**Lifestyle Intervention MDE  
Field Descriptions**

**Data User’s Manual**

**Version 7.00**

**July 2008**

Part A: Lifestyle Intervention MDE Field Descriptions

|  |  |  |  |
| --- | --- | --- | --- |
|  | Name | Type | Location |
| 0. MDE Version |  |  |  |
| a. MDE version | MDEVer | Numeric | 1 – 3 |
| 1. Lifestyle Intervention Location |  |  |  |
| a. State/Tribal FIPS Code | StFIPS | Character | 4 – 5 |
| 2. Record Identification |  |  |  |
| a. Unique Lifestyle Intervention Record ID Number | NRec | Numeric | 6-11 |
| 3. Participant Information |  |  |  |
| a. Unique Participant ID Number | EncodeID | Character | 12-26 |
| 4. Lifestyle Intervention Date |  |  |  |
| 1. Date of Lifestyle Intervention Session | Intervention | Numeric | 27-34 |
| 5. Lifestyle Intervention Information |  |  |  |
| a. Type of Contact\* | ContactType | Numeric | 35-36 |
| b. Setting | Setting | Numeric | 37 |
| 6. Lifestyle Intervention Session Focus |  |  |  |
| a. Nutrition | Nutrition | Numeric | 38 |
| b. Linked to Community-Based Nutrition Resources | NutLink | Numeric | 39 |
| c. Physical Activity | PA | Numeric | 40 |
| d. Linked to Community-Based Physical Activity Resources | PALink | Numeric | 41 |
| e. Linked to Proactive Tobacco Quit Line | QuitLine | Numeric | 42 |
| f. Linked to Community-Based Tobacco Cessation Resources | TobacLink | Numeric | 43 |
| g. Indicate whether the participant received smoking cessation counseling during lifestyle intervention session | TobacCoun | Numeric | 44 |

|  |  |  |
| --- | --- | --- |
| Part B: Lifestyle Intervention MDE Field Descriptions | | |
| Section 0: 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 | | 700 Version 7.00 |
| Explanation | | Enter the version of the MDE that was used to construct the files. |
| Example | | MDE version 7.00: 700 |
| Section 1: Lifestyle Intervention Location | | |
| Item | | 1a: State/Tribal FIPS Code |
| Purpose | | To specify the FIPS or Tribal Program code for the State or Tribe where the lifestyle intervention occurred. |
| Name | | StFIPS |
| Length | | 2 |
| Type | | Character |
| Justification | | Left |
| Leading Zeros | | Yes |
| Beginning Position | | 4 |
| Edits | | Valid FIPS State/territorial/tribal code; cannot be blank. |
| Contents | | 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) |
|  | | 37 North Carolina (NC) |
|  | | 41 Oregon (OR) |
|  | | 42 Pennsylvania (PA) |
|  | | 45 South Carolina (SC) |
|  | | 46 South Dakota (SD) |
|  | | 49 Utah (UT) |
|  | | 50 Vermont (VT) |
|  | | 51 Virginia (VA) |
|  | | 54 West Virginia (WV) |
|  | | 55 Wisconsin (WI) |
|  | | 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 Program codes are codes assigned by CDC to be used by the Tribal Programs in lieu of State FIPS codes. |
| Example | | Connecticut: 09 |
| Section 2: Record Identification | | |
| Item | 2a: Unique Lifestyle Intervention Record ID Number | |
| Purpose | To uniquely identify records within the file. | |
| Name | NRec | |
| Length | 6 | |
| Type | Numeric | |
| Justification | Right | |

| Part B: Lifestyle Intervention MDE Field Descriptions (continued) | |
| --- | --- |
| Leading Zeros | No |
| Beginning Position | 6 |
| 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 |
| Section 3: 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 | 12 |
| 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 |
| Section 4: Lifestyle Intervention Date | |
| Item | 4a: Date of Lifestyle Intervention Session |
| Purpose | To specify the date of the lifestyle intervention session. |
| Name | Intervention |
| Length | 8 |
| Type | Numeric |
| Justification | Right |
| Leading Zeros | Yes |
| Beginning Position | 27 |
| Edits | Cannot be blank.  INTERVENTION>=AssessDate, WeightDate, BPDate, TCDate, BGDate (dates are from the first screening record). |
| Contents | MMDDCCYY Date |
| Explanation | Record the date of the lifestyle intervention session.  Lifestyle intervention date must occur on or after the date that the baseline screening and assessment measurements are completed. |
| Example | March 31, 2010: 03312010 |
| Section 5: Lifestyle Intervention Information | |
| Item | 5a: Type of Contact\* |
| Purpose | To specify the type of contact used for the lifestyle intervention session. |
| Name | ContactType |
| Length | 2 |
| Type | Numeric |
| Justification | Right |
| Leading Zeros | No |
| Beginning Position | 35 |
| Edits | Valid range, cannot be blank. |
| Contents | 1 Face-to-Face |
|  | 2 Phone |
|  | 3 Evidence that mailed materials were opened and reviewed |
|  | 4 Evidence that audiotape or DVD was opened and reviewed  5 Evidence that computer based session was completed  6. Referral to community based resources with no WISEWOMAN LSI – referral confirmed  7. Referral to community based resources with no WISEWOMAN LSI – referral not confirmed  77 Unknown  These response options may be expanded by CDC to accommodate other types of lifestyle intervention contacts. |
| Explanation | Record the type of contact used for the lifestyle intervention session. |
| Example | Face-to-Face contact: 1 |
| Section 5: Lifestyle Intervention Information | |
| Item | 5b: Setting |
| Purpose | To specify the setting for the lifestyle intervention session. |
| Name | Setting |
| Length | 1 |
| Type | Numeric |
| Justification | Right |
| Leading Zeros | No |
| Beginning Position | 37 |
| Edits | Valid range, cannot be blank. |
| Contents | 1 Individual |
|  | 2 Group |
|  | 7 Unknown |
| Explanation | Record the type of setting used for the lifestyle intervention session. |
| Example | Group session: 2 |
| Section 6: Lifestyle Intervention Session Focus | |
| Item | 6a: Nutrition |
| Purpose | To indicate whether the participant received nutrition counseling during the lifestyle intervention session. |
| Name | Nutrition |
| Length | 1 |
| Type | Numeric |
| Justification | Right |
| Leading Zeros | No |
| Beginning Position | 38 |
| Edits | Valid range; cannot be blank. |
| Contents | 1 Yes |
|  | 2 No |
|  | 7 Unknown |
| Explanation | Indicate whether the participant received nutrition counseling during the lifestyle intervention session. |
| Example | Did not receive nutrition counseling: 2 |
| Section 6: Lifestyle Intervention Session Focus | |
| Item | 6b: Linked to Community-Based Nutrition Resources |
| Purpose | To indicate whether the participant was linked to community-based nutrition resources during the lifestyle intervention session. |
| Name | NutLink |
| Length | 1 |
| Type | Numeric |
| Justification | Right |
| Leading Zeros | No |
| Beginning Position | 39 |
| Edits | Valid range; cannot be blank. |
| Contents | 1 Yes |
|  | 2 No |
|  | 7 Unknown |
| Explanation | Indicate whether the participant was linked to community-based nutrition resources during the lifestyle intervention session. |
| Example | Was linked to community-based nutrition resources: 1 |
| Section 6: Lifestyle Intervention Session Focus | |
| Item | 6c: Physical Activity |
| Purpose | To indicate whether the participant received physical activity counseling during the lifestyle intervention session. |
| Name | PA |
| Length | 1 |
| Type | Numeric |
| Justification | Right |
| Leading Zeros | No |
| Beginning Position | 40 |
| Edits | Valid range; cannot be blank. |
| Contents | 1 Yes |
|  | 2 No |
|  | 7 Unknown |
| Explanation | Indicate whether the participant received physical activity counseling during the lifestyle intervention session. |
| Example | Received physical activity counseling: 1 |
| Section 6: Lifestyle Intervention Session Focus | |
| Item | 6d: Linked to Community-Based Physical Activity Resources |
| Purpose | To indicate whether the participant was linked to community-based physical activity resources during the lifestyle intervention session. |
| Name | PALink |
| Length | 1 |
| Type | Numeric |
| Justification | Right |
| Leading Zeros | No |
| Beginning Position | 41 |
| Edits | Valid range; cannot be blank. |
| Contents | 1 Yes |
|  | 2 No |
|  | 7 Unknown |
| Explanation | Indicate whether the participant was linked to community-based physical activity resources during the lifestyle intervention session. |
| Example | Was not linked to community-based physical activity resources: 2 |
| Section 6: Lifestyle Intervention Session Focus | |
| Item | 6e: Linked to Proactive Tobacco Quit Line |
| Purpose | To indicate whether the participant was linked to a proactive tobacco quit line during the lifestyle intervention session. |
| Name | QuitLine |
| Length | 1 |
| Type | Numeric |
| Justification | Right |
| Leading Zeros | No |
| Beginning Position | 42 |
| Edits | Valid range; cannot be blank. |
| Contents | 1 Yes |
|  | 2 No |
|  | 7 Unknown |
| Explanation | Indicate whether the participant was linked to a proactive tobacco quit line during the lifestyle intervention session. |
| Example | Was linked to a proactive tobacco quit line: 1 |
| Section 6: Lifestyle Intervention Session Focus | |
| Item | 6f: Linked to Community-Based Tobacco Cessation Resources |
| Purpose | To indicate whether the participant was linked to community-based tobacco cessation resources during the lifestyle intervention session. |
| Name | TobacLink |
| Length | 1 |
| Type | Numeric |
| Justification | Right |
| Leading Zeros | No |
| Beginning Position | 43 |
| Edits | Valid range; cannot be blank. |
| Contents | 1 Yes |
|  | 2 No |
|  | 7 Unknown |
| Explanation | Indicate whether the participant was linked to community-based tobacco cessation resources during the lifestyle intervention session. |
| Example | Not known whether linked to community-based tobacco cessation resources: 7 |
| **Section 6: Lifestyle Intervention Session Focus** | |
| Item | 6g: Indicate whether participant received smoking cessation counseling during lifestyle intervention. |
| Purpose | To indicate whether the participant was linked to community-based tobacco cessation resources during the lifestyle intervention session. |
| Name | TobacLink |
| Length | 1 |
| Type | Numeric |
| Justification | Right |
| Leading Zeros | No |
| Beginning Position | 44 |
| Edits | Valid range; cannot be blank. |
| Contents | 1 Yes |
|  | 2 No |
|  | 7 Unknown |