

24-Hour Recall

A. 24-Hour Recall

A1

During waking hours today, how many times did you urinate?

- 3 or fewer times
- 4-7 times
- 8-10 times
- 11 or more times

#	Field Name	Lookup Set	Type	Length	Range Checks															
1	QUrinateWake	<p><i>Name:</i> UrineWake24Hr <i>SASFmt:</i> UrineWake24Hr</p> <table border="1"> <tr> <th>Val</th> <th>Text</th> <th>Culture Suppression</th> </tr> <tr> <td>0</td> <td>3 or fewer times</td> <td></td> </tr> <tr> <td>1</td> <td>4-7 times</td> <td></td> </tr> <tr> <td>2</td> <td>8-10 times</td> <td></td> </tr> <tr> <td>3</td> <td>11 or more times</td> <td></td> </tr> </table>	Val	Text	Culture Suppression	0	3 or fewer times		1	4-7 times		2	8-10 times		3	11 or more times		SMALLINT		No range checks
Val	Text	Culture Suppression																		
0	3 or fewer times																			
1	4-7 times																			
2	8-10 times																			
3	11 or more times																			

A2

During the day today, how much time typically passed between urinations?

- More than 6 hours
- 3-6 hours
- 1-2 hours
- Less than 1 hour

#	Field Name	Lookup Set	Type	Length	Range Checks						
1	QTimeBetween	<p><i>Name:</i> TimeBetween24Hr <i>SASFmt:</i> TimeBetween24Hr</p> <table border="1"> <tr> <th>Val</th> <th>Text</th> <th>Culture Suppression</th> </tr> <tr> <td></td> <td></td> <td></td> </tr> </table>	Val	Text	Culture Suppression				SMALLINT		No range checks
Val	Text	Culture Suppression									

		0	More than 6 hours			
		1	3-6 hours			
		3	1-2 hours			
		4	Less than 1 hour			

A3

Last night, how many times did you wake up and urinate?

- None
- 1 time
- 2-3 times
- More than 3 times

#	Field Name	Lookup Set			Type	Length	Range Checks															
1	QUrinateNight	<i>Name:</i> NoneOverThree <i>SASFmt:</i> NoneOverThree <table border="1"> <tr> <th>Val</th> <th>Text</th> <th>Culture Suppression</th> </tr> <tr> <td>0</td> <td>None</td> <td></td> </tr> <tr> <td>1</td> <td>1 time</td> <td></td> </tr> <tr> <td>2</td> <td>2-3 times</td> <td></td> </tr> <tr> <td>3</td> <td>More than 3 times</td> <td></td> </tr> </table>			Val	Text	Culture Suppression	0	None		1	1 time		2	2-3 times		3	More than 3 times		SMALLINT		No range checks
Val	Text	Culture Suppression																				
0	None																					
1	1 time																					
2	2-3 times																					
3	More than 3 times																					

A4

Last night, did you wake up because you had to urinate?

- No
- Yes (at least once)

#	Field Name	Lookup Set			Type	Length	Range Checks						
1	QNightOnce	<i>Name:</i> YesNo24Hr <i>SASFmt:</i> YesNo24Hr <table border="1"> <tr> <th>Val</th> <th>Text</th> <th>Culture Suppression</th> </tr> <tr> <td></td> <td></td> <td></td> </tr> </table>			Val	Text	Culture Suppression				SMALLINT		No range checks
Val	Text	Culture Suppression											

	0	No			
	1	Yes (at least once)			

A5

When you woke up and urinated last night, did you leak urine on your way to the bathroom?

- No
- Yes (at least once)

#	Field Name	Lookup Set			Type	Length	Range Checks									
1	QLeakWay	<i>Name: YesNo24Hr SASFmt: YesNo24Hr</i> <table border="1"> <tr> <td>Val</td> <td>Text</td> <td>Culture Suppression</td> </tr> <tr> <td>0</td> <td>No</td> <td></td> </tr> <tr> <td>1</td> <td>Yes (at least once)</td> <td></td> </tr> </table>			Val	Text	Culture Suppression	0	No		1	Yes (at least once)		SMALLINT		No range checks
Val	Text	Culture Suppression														
0	No															
1	Yes (at least once)															

A6

In the past 24 hours...

How often did you feel a sudden need to urinate?

- Never
- A few times
- About half the time
- Most of the time
- Every time

#	Field Name	Lookup Set			Type	Length	Range Checks												
1	SSuddenOften	<i>Name: NeverEveryTime SASFmt: NeverEveryTime</i> <table border="1"> <tr> <td>Val</td> <td>Text</td> <td>Culture Suppression</td> </tr> <tr> <td>0</td> <td>Never</td> <td></td> </tr> <tr> <td>1</td> <td>A few times</td> <td></td> </tr> <tr> <td>2</td> <td>About half the time</td> <td></td> </tr> </table>			Val	Text	Culture Suppression	0	Never		1	A few times		2	About half the time		SMALLINT		No range checks
Val	Text	Culture Suppression																	
0	Never																		
1	A few times																		
2	About half the time																		

		3	Most of the time			
		4	Every time			

In the past 24 hours...

Once you noticed the need to urinate, how difficult was it to wait more than a few minutes?

A7

- Not difficult
- A little difficult
- Somewhat difficult
- Very difficult
- Unable to wait

#	Field Name	Lookup Set	Type	Length	Range Checks																		
1	SHardWait	<i>Name:</i> WaitDifficulty <i>SASFmt:</i> WaitDifficulty <table border="1"> <tr> <td>Val</td> <td>Text</td> <td>Culture Suppression</td> </tr> <tr> <td>0</td> <td>Not difficult</td> <td></td> </tr> <tr> <td>1</td> <td>A little difficult</td> <td></td> </tr> <tr> <td>2</td> <td>Somewhat difficult</td> <td></td> </tr> <tr> <td>3</td> <td>Very difficult</td> <td></td> </tr> <tr> <td>4</td> <td>Unable to wait</td> <td></td> </tr> </table>	Val	Text	Culture Suppression	0	Not difficult		1	A little difficult		2	Somewhat difficult		3	Very difficult		4	Unable to wait		SMALLINT		No range checks
Val	Text	Culture Suppression																					
0	Not difficult																						
1	A little difficult																						
2	Somewhat difficult																						
3	Very difficult																						
4	Unable to wait																						

In the past 24 hours...

Did you leak urine or wet a pad?

A8

- No
- Yes

#	Field Name	Lookup Set	Type	Length	Range Checks						
1	SLeakUrine	<i>Name:</i> YesNo <i>SASFmt:</i> YesNo <table border="1"> <tr> <td>Val</td> <td>Text</td> <td>Culture Suppression</td> </tr> <tr> <td>0</td> <td>No</td> <td></td> </tr> </table>	Val	Text	Culture Suppression	0	No		SMALLINT		No range checks
Val	Text	Culture Suppression									
0	No										

		1	Yes			
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In the past 24 hours...

A9

Did you completely lose control of your bladder?

- No
- Yes

#	Field Name	Lookup Set			Type	Length	Range Checks									
1	SLoseControl	<i>Name: YesNo SASFmt: YesNo</i> <table border="1"> <tr> <td>Val</td> <td>Text</td> <td>Culture Suppression</td> </tr> <tr> <td>0</td> <td>No</td> <td></td> </tr> <tr> <td>1</td> <td>Yes</td> <td></td> </tr> </table>			Val	Text	Culture Suppression	0	No		1	Yes		SMALLINT		No range checks
Val	Text	Culture Suppression														
0	No															
1	Yes															

In the past 24 hours...

A10

Did you leak urine or wet a pad while laughing, sneezing, or coughing?

- No
- Yes

#	Field Name	Lookup Set			Type	Length	Range Checks									
1	SLeakLaugh	<i>Name: YesNo SASFmt: YesNo</i> <table border="1"> <tr> <td>Val</td> <td>Text</td> <td>Culture Suppression</td> </tr> <tr> <td>0</td> <td>No</td> <td></td> </tr> <tr> <td>1</td> <td>Yes</td> <td></td> </tr> </table>			Val	Text	Culture Suppression	0	No		1	Yes		SMALLINT		No range checks
Val	Text	Culture Suppression														
0	No															
1	Yes															

In the past 24 hours...

A11

Did you leak urine or wet a pad when doing physical activities, such as exercising or lifting a heavy object?

- No
- Yes

#	Field Name	Lookup Set			Type	Length	Range Checks			
1	SLeakExercise	<i>Name: YesNo SASFmt: YesNo</i> <table border="1"> <tr> <td></td> <td></td> <td></td> </tr> </table>						SMALLINT		No range checks

		Val	Text	Culture Suppression			
		0	No				
		1	Yes				

In the past 24 hours...

A12

Did getting up from a chair cause you to leak urine or wet a pad?

- No
- Yes

#	Field Name	Lookup Set			Type	Length	Range Checks									
1	SLeakUpChair	<i>Name: YesNo SASFmt: YesNo</i> <table border="1"> <tr> <td>Val</td> <td>Text</td> <td>Culture Suppression</td> </tr> <tr> <td>0</td> <td>No</td> <td></td> </tr> <tr> <td>1</td> <td>Yes</td> <td></td> </tr> </table>			Val	Text	Culture Suppression	0	No		1	Yes		SMALLINT		No range checks
Val	Text	Culture Suppression														
0	No															
1	Yes															

In the past 24 hours...

A13

Did walking at your usual speed cause you to leak urine or wet a pad?

- No
- Yes

#	Field Name	Lookup Set			Type	Length	Range Checks									
1	SLeakWalk	<i>Name: YesNo SASFmt: YesNo</i> <table border="1"> <tr> <td>Val</td> <td>Text</td> <td>Culture Suppression</td> </tr> <tr> <td>0</td> <td>No</td> <td></td> </tr> <tr> <td>1</td> <td>Yes</td> <td></td> </tr> </table>			Val	Text	Culture Suppression	0	No		1	Yes		SMALLINT		No range checks
Val	Text	Culture Suppression														
0	No															
1	Yes															

In the past 24 hours...

A14

Did you leak urine or wet a pad after feeling a sudden need to urinate?

- No
- Yes

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#	Field Name	Lookup Set			Type	Length	Range Checks
1	SLeakAfterSudden	<i>Name: YesNo SASFmt: YesNo</i>			SMALLINT		No range checks
		Val	Text	Culture Suppression			
		0	No				
		1	Yes				

A15 In the past 24 hours...
 Did you leak urine or wet a pad without any reason you could identify?
 No
 Yes

#	Field Name	Lookup Set			Type	Length	Range Checks
1	SLeakNoReason	<i>Name: YesNo SASFmt: YesNo</i>			SMALLINT		No range checks
		Val	Text	Culture Suppression			
		0	No				
		1	Yes				

A16 In the past 24 hours...
 Did you leak urine or wet a pad without feeling it?
 No
 Yes

#	Field Name	Lookup Set			Type	Length	Range Checks
1	SLeakNoFeel	<i>Name: YesNo SASFmt: YesNo</i>			SMALLINT		No range checks
		Val	Text	Culture Suppression			
		0	No				
		1	Yes				

A17 In the past 24 hours...

How often was your urine flow slow or weak?

- Never
- A few times
- About half the time
- Most of the time
- Every time

#	Field Name	Lookup Set	Type	Length	Range Checks																		
1	SFlowSlow	<i>Name: NeverEveryTime SASFmt:</i> NeverEveryTime <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>Val</th> <th>Text</th> <th>Culture Suppression</th> </tr> </thead> <tbody> <tr> <td>0</td> <td>Never</td> <td></td> </tr> <tr> <td>1</td> <td>A few times</td> <td></td> </tr> <tr> <td>2</td> <td>About half the time</td> <td></td> </tr> <tr> <td>3</td> <td>Most of the time</td> <td></td> </tr> <tr> <td>4</td> <td>Every time</td> <td></td> </tr> </tbody> </table>	Val	Text	Culture Suppression	0	Never		1	A few times		2	About half the time		3	Most of the time		4	Every time		SMALLINT		No range checks
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3	Most of the time																						
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In the past 24 hours...

How often did you feel that your bladder was not completely empty after urination?

- Never
- A few times
- About half the time
- Most of the time
- Every time

A18

#	Field Name	Lookup Set	Type	Length	Range Checks									
1	SNotEmptyAfter	<i>Name: NeverEveryTime SASFmt:</i> NeverEveryTime <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>Val</th> <th>Text</th> <th>Culture Suppression</th> </tr> </thead> <tbody> <tr> <td>0</td> <td>Never</td> <td></td> </tr> <tr> <td>1</td> <td>A few times</td> <td></td> </tr> </tbody> </table>	Val	Text	Culture Suppression	0	Never		1	A few times		SMALLINT		No range checks
Val	Text	Culture Suppression												
0	Never													
1	A few times													

		2	About half the time		
		3	Most of the time		
		4	Every time		

In the past 24 hours...

How often did you dribble urine just after zipping your pants or pulling up your underwear?

A19

- Never
- A few times
- About half the time
- Most of the time
- Every time

#	Field Name	Lookup Set	Type	Length	Range Checks																		
1	SDribbleZipPants	<p><i>Name:</i> NeverEveryTime <i>SASFmt:</i> NeverEveryTime</p> <table border="1"> <tr> <td>Val</td> <td>Text</td> <td>Culture Suppression</td> </tr> <tr> <td>0</td> <td>Never</td> <td></td> </tr> <tr> <td>1</td> <td>A few times</td> <td></td> </tr> <tr> <td>2</td> <td>About half the time</td> <td></td> </tr> <tr> <td>3</td> <td>Most of the time</td> <td></td> </tr> <tr> <td>4</td> <td>Every time</td> <td></td> </tr> </table>	Val	Text	Culture Suppression	0	Never		1	A few times		2	About half the time		3	Most of the time		4	Every time		SMALLINT		No range checks
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A20

Questionnaire Complete

- Yes

#	Field Name	Lookup Set	Type	Length	Range Checks
1	CenterComplete	<p><i>Name:</i> QuestComp <i>SASFmt:</i> QuestComp</p>	SMALLINT		No range checks

Val	Text	Culture Suppression
1	Yes	
