Baseline Assessment

A. Demographics

A1

Sex:

Male

Female

#	Field Name		Lo	ookup Set	Type	Length	Range Checks
1	Gender	Gend		mt SASFmt: Culture Suppression	SMALLINT		No range checks
		1	Male	- APPENDED			
		2	Female				

Other Unknown	A2	
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#	Field Name		Lookup Set		Туре	Length	Range Checks
1	Race	Name	e: Race SASFmt: Race		NVARCHAR	200	No range
		Val	Text	Culture Suppression			checks
		1	American Indian or Alaska Native				
		2	Asian/Asian American				

3	Black or African American		
4	Native Hawaiian or other Pacific Islander		
5	White		
6	Other		
97	Unknown		

Ethnicity:

A3

A4

- Hispanic or Latino
- O Not Hispanic or Latino
- Unknown

#	Field Name		Lookup S	Set	Туре	Length	Range Checks
		Nam	e: EthHisp SASFmt:	EthHisp			
		Val	Text	Culture Suppression			
1	Ethnicity	1	Hispanic or Latino		SMALLINT		No range checks
		2	Not Hispanic or Latino				
		3	Unknown				

Marital Status:

- Married/civil union
- Living with a partner
- Separated or divorced
- Widowed
- O Single, never married
- Unknown

#	Field Name	Lookup Set	Туре	Length	Range Checks
1	MaritalStat	Name: MariStat SASFmt: MariStat	SMALLINT		No range checks

Val	Text	Culture Suppression		
1	Married/civil union			
2	Living with a partner			
3	Separated or divorced			
4	Widowed			
5	Single, never married			
97	Unknown			

Education:

- C Less than HS diploma/GED
- HS diploma/GED
- O Some college or tech school, no degree
- Associate's degree
- Bachelor's degree
- Graduate degree
- Unknown

#	Field Name		Lookup Set		Туре	Length	Range Checks
1	Education	Name	e: Education <i>SASFmt</i> : Educ	cation	SMALLINT		No range
		Val	Text	Culture Suppression			checks
		1	Less than HS diploma/GED				
		2	HS diploma/GED				
		3	Some college or tech school, no degree				
		4	Associate's degree				
		5	Bachelor's degree				
		6	Graduate degree				

A5

97 || Unknown

Employment:

Employed part-time

Employed full-time

Unemployed (looking for work)

Not employed (not looking for work, includes stay-at-home, retired)

Unknown

#	Field Name		Lookup Set		Туре	Length	Range Checks
		Nam	e: EmplStat <i>SASFmt</i> : Em	plStat			
		Val	Text	Culture Suppression			
		1	Employed part-time				
		2	Employed full-time				No
1	Employment	3	Unemployed (looking for work)		SMALLINT		range checks
		4	Not employed (not looking for work, includes stay-at-home, retired)				
		97	Unknown				

Height:	
	O Please select
	Oft.
	o cm
	Not Dona

i	#	Field Name	Lookup Set	Туре	Length	Range Checks
	1	HeightPE		FLOAT		No range checks
,	2	HeightPEUnit	Name: HeightUnits SASFmt: HeightUnits Val Text Culture	SMALLINT		No range checks

A6

A7

		Suppression	
-1	Please select		
3	ft.		
2	cm		
99	Not Done		

(Enter 0 if no inches.) in.

#	Field Name	Lookup Set	Type	Length	Range Checks
1	HeightIN		FLOAT		No range checks

Weight: OPlease select... Olbs. A8 ○ kg ○ Not Done

#	Field Name		Looki	ıp Set	Туре	Length	Range Checks
1	WeightPE				FLOAT		No range checks
	WeightPEUnit		e: WeightUnits htUnits	s SASFmt:			No range checks
		Val	Text	Culture Suppression	SMALLINT		
2		-1	Please select				
		1	lbs.				
		2	kg				
		99	Not Done				

В.	Self-	Repo	rted I	Health
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Do you have difficulty walking?

- O You have no problems in walking about
- O You have some problems in walking about
- O You are confined to bed

#	Field Name		Lookup Set		Туре	Length	Range Checks
		Nam	e: WLKABLB <i>SASFmt</i> : WL	KABLB			
		Val	Text	Culture Suppression			No
1	WalkDiff	1	You have no problems in walking about		SMALLINT		range checks
			2	You have some problems in walking about			
		4	You are confined to bed				

Do you have difficulty with self-care?

- You have no problems with self-care
- O You have some problems with washing or dressing yourself
- O You are unable to wash or dress yourself

#	Field Name		Lookup Set		Туре	Length	Range Checks
		Nam	e: SelfCare <i>SASFmt</i> : SelfCare				
	Selfcare	Val	Text	Culture Suppression			No range checks
1		1	You have no problems with self-care		SMALLINT		
		2	You have some problems with washing or dressing yourself				
		4	You are unable to wash or dress yourself				

In general, would you say your health is:

- Excellent
- Very good

B2

В3

O Poor

#	Field Name		Loo	okup Set	Туре	Length	Range Checks	
	HealthLevel		e: GOODS0 DDSC	C SASFmt:	SMALLINT			
		Val	Text	Culture Suppression			No range checks	
1		1	Excellent					
		2	Very good		SMALLINI			
		3	Good					
		4	Fair					
		5	Poor					

In general, would you say your quality of life is:

Excellent

O Very good

O Good

Fair

O Poor

#	Field Name		Loo	kup Set	Туре	Length	Range Checks
1	GenQOL		e: GOODSO DSC	C SASFmt:	SMALLINT		No range checks
		Val	Text	Culture Suppression			
		1	Excellent				
		2	Very good				
		3	Good				
		4	Fair				

B4

5 || Poor || ||

Are you currently, or have you been, on any treatments for your urinary tract symptoms? Select all that apply.

(Non-traditional/non-medicinal treatments can refer to herbal supplements, exercise regimens, talk therapy, etc.)

B5

N	[ed	1	C1	n	e

Surgery

Non-traditional/ non-medicinal treatments

Other (specify)

None

Unknown

#	Field Name		Lookup Set	;	Туре	Length	Range Checks
			e: TherapyLUTD SAS apyLUTD				
		Val	Text	Culture Suppression			
		1 Medicine					
1	TreatmentStop	2	Surgery		NVARCHAR	100	No range checks
		3	Non-traditional/ non-medicinal treatments				
		4	Other (specify)				
		5	5 None				
		97 Unknown					

Have you ever been told by a doctor or a health professional that you have...

High blood pressure (hypertension)

O No

Yes

Not Sure

#	Field Name		Lo	okup Set	Туре	Length	Range Checks
	HighBP	Name: YNNotSure SASFmt: YNNotSure					
1		Val	Text	Culture Suppression	SMALLINIT		No range
1		0	No		SMALLINT		checks
		1	Yes				
		2	Not Sure				

Hardening of the arteries (coronary heart disease)

O No

O Yes

O Not Sure

#	Field Name		Loc	okup Set	Туре	Length	Range Checks
		Name: YNNotSure SASFmt: YNNotSure					
1	C	Val	Text	Culture Suppression	CMALLINIT		No range
1	CoronaryDisease	0	No		SMALLINT		checks
		1	Yes				
		2	Not Sure				

Heart disease or heart problems

O No

O Yes

Not Sure

#	Field Name	Lookup Set	Туре	Length	Range Checks
1	HeartDisease	Name: YNNotSure SASFmt: YNNotSure	SMALLINT		No range checks

В7

B8

Val	Text	Culture Suppression		
0	No			
1	Yes			
2	Not Sure			

Stroke or transient ischemic attack (TIA)

O No

O Yes

O Not Sure

#	Field Name	Lo	Туре	Length	Range Checks	
		Name: YNNotS YNNotSure	ure SASFmt:			
1	Stroke	Val Text	Culture Suppression	SMALLINT		No range
	SHOKE	0 No		SWALLINI		checks
		1 Yes				
		2 Not Sure				

Liver disease, hepatitis, or cirrhosis

O No

O Yes

Not Sure

#	Field Name		Lo	okup Set	Туре	Length	Range Checks
1	LiverDisease	1 (00)	e: YNNotS lotSure	ure SASFmt:	SMALLINT		No range checks
		Val	Text	Culture Suppression			
		0	No				
		1	Yes				

B9

B10

2 Not Sure

Kidney disease

O No

B11

O Yes

Not Sure

#	Field Name	Lookup Set			Туре	Length	Range Checks
			e: YNNotS lotSure	Sure SASFmt:			
1	KidneyDisease	Val	Text	Culture Suppression	SMALLINT		No range
	KluffeyDisease	0	No		SWALLINI		checks
		1	Yes				
		2	Not Sure				

Arthritis

O No

B12

O Yes

Not Sure

#	Field Name	Lookup Set			Туре	Length	Range Checks
		YNNotSu	re	ure SASFmt:			
1	Arthritis	Val Text	,	Culture Suppression	SMALLINT		No range
	Munitis	0 No			SWALLINI		checks
		1 Yes					
		2 Not	Sure				

B13a

Yes	
Mat	C114

#	Field Name		Lo	Туре	Length	Range Checks	
			e: YNNotS lotSure	ure SASFmt:			
1	Diabetes	Val	Text	Culture Suppression	SMALLINT		No range
1	Diabetes	0	No		SWIALLINI		checks
		1	Yes				
		2	Not Sure				

h

If yes, how many years have you had diabetes? years

#	Field Name	Lookup Set	Type	Length	Range Checks
1	DiabetesYrs		FLOAT		No range checks

Cancer other than non-melanoma skin cancer

B14

No

Yes

Not Sure

#	Field Name	Lo	Lookup Set			Range Checks
		Name: YNNotS YNNotSure	ure SASFmt:			
1	Cancer	Val Text	Culture Suppression	SMALLINT		No range
	Cancer	0 No		SWALLINI		checks
		1 Yes				
		2 Not Sure				

De	pres	SS1C	n

 \circ No

B15

#	Field Name		Lo	Туре	Length	Range Checks	
			e: YNNotS IotSure	ure SASFmt:			
1	Dannassian	Val	Text	Culture Suppression	SMALLINT		No range
1	Depression	0	No		SWIALLINI		checks
		1	Yes				
		2	Not Sure				

Anxiety

O No

O Yes

Not Sure

#	Field Name		Lo	okup Set	Туре	Length	Range Checks
	Amriator	Name: YNNotSi YNNotSure		ure SASFmt:			
		Val	Text	Culture Suppression	SMALLINT		No range
	Anxiety	0	No		SWALLINI		checks
		1	Yes				
		2	Not Sure				

Alcohol or drug problem

O No

O Yes

Not Sure

#	Field Name	Lookup Set	Туре	Length	Range Checks
1	Alcohol	Name: YNNotSure SASFmt: YNNotSure	SMALLINT		No range checks

B16

B17

Val	Text	Culture Suppression
0	No	
1	Yes	
2	Not Sure	

A sleep disorder

O No

O Yes

O Not Sure

#	Field Name	Lo	ookup Set	Туре	Length	Range Checks	
	Sleep	Name: YNNotS YNNotSure	Sure SASFmt:				
1		Val Text	Culture Suppression	SMALLINT		No range	
	Бісер	0 No		SWALLIVI		checks	
		1 Yes					
		2 Not Sure					

A spinal cord injury

O No

B19

O Yes

Not Sure

#	Field Name		Lo	okup Set	Туре	Length	Range Checks	
	Suinal Can 1		e: YNNotS lotSure	ure SASFmt:			No range checks	
		Val	Text	Culture Suppression	SMALLINT			
	SpinalCord	0	No		SWALLINI			
		1	Yes					
		2	Not Sure					

B18

• This section suppressed if database function al.fn_GetProtocolVersion returns 1

In the past 7 days:

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

- 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 S	Туре	Length	Range Checks	
	QUrinateWake		e: QUrinateWake S inateWake	ASFmt:			
		Val	Text	Culture Suppression			
1		0	3 or fewer times a day		SMALLINT		No range checks
		1	4-7 times a day				JII JKS
		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?

- More than 6 hours
- 5-6 hours

C2

- 3-4 hours
- 1-2 hours
- Less than 1 hour

#	Field Name	Lookup Set	Туре	Length	Range Checks
-	QTimeBetween	Name: QTimeBetween SASFmt: QTimeBetween	SMALLINT		No range checks

C1

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			

During a typical day, how often did you urinate twice or more within a few minutes?

Never

C3 • A few times

About half the time

Most of the time

Every time

#	Field Name		Lookup	Туре	Length	Range Checks	
			e: NeverEveryTime erEveryTime	ne SASFmt:			
		Val	Text	Culture Suppression			
		0	Never				No son ao
1	QTwiceMore	1 A few times			SMALLINT		No range checks
		2	About half the time				
		3	Most of the time				
		4	Every time				

C4 In the past 7 days:

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

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

#	Field Name		Lookuj	Туре	Length	Range Checks	
			e: NoneOverThree	ee SASFmt:			
		Val	Text	Culture Suppression			
1	QUrinateNight	0	None		SMALLINT		No range checks
		1	1 time				on one
		2	2-3 times				
		3	More than 3 times				

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	Туре	Length	Range Checks
QNightOnce		•	at SASFmt:	SMALLINT		No range checks
	Val	Text	Culture Suppression			
	0	Never				
	1	A few nights				
	2	About half the nights				
		QNightOnce Name Never Val 0	QNightOnce Name: NeverEveryNight Val Text Never A few nights About half the	QNightOnce Name: NeverEveryNight SASFmt: NeverEveryNight Val Text Culture Suppression Never A few nights About half the	QNightOnce Name: NeverEveryNight SASFmt: NeverEveryNight Val Text Culture Suppression Never A few nights About half the	QNightOnce Name: NeverEveryNight SASFmt: NeverEveryNight Val Text Culture Suppression Never A few nights About half the

C5

3	Most nights		
4	Every night		

How would you describe your typical urge to urinate when you woke up during the night?

- No urge
- Mild urge
- Moderate urge
- Strong urge

#	Field Name		Look	up Set	Туре	Length	Range Checks
			e: NoUrgeStro rgeStrong	ng <i>SASFmt:</i>			
		Val Text		Culture Suppression			
1	QUrinateUrge	0	No urge		SMALLINT		No range checks
		1	Mild urge				
		2	Moderate urge				
		3	Strong urge				

In the past 7 days:

How often did you leak urine during the night, including wetting a pad or the bed?

- Never
- - About half the nights
 - Most nights
 - Every night

#	Field Name	Lookup Set	Туре	Length	Range Checks
1	QLeakPadBed	Name: NeverEveryNight SASFmt: NeverEveryNight	SMALLINT		No range checks
		Val Text Culture			

C6

		Suppression		
0	Never			
1	A few nights			
2	About half the nights			
3	Most nights			
4	Every night			

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

Never

C8 A few times

About half the time

Most of the time

Every time

#	Field Name		Lookup	Set	Туре	Length	Range Checks
			e: NeverEveryTime erEveryTime	e SASFmt:	SMALLINT		No range checks
		Val	Text	Culture Suppression			
1	OI1-W	0	Never				
1	QLeakWay	1	A few times				
		2	About half the time				
		3	Most of the time				
		4	Every time				

D. CASUS, Sensation Female

- This section suppressed if question A1 has a value of "Male"
- This section suppressed if question A1 has a value of "Male"
- This section suppressed if database function al.fn_GetGender returns 1

• This section suppressed if database function al.fn_GetProtocolVersion returns 1

In the past 7 days, where did you feel sensations when you felt you needed to urinate?

Lower abdomen:

D1

NoYes

#	Field Name	Lookup Set			Туре	Length	Range Checks
		Name YesN		No SASFmt:			N
1	RFSensationAbdomen	Val	Text	Culture Suppression	SMALLINT		No range checks
		0	No				
		1	Yes				

Bladder area:

D2

O No

O Yes

#	Field Name		Lo	ookup Set	Туре	Length	Range Checks
		Name YesN		No SASFmt:			
1	RFSensationBladder	Val	Text	Culture Suppression	SMALLINT		No range checks
		0	No				
		1	Yes				

Labia/vagina area:

O No

D3

#	Field Name	Lookup Set	Туре	Length	Range Checks

1	RFSensationVagina	Name: YesNo SASFmt: YesNo			SMALLINT	No range checks
		Val	Text	Culture Suppression		
		0	No			
		1	Yes			
				_	•	

Urethra:

No
Yes D4

#	Field Name		Lo	ookup Set	Туре	Length	Range Checks
1	RFSensationUrethra		e: Yesî Text	No SASFmt: YesNo Culture Suppression	SMALLINT		No range checks
		0	No				
		1	Yes				

Lower back:

No
Yes

D5

#	Field Name	Lookup Set			Туре	Length	Range Checks
1	RFSensationLowBack	YesN	-	No SASFmt: Culture Suppression	SMALLINT		No range checks

Other:

O No

O Yes

D6

#	Field Name	L	ookup Set	Туре	Length	Range Checks
1	RFSensationOther	Text No Yes	No SASFmt: YesNo Culture Suppression	SMALLINT		No range checks

D7

If Yes to Other, where do you feel sensations:

#	Field Name	Lookup Set	Type	Length	Range Checks
1	RFSensationOS		NVARCHAR	250	No range checks

E. CASUS, Sensation Male

- This section suppressed if question A1 has a value of "Female"
- This section suppressed if database function al.fn_GetGender returns 2
- This section suppressed if database function al.fn_GetProtocolVersion returns 1

In the past 7 days, where did you feel sensations when you felt you needed to urinate?

Lower abdomen:

E1

NoYes

#	Field Name	Lookup Set			Туре	Length	Range Checks
1	RMSensationAbdomen	Name: YesNo SASFmt: YesNo			SMALLINT		No range checks
		Val	Text	Culture Suppression			
		0	No				
		1	Yes				

E2

E3

E4

Bladder area:

O No

O Yes

#	Field Name	Lookup Set			Туре	Length	Range Checks
1	RMSensationBladder	YesN		Culture Suppression	SMALLINT		No range checks
		0	No				
		1	Yes				

Tip of the penis:

O No

O Yes

#	Field Name		L	ookup Set	Туре	Length	Range Checks
		Name	e: Yesl	No SASFmt: YesNo			
1	RMSensationPenis	Val	Text	Culture Suppression	SMALLINT		No range checks
		0	No				
		1	Yes				

Shaft of the penis:

O No

#	Field Name	Lookup Set	Туре	Length	Range Checks
1	RMSensationShaft	Name: YesNo SASFmt: YesNo	SMALLINT		No range checks
		Val Text Culture			

		Suppression		
0	No			
1	Yes			

Scrotum/testicles:

1 RMSensationTesticle

E5

NoYes

#	Field Name	Lookup Set	Туре	Length	Range Checks
		Name: YesNo SASFmt: YesNo			

Culture

Suppression

Val | Text

No

Yes

0

1

No range

checks

SMALLINT

Urethra:

No

O Yes

E6

E7

#	Field Name		Lookup Set	Туре	Length	Range Checks
1	RMSensationUrethra	YesNo Val Te 0 No	Suppression	SMALLINT		No range checks

Lower back:

O No

#	Field Name	Lookup Set	Type	Length	Range	
---	------------	------------	------	--------	-------	--

<u></u>	<u> </u>					<u> </u>	Checks
		Name YesN		No <i>SASFmt</i> :			
1	RMSensationLowBack	Val	Text	Culture Suppression	SMALLINT		No range checks
		0	No				
		1	Yes				

Other:

O No

E8

E9

Yes

#	Field Name		L	ookup Set	Туре	Length	Range Checks
		Nam	e: Yesl	No SASFmt: YesNo			
1	RMSensationOther	Val	Text	Culture Suppression	SMALLINT		No range checks
		0	No				
		1	Yes				

If Yes to Other, where do you feel sensations:	

#	Field Name	Lookup Set	Type	Length	Range Checks
1	RMSensationOS		NVARCHAR	250	No range checks

F. CASUS, Sensation Everyone

• This section suppressed if database function al.fn_GetProtocolVersion returns 1

In the past 7 days, what kinds of sensations did you have when you felt you needed to urinate?

F1 None:

#	Field Name		I	Lookup Set	Type	Length	Range Checks
		Name	e: Yesl	No SASFmt: YesNo			
1	SNeedNone	Val	Text	Culture Suppression	SMALLINT		No range checks
		0	No				5
		1	Yes				

Bloating:

O No

F2

F3

F4

O Yes

#	Field Name		I	Lookup Set	Type	Length	Range Checks
		Name	e: Yesl	No SASFmt: YesNo			
1	SNeedBloating	Val	Text	Culture Suppression	SMALLINT		No range checks
		0	No				
		1	Yes				

Tingling:

O No

O Yes

#	Field Name		Lookup Set	Type	Length	Range Checks
1	SNeedTingling	Name: Ye Val Tex 0 No 1 Yes	Suppression	SMALLINT		No range checks

Burning:

O No

#	Field Name		I	Lookup Set	Type	Length	Range Checks
1	SNeedBurning	Val	Yes Yes No Yes	No SASFmt: YesNo Culture Suppression	SMALLINT		No range checks

Pressure:

O No

F5

O Yes

#	Field Name		L	Lookup Set	Type	Length	Range Checks
1	SNeedPressure		Yesl Text	No SASFmt: YesNo Culture Suppression	SMALLINT		No range checks
		0	No				CHECKS
		1	Yes				

Discomfort:

O No

O Yes

#	Field Name		L	ookup Set	Туре	Length	Range Checks
		Nam	e: Yesl	No SASFmt: YesNo			
1	SNeedDiscomfort	Val	Text	Culture Suppression	SMALLINT		No range checks
		0	No				
		1	Yes				

O Yes

#	Field Name	Lookup Set	Type	Length	Range Checks
1	1 SNeedPain	Name: YesNo SASFmt: YesNo Val Text Culture Suppression	SMALLINT		No range checks
		0 No			3
		1 Yes			

Aching:

F8

O No

O Yes

#	Field Name		J	Lookup Set	Type	Length	Range Checks
1			ı -	No SASFmt: YesNo Culture Suppression			N 1 1
1	SNeedAching	0	No		SMALLINT		No range checks
		1	Yes				

Urgency:

F9

O No

O Yes

#	Field Name		L	ookup Set	Туре	Length	Range Checks
1	SNeedUrgency		YesN Text	No SASFmt: YesNo Culture Suppression	SMALLINT		No range
	2 7	0 N	No	11			checks
		1 Y	Yes				

F10 Stinging:

O No

#	Field Name		I	Lookup Set	Type	Length	Range Checks
		Name	: Yesl	No SASFmt: YesNo			
1	SNeedStinging	Val	Text	Culture Suppression	SMALLINT		No range checks
		0	No				
		1	Yes				

Fullness:

O No

O Yes

#	Field Name		I	Lookup Set	Type	Length	Range Checks
		Name: YesNo		No SASFmt: YesNo			
1	SNeedFullness	Val	Text	Culture Suppression	SMALLINT		No range checks
		0	No				
		1	Yes				

Other:

F12

O No

O Yes

#	Field Name		I	Lookup Set	Type	Length	Range Checks
		Nam	e: Yesl	No SASFmt: YesNo			
1	SNeedOther	Val	Text	Culture Suppression	SMALLINT		No range checks
		0	No				S
		1	Yes				

If Yes to Other,	what kinds	of sensations	do you feel:

l	#	Field Name	Lookup Set	Type	Length	Range Checks
	1	SNeedOS		NVARCHAR	250	No range checks

I have sensations, but I can't put them into words:

O No

O Yes

#	Field Name		L	ookup Set	Туре	Length	Range Checks
1	SNeedCannotWord		e: Yesl Text	No SASFmt: YesNo Culture Suppression	SMALLINT		No range checks
		0	No				
		1	Yes				

Think about the times between when you finished urinating and when you next needed to urinate in the past 7 days.

F15

During these times, are you aware of any feelings or sensations?

O No

Yes

#	Field Name		Lookup Set	Туре	Length	Range Checks
			SNo SASFmt: YesNo Culture Suppression	CMALLDIT		
	SNext	0 No	Culture Suppression	SMALLINT		No range checks
		1 Yes				

If Yes, what kinds of feelings or sensations did you have?

Bloating:

 \bigcirc N

Yes

Field Name		I	Lookup Set	Type	Length	Range Checks
SNextBloating			No SASFmt: YesNo Culture Suppression	SMALLINT		No range checks
	0	No Yes				CHECKS
		SNextBloating Val	SNextBloating Val Text 0 No	Name: YesNo SASFmt: YesNo Val Text Culture Suppression 0 No	Name: YesNo SASFmt: YesNo Val Text Culture Suppression No No SMALLINT	Name: YesNo SASFmt: YesNo Val Text Culture Suppression 0 No SMALLINT

Tingling:

O No

O Yes

#	Field Name		I	Lookup Set	Type	Length	Range Checks
1	SNextTingling		e: Yesî Text	No SASFmt: YesNo Culture Suppression	SMALLINT		No range
		0	No				checks
		1	Yes				

Burning:

O Yes

#	Field Name		I	Lookup Set	Type	Length	Range Checks
		Name	e: Yesl	No SASFmt: YesNo			No range checks
1	SNextBurning	Val	Text	Culture Suppression	SMALLINT		
		0	No				
		1	Yes				

Pressure:

O No

O Yes

#	Field Name		Ι	Lookup Set	Type	Length	Range Checks
1	SNextPressure		e: Yesî Text	No SASFmt: YesNo Culture Suppression	SMALLINT		No range checks
		0	No				CHECKS
		1	Yes				

Discomfort:

O No

O Yes

#	Field Name		L	ookup Set	Туре	Length	Range Checks
	SNextDiscomfort	Name	e: Yesl	No SASFmt: YesNo	SMALLINT		
1		Val	Text	Culture Suppression			No range checks
		0	No				
		1	Yes				

Pain:

F21

F22

O No

O Yes

#	Field Name	Lookup Set	Type	Length	Range Checks
		Name: YesNo SASFmt: YesNo			
1	SNextPain	Val Text Culture Suppression	SMALLINT		No range checks
		0 No			5
		1 Yes			

Aching:

O No

#	Field Name		I	Lookup Set	Type	Length	Range Checks
		Nam	e: Yesl	No SASFmt: YesNo			
1	SNextAching	Val	Text	Culture Suppression	SMALLINT		No range checks
	8	0	No				3
		1	Yes				

Urgency:

O No

O Yes

#	Field Name		I	Lookup Set	Type	Length	Range Checks
1	SNextUrgency		Yesl Text	No SASFmt: YesNo Culture Suppression	SMALLINT		No range checks
		0	No				
		1	Yes				

F24

F25

Stinging:

O No

O Yes

#	Field Name		I	Lookup Set	Type	Length	Range Checks	
		Namo	e: Yesl	No SASFmt: YesNo				
1	SNextStinging	Val	Text	Culture Suppression	SMALLINT		No range checks	
		0	No					
		1	Yes					

Fullness:

O No

# Field Name Lookup Set Type Length Range Cho	# Field Name	Lookup Set	Туре	Length	Range Checks
---	--------------	------------	------	--------	--------------

F26

Other:

O No

Yes

#	Field Name		I	Lookup Set	Type	Length	Range Checks	
	SNextOther			No SASFmt: YesNo				
1		Val	Text	Culture Suppression	SMALLINT		No range checks	
		0	No					
		1	Yes					

F27

F28

If Yes to Other, what kinds of sensations do you feel:

#	Field Name	Lookup Set	Type	Length	Range Checks
]	SNextOS		NVARCHAR	250	No range checks

I have sensations, but I can't put them into words:

O No

#	Field Name	Lookup Set			Туре	Length	Range Checks
1	SNextCannotWord		Text No	No SASFmt: YesNo Culture Suppression	SMALLINT		No range checks

Yes

In the past 7 days...

How often did you have pain or discomfort in your bladder while it was filling?

- Never
- A few times F29
 - About half the time
 - Most of the time
 - Every time

#	Field Name		Lookup	Set	Туре	Length	Range Checks
			e: NeverEveryTi erEveryTime	me <i>SASFmt</i> :			No range checks
		Val	Text	Culture Suppression			
		0	Never		SMALLINT		
1	SFillingPainOften	1	A few times				
		2	About half the time				
		3	Most of the time				
		4	Every time				

In the past 7 days...

How much pain or discomfort did you have in your bladder while it was filling?

- No pain or discomfort
- Mild

- Moderate
- Severe

#	Field Name	Lookup Set	Туре	Length	Range Checks
1	SFillingPainMuch	Name: NoPainToSevere SASFmt: NoPainToSevere	SMALLINT		No range checks

Val	Text	Culture Suppression		
0	No pain or discomfort			
1	Mild			
2	Moderate			
3	Severe			

In the past 7 days...

How often did you have pain or discomfort in your bladder when it was full?

Never

A few times

About half the time

Most of the time

Every time

#	Field Name		Lookup	Set	Туре	Length	Range Checks			
			e: NeverEveryTine erEveryTime	me <i>SASFmt</i> :	SMALLINT					
		Val	Text	Culture Suppression						
		0	Never				No range checks			
1	SFullPainOften	1	A few times							
					2	About half the time				CHECKS
		3	Most of the time							
		4	Every time							

In the past 7 days... F32

How much pain or discomfort did you have in your bladder when it was full?

- No pain or discomfort
- Mild
- Moderate
- Severe

Range # Field Name **Lookup Set** Type Length Checks Name: NoPainToSevere SASFmt: NoPainToSevere Culture Val | Text Suppression No 1 SFullPainMuch No pain or **SMALLINT** range discomfort checks 1 Mild 2 Moderate 3 Severe

In the past 7 days...

How often did you have pain or discomfort while urinating?

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

#	Field Name		Lookup	Type	Length	Range Checks	
		Name: NeverEveryTime SASFmt: NeverEveryTime					
		Val	Text	Culture Suppression	SMALLINT		No range checks
		0	Never				
1	SUrinatePainOften	1	A few times				
		2	About half the time				CHCCKS
		3	Most of the time				
		4	Every time				

F33

I

How much pain or discomfort did you have while urinating?

No pain or discomfort

Mild

Moderate

Severe

#	Field Name		Lookup	Туре	Length	Range Checks	
	SUrinatePainMuch	Name: NoPainToSevere SASFmt: NoPainToSevere					
		Val	Text	Culture Suppression	SMALLINT		No
1		0	No pain or discomfort				range checks
		1	Mild				
		2	Moderate				
		3	Severe				

In the past 7 days...

How often did you have pain or discomfort right after you had finished urinating?

Never

F35 A few times

About half the time

Most of the time

Every time

#	Field Name		Lookup	Set	Туре	Length	Range Checks
1	SFinishPainOften		e: NeverEveryTinerEveryTime	me <i>SASFmt:</i>	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		

How much pain or discomfort did you have right after you had finished urinating?

- O No pain or discomfort
- Mild
- Moderate
- Severe

#	Field Name		Lookup	Set	Туре	Length	Range Checks
		Name: NoPainToSevere SASFmt: NoPainToSevere					
		Val	Text	Culture Suppression			No
1	SFinishPainMuch	0	No pain or discomfort	SMALLINT		range checks	
		1	Mild				
		2	Moderate				
		3	Severe				

In the past 7 days...

How often did you feel a sudden need to urinate?

Never

F37

- A few times
- About half the time
- Most of the time
- Every time

#	Field Name	Lookup Set	Туре	Length	Range Checks
1	SSuddenOften	Name: NeverEveryTime SASFmt:	SMALLINT		No

Ne	verEveryTime		
V	l Text	Culture Suppression	
0	Never		
1	A few times		
2	About half the time		
3	Most of the time		
4	Every time		

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

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

#	Field Name		Lookup	Set	Туре	Length	Range Checks
	SHardWait		e: WaitDifficulty & Difficulty	SASFmt:			
		Val	Text	Culture Suppression			No range
1		0	Not difficult		SMALLINT		
	SHardwan	1	A little difficult		SWALLINI		checks
		2	Somewhat difficult				
		3 Very difficult4 Unable to wait					

In the past 7 days...

How often did you have a sudden need to rush to urinate for fear of leaking urine?

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

#	Field Name		Lookup	Set	Туре	Length	Range Checks
			e: NeverEveryTir erEveryTime	me SASFmt:			No
		Val	Text	Culture Suppression			
		0	Never				
1		1	A few times		SMALLINT		range checks
		2	About half the time				CHECKS
		3	Most of the time				
		4	Every time				

Did you have a constant need to urinate that did not go away?

- O No
- O Yes

#	Field Name		I	Lookup Set	Type	Length	Range Checks	
		Name: YesNo SASFmt: YesNo						
1	SConstantNeed	Val	Text	Culture Suppression	SMALLINT		No range checks	
		0	No					
		1	Yes					

G. CASUS, Effort Everyone

EFFORT WITH URINATION

In the past 7 days...

How often did you have a delay before you started to urinate?

Never

G1

- A few times
- About half the time
- Most of the time
- Every time

#	Field Name		Lookup	Set	Туре	Length	Range Checks
			e: NeverEveryTime erEveryTime	e SASFmt:			No range checks
		Val	Text	Culture Suppression			
		0	Never		SMALLINT		
1	SDelayOften	1	A few times				
		2	About half the time				
		3	Most of the time				
		4	Every time				

In the past 7 days...

When trying to urinate, how much of a delay was there before the urine came out?

None

- A few seconds to less than a minute
- Around a minute
- More than a minute

#	Field Name	Lookup Set	Type	Length	Range
---	------------	------------	------	--------	-------

							Checks
		Name: NoneToMinutes SASFmt: NoneToMinutes					
		Val	Text	Culture Suppression	SMALLINT		No
1	SDelayMuch	0	None				range
		1	A few seconds to less than a minute				checks
		2	Around a minute				
		3	More than a minute				

How often did you have to push when urinating?

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

#	Field Name		Lookup	Туре	Length	Range Checks	
	SPushOften		e: NeverEveryTimerEveryTime	e SASFmt:	SMALLINT		
		Val	Text	Culture Suppression			
1		0	Never				No range
1	SF usilOften	1	A few times				checks
		2	About half the time				
		3	Most of the time				
		4	Every time				

In the past 7 days...

How hard did you have to push to begin urinating?

G3

- A little bit hard
- Ouite a bit hard
- Very hard

#	Field Name		Looku	p Set	Туре	Length	Range Checks
		Name: NotToVeryHard SASFmt: NotToVeryHard					
		Val	Text	Culture Suppression			
1	SPushHardBegin	0	Not at all hard		SMALLINT		No range
		1	A little bit hard				checks
		2	Quite a bit hard				
		3	Very hard				

How hard did you have to push during urination?

- Not at all hard
- A little bit hard
- Quite a bit hard
- Very hard

#	Field Name		Looku	p Set	Туре	Length	Range Checks
1	SPushHardDuring	_ ,	e: NotToVeryH oVeryHard	Iard SASFmt:	SMALLINT		No range checks
		Val	Text	Culture Suppression			
		0	Not at all hard				
		1	A little bit hard				

	2	Quite a bit hard		
	3	Very hard		

How often did you push extra hard while you were urinating?

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

#	Field Name		Lookup	Set	Туре	Length	Range Checks
		Name: NeverEveryTime SASFmt: NeverEveryTime					
		Val	Text	Culture Suppression	SMALLINT		No
		0	Never				
1	SPushExtraHard	1	A few times				range checks
		2	About half the time				CHECKS
		3	Most of the time				
		4	Every time				

In the past 7 days...

How much did you have to concentrate to empty your bladder?

Not at all

G7

- A little bit
- Ouite a bit
- Very much

#	Field Name	Lookup Set	Туре	Length	Range Checks
1	SConcentrate	Name: NotToMuch SASFmt:	SMALLINT		No range

NotT	oMuch			checks
Val	Text	Culture Suppression		
0	Not at all			
1	A little bit			
2	Quite a bit			
3	Very much			

How often did you have to relax to empty your bladder?

Never

A few times

About half the time

Most of the time

Every time

#	Field Name		Lookup	Set	Туре	Length	Range Checks
	SRelax		e: NeverEveryTime erEveryTime	e SASFmt:	SMALLINT		No range checks
		0	Text	Culture Suppression			
1			Never				
			A few times				
			About half the time				
		3	Most of the time				
		4	Every time				

How often did you have splitting or spraying of your urine stream?

Never

G9

- A few times
- About half the time
- Most of the time
- Every time

#	Field Name		Lookup	Set	Type	Length	Range Checks
	GE1 G 1'4		e: NeverEveryTime erEveryTime	e SASFmt:	SMALLINT		
		Val	Text	Culture Suppression			
1		0	Never				No range checks
1	SFlowSplit	1	A few times		SWALLINI		
		2	About half the time				
		3	Most of the time				
		4	Every time				

In the past 7 days...

How often did you have spraying or change in direction of your urine stream?

Never

- A few times
- About half the time
- Most of the time
- Every time

#	Field Name	Lookup Set	Туре	Length	Range Checks
1	SFlowSpray	Name: NeverEveryTime SASFmt: 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			

Once you started urinating, how often did your urine flow stop and start again?

Never

O A few times G11

O About half the time

Most of the time

Every time

#	Field Name	Lookup Set			Туре	Length	Range Checks
		Name: NeverEveryTime SASFmt: NeverEveryTime					
		Val	Text	Culture Suppression			
		0	Never				No
1	SFlowStopStart	1	A few times		SMALLINT		range checks
		2	About half the time				CHECKS
		3	Most of the time				
		4	Every time				

In the past 7 days... G12

How often was your urine flow slow or weak?

Never

- O A few times
- About half the time
- Most of the time
- Every time

#	Field Name		Lookup	Set	Туре	Length	Range Checks
		Name: NeverEveryTime SASFmt: NeverEveryTime					
		Val	Text	Culture Suppression			
1	SFlowSlow	0 Never			SMALLINT		No range
1	SFIOWSIOW	1	A few times		SWALLINI		checks
		2 About half the time					
		3 Most of the time					
		4	Every time				

How often did you have a trickle or dribble at the end of your urine flow?

Never

A few times G13

- About half the time
- Most of the time
- Every time

#	Field Name		Lookup	Set	Туре	Length	Range Checks
1	SFlowEndTrickle		e: NeverEveryTinerrEveryTime	me <i>SASFmt:</i>	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		

How often did you have no sensation of urine flow while you were urinating?

Never

G14

- A few times
- About half the time
- Most of the time
- Every time

#	Field Name		Lookup	Set	Туре	Length	Range Checks					
		Name: NeverEveryTime SASFmt: NeverEveryTime										
		Val	Text	Culture Suppression								
		0	Never		SMALLINT		No					
1	SFlowNoSensation	1	A few times				range checks					
							2	About half the time				CHCCKS
		3	Most of the time									
		4	Every time									

INCONTINENCE

In the past 7 days...

G15

Have you leaked urine or wet a pad?

○ No

O Yes

#	Field Name		Lookup Set	Type	Length	Range Checks
		Name: Y	esNo <i>SASFmt</i> : YesNo			
1	SLeakUrine	Val Te	xt Culture Suppression	SMALLINT		No range checks
		0 No				5
		1 Ye	es			

If Yes:

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	Туре	Length	Range Checks
			e: NeverEveryTimerEveryTime				
		Val	Text	Culture Suppression			
		0	Never		SMALLINT		No range checks
1	SLoseControl	1	A few times				
		2	About half the time				CHECKS
		3	Most of the time				
		4	Every time				

#	Field Name		Lookuj	p Set	Туре	Length	Range Checks
			e: NeverEveryT erEveryTime	Time SASFmt:			
		Val	Text	Culture Suppression			
1 SLeakAfterSudden	0	Never				No	
	SLeakAfterSudden	1	A few times		SMALLINT		range checks
		2	About half the time				Checks
		3	Most of the time				
		4	Every time				
[c	the past 7 days w often did you leak u	rine or	wet a pad while	laughing, sneezing	g, or coughing?		
	A few times About half the time Most of the time Every time						
#	About half the time Most of the time		Lookup Se	t	Туре	Length	Range Checks

#	Field Name		Lookup	Set	Туре	Length	Range Checks
1	SLeakLaugh		e: NeverEveryTim rEveryTime	e SASFmt:	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		

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	Туре	Length	Range Checks
			e: NeverEveryTinerEveryTime	ne <i>SASFmt:</i>			
		Val	Text	Culture Suppression			
		0	Never				No
1	1 SLeakExercise	1	A few times		SMALLINT		range checks
		2	About half the time				checks
		3	Most of the time				
		4	Every time				

G20 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

#	Field Name		Lookup	Set	Туре	Length	Range Checks
		Name: NeverEveryTime SASFmt: NeverEveryTime					
		Val	Text	Culture Suppression			
		0	Never				No
1	SLeakUpChair	1	A few times		SMALLINT		range checks
		2	About half the time				checks
		3	Most of the time				
		4	Every time				

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

Never

G21 A few times

About half the time

Most of the time

Every time

#	Field Name		Lookup	Set	Туре	Length	Range Checks
1	SLeakWalk		e: NeverEveryTime erEveryTime	e SASFmt:	SMALLINT		No range checks
		Val	Text	Culture Suppression			
		0	Never				
		1	A few times				
		2	About half the time				
		3	Most of the time				

How often did you leak urine or wet a pad without feeling an urge to urinate or not in connection with physical activity?

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

#	Field Name		Lookup	Set	Туре	Length	Range Checks
	SLeakNoUrge		e: NeverEveryTin erEveryTime	ne SASFmt:			No
		Val	Text	Culture Suppression			
		0	Never				
1		1 A few times			SMALLINT		range checks
		2	About half the time				CHECKS
		3	Most of the time				
		4	Every time				

In the past 7 days...

How often did walking down stairs or stepping off a curb cause you to leak urine or wet a pad?

Never

G23

- A few times
 - About half the time
- Most of the time
- Every time

i	Field Name	Lookup Set	Туре	Length	Range Checks
	SLeakStairs	Name: NeverEveryTime SASFmt: 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		

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

#	Field Name		Lookup	Set	Туре	Length	Range Checks
			e: NeverEveryTinerEveryTime	me <i>SASFmt</i> :			
	SLeakNoReason	Val	Text	Culture Suppression			
		0	Never				No
1		1	A few times		SMALLINT		range checks
		2	About half the time				CHECKS
		3	Most of the time				
		4	Every time				

In the past 7 days...

G25

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

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

#	Field Name		Lookup	Set	Туре	Length	Range Checks
			e: NeverEveryTin erEveryTime	ne SASFmt:			
		Val	Text	Culture Suppression			
	SLeakNoFeel	0	Never				No
1		1 A few times			SMALLINT		range checks
		2	About half the time				checks
		3	Most of the time				
		4	Every time				

How often did you feel a need to urinate after you had just urinated?

- Never
- A few times G26
 - About half the time
 - Most of the time
 - Every time

#	Field Name		Lookup	Set	Туре	Length	Range Checks
1	SNeedJustAfter		e: NeverEveryTir rEveryTime	me <i>SASFmt:</i>	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		

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

- Never
- - About half the time
 - Most of the time
 - Every time

#	Field Name		Lookup	Set	Туре	Length	Range Checks
			e: NeverEveryTine erEveryTime	me <i>SASFmt</i> :	SMALLINT		
		Val	Text	Culture Suppression			
	SNotEmptyAfter	0	Never				No
1		1	A few times				range checks
		2	About half the time				CHECKS
		3	Most of the time				
		4	Every time				

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			Туре	Length	Range Checks
		Name: NeverEveryTime SASFmt: NeverEveryTime					
	1 SDribbleZipPants	Val	Text	Culture Suppression	SMALLINT		No
		0	Never				
1		1	A few times				range checks
		2	About half the time				CHECKS
		3	Most of the time				
		4	Every time				

H. CASUS, Screening Questions

 $\bullet \ \ This \ section \ suppressed \ if \ database \ function \ al.fn_GetProtocolVersion \ returns \ 1$

In the past 7 days...

How satisfied were you with your bladder function?

- Not at all satisfied
- Somewhat satisfied
- Very satisfied
- Extremely satisfied

#	Field Name		Lookup	Set	Туре	Length	Range Checks
1	TSatisfyBladderFunc	1 1001101	e: NotToExtreS Emt: NotToExtr		SMALLINT		No range checks
		Val	Text	Culture Suppression			
		0	Not at all satisfied				
		1	Somewhat				

H1

		satisfied		
	2	Very satisfied		
3	3	Extremely satisfied		

How bothered were you by urinary symptoms?

- Not at all bothered
- Somewhat bothered
- Very bothered
- Extremely bothered

#	Field Name		Lookup	Set	Туре	Length	Range Checks
	TBotherUrSympt		e: NotToExtreBo oExtreBother	ther SASFmt:			
		Val	Text	Culture Suppression			
1		0	Not at all bothered		SMALLINT		No range
		1	Somewhat bothered				checks
		2	Very bothered				
		3	Extremely bothered				

In the past 7 days...

How often did you have urinary or bladder problems of any kind?

Never

H3

- A few times
- About half the time
- Most of the time
- Every time

H2

1	TUrProblemOften	1 100110	e: NeverEveryTi erEveryTime	me <i>SASFmt</i> :	SMALLINT	No range checks
		Val Lext		Culture Suppression		
		0	Never			
		1 A few times				
		2	About half the time			
		3	Most of the time			
		4 Every time				

How would you rate your bladder or urinary function?

O Very poor

O Poor

O Good

Very good

#	Field Name		Loo	kup Set	Туре	Length	Range Checks
			e: PoorToGo ToGood	ood <i>SASFmt</i> :			
		Val	Text	Culture Suppression			
1	TUrFuncRate	0	Very poor		SMALLINT		No range checks
		1	Poor				
		2	Good				
		3	Very good				

I. CASUS, History Questions

H4

• This section suppressed if database function al.fn_GetProtocolVersion returns 1

Thinking back over your whole adult life...

Did you ever leak urine after feeling a sudden need to urinate?

No

Yes

#	Field Name	Lookup Set			Туре	Length	Range Checks
1	ULeakAfterSudden	Val	Text	No SASFmt: YesNo Culture Suppression	SMALLINT		No range checks
		0	No				
		1	Yes				

Thinking back over your whole adult life...

Did you ever have an accident where you completely emptied your bladder?

O No

O Yes

#	Field Name		L	ookup Set	Туре	Length	Range Checks	
	UAccidentEmpty	Name: YesNo SASFmt: YesNo						
1		Val	Text	Culture Suppression	SMALLINT		No range checks	
		0	No					
		1	Yes					

Thinking back over your whole adult life...

Did you ever leak urine with a laugh, sneeze, or cough?

No

O Yes

#	Field Name	Lookup Set	Type	Length	Range Checks
1	ULeakLaugh		SMALLINT		No range checks

	Nam	Text Culture Suppression			
	Val	Text	Culture Suppression		
	0	No			
	1	Yes			

Thinking back over your whole adult life...

Did you ever seek medical attention because you could not empty your bladder?

O No

I4

I5

O Yes

#	Field Name		L	ookup Set	Type	Length	Range Checks
		Name: YesNo SASFmt: YesNo					
1	UMedNotEmpty	Val	Text	Culture Suppression	SMALLINT		No range checks
		0	No				
		1	Yes				

Thinking back over your whole adult life...

Have you ever tried to stop urinating mid-stream?

- O No
- O Yes

#	Field Name		L	ookup Set	Type	Length	Range Checks
	UTryStopStream	Name: YesNo SASFmt: YesNo					
1		Val	Text	Culture Suppression	SMALLINT		No range checks
		0	No				
		1	Yes				

I6 Thinking back over your **whole adult life...**

If yes, how difficult was it to stop urination mid-stream?

Not difficult

- A little difficult
- Somewhat difficult
- Very difficult
- Unable to do

#	Field Name		Lookup	Set	Туре	Length	Range Checks
			e: EasyToUnabl ToUnable	e SASFmt:			No
		Val	Text	Culture Suppression			
		0	Not difficult				
1	UStopStreamHard	1 A little difficult 2 Somewhat difficult			SMALLINT		range checks
		3	3 Very difficult				
		4	Unable to do				

Thinking back over your whole adult life...

Have you ever been asked to give a mid-stream urine sample?

O No

I7

I8

Yes

#	Field Name	Lookup Set			Туре	Length	Range Checks
1	UMidStreamSample	Val T	YesN Text No Yes	No SASFmt: YesNo Culture Suppression	SMALLINT		No range checks

Thinking back over your whole adult life...

If yes, how difficult was it to stop urination mid-stream?

Not difficult

- A little difficult
- Somewhat difficult
- Very difficult
- Unable to do

#	Field Name	Lookup Set			Туре	Length	Range Checks
	UMidSampleHard	Name: EasyToUnable SASFmt: EasyToUnable					
		Val	Text	Culture Suppression	SMALLINT		No range checks
		0	Not difficult				
1		1	A little difficult				
		2	Somewhat difficult				
		3	Very difficult				
		4	Unable to do				

Questionnaire Complete

O Yes

#	Field Name	Lookup Set	Туре	Length	Range Checks
1	CenterComplete	Name: QuestComp SASFmt: QuestComp Val Text Culture Suppression	SMALLINT		No range checks
		1 Yes			

I9