

Data Set Name: analysis.sas7bdat

Num	Variable	Type	Len	Format	Informat	Label
1	AID	Num	8			Random Subject ID
2	age	Num	8			age (yrs) from time of randomization
3	hispanic	Num	8	HISPF.		Ethnicity
4	n_pregcat	Num	8	PPREGF.		#pregs categorized
5	menop	Num	8	MENOPF.		Pre,Post,Peri,??
6	any_hrt	Num	8	HRTF.		Any use of HRT
7	menohrt	Num	8	MENOHRTF.		Menopausal status/HRT use
8	bmi	Num	8			BMI(kg/m^2)
9	smok	Num	8	SMOKF.		Smoking status
10	nosurgtx	Num	8	YESNOFF.		HISTORY OF ANY NON-SURGICAL TREATMENT FOR UI
11	med_nonsurg	Num	8			past non-surgical trtm of medical
12	behav_nonsurg	Num	8			past non-surgical trtm of behavioral
13	elect_nonsurg	Num	8			past non-surgical trtm of electrical
14	other_nonsurg	Num	8			past non-surgical trtm of other
15	PEL_SURG	Num	8	X738F.	3.	F502: C1. Any pelvic surgeries including cesarean delivery?
16	gynec	Num	8			Previous Gynecologic Surgery
17	cesdel	Num	8			Previous Cesarean Delivery
18	bladuret_drugs	Num	8	YESNOF.		use of bladder/urethral drugs (yes to Form 503 B1 or yes to B2 and ditropan XL or hyoscyamine)
19	STRESS_VOLUM	Num	8	X401F.	4.	F504: D2. Volume at which leakage was observed
20	PVR	Num	8	X401F.	4.	F504: E1. PVR value that confirmed eligibility?
21	PVR_METHOD	Num	8	X475F.	3.	F504: E2. Assessed by which method?
22	URETHRAL_MOB	Num	8	X738F.	3.	F504: F1. Evidence of urethral mobility?
23	UMOB_METHOD	Num	8	X642F.	3.	F504: F2. Assessed by which method?
24	STRESS_SCORE	Num	8	X401F.	3.	F507: B10. Stress symptoms score
25	STRESS_INDEX	Num	8	X401F.	4.	F507: B11. Stress Index
26	URGE_SCORE	Num	8	X401F.	3.	F507: C7. Urge Symptoms Score
27	URGE_INDEX	Num	8	X401F.	4.	F507: C8. Urge Index
28	pgi_s	Num	8	X586F.	3.	F507: D1. Number that best describes how your urinary tract condition
29	ind_mstr	Num	8			Miss MESA Strss
30	ind_murg	Num	8			Miss MESA Urge
31	MESA_score	Num	8			total mesa score
32	MESA_index	Num	8			total mesa index
33	pgi_s_ind	Num	8			PGI_S moderate (3) or severe (4) (indicator = 1)
34	udi_o	Num	8			Obstructive Symptoms

Num	Variable	Type	Len	Format	Informat	Label
35	udi_i	Num	8			Irritative Symptoms
36	udi_s	Num	8			Stress Symptoms
37	udi_tot	Num	8			Total UDI
38	isi_scale	Num	8			ISI Scale
39	iiq_tot	Num	8			Total IIQ
40	pt_prep	Num	8			Preparedness
41	isi_ind	Num	8			isi_scale severe (8+) (indicator = 1)
42	pgi_s_12mo	Num	8	X586F.	3.	PGI-S - severity
43	pgi_i_12mo	Num	8	X721F.	3.	PGI-I - improvement
44	udi_o_12mo	Num	8			Obstructive Symptoms
45	udi_i_12mo	Num	8			Irritative Symptoms
46	udi_s_12mo	Num	8			Stress Symptoms
47	udi_tot_12mo	Num	8			Total UDI
48	isi_scale_12mo	Num	8			ISI Scale
49	iiq_tot_12mo	Num	8			Total IIQ
50	satisf1_12mo	Num	8			satisfaction with urine leakage
51	satisf2_12mo	Num	8			satisfaction with urgency
52	satisf3_12mo	Num	8			satisfaction with physical activity
53	satisf4_12mo	Num	8			satisfaction with frequency
54	satis_12mo	Num	8			mean of 4 satisfaction questions
55	satisf1d_12mo	Num	8			mostly or completely satisfied with urine leakage
56	satisf2d_12mo	Num	8			mostly or completely satisfied with urgency
57	satisf3d_12mo	Num	8			mostly or completely satisfied with physical activity
58	satisf4d_12mo	Num	8			mostly or completely satisfied with frequency
59	stress_score_12mo	Num	8			MESA stress score
60	urge_score_12mo	Num	8			MESA urge score
61	stress_index_12mo	Num	8			MESA stress index
62	urge_index_12mo	Num	8			MESA urge index
63	mesa_score_12mo	Num	8			sum stress_score and urge_score
64	mesa_index_12mo	Num	8			sum stress_index and urge_index
65	pgi_i_12mo	Num	8			very much better or much better on PGI-I (indicator of 1)
66	isi_ind_12mo	Num	8			isi_scale_12mo severe (8+) (indicator = 1)
67	pgi_s_ind_12mo	Num	8			PGI_S moderate (3) or severe (4) (indicator = 1)
68	PCS12	Num	8			physical SF12
69	MCS12	Num	8			mental SF12
70	sf12	Num	8			total SF12
71	pcs12_12mo	Num	8			PCS12 score
72	mcs12_12mo	Num	8			MCS12 score
73	sf12_12mo	Num	8			PCS and MCS score

Num	Variable	Type	Len	Format	Informat	Label
74	NIF_VOID_VOL	Num	8	X401F.	5.	corrected void_vol_nif
75	MAX_CYSTOMET	Num	8	X401F.	4.	MCC restricted to 100-900
76	DETRUS_PR_WI	Num	8	YN123F.	3.	F505: E2iv. Provoked detrusor overactivity with incontinence?
77	DETRUS_PR_WO	Num	8	YN123F.	3.	F505: E2iii. Provoke detrusor overactivity without incontinence?
78	DETRUS_SP_WI	Num	8	YN123F.	3.	F505: E2ii. Spontaneous detrusor overactivity with incontinence?
79	DETRUS_SP_WO	Num	8	YN123F.	3.	F505: E2i. Spontaneous detrusor overactivity without incontinence?
80	pattern_nif	Num	8	PATTERNF.		f505:B6.NIF flow pattern
81	max_fl_nif	Num	8			f505:B1.NIF max flow
82	void_vol_nif	Num	8			f505:B4.NIF voided volume
83	pvr_nif	Num	8			f505:B5. NIF post-void residual
84	typ_catheter	Num	8	TYPCATHF.		F505 C1: if C1>0
85	stat_sensory	Num	8	SENSORYF.		f505 D1: if D1>0
86	cystomet_max	Num	8			original cystomet_max variable with extreme values
87	func_detrus	Num	8	DETRUSORF.		f505 E1: if E1>0
88	comp_bladder	Num	8	SENSORYF.		f505 E3: if E3>0
89	re_usi	Num	8	YN123F.		f505 F1: if F1>0
90	leak_val	Num	8	YN123F.		f505 F1a: if F1a>0
91	volume_lpp	Num	8			f505 F1ai: if F1ai>0
92	vlpp_leak1	Num	8			f505 F1aii: if F1aii>0
93	method_meas	Num	8	METHMSF.		f505 F1aiii: if F1aiiii>0
94	leak_cough	Num	8	YN123F.		f505 F1b: if F1b>0
95	re_upp	Num	8	YN123F.		f505 F2: if F2>0
96	mucp_upp	Num	8			f505 F2b: if F2b>0
97	pat_pfs_voil	Num	8	PFSPATTF.		f505 G2: if G2>0
98	void_detrus	Num	8	SENSORYF.		f505 H1: if H1>0
99	void_urethr	Num	8	SENSORYF.		f505 H2: if H2>0
100	pvr_pfs	Num	8			f505 H3: if H3>0
101	re_video	Num	8	YN123F.		f505 H4: if H4>0
102	reprod_uro	Num	8	REPROF.		f505 H5: if H5>0
103	comorb_score	Num	8			comorbidity score
104	comorbcat	Num	8	COMORBCATF.		comorbidity categories
105	assignment	Num	8	X708F.	3.	F509: C2. What was the assignment by telephone?
106	sui_base	Num	8	X738F.	3.	F514: B1. Stress Urinary Incontinence
107	sui_conf_base	Num	8	X599F.	3.	F514: B1a. SUI: Rate confidence about decision
108	oab_inc_base	Num	8	X738F.	3.	F514: B2. OAB with incontinence (Urge Incontinence)

Num	Variable	Type	Len	Format	Informat	Label
109	oab_inc_conf_base	Num	8	X599F.	3.	F514: B2a. OAB w/ Incontinence: Rate confidence about decision
110	oab_base	Num	8	X738F.	3.	F514: B3. OAB without Incontinence (Urgency/frequency syndrome):
111	oab_conf_base	Num	8	X599F.	3.	F514: B3a. OAB w/o Incontinence: Rate confidence about decision
112	vpd_base	Num	8	X738F.	3.	F514: B4. Voiding Phase Dysfunction (Emptying Problems)
113	vpd_conf_base	Num	8	X599F.	3.	F514: B4a. VPD: Rate confidence about decision
114	isd_base	Num	8	X738F.	3.	F514: B5. Suspected Intrinsic Sphincter Deficiency (ISD)
115	isd_conf_base	Num	8	X599F.	3.	F514: B5a. ISD: Rate confidence about decision
116	sui_surg_base	Num	8	X547F.	3.	F514: C1. Which SUI surgery is planned for this patient
117	mid_sling_base	Num	8	X655F.	3.	F514: C1b. Kind of midurethral sling
118	trad_sling_base	Num	8	X464F.	3.	F514: C1c. Kind of traditional sling
119	sui_surg_mod_base	Num	8	X738F.	3.	F514: C2. Planned modifications to conventional performance of surgery
120	mod_more_obs_base	Num	8	X738F.	3.	F514: C2a. More obstructive
121	mod_less_obs_base	Num	8	X738F.	3.	F514: C2b. Less obstructive
122	therapy_base	Num	8	X738F.	3.	F514: C3. Any other therapy part of treatment plan for this patient
123	therapy_pf_base	Num	8	X738F.	3.	F514: C3a. PF Rehab
124	therapy_phar_base	Num	8	X738F.	3.	F514: C3b. Pharmacotherapy
125	therapy_oth_base	Num	8	X738F.	3.	F514: C3c. Other
126	tr_plan_conf_base	Num	8	X599F.	3.	F514: C4. Confident about treatment plan
127	sui_afteruds	Num	8	X738F.	3.	F524: B1. Stress urinary incontinence
128	sui_conf_afteruds	Num	8	X589F.	3.	F524: B1a. SUI: Rate confidence about decision
129	oab_inc_afteruds	Num	8	X738F.	3.	F524: B2. OAB with incontinence (or OAB-wet, Urge Incontinence)
130	oab_inc_conf_afteruds	Num	8	X589F.	3.	F524: B2a. OAB w/ Incontinence: Rate confidence about decision
131	oab_afteruds	Num	8	X738F.	3.	F524: B3. OAB without incontinence (Urgency/Frequency syndrome):
132	oab_conf_afteruds	Num	8	X589F.	3.	F524: B3a. OAB w/o Incontinence: Rate confidence about decision
133	vpd_afteruds	Num	8	X738F.	3.	F524: B4. Voiding phase dysfunction (Emptying Problems)
134	vpd_conf_afteruds	Num	8	X589F.	3.	F524: B4a. VPD: Rate confidence about decision
135	isd_afteruds	Num	8	X738F.	3.	F524: B5. Suspected intrinsic sphincter deficiency (ISD)
136	isd_conf_afteruds	Num	8	X589F.	3.	F524: B5a. ISD: Rate confidence about decision
137	proceed_surg_afteruds	Num	8	X738F.	3.	F524: C1. Do you still intend to proceed with surgery?
138	sui_surg_afteruds	Num	8	X547F.	3.	F524: C2. Which SUI surgery is planned for this patient
139	mid_sling_afteruds	Num	8	X655F.	3.	F524: C2b. Kind of midurethral sling

Num	Variable	Type	Len	Format	Informat	Label
140	trad_sling_afteruds	Num	8	X464F.	3.	F524: C2c. Kind of traditional sling
141	sui_surg_mod_afteruds	Num	8	X738F.	3.	F524: C3. Planned modifications to conventional performance of surgery
142	mod_more_obs_afteruds	Num	8	X738F.	3.	F524: C3a. Specify Planned Modifications - More obstructive
143	mod_less_obs_afteruds	Num	8	X738F.	3.	F524: C3b. Specify Planned Modifications - Less obstructive
144	therapy_afteruds	Num	8	X738F.	3.	F524: C4. Any other therapy part of treatment plan for this patient
145	therapy_pf_afteruds	Num	8	X738F.	3.	F524: C4a. Specify additional therapy - PF Rehab
146	therapy_phar_afteruds	Num	8	X738F.	3.	F524: C4b. Specify additional therapy - Pharmacotherapy
147	therapy_oth_afteruds	Num	8	X738F.	3.	F524: C4c. Specify additional therapy - Other
148	tr_plan_conf_afteruds	Num	8	X589F.	3.	F524: C5. Confident about treatment plan
149	sui_surg7_base	Num	8	SUIF.		7 categories for sui_base
150	sui_surgr_base	Num	8	YESNO01F.		rmus surgery (indicator of 1) baseline
151	sui_surg7_afteruds	Num	8	SUIF.		7 categories for sui_afteruds
152	sui_surgr_afteruds	Num	8	YESNO01F.		rmus surgery (indicator of 1) after uds
153	sui_conf_diff	Num	8			sui_conf_afteruds - sui_conf_base
154	oab_inc_conf_diff	Num	8			oab_inc_conf_afteruds - oab_inc_conf_base
155	oab_conf_diff	Num	8			oab_conf_afteruds - oab_conf_base
156	vpd_conf_diff	Num	8			vpd_conf_afteruds - vpd_conf_base
157	isd_conf_diff	Num	8			isd_conf_afteruds - isd_conf_base
158	sui_conf_base_di	Num	8	DIF.		sui_conf_base >=4 equates to 1
159	oab_inc_conf_base_di	Num	8	DIF.		oab_inc_conf >=4 equates to 1
160	oab_conf_base_di	Num	8	DIF.		oab_conf_base >= 4 equates to 1
161	vpd_conf_base_di	Num	8	DIF.		vpd_conf_base >= 4 equates to 1
162	isd_conf_base_di	Num	8	DIF.		isd_conf_base >= 4 equates to 1
163	sui_conf_afteruds_di	Num	8	DIF.		sui_conf_afteruds >= 4 equates to 1
164	oab_inc_conf_afteruds_di	Num	8	DIF.		oab_inc_conf_afteruds >= 4 equates to 1
165	oab_conf_afteruds_di	Num	8	DIF.		oab_conf_afteruds >= 4 equates to 1
166	vpd_conf_afteruds_di	Num	8	DIF.		vpd_conf_afteruds >= 4 equates to 1
167	isd_conf_afteruds_di	Num	8	DIF.		isd_conf_afteruds >= 4 equates to 1
168	tr_plan_conf_base_di	Num	8	DIF.		tr_plan_conf_base >= 4 equates to 1
169	tr_plan_conf_afteruds_di	Num	8	DIF.		tr_plan_conf_afteruds >=4 equates to 1
170	sui_surgmus_base	Num	8	YESNO01F.		mus (rmus, tmus or minisling) surgery (indicator of 1) baseline
171	sui_surgmus_afteruds	Num	8	YESNO01F.		mus (rmus, tmus or minisling) surgery (indicator of 1) after uds
172	msgdx	Num	8			missing clinical diagnosis on form 514 or form 524

Num	Variable	Type	Len	Format	Informat	Label
173	dxchange	Num	8			change in clinical diagnosis between form 514 and form 524
174	UDS_MODIF	Num	8	X738F.	3.	F510: B5. Modifications to conventional perf of this surgery?
175	OTH_SURG	Num	8	X738F.	3.	F510: B7. Were any other unplanned, medically-necess. surgeries perfo?
176	f510	Num	8			had surgery according to F510
177	concomsx	Num	8	YESNOFF.		Concom Surg
178	sui_surg7	Num	8	SUIF.		categorization of surgery
179	sui_surgr	Num	8	YESNO01F.		rmus surgery (indicator of 1)
180	sui_surgmus	Num	8	YESNO01F.		mus surgery (indicator of 1)
181	void_tx	Num	8			trtm for voiding dysfunction at 3 or 12 mo visit
182	urge_evid	Num	8			new or continuing urge incontinence at 3 or 12 mo visit
183	urge_tx	Num	8			new or continuing treatment for urge incontinence at 3 or 12 mo visit
184	sui	Num	8			new or continuing evidence of recurrent stress urinary incontinence (SUI) at 3 or 12 mo visit
185	sui_tx	Num	8			new or continuing treatment for recurrent SUI at 3 or 12 mo visit
186	stresstest	Num	8			positive empty or full bladder stress test (1=yes)
187	sae	Num	8			Any SAE
188	ae	Num	8			Any AE
189	saeae	Num	8			Any AE or SAE
190	utisaeae	Num	8			Any UTI AE or SAE
191	hui3ou_base	Num	8			HUI3 Overall Utility Score
192	hui3ou_12mo	Num	8			HUI3 Overall Utility Score
193	hui3ou_diff	Num	8			hui3ou_base - hui3ou_12mo
194	vd	Num	8			voiding dysfunction (1 indicator)
195	FINAL_STATUS	Num	8	X479F.	3.	F580: B1. What was the patient's final study status?
196	TREAT_PLAN	Num	8	X738F.	3.	F525: B1. UDS influence treatment plan
197	FREE_PATTERN	Num	8	X738F.	3.	F525: B1a. Free Uroflowmetry Pattern
198	FREE_NUMERIC	Num	8	X738F.	3.	F525: B1b. Free Uroflowmetry Numerical Values
199	FILLING_SENS	Num	8	X738F.	3.	F525: B1c. Filling Phase Sensation
200	FILLING_MCC	Num	8	X738F.	3.	F525: B1d. MCC
201	FILLING_DETR	Num	8	X738F.	3.	F525: B1e. Detrusor Function during Filling Cystometry
202	FILLING_URET	Num	8	X738F.	3.	F525: B1f. Urethral Closure Mechanism
203	FILLING_VLPP	Num	8	X738F.	3.	F525: B1g. VLPP
204	PFS_PATTERN	Num	8	X738F.	3.	F525: B1h. PFS Voiding Pattern
205	PFS_DIAGNOS	Num	8	X738F.	3.	F525: B1i. Voiding Phase Diagnosis
206	OPTION_VIDEO	Num	8	X738F.	3.	F525: B1j. Video findings during UDS (if used)
207	OPTION_UPP	Num	8	X738F.	3.	F525: B1k. UPP (if performed)

Num	Variable	Type	Len	Format	Informat	Label
208	UDS_NONSURG	Num	8	X738F.	3.	F525: B2a. Change to non-surgical treatment
209	UDS_SURG	Num	8	X738F.	3.	F525: B2b. Change surgical procedure
210	UDS_MODIFY	Num	8	X738F.	3.	F525: B2c. Modify surgical procedure
211	UDS_DELAY	Num	8	X738F.	3.	F525: B2d. Delay surgical procedure
212	UDS_OTHER	Num	8	X738F.	3.	F525: B2e. Other
213	UDS_OTH_SPEC	Char	100	\$100.	\$100.	F525: B2ei. Specify
214	UDS_YES_SPEC	Char	1024	\$1024.	\$1024.	F525: B2ai. Specify
215	days_r_12mo	Num	8			days from randomization to 12 mo visit
216	dur_of_incont	Num	8			Incontinence duration (months)
217	pct_red_udi	Num	8			percent reduction (baseline - 12mos)/baseline*100
218	pct_udi_70ind	Num	8			70% reduction in UDI (indicator of 1)
219	udi_tot_diff	Num	8			udi_tot - udi_tot_12mo
220	isi_scale_diff	Num	8			isi_scale - isi_scale_12mo
221	mesa_index_diff	Num	8			mesa_index - mesa_index_12mo
222	mesa_score_diff	Num	8			mesa_score - mesa_score_12mo
223	stress_index_diff	Num	8			stress_index - stress_index_12mo
224	stress_score_diff	Num	8			stress_score - stress_score_12mo
225	urge_index_diff	Num	8			urge_index - urge_index_12mo
226	urge_score_diff	Num	8			urge_score - urge_score_12mo
227	iiq_tot_diff	Num	8			iiq_tot - iiq_tot_12mo
228	pcs12_diff	Num	8			pcs12 - pcs12_12mo
229	mcs12_diff	Num	8			mcs12 - mcs12_12mo
230	sf12_diff	Num	8			sf12 - sf12_12mo
231	pgi_s_diff	Num	8			pgi_s - pgi_s_12mo
232	primary_outcome	Num	8			70% decrease in UDI from baseline to 12 mos and score of 1 or 2 on PGI-I at 12 mos (ind of 1)
233	primary_outcome_surg	Num	8			70% decrease in UDI and score 1 or 2 on PGI-I and negative stress test (ind of 1)
234	primary_outcome_senssucc	Num	8			primary outcome setting all missing to success
235	primary_outcome_sensfail	Num	8			primary outcome setting all missing to failure
236	primary_outcome_extreme	Num	8			primary outcome setting all missing to success in UDS, failure in BOE
237	primary_outcome_oextreme	Num	8			primary outcome setting all missing to success in BOE, failure in UDS
238	udsarm	Num	8			Assignment UDS (indicator of 1)
239	pp	Num	8			per protocol (1=PP)
240	surg	Num	8			had surgery according to having a F510
241	which_surg_cat	Num	8	W_S_CAT.		F510: B4 which surgery - categorized
242	which_midure_cat	Num	8	W_M_CAT.		F510: B4b Which midurethral surgery - categorized

Data Set Name: f501.sas7bdat

Num	Variable	Type	Len	Format	Informat	Label
1	REPEAT_MEAS	Num	8	YESORNOF.	3.	F501: A6. Is this a repeat measure due to a previously expired measure
2	STATUS	Num	8	X486F.	3.	F501: A7. Is the patient a current patient or new referral?
3	ETHNICITY	Num	8	YESORNOF.	3.	F501: B1. Do you consider yourself to be Hispanic or Latino?
4	RACE_WH	Num	8	YESORNOF.	3.	F501: B2a. Race: White, Caucasian
5	RACE_OTH	Num	8	YESORNOF.	3.	F501: B2f. Was any other race mentioned?
6	OCCUP_CODE	Num	8	X401F.	4.	F501: B5b. NAM-POWERS-BOYD OCCUPATION SCORE
7	SP_WORK_HIST	Num	8	YESORNOF.	3.	F501: B6. Has your spouse ever worked?
8	SP_OCC_CODE	Num	8	X401F.	4.	F501: B6b. NAM-POWERS-BOYD OCCUPATION SCORE
9	OCCUP2_CODE	Num	8	X401F.	4.	F501: B7b. NAM-POWERS-BOYD OCCUPATION SCORE
10	EVER_PREG	Num	8	YESORNOF.	3.	F501: C1. Have you ever been pregnant?
11	LIFETIME_CIG	Num	8	YESORNOF.	3.	F501: C4. Did you ever smoke more than 100 cigarettes?
12	CURR_SMOKE	Num	8	YESORNOF.	3.	F501: C5. Do you currently smoke?
13	AID	Num	8			Random Subject ID
14	educ_cat	Num	8	EDUC_CAT.		F501: B3. Education Condensed
15	mar_cat	Num	8	MAR_CAT.		F501: B4. Marriage Condensed
16	preg_cat	Num	8	PREG_CAT.		F501: C2. Number of Pregnancies Condensed
17	vag_cat	Num	8	VAG_CAT.		F501: C3. Number of Vaginal Deliveries Condensed

Data Set Name: f502.sas7bdat

Num	Variable	Type	Len	Format	Informat	Label
1	REPEAT_MEAS	Num	8	YESORNOF.	3.	F502: A5. Is this a repeat abstraction due to expired measures?
2	MENOPAUSE	Num	8	X630F.	3.	F502: B1. What is the patient's menopausal status?
3	HRT_STATUS	Num	8	YESORNOF.	3.	F502: B2. Is the patient on hormone replacement therapy?
4	EST_PATCH	Num	8	YESORNOF.	3.	F502: B2b. Is the patient taking progesterone?
5	PEL_SURG	Num	8	YESORNOF.	3.	F502: C1. Any pelvic surgeries including cesarean delivery?
6	NONSURG_TX	Num	8	YESORNOF.	3.	F502: C2. History of any non-surgical treatment for UI
7	inelig	Num	8	YESNOFF.		Is the patient's incontinence symptoms begin<3m
8	menohrt	Num	8	MENOHRTF.		Menopausal status/HRT use
9	NONS_TX_CODE_0	Num	8			F502: C2b. Non-Surgical Treatment Code 0
10	NONS_TX_CODE_1	Num	8			F502: C2b. Non-Surgical Treatment Code 1
11	NONS_TX_CODE_2	Num	8			F502: C2b. Non-Surgical Treatment Code 2
12	NONS_TX_CODE_3	Num	8			F502: C2b. Non-Surgical Treatment Code 3
13	NONS_TX_CODE_4	Num	8			F502: C2b. Non-Surgical Treatment Code 4
14	NONS_TX_CODE_5	Num	8			F502: C2b. Non-Surgical Treatment Code 5
15	NONS_TX_CODE_6	Num	8			F502: C2b. Non-Surgical Treatment Code 6
16	AID	Num	8			Random Subject ID
17	rando_dt_leak_start	Num	8			F502: D1. Randomization Date to Leakage Start Date
18	est_oral_new	Num	8	YNF.		F502: B2a. Is the patient taking estrogen? (Condensed)

Data Set Name: f503.sas7bdat

Num	Variable	Type	Len	Format	Informat	Label
1	REPEAT_MEAS	Num	8	YESORNOF.	3.	F503: A5. Is this a repeat measure due to a previously expired measure
2	INCONT_MEDS	Num	8	YESORNOF.	3.	F503: B1. Currently taking any medication for incontinence
3	ACH_MED	Num	8	YESORNOF.	3.	F503: B2. Currently taking any other medication with ACH properties?
4	DIURETICS	Num	8	YESORNOF.	3.	F503: B3. Currently taking any diuretics or combination anti-HTN
5	AID	Num	8			Random Subject ID

Data Set Name: f504.sas7bdat

Num	Variable	Type	Len	Format	Informat	Label
1	REPEAT_MEAS	Num	8	YESORNOF.	3.	F504: A5. Is this a repeat abstraction due to expired measures?
2	WEIGHT	Num	8	X401F.	4.	F504: B2. Weight in pounds
3	PROLAPSE	Num	8	YESORNOF.	3.	F504: C1. Anterior or apical prolapse >=+1 on standing straining exam
4	STRESS_VOLUM	Num	8	X401F.	4.	F504: D2. Volume at which leakage was observed
5	PVR	Num	8	X401F.	4.	F504: E1. PVR value that confirmed eligibility?
6	PVR_METHOD	Num	8	X475F.	3.	F504: E2. Assessed by which method?
7	URETHRAL_MOB	Num	8	YESORNOF.	3.	F504: F1. Evidence of urethral mobility?
8	UMOB_METHOD	Num	8	X642F.	3.	F504: F2. Assessed by which method?
9	bmi	Num	8			BMI(kg/m^2)
10	bmi_30	Num	8	YESORNOF.		BMI>30
11	AID	Num	8			Random Subject ID
12	rando_dt_HW_DATE	Num	8			F504: B3. Randomization Date to Measures Assessment Date
13	rando_dt_PROLAPSE_D	Num	8			F504: C2. Randomization Date to Prolapse Assessment Date
14	rando_dt_STRESS_DATE	Num	8			F504: D1. Randomization Date to Stress Test Date
15	rando_dt_PVR_DATE	Num	8			F504: E3. Randomization Date to PVR Assessment Date
16	rando_dt_MOBILITY_D	Num	8			F504: F3. Randomization Date to Mobility Assessment Date
17	height_new	Char	4			F054: B1. Height in Inches Condensed

Data Set Name: f505.sas7bdat

Num	Variable	Type	Len	Format	Informat	Label
1	NIF_PATTERN	Num	8	X485F.	3.	F505: B1. Pattern
2	DETRUS_FUNC	Num	8	X585F.	3.	F505: E1. Detrusor function during filling cystometry is:
3	BLADDER_COMP	Num	8	X582F.	3.	F505: E3. Bladder compliance:
4	USI	Num	8	YESORNOF.	3.	F505: F1. Urodynamic stress incontinence (USI)?
5	MEAS_METHOD	Num	8	X452F.	3.	F505: F1aiii. Select measurement method used to record VLPP data above
6	UPP	Num	8	YESORNOF.	3.	F505: F2. UPP's performed:
7	PFS_VOID_PAT	Num	8	X639F.	3.	F505: G2. PFS Voiding pattern
8	URETHR_VOID	Num	8	X580F.	3.	F505: H2. Urethral function during the void:
9	VIDEO	Num	8	YESORNOF.	3.	F505: H4. Was video used during urodynamics?
10	DETRUS_OV_UN	Num	8	YESORNOF.	3.	F505: E2v. Unsure or cannot be determined?
11	DETRUS_PR_WI	Num	8	YESORNOF.	3.	F505: E2iv. Provoked detrusor overactivity with incontinence?
12	DETRUS_PR_WO	Num	8	YESORNOF.	3.	F505: E2iii. Provoke detrusor overactivity without incontinence?
13	DETRUS_SP_WI	Num	8	YESORNOF.	3.	F505: E2ii. Spontaneous detrusor overactivity with incontinence?
14	DETRUS_SP_WO	Num	8	YESORNOF.	3.	F505: E2i. Spontaneous detrusor overactivity without incontinence?
15	max_fl_nif	Num	8			F505: B2. NIF max flow
16	void_vol_nif	Num	8			F505: B3. NIF voided volume
17	pvr_nif	Num	8			F505: B4. NIF post-void residual
18	voil_vol_150	Num	8	YNF.		F505: B4. Is voided volume (B3) at least 150 ml?
19	typ_catheter	Num	8	CATH_F.		F505: C1: Type of catheter and pressure measuring system
20	atm_catheter	Num	8	YESORNOF.		F505: C3: Zeroed to atmosphere?
21	stat_sensory	Num	8	SENS_F.		F505: D1: Sensory status for this patient
22	cystomet_max	Num	8			f505 D2: if D2>0
23	phas_detrus	Num	8	YNF.		F505: E2a. Phasic detrusor overactivity?
24	term_detrus	Num	8	YNF.		F505: E2b. Terminal detrusor overactivity?
25	unsur_detrus	Num	8	YNF.		F505: E2c. if E2c>0
26	volume_lpp	Num	8			f505 F1ai: if F1ai>0
27	vlpp_leak1	Num	8			f505 F1aii: if F1aii>0
28	leak_cough	Num	8	YNSF.		F505: F1b. Leaked with cough?
29	vol_upp_blad	Num	8			f505 F2a: if F2a>0
30	mucp_upp	Num	8			f505 F2b: if F2b>0
31	ful_upp	Num	8			f505 F2c: if F2c>0
32	position_pfs	Num	8	PFSPOSF.		f505 G1: if G1>0
33	void_detrus	Num	8	NORM_F.		F505: H1. Detrusor function during the void
34	pvr_pfs	Num	8			f505 H3: if H3>0
35	rest_video	Num	8	YNF.		F505: H4a. Bladder neck open at rest?
36	strain_video	Num	8	YNF.		F505: H4b. Bladder neck open with strain?

Num	Variable	Type	Len	Format	Informat	Label
37	vud_video	Num	8	YNF.		F505: H4c. Hypermobility imaged on VUD
38	leak_video	Num	8	YNF.		F505: H4d. Valsalva leakage observed on video and video imaged VLPPs were measured?
39	other_video	Num	8	YNF.		F505: H4e. Other diagnoses video provided?
40	AID	Num	8			Random Subject ID
41	rando_dt_uds_d	Num	8			F505: A5. Randomization Date to Date of UDS
42	VAL_LEAK_cat	Num	8	YNCF.		F505: F1a. Leaked with Valsalva? (Condensed)
43	dia_catheter_cat	Num	8	DIACATHF.		F505: C2. Bladder catheter diameter (Condensed)
44	re_position_cat	Num	8	POSIT_F.		F505: C4. Position: (Condensed)
45	reprod_uro_cat	Num	8	URO_CATF.		F505: H5: Urodynamic reproduction of patient symptoms (Condensed)

Data Set Name: f507.sas7bdat

Num	Variable	Type	Len	Format	Informat	Label
1	REPEAT_MEAS	Num	8	YESORNOF.	3.	F507: A7. Is this a repeat measure due to previously expired measures?
2	MESA_STR_1	Num	8	NRSOF.	3.	F507: B1. Does coughing gently cause you to lose urine
3	MESA_STR_2	Num	8	NRSOF.	3.	F507: B2. Does coughing hard cause you to lose urine
4	MESA_STR_3	Num	8	NRSOF.	3.	F507: B3. Does sneezing cause you to lose urine
5	MESA_STR_4	Num	8	NRSOF.	3.	F507: B4. Does lifting things cause you to lose urine
6	MESA_STR_5	Num	8	NRSOF.	3.	F507: B5. Does bending cause you to lose urine
7	MESA_STR_6	Num	8	NRSOF.	3.	F507: B6. Does laughing cause you to lose urine
8	MESA_STR_7	Num	8	NRSOF.	3.	F507: B7. Does walking briskly or jogging cause you to lose urine
9	MESA_STR_8	Num	8	NRSOF.	3.	F507: B8. Does straining cause you to lose urine
10	MESA_STR_9	Num	8	NRSOF.	3.	F507: B9. Does getting up from sitting cause you to lose urine
11	STRESS_SCORE	Num	8	X401F.	3.	F507: B10. Stress symptoms score
12	STRESS_INDEX	Num	8	X401F.	4.	F507: B11. Stress Index
13	MESA_URG_1	Num	8	NRSOF.	3.	F507: C1. Urge symptoms: Little warning
14	MESA_URG_2	Num	8	NRSOF.	3.	F507: C2. Urge symptoms: Wetting self
15	MESA_URG_3	Num	8	NRSOF.	3.	F507: C3. Urge symptoms: Sudden bladder full
16	MESA_URG_4	Num	8	NRSOF.	3.	F507: C4. Urge symptoms: Washing hands
17	MESA_URG_5	Num	8	NRSOF.	3.	F507: C5. Urge symptoms: Cold weather
18	MESA_URG_6	Num	8	NRSOF.	3.	F507: C6. Urge symptoms: Drinking cold beverages
19	URGE_SCORE	Num	8	X401F.	3.	F507: C7. Urge Symptoms Score
20	URGE_INDEX	Num	8	X401F.	4.	F507: C8. Urge Index
21	SUI_INCONT	Num	8	YESORNOF.	4.	F507: C9. Stress index > urge index
22	COND_NOW	Num	8	X586F.	3.	F507: D1. Number that best describes how your urinary tract condition
23	AID	Num	8			Random Subject ID
24	rando_dt_mesa_date	Num	8			F507: A8. Randomization Date to MESA Date
25	stress_score_c	Num	8			F507: B10. Continuous MESA Stress Symptoms Score
26	stress_index_c	Num	8			F507: B10. Continuous MESA Stress Symptoms Index
27	URGE_SCORE_C	Num	8			F507: C7. Continuous MESA Urge Symptoms Score
28	URGE_INDEX_C	Num	8			F507: C8. Continuous MESA Urge Symptoms Index

Data Set Name: f508.sas7bdat

Num	Variable	Type	Len	Format	Informat	Label
1	REPEAT_MEAS	Num	8	YESORNOF.	3.	F508: A7. Is this a Repeat Measure?
2	FREQ_URINE	Num	8	YESORNOF.	3.	F508: B1. frequent urination?
3	FREQ_URINE_A	Num	8	BOTH_CAT.	3.	F508: B1a. IF YES...
4	URGENCY	Num	8	YESORNOF.	3.	F508: B2. a strong feeling of urgency to empty your bladder?
5	URGENCY_A	Num	8	BOTH_CAT.	3.	F508: B2a. IF YES...
6	URGE_LEAK	Num	8	YESORNOF.	3.	F508: B3. urine leakage related to the feeling of urgency?
7	URGE_LEAK_A	Num	8	BOTH_CAT.	3.	F508: B3a. IF YES...
8	ACTV_LEAK	Num	8	YESORNOF.	3.	F508: B4. urine leakage related to physical activity?
9	ACTV_LEAK_A	Num	8	BOTH_CAT.	3.	F508: B4a. IF YES...
10	GEN_LEAK	Num	8	YESORNOF.	3.	F508: B5. general urine leakage not related to urgency or activity?
11	GEN_LEAK_A	Num	8	BOTH_CAT.	3.	F508: B5a. IF YES...
12	SMALL_LEAK	Num	8	YESORNOF.	3.	F508: B6. small amounts of urine leakage (that is, drops)?
13	SMALL_LEAK_A	Num	8	BOTH_CAT.	3.	F508: B6a. IF YES...
14	LARGE_LEAK	Num	8	YESORNOF.	3.	F508: B7. large amounts of urine leakage?
15	LARGE_LEAK_A	Num	8	X415F.	3.	F508: B7a. IF YES...
16	NITE_LEAK	Num	8	YESORNOF.	3.	F508: B8. nighttime urination?
17	NITE_LEAK_A	Num	8	BOTH_CAT.	3.	F508: B8a. IF YES...
18	BED_WET	Num	8	YESORNOF.	3.	F508: B9. bedwetting
19	BED_WET_A	Num	8	X415F.	3.	F508: B9a. IF YES...
20	DIFF_EMPTY	Num	8	YESORNOF.	3.	F508: B10. difficulty emptying your bladder?
21	DIFF_EMPTY_A	Num	8	BOTH_CAT.	3.	F508: B10a. IF YES...
22	INCOM_BLAD	Num	8	YESORNOF.	3.	F508: B11. a feeling of incomplete bladder emptying?
23	INCOM_BLAD_A	Num	8	BOTH_CAT.	3.	F508: B11a. IF YES...
24	ABD_PRESS	Num	8	YESORNOF.	3.	F508: B12. lower abdominal pressure?
25	ABD_PRESS_A	Num	8	BOTH_CAT.	3.	F508: B12a. IF YES...
26	PAIN_URIN	Num	8	YESORNOF.	3.	F508: B13. pain when urinating?
27	PAIN_URIN_A	Num	8	BOTH_CAT.	3.	F508: B13a. IF YES...
28	ABD_PAIN	Num	8	YESORNOF.	3.	F508: B14. pain in the lower abdominal or genital area?
29	ABD_PAIN_A	Num	8	BOTH_CAT.	3.	F508: B14a. IF YES...
30	DULL_PELVIC	Num	8	YESORNOF.	3.	F508: B15. heaviness or dullness in the pelvic area?
31	DUL_PELVIC_A	Num	8	BOTH_CAT.	3.	F508: B15a. IF YES...
32	PROT_FEEL	Num	8	YESORNOF.	3.	F508: B16. a feeling of bulging or protrusion in the vaginal area
33	PROT_FEEL_A	Num	8	BOTH_CAT.	3.	F508: B16a. IF YES...
34	PROT_SEE	Num	8	YESORNOF.	3.	F508: B17. bulging or protrusion you can see in the vaginal area?

Num	Variable	Type	Len	Format	Informat	Label
35	PROT_SEE_A	Num	8	BOTH_CAT.	3.	F508: B17a. IF YES...
36	PELV_DIS	Num	8	YESORNOF.	3.	F508: B18. pelvic discomfort when standing or physically exerting...
37	PELV_DIS_A	Num	8	BOTH_CAT.	3.	F508: B18a. IF YES...
38	PUSH_BLAD	Num	8	YESORNOF.	3.	F508: B19. Push on the vagina or perineum to empty bladder
39	PUSH_BLAD_A	Num	8	BOTH_CAT.	3.	F508: B19a. IF YES...
40	PUSH_BOWEL	Num	8	YESORNOF.	3.	F508: B20. Do you have to push on vagina to have a bowel movement
41	PUSH_BOWEL_A	Num	8	BOTH_CAT.	3.	F508: B20a. IF YES...
42	OTH_SYMP	Num	8	YESORNOF.	3.	F508: B21. Do you experience any other symptoms?
43	ISI_U_LOSS	Num	8	X495F.	3.	F508: B24. How much urine do you lose each time?
44	CHORES	Num	8	QUAL_CAT.	3.	F508: C1. ability to do household chores
45	RECR_ACT	Num	8	QUAL_CAT.	3.	F508: C2. physical recreational activities
46	ENTER_ACT	Num	8	QUAL_CAT.	3.	F508: C3. entertainment activities
47	TRAV_LESS_20	Num	8	QUAL_CAT.	3.	F508: C4. ability to travel by car or bus for distances less than 20
48	SOC_OUT_ACT	Num	8	QUAL_CAT.	3.	F508: C5. participation in social activities outside your home?
49	EMO_HEALTH	Num	8	QUAL_CAT.	3.	F508: C6. emotional health?
50	FRUSTRATION	Num	8	QUAL_CAT.	3.	F508: C7. frustration?
51	HEALTH	Num	8	X509F.	3.	F508: C8. In general, would you say your health is:
52	MOD_ACT	Num	8	LIMI_CAT.	3.	F508: C9. Health now limit you in moderate activities:
53	CLIMB_STAIRS	Num	8	LIMI_CAT.	3.	F508: C10. Health now limit you in climbing several flights of stairs:
54	PHY_LESS	Num	8	YESORNOF.	3.	F508: C11. Physical health accomplished less:
55	PHY_LIMIT	Num	8	YESORNOF.	3.	F508: C12. Physical health limited kind of work:
56	EMOT_LESS	Num	8	YESORNOF.	3.	F508: C13. Emotional problems accomplished less:
57	EMOT_LIMIT	Num	8	YESORNOF.	3.	F508: C14. Emotional problems didn't do activities as carefully:
58	FEEL_CALM	Num	8	X454F.	3.	F508: C16. Past 4 weeks have you felt calm and peaceful?
59	FEEL_ENERGY	Num	8	X454F.	3.	F508: C17. Past 4 weeks did you have a lot of energy?
60	FEEL_BLUE	Num	8	X454F.	3.	F508: C18. Past 4 weeks have you felt downhearted and blue?
61	SOC_INTRF	Num	8	X455F.	3.	F508: C19. Past 4 weeks has health/emotion interfered with social acts
62	SURG_ALTERN	Num	8	X688F.	3.	F508: D1. I know about alternatives to the planned surgery
63	SURG_PURPOSE	Num	8	X688F.	3.	F508: D2. I understand the purpose of the planned surgery
64	SURG_BENEFIT	Num	8	X688F.	3.	F508: D3. I understand the benefits of the planned surgery
65	SURG_RISKS	Num	8	X688F.	3.	F508: D4. I understand the risks of the planned surgery
66	SURG_COMPLIC	Num	8	X688F.	3.	F508: D5. I understand the complications of the planned surgery
67	P_HOSP	Num	8	X688F.	3.	F508: D6. I feel prepared about what to expect after surg/in hospital

Num	Variable	Type	Len	Format	Informat	Label
68	P_HOME	Num	8	X688F.	3.	F508: D7. I feel prepared about what to expect after surg/at home
69	P_CATH_HOSP	Num	8	X688F.	3.	F508: D8. I feel prepared to cope w/ a catheter after surg/in hospital
70	P_CATH_HOME	Num	8	X688F.	3.	F508: D9. I feel prepared to cope w/ a catheter after surgery/at home
71	DOC_TIME	Num	8	X688F.	3.	F508: D10. My MD & RNs spent enough time preparing for my upcoming surg
72	PREP_OVERALL	Num	8	X688F.	3.	F508: D11. Overall, I feel prepared for my upcoming surgery
73	AID	Num	8			Random Subject ID
74	rando_dt_DISTRIB_D	Num	8			F508: A3. Randomization Date to Date Form Distributed
75	rando_dt_SURVEY_DATE	Num	8			F508: A8. Randomization Date to Date patient completed survey
76	isi_leak_cat	Num	8	LEAK_CAT.		F508: B23. How often do you experience urinary leakage? (Condensed)
77	PAIN_INTRF_cat	Num	8	PAIN_CAT.		F508: C15. How much did pain interfere with normal work (Condensed)

Data Set Name: f509.sas7bdat

Num	Variable	Type	Len	Format	Informat	Label
1	CONSENT	Num	8	X728F.	3.	F509: B1. Did patient sign VALUE consent form
2	ELIGIBILITY	Num	8	X728F.	3.	F509: B2. Does patient meet all eligibility requirements per F500?
3	TELE_ASSIGN	Num	8	X708F.	3.	F509: C2. What was the assignment by telephone?
4	RAND_SIGN	Num	8	X728F.	3.	F509: E1. Signature Of Study Staff Completing Randomization:
5	AID	Num	8			Random Subject ID

Data Set Name: f510.sas7bdat

Num	Variable	Type	Len	Format	Informat	Label
1	FELLOW_ASSIS	Num	8	YESORNOF.	3.	F510: B3. Did a fellow assist with this case?
2	CONCOMI_SURG	Num	8	YESORNOF.	3.	F510: B6. Were any concomitant surgeries performed?
3	CONC_CONEBIO	Num	8	YESORNOF.	3.	F510: B6g. Cone biopsy
4	CONC_VULVAR	Num	8	YESORNOF.	3.	F510: B6j. Vulvar biopsy
5	CONC_ADX_SUR	Num	8	YESORNOF.	3.	F510: B6l. Adenexal surgery
6	AE_SURG	Num	8	YESORNOF.	3.	F510: C1. Did any adverse events occur during surgery?
7	SURG_SIG	Num	8	YESORNOF.	3.	F510: D1. Surgeon's Signature
8	AID	Num	8			Random Subject ID
9	rando_dt_SURG_SIG_D	Num	8			F510: D2. Randomization Date to Date of Signature
10	rando_dt_SURG_DATE	Num	8			F510: B1. Randomization Date to Date of Surgery
11	WHICH_SURG_cat	Num	8	W_S_CAT.		F510: B4. Which SUI procedure was performed? (Condensed)
12	WHICH_MIDURE_cat	Num	8	W_M_CAT.		F510: B4b. What kind of midurethral sling? (Condensed)

Data Set Name: f511.sas7bdat

Num	Variable	Type	Len	Format	Informat	Label
1	VM_DISCHARGE	Num	8	VMANAGEF.	3.	F511: B3. Specify type of voiding management at discharge
2	SURG_SIG	Num	8	X728F.	3.	F511: D1. Surgeon Signature
3	AID	Num	8			Random Subject ID
4	rando_dt_COMP_D	Num	8			F511: A3. Randomization Date to Date of Form Completed
5	rando_dt_HOSP_ADMIT	Num	8			F511: B1. Randomization Date to Date of Hospital Admission
6	rando_dt_HOSP_DIS	Num	8			F511: B2. Randomization Date to Date of Discharge
7	rando_dt_SURG_SIG_D	Num	8			F511: D2. Randomization Date to Date of Surgeon Signature

Data Set Name: f512.sas7bdat

Num	Variable	Type	Len	Format	Informat	Label
1	VISIT	Char	4	\$4.	\$4.	F512: A2. Visit #:
2	REPEAT_MEAS	Num	8	YESORNOF.	3.	F512: A7. Is this a repeat measure
3	LINERS	Num	8	X401F.	3.	F512: B1. Pantyliners or minipads
4	MAXIPADS	Num	8	X401F.	3.	F512: B2. Maxipads such as Kotex or Modess
5	INCONT_PADS	Num	8	X401F.	3.	F512: B3. Incontinence Pads such as Serenity or Poise
6	DIAPERS	Num	8	X401F.	3.	F512: B4. Diapers such as Depends or Attends
7	URETH_PADS	Num	8	X401F.	3.	F512: B5. Urethral pads such as Impress, Femassist
8	TOILET_PAP	Num	8	X401F.	3.	F512: B6. Toilet paper
9	PAP_TOWEL	Num	8	X401F.	3.	F512: B7. Paper towels
10	OTHER	Num	8	X401F.	3.	F512: B8a. Other
11	LAUNDRY	Num	8	X401F.	3.	F512: B9. How many loads of wash did you do 7 days
12	DC_PANTS	Num	8	X401F.	3.	F512: B10. Pants
13	DC_SKIRT	Num	8	X401F.	3.	F512: B11. Skirt
14	DC_DRESS	Num	8	X401F.	3.	F512: B12. Dress
15	DC_SUIT	Num	8	X401F.	3.	F512: B13. Suit
16	DC_BLOUSE	Num	8	X401F.	3.	F512: B14. Blouse
17	SEE_NEWS	Num	8	X444F.	3.	F512: C1. Which one best describes your ability to see... past week
18	SEE_FRIEND	Num	8	X444F.	3.	F512: C2. Which one of the following describes... recognize friend
19	DISCOMFORT_1	Num	8	X516F.	3.	F512: C8. Pain and discomfort you have experienced?
20	REMEMBER	Num	8	X443F.	3.	F512: C11. Ability to remember things?
21	DISCOMFORT_2	Num	8	X519F.	3.	F512: C15. Pain or discomfort
22	AID	Num	8			Random Subject ID
23	rando_dt_start_d	Num	8			F512: A8. Randomization Date to Date Survey Completed
24	rando_dt_DISTRIB_D	Num	8			F512: A3. Randomization Date to Date Form Distributed

Data Set Name: f514.sas7bdat

Num	Variable	Type	Len	Format	Informat	Label
1	REPEAT_MEAS	Num	8	YESORNOF.	3.	F514: A5. Is this a repeat form due to expired measures
2	SUI	Num	8	YESORNOF.	3.	F514: B1. Stress Urinary Incontinence
3	SUI_CONF	Num	8	X599F.	3.	F514: B1a. SUI: Rate confidence about decision
4	OAB_INC	Num	8	YESORNOF.	3.	F514: B2. OAB with incontinence (Urge Incontinence)
5	OAB_INC_CONF	Num	8	X599F.	3.	F514: B2a. OAB w/ Incontinence: Rate confidence about decision
6	OAB	Num	8	YESORNOF.	3.	F514: B3. OAB without Incontinence (Urgency/frequency syndrome):
7	OAB_CONF	Num	8	X599F.	3.	F514: B3a. OAB w/o Incontinence: Rate confidence about decision
8	VPD_CONF	Num	8	X599F.	3.	F514: B4a. VPD: Rate confidence about decision
9	ISD	Num	8	YESORNOF.	3.	F514: B5. Suspected Intrinsic Sphincter Deficiency (ISD)
10	ISD_CONF	Num	8	X599F.	3.	F514: B5a. ISD: Rate confidence about decision
11	SUI_SURG	Num	8	X547F.	3.	F514: C1. Which SUI surgery is planned for this patient
12	SUI_SURG_SPE	Char	100	\$100.	\$100.	F514: C1a. Other Surgical Procedure, Specify
13	MID_SLING	Num	8	X655F.	3.	F514: C1b. Kind of midurethral sling
14	TRAD_SLING	Num	8	X464F.	3.	F514: C1c. Kind of traditional sling
15	INJ_TYPE	Num	8	X478F.	3.	F514: C1d. Kind of injection
16	INJ_TYPE_NON	Char	100	\$100.	\$100.	F514: C1di. Specify non-collagen material
17	SUI_SURG_MOD	Num	8	YESORNOF.	3.	F514: C2. Planned modifications to conventional performance of surgery
18	MOD_MORE_OBS	Num	8	YESORNOF.	3.	F514: C2a. More obstructive
19	MOD_LESS_OBS	Num	8	YESORNOF.	3.	F514: C2b. Less obstructive
20	MOD_OTH	Num	8	YESORNOF.	3.	F514: C2c. Other
21	MOD_OTH_SPE	Char	100	\$100.	\$100.	F514: C2ci. If other, Specify.
22	THERAPY	Num	8	YESORNOF.	3.	F514: C3. Any other therapy part of treatment plan for this patient
23	THERAPY_PF	Num	8	YESORNOF.	3.	F514: C3a. PF Rehab
24	THERAPY_PHAR	Num	8	YESORNOF.	3.	F514: C3b. Pharmacotherapy
25	THERAPY_OTH	Num	8	YESORNOF.	3.	F514: C3c. Other
26	TH_OTH_SPE	Char	100	\$100.	\$100.	F514: C3ci. Specify
27	TR_PLAN_CONF	Num	8	X599F.	3.	F514: C4. Confident about treatment plan
28	DECISION	Num	8	X549F.	3.	F514: C5. Degree patient participate in decision of SUI surgery
29	DISCHRG_PLAN	Num	8	X682F.	3.	F514: C6. Method of bladder emptying at discharge
30	RISK_URGE_FR	Num	8	YESORNOF.	3.	F514: D1. Risk of urgency, frequency
31	RISK_URGE_UI	Num	8	YESORNOF.	3.	F514: D2. Risk of Urge UI:
32	URGE_UI_TYPE	Num	8	X626F.	3.	F514: D2a. Type of Urge UI

Num	Variable	Type	Len	Format	Informat	Label
33	RISK_RETEN	Num	8	YESORNOF.	3.	F514: D3. Risk of urinary retention from anti-incontinence surgery
34	SURG_SIGN	Num	8	X728F.	3.	F514: E1. Surgeon's Signature
35	AID	Num	8			Random Subject ID
36	rando_dt_SURG_SIGN_D	Num	8			F514: E2. Randomization Date to Date of Signature
37	PAT_URGE_RSK_cat	Num	8	TENSCALE.		F514: D1a. Urgency: Risk for this patient (Condensed)
38	PAT_UI_RSK_cat	Num	8	TENSCALE.		F514: D2b. Urge UI: risk for this patient (Condensed)
39	PAT_RET_RSK_cat	Num	8	S_SCALE.		F514: D3a. Retention: risk for this patient (Condensed)
40	PAT_FAIL_RSK_cat	Num	8	Z_SCALE.		F514: D4a. Failure: risk for this patient (Condensed)

Data Set Name: f516.sas7bdat

Num	Variable	Type	Len	Format	Informat	Label
1	VISIT	Char	4	\$4.	\$4.	F516: A2. Visit #
2	REPEAT_MEAS	Num	8	YESORNOF.	3.	F516: A5. Is This A Repeat Measure Due To Previously Expired Measure
3	ASTHMA	Num	8	YESORNOF.	3.	F516: B5. Do you have asthma?
4	DIABETES	Num	8	YESORNOF.	3.	F516: B8. Do you have diabetes (high blood sugar)?
5	ALZHEIMERS	Num	8	YESORNOF.	3.	F516: B13a. Alzheimer's Disease, or any other form of dementia
6	AID	Num	8			Random Subject ID
7	DIAB_MED_cat	Num	8	YNMF.		F516: B8aii. Diabetes treated: by taking medications by mouth? (Condensed)

Data Set Name: f524.sas7bdat

Num	Variable	Type	Len	Format	Informat	Label
1	SUI	Num	8	YESORNOF.	3.	F524: B1. Stress urinary incontinence
2	SUI_CONF	Num	8	X589F.	3.	F524: B1a. SUI: Rate confidence about decision
3	OAB_INC	Num	8	YESORNOF.	3.	F524: B2. OAB with incontinence (or OAB-wet, Urge Incontinence)
4	OAB_INC_CONF	Num	8	X589F.	3.	F524: B2a. OAB w/ Incontinence: Rate confidence about decision
5	OAB	Num	8	YESORNOF.	3.	F524: B3. OAB without incontinence (Urgency/ Frequency syndrome):
6	OAB_CONF	Num	8	X589F.	3.	F524: B3a. OAB w/o Incontinence: Rate confidence about decision
7	VPD	Num	8	YESORNOF.	3.	F524: B4. Voiding phase dysfunction (Emptying Problems)
8	VPD_CONF	Num	8	X589F.	3.	F524: B4a. VPD: Rate confidence about decision
9	ISD	Num	8	YESORNOF.	3.	F524: B5. Suspected intrinsic sphincter deficiency (ISD)
10	ISD_CONF	Num	8	X589F.	3.	F524: B5a. ISD: Rate confidence about decision
11	PROCEED_SURG	Num	8	YESORNOF.	3.	F524: C1. Do you still intend to proceed with surgery?
12	SUI_SURG	Num	8	X547F.	3.	F524: C2. Which SUI surgery is planned for this patient
13	SUI_SURG_SPE	Char	100	\$100.	\$100.	F524: C2a. Other Surgical Procedure, Specify
14	MID_SLING	Num	8	X655F.	3.	F524: C2b. Kind of midurethral sling
15	TRAD_SLING	Num	8	X464F.	3.	F524: C2c. Kind of traditional sling
16	THERAPY	Num	8	YESORNOF.	3.	F524: C4. Any other therapy part of treatment plan for this patient
17	THERAPY_PF	Num	8	YESORNOF.	3.	F524: C4a. Specify additional therapy - PF Rehab
18	TR_PLAN_CONF	Num	8	X589F.	3.	F524: C5. Confident about treatment plan
19	DECISION	Num	8	X549F.	3.	F524: C6. Degree patient participate in decision of SUI surgery
20	DISCHRG_PLAN	Num	8	X682F.	3.	F524: C7. Method of bladder emptying at discharge
21	RISK_URGE_FR	Num	8	YESORNOF.	3.	F524: D1. Risk of urgency, frequency
22	RISK_URGE_UI	Num	8	YESORNOF.	3.	F524: D2. Risk of Urge UI:
23	URGE_UI_TYPE	Num	8	X626F.	3.	F524: D2a. Type of Urge UI
24	RISK_FAIL	Num	8	YESORNOF.	3.	F524: D4. Risk of failure to treat SUI
25	SURG_SIGN	Num	8	YESORNOF.	3.	F524: E1. Surgeon's Signature
26	AID	Num	8			Random Subject ID
27	rando_dt_SURG_SIGN_D	Num	8			F524: E1. Randomization Date to Date of Signature
28	SUI_SURG_MOD_cat	Num	8	YNMF.		F524: C3. Planned modifications to conventional performance of surgery (Condensed)
29	MOD_LESS_OBS_cat	Num	8	YNMF.		F524: C3b. Specify Planned Modifications - Less obstructive (Condensed)
30	THERAPY_PHAR_cat	Num	8	YNMF.		F524: C4b. Specify additional therapy - Pharmacotherapy(Condensed)
31	PAT_URGE_RSK_cat	Num	8	TENSCALF.		F524: D1a. Urgency: Risk for this patient (Condensed)

Num	Variable	Type	Len	Format	Informat	Label
32	PAT_UI_RSK_cat	Num	8	TENSCALF.		F524: D2b. Urge UI: risk for this patient (Condensed)
33	PAT_FAIL_RSK_cat	Num	8	TENSCAF.		F524: D4a. Failure: risk for this patient (Condensed)
34	PAT_RET_RSK_cat	Num	8	TENFOURF.		F524: D3a. Retention: risk for this patient (Condensed)

Data Set Name: f525.sas7bdat

Num	Variable	Type	Len	Format	Informat	Label
1	TREAT_PLAN	Num	8	YESORNOF.	3.	F525: B1. UDS influence treatment plan
2	FREE_PATTERN	Num	8	YESORNOF.	3.	F525: B1a. Free Uroflowmetry Pattern
3	FREE_NUMERIC	Num	8	YESORNOF.	3.	F525: B1b. Free Uroflowmetry Numerical Values
4	FILLING_SENS	Num	8	YESORNOF.	3.	F525: B1c. Filling Phase Sensation
5	FILLING_MCC	Num	8	YESORNOF.	3.	F525: B1d. MCC
6	FILLING_DETR	Num	8	YESORNOF.	3.	F525: B1e. Detrusor Function during Filling Cystometry
7	FILLING_URET	Num	8	YESORNOF.	3.	F525: B1f. Urethral Closure Mechanism
8	FILLING_VLPP	Num	8	YESORNOF.	3.	F525: B1g. VLPP
9	PFS_PATTERN	Num	8	YESORNOF.	3.	F525: B1h. PFS Voiding Pattern
10	PFS_DIAGNOS	Num	8	YESORNOF.	3.	F525: B1i. Voiding Phase Diagnosis
11	OPTION_VIDEO	Num	8	YESORNOF.	3.	F525: B1j. Video findings during UDS (if used)
12	UDS_MODIFY	Num	8	YESORNOF.	3.	F525: B2c. Modify surgical procedure
13	UDS_OTHER	Num	8	YESORNOF.	3.	F525: B2e. Other
14	SURG_SIGN	Num	8	X728F.	3.	F525: C1. Surgeon's Signature
15	AID	Num	8			Random Subject ID
16	rando_dt_SURG_SIGN_D	Num	8			F525: C2. Randomization Date to Date of Signature

Data Set Name: f533.sas7bdat

Num	Variable	Type	Len	Format	Informat	Label
1	VISIT	Char	4	\$4.	\$4.	F533: A2. Visit #:
2	DIS_INC	Num	8	X739F.	3.	F533: B1. Discontinuation or change in frequency of incontinence meds?
3	ADD_INC	Num	8	X739F.	3.	F533: B2. Additions to medications for incontinence since last audit?
4	DIS_ACH	Num	8	X739F.	3.	F533: B3. Discontinuation/change in meds w/ anticholinergic properties
5	AID	Num	8			Random Subject ID

Data Set Name: f548.sas7bdat

Num	Variable	Type	Len	Format	Informat	Label
1	VISIT	Char	4	\$4.	\$4.	F548: A2. Visit #
2	MESA_STR_1	Num	8	FLEV_F.	3.	F548: B1. Does coughing gently cause you to lose urine
3	MESA_STR_2	Num	8	FLEV_F.	3.	F548: B2. Does coughing hard cause you to lose urine
4	MESA_STR_3	Num	8	FLEV_F.	3.	F548: B3. Does sneezing cause you to lose urine
5	MESA_STR_4	Num	8	FLEV_F.	3.	F548: B4. Does lifting things cause you to lose urine
6	MESA_STR_5	Num	8	FLEV_F.	3.	F548: B5. Does bending cause you to lose urine
7	MESA_STR_6	Num	8	FLEV_F.	3.	F548: B6. Does laughing cause you to lose urine
8	MESA_STR_7	Num	8	FLEV_F.	3.	F548: B7. Does walking briskly or jogging cause you to lose urine
9	MESA_STR_8	Num	8	FLEV_F.	3.	F548: B8. Does straining cause you to lose urine
10	MESA_STR_9	Num	8	FLEV_F.	3.	F548: B9. Does getting up from sitting cause you to lose urine
11	MESA_URG_1	Num	8	FLEV_F.	3.	F548: B10. Urge symptoms: Little warning
12	MESA_URG_2	Num	8	FLEV_F.	3.	F548: B11. Urge symptoms: Wetting self
13	MESA_URG_3	Num	8	FLEV_F.	3.	F548: B12. Urge symptoms: Sudden bladder full
14	MESA_URG_4	Num	8	FLEV_F.	3.	F548: B13. Urge symptoms: Washing hands
15	MESA_URG_5	Num	8	FLEV_F.	3.	F548: B14. Urge symptoms: Cold weather
16	MESA_URG_6	Num	8	FLEV_F.	3.	F548: B15. Urge symptoms: Drinking cold beverages
17	PGI_S	Num	8	X586F.	3.	F548: B16. Circle number that describes your urinary tract condition.
18	FREQ_URINE	Num	8	YESORNOF.	3.	F548: C1. frequent urination?
19	FREQ_URINE_A	Num	8	FOURA_F.	3.	F548: C1a. IF YES...
20	URGENCY	Num	8	YESORNOF.	3.	F548: C2. a strong feeling of urgency to empty your bladder?
21	URGENCY_A	Num	8	FOURA_F.	3.	F548: C2a. IF YES...
22	URGE_LEAK	Num	8	YESORNOF.	3.	F548: C3. urine leakage related to the feeling of urgency?
23	URGE_LEAK_A	Num	8	FOURA_F.	3.	F548: C3a. IF YES...
24	ACTV_LEAK	Num	8	YESORNOF.	3.	F548: C4. urine leakage related to physical activity
25	ACTV_LEAK_A	Num	8	FOURA_F.	3.	F548: C4a. IF YES...
26	GEN_LEAK	Num	8	YESORNOF.	3.	F548: C5. general urine leakage not related to urgency or activity?
27	GEN_LEAK_A	Num	8	FOURA_F.	3.	F548: C5a. IF YES...
28	SMALL_LEAK	Num	8	YESORNOF.	3.	F548: C6. small amounts of urine leakage (that is, drops)?
29	SMALL_LEAK_A	Num	8	FOURA_F.	3.	F548: C6a. IF YES...
30	LARGE_LEAK	Num	8	YESORNOF.	3.	F548: C7. large amounts of urine leakage?
31	LARGE_LEAK_A	Num	8	FOURA_F.	3.	F548: C7a. IF YES...
32	NITE_LEAK	Num	8	YESORNOF.	3.	F548: C8. nighttime urination?
33	NITE_LEAK_A	Num	8	FOURA_F.	3.	F548: C8a. IF YES...
34	BED_WET_A	Num	8	FOURA_F.	3.	F548: C9a. IF YES...

Num	Variable	Type	Len	Format	Informat	Label
35	DIFF_EMPTY	Num	8	YESORNOF.	3.	F548: C10. difficulty emptying your bladder?
36	DIFF_EMPTY_A	Num	8	FOURA_F.	3.	F548: C10a. IF YES...
37	INCOM_BLAD	Num	8	YESORNOF.	3.	F548: C11. a feeling of incomplete bladder emptying?
38	INCOM_BLAD_A	Num	8	FOURA_F.	3.	F548: C11a. IF YES...
39	ABD_PRESS	Num	8	YESORNOF.	3.	F548: C12. lower abdominal pressure?
40	ABD_PRESS_A	Num	8	FOURA_F.	3.	F548: C12a. IF YES...
41	PAIN_URIN_A	Num	8	FOURA_F.	3.	F548: C13a. IF YES...
42	ABD_PAIN	Num	8	YESORNOF.	3.	F548: C14. pain in the lower abdominal or genital area?
43	ABD_PAIN_A	Num	8	FOURA_F.	3.	F548: C14a. IF YES...
44	DULL_PELVIC	Num	8	YESORNOF.	3.	F548: C15. heaviness or dullness in the pelvic area?
45	DUL_PELVIC_A	Num	8	FOURA_F.	3.	F548: C15a. IF YES...
46	PROT_FEEL	Num	8	YESORNOF.	3.	F548: C16. a feeling of bulging or protrusion in the vaginal area
47	PROT_FEEL_A	Num	8	FOURA_F.	3.	F548: C16a. IF YES...
48	PROT_SEE_A	Num	8	FOURA_F.	3.	F548: C17a. IF YES...
49	PELV_DIS	Num	8	YESORNOF.	3.	F548: C18. pelvic discomfort when standing or physically exerting...
50	PELV_DIS_A	Num	8	FOURA_F.	3.	F548: C18a. IF YES...
51	PUSH_BLAD_A	Num	8	FOURA_F.	3.	F548: C19a. IF YES...
52	PUSH_BOWEL	Num	8	YESORNOF.	3.	F548: C20. Do you have to push on vagina to have a bowel movement
53	PUSH_BOWEL_A	Num	8	FOURA_F.	3.	F548: C20a. IF YES...
54	OTH_SYMP	Num	8	YESORNOF.	3.	F548: C21. Do you experience any other symptoms?
55	LEAK_FREQ	Num	8	WEEK_F.	3.	F548: C23. How often do you experience urinary leakage?
56	LEAK_AMOUNT	Num	8	X495F.	3.	F548: C24. How much urine do you lose each time?
57	CHORES	Num	8	FOUR_F.	3.	F548: C25. ability to do household chores
58	RECR_ACT	Num	8	FOUR_F.	3.	F548: C26. physical recreational activities
59	ENTER_ACT	Num	8	FOUR_F.	3.	F548: C27. entertainment activities
60	TRAV_LESS_20	Num	8	FOUR_F.	3.	F548: C28. ability to travel by car or bus for distances less than 20
61	SOC_OUT_ACT	Num	8	FOUR_F.	3.	F548: C29. participation in social activities outside your home?
62	EMO_HEALTH	Num	8	FOUR_F.	3.	F548: C30. emotional health?
63	FRUSTRATION	Num	8	FOUR_F.	3.	F548: C31. experience frustration?
64	HEALTH	Num	8	X509F.	3.	F548: D1. In general, would you say your health is:
65	MOD_ACT	Num	8	LIMITF.	3.	F548: D2. Health now limit you in moderate activities:
66	CLIMB_STAIRS	Num	8	LIMITF.	3.	F548: D3. Health now limit you in climbing several flights of stairs:
67	PHY_LESS	Num	8	YESORNOF.	3.	F548: D4. Physical health accomplished less:
68	PHY_LIMIT	Num	8	YESORNOF.	3.	F548: D5. Physical health limited kind of work:
69	EMOT_LESS	Num	8	YESORNOF.	3.	F548: D6. Emotional problems accomplished less:

Num	Variable	Type	Len	Format	Informat	Label
70	EMOT_LIMIT	Num	8	YESORNOF.	3.	F548: D7. Emotional problems didn't do activities as carefully:
71	PAIN_INTRF	Num	8	X596F.	3.	F548: D8. How much did pain interfere with normal work?
72	FEEL_CALM	Num	8	X454F.	3.	F548: D9. Past 4 weeks have you felt calm and peaceful?
73	FEEL_ENERGY	Num	8	X454F.	3.	F548: D10. Past 4 weeks did you have a lot of energy?
74	FEEL_BLUE	Num	8	X454F.	3.	F548: D11. Past 4 weeks have you felt downhearted and blue?
75	SOC_INTRF	Num	8	X455F.	3.	F548: D12. Past 4 weeks has health/emotion interfered with social acts?
76	UR_LEAK	Num	8	X481F.	3.	F548: E1. ...Urine leakage
77	UR_LEAK_URG	Num	8	X481F.	3.	F548: E2. ...Urine leakage related to feeling of urgency?
78	UR_LEAK_PHYS	Num	8	X481F.	3.	F548: E3. ...Urine leakage related to physical activity, coughing, or
79	UR_FREQ	Num	8	X481F.	3.	F548: E4. ...Frequency of urination?
80	PGI_1	Num	8	SEVEN_F.	3.	F548: E5. Urinary tract condition now, compared to before treatment:
81	AID	Num	8			Random Subject ID
82	rando_dt_SURVEY_DATE	Num	8			Randomization Date to Date you are completing this survey?
83	rando_dt_DISTRIB_D	Num	8			Randomization Date to Date Form Distributed

Data Set Name: f552.sas7bdat

Num	Variable	Type	Len	Format	Informat	Label
1	VISIT	Char	4	\$4.	\$4.	F552: A2. Visit #
2	VOID_TX	Num	8	YESORNOF.	3.	F552: B1. Treatment for voiding dysfunction since last data collection
3	CATHETER	Num	8	YESORNOF.	3.	F552: B1ai. Any catheter use
4	URGE_EVID	Num	8	YESORNOF.	3.	F552: B2. Evidence of urge incontinence since last data collection?
5	URGE_TX	Num	8	YESORNOF.	3.	F552: B3. Treatment for urge incontinence since last data collection?
6	SUI	Num	8	YESORNOF.	3.	F552: B4. Evidence of recurrent SUI since the last data collection?
7	UDS	Num	8	YESORNOF.	3.	F552: C1. Evidence of urodynamic studies since last data collection?
8	AE_OCCUR	Num	8	YESORNOF.	3.	F552: D1. Did any adverse events occur since last data collection?
9	PI_SIGN	Num	8	YESORNOF.	3.	F552: E1. Was this form signed by the Surgeon?
10	UDS_NCI	Num	8	YESORNOF.	3.	F552: C1avi. No Clinical Indication - Local Routine Post-Op Care
11	UDS_OTH	Num	8	YESORNOF.	3.	F552: C1avii. Other
12	UDS_OTH_SP	Char	150	\$150.	\$150.	F552: C1aviii. Specify if Other:
13	test	Num	8			B1:1=list treatments received for voiding dysfunction.
14	test1	Num	8			B3:1=list treatments received for urge incontinence
15	test3	Num	8			C1:1=list evidence of any urodynamic studies
16	AID	Num	8			Random Subject ID
17	rando_dt_PI_SIGN_D	Num	8			Randomization Date to Date of Surgeons Signature
18	rando_dt_CATHETER_D	Num	8			Randomization Date to Specify date catheter last used

Data Set Name: f553.sas7bdat

Num	Variable	Type	Len	Format	Informat	Label
1	EBST	Num	8	X401F.	4.	F553: B1. Voided volume prior to the empty bladder stress test (EBST):
2	EBST_VAL	Num	8	YESORNOF.	3.	F553: B2a. with Valsalva in dorsal lithotomy position?
3	EBST_COUGH	Num	8	YESORNOF.	3.	F553: B2b. with cough in dorsal lithotomy position?
4	BLAD_FILL	Num	8	X430F.	3.	F553: B4. Was bladder filled to 300mL or to an MCC <300mL?
5	FBST_VAL	Num	8	X755F.	3.	F553: B5i. with Valsalva in dorsal lithotomy position?
6	FBST_COUGH	Num	8	X755F.	3.	F553: B5ii. with cough in dorsal lithotomy position?
7	FBST_STAND_V	Num	8	X755F.	3.	F553: B5iii. with Valsalva standing?
8	FBST_STAND_C	Num	8	X755F.	3.	F553: B5iv. with cough standing?
9	WEIGHT	Num	8	X401F.	4.	F553: C1. Weight:
10	AID	Num	8			Random Subject ID
11	rando_dt_TEST_D	Num	8			Randomization Date to Date of Stress Test

Data Set Name: f580.sas7bdat

Num	Variable	Type	Len	Format	Label
1	AID	Num	8		Random Subject ID
2	rando_dt_admin_d	Num	8		F580: B4. Randomization Date to Date of Additional Comments
3	rando_dt_cons_wdraw	Num	8		F580: B3. Randomization Date to Patient who withdrew consent, date consent withdrawn
4	rando_dt_lost_d	Num	8		F580: B2. Randomization Date to Patient lost to follow-up, date last study data collected
5	rando_dt_pi_sig_d	Num	8		F580: C2. Randomization Date to Signature Date
6	rando_dt_wdraw_d	Num	8		F580: B3a. Randomization Date to Date last study data collected
7	LAST_VISIT_CAT	Char	15		F580: A4. Patients Last Study visit (Condensed)
8	FINAL_STATUS_CAT	Num	8	FINALF.	F580: B1. What was the patients final study status (Condensed)