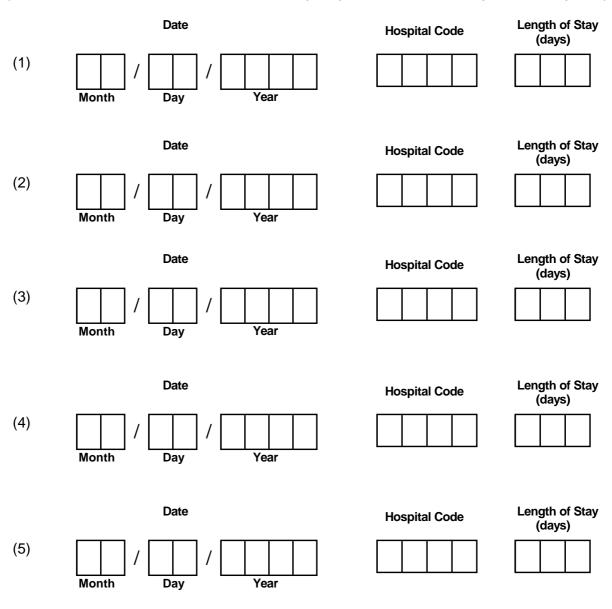
Multi-Ethnic Study of Atherosclerosis Follow-up Phone Call 3			
Mesa			
Specific Medical Conditions	Date:	Month Day Year	

Complete form for each condition reported as Yes on the "General Health" form or "General Health-Death" form. If the participant has died, change 'you' or 'your' to decedent's name for all questions below.

You said that a doctor or other health care professional told you name reported previously below]	that you had [read and mark specific condition
O A myocardial infarction or heart attack	
 O Angina pectoris or chest pain due to heart dise O Heart failure or congestive heart failure O Peripheral vascular disease, intermittent claud 	ication or
 pain in your legs from a blockage of the arterie O Atrial fibrillation O Deep Vein thrombosis or blood clots in your le O A transient ischemic attack (TIA) or mini-stroke 	gs Regarding symptoms that you had from your stroke, do you feel that you have
O Stroke	O Yes O No O Unsure
O Blockage in the carotid artery O Lung abnormality or nodule	In the last two weeks, did you require help from another person for everyday activities?
O Cancer, specify type:	O Yes O No O Unsure
Name :Address : B. What was the date of the diagnosis or hospitalization?	
(Probe for exact date. If exact date cannot be recalled, a participant to estimate month and year. Record day as	ısk / /
C. Were you in the hospital at least one night for this con interview with you on?	ndition since our last phone
	No Unsure Ask about next condition reported on "General Health" or "General Health-Death" form, and record details on an additional form. If there are no additional conditions, go to next question on "General Health" form.

D. Would you please tell me the dates of each hospitalization and where you were hospitalized? (Probe for exact date. If exact date cannot be recalled, ask participant to estimate month and year. Record day as 15.)



Ask about the next condition reported as 'Yes' on "General Health" or "General Health-Death" form and record details on an additional form. If no additional conditions are reported as 'Yes', go to next question on the form.

