

Data Entry Done

Re-Entered

Participant ID

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HAPO FOLLOW-UP STUDY PHYSICAL MEASUREMENTS – CHILD

1. Visit date:	2 0 1 <u> </u> / <u> </u> / <u> </u> <u> </u> Year Mo Day
Urine Sample	
2. a. Was the urine sample collected? CHECK ONLY ONE BOX [Specimen cup, Bar-code label 606]	<input type="checkbox"/> Yes <input type="checkbox"/> No <i>(If No, SKIP to Question 3.)</i>
b. What time was the urine sample collected? (24-hour clock)	<u> </u> : <u> </u>
3. HAPO staff ID of person collecting urine sample:	<u> </u> <u> </u> <u> </u> <u> </u> <u> </u> <u> </u>
Blood Pressure	
4. Which arm was used to obtain blood pressure measurements? CHECK ONLY ONE BOX	<input type="checkbox"/> Right <input type="checkbox"/> Left
5. Was an Omron 705 electronic machine used to obtain blood pressure measurements? CHECK ONLY ONE BOX	<i>(If Yes, SKIP to Question 8.)</i> <input type="checkbox"/> Yes <input type="checkbox"/> No
6. Pulse obliteration pressure:	<u> </u> <u> </u> <u> </u> mmHg
7. Peak inflation pressure: [Pulse obliteration pressure + 30 mm Hg]	<u> </u> <u> </u> <u> </u> mmHg

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8. a. Seated arm blood pressure reading 1: [after sitting 5 minutes]	_____ / _____ mmHg
b. Heart rate (beats per minute):	_____
9. a. Seated arm blood pressure reading 2: [after sitting an additional 1-2 minutes]	_____ / _____ mmHg
b. Heart rate (beats per minute):	_____
10. a. Seated arm blood pressure reading 3: [after sitting an additional 1-2 minutes]	_____ / _____ mmHg
b. Heart rate (beats per minute):	_____
11. HAPO staff ID of person measuring blood pressure:	_____
Height	
12. Were shoes removed for height measurements? CHECK ONLY ONE BOX	<input type="checkbox"/> Yes <input type="checkbox"/> No
13. Is height measured in centimeters (cm) or inches (in)? CHECK ONLY ONE BOX	<input type="checkbox"/> cm <input type="checkbox"/> in
14. Height measurement:	
a. First measurement:	_____ . ____
b. Second measurement:	_____ . ____
<i>(If first and second measurements differ by ≤ 1.0 cm or 0.5 in, SKIP to Question 15.)</i>	
c. Third measurement:	_____ . ____
15. HAPO staff ID of person performing height measurements:	_____

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BOD POD	
16. Was BOD POD measurement completed?	<i>(If Yes, SKIP to Question 18.)</i> <input type="checkbox"/> Yes <input type="checkbox"/> No
17. Why was the BOD POD not completed? CHECK ONLY ONE BOX	
<input type="checkbox"/> Claustrophobia <input type="checkbox"/> Refused changing into a swimsuit or tight-fitting clothing <input type="checkbox"/> Equipment malfunction <input type="checkbox"/> Other	
<i>(If "Other", please specify: _____)</i>	
<i>(SKIP to Question 19.)</i>	
18. % Fat measurement from BOD POD:	___ . ___ %
19. Body mass (weight) measurement from BOD POD in kg:	_____ . _____ kg
20. HAPO staff ID of person completing BOD POD measurements:	_____

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Waist Circumference

21. Waist circumference measurement at top of iliac crest:

a. First measurement: _____ . __ cm

b. Second measurement: _____ . __ cm

(If first and second measurements differ by ≤ 1.0 cm, SKIP to Question 22.)

c. Third measurement: _____ . __ cm

22. Waist circumference measurement at midpoint between lowest rib and iliac crest:

a. First measurement: _____ . __ cm

b. Second measurement: _____ . __ cm

(If first and second measurements differ by ≤ 1.0 cm, SKIP to Question 23.)

c. Third measurement: _____ . __ cm

Arm Circumference

23. Arm circumference measurement at midpoint of upper arm:

a. First measurement: _____ . __ cm

b. Second measurement: _____ . __ cm

(If first and second measurements differ by ≤ 1.0 cm, SKIP to Question 24.)

c. Third measurement: _____ . __ cm

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Skinfolds	
<p>24. Triceps skinfold measurements:</p> <p>a. First measurement: _____ . ____ mm</p> <p>b. Second measurement: _____ . ____ mm</p> <p><i>(If first and second measurements differ by ≤ 1 mm, SKIP to Question 25.)</i></p> <p>c. Third measurement: _____ . ____ mm</p>	
<p>25. Subscapular skinfold measurements:</p> <p>a. First measurement: _____ . ____ mm</p> <p>b. Second measurement: _____ . ____ mm</p> <p><i>(If first and second measurements differ by ≤ 1 mm, SKIP to Question 26.)</i></p> <p>c. Third measurement: _____ . ____ mm</p>	
<p>26. Suprailiac skinfold measurements:</p> <p>a. First measurement: _____ . ____ mm</p> <p>b. Second measurement: _____ . ____ mm</p> <p><i>(If first and second measurements differ by ≤ 1 mm, SKIP to Question 27.)</i></p> <p>c. Third measurement: _____ . ____ mm</p>	
<p>27. HAPO staff ID of person completing waist circumference, arm circumference, and skinfold measurements:</p>	_____

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Pubertal Assessment	
<p>28. Is the child male or female? CHECK ONLY ONE BOX</p> <p><i>(If Female, SKIP to Question 34.)</i></p>	<p><input type="checkbox"/> Male</p> <p><input type="checkbox"/> Female</p>
<p>29. Self-assessed genitalia using pictograms: CHECK ONLY ONE BOX</p>	<p><input type="checkbox"/> Tanner Stage 1</p> <p><input type="checkbox"/> Tanner Stage 2</p> <p><input type="checkbox"/> Tanner Stage 3</p> <p><input type="checkbox"/> Tanner Stage 4</p> <p><input type="checkbox"/> Tanner Stage 5</p> <p><input type="checkbox"/> Child refused</p>
<p>30. Self-assessed pubic hair using pictograms: CHECK ONLY ONE BOX</p>	<p><input type="checkbox"/> Tanner Stage 1</p> <p><input type="checkbox"/> Tanner Stage 2</p> <p><input type="checkbox"/> Tanner Stage 3</p> <p><input type="checkbox"/> Tanner Stage 4</p> <p><input type="checkbox"/> Tanner Stage 5</p> <p><input type="checkbox"/> Child refused</p>
<p>31. Genitalia Tanner stage assessed by trained medical person using visual inspection: CHECK ONLY ONE BOX</p>	<p><input type="checkbox"/> Tanner Stage 1</p> <p><input type="checkbox"/> Tanner Stage 2</p> <p><input type="checkbox"/> Tanner Stage 3</p> <p><input type="checkbox"/> Tanner Stage 4</p> <p><input type="checkbox"/> Tanner Stage 5</p> <p><input type="checkbox"/> Child refused</p>
<p>32. Pubic hair Tanner stage assessed by trained medical person using visual inspection: CHECK ONLY ONE BOX</p>	<p><input type="checkbox"/> Tanner Stage 1</p> <p><input type="checkbox"/> Tanner Stage 2</p> <p><input type="checkbox"/> Tanner Stage 3</p> <p><input type="checkbox"/> Tanner Stage 4</p> <p><input type="checkbox"/> Tanner Stage 5</p> <p><input type="checkbox"/> Child refused</p>

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33. Testicular volume assessment by trained medical person using orchidometer:

a. Right testicle:

CHECK ONLY ONE BOX

- 1-2 ml
- 3 ml
- 4 ml
- 5 ml
- 6 ml
- 8 ml
- 10 ml
- 12 ml
- 15 ml
- 20 ml
- 25 ml
- Undescended
- Known to be absent
- Child refused

b. Left testicle:

CHECK ONLY ONE BOX

- 1-2 ml
- 3 ml
- 4 ml
- 5 ml
- 6 ml
- 8 ml
- 10 ml
- 12 ml
- 15 ml
- 20 ml
- 25 ml
- Undescended
- Known to be absent
- Child refused

NOTE: If testicle is undescended, the mother should be instructed to contact the child's health care provider.

(SKIP to Question 36)

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<p>34. Self-assessed Tanner stage using pictograms: CHECK ONLY ONE BOX</p>	<p><input type="checkbox"/> Tanner Stage 1 <input type="checkbox"/> Tanner Stage 2 <input type="checkbox"/> Tanner Stage 3 <input type="checkbox"/> Tanner Stage 4 <input type="checkbox"/> Tanner Stage 5 <input type="checkbox"/> Child refused</p>
<p>35. Tanner stage assessment by trained medical person:</p> <p>a. Right breast: CHECK ONLY ONE BOX</p> <p>b. Left breast: CHECK ONLY ONE BOX</p>	<p><input type="checkbox"/> Tanner Stage 1 <input type="checkbox"/> Tanner Stage 2 <input type="checkbox"/> Tanner Stage 3 <input type="checkbox"/> Tanner Stage 4 <input type="checkbox"/> Tanner Stage 5 <input type="checkbox"/> Child refused</p> <p><input type="checkbox"/> Tanner Stage 1 <input type="checkbox"/> Tanner Stage 2 <input type="checkbox"/> Tanner Stage 3 <input type="checkbox"/> Tanner Stage 4 <input type="checkbox"/> Tanner Stage 5 <input type="checkbox"/> Child refused</p>
<p>36. HAPO staff ID of person completing pubertal assessment:</p>	<p>_____</p>
<p>37. HAPO staff ID of person transcribing pubertal assessments from Pubertal Assessment Tool Kit to Physical Measurements – Child form:</p>	<p>_____</p>
Data Entry Completion	
<p>38. HAPO staff ID of person entering data into Data Entry System:</p>	<p>_____</p>