

COHORT EXAM25
CODING MANUAL

SAS NAME = XEX25V1

SAS VARIABLE NAMES : IDTYPE ID SEX FR001-FR440

CODING MANUAL
FRAMINGHAM STUDY

RECORDS 703

NUMERICAL DATA - PART 1

```
-----  
VARIABLE      INFORMATION  
-----  
  
IDTYPE        STUDY  
              *DELETED, REDUNDANT  
  
ID            PATIENT ID NUMBER  
              *DELETED AND REPLACED WITH RANDOM ID (PID)  
  
SEX           GENDER  
              1 MALE  
              2 FEMALE  
  
FR001        SITE OF EXAM  
              *DELETED TO PRESERVE CONFIDENTIALITY  
  
FR002        NURSING HOME OR RESIDENCE LEVEL OF CARE  
              *DELETED TO PRESERVE CONFIDENTIALITY  
  
FR003        MARITAL STATUS  
              1 SINGLE  
              2 MARRIED  
              3 WIDOWED  
              4 DIVORCED  
              5 SEPERATED  
              . UNKNOWN (10)  
  
FR004        EXAMINER'S ID NUMBER  
              *DELETED TO PRESERVE CONFIDENTIALITY  
  
FR005        WEIGHT (TO NEAREST POUND)  
              *GROUPED IN 5 LB INTERVALS  
              WEIGHT <100=WEIGHT GRP 0, WEIGHT>225=WEIGHT GRP 26  
  
FR006        HEIGHT (INCHES, TO NEXT LOWER 1/4 INCH)  
              *HEIGHT IN INCHES  
              HEIGHT<57"=HEIGHT GRP 57, HEIGHT>72"=HEIGHT GRP 72
```

FR007 PROXY USED TO COMPLETE THIS EXAM
 0 NO
 1 YES
 . UNKNOWN (13)

FR008 PROXY - RELATIONSHIP
 *DELETED TO PRESERVE CONFIDENTIALITY

FR009 PROXY - HOW LONG HAVE YOU KNOWN THE PARTICIPANT (YEARS)
 *DELETED TO PRESERVE CONFIDENTIALITY

FR010 PROXY - HOW LONG HAVE YOU KNOWN THE PARTICIPANT (MONTHS)
 *DELETED TO PRESERVE CONFIDENTIALITY

FR011 PROXY - ARE YOU CURRENTLY LIVING IN THE SAME HOUSEHOLD WITH
 THE PARTICIPANT
 0 NO OR NO PROXY USED TO COMPLETE THIS EXAM
 1 YES
 . UNKNOWN (14)

FR012 PROXY - HOW OFTEN DID YOU TALK WITH THE PARTICIPANT DURING
 THE PRIOR 11 MONTHS
 *DELETED TO PRESERVE CONFIDENTIALITY

FR013 TECHNICIAN SYSTOLIC BLOOD PRESSURE (TO NEAREST 2MM HG)
 NOTE: ON OFFSITE VISITS (FR001 = 1, 2, 3) TECH BLOOD PRESSURES
 WERE NOT DONE
 84-230
 . UNKNOWN (206)

FR014 TECHNICIAN DIASTOLIC BLOOD PRESSURE (TO NEAREST 2MM HG)
 NOTE: ON OFFSITE VISITS (FR001 = 1, 2, 3) TECH BLOOD PRESSURES
 WERE NOT DONE
 20-110
 . UNKNOWN (211)

FR015 TECHNICIAN ID NUMBER
 NOTE: ON OFFSITE VISITS (FR001 = 1, 2, 3) TECH BLOOD PRESSURES
 WERE NOT DONE
 *DELETED TO PRESERVE CONFIDENTIALITY

EXAM 25 PROCEDURES SHEET:

FR016 EXAM 25 PROCEDURES - BLOOD LIPIDS
*DELETED, REDUNDANT SEE FR437-FR440

FR017 EXAM 25 PROCEDURES - ECG DONE
*DELETED, REDUNDANT SEE FR383

COGNITIVE FUNCTION - PART 1

VARIABLE INFORMATION

FR018 EXAMINER'S ID NUMBER
*DELETED TO PRESERVE CONFIDENTIALITY

FR019 MMSE - TODAY'S 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 (4)

FR020 MMSE - SEASON
0 INCORRECT
1 CORRECT
6 NO TRY
. UNKNOWN (5)

FR021 MMSE - DAY OF THE WEEK
0 INCORRECT
1 CORRECT
6 NO TRY
. UNKNOWN (5)

FR022 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 (5)

FR023 MMSE - NAME OF THIS PLACE
 0 INCORRECT
 1 CORRECT
 6 NO TRY
 . UNKNOWN (5)

FR024 MMSE - FLOOR OF THE BUILDING WE ARE ON
 0 INCORRECT
 1 CORRECT
 6 NO TRY
 . UNKNOWN (7)

FR025 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 (7)

FR026 MMSE - SPELL 'WORLD' IN REVERSE ORDER
 XXXXXXX - CHARACTER VARIABLE
 . UNKNOWN (56)

FR027 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 (8)

FR035 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 (17)

FACTORS POTENTIALLY AFFECTING MENTAL STATUS TESTING:

FR036 FACTORS POTENTIALLY AFFECTING MENTAL STATUS TESTING:
ILLITERACY OR LOW EDUCATION
*DELETED TO PRESERVE CONFIDENTIALITY DUE TO
LOW POSITIVE COUNTS LESS THEN 20

FR037 FACTORS POTENTIALLY AFFECTING MENTAL STATUS TESTING:
NOT FLUENT IN ENGLISH
*DELETED TO PRESERVE CONFIDENTIALITY DUE TO
LOW POSITIVE COUNTS LESS THEN 20

FR038 FACTORS POTENTIALLY AFFECTING MENTAL STATUS TESTING:
POOR EYESIGHT
0 NO
1 YES
2 MAYBE
. UNKNOWN (16)

FR039 FACTORS POTENTIALLY AFFECTING MENTAL STATUS TESTING:
POOR HEARING
0 NO
1 YES
2 MAYBE
. UNKNOWN (16)

FR040 FACTORS POTENTIALLY AFFECTING MENTAL STATUS TESTING:
DEPRESSION
*DELETED TO PRESERVE CONFIDENTIALITY DUE TO
LOW POSITIVE COUNTS LESS THEN 20

FR041 FACTORS POTENTIALLY AFFECTING MENTAL STATUS TESTING:
APHASIA
*DELETED TO PRESERVE CONFIDENTIALITY DUE TO
LOW POSITIVE COUNTS LESS THEN 20

FR042 FACTORS POTENTIALLY AFFECTING MENTAL STATUS TESTING:
COMA

- 0 NO
- 1 YES
- 2 MAYBE
- . UNKNOWN (20)

FR043 FACTORS POTENTIALLY AFFECTING MENTAL STATUS TESTING:
PARKINSONISM

*DELETED TO PRESERVE CONFIDENTIALITY DUE TO
LOW POSITIVE COUNTS LESS THEN 20

FR044 FACTORS POTENTIALLY AFFECTING MENTAL STATUS TESTING:
OTHER

- 0 NO
- 1 YES
- 2 MAYBE
- . UNKNOWN (15)

FR052 RELATIVES LIVE WITH YOU
0 NO
1 YES, LESS THAN 3 MONTHS PER YEAR
2 YES, MORE THAN 3 MONTHS PER YEAR
. UNKNOWN (7)

FR053 PETS LIVE WITH YOU
0 NO
1 YES, LESS THAN 3 MONTHS PER YEAR
2 YES, MORE THAN 3 MONTHS PER YEAR
. UNKNOWN (8)

FR054 ARE YOU EMPLOYED NOW
0 NO
1 YES, FULL TIME
2 YES, PART TIME
. UNKNOWN (3)

FR055 DURING THE PAST 6 MONTHS (180 DAYS) WERE YOU SO SICK THAT
YOU WERE UNABLE TO CARRY OUT YOUR USUAL ACTIVITIES
0-180
. UNKNOWN (69)

FR056 IN GENERAL, HOW IS YOUR HEALTH NOW
1 EXCELLENT
2 GOOD
3 FAIR
4 POOR
. UNKNOWN (36)

FR057 COMPARE YOUR HEALTH TO MOST PEOPLE YOUR OWN AGE
1 BETTER
2 ABOUT THE SAME
3 WORSE, THAN PEOPLE OWN AGE
. UNKNOWN (61)

ACTIVITIES OF DAILY LIVING - PART 1

VARIABLE INFORMATION

FR058 EXAMINER'S ID NUMBER
 *DELETED TO PRESERVE CONFIDENTIALITY

FOR VARIABLES FR059-FR069

NOTE: 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

FR059 ACTIVITIES 1 - DRESSING (UNDRESSING AND REDRESSING)
 *SEE NOTE ABOVE
 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 (4)

FR060 ACTIVITIES 1 - BATHING (INCLUDING GETTING IN AND OUT OF
 TUB AND SHOWER) *SEE NOTE ABOVE
 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 (4)

FR061 ACTIVITIES 1 - EATING *SEE NOTE ABOVE
 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 (4)

FR062 ACTIVITIES 1 - TRANSFERRING (GETTING IN AND OUT OF A CHAIR)
 *SEE NOTE ABOVE
 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 (4)

FR063 ACTIVITIES 1 - TOILETING ACTIVITIES (USING BATHROOM
 FACILITIES AND HANDLE CLOTHING) *SEE NOTE ABOVE
 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)

FR064 ACTIVITIES 1 - BLADDER CONTINENCE
 *SEE NOTE ABOVE
 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 USES SPECIAL PRODUCTS
 . UNKNOWN (6)

FR065 ACTIVITIES 1 - BOWEL CONTINENCE
 *SEE NOTE ABOVE
 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 USES SPECIAL PRODUCTS
 . UNKNOWN (6)

FR066 ACTIVITIES 1 - WALKING ON LEVEL SURFACE ABOUT 50 YARDS
 *SEE NOTE ABOVE
 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 (9)

FR067 ACTIVITIES 1 - WALKING UP AND DOWN ONE FLIGHT STAIRS
 *SEE NOTE ABOVE
 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 (9)

FR068

ACTIVITIES 1 - USING A TELEPHONE

*SEE NOTE ABOVE

- 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 (5)

FR069

ACTIVITIES 1 - PREPARING AND TAKING OWN MEDICATIONS

*SEE NOTE ABOVE

- 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
- 8 TAKES NO MEDICATIONS REGULARLY
- . UNKNOWN (4)

ACTIVITIES - PART II

VARIABLE INFORMATION

FR070 ACTIVITIES II - EXAMINER'S ID NUMBER
 *DELETED TO PRESERVE CONFIDENTIALITY

FR071 ACTIVITIES II - ARE YOU IN BED OR IN A CHAIR FOR MOST OR
 ALL OF THE DAY (ON THE AVERAGE)?
 (NOTE: LIFESTYLE QUESTION, NOT DUE TO HEALTH)
 0 NO
 1 YES
 . UNKNOWN OR NOT SURE (18)

FR072 ACTIVITIES II - DO YOU NEED A SPECIAL AID (WHEELCHAIR, CANE,
 WALKER) TO GET AROUND?
 0 NO
 1 YES, ALWAYS
 2 YES, SOMETIMES
 . UNKNOWN (4)

FR073 SPECIAL AID - DO YOU USE A CANE OR WALKING STICK
 0 NO
 1 YES, ALWAYS
 2 YES, SOMETIMES
 . UNKNOWN (7)

FR074 SPECIAL AID - DO YOU USE A WHEELCHAIR
 0 NO
 1 YES, ALWAYS
 2 YES, SOMETIMES
 . UNKNOWN (12)

FR075 SPECIAL AID - DO YOU USE A WALKER
 0 NO
 1 YES, ALWAYS
 2 YES, SOMETIMES
 . UNKNOWN (12)

FR076 SPECIAL AID - OTHER (WRITE IN)
 0 NO
 1 YES, ALWAYS
 2 YES, SOMETIMES
 . UNKNOWN (14)

USE OF NURSING AND COMMUNITY SERVICES:

FR077 HAVE YOU BEEN ADMITTED TO A NURSING HOME (OR SKILLED FACILITY)
IN THE PAST TWO YEARS

- 0 NO
- 1 YES
- . UNKNOWN (17)

FR078 IN PAST TWO YEARS HAVE YOU BEEN VISITED BY A NURSING SERVICE,
OR USED HOME, COMMUNITY, OR OUTPATIENT PROGRAMS

- 0 NO
- 1 YES
- . UNKNOWN (17)

FR079 IN PAST TWO YEARS HAVE YOU BEEN VISITED BY A NURSING SERVICE,
OR USED HOME, COMMUNITY, OR OUTPATIENT PROGRAMS -
VISITED BY HOME HEALTH AIDES IN THE PAST MONTH ONLY

- 0 NONE
- 1 LESS THAN 1 PER MONTH
- 2 1 TO 5 TIMES PER MONTH
- 3 6 TO 15 TIMES PER MONTH
- 4 15 TO 30 TIMES PER MONTH
- . UNKNOWN (19)

FR080 IN PAST TWO YEARS HAVE YOU BEEN VISITED BY A NURSING SERVICE,
OR USED HOME, COMMUNITY, OR OUTPATIENT PROGRAMS -
VISITED BY HOME HEALTH AIDES IN THE PAST TWO YEARS

- 0 NONE
- 1 LESS THAN 1 PER MONTH
- 2 1 TO 5 TIMES PER MONTH
- 3 6 TO 15 TIMES PER MONTH
- 4 15 TO 30 TIMES PER MONTH
- . UNKNOWN (21)

FR081 IN PAST TWO YEARS HAVE YOU BEEN VISITED BY A NURSING SERVICE,
OR USED HOME, COMMUNITY, OR OUTPATIENT PROGRAMS -
RECEIVED HOMEMAKER VISITS IN THE PAST MONTH ONLY

- 0 NONE
- 1 LESS THAN 1 PER MONTH
- 2 1 TO 5 TIMES PER MONTH
- 3 6 TO 15 TIMES PER MONTH
- 4 15 TO 30 TIMES PER MONTH
- . UNKNOWN (20)

FR082 IN PAST TWO YEARS HAVE YOU BEEN VISITED BY A NURSING SERVICE,
OR USED HOME, COMMUNITY, OR OUTPATIENT PROGRAMS -
RECEIVED HOMEMAKER VISITS IN THE PAST TWO YEARS

- 0 NONE
- 1 LESS THAN 1 PER MONTH
- 2 1 TO 5 TIMES PER MONTH
- 3 6 TO 15 TIMES PER MONTH
- 4 15 TO 30 TIMES PER MONTH
- . UNKNOWN (19)

FR083 IN PAST TWO YEARS HAVE YOU BEEN VISITED BY A NURSING SERVICE,
OR USED HOME, COMMUNITY, OR OUTPATIENT PROGRAMS -
USED VISITING NURSES IN THE PAST MONTH ONLY

- 0 NONE
- 1 LESS THAN 1 PER MONTH
- 2 1 TO 5 TIMES PER MONTH
- 3 6 TO 15 TIMES PER MONTH
- 4 15 TO 30 TIMES PER MONTH
- . UNKNOWN (19)

FR084 IN PAST TWO YEARS HAVE YOU BEEN VISITED BY A NURSING SERVICE,
OR USED HOME, COMMUNITY, OR OUTPATIENT PROGRAMS -
USED VISITING NURSES IN THE PAST TWO YEARS

- 0 NONE
- 1 LESS THAN 1 PER MONTH
- 2 1 TO 5 TIMES PER MONTH
- 3 6 TO 15 TIMES PER MONTH
- 4 15 TO 30 TIMES PER MONTH
- . UNKNOWN (21)

FR085 IN PAST TWO YEARS HAVE YOU BEEN VISITED BY A NURSING SERVICE,
OR USED HOME, COMMUNITY, OR OUTPATIENT PROGRAMS -
USED REHABILITATION SERVICES (SUCH AS PHYSICAL THERAPY,
OCCUPATIONAL THERAPY, SPEECH THERAPY) IN THE PAST MONTH ONLY

- 0 NONE
- 1 LESS THAN 1 PER MONTH
- 2 1 TO 5 TIMES PER MONTH
- 3 6 TO 15 TIMES PER MONTH
- 4 15 TO 30 TIMES PER MONTH
- . UNKNOWN (19)

FR086 IN PAST TWO YEARS HAVE YOU BEEN VISITED BY A NURSING SERVICE,
OR USED HOME, COMMUNITY, OR OUTPATIENT PROGRAMS -
USED REHABILITATION SERVICES SUCH AS (PHYSICAL THERAPY,
OCCUPATIONAL THERAPY, SPEECH THERAPY)IN PAST TWO YEARS

- 0 NONE
- 1 LESS THAN 1 PER MONTH
- 2 1 TO 5 TIMES PER MONTH
- 3 6 TO 15 TIMES PER MONTH
- 4 15 TO 30 TIMES PER MONTH
- . UNKNOWN (21)

FR087 IN PAST TWO YEARS HAVE YOU BEEN VISITED BY A NURSING SERVICE,
OR USED HOME, COMMUNITY, OR OUTPATIENT PROGRAMS -
USED CARDIAC REHABILITATION IN PAST MONTH ONLY

- 0 NONE
- 1 LESS THAN 1 PER MONTH
- 2 1 TO 5 TIMES PER MONTH
- 3 6 TO 15 TIMES PER MONTH
- 4 15 TO 30 TIMES PER MONTH
- . UNKNOWN (18)

FR088 IN PAST TWO YEARS HAVE YOU BEEN VISITED BY A NURSING SERVICE,
OR USED HOME, COMMUNITY, OR OUTPATIENT PROGRAMS -
USED CARDIAC REHABILITATION IN PAST TWO YEARS

- 0 NONE
- 1 LESS THAN 1 PER MONTH
- 2 1 TO 5 TIMES PER MONTH
- 3 6 TO 15 TIMES PER MONTH
- 4 15 TO 30 TIMES PER MONTH
- . UNKNOWN (19)

FR089 IN PAST TWO YEARS HAVE YOU BEEN VISITED BY A NURSING SERVICE,
OR USED HOME, COMMUNITY, OR OUTPATIENT PROGRAMS -
USED MEALS ON WHEELS IN PAST MONTH ONLY

- 0 NONE
- 1 LESS THAN 1 PER MONTH
- 2 1 TO 5 TIMES PER MONTH
- 3 6 TO 15 TIMES PER MONTH
- 4 15 TO 30 TIMES PER MONTH
- . UNKNOWN (19)

FR090 IN PAST TWO YEARS HAVE YOU BEEN VISITED BY A NURSING SERVICE,
OR USED HOME, COMMUNITY, OR OUTPATIENT PROGRAMS -
USED MEALS ON WHEELS IN PAST TWO YEARS

- 0 NONE
- 1 LESS THAN 1 PER MONTH
- 2 1 TO 5 TIMES PER MONTH
- 3 6 TO 15 TIMES PER MONTH
- 4 15 TO 30 TIMES PER MONTH
- . UNKNOWN (20)

FR091 IN PAST TWO YEARS HAVE YOU BEEN VISITED BY A NURSING SERVICE,
OR USED HOME, COMMUNITY, OR OUTPATIENT PROGRAMS -
USED COMMUNITY DAY PROGRAMS IN PAST MONTH ONLY

- 0 NONE
- 1 LESS THAN 1 PER MONTH
- 2 1 TO 5 TIMES PER MONTH
- 3 6 TO 15 TIMES PER MONTH
- 4 15 TO 30 TIMES PER MONTH
- . UNKNOWN (18)

FR092 IN PAST TWO YEARS HAVE YOU BEEN VISITED BY A NURSING SERVICE,
OR USED HOME, COMMUNITY, OR OUTPATIENT PROGRAMS -
USED COMMUNITY DAY PROGRAMS IN PAST TWO YEARS

- 0 NONE
- 1 LESS THAN 1 PER MONTH
- 2 1 TO 5 TIMES PER MONTH
- 3 6 TO 15 TIMES PER MONTH
- 4 15 TO 30 TIMES PER MONTH
- . UNKNOWN (20)

FR093 IN PAST TWO YEARS HAVE YOU BEEN VISITED BY A NURSING SERVICE,
OR USED HOME, COMMUNITY, OR OUTPATIENT PROGRAMS -
USED OTHER NURSING OR COMMUNITY IN THE PAST MONTH ONLY

- 0 NONE
- 1 LESS THAN 1 PER MONTH
- 2 1 TO 5 TIMES PER MONTH
- 3 6 TO 15 TIMES PER MONTH
- 4 15 TO 30 TIMES PER MONTH
- . UNKNOWN (18)

FR094 IN PAST TWO YEARS HAVE YOU BEEN VISITED BY A NURSING SERVICE,
OR USED HOME, COMMUNITY, OR OUTPATIENT PROGRAMS -
USED OTHER NURSING OR COMMUNITY IN THE PAST TWO YEARS

- 0 NONE
- 1 LESS THAN 1 PER MONTH
- 2 1 TO 5 TIMES PER MONTH
- 3 6 TO 15 TIMES PER MONTH
- 4 15 TO 30 TIMES PER MONTH
- . UNKNOWN (20)

ACTIVITIES II - CONTINUED

VARIABLE INFORMATION

FR095 ACTIVITIES II - EXAMINER'S ID NUMBER
 *DELETED TO PRESERVE CONFIDENTIALITY

ROSOW-BRESLAU QUESTIONS:

FR096 ROSOW-BRESLAU - 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 (7)

FR097 ROSOW-BRESLAU - ABLE TO WALK A HALF MILE WITHOUT HELP
 (4-6 BLOCKS)

- 0 NO, UNABLE TO DO
- 1 YES, INDEPENDENT
- 2 DOES, NOT DO
- . UNKNOWN (14)

FR098 ROSOW-BRESLAU - IF YOU HAD TO COULD YOU DO ALL THE
 HOUSEKEEPING YOURSELF (LIKE WASHING CLOTHS AND CLEANING)

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

FR099 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 (7)

FR100 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 (8)

FR101 ROSOW-BRESLAU - DO YOU DRIVE
 0 NO
 1 YES, CURRENTLY
 2 YES, NOT NOW
 . UNKNOWN (6)

FR102 ROSOW-BRESLAU - REASON FOR NOT DRIVING NOW
 1 HEALTH
 2 OTHER NON-HEALTH REASON
 3 NEVER LICENSED
 8 N/A, CURRENT DRIVER
 . UNKNOWN (48)

ACTIVITIES - PART III

VARIABLE INFORMATION

FR103 EXAMINER ID NUMBER
 *DELETED TO PRESERVE CONFIDENTIALITY

NAGI QUESTIONS -

FR104 NAGI QUESTIONS -
 FOR EACH ACTIVITY THAT SUBJECT HAD A LOT OF DIFFICULTY DOING
 OR WAS UNABLE TO DO (CODES 3 OR 4) ASK FOR REASON(S) -
 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 (40)

FR105 NAGI QUESTIONS -
 FOR EACH ACTIVITY THAT SUBJECT HAD A LOT OF DIFFICULTY DOING
 OR WAS UNABLE TO DO (CODES 3 OR 4) ASK FOR REASON(S) -
 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 (18)

FR106 NAGI QUESTIONS -
 FOR EACH ACTIVITY THAT SUBJECT HAD A LOT OF DIFFICULTY DOING
 OR WAS UNABLE TO DO (CODES 3 OR 4), ASK FOR REASON(S) -
 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 (10)

- FR107 NAGI QUESTIONS -
FOR EACH ACTIVITY THAT SUBJECT HAD A LOT OF DIFFICULTY DOING
OR WAS UNABLE TO DO (CODES 3 OR 4), ASK FOR REASON(S) -
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 (18)
- FR108 NAGI QUESTIONS -
FOR EACH ACTIVITY THAT SUBJECT HAD A LOT OF DIFFICULTY DOING
OR WAS UNABLE TO DO (CODES 3 OR 4), ASK FOR REASON(S) -
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 (10)
- FR109 NAGI QUESTIONS -
FOR EACH ACTIVITY THAT SUBJECT HAD A LOT OF DIFFICULTY DOING
OR WAS UNABLE TO DO (CODES 3 OR 4), ASK FOR REASON(S) -
STANDING IN ONE 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 (41)
- FR110 NAGI QUESTIONS -
FOR EACH ACTIVITY THAT SUBJECT HAD A LOT OF DIFFICULTY DOING
OR WAS UNABLE TO DO (CODES 3 OR 4), ASK FOR REASON(S) -
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 (11)

- FR111 NAGI QUESTIONS -
FOR EACH ACTIVITY THAT SUBJECT HAD A LOT OF DIFFICULTY DOING
OR WAS UNABLE TO DO (CODES 3 OR 4), ASK FOR REASON(S) -
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 (73)
- FR112 NAGI QUESTIONS -
FOR EACH ACTIVITY THAT SUBJECT HAD A LOT OF DIFFICULTY DOING
OR WAS UNABLE TO DO (CODES 3 OR 4), ASK FOR REASON(S) -
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 (107)
- FR113 NAGI QUESTIONS -
FOR EACH ACTIVITY THAT SUBJECT HAD A LOT OF DIFFICULTY DOING
OR WAS UNABLE TO DO (CODES 3 OR 4), ASK FOR REASON(S) -
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 (59)
- FR114 NAGI QUESTIONS -
FOR EACH ACTIVITY THAT SUBJECT HAD A LOT OF DIFFICULTY DOING
OR WAS UNABLE TO DO (CODES 3 OR 4), ASK FOR REASON(S) -
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 (35)

FALLS AND FRACTURES

VARIABLE INFORMATION

FR115 EXAMINER'S ID NUMBER
 *DELETED TO PRESERVE CONFIDENTIALITY

FR116 IN THE PAST YEAR HAVE YOU ACCIDENTALLY FALLEN AND HIT
 THE FLOOR OR GROUND?
 (NOTE: CODE AS NO IF DURING SPORTS ACTIVITY)
 0 NO
 1 YES
 2 MAYBE
 . UNKNOWN (9)

FR117 (IF YES OR MAYBE TO FR116)
 HOW MANY TIMES DID YOU FALL IN THE PAST YEAR?
 0 - 9
 . UNKNOWN (17)

FR1180B FRACTURES - SINCE YOUR LAST CLINIC VISIT HAVE YOU
 BROKEN ANY BONES?
 *DELETED TO PRESERVE CONFIDENTIALITY

FR119 FRACTURES - IF YES TO FR118, YEAR BROKE LEFT CLAVICLE
 (COLLAR BONE)
 *DELETED TO PRESERVE CONFIDENTIALITY

FR120 FRACTURES - IF YES TO FR118, YEAR BROKE RIGHT CLAVICLE
 (COLLAR BONE)
 *DELETED TO PRESERVE CONFIDENTIALITY

FR121 FRACTURES - IF YES TO FR118, YEAR BROKE LEFT UPPER ARM
 (HUMERUS) OR ELBOW
 *DELETED TO PRESERVE CONFIDENTIALITY

FR122 FRACTURES - IF YES TO FR118, YEAR BROKE RIGHT UPPER ARM
 (HUMERUS) OR ELBOW
 *DELETED TO PRESERVE CONFIDENTIALITY

FR123 FRACTURES - IF YES TO FR118, YEAR BROKE LEFT FOREARM OR WRIST
*DELETED TO PRESERVE CONFIDENTIALITY

FR124 FRACTURES - IF YES TO FR118, YEAR BROKE RIGHT FOREARM OR WRIST
*DELETED TO PRESERVE CONFIDENTIALITY

FR125 FRACTURES - IF YES TO FR118, YEAR BROKE LEFT HAND
*DELETED TO PRESERVE CONFIDENTIALITY

FR126 FRACTURES - IF YES TO FR118, YEAR BROKE RIGHT HAND
*DELETED TO PRESERVE CONFIDENTIALITY

FR127 FRACTURES - IF YES TO FR118, YEAR BROKE BACK (IF DISC DISEASE ONLY CODE AS NO)
*DELETED TO PRESERVE CONFIDENTIALITY

FR128 FRACTURES - IF YES TO FR118, YEAR BROKE PELVIS
*DELETED TO PRESERVE CONFIDENTIALITY

FR129 FRACTURES - IF YES TO FR118, YEAR BROKE LEFT HIP
*DELETED TO PRESERVE CONFIDENTIALITY

FR130 FRACTURES - IF YES TO FR118, YEAR BROKE RIGHT HIP
*DELETED TO PRESERVE CONFIDENTIALITY

FR131 FRACTURES - IF YES TO FR118, YEAR BROKE LEFT LEG
*DELETED TO PRESERVE CONFIDENTIALITY

FR132 FRACTURES - IF YES TO FR118, YEAR BROKE RIGHT LEG
*DELETED TO PRESERVE CONFIDENTIALITY

FR133 FRACTURES - IF YES TO FR118, YEAR BROKE LEFT FOOT
*DELETED TO PRESERVE CONFIDENTIALITY

FR134 FRACTURES - IF YES TO FR118, YEAR BROKE RIGHT FOOT
 *DELETED TO PRESERVE CONFIDENTIALITY

FR135 FRACTURES - IF YES TO FR118, YEAR BROKE LEFT TOE
 *DELETED TO PRESERVE CONFIDENTIALITY

FR136 FRACTURES - IF YES TO FR118, YEAR BROKE RIGHT TOE
 *DELETED TO PRESERVE CONFIDENTIALITY

FR137 FRACTURES - IF YES TO FR118, YEAR BROKE OTHER
 *DELETED TO PRESERVE CONFIDENTIALITY

FR138 FRACTURES - SPECIFY OTHER LOCATION
 *DELETED TO PRESERVE CONFIDENTIALITY

CES-D SCALE

NOTE FOR VARIABLES FR140-FR159:
THE QUESTIONS BELOW ASK ABOUT YOUR FEELINGS. FOR EACH OF THE FOLLOWING
STATEMENTS, PLEASE SAY IF YOU FELT THAT WAY DURING THE PAST WEEK.

VARIABLE INFORMATION

FR139	EXAMINER'S ID NUMBER *DELETED TO PRESERVE CONFIDENTIALITY
FR140	CESD - I WAS BOTHERED BY THINGS THAT USUALLY DON'T BOTHER ME **SEE NOTE ABOVE** 0 RARELY OR NONE OF THE TIME (LESS THAN ONE 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 (75)
FR141	CESD - I DID NOT FEEL LIKE EATING; MY APPETITE WAS POOR **SEE NOTE ABOVE** 0 RARELY OR NONE OF THE TIME (LESS THAN ONE 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 (73)
FR142	CESD -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 (LESS THAN ONE 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 (75)
FR143	CESD - I FELT THAT I WAS JUST AS GOOD AS OTHER PEOPLE **SEE NOTE ABOVE** 0 RARELY OR NONE OF THE TIME (LESS THAN ONE 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 (100)

FR144 CESD - I HAD TROUBLE KEEPING MY MIND ON WHAT I WAS DOING
SEE NOTE ABOVE
0 RARELY OR NONE OF THE TIME (LESS THAN ONE 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 (76)

FR145 CESD - I FELT DEPRESSED **SEE NOTE ABOVE**
0 RARELY OR NONE OF THE TIME (LESS THAN ONE 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 (74)

FR146 CESD - I FELT EVERYTHING I DID WAS AN EFFORT **SEE NOTE ABOVE**
0 RARELY OR NONE OF THE TIME (LESS THAN ONE 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 (76)

FR147 CESD - I FELT HOPEFUL ABOUT THE FUTURE **SEE NOTE ABOVE**
0 RARELY OR NONE OF THE TIME (LESS THAN ONE 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 (133)

FR148 CESD - I THOUGHT MY LIFE HAD BEEN A FAILURE
SEE NOTE ABOVE
0 RARELY OR NONE OF THE TIME (LESS THAN ONE 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 (75)

FR149 CESD - I FELT FEARFUL **SEE NOTE ABOVE**
0 RARELY OR NONE OF THE TIME (LESS THAN ONE 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 (72)

FR150 CESD - MY SLEEP WAS RESTLESS **SEE NOTE ABOVE**
0 RARELY OR NONE OF THE TIME (LESS THAN ONE 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 (75)

FR151 CESD - I WAS HAPPY **SEE NOTE ABOVE**
0 RARELY OR NONE OF THE TIME (LESS THAN ONE 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 (80)

FR152 CESD - I TALKED LESS THAN USUAL **SEE NOTE ABOVE**
0 RARELY OR NONE OF THE TIME (LESS THAN ONE 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 (80)

FR153 CESD - I FELT LONELY **SEE NOTE ABOVE**
0 RARELY OR NONE OF THE TIME (LESS THAN ONE 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 (72)

FR154 CESD - PEOPLE WERE UNFRIENDLY **SEE NOTE ABOVE**
0 RARELY OR NONE OF THE TIME (LESS THAN ONE 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 (75)

FR155 CESD - I ENJOYED LIFE **SEE NOTE ABOVE**
0 RARELY OR NONE OF THE TIME (LESS THAN ONE 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 (78)

- FR156 CESD - I HAD CRYING SPELLS **SEE NOTE ABOVE**
 0 RARELY OR NONE OF THE TIME (LESS THAN ONE 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 (73)
- FR157 CESD - I FELT SAD **SEE NOTE ABOVE**
 0 RARELY OR NONE OF THE TIME (LESS THAN ONE 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 (73)
- FR158 CESD - I FELT THAT PEOPLE DISLIKED ME **SEE NOTE ABOVE**
 0 RARELY OR NONE OF THE TIME (LESS THAN ONE 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 (78)
- FR159 CESD - I COULD NOT "GET GOING" **SEE NOTE ABOVE**
 0 RARELY OR NONE OF THE TIME (LESS THAN ONE 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 (78)

BERKMAN SOCIAL NETWORK QUESTIONNAIRE

VARIABLE INFORMATION

NOTE FOR VARIABLES FR160-FR172

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.

FR160 BERKMAN - HOW MANY CLOSE FRIENDS DO YOU HAVE; PEOPLE THAT YOU 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 (77)

FR161 BERKMAN - HOW MANY OF THESE CLOSE FRIENDS 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 (84)

FR162 BERKMAN - HOW MANY RELATIVES DO YOU HAVE; PEOPLE YOU 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 (78)

FR163 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 (78)

- FR164 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 (58)
- FR165 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 (65)
- FR166 BERKMAN - DO YOU HAVE MEDICARE OR MEDICAID?
** SEE NOTE ABOVE **
- 0 NO
 - 1 YES
 - . UNKNOWN (61)
- FR167 BERKMAN - DO YOU HAVE HEALTH INSURANCE? ** SEE NOTE ABOVE **
- 0 NO
 - 1 YES
 - . UNKNOWN (82)
- FR168 BERKMAN - IS THERE SOMEONE AVAILABLE TO YOU WHOM YOU CAN 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 (86)
- FR169 BERKMAN - IS THERE SOMEONE AVAILABLE TO GIVE YOU GOOD ADVICE 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 (96)

FR170 BERKMAN - IS THERE SOMEONE AVAILABLE TO YOU WHO SHOWS YOU LOVE 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 (87)

FR171 BERKMAN - CAN YOU COUNT ON ANYONE TO PROVE 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 (92)

FR172 BERKMAN - DO YOU HAVE AS MUCH CONTACT AS 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 (94)

SCREEN 2: FIRST EXAMINER - CARDIOVASCULAR MEDICATIONS

VARIABLE	INFORMATION
FR180	TAKE ASPIRIN REGULARLY 0 NO 1 YES . UNKNOWN (1)
FR181	IF YES TO FR180, NUMBER OF ASPIRIN TAKEN REGULARLY 0 - 4 . UNKNOWN (3)
FR182	IF YES TO FR180, ASPIRIN FREQUENCY 0 NEVER 1 DAY 2 WEEK 3 MONTH 4 YEAR . UNKNOWN (3)
FR183	IF YES TO FR180, USUAL ASPIRIN DOSE 081 BABY 160 HALF DOSE 325 NL 500 EXTRA OR LARGER . UNKNOWN (4)
FR184	CURRENTLY RECEIVING MEDICATION FOR THE TREATMENT OF HYPERTENSION? 0 NO 1 YES . UNKNOWN (8)
FR185	ANY OF THE CARDIOVASCULAR MEDICATIONS BELOW ON THIS PAGE? 0 NO 1 YES . UNKNOWN (1)
FR186	CARDIOVASCULAR MEDICATIONS - CARDIAC GLYCOSIDES 0 NO 1 YES, NOW 2 YES, NOT NOW 3 MAYBE . UNKNOWN (6)

- FR187 CARDIOVASCULAR MEDICATIONS - NITROGLYCERINE
 0 NO
 1 YES, NOW
 2 YES, NOT NOW
 3 MAYBE
 . UNKNOWN (8)
- FR188 CARDIOVASCULAR MEDICATIONS -
LONGER ACTING NITRATES (ISORDIL, CARDILATE)
 0 NO
 1 YES, NOW
 2 YES, NOT NOW
 3 MAYBE
 . UNKNOWN (6)
- FR189 CARDIOVASCULAR MEDICATIONS - CALCIUM CHANNEL BLOCKERS (SPECIFY)
 0 NO
 1 YES, NOW
 2 YES, NOT NOW
 3 MAYBE
 . UNKNOWN (7)
- FR190 CARDIOVASCULAR MEDICATIONS - CALCIUM CHANNEL BLOCKER GROUP
 0 DOES NOT TAKE CALCIUM CHANNEL BLOCKERS
 1 VERAPAMIL
 2 DILTIAZEM
 3 NIFEDIPINE
 4 NICARDIPINE
 5 ISRADIPINE
 6 AMLODIPINE
 7 FELODIPINE
 8 NIMODIPINE
 9 MIBEFRADIL
 10 NISOLDIPINE
 11 BEPRIDIL
 12 OTHER
 . UNKNOWN (13)
- FR191 CARDIOVASCULAR MEDICATIONS -
TABLET SIZE OF CALCIUM CHANNEL BLOCKER (MG)
 0 - 360
 . UNKNOWN (24)
- FR192 CARDIOVASCULAR MEDICATIONS -
NUMBER OF TIMES CALCIUM CHANNEL BLOCKER TAKEN PER DAY
 0 - 4
 . UNKNOWN (20)

- FR193 CARDIOVASCULAR MEDICATIONS - BETA BLOCKERS (SPECIFY)
0 NO
1 YES, NOW
2 YES, NOT NOW
3 MAYBE
. UNKNOWN (6)
- FR194 CARDIOVASCULAR MEDICATIONS - BETA BLOCKER GROUP
0 DOES NOT TAKE BETA BLOCKERS
1 PROPRANOLOL
2 TIMOLOL
3 NADOLOL
4 ATENOLOL
5 METOPROLOL
6 PINDOLOL
7 ACEBUTOLOL
8 LABETALOL
9 OTHER
. UNKNOWN (8)
- FR195 CARDIOVASCULAR MEDICATIONS - DOSE OF BETA BLOCKER
0 - 600
. UNKNOWN (21)
- FR196 CARDIOVASCULAR MEDICATIONS - LOOP DIURETICS (LASIX, ETC)
0 NO
1 YES, NOW
2 YES, NOT NOW
3 MAYBE
. UNKNOWN (3)
- FR197 CARDIOVASCULAR MEDICATIONS -
THIAZIDE/K-SPARING DIURETICS (DYAZIDE, MAXIDE, ETC)
0 NO
1 YES, NOW
2 YES, NOT NOW
3 MAYBE
. UNKNOWN (3)
- FR198 CARDIOVASCULAR MEDICATIONS - THIAZIDE DIURETICS
0 NO
1 YES, NOW
2 YES, NOT NOW
3 MAYBE
. UNKNOWN (3)

- FR199 CARDIOVASCULAR MEDICATIONS -
K-SPARING DIURECTICS (ALDACTONE, TRIAMTERENE)
0 NO
1 YES, NOW
2 YES, NOT NOW
3 MAYBE
. UNKNOWN (3)
- FR200 CARDIOVASCULAR MEDICATIONS - POTASSIUM SUPPLEMENTS
0 NO
1 YES, NOW
2 YES, NOT NOW
3 MAYBE
. UNKNOWN (3)
- FR201 CARDIOVASCULAR MEDICATIONS -
ALPHA-1 AGONIST (CLONIDINE, WYTENSIN, GUANABENZ)
0 NO
1 YES, NOW
2 YES, NOT NOW
3 MAYBE
. UNKNOWN (3)
- FR202 CARDIOVASCULAR MEDICATIONS -
ALPHA-2 BLOCKERS (PRAZOSIN, TERAZOSIN, DOXAZOSIN)
0 NO
1 YES, NOW
2 YES, NOT NOW
3 MAYBE
. UNKNOWN (2)
- FR203 CARDIOVASCULAR MEDICATIONS -
RENIN-ANGIOTENSIN BLOCKING DRUGS (ACE)
(CAPTOPRIL, ENALAPRIL, LISINOPRIL)
0 NO
1 YES, NOW
2 YES, NOT NOW
3 MAYBE
. UNKNOWN (3)
- FR204 CARDIOVASCULAR MEDICATIONS -
PERIPHERAL VASODILATORS (HYDRALAZINE, MINOXIDIL,ETC)
0 NO
1 YES, NOW
2 YES, NOT NOW
3 MAYBE
. UNKNOWN (3)

FR205 CARDIOVASCULAR MEDICATIONS - OTHER ANTI-HYPERTENSIVES (SPECIFY)

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

FR206 CARDIOVASCULAR MEDICATIONS -
ANTIARRHYTHMICS (QUINIDINE, PROCAINAMIDE NORPACE,
DISOPYRAMIDE, ETC.)

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

FR207 CARDIOVASCULAR MEDICATIONS -
ANTIPLATELET (ANTURANE, PERSANTINE, ETC.)

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

FR208 CARDIOVASCULAR MEDICATIONS -
ANTICOAGULANTS (COUMADIN, WARFARIN, ETC.)

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

FR209 CARDIOVASCULAR MEDICATIONS - OTHER CARDIAC MEDICATIONS
(SPECIFY)

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

- FR215 OTHER MEDICATIONS - ANTIGOUT -- URIC ACID LOWERING
(ALLOPURINOL, PROBENECID, ETC.)
0 NO
1 YES, NOW
2 YES, NOT NOW
3 MAYBE
. UNKNOWN (2)
- FR216 OTHER MEDICATIONS - ANTIGOUT - (COLCHICINE)
0 NO
1 YES, NOW
2 YES, NOT NOW
3 MAYBE
. UNKNOWN (2)
- FR217 OTHER MEDICATIONS - THYROID EXTRACT (DESSICATED THYROID)
0 NO
1 YES, NOW
2 YES, NOT NOW
3 MAYBE
. UNKNOWN (2)
- FR218 OTHER MEDICATIONS - THYROXINE (SYNTHROID, ETC)
0 NO
1 YES, NOW
2 YES, NOT NOW
3 MAYBE
. UNKNOWN (2)
- FR219 OTHER MEDICATIONS - INSULIN
0 NO
1 YES, NOW
2 YES, NOT NOW
3 MAYBE
. UNKNOWN (5)
- FR220 OTHER MEDICATIONS - TOTAL UNITS OF INSULIN A DAY
0 - 52
. UNKNOWN (6)
- FR221 OTHER MEDICATIONS - ORAL HYPOGLYCEMICS (SPECIFY BRAND)
0 NO
1 YES, NOW
2 YES, NOT NOW
3 MAYBE
. UNKNOWN (2)

- FR222 OTHER MEDICATIONS - ORAL/PATCH ESTROGEN
(FOR WOMEN USERS ALSO SEE ESTROGEN SECTION)
0 NO
1 YES, NOW
2 YES, NOT NOW
3 MAYBE
. UNKNOWN (1)
- FR223 OTHER MEDICATIONS - ORAL GLUCOCORTICIDS
(PREDNISONE, CORTISONE, ETC)
0 NO
1 YES, NOW
2 YES, NOT NOW
3 MAYBE
. UNKNOWN (2)
- FR224 OTHER 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)
- FR225 OTHER MEDICATIONS - ANALGESIC-NARCOTICS (DEMEROL, CODEINE,
DILAUDID, ETC)
0 NO
1 YES, NOW
2 YES, NOT NOW
3 MAYBE
. UNKNOWN (2)
- FR226 OTHER MEDICATIONS - ANALGESIC-NON NARCOTICS
(ACETAMINOPHEN, ETC)
0 NO
1 YES, NOW
2 YES, NOT NOW
3 MAYBE
. UNKNOWN (2)
- FR227 OTHER MEDICATIONS - ANTIHISTAMINES
0 NO
1 YES, NOW
2 YES, NOT NOW
3 MAYBE

. UNKNOWN (2)

FR228 OTHER MEDICATIONS - ANTIULCER (TAGAMET, RANITIDINE, PROBANTHINE
H ION INHIBITORS)

0 NO

1 YES, NOW

2 YES, NOT NOW

3 MAYBE

. UNKNOWN (2)

FR229 OTHER MEDICATIONS - ANTI-ANXIETY, SEDATIVE/HYPNOTICS ETC
(LIBRIUM, VALIUM ETC)

0 NO

1 YES, NOW

2 YES, NOT NOW

3 MAYBE

. UNKNOWN (2)

FR230 OTHER MEDICATIONS - SLEEPING PILLS

0 NO

1 YES, NOW

2 YES, NOT NOW

3 MAYBE

. UNKNOWN (2)

FR231 OTHER MEDICATIONS - ANTI-DEPRESSANTS

0 NO

1 YES, NOW

2 YES, NOT NOW

3 MAYBE

. UNKNOWN (2)

FR232 OTHER MEDICATIONS - EYE DROPS

0 NO

1 YES, NOW

2 YES, NOT NOW

3 MAYBE

. UNKNOWN (2)

FR233 OTHER MEDICATIONS - ANTIBIOTICS

0 NO

1 YES, NOW

2 YES, NOT NOW

3 MAYBE

. UNKNOWN (2)

- FR234 OTHER MEDICATIONS - ANTI-PARKINSON DRUGS (SINEMET, L-DOPA SYMMETREL, COGENTIN, ETC)
0 NO
1 YES, NOW
2 YES, NOT NOW
3 MAYBE
. UNKNOWN (2)
- FR235 OTHER MEDICATIONS - ANTICONVULSANTS (DILANTIN, PHENOBARBITAL TEGRETOL, MYSOLINE, ETC)
0 NO
1 YES, NOW
2 YES, NOT NOW
3 MAYBE
. UNKNOWN (2)
- FR236 OTHER MEDICATIONS - BRONCHODILATORS AND AEROSOLS
0 NO
1 YES, NOW
2 YES, NOT NOW
3 MAYBE
. UNKNOWN (2)
- FR237 OTHER MEDICATIONS - OSTEOPOROSIS MEDICATIONS (ALENDRONATE (FOSAMAX), CALCITONIN, ETIDRONATE, EVISTA (RALOXIFERE))
0 NO
1 YES, NOW
2 YES, NOT NOW
3 MAYBE
. UNKNOWN (10)
- FR238 OTHER MEDICATIONS - OTHERS SPECIFY (INCLUDE VITAMINS)
0 NO
1 YES, NOW
2 YES, NOT NOW
3 MAYBE
. UNKNOWN (3)

SCREEN 4: PHYSICIAN BLOOD PRESSURE READINGS

VARIABLE INFORMATION

FR239 PHYSICIAN BLOOD PRESSURE (FIRST READING)
 SYSTOLIC (TO NEAREST 2 MM HG)
 84 - 212
 . UNKNOWN (8)

FR240 PHYSICIAN BLOOD PRESSURE (FIRST READING)
 DIASTOLIC (TO NEAREST 2 MM HG)
 30 - 110
 . UNKNOWN (13)

SCREEN 5: MEDICAL HISTORY - GENITOURINARY AND THYROID DISEASE

VARIABLE INFORMATION

MEDICAL HISTORY -- GENINTOURINARY AND THYROID DISEASE

FR241 FEMALE GENITOURINARY
 ESTROGEN REPLACEMENT IN INTERIM (E.G. PREMARIN)
 0 NO
 1 YES, NOW
 2 YES, NOT NOW
 3 MAYBE
 8 MAN
 . UNKNOWN (0)

FR242 FEMALE GENITOURINARY
 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 (WRITE IN)
 8 MAN
 . UNKNOWN (5)

FR243 FEMALE GENITOURINARY
PATCH DOSE OF ESTROGEN
0 NO
1 0.5 MG/WK
2 OTHER (WRITE IN)
8 MAN
. UNKNOWN (2)

FR244 FEMALE GENITOURINARY
NUMBER OF DAYS A MONTH TAKING ESTROGEN
0 - 30
8 MAN
. UNKNOWN (3)

FR245 FEMALE GENITOURINARY
ESTROGEN CREAM USE IN INTERIM
0 NO
1 YES, NOW
2 YES, NOT NOW
3 MAYBE
8 MAN
. UNKNOWN (3)

FR246 FEMALE GENITOURINARY
PROGESTIN REPLACEMENT IN INTERIM (E.G. PROVERA)
0 NO
1 YES, NOW
2 YES, NOT NOW
3 MAYBE
8 MAN
. UNKNOWN (0)

FR247 FEMALE GENITOURINARY
DOSE/DAY OF PROGESTIN
0 NO
1 1.25 MG
2 2.5 MG
3 5.0 MG
4 10.0 MG
5 OTHER (WRITE IN)
8 MAN
. UNKNOWN (6)

FR248 FEMALE GENITOURINARY
NUMBER OF DAYS PER MONTH TAKING PROGESTINS
0 - 30
8 MAN
. UNKNOWN (2)

FR249 MALE GENITOURINARY
PROSTATE TROUBLE IN INTERIM
0 NO
1 YES, NOW
2 YES, NOT NOW
3 MAYBE
8 WOMAN
. UNKNOWN (1)

FR250 MALE GENITOURINARY
PROSTATE SURGERY IN INTERIM
*DELETED TO PRESERVE CONFIDENTIALITY

FR251 MEDICAL HISTORY - THYROID
INTERIM DIAGNOSIS OF A THYROID CONDITION?
0 NO
1 YES
. UNKNOWN (4)

FR252 SMOKING HISTORY
SMOKED CIGARETTES REGULARLY IN THE LAST YEAR?
0 NO
1 YES
. UNKNOWN (1)

FR253 SMOKING HISTORY
HOW MANY CIGARETTES DO/DID YOU SMOKE A DAY?
0 - 30
1 ONE OR LESS
. UNKNOWN (2)

SCREEN 6: RESPIRATORY QUESTIONS

VARIABLE INFORMATION

FR254 RESPIRATORY SYMPTOMS -
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 (7)

FR255 RESPIRATORY SYMPTOMS -
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 (7)

FR256 RESPIRATORY SYMPTOMS - HAVE YOU HAD ASTHMA IN THE INTERIM?
0 NO
1 YES, NEW
2 YES, OLD
. UNKNOWN (3)

FR257 RESPIRATORY SYMPTOMS - HAVE YOU HAD WHEEZING OR WHISTLING IN
YOUR CHEST AT ANY
TIME IN THE LAST 12 MONTHS?
0 NO
1 YES
. UNKNOWN (10)

FR258 RESPIRATORY SYMPTOMS - NIGHT COUGH
0 NO
1 YES
. UNKNOWN (9)

FR259 RESPIRATORY SYMPTOMS - DYSPNEA ON EXERTION
0 NO
1 CLIMBING STAIRS OR VIGOROUS EXERTION
2 RAPID WALKING OR MODERATE EXERTION
3 ANY SLIGHT EXERTION
. UNKNOWN (39)

FR260 RESPIRATORY SYMPTOMS -
DYSPNEA HAS INCREASED OVER THE PAST TWO YEARS
 0 NO
 1 YES
 . UNKNOWN (46)

FR261 RESPIRATORY SYMPTOMS -
SLEEP ON 2 OR MORE PILLOWS TO HELP YOU BREATHE
 0 NO
 1 YES
 . UNKNOWN (15)

FR262 RESPIRATORY SYMPTOMS -
HAVE YOU AWAKENED SUDDENLY VERY SHORT OF
BREATH, GASPING OR CHOKING (PND) CODE MOST SEVERE
SYMPTOMS IN INTERIM
 0 NEVER
 1 1 OR 2X/YEAR
 2 FEW NIGHTS/MONTHS UNDER SPECIAL CIRCUMSTANCES
 3 AT LEAST ONCE WEEKLY BUT IRREGULAR PATTERN
 4 3 TO 5 NIGHTS/WEEK
 5 5 TO 7 NIGHTS/WEEK
 . DON'T KNOW OR UNKNOWN (7)

FR263 RESPIRATORY SYMPTOMS - ANKLE EDEMA BILATERALLY
 0 NO
 1 YES
 2 MAYBE
 . UNKNOWN (1)

FR264 RESPIRATORY SYMPTOMS -
BEEN TOLD THAT YOU HAVE HAD HEART FAILURE
OR CONGESTIVE HEART FAILURE IN THE INTERIM
*DELETED TO PRESERVE CONFIDENTIALITY, MEDICAL REVIEW

FR265 RESPIRATORY SYMPTOMS - BEEN HOSPITALIZED FOR HEART FAILURE IN
INTERIM
*DELETED TO PRESERVE CONFIDENTIALITY, MEDICAL REVIEW

FR266 RESPIRATORY EXAMINER'S OPINIONS -
CONGESTIVE HEART FAILURE
 *DELETED DUE TO MEDICAL REVIEW

FR267 RESPIRATORY EXAMINER'S OPINIONS -
 CHRONIC BRONCHITIS (COUGH THAT PRODUCES
 SPUTNUM AT LEAST 3 MONTHS IN PAST 12 MONTHS)
 0 NO
 1 YES
 2 MAYBE
 . UNKNOWN (2)

FIRST EXAMINER - CORONARY HEART DISEASE OPINIONS IN INTERIM

VARIABLE INFORMATION

FR268 ANY CHEST DISCOMFORT SINCE LAST EXAM
 0 NO
 1 YES
 2 MAYBE
 . UNKNOWN (8)

FR269 CHEST DISCOMFORT WITH EXERTION OR EXCITEMENT
 0 NO
 1 YES
 2 MAYBE
 . UNKNOWN (14)

FR270 CHEST DISCOMFORT WHEN QUIET OR RESTING
 0 NO
 1 YES
 2 MAYBE
 . UNKNOWN (13)

FR271 CHEST DISCOMFORT - DATE OF ONSET - MONTH
 *DELETED DUE TO MEDICAL REVIEW

FR272 CHEST DISCOMFORT - DATE OF ONSET - YEAR
 *DELETED DUE TO MEDICAL REVIEW

FR273 CHEST DISCOMFORT - USUAL DURATION - MINUTES
 0 - 720
 0 NO CHEST DISCOMFORT SINCE LAST EXAM
 . UNKNOWN (33)

FR274 CHEST DISCOMFORT - LONGEST DURATION - MINUTES
0 - 900
0 NO CHEST DISCOMFORT SINCE LAST EXAM
1 1 MINUTE OR LESS
900 15 HOURS OR MORE
. UNKNOWN (33)

FR275 CHEST DISCOMFORT - LOCATION
0 NO
1 CENTRAL STERNUM AND UPPER CHEST
2 L UP QUADRANT
3 L LOWER RIBCAGE
4 R CHEST
5 OTHER
6 COMBINATION
. UNKNOWN (10)

FR276 CHEST DISCOMFORT - RADIATION
0 NO
1 LEFT SHOULDER OR L ARM
2 NECK
3 R SHOULDER OR ARM
4 BACK
5 ABDOMEN
6 OTHER
7 COMBINATION
. UNKNOWN (14)

FR277 CHEST DISCOMFORT - FREQUENCY - NUMBER
IN PAST MONTH
0 - 60
0 NONE OR NO CHEST DISCOMFORT SINCE LAST EXAM
. UNKNOWN (18)

FR278 CHEST DISCOMFORT - FREQUENCY - NUMBER
IN PAST YEAR
0 - 365
0 NONE OR NO CHEST DISCOMFORT SINCE LAST EXAM
. UNKNOWN (37)

FR279 CHEST DISCOMFORT - TYPE
0 NO CHEST DISCOMFORT SINCE LAST EXAM
1 PRESSURE, HEAVY, VISE
2 SHARP
3 DULL
4 OTHER
. UNKNOWN (17)

FR280 CHEST DISCOMFORT - RELIEF BY NITROGLYCERINE
IN <15 MINUTES
0 NO OR NO CHEST DISCOMFORT SINCE LAST EXAM
1 YES
8 NOT TRIED
. UNKNOWN (14)

FR281 CHEST DISCOMFORT - RELIEF BY REST IN <15
MINUTES
0 NO OR NO CHEST DISCOMFORT SINCE LAST EXAM
1 YES
8 NOT TRIED
. UNKNOWN (21)

FR282 CHEST DISCOMFORT - RELIEF SPONTANEOUSLY
IN <15 MINUTES
0 NO OR NO CHEST DISCOMFORT SINCE LAST EXAM
1 YES
8 NOT TRIED
. UNKNOWN (17)

FR283 CHEST DISCOMFORT - RELIEF BY OTHER CAUSE
IN <15 MINUTES
0 NO OR NO CHEST DISCOMFORT SINCE LAST EXAM
1 YES
8 NOT TRIED
. UNKNOWN (18)

FR284 CHD FIRST OPINIONS- ANGINA PECTORIS IN INTERIM
*DELETED DUE TO MEDICAL REVIEW

FR285 CHD FIRST OPINIONS- ANGINA PECTORIS
SINCE REVASCULARIZATION PROCEDURE
*DELETED DUE TO MEDICAL REVIEW

FR286 CHD FIRST OPINIONS- CORONARY INSUFFICIENCY IN INTERIM
*DELETED DUE TO MEDICAL REVIEW

FR287 CHD FIRST OPINIONS- MYOCARDIAL INFARCTION IN INTERIM
*DELETED DUE TO MEDICAL REVIEW

- FR295 SYNCOPE OPINIONS - SYNCOPE
 0 NO
 1 YES
 2 MAYBE
 3 PRESYNCOPE
 . UNKNOWN (5)
- FR296 SYNCOPE OPINIONS - CARDIAC SYNCOPE
 0 NO
 1 YES
 2 MAYBE
 . UNKNOWN (17)
- FR297 SYNCOPE OPINIONS - VASOVAGAL SYNCOPE
 0 NO
 1 YES
 2 MAYBE
 . UNKNOWN (19)
- FR298 SYNCOPE OPINIONS - OTHER (SPECIFY)
 0 NO
 1 YES
 2 MAYBE
 . UNKNOWN (23)
- FR299 SYNCOPE OPINIONS - SEIZURE DISORDER
 0 NO
 1 YES
 2 MAYBE
 . UNKNOWN (9)

FIRST EXAMINER -- CEREBROVASCULAR AND NEUROLOGICAL HISTORY AND OPINIONS

VARIABLES INFORMATION

FR300 CEREBROVASCULAR - SUDDEN MUSCULAR WEAKNESS
 0 NO
 1 YES
 2 MAYBE
 . UNKNOWN (14)

FR301 CEREBROVASCULAR - SUDDEN SPEECH DIFFICULTY
 0 NO
 1 YES
 2 MAYBE
 . UNKNOWN (16)

FR302 CEREBROVASCULAR - SUDDEN VISUAL DEFECT
 0 NO
 1 YES
 2 MAYBE
 . UNKNOWN (24)

FR303 CEREBROVASCULAR - DOUBLE VISION
 0 NO
 1 YES
 2 MAYBE
 . UNKNOWN (23)

FR304 CEREBROVASCULAR - SUDDEN LOSS OF VISION IN ONE EYE
 0 NO
 1 YES
 2 MAYBE
 . UNKNOWN (23)

FR305 CEREBROVASCULAR - UNCONSCIOUSNESS
 0 NO
 1 YES
 2 MAYBE
 . UNKNOWN (11)

- FR306 CEREBROVASCULAR - NUMBNESS, TINGLING
0 NO
1 YES
2 MAYBE
. UNKNOWN (22)
- FR307 CEREBROVASCULAR - NUMBNESS AND TINGLING IS POSITIONAL
0 NO
1 YES
2 MAYBE
. UNKNOWN (27)
- FR308 CEREBROVASCULAR - CT OF MRI SCAN (HEAD) SINCE LAST EXAM
(ALSO INDICATE DATE AND PLACE)
*DELETED TO PRESERVE CONFIDENTIALITY
- FR309 CEREBROVASCULAR - SEEN BY NEUROLOGIST SINCE LAST EXAM
(WRITE IN WHO AND WHEN)
*DELETED TO PRESERVE CONFIDENTIALITY

DETAILS FOR "SERIOUS" CEREBROVASCULAR EVENT IN INTERIM:

- FR310 CEREBROVASCULAR DETAILS - EXAMINER'S OPINION THAT "SERIOUS"
OR "SIGNIFICANT" CEREBROVASCULAR EVENT TOOK PLACE IN INTERIM
*DELETED DUE TO MEDICAL REVIEW
- FR311 CEREBROVASCULAR DETAILS - DATE - MONTH
*DELETED DUE TO MEDICAL REVIEW
- FR312 CEREBROVASCULAR DETAILS - DATE - YEAR
*DELETED DUE TO MEDICAL REVIEW
- FR313 CEREBROVASCULAR DETAILS - ONSET TIME
*DELETED DUE TO MEDICAL REVIEW
- FR314 CEREBROVASCULAR DETAILS - EXACT/APPROXIMATE TIME (USE 24-HOUR
MILITARY TIME) - HOUR
*DELETED DUE TO MEDICAL REVIEW
- FR315 CEREBROVASCULAR DETAILS - EXACT/APPROXIMATE TIME (USE 24-HOUR
MILITARY TIME) - MINUTES
*DELETED DUE TO MEDICAL REVIEW

- FR316 CEREBROVASCULAR DETAILS - DURATION (USE FORMAT DAYS/HOURS/
MINUTES) - DAYS
*DELETED DUE TO MEDICAL REVIEW
- FR317 CEREBROVASCULAR DETAILS - DURATION (USE FORMAT DAYS/HOURS/
MINUTES) - HOURS
*DELETED DUE TO MEDICAL REVIEW
- FR318 CEREBROVASCULAR DETAILS - DURATION (USE FORMAT DAYS/HOURS/
MINUTES) - MINUTES
*DELETED DUE TO MEDICAL REVIEW
- FR319 CEREBROVASCULAR DETAILS - HOSPITALIZED OR SAW M.D.
*DELETED DUE TO MEDICAL REVIEW
- FR320 CEREBROVASCULAR DETAILS - NUMBER OF DAYS STAYED AT (INDICATE
LOCATION)
*DELETED DUE TO MEDICAL REVIEW

CEREBROVASCULAR DISEASE OPINION:

- FR321 CEREBROVASCULAR DISEASE OPINIONS- STROKE IN INTERIM
*DELETED DUE TO MEDICAL REVIEW
- FR322 CEREBROVASCULAR DISEASE OPINIONS- TRANSIENT ISCHEMIC ATTACK IN
INTERIM (TIA)
*DELETED DUE TO MEDICAL REVIEW
- FR323 CEREBROVASCULAR DISEASE OPINIONS- PARKINSONISM IN INTERIM
*DELETED DUE TO MEDICAL REVIEW
- FR324 CEREBROVASCULAR DISEASE OPINIONS- OTHER, SPECIFY
*DELETED DUE TO MEDICAL REVIEW

FIRST EXAMINER -- PERIPHERAL VASCULAR HISTORY AND OPINION

VARIABLE INFORMATION

FR325 PERIPHERAL VASCULAR HISTORY - CAN YOU WALK 50 FEET WITHOUT
HELP?

- 0 ABLE TO WALK 50 FEET W/O HELP
- 1 NEEDS HELP
- 2 CAN'T WALK
- . UNKNOWN (5)

FR326 PERIPHERAL VASCULAR HISTORY - DO YOU HAVE LOWER LIMB DISCOMFORT
WHILE WALKING?

- 0 NO
- 1 YES
- 2 CAN'T WALK
- . UNKNOWN (19)

VASCULAR SYMPTOMS:

FR327 VASCULAR SYMPTOMS - DISCOMFORT IN LEFT CALF WHILE
WALKING

- 0 NO
- 1 YES
- . UNKNOWN (53)

FR328 VASCULAR SYMPTOMS - DISCOMFORT IN RIGHT CALF WHILE
WALKING

- 0 NO
- 1 YES
- . UNKNOWN (54)

FR329 VASCULAR SYMPTOMS - DISCOMFORT IN LEFT LOWER
EXTREMITY (NOT CALF) WHILE WALKING

- 0 NO
- 1 YES
- . UNKNOWN (53)

FR330 VASCULAR SYMPTOMS - DISCOMFORT IN RIGHT LOWER
EXTREMITY (NOT CALF) WHILE WALKING

- 0 NO
- 1 YES
- . UNKNOWN (54)

- FR331 VASCULAR SYMPTOMS - OCCURS WITH FIRST STEPS
0 NO OR NO LOWER LIMB DISCOMFORT WHILE WALKING
1 YES
. UNKNOWN (53)
- FR332 VASCULAR SYMPTOMS - AFTER WALKING A WHILE
0 NO OR NO LOWER LIMB DISCOMFORT WHILE WALKING
1 YES
. UNKNOWN (53)
- FR333 VASCULAR SYMPTOMS - RELATED TO RAPIDITY OF WALKING
OR STEEPNESS
0 NO OR NO LOWER LIMB DISCOMFORT WHILE WALKING
1 YES
. UNKNOWN (64)
- FR334 VASCULAR SYMPTOMS - FORCED TO STOP WALKING
0 NO OR NO LOWER LIMB DISCOMFORT WHILE WALKING
1 YES
. UNKNOWN (54)
- FR335 VASCULAR SYMPTOMS - TIME FOR DISCOMFORT TO BE
RELIEVED BY STOPPING (MINUTES)
0 NO RELIEF WITH STOPPING OR
NO LOWER LIMB DISCOMFORT WHILE WALKING
88 NOT APPLICABLE
. UNKNOWN (58)
- FR336 PERIPHERAL VASCULAR HISTORY - NUMBER OF DAYS/MONTH OF LOWER
LIMB DISCOMFORT
0 - 30
88 NOT APPLICABLE
. UNKNOWN (69)
- FR337 INTERMITTENT CLAUDICATION - OPINIONS
*DELETED DUE TO MEDICAL REVIEW

FIRST EXAMINER -- CHD AND COMPLICATIONS

VARIABLES INFORMATION

FR338 CARDIOVASCULAR PROCEDURES
 (IN THE INTERIM ONLY, NOT LIFETIME)
 EXERCISE TOLERANCE TEST (MOST RECENT ONLY)
 0 NO
 1 YES
 2 MAYBE
 . UNKNOWN (1)
 (IF YES, FILL IN FR389)

FR339 CARDIOVASCULAR PROCEDURES
 (IN THE INTERIM ONLY, NOT LIFETIME)
 YEAR AND LOCATION EXERCISE TOLERANCE TEST DONE
 *DELETED TO PRESERVE CONFIDENTIALITY DUE
 TO LOW POSITIVE COUNTS LESS THEN 20

FR340 CARDIOVASCULAR PROCEDURES
 (IN THE INTERIM ONLY, NOT LIFETIME)
 CORONARY ARTERIOGRAM (MOST RECENT ONLY)
 0 NO
 1 YES
 2 MAYBE
 . UNKNOWN (2)
 (IF YES OR MAYBE, FILL IN FR341)

FR341 CARDIOVASCULAR PROCEDURES
 (IN THE INTERIM ONLY, NOT LIFETIME)
 YEAR CORONARY ARTERIOGRAM DONE (MOST RECENT ONLY)
 *DELETED TO PRESERVE CONFIDENTIALITY

FR342 CARDIOVASCULAR PROCEDURES
 (IN THE INTERIM ONLY, NOT LIFETIME)
 CORONARY ARTERY ANGIOPLASTY
 *DELETED TO PRESERVE CONFIDENTIALITY DUE
 TO LOW POSITIVE COUNTS LESS THEN 20

FR343 CARDIOVASCULAR PROCEDURES
 (IN THE INTERIM ONLY, NOT LIFETIME)
 YEAR CORONARY ARTERY ANGIOPLASTY FIRST DONE
 *DELETED TO PRESERVE CONFIDENTIALITY

FR344 CARDIOVASCULAR PROCEDURES
 (IN THE INTERIM ONLY, NOT LIFETIME)
 CORONARY ARTERY ANGIOPLASTY - TYPE OF PROCEDURE
 *DELETED TO PRESERVE CONFIDENTIALITY DUE
 TO LOW POSITIVE COUNTS LESS THEN 20

FR345 CARDIOVASCULAR PROCEDURES
 (IN THE INTERIM ONLY, NOT LIFETIME)
 CORONARY BYPASS SURGERY
 *DELETED TO PRESERVE CONFIDENTIALITY DUE
 TO LOW POSITIVE COUNTS LESS THEN 20

FR346 CARDIOVASCULAR PROCEDURES
 (IN THE INTERIM ONLY, NOT LIFETIME)
 YEAR CORONARY BYPASS SURGERY FIRST DONE
 *DELETED TO PRESERVE CONFIDENTIALITY

FR347 CARDIOVASCULAR PROCEDURES
 (IN THE INTERIM ONLY, NOT LIFETIME)
 PERMANENT PACEMAKER INSERTION
 *DELETED TO PRESERVE CONFIDENTIALITY DUE
 TO LOW POSITIVE COUNTS LESS THEN 20

FR348 CARDIOVASCULAR PROCEDURES
 (IN THE INTERIM ONLY, NOT LIFETIME)
 YEAR PERMANENT PACEMAKER INSERTION FIRST DONE
 *DELETED TO PRESERVE CONFIDENTIALITY

FR349 CARDIOVASCULAR PROCEDURES
 (IN THE INTERIM ONLY, NOT LIFETIME)
 CAROTID ARTERY SURGERY
 *DELETED TO PRESERVE CONFIDENTIALITY

FR350 CARDIOVASCULAR PROCEDURES
 (IN THE INTERIM ONLY, NOT LIFETIME)
 YEAR CAROTID ARTERY SURGERY FIRST DONE
 *DELETED TO PRESERVE CONFIDENTIALITY

FIRST EXAMINER -- CANCER SITE OR TYPE

VARIABLE INFORMATION

FR361 CANCER SITE OR TYPE - HAVE YOU, SINCE YOUR LAST CLINIC VISIT,
 HAD CANCER OR A TUMOR?
 *DELETED DUE TO MEDICAL REVIEW
FR362 CANCER SITE OR TYPE - ESOPHAGUS
 *DELETED DUE TO MEDICAL REVIEW
FR363 CANCER SITE OR TYPE - STOMACH
 *DELETED DUE TO MEDICAL REVIEW
FR364 CANCER SITE OR TYPE - COLON
 *DELETED DUE TO MEDICAL REVIEW
FR365 CANCER SITE OR TYPE - RECTUM
 *DELETED DUE TO MEDICAL REVIEW
FR366 CANCER SITE OR TYPE - PANCREAS
 *DELETED DUE TO MEDICAL REVIEW
FR367 CANCER SITE OR TYPE - LARYNX
 *DELETED DUE TO MEDICAL REVIEW
FR368 CANCER SITE OR TYPE - TRACHEA/BRONCHUS/LUNG
 *DELETED DUE TO MEDICAL REVIEW
FR369 CANCER SITE OR TYPE - LEUKEMIA
 *DELETED DUE TO MEDICAL REVIEW
FR370 CANCER SITE OR TYPE - SKIN
 *DELETED DUE TO MEDICAL REVIEW
FR371 CANCER SITE OR TYPE - BREAST
 *DELETED DUE TO MEDICAL REVIEW
FR372 CANCER SITE OR TYPE - CERVIX/UTERUS
 *DELETED DUE TO MEDICAL REVIEW
FR373 CANCER SITE OR TYPE - OVARY
 *DELETED DUE TO MEDICAL REVIEW

FR374 CANCER SITE OR TYPE - PROSTATE
 *DELETED DUE TO MEDICAL REVIEW

FR375 CANCER SITE OR TYPE - BLADDER
 *DELETED DUE TO MEDICAL REVIEW

FR376 CANCER SITE OR TYPE - KIDNEY
 *DELETED DUE TO MEDICAL REVIEW

FR377 CANCER SITE OR TYPE - BRAIN
 *DELETED DUE TO MEDICAL REVIEW

FR378 CANCER SITE OR TYPE - LYMPHOMA
 *DELETED DUE TO MEDICAL REVIEW

FR379 CANCER SITE OR TYPE - OTHER/UNKNOWN
 *DELETED DUE TO MEDICAL REVIEW

PHYSICIAN BLOOD PRESSURE READINGS

VARIABLE	INFORMATION
-----	-----
FR380	PHYSICIAN BLOOD PRESSURE (SECOND READING) SYSTOLIC (TO NEAREST 2 MM HG) 90 - 222 . UNKNOWN (8)
FR381	PHYSICIAN BLOOD PRESSURE (SECOND READING) DIASTOLIC (TO NEAREST 2 MM HG) 28 - 110 . UNKNOWN (11)

FR389 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 (LIST SPECIFIC ITEM(S))
. UNKNOWN (3)

FR390 ECG - VENTRICULAR CONDUCTION ABNORMALITIES - IV BLOCK
0 NO
1 YES
. FULLY PACED OR UNKNOWN (20)
(IF YES, FILL IN 391 - 393)

FR391 ECG - VENTRICULAR CONDUCTION ABNORMALITIES
IV BLOCK- PATTERN
0 NO IV BLOCK
1 LEFT
2 RIGHT
3 INDETERMINATE
. UNKNOWN (20)

FR392 ECG - VENTRICULAR CONDUCTION ABNORMALITIES
IV BLOCK - COMPLETE
(QRS INTERVAL = .12 SECONDS OR GREATER)
0 NO
1 YES
. UNKNOWN (20)

FR393 ECG - VENTRICULAR CONDUCTION ABNORMALITIES
IV BLOCK- INCOMPLETE
(QRS INTERVAL = .10 OR .11 SECONDS)
0 NO
1 YES
. UNKNOWN (20)

FR394 ECG - VENTRICULAR CONDUCTION ABNORMALITIES - HEMIBLOCK
0 NO
1 LEFT ANT.
2 LEFT POST.
. FULLY PACED OR UNKNOWN (20)

FR395 ECG - VENTRICULAR CONDUCTION ABNORMALITIES - WPW SYNDROME
 0 NO
 1 YES
 2 MAYBE
 . FULLY PACED OR UNKNOWN (21)

FR396 ECG - ARRHYTHMIAS - ATRIAL PREMATURE BEATS
 0 NO
 1 ATR
 2 ATR ABER
 . UNKNOWN (28)

FR397 ECG - ARRHYTHMIAS - VENTRICULAR PREMATURE BEATS
 0 NO
 1 SIMPLE
 2 MULTIFOC
 3 PAIRS
 4 RUN
 5 R ON T
 . UNKNOWN (6)

FR398 ECG - ARRHYTHMIAS - NUMBER OF VENTRICULAR PREMATURE BEATS
 IN 10 SECONDS (SEE 10 SECOND RHYTHM STRIP)
 0 - 7
 . UNKNOWN (4)

ELECTROCARDIOGRAPH PART II

VARIABLE INFORMATION

- FR399 ECG - MI - ANTERIOR
 0 NO
 1 YES
 2 MAYBE
 . FULLY PACED OR UNKNOWN (39)
- FR400 ECG - MI - INFERIOR
 0 NO
 1 YES
 2 MAYBE
 . FULLY PACED OR UNKNOWN (27)
- FR401 ECG - MI - TRUE POSTERIOR
 0 NO
 1 YES
 2 MAYBE
 . FULLY PACED OR UNKNOWN (37)
- FR402 ECG - LVH - R>20MM IN ANY LIMB LEAD
 0 NO
 1 YES
 . FULLY PACED, COMPLETE LBBB, OR UNKNOWN (50)
- FR403 ECG - LVH - R>11MM IN AVL
 0 NO
 1 YES
 . FULLY PACED, COMPLETE LBBB, OR UNKNOWN (50)
- FR404 ECG - LVH - R IN LEAD I PLUS S>= 25MM IN LEAD III
 0 NO
 1 YES
 . FULLY PACED, COMPLETE LBBB, OR UNKNOWN (50)

FR405 ECG - LVH - MEASURED VOLTAGE - R AVL IN MM
(AT 1 MV = 10 MM STANDARD) BE SURE TO CODE THESE VOLTAGES
0 - 25
. UNKNOWN (18)

FR406 ECG - LVH -
MEASURED VOLTAGE - S V3 IN MM (AT 1 MV = 10 MM STANDARD)
BE SURE TO CODE THESE VOLTAGES
0 - 34
. UNKNOWN (19)

FR407 ECG - LVH -
R IN V5 OR V6 - S IN V1 OR V2:
R>= 25MM
0 NO
1 YES
. FULLY PACED, COMPLETE LBBB, OR UNKNOWN (48)

FR408 ECG - LVH -
R IN V5 OR V6 - S IN V1 OR V2:
S>= 25MM
0 NO
1 YES
. FULLY PACED, COMPLETE LBBB, OR UNKNOWN (48)

FR409 ECG - LVH -
R IN V5 OR V6 - S IN V1 OR V2:
R OR S>= 30MM
0 NO
1 YES
. FULLY PACED, COMPLETE LBBB, OR UNKNOWN (48)

FR410 ECG - LVH -
R IN V5 OR V6 - S IN V1 OR V2:
R + S>= 35MM
0 NO
1 YES
. FULLY PACED, COMPLETE LBBB, OR UNKNOWN (48)

FR411 ECG - LVH - INTRINSICOID DELFECTION >= .05 SEC.
0 NO
1 YES
. FULLY PACED, COMPLETE LBBB, OR UNKNOWN (46)

FR412 ECG - NONSPECIFIC S-T SEGMENT ABNORMALITY
 0 NO
 1 ST DEPRESSION
 2 ST FLATTENING
 3 OTHER
 . FULLY PACED OR UNKNOWN (21)

FR413 ECG - NONSPECIFIC T-WAVE ABNORMALITY
 0 NO
 1 T INVERSION
 2 T FLATTENING
 3 OTHER
 . FULLY PACED OR UNKNOWN (21)

FR414 ECG - U-WAVE PRESENT
 0 NO
 1 YES
 2 MAYBE
 . FULLY PACED OR UNKNOWN (23)

FR415 ECG - ATRIAL ENLARGEMENT
 0 NO
 1 LEFT
 2 RIGHT
 3 BOTH
 . ATRIAL FIB OR UNKNOWN (70)

FR416 ECG - RVH
 0 NO
 1 YES
 2 MAYBE
 . FULLY PACED OR UNKNOWN (121)
 . FOR RVH, COMPLETE RBBB

FR417 ECG - LVH
 0 NO
 1 LVH WITH STRAIN
 2 LVH WITH MILD S-T SEGMENT ABN
 3 LVH BY VOLTAGE ONLY
 . FULLY PACED OR UNKNOWN, COMPLETE LBBB (57)

NON-CARDIOVASCULAR DIAGNOSIS FIRST EXAMINER OPINIONS:

FR418 NON-CARDIOVASCULAR - DIABETES MELLITUS
*DELETED TO PRESERVE CONFIDENTIALITY

FR419 NON-CARDIOVASCULAR - URINARY TRACT DISEASE
0 NO
1 YES
2 MAYBE
. UNKNOWN (13)

FR420 NON-CARDIOVASCULAR - PROSTATE DISEASE
0 NO
1 YES
2 MAYBE
. UNKNOWN (2)

FR421 NON-CARDIOVASCULAR - RENAL DISEASE
0 NO
1 YES
2 MAYBE
. UNKNOWN (15)

FR422 NON-CARDIOVASCULAR - EMPHYSEMA
0 NO
1 YES
2 MAYBE
. UNKNOWN (4)

FR423 NON-CARDIOVASCULAR - CHRONIC BRONCHITIS
0 NO
1 YES
2 MAYBE
. UNKNOWN (5)

FR424 NON-CARDIOVASCULAR - PNEUMONIA
0 NO
1 YES
2 MAYBE
. UNKNOWN (11)

FR425 NON-CARDIOVASCULAR - ASTHMA
 0 NO
 1 YES
 2 MAYBE
 . UNKNOWN (12)

FR426 NON-CARDIOVASCULAR - OTHER PULMONARY DISEASE
 0 NO
 1 YES
 2 MAYBE
 . UNKNOWN (15)

FR427 NON-CARDIOVASCULAR - GOUT
 0 NO
 1 YES
 2 MAYBE
 . UNKNOWN (11)

FR428 NON-CARDIOVASCULAR - DEGENERATIVE JOINT DISEASE
 0 NO
 1 YES
 2 MAYBE
 . UNKNOWN (16)

FR429 NON-CARDIOVASCULAR - RHEUMATOID ARTHRITIS
 0 NO
 1 YES
 2 MAYBE
 . UNKNOWN (13)

FR430 NON-CARDIOVASCULAR - GALLBLADDER DISEASE
 0 NO
 1 YES
 2 MAYBE
 . UNKNOWN (15)

FR431 NON-CARDIOVASCULAR - OTHER NON C-V DIAGNOSIS
 (FOR CANCER, SEE SPECIAL SCREEN)
 0 NO
 1 YES
 2 MAYBE
 . UNKNOWN (7)

FR439 BLOOD ANALYSIS - TRIGYCERLIDE
31 - 1048
. UNKNOWN (202)

FR440 BLOOD ANALYSIS - CREATININE
0.6 - 8.9
. UNKNOWN (203)