COHORT EXAM 26

CODING MANUAL

SAS NAME = EXAM26

SAS VARIABLE NAMES =

IDTYPE ID SEX AGE26 FS001-FS222 FS223A FS223-FS541

CODING MANUAL - COHORT EXAM 26 FRAMINGHAM STUDY

RECORDS: 558

NUMERICAL DATA - PART I

VARIABLE INFORMATION

IDTYPE STUDY

0 ORIGINAL COHORT

ID PARTICIPANT ID NUMBER

12 - 6441

. UNKNOWN (0)

SEX SEX OF PARTICIPANT

1 MALE

2 FEMALE

. UNKNOWN (0)

AGE OF PARTICIPANT (CALCULATED FROM EXAM DATE AND DOB)

79 - 103

. UNKNOWN (0)

FS001 SITE OF EXAM

0 HEART STUDY

1 NURSING HOME

2 RESIDENCE

3 OTHER

. UNKNOWN (0)

FS002 LEVEL OF CARE

0 NONE

1 SKILLED CARE 24 HOURS

2 SKILLED CARE 8-16 HOURS

3 SELF CARE

. UNKNOWN (19)

FS003 MARITAL STATUS

1 SINGLE

2 MARRIED

3 WIDOWED

4 DIVORCED

5 SEPARATED

. UNKNOWN (3)

FS004 EXAMINER'S NUMBER FOR HEIGHT AND WEIGHT

19 - 601

. UNKNOWN (0)

FS005 WEIGHT (TO NEAREST POUND)

73 - 248

. UNKNOWN (22)

FS006 METHOD USED TO OBTAIN WEIGHT

0 FRAMINGHAM STUDY FIELD VISIT

1 RECORDED FROM NURSING HOME CHART

2 OTHER

. UNKNOWN (354)

| FS007 | DATE WEIGHT WAS OBTAINED 2/15/00 - 11/27/01 . UNKNOWN (370) |
|-------------------|--|
| FS008 | HEIGHT (INCHES, TO NEXT LOWER 1/4 INCH)* 54.0 - 73.75 . UNKNOWN (232) *THIS VARIABLE WAS NOT COLLECTED FOR OFFSITE EXAMS (FS001 = 1, 2, OR 3) |
| FS009 | PROXY USED TO COMPLETE THIS EXAM 0 NO 1 YES . UNKNOWN (0) |
| FS010 | PROXY: RELATIONSHIP OF PROXY TO PARTICIPANT 0 NO PROXY USED TO COMPLETE EXAM 1 1ST DEGREE RELATIVE (SPOUSE, CHILD) 2 OTHER RELATIVE 3 FRIEND 4 HEALTH CARE PROFESSIONAL 5 OTHER . UNKNOWN (1) |
| FS011 | PROXY: HOW LONG HAVE YOU KNOWN THE PARTICIPANT? (YEARS) 0 ZERO YEARS OR NO PROXY USED TO COMPLETE EXAM 1 - 71 . UNKNOWN (1) |
| FS012 (MONTHS) | PROXY: HOW LONG HAVE YOU KNOWN THE PARTICIPANT? 0 ZERO MONTHS OR NO PROXY USED TO COMPLETE EXAM 1 - 11 . UNKNOWN (1) |
| FS013 WITH THE | PROXY: ARE YOU CURRENTLY LIVING IN THE SAME HOUSEHOLD PARTICIPANT? 0 NO OR NO PROXY USED TO COMPLETE EXAM 1 YES . UNKNOWN (1) |
| FS014 | PROXY: HOW OFTEN DID YOU TALK TO THE PARTICIPANT DURING |

THE PRIOR 11 MONTHS?

0 NO PROXY USED TO COMPLETE EXAM

- 1 ALMOST EVERY DAY
- 2 SEVERAL TIMES A WEEK
- 3 ONCE A WEEK
- 4 1 TO 3 TIMES PER MONTH
- 5 LESS THAN ONCE A MONTH
- . UNKNOWN (1)

FS015 SYSTOLIC BLOOD PRESSURE - TECHNICIAN*

(TO NEAREST 2MM HG)

80 - 212

. UNKNOWN (232)

*THIS VARIABLE WAS NOT COLLECTED FOR OFFSITE EXAMS (FS001 = 1, 2, OR 3)

FS016 DIASTOLIC BLOOD PRESSURE - TECHNICIAN*

(TO NEAREST 2MM HG)

40 - 110

. UNKNOWN (235)

*THIS VARIABLE WAS NOT COLLECTED FOR OFFSITE EXAMS (FS001 = 1, 2, OR 3)

FS017 TECHNICIAN'S BLOOD PRESSURE ID*

31 - 601

. UNKNOWN (232)

*THIS VARIABLE WAS NOT COLLECTED FOR OFFSITE EXAMS (FS001 = 1, 2, OR 3)

FS018 PROCEDURES DONE: ECG DONE

0 NO

1 YES

. UNKNOWN (0)

FS019 PROCEDURES DONE: BLOOD DRAWN*

0 NO

1 YES

. UNKNOWN (558)

*DO NOT USE, SEE DATA FOR COUNTS

FS020 PROCEDURES DONE: TONOMETRY DONE*

0 NO

1 YES

. UNKNOWN (558)

*DO NOT USE, SEE DATA FOR COUNTS

FS021 PROCEDURES DONE: OBSERVED PHYSICAL PERFORMANCE MEASURE

WILASUKL

0 NO

1 YES

. UNKNOWN (558)

*DO NOT USE, SEE DATA FOR COUNTS

COGNITIVE FUNCTION - PART I

VARIABLE INFORMATION

FS022 EXAMINER'S NUMBER FOR COGNITIVE FUNCTION PART I

31 - 601

. UNKNOWN (2)

FS023 MMSE: WHAT IS THE DATE TODAY? (MONTH, DAY, YEAR)

(SCORE 1 POINT FOR EACH CORRECT ANSWER)

0 NONE CORRECT

1 1 OF 3 CORRECT

2 2 OF 3 CORRECT

3 3 OF 3 CORRECT

6 NO TRY

. UNKNOWN (7)

FS024 MMSE: WHAT IS THE SEASON?

(SCORE 1 POINT FOR EACH CORRECT ANSWER)

0 INCORRECT

1 CORRECT

6 NO TRY

. UNKNOWN (7)

FS025 MMSE: WHAT DAY OF THE WEEK IS IT?

(SCORE 1 POINT FOR EACH CORRECT ANSWER)

0 INCORRECT

1 CORRECT

6 NO TRY

. UNKNOWN (7)

FS026 MMSE: WHAT TOWN, COUNTY, AND STATE ARE WE IN?

(SCORE 1 POINT FOR EACH CORRECT ANSWER)

0 NONE CORRECT

1 1 OF 3 CORRECT

2 2 OF 3 CORRECT

3 3 OF 3 CORRECT

6 NO TRY

. UNKNOWN (7)

FS027 MMSE: WHAT IS THE NAME OF THIS PLACE?

(SCORE 1 POINT FOR EACH CORRECT ANSWER)

(ANY APPROPRIATE ANSWER ALL RIGHT, FOR INSTANCE MY HOME,

STREET ADDRESS, HEART STUDY ... MAX SCORE = 1)

- 0 INCORRECT
- 1 CORRECT
- 6 NO TRY
- . UNKNOWN (7)

FS028 MMSE: WHAT FLOOR OF THE BUILDING ARE WE ON? (SCORE 1 POINT FOR EACH CORRECT ANSWER)

- 0 INCORRECT
- 1 CORRECT
- 6 NO TRY
- . UNKNOWN (7)

FS029 MMSE: I AM GOING TO NAME 3 OBJECTS. AFTER I HAVE SAID THEM I WANT YOU TO REPEAT THEM BACK TO ME. REMEMBER

WHAT

THEY ARE BECAUSE I WILL ASK YOU TO NAME THEM AGAIN IN A

FEW

MINUTES: APPLE, TABLE, PENNY (SCORE 1 POINT FOR EACH CORRECT ANSWER)

0 NONE CORRECT

1 1 OF 3 CORRECT

2 2 OF 3 CORRECT

3 3 OF 3 CORRECT

6 NO TRY

. UNKNOWN (7)

FS030 YOU MMSE: NOW I AM GOING TO SPELL A WORD FORWARD AND I WANT

TO SPELL IT BACKWARDS. THE WORD IS WORLD. W-O-R-L-D.

PLEASE SPELL IT IN REVERSE ORDER.

WRITE IN LETTERS (LETTERS ARE ENTERED AND SCORED LATER)

XXXXX CHARACTER VARIABLE

66666 NO TRY

EMPTY CHARACTER FIELD INDICATES UNKNOWN VALUE (14)

FS031 FEW MMSE: WHAT ARE THE 3 OBJECTS I ASKED YOU TO REMEMBER A

MOMENTS AGO:

(SCORE 1 POINT FOR EACH CORRECT ANSWER)

0 NONE CORRECT

1 1 OF 3 CORRECT

2 2 OF 3 CORRECT

3 3 OF 3 CORRECT

6 NO TRY

. UNKNOWN (8)

COGNITIVE FUNCTION - PART II

VARIABLE INFORMATION

FS032 EXAMINER'S NUMBER FOR COGNITIVE FUNCTION PART II

31 - 601

. UNKNOWN (3)

FS033 MMSE: WHAT IS THIS CALLED? (WATCH)

(SCORE 1 POINT FOR EACH CORRECT ANSWER)

0 INCORRECT

1 CORRECT

6 NO TRY

. UNKNOWN (8)

FS034 MMSE: WHAT IS THIS CALLED? (PENCIL)

(SCORE 1 POINT FOR EACH CORRECT ANSWER)

0 INCORRECT

1 CORRECT

6 NO TRY

. UNKNOWN (8)

FS035 MMSE: PLEASE REPEAT THE FOLLOWING: "NO IFS, ANDS, OR BUTS"

(SCORE 1 POINT FOR EACH CORRECT ANSWER)

0 INCORRECT

1 PERFECT

6 NO TRY

. UNKNOWN (9)

FS036 MMSE: PLEASE READ THE FOLLOWING AND DO WHAT IT SAYS

(SCORE 1 POINT FOR EACH CORRECT ANSWER)

(PERFORMED = 1, CODE 6 IF LOW VISION)

0 INCORRECT

1 PERFORMED

6 NO TRY/LOW VISION

. UNKNOWN (9)

FS037 MMSE: PLEASE WRITE A SENTENCE

(SCORE 1 POINT FOR EACH CORRECT ANSWER)

(CODE 6 IF LOW VISION)

0 INCORRECT

1 PERFORMED

6 NO TRY/LOW VISION

. UNKNOWN (8)

FS038 MMSE: PLEASE COPY THIS DRAWING (SCORE 1 POINT FOR EACH CORRECT ANSWER) (CODE 6 IF LOW VISION)

- 0 INCORRECT
- 1 CORRECT
- 6 NO TRY/LOW VISION
- . UNKNOWN (8)

FS039 MMSE: TAKE THIS PIECE OF PAPER IN RIGHT HAND, FOLD IN HALF WITH BOTH HANDS, AND PUT IN LAP. (SCORE 1 POINT FOR EACH CORRECTLY PERFORMED ACT, CODE 6 IF LOW VISION) 0 NONE CORRECT 1 1 OF 3 CORRECT 2 2 OF 3 CORRECT 3 3 OF 3 CORRECT 6 NO TRY/LOW VISION . UNKNOWN (10) FS040 MMSE: ILLITERACY OR LOW EDUCATION (FACTORS POTENTIALLY AFFECTING MENTAL STATUS) 0 NO1 YES 2 MAYBE . UNKNOWN (8) FS041 MMSE: NOT FLUENT IN ENGLISH (FACTORS POTENTIALLY AFFECTING MENTAL STATUS) 0 NO 1 YES 2 MAYBE . UNKNOWN (7) FS042 MMSE: POOR EYESIGHT (FACTORS POTENTIALLY AFFECTING MENTAL STATUS) 0 NO 1 YES 2 MAYBE . UNKNOWN (5) FS043 **MMSE: POOR HEARING** (FACTORS POTENTIALLY AFFECTING MENTAL STATUS) 0 NO 1 YES 2 MAYBE . UNKNOWN (6) FS044 **MMSE: DEPRESSION** (FACTORS POTENTIALLY AFFECTING MENTAL STATUS) 0 NO

> 1 YES 2 MAYBE

. UNKNOWN (7)

FS045 MMSE: APHASIA

(FACTORS POTENTIALLY AFFECTING MENTAL STATUS)

- 0 NO
- 1 YES
- 2 MAYBE
- . UNKNOWN (7)

FS046 MMSE: COMA

(FACTORS POTENTIALLY AFFECTING MENTAL STATUS)

- 0 NO
- 1 YES
- 2 MAYBE
- . UNKNOWN (7)

FS047 MMSE: PARKINSONISM

(FACTORS POTENTIALLY AFFECTING MENTAL STATUS)

- 0 NO
- 1 YES
- 2 MAYBE
- . UNKNOWN (7)

FS048 MMSE: OTHER (OTHER THAN THOSE LISTED ABOVE) (FACTORS POTENTIALLY AFFECTING MENTAL STATUS)

- 0 NO
- 1 YES
- 2 MAYBE
- . UNKNOWN (6)

FS049 EXAMINER'S NUMBER FOR SOCIO-DEMOGRAPHICS

31 - 601

. UNKNOWN (3)

FS050 WHERE DO YOU LIVE?

- 0 PRIVATE RESIDENCE
- 1 NURSING HOME
- 2 OTHER FACILITY (RETIREMENT COMMUNITY, ASSISTED LIVING FACILITY)
- . UNKNOWN (6)

FS051 DOES ANYONE LIVE WITH YOU?

CODE NURSING HOME RESIDENTS AS NO TO THESE QUESTIONS (FS051-FS057)

- 0 NO
- 1 YES
- . UNKNOWN (5)

FS052 DO YOU LIVE WITH SPOUSE?

CODE NURSING HOME RESIDENTS AS NO TO THESE QUESTIONS (FS051-FS057)

- 0 NO
- 1 YES, LESS THAN 3 MONTHS PER YEAR
- 2 YES, MORE THAN 3 MONTHS PER YEAR

. UNKNOWN (6)

FS053 DO YOU LIVE WITH SIGNIFICANT OTHER?

CODE NURSING HOME RESIDENTS AS NO TO THESE QUESTIONS
(FS051-FS057)

- 0 NO
- 1 YES, LESS THAN 3 MONTHS PER YEAR
- 2 YES, MORE THAN 3 MONTHS PER YEAR
- . UNKNOWN (5)

FS054 DO YOU LIVE WITH CHILDREN?

CODE NURSING HOME RESIDENTS AS NO TO THESE QUESTIONS (FS051-FS057)

- 0 NO
- 1 YES, LESS THAN 3 MONTHS PER YEAR
- 2 YES, MORE THAN 3 MONTHS PER YEAR
- . UNKNOWN (5)

FS055 DO YOU LIVE WITH FRIENDS?

CODE NURSING HOME RESIDENTS AS NO TO THESE QUESTIONS (FS051-FS057)

- 0 NO
- 1 YES, LESS THAN 3 MONTHS PER YEAR
- 2 YES, MORE THAN 3 MONTHS PER YEAR
- . UNKNOWN (6)

FS056 DO YOU LIVE WITH RELATIVES?

CODE NURSING HOME RESIDENTS AS NO TO THESE QUESTIONS (FS051-FS057)

- 0 NO
- 1 YES, LESS THAN 3 MONTHS PER YEAR
- 2 YES, MORE THAN 3 MONTHS PER YEAR
- . UNKNOWN (5)

FS057 DO YOU LIVE WITH PETS?

CODE NURSING HOME RESIDENTS AS NO TO THESE QUESTIONS (FS051-FS057)

- 0 NO
- 1 YES, LESS THAN 3 MONTHS PER YEAR
- 2 YES, MORE THAN 3 MONTHS PER YEAR
- . UNKNOWN (5)

FS058 ARE YOU CURRENTLY WORKING AT A PAYING JOB?

- 0 NO
- 1 YES, FULL TIME (>= 32 HOURS)
- 2 YES, PART TIME (< 32 HOURS)
- . UNKNOWN (5)

FS059 DO YOU CURRENTLY DO UNPAID VOLUNTEER OR COMMUNITY WORK?

- 0 NO
- 1 YES
- . UNKNOWN (6)

FS060 DURING THE PAST SIX MONTHS (180 DAYS) HOW MANY DAYS WERE

YOU

SO SICK THAT YOU WERE UNABLE TO CARRY OUT YOUR USUAL ACTIVITIES?

0 - 180

. UNKNOWN (63)

FS061 IN GENERAL, HOW IS YOUR HEALTH NOW?

(PROXY MAY NOT BE USED TO HELP COMPLETE THIS SECTION)

- 1 EXCELLENT
- 2 GOOD
- 3 FAIR
- 4 POOR
- . UNKNOWN (30)

FS062 COMPARE YOUR HEALTH TO MOST PEOPLE YOUR OWN AGE (PROXY MAY NOT BE USED TO HELP COMPLETE THIS SECTION)

- 1 BETTER
- 2 ABOUT THE SAME
- 3 WORSE THAN MOST PEOPLE YOUR OWN AGE
- . UNKNOWN (46)

ACTIVITIES OF DAILY LIVING - PART I

VARIABLE INFORMATION

FS063 EXAMINER'S NUMBER FOR ACTIVITIES OF DAILY LIVING

31 - 601

. UNKNOWN (3)

FS064 DURING THE COURSE OF A NORMAL DAY, CAN YOU DO THE FOLLOWING

ACTIVITIES INDEPENDENTLY OR DO YOU NEED HUMAN ASSISTANCE OR THE USE OF A DEVICE (USE HIGHEST LEVEL OF DEPENDENCE): DRESSING (UNDRESSING AND REDRESSING)

- 0 NO HELP NEEDED, INDEPENDENT
- 1 USES DEVICE, INDEPENDENT
- 2 HUMAN ASSISTANCE NEEDED, MINIMALLY DEPENDENT
- 3 DEPENDENT
- 4 DO NOT DO DURING A NORMAL DAY
- . UNKNOWN (6)

FS065 DURING THE COURSE OF A NORMAL DAY, CAN YOU DO THE FOLLOWING

ACTIVITIES INDEPENDENTLY OR DO YOU NEED HUMAN ASSISTANCE OR THE USE OF A DEVICE (USE HIGHEST LEVEL OF DEPENDENCE):
BATHING (INCLUDING GETTING IN AND OUT OF THE TUB OR

SHOWER)

- 0 NO HELP NEEDED, INDEPENDENT
- 1 USES DEVICE, INDEPENDENT
- 2 HUMAN ASSISTANCE NEEDED, MINIMALLY DEPENDENT
- 3 DEPENDENT
- 4 DO NOT DO DURING A NORMAL DAY
- . UNKNOWN (6)

FS066 DURING THE COURSE OF A NORMAL DAY, CAN YOU DO THE FOLLOWING

ACTIVITIES INDEPENDENTLY OR DO YOU NEED HUMAN ASSISTANCE OR THE USE OF A DEVICE (USE HIGHEST LEVEL OF DEPENDENCE): EATING

- 0 NO HELP NEEDED, INDEPENDENT
- 1 USES DEVICE, INDEPENDENT
- 2 HUMAN ASSISTANCE NEEDED, MINIMALLY DEPENDENT
- 3 DEPENDENT
- 4 DO NOT DO DURING A NORMAL DAY
- . UNKNOWN (6)

FS067 DURING THE COURSE OF A NORMAL DAY, CAN YOU DO THE FOLLOWING

ACTIVITIES INDEPENDENTLY OR DO YOU NEED HUMAN ASSISTANCE OR THE USE OF A DEVICE (USE HIGHEST LEVEL OF DEPENDENCE): TRANSFERRING (GETTING IN AND OUT OF A CHAIR)

- 0 NO HELP NEEDED, INDEPENDENT
- 1 USES DEVICE, INDEPENDENT
- 2 HUMAN ASSISTANCE NEEDED, MINIMALLY DEPENDENT
- 3 DEPENDENT
- 4 DO NOT DO DURING A NORMAL DAY
- . UNKNOWN (6)

FS068 DURING THE COURSE OF A NORMAL DAY, CAN YOU DO THE FOLLOWING

ACTIVITIES INDEPENDENTLY OR DO YOU NEED HUMAN ASSISTANCE OR THE USE OF A DEVICE (USE HIGHEST LEVEL OF DEPENDENCE): TOILETING ACTIVITIES (USING BATHROOM FACILITIES AND HANDLE CLOTHING)

- 0 NO HELP NEEDED, INDEPENDENT
- 1 USES DEVICE, INDEPENDENT
- 2 HUMAN ASSISTANCE NEEDED, MINIMALLY DEPENDENT
- 3 DEPENDENT
- 4 DO NOT DO DURING A NORMAL DAY
- . UNKNOWN (8)

FS069 DURING THE COURSE OF A NORMAL DAY, CAN YOU DO THE FOLLOWING

ACTIVITIES INDEPENDENTLY OR DO YOU NEED HUMAN ASSISTANCE OR THE USE OF A DEVICE (USE HIGHEST LEVEL OF DEPENDENCE): BLADDER CONTINENCE (ASK IF PERSON HAS "ACCIDENTS")

- 0 NO HELP NEEDED, INDEPENDENT
- 1 USES DEVICE, INDEPENDENT
- 2 HUMAN ASSISTANCE NEEDED, MINIMALLY DEPENDENT
- 3 DEPENDENT
- 4 DO NOT DO DURING A NORMAL DAY
- **5 USE SPECIAL PRODUCTS**
- . UNKNOWN (7)

FS070 DURING THE COURSE OF A NORMAL DAY, CAN YOU DO THE FOLLOWING

ACTIVITIES INDEPENDENTLY OR DO YOU NEED HUMAN ASSISTANCE OR THE USE OF A DEVICE (USE HIGHEST LEVEL OF DEPENDENCE): BOWEL CONTINENCE (ASK IF PERSON HAS "ACCIDENTS")

- 0 NO HELP NEEDED, INDEPENDENT
- 1 USES DEVICE, INDEPENDENT
- 2 HUMAN ASSISTANCE NEEDED, MINIMALLY DEPENDENT
- 3 DEPENDENT
- 4 DO NOT DO DURING A NORMAL DAY
- 5 USE SPECIAL PRODUCTS
- . UNKNOWN (8)

FS071 DURING THE COURSE OF A NORMAL DAY, CAN YOU DO THE FOLLOWING

ACTIVITIES INDEPENDENTLY OR DO YOU NEED HUMAN ASSISTANCE OR THE USE OF A DEVICE (USE HIGHEST LEVEL OF DEPENDENCE): WALKING ON LEVEL SURFACE ABOUT 50 YARDS

- 0 NO HELP NEEDED, INDEPENDENT
- 1 USES DEVICE, INDEPENDENT
- 2 HUMAN ASSISTANCE NEEDED, MINIMALLY DEPENDENT
- 3 DEPENDENT
- 4 DO NOT DO DURING A NORMAL DAY
- . UNKNOWN (8)

FS072 DURING THE COURSE OF A NORMAL DAY, CAN YOU DO THE FOLLOWING

ACTIVITIES INDEPENDENTLY OR DO YOU NEED HUMAN ASSISTANCE OR THE USE OF A DEVICE (USE HIGHEST LEVEL OF DEPENDENCE):

WALKING UP AND DOWN ONE FLIGHT STAIRS

- 0 NO HELP NEEDED, INDEPENDENT
- 1 USES DEVICE, INDEPENDENT
- 2 HUMAN ASSISTANCE NEEDED, MINIMALLY DEPENDENT
- 3 DEPENDENT
- 4 DO NOT DO DURING A NORMAL DAY
- . UNKNOWN (10)

FS073 DURING THE COURSE OF A NORMAL DAY, CAN YOU DO THE FOLLOWING

ACTIVITIES INDEPENDENTLY OR DO YOU NEED HUMAN ASSISTANCE OR THE USE OF A DEVICE (USE HIGHEST LEVEL OF DEPENDENCE): USING A TELEPHONE

- 0 NO HELP NEEDED, INDEPENDENT
- 1 USES DEVICE, INDEPENDENT
- 2 HUMAN ASSISTANCE NEEDED, MINIMALLY DEPENDENT
- 3 DEPENDENT
- 4 DO NOT DO DURING A NORMAL DAY
- . UNKNOWN (12)

FS074 DURING THE COURSE OF A NORMAL DAY, CAN YOU DO THE FOLLOWING

ACTIVITIES INDEPENDENTLY OR DO YOU NEED HUMAN ASSISTANCE OR THE USE OF A DEVICE (USE HIGHEST LEVEL OF DEPENDENCE): PREPARING AND TAKING OWN MEDICATIONS

- 0 NO HELP NEEDED, INDEPENDENT
- 1 USES DEVICE, INDEPENDENT
- 2 HUMAN ASSISTANCE NEEDED, MINIMALLY DEPENDENT
- 3 DEPENDENT
- 4 DO NOT DO DURING A NORMAL DAY
- . UNKNOWN (30)

ACTIVITIES - PART II

VARIABLE INFORMATION

FS075 EXAMINER'S NUMBER FOR ACTIVITIES PART II

31 - 601

. UNKNOWN (3)

FS076 ARE YOU IN BED OR IN A CHAIR FOR MOST OR ALL OF THE DAY?

(ON THE AVERAGE?)*

0 NO

1 YES

. UNKNOWN OR NOT SURE (8)

*THIS IS A LIFESTYLE QUESTION, NOT DUE TO HEALTH

FS077 DO YOU NEED A SPECIAL AID (WHEELCHAIR, CANE, WALKER) TO

GET AROUND?

0 NO

1 YES, ALWAYS

2 YES, SOMETIMES

. UNKNOWN (7)

FS078 IF YES TO FS077, WHICH EQUIPMENT DO YOU USE: CANE OR

WALKING STICK

0 NO

1 YES, ALWAYS

2 YES, SOMETIMES

. UNKNOWN (7)

FS079 IF YES TO FS077, WHICH EQUIPMENT DO YOU USE: WHEELCHAIR

0 NO

1 YES, ALWAYS

2 YES, SOMETIMES

. UNKNOWN (8)

FS080 IF YES TO FS077, WHICH EQUIPMENT DO YOU USE: WALKER

0 NO

1 YES, ALWAYS

2 YES, SOMETIMES

. UNKNOWN (8)

FS081 IF YES TO FS077, WHICH EQUIPMENT DO YOU USE: OTHER

0 NO

1 YES, ALWAYS

2 YES, SOMETIMES . UNKNOWN (8)

ACTIVITIES II - CONTINUED

VARIABLE INFORMATION

FS082 EXAMINER'S NUMBER FOR USE OF NURSING AND COMMUNITY SERVICES

31 - 601

. UNKNOWN (3)

FS083 IN THE PAST TWO YEARS, HAVE YOU BEEN ADMITTED TO A NURSING HOME

(OR SKILLED FACILITY)?

0 NO

1 YES

. UNKNOWN (7)

FS084 IN THE PAST TWO YEARS, HAVE YOU BEEN VISITED BY A NURSING SERVICE, OR USED HOME, COMMUNITY, OR OUTPATIENT

PROGRAMS?

0 NO

1 YES

. UNKNOWN (12)

FS085 USE HOME HEALTH AIDES CURRENTLY

0 NO

1 1 OR MORE TIMES PER DAY

2 1 OR MORE TIMES PER WEEK

3 1 OR MORE TIMES PER MONTH

4 OTHER

. UNKNOWN (15)

FS086 USED HOME HEALTH AIDES SINCE LAST EXAM

0 NO

1 1 OR MORE TIMES PER DAY

2 1 OR MORE TIMES PER WEEK

3 1 OR MORE TIMES PER MONTH

4 OTHER

. UNKNOWN (17)

FS087 NUMBER OF MONTHS USED HOME HEALTH AIDE SINCE LAST EXAM

0 NONE

1 1 MONTH OR LESS

2 - 36

98 98 OR MORE

. UNKNOWN (25)

FS088 HOMEMAKER VISITS CURRENTLY

- 0 NO
- 1 1 OR MORE TIMES PER DAY
- 2 1 OR MORE TIMES PER WEEK
- 3 1 OR MORE TIMES PER MONTH
- 4 OTHER
- . UNKNOWN (15)

FS089 HOMEMAKER VISITS SINCE LAST EXAM 0 NO1 1 OR MORE TIMES PER DAY 2 1 OR MORE TIMES PER WEEK 3 1 OR MORE TIMES PER MONTH 4 OTHER . UNKNOWN (18) FS090 NUMBER OF MONTHS HAD HOMEMAKER VISITS SINCE LAST EXAM 0 NONE 1 1 MONTH OR LESS 2 - 36 98 98 OR MORE . UNKNOWN (20) FS091 USE VISITING NURSES CURRENTLY 0 NO1 1 OR MORE TIMES PER DAY 2 1 OR MORE TIMES PER WEEK 3 1 OR MORE TIMES PER MONTH 4 OTHER . UNKNOWN (17) FS092 USED VISITING NURSES SINCE LAST EXAM 0 NO 1 1 OR MORE TIMES PER DAY 2 1 OR MORE TIMES PER WEEK 3 1 OR MORE TIMES PER MONTH 4 OTHER . UNKNOWN (19) FS093 NUMBER OF MONTHS USED VISITING NURSES SINCE LAST EXAM 0 NONE 1 1 MONTH OR LESS 2 - 24 98 98 OR MORE . UNKNOWN (26) FS094 USE PERSONAL CARE ATTENDANT CURRENTLY 0 NO1 1 OR MORE TIMES PER DAY 2 1 OR MORE TIMES PER WEEK 3 1 OR MORE TIMES PER MONTH 4 OTHER . UNKNOWN (15)

FS095 USED PERSONAL CARE ATTENDANT SINCE LAST EXAM

- 0 NO
- 1 1 OR MORE TIMES PER DAY
- 2 1 OR MORE TIMES PER WEEK
- 3 1 OR MORE TIMES PER MONTH
- 4 OTHER
- . UNKNOWN (16)

| FS096 LAST EXAM | NUMBER OF MONTHS USED PERSONAL CARE ATTENDANT SINCE |
|--------------------|---|
| | 0 NONE 1 1 MONTH OR LESS 2 - 14 98 98 OR MORE . UNKNOWN (16) |
| FS097 | USE REHABILITATION SERVICES CURRENTLY (SUCH AS PHYSICAL, OCCUPATIONAL, OR SPEECH THERAPY) 0 NO 1 1 OR MORE TIMES PER DAY 2 1 OR MORE TIMES PER WEEK 3 1 OR MORE TIMES PER MONTH 4 OTHER . UNKNOWN (15) |
| FS098 | USED REHABILITATION SERVICES SINCE LAST EXAM (SUCH AS PHYSICAL, OCCUPATIONAL, OR SPEECH THERAPY) 0 NO 1 1 OR MORE TIMES PER DAY 2 1 OR MORE TIMES PER WEEK 3 1 OR MORE TIMES PER MONTH 4 OTHER . UNKNOWN (17) |
| FS099 EXAM | NUMBER OF MONTHS USED REHABILITATION SERVICES SINCE LAST 0 NONE 1 1 MONTH OR LESS 2 - 12 98 98 OR MORE . UNKNOWN (20) |
| FS100 | USE CARDIAC REHABILITATION CURRENTLY 0 NO 1 1 OR MORE TIMES PER DAY 2 1 OR MORE TIMES PER WEEK 3 1 OR MORE TIMES PER MONTH 4 OTHER . UNKNOWN (15) |
| FS101 | USED CARDIAC REHABILITATION SINCE LAST EXAM 0 NO 1 1 OR MORE TIMES PER DAY |

- 2 1 OR MORE TIMES PER WEEK
- 3 1 OR MORE TIMES PER MONTH
- 4 OTHER
- . UNKNOWN (16)

FS102 EXAM

NUMBER OF MONTHS USED CARDIAC REHABILITATION SINCE LAST

- 0 NONE
- 1 1 MONTH OR LESS
- 2 6
- 98 98 OR MORE
- . UNKNOWN (16)

FS103 USE MEALS ON WHEELS CURRENTLY 0 NO 1 1 OR MORE TIMES PER DAY 2 1 OR MORE TIMES PER WEEK 3 1 OR MORE TIMES PER MONTH 4 OTHER . UNKNOWN (15) FS104 USED MEALS ON WHEELS SINCE LAST EXAM 0 NO1 1 OR MORE TIMES PER DAY 2 1 OR MORE TIMES PER WEEK 3 1 OR MORE TIMES PER MONTH 4 OTHER . UNKNOWN (16) FS105 NUMBER OF MONTHS USED MEALS ON WHEELS SINCE LAST EXAM 0 NONE 1 1 MONTH OR LESS 2 - 34 98 98 OR MORE . UNKNOWN (20) FS106 USE COMMUNITY DAY PROGRAMS CURRENTLY 0 NO 1 1 OR MORE TIMES PER DAY 2 1 OR MORE TIMES PER WEEK 3 1 OR MORE TIMES PER MONTH 4 OTHER . UNKNOWN (15) FS107 USED COMMUNITY DAY PROGRAMS SINCE LAST EXAM 0 NO 1 1 OR MORE TIMES PER DAY 2 1 OR MORE TIMES PER WEEK 3 1 OR MORE TIMES PER MONTH 4 OTHER . UNKNOWN (16) FS108 NUMBER OF MONTHS USED COMMUNITY DAY PROGRAMS SINCE LAST EXAM 0 NONE

1 1 MONTH OR LESS

2 - 32 98 98 OR MORE

. UNKNOWN (18)

FS109 USE OTHER SERVICES CURRENTLY

- 0 NO
- 1 1 OR MORE TIMES PER DAY
- 2 1 OR MORE TIMES PER WEEK
- 3 1 OR MORE TIMES PER MONTH
- 4 OTHER
- . UNKNOWN (17)

FS110 USED OTHER SERVICES SINCE LAST EXAM

- 0 NO
- 1 1 OR MORE TIMES PER DAY
- 2 1 OR MORE TIMES PER WEEK
- 3 1 OR MORE TIMES PER MONTH
- 4 OTHER
- . UNKNOWN (18)

FS111 NUMBER OF MONTHS USED OTHER SERVICES SINCE LAST EXAM

- 0 NONE
- 1 1 MONTH OR LESS
- 12 MONTHS
- 98 98 MONTHS OR MORE
- . UNKNOWN (18)

ACTIVITIES II - CONTINUED

VARIABLE INFORMATION

FS112 EXAMINER'S NUMBER FOR ROSOW-BRESLAU QUESTIONS

31 - 601

. UNKNOWN (3)

FS113 ROSOW-BRESLAU: ARE YOU ABLE TO DO HEAVY WORK AROUND

THE

HOUSE, LIKE SHOVEL SNOW OR WASH WINDOWS, WALLS OR

FLOORS

WITHOUT HELP?

0 NO, UNABLE TO DO

1 YES, INDEPENDENT

2 DOES NOT DO

. UNKNOWN (6)

FS114 ROSOW-BRESLAU: ARE YOU ABLE TO WALK HALF A MILE WITHOUT

HELP?

(ABOUT 4 - 6 BLOCKS)

0 NO, UNABLE TO DO

1 YES, INDEPENDENT

2 DOES NOT DO

. UNKNOWN (9)

FS115 ROSOW-BRESLAU: IF YOU HAD TO, COULD YOU DO ALL THE

HOUSEKEEPING YOURSELF?

(LIKE WASHING THE CLOTHES AND CLEANING)

0 NO, UNABLE TO DO

1 YES, INDEPENDENT

2 DOES NOT DO

. UNKNOWN (7)

FS116 ROSOW-BRESLAU: IF YOU HAD TO, COULD YOU DO ALL THE

COOKING

YOURSELF?

0 NO. UNABLE TO DO

1 YES, INDEPENDENT

2 DOES NOT DO

. UNKNOWN (6)

FS117 ROSOW-BRESLAU: IF YOU HAD TO, COULD YOU DO ALL THE

GROCERY

SHOPPING YOURSELF?

- 0 NO, UNABLE TO DO
- 1 YES, INDEPENDENT
- 2 DOES NOT DO
- . UNKNOWN (6)

FS118 ROSOW-BRESLAU: DO YOU DRIVE?

- 0 NO
- 1 YES, CURRENTLY
- 2 YES, NOT NOW
- . UNKNOWN (8)

FS119 ROSOW-BRESLAU: REASON FOR NOT DRIVING NOW

- 1 HEALTH
- 2 OTHER NON-HEALTH REASON
- 3 NEVER LICENSED
- 8 N/A, CURRENT DRIVER
- . UNKNOWN (38)

ACTIVITIES - PART III

VARIABLE INFORMATION

FS120 EXAMINER'S NUMBER FOR NAGI QUESTIONS

31 - 601

. UNKNOWN (3)

FS121 NAGI: PULLING OR 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 (36)

FS122 NAGI: EITHER STOOPING, CROUCHING, OR 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 (24)

FS123 NAGI: REACHING OR EXTENDING ARMS BELOW 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 (14)

FS124 NAGI: 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 (14)

FS125 NAGI: EITHER 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 (18)

FS126 NAGI: STANDING IN PLACE FOR LONG PERIODS, SAY 15 MINUTES

- 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 (51)

FS127 NAGI: SITTING FOR LONG PERIODS, SAY 1 HOUR

- 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 (13)

FS128 NAGI: LIFTING OR CARRYING WEIGHTS UNDER 10 POUNDS (LIKE A BAG 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 (70)

FS129 NAGI: LIFTING OR CARRYING WEIGHTS OVER 10 POUNDS (LIKE A VERY HEAVY BAG OF GROCERIES)

- 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 (104)

FS130 NAGI: GETTING IN AND OUT OF 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 (52)

FS131 NAGI: PUTTING ON SOCKS OR STOCKINGS

- 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 (28)

| FALLS AND FRACTURES | | | | |
|---------------------|---|--|--|--|
| VARIABLE | INFORMATION | | | |
| FS132 | EXAMINER'S NUMBER FOR FALLS AND FRACTURES 31 - 601 . UNKNOWN (3) | | | |
| FS133 THE | IN THE PAST YEAR, HAVE YOU ACCIDENTALLY FALLEN AND HIT FLOOR OR GROUND? (CODE AS NO IF DURING SPORTS ACTIVITY) 0 NO 1 YES 2 MAYBE . UNKNOWN (8) | | | |
| FS134 | HOW MANY TIMES DID YOU FALL IN THE PAST YEAR? 88 DID NOT FALL IN THE PAST YEAR 1 - 12 . UNKNOWN (14) | | | |
| FS135 | FRACTURES: SINCE YOUR LAST CLINIC VISIT HAVE YOU BROKEN ANY BONES? 0 NO 1 YES 2 MAYBE . UNKNOWN (6) | | | |
| FS136 VISIT | FRACTURES: BROKEN LEFT CLAVICLE (COLLAR BONE) SINCE LAST 0 NOT BROKEN 2000 - 2001 . UNKNOWN (16) NOTE: NUMBER RANGES REPRESENT YEAR BONE WAS BROKEN | | | |
| FS137 VISIT | FRACTURES: BROKEN RIGHT CLAVICLE (COLLAR BONE) SINCE LAST 0 NOT BROKEN 1999 - 2001 . UNKNOWN (15) NOTE: NUMBER RANGES REPRESENT YEAR BONE WAS BROKEN | | | |
| FS138 | FRACTURES: BROKEN LEFT UPPER ARM (HUMERUS) OR ELBOW | | | |

SINCE

LAST VISIT

0 NOT BROKEN

1999

. UNKNOWN (16)

NOTE: NUMBER RANGES REPRESENT YEAR BONE WAS BROKEN

FS139 FRACTURES: BROKEN RIGHT UPPER ARM (HUMERUS) OR ELBOW SINCE

LAST VISIT

0 NOT BROKEN

1998 - 2000

. UNKNOWN (16)

NOTE: NUMBER RANGES REPRESENT YEAR BONE WAS BROKEN

| FS140 | FRACTURES: BROKEN LEFT FOREARM OR WRIST SINCE LAST VISIT 0 NOT BROKEN 1998 - 2000 . UNKNOWN (15) NOTE: NUMBER RANGES REPRESENT YEAR BONE WAS BROKEN |
|-------|---|
| FS141 | FRACTURES: BROKEN RIGHT FOREARM OR WRIST SINCE LAST VISIT 0 NOT BROKEN 1998 - 2000 . UNKNOWN (17) NOTE: NUMBER RANGES REPRESENT YEAR BONE WAS BROKEN |
| FS142 | FRACTURES: BROKEN LEFT HAND SINCE LAST VISIT 0 NOT BROKEN . UNKNOWN (16) NOTE: NUMBER RANGES REPRESENT YEAR BONE WAS BROKEN |
| FS143 | FRACTURES: BROKEN RIGHT HAND SINCE LAST VISIT 0 NOT BROKEN 1999 - 2000 . UNKNOWN (16) NOTE: NUMBER RANGES REPRESENT YEAR BONE WAS BROKEN |
| FS144 | FRACTURES: BROKEN BACK SINCE LAST VISIT (IF DISC DISEASE ONLY, CODE AS NO) 0 NOT BROKEN 1998 - 2000 . UNKNOWN (17) NOTE: NUMBER RANGES REPRESENT YEAR BONE WAS BROKEN |
| FS145 | FRACTURES: BROKEN PELVIS SINCE LAST VISIT 0 NOT BROKEN 1998 - 2000 . UNKNOWN (15) NOTE: NUMBER RANGES REPRESENT YEAR BONE WAS BROKEN |
| FS146 | FRACTURES: BROKEN LEFT HIP SINCE LAST VISIT 0 NOT BROKEN 1999 - 2000 . UNKNOWN (14) NOTE: NUMBER RANGES REPRESENT YEAR BONE WAS BROKEN |
| FS147 | FRACTURES: BROKEN RIGHT HIP SINCE LAST VISIT 0 NOT BROKEN 1998 - 2000 |

. UNKNOWN (15) NOTE: NUMBER RANGES REPRESENT YEAR BONE WAS BROKEN

FS148 FRACTURES: BROKEN LEFT LEG SINCE LAST VISIT

0 NOT BROKEN

2000 - 2001

. UNKNOWN (16)

NOTE: NUMBER RANGES REPRESENT YEAR BONE WAS BROKEN

| FS149 | FRACTURES: BROKEN RIGHT LEG SINCE LAST VISIT 0 NOT BROKEN 1999 . UNKNOWN (16) NOTE: NUMBER RANGES REPRESENT YEAR BONE WAS BROKEN |
|-------|--|
| FS150 | FRACTURES: BROKEN LEFT FOOT SINCE LAST VISIT 0 NOT BROKEN . UNKNOWN (16) NOTE: NUMBER RANGES REPRESENT YEAR BONE WAS BROKEN |
| FS151 | FRACTURES: BROKEN RIGHT FOOT SINCE LAST VISIT 0 NOT BROKEN 1999 - 2000 . UNKNOWN (16) NOTE: NUMBER RANGES REPRESENT YEAR BONE WAS BROKEN |
| FS152 | FRACTURES: BROKEN TOE ON LEFT FOOT SINCE LAST VISIT 0 NOT BROKEN 1998 - 1999 . UNKNOWN (15) NOTE: NUMBER RANGES REPRESENT YEAR BONE WAS BROKEN |
| FS153 | FRACTURES: BROKEN TOE ON LEFT FOOT SINCE LAST VISIT 0 NOT BROKEN 1999 . UNKNOWN (16) NOTE: NUMBER RANGES REPRESENT YEAR BONE WAS BROKEN |
| FS154 | FRACTURES: OTHER BROKEN BONE SINCE LAST VISIT (OTHER THAN FS136-FS153) 0 NOT BROKEN 1998 - 2001 . UNKNOWN (16) NOTE: NUMBER RANGES REPRESENT YEAR BONE WAS BROKEN |
| FS155 | FRACTURES: SPECIFY LOCATION OF OTHER BROKEN BONE CHARACTER FIELD SPECIFIES LOCATION OF OTHER BROKEN BONE N/A INDICATES NO OTHER BONE WAS BROKEN SINCE LAST VISIT EMPTY CHARACTER FIELD INDICATES UNKNOWN VALUE (15) |

CES-D SCALE

VARIABLE INFORMATION

**NOTE FOR VARIABLES FS157-FS176:

THE QUESTIONS BELOW ASK ABOUT YOUR FEELINGS. FOR EACH OF THE FOLLOWING

STATEMENTS, PLEASE SAY IF YOU FELT THAT WAY DURING THE PAST WEEK.

FS156 EXAMINER'S NUMBER FOR CES-D SCALE

31 - 601

. UNKNOWN (4)

FS157 CES-D: I WAS BOTHERED BY THINGS THAT USUALLY DON'T BOTHER ME

SEE NOTE ABOVE

- 0 RARELY OR NONE OF THE TIME (< 1 PER 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 (85)

FS158 CES-D: I DID NOT FEEL LIKE EATING; MY APPETITE WAS POOR **SEE NOTE ABOVE**

- 0 RARELY OR NONE OF THE TIME (< 1 PER 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 (84)

FS159 CES-D: I FELT THAT I COULD NOT SHAKE OFF THE BLUES, EVEN WITH HELP FROM MY FAMILY AND FRIENDS

- **SEE NOTE ABOVE**
 - 0 RARELY OR NONE OF THE TIME (< 1 PER 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 (87)

FS160 CES-D: I FELT THAT I WAS JUST AS GOOD AS OTHER PEOPLE **SEE NOTE ABOVE**

- 0 RARELY OR NONE OF THE TIME (< 1 PER 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 (99)
- FS161 CES-D: I HAD TROUBLE KEEPING MY MIND ON WHAT I WAS DOING **SEE NOTE ABOVE**
 - 0 RARELY OR NONE OF THE TIME (< 1 PER 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 (86)

FS162 CES-D: I FELT DEPRESSED **SEE NOTE ABOVE** 0 RARELY OR NONE OF THE TIME (< 1 PER 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 (85)

FS163 CES-D: I FELT THAT EVERYTHING I DID WAS AN EFFORT

SEE NOTE ABOVE

- 0 RARELY OR NONE OF THE TIME (< 1 PER 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 (89)

FS164 CES-D: I FELT HOPEFUL ABOUT THE FUTURE

SEE NOTE ABOVE

- 0 RARELY OR NONE OF THE TIME (< 1 PER 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 (114)

FS165 CES-D: I THOUGHT MY LIFE HAD BEEN A FAILURE

SEE NOTE ABOVE

- 0 RARELY OR NONE OF THE TIME (< 1 PER 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 (88)

FS166 CES-D: I FELT FEARFUL

SEE NOTE ABOVE

- 0 RARELY OR NONE OF THE TIME (< 1 PER 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 (86)

FS167 CES-D: MY SLEEP WAS RESTLESS

SEE NOTE ABOVE

- 0 RARELY OR NONE OF THE TIME (< 1 PER 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 (86)

FS168 CES-D: I WAS HAPPY

- **SEE NOTE ABOVE**
 - 0 RARELY OR NONE OF THE TIME (< 1 PER 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 (89)

FS169 CES-D: I TALKED LESS THAN USUAL **SEE NOTE ABOVE**

- 0 RARELY OR NONE OF THE TIME (< 1 PER 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 (92)

FS170 CES-D: I FELT LONELY

- **SEE NOTE ABOVE**
 - 0 RARELY OR NONE OF THE TIME (< 1 PER 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 (87)

FS171 CES-D: PEOPLE WERE UNFRIENDLY

- **SEE NOTE ABOVE**
 - 0 RARELY OR NONE OF THE TIME (< 1 PER 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 (90)

FS172 CES-D: I ENJOYED LIFE

- **SEE NOTE ABOVE**
 - 0 RARELY OR NONE OF THE TIME (< 1 PER 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 (89)

FS173 CES-D: I HAD CRYING SPELLS

- **SEE NOTE ABOVE**
 - 0 RARELY OR NONE OF THE TIME (< 1 PER 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 (88)

FS174 CES-D: I FELT SAD

- **SEE NOTE ABOVE**
 - 0 RARELY OR NONE OF THE TIME (< 1 PER 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 (87)

FS175 CES-D: I FELT THAT PEOPLE DISLIKED ME

- **SEE NOTE ABOVE**
 - 0 RARELY OR NONE OF THE TIME (< 1 PER 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 (91)

FS176 CES-D: I COULD NOT "GET GOING"

- **SEE NOTE ABOVE**
 - 0 RARELY OR NONE OF THE TIME (< 1 PER 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 (90)

BERKMAN SOCIAL NETWORK QUESTIONNAIRE

VARIABLE INFORMATION

**NOTE FOR VARIABLES FS177-FS189:

THE FOLLOWING TWO PAGE QUESTIONNAIRE ASKS ABOUT YOUR SOCIAL SUPPORT. PLEASE

READ THE FOLLOWING QUESTIONS AND CIRCLE THE RESPONSE THAT MOST CLOSELY

DESCRIBES YOUR CURRENT SITUATION.

FS177 THAT YOU

BERKMAN: HOW MANY CLOSE FRIENDS DO YOU HAVE: PEOPLE

FEEL AT EASE WITH, CAN TALK TO ABOUT PRIVATE MATTERS? **SEE NOTE ABOVE**

- 0 NONE
- 1 1 OR 2
- 2 3 TO 5
- 3 6 TO 9
- 4 10 OR MORE
- . UNKNOWN (68)

FS178 LEAST

BERKMAN: HOW MANY OF THESE CLOSE FRIENDS DO YOU SEE AT

ONCE A MONTH?

SEE NOTE ABOVE

- 0 NONE
- 1 1 OR 2
- 2 3 TO 5
- 3 6 TO 9
- **4 10 OR MORE**
- . UNKNOWN (68)

FS179 YOU FEEL

BERKMAN: HOW MANY RELATIVES DO YOU HAVE; PEOPLE THAT

AT EASE WITH, CAN TALK TO ABOUT PRIVATE MATTERS?

- **SEE NOTE ABOVE**
 - 0 NONE
 - 1 1 OR 2
 - 2 3 TO 5
 - 3 6 TO 9
 - 4 10 OR MORE
 - . UNKNOWN (68)

FS180 BERKMAN: HOW MANY OF THESE RELATIVES DO YOU SEE AT LEAST

```
ONCE
```

A MONTH?

SEE NOTE ABOVE

0 NONE

1 1 OR 2

2 3 TO 5

3 6 TO 9

4 10 OR MORE

. UNKNOWN (68)

FS181

BERKMAN: DO YOU PARTICIPATE IN ANY GROUPS SUCH AS A

SENIOR

CENTER, SOCIAL OR WORK GROUP, CHURCH CONNECTED GROUP,

SELF-HELP

GROUP, OR CHARITY, PUBLIC SERVICE OR COMMUNITY GROUP?

SEE NOTE ABOVE

0 NO

1 YES

. UNKNOWN (11)

FS182

BERKMAN: ABOUT HOW OFTEN DO YOU GO TO RELIGIOUS

MEETINGS

OR SERVICES?

SEE NOTE ABOVE

- 0 NEVER OR ALMOST NEVER
- 1 ONCE OR TWICE A YEAR
- 2 EVERY FEW MONTHS
- 3 ONCE OR TWICE A MONTH
- 4 ONCE A WEEK
- 5 MORE THAN ONCE A WEEK
- . UNKNOWN (34)

FS183

BERKMAN: DO YOU HAVE MEDICARE OR MEDICAID?

SEE NOTE ABOVE

- 0 NO
- 1 YES
- . UNKNOWN (18)

FS184

BERKMAN: DO YOU HAVE HEALTH INSURANCE?

SEE NOTE ABOVE

- 0 NO
- 1 YES
- . UNKNOWN (24)

FS185 CAN

BERKMAN: IS THERE SOMEONE AVAILABLE TO YOU WHOM YOU

COUNT ON TO LISTEN TO YOU WHEN YOU NEED TO TALK?

- **SEE NOTE ABOVE**
 - 0 NONE OF THE TIME
 - 1 A LITTLE OF THE TIME
 - 2 SOME OF THE TIME
 - 3 MOST OF THE TIME
 - 4 ALL OF THE TIME
 - . UNKNOWN (73)

FS186 ADVICE

BERKMAN: IS THERE SOMEONE AVAILABLE TO GIVE YOU GOOD

ABOUT A PROBLEM?

- **SEE NOTE ABOVE**
 - 0 NONE OF THE TIME
 - 1 A LITTLE OF THE TIME
 - 2 SOME OF THE TIME
 - 3 MOST OF THE TIME
 - 4 ALL OF THE TIME
 - . UNKNOWN (79)

FS187 YOU LOVE

BERKMAN: IS THERE SOMEONE AVAILABLE TO YOU WHO SHOWS

AND AFFECTION?

SEE NOTE ABOVE

- 0 NONE OF THE TIME
- 1 A LITTLE OF THE TIME
- 2 SOME OF THE TIME
- 3 MOST OF THE TIME
- 4 ALL OF THE TIME
- . UNKNOWN (77)

FS188 BERKMAN: CAN YOU COUNT ON ANYONE TO PROVIDE YOU WITH EMOTIONAL

SUPPORT (TALKING OVER PROBLEMS OR HELPING YOU MAKE A

DIFFICULT

DECISION)?

- **SEE NOTE ABOVE**
 - 0 NONE OF THE TIME
 - 1 A LITTLE OF THE TIME
 - 2 SOME OF THE TIME
 - 3 MOST OF THE TIME
 - 4 ALL OF THE TIME
 - . UNKNOWN (82)

FS189 BERKMAN: DO YOU HAVE AS MUCH CONTACT AS YOU WOULD LIKE WITH

SOMEONE YOU FEEL CLOSE TO, SOMEONE IN WHOM YOU CAN

TRUST AND

CONFIDE?

- **SEE NOTE ABOVE**
 - 0 NONE OF THE TIME
 - 1 A LITTLE OF THE TIME
 - 2 SOME OF THE TIME
 - 3 MOST OF THE TIME
 - 4 ALL OF THE TIME
 - . UNKNOWN (85)

HAND GRIP STRENGTH TEST _____ VARIABLE INFORMATION -----FS190 EXAMINER'S NUMBER FOR HAND GRIP STRENGTH TEST 19 - 601 . UNKNOWN (9) FS191 HAND GRIP STRENGTH TEST: TRIAL 1 - RIGHT HAND (MEASURED TO THE NEAREST KILOGRAM) 2 - 50 . UNKNOWN (77) FS192 HAND GRIP STRENGTH TEST: TRIAL 2 - RIGHT HAND (MEASURED TO THE NEAREST KILOGRAM) 0 - 42 . UNKNOWN (77) FS193 HAND GRIP STRENGTH TEST: TRIAL 3 - RIGHT HAND (MEASURED TO THE NEAREST KILOGRAM) 0 - 42. UNKNOWN (77) FS194 HAND GRIP STRENGTH TEST: TRIAL 1 - LEFT HAND (MEASURED TO THE NEAREST KILOGRAM) 2 - 45 . UNKNOWN (75) FS195 HAND GRIP STRENGTH TEST: TRIAL 2 - LEFT HAND (MEASURED TO THE NEAREST KILOGRAM) 2 - 46 . UNKNOWN (75) FS196 HAND GRIP STRENGTH TEST: TRIAL 3 - LEFT HAND (MEASURED TO THE NEAREST KILOGRAM) 1 - 48

FS197 HAND GRIP STRENGTH TEST: WAS THIS TEST COMPLETED?

SEE NOTE BELOW

0 NO
1 YES

. UNKNOWN (1)

. UNKNOWN (75)

FS198 HAND GRIP STRENGTH TEST: IF TEST NOT COMPLETED, WHY?

- 1 PHYSICAL LIMITATION
- 2 REFUSED
- 3 TEST NOT ATTEMPTED
- 4 OTHER
- . UNKNOWN OR TEST COMPLETED (FS197 = 1) (494)

**NOTE: THE HAND GRIP TEST IS CONSIDERED COMPLETED IF PARTICIPANT COMPLETED

ALL 3 TRIALS OF EITHER THE RIGHT OR THE LEFT HAND, OR IF ALL 3 TRIALS WERE

COMPLETED FOR BOTH HANDS. THE TEST IS NOT CONSIDERED COMPLETED IF LESS THAN 3 $\,$

TRIALS ARE COMPLETED FOR BOTH THE RIGHT AND LEFT HANDS.

PHYSICAL FUNCTION TEST

VARIABLE INFORMATION

FS199 EXAMINER'S NUMBER FOR PHYSICAL FUNCTION TEST

19 - 601

. UNKNOWN (10)

FS200 SIDE BY SIDE STAND: HELD FOR 10 SECONDS

0 NO

1 YES

8 NOT ATTEMPTED

. UNKNOWN (10)

FS201 SIDE BY SIDE STAND: NUMBER OF SECONDS HELD IF LESS THAN 10 (SECONDS)

1 - 4

. UNKNOWN OR HELD FOR 10 SECONDS (FS200 = 1) (556)

NOTE: TOTAL TIME HELD = FS201 + FS202*0.01

FS202 SIDE BY SIDE STAND: NUMBER OF SECONDS HELD IF LESS THAN 10

(HUNDREDTHS OF A SECOND)

1 - 73

. UNKNOWN OR HELD FOR 10 SECONDS (FS200 = 1) (556)

NOTE: TOTAL TIME HELD = FS201 + FS202*0.01

FS203 SIDE BY SIDE STAND: IF NOT ATTEMPTED, WHY?

1 UNSAFE

2 UNABLE TO STAND UNASSISTED

3 REFUSED

4 OTHER

. UNKNOWN OR TEST ATTEMPTED (401)

FS204 SEMI-TANDEM STAND: HELD FOR 10 SECONDS

0 NO

1 YES

8 NOT ATTEMPTED

. UNKNOWN (10)

FS205 SEMI-TANDEM STAND: NUMBER OF SECONDS HELD IF LESS THAN 10

(SECONDS)

1 - 9

. UNKNOWN OR HELD FOR 10 SECONDS (FS204 = 1) (524)

NOTE: TOTAL TIME HELD = FS205 + FS206*0.01

FS206 SEMI-TANDEM STAND: NUMBER OF SECONDS HELD IF LESS THAN 10 (HUNDREDTHS OF A SECOND)

0 - 99

. UNKNOWN OR HELD FOR 10 SECONDS (FS204 = 1) (524) NOTE: TOTAL TIME HELD = FS205 + FS206*0.01

| FS207 | SEMI-TANDEM STAND: IF NOT ATTEMPTED, WHY? 1 UNSAFE 2 UNABLE TO STAND UNASSISTED 3 REFUSED 4 OTHER . UNKNOWN OR TEST ATTEMPTED (387) |
|-------|--|
| FS208 | TANDEM STAND: HELD FOR 10 SECONDS 0 NO 1 YES 8 NOT ATTEMPTED . UNKNOWN (10) |
| FS209 | TANDEM STAND: NUMBER OF SECONDS HELD IF LESS THAN 10 (SECONDS) 0 - 9 . UNKNOWN OR HELD FOR 10 SECONDS (FS208 = 1) (406) NOTE: TOTAL TIME HELD = FS209 + FS210*0.01 |
| FS210 | TANDEM STAND: NUMBER OF SECONDS HELD IF LESS THAN 10 (HUNDREDTHS OF A SECOND) 0 - 96 . UNKNOWN OR HELD FOR 10 SECONDS (FS208 = 1) (406) NOTE: TOTAL TIME HELD = FS209 + FS210*0.01 |
| FS211 | TANDEM STAND: IF NOT ATTEMPTED, WHY? 1 UNSAFE 2 UNABLE TO STAND UNASSISTED 3 REFUSED 4 OTHER |

. UNKNOWN OR TEST ATTEMPTED (345)

MEASURED WALKS

VARIABLE INFORMATION

FS212 EXAMINER'S NUMBER FOR MEASURED WALKS

19 - 601

. UNKNOWN (9)

FS213 MEASURED WALKS - FIRST WALK: WALK TIME (SECONDS)

2 - 29

. UNKNOWN (137)

NOTE: TOTAL TIME = FS213 + FS214*0.01

FS214 MEASURED WALKS - FIRST WALK: WALK TIME (HUNDREDTHS OF A

SECOND)

0 - 99

. UNKNOWN (138)

NOTE: TOTAL TIME = FS213 + FS214*0.01

FS215 MEASURED WALKS - FIRST WALK: IF WALK NOT ATTEMPTED, WHY?

1 UNSAFE

2 UNABLE TO STAND UNASSISTED

3 REFUSED

4 OTHER

. UNKNOWN OR TEST ATTEMPTED (430)

FS216 MEASURED WALKS - SECOND WALK: WALK TIME (SECONDS)

2 - 26

. UNKNOWN (137)

NOTE: TOTAL TIME = FS216 + FS217*0.01

FS217 MEASURED WALKS - SECOND WALK: WALK TIME (HUNDREDTHS OF

Α

SECOND)

0 - 99

. UNKNOWN (138)

NOTE: TOTAL TIME = FS216 + FS217*0.01

FS218 MEASURED WALKS - SECOND WALK: IF WALK NOT ATTEMPTED,

WHY?

1 UNSAFE

2 UNABLE TO STAND UNASSISTED

3 REFUSED

4 OTHER

. UNKNOWN OR TEST ATTEMPTED (430)

FS219 MEASURED WALKS - QUICK WALK: WALK TIME (SECONDS)

1 - 23

. UNKNOWN (142)

NOTE: TOTAL TIME = FS219 + FS220*0.01

FS220 MEASURED WALKS - QUICK WALK: WALK TIME (HUNDREDTHS OF A

SECOND)

0 - 99

. UNKNOWN (143)

NOTE: TOTAL TIME = FS219 + FS220*0.01

FS221 MEASURED WALKS - QUICK WALK: IF WALK NOT ATTEMPTED, WHY?

- 1 UNSAFE
- 2 UNABLE TO STAND UNASSISTED
- 3 REFUSED
- 4 OTHER
- . UNKNOWN OR TEST ATTEMPTED (432)

FS222 MEASURED WALKS - QUICK WALK: WALKING AIDS USED

- 0 NO AID
- 1 CANE
- 2 WALKER
- 3 WHEELCHAIR
- 4 OTHER
- . UNKNOWN (129)

REPEATED CHAIR STANDS

VARIABLE INFORMATION

FS223A REPEATED CHAIR STANDS: CHAIR HEIGHT (IN INCHES)*

17.00 - 19.00

. UNKNOWN (493)

*THIS VARIABLE NOT COLLECTED FOR CLINIC EXAMS

(FS001 = 0)

FS223 REPEATED CHAIR STANDS: TIME TO COMPLETE FIVE STANDS

(SECONDS)

(IF NOT COMPLETED IN ONE MINUTE - STOP)

5 - 48

. UNKNOWN (221)

NOTE: TOTAL TIME = FS223 + FS224*0.01

FS224 REPEATED CHAIR STANDS: TIME TO COMPLETE FIVE STANDS

(HUNDREDTHS OF A SECOND)

(IF NOT COMPLETED IN ONE MINUTE - STOP)

0 - 99

. UNKNOWN (221)

NOTE: TOTAL TIME = FS223 + FS224*0.01

FS225 REPEATED CHAIR STANDS: IF LESS THAN FIVE STANDS.

ENTER THE NUMBER

0 - 4

. UNKNOWN OR COMPLETED 5 STANDS (553)

FS226 REPEATED CHAIR STANDS: WAS THIS TEST COMPLETED?

SEE NOTE BELOW

0 NO

1 YES

. UNKNOWN (1)

FS227 REPEATED CHAIR STANDS: IF TEST NOT COMPLETED, WHY?

0 USED ARMS/UNABLE TO STAND

1 PHYSICAL LIMITATION

2 TEST NOT ATTEMPTED

3 REFUSED

4 OTHER

5 TEST STOPPED AT 60 SECONDS

. UNKNOWN OR TEST COMPLETED (351)

FS228 REPEATED CHAIR STANDS: POST-REPEATED CHAIR STAND

30 SECOND HEART RATE

21 - 74

. UNKNOWN (221)

**NOTE: THE CHAIR STAND TEST IS CONSIDERED COMPLETED IF THE PARTICIPANT IS

ABLE TO DO 5 STANDS IN ONE MINUTE OR LESS. IF FIVE STANDS ARE NOT COMPLETED

WITHIN 60 SECONDS, THE CLOCK IS STOPPED, THE NUMBER OF STANDS COMPLETED IS

RECORDED, AND TEST COMPLETED (FS226) = NO.

BASIC BACKGROUND AND HEALTH CARE

VARIABLE INFORMATION

FS229 EXAMINER'S NUMBER

46 - 601

. UNKNOWN (0)

NOTE: FOR OFFSITE EXAMS (FS001 = 1,2, OR 3)

THE EXAMINER WAS NON-MD

FS230 HOSPITALIZATION (NOT JUST E.R.) IN INTERIM

0 NO

1 YES, HOSPITALIZATION

2 YES, MORE THAN 1 HOSPITALIZATION

. UNKNOWN (1)

FS231 E.R. VISIT IN INTERIM

0 NO

1 YES, 1 VISIT

2 YES, MORE THAN 1 VISIT

. UNKNOWN (4)

FS232 DAY SURGERY IN INTERIM

0 NO

1 YES

. UNKNOWN (3)

FS233 ILLNESS WITH VISIT TO DOCTOR IN INTERIM

0 NO

1 YES

. UNKNOWN (9)

FS234 CHECK UP IN INTERIM BY DOCTOR

0 NO

1 YES

. UNKNOWN (2)

FS235 DATE OF THIS FHS EXAM

5/27/99 - 11/27/01

. UNKNOWN (0)

FIRST EXAMINER - CARDIOVASCULAR MEDICATIONS

VARIABLE INFORMATION

FS236 CURRENTLY RECEIVING MEDICATION FOR THE TREATMENT OF

HYPERTENSION?

0 NO

1 YES

. UNKNOWN (8)

FS237 ANY OF THE CARDIOVASCULAR MEDICATIONS BELOW ON THIS

PAGE?

0 NO

1 YES

. UNKNOWN (1)

FS238 CARDIOVASCULAR MEDICATIONS: CARDIAC GLYCOSIDES

0 NO

1 YES, NOW

2 YES, NOT NOW

3 MAYBE

. UNKNOWN (1)

FS239 CARDIOVASCULAR MEDICATIONS: NITROGLYCERINE

0 NO

1 YES, NOW

2 YES, NOT NOW

3 MAYBE

. UNKNOWN (1)

FS240 CARDIOVASCULAR MEDICATIONS: LONGER ACTING NITRATES

(ISORDIL, CARDILATE, ETC)

0 NO

1 YES, NOW

2 YES, NOT NOW

3 MAYBE

. UNKNOWN (1)

FS241 CARDIOVASCULAR MEDICATIONS: CALCIUM CHANNEL BLOCKERS

0 NO

1 YES, NOW

2 YES, NOT NOW

3 MAYBE

. UNKNOWN (1)

FS242 CALCIUM CHANNEL BLOCKER GROUP 0 DOES NOT TAKE CALCIUM CHANNEL BLOCKERS 01 VERAPAMIL 02 DILTIAZEM 03 NIFEDIPINE 04 NICARDIPINE **ISRADIPINE** 05 06 AMLODIPINE 07 FELODIPINE 08 NIMODIPINE 09 MIBEFRADIL 10 NISOLDIPINE 11 BEPRIDIL 12 OTHER . UNKNOWN (1) FS243 CALCIUM CHANNEL BLOCKER: TABLET SIZE OF CALCIUM CHANNEL BLOCKER (MG) 0 DOES NOT TAKE CALCIUM CHANNEL BLOCKERS 1 - 360 . UNKNOWN (10) FS244 CALCIUM CHANNEL BLOCKER: NUMBER OF TIMES CALCIUM **CHANNEL** BLOCKER TAKEN PER DAY 0 DOES NOT TAKE CALCIUM CHANNEL BLOCKERS 1 - 10 . UNKNOWN (3) FS245 CARDIOVASCULAR MEDICATIONS: BETA BLOCKERS 0 NO 1 YES, NOW 2 YES, NOT NOW 3 MAYBE . UNKNOWN (1) FS246 BETA BLOCKER GROUP 0 DOES NOT TAKE BETA BLOCKERS 01 PROPRANOLOL 02 TIMOLOL 03 NADOLOL 04 ATENOLOL

05 METOPROLOL06 PINDOLOL07 CARVEDILOL

08 LABETOLOL

09 OTHER

. UNKNOWN (1)

FS247 BETA BLOCKER: DOSE (MG/DAY) OF BETA BLOCKERS

0 DOES NOT TAKE BETA BLOCKERS

5 - 400

. UNKNOWN (15)

| FS248 | CARDIOVASCULAR MEDICATIONS: LOOP DIURETICS (LASIX, ETC) 0 NO 1 YES, NOW 2 YES, NOT NOW 3 MAYBE . UNKNOWN (2) |
|-------|---|
| FS249 | CARDIOVASCULAR MEDICATIONS: THIAZIDE/K-SPARING DIURETICS (DYAZIDE, MAXIDE, ETC) 0 NO 1 YES, NOW 2 YES, NOT NOW 3 MAYBE . UNKNOWN (1) |
| FS250 | CARDIOVASCULAR MEDICATIONS: THIAZIDE DIURETICS 0 NO 1 YES, NOW 2 YES, NOT NOW 3 MAYBE . UNKNOWN (1) |
| FS251 | CARDIOVASCULAR MEDICATIONS: K-SPARING DIURETICS (ALDACTONE, TRIAMTERENE) 0 NO 1 YES, NOW 2 YES, NOT NOW 3 MAYBE . UNKNOWN (1) |
| FS252 | CARDIOVASCULAR MEDICATIONS: POTASSIUM SUPPLEMENTS 0 NO 1 YES, NOW 2 YES, NOT NOW 3 MAYBE . UNKNOWN (1) |
| FS253 | CARDIOVASCULAR MEDICATIONS: RESERPINE DERIVATIVES 0 NO 1 YES, NOW 2 YES, NOT NOW 3 MAYBE |
| FS254 | . UNKNOWN (2) CARDIOVASCULAR MEDICATIONS: METHYLDOPA |

(ALDOMET)

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

| FS255 | CARDIOVASCULAR MEDICATIONS: ALPHA-1 AGONIST (CLONIDINE, WYTENSIN, GUANABENZ) 0 NO 1 YES, NOW 2 YES, NOT NOW 3 MAYBE . UNKNOWN (1) |
|----------------|--|
| FS256 | CARDIOVASCULAR MEDICATIONS: ALPHA-2 BLOCKERS (PRAZOSIN, TERAZOSIN, DOXAZOSIN) 0 NO 1 YES, NOW 2 YES, NOT NOW 3 MAYBE . UNKNOWN (1) |
| FS257 DRUGS | CARDIOVASCULAR MEDICATIONS: RENIN-ANGIOTENSIN BLOCKING (CAPTOPRIL, ENALAPRIL, LISINOPRIL) 0 NO 1 YES, NOW 2 YES, NOT NOW 3 MAYBE . UNKNOWN (1) |
| FS258 | CARDIOVASCULAR MEDICATIONS: PERIPHERAL VASODILATORS (HYDRALAZINE, MINOXIDIL, ETC) 0 NO 1 YES, NOW 2 YES, NOT NOW 3 MAYBE . UNKNOWN (1) |
| FS259 | CARDIOVASCULAR MEDICATIONS: ANGIOTENSIN II ANTAGONISTS (LOSARTAN ETC) 0 NO 1 YES, NOW 2 YES, NOT NOW 3 MAYBE . UNKNOWN (2) |
| FS260 | CARDIOVASCULAR MEDICATIONS: OTHER ANTI-HYPERTENSIVES 0 NO 1 YES, NOW 2 YES, NOT NOW |

- 3 MAYBE
- . UNKNOWN (1)

FS261 CARDIOVASCULAR MEDICATIONS: ANTIARRHYTHMICS (QUINIDINE, PROCAINAMIDE, NORPACE, DISOPYRAMIDE, ETC.)

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

FS262 CARDIOVASCULAR MEDICATIONS: ANTIPLATELET (ANTURANE, PERSANTINE, ETC.)

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

FS263 CARDIOVASCULAR MEDICATIONS: ANTICOAGULANTS (COUMADIN, WARFARIN, ETC.)

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

FS264 CARDIOVASCULAR MEDICATIONS: OTHER CARDIAC MEDICATION

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

MEDICAL HISTORY - ASPIRIN

VARIABLE INFORMATION

FS265 TAKE ASPIRIN REGULARLY?

0 NO

1 YES

. UNKNOWN (1)

FS266 ASPIRIN: NUMBER ASPIRINS TAKEN REGULARLY

0 DOES NOT TAKE ASPIRIN REGULARLY

1 - 15

. UNKNOWN (1)

FS267 ASPIRIN: ASPIRIN FREQUENCY

0 NEVER

1 DAY

2 WEEK

3 MONTH

4 YEAR

. UNKNOWN (1)

FS268 ASPIRIN: USUAL ASPIRIN DOSE

0 DOES NOT TAKE ASPIRIN REGULARLY

81 BABY

160 HALF DOSE

325 NORMAL

500 EXTRA OR LARGER

. UNKNOWN (2)

FIRST EXAMINER - NONCARDIOVASCULAR MEDICATIONS I

VARIABLE INFORMATION

FS269 NONCARDIOVASCULAR MEDICATIONS: ANTI CHOLESTEROL DRUGS (RESINS - E.G. QUESTRAN, COLESTID)

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

FS270 NONCARDIOVASCULAR MEDICATIONS: ANTI CHOLESTEROL DRUGS (NIACIN OR NICOTINIC ACID)

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

FS271 NONCARDIOVASCULAR MEDICATIONS: ANTI CHOLESTEROL DRUGS (FIBRATES - E.G. GEMFIBROZIL)

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

FS272 NONCARDIOVASCULAR MEDICATIONS: ANTI CHOLESTEROL DRUGS (STATINS - E.G. LOVASTATIN, PRAVASTATIN)

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

FS273 NONCARDIOVASCULAR MEDICATIONS: ANTI CHOLESTEROL DRUGS (OTHER)

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

FS274 NONCARDIOVASCULAR MEDICATIONS: ANTIGOUT - URIC ACID

LOWERING

(ALLOPURINOL, PROBENECID, ETC.)

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

| FS275 | NONCARDIOVASCULAR MEDICATIONS: ANTIGOUT (COLCHICINE) 0 NO 1 YES, NOW 2 YES, NOT NOW 3 MAYBE . UNKNOWN (1) |
|-------|--|
| FS276 | NONCARDIOVASCULAR MEDICATIONS: THYROID EXTRACT (DESICCATED THYROID) 0 NO 1 YES, NOW 2 YES, NOT NOW 3 MAYBE . UNKNOWN (1) |
| FS277 | NONCARDIOVASCULAR MEDICATIONS: THYROXINE (SYNTHROID, ETC.) 0 NO 1 YES, NOW 2 YES, NOT NOW 3 MAYBE . UNKNOWN (1) |
| FS278 | NONCARDIOVASCULAR MEDICATIONS: INSULIN 0 NO 1 YES, NOW 2 YES, NOT NOW 3 MAYBE . UNKNOWN (1) |
| FS279 | INSULIN: TOTAL UNITS A DAY 0 DOES NOT TAKE INSULIN 1 - 50 . UNKNOWN (4) |
| FS280 | NONCARDIOVASCULAR MEDICATIONS: ORAL HYPOGLYCEMICS **SEE NOTE BELOW** 0 NO 1 YES, NOW 2 YES, NOT NOW 3 MAYBE . UNKNOWN (1) |
| FS281 | ORAL HYPOGLYCEMICS: METFORMIN |

SEE NOTE BELOW

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

FS282 ORAL HYPOGLYCEMICS: ROSIGLITAZONE **SEE NOTE BELOW** 0 NO 1 YES, NOW 2 YES, NOT NOW 3 MAYBE . UNKNOWN (23) FS283 ORAL HYPOGLYCEMICS: GLIPIZIDE **SEE NOTE BELOW** 0 NO 1 YES, NOW 2 YES, NOT NOW 3 MAYBE . UNKNOWN (1) FS284 ORAL HYPOGLYCEMICS: GLYBURIDE **SEE NOTE BELOW** 0 NO 1 YES, NOW 2 YES, NOT NOW 3 MAYBE . UNKNOWN (1) FS285 ORAL HYPOGLYCEMICS: CHLORPROPAMIDE **SEE NOTE BELOW** 0 NO 1 YES, NOW 2 YES, NOT NOW 3 MAYBE . UNKNOWN (1) FS286 ORAL HYPOGLYCEMICS: REPAGLINIDE **SEE NOTE BELOW** 0 NO 1 YES, NOW 2 YES, NOT NOW 3 MAYBE . UNKNOWN (23) FS287 ORAL HYPOGLYCEMICS: GLIMEPRIRIDE **SEE NOTE BELOW** 0 NO 1 YES, NOW 2 YES, NOT NOW

- 3 MAYBE
- . UNKNOWN (23)

FS288 ORAL HYPOGLYCEMICS: OTHER

SEE NOTE BELOW

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

FS289 ORAL HYPOGLYCEMICS: UNKNOWN

SEE NOTE BELOW

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

**NOTE: THE ORAL HYPOGLYCEMICS MEDICATIONS SECTION ON THE OFFSITE EXAM FORM

DID NOT INCLUDE FS282 (ROSIGLITAZONE), FS286 (REPAGLINIDE) OR FS287 (GLIMEPRIRIDE). FOR PARTICIPANTS WHO HAD AN OFFSITE EXAM AND FS280 (ORAL

HYPOGLYCEMICS) = 1, 2, OR 3, THESE VARIABLES WERE CODED AS MISSING.

FS290 NONCARDIOVASCULAR MEDICATIONS: ORAL/PATCH ESTROGEN (FOR WOMEN USERS ALSO SEE ESTROGEN SECTION)

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

FS291 NONCARDIOVASCULAR MEDICATIONS: ORAL GLUCOCORTICOIDS (PREDNISONE, CORTISONE, ETC.)

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

FIRST EXAMINER - NONCARDIOVASCULAR MEDICATIONS II

VARIABLE INFORMATION

FS292 NONCARDIOVASCULAR MEDICATIONS: NON-STEROIDAL

ANTI-INFLAMMATORY AGENTS (NSAIDS)

(MOTRIN, IBUPROFEN, NAPROSYN, INDOCIN, CLINORIL)

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

FS293 NONCARDIOVASCULAR MEDICATIONS: ANALGESIC-NARCOTICS (DEMEROL, CODEINE, DILAUDID, ETC.)

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

FS294 NONCARDIOVASCULAR MEDICATIONS: ANALGESIC NON-NARCOTICS

(ACETAMINOPHEN, ETC.)

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

FS295 NONCARDIOVASCULAR MEDICATIONS: ANTIHISTAMINES

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

FS296 NONCARDIOVASCULAR MEDICATIONS: ANTIULCER (TAGAMET, RANITIDINE, PROBANTHINE, H ION INHIBITORS)

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

FS297 NONCARDIOVASCULAR MEDICATIONS: ANTI-ANXIETY, SEDATIVE/HYPNOTICS (LIBRIUM, VALIUM, ETC.)

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

| FS298 | NONCARDIOVASCULAR MEDICATIONS: SLEEPING PILLS 0 NO 1 YES, NOW 2 YES, NOT NOW 3 MAYBE . UNKNOWN (1) |
|-------|--|
| FS299 | NONCARDIOVASCULAR MEDICATIONS: ANTI-DEPRESSANTS 0 NO 1 YES, NOW 2 YES, NOT NOW 3 MAYBE . UNKNOWN (1) |
| FS300 | NONCARDIOVASCULAR MEDICATIONS: EYE DROPS 0 NO 1 YES, NOW 2 YES, NOT NOW 3 MAYBE . UNKNOWN (1) |
| FS301 | NONCARDIOVASCULAR MEDICATIONS: ANTIBIOTICS 0 NO 1 YES, NOW 2 YES, NOT NOW 3 MAYBE . UNKNOWN (2) |
| FS302 | NONCARDIOVASCULAR MEDICATIONS: ANTI-PARKINSON DRUGS (SINEMET, L-DOPA, SYMMETREL, COGENTIN, ETC.) 0 NO 1 YES, NOW 2 YES, NOT NOW 3 MAYBE . UNKNOWN (1) |
| FS303 | NONCARDIOVASCULAR MEDICATIONS: ANTICONVULSANTS (DILANTIN, PHENOBARBITAL, TEGRETOL, MYSOLINE, ETC.) 0 NO 1 YES, NOW 2 YES, NOT NOW 3 MAYBE . UNKNOWN (1) |
| FS304 | NONCARDIOVASCULAR MEDICATIONS: MEDICATIONS FOR MEMORY |

LOSS OR DEMENTIA (TACRINE, DONEPAZIL)

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

FS305 AEROSOLS

NONCARDIOVASCULAR MEDICATIONS: BRONCHODILATORS AND

AEROSOLS

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

FS306 NONCARDIOVASCULAR MEDICATIONS: OSTEOPOROSIS **MEDICATIONS** 0 NO 1 YES, NOW 2 YES, NOT NOW 3 MAYBE . UNKNOWN (1) FS307 OSTEOPOROSIS MEDICATIONS: BISPHOSPHORATES (ALENDRONATE, (FOSAMAX), ETIDRONATE) 0 NO 1 YES, NOW 2 YES, NOT NOW 3 MAYBE . UNKNOWN (1) FS308 OSTEOPOROSIS MEDICATIONS: CALCITONIN 0 NO 1 YES, NOW 2 YES, NOT NOW 3 MAYBE . UNKNOWN (2) FS309 OSTEOPOROSIS MEDICATIONS: SERMS, EVISTA (RALOXIFENE) 0 NO 1 YES, NOW 2 YES, NOT NOW 3 MAYBE . UNKNOWN (1) FS310 OSTEOPOROSIS MEDICATIONS: OTHER 0 NO OR NOT TAKING OSTEOPORISIS MEDICATIONS 1 YES, NOW 2 YES, NOT NOW 3 MAYBE . UNKNOWN (1) FS311 NONCARDIOVASCULAR MEDICATIONS: OTHERS (INCLUDING VITAMINS) 0 NO 1 YES, NOW 2 YES, NOT NOW 3 MAYBE . UNKNOWN (2) FS312 PHYSICIAN SYSTOLIC BLOOD PRESSURE - 1ST READING

(TO NEAREST 2MM HG)
SEE NOTE BELOW
84 - 240
. UNKNOWN (7)

. UNKNOWN (1)

FS313 PHYSICIAN DIASTOLIC BLOOD PRESSURE - 1ST READING (TO NEAREST 2MM HG)

SEE NOTE BELOW

30 - 110

. UNKNOWN (13)

**NOTE: FOR OFFSITE EXAMS, PHYSICIAN BLOOD PRESSURES ARE RECORDED BY OFFSITE TECHNICIANS.

MEDICAL HISTORY - GENITOURINARY AND THYROID DISEASE _____ VARIABLE INFORMATION -----FS314 FEMALE HORMONE REPLACEMENT: ESTROGEN REPLACEMENT IN **INTERIM** (E.G. PREMARIN) 0 NO 1 YES, NOW 2 YES, NOT NOW 8 MAN . UNKNOWN (0) FS315 FEMALE HORMONE REPLACEMENT: DOSE/DAY OF PREMARIN CONJUGATED ESTROGENS, OR OTHER ORAL ESTROGEN 0 NO 1 0.3 MG 2 0.625 MG 3 0.9 MG 4 1.25 MG 5 2.5 MG 6 OTHER 8 MAN . UNKNOWN (6) FS316 FEMALE HORMONE REPLACEMENT: PATCH DOSE OF ESTROGEN 0 NO 1 0.5 MG/WEEK 2 OTHER 8 MAN . UNKNOWN (1) FS317 FEMALE HORMONE REPLACEMENT: NUMBER OF DAYS A MONTH **TAKING ESTROGENS** 0 HAS NOT USED ESTROGEN REPLACEMENT IN INTERIM 4 - 30 88 MAN

INTERIM

FS318

FEMALE HORMONE REPLACEMENT: ESTROGEN CREAM USE IN

0 NO

. UNKNOWN (1)

- 1 YES, NOW
- 2 YES, NOT NOW
- 8 MAN
- . UNKNOWN (1)

FS319 INTERIM

FEMALE HORMONE REPLACEMENT: PROGESTIN REPLACEMENT IN

(E.G. PROVERA)

- 0 NO
- 1 YES, NOW
- 2 YES, NOT NOW
- 8 MAN
- . UNKNOWN (0)

| FS320 | FEMALE HORMONE REPLACEMENT: DOSE/DAY OF PROGESTIN 0 NO 1 1.25 MG 2 2.5 MG 3 5.0 MG 4 10.0 MG 5 OTHER 8 MAN . UNKNOWN (1) |
|-----------------|--|
| FS321 TAKING | FEMALE HORMONE REPLACEMENT: NUMBER OF DAYS A MONTH |
| 1111111 | PROGESTINS |
| | 0 HAS NOT USED PROGESTIN REPLACEMENT IN INTERIM 7 - 30 |
| | 88 MAN |
| | . UNKNOWN (0) |
| FS322 | PROSTATE TROUBLE IN INTERIM 0 NO |
| | 1 YES, NOW |
| | 2 YES, NOT NOW |
| | 8 WOMAN |
| | . UNKNOWN (0) |
| FS323 | PROSTATE SURGERY IN INTERIM 0 NO |
| | 1 YES, NOW |
| | 2 YES, NOT NOW |
| | 8 WOMAN |
| | . UNKNOWN (0) |
| FS324 | INTERIM DIAGNOSIS OF A THYROID CONDITION 0 NO |
| | 1 YES |
| | . UNKNOWN (6) |
| | |

ALCOHOL CONSUMPTION (USUAL OVER PAST YEAR)

VARIABLE INFORMATION

FS325 DO YOU NOW CONSUME, OR HAVE YOU EVER CONSUMED, AT LEAST 12

DRINKS OF ANY TYPE OF ALCOHOL (BEER, WINE, OR

LIQUOR/SPIRITS)

DURING THE PERIOD OF A YEAR?

0 NO

1 YES

. UNKNOWN (104)

FS326 DURING THE PAST YEAR, HAVE YOU CONSUMED AT LEAST 12 DRINKS

OF ANY TYPE OF ALCOHOL (BEER, WINE OR SPIRITS)?

0 NO

1 YES

. UNKNOWN (89)

FS327 BEER: IN THE PAST YEAR, HAVE YOU HAD ANY BEER (12 OZ.)? **SEE NOTE BELOW**

 $0\,$ NO OR DRANK LESS THAN 12 ALCOHOLIC DRINKS OF ANY TYPE IN THE PAST YEAR

1 YES

. UNKNOWN (89)

FS328 BEER: AVERAGE NUMBER OF DAYS/WEEK YOU DRINK BEER (12 OZ.)
SEE NOTE BELOW

0 NONE OR DRANK BEER LESS THAN ONCE PER WEEK

1 - 7

. UNKNOWN (92)

FS329 BEER: AVERAGE NUMBER OF DRINKS PER WEEK (12 OZ.)

SEE NOTE BELOW

0 NONE OR DRANK LESS THAN ONE BEER PER WEEK

1 - 14

. UNKNOWN (92)

FS330 BEER: AVERAGE NUMBER OF DRINKS PER MONTH (12 OZ.)

SEE NOTE BELOW

0 NONE OR DRANK MORE THAN ONE BEER PER WEEK

1 - 6

. UNKNOWN (90)

FS331 WHITE WINE: IN THE PAST YEAR, HAVE YOU HAD ANY WHITE WINE? (OR ROSE, CHAMPAGNE) (4-5 OZ.)

SEE NOTE BELOW

- $0\,$ NO OR DRANK LESS THAN 12 ALCOHOLIC DRINKS OF ANY TYPE IN THE PAST YEAR
 - 1 YES
 - . UNKNOWN (89)
- FS332 WHITE WINE: AVERAGE NUMBER OF DAYS/WEEK YOU DRINK WHITE WINE

(4-5 OZ.)

SEE NOTE BELOW

- 0 NONE OR DRANK WHITE WINE LESS THAN ONCE PER WEEK
- 1 7
- . UNKNOWN (89)

| FS333 | WHITE WINE: AVERAGE NUMBER OF DRINKS PER WEEK (4-5 OZ.) **SEE NOTE BELOW** 0 NONE OR DRANK LESS THAN ONE WHITE WINE PER WEEK 1 - 28 . UNKNOWN (89) |
|---------------|--|
| FS334 | WHITE WINE: AVERAGE NUMBER OF DRINKS PER MONTH (4-5 OZ.) **SEE NOTE BELOW** 0 NONE OR DRANK MORE THAN ONE WHITE WINE PER WEEK 1 - 4 . UNKNOWN (89) |
| FS335 | RED WINE: IN THE PAST YEAR, HAVE YOU HAD ANY RED WINE? (E.G. PORT/SHERRY) (4-5 OZ.) **SEE NOTE BELOW** 0 NO OR DRANK LESS THAN 12 ALCOHOLIC DRINKS OF ANY TYPE IN THE PAST YEAR 1 YES . UNKNOWN (89) |
| FS336 WINE | RED WINE: AVERAGE NUMBER OF DAYS/WEEK YOU DRINK RED (4-5 OZ.) **SEE NOTE BELOW** 0 NONE OR DRANK RED WINE LESS THAN ONCE PER WEEK 1 - 7 . UNKNOWN (89) |
| FS337 | RED WINE: AVERAGE NUMBER OF DRINKS PER WEEK (4-5 OZ.) **SEE NOTE BELOW** 0 NONE OR DRANK LESS THAN ONE RED WINE PER WEEK 1 - 28 . UNKNOWN (89) |
| FS338 | RED WINE: AVERAGE NUMBER OF DRINKS PER MONTH (4-5 OZ.) **SEE NOTE BELOW** 0 NONE OR DRANK MORE THAN ONE RED WINE PER WEEK 1 - 2 . UNKNOWN (89) |
| FS339 | OTHER WINE: IN THE PAST YEAR, HAVE YOU HAD ANY OTHER |

WINE?

(4-5 OZ.)

SEE NOTE BELOW

- $0\,$ NO OR DRANK LESS THAN 12 ALCOHOLIC DRINKS OF ANY TYPE IN THE PAST YEAR
 - 1 YES
 - . UNKNOWN (89)
- FS340 OTHER WINE: AVERAGE NUMBER OF DAYS/WEEK YOU DRINK (4-5 OZ.)
 - **SEE NOTE BELOW**
 - 0 NONE OR DRANK OTHER WINE LESS THAN ONCE PER WEEK
 - . UNKNOWN (89)

FS341 OTHER WINE: AVERAGE NUMBER OF DRINKS PER WEEK (4-5 OZ.)**SEE NOTE BELOW** 0 NONE OR DRANK LESS THAN ONE OTHER WINE PER WEEK . UNKNOWN (89) FS342 OTHER WINE: AVERAGE NUMBER OF DRINKS OF OTHER WINE PER **MONTH** (4-5 OZ.) **SEE NOTE BELOW** 0 NONE OR DRANK MORE THAN ONE OTHER WINE PER WEEK 3 . UNKNOWN (89) FS343 LIQUOR: IN THE PAST YEAR, HAVE YOU HAD ANY LIQUOR/SPIRITS? $(1 \ 1/2 \ OZ)$ **SEE NOTE BELOW** 0 NO OR DRANK LESS THAN 12 ALCOHOLIC DRINKS OF ANY TYPE IN THE PAST YEAR 1 YES . UNKNOWN (90) FS344 LIQUOR: AVERAGE NUMBER OF DAYS/WEEK YOU DRINK LIQUOR/SPIRITS $(1 \ 1/2 \ OZ.)$ **SEE NOTE BELOW** 0 NONE OR DRANK LIQUOR LESS THAN ONCE PER WEEK 1 - 7 . UNKNOWN (93) FS345 LIQUOR: AVERAGE NUMBER OF DRINKS PER WEEK $(1 \ 1/2 \ OZ.)$ **SEE NOTE BELOW** 0 NONE OR DRANK LESS THAN ONE SERVING OF LIQUOR PER WEEK 1 - 42 . UNKNOWN (93) FS346 LIQUOR: AVERAGE NUMBER OF DRINKS PER MONTH (1 1/2 OZ.) **SEE NOTE BELOW** 0 NONE OR DRANK MORE THAN ONE SERVING OF LIQUOR PER WEEK 1 - 3

. UNKNOWN (91)

**NOTE: FOR EACH BEVERAGE, IF PARTICIPANT DRANK THAT BEVERAGE AT LEAST ONCE

A WEEK, AVERAGE NUMBER OF DAYS PER WEEK AND AVERAGE DRINKS PER WEEK WERE CODED

AND AVERAGE NUMBER OF DRINKS PER MONTH WAS CODED AS 0. HOWEVER, IF PARTICIPANT

DRANK THE BEVERAGE LESS THAN ONCE PER WEEK, AVERAGE NUMBER OF DRINKS PER MONTH

WAS CODED AND BOTH AVERAGE NUMBER OF DAYS PER WEEK AND AVERAGE NUMBER OF

DRINKS PER WEEK WERE CODED AS 0. THUS, TO CALCULATE DRINKS PER WEEK OR DRINKS

PER MONTH, YOU MUST USE BOTH AVERAGE NUMBER OF DRINKS PER WEEK AND AVERAGE

NUMBER OF DRINKS PER MONTH (E.G. AVERAGE DRINKS PER MONTH = (AVERAGE DRINKS PER

WEEK*4) + AVERAGE DRINKS PER MONTH).

SMOKING STATUS

VARIABLE INFORMATION

FS347 SMOKING: SMOKED CIGARETTES REGULARLY IN THE LAST YEAR?

0 NO

1 YES

. UNKNOWN (3)

FS348 SMOKING: HOW MANY CIGARETTES DO/DID YOU SMOKE A DAY?

0 DID NOT SMOKE CIGARETTES IN THE LAST YEAR

1 1 OR LESS

2 - 30

. UNKNOWN (3)

RESPIRATORY QUESTIONS _____ VARIABLE INFORMATION -----FS349 DO YOU USUALLY COUGH ON MOST DAYS FOR 3 CONSECUTIVE MONTHS OR MORE DURING THE YEAR? 0 NO 1 YES, NEW IN INTERIM 2 YES, OLD . UNKNOWN (2) FS350 DO YOU USUALLY BRING UP PHLEGM FROM YOUR CHEST ON MOST DAYS FOR 3 CONSECUTIVE MONTHS OR MORE DURING THE YEAR? 0 NO 1 YES . UNKNOWN (3) FS351 HAVE YOU HAD ASTHMA IN THE INTERIM? 0 NO1 YES, NEW 2 YES, OLD . UNKNOWN (4) FS352 HAVE YOU HAD WHEEZING OR WHISTLING IN YOUR CHEST AT ANY TIME IN THE LAST 12 MONTHS? 0 NO 1 YES . UNKNOWN (6) FS353 NIGHT COUGH 0 NO 1 YES . UNKNOWN (3) FS354 DYSPNEA ON EXERTION

1 CLIMBING STAIRS OR VIGOROUS EXERTION2 RAPID WALKING OR MODERATE EXERTION

DYSPNEA HAS INCREASED OVER THE PAST TWO YEARS

3 ANY SLIGHT EXERTION

. UNKNOWN (35)

0 NO

FS355

0 NO

1 YES

. UNKNOWN (52)

FS356 SLEEP ON 2 OR MORE PILLOWS TO HELP YOU BREATHE

0 NO

1 YES

. UNKNOWN (10)

FS357 HAVE YOU AWAKENED SUDDENLY VERY SHORT OF BREATH, **GASPING** OR CHOKING (PND)? (CODE MOST SEVERE SYMPTOMS IN INTERIM) 0 NEVER 1 1 OR 2 TIMES/YEAR 2 FEW NIGHTS/MONTH UNDER SPECIAL CIRCUMSTANCES 3 AT LEAST ONCE WEEKLY, BUT IRREGULAR PATTERN 4 3 TO 5 NIGHTS/WEEK 5 5 TO 7 NIGHTS/WEEK . UNKNOWN (5) FS358 ANKLE EDEMA BILATERALLY 0 NO 1 YES 2 MAYBE . UNKNOWN (3) FS359 BEEN TOLD YOU HAVE HAD HEART FAILURE OR CONGESTIVE HEART FAILURE IN THE INTERIM 0 NO 1 YES 2 MAYBE . UNKNOWN (3) FS360 BEEN HOSPITALIZED FOR HEART FAILURE IN INTERIM 0 NO1 YES 2 MAYBE . UNKNOWN (3) FS361 1ST EXAMINER OPINIONS: CONGESTIVE HEART FAILURE 0 NO 1 YES 2 MAYBE . UNKNOWN (4) FS362 1ST EXAMINER OPINIONS: CHRONIC BRONCHITIS (COUGH THAT PRODUCES SPUTUM AT LEAST 3 MONTHS IN PAST 12 MOS) 0 NO 1 YES 2 MAYBE . UNKNOWN (2)

FIRST EXAMINER - CORONARY HEART DISEASE OPINIONS IN INTERIM

FS363 ANY CHEST DISCOMFORT SINCE LAST EXAM?

0 NO

1 YES

2 MAYBE

. UNKNOWN (7)

FS364 CHEST DISCOMFORT WITH EXERTION OR EXCITEMENT

0 NO

1 YES

2 MAYBE

. UNKNOWN (13)

FS365 CHEST DISCOMFORT WHEN QUIET OR RESTING

0 NO

1 YES

2 MAYBE

. UNKNOWN (13)

FS366 CHEST DISCOMFORT: DATE OF ONSET (MONTH)

0 NO CHEST DISCOMFORT SINCE LAST EXAM

1 - 12

. UNKNOWN (67)

NOTE: FS366 AND FS367 TAKEN TOGETHER FORM DATE OF ONSET OF CHEST DISCOMFORT

FS367 CHEST DISCOMFORT: DATE OF ONSET (YEAR)

0 NO CHEST DISCOMFORT SINCE LAST EXAM

1971 - 2001

. UNKNOWN (42)

NOTE: FS366 AND FS367 TAKEN TOGETHER FORM DATE OF ONSET

OF CHEST DISCOMFORT

FS368 CHEST DISCOMFORT: USUAL DURATION (MINUTES)

0 NO CHEST DISCOMFORT SINCE LAST EXAM

1 1 MINUTE OR LESS

2 - 240

900 15 HOURS OR MORE

. UNKNOWN (27)

FS369 CHEST DISCOMFORT: LONGEST DURATION (MINUTES)

- 0 NO CHEST DISCOMFORT SINCE LAST EXAM
- 1 1 MINUTE OR LESS
- 2 720
- 900 15 HOURS OR MORE
- . UNKNOWN (29)

| FS370 | CHEST DISCOMFORT: LOCATION 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 OTHER 6 COMBINATION . UNKNOWN (11) |
|-------|--|
| FS371 | CHEST DISCOMFORT: RADIATION 0 NO 1 LEFT SHOULDER OR ARM 2 NECK 3 RIGHT SHOULDER OR ARM 4 BACK 5 ABDOMEN 6 OTHER 7 COMBINATION . UNKNOWN (13) |
| FS372 | CHEST DISCOMFORT: FREQUENCY (NUMBER IN PAST MONTH) 0 ZERO TIMES IN THE PAST MONTH OR NO CHEST DISCOMFORT SINCE LAST EXAM 1 - 60 . UNKNOWN (16) |
| FS373 | CHEST DISCOMFORT: FREQUENCY (NUMBER IN PAST YEAR) 0 ZERO TIMES IN THE PAST YEAR OR NO CHEST DISCOMFORT SINCE LAST EXAM 1 - 100 . UNKNOWN (32) |
| FS374 | CHEST DISCOMFORT: TYPE 0 NO CHEST DISCOMFORT SINCE LAST EXAM 1 PRESSURE, HEAVY, VISE 2 SHARP 3 DULL 4 OTHER . UNKNOWN (19) |
| FS375 | CHEST DISCOMFORT: RELIEF BY NITROGLYCERINE IN < 15 MINUTES 0 NO RELIEF OR NO CHEST DISCOMFORT SINCE LAST EXAM 1 YES 8 NOT TRIED |

. UNKNOWN (17)

FS376 CHEST DISCOMFORT: RELIEF BY REST IN < 15 MINUTES

- 0 NO RELIEF OR NO CHEST DISCOMFORT SINCE LAST EXAM
- 1 YES
- 8 NOT TRIED
- . UNKNOWN (16)

| FS377 | CHEST DISCOMFORT: RELIEF SPONTANEOUSLY IN < 15 MINUTES 0 NO RELIEF OR NO CHEST DISCOMFORT SINCE LAST EXAM 1 YES 8 NOT TRIED . UNKNOWN (15) |
|-------------------|---|
| FS378 | CHEST DISCOMFORT: RELIEF BY OTHER CAUSE IN < 15 MINUTES 0 NO RELIEF OR NO CHEST DISCOMFORT SINCE LAST EXAM 1 YES 8 NOT TRIED . UNKNOWN (15) |
| FS379 | 1ST EXAMINER OPINIONS: ANGINA PECTORIS IN INTERIM 0 NO 1 YES 2 MAYBE . UNKNOWN (7) |
| FS380 REVASCUL | 1ST EXAMINER OPINIONS: ANGINA PECTORIS SINCE ARIZATION PROCEDURE 0 NO 1 YES 2 MAYBE . UNKNOWN (5) |
| FS381 | 1ST EXAMINER OPINIONS: CORONARY INSUFFICIENCY IN INTERIM 0 NO 1 YES 2 MAYBE . UNKNOWN (5) |
| FS382 | 1ST EXAMINER OPINIONS: MYOCARDIAL INFARCT IN INTERIM 0 NO 1 YES 2 MAYBE . UNKNOWN (5) |

FIRST EXAMINER - SYNCOPE HISTORY IN INTERIM

VARIABLE INFORMATION

FS383 HAVE YOU FAINTED OR LOST CONSCIOUSNESS IN THE INTERIM?

IF DUE TO STROKE SKIP TO FS395-FS419

(IF EVENT IMMEDIATELY PRECEDED BY HEAD INJURY OR ACCIDENT CODE AS NO)

0 NO

1 YES

2 MAYBE

. UNKNOWN (3)

FS384 FAINTED/L.O.C. - NUMBER OF EPISODES IN THE PAST TWO YEARS

0 NONE

1 - 5

. UNKNOWN (8)

FS385 FAINTED/L.O.C. - DATE OF FIRST EPISODE (MONTH)

0 HAVE NOT FAINTED OR LOST CONSCIOUSNESS IN INTERIM

1 - 11

. UNKNOWN (18)

NOTE: FS385 AND FS386 TAKEN TOGETHER FORM DATE OF FIRST

L.O.C. EPISODE

FS386 FAINTED/L.O.C. - DATE OF FIRST EPISODE (YEAR)

0 HAVE NOT FAINTED OR LOST CONSCIOUSNESS IN INTERIM

1918 - 2001

. UNKNOWN (10)

NOTE: FS385 AND FS386 TAKEN TOGETHER FORM DATE OF FIRST

L.O.C. EPISODE

FS387 USUAL DURATION OF LOSS OF CONSCIOUSNESS (MINUTES)

0 HAVE NOT FAINTED OR LOST CONSCIOUSNESS IN INTERIM

1 ONE MINUTE OR LESS

2 - 20

. UNKNOWN (30)

FS388 FAINTED/L.O.C. - DID YOU HAVE ANY INJURY CAUSED BY THE

EVENT?

0 NO OR HAVE NOT FAINTED OR LOST CONSCIOUSNESS

IN INTERIM

1 YES

2 MAYBE

. UNKNOWN (7)

FS389 FAINTED/L.O.C. - ER/HOSPITALIZED OR SAW M.D.

- 0 NO OR HAVE NOT FAINTED OR LOST CONSCIOUSNESS IN INTERIM
- 1 HOSP/ER
- 2 SAW M.D.
- . UNKNOWN (6)

| FS390 | 1ST EXAMINER OPINIONS: SYNCOPE 0 NO 1 YES 2 MAYBE 3 PRESYNCOPE . UNKNOWN (3) |
|-------|--|
| FS391 | 1ST EXAMINER OPINIONS: CARDIAC SYNCOPE 0 NO 1 YES 2 MAYBE . UNKNOWN (15) |
| FS392 | 1ST EXAMINER OPINIONS: VASOVAGAL SYNCOPE 0 NO 1 YES 2 MAYBE . UNKNOWN (15) |
| FS393 | 1ST EXAMINER OPINIONS: SYNCOPE - OTHER 0 NO 1 YES 2 MAYBE . UNKNOWN (18) |
| FS394 | 1ST EXAMINER OPINIONS: SEIZURE DISORDER 0 NO 1 YES 2 MAYBE . UNKNOWN (5) |

FIRST EXAMINER - CEREBROVASCULAR AND NEUROLOGICAL HISTORY AND OPINIONS

FS395 SUDDEN MUSCULAR WEAKNESS IN INTERIM

0 NO

1 YES

2 MAYBE

. UNKNOWN (12)

FS396 SUDDEN SPEECH DIFFICULTY IN INTERIM

0 NO

1 YES

2 MAYBE

. UNKNOWN (11)

FS397 SUDDEN VISUAL DEFECT IN INTERIM

0 NO

1 YES

2 MAYBE

. UNKNOWN (28)

FS398 DOUBLE VISION IN INTERIM

0 NO

1 YES

2 MAYBE

. UNKNOWN (26)

FS399 SUDDEN LOSS OF VISION IN ONE EYE IN INTERIM

0 NO

1 YES

2 MAYBE

. UNKNOWN (26)

FS400 UNCONSCIOUSNESS IN INTERIM

0 NO

1 YES

2 MAYBE

. UNKNOWN (5)

FS401 NUMBNESS, TINGLING IN INTERIM

0 NO

1 YES

- 2 MAYBE
- . UNKNOWN (25)

FS402 NUMBNESS AND TINGLING IS POSITIONAL

- 0 NO OR NO NUMBNESS, TINGLING
- 1 YES
- 2 MAYBE
- . UNKNOWN (29)

FS403 HEAD CT OR MRI SCAN SINCE LAST EXAM

- 0 NO
- 1 YES
- 2 MAYBE
- . UNKNOWN (9)

| FS404 | SEEN BY NEUROLOGIST SINCE LAST EXAM 0 NO 1 YES 2 MAYBE . UNKNOWN (13) |
|------------------------|--|
| FS405 OR INTERIM | CEREBROVASCULAR EVENT: EXAMINER'S OPINION THAT "SERIOUS" "SIGNIFICANT" CEREBROVASCULAR EVENT TOOK PLACE IN THE 0 NO 1 YES 2 MAYBE . UNKNOWN (31) |
| FS406 | CEREBROVASCULAR EVENT: DATE OF EVENT (MONTH) 0 NO CEREBROVASCULAR EVENT IN THE INTERIM 3 - 12 . UNKNOWN (42) |
| FS407 | CEREBROVASCULAR EVENT: DATE OF EVENT (YEAR) 0 NO CEREBROVASCULAR EVENT IN THE INTERIM 1998 - 2000 . UNKNOWN (40) |
| FS408 | CEREBROVASCULAR EVENT: ONSET TIME 0 NO CEREBROVASCULAR EVENT IN THE INTERIM 1 ACTIVE 2 DURING SLEEP 3 WHILE ARISING . UNKNOWN (47) |
| FS409 | CEREBROVASCULAR EVENT: 24 HOUR MILITARY TIME EXACT/APPROXIMATE HOUR EVENT TOOK PLACE 0 0 HOURS OR NO CEREBROVASCULAR EVENT IN THE INTERIM 8 - 18 . UNKNOWN (53) NOTE: FS409 AND FS410 TAKEN TOGETHER FORM MILITARY TIME OF EVENT |
| FS410 | CEREBROVASCULAR EVENT: 24 HOUR MILITARY TIME EXACT/APPROXIMATE MINUTE EVENT TOOK PLACE 0 0 MINUTES OR NO CEREBROVASCULAR EVENT IN THE INTERIM |

30

. UNKNOWN (53)

NOTE: FS409 AND FS410 TAKEN TOGETHER FORM MILITARY TIME OF EVENT

FS411 CEREBROVASCULAR EVENT: DURATION EVENT LASTED (DAYS)

- $0\ 0$ DAYS OR NO CEREBROVASCULAR EVENT IN THE INTERIM
- 2 14
- . UNKNOWN (53)

NOTE: FS411, FS412, AND FS413 TAKEN TOGETHER FORM TOTAL DURATION OF EVENT

| FS412 | CEREBROVASCULAR EVENT: DURATION EVENT LASTED (HOURS) 0 0 HOURS OR NO CEREBROVASCULAR EVENT IN THE INTERIM . UNKNOWN (56) NOTE: FS411, FS412, AND FS413 TAKEN TOGETHER FORM TOTAL DURATION OF EVENT |
|-------------------|---|
| FS413 | CEREBROVASCULAR EVENT: DURATION EVENT LASTED (MINUTES) 0 0 MINUTES OR NO CEREBROVASCULAR EVENT IN THE INTERIM 3 - 15 . UNKNOWN (56) NOTE: FS411, FS412, AND FS413 TAKEN TOGETHER FORM TOTAL DURATION OF EVENT |
| FS414 | CEREBROVASCULAR EVENT: HOSPITALIZED OR SAW M.D. 0 NO OR NO CEREBROVASCULAR EVENT IN THE INTERIM 1 HOSPITALIZED 2 SAW M.D UNKNOWN (39) |
| FS415 HOSPITAL | CEREBROVASCULAR EVENT: NUMBER OF DAYS STAYED AT THE 0 0 DAYS STAYED OR NO CEREBROVASCULAR EVENT IN THE INTERIM 2 - 10 . UNKNOWN (49) |
| FS416 | 1ST EXAMINER OPINION: STROKE IN INTERIM 0 NO 1 YES 2 MAYBE . UNKNOWN (13) |
| FS417 | 1ST EXAMINER OPINION: TRANSIENT ISCHAEMIC ATTACK (TIA) IN INTERIM 0 NO 1 YES 2 MAYBE . UNKNOWN (13) |
| FS418 | 1ST EXAMINER OPINION: PARKINSONISM IN INTERIM 0 NO 1 YES 2 MAYBE . UNKNOWN (5) |

FS419 1ST EXAMINER OPINION: OTHER EVENT IN INTERIM

- 0 NO
- 1 YES
- 2 MAYBE
- . UNKNOWN (7)

FIRST EXAMINER - PERIPHERAL VASCULAR HISTORY AND OPINION

VARIABLE INFORMATION

FS420 CAN YOU WALK 50 FEET WITHOUT HELP?

0 ABLE TO WALK 50 FEET WITHOUT HELP

1 NEEDS HELP

2 CAN'T WALK

. UNKNOWN (3)

FS421 DO YOU HAVE LOWER LIMB DISCOMFORT WHILE WALKING?

0 NO

1 YES

2 CAN'T WALK

. UNKNOWN (5)

FS422 IF WALKING ON LEVEL GROUND, HOW MANY CITY BLOCKS UNTIL SYMPTOMS DEVELOP? (WHERE 10 BLOCKS = 1 MILE, CODE AS NO IF

MORE THAN 98 BLOCKS REQUIRED TO DEVELOP SYMPTOMS)

0 NO SYMPTOMS OR ZERO BLOCKS UNTIL SYMPTOMS DEVELOP

1 - 15 BLOCKS

. UNKNOWN (42)

FS423 YEAR SYMPTOMS STARTED

0 NO LOWER LIMB DISCOMFORT WHILE WALKING

1942 - 2001

. UNKNOWN (52)

FS424 VASCULAR SYMPTOMS: DISCOMFORT IN LEFT CALF WHILE

WALKING

0 NO

1 YES

. UNKNOWN (33)

FS425 VASCULAR SYMPTOMS: DISCOMFORT IN RIGHT CALF WHILE

WALKING

0 NO

1 YES

. UNKNOWN (33)

FS426 VASCULAR SYMPTOMS: DISCOMFORT IN LOWER LEFT EXTREMITY

(NOT CALF) WHILE WALKING

0 NO

1 YES

. UNKNOWN (33)

FS427 VASCULAR SYMPTOMS: DISCOMFORT IN LOWER RIGHT EXTREMITY (NOT CALF) WHILE WALKING

0 NO

1 YES

. UNKNOWN (33)

| FS428 | VASCULAR SYMPTOMS: OCCURS WITH FIRST STEPS 0 NO OR NO LOWER LIMB DISCOMFORT WHILE WALKING 1 YES . UNKNOWN (33) |
|-------|--|
| FS429 | VASCULAR SYMPTOMS: OCCURS AFTER WALKING A WHILE 0 NO OR NO LOWER LIMB DISCOMFORT WHILE WALKING 1 YES . UNKNOWN (33) |
| FS430 | VASCULAR SYMPTOMS: RELATED TO RAPIDITY OF WALKING OR STEEPNESS 0 NO OR NO LOWER LIMB DISCOMFORT WHILE WALKING 1 YES . UNKNOWN (45) |
| FS431 | VASCULAR SYMPTOMS: FORCED TO STOP WALKING 0 NO OR NO LOWER LIMB DISCOMFORT WHILE WALKING 1 YES . UNKNOWN (34) |
| FS432 | VASCULAR SYMPTOMS: TIME FOR DISCOMFORT TO BE RELIEVED BY STOPPING (MINUTES) 0 NO RELIEF WITH STOPPING OR NO LOWER LIMB DISCOMFORT WHILE WALKING 1 - 30 88 NOT APPLICABLE . UNKNOWN (42) |
| FS433 | VASCULAR SYMPTOMS: NUMBER OF DAYS/MONTH OF LOWER LIMB DISCOMFORT 0 NO LOWER LIMB DISCOMFORT WHILE WALKING 1 - 30 88 NOT APPLICABLE . UNKNOWN (49) |
| FS434 | VENOUS DISEASE: DEEP VEIN THROMBOSIS (BLOOD CLOTS IN LEGS OR ARMS) - LEFT 0 NO 1 YES . UNKNOWN (45) |
| FS435 | VENOUS DISEASE: DEEP VEIN THROMBOSIS (BLOOD CLOTS IN LEGS OR ARMS) - RIGHT 0 NO |

- 1 YES
- . UNKNOWN (45)

FS436 1ST EXAMINER OPINION: INTERMITTENT CLAUDICATION

- 0 NO
- 1 YES
- 2 MAYBE
- . UNKNOWN (34)

FIRST EXAMINER - CHD AND COMPLICATIONS

VARIABLE INFORMATION

FS437 EXERCISE TOLERANCE TEST (MOST RECENT ONLY)

- 0 NO
- 1 YES
- 2 MAYBE
- . UNKNOWN (3)

NOTE: SOME PROCEDURES MAY NOT HAVE BEEN DONE IN INTERIM

FS438 YEAR EXERCISE TOLERANCE TEST DONE

(MOST RECENT ONLY)

0 NOT DONE

1996 - 2001

. UNKNOWN (7)

NOTE: SOME PROCEDURES MAY NOT HAVE BEEN DONE IN INTERIM

FS439 CORONARY ARTERIOGRAM (MOST RECENT ONLY)

- 0 NO
- 1 YES
- 2 MAYBE
- . UNKNOWN (3)

NOTE: SOME PROCEDURES MAY NOT HAVE BEEN DONE IN INTERIM

FS440 YEAR CORONARY ARTERIOGRAM DONE

(MOST RECENT ONLY)

0 NOT DONE

1991 - 2001

. UNKNOWN (4)

NOTE: SOME PROCEDURES MAY NOT HAVE BEEN DONE IN INTERIM

FS441 CORONARY ARTERY ANGIOPLASTY

- 0 NO
- 1 YES
- 2 MAYBE
- . UNKNOWN (3)

NOTE: SOME PROCEDURES MAY NOT HAVE BEEN DONE IN INTERIM

FS442 YEAR CORONARY ARTERY ANGIOPLASTY DONE

0 NOT DONE

1998 - 2001

. UNKNOWN (3)

FS443 TYPE OF PROCEDURE DONE FOR CORONARY ARTERY ANGIOPLASTY

- 0 NONE
- 1 BALLOON
- 2 OTHER
- . UNKNOWN (3)

FS444 CORONARY BYPASS SURGERY

0 NO

1 YES

2 MAYBE

. UNKNOWN (2)

NOTE: SOME PROCEDURES MAY NOT HAVE BEEN DONE IN INTERIM

FS445 YEAR CORONARY BYPASS SURGERY DONE

0 NOT DONE

1991 - 2000

. UNKNOWN (3)

NOTE: SOME PROCEDURES MAY NOT HAVE BEEN DONE IN INTERIM

FS446 PERMANENT PACEMAKER INSERTION

0 NO

1 YES

2 MAYBE

. UNKNOWN (2)

NOTE: SOME PROCEDURES MAY NOT HAVE BEEN DONE IN INTERIM

FS447 YEAR PERMANENT PACEMAKER INSERTION DONE

0 NOT DONE

1999 - 2000

. UNKNOWN (2)

NOTE: SOME PROCEDURES MAY NOT HAVE BEEN DONE IN INTERIM

FS448 VALVE SURGERY

0 NO

1 YES

2 MAYBE

. UNKNOWN (2)

NOTE: SOME PROCEDURES MAY NOT HAVE BEEN DONE IN INTERIM

FS449 YEAR VALVE SURGERY DONE

0 NOT DONE

1999 - 2000

. UNKNOWN (2)

NOTE: SOME PROCEDURES MAY NOT HAVE BEEN DONE IN INTERIM

FS450 CAROTID ARTERY SURGERY

0 NO

1 YES

2 MAYBE

. UNKNOWN (2)

FS451 YEAR CAROTID ARTERY SURGERY DONE

0 NOT DONE 2000 - 2001

. UNKNOWN (2)

0 NO1 YES 2 MAYBE . UNKNOWN (2) NOTE: SOME PROCEDURES MAY NOT HAVE BEEN DONE IN INTERIM FS453 YEAR THORACIC AORTA SURGERY 0 NOT DONE . UNKNOWN (2) NOTE: SOME PROCEDURES MAY NOT HAVE BEEN DONE IN INTERIM FS454 ABDOMINAL AORTA SURGERY 0 NO1 YES 2 MAYBE . UNKNOWN (2) NOTE: SOME PROCEDURES MAY NOT HAVE BEEN DONE IN INTERIM FS455 YEAR ABDOMINAL AORTA SURGERY 0 NOT DONE 1999 - 2000 . UNKNOWN (2) NOTE: SOME PROCEDURES MAY NOT HAVE BEEN DONE IN INTERIM FS456 FEMORAL OR LOWER EXTREMITY SURGERY 0 NO1 YES 2 MAYBE . UNKNOWN (2) NOTE: SOME PROCEDURES MAY NOT HAVE BEEN DONE IN INTERIM FS457 YEAR FEMORAL OR LOWER EXTREMITY SURGERY DONE 0 NOT DONE 1997 - 2001 . UNKNOWN (2) NOTE: SOME PROCEDURES MAY NOT HAVE BEEN DONE IN INTERIM FS458 LOWER EXTREMITY AMPUTATION 0 NO1 YES 2 MAYBE . UNKNOWN (2)

NOTE: SOME PROCEDURES MAY NOT HAVE BEEN DONE IN INTERIM

THORACIC AORTA SURGERY

FS452

FS459 YEAR LOWER EXTREMITY AMPUTATION DONE

0 NOT DONE

2001

. UNKNOWN (2)

FIRST EXAMINER - CANCER SITE OR TYPE

VARIABLE INFORMATION

FS460 HAVE YOU, SINCE YOUR LAST CLINIC VISIT, HAD A CANCER

OR A TUMOR?

0 NO

1 YES

. UNKNOWN (2)

FS461 CANCER: ESOPHAGUS

0 NO

1 DEFINITE CANCER

2 TUMOR, NATURE UNKNOWN

3 DEFINITELY BENIGN

. UNKNOWN (5)

FS462 CANCER: STOMACH

0 NO

1 DEFINITE CANCER

2 TUMOR, NATURE UNKNOWN

3 DEFINITELY BENIGN

. UNKNOWN (4)

FS463 CANCER: COLON

0 NO

1 DEFINITE CANCER

2 TUMOR, NATURE UNKNOWN

3 DEFINITELY BENIGN

. UNKNOWN (4)

FS464 CANCER: RECTUM

0 NO

1 DEFINITE CANCER

2 TUMOR, NATURE UNKNOWN

3 DEFINITELY BENIGN

. UNKNOWN (4)

FS465 CANCER: PANCREAS

0 NO

1 DEFINITE CANCER

2 TUMOR, NATURE UNKNOWN

3 DEFINITELY BENIGN

. UNKNOWN (4)

FS466 CANCER: LARYNX

- 0 NO
- 1 DEFINITE CANCER
- 2 TUMOR, NATURE UNKNOWN
- 3 DEFINITELY BENIGN
- . UNKNOWN (5)

FS467 CANCER: TRACHEA/BRONCHUS/LUNG 0 NO 1 DEFINITE CANCER 2 TUMOR, NATURE UNKNOWN 3 DEFINITELY BENIGN . UNKNOWN (5) **CANCER: LEUKEMIA** FS468 0 NO 1 DEFINITE CANCER 2 TUMOR, NATURE UNKNOWN 3 DEFINITELY BENIGN . UNKNOWN (4) FS469 **CANCER: SKIN** 0 NO 1 DEFINITE CANCER 2 TUMOR, NATURE UNKNOWN 3 DEFINITELY BENIGN . UNKNOWN (4) FS470 **CANCER: BREAST** 0 NO 1 DEFINITE CANCER 2 TUMOR, NATURE UNKNOWN 3 DEFINITELY BENIGN . UNKNOWN (4) FS471 CANCER: CERVIX/UTERUS 0 NO1 DEFINITE CANCER 2 TUMOR, NATURE UNKNOWN 3 DEFINITELY BENIGN . UNKNOWN (3) FS472 **CANCER: OVARY** 0 NO 1 DEFINITE CANCER 2 TUMOR, NATURE UNKNOWN 3 DEFINITELY BENIGN . UNKNOWN (3) FS473 **CANCER: PROSTATE**

0 NO

1 DEFINITE CANCER

- 2 TUMOR, NATURE UNKNOWN
- 3 DEFINITELY BENIGN
- . UNKNOWN (1)

FS474 CANCER: BLADDER

- 0 NO
- 1 DEFINITE CANCER
- 2 TUMOR, NATURE UNKNOWN
- 3 DEFINITELY BENIGN
- . UNKNOWN (4)

FS475 **CANCER: KIDNEY**

- 0 NO
- 1 DEFINITE CANCER
- 2 TUMOR, NATURE UNKNOWN
- 3 DEFINITELY BENIGN
- . UNKNOWN (4)

FS476 **CANCER: BRAIN**

- 0 NO
- 1 DEFINITE CANCER
- 2 TUMOR, NATURE UNKNOWN
- 3 DEFINITELY BENIGN
- . UNKNOWN (4)

FS477 CANCER: LYMPHOMA

- 0 NO
- 1 DEFINITE CANCER
- 2 TUMOR, NATURE UNKNOWN
- 3 DEFINITELY BENIGN
- . UNKNOWN (5)

FS478 CANCER: OTHER/UNKNOWN

- 0 NO
- 1 DEFINITE CANCER
- 2 TUMOR, NATURE UNKNOWN
- 3 DEFINITELY BENIGN
- . UNKNOWN (4)

FS479 PHYSICIAN SYSTOLIC BLOOD PRESSURE - 2ND READING

(TO NEAREST 2 MM HG)

SEE NOTE BELOW

82 - 230

. UNKNOWN (8)

FS480 PHYSICIAN DIASTOLIC BLOOD PRESSURE - 2ND READING

(TO NEAREST 2 MM HG)

SEE NOTE BELOW

32 - 108

. UNKNOWN (13)

**NOTE: FOR OFFSITE EXAMS, PHYSICIAN BLOOD PRESSURES ARE RECORDED BY OFFSITE TECHNICIANS.

ELECTROCARDIOGRAPH PART I

VARIABLE INFORMATION

FS481 EXAMINER ID NUMBER FOR ECG

72 - 200

. UNKNOWN (0)

FS482 ECG DONE

0 NO

1 YES

. UNKNOWN (0)

FS483 ECG: VENTRICULAR RATE PER MINUTE

32 - 101

. UNKNOWN (5)

FS484 ECG: P-R INTERVAL (HUNDREDTHS OF A SECOND)

10 - 48

. FULLY PACED, ATRIAL FIBRILLATION, OR UNKNOWN (77)

FS485 ECG: QRS INTERVAL (HUNDREDTHS OF A SECOND)

6 - 18

. FULLY PACED, UNKNOWN (23)

FS486 ECG: Q-T INTERVAL (HUNDREDTHS OF A SECOND)

31 - 64

. FULLY PACED, UNKNOWN (23)

FS487 ECG: QRS ANGLE (PUT PLUS OR MINUS AS NEEDED)

-90 - 135

. UNKNOWN (24)

FS488 ECG: RHYTHM

0 OR 1 NORMAL SINUS (INCLUDING S.TACH, S.BRADY,

S.ARRHY, 1 DEGREE AV BLOCK)

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

8 PACED

9 OTHER OR COMBINATION OF ABOVE

. UNKNOWN (5)

FS489 ECG: VENTRICULAR CONDUCTION ABNORMALITIES: IV BLOCK

- 0 NO
- 1 YES
- . FULLY PACED OR UNKNOWN (23)

| FS490 | ECG: VENTRICULAR CONDUCTION ABNORMALITIES: PATTERN 0 NO 1 LEFT 2 RIGHT 3 INDETERMINATE . UNKNOWN (23) |
|---|--|
| FS491 | ECG: VENTRICULAR CONDUCTION ABNORMALITIES: COMPLETE (QRS INTERVAL = 0.12 SEC OR GREATER) 0 NO 1 YES . FULLY PACED OR UNKNOWN (23) |
| FS492 | ECG: VENTRICULAR CONDUCTION ABNORMALITIES: INCOMPLETE (QRS INTERVAL = 0.10 OR 0.11 SEC) 0 NO 1 YES . FULLY PACED OR UNKNOWN (23) |
| FS493 | ECG: VENTRICULAR CONDUCTION ABNORMALITIES: HEMIBLOCK 0 NO 1 LEFT ANTERIOR 2 LEFT POSTERIOR . FULLY PACED OR UNKNOWN (23) |
| FS494 ECG: VENTRICULAR CONDUCTION ABNORMALITIES: WPW SYNDROME | |
| STADROME | 0 NO 1 YES 2 MAYBE . FULLY PACED OR UNKNOWN (25) |
| FS495 | ECG: ARRHYTHMIAS: ATRIAL PREMATURE BEATS 0 NO 1 ATRIAL 2 ATRIAL ABERRATION . UNKNOWN (22) |
| FS496 | ECG: ARRHYTHMIAS: VENTRICULAR PREMATURE BEATS 0 NO 1 SIMPLE 2 MULTIFOC 3 PAIRS 4 RUN 5 R ON T |

. UNKNOWN (7)

FS497 ECG: ARRHYTHMIAS: NUMBER OF VENTRICULAR PREMATURE BEATS IN

10 SECONDS (FROM 10 SECOND RHYTHM STRIP)

0 NONE

1 - 4

. UNKNOWN (6)

ELECTROCARDIOGRAPH PART II

VARIABLE INFORMATION

FS498 ECG: MYOCARDIAL INFARCTION LOCATION: ANTERIOR

0 NO

1 YES

2 MAYBE

. FULLY PACED OR UNKNOWN (36)

FS499 ECG: MYOCARDIAL INFARCTION LOCATION: INFERIOR

0 NO

1 YES

2 MAYBE

. FULLY PACED OR UNKNOWN (31)

FS500 ECG: MYOCARDIAL INFARCTION LOCATION: TRUE POSTERIOR

0 NO

1 YES

2 MAYBE

. FULLY PACED OR UNKNOWN (36)

FS501 ECG LVH: R > 20 MM IN ANY LIMB LEAD

0 NO

1 YES

. FULLY PACED, COMPLETE LBBB, OR UNKNOWN (35)

FS502 ECG LVH: R > 11 MM IN AVL

0 NO

1 YES

. FULLY PACED, COMPLETE LBBB, OR UNKNOWN (35)

FS503 ECG LVH: R IN LEAD I PLUS S >= 25 MM IN LEAD III

0 NO

1 YES

. FULLY PACED, COMPLETE LBBB, OR UNKNOWN (35)

FS504 ECG LVH: MEASURED VOLTAGE R AVL IN MM

(1 MV = 10 MM STANDARD)

0 - 27

. UNKNOWN (24)

FS505 ECG LVH: MEASURED VOLTAGE S V3 IN MM

(1 MV = 10 MM STANDARD)

0 - 35

. UNKNOWN (24)

FS506 ECG LVH: R IN V5 OR V6: S IN V1 OR V2: R >= 25 MM

0 NO

1 YES

. UNKNOWN (36)

FS507 ECG LVH: R IN V5 OR V6: S IN V1 OR V2: S >= 25 MM

0 NO

1 YES

. UNKNOWN (36)

```
FS508
           ECG LVH: R IN V5 OR V6: S IN V1 OR V2: R OR S >= 30 MM
             0 NO
             1 YES
             . UNKNOWN (36)
FS509
           ECG LVH: R IN V5 OR V6: S IN V1 OR V2: R + S >= 35 MM
             0 NO
             1 YES
             . UNKNOWN (36)
FS510
           ECG LVH: INTRINSICOID DEFLECTION >= 0.05 SEC
             0 NO
             1 YES
             . UNKNOWN (34)
FS511
           ECG LVH: S-T DEPRESSION (STRAIN PATTERN)
             0 NO
             1 YES
             . UNKNOWN (36)
FS512
           ECG: NONSPECIFIC S-T SEGMENT ABNORMALITY
             0 NO
             1 ST DEPRESSION
             2 ST FLATTENING
             3 OTHER
             . FULLY PACED OR UNKNOWN (27)
FS513
           ECG: NONSPECIFIC T WAVE ABNORMALITY
             0 NO
             1 TINVERSION
             2 T FLATTENING
             3 OTHER
             . FULLY PACED OR UNKNOWN (27)
FS514
           ECG: U-WAVE PRESENT
             0 NO
             1 YES
             2 MAYBE
             . FULLY PACED OR UNKNOWN (27)
FS515
           ECG: ATRIAL ENLARGEMENT
             0 NONE
             1 LEFT
             2 RIGHT
             3 BOTH
```

. ATRIAL FIBRILLATION OR UNKNOWN (74)

FS516 ECG: RVH (IF COMPLETE RBBB PRESENT, RVH = UNKNOWN)

- 0 NO
- 1 YES
- 2 MAYBE
- . FULLY PACED OR UNKNOWN (99)

FS517 ECG: LVH (IF COMPLETE LBBB PRESENT, LVH = UNKNOWN)

- 0 NO
- 1 LVH WITH STRAIN
- 2 LVH WITH MILD S-T SEGMENT ABNORMALITY
- 3 LVH BY VOLTAGE ONLY
- . FULLY PACED OR UNKNOWN (42)

NONCARDIOVASCULAR DIAGNOSES FIRST EXAMINER OPINIONS

VARIABLE INFORMATION

FS518 1ST EXAMINER OPINIONS: DIABETES MELLITUS*

- 0 NO
- 1 YES
- 2 MAYBE
- . UNKNOWN (7)
- * DIAGNOSTIC IMPRESSION NOT HARD DATA USE WITH CAUTION

FS519 1ST EXAMINER OPINIONS: URINARY TRACT DISEASE*

- 0 NO
- 1 YES
- 2 MAYBE
- . UNKNOWN (2)
- * DIAGNOSTIC IMPRESSION NOT HARD DATA USE WITH CAUTION

FS520 1ST EXAMINER OPINIONS: PROSTATE DISEASE*

- 0 NO
- 1 YES
- 2 MAYBE
- . UNKNOWN (0)
- * DIAGNOSTIC IMPRESSION NOT HARD DATA USE WITH CAUTION

FS521 1ST EXAMINER OPINIONS: RENAL DISEASE*

- 0 NO
- 1 YES
- 2 MAYBE
- . UNKNOWN (4)
- * DIAGNOSTIC IMPRESSION NOT HARD DATA USE WITH CAUTION

FS522 1ST EXAMINER OPINIONS: EMPHYSEMA*

- 0 NO
- 1 YES
- 2 MAYBE
- . UNKNOWN (0)
- * DIAGNOSTIC IMPRESSION NOT HARD DATA USE WITH CAUTION

FS523 1ST EXAMINER OPINIONS: CHRONIC BRONCHITIS*

- 0 NO
- 1 YES
- 2 MAYBE

- . UNKNOWN (2)
- * DIAGNOSTIC IMPRESSION NOT HARD DATA USE WITH CAUTION

FS524 1ST EXAMINER OPINIONS: PNEUMONIA*

- 0 NO
- 1 YES
- 2 MAYBE
- . UNKNOWN (0)
- * DIAGNOSTIC IMPRESSION NOT HARD DATA USE WITH CAUTION

```
FS525
          1ST EXAMINER OPINIONS: ASTHMA*
             0 NO
             1 YES
             2 MAYBE
             . UNKNOWN (1)
           * DIAGNOSTIC IMPRESSION - NOT HARD DATA - USE WITH CAUTION
           1ST EXAMINER OPINIONS: OTHER PULMONARY DISEASE*
FS526
             0 NO
             1 YES
             2 MAYBE
             . UNKNOWN (2)
           * DIAGNOSTIC IMPRESSION - NOT HARD DATA - USE WITH CAUTION
FS527
           1ST EXAMINER OPINIONS: GOUT*
             0 NO
             1 YES
             2 MAYBE
             . UNKNOWN (0)
           * DIAGNOSTIC IMPRESSION - NOT HARD DATA - USE WITH CAUTION
FS528
           1ST EXAMINER OPINIONS: DEGENERATIVE JOINT DISEASE*
             0 NO
             1 YES
             2 MAYBE
             . UNKNOWN (3)
           * DIAGNOSTIC IMPRESSION - NOT HARD DATA - USE WITH CAUTION
FS529
          1ST EXAMINER OPINIONS: RHEUMATOID ARTHRITIS*
             0 NO
             1 YES
             2 MAYBE
             . UNKNOWN (0)
          * DIAGNOSTIC IMPRESSION - NOT HARD DATA - USE WITH CAUTION
FS530
           1ST EXAMINER OPINIONS: GALLBLADDER DISEASE*
             0 NO
             1 YES
             2 MAYBE
             . UNKNOWN (0)
           * DIAGNOSTIC IMPRESSION - NOT HARD DATA - USE WITH CAUTION
FS531
           1ST EXAMINER OPINIONS: OTHER NON C-V DIAGNOSIS*
             0 NO
             1 YES
```

- 2 MAYBE
- . UNKNOWN (1)
- * DIAGNOSTIC IMPRESSION NOT HARD DATA USE WITH CAUTION

LAB VARIABLES

VARIABLE INFORMATION

FS532 CREATININE MG/100ML

0.64 - 5.0

. UNKNOWN (234)

*THIS VARIABLE WAS NOT COLLECTED FOR OFFSITE EXAMS

(FS001 = 1, 2, OR 3)

FS533 GLUCOSE MG/100ML

61 - 470

. UNKNOWN (232)

*THIS VARIABLE WAS NOT COLLECTED FOR OFFSITE EXAMS

(FS001 = 1, 2, OR 3)

FS534 HDL CHOLESTEROL MG/100ML

17 - 128

. UNKNOWN (232)

*THIS VARIABLE WAS NOT COLLECTED FOR OFFSITE EXAMS

(FS001 = 1, 2, OR 3)

FS535 TOTAL CHOLESTEROL MG/100ML

88 - 285

. UNKNOWN (232)

*THIS VARIABLE WAS NOT COLLECTED FOR OFFSITE EXAMS

(FS001 = 1, 2, OR 3)

FS536 TRIGLYCERIDES MG/100ML

38 - 435

. UNKNOWN (232)

*THIS VARIABLE WAS NOT COLLECTED FOR OFFSITE EXAMS

(FS001 = 1, 2, OR 3)

CALCULATED VARIABLES

VARIABLE INFORMATION

FS537 BODY MASS INDEX

13.96 - 41.68

. UNKNOWN (232)

*THIS VARIABLE WAS NOT CALCULATED FOR OFFSITE EXAMS

(FS001 = 1, 2, OR 3)

FS538 ELEVATED BLOOD PRESSURE

0 NO

1 YES BY (SBP1 >= 160 OR DBP1 >= 95)

AND

(SBP2 >= 160 OR DBP2 >= 95)

. UNKNOWN (14)

FS539 TREATMENT FOR BLOOD PRESSURE

0 NO

1 YES (BY MEDS AND PHYSICIAN OPINION)

. UNKNOWN (8)

FS540 HYPERTENSION

0 NO

1 YES (BY ELEVATED BP OR TREATMENT FOR BP)

. UNKNOWN (16)

FS541 TOTAL ALCOHOL CONSUMPTION (OUNCES PER WEEK)

0 - 24

. UNKNOWN (95)