

**Multi-Ethnic Study of Atherosclerosis**

**Exam 5**



**Personal History**

**Self-Administered**

**Participant Id#:**

**Acrostic:**

**Interviewer ID:**

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**Date:**

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Month

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Day

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Year

This form is intended to collect information about your background and lifestyle which may impact your risk of cardiovascular disease. Please complete all items except those which you are specifically instructed to skip. If you are unsure about the answer to a specific question, please estimate the answer to the best of your ability. If you have a question about a particular item, ask a staff member for clarification.

**1** a. Has your employment status changed since your MESA clinic visit on [Exam 4 visit date]?

**No** → Skip to #2

**Yes**



b. Choose one of the following which best describes your current occupation:

- Homemaker, not working outside the home
- Employed (or self-employed) full time
- Employed (or self-employed) part time
- Employed, but on leave for health reasons
- Employed but temporarily away from my job (other than health reasons)
- Unemployed or laid off 6 months or less
- Unemployed or laid off more than 6 months
- Retired from my usual occupation and not working
- Retired from my usual occupation but working for pay

**2** Do you do volunteer work?

**No**

**Yes**

**3** Where do you usually go for medical care?

- Doctor's office or clinic
- Hospital emergency room
- Other:

- 4 To help pay for your medical care, do you now have: (check all that apply)
- HMO or other private insurance such as Blue Cross, Aetna, 1199 Fund, etc.
  - Medicare
  - Medicaid
  - Military or Veteran's Administration sponsored
  - None
  - Other:

The following questions are about your use of alcohol and tobacco. They will help us better understand the role of smoking and alcohol use in the risk of cardiovascular disease.

5 Do you presently drink alcoholic beverages?

- Yes
- No → Skip to Question 10

6 How many glasses of red wine do you usually have per week? If less than 1 per week enter "00". (1 serving = 3.5oz glass, 1 bottle = 750 ml = 8 glasses)

7 How many glasses of white wine do you usually have per week? If less than 1 per week enter "00". (1 serving = 3.5oz glass, 1 bottle = 750 ml = 8 glasses)

8 How many cans, bottles, or glasses of beer do you usually have per week? If less than 1 per week enter "00". (1 serving = 12 oz glass, 1 bottle = 355 ml = 1 glass)

9 How many drinks of liquor or mixed drinks do you usually have per week? If less than 1 per week enter "00". (1 serving = 1.5oz or 1 shot)

10 Which of the following best describes your current smoking status?

- Never smoked → Skip to Question 14
- Former smoker, quit more than 1 year ago
- Former smoker, quit less than 1 year ago
- Current smoker
- Don't know

11 On the average of the entire time you smoked...

a. How many cigarettes did you smoke per day?   cigarettes

b. Did you inhale the cigarette smoke?  
 Not at all     Slightly     Moderately     Deeply

c. In the morning, how much time after you wake up did you smoke your first cigarette?   minutes

12 Have you smoked cigarettes during the last 30 days?

- Yes
- No → Skip to Question 14

13 On average, about how many cigarettes a day do you smoke?

14 During the past year about how many hours per week were you in close contact with people when they were smoking? (e.g. in your home, in a car, at work or other close quarters)

15. Did anyone smoke in your residence in the past 12 months? (This includes you.)

- Yes →
- No (Skip to Question 16)
- Don't know (Skip to Question 16)

15a. On average, how often did someone smoke in your residence in the past 12 months?

- Less than once a month
- A few days each month
- More than half of the days of the month, but less than daily
- Every day or almost every day

15b. On average, how many cigarettes per day were smoked in the residence by each smoker in the past 12 months?

Smoker 1:  cigarette(s) per day

Smoker 2:  cigarette(s) per day

Smoker 3:  cigarette(s) per day

15c. On average, how many cigars per day were smoked in the residence by each smoker in the past 12 months?

Smoker 1:  cigar(s) per day

Smoker 2:  cigar(s) per day

16 As an adult, have you ever lived with a regular cigarette smoker (not including yourself) who smoked in your home?

- Yes → How many total years did you live with them when they were smoking?
- No
- Don't know

 years

17 As an adult, have you ever spent time on a regular basis, when you were not at home, indoors where there were people smoking cigarettes (for example, at work)?

- Yes → For how many total years during your adult life did you spend time on a regular basis, when you are not at home, indoors where there were people smoking cigarettes (for example, at work)?
- No
- Don't know

 years

The following questions have to do with family finances. We know from other research that financial strain is common and very important to consider in understanding people's health. The following questions will be used to help give us a picture of the various financial situations experienced by persons participating in the MESA study. Any information you provide is strictly confidential and will be used for research purposes only.

**18** Below is a list of income groups. Please choose which group best represents your total combined family income for the past 12 months. This includes the total income before taxes earned in the past year by all family members living with you. Please include money from jobs, net income from business, farm or rent, pensions, dividends, welfare, social security payments and any other money received by you or any other family member living with you.

- Less than \$5,000                       \$20,000 - \$24,999                       \$50,000 - \$74,999
- \$5,000 - \$7,999                       \$25,000 - \$29,999                       \$75,000 - \$99,999
- \$8,000 - \$11,999                       \$30,000 - \$34,999                       \$100,000 - \$124,999
- \$12,000 - \$15,999                       \$35,000 - \$39,999                       \$125,000 - \$149,999
- \$16,000 - \$19,999                       \$40,000 - \$49,999                       \$150,000 or more

**19 a** Including yourself, how many people are supported by the income listed in the previous question?

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**b** Including yourself, how many of these are...

(Enter 00 if no one in that age category is supported by the given income)

1. Children under 18? 

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2. Adults 65 and over? 

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For MESA Field Center Use Only:

Form completed     Home     Clinic

Completed by:     Self-Administered     Interviewer-Administered