Persons using assistive technology may not be able to fully access information in this file. For assistance, e-mail niddk-cr@imsweb.com. Include the Web site and filename in your message.

Demographic Information

Study ID #: ☐-☐☐-☐☐☐

1. Date of consent (mm/dd/yyyy) _____ Date

2. Do you describe yourself as Hispanic?
2 ○ No 1 ○ Yes 9 ○ Refuse

3. What is the highest education level you have completed?
1 ○ 0 - 6 years
2 ○ 7 - 9 years
3 ○ Some high school
4 ○ High school diploma or GED
5 ○ Vocational school or some college
6 ○ College degree
7 ○ Professional or graduate degree
8 ○ Other
9 ○ Refuse

3a. If highest education is marked "Other", please specify: _____

4. Have you smoked at least 100 cigarettes in your entire life?
2 ○ No
1 ○ Yes
3 ○ Not sure
9 ○ Refuse

5. Have you ever been on peritoneal dialysis?
2 ○ No 1 ○ Yes 3 ○ Not sure

6. Have you ever had a kidney transplant?
2 ○ No 1 ○ Yes 3 ○ Not sure