## Web-based Follow-Up Survey Questions (WFU01)

For	m Version:	0	8 /	0	1 / 1	<u>3</u>	
WE	B # (automated):						
The con imp ent	Icome to the CKiD Follow-up Sy survey should take about 5 to appensated for your time. The infortant in helping us evaluate cher your date of birth.  The strict of the st	10 mi forma	nutes to	cor ı pro	mplete. You wi ovide is confid	II be ential and very	
					 (MM/DD/Y`	YYY)	
	hday: ee of Survey Entry (automated):				(MM/DD/Y`	,	
The follo	wing questions ask about transpla	nts th	at you m	ay h	ave had.		
Transpla	antation:						
B1.	Have you ever had a kidney trans Yes No Don't Know			2	(Skip to B2) (Skip to B2)		
B1a.	How many kidney transplants ha One Two Three or More Don't Know			2			
B1b.	Was your most recent kidney train a deceased donor? Living Donor – Related Living Donor – Not Related Deceased Donor Don't Know	ed		1 2	ig relative, a livi	ng non-relative, or fr	om
B1c.	Date of Most Recent Kidney Transplant: Please enter the date of your transplant. If you do not know the month or day, please enter the year. Otherwise, select "I Don't Know/I'm not Sure."				O Y Y Y		

	Web-based Follow-Up Sur	vey (	Questions (WF	FU01)			
B1d.	When you see your doctor about your kidney transplant, how does he/she say it's doing? If you have more than one kidney transplant, please answer based on your most recent transplant.						
	The kidney function is good/excellent	(Skip to B5)					
	The kidney is OK but I might need another tra			· · /			
	near future (in 1 year or so)	•					
	The kidney is not working well and I am on di	alysis	s 2				
	I Don't know/I'm not sure						
B2.	In the past year, have you talked about kidney tracare provider?	anspl	ant with your ner	phrologist or health			
	Yes	1					
	No Don't Know		(Skip to B5) (Skip to B5)				
B3.	Which donor option(s) has/have been discussed?						
		Y	es No	Don't Know			
	Living Donor	1	2	-8			
	Transplant Wait List/Deceased Donor	1	2	-8			
B4. Have you been listed for deceased donor transplantation, in other words, are you transplant waiting list?							
	Yes		(OL: - ( - DE)				
	No		(Skip to B5)				
	Don't Know	0	(Skip to B5)				
	B4a. Date activated on the waiting list:						
	Please enter the date you were activated on	M	M D D	Y Y Y Y			
	the waiting list. If you do not know the month or day, please enter the year. Otherwise, select "I Don't know/I'm not sure."	ΙD	on't know/l'm no	t sure8			
The fo	llowing questions ask about transplants that you m	ay ha	ave had.				
Dialys	iis:						
B5.	Have you ever been on dialysis?	1					
	Yes No		(Skip to B6)				
	Don't Know		(Skip to B6)				
	DOIT CITIOW	. •	(O.l.p to Do)				

Participant ID: \_\_\_\_ - \_\_\_ - \_\_\_\_

B5a. What type of dialysis did you use most recently:

			Participant ID: WEB #:	
		Web-based Follow-Up Sเ	urvey Questions (WFU01)	
		Hemodialysis (cleansing the blood outsid Peritoneal Dialysis (cleansing the bl patient's own body tissues inside the bod Don't Know	lood using the day) 2	
B5I	B5b.	Date Most Recent Dialysis was Started:	$\frac{1}{M} \frac{1}{M} \frac{1}{D} \frac{1}{D} \frac{1}{Y} \frac{1}{Y} \frac{1}{Y} \frac{1}{Y} \frac{1}{Y}$	
		Please enter the date your most recent	M M D D Y Y Y Y	
		dialysis started. If you do now know the month or day, please enter the year. Otherwise, select "I Don't know/I'm not sure."	I Don't Know/I'm Not Sure8	
	B5c.	Are you on dialysis right now?		
		Yes		
		No	-	
		Don't Know	8	
B6.	In the	e past year, have you talked about dialysis	with your nephrologist or health care provider?	
		Yes	1	
		No		
		Don't Know	CONFIRMATION PAGE)8 (SKIP TO CONFIRMATION PAGE)	
B7.	What	type of dialysis was planned? Hemodialysis (cleansing the blood outsid Peritoneal Dialysis (cleansing the blood upatient's own body tissues inside the bod No Decision yet	using the dy) 2 9	