

Supplemental Materials

PPI modules, testing results, analyses, and feedback.

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eTable 1: Criteria for prioritization of survey modules

<u>Measure</u>	<u>Description</u>
<u>Readiness</u>	<u>Is the measure or module near ready to field (e.g., using NHIS¹, may need to tweak slightly)</u>
<u>Scientific Support</u>	<u>Does the data support reliability and validity of measure/module</u>
<u>Harmonized</u>	<u>Is the same question asked in public health surveillance systems (e.g., NHIS¹, NHANES², BRFSS³)</u>
<u>Burden</u>	<u>What is the burden to participants</u>
<u>Scope</u>	<u>What is the scope/impact (is it at a national scale; e.g., obesity, depression, opiate use)</u>
<u>Objective Driven</u>	<u>Does the module fit mission/objective of AoU (biology, lifestyle, environment)</u>
<u>Clustered</u>	<u>Can the module be clustered or paired with other similar self-reported measures (e.g., lifestyle includes diet and physical activity)</u>
<u>Participant Value</u>	<u>What is the value to participants</u>
<u>Scientific Value</u>	<u>What is the value to researchers</u>
<u>Integrated</u>	<u>Can the data be integrated with other non self-reported measures (e.g., measuring physical activity through sensors, DHT, SNAP questions, etc.)</u>

¹NHIS = National Health Interview Survey (CDC)

²NHANES = National Health and Nutrition Examination Survey (CDC)

³BRFSS = Behavioral Risk Factor Surveillance System (CDC)

eTable 24: Feedback from the Program experts in the participant provided information

(PPI) committee and steering committee

Feedback	Impact on PPI Development
All of Us enrollment encompasses many activities including PPI. We need to limit participant burden at the point of enrollment?	Limit modules to 15 minutes to complete, with a small initial set of three.
Where should existing EHR data be used vs	Information deemed essential or unlikely to be

<p>collecting the same information directly from participants?</p>	<p>accurate and/or readily available within the EHR should be collected directly from the participant.</p>
<p>How can we ensure the validity of PPI questions remains intact in the diverse populations <i>All of Us</i> is aiming to enroll? How do we ensure these questions work out in the field?</p>	<p>Focus pilot recruitment for PPI testing from key populations identified as a priority for anticipated <i>All of Us</i> enrollment. Review data from the Program to determine if testing results replicated in the Program.</p>
<p>PPI questions are sourced from existing measures, but there may be similar, more appropriate questions available on a specific topic</p> <p>How do the existing questions compare to questions in other large studies similar in concept to <i>All of Us</i> or how do select which questions to use?</p>	<p>Refer to the instrument metadata database and existing literature to assess the utility of questions based on their previous validation results and populations. Test alternative questions with pilot participants for feedback.</p>
<p>How do we shape PPI modules so that there is a focus on engagement and participant experience?</p>	<p>PPI modules should be seen as an opportunity for participant retention, allowing participants to stay connected to <i>All of Us</i> activities over time. Release PPI modules on a rolling basis in order to develop a culture of long-term engagement.</p>
<p><u>Questions about gender identity and sexual orientation may be too sensitive to ask early in the Program.</u></p>	<p><u>Probed on sensitivity of the questions demonstrating that participants didn't mind answering the questions and some appreciated that they were asked of them.</u></p>

eTable 32: Key quotes and recommendations identified through qualitative testing

Instrument	Item	Sample Quote	Recommendation
Overall Health	In general, how would you rate your satisfaction with your social activities and relationships?	<p>“Social activities, could it be going out with friends? Socializing on Facebook and Instagram because that can tell a lot about a person, because they could have an addiction to it. So, maybe a little bit more clarification on that.”</p>	Provided examples of social activities, and clarify activities other than social media.
	I am able to do things for my health as well as most other people.	<p>I have absolutely no idea what this question means, ‘do things for my health.’ Does that mean make a doctor’s appointment or access my mediport and give myself IV fluids?”</p>	The feedback was that the statement, “do things for my health” is ambiguous and need some examples. Provide examples for, “things.”
	In general, would you say your quality of life is:	<p>“It’s kind of similar to the question about health. An expectation of what quality of life ... You know, what they’re looking for exactly would be helpful, maybe a little bit more specific.”</p>	Participants had difficulty deciphering from the question that preceded this one regarding health. Provide examples of quality of life variables.

The Basics	In the past 7 days, how would you rate your pain on average?	"On this one, I'm confused, only because of the scale. I guess it's 0 level means no pain to 10 is high. That's my assumption. I don't think that the question itself was confusing. I would just put a little verbiage about the scale. ○ 0 ○ 1 ○ 2 ○ 3 ○ 4 ○ 5 ○ 6 ○ 7 ○ 8 ○ 9 ○ 10 ○ Prefer not to answer	Include a legend (0=no pain, 10=worst pain)
	What is your gender identity?	"Intersex I really don't understand that, so I guess that will probably... I don't understand that question at all."	The responses showed that few people felt confident that they understand the meaning of the term intersex. It was suggested to clarify the definition of "intersex."
	What is your annual household income from all sources?	"My initial thought on that particular question is when you're literally thinking about all sources, so I'm	The statement, "from all sources" created a problem for some participants. They were not sure they

d.	\$20,000 to less than \$25,000	assuming money being generated in, so I'm a student, so I get an allowance, so that counts?"	knew all the sources or how to come up with an answer. Be more specific as to what encompasses all sources.
e.	\$25,000 to less than \$35,000		
f.	\$35,000 to less than \$50,000		
g.	\$50,000 to less than \$75,000		
h.	\$75,000 to less than \$100,000		
i.	\$100,000 to less than \$150,000		
j.	\$150,000 to less than \$200,000		
k.	\$200,000 or more		
l.	Prefer not to answer		
The PMI will contact you periodically to gather additional health related information. Please give us the names, addresses, and telephone numbers of 2 relatives or friends who would know where you could be reached in case we have trouble reaching you. (Please give me the names of persons not currently living in the household.)		"Given the nature of PMI, would this lead to any sort of maybe confidentiality or breach of my medical information if I give you? If the two people are not people I would want to share my medical history with, or that kind of thing? Is there a chance for a breach of that?"	There was a lot of sensitivity around giving out contact information for other people. Clarify what exactly the dialogue will be should the PMI contact a participant's relatives or friends.
a.	First person's full name, mailing address, email address, telephone number (with area code), and relationship to participant.		
b.	Second person's full name,		

	<p>mailing address, email address, telephone number (with area code), and relationship to participant</p>		
Lifestyle	<p>What was the longest length of time you stopped smoking because you were trying to quit?</p> <ol style="list-style-type: none"> Less than 1 week 1-2 months 3-11 months 1-4 years 5-9 years 10 years or more 	<p>"The monthly ones are fine. When you get into years. The issue that I see is that the breakdown is a little difficult to ... When you say one to four years, that's a big chunk of time. Might be better to change that up a little bit."</p>	<p>Participants suggested to limit the number of response options, that they prefer more narrow time frames to choose from.</p>
	<p>Thinking of the most recent time you quit smoking, did you use any of the following products:</p> <ol style="list-style-type: none"> Nicotine gum Nicotine patch Nicotine nasal spray, inhaler, lozenge, or tablet, <p>Prescription pill such as Bupropion[©] (Zyban[©], Wellbutrin) or Varenicline (Chantix[©])</p> <ol style="list-style-type: none"> None of these 	<p>"Add a category: E-cigarette or vape"</p>	<p>Consider additional items, such as "total abstinence without using any of the above" and "e-cigarettes/vape."</p>
	<p>In your entire life, have you had at</p>	<p>"Have you had at least 1 "Sips" is subjective</p>	

<p>least 1 drink of any kind of alcohol, not counting small tastes or sips?</p>	<p>standard drink?": - At least 1 standard drink</p>	<p>and needs clarification.</p>
<p>a. Yes</p> <p>b. No</p>	<p>would be a clear qualification, as someone who's worked in food service and has done bartending, I know what a standard drink is, and as someone who is a drinker, who would be aware of how that's done, they would be aware of what a standard drink would be, so yes, that would be a fair clarification."</p>	<p>A "drink" of alcohol needs to be defined and standardized.</p>
<p>How old were you when you first started drinking, not counting small tastes or sips of alcohol?</p>	<p>"Now, I can see people have their first drink becoming their starting</p>	<p>Replace "first started drinking" with, "have your first drink". The former seems to imply</p>
<p>_____ Age</p>	<p>drinking all at one time, but just because I had a wine cooler when I was 14 didn't mean I started drinking if I didn't drink again for 4 years.: - 18, but I'm looking at this question and I'm thinking you should be asking me</p>	<p>regular drinking/drinking habit.</p>

how old was I when I

had my first drink."

eTable 43: PPI Committee approved changes to the PPI questions: prior to (Summer 2016) and after content revisions (Summer 2017)

Overall Health				
Original Source	Question Topic	Approved Changes Prior to Content Revisions (Summer 2016)	Approved Changes After Content Revisions (Summer 2017)	Spanish Approved Changes after Content Revisions (Summer 2017)
BHLS	Health Literacy	Kept questions as is, but re-ordered them so that they appear first in the module.	No changes	Changed wording at beginning of question regarding 'level of assistance reading' to provide more simplistic and common terminology without changing the concept. This change resulted in using "Qué tan frecuente..." to translate " How often..."
Rosenberg Self-Esteem Scale, PROMIS Global Health	Global Health	Added anchor descriptions for questions that include a scale rating. Example, "In the past 7 days, how would you rate your pain on average? (0 = No pain, 10 = Worst pain imaginable). Online testing data showed a left skewed distribution and cognitive interview feedback supported the inclusion of these descriptors.	No changes	No changes specific to Spanish language
		Deleted the words, "activities and" from the question, "In		

general, please rate how well you carry out your usual social activities and roles. Cognitive interview feedback indicated a need to clarify what the question is attempting to capture.

Eliminated the question, "I am able to do things for my health as well as most other people."

Pilot feedback indicated a lack of clarity about the question's meaning. This question was sourced from the Rosenberg Self-Esteem Scale. The revised version of the module included global health questions only sourced from PROMIS.

UK Biobank	Women's Sexual Reproductive Health	Not included in the version of the module tested; added to module after Summer 2016 testing based on expert review and guidance.	Reversed order of the questions so that "Have your menstrual periods stopped permanently?" is asked prior to "Are you currently pregnant." Revised skip logic for this subset of questions based on feedback. Pilot feedback confirmed that these questions were sensitive in nature and "prefer not to answer" response options were needed.	No changes specific to Spanish language
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BS	Organ Transplant	Not included in the version of the module tested; added to module after Summer 2016 testing based on expert review and guidance.	Revised question to provide a "select all that apply" menu of most common organs and tissues, with free text as an option. Organs include: heart, kidney, liver, lung, pancreas, intestine, other: free text. Tissues include: cornea, bone, heart valve, skin, blood vessels, other: free text. Added "Don't know" response option	No changes to the questions. The order of the translated sentences for the interstitial text were reversed to allow smoother fluidity in wording.
BS	International Travel	Not included in the version of the module tested; added to module after Summer 2016 testing based on expert review and guidance.	Added "Don't know" as a response option for this question based on pilot feedback.	No changes specific to Spanish language

Key for Overall Health: BHLS = Brief Health Literacy Screen; BS = Blood Screen Survey; PROMIS Global Health = Patient Reported Outcomes Measurement Information System; UK Biobank = United Kingdom Biobank

Lifestyle

Original Source	Question Topic	Approved Changes Prior to Content Revisions (Summer 2016)	Approved Changes After Content Revisions (Summer 2017)	Spanish Approved Changes after Content Revisions (Summer 2017)
TUS-CPS	Tobacco and Nicotine Use	Added descriptive text, "(There are 20 cigarettes in a pack.)" to the questions that reference a specific number of cigarettes.	No changes	Modified translation for current smoking question for clarity. Final question included 'al dia' instead of 'diarios'.
ATS-DLD-78 MVP, PLCO		For example, "Have you smoked at least 100 cigarettes in your entire life?" Cognitive interview feedback indicated a need for this descriptor.		Modified translation of 'hookah' from its formal translation of 'narguiles' to its more common term 'hookah' in
BRFSS, MVP, PATH				

		Removed questions from this section that seemed repetitive. Pilot feedback and expert review suggested that there were too many smoking questions in the version of the module tested. For example, the question, "When you last smoked fairly regularly, how many cigarettes did you smoke each day?" was removed.	Spanish. Modified translation for 'spit and chewing tobacco' from 'tabaco para chupar' to 'tabaco para chupar o escupir'
		Added the descriptive text, "(Electronic nicotine products include e-cigarettes, vape pens, hookah pens, personal vaporizers and mods, e-cigars, e-pipes, and e-hookahs.)" to the question, "Have you ever used an electronic nicotine product, even one or two times?"	
NESARC, AUDIT-C	Alcohol Consumption	Added the descriptive text, "(By a "drink," we mean a can or bottle of beer, a glass of wine or a wine cooler, a shot of liquor, or a mixed drink with liquor in it.)" to the question, "In your entire life, have you had at least 1 serving of any kind of alcohol, not counting small tastes or sips?"	Rephrased question, "How many drinks containing alcohol did you have on a typical day when you were drinking in the past year," to "On a typical day when you drink, how many drinks do you have?" Pilot feedback indicated that the original wording was confusing to participants.
		Rephrased select questions for added clarity where indicated	Modified translation for 'small tastes or sips' from 'sorbos pequeños' to 'pequeñas probadas' to reflect more simplistic and common Spanish terminology. Modified translation for 'typical day' from dia 'tipico' to 'comun'

as a need in pilot feedback.

For example, the questions

"During the past 30 days,
including today, on how many
days did you drink one or more
drinks of an alcoholic
beverage?" and "About how
old were you when you first
started drinking alcohol, not
counting small tastes or sips?"

were re-worded slightly, but the
concepts were not changed.

NESARC,	Substance	The version of the module	No changes	Modified translation for
NSDUH,	Use	tested included questions from		'Street opioids (heroin, opium, etc.)' from
NM- ASSIST		NESARC and NSDUH. Pilot feedback and expert review indicated that there were too many questions being asked and so the module was revised with a smaller set of questions sourced from NM-ASSIST.		'Opioides callejeros [heroína, opio, etc.]' to 'Opioides obtenidos en la calle [heroína, opio, etc.]' to reflect more simplistic and common Spanish terminology.

Key for Lifestyle: TUS-CPS = Tobacco Use Supplement – Current Population; NM-ASSIST = National Institute on Drug Abuse – Modified Alcohol, Smoking, and Substance Involvement Screening Test; AUDIT-C = Alcohol Use Disorders Identification Test; NESARC = National epidemiologic Survey on Alcohol and Related Conditions; PATH = Population Assessment of Tobacco and Health Study; PLCO = Prostate, Lung, Colorectal, and Ovarian Cancer Screening Trial; ATS-DLD-78 = American Thoracic Society Division of Lung Diseases questionnaire; BRFSS = Behavioral Risk Factor Surveillance System (CDC); MVP = Million Veteran Program; NSDUH = National Survey on Drug Use and Health

The Basics

Original Source	Question Topic	Approved Changes Prior to Content Revisions (Summer 2016)	Approved Changes After Content Revisions (Summer 2017)	Spanish Approved Changes after Content Revisions (Summer
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2017)				
NHANES	Country of Birth	No changes	No changes	No changes specific to Spanish language
NHANES, Census	Race/Ethnicity	The version of the module tested included questions from NHANES. These questions were eventually replaced by questions planned for the U.S. Census 2020 version based on expert review and guidance.	No changes	No changes specific to Spanish language
NHANES, GENUSS, NHIS	Sex, Gender Identity, Sexual Orientation	The version of the module tested included a single question. This section of the module was revised and expanded to include a more extensive set of questions based on expert review and guidance.	No changes	Modified translation from “¿En qué términos se describe mejor su identidad de género?” to “¿Con qué género se identifica mejor?” to reflect clearer sentence structure as well as common Spanish terminology.
BRFSS	Education	No changes	Changed the labeling of grades in the response options as follows, “Grades 5 through 8 (Secondary)” to “Grades 5 through 8 (Middle school);” “College 1 to 3 years (Some college or technical school)” to “1 to 3 years post high school (Some college, Associate degree, or technical school).” Pilot feedback indicated a need to clarify this text.	No changes specific to Spanish language
BRFSS	Household Income	Revised response option ranges for income level. Pilot feedback suggested that	No changes	No changes specific to Spanish language

		participants were overwhelmed by the number of response options listed.		
BRFSS	Active Duty Military	No changes	No changes	No changes specific to Spanish language
BRFSS	Marital Status	No changes	No changes	No changes specific to Spanish language
BRFSS	Household Size	Revised questions to, "How many people live at home with you (not including yourself?" and "How many are under the age of 18 years?" Pilot feedback suggested that the original wording was confusing.	No changes	Modified translation from "Sin incluirse, ¿cuántas personas viven con usted en su casa?" to "Sin contarse, ¿cuántas personas viven con usted en su casa?" to reflect simplistic and common Spanish terminology.
NHANES	Health Insurance	No changes	No changes	Modified translation of 'health insurance' from 'seguro de salud' to 'seguro medico' to better reflect common Spanish terminology to community members.
BRFSS	Employment Status	Added, "(part-time or full-time" as a descriptor to the response option, "Employed for wages" for the question "What is your current employment status?	No changes	Modified translation for 'employment status' from 'situacion laboral' to 'situacion de trabajo' to reflect simplistic and common Spanish terminology.
BRFSS, NHCHC, UK Biobank, VA	Living Situation	Revised response options for "How many years have you lived at your current address?" so that responses were	Revised "Do you own or rent your home?" to "Do you own or rent the place where you live?" -Shortened the last question to,	Modified translation for 'rent' from 'rentada' to 'alquilada[rentada]' to reflect simplistic and

Homelessn ess	selected in ranges. For example, "less than a year," "1- 2 years," etc.	"In the past 6 months, have you been worried or concerned about NOT having a place to live?"	common Spanish terminology.
Clinical Reminder		Pilot feedback indicated that these revisions would be easier to understand.	
NHANES	Follow-up Contact Information	Revised section to include clarifying text. Pilot testing confirmed that participants need a clear explanation of why they are being asked for this information in order to feel comfortable giving it.	No changes No changes specific to Spanish language
Key for The Basics: BRFSS = Behavioral Risk Factor Surveillance System (CDC); GenIUSS = Gender Identity in U.S. Surveillance; NHANES = National Health and Nutrition Examination Survey, CDC (http://www.cdc.gov/nchs/nhanes.htm); NHIS = National Health Interview Survey (http://www.cdc.gov/nchs/nhis.htm); UK Bio = United Kingdom Biobank; NHCHC = National Health Care for the Homeless; VA Homelessness Screening Clinical Reminder; United States 2020 Census (draft version)			

eTable 54. Overall Health: rotated component matrix^a

	Component		
	Physical	Emotional	Health literacy
To what extent are you able to carry out your everyday physical activities such as walking, climbing stairs, carrying groceries, or moving a chair: completely, mostly, moderately, a little, not at all, prefer not to answer	.876		
In general, how would you rate your physical health: excellent, very good, good, fair, poor, prefer not to answer	.876	.117	
In general, would you say your health is: excellent, very good, good, fair, poor, prefer not to answer	.874	.116	
In general, please rate how well you carry out your usual social activities and roles (this includes activities at home, at work and in your community, and responsibilities as a parent, child, spouse, employee, friend, etc.): excellent, very good, good, fair, poor, prefer not to answer	.745	.382	-.198
In general, would you say your quality of life is: excellent, very good, good, fair, poor, prefer not to answer	.717	.449	-.112
In the past 7 days, how would you rate your pain on average? Please rate your pain from 0 (no pain) to 10 (worst pain imaginable) 0-10, prefer not to answer	-.696	-.120	
In the past 7 days, how would you rate your fatigue on average: none, mild, moderate, severe, very severe, prefer not to answer	-.612	-.165	.373
I am able to do things for my health as well as most other people: strongly agree, agree, neither agree nor disagree, disagree, strongly disagree, prefer not to answer	.598	.255	-.302

In the past 7 days, how often have you been bothered by emotional problems such as feeling anxious, depressed, or irritable: never, rarely, sometimes, often, always, prefer not to answer		.834	-.162
In general, how would you rate your mental health, including your mood and your ability to think: excellent, very good, good, fair, poor, prefer not to answer	.262	.832	
In general, how would you rate your satisfaction with your social activities and relationships: excellent, very good, good, fair, poor, prefer not to answer	.264	.768	
How often do you have someone help you read health-related materials: always, often, sometimes, occasionally, never, prefer not to answer		.175	.755
How often do you have problems learning about your medical condition because of difficulty understanding written information: always, often, sometimes, occasionally, never, prefer not to answer	-.137		.748
How confident are you filling out medical forms by yourself: extremely, quite a bit, somewhat, a little bit, not at all, prefer not to answer	.115	.308	-.586
Extraction Method: Principal Component Analysis.			
Rotation Method: Varimax with Kaiser Normalization.			
a. Rotation converged in 4 iterations.			

eDocument 1. The Basics (English). The PPI#### is the identifier for the question or response. Branching logic signifies where certain responses would lead to additional questions and other responses would allow participants to skip those additional questions. Italicized text indicates text between questions.

This survey asks questions about you, your work, and your home life. This is to better understand how they may affect health. To ensure your privacy, your name will be separated from your answers before they are shared with researchers.

It takes about 10-15 minutes to answer these questions. Please answer each question as honestly as possible. There are no right or wrong answers to any of the questions. It is important that you answer as many questions as you can. We are looking for your own answers, and not what you think your doctors, family, or friends want you to say.

Don't feel like you have to spend a long time on each question. The first answer that comes to you is usually the best one. If you aren't sure how to answer a question, choose the best answer from the options given.

The first 9 questions ask about basic background information.

PPI1586135. In what country were you born?¹

- **PPI1586136 USA**
- **PPI1586137 Other (free text)**

PPI1586140. Which categories describe you? Select all that apply. Note, you may select more than one group.²

- **PPI1586141 American Indian or Alaska Native (For example: Aztec, Blackfeet Tribe, Mayan, Navajo Nation, Native Village of Barrow (Utqiagvik) Inupiat Traditional Government, Nome Eskimo Community, etc.)**

PPI1586150 Branching Logic if "American Indian or Alaska Native", display the following:

- **PPI1585600** American Indian
 - *Branching Logic if selected:* Provide the name of the tribe in which you are enrolled or affiliated or your tribal descent (For example: Aztec, Blackfeet Tribe, Mayan, Navajo Nation, Native Village of Barrow (Utqiagvik) Inupiat Traditional Government, Nome Eskimo Community, etc.)
 - Free text
- **PPI1585601** Alaska Native
 - *Branching Logic if selected:* Provide the name of the tribe in which you are enrolled or affiliated or your tribal descent (For example: Aztec, Blackfeet Tribe, Mayan, Navajo Nation, Native Village of Barrow (Utqiagvik) Inupiat Traditional Government, Nome Eskimo Community, etc.)
 - Free text
- **PPI1585602** Central or South American Indian
 - *Branching Logic if selected:* Provide the name of the tribe in which you are enrolled or affiliated or your tribal descent (For example: Aztec, Blackfeet Tribe, Mayan, Navajo Nation, Native Village of Barrow (Utqiagvik) Inupiat Traditional Government, Nome Eskimo Community, etc.)
 - Free text
- **PPI1585603** None of these fully describe me (**PPI1585604** optional free text)
- **PPI1586142 Asian** (For example: Asian Indian, Chinese, Filipino, Japanese, Korean, Vietnamese, etc.)

Branching Logic if “Asian”, display the following:

- **PPI1585609** Asian Indian
 - **PPI1585605** Cambodian
 - **PPI1585606** Chinese
 - **PPI1585607** Filipino
 - **PPI1585608** Hmong
 - **PPI1585613** Japanese
 - **PPI1585612** Korean
 - **PPI1585610** Pakistani
 - **PPI1585611** Vietnamese
 - **PPI1585614** None of these fully describe me (**PPI1585615** optional free text)
- **PPI1586152 Black, African American, or African** (For example: African American, Ethiopian, Haitian, Jamaican, Nigerian, Somali, etc.)
Branching Logic if “Black, African American, or African”, display the following:
 - **PPI1585621** African American
 - **PPI1585616** Barbadian
 - **PPI1585617** Caribbean
 - **PPI1585625** Ethiopian
 - **PPI1585626** Ghanaian
 - **PPI1585623** Haitian
 - **PPI1585622** Jamaican
 - **PPI1585618** Liberian
 - **PPI1585624** Nigerian
 - **PPI1585619** Somali
 - **PPI1585620** South African
 - **PPI1585627** None of these fully describe me (**PPI1585628** optional free text)

- **PPI1586156 Hispanic, Latino, or Spanish** (For example: Colombian, Cuban, Dominican, Mexican or Mexican American, Puerto Rican, Salvadoran, etc.)

Branching Logic if “Hispanic, Latino, or Spanish”, display the following:

- **PPI1586090** Colombian
- **PPI1586086** Cuban
- **PPI1586087** Dominican
- **PPI1586091** Ecuadorian
- **PPI1586088** Honduran
- **PPI1585345** Mexican or Mexican American
- **PPI1585346** Puerto Rican
- **PPI1586089** Salvadoran
- **PPI1585336** Spanish
- **PPI1586093** None of these fully describe me (**PPI1585835** optional free text)

- **PPI1586153 Middle Eastern or North African** (For example: Algerian, Egyptian, Iranian, Lebanese, Moroccan, Syrian, etc.)

Branching Logic if “Middle Eastern or North African”, display the following:

- **PPI1585837** Afghan
- **PPI1585836** Algerian
- **PPI1585316** Egyptian
- **PPI1585633** Iranian
- **PPI1585630** Iraqi
- **PPI1585631** Israeli
- **PPI1585629** Lebanese
- **PPI1585318** Moroccan
- **PPI1585317** Syrian

- **PPI1585632** Tunisian
 - **PPI1585319** None of these fully describe me (**PPI1585320** optional free text)
- **PPI1586154 Native Hawaiian or other Pacific Islander** (For example: Chamorro, Fijian, Marshallese, Native Hawaiian, Tongan, etc.)
Branching Logic if “Native Hawaiian or other Pacific Islander”, display the following:
 - **PPI1585326** Chamorro
 - **PPI1585323** Chuukese
 - **PPI1585328** Fijian
 - **PPI1585329** Marshallese
 - **PPI1585321** Native Hawaiian
 - **PPI1585324** Palauan
 - **PPI1585322** Samoan
 - **PPI1585325** Tahitian
 - **PPI1585327** Tongan
 - **PPI1585330** None of these fully describe me (**PPI1585331** optional free text)
- **PPI1586155 White** (For example: English, European, French, German, Irish, Italian, Polish, etc.)
Branching Logic if “White”, display the following:
 - **PPI1585333** Dutch
 - **PPI1585339** English
 - **PPI1585337** European
 - **PPI1585342** French
 - **PPI1585332** German
 - **PPI1585338** Irish
 - **PPI1585340** Italian

Branching Logic if “White”, display the following:

- **PPI1585333** Dutch
- **PPI1585339** English
- **PPI1585337** European
- **PPI1585342** French
- **PPI1585332** German
- **PPI1585338** Irish
- **PPI1585340** Italian

- **PPI1585334** Norwegian
 - **PPI1585341** Polish
 - **PPI1585335** Scottish
 - **PPI1585336** Spanish
 - **PPI1585343** None of these fully describe me (**PPI1585344** optional free text)
- **PPI1586148** None of these fully describe me (**PPI1586149** optional free text answer)
- Prefer not to Answer

PPI1585845 What was your biological sex assigned at birth?³

- **PPI1585847** Female
- **PPI1585846** Male
- **PPI1585848** Intersex
- **PPI1585849** None of these describe me (**PPI1585850** optional free text)
- Prefer not to answer

PPI1585838 What terms best express how you describe your gender identity? (Check all that apply)³

- **PPI1585839** Man
- **PPI1585840** Woman
- **PPI1585841** Non-binary

Branching logic: If non-binary is selected, display the following:

PPI1585348. Are any of these a closer description to your gender identity?³

- **PPI1585350** Trans man/Transgender Man/FTM
- **PPI1585349** Trans woman/Transgender Woman/MTF
- **PPI1585351** Genderqueer

- **PPI1585352** Genderfluid
 - **PPI1585353** Gender variant
 - **PPI1585354** Questioning or unsure of your gender identity
 - **PPI1585355** None of these describe me, and I want to specify
- **PPI1585842** Transgender

Branching logic: If the transgender is selected, display:

PPI1585348. Are any of these a closer description to your gender identity?³

- **PPI1585350** Trans man/Transgender Man/FTM
 - **PPI1585349** Trans woman/Transgender Woman/MTF
 - **PPI1585351** Genderqueer
 - **PPI1585352** Genderfluid
 - **PPI1585353** Gender variant
 - **PPI1585354** Questioning or unsure of your gender identity
 - **PPI1585355** None of these describe me, and I want to specify
- **PPI1585843** None of these describe me, and I'd like to consider additional options

Branching logic: If "none of these describe me, and I'd like to consider additional options" is selected, display:

PPI1585348. Are any of these a closer description to your gender identity?³

- **PPI1585350** Trans man/Transgender Man/FTM
 - **PPI1585349** Trans woman/Transgender Woman/MTF
 - **PPI1585351** Genderqueer
 - **PPI1585352** Genderfluid
 - **PPI1585353** Gender variant
 - **PPI1585354** Questioning or unsure of your gender identity
 - **PPI1585355** None of these describe me, and I want to specify

- Prefer not to answer

PPI1585899 Which of the following best represents how you think of yourself.⁴

- **PPI1585901** Gay
- **PPI1585902** Lesbian
- **PPI1585900** Straight; that is, not gay or lesbian, etc.
- **PPI1585903** Bisexual
- **PPI1585904** None of these describe me, and I'd like to see additional options

Branching logic: If the above is selected, display:

PPI1585357 Are any of these a closer description of how you think of yourself?⁵

- **PPI1585358** Queer
 - **PPI1585359** Polysexual, omnisexual, sapiosexual or pansexual
 - **PPI1585360** Asexual
 - **PPI1585361** Two---spirit
 - **PPI1585362** Have not figured out or are in the process of figuring out your sexuality
 - **PPI1585363** Mostly straight, but sometimes attracted to people of your own sex
 - **PPI1585364** Do not think of yourself as having sexuality
 - **PPI1585365** Do not use labels to identify yourself
 - **PPI1585368** Don't know the answer
 - **PPI1585366** No, I mean something else (**PPI1585367** optional free text)
- Prefer not to answer

PPI1585940 What is the highest grade or year of school you completed?⁵

- **PPI1585941** Never attended school or only attended kindergarten
- **PPI1585942** Grades 1 through 4 (Primary)
- **PPI1585943** Grades 5 through 8 (Middle school)
- **PPI1585944** Grades 9 through 11 (Some high school)
- **PPI1585945** Grade 12 or GED (High school graduate)
- **PPI1585946** 1 to 3 years after high school (Some college, Associate's degree, or technical school)
- **PPI1585947** College 4 years or more (College graduate)
- **PPI1585948** Advanced degree (Master's, Doctorate, etc.)
- Prefer not to answer

PPI1585852 Have you ever served on active duty in the United States Armed forces, either in the regular military or in a National Guard or military reserve unit?

Note: Active duty does not include training for the Reserves or National Guard, but DOES include activation, for example, for the Persian Gulf War⁵

- **PPI1585853** Yes
- **PPI1585854** No
- Prefer not to answer

PPI1585892 What is your current marital status?⁵

- **PPI1585893** Married
- **PPI1585894** Divorced
- **PPI1585895** Widowed
- **PPI1585896** Separated

- **PPI1585897** Never married
- **PPI1585898** Living with partner
- Prefer not to answer

The next 2 questions ask about any people who live with you.

PPI1585889 Not including yourself, how many other people live at home with you? ⁵

- Free text (Integer value)

PPI1585889 Think of other people who live with you. How many are under the age of 18 years?¹

- Free text (Integer value)

The next questions are about health insurance. Include health insurance obtained through employment or purchased directly as well as government Programs like Medicare and Medicaid that provide medical care or help pay medical bills.

PPI1585386 Are you covered by health insurance or some other kind of health care plan?¹

- **PPI1585387** Yes
- **PPI1585388** No
- Don't know
- Prefer not to answer

Branching logic, if yes:

PPI43528428 Are you currently covered by any of the following types of health insurance or health coverage plans? Select all that apply from one group.²

- **PPI43529119** Insurance purchased directly from an insurance company (by you or another family member)

- **PPI43529120** Insurance through a current or former employer or union (by you or another family member)
- **PPI43529210** Medicare, for people 65 and older or people with certain disabilities
- **PPI43529209** Medicaid, Medical Assistance, or any kind of government-assistance plan for those with low incomes or disability
- **PPI43529920** TRICARE or other military health care
- **PPI43529926** Veterans Affairs (VA) (including those who have ever used or enrolled for VA health care)
- **PPI43529111** Indian Health Service
- **PPI43528423** Any other type of health insurance or health coverage plan

Branching logic: If above is selected:

- **PPI43529654** Please specify:[FREE TEXT]
- **PPI43529095** I don't have health insurance, self-pay

The next questions are about your job, income, and where you live.

PPI1585952 What is your current employment status? Please select 1 or more of these categories.⁵

- **PPI1585953** Employed for wages (part--- time or full---time)

Branching logic, if employed for wages or self-employed:

Sharing where you work may help us learn about how the environment affects health. Sharing your work address is your choice. You can say no and still take part in the Program.

- **PPI1585961** What is your work street address?
 - **PPI1585962** Address Line 1
 - **PPI1585963** Address Line 2 (optional)

- **PPI1585964** City
 - **PPI1585965** State
 - **PPI1585966** Zip code
 - **PPI1585967** Country
 - Prefer not to answer
- **PPI1585954** Self---employed

Branching logic, if DSS5a=employed for wages:

Sharing where you work may help us learn about how the environment affects health. Sharing your work address is your choice. You can say no and still take part in the Program.

- **PPI1585961** What is your work street address?
 - **PPI1585962** Address Line 1
 - **PPI1585963** Address Line 2 (optional)
 - **PPI1585964** City
 - **PPI1585965** State
 - **PPI1585966** Zip code
 - **PPI1585967** Country
 - Prefer not to answer
- **PPI1585955** Out of work for 1 year or more
- **PPI1585956** Out of work for less than 1 year
- **PPI1585957** A homemaker
- **PPI1585958** A student
- **PPI1585959** Retired

- **PPI1585960** Unable to work (disabled)
- Prefer not to answer

One of the things we're trying to understand is how people's income may affect their use of health services. Household income includes your income plus the income of all family members in your household for the last calendar year. Include all wages and other sources of income.

PPI1585375 What is your annual household income from all sources?⁵

- **PPI1585376** Less than \$10,000
- **PPI1585377** \$10,000--- \$24,999
- **PPI1585378** \$25,000--- \$34,999
- **PPI1585379** \$35,000--- \$49,999
- **PPI1585380** \$50,000--- \$74,999
- **PPI1585381** \$75,000---\$99,999
- **PPI1585382** \$100,000--- \$149,999
- **PPI1585383** \$150,000--- \$199,999
- **PPI1585384** \$200,000 or more
- Prefer not to answer

PPI1585370 Do you own or rent the place where you live?⁷

- **PPI1585371** Own
- **PPI1585372** Rent
- **PPI1585373** Other arrangement

Branching logic, if “other engagement”

PPI1585402 Where are you currently living?⁷

- **PPI1585403** On a college campus
 - **PPI1585404** With a friend/roommate
 - **PPI1585405** With family
 - **PPI1585406** Motel/hotel
 - **PPI1585407** Hospital, rehabilitation center, drug treatment center, or other temporary institution
 - **PPI1585874** In a group home, nursing home, or other residential facility
 - **PPI1585875** Transitional housing
 - **PPI1585876** Emergency shelter or homeless shelter
 - **PPI1585874** Anywhere outside (e.g., street, vehicle, abandoned building)
 - **PPI1585878** Other (free text)
- Prefer not to answer

PPI1585879 How many years have you lived at your current address?⁸

- **PPI1585880** Less than 1 year
- **PPI1585881** 1---2 years
- **PPI1585882** 3---5 years
- **PPI1585883** 6---10 years
- **PPI1585884** 11---20 years
- **PPI1585885** More than 20 years

The next question is about stress that you may feel about money.

PPI1585886 In the past 6 months, have you been worried or concerned about NOT having a place to live?⁹

- **PPI1585887** Yes

- PPI1585888 No

If you have a Social Security Number, sharing it with us may help add extra data to the All of Us database. This extra data may come from places like your health care provider or pharmacy.

Sharing your Social Security Number is your choice. You can say no and still take part in the Program.

PPI1585950. What is your Social Security Number?⁶

To help us stay in touch with you in the future, the last section asks for contact information for family and/or friends. This information is not required in order to participate in the Program. All information will be securely stored.

PPI1585906 The All of Us Research Program contact you periodically to gather additional health related information. In case we cannot contact you, please provide the names, addresses, and telephone numbers of 2 relatives or friends who would know where you could be reached in case we have trouble reaching you. (Please give us the names of persons not currently living in the household)¹

- PPI1585907 Person 1 first name
- PPI1585908 Person 1 middle initial
- PPI1585909 Person 1 last name
- PPI1585910 Person 1 address 1
- PPI1585911 Person 1 address 2
- PPI1585912 Person 1 city
- PPI1585913 Person 1 State,
- PPI1585914 Person 1 zip code).
- PPI1585915 Person 1 email address

- **PPI1585916** Person 1 phone number (allow none refused or don't know)
- **PPI1585917** Relationship to you
 - **1585918** Child
 - **1585919** Friend
 - **1585920** Parent/guardian
 - **1585921** Relative
 - **1585922** Spouse/partner
- **PPI1585923** Person 2 first name
- **PPI1585924** Person 2 middle initial
- **PPI1585925** Person 2 last name
- **PPI1585926** Person 2 address line 1
- **PPI1585927** Person 2 address line 2
- **PPI1585928** Person 2 city
- **PPI1585929** Person 2 state
- **PPI1585930** Person 2 zip code
- **PPI1585931** Person 2 email address
- **PPI1585932** Person 2 phone number (allow none refused or don't know)
- **PPI1585933** Relationship to you
 - **1585934** Child
 - **1585935** Friend
 - **1585936** Parent/guardian

- **1585937** Relative
- **1585938** Spouse/partner

The information you have shared may contribute to helping researchers improve the health of generations to come.

Sources

1. NHANES - National Health and Nutrition Examination Survey (NHANES)
2. U.S. 2020 Census (2015 Draft)
3. GenIUSS group (Gender Identity in U.S. Surveillance)
4. National Health Interview Survey (NHIS)
5. Behavioral Risk Factor Surveillance System (BRFSS)
6. Developed for use in All of Us
7. National Health Care for the Homeless Council
8. UK Biobank
9. VA Homelessness Screening Clinical Reminder

eDocument 2. Los Básicos (Spanish)

Esta encuesta le hace preguntas sobre usted, su trabajo y su vida familiar. Esta información nos sirve para comprender mejor como estos aspectos pueden afectar su salud. Para asegurar su privacidad, su nombre se separará de sus respuestas antes de compartirlas con los investigadores.

Responder a las siguientes preguntas le tomará como 10-15 minutos. Por favor responda cada pregunta lo más honesto posible. Para cualquiera de estas preguntas no hay respuestas correctas o incorrectas. Es importante que responda a todas las preguntas que pueda. Estamos buscando sus propias respuestas, y no lo que piensan sus doctores, familiares, o amigos.

No sienta que tiene que tomar mucho tiempo para cada pregunta. La primera respuesta que se le ocurre es usualmente la mejor. Si no está seguro(a) como responder la pregunta, escoja la mejor respuesta de las opciones presentadas.

Las primeras 9 preguntas son sobre su información básica.

PPI1586135. ¿En qué país nació usted?¹

- **PPI1586136** Estados Unidos
- **PPI1586137** Otro país

PPI1586140. ¿Qué categorías lo o la describen? Marque todas las respuestas que correspondan. Nota: puede seleccionar más de un grupo.²

- **PPI1586141** Indio Americano o Nativo de Alaska (por ejemplo, Navajo Nation, Blackfeet Tribe, Maya, Azteca, Native Village of Barrow Inupiat, Nome Eskimo Community, etc)

PPI1586150 Branching Logic if “Indio americano o nativo de Alaska”, display the following:

- **PPI1585600** Indio americano
 - *If selected, display:* Provea el nombre de la tribu en la cual usted está registrado o afiliado o su origen tribal (por ejemplo, Navajo Nation, Blackfeet Tribe, maya, azteca, Native Village of Barrow Inupiat, Nome Eskimo Community, etc.)
 - Free text: escriba tribu u origen tribal
- **PPI1585601** Nativo de Alaska
 - *If selected, display:* Provea el nombre de la tribu en la cual usted está registrado o afiliado o su origen tribal (por ejemplo, Navajo Nation, Blackfeet Tribe, maya, azteca, Native Village of Barrow Inupiat, Nome Eskimo Community, etc.)
 - Free text: escriba tribu u origen tribal
- **PPI1585602** Indio centroamericano o sudamericano
 - *If selected, display:* Provea el nombre de la tribu en la cual usted está registrado o afiliado o su origen tribal (por ejemplo, Navajo Nation, Blackfeet Tribe, maya, azteca, Native Village of Barrow Inupiat, Nome Eskimo Community, etc.)
 - Free text: escriba tribu u origen tribal
- **PPI1585603** Ninguna de estas me describe completamente
 - **PPI1585604** ingrese otra raza u origen étnico
- **PPI1586142** Asiático (por ejemplo, Chino, Filipino, Indio Asiático, Vietnamita, Coreano, Japonés, etc.)

Branching Logic if “Asiático”, display the following:

- **PPI1585609** Indio asiático
- **PPI1585605** Camboyano
- **PPI1585606** Chino

- **PPI1585607** Filipino
- **PPI1585608** Hmong
- **PPI1585613** Japonés
- **PPI1585612** Coreano
- **PPI1585610** Pakistaní
- **PPI1585611** Vietnamita
- **PPI1585614** Ninguna de estas me describe completamente (**PPI1585615** Free text: ingrese otra raza u origen étnico)
- **PPI1586152** Negro, Africano, o Afroamericano (por ejemplo, Africano Americano, Jamaiquino, Haitiano, Nigeriano, Etíope, Somalí, etc.)

Branching Logic if “Negro o afroamericano”, display the following:

- **PPI1585621** Afroamericano
- **PPI1585616** Barbadeño
- **PPI1585617** Caribe
- **PPI1585625** Etíope
- **PPI1585626** Ghanés
- **PPI1585623** Haitiano
- **PPI1585622** Jamaiquino
- **PPI1585618** Liberiano
- **PPI1585624** Nigeriano
- **PPI1585619** Somalí
- **PPI1585620** Sudafricano
- **PPI1585627** Ninguna de estas me describe completamente (**PPI1585628** Free text: ingrese otra raza u origen étnico)
- **PPI1586156** Hispano, Latino o Español (por ejemplo, Mexicano, Mexican Americano, Puertorriqueño, Cubano, Salvadoreño, Dominicano, Colombiano, etc.)

Branching Logic if “Hispano, Latino o de origen Español”, display the following:

- **PPI1586090** Colombiano
 - **PPI1586086** Cubano
 - **PPI1586087** Dominicano
 - **PPI1586091** Ecuatoriano
 - **PPI1586088** Hondureño
 - **PPI1585345** Mexicano o mexicano americano
 - **PPI1585346** Puertorriqueño
 - **PPI1586089** Salvadoreño
 - **PPI1585336** Español
 - **PPI1586093** Ninguna de estas me describe completamente (**PPI1585835** texto libre: ingrese otra raza u origen étnico)
- **PPI1586153** Del Medio Oriente o del Norte de África (por ejemplo, Libanés, Iraní, Egipcio, Sirio, Marroquí, Argelino, etc.)
 - **PPI1585837** Afgano
 - **PPI1585836** Argelino
 - **PPI1585316** Egipcio
 - **PPI1585633** Iraní
 - **PPI1585630** Iraquí
 - **PPI1585631** Israelita
 - **PPI1585629** Libanés
 - **PPI1585318** Marroquí
 - **PPI1585317** Sirio
 - **PPI1585632** Tunecino
 - **PPI1585319** Ninguna de estas me describe completamente (**PPI1585320** texto libre: ingrese otra raza u origen étnico)

- **PPI1586154** Nativo de Hawái o de otras Islas del Pacífico (por ejemplo, Nativo Hawaiano, Samoano, Chamorro, Tongano, Fiyiano, Marshalés, etc.)
 - **PPI1585326** Chamorro
 - **PPI1585323** Chuukese
 - **PPI1585328** Fiyiano
 - **PPI1585329** Marshalés
 - **PPI1585321** Nativo de Hawái
 - **PPI1585324** Palauano
 - **PPI1585322** Samoano
 - **PPI1585325** Tahitiano
 - **PPI1585327** Tongano
 - **PPI1585330** Ninguna de estas me describe completamente (**PPI1585331** texto libre: ingrese otra raza u origen étnico)
- **PPI1586155** Blanco (por ejemplo, Alemán, Europeo, Irlandés, Inglés, Italiano, Polaco, Francés, etc.)
 - **PPI1585333** Holandés
 - **PPI1585339** Inglés
 - **PPI1585337** Europeo
 - **PPI1585342** Francés
 - **PPI1585332** Alemán
 - **PPI1585338** Irlandés
 - **PPI1585340** Italiano
 - **PPI1585334** Noruego
 - **PPI1585341** Polaco
 - **PPI1585335** Escocés
 - **PPI1585336** Español

- **PPI1585343** Ninguna de estas me describe completamente (**PPI1585344** texto libre: por favor especifique)

PPI1585845. ¿Qué sexo biológico se le asignó al nacer?³

- **PPI1585847** Femenino
- **PPI1585846** Masculino
- **PPI1585848** Intersexual
- Prefiero no responder
- **PPI1585849** Ninguno de estas me describe (**PPI1585850** respuesta en texto libre: por favor especifique)

PPI1585838. ¿Con cuál género se identifica mejor? (Marque todas las que correspondan)

3

- **PPI1585839** Hombre
- **PPI1585840** Mujer
- **PPI1585841** No binario

Branching logic: If no binario is selected, display the following:

PPI1585348. ¿Alguna de estas opciones se acerca más a una descripción de cómo se considera a sí mismo?³

- **PPI1585350** Hombre transexual/hombre transgénero/mujer a hombre (FTM)
- **PPI1585349** Mujer transexual/mujer transgénero/hombre a mujer (MTF)
- **PPI1585351** Género no binario
- **PPI1585352** Género fluido
- **PPI1585353** Variante de género
- **PPI1585354** Con dudas o inseguridad acerca de su identidad de género
- **PPI1585355** Ninguna de estas me describe, y quiero especificar (texto libre opcional: por favor especifique)

- **PPI1585842** Transgénero
- *Branching logic: If Transgénero is selected, display the following:*

PPI1585348. ¿Alguna de estas opciones se acerca más a una descripción de cómo se considera a sí mismo?³

- PPI1585350** Hombre transexual/hombre transgénero/mujer a hombre (FTM)
 - PPI1585349** Mujer transexual/mujer transgénero/hombre a mujer (MTF)
 - PPI1585351** Género no binario
 - PPI1585352** Género fluido
 - PPI1585353** Variante de género
 - PPI1585354** Con dudas o inseguridad acerca de su identidad de género
 - PPI1585355** Ninguna de estas me describe, y quiero especificar (texto libre
opcional: por favor especifique)
- **PPI1585843** Ninguna de estas me describe
 - *Branching logic: If Ninguna de estas me describe is selected, display the following:*
- PPI1585348. ¿Alguna de estas opciones se acerca más a una descripción de cómo se considera a sí mismo?**³
- PPI1585350** Hombre transexual/hombre transgénero/mujer a hombre (FTM)
 - PPI1585349** Mujer transexual/mujer transgénero/hombre a mujer (MTF)
 - PPI1585351** Género no binario
 - PPI1585352** Género fluido
 - PPI1585353** Variante de género
 - PPI1585354** Con dudas o inseguridad acerca de su identidad de género
 - PPI1585355** Ninguna de estas me describe, y quiero especificar (texto libre
opcional: por favor especifique)
- Prefiero no responder

PPI1585899. ¿Cuál de las siguientes opciones piensa usted que le representa mejor?⁴

- **PPI1585901** Gay
- **PPI1585902** Lesbiana
- **PPI1585900** Heterosexual (no eres gay ni lesbiana)
- **PPI1585903** Bisexual
- **PPI1585904** Ninguna de estas me describe

Branching logic: If the above is selected, display:

PPI1585357. ¿Alguna de estas opciones se acerca más a una descripción de cómo se considera a sí mismo?⁵

- **PPI1585358** Queer
- **PPI1585359** Polisexual, omnisexual, sapiosexual o pansexual
- **PPI1585360** Asexual
- **PPI1585361** Dos espíritus
- **PPI1585362** No ha descubierto o está en proceso de descubrir su sexualidad
- **PPI1585363** Mayormente heterosexual, pero a veces atraído a personas de su mismo sexo
- **PPI1585364** No considera que tenga una sexualidad
- **PPI1585365** No usa etiquetas para identificarse
- **PPI1585368** No sabe la respuesta
- **PPI1585366** No, quiero decir otra cosa (**PPI1585367** texto libre opcional: por favor especifique)
- Prefiero no responder

PPI1585940. ¿Cuál es el grado o nivel de educación más alto que ha completado?⁵

- **PPI1585941** Nunca fue a la escuela o solo fue al kínder
- **PPI1585942** 1° a 4° grado (Primaria)

- **PPI1585943** 5° a 8° grado (Secundaria)
- **PPI1585944** 9º a 11º grado (Preparatoria o bachillerato incompleta)
- **PPI1585945** 12º grado o GED (Preparatoria o bachillerato completo o GED)
- **PPI1585946** 1 a 3 años de universidad (algunos estudios universitarios o de escuela técnica)
- **PPI1585947** 4 años o más de universidad (graduado de la universidad)
- **PPI1585948** Estudios avanzados (Maestría, Doctorado, etc.)
- Prefiero no contestar

PPI1585852. ¿Alguna vez ha estado en servicio activo en las Fuerzas Armadas de los Estados Unidos, ya sea en el servicio militar regular, en la Guardia Nacional o en una unidad de reserva militar?

NOTA: El servicio activo no incluye el entrenamiento en la Reserva ni en la Guardia Nacional, pero Sí incluye las actividades de movilización, por ejemplo, para la Guerra del Golfo Pérsico.⁵

- **PPI1585853** Sí
- **PPI1585854** No
- Prefiero no contestar

PPI1585892. ¿Cuál es su estado civil actual?⁵

- **PPI1585893** Casado/a
- **PPI1585894** Divorciado/a
- **PPI1585895** Viudo/a
- **PPI1585896** Separado/a
- **PPI1585897** Nunca estuvo casado/a
- **PPI1585898** Vive en pareja sin estar casado/a / unión libre

- Prefiero no contestar

Las siguientes dos preguntas son sobre las personas que viven con usted

PPI1585889. Sin contarse usted, ¿cuántas personas viven con usted en su casa?⁵

- Texto libre: cantidad de personas; por favor especifique (valor entero)

PPI1585889. Entre las personas que viven con usted, ¿cuántos son menores de 18 años?

1

- Texto libre: cantidad de niños (número); por favor especifique (valor entero)

Las siguientes preguntas serán sobre su seguro médico. Incluya el seguro médico que usted tiene por su trabajo o que usted compra directamente y también los Programas del gobierno como Medicare y Medicaid que proveen atención médica o que le ayudan a pagar las facturas médicas.

PPI1585386. ¿Tiene usted seguro médico o algún tipo de plan para el cuidado de su salud?¹

- **PPI1585387** Sí
- **PPI1585388** No
- Prefiero no responder
- No sé

Branching logic, si Sí:

PPIXXXXXX. Actualmente ¿está cubierto por algún seguro médico o planes de cobertura médica?²

- Seguro a través de su trabajo previo o actual o a través de una asociación de trabajadores (de parte de usted u otro familiar)
- Seguro comprado directamente a una compañía de seguros (de parte de usted u otro familiar)

- Medicare para personas de 65 años o más o con ciertas discapacidades
- Medicaid, ayuda médica o algún tipo de plan de ayuda del gobierno para personas con bajos ingresos o discapacidades
- TRICARE o alguna otra atención médica para militares
- Administración de Veteranos (VA, por sus siglas en inglés) (incluye los que alguna vez han usado o se han inscrito en la atención médica de VA)
- Servicio Médico para Indios Americanos/Nativos Americanos
- Otro tipo de seguro médico o plan de cobertura médica

Branching logic: If above is selected:

- Por favor especifique: [FREE TEXT]
- No tengo seguro médico, yo pago por mi cuenta

Las siguientes preguntas son sobre su trabajo, ingreso, y de donde vive.

PPI1585952. ¿Cuál es su situación de trabajo actual?⁵

- **PPI1585953** Empleado/a asalariado/a (tiempo parcial o tiempo completo)

Branching logic, si selecciono, empleado/a asalariado/a o trabajador/a independiente:

Al compartir información donde usted trabaja, podría ayudarnos a entender cómo el medio ambiente afecta la salud. Compartir la dirección de su trabajo es su decisión. Usted puede decir no, y aun así seguir participando en el Programa.

- **PPI1585961** ¿Si recibe ingresos por tener empleo autónomo o de una empresa, cual es la dirección de su empleo?
 - **PPI1585962** Dirección postal
 - **PPI1585963** Dirección - línea adicional (opcional)
 - **PPI1585964** Ciudad
 - **PPI1585965** Estado
 - **PPI1585966** Código postal

- **PPI1585967** País
 - Prefiero no contestar
 - No se me aplica
- **PPI1585954** Trabajador/a independiente

Branching logic, si selecciono, empleado/a asalariado/a o trabajador/a independiente:

Al compartir información donde usted trabaja, podría ayudarnos a entender cómo el medio ambiente afecta la salud. Compartir la dirección de su trabajo es su decisión. Usted puede decir no, y aun así seguir participando en el Programa.

- **PPI1585961** ¿Si recibe ingresos por tener empleo autónomo o de una empresa, cual es la dirección de su empleo?
 - **PPI1585962** Dirección postal
 - **PPI1585963** Dirección - línea adicional (opcional)
 - **PPI1585964** Ciudad
 - **PPI1585965** Estado
 - **PPI1585966** Código postal
 - **PPI1585967** País
 - Prefiero no contestar
 - No se me aplica
- **PPI1585955** Desempleado/a por 1 año o más
- **PPI1585956** Desempleado/a por menos de 1 año
- **PPI1585957** Soy una mujer u hombre que me ocupo de tareas de la casa/ama de casa
- **PPI1585958** Estudiante
- **PPI1585959** Jubilado/a
- **PPI1585960** No puede trabajar (por discapacidad)
- Prefiero no contestar

Una de las cosas que intentamos entender es cómo los ingresos de las personas afectan el uso de los servicios de salud. El ingreso familiar incluye sus ingresos más los de todos los integrantes de su familia en su hogar durante el último año de calendario.

Incluya todos los salarios y otras fuentes de ingreso.

PPI1585375 ¿Cuál es su ingreso familiar anual incluyendo otras fuentes? ⁵

Escoja una opción

- **PPI1585376** Menos que \$10,000
- **PPI1585377** \$\$10,000- \$24,999
- **PPI1585378** \$25,000- \$34,999
- **PPI1585379** \$35,000- \$49,999
- **PPI1585380** \$50,000- \$74,999
- **PPI1585381** \$75,000-\$99,999
- **PPI1585382** \$100,000- \$149,999
- **PPI1585383** \$150,000- \$199,999
- **PPI1585384** \$200,000 o más
- Prefiero no contestar

PPI1585370. ¿Vive usted en casa propia o alquilada (rentada)? ⁷

- **PPI1585371** Propia
- **PPI1585372** Alquilada (rentada)
- **PPI1585373** Otra situación de vivienda

Branching logic, if “otra situación de vivienda” selected:

- **PPI1585402.** ¿En dónde vive actualmente? ⁷
 - **PPI1585403** En un campo universitario
 - **PPI1585404** Con un amigo/compañero de habitación

- **PPI1585405** Con familia
- **PPI1585406** Motel/hotel
- **PPI1585407** Hospital, centro de rehabilitación, centro de tratamiento por abuso de drogas u otra institución temporal
- **PPI1585874** En una casa comunitaria, un asilo u otro centro residencia
- **PPI1585875** Hogar de transición
- **PPI1585876** Albergue de emergencia o para personas sin hogar
- **PPI1585874** En cualquier lugar afuera (por ejemplo, calle, vehículo, edificio abandonado)
- **PPI1585878** Otro (texto libre)
- Prefiero no contestar

PPI1585879. ¿Cuántos años ha vivido en su dirección actual?⁸

- **PPI1585880** Menos de 1 año
- **PPI1585881** 1-2 años
- **PPI1585882** 3-5 años
- **PPI1585883** 6-10 años
- **PPI1585884** 11-20 años
- **PPI1585885** Más de 20 años

La siguiente pregunta es sobre el estrés que usted puede sentir sobre el dinero.

PPI1585886. En los últimos 6 meses, ¿ha estado usted preocupado por NO tener un lugar estable donde vivir del que sea dueño, que rente (alquile) o se aloje como parte de un hogar?⁹

- **PPI1585887** Sí
- **PPI1585888** No

Si usted tiene un número de seguro social, y decide compartirlo con nosotros podría

contribuir para agregar información adicional a la base de datos de All of Us. Esta información podría venir de lugares como su proveedor de salud o farmacia.

Compartir su número de seguro social es su decisión. Usted puede decir no y aun así seguir participando en el Programa.

PPI1585950. Cuál es su número de seguro social?⁶

En esta última sección se solicita información de contacto de su familia o amigos para que podamos mantener la comunicación con usted en el futuro. Esta información no es necesaria para poder participar en el Programa. Toda la información que usted nos da se guardará de forma segura.

PPI1585906. El Programa Científico All of Us se pondrá en contacto con usted periódicamente para reunir información adicional relacionada con su salud. Por favor denos los nombres, direcciones y números de teléfono de 2 familiares o amigos que no viven con usted en caso de que no lo podamos contactar. [Por favor, denos los nombres de personas que actualmente no viven en su casa].¹

- **PPI1585907** nombre de la primera persona
- **PPI1585908** inicial del segundo nombre de la primera persona
- **PPI1585909** apellido de la primera persona
- **PPI1585910** dirección número 1 de la primera persona
- **PPI1585911** dirección número 2 de la primera persona
- **PPI1585912** ciudad de primera persona
- **PPI1585913** estado de primera persona
- **PPI1585914** código postal de primera persona
- **PPI1585915** correo electrónico de primera persona
- **PPI1585916** teléfono de primera persona (no permitir prefiero no contestar o no sé)

- **PPI1585917** Relación con el entrevistado
 - **1585918** Hijo
 - **1585919** Amigo
 - **1585920** Padre/custodio legal
 - **1585921** Pariente
 - **1585922** Esposo/cónyuge
- **PPI1585923** nombre de la segunda persona
- **PPI1585924** inicial del segundo nombre de la segunda persona
- **PPI1585925** apellido de la segunda persona
- **PPI1585926** dirección número 1 de la segunda persona
- **PPI1585927** dirección número 2 de la segunda persona
- **PPI1585928** ciudad de la segunda persona
- **PPI1585929** estado de la segunda persona
- **PPI1585930** código postal de la segunda persona
- **PPI1585931** correo electrónico de la segunda persona
- **PPI1585932** teléfono de la segunda persona
- **PPI1585933** Relación con el entrevistado
 - **1585934** Hijo
 - **1585935** Amigo
 - **1585936** Padre/custodio legal
 - **1585937** Pariente
 - **1585938** Esposo/cónyuge

Gracias por completar la Encuesta Básica. La información que compartió con nosotros puede contribuir a ayudar investigadores a mejorar la salud de futuras generaciones.

Sources

1. NHANES - National Health and Nutrition Examination Survey (NHANES)
2. U.S. 2020 Census (2015 Draft)
3. GenIUSS group (Gender Identity in U.S. Surveillance)
4. National Health Interview Survey (NHIS)
5. Behavioral Risk Factor Surveillance System (BRFSS)
6. Developed for use in All of Us
7. National Health Care for the Homeless Council
8. UK Biobank
9. VA Homelessness Screening Clinical Reminder

eDocument 3. Lifestyle (English)

This survey asks questions about your use of tobacco, alcohol, and drugs. This is to better understand how these things may affect your overall health. Your privacy is very important to us. Your name will be separated from your answers before they are shared with researchers.

It takes about 5-10 minutes to answer these questions. Please answer each question as honestly as possible. It is important that you answer as many questions as you can. We are looking for your own answers, and not what you think your doctors, family, or friends want you to say.

Don't feel like you have to spend a long time over each question. The first answer that comes to you is usually the best one. If you aren't sure how to answer a question, choose the best answer from the options given.

PPI1585857. Have you smoked at least 100 cigarettes in your entire life? (There are 20 cigarettes in a pack.)?¹⁻³

- **PPI1585858.** Yes
- **PPI1585859.** No
- Don't know/Prefer not to answer

Branching Logic if PPI1585857= "Yes", display the following:

PPI1585860. Do you now smoke cigarettes every day, some days, or not at all?¹⁻³

- **PPI1585861.** Every day
- **PPI1585862.** Some days
- **PPI1585863.** Not at all
- Don't know

- Prefer not to answer

PPI1585864. How old were you when you first started regular cigarette smoking?¹⁻

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- Enter Age: _____ [Range 1-99]

PPI1585867. In the past, have you ever made a serious attempt to quit smoking?

That is, have you stopped smoking for at least one day or longer because you were trying to quit?¹⁻³

- PPI1585868.** Yes
- PPI1585869.** No
- Don't know
- Prefer not to answer

Branching Logic if PPI1585867= "Yes", display the following:

PPI1585870. If you have completely stopped smoking cigarettes, how old were you when you stopped?^{2,4}

- _____ Age Stopped Smoking

PPI1585873. How many years have you or did you smoke cigarettes?^{2,4}

- _____ Years (0-99)
- Don't Know

PPI1586159. On average, how many cigarettes do you smoke per day now? (There are 20 cigarettes in a pack.)¹⁻³

- Enter number of cigarettes per day _____ [Range: 1-99]
- PPI1586160.** Don't know
- PPI1586161.** Prefer not to answer

PPI1586162. On average, over the entire time that you smoked, how many cigarettes did you smoke each day? (There are 20 cigarettes in a pack.)¹⁻³

- Enter number of cigarettes per day _____ [Range: 1-99]
- **PPI1586163.** Don't know
- **PPI1586164.** Prefer not to answer

PPI1586166. Have you ever used an electronic nicotine product, even one or two times?

(Electronic nicotine products include e-cigarettes, vape pens, hookah pens, personal vaporizers and mods, e-cigars, e-pipes, and e-hookahs.)⁵

- **PPI1586167.** Yes
- **PPI1586168.** No
- Don't Know/Prefer Not To Answer

Branching Logic if PPI1586166= "Yes", display the following:

PPI1586169. Do you now use electronic nicotine products...⁵

- **PPI1586170.** Every day
- **PPI1586171.** Somedays
- **PPI1586172.** Not at all
- Don't know
- Prefer not to answer

PPI1586174. Have you ever smoked a traditional cigar, cigarillo, or filtered cigar, even one of two puffs?⁵

- **PPI1586175.** Yes
- **PPI1586176.** No
- Don't Know/Prefer Not To Answer

Branching Logic if PPI1586174= "Yes", display the following:

PPI1586177. Do you now smoke a traditional cigar, cigarillo, or filtered cigar...⁵

- **PPI1586178.** Every day
- **PPI1586179.** Somedays
- **PPI1586180.** Not at all
- Don't know
- Prefer not to answer

PPI1586182. Have you ever smoked tobacco in a hookah, even one or two puffs?⁵

- **PPI1586183.** Yes
- **PPI1586184.** No
- Don't Know/Prefer Not To Answer

Branching Logic if PPI1586182= "Yes", display the following:

PPI1586185. Do you smoke hookah...

- **PPI1586186.** Every day
- **PPI1586187.** Somedays
- **PPI1586188.** Not at all
- Don't know
- Prefer not to answer

PPI1586190. Have you ever used smokeless tobacco products, even one or two times?

(Smokeless tobacco products include snus pouches, Skoal Bandits, loose snus, moist snuff, dip, spit, and chewing tobacco.)⁵

- **PPI1586191.** Yes
- **PPI1586192.** No
- Don't Know/Prefer Not To Answer

Branching Logic if PPI1586190= "Yes", display the following:

PPI1586193. Do you now use smokeless tobacco products...⁵

- **PPI1586194.** Every day
- **PPI1586195.** Somedays
- **PPI1586196.** Not at all
- Don't know
- Prefer not to answer

Thanks for your answers. The next questions will ask about drinking alcohol. This includes coolers, beer, wine, champagne, liquor such as whiskey, rum, gin, vodka, scotch, or liqueurs, and also any other type of alcohol. This will help researchers better understand how alcohol affects health. As always, your answers are private.

PPI1586198. In your entire life, have you had at least 1 drink of any kind of alcohol, not counting small tastes or sips? (By a “drink,” we mean a can or bottle of beer, a glass of wine or a wine cooler, a shot of liquor, or a mixed drink with liquor in it.)⁶

- **PPI1586199.** Yes
- **PPI1586200.** No
- Prefer Not To Answer

Branching Logic if PPI1586198= “Yes” display the following:

PPI1586201. How often did you have a drink containing alcohol in the past year?⁷

- **PPI1586202.** Never
- **PPI1586203.** Monthly or less
- **PPI1586204.** Two to four times a month
- **PPI1586205.** Two to three times a week
- **PPI1586206.** Four or more times a week

- Prefer not to answer

Branching Logic if PPI1586201 = anything greater than “Never” or “prefer not to answer”, display the following:

PPI1586207. On a typical day when you drink, how many drinks do you have?⁷

- **PPI1586208.** 1 or 2
- **PPI1586209.** 3 or 4
- **PPI1586210.** 5 or 6
- **PPI1586211.** 7 to 9
- **PPI1586212.** 10 or more
- Prefer not to answer

PPI1586213. How often did you have six or more drinks on one occasion in the past year?⁷

- **PPI1586214.** Less than monthly
- **PPI1586215.** Monthly
- **PPI1586216.** Weekly
- **PPI1586217.** Daily or almost daily
- **PPI1585634.** Never in the last year
- Prefer not to answer

Thanks for your answers. Now we'd like to ask you about your experiences with medicines and other kinds of drugs. Some of the substances we'll talk about are prescribed by a doctor (like pain medications). We only want to know if you have taken them for reasons or in doses other than prescribed. We understand that these are sensitive questions. You may choose not to answer them. However, by providing

answers, you are helping researchers better understand how these substances affect health.

PPI1585636. In your LIFETIME, which of the following substances have you ever used?⁸

PPI1585637. Marijuana (cannabis, pot, grass, hash, weed, etc.)

PPI1585638. Cocaine (coke, crack, etc.)

PPI1585639. Prescription stimulants for non-medical reasons (Ritalin, Concerta, Dexedrine, Adderall, diet pills, etc.)

PPI1585640. Other stimulants (methamphetamine, speed, crystal meth, ice, k2/spice, bath salts, etc.)

PPI1585641. Inhalants (nitrous oxide, glue, gas, paint thinner, etc.)

PPI1585642. Sedatives or sleeping pills for non-medical reasons (Valium, Serepax, Ativan, Xanax, Librium, Rohypnol, GHB, etc.)

PPI1585643. Hallucinogens (LSD, acid, mushrooms, PCP, Special K, ecstasy, etc.)

PPI1585644. Street opioids (heroin, opium, etc.)

PPI1585645. Prescription opioids for non-medical reasons (fentanyl, oxycodone [OxyContin, Percocet], hydrocodone [Vicodin], methadone, buprenorphine, etc.)

PPI1585646. Other (Specify)

Branching Logic if PPI1585636= substance with “Yes” responses, display the following:

PPI1585649. In the PAST THREE MONTHS, how often have you used the substances you mentioned (first drug, second drug, etc)?⁸

PPI1585650. In the PAST THREE MONTHS, how often have you used marijuana (cannabis, pot, grass, hash, etc.)?

- **PPI1585651.** Never
- **PPI1585652.** Once or twice

- **PPI1585653.** Monthly
- **PPI1585654.** Weekly
- **PPI1585655.** Daily or almost daily
- Prefer not to answer

PPI1585656. In the PAST THREE MONTHS, how often have you used cocaine

(coke, crack, etc.)?

- **PPI1585657.** Never
- **PPI1585658.** Once or twice
- **PPI1585659.** Monthly
- **PPI1585660.** Weekly
- **PPI1585661.** Daily or almost daily
- Prefer not to answer

PPI1585662. In the PAST THREE MONTHS, how often have you used prescription stimulants for non-medical reasons (Vyvanse, Ritalin, Concerta, Dexedrine, Adderall, diet pills, etc.)

- **PPI1585663.** Never
- **PPI1585664.** Once or twice
- **PPI1585665.** Monthly
- **PPI1585666.** Weekly
- **PPI1585667.** Daily or almost daily
- Prefer not to answer

PPI1585668. In the PAST THREE MONTHS, how often have you used other

stimulants (methamphetamine, speed, crystal meth, ice, k2/spice, bath salts, etc.)

- **PPI1585669.** Never
- **PPI1585670.** Once or twice

- **PPI1585671.** Monthly
- **PPI1585672.** Weekly
- **PPI1585673.** Daily or almost daily
- Prefer not to answer

PPI1585674. In the PAST THREE MONTHS, how often have you used inhalants

(nitrous oxide, glue, gas, paint thinner, etc.)?

- **PPI1585675.** Never
- **PPI1585676.** Once or twice
- **PPI1585677.** Monthly
- **PPI1585678.** Weekly
- **PPI1585679.** Daily or almost daily
- Prefer not to answer

PPI1585680. In the PAST THREE MONTHS, how often have you used sedatives or

sleeping pills for non-medical reasons (Valium, Serepax, Ativan, Xanax, Librium,

Rohypnol, GHB, etc.)?

- **PPI1585681.** Never
- **PPI1585682.** Once or twice
- **PPI1585683.** Monthly
- **PPI1585684.** Weekly
- **PPI1585685.** Daily or almost daily
- Prefer not to answer

PPI1585686. In the PAST THREE MONTHS, how often have you used hallucinogens

(LSD, acid, mushrooms, PCP, Special K, ecstasy, etc.)?

- **PPI1585687.** Never
- **PPI1585688.** Once or twice

- PPI1585689.** Monthly
- PPI1585690.** Weekly
- PPI1585691.** Daily or almost daily
- Prefer not to answer

PPI1585692. In the PAST THREE MONTHS, how often have you used street opioids (heroin, opium, etc.)?

- PPI1585693.** Never
- PPI1585694.** Once or twice
- PPI1585695.** Monthly
- PPI1585696.** Weekly
- PPI1585697.** Daily or almost daily
- Prefer not to answer

PPI1585698. In the PAST THREE MONTHS, how often have you used prescription opioids for non-medical reasons (obana, fentanyl, oxycodone [OxyContin, Percocet], hydrocodone [Vicodin], methadone, buprenorphine [Supoxone], etc.)

- PPI1585699.** Never
- PPI1585700.** Once or twice
- PPI1585701.** Monthly
- PPI1585702.** Weekly
- PPI1585703.** Daily or almost daily
- Prefer not to answer

PPI1585704. In the PAST THREE MONTHS, how often have you used other drugs?

- PPI1585705.** Never
- PPI1585706.** Once or twice
- PPI1585707.** Monthly

- **PPI1585708.** Weekly
- **PPI1585709.** Daily or almost daily
- Prefer not to answer

Thank you for answering these questions. We know they are very personal.

We want to remind you that your answers will only be shared with approved researchers.

Your privacy is very important to us.

Sources

1. Tobacco Use Supplement to the Current Population Survey (TUS-CPS)
2. American Thoracic Society Division of Lung Disease questionnaire (ATS – DLD-78)
3. Million Veterans Program
4. Prostate, Lung, Colorectal and Ovarian (PLCO) Cancer Screening Trial
5. Population Assessment of Tobacco and Health (PATH)
6. National Epidemiologic Survey on Alcohol and Related Conditions (NESARC)
7. Alcohol Use Disorders Identification Test (AUDIT-C)
8. NM ASSIST (NIDA-Modified Alcohol, Smoking, and Substance Involvement Screening Test)

eDocument 4. Estilo de Vida (Spanish)

Esta encuesta le hace preguntas sobre su consumo de tabaco, alcohol y drogas. Esta información nos sirve para comprender mejor cómo estos aspectos pueden afectar su salud. Para asegurar su privacidad, su nombre se separará de sus respuestas antes de compartirlas con los investigadores.

Responder a las siguientes preguntas le llevará como 5-10 minutos. Por favor responda cada pregunta lo más honesto posible. Para cualquiera de estas preguntas no hay respuestas correctas o incorrectas. Es importante que responda todas las preguntas que pueda. Estamos buscando sus propias respuestas, y no lo que piensan sus doctores, familiares, o amigos.

No sienta que tiene que tomar mucho tiempo para cada pregunta. La primera respuesta que se le ocurre es usualmente la mejor. Si no está seguro(a) cómo responder la pregunta, escoja la mejor respuesta de las opciones presentadas.

PPI1585857. ¿Ha fumado usted al menos 100 cigarrillos en toda su vida? (Cada paquete tiene 20 cigarrillos)

- **PPI1585858.** Sí
- **PPI1585859.** No
- No sé
- Prefiero no contestar

Branching Logic if PPI1585857= “Sí”, display the following:

PPI1585860. Actualmente, ¿Con qué frecuencia fuma usted cigarrillos?

- **PPI1585861.** Todos los días
- **PPI1585862.** Algunos días

- PPI1585863.** Nunca
- No sé
- Prefiero no contestar

PPI1585864. ¿Qué edad tenía usted cuando empezó a fumar cigarrillos regularmente?

- Anote la edad: ____ [RANGO: 1 - 99]
- No sé
- Prefiero no contestar

PPI1585867. En el pasado, ¿alguna vez ha intentado seriamente dejar de fumar? Es decir, ¿ha dejado de fumar durante un día o más porque estaba tratando de dejar de fumar?

- PPI1585868.** Sí
- PPI1585869.** No
- No sé
- Prefiero no contestar

Branching Logic if PPI1585867= “Sí”, display the following:

PPI1585870. Si ha dejado por completo de fumar cigarrillos, ¿qué edad tenía cuando lo dejó?

- ____ EDAD A LA QUE DEJÓ DE FUMAR
- No sé
- Prefiero no responder

PPI1585873. ¿Durante cuántos años fumó cigarrillos?

- ____ AÑOS como fumador/a [escala: 1-99]
- No sé

- Prefiero no responder

PPI1586159. En promedio, ¿cuántos cigarrillos fuma al día actualmente (una caja contiene 20 cigarrillos)?

- cigarrillos por día _____ [escala: 1-99]
- PPI1586160.** No sé
- PPI1586161.** Prefiero no responder

PPI1586162. Durante todo el tiempo que fumó, ¿cuántos cigarrillos fumaba en promedio por día (una caja contiene 20 cigarrillos)?

- cigarrillos por día _____ [escala: 1-99]
- PPI1586163.** No sé
- PPI1586164.** Prefiero no responder

PPI1586166. ¿Alguna vez usó un producto electrónico con nicotina, aunque sea una o dos veces? (Cigarrillos electrónicos, cigarrillos a vapor, hookah, vaporizadores y módulos personales, puros electrónicos, pipas electrónicas y hookah electrónica)

- PPI1586167.** Sí
- PPI1586168.** No
- No sé
- Prefiero no responder

Branching Logic if PPI1586166= "Sí", display the following:

PPI1586169. Actualmente, ¿usa productos electrónicos con nicotina?

- PPI1586170.** Todos los días
- PPI1586171.** Algunos días

- **PPI1586172.** Nunca
- No sé
- Prefiero no responder

PPI1586174. ¿Alguna vez fumó un puro o cigarrillo tradicional o puro con filtro, aunque sea una o dos fumadas para probar?

- **PPI1586175.** Sí
- **PPI1586176.** No
- No sé
- Prefiero no responder

Branching Logic if PPI1586174= “Sí”, display the following:

PPI1586177. Actualmente, ¿fuma puros o cigarrillos tradicionales con o sin filtro?

- **PPI1586178.** Todos los días
- **PPI1586179.** Algunos días
- **PPI1586180.** Nunca
- No sé
- Prefiero no responder

PPI1586182. ¿Alguna vez fumó tabaco en hookah, aunque sea una o dos caladas (probadas, chupadas, fumadas)?

- **PPI1586183.** Sí
- **PPI1586184.** No
- No sé
- Prefiero no responder

Branching Logic if PPI1586182= “Sí”, display the following:

PPI1586185. Actualmente, ¿fuma hookah?

- **PPI1586186.** Todos los días
- **PPI1586187.** Algunos días
- **PPI1586188.** Nunca
- No sé
- Prefiero no responder

PPI1586190. ¿Alguna vez usó productos de tabaco sin humo, aunque sea una o dos veces? (snus, Skoal Bandits, snus suelto, rapé húmedo, tabaco para masticar y escupir)

- **PPI1586191.** Sí
- **PPI1586192.** No
- No sé
- Prefiero no responder

Branching Logic if PPI1586190= “Sí”, display the following:

PPI1586193. Actualmente, ¿consume productos de tabaco sin humo?

- **PPI1586194.** Todos los días
- **PPI1586195.** Algunos días
- **PPI1586196.** Nunca
- No sé
- Prefiero no responder

Gracias por sus respuestas. Las siguientes preguntas serán sobre su consumo de alcohol. Esto incluye refresco con alcohol, cerveza, vino, champán, licor como whisky, ron, ginebra (gin), vodka, escocés (scotch), o licores, y también todo otro tipo de alcohol.

Esto ayudará para que los investigadores comprendan mejor cómo el alcohol afecta la salud. Como siempre, sus respuestas son privadas.

PPI1586198. ¿Alguna vez en su vida consumió al menos una bebida alcohólica de cualquier tipo, sin contar pequeñas probadas? (Con "bebida" nos referimos a una lata o botella de cerveza, una copa de vino o refrescos de vino, un trago (shot) de licor o una bebida mezclada con licor.)

- **PPI1586199.** Sí
- **PPI1586200.** No
- Prefiero no responder

Branching Logic if PPI1586198= “Sí” display the following:

PPI1586201. ¿Con qué frecuencia consumió bebidas alcohólicas en el último año?

- **PPI1586202.** Nunca
- **PPI1586203.** Una vez al mes o menos
- **PPI1586204.** De dos a cuatro veces al mes
- **PPI1586205.** De dos a tres veces a la semana
- **PPI1586206.** Cuatro veces o más a la semana

Branching Logic if PPI1586201 = anything greater than “Nunca” display the following:

PPI1586207. Durante el año pasado, ¿cuántas bebidas tomaba en un día común?

- **PPI1586208.** 1 o 2
- **PPI1586209.** 3 o 4
- **PPI1586210.** 5 o 6
- **PPI1586211.** 7 a 9
- **PPI1586212.** 10 o más
- Prefiero no responder

PPI1586213. ¿Cuántas veces tomó seis o más bebidas en una ocasión durante el último año?

- Menos de una vez al mes
- Una vez al mes
- Una vez a la semana
- A diario o casi todos los días
- Nunca en el último año
- Prefiero no responder

Gracias por sus respuestas. Ahora nos gustaría preguntarle sobre sus experiencias con medicinas y otros tipos de drogas. Algunas de las sustancias de las que vamos a hablar son recetadas por un doctor (como medicamentos para el dolor). Nosotros sólo queremos saber si las ha tomado por razones diferentes a las indicadas o en dosis diferentes de las que han sido recetadas. Comprendemos que estas son preguntas delicadas. Usted puede elegir no responderlas. Sin embargo, al proporcionar sus respuestas ayudará a los investigadores a comprender mejor cómo estas sustancias afectan a la salud.

PPI1585636. En TODA SU VIDA, ¿cuál de estas sustancias ha usado alguna vez?

PPI1585637. Marihuana (cannabis, mota, hachís, hierba, etc.)

PPI1585638. Cocaína (coca, crack, etc.)

PPI1585639. Estimulantes recetados para fines no médicos (Ritalin, Concerta, Dexedrine, Adderall, píldoras para adelgazar, etc.)

PPI1585640. Otros estimulantes (metanfetamina, tachas, anfetaminas, cristal, spice, sales de baño, etc.)

PPI1585641. Inhalantes (óxido nitroso, pegamento, gas, thinner o diluyente de pintura, etc.)

PPI1585642. Sedantes o píldoras para dormir para fines no médicos (Valium, Serepax, Ativan, Xanax, Librium, Rohypnol, GHB, etc.)

PPI1585643. Alucinógenos (LSD, ácido, hongos, PCP, K especial, éxtasis, etc.)

PPI1585644. Opioides obtenidos en la calle (heroína, opio, etc.)

PPI1585645. Opioides recetados para fines no médicos (fentanilo, oxicodeona [OxyContin, Percocet], hidrocodona [Vicodin], metadona, buprenorfina, etc.)

PPI1585648. Ninguna de estas drogas

Prefiero no responder

PPI1585646. Otro (especifique)

Branching Logic if PPI1585636= substance with “Sí” responses, display the following:

PPI1585649. En los últimos tres meses, ¿con qué frecuencia usó las sustancias que mencionó (primera droga, segunda droga, etc.)?

PPI1585650. En los últimos tres meses, ¿con qué frecuencia usó las sustancias que mencionó de marihuana (cannabis, mota, hachís, hierba, etc.)?

- **PPI1585651.** Nunca

- PPI1585652.** Una o dos veces
- PPI1585653.** Una vez al mes
- PPI1585654.** Una vez a la semana
- PPI1585655.** A diario o casi todos los días
- Prefiere no responder

PPI1585656. En los últimos tres meses, ¿con qué frecuencia usó las sustancias que mencionó de cocaína (coca, crack, etc.)?

- PPI1585657.** Nunca
- PPI1585658.** Una o dos veces
- PPI1585659.** Una vez al mes
- PPI1585660.** Una vez a la semana
- PPI1585661.** A diario o casi todos los días
- Prefiere no responder

PPI1585662. En los últimos tres meses, ¿con qué frecuencia usó las sustancias que mencionó de estimulantes recetados por motivos no médicos (Vyvanse Ritalin, Concerta, Dexedrina, Adderall, píldoras para bajar de peso, etc.)?

- PPI1585663.** Nunca
- PPI1585664.** Una o dos veces
- PPI1585665.** Una vez al mes
- PPI1585666.** Una vez a la semana
- PPI1585667.** A diario o casi todos los días
- Prefiere no responder

PPI1585668. En los últimos tres meses, ¿con qué frecuencia usó las sustancias que mencionó de (metanfetamina [meta speed, cristalizada, solidificada, etc.], k2/spice, sales de baño)?

- **PPI1585669.** Nunca
- **PPI1585670.** Una o dos veces
- **PPI1585671.** Una vez al mes
- **PPI1585672.** Una vez a la semana
- **PPI1585673.** A diario o casi todos los días
- Prefiere no responder

PPI1585674. En los últimos tres meses, ¿con qué frecuencia usó las sustancias que mencionó de inhalantes (óxido nitroso, pegamento, gasolina, diluyente de pintura, etc.)?

- **PPI1585675.** Nunca
- **PPI1585676.** Una o dos veces
- **PPI1585677.** Una vez al mes
- **PPI1585678.** Una vez a la semana
- **PPI1585679.** A diario o casi todos los días
- Prefiere no responder

PPI1585680. En los últimos tres meses, ¿con qué frecuencia usó las sustancias que mencionó de sedantes o píldoras para dormir por motivos no médicos (Valium, Serepax, Ativan, Xanax, Librium, Rohypnol, GHB, etc.)?

- **PPI1585681.** Nunca
- **PPI1585682.** Una o dos veces
- **PPI1585683.** Una vez al mes

- **PPI1585684.** Una vez a la semana
- **PPI1585685.** A diario o casi todos los días
- Prefiere no responder

PPI1585686. En los últimos tres meses, ¿con qué frecuencia usó las sustancias que mencionó de alucinógenos (LSD, ácidos, hongos, PCP, ketamina, éxtasis, etc.)?

- **PPI1585687.** Nunca
- **PPI1585688.** Una o dos veces
- **PPI1585689.** Una vez al mes
- **PPI1585690.** Una vez a la semana
- **PPI1585691.** A diario o casi todos los días
- Prefiere no responder

PPI1585692. En los últimos tres meses, ¿con qué frecuencia usó las sustancias que mencionó de opioides callejeros (heroína, opio, etc.)?

- **PPI1585693.** Nunca
- **PPI1585694.** Una o dos veces
- **PPI1585695.** Una vez al mes
- **PPI1585696.** Una vez a la semana
- **PPI1585697.** A diario o casi todos los días
- Prefiere no responder

PPI1585698. ¿En los ÚLTIMOS TRES MESES, con que frecuencia ha usado opioides recetados por un doctor por razones no médicas (obana, fentanyl, oxicodona [OxyContin, Percocet], hidrocodona [Vicodin], metadona, buprenorfina [Supoxone, etc.]?)?

- PPI1585699.** Nunca
- PPI1585700.** Una o dos veces
- PPI1585701.** Una vez al mes
- PPI1585702.** Una vez a la semana
- PPI1585703.** A diario o casi todos los días
- Prefiere no responder

PPI1585704. ¿En los ÚLTIMOS TRES MESES, con que frecuencia ha usado otras drogas?

- PPI1585705.** Nunca
- PPI1585706.** Una o dos veces
- PPI1585707.** Una vez al mes
- PPI1585708.** Una vez a la semana
- PPI1585709.** A diario o casi todos los días
- Prefiere no responder

Gracias por responder estas preguntas. Sabemos que son muy personales. Queremos recordarle que sus respuestas sólo se compartirán con los investigadores autorizados. Su privacidad es muy importante para nosotros.

eDocument 5. Overall Health (English)

This survey asks questions about your overall health. Your privacy is very important to us. Your answers will only be shared with approved researchers after we have removed your name. It takes about 5-10 minutes to answer these questions. Please answer each question as honestly as possible. There are no right or wrong answers to any of the questions. It is important that you answer as many questions as you can. We are looking for your own answers, and not what you think your doctors, family, or friends want you to say.

Don't feel like you have to spend a long time over each question. The first answer that comes to you is usually the best one. If you aren't sure how to answer a question, choose the best answer from the options given.

PPI1585766. How confident are you filling out medical forms by yourself?¹

- **PPI1585767.** Extremely
- **PPI1585768.** Quite a bit
- **PPI1585769.** Somewhat
- **PPI1585770.** A little bit
- **PPI1585771.** Not at all

PPI1585772. How often do you have someone help you read health-related materials?¹

- **PPI1585773.** Always
- **PPI1585774.** Often
- **PPI1585775.** Sometimes

- **PPI1585776.** Occasionally
- **PPI1585777.** Never

PPI1585778. How often do you have problems learning about your medical condition because of difficulty understanding written information?¹

- **PPI1585779.** Always
- **PPI1585780.** Often
- **PPI1585781.** Sometimes
- **PPI1585782.** Occasionally
- **PPI1585783.** Never

PPI1585711. In general, would you say your health is:²

- **PPI1585712.** 5 = Excellent
- **PPI1585713.** 4 = Very Good
- **PPI1585714.** 3 = Good
- **PPI1585715.** 2 = Fair
- **PPI1585716.** 1 = Poor

PPI1585717. In general, would you say your quality of life is:²

- **PPI1585718.** 5 = Excellent
- **PPI1585719.** 4 = Very Good
- **PPI1585720.** 3 = Good
- **PPI1585721.** 2 = Fair

- **PPI1585722.** 1 = Poor

PPI1585723. In general, how would you rate your physical health?²

- **PPI1585724.** 5 = Excellent
- **PPI1585725.** 4 = Very Good
- **PPI1585726.** 3 = Good
- **PPI1585727.** 2 = Fair
- **PPI1585728.** 1 = Poor

PPI1585729. In general, how would you rate your mental health, including your mood and your ability to think?²

- **PPI1585730.** 5 = Excellent
- **PPI1585731.** 4 = Very Good
- **PPI1585732.** 3 = Good
- **PPI1585733.** 2 = Fair
- **PPI1585734.** 1 = Poor

PPI1585735. In general, how would you rate your satisfaction with your social activities and relationships?²

- **PPI1585736.** 5 = Excellent
- **PPI1585737.** 4 = Very Good
- **PPI1585738.** 3 = Good
- **PPI1585739.** 2 = Fair
- **PPI1585740.** 1 = Poor

PPI1585741. TO what extent are you able to carry out your everyday physical activities such as walking, climbing stairs, carrying groceries, or moving a chair?²

- **PPI1585742.** 5 = Completely
- **PPI1585743.** 4 = Mostly
- **PPI1585744.** 3 = Moderately
- **PPI1585745.** 2 = A little
- **PPI1585746.** 1 = Not at all

PPI1585747. In the past 7 days, how would you rate your pain on average?²

- 5 = 0 No pain
- 4 = 1
- 4 = 2
- 4 = 3
- 3 = 4
- 3 = 5
- 3 = 6
- 2 = 7
- 2 = 8
- 2 = 9
- 1 = 10 Worst pain imaginable

PPI1585748. In the past 7 days, how would you rate your fatigue?²

- **PPI1585749.** 5 = None
- **PPI1585750.** 4 = Mild
- **PPI1585751.** 3 = Moderate
- **PPI1585752.** 2 = Severe
- **PPI1585753.** 1 = Very Severe

PPI1585754. In general, please rate how well you carry out your usual social roles.

(This includes activities at home, at work and in your community, and responsibilities as a parent, child, spouse, employee, friend, etc.)²

- **PPI1585755.** 5 = Excellent
- **PPI1585756.** 4 = Very Good
- **PPI1585757.** 3 = Good
- **PPI1585758.** 2 = Fair
- **PPI1585759.** 1 = Poor

PPI1585760. In the past 7 days, how often have you been bothered by emotional

problems such as feeling anxious, depressed or irritable?²

- **PPI1585761.** 5 = Never
- **PPI1585762.** 4 = Rarely
- **PPI1585763.** 3 = Sometimes
- **PPI1585764.** 2 = Often
- **PPI1585765.** 1 = Always

The next few questions are about women's health issues. Women's health is very

important when considering your overall health. Answering these questions will help us get a more complete picture of your total health.

Note: The questions PPI1585811 – PPI1585795 will only be asked if in The Basics the questions about sex at birth were answered Female, intersex, or (please specify).

PPI1585784. Have your menstrual periods stopped permanently?³

- **PPI1585785.** No
- **PPI1585786.** Yes, I have no menstrual periods
- **PPI1585787.** Yes, but I have periods induced by hormones
- **PPI1585788.** Not sure

Branching Logic if PPI1585784= “Not sure”, display PPI1585811 OR Branching Logic if PPI1585784 = “No”, display PPI1585811, then skip to PPI1585803:

PPI1585811. Are you currently pregnant?⁴

- **PPI158513.** No
- **PPI158512.** Yes
- **PPI158514.** Not sure
- Prefer not to answer

Branching Logic if PPI1585784= “Yes, I have no menstrual periods” or “Yes, but I have periods induced by hormones”, display the following:

PPI1585789. Why did your periods stop?³

- **PPI158521.** Natural menopause (change of life)
- **PPI158522.** Surgery (a hysterectomy to remove your uterus and/or an oophorectomy to remove your ovaries)
- **PPI158523.** Endometrial ablation (removal of the lining of the uterus)

- **PPI1585790.** Medication, chemotherapy, or radiation
- Other
- Not sure
- Prefer not to answer

Branching Logic if PPI1585784 = “Yes”, display the following:

PPI1585791. Have you ever had a hysterectomy (that is, surgery to remove your uterus or womb)?³

- **PPI1585792.** No
- **PPI1585793.** Yes
- **PPI1585794.** Not sure
- Prefer not to answer

Branching Logic if PPI1585791 = “Yes”, display the following:

PPI1585795. If yes, age at surgery?³

- _____ (age in years)

Branching Logic if PPI1585791 = “No”, “Not Sure” or “Prefer not to answer”, display the following:

PPI1585796. Have you ever had an ovary removed?³

- **PPI1585797.** No
- **PPI1585798.** Yes, but only one ovary or part of one ovary
- **PPI1585799.** Yes, both ovaries
- **PPI1585800.** Yes, but don’t know whether one or both ovaries
- **PPI1585801.** Not sure
- **PPI1585802.** Prefer not to answer

Branching Logic if PPI1585796 = “Yes” at all, display the following:

PPI1585802. If yes, age at surgery?³

- _____ (age in years)

A blood sample may be drawn as part of this study. Some conditions or prior procedures, such as a bone marrow transplant, may cause problems in using your blood sample for research. In addition, some information about you, such as your travel history, may not generally be in your medical record but may still be helpful to researchers. Traveling outside the country may increase your risk of coming into contact with certain infections not commonly present in this country. The following questions are asked to address two of these situations.

PPI1585803. Have you had a transplant of any type?⁵

- **PPI1585804.** Yes
- **PPI1585805.** No
- Don’t know

Branching Logic if PPI1585803= “Yes”, display the following:

PPI1585806. If yes, please check all that apply⁵

- **PPI1585824.** Heart
 - *Branching Logic if selected, display:* Date of transplant
- **PPI1585825.** Kidney
 - *Branching Logic if selected, display:* Date of transplant
- **PPI1585826.** Liver
 - *Branching Logic if selected, display:* Date of transplant
- **PPI1585827.** Lung

- *Branching Logic if selected, display:* Date of transplant
 - **PPI158528.** Pancreas
 - *Branching Logic if selected, display:* Date of transplant
 - **PPI158529.** Intestine
 - *Branching Logic if selected, display:* Date of transplant
 - **PPI158507.** Other organ (free text field)
 - *Branching Logic if selected, display:* Date of transplant
 - **PPI158530.** Cornea
 - *Branching Logic if selected, display:* Date of transplant
 - **PPI158531.** Bone
 - *Branching Logic if selected, display:* Date of transplant
 - **PPI158532.** Valve
 - *Branching Logic if selected, display:* Date of transplant
 - **PPI158533.** Skin
 - *Branching Logic if selected, display:* Date of transplant
 - **PPI158534.** Blood vessels
 - *Branching Logic if selected, display:* Date of transplant
 - **PPI158508.** Other tissue (free text field)
 - *Branching Logic if selected, display:* Date of transplant

PPI158515. Have you traveled outside of the country within the past 6 months?⁵

- **PPI158516.** Yes

- **PPI1585817.** No
- **PPI1585818.** Don't know

Branching Logic if PPI1585803= "Yes", display the following:

If yes⁵

- **PPI1585819.** Where?
 - Free Text
- **PPI1585820.** How Long?
 - Number (Days, Weeks, Months, Years)

Your answers will help researchers to better understand health, and advance how to prevent and treat disease.

Sources

1. Brief Health Literacy Screen (B HLS)
2. Patient Reported Outcomes Measurement Information System (PROMIS) Global Health
3. California Teacher's Study
4. UK Biobank
5. Blood Bank Screening

eDocument 6. Salud general (Spanish)

Esta encuesta le hace preguntas sobre su salud en general. Su privacidad es muy importante para nosotros. Sus respuestas sólo se compartirán con los investigadores aprobados después de que hayamos quitado su nombre.

Tomará más o menos 5-10 minutos para contestar estas preguntas. Por favor, responda cada pregunta de la manera más honesta posible. Para cualquiera de estas preguntas no hay respuestas correctas o incorrectas. Es importante que responda a todas las preguntas que pueda. Estamos buscando sus propias respuestas, y no lo que piensan sus doctores, familiares, o amigos.

No sienta que tiene que tomar mucho tiempo para cada pregunta. La primera respuesta que se le ocurra es usualmente la mejor. Si no está seguro(a) cómo responder la pregunta, escoja la mejor respuesta de las opciones presentadas.

PPI1585766. ¿Qué tan seguro se siente para completar las formas/formularios por usted mismo?

- **PPI1585767.** Extremadamente
- **PPI1585768.** Bastante
- **PPI1585769.** Algo
- **PPI1585770.** Un poco
- **PPI1585771.** Nada

PPI1585772. ¿Qué tan frecuente usted tiene a alguien que lo ayuda a leer información (documentos) relacionada con su salud?

- **PPI1585773.** Siempre
- **PPI1585774.** A menudo
- **PPI1585775.** A veces
- **PPI1585776.** De vez en cuando
- **PPI1585777.** Nunca

PPI1585778. ¿Qué tan frecuente tiene problemas para conocer su estado de salud porque tiene dificultad en entender la información escrita?

- **PPI1585779.** Siempre
- **PPI1585780.** A menudo
- **PPI1585781.** A veces
- **PPI1585782.** De vez en cuando
- **PPI1585783.** Nunca

Las próximas 10 preguntas son sobre su salud y actividades diarias.

PPI1585711. En general, diría que su salud es:

- **PPI1585712.** 5 = Excelente
- **PPI1585713.** 4 = Muy buena
- **PPI1585714.** 3 = Buena
- **PPI1585715.** 2 = Pasable
- **PPI1585716.** 1 = Mala

PPI1585717. En general, diría que su calidad de vida es:

- **PPI1585718.** 5 = Excelente

- **PPI1585719.** 4 = Muy buena
- **PPI1585720.** 3 = Buena
- **PPI1585721.** 2 = Pasable
- **PPI1585722.** 1 = Mala

PPI1585723. En general, ¿cómo calificaría su salud física?

- **PPI1585724.** 5 = Excelente
- **PPI1585725.** 4 = Muy buena
- **PPI1585726.** 3 = Buena
- **PPI1585727.** 2 = Pasable
- **PPI1585728.** 1 = Mala

PPI1585729. En general, ¿cómo calificaría su salud mental, incluidos su estado de ánimo y su capacidad para pensar?

- **PPI1585730.** 5 = Excelente
- **PPI1585731.** 4 = Muy buena
- **PPI1585732.** 3 = Buena
- **PPI1585733.** 2 = Pasable
- **PPI1585734.** 1 = Mala

PPI1585735. En general, ¿cómo calificaría su satisfacción con sus actividades sociales y sus relaciones con otras personas?

- **PPI1585736.** 5 = Excelente
- **PPI1585737.** 4 = Muy buena
- **PPI1585738.** 3 = Buena
- **PPI1585739.** 2 = Pasable

- **PPI1585740.** 1 = Mala

PPI1585741. ¿En qué medida puede realizar sus actividades físicas diarias, como caminar, subir escaleras, cargar las compras o mover una silla?

- **PPI1585742.** 5 = Totalmente
- **PPI1585743.** 4 = En su mayoría
- **PPI1585744.** 3 = Moderadamente
- **PPI1585745.** 2 = Un poco
- **PPI1585746.** 1 = Para nada

PPI1585747. En los últimos 7 días, ¿cómo calificaría su dolor en promedio?

- 5 = 0 Ningún dolor
- 4 = 1
- 4 = 2
- 4 = 3
- 3 = 4
- 3 = 5
- 3 = 6
- 2 = 7
- 2 = 8
- 2 = 9
- 1 = 10 El peor dolor imaginable

PPI1585748. En los últimos 7 días, en promedio, ¿cómo calificaría su cansancio?

- **PPI1585749.** 5 = Ninguno
- **PPI1585750.** 4 = Leve
- **PPI1585751.** 3 = Moderado
- **PPI1585752.** 2 = Intenso
- **PPI1585753.** 1 = Muy intenso

PPI1585754. En general, califique en qué medida puede realizar sus actividades sociales y funciones habituales. (Esto comprende las actividades en casa, en el trabajo y en el área donde reside, así como sus responsabilidades como padre o madre, hijo/a, cónyuge, empleado/a, amigo/a, etc.)

- **PPI1585755.** 5 = Excelente
- **PPI1585756.** 4 = Muy buena
- **PPI1585757.** 3 = Buena
- **PPI1585758.** 2 = Pasable
- **PPI1585759.** 1 = Mala

PPI1585760. En los últimos 7 días, ¿Con qué frecuencia le han afectado problemas emocionales como sentir ansiedad, depresión o irritabilidad?

- **PPI1585761.** 5 = Nunca
- **PPI1585762.** 4 = Rara vez
- **PPI1585763.** 3 = Algunas veces
- **PPI1585764.** 2 = A menudo
- **PPI1585765.** 1 = Siempre

Las siguientes preguntas son sobre la salud de la mujer. La salud de la mujer es muy importante al considerar su estado de su salud general. Al responder a las siguientes

preguntas nos ayudará a tener una imagen completa de su salud en general.

PPI1585784. ¿Ha dejado de tener sus períodos menstruales (menstruación) permanentemente?

- **PPI1585785.** No
- **PPI1585786.** Sí, no tengo periodos menstruales
- **PPI1585787.** Sí, tengo periodos menstruales, pero inducidos (provocados) por hormonas
- **PPI1585788.** No estoy segura
- Prefiero no responder

Branching Logic if PPI1585784= “No estoy segura”, display PPI1585811 OR Branching Logic if PPI1585784 = “No”, display PPI1585811, then skip to PPI1585803:

PPI1585811. ¿Está usted embarazada actualmente?

- **PPI1585813.** No
- **PPI1585812.** Sí
- **PPI1585814.** No estoy segura
- Prefiero no responder

Branching Logic if PPI1585784= “Sí, no tengo períodos menstruales” or “Sí, tengo períodos menstruales, pero inducidos (provocados) por hormonas”, display the following:

PPI1585789. ¿Por qué pararon sus períodos menstruales?

- **PPI1585821.** Menopausia natural (cambio de vida)
- **PPI1585822.** Cirugía (una histerectomía para quitar el útero/matriz o una

- ooforectomía para quitar los ovarios)
- **PPI1585823.** Ablación endometrial (quitar capa interna del utero/matriz)
 - **PPI1585790.** Medicación, quimioterapia o radiación
 - Otro
 - No estoy segura
 - Prefiero no responder

Branching Logic if = “Yes”, display the following:

PPI1585791. ¿Se sometió alguna vez a una histerectomía (es decir, cirugía para quitar el útero o matriz)?

- No
- Sí
- No estoy segura
- Prefiero no responder

Branching Logic if PPI1585791 = “Yes”, display the following:

PPI1585795. ¿A qué edad tuvo la cirugía?

- _____ (edad en años)

Branching Logic if PPI1585791 = “No”, “No estoy segura” or “Prefiero no responder”, display the following:

PPI1585796. ¿Alguna vez le quitaron un ovario?

- **PPI1585797.** No
- **PPI1585798.** Sí, pero solo un ovario o parte de un ovario
- **PPI1585799.** Sí, ambos ovarios

- PPI1585800.** Sí, pero no sé si uno o ambos ovarios
- PPI1585801.** No estoy segura
- PPI1585802.** Prefiero no responder

Branching Logic if PPI1585796 = “Sí” at all, display the following:

PPI1585802. ¿A qué edad tuvo la cirugía?

- _____ (edad en años)

Como parte del estudio, es posible que se le pida una muestra de sangre. La siguiente sección incluye preguntas sobre algunas enfermedades o procedimientos previos, como un trasplante de médula ósea, que podrían causar problemas para utilizar su muestra de sangre en investigación. Además, puede ser que cierta información personal no se encuentre en su expediente médico (medical chart), que podría ser útil para los investigadores.

PPI1585803. ¿Se ha sometido a algún tipo de trasplante?

- PPI1585804.** Sí
- PPI1585805.** No
- No sé

Branching Logic if PPI1585803= “Yes”, display the following:

PPI1585806. En caso afirmativo, especifique (p. ej., trasplante de médula ósea, etc.):_____

- PPI1585824.** Corazón
 - Branching Logic if selected, display: seleccione fecha*
- PPI1585825.** Riñon
 - Branching Logic if selected, display: seleccione fecha*

- **PPI1585826.** Higado
 - *Branching Logic if selected, display:* seleccione fecha
- **PPI1585827.** Pulmon
 - *Branching Logic if selected, display:* seleccione fecha
- **PPI1585828.** Pancreas
 - *Branching Logic if selected, display:* seleccione fecha
- **PPI1585829.** Intestino
 - *Branching Logic if selected, display:* seleccione fecha
- **PPI1585807.** Otro organo (free text field)
 - *Branching Logic if selected, display:* seleccione fecha
- **PPI1585830.** Cornea
 - *Branching Logic if selected, display:* seleccione fecha
- **PPI1585831.** Hueso
 - *Branching Logic if selected, display:* seleccione fecha
- **PPI1585832.** Válvula
 - *Branching Logic if selected, display:* seleccione fecha
- **PPI1585833.** Piel
 - *Branching Logic if selected, display:* seleccione fecha
- **PPI1585834.** Vasos sanguíneos
 - *Branching Logic if selected, display:* seleccione fecha
- **PPI1585808.** Otro tejido (texto libre)
 - *Branching Logic if selected, display:* seleccione fecha

PPI1585815. ¿Ha viajado fuera del país en los últimos 6 meses?

- **PPI1585816.** Sí
- **PPI1585817.** No

Branching Logic if PPI1585803= “Sí”, display the following:

- **PPI1585819.** Si es afirmativo, ¿dónde?
 - Lugar de viaje (Texto libre)
- **PPI1585820.** Si es afirmativo ¿por cuánto tiempo?
 - Número de días
- **Para ver una lista de países, presione aquí**

La información que compartió puede ayudar a los investigadores a llegar a los próximos descubrimientos médicos importantes.