

Visit: <input checked="" type="checkbox"/> Week 0 <input type="checkbox"/> Week 4 <input type="checkbox"/> Week 8 <input type="checkbox"/> Week 16 <input type="checkbox"/> Week 24 <input type="checkbox"/> Other: _____	REVISIT-C									
	Rater Initials:	Site Number:	Subject Initials:							
	S B O M P C #		Date:	04	0	EC	2	0	2	1
	Subject Number:		Start Time:	0	1	:	3	0		
		End Time:	0	1	:	4	5			

**MacArthur Community Violence Interview
Reconciliation Form**

Instructions: Following the Patient Interview and Informant Interview, use all available information (including collateral information) to select the final MCVI scores for this study participant and record each score in corresponding sections below.

Questions 1a and 1b	Scores	
1a. Has anyone thrown something at the study participant?	<input type="checkbox"/> YES = 1	<input checked="" type="checkbox"/> NO = 0
1b. Has the study participant thrown something at anyone?	<input type="checkbox"/> YES = 1	<input checked="" type="checkbox"/> NO = 0
Questions 2a and 2b	Scores	
2a. Has anyone pushed, grabbed, or shoved study participant?	<input checked="" type="checkbox"/> YES = 1	<input type="checkbox"/> NO = 0
2b. Has the study participant pushed, grabbed, or shoved anyone?	<input checked="" type="checkbox"/> YES = 1	<input type="checkbox"/> NO = 0
Questions 3a and 3b	Scores	
3a. Has anyone slapped study participant?	<input type="checkbox"/> YES = 1	<input checked="" type="checkbox"/> NO = 0
3b. Has the study participant slapped anyone?	<input checked="" type="checkbox"/> YES = 1	<input type="checkbox"/> NO = 0
Questions 4a and 4b	Scores	
4a. Has anyone kicked, bitten, or choked study participant?	<input checked="" type="checkbox"/> YES = 1	<input type="checkbox"/> NO = 0
4b. Has the study participant kicked, bitten, or choked anyone?	<input type="checkbox"/> YES = 1	<input checked="" type="checkbox"/> NO = 0
Questions 5a and 5b	Scores	
5a. Has anyone hit the study participant with a fist or object or beaten them up?	<input checked="" type="checkbox"/> YES = 1	<input type="checkbox"/> NO = 0
5b. Has the study participant hit anyone with a fist or object or beaten up anyone?	<input checked="" type="checkbox"/> YES = 1	<input type="checkbox"/> NO = 0
Questions 6a and 6b	Scores	
6a. Has anyone sexually assaulted the study participant?	<input type="checkbox"/> YES = 1	<input checked="" type="checkbox"/> NO = 0
6b. Has the study participant sexually assaulted anyone?	<input type="checkbox"/> YES = 1	<input checked="" type="checkbox"/> NO = 0
Questions 7a and 7b	Scores	

7 a. Has anyone <u>threatened</u> the study participant with a knife or gun?	<input type="checkbox"/> YES = 1	<input checked="" type="checkbox"/> NO = 0
7 b. Has the study participant <u>threatened</u> anyone with a knife or gun?	<input type="checkbox"/> YES = 1	<input checked="" type="checkbox"/> NO = 0
Questions 8a and 8b	Scores	
8 a. Has anyone used a knife or fired a gun at the study participant?	<input checked="" type="checkbox"/> YES = 1	<input type="checkbox"/> NO = 0
8 b. Has the study participant used a knife or fired a gun at anyone?	<input type="checkbox"/> YES = 1	<input checked="" type="checkbox"/> NO = 0
Question 9b	Scores	
9 b. Has the study participant done anything else that might be considered violent?	<input type="checkbox"/> YES = 1	<input checked="" type="checkbox"/> NO = 0

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<input type="checkbox"/> Week 8	<input type="checkbox"/> Week 16	SB		MPC		04		12/20		P	
<input type="checkbox"/> Week 24	<input type="checkbox"/> Other: _____	Subject Number:		Start Time:		End Time:					
		012345		7:30		7:45					

MacArthur Community Violence Interview Probe Questions

The questions below should only be completed if the rater scored YES to any of the "b" items in the interview portion of this assessment.

Item Number	How many times did the incident occur?	Where did it happen (clarify the location)?	Who was the person involved in the incident?	Was anyone injured?	Was a weapon used? If Yes, where was the weapon located?	Level 1: More Serious Violence Used Weapon: Threatened with a weapon in hand, Sexually assaulted, Any other violence with injury*	Comments
	Insert number of times in the row below	Community = 1 Institution = 2	spouse = 1 girl/boyfriend = 2 child, NS = 3 child, S = 4 other family = 5 other known = 6 stranger = 7 DK = 9	no injury = 0 bruises/cuts = 1 unconscious, internal injuries, broken bones/teeth = 2 stab/gunshot = 3 other, specify = 4 DK = 9	no weapon = 0 in hand = 1 in room = 2 in building = 3 elsewhere = 4 will obtain = 5 NA = 8 DK = 9	YES = 1 NO = 0	Insert comments for each incident, if applicable
e.g. 4b	2	1	5	0	0	1	Insert comments for each incident, if applicable
2b	3	1	7	1	9	0	
3b	3	2	6	0	0	0	
5b	3	2	6	0	0	0	