

COHORT EXAM 22
CODING MANUAL

SAS NAME = A0EXAM22

SAS VARIABLE NAMES : IDTYPE ID FO001-FO013 FO015-FO734

CODING MANUAL
FRAMINGHAM STUDY

RECORDS 1166

NUMERICAL DATA - PART I

VARIABLE INFORMATION

IDTYPE STUDY
 * DELETED, REDUNDANT

PID RANDOM ID NUMBER
 * TO PRESERVE CONFIDENTIALITY

FO001 SEX OF PATIENT - CODED BY NURSE
 1 MALE
 2 FEMALE
 . UNKNOWN (0)

FO002 AGE OF PATIENT
 72 - 101
 . UNKNOWN (0)

FO003 SITE OF EXAM
 * VARIABLE DELETED TO PRESERVE CONFIDENTIALITY

FO004 NURSING HOME LEVEL OF CARE
 * VARIABLE DELETED TO PRESERVE CONFIDENTIALITY

FO005 MARITAL STATUS
 1 SINGLE
 2 MARRIED
 3 WIDOWED
 4 DIVORCED
 5 SEPARATED
 . UNKNOWN (9)

FO006 NURSE EXAMINERS ID NUMBER

* VARIABLE DELETED TO PRESERVE CONFIDENTIALITY

FO007 WEIGHT (TO NEAREST POUND)

WEIGHT IN LBS, IN GROUPS OF 5 LB INTERVALS
WEIGHT<100=WEIGHT GRP 0, WEIGHT>275=WEIGHT GRP 36

FO008 HEIGHT (INCHES, TO NEXT LOWER 1/4 INCH)
HEIGHT IN INCHES
HEIGHT<57"=HEIGHT GRP 57, HEIGHT>76"=HEIGHT GRP 76

FO009 SKINFOLD TRICEPS - LEFT (MILLIMETERS)
* VARIABLE DELETED DUE TO INVALID MEASUREMENT

FO010 SKINFOLD TRICEPS - RIGHT (MILLIMETERS)
* VARIABLE DELETED DUE TO INVALID MEASUREMENT

FO011 SKINFOLD SUBSCAPULAR - LEFT (MILLIMETERS)
* VARIABLE DELETED DUE TO INVALID MEASUREMENT

FO012 SKINFOLD SUBSCAPULAR - RIGHT (MILLIMETERS)
* VARIABLE DELETED DUE TO INVALID MEASUREMENT

FO013 SKINFOLD ABDOMEN (MILLIMETERS)
* VARIABLE DELETED DUE TO INVALID MEASUREMENT

FO014 BI-DELTOID GIRTH
* VARIABLE DELETED DUE TO INVALID MEASUREMENT

FO015 RIGHT ARM GIRTH--UPPER THIRD
(INCHES TO NEXT LOWER 1/4 INCH)
7.5 - 21.00
. UNKNOWN (234)

FO016 WAIST GIRTH (INCHES, TO NEXT LOWER 1/4 INCH)
22.00 - 60.00
. UNKNOWN (233)

FO017 HIP GIRTH (INCHES, TO NEXT LOWER 1/4 INCH)
29.75 - 61.00
. UNKNOWN (232)

FO018 THIGH GIRTH (INCHES, TO NEXT LOWER 1/4 INCH)
14.5 - 32.25
. UNKNOWN (234)

FO019 KNEE HEIGHT (CENTIMETERS)
41.5 - 61.6
. UNKNOWN (257)

FO020 SYSTOLIC NURSE'S BLOOD PRESSURE
82 - 238
. UNKNOWN (22)

FO021 DIASTOLIC NURSE'S BLOOD PRESSURE
 20 - 102
 . UNKNOWN (27)

PROCEDURES SHEET

NOTE: "PROCEDURES" VARIABLES FO023-FO029:
THESE QUESTIONS WERE ADDED DURING THE EXAM CYCLE
THEREFORE THE COUNTS ARE LOW

- FO022 PROCEDURES DONE - ECG
 * VARIABLES DELETED DUE TO INVALID DATA
(SEE NOTE ABOVE REGARDING "PROCEDURES" VARIABLES)
- FO023 PROCEDURES DONE - BLOOD
 * VARIABLES DELETED DUE TO INVALID DATA
(SEE NOTE ABOVE REGARDING "PROCEDURES" VARIABLES)
- FO024 PROCEDURES DONE - BODY COMPOSITION
 * VARIABLES DELETED DUE TO INVALID DATA
(SEE NOTE ABOVE REGARDING "PROCEDURES" VARIABLES)
- FO025 ORTHOSTATIC BLOOD PRESSURES
 * VARIABLES DELETED DUE TO INVALID DATA
(SEE NOTE ABOVE REGARDING "PROCEDURES" VARIABLES)
- FO026 PROCEDURES DONE - COGNITIVE FUNCTION EXAM
 * VARIABLES DELETED DUE TO INVALID DATA
(SEE NOTE ABOVE REGARDING "PROCEDURES" VARIABLES)
- FO027 PROCEDURES DONE - BONE STUDY
 * VARIABLES DELETED DUE TO INVALID DATA
(SEE NOTE ABOVE REGARDING "PROCEDURES" VARIABLES)
- FO028 PROCEDURES DONE - ARTHRITIS STUDY
 * VARIABLES DELETED DUE TO INVALID DATA
(SEE NOTE ABOVE REGARDING "PROCEDURES" VARIABLES)
- FO029 PROCEDURES DONE - ECHOCARDIOGRAM AND ECHO DOPPLER
 * VARIABLES DELETED DUE TO INVALID DATA
(SEE NOTE ABOVE REGARDING "PROCEDURES" VARIABLES)

COGNITIVE FUNCTION - PART 1

VARIABLE INFORMATION

----- -----

- FO030 MMSE - TODAYS DATE (MONTH,DAY,YEAR)
 0 MONTH, DAY AND YEAR INCORRECT
 1 1 OF 3 CORRECT
 2 2 OF 3 CORRECT
 3 3 OF 3 CORRECT
 6 NO TRY
 . UNKNOWN (24)
- FO031 MMSE - SEASON
 0 INCORRECT
 1 CORRECT
 6 NO TRY
 . UNKNOWN (23)
- FO032 MMSE - DAY OF THE WEEK
 0 INCORRECT
 1 CORRECT
 6 NO TRY
 . UNKNOWN (27)
- FO033 MMSE - TOWN, COUNTY, & STATE WE ARE IN
 0 TOWN, COUNTY AND STATE INCORRECT
 1 1 OF 3 CORRECT
 2 2 OF 3 CORRECT
 3 3 OF 3 CORRECT
 6 NO TRY
 . UNKNOWN (24)
- FO034 MMSE - NAME OF THIS PLACE
 0 INCORRECT
 1 CORRECT
 6 NO TRY
 . UNKNOWN (25)
- FO035 MMSE - FLOOR OF THE BUILDING WE ARE ON
 0 INCORRECT
 1 CORRECT

6 NO TRY
. UNKNOWN (28)

FO036 MMSE - REPEAT THE THREE OBJECTS
0 3 OF 3 OBJECTS INCORRECT
1 1 OF 3 CORRECT
2 2 OF 3 CORRECT
3 3 OF 3 CORRECT
6 NO TRY
. UNKNOWN (26)

FO037 MMSE - SPELL 'WORLD' IN REVERSE ORDER
XXXXX - CHARACTER VARIABLE
. UNKNOWN (138)

FO038

MMSE - REMEMBER THE THREE OBJECTS

0 3 OF 3 OBJECTS INCORRECT

1 1 OF 3 CORRECT

2 2 OF 3 CORRECT

3 3 OF 3 CORRECT

6 NO TRY

. UNKNOWN (28)

COGNITIVE FUNCTION - PART II

VARIABLE	INFORMATION
FO039	MMSE - NAMING WATCH 0 INCORRECT 1 CORRECT 6 NO TRY . UNKNOWN (24)
FO040	MMSE - NAMING PENCIL 0 INCORRECT 1 CORRECT 6 NO TRY . UNKNOWN (24)
FO041	MMSE - REPEAT "NO IFS, ANDS, OR BUTS" 0 INCORRECT 1 CORRECT 6 NO TRY . UNKNOWN (29)
FO042	MMSE - READ THE FOLLOWING & DO WHAT IT SAYS 0 INCORRECT 1 CORRECT 6 NO TRY OR LOW VISION . UNKNOWN (29)
FO043	MMSE - WRITE A SENTENCE 0 INCORRECT 1 CORRECT 6 NO TRY OR LOW VISION . UNKNOWN (30)
FO044	MMSE - COPY THIS DRAWING 0 INCORRECT 1 CORRECT 6 NO TRY OR LOW VISION . UNKNOWN (34)
FO045	MMSE - FOLD PAPER AND PUT IN YOUR LAP (3 STEPS)

0 INCORRECT
1 1 OF 3 CORRECT
2 2 OF 3 CORRECT
3 3 OF 3 CORRECT
6 NO TRY OR LOW VISION
. UNKNOWN (52)

FO046 MMSE - EXAMINER'S ASSESSMENT OF SUBJECT'S
MENTAL STATUS

- 1 NORMAL
- 2 POSSIBLE DEMENTIA
- 4 DEMENTIA PRESENT
- 5 ILLITERATE / LOW EDUCATION
- 6 NOT FLUENT IN ENGLISH
- 7 POOR EYESIGHT / BLIND
- 8 POOR HEARING / DEAF
- 11 DEPRESSION PRESENT
- 22 APHASIC
- 33 COMA
- 44 PARKINSONIAN FEATURES /TREMORS
- 55 OTHER
- . UNKNOWN (19)

CES-D SCALE

NOTE FOR VARIABLES FO047-FO066:

QUESTIONS BASED ON FEELINGS OF SUBJECT DURING THE PAST WEEK
(WEEK PRIOR TO THEIR EXAM 22 DATE)

VARIABLE INFORMATION

FO047 I WAS BOTHERED BY THINGS THAT USUALLY DON'T BOTHER ME
 0 RARELY OR NONE OF THE TIME (LESS THAN 1 DAY)
 1 SOME OR A LITTLE OF THE TIME (1-2 DAYS)
 2 OCCASIONALLY OR MODERATE AMOUNT
 OF TIME (3-4 DAYS)
 3 MOST OR ALL OF THE TIME (5-7 DAYS)
 . UNKNOWN (140)

FO048 I DID NOT FEEL LIKE EATING; MY APPETITE WAS POOR
 0 RARELY OR NONE OF THE TIME (LESS THAN 1 DAY)
 1 SOME OR A LITTLE OF THE TIME (1-2 DAYS)
 2 OCCASIONALLY OR MODERATE AMOUNT
 OF TIME (3-4 DAYS)
 3 MOST OR ALL OF THE TIME (5-7 DAYS)
 . UNKNOWN (139)

FO049 I FELT THAT I COULD NOT SHAKE OFF THE BLUES,
EVEN WITH HELP FROM MY FAMILY AND FRIENDS
 0 RARELY OR NONE OF THE TIME (LESS THAN 1 DAY)
 1 SOME OR A LITTLE OF THE TIME (1-2 DAYS)
 2 OCCASIONALLY OR MODERATE AMOUNT
 OF TIME (3-4 DAYS)
 3 MOST OR ALL OF THE TIME (5-7 DAYS)
 . UNKNOWN (139)

FO050 I FELT THAT I WAS JUST AS GOOD AS OTHER PEOPLE
 0 RARELY OR NONE OF THE TIME (LESS THAN 1 DAY)
 1 SOME OR A LITTLE OF THE TIME (1-2 DAYS)
 2 OCCASIONALLY OR MODERATE AMOUNT
 OF TIME (3-4 DAYS)
 3 MOST OR ALL OF THE TIME (5-7 DAYS)
 . UNKNOWN (142)

FO051 I HAD TROUBLE KEEPING MY MIND ON WHAT I WAS DOING

0 RARELY OR NONE OF THE TIME (LESS THAN 1 DAY)
1 SOME OR A LITTLE OF THE TIME (1-2 DAYS)
2 OCCASIONALLY OR MODERATE AMOUNT
OF TIME (3-4 DAYS)
3 MOST OR ALL OF THE TIME (5-7 DAYS)
. UNKNOWN (139)

FO052

I FELT DEPRESSED

0 RARELY OR NONE OF THE TIME (LESS THAN 1 DAY)
1 SOME OR A LITTLE OF THE TIME (1-2 DAYS)
2 OCCASIONALLY OR MODERATE AMOUNT
OF TIME (3-4 DAYS)
3 MOST OR ALL OF THE TIME (5-7 DAYS)
. UNKNOWN (139)

- FO053 I FELT THAT EVERYTHING I DID WAS AN EFFORT
0 RARELY OR NONE OF THE TIME (LESS THAN 1 DAY)
1 SOME OR A LITTLE OF THE TIME (1-2 DAYS)
2 OCCASIONALLY OR MODERATE AMOUNT
OF TIME (3-4 DAYS)
3 MOST OR ALL OF THE TIME (5-7 DAYS)
. UNKNOWN (139)
- FO054 I FELT HOPEFUL ABOUT THE FUTURE
0 RARELY OR NONE OF THE TIME (LESS THAN 1 DAY)
1 SOME OR A LITTLE OF THE TIME (1-2 DAYS)
2 OCCASIONALLY OR MODERATE AMOUNT
OF TIME (3-4 DAYS)
3 MOST OR ALL OF THE TIME (5-7 DAYS)
. UNKNOWN (154)
- FO055 I THOUGHT MY LIFE HAD BEEN A FAILURE
0 RARELY OR NONE OF THE TIME (LESS THAN 1 DAY)
1 SOME OR A LITTLE OF THE TIME (1-2 DAYS)
2 OCCASIONALLY OR MODERATE AMOUNT
OF TIME (3-4 DAYS)
3 MOST OR ALL OF THE TIME (5-7 DAYS)
. UNKNOWN (140)
- FO056 I FELT FEARFUL
0 RARELY OR NONE OF THE TIME (LESS THAN 1 DAY)
1 SOME OR A LITTLE OF THE TIME (1-2 DAYS)
2 OCCASIONALLY OR MODERATE AMOUNT
OF TIME (3-4 DAYS)
3 MOST OR ALL OF THE TIME (5-7 DAYS)
. UNKNOWN (140)
- FO057 MY SLEEP WAS RESTLESS
0 RARELY OR NONE OF THE TIME (LESS THAN 1 DAY)
1 SOME OR A LITTLE OF THE TIME (1-2 DAYS)
2 OCCASIONALLY OR MODERATE AMOUNT
OF TIME (3-4 DAYS)
3 MOST OR ALL OF THE TIME (5-7 DAYS)
. UNKNOWN (139)
- FO058 I WAS HAPPY
0 RARELY OR NONE OF THE TIME (LESS THAN 1 DAY)

- 1 SOME OR A LITTLE OF THE TIME (1-2 DAYS)
- 2 OCCASIONALLY OR MODERATE AMOUNT OF TIME (3-4 DAYS)
- 3 MOST OR ALL OF THE TIME (5-7 DAYS)
- . UNKNOWN (141)

FO059

I TALKED LESS THAN USUAL

- 0 RARELY OR NONE OF THE TIME (LESS THAN 1 DAY)
- 1 SOME OR A LITTLE OF THE TIME (1-2 DAYS)
- 2 OCCASIONALLY OR MODERATE AMOUNT OF TIME (3-4 DAYS)
- 3 MOST OR ALL OF THE TIME (5-7 DAYS)
- . UNKNOWN (139)

- FO060 I FELT LONELY
0 RARELY OR NONE OF THE TIME (LESS THAN 1 DAY)
1 SOME OR A LITTLE OF THE TIME (1-2 DAYS)
2 OCCASIONALLY OR MODERATE AMOUNT
OF TIME (3-4 DAYS)
3 MOST OR ALL OF THE TIME (5-7 DAYS)
. UNKNOWN (141)
- FO061 PEOPLE WERE UNFRIENDLY
0 RARELY OR NONE OF THE TIME (LESS THAN 1 DAY)
1 SOME OR A LITTLE OF THE TIME (1-2 DAYS)
2 OCCASIONALLY OR MODERATE AMOUNT
OF TIME (3-4 DAYS)
3 MOST OR ALL OF THE TIME (5-7 DAYS)
. UNKNOWN (141)
- FO062 I ENJOYED LIFE
0 RARELY OR NONE OF THE TIME (LESS THAN 1 DAY)
1 SOME OR A LITTLE OF THE TIME (1-2 DAYS)
2 OCCASIONALLY OR MODERATE AMOUNT
OF TIME (3-4 DAYS)
3 MOST OR ALL OF THE TIME (5-7 DAYS)
. UNKNOWN (140)
- FO063 I HAD CRYING SPELLS
0 RARELY OR NONE OF THE TIME (LESS THAN 1 DAY)
1 SOME OR A LITTLE OF THE TIME (1-2 DAYS)
2 OCCASIONALLY OR MODERATE AMOUNT
OF TIME (3-4 DAYS)
3 MOST OR ALL OF THE TIME (5-7 DAYS)
. UNKNOWN (140)
- FO064 I FELT SAD
0 RARELY OR NONE OF THE TIME (LESS THAN 1 DAY)
1 SOME OR A LITTLE OF THE TIME (1-2 DAYS)
2 OCCASIONALLY OR MODERATE AMOUNT
OF TIME (3-4 DAYS)
3 MOST OR ALL OF THE TIME (5-7 DAYS)
. UNKNOWN (141)
- FO065 I FELT THAT PEOPLE DISLIKED ME
0 RARELY OR NONE OF THE TIME (LESS THAN 1 DAY)

- 1 SOME OR A LITTLE OF THE TIME (1-2 DAYS)
- 2 OCCASIONALLY OR MODERATE AMOUNT OF TIME (3-4 DAYS)
- 3 MOST OR ALL OF THE TIME (5-7 DAYS)
- . UNKNOWN (140)

FO066

I COULD NOT "GET GOING"

- 0 RARELY OR NONE OF THE TIME (LESS THAN 1 DAY)
- 1 SOME OR A LITTLE OF THE TIME (1-2 DAYS)
- 2 OCCASIONALLY OR MODERATE AMOUNT OF TIME (3-4 DAYS)
- 3 MOST OR ALL OF THE TIME (5-7 DAYS)
- . UNKNOWN (141)

ACTIVITIES OF DAILY LIVING

NOTE FOR VARIABLES FO067-FO077:

ACTIVITIES OF DAILY LIVING - SELF-REPORTED PERFORMANCE

"DO YOU GET ASSISTANCE FROM ANOTHER PERSON TO DO THE FOLLOWING
ACTIVITIES DURING A NORMAL DAY?"

VARIABLE INFORMATION

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- FO067 GETTING DRESSED AND UNDRESSED
 0 NO HELP NEEDED, INDEPENDENT
 1 USES DEVICE, INDEPENDENT
 2 HUMAN ASSISTANCE NEEDED, MINIMALLY DEPENDENT
 3 DEPENDENT
 . UNKNOWN (10)
- FO068 BATHING
 0 NO HELP NEEDED, INDEPENDENT
 1 USES DEVICE, INDEPENDENT
 2 HUMAN ASSISTANCE NEEDED, MINIMALLY DEPENDENT
 3 DEPENDENT
 . UNKNOWN (10)
- FO069 EATING FOOD AND DRINKING LIQUIDS
 0 NO HELP NEEDED, INDEPENDENT
 1 USES DEVICE, INDEPENDENT
 2 HUMAN ASSISTANCE NEEDED, MINIMALLY DEPENDENT
 3 DEPENDENT
 . UNKNOWN (11)
- FO070 GETTING IN AND OUT OF A CHAIR
 0 NO HELP NEEDED, INDEPENDENT
 1 USES DEVICE, INDEPENDENT
 2 HUMAN ASSISTANCE NEEDED, MINIMALLY DEPENDENT
 3 DEPENDENT
 . UNKNOWN (10)
- FO071 USING THE TOILET
 0 NO HELP NEEDED, INDEPENDENT
 1 USES DEVICE, INDEPENDENT
 2 HUMAN ASSISTANCE NEEDED, MINIMALLY DEPENDENT

3 DEPENDENT
. UNKNOWN (11)

FO072

WALKING ON LEVEL SURFACE ABOUT 50 YARDS

0 NO HELP NEEDED, INDEPENDENT
1 USES DEVICE, INDEPENDENT
2 HUMAN ASSISTANCE NEEDED, MINIMALLY DEPENDENT
3 DEPENDENT
. UNKNOWN (14)

- FO073 WALKING UP AND DOWN ONE FLIGHT OF STAIRS (5 STEPS)
0 NO HELP NEEDED, INDEPENDENT
1 USES DEVICE, INDEPENDENT
2 HUMAN ASSISTANCE NEEDED, MINIMALLY DEPENDENT
3 DEPENDENT
. UNKNOWN (15)
- FO074 CARRYING A BUNDLE (CARRY A 10 LB. BUNDLE 10 FT.)
0 NO HELP NEEDED, INDEPENDENT
1 USES DEVICE, INDEPENDENT
2 HUMAN ASSISTANCE NEEDED, MINIMALLY DEPENDENT
3 DEPENDENT
. UNKNOWN (17)
- FO075 USING A TELEPHONE
0 NO HELP NEEDED, INDEPENDENT
1 USES DEVICE, INDEPENDENT
2 HUMAN ASSISTANCE NEEDED, MINIMALLY DEPENDENT
3 DEPENDENT
. UNKNOWN (12)
- FO076 CONTINENCE (BOWEL AND BLADDER CONTINENCE)
0 NO HELP NEEDED, INDEPENDENT
1 USES DEVICE, INDEPENDENT
2 HUMAN ASSISTANCE NEEDED, MINIMALLY DEPENDENT
3 DEPENDENT
4 USES COMMERCIAL PRODUCT TO MAINTAIN
CONTINENCE, E.G. DEPENDS
. UNKNOWN (13)
- FO077 TAKES OWN MEDICATIONS
0 NO HELP NEEDED, INDEPENDENT
1 USES DEVICE, INDEPENDENT
2 HUMAN ASSISTANCE NEEDED, MINIMALLY DEPENDENT
3 DEPENDENT
8 TAKES NO MEDICATIONS
. UNKNOWN (11)

FUNCTIONAL PERFORMANCE TEST

VARIABLE INFORMATION

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- FO078 DRESSING
 0 NO HELP NEEDED, INDEPENDENT
 1 USES DEVICE, INDEPENDENT
 2 HUMAN ASSISTANCE NEEDED, MINIMALLY DEPENDENT
 3 DEPENDENT
 . UNKNOWN (31)
- FO079 TRANSFERRING
 0 NO HELP NEEDED, INDEPENDENT
 1 USES DEVICE, INDEPENDENT
 2 HUMAN ASSISTANCE NEEDED, MINIMALLY DEPENDENT
 3 DEPENDENT
 . UNKNOWN (31)
- FO080 WALKING (50 FEET IN CORRIDOR)
 0 NO HELP NEEDED, INDEPENDENT
 1 USES DEVICE, INDEPENDENT
 2 HUMAN ASSISTANCE NEEDED, MINIMALLY DEPENDENT
 3 DEPENDENT
 . UNKNOWN (32)
- FO081 CARRYING A 10 LB. BUNDLE
 0 NO HELP NEEDED, INDEPENDENT
 1 USES DEVICE, INDEPENDENT
 2 HUMAN ASSISTANCE NEEDED, MINIMALLY DEPENDENT
 3 DEPENDENT
 . UNKNOWN (34)
- FO082 POURING LIQUID FROM A PITCHER INTO A GLASS
 0 NO HELP NEEDED, INDEPENDENT
 1 USES DEVICE, INDEPENDENT
 2 HUMAN ASSISTANCE NEEDED, MINIMALLY DEPENDENT
 3 DEPENDENT

. UNKNOWN (39)

SCREEN 1: MEDICAL HISTORY - HOSPITALIZATIONS

VARIABLE INFORMATION

FO083 SEX OF PATIENT (CODED BY PHYSICIAN)
 * VARIABLE DELETED, REDUDNANT WITH FO001

FO084 1ST EXAMINER ID NUMBER
 * VARIABLE DELETED TO PRESERVE CONFIDENTIALITY

FO085 HOSPITALIZATION OR E.R. VISIT IN INTERIM
 * VARIABLE DELETED DUE TO MEDICAL REVIEW

FO086 ILLNESS WITH VISIT TO DOCTOR
 * VARIABLE DELETED DUE TO MEDICAL REVIEW

FO087 CHECK UP IN INTERIM BY DOCTOR
 * VARIABLE DELETED DUE TO MEDICAL REVIEW

FO088 DATE OF EXAM
 * VARIABLE DELETED TO PRESERVE CONFIDENTIALITY

FO089 HEART STUDY EXAMINER TYPE
 * VARIABLE DELETED TO PRESERVE CONFIDENTIALITY

FO090 EXAM NUMBER
 * VARIABLE DELETED TO REDUNDANCY

SCREEN 2: MEDICAL HISTORY - CARDIOVASCULAR MEDICATIONS

VARIABLE INFORMATION

FO091 NUMBER OF ASPIRINS PER TIME INTERVAL
 0 - 35
 . UNKNOWN (14)

FO092 TIME INTERVAL FOR ASPIRIN TAKEN
 0 NEVER
 1 DAY
 2 WEEK
 3 MONTH
 4 YEAR
 . UNKNOWN (18)

FO093 CURRENTLY RECEIVING MEDICATION FOR THE
TREATMENT OF HYPERTENSION?
 0 NO
 1 YES
 . UNKNOWN (34)

FO094 (TAKING) ANY CARDIOVASCULAR MEDICATIONS BELOW?
 0 NO
 1 YES
 . UNKNOWN (0)

FO095 MEDICATION USE: CARDIAC GLYCOSIDES
 0 NO
 1 YES, NOW
 2 YES, NOT NOW
 3 MAYBE
 . UNKNOWN (2)

FO096 MEDICATION USE: NITROGLYCERINE
 0 NO
 1 YES, NOW
 2 YES, NOT NOW
 3 MAYBE

. UNKNOWN (1)

FO097 MEDICATION USE: LONGER ACTING NITRATES
(ISORDIL, CARDILATE, ETC.)

0 NO

1 YES, NOW

2 YES, NOT NOW

3 MAYBE

. UNKNOWN (1)

- FO098 MEDICATION USE: CALCIUM CHANNEL BLOCKERS
(NIFEDIPINE, VERAPAMIL, DILTIAZEM)
0 NO
1 YES, NOW
2 YES, NOT NOW
3 MAYBE
. UNKNOWN (4)
- FO099 MEDICATION USE: BETA BLOCKERS
0 NO
1 YES, NOW
2 YES, NOT NOW
3 MAYBE
. UNKNOWN (3)
- FO100 MEDICATION USE: BETA BLOCKERS GROUP
0 NOT TAKING BETA BLOCKERS
1 PROPRANOLOL
2 TIMOLOL
3 NADOLOL
4 ATENOLOL
5 METOPROLOL
6 PINDOLOL
7 ACEBUTOLOL
8 LABETALOL
9 OTHER
. UNKNOWN (4)
- FO101 MEDICATION USE: BETA BLOCKERS DOSE (MG/DAY)
0 NOT TAKING BETA BLOCKERS
4 - 400
. UNKNOWN (31)
- FO102 MEDICATION USE: LOOP DIURETICS
(LASIX, ETC.)
0 NO
1 YES, NOW
2 YES, NOT NOW
3 MAYBE
. UNKNOWN (3)
- FO103 MEDICATION USE: THIAZIDE/K-SPARING DIURETICS

(DYAZIDE, MAXIDE, ETC.)

0 NO

1 YES, NOW

2 YES, NOT NOW

3 MAYBE

. UNKNOWN (4)

- FO104 MEDICATION USE: THIAZIDE DIURETICS
0 NO
1 YES, NOW
2 YES, NOT NOW
3 MAYBE
. UNKNOWN (3)
- FO105 MEDICATION USE: K-SPARING DIURETICS
(ALDACTONE, TRIAMTERENE, AMILORIDE)
0 NO
1 YES, NOW
2 YES, NOT NOW
3 MAYBE
. UNKNOWN (4)
- FO106 MEDICATION USE: POTASSIUM SUPPLEMENTS
0 NO
1 YES, NOW
2 YES, NOT NOW
3 MAYBE
. UNKNOWN (1)
- FO107 MEDICATION USE: RESERPINE DERIVATIVES
0 NO
1 YES, NOW
2 YES, NOT NOW
3 MAYBE
. UNKNOWN (3)
- FO108 MEDICATION USE: METHYLDOPA
(ALDOMET)
0 NO
1 YES, NOW
2 YES, NOT NOW
3 MAYBE
. UNKNOWN (3)
- FO109 MEDICATION USE: ALPHA-1 AGONIST
(CLONIDINE, WYTENSIN, GUANABENZ)
0 NO
1 YES, NOW
2 YES, NOT NOW

3 MAYBE
. UNKNOWN (3)

FO110 MEDICATION USE: ALPHA-2 BLOCKERS
(PRAZOSIN, TERAZOSIN)

0 NO
1 YES, NOW
2 YES, NOT NOW
3 MAYBE
. UNKNOWN (3)

- FO111 MEDICATION USE: RENIN-ANGIOTENSIN BLOCKING DRUGS
(CAPTOPRIL, ENALAPRIL, LISINOPRIL)
0 NO
1 YES, NOW
2 YES, NOT NOW
3 MAYBE
. UNKNOWN (3)
- FO112 MEDICATION USE: PERIPHERAL VASODILATORS
(HYDRALAZINE, MINOXIDIL, ETC.)
0 NO
1 YES, NOW
2 YES, NOT NOW
3 MAYBE
. UNKNOWN (3)
- FO113 MEDICATION USE: OTHER ANTI-HYPERTENSIVES
0 NO
1 YES, NOW
2 YES, NOT NOW
3 MAYBE
. UNKNOWN (2)
- FO114 MEDICATION USE: ANTIARRHYTHMICS
(QUINIDINE, PROCAINAMIDE, NORPACE, DISOPYRAMIDE, ETC.)
0 NO
1 YES, NOW
2 YES, NOT NOW
3 MAYBE
. UNKNOWN (1)
- FO115 MEDICATION USE: ANTIPLATELET
(ANTURANE, PERSANTINE, ETC.)
0 NO
1 YES, NOW
2 YES, NOT NOW
3 MAYBE
. UNKNOWN (1)
- FO116 MEDICATION USE: ANTICOAGULANTS
(COUMADIN, WARFARIN, ETC.)
0 NO

- 1 YES, NOW
- 2 YES, NOT NOW
- 3 MAYBE
- . UNKNOWN (1)

FO117

MEDICATION USE: OTHER CARDIAC MEDICATION

0 NO

1 YES, NOW

2 YES, NOT NOW

3 MAYBE

. UNKNOWN (1)

SCREEN 3: MEDICAL HISTORY - OTHER MEDICATIONS

VARIABLE INFORMATION

FO118 (TAKING) ANY OF THE "NON-CARDIOVASCULAR MEDICATIONS"
BELOW?

- 0 NO
- 1 YES
- . UNKNOWN (0)

FO119 MEDICATION USE: ANTI CHOLESTEROL DRUGS
(RESINS -- E.G. QUESTRAN, COLESTID)

- 0 NO
- 1 YES, NOW
- 2 YES, NOT NOW
- 3 MAYBE
- . UNKNOWN (0)

FO120 MEDICATION USE: ANTI CHOLESTEROL DRUGS
(NIACIN OR NICOTINIC ACID)

- 0 NO
- 1 YES, NOW
- 2 YES, NOT NOW
- 3 MAYBE
- . UNKNOWN (5)

FO121 MEDICATION USE: ANTI CHOLESTEROL DRUGS
(FIBRATES -- E.G. GEMFIBROZIL)

- 0 NO
- 1 YES, NOW
- 2 YES, NOT NOW
- 3 MAYBE
- . UNKNOWN (0)

FO122 MEDICATION USE: ANTI CHOLESTEROL DRUGS
(STATINS -- E.G. LOVASTATIN, PRAVASTATIN)

- 0 NO
- 1 YES, NOW
- 2 YES, NOT NOW
- 3 MAYBE
- . UNKNOWN (0)

FO123 MEDICATION USE: ANTI CHOLESTEROL DRUGS
(OTHER)

- 0 NO
- 1 YES, NOW
- 2 YES, NOT NOW
- 3 MAYBE
- . UNKNOWN (3)

FO124 MEDICATION USE: ANTIGOUT--URIC ACID LOWERING
(ALLOPURINOL, PROBENECID, ETC.)

- 0 NO
- 1 YES, NOW
- 2 YES, NOT NOW
- 3 MAYBE
- . UNKNOWN (1)

- FO125 MEDICATION USE: ANTIGOUT (COLCHICINE)
0 NO
1 YES, NOW
2 YES, NOT NOW
3 MAYBE
. UNKNOWN (0)
- FO126 MEDICATION USE: THYROID EXTRACT
(DESSICATED THYROID)
0 NO
1 YES, NOW
2 YES, NOT NOW
3 MAYBE
. UNKNOWN (0)
- FO127 MEDICATION USE: THYROXINE
(SYNTHROID, ETC.)
0 NO
1 YES, NOW
2 YES, NOT NOW
3 MAYBE
. UNKNOWN (9)
- FO128 MEDICATION USE: INSULIN
0 NO
1 YES, NOW
2 YES, NOT NOW
3 MAYBE
. UNKNOWN (0)
- FO129 MEDICATION USE: TOTAL UNITS OF INSULIN PER DAY
0 NONE
6 - 90
. UNKNOWN (0)
- FO130 MEDICATION USE: ORAL HYPOGLYCEMICS
0 NO
1 YES, NOW
2 YES, NOT NOW
3 MAYBE
. UNKNOWN (0)

FO131 MEDICATION USE: ORAL/PATCH ESTROGEN
(FOR WOMEN USERS ALSO SEE ESTROGEN SECTION)

- 0 NO
- 1 YES, NOW
- 2 YES, NOT NOW
- 3 MAYBE
- . UNKNOWN (2)

FO132 MEDICATION USE: ORAL GLUCOCORTICOIDS
(PREDNISONE, CORTISONE, ETC.)

- 0 NO
- 1 YES, NOW
- 2 YES, NOT NOW
- 3 MAYBE
- . UNKNOWN (0)

FO133 MEDICATION USE: NON-STEROIDAL ANTI-INFLAMMATORY AGENTS
(MOTRIN, IBUPROFEN, NAPROSYN, INDOCIN, CLINORIL)

- 0 NO
- 1 YES, NOW
- 2 YES, NOT NOW
- 3 MAYBE
- . UNKNOWN (0)

FO134 MEDICATION USE: IF TAKING NON-STEROIDAL
ANTI-INFLAMMATORY AGENTS,
DO YOU TAKE THEM EVERY DAY?

- 0 NO
- 1 YES, NOW
- 2 YES, NOT NOW
- 3 MAYBE
- . UNKNOWN (32)

FO135 MEDICATION USE: ANALGESIC-NARCOTICS
(DEMEROL, CODEINE, DILAUDID, ETC.)

- 0 NO
- 1 YES, NOW
- 2 YES, NOT NOW
- 3 MAYBE
- . UNKNOWN (1)

FO136 MEDICATION USE: ANALGESIC-NON-NARCOTICS
(ACETAMINOPHEN, ETC.)

- 0 NO
- 1 YES, NOW
- 2 YES, NOT NOW
- 3 MAYBE
- . UNKNOWN (1)

FO137 MEDICATION USE: BRONCHODILATORS, AEROSOLS, ETC

- 0 NO
- 1 YES, NOW
- 2 YES, NOT NOW
- 3 MAYBE
- . UNKNOWN (0)

FO138 MEDICATION USE: ANTIHISTAMINES

- 0 NO

- 1 YES, NOW
- 2 YES, NOT NOW
- 3 MAYBE
- . UNKNOWN (0)

- FO139 MEDICATION USE: ANTIULCER
(TAGAMET, RANITIDINE, PROBANTHINE, H ION INHIBITORS)
0 NO
1 YES, NOW
2 YES, NOT NOW
3 MAYBE
. UNKNOWN (0)
- FO140 MEDICATION USE: ANTI-ANXIETY, SEDATIVE/HYPNOTICS ETC.
(LIBRIUM, VALIUM, ETC.)
0 NO
1 YES, NOW
2 YES, NOT NOW
3 MAYBE
. UNKNOWN (0)
- FO141 MEDICATION USE: SLEEPING PILLS
0 NO
1 YES, NOW
2 YES, NOT NOW
3 MAYBE
. UNKNOWN (0)
- FO142 MEDICATION USE: ANTI-DEPRESSANTS
0 NO
1 YES, NOW
2 YES, NOT NOW
3 MAYBE
. UNKNOWN (0)
- FO143 MEDICATION USE: EYEDROPS
0 NO
1 YES, NOW
2 YES, NOT NOW
3 MAYBE
. UNKNOWN (0)
- FO144 MEDICATION USE: ANTIBIOTICS
0 NO
1 YES, NOW
2 YES, NOT NOW
3 MAYBE

. UNKNOWN (0)

FO145 MEDICATION USE: ANTI-PARKINSON DRUGS
(SINEMET, L-DOPA, SYMMETREL, COGENTIN, ETC.)

- 0 NO
- 1 YES, NOW
- 2 YES, NOT NOW
- 3 MAYBE
- . UNKNOWN (0)

FO146 MEDICATION USE: ANTICONVULSANTS
(DILANTIN, PHENOBARB, TEGRETOL, MYSOLINE, ETC.)

- 0 NO
- 1 YES, NOW
- 2 YES, NOT NOW
- 3 MAYBE
- . UNKNOWN (0)

FO147 MEDICATION USE: NON-CARDIOVASCULAR MEDICATION - OTHER

- 0 NO
- 1 YES, NOW
- 2 YES, NOT NOW
- 3 MAYBE
- . UNKNOWN (3)

SCREEN 4: MEDICAL HISTORY - MALE/FEMALE GENITOURINARY DISEASE

VARIABLE INFORMATION

FO148 AGE AT HYSTERECTOMY (YEARS) - FEMALE
 0 NO HYSTERECTOMY
 20 - 87
 88 MALE
 . UNKNOWN (19)

FO149 OVARY OR OVARIES REMOVED - FEMALE
 0 NO
 1 YES, ONE
 2 YES, TWO
 8 MALE
 . UNKNOWN (30)

FO150 NUMBER OF LIVE BIRTHS - FEMALE
 0 - 9
 88 MALE
 . UNKNOWN (40)

FO151 CONJUGATED ESTROGEN USE IN INTERIM (E.G. PREMARIN)
 0 NO
 1 YES, NOW
 2 YES, NOT NOW
 8 MALE
 . UNKNOWN (2)

FO152 ORAL DOSE/DAY OF PREMARIN OR CONJ. ESTROGEN - FEMALE
 0 NO
 1 0.325 MG
 2 0.625 MG
 3 1.25 MG
 4 2.5 MG
 8 MALE
 . UNKNOWN (4)

FO153 PATCH DOSE/DAY OF ESTROGEN - FEMALE
 0 NO
 1 0.5 MG

8 MALE
. UNKNOWN (3)

FO154 NUMBER OF DAYS/MONTH TAKING ESTROGENS - FEMALE

0 NO
4 - 30
88 MALE
. UNKNOWN (8)

FO155 ESTROGEN CREAM USE IN INTERIM - FEMALE
0 NO
1 YES, NOW--(NOTE: THERE IS ONE MALE
IN THIS GROUP)
2 YES, NOT NOW
8 MALE
. UNKNOWN (2)

FO156 PROGESTERONE USE IN INTERIM - FEMALE
0 NO
1 YES, NOW
2 YES, NOT NOW
8 MALE
. UNKNOWN (1)

FO157 URINARY DISEASE IN INTERIM - MALE AND FEMALE
0 NO
1 YES
2 MAYBE
. UNKNOWN (35)

FO158 KIDNEY DISEASE IN INTERIM - MALE AND FEMALE
0 NO
1 YES
2 MAYBE
. UNKNOWN (7)

FO159 KIDNEY STONES IN INTERIM - MALE AND FEMALE
0 NO
1 YES
2 MAYBE
. UNKNOWN (8)

FO160 PROSTATE TROUBLE IN INTERIM - MALE
0 NO
1 YES
2 MAYBE
8 FEMALE
. UNKNOWN (4)

FO161 PROSTATE SURGERY IN INTERIM - MALE
0 NO

1 YES
2 MAYBE
8 FEMALE
. UNKNOWN (2)

SCREEN 5: MEDICAL HISTORY - BEVERAGES AND THYROID

NOTE FOR VARIABLES FO163-FO179:
DAILY INTAKE OF BEVERAGES OVER PAST YEAR

VARIABLE INFORMATION

FO162 DIAGNOSED WITH THYROID CONDITION IN INTERIM
 0 NO
 1 YES
 . UNKNOWN (3)

FO163 COFFEE/CAFFEINATED - # CUPS PER DAY
 0 - 20
 . UNKNOWN (1)

FO164 COFFEE/CAFFEINATED - PREDOMINANT METHOD
 0 NON DRINKER
 1 FILTER
 2 PERC
 3 BOIL
 4 INSTANT
 8 OTHER
 . UNKNOWN (16)

FO165 COFFEE/DECAFFEINATED - # CUPS PER DAY
 0 - 30
 . UNKNOWN (6)

FO166 COFFEE/DECAFFEINATED - PREDOMINANT METHOD
 0 NON DRINKER
 1 FILTER
 2 PERC
 3 BOIL
 4 INSTANT
 8 OTHER
 . UNKNOWN (11)

FO167 TEA/CAFFEINATED - # CUPS PER DAY
 0 - 7

. UNKNOWN (4)

FO168 TEA/DECAFFEINATED - # CUPS PER DAY
0 - 10
. UNKNOWN (6)

FO169 COLA/CAFFEINATED - # 12 OZ. CUPS PER DAY
0 - 5
. UNKNOWN (8)

FO170 COLA/DECAFFEINATED - # 12 OZ. CUPS PER DAY
0 - 6
. UNKNOWN (10)

FO171 BEER-# PER WEEK - BOTTLE, CAN, GLASS (12 OZ.)
0 - 56
0 NEVER
1 ONE OR LESS
. UNKNOWN (2)

FO172 BEER-# DAYS DRINK PER WEEK
0 - 7
. UNKNOWN (13)

FO173 BEER-LIMIT AT ONE PERIOD OF TIME
0 - 12
. UNKNOWN (14)

FO174 WINE-# PER WEEK - GLASS (4 OZ.)
0 - 28
0 NEVER
1 ONE OR LESS
. UNKNOWN (1)

FO175 WINE-# DAYS DRINK PER WEEK
0 - 7
. UNKNOWN (10)

FO176 WINE-LIMIT AT ONE PERIOD OF TIME
0 - 4
. UNKNOWN (13)

FO177 LIQUOR/COCKTAILS-# PER WEEK
0 - 42
0 NEVER
1 ONE OR LESS
. UNKNOWN (1)

FO178 LIQUOR/COCKTAILS-# DAYS DRINK PER WEEK
0 - 7
. UNKNOWN (12)

FO179

LIQUOR/COCKTAILS-LIMIT AT ONE PERIOD OF TIME

0 - 6

. UNKNOWN (14)

SCREEN 6: MEDICAL HISTORY - SMOKING

VARIABLE INFORMATION
----- -----

FO180 SMOKED CIGARETTES REGULARLY IN LAST YEAR?
 0 NO
 1 YES
 . UNKNOWN (2)

FO181 CIGARETTES - HOW MANY CIGARETTES DO/DID YOU SMOKE
 PER DAY?
 0 - 50
 0 NONSMOKER (FO180=0)
 1 ONE OR LESS
 . UNKNOWN (2)

FO182 CIGARETTES - DO YOU INHALE?
 0 NONSMOKER (FO180=0)
 1 YES
 . UNKNOWN (4)

FO183 CIGARETTE BRAND
 XXXXXXXX FIRST EIGHT LETTERS OF CIGARETTE BRAND
 CHARACTER VARIABLE
 00000000 NONSMOKER (FO180=0)
 . UNKNOWN (6)

FO184 CIGARETTE-STRENGTH
 0 NONSMOKER (FO180=0)
 1 NORMAL
 2 LITE
 3 ULTRALITE
 . UNKNOWN (9)

FO185 CIGARETTE-TYPE
 0 NONSMOKER (FO180=0)
 1 REGULAR
 2 MENTHOL
 . UNKNOWN (3)

FO186 CIGARETTE-FILTER
0 NONSMOKER (FO180=0)
1 NONFILTER
2 FILTER
. UNKNOWN (3)

FO187 CIGARETTE-LENGTH
0 NONSMOKER (FO180=0)
1 REGULAR
2 KING
3 100MM
4 120MM
. UNKNOWN (3)

FO188 HOURS SINCE LAST CIGARETTE
1 - 24
1 ONE HOUR OR LESS
24 24 HOURS OR MORE
88 CURRENTLY NON-SMOKER
. UNKNOWN (2)

FO189 DO YOU NOW SMOKE CIGARS
0 NO
1 YES, INHALE
2 YES, NO INHALE
. UNKNOWN (23)

FO190 DO YOU NOW SMOKE PIPES
0 NO
1 YES, INHALE
2 YES, NO INHALE
. UNKNOWN (23)

SCREEN 7: MEDICAL HISTORY - RESPIRATORY

VARIABLE	INFORMATION
FO191	CHRONIC COUGH IN INTERIM (AT LEAST 3 MONTHS/YEAR) 0 NO 1 YES, PRODUCTIVE 2 YES, NON-PRODUCTIVE . UNKNOWN (1)
FO192	WHEEZING OR ASTHMA 0 NO 1 YES . UNKNOWN (3)
FO193	WHEEZING OR ASTHMA - TYPE 0 NONE 1 NEW IN INTERIM 2 OLD . UNKNOWN (12)
FO194	DYSPNEA ON EXERTION 0 NO 1 CLIMBING STAIRS OR VIGOROUS EXERTION 2 RAPID WALKING OR MODERATE EXERTION 3 ANY SLIGHT EXERTION . UNKNOWN (30)
FO195	DYSPNEA HAS INCREASED OVER THE PAST TWO YEARS 0 NO 1 YES . UNKNOWN (25)
FO196	ORTHOPNEA 0 NO 1 YES, NEW IN INTERIM 2 YES, OLD COMPLAINT . UNKNOWN (8)
FO197	PAROXYSMAL NOCTURNAL DYSPNEA 0 NO

1 YES, NEW IN INTERIM
2 YES, OLD COMPLAINT
. UNKNOWN (7)

FO198 ANKLE EDEMA BILATERALLY
0 NO
1 YES, NEW IN INTERIM
2 YES, OLD COMPLAINT
. UNKNOWN (10)

FO199 1ST EXAMINER BELIEVES CHF

* VARIABLE DELETED DUE TO MEDICAL REVIEW

FO200 1ST EXAMINER BELIEVES CHRONIC BRONCHITIS
(COUGH THAT PRODUCES SPUTUM AT LEAST 3 MONTHS
IN THE PAST 12 MONTHS)

0 NO

1 YES

2 MAYBE

. UNKNOWN (0)

SCREEN 8: MEDICAL HISTORY - HEART PART I

VARIABLE INFORMATION

FO201 ANY CHEST DISCOMFORT SINCE LAST EXAM?
 0 NO
 1 YES
 2 MAYBE
 . UNKNOWN (12)

FO202 CHEST DISCOMFORT WITH EXERTION OR EXCITEMENT
 0 NO OR NO CHEST DISCOMFORT SINCE LAST EXAM
 1 YES
 2 MAYBE
 . UNKNOWN (16)

FO203 CHEST DISCOMFORT WHEN QUIET OR RESTING
 0 NO OR NO CHEST DISCOMFORT SINCE LAST EXAM
 1 YES
 2 MAYBE
 . UNKNOWN (13)

FO204 DATE OF ONSET (MONTH) OF CHEST DISCOMFORT
 * VARIABLE DELETED DUE TO CONFIDENTIALITY

FO205 DATE OF ONSET (YEAR) OF CHEST DISCOMFORT
 * VARIABLE DELETED DUE TO CONFIDENTIALITY

FO206 USUAL DURATION OF CHEST DISCOMFORT - MINUTES
 0 - 900
 0 NO CHEST DISCOMFORT SINCE LAST EXAM
 900 15 HOURS OR MORE
 . UNKNOWN (37)

FO207 LONGEST DURATION OF CHEST DISCOMFORT - MINUTES
 0 - 900
 0 NO CHEST DISCOMFORT SINCE LAST EXAM
 1 1 MINUTE OR LESS
 900 15 HOURS OR MORE
 . UNKNOWN (35)

FO208

LOCATION OF CHEST DISCOMFORT

0 NO CHEST DISCOMFORT SINCE LAST EXAM

1 CENTRAL STERNUM AND UPPER CHEST

2 LEFT UPPER QUADRANT

3 LEFT LOWER RIBCAGE

4 RIGHT CHEST

5 EPIGASTRIC

6 LOWER STERNUM

7 LEFT ANTERIOR CHEST

8 OTHER

. UNKNOWN (13)

- FO209 RADIATION OF CHEST DISCOMFORT
0 NO RADIATION OR NO CHEST DISCOMFORT
SINCE LAST EXAM
1 LEFT SHOULDER OR LEFT ARM
2 NECK
3 RIGHT SHOULDER OR ARM
4 BACK
5 ABDOMEN
6 OTHER
7 COMBINATION
. UNKNOWN (18)
- FO210 FREQUENCY OF CHEST DISCOMFORT (# IN PAST MONTH)
0 - 40
0 NONE OR NO CHEST DISCOMFORT SINCE LAST EXAM
. UNKNOWN (18)
- FO211 FREQUENCY OF CHEST DISCOMFORT (# IN PAST YEAR)
0 - 366
0 NONE OR NO CHEST DISCOMFORT SINCE LAST EXAM
. UNKNOWN (39)
- FO212 TYPE OF CHEST DISCOMFORT
0 NO CHEST DISCOMFORT SINCE LAST EXAM
1 PRESSURE, HEAVY, VISE
2 SHARP
3 DULL
4 OTHER
. UNKNOWN (19)
- FO213 CHEST DISCOMFORT RELIEF WITH NITRO IN < 15 MIN
0 NO OR NO CHEST DISCOMFORT SINCE LAST EXAM
1 YES
8 NOT TRIED
. UNKNOWN (35)
- FO214 CHEST DISCOMFORT RELIEF WITH REST IN < 15 MIN
0 NO OR NO CHEST DISCOMFORT SINCE LAST EXAM
1 YES
8 NOT TRIED
. UNKNOWN (26)

- FO215 CHEST DISCOMFORT RELIEF SPONTANEOUSLY IN < 15 MIN
0 NO OR NO CHEST DISCOMFORT SINCE LAST EXAM
1 YES
8 NOT TRIED
. UNKNOWN (23)
- FO216 CHEST DISCOMFORT RELIEF BY OTHER CAUSE IN < 15 MIN
0 NO OR NO CHEST DISCOMFORT SINCE LAST EXAM
1 YES
8 NOT TRIED
. UNKNOWN (24)
- FO217 1ST EXAMINER BELIEVES ANGINA PECTORIS IN INTERIM

* VARIABLE DELETED DUE TO MEDICAL REVIEW

FO218 1ST EXAMINER BELIEVES CORONARY INSUFF. IN INTERIM

* VARIABLE DELETED DUE TO MEDICAL REVIEW

FO219 1ST EXAMINER BELIEVES MYOCARDIAL INFARCT IN INTERIM

* VARIABLE DELETED DUE TO MEDICAL REVIEW

SCREEN 9: MEDICAL HISTORY - HEART PART II

VARIABLE	INFORMATION
FO220	HEART SURGERY PROCEDURE-AORTIC * VARIABLE DELETED TO PRESERVE CONFIDENTIALITY
FO221	HEART SURGERY PROCEDURE-MITRAL * VARIABLE DELETED TO PRESERVE CONFIDENTIALITY
FO222	HEART SURGERY PROCEDURE-TRICUSPID * VARIABLE DELETED TO PRESERVE CONFIDENTIALITY
FO223	HEART SURGERY PROCEDURE-PULMONIC * VARIABLE DELETED TO PRESERVE CONFIDENTIALITY
FO224	HEART SURGERY-AORTIC PROCEDURE-YEAR DONE * VARIABLE DELETED TO PRESERVE CONFIDENTIALITY
FO225	HEART SURGERY-MITRAL PROCEDURE-YEAR DONE * VARIABLE DELETED TO PRESERVE CONFIDENTIALITY
FO226	HEART SURGERY-TRICUSPID PROCEDURE-YEAR DONE * VARIABLE DELETED TO PRESERVE CONFIDENTIALITY

FO227

HEART SURGERY-PULMONIC PROCEDURE-YEAR DONE
* VARIABLE DELETED TO PRESERVE CONFIDENTIALITY

SCREEN 10: MEDICAL HISTORY - CHD AND COMPLICATIONS - HEART PART III

VARIABLE INFORMATION

FO228 HISTORY OF CORONARY ARTERIOGRAM

0 NO
1 YES
2 MAYBE
. UNKNOWN (9)

FO229 CORONARY ARTERIOGRAM - YEAR FIRST DONE
* VARIABLE DELETED TO PRESERVE CONFIDENTIALITY

FO230 HISTORY OF CORONARY ARTERY ANGIOPLASTY

0 NO
1 YES
2 MAYBE
. UNKNOWN (7)

FO231 CORONARY ARTERY ANGIOPLASTY-YEAR FIRST DONE
* VARIABLE DELETED TO PRESERVE CONFIDENTIALITY

FO232 CORONARY ARTERY ANGIOPLASTY-TYPE OF PROCEDURE

0 NO
1 YES
2 MAYBE
. UNKNOWN (9)

FO233 HISTORY OF CORONARY BYPASS SURGERY

0 NO
1 YES
2 MAYBE
. UNKNOWN (7)

FO234 CORONARY BYPASS SURGERY-YEAR FIRST DONE
* VARIABLE DELETED TO PRESERVE CONFIDENTIALITY

FO235 HISTORY OF CAROTID ARTERY SURGERY
* VARIABLE DELETED TO PRESERVE CONFIDENTIALITY,

NUMBER OF POSITIVE CASES IS LESS THAN 20

FO236

CAROTID ARTERY SURGERY-YEAR FIRST DONE

* VARIABLE DELETED TO PRESERVE CONFIDENTIALITY

- FO237 HISTORY OF ABDOMINAL AORTA SURGERY
* VARIABLE DELETED TO PRESERVE CONFIDENTIALITY,
NUMBER OF POSITIVE CASES IS LESS THAN 20
- FO238 ABDOMINAL AORTA SURGERY-YEAR FIRST DONE
* VARIABLE DELETED TO PRESERVE CONFIDENTIALITY
- FO239 HISTORY OF FEMORAL OR LOWER EXTREMITY SURGERY
0 NO
1 YES
2 MAYBE
. UNKNOWN (6)
- FO240 FEMORAL OR LOWER EXTREMITY SURGERY-YEAR FIRST DONE
* VARIABLE DELETED TO PRESERVE CONFIDENTIALITY
- FO241 HISTORY OF PERMANENT PACEMAKER INSERTION
* VARIABLE DELETED TO PRESERVE CONFIDENTIALITY
- FO242 PERMANENT PACEMAKER INSERTION-YEAR FIRST DONE
* VARIABLE DELETED TO PRESERVE CONFIDENTIALITY

SCREEN 11: MEDICAL HISTORY - SYNCOPE - HEART PART IV

VARIABLE INFORMATION

FO243 IF YOU SIT/STAND UP QUICKLY DO YOU GET
 DIZZY/VERTIGO
 0 NO
 1 YES
 2 MAYBE
 . UNKNOWN (19)
 NOTE: THERE ARE 59 CASES WHERE FO243 AND FO244
 ARE BOTH POSITIVE, IT NEEDS TO BE DETERMINED
 TO WHICH VARIABLE FO245 AND FO246 APPLY

FO244 IF YOU SIT/STAND UP QUICKLY DO YOU GET
 LIGHTEADED/UNSTABLE
 0 NO
 1 YES
 2 MAYBE
 . UNKNOWN (23)
 NOTE: THERE ARE 59 CASES FO243 AND FO244
 ARE BOTH POSITIVE, IT NEEDS TO BE DETERMINED
 TO WHICH VARIABLE FO245 AND FO246 APPLY

FO245 # OF EPISODES OF
 DIZZY/VERTIGO OR LIGHTEADEDNESS/UNSTABLE PER YEAR
 0 - 998
 998 998 EPISODES OR MORE PER YEAR
 (SPACE ON FORM ONLY ALLOWED 3 DIGIT RESPONSE)
 . UNKNOWN (67)

FO246 USUAL DURATION OF
 DIZZINESS/VERTIGO OR LIGHTEADEDNESS/UNSTABLE
 FROM ONSET TO RECOVERY
 0 - 998
 1 ONE MINUTE OR LESS
 998 998 MINUTES (OR MORE) FOR USUAL DURATION
 FROM ONSET TO RECOVERY (SPACE ON FORM ONLY
 ALLOWED 3 DIGIT RESPONSE)
 . UNKNOWN (37)

FO247 FAINTED OR LOST CONSCIOUSNESS IN INTERIM
(IF EVENT IMMEDIATELY PRECEDED BY HEAD INJURY OR
ACCIDENT CODE TO 0=NO)

0 NO

1 YES

2 MAYBE

. UNKNOWN (14)

FO248 # EPISODES OF FAINTING OR LOST CONSCIOUSNESS
IN PAST 2 YEARS

0 - 10

. UNKNOWN (24)

- FO249 MONTH OF 1ST EPISODE OF FAINTING OR LOST CONSCIOUSNESS
* VARIABLE DELETED TO PRESERVE CONFIDENTIALITY
- FO250 YEAR OF 1ST EPISODE OF FAINTING OR LOST CONSCIOUSNESS
* VARIABLE DELETED TO PRESERVE CONFIDENTIALITY
- FO251 USUAL DURATION OF FAINTING OR LOSS OF
CONSCIOUSNESS - MINUTES
0 - 20
0 NO FAINTING OR LOSS OF CONSCIOUSNESS IN
INTERIM
. UNKNOWN (47)
- FO252 (USUAL) ACTIVITY PRECEDING FAINTING OR LOSS
OF CONSCIOUSNESS
0 NONE
1 EXERTION
2 REST
3 DEFECATION/MICTURITION/COUGH
4 EMOTIONAL UPSET
5 ALCOHOL CONSUMPTION
6 TURNING NECK (E.G. SHAVING)
7 POSTURAL CHANGE (E.G. LAYING TO STANDING)
8 RECENT MEDICATION CHANGE OR INGESTION
9 OTHER, OR COMBINATION
. UNKNOWN (25)
- FO253 SYMPTOMS BEFORE FAINTING OR L.O.C-NAUSEA/VOMITING
0 NO
1 YES
2 MAYBE
. UNKNOWN (17)
- FO254 SYMPTOMS BEFORE FAINTING OR L.O.C-WARNING SIGNS
(E.G. AURA)
0 NO
1 YES
2 MAYBE
. UNKNOWN (17)
- FO255 SYMPTOMS BEFORE FAINTING OR L.O.C-CHEST DISCOMFORT
0 NO

1 YES
2 MAYBE
. UNKNOWN (17)

FO256 SYMPTOM BEFORE FAINTING OR L.O.C-SHORTNESS OF BREATH

0 NO

1 YES

2 MAYBE

. UNKNOWN (17)

FO257 SYMPTOMS BEFORE FAINTING OR L.O.C-PALPITATIONS

0 NO

1 YES

2 MAYBE

. UNKNOWN (18)

FO258 SYMPTOMS NOTED AFTER FAINTING OR L.O.C-
URINARY/FECAL INCONTINENCE

0 NO

1 YES

2 MAYBE

. UNKNOWN (20)

FO259 SYMPTOMS NOTED AFTER FAINTING OR L.O.C-CONFUSION

0 NO

1 YES

2 MAYBE

. UNKNOWN (17)

FO260 SYMPTOMS NOTED AFTER FAINTING OR L.O.C-FOCAL WEAKNESS
(E.G. - ARM, LEG)

0 NO

1 YES

2 MAYBE

. UNKNOWN (17)

FO261 SYMPTOMS NOTED AFTER FAINTING OR L.O.C-OTHER

0 NO

1 YES

2 MAYBE

. UNKNOWN (22)

FO262 DID YOU HAVE ANY INJURY CAUSED BY
THE EVENT?

0 NO

1 YES

2 MAYBE
. UNKNOWN (14)

FO263 WAS SEIZURE ACTIVITY OBSERVED (WITH FAINTING OR
LOSS OF CONSCIOUSNESS)

0 NO
1 YES
2 MAYBE
. UNKNOWN (13)

FO264 ER/HOSPITALIZED OR SAW M.D. (FOR FAINTING OR LOSS OF
CONSCIOUSNESS)

* VARIABLE DELETED DUE TO MEDICAL REVIEW

SCREEN 12 - MEDICAL HISTORY - SYNCOPE - HEART PART V

VARIABLE INFORMATION

FO265 1ST EXAMINER OPINIONS-CARDIAC SYNCOPE
 0 NO
 1 YES
 2 MAYBE
 3 PRESYNCOPE
 . UNKNOWN (6)

FO266 1ST EXAMINER OPINIONS-SEIZURE DISORDER
 0 NO
 1 YES
 2 MAYBE
 . UNKNOWN (7)

FO267 1ST EXAMINER OPINIONS-VASOVAGAL EPISODE
 0 NO
 1 YES
 2 MAYBE
 . UNKNOWN (7)

FO268 1ST EXAMINER OPINION-OTHER (SYNCOPE PAGE)
 0 NO
 1 YES
 2 MAYBE
 . UNKNOWN (12)

SCREEN 13: MEDICAL HISTORY - CEREBROVASCULAR IN INTERIM - PART I

VARIABLE	INFORMATION
FO269	SUDDEN MUSCULAR WEAKNESS 0 NO 1 YES 2 MAYBE . UNKNOWN (4)
FO270	SUDDEN SPEECH DIFFICULTY 0 NO 1 YES 2 MAYBE . UNKNOWN (4)
FO271	SUDDEN VISUAL DEFECT 0 NO 1 YES 2 MAYBE . UNKNOWN (6)
FO272	UNCONSCIOUSNESS 0 NO 1 YES 2 MAYBE . UNKNOWN (5)
FO273	DOUBLE VISION 0 NO 1 YES 2 MAYBE . UNKNOWN (6)
FO274	LOSS OF VISION IN ONE EYE 0 NO 1 YES 2 MAYBE . UNKNOWN (7)
FO275	NUMBNESS, TINGLING

0 NO
1 YES
2 MAYBE
. UNKNOWN (5)

FO276 NUMBNESS AND TINGLING IS POSITIONAL
 0 NO
 1 YES
 2 MAYBE
 . UNKNOWN (11)

FO277 CT SCAN (HEAD) SINCE LAST EXAM
 * VARIABLE DELETED TO PRESERVE
 CONFIDENTIALITY

FO278 SEEN BY NEUROLOGIST SINCE LAST EXAM
 * VARIABLE DELETED TO PRESERVE CONFIDENTIALITY

FO279 DATE (MONTH) OF CEREBROVASCULAR SYMPTOM
 * VARIABLE DELETED DUE TO PRESERVE CONFIDENTIALITY

FO280 DATE (YEAR) OF CEREBROVASCULAR SYMPTOM
 * VARIABLE DELETED TO PRESERVE
 CONFIDENTIALITY

FO281 ONSET TIME OF CEREBROVASCULAR SYMPTOM
 * VARIABLE DELETED TO PRESERVE
 CONFIDENTIALITY

FO282 DURATION OF CEREBROVASCULAR SYMPTOM (DAYS)
 * VARIABLE DELETED TO PRESERVE
 CONFIDENTIALITY

FO283 DURATION OF CEREBROVASCULAR SYMPTOM (HOURS)
 * VARIABLE DELETED TO PRESERVE
 CONFIDENTIALITY

FO284 DURATION OF CEREBROVASCULAR SYMPTOM (MINUTES)
 * VARIABLE DELETED TO PRESERVE
 CONFIDENTIALITY

- FO285 HOSPITALIZED OR SAW M.D. FOR CEREBROVASCULAR SYMPTOM
* VARIABLE DELETED TO PRESERVE
CONFIDENTIALITY
- FO286 # DAYS STAYED (AT INSTITUTION) FOR CEREBROVASCULAR
SYMPTOM
* VARIABLE DELETED TO PRESERVE
CONFIDENTIALITY
- FO287 1ST EXAMINER OPINIONS-CEREBROVASCULAR DISEASE
* VARIABLE DELETED DUE TO MEDICAL REVIEW
- FO288 1ST EXAMINER OPINIONS-STROKE IN INTERIM
* VARIABLE DELETED DUE TO MEDICAL REVIEW
- FO289 1ST EXAMINER OPINION-TRANSIENT ISCHEMIC ATTACK
IN INTERIM (TIA)
* VARIABLE DELETED DUE TO MEDICAL REVIEW

SCREEN 14: MEDICAL HISTORY - PERIPHERAL ARTERIAL AND VENOUS

VARIABLE	INFORMATION
FO290	DO YOU HAVE LOWER LIMB DISCOMFORT WHILE WALKING 0 NO 1 YES . UNKNOWN (55)
FO291	LOWER LIMB DISCOMFORT IN LEFT CALF WHILE WALKING 0 NO 1 YES . UNKNOWN (57)
FO292	LOWER LIMB DISCOMFORT IN RIGHT CALF WHILE WALKING 0 NO 1 YES . UNKNOWN (57)
FO293	LOWER LIMB DISCOMFORT-LEFT LOWER EXTREMITY/NOT CALF 0 NO OR NO LOWER LIMB DISCOMFORT WHILE WALKING 1 YES . UNKNOWN (56)
FO294	LOWER LIMB DISCOMFORT-RIGHT LOWER EXTREMITY/NOT CALF 0 NO OR NO LOWER LIMB DISCOMFORT WHILE WALKING 1 YES . UNKNOWN (56)
FO295	LOWER LIMB DISCOMFORT OCCURS WITH FIRST STEPS 0 NO OR NO LOWER LIMB DISCOMFORT WHILE WALKING 1 YES . UNKNOWN (61)
FO296	LOWER LIMB DISCOMFORT AFTER WALKING A WHILE 0 NO OR NO LOWER LIMB DISCOMFORT WHILE WALKING 1 YES

. UNKNOWN (57)

- FO297 LOWER LIMB DISCOMFORT RELATED TO RAPIDITY OF WALKING OR STEEPNESS
0 NO OR NO LOWER LIMB DISCOMFORT WHILE WALKING
1 YES
. UNKNOWN (68)
- FO298 LOWER LIMB DISCOMFORT-FORCED TO STOP WALKING
0 NO OR NO LOWER LIMB DISCOMFORT WHILE WALKING
1 YES
. UNKNOWN (58)
- FO299 LOWER LIMB DISCOMFORT-TIME FOR DISCOMFORT TO BE RELIEVED BY STOPPING (MINUTES)
0 - 60
0 NO RELIEF BY STOPPING OR NO LOWER LIMB DISCOMFORT WHILE WALKING
. UNKNOWN (69)
- FO300 # DAYS/MONTH OF LOWER LIMB DISCOMFORT
0 - 30
0 NO LOWER LIMB DISCOMFORT WHILE WALKING
. UNKNOWN (83)
- FO301 IS ONE FOOT COLDER THAN THE OTHER?
0 NO
1 YES
. UNKNOWN (79)
- FO302 LEFT PHLEBITIS
0 NO
1 YES
. UNKNOWN (125)
- FO303 RIGHT PHLEBITIS
0 NO
1 YES
. UNKNOWN (128)
- FO304 LEFT LEG ULCERS
0 NO

1 YES
. UNKNOWN (125)

FO305 RIGHT LEG ULCERS
0 NO
1 YES
. UNKNOWN (128)

FO306 TREATMENT FOR VARICOSE VEINS - LEFT
 0 NO
 1 YES
 . UNKNOWN (126)

FO307 TREATMENT FOR VARICOSE VEINS - RIGHT
 0 NO
 1 YES
 . UNKNOWN (127)

FO308 1ST EXAMINER OPINIONS - INTERMITTENT CLAUDICATION
 * VARIABLE DELETED DUE TO MEDICAL REVIEW

FO309 1ST EXAMINER OPINIONS - VENOUS INSUFFICIENCY
 0 NO
 1 YES
 2 MAYBE
 . UNKNOWN (10)

SCREEN 15: CANCER SITE OR TYPE

VARIABLE INFORMATION

----- -----

- | | |
|-------|--|
| FO310 | HAVE YOU EVER HAD CANCER OR TUMOR?
* VARIABLE DELETED DUE TO MEDICAL REVIEW |
| FO311 | CANCER-ESOPHAGUS
* VARIABLE DELETED DUE TO MEDICAL REVIEW |
| FO312 | CANCER-STOMACH
* VARIABLE DELETED DUE TO MEDICAL REVIEW |
| FO313 | CANCER-COLON
* VARIABLE DELETED DUE TO MEDICAL REVIEW |
| FO314 | CANCER-RECTUM
* VARIABLE DELETED DUE TO MEDICAL REVIEW |
| FO315 | CANCER-PANCREAS
* VARIABLE DELETED DUE TO MEDICAL REVIEW |
| FO316 | CANCER-LARYNX
* VARIABLE DELETED DUE TO MEDICAL REVIEW |

FO317 CANCER-TRACHEA/BRONCHUS/LUNG
 * VARIABLE DELETED DUE TO MEDICAL REVIEW

FO318 CANCER-LEUKEMIA
 * VARIABLE DELETED DUE TO MEDICAL REVIEW

FO319 CANCER-SKIN
 * VARIABLE DELETED DUE TO MEDICAL REVIEW

FO320 CANCER-BREAST
 * VARIABLE DELETED DUE TO MEDICAL REVIEW

FO321 CANCER-CERVIX/UTERUS
 * VARIABLE DELETED DUE TO MEDICAL REVIEW

FO322 CANCER-OVARY
 * VARIABLE DELETED DUE TO MEDICAL REVIEW
 0 NO

FO323 CANCER-PROSTATE
 * VARIABLE DELETED DUE TO MEDICAL REVIEW

FO324 CANCER-BLADDER
 * VARIABLE DELETED DUE TO MEDICAL REVIEW

FO325 CANCER-KIDNEY
 * VARIABLE DELETED DUE TO MEDICAL REVIEW

FO326 CANCER-BRAIN
 * VARIABLE DELETED DUE TO MEDICAL REVIEW

FO327 CANCER-LYMPHOMA
 * VARIABLE DELETED DUE TO MEDICAL REVIEW

FO328 CANCER-OTHER/UNKNOWN
 * VARIABLE DELETED DUE TO MEDICAL REVIEW

SCREEN 16: PHYSICAL EXAM - HEAD, NECK AND RESPIRATORY

 VARIABLE INFORMATION

FO329	BLOOD PRESSURE: SYSTOLIC - 1ST MD READING 96 - 224 . UNKNOWN (0)
FO330	BLOOD PRESSURE: DIASTOLIC - 1ST MD READING 36 - 120 . UNKNOWN (3)
FO331	CORNEAL ARCUS 0 NO 1 SLIGHT 2 MODERATE 3 MARKED . UNKNOWN (3)
FO332	XANTHELASMA 0 NO 1 YES 2 MAYBE . UNKNOWN (1)
FO333	XANTHOMATA 0 NO 1 YES 2 MAYBE . UNKNOWN (5)
FO334	ACHILLES TENDON XANTHOMATA 0 NO 1 YES . UNKNOWN (4)
FO335	PALMAR XANTHOMATA 0 NO 1 YES . UNKNOWN (3)

FO336 TUBEROUS XANTHOMATA
0 NO
1 YES
. UNKNOWN (3)

FO337 THYROID ABNORMALITY
0 NO
1 YES
2 MAYBE
. UNKNOWN (3)

FO338 THYROID ABNORMALITY - SCAR
0 NO
1 YES
2 MAYBE
. UNKNOWN (7)

FO339 THYROID ABNORMALITY - SINGLE NODULE
0 NO
1 YES
2 MAYBE
. UNKNOWN (7)

FO340 THYROID ABNORMALITY - OTHER
0 NO
1 YES
2 MAYBE
. UNKNOWN (12)

FO341 THYROID ABNORMALITY-DIFFUSE ENLARGEMENT
0 NO
1 YES
2 MAYBE
. UNKNOWN (7)

FO342 THYROID ABNORMALITY - MULTIPLE NODULES
0 NO
1 YES
2 MAYBE
. UNKNOWN (8)

FO343 RESPIRATORY - INCREASED A-P DIAMETER
0 NO
1 YES
2 MAYBE
. UNKNOWN (1)

FO344 RESPIRATORY - FIXED THORAX
0 NO
1 YES
2 MAYBE
. UNKNOWN (1)

FO345 RESPIRATORY - WHEEZING ON AUSCULTATION
0 NO
1 YES
2 MAYBE
. UNKNOWN (1)

FO346 RESPIRATORY - RALES
0 NO
1 YES
2 MAYBE
. UNKNOWN (1)

FO347

RESPIRATORY - OTHER ABNORMAL BREATH SOUNDS

0 NO

1 YES

2 MAYBE

. UNKNOWN (2)

SCREEN 17: PHYSICAL EXAM - HEART

VARIABLE INFORMATION
----- -----

FO348 HEART - ENLARGEMENT
 0 NO
 1 LEFT ONLY
 2 RIGHT ONLY
 3 BOTH
 . UNKNOWN (115)

FO349 HEART - GALLOP
 0 NO
 1 S3, ONLY
 2 S4, ONLY
 3 BOTH
 . UNKNOWN (4)

FO350 HEART-ABNORMAL SOUNDS-CLICK
 0 NO
 1 YES
 . UNKNOWN (4)

FO351 HEART-ABNORMAL SOUNDS-ABNORMALLY SPLIT S2
 0 NO
 1 YES
 . UNKNOWN (5)

FO352 HEART-ABNORMAL SOUNDS-DIMINISHED A2
 0 NO
 1 YES
 . UNKNOWN (6)

FO353 HEART-ABNORMAL SOUNDS-OTHER
 0 NO
 1 YES
 . UNKNOWN (4)

FO354 HEART-ABNORMAL SOUNDS-SYSTOLIC MURMUR(S)
 0 NO
 1 YES

2 MAYBE
. UNKNOWN (2)

FO355 SYSTOLIC MURMUR - APEX - GRADE
 0 NO SOUND HEARD
 1 TO 6 FOR GRADE OF SOUND HEARD
 . UNKNOWN (7)

FO356 SYSTOLIC MURMUR - APEX - TYPE
 0 NONE
 1 EJECTION
 2 REGURGITANT
 3 OTHER
 . UNKNOWN (16)

FO357 SYSTOLIC MURMUR - APEX - RADIATION
 0 NONE
 1 AXILLA
 2 NECK
 3 BACK
 4 RIGHT CHEST
 . UNKNOWN (17)

FO358 SYSTOLIC MURMUR - APEX - VALSALVA
 0 NO CHANGE OR NO SOUND HEARD
 1 INCREASE
 2 DECREASE
 . UNKNOWN (117)

FO359 SYSTOLIC MURMUR - APEX - ORIGIN
 0 NONE, INDET.
 1 MITRAL
 2 AORTIC
 3 TRICUSPID
 4 PULM
 . UNKNOWN (24)

FO360 SYSTOLIC MURMUR - LEFT STERNUM - GRADE
 0 NO SOUND HEARD
 1 TO 6 FOR GRADE OF SOUND HEARD
 . UNKNOWN (9)

FO361 SYSTOLIC MURMUR - LEFT STERNUM - TYPE
 0 NONE
 1 EJECTION

2 REGURGITANT
3 OTHER
. UNKNOWN (10)

- FO362 SYSTOLIC MURMUR-LEFT STERNUM-RADIATION
0 NONE
1 AXILLA
2 NECK
3 BACK
4 RIGHT CHEST
. UNKNOWN (11)
- FO363 SYSTOLIC MURMUR-LEFT STERNUM-VALSALVA
0 NO CHANGE OR NO SOUND HEARD
1 INCREASE
2 DECREASE
. UNKNOWN (82)
- FO364 SYSTOLIC MURMUR - LEFT STERNUM - ORIGIN
0 NONE, INDET.
1 MITRAL
2 AORTIC
3 TRICUSPID
4 PULM
. UNKNOWN (16)
- FO365 SYSTOLIC MURMUR - BASE - GRADE
0 NO SOUND HEARD
1 TO 6 FOR GRADE OF SOUND HEARD
. UNKNOWN (9)
- FO366 SYSTOLIC MURMUR - BASE - TYPE
0 NONE
1 EJECTION
2 REGURGITANT
3 OTHER
. UNKNOWN (14)
- FO367 SYSTOLIC MURMUR - BASE - RADIATION
0 NONE
1 AXILLA
2 NECK
3 BACK
4 RIGHT CHEST
. UNKNOWN (18)

FO368

SYSTOLIC MURMUR - BASE - VALSALVA

0 NO CHANGE OR NO SOUND HEARD

1 INCREASE

2 DECREASE

. UNKNOWN (121)

- FO369 SYSTOLIC MURMUR - BASE - ORIGIN
0 NONE, INDET.
1 MITRAL
2 AORTIC
3 TRICUSPID
4 PULM
. UNKNOWN (21)
- FO370 HEART-ABNORMAL SOUNDS-DIASTOLIC MURMUR(S)
0 NO
1 YES
2 MAYBE
. UNKNOWN (2)
- FO371 VALVE OF ORIGIN FOR DIASTOLIC MURMUR(S)
0 NONE
1 MITRAL
2 AORTIC
3 BOTH
4 OTHER
. UNKNOWN (6)
- FO372 NECK VEIN DISTENTION AT 45 DEGREES
0 NO
1 YES
2 MAYBE
. UNKNOWN (269)

SCREEN 18: PHYSICAL EXAM - BREASTS AND ABDOMEN

VARIABLE INFORMATION

FO373 BREAST ABNORMALITY

0 NO
1 YES
2 MAYBE
. UNKNOWN (41)

FO374 BREAST ABNORMALITY - LOCALIZED MASS

0 NO
1 YES
2 MAYBE
. UNKNOWN (43)

FO375 BREAST ABNORMALITY - AXILLARY NODES

0 NO
1 YES
2 MAYBE
. UNKNOWN (43)

FO376 BREAST SURGERY

0 NO
1 YES
. UNKNOWN (41)

FO377 BREAST SURGERY - PROCEDURE - LEFT BREAST

USE LOWEST CODE

0 NO
1 RADICAL MASTECTOMY
2 SIMPLE MASTECTOMY
3 BIOPSY
4 LUMP REMOVAL
5 COSMETIC ONLY
. UNKNOWN (42)

FO378 BREAST SURGERY -PROCEDURE - RIGHT BREAST

USE LOWEST CODE

0 NO
1 RADICAL MASTECTOMY

2 SIMPLE MASTECTOMY
3 BIOPSY
4 LUMP REMOVAL
5 COSMETIC ONLY
. UNKNOWN (41)

FO379 ABDOMINAL ABNORMALITY - LIVER ENLARGED
0 NO
1 YES
2 MAYBE
. UNKNOWN (5)

FO380 ABDOMINAL ABNORMALITY - SURGICAL SCAR
0 NO
1 YES
2 MAYBE
. UNKNOWN (7)

FO381 ABDOMINAL ABNORMALITY-ABDOMINAL ANEURYSM
0 NO
1 YES
2 MAYBE
. UNKNOWN (6)

FO382 ABDOMINAL ABNORMALITY - BRUIT
0 NO
1 YES
2 MAYBE
. UNKNOWN (4)

FO383 ABDOMINAL ABNORMALITY-SURGICAL GALLBLADDER SCAR
0 NO
1 YES
2 MAYBE
. UNKNOWN (6)

FO384 ABDOMINAL ABNORMALITY - OTHER
0 NO
1 YES
2 MAYBE
. UNKNOWN (10)

SCREEN 19: PHYSICAL EXAM - PERIPHERAL VESSELS - PART I

VARIABLE	INFORMATION
FO385	STEM VARICOSITIES - LEFT 0 NO ABNORMALITY 1 UNCOMPLICATED 2 WITH SKIN CHANGES 3 WITH ULCER . UNKNOWN (9)
FO386	STEM VARICOSITIES - RIGHT 0 NO ABNORMALITY 1 UNCOMPLICATED 2 WITH SKIN CHANGES 3 WITH ULCER . UNKNOWN (9)
FO387	RETICULAR VARICOSITIES - LEFT 0 NO ABNORMALITY 1 UNCOMPLICATED 2 WITH SKIN CHANGES 3 WITH ULCER . UNKNOWN (9)
FO388	RETICULAR VARICOSITIES - RIGHT 0 NO ABNORMALITY 1 UNCOMPLICATED 2 WITH SKIN CHANGES 3 WITH ULCER . UNKNOWN (9)
FO389	SPIDER VARICOSITIES - LEFT 0 NO ABNORMALITY 1 UNCOMPLICATED 2 WITH SKIN CHANGES 3 WITH ULCER . UNKNOWN (10)
FO390	SPIDER VARICOSITIES - RIGHT 0 NO ABNORMALITY

1 UNCOMPLICATED
2 WITH SKIN CHANGES
3 WITH ULCER
. UNKNOWN (10)

FO391 ANKLE EDEMA - LEFT
0 NO
1 - 4 GRADE
. UNKNOWN (4)

FO392 ANKLE EDEMA - RIGHT
0 NO
1 - 4 GRADE
. UNKNOWN (2)

- FO393 FOOT IS COLD - LEFT
 0 NO
 1 YES
 2 MAYBE
 . UNKNOWN (4)
- FO394 FOOT IS COLD - RIGHT
 0 NO
 1 YES
 2 MAYBE
 . UNKNOWN (4)
- FO395 AMPUTATION - LEFT LOWER EXTREMITY
 * VARIABLE DELETED TO PRESERVE CONFIDENTIALITY
- FO396 AMPUTATION - RIGHT LOWER EXTREMITY
 * VARIABLE DELETED TO PRESERVE CONFIDENTIALITY
- FO397 AMPUTATION LEVEL - LEFT LOWER EXTREMITY
 * VARIABLE DELETED TO PRESERVE CONFIDENTIALITY
- FO398 AMPUTATION LEVEL - RIGHT LOWER EXTREMITY
 * VARIABLE DELETED TO PRESERVE CONFIDENTIALITY

SCREEN 20: PHYSICAL EXAM - PERIPHERAL VESSELS - PART II

 VARIABLE INFORMATION
 ----- -----

- FO399 CAROTID BRUIT - LEFT
 0 NO
 1 YES
 . UNKNOWN (16)
- FO400 CAROTID BRUIT - RIGHT
 0 NO
 1 YES
 . UNKNOWN (16)
- FO401 RADIAL PULSE - LEFT
 0 NORMAL
 1 ABSENT

2 ABNORMAL BUT PRESENT
. UNKNOWN (136)

FO402 RADIAL PULSE - RIGHT
0 NORMAL
1 ABSENT
2 ABNORMAL BUT PRESENT
. UNKNOWN (140)

FO403 FEMORAL PULSE - LEFT
0 NORMAL
1 ABSENT
2 ABNORMAL BUT PRESENT
. UNKNOWN (14)

FO404 FEMORAL PULSE - RIGHT
0 NORMAL
1 ABSENT
2 ABNORMAL BUT PRESENT
. UNKNOWN (17)

FO405 FEMORAL BRUIT - LEFT
0 NO
1 YES
. UNKNOWN (24)

FO406 FEMORAL BRUIT - RIGHT
0 NO
1 YES
. UNKNOWN (26)

FO407 MID-THIGH BRUIT - LEFT
0 NO
1 YES
. UNKNOWN (19)

FO408 MID-THIGH BRUIT - RIGHT
0 NO
1 YES
. UNKNOWN (17)

FO409 POPLITEAL BRUIT - LEFT
0 NO
1 YES
. UNKNOWN (23)

FO410 POPLITEAL BRUIT - RIGHT
0 NO
1 YES
. UNKNOWN (20)

FO411 POST TIBIAL PULSE - LEFT
0 NORMAL
1 ABSENT
2 ABNORMAL BUT PRESENT
. UNKNOWN (22)

FO412 POST TIBIAL PULSE - RIGHT
0 NORMAL
1 ABSENT
2 ABNORMAL BUT PRESENT
. UNKNOWN (22)

FO413 DORSALIS PEDIS PULSE - LEFT
0 NORMAL
1 ABSENT
2 ABNORMAL BUT PRESENT
. UNKNOWN (14)

FO414 DORSALIS PEDIS PULSE - RIGHT
0 NORMAL
1 ABSENT
2 ABNORMAL BUT PRESENT
. UNKNOWN (14)

SCREEN 21: PHYSICAL EXAM - NEUROLOGICAL AND FINAL BLOOD PRESSURE

VARIABLE	INFORMATION
FO415	SPEECH DISTURBANCE 0 NO 1 YES 2 MAYBE . UNKNOWN (2)
FO416	GAIT DISTURBANCE 0 NO 1 YES 2 MAYBE . UNKNOWN (11)
FO417	LOCALIZED MUSCLE WEAKNESS 0 NO 1 YES 2 MAYBE . UNKNOWN (9)
FO418	VISUAL FIELD DEFECT 0 NO 1 YES 2 MAYBE . UNKNOWN (236)
FO419	ABNORMAL REFLEXES 0 NO 1 YES 2 MAYBE . UNKNOWN (17)
FO420	CRANIAL NERVE ABNORMALITY 0 NO 1 YES 2 MAYBE . UNKNOWN (23)
FO421	CEREBELLAR SIGNS

0 NO
1 YES
2 MAYBE
. UNKNOWN (137)

FO422 SENSORY IMPAIRMENT

0 NO
1 YES
2 MAYBE
. UNKNOWN (159)

FO423 1ST EXAMINER BELIEVES RESIDUAL OF STROKE
* VARIABLE DELETED DUE TO MEDICAL REVIEW

FO424 BLOOD PRESSURE: SYSTOLIC - 2ND MD READING
90 - 220
. UNKNOWN (0)

FO425 BLOOD PRESSURE: DIASTOLIC - 2ND MD READING
40 - 104
. UNKNOWN (3)

SCREEN 22: ELECTROCARDIOGRAPH - PART I

 VARIABLE INFORMATION

FO426 ECG DONE

0 NO

1 YES

. UNKNOWN (0)

NOTE: THERE WERE NO NEGATIVE RESPONSES TO THIS QUESTION

FO427 ECG: VENTRICULAR RATE PER MINUTE

38 - 150

. UNKNOWN (0)

FO428 ECG: P-R INTERVAL (HUNDREDTHS OF SECOND)

8 - 60

. FULLY PACED, ATRIAL FIB. OR UNKNOWN (88)

FO429 ECG: QRS INTERVAL (HUNDREDTHS OF SECOND)

6 - 18

. FULLY PACED OR UNKNOWN (19)

FO430 ECG: Q-T INTERVAL (HUNDREDTHS OF SECOND)

28 - 54

. FULLY PACED OR UNKNOWN (20)

FO431 ECG: QRS ANGLE

-85 - +160

. FULLY PACED OR UNKNOWN (20)

FO432 ECG: RHYTHM

0 OR 1 NORMAL SINUS

2 SINUS RHYTHM WITH 1ST DEGREE AV BLOCK

(PR INTERVAL \geq .20 SEC)

3 2ND DEGREE AV BLOCK, MOBITZ I (WENCKEBACH)

4 2ND DEGREE AV BLOCK, MOBITZ II

5 3RD DEGREE AV BLOCK/AV DISSOCIATION

6 ATRIAL FIBRILLATION/ATRIAL FLUTTER

7 NODAL

9 OTHER OR PACED OR COMBINATION OF ABOVE (LIST)

. UNKNOWN (0)

FO433

ECG: IV BLOCK

0 NO

1 YES

. FULLY PACED OR UNKNOWN (19)

- FO434 ECG: IV BLOCK-PATTERN
0 NO IV BLOCK
1 LEFT
2 RIGHT
3 INDETERMINATE
. FULLY PACED OR UNKNOWN (19)
- FO435 ECG: IV BLOCK-COMPLETE
0 NO OR NO IV BLOCK
1 YES
. FULLY PACED OR UNKNOWN (19)
- FO436 ECG: IV BLOCK-INCOMPLETE
0 NO OR NO IV BLOCK
1 YES
. FULLY PACED OR UNKNOWN (19)
- FO437 ECG: HEMIBLOCK
0 NO
1 LEFT ANTERIOR
2 LEFT POSTERIOR
. FULLY PACED OR UNKNOWN (19)
- FO438 ECG: WPW SYNDROME
0 NO
1 YES
2 MAYBE
. FULLY PACED OR UNKNOWN (19)
- FO439 ECG: ATRIAL PREMATURE BEATS
0 NO
1 ATRIAL
2 ATRIAL ABERRANT
. UNKNOWN (12)
- FO440 ECG: VENTRICULAR PREMATURE BEATS
0 NO
1 SIMPLE
2 MULTIFOCAL
3 PAIRS
4 RUN
5 R ON T

. UNKNOWN (3)

FO441

ECG: # OF VENTRICULAR PREMATURE BEATS IN 10 SECONDS

0 - 4

. UNKNOWN (4)

SCREEN 23: ELECTROCARDIOGRAPH - PART II

VARIABLE	INFORMATION
FO442	ECG: MYOCARDIAL INFARCT-ANTERIOR 0 NO 1 YES 2 MAYBE . FULLY PACED OR UNKNOWN (52)
FO443	ECG: MYOCARDIAL INFARCT-INFERIOR 0 NO 1 YES 2 MAYBE . FULLY PACED OR UNKNOWN (46)
FO444	ECG: MYOCARDIAL INFARCT-TRUE POSTERIOR 0 NO 1 YES 2 MAYBE . FULLY PACED OR UNKNOWN (47)
FO445	ECG: LEFT VENTRICULAR HYPERTROPHY CRITERIA R>20 MM IN ANY LIMB LEAD 0 NO 1 YES . FULLY PACED, COMPLETE BBB OR UNKNOWN (22)
FO446	ECG: LEFT VENTRICULAR HYPERTROPHY CRITERIA R>11 MM IN AVL 0 NO 1 YES . FULLY PACED, COMPLETE BBB OR UNKNOWN (20)
FO447	ECG: LEFT VENTRICULAR HYPERTROPHY CRITERIA R IN LEAD I PLUS S IN LEAD III >= 25MM 0 NO 1 YES . FULLY PACED, COMPLETE BBB OR UNKNOWN (22)
FO448	ECG: LEFT VENTRICULAR HYPERTROPHY CRITERIA

R AVL IN MM (AT 1 MV = 10 MM STANDARD)

0 - 28

. FULLY PACED, COMPLETE BBB OR UNKNOWN (18)

FO449 ECG: LEFT VENTRICULAR HYPERTROPHY CRITERIA

S V3 IN MM (AT 1 MV = 10 MM STANDARD)

0 - 54

. FULLY PACED, COMPLETE BBB OR UNKNOWN (18)

- FO450 ECG: LEFT VENTRICULAR HYPERTROPHY CRITERIA
R \geq 25MM, (R IN V5 OR V6) OR (S IN V1 OR V2)
0 NO
1 YES
. FULLY PACED, COMPLETE BBB OR UNKNOWN (20)
- FO451 ECG: LEFT VENTRICULAR HYPERTROPHY CRITERIA
S \geq 25MM, (R IN V5 OR V6) OR (S IN V1 OR V2)
0 NO
1 YES
. FULLY PACED, COMPLETE BBB OR UNKNOWN (21)
- FO452 ECG: LEFT VENTRICULAR HYPERTROPHY CRITERIA
R OR S \geq 30MM, (R IN V5 OR V6) OR (S IN V1 OR V2)
0 NO
1 YES
. FULLY PACED, COMPLETE BBB OR UNKNOWN (20)
- FO453 ECG: LEFT VENTRICULAR HYPERTROPHY CRITERIA
R+S \geq 35MM, (R IN V5 OR V6) OR (S IN V1 OR V2)
0 NO
1 YES
. FULLY PACED, COMPLETE BBB OR UNKNOWN (20)
- FO454 ECG: LEFT VENTRICULAR HYPERTROPHY CRITERIA
INTRINSICOID DEFLECTION \geq .05 SEC
0 NO
1 YES
. FULLY PACED, COMPLETE BBB OR UNKNOWN (22)
- FO455 ECG: LEFT VENTRICULAR HYPERTROPHY CRITERIA
ST DEPRESSION (STRAIN PATTERN, WITH DOWN SLOPING ST)
0 NO
1 YES
. FULLY PACED, COMPLETE BBB OR UNKNOWN (26)
- FO456 ECG: NONSPECIFIC S-T SEGMENT ABNORMALITY
0 NO
1 YES
2 MAYBE
. FULLY PACED OR UNKNOWN (20)

FO457 ECG: NONSPECIFIC T-WAVE ABNORMALITY
0 NO
1 YES
2 MAYBE
. FULLY PACED OR UNKNOWN (20)

FO458 ECG: U-WAVE PRESENT
0 NO
1 YES
2 MAYBE
. FULLY PACED OR UNKNOWN (22)

- FO459 ECG: ATRIAL ENLARGEMENT
0 NONE
1 LEFT
2 RIGHT
3 BOTH
. ATRIAL FIBRILLATION OR UNKNOWN (86)
- FO460 ECG: RIGHT VENTRICULAR HYPERTROPHY
0 NO
1 YES
2 MAYBE
. FULLY PACED, COMPLETE BBB, OR UNKNOWN (136)
- FO461 ECG: LEFT VENTRICULAR HYPERTROPHY
0 NO
1 LVH WITH STRAIN
2 LVH WITH MILD S-T SEGMENT ABNORMALITY
3 LVH BY VOLTAGE ONLY
. FULLY PACED, COMPLETE BBB OR UNKNOWN (65)

SCREEN 24: CLINICAL DIAGNOSTIC IMPRESSION - PART I

VARIABLE INFORMATION

FO462 ** CLINICAL DIAGNOSTIC IMPRESSION:
 ANGINA PECTORIS
 * VARIABLE DELETED DUE TO MEDICAL REVIEW

FO463 ** CLINICAL DIAGNOSTIC IMPRESSION:
 CORONARY INSUFFICIENCY
 * VARIABLE DELETED DUE TO MEDICAL REVIEW

FO464 ** CLINICAL DIAGNOSTIC IMPRESSION:
 MYOCARDIAL INFARCT
 * VARIABLE DELETED DUE TO MEDICAL REVIEW

FO465 ** CLINICAL DIAGNOSTIC IMPRESSION:
 RHEUMATIC HEART DISEASE
 0 NO
 1 YES
 2 MAYBE
 . UNKNOWN (2)

FO466 ** CLINICAL DIAGNOSTIC IMPRESSION:
 AORTIC VALVE DISEASE
 0 NO
 1 YES
 2 MAYBE
 . UNKNOWN (3)

FO467 ** CLINICAL DIAGNOSTIC IMPRESSION:
 MITRAL VALVE DISEASE
 0 NO
 1 YES
 2 MAYBE
 . UNKNOWN (4)

** DIAGNOSTIC IMPRESSIONS - NOT HARD DATA - USE WITH CAUTION

FO468 ** CLINICAL DIAGNOSTIC IMPRESSION:
OTHER HEART DISEASE (INCLUDES CONGENITAL)
0 NO
1 YES
2 MAYBE
. UNKNOWN (1)

FO469 ** CLINICAL DIAGNOSTIC IMPRESSION:
CONGESTIVE HEART FAILURE
* VARIABLE DELETED DUE TO MEDICAL REVIEW

FO470 ** CLINICAL DIAGNOSTIC IMPRESSION:
FUNCTIONAL CLASS (NYHA CLASSIFICATION)
0 NONE
1 CLASS 1 - ORDINARY PHYSICAL ACTIVITY
DOES NOT CAUSE SYMPTOMS
2 CLASS 2 - ORDINARY PHYSICAL ACTIVITY
RESULTS IN SYMPTOMS
3 CLASS 3 - LESS THAN ORDINARY PHYSICAL
ACTIVITY RESULTS IN SYMPTOMS
4 CLASS 4 - ANY PHYSICAL ACTIVITY RESULTS IN
SYMPTOMS
. UNKNOWN (5)

** DIAGNOSTIC IMPRESSIONS - NOT HARD DATA - USE WITH CAUTION

SCREEN 25: CLINICAL DIAGNOSTIC IMPRESSION - PART II

VARIABLE INFORMATION

FO471 ** CLINICAL DIAGNOSTIC IMPRESSION:
INTERMITTENT CLAUDICATION
 * VARIABLE DELETED DUE TO MEDICAL REVIEW

FO472 ** CLINICAL DIAGNOSTIC IMPRESSION:
ABDOMINAL AORTIC ANEURYSM
 0 NO
 1 YES
 2 MAYBE
 . UNKNOWN (3)

FO473 ** CLINICAL DIAGNOSTIC IMPRESSION:
STEM VARICOSE VEINS
 0 NO
 1 YES
 2 MAYBE
 . UNKNOWN (2)

FO474 ** CLINICAL DIAGNOSTIC IMPRESSION:
PHLEBITIS
 0 NO
 1 YES
 2 MAYBE
 . UNKNOWN (1)

FO475 ** CLINICAL DIAGNOSTIC IMPRESSION:
OTHER VASCULAR DIAGNOSIS
 0 NO
 1 YES
 2 MAYBE
 . UNKNOWN (5)

FO476 ** CLINICAL DIAGNOSTIC IMPRESSION:
STROKE
 * VARIABLE DELETED DUE TO MEDICAL REVIEW

**** DIAGNOSTIC IMPRESSIONS - NOT HARD DATA - USE WITH CAUTION**

FO477 ** CLINICAL DIAGNOSTIC IMPRESSION:
TRANSIENT ISCHEMIC ATTACK (TIA)
 * VARIABLE DELETED DUE TO MEDICAL REVIEW

FO478 ** CLINICAL DIAGNOSTIC IMPRESSION:
DEMENTIA
 0 NO
 1 YES, NEW
 2 YES, OLD
 3 YES, RECURRENT
 4 MAYBE
 . UNKNOWN (0)

FO479 ** CLINICAL DIAGNOSTIC IMPRESSION:
PARKINSON'S DISEASE
 0 NO
 1 YES, NEW
 2 YES, OLD
 3 YES, RECURRENT
 4 MAYBE
 . UNKNOWN (0)

FO480 ** CLINICAL DIAGNOSTIC IMPRESSION:
OTHER NEUROLOGICAL DISEASE
 0 NO
 1 YES, NEW
 2 YES, OLD
 3 YES, RECURRENT
 4 MAYBE
 . UNKNOWN (0)

FO481 ** CLINICAL DIAGNOSTIC IMPRESSION:
DEPRESSION
 0 NO
 1 YES, NEW
 2 YES, OLD
 3 YES, RECURRENT
 4 MAYBE
 . UNKNOWN (29)

** DIAGNOSTIC IMPRESSIONS - NOT HARD DATA - USE WITH CAUTION

SCREEN 26: CLINICAL DIAGNOSTIC IMPRESSION - PART III

VARIABLE INFORMATION

FO482 ** CLINICAL DIAGNOSTIC IMPRESSION:
DIABETES MELLITUS
* VARIABLE DELETED DUE TO MEDICAL REVIEW

FO483 ** CLINICAL DIAGNOSTIC IMPRESSION:
URINARY TRACT DISEASE
0 NO
1 YES
2 MAYBE
. UNKNOWN (2)

FO484 ** CLINICAL DIAGNOSTIC IMPRESSION:
PROSTATE DISEASE
0 NO
1 YES
2 MAYBE
. UNKNOWN (1)

FO485 ** CLINICAL DIAGNOSTIC IMPRESSION:
RENAL DISEASE
0 NO
1 YES
2 MAYBE
. UNKNOWN (2)

FO486 ** CLINICAL DIAGNOSTIC IMPRESSION:
EMPHYSEMA
0 NO
1 YES
2 MAYBE
. UNKNOWN (2)

FO487 ** CLINICAL DIAGNOSTIC IMPRESSION:
CHRONIC BRONCHITIS
0 NO
1 YES
2 MAYBE

. UNKNOWN (1)

FO488 ** CLINICAL DIAGNOSTIC IMPRESSION:

PNEUMONIA

0 NO

1 YES

2 MAYBE

. UNKNOWN (1)

** DIAGNOSTIC IMPRESSIONS - NOT HARD DATA - USE WITH CAUTION

- FO489 ** CLINICAL DIAGNOSTIC IMPRESSION:
ASTHMA
0 NO
1 YES
2 MAYBE
. UNKNOWN (1)
- FO490 ** CLINICAL DIAGNOSTIC IMPRESSION:
OTHER PULMONARY DISEASE
0 NO
1 YES
2 MAYBE
. UNKNOWN (2)
- FO491 ** CLINICAL DIAGNOSTIC IMPRESSION:
GOUT
0 NO
1 YES
2 MAYBE
. UNKNOWN (1)
- FO492 ** CLINICAL DIAGNOSTIC IMPRESSION:
DEGENERATIVE JOINT DISEASE
0 NO
1 YES
2 MAYBE
. UNKNOWN (1)
- FO493 ** CLINICAL DIAGNOSTIC IMPRESSION:
RHEUMATOID ARTHRITIS
0 NO
1 YES
2 MAYBE
. UNKNOWN (2)
- FO494 ** CLINICAL DIAGNOSTIC IMPRESSION:
GALLBLADDER DISEASE
0 NO
1 YES
2 MAYBE
. UNKNOWN (3)

FO495 ** CLINICAL DIAGNOSTIC IMPRESSION:
OTHER NON C-V DIAGNOSIS

0 NO

1 YES

2 MAYBE

. UNKNOWN (3)

** DIAGNOSTIC IMPRESSIONS - NOT HARD DATA - USE WITH CAUTION

SCREEN 27: SECOND EXAMINER OPINIONS IN INTERIM

VARIABLE INFORMATION

FO496 2ND EXAMINER ID
 * VARIABLE DELETED TO PRESERVE CONFIDENTIALITY

FO497 2ND EXAMINER-CONGESTIVE HEART FAILURE
 * VARIABLE DELETED DUE TO MEDICAL REVIEW

FO498 2ND EXAMINER-CORONARY INSUFFICIENCY
 * VARIABLE DELETED DUE TO MEDICAL REVIEW

FO499 2ND EXAMINER-ANGINA PECTORIS
 * VARIABLE DELETED DUE TO MEDICAL REVIEW

FO500 2ND EXAMINER-MYOCARDIAL INFARCTION
 * VARIABLE DELETED DUE TO MEDICAL REVIEW

FO501 2ND EXAMINER-SYNCOPE
 0 NO
 1 YES
 2 MAYBE
 . UNKNOWN (1113)

FO502 2ND EXAMINER-INTERMITTENT CLAUDICATION
 * VARIABLE DELETED DUE TO MEDICAL REVIEW

FO503 2ND EXAMINER-STROKE
 * VARIABLE DELETED DUE TO MEDICAL REVIEW

** DIAGNOSTIC IMPRESSIONS - NOT HARD DATA - USE WITH CAUTION

FO504

2ND EXAMINER-TIA

* VARIABLE DELETED DUE TO MEDICAL REVIEW

** DIAGNOSTIC IMPRESSIONS - NOT HARD DATA - USE WITH CAUTION

ACTIVITIES QUESTIONS - PART A

VARIABLE INFORMATION

FO505 ACTIVITIES A - WHERE DO YOU LIVE?
* VARIABLE DELETED DUE TO PRESERVE CONFIDENTIALITY

FO506 ACTIVITIES A - DOES ANYONE LIVE WITH YOU?
0 NO OR NURSING HOME RESIDENT
1 YES
. UNKNOWN (12)

FO507 ACTIVITIES A - LIVING WITH YOU-SPOUSE
0 NO OR NURSING HOME RESIDENT
1 YES
. UNKNOWN (20)

FO508 ACTIVITIES A - LIVING WITH YOU-CHILDREN
0 NO OR NURSING HOME RESIDENT
1 YES
. UNKNOWN (29)

FO509 ACTIVITIES A - LIVING WITH YOU-FRIENDS
0 NO OR NURSING HOME RESIDENT
1 YES
. UNKNOWN (36)

FO510 ACTIVITIES A - LIVING WITH YOU-RELATIVES
0 NO OR NURSING HOME RESIDENT
1 YES
. UNKNOWN (36)

FO511 ACTIVITIES A - IN GENERAL, HOW IS YOUR HEALTH NOW?
1 EXCELLENT
2 GOOD
3 FAIR
4 POOR
. UNKNOWN (83)

FO512 ACTIVITIES A - COMPARE YOUR HEALTH TO
MOST PEOPLE YOUR OWN AGE

1 BETTER

2 ABOUT THE SAME

3 WORSE THAN MOST PEOPLE YOUR OWN AGE

. UNKNOWN (91)

- FO513 ACTIVITIES A - IN WHAT CITY OR TOWN DO YOU
CURRENTLY LIVE?
NOTE: VARIABLES FO513-FO518 ARE RELATED
 * VARIABLE DELETED TO PRESERVE CONFIDENTIALITY
- FO514 ACTIVITIES A - HOW MANY MONTHS OF THE YEAR
DO YOU LIVE THERE? (IF LESS THAN 12 MONTHS,
CONTINUE BELOW)
NOTE: VARIABLES FO513-FO518 ARE RELATED
 * VARIABLE DELETED TO PRESERVE CONFIDENTIALITY
- FO515 ACTIVITIES A - IN WHAT OTHER AREA DO YOU LIVE?
NOTE: VARIABLES FO513-FO518 ARE RELATED
 * VARIABLE DELETED TO PRESERVE CONFIDENTIALITY
- FO516 ACTIVITIES A - HOW MANY MONTHS OF THE YEAR DO
YOU LIVE THERE? (IF LESS THAN 12 MONTH TOTAL,
CONTINUE BELOW)
NOTE: VARIABLES FO513-FO518 ARE RELATED
 * VARIABLE DELETED TO PRESERVE CONFIDENTIALITY

- FO517 ACTIVITIES A - IN WHAT OTHER AREA DO YOU LIVE?
NOTE: VARIABLES FO513-FO518 ARE RELATED
 * VARIABLE DELETED TO PRESERVE CONFIDENTIALITY
- FO518 ACTIVITIES A - HOW MANY MONTHS OF THE YEAR DO YOU
LIVE THERE?
NOTE: VARIABLES FO513-FO518 ARE RELATED
 * VARIABLE DELETED TO PRESERVE CONFIDENTIALITY
- FO519 ACTIVITIES A - IN THE SUMMER, ON AVERAGE, ABOUT HOW
MANY HOURS PER DAY DO YOU SPEND OUTSIDE?
 0 NONE
 0.2 - 16.0
 . UNKNOWN (120)
- FO520 ACTIVITIES A - IN THE SUMMER WHEN YOU WERE OUTSIDE,
HOW MUCH OF YOUR SKIN WAS USUALLY EXPOSED TO THE SUN?
 1 FACE ONLY
 2 FACE AND HANDS
 3 FACE, HANDS AND ARMS
 4 FACE, HANDS, ARMS, LEGS
 . UNKNOWN (169)

ACTIVITIES QUESTIONS - PART B

VARIABLE INFORMATION

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- F521 ACTIVITIES B - ARE YOU IN BED OR IN A CHAIR FOR MOST OR ALL OF THE DAY (ON THE AVERAGE)?:
(NOTE: THIS IS A LIFESTYLE QUESTION, NOT DUE TO HEALTH)
0 NO
1 YES
. UNKNOWN OR NOT SURE (86)
- FO522 ACTIVITIES B - DO YOU NEED A SPECIAL AID (WHEELCHAIR, CANE, WALKER) TO GET AROUND?
0 NO
1 YES
2 SOMETIMES
. UNKNOWN (79)
- FO523 ACTIVITIES B - DO YOU USE A CANE OR WALKING STICK?
0 NO OR DO NOT NEED A SPECIAL AID TO GET AROUND
1 YES
2 SOMETIMES
. UNKNOWN (89)
- FO524 ACTIVITIES B - DO YOU USE A WHEELCHAIR?
0 NO OR DO NOT NEED A SPECIAL AID TO GET AROUND
1 YES
2 SOMETIMES
. UNKNOWN (86)
- FO525 ACTIVITIES B - DO YOU USE A WALKER?
0 NO OR DO NOT NEED A SPECIAL AID TO GET AROUND
1 YES
2 SOMETIMES
. UNKNOWN (88)
- FO526 ACTIVITIES B - DO YOU USE SOME OTHER SPECIAL AID TO GET AROUND? (WRITE IN)
0 NO OR DO NOT NEED A SPECIAL AID TO GET AROUND
1 YES
2 SOMETIMES

. UNKNOWN (92)

FO527 ACTIVITIES B - ARE YOU WORKING NOW ?

0 NO

1 YES, FULL TIME

2 YES, PART TIME

. UNKNOWN (63)

FO528 ACTIVITIES B - # OF DAYS IN PAST 6 MONTHS TOO SICK
TO CARRY OUT USUAL ACTIVITIES

0 NONE

1 - 180

. UNKNOWN (110)

- FO529 ACTIVITIES B - ARE YOU ABLE TO DO HEAVY WORK AROUND HOUSE LIKE SHOVEL SNOW OR WASH WINDOWS, WALLS OR FLOORS WITHOUT HELP?
0 NO, UNABLE TO DO
1 YES, INDEPENDENT
2 YES, WITH HUMAN ASSISTANCE
. UNKNOWN (63)
- FO530 ACTIVITIES B - ARE YOU ABLE TO WALK UP AND DOWN STAIRS TO THE SECOND FLOOR WITHOUT ANY HELP?
0 NO, UNABLE TO DO
1 YES, INDEPENDENT
2 YES, WITH HUMAN ASSISTANCE
. UNKNOWN (63)
- FO531 ACTIVITIES B - ARE YOU ABLE TO WALK A MILE WITHOUT HELP? (ABOUT 8 BLOCKS)
0 NO, UNABLE TO DO
1 YES, INDEPENDENT
2 YES, WITH HUMAN ASSISTANCE
. UNKNOWN (101)
- FO532 ACTIVITIES B - IF YOU HAD TO, COULD YOU DO ALL THE HOUSEKEEPING YOURSELF (LIKE WASHING CLOTHES AND CLEANING)?
0 NO, UNABLE TO DO
1 YES, INDEPENDENT
2 YES, WITH HUMAN ASSISTANCE
. UNKNOWN (88)
- FO533 ACTIVITIES B - IF YOU HAD TO, COULD YOU DO ALL THE COOKING YOURSELF?
0 NO, UNABLE TO DO
1 YES, INDEPENDENT
2 YES, WITH HUMAN ASSISTANCE
. UNKNOWN (88)
- FO534 ACTIVITIES B - IF YOU HAD TO, COULD YOU DO ALL THE GROCERY SHOPPING YOURSELF?
0 NO, UNABLE TO DO
1 YES, INDEPENDENT
2 YES, WITH HUMAN ASSISTANCE

. UNKNOWN (89)

FO535 ACTIVITIES-DO YOU DRIVE?

0 NO

1 YES, CURRENTLY

2 YES, NOT NOW

. UNKNOWN (64)

FO536 ACTIVITIES-REASON FOR NOT DRIVING NOW

1 HEALTH

2 OTHER NON-HEALTH REASON

3 NEVER LICENSED

8 N/A, CURRENT DRIVER

. UNKNOWN (91)

ACTIVITIES QUESTIONS - PART C

NOTE FOR VARIABLES FO537 - FO580:

FOR EACH ACTIVITY VARIABLE THAT SUBJECT REPLIED HAVING DIFFICULTY ("3=A LOT OF DIFFICULTY", "4=UNABLE TO DO") THE CORRESPONDING SYMPTOM VARIABLES ARE CODED WITH APPROPRIATE HEALTH PROBLEM OR SYMPTOM

FOR EACH ACTIVITY VARIABLE WHICH SUBJECT ANSWERED LITTLE DIFFICULTY OR DON'T DO ON MD ORDERS ("0=NO DIFFICULTY", "1=A LITTLE DIFFICULTY", "2=SOME DIFFICULTY", "5=DON'T DO ON MDS ORDERS") THE CORRESPONDING SYMPTOM VARIABLES ARE CODED AS "88=N/A"

VARIABLE INFORMATION

FO537 ACTIVITIES C - *SEE NOTE ABOVE*
PULLING/PUSHING LARGE OBJECTS LIKE A LIVING ROOM CHAIR
0 NO DIFFICULTY
1 A LITTLE DIFFICULTY
2 SOME DIFFICULTY
3 A LOT OF DIFFICULTY
4 UNABLE TO DO
5 DON'T DO ON MD ORDERS
. UNKNOWN (56)

FO538 ACTIVITIES C - *SEE NOTE ABOVE*
PULLING/PUSHING LARGE OBJECTS LIKE A LIVING ROOM CHAIR
SYMPTOM 1
1 CHEST PAIN
2 ARTHRITIS / JOINT
3 BACK PAIN / STIFFNESS
4 PRIOR STROKE
5 HIP FRACTURE
6 FEELING SAD OR TENSE
7 SHORTNESS OF BREATH
8 DIABETES SYMPTOMS
9 PARKINSON'S DISEASE
10 OTHER PROBLEM (WRITE IN)
88 N/A
. UNKNOWN (86)

FO539 ACTIVITIES C - *SEE NOTE ABOVE*

PULLING/PUSHING LARGE OBJECTS LIKE A LIVING ROOM CHAIR
SYMPTOM 2

- 1 CHEST PAIN
- 2 ARTHRITIS / JOINT
- 3 BACK PAIN / STIFFNESS
- 4 PRIOR STROKE
- 5 HIP FRACTURE
- 6 FEELING SAD OR TENSE
- 7 SHORTNESS OF BREATH
- 8 DIABETES SYMPTOMS
- 9 PARKINSON'S DISEASE
- 10 OTHER PROBLEM (WRITE IN)
- 88 N/A
- . UNKNOWN (104)

FO540 ACTIVITIES C - *SEE NOTE ABOVE*
PULLING/PUSHING LARGE OBJECTS LIKE A LIVING ROOM CHAIR
SYMPTOM 3

- 1 CHEST PAIN
- 2 ARTHRITIS / JOINT
- 3 BACK PAIN / STIFFNESS
- 4 PRIOR STROKE
- 5 HIP FRACTURE
- 6 FEELING SAD OR TENSE
- 7 SHORTNESS OF BREATH
- 8 DIABETES SYMPTOMS
- 9 PARKINSON'S DISEASE
- 10 OTHER PROBLEM (WRITE IN)
- 88 N/A
- . UNKNOWN (111)

FO541 ACTIVITIES C - *SEE NOTE ABOVE*
STOOPING/CROUCHING/KNEELING

- 0 NO DIFFICULTY
- 1 A LITTLE DIFFICULTY
- 2 SOME DIFFICULTY
- 3 A LOT OF DIFFICULTY
- 4 UNABLE TO DO
- 5 DON'T DO ON MD ORDERS
- . UNKNOWN (57)

FO542 ACTIVITIES C - *SEE NOTE ABOVE*
STOOPING/CROUCHING/KNEELING
SYMPTOM 1

- 1 CHEST PAIN
- 2 ARTHRITIS / JOINT
- 3 BACK PAIN / STIFFNESS
- 4 PRIOR STROKE
- 5 HIP FRACTURE
- 6 FEELING SAD OR TENSE
- 7 SHORTNESS OF BREATH
- 8 DIABETES SYMPTOMS
- 9 PARKINSON'S DISEASE
- 10 OTHER PROBLEM (WRITE IN)
- 88 N/A
- . UNKNOWN (94)

FO543 ACTIVITIES C - *SEE NOTE ABOVE*
STOOPING/CROUCHING/KNEELING
SYMPTOM 2

- 1 CHEST PAIN
- 2 ARTHRITIS / JOINT
- 3 BACK PAIN / STIFFNESS
- 4 PRIOR STROKE
- 5 HIP FRACTURE
- 6 FEELING SAD OR TENSE
- 7 SHORTNESS OF BREATH
- 8 DIABETES SYMPTOMS
- 9 PARKINSON'S DISEASE
- 10 OTHER PROBLEM (WRITE IN)
- 88 N/A
- . UNKNOWN (115)

FO544 ACTIVITIES C - *SEE NOTE ABOVE*
STOOPING/CROUCHING/KNEELING
SYMPTOM 3

- 1 CHEST PAIN
- 2 ARTHRITIS / JOINT
- 3 BACK PAIN / STIFFNESS
- 4 PRIOR STROKE
- 5 HIP FRACTURE
- 6 FEELING SAD OR TENSE
- 7 SHORTNESS OF BREATH
- 8 DIABETES SYMPTOMS
- 9 PARKINSON'S DISEASE
- 10 OTHER PROBLEM (WRITE IN)
- 88 N/A
- . UNKNOWN (123)

FO545 ACTIVITIES C - *SEE NOTE ABOVE*
REACHING OR EXTENDING ARMS BELOW SHOULDER LEVEL
(NOTE: THIS QUESTION WAS MISSING ON SOME FORMS)

- 0 NO DIFFICULTY
- 1 A LITTLE DIFFICULTY
- 2 SOME DIFFICULTY
- 3 A LOT OF DIFFICULTY
- 4 UNABLE TO DO
- 5 DON'T DO ON MD ORDERS
- . UNKNOWN (315)

FO546 ACTIVITIES C - *SEE NOTE ABOVE*
REACHING OR EXTENDING ARMS BELOW SHOULDER LEVEL
SYMPTOM 1

(NOTE: THIS QUESTION WAS MISSING ON SOME FORMS)

- 1 CHEST PAIN
- 2 ARTHRITIS / JOINT
- 3 BACK PAIN / STIFFNESS
- 4 PRIOR STROKE
- 5 HIP FRACTURE
- 6 FEELING SAD OR TENSE
- 7 SHORTNESS OF BREATH
- 8 DIABETES SYMPTOMS
- 9 PARKINSON'S DISEASE
- 10 OTHER PROBLEM (WRITE IN)
- 88 N/A

. UNKNOWN (317)

FO547 ACTIVITIES C - *SEE NOTE ABOVE*
REACHING OR EXTENDING ARMS BELOW SHOULDER LEVEL
SYMPTOM 2
(NOTE: THIS QUESTION WAS MISSING ON SOME FORMS)
1 CHEST PAIN
2 ARTHRITIS / JOINT
3 BACK PAIN / STIFFNESS
4 PRIOR STROKE
5 HIP FRACTURE
6 FEELING SAD OR TENSE
7 SHORTNESS OF BREATH
8 DIABETES SYMPTOMS
9 PARKINSON'S DISEASE
10 OTHER PROBLEM (WRITE IN)
88 N/A
. UNKNOWN (321)

FO548 ACTIVITIES C - *SEE NOTE ABOVE*
REACHING OR EXTENDING ARMS BELOW SHOULDER LEVEL
SYMPTOM 3
(NOTE: THIS QUESTION WAS MISSING ON SOME FORMS)
1 CHEST PAIN
2 ARTHRITIS / JOINT
3 BACK PAIN / STIFFNESS
4 PRIOR STROKE
5 HIP FRACTURE
6 FEELING SAD OR TENSE
7 SHORTNESS OF BREATH
8 DIABETES SYMPTOMS
9 PARKINSON'S DISEASE
10 OTHER PROBLEM (WRITE IN)
88 N/A
. UNKNOWN (320)

FO549 ACTIVITIES C - *SEE NOTE ABOVE*
REACHING OR EXTENDING ARMS ABOVE SHOULDER LEVEL
0 NO DIFFICULTY
1 A LITTLE DIFFICULTY
2 SOME DIFFICULTY
3 A LOT OF DIFFICULTY
4 UNABLE TO DO
5 DON'T DO ON MD ORDERS

. UNKNOWN (54)

FO550 ACTIVITIES C - *SEE NOTE ABOVE*
REACHING OR EXTENDING ARMS ABOVE SHOULDER LEVEL
SYMPTOM 1
1 CHEST PAIN
2 ARTHRITIS / JOINT
3 BACK PAIN / STIFFNESS
4 PRIOR STROKE
5 HIP FRACTURE
6 FEELING SAD OR TENSE
7 SHORTNESS OF BREATH
8 DIABETES SYMPTOMS
9 PARKINSON'S DISEASE
10 OTHER PROBLEM (WRITE IN)
88 N/A
. UNKNOWN (62)

FO551 ACTIVITIES C - *SEE NOTE ABOVE*
REACHING OR EXTENDING ARMS ABOVE SHOULDER LEVEL
SYMPTOM 2
1 CHEST PAIN
2 ARTHRITIS / JOINT
3 BACK PAIN / STIFFNESS
4 PRIOR STROKE
5 HIP FRACTURE
6 FEELING SAD OR TENSE
7 SHORTNESS OF BREATH
8 DIABETES SYMPTOMS
9 PARKINSON'S DISEASE
10 OTHER PROBLEM (WRITE IN)
88 N/A
. UNKNOWN (70)

FO552 ACTIVITIES C - *SEE NOTE ABOVE*
REACHING OR EXTENDING ARMS ABOVE SHOULDER LEVEL
SYMPTOM 3
1 CHEST PAIN
2 ARTHRITIS / JOINT
3 BACK PAIN / STIFFNESS
4 PRIOR STROKE
5 HIP FRACTURE
6 FEELING SAD OR TENSE
7 SHORTNESS OF BREATH

8 DIABETES SYMPTOMS
9 PARKINSON'S DISEASE
10 OTHER PROBLEM (WRITE IN)
88 N/A
. UNKNOWN (73)

FO553 ACTIVITIES C - *SEE NOTE ABOVE*
WRITING, HANDLING OR FINGERING SMALL OBJECTS
0 NO DIFFICULTY
1 A LITTLE DIFFICULTY
2 SOME DIFFICULTY
3 A LOT OF DIFFICULTY
4 UNABLE TO DO
5 DON'T DO ON MD ORDERS
. UNKNOWN (54)

FO554 ACTIVITIES C - *SEE NOTE ABOVE*
WRITING, HANDLING OR FINGERING SMALL OBJECTS
SYMPTOM 1
1 CHEST PAIN
2 ARTHRITIS / JOINT
3 BACK PAIN / STIFFNESS
4 PRIOR STROKE
5 HIP FRACTURE
6 FEELING SAD OR TENSE
7 SHORTNESS OF BREATH
8 DIABETES SYMPTOMS
9 PARKINSON'S DISEASE
10 OTHER PROBLEM (WRITE IN)
88 N/A
. UNKNOWN (62)

FO555 ACTIVITIES C - *SEE NOTE ABOVE*
WRITING, HANDLING OR FINGERING SMALL OBJECTS
SYMPTOM 2
1 CHEST PAIN
2 ARTHRITIS / JOINT
3 BACK PAIN / STIFFNESS
4 PRIOR STROKE
5 HIP FRACTURE
6 FEELING SAD OR TENSE
7 SHORTNESS OF BREATH
8 DIABETES SYMPTOMS
9 PARKINSON'S DISEASE
10 OTHER PROBLEM (WRITE IN)
88 N/A
. UNKNOWN (71)

FO556 ACTIVITIES C - *SEE NOTE ABOVE*
WRITING, HANDLING OR FINGERING SMALL OBJECTS
SYMPTOM 3
1 CHEST PAIN
2 ARTHRITIS / JOINT
3 BACK PAIN / STIFFNESS
4 PRIOR STROKE
5 HIP FRACTURE
6 FEELING SAD OR TENSE
7 SHORTNESS OF BREATH

8 DIABETES SYMPTOMS
9 PARKINSON'S DISEASE
10 OTHER PROBLEM (WRITE IN)
88 N/A
. UNKNOWN (74)

FO557 ACTIVITIES C - *SEE NOTE ABOVE*
STANDING IN ONE PLACE FOR LONG PERIODS, SAY FOR 15 MIN.
0 NO DIFFICULTY
1 A LITTLE DIFFICULTY
2 SOME DIFFICULTY
3 A LOT OF DIFFICULTY
4 UNABLE TO DO
5 DON'T DO ON MD ORDERS
. UNKNOWN (55)

FO558 ACTIVITIES C - *SEE NOTE ABOVE*
STANDING IN ONE PLACE FOR LONG PERIODS, SAY FOR 15 MIN.
SYMPTOM 1
1 CHEST PAIN
2 ARTHRITIS / JOINT
3 BACK PAIN / STIFFNESS
4 PRIOR STROKE
5 HIP FRACTURE
6 FEELING SAD OR TENSE
7 SHORTNESS OF BREATH
8 DIABETES SYMPTOMS
9 PARKINSON'S DISEASE
10 OTHER PROBLEM (WRITE IN)
88 N/A
. UNKNOWN (89)

FO559 ACTIVITIES C - *SEE NOTE ABOVE*
STANDING IN ONE PLACE FOR LONG PERIODS, SAY FOR 15 MIN.
SYMPTOM 2
1 CHEST PAIN
2 ARTHRITIS / JOINT
3 BACK PAIN / STIFFNESS
4 PRIOR STROKE
5 HIP FRACTURE
6 FEELING SAD OR TENSE
7 SHORTNESS OF BREATH
8 DIABETES SYMPTOMS
9 PARKINSON'S DISEASE
10 OTHER PROBLEM (WRITE IN)
88 N/A
. UNKNOWN (99)

FO560

ACTIVITIES C - *SEE NOTE ABOVE*

STANDING IN ONE PLACE FOR LONG PERIODS, SAY FOR 15 MIN.

SYMPTOM 3

1 CHEST PAIN

2 ARTHRITIS / JOINT

3 BACK PAIN / STIFFNESS

4 PRIOR STROKE

5 HIP FRACTURE

6 FEELING SAD OR TENSE

7 SHORTNESS OF BREATH

8 DIABETES SYMPTOMS

9 PARKINSON'S DISEASE

10 OTHER PROBLEM (WRITE IN)

88 N/A

. UNKNOWN (109)

FO561 ACTIVITIES C - *SEE NOTE ABOVE*
SITTING FOR LONG PERIODS, SAY 1 HOUR
(NOTE: THIS QUESTION WAS MISSING ON SOME FORMS)
0 NO DIFFICULTY
1 A LITTLE DIFFICULTY
2 SOME DIFFICULTY
3 A LOT OF DIFFICULTY
4 UNABLE TO DO
5 DON'T DO ON MD ORDERS
. UNKNOWN (314)

FO562 ACTIVITIES C - *SEE NOTE ABOVE*
SITTING FOR LONG PERIODS, SAY 1 HOUR
(NOTE: THIS QUESTION WAS MISSING ON SOME FORMS)
SYMPTOM 1
1 CHEST PAIN
2 ARTHRITIS / JOINT
3 BACK PAIN / STIFFNESS
4 PRIOR STROKE
5 HIP FRACTURE
6 FEELING SAD OR TENSE
7 SHORTNESS OF BREATH
8 DIABETES SYMPTOMS
9 PARKINSON'S DISEASE
10 OTHER PROBLEM (WRITE IN)
88 N/A
. UNKNOWN (317)

FO563 ACTIVITIES C - *SEE NOTE ABOVE*
SITTING FOR LONG PERIODS, SAY 1 HOUR
(NOTE: THIS QUESTION WAS MISSING ON SOME FORMS)
SYMPTOM 2
1 CHEST PAIN
2 ARTHRITIS / JOINT
3 BACK PAIN / STIFFNESS
4 PRIOR STROKE
5 HIP FRACTURE
6 FEELING SAD OR TENSE
7 SHORTNESS OF BREATH
8 DIABETES SYMPTOMS
9 PARKINSON'S DISEASE
10 OTHER PROBLEM (WRITE IN)

88 N/A
. UNKNOWN (317)

FO564 ACTIVITIES C - *SEE NOTE ABOVE*
SITTING FOR LONG PERIODS, SAY 1 HOUR
(NOTE: THIS QUESTION WAS MISSING ON SOME FORMS)
SYMPTOM 3
1 CHEST PAIN
2 ARTHRITIS / JOINT
3 BACK PAIN / STIFFNESS
4 PRIOR STROKE
5 HIP FRACTURE
6 FEELING SAD OR TENSE
7 SHORTNESS OF BREATH
8 DIABETES SYMPTOMS
9 PARKINSON'S DISEASE
10 OTHER PROBLEM (WRITE IN)
88 N/A
. UNKNOWN (317)

FO565 ACTIVITIES C - *SEE NOTE ABOVE*
GETTING IN AND OUT OF A CAR
0 NO DIFFICULTY
1 A LITTLE DIFFICULTY
2 SOME DIFFICULTY
3 A LOT OF DIFFICULTY
4 UNABLE TO DO
5 DON'T DO ON MD ORDERS
. UNKNOWN (84)

FO566 ACTIVITIES C - *SEE NOTE ABOVE*
GETTING IN AND OUT OF A CAR
SYMPTOM 1
1 CHEST PAIN
2 ARTHRITIS / JOINT
3 BACK PAIN / STIFFNESS
4 PRIOR STROKE
5 HIP FRACTURE
6 FEELING SAD OR TENSE
7 SHORTNESS OF BREATH
8 DIABETES SYMPTOMS
9 PARKINSON'S DISEASE
10 OTHER PROBLEM (WRITE IN)
88 N/A
. UNKNOWN (95)

FO567 ACTIVITIES C - *SEE NOTE ABOVE*

GETTING IN AND OUT OF A CAR

SYMPTOM 2

1 CHEST PAIN

2 ARTHRITIS / JOINT

3 BACK PAIN / STIFFNESS

4 PRIOR STROKE

5 HIP FRACTURE

6 FEELING SAD OR TENSE

7 SHORTNESS OF BREATH

8 DIABETES SYMPTOMS

9 PARKINSON'S DISEASE

10 OTHER PROBLEM (WRITE IN)

88 N/A

. UNKNOWN (103)

FO568 ACTIVITIES C - *SEE NOTE ABOVE*

GETTING IN AND OUT OF A CAR

SYMPTOM 3

- 1 CHEST PAIN
- 2 ARTHRITIS / JOINT
- 3 BACK PAIN / STIFFNESS
- 4 PRIOR STROKE
- 5 HIP FRACTURE
- 6 FEELING SAD OR TENSE
- 7 SHORTNESS OF BREATH
- 8 DIABETES SYMPTOMS
- 9 PARKINSON'S DISEASE
- 10 OTHER PROBLEM (WRITE IN)
- 88 N/A
- . UNKNOWN (108)

FO569 ACTIVITIES C - *SEE NOTE ABOVE*

LIFTING A 10 LB OBJECT OFF THE FLOOR (SACK OF POTATOES)

- 0 NO DIFFICULTY
- 1 A LITTLE DIFFICULTY
- 2 SOME DIFFICULTY
- 3 A LOT OF DIFFICULTY
- 4 UNABLE TO DO
- 5 DON'T DO ON MD ORDERS
- . UNKNOWN (87)

FO570 ACTIVITIES C - *SEE NOTE ABOVE*

LIFTING A 10 LB OBJECT OFF THE FLOOR (SACK OF POTATOES)

SYMPTOM 1

- 1 CHEST PAIN
- 2 ARTHRITIS / JOINT
- 3 BACK PAIN / STIFFNESS
- 4 PRIOR STROKE
- 5 HIP FRACTURE
- 6 FEELING SAD OR TENSE
- 7 SHORTNESS OF BREATH
- 8 DIABETES SYMPTOMS
- 9 PARKINSON'S DISEASE
- 10 OTHER PROBLEM (WRITE IN)
- 88 N/A
- . UNKNOWN (116)

FO571

ACTIVITIES C - *SEE NOTE ABOVE*

LIFTING A 10 LB OBJECT OFF THE FLOOR (SACK OF POTATOES)

SYMPTOM 2

1 CHEST PAIN

2 ARTHRITIS / JOINT

3 BACK PAIN / STIFFNESS

4 PRIOR STROKE

5 HIP FRACTURE

6 FEELING SAD OR TENSE

7 SHORTNESS OF BREATH

8 DIABETES SYMPTOMS

9 PARKINSON'S DISEASE

10 OTHER PROBLEM (WRITE IN)

88 N/A

. UNKNOWN (125)

FO572 ACTIVITIES C - *SEE NOTE ABOVE*
LIFTING A 10 LB OBJECT OFF THE FLOOR (SACK OF POTATOES)
SYMPTOM 3

- 1 CHEST PAIN
- 2 ARTHRITIS / JOINT
- 3 BACK PAIN / STIFFNESS
- 4 PRIOR STROKE
- 5 HIP FRACTURE
- 6 FEELING SAD OR TENSE
- 7 SHORTNESS OF BREATH
- 8 DIABETES SYMPTOMS
- 9 PARKINSON'S DISEASE
- 10 OTHER PROBLEM (WRITE IN)
- 88 N/A
- . UNKNOWN (129)

FO573 ACTIVITIES C - *SEE NOTE ABOVE*
PUTTING SOCKS OR STOCKINGS ON

- 0 NO DIFFICULTY
- 1 A LITTLE DIFFICULTY
- 2 SOME DIFFICULTY
- 3 A LOT OF DIFFICULTY
- 4 UNABLE TO DO
- 5 DON'T DO ON MD ORDERS
- . UNKNOWN (80)

FO574 ACTIVITIES C - *SEE NOTE ABOVE*
PUTTING SOCKS OR STOCKINGS ON
SYMPTOM 1

- 1 CHEST PAIN
- 2 ARTHRITIS / JOINT
- 3 BACK PAIN / STIFFNESS
- 4 PRIOR STROKE
- 5 HIP FRACTURE
- 6 FEELING SAD OR TENSE
- 7 SHORTNESS OF BREATH
- 8 DIABETES SYMPTOMS
- 9 PARKINSON'S DISEASE
- 10 OTHER PROBLEM (WRITE IN)
- 88 N/A
- . UNKNOWN (92)

FO575 ACTIVITIES C - *SEE NOTE ABOVE*
PUTTING SOCKS OR STOCKINGS ON
SYMPTOM 2

- 1 CHEST PAIN
- 2 ARTHRITIS / JOINT
- 3 BACK PAIN / STIFFNESS
- 4 PRIOR STROKE
- 5 HIP FRACTURE
- 6 FEELING SAD OR TENSE
- 7 SHORTNESS OF BREATH
- 8 DIABETES SYMPTOMS
- 9 PARKINSON'S DISEASE
- 10 OTHER PROBLEM (WRITE IN)
- 88 N/A
- . UNKNOWN (101)

FO576 ACTIVITIES C - *SEE NOTE ABOVE*
PUTTING SOCKS OR STOCKINGS ON
SYMPTOM 3

- 1 CHEST PAIN
- 2 ARTHRITIS / JOINT
- 3 BACK PAIN / STIFFNESS
- 4 PRIOR STROKE
- 5 HIP FRACTURE
- 6 FEELING SAD OR TENSE
- 7 SHORTNESS OF BREATH
- 8 DIABETES SYMPTOMS
- 9 PARKINSON'S DISEASE
- 10 OTHER PROBLEM (WRITE IN)
- 88 N/A
- . UNKNOWN (107)

FO577 ACTIVITIES C - *SEE NOTE ABOVE*
WALKING ONE HALF MILE (4-6 BLOCKS)

- 0 NO DIFFICULTY
- 1 A LITTLE DIFFICULTY
- 2 SOME DIFFICULTY
- 3 A LOT OF DIFFICULTY
- 4 UNABLE TO DO
- 5 DON'T DO ON MD ORDERS
- . UNKNOWN (73)

FO578 ACTIVITIES C - *SEE NOTE ABOVE*
WALKING ONE HALF MILE (4-6 BLOCKS)
SYMPTOM 1

- 1 CHEST PAIN
- 2 ARTHRITIS / JOINT
- 3 BACK PAIN / STIFFNESS
- 4 PRIOR STROKE
- 5 HIP FRACTURE
- 6 FEELING SAD OR TENSE
- 7 SHORTNESS OF BREATH
- 8 DIABETES SYMPTOMS
- 9 PARKINSON'S DISEASE
- 10 OTHER PROBLEM (WRITE IN)
- 88 N/A
- . UNKNOWN (101)

FO579 ACTIVITIES C - *SEE NOTE ABOVE*
WALKING ONE HALF MILE (4-6 BLOCKS)
SYMPTOM 2

- 1 CHEST PAIN
- 2 ARTHRITIS / JOINT
- 3 BACK PAIN / STIFFNESS
- 4 PRIOR STROKE
- 5 HIP FRACTURE
- 6 FEELING SAD OR TENSE
- 7 SHORTNESS OF BREATH
- 8 DIABETES SYMPTOMS
- 9 PARKINSON'S DISEASE
- 10 OTHER PROBLEM (WRITE IN)
- 88 N/A
- . UNKNOWN (115)

FO580 ACTIVITIES C - *SEE NOTE ABOVE*
WALKING ONE HALF MILE (4-6 BLOCKS)

SYMPTOM 3

- 1 CHEST PAIN
 - 2 ARTHRITIS / JOINT
 - 3 BACK PAIN / STIFFNESS
 - 4 PRIOR STROKE
 - 5 HIP FRACTURE
 - 6 FEELING SAD OR TENSE
 - 7 SHORTNESS OF BREATH
 - 8 DIABETES SYMPTOMS
 - 9 PARKINSON'S DISEASE
 - 10 OTHER PROBLEM (WRITE IN)
- 88 N/A
. UNKNOWN (122)

ACTIVITIES QUESTIONS - PART D

VARIABLE INFORMATION

FO581 ACTIVITIES D - IN PAST YEAR HAVE YOU
ACCIDENTALLY FALLEN AND HIT THE FLOOR OR GROUND?
(CODE AS NO IF DURING SPORTS ACTIVITY)

0 NO
1 YES
2 MAYBE
. UNKNOWN (70)

FO582 ACTIVITIES D - IF YES (TO FO581), HOW MANY
TIMES DID YOU FALL IN THE PAST YEAR?

1 - 21
88 DID NOT FALL OR NOT APPLICABLE
. UNKNOWN (83)

FO583 ACTIVITIES D - IF YES (TO FO581), THINKING
OF THE FALLS YOU HAD IN THE PAST YEAR,
IN WHAT DIRECTION DID YOU TEND TO FALL?

0 FORWARD
1 BACKWARD
3 TO THE SIDE
4 VARIES
5 CAN'T RECALL
8 DID NOT FALL OR NOT APPLICABLE
. UNKNOWN (97)

FO584 ACTIVITIES D - IF YES (TO FO581), DID ANY
OF YOUR FALLS IN THE PAST YEAR RESULT
IN A FRACTURE?

0 NO OR DID NOT FALL
1 YES
2 MAYBE
. UNKNOWN (84)

FO585 ACTIVITIES D - IF YES (TO FO581), DID ANY
OF YOUR FALLS IN THE PAST YEAR RESULT
IN A HEAD INJURY REQUIRING MEDICAL
ATTENTION?

0 NO OR DID NOT FALL
1 YES
2 MAYBE
. UNKNOWN (86)

FO586 ACTIVITIES D - IF YES (TO FO581), DID ANY
OF YOUR FALLS IN THE PAST YEAR RESULT
IN A DISLOCATION?

0 NO OR DID NOT FALL
1 YES
2 MAYBE
. UNKNOWN (88)

- FO587 ACTIVITIES D - IF YES (TO FO581), DID ANY
OF YOUR FALLS IN THE PAST YEAR RESULT
IN A BRUISE, SPRAIN OR CUT?
0 NO OR DID NOT FALL
1 YES
2 MAYBE
. UNKNOWN (85)
- FO588 ACTIVITIES D - IF YES (TO FO581), DID ANY
OF YOUR FALLS IN THE PAST YEAR RESULT
IN OTHER THAN LISTED ABOVE?
0 NO OR DID NOT FALL
1 YES
2 MAYBE
. UNKNOWN (147)
- FO589 ACTIVITIES D - IF YES (TO FO581), DID
YOU LOSE CONCIIOUSNESS OR BLACK OUT
BEFORE ANY FALLS IN THE PAST YEAR?
0 NO OR DID NOT FALL
1 YES
2 MAYBE
. UNKNOWN (89)
- FO590 ACTIVITIES D - ARE YOU AFRAID YOU MAY FALL?
0 NO
1 YES
. UNKNOWN (118)
- FO591 ACTIVIES D - IF YES (TO FO590), HOW
MUCH DOES YOUR FEAR OF FALLING
INTERFERE WITH BATHING?
0 NONE OR NOT AFRAID OF FALLING
1 SOME
2 A LOT
. UNKNOWN (123)
- FO592 ACTIVIES D - IF YES (TO FO590), HOW
MUCH DOES YOUR FEAR OF FALLING
INTERFERE WITH REACHING INTO CABINETS
OR CLOSETS?
0 NONE OR NOT AFRAID OF FALLING

1 SOME
2 A LOT
. UNKNOWN (127)

- FO593 ACTIVIES D - IF YES (TO FO590), HOW
MUCH DOES YOUR FEAR OF FALLING
INTERFERE WITH WALKING OUTSIDE YOUR
HOME (E.G. AT A GROCERY STORE OR MALL)?
0 NONE OR NOT AFRAID OF FALLING
1 SOME
2 A LOT
. UNKNOWN (132)
- FO594 ACTIVIES D - IF YES (TO FO590), HOW
MUCH DOES YOUR FEAR OF FALLING
INTERFERE WITH WALKING INSIDE YOUR
HOME?
0 NONE OR NOT AFRAID OF FALLING
1 SOME
2 A LOT
. UNKNOWN (129)
- FO595 ACTIVIES D - IF YES (TO FO590), HOW
MUCH DOES YOUR FEAR OF FALLING
INTERFERE WITH CLIMBING STAIRS
(UP AND DOWN)?
0 NONE OR NOT AFRAID OF FALLING
1 SOME
2 A LOT
. UNKNOWN (132)
- FO596 ACTIVIES D - IF YES (TO FO590), HOW
MUCH DOES YOUR FEAR OF FALLING
INTERFERE WITH OTHER ACTIVITY NOT
LISTED ABOVE?
0 NONE OR NOT AFRAID OF FALLING
1 SOME
2 A LOT
. UNKNOWN (190)

ACTIVIES QUESTIONS -- PART E

VARIABLE INFORMATION

- FO597 ACTIVITIES E -
 BROKEN ANY BONES SINCE LAST VISIT?
 0 NO OR UNDER AGE 30
 1 YES
 2 MAYBE
 . UNKNOWN (68)
- FO598 ACTIVITIES E -
 (SINCE LAST VISIT) YEAR BROKE
 LEFT UPPER ARM (HUMERUS) / ELBOW
 * VARIABLE DELETED TO PRESERVE CONFIDENTIALITY
- FO599 ACTIVITIES E -
 (SINCE LAST VISIT) YEAR BROKE
 RIGHT UPPER ARM (HUMERUS) / ELBOW
 * VARIABLE DELETED TO PRESERVE CONFIDENTIALITY
- FO600 ACTIVITIES E -
 (SINCE LAST VISIT) YEAR BROKE
 LEFT FOREARM OR WRIST
 * VARIABLE DELETED TO PRESERVE CONFIDENTIALITY
- FO601 ACTIVITIES E -
 (SINCE LAST VISIT) YEAR BROKE
 RIGHT FOREARM OR WRIST
 * VARIABLE DELETED TO PRESERVE CONFIDENTIALITY
- FO602 ACTIVITIES E -
 (SINCE LAST VISIT) YEAR BROKE BACK
 * VARIABLE DELETED TO PRESERVE CONFIDENTIALITY
- FO603 ACTIVITIES E -
 (SINCE LAST VISIT) YEAR BROKE PELVIS
 * VARIABLE DELETED TO PRESERVE CONFIDENTIALITY
- FO604 ACTIVITIES E -
 (SINCE LAST VISIT) YEAR BROKE LEFT HIP

* VARIABLE DELETED TO PRESERVE CONFIDENTIALITY

- FO605 ACTIVITIES E -
(SINCE LAST VISIT) YEAR BROKE RIGHT HIP
 * VARIABLE DELETED TO PRESERVE CONFIDENTIALITY
- FO606 ACTIVITIES E -
(SINCE LAST VISIT) YEAR BROKE OTHER BONE
 * VARIABLE DELETED TO PRESERVE CONFIDENTIALITY
- FO607 ACTIVITIES E -
KNEE OSTEOARTHRITIS PHYSICAL EXAM
LEFT KNEE GRIND
 0 ABSENT OR NEGATIVE TEST
 1 PRESENT OR POSITIVE TEST
 . UNKNOWN OR DID NOT TEST (266)
- FO608 ACTIVITIES E -
KNEE OSTEOARTHRITIS PHYSICAL EXAM
LEFT KNEE TENDER
 0 ABSENT OR NEGATIVE TEST
 1 PRESENT OR POSITIVE TEST
 . UNKNOWN OR DID NOT TEST (262)
- FO609 ACTIVITIES E -
KNEE OSTEOARTHRITIS PHYSICAL EXAM
LEFT KNEE ENLARGEMENT
 0 ABSENT OR NEGATIVE TEST
 1 PRESENT OR POSITIVE TEST
 . UNKNOWN OR DID NOT TEST (265)
- FO610 ACTIVITIES E -
KNEE OSTEOARTHRITIS PHYSICAL EXAM
RIGHT KNEE GRIND
 0 ABSENT OR NEGATIVE TEST
 1 PRESENT OR POSITIVE TEST
 . UNKNOWN OR DID NOT TEST (259)
- FO611 ACTIVITIES E -
KNEE OSTEOARTHRITIS PHYSICAL EXAM
RIGHT KNEE TENDER
 0 ABSENT OR NEGATIVE TEST
 1 PRESENT OR POSITIVE TEST
 . UNKNOWN OR DID NOT TEST (259)

FO612

ACTIVITIES E -
KNEE OSTEOARTHRITIS PHYSICAL EXAM
RIGHT KNEE ENLARGEMENT
0 ABSENT OR NEGATIVE TEST
1 PRESENT OR POSITIVE TEST
. UNKNOWN OR DID NOT TEST (260)

ARTHRITIS HISTORY -- PART A

VARIABLE INFORMATION

FO613 ARTHRITIS A - KNEE - HAVE YOU EVER HAD PAIN LASTING
AT LEAST A MONTH IN OR AROUND THE KNEE INCLUDING
THE BACK OF THE KNEE?

0 NO
1 YES, LEFT
2 YES, RIGHT
3 YES, BOTH
. UNKNOWN (104)

FO614 ARTHRITIS A - KNEE - IF YES (TO FO613), WHAT YEAR
DID THE PAIN START IN LEFT KNEE?
(TWO DIGIT FORMAT FOR YEAR: 19??)

0 NO OR NOT APPLICABLE
26 - 93
. UNKNOWN (120)

FO615 ARTHRITIS A - KNEE - IF YES (TO FO613), WHAT YEAR
DID THE PAIN START IN RIGHT KNEE?
(TWO DIGIT FORMAT FOR YEAR: 19??)

0 NO OR NOT APPLICABLE
10 - 93
. UNKNOWN (117)

FO616 ARTHRITIS A - KNEE - IF YES (TO FO613), WHEN
WAS THE LAST TIME YOU HAD LEFT KNEE PAIN?
(TWO DIGIT FORMAT FOR YEAR: 19??)

0 NO OR NOT APPLICABLE
27 - 94
. UNKNOWN (110)

FO617 ARTHRITIS A - KNEE - IF YES (TO FO613), WHEN
WAS THE LAST TIME YOU HAD RIGHT KNEE PAIN?
(TWO DIGIT FORMAT FOR YEAR: 19??)

0 NO OR NOT APPLICABLE
12 - 94
. UNKNOWN (109)

FO618 ARTHRITIS A - KNEE - IF YES (TO FO613), HOW
SEVERE IS/WAS THE PAIN IN LEFT KNEE USUALLY?

- 1 MILD
- 2 MODERATE
- 3 SEVERE
- 8 NOT APPLICABLE
- . UNKNOWN (111)

FO619 ARTHRITIS A - KNEE - IF YES (TO FO613), HOW
SEVERE IS/WAS THE PAIN IN RIGHT KNEE USUALLY?

- 1 MILD
- 2 MODERATE
- 3 SEVERE
- 8 NOT APPLICABLE
- . UNKNOWN (108)

- FO620 ARTHRITIS A - KNEE - HAVE YOU EVERY HAD A FRACTURE OR INJURY TO A KNEE REQUIRING THE USE OF CRUTCHES OR A CANE?
0 NO
1 YES, LEFT
2 YES, RIGHT
3 YES, BOTH
. UNKNOWN (108)
- FO621 ARTHRITIS A - KNEE - ON MOST DAYS DO YOU HAVE PAIN, ACHING OR STIFFNESS IN EITHER OF YOUR KNEES?
0 NO
1 YES, LEFT
2 YES, RIGHT
3 YES, BOTH
. UNKNOWN (110)
- FO622 ARTHRITIS A - KNEE - IF YES (TO FO621), IS THE PAIN, ACHING OR STIFFNESS MILD, MODERATE OR SEVERE IN LEFT KNEE?
0 NO OR NOT APPLICABLE
1 MILD
2 MODERATE
3 SEVERE
. UNKNOWN (117)
- FO623 ARTHRITIS A - KNEE - IF YES (TO FO621), IS THE PAIN, ACHING OR STIFFNESS MILD, MODERATE OR SEVERE IN RIGHT KNEE?
0 NO OR NOT APPLICABLE
1 MILD
2 MODERATE
3 SEVERE
. UNKNOWN (118)
- FO624 ARTHRITIS A - KNEE - IN THE PAST MONTH HAVE YOU HAD ANY PAIN, ACHING OR STIFFNESS IN EITHER OF YOUR KNEES?
0 NO
1 YES, LEFT
2 YES, RIGHT
3 YES, BOTH

. UNKNOWN (112)

FO625 ARTHRITIS A - HANDS - ON MOST DAYS DO YOU HAVE PAIN,
ACHING OR STIFFNESS IN THE JOINTS OF YOUR HANDS
OR WRISTS?

0 NO

1 YES, LEFT

2 YES, RIGHT

3 YES, BOTH

. UNKNOWN (106)

FO626 ARTHRITIS A - HANDS - IF YES (TO FO625), IS THE PAIN, ACHING OR STIFFNESS MILD, MODERATE OR SEVERE IN LEFT HAND?

- 0 NONE OR NO PAIN ACHING OR STIFFNESS IN HANDS
- 1 MILD
- 2 MODERATE
- 3 SEVERE
- 8 NOT APPLICABLE
- . UNKNOWN (107)

FO627 ARTHRITIS A - HANDS - IF YES (TO FO625), IS THE PAIN, ACHING OR STIFFNESS MILD, MODERATE OR SEVERE IN RIGHT HAND?

- 0 NONE OR NO PAIN ACHING OR STIFFNESS IN HANDS
- 1 MILD
- 2 MODERATE
- 3 SEVERE
- 8 NOT APPLICABLE
- . UNKNOWN (109)

FO628 ARTHRITIS A - HANDS - IN THE PAST MONTH HAVE YOU HAD ANY PAIN, ACHING OR STIFFNESS IN THE JOINTS OF YOUR HANDS OR WRISTS?

- 0 NO
- 1 YES, LEFT
- 2 YES, RIGHT
- 3 YES, BOTH
- . UNKNOWN (108)

ARTHRITIS HISTORY -- PART B

VARIABLE INFORMATION

FO629 ARTHRITIS B - BACK - HAVE YOU EVER HAD ANY BACK
PAINS OR ACHES THAT WERE PERSISTENT OR TROUBLESOME
TO YOU ANYTIME IN YOUR LIFE?

0 NO
1 YES
2 DON'T REMEMBER
. UNKNOWN (108)

FO630 ARTHRITIS B - BACK - IF YES (TO FO629), WAS YOUR
PAIN TROUBLESOME DURING CHILDHOOD?

0 NO OR NOT APPLICABLE
1 YES
2 DON'T REMEMBER
. UNKNOWN (124)

FO631 ARTHRITIS B - BACK - IF YES (TO FO629), WAS YOUR
PAIN TROUBLESOME DURING TEENAGE YEARS?

0 NO OR NOT APPLICABLE
1 YES
2 DON'T REMEMBER
. UNKNOWN (124)

FO632 ARTHRITIS B - BACK - IF YES (TO FO629), WAS YOUR
PAIN TROUBLESOME DURING AGES 20 TO < 40?

0 NO OR NOT APPLICABLE
1 YES
2 DON'T REMEMBER
. UNKNOWN (123)

FO633 ARTHRITIS B - BACK - IF YES (TO FO629), WAS YOUR
PAIN TROUBLESOME DURING AGES 40-65?

0 NO OR NOT APPLICABLE
1 YES
2 DON'T REMEMBER
. UNKNOWN (116)

FO634 ARTHRITIS B - BACK - IF YES (TO FO629), WAS YOUR

PAIN TROUBLESOME DURING AGES > 65?

0 NO OR NOT APPLICABLE

1 YES

2 DONT REMEMBER

. UNKNOWN (115)

- FO635 ARTHRITIS B - ON MOST DAYS DO YOU HAVE PAIN, ACHING
OR STIFFNESS IN YOUR BACK (EXCLUDING YOUR NECK)?
0 NO
1 YES, MILD
2 YES, MODERATE
3 YES, SEVERE
. UNKNOWN (113)
- FO636 ARTHRITIS B - DURING THE PAST YEAR HAVE YOU HAD AN
EPISODE OF PAIN, ACHING OR STIFFNESS IN YOUR BACK
(EXCLUDING YOUR NECK)? HOW LONG HAS IT LASTED?
0 NO
1 YES, LESS THAN 1 WEEK
2 YES, 1-4 WEEKS
3 YES, MORE THAN 4 WEEKS
. UNKNOWN (114)
- FO637 ARTHRITIS B - HAS A DOCTOR EVER TOLD YOU THAT YOU
HAD ANY OF THE FOLLOWING LISTED BELOW?
0 NO
1 YES
. UNKNOWN (102)
- FO638 ARTHRITIS B - HAS A DOCTOR EVER TOLD YOU THAT YOU
HAVE HAD OSTEOARTHRITIS (ALSO CALLED DEGENERATIVE
ARTHRITIS)?
0 NO OR NOT APPLICABLE
1 YES
. UNKNOWN (115)
- FO639 ARTHRITIS B - HAS A DOCTOR EVER TOLD YOU THAT YOU
HAVE HAD RHEUMATOID ARTHRITIS?
0 NO OR NOT APPLICABLE
1 YES
. UNKNOWN (124)
- FO640 ARTHRITIS B - HAS A DOCTOR EVER TOLD YOU THAT YOU
HAVE HAD ARTHRITIS (NOT SURE WHAT TYPE)?
0 NO OR NOT APPLICABLE
1 YES
. UNKNOWN (122)

FO641 ARTHRITIS B - HAS A DOCTOR EVER TOLD YOU THAT YOU
HAVE HAD GOUT
0 NO OR NOT APPLICABLE
1 YES
. UNKNOWN (124)

FO642 ARTHRITIS B - HAS A DOCTOR EVER TOLD YOU THAT YOU
HAVE HAD OTHER THAN LISTED ABOVE?

0 NO OR NOT APPLICABLE

1 YES

. UNKNOWN (137)

FO643 ARTHRITIS B - DO YOU TAKE MEDICATION DAILY FOR YOUR
JOINT PAIN, ACHING OR STIFFNESS?

0 NO

1 YES

. UNKNOWN (98)

FO644 ARTHRITIS B - IF YES (TO FO643), WHAT IS THE NAME
OF THE MEDICATION?

1 DRUG NAMED

2 DRUG NAME NOT KNOWN

8 NOT APPLICABLE

. UNKNOWN (105)

ARTHRITIS HISTORY -- PART C

VARIABLE INFORMATION

FO645 ARTHRITIS C - ON MOST DAYS, DO YOU HAVE PAIN, ACHING
OR STIFFNESS IN ANY OF YOUR JOINTS?

0 NO
1 YES
. UNKNOWN (108)

FO646 ARTHRITIS C - IF YES (TO FO645), PLEASE POINT TO THE
CIRCLE WHERE YOU HAVE PAIN, ACHING OR STIFFNESS ON
MOST DAYS (SHOW PICTURE): RIGHT SHOULDER

0 NO OR NO PAIN/ACHING/STIFFNESS IN ANY JOINTS
1 YES
8 NOT APPLICABLE
. UNKNOWN (112)

FO647 ARTHRITIS C - IF YES (TO FO645), PLEASE POINT TO THE
CIRCLE WHERE YOU HAVE PAIN, ACHING OR STIFFNESS ON
MOST DAYS (SHOW PICTURE): LEFT SHOULDER

0 NO OR NO PAIN/ACHING/STIFFNESS IN ANY JOINTS
1 YES
8 NOT APPLICABLE
. UNKNOWN (113)

FO648 ARTHRITIS C - IF YES (TO FO645), PLEASE POINT TO THE
CIRCLE WHERE YOU HAVE PAIN, ACHING OR STIFFNESS ON
MOST DAYS (SHOW PICTURE): NECK

0 NO OR NO PAIN/ACHING/STIFFNESS IN ANY JOINTS
1 YES
8 NOT APPLICABLE
. UNKNOWN (116)

FO649 ARTHRITIS C - IF YES (TO FO645), PLEASE POINT TO THE
CIRCLE WHERE YOU HAVE PAIN, ACHING OR STIFFNESS ON
MOST DAYS (SHOW PICTURE): RIGHT ELBOW

0 NO OR NO PAIN/ACHING/STIFFNESS IN ANY JOINTS
1 YES
8 NOT APPLICABLE
. UNKNOWN (112)

FO650 ARTHRITIS C - IF YES (TO FO645), PLEASE POINT TO THE
CIRCLE WHERE YOU HAVE PAIN, ACHING OR STIFFNESS ON
MOST DAYS (SHOW PICTURE): LEFT ELBOW
0 NO OR NO PAIN/ACHING/STIFFNESS IN ANY JOINTS
1 YES
8 NOT APPLICABLE
. UNKNOWN (115)

FO651 ARTHRITIS C - IF YES (TO FO645), PLEASE POINT TO THE
CIRCLE WHERE YOU HAVE PAIN, ACHING OR STIFFNESS ON
MOST DAYS (SHOW PICTURE): UPPER BACK
0 NO OR NO PAIN/ACHING/STIFFNESS IN ANY JOINTS
1 YES
8 NOT APPLICABLE
. UNKNOWN (118)

- FO652 ARTHRITIS C - IF YES (TO FO645), PLEASE POINT TO THE
CIRCLE WHERE YOU HAVE PAIN, ACHING OR STIFFNESS ON
MOST DAYS (SHOW PICTURE): RIGHT HIP
0 NO OR NO PAIN/ACHING/STIFFNESS IN ANY JOINTS
1 YES
8 NOT APPLICABLE
. UNKNOWN (112)
- FO653 ARTHRITIS C - IF YES (TO FO645), PLEASE POINT TO THE
CIRCLE WHERE YOU HAVE PAIN, ACHING OR STIFFNESS ON
MOST DAYS (SHOW PICTURE): LEFT HIP
0 NO OR NO PAIN/ACHING/STIFFNESS IN ANY JOINTS
1 YES
8 NOT APPLICABLE
. UNKNOWN (113)
- FO654 ARTHRITIS C - IF YES (TO FO645), PLEASE POINT TO THE
CIRCLE WHERE YOU HAVE PAIN, ACHING OR STIFFNESS ON
MOST DAYS (SHOW PICTURE): MID BACK
0 NO OR NO PAIN/ACHING/STIFFNESS IN ANY JOINTS
1 YES
8 NOT APPLICABLE
. UNKNOWN (121)
- FO655 ARTHRITIS C - IF YES (TO FO645), PLEASE POINT TO THE
CIRCLE WHERE YOU HAVE PAIN, ACHING OR STIFFNESS ON
MOST DAYS (SHOW PICTURE): RIGHT WRIST
0 NO OR NO PAIN/ACHING/STIFFNESS IN ANY JOINTS
1 YES
8 NOT APPLICABLE
. UNKNOWN (112)
- FO656 ARTHRITIS C - IF YES (TO FO645), PLEASE POINT TO THE
CIRCLE WHERE YOU HAVE PAIN, ACHING OR STIFFNESS ON
MOST DAYS (SHOW PICTURE): LEFT WRIST
0 NO OR NO PAIN/ACHING/STIFFNESS IN ANY JOINTS
1 YES
8 NOT APPLICABLE
. UNKNOWN (113)
- FO657 ARTHRITIS C - IF YES (TO FO645), PLEASE POINT TO THE
CIRCLE WHERE YOU HAVE PAIN, ACHING OR STIFFNESS ON

MOST DAYS (SHOW PICTURE): LOWER BACK

0 NO OR NO PAIN/ACHING/STIFFNESS IN ANY JOINTS

1 YES

8 NOT APPLICABLE

. UNKNOWN (118)

FO658

ARTHRITIS C - IF YES (TO FO645), PLEASE POINT TO THE
CIRCLE WHERE YOU HAVE PAIN, ACHING OR STIFFNESS ON

MOST DAYS (SHOW PICTURE): RIGHT KNEE

0 NO OR NO PAIN/ACHING/STIFFNESS IN ANY JOINTS

1 YES

8 NOT APPLICABLE

. UNKNOWN (111)

- FO659 ARTHRITIS C - IF YES (TO FO645), PLEASE POINT TO THE
CIRCLE WHERE YOU HAVE PAIN, ACHING OR STIFFNESS ON
MOST DAYS (SHOW PICTURE): LEFT KNEE
0 NO OR NO PAIN/ACHING/STIFFNESS IN ANY JOINTS
1 YES
8 NOT APPLICABLE
. UNKNOWN (112)
- FO660 ARTHRITIS C - IF YES (TO FO645), PLEASE POINT TO THE
CIRCLE WHERE YOU HAVE PAIN, ACHING OR STIFFNESS ON
MOST DAYS (SHOW PICTURE): RIGHT ANKLE
0 NO OR NO PAIN/ACHING/STIFFNESS IN ANY JOINTS
1 YES
8 NOT APPLICABLE
. UNKNOWN (112)
- FO661 ARTHRITIS C - IF YES (TO FO645), PLEASE POINT TO THE
CIRCLE WHERE YOU HAVE PAIN, ACHING OR STIFFNESS ON
MOST DAYS (SHOW PICTURE): LEFT ANKLE
0 NO OR NO PAIN/ACHING/STIFFNESS IN ANY JOINTS
1 YES
8 NOT APPLICABLE
. UNKNOWN (114)
- FO662 ARTHRITIS C - IF YES (TO FO645), PLEASE POINT TO THE
CIRCLE WHERE YOU HAVE PAIN, ACHING OR STIFFNESS ON
MOST DAYS (SHOW PICTURE): LEFT HAND PINKIE TOP
0 NO OR NO PAIN/ACHING/STIFFNESS IN ANY JOINTS
1 YES
8 NOT APPLICABLE
. UNKNOWN (114)
- FO663 ARTHRITIS C - IF YES (TO FO645), PLEASE POINT TO THE
CIRCLE WHERE YOU HAVE PAIN, ACHING OR STIFFNESS ON
MOST DAYS (SHOW PICTURE): LEFT HAND PINKIE MID
0 NO OR NO PAIN/ACHING/STIFFNESS IN ANY JOINTS
1 YES
8 NOT APPLICABLE
. UNKNOWN (115)
- FO664 ARTHRITIS C - IF YES (TO FO645), PLEASE POINT TO THE
CIRCLE WHERE YOU HAVE PAIN, ACHING OR STIFFNESS ON

MOST DAYS (SHOW PICTURE): LEFT HAND PINKIE KNUCKLE
0 NO OR NO PAIN/ACHING/STIFFNESS IN ANY JOINTS
1 YES
8 NOT APPLICABLE
. UNKNOWN (118)

FO665 ARTHRITIS C - IF YES (TO FO645), PLEASE POINT TO THE
CIRCLE WHERE YOU HAVE PAIN, ACHING OR STIFFNESS ON
MOST DAYS (SHOW PICTURE): RIGHT HAND PINKIE TOP
0 NO OR NO PAIN/ACHING/STIFFNESS IN ANY JOINTS
1 YES
8 NOT APPLICABLE
. UNKNOWN (116)

- FO666 ARTHRITIS C - IF YES (TO FO645), PLEASE POINT TO THE
CIRCLE WHERE YOU HAVE PAIN, ACHING OR STIFFNESS ON
MOST DAYS (SHOW PICTURE): RIGHT HAND PINKIE MID
0 NO OR NO PAIN/ACHING/STIFFNESS IN ANY JOINTS
1 YES
8 NOT APPLICABLE
. UNKNOWN (117)
- FO667 ARTHRITIS C - IF YES (TO FO645), PLEASE POINT TO THE
CIRCLE WHERE YOU HAVE PAIN, ACHING OR STIFFNESS ON
MOST DAYS (SHOW PICTURE): RIGHT HAND PINKIE KNUCKLE
0 NO OR NO PAIN/ACHING/STIFFNESS IN ANY JOINTS
1 YES
8 NOT APPLICABLE
. UNKNOWN (120)
- FO668 ARTHRITIS C - IF YES (TO FO645), PLEASE POINT TO THE
CIRCLE WHERE YOU HAVE PAIN, ACHING OR STIFFNESS ON
MOST DAYS (SHOW PICTURE): LEFT HAND RING TOP
0 NO OR NO PAIN/ACHING/STIFFNESS IN ANY JOINTS
1 YES
8 NOT APPLICABLE
. UNKNOWN (115)
- FO669 ARTHRITIS C - IF YES (TO FO645), PLEASE POINT TO THE
CIRCLE WHERE YOU HAVE PAIN, ACHING OR STIFFNESS ON
MOST DAYS (SHOW PICTURE): LEFT HAND RING MID
0 NO OR NO PAIN/ACHING/STIFFNESS IN ANY JOINTS
1 YES
8 NOT APPLICABLE
. UNKNOWN (114)
- FO670 ARTHRITIS C - IF YES (TO FO645), PLEASE POINT TO THE
CIRCLE WHERE YOU HAVE PAIN, ACHING OR STIFFNESS ON
MOST DAYS (SHOW PICTURE): LEFT HAND RING KNUCKLE
0 NO OR NO PAIN/ACHING/STIFFNESS IN ANY JOINTS
1 YES
8 NOT APPLICABLE
. UNKNOWN (117)
- FO671 ARTHRITIS C - IF YES (TO FO645), PLEASE POINT TO THE
CIRCLE WHERE YOU HAVE PAIN, ACHING OR STIFFNESS ON

MOST DAYS (SHOW PICTURE): RIGHT HAND RING TOP
0 NO OR NO PAIN/ACHING/STIFFNESS IN ANY JOINTS
1 YES
8 NOT APPLICABLE
. UNKNOWN (116)

FO672 ARTHRITIS C - IF YES (TO FO645), PLEASE POINT TO THE
CIRCLE WHERE YOU HAVE PAIN, ACHING OR STIFFNESS ON
MOST DAYS (SHOW PICTURE): RIGHT HAND RING MID
0 NO OR NO PAIN/ACHING/STIFFNESS IN ANY JOINTS
1 YES
8 NOT APPLICABLE

. UNKNOWN (118)

FO673 ARTHRITIS C - IF YES (TO FO645), PLEASE POINT TO THE CIRCLE WHERE YOU HAVE PAIN, ACHING OR STIFFNESS ON MOST DAYS (SHOW PICTURE): RIGHT HAND RING KNUCKLE
0 NO OR NO PAIN/ACHING/STIFFNESS IN ANY JOINTS
1 YES
8 NOT APPLICABLE
. UNKNOWN (120)

FO674 ARTHRITIS C - IF YES (TO FO645), PLEASE POINT TO THE CIRCLE WHERE YOU HAVE PAIN, ACHING OR STIFFNESS ON MOST DAYS (SHOW PICTURE): LEFT HAND MIDDLE TOP
0 NO OR NO PAIN/ACHING/STIFFNESS IN ANY JOINTS
1 YES
8 NOT APPLICABLE
. UNKNOWN (113)

FO675 ARTHRITIS C - IF YES (TO FO645), PLEASE POINT TO THE CIRCLE WHERE YOU HAVE PAIN, ACHING OR STIFFNESS ON MOST DAYS (SHOW PICTURE): LEFT HAND MIDDLE MID
0 NO OR NO PAIN/ACHING/STIFFNESS IN ANY JOINTS
1 YES
8 NOT APPLICABLE
. UNKNOWN (114)

FO676 ARTHRITIS C - IF YES (TO FO645), PLEASE POINT TO THE CIRCLE WHERE YOU HAVE PAIN, ACHING OR STIFFNESS ON MOST DAYS (SHOW PICTURE): LEFT HAND MIDDLE KNUCKLE
0 NO OR NO PAIN/ACHING/STIFFNESS IN ANY JOINTS
1 YES
8 NOT APPLICABLE
. UNKNOWN (116)

FO677 ARTHRITIS C - IF YES (TO FO645), PLEASE POINT TO THE CIRCLE WHERE YOU HAVE PAIN, ACHING OR STIFFNESS ON MOST DAYS (SHOW PICTURE): RIGHT HAND MIDDLE TOP
0 NO OR NO PAIN/ACHING/STIFFNESS IN ANY JOINTS
1 YES
8 NOT APPLICABLE
. UNKNOWN (116)

FO678 ARTHRITIS C - IF YES (TO FO645), PLEASE POINT TO THE

CIRCLE WHERE YOU HAVE PAIN, ACHING OR STIFFNESS ON
MOST DAYS (SHOW PICTURE): RIGHT HAND MIDDLE MID

0 NO OR NO PAIN/ACHING/STIFFNESS IN ANY JOINTS

1 YES

8 NOT APPLICABLE

. UNKNOWN (117)

- FO679 ARTHRITIS C - IF YES (TO FO645), PLEASE POINT TO THE
CIRCLE WHERE YOU HAVE PAIN, ACHING OR STIFFNESS ON
MOST DAYS (SHOW PICTURE): RIGHT HAND MIDDLE KNUCKLE
0 NO OR NO PAIN/ACHING/STIFFNESS IN ANY JOINTS
1 YES
8 NOT APPLICABLE
. UNKNOWN (119)
- FO680 ARTHRITIS C - IF YES (TO FO645), PLEASE POINT TO THE
CIRCLE WHERE YOU HAVE PAIN, ACHING OR STIFFNESS ON
MOST DAYS (SHOW PICTURE): LEFT HAND INDEX TOP
0 NO OR NO PAIN/ACHING/STIFFNESS IN ANY JOINTS
1 YES
8 NOT APPLICABLE
. UNKNOWN (114)
- FO681 ARTHRITIS C - IF YES (TO FO645), PLEASE POINT TO THE
CIRCLE WHERE YOU HAVE PAIN, ACHING OR STIFFNESS ON
MOST DAYS (SHOW PICTURE): LEFT HAND INDEX MID
0 NO OR NO PAIN/ACHING/STIFFNESS IN ANY JOINTS
1 YES
8 NOT APPLICABLE
. UNKNOWN (116)
- FO682 ARTHRITIS C - IF YES (TO FO645), PLEASE POINT TO THE
CIRCLE WHERE YOU HAVE PAIN, ACHING OR STIFFNESS ON
MOST DAYS (SHOW PICTURE): LEFT HAND INDEX KNUCKLE
0 NO OR NO PAIN/ACHING/STIFFNESS IN ANY JOINTS
1 YES
8 NOT APPLICABLE
. UNKNOWN (116)
- FO683 ARTHRITIS C - IF YES (TO FO645), PLEASE POINT TO THE
CIRCLE WHERE YOU HAVE PAIN, ACHING OR STIFFNESS ON
MOST DAYS (SHOW PICTURE): RIGHT HAND INDEX TOP
0 NO OR NO PAIN/ACHING/STIFFNESS IN ANY JOINTS
1 YES
8 NOT APPLICABLE
. UNKNOWN (115)
- FO684 ARTHRITIS C - IF YES (TO FO645), PLEASE POINT TO THE
CIRCLE WHERE YOU HAVE PAIN, ACHING OR STIFFNESS ON

MOST DAYS (SHOW PICTURE): RIGHT HAND INDEX MID
0 NO OR NO PAIN/ACHING/STIFFNESS IN ANY JOINTS
1 YES
8 NOT APPLICABLE
. UNKNOWN (117)

FO685 ARTHRITIS C - IF YES (TO FO645), PLEASE POINT TO THE
CIRCLE WHERE YOU HAVE PAIN, ACHING OR STIFFNESS ON
MOST DAYS (SHOW PICTURE): RIGHT HAND INDEX KNUCKLE
0 NO OR NO PAIN/ACHING/STIFFNESS IN ANY JOINTS
1 YES
8 NOT APPLICABLE
. UNKNOWN (121)

FO686 ARTHRITIS C - IF YES (TO FO645), PLEASE POINT TO THE
CIRCLE WHERE YOU HAVE PAIN, ACHING OR STIFFNESS ON
MOST DAYS (SHOW PICTURE): LEFT HAND THUMB TOP
0 NO OR NO PAIN/ACHING/STIFFNESS IN ANY JOINTS
1 YES
8 NOT APPLICABLE
. UNKNOWN (113)

FO687 ARTHRITIS C - IF YES (TO FO645), PLEASE POINT TO THE
CIRCLE WHERE YOU HAVE PAIN, ACHING OR STIFFNESS ON
MOST DAYS (SHOW PICTURE): LEFT HAND THUMB MID
0 NO OR NO PAIN/ACHING/STIFFNESS IN ANY JOINTS
1 YES
8 NOT APPLICABLE
. UNKNOWN (115)

FO688 ARTHRITIS C - IF YES (TO FO645), PLEASE POINT TO THE
CIRCLE WHERE YOU HAVE PAIN, ACHING OR STIFFNESS ON
MOST DAYS (SHOW PICTURE): LEFT HAND THUMB KNUCKLE
0 NO OR NO PAIN/ACHING/STIFFNESS IN ANY JOINTS
1 YES
8 NOT APPLICABLE
. UNKNOWN (118)

FO689 ARTHRITIS C - IF YES (TO FO645), PLEASE POINT TO THE
CIRCLE WHERE YOU HAVE PAIN, ACHING OR STIFFNESS ON
MOST DAYS (SHOW PICTURE): RIGHT HAND THUMB TOP
0 NO OR NO PAIN/ACHING/STIFFNESS IN ANY JOINTS
1 YES
8 NOT APPLICABLE
. UNKNOWN (117)

FO690 ARTHRITIS C - IF YES (TO FO645), PLEASE POINT TO THE
CIRCLE WHERE YOU HAVE PAIN, ACHING OR STIFFNESS ON
MOST DAYS (SHOW PICTURE): RIGHT HAND THUMB MID
0 NO OR NO PAIN/ACHING/STIFFNESS IN ANY JOINTS
1 YES
8 NOT APPLICABLE
. UNKNOWN (119)

FO691 ARTHRITIS C - IF YES (TO FO645), PLEASE POINT TO THE
CIRCLE WHERE YOU HAVE PAIN, ACHING OR STIFFNESS ON

MOST DAYS (SHOW PICTURE): RIGHT HAND THUMB KNUCKLE
0 NO OR NO PAIN/ACHING/STIFFNESS IN ANY JOINTS
1 YES
8 NOT APPLICABLE
. UNKNOWN (122)

FO692 ARTHRITIS C - IF YES (TO FO645), PLEASE POINT TO THE
CIRCLE WHERE YOU HAVE PAIN, ACHING OR STIFFNESS ON
MOST DAYS (SHOW PICTURE): LEFT TOE 5
0 NO OR NO PAIN/ACHING/STIFFNESS IN ANY JOINTS
1 YES
8 NOT APPLICABLE
. UNKNOWN (113)

- FO693 ARTHRITIS C - IF YES (TO FO645), PLEASE POINT TO THE
CIRCLE WHERE YOU HAVE PAIN, ACHING OR STIFFNESS ON
MOST DAYS (SHOW PICTURE): RIGHT TOE 5
0 NO OR NO PAIN/ACHING/STIFFNESS IN ANY JOINTS
1 YES
8 NOT APPLICABLE
. UNKNOWN (114)
- FO694 ARTHRITIS C - IF YES (TO FO645), PLEASE POINT TO THE
CIRCLE WHERE YOU HAVE PAIN, ACHING OR STIFFNESS ON
MOST DAYS (SHOW PICTURE): LEFT TOE 4
0 NO OR NO PAIN/ACHING/STIFFNESS IN ANY JOINTS
1 YES
8 NOT APPLICABLE
. UNKNOWN (114)
- FO695 ARTHRITIS C - IF YES (TO FO645), PLEASE POINT TO THE
CIRCLE WHERE YOU HAVE PAIN, ACHING OR STIFFNESS ON
MOST DAYS (SHOW PICTURE): RIGHT TOE 4
0 NO OR NO PAIN/ACHING/STIFFNESS IN ANY JOINTS
1 YES
8 NOT APPLICABLE
. UNKNOWN (115)
- FO696 ARTHRITIS C - IF YES (TO FO645), PLEASE POINT TO THE
CIRCLE WHERE YOU HAVE PAIN, ACHING OR STIFFNESS ON
MOST DAYS (SHOW PICTURE): LEFT TOE 3
0 NO OR NO PAIN/ACHING/STIFFNESS IN ANY JOINTS
1 YES
8 NOT APPLICABLE
. UNKNOWN (113)
- FO697 ARTHRITIS C - IF YES (TO FO645), PLEASE POINT TO THE
CIRCLE WHERE YOU HAVE PAIN, ACHING OR STIFFNESS ON
MOST DAYS (SHOW PICTURE): RIGHT TOE 3
0 NO OR NO PAIN/ACHING/STIFFNESS IN ANY JOINTS
1 YES
8 NOT APPLICABLE
. UNKNOWN (114)
- FO698 ARTHRITIS C - IF YES (TO FO645), PLEASE POINT TO THE
CIRCLE WHERE YOU HAVE PAIN, ACHING OR STIFFNESS ON

MOST DAYS (SHOW PICTURE): LEFT TOE 2

0 NO OR NO PAIN/ACHING/STIFFNESS IN ANY JOINTS

1 YES

8 NOT APPLICABLE

. UNKNOWN (113)

FO699

ARTHRITIS C - IF YES (TO FO645), PLEASE POINT TO THE
CIRCLE WHERE YOU HAVE PAIN, ACHING OR STIFFNESS ON

MOST DAYS (SHOW PICTURE): RIGHT TOE 2

0 NO OR NO PAIN/ACHING/STIFFNESS IN ANY JOINTS

1 YES

8 NOT APPLICABLE

. UNKNOWN (114)

FO700 ARTHRITIS C - IF YES (TO FO645), PLEASE POINT TO THE
CIRCLE WHERE YOU HAVE PAIN, ACHING OR STIFFNESS ON
MOST DAYS (SHOW PICTURE): LEFT BIG TOE

0 NO OR NO PAIN/ACHING/STIFFNESS IN ANY JOINTS

1 YES

8 NOT APPLICABLE

. UNKNOWN (113)

FO701 ARTHRITIS C - IF YES (TO FO645), PLEASE POINT TO THE
CIRCLE WHERE YOU HAVE PAIN, ACHING OR STIFFNESS ON
MOST DAYS (SHOW PICTURE): RIGHT BIG TOE

0 NO OR NO PAIN/ACHING/STIFFNESS IN ANY JOINTS

1 YES

8 NOT APPLICABLE

. UNKNOWN (115)

OSTEOARTHRITIS -- PHYSICAL EXAM

VARIABLE INFORMATION

FO702 OSTEOARTHRITIS - RIGHT HAND PINKIE DIP
 0 NORMAL
 1 BONY ENLARGEMENT
 . UNKNOWN (113)

FO703 OSTEOARTHRITIS - RIGHT HAND PINKIE PIP
 0 NORMAL
 1 BONY ENLARGEMENT
 . UNKNOWN (127)

FO704 OSTEOARTHRITIS - LEFT HAND PINKIE DIP
 0 NORMAL
 1 BONY ENLARGEMENT
 . UNKNOWN (114)

FO705 OSTEOARTHRITIS - LEFT HAND PINKIE PIP
 0 NORMAL
 1 BONY ENLARGEMENT
 . UNKNOWN (126)

FO706 OSTEOARTHRITIS - RIGHT HAND RING DIP
 0 NORMAL
 1 BONY ENLARGEMENT
 . UNKNOWN (112)

FO707 OSTEOARTHRITIS - RIGHT HAND RING PIP
 0 NORMAL
 1 BONY ENLARGEMENT
 . UNKNOWN (121)

FO708 OSTEOARTHRITIS - LEFT HAND RING DIP
 0 NORMAL
 1 BONY ENLARGEMENT
 . UNKNOWN (112)

FO709 OSTEOARTHRITIS - LEFT HAND RING PIP
 0 NORMAL

1 BONY ENLARGEMENT
. UNKNOWN (120)

FO710 OSTEOARTHRITIS - RIGHT HAND MIDDLE DIP
0 NORMAL
1 BONY ENLARGEMENT
. UNKNOWN (110)

FO711 OSTEOARTHRITIS - RIGHT HAND MIDDLE PIP
0 NORMAL
1 BONY ENLARGEMENT
. UNKNOWN (117)

FO712 OSTEOARTHRITIS - LEFT HAND MIDDLE DIP
 0 NORMAL
 1 BONY ENLARGEMENT
 . UNKNOWN (114)

FO713 OSTEOARTHRITIS - LEFT HAND MIDDLE PIP
 0 NORMAL
 1 BONY ENLARGEMENT
 . UNKNOWN (118)

FO714 OSTEOARTHRITIS - RIGHT HAND INDEX DIP
 0 NORMAL
 1 BONY ENLARGEMENT
 . UNKNOWN (111)

FO715 OSTEOARTHRITIS - RIGHT HAND INDEX PIP
 0 NORMAL
 1 BONY ENLARGEMENT
 . UNKNOWN (122)

FO716 OSTEOARTHRITIS - LEFT HAND INDEX DIP
 0 NORMAL
 1 BONY ENLARGEMENT
 . UNKNOWN (111)

FO717 OSTEOARTHRITIS - LEFT HAND INDEX PIP
 0 NORMAL
 1 BONY ENLARGEMENT
 . UNKNOWN (120)

FO718 OSTEOARTHRITIS - RIGHT HAND THUMB IP
 0 NORMAL
 1 BONY ENLARGEMENT
 . UNKNOWN (110)

FO719 OSTEOARTHRITIS - RIGHT HAND THUMB CMC
 0 NORMAL
 1 BONY ENLARGEMENT
 . UNKNOWN (118)

FO720 OSTEOARTHRITIS - LEFT HAND THUMB IP
 0 NORMAL

1 BONY ENLARGEMENT
. UNKNOWN (120)

FO721 OSTEOARTHRITIS - LEFT HAND THUMB CMC
0 NORMAL
1 BONY ENLARGEMENT
. UNKNOWN (133)

FO722 OSTEOARTHRITIS - CREPITUS CODE LEFT KNEE
0 ABSENT
1 MODERATE
2 SEVERE
. UNKNOWN (211)

- FO723 OSTEOARTHRITIS - CREPITUS CODE RIGHT KNEE
0 ABSENT
1 MODERATE
2 SEVERE
. UNKNOWN (209)
- FO724 OSTEOARTHRITIS - X-RAY QUALITY QUESTIONS
DID YOU HAVE A KNEE REPLACEMENT?
0 NO
1 YES, RIGHT
2 YES, LEFT
3 YES BOTH
. UNKNOWN (140)
- FO725 OSTEOARTHRITIS - X-RAY QUALITY QUESTIONS
DID YOU HAVE A HIP REPLACEMENT?
0 NO
1 YES, RIGHT
2 YES, LEFT
3 YES BOTH
. UNKNOWN (137)

LAB VARIABLES

VARIABLE INFORMATION

FO731 BLOOD ANALYSIS - TOTAL CHOLESTEROL
 82 - 383
 . UNKNOWN (249)

FO732 BLOOD ANALYSIS - HDL CHOLESTEROL
 19 - 145
 . UNKNOWN (253)

FO733 BLOOD ANALYSIS - GLUCOSE (NON-FASTING)
 65 - 464
 . UNKNOWN (234)

FO734 BLOOD ANALYSIS - FIBRINOGEN
 172 - 728
 . UNKNOWN (256)