CHRONIC AIRWAY ASSESSMENT TEST (CAAT), CAA
QUESTION BY QUESTION (QxQ), VERSION 1.0

I. GENERAL INSTRUCTIONS

The Chronic Airway Assessment Test (CAA) is to be completed during the participant's clinic visit.

Please answer every question on this form. *NOTE: All response options in the paper form may not appear in CDART (e.g., 'Don't know', 'Declines to answer', etc.). Beside each item input is a small double bracket icon which looks like this: ⁑. Clicking this icon displays a field dialogue box in which the "Field Status" selection menu allows you to choose from the following options: 'Refused', 'No response', 'Doesn't know', 'Not applicable', 'Maximum value', 'Minimum value', and 'Missing'.* **See MOP 6 – Section 3.2 for additional instructions on how to select a Field Status option.**

II. INSTRUCTIONS FOR INDIVIDUAL ITEMS

Header Information: Consists of key fields which uniquely identify each subject and recorded occurrence of a form. For the "ID NUMBER", record the 3-character, 6-digit number assigned to the specific participant. For the "Event", record if this is happening at Baseline or another event.

Item 0a.   Record the date the data was collected or abstracted in the MM/DD/YYYY format either by selecting the pop-up calendar in CDART or entering the date in the space provided.

Item 0b.   Record the SOURCE staff code of the person who collected or abstracted the data. This code is assigned to each person at each site by the GIC. If you do not have a staff code and are collecting SOURCE data, please contact the GIC in order to receive your own individual staff code.

NOTE: Read the script preceding Item 1 <u>exactly</u> as written to the participant.

For each item, have the participant select the number that best describes their experience.

Item 1.   Select the number between 0 – 5 that the participant reported regarding coughing frequency with 0 being never cough and 5 being cough all the time.

Item 2.   Select the number between 0 – 5 that the participant reported regarding having phlegm (mucus) in their chest with 0 being none and 5 being completely full.

Item 3.   Select the number between 0 – 5 that the participant reported regarding feeling tightness in their chest with 0 being not tight at all and 5 being very tight.

Item 4.   Select the number between 0 – 5 that the participant reported regarding being breathless when walking up a hill or one flight of stairs with 0 being not breathless and 5 being very breathless.

Item 5.   Select the number between 0 – 5 that the participant reported regarding being limited in doing activities at home with 0 being not at all limited and 5 being very limited.

Item 6.   Select the number between 0 – 5 that the participant reported regarding their confidence in leaving home despite their lung condition with 0 being confident and 5 being not at all confident.

Item 7. Select the number between 0 – 5 that the participant reported regarding sleeping soundly with 0 being sleeping soundly and 5 being not sleeping soundly because of their lung condition.

Item 8. Select the number between 0 – 5 that the subjected reported regarding their energy level with 0 being lots of energy and 5 being no energy at all.

Item 9. Select **Save and Reload** in CDART to automatically calculate the participant's CAAT score based on the values entered in Items 1 through 8. If not selected appropriately, the autogenerated field will not populate and will remain a greyed-out box. *NOTE: If one or more items (i.e., Items 1-8) are missing or not entered appropriately, Item 9 will not calculate, and Item 6 in the IEC form will not auto-populate accordingly.*

Select **Save and Close** at the bottom of the page/screen.