Form	Item No	Description	Field Name	limits/variables	length	type
WADRC B8-1		WADRC Form B8-1: Brief Physical Exam	SV_CDI_WADRC_B8_1			
	Header	Subject ID	SUBJID	adrc*nnnnnn*	9	character/ numeric
	Header	Form Date	FORMDATE	mmddyyyy	8	numeric
	Header	ADRC Visit #	ADRCVISITNUMB	1-999	3	numeric
	Header	Examiner Initials	EXAMINERINITIALS		3	character
	1	General Appearance	GNLAPP	0=normal, 1=abnormal	1	numeric
	1.1	General Appearance comments	GNLAPPCOM	if abnormal	30	character
	2	HEENT	HEENT	0=normal, 1=abnormal	1	numeric
	2.1	HEENT comments	HEENTCOM	if abnormal	30	character
	3	Neck	NECK	0=normal, 1=abnormal	1	numeric
	3.1	Neck comments	NECKCOM	if abnormal	30	character
	4	Chest	CHEST	0=normal, 1=abnormal	1	numeric
	4.1	Chest comments	CHESTCOM	if abnormal	30	character
	5	Heart	HEART	0=normal, 1=abnormal	1	numeric
	5.1	Heart comments	HEARTCOM	if abnormal	30	character
	6	Abdomen	ABDMN	0=normal, 1=abnormal	1	numeric
	6.1	Abdomen comments	ABDMNCOM	if abnormal	30	character
	7	Extremities	EXTRM	0=normal, 1=abnormal	1	numeric
	7.1	Extremities comments	EXTRMCOM	if abnormal	30	character
	8	Edema	EDEMA	0=normal, 1=abnormal	1	numeric
	8.1	Edema comments	EDEMACOM	if abnormal	30	character
	9	Peripheral Vascular	PERPHVASC	0=normal, 1=abnormal	1	numeric
	9.1	Peripheral Vascular comments	PERPHVASCCOM	if abnormal	30	character
	10	Skin and Appendages	SKIN	0=normal, 1=abnormal	1	numeric
	10.1	Skin and Appendages comments	SKINCOM	if abnormal	30	character
	11	Musculoskeletal	MSCLSKLTL	0=normal, 1=abnormal	1	numeric
	11.1	Musculoskeletal comments	MSCLSKLTLCOM	if abnormal	30	character
	12	Back	BACK	0=normal, 1=abnormal	1	numeric
	12.1	Back comments	BACKCOM	if abnormal	30	character
	13	Other	PHYSOTHER	0=normal, 1=abnormal	1	numeric
	13.1	Other comments	PEOTHRCOM	if abnormal	30	character
	13.2	Other specify	PEOTHR		30	character

Form	Item No	Description	Field Name	limits/variables	length	type
WADRC B8-2		WADRC Form B8-2: Brief Neurological Exam	SV_CDI_WADRC_B8_2			
	Header	Subject ID	SUBJID	adrc*nnnnnn*	9	character/ numeric
	Header	Form Date	FORMDATE	mmddyyyy	8	numeric
	Header	ADRC Visit #	ADRCVISITNUMB	1-999	3	numeric
	Header	Examiner Initials	EXAMINERINITIALS		3	character
	1	Tremor	TREMOR	0=absent, 1=present	1	numeric
	1.1	Tremor comments	TREMORCOM	if present	30	character
	2	Level of Consciousness	LVLCNS	0=normal, 1=abnormal	1	numeric
	2.1	Level of Consciousness comments	LVLCNSCOM	if abnormal	30	character
	3	Cranial Nerves	CRANRV	0=normal, 1=abnormal	1	numeric
	3.1	Cranial Nerves comments	CRANRVCOM	if abnormal	30	character
	4	Motor Strength	MOTRSTR	0=normal, 1=abnormal	1	numeric
	4.1	Motor Strength comments	MOTRSTRCOM	if abnormal	30	character
	5	Cerebellar: Finger-to-Nose	FNGTNSE	0=normal, 1=abnormal	1	numeric
	5.1	Cerebellar: Finger-to-Nose comments	FNGTNSECOM	if abnormal	30	character
	6	Cerebellar: Heel-to-Shin	HLTSHN	0=normal, 1=abnormal	1	numeric
	6.1	Cerebellar: Heel-to-Shin comments	HLTSHNCOM	if abnormal	30	character
	7	Sensory	SENSORY	0=normal, 1=abnormal	1	numeric
	7.1	Sensory comments	SENSORYCOM	if abnormal	30	character
	8	Deep Tendon Reflexes	DPTNDRFLX	0=normal, 1=abnormal	1	numeric
	8.1	Deep Tendon Reflexes comments	DPTNDRFLXCOM	if abnormal	30	character
	9	Plantar Reflexes	PLTRFLX	0=normal, 1=abnormal	1	numeric
	9.1	Plantar Reflexes comments	PLTRFLXCOM	if abnormal	30	character
	10	Gait	GAIT	0=normal, 1=abnormal	1	numeric
	10.1	Gait comments	GAITCOM	if abnormal	30	character
	11	Other	NEOTHER	0=normal, 1=abnormal	1	numeric
	11.1	Other comments	NEUROTHRCOM	if abnormal	30	character
	11.2	Other specify	NEUROTHR		30	character