

# Data User's Manual Version 6.2

**May 2006** 





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#### **Attachments**

**Attachment 1: Standard Screening MDE Field Descriptions** 

**Attachment 2: Standard Intervention MDE Field Descriptions** 

**Attachment 3: Examples of Project-Specific MDEs for the Screening MDE File** 

**Attachment 4: WISEWOMAN Data Submission Form** 

**Attachment 5: Standard Screening MDE Errors** 

**Attachment 6: Standard Intervention MDE Errors** 

**Attachment 7: Validation of the Alert Follow-Up Data** 

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**Projects Combined** 

**Attachment 9: Validation of Out-of-Range Values** 

**Attachment 10: Project-Specific Definitions of Intervention Completion** 

Attachment 11: New/Revised MDEs for the April 2008 and April 2009 MDE Submissions

# WISEWOMAN Data User's Manual Version 6.2

#### **Foreword**

This is Version 6.2 of the Data User's Manual. It has been updated from Version 6.1 released in October 2004. The first submission of data in Version 6.2 will be October 15, 2006. Changes to the manual from Version 6.1 to Version 6.2 are highlighted by a bar on the left margin of the manual. These changes are also outlined below.

Location	Change
All title pages and footnotes	Update version number and date
Table of Contents	Update (new sections and page #s)
Introduction, Table 1	Update submission and end dates
Data Values	Insert description of the procedure for validating out-of-range values
Submission Information	Add a checklist of all files and their naming conventions that must be submitted with each MDE submission
Future Changes to the User's Manual	Explain that future changes to the user's manual for April 2008 and April 2009 submissions are listed in Attachments 11 through 13.
All Attachments	Add page numbers
Attachments 1 and 2, Part B, Item 0a (MDE Version)	Update the version number
Attachments 1 and 2, Part B, Item 1a (State FIPS code)	Add the following codes: 04 Arizona (AZ) 33 New Hampshire (NH; part of VT's project) 38 North Dakota (ND; part of SD's project) 56 Wyoming (WY; part of SD's project)
Attachment 1, Part B, Item 1f (Intervention Type)	Add that AZ, MA (1996–1997), and WV are research projects.

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Location	Change
Attachments 1 and 2, Part B, Item 2c (Disposition Status)	Specify that records older than 6 months must be closed and that disposition status refers to screening (or intervention) variables associated with the particular screening visit (or intervention session).
Attachment 1, Part B, Item 3c (zip code of residence)	Change reporting from optional to required. Specify that zip codes with less than 5 participants may be suppressed or collapsed before submitting to RTI. Add the following codes: 77777 refused 88888 suppressed 99999 not asked
Attachment 1, Part B, Items 3f-3k (Race)	Delete "blank=unknown"
Attachment 1, Part B, Items 4b, 4d (Height/Weight Unit)	Replace "can" with "must"
Attachment 1, Part B, Items 3e, 7a-c, 8a-d (Hispanic Origin, Health History, Medication Use, Smoking)	Add the following codes: 7 Refused 8 Not Answered 9 Not Asked
Attachment 1, Part B, Item 8d (Smoking)	Add the following code: 5 yes (carryover from an earlier MDE version)
Attachment 1, Part B, Items 10a-d (following for alert BP)	Specify that two blood pressures must be averaged and rounded to determine if a woman has an alert value (average SBP>180 or average DBP>110).
Attachment 1, Part B, Items 10b, c, f, g, j, k (Referral and Exam Dates for Alert Values)	Specify that the fields are blank if xRefer^=1.
Attachment 1, Part B, Items 10d, 10h, 10l (Medication Status for Alert Values)	Add the following codes: 5 Already on meds 7 Refused 9 Lost-to-followup
Attachment 2, Part B, Items 4d (Type of Contact)	Add the following code: 5 audiotape (for use by IL only) Specify that contact type cannot be blank

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Location	Change
Attachment 2, Parts A & B, Item 5a (Intervention Completion)	Add new variable: intervention completion
Attachment 4	Include submission information for the cost report and the validation of out-of-range values
Attachment 7, Intervention MDE Errors	Add error messages for invalid and missing intervention completion indicator
Attachment 7	Clarify procedure for validation of followup data on alert cases
Attachment 8	Include the latest MDE charts (baseline and change reports)
Attachment 9	Add a new attachment for recording validated out-of-range values
Attachment 10	Add a list of project-specific intervention completion definitions.
Attachment 11	Provide detailed field descriptions of new and revised MDEs to be implemented for the April 2008 and April 2009 submissions

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#### Introduction

This Data User's Manual was written by RTI International (RTI) to consolidate the information needed to create data files for the Well-Integrated Screening and Evaluation for Women Across the Nation (WISEWOMAN) program. Specific goals of the WISEWOMAN Data User's Manual are to provide

- technical information necessary to produce files containing minimum data elements (MDEs),
- conventions to use in preparing the data,
- guidelines for ensuring data quality,
- guidelines for ensuring data confidentiality and security,
- sample charts, and
- technical assistance to the projects.

Data coordinators will use the WISEWOMAN Data User's Manual when they collect and prepare WISEWOMAN data for submission to RTI.

Files containing MDEs will be submitted to RTI twice annually: October 15 and April 15. The October 15 submission will cover MDEs for services provided from project inception through June 30 of the current year, and the April 15 submission will cover MDEs for services provided from project inception through December 31 of the previous year. Table 1 shows the submission dates and end dates for services provided for the next four submissions.

Table 1. Submission and End Dates for Services Provided

Submission Date	End Date for Services Provided
10/15/2006	6/30/2006
4/15/2007	12/31/2006
10/15/2007	6/30/2007
4/15/2008	12/31/2007

# **Definitions: WISEWOMAN Participants and Annual Rescreens**

MDE files will contain baseline and annual screening data for WISEWOMAN participants. A woman is a WISEWOMAN participant when she has consented, answered health behavior questions, and been screened for at least one cardiovascular disease (CVD) risk factor.

The evaluation (first annual) screenings are conducted 12 months ( $\pm$  2 months) after a participant's initial or baseline screening. At a minimum, a WISEWOMAN participant will be administered the same health behavior questions and screening tests that were administered at

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her initial or baseline screening. These data will be collected and reported every year that she participates in the program.

#### **Minimum Data Elements**

MDEs are a set of standardized data elements developed to ensure that consistent and complete information on screening location, participant demographic characteristics, screening results, and intervention sessions are collected on participants in the WISEWOMAN program. MDE submission consists of two files: Screening MDEs and Intervention MDEs. Screening MDEs consist of two sections: Standard Screening MDEs and Project-Specific Screening MDEs.

#### Standard Screening MDEs

Standard MDEs include data elements that are reported in a common format for all projects. The Standard Screening MDE field descriptions are included in **Attachment 1**, and the Standard Intervention MDE field descriptions are included in **Attachment 2**. **Attachments 1** and **2** consist of two parts: Part A lists the data elements and provides brief information about each data element, and Part B provides a more detailed description of the data elements.

#### **Project-Specific Screening MDEs**

In addition to the Standard MDEs, each project is required to define and provide at least one data element related to physical activity and at least one data element related to nutrition. Once defined, the same data elements should be submitted consistently across time. In other words, the Project-Specific Screening MDEs are standardized for each project over time. The purpose of these data is to capture the impact of a project-specific lifestyle intervention on improving physical activity and nutrition. For example, a project that emphasizes increased moderate-intensity walking would likely select a physical activity measure such as minutes of moderate-intensity walking per day. This question might be asked as follows: on a typical day, how much time do you spend doing moderate walking (fast enough to breathe a little harder)? Physical activity and nutrition data elements must be reported in the Project-Specific Screening MDE section, which follows the Standard Screening MDE section. Other examples of physical activity and nutrition data elements that projects may choose to submit are presented in **Attachment 3.** Projects must provide documentation for the project-specific data elements by completing the fields shown in Attachment 3. Other than physical activity and nutrition, no data elements are to be reported in the Project-Specific Screening MDE section. No project-specific data elements are to be reported in the Intervention MDE file.

#### **Data Conventions**

For each participant, MDEs are reported for each screening and intervention event, using the field descriptions shown in **Attachments 1** and **2**. The purpose of the following sections is to provide the projects with information necessary to collect, process, and submit Standard and Project-Specific MDEs in the correct format. These sections discuss definitions, data types, data

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availability, and data values. Individual projects should follow these conventions when defining project-specific data elements.

#### **Definitions**

Width

Width is the maximum number of characters (i.e., letters of the alphabet, numbers, and special characters) needed to represent a data element.

#### Position

Position is the location in the record of a data element.

The width and position of each data element are specified in the Screening and Intervention MDEs field descriptions (**Attachments 1** and **2**).

#### Data Types

#### Dates

Dates have the format MMDDCCYY, where:

- MM represents the month and has a range of 01–12; use leading zeros with months 01–09. If month is missing, month is blank.
- DD represents the day of the month and has a range of 01–31; use leading zeros with days 01–09. If day is missing, day is blank.
- CC represents the century and has a range of 19–20. If century is missing, century is blank.
- YY represents the year and has a range of 00–99; use leading zeros with years 00–09. If year is missing, year is blank.

Examples of valid dates:

01011999 12312000

#### Geographic Data Elements

Geographic data elements are state/tribal FIPS code, FIPS county code, county of residence, and ZIP code of residence. These are character data elements, right justified, and padded with zeros.

Examples of valid geographic data elements:

State/tribal FIPS code: 06 FIPS county code: 001

ZIP code: 06105

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#### Character Data Elements

Character data elements are composed of letters of the alphabet, numbers, and special characters. These are left justified and padded to the right with blanks. If data are missing or null, the item is blank.

Examples of valid character data elements:

ABC123 123abc

#### Numeric Data Elements

Numeric data elements are composed of numbers, minus signs, and decimal points. Numeric data elements are right justified. If numbers are expected to the right of the decimal, the number of decimal places will be specified in the Screening and Intervention MDE field descriptions. If data are missing or null, the item is blank.

Examples of valid numeric data elements:

123

1234

1.23

-1234

#### Data Values

Values allowed for each data element are specified in the Screening and Intervention MDE field descriptions (**Attachments 1** and **2**).

For data analysis purposes, out-of-range values are set to missing. However, if out-of-range values have been confirmed by the data manager as valid values, they will be left as is and will not be flagged in the validation report. All validated out-of-range values from the last 6 months of the reporting period should be recorded using **Attachment 9**.

#### File Information

#### File Types

Files are to be submitted in fixed-format ASCII text files. MDEs must be recorded in the locations shown in the Screening and Intervention MDEs in **Attachments 1** and **2**.

Each data element must conform to the width, type, and values shown in the Screening and Intervention MDEs.

#### File Content

Files contain all MDE data from project inception to the end date for services provided. Projects maintain and update the data as necessary and send the full file to RTI.

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#### File Naming Conventions

- File name has the format PPTTYYMM, where:
  - PP is the project abbreviation. Some standard project abbreviations are more than two characters (e.g., SCF, SEARHC); use the standard project abbreviation even if it is more than two characters.
  - TT is data type. The two data types are SC for screening data and IN for intervention data.
  - YYMM is the *date of the submission*. YY is the 2-digit year and MM is the month from 01–12. Use leading zeros when specifying years and months between 01 and 09.
- File extension is txt.

Examples of valid file names:

NCIN0210.txt
 SEARHCSC0610.txt

- NCSC0004.txt SCFIN0604.txt

#### **Submission Information**

- Data will be submitted to RTI twice annually: October 15 and April 15. The October 15 submission will cover MDEs for WISEWOMAN services provided from project inception to June 30 of the current year, and the April 15 submission will cover MDEs for services provided from project inception to December 31 of the previous year.
- Files must be submitted via the RTI WISEWOMAN Web site (see WISEWOMAN Web Site Section for more details).
- A WISEWOMAN Minimum Data Elements Submission Form must accompany each data submission (see **Attachment 4**).
- Projects must ensure that data submissions do not include any identifying or sensitive participant information.

The following is a checklist of all files and their naming conventions that must be submitted with each MDE submission:

File Description:	File Name (for the October'06 submission):
☐ MDE Screening File	PPSC0610.txt
☐ MDE Intervention File	PPIN0610.txt
☐ MDE Submission Form (Attachmen	nt 4) PPSubmission0610.doc
☐ WISEWOMAN Cost Report	PPCost0610.xls
(see Cost Estimation Approach provided	d by RTI)
Optional: Validation of Out-of-range	PPOutRange0610.xls
Values (Attachment 9)	
Where PP is the project abbreviation	n.

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#### **Data Quality**

Prior to data submission, projects will validate their data files using the application provided on the RTI WISEWOMAN Web site. The application will edit all Standard MDEs using the ranges, values, and dependencies shown in the Screening and Intervention MDE field descriptions in **Attachments 1** and **2**. The application will produce screening and intervention data validation error summary reports to outline any deviations from the required format in the data. Reports will be generated separately for the data from the last 6 months of the reporting period and for data older than 6 months. Copies of the error reports can be downloaded from the Web site for review and modification of the data. RTI will then discuss the results and strategies for reducing errors with the projects. Complete lists of error codes for Screening and Intervention MDE files are presented in **Attachments 5** and **6**, respectively.

**Attachment 7** outlines the procedure used to validate question 10 (alert follow-up) of the Screening MDE file.

RTI will continue to refine the edit specifications to help ensure that the data are of high quality. Applications editing the data will be revised to account for changes in the MDEs. Revisions to the edit specifications will be noted in the annual revision of the Data User's Manual.

# **Data Confidentiality and Security**

Files submitted via the RTI WISEWOMAN Web site will be encrypted.

Do not send any information to RTI that will allow the participant to be uniquely identified. Use encoded identifiers, sequence numbers, to uniquely identify participants.

Projects must ensure that all data submissions have been de-identified pursuant to the Health Insurance Portability and Accountability Act of 1996 (HIPAA). MDE submissions are considered to be "limited datasets" in which all identifying information has been removed, with the exceptions of encoded participant ID, county of residence, ZIP code of residence, date of birth, Hispanic origin, and race. The encoded participant ID must not be linked to any other datasets containing personal information.

Projects must ensure that submissions do not include any of the identifiers stipulated in HIPAA. RTI can provide lists of the identifiers if requested.

RTI will store the data in an area reserved for this study (i.e., a share), on its corporate servers. The servers are located in a locked room with restricted access and are backed up nightly. Only study staff have access to the share.

#### **WISEWOMAN Web Site**

The WISEWOMAN Web site will be used for the following functions:

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- Run the validation applications and generate files containing discrepancies in the data.
- Upload files for the semiannual data submission.
- View or download reports and documents:
  - Baseline charts
  - Change charts
  - Data User's Manual
  - RTI presentations

The Web site address is https://wisewoman.rti.org. Before logging in the first time, you must obtain a username and password from RTI. Instructions for using the Web site are included on the Web site and will be available after you log in.

#### **Data Use and Analysis**

MDE file submissions will be used to generate project-specific and overall MDE summary charts. Examples of MDE charts using data from all projects combined are included in **Attachment 8**. MDE data will be analyzed and used for evaluation of the WISEWOMAN program.

# **Future Changes to the User's Manual**

Additional changes to the User's Manual, including revisions of existing MDEs and additions of new MDEs, are planned for 2008 and 2009. **Attachment 11** provides detailed field descriptions of the new and revised MDEs to be included in the April 2008 and April 2009 MDE submissions. Updated versions of the User's Manual will be issued prior to these submissions; however, the changes are included in the current version to allow projects to begin preparing to implement the changes outlined in **Attachment 11**.

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# Attachment 1: Standard Screening MDE Field Descriptions

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Part A: Standard Screening MDE Field Descriptions

		Name	Туре	Location
0.	MDE Version			
	a. MDE Version	MDEVer	Numeric	1 - 3
1.	Screening Location			
	a. State/Tribal FIPS Code	StFIPS	Character	4 - 5
	b. Reserved for future use.	Reserve1	Character	6 - 7
	c. FIPS County Code	HdFIPS	Character	8 - 10
	d. City of Screening	HdCity	Character	11 - 25
	e. Enrollment Site ID	SiteID	Character	26 - 30
	f. Intervention Type	Type	Numeric	31 - 31
2.	Record Identification			
	a. Unique Screening Record ID Number	NRec	Numeric	32 - 37
	b. Reserved	Reserve2	Character	38 - 38
	c. Disposition Status	Disp	Numeric	39 - 39
3.	Participant Information			
	a. Unique Participant ID Number	EncodeID	Character	40 - 54
	b. County of Residence	CntyFIPS	Character	55 - 57
	c. ZIP Code of Residence	ZIP	Character	58 - 62
	d. Date of Birth	DOB	Numeric	63 - 70
	e. Hispanic or Latino Origin	Latino	Numeric	71 - 71
	f. First Race Listed	Race1	Numeric	72 - 72
	g. Second Race Listed	Race2	Numeric	73 - 73
	h. Third Race Listed	Race3	Numeric	74 - 74
	i. Fourth Race Listed	Race4	Numeric	75 - 75
	j. Fifth Race Listed	Race5	Numeric	76 - 76
	k. Sixth Race Listed	Race6	Numeric	77 - 77
	1. Education (highest grade completed)	Education	Numeric	78 - 79
	m. Reserved	Reserve3	Character	80 - 87
	n. Current Screening Date	Visit	Numeric	88 - 95
4.	Screening Information: Anthropometrics			
	a. Height	Height	Numeric	96 - 98
	b. Height Unit	Hgt_Unit	Numeric	99 – 99
	c. Weight	Weight	Numeric	100 - 102
	d. Weight Unit	Wgt_Unit	Numeric	103 - 103

(continued)

Part A: Standard Screening MDE Field Descriptions (continued)

			• ` `	
		Name	Type	Location
5.	Screening Information: Blood Pressure			
	a. Systolic #1, mm Hg	SBP1	Numeric	104 - 106
	b. Diastolic #1, mm Hg	DBP1	Numeric	107 - 109
	c. Systolic #2, mm Hg	SBP2	Numeric	110 - 112
	d. Diastolic #2, mm Hg	DBP2	Numeric	113 - 115
6.	Screening Information: Blood Lipids			
	a. Total Cholesterol, mg/dl	TotChol	Numeric	116 - 118
	b. HDL Cholesterol, mg/dl	HDL	Numeric	119 - 121
	c. Fasting Status for total cholesterol, (8 hours)	TCFast	Numeric	122 – 122
7.	Screening Information: Health History			
	a. Have you ever been told by a doctor, nurse or other health professional that your blood cholesterol is high?	SRHC	Numeric	123 – 123
	b. Have you ever been told by a doctor, nurse or other health professional that you have high blood pressure?	SRHB	Numeric	124 – 124
	c. Have you ever been told by a doctor, nurse or other health professional that you have diabetes?	SRD	Numeric	125 – 125
8.	Screening Information: Medication/Tobacco Status			
	a. Are you currently taking medication for high cholesterol?	HCMeds	Numeric	126 – 126
	b. Are you currently taking medication for high blood pressure?	HBPMeds	Numeric	127 – 127
	c. Are you currently taking medication for diabetes?	DMeds	Numeric	128 – 128
	d. Do you now smoke cigarettes?	Smoker	Numeric	129 - 129
9.	Screening Information: Additional Readings			
	a. Glucose, mg/dl	Glucose	Numeric	130 - 132
	b. Fasting status for glucose (8 hours)	<b>BGFast</b>	Numeric	133 - 133
	c. LDL Cholesterol, mg/dl	LDL	Numeric	134 - 136
	d. Triglycerides, mg/dl	Trigly	Numeric	137 - 140
	e. Hemoglobin A1C, %	HbA1C	Numeric	141 - 144

(continued)

Part A: Standard Screening MDE Field Descriptions (continued)

		Name	Туре	Location
10. Sc	reening Information: Alert Values			
a.	If average SBP>180 or DBP>110, was participant referred for a diagnostic exam?	BPRefer	Numeric	145 – 145
b.	If average SBP>180 or DBP>110, referral date for the diagnostic exam.	BPReDate	Numeric	146 – 153
c.	If average SBP>180 or DBP>110, diagnostic exam date.	BPDiDate	Numeric	154 – 161
d.	If average SBP>180 or DBP>110, was participant prescribed medication?	BPMeds	Numeric	162 – 162
e.	If TC>400, was participant referred for a diagnostic exam?	TCRefer	Numeric	163 – 163
f.	If TC>400, referral date for the diagnostic exam.	TCReDate	Numeric	164 – 171
g.	If TC>400, diagnostic exam date.	<b>TCDiDate</b>	Numeric	172 - 179
h.	If TC>400, was participant prescribed medication?	TCMeds	Numeric	180 - 180
i.	If BG>375, was participant referred for a diagnostic exam?	BGRefer	Numeric	181 – 181
j.	If BG>375, referral date for the diagnostic exam.	BGReDate	Numeric	182 – 189
k.	If BG>375, diagnostic exam date.	<b>BGDiDate</b>	Numeric	190 - 197
1.	If BG>375, was participant prescribed medication?	BGMeds	Numeric	198 – 198

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# Part B: Standard Screening MDE Field Descriptions

# **MDE Version**

Item 0a: MDE Version

Purpose To specify the version of the MDE that was used to construct the file.

Name MDEVer

Length 3

Type Numeric
Justification Right
Leading Zeros No
Beginning Position 1

Edits Cannot be blank.
Contents 620 Version 6.20

Explanation Enter the version of the MDE that was used to construct the files.

Example MDE version 6.20: 620

(continued)

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#### **Screening Location**

Item 1a: State/Tribal FIPS Code

Purpose To specify the FIPS or Tribal Project code for the state, territory, or Tribe

where screening occurred.

Name StFIPS

Length 2

Type Character

Justification Left
Leading Zeros Yes
Beginning Position 4

Edits Valid FIPS state/tribal code; cannot be blank.

Contents 04 Arizona (AZ)

06 California (CA)09 Connecticut (CT)

17 Illinois (IL)19 Iowa (IA)

25 Massachusetts (MA)

26 Michigan (MI)27 Minnesota (MN)29 Missouri (MO)31 Nebraska (NE)

33 New Hampshire (NH; part of VT's project)

34 New Jersey (NJ)36 New York (NY)37 North Carolina (NC)

38 North Dakota (ND; part of SD's project)

46 South Dakota (SD)50 Vermont (VT)54 West Virginia (WV)

56 Wyoming (WY; part of SD's project)

85 Southeast Alaska Region Health Consortium (SEARHC)

92 Southcentral Foundation (SCF)

Explanation The state FIPS codes are the Federal Information Processing Standard

codes developed by the National Bureau of Standards. The Tribal Project codes are codes assigned by the CDC to be used by the Tribal Projects in

lieu of state and territory FIPS.

Example Connecticut: 09

(continued)

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# **Screening Location**

Item 1b: Reserved for future use.

Purpose

Name Reserve1

Length 2

Type Character

Justification Left
Leading Zeros n/a
Beginning Position 6

Edits None.

Contents

Explanation This space reserved for future use.

Example

#### **Screening Location**

Item 1c: FIPS County Code

Purpose To specify the FIPS code for the county of the primary screening

provider.

Name HdFIPS

Length 3

Type Character

Justification Left
Leading Zeros Yes
Beginning Position 8

Edits Valid FIPS county code; cannot be blank (except for states without

counties).

Contents

Explanation This is the FIPS county code of the primary screening provider. The

county FIPS codes are the Federal Information Processing Standard codes developed by the National Bureau of Standards. There are 3-digit codes for each county in a state. If you need a list of these codes for your

state or territory, we can supply it.

For states without counties and Tribal Projects (i.e., SEARHC [85] and

SCF [92]), enter blank.

Example Alameda County, CA: 001

(continued)

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#### **Screening Location**

Item 1d: City of Screening

Purpose To specify the city of the primary provider.

Name HdCity Length 15

Type Character

Justification Left
Leading Zeros n/a
Beginning Position 11

Edits Valid city or town for your project; cannot be blank.

Contents

Explanation This is the city of the primary screening provider. Record the first 15

characters of the name of the city if the name exceeds 15 characters.

Example Raleigh, NC: Raleigh

#### **Screening Location**

Item 1e: Enrollment Site ID

Purpose To specify the point of enrollment into the project.

Name SiteID

Length 5

Type Character

Justification Left
Leading Zeros n/a
Beginning Position 26

Edits Valid code for the site; cannot be blank.

Contents

Explanation This is the point of enrollment of the participant to the project. The intent

is to identify the site that is administratively responsible for the care and

tracking of a participant.

Example Cedar Clinic: 00025

(continued)

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#### **Screening Location**

Item 1f: Intervention Type

Purpose To indicate the type of care a participant in a research project is

receiving.

Name Type Length 1

Type Numeric
Justification Right
Leading Zeros No
Beginning Position 31

Edits Valid range; must be blank if nonresearch project.

Contents 1 Usual care in research projects

2 Enhanced intervention in research projects

Blank Nonresearch project

Explanation Identifies whether the participant is part of the usual or enhanced

intervention for research projects. Research projects are AZ (04), CA (06), IL (17), IA (19), MA (25) in 1996-97, SCF (92), NC Vanguard Site

(37), and WV (54).

Example Usual care in research projects: 1

#### **Record Identification**

Item 2a: Unique Screening Record ID Number
Purpose To uniquely identify records within the file.

Name NRec Length 6

Type Numeric
Justification Right
Leading Zeros No
Beginning Position 32

Edits Cannot be blank.

Contents

Explanation The record ID number is unique and is a sequence number from 1 to the

number of records in the file.

Example Sequence number: 254

(continued)

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#### **Record Identification**

Item 2b: Reserved

Purpose

Name Reserve2

Length 1

Type Character

Justification Left
Leading Zeros n/a
Beginning Position 38
Edits None.

Contents

Explanation This space reserved for future use.

Example

#### **Record Identification**

Item 2c: Disposition Status

Purpose To indicate whether the record is complete and can be processed.

Name Disp Length 1

Type Numeric
Justification Right
Leading Zeros No
Beginning Position 39

Edits Valid range; cannot be blank.

Contents 1 Open (additional data expected)

2 Closed (complete)

Explanation Identifies partially complete records. Refers to only screening variables

associated with the particular screening visit captured in the record. Only closed records (Disp=2) will be processed. Records from the last 6 months of the reporting period only can remain open (i.e., all records older than 6 months must be closed regardless of data completion).

Example Closed: 2

(continued)

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**Participant Information** 

Item 3a: Unique Participant ID Number

Purpose To uniquely identify a participant.

Name EncodeID

Length 15

Type Character

Justification Left
Leading Zeros n/a
Beginning Position 40

Edits Cannot be blank.

Contents

Explanation If Social Security number is used, encode it. One simple method is to

rearrange the order of the 9 digits. The ID number is unique and constant

for each participant in order to track the participant over time.

WISEWOMAN uses the NBCCEDP ID number.

Example ID: 1234567890

**Participant Information** 

Item 3b: County of Residence

Purpose To specify the county of residence of the participant.

Name CntyFIPS

Length 3

Type Character

Justification Left
Leading Zeros Yes
Beginning Position 55

Edits Valid county FIPS code; can be blank if ZIP code of residence is

provided.

Contents

Explanation If unknown, blank fill. Not required if ZIP code of residence is provided.

Example Alameda County, CA: 001

(continued)

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## **Participant Information**

Item 3c: ZIP Code of Residence

Purpose To specify the ZIP code of residence.

Name ZIP Length 5

Type Character

Justification Left
Leading Zeros Yes
Beginning Position 58

Edits Valid ZIP code

Contents Zip code

77777 refused 88888 suppressed 99999 not asked

Explanation Required even if county of residence is provided.

Zip codes with less than 5 participants may be collapsed or suppressed

before submitting to RTI.

Example ZIP code: 27608

#### **Participant Information**

Item 3d: Date of Birth

Purpose To specify the date of birth of the participant.

Name DOB Length 8

Type Numeric
Justification Right
Leading Zeros Yes
Beginning Position 63

Edits Cannot be blank.
Contents MMDDCCYY Date

Explanation Age is computed using the date of birth and the screening date. A

participant must be between 40 and 65 at the time of her initial or

baseline screening.

Example January 3, 1942: 01031942

(continued)

# **Participant Information**

Item 3e: Hispanic or Latino Origin

Purpose To indicate whether the participant is of Hispanic or Latino origin.

Name Latino

Length 1

Type Numeric
Justification Right
Leading Zeros No
Beginning Position 71

Edits Valid range; cannot be blank.

Contents 1 Yes

2 No

3 Don't Know

7 Refused

8 Not Answered

9 Not Asked

Explanation Indicate whether the participant is of Hispanic or Latino origin.

Example Hispanic: 1

(continued)

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# **Participant Information**

Item 3f: First Race Listed

Purpose To specify the race of the participant.

Name Race1

Length 1

Type Numeric
Justification Right
Leading Zeros No
Beginning Position 72

Edits Valid range
Contents 1 White

2 Black or African American

3 Asian

4 Native Hawaiian or Other Pacific Islander

5 American Indian or Alaska Native

7 Unknown

8 Asian/Pacific Islander (carryover from version 4.1 of NBCCEDP's

race codes)

Explanation Race must be recorded. If a participant self identifies more than one race,

report the additional races in separate fields.

Example White: 1

(continued)

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# **Participant Information**

Item 3g: Second Race Listed

Purpose To specify the race of the participant.

Name Race2

Length 1

Type Numeric
Justification Right
Leading Zeros No
Beginning Position 73

Edits Valid range

Contents 1 White

2 Black or African American

3 Asian

4 Native Hawaiian or Other Pacific Islander

5 American Indian or Alaska Native

7 Unknown

8 Asian/Pacific Islander (carryover from version 4.1 of

NBCCEDP's race codes)

Explanation This field is left blank unless the participant reports two or more races.

Example Black: 2

(continued)

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# **Participant Information**

Item 3h: Third Race Listed

Purpose To specify the race of the participant.

Name Race3

Length 1

Type Numeric
Justification Right
Leading Zeros No
Beginning Position 74

Edits Valid range

Contents 1 White

2 Black or African American

3 Asian

4 Native Hawaiian or Other Pacific Islander

5 American Indian or Alaska Native

7 Unknown

8 Asian/Pacific Islander (carryover from version 4.1 of

NBCCEDP's race codes)

Explanation This field is left blank unless the participant reports three or more races.

Example Asian: 3

(continued)

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# **Participant Information**

Item 3i: Fourth Race Listed

Purpose To specify the race of the participant.

Name Race4

Length 1

Type Numeric
Justification Right
Leading Zeros No
Beginning Position 75

Edits Valid range

Contents 1 White

2 Black or African American

3 Asian

4 Native Hawaiian or Other Pacific Islander

5 American Indian or Alaska Native

7 Unknown

8 Asian/Pacific Islander (carryover from version 4.1 of

NBCCEDP's race codes)

Explanation This field is left blank unless the participant reports four or more races

Example Native Hawaiian: 4

(continued)

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# **Participant Information**

Item 3j: Fifth Race Listed

Purpose To specify the race of the participant.

Name Race5

Length 1

Type Numeric
Justification Right
Leading Zeros No
Beginning Position 76

Edits Valid range

Contents 1 White

2 Black or African American

3 Asian

4 Native Hawaiian or Other Pacific Islander

5 American Indian or Alaska Native

7 Unknown

8 Asian/Pacific Islander (carryover from version 4.1 of

NBCCEDP's race codes)

Explanation This field is left blank unless the participant reports five or more races.

Example American Indian: 5

(continued)

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# **Participant Information**

Item 3k: Sixth Race Listed

Purpose To specify the race of the participant.

Name Race6

Length 1

Type Numeric
Justification Right
Leading Zeros No
Beginning Position 77

Edits Valid range

Contents 1 White

2 Black or African American

3 Asian

4 Native Hawaiian or Other Pacific Islander

5 American Indian or Alaska Native

7 Unknown

8 Asian/Pacific Islander (carryover from version 4.1 of

NBCCEDP's race codes)

Explanation This field is left blank unless the participant reports six races.

Example 1: White

(continued)

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## **Participant Information**

Item 31: Education (highest grade completed)

Purpose To specify the highest grade the participant completed.

Name Education

Length 2

Type Numeric
Justification Right
Leading Zeros No
Beginning Position 78

Edits Valid range
Contents 1 < 9th

2 Some high school

3 High school graduate or equivalent

4 Some college or higher

77 Refused99 Unknown

Explanation Record the code for the highest grade the participant completed.

Example Some college: 4

#### **Participant Information**

Item 3m: Reserved

Purpose

Name Reserve3

Length 8

Type Character

Justification Left
Leading Zeros n/a
Beginning Position 80
Edits None.

Contents

Explanation This space reserved for future use.

Example

(continued)

## **Participant Information**

Item 3n: Current Screening Date

Purpose To specify the current screening date.

Name Visit Length 8

Type Numeric
Justification Right
Leading Zeros Yes
Beginning Position 88

Edits Cannot be blank.
Contents MMDDCCYY Date

Explanation If current screening date is not available, report the most likely first

screening date (e.g., the midpoint of the month when screening was

performed). The earliest screening date is the enrollment date.

Example January 3, 2003: 01032003

#### **Screening Information: Anthropometrics**

Item 4a: Height

Purpose To specify the participant's height.

Name Height

Length 3

Type Numeric
Justification Right
Leading Zeros No
Beginning Position 96

Edits 041–092 inches, 104–234 centimeters; cannot be blank.

Contents 777 Refused

888 Unable to obtain

999 Not tested

Explanation Record the height of the participant.

Example Height of 5 feet 6 inches: 66

(continued)

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**Screening Information: Anthropometrics** 

Item 4b: Height Unit

Purpose To specify the unit used to report the participant's height.

Name Hgt\_Unit

Length 1

Type Numeric

Justification Right

Leading Zeros No

Beginning Position 99

Edits Valid range. Must be blank if height=777 or 888 or 999.

Contents 1 Inches

2 Centimeters

Explanation Record the unit of measure used for height.

Example Inches: 1

**Screening Information: Anthropometrics** 

Item 4c: Weight

Purpose To specify the weight of the participant.

Name Weight

Length 3

Type Numeric
Justification Right
Leading Zeros No
Beginning Position 100

Edits 065–450 pounds, 029–204 kilograms; cannot be blank.

Contents 777 Refused

888 Unable to obtain

999 Not tested

Explanation Record the weight of the participant.

Example Weight in kilograms: 50

(continued)

Version 6.2, May 2006 Attachment 1: Page 21 of 47

**Screening Information: Anthropometrics** 

Item 4d: Weight Unit

Purpose To specify the unit used to report the participant's weight.

Name Wgt\_Unit

Length 1

Numeric Type Justification Right Leading Zeros No **Beginning Position** 103

**Edits** Valid range. Must be blank if weight=777 or 888 or 999.

Contents 1 Pounds

2 Kilograms

Explanation Record the unit of measure used for weight.

Example Weight in kilograms: 2

**Screening Information: Blood Pressure** 

Item 5a: Systolic #1, mm Hg

To specify the participant's first systolic blood pressure reading. Purpose

Name SBP1 3 Length

Numeric Type Justification Right Leading Zeros No **Beginning Position** 104

**Edits** 074–260; cannot be blank.

Contents 777 Refused

> 888 Unable to Obtain 999 Not Tested

Explanation Record the first systolic blood pressure reading.

Example Systolic blood pressure: 90

(continued)

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**Screening Information: Blood Pressure** 

Item 5b: Diastolic #1, mm Hg

Purpose To specify the participant's first diastolic blood pressure reading.

Name DBP1

Length 3

Type Numeric
Justification Right
Leading Zeros No
Beginning Position 107

Edits 002–156; cannot be blank.

Contents 777 Refused

888 Unable to Obtain

999 Not Tested

Explanation Record the first diastolic blood pressure reading.

Example Diastolic blood pressure: 120

**Screening Information: Blood Pressure** 

Item 5c: Systolic #2, mm Hg

Purpose To specify the participant's second systolic blood pressure

Name SBP2 Length 3

Type Numeric
Justification Right
Leading Zeros No
Beginning Position 110

Edits 074–260.

Contents 777 Refused

888 Unable to Obtain

999 Not Tested

Explanation Record the second systolic blood pressure reading if two measurements

were performed.

Example Systolic blood pressure: 150

**Screening Information: Blood Pressure** 

Item 5d: Diastolic #2, mm Hg

Purpose To specify the participant's second diastolic blood pressure

Name DBP2

Length 3

Type Numeric
Justification Right
Leading Zeros No
Beginning Position 113

Edits 002–156.

Contents 777 Refused

888 Unable to Obtain

999 Not Tested

Explanation Record the second diastolic blood pressure reading if two measurements

were performed.

Example Diastolic blood pressure: 150

**Screening Information: Blood Lipids** 

Item 6a: Total Cholesterol, mg/dl

Purpose To specify the participant's total cholesterol.

Name TotChol

Length 3

Type Numeric
Justification Right
Leading Zeros No
Beginning Position 116

Edits 059–702; cannot be blank.

Contents 777 Refused

888 Inadequate Blood Sample

999 Not Tested

Explanation Record the participant's total cholesterol.

Example Total cholesterol: 190

**Screening Information: Blood Lipids** 

Item 6b: HDL Cholesterol, mg/dl

Purpose To specify the participant's HDL cholesterol.

Name HDL Length 3

Type Numeric
Justification Right
Leading Zeros No
Beginning Position 119

Edits 008–196; cannot be blank.

Contents 777 Refused

888 Inadequate Blood Sample

999 Not Tested

Explanation Record the participant's HDL cholesterol.

Example HDL cholesterol: 87

Screening Information: Blood Lipids

Item 6c: Fasting status for total cholesterol (8 hours)

Purpose To indicate whether the participant fasted prior to having blood drawn for

a total cholesterol reading.

Name TCFast

Length 1

Type Numeric
Justification Right
Leading Zeros No
Beginning Position 122

Edits Valid range; cannot be blank.

Contents 1 Yes

2 No

3 Don't Know

4 Blood Not Drawn, (e.g., refused, inadequate blood sample, not tested)

Explanation Indicate whether the participant fasted prior to having blood drawn for a

total cholesterol reading.

Example Fasted: 1

**Screening Information: Health History** 

Item 7a: Have you ever been told by a doctor, nurse or other health

professional that your blood cholesterol is high?

Purpose To determine whether the participant has been told she has high

cholesterol.

Name SRHC

Length 1

Type Numeric
Justification Right
Leading Zeros No
Beginning Position 123

Edits Valid range; cannot be blank.

Contents 1 Yes

2 No

3 Don't Know7 Refused

8 Not Answered9 Not Asked

Explanation Indicate whether the participant has ever been told she has high blood

cholesterol.

Example Has not been told: 2

(continued)

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**Screening Information: Health History** 

Item 7b: Have you ever been told by a doctor, nurse or other health

professional that you have high blood pressure?

Purpose To determine whether the participant has been told she has high blood

pressure.

Name SRHB

Length 1

Type Numeric
Justification Right
Leading Zeros No
Beginning Position 124

Edits Valid range; cannot be blank.

Contents 1 Yes

2 No

3 Don't Know7 Refused

8 Not Answered9 Not Asked

Explanation Indicate whether the participant has ever been told she has high blood

pressure.

Example Does not know whether she has been told: 3

(continued)

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**Screening Information: Health History** 

Item 7c: Have you ever been told by a doctor, nurse or other health

professional that you have diabetes?

Purpose To determine whether the participant has been told she has diabetes.

Name SRD Length 1

Type Numeric
Justification Right
Leading Zeros No
Beginning Position 125

Edits Valid range; cannot be blank.

Contents 1 Yes

2 No

3 Don't Know7 Refused8 Not Answered

9 Not Asked

Explanation Indicate whether the participant has ever been told she has diabetes.

Example Has not been told: 2

(continued)

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#### **Screening Information: Medication/Tobacco Status**

Item 8a: Are you currently taking medication for high cholesterol?

Purpose To determine whether the participant is taking medication for high

cholesterol.

Name HCMeds

Length 1

Type Numeric
Justification Right
Leading Zeros No
Beginning Position 126

Edits Valid range; cannot be blank.

Contents 1 Yes

2 No

3 Don't Know7 Refused

8 Not Answered9 Not Asked

Explanation Indicate whether the participant is currently taking medication for high

cholesterol.

Example Taking medication: 1

(continued)

Version 6.2, May 2006 Attachment 1: Page 29 of 47

**Screening Information: Medication/Tobacco Status** 

Item 8b: Are you currently taking medication for high blood pressure?

Purpose To determine whether the participant is taking medication for high blood

pressure.

Name HBPMeds

Length 1

Type Numeric
Justification Right
Leading Zeros No
Beginning Position 127

Edits Valid range; cannot be blank.

Contents 1 Yes

2 No

3 Don't Know7 Refused

8 Not Answered9 Not Asked

Explanation Indicate whether the participant is currently taking medication for high

blood pressure.

Example Is not taking medication: 2

(continued)

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**Screening Information: Medication/Tobacco Status** 

Item 8c: Are you currently taking medication for diabetes?

Purpose To determine whether the participant is taking medication for diabetes.

Name DMeds

Length 1

Type Numeric
Justification Right
Leading Zeros No
Beginning Position 128

Edits Valid range; cannot be blank.

Contents 1 Yes

2 No

3 Don't Know7 Refused

8 Not Answered9 Not Asked

Explanation Indicate whether the participant is currently taking medication for

diabetes.

Example Does not know: 3

(continued)

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**Screening Information: Medication/Tobacco Status** 

Item 8d: Do you now smoke cigarettes?

Purpose To determine whether the participant smokes cigarettes.

Name Smoker

Length 1

Type Numeric
Justification Right
Leading Zeros No
Beginning Position 129

Edits Valid range; cannot be blank.

Contents 1 Every day

2 Some days3 Not at all4 Don't Know

5 Yes (carryover from an earlier MDE version)

7 Refused

8 Not Answered9 Not Asked

Explanation Indicate whether the participant is now smoking cigarettes.

Example Does not smoke cigarettes: 3

(continued)

Version 6.2, May 2006 Attachment 1: Page 32 of 47

**Screening Information: Additional Readings** 

Item 9a: Glucose, mg/dl

Purpose To specify glucose for participants who were tested.

Name Glucose

Length 3

Type Numeric
Justification Right
Leading Zeros No
Beginning Position 130

Edits 37–571; cannot be blank.

Contents 777 Refused

888 Inadequate Blood Sample

999 Not Tested

Explanation Record the participant's glucose reading if she was tested.

Example Glucose reading: 50

(continued)

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**Screening Information: Additional Readings** 

Item 9b: Fasting status for glucose (8 hours)

Purpose To indicate whether the participant fasted prior to having blood drawn for

a glucose reading.

Name BGFast

Length 1

Type Numeric
Justification Right
Leading Zeros No
Beginning Position 133

Edits Valid range; cannot be blank

Contents 1 Yes

2 No

3 Don't Know

4 Blood Not Drawn, (e.g., refused, inadequate blood sample, not tested)

Explanation Indicate whether the participant fasted prior to having blood drawn for a

glucose reading.

Example Fasted: 1

**Screening Information: Additional Readings** 

Item 9c: LDL Cholesterol, mg/dl

Purpose To specify LDL cholesterol for participants who were tested.

Name LDL Length 3

Type Numeric
Justification Right
Leading Zeros No
Beginning Position 134

Edits 20–380; cannot be blank.

Contents 777 Refused

888 Inadequate Blood Sample

999 Not Tested

Explanation Record the participant's LDL cholesterol reading if she was tested.

Example LDL cholesterol: 200

**Screening Information: Additional Readings** 

Item 9d: Triglycerides, mg/dl

Purpose To specify triglycerides for participants who were tested.

Name Trigly Length 4

Type Numeric
Justification Right
Leading Zeros No
Beginning Position 137

Edits 13–3616; cannot be blank.

Contents 7777 Refused

8888 Inadequate Blood Sample

9999 Not Tested

Explanation Record the participant's triglycerides reading if she was tested.

Example Triglycerides: 500

**Screening Information: Additional Readings** 

Item 9e: Hemoglobin A1C, %

Purpose To specify Hemoglobin A1C for participants who were tested.

Name HbA1C

Length 4

Type Numeric
Justification Right
Leading Zeros No
Beginning Position 141

Edits 2.8-16.2; cannot be blank.

Contents 7777 Refused

8888 Inadequate Blood Sample

9999 Not Tested

Explanation Record the participant's hemoglobin A1C reading if she was tested.

Example Hemoglobin A1C reading: 6.5

**Screening Information: Alert Values** 

Item 10a: If average SBP>180 or average DBP>110, was participant referred

for a diagnostic exam?

Purpose To specify additional information about participants with alert blood

pressure readings.

Name BPRefer

Length 1

Type Numeric
Justification Right
Leading Zeros No
Beginning Position 145

Edits Valid range

Contents 1 Yes

2 No

3 Don't Know

4 Not an alert reading

blank if SBP1 and DBP1 = 777 or 888 or 999

Explanation Indicate whether a participant with alert blood pressure readings was

referred for a diagnostic examination. Two blood pressures must be averaged and rounded to determine if a woman has an alert value (average SBP > 180 or average DBP > 110). If second blood pressure was not taken, then the first reading must be used to determine if a

woman has an alert value.

Example Was referred: 1

(continued)

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Screening Information: Alert Values

Item 10b: If average SBP>180 or average DBP>110, referral date for the

diagnostic exam.

Purpose To specify additional information about participants with alert blood

pressure readings.

Name BPReDate

Length 8

Type Numeric
Justification Right
Leading Zeros Yes
Beginning Position 146

Edits Must be on or after the screening date; blank if BPRefer^=1.

Contents MMDDCCYY Date

Explanation Record the date the participant was referred for a diagnostic examination

for alert blood pressure readings. Two blood pressures must be averaged and rounded to determine if a woman has an alert value (average SBP > 180 or average DBP > 110). If second blood pressure was not taken, then the first reading must be used to determine if a woman has an alert value.

Example Referred February 23, 2003: 02232003

(continued)

Version 6.2, May 2006 Attachment 1: Page 37 of 47

**Screening Information: Alert Values** 

Item 10c: If average SBP>180 or average DBP>110, diagnostic exam date.

Purpose To specify additional information about participants with alert blood

pressure readings.

Name BPDiDate

Length 8

Type Numeric
Justification Right
Leading Zeros Yes
Beginning Position 154

Edits Must be on or after the referral date; blank if BPRefer^=1.

Contents MMDDCCYY Date

Explanation Record the date of the diagnostic examination for alert blood pressure

readings. Two blood pressures must be averaged and rounded to

determine if a woman has an alert value (average SBP > 180 or average DBP > 110). If second blood pressure was not taken, then the first reading must be used to determine if a woman has an alert value.

Example Referred February 28, 2003: 02282003

(continued)

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**Screening Information: Alert Values** 

Item 10d: If average SBP>180 or average DBP>110, was participant

prescribed medication?

Purpose To specify additional information about participants with alert blood

pressure readings.

Name BPMeds

Length 1

Type Numeric
Justification Right
Leading Zeros No
Beginning Position 162

Edits Valid range

Contents 1 Yes

2 No

3 Don't Know

4 Not an alert reading5 Already on meds

7 Refused

9 Lost-to-followup

blank if SBP1 and DBP1 = 777 or 888 or 999

Explanation Indicate whether a participant with alert blood pressure readings who

received a diagnostic examination was prescribed medications. Two blood pressures must be averaged and rounded to determine if a woman has an alert value (average SBP > 180 or average DBP > 110). If second blood pressure was not taken, then the first reading must be used to

determine if a woman has an alert value.

Example Was not prescribed medication: 2

(continued)

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**Screening Information: Alert Values** 

Item 10e: If TC>400, was participant referred for a diagnostic exam?

Purpose To specify additional information about participants with an alert total

cholesterol reading.

Name TCRefer

Length 1

Type Numeric

Justification Right

Leading Zeros No

Beginning Position 163

Edits Valid range.

Contents 1 Yes

2 No

3 Don't Know

4 Not an alert reading

blank if TotChol = 777 or 888 or 999

Explanation Indicate whether a participant with an alert total cholesterol reading was

referred for a diagnostic examination.

Example Was referred: 1

(continued)

Version 6.2, May 2006 Attachment 1: Page 40 of 47

**Screening Information: Alert Values** 

Item 10f: If TC>400, referral date for the diagnostic exam.

Purpose To specify additional information about participants with an alert total

cholesterol reading.

Name TCReDate

Length 8

Type Numeric

Justification Right

Leading Zeros Yes

Beginning Position 164

Edits Must be on or after the screening date; blank if TCRefer^=1.

Contents MMDDCCYY Date

Explanation Record the date the participant was referred for a diagnostic examination

for alert total cholesterol.

Example Referred February 23, 2003: 02232003

(continued)

Version 6.2, May 2006 Attachment 1: Page 41 of 47

**Screening Information: Alert Values** 

Item 10g: If TC>400, diagnostic exam date.

Purpose To specify additional information about participants with an alert total

cholesterol reading.

Name TCDiDate

Length 8

Type Numeric
Justification Right
Leading Zeros Yes
Beginning Position 172

Edits Must be on or after the referral date; blank if TCRefer^=1.

Contents MMDDCCYY Date

Explanation Record the date of the diagnostic examination for alert total cholesterol.

Example Referred February 28, 2003: 02282003

(continued)

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**Screening Information: Alert Values** 

Item 10h: If TC>400, was participant prescribed medication?

Purpose To specify additional information about participants with an alert total

cholesterol reading.

Name TCMeds

Length 1

Type Numeric
Justification Right
Leading Zeros No
Beginning Position 180

Edits Valid range

Contents 1 Yes

2 No

3 Don't Know

4 Not an alert reading5 Already on meds

7 Refused

9 Lost-to-followup

blank if TotChol = 777 or 888 or 999

Explanation Indicate whether a participant with an alert total cholesterol reading who

received a diagnostic examination was prescribed

Example Was not prescribed medication: 2

(continued)

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**Screening Information: Alert Values** 

Item 10i: If BG>375, was participant referred for a diagnostic exam?

Purpose To specify additional information about participants with an alert blood

glucose reading.

Name BGRefer

Length 1

Type Numeric
Justification Right
Leading Zeros No
Beginning Position 181

Edits Valid range

Contents 1 Yes

2 No

3 Don't Know

4 Not an alert reading

blank if Glucose = 777 or 888 or 999

Explanation Indicate whether a participant with an alert blood glucose reading was

referred for a diagnostic examination.

Example Was referred: 1

(continued)

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**Screening Information: Alert Values** 

Item 10j: If BG>375, referral date for the diagnostic exam.

Purpose To specify additional information about participants with an alert blood

glucose reading.

Name BGReDate

Length 8

Type Numeric

Justification Right

Leading Zeros Yes

Beginning Position 182

Edits Must be on or after the screening date; blank if BGRefer^=1.

Contents MMDDCCYY Date

Explanation Record the date the participant was referred for a diagnostic examination

for alert blood glucose reading.

Example Referred February 23, 2003: 02232003

(continued)

Version 6.2, May 2006 Attachment 1: Page 45 of 47

**Screening Information: Alert Values** 

Item 10k: If BG>375, diagnostic exam date.

Purpose To specify additional information about participants with an alert blood

glucose reading.

Name BGDiDate

Length 8

Type Numeric
Justification Right
Leading Zeros Yes
Beginning Position 190

Edits Must be on or after the referral date; blank if BGRefer^=1.

Contents MMDDCCYY Date

Explanation Record the date of the diagnostic examination for alert blood glucose

reading.

Example Referred February 28, 2003: 02282003

(continued)

Version 6.2, May 2006 Attachment 1: Page 46 of 47

**Screening Information: Alert Values** 

Item 101: If BG>375, was participant prescribed medication?

Purpose To specify additional information about participants with an alert blood

glucose reading.

Name BGMeds

Length 1

Type Numeric

Justification Right

Leading Zeros No

Beginning Position 198

Edits Valid range.

Contents 1 Yes

2 No

3 Don't Know

4 Not an alert reading5 Already on meds

7 Refused

9 Lost-to-followup

blank if Glucose = 777 or 888 or 999

Explanation Indicate whether a participant with an alert blood glucose reading who

received a diagnostic examination was prescribed medications.

Example Was not prescribed medication: 2

Version 6.2, May 2006 Attachment 1: Page 47 of 47

# Attachment 2: Standard Intervention MDE Field Descriptions

Data User's Manual Version 6.2 May 2006

Part A: Standard Intervention MDE Field Descriptions

		Name	Туре	Location
0.	MDE Version			
	a. MDE version	MDEVer	Numeric	1 - 3
1.	Intervention Location			
	a. State/Tribal FIPS Code	StFIPS	Character	4 - 5
	b. Reserved	Reserve1	Character	6 - 7
2.	Record Identification			
	a. Unique Intervention Record ID Number	NRec	Numeric	8 – 13
	b. Reserved	Reserve2	Character	14 - 14
	c. Disposition Status	Disp	Numeric	15 - 15
3.	Participant Information			
	a. Unique Participant ID Number	EncodeID	Character	16 - 30
4.	Type of Intervention Session			
	a. Nutrition Counseling	CounselN	Numeric	31 - 31
	b. Physical Activity Counseling	CounselPA	Numeric	32 - 32
	c. Tobacco Counseling	CounselT	Numeric	33 - 33
	d. Type of Contact	ContactType	Numeric	34 - 34
	e. Setting	Setting	Numeric	35 - 35
	f. Date of Intervention Session	Intervention	Numeric	36 - 43
5.	Intervention Session Completion			
	a. Intervention Session Completion	Complete	Numeric	44 – 44

# Part B: Standard Intervention MDE Field Descriptions

**MDE Version** 

Item 0a: MDE version

Purpose To specify the version of the MDE that was used to construct the file.

Name MDEVer

Length 3

Type Numeric
Justification Right
Leading Zeros No
Beginning Position 1

Edits Cannot be blank.
Contents 620 Version 6.20

Explanation Enter the version of the MDE that was used to construct the files.

Example MDE version 6.20: 620

#### **Intervention Location**

Item 1a: State/Tribal FIPS Code

Purpose To specify the FIPS or Tribal Project code for the state, territory, or Tribe

where screening occurred.

Name StFIPS

Length 2

Type Character
Justification Left
Leading Zeros Yes
Beginning Position 4

Edits Valid FIPS state/tribal code; cannot be blank.

Contents 04 Arizona (AZ)

06 California (CA)

09 Connecticut (CT)

17 Illinois (IL)19 Iowa (IA)

25 Massachusetts (MA)

26 Michigan (MI)

27 Minnesota (MN)

29 Missouri (MO)

31 Nebraska (NE)

33 New Hampshire (NH; part of VT's project)

34 New Jersey (NJ)

36 New York (NY)

37 North Carolina (NC)

38 North Dakota (ND; part of SD's project)

46 South Dakota (SD)

50 Vermont (VT)

54 West Virginia (WV)

56 Wyoming (WY; part of SD's project)

85 Southeast Alaska Region Health Consortium (SEARHC)

92 Southcentral Foundation (SCF)

Explanation State FIPS codes are the Federal Information Processing Standard codes

developed by the National Bureau of Standards. Tribal Project codes are codes assigned by CDC to be used by the Tribal Projects in lieu of state and

territory FIPS.

Example Connecticut: 09

#### **Intervention Location**

Item 1b: Reserved

Purpose

Name Reserve1

Length 2

Type Character

Justification Left
Leading Zeros n/a
Beginning Position 6

Edits None.

Contents

Explanation This space reserved for future use

Example

#### **Record Identification**

Item 2a: Unique Intervention Record ID Number Purpose To uniquely identify records within the file.

Name NRec

Length 6

Type Numeric
Justification Right
Leading Zeros No
Beginning Position 8

Edits Cannot be blank.

Contents

Explanation The record ID number is unique and is a sequence number from 1 to the

number of records in the file.

Example Sequence number: 254

#### **Record Identification**

Item 2b: Reserved

Purpose

Name Reserve2

Length 1

Type Character

Justification Left
Leading Zeros n/a
Beginning Position 14
Edits None.

Contents

Explanation This space reserved for future use

Example

#### **Record Identification**

Item 2c: Disposition Status

Purpose To identify partially complete records.

Name Disp Length 1

Type Numeric
Justification Right
Leading Zeros No
Beginning Position 15

Edits Valid range; cannot be blank.

Contents 1 Open (additional data expected)

2 Closed (complete)

Explanation Identifies partially complete records. Refers to only intervention

variables associated with the particular intervention session captured in the record. Only closed records (Disp=2) will be processed. Records from the last 6 months of the reporting period only can remain open (i.e.,

all records older than 6 months must be closed regardless of data

completion).

Example Record closed: 2

#### **Participant Information**

Item 3a: Unique Participant ID Number

Purpose To uniquely identify a participant.

Name EncodeID

Length 15

Type Character

Justification Left
Leading Zeros n/a
Beginning Position 16

Edits Cannot be blank.

Contents

Explanation If Social Security number is used, encode it. One simple method is to

rearrange the order of the 9 digits. The ID number is unique and constant for each participant to track the participant over time. WISEWOMAN

uses the NBCCEDP ID number.

Example ID: 1234567890

#### **Type of Intervention Session**

Item 4a: Nutrition Counseling

Purpose To indicate whether the participant received nutrition counseling.

Name CounselN

Length 1

Type Numeric
Justification Right
Leading Zeros No
Beginning Position 31

Edits Valid range; cannot be blank.

Contents 1 Yes

2 No

3 Don't Know

Explanation Indicate whether the participant received nutrition counseling.

Example Did not receive nutrition counseling: 2

#### Type of Intervention Session

Item 4b: Physical Activity Counseling

Purpose To indicate whether the participant received physical activity counseling.

Name CounselPA

Length 1

Type Numeric
Justification Right
Leading Zeros No
Beginning Position 32

Edits Valid range; cannot be blank.

Contents 1 Yes

2 No

3 Don't Know

Explanation Indicate whether the participant received physical activity counseling.

Example Received physical activity counseling: 1

#### **Type of Intervention Session**

Item 4c: Tobacco Counseling

Purpose To indicate whether the participant received tobacco counseling.

Name CounselT

Length 1

Type Numeric
Justification Right
Leading Zeros No
Beginning Position 33

Edits Valid range; cannot be blank.

Contents 1 Yes

2 No

3 Don't Know

Explanation Indicate whether the participant received tobacco counseling.

Example Don't know whether the participant received tobacco counseling: 3

Part B: Standard Intervention MDE Field Descriptions (continued)

**Type of Intervention Session** 

Item 4d: Type of Contact

Purpose To specify the type of contact used for counseling.

Name ContactType

Length 1

Type Numeric

Justification Right

Leading Zeros No

Beginning Position 34

Edits Valid range; cannot be blank

Contents 1 Face-to-Face

2 Phone3 Mailing4 Don't Know

5 AudioTape (for use by IL only)

Explanation Record the type of contact used for counseling if counseling was

received.

Example Face-to-Face contact: 1

Type of Intervention Session

Item 4e: Setting

Purpose To specify the setting for the counseling.

Name Setting

Length 1

Type Numeric
Justification Right
Leading Zeros No
Beginning Position 35

Edits Valid range; can be blank if counseling was not received.

Contents 1 Individual

2 Group

3 Don't Know

Explanation Record the type of setting used for counseling if counseling was

received.

Example Group counseling: 2

#### Type of Intervention Session

Item 4f: Date of Intervention Session

Purpose To specify the date of the counseling.

Name Intervention

Length 8

Type Numeric
Justification Right
Leading Zeros Yes
Beginning Position 36

Edits Can be blank if counseling was not received.

Contents MMDDCCYY Date

Explanation Record the date of the counseling if counseling was received.

Example March 31, 2003: 03312003

#### **Intervention Session Completion**

Item 5a: Intervention Completion Indicator

Purpose To indicate whether a woman completed a core set of intervention

sessions.

Name Complete

Length 1

Type Numeric
Justification Right
Leading Zeros No
Beginning Position 44

**Edits** 

Contents 1 interventions completed (last session in the core set)

2 interventions not completed

3 intervention beyond the core set of sessions

Explanation Set to 2 in records where the intervention has not been completed; once

the intervention is completed, set to 1 in the last record of the intervention sessions. Set to 3 in records beyond the core set of intervention sessions. Required core of sessions will vary by project. Attachment 10 presents a list of project-specific completion definitions.

Example A woman has not completed a core set of intervention sessions: 2

# Attachment 3: Examples of Project-Specific MDEs for the Screening MDE File

Data User's Manual Version 6.2 May 2006

#### **Examples of Project-Specific MDEs**

Item	Examples of Project-Specific MDEs							
Name	Physical Activity							
Length       1         Beginning Position       195         Contents       0       0 days         1       1 day         2       2 days         3       3 days         4       4 days         5       5 days         6       6 days         7       7 days         Physical Activity         Item       11b: About how many minutes do you do these moderate (vigorous) activities each time?         Name       PA_2         Length       1         Beginning Position       196         Contents       1       0-10 minutes         Contents       1       0-10 minutes         2       11-20 minutes	Item							
Beginning Position 195  Contents 0 0 days 1 1 day 2 2 days 3 3 days 4 4 days 5 5 days 6 6 days 7 7 days   Tem 11b: About how many minutes do you do these moderate (vigorous) activities each time?  Name PA_2  Length 1  Beginning Position 196  Contents 1 0–10 minutes 2 11–20 minutes	Name							
Contents  0 0 days  1 1 day  2 2 days  3 3 days  4 4 days  5 5 days  6 6 days  7 7 days   Physical Activity  Item  11b: About how many minutes do you do these moderate (vigorous) activities each time?  Name  PA_2  Length  1 Beginning Position  196  Contents  1 0–10 minutes  2 11–20 minutes	Length							
1 1 day 2 2 days 3 3 days 4 4 days 5 5 days 6 6 days 7 7 days  Physical Activity  Item 11b: About how many minutes do you do these moderate (vigorous) activities each time?  Name PA_2  Length 1  Beginning Position 196  Contents 1 0–10 minutes 2 11–20 minutes	<b>Beginning Position</b>							
2 2 days 3 3 days 4 4 days 5 5 days 6 6 days 7 7 days  Physical Activity  Item 11b: About how many minutes do you do these moderate (vigorous) activities each time?  Name PA_2  Length 1  Beginning Position 196  Contents 1 0–10 minutes 2 11–20 minutes	Contents							
3 3 days 4 4 days 5 5 days 6 6 days 7 7 days  Physical Activity  Item 11b: About how many minutes do you do these moderate (vigorous) activities each time?  Name PA_2  Length 1  Beginning Position 196  Contents 1 0–10 minutes 2 11–20 minutes								
4 4 days 5 5 days 6 6 days 7 7 days  Physical Activity  Item 11b: About how many minutes do you do these moderate (vigorous) activities each time?  Name PA_2  Length 1  Beginning Position 196  Contents 1 0–10 minutes 2 11–20 minutes								
5 5 days 6 6 days 7 7 days  Physical Activity  Item 11b: About how many minutes do you do these moderate (vigorous) activities each time?  Name PA_2  Length 1  Beginning Position 196  Contents 1 0–10 minutes 2 11–20 minutes								
6 6 days 7 7 days  Physical Activity  Item 11b: About how many minutes do you do these moderate (vigorous) activities each time?  Name PA_2  Length 1  Beginning Position 196  Contents 1 0–10 minutes 2 11–20 minutes								
Physical Activity  Item								
Item 11b: About how many minutes do you do these moderate (vigorous) activities each time?  Name PA_2  Length 1  Beginning Position 196  Contents 1 0–10 minutes 2 11–20 minutes								
Item 11b: About how many minutes do you do these moderate (vigorous) activities each time?  Name PA_2  Length 1  Beginning Position 196  Contents 1 0–10 minutes 2 11–20 minutes								
Name PA_2  Length 1  Beginning Position 196  Contents 1 0–10 minutes 2 11–20 minutes	Physical Activity							
Length 1 Beginning Position 196 Contents 1 0–10 minutes 2 11–20 minutes	Item							
Beginning Position 196  Contents 1 0–10 minutes 2 11–20 minutes	Name							
Contents 1 0–10 minutes 2 11–20 minutes	Length							
2 11–20 minutes	<b>Beginning Position</b>							
	Contents							
3 21–30 minutes								
3 21 30 mmates								
4 More than 30 minutes								
Physical Activity								
Item 11c: Physical activity stage of change	Item							
Name PA_3	Name							
Length 1	Length							
Beginning Position 197	<b>Beginning Position</b>							
Contents 1 Precontemplation	Contents							
2 Contemplation								
3 Preparation								
4 Action								
5 Maintenance								
0 Not applicable								
9 Unknown								

(continued)

#### **Examples of Project-Specific MDEs (continued)**

Nutrition						
Item	12a: How many servings of grains do you eat per day?					
Name	Nut_1					
Length	1 1					
Beginning Position	198					
Contents	0 None					
Contents	1 1–3 servings					
	2 4–6 servings					
	3 7–8 servings					
	4 More than 8 servings					
	9 Unknown					
	Nutrition					
T4						
Item	12b: How many servings of whole grains do you eat per day?					
Name	Nut_2					
Length	1					
Beginning Position	199					
Contents	0 None					
	1 1 serving					
	2 2 servings					
	3 3 servings					
	4 More than 3 servings					
	9 Unknown					
	Nutrition					
Item	12c: How many servings of fruits and vegetables do you eat per day?					
Name	Nut_3					
Length	1					
<b>Beginning Position</b>	200					
Contents	0 None					
	1 1–4 servings					
	2 5–7 servings					
	3 8–10 servings					
	4 More than 10 servings					
	9 Unknown					

(continued)

#### **Examples of Project-Specific MDEs (continued)**

Nutrition						
Item	12d: How many servings of dairy products do you eat/drink per day?					
Name	Nut_4					
Length	1					
<b>Beginning Position</b>	201					
Contents	0 None					
	1 1 serving					
	2 2 servings					
	3 3 servings					
	4 More than 3 servings					
	9 Unknown					
Nutrition						
Item	12e: Fruits and vegetables stage of change					
Name	Nut_5					
Length	1					
Beginning Position	202					
Contents	1 Precontemplation					
	2 Contemplation					
	3 Preparation					
	4 Action					
	5 Maintenance					
	0 Not applicable					
9 Unknown						

(continued)

#### **Examples of Project-Specific MDEs (continued)**

, , , , , , , , , , , , , , , , , , , ,						
Nutrition						
Item	12f: Low fat dairy stage of change					
Name	Nut_6					
Length	1					
<b>Beginning Position</b>	203					
Contents	1 Precontemplation					
	2 Contemplation					
	3 Preparation					
	4 Action					
	5 Maintenance					
	0 Not applicable					
	9 Unknown					
Nutrition						
Item 12g: Whole grains stage of change						
Name	Nut_7					
Length	1					
<b>Beginning Position</b>	204					
Contents	1 Precontemplation					
	2 Contemplation					
	3 Preparation					
	4 Action					
	5 Maintenance					
	0 Not applicable					
	9 Unknown					

## Attachment 4: WISEWOMAN Data Submission Form

Data User's Manual Version 6.2 May 2006

#### **WISEWOMAN Data Submission Form**

Project Name:
Date of Submission:
Contact Name:
E-mail Address:
Telephone Number:
Screening MDEs Period Covered:
File Name:
Version of MDE Used To Generate File:
Number of Records Submitted:
Definitions of Project-Specific Codes (see Attachment 3 for examples):

Intervention MDEs Period Covered:						
File Name:						
Version of MDE Used To Gene	rate File:					
Number of Records Submitted:						
Number of deaths among WISEWOMAN participants during the last 6 months of the reporting period:						
Cost Report:	Submitted? Yes	☐ No				
If no, please explain						
Period Covered:						
File Name:						
Validation of Out-of-Range Values:	Submitted?	☐ No				
Period Covered:						
File Name:						
Additional Comments:						

## Attachment 5: Standard Screening MDE Errors

Data User's Manual Version 6.2 May 2006

```
00a MDE version is missing
00a MDE version is invalid
Ola State FIPS Code is missing
01a State FIPS Code is invalid
Olc Screening site County FIPS Code is missing
01d Screening site City is missing
Ole Screening site ID is missing
Olf Intervention type is missing
01f Intervention type is invalid
02a Unique Record ID is missing
02c Disposition status is missing
02c Disposition status is invalid
03a Patient ID is missing
03b, 03c Both county and zip code of residence are missing
03c Zip code of residence is invalid
03d Date of birth is missing
03n Screening Date is missing
03n Screening Date is invalid
03d Age is missing
03d Age is out of range
03f-k Race is invalid
03e Hispanic or Latino indicator is missing
03e Hispanic or Latino indicator is invalid
031 Education is missing
031 Education is invalid
04b Height not available, unit should be missing
```

Version 6.2, May 2006 Attachment 5: Page 1 of 4

```
04a Height is missing
04b Height missing, unit should be missing
04a Height is out of range - inches
04a Height is out of range - centimeters
04b Height measurement unit is missing
04b Height measurement unit is invalid
04d Weight not available, unit should be missing
04d Weight is missing, unit should be missing
04c Weight is out of range - pounds
04c Weight is out of range - kilograms
04d Weight measurement unit is missing
04d Weight measurement unit is invalid
05a First Systolic Blood Pressure is missing
05a First Systolic Blood Pressure is out of range
05b First Diastolic Blood Pressure is missing
05b First Diastolic Blood Pressure is out of range
05c Second Systolic Blood Pressure is missing
05c Second Systolic Blood Pressure is out of range
05d Second Diastolic Blood Pressure is missing
05d Second Diastolic Blood Pressure is out of range
06a Total Cholesterol is missing
06a Total Cholesterol is out of range
06b HDL Cholesterol is missing
06b HDL Cholesterol is out of range
06c Fasting Status indicator is missing
06c Fasting Status indicator is invalid
```

Version 6.2, May 2006 Attachment 5: Page 2 of 4

07a have high cholesterol response is missing 07a have high cholesterol response is invalid 07b have high blood pressure response is missing 07b have high blood pressure response is invalid 07c have diabetes response is missing 07c have diabetes response is invalid 08a high cholesterol medication response is missing 08a high cholesterol medication response is invalid 08b high blood pressure medication response is missing 08b high blood pressure medication response is invalid 08c diabetes medication response is missing 08c diabetes medication response is invalid 08d smoker response is missing 08d smoker response is invalid 09a Blood glucose missing 09a Blood glucose is out of range 09b Fasting status for blood glucose is invalid 09c LDL is missing 09c LDL is out of range 09d Triglycerides is missing 09d Triglycerides is out of range 09e Hemoglobin A1C is missing 09e Hemoglobin A1C is out range 10a. Referred & BP reading are inconsistent 10a. Referred for high BP is missing

10a. Referred for high BP is invalid

- 10b. Date referred for high BP is missing
- 10b. Date referred for high BP is invalid
- 10c. Date of exam for high BP is missing
- 10c. Date of exam for high BP is invalid
- 10d. Prescribed meds for high BP is missing
- 10d. Prescribed meds for high BP is invalid
- 10e. Referred & cholesterol reading are inconsistent
- 10e. Referred for high TC is missing
- 10e. Referred for high TC is invalid
- 10f. Date referred for high TC is missing
- 10f. Date referred for high TC is invalid
- 10g. Date of exam for high TC is missing
- 10g. Date of exam for high TC is invalid
- 10h. Prescribed meds for high TC is missing
- 10h. Prescribed meds for high TC is invalid
- 10i. Referred & glucose reading are inconsistent
- 10i. Referred for high BG is missing
- 10i. Referred for high BG is invalid
- 10j. Date referred for high BG is missing
- 10j. Date referred for high BG is invalid
- 10k. Date of exam for high BG is missing
- 10k. Date of exam for high BG is invalid
- 101. Prescribed meds for high BG is missing
- 101. Prescribed meds for high BG is invalid

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## Attachment 6: Standard Intervention MDE Errors

Data User's Manual Version 6.2 May 2006

```
00a MDE version is missing
00a MDE version is invalid
01a State FIPS code missing
01a State FIPS code invalid
02a Unique Record ID is missing
02c Disposition status is missing
02c Disposition status is invalid
03a Patient ID is missing
04a Nutrition counseling value is missing
04a Nutrition counseling value is invalid
04b Physical activity counseling value is missing
04b Physical activity counseling value is invalid
04c Tobacco counseling value is missing
04c Tobacco counseling value is invalid
04d Contact Type value is missing
04d Contact Type value is invalid
04e Setting value is missing
04e Setting value is invalid
04f Intervention date is missing
5a Intervention completion is missing
5a Intervention completion is invalid
```

Version 6.2, May 2006

## Attachment 7: Validation of the Alert Follow-Up Data

Data User's Manual Version 6.2 May 2006 The following procedure is used to validate question 10 (alert follow-up) of the Screening MDE file.

X Values	<u>xRefer</u>	xReDate	<u>xDiDate</u>	<u>xMeds</u>
., 777, 888, 999	•	•	•	
> Alert value	1 (Yes)	>= Visit	>= xReDate	1 – 3, 5, 7, 9 (Yes, No, DK, Already
				RX, Refused, LTF)
> Alert value	2 (No)			
> Alert value	3 (DK)			3 (DK)
0 < x < Alert value	4 (NA)			4 (NA)

#### Q10

- Blood pressure (BP) Q10a Q10d
- Cholesterol (TC) Q10e Q10h
- Blood glucose (BG) Q10i Q10l

X is BP, TC, or BG

#### xRefer and xMeds

1 = Yes

2 = No

3 = Don't know

4 = Not an alert value

#### Additional xMeds Codes:

5 = Already on meds

7 = Refused

9 = Lost-to-followup

# Attachment 8: Sample Baseline and 1-Year Change MDE Charts: Data from All Projects Combined

Data User's Manual Version 6.2 May 2006

 $10 \hbox{-} Year~Risk~of~Coronary~Heart~Disease} \\ Baseline~Data~for~Participants~in~All~Projects~Who~Were~Screened~for~the~First~Time~Between~01/01/2005~and~06/30/2005$ 

Method	Average Age	N	Average Risk	Lower 95% Confidence Limit	Upper 95% Confidence Limit	Number with Risk >= 20%	Percent with Risk >= 20%
ATP III, 10 year Risk of CHD	49	5787	5.60%	5.36%	5.84%	672	11.61%
Anderson, 10 year Risk of CHD	49	5859	5.69%	5.55%	5.82%	156	2.66%

Coronary heart disease (CHD) is defined as angina pectoris, recognized and unrecognized myocardial infarction, coronary insufficiency (unstable angina), and CHD death. Source: Grundy SM, Pasternak R, Greenland P, Smith S, Fuster V. "Assessment of Cardiovascular Risk by Use of Multiple-Risk-Factor Assessment Equations: A Statement for Healthcare Professionals from the American Heart Association and the American College of Cardiology." Circulation, 1999; 100:1481-1492.

Anderson K, Wilson P, Odell P, Kannel W. "An Updated Coronary Risk Profile" Circulation, January, 1991, 83(1).

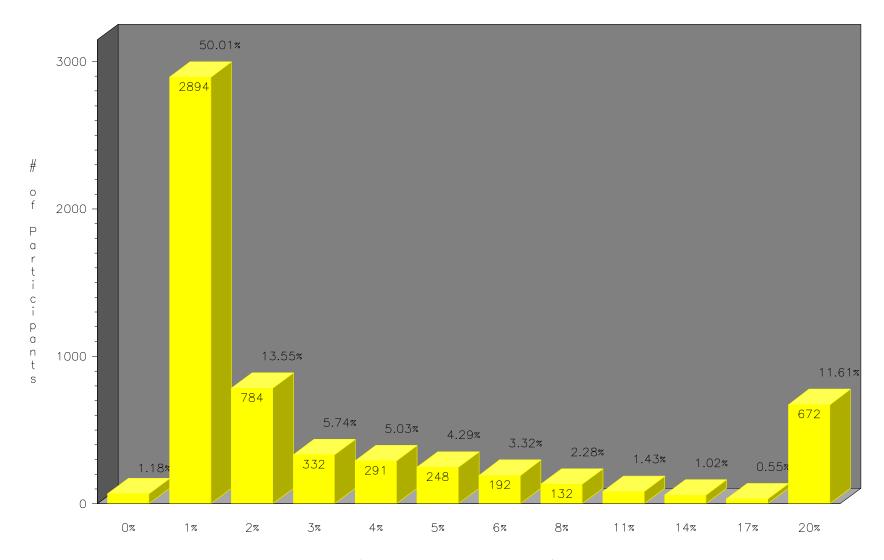
ATP III and Anderson Guidelines include assessment of Risk based on Age, Total and HDL Cholesterol, Systolic Blood Pressure, Smoking Status, and Diabetes Status. ATP III considers treated and untreated systolic blood pressure.

01/09/2006

#### 10-year Risk of Coronary Heart Disease

#### ATP III Guidelines

Baseline Data for Participants in All Projects Who Were Screened for the First Time Between 01/01/2005 and 06/30/2005



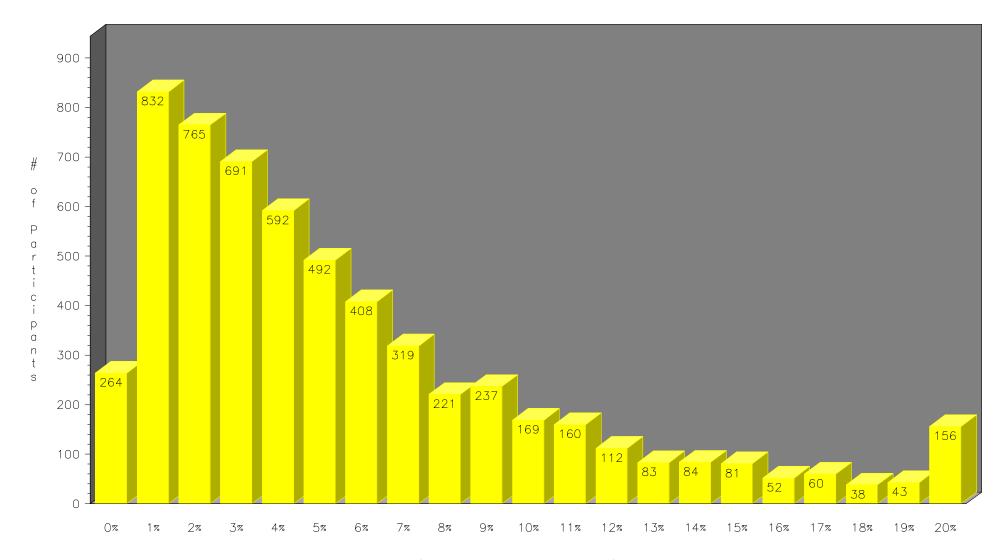
 $10-Year\ Risk\ Percent\ of\ Coronary\ Heart\ Disease$   $N\,=\,5787$ 

20% includes values >=20% Participants with diabetes are assigned risk>20%

#### 10-year Risk of Coronary Heart Disease

#### Anderson Guidelines

Baseline Data for Participants in All Projects Who Were Screened for the First Time Between 01/01/2005 and 06/30/2005

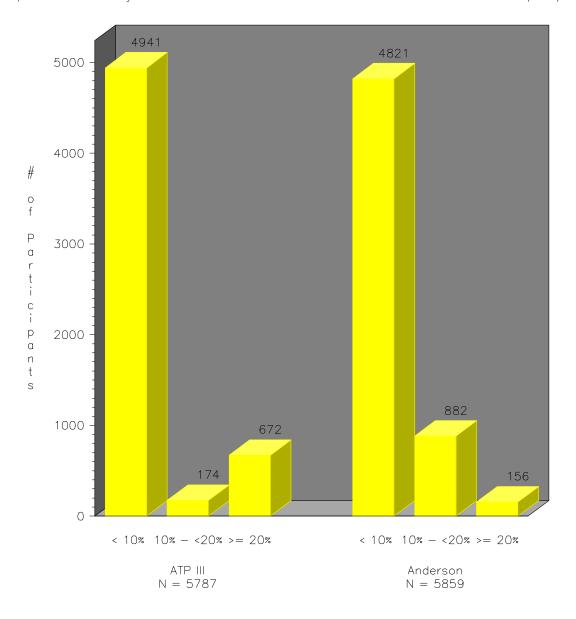


10-Year Risk Percent of Coronary Heart Disease N=5859

20% includes values >= 20%

#### 10-year Risk of Coronary Heart Disease

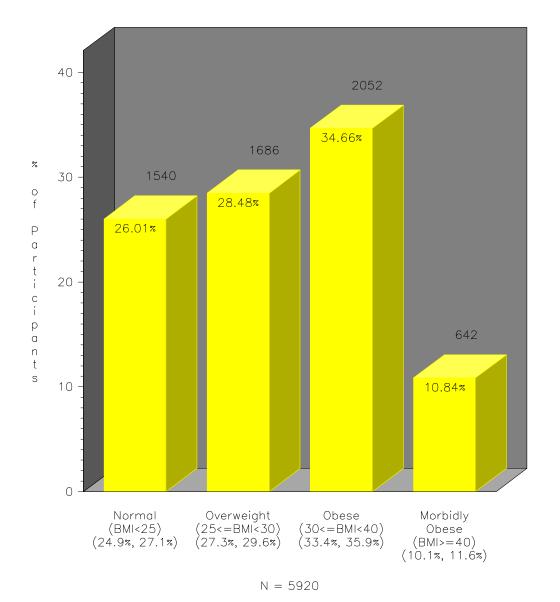
Baseline Data for Participants in All Projects Who Were Screened for the First Time Between 01/01/2005 and 06/30/2005



10—Year Risk Percent of Coronary Heart Disease Participants with diabetes are assigned risk>20% for ATP III

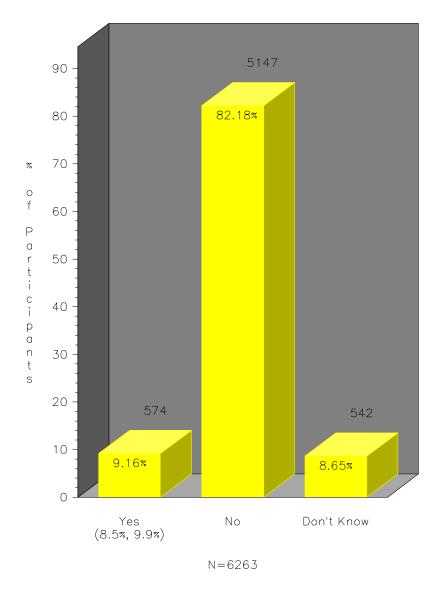
#### Prevalence of Overweight and Obesity in the WISEWOMAN Population

Baseline Data for Participants in All Projects Who Were Screened for the First Time Between 01/01/2005 and 06/30/2005

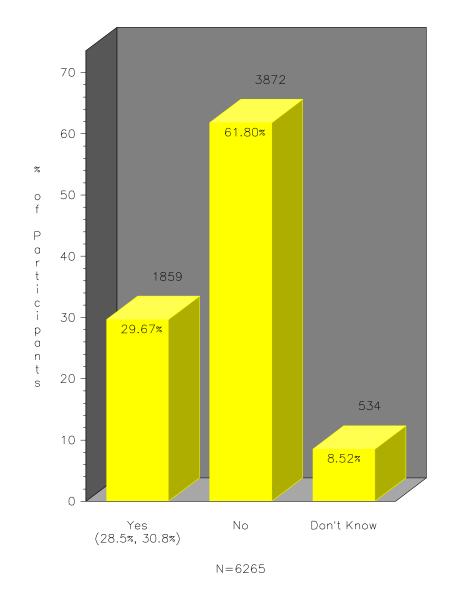


## Have you ever been told by a doctor, nurse, or other health professional that you have diabetes?

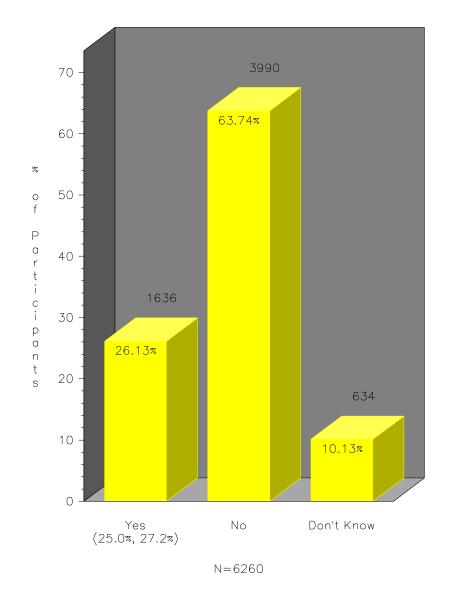
Baseline Data for Participants in All Projects Who Were Screened for the First Time Between 01/01/2005 and 06/30/2005



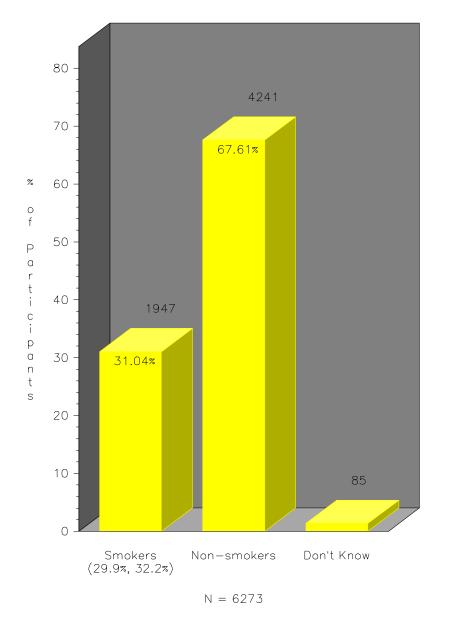
## Have you ever been told by a doctor, nurse, or other health professional that you have high blood pressure? Baseline Data for Participants in All Projects Who Were Screened for the First Time Between 01/01/2005 and 06/30/2005



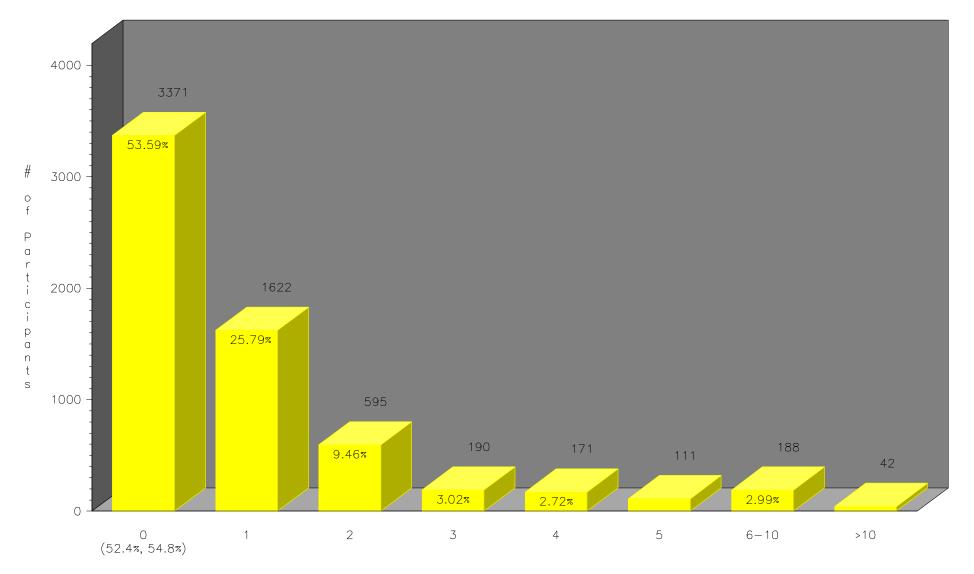
## Have you ever been told by a doctor, nurse, or other health professional that you have high cholesterol? Baseline Data for Participants in All Projects Who Were Screened for the First Time Between 01/01/2005 and 06/30/2005



Percent of WISEWOMAN Participants Who Smoke
Baseline Data for Participants in All Projects Who Were Screened for the First Time Between 01/01/2005 and 06/30/2005



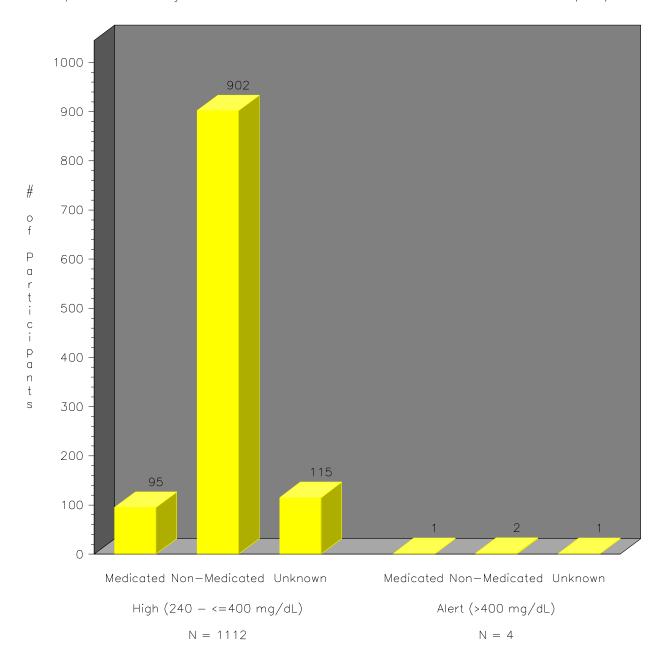
## Number of WISEWOMAN Intervention Sessions Attended Baseline Data for Participants in All Projects Who Were Screened for the First Time Between 01/01/2005 and 06/30/2005



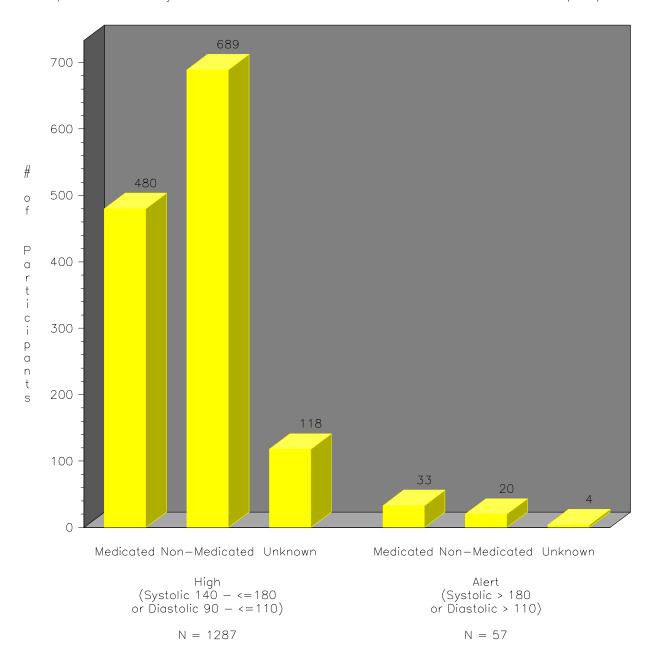
Number of Intervention Sessions Attended

N = 6290

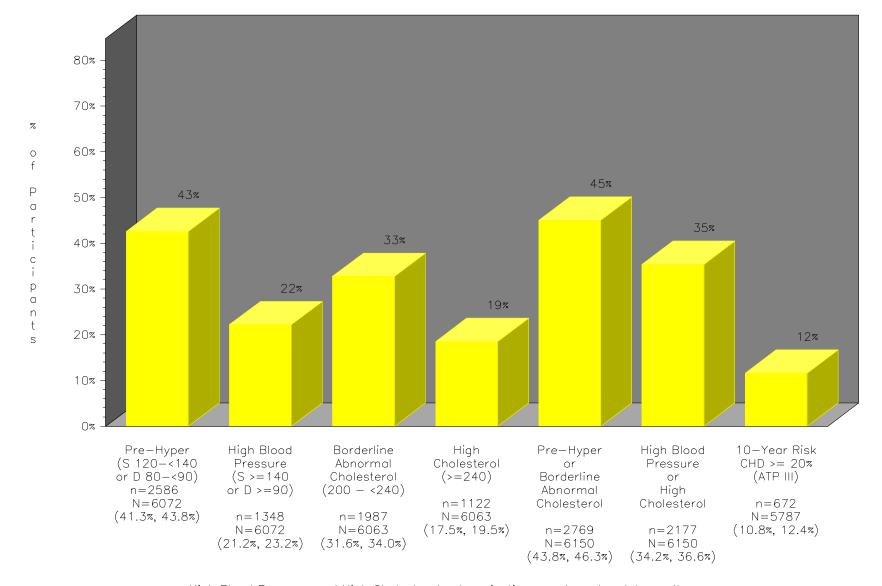
## Number of WISEWOMAN Participants with Measured High Cholesterol Baseline Data for Participants in All Projects Who Were Screened for the First Time Between 01/01/2005 and 06/30/2005



Number of WISEWOMAN Participants with Measured High Blood Pressure
Baseline Data for Participants in All Projects Who Were Screened for the First Time Between 01/01/2005 and 06/30/2005



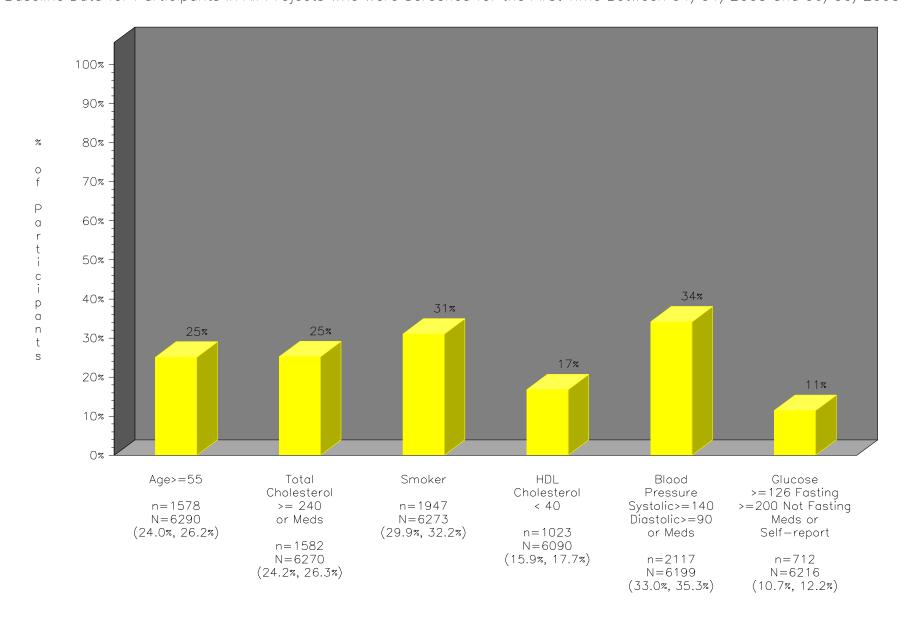
## What is the Burden of Disease for WISEWOMAN participants? Baseline Data for Participants in All Projects Who Were Screened for the First Time Between 01/01/2005 and 06/30/2005



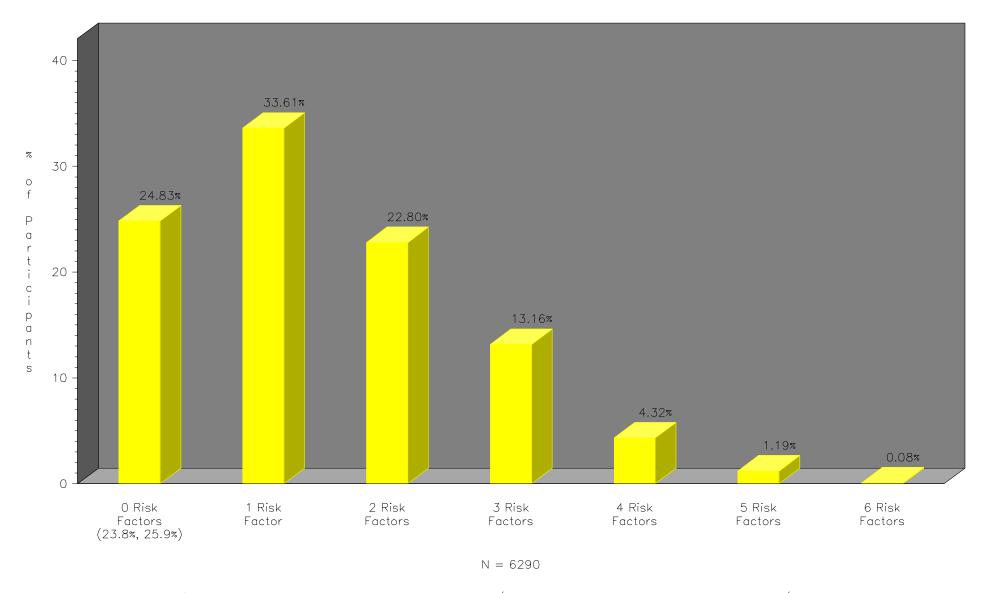
High Blood Pressure and High Cholesterol categorizations are based on lab results.

Differing N values are due to missing data.

## Percent of WISEWOMAN Participants with CHD Risk Factors Baseline Data for Participants in All Projects Who Were Screened for the First Time Between 01/01/2005 and 06/30/2005

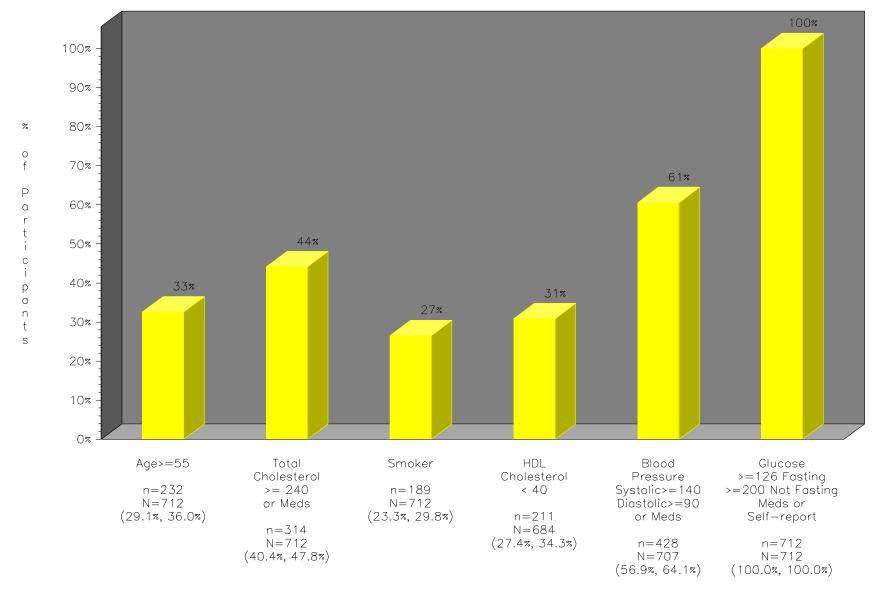


## Percent of WISEWOMAN Participants with Multiple Risk Factors Baseline Data for Participants in All Projects Who Were Screened for the First Time Between 01/01/2005 and 06/30/2005



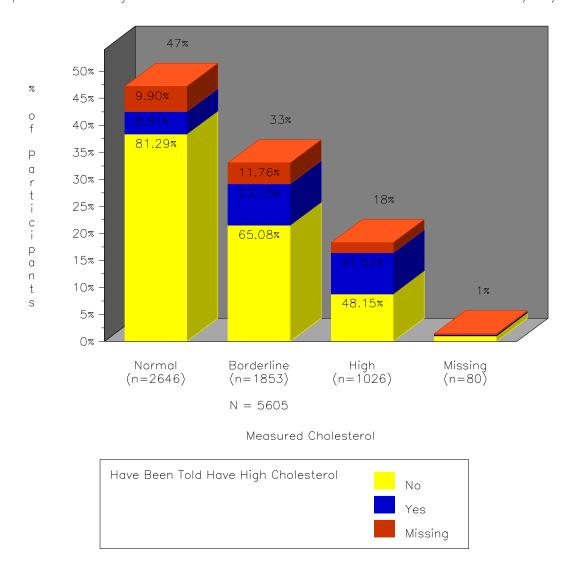
Risk factors: age  $\geq$  55, total cholesterol  $\geq$  240 mg/dL or meds, smoker, HDL cholesterol < 40 mg/dL, blood pressure  $\geq$  140/90 mmHg or meds, glucose  $\geq$  126 fasting or  $\geq$  200 not fasting or meds.

## Percent of WISEWOMAN Participants with CHD Risk Factors (Diabetes Sample) Baseline Data for Participants in All Projects Who Were Screened for the First Time Between 01/01/2005 and 06/30/2005



Diabetes Sample is defined as glucose>=126 fasting, glucose>=200 not fasting, meds, or self-report.

## Comparison of Lab Results and Self-Reported History of High Cholesterol Baseline Data for Participants in All Projects Who Were Screened for the First Time Between 01/01/2005 and 06/30/2005



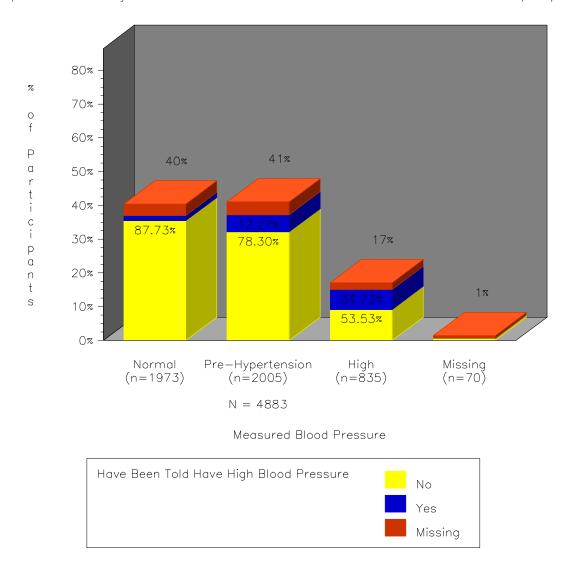
Borderline cholesterol is defined as total cholesterol measurement 200 - < 240 mg/dl.

High cholesterol is defined as total cholesterol measurement >= 240 mg/dL.

Self report is the response to the question: 'Have you ever been told you have high cholesterol?' (Yes/No)

Only women who are not on medication are used in the analysis. The bottom portion of column 3 (High) represents newly detected cases.

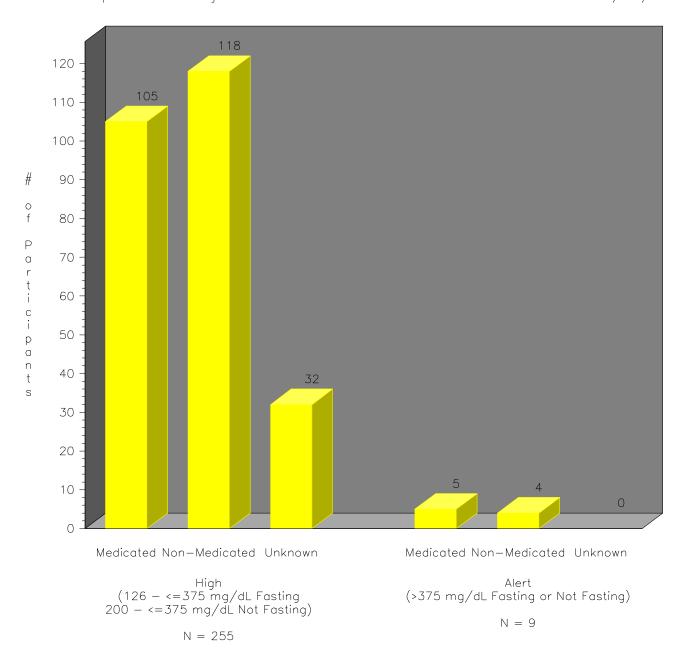
### Comparison of Lab Results and Self-Reported History of High Blood Pressure Baseline Data for Participants in All Projects Who Were Screened for the First Time Between 01/01/2005 and 06/30/2005



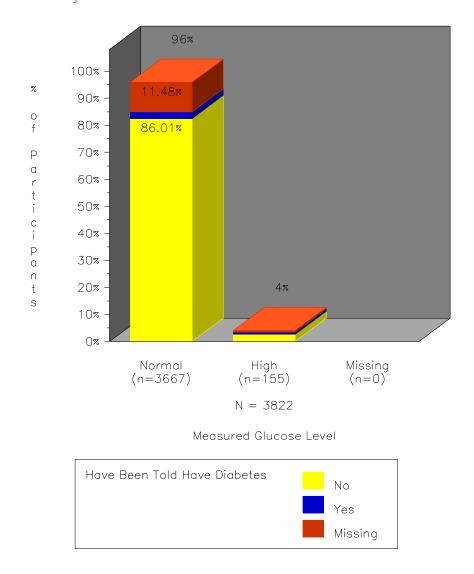
Pre-Hypertension is defined as systolic measurement 120 - < 140 mm Hg or diastolic measurement 80 - < 90 mm Hg. High blood pressure is defined as systolic measurement >= 140 mm Hg or diastolic measurement >= 90 mm Hg. Self report is the response to the question: 'Have you ever been told you have high blood pressure?' (Yes/No)

Only women who are not on medication are used in the analysis. The bottom portion of column 3 (High) represents newly detected cases.

## Number of WISEWOMAN Participants with Measured High Glucose Baseline Data for Participants in All Projects Who Were Screened for the First Time Between 01/01/2005 and 06/30/2005



# Comparison of Lab Results and Self-Reported History of Diabetes Baseline Data for Participants in All Projects Who Were Screened for the First Time Between 01/01/2005 and 06/30/2005



High glucose is defined as glucose measurement >=126 if fasting and >=200 if not fasting. Self report is the response to the question: 'Have you ever been told you have diabetes?' (Yes/No)

Only women who are not on medication are used in the analysis. The bottom portion of column 2 (High) represents newly detected cases.

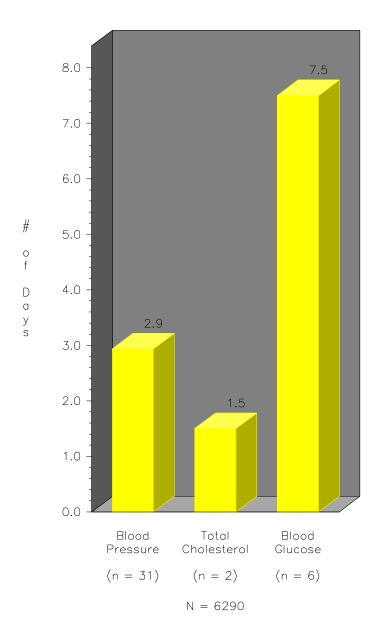
Mean Readings for WISEWOMAN Participants
Baseline Data for Participants in All Projects Who Were Screened for the First Time Between 01/01/2005 and 06/30/2005

Measurement	Baseline N	Baseline Mean	Lower 95% Confidence Limit	Upper 95% Confidence Limit	Number Abnormal	Percent Abnormal	Abnormal Value
Total Cholesterol (mg/dl)	6154	205	204	206	1122	18.2	TotChol>=240
HDL (mg/dl)	6090	53.5	53.1	53.9	1023	16.8	0<=HDL<40
Systolic Blood Pressure (mm Hg)	6115	124	124	125	1074	17.6	SBPAvg>=140
Diastolic Blood Pressure (mm Hg)	6115	77.6	77.3	77.8	837	13.7	DBPAvg>=90
Body Mass Index	5920	30.4	30.2	30.6	4380	74.0	BMI>=25
LDL (mg/dl)	4069	123	122	124	631	15.5	LDL>=160
Blood Glucose (mg/dl)	4036	102	101	103	265	6.6	(Glucose>=126 and BGFast=1) or (Glucose>=200)
Triglycerides (mg/dl)	3975	144	141	147	751	18.9	Trigly>=200

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# Mean Days Between Screening and Diagnostic Exam for Women with Alert Values in the WISEWOMAN Population

Baseline Data for Participants in All Projects Who Were Screened for the First Time Between 01/01/2005 and 06/30/2005



# Prescriptions of Medications after Diagnostic Exam for Women with Alert Values in the WISEWOMAN Population

Baseline Data for Participants in All Projects Who Were Screened for the First Time Between 01/01/2005 and 06/30/2005

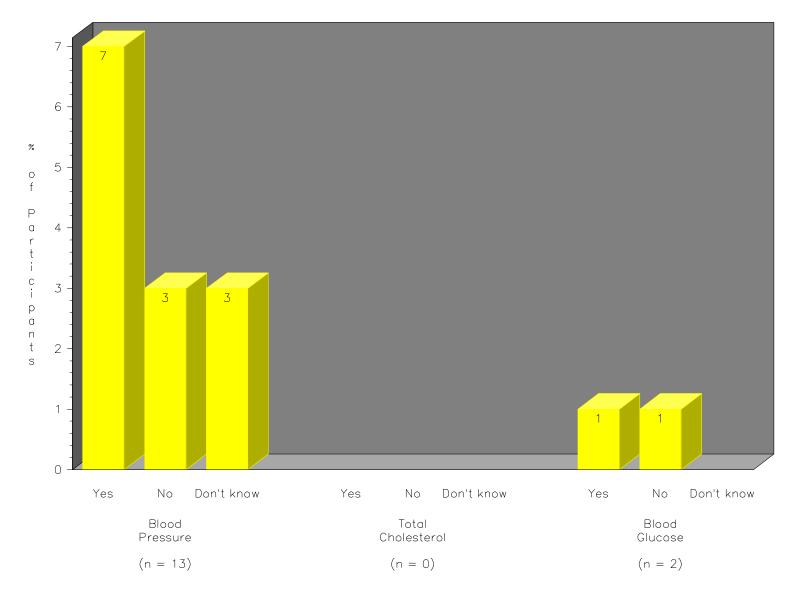
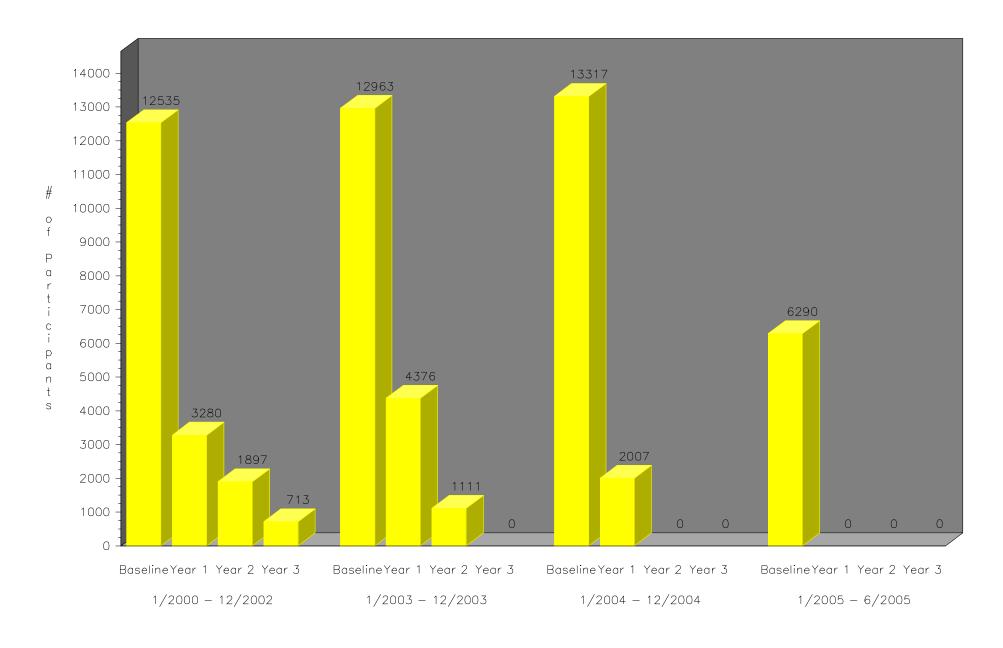


Chart is restricted to women with alert values who during their baseline screening report not taking meds for their condition.

## Ns at Baseline and Followup Participants in All Projects Screened Between January 1, 2000 and June 30, 2005



# 10-Year Risk of Coronary Heart Disease

Participants in All Projects Screened Between January 1, 2000 and June 30, 2005

Method	Source	Average Age	N	Average Risk	Number with Risk >= 20%	Percent with Risk >= 20%
Anderson, 10 year Risk of CHD	Baseline	51	8043	5.78%	166	2.06%
	Year 1	51	8043	5.61%	150	1.86%
Jackson, 5 year Risk of CVD	Baseline	51	8043	3.43%	94	1.17%
	Year 1	51	8043	3.27%	80	0.99%

Coronary heart disease (CHD) is defined as angina pectoris, recognized and unrecognized myocardial infarction, coronary insufficiency (unstable angina), and CHD death.

Cardiovascular disease (CVD) is defined as CHD plus stroke, peripheral vascular disease, and heart failure.

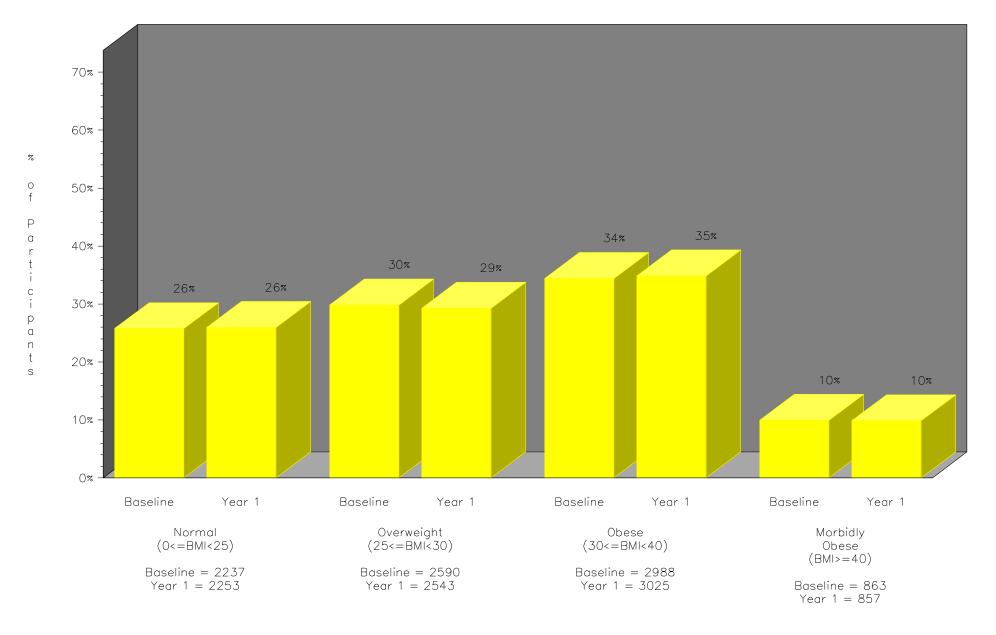
Source: Grundy SM, Pasternak R, Greenland P, Smith S, Fuster V. "Assessment of Cardiovascular Risk by Use of Multiple-Risk-Factor Assessment Equations: A Statement for Healthcare Professionals from the American Heart Association and the American College of Cardiology." Circulation, 1999; 100:1481-1492.

Jackson and Anderson Guidelines include assessment of Risk based on Age, Total and HDL Cholesterol, Systolic Blood Pressure, Smoking Status, and Diabetes Status. Jackson also considers diastolic blood pressure.

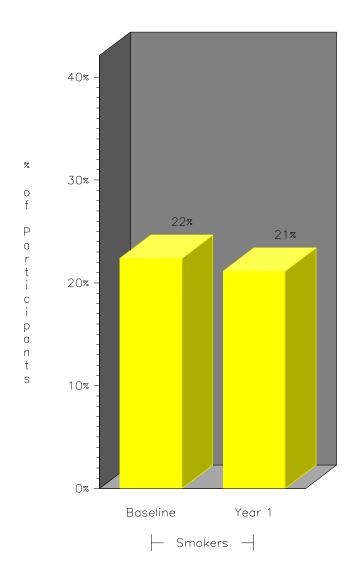
Source: Anderson K, Wilson P, Odell P, Kannel W. "An Updated Coronary Risk Profile" Circulation, January, 1991, 83(1). and Jackson R. Updated New Zealand cardiovascular disease Risk-benefit prediction guide. BMJ 2000;320(7236):709-710.

01/09/2006

# Prevalence of Overweight and Obesity in the WISEWOMAN Population Participants in All Projects Screened Between January 1, 2000 and June 30, 2005

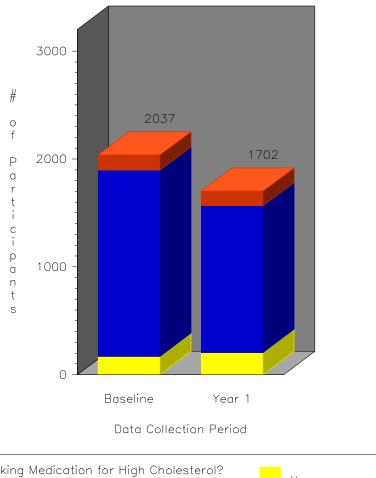


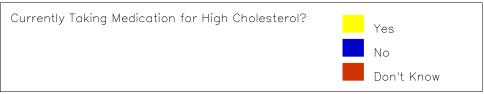
# Percent of WISEWOMAN Participants Who Smoke Participants in All Projects Screened Between January 1, 2000 and June 30, 2005



N = 9461Smokers at Baseline: 2118, Smokers at Year 1: 2000

# Number of WISEWOMAN Participants with Measured High Cholesterol Participants in All Projects Screened Between January 1, 2000 and June 30, 2005

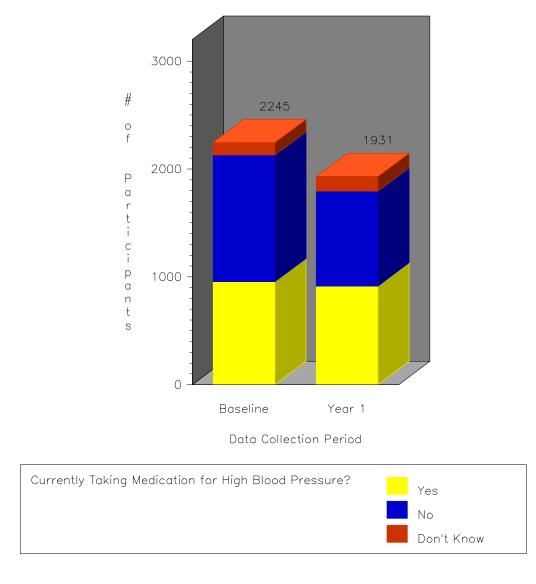




N = 9021

High cholesterol is defined as total cholesterol measurement 240 - <=400 mg/dL. Alert level cholesterol is defined as total cholesterol measurement >400 mg/dL.

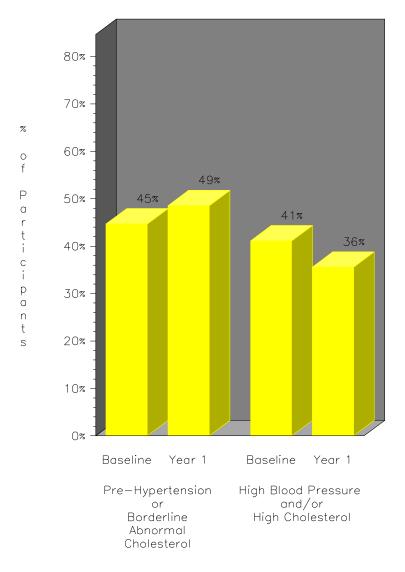
## Number of WISEWOMAN Participants with Measured High Blood Pressure Participants in All Projects Screened Between January 1, 2000 and June 30, 2005



N = 9041

High blood pressure is defined as systolic measurement 140 - <= 180 mm Hg OR diastolic measurement 90 - <= 110 mm Hg. Alert level blood pressure is defined as systolic measurement > 180 mm Hg OR diastolic measurement > 110 mm Hg.

# What is the Burden of Disease for WISEWOMAN participants? Participants in All Projects Screened Between January 1, 2000 and June 30, 2005

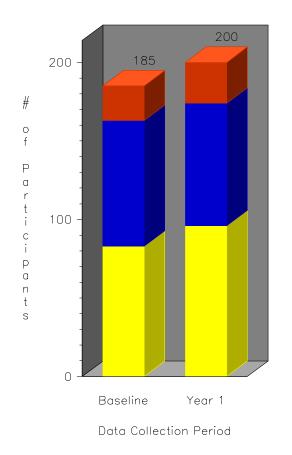


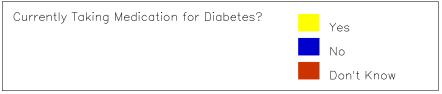
N = 9175

Baseline High Blood Pressure: 2277, Baseline High Cholesterol: 2074 Year 1 High Blood Pressure: 1951, Year 1 High Cholesterol: 1730

High Blood Pressure and High Cholesterol categorizations are based on lab results.

## Number of WISEWOMAN Participants with Measured High Glucose Participants in All Projects Screened Between January 1, 2000 and June 30, 2005





N = 3932

High glucose is defined as glucose measurement 126 - <= 375 mg/dL. Alert level glucose is defined as glucose measurement > 375 mg/dL. Women with the same fasting status at baseline and followup are included.

# Mean Readings for WISEWOMAN Participants Participants in All Projects Screened Between January 1, 2000 and June 30, 2005

Measurement	Baseline N	Baseline Mean	Year 1 N	Year 1 Mean	Year 1 % Change
Total Cholesterol (mg/dl)	9021	212	9021	207	-2.21
HDL (mg/dl)	8824	56.7	8824	55.9	-1.48
Systolic Blood Pressure (mm Hg)	9043	126	9043	125	-0.93
Diastolic Blood Pressure (mm Hg)	9039	77.9	9039	77.0	-1.09
Body Mass Index	8678	30.2	8678	30.2	0.02
LDL (mg/dl)	4908	126	4908	124	-1.37
Blood Glucose (mg/dl)	3273	96.4	3273	97.3	0.91
Triglycerides (mg/dl)	5012	147	5012	139	-5.70
BG among Women with Pre-diabetes at Baseline	556	107	556	104	-2.76

01/09/2006

# Attachment 9: Validation of Out-of-Range Values

Data User's Manual Version 6.2 May 2006

Validation of Out-of-Range Values: Fill out the fields below for each out-of-range value that has been validated by your project staff:

STFIPS	ENCODEID	VISIT	TEST	VALUE

Tests with Possible Out-of-Range Values	Test
Height	Height
Weight	Weight
First systolic blood pressure	SBP1
First diastolic blood pressure	DBP1
Second systolic blood pressure	SBP2
Second diastolic blood pressure	DBP2
Total cholesterol	TotChol
HDL	HDL
LDL	LDL
Glucose	Glucose
Triglycerides	Trigly
Hemoglobin A1C	HbA1C

# Attachment 10: Project-Specific Definitions of Intervention Completion

Data User's Manual Version 6.2 May 2006

# **Definitions of Complete Interventions:**

**Standard Projects:** 

CT	3 face-to-face individual or group sessions
MA	3 sessions
MI	Prior to May 31, 2005 abnormal BP or TC: 5 sessions normal BP or TC, smokers: 3 sessions normal BP or TC, nonsmokers: 1 session After May 31, 2005 3 sessions
MO	3 individual face-to-face or phone (a combination) OR
	3 group face-to-face
MN	2 individual face-to face sessions and 3 phone calls
NE	4 group face-to-face OR
	6 phone calls
NC	abnormal or history of BP, TC, or BMI, BMI ≥ 30 or smoking: 2 sessions (any type, any setting)  Normal values: 1 session (any type, any setting)
SD	4 individual or group face-to-face or phone sessions
SEARHC	2 individual face-to-face sessions
VT	3 individual face-to-face or phone sessions

## Research Projects:

CA	3 face-to-face individual sessions
IA	12 face-to-face group sessions
IL	12 face-to-face group sessions
NC Vanguard Site	1 individual face-to-face session and 3 individual phone calls
SCF	6 face-to-face group sessions
WV	1 face-to-face individual session and 6 mailings

# Attachment 11: New/Revised Minimum Data Elements for the April 2008 and April 2009 MDE Submissions

Data User's Manual Version 6.2 May 2006

## **Summary of the New/Revised MDEs**

		Date Change Must	Date of MDE Submission that Must Include
Change	<b>Current MDE</b>	Begin*	Change
Part A: Deleted MDEs		-	
Diagnostic exam referral status	10a – BPRefer 10e – TCRefer 10i – BGRefer	July 1, 2007	April 15, 2008
Referral dates for diagnostic exams	10b – BPReDate 10f – TCReDate 10j – BGReDate	July 1, 2007	April 15, 2008
Part B: Revised MDEs			
Diagnostic exam dates	10c – BPDiDate 10g – TCDiDate 10k – BGDiDate	July 1, 2007	April 15, 2008
Prescription questions	10d – BPMeds 10h – TCMeds 10l – BGMeds	July 1, 2007	April 15, 2008
Medication questions	08a – HCMeds 08b – HBPMeds 08c – DMeds	July 1, 2007	April 15, 2008
Total cholesterol fasting Part C: New MDEs	06c – TCFast	July 1, 2008	April 15, 2009
Work-up status		July 1, 2007	April 15, 2008
Enrollment status Part D: Standardized MDEs		No later than July 1, 2007	April 15, 2008
Nutrition questions		No later than July 1, 2008	April 15, 2009
Physical activity questions		No later than July 1, 2008	April 15, 2009

<sup>\* &</sup>quot;No later" indicates that projects can start collecting and reporting data to RTI prior to the specified date.

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## **Part A: Deleted MDEs**

	Screening Information: Alert Values	
Item	10a: If average SBP>180 or DBP>110, was participant	referred for a
	diagnostic exam?	DELETED MDE
Purpose	To specify additional information about participants	7/1/2007
	with alert blood pressure readings.	17172001
Name	BPRefer	
	Screening Information: Alert Values	
Item	10b: If average SBP>180 or DBP>110, referral date for	the diagnostic
_	exam.	DELETED MDE
Purpose	To specify additional information about participants wi	7/1/2007
N	alert blood pressure readings.	17172007
Name	BPReDate Alast Wales	
Τ.	Screening Information: Alert Values	
Item	10e: If TC>400, was participant referred for a diagnosti	c exam?
Purpose	To specify additional information about participants	DELETED MDE
	with an alert total cholesterol reading.	7/1/2007
Name	TCRefer	
τ.	Screening Information: Alert Values	
Item	10f: If TC>400, referral date for the diagnostic exam.	DELETED MDE
Purpose	To specify additional information about participants	7/1/2007
	with an alert total cholesterol reading.	
Name	TCReDate	
_	Screening Information: Alert Values	
Item	10i: If BG>375, was participant referred for a diagnosti	
Purpose	To specify additional information about participants wi	
	an alert blood glucose reading.	7/1/2007
Name	BGRefer	
	Screening Information: Alert Values	
Item	10j: If BG>375, referral date for the diagnostic exam.	DELETED MDE
Purpose	To specify additional information about participants	
	with an alert blood glucose reading.	7/1/2007
Name	BGReDate	

## Part B: Revised MDEs

**Screening Information: Medication Status** 

Item 8a: Are you currently taking medication for high cholesterol?

Purpose To determine whether the participant is taking medication for high

cholesterol.

Name HCMeds

Length 1

Type Numeric
Justification Right
Leading Zeros No
Beginning Position 126

Edits Valid range; cannot be blank.

Contents 1 Yes, as prescribed

2 Yes, but not today

3 No

4 Don't know7 Refused

8 Not Answered9 Not Asked

Explanation Indicate whether the participant is currently taking medication for high

cholesterol.

Example Taking medication as prescribed: 1

**Screening Information: Medication Status** 

Item 8b: Are you currently taking medication for high blood pressure?

Purpose To determine whether the participant is taking medication for high blood

pressure.

Name HBPMeds

Length 1

Type Numeric
Justification Right
Leading Zeros No
Beginning Position 127

Edits Valid range; cannot be blank.

Contents 1 Yes, as prescribed

2 Yes, but not today

3 No

4 Don't know

Version 6.2, May 2006

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REVISED MDE

7/1/2007

REVISED MDE

7 Refused

8 Not Answered

9 Not Asked

Explanation Indicate whether the participant is currently taking medication for high

blood pressure.

Example Is taking medication but not today: 2

**Screening Information: Medication Status** 

Item 8c: Are you currently taking medication for diabetes?

Purpose To determine whether the participant is taking medication for diabetes.

Name DMeds

Length 1

**Beginning Position** 

Type Numeric
Justification Right
Leading Zeros No

Edits Valid range; cannot be blank.

128

Contents 1 Yes, as prescribed

2 Yes, but not today

3 No

4 Don't know

7 Refused

8 Not Answered

9 Not Asked

Explanation Indicate whether the participant is currently taking medication for

diabetes.

Example Does not take medication: 3

**Screening Information: Alert Values** 

Item 10c: If average SBP>180 or DBP>110, what type of treatment was

prescribed?

Purpose To specify additional information about participants with alert blood

pressure readings.

Name BPMeds

Length 1

Type Numeric Justification Right

Leading Zeros No Beginning Position 162 **REVISED MDE** 7/1/2007

**REVISED MDE** 

7/1/2007

Version 6.2, May 2006

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Edits Valid range
Contents 1 Medication

2 Therapeutic Lifestyle Changes (TLC) – this is NOT the same as the

lifestyle intervention offered to WISEWOMAN participants

3 Both Medication and TLC

4 Nothing Prescribed

5 Not an alert reading

6 Already on meds

7 Refused

9 Lost-to-followup

blank if SBP1 and DBP1 = 777 or 888 or 999

Explanation Indicate the type of treatment prescribed to a participant with alert blood

pressure readings who received a diagnostic examination. Two blood pressures must be averaged and rounded to determine if a woman has an

alert value (average SBP>180 or average DBP>110).

Example Was prescribed medication: 1

**Screening Information: Alert Values** 

Item 10f: If TC>400, what type of treatment was prescribed?

Purpose To specify additional information about participants with an alert total

cholesterol reading.

Name TCMeds

Length 1

Type Numeric
Justification Right
Leading Zeros No
Beginning Position 180

Edits Valid range
Contents 1 Medication

2 Therapeutic Lifestyle Changes (TLC) - this is NOT the same as the

lifestyle intervention offered to WISEWOMAN participants

3 Both Medication and TLC

4 Nothing Prescribed5 Not an alert reading6 Already on meds

7 Refused

9 Lost-to-followup

blank if SBP1 and DBP1 = 777 or 888 or 999

Explanation Indicate the type of treatment prescribed to a participant with alert total

**REVISED MDE** 7/1/2007

**REVISED MDE** 

1 1 . 1	1			1.	. •	• •
chologtorol	TTIDO	20011100	$\mathbf{o}$	diagno	otto.	avamination
CHOICSICIOL	wiit) it	SUCTABLE	а	mayiii	MILL	examination.
***********						•

Example	Was	prescribed	TLC: 2

**Screening Information: Alert Values** 

Item 10i: If BG>375, what type of treatment was prescribed?

Purpose To specify additional information about participants with an alert blood

glucose reading.

Name BGMeds

Length 1

Type Numeric Justification Right

Leading Zeros No
Beginning Position 198

Edits Valid range.
Contents 1 Medication

2 Therapeutic Lifestyle Changes (TLC) - this is NOT the same as the

lifestyle intervention offered to WISEWOMAN participants

3 Both Medication and TLC

4 Nothing Prescribed

5 Not an alert reading6 Already on meds

7 Refused

9 Lost-to-followup

blank if SBP1 and DBP1 = 777 or 888 or 999

Explanation Indicate the type of treatment prescribed to a participant with alert blood

glucose who received a diagnostic examination.

Example Was not prescribed anything: 4

**Fasting Status for Cholesterol Tests** 

Item 6c: Fasting status for cholesterol (9-12 hrs)

Purpose To indicate whether the participant fasted for a minimum of 9 hours

prior to having blood drawn for a total cholesterol reading.

Name TCFast

Length 1

Type Numeric Justification Right

Leading Zeros No Beginning Position 122

Edits Valid range; cannot be blank.

**REVISED MDE** 7/1/2008

**REVISED MDE** 

Contents	1 Yes
	2 No
	3 Don't Know
	4 Blood Not Drawn
	5 Fasted for 8 hours only (carryover from v. 6.2)
	7 Refused
	8 Not Answered
	9 Not Asked
Explanation	Indicate whether the participant fasted for <b>a minimum of 9 hours</b> prior to having blood drawn for a total cholesterol.
Example	Fasted for a minimum of 9 hrs: 1

Version 6.2, May 2006

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## Part C: New MDEs

Screening Information: Alert Values

Item 10a: If average SBP>180 or DBP>110, what is the status of the work-up?

Purpose To specify the status of the work-up for a woman with alert blood

pressure readings.

Name **BPAlert** 

Length 1

Numeric Type Justification Right Leading Zeros No **TBD Beginning Position** 

**Edits** Valid range

Contents 1 Work-up Pending

2 Work-up Complete

3 Work-up Not Medically Indicated, client being treated

5 Not an alert reading 7 Work-up Refused

9 Work-up Not Completed, client lost to followup blank if SBP1 and DBP1 = 777 or 888 or 999

**Explanation** Indicate the status of the work-up for women with alert blood pressure.

> Two blood pressures must be averaged and rounded to determine if a woman has an alert value (average SBP>180 or average DBP>110).

Example Work-up is pending: 1

**Screening Information: Alert Values** 

Item 10d: If TC>400, what is the status of the work-up?

To specify the status of the work-up for a woman with alert total Purpose

cholesterol

**TCAlert** Name

Length

Numeric Type Justification Right Leading Zeros No

**Beginning Position** TBD

**Edits** Valid range

Contents 1 Work-up Pending

2 Work-up Complete

3 Work-up Not Medically Indicated, client being treated

Version 6.2, May 2006

Attachment 11: Page 8 of 13

**NEW MDE** 

7/1/2007

**NEW MDE** 

5 Not an alert reading

7 Work-up Refused

9 Work-up Not Completed, client lost to followup

blank if TC = 777 or 888 or 999

Explanation Indicate the status of the work-up for women with alert total cholesterol.

Example Work-up has been completed: 2

**Screening Information: Alert Values** 

Item 10g: If average BG>375, what is the status of the work-up?

Purpose To specify the status of the work-up for a woman with alert blood

glucose.

Name BGAlert

Length 1

Type Numeric

Justification Right
Leading Zeros No
Beginning Position TBD

Edits Valid range

Contents 1 Work-up Pending

2 Work-up Complete

3 Work-up Not Medically Indicated, client being treated

5 Not an alert reading

7 Work-up Refused

9 Work-up Not Completed, client lost to followup

blank if Glucose = 777 or 888 or 999

Explanation Indicate the status of the work-up for women with alert blood glucose.

Example Work-up refused: 7

### **Enrollment Status**

Projects will be required to collect data on enrollment status of program participants:

- 1. Patient obtained insurance (includes BCCP treatment program)
- 2. Patient moved (known to move out of area/sate)
- 3. Patient is age ineligible
- 4. Patient became income ineligible
- 5. Patient is lost to follow-up (cannot be located)
- 6. Patient is deceased
- 7. Patient declined re-enrollment in program

This data will be submitted to RTI in separate file (and not as part of the screening MDE file). Specific details on the required data elements and file layout will be provided by October 2006. This information will be

NEW MDE 7/1/2007

**NEW MDE** 

used to explain why WISEWOMAN participants did not complete the first annual screening visit. This information will also enhance the accuracy of the rescreening rates.

## Part D: Standardized MDEs

**Physical Activity** 

Item 1a: In a usual week, how many days per week do you do **moderate** 

physical activity for at least 10 minutes at a time, such as brisk walking, bicycling, vacuuming, gardening, or anything else that causes some

increase in breathing or heart rate?

Purpose To measure levels of physical activity.

Name PA\_1 Length 1

Type Numeric
Justification Right
Leading Zeroes No

Beginning Position TBD

Edits Valid range; Cannot be blank.

Contents 0 0 days

1 1 day

2 days

3 days

4 4 days

5 5 days

6 6 days

7 days

8 Don't know

9 Refused/Not Answered/Not Asked

Explanation Enter the numbers of days a participants reports exercising for at least 10

minutes.

Example Exercising 2 days/week: 2

**TBD** 

**Physical Activity** 

Item 1b: On days when you do **moderate** activities for at least 10 minutes at a time,

on average, how much total time per day do you spend doing these activities

(hours and minutes)?

Purpose To measure levels of physical activity.

Name PA\_2 Length 4

Type Character
Justification Right
Leading Zeroes Yes

Edits 0010-2400 hours and minutes; Cannot be blank.

STANDARDIZED MDE

STANDARDIZED MDE

7/1/2008

7/1/2008

**Beginning Position** 

Contents HHMM Hours and Minutes

7777 If PA\_1=0 or 8 or 9

8888 Don't know

9999 Refused/Not Answered/Not Asked

Explanation Enter the numbers of hours and minutes a participant reports exercising

per day

Example Exercising 2 hours per day: 0200

**Nutrition** 

Item 2a: How many servings of fruit did you eat yesterday? This would include

fresh fruit, canned fruit, dried and frozen fruit but NOT fruit juice. A serving is

whatever you think of as a normal portion size for yourself.

Purpose To assess intake of fruits.

Name NU\_1 Length 1

Type Numeric
Justification Right
Leading Zeroes No
Beginning Position TBD

Edits 0-6 Cannot be blank.

Contents: 8 Don't know

9 Refused/Not Answered/Not Asked

Explanation Enter the number of fruit servings a participant reported eating yesterday.

Example Ate 2 servings yesterday: 2

**Nutrition** 

Item 2b: How many servings of 100% fruit juice did you drink yesterday? – Do

NOT include fruit drinks like Kool-Aid or lemonade, cranberry juice cocktail,

Hi-C, Tang, Tampico, Sunny Delight, or Twister.

Purpose To assess intake of fruit juice.

Name NU\_2

Length 1

Type Numeric
Justification Right
Leading Zeroes No
Beginning Position TBD

Edits 0-6; Cannot be blank.

Contents: 8 Don't know

9 Refused/Not Answered/Not Asked

Explanation Enter the number of fruit juice servings a participant reported drinking

yesterday.

Example Drank 3 servings yesterday: 3

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### **Nutrition**

Item 2c. How many servings of vegetables did you eat yesterday? This would

include ALL forms of vegetables, such as fresh, canned, frozen and dried, as well as any vegetable juices, soups and stews made with vegetables. It ALSO

includes potatoes, vegetable salads and salsa.

Purpose To assess intake of vegetables.

Name NU\_3

Length 1

Type Numeric
Justification Right
Leading Zeroes No
Beginning Position TBD

Edits 0-6; Cannot be blank.

Contents: 8 Don't know

9 Refused/Not Answered/Not Asked

Explanation Enter the number of vegetable servings a participant reported eating

yesterday.

Example Ate 4 servings yesterday: 4

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