

# CLEANED/DERIVED VARIABLE METADATA TOP SHEET

## For Submission to the NSHD Scientific Support Team

<b>Date of submitting documentation</b>	02/10/2019
<b>Categories of variables*:</b> (may be more than one)	Medications
<b>Summary of work undertaken</b>	<p>Cleaning Description/Rationale:</p> <ul style="list-style-type: none"> <li>• Downloaded from XNAT</li> <li>• Dropped all variables containing no data</li> <li>• Labelled values for multiple-choice options according to the questionnaire (see below)</li> <li>• Labelled missing data (missing for unknown reason) as -99</li> </ul>
<b>Source data file(s)</b>	XNAT
<b>Date source file(s) created:</b>	Usually on date of each participant's study visit
<b>Names of source variables</b>	<p>See form below for definitions of these variables:</p> <ul style="list-style-type: none"> <li>• id (participant ID number)</li> <li>• last24hrs</li> <li>• medication1</li> <li>• medication2</li> <li>• medication3</li> <li>• medication4</li> <li>• medication5</li> <li>• medication6</li> <li>• medication7</li> <li>• medication8</li> <li>• medication9</li> <li>• medication10</li> </ul>
<b>Syntax provided</b>	No
<b>Location of syntax file</b>	N/A
<b>Date syntax file created:</b>	N/A
<b>Format of syntax</b>	N/A
<b>Output variables (please list names of new variables created)</b>	Same as source variables
<b>Output data file provided</b>	Yes
<b>Date output file created:</b>	02/10/2019
<b>Location of output file</b>	N:\Test_Data_and_Video_Files\Phase 1\3_Cleaned Data\Insight46_history_medication_cleaned_final_20191002
<b>Format of output file</b>	Stata .dta file
<b>Documentation provided</b>	Cleaning: see "Summary of work done" section above

	Derivation: not applicable
<b>List any papers in which cleaned/derived variables have been used</b>	

\* See list of categories on Swift

± Please delete as appropriate

Copies of the XNAT forms are provided below, with the variable names noted in **red**.

Medication (*free text boxes*)

Medication taken within last 24 hours? ( <i>last24hrs</i> )	<input type="checkbox"/> 0 No	<input type="checkbox"/> 1 Yes	<input type="checkbox"/> 2 Unknown
1	<i>medication1</i>		
2	<i>medication2</i>		
3	<i>medication3</i>		
4	<i>medication4</i>		
5	<i>medication5</i>		
6	<i>medication6</i>		
7	<i>medication7</i>		
8	<i>medication8</i>		
9	<i>medication9</i>		
10	<i>medication10</i>		