

Entered: __/__/20__
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Initials: _____

For office use only.

Modifiable Activity Questionnaire (MAQ) – Version 09/01/2010 FROMV

Patient ID _____ - _____ - _____ ID

Form Completion Date __/__/20__
mm dd yy
MAQDAT

Certification number: _____ CERT

Visit: __ VISIT

Was this MAQ administered in-person? 0. No 1. Yes MAQIPV

READ: I'd like to know about the physical activities that you have done outside of work during the **past 4 weeks**. When I read an activity please let me know if you have done that activity at least once in the **past four weeks** for at least 10 continuous minutes at a time. It may be helpful to follow along by looking at this list of activities (*give subject handout*) as I read them.

		Frequency (times/month)	Duration (minutes)
		In the past four weeks how many times have you done this activity? <i>If reported as average times/wk, multiple by 4.</i>	In the past four weeks , during a typical time when you did_____, what is the average <u>number of minutes</u> that it usually lasted each time?
MAQWGT	Weight lifting/strength training (e.g. free weight, nautilus or universal-type)	MAQWGTF	MAQWGTD
MAQCIR	Circuit training (e.g. Curves/Cardio glide)	MAQCIRF	MAQCIRD
MAQCAL	Calisthenics (e.g. jumping jacks, sit-ups, push-ups, pull-ups, squats,)	MAQCALF	MAQCALD
MAQSTEP	Stepper (e.g. Stairmaster)/Stair climbing	MAQSTEPF	MAQSTEPD
MAQELI	Elliptical cross trainer	MAQELIF	MAQELID
MAQSKI	Skier (e.g. Nordic track)	MAQSKIF	MAQSKID
MAQAERO	Aerobic dance/Step aerobics/Zumba/ Kick boxing (in gym or w/tape)	MAQAEROF	MAQAEROD
MAQWAT	Water aerobics/Aqua jogging/Water calisthenics	MAQWATF	MAQWATD
MAQSWIM	Swimming (laps, snorkeling)	MAQSWIMF	MAQSWIMD
MAQPIL	Pilates/Power Abs	MAQPILF	MAQPILD
MAQYOGA	Yoga	MAQYOGAF	MAQYOGAD
MAQSTR	Stretching	MAQSTRF	MAQSTRD
MAQJOG	Jogging/Running (outdoor, indoor)	MAQJOGF	MAQJOGD
MAQHIK	Hiking	MAQHIKF	MAQHIKD
MAQWALK	Walking (not to work; outdoor, indoor, treadmill; with or without weights)	MAQWALKF	MAQWALKD
MAQBIKE	Bicycling (not to work; indoor, outdoor)/Spin class	MAQBIKEF	MAQBIKED
MAQWII	Wii fit/Wii sports	MAQWIIF	MAQWIID
MAQDANC	Dancing (e.g. salsa, line, ballroom, club)	MAQDANCF	MAQDANCD
MAQHOU	Heavy housecleaning (e.g. mopping, vacuuming, scrubbing walls)	MAQHOUF	MAQHOU D
MAQYARD	Heavy gardening/yard work (e.g. cutting wood, pruning trees)	MAQYARDF	MAQYARDD

1.1 Subject did none of these activities over the past 4 weeks. **MAQNONE**

2. Have you done any other activities for exercise in the **past four weeks** for at least 10 continuous minutes at a time? Please look at the handout to help you remember activities you might have done. **MAQMORE**

0. No (Skip to item 3) 1. Yes (Ask subject to name activities; do not read list.)

If yes,

		Frequency	Duration
		(times/month)	(minutes)
QBAC	Backpacking	QBACF	QBACD
QBAD	Badminton	QBADF	QBADD
QBASK	Basketball	QBASKF	QBASKD
QBASE	Baseball	QBASEF	QBASED
QBOX	Boxing/Punching bag	QBOXF	QBOXD
QBOWL	Bowling	QBOWLF	QBOWLD
QCAN	Canoe/Kayaking/ Rowing	QCANF	QCAND
QFISH	Fishing	QFISHF	QFISHD
QFOOT	Football	QFOOTF	QFOOTD
QFRIS	Frisbee, general, (not ulti te)	QFRISF	QFRISD
QGOLF	Golf	QGOLFF	QGOLFD
QHBALL	Handball/Raquetball/Squash	QHBALLF	QHBALLD
QHOR	Horseback riding	QHORF	QHORD
QHUNT	Hunting	QHUNTF	QHUNTD
QSHOE	Horseshoes	QSHOEF	QSHOED
QJROP	Jump roping	QJROPF	QJROPD
QLACR	Lacrosse	QLACRF	QLACRD
Q RT	rtial Arts	Q RTF	Q RTD
QGOLF	Miniature golf	QGOLFF	QGOLFD
QPING	Ping pong (table tennis)	QPINGF	QPINGD
QRCLI	Rock climbing	QRCLIF	QRCLID
QSAIL	Sailing or paddle boat	QSAILF	QSAILD
QSOC	Soccer	QSOCF	QSOCD
QSKAT	Skating (ice/roller)/Rollerblading	QSKATF	QSKATD
QSNOW	Snow skiing	QSNOWF	QSNOWD
QSBALL	Softball	QSBALLF	QSBALLD
QTAI	Tai Chi	QTAIF	QTAID
QTEN	Tennis (platform tennis)	QTENF	QTEND
QVOL	Volleyball	QVOLF	QVOLD
QWRE	Wrestling	QWREF	QWRED
QOTH1	Other 1, Specify: _____	QOTH1F	QOTH1D
QOTH2	Other 2, Specify: _____	QOTH2F	QOTH2D

3. In the **past four weeks**, outside of work on average how many HOURS per DAY did you:

3.1 use a computer or play computer games (outside of work): **__MAQPCH__** hr. **__MAQPCM__** min.

3.2 sit and watch TV or videos (outside of work): **__MAQTVH__** hr. **__MAQTVM__** min.

4. Have you had a job for at least a week in the **past four weeks**? Yes No **MAQJOB**

IF YES: List all jobs that the individual held over the past month for at least a week in the table below. When you are done completing the table for those jobs, check total hours of work for all jobs combined. If less than 80 hours (20 hr/week), assess remainder of time (160 hours minus hours working) as student, home maker, retired or unemployed.

IF NO: List job as student, homemaker, retired, disabled, or unemployed and select appropriate code. Enter 4 weeks for duration, NA for walking or biking to work, and 5 days, 8 hours for schedule. Then ask: "During a typical day for you at home from 9am to 5pm, how many of those 8 hours would I find you sitting? You mentioned that you usually sit for ___ of your 8 hours at home. What activities are you doing the other ___ hours when not sitting?"

Job Name	Job Code	In past 4 weeks...	Walk or bike to work?	Average job schedule over past month		Avg. hrs. sitting at work	Job category when not sitting		
		Weeks (1-4)	Mins/day roundtrip	Days/week	Hours/day	Hours/day	A	B	C
MAQJA1	MAQJB1	MAQJC1	MAQJD1	MAQJE1	MAQJF1	MAQJG1	MAQJH1		
MAQJA2	MAQJB2	MAQJC2	MAQJD2	MAQJE2	MAQJF2	MAQJG2	MAQJH2		
MAQJA3	MAQJB3	MAQJC3	MAQJD3	MAQJE3	MAQJF3	MAQJG3	MAQJH3		
MAQJA4	MAQJB4	MAQJC4	MAQJD4	MAQJE4	MAQJF4	MAQJG4	MAQJH4		

JOB CODES: Ask participant to describe job. Do no read choices.

Not employed outside of the home:

- 1. Student
- 2. Home Maker
- 3. Retired
- 4. Disabled
- 5. Unemployed

Employed (or volunteer):

- 6. Armed Services
- 7. Office Worker/Telecommuter
- 8. Non-Office Worker

JOB CATEGORIES: Ask participant to describe job activities during **non-sitting** time. Do no read choices.

<u>Category A</u>	<u>Category B</u>	<u>Category C</u>
(includes all sitting activities)	(includes most indoor activities)	(heavy industrial work, outdoor construction, farming)
Sitting	Carrying light loads	Carrying moderate to heavy loads
Standing still w/o heavy lifting	Continuous walking	Heavy construction
Light cleaning – ironing, cooking, washing, dusting	Heavy cleaning – mopping, sweeping, scrubbing, vacuuming	Farming – hoeing, digging, mowing, raking
Driving a bus, taxi, tractor	Gardening – planting, weeding	Digging ditches, shoveling
Jewelry making/weaving	Painting/Plastering	Chopping (ax), sawing wood
General office work	Plumbing/Welding	Tree/pole climbing
Occasional/short distance walking	Electrical work	Water/Coal/Wood hauling

5. Were the **past four weeks** reflective of your usual activity level? 0. No 1. Yes **ACTLEV**

Ask these questions to fill in the occupation table:

- Please tell me the names of all jobs that you have had over the past month for at least a week.
 - Record job name. From job name YOU assign job code (don't read choices).
 - Go through entire row of table for first job before moving on to 2nd...
- How many weeks have you worked as a _____ over the last four weeks?
- When you work as a _____, do you usually bike or walk to work as all or part of your commute?
 - If yes, How many minutes do you spend walking/biking to and from work each day?
 - So on average you spend a total of ____ minutes walking/biking to and from work each day. That would be ____ (divide by 2) minutes each way.
- On average, over the past month how many days per week have you worked as a _____?
- And, on average, how many hours per day?
 - Multiple days and hours to get total hours per week. Don't record this, just use to confirm you have correct number of days and hours per day:
 - So on average you spent a total of __ hours per week at this job?
- In your job as a _____, you mentioned that you worked an average of ____ hours per day. In a typical day for you in your job as a _____, how many of those ____ hours would I find you sitting?
- You mentioned that you usually sit for ____ of your ____ hours in your job as a _____. What are you doing when not sitting? (record job category based on response)