Data Dictionary Codebook

Anxiety & Daily Functioning Study (ADFS-2026) (PID: 76448)

04/29/2026 8:43am

Instruments		
Instrument	**Form Name**	**Events**
Participant Demographics	participant_demo	visit_1_week_0_arm_1
Eligibility Screening	eligibility_screening	visit_1_week_0_arm_1
Generalized Anxiety Disorder (GAD-7) Scored	generalized_anxiety_disorder_gad7_scored	visit_1_week_0_arm_1 visit_2_week_4_arm_1 visit_3_week_8_arm_1
Daily Functioning Log	daily_functioning_log	visit_1_week_0_arm_1 visit_2_week_4_arm_1 visit_3_week_8_arm_1
Adverse Event Log	adverse_event_log	visit_2_week_4_arm_1 visit_3_week_8_arm_1

Events		
Event Name	**Unique event name**	**Event ID**
Visit 1: Week 0	visit_1_week_0_arm_1	193151
Visit 2: Week 4	visit_2_week_4_arm_1	193152
Visit 3: Week 8	visit_3_week_8_arm_1	193153

	#	Variable / Field Name	Field Label *Field Note*	Field Attributes (Field Type, Validation, Choices, Calculations, etc.)
Instrument: Participant Demographics (participant_demo)				
	1	[record_id]	Record ID	text
	2	[participant_id]	Participant ID *ADFS-001, ADFS-002, etc.*	text, Identifier
	3	[enrollment_date]	Enrollment Date	text (date_mdy)
	4	[age]	Age	text (integer, Min: 18, Max: 99)
	5	[gender_identity]	Gender Identity	radio 0, Woman 1, Man 2, Non-binary 3, Prefer not to say 4, Other (specify)
	6	[gender_specify] Show the field ONLY if: [gender_identity] = '4'	Specify Gender	text

	7	[education_level]	Education Level	dropdown 0, Less than high school 1, HS Diploma / GED 2, Some college 3, Bachelor's Degree 4, Graduate Degree
	8	[email_address]	Email Address	text (email), Identifier
	9	[participant_demo_complete]	Section Header: *Form Status* Complete?	dropdown 0, Incomplete 1, Unverified 2, Complete
Instrument: Eligibility Screening (eligibility_screening)				
	10	[over_eighteen]	Participant age 18 or older?	yesno, Required 1, Yes 0, No
	11	[eng_fluency]	Participant fluent in English?	yesno, Required 1, Yes 0, No
	12	[psych_diagnosis]	Current psychiatric diagnosis?	yesno 1, Yes 0, No
	13	[psychotropic_med]	Current psychotropic medication?	yesno 1, Yes 0, No
	14	[eligibility_status]	Eligibility Status	calc Calculation: if([over_eighteen]="1" and [eng_fluency]="1" and [psych_diagnosis]="0" and [psychotropic_med]="0", 0, 1) Field Annotation: @HIDDEN
	15	[yes_eligible] Show the field ONLY if: [eligibility_status] = '0'	✓ Participant is eligible to enroll	descriptive
	16	[no_eligible] Show the field ONLY if:	✘ Patient is not eligible to enroll	descriptive

		[eligibility_status] = '1'		
	17	[screened_by]	Screened by *Staff Initials*	text, Required
	18	[eligibility_screening_complete]	Section Header: *Form Status* Complete?	dropdown 0, Incomplete 1, Unverified 2, Complete
Instrument: Generalized Anxiety Disorder (GAD-7) Scored (generalized_anxiety_disorder_gad7_scored) **Enabled as survey**				
	19	[sc_gad1]	Section Header: *Over the last 2 weeks, how often have you been bothered by the following problems?* 1. Feeling nervous, anxious, or on edge	radio (Matrix) 0, Not at all 1, Several days 2, More than half the days 3, Nearly every day
	20	[sc_gad2]	2. Not being able to stop or control worrying	radio (Matrix) 0, Not at all 1, Several days 2, More than half the days 3, Nearly every day
	21	[sc_gad3]	3. Worrying too much about different things	radio (Matrix) 0, Not at all 1, Several days 2, More than half the days 3, Nearly every day
	22	[sc_gad4]	4. Trouble relaxing	radio (Matrix) 0, Not at all 1, Several days 2, More than half the days 3, Nearly every day
	23	[sc_gad5]	5. Being so restless that it is hard to sit still	radio (Matrix) 0, Not at all 1, Several days 2, More than half the days 3, Nearly every day
	24	[sc_gad6]	6. Becoming easily annoyed or irritable	radio (Matrix) 0, Not at all

				1 Several days 2 More than half the days 3 Nearly every day
	25	[sc_gad7]	7. Feeling afraid as if something awful might happen	radio (Matrix) 0 Not at all 1 Several days 2 More than half the days 3 Nearly every day
	26	[sc_tot_score]	Total Score	calc Calculation: sum([sc_gad1],[sc_gad2], [sc_gad3],[sc_gad4],[sc_gad5], [sc_gad6],[sc_gad7])
	27	[min_severity_gad] Show the field ONLY if: [sc_tot_score] <= 4	GAD Severity: Minimal	descriptive
	28	[mild_severity_gad] Show the field ONLY if: [sc_tot_score] >= 5 and [sc_tot_score] <= 9	GAD Severity: Mild	descriptive
	29	[moderate_severity_gad] Show the field ONLY if: [sc_tot_score] >= 10 and [sc_tot_score] <= 14	GAD Severity: Moderate	descriptive
	30	[severe_gad] Show the field ONLY if: [sc_tot_score] >= 15	GAD Severity: Severe	descriptive
	31	[sc_gad_difficult]	If you checked off any problems, how difficult have these made it for you to do your work, take care of things at home, or get along with other people?	radio 0 Not difficult at all 1 Somewhat difficult 2 Very difficult 3 Extremely difficult Custom alignment: LH

	32	[generalized_anxiety_disorder_gad7_scored_complete]	Section Header: *Form Status* Complete?	dropdown 0, Incomplete 1, Unverified 2, Complete
Instrument: Daily Functioning Log (daily_functioning_log)				
	33	[visit_date]	Visit Date	text (date_mdy), Required
	34	[visit_number]	Visit Number	dropdown 0, Visit 1 1, Visit 2 2, Visit 3
	35	[work_attendance]	Attended work / school as normal?	radio 0, Yes 1, No 2, Partially
	36	[daily_activities]	Rate ability to complete daily activities	slider (number, Min: 0, Max: 10) Slider labels: Not at all, , Completely normal Custom alignment: RH
	37	[sleep_hours]	Hours of sleep last night	text (number, Min: 0, Max: 24) Custom alignment: RH
	38	[ae_event_occurred]	Did an adverse event occur during the visit?	yesno 1, Yes 0, No Custom alignment: RH
	39	[staff_notes]	Staff Notes *Optional text for coordinator observations*	notes Custom alignment: RH
	40	[completed_by]	Completed by *Staff initials*	text, Required Custom alignment: RH
	41	[daily_functioning_log_complete]	Section Header: *Form Status* Complete?	dropdown 0, Incomplete 1, Unverified 2, Complete
Instrument: Adverse Event Log (adverse_event_log)				
	42	[ae_event_date]	Event Date	text (date_mdy)
	43	[event_description]	Event Description	notes, Required
	44	[ae_event_severity]	Event Severity	radio 0, Mild

				1 Moderate 2 Severe
	45	[ae_relation]	Relation of adverse event to the study	radio 0 Definitely related 1 Possibly related 2 Unlikely related 3 Not related
	46	[report_to_irb]	Was the event reported to the IRB?	yesno 1 Yes 0 No
	47	[adverse_event_log_complete]	Section Header: *Form Status* Complete?	dropdown 0 Incomplete 1 Unverified 2 Complete