Breast Cancer Detection Demonstration Project (BCDDP)

SECTION D. PHYSICAL ACTIVITY

The next questions are about your level of physical activity.

D1.	When you were in high school or college, did you play on a school athletic team such as field hockey,
	volleyball, basketball, softball, or track? (Please do not include sports played in gym or intramural
	sports.)

D2. The following is a list of activities with which <u>some</u> people have difficulty because of a health or physical reason. Please read the activity, and then check ($\sqrt{}$) for each activity whether you currently have no difficulty, some difficulty, much difficulty, or are <u>unable to do the activity at all</u>, when you are by yourself and without aid. (PLEASE CHECK ONE BOX FOR EACH ACTIVITY.)

		1. NO DIFFICULTY	2. SOME DIFFICULTY	3. MUCH DIFFICULTY	4. UNABLE TO DO	5. NEVER DO THIS ACTIVITY
a.	Walk a quarter of a mile (that is, two or three blocks)					
b.	Lift and carry something as heavy as 10 pounds (like a sack of potatoes or rice)					
C.	Walk up 10 steps without resting					
d.	Stoop, crouch or kneel					