

7-Day Recall

A. 7-Day Recall

In the past 7 days...

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

A1

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

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

In the past 7 days...

During a typical day, how much time typically passed between urinations?

A2

- More than 6 hours
- 5-6 hours
- 3-4 hours
- 1-2 hours
- Less than 1 hour

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

QTimeBetween		
Val	Text	Culture Suppression
0	More than 6 hours	
1	5-6 hours	
2	3-4 hours	
3	1-2 hours	
4	Less than 1 hour	

In the past 7 days...

During a typical night, how many times did you wake up and urinate?

A3

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

#	Field Name	Lookup Set	Type	Length	Range Checks															
1	QUrinateNight	<p><i>Name:</i> NoneOverThree <i>SASFmt:</i> NoneOverThree</p> <table border="1"> <thead> <tr> <th>Val</th> <th>Text</th> <th>Culture Suppression</th> </tr> </thead> <tbody> <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> </tbody> </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

In the past 7 days...

How often did you wake up at least once during the night because you had to urinate?

- Never
- A few nights

- About half the nights
- Most nights
- Every night

#	Field Name	Lookup Set	Type	Length	Range Checks																		
1	QNightOnce	<i>Name: NeverEveryNight SASFmt: NeverEveryNight</i> <table border="1"> <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 nights</td> <td></td> </tr> <tr> <td>2</td> <td>About half the nights</td> <td></td> </tr> <tr> <td>3</td> <td>Most nights</td> <td></td> </tr> <tr> <td>4</td> <td>Every night</td> <td></td> </tr> </tbody> </table>	Val	Text	Culture Suppression	0	Never		1	A few nights		2	About half the nights		3	Most nights		4	Every night		SMALLINT		No range checks
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0	Never																						
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2	About half the nights																						
3	Most nights																						
4	Every night																						

In the past 7 days...

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

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

A5

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

	3	Most of the time			
	4	Every time			

In the past 7 days...

How often did you feel a sudden need to urinate?

A6

- 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:</i> NeverEveryTime <i>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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In the past 7 days...

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>	SMALLINT		No range

		WaitDifficulty			checks
	Val	Text	Culture Suppression		
	0	Not difficult			
	1	A little difficult			
	2	Somewhat difficult			
	3	Very difficult			
	4	Unable to wait			

A8 In the past 7 days...
Have you leaked urine or wet a pad?

No
 Yes

#	Field Name	Lookup Set			Type	Length	Range Checks									
1	SLeakUrine	<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															

A9 In the past 7 days...
How often did you completely lose control of your bladder?

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

#	Field Name	Lookup Set			Type	Length	Range Checks									
1	SLoseControl	<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>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															

	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 7 days...

How often did you leak urine or wet a pad while laughing, sneezing, or coughing?

A10

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

#	Field Name	Lookup Set	Type	Length	Range Checks																		
1	SLeakLaugh	<i>Name:</i> NeverEveryTime <i>SASFmt:</i> NeverEveryTime <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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A11

In the past 7 days...

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

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

#	Field Name	Lookup Set	Type	Length	Range Checks																		
1	SLeakExercise	<i>Name:</i> NeverEveryTime <i>SASFmt:</i> NeverEveryTime <table border="1"> <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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4	Every time																						

In the past 7 days...

How often did getting up from a chair cause you to leak urine or wet a pad?

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

A12

#	Field Name	Lookup Set	Type	Length	Range Checks									
1	SLeakUpChair	<i>Name:</i> NeverEveryTime <i>SASFmt:</i> NeverEveryTime <table border="1"> <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
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0	Never													
1	A few times													

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

In the past 7 days...

How often did walking at your usual speed cause you to leak urine or wet a pad?

A13

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

#	Field Name	Lookup Set	Type	Length	Range Checks																		
1	SLeakWalk	<p><i>Name:</i> NeverEveryTime <i>SASFmt:</i> NeverEveryTime</p> <table border="1"> <tr> <th>Val</th> <th>Text</th> <th>Culture Suppression</th> </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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In the past 7 days...

How often did you leak urine or wet a pad after feeling a sudden need to urinate?

A14

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

#	Field Name	Lookup Set	Type	Length	Range
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						Checks
1	SLeakAfterSudden	<i>Name:</i> NeverEveryTime <i>SASFmt:</i> NeverEveryTime			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 7 days...

How often did you leak urine or wet a pad without any reason you could identify?

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

A15

#	Field Name	Lookup Set		Type	Length	Range Checks
1	SLeakNoReason	<i>Name:</i> NeverEveryTime <i>SASFmt:</i> NeverEveryTime			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 7 days...

How often did you leak urine or wet a pad without feeling it?

A16

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

#	Field Name	Lookup Set	Type	Length	Range Checks																		
1	SLeakNoFeel	<p><i>Name:</i> NeverEveryTime <i>SASFmt:</i> NeverEveryTime</p> <table border="1"> <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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2	About half the time																						
3	Most of the time																						
4	Every time																						

In the past 7 days...

How often was your urine flow slow or weak?

A17

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

#	Field Name	Lookup Set	Type	Length	Range Checks						
1	SFlowSlow	<p><i>Name:</i> NeverEveryTime <i>SASFmt:</i> NeverEveryTime</p> <table border="1"> <thead> <tr> <th>Val</th> <th>Text</th> <th>Culture Suppression</th> </tr> </thead> <tbody> <tr> <td></td> <td></td> <td></td> </tr> </tbody> </table>	Val	Text	Culture Suppression				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 7 days...

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

A18

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

#	Field Name	Lookup Set	Type	Length	Range Checks																		
1	SNotEmptyAfter	<p><i>Name:</i> NeverEveryTime <i>SASFmt:</i> NeverEveryTime</p> <table border="1"> <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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A19

In the past 7 days...

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

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

Every time

#	Field Name	Lookup Set	Type	Length	Range Checks																		
1	SDribbleZipPants	<i>Name:</i> NeverEveryTime <i>SASFmt:</i> NeverEveryTime <table border="1"> <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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A20

Questionnaire Complete

Yes

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