The first set of questions asks about your birth and when you were a baby.

1. When you were born, about how much did you weigh? (Give your best guess.)
   - Less than 6 pounds
   - 6 pounds to 7 pounds, 15 ounces
   - 8 pounds to 9 pounds, 15 ounces
   - 10 or more pounds
   - Don't know
   - [ ] 1
   - [ ] 2
   - [ ] 3
   - [ ] 4
   - [ ] 9

2. When you were born, were you:
   - Full term (pregnancy lasted about 9 months)
   - 4 or more weeks premature
   - Don't know
   - [ ] 1
   - [ ] 2
   - [ ] 9

3. When you were born, were you a twin or triplet?
   - [ ] 0 No
   - [ ] 1 Yes

4. When you were a baby, did your mother breast feed you?
   - [ ] 0 No
   - [ ] 1 Yes
   - [ ] 9 Don't know
The next set of questions ask about your coffee and tea drinking habits.

5. Do you usually drink coffee each day?
   - [ ] 0 No
   - [ ] 1 Yes
   
   5.1. How many cups of regular coffee (not decaf) do you usually drink each day? (Count tall [12 oz. or more] cups and espresso drinks made with double shots of espresso as 2 cups.)
   - [ ] 0 None
   - [ ] 1 1 cup
   - [ ] 2 2-3 cups
   - [ ] 3 4-5 cups
   - [ ] 4 6 or more cups

   5.2. How many cups of decaf coffee do you usually drink each day? (Count tall [12 oz. or more] cups and espresso drinks made with double shots of espresso as 2 cups.)
   - [ ] 0 None
   - [ ] 1 1 cup
   - [ ] 2 2-3 cups
   - [ ] 3 4-5 cups
   - [ ] 4 6 or more cups

   5.3. How is the coffee usually made? (Mark one or two.)
   - [ ] 1 Drip
   - [ ] 2 Espresso
   - [ ] 3 Instant
   - [ ] 4 Boiled
   - [ ] 5 Percolated
   - [ ] 6 French Press

6. Do you usually drink tea each day? (Do not include decaf or herbal tea.)
   - [ ] 0 No
   - [ ] 1 Yes
   
   6.1. How many cups of tea do you usually drink each day? (Do not include decaf or herbal tea.)
   - [ ] 1 cup
   - [ ] 2 2-3 cups
   - [ ] 3 4-5 cups
   - [ ] 4 6 or more cups

Go to the next page.
The next set of questions ask about your alcohol drinking habits. For the questions below, one drink of alcohol is equal to one can of beer, one glass of wine, or one shot of liquor (whiskey, brandy or gin).

7. During your entire life, have you had 12 drinks or more of any kind of alcoholic drink?
   - [ ] 0 No
   - [ ] 1 Yes

7.1. When you were between 14 and 17 years old, how many drinks of alcohol did you usually have?

<table>
<thead>
<tr>
<th>None or less than 1 each month</th>
<th>1-3 each month</th>
<th>1-2 each week</th>
<th>3-6 each week</th>
<th>1-2 each day</th>
<th>3 or more each day</th>
</tr>
</thead>
<tbody>
<tr>
<td>[ ] 0</td>
<td>[ ] 1</td>
<td>[ ] 2</td>
<td>[ ] 3</td>
<td>[ ] 4</td>
<td>[ ] 5</td>
</tr>
</tbody>
</table>

7.2. When you were between 18 and 22 years old, how many drinks of alcohol did you usually have?

<table>
<thead>
<tr>
<th>None or less than 1 each month</th>
<th>1-3 each month</th>
<th>1-2 each week</th>
<th>3-6 each week</th>
<th>1-2 each day</th>
<th>3 or more each day</th>
</tr>
</thead>
<tbody>
<tr>
<td>[ ] 0</td>
<td>[ ] 1</td>
<td>[ ] 2</td>
<td>[ ] 3</td>
<td>[ ] 4</td>
<td>[ ] 5</td>
</tr>
</tbody>
</table>

7.3. When you were between 23 and 29 years old, how many drinks of alcohol did you usually have?

<table>
<thead>
<tr>
<th>None or less than 1 each month</th>
<th>1-3 each month</th>
<th>1-2 each week</th>
<th>3-6 each week</th>
<th>1-2 each day</th>
<th>3 or more each day</th>
</tr>
</thead>
<tbody>
<tr>
<td>[ ] 0</td>
<td>[ ] 1</td>
<td>[ ] 2</td>
<td>[ ] 3</td>
<td>[ ] 4</td>
<td>[ ] 5</td>
</tr>
</tbody>
</table>

7.4. When you were between 30 and 49 years old, how many drinks of alcohol did you usually have?

<table>
<thead>
<tr>
<th>None or less than 1 each month</th>
<th>1-3 each month</th>
<th>1-2 each week</th>
<th>3-6 each week</th>
<th>1-2 each day</th>
<th>3 or more each day</th>
</tr>
</thead>
<tbody>
<tr>
<td>[ ] 0</td>
<td>[ ] 1</td>
<td>[ ] 2</td>
<td>[ ] 3</td>
<td>[ ] 4</td>
<td>[ ] 5</td>
</tr>
</tbody>
</table>

7.5. When you were about 50 years old, how many drinks of alcohol did you usually have?

<table>
<thead>
<tr>
<th>None or less than 1 each month</th>
<th>1-3 each month</th>
<th>1-2 each week</th>
<th>3-6 each week</th>
<th>1-2 each day</th>
<th>3 or more each day</th>
</tr>
</thead>
<tbody>
<tr>
<td>[ ] 0</td>
<td>[ ] 1</td>
<td>[ ] 2</td>
<td>[ ] 3</td>
<td>[ ] 4</td>
<td>[ ] 5</td>
</tr>
</tbody>
</table>

Go to the next page.
The next set of questions ask about being around people who smoke.

8. As a child (less than 18 years old), did you ever live with someone who smoked cigarettes inside your home?

- [ ] 0 No
- [ ] 1 Yes
- [ ] 9 Don't know

8.1. As a child, how many years did you live with someone who smoked inside your home?

- [ ] 1 Less than 1 year
- [ ] 2 1-4 years
- [ ] 3 5-9 years
- [ ] 4 10-18 years

9. Since age 18, have you ever lived with someone (including a parent, husband, or other adult person) who smoked cigarettes inside your home?

- [ ] 0 No
- [ ] 1 Yes

9.1. Since age 18, how many years have you lived with someone who smoked cigarettes inside your home?

- [ ] 1 Less than 1 year
- [ ] 2 1-4 years
- [ ] 3 5-9 years
- [ ] 4 10-19 years
- [ ] 5 20-29 years
- [ ] 6 30-39 years
- [ ] 7 40 or more years

9.2. Does anyone living with you now smoke cigarettes inside your home?

- [ ] 0 No
- [ ] 1 Yes

9.3. Please mark all the people who live with you now and who smoke cigarettes inside your home.

- [ ] 1 Husband or partner
- [ ] 2 Son(s) or daughter(s)
- [ ] 3 Other person/people

Go to the next page.
10. Have you ever worked in a space where people smoked cigarettes?

- 0 No
- 1 Yes

10.1. How many total years have you worked in a space where people smoked cigarettes?

- Less than 1 year
- 1-4 years
- 5-9 years
- 10-19 years
- 20-29 years
- 30-39 years
- 40 or more years

10.2. Do you now work in a space where people smoke?

- 0 No
- 1 Yes

The next set of questions is about breast exams and breast disease.

11. Have you ever done a breast self-examination (a breast exam on yourself)?

- 0 No
- 1 Yes

11.1. How many times have you done a breast self-exam in the last 12 months?

- None
- 1-5 times
- 6-10 times
- 11 or more times

12. Have you ever had a breast physical exam done by a doctor, nurse, or physician assistant?

- 0 No
- 1 Yes

12.1. How many of these exams have you had in the last 5 years?

- None
- 1 exam
- 2 exams
- 3 exams
- 4 exams
- 5 or more exams

12.2. How long ago did you last have a breast exam by a doctor, nurse, or physician assistant?

- Less than 1 year ago
- 1 year ago
- 2 years ago
- 3 years ago
- 4 years ago
- 5 or more years ago

Go to the next page.
13. Has a doctor ever told you that you had benign breast disease or fibrocystic disease in your breasts?
   - [ ] 0 No
   - [ ] 1 Yes

14. Have you had a mammogram (x-ray of the breast to look for cancer or other breast problems) in the last 5 years?
   - [ ] 0 No
   - [ ] 1 Yes
   
   **14.1. How many mammograms have you had in the last 5 years?**
   - [ ] 1
   - [ ] 2
   - [ ] 3
   - [ ] 4
   - [ ] 5 or more

The next set of questions are about the use of powders (talc, baby powder, deodorant powder).

15. Have you ever used powder on your private parts (genital areas)?
   - [ ] 0 No
   - [ ] 1 Yes
   
   **15.1. For how many years?**
   - Less than 1 year
   - 1-4 years
   - 5-9 years
   - 10-19 years
   - 20 or more years
   - [ ] 1
   - [ ] 2
   - [ ] 3
   - [ ] 4
   - [ ] 5

16. Did you ever use a diaphragm (a birth control device that fits over the opening of your womb)?
   - [ ] 0 No
   - [ ] 1 Yes
   
   **16.1. Did you ever use powder on your diaphragm?**
   - [ ] 0 No
   - [ ] 1 Yes
   
   **16.2. For how many years did you use powder on your diaphragm?**
   - Less than 1 year
   - 1-4 years
   - 5-9 years
   - 10-19 years
   - 20 or more years
   - [ ] 1
   - [ ] 2
   - [ ] 3
   - [ ] 4
   - [ ] 5

Go to the next page.
17. Did you ever use powder on a sanitary napkin or pad?

- [ ] 0 No
- [ ] 1 Yes

**17.1. For how many years?**

<table>
<thead>
<tr>
<th>Duration</th>
<th>Options</th>
</tr>
</thead>
<tbody>
<tr>
<td>Less than 1 year</td>
<td>[ ] 1</td>
</tr>
<tr>
<td>1-4 years</td>
<td>[ ] 2</td>
</tr>
<tr>
<td>5-9 years</td>
<td>[ ] 3</td>
</tr>
<tr>
<td>10-19 years</td>
<td>[ ] 4</td>
</tr>
<tr>
<td>20 or more years</td>
<td>[ ] 5</td>
</tr>
</tbody>
</table>

---

The next set of questions ask about your use of electric blankets.

18. Have you ever used an electric blanket, electric mattress pad, or heated water bed on at least half the days in any one month period?

- [ ] 0 No
- [ ] 1 Yes

**18.1. How many years total did you use an electric blanket, electric mattress pad, or heated water bed?**

<table>
<thead>
<tr>
<th>Duration</th>
<th>Options</th>
</tr>
</thead>
<tbody>
<tr>
<td>Less than 1 year</td>
<td>[ ] 1</td>
</tr>
<tr>
<td>1-4 years</td>
<td>[ ] 2</td>
</tr>
<tr>
<td>5-9 years</td>
<td>[ ] 3</td>
</tr>
<tr>
<td>10-19 years</td>
<td>[ ] 4</td>
</tr>
<tr>
<td>20 or more years</td>
<td>[ ] 5</td>
</tr>
</tbody>
</table>

**18.2. In those years, how many months per year did you use an electric blanket, electric mattress pad, or heated water bed on at least half the days of the month?**

<table>
<thead>
<tr>
<th>Months per year</th>
<th>Options</th>
</tr>
</thead>
<tbody>
<tr>
<td>Less than 1 month per year</td>
<td>[ ] 1</td>
</tr>
<tr>
<td>1-3 months per year</td>
<td>[ ] 2</td>
</tr>
<tr>
<td>4-6 months per year</td>
<td>[ ] 3</td>
</tr>
<tr>
<td>7-9 months per year</td>
<td>[ ] 4</td>
</tr>
<tr>
<td>10-12 months per year</td>
<td>[ ] 5</td>
</tr>
</tbody>
</table>

**18.3. When you used the electric blanket, electric mattress pad, or heated water bed, did you leave it turned on most of the time while you were sleeping, or did you use it only to warm the bed before you went to sleep?**

- [ ] 1 On most of the time
- [ ] 2 Warm the bed only

**18.4. Have you used an electric blanket, electric mattress pad, or heated water bed during the past year?**

- [ ] 0 No
- [ ] 1 Yes

Go to the next page.
**Religion**

19. What is your religion?

- [□] 0 None
- [□] 1 Catholic
- [□] 2 Baptist
- [□] 3 Episcopalian or Anglican
- [□] 4 Lutheran
- [□] 5 Methodist
- [□] 6 Presbyterian
- [□] 7 Adventist
- [□] 8 Mormon/Latter Day Saints
- [□] 9 Other Christian
- [□] 10 Jewish
- [□] 11 Eastern (Buddhist, Hindu)
- [□] 12 Muslim
- [□] 88 Other

The next set of questions ask about some of your usual activities.

20. About how many hours each week do you usually spend doing heavy (strenuous) indoor household chores such as scrubbing floors, sweeping, or vacuuming?

<table>
<thead>
<tr>
<th>Less than 1 hour</th>
<th>1-3 hours</th>
<th>4-6 hours</th>
<th>7-9 hours</th>
<th>10 or more hours</th>
</tr>
</thead>
<tbody>
<tr>
<td>[□] 1</td>
<td>[□] 2</td>
<td>[□] 3</td>
<td>[□] 4</td>
<td>[□] 5</td>
</tr>
</tbody>
</table>

21. About how many months during the year do you usually do things in the yard, such as mowing, raking, gardening, or shoveling snow?

<table>
<thead>
<tr>
<th>Less than 1 month</th>
<th>1-3 months</th>
<th>4-6 months</th>
<th>7-9 months</th>
<th>10 or more months</th>
</tr>
</thead>
<tbody>
<tr>
<td>[□] 1</td>
<td>[□] 2</td>
<td>[□] 3</td>
<td>[□] 4</td>
<td>[□] 5</td>
</tr>
</tbody>
</table>

21.1. When you do these things in the yard, how many hours each week do you do them?

<table>
<thead>
<tr>
<th>Less than 1 hour</th>
<th>1-3 hours</th>
<th>4-6 hours</th>
<th>7-9 hours</th>
<th>10 or more hours</th>
</tr>
</thead>
<tbody>
<tr>
<td>[□] 1</td>
<td>[□] 2</td>
<td>[□] 3</td>
<td>[□] 4</td>
<td>[□] 5</td>
</tr>
</tbody>
</table>

22. During a usual day and night, about how many hours do you spend sitting? Be sure to include the time you spend sitting at work, sitting at the table eating, driving or riding in a car or bus, and sitting up watching TV or talking.

<table>
<thead>
<tr>
<th>Less than 1 hour</th>
<th>4-5 hours</th>
<th>6-7 hours</th>
<th>8-9 hours</th>
<th>10-11 hours</th>
<th>12-13 hours</th>
<th>14-15 hours</th>
<th>16 or more hours</th>
</tr>
</thead>
<tbody>
<tr>
<td>[□] 1</td>
<td>[□] 2</td>
<td>[□] 3</td>
<td>[□] 4</td>
<td>[□] 5</td>
<td>[□] 6</td>
<td>[□] 7</td>
<td>[□] 8</td>
</tr>
</tbody>
</table>
23. During a usual **day and night**, about how many hours do you spend sleeping or lying down with your feet up? Be sure to include the time you spend sleeping or trying to sleep at night, resting or napping, and lying down watching TV.

<table>
<thead>
<tr>
<th>Less than 4 hours</th>
<th>4-5 hours</th>
<th>6-7 hours</th>
<th>8-9 hours</th>
<th>10-11 hours</th>
<th>12-13 hours</th>
<th>14-15 hours</th>
<th>16 or more hours</th>
</tr>
</thead>
<tbody>
<tr>
<td>☐ 1</td>
<td>☐ 2</td>
<td>☐ 3</td>
<td>☐ 4</td>
<td>☐ 5</td>
<td>☐ 6</td>
<td>☐ 7</td>
<td>☐ 8</td>
</tr>
</tbody>
</table>

The next set of questions asks about work and jobs you have had.

24. Did you ever live or work on a farm?

☐ 0 No ☐ 1 Yes

24.1. For how many years?

<table>
<thead>
<tr>
<th>Less than 5 years</th>
<th>5-9 years</th>
<th>10-14 years</th>
<th>15-19 years</th>
<th>20 or more years</th>
</tr>
</thead>
<tbody>
<tr>
<td>☐ 1</td>
<td>☐ 2</td>
<td>☐ 3</td>
<td>☐ 4</td>
<td>☐ 5</td>
</tr>
</tbody>
</table>

25. Did you ever work for one year or more as a hairdresser, beautician, or cosmetologist where you worked with hair dyes?

☐ 0 No ☐ 1 Yes

25.1. For how many years?

<table>
<thead>
<tr>
<th>1-5 years</th>
<th>5-9 years</th>
<th>10-14 years</th>
<th>15-19 years</th>
<th>20 or more years</th>
</tr>
</thead>
<tbody>
<tr>
<td>☐ 1</td>
<td>☐ 2</td>
<td>☐ 3</td>
<td>☐ 4</td>
<td>☐ 5</td>
</tr>
</tbody>
</table>

Go to the next page.
26. Have you ever had a job for which you were paid?

☐ No  ☐ Yes

What are the 3 full-time or part-time jobs that you have held the longest length of time since you were 18 years old? Please start with your most recent job. (If you worked less than one year at a job, write "01" in the boxes for total years worked.)

<table>
<thead>
<tr>
<th>Your job</th>
<th>What did the company make or do?</th>
<th>Age Started This Job</th>
<th>Total number of years worked at this job</th>
</tr>
</thead>
<tbody>
<tr>
<td>26.1</td>
<td></td>
<td>___ years old</td>
<td>___ years</td>
</tr>
<tr>
<td>(most recent)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>26.2</td>
<td></td>
<td>___ years old</td>
<td>___ years</td>
</tr>
<tr>
<td>26.3</td>
<td></td>
<td>___ years old</td>
<td>___ years</td>
</tr>
</tbody>
</table>

The next set of questions asks about your height and weight at different ages since age 18. If you don't remember exactly, give your best guess.

27. How tall were you (without shoes on) at about age 18 (your tallest adult height)?
   __ feet  ___ inches

28. What was your weight at about age 18 (when you were not pregnant)?
   ____ pounds

29. What was your weight at about age 35 (when you were not pregnant)?
   ____ pounds

30. What was your weight at about age 50 (when you were not pregnant)?
   ____ pounds

31. What was your maximum adult weight (the most you ever weighed since you were 18 years old) when you were not pregnant?
   ____ pounds
32. How old were you when you were at your maximum adult weight? (Mark all that apply.)

- 18-29 years old 
- 30-39 years old 
- 40-49 years old 
- 50-59 years old 
- 60-69 years old 
- 70 years old or older

33. What was your minimum adult weight (the least you ever weighed since you were 18 years old)?

___ ___ ___ ___ ___ ___ pounds

34. How old were you when you were at your minimum adult weight? (Mark all that apply.)

- 18-29 years old 
- 30-39 years old 
- 40-49 years old 
- 50-59 years old 
- 60-69 years old 
- 70 years old or older

Weight Loss

35. Within the last 20 years, when you were not pregnant or sick, did you ever lose 10 pounds or more on purpose?

- No
- Yes

35.1. How many times did you lose 50 pounds or more?

- None
- 1-2 times
- 3-4 times
- 5-6 times
- 7 or more times

35.2. How many times did you lose at least 20 pounds, but not more than 49 pounds?

- None
- 1-2 times
- 3-4 times
- 5-6 times
- 7 or more times

35.3. How many times did you lose at least 10 pounds, but not more than 19 pounds?

- None
- 1-2 times
- 3-4 times
- 5-6 times
- 7 or more times

36. How long have you been within 10 pounds of your current weight (do not count times when you were pregnant or sick)?

___ ___ ___ ___ ___ ___ years
The next set of questions asks about places you have lived.

37. How many years have you lived in the state you **now live in**?
   - Less than 5 years
   - 5-9 years
   - 10-19 years
   - 20 years or more
   - [ ] 1
   - [ ] 2
   - [ ] 3
   - [ ] 4
   If in the U.S., which state? [ ]
   If not in the U.S., which country? [ ]

38. Where were you born? ________________ ________________

39. Where did you live at age 15? ________________ ________________

40. Where did you live at age 35? ________________ ________________

41. Where did you live at age 50? ________________ ________________

42. In what state or country have you lived the longest? ________________ ________________

43. What is the date you finished answering this form?
   - month [ ]
   - day [ ]
   - year [ ]

Thank you. Please take a moment to review any questions you may have missed. Feel free to write any comments here:

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________