

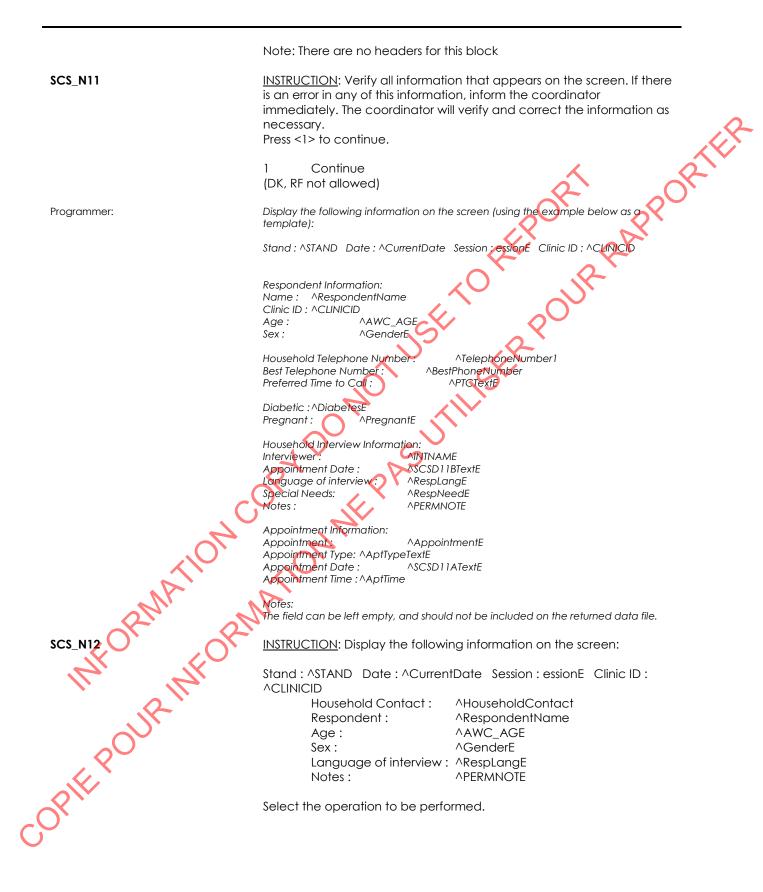
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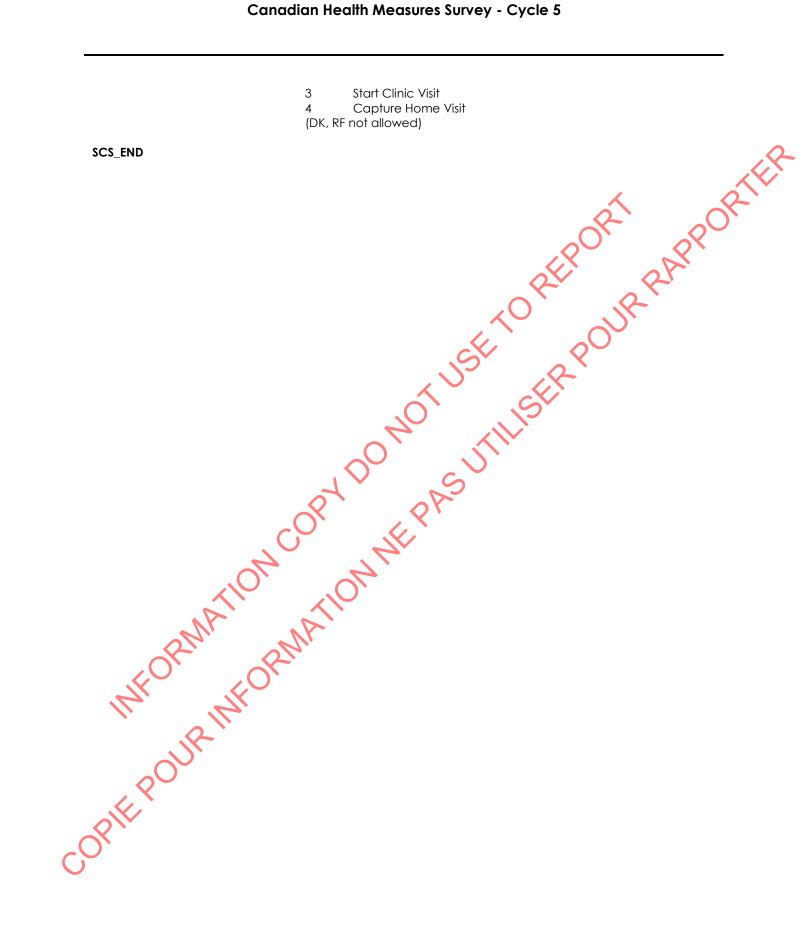
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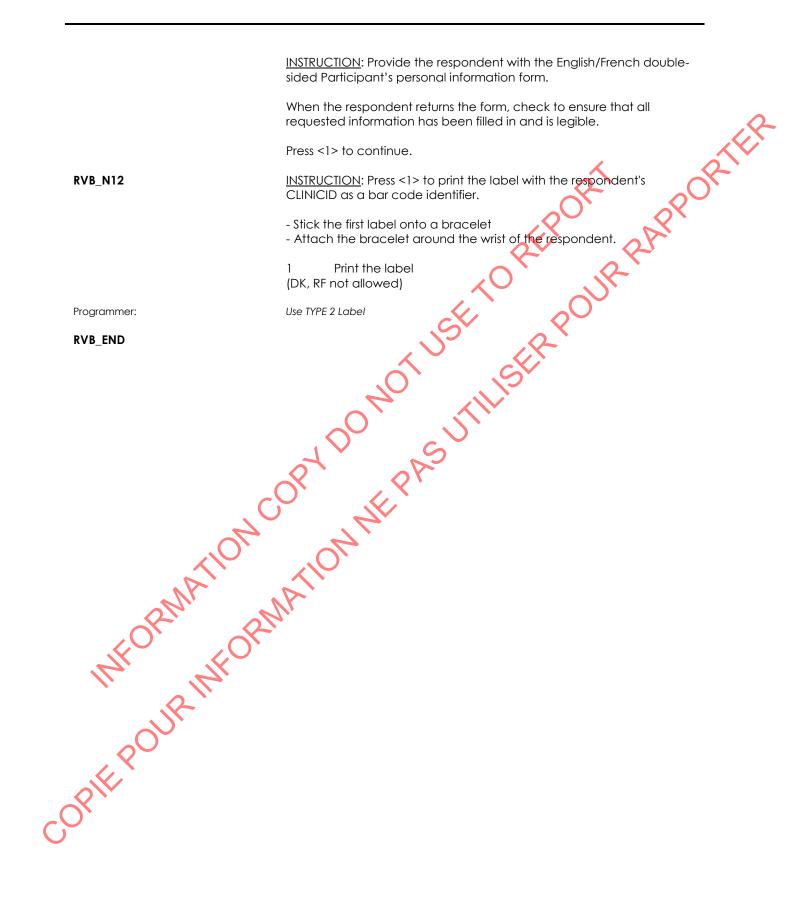
SCS_BEG	Content block
	External variables required:
Š	External variables required: Variables taken from sample file: STAND: name of the city/town/village in which the clinic has been set up CLINICID: 8 digit respondent identifier INTVLANG: language of application during the household interview (either English or French) AWC_AGE: age of respondent INTNAME: name of household interviewer BCA_B32_DAY: day of clinic appointment booked for the respondent during the household interview BCA_B32_MONTH: month of clinic appointment booked for the respondent during the household interview BCA_B32_YEAR: year of clinic appointment booked for the respondent during the household interview BCA_N33: time of clinic appointment booked for the respondent during the household interview C2_YEAR: year of household interview C2_MONTH: month of lone respondent during the household interview C2_MONTH: month of clinic appointment booked for the respondent during the household interview C2_NONTH: month of clinic appointment booked for the respondent during the household interview C2_NONTH: month of household interview C2_MONTH: month of household interview C2_MONTH: month of household interview C2_NONTH: month of household interview PERMNOTE: household interview C2_MONTH: nonth of household interview C3_NONTH: month of variable Creation (Appendix II): DryRum indicator of whether the case is a dry run case CurrentMeat: numeric year during which clinic visit is taking place CurrentMeat: numeric word during which clinic visit is taking place SessionE: English text of when the clinic visit is taking place HouseholdContect: name of respondent RespondentName: name of respondent RespondentName: rame of respondent
INT IR INFO	DiabetesE: English text of whether respondent has been diagnosed with diabetes AppointmentE: English text of the selected type of clinic appointment PTCTextE: English text of preferred time to call
optic pour information	Variables from booking desk : BHV_B12.DAY: day of home visit BHV_B12.MONTH: month of home visit BHV_B12.YEAR: year of home visit BHV_N13: time of home visit BCA_B32.Day: day of clinic appointment BCA_B32.Month: month of clinic appointment BCA_B32. Year: year of clinic appointment BCA_N33: time of clinic appointment



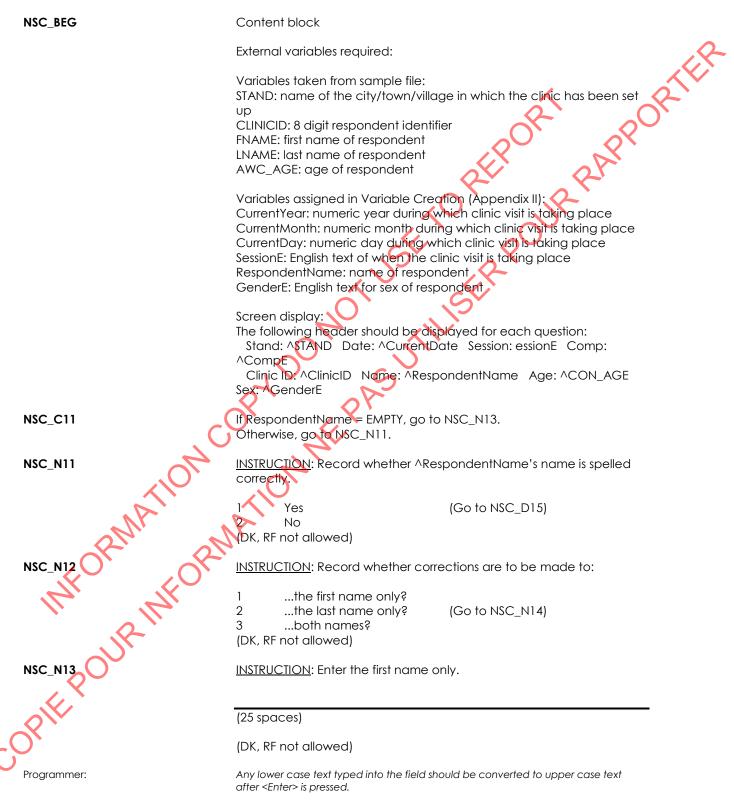


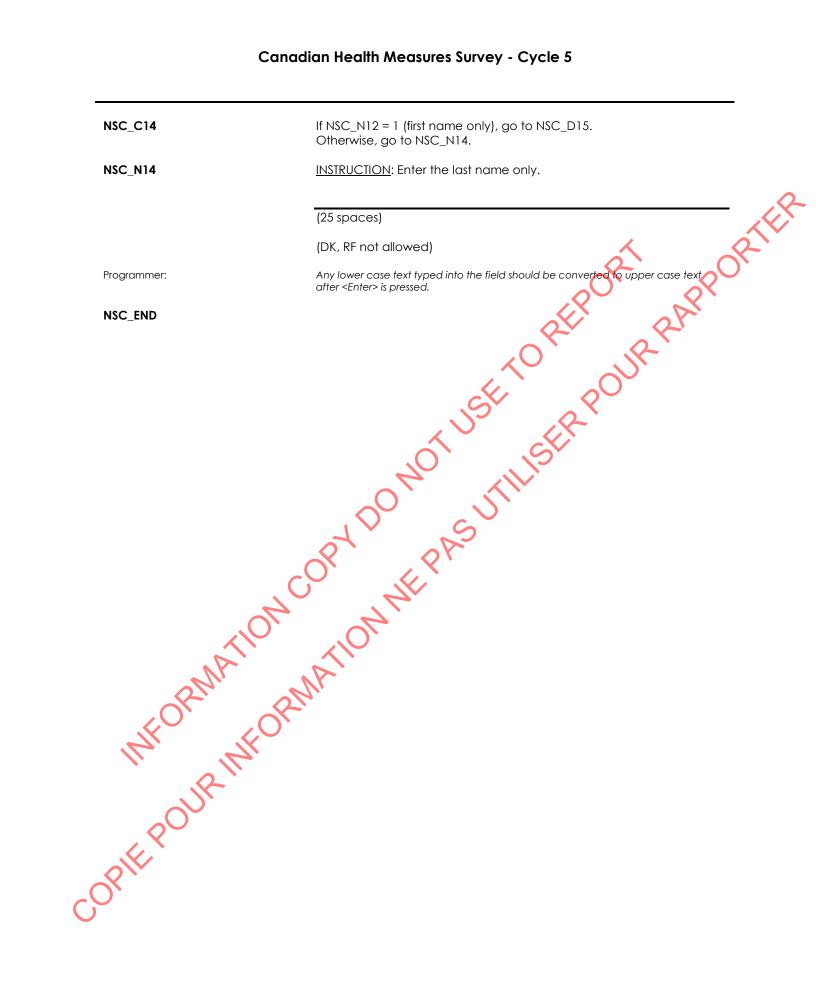
Respondent Verification (RVB)

RVB_BEG	Content block
	External variables required:
	Variables taken from sample file: STAND: name of the city/town/village in which the clinic has been set up CLINICID: 8 digit respondent identifier AWC_AGE: age of respondent AWC_YOB: year of birth of respondent AWC_MOB: month of birth of respondent AWC_DOB: day of birth of respondent RespondentName: name of respondent
	Variables assigned in Variable Creation (Appendix II): CurrentYear: numeric year during which clinic visit is taking place CurrentMonth: numeric month during which clinic visit is taking place CurrentDay: numeric day during which clinic visit is taking place SessionE: English text of when the clinic visit is taking place ShortRespName: first 4 letters of LNAME plus first 3 letters of FNAME IntLangE: English text of language of application during the household interview (either English or French) GenderE: English text for sex of respondent SCS_N12: visit type
	Screen display: The following header should be displayed for each question: Stand: ^STAND Date: ^CurrentDate Session: essionE Comp: ^CompE Clinic ID: ^ClinicID Name: ^RespondentName Age: ^CON_AGE Sex: ^GenderE
RVB_C11	If $SCS_N/2 = 4$, go to RVB_END . Otherwise, go to RVB_N11 .
RVB_N11	NSTRUCTION: Press <1> to print the Participant's personal information form.
INFO IN	1 Print the form (DK, RF not allowed)
Programmer:	"AWC_MOB" and "AWC_DOB" should be displayed in numbers and always be 2 digits long. Add a leading zero for values from 1 to 9.
	The form should be printed English/French.
Programmer: RVB_R11	Here is the first of several forms we will be asking you to complete. Please read it carefully and provide the information requested.
CO.	

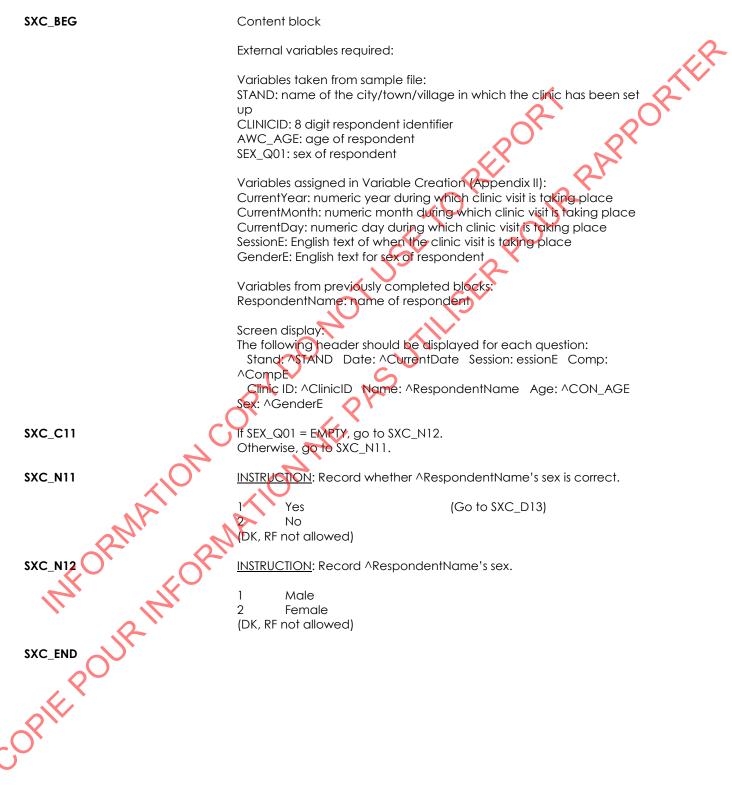


Name Spelling Confirmation (NSC)

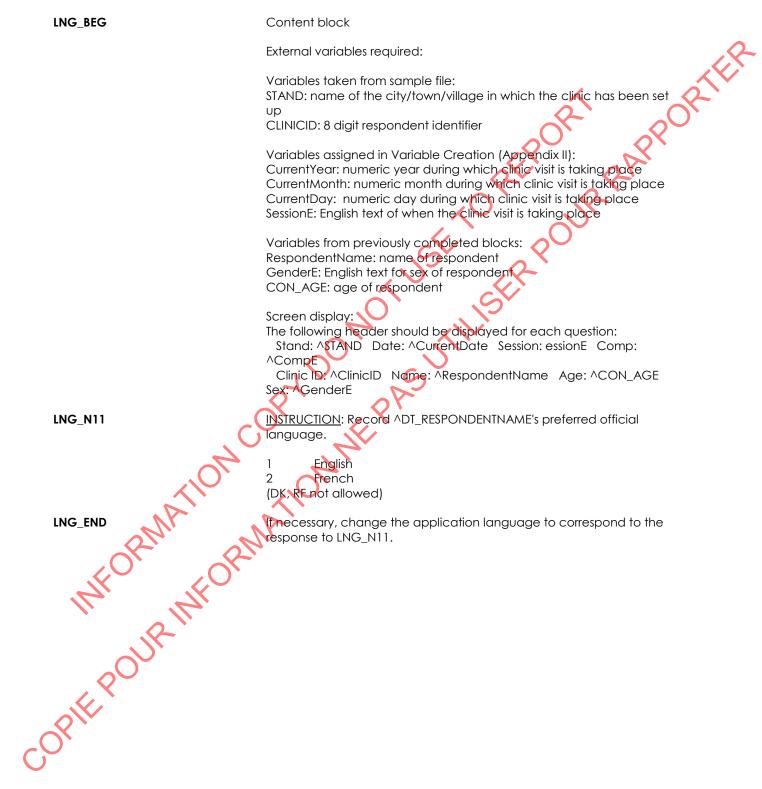


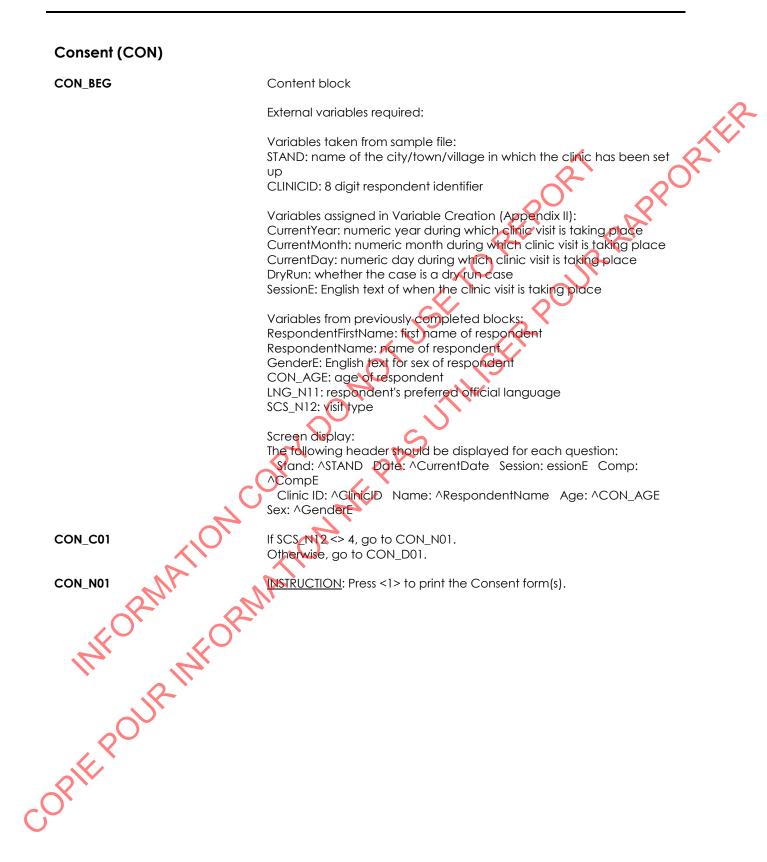


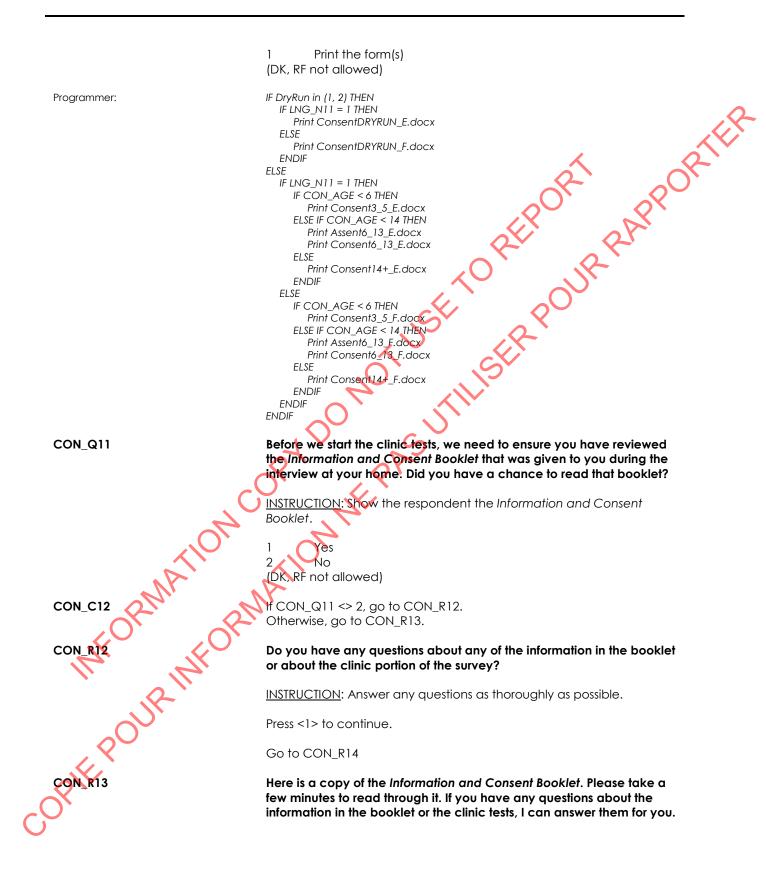
Sex Confirmation (SXC)



Language Confirmation (LNG)







	<u>INSTRUCTION</u> : Hand the Information and Consent Booklet to the respondent and give him/her time to read through it (approximately 5
	minutes).
	Press <1> to continue.
CON_R14	Here is the Consent form for participation in the clinic portion of the survey. Please read the form carefully and check either the "Yes" or "No" box for each item.
	INSTRUCTION: Provide [the parent or guardian/the respondent] with the Consent form.
	Check to ensure that it has been completed correctly.
	Sign the form as the witness.
	Press <1> to continue.
CON_R15	I am now going to enter that information into our computer system. I may have some additional questions about your responses.
	INSTRUCTION: Press <1> to continue.
CON_C15	If CON_AGE < 14, go to CON_N15. Otherwise, go to CON_D16.
CON_N15	INSTRUCTION: Record whether the parent or guardian has consented to the respondent participating in the physical measure tests.
	Yes 2 No (Go to CON_END) (DK, RF not allowed)
CON_C16	If CON_AGE > 5, go to CON_R16. Otherwise, go to CON_C18.
CON_R16 MFORMFORM	Your parent or guardian has said you can take part in the tests today. If you would like to participate we need you to write or print your name on this form.
intra in	INSTRUCTION: Provide the child with the Assent form.
	Check to ensure that it has been completed correctly.
Jr	Sign the form as the witness.
.80	Press <1> to continue.
CONINIS	<u>INSTRUCTION</u> : Record whether the respondent has [consented/assented] to participating in the physical measure tests.
CO	1 Yes 2 No (Go to CON_END) (DK, RF not allowed)

CON_C18	If DRYRUN = 3 and SCS_N12 = 3 and CON_AGE > 5, go to CON_N18. Otherwise, go to CON_N21.
CON_N18	INSTRUCTION: Record whether [the parent or guardian/the respondent] has consented to having [^RespondentFirstName's/his/her] x-rays taken.
	1 Yes 2 No (DK, RF not allowed)
CON_N21	INSTRUCTION: Record whether [the parent or guardian/the respondent] has consented to receiving reports of [^RespondentFirstName's/his/her] test results.
	1 Yes 2 No (DK, RF not allowed)
CON_N23	<u>INSTRUCTION</u> : Record whether [the parent or guardian/the respondent] has consented to allowing Statistics Canada to test [^RespondentFirstName's/his/her] blood and urine for [contaminants that might require/diseases and contaminants that might require] mandatory reporting in his/her province of residence, and to contact him/her as well as the appropriate provincial authorities if the results are outside the established reference range and require a follow-up.
	1 Ves 2 No (DR, RF not allowed)
CON_C23	If CON_N21 = 2 and CON_N23 = 1, go to CON_R23. Otherwise, go to CON_C24A.
CON_R23	You have indicated on the Consent form that you do not want to receive reports of [your/^RespondentFirstName's] test results. However, you have agreed that Statistics Canada can test [your/^RespondentFirstName's] blood and urine for reportable [contaminants/diseases and contaminants]. I just want you to be aware that, by agreeing to have these tests done, you will receive the results if they are positive.
AY A	INSTRUCTION: Answer any questions as thoroughly as possible.
·	Press <1> to continue.
CON_C24A	If DRYRUN = 3, go to CON_C24B. Otherwise, go to CON_END.
CON_C24B	If CON_AGE < 14, go to CON_N24. Otherwise, go to CON_N25.
GON_N24	<u>INSTRUCTION</u> : Record whether the parent or guardian has consented to storage of the respondent's blood and urine for use in future health studies.

1 Yes 2 No (DK, RF not allowed) BRORIER Go to CON_N26 CON N25 INSTRUCTION: Record whether the respondent has agreed to storage of blood and urine for use in future health studies. wed use with provide the provi 1 Yes 2 No INSTRUCTION: Record whether [the parent or guardian/the respondent] has agreed to storage of DNA for use in future health

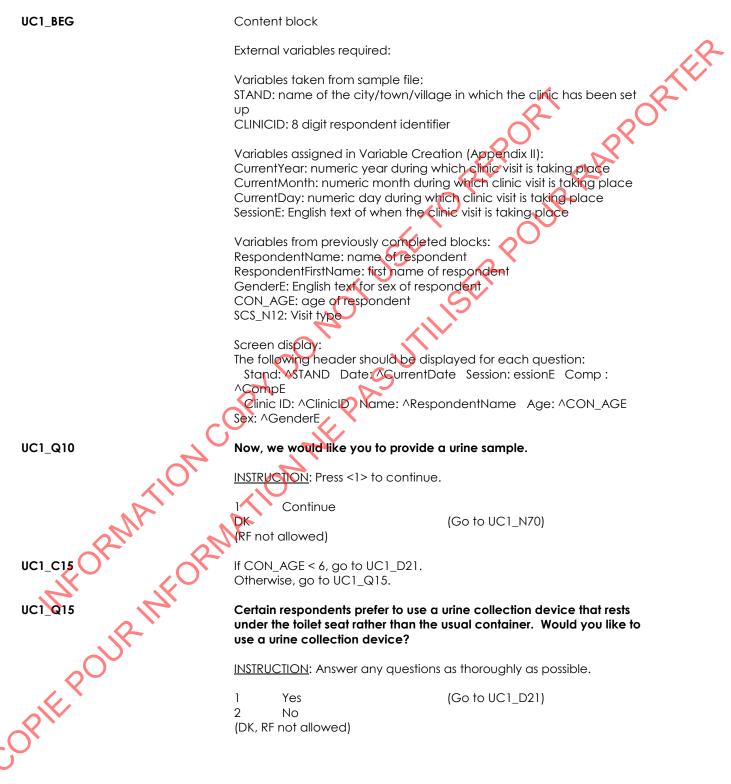
Urgent Condition (URG)

URG_BEG	Content block
	External variables required:
	Variables taken from sample file: STAND: name of the city/town/village in which the clinic has been set up CLINICID: 8 digit respondent identifier TelephoneNumber1: First telephone number of the respondent TelephoneNumber2: Second telephone number of the respondent EMAILADDRESS: E-mail address of respondent or of parent/guardian (if less than 14 years old)
	Variables assigned in Variable Creation (Appendix II): CurrentYear: numeric year during which clinic visit is taking place CurrentMonth: numeric month during which clinic visit is taking place CurrentDay: numeric day during which clinic visit is taking place SessionE: English text of when the clinic visit is taking place
	Variables from previously completed blocks: RespondentFirstName: first name of respondent RespondentName: first and lastname of respondent GenderE: English text for sex of respondent CON_AGE: age of respondent
	LNG N11: respondent's preferred official language CON_N15: whether a parent or guardian has consented to the respondent participating in the physical measure tests CON_N16: whether the respondent has consented to participating in the physical measure tests
aMATION	Screen disolay: The following header should be displayed for each question: Stand: ^STAND Date: ^CurrentDate Session: essionE Comp: ^CompE Clinic ID: ^ClinicID Name: ^RespondentName Age: ^CON_AGE Sex: ^GenderE
URG_CO4	If CON_N15 = 2 or CON_N16 = 2, go to URG_END. Otherwise, go to URG_C05.
URG_CO5	If TelephoneNumber1 = EMPTY and TelephoneNumber2 = EMPTY, go to URG_D10. Otherwise, go to URG_R06.
URG_RO6	I would like to confirm the telephone numbers we have on file.
KX X	INSTRUCTION: Press <1> to continue.
URG_Q07	Is ^TelephoneNumber1 correct?

	1 Yes (Go to URG_C08) 2 No (DK, RF not allowed)	
Programmer:	If "Yes" is selected, copy the values from the displayed telephone number into the respective URG_B07 phone number fields and go to URG_C08.	2
URG_B07	Call the North American Telephone (NATP) block. See Appendix I.	
Programmer:	Pass the following parameters: DV_QTEXT_E = " What is the correct phone number? " ASKEXT = 2 (No).	
URG_C08	If TelephoneNumber2 = EMPTY, go to URG_010. Otherwise, go to URG_Q09.	
URG_Q09	Is ^TelephoneNumber2 correct?	
	1 Yes 2 No (DK, RF not allowed) (Go to URG CH)	
Programmer:	If "Yes" is selected, copy the values from the displayed telephone number into the respective URG_B09 phone number fields and go to URG_C11.	
URG_B09	Call the North American Telephone (NATP) block. See Appendix I.	
Programmer:	Pass the following parameters: DV_QTEXT_E = " What is the correct phone number? " ASKEXT = 2 (No).	
URG_C09	If 1=1, go to URG_C11. Otherwise, go to URG_C11.	
URG_Q10	Is there [a/another] phone number that can be used to reach you?	
MATIC	1 Yes 2 No (Go to URG_C11) DK, RF (Go to URG_C11)	
URG_B11	Call the North American Telephone (NATP) block. See Appendix I.	
Programmer:	Pass " What is it?" as parameter.	
Programmer: URG_C11	If EMAILADDRESS = DK, RF or EMPTY, go to URG_Q11. Otherwise, go to URG_B12.	
URG_Q11	Can you provide us with an e-mail address?	
OIEPU	1 Yes 2 No (Go to URG_N13) DK, RF (Go to URG_N13)	
URG_B12	Call the Electronic Address block (EA)	
Programmer:	SPECRESPNAME = RespondentFirstName	
URG_N13	INSTRUCTION: Is the respondent in a wheelchair?	

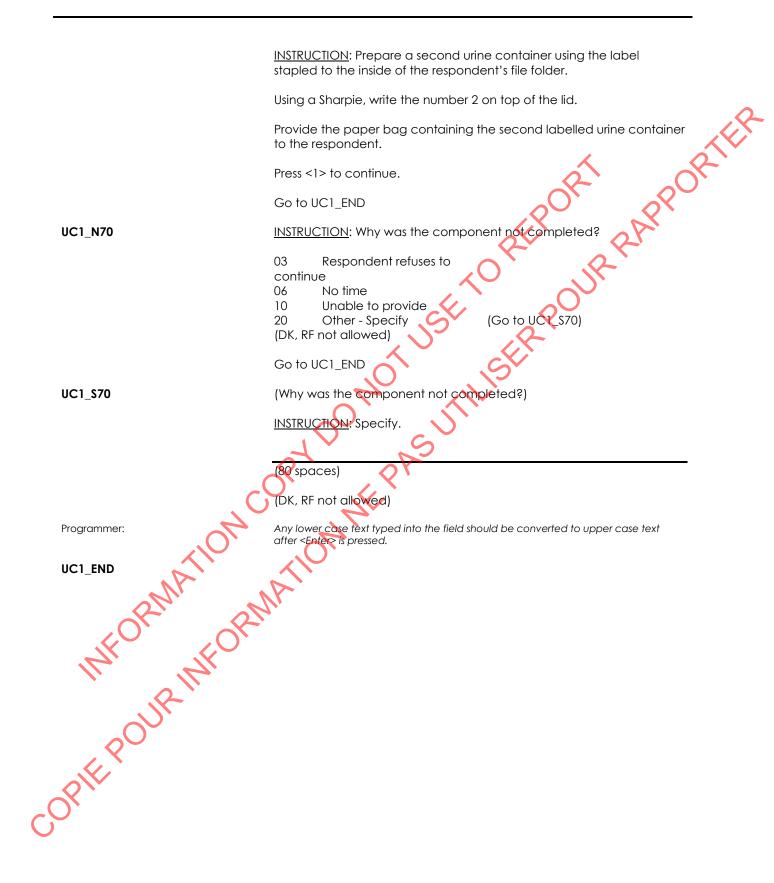
	1 Yes 2 No (DK, RF not allowed)
URG_C14	If URG_N13 = 1, go to URG_Q14. Otherwise, go to URG_D20.
URG_Q14	The laboratories that analyse the urine samples require that these samples are provided without the use of a catheter. For this reason, we need to know if you use a catheter.
	INSTRUCTION: Record if the respondent is using a catheter. 1 Yes 2 No DK, RF
URG_END	NOTUSERPOC
	M COPY DO' PASUTI
RMATH	
INFOUR INF	Ŏ`
COPIE POUR INF	

Urine Collection 1 (UC1)



UC1_R20	Please use this container to collect the urine sample.
	 Once you are in the washroom, you will need to remove the lid and place it on the shelf, the inside of the lid facing up. Do not touch the inside of the container. Fill the container as full as possible and put the lid back on tightly. Once you are finished, please rinse and dry the exterior of the container. Wash your hands, place the container in the paper bag provided and bring it back to me.
	INSTRUCTION: Demonstrate how to remove the lid using the sample container and ensure the respondent understands what is meant by placing the lid on the shelf "with the inside facing up".
	Answer any questions as thoroughly as possible.
	Press <1> to continue.
	Go to UC1_C30
UC1_R21	ADT_UC1R21ETo use the urine collection device:
	 You will need to lift the toilet seat and install the collection device. Ensure it fits snugly in the front of the toilet with the edges resting over the lip of the bowl. Lower the toilet seat. <u>INSTRUCTION</u>: Show the sample urine collection device to the respondent or parent/guardian and demonstrate which end is the front. Answer any questions as thoroughly as possible. Press <1> to continue.
UC1_R22	To collect the urine, ensure you are sitting on the toilet seat in such a way that the urine stream is collected in the device.
2N ^h	Iry to collect as much urine as possible and avoid touching the inside of the collection device.
KON LOY	INSTRUCTION: Press <1> to continue.
UCT_R23	[Once ^RespondentFirstName no longer requires your assistance/Once you are finished]:
uct R23	 Remove the lid of the container and place it on the shelf in the washroom, the inside of the lid facing up. Over the toilet, pour the urine from the collection device into the container using the 'spout'. Fill the container as full as possible and put the lid back on tightly. Discard the collection device in the washroom garbage. Please rinse and dry the exterior of the container. Wash your hands, place the container in the paper bag provided and bring it back to me.

	<u>INSTRUCTION</u> : Show the respondent or parent/guardian the spout used for pouring the urine.
	Demonstrate how to remove the lid and pour the urine using the sample container.
	Ensure the respondent or parent/guardian understands what is meant by placing the lid on the shelf "with the inside facing up".
	Answer any questions as thoroughly as possible.
	Press <1> to continue.
UC1_C30	If SCS_N12 = 4, go to UC1_N40. Otherwise, go to UC1_R30.
UC1_R30	In case you forget any of the collection procedures, there are step by step instructions posted in the washroom.
	INSTRUCTION: Press <1> to continue.
UC1_N40	INSTRUCTION: Record whether the respondent provided a urine sample.
	1 Yes 2 No (DK, RF not allowed) (Go to UC1_N70)
UC1_Q43	In order to complete an accurate analysis of the sample provided, we would like to know how long ago you urinated prior to providing this sample.
4	INSTRUCTION: Read categories to respondent.
at 10	1 Dess than 1 hour ago 2 1 hour to less than 2 hours
ant a	More than 2 hours ago
or de	DK (RF not allowed)
UC1-N50 OLR MFOR	<u>INSTRUCTION</u> : The required urine volume can be found on the urine container label.
R	Did the respondent provide a urine sample of sufficient volume?
L RON	1 Yes (Go to UC1_END) 2 No (DK, RF not allowed)
UC1_R60	We did not obtain enough urine for the lab to run all the desired tests. I will prepare another urine container so that a second sample can be collected before the end of the clinic visit.

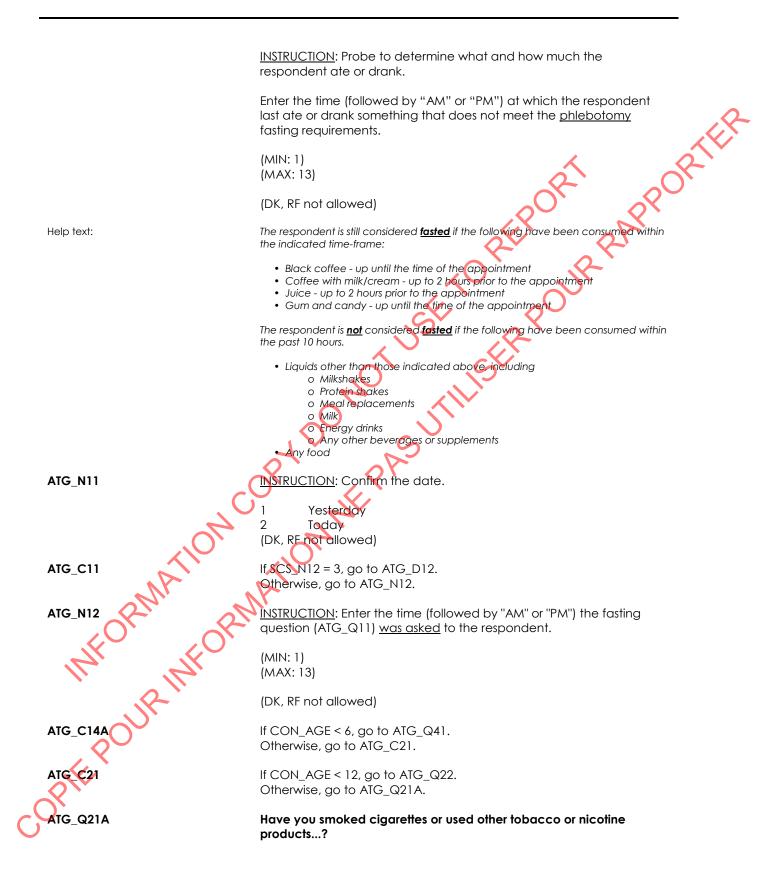


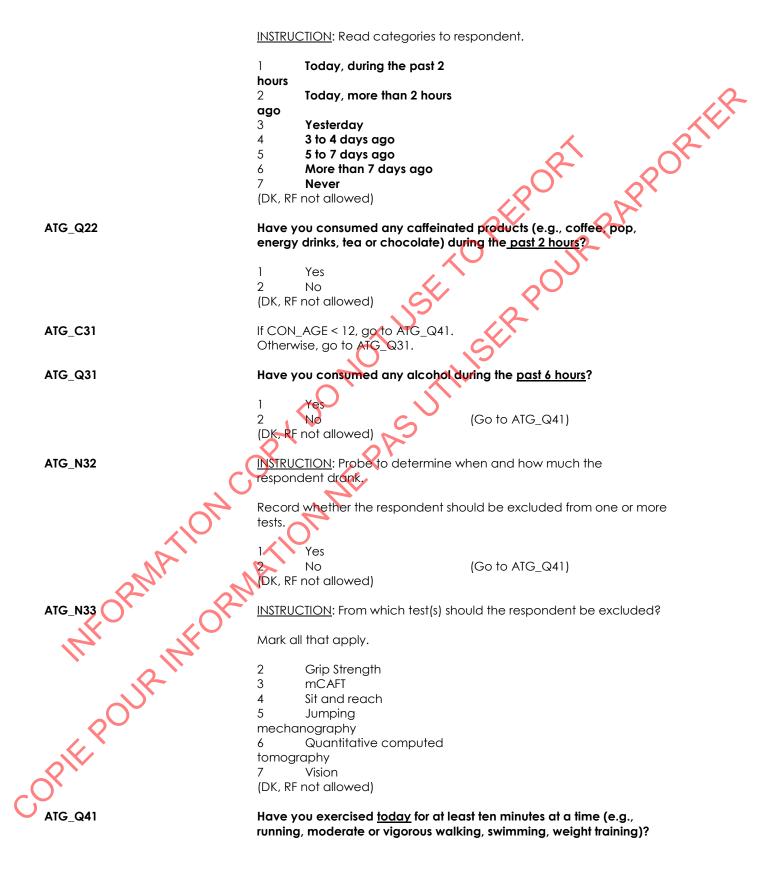
Screening Component Introduction (SCI)

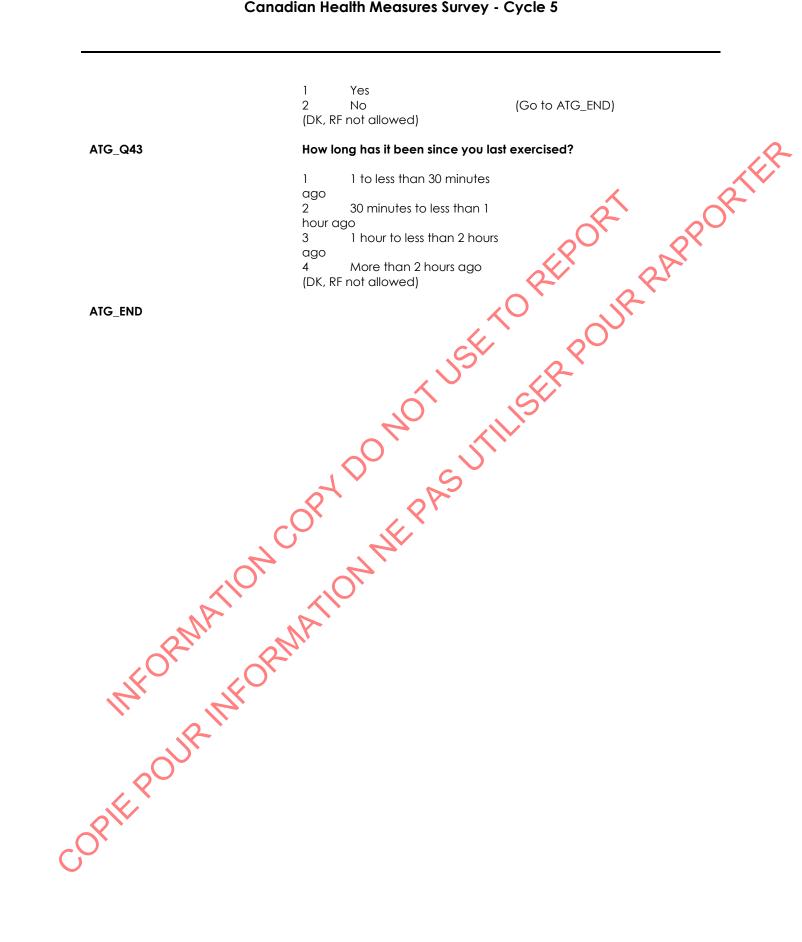
SCI_BEG	Content block
	External variables required:
	Variables taken from sample file: STAND: name of the city/town/village in which the clinic has been set up CLINICID: 8 digit respondent identifier
	Variables assigned in Variable Creation (Appendix II): CurrentYear: numeric year during which clinic visit is taking place CurrentMonth: numeric month during which clinic visit is taking place CurrentDay: numeric day during which clinic visit is taking place SessionE: English text of when the clinic visit is taking place
	Variables from previously completed blocks: RespondentName: name of respondent GenderE: English text for sex of respondent CON_AGE: age of respondent SCS_N12: Visit Type (3= clinic visit; 4= home visit)
	Screen display: The following header should be displayed for each question: Stand: ^STAND Date: ^CurrentDate Session: essionE Comp: ^CompE Clinic ID: ^ClinicID Name: ^RespondentName Age: ^CON_AGE Sex: ^GenderE
SCI_R1	The following questions are asked to ensure that you are given all the tests for which you are eligible. Some questions may have been asked during the home interview, but we need to ensure that our information is up-to-date. We also need to know if any changes have occurred since the home interview. It is important to note that some medications and physical conditions may exclude you from certain tests.
INFORT INFO	Please answer to the best of your knowledge, as accurate information about you is important. [Your parent or guardian may need to help you answer some of these questions/EMPTY]. INSTRUCTION: Press <1> to continue.
SCI_END UR INFO	
-	

Adherence to Guidelines (ATG)

ATG_BEG	Content block
	External variables required:
	Variables taken from sample file: STAND: name of the city/town/village in which the clinic has been set up CLINICID: 8 digit respondent identifier SELFAST: whether selected to fast for 12 hours (1=fosting, 2=non-fasting)
	Variables assigned in Variable Creation (Appendix II): CurrentYear: numeric year during which clinic visit is taking place CurrentMonth: numeric month during which clinic visit is taking place CurrentDay: numeric day during which clinic visit is taking place SessionE: English text of when the clinic visit is taking place
	Variables from previously completed blocks: RespondentName: name of respondent GenderE: English text for sex of respondent CON_AGE: age of respondent SCS_N12: visit type
	Screen Display: The following header should be displayed for each question: Stand: ASTAND Date ACurrentDate Session: essionE Comp: ACompE Clinic ID: AClinicID Name: ARespondentName Age: ACON_AGE Sex: AGenderE
ATG_R11	At the time of the home interview, you were given a set of pre-testing guidelines. We will now review those guidelines.
AIG_Q11	When did you last eat or drink anything other than water (e.g., coffee, tea, alcohol, juice or flavoured water)?
INFOR	NFORM
COPIEPOUR	
COK.	







Physical and Health Conditions (PHC)

PHC_BEG	Content block
	External variables required:
	Variables taken from sample file: STAND: name of the city/town/village in which the clinic has been set up CLINICID: 8 digit respondent identifier CCC_Q11: respondent has been diagnosed with asthma. CCC_Q14: respondent has been diagnosed with chronic bronchitis, emphysema or chronic obstructive pulmonary disease.
	Variables assigned in Variable Creation (Appendix II): CurrentYear: numeric year during which clinic visit is taking place CurrentMonth: numeric month during which clinic visit is taking place CurrentDay: numeric day during which clinic visit is taking place SessionE: English text of when the clinic visit is taking place Date2MonthsAgoE: the date two months ago in English TwoMonthsAgoDay: the day of the date two months ago TwoMonthsAgoMonth: the month of the date two months ago TwoMonthsAgoYear: the year of the date two months ago
	Variables from previously completed blocks: RespondentName: name of respondent GenderE: English text for sex of respondent CON_SEX: sex of respondent CON_AGE: age of respondent
ATION	Screen Display: The following header should be displayed for each question: Stand: ASTAND Date: ^CurrentDate Session: essionE Comp: ^CompE Clinic ID: ^ClinicID Name: ^RespondentName Age: ^CON_AGE Sex: ^GenderE
PHC_R11 RM	am now going to ask you about your current health and physical condition.
WE WEON	INSTRUCTION: Press <1> to continue.
PHC_C31	If CON_AGE < 8 or > 69, go to PHC_Q41. Otherwise, go to PHC_Q31.
PHC_Q31	Have you been diagnosed with exercise-induced asthma or a breathing condition that worsens with exercise such as chronic bronchitis, emphysema or chronic obstructive pulmonary disease (COPD)?
CORIT	1 Yes (Go to PHC_Q36A) 2 No (DK, RF not allowed)

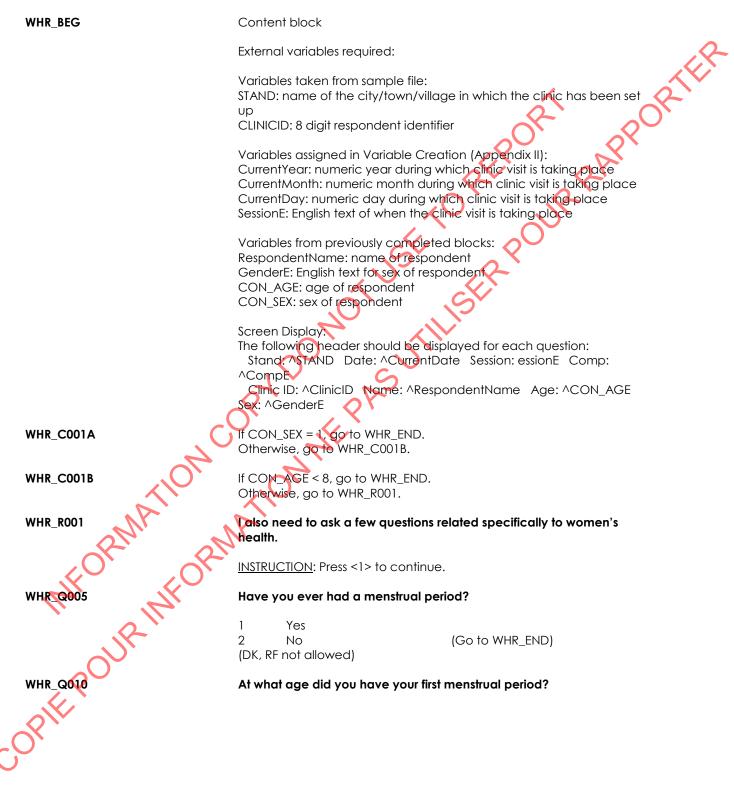
PHC_C32	If CCC_Q11 = 1 (respondent has been diagnosed with asthma), go to PHC_Q32. Otherwise, go to PHC_C32A.
PHC_Q32	During the interview in your home, it was reported that you had asthma. Is this correct?
	astrima. Is this correct? 1 Yes (Go to PHC_Q36A) 2 No DK, RF
PHC_C32A	If CCC_Q14 = 1 (respondent has been diagnosed with chronic bronchitis, emphysema or chronic obstructive pulmonary disease), go to PHC_Q32A. Otherwise, go to PHC_Q41.
PHC_Q32A	During the interview in your home, it was reported that you had chronic bronchitis, emphysema or chronic obstructive pulmonary disease (COPD). Is this correct?
	1 Yes 2 No DK, RF
РНС_Q36А	Go to PHC_Q4 Are you currently taking any medications for your breathing condition(s)?
	1 Yes 2 No (Go to PHC_Q41) (DK, RF not allowed)
РНС_Q36В	What type(s) of medication(s) are you taking?
	INSTRUCTION: Probe to determine the type(s) of medication(s).
ORMA. OR	Ouick relief medications: Relieve symptoms once they begin. Examples: Salbutamol (Ventolin) Formoterol (Oxese) Ipatropium bromide (Atrovent)
The the	· Controller medications: Prevent symptoms from arising in the first place.
PHC Q37	1Quick relief2Controller3Both(DK, RF not allowed)
РНС Q37	Do you have your quick relief medication(s) with you?
, or i	1 Yes 2 No (DK, RF not allowed)

PHC_Q41 Do you have any acute conditions, for example a sprained wrist, flu or other infection? An acute condition develops suddenly and is shortterm. 1 Yes 2 No (Go to PHC_Q43) (DK, RF not allowed) .pondei INSTRUCTION: What type(s) of acute condition(s) does the respondent PHC_N41 have? Mark all that apply. 1 Bone, joint or muscle problem 2 Flu or other infection 3 Recovery from a medica procedure Other health problem 4 Fever 6 (DK, RF not allowed) PHC N42 INSTRUCTION: From which test(s) should the respondent be excluded because of this condition? Probe to determine the seriousness of the condition. Mark all that apply. 01 Activity monitor 02 Grip strength **mCAF** 03 Sit and reach 04 05 Jumping PHC_Q43 PHC_Q4 mechanography Quantitative computed 06 tomography 07 Vision 90 None (DK, RF not allowed) Do you have a chronic condition, for example arthritis, heart condition, multiple sclerosis, or colostomy bag, that may prevent you from participating in any of the tests today? A chronic condition develops slowly and is long lasting. INSTRUCTION: Show the laminated card with pictures of each test to the respondent. Yes 2 (Go to PHC_Q51) No (DK, RF not allowed) INSTRUCTION: What type(s) of chronic condition(s) does the respondent have?

Mark all that apply. 1 Bone, joint or muscle problem 2 Cardiovascular condition 3 Respiratory condition Physically impaired 4 5 Other health problem (DK, RF not allowed) INSTRUCTION: From which test(s) should the respondent be excluded PHC_N44 because of this condition? Probe to determine the seriousness of the condition. Mark all that apply. 01 Activity monitor 02 Grip strength 03 mCAFT 04 Sit and reack 05 Jumping mechanography 06 Quantitative computed tomography 07 Vision 90 None (DK, RF not allowed) Do you have a clotting condition such as haemophilia or von PHC_Q51 Willebrand disease? 1 Yes 2 A STATE STATE No (DK, RE not allowed) PHC_Q52 Have you received chemotherapy in the past four weeks? Yes 2 No (DK, RF not allowed) PHC Q56 Have you ever felt dizzy or fainted during a blood draw? 1 Yes 2 No (DK, RF not allowed) If CON_AGE < 19, go to PHC_END. PHC C5 Otherwise, go to PHC_Q57A. PHC Q57A Have you ever had a mastectomy?

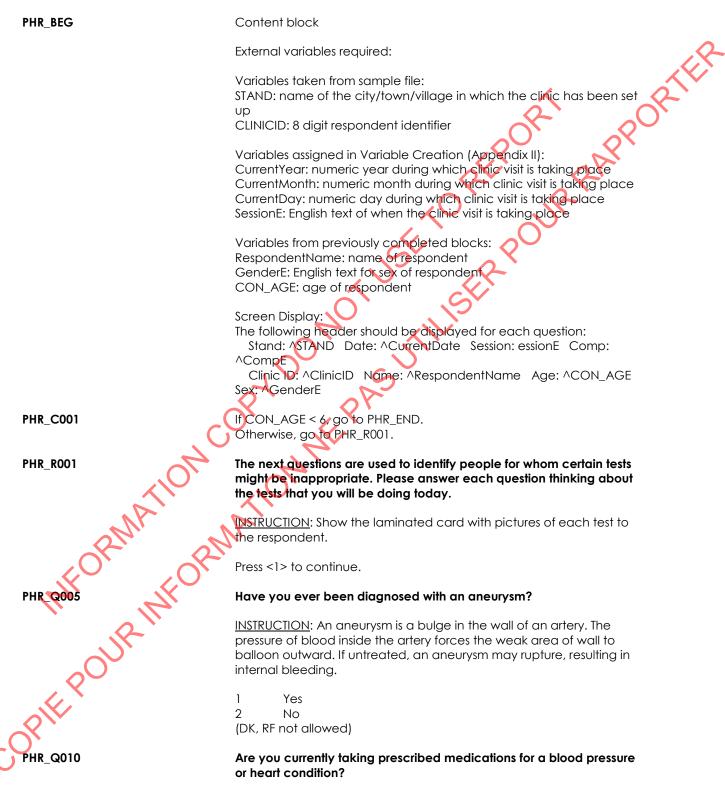
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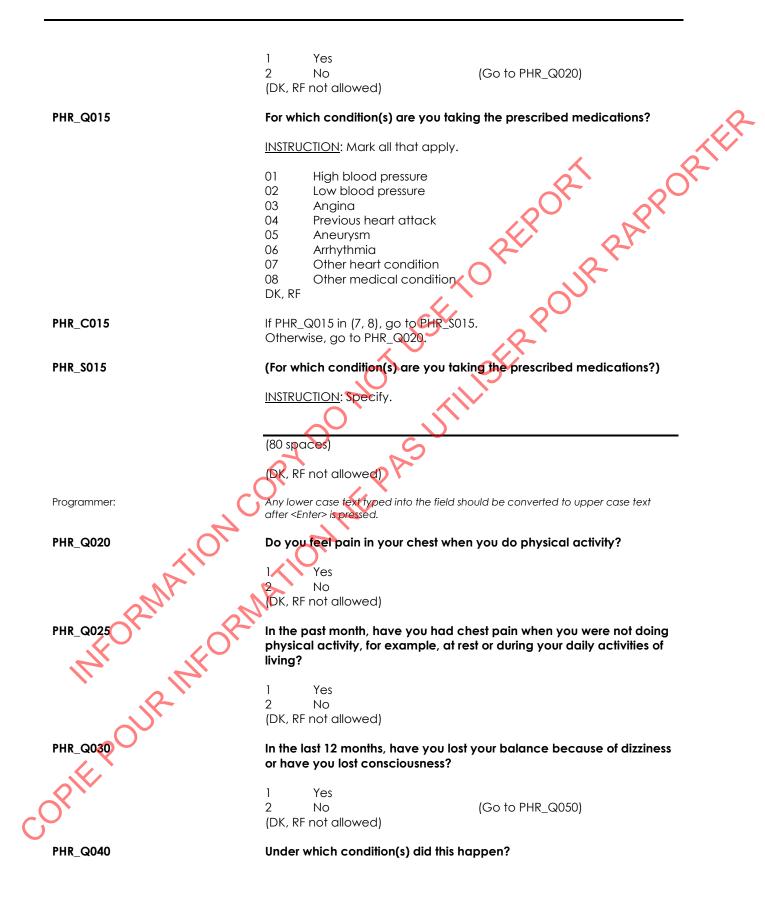
Women's Health Restrictions (WHR)

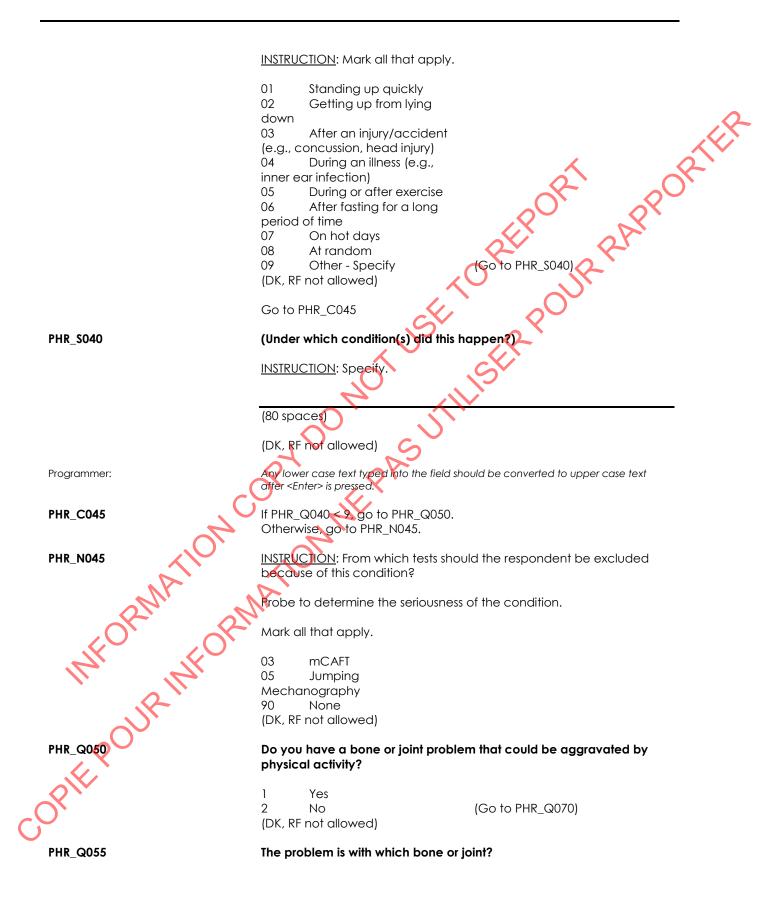


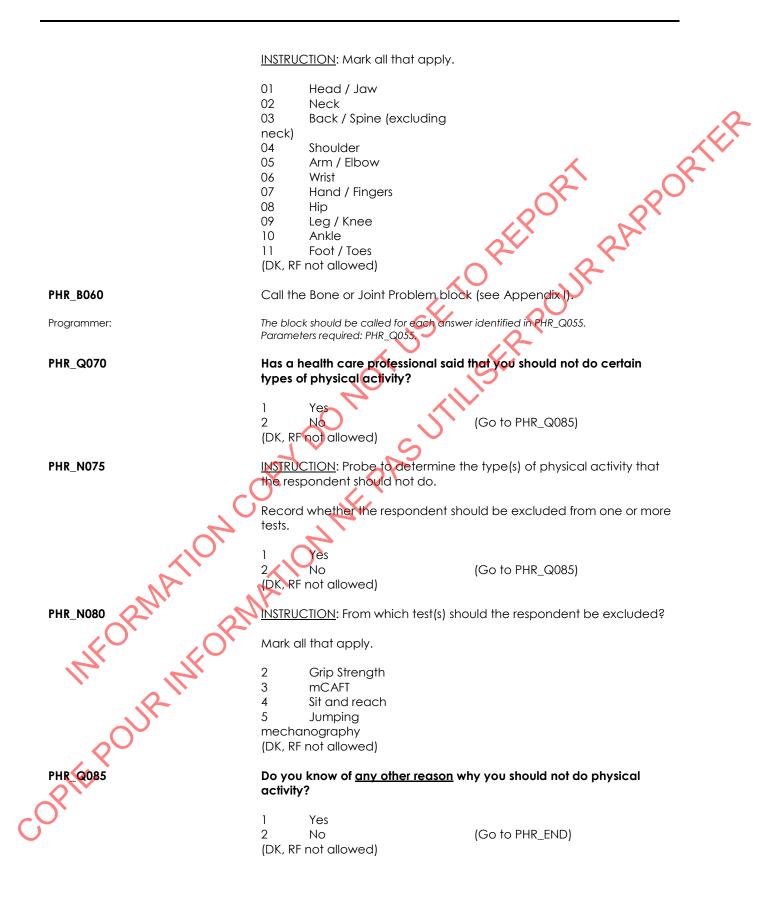
INSTRUCTION: Minimum is 8; maximum is ^CON_AGE. |_|_| (MIN: 8) APPORTER (MAX: 79) DK, RF WHR_C15 If CON_AGE > 59, go to WHR_END. Otherwise, go to WHR_Q015. **WHR Q015** Are you currently pregnant? A. 1 Yes 2 No DK (RF not allowed) Go to WHR Q025 **WHR_Q020** In what week are you? (MIN: 1) (MAX: 45) DK, R WHR END Goto ts there a possibility that you may be pregnant? By "possibility" I mean **WHR Q025** being sexually active without the use of contraception. WHR_END CHIP CONTRACTOR INSTRUCTION: Examples of contraception include the regular use of birth control pills, patches, injections (Depo-Provera®), intrauterine devices (IUD), diaphragms, condoms, as well as tubal ligation (tubes tied), vasectomy and hysterectomy. Select "No" if the respondent does not believe that she can become pregnant as a result of menopause or infertility. 1 Yes 2 No (DK, RF not allowed) OPIEP

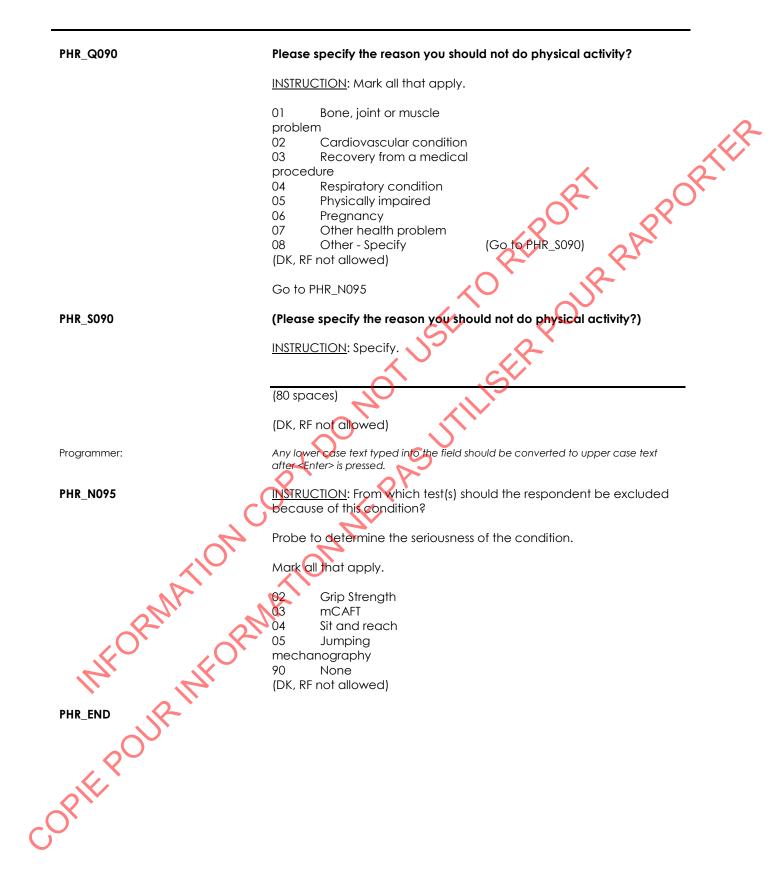
Physical Activity Restrictions (PHR)





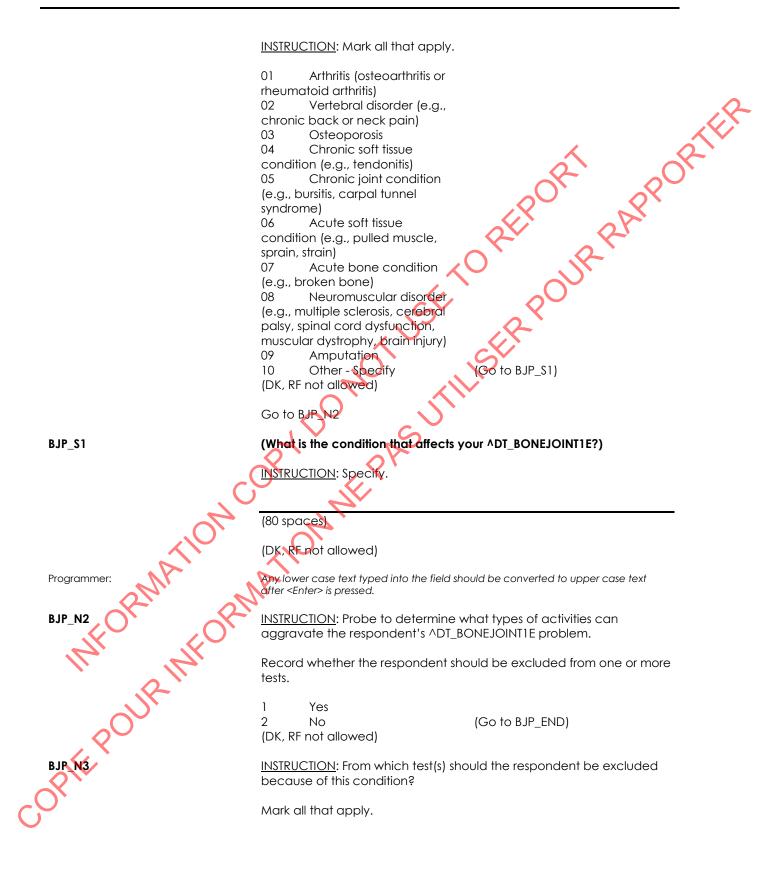


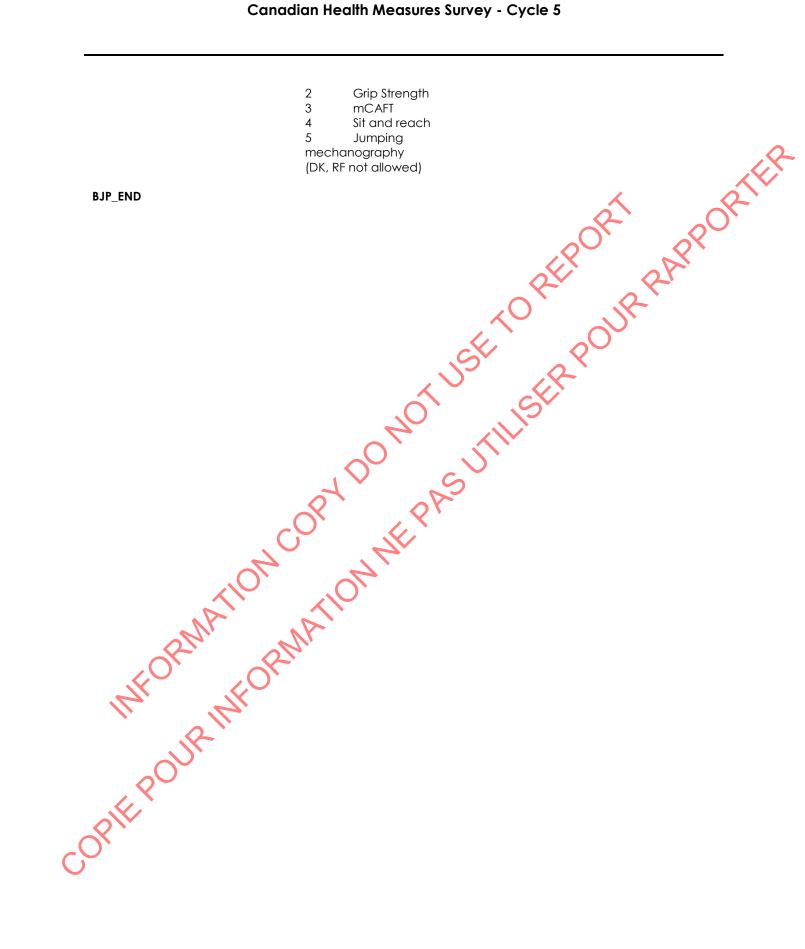




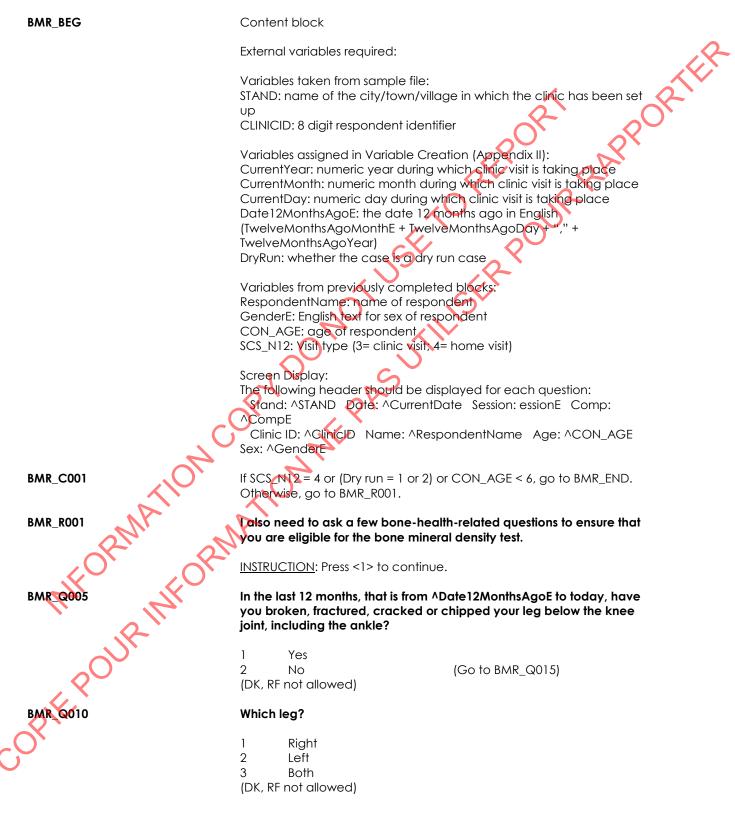
Bone or Joint Problem (BJP)

BJP_BEG	Content block
	External variables required:
	Variables taken from sample file: STAND: name of the city/town/village in which the clinic has been set up CLINICID: 8 digit respondent identifier
	Variables assigned in Variable Creation (Appendix II): CurrentYear: numeric year during which clinic visit is taking place CurrentMonth: numeric month during which clinic visit is taking place CurrentDay: numeric day during which clinic visit is taking place SessionE: English text of when the clinic visit is taking place
	Variables from previously completed blocks: RespondentName: name of respondent GenderE: English text for sex of respondent CON_AGE: age of respondent PHR_Q055: bone (s) or joint(s) that could be aggravated by physical activity
	Screen Display: The following header should be displayed for each question: Stand: ASTAND Date ACurrentDate Session: essionE Comp: ACompE Clinic ID: AClinicID Name: ARespondentName Age: ACON_AGE Sex: AGenderE
BJP_Q1	What is the condition that affects your ADI BONE IOINTIE?
RM	ATOMATION ATOMATION AND A STORE OF STEREOR ATOMATIC
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Bone Mineral Density Test Restrictions (BMR)

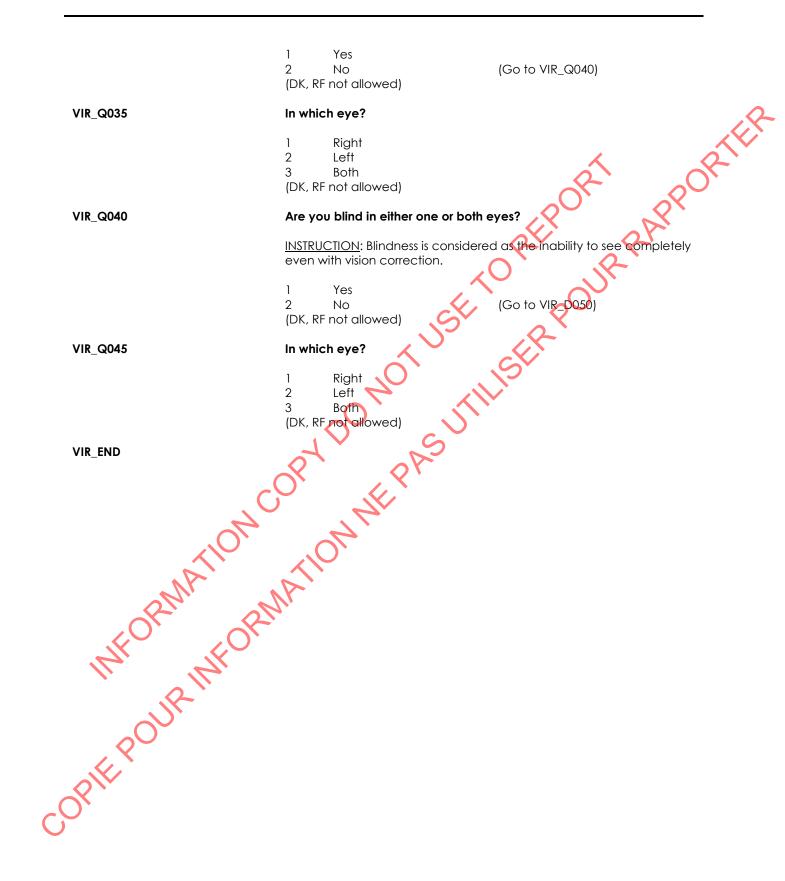


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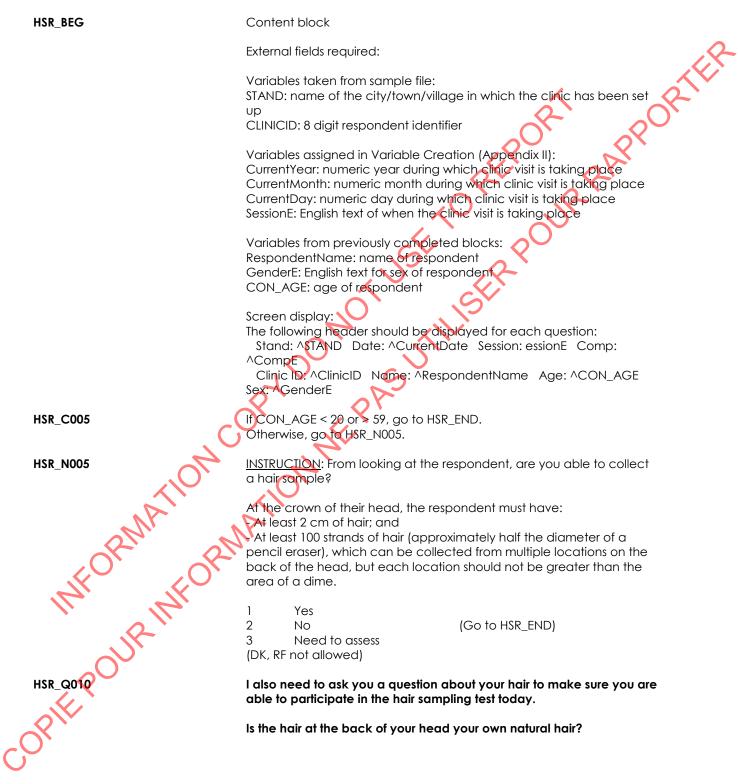
Vision Component Restrictions (VIR)

VIR_BEG	Content block
	External variables required:
	Variables taken from sample file: STAND: name of the city/town/village in which the clinic has been set up CLINICID: 8 digit respondent identifier DV_NONGESTATIONALDIABETES = Whether the respondent has been diagnosed with type 1 or type 2 diabetes (1 = ves; 2 = No)
	Variables assigned in Variable Creation (Appendix II): CurrentYear: numeric year during which clinic visit is taking place CurrentMonth: numeric month during which clinic visit is taking place CurrentDay: numeric day during which clinic visit is taking place SessionE: English text of when the clinic visit is taking place TwelveMonthsAgoYear: Numeric year of date twelve months before
	the clinic visit TwelveMonthsAgoMonth: Numeric month of date twelve months before the clinic visit TwelveMonthsAgoDay: Numeric day of date twelve months before the clinic visit
	TwelveMonthsAgoMonthE: English text of month of date twelve months before the clinic visit Datel 2MonthsAgoE: the date 12 months ago in English (TwelveMonthsAgoMonthE + TwelveMonthsAgoDay + "," +
	TwelveMonthsAgoYear) TwelveWeeksAgoYear: Numeric year of date 12 weeks (84 days) before the clinic visit TwelveWeeksAgoMonth: Numeric month of date 12 weeks (84 days)
X	before the clinic visit TwelveWeeksAgoDay: Numeric day of date 12 weeks (84 days) before the clinic visit TwelveWeeksAgoMonthE: English text of month 12 weeks (84 days)
CORMAN	Defore the clinic visit Date12WeeksAgoE: the date 12 weeks (84 days) ago in English (TwelveWeeksAgoMonthE + TwelveWeeksAgoDay + "," +
IN IR IN	Variables from previously completed blocks: RespondentName: name of respondent GenderE: English text for sex of respondent CON_AGE: age of respondent
COPIE POUR IN	SCS_N12: Visit type (3= clinic visit; 4= home visit) Screen Display: The following header should be displayed for each question: Stand: ^STAND Date: ^CurrentDate Session: essionE Comp: ^CompE
C _O	Clinic ID: ^ClinicID Name: ^RespondentName Age: ^CON_AGE Sex: ^GenderE

VIR_C001	If SCS_N12 = 4 or CON_AGE < 6 or (CON_AGE > 19 AND CON_AGE < 40 and DV_NONGESTATIONALDIABETES = 2), go to VIR_END. Otherwise, go to VIR_R001.
VIR_R001	Now, some questions about the health and care of your eyes.
	INSTRUCTION: Press <1> to continue.
VIR_Q005	Do you have an eye infection?
	INSTRUCTION: Symptoms of eye infections can include a red, painful eye that is tearing and with coloured discharge
	1 Yes 2 No (DK, RF not allowed)
VIR_Q010	In the past year, that is from ^Date12MonthsAgoE to vesterday, have you received corneal transplant surgery?
	INSTRUCTION: A corneal transplant, also known as corneal grafting, is a surgical procedure where a damaged or diseased cornea is replaced by donated corneal tissue.
	1 Yes 2 No (DK, RF not allowed) (Go to VIR_Q020)
VIR_Q015	In which eye? P Right 2 Left 3 Both (DK, RF not allowed)
VIR_Q020	In the past 12 weeks, that is from ^Date12WeeksAgoE to yesterday, have you had any of the following: an eye injury, an injection of medicine into an eye or an eye surgery, including corrective laser eye surgery?
KOK COR	<u>INSTRUCTION</u> : Do not include medicated eye drops (such as drops for glaucoma) or unmedicated drops (such as artificial tears, Visine etc.).
VIR_Q025 OUR INFORMATION VIR_Q025 OUR INFORMATION OF THE PROPERTY OF THE PROPE	1 Yes 2 No (Go to VIR_Q030) (DK, RF not allowed)
VIR_Q025	In which eye?
PIEF	1 Right 2 Left 3 Both
) *	(DK, RF not allowed)



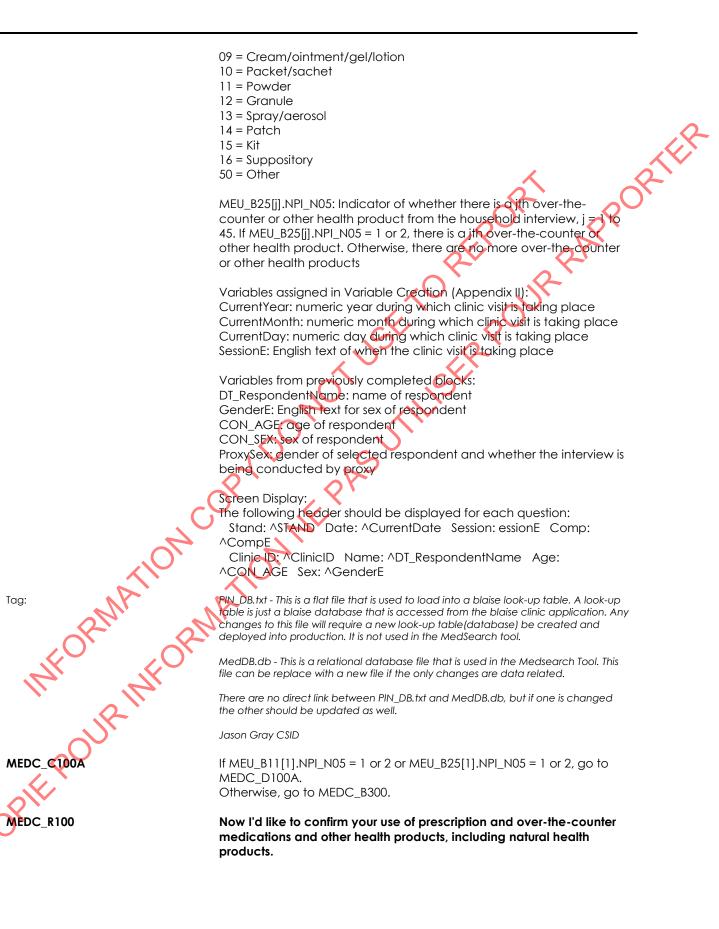
Hair Sample Restriction (HSR)



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MEDC_BEG	Content block
	External fields required:
	Variables taken from sample file: STAND: name of the city/town/village in which the clinic has been set up CLINICID: 8 digit respondent identifier
	MEU_B11[i].DV_PIN: Product Identification Number (DIN, DIN-HM, NPN or EN) of the ith prescription medication from the household interview, i = 1 to 45. MEU_B11[i].DV_Product_name: Name of the ith prescription medication from the household interview, i = 1 to 45. MEU_B11[i].DV_Short_form: Code for the form of ith prescription medication from the household interview, i = 1 to 45 (used to derive dynamic text for take/use).
	01 = Tablet/pill/capsule 02 = Lozenge 03 = Chew/gummy 04 = Globule 05 = Drop 06 = Tincture 07 = Liquid/solution 08 = Suspension
	09 = Cream/ointment/gel/lotion 10 = Packet/sachet 11 = Powder 12 = Granule 13 = Spray/aerosol 14 = Patch 15 = Kit 16 = Suppository
RMATION	50 = Other
optic pour information	MEU_B25[j].DV_PIN: Product Identification Number (DIN, DIN-HM, NPN or EN) of the jth over-the-counter or other health product from the household interview, j = 1 to 45. MEU_B25[j].DV_Product_name: Name of the jth over-the-counter or health product from the household interview, j = 1 to 45. MEU_B25[j].DV_Short_form: Code for the form of the jth over-the- counter or health product from the household interview, j = 1 to 45 (used to derive dynamic text for take/use).
OPIEX	01 = Tablet/pill/capsule 02 = Lozenge 03 = Chew/gummy 04 = Globule 05 = Drop 06 = Tincture 07 = Liquid/solution 08 = Suspension



	INSTRUCTION: Press <1> to continue.
MEDC_C100B	If MEU_B11[n].NPI_N05 = 1 or 2, go to MEDC_C100C. Otherwise, go to MEDC_C200A.
MEDC_C100C	If MEU_B11[n].DV_Product_Name = RESPONSE, go to MEDC_D100B. Otherwise, go to MEDC_C100B.
MEDC_B101	Call the Confirm Drug Product (CDP) block
Programmer:	Pass "DT_QuestionE = During the interview in your home, if was reported that you were ^DT_TAKE2E ^DV_PRODUCT_NAME. When was the last time that you ^DT_TAKE1E this medication? " as parameter for the 1st product and every other multiple of 5.
	Pass "DT_QuestionE = When was the last time that you ^DT_TAKE1E ^DV_PRODUCT_NAME? " as parameter for all other products.
MEDC_C200A	If MEU_B25[n].NPI_N05 = 1 or 2, go to MEDC_C200B. Otherwise, go to MEDC_B300.
MEDC_C200B	If MEU_B25[n].DV_PRODUCT_NAME = RESPONSE, go to MEDC_D200. Otherwise, go to MEDC_C200A.
MEDC_B201	Call the Confirm Drug Product (CDP) block
Programmer:	Pass "DT_QuestionE = During the interview in your home , it was reported that you were ^DT_TAKE2E ^DV_Product_name. When was the last time that you ^DT_TAKE1E this product? " as parameter for the 1st product and every other multiple of 5.
	Pass "DI_QuestionE = When was the last time that you ^DT_TAKE1E ^DV_Product_name? " as parameter for all other products.
MEDC_B300	Call the Medication Use for clinic (MEUC) block
MEDC_C411A	If CON_AGE < 6, go to MEDC_END. Otherwise, go to MEDC_C411B.
MEDC_C411B	If CON_AGE < 14, go to MEDC_C511. Otherwise, go to MEDC_R411.
MEDC_R411 PMI OPMI OPMI OPMI OPMI OPMI OPMI OPMI	Now I am going to ask you a question about your use of other substances such as performance enhancing or recreational drugs. We ask this question because these drugs can affect the results of the physical and biological measures that we will be taking today. You can be assured that anything you say will remain confidential and that your answer will not screen you out of any tests.
all realized and real real real real real real real real	INSTRUCTION: Press <1> to continue.
MEDC_0411	In the past week have you used any performance enhancing or recreational drugs such as steroids, marijuana or cocaine?
CORIT	1 Yes 2 No DK, RF

MEDC_C511	If MEU_B11[1].NPI_N05 = (EMPTY) and MEDC_B300. MEUC_Q02 <> 1 and MEU_B25[1].NPI_N05 = (EMPTY) and MEDC_B300.MEUC_Q22 <> 1, go to MEDC_END. Otherwise, go to MEDC_N611.
MEDC_N611	INSTRUCTION: From which test(s) should the respondent be excluded because of medication use?
	Mark all that apply.
	02 Grip strength 03 mCAFT 05 Jumping mechanography 90 None (DK, RF not allowed)
Programmer:	Display a list of all medication (prescription and over-the counter, confirmed as well as new ones) immediately below the question header, as follows:
	For each of MEDC_B101 and MEDC_B201: IF CDP_Q1 = 1, 2, 3, 4 or 5 THEN include ^DV_Product_name from sample file in list ENDIF For each of MEDC_B300.MEUC_B11 and MEDC_B300.MEUC_B25: include ^DV_Product_name in list ENDIF If any drugs are to be displayed, include a title as follows: "Medications currently being taken:" Indent the list of products and place a bullet in front of each product.
MEDC_END	NE
COPIE POUR INFORM	ATIONNE

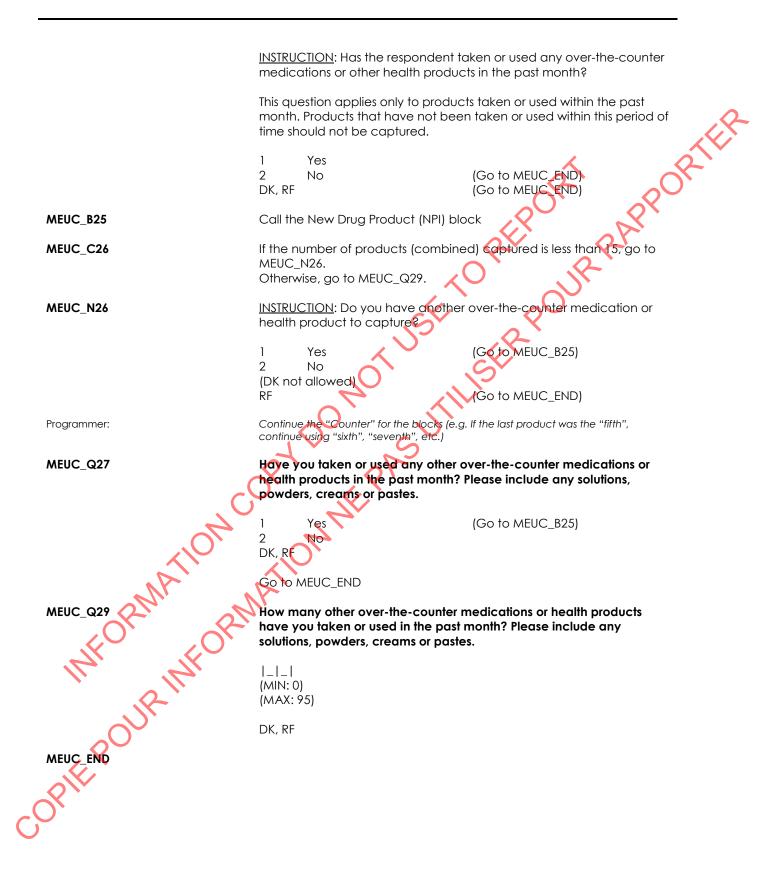
Confirm Drug Product (CDP)



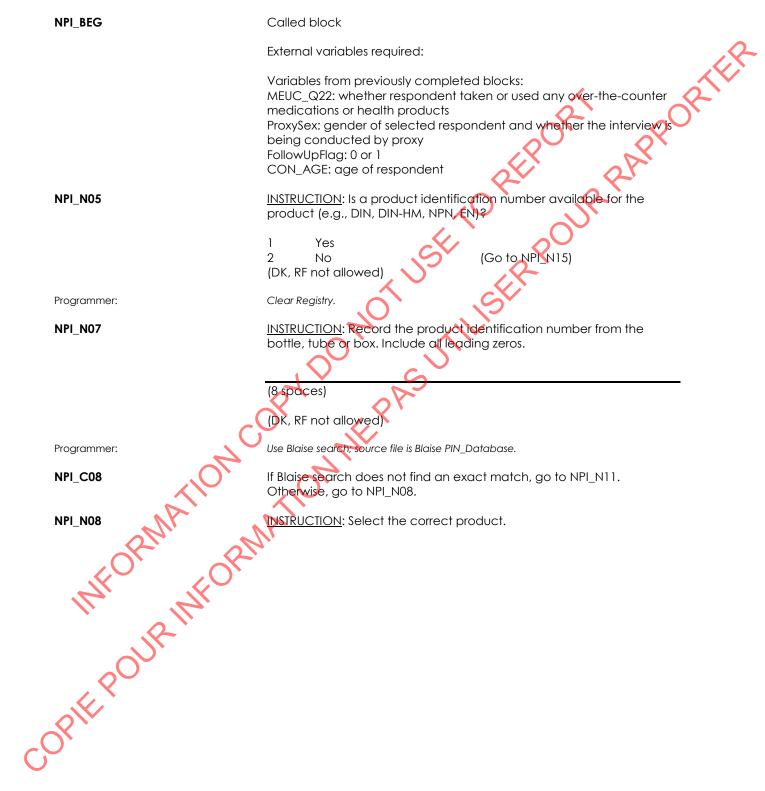
Medication Use for Clinic (MEUC)

MEUC_BEG	Called block	
	External variables required:	R
	Variables from previously completed PROXYSEX: gender of selected responses is being conducted by proxy CON_SEX: sex of respondent CON_AGE: age of respondent RespondentFirstname: first name of DV_PIN: Product Identification Number NPI block	ondent and whether the interview
Programmer:	Set DT_DateLastMonthE = English text of da	te one month ago
MEUC_Q02	In the past month, that is, from ^DT_I taken or used any ^DT_OTHER med or administered by a health professi This includes such things as insulin, /	ications that have been prescribed ional such as a doctor or dentist?
	INSTRUCTION: This question applies of within the past month. Medications taken or used within this period of the captured.	that have been prescribed but not
	1 Yes 2 No DK, RF	(Go to MEUC_Q22) (Go to MEUC_Q22)
MEUC_B11	Call the New product information (N	NPI) block
MEUC_C11	If the number of products captured Otherwise, go to MEUC_Q15.	is less than 15, go to MEUC_N11.
MEUC_N11	INSTRUCTION: Do you have another capture?	prescription medication to
WHO'N SHOK	1 Yes 2 No (DK not allowed)	(Go to MEUC_B11)
Programmer:	RF Continue the "Counter" for the Called Block was the "fifth", continue using "sixth", "seven	
MEUC_Q12	Have you taken or used any other p month? Please include any prescrip	• •
Programmer: MEUC_Q12	1 Yes 2 No DK, RF	(Go to MEUC_B11)
\checkmark	Go to MEUC_Q22	

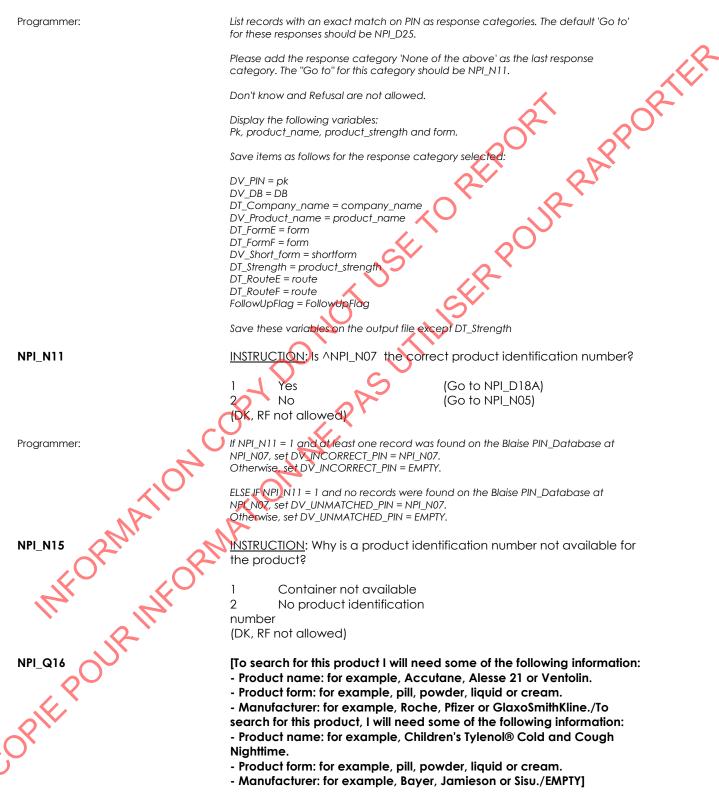
MEUC_Q15 How many other prescription medications have you taken or used in the past month? Please include any prescription creams, injections or patches. |_|_| (MIN: 0) (MAX: 95) DK, RF MEUC Q20 Have you taken or used any [other/EMPTY]over-the-counter medications or other health products, including natural health products in the past month? Over-the-counter medications could include such things as pain killers, antacids, allergy pills and hydrocortisone creams, Examples of health products include vitamins, minerals, amino acids, probiotics, fish oils and other oils, herbal remedies and homeopathic preparations. INSTRUCTION: This question applies only to products taken or used within the past month. Products that have not been taken or used within this period of time should not be captured. Go to MEUC Q21) 1 Yes 2 DK, RF Goto MEUC_END MEUC Q21 How many [other/EMPTY]over-the-counter medications or other health products have you taken or used in the past month? AR MAINTORN (MIN: (MA Go to MEUC_END Have you taken or used any [other/EMPTY]over-the-counter medications or other health products, including natural health products, in the past month, that is, from ^DT_DateLastMonthE to today. JPIE PCI Over-the-counter medications could include such things as pain killers, antacids, allergy pills and hydrocortisone creams. Examples of health products include vitamins, minerals, amino acids, probiotics, fish oils and other oils, herbal remedies and homeopathic preparations.

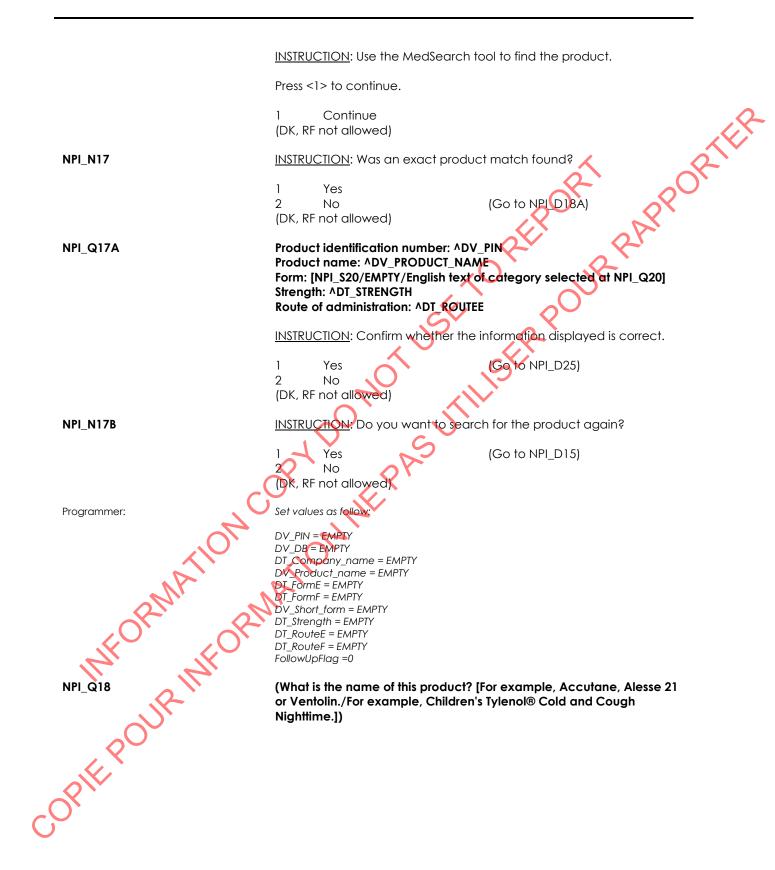


New Product Information (NPI)



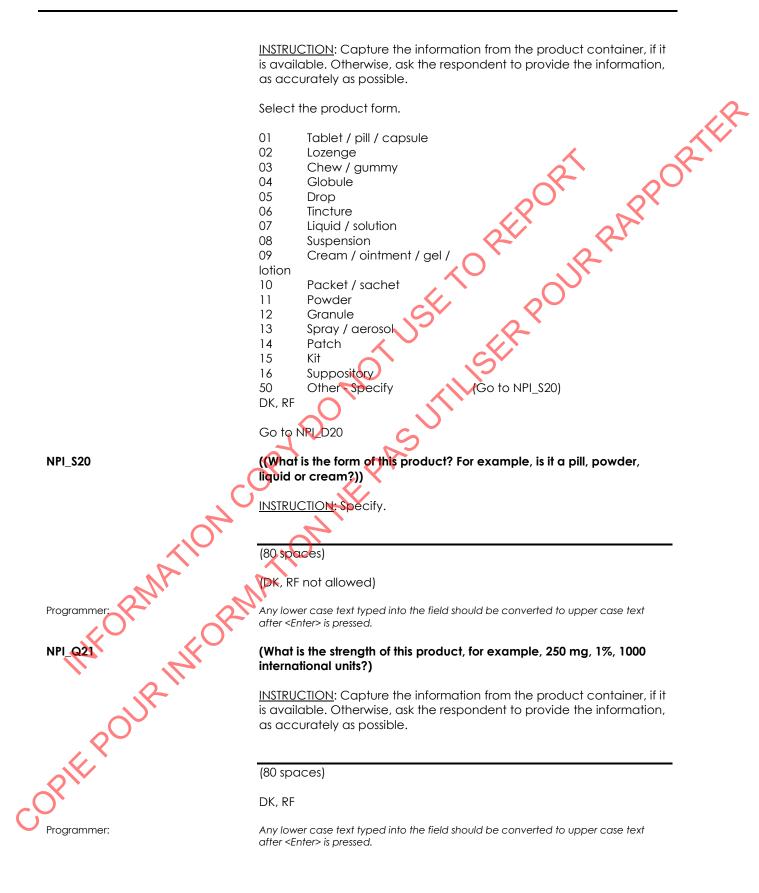
(DK, RF not allowed)

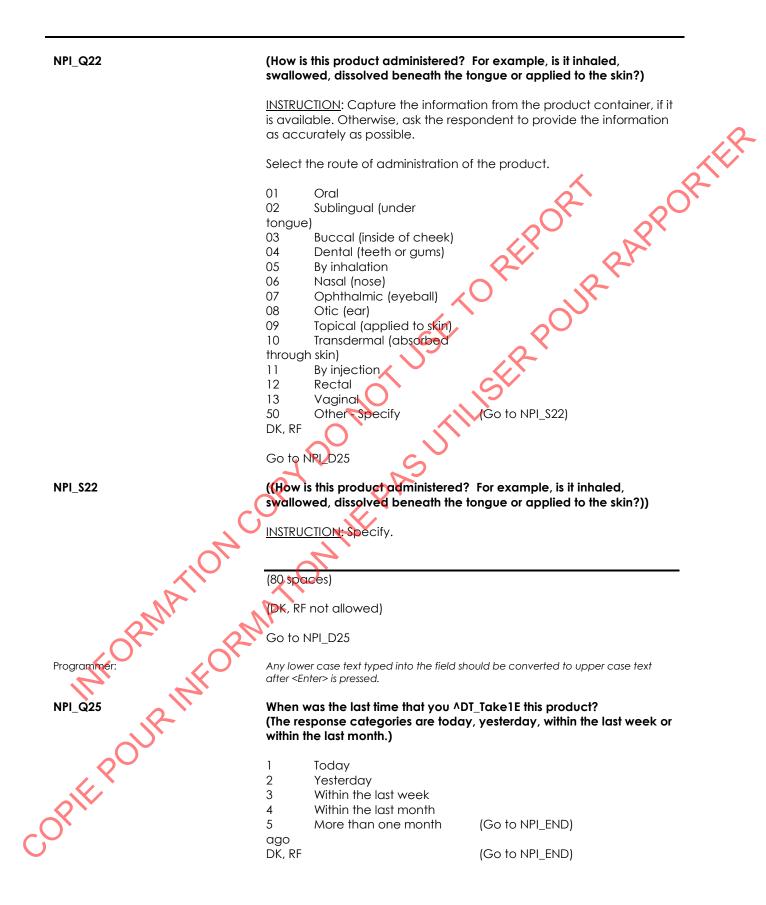




<u>INSTRUCTION</u>: Capture the information from the product container, if it is available. Otherwise, ask the respondent to provide the information, as accurately as possible.

(80 spaces) DK, RF (Go to NPI_END) Any lower case text typed into the field should be converted to upper case text. Programmer: after <Enter> is pressed. NPI_C19 If NPI_N15 = 1, go to NPI_Q20. Otherwise, go to NPI_D19. What company information is found on the product container? NPI Q19 [For example, Roche, Pfizer, GlaxoSmithKline./For example, Bayer, Jamieson or Sisu.] INSTRUCTION: Capture all the company names from the product container. This could include: the manufacturer, the importer and/or the company for which this product was manufactured. If there is no company information on the container, enter <Don't know>. (80 spaces DK, RF opte pour into (Migu Programmer: Any lower case text typed into the field should be converted to upper case text after <Enter> is pressed. (What is the form of this product? For example, is it a pill, powder, liquid or cream?)





NPI_C25	If FollowUpFlag = 1 (administer follow-up questions), go to NPI_D26. Otherwise, go to NPI_END.
NPI_B26	Call the NPI Call Block (NPC).
Programmer:	Pass "DT_NPC_TEXT1E, DT_NPC_TEXT1E and available choices for NPC_N12)" as a parameter.
NPI_Q63	[For how long have you been [using/taking] [this or a similar product/this product]? (^DV_PRODUCT_NAME)/For how long did you [use/take] [this or a similar product/this product]? (^DV_PRODUCT_NAME)]
	(If you stopped [using/taking] it at some point, only include the most recent period of use.)
	INSTRUCTION: Enter time only.
	[Consider a change in prescription (e.g., a change in medication company or dosage) to be a stop in medication use.
	Do not consider a short break in the use of prescribed medication (e.g., temporarily ran out of medication or forgot to take a dose) to be a stop in medication use.
	For prescription medication used on an as-needed basis (e.g., medicated cream for a reoccurring condition), only include the period when it was last used./A similar product could be a different company name (e.g., Jamieson Vitamin C® vs. Flintstones Vitamin C®) or a different form (e.g., tablet vs. liquid).
	Do not consider a short break in the use of a product (e.g., temporarily ran out of a vitamin supplement or forgot to take a dose) to be a stop in product use.
NATIO.	For over-the-counter medication used on an as-needed basis (e.g., medication for a cold or headache), only include the period when it was last used]
Phil Ph	(MIN: 1) (MAX: 500)
NPI_N64 NPI_N64	DK (Go to NPI_Q65) RF (Go to NPI_END)
NPI_N64	INSTRUCTION: Select the reporting period.
	1 Days
	2 Weeks 3 Months
OIK	4 Years (DK, RF not allowed)
NPI_Q65	In the past month, on how many days did you [use/take] this product (^DV_PRODUCT_NAME)?

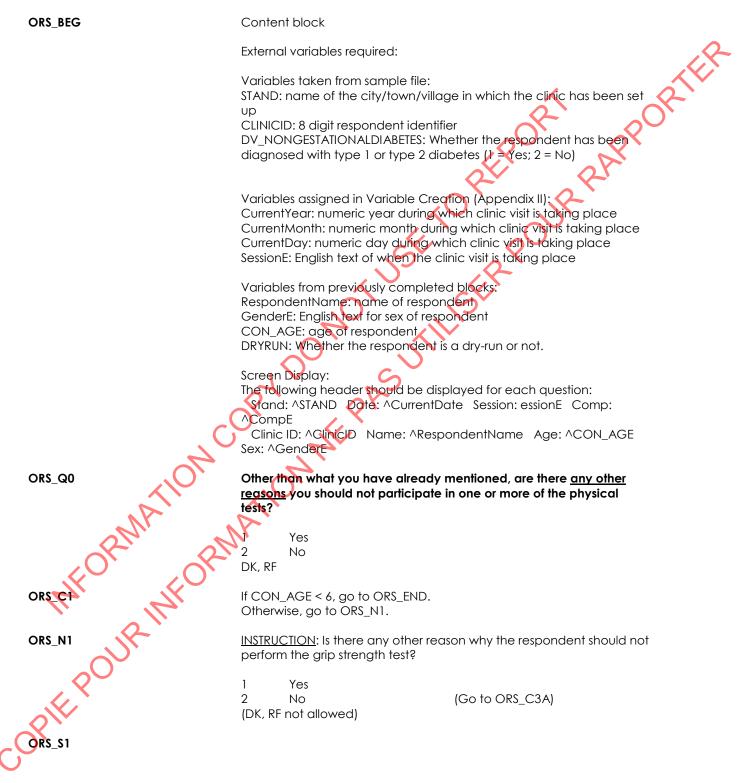


New Product Information - Call Block (NPC)

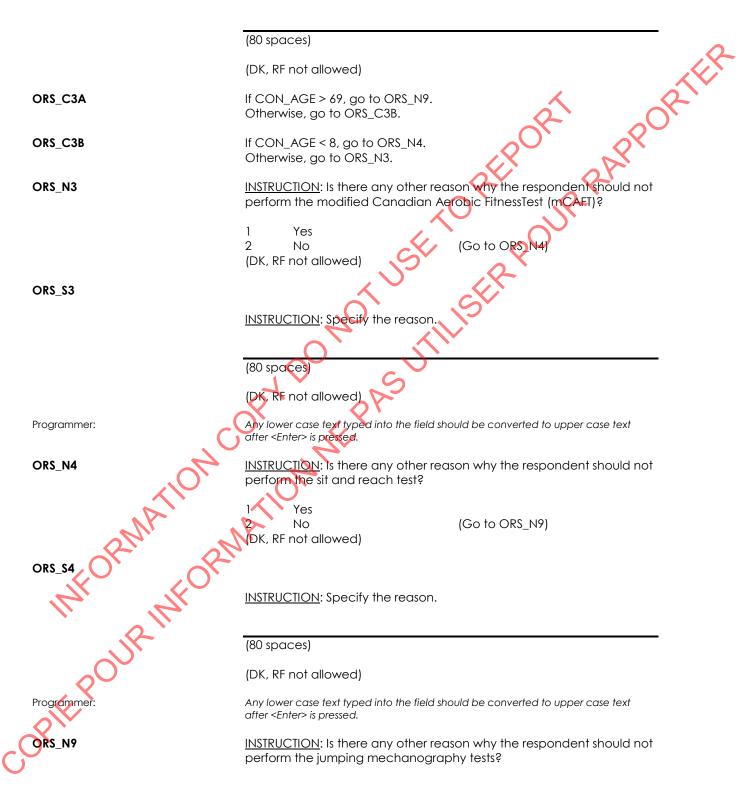
NPC_BEG	Called Block
	External variables required:
	Variables from previously completed blocks: DT_NPC_TEXT1E: example text in English DV_Product_Name: product name in English DT_Take1E: English text fill for "used/took" DT_Take3E: English text fill for "use/take"
NPC_Q10	On the days that you ^DT_TAKE1E this product; how many times did you usually ^DT_TAKE3E it in a single day?
	INSTRUCTION: Record the number of times per day.
	_ _ (MIN: 1) (MAX: 100)
NPC_Q11	DK, RF How much did you usually ^DT_TAKESE each time you ^DT_TAKE1E it?
	INSTRUCTION: Enter the quantity only.
	(MIN: 0.01) (MAX: 99,995.00)
	DK, RF (Go to NPC_END)
NPC_N12	INSTRUCTION: Select the unit of measure.
COPIE POUR INFOR	OfTablets / pills / capsules02Lozenges03Chews / gummies04Millilitres (mL)05Milligrams (mg)06Grams (g)07Tablespoons (Tbsp)08Teaspoons (tsp)09Capfuls10Scoops11Packets / sachets12Drops13Sprays14Doses15Vials16Units50Other - SpecifyDK, RF(Go to NPC_S12)DK, RF(Go to NPC_END)
—	Go to NPC_D12

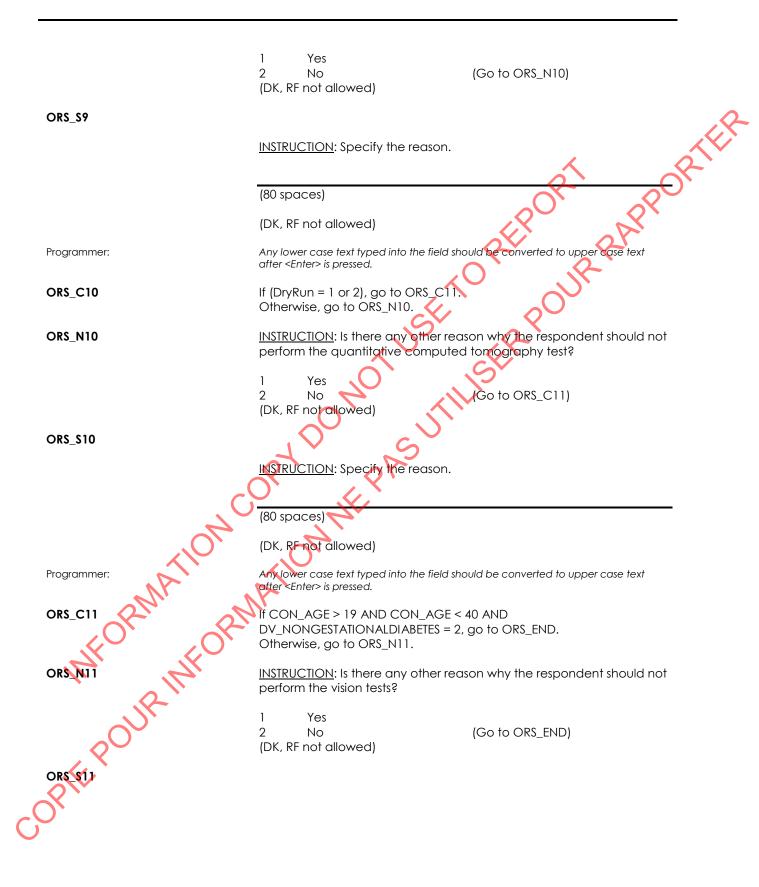
NPC_S12	(Select the unit of measure.)
	INSTRUCTION: Specify.
	(80 spaces) (DK, RF not allowed)
Programmer:	Any lower case text typed into the field should be converted to upper case text after <enter> is pressed.</enter>
NPC_Q14	So you ^DT_TAKE1E ^NPC_Q11 [DT_UNITE] ^NPC_Q10 [time/times] that each day you ^DT_TAKE1E this product (^DV_PRODUCT_NAME) is that correct?
	1 Yes 2 No (DK, RF not allowed) (Go to NPC_Q10)
NPC_END	JSt Rt
	NOT THEFT
	10° SUI
	M COPT NEPAS
	M MM
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Other Reason for Screening Out (ORS)



INSTRUCTION: Specify the reason.





(80 spac	es)
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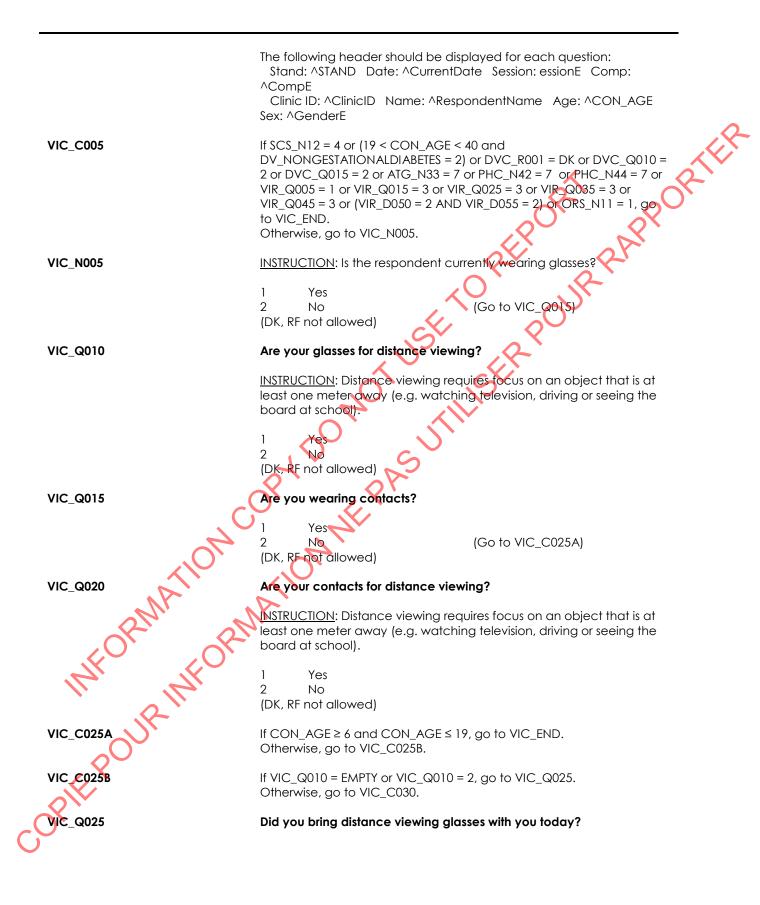
DVC_BEG	Content block
	External variables required:
	Variables taken from sample file: STAND: name of the city/town/village in which the clinic has been set up CLINICID: 8 digit respondent identifier VPR_Q010: Whether the respondent requires distance viewing glasses or contacts DV_NONGESTATIONALDIABETES = whether the respondent has been diagnosed with type 1 or type 2 diabetes (1 = Yes; 2 = No)
	Variables assigned in Variable Creation (Appendix II): CurrentYear: numeric year during which clinic visit is taking place CurrentMonth: numeric month during which clinic visit is taking place CurrentDay: numeric day during which clinic visit is taking place SessionE: English text of when the clinic visit is taking place
	Variables from previously completed blocks: RespondentName: name of respondent GenderE: English text for sex of respondent CON_AGE: age of respondent ATG_N33: Test exclusion due to alcohol consumption
	PHC_N42:Test exclusion due to an acute condition PHC_N44:Test exclusion due to a chronic condition VIR_Q005:Test exclusion due to eye infection(1 = Yes, 2 = No) VIR_Q015:Test exclusion due to undergoing corneal transplant surgery within the past 12 months. Eye specific. (1 = Right, 2 = Left, 3 = Both) VIR_Q025:Test exclusion due to undergoing an eye injury, an injection
.0	of medicine into an eye or an eye surgery, including corrective laser eye surgery within the past 12 weeks.Eye specific. (1 = Right, 2 = Left, 3 = Both) VIR_Q035:Test exclusion due to having an artificial eye. Eye specific. (1 = Right, 2 = Left, 3 = Both)
RMATH	VIR_Q045:Test exclusion due to being blind. Eye specific. (1 = Right, 2 = Left, 3 = Both) VIR_D050: whether the right eye should be included in the block based on the vision restriction questions (1 = Yes, 2 = No) VIR_D055: whether the left eye should be included in the block based
INFOI INFO	on the vision restriction questions (1 = Yes, 2 = No) ORS_N11: Whether the respondent should not perform Vision for any other reason (1 = Yes; 2 = No)
PIE POUR INFO	PROXYSEX: gender of selected respondent and whether the interview is being conducted by proxy 1 = male, non-proxy 2 = female, non-proxy 3 = male, proxy 4 = female, proxy
SPIL	Screen Display: The following header should be displayed for each question: Stand: ^STAND Date: ^CurrentDate Session: essionE Comp: ^CompE Clinic ID: ^ClinicID Name: ^RespondentName Age: ^CON_AGE

DVC_R001	Now, some questions about eyeglasses and contacts.
	INSTRUCTION: Press <1> to continue.
Programmer:	Allow 'DK' as a response category.
DVC_C005	If DVC_R001 = DK, go to DVC_END. Otherwise, go to DVC_D005.
DVC_Q010	Do you wear eyeglasses or contacts?
	1 Yes 2 No (DK, RF not allowed)
DVC_C015	If SCS_N12 = 4 or (DVC_Q010 = 1 AND (19 < CON_AGE < 40 AND DV_NONGESTATIONALDIABETES = 2)) or DVC_Q010 = 2 or ATG_N33 = 7 or PHC_N42 = 7 or PHC_N44 = 7 or VIR_Q005 = 1 or VIR_Q015 = 3 or VIR_Q025 = 3 or VIR_Q035 = 3 or VIR_Q045 = 3 or (VIR_D050 = 2 AND VIR_D055 = 2) or ORS_N11 = 1, go to DVC_END. Otherwise, go to DVC_D015.
DVC_Q015	Do you use eyeglasses or contacts for distance viewing? For example, while watching television or [driving/seeing the board at school]?
	INSTRUCTION: Distance viewing requires focus on an object that is at least one meter away. If the respondent confirms that they use eyeglasses or contacts for only one of the examples listed, then this question should be answered as yes.
	(Go to DVC_END) 2 No (DK, RF not allowed)
DVC_C020	If CON_AGE ≥ 6 and CON_AGE ≤ 19, go to DVC_END. Otherwise, go to DVC_N020.
DVC_N020	NSTRUCTION: Is the respondent currently wearing glasses?
WFOR JFC	1 Yes 2 No (DK, RF not allowed)
DVC_Q025	Are you wearing contacts?
POUR	1 Yes 2 No (Go to DVC_END) (DK, RF not allowed)
DVC_Q030	In order to perform all of the vision tests today, you will need to remove your contacts.
5	

ut months and the second of th

VIC_BEG	Content block
	External variables required:
	Variables taken from sample file: STAND: name of the city/town/village in which the clinic has been set
	up CLINICID: 8 digit respondent identifier DV_NONGESTATIONALDIABETES = whether the respondent has been
	diagnosed with type 1 or type 2 diabetes $(1 = Yes; 2 = No)$
	Variables assigned in Variable Creation (AppendixII): CurrentYear: numeric year during which clinic visit is taking place CurrentMonth: numeric month during which clinic visit is taking place CurrentDay: numeric day during which clinic visit is taking place SessionE: English text of when the clinic visit is taking place
	Sessione. English text of when the clinic visit is taking piece
	Variables from previously completed blocks: RespondentName: name of respondent
	GenderE: English text for sex of respondent
	CON_AGE: age of respondent DVC_R001: introduction to vision eyewear questions
	DVC_Q010: Whether the respondent wears eyeglasses or contacts (1=
	Yes, 2 = No) DVC_Q015: Whether the respondent wears distance viewing gla sses
	or contacts (1 = Yes, 2 = No) ATG_N33: Test exclusion due to alcohol consumption
	PHC_N42:Test exclusion due to an acute condition
	PHC_N44:Test exclusion due to a chronic condition
	VIR_Q005 :Test exclusion due to eye infection(1 = Yes, 2 = No)
4	 VIR_Q015:Test exclusion due to undergoing corneal transplant surgery within the past 12 months. Eye specific. (1 = Right, 2 = Left, 3 = Both)
	VIR_Q025:Test exclusion due to undergoing an eye injury, an injection
	of medicine into an eye or an eye surgery, including corrective laser
	eve surgery within the past 12 weeks.Eye specific. (1 = Right, 2 = Left, 3 Both)
2 Mil	VIR_Q035:Test exclusion due to having an artificial eye. Eye specific. (1
	Fight, 2 = Left, 3 = Both) VIR_Q045:Test exclusion due to being blind. Eye specific. (1 = Right, 2 =
	Left, $3 = Both$)
14. 7	VIR_D050: whether the right eye should be included in the block based on the vision restriction questions (1 = Yes, 2 = No)
	VIR_D055: whether the left eye should be included in the block based
	on the vision restriction questions $(1 = Yes, 2 = No)$
COPIE POUR INFO	ORS_N11: Whether the respondent should not perform Vision for any other reason (1 = Yes; 2 = No)
	PROXYSEX: gender of selected respondent and whether the interview
×	is being conducted by proxy
	1 = male, non-proxy
$\mathcal{A}\mathcal{O}^{\star}$	2 = female, non-proxy
\cup	3 = male, proxy 4 = female, proxy
	Screen Display:

 \mathbf{S}



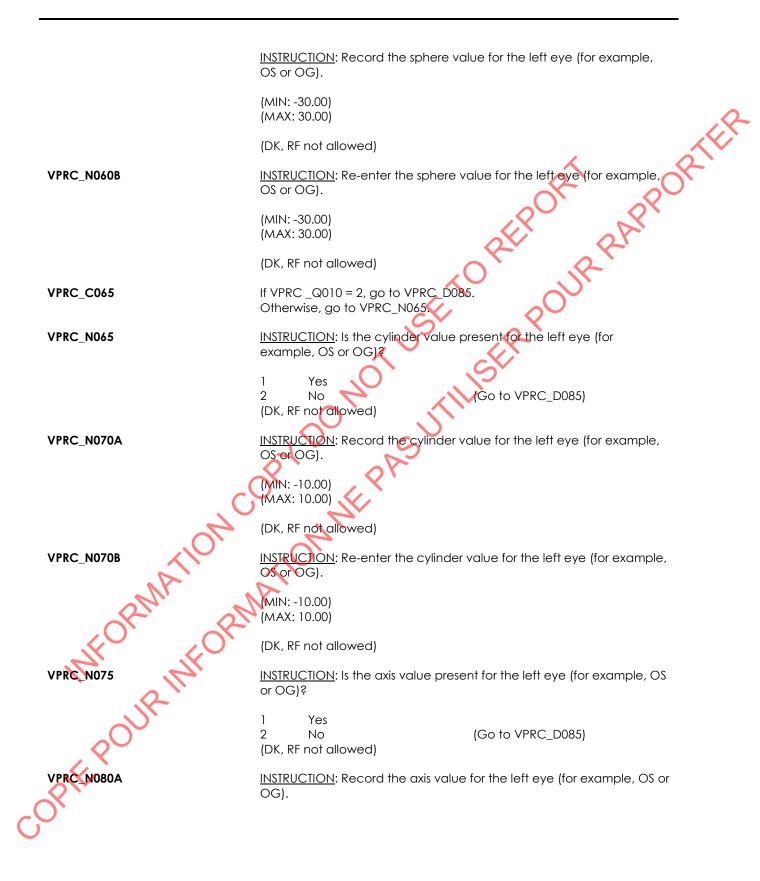
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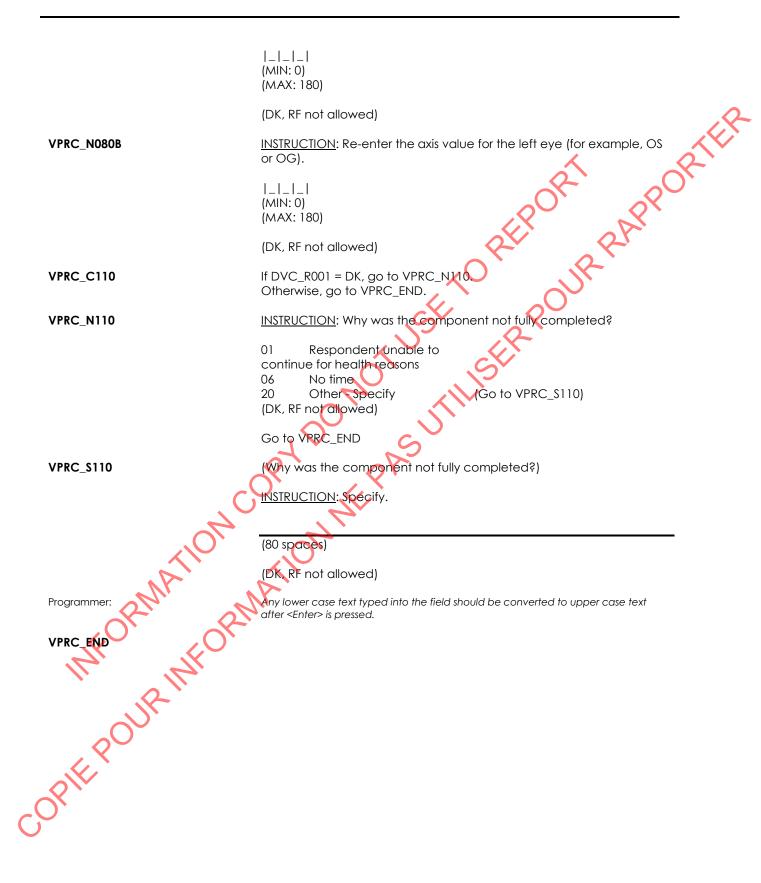
Vision Prescription Clinic (VPRC)

VPRC_BEG	Content block
	External variables required:
	Variables taken from sample file: STAND: name of the city/town/village in which the clinic has been set up CLINICID: 8 digit respondent identifier VPR_Q020: if the eyeglass or contact prescription was provided on the household visit Variables assigned in Variable Creation (Appendix II):
	CurrentYear: numeric year during which clinic visit is taking place CurrentMonth: numeric month during which clinic visit is taking place CurrentDay: numeric day during which clinic visit is taking place SessionE: English text of when the clinic visit is taking place
	Variables from previously completed blocks: RespondentName: name of respondent GenderE: English text for sex of respondent CON_AGE: age of respondent DVC_R001: questions about eyeglasses or contacts
	DVC_R001. Questions about eyegicasses of contacts DVC_Q010: Whether the respondent wears eyeglasses or contacts
	PROXYSEX: gender of selected respondent and whether the interview is being conducted by proxy 1 = male, non-proxy 2 = female, non-proxy 3 = male, proxy
X10N	4 = female, proxy Screen Display: The following header should be displayed for each question:
RMA	Stand: ^STAND Date: ^CurrentDate Session: essionE Comp: CompE Clinic ID: ^ClinicID Name: ^RespondentName Age: ^CON_AGE Sex: ^GenderE
VPRC_COD5A	If DVC_R001 = DK, go to VPRC_N110. Otherwise, go to VPRC_C005B.
VPRC_C005B	If DVC_Q010 = 2, go to VPRC_END. Otherwise, go to VPRC_C005C.
VPRC_C005C	If VPR_Q020 = 1, go to VPRC_Q005. Otherwise, go to VPRC_C010.
VPRC_Q005	Has your eyeglass or contact prescription changed since the household interview?
C~	1 Yes 2 No (DK, RF not allowed)

VPRC_C010	If VPRC_Q005 = 2, go to VPRC_END. Otherwise, go to VPRC_D010.
VPRC_Q010	Do you have your [new/current] eyeglass or contact prescription with you today?
	1 Yes (Go to VPRC_Q020) 2 No (DK, RF not allowed)
VPRC_Q015	Do you know the power or strength of your eyeglass or contact prescription?
	1 Yes (Go to VPRC_Q030A) 2 No (Go to VPRC_END) DK, RF (Go to VPRC_END)
VPRC_Q020	I will now record the values from the prescription; this will just take a few minutes. (Is this prescription for your eyeglasses or contacts?)
	<u>INSTRUCTION</u> : Please record the most recent prescription available. However, if the respondent has both an eyeglass and contact prescription with the same date, record the eyeglass prescription only.
	1 Eyeglasses 2 Contacts DK (RF not allowed)
VPRC_N025	INSTRUCTION: Is the sphere value present for the right eye (for example, OD)?
	2 No (Go to VPRC_N055) (DK, RF not allowed)
VPRC_Q030A	(What is the power or strength of the lens for the right eye?)
RIM RM	NSTRUCTION: Record the sphere value for the right eye (for example, OD).
INFO INFOI	(MIN: -30.00) (MAX: 30.00)
2	(DK, RF not allowed)
VPRC_N030B	INSTRUCTION: Re-enter the sphere value for the right eye (for example, OD).
OIEX	(MIN: -30.00) (MAX: 30.00)
$\sim 0^{\circ}$	(DK, RF not allowed)
VPRC_C035	If VPRC _Q010 = 2, go to VPRC_Q060A. Otherwise, go to VPRC_N035.

VPRC_N035	<u>INSTRUCTION</u> : Is the cylinder value present for the right eye (for example, OD)?
	1 Yes 2 No (Go to VPRC_N055) (DK, RF not allowed)
VPRC_N040A	INSTRUCTION: Record the cylinder value for the right eye (for example, OD).
	(MIN: -10.00) (MAX: 10.00)
	(DK, RF not allowed)
VPRC_N040B	INSTRUCTION: Re-enter the cylinder value for the right eye (for example, OD).
	(MIN: -10.00) (MAX: 10.00)
	(DK, RF not allowed)
VPRC_N045	INSTRUCTION: Is the axis value present for the right eye (for example, OD)?
	1 Yes 2 No (DK, RF not allowed) (Go to VPRC_N055)
VPRC_N050A	INSTRUCTION: Record the axis value for the right eye (for example, OD).
TION	_ _ (MIN: 0) (MAX: 180)
MA	(DK, RF not allowed)
VPRC_N050B	<u>INSTRUCTION</u> : Re-enter the axis value for the right eye (for example, OD).
INFO. UR INFO	_ _ (MIN: 0) (MAX: 180)
J	(DK, RF not allowed)
VPRC_N055	<u>INSTRUCTION</u> : Is the sphere value present for the left eye (for example, OS or OG)?
SPIL	1 Yes 2 No (Go to VPRC_D085) (DK, RF not allowed)
VPRC_Q060A	(What is the power or strength of the lens for the left eye?)

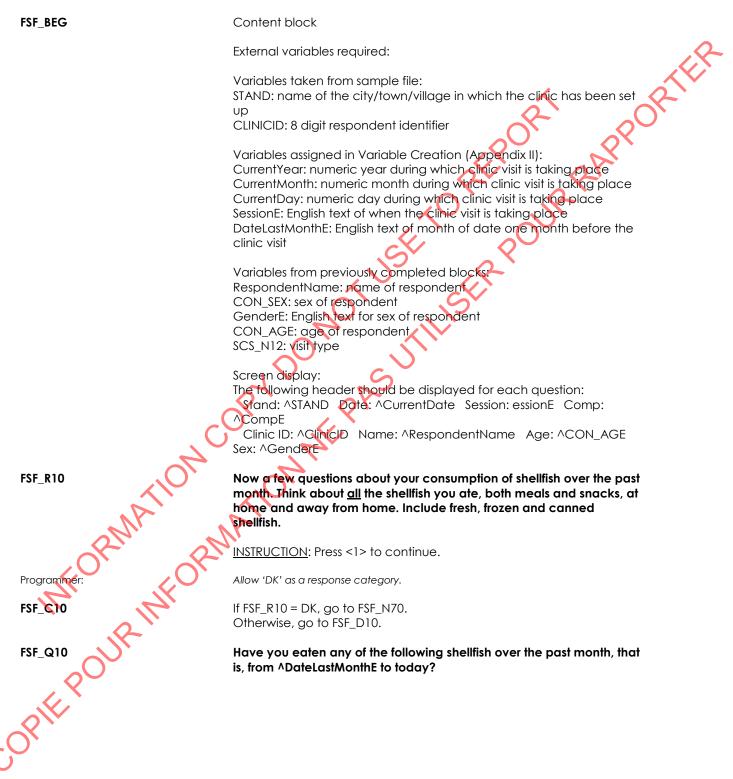


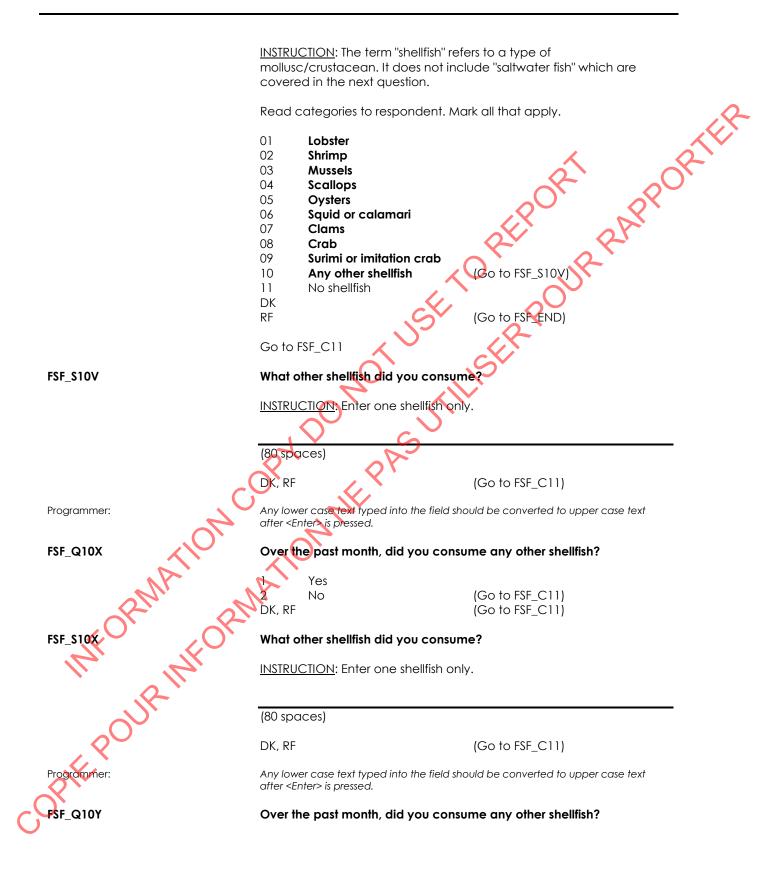


Vision Prescription Value (VPV)

VPV_BEG	Content block
	External variables required:
VPV_BEG	
	VPRC_N065: whether the cylinder value was present for the left eye VPRC_N070A: cylinder value for the left eye
CX.	VPRC_N075: whether the axis value was present for the left eye VPRC_N080A: axis value for the left eye
VPV_END	

Fish and Shellfish Consumption (FSF)





	1 Yes 2 No (Go to FSF_C11) DK, RF (Go to FSF_C11)
FSF_S10Y	What other shellfish did you consume?
	INSTRUCTION: Enter one shellfish only.
	(80 spaces)
	DK, RF
Programmer:	Any lower case text typed into the field should be converted to upper case text after <enter> is pressed.</enter>
FSF_C11	If FSF_Q10 = 11 or DK, go to FSF_R24. Otherwise, go to FSF_C12.
FSF_C12	If FSF_Q10 = 1, go to FSF_B12. Otherwise, go to FSF_C13.
FSF_B12	Call the Detail Fish and Shellfish (DFS) block.
Programmer:	Pass DT_QuestionE = " lobster " as parameter.
FSF_C13	If $FSF_Q10 = 2$, go to FSF_B13 . Otherwise, go to FSF_C14 .
FSF_B13	Call the Detail Fish and Shellfish (DFS) block.
Programmer:	Pass DT_QuestionE = " shrimp " as parameter.
FSF_C14	If FSF_Q10 = 3, go to FSF_B14. Otherwise, go to FSF_C15.
FSF_B14	Callthe Detail Fish and Shellfish (DFS) block.
Programmer:	Pass DT_QuestionE = " mussels " as parameter.
FSF_C15	If FSF_Q10 = 4, go to FSF_B15. Otherwise, go to FSF_C16.
FSF_B15	Call the Detail Fish and Shellfish (DFS) block.
Programmer:	Pass DT_QuestionE = " scallops " as parameter.
FSF_C16	If FSF_Q10 = 5, go to FSF_B16. Otherwise, go to FSF_C17.
FSF_B16	Call the Detail Fish and Shellfish (DFS) block.
Programmer:	Pass DT_QuestionE = " oysters " as parameter.
FSF_C17	If FSF_Q10 = 6, go to FSF_B17. Otherwise, go to FSF_C18.

FSF_B17	Call the Detail Fish and Shellfish (DFS) block.
Programmer:	Pass DT_QuestionE = " squid or calamari " as parameter.
FSF_C18	If FSF_Q10 = 7, go to FSF_B18. Otherwise, go to FSF_C19.
FSF_B18	Call the Detail Fish and Shellfish (DFS) block.
Programmer:	Pass DT_QuestionE = "clams" as parameter.
FSF_C19	If FSF_Q10 = 8, go to FSF_B19. Otherwise, go to FSF_C20.
FSF_B19	Call the Detail Fish and Shellfish (DFS) block.
Programmer:	Pass DT_QuestionE = "crab" as parameter.
FSF_C20	If FSF_Q10 = 9, go to FSF_B20. Otherwise, go to FSF_C21.
FSF_B20	Call the Detail Fish and Shellfish (DFS) block.
Programmer:	Pass DT_QuestionE = 'surimi or imitation crab as parameter.
FSF_C21	If FSF_S10V = RESPONSE and <> DK, RF, go to FSF_B21. Otherwise, go to FSF_C22.
FSF_B21	Call the Detail Fish and Shellfish (DFS) block.
Programmer:	Pass DT_QuestionE = " ^FSF_\$10V " as parameter.
FSF_C22	If FSF_S10X = RESPONSE and <> DK, RF, go to FSF_B22. Otherwise, go to FSF_C23.
FSF_B22	Call the Detail Fish and Shellfish (DFS) block.
Programmer:	Pass DI_QuestionE = " ^FSF_S10X " as parameter.
FSF_C23 RM	FSF_S10Y = RESPONSE and <> DK,RF, go to FSF_B23. Otherwise, go to FSF_R24.
FSF_B23	Call the Detail Fish and Shellfish (DFS) block.
Programmer:	Pass DT_QuestionE = " ^FSF_S10Y " as parameter.
FSF_R24	Now, think about <u>all</u> salt and freshwater fish you ate, both meals and snacks, at home and away from home. Include fresh, frozen and canned fish of all types, as well as the fish in fish and chips.
	INSTRUCTION: Press <1> to continue.
FSF_Q24	Have you eaten any of the following fish over the past month, that is, from ^DateLastMonthE to today?

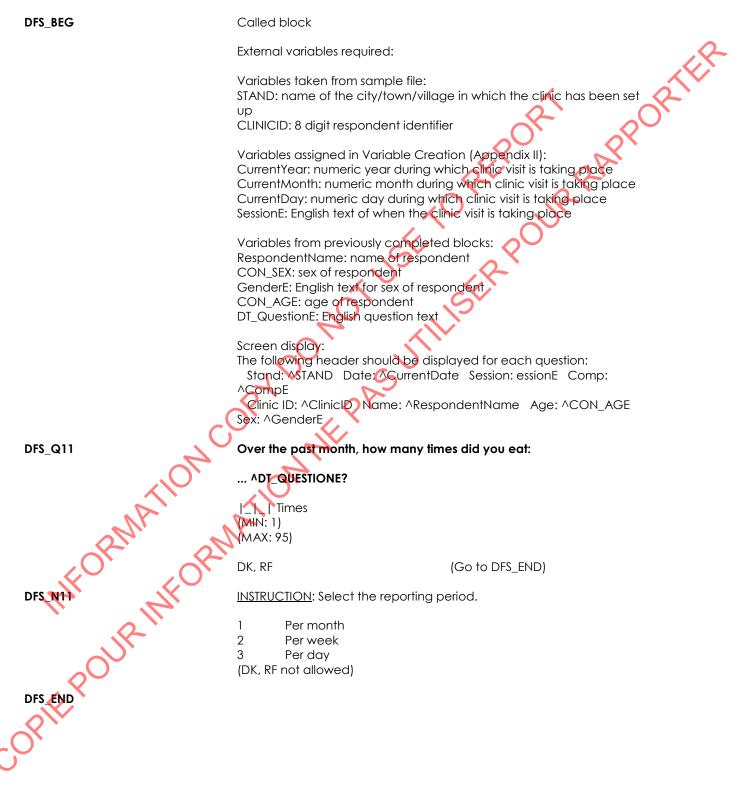
INSTRUCTION: The term "saltwater fish" does not include "shellfish", which were asked about in the previous question. (Go to FSF_S24V) Read categories to respondent. Mark all that apply. 02 Tuna in a can or pouch 03 Tuna steaks or fillets (fresh or frozen) 04 Salmon in a can or pouch 05 Salmon - fresh, frozen or smoked Shark 07 08 Marlin 09 Swordfish 13 Mackerel 14 Herring 19 Any other fish 20 No fish DK, RF Go to FSF_C24A FSF S24V What other fish did you consume? INSTRUCTION: Enter one type of fish only. (80 spaces) DK, RF (Go to FSF_C24A) Programmer: Any lower case text typed into the field should be converted to upper case text after <Enter is pressed. UNWINING PAR FSF_Q24X In the past month, did you consume any other fish? Yes No (Go to FSF_C24A) DK, RF (Go to FSF_C24A) What other fish did you consume? FSF_S24 INSTRUCTION: Enter one type of fish only. (80 spaces) DK, RF (Go to FSF_C24A) Any lower case text typed into the field should be converted to upper case text after <Enter> is pressed. In the past month, did you consume any other fish?



	FSF_C27	If $FSF_Q24 = 4$, go to FSF_B27 . Otherwise, go to FSF_C28 .
	FSF_B27	Call the Detail Fish and Shellfish (DFS) block.
	Programmer:	Pass DT_QuestionE = "salmon in a can or pouch" as parameter.
	FSF_C28	If FSF_Q24 = 5, go to FSF_B28. Otherwise, go to FSF_C30.
	FSF_B28	Call the Detail Fish and Shellfish (DFS) block.
	Programmer:	Pass DT_QuestionE = "salmon - fresh, frozen or smoked" os parameter.
	FSF_C30	If FSF_Q24 = 7, go to FSF_B30. Otherwise, go to FSF_C31.
	FSF_B30	Call the Detail Fish and Shellfish (DFS) block.
	Programmer:	Pass DT_QuestionE = " shark " as parameter.
	FSF_C31	If FSF_Q24 = 8, go to FSF_B31. Otherwise, go to FSF_C32.
	FSF_B31	Call the Detail Fish and Shellfish (DFS) block.
	Programmer:	Pass DT_QuestionE = " marlin " as parameter.
	FSF_C32	If $FSF_LQ24 = 9$, go to FSF_B32 . Otherwise, go to FSF_C36 .
	FSF_B32	Call the Detail Fish and Shellfish (DFS) block.
	Programmer:	Pass DT_QuestionE = " swordfish " as parameter.
	FSF_C36	If FSF_Q24 = 13, go to FSF_B36. Otherwise, go to FSF_C37.
	FSF_B36	Call the Detail Fish and Shellfish (DFS) block.
	Programmer:	Pass DT_QuestionE = " mackerel " as parameter.
	FSF_C3	If FSF_Q24 = 14, go to FSF_B37. Otherwise, go to FSF_C42.
	FSF_B37	Call the Detail Fish and Shellfish (DFS) block.
	Programmer:	Pass DT_QuestionE = " herring " as parameter.
	FSF_C42	If FSF_S24V = RESPONSE and $\langle \rangle$ DK,RF, go to FSF_B42. Otherwise, go to FSF_C43.
	FSF_B42	Call the Detail Fish and Shellfish (DFS) block.
C	Programmer:	Pass DT_QuestionE = " ^FSF_S24V " as parameter.
	FSF_C43	If FSF_S24X = RESPONSE and <> DK,RF, go to FSF_B43. Otherwise, go to FSF_C44.

FSF_B43	Call the Detail Fish and Shellfish (DFS) block.
Programmer:	Pass DT_QuestionE = " ^FSF_S24X " as parameter.
FSF_C44	If FSF_S24Y = RESPONSE and <> DK,RF, go to FSF_B44. Otherwise, go to FSF_END.
FSF_B44	Otherwise, go to FSF_END. Call the Detail Fish and Shellfish (DFS) block.
Programmer:	Pass DT_QuestionE = " ^FSF_S24Y " as parameter.
FSF_N70	INSTRUCTION: Why was the component not fully completed?
	01 Respondent unable to continue for health reasons 06 No time 20 Other - Specify (DK, RF not allowed) Go to FSF_END
FSF_S70	(Why was the component not fully completed?)
	INSTRUCTION: Specify.
	(80 spaces)
	(DK, RF not allowed)
Programmer:	Any lower case text typed into the field should be converted to upper case text after <enter> is pressed.</enter>
FSF_END	4
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#### Detail Fish and Shellfish (DFS)



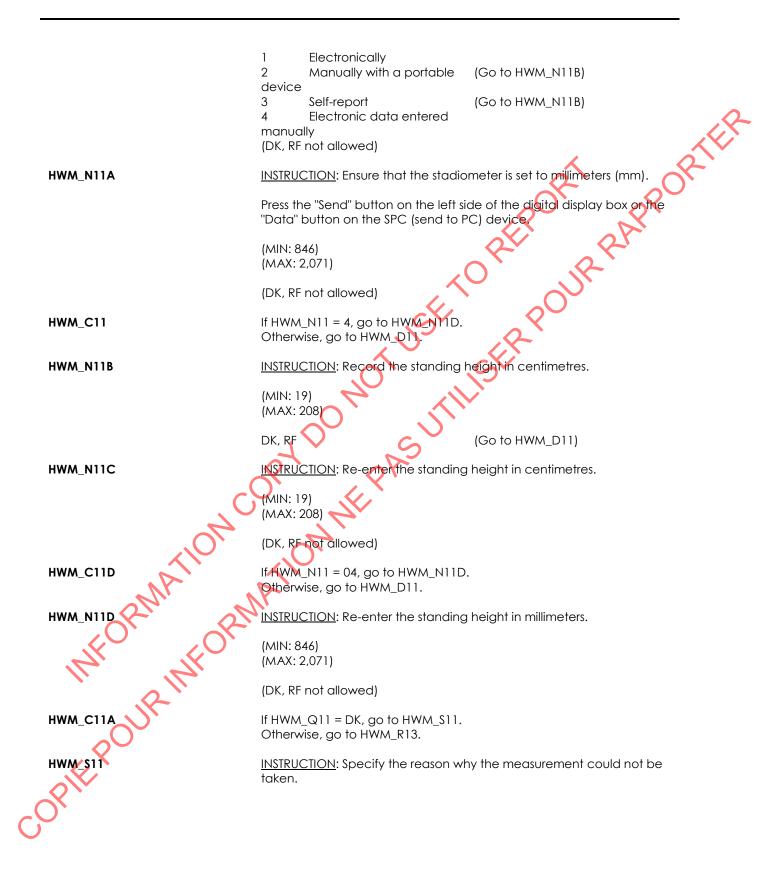
### Anthropometric Component Introduction (ACI)



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# Height and Weight Measurements (HWM)

HWM_BEG	Content block
	External variables required:
	Variables taken from sample file: STAND: name of the city/town/village in which the clinic has been set up CLINICID: 8 digit respondent identifier ANCREP: whether an anthropometric replicate has been assigned
	Variables assigned in Variable Creation (Appendix II): CurrentYear: numeric year during which clinic visit is taking place CurrentMonth: numeric month during which clinic visit is taking place CurrentDay: numeric day during which clinic visit is taking place SessionE: English text of when the clinic visit is taking place
	Variables from previously completed blocks: RespondentName: name of respondent SCS_N12: Clinic visit (3) or home visit (4) CON_SEX: sex of respondent
	GenderE: English text for sex of respondent CON_AGE: age of respondent WHR_Q015: whether the respondent is pregnant ACI_R01: anthropometry component replicate introduction ACI_R02: anthropometry component introduction
C	Screen Display: The following header should be displayed for each question: Stand: ^STAND_Date: ^CurrentDate_Session: essionE_Comp: ^CompE
	Clinic ID: ^ClinicID Name: ^RespondentName Age: ^CON_AGE Sex: ^GenderE
HWM_C10	If ACI_R01 = DK or ACI_R02 = DK, go to HWM_C59. Otherwise, go to HWM_R11.
HWM_R11 OPN AFORM	I'm going to start by measuring how tall you are. Please remove your shoes and stand with your feet together, keeping your heels, buttocks, back and head in contact with the measuring device. Look straight ahead and stand as tall as possible.
R	Now, take a deep breath in and hold it.
COPIE POUR INFOI	<u>INSTRUCTION</u> : Ensure the respondent's head is aligned with the Frankfort plane and all hair ties or ornaments (e.g., buns, braids, clips) have been removed.
PIK	Take the measurement while the breath is being held.
CO'	Press <1> to continue.
HWM_N11	INSTRUCTION: Record how the data will be captured.



	(80 spaces)
	(DK, RF not allowed)
Programmer:	Any lower case text typed into the field should be converted to upper case text after <enter> is pressed.</enter>
HWM_R13	Next I'm going to measure how much you weigh. Please empty your pockets, remove all heavy accessories, step onto the centre of the scale and face me. Keep your hands at your sides and look straight ahead.
	<u>INSTRUCTION</u> : Ensure the respondent has on only minimal clothing (no shoes), has nothing in his/her pockets and has removed all heavy accessories (e.g., a watch, belt, pair of glasses).
HWM N13	Press <1> to continue.
	1 Electronically 2 Manually with a portable (Go to HWM_N13B) device 3 Self-report (Go to HWM_N13B) 4 Electronic data entered (Go to HWM_N13B) manually
HWM_N13A	(DK, RF not allowed) INSTRUCTION: Ensure the scale is set to kilograms (kg). Press <print> on the scale.</print>
NATIC	Press <1> to save the measurement in Blaise. 1 Save the measurement (DK, RF not allowed)
Programmer:	Data from the scale will be available as a string value saved in the Blaise registry under "HKEY_CURRENT_USER". A single string value will be saved, containing 8 bytes of data. The data should be copied to specific capture fields as follows:
INFOUR INFO	IF Substring(EDATA, 1, 1) = E THEN Save DK code "999.9" in HWM_Q13 Save Substring(EDATA, 2, 2) in HWM_S13 ELSE Save Substring(EDATA, 4, 5) in HWM_Q13 ENDIF
HWM_R13A	INSTRUCTION: Check the data returned from the scale.
OF	Press <1> to continue.
Programmer:	Data should be displayed on the screen in the following format: WEIGHT: ^HWM_Q13 kg
HWM_C13A	If HWM_R13A = RESPONSE, go to HWM_C14A. Otherwise, go to HWM_N13B.

HWM_N13B	<u>INSTRUCTION</u> : When the measurement is stable, record the weight in kilograms.	
	(MIN: 0.5) (MAX: 500.0)	R
	DK, RF	(Go to HWM_D13)
HWM_N13C	INSTRUCTION: Re-enter the weight in kilograms.	
	(MIN: 0.5) (MAX: 500.0)	EPO' APP
	(DK, RF not allowed)	Rv R
HWM_C13	If HWM_Q13 = DK, go to HWM_S13. Otherwise, go to HWM_C14A.	O ONE
HWM_\$13	INSTRUCTION: Specify the reason with taken.	hy the measurement could not be
	(80 spaces)	
	(DK, RF not allowed)	×
Programmer:	Any lower case text typed into the field she after <enter> is pressed.</enter>	ould be converted to upper case text
HWM_C14A	TFWHR_Q015 = 1, go to HWM_R16. Otherwise, go to HWM_R14.	
HWM_R14	Now I'm going to measure your waist circumference. Please stand up straight with your arms hanging loosely at your sides, and breathe normally. I may need to move your clothing slightly because the measurement has to be taken directly on the skin. In order to ensure I have the correct position, I am going to feel for certain landmarks and make a few small marks on your skin with a washable marker to indicate where to place the tape. When I'm done, I'll remove them with a wipe.	
all if or	INSTRUCTION: Landmark both sides.	
II IL.	Read the measurement at the right	t side of the body.
JK	Take the measurement at the end	of a normal expiration.
20 ⁻	Press <1> to continue.	
HWM_N14A	INSTRUCTION: Record the waist circ	umference in centimetres.
COX	(MIN: 0) (MAX: 305)	
-	DK, RF	(Go to HWM_D14)

HWM_N14B	INSTRUCTION: Re-enter the waist circumference in centimetres.	
	(MIN: 0) (MAX: 305)	
	(DK, RF not allowed)	
HWM_C14B	If HWM_Q14 = DK, go to HWM_S14. Otherwise, go to HWM_R16.	
HWM_S14	INSTRUCTION: Specify the reason why the measurement could not be taken.	
	(80 spaces)	
	(DK, RF not allowed)	
Programmer:	Any lower case text typed into the field should be converted to upper case text after <enter> is pressed.</enter>	
HWM_R16	Now, I'll measure your neck circumference. Please stand up straight, with your arms hanging loosely at your sides, and look straight ahead. I will need to touch your neck in order to find the appropriate spot to take the measurement.	
	INSTRUCTION: Ensure the respondent's head is aligned with the Frankfort plane.	
	Ensure the respondent does not clench his/her teeth.	
	Read the measurement at the landmark on the front of the neck.	
	Press <1> to continue.	
HWM_N16A	INSTRUCTION: Record the neck circumference in centimetres.	
onA.	(MIN: 0) (MAX: 150)	
	DK, RF (Go to HWM_D16)	
HWM_N18B	INSTRUCTION: Re-enter the neck circumference in centimetres.	
HWM_NIEB	(MIN: 0) (MAX: 150)	
	(DK, RF not allowed)	
HWM_C18	If HWM_Q16 = DK, go to HWM_S16. Otherwise, go to HWM_C20.	
HWM_S16		

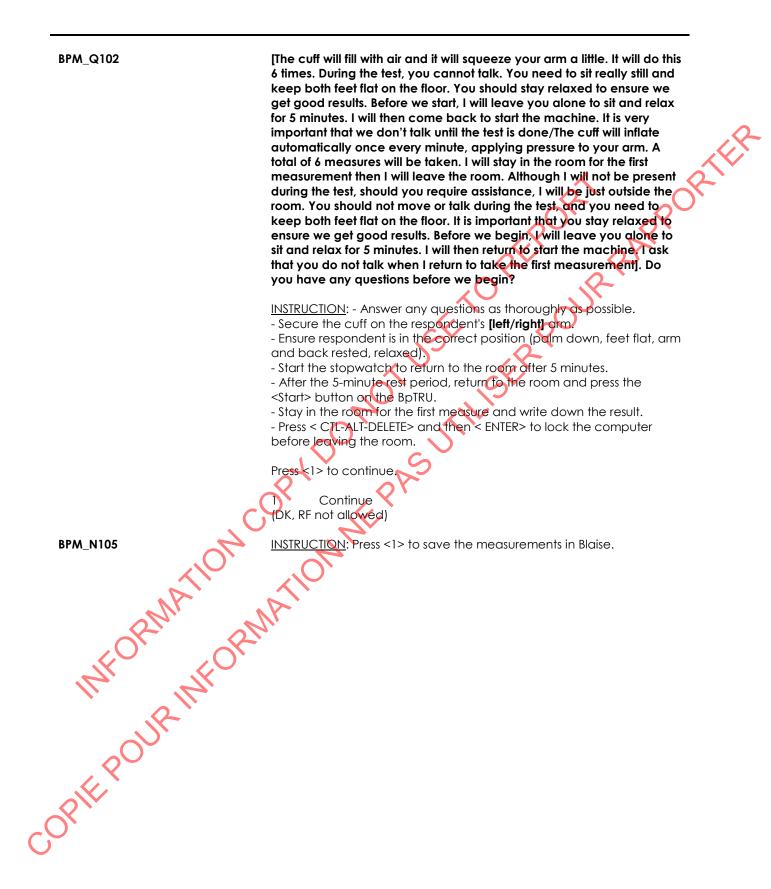
INSTRUCTION: Specify the reason why the measurement could not be

taken. (80 spaces) (DK, RF not allowed) Programmer: Any lower case text typed into the field should be converted to upper case text after <Enter> is pressed. HWM_C20 If ANCREP = 1 OR SCS_N12 = 4 or (WHR_Q015=1 AND HWM_Q11= NONRESPONSE AND HWM_Q13 = NONRESPONSE AND HWM_Q16 = NONRESPONSE) OR (HWM_Q11 = NONRESPONSE AND HWM_Q13 = NONRESPONSE AND HWM_Q14 = NONRESPONSE AND HWM_Q16 = NONRESPONSE), go to HWM_C59 Otherwise, go to HWM_R20. HWM_R20 At the end of the appointment, we may need to repeat the measurements I have just completed. The computer randomly selects people to be re-measured for quality control purposes. In case you are selected, I will now erase the marks put on your skin to ensure that they do not influence a possible second set of measurements. INSTRUCTION: Press <1> to confinue. Use a wipe to wash off all marks on the respondent's skin. HWM_C59  $If ACI_R01 = DK \text{ or } ACI_R02 = DK, \text{ go to } HWM_N60.$ Otherwise, go to HWM_END. HWM_S60 FPOUR INFORM **HWM N60** INSTRUCTION: Why was the component not fully completed? 01 Respondent unable to continue for health reasons Respondent refuses to 03 continue 06 No time 20 Other - Specify (Go to HWM_S60) (DK, RF not allowed) Go to HWM_END (Why was the component not fully completed?) INSTRUCTION: Specify. (80 spaces) (DK, RF not allowed) Any lower case text typed into the field should be converted to upper case text oarammer: after <Enter> is pressed. HWM END

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BPM_BEG	Content block
	External variables required:
	Variables taken from sample file: STAND: name of the city/town/village in which the clinic has been set up CLINICID: 8 digit respondent identifier
	Variables assigned in Variable Creation (Appendix II): CurrentYear: numeric year during which clinic visit is taking place CurrentMonth: numeric month during which clinic visit is taking place CurrentDay: numeric day during which clinic visit is taking place SessionE: English text of when the clinic visit is taking place
	Variables from previously completed blocks: RespondentName: name of respondent CON_SEX: sex of respondent GenderE: English text for sex of respondent CON_AGE: age of respondent
	HWM_Q11: standing height (in centimetres) SCS_N12: visit type (3 = clinic visit; 4 = home visit) WHR_Q020: Number of weeks of pregnancy reported by respondent ATG_N33: Test exclusion due to alcohol consumption PHR_Q020: Whether the respondent has chest pain during physical
	activity (1 = Yes; 2 = No) PHR_Q025: Whether the respondent had chest pain when not doing physical activity, in past month (1 = Yes; 2 = No) PHR_Q040: Condition(s) under which respondent has lost balance/consciousness within the last 12 months
	PHR_N045: Test exclusion due to condition under which respondent has lost balance/consciousness, as assessed by the HMS PHR_B060.BJP_N3_1: Test exclusion due to bone or joint problem (Head/Jaw).
A	PHR_B060,BJP_N3_2: Test exclusion due to bone or joint problem
PHE POUR I	HR_B060.BJP_N3_4: Test exclusion due to bone or joint problem (Shoulder). PHR_B060.BJP_N3_5: Test exclusion due to bone or joint problem (Arm/Elbow).
INT OF	PHR_B060.BJP_N3_6: Test exclusion due to bone or joint problem (Wrist). PHR_B060.BJP_N3_7: Test exclusion due to bone or joint problem (Hand/Fingers).
pour	PHR_B060.BJP_N3_8: Test exclusion due to bone or joint problem (Hip). PHR_B060.BJP_N3_9: Test exclusion due to bone or joint problem (Leg/Knee). PHR_B060.BJP_N3_10: Test exclusion due to bone or joint problem
RIF	(Ankle). PHR_B060.BJP_N3_11: Test exclusion due to bone or joint problem (Foot/Toes). PHR_N080: Test exclusion due to physical activity restriction(s) identified
	by a health professional. PHR_N095: Test exclusion due to other reason for not doing physical activity reported by respondent.

PHC_Q37: Whether the respondent has his quick relief medication(s) with him (1 = Yes; 2 = No)PHC_N42: Test exclusion due to an acute condition PHC_N44: Test exclusion due to a chronic condition PHC_Q57B: indicates on which side the respondent has had a mastectomy MEDC_N611: Test exclusion due to medication use ORS_N3: Whether the respondent should not perform the mCAFT for any other reason (1 = Yes; 2 = No)Screen Display: The following header should be displayed for each question: Stand: ^STAND Date: ^CurrentDate Session: essionE Comp: **^CompE** Clinic ID: A ClinicID Name: A Respondent Name Age: A CON AGE Sex: ^GenderE INSTRUCTION: Measure the respondent's arm circumference and **BPM_N100** select the appropriate cuff size. Record the selected cuff size. 1 Child (13-18 cm) 2 Small adult (18-26 cm) Regular adult (26-34 cm) 3 4 Large adult (32-43 cm) 5 X-Large adult (41-52 cm) (DK, RF not allowed) **BPM_N101** INSTRUCTION: Record how the first set of data will be captured. Electronically (BpTRU) BpTRU data entered 3 manually DK (Go to BPM_N600) (RF not allowed) SPIE-POUR INFOF If BPM 101 = 3 is selected, please do not pre-fill the values with previous data.  $H_{BPM}$  N101 = 3, go to BPM_B110. Otherwise, go to BPM_Q101A. Now, I will take your blood pressure and heart rate, using an automated blood pressure cuff. During this test, you will need to sit up straight with your feet flat on the floor, your back against the back rest of the chair, and your [left/right] arm on the table. INSTRUCTION: - Ensure the BpTRU is communicating with Health Listener. - Set the BpTRU to cycle 1 (1-minute intervals). - Turn the BpTRU away from the respondent. Press <1> to continue. Continue 1 (DK not allowed) (Go to BPM_END) RF





### Canadian Health Measures Survey - Cycle 5



Programmer:	In the code, BPM_B110 is an array 1 to 6 of BPR and also represents BPM_B111, BPM_B121, BPM_B131, BPM_B141 and BPM_B151. It was written this way in QDT in order to include BPM_C111 and BPM_C112 in the correct flow.
BPM_C111	If BPM_B110.BPR_N1A = RF, go to BPM_END. Otherwise, go to BPM_B111.
BPM_B111	Call the Blood Pressure Recording (BPR) block.
Programmer:	Called BPM_B110[2] in the code.
BPM_C112	If BPM_B111.BPR_N1A = RF, go to BPM_END. Otherwise, go to BPM_B121.
BPM_B121	Call the Blood Pressure Recording (BPR) block.
Programmer:	Called BPM_B110[3] in the code.
BPM_B131	Call the Blood Pressure Recording (BPR) block
Programmer:	Called BPM_B110[4] in the code.
BPM_B141	Call the Blood Pressure Recording (BPR) block.
Programmer:	Called BPM_B110[5] in the code.
BPM_B151	Call the Blood Pressure Recording (BPR) block.
Programmer:	Called BPM_B110[6] in the code.
BPM_N160	INSTRUCTION: Check the blood pressure and heart rate data. [Press <clear> on the BPTru screen./EMPTY]</clear>
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BPM_C164	If BPM_D160A = 1, go to BPM_N201. Otherwise, go to BPM_C165.
BPM_C165	If BPM_D161 < 145 and BPM_D162 < 95 and BPM_D163 < 100, go to BPM_D401. Otherwise, go to BPM_C166.
BPM_C166	If SCS_N12 = 4 or (CON_AGE < 15 or > 69) or WHR_Q020 > 12 or ATG_N33 = 3 or PHR_Q020 = 1 or PHR_Q025 = 1 or PHR_040 = 5 or 8 or PHR_N045 = 3 or if any of (PHR_B060.BJP_N3_1 or PHR_B060.BJP_N3_2 or PHR_B060.BJP_N3_3 or PHR_B060.BJP_N3_4 or PHR_B060.BJP_N3_5 or PHR_B060.BJP_N3_6 or PHR_B060.BJP_N3_7 or PHR_B060.BJP_N3_8 or PHR_B060.BJP_N3_9 or PHR_B060.BJP_N3_10 or PHR_B060.BJP_N3_8 or PHR_B060.BJP_N3_9 or PHR_B060.BJP_N3_10 or PHR_B060.BJP_N3_8 or PHR_N080 = 3 or PHR_N095 = 3 or PHC_Q37 = 2 or PHC_N42 = 3 or PHC_N44 = 3 or MEDC_N611 = 3 or ORS_N3 = 1, go to BPM_D401. Otherwise, go to BPM_N201.
BPM_N201	INSTRUCTION: Record how the second set of data will be captured. 1 Electronically (BpTRU) 3 BpTRU data entered (Go to BPM_B210) manually (DK, RF not allowed)
Programmer:	Set value of ResetCounter to 1 in the Blaise registry under "HKEY_CURRENT_USER". If BPM_N201= 3 is selected, please do not pre-fill the values with previous data.
BPM_Q201	There were too many errors with that set of measurements, so we have to do the test again. I will retake your blood pressure and heart rate. Remember, you should not move or talk during the test, and you need to keep both feet flat on the floor. It's important that you stay relaxed to ensure we get good results. <u>INSTRUCTION</u> : - Ensure the BpTRU is communicating with Health Listener. - Set the BpTRU to cycle 1. - Turn the BpTRU away from the respondent.
INFORMATINE INFORMATION	Answer any questions as thoroughly as possible.
RODI	1 Press <1> to continue. (DK not allowed) RF (Go to BPM_D401)
BPM_N205	INSTRUCTION: Press <1> to save the measurements in Blaise.



### Canadian Health Measures Survey - Cycle 5

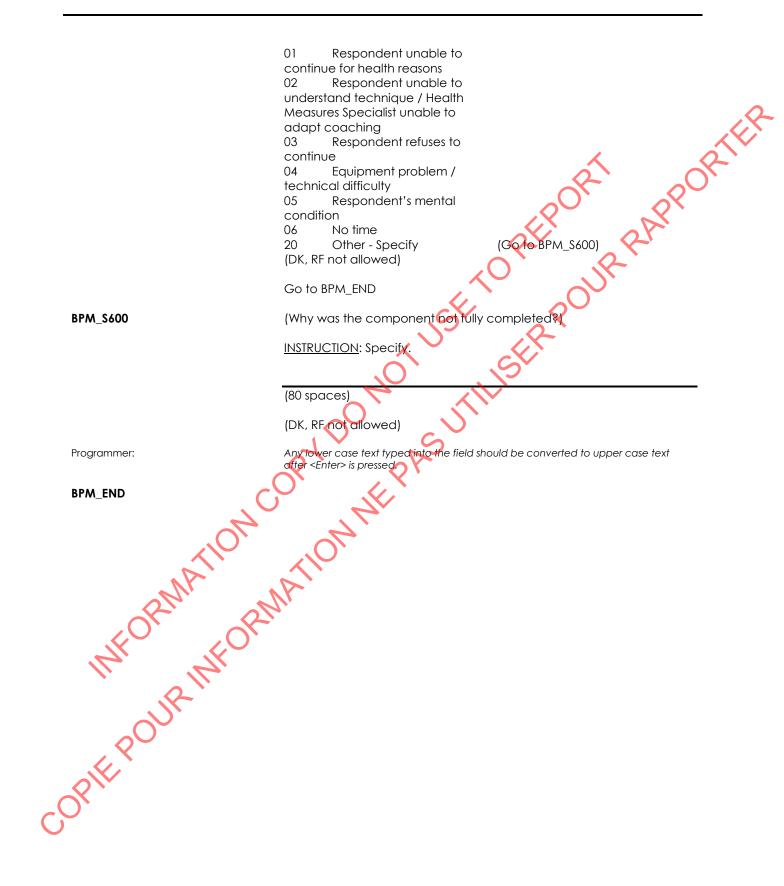


Programmer:	In the code, BPM_B210 is an array 1 to 6 of BPR and also represents BPM_B211, BPM_B221, BPM_B231, BPM_B241 and BPM_B251. It was written this way in QDT in order to include BPM_C211 and BPM_C221 in the correct flow.
BPM_C211	If BPM_B210.BPR_N1A = RF, go to BPM_D401. Otherwise, go to BPM_B211.
BPM_B211	Call the Blood Pressure Recording (BPR) block.
Programmer:	Called BPM_B210[2] in the code.
BPM_C221	If BPM_B211.BPR_N1A = RF, go to BPM_D401. Otherwise, go to BPM_B221.
BPM_B221	Call the Blood Pressure Recording (BPR) block.
Programmer:	Called BPM_B210[3] in the code.
BPM_B231	Call the Blood Pressure Recording (BPR) block
Programmer:	Called BPM_B210[4] in the code
BPM_B241	Call the Blood Pressure Recording (BPR) block.
Programmer:	Called BPM_B210[5] in the code.
BPM_B251	Call the Blood Pressure Recording (BPR) block.
Programmer:	Called BPM_B210[6] in the code
BPM_N260	INSTRUCTION: Check the blood pressure and heart rate data. [Press <clear> on the BPTru screen./EMPTY]</clear>
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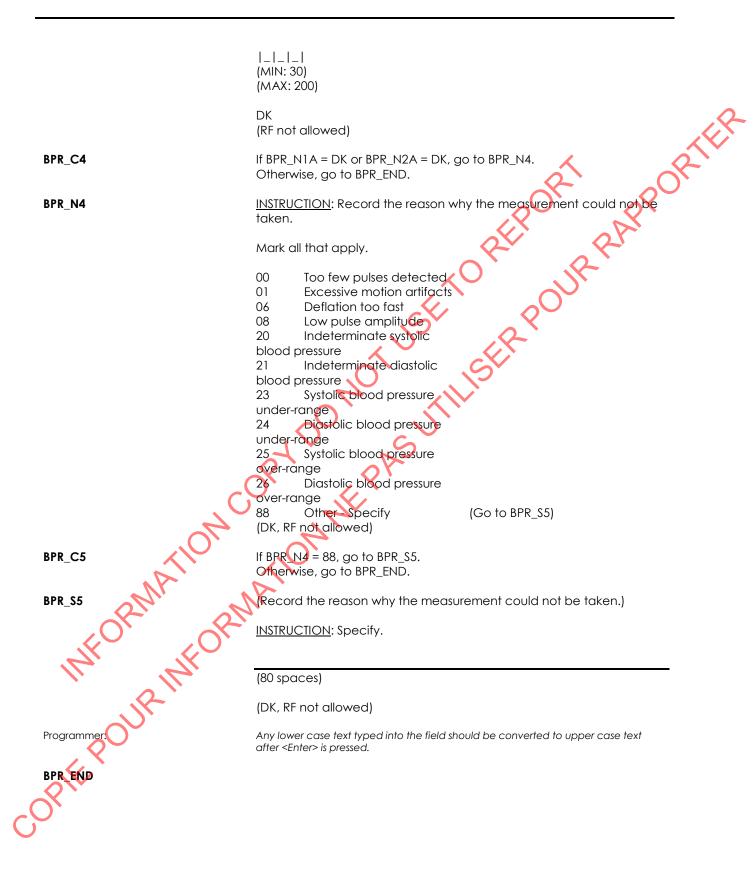
BPM_C411	If BPM_D411A = RESPONSE and BPM_D411A > 2, go to BPM_D411B. Otherwise, go to BPM_D412A.
BPM_R411	[Your average blood pressure today was ^BPM_D317 / ^BPM_D318 mmHg, which means your blood pressure is indicative of severe hypertension. You should see a doctor or clinic today, or go to a hospital emergency room, to have your blood pressure re-checked.
	Because of these results, we will not continue with your clinic visit./EMPTY] <u>INSTRUCTION</u> : [- Answer any questions as thoroughly as possible, - Sign the blood pressure reporting letter and ensure that the exit and
	sign-out components are completed as soon as possible./The respondent's average blood pressure was ABPM_D317 / ABPM_D318 mmHg, which means their blood pressure is [high-normal/indicative of mild hypertension/indicative of moderate hypertension]. A blood pressure reporting letter will be generated at the end of the clinic visit.]
	Go to BPM_END
BPM_C412	If $BPM_D412A = RESPONSE$ and $BPM_D412A > 2$ , go to $BPM_D412B$ . Otherwise, go to $BPM_C599$ .
BPM_R412	[Your average blood pressure today was ^BPM_D317 / ^BPM_D318 mmHg, this means your blood pressure is very high. You should see a doctor or clinic today, or go to a hospital emergency room, to have your blood pressure re-checked.
	Because of these results, we will not continue with your clinic visit./EMPTY]
ATION	INSTRUCTION: 1- Answer any questions as thoroughly as possible. - Sign the blood pressure reporting letter and ensure that the exit and sign-out components are completed as soon as possible./The respondent's average blood pressure was ^BPM_D317 / ^BPM_D318 mmHg, this means their blood pressure was high. A blood pressure reporting letter will be generated at the end of the clinic visit.]
2Nr. or	Press <1> to continue.
	Go to BPM_END
BPM C599	If BPM_D317 = RESPONSE, go to BPM_END. Otherwise, go to BPM_N600.
BPM_N600	INSTRUCTION: Why was the component not fully completed?
COPIEPO	

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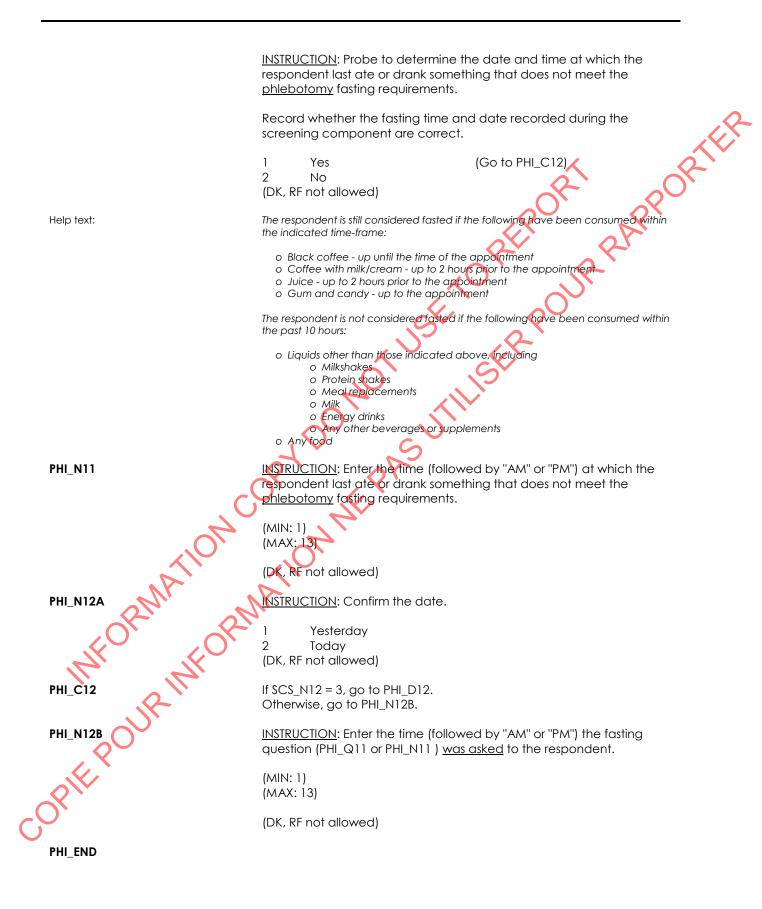
# Blood Pressure Recording (BPR)

BPR_BEG	Called block
	External variables required: BPM_N101: record how the data will be captured BPM_N201: record how the data will be captured
BPR_N1A	INSTRUCTION: Record the systolic blood pressure measurement.
	_ _  Systolic blood pressure (in mmHg) (MIN: 30) (MAX: 300)
	DK, RF
BPR_N1B	INSTRUCTION: Re-enter the systolic blood pressure measurement.
	_ _  (MIN: 30) (MAX: 300)
	DK, RF
BPR_C2	If $BPR_N1A = RF$ , go to $BPR_END$ . Otherwise, go to $BPR_N2A$ .
BPR_N2A	INSTRUCTION: Record the diastolic blood pressure measurement.
	_ _  Diastolic blood pressure (in mmHg) (MIN: 30) (MAX: 200)
at 10°	DK (REnot allowed)
BPR_N2B	<b>INSTRUCTION</b> : Re-enter the diastolic blood pressure measurement.
SFOR FORM	_ _  (MIN: 30) (MAX: 200)
III BIN	DK (RF not allowed)
BPR_N3A	INSTRUCTION: Record the heart rate.
BPR_N3A OUR INFO	_ _  Heart rate (in beats per minute) (MIN: 30) (MAX: 200)
$c_{0}^{0}$	DK (RF not allowed)
BPR_N3B	INSTRUCTION: Re-enter the heart rate.



## Phlebotomy Component Introduction (PHI)

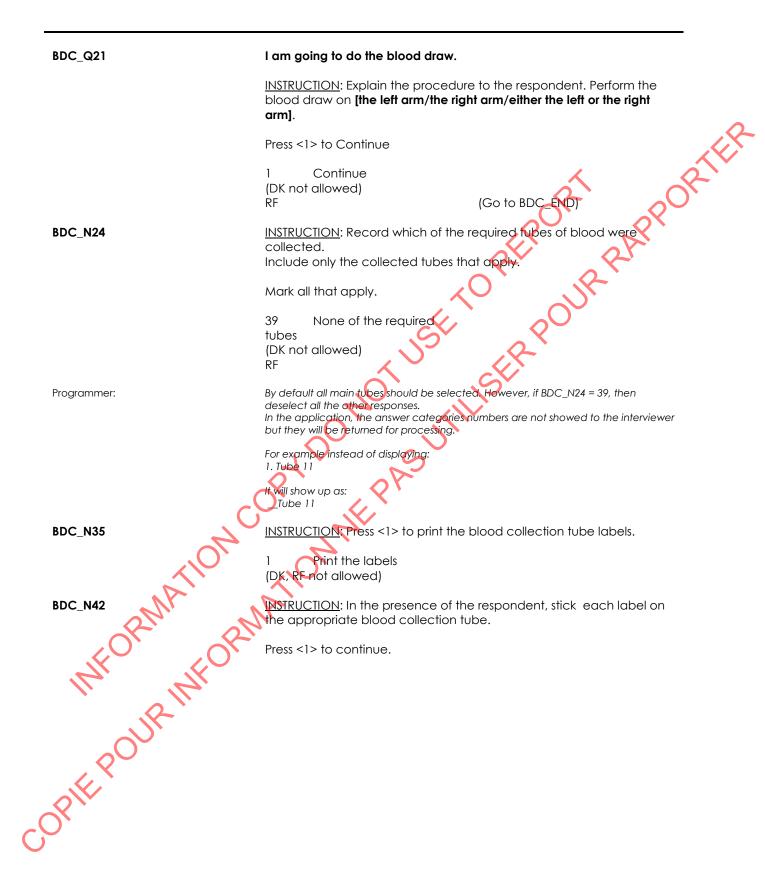
PHI_BEG	Content block
	External variables required:
	Variables taken from sample file: STAND: name of the city/town/village in which the clinic has been set up CLINICID: 8 digit respondent identifier SELFAST: whether the respondent was selected to fast for 12 hours (1= fasting, 2 = non-fasting)
	Variables assigned in Variable Creation (Appendix II): CurrentYear: numeric year during which clinic visit is taking place CurrentMonth: numeric month during which clinic visit is taking place CurrentDay: numeric day during which clinic visit is taking place SessionE: English text of when the clinic visit is taking place
	Variables from previously completed blocks: RespondentName: name of respondent GenderE: English text for sex of respondent CON_AGE: age of respondent ATG_Q11: time at which the respondent last ate/drank ATG_N11: date at which the respondent last ate/drank (1 = Yesterday; 2 = Today)
	DT_ATGN/IE: English text for reported fasting date (Yesterday/Today) ATG_D12: Fasting status as it relates to laboratory tests, identified in screening (1 = fasting; 2 = non-fasting) SCS_N12: type of visit Screen display:
MATIO	The following header should be displayed for each question: Stand, STAND Date: ^CurrentDate Session: essionE Comp: ^CompE Clinic ID: ^ClinicID Name: ^DT_RespondentName Age: >CON_AGE Sex: ^GenderE
PHI_R10	Hi, my name is Please have a seat on the chair, I need to ask you a few questions before we begin.
14, 14	INSTRUCTION: Press <1> to continue.
Programmer:	Allow 'DK' as a response category
	If PHI_R10 = DK, go to PHI_END. Otherwise, go to PHI_D10.
Programmer: PHI_Q11P	I need to confirm your fasting status. When did you last eat or drink anything other than water (e.g., coffee, tea, alcohol, juice or flavoured water)?
CO,	The respondent reported last eating or drinking at ^ATG_Q11 ^DT_ATGN11E.



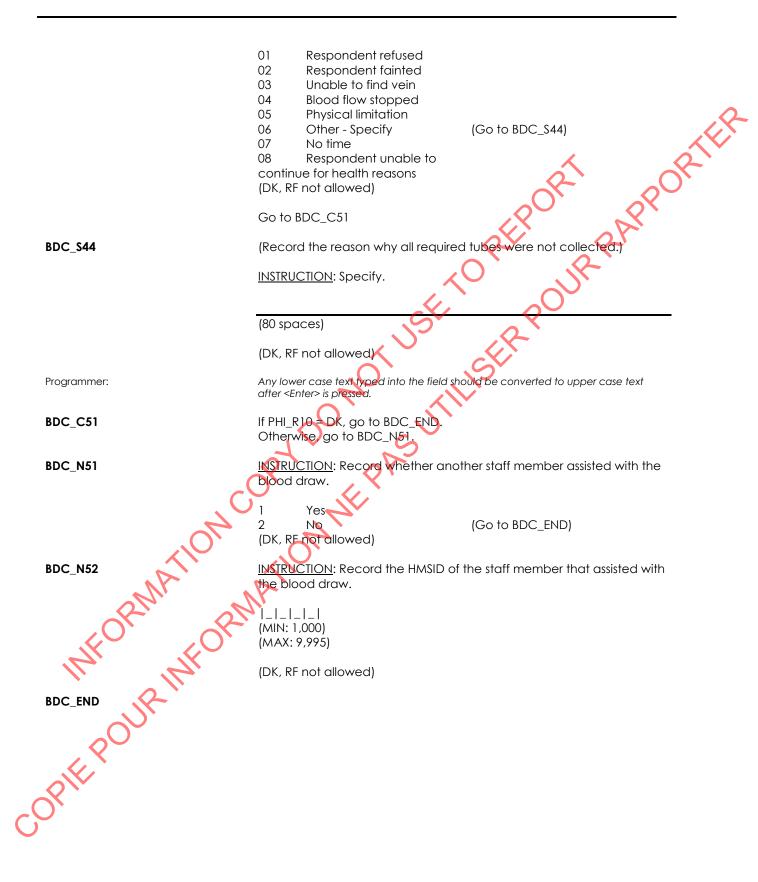
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## Blood Collection (BDC)

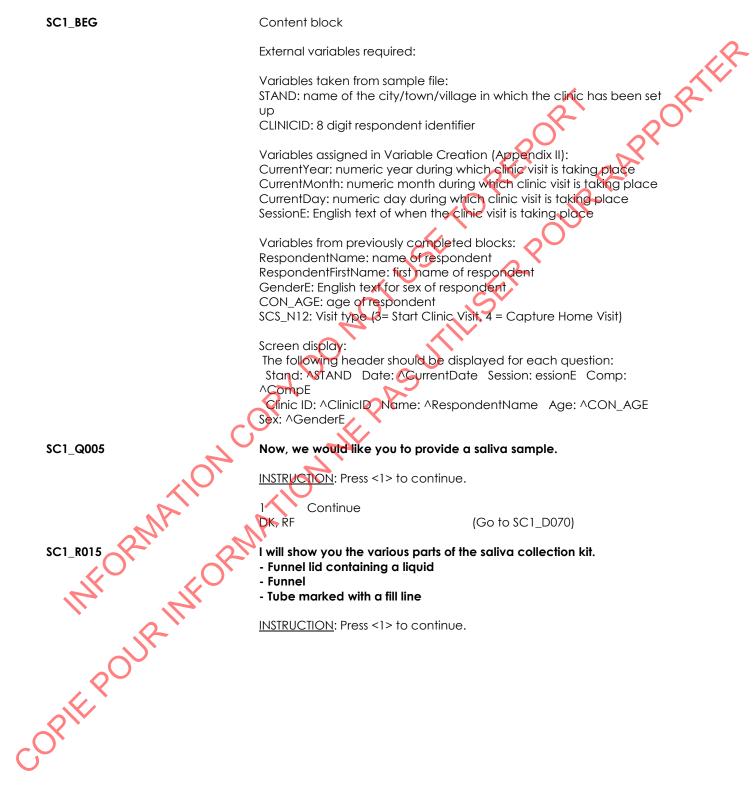
BDC_BEG	Content block
	External variables required:
	Variables taken from sample file: STAND: name of the city/town/village in which the clinic has been set up CLINICID: 8 digit respondent identifier T211FLAG: Flag for test 211.
	Variables assigned in Variable Creation (Appendix II): DryRun: whether the case is a dry run case CurrentYear: numeric year during which clinic visit is taking place CurrentMonth: numeric month during which clinic visit is taking place CurrentDay: numeric day during which clinic visit is taking place SessionE: English text of when the clinic visit is taking place
	Variables from previously completed blocks: RespondentName: name of respondent CON_AGE: age of respondent CON_SEX: sex of respondent GenderE: English text for sex of respondent CON_D25: Whether the respondent, parent or guardian has provided consent to storage of blood and urine (1 = Yes, 2 = No) CON_N26: whether the respondent provided consent for DNA storage BVOCFLG: Blood VOC subsampling flag PHC_Q56: whether the respondent felt dizzy or fainted previously during a blood draw. PHI_R10: introduction to the phlebotomy component
FORMA	PHC_Q57B: indicator of which side the respondent has had a mastectomy (1=right, 2=left, 3=both) Screen display: The following header should be displayed for each question: Stand: ^STAND Date: ^CurrentDate Session: essionE Comp: CompE Clinic ID: ^ClinicID Name: ^RespondentName Age: ^CON_AGE Sex: ^GenderE
BDC_C9	If $PHI_R10 = DK$ , go to $BDC_N44$ . Otherwise, go to $BDC_C10$ .
BDC_C10	If PHC_Q56 = 1, go to BDC_N10. Otherwise, go to BDC_Q21.
BDC_NIQ	INSTRUCTION: During the screening component, the respondent has stated they have felt dizzy or fainted previously during a blood draw. Probe and take the appropriate precautions.
CO _x	Press <1> to continue.
$\checkmark$	1 Continue (DK, RF not allowed)







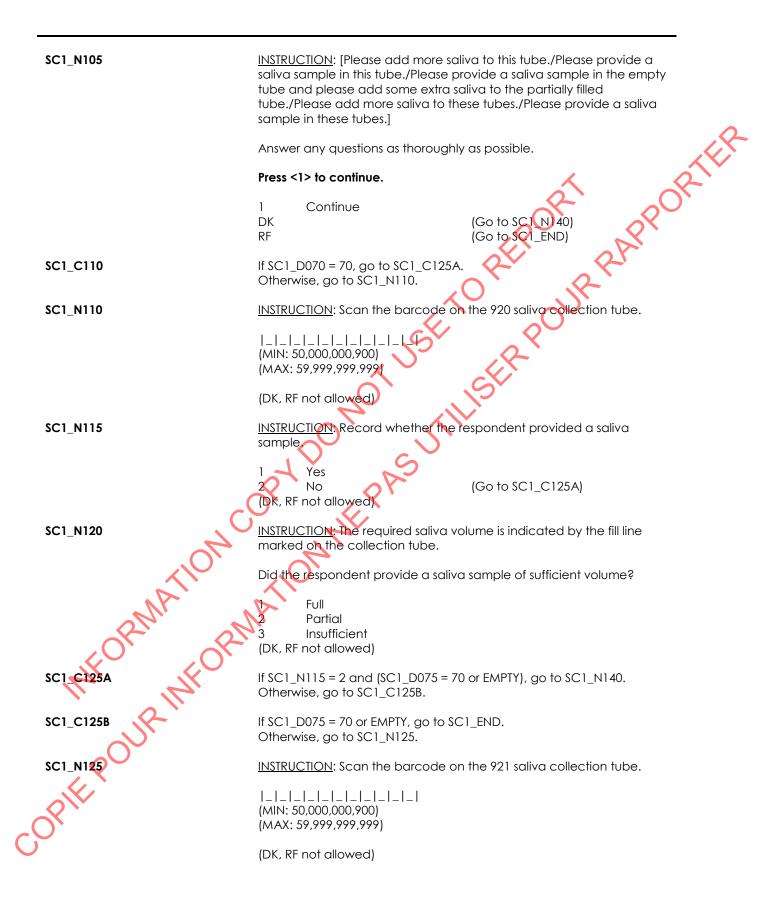
#### Saliva Collection Block (SC1)



SC1_Q020	<ul> <li>Please use [this tube/these tubes] to collect your saliva sample.</li> <li>Do not remove the plastic film from the funnel lid.</li> <li>[Have ^RespondentName roll/Roll] your tongue to increase the amount of saliva in your mouth.</li> <li>You can also massage your cheeks to increase saliva production.</li> <li>[Have ^RespondentName spit/Spit] into the funnel until the amount of saliva (not the bubbles) reaches the fill line indicated on the tube.</li> <li>[Make sure the funnel lid is not closed inadvertently by ^RespondentFirstName when he/she is spitting in the funnel/Make sure the funnel lid is not closed inadvertently when you are spitting in the funnel].</li> <li>Once you are finished, hold the tube upright and place it in the rack.</li> </ul>
	INSTRUCTION: Give the respondent a sugar packet if he is not able to spit due to dry mouth.
	Note: If the respondent doesn't understand the word "saliva", substitute this word with "spit".
	Answer any questions as thoroughly as possible. Press <1> to continue.
	1 Continue DK, RF (Go to SC1_D070)
SC1_N025	INSTRUCTION: Press <1> to print [one saliva collection tube label/two saliva collection tube labels] with the respondent's CLINICID plus the TESTID. In the presence of the respondent, stick the [label/labels] on the collection [tube/fubes].
	1 Print (DK, RF not allowed)
Programmer:	Print a label (type 9) of CLINICID + '920'
SC1 N035	h addition, IF CON_AGE > 5, print another label (type 9) of CLINICID + '921'
SCI_N033OL	INSTRUCTION: Scan the barcode on the saliva collection tube.  _ _ _ _ _ _ _ _ _ _ _ _  (MIN: 50,000,000,900) (MAX: 59,999,999,999)
-JP-	(DK, RF not allowed)
SC1_N040	INSTRUCTION: Record whether the respondent provided a saliva sample.
COPIE	1 Yes 2 No (Go to SC1_C050A) (DK, RF not allowed)

SC1_N045	<u>INSTRUCTION</u> : The required saliva volume is indicated by the fill line marked on the collection tube.
	Did the respondent provide a saliva sample of sufficient volume?
	1 Full 2 Partial 3 Insufficient (DK, RF not allowed)
SC1_C050A	If CON_AGE > 5, go to SC1_N050. Otherwise, go to SC1_C050B.
SC1_C050B	If SC1_N040 = 2, go to SC1_D070. Otherwise, go to SC1_N065.
SC1_N050	INSTRUCTION: Scan the barcode on the second saliva collection tube.
	_ _ _ _ _ _ _ _ _ _  (MIN: 50,000,000,900) (MAX: 59,999,999,999)
	(DK, RF not allowed)
SC1_N055	INSTRUCTION: Record whether the respondent provided a saliva sample.
	1 Ves (Go to SC1_N060) 2 No (Go to SC1_C060) (DK, RF not allowed)
SC1_C060	$fr SC1_N040 = 1 and SC1_N055 = 2$ , go to SC1_N065. Otherwise, go to SC1_D070.
SC1_N060	INSTRUCTION: The required saliva volume is indicated by the fill line marked on the collection tube.
MA	Did the respondent provide a saliva sample of sufficient volume?
SC1_N065	1 Full 2 Partial 3 Insufficient
14, 14,	(DK, RF not allowed)
SC1_N065	<u>INSTRUCTION</u> : - Close the funnel lid(s) by firmly pushing the lid(s) until you hear a click. The DNA stabilizing liquid will flow into the collection tube.
	- Unscrew the funnel from the tube(s) and close the tube(s) tightly with the small cap.
ALL N	- Shake the capped tube(s) for 5 seconds.
-OK'	Press <1> to continue.
6	1 Continue (DK, RF not allowed)

SC1_C080A	If SC1_D070 in (70, 80) and SC1_D075 in (70, 80, EMPTY), go to SC1_END. Otherwise, go to SC1_C080B.
SC1_C080B	If SC1_D070 = 79 and (SC1_Q005 =DK or SC1_Q020 =DK), go to SC1_N140. Otherwise, go to SC1_D085. We did not obtain [""/enough] saliva. We will try to collect [""/additional] saliva before the end of the clinic visit
SC1_R085	We did not obtain [""/enough] saliva. We will try to collect [""/additional] saliva before the end of the clinic visit, INSTRUCTION: Mark a new fill line on the collection tube with a sharpe.
	Put the funnel and capped tube back into the kit.
	A label will be printed with the respondent's shortname to identify the kit.
	Press <1> to continue.
Programmer:	Print a label (type 3) of CLINICID $\pm$ shoft-name.
SC1_N090	INSTRUCTION: Please scan the respondent's bracelet.
	_ _ _ _ _ _  (MIN: 50,000,000) (MAX: 59,999,999)
	DK RF (Go to SC1_N140) (Go to SC1_END)
SC1_C095	$f_{SC1_D070} = 70, go to SC1_C100.$ Otherwise, go to SC1_N095.
SC1_N095	INSTRUCTION: Scan the barcode on the 920 saliva collection tube.
ATIO	_   _ _ _ _ _  (MIN: 50,000,000,900) (MAX: 59,999,999,999)
2Mi	(DK, RF not allowed)
sc1_c100	If SC1_D075 = 70 or EMPTY, go to SC1_D105. Otherwise, go to SC1_N100.
SC1_N100	INSTRUCTION: Scan the barcode on the 921 saliva collection tube.
SC1_C100 SC1_N100	_ _ _ _ _ _ _ _ _ _  (MIN: 50,000,000,900) (MAX: 59,999,999,999)
A CARACTER AND A CARACTER ANTE ANOTER ANTE ANOTER ANTE ANTE ANTE ANTE ANTE ANTE ANTE ANTE	(DK, RF not allowed)
CX ·	
$\cup$	



1 Yes 2 No (Go to SC1_N140)	
(DK PE not allowed)	2
SC1_N135 INSTRUCTION: The required saliva volume is indicated by the fill line marked on the collection tube.	
Did the respondent provide a saliva sample of sufficient volume?	
1 Full 2 Partial 3 Insufficient (DK, RF not allowed)	
Go to SC1_END	
SC1_N140 INSTRUCTION: Why was the component not fully completed? 01 Respondent unable to continue for health reasons 02 Respondent unable to understand technique 03 Respondent refuses to continue 04 Equipment problem / technical difficulty 05 Respondent's mental Condition 06 No time 20 Other Specify (Go to SC1_S140) (DK, RF not allowed) Go to SC1_END	
SC1_S140 (Why was the component not fully completed?)	
(80 spaces) (DK, RF not allowed) Go to SC1_END	
(80 spaces)	
(DK, RF not allowed)	
Go to SC1_END	
Programmer: Any lower case text typed into the field should be converted to upper case text after <enter> is pressed. SCI_END</enter>	

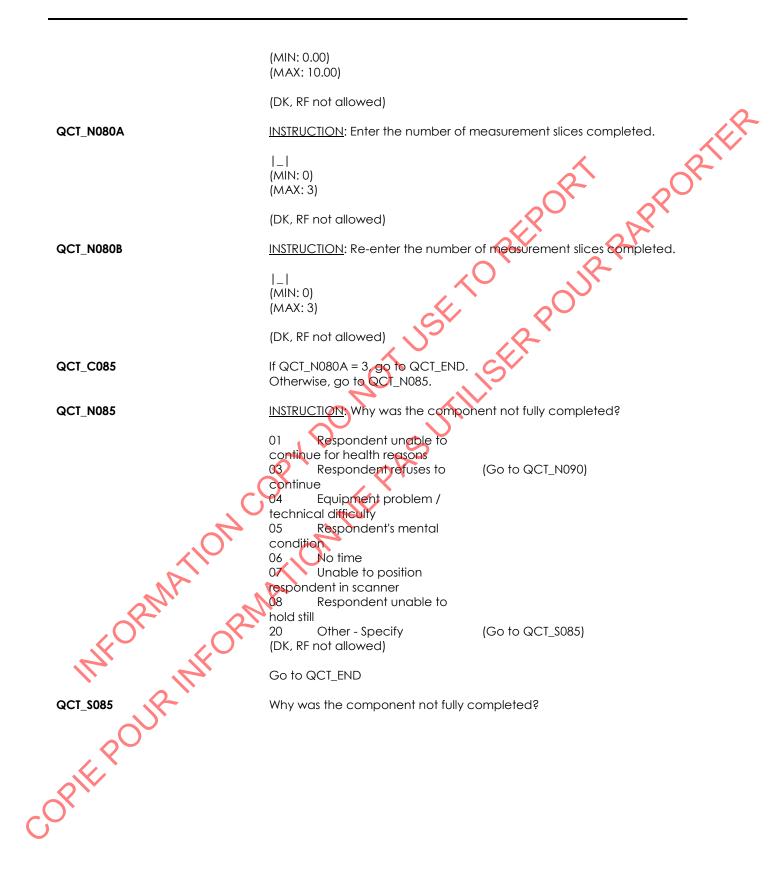
### Peripheral Quantitative Computed Tomography Measurement Block (QCT)

QCT_BEG	Content block
	External fields required:
	Variables taken from sample file: STAND: name of the city/town/village in which the clinic has been set up CLINICID: 8 digit respondent identifier
	Variables assigned in Variable Creation (Appendix II): CurrentYear: numeric year during which clinic visit is taking place CurrentMonth: numeric month during which clinic visit is taking place CurrentDay: numeric day during which clinic visit is taking place SessionE: English text of when the clinic visit is taking place
	Variables from previously completed blocks: RespondentName: name of respondent GenderE: English text for sex of respondent CON_AGE: age of respondent
	BMR_Q010: whether the respondent has broken their (right, left or both) leg(s) below the knee in the last 12 months BMR_Q020: whether the respondent has metal in their (right, left or both) leg(s) below the knee, including the ankle
2	Screen display: The following header should be displayed for each question: Stand: ^STAND Date: ^CurrentDate Session: essionE Comp: ^CompE Clinic ID: ^ClinicID Name: ^RespondentName Age: ^CON_AGE Sex: ^GenderE
QCT_Q010	We will be doing a test of your [right/left] lower leg to measure your bone mineral density.
FORM	Press <1> to continue. DK (Go to QCT_N085) (RF not allowed)
QCT Q015	There are two parts to the test which will take 8 to 10 minutes altogether. There will be a small amount of radiation, but it will be less than you would get if you were having a dental x-ray. Do you have any questions before we begin?
0°	INSTRUCTION: Answer any questions as thoroughly as possible.
OPIE.	1 Press <1> to continue. (DK not allowed) RF (Go to QCT_N090)
QCT_R020	Please remove your sock and shoe from your [right/left] leg (and roll up your pant leg to above the knee).

INSTRUCTION: Press <1> to continue.

QCT_R025	I need to know the length of your lower leg to complete the test. In order to take the measurement, I will mark a point on your knee and ankle using a washable marker. When I'm done, I'll remove them with a wipe.
	INSTRUCTION: Measure and write down on a notepad the length of the respondent's tibia in millimeters (mm). You will need to enter this value later in the pQCT software.
	Press <1> to continue.
QCT_R030	I need to enter some information into the computer to prepare for the test. This will only take a few minutes.
	<u>INSTRUCTION</u> : Enter the respondent information into the Packager and pQCT software then proceed to the scout view (SV) start position.
	Press <1> to continue.
Help text:	Scan the respondent's bracelet (Clinic ID) into the Packager software.
	Open the pQCT software and enter the required information as follows: - Name: scan the respondent's bracelet (Clinic ID). - Birth: scan the DOB barcode or manually enter "11/11/1911". - Record the CThumber assigned to the respondent on a notepad.
	- Proceed to the measurement screen and complete the "side of object" and "object length" fields. - Move the gantry assembly to the scout view (SV) start position.
QCT_N035	INSTRUCTION: Enter the CT number for the respondent's scan series.
10N	_ _ _ _ _ _ _ (MIN: 20,000) (MAX: 63,000)
A	(DK, RF not allowed)
QCT_R040	Without holding on to the equipment, I need you to lift your [right/left] leg up and put it through the holder so we can position your leg. Rest your heel in the footrest and make sure you are comfortable.
IL'I ILI	I am going to adjust the holder so your knee is in the right position and fit the strap around your foot to help you to hold it still.
IR POUR IN	<u>INSTRUCTION</u> : Position the respondent in the scanner so that the centering light is at the level of the tip of the lateral malleolus.
	Press <1> to continue.
QCT_N045	INSTRUCTION: Were you able to position the respondent?
COX	1 Yes 2 No (Go to QCT_N085) (DK, RF not allowed)

QCT_Q050	We are ready to start the first part of the test. Please hold completely still and do not talk for about 2-3 minutes. I will let you know when we are finished.
	INSTRUCTION: Was the first scout view (SV) successful?
	1 Yes (Go to QCT_N065) 2 No
	DK (Go to QCT_N085) (RF not allowed)
QCT_Q060	The first part of the test was not successful. We'll have to try it agoin. Please hold completely still and do not talk for about 2-3 minutes. I will let you know when we are finished.
	INSTRUCTION: Was the second scout view (SV) successful?
	1 Yes 2 No (DK, RF not allowed) (Go to QCT_N085)
QCT_N065	INSTRUCTION: Set the reference line.
	1 Press <1> to continue. (DK, RF not allowed)
Help text:	Open growth plate: If the respondent has an open growth plate, the reference line is drawn through the distal portion.
	Closed growth plate: If it is a closed growth plate, the reference line is drawn through the middle of the medial border of the articular cartilage.
QCT_R070	The first part is finished, but I still need you to keep your leg still and in that position. The next part will be longer, about 6-8 minutes. You need to stay still and not talk until I tell you the test is done.
aMATIC	INSTRUCTION: Ensure the respondent is comfortable and perform the measurement scan. Remind the respondent as needed during the scan that they <u>must</u> hold completely still and refrain from talking or looking around.
jor of	Press <1> to continue.
QCT_N075A	INSTRUCTION: Enter the respondent dose.
QCI_NO75A	(MIN: 0.00) (MAX: 10.00)
000	(DK, RF not allowed)
Help text:	The dose can be found at the bottom of the "Measurement Finished" screen.
OCT_N075B	INSTRUCTION: Re-enter the respondent dose.



INSTRUCTION: Specify.

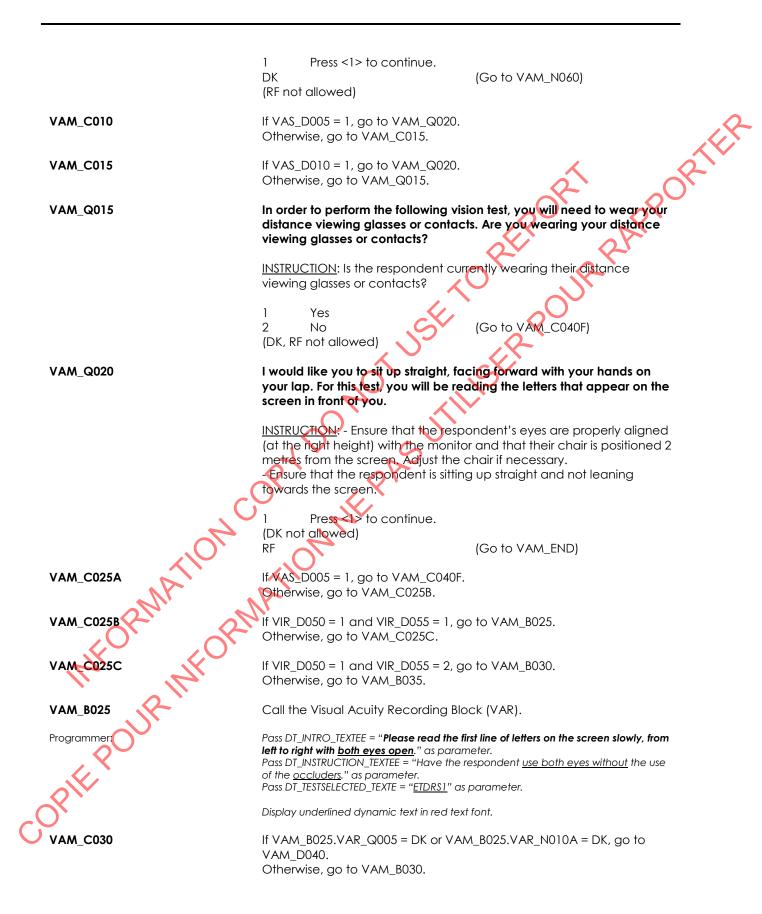


# Visual Acuity Scenario's (VAS)

VAS_BEG	Content block
	External variables required:
	External variables required: Variables taken from sample file: STAND: name of the city/town/village in which the clinic has been set up CLINICID: 8 digit respondent identifier Variables assigned in Variable Creation (Appendix II): CurrentYear: numeric year during which clinic visit is taking place CurrentMonth: numeric month during which clinic visit is taking place CurrentDay: numeric day during which clinic visit is taking place SessionE: English text of when the clinic visit is taking place Variables from previously completed blocks: RespondentName: name of respondent CON_SEX: English text for sex of respondent CON_AGE: age of respondent
	DVC_Q010: Whether the respondent wears eyeglasses or contacts. 1= yes, 2 = no DVC_Q015: Whether the respondent wears eyeglasses or contacts for distance viewing. 1= yes, 2 = no VIC_N005: whether the respondent is currently wearing glasses. VIC_Q010: whether the respondents glasses are for distance viewing. VIC_Q015: whether the respondent is currently wearing contacts VIC_Q020: whether the respondent scontacts are for distance viewing. VIC_Q025: whether the respondent brought distance viewing glasses, with him/her. VIC_Q030: whether the respondent removed his/her distance viewing contacts Screen Display:
VAS END OPIE POUR	The following header should be displayed for each question: Stand: ^STAND Date: ^CurrentDate Session: essionE Comp: CompE Clinic ID: ^ClinicID Name: ^RespondentName Age: ^CON_AGE Sex: ^GenderE
C _O ,	

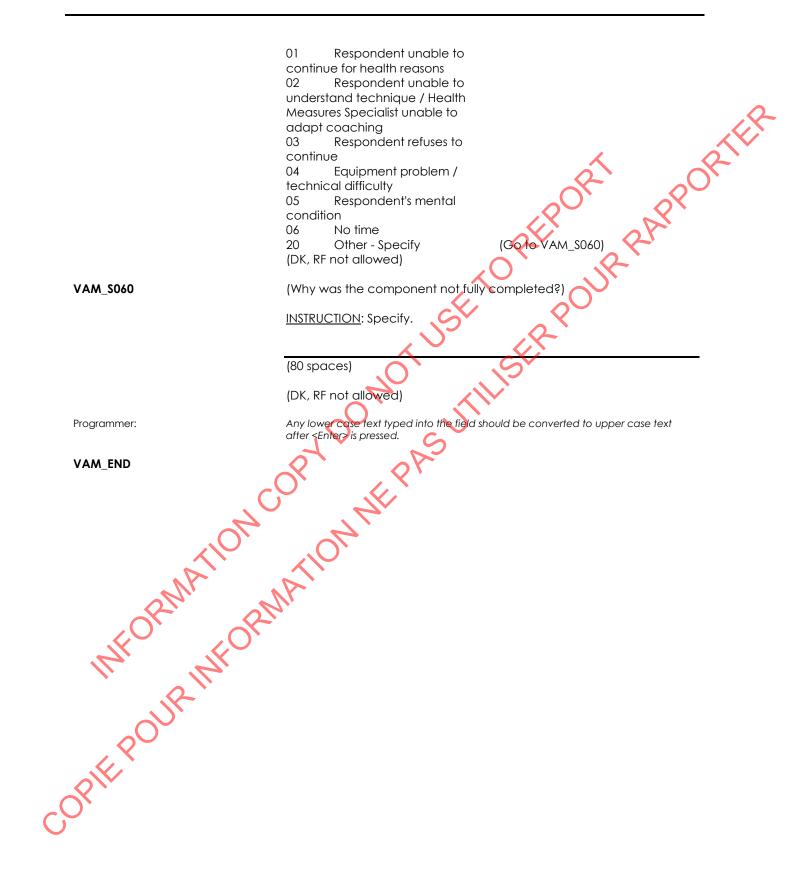
## Visual Acuity Measurement (VAM)

VAM_BEG	Content block
	External variables required:
	Variables taken from sample file: STAND: name of the city/town/village in which the clinic has been set up CLINICID: 8 digit respondent identifier HUI_Q025: whether the respondent can see well enough to recognize a friend on the other side of the street with glasses or contact lenses
	Variables assigned in Variable Creation (Appendix II): CurrentYear: numeric year during which clinic visit is taking place CurrentMonth: numeric month during which clinic visit is taking place CurrentDay: numeric day during which clinic visit is taking place SessionE: English text of when the clinic visit is taking place
	Variables from previously completed blocks: RespondentFirstName: first name of respondent RespondentLastName: last name of respondent CON_SEX: English text for sex of respondent CON_AGE: age of respondent VAS_D005 whether the use of a pinhole occluder is anticipated for the
	visual acuity test (1 = Pinhole, 2 = Non-pinhole). VAS_D010: Distance eyewear status for the visual acuity test (1 = no distance viewing correction; 2 = contacts for distance viewing; 3 = olosses for distance viewing) VIR_D050: whether the right eye should be included in the block based on the vision restriction questions (1 = Yes, 2 = No)
ATH	VIR_D055: whether the left eye should be included in the block based on the vision restriction questions (1 = Yes, 2 = No) DVC_Q015: whether the respondent wears distance viewing glasses or contacts
NFORMAN	PROXYSEX: gender of selected respondent and whether the interview is being conducted by proxy 1 = male, non-proxy 2 = female, non-proxy 3 = male, proxy 4 = female, proxy
INF POUR INF	Screen Display: The following header should be displayed for each question: Stand: ^STAND Date: ^CurrentDate Session: essionE Comp: ^CompE Clinic ID: ^ClinicID Name: ^RespondentName Age: ^CON_AGE
VAM_Q005	Sex: ^GenderE Now, we will be doing a test to evaluate your ability to see from a certain distance.



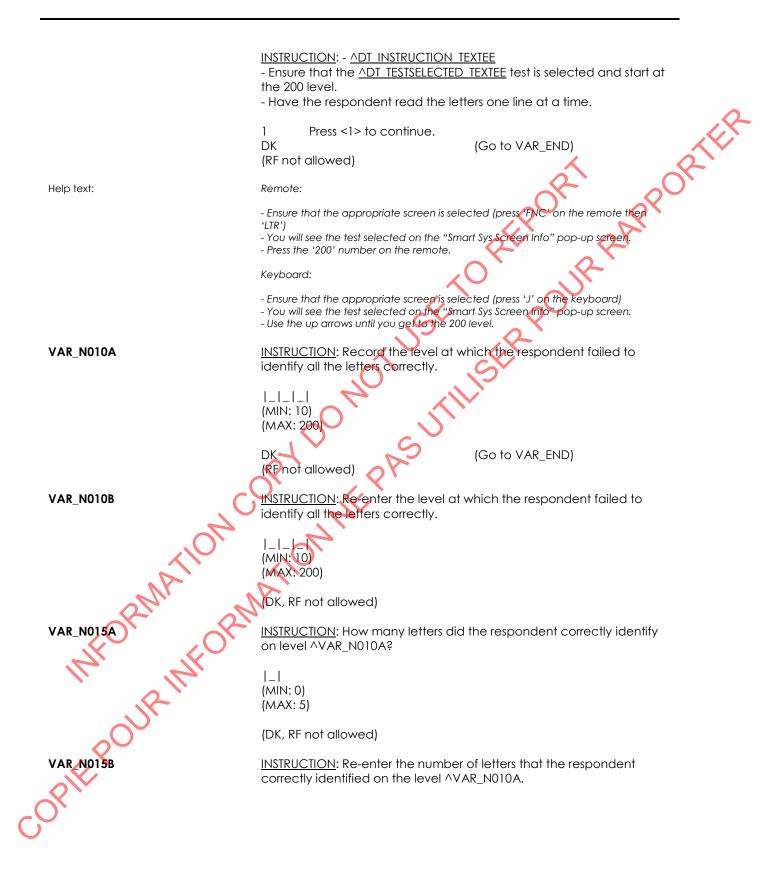
VAM_B030	Call the Visual Acuity Recording Block (VAR).
Programmer:	Pass DT_INTRO_TEXTEE = " <b>Please place this <u>solid occluder</u> over your <u>left eye</u>." as parameter. Pass DT_INSTRUCTION_TEXTEE = "Have the respondent <u>cover their left eye</u> with a <u>solid</u> <u>occluder</u>." as parameter. Pass DT_TESTSELECTED_TEXTE = "ETDRS2" as parameter.</b>
	Display underlined dynamic text in red text font.
VAM_C035	If VIR_D055 = 2, go to VAM_D040. Otherwise, go to VAM_B035.
VAM_B035	Call the Visual Acuity Recording Block (VAR).
Programmer:	Pass DT_INTRO_TEXTEE = " <b>Please place this <u>solid occluder</u> over your <u>right eye</u>." as parameter. Pass DT_INSTRUCTION_TEXTEE = "Have the respondent cover their <u>right eye</u> with a <u>solid occluder</u>." as parameter. Pass DT_TESTSELECTED_TEXTE = "<u>ETDRSR</u>" as parameter.</b>
	Display underlined dynamic text in red text font.
VAM_C040A	If DVC_Q015 = 1 and HUI_Q025 = 2, go to VAM_C040F. Otherwise, go to VAM_C040B.
VAM_C040B	If VAM_D040 = 1, go to VAM_C040C. Otherwise, go to VAM_C055.
VAM_C040C	If VAM_B025.VAR_D020 $\geq$ 40 or (VAM_B025.VAR_N010A = RESPONSE ond VAM_B025.VAR_D020 = EMPTY), go to VAM_B040. Otherwise, go to VAM_C040D.
VAM_C040D	If VAM_B030_VAR_D020 ≥ 40 or (VAM_B030.VAR_N010A = RESPONSE and VAM_B030.VAR_D020 = EMPTY), go to VAM_B045. Otherwise, go to VAM_C040E.
VAM_CO40E	If XAM_B035.VAR_D020 $\geq$ 40 or (VAM_B035.VAR_N010A = RESPONSE and VAM_B035.VAR_D020 = EMPTY), go to VAM_B050. Otherwise, go to VAM_C055.
VAM_C040F	If VIR_D050 = 1 and VIR_D055 = 1, go to VAM_B040. Otherwise, go to VAM_C040G.
VAM CO40G	If VIR_D050 = 1 and VIR_D055 = 2, go to VAM_B045. Otherwise, go to VAM_B050.
VAM_8040	Call the Visual Acuity Recording Block (VAR).
Programmer	Pass DT_INTRO_TEXTEE = " <b>Please place these <u>pinhole occluders</u> over <u>both of your</u> <u>eyes</u>." as parameter. Pass DT_INSTRUCTION_TEXTEE = "Provide the respondent with <u>two pinhole occluders</u> to place over <u>both eyes</u>." as parameter. Pass DT_TESTSELECTED_TEXTE = "ETDRS1" as parameter.</b>
COx	Display underlined dynamic text in red text font.

VAM_C045A	If VAM_B040.VAR_Q005 = DK or VAM_B040.VAR_Q010A = DK, go to VAM_C055. Otherwise, go to VAM_C045B.
VAM_C045B	If VAS_D005 = 1 or VAM_B030.VAR_D020 $\geq$ 40 or VAM_Q015 = 2 or (DVC_Q015 = 1 and HUI_Q025 = 2) or (VAM_B030.VAR_N010A = RESPONSE and VAM_B030.VAR_D020 = EMPTY), go to VAM_B045. Otherwise, go to VAM_C050A.
VAM_B045	Call the Visual Acuity Recording Block (VAR).
Programmer:	Pass DT_INTRO_TEXTEE = " <b>Please place this <u>pinhole occluder</u> over your <u>right eye</u> and the <u>solid occluder</u> over your <u>left eye</u>." as parameter. Pass DT_INSTRUCTION_TEXTEE = "Provide the respondent with a <u>pinhole occluder</u> to cover the <u>right eye</u> and a <u>solid occluder</u> to cover the <u>left eye</u>." as parameter. Pass DT_TESTSELECTED_TEXTE = "<u>ETDRS2</u>" as parameter.</b>
	Display underlined dynamic text in red text font.
VAM_C050A	If VIR_D055 = 1, go to VAM_C050B. Otherwise, go to VAM_C055
VAM_C050B	If VAS_D005 = 1 or VAM_B035.VAR_D020 ≥ 40 or VAM_Q015 = 2 or (DVC_Q015 = 1 and HUI_Q025 = 2) or (VAM_B035.VAR_N010A = RESPONSE and VAM_B035.VAR_D020 = EMPTY), go to VAM_B050. Otherwise, go to VAM_C055.
VAM_B050	Call the Visual Acuity Recording Block (VAR).
Programmer:	Pass DT_INTRO_TEXTEE = " <b>Please place this <u>solid occluder</u> over your <u>right eye</u> and the <u>pinhole occluder</u> over your <u>left eye</u>." as parameter. Pass DT_INSTRUCTION_TEXTEE = "Provide the respondent with a <u>solid occluder</u> to cover the <u>right eye</u> and a <u>pinhole occluder</u> to cover the <u>left eye</u>." as parameter. Pass DT_TESTSELECTED_TEXTE = "<u>ETDRSR</u>" as parameter. Display underlined dynamic text in red text font.</b>
VAM_C055	If VAM_B025.VAR_Q005 = DK or VAM_B025.VAR_N010A = DK or VAM_B030.VAR_Q005 = DK or VAM_B030.VAR_N010A = DK or VAM_B035.VAR_Q005 = DK or VAM_B035.VAR_N010A = DK or VAM_B040.VAR_Q005 = DK or VAM_B040.VAR_N010A = DK or VAM_B045.VAR_Q005 = DK or VAM_B045.VAR_N010A = DK or VAM_B050.VAR_Q005 = DK or VAM_B050.VAR_N010A = DK, go to VAM_N060. Otherwise, go to VAM_END.
VAM_N060 OPIE-POUR	INSTRUCTION: Why was the component not fully completed?
COK	



## Visual Acuity Recording (VAR)

VAR_BEG	Called block
	External variables required:
	Variables taken from sample file: STAND: name of the city/town/village in which the clinic has been set up CLINICID: 8 digit respondent identifier
	Variables assigned in Variable Creation (Appendix II): CurrentYear: numeric year during which clinic visit is taking place CurrentMonth: numeric month during which clinic visit is taking place CurrentDay: numeric day during which clinic visit is taking place SessionE: English text of when the clinic visit is taking place
	Variables from previously completed blocks: RespondentName: name of respondent CON_SEX: English text for sex of respondent CON_AGE: age of respondent VAM -DT_INTRO_TEXTEE: Introduction text to indicate to the respondent what portion of the test they will be doing VAM -DT_INSTRUCTION_TEXTEE: Instruction text to indicate the
	evaluator how the test should be performed VAM -DT_TESTSELECTED_TEXTEE: Text indicating which set of letters should be selected to perform the test
.0	Screen Display: The following header should be displayed for each question: Stand: ^STAND Date: ^CurrentDate Session: essionE Comp: ^CompE Clinic ID: ^ClinicID Name: ^RespondentName Age: ^CON_AGE Sex: ^GenderE
VAR_Q005	ADT, INTRO_TEXTEE You will read the first line, slowly, from left to right and then stop. I will let you know when to start reading the next line.
River	Do not squint when reading the letters.
COPIE POUR INFO	(Do you have any questions?)
polific	
OPIE I	
C C	





## Visual Field (Frequency Doubling Test) Introduction (FDTI)

FDTI_BEG	Content block
	External variables required:
	Variables taken from sample file: STAND: name of the city/town/village in which the clinic has been set up CLINICID: 8 digit respondent identifier DV_NONGESTATIONALDIABETES: whether the respondent has been diagnosed with type 1 or type 2 diabetes () = Yes; 2 = No)
	Variables assigned in Variable Creation (Appendix II): CurrentYear: numeric year during which clinic visit is taking place CurrentMonth: numeric month during which clinic visit is taking place CurrentDay: numeric day during which clinic visit is taking place SessionE: english text of when the clinic visit is taking place CON_DDN: respondent's confirmed date of birth
	Variables from previously completed blocks: RespondentName: name of respondent GenderE: english text for sex of respondent CON_SEX: sex of respondent CON_AGE: age of respondent
c.	VIC_Q035: whether the respondent is currently wearing distance viewing glasses that are tinted or that change color when exposed to light VIR_D050: whether the right eye should be included in the block based on the vision restriction questions (1 = Yes, 2 = No) VIR_D055: whether the left eye should be included in the block based
ATION	on the vision restriction questions (1 = Yes, 2 = No)
SFORMAL FORM	<ul> <li>Following header should be displayed for each question:</li> <li>Stand: ^STAND Date: ^CurrentDate Session: essionE Comp:</li> <li>^CompE</li> <li>Clinic ID: ^ClinicID Name: ^RespondentName Age: ^CON_AGE</li> <li>Sex: ^GenderE</li> </ul>
FDTI_R005	Now, we will conduct a visual field test which will examine your scope of vision.
$\sim$	INSTRUCTION: Press <1> to continue.
Programmer:	Allow 'DK' as a response category.
FDTI CO10	If FDTI_R005 = DK, go to FDTI_END. Otherwise, go to FDTI_D015.
FDTI_R020	First, I will need to enter some information into our computer system to prepare the test. This will only take a few minutes.

	<u>INSTRUCTION</u> : Press <1> to print the label with the respondent's date of birth.
	<ul> <li>Use the label to scan the respondent date of birth in the Humphrey Matrix software.</li> <li>Dispose of label following the appropriate protocol.</li> </ul>
Help text:	In the Humphrey Matrix software:
	- From the "View Patient" Screen (F2)
	- Select "Add Patient". - Enter "New Patient". - Select "Enter New Patient". - <u>Scan</u> the "date of birth" and the "Clinic ID" (PatientID field). - Select "Add Patient" and "OK" to save.
	From the "Testing" Screen
	- Select the screening test "N-30-1-DT-Screening" from the drop down menu.
Programmer:	The bar code portion of the label should be the CON DDN variable. The printed portion of the label should consist of the CON_DDN variable with no spaces.
	The label should be printed on a DYMO printer.
	Label type 2
FDTI_N025	INSTRUCTION: Is the respondent wearing glasses?
C	2 Yes 2 No (DK, RF not allowed)
FDTI_C030	If FDTI_N025 =1 and VIC_Q035 = 1, go to FDTI_Q035. Otherwise, go to FDTI_D040.
FDTI_Q035	In order to complete the test, you will need to remove your eyeglasses, because they are tinted or they change colour when they
antri	are exposed to light.
OF R	NSTRUCTION: Did the respondent remove their glasses?
	2 No (Go to FDTI_END) (DK not allowed)
	RF (Go to FDTI_END)
FDTI_Q045 OUR INFORM	I will be taking the measurement on your ^DT_ FDT1045E. Please hold this response bar with one hand and put your thumb on the button. You will need to click this button whenever you perceive a white flicker, as small or as dim as it may seem. Press the button only once and release it quickly.
C _O ,	Do you have any questions before we begin the test?

	INSTRUCTION: - Clean the chin rest with a disinfectant swab. - Answer any questions as thoroughly as possible.
	1 Press <1> to continue. (DK not allowed) RF (Go to FDTI_END)
Programmer:	IF FDTI045E = "left eye" then display the word "left" in the first sentence of the read text in red text font.
FDTI_R065	Please place your head on the forehead pad and your chin on the DT_CHINRESTCOLORE chin rest.
	<ul> <li>Sit as still as you can with your feet flat on the floor.</li> <li>Adjust your head position until you are able to see all four triangles and the black square in the center of the screen.</li> <li>Breathe normally.</li> </ul>
	I am now going to adjust your position so that i can take a precise measurement.
	<u>INSTRUCTION</u> : - Move the head rest to the <b>[right/left/right]</b> side to test the <b>[right/left/right]</b> eye. - Adjust the respondent's position so that their eye is lined up within the circle on the screen and chin is correctly placed. - Ensure " <b>[OD/OS/OD]</b> " ( <b>[right/left/right]</b> eye) is selected and start the test. Press <1> to continue.
Programmer:	IFDT_CHINRESTCOLORE = 'white' then display the word "White" in the first sentence of the read text in red text font.
MATIC	IF DT_FDT1055E = 'left' then display the word "left" in the instruction of the read text in red text font. IF DT_FDT1060E = 'OS' then display the word "OS" in the instruction of the read text in red text font.
FDTI_END PMAN	SRM
CO.	

# Visual Field (Frequency Doubling Test) Measurement (FDTM)

FDTM_BEG	Content block
	External variables required:
	Variables taken from sample file: STAND: name of the city/town/village in which the clinic has been set up CLINICID: 8 digit respondent identifier DV_NONGESTATIONALDIABETES: whether the respondent has been diagnosed with type 1 or type 2 diabetes () = (res; 2 = No)
	Variables assigned in Variable Creation (Appendix II): CurrentYear: numeric year during which clinic visit is taking place CurrentMonth: numeric month during which clinic visit is taking place CurrentDay: numeric day during which clinic visit is taking place SessionE: english text of when the clinic visit is taking place
	Variables from previously completed blocks: RespondentName: name of respondent GenderE: english text for sex of respondent CON_SEX: sex of respondent CON_AGE: age of respondent
	VIC_Q035: whether the respondent is currently wearing distant viewing glasses that are tinted or change color when exposed to light VIR_D050: whether the right eye should be included in the block based on the vision restriction questions (1 = Yes, 2 = No) VIR_D055: whether the left eye should be included in the block based on the vision restriction questions (1 = Yes, 2 = No)
TION	FDTI_R005: introduction to the FDT measurement FDTI_Q035: whether the respondent removed their tinted, photochromatic or transition glasses FDTI_Q045: whether the respondent refused to do the mesurement
FORMALORN	Screen Display: The following header should be displayed for each question: Stand: ^STAND Date: ^CurrentDate Session: essionE Comp: ^CompE Clinic ID: ^ClinicID Name: ^RespondentName Age: ^CON_AGE Sex: ^GenderE
FDTM_C005A	If FDTI_R005 = DK, go to FDTM_N210. Otherwise, go to FDTM_C005B.
FDTM_C005B	If FDTI_Q035 = RF or FDTI_Q035 = 2 or FDTI_Q045 = RF, go to FDTM_END. Otherwise, go to FDTM_R010.
FDTM R010	We will begin with a practice test. - Ensure that you can see all four triangles at the edge of the circle. - Focus on the black square. - Press the button when you think you see any sort of white flash. - You should blink normally during the test.

	INSTRUCTION: Give the respondent the response button.
	Press <1> to continue.
Programmer:	(DK, RF not allowed)
FDTM_R015	Now that you have practiced, we will start the test. You will see a brief flash just before the test begins. Remember to stay focused on the black square.
	INSTRUCTION: Cue respondent to focus on the black square and to blink throughout the test.
	Press the "start test" button.
	Press <1> to continue.
Help text:	The test can be paused (e.g., need to readjust their pupil) by using the "pause test" button or cancelled (e.g., respondent does not want to continue) by using the "cancel test" button at any time.
Programmer:	Allow 'DK' as a response category.
FDTM_C020A	If VIR_D050 = 2 and FDTM_R015 = DK, go to FDTM_D050. Otherwise, go to FDTM_C020B.
FDTM_C020B	If VIR_D050 = 1 and FDTM_R015 = DK, go to FDTM_C030A. Otherwise, go to FDTM_C020C.
FDTM_C020C	If VIR_D050 = 1, go to FDTM_N025. Otherwise, go to FDTM_N045.
FDTM_N025	INSTRUCTION Were there two errors or more in the <u>first</u> attempt for the <u>right</u> eye?
ATIO	1 2 No DK, RF not allowed)
FDTM_C030ARA	If VIR_D050 = 1 and VIR_D055 = 1, go to FDTM_R035. Otherwise, go to FDTM_D050.
FDTM_R035	I will now take the measurement on your left eye. Ensure that you can see all four triangles at the edge of the circle, focus on the black square and stay still.
FDTM_C030A FDTM_R035	<u>INSTRUCTION</u> : - Move the head rest to the left side to test the left eye. - Adjust the respondent's position so that their eye is lined up within the circle on the screen and their chin is correctly placed. - Ensure "OS" (left eye) is selected and start the test.
R.	Press <1> to continue.
Programmer:	Allow 'DK' as a response category.
FDTM_C040A	If FDTM_R035 = DK, go to FDTM_D050. Otherwise, go to FDTM_N045.

FDTM_N045	<u>INSTRUCTION</u> : Were there two errors or more in the <u>first</u> attempt for the <u>left</u> eye?
	1 Yes 2 No (DK, RF not allowed)
FDTM_C060	If DV_RIGHTFDTREDO1 = 2 and DV_LEFTFDTREDO1 = 2, go to FDTM_C175. Otherwise, go to FDTM_D065.
FDTM_R070	There were some errors with that set of measurements, so we have to do the test again. I will take a second measurement of [your right eye/your left eye/both your eyes, one at a time].
	INSTRUCTION: Press <1> to continue.
Programmer:	Allow "DK" as a response category.
FDTM_C075A	If FDTM_R070 = DK, go to FDTM_C175. Otherwise, go to FDTM_C075B.
FDTM_C075B	If VIR_D050 = 1 and DV_RIGHTFDTREDO1 = 1, go to FDTM_R080. Otherwise, go to FDTM_C095.
FDTM_R080	(I will now take the measurement of your right eye). Ensure that you can see all four triangles at the edge of the circle, focus on the black square and hold still.
	INSTRUCTION: - Move the head rest to the right side to test the right
.0	eye. - Adjust the respondent's position so that their eye is lined up within the circle on the screen and their chin is correctly placed. - Ensure "OD" (right eye) is selected and start the test.
	Press <1> to continue.
Programmer:	Allow "DK" as a response category.
FDTM_C085	If FDTM_R080 = DK, go to FDTM_C095. Otherwise, go to FDTM_N090.
FDTM_N090	<u>INSTRUCTION</u> : Were there two errors or more in the <u>second</u> attempt for the <u>right</u> eye?
pour	1 Yes 2 No (DK, RF not allowed)
FDTM_C095	If VIR_D055 = 1 and DV_LEFTFDTREDO1 = 1, go to FDTM_R100. Otherwise, go to FDTM_D115A.
FDTM_R100	(I will now take the measurement of your left eye). Ensure that you can see all four triangles at the edge of the circle, focus on the black square and hold still.

	INSTRUCTION: - Move the head rest to the left side to test the left eye. - Adjust the respondent's position so that their eye is lined up within the circle on the screen and their chin is correctly placed. - Ensure "OS" (left eye) is selected and start the test.
	Press <1> to continue.
Programmer:	Allow "DK" as a response category.
FDTM_C105	If FDTM_R100 = DK, go to FDTM_D115A. Otherwise, go to FDTM_N110.
FDTM_N110	INSTRUCTION: Were there two errors or more in the <u>second</u> attempt for the <u>left</u> eye?
	1 Yes 2 No (DK, RF not allowed)
FDTM_C120	If DV_RIGHTFDTREDO2 = 2 and DV_LEFTFDTREDO2 = 2, go to FDTM_C175. Otherwise, go to FDTM_D125.
FDTM_R130	There were too many errors with that set of measurements, so we have to do the test again. I will take a last measurement of [your right eye/your left eye/both your eyes, one at a time].
	INSTRUCTION: Press <1> to continue.
Programmer:	Allow "DK" as a response category.
FDTM_C135A	If FDTM_R130 = DK, go to FDTM_C175. Otherwise, go to FDTM_C135B.
FDTM_C135B	If VIR_D050 = 1 and DV_RIGHTFDTREDO2 = 1, go to FDTM_R140. Otherwise, go to FDTM_C155.
FDTM_R140	(will now take the last measurement of your right eye). Ensure that you can see all four triangles at the edge of the circle, focus on the black square and hold still.
who who	INSTRUCTION: - Move the head rest to the right side to test the right eye.
INFORM INFORM	- Adjust the respondent's position so that their eye is lined up within the circle on the screen and their chin is correctly placed. - Ensure "OD" (right eye) is selected and start the test.
0°	Press <1> to continue.
Programmer:	Allow "DK" as a response category.
FDTM_C145	If FDTM_R140 = DK, go to FDTM_C155. Otherwise, go to FDTM_N150.
FDTM_N150	<u>INSTRUCTION</u> : Were there two errors or more in the <u>third</u> attempt for the <u>right</u> eye?

	1 Yes 2 No (DK, RF not allowed)
FDTM_C155	If VIR_D055 = 1 and DV_LEFTFDTREDO2 = 1, go to FDTM_R160. Otherwise, go to FDTM_C175.
FDTM_R160	(I will now take the last measurement of your left eye) Ensure that you can see all four triangles at the edge of the circle, focus on the black square and hold still.
	<u>INSTRUCTION</u> : - Move the head rest to the left side to test the left eye. - Adjust the respondent's position so that their eye is lined up within the circle on the screen and their chin is correctly placed. - Ensure "OS" (left eye) is selected and start the test.
	Press <1> to continue.
Programmer:	Allow "DK" as a response category
FDTM_C165	If FDTM_R160 = DK, go to FDTM_C175. Otherwise, go to FDTM_N170.
FDTM_N170	INSTRUCTION: Were there two errors or more in the <u>third</u> attempt for the left eye?
FDTM_C175	(DB, RF not allowed) If VIR_D050 = 1, go to FDTM_N180. Otherwise, go to FDTM_C185.
FDTM_N180	INSTRUCTION: Record how many tests were saved for the <u>right</u> eye.
OR RE	(DK, RF not allowed)
FDTM_CT85	If VIR_D055 = 1, go to FDTM_N190. Otherwise, go to FDTM_C195.
FDTM_N190	INSTRUCTION: Record how many tests were saved for the left eye.
E.POU	_  (MIN: 0) (MAX: 3)
RIV	(DK, RF not allowed)
FDTM_C195	If (FDTM_N180 = 0 or EMPTY) and (FDTM_N190 = 0 or EMPTY), go to FDTM_C205A. Otherwise, go to FDTM_N200.

FDTM_N200	<u>INSTRUCTION</u> : Ensure the test results have been saved in the FDTM software and the respondent's .xml file has been transferred from the software to the clinic server on the F:// drive.
	Press <1> to continue.
	(DK, RF not allowed)
Help text:	In the Humphrey Matrix Software
	- "Recall" Patient (F3). - Search with Clinic ID. - Select all patient files. - Click "Save As". - Change file name to respondent Clinic ID.
FDTM_C205A	If (VIR_D050 = 1 and FDTM_N180=0) or (VIR_D055 = 1 and FDTM_N190 = 0), go to FDTM_N210. Otherwise, go to FDTM_C205B.
FDTM_C205B	If ((VIR_D050 = 1 and VIR_D055 = 1) and (FDTM_N025=2 or FDTM_N090=2 or FDTM_N150=2) and (FDTM_N045=2 or FDTM_N110=2 or FDTM_N170=2)) or ((VIR_D050 = 1 and VIR_D055 = 2) and (FDTM_N025=2 or FDTM_N090=2 or FDTM_N150=2)) or ((VIR_D050 = 2 and VIR_D055 = 1) and (FDTM_N045=2 or FDTM_N110=2 or FDTM_N170=2)), go to FDTM_END Otherwise_go to FDTM_N210.
FDTM_N210	INSTRUCTION: Why was the component not fully completed? O1 Respondent unable to continue for health reasons O2 Respondent unable to understand technique O3 Respondent refuses to continue O4 Equipment problem / technical difficulty O5 Respondent's mental condition
FDTM_S210	06 No time 20 Other - Specify (Go to FDTM_S210) (DK, RF not allowed)
	Go to FDTM_END
FDTM_S210	(Why was the component not fully completed?)
\$ ⁰	INSTRUCTION: Specify.
FDTM_S210	(80 spaces)
OK .	(DK, RF not allowed)
Programmer:	Any lower case text typed into the field should be converted to upper case text after <enter> is pressed.</enter>

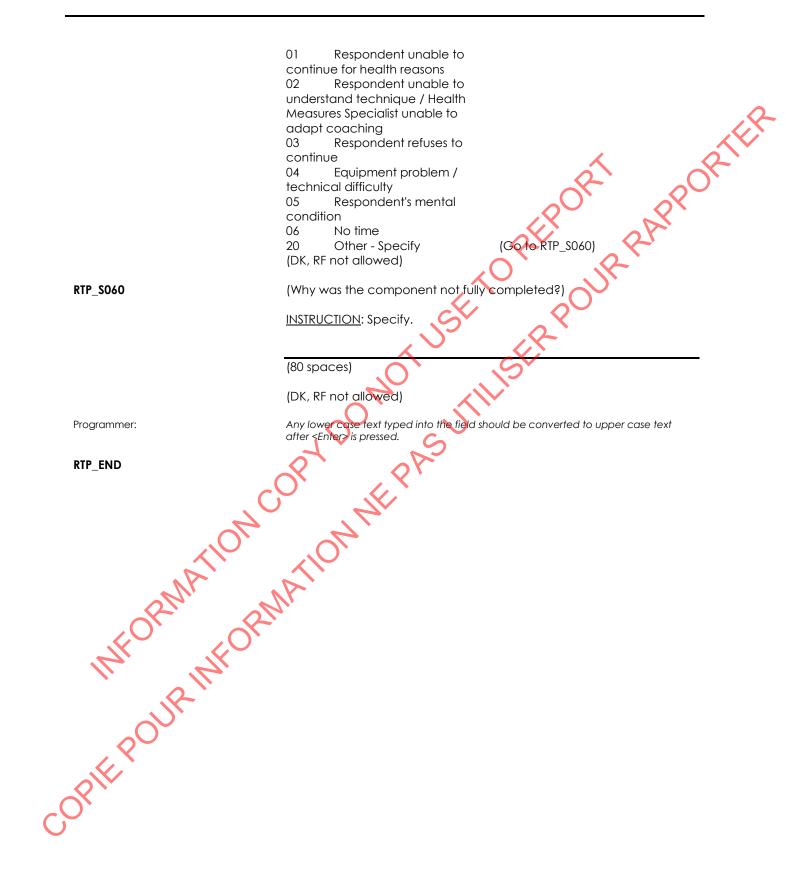
RTP_BEG	Content block
	External variables required:
	Variables taken from sample file: STAND: name of the city/town/village in which the clinic has been set up CLINICID: 8 digit respondent identifier
	CLINICID: 8 digit respondent identifier
	Variables assigned in Variable Creation (Appendix II): CurrentYear: numeric year during which clinic visit is taking place CurrentMonth: numeric month during which clinic visit is taking place CurrentDay: numeric day during which clinic visit is taking place SessionE: English text of when the clinic visit is taking place
	Variables from previously completed blocks: RespondentName: name of respondent CON_SEX: English text for sex of respondent CON_AGE: age of respondent
	RPD_D010: Determination of the type of compensation lens to be used during the retinal photography measurement of the right eye. If RPD_D005 $\geq$ 15, then RPD_D010 =1 (Positive compensation lens for the
	right eye). Elseif RPD, $D005 \le -12$ , then RPD_ $D010 = 2$ (Negative compensation lens for the right eye). Otherwise, RPD_ $D010 = 3$ (No
	compensation lens needed for the right eye). RPD_D020; Determination of the type of compensation lens to be used
	during the retinal photography measurement of the left eye. If RPD_D015≥ 15, then RPD_D020 = 1 (Positive compensation lens for the left eye). Elseif RPD_D015≤ 12, then RPD_D020 = 2 (Negative
	compensation lens needed for the left eye). $D_{D020} = 2$ (Negative compensation lens needed for the left eye).
	VIR_D060: whether the right eye should be tested based on the vision
	component restriction questions (1 = Yes, 2 = No) VIR_D065: whether the left eye should be tested based on the vision
	component restriction questions (1 = Yes, 2 = No) DVC_Q015: whether the respondent wears distance viewing glasses or
An.	contacts (1 = Yes, 2 = No) DVC_N020: whether the respondent is currently wearing non-distance
2N.	Niewing glasses (1 = Yes, 2 = No) DVC_Q025: whether the respondent is wearing non-distance viewing
	contacts (1 = Yes, 2 = No) DVC_Q030: whether the respondent removed their non-distance
in the	viewing contacts (1 = Yes, 2 = No)
	VIC_N005: whether the respondent is currently wearing glasses (1 = Yes, 2 = No)
	VIC_Q015: whether the respondent is wearing contacts (1 = Yes, 2 = No)
MFORMAT.	VIC_Q025: whether the respondent brought distance viewing glasses with him/her (1 = Yes, 2 = No)
A A A A A A A A A A A A A A A A A A A	VIC_Q030: whether the respondent removed his/her distance viewing contacts $(1 = Yes, 2 = No)$
$\mathcal{R}^{*}$	VAM_Q015: whether the respondent is wearing distance viewing glasses or contacts during visual acuity (1 = Yes, 2 = No)
	PROXYSEX: gender of selected respondent and whether the interview
	is being conducted by proxy
	$1 - male_n non-proxy$

1 = male, non-proxy

	2 = female, non-proxy 3 = male, proxy 4 = female, proxy
	Screen Display: The following header should be displayed for each question: Stand: ^STAND Date: ^CurrentDate Session: essionE Comp: ^CompE Clinic ID: ^ClinicID Name: ^RespondentName Age: ^CON_AGE Sex: ^GenderE
RTP_R005	For this next test, I will take a picture of the interior surface of your [eyes/right eye/left eye].
	INSTRUCTION: Press <1> to continue.
Programmer:	Allow 'DK' as a response category.
RTP_C010	If RTP_R005 = DK, go to RTP_N060, Otherwise, go to RTP_D010
RTP_R015	First, I need to enter some information into our computer system in order to prepare the test. This will only take a few minutes.
	INSTRUCTION: Open the Navis-Ex software shortcut on the desktop. - Follow the instructions on importing the respondent information. Press <1> to continue.
Help text:	In the Navis-Ex Software:
	- Click on the "File" tab in the upper right corner of the screen - Select "Patient Import" (shift + ctrl + i) - Select the file tocation: C:\ProgramData\StatisticsCanada\Retinal\ - Click "okay"
	- Ensure that the respondent's Clinic ID appears on the "Patient ID" list
RTP_C020	If (DVC_Q025 = 1 and DVC_Q030 = 2) or (VIC_Q015 = 1 and VIC_Q025 2) or (VIC_Q015 =1 and VIC_Q025 = 1) or DVC_N020 = 1 or VIC_N005 = 1 or VAM_Q015 = 1, go to RTP_D025. Otherwise, go to RTP_D030.
RTP_Q025	(In order to take a clear picture, you will need to remove your [contacts/glasses]. You will be able to put your [contacts/glasses] back on once we have completed this measurement.)
our	INSTRUCTION: Provide the respondent with a contact case and solution to remove their contacts, if necessary.
280	Did the respondent remove their [contacts/glasses]?
COPIE	1       Yes         2       No         3       The [contacts/glasses]         were already removed
$\checkmark$	(DK, RF not allowed)

RTP_C030	If RTP_Q025 = 2, go to RTP_N060. Otherwise, go to RTP_D030.
RTP_Q030	During this test, you need to sit up straight, with your feet flat on the floor. I may need to adjust you so that we can take a proper measurement.
	1. Please place your head and chin on the rests and remain as still as you can.
	<ol> <li>Focus on the green dot inside the camera.</li> <li>You should expect a flash of bright light and the photo will be taken automatically.</li> </ol>
	I will take four to six photographs of your [eyes/right eye/left eye].
	Do you have any questions before we begin?
	<u>INSTRUCTION</u> : - Answer any questions as thoroughly as possible. - Ensure the device is in the correct position (check right or left
	indicator on screen). - Take four photographs of <b>[both eyes/the right eye/the left eye]</b> .
	1 Press <1> to continue. (DK not allowed)
	RF (Ĝo to RTP_END)
Help text:	Using the Nidek AFC-330 device: Open respondents case
	Click on the clipboard icon.
	- Click on the "Patient ID" tab. Scan the respondent's bracelet (Clinic ID).
	<ul> <li>Click on "OK"</li> <li>Verify the respondents information.</li> <li>If necessary, pull the compensation lens tab towards the + or - symbol.</li> </ul>
	Capturing the image
A	Click on the camera icon in the bottom right corner. Take the first photograph.
R.N.	Save the image by clicking on the icon with the green circle and envelope. - Click the camera icon on the left side of the screen to capture another image.
KO.	- Repeat the test until four clear images (up to a maximum of six trials) have been taken.
Programmer:	Use red font for: "[eyes/right eye/left eye]" and "[both eyes/the right eye/the left eye]".
RTP_N045	INSTRUCTION: Ensure the test results have been saved in the Navis-Ex software and the respondent's files transferred from the software to the clinic server R: drive.
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	1 Press <1> to continue. (DK, RF not allowed)
Help text:	In the Navis-Ex Software:
	<ul> <li>Double click on the respondent's name or respondent ID.</li> <li>Verify that the appropriate number of images has been saved.</li> <li>Click on the "File" tab in the upper left corner of the screen.</li> <li>Select "Patient Export" (shift + ctrl + e).</li> <li>Save files to the Retinal (R:) drive.</li> <li>Cllick on "Back".</li> <li>Click on "Close".</li> <li>Click "OK" to exit the Navis-Ex software</li> </ul>
RTP_C050	If VIR_D060 = 1, go to RTP_N050. Otherwise, go to RTP_C055.
RTP_N050	INSTRUCTION: Record the number of images saved for the <u>right</u> eye.
	_  (MIN: 0) (MAX: 6)
	(DK, RF not allowed)
RTP_C055	If VIR_D065 = 1, go to RTP_N055. Otherwise, go to RTP_C060.
RTP_N055	INSTRUCTION: Record the number of images saved for the <u>left</u> eye. (MIN: 0) (MAX: 6) (DK, RF not allowed)
RTP_C060	If (RTP_N050 = RESPONSE and < 4) or (RTP_N055 = RESPONSE and < 4), go to RTP_N060. Otherwise, go to RTP_END.
RTP_N060	INSTRUCTION: Why was the component not fully completed?
RTP_N060 OPMA	
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# Retinal Photography - Derived Variables (RPD)

RPD_BEG	Content block
	External variables required:
	Variables taken from sample file: STAND: name of the city/town/village in which the clinic has been set up CLINICID: 8 digit respondent identifier
	Variables assigned in Variable Creation (Appendix II): CurrentYear: numeric year during which clinic visit is taking place CurrentMonth: numeric month during which clinic visit is taking place CurrentDay: numeric day during which clinic visit is taking place SessionE: English text of when the clinic visit is taking place
	Variables from previously completed blocks: RespondentName: name of respondent CON_SEX: English text for sex of respondent CON_AGE: age of respondent
	VPV_D005: The sphere value for the right eyeglasses or contact prescription is captured from the respondent's prescription or is self- reported if a prescription is unavailable during the household interview and clinic visit. VPV_D010: The cylinder for the right eyeglasses or contact prescription
	is captured from the respondent's prescription during the household interview or clinic visit. VPV_D020: The sphere for the left eyeglasses or contact prescription is captured from the respondent's prescription or is self-reported if a prescription is unavailable during the household interview and clinic
	visit. VPV_D025. The cylinder for the left eyeglasses or contact prescription is captured from the respondent's prescription unavailable during the household interview or clinic visit.
ORMAN	Screen Display: The following header should be displayed for each question: Stand: ^STAND Date: ^CurrentDate Session: essionE Comp: ^CompE
RPD_END OPIERD	Clinic ID: ^ClinicID Name: ^RespondentName Age: ^CON_AGE Sex: ^GenderE
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## Intraocular Pressure Introduction (IOPI)

IOPI_BEG	Content block
	External variables required:
	Variables taken from sample file: STAND: name of the city/town/village in which the clinic has been set up CLINICID: 8 digit respondent identifier DV_NONGESTATIONALDIABETES: Whether the respondent has been diagnosed with type 1 or type 2 diabetes (1 = v(es; 2 = No)
	Variables assigned in Variable Creation (Appendix II): CurrentYear: numeric year during which clinic visit is taking place CurrentMonth: numeric month during which clinic visit is taking place CurrentDay: numeric day during which clinic visit is taking place SessionE: English text of when the clinic visit is taking place
	Variables from previously completed blocks: RespondentName: name of respondent GenderE: English text for sex of respondent CON_SEX: sex of respondent CON_AGE: age of respondent
	DVC_Q025: whether or not the respondent is wearing non-distance viewing contact lenses DVC_Q030: whether the respondent removed their non-distance viewing contacts DVC_D030: time at which respondent took out their non-distance viewing contact lenses
ATION C	VIC_Q015: whether the respondent is currently wearing contact lenses for distance viewing VIC_Q030: whether the respondent removed their contact lenses VIC_D030: time at which respondent took out contact lenses VIR_D060: whether the right eye should be included in the block based on the vision restriction questions (1 = Yes, 2 = No)
RIMAN RM	VIR_D065: whether the left eye should be included in the block based on the vision restriction questions (1 = Yes, 2 = No) Screen Display:
INFO UR INFO.	The following header should be displayed for each question: Stand: ^STAND Date: ^CurrentDate Session: essionE Comp: ^CompE Clinic ID: ^ClinicID Name: ^RespondentName Age: ^CON_AGE Sex: ^GenderE
	If DVC_Q030 = 1 or VIC_Q030 = 1, go to IOPI_D005. Otherwise, go to IOPI_R020.
IOPI_NØ10	<u>INSTRUCTION</u> : The respondent removed their contacts at [DVC_D030 (in HH:MM:SS format)/VIC_D030 (in HH:MM:SS format)].
6	1 Continue 2 Skip IOP measurement (Go to IOPI_END) (DK, RF not allowed)

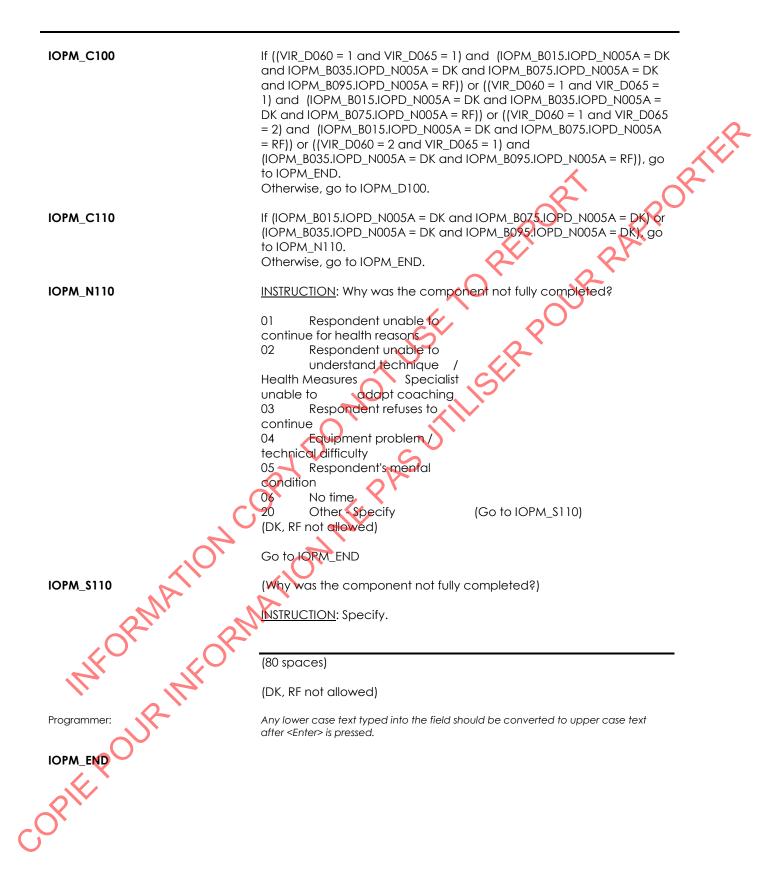
IOPI_R020	This next test measures the fluid pressure inside the eye.
	INSTRUCTION: Ensure the respondent removes their glasses and unbuttons or removes any tight collared or buttoned shirt.
	Press <1> to continue.
Programmer:	Allow 'DK' as a response category.
IOPI_C025	If IOPI_R020 = DK, go to IOPI_END. Otherwise, go to IOPI_D025.
IOPI_R035	During this test, there will be three puffs of air administered from this machine to your [left eye/right eye/eyes, one at a time]. I will now do a practice puff of air so you can feel how gentle it is. Please sit up straight, lean against the forehead rest and close both of your eyes.
	<u>INSTRUCTION</u> : - Slide the forehead rest to the <b>[left/right/right]</b> . - Adjust the height of the table or chair so that the canthus marks on the sides of the instrument are level with the respondent's eyes.
	Press <1> to continue:
Programmer:	Display DT_IOPI30AE and DT_IOPI30BE in red text font if IOPI30A = "left eye" and IOPI30B = "left".
IOPI_Q040	During the test, you will need to:
	<ul> <li>sit as still as possible.</li> <li>adjust your head position until you are able to see the green dot in the middle of the four red dots.</li> <li>focus on the green target without squinting your eye.</li> <li>breathe normally.</li> </ul>
4	
	INSTRUCTION: Answer any questions as thoroughly as possible.
RMA	Press <1> to continue. (DK not allowed)
IOPI_END ORMAIION	KF
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<b>)</b> *	

## Intraocular Pressure Measurement (IOPM)

IOPM_BEG	Content block
	External variables required:
	Variables taken from sample file: STAND: name of the city/town/village in which the clinic has been set up CLINICID: 8 digit respondent identifier DV_NONGESTATIONALDIABETES: Whether the respondent has been diagnosed with type 1 or type 2 diabetes (1 = Yes; 2 = No)
	Variables assigned in Variable Creation (Appendix II): CurrentYear: numeric year during which clinic visit is taking place CurrentMonth: numeric month during which clinic visit is taking place CurrentDay: numeric day during which clinic visit is taking place SessionE: English text of when the clinic visit is taking place
	Variables from previously completed blocks: RespondentName: name of respondent GenderE: English text for sex of respondent CON_SEX: sex of respondent CON_AGE: age of respondent VIR_D060: whether the right eye should be included in the block based on the vision restriction questions (1 = Yes, 2 = No)
.01	VIR_D065: whether the left eye should be included in the block based on the vision restriction questions (1 = Yes, 2 = No) IOPI_N010: whether or not the respondent removed their contact lenses (1 = Yes, 2 = No) IOPI_R020: introduction to IOP measurement IOPI_R040: if the respondant refuses to complete the IOP component after receiving test procedures
FORMATIC	Screen Display: The following header should be displayed for each question: Stand: ^STAND Date: ^CurrentDate Session: essionE Comp: ^CompE Clinic ID: ^ClinicID Name: ^RespondentName Age: ^CON_AGE Sex: ^GenderE
	If IOPI_N010 = 2 or IOPI_R020 = DK, go to IOPM_N110. Otherwise, go to IOPM_C005B.
IOPM_C005B	If IOPI_R040 = RF, go to IOPM_END. Otherwise, go to IOPM_C005C.
IOPM_C005C	If VIR_D060 = 1, go to IOPM_R010. Otherwise, go to IOPM_C020.
IOPM_R010	I will now take the measurement of your right eye. I'd like you to blink your eyes a few times and when you are ready, hold both your eyes open. Look at the green light and hold still.

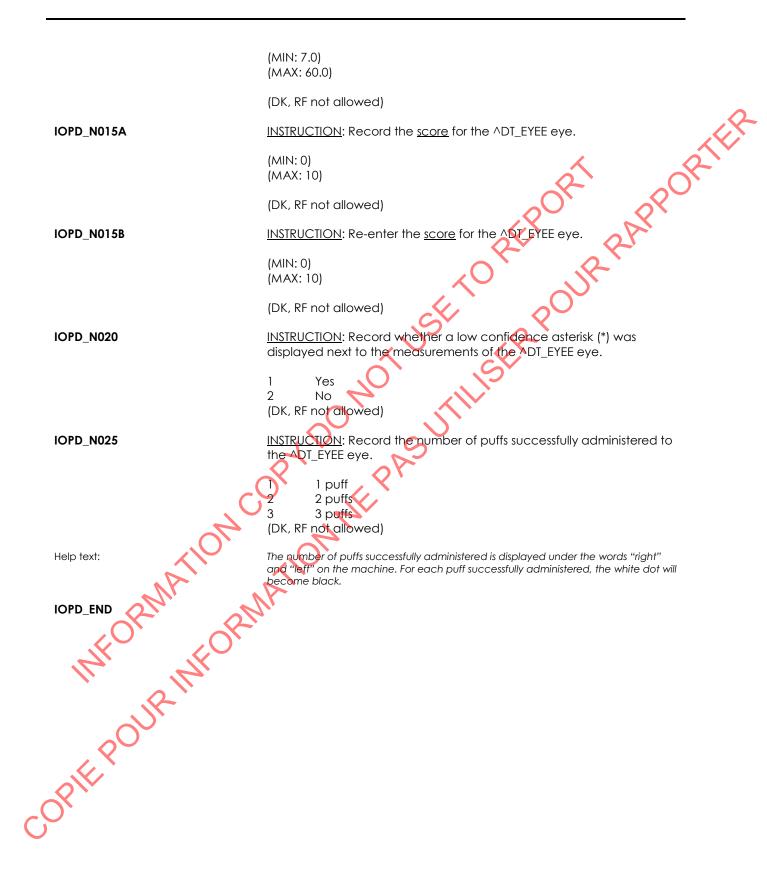
	INSTRUCTION: Perform the measurement on the right eye.
	<ul> <li>Verify that the forehead rest is positioned to the right side.</li> <li>Ensure that the respondent can see the green dot and the red dots.</li> <li>Press the triple puff icon to administer 3 puffs of air.</li> </ul>
	Press <1> to continue.
IOPM_B015	Call the Intraocular Pressure Capture (IOPD) block
Programmer:	Pass DT_EYEE = "right" as parameter.
IOPM_C015	If IOPM_B015.IOPD_N005A = RF, go to IOPM_END. Otherwise, go to IOPM_C020.
IOPM_C020	If VIR_D065 = 1, go to IOPM_D025 Otherwise, go to IOPM_C040A.
IOPM_R030	[I will now take the measurement on your left eye. I'd like you to blink your eyes a few times and when you are ready, hold both your eyes open. Look at the green light and hold still./I will now move the forehead rest to the other side and take the same measurement on your left eye. Once again, readjust until you are able to see the green dot in the middle of the four red dots.]
	INSTRUCTION: Perform the measurement on the <u>left</u> eye. - Verity that the forehead rest is positioned to the left side. - Ensure that the respondent can see the green dot and the red dots. - Press the triple pulficon to administer 3 puffs of air.
~	Press <1> to continue.
Programmer:	IF IOPM_R010 = EMPTY, then display the word "left" in the first sentence of the read text at DT_IOPM25E in red text font.
IOPM_B035	Call the Intraocular Pressure Capture (IOPD) block.
Programmer:	Pass DT_EYEE = "left" as parameter.
IOPM_C040A	If (IOPM_B015.IOPD_N005A = DK and IOPM_B035.IOPD_N005A = RF) or (VIR_D060 = 2 and IOPM_B035.IOPD_N005A = RF), go to IOPM_END. Otherwise, go to IOPM_C040B.
IOPM_C040B	If (IOPM_B015.IOPD_N005A = RESPONSE and IOPM_B035.IOPD_N005A = RF), go to IOPM_C100. Otherwise, go to IOPM_D040.
IOPM_C050	If DV_RIGHTEYEREDO = 2 and DV_LEFTEYEREDO = 2, go to IOPM_C100. Otherwise, go to IOPM_D050.
OPM_Q055	There were too many errors with that set of measurements, so we have to do the test again. I will take a second measurement of [your right eye/your left eye/both your eyes, one at a time].

	1 Press <1> to continue. (DK not allowed) RF (Go to IOPM_C100)
Programmer:	Display the DT_IOPM50E text in red text font.
IOPM_C060	If DV_RIGHTEYEREDO = 1, go to IOPM_R065. Otherwise, go to IOPM_C080.
IOPM_R065	(I will now take the measurement of your right eye), I'd like you to blink your eyes a few times and when you are ready, hold both your eyes open. Look at the green light and hold still.
	INSTRUCTION: Capture the results of the second set of measurements on the <u>right</u> eye.
	<ul> <li>Verify that the forehead rest is positioned to the left side.</li> <li>Ensure that the respondent can see the green dot and the red dots.</li> <li>Press the triple puff icon to administer 3 puffs of air.</li> </ul>
	Press <1> to continue.
IOPM_B075	Call the Intraocular Pressure Capture (IOPD) block.
Programmer:	Pass DT_EYEE = "right" as parameter.
IOPM_C075	If IOPM_B075.IOPD_N005A = RF, go to IOPM_C100. Otherwise, go to IOPM_C080.
IOPM_C080	HDV_LEFTEYEREDO 1, go to IOPM_D085. Otherwise, go to IOPM_C100.
IOPM_R085	ADT_IOPM85E
ATIO.	INSTRUCTION: Capture the results of the second set of measurements on the <u>left</u> eye.
CORNAL OR	Verify that the forehead rest is positioned to the left side. - Ensure that the respondent can see the green dot and the red dots. - Press the triple puff icon to administer 3 puffs of air.
11/1 11/1°	Press <1> to continue.
Programmer:	IF IOPM_R065 = EMPTY then display the word "left" in the first sentence of the read text in red text font.
IOPM_B095	Call the Intraocular Pressure Capture (IOPD) block.
Programmer:	Pass DT_EYEE = "left" as parameter.
c ^O `	



### Intraocular Pressure Capture (IOPD)



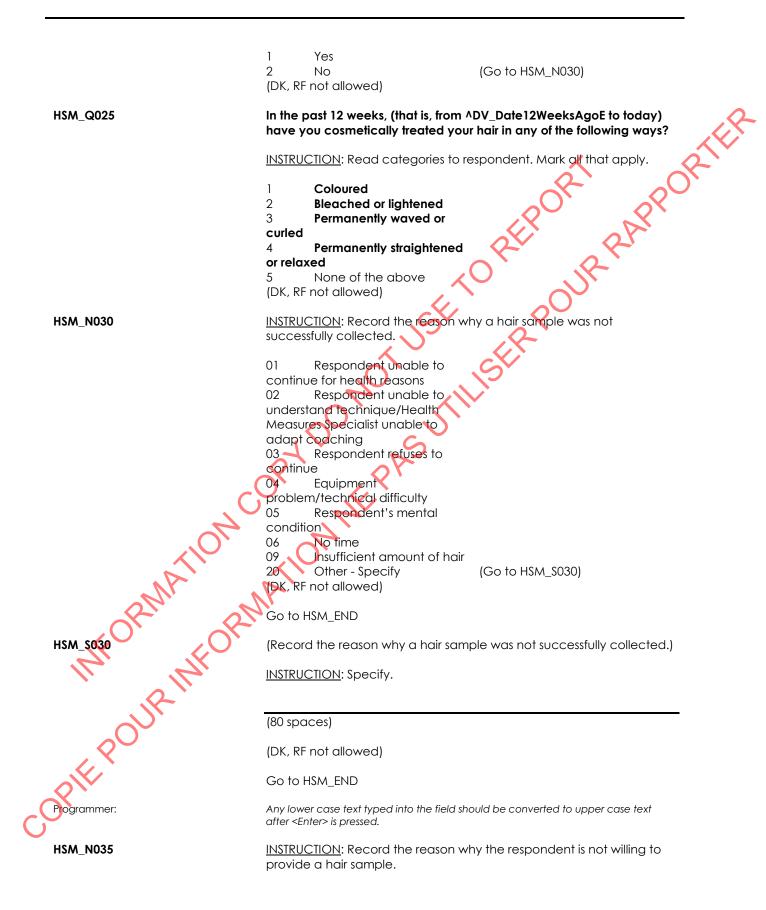


## Hair Sample Measure (HSM)

HSM_BEG	Content block
	External fields required:
	Variables taken from sample file: STAND: name of the city/town/village in which the clinic has been set up CLINICID: 8 digit respondent identifier
	Variables assigned in Variable Creation (Appendix II): CurrentYear: numeric year during which clinic visit is taking place CurrentMonth: numeric month during which clinic visit is taking place CurrentDay: numeric day during which clinic visit is taking place SessionE: English text of when the clinic visit is taking place Date12WeeksAgoE: the date 12 weeks (84 days) ago in English (TwelveWeeksAgoMonthE + TwelveWeeksAgoDay + "," + TwelveWeeksAgoYear)
	Variables from previously completed blocks: RespondentName: name of respondent GenderE: English text for sex of respondent CON_AGE: age of respondent SCS_N12: visit type (3 = clinic visit, 4 = home visit)
C C C C C C C C C C C C C C C C C C C	Screen display: The following header should be displayed for each question: Stand: ^STAND Date: ^CurrentDate Session: essionE Comp: ^CompE Clinic ID: ^ClinicID Name: ^RespondentName Age: ^CON_AGE Sex: ^GenderE
HSM_R005	Metals such as mercury and lead are found in the environment. They may accumulate in hair as it grows, making it possible to measure long term exposure.
OP OP	In order to measure your exposure to certain metals, I need to take a small hair sample from the back of your head, close to the scalp.
MH UR MFC	INSTRUCTION: Show the respondent the reference card (picture of hair sample) to demonstrate the quantity of hair required and the location of where the sample will be taken. Also, show the respondent the scissors which will be used to take the sample.
000	Press <1> to continue.
Programmer:	Allow 'RF' or 'DK' as a response category.
HSM_C005A	If HSM_R005 = RF, go to HSM_N035. Otherwise, go to HSM_C005B.
● нѕм_соо5в	If HSM_R005 = DK, go to HSM_N030. Otherwise, go to HSM_D005.

## Canadian Health Measures Survey - Cycle 5

HSM_N005	INSTRUCTION: Press <1> to print 2 labels with the respondent's CLINIC
	First label: Stick it to the hair collection sheet.
	Second label: Stick it to the plastic bag provided for hair collection.
	1 Print the labels (DK, RF not allowed)
Programmer:	The barcode portion of the label should be the CLINICID. The legible portion of the label should be the CLINICID.
	Label type 2
HSM_R010	To ensure that your hair is long and thick enough for me to take a sample, I would like to examine the hair at the back of your head. This will require that I touch your head.
	INSTRUCTION: Put on gloves and examine the respondent's head to see if there is enough hair for a sample.
	Press <1> to continue.
Help text:	- Put on gloves prior to touching the respondent's head. - With the respondent sitting in the chair use 4 fingers to measure down the head from the crown.
	- At this spot assess to see if there is enough hair to take a sample. - The hair should be at least 2 cm in length and around 100 strands. - When done remove your gloves.
Programmer:	Allow 'RF' as a response category.
HSM_C015	If HSM_R010 = RF, go to HSM_N035. Otherwise, go to HSM_N015.
HSM_N015	INSTRUCTION: Does the respondent have enough hair for you to take a hair sample?
MA	1 Yes No (Go to HSM_END) (DK, RF not allowed)
HSM_R020 PRIVINE OPT	I will now take a sample of your hair. Please sit still and try not to move.
The The	INSTRUCTION: - Ensure the scissors are clean and dry. - Put on gloves.
R	- Cut the hair as close to the scalp as possible, ensuring that you do not pull the root of the hair out.
	- Secure the hair sample (by the scalp end) to the collection sheet with the stapler provided.
2	<ul> <li>Fold the hair collection sheet.</li> <li>Place the collection sheet in the plastic bag with the label on it.</li> </ul>
OFF	- Ensure the bag is well sealed.
c ^O [×]	Press <1> to continue.
HSM_N020	INSTRUCTION: Was a hair sample successfully collected?



Mark all that apply. 1 Invasive 2 Aesthetics (appearance) RIFE 3 Cultural/Religious objections (e.g., turban, hijab) Other - Specify (Go to HSM_S035) 4 (DK, RF not allowed) Go to HSM_END (Record the reason why the respondent is not willing to provide a nair HSM_S035 sample.) INSTRUCTION: Specify. red u between the spread (80 spaces) Any lower case text typed into the field should be converted to upper case text

## Jumping Mechanography Introduction (JMI)



### Hopping Force Measurement (HFM)



HFM_N010	INSTRUCTION: Initiate the hopping test. - Select "multiple Two Leg Hopping" (m2LH) from the drop down menu. - Click on "Start selected test". - "Zero adjust" the plate.
	1 Press <1> to continue. (DK, RF not allowed)
HFM_R015	The first test measures the force you generate when hopping. I will demonstrate the test and then give you an opportunity to practice before we begin.
	<ul> <li>Stand on the force plate, facing the front, with one foot on each side.</li> <li>You will have to hold perfectly still for a few seconds.</li> <li>When I tell you to, start hopping as high as you can, just like skipping with a rope.</li> <li>As you hop, you must ensure that your heels stay off the force plate and your legs stay straight.</li> <li>You will hop 10 times; I will tell you when to stop.</li> <li>When you stop, hold perfectly still until I say you can move.</li> </ul>
	INSTRUCTION: Demonstrate the test from start to finish, as realistically as possible, emphasizing the key components of the test.
	Press <1> to continue.
Programmer:	Allow 'RF as a response category.
HFM_C015	If $HFM_R015 = RF$ , go to $HFM_D040$ . Otherwise, go to $HFM_Q020$ .
HFM_Q020	To make sure we get good results, you need to practice before we begin the test.
	<u>INSTRUCTION</u> : Complete up to two practice hopping trials. Provide feedback to help correct any errors.
appr	s the respondent able to try the hopping test?
HFM_C025	1 Yes 2 No (Go to HFM_N035) (DK not allowed) RF
HFM_C025	If HFM_Q020 = RF, go to HFM_D040. Otherwise, go to HFM_R025.
HFM_R025	We will now start the hopping test. We will repeat the test a few times to ensure that we get your best effort. Do you have any questions before we begin?
COX	

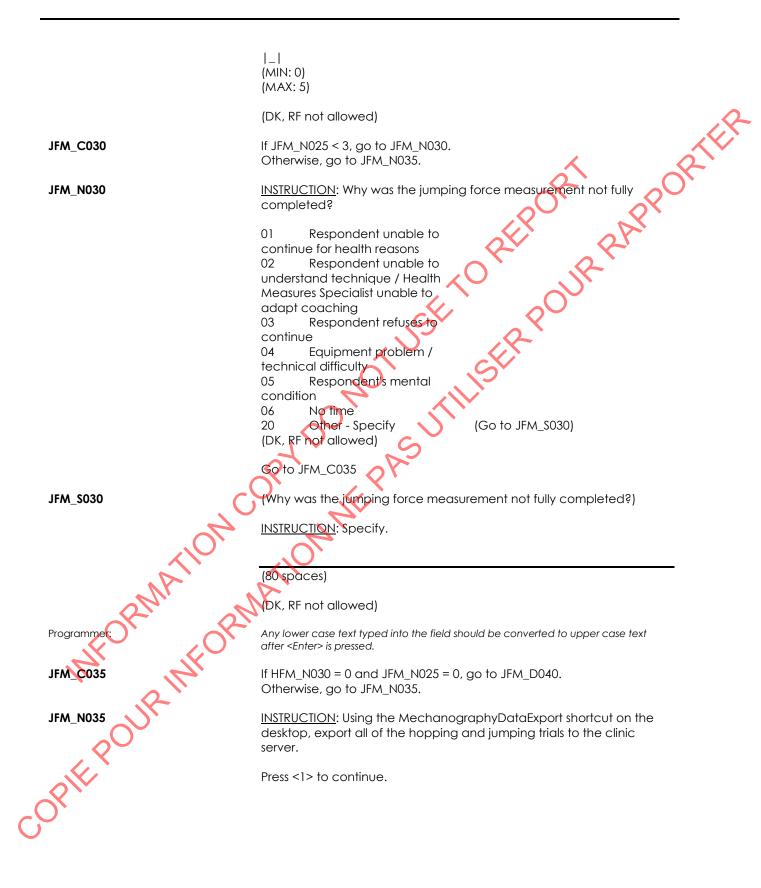
INSTRUCTION: - Answer any questions as thoroughly as possible. - Verify that the "multiple Two Leg Hopping" (m2LH) test was selected. - Instruct the respondent to get into the starting position. APPORTER Common verbal cues: 1. "Stand still." 2. "Start hopping now." 3. "One, two, three, four, five, six, seven, eight, nine, ten." 4. "Stop and stand still." Press <1> to continue. - Ask the respondent to stand still. Help text: - Click on "Start Measurement now!". - Wait for the single-tone pitch, indicating the beginning of the test - Instruct the respondent to start hopping. - Count with each hop. - After 10 hops, instruct the respondent to stand still. - Wait for the double-tone pitch, indicating the end of the test Click on "Save & Next" button to continue to the next trial.
 Use the "Use for Trend Analysis" drop down menu to indicate if the trial is invalid "Invalid measurement" or valid "Measurement OK". - Click on "Quit" to continue to the next trial. - Repeat the test until 3 valid trials have beer completed or a maximum of 5 trials have been attempted. HFM_N030 INSTRUCTION: Record the number of hopping trials. (MIN: 0) (MAX: 5) MFORMATION MFORMATION OPIE POUR INFORM (DK, RF not allowed) If HFM_N030 <3, go to HFM_N035. Otherwise, go to HFM_D040. INSTRUCTION: Why was the hopping force measurement not fully completed? Respondent unable to continue for health reasons 02 Respondent unable to understand technique / Health Measures Specialist unable to adapt coaching 03 Respondent refuses to continue 04 Equipment problem / technical difficulty 05 Respondent's mental condition 06 No time 20 Other - Specify (Go to HFM_S035) (DK, RF not allowed) Go to HFM_D040

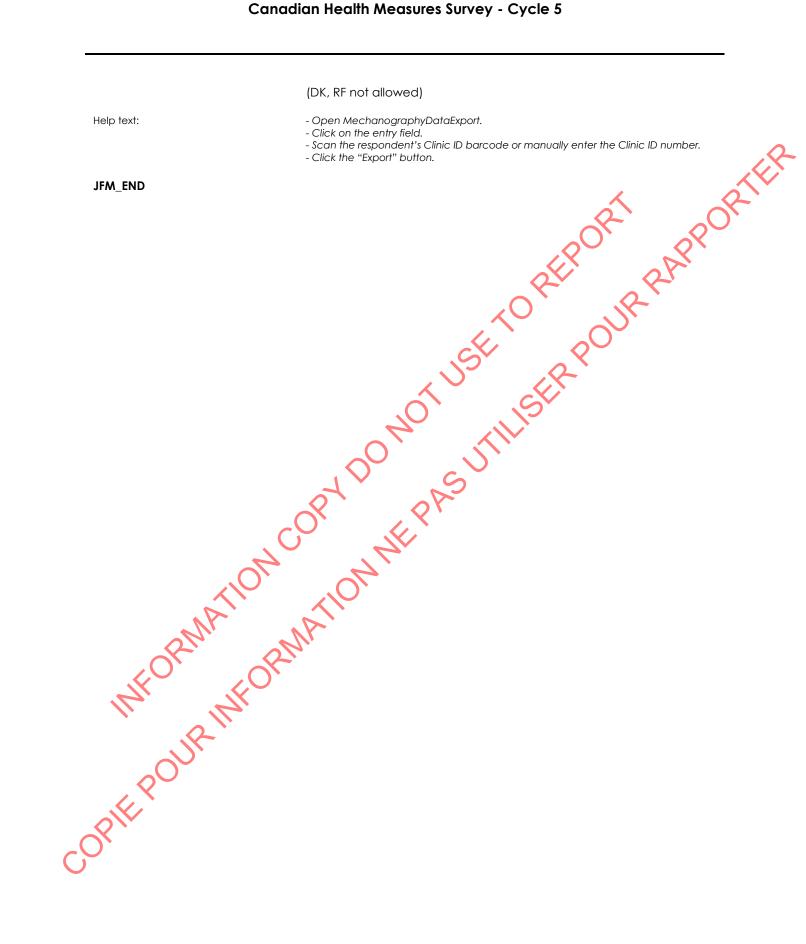
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### Jumping Force Measurement (JFM)



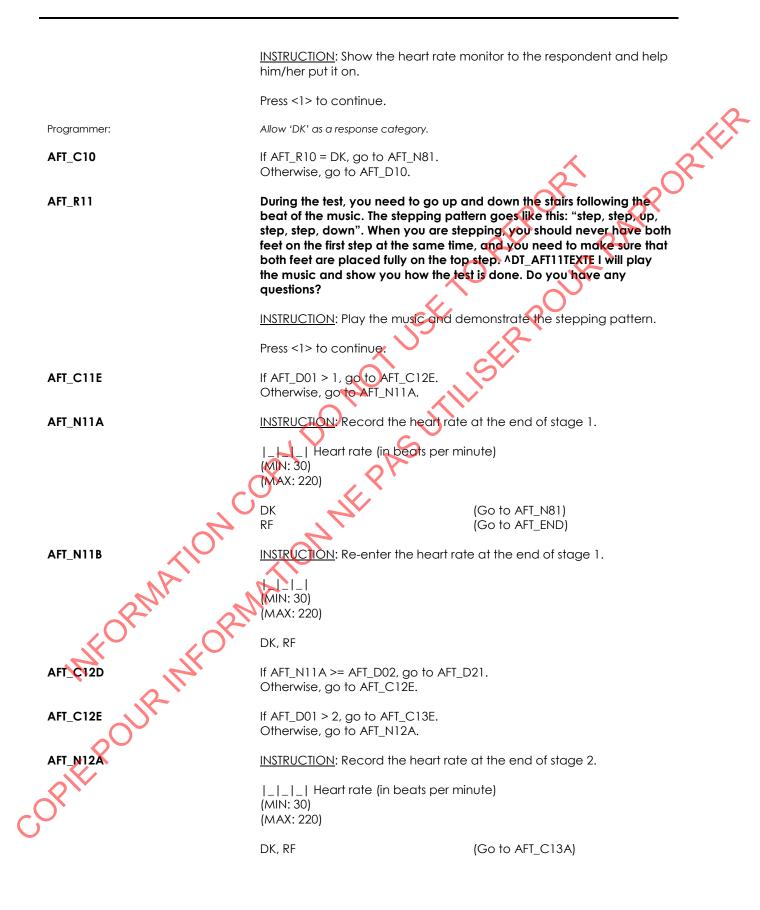
	INSTRUCTION: Demonstrate the test from start to finish, as realistically as possible, while emphasizing the key components of the test.
	Press <1> to continue.
Programmer:	Allow 'RF' as a response category.
JFM_C015	If JFM_R010 = RF, go to JFM_C035. Otherwise, go to JFM_Q015.
JFM_Q015	To make sure we get good results, you need to practice before we begin the test.
	INSTRUCTION: Complete up to two practice jumps. Provide feedback to help correct any errors.
	Is the respondent able to try the jumping test?
	1 Yes 2 No (DK not allowed) RF (Go to EM_N30)
JFM_C020	If JFM_Q015 = RF, go to JFM_C035. Otherwise go to JFM_R020.
JFM_R020	We will now start the jumping test. We will repeat the test a few times to ensure that we get your best effort. Do you have any questions before we begin?
	<u>INSTRUCTION</u> : Answer any questions as thoroughly as possible. - Verify that the "single Two Leg Jump" (s2LJ) test was selected. - Instruct the respondent to get into the starting position.
MATION	Common verbal cues: 1. "Stand still." 2. "Jump now." 3. "Now stand still."
OPIN OPIN	Press <1> to continue.
Help text:	<ul> <li>Instruct the respondent to stand still.</li> <li>Click on "Start selected test".</li> <li>Wait for the single-tone pitch, indicating the beginning of the test.</li> <li>Instruct the respondent to jump.</li> </ul>
Helptext	<ul> <li>After the jump, instruct the respondent to stand still.</li> <li>Wait for the double-tone pitch, indicating the end of the test.</li> <li>Click on "Save &amp; Next" button to continue to the next trial.</li> <li>Use the "Use for Trend Analysis" drop down menu to indicate if the trial is invalid "Invalid measurement" or valid "Measurement OK".</li> <li>Click on "Quit" to continue to the next trial.</li> <li>Repeat the test until <u>3 valid trials</u> have been completed or a <u>maximum of 5 trials</u></li> </ul>
JFM_N025	have been attempted. <u>INSTRUCTION</u> : Record the number of jumping trials.





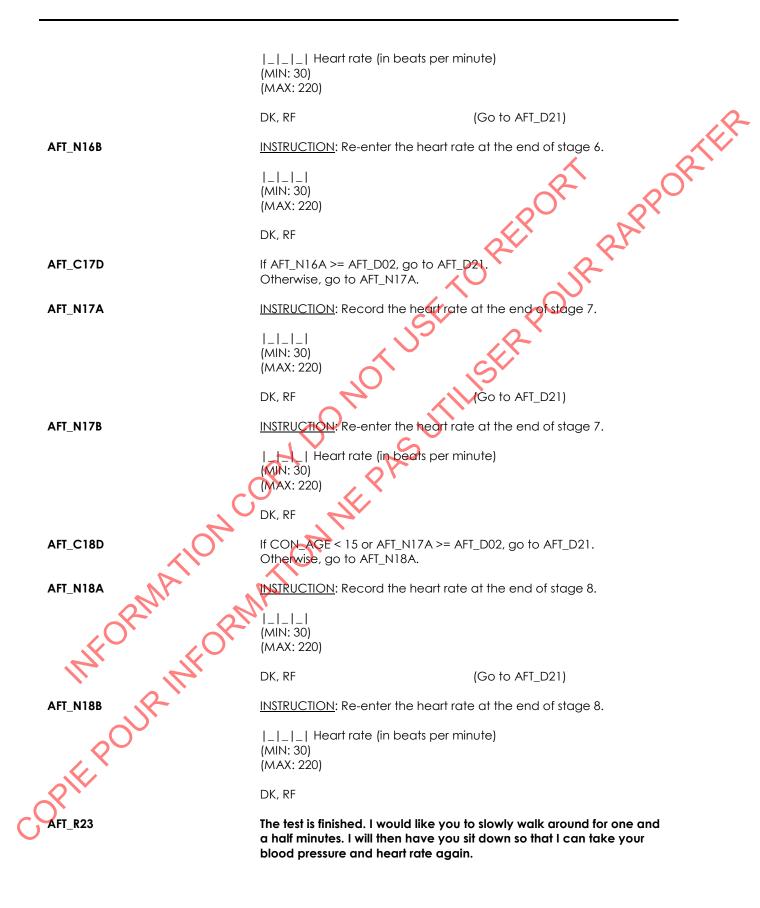
# mCAFT Measurement (AFT)

AFT_BEG	Content block
	External fields required:
	Variables taken from sample file:
	STAND: name of the city/town/village in which the clinic has been set
	CLINICID: 8 digit respondent identifier
	Variables assigned in Variable Creation (Appendix II): CurrentYear: numeric year during which clinic visit is taking place
	CurrentMonth: numeric month during which clinic visit is taking place
	CurrentDay: numeric day during which clinic visit is taking place
	SessionE: English text of when the clinic visit is taking place
	Variables from previously completed blocks:
	RespondentName:name of respondent
	CON_SEX: sex of respondent
	GenderE: English text for sex of respondent
	CON_AGE: age of respondent
	DT_ARME: English text for arm chosen for blood pressure measurement,
	derived at BPM_D101B
	BPM_N100: Cuff to be used for blood pressure measurement.
	HWM_Q13. Weight measurement in kilograms
	Screen Display:
	The following header should be displayed for each question:
	Stand: ASTAND Date: A CurrentDate Session: essionE Comp:
	ACompE
	Clinic ID: ^ClinicID Name: ^RespondentName Age: ^CON_AGE
	Sex: ^GenderE
	The following information should be displayed below the two-lined
	header:
	Starting stage: ^AFT_D01 [Female/Male]
	Ceiling Heart Rate: ^AFT_D02
AFT_R10	The next test we are going to do is a stepping test to measure your
	fitness level. The test will require you to step up and down this set of
	stairs continuously to music for 3 minutes at a time. In total, there are 8,
· · · · · · · · · · · · · · · · · · ·	3-minute stages. You are starting at stage ^AFT_D01. During the test,
	you will wear a heart rate monitor so that I can watch your heart rate.
Q	At the end of each 3 minute stepping stage, you will be asked to stop
	exercising. You will have to stand still and I will check your heart rate
$\sim$	to see if you should do another stage. You will continue going through
	the stages until your heart rate meets a ceiling value for your age and
$\mathbf{X}$	sex. Your ceiling heart rate is ^AFT_D02. If your heart rate is at or above this number, then havill stop the test. At the end of the test, you will
	this number, then I will stop the test. At the end of the test, you will slowly walk around for one and a half minutes. Then, you will sit down
	and I will take your blood pressure and heart rate twice to make sure
COPIE POUR INFO	that you are recovering well from the test.
$\widetilde{\mathbf{C}}$	. ,

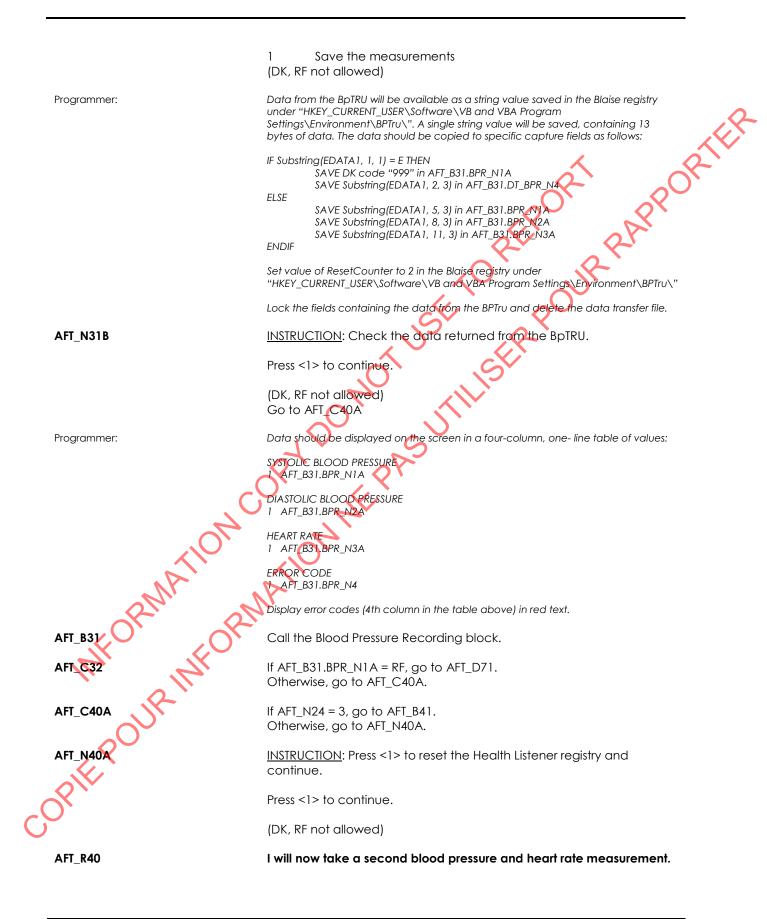


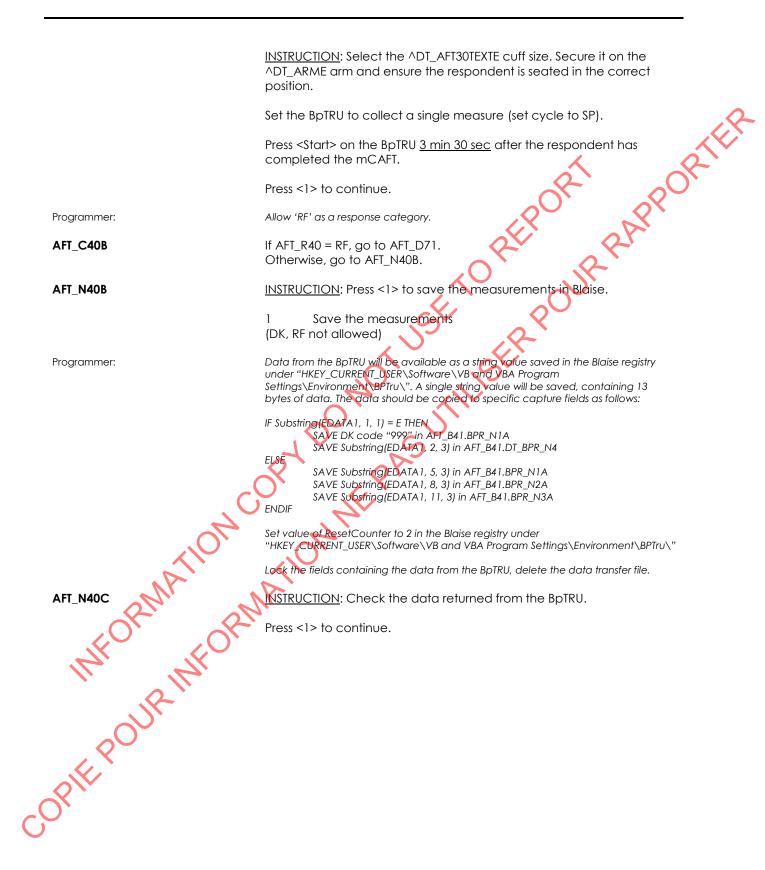
AFT_N12B	INSTRUCTION: Re-enter the heart rate at the end of stage 2.
	_ _  (MIN: 30) (MAX: 220)
	DK, RF
AFT_C13A	If AFT_D01 < 2 and AFT_N12A = NONRESPONSE, go to AFT_D21. Otherwise, go to AFT_C13B.
AFT_C13B	If AFT_D01 = 2 and AFT_N12A = DK, go to AFT_N81. Otherwise, go to AFT_C13C.
AFT_C13C	If AFT_D01 = 2 and AFT_N12A = RF, go to AFT_END. Otherwise, go to AFT_C13D.
AFT_C13D	If AFT_N12A >= AFT_D02, go to AFT_D21. Otherwise, go to AFT_C13E.
AFT_C13E	If AFT_D01 > 3, go to AFT_C14E. Otherwise, go to AFT_N13A.
AFT_N13A	INSTRUCTION: Record the heart rate at the end of stage 3.
	_ _  Heart rate (in beats per minute) (MIN: 30) (MAX: 220) DK RF (Go to AFT_C14A)
AFT_N13B	<u>INSTRUCTION</u> : Re-enter the heart rate at the end of stage 3.
110	_ _  (MIN: 30) (MAX: 220)
NA	DK. RF
AFT_C14A	If AFT_D01 < 3 and AFT_N13A = NONRESPONSE, go to AFT_D21. Otherwise, go to AFT_C14B.
AFT CI4B	If AFT_D01 = 3 and AFT_N13A = DK, go to AFT_N81. Otherwise, go to AFT_C14C.
AFT_C14C	If AFT_D01 = 3 and AFT_N13A = RF, go to AFT_END. Otherwise, go to AFT_C14D.
AFT_C14D	If AFT_N13A >= AFT_D02, go to AFT_D21. Otherwise, go to AFT_C14E.
AFT_C14E	If AFT_D01 > 4, go to AFT_N15A. Otherwise, go to AFT_N14A.
O AFT_N14A	INSTRUCTION: Record the heart rate at the end of stage 4.

	_ _ _  Heart rate (in beats per n	ninute)
	(MIN: 30) (MAX: 220)	
	DK, RF	(Go to AFT_C15A)
AFT_N14B	INSTRUCTION: Re-enter the heart ro	ate at the end of stage 4.
	_ _ _  (MIN: 30)	er or
	(MAX: 220)	RON RY
	DK, RF	pr. pr
AFT_C15A	If AFT_D01 < 4 and AFT_N14A = NO Otherwise, go to AFT_C15B.	NRESPONSE, go to AFT D21.
AFT_C15B	If AFT_D01 = 4 and AFT_N14A = DK, Otherwise, go to AFT_C15C	go to AFT_N81.
AFT_C15C	If AFT_D01 = 4 and AFT_N14A = RF, Otherwise, go to AFT_C15D.	go to AFT_END.
AFT_C15D	If AFT_N14A >= AFT_D02, go to AFT Otherwise go to AFT_N15A.	D21.
AFT_N15A	INSTRUCTION: Record the heart rat	e at the end of stage 5.
C	Q _  Enregistrez la fréquence ( (MIN: 30) (MAX: 220)	cardiaque à la fin du palier 5.
	DK, RF	(Go to AFT_C16A)
AFT_N15B	INSTRUCTION: Re-enter the heart ro	ate at the end of stage 5.
MA	MIN: 30)	
	(MAX: 200)	
Alt if	DK, RF	
AFT_C16A	If AFT_D01 < 5 and AFT_N15A = NO Otherwise, go to AFT_C16B.	NRESPONSE, go to AFT_D21.
AFT_C16B	If AFT_D01 = 5 and AFT_N15A = DK, Otherwise, go to AFT_C16C.	go to AFT_N81.
AFT_C16C	If AFT_D01 = 5 and AFT_N15A = RF, Otherwise, go to AFT_C16D.	go to AFT_END.
AFT_C16D	If AFT_N15A >= AFT_D02, go to AFT_ Otherwise, go to AFT_N16A.	_D21.
AFT_N16A	INSTRUCTION: Record the heart rat	e at the end of stage 6.



INSTRUCTION: Start the stopwatch. At 1 min 30 sec, ask the respondent to sit down. Press <1> to continue. AFT_N24 INSTRUCTION: Record how the data will be captured. Electronically (BpTRU) 1 3 BpTRU data entered (Go to AFT_B3 manually (DK, RF not allowed) IF AFT_N24 = 1, Set value of ResetCounter to 1 in the Blaise registry under Programmer: "HKEY_CURRENT_USER\Software\VB and VBA Program Settings\Environment\BPTru\" AFT R30 Now, I will take the first of two post exercise blood pressure and heart rate measurements, using this automated blood pressure cuff. During this test, you will need to sit with your feet flat on the floor, your back against the back rest of the chair, and your ^DI ARME arm on the table. You should not move or talk during the measurement. INSTRUCTION: - Select the ^DT AFT30TEXTE cuff size. - Secure the cuff on the respondent's ADT_ARME arm. - Ensure respondent is in the correct position (palm down, feet flat, arm and back rested, relaxed). - Ensure the BoTRU is communicating with Health Listener. - Set the BpTRU to collect a single measure (set cycle to SP). - Press <Start> on the BpTRU 2 minutes after the respondent has completed the mCAFT Turn the BpTRU away from the respondent. Press <1> to continue. OPIE POUR INFO Allow 'RF'as a response category. If DT_ARME = ''left'' display ^DT_ARME in red font. Display DT_AFT30TEXTE in red font. If  $AFT_R30 = RF$ , go to  $AFT_D71$ . Otherwise, go to AFT_E30. INSTRUCTION: Press <1> to save the measurements in Blaise.







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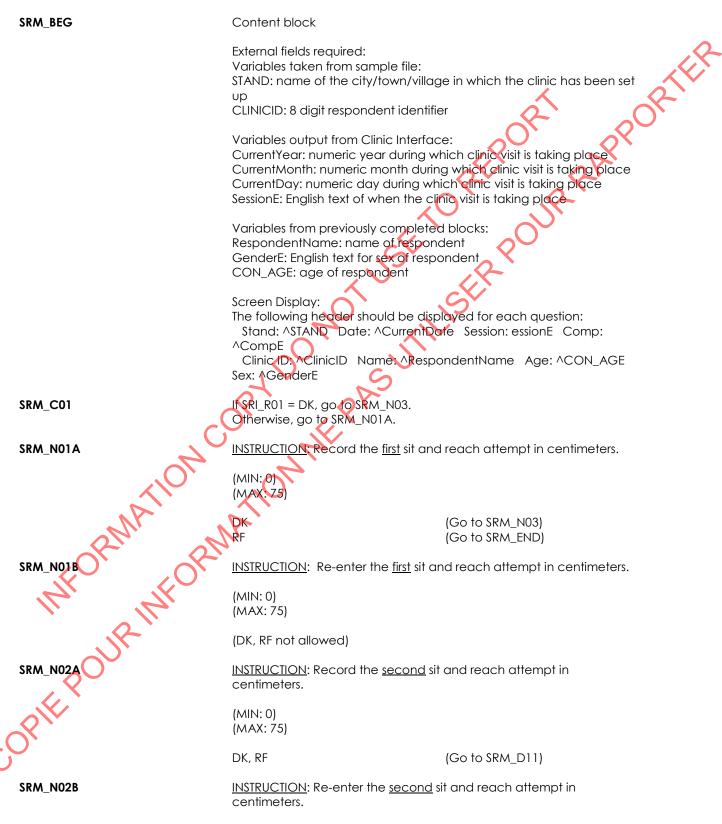
# Sit and Reach Component Introduction (SRI)

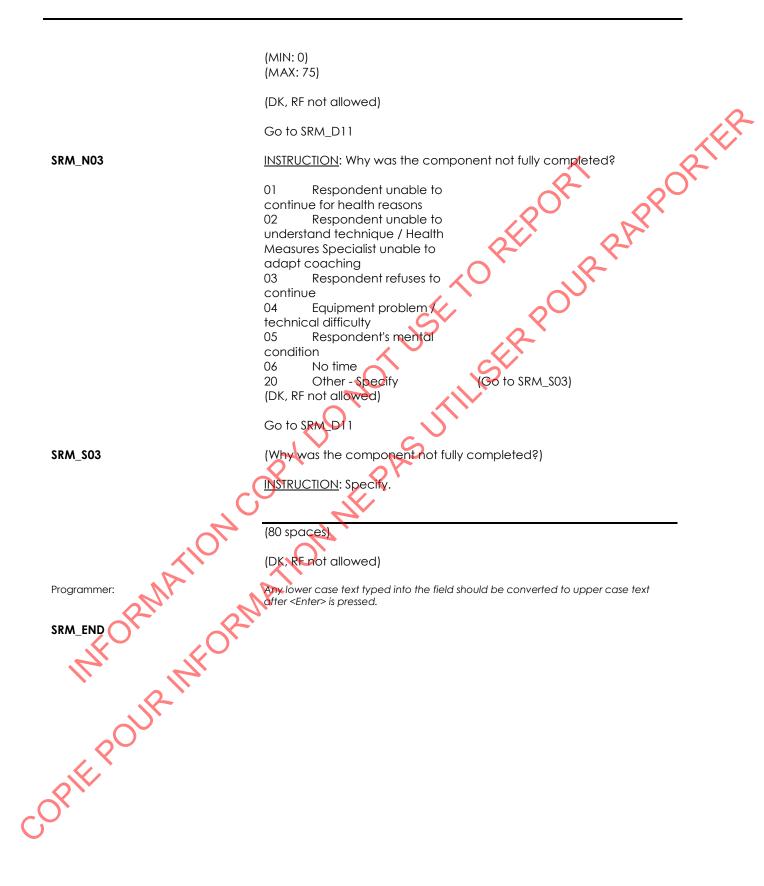
SRI_BEG	Content block
	External fields required: Variables taken from sample file: STAND: name of the city/town/village in which the clinic has been set up CLINICID: 8 digit respondent identifier
	Variables output from Clinic Interface: CurrentYear: numeric year during which clinic visit is taking place CurrentMonth: numeric month during which clinic visit is taking place CurrentDay: numeric day during which clinic visit is taking place SessionE: English text of when the clinic visit is taking place
	Variables from previously completed blocks: RespondentName: name of respondent GenderE: English text for sex of respondent CON_AGE: age of respondent
	Screen display: The following header should be displayed for each question: Stand: ^STAND Date: ^CurrentDate Session: essionE Comp: ^CompE Clinic ID: ^ClinicID Name: ^RespondentName Age: ^CON_AGE Sex: ^GenderE
SRI_RO1	The next test we're going to do is called a sit-and-reach test, which will measure your back and hamstring flexibility. Before we start the test, I'll ask you to remove your shoes and we will do some stretches to loosen your leg muscles.
SRI_ROI	measure your back and hamstring flexibility. Before we start the test, I'll ask you to remove your shoes and we will do some stretches to
FORMATION	<ul> <li>measure your back and hamstring flexibility. Before we start the test, I'll ask you to remove your shoes and we will do some stretches to loosen your leg muscles.</li> <li>Sit on the floor with one leg out straight and the bottom of your other foot tucked into the straight leg.</li> <li>Reach forward towards the toe of your straight leg only until you feel a slight stretch in the back of your leg.</li> <li>You should not feel pain and you must not bounce.</li> <li>Hold the stretch for 20 seconds and then switch to the other leg.</li> </ul>
SRI_ROI	<ul> <li>measure your back and hamstring flexibility. Before we start the test, I'll ask you to remove your shoes and we will do some stretches to loosen your leg muscles.</li> <li>Sit on the floor with one leg out straight and the bottom of your other foot tocked into the straight leg.</li> <li>Reach forward towards the toe of your straight leg only until you feel a slight stretch in the back of your leg.</li> <li>You should not feel pain and you must not bounce.</li> <li>Hold the stretch for 20 seconds and then switch to the other leg.</li> <li>Perform the stretch twice on each leg, alternating each time.</li> </ul> INSTRUCTION: Have the respondent sit on the mat in the modified hurdle stretch position. Do the stretch twice on each leg, holding the stretch for 20 seconds each time. Perform the stretches alongside the
FORMATION	<ul> <li>measure your back and hamstring flexibility. Before we start the test, I'll ask you to remove your shoes and we will do some stretches to loosen your leg muscles.</li> <li>Sit on the floor with one leg out straight and the bottom of your other foot tocked into the straight leg.</li> <li>Reach forward towards the toe of your straight leg only until you feel a slight stretch in the back of your leg.</li> <li>You should not feel pain and you must not bounce.</li> <li>Hold the stretch for 20 seconds and then switch to the other leg.</li> <li>Perform the stretch twice on each leg, alternating each time.</li> </ul> INSTRUCTION: Have the respondent sit on the mat in the modified hurdle stretch position. Do the stretch twice on each leg, holding the stretch for 20 seconds each time. Perform the stretches alongside the respondent.
INFORMATION POUR INFOR	<ul> <li>measure your back and hamstring flexibility. Before we start the test, I'll ask you to remove your shoes and we will do some stretches to loosen your leg muscles.</li> <li>Sit on the floor with one leg out straight and the bottom of your other foot tucked into the straight leg.</li> <li>Reach forward towards the toe of your straight leg only until you feel a slight stretch in the back of your leg.</li> <li>You should not feel pain and you must not bounce.</li> <li>Hold the stretch for 20 seconds and then switch to the other leg.</li> <li>Perform the stretch twice on each leg, alternating each time.</li> <li><u>INSTRUCTION</u>: Have the respondent sit on the mat in the modified hurdle stretch position. Do the stretch twice on each leg, holding the stretch for 20 seconds each time. Perform the stretches alongside the respondent.</li> <li>Press &lt;1&gt; to continue.</li> </ul>

2015-12-21

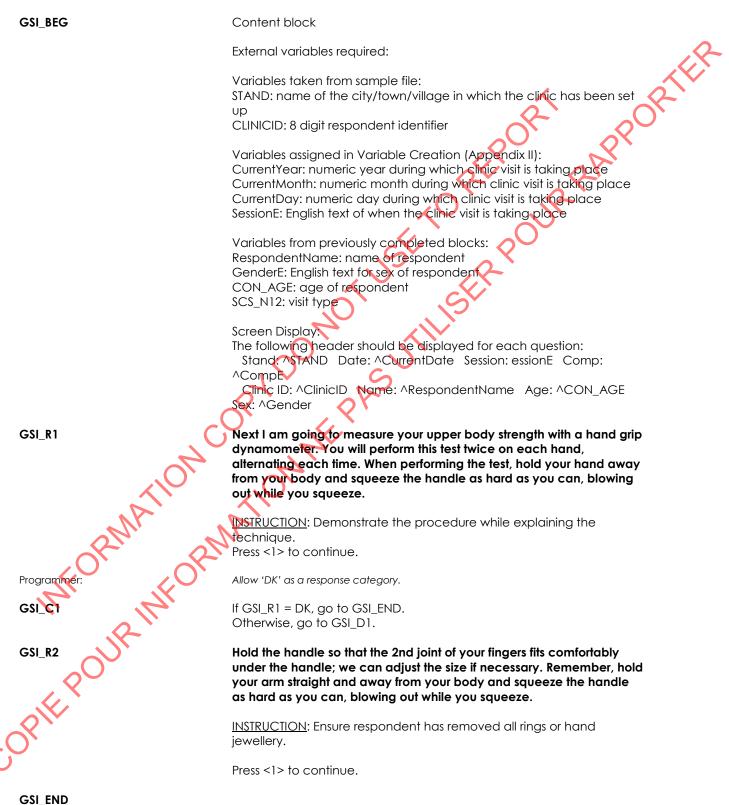
SRI_RO2	I will demonstrate how the test is done.
	<ul> <li>Sit with your legs straight out in front of you, your feet flat against the board, one foot on each side of the wooden block. Keep your legs straight.</li> <li>Put your arms straight out in front of you with your hands on top of one another, and your middle fingers aligned.</li> <li>Reach forward slowly pushing the sliding marker along the scale with your fingertips as far as possible. Do not bounce.</li> <li>Lower your head between your arms and breather out while reaching forwards to help you reach farther.</li> <li>When you have reached as far as you can, you must hold that position for 2 seconds. I will count this aloud for you and tell you when to sit up again.</li> </ul>
	INSTRUCTION: Demonstrate the movement while explaining the main points of the test.
	Press <1> to continue.
SRI_RO3	Do you have any questions before we begin?
	INSTRUCTION: Answer any questions as thoroughly as possible.
	Press <1> to continue.
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### Sit and Reach Measurement (SRM)



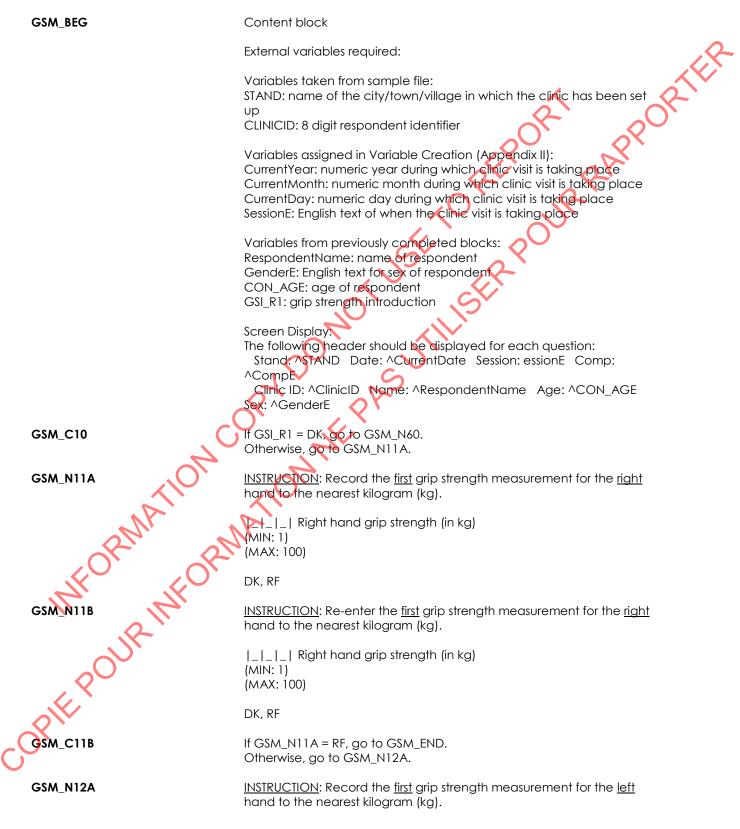


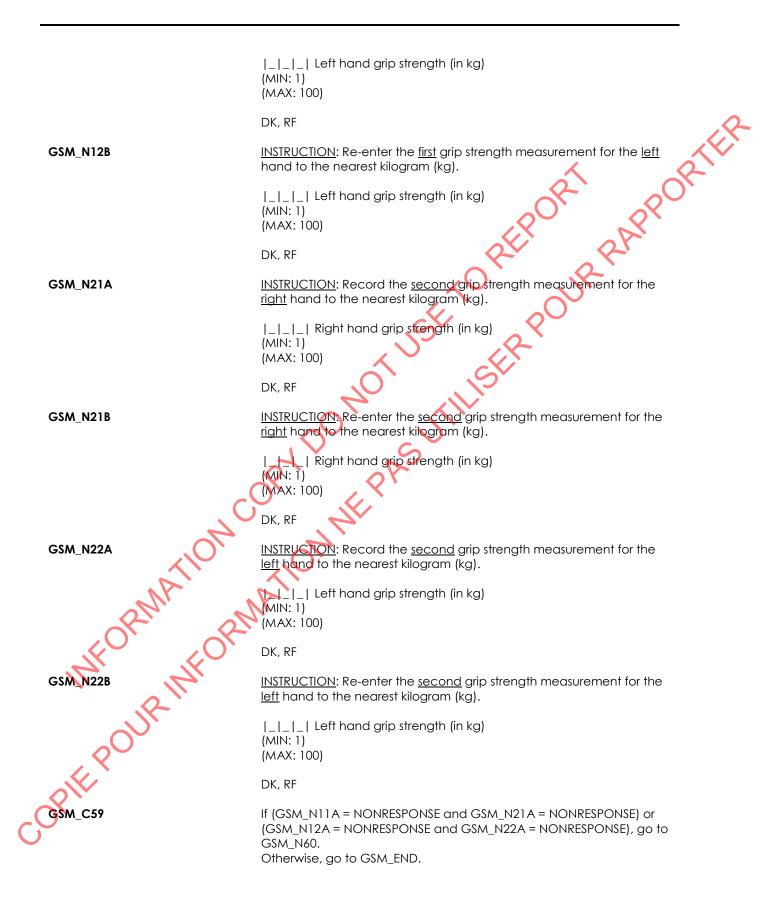
# Grip Strength Component Introduction (GSI)



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### Grip Strength Measurement (GSM)

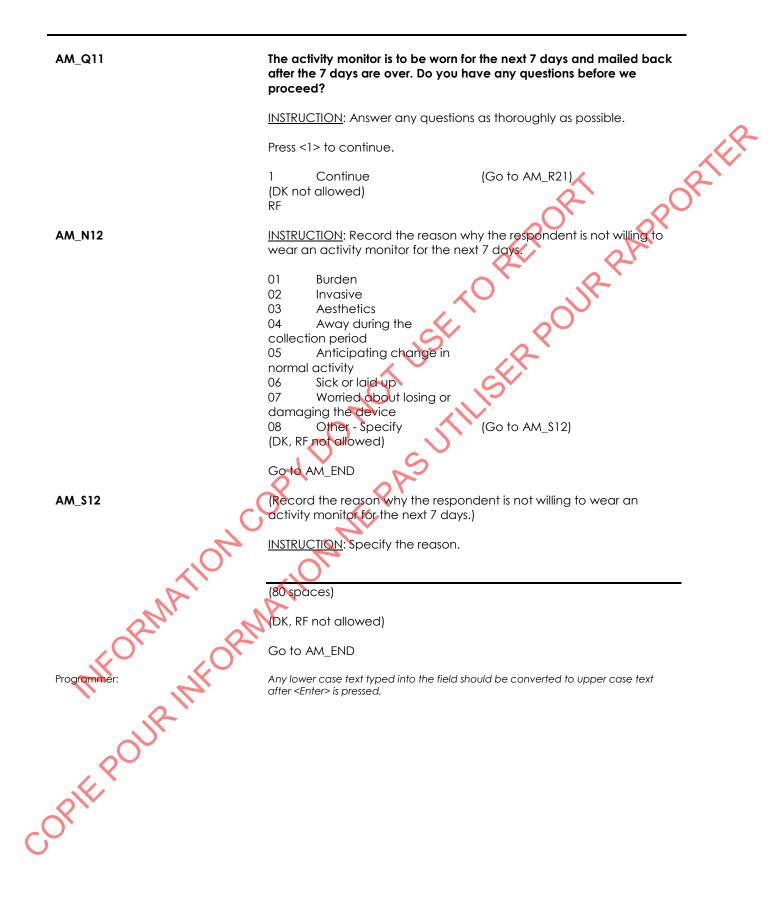


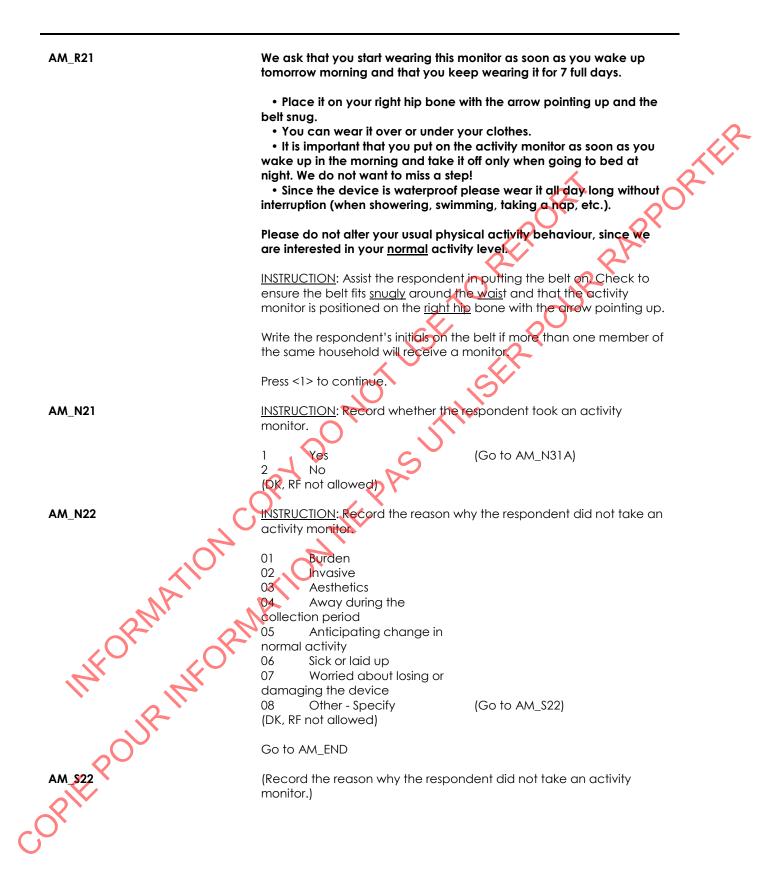


GSM_N60	INSTRUCTION: Why was the component not fully completed?
	01 Respondent unable to continue for health reasons
	02 Respondent unable to
	understand technique / Health Measures Specialist unable to
	adapt coaching 03 Respondent refuses to
	continue
	technical difficulty
	05 Respondent's mental condition
	06 No time
	20 Other - Specify (DK, RF not allowed)
	Go to GSM_END
GSM_S60	(Why was the component not fully completed?)
	INSTRUCTION: Specify.
	(80 spaces)
	(DK, RF not allowed)
Programmer:	Any lower case text typed into the field should be converted to upper case text after <enter> is pressed.</enter>
GSM_END	
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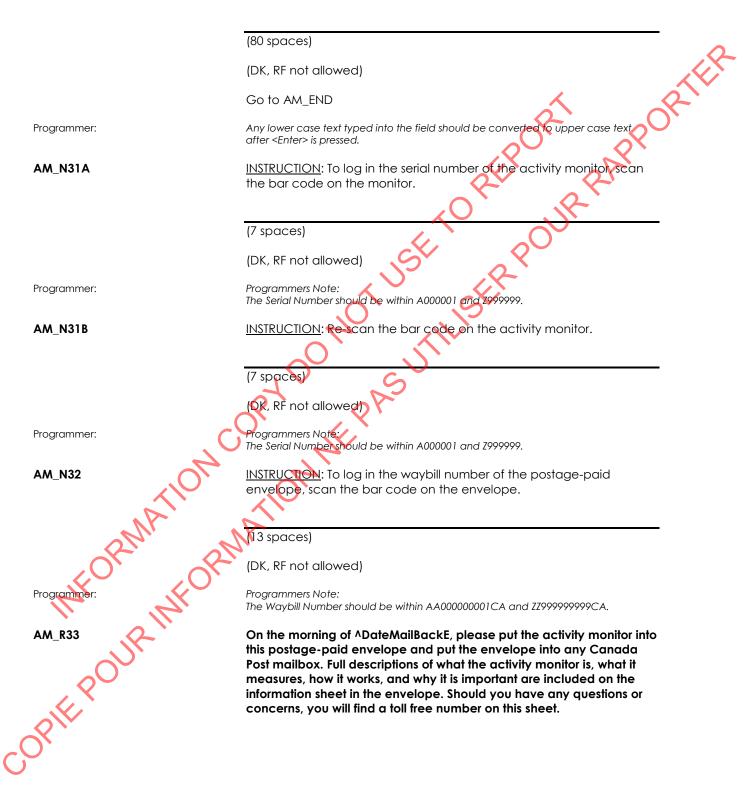
# Activity Monitor (AM)

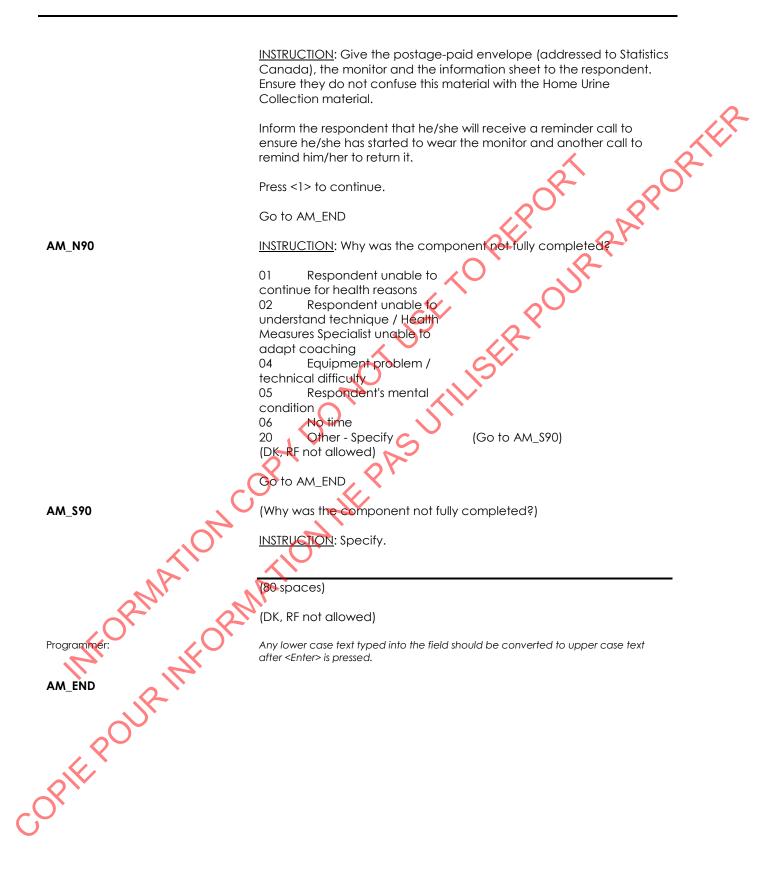
AM_BEG	Content block
	External variables required:
	Variables taken from sample file: STAND: name of the city/town/village in which the clinic has been set up CLINICID: 8 digit respondent identifier
	Variables assigned in Variable Creation (Appendix II): CurrentYear: numeric year during which clinic visit is taking place CurrentMonth: numeric month during which clinic visit is taking place CurrentDay: numeric day during which clinic visit is taking place SessionE: English text of when the clinic visit is taking place DateMailBackE: English text of date 8 days after the clinic visit
	Variables from previously completed blocks: RespondentName: name of respondent GenderE: English text for sex of respondent CON_AGE: age of respondent IAS_N32: the waybill number of the postage-paid envelope SCS_N12: Visit type UCH_N050: waybill number from Home urine
	Screen Display: The following header should be displayed for each question: Stand: ^STAND_Date: ^CurrentDate_Session: essionE_Comp: ^CompEClinicID_Name: ^RespondentName_Age: ^CON_AGE Sex: ^GenderE
AM_N11	INSTRUCTION: Record whether an activity monitor is available.
RMF	NO (Go to AM_END) (Go to AM_N90) (RF not allowed)
AM_RIF OPIE POUR	It is crucial to obtain information about Canadians' daily activity patterns. As a result, this survey will be measuring your daily activity patterns over a 7 day period. In order to do this, we would like you to wear an activity monitor for the next 7 days. An activity monitor is a small battery-operated electronic device that is worn on a belt around the waist, on the right hip bone. The monitor records all daily activities as electronic signals. It is pre-programmed to start recording tomorrow morning, there is no activation required
OFF	and it does not need to be turned on or off.
c ^{Ox}	INSTRUCTION: Hold up the activity monitor (on the belt) for display. Press <1> to continue.
$\mathbf{O}$	





INSTRUCTION: Specify.

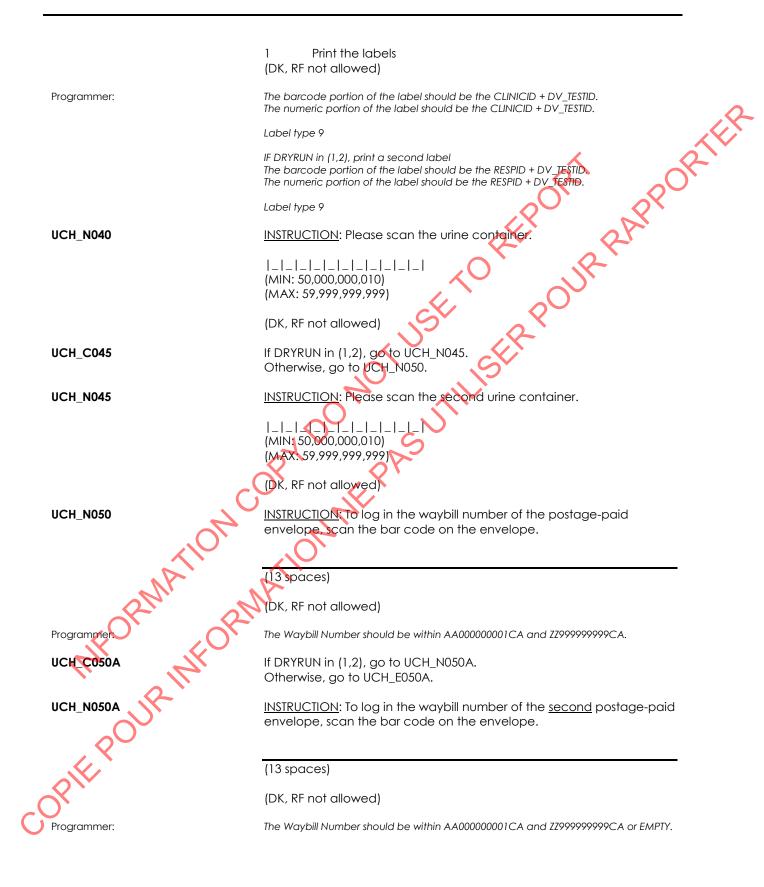


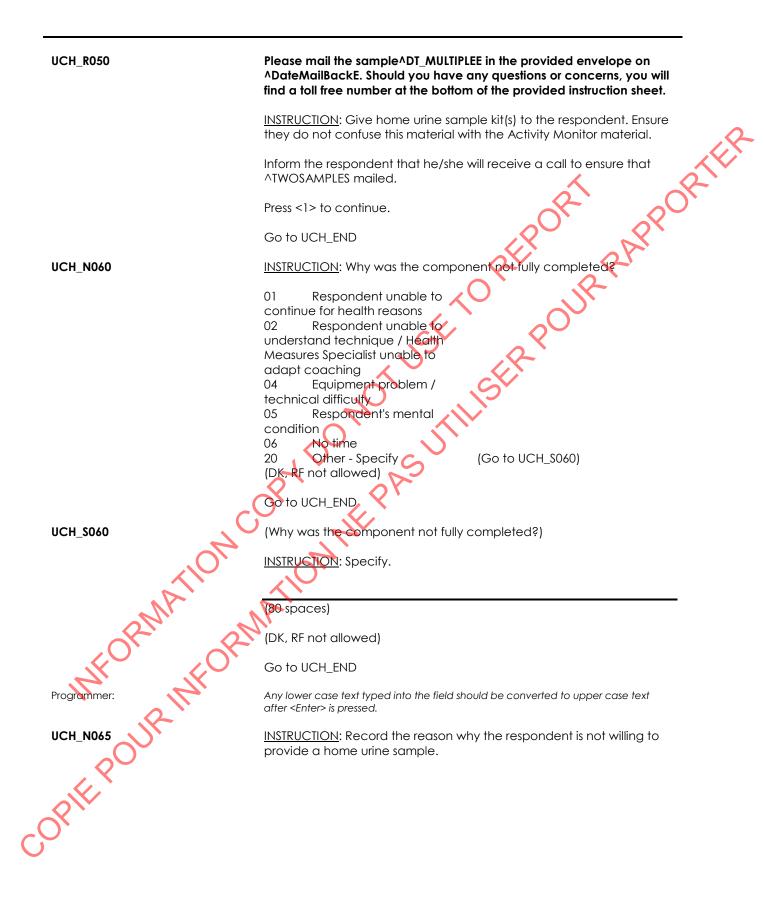


# Urine Collection- Home (UCH)

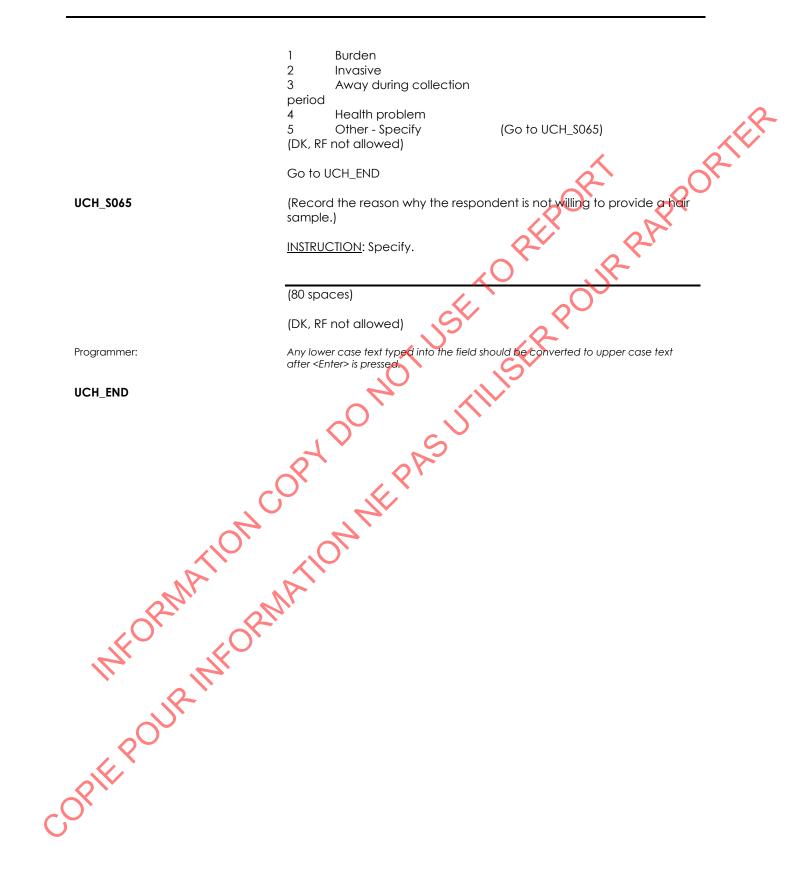
UCH_BEG	Content block
	External variables required:
	Variables taken from sample file: STAND: name of the city/town/village in which the clinic has been set up CLINICID: 8 digit respondent identifier REPLICID: 8 digit respondent replicate identifier DRYRUN: If the respondent is selected as a dryrun
	Variables assigned in Variable Creation (Appendix II): CurrentYear: numeric year during which clinic visit is taking place CurrentMonth: numeric month during which clinic visit is taking place CurrentDay: numeric day during which clinic visit is taking place SessionE: English text of when the clinic visit is taking place DateMailBackE: Date- 8 days after the clinic visit
	Variables from previously completed blocks: RespondentName: name of respondent GenderE: English text for sex of respondent CON_AGE: age of respondent CON_SEX: sex of the respondent AM_N32: the waybill number of the postage-paid envelope SCS_N12: Visit type
	PHL D12: Fasting status - confirmed at phlebotomty PHB.ComponentCode: The component outcome code of the Phlebotomy component ATG_D12: Fasting status - confirmed at screening UC1_Q15: Whether the respondent wanted a urine collection hat
RMATIO	Screen Display: The following header should be displayed for each question: Stand: ^STAND Date: ^CurrentDate Session: essionE Comp: CompE Clinic ID: ^ClinicID Name: ^RespondentName Age: ^CON_AGE Sex: ^GenderE
	INSTRUCTION: Record whether a home urine sample kit is available.
II UR IN	1 Yes 2 No (Go to UCH_END) DK (Go to UCH_N60) (RF not allowed)
UCH_N001	We would like to better assess your nutritional intake of sodium, potassium and/or iodine. To do this, we would like to collect ^DT_SAMPQTYE urine sample^DT_MULTIPLEE which you will provide at home.
0	INSTRUCTION: Show the home urine collection package for display.
	Press <1> to continue.

UCH_R010	^DT_SAMPDRYE should be provided ideally within the next 7 days and mailed back to us the same day. Do you have any questions before I read the detailed instructions?
	INSTRUCTION: Answer any questions as thoroughly as possible.
	Press <1> to continue.
Programmer:	Allow RF (Go to UCH_N065)
UCH_R015	In ^DT_INSDRYE postage-paid envelope, you will find: - A box - A labelled urine container - An absorbent sheet - A plastic bag (including a second absorbent sheet) - An instruction sheet
	<u>INSTRUCTION</u> : Ensure respondent has entire contents of the urine sample kit. You can confirm the correct shipping address in the help text. Press <1> to continue.
Help text:	HC-Nutrition Research Division 251 Sir Frederick Banting Driveway 2203E, Room D240 Ottawa, Ontario K1A 0L2
UCH_R020	ADT_SELFASTE ADT_READREPE INSTRUCTION: ADT_SHEETE
2 MATION	Ensure respondent has a copy of the instructions after you finish reading them. ADT COLLECHATE Press <1> to continue.
UCH_N025	INSTRUCTION: Record whether the respondent accepted a home urine sample kit.
UCH_N025	1 Yes 2 No (Go to UCH_N060) (DK, RF not allowed)
	INSTRUCTION: Press <1> to print the label.
UCH_N035	Stick the label to the urine container.

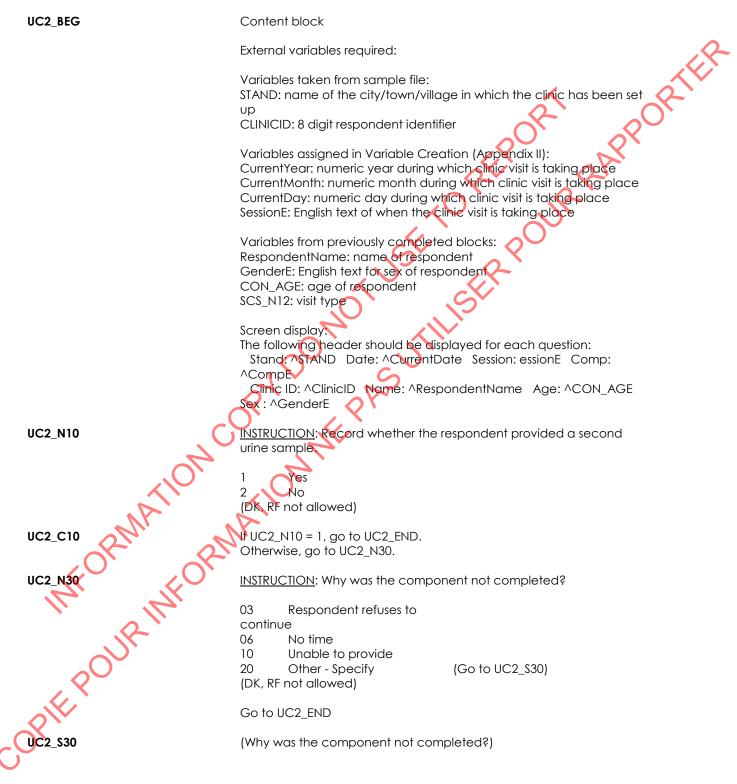




## Canadian Health Measures Survey - Cycle 5

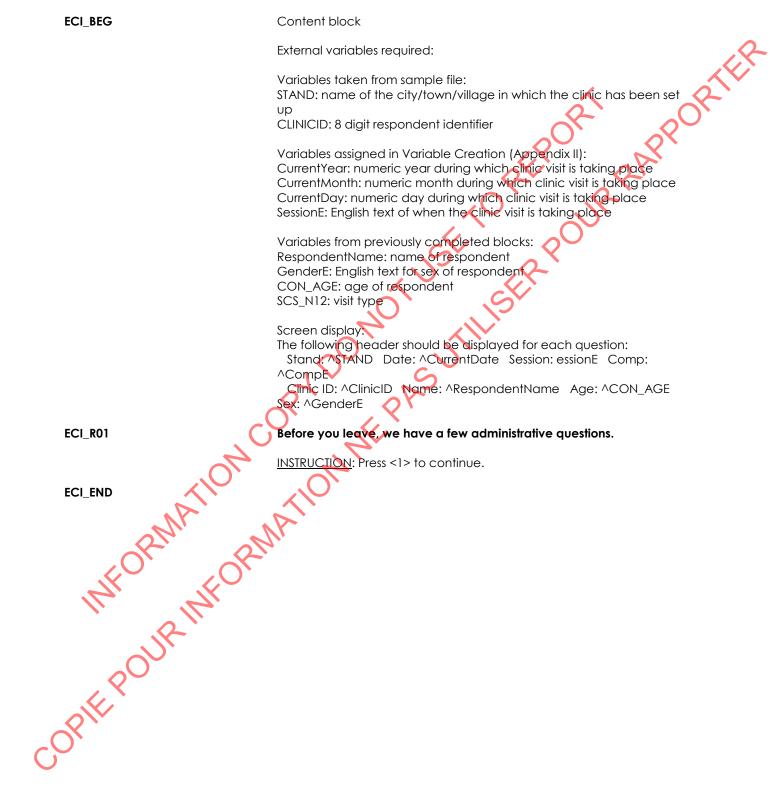


#### Urine Collection 2 (UC2)

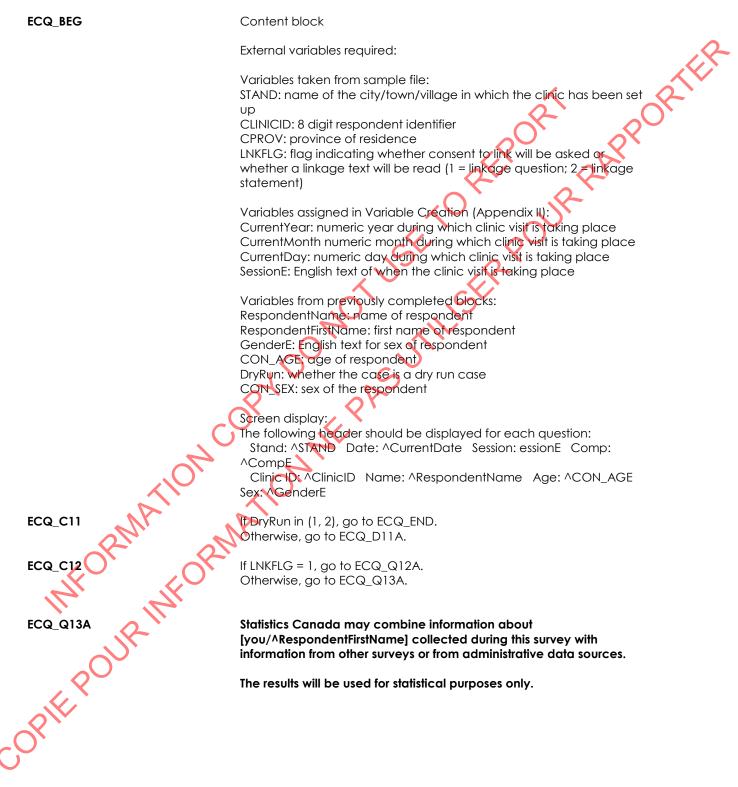


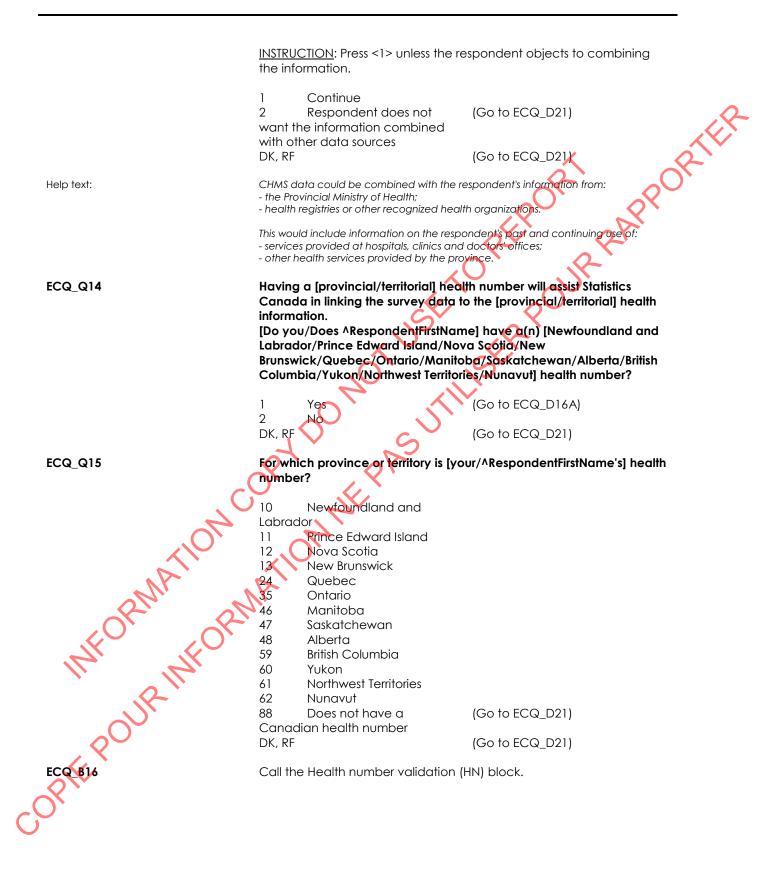
(80 )	spaces)
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#### Exit Component Introduction (ECI)



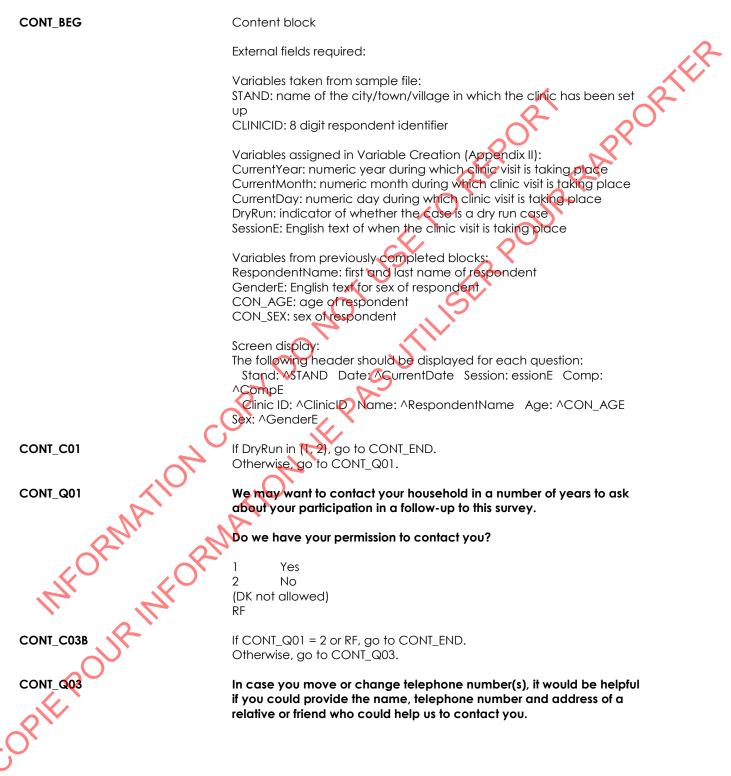
#### Exit Consent Questions (ECQ)





	ECQ_R21	To avoid duplication of surveys, Statistics Canada has signed agreements with Health Canada and the Public Health Agency of Canada to share the information collected during this survey.
		[Your name, address, telephone number and health number/Your name, address and telephone number/^RespondentFirstName's name, address, telephone number and health number/^RespondentFirstName's name, address and telephone number] will not be shared.
		INSTRUCTION: Press <1> to continue.
	ECQ_Q22	They have agreed to keep the information confidential and use it only for statistical purposes.
		Do you agree to share [your/^RespondentFirstName's] information with Health Canada and the Public Health Agency of Canada?
		1 Yes 2 No DK, RF
	ECQ_END	NOT ILISE
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## Contact (CONT)



	INSTRUCTION: Press <1> to continue.
	1 Continue (DK not allowed) RF
CONT_C04	If CONT_Q03 = RF, go to CONT_END. Otherwise, go to CONT_B05.
CONT_B05	Call the Get Contact Name (GCN) block. See Appendix I.
Programmer:	Pass the following parameters: DV_QTEXT_E = "I want to emphasize that we will contact this person only if we experience difficulty reaching you. "
CONT_C05	If CONT_B05.GCN_Q02 = 1, go to CONT_END. Otherwise, go to CONT_D05.
CONT_B06	Call the New Address block (NAD). See Appendix 1.
Programmer:	Pass the following parameters: DV_QTEXT_E = " <b>What is the address for ^CONT1 NAMEE?</b> " LISTINGADFLAG = 2 (No) NONCANADFLAG = 1 (Yes) ASKDESCRIPTION = 1 (Yes)
CONT_C07	If CONT_B06.Province = 77 "Outside of Canada and U.S.A.", go to CONT_B08 Otherwise, go to CONT_B07.
CONT_B07	Gall the North American Telephone block (NATP). See Appendix I. Go to CONT_B09
Programmer:	Pass the following parameters: DV_QTEXTE= "What is the telephone number for ^CONT1_NAMEE, including the area code? ASKEXT= 2 (No).
CONT_BOB	Call the Overseas Telephone block (OSTP). See Appendix I.
Programmer:	Pass the following parameters: DV_QTEXT_E = "What is the telephone number for <b>^CONT1_NAMEE</b> , including the area code?"
CONT_B09	Call the Get Contact Name block (GCN). See Appendix I.
Programmer:	Pass the following parameters: DV_QTEXT_E = "Is there someone else we could call to help us contact you? Again, we will contact this person only if we experience difficulty reaching you and then only to obtain the new address and telephone number. "
CONT C09	If CONT_B09.GCN_Q02 = 1, go to CONT_END. Otherwise, go to CONT_D09.
CONT_B10	Call the New Address block (NAD). See Appendix I.

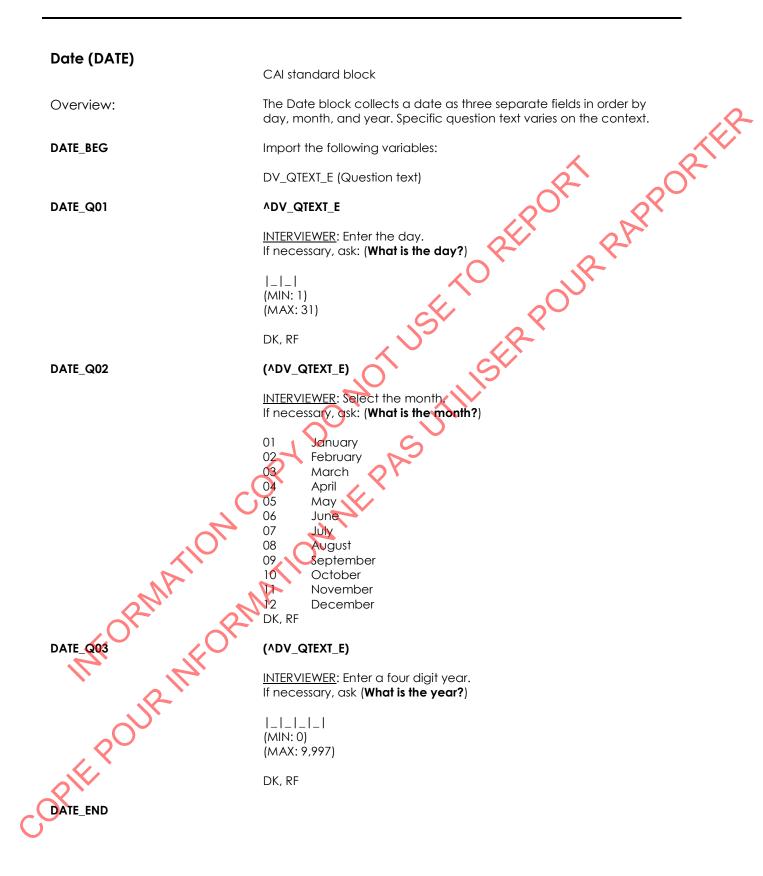
Programmer:	Pass the following parameters: DV_QTEXT_E = " <b>What is the address for ^CONT2_NAMEE?</b> " LISTINGADFLAG = 2 (No) NONCANADFLAG = 1 (Yes) ASKDESCRIPTION = 1 (Yes)
CONT_C11	If CONT_B10.Province = 77 "Outside of Canada and U.S.A.", go to CONT_B12. Otherwise, go to CONT_B11.
CONT_B11	Call the North American Telephone block (NATP). See Appendix I.
	Go to CONT_END
Programmer:	Pass the following parameters: DV_QTEXT_E = "What is the telephone number for CONT2_NAMEE, including the area code?" ASKEXT = 2 (No).
CONT_B12	Call the Overseas Telephone block (OSTP). See Appendix I.
Programmer:	Pass the following parameters: DV_QTEXT_E = " <b>What is the telephone number for ^CONT2_NAMEE</b> , <b>including the area</b> <b>code?</b> "
CONT_END	ON COPY DO NE PASUTILIT
COPIEROUN	

Clinic Sign-Out (CSO)

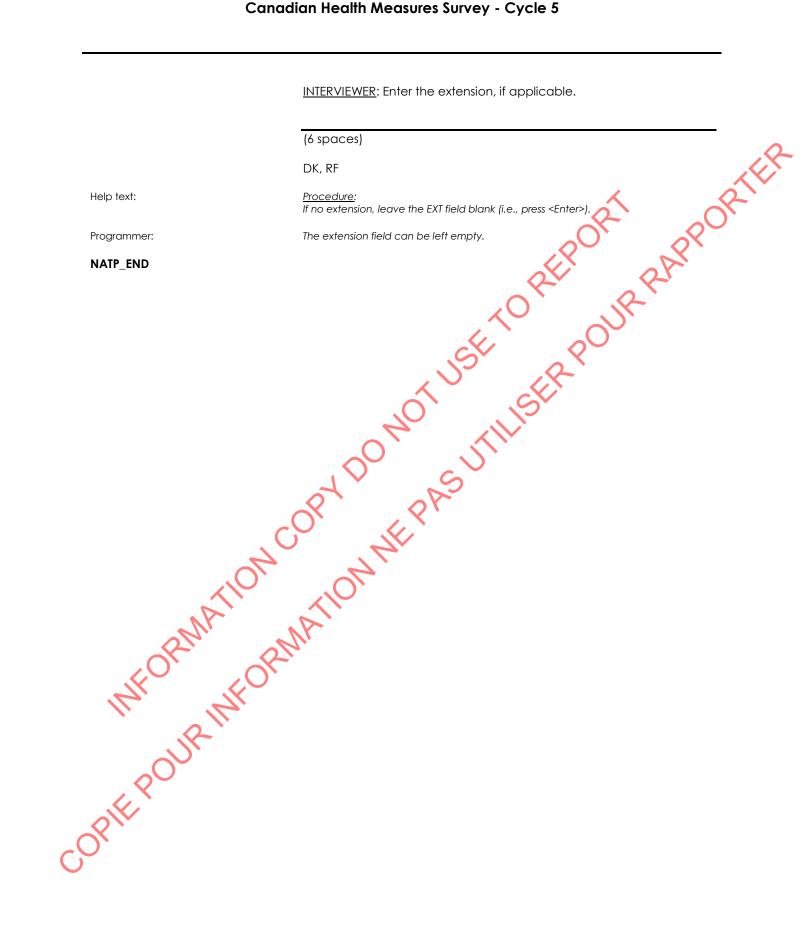
CSO_BEG	Content block
	External variables required:
	Variables taken from sample file: STAND: name of the city/town/village in which the clinic has been set up CLINICID: 8 digit respondent identifier
	Variables assigned in Variable Creation (Appendix II): CurrentYear: numeric year during which clinic visit is taking place CurrentMonth: numeric month during which clinic visit is taking place CurrentDay: numeric day during which clinic visit is taking place SessionE: English text of when the clinic visit is taking place DryRun: indicator of whether the case is a dry run case
	Variables output from previously completed blocks: RespondentName: name of respondent GenderE: English text for sex of respondent CON_AGE: age of respondent
	RespondentFirstnName: first name of respondent LNG_N11: respondent's preferred official language SCS_N12: visit type DT_REP1TEXTE : Dynamic text from REP block
	("^RespondentFirstName"s"/"your") RespondentName: first and last name of the respondent Screen display:
TION	The following header should be displayed for each question: Stand: ^STAND Date: ^CurrentDate Session: essionE Comp: ^CompE Clinic ID: ^ClinicID Name: ^RespondentName Age: ^CON_AGE Sex: ^GenderE
CSO_R11A	Thank you for participating in the survey. Here is <b>^DT_REP11TEXTE</b> Report of physical measurements containing the results for some of the tests [he/she/you] performed today.
CSO_RITE OUR INFOI	INSTRUCTION: Provide the respondent with his/her Report of physical measurements. Briefly review the report with the respondent, identifying each section
JUR	and explaining where the results and interpretations can be found. Press <1> to continue.
CSO_R11B	Do you have any questions about this report? If you would like, a Health Measures Specialist can spend a few minutes reviewing the test results with you now.
C _O ,	<u>INSTRUCTION</u> : If a respondent has questions, ask a Health Measures Specialist to answer any questions about the test results.
	Press <1> to continue.

CSO_R12	We will send the final report of ^DT_REP11TEXTE test results in 6 to 7 months. [If you move, please inform us by phoning or e-mailing us/If you move, please inform us by e-mail or by returning this change of address card]
	INSTRUCTION: Press <1> to continue.
CSO_C21	If DryRun in (1, 2), go to CSO_N23. Otherwise, go to CSO_N22.
CSO_N22	INSTRUCTION: Record whether ^RespondentName is to receive the standard reimbursement of \$100.
	1 Yes (Go to CSO_D23) 2 No (DK, RF not allowed)
CSO_N23	INSTRUCTION: Record the reimbursement amount
	_ _  Amount (in dollars) (MIN: 0) (MAX: 300)
	(DK, RF not allowed)
CSO_C24A	If DryRun = 3, go to CSO_C24C. Otherwise, go to CSO_C24B.
CSO_C24B	If (DryRun = 1 or 2) and CSO_D23 > 0, go to CSO_N24. Otherwise, go to CSO_END.
CSO_C24C	If DryRun = 3 and CSO_D23 > 100, go to CSO_N25. Otherwise, go to CSO_D30.
CSO_N24	INSTRUCTION: Specify the reason why a reimbursement is being disbursed to a dry-run participant.
AA.	
RIN	(80 spaces)
K (	(DK, RF not allowed)
17°	Go to CSO_D30
Programmer:	Any lower case text characters typed into the field should be converted to upper case text characters after <enter> is pressed.</enter>
CSO_N25	<u>INSTRUCTION</u> : Specify the reason why a reimbursement in excess of \$100 is being disbursed.
CSO_N25	

CSO_N30       INSTRUCTION: Press <1> to print the Reimbursement form.         1       Print the form (DK, RF not allowed)         Programmer:       IF LNG_N11 = 1 THEN Print the English Reimbursement form (Reimbursement Form_E.docx)         ELSE       Print the French Reimbursement form (Reimbursement Form_F.docx)         ENDIF       The Current/SMIDName used for the site manager needs to be the first level 3 found in the LOG block from the Internace.         IF CSO_N30 = RESPONSE AND DATE_D24 = EMEPTITEXTE DATE_D24 := SYSDATE TME_D24 := SYSDATE TME_D24 := SYSDATE         TME_D24 := SYSDATE         TME_D25 := SYSDATE         TME_D26 := SYSDATE	Programmer:       Any lower case text characters typed into the field should be converted to upper case text characters after <enters is="" pressed.<="" td="">         CSO_N30       INSTRUCTION: Press &lt;1&gt; to print the Reimbursement form.         1       Print the form (DK, RF not allowed)         Programmer:       IF LNG_N11 = 1 THEN Print the English Reimbursement form. (Reimbursement form.E.docx)         ELSE       Print the French Reimbursement form. (Reimbursement form.E.docx)         ELSE       Print the French Reimbursement form. (Reimbursement form.E.docx)         ENDIF       The CurrentSMIDName used to the site manager needs to be the first level 3 found in the LOG block from the liperance.         IF CSO_N30 = RESPONSE AND DATE_D24 = EMPRYTHEN DATE_D24 := SNOATE TIME_D24 := SNOATE         CSO_R31       Before you leave, I would like to provide you with a reimbursement of the expenses for ADT_REPTITEXTE participation in the clinic portion of the survey. I need you to sign this form, which indicates that you received the reimbursement.         INSTRUCTION: Provide the [respondent/parent or guardian] with the Reimbursement Form.         Where the freespondent/parent or guardian] returns the form, check to ensure that all requested information has been filled in and is legible. Noten the form as the witness.  <th>(DK, RF not allowed)         Programmer:       Any lower case text characters typed into the field should be converted to upper case text characters after &lt; Enter&gt; is pressed.         CSO_N30       INSTRUCTION: Press &lt;1&gt; to print the Reimbursement form.         1       Print the form (DK, RF not allowed)         Programmer:       IF LNG_NIT = 1 THEN Print the English Reimbursement form. (Reimbursement form.E.docx)         ELSE       Print the French Reimbursement form. (Reimbursement form.E.docx)         ELSE       Print the French Reimbursement form. (Reimbursement form.E.docx)         ENDIF       The CurrentSMIDName used to the site manager needs to be the first level 3 found in the LOG block from the Inference.         IF CSO_N30 = RESPONSE AND DATE_D24 = EMERY IFEN       DATE_D24 := SEQTE         Imm_D224 := SEQTE       Time_D24 := SEQTE         TME_D24 := SEQTE       Time_D24 := SEQTE         IMMED24 := SEQUE       Not the reimbursement.         INSTRUCTION: Provide the [respondent/parent or guardian] with the Reimbursement.         INSTRUCTION: Provide the [respondent/parent or guardian] with the Reimbursement form.         When the [respondent/parent or guardian] returns the form, check to ensure that all requested information has been filled in and is legible.</th><th></th><th></th></enters>	(DK, RF not allowed)         Programmer:       Any lower case text characters typed into the field should be converted to upper case text characters after < Enter> is pressed.         CSO_N30       INSTRUCTION: Press <1> to print the Reimbursement form.         1       Print the form (DK, RF not allowed)         Programmer:       IF LNG_NIT = 1 THEN Print the English Reimbursement form. (Reimbursement form.E.docx)         ELSE       Print the French Reimbursement form. (Reimbursement form.E.docx)         ELSE       Print the French Reimbursement form. (Reimbursement form.E.docx)         ENDIF       The CurrentSMIDName used to the site manager needs to be the first level 3 found in the LOG block from the Inference.         IF CSO_N30 = RESPONSE AND DATE_D24 = EMERY IFEN       DATE_D24 := SEQTE         Imm_D224 := SEQTE       Time_D24 := SEQTE         TME_D24 := SEQTE       Time_D24 := SEQTE         IMMED24 := SEQUE       Not the reimbursement.         INSTRUCTION: Provide the [respondent/parent or guardian] with the Reimbursement.         INSTRUCTION: Provide the [respondent/parent or guardian] with the Reimbursement form.         When the [respondent/parent or guardian] returns the form, check to ensure that all requested information has been filled in and is legible.		
Programmer:       Any lower case text characters typed into the field should be converted to upper case text characters after <enter> is pressed.         CSO_N30       INSTRUCTION: Press &lt;1&gt; to print the Reimbursement form.         1       Print the form (DK, RF not allowed)         Programmer:       IF LNG_NIT = 1 THEN Print the English Reimbursement form. (Reimbursement form_E.docx)         ELSE       Print the English Reimbursement form. (Reimbursement form_E.docx)         ELSE       Print the French Reimbursement form (Reimbursement form_E.docx)         ENDIF       The CurrentSMIDName used for the site manager needs to be the first level 3 found in the LOG block from the Inference.         IF CSO_N30 = RESPONSE AND DATE_D24 = ENDIFIEN       DATE_D24 := SNDATE         TME_D24 := SNDATE       TIME_D24 := SNDATE         TME_D24</enter>	Programmer:       Any lower case text characters typed into the field should be converted to upper case text characters offer <enter> is pressed.         CSO_N30       INSTRUCTION: Press &lt;1&gt; to print the Reimbursement form.         1       Print the form (DK, RF not allowed)         Programmer:       IF LNG_N11 = 1 THEN Print the English Reimbursement form. (Reimbursement form_E.docx)         ELSE       Print the French Reimbursement form (Reimbursement form_E.docx)         ELSE       Print the French Reimbursement form (Reimbursement form_E.docx)         ENDIF       The CurrentSMIDName used for the site manager needs to be the first level 3 found in the LOG block from the Inference.         IF CSO_N30 = RESPONSE AND DATE_D24 = ENDERTIFEN       DATE_D24 := SNDATE         TIME_D24 := SNDATE       TIME_D24 := SNDATE         ENDIF       Before you leave, I would like to provide you with a reimbursement of the expenses for ADT_REPTIFEXTE participation in the clinic portion of the survey. I need you be sign this form, which indicates that you received the reimbursement.         INSTRUCTION: Provide the [respondent/parent or guardian] with the Reimbursement.         When the Irespondent/parent or guardian] returns the form, check to ensure that all requested information has been filled in and is legible.         Sigh the form as the witness.</enter>	Programmer:       Any lower case text characters typed into the field should be converted to upper case text characters after <enter> is pressed.         CSO_N30       INSTRUCTION: Press &lt;1&gt; to print the Reimbursement form.         1       Print the form (DK, RF not allowed)         Programmer:       IF LNG_N11 = 1 THEN Print the English Reimbursement form (Reimbursement form_E.docx)         ELSE       Print the French Reimbursement form (Reimbursement form_E.docx)         ENDIF       The CurrentSMIDName used for the site manager needs to be the first level 3 found in the LOG black from the inference.         IF CSO_N30 = RESPONSE AND DATE_D24 = ENCRYTHEN       DATE_D24 := SNDATE         TIME_D24 := SNDATE       TIME_D24 := SNDATE         TIME_D24 := SNDATE       INSTRUCTION: Provide the [respondent/parent or guardian] with the Reimbursement.         INSTRUCTION: Provide the [respondent/parent or guardian] with the Reimbursement.       INSTRUCTION: Provide the [respondent/parent or guardian] with the Reimbursement.</enter>		(80 spaces)
CSO_N30       INSTRUCTION: Press <1> to print the Reimbursement form.         1       Print the form (DK, RF not allowed)         Programmer:       IF LNG_N11 = 1 THEN Print the English Reimbursement form (Reimbursement form_E.docx)         ELSE       Print the French Reimbursement form (Reimbursement form_F.docx)         ENDIF       The Current/SMIDName used for the site manager needs to be the first level 3 found in the LOSO_N30 = RESPONSE AND DATE_D24 = EMEM/THEN DATE_D24 := SNDATE TIME_D24 := SNDATE TIME_D24 := SNDATE TIME_D24 := SNDATE         CSO_R31       Before you leave, I would like to provide you with a reimbursement of the expenses for ADT_REPTITEXTE participation in the clinic portion of the survey. I need you lo sign this form, which indicates that you received the reimbursement.         NISTRUCTION: Provide the [respondent/parent or guardian] with the Reimbursement Form.         When the [respondent/parent or guardian] returns the form, check to ensure that all requested information has been filled in and is legible.	CSO_N30       INSTRUCTION: Press <1> to print the Reimbursement form.         1       Print the form (DK, RF not allowed)         Programmer:       IF LNG_N11 = 1 THEN Print the English Reimbursement form (Reimbursement form_E.docx)         ELSE       Print the French Reimbursement form (Reimbursement form_F.docx)         ENDIF       The Current/SMIDName used for the site manager needs to be the first level 3 found in the LOSO_N30 = RESPONSE AND DATE_D24 = EMEM/THEN DATE_D24 := SNDATE TIME_D24 := SNDATE TIME_D24 := SNDATE TIME_D24 := SNDATE         CSO_R31       Before you leave, I would like to provide you with a reimbursement of the expenses for ADT_REPTITEXTE participation in the clinic portion of the survey. I need you lo sign this form, which indicates that you received the reimbursement.         NISTRUCTION: Provide the [respondent/parent or guardian] with the Reimbursement Form.         When the [respondent/parent or guardian] returns the form, check to ensure that all requested information has been filled in and is legible.	CSO_N30       INSTRUCTION: Press <1> to print the Reimbursement form.         1       Print the form (DK, RF not allowed)         Programmer:       IF LNG_N11 = 1 THEN Print the English Reimbursement form (Reimbursement form_E.docx)         ELSE       Print the French Reimbursement form (Reimbursement form_F.docx)         ENDIF       The Current/SMIDName used for the site manager needs to be the first level 3 found in the LOSO_N30 = RESPONSE AND DATE_D24 = EMEM/THEN DATE_D24 := SNDATE TIME_D24 := SNDATE TIME_D24 := SNDATE TIME_D24 := SNDATE         CSO_R31       Before you leave, I would like to provide you with a reimbursement of the expenses for ADT_REPTITEXTE participation in the clinic portion of the survey. I need you lo sign this form, which indicates that you received the reimbursement.         NISTRUCTION: Provide the [respondent/parent or guardian] with the Reimbursement Form.         When the [respondent/parent or guardian] returns the form, check to ensure that all requested information has been filled in and is legible.		(DK, RF not allowed)
1       Print the form (DK, RF not allowed)         IF LNG_NI1 = 1 THEN Print the English Reimbursement form (Reimbursement form_E.docx)         ELSE         Print the French Reimbursement form (Reimbursement form_E.docx)         ELSE         Print the French Reimbursement form (Reimbursement form_E.docx)         ENDIF         The CurrentSMIDName used for the site manager needs to be the first level 3 found in the LOG block from the Interface.         IF CSO_N30 = RESPONSE AND DATE_D24 = EMPTY THEN DATE_D24 := SYDD/TE TIME_D24 := SYDD/TE TIME_D24 := SYDD/TE         SSO_R31         Before you leave, I would like to provide you with a reimbursement of the expenses for ADT_REPTITEXTE participation in the clinic portion of the survey. I need you to sign this form, which indicates that you received the reimbursement.         INSTRUCTION: Provide the [respondent/parent or guardian] with the Reimbursement Form.         When the [respondent/parent or guardian] returns the form, check to ensure that all requested information has been filled in and is legible.	1       Print the form (DK, RF not allowed)         IF LNG_NI1 = 1 THEN Print the English Reimbursement form (Reimbursement form_E.docx)         ELSE         Print the French Reimbursement form (Reimbursement form_E.docx)         ELSE         Print the French Reimbursement form (Reimbursement form_E.docx)         ENDIF         The CurrentSMIDName used for the site manager needs to be the first level 3 found in the LOG block from the Interface.         IF CSO_N30 = RESPONSE AND DATE_D24 = EMPTY THEN DATE_D24 := SYDD/TE TIME_D24 := SYDD/TE TIME_D24 := SYDD/TE         SSO_R31         Before you leave, I would like to provide you with a reimbursement of the expenses for ADT_REPTITEXTE participation in the clinic portion of the survey. I need you to sign this form, which indicates that you received the reimbursement.         INSTRUCTION: Provide the [respondent/parent or guardian] with the Reimbursement Form.         When the [respondent/parent or guardian] returns the form, check to ensure that all requested information has been filled in and is legible.	1       Print the form (DK, RF not allowed)         IF LNG_NI1 = 1 THEN Print the English Reimbursement form (Reimbursement form_E.docx)         ELSE         Print the French Reimbursement form (Reimbursement form_E.docx)         ELSE         Print the French Reimbursement form (Reimbursement form_E.docx)         ENDIF         The CurrentSMIDName used for the site manager needs to be the first level 3 found in the LOG block from the Interface.         IF CSO_N30 = RESPONSE AND DATE_D24 = EMPTY THEN DATE_D24 := SYDD/TE TIME_D24 := SYDD/TE TIME_D24 := SYDD/TE         SSO_R31         Before you leave, I would like to provide you with a reimbursement of the expenses for ADT_REPTITEXTE participation in the clinic portion of the survey. I need you to sign this form, which indicates that you received the reimbursement.         INSTRUCTION: Provide the [respondent/parent or guardian] with the Reimbursement Form.         When the [respondent/parent or guardian] returns the form, check to ensure that all requested information has been filled in and is legible.	rogrammer:	
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## North American Telephone (NATP) CAI standard block The North American Telephone block is called from within other blocks. Overview: ....RAPPORTER Only a telephone number is collected. NATP_BEG Import the following variables: DV_QTEXT_E (Question Text) ASKEXT †YesNo NATP Q01 **^DV QTEXT E** INTERVIEWER: Enter the area code. If necessary, ask: (What is the area code?) Enter "000" if no telephone. |_|_| (MIN: 0) (MAX: 995) Go to NATP_Q02) DK, RF Help text: Functionality: If an area code outside of Canada and the United States is entered, a soft edit will be triggered for confirmation. If NATP_Q01 = "0", fill NATP_Q02 with "0", go to NATP_END. NATP_C01 Otherwise, go to NATP E01A. NATP Q02 (ADV QTEXT E) INTERVIEWER: Enter the telephone number. ORWININ COM If necessary, ask: (What is the telephone number?) (MIN: 0) (MAX: 9,999,995) DK, RF (Go to NATP_END) NATP CO3 If NATP_Q02 = DK, RF or "0000000" or ASKEXT = No, go to NATP_END. Otherwise, go to NATP_Q03. NATP Q03 OPIE POI (^DV_QTEXT_E)

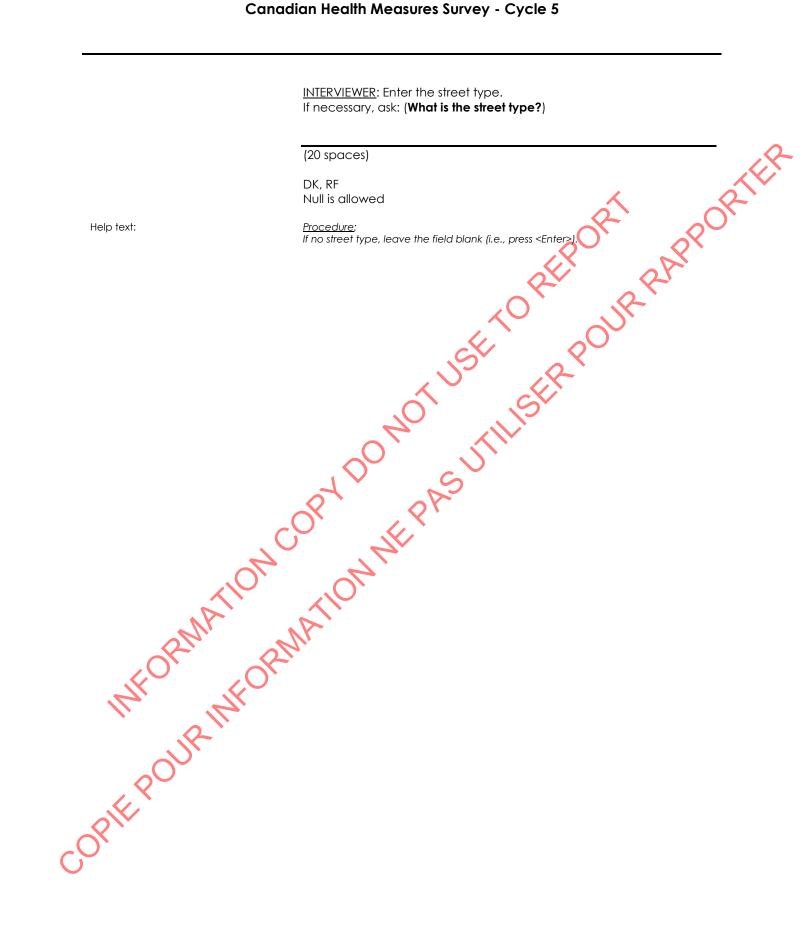


# **Overseas Telephone (OSTP)** CAI standard block The Overseas Telephone block is called from within other blocks. Only Overview: RAPPORTER a telephone number is collected. OSTP_BEG Import the following variables: DV_QTEXT_E (Question Text) OSTP_Q01 **^DV_QTEXT_E** INTERVIEWER: Enter the country code. If necessary, ask: (What is the country code?) Enter "000" if no telephone. (3 spaces) (Go to OSTP_Q02) DK, RF OSTP_C01 If OSTP_Q01 = "000", fill OSTP_Q02 with "0000" and OSTP_Q03 with "0000000", go to OSTP_END. Otherwise, go to OSTP_Q02 OSTP Q02 (^DV_QTEXT_E) INTERVIEWER: Enter the city code (if required). necessary, ask: (What is the city code?) (4 spaces A State of the sta DK, R Help text: Procedure: facity code is not required, leave the field blank (i.e., press <Enter>) OSTP_C02 If OSTP_Q02 = "blank", go to OSTP_Q03. Otherwise, go to OSTP_Q03. OSTP Q0 (^DV_QTEXT_E) INTERVIEWER: Enter the telephone number. If necessary, ask: (What is the telephone number?) (8 spaces) DK, RF **ØSTP_END**

New Address (NAD)	
	CAI standard block
Overview:	The Address block is called from within other blocks. Only an address is collected. Note that surveys may choose whether or not to collect US addresses.
NAD_BEG	Import the following variables:
	DV_QTEXT_E (QuestionText) LISTINGADFLAG tYesNo NONCANADFLAG tYesNo ASKDESCIPTION tYesNo
NAD_Q01	^DV_QTEXT_E
	INTERVIEWER: Enter the civic number. If necessary, ask: (What is the civic number?)
	(6 spaces) DK, RF Null is allowed
Help text:	<u>Procedure:</u> If a rural descriptive address, feave the field blank (i.e., press <enter>).</enter>
	<u>Functionality:</u> Mondatory field - something must be entered in either civic number AND street name OR rural description to continue.
Programmer:	Any lower case text characters typed into the field should be converted to upper case text characters after <enter> is pressed.</enter>
NAD_C01	If DK or RF is entered and LISTINGADFLAG <> Yes, go to NAD_N01. Otherwise, go to NAD_Q02.
NAD_N01	INTERVIEWER: Do you wish to skip the remaining address fields?
Help text:	1 Yes (Go to NAD_END) 2 No (DK, RF not allowed)
Help text:	Purpose:
JK	To allow the remaining Address questions to be skipped. Asked only if <f5> "Refusal" or <f6> "Don't Know" was used on NAD_Q01.</f6></f5>
ROS	<u>Procedure:</u> Select "Yes" to skip the remaining Address fields.
Programmer:	If "Yes" is selected, fill address fields with DK or RF (based on the response to NAD_Q01) and go to NAD_END.
NAD_Q02	(^DV_QTEXT_E)

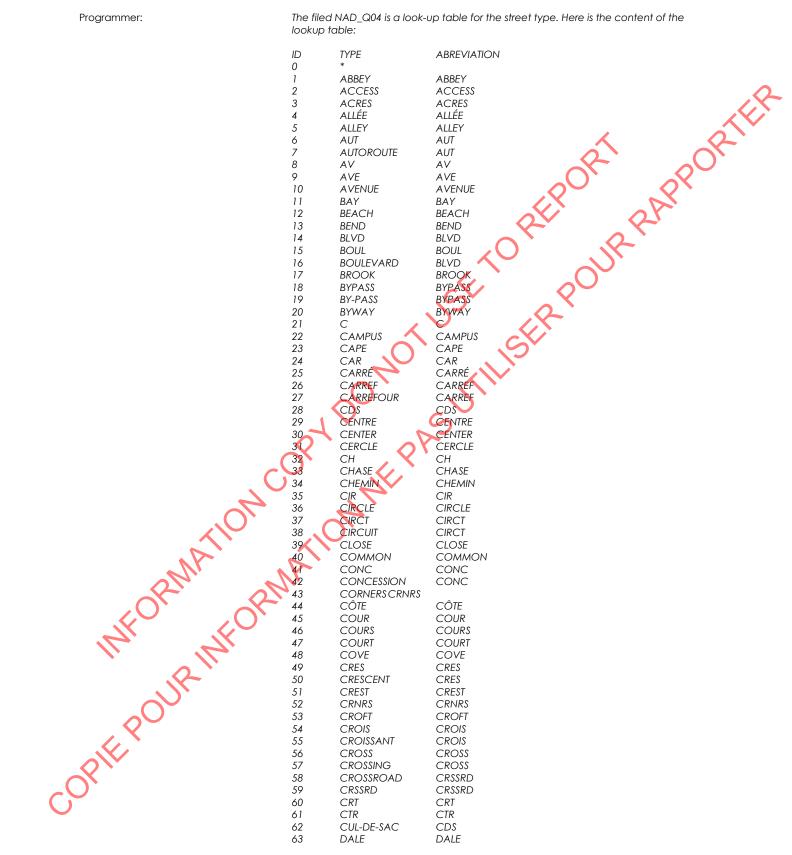
<u>INTERVIEWER</u>: Enter the civic suffix. If necessary, ask: (What is the civic suffix?)

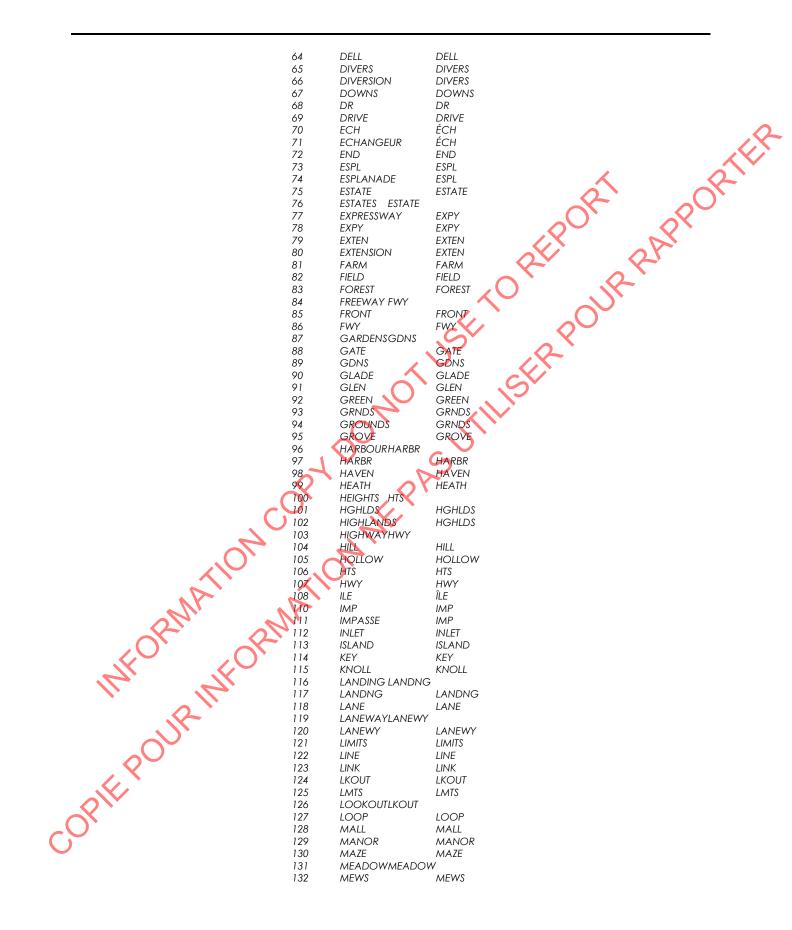


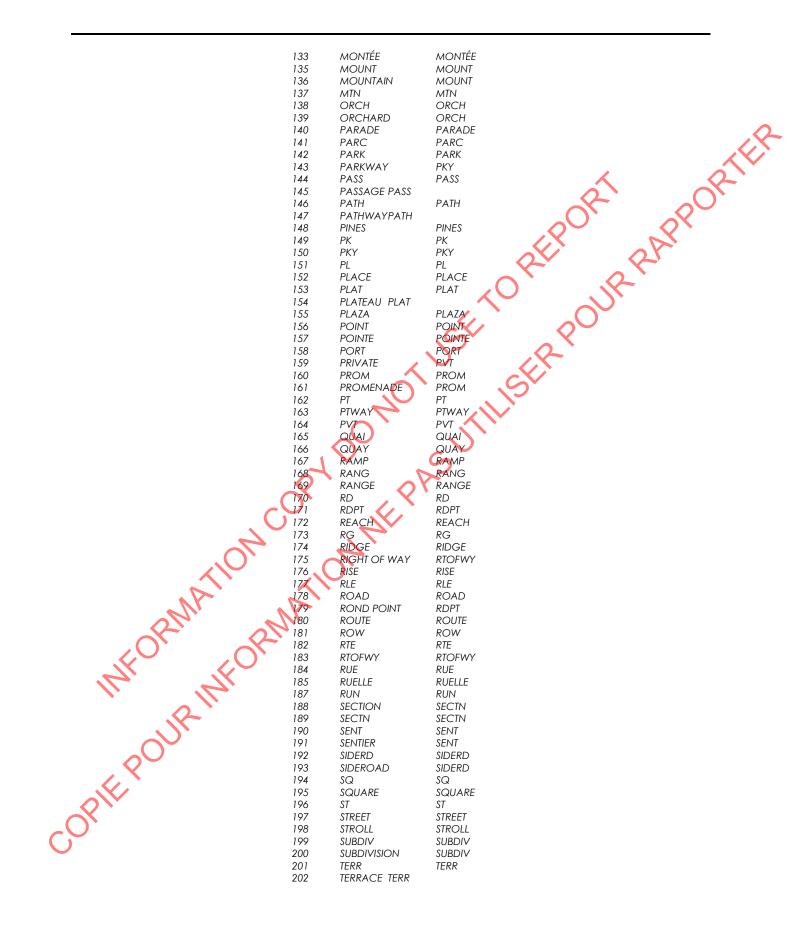


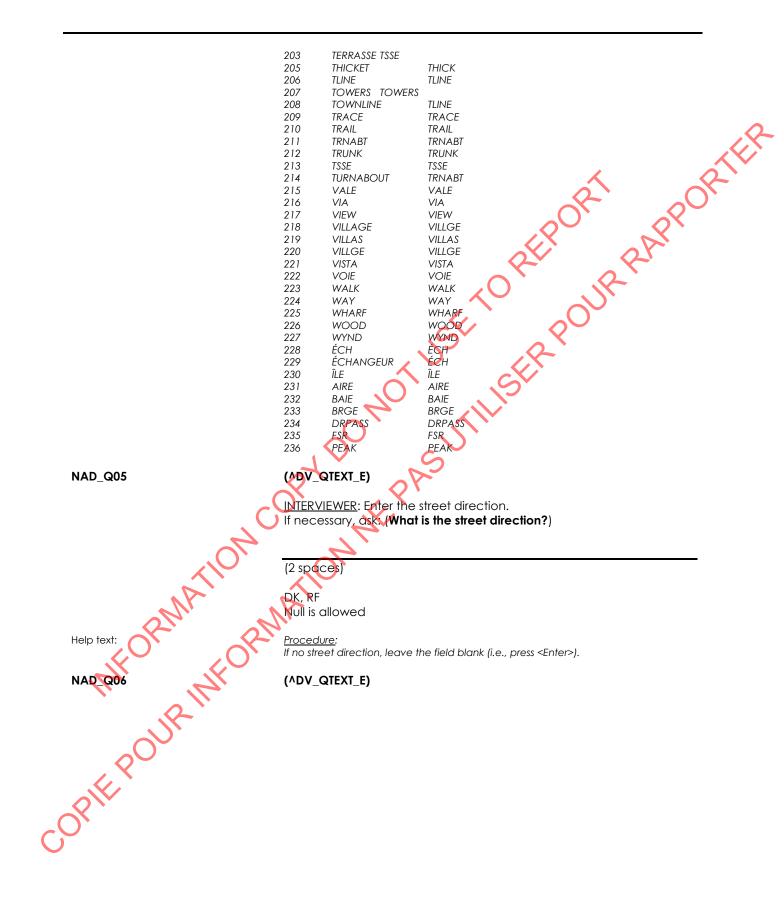


The filed NAD_Q04 is a look-up table for the street type. Here is the content of the



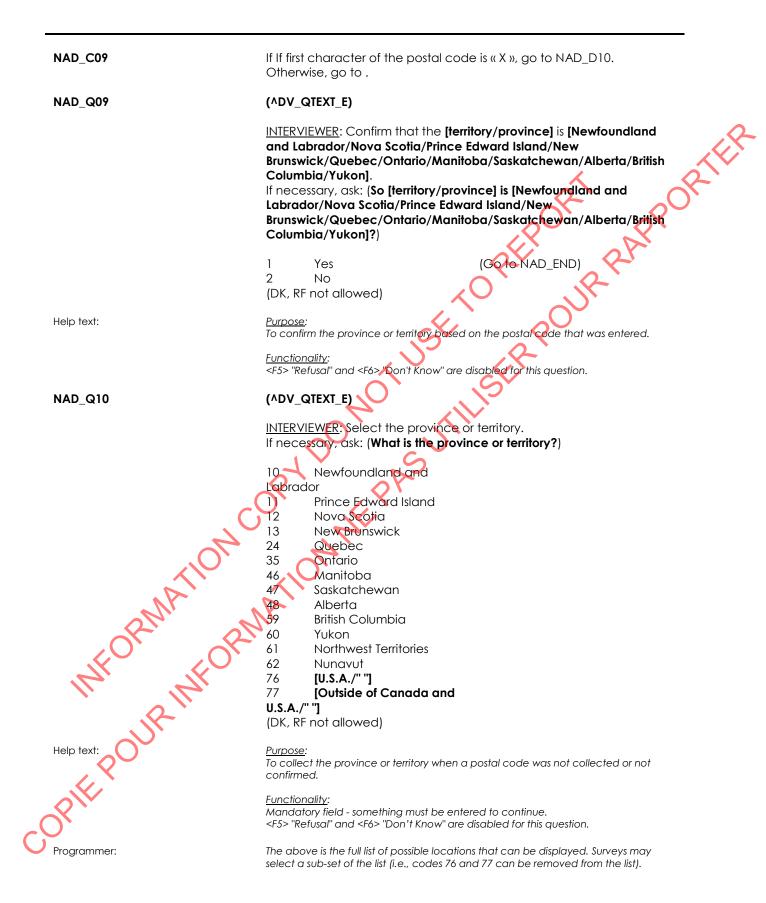


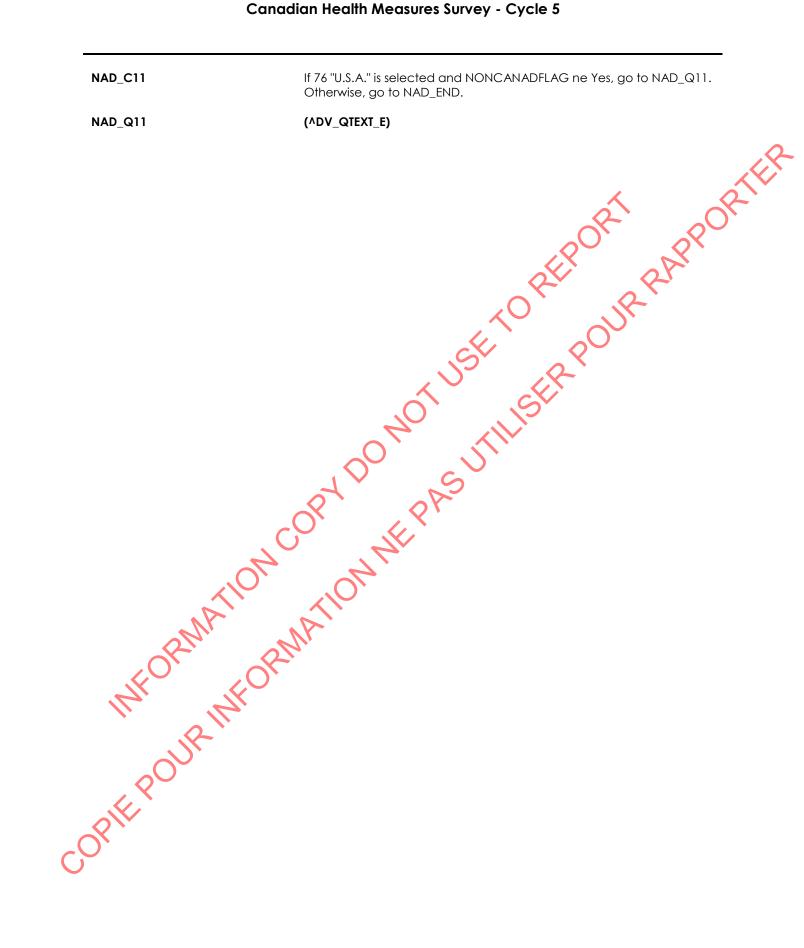


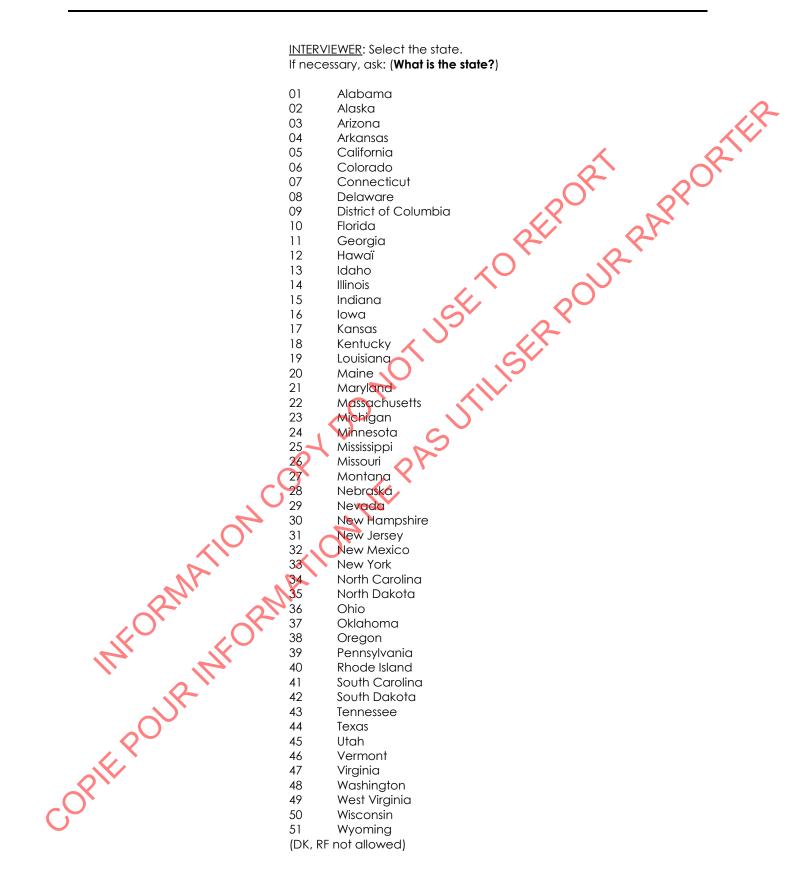


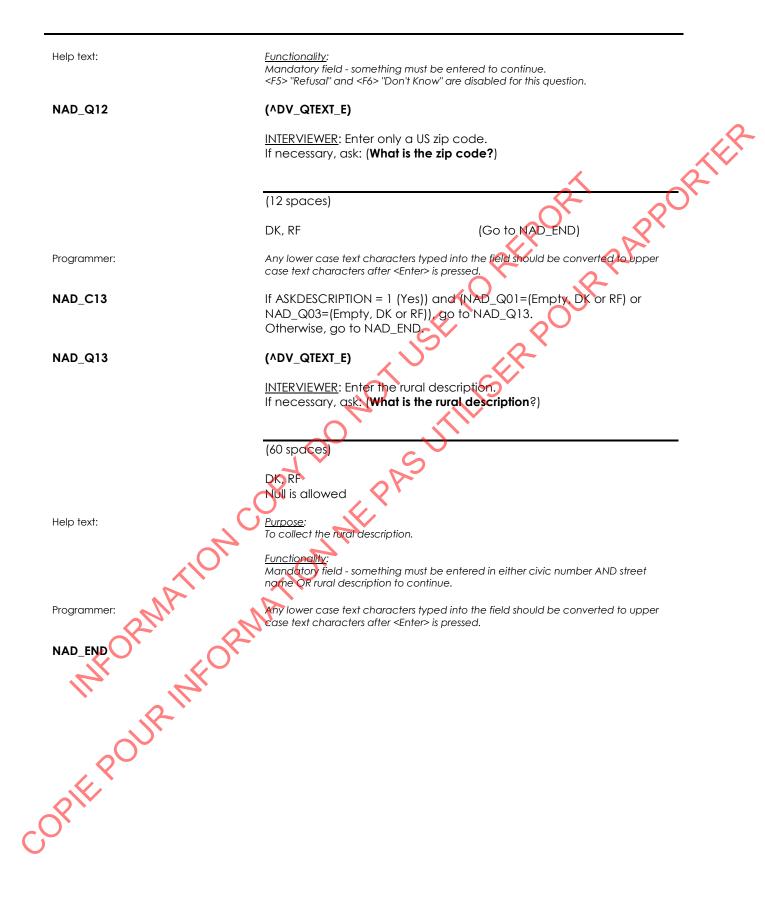
INTERVIEWER: Enter the apartment number. If necessary, ask: (What is the apartment number?)

	(6 spaces)
	DK, RF
	Null is allowed
Help text:	Procedure:
	If no apartment number, leave the field blank (i.e., press <enter>).</enter>
	Any lower area toyl aborrators type of into the field shauld be converted to your
Programmer:	Any lower case text characters typed into the field should be converted to upper case text characters after <enter> is pressed.</enter>
NAD_Q07	(^DV_QTEXT_E)
	INTERVIEWER: Enter the city, town, village or municipality.
	If necessary, ask: (What is the city, town, village or municipality?)
	(35 spaces)
	(DK, RF not allowed)
Help text:	Functionality
•	Mandatory field - something must be entered to continue.
	<f5> "Refusal" and <f6> "Don't Know" are disabled for this question.</f6></f5>
Programmer:	Any lower case text characters typed into the field should be converted to upper
riogrammer.	case text characters after <enter> is pressed.</enter>
C	
NAD_Q08	(^DV_QTEXT_E)
	INTERVIEWER: Enter the postal code. [Blank/If the address is outside
	Canada) press <enter>] If necessary, ask: (What is the postal code?)</enter>
	The posici code:
NFORM	(6 spaces)
	DK, RF (Go to NAD_Q10)
	Null is allowed
2	Go to NAD_E08A
	<u>Procedure</u> : If the respondent is unsure or is unwilling to provide the full postal code, ask for the
	first three characters.
Help text:	If the address is outside of Canada, leave the field blank (i.e., press <enter>).</enter>
	Functionality:
A.V.	Several format edits are applied on the postal code entered.
$\bigcirc$	
Programmer:	Any lower case text characters typed into the field should be converted to upper case text characters after <enter> is pressed.</enter>
	cuse text characters after senters is pressed.





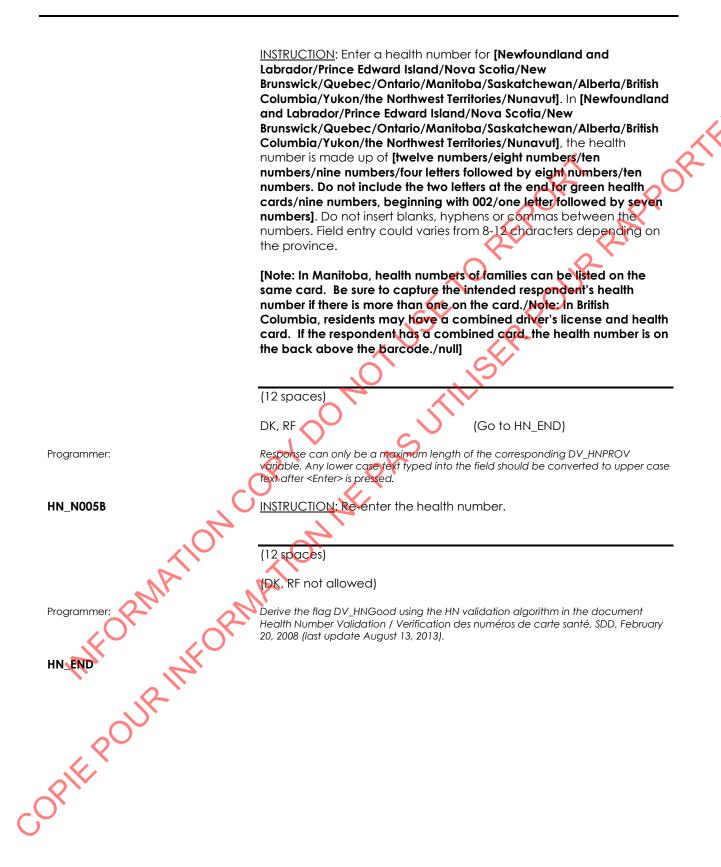




Core content

Health Number Validation (HN)

# HN BEG Content block External variables required: Variables taken from sample file: STAND: name of the city/town/village in which the clinic has been set uр CLINICID: 8 digit respondent identifier CPROV: province of residence Variables assigned in Variable Creation (Appendix II): CurrentYear: numeric year during which clinic visit is taking place CurrentMonth: numeric month during which clinic visit is taking place CurrentDay: numeric day during which clinic visit is taking place SessionE: English text of when the clinic visit is taking place Variables from previously completed blocks: RespondentName: name of respondent RespondentFirstName: first name of respondent GenderE: English text for sex of respondent , dent esponden ince of respon ince is incentive to set ince of respon ince is incentive to set incentive to se CON_AGE: age of respondent DV_HNPROV: Province of respondent's health card. The following header should be displayed for each question: Stand : STAND Date : ACORENTDATE Session : essionE Comp : ACompE Qinic ID : ^ClinicID Name : ^RespondentName Age : ^CON_AGE

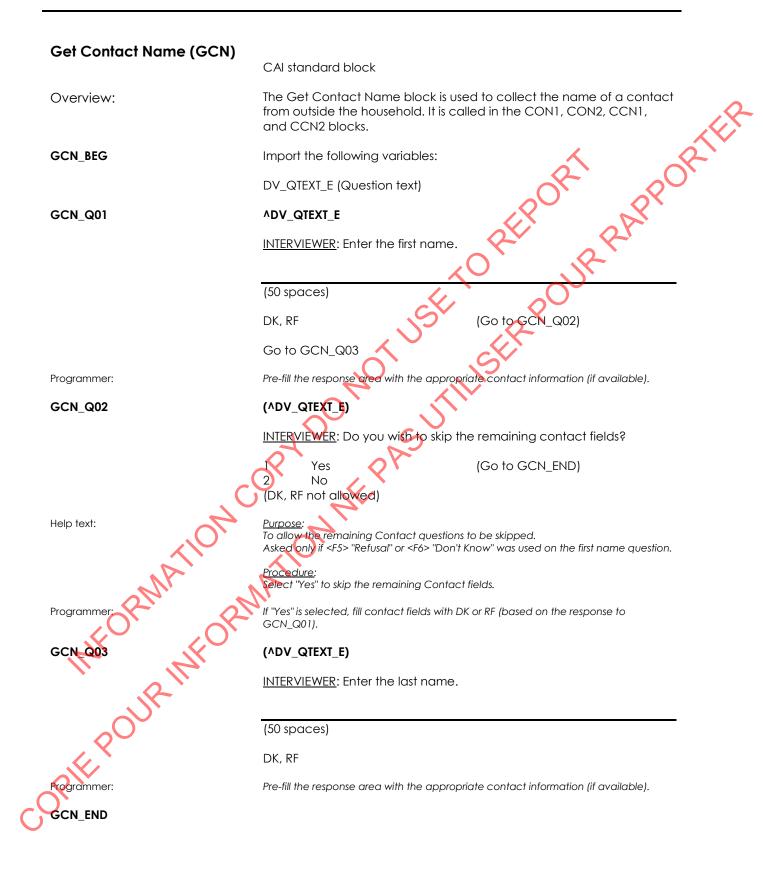


Electronic	Address	(EA)
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	CAI standard block
Overview:	This block is used to confirm or collect the electronic address.
EA_BEG	Call block
	External variables required:
	Variables taken from sample file: EMAILADDRESS: specific respondent's e-mail address (as provided in a previous interview or survey)
	Variables from previously completed blocks: SPECRESPFNAME: first name of selected respondent PROXYSEX: gender of selected respondent and whether the interview is being conducted by proxy 1 = male, non-proxy 2 = female, non-proxy 3 = male, proxy 4 = female, proxy
EA_C01	If EMAILADDRESS = DK, RF or EMPTY, go to EA_Q02. Otherwise, go to EA_D01A.
EA_Q01	I would like to confirm your e-mail address.         Is it ^EMAILADDRESS?         INSTRUCTION: Read the e-mail address character by character.         1       Yes         2       No         DK, RF       (Go to EA_END)
Programmer:	Pre-fill the question text with the appropriate respondent name and e-mail address.
EA_CO2	IDEA_Q01 = 1 (Yes), go to EA_END. Otherwise, go to EA_Q02.
EA_Q02 EA_Q02 INFORMATION	What is your e-mail address?
COPIE	

<u>INSTRUCTION</u>: Ask about upper and lower case, special characters, etc.

	(80 spaces)	
	DK, RF	(Go to EA_END)
Help text:	Email address must follow	the format: name@domain.type
	Name may contain only the following: letters (upper or lower case, no accents, numbers, or ! ' & + * \$ $\% \land _(no blank spaces)$	
	(b) sequences of letters (u	bers with a period (.) between them (e.g. 123.53.233) OR pper or lower case, no accents) or numbers with a period ce; each sequence must contain at least one letter (e.g.
	Type may contain only: (a) 1-3 numbers OR (b) 2-4 letters (e.g. com, o Optionally, type may end	rg, her, ca)
Programmer:	Any lower case text character upper case text character	acters typed into the field should NOT be converted to rs after <enter> is pressed.</enter>
EA_Q03	I would like to confirm Is it ^EA_Q02?	n the e-mail address.
	INSTRUCTION: Read fr	e-mail address character by character.
	Yes Ves	(Go to EA_END)
	2 No DK, RF	(Go to EA_END)
EA_END		
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WHOK NOR	2	
R		
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A K X		
<u>8</u>		



## Sub-Sampling Labels (CSSL)

CSSL_BEG	Sub-Sampling Labels Component
CSSL_B005	Call Subsampling Labelsl (SSL)
CSSL_B010	Call Sub-Sampling Labels Component End (SLE)
CSSL_BOID CSSL_END	Sub-Sampling Labels (SSL) Call Sub-Sampling Labels Component End (SLE)
C _O ,	

## Respondent Verification (CRVB)

	CRVB_BEG	Respondent Verification Component
	CRVB_B005	Call Respondant Verification (RVB)
	CRVB_B010	CallName Spelling Confirmation (NSC)
	CRVB_B015	Call Sex Confirmation (SXC)
	CRVB_B020	Call Confirmation (SXC) Call Confirmation of Birth Date (DDN) Call DDN1 (DDN1) Call DDN3 (DDN3)
	CRVB_B025	Call DDN1 (DDN1)
	CRVB_B030	Call DDN3 (DDN3)
	CRVB_B035	Call Language Confirmation (LNG)
	CRVB_B040	Call Respondent Verification Component End (RVC)
Ç	CRVB_END	OPYDONOLUTIUSEN
C	54.	

	Consent (CCON)	
	CCON_BEG	Consent Component
	CCON_B005	Call Consent (CON)
	CCON_B010	Call Report (REP)
	CCON_B015	Call Urgent Condition (URG)
	CCON_B020	Call Electronic Address (EA)
	CCON_B025	Call Consent Component End (COC)
	CCON_END	Call Consent (CON) Call Report (REP) Call Urgent Condition (URG) Call Electronic Address (EA) Call Consent Component End (COC) Call
C		

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Screening (CSCR)

CSCR_BEG	Screening Component
CSCR_B005	Call Screening Component Introduction (SCI)
CSCR_B010	Call Adherence to Guidelines (ATG)
CSCR_B015	Call Physical and Health Conditions (PHC)
CSCR_B020	Call Women's Health Restrictions (WHR)
CSCR_B025	Call Physical Activity Restrictions (PHR)
CSCR_B030	Call Bone or Joint Problem (BJP)
CSCR_B035	Call Bone Mineral Density Test Restrictions (BMR)
CSCR_B040	Call Vision Component Restrictions (VIR)
CSCR_B045	Call Hair Sample Restriction (HSR)
CSCR_B050	Call Medications and Product Confirmation (MEDC)
CSCR_B055	Call Confirm Drug Product (CDP)
CSCR_B060	Call Medication Use for Clinic (MEUC)
CSCR_B065	Call New Product Information (NPI)
CSCR_B070	Call Other Reason for Screening Out (ORS)
CSCR_B075	Call Screening Component End (SCR)
CSCR_END	
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Vision	Questions	(CVIC)
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ANC_BEG	Anthropo
ANC_BEG	Anthropo

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Phlebotomy	(CPHB)
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Saliva Collection (CSLC)	
CSLC_BEG	Saliva Collection Component
CSLC_B005	Call Saliva Collection Block (SC1)
CSLC_B010	Call Saliva Collection 1 Component End (SCE)
CSLC_END	Saliva Collection Block (SC1) Call Saliva Collection 1 Component End (SCE)
MFORMATION NFORMATION ORINGOR	MATIONNEP
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JPY Measurement

AC_BEG	Visual Acuity Componen

Visual Acuity (CVA	2)
CVAC_BEG	Visual Acuity Component
CVAC_B005	Call Visual Acuity Scenario's (VAS)
CVAC_B010	Call Visual Acuity Measurement (VAM)
CVAC_B015	Call Visual Acuity Recording (VAR)
CVAC_B020	Call Visual Acuity Component End (VAC)
	Call Visual Acuity Measurement (VAM) Call Visual Acuity Recording (VAR) Call Visual Acuity Component End (VAC)
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	Visual Field (CFDT)	
	CFDT_BEG	Visual Field Component
	CFDT_B005	Call Visual Field (Frequency Doubling Test) Introduction (FDTI)
	CFDT_B010	Call Visual Field (Frequency Doubling Test) Measurement (FDTM)
	CFDT_B015	Call Visual Field End (FDTC)
	CFDT_END	
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	graphy (CJMC)
CJMC_BEG	Jumping Mechanography Component
CJMC_B005	Call Jumping Mechanography Introduction (JMI)
CJMC_B010	Call Hopping Force Measurement (HFM)
CJMC_B015	Call Jumping Force Measurement (JFM)
CJMC_B020	Call Jumping Mechanography Component End (JMC)
ann	NON-COPYDONOTUSETORE DURRED

CJMC B010	Call Hopping Force Measurement (HFM)

Grip Strength (CGS)	2)
CGSC_BEG	Grip Strength Component
CGSC_B005	Call Grip Strength Component Introduction (GSI)
CGSC_B010	Call Grip Strength Measurement (GSM)
CGSC_B015	Call Grip Strength Component End (GSC)
CGSC_END	TUSE OFFROUR PAPE
	Grip Strength Component Call Grip Strength Component Introduction (GSI) Call Grip Strength Measurement (GSM) Call Grip Strength Component End (GSC) Call Grip Strength Component End (GSC) Call Grip Strength Component End (GSC)
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CFSF_BEG	
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BEG	Fish and Shellfish	Consumption	Component

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Activity	Monitor	(CAMC)
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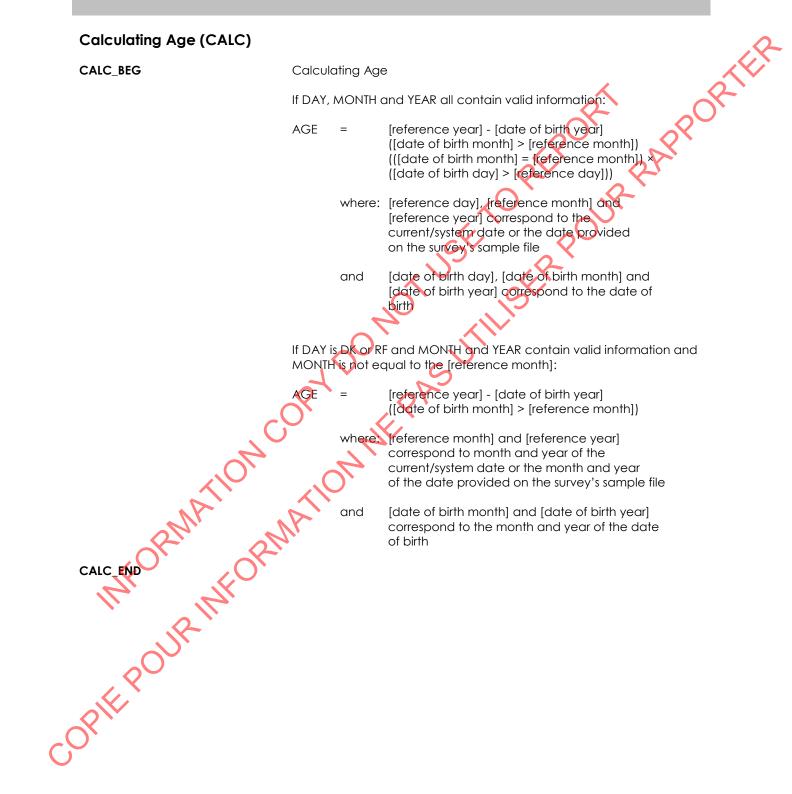
# Report of Measurements (CRMC)

	-
CRMC_BEG	Report of Measurements Component
CRMC_B005	Call Report of Measurements (RM)
CRMC_B010	Call Report of Measurements Component End (RMC)
CRMC_END CRMC_END CRMC_END CRMC_END CRMC_END CRMC_END CRMC_END CRMC_END CRMC_END CRMC_END CRMC_END	Report of Measurements Component End (RMC) Call Report of Measurements Component End (RMC) Call Report of Measurements Component End (RMC) Component End (RMC) Compone

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End of Clinic Visit (CCSO) CCSO_BEG Call Cinic Visit Component CCSO_BO0 Call End Clinic Visit Component End (CSC) CCSO_END CCSO_E	End of Clinic Visit (CCSO)	
CCSO_8005 Call Clinic Sign-Out (CSO) CCSO_8010 Call End Clinic Visit Component End (CSC) CCSO_END Call End Clinic Visit Component End (CSC)	CCSO_BEG	End of Clinic Visit Component
CCSO_BOID CCSO_END CCII End Clinic Visit Component End (CSC) CCSO_END CCSO_END CCSO_END CCII End Clinic Visit Component End (CSC) CCSO_END CCSO_END CCSO_END CCSO_END CCSO_END CCSO_END CCSO_END CCSO_END CCSO_END CCSO_END CCSO_END CCSO_END CCSO_END CCSO_END CCSO_END CCSO_END CCSO_END CCSO_END CCSO_END CCSO_END CCSO_END CCSO_END CCSO_END CCSO_END CCSO_END CCSO_END CCSO_END CCSO_END CCSO_END CCSO_END CCSO_END CCSO_END CCSO_END CCSO_END CCSO_END CCSO_END CCSO_END CCSO_END CCSO_END CCSO_END CCSO_END CCSO_END CCSO_END CCSO_END CCSO_END CCSO_END CCSO_END CCSO_END CCSO_END CCSO_END CCSO_END CCSO_END CCSO_END CCSO_END CCSO_END CCSO_END CCSO_END CCSO_END CCSO_END CCSO_END CCSO_END CCSO_END CCSO_END CCSO_END CCSO_END CCSO_END CCSO_END CCSO_END CCSO_END CCSO_END CCSO_END CCSO_END CCSO_END CCSO_END CCSO_END CCSO_END CCSO_END CCSO_END CCSO_END CCSO_END CCSO_END CCSO_END CCSO_END CCSO_END CCSO_END CCSO_END CCSO_END CCSO_END CCSO_END CCSO_END CCSO_END CCSO_END CCSO_END CCSO_END CCSO_END CCSO_END CCSO_END CCSO_END CCSO_END CCSO_END CCSO_END CCSO_END CCSO_END CCSO_END CCSO_END CCSO_END CCSO_END CCSO CCSO_END CCSO_END CCSO_END CCSO END CCSO END CCSO END CCSO END CCSO END CCSO END CCSO END CCSO END CCSO END CCSO END CCSO END CCSO END CCSO END CCSO END CCSO END CCSO END CCSO END CCSO END CCSO END CCSO END CCSO END CCSO END CCSO END CCSO END CCSO END CCSO END CCSO END CCSO END CCSO END CCSO END CCSO END CCSO END CCSO END CCSO END CCSO END CCSO END CCSO END CCSO END CCSO END CCSO END CCSO END CCSO END CCSO END CCSO END CCSO END CCSO END CCSO END CCSO END CCSO END CCSO END CCSO END CCSO END CCSO END CCSO END CCSO END CCSO END CCSO END CCSO END CCSO END CCSO END CCSO END CCSO END CCSO END CCSO END CCSO END CCSO END CCSO END CCSO END CCSO END CCSO END CCSO END CCSO END CCSO END CCSO END CCSO END CCSO END CCSO END CCSO END CCSO END CCSO END CCSO END CCSO END CCSO END CCSO END CCSO END CCSO END CCSO END CCSO END CCSO END CCSO END CCSO END CCSO END CCSO END CCSO END CCSO END CCSO END CCSO END CCSO END CCSO END CCSO END CCSO END CCSO END CCS	CCSO_B005	Call Clinic Sign-Out (CSO)
CCSO_END CORVERANTION WE PAS UTILISER POUR PARPOR	CCSO_B010	Call End Clinic Visit Component End (CSC)
INFORMATION WEFT	CCSO_END	A DO NOT USE TO REPORT PORT PORT PORT PORT PORT PORT PORT
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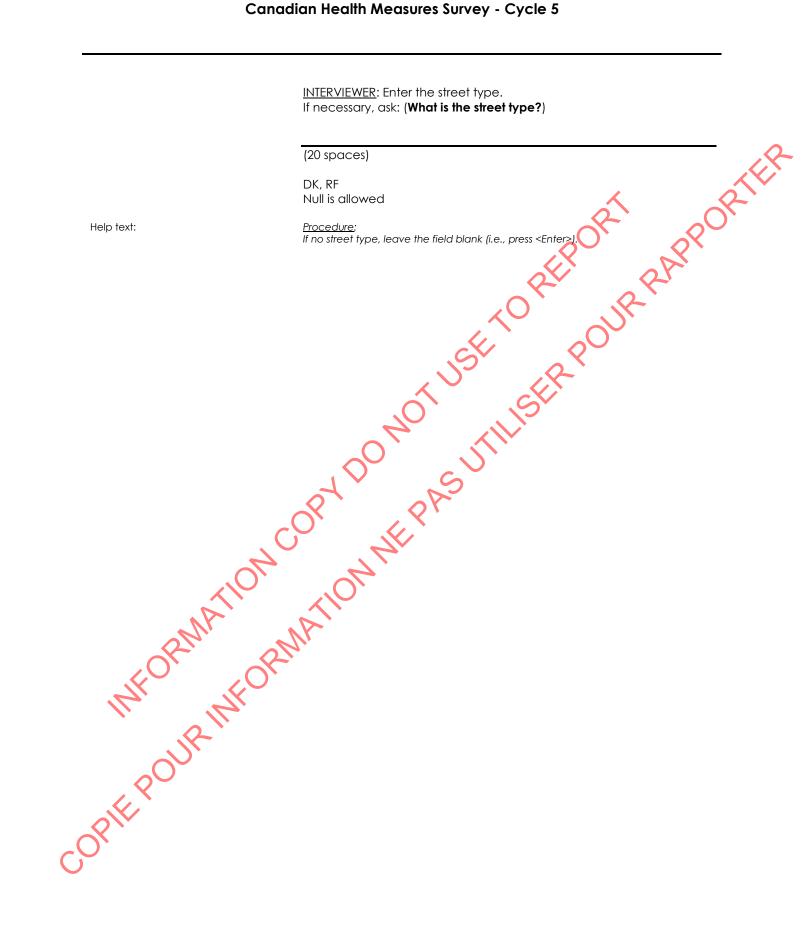
# Appendix II



New Address (NAD)	
	CAI standard block
Overview:	The Address block is called from within other blocks. Only an address is collected. Note that surveys may choose whether or not to collect US addresses.
NAD_BEG	Import the following variables:
	DV_QTEXT_E (QuestionText) LISTINGADFLAG tYesNo NONCANADFLAG tYesNo ASKDESCIPTION tYesNo
NAD_Q01	
	INTERVIEWER: Enter the civic number. If necessary, ask: (What is the civic number?)
	(6 spaces)
	DK, RF Null is allowed
Help text:	<u>Procedure</u> : If a rural descriptive address, leave the field blank (i.e., press <enter>).</enter>
	<u>Functionality:</u> Mondatory field - something must be entered in either civic number AND street name OR rural description to continue.
Programmer:	Any lower case text characters typed into the field should be converted to upper case text characters after <enter> is pressed.</enter>
NAD_C01	If DK or RF is entered and LISTINGADFLAG <> Yes, go to NAD_N01. Otherwise, go to NAD_Q02.
NAD_N01	NTERVIEWER: Do you wish to skip the remaining address fields?
	1 Yes (Go to NAD_END)
The the	2 No (DK, RF not allowed)
Help text:	<u>Purpose</u> : To allow the remaining Address questions to be skipped. Asked only if <f5> "Refusal" or <f6> "Don't Know" was used on NAD_Q01.</f6></f5>
, 2 ⁰	<u>Procedure:</u> Select "Yes" to skip the remaining Address fields.
Programmer:	If "Yes" is selected, fill address fields with DK or RF (based on the response to NAD_Q01) and go to NAD_END.
NAD_Q02	(^DV_QTEXT_E)

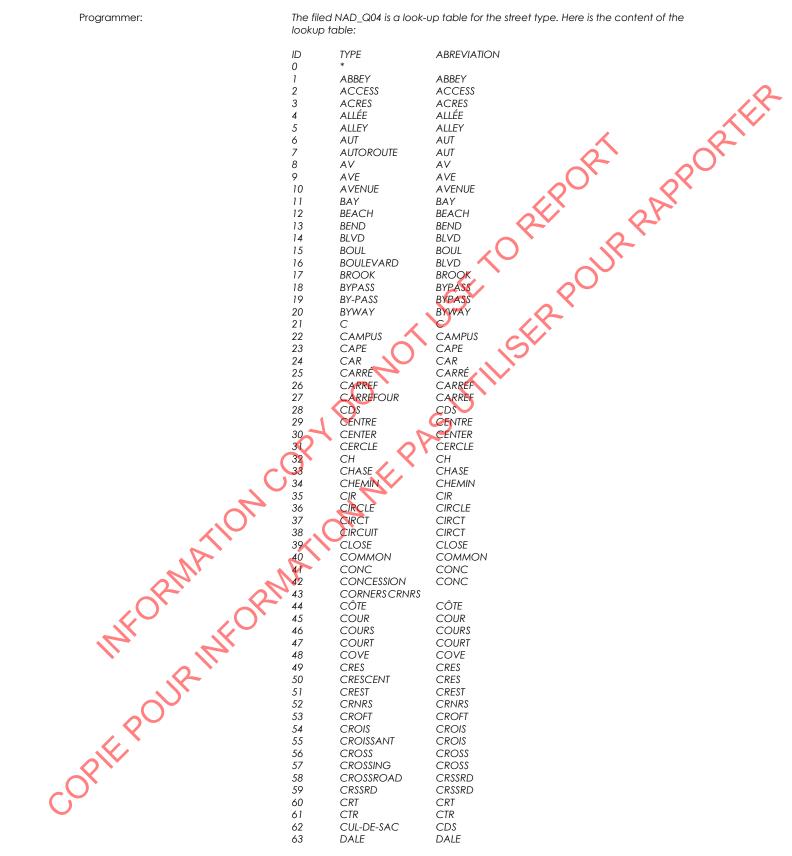
<u>INTERVIEWER</u>: Enter the civic suffix. If necessary, ask: (What is the civic suffix?)

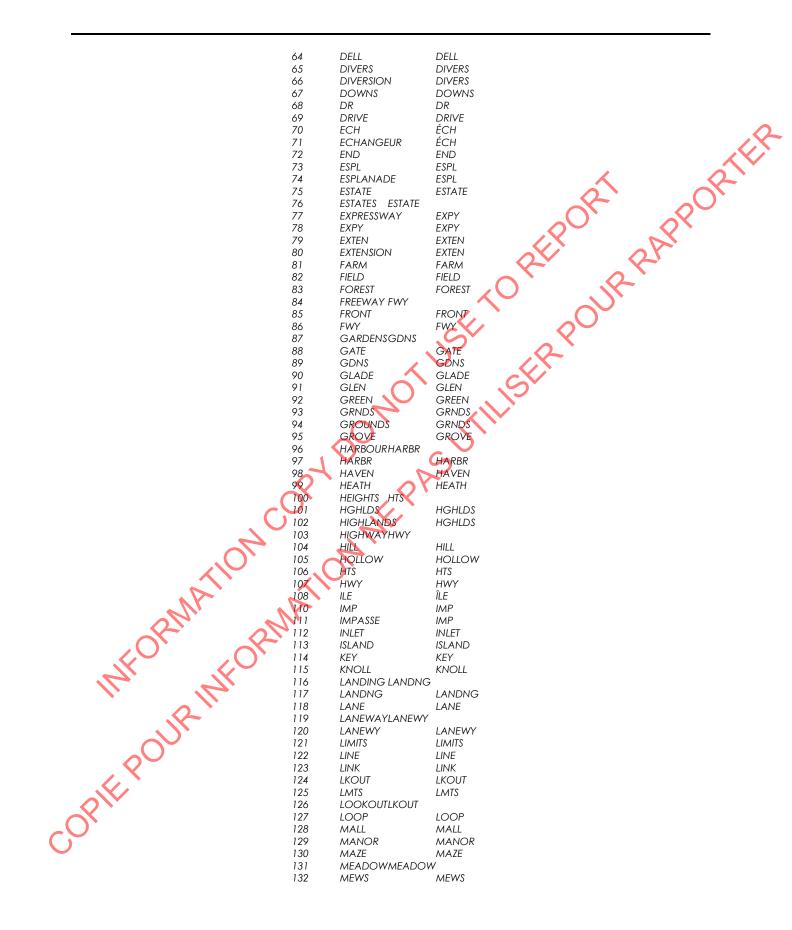




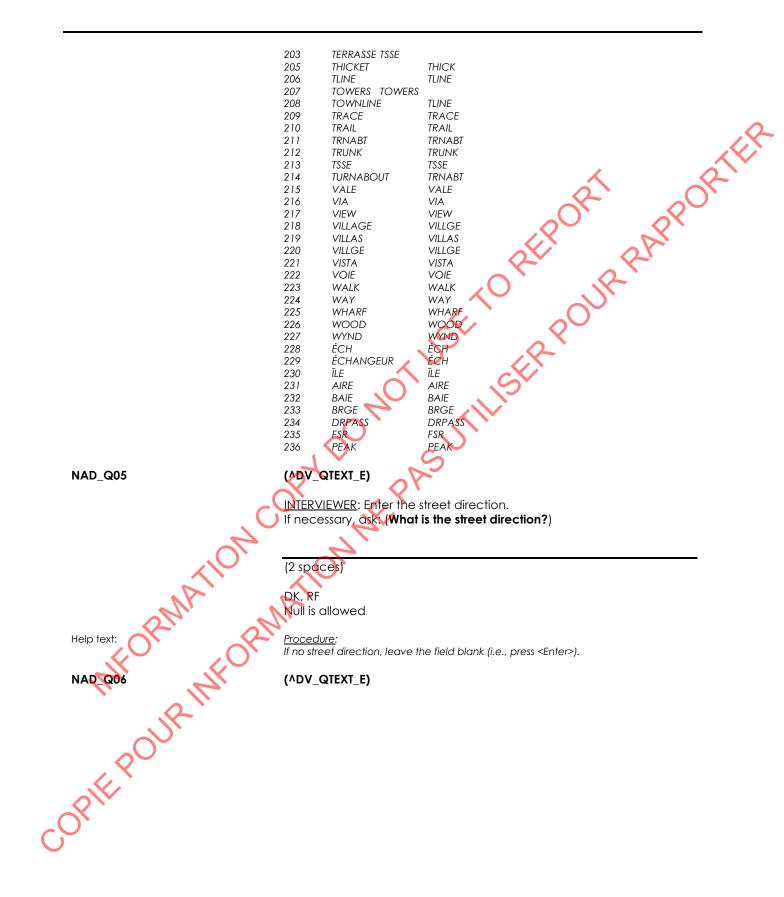


The filed NAD_Q04 is a look-up table for the street type. Here is the content of the



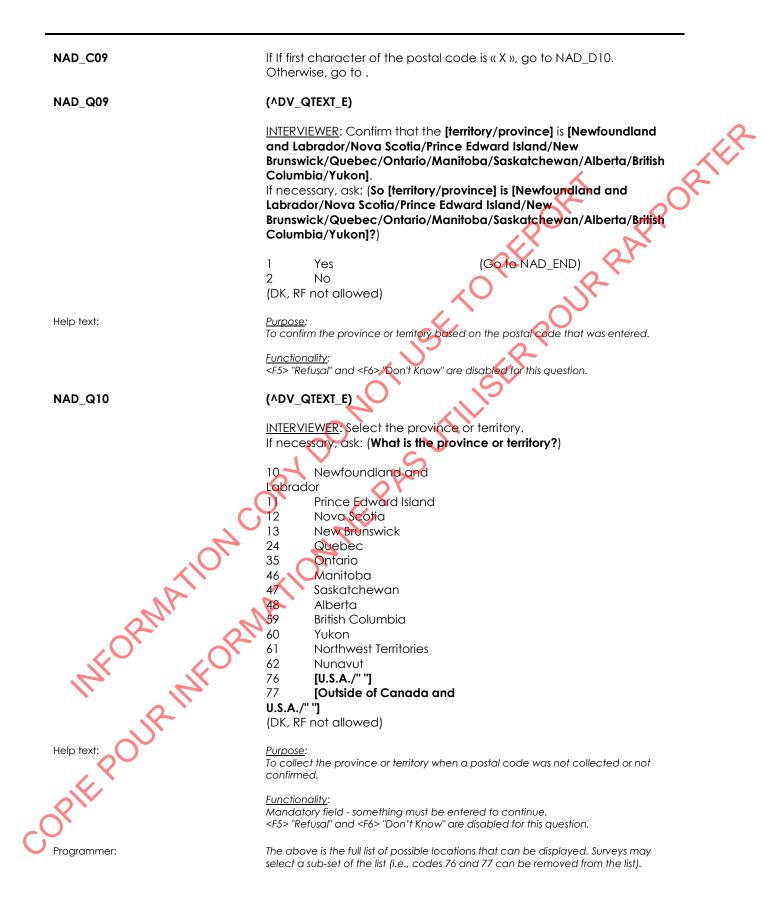


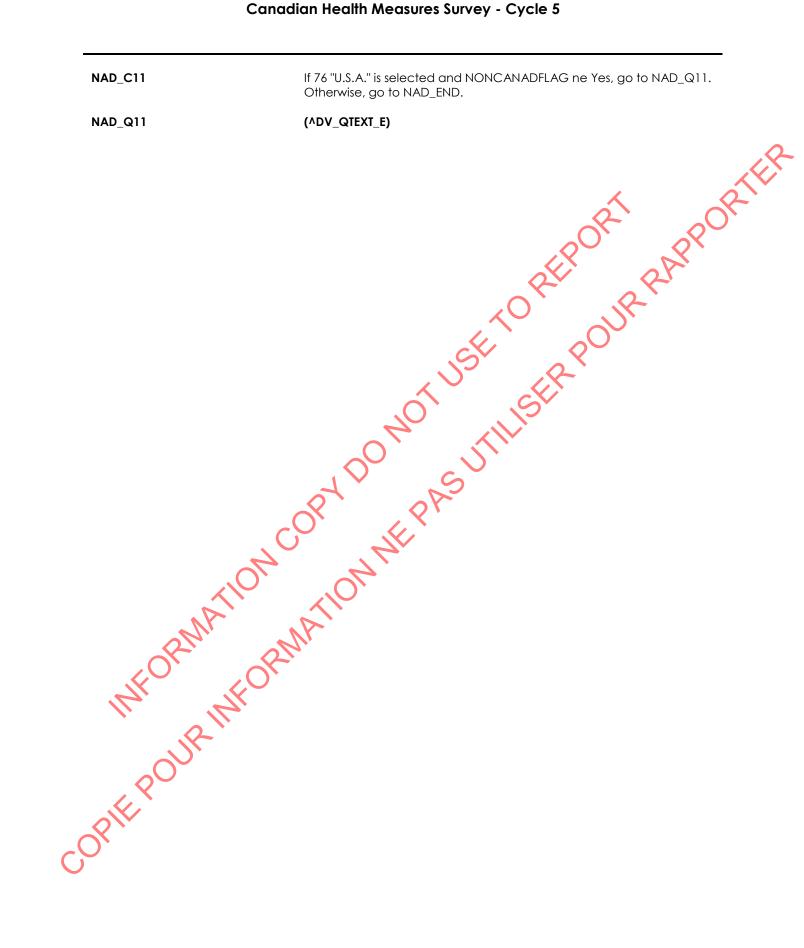


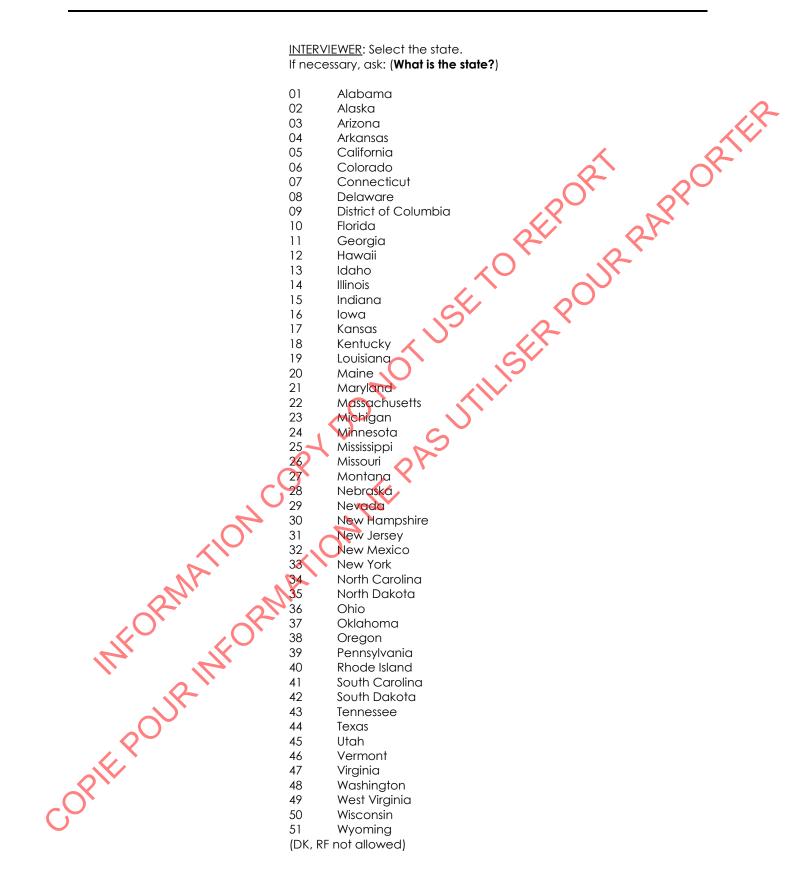


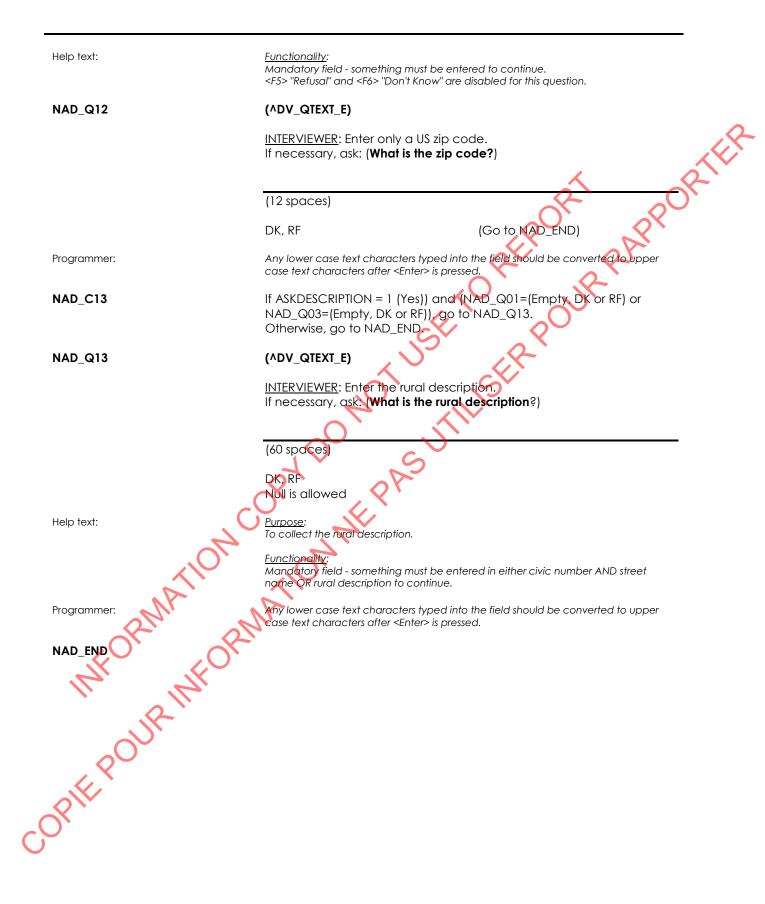
INTERVIEWER: Enter the apartment number. If necessary, ask: (What is the apartment number?)

	(6 spaces)
	DK, RF
	Null is allowed
Help text:	Procedure:
	If no apartment number, leave the field blank (i.e., press <enter>).</enter>
	Any lower area toyt aborrators typed into the field that do be converted to your
Programmer:	Any lower case text characters typed into the field should be converted to upper case text characters after <enter> is pressed.</enter>
NAD_Q07	(^DV_QTEXT_E)
	INTERVIEWER: Enter the city, town, village or municipality.
	If necessary, ask: (What is the city, town, village or municipality?)
	(35 spaces)
	(DK, RF not allowed)
Help text:	Functionality
	Mandatory field - something must be entered to continue.
	<f5> "Refusal" and <f6> "Don't Know" are disabled for this question.</f6></f5>
Programmer:	Any lower case text characters typed into the field should be converted to upper
rogrammer.	case text characters after <enter> is pressed.</enter>
NAD_Q08	
	INTERVIEWER: Enter the postal code. [Blank/If the address is outside
	Candda) press <enter>] If necessary, ask: (What is the postal code?)</enter>
A.	initicessory, ask. (What is the postal code:)
NFORM	(6 spaces)
	DK, RF (Go to NAD_Q10)
	Null is allowed
71 17	
<u>A</u>	Go to NAD_E08A
	<u>Procedure:</u> If the respondent is unsure or is unwilling to provide the full postal code, ask for the
	first three characters.
	If the address is outside of Canada, leave the field blank (i.e., press <enter>).</enter>
	Functionality:
Help text:	<u>Forceronality</u> . Several format edits are applied on the postal code entered.
$\bigcirc$	
Programmer:	Any lower case text characters typed into the field should be converted to upper
	case text characters after <enter> is pressed.</enter>









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VC_BEG	CurrentYear: Numeric year of current date
	CurrentMonth: Numeric month of current date CurrentDay: Numeric day of current date
	Conteniedy. Nomene day of conteni dale
	CurrentDate: Numeric date in CurrentYear/CurrentMonth/CurrentDay
	format 🧳
	CurrentTime: Numeric current time in HH:MM:SS format
	CurrentMonthE: English text of the current month
	CurrentMonthF: French text of the current month
	OneWeekAgoYear: Numeric year of date 7 days before the clinic visit
	OneWeekAgoMonth: Numeric month of date 7 days before the clinic
	visit
	<b>OneWeekAgoDay</b> : Numeric day of date 7 days before the clinic visit
	OneWeekAgoMonthE: English text of month 7 days before the clinic
	visit OneWeekAgoMonthF: French text of month 7 days before the clinic
	visit
	IF OneWeekAgoMonth = 1, THEN
	OneWeekAgoMonthE = "January"
	OneWeekAgoMonthF = "janvier"
	ELSE IF One Week Ago Month = 2, THEN
	OneWeekAgoMonthE = "February"
	OneWeekAgoMonthF = "février"
	ELSE F OneWeekAgoMonth = 3, THEN OneWeekAgoMonthE = "March"
	OneWeekAgoMonthF = "mars"
C	ELSE IF One WeekAgoMonth = 4, THEN
	OneWeekAgoMonthE = "April"
~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	OneWeekAgoMonthF = "avril"
	ELSE IF OneWeekAgoMonth = 5, THEN
	OneWeekAgoMonthE = "May" OneWeekAgoMonthF = "mai"
A	ELSE IF OneWeekAgoMonth = 6 , THEN
NI	OneWeekAgoMonthE = "June"
	OneWeekAgoMonthF = "juin"
	ELSE IF OneWeekAgoMonth = 7, THEN
	OneWeekAgoMonthE = "July"
	OneWeekAgoMonthF = "juillet" ELSE IF OneWeekAgoMonth = 8, THEN
	OneWeekAgoMonthE = "August"
A Contraction of the second se	OneWeekAgoMonthF = "août"
	ELSE IF OneWeekAgoMonth = 9, THEN
	OneWeekAgoMonthE = "September"
	OneWeekAgoMonthF = "septembre"
	ELSE IF OneWeekAgoMonth = 10, THEN OneWeekAgoMonth = "October"
	OneWeekAgoMonthE = "October" OneWeekAgoMonthF = "octobre"
optic pour intropy	ELSE IF OneWeekAgoMonth = 11, THEN
	OneWeekAgoMonthE = "November"
	OneWeekAgoMonthF = "novembre"
	OneWeekAgoMonthE = "December"





+ TwoMonthsAgoYear



MailBackYear: Numeric year of date 8 days after the clinic visit MailBackMonth: Numeric month of date 8 days after the clinic visit MailBackDay: Numeric day of date 8 days after the clinic visit

MailBackMonthE: English text of month 8 days after the clinic visit MailBackMonthF: French text of month 8 days after the clinic visit

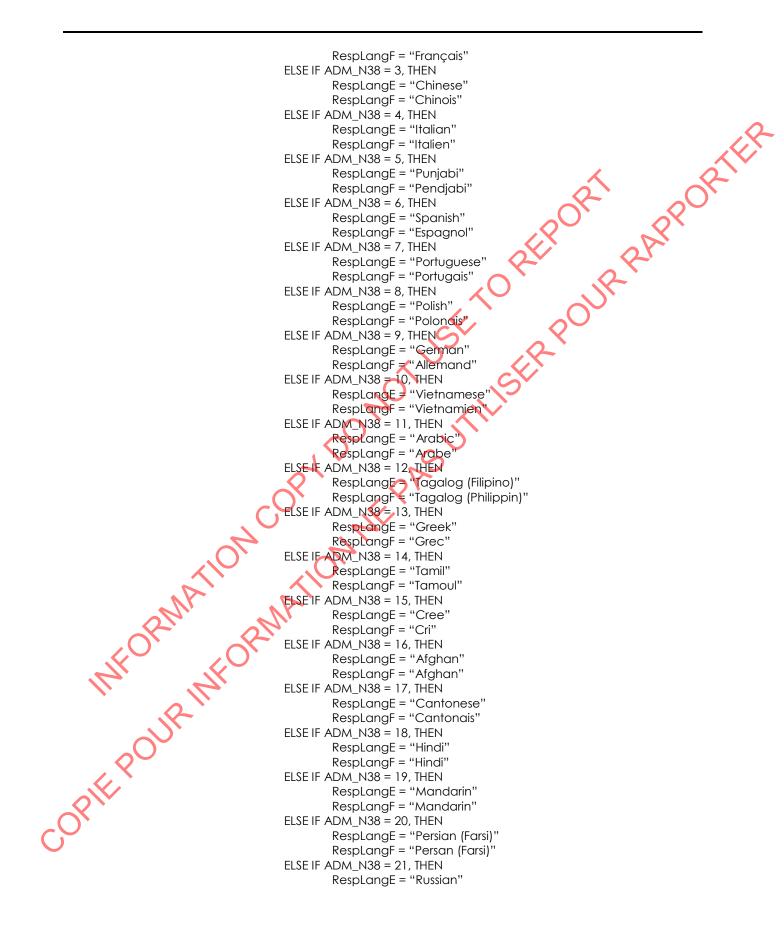
sit sit IF MailBackMonth = 1, THEN MailBackMonthE = "January" MailBackMonthF = "janvier" ELSE IF MailBackMonth = 2, THEN MailBackMonthE = "February" MailBackMonthF = "février" ELSE IF MailBackMonth = 3, THEN MailBackMonthE = "March" MailBackMonthF = "mars" ELSE IF MailBackMonth = 4, THEN MailBackMonthE = "April" MailBackMonthF = "avril" ELSE IF MailBackMonth = 5, THEN MailBackMonthE = "May" MailBackMonthF = "mai" ELSE IF MailBackMonth = 6, THEN MailBackMonthE = "Jupe MailBackMonthF = "juin" ELSE IF MailBackMonth = 7, THEN MailBackMonthE = "July" MailBackMonthF="juilet" ELSE IF MailBackMonth = 8, THEN MailBackMonthE = "August" MailBackMonthF = "août" WFORMATION INFORMATION OPIE POUR INFORM ELSE IF MailBackMonth = 9, THEN MailBackMonthE = "September" MailBackMonthF = "septembre"ELSE IF MailBackMonth = 10, THEN MailBackMonthE = "October" MailBackMonthF = "octobre" ELSE IF MailBackMonth = 11, THEN MailBackMonthE = "November" MailBackMonthF = "novembre" ELSE IF MailBackMonth = 12, THEN MailBackMonthE = "December" MailBackMonthF = "décembre" **ENDIF DateMailBackE:** MailBackMonthE + MailBackDav + "," + MailBackYear DateMailBackF: MailBackDay + MailBackMonthF + MailBackYear MailAddress: Mailing address of the respondent IF INTVLANG = 1 THEN First line of address = MA NUM MA STRT (and if MA APT is not blank: ", APT. " MA APT) ELSE

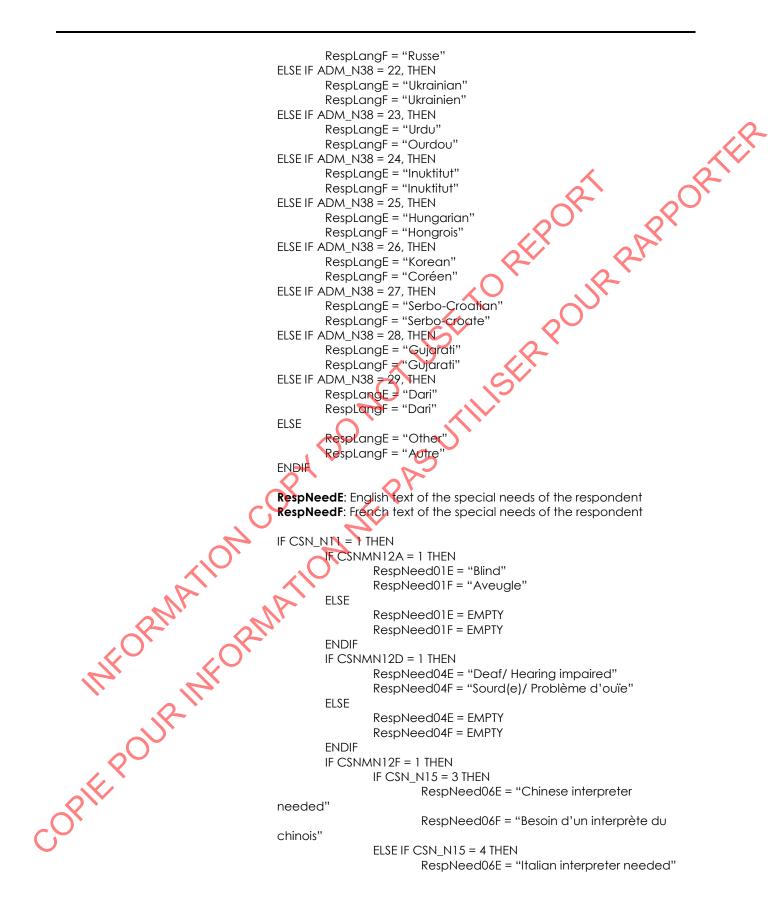
First line of address = MA_NUM MA_STRT (and if MA_APT is not blank: ", APP. " MA_APT) ENDIF

```
IF MA_PRN < 76 THEN
                                                    Second line of address = MA_CITY MA_PRA MA_PC
                                            ELSE IF MA_PRN = 76 THEN
                                                    Second line of address = MA_CITY MA_STA MA_ZIP
                                            ELSE
                                                    Second line of address = MA_CITY
                                            ENDIF
                                            HouseholdContact: HCFNAME + HCLNAME (separated by one space)
                                            RespondentName: FNAME + LNAME (separated by one space
                                            ShortRespName: Substring(LNAME, 1, 4) + Substring(FNAME, 1
                                            Notes:
                                            Omit any special characters e.g., apostrophe, space, period, dash.
                                            Instead, include subsequent characters [i.e., (LNAME, 5, x) and/or
                                            (FNAME, 4, x) where x is the number of special characters omitted].
                                            If LNAME has only 3 alphabetical characters? Substring(LNAME,1,3) +
                                            Substring(FNAME,1,4)
                                            If LNAME has only 2 alphabetical characters: Substring(LNAME,1,2) +
                                            Substring(FNAME, 1,5)
                                            If FNAME has less than the required alphabetical characters, leave the
                                            trailing characters blank.
                                            IntlangE: English text of language of application during the household
                                            interview (either English or French)
WHORMATION
MHORMATION
OPIE POUR INFORMA
                                            IntLangF: French text of language of application during the household
                                            interview (either English or French)
                                            IF INTVLANG = 1, THEN
                                                     htLanaE = "Enalish"
                                                    IntLangF = "Anglais"
                                                     IntLangE = "French"
                                                    IntLangF = "Français"
                                            ENDIF
                                            AppointmentE: English text of the selected type of clinic appointment
                                            AppointmentF: French text of the selected type of clinic appointment
                                            IF SELFAST = 1, THEN
                                                    AppointmentE = "FASTED"
                                                     AppointmentF = "\dot{A} JEUN"
                                            ELSE
                                                    AppointmentE = "NON-FASTED"
                                                     AppointmentF = "NON Å JEUN"
                                            ENDIF
                                            SessionE: English text of current session
                                            SessionF: French text of current session
```

IF 1 = 1 THEN SessionE = AppointmentE SessionF = AppointmentF ENDIF APPORTER DryRun: Indicator of whether the case is a dry run case IF Substring (CLINICID, 2, 2) = '03' THEN DryRun = 1ELSE DryRun = 3ENDIF Gender: letter code for sex of respondent IF SEX_Q01 = 1, THEN GenderE = "M" ELSE Gender = "F" **ENDIF** GenderE: English text for sex of responder GenderF: French text for sex of responden IF SEX Q01= 1, THEN GenderE = "Male" GenderF = "Masculin ELSE GenderE = "Female' "Féminin" GenderF = ENDIF Calculated Age. The calculated age of the respondent OPIE POUR INFOR If DAY, MONTH and YEAR all contain valid information: AGE [current year] - [date of birth year] ([date of birth month] > [current month]) (([date of birth month] = [current month]) × ([date of birth day] > [current day])) where: [current day], [current month] and [current year] correspond to the current/system date or the date provided on the survey's sample file and [date of birth day], [date of birth month] and [date of birth year] correspond to the date of birth If DAY is DK or RF and MONTH and YEAR contain valid information and MONTH is not equal to the [current month]: [current year] - [date of birth year] AGE = ([date of birth month] > [current month]) where: [current month] and [current year] correspond to month and year of the current/system date or the month and year of the date provided on the survey's sample file and [date of birth month] and

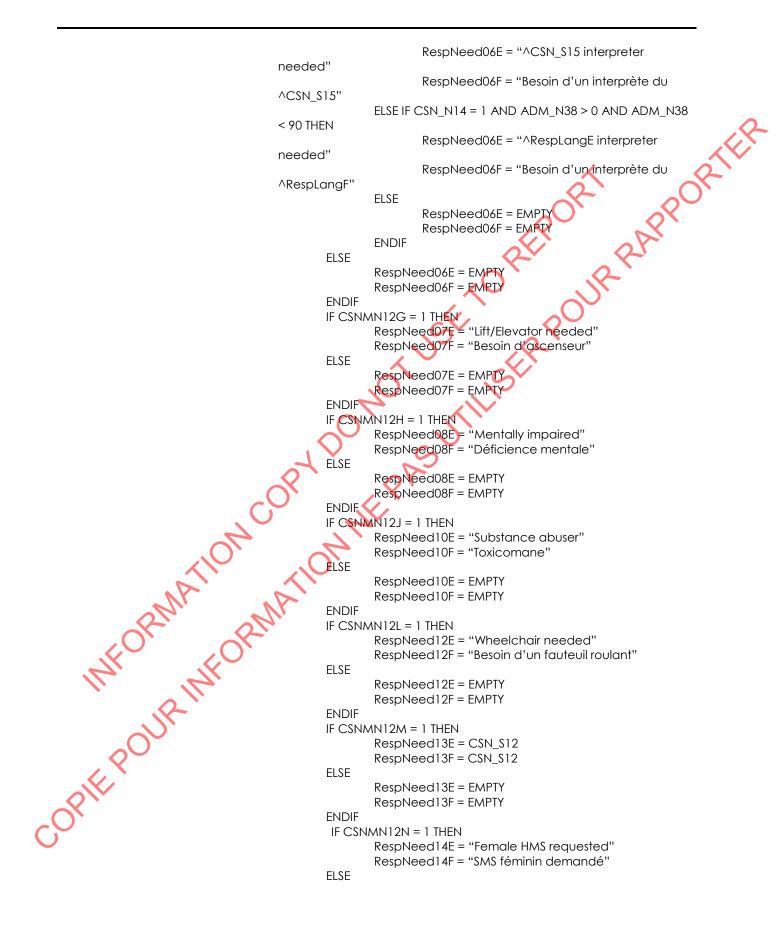
```
[date of birth year] correspond to the month and year of the date of
                                            birth
                                            LastCycleDays: The number of days since the first day of the
                                            respondents last menstrual cycle
                                            If DAY, MONTH and YEAR all contain valid information:
                                                                    [reference year] - [year oNast cycle]
                                            LastCycleDays =
                                            ([month of last cycle] > [reference month])
                                             (([month of last cycle] = [reference month]) ([day of last cycle])
                                            [reference day]))
                                            where: [reference day], [reference month] and [reference year]
                                            correspond to the current/system date or the date provided on the
                                            survey's sample file and [day of last cycle], [month of last cycle] and
                                            [year of last cycle] correspond to the first day of their last menstrual
                                            cycle
                                            Note: This uses the same logic as Age_Day
                                            PregnantE: English text of whether respondent is pregnant
                                            PregnantF: French text of whether respondent is pregnant
                                            IF PRS QN
                                                        🚽 , THEN
                                                    PregnantE = "Yes
                                                    PregnantF = "Qui"
                                            ELSE
                                                    PregnaptE¥"No"
MFORMATION
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                                                    PregnantF = "Non"
                                            ENDIF
                                            DiabetesE: English text of whether respondent has been diagnosed
                                            with diabetes
                                            DiabetesF: French text of whether respondent has been diagnosed
                                            with diabetes
                                            IF CCC Q51 = 1, THEN
                                                    DiabetesE = "Yes"
                                                    DiabetesF = "Oui"
                                            ELSE
                                                    DiabetesE = "No"
                                                    DiabetesF = "Non"
                                            ENDIF
                                            RespLangE: English text of the language of the Health component
                                            interview
                                            RespLangF: French text of the language of the Health component
                                            interview
                                            IF ADM N38 = 1, THEN
                                                    RespLangE = "English"
                                                    RespLangF = "Anglais"
                                            ELSE IF ADM_N38 = 2, THEN
                                                    RespLangE = "French"
```



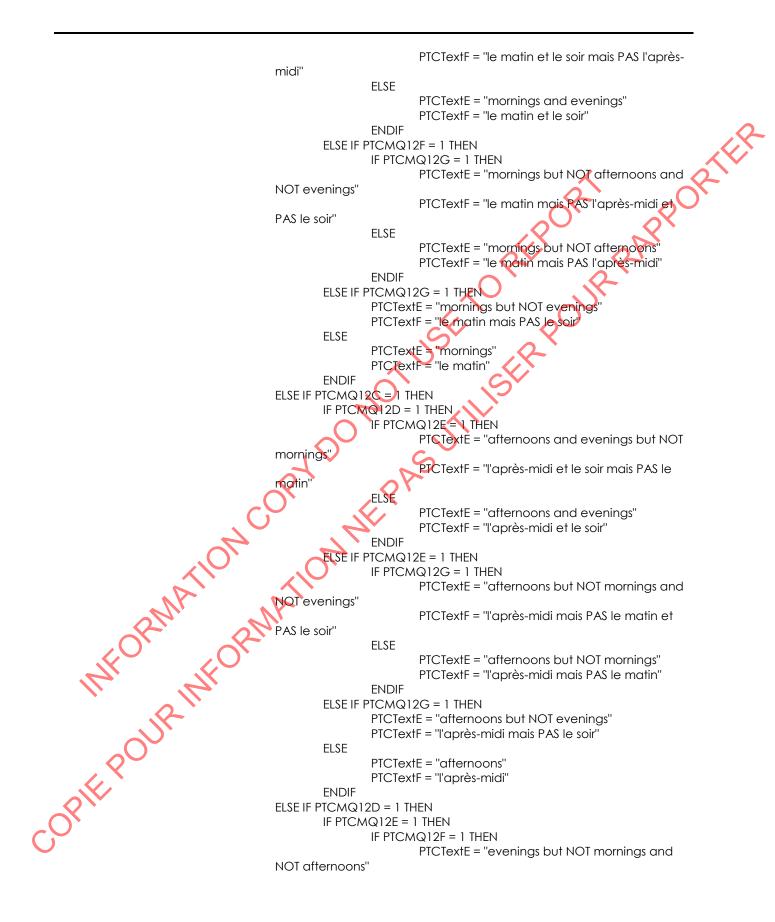


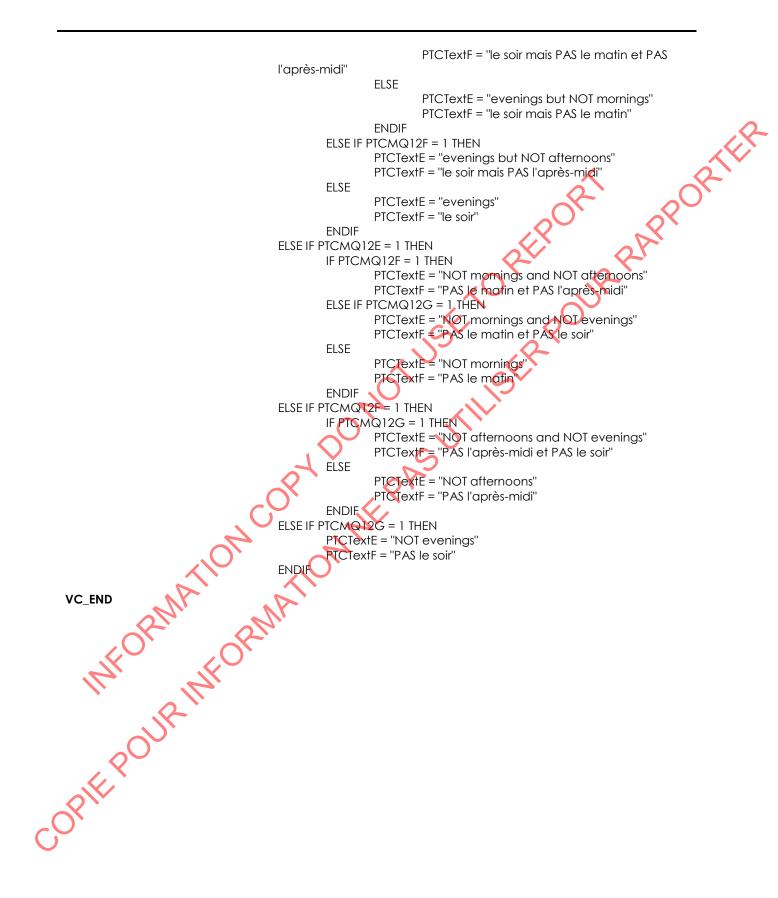
	l'italien"	RespNeed06F = "Besoin d'un interprète de
	1 Hallett	ELSE IF CSN_N15 = 5 THEN
		RespNeed06E = "Punjabi interpreter needed"
	pendjabi "	RespNeed06F = "Besoin d'un interprète du
	penajabi	ELSE IF CSN_N15 = 6 THEN
		RespNeed06E = "Spanish interpreter needed" 🛛 🔨 🧡
	11	RespNeed06F = "Besoin d'un interprète de
	l'espagnol"	ELSE IF CSN_N15 = 7 THEN
		RespNeed06E = "Portuguese interpreter
	needed"	
	portugais"	RespNeed06F = "Besoin d'un interprète du
	portuguis	ELSE IF CSN_N15 = 8 THEN
		RespNeed06E = "Polish interpreter needed"
	un el eur el elle ll	RespNeed06F = "Besoin d'un interprète du
	polonais"	ELSE IF CSN N 5 = 9 THEN
		RespNeed06E = "German interpreter
	needed"	
	l'allemand"	RespNeed06F="Besoin d'un interprète de
		ELSE IF CSN_N15 = 10 THEN
		RespNeed06E = "Vietnamese interpreter
	needed"	RespNeed06F = "Besoin d'un interprète du
	vietnamien"	
	\mathcal{A}	ELSE IF CSN_N15 = 11 THEN
) ` (RespNeed06E = "Arabic interpreter needed" RespNeed06F = "Besoin d'un interprète de
, U	l'arabe"	
~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	2	ELSE IF CSN_N15 = 12 THEN
	noodod"	RespNeed06E = "Tagalog (Filipino) interpreter
	needed"	RespNeed06F = "Besoin d'un interprète du
COPIE POUR INFORM	tagalog (philipp	opin)"
2N' - N	N	ELSE IF CSN_N15 = 13 THEN
		RespNeed06E = "Greek interpreter needed" RespNeed06F = "Besoin d'un interprète du
	grec"	
		ELSE IF CSN_N15 = 14 THEN
N. K		RespNeed06E = "Tamil interpreter needed" RespNeed06F = "Besoin d'un interprète du
R.	tamoul"	
		ELSE IF $CSN_N15 = 15$ THEN
		RespNeed06E = "Cree interpreter needed" RespNeed06F = "Besoin d'un interprète du
	cri"	
		ELSE IF CSN_N15 = 16 THEN
×.		RespNeed06E = "Afghan interpreter needed" RespNeed06F = "Besoin d'un interprète de
	l'afghan''	
$\mathbf{\nabla}$	<b>U</b>	ELSE IF CSN_N15 = 17 THEN
	poodod"	RespNeed06E = "Cantonese interpreter
	needed"	

canto	nais"	RespNeed06F = "Besoin d'un interprète du
		CSN_N15 = 18 THEN
		RespNeed06E = "Hindi interpreter needed"
hindi"		RespNeed06F = "Besoin d'un interprète du
	ELSE IF	CSN_N15 = 19 THEN
		RespNeed06E = "Mandarin interpreter
neede	)a	RespNeed06F = "Besoin d'un interprète du
mand		
	ELSE IF	CSN_N15 = 20 THEN RespNeed06E = "Persian (farsi) interpreter
neede	ed"	
	<i></i>	RespNeed06F = "Besoin d'un interprète du
persa	n (farsi)'' FISEIE	$CSN_N15 \neq 21$ THEN
		RespNeed06E = "Russian interpreter needed"
		RespNeed06F = "Besoin d'un interprète du
russe"	FLSE IF.	CSN_N15 = 22 THEN
	κ.	RespNeed06E € "Ukrainian interpreter
neede	∍d"	Pare Nacid (P "Parain d'un interprète de
l'ukrai	nien"	RespNeed06P= "Besoin d'un interprète de
	ELSE IF	CSN_N15 = 23 THEN
	$\sim$	RespNeed06E = "Urdu interpreter needed" RespNeed06F = "Besoin d'un interprète de
l'ourd		
$\sim$	ELSEIR	$CSN_N15 = 24$ THEN
		RespNeed06E = "Inuktitut interpreter needed" RespNeed06F = "Besoin d'un interprète de
l'inukt		
and the second s	ELSE IF	CSN_N15 = 25 THEN RespNeed06E = "Hungarian interpreter
need	ed"	
		RespNeed06F = "Besoin d'un interprète de
hong hong		CSN_N15 = 26 THEN
all' all'		RespNeed06E = "Korean interpreter needed"
corée	n"	RespNeed06F = "Besoin d'un interprète du
		C\$N_N15 = 27 THEN
11 167		RespNeed06E = "Serbo-Croatian interpreter
neede	}d"	RespNeed06F = "Besoin d'un interprète du
serbo-	croate "	
	ELSE IF	CSN_N15 = 28 THEN
		RespNeed06E = "Gujarati interpreter needed" RespNeed06F = "Besoin d'un interprète du
Gujar		
	ELSE IF	CSN_N15 = 29 THEN RespNeed06E = "Dari interpreter needed"
$c_{\mathcal{V}}$		RespNeed06F = "Besoin d'un interprète du
COPIE POUR INFORMATION Phone INFORMATION Corée neede serbo- Gujard dari"	<b></b>	
	ELSE IF	CSN_N15 = 90 THEN



```
RespNeed14E = EMPTY
                                                          RespNeed14F = EMPTY
                                                  ENDIF
                                                  IF CSNMN12O = 1 THEN
                                                         RespNeed15E = "Male HMS requested"
                                                                                                          SRIFF
                                                         RespNeed15F = "SMS masculin demandé"
                                                  ELSE
                                                          RespNeed15E = EMPTY
                                                          RespNeed15F = EMPTY
                                                  ENDIF
                                          RespNeedE = RespNeed01E RespNeed04E + RespNeed05E +
                                          RespNeed06E + RespNeed07E + RespNeed08E + RespNeed10E +
                                          RespNeed12E + RespNeed13E + RespNeed14E + RespNeed15E
                                          (separated by slashes)
                                          RespNeedF = RespNeed01F + RespNeed04F + RespNeed05F +
                                          RespNeed06F + RespNeed07F + RespNeed08F + RespNeed10F +
                                          RespNeed12F + RespNeed13F + RespNeed14F + RespNeed15F
                                          (separated by slashes)
                                          ELSE
                                                  RespNeedE = EMPTY
                                                  RespNeedF Z EMPTY
                                          ENDIF
                                          TelephoneNumber1: 1st 10-digit telephone number from household
                                          interview [in (613) 951-1234" format]
                                          Telephone Number2: 2nd 10-digit telephone number from household
                                          interview [in "(613) 951-1234" format]
                                          TelephoneNumber3: 3rd 10-digit telephone number from household
                                          interview [in "(613) 951 1234" format]
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                                          BestPhoneNumber; BTN_CODE + BTN_TEL [in "(613) 951-1234" format]
                                          PTCTextE: English text of preferred time to call
                                          PTCTextE French text of preferred time to call
                                          IFRICMQ12A =1 THEN
                                                  PTCTextE = "ANY TIME"
                                                  PTCTextF = "N'IMPORTE QUELLE HEURE"
                                          ELSE IF PTCMQ12B = 1 THEN
                                                  IF PTCMQ12C = 1 THEN
                                                         IF PTCMQ12D = 1 THEN
                                                                 PTCTextE = "ANY TIME"
                                                                 PTCTextF = "N'IMPORTE QUELLE HEURE"
                                                         ELSE IF PTCMQ12G = 1 THEN
                                                                 PTCTextE = "mornings and afternoons but NOT
                                          eveninas"
                                                                 PTCTextF = "le matin et l'après-midi mais PAS
                                          le soir"
                                                         ELSE
                                                                 PTCTextE = "mornings and afternoons"
                                                                 PTCTextF = "le matin et l'après-midi"
                                                         ENDIF
                                                  ELSE IF PTCMQ12D = 1 THEN
                                                         IF PTCMQ12F = 1 THEN
                                                                 PTCTextE = "mornings and evenings but NOT
                                          afternoons"
```





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