



Personal and Family Health History Form

FORM CODE: PFH
VERSION A 10/06/2000

ID NUMBER:

CONTACT YEAR:

LAST NAME:

INITIALS:

“I would like to ask you a few questions about your health and that of your parents.”

1. Compared to other people your age, would you say that your health is excellent, good, fair, or poor?
- | | | |
|--|-----------|---|
| | Excellent | E |
| | Good | G |
| | Fair | F |
| | Poor | P |

Personal Health Problems: “Now I’m going to read a list of some health problems. After each one, please tell me if a doctor or health professional has ever said you have that problem.”

Has your doctor or health professional ever said you have:

- 2a. High blood pressure or hypertension?
- | | | |
|--|------------|---|
| | Yes | Y |
| <input type="text" value="Go to Item 3a"/> | No | N |
| | Don't know | D |

- 2b. How old were you when first told that you had high blood pressure or hypertension?
-
- age

- 3a. High blood cholesterol?
- | | | |
|--|------------|---|
| | Yes | Y |
| <input type="text" value="Go to Item 4a"/> | No | N |
| | Don't know | D |

- 3b. How old were you when first told that you had high blood cholesterol?.....
-
- age

- 4a. Heart attack?
- | | | |
|--|-----|---|
| | Yes | Y |
|--|-----|---|

Go to Item 5a	}	No	N
		Don't know	D

4b. How old were you when first told that you had a heart attack?

--	--	--

age

5a. Stroke? Yes Y

Go to Item 6a	}	No	N
		Don't know	D

5b. How old were you when first told that you had a stroke?.....

--	--	--

age

Has your doctor or health professional ever said you have:

6a. Sugar in the blood or diabetes? Yes Y

Go to Item 7a	}	No	N
		Don't know	D

6b. How old were you when first told that you had sugar in the blood or diabetes?

--	--	--

age

7a. Kidney problem? Yes Y

Go to Item 8a	}	No	N
		Don't know	D

7b. How old were you when first told that you had a kidney problem?

--	--	--

age

8a. Cancer? Yes Y

12b. Reason:

13. [IS YOUR NATURAL MOTHER LIVING? DO NOT ASK;
RECORD FROM ELIGIBILITY FORM.]
Y

Yes Go to Item 16

No N

Go to Item 17 Don't know D

14. Approximately how old was your mother when she died?
age

15a. What was the cause of your natural mother's death? Cancer C
Heart attack A
Stroke S
Unknown U
Other (Specify) O

Go to Item 17

15b. Specify:

Go to Item 17

16. How old is your mother?
age

Did your mother ever have (or does she have) any of the following diseases? [READ EACH DISEASE NAME]

17. Cancer? Yes Y
No N
Don't know D

18. Diabetes (sugar in the blood)? Yes Y
 No N
 Don't know D

19a. High blood pressure or hypertension? Yes Y
 No N
 Don't know D

Go to Item 20a

19b. How old was she when she was first told that she had high blood pressure or hypertension?
 age

20a. Stroke? Yes Y
 No N
 Don't know D

Go to Item 21a

20b. How old was she when she was first told that she had had a stroke?
 age

21a. Heart disease? Yes Y
 No N
 Don't know D

Go to Item 22

21b. How old was she when she was first told that she had heart disease?
 age

22. [IS YOUR NATURAL FATHER LIVING? **DO NOT ASK; RECORD FROM ELIGIBILITY FORM.**] Yes Go to Item 25
 Y

No N
 Don't know D

Go to Item 25

23. Approximately how old was your father when he died?
 age

29a. Stroke? Yes Y
 No N
 Don't know D

Go to Item 30a

29b. How old was he when he was first told that he had had a stroke?
 age

30a. Heart disease? Yes Y
 No N
 Don't know D

Go to Item 31a

30b. How old was he when he was first told that he had heart disease?
 age

“Now I have a few questions about your full brothers and sisters. Count only those who have the same natural mother and natural father as you, even if they are no longer living or you are no longer in touch with them. Do not include adopted or step brothers or sisters. Earlier you indicated that you have __ brothers and __ sisters still living.”

31a. [FULL BROTHERS LIVING. DO NOT ASK; RECORD FROM ELIGIBILITY FORM.]

31b. [FULL SISTERS LIVING. DO NOT ASK; RECORD FROM ELIGIBILITY FORM.]

31c. Were there any others who are no longer living? Yes
 Y

Go to Item 31f — No N

31d. How many full brothers are no longer living?

31e. How many full sisters are no longer living?

31f. [TOTAL NUMBER OF FULL BROTHERS AND FULL SISTERS.
DO NOT ASK; COMPUTE. IF NONE, ENTER "00".]

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If "00" Go to Item 37a

Have any of your brothers or sisters (whether living or no longer living) ever had any of the following diseases?
[READ EACH RESPONSE]

32a. Cancer? Yes Y

Go to Item 33a	{	No	N
	{	Don't know	D

32b. How many?

--	--

33a. Diabetes (sugar in the blood)? Yes Y

Go to Item 34a	{	No	N
	{	Don't know	D

33b. How many?

--	--

34a. High blood pressure or hypertension? Yes Y

Go to Item 35a	{	No	N
	{	Don't know	D

34b. How many?

--	--

34c. How many of these brothers and sisters were younger than 60 years of age when told they had high blood pressure or hypertension?

--	--

35a. Stroke? Yes Y

Go to Item 36a	{	No	N
	{	Don't know	D

--	--

35b. How many?

35c. How many of these brothers and sisters were younger than 60 years of age when told they had a stroke?

36a. Heart disease? Yes Y

No N
 Don't know D

Go to Item 37a

36b. How many?

36c. How many of these brothers and sisters were younger than 60 years of age when told they had heart disease?

"I also have a few questions about your natural children. Earlier you indicated that you have __ natural or biological children still living.

37a. [NATURAL CHILDREN LIVING. DO NOT ASK; RECORD FROM ELIGIBILITY FORM.]

IF "00" Go to Item 37c

37b. How many are over 18 years old?.....

37c. Were there any others who are no longer living? Yes Y

No N

Go to Item 38a

37d. How many natural children are no longer living?

Have any of your adult (age 18 or older) natural children (whether living or no longer living) ever been told they have:

38a. Cancer? Yes Y

No N
 Don't know D

Go to Item 39a

38b. How many?

39a. Diabetes (sugar in the blood)? Yes Y
No N
Don't know D

Go to Item 40a

39b. How many?

40a. High blood pressure or hypertension? Yes Y
No N
Don't know D

Go to Item 41 a

40b. How many?

40c. How many of these children were younger than 60 years of age when told they had high blood pressure or hypertension?

41a. Stroke? Yes Y
No N
Don't know D

Go to Item 42a

41b. How many?

41c. How many of these children were younger than 60 years of age when told they had a stroke?

42a. Heart disease? Yes Y
 No N
 Don't know D

Go to Item 43

42b. How many?

42c. How many of these children were younger than 60 years of age when told they had heart disease?

ADMINISTRATIVE INFORMATION

43. Date of data collection: / /
 m m d d y y y y

44. Code number of person completing this form: