

Multi-Ethnic Study of Atherosclerosis

Exam 5



Physical Activity

Self Administered

Participant Id#: IDNO

Acrostic:

Interviewer ID:

pacttid5

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Date:

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pactdt5

Think about the types of activities you did in a typical week in the past month. Please indicate whether you did or did not perform each of the following activities in a typical week. For each item that you respond 'yes', you will be asked for the number of days in a typical week you did these activities and the average amount of time per day in hours and minutes.

Intensity Levels:

Light → easy effort

Moderate → harder than light but not all-out

Heavy → all-out

Example:

Conditioning Activities

Moderate Effort:

Low impact aerobics, slow bicycling, rowing, leisurely swimming, health club machines - moderate intensity

		Days/Week							Hours/Day						Minutes/Day			
Y	N	1	2	3	4	5	6	7	1	2	3	4	5	5+	5	15	30	45
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>											

In this example, the activity was done 3 days per week, 1 hour and 30 minutes per day.

In a typical week in the past month, did you do:

		Days/Week							Hours/Day						Minutes/Day			
1		Light Effort: Such as cooking, dishes, ironing, straightening up, laundry, shopping							Light Effort: Such as cooking, dishes, ironing, straightening up, laundry, shopping						Light Effort: Such as cooking, dishes, ironing, straightening up, laundry, shopping			
hhch15		hhldy5							hhlhr5						hhlmn5			
Y	N	1	2	3	4	5	6	7	1	2	3	4	5	5+	5	15	30	45
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2		Moderate or Heavy Effort: Such as heavy cleaning, scrubbing, mopping, home repairs, washing car, vacuuming							Moderate or Heavy Effort: Such as heavy cleaning, scrubbing, mopping, home repairs, washing car, vacuuming						Moderate or Heavy Effort: Such as heavy cleaning, scrubbing, mopping, home repairs, washing car, vacuuming			
hhchmh5		hshmhd5							shmhhr5						shmhmn5			
Y	N	1	2	3	4	5	6	7	1	2	3	4	5	5+	5	15	30	45
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

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In a typical week in the past month, did you do:

Lawn/Yard/Garden/Farm		Days/Week	Hours/Day	Minutes/Day
3 <u>Moderate Effort:</u> Such as weeding, mowing grass, raking, cleaning garage, sweeping	yardm5	yardmdy5	yardmhr5	yardmmn5
	Y N O O	1 2 3 4 5 6 7 O O O O O O O	1 2 3 4 5 5+ O O O O O O	5 15 30 45 O O O O
4 <u>Heavy Effort:</u> Such as digging dirt, shoveling snow, mending fences, chopping wood	yardh5	yardhdy5	yardhhr5	yardhmn5
	Y N O O	1 2 3 4 5 6 7 O O O O O O O	1 2 3 4 5 5+ O O O O O O	5 15 30 45 O O O O
Care of Children/Adults				
5 <u>Light Effort:</u> Such as bathing, feeding, changing diapers, playing with child	carel5	careldy5	carelhr5	carelmn5
	Y N O O	1 2 3 4 5 6 7 O O O O O O O	1 2 3 4 5 5+ O O O O O O	5 15 30 45 O O O O
6 <u>Moderate Effort:</u> Such as lifting and carrying, pushing wheelchair or stroller	carem5	caremdy5	caremhr5	caremmn5
	Y N O O	1 2 3 4 5 6 7 O O O O O O O	1 2 3 4 5 5+ O O O O O O	5 15 30 45 O O O O
Walking (not at work)				
7 Walking to get places - to the bus, car, work, into the store	walk5	walkdy5	walkhr5	walkmn5
	Y N O O	1 2 3 4 5 6 7 O O O O O O O	1 2 3 4 5 5+ O O O O O O	5 15 30 45 O O O O
8 Walking for exercise, pleasure, social reasons, walking during work breaks, walking the dog	walkex5	wlkexdy5	wlkexhr5	wlkexmn5
	Y N O O	1 2 3 4 5 6 7 O O O O O O O	1 2 3 4 5 5+ O O O O O O	5 15 30 45 O O O O
Dancing/Sport Activities				
9 Dancing in church, ceremonies or for pleasure	dance5	dancedy5	dancehr5	dancemn5
	Y N O O	1 2 3 4 5 6 7 O O O O O O O	1 2 3 4 5 5+ O O O O O O	5 15 30 45 O O O O
10 Team sports - softball, volleyball, basketball, soccer	teams5	tmspdy5	tmsphr5	tmspmn5
	Y N O O	1 2 3 4 5 6 7 O O O O O O O	1 2 3 4 5 5+ O O O O O O	5 15 30 45 O O O O
11 Dual sports - tennis, racketball, paddleball	duals5	dlspdy5	dlsp5hr5	dlspm5n5
	Y N O O	1 2 3 4 5 6 7 O O O O O O O	1 2 3 4 5 5+ O O O O O O	5 15 30 45 O O O O

In a typical week in the past month, did you do:

12 Individual activities - golf, bowling, yoga, T'ai Chi	indact5		Days/Week indacy5							Hours/Day indachr5						Minutes/Day indacmn5			
	Y	N	1	2	3	4	5	6	7	1	2	3	4	5	5+	5	15	30	45
	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>															
Conditioning Activities																			
13 <u>Moderate Effort</u> : Low impact aerobics, slow bicycling, rowing, leisurely swimming, health club machines - moderate intensity	condmod5		condmdy5							condmhr5						condmmn5			
	Y	N	1	2	3	4	5	6	7	1	2	3	4	5	5+	5	15	30	45
	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>															
14 <u>Heavy Effort</u> : High impact aerobics, fast bicycling, running, jogging, fast swimming, health club machines - vigorous intensity, judo, kickboxing, karate	condhvy5		condhdy5							condhhr5						condhmn5			
	Y	N	1	2	3	4	5	6	7	1	2	3	4	5	5+	5	15	30	45
	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>															
Leisure Activities																			
15 Sit or recline and watch TV	wachtv5		wchtvdy5							wchtvhr5						wchtvmn5			
	Y	N	1	2	3	4	5	6	7	1	2	3	4	5	5+	5	15	30	45
	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>															

Occupational or Volunteer Activities (if not working or volunteering, skip to Q. 21)

Fill in the circles for the time you spent in each activity at work or volunteering. The hours per day for all activities should equal the total hours per day you work or volunteer.

At work or volunteering, did you do:

16 <u>Light Effort</u> : While sitting (e.g. in an office, laboratory, child care, etc.)	wrklsit5		Hours/Day wksithr5																
	Yes	No	<1	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
	<input type="radio"/>																		
17 <u>Light Effort</u> : While standing (e.g. filing, copying, clerking, assembly, nursing, farming, etc.)	wrklstd5		Hours/Day wkstdhr5																
	Yes	No	<1	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
	<input type="radio"/>																		

18 Moderate Effort: While standing and/or walking (e.g. nursing, custodian, housekeeping), lifting & pushing, sustained walking (e.g. making deliveries)

wrkmod5

Yes No

Hours/Day

wkmodhr5

<1 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16

19 Heavy Effort: Manual labor, ranch hand, farm labor, lifting, carrying, climbing, loading/unloading trucks

wrkhvy5

Yes No

Hours/Day

wkhvyhr5

<1 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16

20 When you walk outside of your home, what is your usual pace?

- No walking at all
- Casual strolling (up to 2 mph)
- Average or normal (2 - 3 mph)
- Fairly briskly (4 - 5 mph)
- Brisk or striding (more than 5 mph)

wlkpace5

For MESA Field Center Use Only:

Completed by: Self-Administered Interviewer-Administered