

Nurse's full name:

Cardiac Rehabilitation Team:

SECTION A: PLEASE COMPLETE THIS SECTION FOR ALL PATIENTS YOU ASSESS FOR CARDIAC REHABILITATION:		Patient screening ID number				
Patient initials						
Patient's age (years)						
Patient's gender (Male/Female)						
Patient's ethnic origin (White/Mixed/Asian or Asian British/Black or Black British/Chinese or Other ethnic group)						
PHQ-9 score						
Date of PHQ-9 completion (DD/MM/YYYY)						
Has the patient accepted cardiac rehab?	Y/N					
Is the patient eligible for the Cadence Study?	Y/N					
<i>If 'YES' Please complete Sections B and C below</i>						
If the patient is NOT ELIGIBLE for the Cadence Study, please record relevant code(s) for reason(s) for ineligibility or exclusion (Code A-G: see key on Page 1 above)— please note all that apply <i>If the patient is not eligible for Cadence, please go to Section C (leave Section B blank).</i>						
SECTION B: PLEASE COMPLETE THIS SECTION ONLY FOR PATIENTS WHO ARE ELIGIBLE FOR THE CADENCE STUDY						
Have you mentioned the study to the patient and handed them a study information leaflet?	Y/N					
<i>If 'YES', date discussed Cadence Study involvement</i>		DD/MM/YYYY	DD/MM/YYYY	DD/MM/YYYY	DD/MM/YYYY	DD/MM/YYYY
Is the patient interested in finding out more about the study?	Y/N					
<i>If 'YES', please fax referral forms to the study team</i>						
If the patient has declined participation in the Cadence Study, please complete the following information: <ul style="list-style-type: none"> Any reason(s) given by the patient for declining the study? What is the patient's underlying cardiac condition? Are you signposting or referring the patient to another service for management of their depressive symptoms? (Y/N) If so, what type of service(s) are you referring the patient to – e.g. GP, IAPT, or other service (please specify)? 						
<i>If the patient has not been approached with information about the Cadence Study, please record any reason(s).</i>						
SECTION C: NURSE INITIALS AND DATE OF COMPLETION (please complete for ALL patients)						