Form Approved
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Screening and Assessment MDE Field Descriptions

MDE Manual
Version 8.0

Current as of September 30, 2012

Part A: Summary of MDEs in Screening and Assessment File

Item Number	Variable Name	Position	Variable Label	Type
0a	MDEVer	1-3	MDE version	Numeric
1a	StFIPS	4-5	State/Tribal FIPS code	Character
1b	HdFIPS	6-8	FIPS county code (provider)	Character
1c	EnrollSiteID	9-13	Enrollment site ID	Character
1d	ScreenSiteID	14-18	Screening site ID	Character
2a	NRec	19-24	Unique screening record ID number	Numeric
2b	*Disp*	*25*	*Disposition status (not required for MDE ver 8.0)**	*Numeric*
3a	EncodeID	26-40	Unique participant ID number	Character
3b	CntyFIPS	41-43	County of residence	Character
3c	ZIP	44-48	ZIP code of residence	Character
3d	DOB	49-56	Date of birth	Numeric
3e	Latino	57	Hispanic or Latino origin	Numeric
3f	Race1	58	First race listed	Numeric
3g	Race2	59	Second race listed	Numeric
3h	Race3	60	Third race listed	Numeric
3i	Race4	61	Fourth race listed	Numeric
3j	Race5	62	Fifth race listed	Numeric
3k	*Race6*	*63*	*Sixth race listed (not required for MDE ver 8.0)**	*Numeric*
3l	Education	64-65	Education (highest grade completed)	Numeric
4a	*AssessDate*	*66-73*	*Assessment Date (not required for MDE ver 8.0)**	*Numeric*
5a	SRHC	74	Have you ever been told by a doctor, nurse, or other health professional that your blood cholesterol is high?	Numeric
5b	SRHB	75	Have you ever been told by a doctor, nurse, or other health professional that you have high blood pressure?	Numeric
5c	SRD	76	Have you ever been told by a doctor, nurse, or other health professional that you have diabetes?	Numeric

Item Number	Variable Name	Position	Variable Label	Type
5d	SRHA	77	Has a doctor, nurse, or other health professional ever told you that you had any of the following: heart attack (also called myocardial infarction), angina, coronary heart disease, or stroke?	Numeric
6a	FAMHAM	78	Has your father, brother, or son had a stroke or heart attack before age 55?	Numeric
6b	FAMHAF	79	Has your mother, sister, or daughter had a stroke or heart attack before age 65?	Numeric
6c	FAMD	80	Has either of your parents, your brother or sister, or your child ever been told by a doctor, nurse, or other health professional that he or she has diabetes?	Numeric
7a	HCMeds	81	Are you taking any medicine prescribed by your doctor, nurse, or other health professional for your high cholesterol?	Numeric
7b	HBPMeds	82	Are you taking any medicine prescribed by your doctor, nurse, or other health professional for your high blood pressure?	Numeric
7c	DMeds	83	Are you taking any medicine prescribed by your doctor, nurse, or other health professional for your diabetes?	Numeric
8a	Smoker	84	Do you now smoke cigarettes every day, some days, or not at all?	Numeric
8b	Sechand	189-190	Not counting decks, porches, or garages, during the past 7 days on how many days did someone other than you smoke tobacco inside your home while you were at home?	Numeric
9a	*Weightdate*	*85-92*	*Height and weight measurement date (not required for MDE ver 8.0)**	*Numeric*
9b	Height	93-95	Height	Numeric
9c	*Hgt_Unit*	*96*	*Height unit (not required for MDE ver 8.0)**	*Numeric*
9d	Weight	97-99	Weight	Numeric
9e	*Wgt_Unit*	*100*	*Weight unit (not required for MDE ver 8.0)**	*Numeric*
10a	BPDate	101-108	Blood pressure measurement date (office visit date)	Numeric
10b	SBP1	109-11	Systolic #1, mm Hg	Numeric
10c	DBP1	112-114	Diastolic #1, mm Hg	Numeric
10d	SBP2	115-117	Systolic #2, mm Hg	Numeric

Item Number	Variable Name	Position	Variable Label	Type
10e	DBP2	118-120	Diastolic #2, mm Hg	Numeric
11a	TCDate	121-128	Cholesterol measurement date	Numeric
11b	TotChol	129-131	Total cholesterol (fasting or nonfasting), mg/dL	Numeric
11c	HDL	132-134	HDL cholesterol (fasting or nonfasting), mg/dL	Numeric
11d	LDL	135-137	LDL cholesterol (fasting only), mg/dL	Numeric
11e	Trigly	138-141	Triglycerides (fasting only), mg/dL	Numeric
11f	TCFast	142	Fasting status for cholesterol measurement (at least 9 hours)	Numeric
12a	BGDate	143-150	Glucose measurement date	Numeric
12b	Glucose	151-153	Glucose (fasting or nonfasting), mg/dL	Numeric
12c	BGFast	154	Fasting status for glucose (at least 8 hours)	Numeric
12d	A1C	155-158	A1C, %	Numeric
13a	BPAlert	159	If average SBP >180 or DBP >110, what is the status of the workup?	Numeric
13b	BPDiDate	160-167	If average SBP >180 or DBP >110, diagnostic exam date.	Numeric
13c	*BPTreat*	*168*	*If average SBP >180 or DBP >110, what type of treatment was prescribed? (not required for MDE ver 8.0)**	*Numeric*
13d	TCAlert	169	If TOTCHOL >400, what is the status of the workup?	Numeric
13e	TCDiDate	170-177	If TOTCHOL >400, diagnostic exam date.	Numeric
13f	*TCTreat*	*178*	*If TOTCHOL >400, what type of treatment was prescribed? (not required for MDE ver 8.0)**	*Numeric*
13g	BGAlert	179	If GLUCOSE ≤50 or ≥275, what is the status of the workup?	Numeric
13h	BGDiDate	180-187	If GLUCOSE ≤50 or ≥275, diagnostic exam date	Numeric
13i	*BGTreat*	*188*	*If GLUCOSE ≤50 or ≥275, what type of treatment was prescribed? (not required for MDE ver 8.0)**	*Numeric*

* These MDEs are no longer required for WISEWOMAN MDE version 8.0. Grantees may input values into the field position for these outdated MDEs, but CDC will not edit or analyze these fields. Grantees that choose not to report the outdated MDEs may leave the field blank. Specifications for these outdated MDEs are in Appendix F.

Part B: Screening and Assessment MDE Specifications

Item 0a: MDEver	**MDE Version** This variable indicates the version of the MDE that was used to collect and report data in the file.			
FORMAT	**Type:**	Numeric	**Justification:**	Right
	Length:	3	**Beginning Position:**	1
	Leading Zeros:	No	**Valid Range**	See values; cannot be blank
	Other Format:	N/A		
DENOMINATOR POPULATION	All records in the Screening and Assessment file that are eligible for MDE submission			
VALUES AND DESCRIPTION	**800 MDE version 8.0**	MDE version 8.0 should be used to collect and report data associated with screening visits conducted July 1, 2011, and after.		
ANALYSIS AND USE	To verify the MDE version used to collect and report data the file			
OTHER INFORMATION	***Guidance*** A crosswalk table between version 7.0 and version 8.0 is available in Appendix E. A valid screening record includes measurements for the following: height, weight, first blood pressure diastolic, and first blood pressure systolic; the record must also have a participant response to at least one health history question (items 5a-8b). If a record does not meet these criteria and the program would like CDC to consider including it, the validation form in Appendix B should be used to validate both the record and missing measurement/health history question.			

Part B: Screening and Assessment MDE Specifications

Item 1a: StFIPS	**State/Tribal FIPS Code** This variable indicates the FIPS or tribal program code for the state or tribe where the administration of the program is located.			
FORMAT	**Type:**	Character	**Justification:**	Left
	Length:	2	**Beginning Position:**	4
	Leading Zeros:	Yes	**Valid Range:**	See values; cannot be blank
	Other Format:	N/A		
DENOMINATOR POPULATION	The denominator includes all WISEWOMAN participants. A participant is a woman who receives at least one NBCCEDP service (enrolled in NBCCEDP); has received all the following screenings from the WISEWOMAN Program: height, weight, first blood pressure diastolic measurement, and first blood pressure systolic measurement; and has responded to at least one health history question. (For items 5a-8b, there must be at least one response that is not coded as '7 Don't know,' '8 Don't want to answer,' or '9 No answer recorded.')			

VALUES AND DESCRIPTION	
06 California (CA)	A screening that occurred in California
09 Connecticut (CT)	A screening that occurred in Connecticut
17 Illinois (IL)	A screening that occurred in Illinois
19 Iowa (IA)	A screening that occurred in Iowa
25 Massachusetts (MA)	A screening that occurred in Massachusetts
26 Michigan (MI)	A screening that occurred in Michigan
27 Minnesota (MN)	A screening that occurred in Minnesota
29 Missouri (MO)	A screening that occurred in Missouri
31 Nebraska (NE)	A screening that occurred in Nebraska
37 North Carolina (NC)	A screening that occurred in North Carolina
41 Oregon (OR)	A screening that occurred in Oregon
42 Pennsylvania (PA)	A screening that occurred in Pennsylvania
45 South Carolina (SC)	A screening that occurred in South Carolina
46 South Dakota (SD)	A screening that occurred in South Dakota
49 Utah (UT)	A screening that occurred in Utah
50 Vermont (VT)	A screening that occurred in Vermont
51 Virginia (VA)	A screening that occurred in Virginia
54 West Virginia (WV)	A screening that occurred in West Virginia
55 Wisconsin (WI)	A screening that occurred in Wisconsin
85 Southeast Alaska Regional Health Consortium (SEARHC)	A screening that occurred within the tribal area of SEARHC
92 Southcentral Foundation (SCF)	A screening that occurred within the tribal area of SCF

ANALYSIS AND USE	To calculate the number of women screened by each state or tribal program To assess the reach of the WISEWOMAN Program both nationally and within a particular state or tribe
OTHER INFORMATION	***Guidance*** The state FIPS codes are the Federal Information Processing Standard codes developed by the National Institute of Standards and Technology. The tribal program codes are codes assigned by CDC to be used by tribal programs in lieu of FIPS.

	Additional edits			
	Programs should always record the FIPS code for the state or tribe where their program is located. This may differ from the FIPS code for the participant's state or tribe of residence if the participant resides in a state or tribe different from where the program is located. The validation tool will flag as an error any FIPS code not the same as where the program is located.			
Part B:	**Screening and Assessment MDE Specifications**			
Item 1b: HdFIPS	**FIPS County Code (Provider)**			
	This indicates the FIPS county code of the provider that conducts the WISEWOMAN screening office visit.			
FORMAT	**Type:**	Character	**Justification:**	Left
	Length:	3	**Beginning Position:**	6
	Leading Zeros:	Yes	**Valid Range:**	Valid FIPS county code for state programs or ANSI code for tribal programs; cannot be blank
	Other Format:	N/A		
DENOMINATOR POPULATION	The denominator includes all WISEWOMAN participants. A participant is a woman who receives at least one NBCCEDP service (enrolled in NBCCEDP); has received all the following screenings from the WISEWOMAN Program: height, weight, first blood pressure diastolic measurement, and first blood pressure systolic measurement; and has responded to at least one health history question. (For items 5a-8b, there must be at least one response that is not coded as '7 Don't know,' '8 Don't want to answer,' or '9 No answer recorded.')			
VALUES AND DESCRIPTION	**FIPS County Code**	Three-digit (character) value representing the county of the provider that conducts the screening office visit All state programs should use FIPS county codes to indicate county; tribes should use ANSI codes assigned		
	ANSI Code	Three-digit (character) value representing the geographic area of the provider that conducts the screening office visit All tribal programs should use the last three digits of the ANSI county codes to indicate geographic area		
ANALYSIS AND USE	To assess whether programs and specific providers are meeting screening goals in targeted geographic areas To identify geographic areas where women have access to the WISEWOMAN Program To assist in identifying areas where there may be potential transportation barriers to accessing WISEWOMAN services To provide information for GIS analysis			
OTHER INFORMATION	***Guidance***			
	The county FIPS codes are the Federal Information Processing Standard codes developed by the National Institute of Standards and Technology. There are three-digit codes for each county in a state. Tribal programs should use the last three digits of the ANSI codes instead of FIPS county codes. ANSI codes are the American National Standards Institute codes, which were developed by the American National Standards Institute. They are five-digit codes that represent states, counties, and statistically equivalent areas, along with American Indian and Alaska Native areas.			

Part B: Screening and Assessment MDE Specifications

Item 1c: EnrollSiteID	**Enrollment Site ID** This variable indicates the site of a woman's enrollment into the WISEWOMAN Program.			
FORMAT	**Type:**	Character	**Justification:**	Left
	Length:	5	**Beginning Position:**	9
	Leading Zeros:	N/A	**Valid Range:**	Valid code for an enrollment site; cannot be blank
	Other Format:	N/A		
DENOMINATOR POPULATION	The denominator includes all WISEWOMAN participants. A participant is a woman who receives at least one NBCCEDP service (enrolled in NBCCEDP); has received all the following screenings from the WISEWOMAN Program: height, weight, first blood pressure diastolic measurement, and first blood pressure systolic measurement; and has responded to at least one health history question. (For items 5a-8b, there must be at least one response that is not coded as '7 Don't know,' '8 Don't want to answer,' or '9 No answer recorded.')			
VALUES AND DESCRIPTION	**Enrollment Site ID**	Five-digit (character) value representing the ID code of the enrollment site, as developed and assigned by the grantee		
ANALYSIS AND USE	To identify sites where outreach and enrollment are occurring To identify sites where the Program is being administered and participants are tracked To track the number of WISEWOMAN participants enrolled at each WISEWOMAN enrollment site			
OTHER INFORMATION	***Guidance*** The enrollment site ID will differ from the screening site ID (1d: ScreenSiteID) if the participant was enrolled and screened at different locations. If the participant was enrolled and screened at the same site, the enrollment site ID and screening site ID will be the same.			

Part B: Screening and Assessment MDE Specifications

Item 1d: ScreenSiteID	**Screening Site ID** This variable indicates the site where a woman received her WISEWOMAN screening.			
FORMAT	**Type:**	Character	**Justification:**	Left
	Length:	5	**Beginning Position:**	14
	Leading Zeros:	N/A	**Valid Range:**	Valid code for a screening site; cannot be blank
	Other Format:	N/A		
DENOMINATOR POPULATION	The denominator includes all WISEWOMAN participants. A participant is a woman who receives at least one NBCCEDP service (enrolled in NBCCEDP); has received all the following screenings from the WISEWOMAN Program: height, weight, first blood pressure diastolic measurement, and first blood pressure systolic measurement; and has responded to at least one health history question. (For items 5a-8b, there must be at least one response that is not coded as '7 Don't know,' '8 Don't want to answer,' or '9 No answer recorded.')			
VALUES AND DESCRIPTION	**Screening Site ID**	Five-digit (character) value representing the ID code of the provider who conducts the screening office visit, as developed and assigned by the grantee		
ANALYSIS AND USE	To identify the geographic locations of sites providing screening services to participants To track the number of WISEWOMAN participants screened at each WISEWOMAN screening site To describe differences in participant demographics or other characteristics by screening site To provide information for GIS analysis To identify the number of screening providers in a given geographic area			
OTHER INFORMATION	***Guidance*** The screening site ID will differ from the enrollment site ID (1c: EnrollSiteID) if the participant was enrolled and screened at different locations. If the participant was enrolled and screened at the same site, the enrollment site ID and screening site ID will be the same.			

Part B: Screening and Assessment MDE Specifications

Item 2a: NRec	**Unique Screening Record ID Number** This variable indicates the unique placement of a record within the Screening and Assessment file.			
FORMAT	**Type:**	Numeric	**Justification:**	Right
	Length:	6	**Beginning Position:**	19
	Leading Zeros:	No	**Valid Range:**	1 to number in sequence of last record in file; cannot be blank
	Other Format:	N/A		
DENOMINATOR POPULATION	All records in the Screening and Assessment file that are eligible for MDE submission			
VALUES AND DESCRIPTION	**Unique Screening Record ID Number**	Six-digit (numeric) value representing the sequence number of a record This value must be unique for each record in the Screening and Assessment file. If a record ID number is a duplicate within the Screening and Assessment file, the validation tool will flag it as an error		
ANALYSIS AND USE	To track the order of records within the Screening and Assessment file			
OTHER INFORMATION	***Guidance*** NRec should be unique across all submitted MDE data files. Programs should continue numbering sequentially from the previous submission. A valid screening record includes measurements for the following: height, weight, first blood pressure diastolic, and first blood pressure systolic; the record must also have a participant response to at least one health history question (items 5a-8b). If a record does not meet these criteria and the program would like CDC to consider including it, the validation form in Appendix B should be used to validate both the record and the missing measurement/health history question.			

Part B: Screening and Assessment MDE Specifications

Item 3a: EncodeID	**Unique Participant ID Number** This variable indicates a woman's unique identification number.			
FORMAT	**Type:**	Character	**Justification:**	Left
	Length:	15	**Beginning Position:**	26
	Leading Zeros:	N/A	**Valid Range:**	Cannot be blank
	Other Format:	N/A		
DENOMINATOR POPULATION	The denominator includes all WISEWOMAN participants. A participant is a woman who receives at least one NBCCEDP service (enrolled in NBCCEDP); has received all the following screenings from the WISEWOMAN Program: height, weight, first blood pressure diastolic measurement, and first blood pressure systolic measurement; and has responded to at least one health history question. (For items 5a-8b, there must be at least one response that is not coded as '7 Don't know,' '8 Don't want to answer,' or '9 No answer recorded.')			
VALUES AND DESCRIPTION	**Unique Participant ID Number**	Up to 15-digit (character) value representing the unique identifier for a participant		
ANALYSIS AND USE	To assess the number of unique women served by the WISEWOMAN Program To track participants over time To link baseline screenings with rescreenings To link participant screening information to the Lifestyle Intervention (LSI) file			
OTHER INFORMATION	***Guidance*** A participant's unique ID should be the same for NBCCEDP and WISEWOMAN. A participant's unique ID should not change over time. If it does change, the program should provide the data contractor and Project Officer with a list of IDs that have changed at the time of data submission and upload a crosswalk of the previous participant unique IDs to the new participant unique IDs (see Appendix B). If a participant's Social Security number is used as her unique ID, it must be encoded. A participant's unique ID must be the same in the Screening and Assessment file and the LSI file.			

Part B: Screening and Assessment MDE Specifications

Item 3b: CntyFIPS	**County of Residence** This variable indicates the county of residence of the WISEWOMAN participant.			
FORMAT	**Type:**	Character	**Justification:**	Left
	Length:	3	**Beginning Position:**	41
	Leading Zeros:	Yes	**Valid Range:**	Valid FIPS county code for state programs or valid ANSI code for tribal programs; cannot be blank
	Other Format:	N/A		
DENOMINATOR POPULATION	The denominator includes all WISEWOMAN participants. A participant is a woman who receives at least one NBCCEDP service (enrolled in NBCCEDP); has received all the following screenings from the WISEWOMAN Program: height, weight, first blood pressure diastolic measurement, and first blood pressure systolic measurement; and has responded to at least one health history question. (For items 5a-8b, there must be at least one response that is not coded as '7 Don't know,' '8 Don't want to answer,' or '9 No answer recorded.')			
VALUES AND DESCRIPTION	**FIPS County Code**	Three-digit (character) value representing the participant's county of residence All programs in the continental United States should use FIPS county codes Tribal programs should use the last three digits of the relevant ANSI code		
ANALYSIS AND USE	To assess whether programs are meeting screening goals in targeted geographic areas To identify the reach of the WISEWOMAN Program To assist in identifying areas where there may be potential transportation barriers to accessing WISEWOMAN services To provide information for GIS analysis			
OTHER INFORMATION	***Guidance*** This county FIPS codes are the Federal Information Processing Standard codes developed by the National Institute of Standards and Technology. There are three-digit codes for each county in a state. This field must be imported from NBCCEDP data. Tribal programs should use the last three digits of the ANSI code. ANSI codes are the American National Standards Institute codes, which were developed by the American National Standards Institute. They are five-digit codes that represent states, counties, and statistically equivalent areas, along with American Indian and Alaska Native areas. Both county of residence and ZIP code of residence (3c: ZIP) are required. ZIP code of residence should correspond to the county code of residence, in that the ZIP code must represent a valid geographic area within the county. If a participant does not reside in the state where the program is located, the county code from her actual state of residence should be recorded. ***Additional edits*** County of participant's residence must be recorded.			

Part B: Screening and Assessment MDE Specifications

Item 3c: ZIP	**ZIP Code of Residence** This variable indicates the participant's ZIP code of residence.			
FORMAT	**Type:**	Character	**Justification:**	Left
	Length:	5	**Beginning Position:**	44
	Leading Zeros:	Yes	**Valid Range:**	Valid ZIP code; cannot be blank
	Other Format:	N/A		
DENOMINATOR POPULATION	The denominator includes all WISEWOMAN participants. A participant is a woman who receives at least one NBCCEDP service (enrolled in NBCCEDP); has received all the following screenings from the WISEWOMAN Program: height, weight, first blood pressure diastolic measurement, and first blood pressure systolic measurement; and has responded to at least one health history question. (For items 5a-8b, there must be at least one response that is not coded as '7 Don't know,' '8 Don't want to answer,' or '9 No answer recorded.')			
VALUES AND DESCRIPTION	**ZIP Code of Residence**	Valid five-digit (character) ZIP code		
	99999	No ZIP code recorded The validation tool will flag this value as an error		
ANALYSIS AND USE	To assess whether programs are meeting screening goals in targeted geographic areas To identify the reach of the WISEWOMAN Program To identify participant county of residence outside program state boundaries To provide information for GIS analysis			
OTHER INFORMATION	***Guidance*** This field should be imported from the NBCCEDP data. If the field is missing in the NBCCEDP data, a valid ZIP code should be provided. Both county of residence (3b: CntyFIPS) and ZIP code of residence are required. ZIP code of residence should correspond to the county code of residence, in that the ZIP code must represent a valid geographic area within the county. ZIP code of residence must be recorded regardless of whether or not the woman resides in the same state as the program. This information will be used in conjunction with county of residence to identify the area of residence for a woman. If a participant does not reside in the same state as the program, the ZIP code from her actual state of residence should be recorded.			

Part B: Screening and Assessment MDE Specifications

Item 3d: DOB	**Date of Birth** This variable indicates the participant's date of birth.			
FORMAT	**Type:**	Numeric	**Justification:**	Right
	Length:	8	**Beginning Position:**	49
	Leading Zeros:	Yes	**Valid Range:**	Valid date; cannot be blank
	Other Format:	MM01CCYY date		
DENOMINATOR POPULATION	The denominator includes all WISEWOMAN participants. A participant is a woman who receives at least one NBCCEDP service (enrolled in NBCCEDP); has received all the following screenings from the WISEWOMAN Program: height, weight, first blood pressure diastolic measurement, and first blood pressure systolic measurement; and has responded to at least one health history question. (For items 5a-8b, there must be at least one response that is not coded as '7 Don't know,' '8 Don't want to answer,' or '9 No answer recorded.')			
VALUES AND DESCRIPTION	**Date of Birth**	Date of birth in MM01CCYY format Day of birth should always be coded as '01' Example: September 18, 1965 = 09011965		
ANALYSIS AND USE	To calculate the age of the participant. Age will be calculated using the month and year of birth and office visit date (10a: BPDate) To assess whether the participants are within the Program's priority age group			
OTHER INFORMATION	***Guidance*** The priority population for the WISEWOMAN Program is women aged 40 to 64. Services provided to women outside the priority age range will be monitored by CDC. To meet new CDC confidentiality requirements for data submissions, programs should **not** submit the participant's actual day of birth; '01' should be used for day of birth in transmitted data. ***Cross edits*** The validation tool will flag participants younger than 40 or older than 64 for a quality check. *Quality check:* BPDATE - DOB <40 **OR** BPDATE - DOB >64 ***Additional edits*** To protect participant confidentiality, the day of birth must always be '01.' The validation tool will flag as an error any day-of-birth value not coded as '01.'			

Part B: Screening and Assessment MDE Specifications

Item 3e: Latino	**Hispanic or Latino Origin** This variable indicates whether the participant is of Hispanic or Latino origin.			
FORMAT	**Type:**	Numeric	**Justification:**	Right
	Length:	1	**Beginning Position:**	57
	Leading Zeros:	No	**Valid Range:**	See values; cannot be blank
	Other Format:	N/A		
DENOMINATOR POPULATION	The denominator includes all WISEWOMAN participants. A participant is a woman who receives at least one NBCCEDP service (enrolled in NBCCEDP); has received all the following screenings from the WISEWOMAN Program: height, weight, first blood pressure diastolic measurement, and first blood pressure systolic measurement; and has responded to at least one health history question. (For items 5a-8b, there must be at least one response that is not coded as '7 Don't know,' '8 Don't want to answer,' or '9 No answer recorded.')			
VALUES AND DESCRIPTION	**1 Yes**	Participant reports that she is of Hispanic or Latino origin		
	2 No	Participant reports that she is not of Hispanic or Latino origin		
	7 Unknown	Participant is unsure whether she is of Hispanic or Latino origin		
	9 No answer recorded	Participant has not reported whether she is of Hispanic or Latino origin The validation tool will flag this value as an error		
ANALYSIS AND USE	To assess the race/ethnicity of WISEWOMAN participants To understand and analyze screening, lifestyle interventions, and other variables by ethnicity			
OTHER INFORMATION	***Guidance*** This field is imported from NBCCEDP data. Missing values are recoded as '9 No answer recorded.' ***Cross edits*** At least one race or Hispanic ethnicity should be reported. If at least one race or Hispanic ethnicity is not reported, the validation tool will flag this field as an error. *Error:* LATINO, RACE1-RACE5 *all* = (7, 9) If a participant is non-Hispanic, she should identify with at least one race. If a non-Hispanic participant does not identify with at least one race, the validation tool will flag this field as an error. *Error:* LATINO = 2 **AND** RACE1-RACE5 *all* = 7or 9 ***Additional edits*** See related cross edit for item 3f: Race1.			

Part B: Screening and Assessment MDE Specifications

Item 3f: Race1	**Race: First Race** This variable indicates a race with which the participant identifies.			
FORMAT	**Type:**	Numeric	**Justification:**	Right
	Length:	1	**Beginning Position:**	58
	Leading Zeros:	No	**Valid Range:**	See values; cannot be blank
	Other Format:	N/A		
DENOMINATOR POPULATION	The denominator includes all WISEWOMAN participants. A participant is a woman who receives at least one NBCCEDP service (enrolled in NBCCEDP); has received all the following screenings from the WISEWOMAN Program: height, weight, first blood pressure diastolic measurement, and first blood pressure systolic measurement; and has responded to at least one health history question. (For items 5a-8b, there must be at least one response that is not coded as '7 Don't know,' '8 Don't want to answer,' or '9 No answer recorded.')			
VALUES AND DESCRIPTION	**1 White**	Participant identifies White as a race		
	2 Black or African American	Participant identifies Black or African American as a race		
	3 Asian	Participant identifies Asian as a race		
	4 Native Hawaiian or Other Pacific Islander	Participant identifies Native Hawaiian or Other Pacific Islander as a race		
	5 American Indian or Alaska Native	Participant identifies American Indian or Alaska Native as a race		
	7 Unknown	Participant does not know her race or does not identify with any of the races listed above If a participant is Hispanic and does not identify a race, this code should be used		
	9 No answer recorded	Race information is missing for the participant Any race information gathered should be entered beginning with the Race1 field. See cross edits related to this value.		
ANALYSIS AND USE	To assess the race/ethnicity of WISEWOMAN participants To understand and analyze screening, lifestyle interventions, and other variables by race			
OTHER INFORMATION	***Guidance*** This field is imported from NBCCEDP data; missing values are recorded as '9 No answer recorded.' If a participant identifies more than one race, one race is recorded here and other races she identifies are recorded in subsequent race fields (3g: Race2 - 3j: Race5). ***Cross edits*** First race should always be recorded unless the participant identifies as Hispanic. In cases where the participant is Hispanic, first race is permitted to be unknown or not recorded. In all other cases where first race is unknown or not recorded, this field will be flagged as an error. *Error:* RACE1 = 9 **AND** LATINO ≠ 1 First race should be completed before the other race fields. This field will be flagged as an error if it is unknown or not recorded, while other race fields contain values of '1 White,' '2 Black or African American,' '3 Asian,' '4 Native Hawaiian or other Pacific Islander,' or '5 American Indian or Alaska Native. *Error:* RACE1 = 7 or 9 **AND** RACE2-RACE5 ≠ (7, 9)			

Additional edits

See related cross edits for item 3e: Latino.

Part B: Screening and Assessment MDE Specifications

Item 3g: Race2	**Race: Second Race** This variable indicates a race with which the participant identifies in cases where a participant is multiracial.			
FORMAT	**Type:**	Numeric	**Justification:**	Right
	Length:	1	**Beginning Position:**	59
	Leading Zeros:	No	**Valid Range:**	See values; cannot be blank
	Other Format:	N/A		
DENOMINATOR POPULATION	The denominator includes all WISEWOMAN participants. A participant is a woman who receives at least one NBCCEDP service (enrolled in NBCCEDP); has received all the following screenings from the WISEWOMAN Program: height, weight, first blood pressure diastolic measurement, and first blood pressure systolic measurement; and has responded to at least one health history question. (For items 5a-8b, there must be at least one response that is not coded as '7 Don't know,' '8 Don't want to answer,' or '9 No answer recorded.')			
VALUES AND DESCRIPTION	**1 White**	Participant identifies White as a race Participant who has identified two or more races can have this value		
	2 Black or African American	Participant identifies Black or African American as a race Participant who has identified two or more races can have this value		
	3 Asian	Participant identifies Asian as a race Participant who has identified two or more races can have this value		
	4 Native Hawaiian or Other Pacific Islander	Participant identifies Native Hawaiian or Other Pacific Islander as a race Participant who has identified two or more races can have this value		
	5 American Indian or Alaska Native	Participant identifies American Indian or Alaska Native as a race Participant who has identified two or more races can have this value		
	7 Unknown	Participant does not know her race or does not identify with any of the races listed above		
	9 No answer recorded	If race information is missing for Race2 Participant has not identified any race Participant has identified one race and does not identify other races If a participant does not identify a second race, '9 No answer recorded' should be used for this field and all subsequent race fields		
ANALYSIS AND USE	To assess the race/ethnicity of WISEWOMAN participants. Participants with more than one race will be identified as multiracial, not as members of the specific races identified To understand and analyze screening, lifestyle interventions, and other variables by race			
OTHER INFORMATION	***Guidance*** This field is imported from NBCCEDP data; missing values are recorded as '9 No answer recorded.' This race field should be populated before the third through fifth race fields (3h: Race3-3j: Race5). If a participant identifies two races, one race is recorded in Race1 and a second race is recorded here. If she identifies more than two races, other races identified are recorded in subsequent race fields as applicable (3h: Race3-3j: Race5). ***Additional edits*** See related cross edits for items 3e: Latino and 3f: Race1.			

Part B: Screening and Assessment MDE Specifications

Item 3g: Race3	**Race: Third Race** This variable indicates a race with which the participant identifies in cases where a participant is multiracial.			
FORMAT	**Type:**	Numeric	**Justification:**	Right
	Length:	1	**Beginning Position:**	60
	Leading Zeros:	No	**Valid Range:**	See values; cannot be blank
	Other Format:	N/A		
DENOMINATOR POPULATION	The denominator includes all WISEWOMAN participants. A participant is a woman who receives at least one NBCCEDP service (enrolled in NBCCEDP); has received all the following screenings from the WISEWOMAN Program: height, weight, first blood pressure diastolic measurement, and first blood pressure systolic measurement; and has responded to at least one health history question. (For items 5a-8b, there must be at least one response that is not coded as '7 Don't know,' '8 Don't want to answer,' or '9 No answer recorded.')			

VALUES AND DESCRIPTION		
	1 White	Participant identifies White as a race Participant who has identified three or more races can have this value
	2 Black or African American	Participant identifies Black or African American as a race Participant who has identified three or more races can have this value
	3 Asian	Participant identifies Asian as a race Participant who has identified three or more races can have this value
	4 Native Hawaiian or Other Pacific Islander	Participant identifies Native Hawaiian or Other Pacific Islander as a race Participant who has identified three or more races can have this value
	5 American Indian or Alaska Native	Participant identifies American Indian or Alaska Native as a race Participant who has identified three or more races can have this value
	7 Unknown	Participant does not know her race or does not identify with any of the races listed above
	9 No answer recorded	If race information is missing for Race3 Participant has not identified any race Participant has identified one or two races and does not identify other races If a participant does not identify a third race, '9 No answer recorded' should be used for this field and all subsequent race fields

ANALYSIS AND USE	To assess the race/ethnicity of WISEWOMAN participants. Participants with more than one race will be identified as multiracial, not as members of the specific races identified To understand and analyze screening, lifestyle interventions, and other variables by race

OTHER INFORMATION	***Guidance***
	This field is imported from NBCCEDP data; missing values are recorded as '9 No answer recorded.'
	This race field should be populated before the fourth and fifth race fields (3i: Race4, 3j: Race5).
	If a participant identifies three races, one race is recorded in Race1, a second race in Race2, and a third here. If she identifies more than three races, other races identified are recorded in subsequent race fields as applicable (3i: Race4, 3j: Race5).
	Additional edits
	See related cross edits for items 3e: Latino and 3f: Race1.

Part B: Screening and Assessment MDE Specifications

Item 3i: Race4	**Race: Fourth Race**			
	This variable indicates a race with which the participant identifies in cases where a participant is multiracial.			
FORMAT	**Type:**	Numeric	**Justification:**	Right
	Length:	1	**Beginning Position:**	61
	Leading Zeros:	No	**Valid Range:**	See values; cannot be blank
	Other Format:	N/A		

DENOMINATOR POPULATION	The denominator includes all WISEWOMAN participants. A participant is a woman who receives at least one NBCCEDP service (enrolled in NBCCEDP); has received all the following screenings from the WISEWOMAN Program: height, weight, first blood pressure diastolic measurement, and first blood pressure systolic measurement; and has responded to at least one health history question. (For items 5a-8b, there must be at least one response that is not coded as '7 Don't know,' '8 Don't want to answer,' or '9 No answer recorded.')	
VALUES AND DESCRIPTION	**1 White**	Participant identifies White as a race Participant who has identified four or more races can have this value
	2 Black or African American	Participant identifies Black or African American as a race Participant who has identified four or more races can have this value
	3 Asian	Participant identifies Asian as a race Participant who has identified four or more races can have this value
	4 Native Hawaiian or Other Pacific Islander	Participant identifies Native Hawaiian or Other Pacific Islander as a race Participant who has identified four or more races can have this value
	5 American Indian or Alaska Native	Participant identifies American Indian or Alaska Native as a race Participant who has identified four or more races can have this value
	7 Unknown	Participant does not know her race or does not identify with any of the races listed above
	9 No answer recorded	If race information is missing for Race4 Participant has not identified any race Participant has identified one to three races and does not identify other races If a participant does not identify a fourth race, '9 No answer recorded' should be used for this field and all subsequent race fields
ANALYSIS AND USE	To assess the race/ethnicity of WISEWOMAN participants. Participants with more than one race will be identified as multiracial, not as members of the specific races identified	
	To understand and analyze screening, lifestyle interventions, and other variables by race	

OTHER INFORMATION	***Guidance***
	This field is imported from NBCCEDP data; missing values are recorded as '9 No answer recorded.'
	This race field should be populated before the fifth race field (3j: Race5).
	If a participant identifies four races, one race is recorded in Race1, a second race in Race2, a third in Race3, and a fourth in here. If she identifies more than four races, other races identified are recorded in the subsequent race field as applicable (3j: Race5).
	Additional edits
	See related cross edits for items 3e: Latino and 3f: Race1.

Part B: Screening and Assessment MDE Specifications

Item 3j: Race5	**Race: Fifth Race** This variable indicates a race with which the participant identifies in cases where a participant is multiracial.			
FORMAT	**Type:**	Numeric	**Justification:**	Right
	Length:	1	**Beginning Position:**	62
	Leading Zeros:	No	**Valid Range:**	See values; cannot be blank
	Other Format:	N/A		
DENOMINATOR POPULATION	The denominator includes all WISEWOMAN participants. A participant is a woman who receives at least one NBCCEDP service (enrolled in NBCCEDP); has received all the following screenings from the WISEWOMAN Program: height, weight, first blood pressure diastolic measurement, and first blood pressure systolic measurement; and has responded to at least one health history question. (For items 5a-8b, there must be at least one response that is not coded as '7 Don't know,' '8 Don't want to answer,' or '9 No answer recorded.')			
VALUES AND DESCRIPTION	**1 White**	Participant identifies White as a race Participant who has identified five races can have this value		
	2 Black or African American	Participant identifies Black or African American as a race Participant who has identified five races can have this value		
	3 Asian	Participant identifies Asian as a race Participant who has identified five races can have this value		
	4 Native Hawaiian or Other Pacific Islander	Participant identifies Native Hawaiian or Other Pacific Islander as a race Participant who has identified five races can have this value		
	5 American Indian or Alaska Native	Participant identifies American Indian or Alaska Native as a race Participant who has identified five races can have this value		
	7 Unknown	Participant does not know her race or does not identify with any of the races listed above		
	9 No answer recorded	If race information is missing for Race5 Participant has not identified any race Participant has identified one to four races and does not identify other races If a participant does not identify a fifth race, '9 No answer recorded' should be used for this field.		
ANALYSIS AND USE	To assess the race/ethnicity of WISEWOMAN participants. Participants with more than one race will be identified as multiracial, not as members of the specific races identified To understand and analyze screening, lifestyle interventions, and other variables by race			
OTHER INFORMATION	***Guidance*** This field is imported from NBCCEDP data; missing values are recorded as '9 No answer recorded.' This race field should be populated after other race fields (3f: Race1-3i: Race4). If a participant identifies five races, one race is recorded in Race1, a second race in Race2, a third in Race3, a fourth in Race4, and a fifth in here. ***Additional edits*** See related cross edits for items 3e: Latino and 3f: Race1.			

Part B: Screening and Assessment MDE Specifications

Item 3l: Education	**Education (highest grade completed)** This variable indicates the highest grade the participant completed.			
FORMAT	**Type:**	Numeric	**Justification:**	Right
	Length:	2	**Beginning Position:**	64
	Leading Zeros:	No	**Valid Range:**	See values; cannot be blank
	Other Format:	N/A		
DENOMINATOR POPULATION	The denominator includes all WISEWOMAN participants. A participant is a woman who receives at least one NBCCEDP service (enrolled in NBCCEDP); has received all the following screenings from the WISEWOMAN Program: height, weight, first blood pressure diastolic measurement, and first blood pressure systolic measurement; and has responded to at least one health history question. (For items 5a-8b, there must be at least one response that is not coded as '7 Don't know,' '8 Don't want to answer,' or '9 No answer recorded.')			
VALUES AND DESCRIPTION	**1 <9th grade**	Participant reports that she did not attend high school		
	2 Some high school	Participant reports she attended high school, but did not graduate		
	3 High school graduate or equivalent	Participant reports that she graduated from high school or has the equivalent of a high school diploma, and she did not attend any college or higher education		
	4 Some college or higher	Participant reports that she attended one or more years of college and/or graduate school (e.g., college graduate, graduate degree)		
	7 Don't know	Participant reports that she does not know the highest grade she completed The validation tool will flag this value as a quality check		
	8 Don't want to answer	Participant does not want to answer the highest grade she completed The validation tool will flag this value as a quality check		
	9 No answer recorded	Education information is missing for the participant The validation tool will flag this value as an error		
ANALYSIS AND USE	To assess the educational attainment of women in the WISEWOMAN population To understand screening, lifestyle interventions (LSIs), and other variables by education status To help determine the literacy level needed for materials developed for recruitment, risk reduction counseling, health education/LSIs and community-based referral			
OTHER INFORMATION	***Guidance*** Response options in italics should not be read if this question is asked orally; if this question is completed through a data collection form presented to participants, response options in italics should appear. Codes and response options highlighted in gray should not appear on the data collection forms presented to participants. They are provided for funded program use only.			

Part B: Screening and Assessment MDE Specifications

Item 5a: SRHC	**Have you ever been told by a doctor, nurse, or other health professional that your blood cholesterol is high?** This variable indicates whether the participant has ever been told that she has high cholesterol.			
FORMAT	**Type:**	Numeric	**Justification:**	Right
	Length:	1	**Beginning Position:**	74
	Leading Zeros:	No	**Valid Range:**	See values; cannot be blank
	Other Format:	N/A		
DENOMINATOR POPULATION	The denominator includes all WISEWOMAN participants. A participant is a woman who receives at least one NBCCEDP service (enrolled in NBCCEDP); has received all the following screenings from the WISEWOMAN Program: height, weight, first blood pressure diastolic measurement, and first blood pressure systolic measurement; and has responded to at least one health history question. (For items 5a-8b, there must be at least one response that is not coded as '7 Don't know,' '8 Don't want to answer,' or '9 No answer recorded.')			
VALUES AND DESCRIPTION	**1 Yes**	Participant has been told previously that her blood cholesterol is high		
	2 No	Participant has never been told that her blood cholesterol is high		
	7 Don't know	Participant does not know whether she has ever been told that her blood cholesterol is high The validation program will flag this value for a quality check		
	8 *Don't want to answer*	Participant does not want to answer whether she has ever been told that her blood cholesterol is high The validation tool will flag this value for a quality check		
	9 No answer recorded	No answer recorded The validation tool will flag this value as an error		
ANALYSIS AND USE	To understand the cardiovascular disease risk factors of both individual participants and the overall WISEWOMAN population To assess the number of cases of high blood cholesterol that have been previously diagnosed as opposed to newly detected cases among the WISEWOMAN population To assess control of and improvements in cholesterol for newly and previously diagnosed women			
OTHER INFORMATION	***Guidance*** Response options in italics should not be read if this question is asked orally; if this question is completed through a data collection form presented to participants, response options in italics should appear. Codes and response options highlighted in gray should not appear on the data collection forms presented to participants. They are provided for funded program use only. Some programs may have access to participants' medical charts. In some cases, the medical chart may show that a participant's diagnosis for high blood cholesterol is inconsistent with her self-report.			

	In these instances, if the medical record indicates that she has high blood cholesterol, the program should recode this field as '1 Yes.'

Part B: Screening and Assessment MDE Specifications

Item 5b: SRHB	**Have you ever been told by a doctor, nurse, or other health professional that you have high blood pressure?** This variable indicates whether the participant has ever been told that she has high blood pressure.			
FORMAT	**Type:**	Numeric	**Justification:**	Right
	Length:	1	**Beginning Position:**	75
	Leading Zeros:	No	**Valid Range:**	See values; cannot be blank
	Other Format:	N/A		
DENOMINATOR POPULATION	The denominator includes all WISEWOMAN participants. A participant is a woman who receives at least one NBCCEDP service (enrolled in NBCCEDP); has received all the following screenings from the WISEWOMAN Program: height, weight, first blood pressure diastolic measurement, and first blood pressure systolic measurement; and has responded to at least one health history question. (For items 5a-8b, there must be at least one response that is not coded as '7 Don't know,' '8 Don't want to answer,' or '9 No answer recorded.')			
VALUES AND DESCRIPTION	**1 Yes**	Participant has been told previously that her blood pressure is high or that she has hypertension		
	2 No	Participant has never been told that her blood pressure is high or that she has hypertension		
	7 Don't know	Participant does not know whether she has ever been told that her blood pressure is high or whether she has been told that she has hypertension The validation program will flag this value for a quality check		
	8 *Don't want to answer*	Participant does not want to answer whether she has ever been told that her blood pressure is high or whether she has been told that she has hypertension The validation program will flag this value for a quality check		
	9 No answer recorded	No answer recorded The validation tool will flag this value as an error		
ANALYSIS AND USE	To understand the cardiovascular disease risk factors of both individual participants and the overall WISEWOMAN population To assess the number of cases of high blood pressure that have been previously diagnosed as opposed to newly detected cases among the WISEWOMAN population To assess control of and improvements in blood pressure for newly and previously diagnosed women			

OTHER INFORMATION	***Guidance*** Response options in italics should not be read if this question is asked orally; if this question is completed through a data collection form presented to participants, response options in italics should appear. Codes and response options highlighted in gray should not appear on the data collection forms presented to participants. They are provided for funded program use only. Some programs may have access to participants' medical charts. In some cases, the medical chart may show that a participant's diagnosis for hypertension is inconsistent with her self-report. In these instances, if the medical record indicates that she has hypertension, the program should recode this field as '1 Yes.'

Part B: Screening and Assessment MDE Specifications

Item 5c: SRD	**Have you ever been told by a doctor, nurse, or other health professional that you have diabetes?** This variable indicates whether the participant has ever been told that she has diabetes.			
FORMAT	**Type:**	Numeric	**Justification:**	Right
	Length:	1	**Beginning Position:**	76
	Leading Zeros:	No	**Valid Range:**	See values; cannot be blank
	Other Format:	N/A		
DENOMINATOR POPULATION	The denominator includes all WISEWOMAN participants. A participant is a woman who receives at least one NBCCEDP service (enrolled in NBCCEDP); has received all the following screenings from the WISEWOMAN Program: height, weight, first blood pressure diastolic measurement, and first blood pressure systolic measurement; and has responded to at least one health history question. (For items 5a-8b, there must be at least one response that is not coded as '7 Don't know,' '8 Don't want to answer,' or '9 No answer recorded.')			

VALUES AND DESCRIPTION		
	1 Yes	Participant has been told previously that she has diabetes, and it is ascertained that it was not gestational diabetes; participant with this response is considered a known diabetic ***This response should indicate a diagnosis of diabetes beyond pregnancy***
	2 No	Participant has never been told that she has diabetes
	3 Yes - Gestational (pregnancy) diabetes only	Participant has been told that she had gestational (pregnancy) diabetes but is not currently a diabetic ***This response should indicate a diagnosis of diabetes only during pregnancy***
	7 Don't know	Participant does not know whether she has ever been told that she has diabetes The validation program will flag this value for a quality check
	8 *Don't want to answer*	Participant does not want to answer whether she has ever been told that she has diabetes The validation program will flag this value for a quality check

	9 No answer recorded	No answer recorded The validation tool will flag this value as an error
ANALYSIS AND USE	To understand the cardiovascular disease risk factors of both individual participants and the overall WISEWOMAN population To assess the number of cases of diabetes that have been previously diagnosed as opposed to newly detected cases among the WISEWOMAN population To differentiate participants who are currently diabetic from participants who are at high risk for diabetes because of previous gestational diabetes To assess control of and improvements in diabetes for newly and previously diagnosed women	
OTHER INFORMATION	***Guidance*** Response options in italics should not be read if this question is asked orally; if this question is completed through a data collection form presented to participants, response options in italics should appear. Codes and response options highlighted in gray should not appear on the data collection forms presented to participants. They are provided for funded program use only. Some programs may have access to a participant's medical chart. In some cases, the medical chart may show that a participant's diagnosis for diabetes is inconsistent with her self-report. In these instances, if the medical record indicates that she has diabetes, the program should recode this field as '1 Yes.' Accordingly, if the medical record indicates that she has had gestational diabetes, the program should recode this field as '3 Yes-Gestational (pregnancy) diabetes only.' ***Additional edits*** See related cross edits for items 12b: Glucose and 12d: A1C.	

Part B: Screening and Assessment MDE Specifications

Item 5d: SRHA	**Has a doctor, nurse, or other health professional ever told you that you had any of the following: heart attack (also called myocardial infarction), angina, coronary heart disease, or stroke?** This variable indicates whether the participant has ever been told that she has had a heart attack (also called myocardial infarction), angina, coronary heart disease, or stroke.				
FORMAT	**Type:**	Numeric	**Justification:**	Right	
	Length:	1	**Beginning Position:**	77	
	Leading Zeros:	No	**Valid Range:**	See values; cannot be blank	
	Other Format:	N/A			
DENOMINATOR POPULATION	The denominator includes all WISEWOMAN participants. A participant is a woman who receives at least one NBCCEDP service (enrolled in NBCCEDP); has received all the following screenings from the WISEWOMAN Program: height, weight, first blood pressure diastolic measurement, and first blood pressure systolic measurement; and has responded to at least one health history question. (For items 5a-8b, there must be at least one response that is not coded as '7 Don't know,' '8 Don't want to answer,' or '9 No answer recorded.')				
VALUES AND DESCRIPTION	**1 Yes**	Participant has been told previously that she has had a heart attack (also called myocardial infarction), angina, coronary heart disease, or stroke			
	2 No	Participant has never been told that she has had a heart attack (also called myocardial infarction), angina, coronary heart disease, or stroke			
	7 Don't know	Participant does not know whether she has had a heart attack (also called myocardial infarction), angina, coronary heart disease, or stroke The validation program will flag this value for a quality check			
	8 *Don't want to answer*	Participant does not want to answer whether she has had a heart attack (also called myocardial infarction), angina, coronary heart disease, or stroke The validation program will flag this value for a quality check			
	9 No answer recorded	No answer recorded The validation tool will flag this value as an error			
ANALYSIS AND USE	To understand the history of cardiovascular disease among both individual participants and the overall WISEWOMAN population To assess the number of participants who have been previously diagnosed as having cardiovascular disease				
OTHER INFORMATION	***Guidance*** Response options in italics should not be read if this question is asked orally; if this question is completed through a data collection form presented to participants, response options in italics should appear. Codes and response options highlighted in gray should not appear on the data collection forms presented to participants. They are provided for funded program use only. Some programs may have access to participants' medical charts. In some cases, the medical chart may show that a participant's diagnosis for heart attack (also called myocardial infarction), angina, coronary heart disease, or stroke is inconsistent with her self-report. In these instances, if the medical record indicates that she has had any one of these conditions, the program should recode this field as '1 Yes.'				

Part B: Screening and Assessment MDE Specifications

Item 6a: FAMHAM	**Has your father, brother, or son had a stroke or heart attack before age 55?** This variable indicates whether males in the participant's family have a history of stroke or heart attack.			
FORMAT	**Type:**	Numeric	**Justification:**	Right
	Length:	1	**Beginning Position:**	78
	Leading Zeros:	No	**Valid Range:**	See values; cannot be blank
	Other Format:	N/A		
DENOMINATOR POPULATION	The denominator includes all WISEWOMAN participants. A participant is a woman who receives at least one NBCCEDP service (enrolled in NBCCEDP); has received all the following screenings from the WISEWOMAN Program: height, weight, first blood pressure diastolic measurement, and first blood pressure systolic measurement; and has responded to at least one health history question. (For items 5a-8b, there must be at least one response that is not coded as '7 Don't know,' '8 Don't want to answer,' or '9 No answer recorded.')			
VALUES AND DESCRIPTION	**1 Yes**	Participant's father, brother, or son had a stroke or heart attack before age 55		
	2 No	Participant's father, brother, or son has *not* had a stroke or heart attack before age 55		
	7 Don't know	Participant does not know whether her father, brother, or son had a stroke or heart attack before age 55		
	8 *Don't want to answer*	Participant does not want to answer whether her father, brother, or son had a stroke or heart attack before age 55		
	9 No answer recorded	No answer recorded The validation tool will flag this value as an error		
ANALYSIS AND USE	To identify and target participants at particularly high risk for early cardiovascular disease To assess the cardiovascular disease risk factors of the overall WISEWOMAN population			
OTHER INFORMATION	***Guidance*** Response options in italics should not be read if this question is asked orally; if this question is completed through a data collection form presented to participants, response options in italics should appear. Codes and response options highlighted in gray should not appear on the data collection forms presented to participants. They are provided for funded program use only. If a participant reports that she doesn't want to answer whether her father, brother, or son has had a stroke or heart attack before age 55, programs should have a discussion with her to verify the response. Some programs may have access to participants' medical charts. In some cases, the medical chart may show that a participant's previous response about family history is inconsistent with the current response. In these instances, if the participant previously or currently indicates a father, brother, or son had a stroke or heart attack before age 55, the program should recode this field as '1 Yes.'			

Part B: Screening and Assessment MDE Specifications

Item 6b: FAMHAF	**Has your mother, sister, or daughter had a stroke or heart attack before age 55?** This variable indicates whether females in the participant's family have a history of stroke or heart attack.			
FORMAT	**Type:**	Numeric	**Justification:**	Right
	Length:	1	**Beginning Position:**	79
	Leading Zeros:	No	**Valid Range:**	See values; cannot be blank
	Other Format:	N/A		
DENOMINATOR POPULATION	The denominator includes all WISEWOMAN participants. A participant is a woman who receives at least one NBCCEDP service (enrolled in NBCCEDP); has received all the following screenings from the WISEWOMAN Program: height, weight, first blood pressure diastolic measurement, and first blood pressure systolic measurement; and has responded to at least one health history question. (For items 5a-8b, there must be at least one response that is not coded as '7 Don't know,' '8 Don't want to answer,' or '9 No answer recorded.')			
VALUES AND DESCRIPTION	**1 Yes**	Participant's mother, sister, or daughter had a stroke or heart attack before age 55		
	2 No	Participant's mother, sister, or daughter has *not* had a stroke or heart attack before age 55		
	7 Don't know	Participant does not know whether her mother, sister, or daughter had a stroke or heart attack before age 55		
	8 *Don't want to answer*	Participant does not want to answer whether her mother, sister, or daughter had a stroke or heart attack before age 55		
	9 No answer recorded	No answer recorded The validation tool will flag this value as an error		
ANALYSIS AND USE	To identify and target participants at particularly high risk for early cardiovascular disease To assess the cardiovascular disease risk factors of the overall WISEWOMAN population			
OTHER INFORMATION	***Guidance*** Response options in italics should not be read if this question is asked orally; if this question is completed through a data collection form presented to participants, response options in italics should appear. Codes and response options highlighted in gray should not appear on the data collection forms presented to participants. They are provided for funded program use only. If a participant reports that she doesn't want to answer whether her mother, sister, or daughter has had a stroke or heart attack before age 55, programs should have a discussion with her to verify the response. Some programs may have access to participants' medical charts. In some cases, the medical chart may show that a participant's previous response about family history is inconsistent with the current response. In these instances, if the participant previously or currently indicates a mother, sister, or daughter has had a stroke or heart attack before age 55, the program should recode this field as '1 Yes.'			

Part B: Screening and Assessment MDE Specifications

Item 6c: FAMD	**Has either of your parents, your brother or sister, or your child ever been told by a doctor, nurse or other health professional that he or she has diabetes?** This variable indicates whether the participant has a family history of diabetes.			
FORMAT	**Type:**	Numeric	**Justification:**	Right
	Length:	1	**Beginning Position:**	80
	Leading Zeros:	No	**Valid Range:**	See values; cannot be blank
	Other Format:	N/A		
DENOMINATOR POPULATION	The denominator includes all WISEWOMAN participants. A participant is a woman who receives at least one NBCCEDP service (enrolled in NBCCEDP); has received all the following screenings from the WISEWOMAN Program: height, weight, first blood pressure diastolic measurement, and first blood pressure systolic measurement; and has responded to at least one health history question. (For items 5a-8b, there must be at least one response that is not coded as '7 Don't know,' '8 Don't want to answer,' or '9 No answer recorded.')			
VALUES AND DESCRIPTION	**1 Yes**	Participant's parent, sibling, or child has been told that he/she has diabetes		
	2 No	Participant's parent, sibling, and/or child has *not* been told that he/she has diabetes		
	7 Don't know	Participant does not know whether her parent, sibling, and/or child has been told that he/she has diabetes		
	8 *Don't want to answer*	Participant does not want to answer whether her parents, sibling, and/or child has been told that he/she has diabetes		
	9 No answer recorded	No answer recorded The validation tool will flag this value as an error		
ANALYSIS AND USE	To identify and target participants who are at particularly high risk for diabetes To identify the risk of diabetes in the overall WISEWOMAN population			
OTHER INFORMATION	***Guidance*** Response options in italics should not be read if this question is asked orally; if this question is completed through a data collection form presented to participants, response options in italics should appear. Codes and response options highlighted in gray should not appear on the data collection forms presented to participants. They are provided for funded program use only. If a participant reports that she doesn't want to answer whether her parent, sibling, and/or child has diabetes, programs should have a discussion with her to verify the response. Some programs may have access to participants' medical charts. In some cases, the medical chart may show that a participant's previous response about family history is inconsistent with the current response. In these instances, if the participant previously or currently indicates a parent, sibling, and/or child has diabetes, the program should recode this field as '1 Yes.'			

Part B: Screening and Assessment MDE Specifications

Item 7a: HCMeds	**Are you taking any medicine prescribed by your doctor, nurse, or other health professional for your high cholesterol?** This variable indicates whether the participant is taking prescribed medication for high cholesterol.			
FORMAT	**Type:**	Numeric	**Justification:**	Right
	Length:	1	**Beginning Position:**	81
	Leading Zeros:	No	**Valid Range:**	See values; cannot be blank
	Other Format:	N/A		
DENOMINATOR POPULATION	The denominator includes all WISEWOMAN participants. A participant is a woman who receives at least one NBCCEDP service (enrolled in NBCCEDP); has received all the following screenings from the WISEWOMAN Program: height, weight, first blood pressure diastolic measurement, and first blood pressure systolic measurement; and has responded to at least one health history question. (For items 5a-8b, there must be at least one response that is not coded as '7 Don't know,' '8 Don't want to answer,' or '9 No answer recorded.')			
VALUES AND DESCRIPTION	**1 Yes**	Participant is taking prescribed medication for high cholesterol		
	3 No	Participant is not taking prescribed medication for high cholesterol		
	7 Don't know/Not sure	Participant does not know whether she is taking prescribed medication for high cholesterol The validation program will flag this value for a quality check		
	8 *Don't want to answer*	Participant does not want to answer whether she is taking prescribed medication for high cholesterol The validation program will flag this value for a quality check		
	9 No answer recorded	No answer recorded The validation tool will flag this value as an error		
ANALYSIS AND USE	To understand the cardiovascular disease risk factors of both individual participants and the overall WISEWOMAN population To assess the number of cases of high blood cholesterol that have been previously diagnosed as opposed to newly detected cases among the WISEWOMAN population To assess the control and management of cholesterol among participants who have high cholesterol			
OTHER INFORMATION	***Guidance*** Response options in italics should not be read if this question is asked orally; if this question is completed through a data collection form presented to participants, response options in italics should appear. Codes and response options highlighted in gray should not appear on the data collection forms presented to participants. They are provided for funded program use only. If a participant reports that she doesn't know whether she is taking medication for high cholesterol or doesn't want to answer whether she is taking medication for high cholesterol, programs should have a discussion with her to verify the response.			

Part B: Screening and Assessment MDE Specifications

Item 7b: HBPMeds	**Are you taking any medicine prescribed by your doctor, nurse, or other health professional for your high blood pressure?** This variable indicates whether the participant is taking prescribed medication for high blood pressure.			
FORMAT	**Type:**	Numeric	**Justification:**	Right
	Length:	1	**Beginning Position:**	82
	Leading Zeros:	No	**Valid Range:**	See values; cannot be blank
	Other Format:	N/A		
DENOMINATOR POPULATION	The denominator includes all WISEWOMAN participants. A participant is a woman who receives at least one NBCCEDP service (enrolled in NBCCEDP); has received all the following screenings from the WISEWOMAN Program: height, weight, first blood pressure diastolic measurement, and first blood pressure systolic measurement; and has responded to at least one health history question. (For items 5a-8b, there must be at least one response that is not coded as '7 Don't know,' '8 Don't want to answer,' or '9 No answer recorded.')			
VALUES AND DESCRIPTION	**1 Yes**	Participant is taking prescribed medication for high blood pressure/hypertension		
	3 No	Participant is not taking prescribed medication for high blood pressure/hypertension		
	7 Don't know/Not sure	Participant does not know whether she is taking prescribed medication for high blood pressure/hypertension The validation program will flag this value for a quality check		
	8 *Don't want to answer*	Participant does not want to answer whether she is taking prescribed medication for high blood pressure/hypertension The validation program will flag this value for a quality check		
	9 No answer recorded	No answer recorded The validation tool will flag this value as an error		
ANALYSIS AND USE	To understand the cardiovascular disease risk factors of both individual participants and the overall WISEWOMAN population To assess the number of cases of high blood pressure that have been previously diagnosed as opposed to newly detected cases among the WISEWOMAN population To assess the control and management of high blood pressure/hypertension among participants who have high blood pressure			
OTHER INFORMATION	***Guidance*** Response options in italics should not be read if this question is asked orally; if this question is completed through a data collection form presented to participants, response options in italics should appear. Codes and response options highlighted in gray should not appear on the data collection forms presented to participants. They are provided for funded program use only.			

Part B: Screening and Assessment MDE Specifications

Item 7c: DMeds	**Are you taking any medicine prescribed by your doctor, nurse, or other health professional for your diabetes?** This variable indicates whether the participant is taking prescribed medication for diabetes.			
FORMAT	**Type:**	Numeric	**Justification:**	Right
	Length:	1	**Beginning Position:**	83
	Leading Zeros:	No	**Valid Range:**	See values; cannot be blank
	Other Format:	N/A		
DENOMINATOR POPULATION	The denominator includes all WISEWOMAN participants. A participant is a woman who receives at least one NBCCEDP service (enrolled in NBCCEDP); has received all the following screenings from the WISEWOMAN Program: height, weight, first blood pressure diastolic measurement, and first blood pressure systolic measurement; and has responded to at least one health history question. (For items 5a-8b, there must be at least one response that is not coded as '7 Don't know,' '8 Don't want to answer,' or '9 No answer recorded.')			
VALUES AND DESCRIPTION	**1 Yes**	Participant is taking prescribed medication for diabetes Participant with this response is considered a known diabetic		
	3 No	Participant is not taking prescribed medication for diabetes		
	7 Don't know/Not sure	Participant does not know whether she is taking prescribed medication for diabetes The validation program will flag this value for a quality check		
	8 *Don't want to answer*	Participant does not want to answer whether she is taking prescribed medication for diabetes The validation program will flag this value for a quality check		
	9 No answer recorded	No answer recorded The validation tool will flag this value as an error		
ANALYSIS AND USE	To understand the cardiovascular disease risk factors of both individual participants and the overall WISEWOMAN population To assess the number of cases of diabetes that have been previously diagnosed as opposed to newly detected cases among the WISEWOMAN population To assess diabetes control and management among participants who have diabetes			
OTHER INFORMATION	***Guidance*** Response options in italics should not be read if this question is asked orally; if this question is completed through a data collection form presented to participants, response options in italics should appear. Codes and response options highlighted in gray should not appear on the data collection forms presented to participants. They are provided for funded program use only. If a participant reports that she doesn't know whether she is taking medication for diabetes or doesn't want to answer whether she is taking medication for diabetes, programs should have a discussion with the participant to verify the response. ***Additional edits*** See related cross edits for items 12b: Glucose and 12d: A1C.			

Part B: Screening and Assessment MDE Specifications

Item 8a: Smoker	**Do you now smoke cigarettes every day, some days or not at all?** This variable indicates whether the participant smokes cigarettes every day, some days, or not at all.			
FORMAT	**Type:**	Numeric	**Justification:**	Right
	Length:	1	**Beginning Position:**	84
	Leading Zeros:	No	**Valid Range:**	See values; cannot be blank
	Other Format:	N/A		
DENOMINATOR POPULATION	The denominator includes all WISEWOMAN participants. A participant is a woman who receives at least one NBCCEDP service (enrolled in NBCCEDP); has received all the following screenings from the WISEWOMAN Program: height, weight, first blood pressure diastolic measurement, and first blood pressure systolic measurement; and has responded to at least one health history question. (For items 5a-8b, there must be at least one response that is not coded as '7 Don't know,' '8 Don't want to answer,' or '9 No answer recorded.')			
VALUES AND DESCRIPTION	**1 Every day**	Participant smokes every day		
	2 Some days	Participant smokes some days		
	3 Not at all	Participant does not smoke at all		
	7 Don't know/Not sure	Participant does not know whether she smokes The validation tool will flag this value as an error		
	8 *Don't want to answer*	Participant does not want to answer whether she smokes The validation program will flag this value for a quality check		
	9 No answer recorded	No answer recorded The validation tool will flag this value as an error		
ANALYSIS AND USE	To understand the cardiovascular disease risk factors of both individual participants and the overall WISEWOMAN population To identify participants who might benefit from smoking cessation counseling and tobacco cessation resources (quit line and community-based)			
OTHER INFORMATION	***Guidance*** Response options in italics should not be read if this question is asked orally; if this question is completed through a data collection form presented to participants, response options in italics should appear. Codes and response options highlighted in gray should not appear on the data collection forms presented to participants. They are provided for funded program use only. Participants should know whether they smoke. If they self report that they don't know whether they smoke, the program should recode this field as '8 Refused.'			

Part B: Screening and Assessment MDE Specifications

Item 8b: Sechand	**Not counting decks, porches, or garages, during the past 7 days, on how many days did someone other than you smoke tobacco inside your home while you were at home?** This variable indicates whether the participant has been exposed to secondhand smoke in her home during the past 7 days.			
FORMAT	**Type:**	Numeric	**Justification:**	Right
	Length:	2	**Beginning Position:**	189*
	Leading Zeros:	Yes	**Valid Range:**	See values; cannot be blank
	Other Format:	N/A		
DENOMINATOR POPULATION	The denominator includes all WISEWOMAN participants. A participant is a woman who receives at least one NBCCEDP service (enrolled in NBCCEDP); has received all the following screenings from the WISEWOMAN Program: height, weight, first blood pressure diastolic measurement, and first blood pressure systolic measurement; and has responded to at least one health history question. (For items 5a-8b, there must be at least one response that is not coded as '7 Don't know,' '8 Don't want to answer,' or '9 No answer recorded.')			
VALUES AND DESCRIPTION	**Number of days**	A one-digit (numeric) value indicating the number of days out of the past seven that someone other than the participant smoked tobacco inside the participant's home (not counting decks, porches, or garages) while she was home. Values may be 1, 2, 3, 4, 5, 6, and 7 The validation tool will flag responses greater than 7 (excluding 22, 77, 88, and 99) as an error		
	00 None	In the past seven days, no one other than the participant smoked inside the participant's home (not counting decks, porches, or garages) while she was home		
	77 Don't know	Participant does not know whether someone smoked in her home (not counting decks, porches, or garages) while she was home in the past seven days The validation tool will flag this value for a quality check		
	88 Don't want to answer	Participant does not want to answer whether someone smoked in her home (not counting decks, porches, or garages) while she was home in the past seven days The validation tool will flag this value for a quality check		
	99 No answer recorded	No answer recorded The validation tool will flag this value as an error		
ANALYSIS AND USE	To understand the cardiovascular disease risk factors of both individual participants and the overall WISEWOMAN population To assess environmental factors contributing to participants' risk levels To help assess use of community-based referral resources and risk reduction counseling for those exposed to secondhand smoke			
OTHER INFORMATION	***Guidance*** Response options in italics should not be read if this question is asked orally; if this question is completed through a data collection form presented to participants, response options in italics should appear. Codes and response options highlighted in gray should not appear on the data collection forms presented to participants. They are provided for funded program use only.			

	The National Adult Tobacco Survey routinely collects data on secondhand smoke exposure using this question. All participants should be asked this question, regardless of their smoking status. If a participant responds with a value greater than seven days, reports that she doesn't know, or refuses to answer, a discussion with the participant should be conducted to verify the response. ***Note that the beginning position of this field is 189. In the submission file, this field does not immediately follow item 8a, which is located at position 84.**

Part B: Screening and Assessment MDE Specifications

Item 9b: Height	**Height** This variable indicates the participant's height in inches.			
FORMAT	**Type:**	Numeric	**Justification:**	Right
	Length:	3	**Beginning Position:**	93
	Leading Zeros:	No	**Valid Range:**	54-78; cannot be blank
	Other Format:	N/A		
DENOMINATOR POPULATION	The denominator includes all WISEWOMAN participants. A participant is a woman who receives at least one NBCCEDP service (enrolled in NBCCEDP); has received all the following screenings from the WISEWOMAN Program: height, weight, first blood pressure diastolic measurement, and first blood pressure systolic measurement; and has responded to at least one health history question. (For items 5a-8b, there must be at least one response that is not coded as '7 Don't know,' '8 Don't want to answer,' or '9 No answer recorded.')			
VALUES AND DESCRIPTION	**Height in inches**	Up to two-digit (numeric) value representing the participant's height; the first position of the field will always be blank The validation tool will flag heights between 54" and 58" or 74" and 78" for quality checks and program verification. See Appendix B for the procedure for validating out-of-range values. Any values outside 54"-78" will be considered an error Example: 62" (5 feet, 2 inches) = 62		
	777 Unable to obtain	Height measurement was attempted, but measurement results were not obtained. See Appendix B for the procedure for documenting the reason that the measurement was not obtained The validation tool will flag this value as an error		
	888 Client refused	Participant refuses to have her height measurement taken The validation tool will flag this value as an error		
	999 No measurement recorded	Height measurement was not performed The validation tool will flag this value as an error		
ANALYSIS AND USE	To calculate the BMI of WISEWOMAN participants To understand the cardiovascular disease risk factors of both individual participants and the overall WISEWOMAN population			
OTHER INFORMATION	***Guidance*** Codes and response options highlighted in gray should not appear on the data collection forms completed by the provider. They are provided for funded program use only. All height measurements should be recorded in inches. A height measurement is required for a record to count as a valid screening record. If Height is coded as '888 Client refused' or '999 No measurement recorded,' the record will **not** count as a valid screening record, and the record will not count toward meeting a program's screening goal (performance measure #1).			

	If exceptional circumstances do not allow height measurement, these reasons should be documented as instructed in Appendix B.

Part B: Screening and Assessment MDE Specifications

Item 9d: Weight	**Weight** This variable indicates the participant's weight in pounds.			
FORMAT	**Type:**	Numeric	**Justification:**	Right
	Length:	3	**Beginning Position:**	97
	Leading Zeros:	No	**Valid Range:**	75-460; cannot be blank
	Other Format:	N/A		
DENOMINATOR POPULATION	The denominator includes all WISEWOMAN participants. A participant is a woman who receives at least one NBCCEDP service (enrolled in NBCCEDP); has received all the following screenings from the WISEWOMAN Program: height, weight, first blood pressure diastolic measurement, and first blood pressure systolic measurement; and has responded to at least one health history question. (For items 5a-8b, there must be at least one response that is not coded as '7 Don't know,' '8 Don't want to answer,' or '9 No answer recorded.')			
VALUES AND DESCRIPTION	**Weight in pounds**	Up to three-digit (numeric) value representing the participant's weight The validation tool will flag weights between 75 and 90 lb or 350 and 460 lb for quality checks and program verification. See Appendix B for the procedure for validating out-of-range values. Any values outside 75-460 lb will be considered an error Example: 98 lb = 98		
	777 Unable to obtain	Weight measurement was attempted, but measurement results were not obtained The validation tool will flag this value as a quality check. See Appendix B for the procedure for documenting the reason that the measurement was not obtained		
	888 Client refused	Participant refuses to have her weight measurement taken The validation tool will flag this value as a quality check		
	999 No measurement recorded	Weight measurement was not performed The validation tool will flag this value as an error		
ANALYSIS AND USE	To calculate the BMI of WISEWOMAN participants To understand the cardiovascular disease risk factors of both individual participants and the overall WISEWOMAN population			
OTHER INFORMATION	***Guidance*** Codes and response options highlighted in gray should not appear on the data collection forms completed by the provider. They are provided for funded program use only. A weight measurement is required for a record to count as a valid screening record. If Weight is coded as '888 Client refused' or '999 No measurement recorded,' the record will **not** count as a valid screening record, and the record will not count toward meeting a program's screening goal (performance measure #1). If exceptional circumstances do not allow weight measurement, these reasons should be documented as instructed in Appendix B.			

Part B: Screening and Assessment MDE Specifications

Item 10a: BPDate	**Blood Pressure Measurement Date (Office Visit Date)** This variable indicates the date of the office visit when a blood pressure measurement is obtained.			
FORMAT	**Type:**	Numeric	**Justification:**	Right
	Length:	8	**Beginning Position:**	101
	Leading Zeros:	Yes	**Valid Range:**	Valid date; must be blank if SBP1, DBP1, SBP2, and DBP2 *all* = 777, 888, 999
	Other Format:	MMDDCCYY		
DENOMINATOR POPULATION	The denominator includes all WISEWOMAN participants. A participant is a woman who receives at least one NBCCEDP service (enrolled in NBCCEDP); has received all the following screenings from the WISEWOMAN Program: height, weight, first blood pressure diastolic measurement, and first blood pressure systolic measurement; and has responded to at least one health history question. (For items 5a-8b, there must be at least one response that is not coded as '7 Don't know,' '8 Don't want to answer,' or '9 No answer recorded.')			
VALUES AND DESCRIPTION	**Blood pressure measurement date/Office visit date**	Valid date in MMDDCCYY format Date of the office visit and when a blood pressure measurement is obtained Example: September 10, 2011 = 09102011		
ANALYSIS AND USE	To identify the date of the office visit and blood pressure measurements To facilitate analysis of changes in blood pressure over time To calculate other service time frames, including time to rescreening, lifestyle intervention sessions, alert referrals, and labs To calculate performance measure #2: Program provides evidence that 35% of WISEWOMAN participants are rescreened no more than 18 months after their WISEWOMAN baseline screening			
OTHER INFORMATION	***Guidance*** If a blood pressure measurement was not obtained at the time of the office visit and obtained at a referral visit within 30 days of the visit, the date of the office visit should be recorded here. If a blood pressure measurement is attempted but not obtained at the office visit or within 30 days of the office visit, the date of the office visit date should be recorded here. Blood pressure measurement date also represents the date of the office visit. As a result, if blood pressure measurements are marked as being unable to obtain" or refused (SBP1, DBP1, SBP2, **and** DBP2 all = 777 or 888), the date of office visit should be entered. An explanation for the inability to obtain the blood pressure measurements or refusal of blood pressure measurements should be documented using the validation form in Appendix B. Since all screening measurements and assessments are to be used to determine participation in the lifestyle intervention and referrals to community-based resources, it is expected that all labs and other screening services will be completed within as short a time frame as possible. Thirty days is the recommended time frame in which blood pressure measurements should be done prior to or after the office visit unless specified by the program's medical advisory group or medical clinic. ***Cross edits*** Since blood pressure measurement date now also represents office visit date, this field should never be blank. If blood pressure measurement/office visit date is left blank, the validation tool will			

flag it as an error.

Error: BPDATE = .

Additional edits

Blood pressure should have been measured on the current date or earlier.

Error: BPDATE > [current date]

See related cross edits for items 3d: DOB, 11a: TCDate, 12a: BGDate, and 13b: BPDiDate.

Part B: Screening and Assessment MDE Specifications

Item 10b: SBP1	**Systolic Blood Pressure #1** This variable indicates the participant's first systolic blood pressure reading.			
FORMAT	**Type:**	Numeric	**Justification:**	Right
	Length:	3	**Beginning Position:**	109
	Leading Zeros:	No	**Valid Range:**	74-260; cannot be blank
	Other Format:	N/A		
DENOMINATOR POPULATION	The denominator includes all WISEWOMAN participants. A participant is a woman who receives at least one NBCCEDP service (enrolled in NBCCEDP); has received all the following screenings from the WISEWOMAN Program: height, weight, first blood pressure diastolic measurement, and first blood pressure systolic measurement; and has responded to at least one health history question. (For items 5a-8b, there must be at least one response that is not coded as '7 Don't know,' '8 Don't want to answer,' or '9 No answer recorded.')			
VALUES AND DESCRIPTION	**Systolic blood pressure in mm Hg**	Up to three-digit (numeric) value representing the participant's first systolic blood pressure in mm Hg The validation tool will flag systolic blood pressure values between 230 and 260 mm Hg for quality checks and program verification. Values outside 74-260 mm Hg will be flagged as errors. See Appendix B for the procedure for validating out-of-range values If a blood pressure measurement was not obtained at the time of the office visit and obtained at a referral visit within 30 days of the visit, the blood pressure measurement from the referral should be recorded here Example: 90 mm Hg = 90		
	777 Unable to obtain	First systolic blood pressure measurement was attempted, but results were not obtained due to technical difficulties or errors See Appendix B for the procedure for documenting the reason that the measurement could not be obtained The validation tool will flag this value as an error		
	888 Client refused	Participant refuses to have her first systolic blood pressure measurement taken The validation tool will flag this value as an error		
	999 No measurement recorded	First systolic blood pressure measurement was not performed or not recorded The validation tool will flag this value as an error		
ANALYSIS AND USE	To identify those at increased risk for cardiovascular conditions, including heart attack, heart failure, stroke, and kidney disease To identify participants who would benefit from lifestyle interventions			

	To identify participants unaware that they have high blood pressure for referral to medical management
	To determine control and management of blood pressure
	To identify participants who require further diagnostic evaluation
	To identify hypertension risk of the WISEWOMAN population
OTHER INFORMATION	***Guidance***
	Codes and response options highlighted in gray should not appear on the data collection forms completed by the provider. They are provided for funded program use only.
	A first systolic blood pressure measurement is required for a record to count as a valid screening record. If first systolic blood pressure is coded as '888 Client refused' or '999 No measurement recorded,' the record will **not** count as a valid screening record, and the record will not count toward meeting a program's screening goal (performance measure #1).
	If exceptional circumstances do not allow a first blood pressure measurement (cases where first blood pressure measurement is coded as '777 Unable to obtain'), these reasons should be documented as instructed in Appendix B.
	Cross edits
	First blood pressure should be recorded before second blood pressure. If a second systolic blood pressure measurement is recorded, but a first systolic blood pressure measurement has not been recorded, the validation tool will flag this field for an error.
	Error: (SBP1 = 777, 888, or 999) **AND (**SBP2 ≠ 777, 888, or 999)
	Additional edits
	See related cross edits for items 10a: BPDate, 10c: DBP1, 13a: BPAlert, and 13b: BPDiDate.

Part B: Screening and Assessment MDE Specifications

Item 10c: DBP1	**Diastolic Blood Pressure #1** This variable indicates the participant's first diastolic blood pressure reading.			
FORMAT	**Type:**	Numeric	**Justification:**	Right
	Length:	3	**Beginning Position:**	112
	Leading Zeros:	No	**Valid Range:**	2-156; cannot be blank
	Other Format:	N/A		
DENOMINATOR POPULATION	The denominator includes all WISEWOMAN participants. A participant is a woman who receives at least one NBCCEDP service (enrolled in NBCCEDP); has received all the following screenings from the WISEWOMAN Program: height, weight, first blood pressure diastolic measurement, and first blood pressure systolic measurement; and has responded to at least one health history question. (For items 5a-8b, there must be at least one response that is not coded as '7 Don't know,' '8 Don't want to answer,' or '9 No answer recorded.')			
VALUES AND DESCRIPTION	**Diastolic blood pressure in mm Hg**	Up to three-digit (numeric) value representing the participant's diastolic blood pressure in mm Hg The validation tool will flag first diastolic blood pressure values between 2-12 mm Hg or 122-156 mm Hg for quality checks and program verification. Values outside 2-156 mm Hg will be considered errors. See Appendix B for the procedure for validating out-of-range values If a blood pressure measurement was not obtained at the time of the office visit and obtained at a referral visit within 30 days of the visit, the blood pressure measurement from the referral should be recorded here Example: 85 mm Hg = 85		
	777 Unable to obtain	First diastolic blood pressure measurement was attempted, but results were not obtained due to technical difficulties or errors. See Appendix B for the procedure for documenting the reason that the measurement could not be obtained The validation tool will flag this value as an error		
	888 Client refused	Participant refuses to have her first diastolic blood pressure measurement taken The validation tool will flag this value as an error		
	999 No measurement recorded	First diastolic blood pressure measurement was not performed or not recorded The validation tool will flag this value as an error		
ANALYSIS AND USE	To identify those at increased risk for cardiovascular conditions, including heart attack, heart failure, stroke, and kidney disease To identify participants who would benefit from lifestyle interventions To identify participants unaware that they have high blood pressure for referral to medical management To determine control and management of blood pressure To identify participants who require further diagnostic evaluation To identify hypertension risk of the WISEWOMAN population			
OTHER INFORMATION	***Guidance*** Codes and response options highlighted in gray should not appear on the data collection forms completed by the provider. They are provided for funded program use only.			

A first diastolic blood pressure measurement is required for a record to count as a valid screening record. If first diastolic blood pressure is coded as '888 Client refused' or '999 No measurement recorded,' the record will **not** count as a valid screening record, and the record will not count toward meeting a program's screening goal (performance measure #1).

If exceptional circumstances do not allow a first blood pressure measurement (cases where first blood pressure measurement is coded as '777 Unable to obtain'), these reasons should be documented as instructed in Appendix B.

Cross edits

First blood pressure should be recorded before second blood pressure. If a second diastolic blood pressure measurement is recorded, but a first diastolic blood pressure measurement has not been recorded, the validation tool will flag this field for an error.

Error: (DBP1 = 777, 888, or 999) **AND (**DBP2 ≠ 777, 888, or 999)

If a provider is unable to obtain systolic blood pressure, diastolic blood pressure should also not have been obtained. If only one of the first blood pressure measurements is coded as '777 Unable to obtain,' then the validation tool will flag this field as an error.

Error: (SBP1 = 777 **AND** DBP1 ≠ 777) **OR** (SBP1 ≠ 777 **AND** DBP1 = 777)

Additional edits

See related cross edits for items 10a: BPDate, 13a: BPAlert, and 13b: BPDiDate.

Part B: Screening and Assessment MDE Specifications

Item 10d: SBP2	**Systolic Blood Pressure #2** This variable indicates the participant's second systolic blood pressure reading.			
FORMAT	**Type:**	Numeric	**Justification:**	Right
	Length:	3	**Beginning Position:**	115
	Leading Zeros:	No	**Valid Range:**	74-260; cannot be blank
	Other Format:	N/A		
DENOMINATOR POPULATION	The denominator includes all WISEWOMAN participants. A participant is a woman who receives at least one NBCCEDP service (enrolled in NBCCEDP); has received all the following screenings from the WISEWOMAN Program: height, weight, first blood pressure diastolic measurement, and first blood pressure systolic measurement; and has responded to at least one health history question. (For items 5a-8b, there must be at least one response that is not coded as '7 Don't know,' '8 Don't want to answer,' or '9 No answer recorded.')			
VALUES AND DESCRIPTION	**Systolic blood pressure in mm Hg**	Up to three-digit (numeric) value representing the participant's second systolic blood pressure in mm Hg The validation tool will flag systolic blood pressure values between 230 and 260 mm Hg for quality checks and program verification. Values outside 74-260 mm Hg will be flagged as errors. See Appendix B for the procedure for validating out-of-range values If a blood pressure measurement was not obtained at the time of the office visit and obtained at a referral visit within 30 days of the visit, the blood pressure measurement from the referral should be recorded here Example: 90 mm Hg = 90		
	777 Unable to obtain	Second systolic blood pressure measurement was attempted, but results were not obtained due to technical difficulties or errors See Appendix B for the procedure for documenting the reason that the measurement was not obtained The validation tool will flag this value as an error		
	888 Client refused	Participant refuses to have her second systolic blood pressure measurement taken The validation tool will flag this value as an error		
	999 No measurement recorded	Second systolic blood pressure measurement was not performed or not recorded The validation tool will flag this value as an error		
ANALYSIS AND USE	To identify those at increased risk for cardiovascular conditions, including heart attack, heart failure, stroke, and kidney disease To identify participants who would benefit from lifestyle interventions To identify participants unaware that they have high blood pressure for referral to medical management To determine control and management of blood pressure among those currently being treated To identify participants who require further diagnostic evaluation To identify hypertension risk in the WISEWOMAN population			
OTHER INFORMATION	***Guidance*** Codes and response options highlighted in gray should not appear on the data collection forms completed by the provider. They are provided for funded program use only. ***Additional edits***			

	See related cross edits for items 10a: BPDate, 10b: SBP1, 10e: DBP2, 13a: BPAlert, and 13b: BPDiDate.

Part B: Screening and Assessment MDE Specifications

Item 10e: DBP2	**Diastolic Blood Pressure #2** This variable indicates the participant's second diastolic blood pressure reading.			
FORMAT	**Type:**	Numeric	**Justification:**	Right
	Length:	3	**Beginning Position:**	118
	Leading Zeros:	No	**Valid Range:**	2-156; cannot be blank
	Other Format:	N/A		
DENOMINATOR POPULATION	The denominator includes all WISEWOMAN participants. A participant is a woman who receives at least one NBCCEDP service (enrolled in NBCCEDP); has received all the following screenings from the WISEWOMAN Program: height, weight, first blood pressure diastolic measurement, and first blood pressure systolic measurement; and has responded to at least one health history question. (For items 5a-8b, there must be at least one response that is not coded as '7 Don't know,' '8 Don't want to answer,' or '9 No answer recorded.')			
VALUES AND DESCRIPTION	**Diastolic blood pressure in mm Hg**	Up to three-digit (numeric) value representing the participant's diastolic blood pressure in mm Hg The validation tool will flag second diastolic blood pressure values between 2 and 12 mm Hg or 122 and 156 mm Hg for quality checks and program verification. Values outside 2-156 mm Hg will be considered errors. See Appendix B for the procedure for validating out-of-range values If a blood pressure measurement was not obtained at the time of the office visit and obtained at a referral visit within 30 days of the visit, the blood pressure measurement from the referral should be recorded here Example: 85 mm Hg = 85		
	777 Unable to obtain	Second diastolic blood pressure measurement was attempted, but results were not obtained due to technical difficulties or errors See Appendix B for the procedure for documenting the reason that the measurement was not obtained The validation tool will flag this value as an error		
	888 Client refused	Participant refuses to have her second diastolic blood pressure measurement taken The validation tool will flag this value as an error		
	999 No measurement recorded	Second diastolic blood pressure measurement was not performed or not recorded The validation tool will flag this value as an error		
ANALYSIS AND USE	To identify those at increased risk for cardiovascular conditions, including heart attack, heart failure, stroke, and kidney disease To identify participants who would benefit from lifestyle interventions To identify participants unaware that they have high blood pressure for referral to medical management To determine control and management of blood pressure To identify participants who require further diagnostic evaluation To identify hypertension risk of the WISEWOMAN population			
OTHER INFORMATION	***Guidance*** Codes and response options highlighted in gray should not appear on the data collection forms			

completed by the provider. They are provided for funded program use only.

Cross edits

If a provider is unable to obtain systolic blood pressure, diastolic blood pressure should also not have been obtained. If only one of the second blood pressure measurements is coded as '777 Unable to obtain,' then the validation tool will flag this field as an error.

Error: (SBP2 = 777 **AND** DBP2 ≠ 777) **OR** (SBP2 ≠ 777 **AND** DBP2 = 777)

Additional edits

See related cross edits for items 10a: BPDate, 10c: DBP1, 13a: BPAlert, and 13b: BPDiDate.

Part B: Screening and Assessment MDE Specifications

Item 11a: TCDate	**Cholesterol Measurement Date** This variable indicates the date that the cholesterol measurements were taken.			
FORMAT	**Type:**	Numeric	**Justification:**	Right
	Length:	8	**Beginning Position:**	121
	Leading Zeros:	Yes	**Valid Range:**	Valid date; must be blank if TotChol, and HDL, LDL, and Trigly *all* = 888/8888 or 999/9999
	Other Format:	MMDDCCYY		
DENOMINATOR POPULATION	The denominator includes all WISEWOMAN participants. A participant is a woman who receives at least one NBCCEDP service (enrolled in NBCCEDP); has received all the following screenings from the WISEWOMAN Program: height, weight, first blood pressure diastolic measurement, and first blood pressure systolic measurement; and has responded to at least one health history question. (For items 5a-8b, there must be at least one response that is not coded as '7 Don't know,' '8 Don't want to answer,' or '9 No answer recorded.')			
VALUES AND DESCRIPTION	**Screening Date**	Valid date in MMDDCCYY format The date recorded in this field must be the date that the total and HDL cholesterol values were taken; total cholesterol and HDL measurements are minimum requirements for every participant If a lipid panel is completed as part of the screening process, the date recorded must be the date that the lipid panel was done Example: September 10, 2011 = 09102011		
ANALYSIS AND USE	To determine the date of the cholesterol measurements To facilitate analysis of changes in cholesterol over time			
OTHER INFORMATION	***Cross edits*** Cholesterol measurement date should not be blank if there is evidence of an attempt to measure cholesterol. If the cholesterol measurement date is blank when there is evidence of an attempt to measure cholesterol, the validation tool will flag this field as an error. *Error:* TCDATE = . **AND** (TOTCHOL, HDL, LDL, **OR** TRIGLY ≠ (888/8888, 999/9999)) ***Additional edits*** Cholesterol should have been measured on the current date or earlier. If the cholesterol measurement date is in the future, the validation tool will flag it as an error. *Error:* TCDATE < [current date] Cholesterol measurements should be completed in the closest time frame possible to the office visit, preferably within 30 days before or after. If cholesterol measurements are taken more than 30 days before or after the office visit, the validation tool will flag this field for a quality check. *Quality check:* TCDATE – BPDATE >30 **OR** BPDATE – TCDATE >30 See related cross edits for item 13e: TCDiDate.			

Part B: Screening and Assessment MDE Specifications

Item 11b: TotChol	**Total Cholesterol (fasting or nonfasting)** This variable indicates the participant's total cholesterol level.			
FORMAT	**Type:**	Numeric	**Justification:**	Right
	Length:	3	**Beginning Position:**	129
	Leading Zeros:	No	**Valid Range:**	44-702 mg/dL; cannot be blank
	Other Format:	N/A		
DENOMINATOR POPULATION	The denominator includes all WISEWOMAN participants. A participant is a woman who receives at least one NBCCEDP service (enrolled in NBCCEDP); has received all the following screenings from the WISEWOMAN Program: height, weight, first blood pressure diastolic measurement, and first blood pressure systolic measurement; and has responded to at least one health history question. (For items 5a-8b, there must be at least one response that is not coded as '7 Don't know,' '8 Don't want to answer,' or '9 No answer recorded.')			
VALUES AND DESCRIPTION	**Total cholesterol in mg/dL**	Up to three-digit (numeric) value representing the participant's total cholesterol in mg/dL The validation tool will flag total cholesterol values that are between 44 and 60 mg/dL or 400 and 702 mg/dL for quality checks and program verification. Values outside 44-702 will be considered errors. See Appendix B for the procedure for validating out-of-range values Example: 90 mg/dL = 90		
	777 Inadequate blood sample	Total cholesterol measurement was attempted, but results were not obtained due to technical difficulties or errors This may include issues such as (1) two or more failed venipuncture attempts; (2) insufficient amount of blood, type of test tube; (3) sample submitted to laboratory, test not done due to erroneous or missing laboratory request or other paperwork See Appendix B for the procedure for documenting the reason that the measurement was not obtained The validation tool will flag this value for a quality check		
	888 Client refused	Participant refuses to have her blood drawn for cholesterol measurements If the participant refuses to go to the lab, the participant can be considered to have refused If the participant does not go to the scheduled lab appointment after follow-up has been attempted, the participant can be considered to have refused The validation tool will flag this value for a quality check		
	999 No measurement recorded	No total cholesterol measurement was taken or recorded The validation tool will flag this value as an error		
ANALYSIS AND USE	To identify participants who are unaware that they have high or borderline high cholesterol and need preventive services or referral to medical management To determine cholesterol control and management To assess the percentage of WISEWOMAN participants who have high cholesterol or borderline high cholesterol To assess the risk in the WISEWOMAN population for cardiovascular disease			
OTHER	***Guidance***			

INFORMATION	Codes and response options highlighted in gray should not appear on the data collection forms completed by the provider. They are provided for funded program use only. Total cholesterol measurement may be taken as fasting or nonfasting. At a minimum, every participant must have a total cholesterol and HDL cholesterol (11c: HDL) value recorded. If the participant was fasting and had a lipid panel completed at the baseline or rescreening visit, then LDL (11d: LDL) and triglyceride (11e: Trigly) values can also be recorded in addition to total and HDL cholesterol. ***Additional edits*** See related cross edits for items 11a: TCDate, 11f: TCFast, 13d: TCAlert, and 13e: TCDiDate.

Part B: Screening and Assessment MDE Specifications

Item 11c: HDL	**HDL Cholesterol (fasting or nonfasting)** This variable indicates the participant's HDL cholesterol level.			
FORMAT	**Type:**	Numeric	**Justification:**	Right
	Length:	3	**Beginning Position:**	132
	Leading Zeros:	No	**Valid Range:**	7-196; cannot be blank
	Other Format:	N/A		
DENOMINATOR POPULATION	The denominator includes all WISEWOMAN participants. A participant is a woman who receives at least one NBCCEDP service (enrolled in NBCCEDP); has received all the following screenings from the WISEWOMAN Program: height, weight, first blood pressure diastolic measurement, and first blood pressure systolic measurement; and has responded to at least one health history question. (For items 5a-8b, there must be at least one response that is not coded as '7 Don't know,' '8 Don't want to answer,' or '9 No answer recorded.')			
VALUES AND DESCRIPTION	**HDL cholesterol in mg/dL**		Up to three-digit (numeric) value representing the participant's HDL cholesterol in mg/dL The validation tool will flag HDL cholesterol values that are between 155 and 196 mg/dL for quality checks and program verification. Values outside 7-196 mg/dL will be considered errors. See Appendix B for the procedure for validating out-of-range values Example: 90 mg/dL = 90	
	777 Inadequate blood sample		HDL cholesterol measurement was attempted, but results were not obtained due to technical difficulties or errors This may include issues such as (1) two or more failed venipuncture attempts; (2) insufficient amount of blood, type of test tube; (3) sample submitted to laboratory, test not done due to erroneous or missing laboratory request or other paperwork See Appendix B for the procedure for documenting the reason that the measurement was not obtained The validation program will flag this value for a quality check	
	888 Client refused		Participant refuses to have her blood drawn for cholesterol measurements If the participant refuses to go to the lab, the participant can be considered to have refused If the participant does not go to the scheduled lab appointment after follow-up has been attempted, the participant can be considered to have refused The validation program will flag this value for a quality check	

	999 No measurement recorded	No HDL cholesterol measurement was taken or recorded The validation tool will flag this value as an error
ANALYSIS AND USE	To identify participants who are unaware that they have low HDL cholesterol and need preventive services or referral to medical management To assess the percentage of WISEWOMAN participants who have high cholesterol or borderline high cholesterol To assess the risk of the WISEWOMAN population for cardiovascular disease	
OTHER INFORMATION	***Guidance*** Codes and response options highlighted in gray should not appear on the data collection forms completed by the provider. They are provided for funded program use only. HDL cholesterol measurement may be taken as fasting or nonfasting. At a minimum, every participant must have a total cholesterol (11b: TotChol) and HDL cholesterol value recorded. If the participant was fasting and had a lipid panel completed at the baseline or rescreening visit, then LDL (11d: LDL) and triglyceride (11e: Trigly) values can also be recorded in addition to total and HDL cholesterol. In cases where the Cholestech machine does not report HDL values lower than 15, the guidance is to code the participant's HDL as '777 Inadequate blood sample.' This indicates that a measurement was attempted, but results were not obtained due to technical difficulties or errors. ***Additional edits*** See related cross edits for items 11a: TCDate and 11f: TCFast.	

Part B: Screening and Assessment MDE Specifications

Item 11d: LDL	**LDL Cholesterol (fasting)** This variable indicates a fasting participant's LDL cholesterol level.			
FORMAT	**Type:**	Numeric	**Justification:**	Right
	Length:	3	**Beginning Position:**	135
	Leading Zeros:	No	**Valid Range:**	20-380; cannot be blank
	Other Format:	N/A		
DENOMINATOR POPULATION	The denominator includes all WISEWOMAN participants. A participant is a woman who receives at least one NBCCEDP service (enrolled in NBCCEDP); has received all the following screenings from the WISEWOMAN Program: height, weight, first blood pressure diastolic measurement, and first blood pressure systolic measurement; and has responded to at least one health history question. (For items 5a-8b, there must be at least one response that is not coded as '7 Don't know,' '8 Don't want to answer,' or '9 No answer recorded.')			
VALUES AND DESCRIPTION	**LDL cholesterol in mg/dL**	Up to three-digit (numeric) value representing a fasting participant's LDL cholesterol in mg/dL The validation tool will flag LDL cholesterol values that are between 344 and 380 mg/dL for quality checks and program verification. Values outside 20-380 mg/DL will be considered errors. See Appendix B for the procedure for validating out-of-range values For *nonfasting* participants, the validation tool will flag any value in this field for a quality check Example: 90 mg/dL = 90		

	777 Inadequate blood sample	LDL cholesterol measurement was attempted, but results were not obtained due to technical difficulties or errors This may include issues such as (1) two or more failed venipuncture attempts; (2) insufficient amount of blood, type of test tube; (3) sample submitted to laboratory, test not done due to erroneous or missing laboratory request or other paperwork This response should be used for participants who were confirmed to be fasting, but their LDL cholesterol was unable to be obtained For *nonfasting* participants, the validation tool will flag this value for a quality check because all nonfasting participants should have their LDL cholesterol coded as '999 No measurement recorded'
	888 Client refused	Participant refuses to receive a lipid panel that would include LDL measurements This response should be used for participants who were confirmed to be fasting, but refused a lipid panel For *nonfasting* participants, the validation tool will flag this value for a quality check because all nonfasting participants should have their LDL cholesterol coded as '999 No measurement recorded'
	999 No measurement recorded	No LDL cholesterol measurement was taken or recorded Nonfasting participants should always have this value
ANALYSIS AND USE	---	
OTHER INFORMATION	***Guidance*** Codes and response options highlighted in gray should not appear on the data collection forms completed by the provider. They are provided for funded program use only. LDL cholesterol must be a fasting measurement. At a minimum, every participant must have a total cholesterol (11b: TotChol) and HDL cholesterol (11c: HDL) value recorded. If the participant was fasting and had a lipid panel completed at the baseline or rescreening visit, then LDL and triglycerides (11e: Trigly) values can also be recorded in addition to total and HDL cholesterol. If an LDL measurement is recorded when the participant was not confirmed to be fasting, programs should check with providers to determine whether the participant actually was fasting. ***Cross edits*** Providers should only order a lipid panel for participants who confirm that they are fasting. Participants who were not fasting, do not know their fasting status, or whose fasting status was not recorded should not have LDL measurements, and should be coded as '999 No measurement recorded.' Other LDL values for these participants will be flagged for a quality check. *Quality check:* (TCFAST ≠ 1 **OR** 6) **AND** LDL ≠ 999 ***Additional edits*** See related cross edits for items 11a: TCDate and 11f: TCFast.	

Part B: Screening and Assessment MDE Specifications

Item 11e: Trigly	**Triglycerides (fasting)** This variable indicates a fasting participant's triglycerides measurement.			
FORMAT	**Type:**	Numeric	**Justification:**	Right
	Length:	4	**Beginning Position:**	138
	Leading Zeros:	No	**Valid Range:**	12-3000; cannot be blank
	Other Format:	N/A		
DENOMINATOR POPULATION	The denominator includes all WISEWOMAN participants. A participant is a woman who receives at least one NBCCEDP service (enrolled in NBCCEDP); has received all the following screenings from the WISEWOMAN Program: height, weight, first blood pressure diastolic measurement, and first blood pressure systolic measurement; and has responded to at least one health history question. (For items 5a-8b, there must be at least one response that is not coded as '7 Don't know,' '8 Don't want to answer,' or '9 No answer recorded.')			
VALUES AND DESCRIPTION	**Triglycerides in mg/dL**		Up to four-digit (numeric) value representing a fasting participant's triglycerides measurement in mg/dL The validation tool will flag triglycerides values that are between 1,000 and 3,000 mg/dL for quality checks and program verification. Values outside 12-3000 mg/dL will be considered errors. See Appendix B for the procedure for validating out-of-range values For *nonfasting* participants, the validation tool will flag any value in this field for a quality check Example: 90 mg/dL = 90	
	7777 Inadequate blood sample		Triglycerides measurement was attempted, but results were not obtained due to technical difficulties or errors This may include issues such as (1) two or more failed venipuncture attempts; (2) insufficient amount of blood, type of test tube; (3) sample submitted to laboratory, test not done due to erroneous or missing laboratory request or other paperwork This response should be used for participants who were confirmed to be fasting, but their triglycerides measurement could not be obtained For *nonfasting* participants, the validation tool will flag this value for a quality check because all nonfasting participants should have their triglycerides measurement coded as '9999 No measurement recorded'	
	8888 Client refused		Fasting participant refuses to receive a lipid panel that would include triglycerides measurements This response should be used for participants who were confirmed to be fasting, but refused a lipid panel For *nonfasting* participants, the validation tool will flag this value for a quality check because all nonfasting participants should have their triglycerides measurement coded as '9999 No measurement recorded'	
	9999 No measurement recorded		No triglycerides measurement was taken or recorded Nonfasting participants should always have this value	
ANALYSIS AND USE	---			
OTHER INFORMATION	***Guidance*** Codes and response options highlighted in gray should not appear on the data collection forms			

completed by the provider. They are provided for funded program use only.

Triglycerides must be a fasting measurement. At a minimum, every participant must have a total cholesterol (11b: TotChol) and HDL cholesterol (11c: HDL) value recorded. If the participant was fasting and had a lipid panel completed at the baseline or rescreening visit, then LDL (11d: LDL) and triglycerides values can also be recorded in addition to total and HDL cholesterol.

If a triglyceride measurement is recorded when the participant was not confirmed to be fasting, programs should check with providers to determine whether the participant actually was fasting.

Cross edits

Providers should only order a lipid panel for participants who confirm that they are fasting. Participants who were not fasting, do not know their fasting status or whose fasting status was not recorded should not have triglycerides measurements, and should be coded as '9999 No measurement recorded.' Other triglycerides values for these participants will be flagged for a quality check.

Quality check: (TCFAST ≠ 1 **OR** 6) **AND** TRIGLY ≠ 9999

Additional edits

See related cross edits for items 11a: TCDate and 11f: TCFast.

Part B: Screening and Assessment MDE Specifications

Item 11f: TCFast	**Fasting Status for Cholesterol Measurements** This variable indicates whether a participant fasted for at least nine hours prior to having blood drawn for cholesterol measurements.				
FORMAT	**Type:**	Numeric	**Justification:**	Right	
	Length:	1	**Beginning Position:**	142	
	Leading Zeros:	No	**Valid Range:**	See values; cannot be blank	
	Other Format:	N/A			
DENOMINATOR POPULATION	The denominator includes all WISEWOMAN participants. A participant is a woman who receives at least one NBCCEDP service (enrolled in NBCCEDP); has received all the following screenings from the WISEWOMAN Program: height, weight, first blood pressure diastolic measurement, and first blood pressure systolic measurement; and has responded to at least one health history question. (For items 5a-8b, there must be at least one response that is not coded as '7 Don't know,' '8 Don't want to answer,' or '9 No answer recorded.')				
VALUES AND DESCRIPTION	**1 Yes**		Participant fasted for at least nine hours prior to having blood drawn		
	2 No		Participant did not fast for at least nine hours prior to having blood drawn		
	6 No cholesterol results available (inadequate blood sample or unable to obtain for total cholesterol, HDL cholesterol, LDL cholesterol, and triglycerides)		No cholesterol measurements were available, because either (1) the blood sample was inadequate, or (2) values could not be obtained due to technical difficulties or errors This value should be marked only if 11b: TotChol, 11c: HDL, 11d: LDL, and 11e: Trigly all are equal to 777/7777		
	7 Don't know		Participant states she does not know whether she fasted for at least nine hours prior to having blood drawn The validation tool will flag this value for a quality check		
	8 Client refused		Participant refuses blood work If a participant refuses to go to the lab, the participant can be considered to have refused blood work If the participant does not go to the scheduled lab appointment after follow-up has been attempted, the participant can be considered to have refused blood work This value should be marked only if 11b: TotChol, 11c: HDL, 11d: LDL, and 11e: Trigly all are equal to 888/8888 The validation tool will flag this value for a quality check		
	9 No answer recorded		No answer recorded Provider failed to confirm fasting status or no information is available from the provider This value should be marked if 11b: TotChol, 11c: HDL, 11d: LDL, and 11e: Trigly all are equal to 999/9999 The validation tool will flag this value for a quality check		
ANALYSIS AND USE	To facilitate accurate identification of participants who have high cholesterol or borderline high cholesterol				
OTHER	***Guidance***				

INFORMATION	Codes and response options highlighted in gray should not appear on the data collection forms completed by the provider. They are provided for funded program use only. If a participant reports that she doesn't know or refuses blood work, programs should have a discussion with the participant to verify the response. ***Cross edits*** If not all cholesterol measurements were obtained because of an inadequate blood sample or technical difficulties or errors, cholesterol fasting status should be coded as '6 No cholesterol results available.' If not all cholesterol measurements were obtained due to an inadequate blood sample or technical difficulties or errors and fasting status is not coded as '6 No cholesterol results available,' the validation tool will flag this field for a quality check. The validation tool will also flag this field for a quality check if cholesterol fasting status is coded as '6 No cholesterol results available' when at least one cholesterol measurement is not coded as '777/7777 Inadequate blood sample.' *Quality check:* (TCFAST ≠ 6 **AND** TOTCHOL, HDL, LDL, TRIGLY all = 777/7777) **OR** (TCFAST = 6 **AND** TOTCHOL, HDL, LDL, TRIGLY *all* ≠ 777/7777) If a participant refused blood work, then cholesterol fasting status should also indicate that the participant refused. If cholesterol fasting status is not coded as '8 Client refused' when the participant refused blood work for cholesterol measurements, the validation tool will flag this field for a quality check. *Quality check:* (TCFAST ≠ 8 **AND** TOTCHOL, HDL, LDL, TRIGLY *all* = 888/8888) **OR** (TCFAST = 8 **AND** TOTCHOL, HDL, LDL, TRIGLY *all* ≠ 888/8888) If no cholesterol measurements were recorded, then cholesterol fasting status should also not be recorded. If cholesterol fasting status is recorded when no cholesterol measurements are recorded, the validation tool will flag this for a quality check. *Quality check:* TCFAST ≠ 9 **AND** TOTCHOL, HDL, LDL, TRIGLY *all* = 999/9999 ***Additional edits*** See related cross edits for items 11d: LDL and 11e: Trigly.

Part B: Screening and Assessment MDE Specifications

Item 12a: BGDate	**Glucose Measurement Date** This variable indicates the date that the glucose or A1C measurements were taken.			
FORMAT	**Type:**	Numeric	**Justification:**	Right
	Length:	8	**Beginning Position:**	143
	Leading Zeros:	Yes	**Valid Range:**	Valid date; must be blank if Glucose and A1C = 666/6666, 888/8888, or 999/9999; may be blank if Glucose = 800
	Other Format:	MMDDCCYY		
DENOMINATOR POPULATION	The denominator includes all WISEWOMAN participants. A participant is a woman who receives at least one NBCCEDP service (enrolled in NBCCEDP); has received all the following screenings from the WISEWOMAN Program: height, weight, first blood pressure diastolic measurement, and first blood pressure systolic measurement; and has responded to at least one health history question. (For items 5a-8b, there must be at least one response that is not coded as '7 Don't know,' '8 Don't want to answer,' or '9 No answer recorded.')			
VALUES AND DESCRIPTION	**Screening Date**	Valid date in MMDDCCYY format Example: September 10, 2011 = 09102011		
ANALYSIS AND USE	To determine the date of the glucose measurements To facilitate analysis of changes in glucose measurements over time			
OTHER INFORMATION	***Cross edits*** The glucose measurement date should not be blank if there is evidence of an attempt to measure glucose (12b: Glucose) or A1C (12d: A1C). If glucose measurement date is blank when there is evidence of an attempt to measure glucose or A1C, the validation tool will flag this field as an error. *Error:* BGDATE = . **AND** (GLUCOSE ≠ (666, 888, 999) **OR** A1C ≠ (6666, 8888, 9999)) Glucose measurements should be completed in the closest time frame possible to the office visit, preferably within 30 days before or after. If glucose measurements are taken more than 30 days before or after the office visit, the validation tool will flag this field for a quality check. *Quality check:* BGDATE – BPDATE >30 **OR** BPDATE – BGDATE >30 ***Additional edits*** Glucose should have been measured on the current date or earlier. *Error:* BGDATE < [current date] See related cross edits for item 13h: BGDiDate.			

Part B: Screening and Assessment MDE Specifications

Item 12b: Glucose	**Glucose (fasting or nonfasting)** This variable indicates the participant's glucose measurement.			
FORMAT	**Type:**	Numeric	**Justification:**	Right
	Length:	3	**Beginning Position:**	151
	Leading Zeros:	No	**Valid Range:**	37-571; cannot be blank
	Other Format:	N/A		
DENOMINATOR POPULATION	The denominator includes all WISEWOMAN participants. A participant is a woman who receives at least one NBCCEDP service (enrolled in NBCCEDP); has received all the following screenings from the WISEWOMAN Program: height, weight, first blood pressure diastolic measurement, and first blood pressure systolic measurement; and has responded to at least one health history question. (For items 5a-8b, there must be at least one response that is not coded as '7 Don't know,' '8 Don't want to answer,' or '9 No answer recorded.')			
VALUES AND DESCRIPTION	**Total glucose in mg/dL**		Up to three-digit (numeric) value representing the participant's glucose level in mg/dL The validation tool will flag glucose values that are between 37 and 50 mg/dL or 275 and 571 mg/dL for quality checks and program verification. Values outside 37-571 will be considered errors. See Appendix B for the procedure for validating out-of-range values Example: 90 mg/dL = 90	
	666 Participant has a previous diagnosis of diabetes—glucose reading not necessary		Participant has previously been diagnosed with diabetes; a glucose reading is not necessary	
	700 A1C taken for screening purposes		A laboratory A1C reading was taken instead of glucose reading for screening purposes Note that A1C is permitted to be taken for screening purposes for all participants	
	777 Inadequate blood sample		Glucose measurement was attempted, but results were not obtained due to technical difficulties or errors See Appendix B for the procedure for documenting the reason that the measurement was not obtained This value should be used for participants whose glucose level is suspected to be less than 50 mg/dL but cannot be read by the Cholestech machine This may include issues such as (1) two or more failed venipuncture attempts; (2) insufficient amount of blood, type of test tube; (3) sample submitted to laboratory, test not done due to erroneous or missing laboratory request or other paperwork The validation tool will flag this value for a quality check	
	800 Participant has previous diagnosis of diabetes—A1C measured by another provider		Participant has a previous diagnosis of diabetes, and her A1C was measured by another provider If A1C percentage (12d: A1C) has a measurement, and the measurement is from another provider, use this value If A1C percentage (12d: A1C) is coded as '9999 No measurement recorded,' and the participant reports that her diabetes is being regularly monitored by an alternate medical provider, use this value	

	888 Client refused	Participant refuses to have her blood drawn for glucose measurements If the participant refuses to go to the lab, the participant can be considered to have refused If the participant does not go to the scheduled lab appointment after follow-up has been attempted, the participant can be considered to have refused
	999 No measurement recorded	No glucose measurement was taken or record

ANALYSIS AND USE	To use in conjunction with fasting status for glucose measurements (12c: BGFast) and A1C percentage (12d: A1C) to accurately assess a participant's blood glucose To identify participants who have pre-diabetes and diabetes To understand the overall rate of diabetes among the WISEWOMAN population
OTHER INFORMATION	***Guidance*** Codes and response options highlighted in gray should not appear on the data collection form completed by the provider. They are provided for funded program use only. Programs may record both a glucose and A1C measurement for a participant. Having values for both Glucose and A1C will not result in an error. A1C measurement is never required. Diabetic participants should not have a blood glucose drawn. For these participants, programs may choose to take an A1C measurement, which provides information used to monitor the control of diabetes. An A1C measurement should not be used to identify if a participant has diabetes. In cases where the Cholestech machine does not report glucose values lower than 50, the guidance is to code the participant's glucose as '777 Inadequate blood sample.' This indicates that a measurement was attempted, but results were not obtained due to technical difficulties or errors. ***Cross edits*** If participant has not been previously diagnosed with diabetes, the provider must attempt a glucose or A1C measurement (12d: A1C). If a glucose or A1C measurement is not attempted, the validation tool will flag this field as an error. *Error:* GLUCOSE = 999 **AND** A1C = 9999 **AND** SRD = 2 **AND** DMEDS = 3 If a participant has not previously been diagnosed with diabetes, she should not be marked as being a known diabetic for this field. If a participant has not previously been diagnosed with diabetes and is marked as being a diabetic for the purposes of this variable, the validation tool will flag this field as an error. *Error:* (GLUCOSE = 666 **OR** GLUCOSE = 800) **AND** (SRD ≠ 1 **AND** DMEDS ≠ 1) If a provider indicates that a participant has had an A1C taken for screening purposes, a valid A1C measurement (12d: A1C) should be recorded. If a valid A1C measurement is not recorded, the validation tool will flag this field as an error. *Error:* GLUCOSE = 700 **AND** (A1C <2.8 **OR** A1C >16.2) Providers should attempt to measure either glucose or A1C (12d: A1C). If the participant refuses both a blucose and A1C measurement, the validation tool will flag this field for a quality check. *Quality check:* GLUCOSE = 888 **AND** AIC = 8888 ***Additional edits*** See related cross edits for items 12a: BGDate, 12c: BGFast, 13g: BGAlert, and 13h: BGDiDate.

Part B: Screening and Assessment MDE Specifications

Item 12c: BGFast	**Fasting Status for Glucose Measurements** This variable indicates whether a participant fasted for at least eight hours prior to having blood drawn for glucose measurements.			
FORMAT	**Type:**	Numeric	**Justification:**	Right
	Length:	1	**Beginning Position:**	154
	Leading Zeros:	No	**Valid Range:**	See values; cannot be blank
	Other Format:	N/A		
DENOMINATOR POPULATION	The denominator includes all WISEWOMAN participants. A participant is a woman who receives at least one NBCCEDP service (enrolled in NBCCEDP); has received all the following screenings from the WISEWOMAN Program: height, weight, first blood pressure diastolic measurement, and first blood pressure systolic measurement; and has responded to at least one health history question. (For items 5a-8b, there must be at least one response that is not coded as '7 Don't know,' '8 Don't want to answer,' or '9 No answer recorded.')			
VALUES AND DESCRIPTION	**1 Yes**	Participant fasted for at least eight hours prior to having blood drawn		
	2 No	Participant did not fast for at least eight hours prior to having blood drawn		
	6 No glucose results available (previously diagnosed diabetes, A1C taken for screening purposes, or inadequate blood sample, for glucose)	No glucose measurement is available because participant has a previous diagnosis of diabetes, A1C was taken for monitoring purposes, inadequate blood sample, or values could not be obtained because of technical difficulties or errors This value should be marked if Glucose is equal to 666, 700, 777, or 800		
	7 Don't know	The participant states she does not know whether she fasted for at least eight hours prior to having blood drawn and This field should **not** be used if the provider did not gather the information about fasting status The validation tool will flag this value for a quality check		
	8 Client refused	Participant refuses blood work If a participant refuses to go to the lab, the participant can be considered to have refused blood work If the participant does not go to the scheduled lab appointment after follow-up has been attempted, the participant can be considered to have refused blood work This value should be marked only if Glucose = 888 The validation tool will flag this value for a quality check		
	9 No answer recorded	No answer recorded Provider failed to confirm fasting status or no information is available from the provider This value should be marked if Glucose = 999 The validation tool will flag this value for a quality check		
ANALYSIS AND USE	To facilitate accurate identification of participants who have pre-diabetes and diabetes			
OTHER INFORMATION	***Guidance*** Codes and response options highlighted in gray should not appear on the data collection forms			

completed by the provider. They are provided for funded program use only.

If a participant reports that she doesn't know her fasting status, programs should have a discussion with her to verify the response.

Cross edits

If a glucose measurement (12b: Glucose) was not obtained because of participant is a known diabetic, A1C was taken for screening purposes, or an inadequate blood sample or technical difficulties or errors, glucose fasting status should be coded as '6 No glucose results available.' If a glucose measurement was not obtained for these reasons and fasting status is not coded as '6 No glucose results available,' the validation tool will flag this field for a quality check. The validation tool will also flag this field for a quality check if glucose fasting status is coded as '6 No glucose results available' when a glucose measurement was taken, refused, or not recorded.

Quality check: (BGFAST ≠ 6 **AND** GLUCOSE in [666, 700, 777, 800)) **OR** (BGFAST = 6 **AND** GLUCOSE *all* ≠ (666, 700, 777, 800))

If a participant refused blood work, then glucose fasting status should also indicate that the participant refused. If glucose fasting status is not coded as '8 Client refused' when the participant refused blood work for glucose measurements, the validation tool will flag this field for a quality check.

Quality check: (BGFAST ≠ 8 **AND** GLUCOSE = 888) **OR** (BGFAST = 8 **AND** GLUCOSE ≠ 888)

If no glucose measurement was recorded, then glucose fasting status should also not be recorded. If glucose fasting status is recorded when no glucose measurement is recorded, the validation tool will flag this field for a quality check.

Quality check: BGFAST ≠ 9 **AND** GLUCOSE = 999

Part B: Screening and Assessment MDE Specifications

Item 12d: A1C	**A1C Percentage** This variable indicates the participant's A1C percentage (if measured).			
FORMAT	**Type:**	Numeric	**Justification:**	Right
	Length:	4	**Beginning Position:**	155
	Leading Zeros:	No	**Valid Range:**	2.8-16.2; cannot be blank; decimal point counts as part of the length
	Other Format:	N/A		
DENOMINATOR POPULATION	The denominator includes all WISEWOMAN participants. A participant is a woman who receives at least one NBCCEDP service (enrolled in NBCCEDP); has received all the following screenings from the WISEWOMAN Program: height, weight, first blood pressure diastolic measurement, and first blood pressure systolic measurement; and has responded to at least one health history question. (For items 5a-8b, there must be at least one response that is not coded as '7 Don't know,' '8 Don't want to answer,' or '9 No answer recorded.')			
VALUES AND DESCRIPTION	**A1C percentage**	Numeric value representing the participant's A1C percentage. A1C should be reported to one decimal point If A1C was measured by another provider, input the value if it is available The validation tool will flag A1C values that are between 2.8% and 4.0% or 13.0% and 16.2% for quality checks and program verification. Values outside 2.8%-16.2% will be considered errors. See Appendix B for the procedure for validating out-of-range values Example: 8.5% = 8.5 (where the decimal place counts as part of the variable length)		
	6666 No previous diagnosis of diabetes	Participant has not previously been diagnosed with diabetes (5c: SRD ≠ 1 and 7c: DMeds ≠ 1), and A1C was not measured		
	7777 Inadequate blood sample	A1C measurement was attempted, but results were not obtained due to technical difficulties or errors		
	8888 Client refused	Participant refuses to have an A1C test If a participant refuses to go to the lab, the participant can be considered to have refused If a participant does not go to the scheduled lab appointment after follow-up has been attempted, the participant can be considered to have refused		
	9999 No measurement recorded	No A1C measurement was taken or recorded		
ANALYSIS AND USE	To identify participants who have diabetes and refer them for medical management To identify participants who have higher-than-optimal A1C levels and would benefit from preventive services such as lifestyle interventions To assess the cardiovascular disease risk factors in the WISEWOMAN population			
OTHER INFORMATION	***Guidance*** Codes and response options highlighted in gray should not appear on the data collection forms completed by the provider. They are provided for funded program use only. Programs may record both a glucose and A1C measurement for a participant. Having values for both Glucose and A1C will not result in an error. A1C measurement is never required. Diabetic participants should not have a blood glucose drawn. For these participants, programs may choose to take an A1C measurement, which provides information used to monitor the control of			

diabetes. An A1C measurement should not be used to identify if a participant has diabetes.

Note that WISEWOMAN does not designate an alert value for A1C, because the A1C value itself is a three-month average and is not accurate enough to identify that an individual's life is in imminent danger and requires urgent care.

Cross edits

If a participant has previously been diagnosed with diabetes, she should not be marked as being a non-diabetic. If a participant has been previously diagnosed with diabetes and she is marked as being a non-diabetic, the validation tool will flag it as an error.

Error: A1C = 6666 **AND** (SRD = 1 **OR** DMEDS = 1)

Additional edits

See related cross edits for items 12a: BGDate and 12b: Glucose.

Part B: Screening and Assessment MDE Specifications

Item 13a: BPAlert	**If average SBP >180 or DBP >110, what is the status of the workup?** This variable indicates the status of a participant's blood pressure workup.			
FORMAT	**Type:**	Numeric	**Justification:**	Right
	Length:	1	**Beginning Position:**	159
	Leading Zeros:	No	**Valid Range:**	See values; cannot be blank
	Other Format:	N/A		
DENOMINATOR POPULATION	The denominator includes all WISEWOMAN participants. A participant is a woman who receives at least one NBCCEDP service (enrolled in NBCCEDP); has received all the following screenings from the WISEWOMAN Program: height, weight, first blood pressure diastolic measurement, and first blood pressure systolic measurement; and has responded to at least one health history question. (For items 5a-8b, there must be at least one response that is not coded as '7 Don't know,' '8 Don't want to answer,' or '9 No answer recorded.')			

VALUES AND DESCRIPTION		
	1 Workup pending	Workup has been scheduled, but not yet performed This value is to be used only for internal program tracking purposes and would not be appropriate for submission to CDC If a workup has not been completed after three months, it should be coded as '8 Client refused workup' or '9 Workup not completed, client lost to follow-up' as appropriate The validation tool will flag this value as an error
	2 Workup complete	Workup for participant with alert blood pressure reading is complete For participants with this value who were not seen within seven days of the date of their blood pressure measurement (10a: BPDate), programs should submit a written explanation related to efforts to ensure timely referral. See Appendix B for procedures for submitting this information
	3 Workup not medically indicated, client being treated	Workup is not indicated for participant with an alert blood pressure reading, because participant is already being treated and prefers to see the treating provider For participants with this value, programs should submit a written explanation related to efforts to ensure timely referral. See Appendix B for procedures for submitting this information
	6 Not an alert reading	Participant did not have an alert blood pressure reading
	7 No blood pressure value recorded	Participant did not have a valid blood pressure reading
	8 Client refused workup	Participant had an alert blood pressure reading but refused workup For alert participants with this value, programs should submit a written explanation related to efforts to ensure timely referral. See cross edits in the Other Information Section below

	9 Workup not completed, client lost to follow-up	Participant had an alert blood pressure reading but was lost to follow-up, and workup was not completed *Lost to follow-up* is defined as a participant who did not attend her scheduled workup within three months after a screening visit and could not be reached to reschedule another appointment For alert participants with this value, programs should submit a written explanation related to efforts to ensure timely referral. See cross edits in the Other Information Section below The validation tool will flag this value as an error, but the error may be overwritten if acceptable documentation is submitted
ANALYSIS AND USE	To assess whether participants with alert blood pressure readings are receiving follow-up	
OTHER INFORMATION	***Guidance*** Codes and response options highlighted in gray should not appear on the data collection forms completed by the provider. They are provided for funded program use only. A participant is classified as having an alert blood pressure reading if the average of her two systolic blood pressure readings (10b: SBP1 and 10d: SBP2) is greater than 180 mm Hg *or* if the average of her two diastolic blood pressure readings (10c: DBP1 and 10e: DBP2) is greater than 110 mm Hg. If a second blood pressure was not taken, then the first reading should be used to determine whether a participant has an alert value. ***Cross edits*** If average systolic or diastolic blood pressure is an alert value, then this field should not be recorded as a non-alert value. If a participant with an alert value is recorded as a non-alert value, the validation tool will flag this field as an error. *Error:* (((SBP1 + SBP2)/2) >180) **OR** ((DBP1 + DBP2)/2) >110)) **AND** BPALERT ≠ (2, 3, 8, 9) If average systolic or diastolic blood pressure is *not* an alert value, then this field should be coded '6 Not an alert reading.' If this code is not selected for participants who do not have an alert value, the validation tool will flag this field as an error. *Error:* (((SBP1 + SBP2)/2) ≤180) **OR** ((DBP1 + DBP2)/2) ≤110)) **AND** BPALERT ≠ 6 If first systolic and diastolic blood pressure measurements were not obtained, blood pressure workup status should be coded '7 No blood pressure value recorded.' If this code is not selected for participants who have no valid blood pressure measurements, the validation tool will flag this field as an error. *Error:* SBP1 = 777, 888, or 999 **AND** DBP1 = 777, 888, or 999 **AND** BPALERT ≠ 7 If average systolic or diastolic blood pressure is an alert value, then the blood pressure workup status should be obtained. If the alert participant is coded as '8 Client refused workup' or '9 Workup not completed, client lost to follow-up', the validation tool will flag this field as an error. For participants with these values, programs should submit a written explanation related to efforts to ensure timely referral. The error may be overwritten if acceptable documentation is submitted. See Appendix B for procedures for submitting this information. *Error:* (((SBP1 + SBP2)/2) >180) **OR** ((DBP1 + DBP2)/2) >110)) **AND** BPALERT = (8, 9) ***Additional edits*** See related cross edit for item 13b: BPDiDate.	

Part B: Screening and Assessment MDE Specifications

Item 13b: BPDiDate	**If Average SBP >180 or DBP >110, Diagnostic Exam Date** This variable indicates the diagnostic exam date for a participant with an alert blood pressure reading.			
FORMAT	**Type:**	Numeric	**Justification:**	Right
	Length:	8	**Beginning Position:**	160
	Leading Zeros:	Yes	**Valid Range:**	Valid date; must be blank if BPAlert = 6 or 7; cannot be blank if BPAlert = 2, 3, 8, or 9
	Other Format:	MMDDCCYY		
DENOMINATOR POPULATION	Participants who have an alert blood pressure value are included in the denominator. A participant is a woman who receives at least one NBCCEDP service (enrolled in NBCCEDP); has received all the following screenings from the WISEWOMAN Program: height, weight, first blood pressure diastolic measurement, and first blood pressure systolic measurement; and has responded to at least one health history question. (For items 5a-8b, there must be at least one response that is not coded as '7 Don't know,' '8 Don't want to answer,' or '9 No answer recorded.')			
VALUES AND DESCRIPTION	**Blood Pressure Diagnostic Exam Date**	Valid date in MMDDCCYY format If follow-up information is provided for this referral, the follow-up diagnostic exam date can be entered Example: September 10, 2011 = 09102011		
ANALYSIS AND USE	To assess whether providers are performing timely diagnostic exams for participants with alert blood pressure values To determine whether programs are meeting the guideline of diagnostic exams within one week of the workup for alert participants To assist in calculating performance measure #6: Program provides evidence that 100% of women who have an alert screening value are seen by a health care provider within one week of screening (or documentation reflects why this did not happen)			
OTHER INFORMATION	***Guidance*** A participant is classified as having an alert blood pressure reading if the average of her two systolic blood pressure readings (10b: SBP1 and 10d: SBP2) is greater than 180 mm Hg or the average of her two diastolic blood pressure readings (10c: DBP1 and 10e: DBP2) is greater than 110 mm Hg. If a second blood pressure was not taken, then the first reading should be used to determine whether a participant has an alert value. Only participants who are coded as having an alert blood pressure reading (13a: BPAlert = '2 Workup complete,' '3 Workup not medically indicated, client being treated' '8 Client refused workup,' or '9 Workup not completed, client lost to follow-up') can have a blood pressure diagnostic exam date. If a participant with an alert blood pressure value has a blood pressure workup status (13a: BPAlert) coded as ''2 Workup complete,' this field must be completed with the date of the diagnostic exam. If a participant with an alert blood pressure value has a blood pressure workup status (13a: BPAlert) coded as ''3 Workup not medically indicated, client being treated,' and the program is unable to obtain the date of her diagnostic exam, this field may be left blank provided that acceptable documentation is submitted. See Appendix B for procedures for submitting this information. If a participant with an alert blood pressure value has a blood pressure workup status (13a: BPAlert) coded as '8 Client refused workup,' this field should contain the date of refusal as defined by program protocol. If a participant with an alert blood pressure value has a blood pressure workup status (13a: BPAlert) coded as '9 Workup not completed, client lost to follow-up,' this field should contain the date that the program considered the participant lost to follow-up as defined by program protocol ***Cross edits***			

For participants with an alert blood pressure value who received a complete workup, the diagnostic exam date should be on or after the blood pressure measurement date. Otherwise, this field will be flagged as an error. The error may be overwritten if acceptable documentation is submitted. See Appendix B for procedures for submitting this information.

Error: ((((SBP1 + SBP2)/2) >180) **OR** ((DBP1 + DBP2)/2) >110) **AND** BPALERT = 2 **AND** BPDIDATE = [valid date] **AND** BPDATE = [valid date] **AND** BPDIDATE < BPDATE

A blood pressure diagnostic exam date should not be recorded if average systolic or diastolic blood pressure is not an alert value. If a blood pressure diagnostic exam date is recorded for a participant who does not have an alert blood pressure value, this field will be flagged as an error.

Error: ((((SBP1 + SBP2)/2) ≤180) **OR** ((DBP1 + DBP2)/2) ≤110) **AND** BPDIDATE = [valid date]

A blood pressure diagnostic exam date should be recorded only if first systolic or diastolic blood pressure was obtained. If a date is recorded when first systolic or diastolic blood pressure was not obtained, the validation tool will flag this field as an error.

Error: SBP1 = 777, 888, or 999 **AND** DBP1 = 777, 888, or 999 **AND** BPDIDATE = [valid date]

For participants with an alert blood pressure value who received a complete workup, a blood pressure diagnostic exam date should not be more than seven days later than the blood pressure measurement date. If the diagnostic exam date is more than seven days after the date that blood pressure measurements were taken, the validation tool will flag this field as an error. The error may be overwritten if acceptable documentation is submitted. See Appendix B for procedures for submitting this information.

Error: ((((SBP1 + SBP2)/2) >180) **OR** ((DBP1 + DBP2)/2) >110) **AND** BPALERT = 2 **AND** BPDIDATE = [valid date] **AND** BPDATE = [valid date] **AND** BPDIDATE - BPDATE >7

A blood pressure diagnostic exam date should be recorded for participants with an alert blood pressure value when a workup is not medically indicated because the participant is being treated. This date should not be more than seven days after the blood pressure measurement date. If the blood pressure diagnostic exam date is missing or is more than seven days after the blood pressure measurement date, the validation tool will flag this field as an error. The error may be overwritten if acceptable documentation is submitted. See Appendix B for procedures for submitting this information.

Error: ((((SBP1 + SBP2)/2) >180) **OR** ((DBP1 + DBP2)/2) >110) **AND** BPALERT = 3 **AND** (BPDIDATE = [valid date] **AND** BPDATE = [valid date] **AND** ((BPDIDATE - BPDATE >7) **OR** BPDIDATE = .)

Part B: Screening and Assessment MDE Specifications

Item 13d: TCAlert	**If TOTCHOL >400, what is the status of the workup?** This variable indicates the status of a participant's cholesterol workup.			
FORMAT	**Type:**	Numeric	**Justification:**	Right
	Length:	1	**Beginning Position:**	169
	Leading Zeros:	No	**Valid Range:**	See values; cannot be blank
	Other Format:	N/A		
DENOMINATOR POPULATION	The denominator includes all WISEWOMAN participants. A participant is a woman who receives at least one NBCCEDP service (enrolled in NBCCEDP); has received all the following screenings from the WISEWOMAN Program: height, weight, first blood pressure diastolic measurement, and first blood pressure systolic measurement; and has responded to at least one health history question. (For items 5a-8b, there must be at least one response that is not coded as '7 Don't know,' '8 Don't want to answer,' or '9 No answer recorded.')			

VALUES AND DESCRIPTION		
	1 Workup pending	Workup has been scheduled but not yet performed This value is to be used only for internal program tracking purposes and would not be appropriate for submission to CDC If a workup has not been completed after three months, it should be coded as '8 Client refused workup' or '9 Workup not completed, client lost to follow-up' as appropriate The validation tool will flag this value as an error
	2 Workup complete	Workup for participant with alert cholesterol reading is complete For participants with this value who were not seen within seven days of their cholesterol measurement (11a: TCDate), programs should submit a written explanation related to efforts to ensure timely referral. See Appendix B for procedures for submitting this information
	3 Workup not medically indicated, client being treated	Workup is not indicated for participant with an alert cholesterol reading, because participant is already being treated and prefers to see the treating provider For participants with this value, programs should submit a written explanation related to efforts to ensure timely referral. See Appendix B for procedures for submitting this information
	6 Not an alert reading	Participant did not have an alert cholesterol reading
	7 No total cholesterol value recorded	Participant did not have a valid cholesterol reading
	8 Client refused workup	Participant had an alert cholesterol reading but refused workup For alert participants with this value, programs should submit a written explanation related to efforts to ensure timely referral. See cross edits in the Other Information Section below

	9 Workup not completed, client lost to follow-up	Participant had an alert cholesterol reading but was lost to follow-up, and workup was not completed. *Lost to follow-up* is defined as a participant who did not attend her scheduled workup within three months after a screening visit and could not be reached to reschedule another appointment For alert participants with this value, programs should submit a written explanation related to efforts to ensure timely referral. See cross edits in the Other Information Section below The validation tool will flag this value as an error, but the error may be overwritten if acceptable documentation is submitted
ANALYSIS AND USE	To assess whether participants with alert cholesterol readings are receiving follow-up	
OTHER INFORMATION	***Guidance*** Codes and response options highlighted in gray should not appear on the data collection forms completed by the provider. They are provided for funded program use only. A participant is classified as having an alert cholesterol reading if her total cholesterol is greater than 400 mg/dL. ***Cross edits*** If total cholesterol is an alert value, then this field should not be recorded as a non-alert value. If a participant with an alert value is recorded as having a non-alert value, the validation tool will flag this field as an error. *Error:* TOTCHOL >400 **AND** TCALERT ≠ (2, 3, 8, 9) If total cholesterol is *not* an alert value, then this field should be coded '6 Not an alert reading.' If this code is not selected for participants who do not have an alert value, the validation tool will flag this field as an error. *Error:* TOTCHOL ≤400 **AND** TCALERT ≠ 6 If a total cholesterol measurement is not obtained, cholesterol workup status should be coded '7 No total cholesterol value recorded.' If this code is not selected for participants who do not have a valid total cholesterol value, the validation tool will flag this field as an error. *Error:* TOTCHOL = 777, 888, or 999 **AND** TCALERT ≠ 7 If total cholesterol is an alert value, then the cholesterol workup status should be obtained. If the alert participant is coded as '8 Client refused workup' or '9 Workup not completed, client lost to follow-up', the validation tool will flag this field as an error. For participants with these values, programs should submit a written explanation related to efforts to ensure timely referral. The error may be overwritten if acceptable documentation is submitted. See Appendix B for procedures for submitting this information. *Error:* TOTCHOL >400 **AND** TCALERT = (8, 9) ***Additional edits*** See related cross edits for item 13e: TCDiDate.	

Part B: Screening and Assessment MDE Specifications

Item 13e: TCDiDate	**If TOTCHOL >400, Diagnostic Exam Date** This variable indicates the diagnostic exam date for a participant with an alert cholesterol reading.			
FORMAT	**Type:**	Numeric	**Justification:**	Right
	Length:	8	**Beginning Position:**	170
	Leading Zeros:	Yes	**Valid Range:**	Valid date; must be blank if TCAlert = 6 or 7; cannot be blank if TCAlert = 2, 3, 8, or 9
	Other Format:	MMDDCCYY		
DENOMINATOR POPULATION	Participants who have an alert cholesterol value are included in the denominator. A participant is a woman who receives at least one NBCCEDP service (enrolled in NBCCEDP); has received all the following screenings from the WISEWOMAN Program: height, weight, first blood pressure diastolic measurement, and first blood pressure systolic measurement; and has responded to at least one health history question. (For items 5a-8b, there must be at least one response that is not coded as '7 Don't know,' '8 Don't want to answer,' or '9 No answer recorded.')			
VALUES AND DESCRIPTION	**Cholesterol Diagnostic Exam Date**	Valid date in MMDDCCYY format If follow-up information is provided for this referral, the follow-up diagnostic exam date can be entered Example: September 10, 2011 = 09102011		
ANALYSIS AND USE	To assess whether providers are performing timely diagnostic exams for participants with alert cholesterol values To determine whether programs are meeting the guideline of diagnostic exams within one week of the workup for alert participants To assist in calculating performance measure #6: Program provides evidence that 100% of women who have an alert screening value are seen by a health care provider within one week of screening (or documentation reflects why this did not happen)			
OTHER INFORMATION	***Guidance*** A participant is classified as having an alert cholesterol reading if her total cholesterol is greater than 400 mg/dL. Only participants who are coded as having an alert total cholesterol reading (13d: TCAlert = '2 Workup complete,' '3 Workup not medically indicated, client being treated' '8 Client refused workup,' or '9 Workup not completed, client lost to follow-up') can have a total cholesterol diagnostic exam date. If a participant with an alert cholesterol value has a cholesterol workup status (13d: TCAlert) coded as ''2 Workup complete,' this field must be completed with the date of the diagnostic exam. If a participant with an alert total cholesterol value has a total cholesterol workup status (13d: TCAlert) coded as ''3 Workup not medically indicated, client being treated,' and the program is unable to obtain the date of her diagnostic exam, this field may be left blank provided that acceptable documentation is submitted. See Appendix B for procedures for submitting this information. If a participant with an alert total cholesterol value has a total cholesterol workup status (13d: TCAlert) coded as '8 Client refused workup,' this field should contain the date of refusal as defined by program protocol. If a participant with an alert total cholesterol value has a total cholesterol workup status (13d: TCAlert) coded as '9 Workup not completed, client lost to follow-up,' this field should contain the date that the program considered the participant lost to follow-up as defined by program protocol. ***Cross edits*** For participants with an alert total cholesterol value who received a complete workup, the diagnostic exam date should be on or after the cholesterol measurement date. Otherwise, this field will be flagged as an error. The error may be overwritten if acceptable documentation is submitted. See			

Appendix B for procedures for submitting this information.

Error: TOTCHOL >400 **AND** TCALERT = 2 **AND** TCDIDATE = [valid date] **AND** TCDATE = [valid date] **AND** TCDIDATE < TCDATE

A cholesterol diagnostic exam date should not be recorded if total cholesterol is not an alert value. If a cholesterol diagnostic exam date is recorded for a participant who does not have an alert cholesterol value, this field will be flagged as an error.

Error: TOTCHOL ≤400 **AND** TCDIDATE = [valid date]

A cholesterol diagnostic exam date should only be recorded if total cholesterol was obtained. If a date is recorded when total cholesterol was not obtained, the validation tool will flag this field as an error.

Error: TOTCHOL = 777, 888, or 999 **AND** TCDIDATE = [valid date]

For participants with an alert total cholesterol value who received a complete workup, a cholesterol diagnostic exam date should not be more than seven days later than the cholesterol measurement date. If the diagnostic exam date is more than seven days after the date that cholesterol measurements were taken, the validation tool will flag this field as an error. The error may be overwritten if acceptable documentation is submitted. See Appendix B for procedures for submitting this information.

Error: TOTCHOL >400 **AND** TCALERT = 2 **AND** TCDIDATE = [valid date] **AND** TCDATE = [valid date] **AND** TCDIDATE - TCDATE >7

A cholesterol diagnostic exam date should be recorded for participants with an alert total cholesterol value when a workup is not medically indicated because the participant is being treated. This date should not be more than seven days after the cholesterol measurement date. If the cholesterol diagnostic exam date is missing or is more than seven days after the cholesterol measurement date, the validation tool will flag this field as an error. The error may be overwritten if acceptable documentation is submitted. See Appendix B for procedures for submitting this information.

Error: TOTCHOL >400 **AND** TCALERT = 3 **AND** TCDIDATE = [valid date] **AND** TCDATE = [valid date] **AND** ((TCDIDATE - TCDATE >7) **OR** TCDIDATE = .)

Part B: Screening and Assessment MDE Specifications

Item 13g: BGAlert	**If GLUCOSE ≤50 or GLUCOSE ≥275, what is the status of the workup?** This variable indicates the status of a participant's blood glucose workup.			
FORMAT	**Type:**	Numeric	**Justification:**	Right
	Length:	1	**Beginning Position:**	179
	Leading Zeros:	No	**Valid Range:**	See values; cannot be blank
	Other Format:	N/A		
DENOMINATOR POPULATION	The denominator includes all WISEWOMAN participants. A participant is a woman who receives at least one NBCCEDP service (enrolled in NBCCEDP); has received all the following screenings from the WISEWOMAN Program: height, weight, first blood pressure diastolic measurement, and first blood pressure systolic measurement; and has responded to at least one health history question. (For items 5a-8b, there must be at least one response that is not coded as '7 Don't know,' '8 Don't want to answer,' or '9 No answer recorded.')			

VALUES AND DESCRIPTION		
	1 Workup pending	Workup has been scheduled, but not yet performed This value should be used only for internal program tracking purposes and would not be appropriate for submission to CDC If a workup has not been completed after three months, it should be coded as '8 Client refused workup' or '9 Workup not completed, client lost to follow-up' as appropriate The validation tool will flag this value as an error
	2 Workup complete	Workup for participant with an alert glucose reading is complete For participants with this value who were not seen within seven days of their glucose measurement (12a: BGDate), programs should submit a written explanation related to efforts to ensure timely referral. See Appendix B for procedures for submitting this information
	3 Workup not medically indicated, client being treated	Workup is not indicated for participant with an alert glucose reading, because participant is already being treated and prefers to see the treating provider For participants with this value, programs should submit a written explanation related to efforts to ensure timely referral. See Appendix B for procedures for submitting this information
	6 Not an alert reading	Participant does not have an alert glucose reading
	7 No blood glucose value recorded	Participant does not have a valid glucose reading
	8 Client refused workup	Participant had an alert glucose reading but refused workup For alert participants with this value, programs should submit a written explanation related to efforts to ensure timely referral

	9 Workup not completed, client lost to follow-up	Participant had an alert glucose reading but was lost to follow-up, and workup was not completed *Lost to follow-up* is defined as a participant who did not attend her scheduled workup within three months after a screening visit and was unable to be reached to reschedule another appointment For alert participants with this value, programs should submit a written explanation related to efforts to ensure timely referral. See cross edits in the Other Information Section below The validation tool will flag this value as an error, but the error may be overwritten if acceptable documentation is submitted
ANALYSIS AND USE	To assess whether participants with alert blood glucose readings are receiving follow-up	
OTHER INFORMATION	***Guidance*** Codes and response options highlighted in gray should not appear on the data collection forms completed by the provider. They are provided for funded program use only. A participant is classified as having an alert blood glucose reading if her blood glucose is less than or equal to 50 mg/dL or greater than or equal to 275 mg/dL. ***Cross edits*** If Glucose is an alert value, then this field should not be recorded as a non-alert value. If a participant with an alert value is recorded as a non-alert value, the validation tool will flag this field as an error. *Error:* (GLUCOSE ≤50 **OR** GLUCOSE ≥275) **AND** BGALERT ≠ (2, 3, 8, 9) If Glucose is not an alert value, then this field should be coded '6 Not an alert reading.' If this code is not selected for participants who do not have an alert value, the validation tool will flag this field as an error. *Error:* 50< GLUCOSE <275 **AND** BGALERT ≠ 6 If a glucose measurement is not obtained, glucose workup status should be coded '7 No blood glucose value recorded.' If this code is not selected for participants who do not have a glucose measurement, the validation tool will flag this field as an error. *Error:* GLUCOSE = 666, 700, 777, 800, 888, or 999 **AND** BGALERT ≠ 7 If Glucose is an alert value, then the glucose workup status should be obtained. If the alert participant is coded as '8 Client refused workup' or '9 Workup not completed, client lost to follow-up', the validation tool will flag this field as an error. For participants with these values, programs should submit a written explanation related to efforts to ensure timely referral. The error may be overwritten if acceptable documentation is submitted. See Appendix B for procedures for submitting this information. *Error:* (GLUCOSE ≤50 **OR** GLUCOSE ≥275) **AND** BGALERT = (8, 9) ***Additional edits*** See related cross edits for item 13h: BGDiDate.	

Part B: Screening and Assessment MDE Specifications

Item 13h: BGDiDate	**If GLUCOSE ≤50 or GLUCOSE ≥275, Diagnostic Exam Date** This variable indicates the diagnostic exam date for a participant with an alert blood glucose reading.			
FORMAT	**Type:**	Numeric	**Justification:**	Right
	Length:	8	**Beginning Position:**	180
	Leading Zeros:	Yes	**Valid Range:**	Valid date; must be blank if BGAlert = 6 or 7; cannot be blank if BGAlert = 2, 3, 8, or 9
	Other Format:	MMDDCCYY		
DENOMINATOR POPULATION	Participants who have an alert blood pressure value are included in the denominator. A participant is a woman who receives at least one NBCCEDP service (enrolled in NBCCEDP); has received all the following screenings from the WISEWOMAN Program: height, weight, first blood pressure diastolic measurement, and first blood pressure systolic measurement; and has responded to at least one health history question. (For items 5a-8b, there must be at least one response that is not coded as '7 Don't know,' '8 Don't want to answer,' or '9 No answer recorded.')			
VALUES AND DESCRIPTION	**Blood glucose diagnostic exam date**	Valid date in MMDDCCYY format If follow-up information is provided for this referral, the follow-up diagnostic exam date can be entered Example: September 10, 2011 = 09102011		
ANALYSIS AND USE	To determine whether programs are meeting the guideline of diagnostic exams within one week of the workup for alert participants To assist in calculating performance measure #6: Program provides evidence that 100% of women who have an alert screening value are seen by a health care provider within one week of screening (or documentation reflects why this did not happen)			
OTHER INFORMATION	***Guidance*** A participant is classified as having an alert blood glucose reading if her blood glucose is less than or equal to 50 mg/dL or greater than or equal to 275 mg/dL. Only participants who are coded as having an alert blood glucose reading (13g: BGAlert = '2 Workup complete,' '3 Workup not medically indicated, client being treated' '8 Client refused workup,' or '9 Workup not completed, client lost to follow-up') should have a blood glucose diagnostic exam date. If a participant with an alert blood glucose value has a blood glucose workup status (13g: BGAlert) coded as ''3 Workup not medically indicated, client being treated,' and the program is unable to obtain the date of her diagnostic exam, this field may be left blank provided that acceptable documentation is submitted. See Appendix B for procedures for submitting this information. If a participant with an alert blood glucose value has a blood glucose workup status (13g: BGAlert) coded as '8 Client refused workup,' this field should contain the date of refusal as defined by program protocol. If a participant with an alert blood glucose value has a blood glucose workup status (13g: BGAlert) coded as '9 Workup not completed, client lost to follow-up,' this field should contain the date that the program considered the participant lost to follow-up as defined by program protocol. ***Cross edits*** For participants with an alert glucose value who received a complete workup, the diagnostic exam date should be on or after the glucose measurement date. Otherwise, this field will be flagged as an error. The error may be overwritten if acceptable documentation is submitted. See Appendix B for procedures for submitting this information. *Error:* (GLUCOSE ≤50 **OR** GLUCOSE ≥275) **AND** BGDIDATE = [valid date] **AND** BGDATE = [valid date] **AND** BGDIDATE < BGDATE **AND** BGALERT = 2 A glucose diagnostic exam date should not be recorded if blood glucose is not an alert value. If a glucose diagnostic exam date is recorded for a participant who does not have an alert glucose			

value, this field will be flagged as an error.

Error: (50< GLUCOSE <275) **AND** BGDIDATE = [valid date]

A glucose diagnostic exam date should only be recorded if blood glucose was obtained. If a date is recorded when blood glucose was not obtained, the validation tool will flag this field as an error.

Error: GLUCOSE = 666, 700, 777, 800, 888, or 999 **AND** BGDIDATE = [valid date]

For participants with an alert glucose value who received a complete workup, a glucose diagnostic exam date should not be more than seven days later than the glucose measurement date. If the diagnostic exam date is more than seven days after the date that glucose measurements were taken, the validation tool will flag this field as an error. The error may be overwritten if acceptable documentation is submitted. See Appendix B for procedures for submitting this information.

Error: (GLUCOSE ≤50 **OR** GLUCOSE ≥275) **AND** BGDIDATE = [valid date] **AND** BGDATE = [valid date] **AND** BGDIDATE - BGDATE >7 **AND** BGALERT = 2

A glucose diagnostic exam date should be recorded for participants with an alert glucose value when a workup is not medically indicated because the participant is being treated. This date should not be more than seven days after the glucose measurement date. If the glucose diagnostic exam date is missing or is more than seven days after the glucose measurement date, the validation tool will flag this field as an error. The error may be overwritten if acceptable documentation is submitted. See Appendix B for procedures for submitting this information.

Error: (GLUCOSE ≤50 **OR** GLUCOSE ≥275) **AND** BGALERT = 3 **AND** (BGDIDATE = [valid date] **AND** BGDATE = [valid date] **AND** BGDIDATE - BGDATE >7) **OR** BGDIDATE = .