OMB #: 0925-0593 OMB Expiration Date: 8/31/2014 Bioelectrical Impedance Analysis Instrument, Phase 2g OMB Specification



## **Bioelectrical Impedance Analysis Instrument**

Event Category:	Time-Based
Event:	48M, 60M
Administration:	N/A
Instrument Target:	Child
Instrument Respondent:	Primary Caregiver
Domain:	Physical Measures
Document Category:	Physical Measures
Method:	Data Collector Administered
Mode (for this instrument*):	In-Person, CAI
OMB Approved Modes:	In-Person, CAI
Estimated Administration Time:	7 minutes
Multiple Child/Sibling Consideration:	Per Child
Special Considerations:	N/A
Version:	1.0
MDES Release:	4.0

<sup>\*</sup>This instrument is OMB-approved for multi-mode but this version of the instrument is designed for administration in this/these mode(s) only.

Public reporting burden for this collection of information is estimated to average 7 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to: NIH, Project Clearance Branch, 6705 Rockledge Drive, MSC 7974, Bethesda, MD 20892-7974, ATTN: PRA (0925-0593\*). Do not return the completed form to this address.

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# **Bioelectrical Impedance Analysis Instrument**

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## **Bioelectrical Impedance Analysis Instrument**

## **GENERAL PROGRAMMER INSTRUCTIONS:**

WHEN PROGRAMMING INSTRUMENTS, VALIDATE FIELD LENGTHS AND TYPES AGAINST THE MDES TO ENSURE DATA COLLECTION RESPONSES DO NOT EXCEED THOSE OF THE MDES. SOME GENERAL ITEM LIMITS USED ARE AS FOLLOWS:

DATA ELEMENT FIELDS	MAXIMUM CHARACTE RS PERMITTED	DATA TYPE	PROGRAMMER INSTRUCTIONS
ADDRESS AND EMAIL FIELDS	100	CHARACTER	
UNIT AND PHONE FIELDS	10	CHARACTER	
_OTH AND COMMENT FIELDS	255	CHARACTER	Limit text to 255 characters
FIRST NAME AND LAST NAME	30	CHARACTER	Limit text to 30 characters
ALL ID FIELDS	36	CHARACTER	
ZIP CODE	5	NUMERIC	
ZIP CODE LAST FOUR	4	NUMERIC	
CITY	50	CHARACTER	
DOB AND ALL OTHER DATE FIELDS (E.G., DT, DATE, ETC.)	10	NUMERIC CHARACTER	DISPLAY AS MM/DD/YYYY     STORE AS YYYY-MM-DD     HARD EDITS:     MM MUST EQUAL 01 TO 12     DD MUST EQUAL 01 TO 31     YYYY MUST BE BETWEEN 1900     AND CURRENT YEAR.
TIME VARIABLES	TWO-DIGIT HOUR AND TWO-DIGIT MINUTE, AM/PM DESIGNATI ON	NUMERIC	HARD EDITS:     HOURS MUST BE BETWEEN 00 AND 12;     MINUTES MUST BE BETWEEN 00 AND 59

## **Instrument Guidelines for Participant and Respondent IDs:**

PRENATALLY, THE  $\mathbf{P}_{-}\mathbf{ID}$  IN THE MDES HEADER IS THAT OF THE PARTICIPANT (E.G. THE NON-PREGNANT WOMAN, PREGNANT WOMAN, OR THE FATHER).

POSTNATALLY, A RESPONDENT ID WILL BE USED IN ADDITION TO THE PARTICIPANT ID BECAUSE SOMEBODY OTHER THAN THE PARTICIPANT MAY BE COMPLETING THE INTERVIEW. FOR EXAMPLE, THE PARTICIPANT MAY BE THE CHILD AND THE RESPONDENT MAY BE THE MOTHER, FATHER, OR ANOTHER CAREGIVER.

THEREFORE, MDES VERSION 2.2 AND ALL FUTURE VERSIONS CONTAIN A **R\_P\_ID** (RESPONDENT PARTICIPANT ID) HEADER FIELD FOR EACH POST-BIRTH INSTRUMENT. THIS WILL ALLOW ROCS TO INDICATE WHETHER THE RESPONDENT IS SOMEBODY OTHER THAN THE PARTICIPANT ABOUT WHOM THE QUESTIONS ARE BEING ASKED.

## A REMINDER:

ALL RESPONDENTS MUST BE CONSENTED AND HAVE RECORDS IN THE PERSON, PARTICIPANT, PARTICIPANT\_CONSENT AND LINK\_PERSON\_PARTICIPANT TABLES, WHICH CAN BE PRELOADED INTO EACH INSTRUMENT. ADDITIONALLY, IN POST-BIRTH QUESTIONNAIRES WHERE THERE IS THE ABILITY TO LOOP THROUGH A SET OF QUESTIONS FOR MULTIPLE CHILDREN, IT IS IMPORTANT TO CAPTURE AND STORE THE CORRECT CHILD **P\_ID** ALONG WITH THE LOOP INFORMATION. IN THE MDES VARIABLE LABEL/DEFINITION COLUMN, THIS IS INDICATED AS FOLLOWS: **EXTERNAL IDENTIFIER: PARTICIPANT ID FOR CHILD DETAIL.** 

#### **BIA EXCLUSIONS**

## (TIME STAMP BE ST).

## PROGRAMMER INSTRUCTIONS

- INSERT DATE/TIME STAMP.
- PRELOAD PARTICIPANT ID (P\_ID) FOR CHILD AND RESPONDENT ID (R\_P\_ID)
  FOR ADULT CAREGIVER.
   PRELOAD FIRST NAME OF CHILD (C\_FNAME), CHILD\_SEX, AND
  CHILD\_DOB FROM INSTRUMENT\_ID = XX (PARTICIPANT VERIFICATION,
  SCHEDULING, & TRACING QUESTIONNAIRE)
- IF C\_FNAME ≠ -1 OR -2, DISPLAY APPROPRIATE NAME IN "C\_FNAME" THROUGHOUT THE INSTRUMENT.
- OTHERWISE, IF **C\_FNAME** = -1 OR -2, DISPLAY "the child" IN APPROPRIATE FIELDS THROUGHOUT THE INSTRUMENT.
- IF CHILD\_SEX = 1, DISPLAY "his" IN APPROPRIATE FIELDS THROUGHOUT INSTRUMENT.
- IF **CHILD\_SEX** = 2, DISPLAY "her" IN APPROPRIATE FIELDS THROUGHOUT INSTRUMENT.
- PRELOAD AN\_CONV\_STAND\_HEIGHT FROM INSTRUMENT\_ID = XX (ANTHROPOMETRY INSTRUMENT).

## BE01000/(BIA\_INTRO).

### **DATA COLLECTOR INSTRUCTIONS**

- EXPLAIN THE BIA PROTOCOL TO THE ADULT CAREGIVER.
- IF THE ADULT CAREGIVER REFUSES THE MEASUREMENTS, SELECT REFUSED.
- OTHERWISE, SELECT CONTINUE.

Label	Code	Go To
CONTINUE	1	BIA_AMPUT
REFUSED	-1	

**BE02000/(BIA\_REF\_REASON).** I am sorry that you have chosen not to participate in this activity. Can you please tell me why?

## **DATA COLLECTOR INSTRUCTIONS**

• SELECT ALL THAT APPLY.

Label	Code	Go To
CONCERN ABOUT	1	
DISCOMFORT		
CHILD SICK	2	
CHILD TIRED/UNHAPPY	3	
OTHER	-5	
NONE GIVEN	-7	
REFUSED	-1	

Label	Code	Go То
DON'T KNOW	-2	

#### SOURCE

National Children's Study, Vanguard Phase (Child Anthropometry)

## **PARTICIPANT INSTRUCTIONS**

- IF **BIA\_REF\_REASON** = -7, -1 OR -2, DO NOT ALLOW SELECTION OF OTHER RESPONSES AND GO TO **BE06000**.
- IF BIA REF REASON = ANY COMBINATION OF 1-3, GO TO BE06000.
- IF **BIA\_REF\_REASON** = -5 OR ANY COMBINATION OF 1-3 AND -5, GO TO **BIA REF REASON OTH**.

BE03000/(BIA\_REF\_REASON\_OTH). SPECIFY:

Label	Code	Go To
REFUSED	-1	
DON'T KNOW	-2	

#### SOURCE

National Children's Study, Vanguard Phase (Child Anthropometry)

**BE06000.** That's fine. Thank you for your time.

### PROGRAMMER INSTRUCTIONS

• GO TO TIME\_STAMP\_BDC\_ET.

**BE07000/(BIA\_AMPUT).** Does {C\_FNAME/the child} have any amputations of his or her legs and feet other than toes?

Label	Code	Go To
YES	1	BDC15000
NO	2	
REFUSED	-1	BDC15000
DON'T KNOW	-2	BDC15000

#### SOURCE

National Health and Nutrition Examination Study (NHANES). Body Composition Procedures Manual. January, 2006. (modified)

**BE08000/(BIA\_PACEMAKER).** Does {C\_FNAME/the child} have a pacemaker or automatic defibrillator?

Label	Code	Go To
YES	1	BDC15000
NO	2	
REFUSED	-1	BDC15000
DON'T KNOW	-2	BDC15000

#### SOURCE

National Health and Nutrition Examination Study (NHANES). Body Composition Procedures Manual. January, 2006. (modified)

**BE09000/(BIA\_ART\_JOINTS).** Does {C\_FNAME/the child} have artificial joints, pins, plates, or other types of metal objects in his or her body?

Label	Code	Go To
YES	1	BDC15000
NO	2	
REFUSED	-1	BDC15000
DON'T KNOW	-2	BDC15000

#### SOURCE

National Health and Nutrition Examination Study (NHANES). Body Composition Procedures Manual. January, 2006. (modified)

**BE10000/(BIA\_CORONARY\_STENTS).** Does {C\_FNAME/the child} have coronary stents or metal sutures in his or her body?

Label	Code	Go To
YES	1	BDC15000
NO	2	
REFUSED	-1	BDC15000
DON'T KNOW	-2	BDC15000

#### SOURCE

National Health and Nutrition Examination Study (NHANES). Body Composition Procedures Manual. January, 2006. (modified)

**BE11000/(BIA\_DIARRHEA).** Has {C\_FNAME/the child} had diarrhea or the stomach flu in the past 2 days (48 hours)?

Label	Code	Go To
YES	1	BDC15000
NO	2	
REFUSED	-1	BDC15000
DON'T KNOW	-2	BDC15000

#### SOURCE

Dittmar M. Reliability and Variability of Bioimpedance Measures in Normal Adults: Effects of Age, Gender, and Body Mass. American Journal of Physical Anthropology; 122 (4): 361-370, 2003. (modified)

BE12000/(BIA\_URINATE). CHILD URINATED?

## **DATA COLLECTOR INSTRUCTIONS**

• INSTRUCT THE CHILD TO USE THE BATHROOM.

### **DATA COLLECTOR INSTRUCTIONS**

INSTRUCT THE ADULT CAREGIVER TO ASSIST THE CHILD AS NEEDED.

Label	Code	Go To
YES	1	
NO	2	BDC15000

## BE13000/(BIA\_REMOVE\_METAL). REMOVED JEWELRY?

## **DATA COLLECTOR INSTRUCTIONS**

- HAVE THE CHILD REMOVE ALL JEWELRY, EYEGLASSES, HAIR ORNAMENTS, AND OTHER METAL OBJECTS FROM THEIR HAIR AND BODY.
- PER PROTOCOL, THIS WOULD INTERFERE WITH DATA QUALITY.

Label	Code	Go To
YES	1	
NO	2	BDC15000

#### SOURCE

National Health And Nutrition Examination Survey 2003-04 (modified)

## BE14000/(BIA\_SHOES). REMOVED SHOES & SOCKS?

## **DATA COLLECTOR INSTRUCTIONS**

• INSTRUCT THE ADULT CAREGIVER TO ASSIST THE CHILD IN REMOVING {HIS/HER} SHOES AND SOCKS.

Label	Code	Go To
YES	1	
NO	2	BDC15000

## BE15000/(BIA\_CLEAN\_FEET). CLEANED FEET?

## **DATA COLLECTOR INSTRUCTIONS**

 CLEAN THE CHILD'S FEET WITH SOAP AND WATER OR AN ALCOHOL-FREE WIPE, OR INSTRUCT THE ADULT CAREGIVER TO ASSIST THE CHILD IN CLEANING {HIS/HER} FEET WITH SOAP AND WATER OR WITH AN ALCOHOL-FREE WIPE.

Label	Code	Go To
YES	1	
NO	2	BDC15000

## (TIME\_STAMP\_BE\_ET).

## PROGRAMMER INSTRUCTIONS

• INSERT DATE/TIME STAMP.

## DATA INPUT FOR BIA EQUIPMENT

(TIME STAMP DI ST).

(·····=• · · ···· · · /-		
PROGRAMMER INSTRUCTIO	NS	
INSERT DATE/TIME ST	TAMP.	
DI01000/(BIA_EQUIP_ID). REG	CORD EQUIPMENT ID.	
_  _  _   EQUIPMENT SERIAL NUMBEI	_     R	
Label	Code	Go To
COULD NOT OBTAIN	-8	
DATA COLLECTOR INSTRUC		
<ul> <li>SCAN BIA EQUIPMENT</li> <li>IF THE BARCODE SCANUMBER.</li> </ul>	Г BARCODE. NNER IS NOT WORKING, MAI	NUALLY ENTER THE SERIAL
PROGRAMMER INSTRUCTIO		
• FORMAT <b>BIA_EQUIP</b> _I 0 #########	ID AS ONE OF THE FOLLOWIN	NG:
o #######		
DI02000/(BIA_AN_STAND_HE	EIGHT). STANDING HEIGHT:	
_,    FEET, INCHES		
DATA COLLECTOR INSTRUC	TIONS	
<ul> <li>RECORD STANDING F MEASUREMENT FROM</li> </ul>	HEIGHT THAT IS ENTERED IN M ANTHROPOMETRY)	ГО BIA MONITOR. (USE
Label	Code	Go To
CHILD UNABLE TO STAND	-7	
EXCEEDS CAPACITY	-9	

Label	Code	Go To
CHILD UNABLE TO STAND	-7	
EXCEEDS CAPACITY	-9	
REFUSED	-1	
COULD NOT OBTAIN	-8	

## PROGRAMMER INSTRUCTIONS

IF VALID MEASURE CALCULATED FOR **AN\_CONV\_STAND\_HEIGHT**, CREATE DERIVED VARIABLE BIA\_AN\_STAND\_HEIGHT BY CONVERTING AN CONV STAND HEIGHT TO FEET AND INCHES WHERE HEIGHT IN FEET = [AN\_CONV\_STAND\_HEIGHT / 12]. MULTIPLY THE DECIMAL FRACTION BY 12 AND ROUND TO NEAREST INCH TO GET BIA\_AN\_STAND\_HEIGHT.

DI03000/(BIA_AGE). CHILD'S AGE
--------------------------------

## **YEARS**

## **DATA COLLECTOR INSTRUCTIONS**

- RECORD CHILD'S AGE THAT WAS ENTERED INTO BIA MONITOR.
- CHILD'S AGE IS {CHILD'S AGE}

Label	Code	Go To
REFUSED	-1	
COULD NOT OBTAIN	-8	

## **PROGRAMMER INSTRUCTIONS**

- USE CHILD\_DOB AND CURRENT DATE TO CALCULATE CHILD'S CURRENT AGE.
- ROUND AGE DOWN TO NEAREST YEAR.
- DISPLAY ROUNDED AGE IN "CHILD'S AGE".

## (TIME\_STAMP\_DI\_ET).

## PROGRAMMER INSTRUCTIONS

• INSERT DATE/TIME STAMP.

## **BIA DATA COLLECTION**

(TIME\_STAMP\_BDC\_ST).

<b>PROGRAM</b>	IMER	INSTRI	ICTIONS
PROGRAM		11123176	<i>J</i> CHON3

INSERT DATE/TIME STAMP.

## BDC01000/(BIA\_WEIGHT1). WEIGHT:

		<u> </u>  .	<u></u>	KILOGRAMS
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## **DATA COLLECTOR INSTRUCTIONS**

- IF UNABLE TO AUTOMATICALLY DOWNLOAD RAW DATA FROM BIA MACHINE TO COMPUTER, CAPTURE RAW DATA MANUALLY.
- CHILD DATE OF BIRTH: {BIA\_AGE}.
- CHILD SEX: {CHILD SEX}.
- CHILD HEIGHT: {BIA AN STAND HEIGHT}.
- ENTER INTO THE EQUIPMENT THE 1.0 LBS FOR THE WEIGHT OF THE CHILD'S CLOTHING. SELECT ENTER.
- SELECT THE CHILD'S SEX FROM THE OPTIONS DISPLAYED BY THE EQUIPMENT. SELECT ENTER.
- ENTER THE CHILD'S AGE IN YEARS INTO THE EQUIPMENT. SELECT ENTER.
- ENTER THE CHILD'S HEIGHT IN FEET AND INCHES INTO THE EQUIPMENT. SELECT ENTER.
- PROMPT THE CHILD TO STEP ON THE EQUIPMENT WITH HIS OR HER FEET ALIGNED WITH THE SENSORY PADS.

## PROGRAMMER INSTRUCTIONS

- DISPLAY **BIA AGE**.
- DISPLAY CHILD SEX.
- DISPLAY **BIA\_AN\_STAND\_HEIGHT.**

Label	Code	Go To
REFUSED	-1	
COULD NOT OBTAIN	-8	

## BDC02000/(BIA\_BODY\_FAT\_PERC1). BODY FAT PERCENTAGE:

.   %
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### **DATA COLLECTOR INSTRUCTIONS**

• IF UNABLE TO AUTOMATICALLY DOWNLOAD RAW DATA FROM BIA MACHINE TO COMPUTER, CAPTURE RAW DATA MANUALLY.

Label	Code	Go To
REFUSED	-1	
COULD NOT OBTAIN	-8	

BDC03000/(BIA\_COLLECT1). WERE YOU ABLE TO COLLECT ALL OF THE RAW DATA FROM THE BIA MONITOR?

Label	Code	Go To
YES	1	BIA_COMMENTS1
NO	2	

## BDC04000/(BIA REASON NOT COLLECT1).

## DATA COLLECTOR INSTRUCTIONS

- ENTER REASON(S) YOU COULD NOT OBTAIN BIA MEASUREMENT(S).
- SELECT ALL THAT APPLY.

Label	Code	Go To
ADULT CAREGIVER	1	
REFUSAL		
PARENT/CAREGIVER	2	
UNABLE TO UNDERSTAND		
INSTRUCTIONS OR TASK		
ADULT CAREGIVER	3	
ILL/EMERGENCY		
CHILD ILL/EMERGENCY	4	
NO TIME	5	
EQUIPMENT FAILURE	6	
CONCERNS ABOUT THE	7	
CHILD'S SAFETY		
PHYSICAL LIMITATION OF	8	
THE CHILD		
DATA COLLECTOR ERROR	9	
OTHER	-5	
NONE GIVEN	-7	

## PROGRAMMER INSTRUCTIONS

- IF BIA\_REASON\_NOT\_COLLECT1 = ANY COMBINATION OF 1 10, GO TO BIA\_COMMENTS1.
- IF BIA\_REASON\_NOT\_COLLECT1 = -7 DO NOT ALLOW SELECTION OF OTHER VALUES AND GO TO BIA\_COMMENTS1.
- IF BIA\_REASON\_NOT\_COLLECT1 = -5 OR ANY COMBINATION OF 1-10 AND -5, GO TO BIA\_REASON\_NOT\_COLLECT1\_OTH.

DC05000/(BIA_REASON_NOT_COLLECT1_OTH).	
PECIFY:	

BDC06000/(BIA\_COMMENTS1). DO YOU HAVE ANY COMMENTS ABOUT THE FIRST BIA MEASUREMENT?

Label	Code	<b>Go To</b>
YES	1	
NO	2	BIA WEIGHT2

YES	1	
NO	2	BIA_WEIGHT2
	·	

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BDC07000/(BIA\_COMMENTS1\_OTH).

SPECIFY:

# BDC08000/(BIA\_WEIGHT2). WEIGHT: |\_\_\_|\_\_|. KILOGRAMS

### PROGRAMMER INSTRUCTIONS

- DISPLAY CHILD DOB.
- DISPLAY CHILD SEX.
- DISPLAY AN CONV STAND HEIGHT.

### **DATA COLLECTOR INSTRUCTIONS**

- CHILD DATE OF BIRTH: {BIA\_AGE}.
- CHILD SEX: {CHILD SEX}.
- CHILD HEIGHT: {AN\_STAND\_HEIGHT\_MEAN}.
- IF USING PAPER AND PENCIL INSTRUMENT TO RECORD RESULTS, COPY AN\_CONV\_STANDING\_HEIGHT AND CHILD\_SEX FROM PHYSICAL MEASURES CHILD ANTHROPOMETRY INSTRUMENT.
- ENTER INTO THE EQUIPMENT THE 1.0 LBS FOR THE WEIGHT OF THE CHILD'S CLOTHING. SELECT ENTER.
- SELECT THE CHILD'S SEX FROM THE OPTIONS DISPLAYED BY THE EQUIPMENT. SELECT ENTER.
- ENTER THE CHILD'S AGE IN YEARS INTO THE EQUIPMENT. SELECT ENTER.
- ENTER THE CHILD'S HEIGHT IN FEET AND INCHES INTO THE EQUIPMENT. SELECT ENTER.
- PROMPT THE CHILD TO STEP ON THE EQUIPMENT WITH HIS OR HER FEET ALIGNED WITH THE SENSORY PADS.

Label	Code	Go То
REFUSED	-1	
COULD NOT OBTAIN	-8	

## BDC09000/(BIA\_BODY\_FAT\_PERC2). BODY FAT PERCENTAGE:

|\_\_\_|.|\_\_| %

Label	Code	Go To
REFUSED	-1	
COULD NOT OBTAIN	-8	

#### PROGRAMMER INSTRUCTIONS

- CREATE DERIVED VARIABLE, BIA CALC BMI2, AND CALCULATE BY:
  - O DIVIDING BIA\_WEIGHT2 BY THE PRODUCT OF AN\_CONV\_STAND\_HEIGHT AND AN\_CONV\_STAND\_HEIGHT AND MU LTIPLY THE QUOTIENT BY 703.
- CREATE DERIVED VARIABLE, BIA CALC BMR2, AND CALCULATE BY:
  - o IF CHILD\_SEX = 1 (MALE):
    - CALCULATE THE SUM OF 66, THE PRODUCT OF 6.23
       AND BIA\_WEIGHT2, AND 12.7 TIMES
       THE AN\_CONV\_STANDING\_HEIGHT; SUBTRACT FROM THE SUM 6.8 TIMES THE CHILD\_AGE\_YRS
  - o IF CHILD\_SEX = 2 (FEMALE):
    - CALCULATE THE SUM OF 665, THE PRODUCT OF 4.35

## PROGRAMMER INSTRUCTIONS

AND **BIA\_WEIGHT2**, AND 4.7 TIMES
THE **AN\_CONV\_STANDING\_HEIGHT**; SUBTRACT FROM THE SUM
4.7 TIMES THE **CHILD AGE YRS**.

- CREATE DERIVED VARIABLE, BIA\_CONVERT\_BODY\_FAT2, BY DIVIDING BIA\_BODY\_FAT\_PERC2 BY 100.
- CREATE DERIVED VARIABLE, BIA\_WEIGHT\_FAT\_DIFF2, AND CALCULATE BY TAKING THE DIFFERENCE BETWEEN BIA\_WEIGHT2 AND THE PRODUCT OF BIA\_WEIGHT2 AND BIA\_CONVERT\_BODY\_FAT2.

BDC10000/(BIA\_COLLECT2). WERE YOU ABLE TO COLLECT ALL OF THE RAW DATA FROM THE BIA MONITOR?

Label	Code	Go To
YES	1	BIA_COMMENTS2
NO	2	

BDC11000/(BIA\_REASON\_NOT\_COLLECT2).

### **DATA COLLECTOR INSTRUCTIONS**

- ENTER REASON(S) YOU COULD NOT OBTAIN BIA MEASUREMENT(S).
- SELECT ALL THAT APPLY.

Label	Code	Go To
ADULT CAREGIVER	1	
REFUSAL		
PARENT/CAREGIVER	2	
UNABLE TO UNDERSTAND		
INSTRUCTIONS OR TASK		
ADULT CAREGIVER	3	
ILL/EMERGENCY		
CHILD ILL/EMERGENCY	4	
NO TIME	5	
EQUIPMENT FAILURE	6	
CONCERNS ABOUT THE	7	
CHILD'S SAFETY		
PHYSICAL LIMITATION OF	8	
THE CHILD		
DATA COLLECTOR ERROR	9	
OTHER	-5	
NONE GIVEN	-7	

## PROGRAMMER INSTRUCTIONS

- IF **BIA\_REASON\_NOT\_COLLECT2** = ANY COMBINATION OF 1 10, GO TO **BIA COMMENTS2**.
- IF BIA\_REASON\_NOT\_COLLECT2 = -7 DO NOT ALLOW SELECTION OF OTHER VALUES AND GO TO BIA COMMENTS2.
- IF BIA\_REASON\_NOT\_COLLECT2 = -5 OR ANY COMBINATION OF 1-10 AND -5, GO TO BIA REASON NOT COLLECT2 OTH.

# BDC12000/(BIA\_REASON\_NOT\_COLLECT2\_OTH). SPECIFY: \_\_\_\_\_

BDC13000/(BIA\_COMMENTS2). DO YOU HAVE COMMENTS ABOUT THE SECOND BIA MEASURE?

Label	Code	Go To
YES	1	
NO	2	

#### PROGRAMMER INSTRUCTIONS

- IF **BIA\_COMMENTS2** = 2, GO TO PROGRAMMER INSTRUCTIONS AFTER **BIA COMMENTS2 OTH.**
- OTHERWISE, GO TO BIA\_COMMENTS2\_OTH.

BDC13100/(BIA	_COMMENTS2_OTH).	
SPECIFY:		

### PROGRAMMER INSTRUCTIONS

- IF BIA\_WEIGHT1 ≠ -1 OR -8 AND BIA\_WEIGHT2 ≠ -1 OR -8, THEN CREATE
  DERIVED VARIABLE, BIA\_WEIGHT\_DIFF1, AND CALCULATE
  BIA\_WEIGHT\_DIFF1 BY TAKING THE ABSOLUTE VALUE OF THE DIFFERENCE
  BETWEEN BIA\_WEIGHT1 AND BIA\_WEIGHT2:
  - o IF BIA\_WEIGHT\_DIFF1 > 0.7 LBS, GO TO BIA\_WEIGHT3.
  - o IF BIA WEIGHT DIFF1 < 0.7 LBS. GO TO BDC14000.

BDC13200/(BIA_	WEIGHT3). WEIGHT
	_  KILOGRAMS

### **DATA COLLECTOR INSTRUCTIONS**

- IF UNABLE TO AUTOMATICALLY DOWNLOAD RAW DATA FROM BIA MACHINE TO COMPUTER, CAPTURE RAW DATA MANUALLY.
- CHILD DATE OF BIRTH: {CHILD DOB}.
- CHILD SEX: {CHILD SEX}.
- CHILD HEIGHT: {AN STAND HEIGHT MEAN}.
- ENTER INTO THE EQUIPMENT THE 1.0 LBS FOR THE WEIGHT OF THE CHILD'S CLOTHING. SELECT ENTER.
- SELECT THE CHILD'S SEX FROM THE OPTIONS DISPLAYED BY THE EQUIPMENT. SELECT ENTER.
- ENTER THE CHILD'S AGE IN YEARS INTO THE EQUIPMENT. SELECT ENTER.
- ENTER THE CHILD'S HEIGHT IN FEET AND INCHES INTO THE EQUIPMENT. SELECT ENTER.
- PROMPT THE CHILD TO STEP ON THE EQUIPMENT WITH HIS OR HER FEET ALIGNED WITH THE SENSORY PADS.

### PROGRAMMER INSTRUCTIONS

- DISPLAY CHILD DOB.
- DISPLAY CHILD SEX.
- DISPLAY AN STAND HEIGHT MEAN.

Label	Code	Go To
REFUSED	-1	
COULD NOT OBTAIN	-8	

## BDC13300/(BIA\_BODY\_FAT\_PERC3). BODY FAT PERCENTAGE:

|\_\_\_|.|\_\_|%

Label	Code	Go To
REFUSED	-1	
COULD NOT OBTAIN	-8	

BDC13400/(BIA\_COLLECT3). WERE YOU ABLE TO COLLECT ALL OF THE RAW DATA FROM THE BIA MONITOR?

Label	Code	Go To
YES	1	BIA_COMMENTS3
NO	2	

## BDC13500/(BIA\_REASON\_NOT\_COLLECT3).

## **DATA COLLECTOR INSTRUCTIONS**

- ENTER REASON(S) YOU COULD NOT OBTAIN BIA MEASUREMENT(S).
- SELECT ALL THAT APPLY.

Label	Code	Go To
ADULT CAREGIVER	1	
REFUSAL		
PARENT/CAREGIVER	2	
UNABLE TO UNDERSTAND		
INSTRUCTIONS OR TASK		
ADULT CAREGIVER	3	
ILL/EMERGENCY		
CHILD ILL/EMERGENCY	4	
NO TIME	5	
EQUIPMENT FAILURE	6	
CONCERNS ABOUT THE	7	
CHILD'S SAFETY		
PHYSICAL LIMITATION OF	8	
THE CHILD		
DATA COLLECTOR ERROR	9	
OTHER	-5	
NONE GIVEN	-7	

## PROGRAMMER INSTRUCTIONS

IF **BIA\_REASON\_NOT\_COLLECT3** = ANY COMBINATION OF 1 - 10, GO TO **BIA COMMENTS3.** 

IF **BIA\_REASON\_NOT\_COLLECT3 = -**7 DO NOT ALLOW SELECTION OF OTHER VALUES AND GO TO **BIA COMMENTS3.** 

IF **BIA\_REASON\_NOT\_COLLECT3 = -**5 OR ANY COMBINATION OF 1-10 AND -5, GO TO **BIA\_REASON\_NOT\_COLLECT3\_OTH.** 

# BDC13600/(BIA\_REASON\_NOT\_COLLECT3\_OTH). SPECIFY: \_\_\_\_\_

BDC13700/(BIA\_COMMENTS3). DO YOU HAVE COMMENTS ABOUT THE THIRD BIA MEASUREMENT?

Label	Code	Go To
YES	1	
NO	2	BDC14000

BDC13800/(BIA\_COMMENTS3\_OTH).

**BDC14000.** Thank you for having {C\_FNAME/the child} complete these BIA measures.

## PROGRAMMER INSTRUCTIONS

• GO TO TIME\_STAMP\_BDC\_ET.

**BDC15000.** Thank you for answering these questions.

BDC16000/(CHILD\_EXC\_REASON). ENTER REASON CHILD WAS EXCLUDED FROM BIA MEASUREMENT(S)

## **DATA COLLECTOR INSTRUCTIONS**

ENTER REASON CHILD WAS EXCLUDED FROM BIA MEASUREMENT(S).

Label	Code	Go To
ADULT CAREGIVER	1	TIME_STAMP_BDC_ET
REFUSAL		
LEG OR FOOT	2	TIME_STAMP_BDC_ET
AMPUTATION		
PACEMAKER	3	TIME_STAMP_BDC_ET
ARTIFICIAL JOINTS	4	TIME_STAMP_BDC_ET
CORONARY STENTS	5	TIME_STAMP_BDC_ET
REFUSED TO REMOVE	6	TIME_STAMP_BDC_ET
METAL		
DIARRHEA	7	TIME_STAMP_BDC_ET
REFUSED TO URINATE	8	TIME_STAMP_BDC_ET
REFUSED TO REMOVE	9	TIME_STAMP_BDC_ET
SHOES		
REFUSED TO CLEAN FEET	10	TIME_STAMP_BDC_ET
OTHER	-5	

BDC17000/(CHILD_EXC_REASON_OTH). SPECIFY:	
---	--

(TIME STAMP BDC ET).

## PROGRAMMER INSTRUCTIONS

• INSERT DATE/TIME STAMP.

SPECIFY: