www.ucl.ac.uk/pcph/research/brhs