

General Deviations

1. **Was the order of testing for the day reversed (bladder testing was done before urethral testing)?**
 - No
 - Yes

2. **Did the participant consume over-the-counter analgesics (NSAIDs, acetaminophen), muscle relaxants, within 24 hours prior to testing?**
 - No
 - Yes
 - Unknown

3. **Did the participant consume over the counter nasal decongestants or anticholinergics such as (pseudoephedrine, phenylephrine, diphenhydramine) one week prior to testing?**
 - No
 - Yes
 - Unknown

4. **Did the participant consume alcohol within 24 hours prior to testing?**
 - No
 - Yes
 - Unknown

5. **Did the participant consume caffeine within 6 hours prior to testing?**
 - No
 - Yes
 - Unknown

6. **Did the participant use nicotine within 2 hours prior to testing?**
 - No
 - Yes
 - Unknown