UWI2016-07-01 - Contact Data Dictionary

TABLE OF CONTENTS

Document Summary

Property	Value
Document Title	UWI2016-07-01 - Contact: Data Dictionary
Date Created	01/02/2026
Sections	3
Entries	21
Document Filename	dictionary_contact.rtf

UWI2016-07-01 - Contact: Data Dictionary

Section 1: Identifiers

Class	Variable	Label	Description	Format Text
01. Principal	**SEQUENCE_NO_**	Patient ID		Numeric

Section 2: Study-wide

Class	Variable	Label	Description	Format Text
01. Principal	**ARM**	Arm		"ACTOplus XR/Placebo"="ACTOplus XR/Placebo"
01. Principal	**CYCLE**	Cycle		Char
01. Principal	**DAY_1**	Day		Numeric
01. Principal	**FORM**	Form		"CP_DCP_Participant_Contact_Form V2"="CP_DCP_Participant_Contact_Form V2"
01. Principal	**FORM_DESC_**	Form Description		"Built for UW16110"="Built for UW16110"
01. Principal	**FORM_STATUS**	Form Status		"Amended"="Amended" "Completed"="Completed"
01. Principal	**LEVEL**	Level		Char
01. Principal	**MDS_DCPProtocolNumber**	DCP Protocol Number	Unique alphanumeric identifier assigned to a protocol by the National Cancer Institute for reporting of data.	"UWI2016-07-01"="UWI2016-07-01"
01. Principal	**MDS_RegisteringInstitution**	Registering Institution	Code that uniquely identifies the institution where the research participant was registered in the clinical trial	"MD017"="MD017" "MN022"="MN022" "WI020"="WI020"
01. Principal	**NOT_APPLICABLE_OR_MISSING**	Not Applicable Or Missing		Char
01. Principal	**PHASE**	Phase		"Treatment"="Treatment"
01. Principal	**SEGMENT**	Segment		"Day 7-10 Interim Phone Contact"="Day 7-10 Interim Phone Contact" "Final Dosing Reminder Call"="Final Dosing Reminder Call"
01. Principal	**VISIT_DATE**	Visit Date		SAS Date
01. Principal	**VisitType**	Visit Type	The visit at which the data reported on the form was collected (i.e., baseline, Month 1, etc.)	"Day 5 - 7 Phone Contact"="Day 5 - 7 Phone Contact" "Day 7-10 Phone Contact"="Day 7-10 Phone Contact" "Dose Reminder Phone Contact"="Dose Reminder Phone Contact"

Section 3: Contact

Class	Variable	Label	Description	Format Text
01. Principal	**Anychangesinconnmed**	Were Any Changes In Concomitant Medications Reported?	A question that asks whether the participant reported any changes on concomitant medications.	"No"="No" "Yes"="Yes"
01. Principal	**ContactTime**	Contact Time	The time at which an individual is contacted.	Numeric
01. Principal	**ContactType**	Contact Type	Means by which an individual is contacted: e.g. phone, email, fax, address, etc.	"Home Cell"="Home Cell" "Home Phone"="Home Phone"
01. Principal	**DateofContact**	Date Of Contact	The date of the last contact with a patient or participant in the treatment period.	SAS Date
01. Principal	**Didparticipantreportanyae**	Did The Participant Report Any Symptoms Or Adverse Events?	A yes/no question that asks whether the participant reported any symptoms or adverse events.	"No"="No" "Yes"="Yes"
01. Principal	**Istheparticipantcompliant**	Is The Participant Compliant With Protocol Intervention Per Telephone Conversation Or Email?	The indicator that represents whether the participant was compliant with the protocol intervention.	"No"="No" "Yes"="Yes"