PROGRAMA ESCUCHAR
BIOMARKERS FIRST FOLLOW-UP QUESTIONNAIRE INDIVIDUAL-LEVEL SURVEY
BM001
1. Blood Pressure [IWER: Were you able to take the R’s blood pressure measurement?]
   1 Yes
   2 No

IF BM001 = Yes THEN

[Questions BM003_intro to BM006_pulse [3] are displayed as a table]

BM003_intro
| Measurement

BM003_Hmeasure
| #

BM003_Htime
| Time of Reading

BM003_Hsystolic
| Systolic Reading

BM003_Hdiastolic
| Diastolic Reading

BM003_Hpulse
| Pulse

BM004_time_hour
| String

BM004_time_minute
| String

BM004_time_ampm
| 1 am
| 2 pm

BM005_systolic
| String

BM006_diastolic
| String

BM006_pulse
| String

BM004_time_hour
| String

BM004_time_minute
| String

BM004_time_ampm
| 1 am
| 2 pm

BM005_systolic
| String

BM006_diastolic
| String

BM006_pulse
| String

BM004_time_hour
| String

BM004_time_minute
| String

BM004_time_ampm
| 1 am
| 2 pm

BM005_systolic
| String

Language
1 English
2 Spanish
3 Mayan
4 Proxy Spanish
5 Proxy Mayan
6 Proxy English

< > Different to
BM006_diastolic

BM006_pulse

[Questions BM007 to BM010 are displayed as a table]

BM007
[[IWER: Which arm was used to conduct the measurements?]
1 Left arm
2 Right arm

BM008
[[IWER: How compliant was R during this measurement?]
1 R was fully compliant
2 R was prevented from fully complying due to illness, pain, or other symptoms or discomforts
3 R was not fully compliant, but no obvious reason for this

BM009
[[IWER: What was R's position for this test?]
1 Standing
2 Sitting
3 Lying down

BM010
[[IWER: Did the R smoke, exercise, consume alcohol or food within the 30 minutes prior to completing the blood pressure test?]
1 Yes
5 No
8 Don't Know

ENDIF

IF BM001 = No THEN

[Questions BM002 to BM002_other are displayed as a table]

BM002
[[IWER: Why didn't R complete the blood pressure measurement? (Circle all that apply)]
1 R felt it would not be safe
2 IWER felt it would not be safe
3 R refused or was not willing to complete the test
4 R tried but was unable to complete the test
5 R did not understand the instructions
6 R had a rash, a cast, edema, open sores or wounds, or significant bruise where the blood pressure cuff would contact R's arm
97 Other (Specify):

BM002_other

String

ENDIF

BM015
2. Breathing test [[IWER: Was the R able to perform the breathing test?]
1 Yes
2 No

ENDIF

[Questions BM017_intro to BM018_breathing [3] are displayed as a table]

BM017_intro

Measurement

BM017_Hmeasure

#

BM017_Hreading

Measurement Reading

BM018_breathing

String

BM018_breathing

String

BM018_breathing

String

[Questions BM019 to BM020 are displayed as a table]

BM019
[[IWER: How much effort did R give to this test?]
1 R gave full effort
2 R was prevented from giving full effort by illness, pain, or other symptoms or discomforts
3 R did not appear to give full effort, but no obvious reason for this

**BM020**

[IWER: What was R's position for this test?]
1 Standing
2 Sitting
3 Lying down
ENDIF

IF BM015 = No THEN
[Questions BM016 to BM016_other are displayed as a table]

**BM016**

[IWER: Why didn't R complete the breathing test?]
1 R felt it would not be safe
2 R ALTER felt it would not be safe
3 R refused or was not willing to complete the test
4 R tried but was unable to complete the test
5 R did not understand the instructions
97 Other (Specify):

**BM016_other**
String
ENDIF

**BM025**

3. Grip strength [IWER: Was R able to perform grip strength test?]
1 Yes
2 No

IF BM025 = Yes THEN
[Questions BM027_intro to BM029_right_gr [2] are displayed as a table]

**BM027_intro**

[IWER: Record measurements in chart. Record 993 if R tried but was unable. Record 999 if R chose not to do it.]

**BM027_Hmeasure**
#

**BM027_Hleft**
Left hand

**BM027_Hright**
Right hand

**BM028_left_kg**
String

**BM028_left_gr**
String

**BM029_right_kg**
String

**BM029_right_gr**
String

**BM028_left_kg**
String

**BM028_left_gr**
String

**BM029_right_kg**
String

**BM029_right_gr**
String

[Questions BM030 to BM032 are displayed as a table]

**BM030**

[IWER: How much effort did R give to this test?]
1 R gave full effort
2 R was prevented from giving full effort by illness, pain, or other symptoms or discomfort
3 R did not appear to give full effort, but no obvious reason for this
<table>
<thead>
<tr>
<th>BM031</th>
</tr>
</thead>
<tbody>
<tr>
<td>[IWER: What was R's position for thistest?]</td>
</tr>
<tr>
<td>1 Standing</td>
</tr>
<tr>
<td>2 Sitting</td>
</tr>
<tr>
<td>3 Lying down</td>
</tr>
<tr>
<td>BM032</td>
</tr>
<tr>
<td>[IWER: Did the R rest their arm on a support while performing the test?]</td>
</tr>
<tr>
<td>1 Yes</td>
</tr>
<tr>
<td>2 No</td>
</tr>
<tr>
<td>ENDIF</td>
</tr>
<tr>
<td>IF BM025 = No THEN</td>
</tr>
<tr>
<td>[Questions BM026 to BM026_other are displayed as a table]</td>
</tr>
<tr>
<td>BM026</td>
</tr>
<tr>
<td>[IWER: Why didn't R complete the grip strengthtest?]</td>
</tr>
<tr>
<td>1 R felt it would not be safe</td>
</tr>
<tr>
<td>2 IWER felt it would not be safe</td>
</tr>
<tr>
<td>3 R refused or was not willing to complete the test</td>
</tr>
<tr>
<td>4 R tried but was unable to complete test</td>
</tr>
<tr>
<td>5 R did not understand the instructions</td>
</tr>
<tr>
<td>6 R had a surgery, injury, inflammation or pain</td>
</tr>
<tr>
<td>97 Other(Specify):</td>
</tr>
<tr>
<td>BM026_other</td>
</tr>
<tr>
<td>String</td>
</tr>
<tr>
<td>ENDIF</td>
</tr>
<tr>
<td>BM035</td>
</tr>
<tr>
<td>4a. Semi-tandem stand [IWER: Was the R able to conduct the semi-tandem stand?]</td>
</tr>
<tr>
<td>1 Yes</td>
</tr>
<tr>
<td>2 No</td>
</tr>
<tr>
<td>IF BM035 = Yes THEN</td>
</tr>
<tr>
<td>[Questions BM037 to BM037_milisec are displayed as a table]</td>
</tr>
<tr>
<td>BM037</td>
</tr>
<tr>
<td>[IWER: Did R hold semi-tandem stand for a full 10 seconds without stepping out</td>
</tr>
<tr>
<td>1 Yes</td>
</tr>
<tr>
<td>2 No -- Enter amount of time R held standing in seconds to two decimal places.</td>
</tr>
<tr>
<td>993 R tried but was unable</td>
</tr>
<tr>
<td>999 R chose not to do it</td>
</tr>
<tr>
<td>BM037_sec</td>
</tr>
<tr>
<td>String</td>
</tr>
<tr>
<td>BM037_milisec</td>
</tr>
<tr>
<td>String</td>
</tr>
<tr>
<td>BM038</td>
</tr>
<tr>
<td>[IWER: Did R use any compensatory movements of his/her trunk, arms or legs to steady him/herself during semi-tandem stand?]</td>
</tr>
<tr>
<td>1 Yes</td>
</tr>
<tr>
<td>2 No</td>
</tr>
<tr>
<td>8 Don't Know</td>
</tr>
<tr>
<td>IF BM037 = Yes THEN</td>
</tr>
<tr>
<td>BM050</td>
</tr>
<tr>
<td>4. Full tandem stand [IWER: Was the R able to conduct the full tandem stand?]</td>
</tr>
<tr>
<td>1 Yes</td>
</tr>
<tr>
<td>2 No</td>
</tr>
<tr>
<td>IF BM050 = Yes THEN</td>
</tr>
<tr>
<td>[Questions BM052 to BM052_milisec are displayed as a table]</td>
</tr>
<tr>
<td>BM052</td>
</tr>
<tr>
<td>[IWER: Did R hold full-tandem stand for a full [30/60] seconds without stepping out of place or grabbing hold of anything?]</td>
</tr>
<tr>
<td>1 Yes</td>
</tr>
<tr>
<td>2 No -- Enter amount of time R held standing in seconds to two decimal places.</td>
</tr>
<tr>
<td>993 R tried but was unable</td>
</tr>
<tr>
<td>999 R chose not to do it</td>
</tr>
<tr>
<td>BM052_sec</td>
</tr>
<tr>
<td>String</td>
</tr>
</tbody>
</table>
BM052_milisec
String

BM053
{[IWER: Did R use any compensatory movements of his/her trunk, arms or legs to steady him/herself during full- tandem stand?]}
1 Yes
2 No
8 Don’t Know

{Questions BM054 to BM054_other are displayed as a table}

BM054
{[IWER: Record the type of floor surface that the balance measures were conducted on.]
1 Linoleum/tile/wood
2 Low-pile carpet
3 High-pile carpet
4 Concrete
5 Not sure
97 Other (Specify):}

BM054_other
String

BM055
{[IWER: How compliant was R during the balance measurements?]
1 R was fully compliant
2 R was prevented from fully complying due to illness, pain, or other symptoms or discomforts
3 R did not appear to be fully compliant, but no obvious reason for this

ENDIF

IF BM050 = No THEN

{Questions BM051 to BM051_other are displayed as a table}

BM051
{[IWER: Why didn’t R complete the full tandem stand?]
1 R felt it would not be safe
2 IWER felt it would not be safe
3 R refused or was not willing to complete the test
4 R tried but was unable to complete test
5 R did not understand the instructions
6 R had surgery, injury or other health condition that prevented R from standing
97 Other (Specify):}

BM051_other
String

ENDIF

IF BM037 > Yes THEN

BM040
4b. Side-by-side stand [IWER: Was the R able to conduct the side-by-side stand?]}
1 Yes
2 No

IF BM040 = Yes THEN

{Questions BM042 to BM042_milisec are displayed as a table}

BM042
{[IWER: Did R hold side-by-side stand for a full 10 seconds without stepping out of place or grabbing hold of anything?]
1 Yes
2 No -- Enter amount of time R held standing in seconds to two decimal places.
993 R tried but was unable
999 R chose not to do it

BM042_sec
String

BM042_milisec
String

BM043
{[IWER: Did R use any compensatory movements of his/her trunk, arms or legs to steady him/herself during side-by-side stand?]}
1 Yes
2 No
8 Don’t Know
BM044

[WER: Record the type of floor surface that the balance measures were conducted on.]
1 Linoleum/tile/wood
2 Low-pile carpet
3 High-pile carpet
4 Concrete
5 Not sure
97 Other (Specify):

BM045

[WER: How compliant was R during the balance measurements?]
1 R was fully compliant
2 R was prevented from fully complying due to illness, pain, or other symptoms or discomforts
3 R was not fully compliant, but no obvious reason for this

IF BM040 = No THEN

[Questions BM041 to BM041_other are displayed as a table]

BM041

[WER: Why didn’t R complete the Side-by-side stand?]
1 R felt it would not be safe
2 IWER felt it would not be safe
3 R refused or was not willing to complete the test
4 R tried but was unable to complete test
5 R did not understand the instructions
6 R had surgery, injury or other health condition that prevented R from standing
97 Other (Specify):

BM041_other

String

ENDIF

IF BM035 = No THEN

[Questions BM036 to BM036_other are displayed as a table]

BM036

[WER: Why didn’t R complete the semi-tandem stand?]
1 R felt it would not be safe
2 IWER felt it would not be safe
3 R refused or was not willing to complete the test
4 R tried but was unable to complete test
5 R did not understand the instructions
6 R had surgery, injury or other health condition that prevented R from standing
97 Other (Specify):

BM036_other

String

BM040

4b. Side-by-side stand [WER: Was the R able to conduct the side-by-side stand?]
1 Yes
2 No

IF BM040 = Yes THEN

[Questions BM042 to BM042_milisec are displayed as a table]

BM042

[WER: Did R hold side-by-side stand for a full 10 seconds without stepping out of place or grabbing hold of anything?]
1 Yes
2 No -- Enter amount of time R held standing in seconds to two decimal places.
993 R tried but was unable
999 R chose not to do it

BM042_sec

String

BM042_milisec

String
Did R use any compensatory movements of his/her trunk, arms or legs to steady him/herself during side-by-side stand?

1 Yes
2 No
8 Don't Know

Questions BM044 to BM044_other are displayed as a table

BM044

Record the type of floor surface that the balance measures were conducted on.

1 Linoleum/tile/wood
2 Low-pile carpet
3 High-pile carpet
4 Concrete
5 Not sure
97 Other (Specify):

BM044_other

String

BM045

How compliant was R during the balance measurements?

1 R was fully compliant
2 R was prevented from fully complying due to illness, pain, or other symptoms or discomforts
3 R was not fully compliant, but no obvious reason for this

ENDIF

IF BM040 = No THEN

[Questions BM041 to BM041_other are displayed as a table]

BM041

Why didn’t R complete the Side-by-side stand?

1 R felt it would not be safe
2 IWER felt it would not be safe
3 R refused or was not willing to complete the test
4 R tried but was unable to complete test
5 R did not understand the instructions
6 R had surgery, injury or other health condition that prevented R from standing
97 Other (Specify):

BM041_other

String

ENDIF

BM060

6. Walking Test [IWER: Was the R able to perform walking test?]

1 Yes
2 No

IF BM060 = Yes THEN

[Questions BM062_intro to BM064_TestTime_milisec [2] are displayed as a table]

BM062_intro

Measurement

BM062_Hmeasure

#

BM062_Htesttime

Walking Speed Time

BM063_TestTime_sec

String

BM064_TestTime_milisec

String

BM065

[IWER: Record type of floor surface.]

1 Linoleum/tile/wood
### Floor Type

1. Low-pile carpet
2. High-pile carpet
3. Concrete
4. Not sure
5. Other (Specify):

### Aid Used

1. None
2. Walking stick or cane
3. Elbow crutches
4. Walker
5. Not sure
6. Other (Specify):

### Compliance During Measurement

1. R was fully compliant
2. R was prevented from fully complying due to illness, pain, or other symptoms or discomforts
3. R was not fully compliant, but no obvious reason for this

### Walking Test

1. R felt it would not be safe
2. IWER felt it would not be safe
3. R refused or was not willing to complete the test
4. R tried but was unable to complete the test
5. R did not understand the instructions
6. R had surgery, injury or other health condition that prevented R from standing
7. No suitable space available
8. Other (Specify):

### Height Measurement

1. Yes
2. No

If BM070 = Yes THEN

### Height Centimeters

<table>
<thead>
<tr>
<th>Measurement</th>
<th>Value</th>
</tr>
</thead>
<tbody>
<tr>
<td>BM073_height_meters</td>
<td>Range: 0..250</td>
</tr>
<tr>
<td>BM074_height_centimeters</td>
<td>String</td>
</tr>
<tr>
<td>BM073_height_meters</td>
<td>Range: 0..250</td>
</tr>
<tr>
<td>BM074_height_centimeters</td>
<td>String</td>
</tr>
</tbody>
</table>
BM075
- [IWER: Record the type of floor surface]
  1 Linoleum/tile/wood
  2 Low-pile carpet
  3 High-pile carpet
  4 Concrete
  5 Not sure
  97 Other (Specify):

BM076
- [IWER: Was R wearing shoes during the measurement?]
  1 Yes
  2 No

BM077
- [IWER: How compliant was R during this measurement?]
  1 R was fully compliant
  2 R was prevented from fully complying due to illness, pain, or other symptoms or discomforts
  3 R was not fully compliant, but no obvious reason for this

IF BM070 = No THEN

BM071
- [IWER: Why weren't you able to measure R's height?]
  1 R felt it would not be safe
  2 IWER felt it would not be safe
  3 R refused or was not willing to complete the measurement
  4 R tried but was unable to complete measurement
  5 R did not understand the instructions
  6 Respondent too tall, interviewer could not reach
  7 There was no suitable space available
  97 Other (Specify):

BM071_other
- String

ENDIF

BM080
- 8. Weight [IWER: Were you able to measure the R's weight?]
  1 Yes
  2 No

IF BM080 = Yes THEN

BM082
- [IWER: Measurement]

BM082_Hweight
- Measurement

BM083_weight_kg
- Range: 0..500

BM084_weight_grams
- Range: 0..99

BM083_weight_kg
- Range: 0..500

BM084_weight_grams
- Range: 0..99

BM083_weight_kg
- Range: 0..500

BM084_weight_grams
- Range: 0..99

[Questions BM085 to BM085_other are displayed as a table]
BM085
[IWER: Record the type of floor surface]
1 Linoleum/tile/wood
2 Low-pile carpet
3 High-pile carpet
4 Concrete
5 Not sure
97 Other (Specify):

BM085_other
String

BM086
[IWER: Was R wearing shoes during the measurement?]
1 Yes
2 No

BM087
[IWER: How compliant was R during this measurement?]
1 R was fully compliant
2 R was prevented from fully complying due to illness, pain, or other symptoms or discomforts
3 R was not fully compliant, but no obvious reason for this

ENDIF

IF BM088 = No THEN

[Questions BM081 to BM081_other are displayed as a table]

BM081
[IWER: Why weren't you able to measure R’s weight?]
1 R felt it would not be safe
2 IWER felt it would not be safe
3 R refused or was not willing to complete the measurement
4 R tried but was unable to complete measurement
5 R did not understand the instructions
6 R is not able to stand
97 Other (Specify):

BM081_other
String

ENDIF

BM090
9. Waist [IWER: Were you able to measure the R’s waist?]  
1 Yes
2 No

IF BM090 = Yes THEN

[Questions BM092_intro to BM094_waist_mm [3] are displayed as a table]

BM092_intro
Measurement

BM092_Hmeasure
#

BM092_Hwaist
Measurement

BM093_waist_cm
Range: 0..500

BM094_waist_mm
Range: 0..99

BM093_waist_cm
Range: 0..500

BM094_waist_mm
Range: 0..99

BM093_waist_cm
Range: 0..500

BM094_waist_mm
Range: 0..99

[Questions BM095 to BM095_other are displayed as a table]

BM095
[IWER: What difficulties occurred during this measurement?]
1 None
2 R had breathing difficulties
3 R was unable to hold breath at the end of the exhale
4 R was prevented from giving full effort by illness, pain, or other symptoms or discomforts
5 R did not appear to give full effort, but no obvious reason for this
97 Other (Specify):

BM095_other
String

[Questions BM096 to BM098 are displayed as a table]

BM096
[IWER: How compliant was R during this measurement?]
1 R was fully compliant
2 R was prevented from fully complying due to illness, pain, or other symptoms or discomforts
3 R was not fully compliant, but no obvious reason for this

BM097
[IWER: Who completed the measurement?]
1 R completed the measurement
2 IWER completed the measurement

BM098
[IWER: Was the R wearing bulky clothing during this measurement?]
1 Yes
2 No

ENDIF
IF BM090 = No THEN

[Questions BM091 to BM091_other are displayed as a table]

BM091
[IWER: Why weren't you able to measure R's waist?]
1 R felt it would not be safe
2 IWER felt it would not be safe
3 R refused or was not willing to complete the measurement
4 R tried but was unable to complete measurement
5 R did not understand the instructions
6 R is not able to stand
97 Other (Specify):

BM091_other
String

ENDIF

BM100
10 Arm circumference or length [IWER: Were you able to measure the R's arm or length?]
1 Yes
2 No

IF BM100 = Yes THEN

[Questions BM102_intro to BM104_arm_mm [3] are displayed as a table]

BM102_intro
Measurement circumference

BM102_Hmeasure
#

BM102_Harm
Measurement

BM103_arm_cm
Range: 0..500

BM104_arm_mm
String

BM103_arm_cm
Range: 0..500

BM104_arm_mm
String

BM103_arm_cm
Range: 0..500

BM104_arm_mm
String

[Questions BM132_intro to BM134_arm_mm [3] are displayed as a table]
BM132_intro
Measurement length

BM132_Hmeasure
#

BM132_Harm
Measurement

BM133_arm_cm
Range: 0..500

BM134_arm_mm
String

BM133_arm_cm
Range: 0..500

BM134_arm_mm
String

BM105
[IWER: Which arm was used to conduct the measurements?]
1 Left arm
2 Right arm

[Questions BM117 to BM117_other are displayed as a table]

BM117
[IWER: What difficulties occurred during this measurement?]
1 None
2 R unable to raise or stretch his/her arm
3 R had arm injury, condition or problem, or discomfort (cut/lesion, rash, rheumatism, osteoporosis, arthritis, pain when moving arm, etc.)
4 R was prevented from giving full effort by illness, pain, or other symptoms or discomforts
5 R did not appear to give full effort, but no obvious reason for this
97 Other (Specify):

BM117_other
String

[Questions BM106 to BM119 are displayed as a table]

BM106
[IWER: How compliant was R during this measurement?]
1 R was fully compliant
2 R was prevented from fully complying due to illness, pain, or other symptoms or discomforts
3 R was not fully compliant, but no obvious reason for this

BM118
[IWER: Who completed the measurement?]
1 R completed the measurement
2 IWER completed the measurement

BM119
[IWER: Was the R wearing bulky clothing during this measurement?]
1 Yes
2 No

ENDIF

IF BM100 = No THEN

[Questions BM101 to BM101_other are displayed as a table]

BM101
[IWER: Why didn’t R complete the arm measurement?]
1 R felt it would not be safe
2 IWER felt it would not be safe
3 R refused or was not willing to complete the test
4 R tried but was unable to complete the test
5 R did not understand the instructions
6 R had a rash, a cast, edema, open sores or wounds, or significant bruise where the blood pressure cuff would contact R’s arm
97 Other (Specify):

BM101_other
String

ENDIF
<table>
<thead>
<tr>
<th>BM110</th>
<th>11. Knee height [IWER: Were you able to measure the R’s knee height?]</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Yes</td>
<td>2 No</td>
</tr>
</tbody>
</table>

| IF BM110 = Yes THEN |

| [Questions BM112_intro to BM114_pantric_mm [3] are displayed as a table] |
| BM112_intro |
| Measurement |
| BM112_Hmeasure |
| # |
| BM112_Hpantric |
| Measurement |

| BM113_pantric_cm |
| Range: 0..500 |

| BM114_pantric_mm |
| Range: 0..99 |

| BM113_pantric_cm |
| Range: 0..500 |

| BM114_pantric_mm |
| Range: 0..99 |

| BM113_pantric_cm |
| Range: 0..500 |

| BM114_pantric_mm |
| Range: 0..99 |

| IF BM110 = No THEN |

| [Questions BM111 to BM111_other are displayed as a table] |
| BM111 |
| [IWER: Why didn't R complete the Knee Height?] |
| 1 R felt it would not be safe |
| 2 IWER felt it would not be safe |
| 3 R refused or was not willing to complete the test |
| 4 R tried but was unable to completetest |
| 5 R did not understand the instructions |
| 6 R had a rash, a cast, edema, open sores or wounds, or significant bruise where the blood pressure cuff would contact R’s arm |
| 97 Other (Specify): |

| BM111_other |
| String |

| [Questions BM116 to BM120 are displayed as a table] |
| BM116 |
| [IWER: How compliant was R during this measurement?] |
| 1 R was fully compliant |
| 2 R was prevented from fully complying due to illness, pain, or other symptoms or discomforts |
| 3 R was not fully compliant, but no obvious reason for this |

| BM122 |
| [IWER: Who completed the measurement?] |
| 1 R completed the measurement |
| 2 IWER completed the measurement |

| BM120 |
| [IWER: Was the R wearing bulky clothing during this measurement?] |
| 1 Yes |
| 2 No |

| ENDIF |

| IF BM110 = No THEN |

| [Questions BM111 to BM111_other are displayed as a table] |
| BM111 |
| [IWER: Why didn't R complete the Knee Height?] |
| 1 R felt it would not be safe |
| 2 IWER felt it would not be safe |
| 3 R refused or was not willing to complete the test |
| 4 R tried but was unable to completetest |
| 5 R did not understand the instructions |
| 6 R had a rash, a cast, edema, open sores or wounds, or significant bruise where the blood pressure cuff would contact R’s arm |
| 97 Other (Specify): |

| BM111_other |
| String |
| ENDIF |
| HG003 |
| Hemoglobin Test [IER: Were you able to apply the hemoglobin test?] |
| 1 Yes |
| 2 No |
| LOOP FROM 0 TO 5 DO |
| IF strlen ( HG008 ) < > 15 THEN |
| |
| HG008 |
| HHID |
| String |
| ELSE |
| ENDIF |
| ENDDO |
| IF HG003 = Yes THEN |
| [Questions HG011_a to HG014 are displayed as a table] |
| |
| HG011_a |
| Anemia test result |
| Integer |
| HG011_b |
| Anemia test result |
| String |
| HG012 |
| The amount obtained in the test show that the hemoglobin concentration in the blood is |
| 1 Normal |
| 2 Low |
| HG013 |
| Any problem in applying the test |
| 1 Yes |
| 2 No |
| HG014 |
| Comments |
| Memo |
| ENDIF |
| DB001 |
| Did the R sign the Blood Sample consent form? |
| 1 Yes |
| 2 No |
| IF DB001 = Yes THEN |
| |
| DB002 |
| As I mentioned, I'd like to collect another small sample of your blood. I |
| will collect enough blood to fill at least five small circles on a collection |
| card. Do you understand the directions for this test? |
| 1 Yes |
| 2 No |
| IF DB002 = Yes THEN |
| |
| DB003 |
| Do you feel it would be safe for you to do this test? |
| 1 Yes |
| 2 No |
| IF DB003 = Yes THEN |
| |
| DB003_a |
| Thank you for your cooperation. This concludes the physical measure and |
| biomarkers portion of the interview. Before we continue with the |
| interview, I need a moment to enter some information in the |
| computer. |
| |
| [Questions DB005 to DB005_other are displayed as a table] |
| |
| DB005 |
| What, if any, problems occurred during the collection of the blood sample? |
| 1 None |
| 2 R fainted, became light-headed or nauseous |
3 R had difficulty getting her/his finger to stop bleeding
4 Other, please specify

**DB005_other**

**String**

[Questions DB006 to DB006_other are displayed as a table]

<table>
<thead>
<tr>
<th><strong>DB006</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>Who pricked the R’s finger(s)?</td>
</tr>
<tr>
<td>1 R pricked own finger(s)</td>
</tr>
<tr>
<td>2 IWER pricked R’s finger(s)</td>
</tr>
<tr>
<td>3 Both R and IWER pricked R’s finger(s)</td>
</tr>
<tr>
<td>4 Someone else pricked R’s finger(s) (Specify relationship to R)</td>
</tr>
</tbody>
</table>

**DB006_other**

**String**

**DB007**

How many circles were filled on the first card?

1 0
2 1
3 2
4 3
5 4
6 5

**DB009**

How many times did the R’s finger need to be pricked in order to fill the circles?

1 One time
2 Two times
3 Two times but the R was unable to fill all four circles with blood

**DB010**

How compliant was R during this measurement?

1 R was fully compliant
2 R was prevented from fully complying due to illness, pain, or other symptoms or discomforts
3 R was not fully compliant, but there was no obvious reason for this

**ENDIF**

IF DB003 = No THEN

[Questions DB004 to DB004_other are displayed as a table]

<table>
<thead>
<tr>
<th><strong>DB004</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>Why didn’t R complete the blood sample?</td>
</tr>
<tr>
<td>1 R felt it would not be safe</td>
</tr>
<tr>
<td>2 IWER felt it would not be safe</td>
</tr>
<tr>
<td>3 R refused or was not willing to complete the measurement</td>
</tr>
<tr>
<td>4 R tried but was unable to complete measurement</td>
</tr>
<tr>
<td>5 R did not understand the instructions</td>
</tr>
<tr>
<td>6 R has hemophilia or is on medication that thins the blood (anticoagulant)</td>
</tr>
<tr>
<td>97 Other, please specify</td>
</tr>
</tbody>
</table>

**DB004_other**

**String**

**ENDIF**

ENDIF

IF DB002 = No THEN

[Questions DB004 to DB004_other are displayed as a table]

<table>
<thead>
<tr>
<th><strong>DB004</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>Why didn’t R complete the blood sample?</td>
</tr>
<tr>
<td>1 R felt it would not be safe</td>
</tr>
<tr>
<td>2 IWER felt it would not be safe</td>
</tr>
<tr>
<td>3 R refused or was not willing to complete the measurement</td>
</tr>
<tr>
<td>4 R tried but was unable to complete measurement</td>
</tr>
<tr>
<td>5 R did not understand the instructions</td>
</tr>
<tr>
<td>6 R has hemophilia or is on medication that thins the blood (anticoagulant)</td>
</tr>
<tr>
<td>97 Other, please specify</td>
</tr>
</tbody>
</table>

**DB004_other**

**String**

**ENDIF**
IF DB001 = No THEN

[Questions DB004 to DB004_other are displayed as a table]

DB004
Why didn't R complete the blood sample?
1 R felt it would not be safe
2 IWER felt it would not be safe
3 R refused or was not willing to complete the measurement
4 R tried but was unable to complete measurement
5 R did not understand the instructions
6 R has hemophilia or is on medication that thins the blood (anticoagulant)
97 Other, please specify

DB004_other
String
ENDIF