

F501: Baseline Patient Interview

F501: Baseline Patient Interview, version 09/08/08 (A)							
SECTION A: GENERAL STUDY INFORMATION FOR OFFICE USE ONLY							
A1. Study ID#: LABEL							
A2. Visit # BaselineVBAS							
A3. Date Interview Completed: / Day /	Year						
A4. Interviewer Initials:							
A5. Which version of this form was used?	English 1 Spanish 2						
A6. Is this a repeat interview due to previously expired r	Yes						
A7. Is the patient a:	Current Patient 1						
A8. Has the patient been previously assigned a ValUE S	New Patient/Referral 2 Study ID? Yes 1						
	No 2 → SKIP TO B1						
A9. How many times has the patient been previously scr	eened?						
A10. Record the previous Study ID# most recently assig	ned:						

INSTRUCTIONS: We have a few general questions about you for this study, such as your race, marital status, education and a few other items. Some of the questions I will ask you today are of a personal and sensitive nature, but are necessary for the study. Let's begin...

SECTION B: SOCIODEMOGRAPHIC INFORMATION

B1.	Do you consider your ethnicity to be	Hispanic or Latin	o? YES	1	NO 2
B2.	For this question on racial backgroun select one or more choices from this read. Do you consider yourself to be	list that I'll	B2g.		E THAN ONE, ASK: Which do ider to be your primary racial nd?
	(READ AND CODE ALL RACE C	HOICES)			
		YES			
a.	White, Caucasian,	1	2		1
b.	Black, African American,	1	2		2
c.	Asian,	1	2		3
d.	Native Hawaiian, Pacific Islander,	1	2		4
e.	American Indian or Alaskan Native,.	1	2		5
f.	WAS ANY OTHER MENTIONED?	11			99
В3.	SPECIFY: What is the highest grade or year of s	school that you ha	ve completed?		
		Less than high s Completed high Some college/A	choolschool or GEI)	2
		Completed 4 year	ars of college.		4
		Graduate/Profes	sional degree.		5
B4.	What is your current marital status?	Married		1	
		Separated		2	
		Living as marrie	ed	3	
		Divorced		4	
		Widowed		5	
		Single, never ma	arried	6 → S	KIP TO B7
		OTHER		99 → Si	PECIFY:

B5.		we have some questions about employment, including self-employment and any full or part-time work. loes not include unpaid or volunteer work. Have you ever worked?
		YES 1
		NO 2 → SKIP TO B6
	B5a.	What type of work did you do or which occupation did you hold for the longest period of time? (PROBE : What do you consider your occupation to be?)
		SPECIFY:
	B5b.	NAM-POWERS-BOYD OCCUPATION SCORE:
B6.	-	our spouse / partner ever worked? OR (Did your spouse / partner ever work?) This includes self- byment.
		YES1
		NO 2 → SKIP TO SECTION C
	B6a.	What type of work did your spouse /partner do or what occupation did your spouse /partner hold for the longest period of time? (PROBE: What occupation does your spouse/partner consider himself / herself?) SPECIFY:
	B6b.	NAM-POWERS-BOYD OCCUPATION SCORE: → SKIP TO SECTION C
B7.		we have some questions about employment, including self-employment and any full or part-time work. loes not include unpaid or volunteer work. Have you ever worked?
		YES 1
		NO 2 \rightarrow SKIP TO SECTION C
В	B7a.	What type of work did you do or which occupation did you hold for the longest period of time? (PROBE : What do you consider your occupation to be?)
		SPECIFY:
	B7b.	NAM-POWERS-BOYD OCCUPATION SCORE:

SECTION C	 RISK 	FACTOR	S

C1. Have you ever been pregnant?

YES...... 1

NO 2

→ SKIP TO C4

C2. How many times have you been pregnant?

C3. How many of these pregnancies were vaginal deliveries?

C4. In your lifetime, did you ever smoke more than 100 cigarettes (or 5 packs of cigarettes)?

YES 1

YES.....

NO......2 → END OF FORM

C5. Do you currently smoke?

