



# **Baseline Family History and Epidemiology/Risk Factors Questionnaire Seattle Cancer Family Registry Phase III (*approximately 2007 – 2012*)**

## **SIGNIFICANT MODIFICATIONS**

Barium enema and Virtual Colonoscopy questions were added to screening section  
Chemotherapy question was added to self-reported cancer questions  
Specific walking questions were added to physical activity section

## **NOTE:**

This survey is formatted for computer-assisted telephone interview administration. Question numbers and variable names are internal and specific to the Seattle CFR.

**SECTION 1: IDENTIFICATION AND DATE OF BIRTH**

(CURRENT\_AGE)

QAGE **What is your age?**  
\_\_\_\_\_ years [1-120, 999 = DON'T KNOW/REFUSED]

Q1\_3 **What is your date of birth?**

Q1\_3 month \_\_\_\_\_ [1-12, 13 = DON'T KNOW/REFUSED] (BIRTHMONTH)

Q1\_3DD day \_\_\_\_\_ [1-31, 32 = DON'T KNOW/REFUSED] (BIRTHDAY)

Q1\_3YY year \_\_\_\_\_ [9999 = DON'T KNOW/REFUSED] (BIRTHYEAR)

Q1\_4 **Are you a twin or triplet?**

1 yes, a twin → Q1\_41 (TWIN)

2 yes, other multiple (triplet, quadruplet, etc.): (specify) \_\_\_\_\_ → Q1\_41 (TWINTYPEOTHER)

3 no → Q1\_5

4 don't know/refused → Q1\_5

(GENETICALLYIDENTICAL)

Q1\_41 [**IF YES**] **Do you have a genetically identical twin or triplet?** PROMPT: NON-IDENTICAL OR FRATERNAL TWINS ARE NO MORE ALIKE THAN ORDINARY BROTHERS AND SISTERS. GENETICALLY IDENTICAL TWINS, ON THE OTHER HAND, LOOK SO MUCH ALIKE THAT PEOPLE OFTEN MISTAKE ONE FOR THE OTHER, ESPECIALLY DURING THEIR CHILDHOOD.

1 yes

2 no

3 don't know/refused

(MARITALSTATUS)

Q1\_5 **Are you...?**  
1 **currently married**  
2 **separated**  
3 **divorced**  
4 **widowed**  
5 **single or never married**  
6 don't know/ refused

**SECTION 2: PERSONAL MEDICAL HISTORY, MEDICATIONS, SCREENING**

Q2\_ **Now I'm going to ask some questions about medical tests you might have had.**

(HEMOCCULT)

Q2\_1 **Have you ever had a test for blood in your stool, called a smear test or a hemocult?**  
PROMPT: THIS TEST IS FREQUENTLY DONE AS PART OF A ROUTINE PHYSICAL EXAM, OR IT CAN BE DONE AT HOME.

1 yes → Q2\_11

2 no → Q2\_0

3 don't know/refused → Q2\_0

(HEMOCCULTFIRSTWHENTYPE)

- Q2\_11 [IF YES] **When did you first have a hemocult or smear test?** [ANSWER AS EITHER]  
Q2\_11A 1 age at first test: \_\_\_\_ (HEMOCCULTFIRSTAGE)  
Q2\_11B 2 year of first test: \_\_\_\_ (HEMOCCULTFIRSTYR)  
Q2\_11C 3 I had my first smear test/hemocult \_\_\_\_ years ago (HEMOCCULTFIRSTYRSAGO)  
4 don't know/refused

(HEMOCCULTFIRSTREASON1-6)

- Q2\_12A-F **What were the reasons for your first test?** [READ ALL RESPONSES, SELECT ALL THAT APPLY]  
1 *to investigate a new problem*  
2 *family history of colorectal cancer*  
3 *routine/yearly exam or check-up*  
4 *follow-up of a previous problem*  
5 *follow-up of a FOBT result*  
6 *other:* \_\_\_\_\_ (HEMOCCULTFIRSTREASONOTH1-6)  
9 don't know/refused

- Q2\_13 **How many separate tests have you had?**  
\_\_\_\_ number of tests [IF = 1 → Q2\_01]

(HEMOCCULTLASTWHENTYPE)

- Q2\_14 [IF MORE THAN ONE TEST] **When did you last have a hemocult or smear test?**  
[ANSWER AS EITHER]  
Q2\_14A 1 age at last test: \_\_\_\_ (HEMOCCULTLASTAGE)  
Q2\_14B 2 year of last test: \_\_\_\_ (HEMOCCULTLASTYR)  
Q2\_14C 3 I had my last smear test/hemocult \_\_\_\_ years ago (HEMOCCULTLASTYRSAGO)  
4 don't know/refused

(HEMOCCULTLASTREASON1-6)

- Q2\_14D **What were the reasons for your last test?** [READ ALL RESPONSES, SELECT ALL THAT APPLY]  
1 *to investigate a new problem*  
2 *family history of colorectal cancer*  
3 *routine/yearly exam or check-up*  
4 *follow-up of a previous problem*  
5 *follow-up of a FOBT result*  
6 *other:* \_\_\_\_\_ (HEMOCCULTLASTREASONOTH1-6)  
9 don't know/refused

(BARIUM)

- Q2\_0 **Have you ever had a Barium enema?**  
PROMPT: A BARIUM ENEMA IS AN X-RAY EXAMINATION OF YOUR COLON. IN THIS PROCEDURE AN X-RAY OF THE COLON IS TAKEN FOLLOWING A BARIUM ENEMA. PREPARATION INVOLVES FLUIDS, LAXATIVES, AND AN ENEMA TO CLEANSE THE BOWEL.  
1 yes → Q2\_01  
2 no → Q2\_2  
3 don't know/refused → Q2\_2

(BARIUMFIRSTWHENTYPE)

- Q 2\_01 [IF YES] **When did you first have a Barium emema?** [ANSWER AS EITHER]
- Q2\_01A 1 age at first test: \_\_\_\_ (BARIUMFIRSTAGE)
  - Q2\_01B 2 year of first test: \_\_\_\_ (BARIUMFIRSTYR)
  - Q2\_01C 3 I had my first smear test/Barium enema \_\_\_\_ years ago (BARIUMFIRSTYRSAGO)
  - 4 don't know/refused

(BARIUMENEMAFIRSTREASON1-6)

- Q 2\_02A-F **What were the reasons for your first test?** [READ ALL RESPONSES, SELECT ALL THAT APPLY]
- 1 *to investigate a new problem*
  - 2 *family history of colorectal cancer*
  - 3 *routine/yearly exam or check-up*
  - 4 *follow-up of a previous problem*
  - 5 *follow-up of a FOBT result*
  - 6 *other:* \_\_\_\_\_ (BARIUMFIRSTREASONOTH1-6)
  - 9 don't know/refused

(BARIUMNUMTESTS)

- Q 2\_03 **How many separate tests have you had?**  
\_\_\_\_ number of tests [IF = 1 → Q2\_2]

(BARIUMLASTWHENTYPE)

- Q 2\_04 [IF Q2\_03 > ONE TEST] **When did you last have a Barium emema?**  
[ANSWER AS EITHER]
- Q2\_04A 1 age at last test: \_\_\_\_ (BARIUMLASTAGE)
  - Q2\_04B 2 year of last test: \_\_\_\_ (BARIUMLASTYR)
  - Q2\_04C 3 I had my first smear test/Barium enema \_\_\_\_ years ago (BARIUMLASTYRSAGO)
  - 4 don't know/refused

(BARIUMLASTREASON1-6)

- Q 2\_04D **What were the reasons for your last test?** [READ ALL RESPONSES, SELECT ALL THAT APPLY]
- 1 *to investigate a new problem*
  - 2 *family history of colorectal cancer*
  - 3 *routine/yearly exam or check-up*
  - 4 *follow-up of a previous problem*
  - 5 *follow-up of a FOBT result*
  - 6 *other:* \_\_\_\_\_ (BARIUMLASTREASONOTH1-6)
  - 9 don't know/refused

(SIGMOIDOSCOPY)

- Q2\_2 **Have you ever had a sigmoidoscopy?** PROMPT: SIGMOIDOSCOPY INVOLVES LOOKING INSIDE THE LOWER BOWEL AND RECTUM WITH A LIGHTED INSTRUMENT. THIS EXAMINATION IS USUALLY DONE IN A DOCTOR'S OFFICE WITHOUT ANESTHESIA.
- 1 yes → Q2\_21
  - 2 no → Q2\_3
  - 3 don't know/refused → Q2\_3

(SIGMOIDOSCOPYFIRSTWHENTYPE)

- Q2\_21 [IF YES] **When did you first have a sigmoidoscopy?** [ANSWER AS EITHER]
- Q2\_21A 1 age at first test: \_\_\_\_ (SIGMOIDOSCOPYFIRSTAGE)
  - Q2\_21B 2 year of first test: \_\_\_\_ (SIGMOIDOSCOPYFIRSTYR)
  - Q2\_21C 3 I had my first test \_\_\_\_ years ago (SIGMOIDOSCOPYFIRSTYRSAGO)
  - 4 don't know/refused

(SIGMOIDOSCOPYFIRSTREASON1-6)

Q2\_22A-F **What were the reasons for your first sigmoidoscopy?** [READ ALL RESPONSES, SELECT ALL THAT APPLY]

- 1 *to investigate a new problem*
- 2 *family history of colorectal cancer*
- 3 *routine/yearly exam or check-up*
- 4 *follow-up of a previous problem*
- 5 *follow-up of a FOBT result*
- 6 *other:* \_\_\_\_\_ (SIGMOIDOSCOPYFIRSTREASONOTH1-6)
- 9 don't know/refused

(SIGMOIDOSCOPIESNUM)

Q2\_23 **How many separate sigmoidoscopies have you had?**  
\_\_\_ number of sigmoidoscopies [IF = 1 → Q2\_3]

(SIGMOIDOSCOPYLASTWHENTYPE)

Q2\_24 [IF ANSWER IN Q2\_23 IS > 1] **When did you last have a sigmoidoscopy?** [ANSWER AS EITHER]

- Q2\_24A 1 age at last test: \_\_\_ (SIGMOIDOSCOPYLASTAGE)
- Q2\_24B 2 year of last test: \_\_\_ (SIGMOIDOSCOPYLASTYR)
- Q2\_24C 3 I had my last test \_\_\_ years ago (SIGMOIDOSCOPYLASTYRSAGO)
- 4 don't know

(SIGMOIDOSCOPYLASTREASON1-6)

Q2\_24D **What were the reasons for your last sigmoidoscopy?** [READ ALL RESPONSES, SELECT ALL THAT APPLY]

- 1 *to investigate a new problem*
- 2 *family history of colorectal cancer*
- 3 *routine/yearly exam or check-up*
- 4 *follow-up of a previous problem*
- 5 *follow-up of a FOBT result*
- 6 *other:* \_\_\_\_\_ (SIGMOIDOSCOPYLASTREASONOTH1-6)
- 9 don't know/refused

(COLONOSCOPY)

Q2\_3 **Have you ever had a colonoscopy?**  
PROMPT: COLONOSCOPY IS AN EXAMINATION OF THE ENTIRE LARGE BOWEL USING A LONG FLEXIBLE INSTRUMENT. THIS EXAMINATION IS USUALLY DONE UNDER SEDATION.

- 1 yes → Q2\_31
- 2 no → Q2\_17
- 3 don't know/refused → Q2\_17

(COLONOSCOPYFIRSTWHENTYPE)

Q2\_31 [IF YES] **When did you first have a colonoscopy?** [ANSWER AS EITHER]

- Q2\_31A 1 age at first test: \_\_\_ (COLONOSCOPYFIRSTAGE)
- Q2\_31B 2 year of first test: \_\_\_ (COLONOSCOPYFIRSTYR)
- Q2\_31C 3 I had my first test \_\_\_ years ago (COLONOSCOPYFIRSTYRSAGO)
- 4 don't know

(COLONOSCOPYFIRSTREASON1-6)

Q2\_32A-F **What were the reasons for your first colonoscopy?** [READ ALL RESPONSES, SELECT ALL THAT APPLY]

- 1 *to investigate a new problem*
- 2 *family history of colorectal cancer*
- 3 *routine/yearly exam or check-up*
- 4 *follow-up of a previous problem*
- 5 *follow-up of a FOBT result*
- 6 *other:* \_\_\_\_\_ (COLONOSCOPYFIRSTREASONOTH1-6)
- 9 don't know/refused

(COLONOSCOPIESNUM)

Q2\_33 **How many separate colonoscopies have you had?**  
\_\_\_ number of colonoscopies [IF 1 → Q2\_17]

(COLONOSCOPYLASTWHENTYPE)

Q2\_34 [IF MORE THAN 1 COLONOSCOPY] **When did you last have a colonoscopy?** [ANSWER AS EITHER]

- Q2\_34A 1 age at last test: \_\_\_ (COLONOSCOPYLASTAGE)
- Q2\_34B 2 year of last test: \_\_\_\_\_ (COLONOSCOPYLASTYR)
- Q2\_34C 3 I had my last test \_\_\_ years ago (COLONOSCOPYLASTYRSAGO)
- 4 don't know

(COLONOSCOPYLASTREASON1-6)

Q2\_34D **What were the reasons for your last colonoscopy?** [READ ALL RESPONSES, SELECT ALL THAT APPLY]

- 1 *to investigate a new problem*
- 2 *family history of colorectal cancer*
- 3 *routine/yearly exam or check-up*
- 4 *follow-up of a previous problem*
- 5 *follow-up of a FOBT result*
- 6 *other:* \_\_\_\_\_ (COLONOSCOPYLASTREASONOTH1-6)
- 9 don't know/refused

(CTCOLONOGRAPHY) (NOTE: THIS IS Q2\_17 NOT Q2\_1.7)

Q2\_17 **Have you ever had a CT Colonography?**

PROMPT: A CT COLONOGRAPHY OR VIRTUAL COLONOSCOPY IS A PROCEDURE IN WHICH YOU ARE NOT GIVEN MEDICATION TO RELAX YOU OR MAKE YOU SLEEP. IT IS DONE USING X-RAYS WITH YOU LYING ON A TABLE THAT IS SLID THROUGH A LARGE CIRCULAR SCANNER OR A TUNNEL. TYPICALLY A TUBE IS INSERTED TO INFLATE THE RECTUM WITH AIR. PREPARATION INVOLVES DRINKING FLUIDS OR TAKING PILLS TO CLEANSE THE BOWEL. MOST OFTEN, NO RECOVERY TIME IS NEEDED.

- 1 yes → Q2\_171
- 2 no → Q2\_4
- 3 don't know/refused → Q2\_4

(CTCOLONOGRAPHYFIRSTWHENTYPE)

Q2\_171 [IF YES] **When did you first have a CT Colonography?** [ANSWER AS EITHER]

- Q2\_171A 1 age at first test: \_\_\_ (CTCOLONOGRAPHYFIRSTAGE)
- Q2\_171B 2 year of first test: \_\_\_\_\_ (CTCOLONOGRAPHYFIRSTYR)
- Q2\_171C 3 I had my first test \_\_\_ years ago (CTCOLONOGRAPHYFIRSTYRSAGO)
- 4 don't know

(CTCOLONOGRAPHYFIRSTREASON1-6)

Q2\_172A-F **What were the reasons for your first CT Colonography?** [READ ALL RESPONSES, SELECT ALL THAT APPLY]

- 1 *to investigate a new problem*
- 2 *family history of colorectal cancer*
- 3 *routine/yearly exam or check-up*
- 4 *follow-up of a previous problem*
- 5 *follow-up of a FOBT result*
- 6 *other:* \_\_\_\_\_ (CTCOLONOGRAPHYFIRSTREASONOTH1-6)
- 9 don't know/refused

(CTCOLONOGRAPHIESNUM)

Q2\_173 **How many separate CT Colonographies have you had?**  
\_\_\_ number of CT Colonographies [IF 1 → Q2\_4]

(CTCOLONOGRAPHYLASTWHENTYPE)

Q2\_174 [IF MORE THAN 1 COLONOSCOPY] **When did you last have a CT Colonography?** [ANSWER AS EITHER]

- Q2\_174A 1 age at last test: \_\_\_ (CTCOLONOGRAPHYLASTAGE)
- Q2\_174B 2 year of last test: \_\_\_\_\_ (CTCOLONOGRAPHYLASTYR)
- Q2\_174C 3 I had my last test \_\_\_ years ago (CTCOLONOGRAPHYLASTYRSAGO)
- 4 don't know

(CTCOLONOGRAPHYLASTREASON1-6)

Q2\_174D **What were the reasons for your last CT Colonography?** [READ ALL RESPONSES, SELECT ALL THAT APPLY]

- 1 *to investigate a new problem*
- 2 *family history of colorectal cancer*
- 3 *routine/yearly exam or check-up*
- 4 *follow-up of a previous problem*
- 5 *follow-up of a FOBT result*
- 6 *other:* \_\_\_\_\_ (CTCOLONOGRAPHYLASTREASONOTH1-6)
- 9 don't know/refused

**Now I'd like to ask you some questions about your medical history. Has a doctor ever told you that you had any of the following conditions?**

[INTERVIEWER: WHEN ASKING ABOUT A SUBSEQUENT CONDITION WHEN R REPORTED HAVING BEEN DIAGNOSED WITH THE PREVIOUS CONDITION, PROMPT WITH: "Has a doctor ever told you that you had..."]

(POLYPDX)

Q2\_4 [HAS A DOCTOR EVER TOLD YOU THAT YOU HAD] **Polyps in your large bowel or colon or rectum?**

- 1 yes → Q2\_4
- 2 no → Q2\_5
- 3 don't know/refused → Q2\_5

(POLYPDXFIRSTWHENTYPE)

Q2\_41 [IF YES] **When did your doctor first tell you that you had polyps?** [ANSWER AS EITHER]

- Q2\_41A 1 age at first diagnosis of polyps: \_\_\_ (POLYPDXAGE)
- Q2\_41B 2 year of first diagnosis of polyps: \_\_\_\_\_ (POLYPDXYR)
- Q2\_41C 3 polyps were first diagnosed \_\_\_ years ago (POLYPDXYRSAGO)
- 4 don't know/refused

(POLYPDXMORETHANONCE)

Q2\_42 **Have you been told that you had polyps more than once?**

- 1 yes → Q2\_421
- 2 no → Q2\_43A
- 3 don't know/refused → Q2\_43A

(POLYPDXLASTWHENTYPE)

Q2\_421 **[IF YES] When did your doctor last tell you that you had polyps?** [ANSWER AS EITHER]

- Q2\_421A 1 age at last diagnosis of polyps: \_\_ \_\_ (POLYPDXLASTAGE)
- Q2\_421B 2 year of last diagnosis of polyps: \_\_ \_\_ \_\_ \_\_ (POLYPDXLASTYR)
- Q2\_421C 3 polyps were last diagnosed \_\_ \_\_ years ago (POLYPDXLASTYRSAGO)
- 4 don't know/refused

(POLYPTYPE1-4)

Q2\_43A **Do you know if your polyps were benign, adenomatous or pre-cancerous, or something else?** [READ ALL RESPONSES, SELECT ALL THAT APPLY] PROMPT: INCLUDE ALL THE SEPARATE TIMES YOU WERE TOLD YOU HAD POLYPS

- 1 **benign**
- 2 **adenomatous (sometimes called pre-cancerous)**
- 3 **other:** \_\_\_\_\_ (POLYPTYPEOTH1-4)
- 4 no more answers
- 5 don't know/refused

(POLYPECTOMY)

Q2\_44 **Did you have the polyps removed by a procedure called a polypectomy?** PROMPT: THIS CAN BE DONE DURING A SIGMOIDSCOPY OR A COLONOSCOPY.

- 1 yes → Q2\_441
- 2 no → Q2\_5
- 3 don't know/refused → Q2\_5

(POLYPECTOMYFIRSTWHENTYPE)

Q2\_441 **[IF YES] When did you first have the polyps removed?** [ANSWER AS EITHER]

- Q2\_441A 1 age when first removed: \_\_ \_\_ (POLYPECTOMYFIRSTAGE)
- Q2\_441B 2 year when first removed: \_\_ \_\_ \_\_ \_\_ (POLYPECTOMYFIRSTYR)
- Q2\_441C 3 polyps were first removed \_\_ \_\_ years ago (POLYPECTOMYFIRSTYRSAGO)
- 4 don't know/refused

(POLYPECTOMYMORETHANONCE)

Q2\_442 **Have you had polyps removed more than once?**

- 1 yes → Q2\_4421
- 2 no → Q2\_5
- 3 don't know/refused → Q2\_5

(POLYPECTOMYLASTWHENTYPE)

Q2\_4421 **[IF YES] When did you last have polyps removed?** [ANSWER AS EITHER]

- Q2\_4421A 1 age when last removed: \_\_ \_\_ (POLYPECTOMYLASTAGE)
- Q2\_4421B 2 year when last removed: \_\_ \_\_ \_\_ \_\_ (POLYPECTOMYLASTYR)
- Q2\_4421C 3 polyps were last removed \_\_ \_\_ years ago (POLYPECTOMYLASTYRSAGO)
- 4 don't know/refused



(FAMPOLYPOSISDX)

- Q2\_5 PROMPT: HAS A DOCTOR EVER TOLD YOU YOU HAD *Familial adenomatous polyposis (FAP)*?  
PROMPT: THIS IS A CONDITION, SOMETIMES OCCURRING IN FAMILIES, IN WHICH NUMEROUS POLYPS LINE THE INSIDE OF THE LARGE BOWEL, ALSO KNOWN AS FAP.
- 1 yes → Q2\_51
  - 2 no → Q2\_6
  - 3 don't know/refused → Q2\_6

(FAMPOLYPOSISDXWHENTYPE)

- Q2\_51 [IF YES] *When did your doctor first tell you that you had FAP?* [ANSWER AS EITHER]
- Q2\_51A 1 age at diagnosis \_\_\_\_ (FAMPOLYPOSISDXAGE)  
Q2\_51B 2 year of diagnosis: \_\_\_\_ (FAMPOLYPOSISDXYR)  
Q2\_51C 3 it was diagnosed \_\_\_\_ years ago (FAMPOLYPOSISDXYRSAGO)  
4 don't know/refused

(CROHNSDX)

- Q2\_6 PROMPT: HAS A DOCTOR EVER TOLD YOU THAT YOU HAD *Crohn's disease*?  
PROMPT: THIS IS WHERE YOU HAVE AN INFLAMMATION THAT EXTENDS INTO THE DEEPER LAYERS OF THE INTESTINAL WALL. IT MAY ALSO AFFECT OTHER PARTS OF THE DIGESTIVE TRACT, INCLUDING THE MOUTH, ESOPHAGUS, STOMACH, AND SMALL INTESTINE.
- 1 yes → Q2\_61
  - 2 no → Q2\_7
  - 3 don't know/refused → Q2\_7

(CROHNSDXWHENTYPE)

- Q2\_61 [IF YES] *When did your doctor first tell you that you had Crohn's disease?* [ANSWER AS EITHER]
- Q2\_61A 1 age at diagnosis: \_\_\_\_ (CROHNSDXAGE)  
Q2\_61B 2 year of diagnosis: \_\_\_\_ (CROHNSDXYR)  
Q2\_61C 3 it was diagnosed \_\_\_\_ years ago (CROHNSDXYRSAGO)  
4 don't know/refused

(ULCCOLITISDX)

- Q2\_7 PROMPT: HAS A DOCTOR EVER TOLD YOU THAT YOU HAD *Ulcerative colitis*?  
PROMPT: THIS IS AN INFLAMMATION AND ULCERATION OF THE LINING OF THE BOWEL (COLON) AND RECTUM. IT IS NOT A STOMACH ULCER.
- 1 yes → Q2\_71
  - 2 no → Q2\_8
  - 3 don't know/refused → Q2\_8

(ULCCOLITISWHENTYPE)

- Q2\_71 [IF YES] *When did your doctor first tell you that you had ulcerative colitis?* [ANSWER AS EITHER]
- Q2\_71A 1 age at diagnosis: \_\_\_\_ (ULCCOLITISAGE)  
Q2\_71B 2 year of diagnosis: \_\_\_\_ (ULCCOLITISYR)  
Q2\_71C 3 it was diagnosed \_\_\_\_ years ago (ULCCOLITISYRSAGO)  
4 don't know

(IBSDX)

- Q2\_8 [HAS A DOCTOR EVER TOLD YOU THAT YOU HAD] *Irritable bowel syndrome?*  
PROMPT: THIS IS A DISORDER OF THE BOWELS LEADING TO CRAMPING, GASSINESS, BLOATING, AND ALTERNATING DIARRHEA AND CONSTIPATION. IT IS ALSO KNOWN AS IBS.
- 1 yes → Q2\_81
  - 2 no → Q2\_9
  - 3 don't know/refused → Q2\_9

(IBSDXWHENTYPE)

- Q2\_81 [IF YES] *When did your doctor first tell you that you had irritable bowel syndrome?* [ANSWER AS EITHER]
- Q2\_81A 1 age at diagnosis: \_\_\_\_ (IBSDXAGE)
- Q2\_81B 2 year of diagnosis: \_\_\_\_ (IBSDXYR)
- Q2\_81C 3 it was diagnosed \_\_\_\_ years ago (IBSDXYRSAGO)
- 4 don't know

(DIVERTICULARDISDX)

- Q2\_9 PROMPT: HAS A DOCTOR EVER TOLD YOU THAT YOU HAD *Diverticular disease?*  
PROMPT: THIS IS ALSO CALLED DIVERTICULOSIS OR DIVERTICULITIS. IT IS A CONDITION IN WHICH THE BOWEL MAY BECOME INFECTED AND CAN LEAD TO PAIN AND CHRONIC PROBLEMS WITH BOWEL HABITS.
- 1 yes → Q2\_91
- 2 no → Q2\_12
- 3 don't know/refused → Q2\_12

(DIVERTICULARDISDXWHENTYPE)

- Q2\_91 [IF YES] *When did your doctor first tell you that you had diverticular disease?* [ANSWER AS EITHER]
- Q2\_91A 1 age at diagnosis: \_\_\_\_ (DIVERTICULARDISDXAGE)
- Q2\_91B 2 year of diagnosis: \_\_\_\_ (DIVERTICULARDISDXYR)
- Q2\_91C 3 it was diagnosed \_\_\_\_ years ago (DIVERTICULARDISDXYRSAGO)
- 4 don't know

[NOTE: QUESTIONS Q2\_10 AND Q2\_11 WERE MOVED TO FOLLOW Q2\_151F.]

(DIABETESDX)

- Q2\_12 PROMPT: HAS A DOCTOR EVER TOLD YOU THAT YOU HAD *Diabetes?*  
PROMPT: ALSO KNOW AS DIABETES MELLITUS. DO NOT INCLUDE DIABETES THAT YOU HAD **ONLY** DURING PREGNANCY (GESTATIONAL DIABETES).
- 1 yes → Q2\_12
- 2 no → Q2\_13
- 3 don't know/refused → Q2\_13

(DIABETESDXWHENTYPE)

- Q2\_121 [IF YES] *When did your doctor first tell you that you had diabetes?* [ANSWER AS EITHER]
- Q2\_121A 1 age at diagnosis: \_\_\_\_ (DIABETESDXAGE)
- Q2\_121B 2 year of diagnosis: \_\_\_\_ (DIABETESDXYRS)
- Q2\_121C 3 it was diagnosed \_\_\_\_ years ago (DIABETESDXYRSAGO)
- 4 don't know/refused

(DIABETESMED)

- Q2\_122 *Did you ever take medication to control your diabetes?*
- 1 yes → Q2\_122A
- 2 no → Q2\_13
- 3 don't know/refused → Q2\_13

(DIABETESMEDTYPE)

- Q2\_\_122A [IF YES] *What type of medication did you use pills, insulin injections, or an insulin pump?*
- 1 *pills only* → Q2\_\_122B
  - 2 *insulin injections only* → Q2\_\_122K
  - 3 *both pills and insulin injections* → Q2\_\_122B
  - 5 *pump only* → Q2\_\_122R
  - 6 *pills and pump* → Q2\_\_122B
  - 7 *injections and pump* → Q2\_\_122K
  - 8 *pills, injections, and pump* → Q2\_\_122B4    don't know → Q2\_\_13

(DIABETESMEDPILLSOFTENTYPE)

- Q2\_\_122B [IF APPLICABLE (IF Q2\_\_122A DETERMINES R USED PILLS FOR DIABETES)]  
*How often did you take your pills?*
- Q2\_\_122C 1 \_\_\_ times per day (DIABETESMEDPILLSNUMPERDAY)  
Q2\_\_122D 2 \_\_\_ times per week (DIABETESMEDPILLSNUMPERWK)  
Q2\_\_122E 3 \_\_\_ times per month (DIABETESMEDPILLSNUMPERMO)  
Q2\_\_122F 4 \_\_\_ times per year (DIABETESMEDPILLSNUMPERYR)  
5 don't know

(DIABETESMEDPILLSTWOYRSAGO)

- Q2\_\_122G [IF APPLICABLE (IF Q2\_\_121 DETERMINES R WAS DIAGNOSED MORE THAN 2 YRS AGO)]  
*About two years ago, were you still taking it?*
- 1 yes
  - 2 no
  - 3 don't know/refused

(DIABETESMEDPILLSTOTALTYPE)

- Q2\_\_122H *In total, how many months or years did you take pills to control your diabetes?* [ANSWER AS EITHER]
- Q2\_\_122I 1 \_\_\_ number of months (DIABETESMEDPILLSNUMTOTALMOS)  
Q2\_\_122J 2 \_\_\_ number of years (DIABETESMEDPILLSNUMTOTALYRS)  
3 don't know/refused

[IF Q2\_\_122A = 1 (PILLS ONLY) → Q2\_\_13]

[IF Q2\_\_122A = 6 (PILLS & PUMP) → Q2\_\_122T]

(DIABETESMEDINSULINOFTENTYPE)

- Q2\_\_122K [IF APPLICABLE (IF Q2\_\_122A DETERMINES R USED INSULIN INJECTIONS FOR DIABETES)] *How often did you use insulin injections?*
- Q2\_\_122L 1 \_\_\_ times per day (DIABETESMEDINSULINNUMPERDAY)  
Q2\_\_122M 2 \_\_\_ times per week (DIABETESMEDINSULINNUMPERWK)  
Q2\_\_122N 3 \_\_\_ times per month (DIABETESMEDINSULINNUMPERMO)  
Q2\_\_122O 4 \_\_\_ times per year (DIABETESMEDINSULINNUMPERYR)  
5 don't know

(DIABETESMEDINSULINTWOYRSAGO)

- Q2\_\_122P [IF APPLICABLE (IF Q2\_\_121 DETERMINES R WAS DIAGNOSED MORE THAN 2 YRS AGO)]  
*About two years ago, were you still taking insulin injections?*
- 1 yes
  - 2 no
  - 3 don't know/refused

(DIABETESMEDINSULINTOTALTYPE)

Q2\_\_122Q ***In total, how many months or years did you take insulin injections to control your diabetes?***  
[ANSWER AS EITHER]

Q2\_\_122R 1 \_\_\_ number of months (DIABETESMEDINSULINTOTALMOS)

Q2\_\_122S 2 \_\_\_ number of years (DIABETESMEDINSULINTOTALYRS)

3 don't know/refused

[IF Q2\_\_122A = 2 (INSULIN INJECTION ONLY) → Q2\_\_13]

(DIABETESMEDPUMPOFTENTYPE)

Q2\_\_122T [IF APPLICABLE (IF Q2\_\_122A DETERMINES R USED INSULIN PUMP FOR DIABETES)]

***How often did you use an insulin pump?***

Q2\_\_122U 1 \_\_\_ times per day (DIABETESMEDPUMPNUMPERDAY)

Q2\_\_122V 2 \_\_\_ times per week (DIABETESMEDPUMPNUMPERWK)

Q2\_\_122W 3 \_\_\_ times per month (DIABETESMEDPUMPNUMPERMO)

Q2\_\_122X 4 \_\_\_ times per year (DIABETESMEDPUMPNUMPERYR)

5 don't know

6 continuous

(DIABETESMEDPUMPTWOYRSAGO)

Q2\_\_122Y [IF APPLICABLE (IF Q2\_\_121 DETERMINES R WAS DIAGNOSED MORE THAN 2 YRS AGO)]

***About two years ago, were you still using an insulin pump?***

1 yes

2 no

3 don't know/refused

(DIABETESMEDPUMPTOTALTYPE)

Q2\_\_12Z ***In total, how many months or years did you use an insulin pump to control your diabetes?***

[ANSWER AS EITHER]

Q2\_\_1221 1 \_\_\_ number of months (DIABETESMEDPUMPTOTALMOS)

Q2\_\_1222 2 \_\_\_ number of years (DIABETESMEDPUMPTOTALYRS)

3 don't know/refused

(CHOLESTEROLDX)

Q2\_\_13 PROMPT: HAS A DOCTOR EVER TOLD YOU THAT YOU HAD ***High cholesterol?***

1 yes → Q2\_\_131

2 no → Q2\_\_14

3 don't know/refused → Q2\_\_14

(CHOLESTEROLDXWHENTYPE)

Q2\_\_131 [IF YES] ***When did your doctor first tell you that you had high cholesterol?*** [ANSWER AS EITHER]

Q2\_\_131A 1 age at diagnosis: \_\_\_ (CHOLESTEROLDXAGE)

Q2\_\_131B 2 year of diagnosis: \_\_\_ (CHOLESTEROLDXYR)

Q2\_\_131C 3 it was diagnosed \_\_\_ years ago (CHOLESTEROLDXYRSAGO)

4 don't know/refused

(CHOLESTEROLMED)

Q2\_\_132 ***Did you ever take medication to control your high cholesterol?***

1 yes → Q2\_\_132A

2 no → Q2\_\_14

3 don't know/refused → Q2\_\_14

(CHOLESTEROLMEDOFTENTYPE)

Q2\_\_132A [IF YES] *How often did you take it?* [ANSWER AS EITHER]

- Q2\_\_132B 1 \_\_\_ times per day (CHOLESTEROLMEDNUMBERDAY)
- Q2\_\_132C 2 \_\_\_ times per week (CHOLESTEROLMEDNUMBERWK)
- Q2\_\_132D 3 \_\_\_ times per month (CHOLESTEROLMEDNUMBERMO)
- Q2\_\_132E 4 \_\_\_ times per year (CHOLESTEROLMEDNUMBERYR)
- 5 don't know/refused

(CHOLESTEROLMEDTWOYRSAGO)

Q2\_\_132F [IF APPLICABLE (IF R WAS FIRST DIAGNOSED MORE THAN 2 YEARS AGO PER Q2\_131).] *About two years ago, were you still taking it?*

- 1 yes
- 2 no
- 3 don't know/refused

(CHOLESTEROLMEDTOTALTYPE)

Q2\_\_132G *In total, how many months or years did you take medication for your high cholesterol?* [ANSWER AS EITHER]

- Q2\_\_132H 1 \_\_\_ number of months (CHOLESTEROLMEDNUMTOTALMOS)
- Q2\_\_132I 2 \_\_\_ number of years (CHOLESTEROLMEDNUMTOTALYRS)
- 3 don't know/refused

(TRIGLYCERIDESDX)

Q2\_\_14 PROMPT: HAVE A DOCTOR EVER TOLD YOU THAT YOU HAD *high levels of triglycerides in your blood?* PROMPT: TRIGLYCERIDES ARE A TYPE OF FAT IN YOUR BLOOD

- 1 yes → Q2\_\_141
- 2 no → Q2\_15
- 3 don't know/refused → Q2\_15

(TRIGLYCERIDESDXWHENTYPE)

Q2\_\_141 [IF YES] *When did your doctor first tell you that you had high triglycerides?* [ANSWER AS EITHER]

- Q2\_\_141A 1 age at diagnosis: \_\_\_ (TRIGLYCERIDESDXAGE) or
- Q2\_\_141B 2 year of diagnosis: \_\_\_ (TRIGLYCERIDESDXYR) or
- Q2\_\_141C 3 it was diagnosed \_\_\_ years ago (TRIGLYCERIDESDXYRSAGO)
- 4 don't know/refused

(TRIGLYCERIDESMED)

Q2\_\_142 *Did you ever take medication to control your high triglycerides?*

- 1 yes → Q2\_\_142A
- 2 no → Q2\_15
- 3 don't know/refused → Q2\_15

(TRIGLYCERIDESMEDOFTENTYPE)

Q2\_\_142A [IF YES] *How often did you take it?* [ANSWER AS EITHER]

- Q2\_\_142B 1 \_\_\_ times per day (TRIGLYCERIDESMEDNUMBERDAY)
- Q2\_\_142C 2 \_\_\_ times per week (TRIGLYCERIDESMEDNUMBERWK)
- Q2\_\_142D 3 \_\_\_ times per month (TRIGLYCERIDESMEDNUMBERMO)
- Q2\_\_142E 4 \_\_\_ times per year (TRIGLYCERIDESMEDNUMBERYR)
- 5 don't know/refused

(TRIGLYCERIDESMEDOFTENTYPE)

Q2\_\_142F [IF APPLICABLE (IF R WAS FIRST DIAGNOSED MORE THAN 2 YEARS AGO PER Q2\_141).]

*About two years ago, were you still taking it?*

- 1 yes
- 2 no
- 3 don't know/refused

(TRIGLYCERIDESMEDTOTALTYPE)

Q2\_\_142G *In total, how many months or years did you take medication for your high triglycerides?* [ANSWER AS EITHER]

- Q2\_\_142H 1 \_\_\_ number months (TRIGLYCERIDESMEDNUMTOTALMOS)
- Q2\_\_142I 2 \_\_\_ number of years (TRIGLYCERIDESMEDNUMTOTALYRS)
- 3 don't know/refused

(CADX1)

Q2\_15 [IF R IS CASE]: *This may seem obvious, but for scientific reasons I need to ask this question of everyone. Has a doctor ever told you that you had cancer including any recent diagnosis?*

[IF R IS CONTROL OR RELATIVE]: *Has a doctor ever told you that you had cancer including any recent diagnosis or any early or pre-cancer diagnosis?*

- 1 yes → Q2\_15A2
- 2 no → Q2\_10
- 3 don't know/refused → Q2\_10

1 <sup>st</sup> CANCER	2 <sup>nd</sup> CANCER	3 <sup>rd</sup> CANCER	4 <sup>th</sup> CANCER	5 <sup>th</sup> CANCER	CANCER TYPES
Q215A2 ( <u>CADXTYPE1</u> ) [IF YES] <i>What type of cancer was it?</i> [ENTER CODE] ___ IF = 42 → Q215A2OT; IF = 34 → Q215A4 ALL OTHERS → Q215A5	( <u>CADXTYPE2</u> ) Q2_15B2	( <u>CADXTYPE3</u> ) Q2_15C2	( <u>CADXTYPE4</u> ) Q2_15D2	( <u>CADXTYPE5</u> ) Q2_15E2	10 ABDOMINAL 11 APPENDIX 12 BILE or BILIARY DUCT 13 BLADDER 14 BLOOD 15 BONE 16 BONE MARROW 17 BRAIN 18 BREAST 19 CERVICAL 20 COLON (LARGE INTESTINE) 21 COLORECTAL 22 ENDOMETRIAL 23 ESOPHAGEAL 24 GALL BLADDER 25 GASTROESOPHAGEAL 26 HEPATO-BILIARY 27 INTESTINAL, NOS 28 KIDNEY 29 LEUKEMIA (ACUTE, CHRONIC, OTHER) 30 LIVER 31 LUNG 32 LYMPHOMA, HODGKINS 33 MELANOMA 34 NON-HODGKINS LYMPHOMA (LYMPH, LYMPHATIC)
Q215A2OT ( <u>CADXTYPEOTH1</u> ) [IF 42-OTHER CANCER WAS REPORTED] <i>What type of cancer was it?</i> Specify _____	( <u>CADXTYPEOTH2</u> ) Q215B2OT	( <u>CADXTYPEOTH3</u> ) Q215C2OT	( <u>CADXTYPEOTH4</u> ) Q215D2OT	( <u>CADXTYPEOTH5</u> ) Q215E2OT	35 OVARIAN 36 PANCREATIC 37 PROSTATE 38 RECTAL 39 RENAL PELVIS 40 SKIN-BASAL OR SQUAMOUS CELL CARCINOMA 41 SMALL INTESTINE (BOWEL) 42 SPINAL, NOS 43 STOMACH (GASTRIC) 44 THROAT 45 THYROID 46 URETER 47 UTERINE 48 OTHER(SPECIFY) 99 DON'T KNOW/REFUSED
Q215A2A ( <u>CADXTYPEOTHCOLONORSKIN1</u> ) [IVER: DID R INDICATE CRC OR SKIN AS OTHER CANCER?] 1 CRC, BOWEL, GASTROINTESTINAL → Q215A2A1 2 SKIN CANCER → Q215A4 3 PRE-CANCER OTHER THAN COLON → Q215B 4 OTHER TYPE OF CANCER → Q215A5	( <u>CADXTYPEOTHCOLONORSKIN2</u> ) Q215B2A	( <u>CADXTYPEOTHCOLONORSKIN3</u> ) Q215C2A	( <u>CADXTYPEOTHCOLONORSKIN4</u> ) Q215D2A	( <u>CADXTYPEOTHCOLONORSKIN5</u> ) Q215E2A	
Q215A2A1 ( <u>CADXTYPEOTHCOLONTYPE1</u> ) <i>What specific type of cancer was it?</i> 1 colon 2 rectal 3 colorectal 4 other _____ 5 don't know/refused GO TO → Q215A5	( <u>CADXTYPEOTHCOLONTYPE2</u> ) Q215B2A1	( <u>CADXTYPEOTHCOLONTYPE3</u> ) Q215C2A1	( <u>CADXTYPEOTHCOLONTYPE4</u> ) Q215D2D1	( <u>CADXTYPEOTHCOLONTYPE5</u> ) Q215E2A1	
Q215A4 ( <u>CADXTYPEOTHSKINTYPE1</u> ) <i>Was it melanoma or some other type of skin cancer?</i> 1 melanoma 2 other skin cancer 3 don't know/refused	( <u>CADXTYPEOTHSKINTYPE2</u> ) Q215B4	( <u>CADXTYPEOTHSKINTYPE3</u> ) Q215C4	( <u>CADXTYPEOTHSKINTYPE4</u> ) Q215D4	( <u>CADXTYPEOTHSKINTYPE5</u> ) Q215E4	
Q215A5 ( <u>CADXWHENTYPE1</u> ) <i>When did your doctor first tell you that you had this type of cancer?</i> [ANSWER AS EITHER] Q215A6 1 age at first dx ___ (CADXAGE1-5) Q215A7 2 year of first dx ___ (CADXYR1-5) Q215A8 3 yrs since first dx ___ (CADXYRSAGO1-5) 4 don't know/refused	( <u>CADXWHENTYPE2</u> ) Q215B5	( <u>CADXWHENTYPE3</u> ) Q215C5	( <u>CADXWHENTYPE4</u> ) Q215D5	( <u>CADXWHENTYPE5</u> ) Q215E5	
Q215A9 ( <u>CADXRADIOTHERAPY1</u> ) <i>Were you treated with radiation therapy?</i> 1 yes 2 no 3 will start within next 6 months 4 don't know/refused	( <u>CADXRADIOTHERAPY2</u> ) Q215B9	( <u>CADXRADIOTHERAPY3</u> ) Q215C9	( <u>CADXRADIOTHERAPY4</u> ) Q215D9	( <u>CADXRADIOTHERAPY5</u> ) Q215E9	
Q215A10 ( <u>CADXCHEMOTHERAPY1</u> ) <i>Were you treated with chemotherapy?</i> 1 yes 2 no 3 don't know/refused	<u>CADXCHEMOTHERAPY2</u> ) Q215B10	<u>CADXCHEMOTHERAPY3</u> ) Q215C10	<u>CADXCHEMOTHERAPY4</u> ) Q215D10	<u>CADXCHEMOTHERAPY5</u> ) Q215E10	

<p>(CADX2) Q215B  <b>Were you diagnosed with a 2<sup>nd</sup> cancer?</b>  1 yes → Q2_15B2 (NEXT CANCER)  2 no → Q2_10  3 don't know/refused → Q2_10</p>	<p>(CADX3)  Q2_15C  ... 3<sup>rd</sup></p>	<p>(CADX4)  Q2_15D  ... 4<sup>th</sup></p>	<p>(CADX5)  Q2_15E  ... 5<sup>th</sup></p>		
--	--	--	--	--	--



(COLONREMOVAL)

Q2\_10 **Have you ever had any of your large bowel or colon removed?**

- 1 yes → Q2\_101
- 2 no → Q2\_\_11
- 3 don't know/refused → Q2\_\_11

(COLONREMOVALTYPE)

Q2\_101 **[IF YES] Was it completely removed, or was only part of it removed?**

- 1 completely removed
- 2 partially removed
- 3 don't know/refused

(COLONREMOVALFIRSTWHENTYPE)

Q2\_102 **When did you first have any of your bowel or colon removed?** [ANSWER AS EITHER]

- Q2\_102A 1 age at first surgery: \_\_ \_\_ (COLONREMOVALFIRSTAGE)
- Q2\_102B 2 year of first surgery: \_\_\_\_ \_\_\_\_ \_\_\_\_ (COLONREMOVALFIRSTYR)
- Q2\_102C 3 it was first surgery on \_\_\_\_ \_\_\_\_ years ago (COLONREMOVALFIRSTYRSAGO)
- 4 don't know/refused

(COLONREMOVALMORETHANONCE)

Q2\_103 **Have you had more than one surgery to remove your bowel or colon?**

- 1 yes → Q2\_1031
- 2 no → Q2\_\_11
- 3 don't know/refused → Q2\_\_11

(COLONREMOVALLASTWHENTYPE)

Q2\_1031 **[IF YES] When did you last have this operation to remove all or part of your bowel or colon?**  
[ANSWER AS EITHER]

- Q2\_1031A 1 age at first operation: \_\_\_\_ \_\_\_\_ (COLONREMOVALLASTAGE)
- Q2\_1031B 2 year of first operation: \_\_\_\_ \_\_\_\_ \_\_\_\_ (COLONREMOVALLASTYR)
- Q2\_1031C 3 it was first operated on \_\_\_\_ \_\_\_\_ years ago (COLONREMOVALLASTYRAGO)
- 4 don't know/refused

(GALLBLADDERREMOVAL)

Q2\_\_11 **Have you had your gallbladder removed?**

- 1 yes → Q2\_\_111
- 2 no → Q2\_16\_
- 3 don't know/refused → Q2\_16\_

(GALLBLADDERREMOVALWHENTYPE)

Q2\_\_111 **[IF YES] When did you have your gallbladder removed?** [ANSWER AS EITHER]

- Q2\_\_111A 1 age at surgery: \_\_\_\_ \_\_\_\_ (GALLBLADDERREMOVALAGE)
- Q2\_\_111B 2 year of surgery: \_\_\_\_ \_\_\_\_ \_\_\_\_ (GALLBLADDERREMOVALYR)
- Q2\_\_111C 3 it was removed \_\_\_\_ \_\_\_\_ years ago (GALLBLADDERREMOVALYRSAGO)
- 4 don't know/refused

Q2\_16\_ *Now I'd like to ask you some questions about medications you may have taken.*

(ASPIRIN)

Q2\_16A *Have you ever taken aspirin, such as Anacin, Bufferin, Bayer, Excedrin, or Ecotrin, at least twice a week for more than a month?*

- 1 yes → Q2\_16A3
- 2 no → Q2\_16B
- 3 don't know/refused → Q2\_16B

(ASPIRINOFTEENTYPE)

Q2\_16A3 **[IF YES]** *How often did you take it?*

PROMPT: REGULARLY = 2X/WEEK FOR 1 MONTH OR LONGER [ANSWER AS EITHER]

Q2\_16A4 1 \_\_\_ \_\_\_ times per day (ASPIRINNUMBERPERDAY)

Q2\_16A5 2 \_\_\_ \_\_\_ times per week (ASPIRINNUMBERPERWK)

3 don't know/refused

(ASPIRINTWOYRSAGO)

Q2\_16A29 *About 2 years ago, were you taking it regularly?*

- 1 yes
- 2 no
- 3 don't know/refused

(ASPIRINTOTALTYPE)

Q2\_16A7 *In total, how many months or years did you take aspirin?* [ANSWER AS EITHER]

Q2\_16A8 1 \_\_\_ \_\_\_ number of months (ASPIRINNUMTOTALMOS)

Q2\_16A9 2 \_\_\_ \_\_\_ number of years (ASPIRINNUMTOTALYRS)

3 don't know/refused

(ACETAMINOPHEN)

Q2\_16B *Have you ever taken acetaminophen, such as Tylenol, Anacin-3, or Panadol, at least twice a week for more than a month?*

- 1 yes → Q2\_16B3
- 2 no → Q2\_16C
- 3 don't know/refused → Q2\_16C

(ACETAMINOPHENOFTEENTYPE)

Q2\_16B3 **[IF YES]** *How often did you take it?*

PROMPT: REGULARLY = 2X/WEEK FOR 1 MONTH OR LONGER [ANSWER AS EITHER]

Q2\_16B4 1 \_\_\_ \_\_\_ times per day (ACETAMINOPHENNUMBERPERDAY)

Q2\_16B5 2 \_\_\_ \_\_\_ times per week (ACETAMINOPHENNUMBERPERWK)

3 don't know/refused

(ACETAMINOPHENTWOYRSAGO)

Q2\_16B29 *About 2 years ago, were you taking it regularly?*

- 1 yes
- 2 no
- 3 don't know/refused

(ACETAMINOPHENTOTALTYPE)

Q2\_16B7 *In total, how many months or years did you take acetaminophen?* [ANSWER AS EITHER]

Q2\_16B8 1 \_\_\_ \_\_\_ number months (ACETAMINOPHENNUMTOTALMOS)

Q2\_16B9 2 \_\_\_ \_\_\_ number of years (ACETAMINOPHENNUMTOTALYRS)

3 don't know/refused

(NSAIDS)

Q2\_16C **Have you ever taken an NSAIDS-type of medication such as ibuprofen, Advil, Aleve, Motrin, Nuprin, or Medipren at least twice a week for more than a month?** PROMPT: NSAIDS ARE NON-STEROIDAL ANTI-INFLAMMATORY DRUGS

- 1 yes → Q2\_16C3
- 2 no → Q2\_16D
- 3 don't know/refused → Q2\_16D

(NSAIDSOFTENTYPE)

Q2\_16C3 **[IF YES] How often did you take it?**

PROMPT: REGULARLY = 2X/WEEK FOR 1 MONTH OR LONGER [ANSWER AS EITHER]

- Q2\_16C4 1 \_\_\_ \_\_\_ times per day (NSAIDSNUMPERDAY)
- Q2\_16C5 2 \_\_\_ \_\_\_ times per week (NSAIDSNUMPERWK)
- 3 don't know/refused

(NSAIDSTWOYRSAGO)

Q2\_16C29 **About 2 years ago, were you taking it regularly?**

- 1 yes
- 2 no
- 3 don't know/refused

(NSAIDSTOTALTYPE)

Q2\_16C7 **In total, how many months or years did you take an NSAIDS-type of medication?** [ANSWER AS EITHER]

- Q2\_16C8 1 \_\_\_ \_\_\_ number of months (NSAIDSNUMTOTALMOS)
- Q2\_16C9 2 \_\_\_ \_\_\_ number of years (NSAIDSNUMTOTALYRS)
- 3 don't know/refused

(COX2)

Q2\_16J **Have you ever taken Celebrex, Celecoxib, Vioxx, Rofecoxib, Bextra, or Valdecoxib, also known as COX-2 Inhibitors, at least twice a week for more than a month?**

- 1 yes → Q2\_16J3
- 2 no → Q2\_D16J
- 3 don't know/refused → Q2\_D16J

(COX2OFTENTYPE)

Q2\_16J3 **[IF YES] How often did you take it?** PROMPT: WHENEVER NEEDED, REGULARLY = 2X/WEEK [ANSWER AS EITHER]

- Q2\_16J4 1 \_\_\_ \_\_\_ times per day (COX2NUMPERDAY)
- Q2\_16J5 2 \_\_\_ \_\_\_ times per week (COX2NUMPERWK)
- 3 don't know/refused

(COX2TWOYRSAGO)

Q2\_16J29 **About 2 years ago, were you taking it regularly?**

- 1 yes
- 2 no
- 3 don't know/refused

(COX2TOTALTYPE)

Q2\_16J7 **In total, how many months or years did you take COX-2 Inhibitors?** [ANSWER AS EITHER]

- Q2\_16J8 1 \_\_\_ \_\_\_ number of months (COX2NUMTOTALMOS)
- Q2\_16J9 2 \_\_\_ \_\_\_ number of years (COX2NUMTOTALYRS)
- 3 don't know/refused

(BULKLAX)

Q2\_16D **Have you ever taken *bulk-forming laxatives*** [SUCH AS METAMUCIL, CITRUCEL, FIBERCON, SERUTAN, OR PSYLLIUM], **at least twice a week for more than a month?**

- 1 yes → Q2\_16D1
- 2 no → Q2\_16E
- 3 don't know/refused → Q2\_16E

(BULKLAXOFTENTYPE)

Q2\_16D1 **[IF YES] How often did you take it?** PROMPT: WHENEVER NEEDED, REGULARLY = 2X/WEEK  
[ANSWER AS EITHER]

- Q2\_16D2 1 \_\_\_ \_\_\_ times per day
- Q2\_16D3 2 \_\_\_ \_\_\_ times per week
- 3 don't know/refused

(BULKLAXTWOYRSAGO)

Q2\_16D4 **About 2 years ago, were you taking it regularly?**

- 1 yes
- 2 no
- 3 don't know/refused

(BULKLAXTOTALTYPE)

Q2\_16D5 **In total, how many months or years did you take *bulk-forming laxatives*?** [ANSWER AS EITHER]

- Q2\_16D6 1 \_\_\_ \_\_\_ number of months (BULKLAXNUMTOTALMOS)
- Q2\_16D7 2 \_\_\_ \_\_\_ number of years (BULKLAXNUMTOTALYRS)
- 3 don't know/refused

(OTHLAX)

Q2\_16E **Have you ever taken *other laxatives*** [SUCH AS EX-LAX, CORRECTOL, DULCOLAX, SENOKOT, COLACE, CASTOR OIL, COD LIVER OIL, MINERAL OIL, MILK OF MAGNESIA, LACTULOSE, EPSOM SALTS] **at least twice a week for more than a month?**

- 1 yes → Q2\_16E1
- 2 no → Q2\_16F
- 3 don't know/refused → Q2\_16F

(OTHLAXOFTENTYPE)

Q2\_16E1 **[IF YES] How often did you take them?** PROMPT: WHENEVER NEEDED, REGULARLY = 2X/WEEK  
[ANSWER AS EITHER]

- Q2\_16E2 1 \_\_\_ \_\_\_ times per day (OTHLAXNUMPERDAY)
- Q2\_16E3 2 \_\_\_ \_\_\_ times per week (OTHLAXNUMPERWK)
- 3 don't know/refused

(OTHLAXTWOYRSAGO)

Q2\_16E4 **About 2 years ago, were you taking them regularly?**

- 1 yes
- 2 no
- 3 don't know/refused

(OTHLAXTOTALTYPE)

Q2\_16E5 **In total, how many months or years did you take *other laxatives*?** [ANSWER AS EITHER]

- Q2\_16E6 1 \_\_\_ \_\_\_ number of months (OTHLAXTOTALMOS)
- Q2\_16E7 2 \_\_\_ \_\_\_ number of years (OTHLAXTOTALYRS)
- 3 don't know/refused

(MULTIVITAMIN)

Q2\_16F **Have you ever taken multivitamin pills or tablets [NOT INDIVIDUAL VITAMINS] *at least twice a week for more than a month?***

- 1 yes → Q2\_16F1
- 2 no → Q2\_16G
- 3 don't know/refused → Q2\_16G

(MULTIVITAMINOFTEENTYPE)

Q2\_16F1 **[IF YES] *How often did you take them?*** PROMPT: WHENEVER NEEDED, REGULARLY = 2X/WEEK  
[ANSWER AS EITHER]

- Q2\_16F2 1 \_\_\_ \_\_\_ times per day (MULTIVITAMINNUMBERDAY)
- Q2\_16F3 2 \_\_\_ \_\_\_ times per week (MULTIVITAMINNUMBERWK)
- 3 don't know/refused

(MULTIVITAMINTWOYRSAGO)

Q2\_16F4 ***About 2 years ago, were you taking them regularly?***

- 1 yes
- 2 no
- 3 don't know/refused

(MULTIVITAMINTOTALTYPE)

Q2\_16F5 ***In total, how many months or years did you take multivitamin pills or tablets?*** [ANSWER AS EITHER]

- Q2\_16F6 1 \_\_\_ \_\_\_ number of months (MULTIVITAMINNUMTOTALMOS)
- Q2\_16F7 2 \_\_\_ \_\_\_ number of years (MULTIVITAMINNUMTOTALYRS)
- 3 don't know/refused

(FOLICACID)

Q2\_16G **Have you ever taken folic acid or folate pills or tablets *at least twice a week for more than a month?***

- 1 yes → Q2\_16G1
- 2 no → Q2\_16H
- 3 don't know/refused → Q2\_16H

(FOLICACIDOFTEENTYPE)

Q2\_16G1 **[IF YES] *How often did you take them?*** PROMPT: WHENEVER NEEDED, REGULARLY = 2X/WEEK  
[ANSWER AS EITHER]

- Q2\_16G2 1 \_\_\_ \_\_\_ times per day (FOLICACIDNUMBERDAY)
- Q2\_16G3 2 \_\_\_ \_\_\_ times per week (FOLICACIDNUMBERWK)
- 3 don't know/refused

(FOLICACIDTWOYRSAGO)

Q2\_16G4 ***About 2 years ago, were you taking them regularly?***

- 1 yes
- 2 no
- 3 don't know/refused

(FOLICACIDTOTALTYPE)

Q2\_16G5 ***In total, how many months or years did you take folic acid or folate pills or tablets?*** [ANSWER AS EITHER]

- Q2\_16G6 1 \_\_\_ \_\_\_ number of months (FOLICACIDNUMTOTALMOS)
- Q2\_16G7 2 \_\_\_ \_\_\_ number of years (FOLICACIDNUMTOTALYRS)
- 3 don't know/refused

(CALCIUM)

Q2\_16H ***Have you ever taken calcium pills or tablets*** [NOT INCLUDING ANTACIDS] ***at least twice a week for more than a month?***

- 1 yes → Q2\_16H1
- 2 no → Q2\_16I
- 3 don't know/refused → Q2\_16I

(CALCIUMOFTENTYPE)

Q2\_16H1 **[IF YES] *How often did you take them?*** PROMPT: WHENEVER NEEDED, REGULARLY = 2X/WEEK  
[ANSWER AS EITHER]

- Q2\_16H2 1 \_\_\_ times per day (CALCIUMNUMBERDAY)
- Q2\_16H3 2 \_\_\_ times per week (CALCIUMNUMBERWK)
- 3 don't know/refused

(CALCIUMTWOYRSAGO)

Q2\_16H4 ***About 2 years ago, were you taking them regularly?***

- 1 yes
- 2 no
- 3 don't know/refused

(CALCIUMTOTALTYPE)

Q2\_16H5 ***In total, how many months or years did you take calcium pills or tablets?*** [ANSWER AS EITHER]

- Q2\_16H6 1 \_\_\_ number of months (CALCIUMNUMTOTALMOS)
- Q2\_16H7 2 \_\_\_ number of years (CALCIUMNUMTOTALYRS)
- 3 don't know/refused

(CALCIUMANTACID)

Q2\_16I ***Have you ever taken calcium-based antacids*** [SUCH AS TUMS, ROLAIDS, EXTRA-STRENGTH ROLAIDS, ALKA-MINTS, CHOOZ ANTACID GUM] ***at least twice a week for more than a month?***

- 1 yes
- 2 no AND R is female → Q3\_\_  
no AND R is male → Q4\_\_
- 3 don't know/refused AND R is female → Q3\_\_  
don't know/refused AND R is male → Q4\_\_

(CALCIUMANTACIDOFTENTYPE)

Q2\_16I1 **[IF YES] *How often did you take them?*** PROMPT: WHENEVER NEEDED, REGULARLY = 2X/WEEK  
[ANSWER AS EITHER]

- Q2\_16I2 1 \_\_\_ times per day (CALCIUMANTACIDNUMBERDAY)
- Q2\_16I3 2 \_\_\_ times per week (CALCIUMANTACIDNUMBERWK)
- 3 don't know/refused

(CALCIUMANTACIDTWOYRSAGO)

Q2\_16I4 ***About 2 years ago, were you taking them regularly?***

- 1 yes
- 2 no
- 3 don't know/refused

(CALCIUMANTACIDTOTALTYPE)

Q2\_16I5 ***In total, how many months or years did you take calcium-based antacids?*** [ANSWER AS EITHER]

- Q2\_16I6 1 \_\_\_ number of months (CALCIUMANTACIDTOTALMOS)
- Q2\_16I7 2 \_\_\_ number of years (CALCIUMANTACIDTOTALYRS)
- 3 don't know/refused

[IF R IS FEMALE → Q3\_ ]

[IF R IS MALE → Q4\_ ]

[IF R IS CONTROL AND REPORTS HAVING BEEN DIAGNOSED WITH CRC IN QUESTION Q215A2A1 → SKIP TO SECTION 9; COMPLETE SECTIONS 9 AND 10, AND Q11\_2 OF SECTION 1]

### SECTION 3: MENSTRUATION, REPRODUCTIVE HISTORY, MENOPAUSE

[IF R IS MALE, SKIP SECTION 3 → Q4\_ ]

Q3\_ *This next series of questions is about menstruation and pregnancy.*

(MENSTRUATIONAGE)

Q3\_1 *How old were you when you had your first menstrual period?*

\_\_\_ years of age

[DON'T KNOW/REFUSED = 99;

NEVER HAD MENSTRUAL PERIOD = 0]

[IF ANSWER = "0" SKIP Q3\_4 TO Q3\_43A]

(PREGNANT)

Q3\_2 *Have you ever been pregnant?*

1 yes → Q3\_21

2 no → Q3\_3

3 don't know/refused → Q3\_3

(PREGNANCIESNUM)

Q3\_21 [IF YES] *How many times have you been pregnant? Please include miscarriages, stillbirths, tubal pregnancies and abortions.* PROMPT: ARE YOU CURRENTLY PREGNANT FOR THE FIRST TIME?

[IF CURRENTLY PREGNANT, EXCLUDE CURRENT PREGNANCY.]

\_\_\_ number of pregnancies

[CURRENTLY PREGNANT FOR THE FIRST TIME = 97] → Q3\_3

[DON'T KNOW/REFUSED = 99]

(PREGNANCIESMULTIPLEBABYNUM)

Q3\_22 *Were you ever pregnant with more than one baby?* PROMPT: TWINS, TRIPLETS, OR MORE.

[IF YES] How many times?

\_\_\_ number of pregnancies with multiples

[NONE = 00]

[DON'T KNOW/REFUSED = 99]

(PREGNANCIESLASTOVERSIXMOSNUM)

Q3\_23 *How many of your pregnancies lasted 6 months or longer?* PROMPT: PREGNANCY USUALLY LASTS 9 MONTHS. SIX MONTHS IS ABOUT THE EARLIEST A BABY COULD SURVIVE OUTSIDE OF THE WOMB.

\_\_\_ number of pregnancies

[NONE = 00]

[DON'T KNOW/REFUSED = 99]

(LIVEBIRTHSNUM)

Q3\_24 *How many of your pregnancies resulted in live births?*

\_\_\_ numbers of pregnancies

[NONE = 00] [→ Q3\_3]

[DON'T KNOW/REFUSED = 99] [→ Q3\_3]

(LIVEBIRTHFIRSTWHENTYPE)

Q3\_241 **How old were you at the first live birth?** [ANSWER AS EITHER]

Q3\_241A 1 age at first birth: \_\_\_ \_\_\_ (LIVEBIRTHFIRSTAGE)

Q3\_241B 2 year of first birth: \_\_\_ \_\_\_ \_\_\_ \_\_\_ (LIVEBIRTHFIRSTYR)

Q3\_241C 3 I first gave birth \_\_\_ \_\_\_ years ago (LIVEBIRTHFIRSTYRSAGO)

4 don't know/refused

[IF ANSWER TO Q3\_24 = MORE THAN 2 PREGNANCIES → Q3\_3]

(LIVEBIRTHLASTWHENTYPE)

Q3\_242 **How old were you at the last live birth?** [ANSWER AS EITHER]

Q3\_242A 1 age at last birth: \_\_\_ \_\_\_ (LIVEBIRTHLASTAGE)

Q3\_242B 2 year of last birth: \_\_\_ \_\_\_ \_\_\_ \_\_\_ (LIVEBIRTHLASTYR)

Q3\_242C 3 I last gave birth \_\_\_ \_\_\_ years ago (LIVEBIRTHLASTYRSAGO)

4 don't know/refused

(HORMCONTRACEPTIVE)

Q3\_3 **Have you ever used birth control pills or other hormonal contraceptives for one year or longer?**

1 yes

2 no

3 don't know/refused

[IF > 1 (NONE or DON'T KNOW) & Q3\_1 = 0 (NEVER HAD A PERIOD) → Q3\_43A0]

[IF > 1 (NONE or DON'T KNOW) → Q3\_4]

(HORMCONTRACEPTIVEWHENTYPE)

Q3\_31 [IF YES] **How old were you when you first used hormonal contraceptives?** [ANSWER AS EITHER]

Q3\_31A 1 age at first use: \_\_\_ \_\_\_ (HORMCONTRACEPTIVEAGE)

Q3\_31B 2 year of first use: \_\_\_ \_\_\_ \_\_\_ \_\_\_ (HORMCONTRACEPTIVEYR)

Q3\_31C 3 I first used them \_\_\_ \_\_\_ years ago (HORMCONTRACEPTIVEYRSAGO)

4 don't know/refused

(HORMCONTRACEPTIVETWOYRSAGO)

Q3\_32 [IF APPLICABLE (IF BEGAN USING HORMONAL CONTRACEPTIVES OVER TWO YEARS AGO)]

**Were you still using them about two years ago?**

1 yes

2 no

3 don't know/refused

(HORMCONTRACEPTIVENUMTOTALYRS)

Q3\_33 **In total, how many years did you take hormonal contraceptives?**

\_\_\_ \_\_\_ number of years

[IF LESS THAN 1 YEAR, RECORD AS 0;

DON'T KNOW/REFUSED = 99]

[IF Q3\_1 = 0 (NEVER HAD PERIOD) → Q3\_431A0]

(PERIODINLAST12MOS)

Q3\_4 **Have you had a menstrual period in the last 12 months?** PROMPT: ONLY MENSTRUAL BLEEDING IS OF INTEREST. DO NOT INCLUDE BLEEDING THAT RESULTS FROM HORMONE REPLACEMENT THERAPY (HRT) OR PROGESTERONE, PROGESTINS, OR WITHDRAWAL BLEEDING.

1 yes → Q3\_431A0

2 no → Q3\_41

3 don't know/refused → Q3\_431A0



(PERIODSTOPTEMPPER)

- Q3\_41 [IF NO] **Have your menstrual periods stopped permanently, or only temporarily due to pregnancy, breast-feeding, or other conditions?**
- 1 permanently → Q3\_42
  - 2 temporarily → Q3\_431A0
  - 3 don't know/refused → Q3\_431A0

(PERIODSTOPTEMPPERWHENTYPE)

- Q3\_42 **How old were you when your periods stopped permanently?** [ANSWER AS EITHER]
- Q3\_42A 1 age when periods stopped: \_\_\_ \_\_\_ (PERIODSTOPPERMAGE)
  - Q3\_42B 2 year when periods stopped: \_\_\_ \_\_\_ \_\_\_ \_\_\_ (PERIODSTOPPERMYR)
  - Q3\_42C 3 periods stopped \_\_\_ \_\_\_ years ago (PERIODSTOPPERMYSAGO)
  - 4 don't know/refused

(PERIODSTOPPERMTYPE)

- Q3\_43A **Why did your menstrual periods stop permanently?** [MARK ONE]
- 1 **natural menopause** → Q3\_431A0
  - 2 **gynecologic surgery** → Q3\_431A1
  - 3 **radiation or chemotherapy** → Q3\_432
  - 4 **other (specify)** \_\_\_\_\_ → Q3\_433 (PERIODSTOPPERMTYPEOTH)
  - 6 don't know/refused → Q3\_431A0

(PERIODSTOPRADTNCHEMOWHENTYPE)

- Q3\_432 [IF YES TO HAVING RADIATION OR CHEMOTHERAPY] **When did you first have radiation or chemotherapy?** [ANSWER AS EITHER]
- Q3\_432A 1 age when radiation/chemotherapy was given: \_\_\_ \_\_\_ (PERIODSTOPRADTNCHEMOAGE)
  - Q3\_432B 2 year when radiation/chemotherapy was given: \_\_\_ \_\_\_ \_\_\_ \_\_\_ (PERIODSTOPRADTNCHEMOYR)
  - Q3\_432C 3 I had radiation/chemotherapy \_\_\_ \_\_\_ years ago (PERIODSTOPRADTNCHEMOYRSAGO)
  - 4 don't know/refused

[GO TO → Q3\_431A0]

(PERIODSTOPOTHERWHENTYPE)

- Q3\_433 [IF YES TO HAVING "OTHER" SPECIFIED CONDITION OR TREATMENT WHICH MADE HER PERIODS STOP PERMANENTLY] **When did you first have ["other"]?** [ANSWER AS EITHER]
- Q3\_433A 1 age when [OTHER] occurred: \_\_\_ \_\_\_ (PERIODSTOPOTHERAGE)
  - Q3\_433B 2 year when [OTHER] occurred: \_\_\_ \_\_\_ \_\_\_ \_\_\_ (PERIODSTOPOTHERYR)
  - Q3\_433C 3 the [OTHER] occurred \_\_\_ \_\_\_ years ago (PERIODSTOPOTHERYRSAGO)
  - 4 don't know/refused

(PERIODSTOPGYNOSURGERY1)

- Q3\_431A0 **Have you ever had gynecological surgery?**
- 1 yes → Q3\_431A1
  - 2 no → Q3\_5\_
  - 3 don't know/refused → Q3\_5\_

(PERIODSTOPGYNOSURGERYTYPE1)

Q3\_431A1 [IF YES] **What type of gynecologic surgery did you have?**

- 1 *hysterectomy along with one ovary or partial ovary*
- 2 *hysterectomy along with both ovaries*
- 3 *hysterectomy only* PROMPT: ONLY THE UTERUS OR WOMB WAS REMOVED
- 4 *one ovary was removed, in whole or part, without hysterectomy*
- 5 *both ovaries were removed, without hysterectomy*
- 6 *other (specify)* \_\_\_\_\_ (PERIODSTOPGYNOSURGERYTYPEOTH1)
- 7 don't know/refused

(PERIODSTOPGYNOSURGERYWHENTYPE1)

Q3\_431A2 **When did you first have this surgery?** [ANSWER AS EITHER]

- Q3\_431A3 1 age when surgery was done: \_\_ \_\_ (PERIODSTOPGYNOSURGERYAGE1)
- Q3\_431A4 2 year when surgery was done: \_\_ \_\_ \_\_ \_\_ (PERIODSTOPGYNOSURGERYYR1)
- Q3\_431A5 3 surgery was done \_\_ \_\_ years ago (PERIODSTOPGYNOSURGERYYRSAGO1)
- 4 don't know/refused

(PERIODSTOPGYNOSURGERY2)

Q3\_431B **Did you have any other gynecologic surgeries?**

- 1 yes → Q3\_431B1
- 2 no → Q3\_5\_
- 3 don't know/refused → Q3\_5\_

(PERIODSTOPGYNOSURGERYTYPE2)

Q3\_431B1 [IF YES] **What type of surgery did you have?**

- 1 *hysterectomy along with one ovary or partial ovary*
- 2 *hysterectomy along with both ovaries*
- 3 *hysterectomy only* PROMPT: ONLY THE UTERUS OR WOMB WAS REMOVED
- 4 *one ovary was removed, in whole or part, without hysterectomy*
- 5 *both ovaries were removed, without hysterectomy*
- 6 *other(specify)* \_\_\_\_\_ (PERIODSTOPGYNOSURGERYTYPEOTH2)
- 7 don't know/refused

(PERIODSTOPGYNOSURGERYWHENTYPE2)

Q3\_431B2 **When did you first have this surgery?** [ANSWER AS EITHER]

- Q3\_431B3 1 age when surgery was done: \_\_ \_\_ \_\_ (PERIODSTOPGYNOSURGERYAGE2)
- Q3\_431B4 2 year when surgery was done: \_\_ \_\_ \_\_ \_\_ (PERIODSTOPGYNOSURGERYYR2)
- Q3\_431B5 3 surgery was done \_\_ \_\_ years ago (PERIODSTOPGYNOSURGERYYRSAGO2)
- 4 don't know/refused

Q3\_5\_ **Doctors prescribe hormone replacement therapy for many reasons including menopausal symptoms, surgical removal of the ovaries, osteoporosis, and heart disease prevention.**

(HRTSIXMONTHSORLONGER)

Q3\_5 **Have you ever used a pill, patch, or implant form of hormone replacement therapy for 6 months or longer?** PROMPT: MENOPAUSAL SYMPTOMS INCLUDE HOT FLASHES, SWEATING, AND DEPRESSION. [DO NOT INCLUDE: HORMONE THERAPY THAT WAS PRESCRIBED FOR BIRTH CONTROL; HORMONE THERAPY DELIVERED BY INJECTIONS, VAGINAL CREAMS, OR VAGINAL SUPPOSITORIES]

- 1 yes → Q3\_51
- 2 no → Q3\_6
- 3 don't know/refused → Q3\_6

(HRTSTILLHAVEPERIODWHENFIRSTTAK)

- Q3\_51 [IF YES] *Were you still having menstrual periods when you first took these hormones?*
- 1 yes
  - 2 no
  - 3 don't know/refused

(HRTESTROGEN)

- Q3\_52 *First I will ask about estrogen therapy. Were you ever prescribed an estrogen-only pill or patch (such as Premarin) that you used for 6 months or longer?*
- 1 yes → Q3\_521
  - 2 no → Q3\_53\_
  - 3 don't know/refused → Q3\_53\_

(HRTESTROGENWHENTYPE)

- Q3\_521 [IF YES] *How old were you when you first took estrogen-only medication?* [ANSWER AS EITHER]
- Q3\_521A 1 age when first taken: \_\_\_\_ (HRTESTROGENAGE)
- Q3\_521B 2 year first taken: \_\_\_\_ (HRTESTROGENYR)
- Q3\_521C 3 I first took estrogen-only medication \_\_\_\_ years ago (HRTESTROGENYRSAGO)
- 4 don't know/refused
- [IF BEGAN TAKING LESS THAN 2 YEARS AGO → Q3\_523]

(HRTESTROGENTWOYRSAGO)

- Q3\_522 [IF APPLICABLE] *Were you still using estrogen-only medication about two years ago?*
- 1 yes
  - 2 no
  - 3 don't know/refused

(HRTESTROGENTOTALTYPE)

- Q3\_523 *In total, how many months or years did you take estrogen-only medication?* [ANSWER AS EITHER]
- Q3\_523A 1 number of months \_\_\_\_ (HRTESTROGENNUMTOTALMOS)
- Q3\_523B 2 number of years \_\_\_\_ (HRTESTROGENNUMTOTALYRS)
- 3 don't know/refused

- Q3\_53\_ *Progesterone or progestin is frequently prescribed by doctors along with estrogen. Some common brands are Premphase and Prem-Pro* [WE ARE ONLY INTERESTED IN PROGESTERONE/PROGESTIN TAKEN IN COMBINATION WITH ESTROGEN. SEE QXQ FOR LIST OF PROGESTERONE/PROGESTIN-ONLY MEDICATIONS, WHICH WOULD NOT BE INCLUDED HERE]

(HRTPROGESTERONE)

- Q3\_53 *Have you ever taken progesterone or progestin along with estrogens for menopause or other reasons for 6 months or longer?* [WE ARE ONLY INTERESTED IN PROGESTERONE/PROGESTIN TAKEN IN COMBINATION WITH ESTROGEN.]
- 1 yes → Q3\_531
  - 2 no → Q3\_54\_
  - 3 don't know/refused → Q3\_54\_

(HRTPROGESTERONEWHENTYPE)

- Q3\_531 [IF YES] *How old were you when you first took this medication?* [ANSWER AS EITHER]  
Q3\_531A 1 age when first taken: \_\_\_\_ (HRTPROGESTERONEAGE)  
Q3\_531B 2 year first taken: \_\_\_\_ (HRTPROGESTERONEYR)  
Q3\_531C 3 I first took progesterone along with estrogens \_\_\_\_ years ago  
(HRTPROGESTERONEYRSAGO)  
4 don't know/refused  
[IF BEGAN TAKING LESS THAN 2 YEARS AGO → Q3\_533]

(HRTPROGESTERONETWOYRSAGO)

- Q3\_532 [IF APPLICABLE] *Were you still using this medication about two years ago?*  
1 yes  
2 no  
3 don't know/refused

(HRTPROGESTERONETOTALTYPE)

- Q3\_533 *In total, how many months or years did you take progesterone or progestin along with estrogen?*  
[ANSWER AS EITHER]  
Q3\_533A 1 number of months \_\_\_\_ (HRTPROGESTERONENUMTOTALMOS)  
Q3\_533B 2 number of years \_\_\_\_ (HRTPROGESTERONENUMTOTALYRS)  
3 don't know/refused

Q3\_54\_ *Testosterone is sometimes prescribed by doctors alone, or along with estrogen.*

(HRTTESTOSTERONE)

- Q3\_54 *Have you ever taken testosterone, alone or along with estrogen for menopause or other reasons for 6 months or more?*  
1 yes → Q3\_541  
2 no → Q3\_6  
3 don't know/refused → Q3\_6

(HRTTESTOSTERONEWHENTYPE)

- Q3\_541 [IF YES] *How old were you when you first took this medication?* [ANSWER AS EITHER]  
Q3\_541A 1 age when first taken: \_\_\_\_ (HRTTESTOSTERONEAGE)  
Q3\_541B 2 year first taken: \_\_\_\_ (HRTTESTOSTERONEYR)  
Q3\_541C 3 I first took testosterone alone or along with estrogens \_\_\_\_ years ago  
(HRTTESTOSTERONEYRSAGO)  
4 don't know/refused  
[IF BEGAN TAKING LESS THAN 2 YEARS AGO → Q3\_543]

(HRTTESTOSTERONETWOYRSAGO)

- Q3\_542 [IF APPLICABLE] *Were you still using this medication about two years ago?*  
1 yes  
2 no  
3 don't know/refused

(HRTTESTOSTERONETOTALTYPE)

- Q3\_543 *In total, how many months or years did you take testosterone?* [ANSWER AS EITHER]  
Q3\_543A 1 number of months \_\_\_\_ (HRTTESTOSTERONENUMTOTALMOS)  
Q3\_543B 2 number of years \_\_\_\_ (HRTTESTOSTERONENUMTOTALYRS)  
3 don't know/refused

(HRTANTIESTROGEN)

- Q3\_6 **Have you ever taken tamoxifen, raloxifene, or other anti-estrogen medication for 6 months or longer?**
- 1 yes → Q3\_61A
  - 2 no → Q4\_
  - 3 possibly [R HAS PARTICIPATED IN A CLINICAL TRIAL FOR TAMOXIFEN, RALOXIFENE, OR OTHER ANTI-ESTROGEN MEDICATION] → Q3\_61A
  - 4 don't know/refused → Q4\_

(HRTANTIESTROGENTYPE1-4)

- Q3\_61A **[IF YES OR POSSIBLY] Did you take tamoxifen, raloxifene, or do you know what the other anti-estrogen was? [MARK ALL THAT APPLY]**
- 1 tamoxifen
  - 2 raloxifene
  - 3 other: \_\_\_\_\_ (HRTANTIESTROGENTYPEOTH1-4)
  - 4 no more answers
  - 5 don't know/refused

(HRTANTIESTROGENWHENTYPE)

- Q3\_62 **How old were you when you first took this medication? [ANSWER AS EITHER]**
- Q3\_62A 1 age when any one of these medications was first taken: \_\_\_\_ \_\_\_\_  
(HRTANTIESTROGENAGE)
- Q3\_62B 2 year when any one of these medications was first taken: \_\_\_\_ \_\_\_\_ \_\_\_\_ \_\_\_\_  
(HRTANTIESTROGENYR)
- Q3\_62C 3 I first took any one of these medications \_\_\_\_ \_\_\_\_ years ago  
(HRTANTIESTROGENYRSAGO)
- 4 don't know/refused

(HRTANTIESTROGENTWOYRSAGO)

- Q3\_63 **[ONLY IF FIRST TOOK IT >2 YRS AGO] Were you taking this medication about two years ago?**  
PROMPT: TAKING ANY ONE OF THESE MEDICATIONS.
- 1 yes
  - 2 no
  - 3 don't know/refused

(HRTESTROGENTOTALTYPE)

- Q3\_64 **In total, how many months or years did you take tamoxifen, raloxifene or other anti-estrogen medication?** PROMPT: TAKING ANY ONE OF THESE MEDICATIONS.  
PROMPT: IF YOU TOOK MORE THAN ONE OF THESE MEDICATIONS, PLEASE ADD UP TOGETHER ALL OF THE TIME YOU TOOK ANY OF THE MEDICATIONS. [ANSWER AS EITHER]
- Q3\_64A 1 number of months \_\_\_\_ \_\_\_\_ (HRTESTROGENNUMTOTALMOS)
- Q3\_64B 2 number of years \_\_\_\_ \_\_\_\_ (HRTESTROGENNUMTOTALYRS)
- 3 don't know/refused

**SECTION 4: FAMILY HISTORY**

Q4\_ *Now I have some questions about the health history of some of your family members. We are only interested in relatives who are related to you by blood, including half-siblings. This does not include adopted relatives, or relatives by marriage. [HALF SIBLINGS ARE INDIVIDUALS WHO HAVE EITHER THE SAME MOTHER OR THE SAME FATHER, BUT DO NOT SHARE BOTH PARENTS WITH YOU]*

(ADOPTED)

Q41 *Were you adopted?*

- 1 yes → Q411
- 2 no/not that I'm aware of → Q441
- 3 don't know/refused → Q441

(KNOWMEDHISTBLOODRELATIVES)

Q411 **[IF YES]** *Do you know anything about the medical history of your blood relatives?*

- 1 yes → Q441
- 2 no → Q445
- 3 don't know/refused → Q445

(BIRTHWHENTYPE)

Q441 *When was your mother born? [ANSWER AS EITHER]*

Q441A 1 Fill in date of birth:

Q441A month \_\_\_\_ [DK/REF MONTH = 13] (BIRTHMONTH)

Q441ADD day \_\_\_\_ [DK/REF DAY = 32] (BIRTHDAY)

Q441AAY year \_\_\_\_ [DK/REF YEAR = 9999] (BIRTHYEAR) *or*

Q441B 2 current age: \_\_\_\_ years (CURRENTAGE) *or*

3 don't know/refused

(STILLLIVE)

Q441C *Is she still living?*

- 1 yes → Q441J
- 2 no → Q441D
- 3 don't know/refused → Q441J

(DEATHWHENTYPE)

Q441D **[IF DECEASED]** *When did she die? [ANSWER AS EITHER]*

Q441E 1 she died in the year \_\_\_\_ (DEATHYEAR)

Q441F 2 she died at the age of \_\_\_\_ years (DEATHAGE)

Q441G 3 she died \_\_\_\_ years ago (DEATHYEARSAGO)

4 don't know/refused

Q441H *In what city and state did she die?*

Q441H city: \_\_\_\_\_ (DEATHCITY)

Q441I state: \_\_\_\_\_ (DEATHSTATE)

[DON'T KNOW/REFUSED = BLANK]

Q441INAM *What was her full name? [PLEASE ENTER FULL NAME, IF DON'T KNOW/REFUSED INDICATE AS SUCH AND PRESS THE ENTER KEY]*

(CADX1)

Q441J *Was she ever diagnosed with cancer?*

- 1 yes → Q441A2
- 2 no/not that I'm aware of → Q442
- 3 don't know/refused → Q442

(MOTHER)

1 <sup>st</sup> CANCER	2 <sup>nd</sup> CANCER	3 <sup>rd</sup> CANCER	4 <sup>th</sup> CANCER	5 <sup>th</sup> CANCER	CANCER TYPES
Q441A2 ( <u>CADXTYPE1</u> ) [IF YES] <i>What type of cancer was it?</i> [ENTER CODE] ___ IF = 42 → Q441A2OT IF = 34 → Q441A4 ALL OTHERS → Q441A5	( <u>CADXTYPE2</u> ) Q441B2	( <u>CADXTYPE3</u> ) Q441C2	( <u>CADXTYPE4</u> ) Q441D2	( <u>CADXTYPE5</u> ) Q441E2	10 ABDOMINAL 11 APPENDIX 12 BILE or BILIARY DUCT 13 BLADDER 14 BLOOD 15 BONE
Q441A2OT ( <u>CADXTYPEOTH1</u> ) [IF 42-OTHER CANCER WAS REPORTED] <i>What type of cancer was it?</i> Specify _____	( <u>CADXTYPEOTH2</u> ) Q441B2OT	( <u>CADXTYPEOTH3</u> ) Q441C2OT	( <u>CADXTYPEOTH4</u> ) Q441D2OT	( <u>CADXTYPEOTH5</u> ) Q441E2OT	16 BONE MARROW 17 BRAIN 18 BREAST
Q441A2A ( <u>CADXTYPEOTHCOLONORSKIN1</u> ) [IVER: DID R REPORT COLON OR SKIN AS OTHER CANCER?] 1 CRC, BOWEL, GASTRO/INTESTINAL → Q441A2A1 2 SKIN CANCER → Q441A4 3 PRE-CANCER OTHER THAN COLON → Q441B0 4 OTHER TYPE OF CANCER → Q441A5	( <u>CADXTYPEOTHCOLONORSKIN2</u> ) Q441B2A	( <u>CADXTYPEOTHCOLONORSKIN3</u> ) Q441C2A	( <u>CADXTYPEOTHCOLONORSKIN4</u> ) Q441D2A	( <u>CADXTYPEOTHCOLONORSKIN5</u> ) Q441E2A	19 CERVICAL 20 COLON (LARGE INTESTINE) 21 COLORECTAL 22 ENDOMETRIAL 23 ESOPHAGEAL 24 GALL BLADDER 25 GASTROESOPHAGEAL 26 HEPATO-BILIARY
Q441A2A1 ( <u>CADXTYPEOTHCOLONTYPE1</u> ) <i>What specific type of cancer was it?</i> 1 colon 2 rectal 3 colorectal 4 other, _____ 5 don't know/refused [GO TO → Q441A5]	( <u>CADXTYPEOTHCOLONTYPE2</u> ) Q441B2A1	( <u>CADXTYPEOTHCOLONTYPE3</u> ) Q441C2A1	( <u>CADXTYPEOTHCOLONTYPE4</u> ) Q441D2A1	( <u>CADXTYPEOTHCOLONTYPE5</u> ) Q441E2A1	27 INTESTINAL, NOS 28 KIDNEY 29 LEUKEMIA (ACUTE, CHRONIC, OTHER) 30 LIVER 31 LUNG 32 LYMPHOMA, HODGKINS 33 MELANOMA
Q441A4 ( <u>CADXTYPEOTHSKINTYPE1</u> ) <i>Was it melanoma or another type of skin cancer?</i> 1 melanoma 2 other skin cancer 3 don't know/refused	( <u>CADXTYPEOTHSKINTYPE2</u> ) Q441B4	( <u>CADXTYPEOTHSKINTYPE3</u> ) Q441C4	( <u>CADXTYPEOTHSKINTYPE4</u> ) Q441D4	( <u>CADXTYPEOTHSKINTYPE5</u> ) Q441E4	34 NON-HODGKINS LYMPHOMA (LYMPH, LYMPHATIC) 35 OVARIAN 36 PANCREATIC 37 PROSTATE 38 RECTAL
Q441A5 ( <u>CADXAGE1</u> ) <i>What was her age at diagnosis?</i> Age at diagnosis _____ [DON'T KNOW/REF = 99]	( <u>CADXAGE2</u> ) Q441B5	( <u>CADXAGE3</u> ) Q441C5	( <u>CADXAGE4</u> ) Q441D5	( <u>CADXAGE5</u> ) Q441E5	39 RENAL PELVIS 40 SKIN-BASAL OR SQUAMOUS CELL CARCINOMA
Q441A6 ( <u>CADXWHENTYPE1</u> ) <i>How long ago was it diagnosed?</i> [ANSWER AS EITHER] Q441A7 1 [year of dx] _____ ( <u>CADXYR1-5</u> ) Q441A8 2 [years since dx] _____ ( <u>CADXYRSAG01-5</u> ) 3 don't know/refused	( <u>CADXWHENTYPE2</u> ) Q441B6	( <u>CADXWHENTYPE3</u> ) Q441C6	( <u>CADXWHENTYPE4</u> ) Q441D6	( <u>CADXWHENTYPE5</u> ) Q441E6	41 SMALL INTESTINE (BOWEL) 42 SPINAL, NOS 43 STOMACH (GASTRIC)
Q441B0 ( <u>CADX2</u> ) <i>Has/had your mother been diagnosed with a 2<sup>nd</sup> cancer?</i> 1 yes → Q441B2 (Next Cancer) 2 no → Q442 9 don't know/refused → Q442	( <u>CADX3</u> ) Q441C0 ... 3 <sup>rd</sup>	( <u>CADX4</u> ) Q441D0 ... 4 <sup>th</sup>	( <u>CADX5</u> ) Q441E0 ... 5 <sup>th</sup>		44 THROAT 45 THYROID 46 URETER 47 UTERINE 48 OTHER(SPECIFY) 99 DON'T KNOW/REFUSED

(BIRTHWHENTYPE)

Q442 **When was your *father* born?** [ANSWER AS EITHER]

- Q442A 1 Fill in date of birth:  
Q442A month \_\_\_\_ [DK/REF MONTH = 13] (BIRTHMONTH)  
Q442ADD day \_\_\_\_ [DK/REF DAY = 32] (BIRTHDAY)  
Q442AYY year \_\_\_\_ [DK/REF YEAR = 9999] (BIRTHYEAR) *or*  
Q442B 2 current age: \_\_\_\_ years (CURRENTAGE) *or*  
3 don't know/refused

(STILLLIVE)

Q442C **Is he still living?**

- 1 yes → Q442J  
2 no → Q442D  
4 don't know/refused → Q442J

(DEATHWHENTYPE)

Q442D **[IF DECEASED] When did he die?** [ANSWER AS EITHER]

- Q442E 1 he died in the year \_\_\_\_ (DEATHYEAR)  
Q442F 2 he died at the age of \_\_\_\_ years (DEATHAGE)  
Q442G 3 he died \_\_\_\_ years ago (DEATHYEARSAGO)  
4 don't know/refused

Q442H **In what city and state did he die?**

- Q442H city: \_\_\_\_\_ (DEATHCITY)  
Q442I state: \_\_\_\_\_ (DEATHSTATE)  
[DON'T KNOW/REFUSED = BLANK]

Q441 INAM **What was his full name?** [PLEASE ENTER FULL NAME, IF DON'T KNOW/REFUSED INDICATE AS SUCH AND PRESS THE ENTER KEY]

(CADX1)

Q442J **Was he ever diagnosed with cancer?**

- 1 yes → Q442A2  
2 no/not that I'm aware of → Q4431  
3 don't know/refused → Q4431



(FATHER)

1 <sup>st</sup> CANCER	2 <sup>nd</sup> CANCER	3 <sup>rd</sup> CANCER	4 <sup>th</sup> CANCER	5 <sup>th</sup> CANCER	CANCER TYPES
Q442A2 ( <u>CADXTYPE1</u> ) <b>[IF YES] What type of cancer was it?</b> [ENTER CODE] ___ IF = 42 → Q442A2OT IF = 34 → Q442A4 ALL OTHERS → Q442A5	( <u>CADXTYPE2</u> ) Q442B2	( <u>CADXTYPE3</u> ) Q442C2	( <u>CADXTYPE4</u> ) Q442D2	( <u>CADXTYPE5</u> ) Q442E2	10 ABDOMINAL 11 APPENDIX 12 BILE or BILIARY DUCT 13 BLADDER 14 BLOOD 15 BONE
Q442A2OT ( <u>CADXTYPEOTH1</u> ) <b>[IF 42-OTHER CANCER WAS REPORTED]</b> <b>What type of cancer was it?</b> Specify _____	( <u>CADXTYPEOTH2</u> ) Q442B2OT	( <u>CADXTYPEOTH3</u> ) Q442C2OT	( <u>CADXTYPEOTH4</u> ) Q442D2OT	( <u>CADXTYPEOTH5</u> ) Q442E2OT	16 BONE MARROW 17 BRAIN 18 BREAST
Q442A2A ( <u>CADXTYPEOTHCOLONORSKIN1</u> ) [LIVER: DID R INDICATE COLON OR SKIN AS OTHER CANCER?] 1 CRC, BOWEL, GASTRO/INTESTINAL → Q442A2A1 2 SKIN CANCER → Q442A4 3 PRE-CANCER OTHER THAN COLON → Q442B0 4 OTHER TYPE OF CANCER → Q442A5	( <u>CADXTYPEOTHCOLONORSKIN2</u> ) Q442B2A	( <u>CADXTYPEOTHCOLONORSKIN3</u> ) Q442B2A	( <u>CADXTYPEOTHCOLONORSKIN4</u> ) Q442D2A	( <u>CADXTYPEOTHCOLONORSKIN5</u> ) Q442E2A	19 CERVICAL 20 COLON (LARGE INTESTINE) 21 COLORECTAL 22 ENDOMETRIAL 23 ESOPHAGEAL 24 GALL BLADDER 25 GASTROESOPHAGEAL
Q442A2A1 ( <u>CADXTYPEOTHCOLONTYPE1</u> ) <b>What specific type of cancer was it?</b> 1 colon 2 rectal 3 colorectal 4 other, _____ 5 don't know/refused [GO TO → Q442A5]	( <u>CADXTYPEOTHCOLONTYPE2</u> ) Q442B2A1	( <u>CADXTYPEOTHCOLONTYPE3</u> ) Q442C2A1	( <u>CADXTYPEOTHCOLONTYPE4</u> ) Q442D2A1	( <u>CADXTYPEOTHCOLONTYPE5</u> ) Q442E2A1	26 HEPATO-BILIARY 27 INTESTINAL, NOS 28 KIDNEY 29 LEUKEMIA (ACUTE, CHRONIC, OTHER)
Q442A4 ( <u>CADXTYPEOTHSKINTYPE1</u> ) <b>Was it melanoma or some other type of skin cancer?</b> 1 melanoma 2 other skin cancer 3 don't know/refused	( <u>CADXTYPEOTHSKINTYPE2</u> ) Q442B4	( <u>CADXTYPEOTHSKINTYPE3</u> ) Q442C4	( <u>CADXTYPEOTHSKINTYPE4</u> ) Q442D4	( <u>CADXTYPEOTHSKINTYPE5</u> ) Q442E4	30 LIVER 31 LUNG 32 LYMPHOMA, HODGKINS 33 MELANOMA
Q442A5 ( <u>CADXAGE1</u> ) <b>What was his age at diagnosis?</b> Age at diagnosis ___ [DON'T KNOW/REF = 99]	( <u>CADXAGE2</u> ) Q442B5	( <u>CADXAGE3</u> ) Q442C5	( <u>CADXAGE4</u> ) Q442D5	( <u>CADXAGE5</u> ) Q442E5	34 NON-HODGKINS LYMPHOMA (LYMPH, LYMPHATIC)
Q442A6 ( <u>CADXWHENTYPE1</u> ) <b>How long ago was it diagnosed?</b> [ANSWER AS EITHER] Q442A7 1 [year of dx] ___ (CADXYR1-5) Q442A8 2 [years since dx] ___ (CADXYRSAGO1-5) 3 don't know/refused	( <u>CADXWHENTYPE2</u> ) Q442B6	( <u>CADXWHENTYPE3</u> ) Q442C6	( <u>CADXWHENTYPE4</u> ) Q442D6	( <u>CADXWHENTYPE5</u> ) Q442E6	35 OVARIAN 36 PANCREATIC 37 PROSTATE 38 RECTAL
Q442B0 ( <u>CADX2</u> ) <b>Has/had this your father been diagnosed with a 2<sup>nd</sup> cancer?</b> 1 yes → Q442B2 (NEXT CANCER) 2 no → Q4431 3 don't know/refused → Q4431	( <u>CADX2</u> ) Q442C0 ... 3 <sup>rd</sup>	( <u>CADX2</u> ) Q442D0 ... 4 <sup>th</sup>	( <u>CADX2</u> ) Q442E0 ... 5 <sup>th</sup>		39 RENAL PELVIS 40 SKIN-BASAL OR SQUAMOUS CELL CARCINOMA 41 SMALL INTESTINE (BOWEL) 42 SPINAL, NOS 43 STOMACH (GASTRIC) 44 THROAT 45 THYROID 46 URETER 47 UTERINE 48 OTHER(SPECIFY) 49 DON'T KNOW/REFUSED

(HAVEFULLSIBLINGS)

Q4431 **Do you have any full brothers or sisters, whether living or deceased?** PROMPT: THESE ARE OTHER CHILDREN THAT BOTH YOUR MOTHER AND YOUR FATHER HAD TOGETHER.

- 1 yes → Q4431A
- 2 no → Q4432
- 3 don't know/refused → Q4432
- 4 yes, but I don't know anything about them → Q4432

(FULLBROTHERNUM)

Q4431A [IF YES] **How many brothers do you have?** \_\_\_ \_\_\_ number of full brothers

(FULLSISTERNUM)

Q4431B [IF YES] **How many sisters do you have?** \_\_\_ \_\_\_ number of full sisters

(HAVEHALFSIBLINGS)

Q4432 **Do you have any half-brothers or sisters, whether living or deceased?** PROMPT: THESE ARE OTHER CHILDREN THAT EITHER YOUR MOTHER OR YOUR FATHER HAD, BUT NOT TOGETHER

- 1 yes → Q4432A
- 2 no  
IF NO TO Q4432 (R HAS NO SIBLINGS--FULL OR HALF) → Q445  
IF YES TO Q4431 (R HAS ONLY FULL SIBLINGS & KNOWS ABOUT THEM) → Q4440
- 3 don't know/refused  
IF NO TO Q4432 (R HAS NO SIBLINGS--FULL OR HALF) → Q445  
IF YES TO Q4431 (R HAS ONLY FULL SIBLINGS & KNOWS ABOUT THEM) → Q4440
- 4 yes, but I don't know anything about them  
IF NO TO Q4432 (R HAS NO SIBLINGS--FULL OR HALF) → Q445  
IF YES TO Q4431 (R HAS ONLY FULL SIBLINGS & KNOWS ABOUT THEM) → Q4440

(HALFBROTHERNUM)

Q4432A [IF YES] **How many half brothers do you have?** \_\_\_ \_\_\_ number of half brothers

(HALFSISTERNUM)

Q4432B [IF YES] **How many half sisters do you have?** \_\_\_ \_\_\_ number of half sisters

(ANYSIBLINGSDXWITHCANCER)

Q4440 **Have any of your siblings ever been diagnosed with cancer?** [INCLUDING FULL- AND HALF-SIBLINGS]

- 1 yes [ITERATE Q444A0 - Q444E8]
- 2 no [SKIP QUESTIONS Q444A0 THROUGH Q444E8]
- 3 don't know/refused [SKIP QUESTIONS Q444A0 THROUGH Q444E8]

**SIBLING ROSTER**

[FOR FIRST SIBLING]	[FOR SUBSEQUENT SIBLINGS, ITERATE PER SIB]
<p>Q444_1 (SIBLINGTYPE)                      [IF FIRST OR ONLY SIBLING] <i>In regard to your (insert relative type based on previous question responses).</i>                      [IF YES TO EITHER Q4431 OR Q4432 (R HAS FULL OR HALF SIBLINGS)] <i>Starting with your oldest sibling, is this a full brother/ sister or a half brother/sister?</i>                      1 full brother                      2 full sister                      3 half brother                      4 half sister                      5 don't know/refused</p>	<p>Q444_2(etc) (SIBLINGTYPE)                      [IF MORE SIBLINGS] <i>Continuing with your next oldest sibling, is this a full brother/sister or a half brother/sister?</i>                      1 full brother                      2 full sister                      3 half brother                      4 half sister                      5 don't know/refused</p>
<p>Q444_0.1 (FULLNAME)  <i>What is his/her name?</i></p>	<p>Q444_0.2(etc) (FULLNAME)  <i>What is his/her name?</i></p>
<p>[DON'T KNOW/REFUSED = DK 1ST, DK LAST, DK NAME]</p>	<p>[DON'T KNOW/REFUSED = DK 1ST, DK LAST, DK NAME]</p>
<p>Q444_1.1 (BIRTHWHENTYPE)  <i>When was s/he born?</i> [ANSWER AS EITHER]                      1 birthdate:                          Q444_2.1 (BIRTHMONTH)                              month ___ [DK/REF MONTH = 13]                          Q444DD.1 (BIRTHDAY)                              day ___ [DK/REF DAY = 32]                          Q444YY.1 (BIRTHYEAR)                              year ___ [DK/REF YR = 9999]                      2 age:                          Q444_3 (CURRENTAGE)                              current age:___ yrs                      3 don't know/ refused</p>	<p>Q444_1.2(etc) (BIRTHWHENTYPE)  <i>When was s/he born?</i> [ANSWER AS EITHER]                      1 birthdate:                          Q444_2.2(etc) (BIRTHMONTH)                              month ___ [DK/REF MONTH = 13]                          Q444DD.2(etc) (BIRTHDAY)                              day ___ [DK/REF DAY = 32]                          Q444YY.2(etc) (BIRTHYEAR)                              year ___ [DK/REF YR = 9999]                      2 age:                          Q444_3.2(etc) (CURRENTAGE)                              current age:___ yrs                      3 don't know/ refused</p>
<p>Q444_3A (SAMEMOTHER) [IF HALF-SIBLING]  <i>Did s/he have the same mother as you?</i>                      1 yes                      2 no                      3 don't know/ refused</p>	<p>Q444_3A.2(etc) [IF HALF-SIBLING]  <i>Did s/he have the same mother as you?</i> (SAMEMOTHER)                      1 yes                      2 no                      3 don't know/ refused</p>
<p>Q444_4 <i>Is s/he still living?</i> (STILLLIVE)                      1 yes → Q444A0; IF (Q4440 &gt; 1) [ENDMEMB]                      2 no → Q444_5                      3 don't know/refused → Q444A0;                          IF (Q4440 &gt; 1) [ENDMEMB]</p>	<p>Q444_4.2(etc) <i>Is s/he still living?</i> (STILLLIVE)                      1 yes → Q444A0                      2 no → Q444_5                      3 don't know/refused → Q444A0;                          IF (Q4440 &gt; 1) [ENDMEMB]</p>

<p>Q444_5.1 (<u>DEATHWHENTYPE</u>) [IF DECEASED] <b>When did s/he die?</b> [ANSWER AS EITHER] Q444_6.1 (<u>DEATHYEAR</u>) 1 s/he died in the year ____</p> <p>Q444_7.1 (<u>DEATHAGE</u>) 2 s/he died at the age of ____ years</p> <p>Q444_8.1 (<u>DEATHYEARSAGO</u>) 3 s/he died ____ yrs ago 4 don't know/refused</p>	<p>Q444_5.2(etc) (<u>DEATHWHENTYPE</u>) [IF DECEASED] <b>When did s/he die?</b> [ANSWER AS EITHER] Q444_6.2(etc) (<u>DEATHYEAR</u>) 1 s/he died in the year ____</p> <p>Q444_7.2(etc) (<u>DEATHAGE</u>) 2 s/he died at ____ years</p> <p>Q444_8.2(etc) (<u>DEATHYEARSAGO</u>) 3 s/he died ____ yrs ago 4 don't know/refused</p>
<p><b>In what city and state did s/he die?</b> [DK/REF = BLANK] Q444_9.1 city: _____ (<u>DEATHCITY</u>) Q444_10.1 state: _____ (<u>DEATHSTATE</u>)</p>	<p><b>In what city and state did s/he die?</b> [DK/REF = BLANK] Q444_9.2(etc) city: _____ (<u>DEATHCITY</u>) Q444_10.2(etc) state: _____ (<u>DEATHSTATE</u>)</p>
<p>Q444A0.1 (<u>CADX1</u>) [ONLY IF "YES" TO Q4440] <b>Was s/he ever diagnosed with cancer?</b> 1 yes → Q444A2 [CANCER CHART] 2 no/not that I'm aware of → [ENDMEMB] 3 don't know/refused → [ENDMEMB]</p>	<p>Q444A0.2(etc) (<u>CADX1</u>) [ONLY IF "YES" TO Q4440] <b>Was s/he ever diagnosed with cancer?</b> 1 yes → Q444A2 [CANCER CHART] 2 no/not that I'm aware of → [ENDMEMB] 3 don't know/refused → [ENDMEMB]</p>

SIBLINGS 1 <sup>st</sup> CANCER	2 <sup>nd</sup> CANCER	3 <sup>rd</sup> CANCER	4 <sup>th</sup> CANCER	5 <sup>th</sup> CANCER	CANCER TYPES
Q444A2 ( <u>CADXTYPE1</u> ) [IF YES] <i>What type of cancer was it?</i> [ENTER CODE] ___ IF = 42 → Q444A2OT IF = 34 → Q444A4 ALL OTHERS → Q444A5	( <u>CADXTYPE2</u> ) Q444B2	( <u>CADXTYPE3</u> ) Q444C2	( <u>CADXTYPE4</u> ) Q444D2	( <u>CADXTYPE5</u> ) Q444E2	10 ABDOMINAL 11 APPENDIX 12 BILE or BILIARY DUCT 13 BLADDER 14 BLOOD 15 BONE
Q444A2OT ( <u>CADXTYPEOTH1</u> ) [IF 42-OTHER CANCER WAS REPORTED] <i>What type of cancer was it?</i> Specify _____	( <u>CADXTYPEOTH2</u> ) Q444B2OT	( <u>CADXTYPEOTH3</u> ) Q444C2OT	( <u>CADXTYPEOTH4</u> ) Q444D2OT	( <u>CADXTYPEOTH5</u> ) Q444E2OT	16 BONE MARROW 17 BRAIN 18 BREAST
Q444A2A ( <u>CADXTYPEOTHCOLONORSKIN1</u> ) [IVER: DID R INDICATE CRC OR SKIN AS OTHER CANCER?] 1 CRC, BOWEL, GASTRO/INTESTINAL → Q444A2A1 2 SKIN CANCER → Q444A4 3 PRE-CANCER OTHER THAN COLON → Q444B 4 OTHER TYPE OF CANCER → Q444A5	( <u>CADXTYPEOTHCOLONORSKIN2</u> ) Q444B2A	( <u>CADXTYPEOTHCOLONORSKIN3</u> ) Q444C2A	( <u>CADXTYPEOTHCOLONORSKIN4</u> ) Q444D2A	( <u>CADXTYPEOTHCOLONORSKIN5</u> ) Q444E2A	19 CERVICAL 20 COLON (LARGE INTESTINE) 21 COLORECTAL 22 ENDOMETRIAL 23 ESOPHAGEAL 24 GALL BLADDER 25 GASTROESOPHAGEAL
Q444A2A1 ( <u>CADXTYPEOTHCOLONTYPE1</u> ) <i>What specific type of cancer was it?</i> 1 colon 2 rectal 3 colorectal 4 other, _____ 5 don't know/refused [GO TO → Q444A5]	( <u>CADXTYPEOTHCOLONTYPE2</u> ) Q444B2A1	( <u>CADXTYPEOTHCOLONTYPE3</u> ) Q444C2A1	( <u>CADXTYPEOTHCOLONTYPE4</u> ) Q444D2A1	( <u>CADXTYPEOTHCOLONTYPE5</u> ) Q444E2A1	26 HEPATO-BILIARY 27 INTESTINAL, NOS 28 KIDNEY 29 LEUKEMIA (ACUTE, CHRONIC, OTHER)
Q444A4 ( <u>CADXTYPEOTHSKINTYPE1</u> ) <i>Was it melanoma or some other type of skin cancer?</i> 1 melanoma 2 other skin cancer 3 don't know/refused	( <u>CADXTYPEOTHSKINTYPE2</u> ) Q444B4	( <u>CADXTYPEOTHSKINTYPE3</u> ) Q444C4	( <u>CADXTYPEOTHSKINTYPE4</u> ) Q444D4	( <u>CADXTYPEOTHSKINTYPE5</u> ) Q444E4	30 LIVER 31 LUNG 32 LYMPHOMA, HODGKINS 33 MELANOMA 34 NON-HODGKINS LYMPHOMA (LYMPH, LYMPHATIC)
Q444A5 ( <u>CADXAGE1</u> ) <i>What was his/her age at diagnosis?</i> Age at diagnosis ___ [DON'T KNOW/REF = 99]	( <u>CADXAGE2</u> ) Q444B5	( <u>CADXAGE3</u> ) Q444C5	( <u>CADXAGE4</u> ) Q444D5	( <u>CADXAGE5</u> ) Q444E5	35 OVARIAN 36 PANCREATIC 37 PROSTATE 38 RECTAL 39 RENAL PELVIS
Q444A6 ( <u>CADXWHENTYPE1</u> ) <i>How long ago was it diagnosed?</i> [ANSWER AS EITHER] Q444A7 1 [year of dx] ___ ( <u>CADXYR1-5</u> ) Q444A8 2 [years since dx] ___ ( <u>CADXYRSAGO1-5</u> ) 3 don't know/refused	( <u>CADXWHENTYPE2</u> ) Q444B6	( <u>CADXWHENTYPE3</u> ) Q444C6	( <u>CADXWHENTYPE4</u> ) Q444D6	( <u>CADXWHENTYPE5</u> ) Q444E6	40 SKIN-BASAL OR SQUAMOUS CELL CARCINOMA 41 SMALL INTESTINE (BOWEL) 42 SPINAL, NOS 43 STOMACH (GASTRIC)
Q444B ( <u>CADX2</u> ) <i>Has/had this [sibling] been diagnosed with a 2<sup>nd</sup> cancer?</i> 1 yes → Q444B2 (Next Cancer) 2 no → Q445 9 don't know/refused → Q445	( <u>CADX3</u> ) Q444C ... 3 <sup>rd</sup>	( <u>CADX4</u> ) Q444D ... 4 <sup>th</sup>	( <u>CADX5</u> ) Q444E ... 5 <sup>th</sup>		44 THROAT 45 THYROID 46 URETER 47 UTERINE 48 OTHER(SPECIFY) 99 DON'T KNOW/REFUSED

(HAVEBIOCHILDREN)

[IF Q3\_24 > 0 (R HAS ONE OR MORE LIVE BIRTHS) , AUTO ANSWER Q445 = 1 (YES)]

Q445

***Do you have biological children, whether living or deceased? They may be living or deceased.***

PROMPT: WE ARE INTERESTED IN CHILDREN WHO ARE RELATED TO YOU BY BLOOD, NOT ADOPTED CHILDREN, STEP-CHILDREN OR FOSTER CHILDREN.

- 1 yes → Q4451
- 2 no → Q46
- 3 don't know/refused → Q46

(SAMEPARENTS)

Q4451

[IF YES] ***Do these children all have the same two parents (you and your spouse/partner)?***

- 1 yes → Q44511
- 2 no → Q44512

[IF YES, ALL CHILDREN HAVE THE SAME PARENTS]

Q44511

***How many sons do you have? \_\_\_\_*** (SONSNUMONLYSPOUSE)

Q44511X

***How many daughters do you have? \_\_\_\_*** (DAUGHTERSNUMONLYSPOUSE)

(ANYCHILDDXWITHCANCERONLYSPOUSE)

Q44510

***Have any of your children ever been diagnosed with cancer?***

- 1 yes
- 2 no/not that I'm aware of [SKIP Q451A0-Q451E8]
- 3 don't know/refused [SKIP Q451A0-Q451E8]

CHILDREN ROSTER FOR SINGLE PARTNERS

[FOR FIRST CHILD]	[ITERATE FOR EACH SUBSEQUENT CHILD]
<p>Q4451A.1 (CHILDTYPE)  <b>Starting with your oldest child, is this a son or a daughter?</b>                      1 son                      2 daughter                      3 don't know/refused</p>	<p>Q4451A.2 (etc) (CHILDTYPE)  <b>Continuing with the next oldest child, is this a son or a daughter?</b>                      1 son                      2 daughter                      3 don't know/refused</p>
<p>Q4451_0.1 (FULLNAME)  <b>What is his/her name?</b>                      _____                      [DON'T KNOW/REFUSED = DK 1ST, DK LAST, DK NAME]</p>	<p>Q4451_0.2 (etc) (FULLNAME)  <b>What is his/her name?</b>                      _____                      [DON'T KNOW/REFUSED = DK 1ST, DK LAST, DK NAME]</p>
<p>Q4451_1.1 (BIRTHWHENTYPE)  <b>When was s/he born?</b> [ANSWER AS EITHER]                      1 birthdate:                          Q4451_2.1 (BIRTHMONTH)                              month _____ [DK/REF MONTH = 13]                          Q4451DD.1 (BIRTHDAY)                              day _____ [DK/REF DAY = 32]                          Q4451YY.1 (BIRTHYEAR)                              year _____ [DK/REF YR = 9999]                      2 age:                          Q4451_3 (CURRENTAGE)                              current age: ___ yrs                      3 don't know/refused</p>	<p>Q4451_1.2 (etc) (BIRTHWHENTYPE)  <b>When was s/he born?</b> [ANSWER AS EITHER]                      1 birthdate:                          Q4451_2.2 (etc) (BIRTHMONTH)                              month _____ [DK/REF MONTH = 13]                          Q4451DD.2 (etc) (BIRTHDAY)                              day _____ [DK/REF DAY = 32]                          Q4451YY.2 (etc) (BIRTHYEAR)                              year _____ [DK/REF YR = 9999]                      2 age:                          Q4451_3.2 (etc) (CURRENTAGE)                              current age: ___ yrs                      3 don't know/refused</p>
<p>Q4451_4.1 (STILLLIVE)  <b>Is s/he still living?</b>                      1 yes → Q451A0; IF (Q44510 &gt;1) → [ENDMEMB]                      2 no → Q4451_5                      3 don't know/ refused → Q451A0;                          IF (Q44510 &gt; 1) [NO CHILDREN W/ CA                          DX] → [ENDMEMB]</p>	<p>Q4451_4.2 (etc) (STILLLIVE)  <b>Is s/he still living?</b>                      1 yes → Q451A0; IF (Q44510 &gt;1) → [ENDMEMB]                      2 no → Q4451_5                      3 don't know/ refused → Q451A0;                          IF (Q44510 &gt; 1) [NO CHILDREN W/ CA                          DX] → [ENDMEMB]</p>
<p>Q4451_5.1 (DEATHWHENTYPE)  <b>[IF DECEASED]</b>  <b>When did s/he die?</b> [ANSWER AS EITHER]                      Q4451_6.1 (DEATHYEAR)                          1 s/he died in the year _____                      Q4451_7.1 (DEATHAGE)                          2 s/he died at the age of ___ years                      Q4451_8.1 (DEATHYEARSAGO)                          3 s/he died ___ yrs ago                          4 don't know/refused</p>	<p>Q4451_5.2 (etc) (DEATHWHENTYPE)  <b>[IF DECEASED]</b>  <b>When did s/he die?</b> [ANSWER AS EITHER]                      Q4451_6.2 (etc) (DEATHYEAR)                          1 s/he died in the year _____                      Q4451_7.2 (etc) (DEATHAGE)                          2 s/he died at ___ years                      Q4451_8.2 (etc) (DEATHYEARSAGO)                          3 s/he died ___ yrs ago                          4 don't know/refused</p>
<p><b>In what city and state did s/he die?</b> [DK/REF = BLANK]                      Q4451_9.1 city: _____ (DEATHCITY)                      Q4451_10.1 state: _____ (DEATHSTATE)</p>	<p><b>In what city and state did s/he die?</b> [DK/REF = BLANK]                      Q4451_9.2 (etc) city: _____ (DEATHCITY)                      Q4451_10.2 (etc) state: _____ (DEATHSTATE)</p>
<p>Q451A0.1 (CADX1)  <b>[ONLY IF "YES" TO Q44510]</b>  <b>Was s/he ever diagnosed with cancer?</b>                      1 yes → Q451A2                      2 no/not that I'm aware of → [ENDMEMB]                      3 don't know/refused → [ENDMEMB]</p>	<p>Q451A0.2 (etc) (CADX1)  <b>[ONLY IF "YES" TO Q44510]</b>  <b>Was s/he ever diagnosed with cancer?</b>                      1 yes → Q451A2                      2 no/not that I'm aware of → [ENDMEMB]                      3 don't know/refused → [ENDMEMB]</p>

CHILDREN 1 <sup>st</sup> CANCER	2 <sup>nd</sup> CANCER	3 <sup>rd</sup> CANCER	4 <sup>th</sup> CANCER	5 <sup>th</sup> CANCER	CANCER TYPES
Q451A2 ( <u>CADXTYPE1</u> ) [IF YES] <i>What type of cancer was it?</i> [ENTER CODE] ___ IF = 42 → Q444A2OT IF = 34 → Q444A4 ALL OTHERS → Q444A5	( <u>CADXTYPE2</u> ) Q451B2	( <u>CADXTYPE3</u> ) Q451C2	( <u>CADXTYPE4</u> ) Q451D2	( <u>CADXTYPE5</u> ) Q451E2	10 ABDOMINAL 11 APPENDIX 12 BILE or BILIARY DUCT 13 BLADDER 14 BLOOD 15 BONE
Q451A2OT ( <u>CADXTYPEOTH1</u> ) [IF 42-OTHER CANCER WAS REPORTED] <i>What type of cancer was it?</i> Specify _____	( <u>CADXTYPEOTH2</u> ) Q451B2OT	( <u>CADXTYPEOTH3</u> ) Q451C2OT	( <u>CADXTYPEOTH4</u> ) Q451D2OT	( <u>CADXTYPEOTH4</u> ) Q451E2OT	16 BONE MARROW 17 BRAIN 18 BREAST
Q451A2A ( <u>CADXTYPEOTHCOLONORSKIN1</u> ) [LIVER: DID R INDICATE COLON OR SKIN AS OTHER CANCER?] 1 CRC, BOWEL, GASTRO/INTESTINAL → Q451A2A1 2 SKIN CANCER → Q451A4 3 PRE-CANCER OTHER THAN COLON → Q451B 4 OTHER TYPE OF CANCER → Q451A5	( <u>CADXTYPEOTHCOLONORSKIN2</u> ) Q451B2A	( <u>CADXTYPEOTHCOLONORSKIN3</u> ) Q451C2A	( <u>CADXTYPEOTHCOLONORSKIN4</u> ) Q451D2A	( <u>CADXTYPEOTHCOLONORSKIN5</u> ) Q451E2A	19 CERVICAL 20 COLON (LARGE INTESTINE) 21 COLORECTAL 22 ENDOMETRIAL 23 ESOPHAGEAL 24 GALL BLADDER 25 GASTROESOPHAGEAL
Q451A2A1 ( <u>CADXTYPEOTHCOLONTYPE1</u> ) <i>What specific type of cancer was it?</i> 1 colon 2 rectal 3 colorectal 4 other, _____ 5 don't know/refused [GO TO → Q451A5]	( <u>CADXTYPEOTHCOLONTYPE2</u> ) Q451B2A1	( <u>CADXTYPEOTHCOLONTYPE3</u> ) Q451C2A1	( <u>CADXTYPEOTHCOLONTYPE4</u> ) Q451D2A1	( <u>CADXTYPEOTHCOLONTYPE5</u> ) Q451E2A1	26 HEPATO-BILIARY 27 INTESTINAL, NOS 28 KIDNEY 29 LEUKEMIA (ACUTE, CHRONIC, OTHER) 30 LIVER 31 LUNG 32 LYMPHOMA, HODGKINS
Q451A4 ( <u>CADXTYPEOTHSKINTYPE1</u> ) <i>Was it melanoma or some other type of skin cancer?</i> 1 melanoma 2 other skin cancer 3 don't know/refused	( <u>CADXTYPEOTHSKINTYPE2</u> ) Q451B4	( <u>CADXTYPEOTHSKINTYPE3</u> ) Q451C4	( <u>CADXTYPEOTHSKINTYPE4</u> ) Q451D4	( <u>CADXTYPEOTHSKINTYPE5</u> ) Q451E4	33 MELANOMA 34 NON-HODGKINS LYMPHOMA (LYMPH, LYMPHATIC) 35 OVARIAN
( <u>CADXAGE1</u> ) Q451A5 <i>What was her/his age at diagnosis?</i> Age at diagnosis ___ [DON'T KNOW/REF = 999]	( <u>CADXAGE2</u> ) Q451B5	( <u>CADXAGE3</u> ) Q451C5	( <u>CADXAGE4</u> ) Q451D5	( <u>CADXAGE5</u> ) Q451E5	36 PANCREATIC 37 PROSTATE 38 RECTAL 39 RENAL PELVIS
Q451A6 ( <u>CADXWHENTYPE1</u> ) <i>How long ago was it diagnosed?</i> [ANSWER AS EITHER] Q451A7 1 [year of dx] ___ ( <u>CADXYR1-5</u> ) Q451A8 2 [years since dx] ___ ( <u>CADXYRSAGO1-5</u> ) 3 don't know/refused	( <u>CADXWHENTYPE2</u> ) Q451B6	( <u>CADXWHENTYPE3</u> ) Q451C6	( <u>CADXWHENTYPE4</u> ) Q451D6	( <u>CADXWHENTYPE5</u> ) Q451E6	40 SKIN-BASAL OR SQUAMOUS CELL CARCINOMA 41 SMALL INTESTINE (BOWEL) 42 SPINAL, NOS
Q451B ( <u>CADX2</u> ) <i>Has/had this child been diagnosed with a 2<sup>nd</sup> cancer?</i> 1 yes → Q451B2 (Next Cancer) 2 no → Q44512 9 don't know/refused → Q44512	( <u>CADX3</u> ) Q451C ... 3 <sup>rd</sup>	( <u>CADX4</u> ) Q451D ... 4 <sup>th</sup>	( <u>CADX5</u> ) Q451E ... 5 <sup>th</sup>		43 STOMACH (GASTRIC) 44 THROAT 45 THYROID 46 URETER 47 UTERINE 48 OTHER(SPECIFY) 99 DON'T KNOW/REFUSED



PARTNERS ROSTER

[FOR 1st PARTNER W/ WHOM R HAD CHILDREN]	[FOR SUBSEQUENT PARTNERS]
<p>[IF NO TO Q4451 (CHILDREN HAVE DIFFERENT PARENTS)] <i>Starting with the first person with which you had children, how many sons and daughters did you have with this person?</i></p> <p>Q44512 ___ number of sons (<u>SONSNUM1STSPOUSE</u>)</p> <p>Q44512X ___ number of daughters (<u>DAUGHTERSNUM1STSPOUSE</u>)</p> <p style="text-align: right;"><i>and/or</i></p>	<p>Q44513 [FOR 2nd PARTNER WITH WHOM R HAD CHILDREN] <i>Continuing with the next person with whom you had children, how many sons and daughters did you have with this person?</i></p> <p>Q44514 [FOR 3rd PARTNER WITH WHOM R HAD CHILDREN] <i>Continuing with the third person with whom you had children, how many sons and daughters did you have with this person?</i></p> <p>Q44515 [FOR 4th PARTNER WITH WHOM R HAD CHILDREN] <i>Continuing with the fourth person with whom you had children, how many sons and daughters did you have with this person?</i></p> <p>Q44513 ___ number of sons (<u>SONSNUM2ND-4THSPOUSE</u>)</p> <p>Q44513X ___ number of daughters (<u>DAUGHTERSNUM2ND-4THSPOUSE</u>)</p>
<p>Q44520 (<u>ANYCHILDDXWITHCANCER1STSPOUSE</u>) <i>Have any of these children ever been diagnosed with cancer?</i></p> <p>1 yes → [ITERATE Q452A0 - Q452E8] 2 no/not that I'm aware of → [SKIP Q452A0-Q452E8] 3 don't know → [SKIP Q452A0-Q452E8]</p>	<p>Q44530 (<u>ANYCHILDDXWITHCANCER2ND-4THSPOUSE</u>) <i>Have any of these children ever been diagnosed with cancer?</i></p> <p>1 yes → Q4453A 2 no/not that I'm aware of [SKIP Q453A0-Q453E8] 3 don't know/refused [SKIP Q453A0-Q453E8]</p>



(CHILMULTPRTNRS) 1 <sup>st</sup> CANCER	2 <sup>nd</sup> CANCER	3 <sup>rd</sup> CANCER	4 <sup>th</sup> CANCER	5 <sup>th</sup> CANCER	CANCER TYPES
Q452A2 (CADXTYPE1) [IF YES] <i>What type of cancer was it?</i> [ENTER CODE] ____ IF = 42 → Q452A2OT IF = 34 → Q452A4 ALL OTHERS → Q452A5	(CADXTYPE2) Q452B2	(CADXTYPE3) Q452C2	(CADXTYPE4) Q452D2	(CADXTYPE5) Q452E2	10 ABDOMINAL 11 APPENDIX 12 BILE or BILIARY DUCT 13 BLADDER 14 BLOOD 15 BONE
Q452A2OT (CADXTYPEOTH1) [IF 42-OTHER CANCER WAS REPORTED] <i>What type of cancer was it?</i> Specify _____	(CADXTYPEOTH2) Q452B2OT	(CADXTYPEOTH3) Q452C2OT	(CADXTYPEOTH4) Q452D2OT	(CADXTYPEOTH5) Q452E2OT	16 BONE MARROW 17 BRAIN 18 BREAST
Q452A2A (CADXTYPEOTHCOLONORSKIN1) [IVER: DID R INDICATE CRC OR SKIN AS OTHER CANCER?] 1 CRC, BOWEL, GASTRO/INTESTINAL → Q452A2A1 2 SKIN CANCER → Q452A4 3 PRE-CANCER OTHER THAN COLON → Q452B 4 OTHER TYPE OF CANCER → Q452A5	(CADXTYPEOTHCOLONORSKIN2) Q452B2A	(CADXTYPEOTHCOLONORSKIN3) Q452C2A	(CADXTYPEOTHCOLONORSKIN4) Q452D2A	(CADXTYPEOTHCOLONORSKIN5) Q452E2A	19 CERVICAL 20 COLON (LARGE INTESTINE) 21 COLORECTAL 22 ENDOMETRIAL 23 ESOPHAGEAL 24 GALL BLADDER 25 GASTROESOPHAGEAL
Q452A2A1 (CADXTYPEOTHCOLONTYPE1) <i>What specific type of cancer was it?</i> 1 colon 2 rectal 3 colorectal 4 other, _____ 5 don't know/refused [GO TO → Q452A5]	(CADXTYPEOTHCOLONTYPE2) Q452B2A1	(CADXTYPEOTHCOLONTYPE3) Q452C2A1	(CADXTYPEOTHCOLONTYPE4) Q452D2A1	(CADXTYPEOTHCOLONTYPE5) Q452E2A1	26 HEPATO-BILIARY 27 INTESTINAL, NOS 28 KIDNEY 29 LEUKEMIA (ACUTE, CHRONIC, OTHER)
Q452A4 (CADXTYPEOTHSKINTYPE1) <i>Was it melanoma or some other type of skin cancer?</i> 1 melanoma 2 other skin cancer 3 don't know/refused	(CADXTYPEOTHSKINTYPE2) Q452B4	(CADXTYPEOTHSKINTYPE3) Q452C4	(CADXTYPEOTHSKINTYPE4) Q452D4	(CADXTYPEOTHSKINTYPE5) Q452E4	30 LIVER 31 LUNG 32 LYMPHOMA, HODGKINS 33 MELANOMA 34 NON-HODGKINS LYMPHOMA (LYMPH, LYMPHATIC)
Q452A5 (CADXAGE1) <i>What was her/his age at diagnosis?</i> Age at diagnosis ____ [DON'T KNOW/REF = 999]	(CADXAGE2) Q452B5	(CADXAGE3) Q452C5	(CADXAGE4) Q452D5	(CADXAGE5) Q452E5	35 OVARIAN 36 PANCREATIC 37 PROSTATE 38 RECTAL
Q452A6 (CADXWHENTYPE1) <i>How long ago was it diagnosed?</i> [ANSWER AS EITHER] Q452A7 1 [year of] ____ (CADXYR1-5) Q452A8 2 [years ago] ____ (CADXYRSAGO1-5) 3 don't know/refused	(CADXWHENTYPE2) Q452B6	(CADXWHENTYPE3) Q452C6	(CADXWHENTYPE4) Q452D6	(CADXWHENTYPE5) Q452E6	39 RENAL PELVIS 40 SKIN-BASAL OR SQUAMOUS CELL CARCINOMA
Q452B (CADX2) <i>Has/had this [child] been diagnosed with a 2<sup>nd</sup> cancer?</i> 1 yes → Q44513 (Next Cancer) 2 no → Q452B2 9 don't know/refused → Q452B2	(CADX3) Q5sC ... 3 <sup>rd</sup>	(CADX4) Q52D ... 4 <sup>th</sup>	(CADX5) Q52E ... 5 <sup>th</sup>		41 SMALL INTESTINE (BOWEL) 42 SPINAL, NOS 43 STOMACH (GASTRIC) 44 THROAT 45 THYROID 46 URETER 47 UTERINE 48 OTHER(SPECIFY) 99 DON'T KNOW/REFUSED

CHILDREN ROSTER FOR MULTIPLE PARTNERS

[FOR SECOND PARTNER]	[ITERATE FOR EACH SUBSEQUENT CHILD]
Q4453A.1 (CHILDTYPE) <i>Starting with your oldest child, is this a son or a daughter?</i> 1 son 2 daughter 3 don't know/refused	Q4453B.2 (etc) (CHILDTYPE) [FOR SUBSEQUENT CHILDREN] <i>Continuing with the next oldest child, is this a son or a daughter?</i> 1 son 2 daughter 3 don't know/refused
Q4453_0.1 (FULLNAME) <i>What is his/her name?</i> _____ [DON'T KNOW/REFUSED = DK 1ST, DK LAST, DK NAME]	Q4453_0.2 (etc) (FULLNAME) <i>What is his/her name?</i> _____ [DON'T KNOW/REFUSED = DK 1ST, DK LAST, DK NAME]
Q4453_1.1 (BIRTHWHENTYPE) <i>When was s/he born?</i> [ANSWER AS EITHER] 1 birthdate: Q4453_2.1 (BIRTHMONTH) month _____ [DK/REF MONTH = 13] Q4453DD.1 (BIRTHDAY) day _____ [DK/REF DAY = 32] Q4453YY.1 (BIRTHYEAR) year _____ [DK/REF YR = 9999] 2 age: Q4453_3.1 (CURRENTAGE) current age: ___ yrs 3 don't know/refused	Q4453_1.2 (etc) (BIRTHWHENTYPE) <i>When was s/he born?</i> [ANSWER AS EITHER] 1 birthdate: Q4453_2.2 (etc) (BIRTHMONTH) month _____ [DK/REF MONTH = 13] Q4453DD.2 (etc) (BIRTHDAY) day _____ [DK/REF DAY = 32] Q4453YY.2 (etc) (BIRTHYEAR) year _____ [DK/REF YR = 9999] 2 age: Q4453_3.2 (etc) (CURRENTAGE) current age: ___ yrs 3 don't know/refused
Q4453_4.1 (STILLLIVE) <i>Is s/he still living?</i> 1 yes → Q453A0; IF (Q44530 > 1) → [ENDMEMB] 2 no → Q4452_5 3 don't know/ refused → Q453A0; IF (Q44530 > 1) → [ENDMEMB]	Q4453_4.2 (etc) (STILLLIVE) <i>Is s/he still living?</i> 1 yes → Q453A0; IF (Q44530 > 1) → [ENDMEMB] 2 no → Q4452_5 3 don't know/ refused → Q453A0; IF (Q44530 > 1) → [ENDMEMB]
Q4453_5.1 (DEATHWHENTYPE) [IF DECEASED] <i>When did s/he die?</i> [ANSWER AS EITHER] Q4453_6.1 (DEATHYEAR) 1 s/he died in the year _____ Q4453_7.1 (DEATHAGE) 2 s/he died at the age of ___ years Q4453_8.1 (DEATHYEARSAGO) 3 s/he died ___ yrs ago 4 don't know/refused	Q4453_5.2 (etc) (DEATHWHENTYPE) [IF DECEASED] <i>When did s/he die?</i> [ANSWER AS EITHER] Q4453_6.2 (etc) (DEATHYEAR) 1 s/he died in the year _____ Q4453_7.2 (etc) (DEATHAGE) 2 s/he died at ___ years Q4453_8.2 (etc) (DEATHYEARSAGO) 3 s/he died ___ yrs ago 4 don't know/refused
<i>In what city and state did s/he die?</i> [DK/REF = BLANK] Q4453_9.1 city: _____ (DEATHCITY) Q4453_10.1 state: _____ (DEATHSTATE)	<i>In what city and state did s/he die?</i> DK/REF = BLANK] Q4453_9.2 (etc) city: _____ (DEATHCITY) Q4453_10.2 (etc) state: _____ (DEATHSTATE)
Q453A0.1 (CADX1) [ONLY IF "YES" TO Q44520] <i>Was s/he ever diagnosed with cancer?</i> 1 yes 2 no/not that I'm aware of → [ENDMEMB] 3 don't know/refused → [ENDMEMB]	Q453A0.2 (etc) (CADX1) [ONLY IF "YES" TO Q44520] <i>Was s/he ever diagnosed with cancer?</i> 1 yes 2 no/not that I'm aware of → [ENDMEMB] 3 don't know/refused → [ENDMEMB]

1 <sup>st</sup> CANCER	2 <sup>nd</sup> CANCER	3 <sup>rd</sup> CANCER	4 <sup>th</sup> CANCER	5 <sup>th</sup> CANCER	CANCER TYPES
Q453A2 ( <u>CADXTYPE1</u> ) [IF YES] <i>What type of cancer was it?</i> [ENTER CODE] ___ IF = 42 → Q452A2OT IF = 34 → Q452A4 ALL OTHERS → Q452A5	( <u>CADXTYPE2</u> ) Q453B2	( <u>CADXTYPE3</u> ) Q453C2	( <u>CADXTYPE4</u> ) Q453D2	( <u>CADXTYPE5</u> ) Q453E2	10 ABDOMINAL 11 APPENDIX 12 BILE or BILIARY DUCT 13 BLADDER 14 BLOOD 15 BONE
Q453A2OT ( <u>CADXTYPEOTH1</u> ) [IF 42-OTHER CANCER WAS REPORTED] <i>What type of cancer was it?</i> Specify _____	( <u>CADXTYPEOTH2</u> ) Q453B2OT	( <u>CADXTYPEOTH3</u> ) Q453C2OT	( <u>CADXTYPEOTH4</u> ) Q453D2OT	( <u>CADXTYPEOTH4</u> ) Q453E2OT	16 BONE MARROW 17 BRAIN 18 BREAST
Q453A2A ( <u>CADXTYPEOTHCOLONORSKIN1</u> ) [IVER: DID R INDICATE CRC OR SKIN AS OTHER CANCER?] 1 CRC, BOWEL, GASTRO/INTESTINAL → Q453A2A1 2 SKIN CANCER → Q453A4 3 PRE-CANCER OTHER THAN COLON → Q453B 4 OTHER TYPE OF CANCER → Q453A5	( <u>CADXTYPEOTHCOLONORSKIN2</u> ) Q453B2A	( <u>CADXTYPEOTHCOLONORSKIN3</u> ) Q453C2A	( <u>CADXTYPEOTHCOLONORSKIN4</u> ) Q453D2A	( <u>CADXTYPEOTHCOLONORSKIN5</u> ) Q453E2A	19 CERVICAL 20 COLON (LARGE INTESTINE) 21 COLORECTAL 22 ENDOMETRIAL 23 ESOPHAGEAL 24 GALL BLADDER 25 GASTROESOPHAGEAL
Q453A2A1 ( <u>CADXTYPEOTHCOLONTYPE1</u> ) <i>What specific type of cancer was it?</i> 1 colon 2 rectal 3 colorectal 4 other, _____ 5 don't know/refused [GO TO → Q453A5]	( <u>CADXTYPEOTHCOLONTYPE2</u> ) Q453B2A1	( <u>CADXTYPEOTHCOLONTYPE3</u> ) Q453C2A1	( <u>CADXTYPEOTHCOLONTYPE4</u> ) Q453D2A1	( <u>CADXTYPEOTHCOLONTYPE5</u> ) Q453E2A1	26 HEPATO-BILIARY 27 INTESTINAL, NOS 28 KIDNEY 29 LEUKEMIA (ACUTE, CHRONIC, OTHER) 30 LIVER 31 LUNG 32 LYMPHOMA, HODGKINS
Q453A4 ( <u>CADXTYPEOTHSKINTYPE1</u> ) <i>Was it melanoma or some other type of skin cancer?</i> 1 melanoma 2 other skin cancer 3 don't know/refused [CONTINUE WITH Q453A5]	( <u>CADXTYPEOTHSKINTYPE2</u> ) Q453B4	( <u>CADXTYPEOTHSKINTYPE3</u> ) Q453C4	( <u>CADXTYPEOTHSKINTYPE4</u> ) Q453D4	( <u>CADXTYPEOTHSKINTYPE5</u> ) Q453E4	33 MELANOMA 34 NON-HODGKINS LYMPHOMA (LYMPH, LYMPHATIC) 35 OVARIAN 36 PANCREATIC 37 PROSTATE 38 RECTAL
Q431A5 ( <u>CADXAGE1</u> ) <i>What was her/his age at diagnosis?</i> Age at diagnosis ___ [DON'T KNOW/REF = 99]	( <u>CADXAGE2</u> ) Q431B5	( <u>CADXAGE3</u> ) Q431C5	( <u>CADXAGE4</u> ) Q431D5	( <u>CADXAGE5</u> ) Q431E5	39 RENAL PELVIS 40 SKIN-BASAL OR SQUAMOUS CELL CARCINOMA
Q431A6 ( <u>CADXWHENTYPE1</u> ) <i>How long ago was it diagnosed?</i> [ANSWER AS EITHER] Q431A7 1 [year of dx] ___ (CADXYR1-5) or Q431A8 2 [years since dx] ___ (CADXYRSAGO1-5) or 3 don't know/refused	( <u>CADXWHENTYPE2</u> ) Q453B6F	( <u>CADXWHENTYPE3</u> ) Q453C6F	( <u>CADXWHENTYPE4</u> ) Q453D6F	( <u>CADXWHENTYPE5</u> ) Q453E6F	41 SMALL INTESTINE (BOWEL) 42 SPINAL, NOS 43 STOMACH (GASTRIC) 44 THROAT
Q453B ( <u>CADX2</u> ) <i>Has/had this [child] been diagnosed with a 2<sup>nd</sup> cancer?</i> 1 yes → Q453B2 (NEXT CANCER) 2 no → Q44514 9 don't know/refused → Q44514	( <u>CADX3</u> ) Q453C ... 3 <sup>rd</sup>	( <u>CADX4</u> ) Q453D ... 4 <sup>th</sup>	( <u>CADX5</u> ) Q453E ... 5 <sup>th</sup>		45 THYROID 46 URETER 47 UTERINE 48 OTHER(SPECIFY) 99 DON'T KNOW/REFUSED

(ANYCHILDRENWITH3RDSPOUSE)

Q44514 [FOLLOWING SEQUENCE FOR CHILDREN WITH 2nd PARTNER] *Was there a third person with whom you had children?*

- 1 yes → Q44514X [REPEAT XXXX ROSTERS]
- 2 no → Q46
- 3 don't know/refused → Q46

(ANYCHILDRENWITH4THSPOUSE)

Q44515 [FOLLOWING SEQUENCE FOR CHILDREN WITH 3rd PARTNER] *Was there a fourth person with whom you had children?*

- 1 yes → Q44515X [REPEAT XXXX ROSTERS]
- 2 no → Q46
- 3 don't know/refused → Q46

[OTHER RELATIVES WITH CANCER]	[OTHER RELATIVES WITH CANCER]
Q46.1 ( <u>ANYRELDXWITHCAN2</u> ) <i>Have any of your other relatives ever been diagnosed with cancer?</i>	Q46.2 (etc) ( <u>ANYRELDXWITHCAN2</u> ) <i>Have any of your other relatives ever been diagnosed with cancer?</i>
<ul style="list-style-type: none"> <li>1 yes → Q46A.1</li> <li>2 no/not that I'm aware of → Q5_</li> <li>3 don't know/refused → Q5_</li> </ul>	<ul style="list-style-type: none"> <li>1 yes → Q46A.2 (NEXT REL)</li> <li>2 no/not that I'm aware of → Q5_</li> <li>3 don't know/refused → Q5_</li> </ul>
Q46A.1 ( <u>FULLNAME</u> ) [IF YES] <i>Who was the relative affected?</i>	Q46A.2 (etc) ( <u>FULLNAME</u> ) [IF YES] <i>Who was the relative affected?</i>
PLEASE SPECIFY RELATION (UNCLE, FATHER, NIECE ETC.), NAME OF RELATIVE (JOE DOE, MARY DOE), & WHICH SIDE OF FAMILY (PATERNAL/MATERNAL, MOTHER'S/FATHER'S). EX: MATERNAL GREAT AUNT MARY MOE OR MATERNAL GRANDMOTHER'S SISTER MARY MOE OR PATERNAL UNCLE JOE DOE.	PLEASE SPECIFY RELATION (UNCLE, FATHER, NIECE ETC.), NAME OF RELATIVE (JOE DOE, MARY DOE), & WHICH SIDE OF FAMILY (PATERNAL/MATERNAL, MOTHER'S/FATHER'S). EX: MATERNAL GREAT AUNT MARY MOE OR MATERNAL GRANDMOTHER'S SISTER MARY MOE OR PATERNAL UNCLE JOE DOE.
[GO TO CANCER ROSTER -Q46A2- (NEXT PAGE)]	[GO TO CANCER ROSTER -Q46A2- (NEXT PAGE)]
[CONTINUING FROM CANCER ROSTER...]	[CONTINUING FROM CANCER ROSTER...]
Q441C.1 ( <u>OTHREL1STILLLIVE</u> ) <i>Is s/he still living?</i>	Q441C.2 (etc) ( <u>OTHREL1STILLLIVE</u> ) <i>Is s/he still living?</i>
<ul style="list-style-type: none"> <li>1 yes → Q441J</li> <li>2 no → Q441D</li> <li>3 don't know/refused → Q441J</li> </ul>	<ul style="list-style-type: none"> <li>1 yes → Q441J</li> <li>2 no → Q441D</li> <li>3 don't know/refused → Q441J</li> </ul>
( <u>OTHREL1DEATHWHENTYPE</u> )	( <u>OTHREL1DEATHWHENTYPE</u> )
Q441D.1 [IF DECEASED] <i>When did s/he die?</i> [ANSWER AS EITHER]	Q441D.2 (etc) [IF DECEASED] <i>When did s/he die?</i> [ANSWER AS EITHER]
Q441E.1 ( <u>OTHREL1DEATHYEAR</u> ) 1 s/he died in the year _ _ _ _	Q441E.2 (etc) ( <u>OTHREL1DEATHYEAR</u> ) 1 s/he died in the year _ _ _ _
Q441F.1 ( <u>OTHREL1DEATHAGE</u> ) 2 s/he died at the age of _ _ _ years	Q441F.2 (etc) ( <u>OTHREL1DEATHAGE</u> ) 2 s/he died at the age of _ _ _ years
Q441G.1 ( <u>OTHREL1DEATHYEARSAGO</u> ) 3 s/he died _ _ years ago	Q441G.2 (etc) ( <u>OTHREL1DEATHYEARSAGO</u> ) 3 s/he died _ _ years ago
4 don't know/refused	4 don't know/refused
<i>In what city and state did s/he die?</i> [DK/REF = BLANK]	<i>In what city and state did s/he die?</i> [DK/REF = BLANK]
Q441H.1 city: _____ ( <u>OTHREL1DEATHCITY</u> )	Q441H.2 (etc) city: _____ ( <u>OTHREL1DEATHCITY</u> )
Q441I.1 state: _____ ( <u>OTHREL1DEATHSTATE</u> )	Q441I.2 (etc) state: _____ ( <u>OTHREL1DEATHSTATE</u> )

(OTHERRELATIVES) 1 <sup>st</sup> CANCER	2 <sup>nd</sup> CANCER	3 <sup>rd</sup> CANCER	4 <sup>th</sup> CANCER	5 <sup>th</sup> CANCER	CANCER TYPES
Q46A2 ( <u>CADXTYPE1</u> ) [IF YES] <i>What type of cancer was it?</i> [ENTER CODE] ___ IF = 42 → Q46A2OT IF = 34 → Q46A4 ALL OTHERS → Q46A5	( <u>CADXTYPE2</u> ) Q46B2	( <u>CADXTYPE3</u> ) Q46C2	( <u>CADXTYPE4</u> ) Q46D2	( <u>CADXTYPE5</u> ) Q46E2	10 ABDOMINAL 11 APPENDIX 12 BILE or BILIARY DUCT 13 BLADDER 14 BLOOD 15 BONE
Q462A2OT ( <u>CADXTYPEOTH1</u> ) [IF 42-OTHER CANCER WAS REPORTED] <i>What type of cancer was it?</i> Specify _____	( <u>CADXTYPEOTH2</u> ) Q462B2OT	( <u>CADXTYPEOTH3</u> ) Q462C2OT	( <u>CADXTYPEOTH4</u> ) Q462D2OT	( <u>CADXTYPEOTH5</u> ) Q462E2OT	16 BONE MARROW 17 BRAIN 18 BREAST 19 CERVICAL
Q462A2A ( <u>CADXTYPEOTHCOLONORSKIN1</u> ) [IVER: DID R INDICATE CRC OR SKIN AS OTHER CANCER?] 1 CRC, BOWEL, GASTRO/INTESTINAL → Q462A2A1 2 SKIN CANCER → Q62A4 3 PRE-CANCER OTHER THAN COLON → Q453B 4 OTHER TYPE OF CANCER → Q453A5	( <u>CADXTYPEOTHCOLONORSKIN2</u> ) Q462B2A	( <u>CADXTYPEOTHCOLONORSKIN3</u> ) Q462C2A	( <u>CADXTYPEOTHCOLONORSKIN4</u> ) Q462D2A	( <u>CADXTYPEOTHCOLONORSKIN5</u> ) Q462E2A	20 COLON (LARGE INTESTINE) 21 COLORECTAL 22 ENDOMETRIAL 23 ESOPHAGEAL 24 GALL BLADDER 25 GASTROESOPHAGEAL
Q462A2A1 ( <u>CADXTYPEOTHCOLONTYPE1</u> ) <i>What specific type of cancer was it?</i> 1 colon 2 rectal 3 colorectal 4 other, _____ 5 don't know/refused [GO TO → Q453A5]	( <u>CADXTYPEOTHCOLONTYPE2</u> ) Q462B2A1	( <u>CADXTYPEOTHCOLONTYPE3</u> ) Q462C2A1	( <u>CADXTYPEOTHCOLONTYPE4</u> ) Q462D2A1	( <u>CADXTYPEOTHCOLONTYPE5</u> ) Q462E2A1	26 HEPATO-BILIARY 27 INTESTINAL, NOS 28 KIDNEY 29 LEUKEMIA (ACUTE, CHRONIC, OTHER)
Q462A4 ( <u>CADXTYPEOTHSKINTYPE1</u> ) <i>Was it melanoma or some other type of skin cancer?</i> 1 melanoma 2 other skin cancer 3 don't know/refused [CONTINUE WITH Q462A5]	( <u>CADXTYPEOTHSKINTYPE2</u> ) Q462B4	( <u>CADXTYPEOTHSKINTYPE3</u> ) Q462C4	( <u>CADXTYPEOTHSKINTYPE4</u> ) Q462D4	( <u>CADXTYPEOTHSKINTYPE5</u> ) Q462E4	30 LIVER 31 LUNG 32 LYMPHOMA, HODGKINS 33 MELANOMA 34 NON-HODGKINS LYMPHOMA (LYMPH, LYMPHATIC)
Q4462A5 ( <u>CADXAGE1</u> ) <i>What was the relative's age at diagnosis?</i> Age at diagnosis ___ [DON'T KNOW/REF = 99]	( <u>CADXAGE2</u> ) Q4462B5	( <u>CADXAGE3</u> ) Q4462C5	( <u>CADXAGE4</u> ) Q4462D5	( <u>CADXAGE5</u> ) Q4462E5	35 OVARIAN 36 PANCREATIC 37 PROSTATE 38 RECTAL
Q462A6 ( <u>CADXWHENTYPE1</u> ) <i>How long ago was it diagnosed?</i> [ANSWER AS EITHER] Q462A7 1 [year of] ___ (CADXYR1-5) Q462A8 2 [years ago] ___ (CADXYRSAGO1-5) 3 don't know/refused	( <u>CADXWHENTYPE2</u> ) Q462B6	( <u>CADXWHENTYPE3</u> ) Q462C6	( <u>CADXWHENTYPE4</u> ) Q462D6	( <u>CADXWHENTYPE5</u> ) Q462E6	39 RENAL PELVIS 40 SKIN-BASAL OR SQUAMOUS CELL CARCINOMA
Q46B ( <u>CADX2</u> ) <i>Has/had this relative been diagnosed with a 2<sup>nd</sup> cancer?</i> 1 yes → Q46B2 (NEXT CANCER) 2 no → Q46F 9 don't know/refused → Q46F	( <u>CADX3</u> ) Q46C ... 3 <sup>rd</sup>	( <u>CADX4</u> ) Q46D ... 4 <sup>th</sup>	( <u>CADX5</u> ) Q46E ... 5 <sup>th</sup>	( <u>ANYOTHERELATIVEDXWITHCANCER</u> ) Q46F <i>Any other relatives with cancer?</i>	41 SMALL INTESTINE (BOWEL) 42 SPINAL, NOS 43 STOMACH (GASTRIC) 44 THROAT 45 THYROID 46 URETER 47 UTERINE 48 OTHER(SPECIFY) 49 DON'T KNOW/REFUSED

## SECTION 5: DIET

Q5\_ *In this next section, the questions ask how often you ate certain foods about two years ago. Would you please tell me how often per day, per week, or per month you ate the following foods.*

(FRUITSERVSFREQNUM)

Q5\_1 *About two years ago, on average, how often did you eat a piece or serving of fruit? A serving of fruit is 1 medium fresh fruit or 6 ounces of fruit juice, ½ cup of chopped, cooked or canned fruit or ¼ cup of dried fruit.*

\_\_\_\_ [ENTER NUMBER OF SERVINGS]

[DON'T KNOW/REFUSED = 99] → Q5\_2

[NONE = 00] → Q5\_2

(FRUITSERVSFREQTYPE)

Q5\_1A [IVER: ENTER INTERVAL OF FREQUENCY FOR FRUIT CONSUMPTION]

- 1 servings per day
- 2 servings per week
- 3 servings per month

(VEGGIESERVSNUM)

Q5\_2 *About two years ago, on average how often did you eat a serving of vegetables. A serving of vegetables is 1 cup raw leafy vegetables, 6 ounces of vegetable juice, or ½ cup of other vegetables, cooked or raw.*

\_\_\_\_ [ENTER NUMBER OF SERVINGS]

[DON'T KNOW/REFUSED = 99] → Q5\_3

[NONE = 00] → Q5\_3

(VEGGIESERVSFREQTYPE)

Q5\_2A [IVER: ENTER INTERVAL OF FREQUENCY FOR VEGETABLE CONSUMPTION]

- 1 servings per day
- 2 servings per week
- 3 servings per month

(MEATSERVSNUM)

Q5\_3 *About two years ago, on average how often did you eat a serving of red meat (not chicken or fish)? Please specify the number of servings per day, per week, or per month.*

*A serving of red meat is: 2-3 ounces or a piece of meat about the size of a deck of cards.*

PROMPT: RED MEATS INCLUDE: BEEF, VEAL, LAMB, PORK, VENISON, MUTTON (IN ANY FORM: STEAK, HAMBURGER, PRIME RIB, RIBS, BACON, SAUSAGE)

\_\_\_\_ [ENTER NUMBER OF SERVINGS]

[DON'T KNOW/REFUSED = 99] → Q5\_4

[NONE = 00] → Q5\_4

(MEATSERVSFREQTYPE)

Q5\_3A [IVER: ENTER INTERVAL OF FREQUENCY FOR MEAT CONSUMPTION]

- 1 servings per day
- 2 servings per week
- 3 servings per month



(OFMEATSERVSNUMCOOKMETHOD)

Q5\_31 PROMPT: ABOUT TWO YEARS AGO *On average, how many of those servings of red meat were cooked by pan-frying, broiling, grilling or barbecuing? This does not include baking or boiling.*  
\_\_\_\_ [ENTER NUMBER OF SERVINGS]  
[DON'T KNOW/REFUSED = 99] → Q5\_32  
[NONE = 00] → Q5\_4

(OFMEATSERVSMETHODFREQTYPE)

Q5\_31A [IVER: ENTER INTERVAL OF FREQUENCY FOR MEAT CONSUMPTION]  
1 servings per day  
2 servings per week  
3 servings per month

(OFMEATSERVSCOOKMTHDOUTAPPRTYPE)

Q5\_32 *On average, when you ate red meat cooked by these methods, which of the following best describes its outside appearance?*  
PROMPT: IF R REPORTS DIFFERENT METHODS FOR DIFFERENT TYPES OF RED MEAT, REPORT THE METHOD USED MOST OFTEN.  
1 lightly browned  
2 medium browned  
3 heavily browned or blackened  
4 don't know/refused

(OFMEATSERVSCOOKMTHDINAPPRTYPE)

Q5\_33 *On average when you ate red meat cooked by these methods, which of the following best describes its inside appearance (how well was it done)?*  
PROMPT: IF R REPORTS DIFFERENT METHODS FOR DIFFERENT TYPES OF RED MEAT, REPORT THE METHOD USED MOST OFTEN.  
1 red (rare)  
2 pink (medium)  
3 brown (well-done)  
4 don't know/refused

(POULTRYSERVSNUM)

Q5\_4 *About two years ago, on average, how often did you eat a serving of poultry? Please specify the number of servings per day, per week, or per month. A serving of poultry is: 2-3 ounces of poultry meat.*  
PROMPT: 1 DRUMSTICK; 1 THIGH; HALF A BREAST; 2 WINGS; 3 NUGGETS; INCLUDE CHICKEN, TURKEY AND OTHER FOWL.  
\_\_\_\_ [ENTER NUMBER OF SERVINGS]  
[DON'T KNOW/REFUSED = 99] → Q5\_5  
[NONE = 00] → Q5\_5

(POULTRYSERVSFREQTYPE)

Q5\_4A [IVER: ENTER INTERVAL OF FREQUENCY FOR POULTRY CONSUMPTION]  
1 servings per day  
2 servings per week  
3 servings per month

(OFPOULTRYSERVSNUMCOOKMETHOD)

Q5\_41 PROMPT: ABOUT TWO YEARS AGO *On average, how many of those servings of poultry were cooked by pan-frying, broiling, grilling or barbecuing? This does not include baking or boiling.*  
\_\_\_\_ [ENTER NUMBER OF SERVINGS]  
[DON'T KNOW/REFUSED = 99] → Q5\_42  
[NONE = 00] → Q5\_5

(OFPOULTRYSERVSCOOKMETHDFREQTYPE)

Q5\_41A [IVER: ENTER INTERVAL OF FREQUENCY FOR POULTRY CONSUMPTION]  
1 servings per day  
2 servings per week  
3 servings per month

(OFPOULTRYSERVSCOOKMTHDOUTAPPRTYPE)

Q5\_42 *On average when you ate poultry cooked by these methods, which of the following best describes its outside appearance?*  
1 lightly browned  
2 medium browned  
3 heavily browned/blackened  
4 don't know/refused

(MILKSERVSNUM)

Q5\_5 *About two years ago, on average, how often did you drink a serving of milk or a milk beverage? This includes milk on cereal. A serving of milk is 1 cup or 8 ounces.*  
\_\_\_\_ [ENTER NUMBER OF SERVINGS]  
[DON'T KNOW/REFUSED = 99] → Q6\_  
[NONE = 00] → Q6\_

(MILKSERVSFREQTYPE)

Q5\_5A [IVER: ENTER INTERVAL OF FREQUENCY FOR MILK CONSUMPTION]  
1 servings per day  
2 servings per week  
3 servings per month

Q6\_

*Now I am going to ask you about your participation in recreational physical activities that are not related to any employment or military training.*

**[IF AGE <30] I will ask about your participation in physical activities.**

**[IF AGE IS 30-49 YEARS] The next section contains questions about your participation in physical activities during two periods of your life—your 20s and your 30s and 40s.**

**[IF AGE IS >49] First, I will ask about your participation in recreational physical activities in the 10 year span between age 20 & 30, then in the 20 year span between age 30 & 50, and finally I will ask about your activity since age 50.**

	In the 10 year span between ages 20 and 30...  [IF AGE IS <30]: In the span between age 20 and your current age...	SKIP IF LESS THAN AGE 30 In the 20 year span between ages 30 and 30...  [IF AGE IS <30]: In the span between age 30 and your current age...	SKIP IF LESS THAN AGE 50 In the span between age 50 and your current age...
Q6_1 ...did you walk for at least 30 minutes a week for 3 months in a row?	Q6_1A: walk 1 Yes (IF YES, GO TO Q6_1A1) 2 No →	Q6_1B: walk 1 Yes (IF YES, GO TO Q6_1B1) 2 No →	Q6_1C: walk 1 Yes (IF YES, GO TO Q6_1C1) 2 No → (GO TO Q6_2)
	<b>Q6_1A1</b> For how many years did you walk? _____ years [maximum=10]  <b>Q6_1A2</b> For how many months of the year? _____ months per year  <b>Q6_1A3</b> On average, how many <u>hours</u> per week did you walk? _____ hours per week	<b>Q6_1B1</b> For how many years did you walk? _____ years [maximum=20]  <b>Q6_1B2</b> For how many months of the year? _____ months per year  <b>Q6_1B3</b> On average, how many <u>hours</u> per week did you walk? _____ hours per week	<b>Q6_1C1</b> For how many years did you walk? _____ years  <b>Q6_1C2</b> For how many months of the year? _____ months per year  <b>Q6_1C3</b> On average, how many <u>hours</u> per week did you walk? _____ hours per week

(REGULARLYPARTICIPATEINACTIVITY)

Q6\_10

*As an adult, did you participate regularly in any strenuous activity? By “strenuous” I mean any activity that increased your heart rate and caused you to sweat such as jogging, swimming laps, bicycling, playing tennis, football, soccer, basketball, calisthenics, or aerobics. By “regularly” I mean at least 30 minutes a week for at least 3 months in a row.*

- 1 yes → Q6\_10A\_ITEM\_1
- 2 no → Q6\_11\_ITEM\_1
- 3 don't know/refused → Q6\_11\_ITEM\_1

Q6_10A_ITEM_1 [IF AGE <30] <i>In the span between age 20 and your current age...</i> [IF AGE ≥30] <i>In the 10 year span between age 20 and age 30 What strenuous activities or sports did you participate in most?</i>	(ACTIVITY20S1) SKIP IF R PARTICIPATED IN NO STRENUOUS ACTIVITIES IN 20s.	(ACTIVITY20S2) SKIP IF R PARTICIPATED IN ≤ 1 STRENUOUS ACTIVITY IN 20s.	(ACTIVITY20S3) SKIP IF R PARTICIPATED IN ≤ 2 STRENUOUS ACTIVITIES IN 20s.
	[FIRST ACTIVITY]	[SECOND ACTIVITY]	[THIRD ACTIVITY]

<p>[LIST OF ACTIVITIES]</p> <p>1 AEROBICS, STEP AEROBICS, ETC.  2 BADMINTON, COMPETITIVE  3 BASEBALL, SOFTBALL, PITCHING  4 BASKETBALL  5 BICYCLING (RD, MTN, STATIONARY)  6 BOXING  7 CALISTHENICS, VIGOROUS  8 CLIMBING (SNOW, MTN, ROCK)  9 DANCE (ANY VIGOROUS TYPE)  10 FENCING  11 FOOTBALL OR RUGBY  12 GARDENING, MOWING; MANUAL MOWER  13 HAND/RACQUETBALL, SQUASH  14 HIKING, BACKPACKING  15 HOCKEY (FIELD, ICE)  16 HORSEBACK RIDING, TROTting  17 JOGGING, TREADMILL (&gt;10 mph)  18 JUMP ROPING  19 KICK BOXING  20 MARCHING (DRILL, MILITARY)  21 MARTIAL ARTS (KARATE, TAE KWON DO)  22 ROWING A BOAT (KAYAK, CANOE), ROWING MACHINE, RIGOROUS  23 RUNNING  25 SCUBA OR SKIN DIVING (NOT SNORKLING)  26 SKATING (ROLLER, ICE, IN-LINE)  28 SKIING, X-COUNTRY, NORDIC TRK  29 SKIING, SNOW, DOWN-HILL  30 SKIING, WATER  31 SNOWBOARDING  32 SNOW SHOENING  33 SOCCER  34 STAIRMASTER, CLIMBING STAIRS  36 SWIMMING LAPS  37 TENNIS  38 VOLLEYBALL (BEACH)  39 [RETIRED]  40 WATER AEROBICS  41 WEIGHTLIFTING, VIGOROUS  42 WRESTLING  43 YOGA  44 OTHER (SPECIFY)  45 NONE/NO MORE</p> <p>[RECORD UP TO 3 ACTIVITIES, USING CODES ABOVE]  Q6_10A_ITEM_1  (ACTIVITYOTH20S1) (1<sup>st</sup>) ___  Q6_10B_ITEM_1  (ACTIVITYOTH20S2) (2<sup>nd</sup>) ___  Q6_10C_ITEM_1  (ACTIVITYOTH20S3) (3<sup>rd</sup>) ___</p> <p>[CODES 24, 27, 35 WERE RETIRED]</p>	<p>(ACTIVITYNUMYRS20S1)  Q6_10D_ITEM_1  <b>How many years did you</b>  [1<sup>st</sup> ACTIVITY]?</p> <p>___ # of years  [MAX=10  DK/REF = 99  &lt; 3 MO = 00  3-17 MO = 01]</p>	<p>(ACTIVITYNUMYRS20S2)  Q6_10G_ITEM_1  <b>How many years did you</b>  [2<sup>nd</sup> ACTIVITY]?</p> <p>___ # of years  [MAX=10  DK/REF = 99  &lt; 3 MO = 00  3-17 MO = 01]</p>	<p>(ACTIVITYNUMYRS20S3)  Q6_10J_ITEM_1  <b>How many years did you</b>  [3<sup>rd</sup> ACTIVITY]?</p> <p>___ # of years  [MAX=10  DK/REF = 99  &lt; 3 MO = 00  3-17 MO = 01]</p>
<p>13 HAND/RACQUETBALL, SQUASH  14 HIKING, BACKPACKING  15 HOCKEY (FIELD, ICE)  16 HORSEBACK RIDING, TROTting  17 JOGGING, TREADMILL (&gt;10 mph)  18 JUMP ROPING  19 KICK BOXING  20 MARCHING (DRILL, MILITARY)  21 MARTIAL ARTS (KARATE, TAE KWON DO)  22 ROWING A BOAT (KAYAK, CANOE), ROWING MACHINE, RIGOROUS  23 RUNNING  25 SCUBA OR SKIN DIVING (NOT SNORKLING)  26 SKATING (ROLLER, ICE, IN-LINE)  28 SKIING, X-COUNTRY, NORDIC TRK  29 SKIING, SNOW, DOWN-HILL  30 SKIING, WATER  31 SNOWBOARDING  32 SNOW SHOENING  33 SOCCER  34 STAIRMASTER, CLIMBING STAIRS  36 SWIMMING LAPS  37 TENNIS  38 VOLLEYBALL (BEACH)  39 [RETIRED]  40 WATER AEROBICS  41 WEIGHTLIFTING, VIGOROUS  42 WRESTLING  43 YOGA  44 OTHER (SPECIFY)  45 NONE/NO MORE</p>	<p>(ACTIVITYNUMMOS20S1)  Q6_10E_ITEM_1  <b>How many months of the year?</b></p> <p>___ months/year  [MIN=3  DK/REF = 13]</p>	<p>(ACTIVITYNUMMOS20S2)  Q6_10H_ITEM_1  <b>How many months of the year?</b></p> <p>___ months/year  [MIN=3  DK/REF = 13]</p>	<p>(ACTIVITYNUMMOS20S3)  Q6_10K_ITEM_1  <b>How many months of the year?</b></p> <p>___ months/year  [MIN=3  DK/REF = 13]</p>
<p>21 MARTIAL ARTS (KARATE, TAE KWON DO)  22 ROWING A BOAT (KAYAK, CANOE), ROWING MACHINE, RIGOROUS  23 RUNNING  25 SCUBA OR SKIN DIVING (NOT SNORKLING)  26 SKATING (ROLLER, ICE, IN-LINE)  28 SKIING, X-COUNTRY, NORDIC TRK  29 SKIING, SNOW, DOWN-HILL  30 SKIING, WATER  31 SNOWBOARDING  32 SNOW SHOENING  33 SOCCER  34 STAIRMASTER, CLIMBING STAIRS  36 SWIMMING LAPS  37 TENNIS  38 VOLLEYBALL (BEACH)  39 [RETIRED]  40 WATER AEROBICS  41 WEIGHTLIFTING, VIGOROUS  42 WRESTLING  43 YOGA  44 OTHER (SPECIFY)  45 NONE/NO MORE</p>	<p>(ACTIVITYNUMHRSPER-WK20S1)  Q6_10F_ITEM_1  <b>On average, how many hours per week did you</b>  [1<sup>st</sup> ACTIVITY]?</p> <p>___ . ___ hours/week  [DK/REF = 99.99]</p>	<p>(ACTIVITYNUMHRSPER-WK20S2)  Q6_10I_ITEM_1  <b>On average, how many hours per week did you</b>  [2<sup>nd</sup> ACTIVITY]?</p> <p>___ . ___ hours/week  [DK/REF = 99.99]</p>	<p>(ACTIVITYNUMHRSPER-WK20S3)  Q6_10L_ITEM_1  <b>On average, how many hours per week did you</b>  [3<sup>rd</sup> ACTIVITY]?</p> <p>___ . ___ hours/week  [DK/REF = 99.99]</p>
<p>[RETIRED]</p>	<p>[IF 2<sup>nd</sup> ACTIVITY IS SPECIFIED IN Q6_10B_ITEM_1  → Q6_10G_ITEM_1.]  [IF A 2<sup>nd</sup> ACTIVITY IS NOT SPECIFIED AND AGE &lt;30  → Q6_11_ITEM_1]  [IF A 2<sup>nd</sup> ACTIVITY IS NOT SPECIFIED AND AGE &gt;29  → Q6_10A_ITEM_2]</p>	<p>[IF 3<sup>rd</sup> ACTIVITY IS SPECIFIED IN Q6_10C_ITEM_1  → Q6_10J_ITEM_1]  [IF A 3<sup>rd</sup> ACTIVITY IS NOT SPECIFIED AND AGE &lt;30  → Q6_11_ITEM_1]  [IF A 3<sup>rd</sup> ACTIVITY IS NOT SPECIFIED AND AGE &gt;29  → Q6_10A_ITEM_2]</p>	<p>[IF AGE &lt;30 → Q6_11_ITEM_1]  [IF AGE &gt;29 → Q6_10A_ITEM_2]</p>

30s & 40s

<p>[SKIP IF AGE &lt;30 → Q6_11_ITEM_1 Q6_10A_ITEM_2]</p>	<p>(ACTIVITY30S40S1) [SKIP IF R PARTICIPATED IN NO STRENUOUS ACTIVITIES IN 30s &amp; 40s.]</p>	<p>(ACTIVITY30S40S2) [SKIP IF R PARTICI- PATED IN ≤ 1 STREN- UOUS ACTIVITY IN 30S &amp; 40S.]</p>	<p>(ACTIVITY30S40S3) [SKIP IF R PARTICI- PATED IN ≤ 2 STREN- UOUS ACTIVITIES IN 30S &amp; 40S]</p>
<p>[IF AGE&lt;50]:<i>In the span between ages 30 and your current age, what strenuous activities or sports did you participate in most?</i>[IF AGE&gt;50]:<i>In the 20-year span between ages 30 &amp; 50, what strenuous activities or sports did you participate in most?</i></p>	<p>[FIRST ACTIVITY]</p>	<p>[SECOND ACTIVITY]</p>	<p>[THIRD ACTIVITY]</p>

<p>[LIST OF ACTIVITIES]  1 AEROBICS, STEP AEROBICS, ETC.  2 BADMINTON, COMPETITIVE  3 BASEBALL, SOFTBALL, PITCHING  4 BASKETBALL  5 BICYCLING (RD, MTN, STATIONARY)  6 BOXING  7 CALISTHENICS, VIGOROUS  8 CLIMBING (SNOW, MTN, ROCK)  9 DANCE (ANY VIGOROUS TYPE)  10 FENCING  11 FOOTBALL OR RUGBY  12 GARDENING, MOWING; MANUAL MOWER  13 HAND/RACQUETBALL, SQUASH  14 HIKING, BACKPACKING  15 HOCKEY (FIELD, ICE)  16 HORSEBACK RIDING, TROTTING  17 JOGGING, TREADMILL (&gt;10 mph)  18 JUMP ROPING  19 KICK BOXING  20 MARCHING (DRILL, MILITARY)  21 MARTIAL ARTS (KARATE, TAE KWON DO)  22 ROWING A BOAT (KAYAK, CANOE), ROWING MACHINE, RIGOROUS  23 RUNNING  25 SCUBA OR SKIN DIVING (NOT SNORKLING)  26 SKATING (ROLLER, ICE, IN-LINE)  28 SKIING, X-COUNTRY, NORDIC TRK  29 SKIING, SNOW, DOWN-HILL  30 SKIING, WATER  31 SNOWBOARDING  32 SNOW SHOETING  33 SOCCER  34 STAIRMASTER, CLIMBING STAIRS  36 SWIMMING LAPS  37 TENNIS  38 VOLLEYBALL (BEACH)  39 [RETIRED]  40 WATER AEROBICS  41 WEIGHTLIFTING, VIGOROUS  42 WRESTLING  43 YOGA  44 OTHER (SPECIFY)  45 NONE/NO MORE</p> <p>[RECORD UP TO 3 ACTIVITIES, USING CODES ABOVE]  Q6_10A_ITEM_1  (ACTIVITYOTH30S40S1) (1<sup>st</sup>) ___  Q6_10B_ITEM_1  (ACTIVITYOTH30S40S2) (2<sup>nd</sup>) ___  Q6_10C_ITEM_1  (ACTIVITYOTH30S40S3) (3<sup>rd</sup>) ___</p> <p>[CODES 24, 27, 35 WERE RETIRED]</p>	<p>(ACTIVITYNUMYRS30S40S1)  Q6_10D_ITEM_1  <b>How many years did you</b>  [1<sup>st</sup> ACTIVITY]?   ___ # of years  [<b>MAX=10</b>  <b>DK/REF = 99</b>  <b>&lt; 3 MO = 00</b>  <b>3-17 MO = 01</b>]</p> <p>(ACTIVITYNUMMOS30S40S1)  Q6_10E_ITEM_1  <b>How many months of the</b>  <b>year?</b>   ___ months/year  [<b>MIN=3</b>  <b>DK/REF = 13</b>]</p> <p>(ACTIVITYNUMHRSPER-WK30S40S1)  Q6_10F_ITEM_1  <b>On average, how many</b>  <b>hours per week did you</b>  [1<sup>st</sup> ACTIVITY]?   ___ . ___ hours/week  [<b>DK/REF = 99.99</b>]</p> <p>[IF 2<sup>nd</sup> ACTIVITY IS SPECIFIED IN Q6_10B_ITEM_1 → Q6_10G_ITEM_1.]  [IF A 2<sup>nd</sup> ACTIVITY IS NOT SPECIFIED AND AGE &lt;30 → Q6_11_ITEM_1]  [IF A 2<sup>nd</sup> ACTIVITY IS NOT SPECIFIED AND AGE &gt;29 → Q6_10A_ITEM_2]</p>	<p>(ACTIVITYNUMYRS30S40S2)  Q6_10G_ITEM_1  <b>How many years did you</b>  [2<sup>nd</sup> ACTIVITY]?   ___ # of years  [<b>MAX=10</b>  <b>DK/REF = 99</b>  <b>&lt; 3 MO = 00</b>  <b>3-17 MO = 01</b>]</p> <p>(ACTIVITYNUMMOS30S40S2)  Q6_10H_ITEM_1  <b>How many months of the</b>  <b>year?</b>   ___ months/year  [<b>MIN=3</b>  <b>DK/REF = 13</b>]</p> <p>(ACTIVITYNUMHRSPER-WK30S40S2)  Q6_10I_ITEM_1  <b>On average, how many</b>  <b>hours per week did you</b>  [2<sup>nd</sup> ACTIVITY]?   ___ . ___ hours/week  [<b>DK/REF = 99.99</b>]</p> <p>[IF 3<sup>rd</sup> ACTIVITY IS SPECIFIED IN Q6_10C → Q6_10J_ITEM_1]  [IF A 3<sup>rd</sup> ACTIVITY IS NOT SPECIFIED AND AGE &lt;30 → Q6_11_ITEM_1]  [IF A 3<sup>rd</sup> ACTIVITY IS NOT SPECIFIED AND AGE &gt;29 → Q6_10A_ITEM_2]</p>	<p>(ACTIVITYNUMYRS30S40S3)  Q6_10J_ITEM_1  <b>How many years did you</b>  [3<sup>rd</sup> ACTIVITY]?   ___ # of years  [<b>MAX=10</b>  <b>DK/REF = 99</b>  <b>&lt; 3 MO = 00</b>  <b>3-17 MO = 01</b>]</p> <p>(ACTIVITYNUMMOS30S40S3)  Q6_10K_ITEM_1  <b>How many months of the</b>  <b>year?</b>   ___ months/year  [<b>MIN=3</b>  <b>DK/REF = 13</b>]</p> <p>(ACTIVITYNUMHRSPER-WK30S40S3)  Q6_10L_ITEM_1  <b>On average, how many</b>  <b>hours per week did you</b>  [3<sup>rd</sup> ACTIVITY]?   ___ . ___ hours/week  [<b>DK/REF = 99.99</b>]</p> <p>[IF AGE &lt;30 → Q6_11_ITEM_1]  [IF AGE &gt;29 → Q6_10A_ITEM_2]</p>
--	---	---	--

50s

<p>[SKIP IF AGE &lt;50 → Q6_11_ITEM_1]</p>	<p>(ACTIVITY50S1) [SKIP IF R PARTICI- PATED IN NO ACTIVITIES SINCE TURNING 50.]</p>	<p>(ACTIVITY50S2) [SKIP IF R PARTICI- PATED IN ≤ 1 ACTIVITY SINCE TURNING 50.]</p>	<p>(ACTIVITY50S3) [SKIP IF R PARTICI-PATED IN ≤ 2 ACTIVITIES SINCE TURNING 50.]</p>
<p>Q6_10A_ITEM_3 <i>In the span between age 50 and your current age, what strenuous activities or sports do you participate in most?</i></p>	<p>[FIRST ACTIVITY]</p>	<p>[SECOND ACTIVITY]</p>	<p>[THIRD ACTIVITY]</p>

<p>[LIST OF ACTIVITIES]</p> <p>1 AEROBICS, STEP AEROBICS, ETC.  2 BADMINTON, COMPETITIVE  3 BASEBALL, SOFTBALL, PITCHING  4 BASKETBALL  5 BICYCLING (RD, MTN, STATIONARY)  6 BOXING  7 CALISTHENICS, VIGOROUS  8 CLIMBING (SNOW, MTN, ROCK)  9 DANCE (ANY VIGOROUS TYPE)  10 FENCING  11 FOOTBALL OR RUGBY  12 GARDENING, MOWING; MANUAL MOWER  13 HAND/RACQUETBALL, SQUASH  14 HIKING, BACKPACKING  15 HOCKEY (FIELD, ICE)  16 HORSEBACK RIDING, TROTting  17 JOGGING, TREADMILL (&gt;10 mph)  18 JUMP ROPING  19 KICK BOXING  20 MARCHING (DRILL, MILITARY)  21 MARTIAL ARTS (KARATE, TAE KWON DO)  22 ROWING A BOAT (KAYAK, CANOE), ROWING MACHINE, RIGOROUS  23 RUNNING  25 SCUBA OR SKIN DIVING (NOT SNORKLING)  26 SKATING (ROLLER, ICE, IN-LINE)  28 SKIING, X-COUNTRY, NORDIC TRK  29 SKIING, SNOW, DOWN-HILL  30 SKIING, WATER  31 SNOWBOARDING  32 SNOW SHOEING  33 SOCCER  34 STAIRMASTER, CLIMBING STAIRS  36 SWIMMING LAPS  37 TENNIS  38 VOLLEYBALL (BEACH)  39 [RETIRED]  40 WATER AEROBICS  41 WEIGHTLIFTING, VIGOROUS  42 WRESTLING  43 YOGA  44 OTHER (SPECIFY)  45 NONE/NO MORE</p> <p>[RECORD UP TO 3 ACTIVITIES, USING CODES ABOVE]  Q6_10A_ITEM_1  ( <u>ACTIVITYOTH50S1</u> ) (1<sup>st</sup>) ___ ___  Q6_10B_ITEM_1  ( <u>ACTIVITYOTH50S2</u> ) (2<sup>nd</sup>) ___ ___  Q6_10C_ITEM_1  ( <u>ACTIVITYOTH50S3</u> ) (3<sup>rd</sup>) ___ ___</p> <p>[CODES 24, 27, 35 WERE RETIRED]</p>	<p>( <u>ACTIVITYNUMYRS50S1</u> )  Q6_10D_ITEM_1  <b>How many years did you</b>  [1<sup>st</sup> ACTIVITY]?  ___ # of years  [ MAX=10  DK/REF = 99  &lt; 3 MO = 00  3-17 MO = 01 ]</p> <p>( <u>ACTIVITYNUMMOS50S1</u> )  Q6_10E_ITEM_1  <b>How many months of the</b>  <b>year?</b>  ___ months/year  [ MIN=3  DK/REF = 13 ]</p> <p>( <u>ACTIVITYNUMHRSPER-</u>  <u>WK50S1</u> )  Q6_10F_ITEM_1  <b>On average, how many</b>  <b>hours per week did you</b>  [1<sup>st</sup> ACTIVITY]?  ___ . ___ hours/week  [ DK/REF = 99.99 ]</p> <p>[ IF 2<sup>ND</sup> ACTIVITY IS SPECIFIED IN Q6_10B  → Q6_10G_ITEM_3 ]  [ IF A 2<sup>ND</sup> ACTIVITY IS NOT SPECIFIED →  Q6_11_ITEM_1. ]</p>	<p>( <u>ACTIVITYNUMYRS50S2</u> )  Q6_10G_ITEM_1  <b>How many years did you</b>  [2<sup>nd</sup> ACTIVITY]?  ___ # of years  [ MAX=10  DK/REF = 99  &lt; 3 MO = 00  3-17 MO = 01 ]</p> <p>( <u>ACTIVITYNUMMOS50S2</u> )  Q6_10H_ITEM_1  <b>How many months of the</b>  <b>year?</b>  ___ months/year  [ MIN=3  DK/REF = 13 ]</p> <p>( <u>ACTIVITYNUMHRSPER-</u>  <u>WK50S2</u> )  Q6_10I_ITEM_1  <b>On average, how many</b>  <b>hours per week did you</b>  [2<sup>nd</sup> ACTIVITY]?  ___ . ___ hours/week  [ DK/REF = 99.99 ]</p> <p>[ IF 3<sup>RD</sup> ACTIVITY IS SPECIFIED IN  Q6_10C_ITEM_3 →  Q6_10J_ITEM_3 ]  [ IF A 3<sup>RD</sup> ACTIVITY IS NOT SPECIFIED →  Q6_11_ITEM_1. ]</p>	<p>( <u>ACTIVITYNUMYRS50S3</u> )  Q6_10J_ITEM_1  <b>How many years did you</b>  [3<sup>rd</sup> ACTIVITY]?  ___ # of years  [ MAX=10  DK/REF = 99  &lt; 3 MO = 00  3-17 MO = 01 ]</p> <p>( <u>ACTIVITYNUMMOS50S3</u> )  Q6_10K_ITEM_1  <b>How many months of the</b>  <b>year?</b>  ___ months/year  [ MIN=3  DK/REF = 13 ]</p> <p>( <u>ACTIVITYNUMHRSPER-</u>  <u>WK50S3</u> )  Q6_10L_ITEM_1  <b>On average, how many</b>  <b>hours per week did you</b>  [3<sup>rd</sup> ACTIVITY]?  ___ . ___ hours/week  [ DK/REF = 99.99 ]</p>
---	--	--	--



<p>Q6_11_ITEM_1  <b>[IF AGE &lt;30] Since turning 20, what was your <u>usual occupation</u>?</b>  <b>[IF AGE &gt;29] During your 20s, what was your usual occupation?</b>          PROMPT: USUAL IS THE LONGEST HELD ACTIVITY, INCLUDING ANY PAID OR UNPAID EMPLOYMENT, SUCH AS BEING A STUDENT, HOUSEWIFE, OR UNEMPLOYED.</p>	<p><b>SKIP IF AGE &lt; 30</b>          Q6_11_ITEM_2  <b>When you were in your 30s &amp; 40s, what was your usual occupation?</b></p>	<p><b>SKIP IF AGE &lt; 50</b>          Q6_11C_ITEM_3  <b>Since turning 50, what was your usual occupation?</b></p>
<p>[OCCUP20]          (OCCUPATION20S)          [TO BE CODED]</p> <p><input type="checkbox"/> don't know/refused</p>	<p>[OCCUP30]          (OCCUPATION30S40S)          [TO BE CODED]</p> <p><input type="checkbox"/> don't know/refused</p>	<p>[OCCUP50]          (OCCUPATNION50S)          [TO BE CODED]</p> <p><input type="checkbox"/> don't know/refused</p>

**SECTION 7: ALCOHOL CONSUMPTION**

Q7\_ [IF AGE <30] *The next set of questions is about alcohol consumption since you turned 20.*  
 [IF AGE IS 30-49] *The next set of questions is about alcohol consumption during two periods of your life.*  
 [IF AGE IS >49] *The next set of questions is about alcohol consumption during three periods of your life.*

Q7\_0 [IF AGE <30, SKIP AND GO TO Q7\_1.]  
 [IF AGE >29] *Think back to the period when you were in your 20s.*

(DRNKALCOHOLBEV20S)

Q7\_1 [IF AGE <30] *Since turning 20...*  
 [IF AGE >29] *During that time...*  
*...did you ever drink any alcoholic beverages at least once a week for 6 months or longer? Alcoholic beverages include beer, hard cider, wine, sake, liquor, spirits, mixed drinks, cocktails, wine coolers, and hard lemonade.*

- 1 yes
- 2 no  
 AND R is >29 → Q7\_0\_ITEM\_2  
 AND R is <30 → Q\_8
- 3 don't know/refused  
 AND R is >29 → Q7\_0\_ITEM\_2  
 AND R is <30 → Q\_8

(20s)

**How many months or years...**

<p>(DRNKBEER20S)                  Q7_11_ITEM_1</p> <p><i>Now I will ask about specific beverages you may have consumed.</i>                  [IF AGE &lt;30] <i>Since turning 20...</i>                  [IF AGE &gt;29] <i>In your 20s...</i>  <i>...did you ever drink <u>beer</u> at least once a week for 6 months or longer?</i></p> <ul style="list-style-type: none"> <li>1 yes → Q7_11A_ITEM_1</li> <li>2 no → Q7_12_ITEM_1</li> <li>3 don't know/refused → Q7_12_ITEM_1</li> </ul>	<p>(DRNKBEERHOWLONGTYPE20S)                  Q7_11A_ITEM_1</p> <p><i>...did you drink beer?</i> PROMPT: AT LEAST 1X/WEEK</p> <ul style="list-style-type: none"> <li>1 number of months [MAX=98]</li> <li>2 number of years [MAX=10]</li> <li>3 don't know/refused                      DK/REF → Q7_12_ITEM_1</li> </ul> <p>(DRNKBEERHOWLONGNUM20S)                  Q7_11A1_ITEM_1                  ___ # of months or years</p>	<p>Q7_11B_ITEM_1</p> <p><i>How many 12 oz cans/bottles of beer did you typically drink?</i></p> <p>(DRNKBEERHOWMUCHTYPE20S)</p> <ul style="list-style-type: none"> <li>1 number per day</li> <li>2 number per week</li> <li>3 don't know/ref → Q7_12_ITEM_1</li> </ul> <p>(DRNKBEERHOWMUCHNUM20S)                  Q7_11C_ITEM_1                  ___ 12 oz. cans/bottles beer                  → Q7_12_ITEM_1</p>
<p>(DRNKHARDCDR20S)                  Q7_12_ITEM_1</p> <p>[IF AGE &lt;30] <i>Since turning 20...</i>                  [IF AGE &gt;29] <i>In your 20s...</i>  <i>...did you ever drink <u>hard cider</u>? PROMPT: AT LEAST ONCE A WEEK FOR 6 MONTHS OR LONGER</i></p> <ul style="list-style-type: none"> <li>1 yes → Q7_12A_ITEM_1</li> <li>2 no → Q7_13_ITEM_1</li> <li>3 don't know/refused → Q7_13_ITEM_1</li> </ul>	<p>(DRNKHARDCDRHOWLONGTYPE20S)                  Q7_12A_ITEM_1</p> <p><i>...did you drink hard cider?</i>                  PROMPT: AT LEAST 1X/WEEK</p> <ul style="list-style-type: none"> <li>1 number of months [MAX=98]</li> <li>2 number of years [MAX=10]</li> <li>3 don't know/refused                      DK/REF → Q7_13_ITEM_1</li> </ul> <p>(DRNKHARDCDRHOWLONGNUM20S)                  Q7_12A1_ITEM_1                  ___ # of months or years</p>	<p>(DRNKHARDCDRHOWMUCHTYPE20S)                  Q7_12B_ITEM_1</p> <p><i>How many 12 oz cans/bottles of hard cider did you typically drink?</i></p> <ul style="list-style-type: none"> <li>1 number per day</li> <li>2 number per week</li> <li>3 don't know/ref → Q7_13_ITEM_1</li> </ul> <p>(DRNKBEERHOWMUCHNUM20S)                  Q7_12C_ITEM_1                  ___ 12 oz. cans/bottles hrd cider                  → Q7_13_ITEM_1</p>

<p>(DRNKWINE20S) Q7_13_ITEM_1</p> <p>[IF AGE &lt;30] <i>Since turning 20...</i> [IF AGE &gt;29] <i>In your 20s...</i> <i>...did you ever drink wine?</i> PROMPT: AT LEAST ONCE A WEEK FOR 6 MONTHS OR LONGER</p> <p>1 yes → Q7_13A_ITEM_1 2 no → Q7_14_ITEM_1 3 don't know/refused → Q7_14_ITEM_1</p>	<p>(DRNKWINEHOWLONGTYPE20S) Q7_13A_ITEM_1 <i>...did you drink wine?</i> PROMPT: AT LEAST 1X/WEEK</p> <p>1 number of months [MAX=98] 2 number of years [MAX=10] 3 don't know/refused DK/REF → Q7_14_ITEM_1</p> <p>(DRNKWINEHOWLONGNUM20S) Q7_13A1_ITEM_1 ___ # of months or years</p>	<p>(DRNKWINEHOWMUCHTYPE20S) Q7_13B_ITEM_1 <i>How many 4-oz glasses of wine did you typically drink?</i></p> <p>1 number per day 2 number per week 3 don't know/ref → Q7_14_ITEM_1</p> <p>(DRNKWINEHOWMUCHNUM20S) Q7_13C_ITEM_1 ___ 4 oz. glasses wine → Q7_14_ITEM_1</p>
<p>(DRNKFORTWINE20S) Q7_14_ITEM_1</p> <p>[IF AGE &lt;30] <i>Since turning 20...</i> [IF AGE &gt;29] <i>In your 20s...</i> <i>...did you ever drink fortified wines, such as sake, sherry, or port?</i> PROMPT: AT LEAST ONCE A WEEK FOR 6 MONTHS OR LONGER?</p> <p>1 yes → Q7_14A_ITEM_1 2 no → Q7_15_ITEM_1 3 don't know/refused → Q7_15_ITEM_1</p>	<p>(DRNKFORTWINEHOWLONGTYPE20S) Q7_14A_ITEM_1 <i>...did you drink fortified wine?</i> PROMPT: AT LEAST 1X/WEEK</p> <p>1 number of months [MAX=98] 2 number of years [MAX=10] 3 don't know/refused DK/REF → Q7_15_ITEM_1</p> <p>(DRNKFORTWINEHOWLONGNUM20S) Q7_14A1_ITEM_1 ___ # of months or years</p>	<p>(DRNKFORTWINEHOWMUCHTYPE20S) Q7_14B_ITEM_1 <i>How many 1-oz servings of fortified wine did you typically drink?</i></p> <p>1 per day 2 per week 3 don't know/ref → Q7_15_ITEM_1</p> <p>(DRNKFORTWINEHOWMUCHNUM20S) Q7_14C_ITEM_1 ___ 1 oz glasses fort. wine → Q7_15_ITEM_1</p>
<p>(DRNKLIQUOR20S) Q7_15_ITEM_1</p> <p>[IF AGE &lt;30] <i>Since turning 20...</i> [IF AGE &gt;29] <i>In your 20s...</i> <i>...did you ever drink liquor or mixed drinks?</i> PROMPT: AT LEAST ONCE A WEEK FOR 6 MONTHS OR LONGER</p> <p>1 yes → Q7_15A 2 no (see skip pattern below)     [IF NO &amp; ANSWERS Q7_11, Q7_12, Q7_13, OR Q7_14 = "YES" → Q8_1     [IF NO &amp; ANSWERS TO Q7_11, Q7_12, Q7_13, &amp; Q7_14 = "NO" → Q7_16_ITEM_1] 3 don't know/refused</p>	<p>(DRNKLIQUORHOWLONGTYPE20S) Q7_15A_ITEM_1 <i>...did you drink liquor or mixed drinks?</i> PROMPT: AT LEAST 1X/WEEK</p> <p>1 number of months [MAX=98] 2 number of years [MAX=10] 3 don't know/refused DK/REF → Q7_16_ITEM_1</p> <p>(DRNKLIQUORHOWLONGNUM20S) Q7_15A1_ITEM_1 ___ # of months/years</p>	<p>(DRNKLIQUORHOWMUCHTYPE20S) Q7_15B_ITEM_1 <i>How many 1 oz shots of liquor did you typically drink?</i></p> <p>1 per day 2 per week 3 don't know/ref → Q7_16_ITEM_1</p> <p>(DRNKLIQUORHOWMUCHNUM20S) Q7_15C_ITEM_1 ___ 1 oz. shots of liquor → Q7_16_ITEM_1</p>

**How many months or years...**

<p>Q7_16__ITEM_1  IF TTL ALCHL &lt; 1/WK → Q7_16_ITEM_1  IF ≥ 1/WK      IF (AGE &gt; 29) → Q7_0_ITEM_3      → Q8_  [IF APPLICABLE (IF THE TOTAL NUMBER OF DRINKS REPORTED BY IN Q7_11 - Q7_15B ADDS TO LESS THAN ONE ALCOHOLIC BEVERAGE A WEEK FOR 6 MONTHS OR LONGER) PROBE FOR CLARIFICATION]  <i>You said that you drank alcoholic beverages at least once a week in your 20s, although your consumption of specific beverages was less than once a week. So, thinking about your <u>total</u> consumption of alcoholic beverages in your 20s...</i></p>	<p>(DRNKCORRECTEDHOWLONGTYPE20S)  Q7_16_ITEM_1  ...in total did you drink at least one alcoholic beverage a week [INCLUDE ALL TYPES—BEER, WINE, HARD LIQUOR. R SHOULD ONLY INCLUDE PERIODS DURING WHICH THEY CONSUMED AT LEAST ONE DRINK PER WEEK FOR 6 MONTHS OR LONGER—THEY SHOULD NOT AVERAGE IN PERIODS DURING WHICH THEY DRANK LESS THAN THE MINIMUM USE PERIOD]?  1 number of months [MAX=98]  2 number of years [MAX=10]  3 don't know/refused      DK/REF → Q7_16_ITEM_1  (DRNKCORRECTEDHOWLONGNUM20S)  Q7_16_A_ITEM_1  __ # of months/years</p>	<p>Q7_16A_ITEM_1  How many alcoholic beverages a week did you typically drink during the combined periods during your 20s when you consumed at least 1 drink a week for 6 months or longer  PROMPT: HOW MANY 4 OZ. GLASSES OF WINE, OR 12 OZ. CANS OR BOTTLES OF BEER, HARD CIDER, HARD LEMONADE OR WINE COOLERS, OR 1 OZ. SERVINGS OF FORTIFIED WINES OR LIQUOR DID YOU DRINK?  (DRNKCORRECTDHOWMUCHNUM20S)  __ # of alcoholic bev/wk [MAX=98]  [DON'T KNOW/REF= 99]  IF ANSWER &gt; 2 and ≠ 99  → Q7_11_ITEM_1 (REITERATE ALL ALCOHOL Qs)</p>
---	--	---

[IF AGE < 30 → Q\_8]

Q7\_0 *Now think back to your 30s and 40s. I will be asking the same series of questions about alcohol consumption*

(DRNKALCOHOLBEV30S40S)

Q7\_1 *In your 30s and 40s, did you ever drink any alcoholic beverages at least once a week for 6 months or longer?* PROMPT: ALCOHOLIC BEVERAGES INCLUDE BEER, HARD CIDER, WINE, SAKE LIQUOR, SPIRITS, MIXED DRINKS, COCKTAILS, WINE COOLERS, AND HARD LEMONADE.

- 1 yes
- 2 no  
AND R IS >49 → Q7\_0\_ITEM\_3 FOR SINCE 50  
AND R IS <50 → Q\_8
- 3 don't know/refused  
AND R IS >49 → Q7\_0\_ITEM\_3 FOR SINCE 50, OTHERWISE → Q\_8  
AND R IS <50 → Q\_8

(30s40s)

**How many months or years...**

<p>(<u>DRNKBEEER30S40S</u>) Q7_11_ITEM_2</p> <p><b>Now I will ask about specific beverages you may have consumed. In your 30s &amp; 40s, did you ever drink <u>beer</u> at least once a week for 6 months or longer?</b></p> <p>1 yes → Q7_11A_ITEM_2 2 no → Q7_12_ITEM_2 3 don't know/ref → Q7_12_ITEM_2</p>	<p>(<u>DRNKBEEERHOWLONGTYPE30S40S</u>) Q7_11A_ITEM_2</p> <p><b>...did you drink beer</b> PROMPT: AT LEAST 1X/WEEK?</p> <p>1 number of months [MAX=98] 2 number of years [MAX=20] 3 don't know/refused DK/REF → Q7_12_ITEM_2</p> <p>(<u>DRNKBEEERHOWLONGNUM30S40S</u>) Q7_11A1_ITEM_2 ___ # of months/years</p>	<p>(<u>DRNKBEEERHOWMUCHTYPE30S40S</u>) Q7_11B_ITEM_2</p> <p><b>How many 12oz cans/bottles did you typically drink?</b></p> <p>1 per day 2 per week 3 don't know/ref → Q7_12_ITEM_2</p> <p>(<u>DRNKBEEERHOWMUCHNUM30S40S</u>) Q7_11C_ITEM_2 ___ 12 oz. cans/bottles beer → Q7_12_ITEM_2</p>
<p>(<u>DRNKHARDCDR30S40S</u>) Q7_12_ITEM_2</p> <p><b>In your 30s &amp; 40s, did you ever drink <u>hard cider</u>?</b> PROMPT: AT LEAST ONCE A WEEK FOR 6 MONTHS OR LONGER</p> <p>1 yes → Q7_12A 2 no → Q7_13 3 don't know/refused → Q7_13</p>	<p>(<u>DRNKHARDCDRHOWLONGTYPE30S40S</u>) Q7_12A_ITEM_2</p> <p><b>...did you drink hard cider?</b> PROMPT: AT LEAST 1X/WEEK</p> <p>1 number of months [MAX=98] 2 number of years [MAX=20] 3 don't know/refused DK/REF → Q7_13_ITEM_2</p> <p>(<u>DRNKHARDCDRHOWLONGNUM30S40S</u>) Q7_12A1_ITEM_2 ___ # of months/years</p>	<p>(<u>DRNKHARDCDRHOWMUCHTYPE30S40S</u>) Q7_12B_ITEM_2</p> <p><b>How many 12oz cans/bottles did you typically drink?</b></p> <p>1 per day 2 per week 3 don't know/ref → Q7_13_ITEM_2</p> <p>(<u>DRNKHARDCDRHOWMUCHNUM30S40S</u>) Q7_12C_ITEM_2 ___ 12 oz. bottles hard cider → Q7_13_ITEM_2</p>
<p>(<u>DRNKWINE30S40S</u>) Q7_13_ITEM_2</p> <p><b>In your 30s &amp; 40s, did you ever drink <u>wine</u>?</b> PROMPT: AT LEAST ONCE A WEEK FOR 6 MONTHS OR LONGER</p> <p>1 yes → Q7_13A_ITEM_2 2 no → Q7_14_ITEM_2 3 don't know/ref → Q7_14_ITEM_2</p>	<p>(<u>DRNKWINEHOWLONGTYPE30S40S</u>) Q7_13A_ITEM_2</p> <p><b>...did you drink wine?</b> PROMPT: AT LEAST 1X/WEEK</p> <p>1 number of months [MAX=98] 2 number of years [MAX=20] 3 don't know/refused DK/REF → Q7_14_ITEM_2</p> <p>(<u>DRNKWINEHOWLONGNUM30S40S</u>) Q7_13A1_ITEM_2 ___ # of months/years</p>	<p>(<u>DRNKWINEHOWMUCHTYPE30S40S</u>) Q7_13B_ITEM_2</p> <p><b>How many 4oz glasses did you typically drink?</b></p> <p>1 per day 2 per week 3 don't know/ref → Q7_14_ITEM_2</p> <p>(<u>DRNKWINEHOWMUCHNUM30S40S</u>) Q7_13C_ITEM_2 ___ 4 oz. glasses of wine → Q7_14_ITEM_2</p>
<p>(<u>DRNKFORTWINE30S40S</u>) Q7_14_ITEM_2</p> <p><b>In your 30s &amp; 40s, did you ever drink <u>fortified wines, such as sake, sherry, or port</u>?</b> PROMPT: AT LEAST ONCE A WEEK FOR 6 MONTHS OR LONGER</p> <p>1 yes → Q7_14A_ITEM_2 2 no → Q7_15_ITEM_2 3 don't know/ref → Q7_15_ITEM_2</p>	<p>(<u>DRNKFORTWINEHOWLONGTYPE30S40S</u>) Q7_14A_ITEM_2</p> <p><b>...did you drink fortified wine?</b> PROMPT: AT LEAST 1X/WEEK</p> <p>1 number of months [MAX=98] 2 number of years [MAX=20] 3 don't know/refused DK/REF → Q7_15_ITEM_2</p> <p>(<u>DRNKFORTWINEHOWLONGNUM30S40S</u>) Q7_14A1_ITEM_2 ___ # of months/years</p>	<p>(<u>DRNKFORTWINEHOWMUCHTYPE30S40S</u>) Q7_14B_ITEM_2</p> <p><b>How many 1oz servings did you typically drink?</b></p> <p>1 per day 2 per week 3 don't know/ref → Q7_15_ITEM_2</p> <p>(<u>DRNKFORTWINEHOWMUCHNUM30S40S</u>) Q7_14C_ITEM_2 ___ 1 oz. glasses fort. wine → Q7_15_ITEM_2</p>

**How many months or years...**

<p>(DRNKLIQUOR30S40S) Q7_15_ITEM_2 <b>In your 30s &amp; 40s, did you ever drink liquor or mixed drinks?</b> PROMPT: AT LEAST ONCE A WEEK FOR 6 MONTHS OR LONGER</p> <p>1 yes → Q7_15A_ITEM_2 2 no (see skip pattern below)     [IF NO &amp; ANSWERS Q7_11, Q7_12, Q7_13, OR Q7_14 ARE "YES" → Q8_]     [IF NO &amp; ANSWERS TO Q7_11, Q7_12, Q7_13, &amp; Q7_14 ARE "NO" → Q7_16_] ] 3 don't know/ref → Q7_16_ITEM_2</p>	<p>(DRNKLIQUORHOWLONGTYPE30S40S) Q7_15A_ITEM_2 <b>...did you drink liquor or mixed drinks?</b> PROMPT: AT LEAST 1X/WEEK</p> <p>1 number of months [MAX=98] 2 number of years [MAX=20] 3 don't know/refused     DK/REF → Q7_16_ITEM_2</p> <p>(DRNKLIQUORHOWLONGNUM30S40S) Q7_15A1_ITEM_2     ___ # of months/years</p>	<p>(DRNKLIQUORHOWMUCHTYPE30S40S) Q7_15B_ITEM_2 <b>How many 1oz shots did you typically drink?</b></p> <p>1 per day 2 per week 3 don't know/ref → Q7_16_ITEM_2</p> <p>(DRNKLIQUORHOWMUCHNUM30S40S) Q7_15C_ITEM_2     ___ 1 oz. shots of liquor     → Q7_16_ITEM_2</p>
<p>Q7_16_ITEM_2 [IF TOTAL ALCOHOL &lt; 1/WK → Q7_16_ITEM_2] [IF ≥ 1/WK IF (AGE &gt; 49) → Q7_0_ITEM_3 → Q8_] [IF APPLICABLE (IF THE TOTAL NUMBER OF DRINKS REPORTED BY IN Q7_11 - Q7_15B ADDS TO LESS THAN ONE ALCOHOLIC BEVERAGE A WEEK FOR 6 MONTHS OR LONGER) PROBE FOR CLARIFICATION] → <b>You said that you drank alcoholic beverages at least once a week in your 30s and 40s, although your consumption of specific beverages was less than once a week. So, thinking about your <u>total</u> consumption of alcoholic beverages in your 40s...</b></p>	<p>(DRNKCORRECTEDHOWLONGTYPE30S40S) Q7_16_ITEM_2 <b>...in total did you drink at least one alcoholic beverage a week</b> INCLUDE ALL TYPES—BEER, WINE, HARD LIQUOR. [R SHOULD ONLY INCLUDE PERIODS DURING WHICH THEY CONSUMED AT LEAST ONE DRINK PER WEEK FOR 6 MONTHS OR LONGER—THEY SHOULD NOT AVERAGE IN PERIODS DURING WHICH THEY DRANK LESS THAN THE MINIMUM USE PERIOD]?</p> <p>1 number of months [MAX=98] 2 number of years [MAX=20] 3 don't know/refused</p> <p>(DRNKCORRECTEDHOWLONGNUM30S40S) Q7_16_A_ITEM_2     ___ # of months/years     [DK/REF = 99]</p>	<p>(DRNKCORRECTDHOWMUCHNUM30S40S) Q7_16A_ITEM_2 <b>How many alcoholic beverages a week did you typically drink during the combined periods during your 30s and 40s when you consumed at least 1 drink a week for 6 months or longer [ PROMPT: HOW MANY 4 OZ. GLASSES OF WINE, OR 12 OZ. CANS OR BOTTLES OF BEER, HARD CIDER, HARD LEMONADE OR WINE COOLERS, OR 1 OZ. SERVINGS OF FORTIFIED WINE OR LIQUOR DID YOU CONSUME? [IVER: IF 2 OR MORE, GO BACK THROUGH INDIVIDUAL ALCOHOLS; SEE QxQ]</b></p> <p>    ___ # of alcoholic beverages/week     [DK/REF = 99]</p>

[IF AGE < 50 → Q\_8]

Q7\_0\_ITEM\_3 **Now I will ask you to think about alcohol consumption since you turned 50.**

(DRINKALCOHOLBEV50S)

Q7\_1\_ITEM\_3 **Since turning 50, did you ever drink any alcoholic beverages at least once a week for 6 months or longer?** PROMPT: ALCOHOLIC BEVERAGES INCLUDE BEER, HARD CIDER, WINE, SAKE LIQUOR, SPIRITS, MIXED DRINKS, COCKTAILS, WINE COOLERS, AND HARD LEMONADE.

1 yes → Q7\_11  
2 no → Q\_8  
3 don't know/refused → Q\_8

(50s)

**Howmany months or years...**

<p>(DRNKBEER50S) Q7_11_ITEM_3 <i>Now I will ask about specific beverages you may have consumed.</i> <i>Since turning 50, did you ever drink beer at least once a week for 6 months or longer?</i> 1 yes → Q7_11A_ITEM_3 2 no → Q7_12_ITEM_3 3 don't know/ref → Q7_12_ITEM_3</p>	<p>(DRNKBEERHOWLONGTYPE50S) Q7_11A_ITEM_3 <i>...did you drink beer?</i> PROMPT: AT LEAST 1X/WEEK 1 number of months [MAX=98] 2 number of years [MAX=20] 3 don't know/refused DK/REF → Q7_12_ITEM_3 (DRNKBEERHOWLONGNUM50S) Q7_11A1_ITEM_3 ___ number of years</p>	<p>(DRNKBEERHOWMUCHTYPE50S) Q7_11B_ITEM_3 <i>How many 12oz cans/bottles did you typically drink?</i> 1 per day 2 per week 3 don't know/ref → Q7_12_ITEM_3 (DRNKBEERHOWMUCHNUM50S) Q7_11C_ITEM_3 ___ 12 oz. cans/bottles beer → Q 7_12_ITEM_3</p>
<p>(DRNKHARDCDR50S) Q7_12_ITEM_3 <i>Since turning 50, did you ever drink hard cider?</i> PROMPT: AT LEAST ONCE A WEEK FOR 6 MONTHS OR LONGER 1 yes → Q7_12A_ITEM_3 2 no → Q7_13_ITEM_3 3 don't know/ref → Q7_13_ITEM_3</p>	<p>(DRNKHARDCDRHOWLONGTYPE50S) Q7_12A_ITEM_3 <i>...did you drink hard cider?</i> PROMPT: AT LEAST 1X/WEEK 1 number of months [MAX=98] 2 number of years [MAX=20] 3 don't know/refused DK/REF → Q7_13_ITEM_3 (DRNKHARDCDRHOWLONGNUM50S) Q7_12A1_ITEM_3 ___ number of years</p>	<p>(DRNKHARDCDRHOWMUCHTYPE50S) Q7_12B_ITEM_3 <i>How many 12oz cans/bottles did you typically drink?</i> 1 per day 2 per week 3 don't know/ref → Q7_13_ITEM_3 (DRNKHARDCDRHOWMUCHNUM50S) Q7_12C_ITEM_3 ___ 12 oz. bottles hd cider → Q 7_13_ITEM_3</p>
<p>(DRNKWINE50S) Q7_13 <i>Since turning 50, did you ever drink wine?</i> PROMPT: AT LEAST ONCE A WEEK FOR 6 MONTHS OR LONGER 1 yes → Q7_13A_ITEM_3 2 no → Q7_14_ITEM_3 3 don't know/ref → Q7_14_ITEM_3</p>	<p>(DRNKWINEHOWLONGTYPE50S) Q7_13A_ITEM_3 <i>...did you drink wine?</i> PROMPT: AT LEAST 1X/WEEK 1 number of months [MAX=98] 2 number of years [MAX=20] 3 don't know/refused DK/REF → Q7_14_ITEM_3 (DRNKWINEHOWLONGNUM50S) Q7_13A1_ITEM_3 ___ number of years</p>	<p>(DRNKWINEHOWMUCHTYPE50S) Q7_13B_ITEM_3 <i>How many 4oz glasses did you typically drink?</i> 1 per day 2 per week 3 don't know/ref → Q7_14_ITEM_3 (DRNKWINEHOWMUCHNUM50S) Q7_13C_ITEM_3 ___ 4 oz. glasses of wine → Q 7_14_ITEM_3</p>
<p>(DRNKFORTWINE50S) Q7_14 <i>Since turning 50, did you ever drink fortified wines, such as sake, sherry, or port?</i> PROMPT: AT LEAST ONCE A WEEK FOR 6 MONTHS OR LONGER 1 yes → Q7_14A_ITEM_3 2 no → Q7_15_ITEM_3 3 don't know/ref → Q7_15_ITEM_3</p>	<p>(DRNKFORTWINEHOWLONGTYPE50S) Q7_14A_ITEM_3 <i>...did you drink fortified wines?</i> PROMPT: AT LEAST 1X/WEEK 1 number of months [MAX=98] 2 number of years [MAX=20] 3 don't know/refused DK/REF → Q7_15_ITEM_3 (DRNKFORTWINEHOWLONGNUM50S) Q7_14A1_ITEM_3 ___ number of years</p>	<p>(DRNKFORTWINEHOWMUCHTYPE50S) Q7_14B_ITEM_3 <i>How many 1oz servings did you typically drink?</i> 1 per day 2 per week 3 don't know/ref → Q7_15_ITEM_3 (DRNKFORTWINEHOWMUCHNUM50S) Q7_14C_ITEM_3 ___ 1 oz. glasses fort. wine [GO TO → Q 7_15_ITEM_3]</p>

**How many months or years...**

<p>(DRNKLIQUOR50S) Q7_15_ITEM_3 <b>Since turning 50, did you ever drink liquor or mixed drinks?</b> PROMPT: AT LEAST ONCE A WEEK FOR 6 MONTHS OR LONGER</p> <p>1 yes → Q7_15A 2 no (see skip pattern below) AND ANSWERS Q7_11, Q7_12, Q7_13, OR Q7_14 ARE "YES" → Q8_ AND ANSWERS TO Q7_11, Q7_12, Q7_13, &amp; Q7_14 ARE "NO" → Q7_16_ 3 don't know/refused → Q7_16</p>	<p>(DRNKLIQUORHOWLONGTYPE50S) <b>...did you drink liquor or mixed drinks?</b> PROMPT: AT LEAST 1X/WEEK Q7_15A_ITEM_3</p> <p>1 number of months [MAX=98] 2 number of years [MAX=20] 3 don't know/refused DK/REF → Q7_16_ITEM_3</p> <p>(DRNKLIQUORHOWLONGNUM50S) Q7_15A1_ITEM_3 __ __ number of years</p>	<p>(DRNKLIQUORHOWMUCHTYPE50S) <b>How many 1oz shots did you typically drink?</b> Q7_15B_ITEM_3</p> <p>1 per day 2 per week 3 don't know/refused</p> <p>(DRNKLIQUORHOWMUCHNUM50S) Q7_15C_ITEM_3 __ __ 1 oz. shots of liquor [GO TO → Q 7_16_ITEM_3]</p>
<p>Q7_16_ITEM_3 [IF TTL ALCHL&lt;1/WK → Q7_16_ITEM_2] [IF &gt;= 1/WK IF (AGE &gt;49) → Q7_0_ITEM_3 → Q8_ [IF APPLICABLE (IF THE TOTAL NUMBER OF DRINKS REPORTED BY IN Q7_11 - Q7_15B ADDS TO LESS THAN ONE ALCOHOLIC BEVERAGE A WEEK FOR 6 MONTHS OR LONGER) PROBE FOR CLARIFICATION] → <b>You said that you drank alcoholic beverages at least once a week since turning 50, although your consumption of specific beverages was less than once a week. So, thinking about your total consumption of alcoholic beverages in your 50s...</b></p>	<p>(DRNKCORRECTEDHOWLONGTYPE50S) <b>...in total did you drink at least once alcoholic beverage a week</b> [INCLUDE ALL TYPES—BEER, WINE, HARD LIQUOR. R SHOULD ONLY INCLUDE PERIODS DURING WHICH THEY CONSUMED AT LEAST ONE DRINK PER WEEK FOR 6 MONTHS OR LONGER—THEY SHOULD NOT AVERAGE IN PERIODS DURING WHICH THEY DRANK LESS THAN THE MINIMUM USE PERIOD] Q7_16_ITEM_3</p> <p>1 number of months [MAX=98] 2 number of years [MAX=20] 3 don't know/refused DK/REF → Q8_</p> <p>(DRNKCORRECTEDHOWLONGNUM50S) Q7_16_A_ITEM_3 __ __ number of years</p>	<p>(DRNKCORRECTDHOWMUCHNUM50S) Q7_16A_ITEM_3 <b>How many alcoholic beverages a week did you typically drink during the combined periods since turning 50 when you consumed at least 1 drink a week for 6 months or longer [ those years?</b> PROMPT: HOW MANY 4 OZ. GLASSES OF WINE, OR 12 OZ. CANS OR BOTTLES OF BEER, HARD CIDER, HARD LEMONADE, OR WINE COOLERS, OR 1 OZ. SERVINGS OF FORTIFIED WINE OR LIQUOR (SPIRITS) DID YOU CONSUME?] [INTERVIEWER: IF 2 OR MORE, GO BACK THROUGH INDIVIDUAL ALCOHOLS; SEE QxQ Q7_16A __ __ # of alcoholic bev/wk [MAX=98] [DK/REF = 99]</p>



**SECTION 8: SMOKING**

Q8\_ *Now I'd like to ask you a few questions about your use of tobacco.*

(SMOKECIGONEPERDAYEVER)

Q8\_1 *Have you ever smoked at least one cigarette a day for 3 months or longer?*

- 1 yes → Q8\_11
- 2 no → Q8\_2
- 3 don't know/refused → Q8\_2

(SMOKECIGSTARTWHENTYPE)

Q8\_11 **[IF YES]** *When did you first start smoking at least one cigarette a day?* [ANSWER AS EITHER]

- Q8\_11A 1 age at first use: \_\_\_\_ (SMOKECIGSTARTAGE) or
- Q8\_11B 2 year of first use: \_\_\_\_ (SMOKECIGSTARTYEAR) or
- Q8\_11C 3 I first smoked \_\_\_\_ years ago (SMOKECIGSTARTYEARSAGO)
- 4 don't know/refused

(SMOKECIGPERDAYNUM)

Q8\_12 *During periods when you smoked regularly, how many cigarettes did you typically smoke in a day?*

PROMPT: "REGULARLY" MEANS AT LEAST ONCE CIGARETTE A DAY.

\_\_\_\_ cigarettes per day [DON'T KNOW/REFUSED = 99]

(SMOKECIGPERDAYTWOYEARSAGO)

Q8\_13 **[IF APPLICABLE (IF STARTED SMOKING AT LEAST 1 CIGARETTE/DAY LESS THAN 2 YEARS AGO.)]** *About two years ago, were you still smoking at least one cigarette a day?*

- 1 yes
- 2 no
- 3 don't know/refused

(SMOKECIGCURRENTLY)

Q8\_14 *Do you currently smoke at least one cigarette a day?*

- 1 yes → Q8\_15
- 2 no → Q8\_141
- 3 don't know/refused → Q8\_15

(SMOKECIGSTOPWHENTYPE)

Q8\_141 **[IF NO]** *When did you permanently stop smoking at least one cigarette a day?* [ANSWER AS EITHER]

- Q8\_141A 1 age when stopped: \_\_\_\_ (SMOKECIGSTOPAGE) or
- Q8\_141B 2 year when stopped: \_\_\_\_ (SMOKECIGSTOPYEAR) or
- Q8\_141C 3 I stopped smoking \_\_\_\_ years ago (SMOKECIGSTOPYEARSAGO)
- 4 don't know/refused

(SMOKECIGHOWLONGTOTALTYPE)

Q8\_15 *How many months or years in total did you smoke at least one cigarette per day for 3 months or longer? (If you have stopped and restarted at least once, count only the time when you were smoking.)*

- 1 number of months → Q8\_15A
- 2 number of years → Q8\_15A
- 3 don't know/refused → Q8\_2

(SMOKECIGHOWLONGTOTALNUM)

Q8\_15A \_\_\_\_\_ number of months/years smoked regularly

(SMOKECIGARPIPEONEPERMOEVER)

Q8\_2 **Have you ever smoked at least one cigar or one pipe bowl per month for at least 3 months?**

- 1 yes → Q8\_21
- 2 no → SECTION 9
- 3 don't know/refused → SECTION 9

(SMOKECIGARPIPEBOTHTYPE)

Q8\_21 **[IF YES] Did you smoke cigars or pipes or both?**

- 1 cigars only → Q8\_22
- 2 pipes only → Q8\_27
- 3 both → Q8\_22
- 4 don't know/refused → SECTION 9

(SMOKECIGARSTARTWHENTYPE)

Q8\_22 **[ONLY IF Q8\_21 = "1" (CIGARS)" OR "3 (BOTH)" ]**

**When did you first start smoking at least one cigar a month?** [ANSWER AS EITHER]

- Q8\_22A 1 age at first use: \_\_\_\_\_ (SMOKECIGARSTARTAGE) or
- Q8\_22B 2 year of first use: \_\_\_\_\_ (SMOKECIGARSTARTYEAR) or
- Q8\_22C 3 I first smoked \_\_\_\_\_ years ago (SMOKECIGARSTARTYEARSAGO)
- 4 don't know/refused

(SMOKECIGARPERMONUM)

Q8\_23 **During periods when you smoked regularly, how many cigars did you typically smoke in a month?**

PROMPT: "REGULARLY" MEANS AT LEAST ONE CIGAR A MONTH.

\_\_\_\_\_ cigars per month [DON'T KNOW/REFUSED = 999]

(SMOKECIGARONEPERMOTWOYRSAGO)

Q8\_24 **[IF APPLICABLE (IF STARTED SMOKING AT LEAST 1 CIGAR/MONTH MORE THAN 2 YEARS AGO) . ] Two years ago, were you still smoking at least one cigar a month?**

- 1 yes
- 2 no
- 3 don't know/refused

(SMOKECIGARCURRENTLY)

Q8\_25 **Do you still smoke at least one cigar a month?**

- 1 yes → Q8\_26
- 2 no → Q8\_251
- 3 don't know/refused → Q8\_26

(SMOKECIGARSTOPWHENTYPE)

Q8\_251 **[IF NO] When did you permanently stop smoking at least one cigar a month?** [ANSWER AS EITHER]

- Q8\_251A 1 age when stopped: \_\_\_\_\_ (SMOKECIGARSTOPAGE) or
- Q8\_251B 2 year when stopped: \_\_\_\_\_ (SMOKECIGARSTOPYEAR) or
- Q8\_251C 3 I stopped smoking \_\_\_\_\_ years ago (SMOKECIGARSTOPYEARSAGO)
- 4 don't know/refused

(SMOKECIGARHOWLONGTOTALTYPE) (SMOKECIGARHOWLONGTOTALNUM)

Q8\_26 **How many months or years in total did you smoke at least one cigar a month? (If you have stopped and restarted at least once, count only the time when you were smoking.)**

\_\_\_ total number of months or

\_\_\_ total number of years

[DON'T KNOW/REFUSED = 99]

[IF ANSWER TO Q8\_21 = 3 (BOTH CIGARS AND PIPES) → Q8\_27]

[IF ANSWER TO Q8\_21 = 1 (CIGARS ONLY) → Q8\_28]

(SMOKEPIPESTARTWHENTYPE)

Q8\_27 **When did you first start smoking at least one pipe bowl a month?** [ANSWER AS EITHER]

Q8\_27A 1 age at first use: \_\_\_ (SMOKEPIPESTARTAGE) or

Q8\_27B 2 year of first use: \_\_\_ (SMOKEPIPESTARTYEAR) or

Q8\_27C 3 I first smoked \_\_\_ years ago (SMOKEPIPESTARTYEARSAGO)

4 don't know/refused

(SMOKEPIPEPERMONUM)

Q8\_28 **During periods when you smoked regularly, how many pipe bowls did you typically smoke in a month?** PROMPT: "REGULARLY" MEANS AT LEAST ONE PIPE A MONTH.

\_\_\_ pipes per month [DON'T KNOW/REFUSED = 999]

(SMOKEPIPEONEPERMOTWOYRSAGO)

Q8\_29 [IF APPLICABLE (IF R STARTED SMOKING AT LEAST 1 PIPE/MO MORE THAN 2 YRS AGO) .] **Two years ago, were you still smoking at least one pipe bowl a month?**

1 yes

2 no

3 don't know/refused

(SMOKEPIPECURRENTLY)

Q8\_30 **Do you still smoke at least one pipe bowl a month?**

1 yes

2 no

3 don't know/refused

(SMOKEPIPESTOPWHENTYPE)

Q8\_301 [IF NO] **When did you permanently stop smoking at least one pipe bowl a month?** [ANSWER AS EITHER]

Q8\_301A 1 age when stopped: \_\_\_ (SMOKEPIPESTOPAGE)

Q8\_301B 2 year when stopped: \_\_\_ (SMOKEPIPESTOPYEAR)

Q8\_301C 3 I stopped smoking \_\_\_ years ago (SMOKEPIPESTOPYEARSAGO)

4 don't know/refused

(SMOKEPIPEHOWLONGTOTALTYPE) (SMOKEPIPEHOWLONGTOTALNUM)

Q8\_31 **How many months or years in total did you smoke at least one pipe bowl a month? (If you have stopped and restarted at least once, count only the time when you were smoking.)** [ANSWER AS EITHER]

\_\_\_ total number of months [1 – 12, DON'T KNOW/REF = 13]

\_\_\_ total number of years [1 – 98, DON'T KNOW/REF = 99]

**SECTION 9: HEIGHT AND WEIGHT**

Q9\_        *The next set of questions are to gather some background information from you.*

Q91        **About how tall are you, without your shoes on?** [ANSWER AS EITHER]

Q91        \_\_\_\_\_ feet [3 – 7, DK/REF = 9] (HEIGHTFEET)        *and*  
Q91INCH    \_\_\_\_\_ inches [0 – 11, DK/REF = 99] (HEIGHTINCHES)        *or*

Q91CENT    \_\_\_\_\_ centimeters [50 – 250] (HEIGHTCENTIMETERS)  
[CENTI = 8 → Q91CENT]  
[→ Q92]

Q92        **How much did you weigh about two years ago?** [ANSWER AS EITHER]

Q92        \_\_\_\_\_ pounds [50 – 997, DK/REF = 999] (WEIGHTTWOYRSAGOPOUNDS)        *or*

Q92KILOS    \_\_\_\_\_ kilos (WEIGHTTWOYRSAGOKILOGRAMS)  
[KILOS = 998 → Q92KILOS]  
[IF < > 998 → Q93]

Q93        **How much did you weigh when you were about 20 years old?** [ANSWER AS EITHER]

Q93        \_\_\_\_\_ pounds (WEIGHTATAGE20POUNDS)        *or*

Q93KILOS    \_\_\_\_\_ kilos [DON'T KNOW/REF = 99] (WEIGHTATAGE20KILOGRAMS)  
[KILOS = 998 → Q92KILOS]

**SECTION 10: DEMOGRAPHICS AND BACKGROUND INFORMATION**

(EDUCATIONLEVEL)

Q10\_1 **What is the highest level of education that you completed?**

- 1 less than 8 years
- 2 8 to 11 years
- 3 high school graduate
- 4 vocational or technical school
- 5 some college or university
- 6 bachelor’s degree
- 7 graduate degree
- 8 don’t know/refused

Q10\_2 **Now I’d like to ask you about the country of birth, race, and ethnicity for you, your parents, and your grandparents.**

PROMPT: SCIENTISTS HAVE FOUND THAT DISEASES OFTEN OCCUR IN DIFFERENT PATTERNS FOR PEOPLE OF DIFFERENT BACKGROUNDS. WE WOULD LIKE TO KNOW IF THIS IS TRUE FOR COLORECTAL CANCER.

Q10\_21 **In what city and state were you born?**

\_\_\_\_\_ (BIRTHCITY)

city of birth  
[DON'T KNOW/REFUSED = BLANK]

\_\_\_\_\_ (BIRTHSTATECOUNTRY)  
State/ or province/country of birth ENTER (US), P (Canada) OR COUNTRY IN STATE FIELD  
\_\_\_\_\_ [DON'T KNOW/REFUSED = BLANK]

(LIVEDINUSHOWLONGTYPE) (LIVEDINUSHOWLONGNUM)

Q10\_211 **How many months or years have you lived in the U.S.? [ANSWER AS EITHER]**

- 1 all my life
- Q10\_211A 2 \_\_\_ \_\_\_ \_\_\_ number of months
- Q10\_211B 3 \_\_\_ \_\_\_ \_\_\_ number of years
- 4 don’t know/refused
- 5 Never lived in U.S.

**RACE/ETHNICITY** (ETHNIC)

Q\_ETHNIC **Do you consider yourself to be Hispanic or Latino? [SELECT ONE.]**

- 1 yes (Hispanic or Latino) PROMPT: A PERSON OF MEXICAN, PUERTO RICAN, CUBAN, SOUTH OR CENTRAL AMERICAN, OR OTHER SPANISH CULTURE OR ORIGIN, REGARDLESS OF RACE. THE TERM, “SPANISH ORIGIN,” CAN BE USED IN ADDITION TO “HISPANIC OR LATINO.” DOES NOT INCLUDE PERSONS OF PORTUGUESE OR BRAZILIAN DESCENT.
- 2 no (Not Hispanic or Latino)
- 9 don't know/refused

(RACE1-7)

Q10\_22

***What is your race?***

[SELECT ALL THAT APPLY]

[RACE TO BE CODED PER LIST BELOW]

- 1 Caucasian/White
- 2 African American/Black (except African; except Caribbean)
- 3 [RETIRED VALUE]
- 4 Japanese (includes Okinawan)
- 5 Chinese
- 6 Filipino, Malay, Indonesian
- 7 Korean
- 8 Southeast Asian (except Chinese) (such as Vietnamese, Laotian, Thai, Hmong, Kampuchean)
- 9 South Asian (such as Indian, Pakistani, Sri Lankan)
- 10 Native American, Inuit, Aleutian, First Nations Person
- 11 Polynesian (such as Hawaiian, Maori, Samoan, Tongan, Tahitian, Cook Islander)
- 12 Micronesian (such as Chamorran)
- 13 Australian Aboriginal
- 14 Melanesian (such as Fijian, New Guinean)
- 15 Caribbean Black (such as Jamaican, Trinidadian, Tabogonian)
- 16 Central/South American (such as Costa Rica, Salvadorian, Colombian, Brazilian)
- 17 Black African
- 18 North African (such as Egyptian, Algerian, Moroccan)
- 19 Middle Eastern (such as Iranian, Lebanese, Kuwaiti, Saudi)
- 21 Other (RACEOTH1-7)
- 22 No more answers
- 23 Unknown/don't know/refused

(JEWISHDESCENT)

Q10\_23

[IF NOT ADOPTED] ***Are you, your parents or grandparents of Jewish descent?***

[IF ADOPTED] ***Are you, your birth-parents or birth-grandparents of Jewish descent?***

PROMPT: RELIGION AND ETHNICITY SOMETIMES AFFECT DISEASE RISK. SCIENTISTS HAVE FOUND THAT SOME GENETIC TRAITS ARE SOMETIMES MORE OR LESS COMMON AMONG JEWISH PEOPLE OF DIFFERENT ETHNIC BACKGROUNDS. WE WOULD LIKE TO KNOW IF THIS IS TRUE FOR GENES ASSOCIATED WITH COLORECTAL CANCER.

- 1 yes → Q10\_231A
- 2 no → Q10\_2A1
- 3 don't know/refused → Q10\_2A1

(JEWISHDESCENTSPECIFYWHOM1-7)

Q10\_231A

[IF YES, PLEASE SPECIFY] ***Whom?***

PROMPT: YOU, YOUR PARENTS OR GRANDPARENTS

- 1 all of us *or*
- 2 self
- 3 mother
- 4 father
- 5 mother's mother
- 6 mother's father
- 7 father's mother
- 8 father's father
- 9 no more answers
- 10 don't know/refused

(JEWISHDESCENTTYPE)

Q10\_232 [IF YES (OF JEWISH DECENT) , PLEASE SPECIFY] *Were they...?*

PROMPT: YOU, YOUR PARENTS OR GRANDPARENTS

PROBE: THE ANCESTORS OF ASHKENAZI JEWS ARE OFTEN ORIGINALLY FROM EASTERN EUROPEAN COUNTRIES.

- 1 Ashkenazic
- 2 Sephardic
- 3 both [if so, identify who specifically was Ashkenazi, who was Sephardic: (JEWISHTYPEOTHBOTH)
- 4 other (specify): \_\_\_\_\_ (JEWISHTYPEOTH)
- 5 don't know/refused

<i>In what state or country was your mother born?</i>	( <u>BIRTHPLACE</u> ) Q10_2A1  [COUNTRY OF BIRTH. SEE APPENDIX FOR CODES]	( <u>RACE1-7</u> ) ( <u>RACEOTH1-7</u> ) Q10_2A2 <b>What is [was] her race?</b> [RECORD AS MANY AS APPLY SEE Q10_22 FOR CODES]
<i>In what state or country was your father born?</i>	( <u>BIRTHPLACE</u> ) Q10_2B1  [COUNTRY OF BIRTH. SEE APPENDIX FOR CODES]	( <u>RACE1-7</u> ) ( <u>RACEOTH1-7</u> ) Q10_2B2 <b>What is [was] his race?</b> [RECORD AS MANY AS APPLY SEE Q10_22 FOR CODES]
<i>In what state or country was your mother's mother born?</i>	( <u>BIRTHPLACE</u> ) Q10_2C1  [COUNTRY OF BIRTH. SEE APPENDIX FOR CODES]	( <u>RACE1-7</u> ) ( <u>RACEOTH1-7</u> ) Q10_2C2 <b>What is [was] her race?</b> [RECORD AS MANY AS APPLY SEE Q10_22 FOR CODES]
<i>In what state or country was your mother's father born?</i>	( <u>BIRTHPLACE</u> ) Q10_2D1 [COUNTRY OF BIRTH. SEE APPENDIX FOR CODES]	( <u>RACE1-7</u> ) ( <u>RACEOTH1-7</u> ) Q10_2D2 <b>What is [was] his race?</b> [RECORD AS MANY AS APPLY SEE Q10_22 FOR CODES]
<i>In what state or country was your father's mother born?</i>	( <u>BIRTHPLACE</u> ) Q10_2E1  [COUNTRY OF BIRTH. SEE APPENDIX FOR CODES]	( <u>RACE1-7</u> ) ( <u>RACEOTH1-7</u> ) Q10_2E2 <b>What is [was] her race?</b> [RECORD AS MANY AS APPLY SEE Q10_22 FOR CODES]
<i>In what state or country was your father's father born?</i>	( <u>BIRTHPLACE</u> ) Q10_2F1  [COUNTRY OF BIRTH. SEE APPENDIX FOR CODES]	( <u>RACE1-7</u> ) ( <u>RACEOTH1-7</u> ) Q10_2F2 <b>What is [was] his race?</b> [RECORD AS MANY AS APPLY SEE Q10_22 FOR CODES]

(PARTICIPATEGENETICSTUDIES)

Q10\_3 ***Have you or your family participated in other research studies of familial cancer, or ever attended a genetic counseling session relating to cancer?***

- 1 yes → Q10\_31
- 2 no → Q10\_4
- 3 don't know/refused → Q10\_31

(GENETICSTUDYCLINICNAME)

Q10\_31 **[IF YES] please specify study or session:** \_\_\_\_\_

(ANNUALHOUSEHOLDINCOME)

Q10\_4 ***About two years ago, which of the following best describes your total annual household income from all sources before taxes?***

PROMPT: SCIENTISTS HAVE FOUND THAT DISEASES ARE SOMETIMES MORE OR LESS PREVALENT FOR PEOPLE OF DIFFERENT INCOME LEVELS. WE WOULD LIKE TO KNOW IF THIS IS TRUE FOR COLORECTAL CANCER.

- 1 less than \$15,000
- 2 between \$15 – \$29,000
- 3 between \$30 – \$44,000
- 4 between \$45 – \$69,000
- 5 \$70,000 or more
- 6 don't know
- 7 refused



**SECTION 11: CONTACT INFORMATION**

Q11\_1 *As part of this study we hope to contact other family members to talk about their history and experiences in the same way as we have with you today. We will ask permission to invite some of your family members to participate in our study. If they join, we will also ask them for permission to invite some of their family members. We can go about this in two ways. You can have us approach them by sending them a letter if you think they would be willing to hear from us directly or, if you prefer, you can approach your relatives first and ask them if they are interested and then get back to us.*

(CONTACTPERMISSION)  
 Q11\_MO  
**May we have permission to contact your mother?**  
 1 yes → Q11\_MO1  
 2 no → Q11\_FA  
 3 don't know/refused → Q11\_FA

Q11_MO1	(FULLNAME)
Name	
Q11_MO2	(STREETADDRESS1)
Address	
Q11_MOA2A (STREETADDRESS2) Q11_MO3-6 (CITY) (STATE) (ZIPCODE)	
Address2	City State Country Zip
Q11_MO7-9 (AREACODE) (PHONEEXCHANGE) (PHONELASTFOUR)	
Phone Number	

(CONTACTPERMISSION)  
 Q11\_FA  
**May we have permission to contact your father?**  
 1 yes → Q11\_FA1  
 2 no → Q11\_SB (NEXT)  
 3 don't know/ref → Q11\_SB (NEXT)

Q11_FA1	(FULLNAME)
Name	
Q11_FA2	(STREETADDRESS1)
Address	
Q11_FA2A (STREETADDRESS2) Q11_FA3-6 (CITY) (STATE) (ZIPCODE)	
Address2	City State Country Zip
Q11_FA7-9 (AREACODE) (PHONEEXCHANGE) (PHONELASTFOUR)	
Phone Number	

(CONTACTPERMISSIONSIBLINGS)  
 Q11\_SB  
**May we have permission to contact your (full or half) sister(s)?**  
 1 yes → Q11\_SB1  
 2 no → Q11\_SB (NEXT)  
 3 don't know/ref → Q11\_SB (NEXT)

Q11_SB1	(FULLNAME)
Name	
Q11_SB2	(STREETADDRESS1)
Address	
Q11_SB2A (STREETADDRESS2) Q11_SB3-6 (CITY) (STATE) (ZIPCODE)	
Address2	City State Country Zip
Q11_SB7-9 (AREACODE) (PHONEEXCHANGE) (PHONELASTFOUR)	
Phone Number	

(CONTACTPERMISSIONSIBLINGS)  
 Q11\_SB  
**May we have permission to contact your (full or half) brother(s)?**  
 1 yes → Q11\_SB1  
 2 no → Q11\_KD (NEXT)  
 3 don't know/ref → Q11\_KD (NEXT)

Q11_SB11	(FULLNAME)
Name	
Q11_SB12	(STREETADDRESS1)
Address	
Q11SB12A (STREETADDRESS2) Q11_SB13-16 (CITY) (STATE) (ZIPCODE)	
Address2	City State Country Zip
Q11_SB17-19 (AREACODE) (PHONEEXCHANGE) (PHONELASTFOUR)	
Phone Number	

(CONTACTPERMISSIONCHILDREN)

Q11\_KD

**May we have permission to contact your daughter(s)?**

- 1 yes → Q11\_KD1
- 2 no → Q11\_KD (NEXT)
- 3 don't know/ref → Q11\_KD (NEXT)

Q11_KD11	(FULLNAME)
Name	
Q11_KD12	(STREETADDRESS1)
Address	
Q11KD12A (STREETADDRESS2) Q11_KD13-16 (CITY) (STATE) (ZIPCODE)	
Address2	
Q11_KD17-19	(AREACODE) (PHONEEXCHANGE) (PHONELASTFOUR)
City State Country Zip	
Phone Number	

(CONTACTPERMISSIONCHILDREN)

Q11\_KD

**May we have permission to contact your son(s)?**

- 1 yes
- 2 no → Q11\_NC \_
- 3 don't know/ref → Q11\_2\_

Q11_KD11	(FULLNAME)
Name	
Q11_KD12	(STREETADDRESS1)
Address	
Q11KD12A (STREETADDRESS2) Q11_KD13-16 (CITY) (STATE) (ZIPCODE)	
Address2	
Q11_KD17-19	(AREACODE) (PHONEEXCHANGE) (PHONELASTFOUR)
City State Country Zip	
Phone Number	

Q11\_NC [ONLY SAY IF "NO" WAS ANSWERED ON ANY Q11\_1 QUESTION]

*Thank you for this information. We would like you to be aware that sometimes family members hear about our study from other family members, and then contact us directly to participate. When this happens, we will allow that family member to participate in the study.*

Q11\_SP [ONLY ASK FOR CONTACT INFO IF PERSON REPORTS BEING MARRIED IN Q1\_5, (MARITALSTATUS) ]

**May we have the name and date of birth of your spouse?**

- 1 yes → Q11\_SP1
- 2 no → Q11\_MO
- 3 don't know/refused → Q11\_MO

Q11\_SP1 **What is your spouse's full name?**

[DON'T KNOW/REFUSED = DK 1ST, DK LAST, DK NAME]  
[IF R DOES NOT KNOW PART OF NAME, USE CODES PROVIDED ABOVE (EX: DK 1ST SMITH)]

Q11\_SP2 **What is your spouse's date of birth?**

- Q11\_3 month \_\_\_\_ [DON'T KNOW/REF = 13] (BIRTHMONTH)
- Q11\_3DD day \_\_\_\_ [DON'T KNOW/REF = 32] (BIRTHDAY)
- Q11\_3YY year \_\_\_\_ [DON'T KNOW/REF = 9999] (BIRTHYEAR)

Q11\_2\_

***In case we need to contact you in the future and you have moved, may we have the name, address, and phone number of someone who is not living with you to whom we might write or call for your new address?***

***Name of relative or friend:***

(LOSETOUCHCONTACTNAME)

Q11\_2A \_\_\_\_\_

NAME

[DON'T KNOW/REFUSED = DK 1ST, DK LAST, DK NAME]

[IF R DOES NOT KNOW PART OF RELATIVE'S NAME, USE CODES PROVIDED ABOVE (EX: DK 1ST SMITH)]

Q11\_2A1 ***Relationship:*** \_\_\_\_\_

[EX: SISTER, FRIEND]

***His or her address:***

(LOSETOUCHCONTACTADDRESS1)

Q11\_2B \_\_\_\_\_

ADDRESS1

(LOSETOUCHCONTACTADDRESS2)

Q11\_2C \_\_\_\_\_

ADDRESS2

(LOSETOUCHCONTACTCITY)

Q11\_2D \_\_\_\_\_

CITY

(LOSETOUCHCONTACTSTATE)

Q11\_2E \_\_\_\_\_

STATE

(LOSETOUCHCONTACTZIP)

Q11\_2F \_\_\_\_\_

ZIP

(LOSETOUCHCONTACTAREACODE) (LOSETOUCHCONTACTEXCHANGE) (LOSETOUCHCONTACTLASTPHONE)

***Phone Number:***

Q11\_2G

Q11\_2H

Q11\_2I

( \_ \_ \_ ) \_ \_ \_ - \_ \_ \_ \_

[DON'T KNOW/REFUSED = 999-999-9999]

**It would be very helpful if you could tell me your Social Security number. It would be kept strictly confidential and would be used only to identify you in relation to this research. Would you be willing to provide it?**

(SSNPT1)

(SSNPT2)

(SSNPT3)

Q11\_3

Q11\_3A

Q11\_3B

\_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

[DON'T KNOW/REF = 000-00-000]