GUTS 2019 M

Thank you for your continued participation in GUTS.

This questionnaire should take about 30 minutes to complete.

This year, we are doing new environmental research based on your lifetime residential history. For these questions, it might be helpful to have on hand all the addresses where you have lived longer than 6 months.

If you need to leave the survey for any length of time, the page may time out, but your answers will be saved. You can log in again at www.gutslogin.org and resume where you left off.

There are 391 questions in this survey

Check all that apply

Personal Information
[]What is your current status?
Choose one of the following answers
Please choose only one of the following:
Never married Married Living with partner Separated Divorced Widowed
[]How much do you weigh? Your answer must be between 80 and 800 Only an integer value may be entered in this field.
Please write your answer here:pounds
[]Which one of the following best describes your feelings? Choose one of the following answers
Please choose only one of the following:
Completely heterosexual (attracted to persons of the opposite sex) Mostly heterosexual Bisexual (equally attracted to men and women) Mostly homosexual Completely homosexual (gay/lesbian, attracted to persons of the same sex) Not sure
[]How do you describe yourself? Choose one of the following answers
Please choose only one of the following:
Female Male Transgender Do not identify as female, or transgender
[]In the PAST 12 MONTHS, the person(s) with whom you have had sexual contact (however you define it) is (are):
Choose one of the following answers
Please choose only one of the following:
 ☐ I have not had sexual contact with anyone. ☐ Female(s) ☐ Male(s) ☐ Female(s) and Male(s)
[]Please describe your CURRENT work status:

Working full time
☐ Working part time ☐ Student
☐ In the military
☐ Volunteering
Staying at home with children/taking care of family
On maternity or family leave from job
Unemployed, laid off, or looking for work
Not working due to illness or disability
[]If you are unemployed, laid off, looking for work, or not working due to illness or disability, how long have you been out of work?
Only answer this question if the following conditions are met:
LOGIC
Choose one of the following answers
Please choose only one of the following:
C Less than 1 week
○ 1-3 weeks
① 1 month
2-3 months A-5 months
O 6-7 months
O 8-9 months
O 10-11 months
O 12+ months
[]What has been your main occupation DURING YOUR ADULTHOOD?
Only answer this question if the following conditions are met:
LOGIC
Choose one of the following answers
Choose one of the following answers Please choose only one of the following:
Please choose only one of the following: Artist or art-related Building and grounds, cleaning and maintenance
Please choose only one of the following: Artist or art-related Building and grounds, cleaning and maintenance Construction and building trades
Please choose only one of the following: Artist or art-related Building and grounds, cleaning and maintenance
Please choose only one of the following: Artist or art-related Building and grounds, cleaning and maintenance Construction and building trades Farming: animal and agriculture
Please choose only one of the following: Artist or art-related Building and grounds, cleaning and maintenance Construction and building trades Farming: animal and agriculture Firefighter
Please choose only one of the following: Artist or art-related Building and grounds, cleaning and maintenance Construction and building trades Farming: animal and agriculture Firefighter Food preparation and serving Forestry Medical, dental, and health-care-related
Please choose only one of the following: Artist or art-related Building and grounds, cleaning and maintenance Construction and building trades Farming: animal and agriculture Firefighter Food preparation and serving Forestry Medical, dental, and health-care-related Military
Please choose only one of the following: Artist or art-related Building and grounds, cleaning and maintenance Construction and building trades Farming: animal and agriculture Firefighter Food preparation and serving Forestry Medical, dental, and health-care-related Military Mining or drilling
Please choose only one of the following: Artist or art-related Building and grounds, cleaning and maintenance Construction and building trades Farming: animal and agriculture Firefighter Food preparation and serving Forestry Medical, dental, and health-care-related Military
Please choose only one of the following: Artist or art-related Building and grounds, cleaning and maintenance Construction and building trades Farming: animal and agriculture Firefighter Food preparation and serving Forestry Medical, dental, and health-care-related Military Mining or drilling Police or correctional
Please choose only one of the following: Artist or art-related Building and grounds, cleaning and maintenance Construction and building trades Farming: animal and agriculture Firefighter Food preparation and serving Forestry Medical, dental, and health-care-related Military Mining or drilling Police or correctional Production-related * Professional ** Sales, office, retail, and administrative
Please choose only one of the following: Artist or art-related Building and grounds, cleaning and maintenance Construction and building trades Farming: animal and agriculture Firefighter Food preparation and serving Forestry Medical, dental, and health-care-related Military Mining or drilling Police or correctional Production-related * Professional ** Sales, office, retail, and administrative Transportation: bus, car, or van driver
Please choose only one of the following: Artist or art-related Building and grounds, cleaning and maintenance Construction and building trades Farming: animal and agriculture Firefighter Food preparation and serving Forestry Medical, dental, and health-care-related Military Mining or drilling Police or correctional Production-related * Professional ** Sales, office, retail, and administrative Transportation: bus, car, or van driver Transportation: truck driver
Please choose only one of the following: Artist or art-related Building and grounds, cleaning and maintenance Construction and building trades Farming: animal and agriculture Firefighter Food preparation and serving Forestry Medical, dental, and health-care-related Military Mining or drilling Police or correctional Production-related * Professional ** Sales, office, retail, and administrative Transportation: bus, car, or van driver
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Please choose only one of the following: Artist or art-related Building and grounds, cleaning and maintenance Construction and building trades Farming: animal and agriculture Firefighter Food preparation and serving Forestry Medical, dental, and health-care-related Military Mining or drilling Police or correctional Production-related * Professional ** Sales, office, retail, and administrative Transportation: truck driver Transportation: truck driver Transportation: truck driver Vehicle, engine, or aircraft mechanic Welder Other(write in)
Please choose only one of the following: Artist or art-related Building and grounds, cleaning and maintenance Construction and building trades Farming: animal and agriculture Firefighter Food preparation and serving Forestry Medical, dental, and health-care-related Military Mining or drilling Police or correctional Production-related * Professional ** Sales, office, retail, and administrative Transportation: truck driver Transportation: truck driver Transportation: other Vehicle, engine, or aircraft mechanic Welder
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Please choose only one of the following: Artist or art-related Building and grounds, cleaning and maintenance Construction and building trades Farming: animal and agriculture Firefighter Food preparation and serving Forestry Medical, dental, and health-care-related Military Mining or drilling Police or correctional Production-related * Professional ** Sales, office, retail, and administrative Transportation: truck driver Transportation: truck driver Transportation: truck driver Transportation: other Vehicle, engine, or aircraft mechanic Welder Other (write in) **Machine operator, manufacturing, assembling, or processing **Including business, financial, engineering, computer, science, media, education [] In the PAST 12 MONTHS, on average, how many hours per week did you work? Only answer this question if the following conditions are met:
Please choose only one of the following: Artist or art-related Building and grounds, cleaning and maintenance Construction and building trades Farming: animal and agriculture Firefighter Food preparation and serving Forestry Medical, dental, and health-care-related Military Mining or drilling Police or correctional Production-related * Professional ** Sales, office, retail, and administrative Transportation: truck driver Transportation: truck driver Transportation: truck driver Vehicle, engine, or aircraft mechanic Welder Office(write in) **Machine operator, manufacturing, assembling, or processing **Including business, financial, engineering, computer, science, media, education [] In the PAST 12 MONTHS, on average, how many hours per week did you work?

Please choose only one of the following:
○ None
① 1-20 hours per week
21-40 hours per week
() 41-60 hours per week
61+ hours per week
[] In the PAST 12 MONTHS, what schedule did you usually work?
(If you worked rotating or multiple schedules, please select all shifts you typically worked.)
Only answer this question if the following conditions are met:
LOGIC
Check all that apply
Please choose all that apply:
Early morning shifts
Day shifts
Evening shifts
☐ Night shifts
Rotating shifts, no night shifts
Rotating shifts, with night shifts
Other/Didn't Work
[]What year did you begin your current job?
Only answer this question if the following conditions are met:
LOGIC
Choose one of the following answers
Please choose only one of the following:
O 1985
○ 1985○ 1986
O 1986
○ 1986○ 1987
☐ 1986☐ 1987☐ 1988
○ 1986○ 1987○ 1988○ 1989
○ 1986○ 1987○ 1988○ 1989○ 1990
 □ 1986 □ 1987 □ 1988 □ 1989 □ 1990 □ 1991
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 □ 1986 □ 1988 □ 1990 □ 1991 □ 1992 □ 1993 □ 1994 □ 1995 □ 1996 □ 1997 □ 1998 □ 1999 □ 2000 □ 2001 □ 2002 □ 2003 □ 2004 □ 2005 □ 2006 □ 2007
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 ○ 1986 ○ 1987 ○ 1988 ○ 1999 ○ 1993 ○ 1994 ○ 1995 ○ 1996 ○ 1997 ○ 1998 ○ 1999 ○ 2000 ○ 2001 ○ 2002 ○ 2003 ○ 2004 ○ 2005 ○ 2006 ○ 2007 ○ 2008 ○ 2009 ○ 2010

 2014 2015 2016 2017 2018 2019 2020 []In the PAST MONTH, on average, how many hours per day were you on your feet (standing or walking) at work? Only answer this question if the following conditions are met: LOGIC
Choose one of the following answers
Please choose only one of the following:
O or less than 1 hour per day 1-4 hours per day 5-8 hours per day 9+ hours per day
[]In the PAST MONTH, on average, how many times per day did you lift or move a physical load of 25 pounds or more at work?
Only answer this question if the following conditions are met: LOGIC
Choose one of the following answers
Please choose only one of the following:
None 1-5 times per day 6-15 times per day 16+ times per day
[]Did your parents own a home during the first 10 years of your childhood? Please choose only one of the following:
○ Yes ○ No
Alcohol, Tobacco, and Marijuana Use []In the PAST 12 MONTHS, how often did you drink BEER, WINE, OR LIQUOR? Please choose only one of the following: O Never, I did not drink in the past 12 months Less than monthly Less than weekly 1-2 times per week
3-5 times per week
6 or more times per week
[] In the PAST 12 MONTHS, when you drank alcohol, how much did you usually drink AT ONE TIME?
Only answer this question if the following conditions are met: LOGIC
Please choose only one of the following:
I did not drink in the past 12 months. Less than 1 drink 1 drink 2 drinks 3 drinks 4 drinks

○ 5 drinks ○ 6+ drinks [] In the PAST 12 MONTHS, how m OVER A FEW HOURS?	any times did you drink 5 or more	e alcoholic drinks
Only answer this question if the following conditions are LOGIC	met:	
Please choose only one of the following:		
Never in the past 12 months 1 time 2 times 3-5 times 6-8 times 9-11 times 12-15 times (about once a month) 16-24 times (about twice a month) 25-36 times (about three times a month) 37 or more times (more than three times a month)		
[]Have you EVER used an ELECT	RONIC CIGARETTE (e-cigarette/v	aping/Juul)?
Please choose only one of the following:		
○ Yes ○ No		
[]How old were you when you FI	RST used an e-cinarette?	
	inor used an e eigenette:	
LOGIC		
Only answer this question if the following conditions are	met:	
Please choose only one of the following:	25 26 27 27 28 29 30 31 32 33 34 35 36	o 39 o 40 41 o 42 o 43 o 44 o 45 o 46 o 47 o 48 o 49 o 50
[]When you used your first e-cig Only answer this question if the following conditions are	arette:	
Please choose only one of the following:		
I had never smoked tobacco cigarettes. I was a current smoker of tobacco cigarettes and had I was a current smoker of tobacco cigarettes and wa I was a current smoker of tobacco cigarettes and wa I had stopped smoking tobacco cigarettes.	s planning to quit.	
Only answer this question if the following conditions are	verage, how often did you use e-c	cigarettes?
LOGIC		
Please choose only one of the following: Never		
Less than 1 time per month 2-3 times per month 1-2 times per week 3-6 times per week 1-4 times per day 5-14 times per day 15-24 times per day		
25–34 times per day 35 -44 times per day More than 45 times per day		

45.04.0	Less than 1 time per month' or '2-3 times	s per month' or ' 1-2 times per		
	per day' or' 25–34 times per day' or' 35 often did you use e-cigarettes?)	-44 times per day' <i>or</i> ' More th	nan 45 times per day' at question '2	21 [ecigoften]' (In the PAST 12 MONTHS,
lease choos	se only one of the following:			
	contained nicotine			
_	nes contained nicotine			
Don't kr	ontained nicotine			
			cicape	ETEC)
_	e PAST 12 MONTHS, h	iow often did yo	ou smoke CIGARE	ITES?
	se only one of the following:			
Never, I	did not smoke in the past 12 months			
	, but not weekly			
-	, but not daily			
Daily				
]In the ONE DA	e PAST 12 MONTHS, w AY?	rhen you smoke	ed, how many ciga	rettes did you smoke
y answer to	his question if the following conditions	are met:		
ease choos	se only one of the following:			
) 1				
2-5				
6-10				
) 11-20				
21 or m	ore			
	old were you when yo	ou FIRST used i	marijuana?	
) No	old were you when yo	ou FIRST used i	marijuana?	
No How LOGIC	this question if the following condition		marijuana?	
No How OGIC			marijuana?	
No How OGIC Inly answer	this question if the following conditions only one of the following:		marijuana?	
No How OGIC nly answer ease choos	this question if the following conditions only one of the following: Age 9 or younger 10	ns are met:		
No How OGIC Inly answer ease choos	this question if the following conditions only one of the following:		marijuana?	•
No N	this question if the following conditions only one of the following: Age 9 or younger 10	ns are met:	25	
No N	this question if the following conditions only one of the following: Age 9 or younger 10 11	ns are met:	25 26	0
No N	this question if the following conditions only one of the following: Age 9 or younger 10 11 12	ns are met:	25 26 27	0
No N	this question if the following conditions only one of the following: Age 9 or younger 10 11 12 13	ns are met:	25 26 27 28	0
No How OGIC OGIC Not an analysis of the control of	this question if the following conditions only one of the following: Age 9 or younger 10 11 12 13 14	ns are met:	25 26 27 28 29	
No How OGIC NIL AND	this question if the following conditions only one of the following: Age 9 or younger 10 11 12 13 14 15	ns are met:	25 26 27 28 29 30	
No How OGIC Inly answer ease choose	Age 9 or younger 10 11 12 13 14 15 16 17	ns are met:	25 26 27 28 29 30 31 32 33	
No N	this question if the following conditions only one of the following: Age 9 or younger 10 11 12 13 14 15 16 17 18 19 20	ns are met:	25 26 27 28 29 30 31 32 33	
No N	this question if the following conditions only one of the following: Age 9 or younger 10 11 12 13 14 15 16 17 18 19 20 21	ns are met:	25 26 27 28 29 30 31 32 33 34	
No N	this question if the following conditions only one of the following: Age 9 or younger 10 11 12 13 14 15 16 17 18 19 20 21	ns are met:	25 26 27 28 29 30 31 32 33 34 35 36	
No How OGIC Inly answer lease choose	this question if the following conditions only one of the following: Age 9 or younger 10 11 12 13 14 15 16 17 18 19 20 21	ns are met:	25 26 27 28 29 30 31 32 33 34 35 36 37	
No How OGIC Inly answer ease choose	this question if the following conditions only one of the following: Age 9 or younger 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24	ns are met:	25 26 27 28 29 30 31 32 33 34 35 36 37	
No N	this question if the following conditions only one of the following: Age 9 or younger 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 PAST 12 MONTHS, do	lid you use mar	25 26 27 28 29 30 31 32 33 34 35 36 37	
No How OGIC Inly answer ease choose	this question if the following conditions only one of the following: Age 9 or younger 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24	lid you use mar	25 26 27 28 29 30 31 32 33 34 35 36 37 38 ijuana?	
No How OGIC Inly answer In the Inly answer	Age 9 or younger 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 PAST 12 MONTHS, do this question if the following conditions are only one of the following:	lid you use mar	25 26 27 28 29 30 31 32 33 34 35 36 37 38 ijuana?	
No How OGIC Inly answer ease choose	Age 9 or younger 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 PAST 12 MONTHS, do this question if the following conditions K (/limesurvey/index.php/admin/questions)	lid you use mar	25 26 27 28 29 30 31 32 33 34 35 36 37 38 ijuana?	

Only answer this question if the following conditions are m	net:	
LOGIC		
Please choose only one of the following:		
Once a month or less		
2-3 times a month		
1-2 times a week		
3-5 times a week Daily		
More than once per day		
	section, please write it here. You will h	nave space
Please write your answer here: (write in)		
Birth Control/Contraception		
[]In the PAST 12 MONTHS, did yo control for any reason? Please choose all that apply:	ou or your partner use any of these me	ethods of birth
□ None	☐ ☐ Male sterilization	NuvaRing)
☐ Male condom	(vasectomy)	☐ Hormonal IUD (For example:
☐ Female condom☐ Birth control pills	☐ Rhythm ☐ Fertility awareness-based	Mirena) □ Non-hormonal IUD (For
☐ ☐ Withdrawal	methods (For example:	example: Paraguard)
☐ Shots (For example: Depo-	tracking menstrual period	Spermicide/Jelly/Sponge
Provera) □ □ Implant (For example:	dates, body temperature, cervical mucus)	☐ Diaphragm/Cervical cap☐ Emergency contraception (For
Nexplanon)	□ □ Patch (For example:	example: Plan B)
☐ Female sterilization (For	Xulane)	☐ Other
example: tubal ligation)	☐ Vaginal ring (For example:	
Only answer this question if the following conditions are me Answer was 'Female(s) and Male(s)' or 'Female(s)' at question ' (however you define it) is (are):)	t: 5 [currpartner]' (In the PAST 12 MONTHS, the person(s) with whom you	have had sexual contact
Please choose only one of the following:		
○ No		
○ Yes		
Unsure		
[]Are you the biological father?		
Only answer this question if the following conditions are m Answer was 'Yes' at question '31 [currpreg]' (Is your spouse or p		
Please choose only one of the following:	barater currently programs.	
O No		
O Yes		
Unsure		
[] Has this pregnancy been confirme counter and/or clinic tests)?	ed by a positive pregnancy test (includ	le over-the-
Only answer this question if the following conditions are m Answer was 'Yes' at question '31 [currpreg]' (Is your spouse or p		
Please choose only one of the following:		
○ No		
○ Yes		
O Unsure		
[] How many weekshas it been since	e the start of the pregnancy?	
Only answer this question if the following conditions are m	net:	
Answer was 'Yes' at question '31 [currpreg]' (Is your spouse or p	partner currently pregnant?)	
Please choose only one of the following:		
Less than 8 weeks 8-11 weeks		
O 0-11 MCOV9		

12-19 weeks
O 20-27 weeks
O 28-31 weeks
○ 32-36 weeks
○ 37-39 weeks
40-42 weeks
43+ weeks
○ Unsure
[]Regarding this pregnancy, my partner and I :
Only answer this question if the following conditions are met:
(currpreg.NAOK (/limesurvey/index.php/admin/questions/sa/view/surveyid/118238/gid/1078/qid/30499) == "2" AND biofather.NAOK (/limesurvey/index.php/admin/questions/sa/view/surveyid/118238/gid/1078/qid/30500) == "1")
Please choose only one of the following:
Were not actively trying to become pregnant.
 Were not actively trying, but were glad to become pregnant. Wanted to be pregnant someday, but not now.
Did not want to be pregnant now or at any time in the future.
Are you and your spouse or partner actively trying to become pregnant or do you
think that you may become pregnant at some point within the next year?
Only answer this question if the following conditions are met: Answer was 'No' at question '31 [currpreg]' (Is your spouse or partner currently pregnant?)
Please choose only one of the following:
O No
Yes, we are actively trying
Yes, my spouse or partner may become pregnant within the next year
O :,,,
[]For how many months have you and your spouse or partner been actively trying to
get pregnant?
Only answer this question if the following conditions are met:
Answer was 'Yes, we are actively trying' at question '36 [trypreg]' (Are you and your spouse or partner actively trying to become pregnant or do you think that you may become pregnant at some point within the next year?)
Please choose only one of the following:
1 month or less
2 months
3 months
() 4 months
○ 5 months
○ 6 months
O 7 months
○ 8 months
9 months
10 months
11 months
O 12 months
① 13 to 35 months
O 36 months or more
[]How much time has gone by since you and your spouse or partner stopped using any contraceptive/birth control?
any contraceptive/birth control? Only answer this question if the following conditions are met: Answer was 'Yes, we are actively trying' at question '36 [trypreg]' (Are you and your spouse or partner actively trying to become pregnant or do you think that you
any contraceptive/birth control? Only answer this question if the following conditions are met: Answer was 'Yes, we are actively trying' at question '36 [trypreg]' (Are you and your spouse or partner actively trying to become pregnant or do you think that you may become pregnant at some point within the next year?)
any contraceptive/birth control? Only answer this question if the following conditions are met: Answer was 'Yes, we are actively trying' at question '36 [trypreg]' (Are you and your spouse or partner actively trying to become pregnant or do you think that you may become pregnant at some point within the next year?) Please choose only one of the following:
any contraceptive/birth control? Only answer this question if the following conditions are met: Answer was 'Yes, we are actively trying' at question '36 [trypreg]' (Are you and your spouse or partner actively trying to become pregnant or do you think that you may become pregnant at some point within the next year?) Please choose only one of the following: None, I have never used a contraceptive/birth control method.
any contraceptive/birth control? Only answer this question if the following conditions are met: Answer was 'Yes, we are actively trying' at question '36 [trypreg]' (Are you and your spouse or partner actively trying to become pregnant or do you think that you may become pregnant at some point within the next year?) Please choose only one of the following: None, I have never used a contraceptive/birth control method. None, I am still using contraception/birth control.
any contraceptive/birth control? Only answer this question if the following conditions are met: Answer was 'Yes, we are actively trying' at question '36 [trypreg]' (Are you and your spouse or partner actively trying to become pregnant or do you think that you may become pregnant at some point within the next year?) Please choose only one of the following: None, I have never used a contraceptive/birth control method. None, I am still using contraception/birth control. 1 month or less
any contraceptive/birth control? Only answer this question if the following conditions are met: Answer was 'Yes, we are actively trying' at question '36 [trypreg]' (Are you and your spouse or partner actively trying to become pregnant or do you think that you may become pregnant at some point within the next year?) Please choose only one of the following: None, I have never used a contraceptive/birth control method. None, I am still using contraception/birth control. 1 month or less 2 months
any contraceptive/birth control? Only answer this question if the following conditions are met: Answer was 'Yes, we are actively trying' at question '36 [trypreg]' (Are you and your spouse or partner actively trying to become pregnant or do you think that you may become pregnant at some point within the next year?) Please choose only one of the following: None, I have never used a contraceptive/birth control method. None, I am still using contraception/birth control. 1 month or less 2 months 3 months
any contraceptive/birth control? Only answer this question if the following conditions are met: Answer was 'Yes, we are actively trying' at question '36 [trypreg]' (Are you and your spouse or partner actively trying to become pregnant or do you think that you may become pregnant at some point within the next year?) Please choose only one of the following: None, I have never used a contraceptive/birth control method. None, I am still using contraception/birth control. 1 month or less 2 months
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0 9 months
O 10 months
11 months
12 months
① 13-35 months
O 36 months or more
[] How often do you have sexual intercourse without using any contraceptive method?
Only answer this question if the following conditions are met: trypreg.NAOK (/limesurvey/index.php/admin/questions/sa/view/surveyid/118238/gid/1078/qid/30504) == "2"
Please choose only one of the following:
O Never
Once per MONTH or less often
2 to 3 times per MONTH
Once per WEEK
2 to 3 times per WEEK
4 to 6 times per WEEK
One or more times per DAY
Part of the Growing Up Today Study is a Parental Health Study. We will investigate how diet, activity, and other factors during pregnancy may influence women's pregnancy experiences and their babies. Would the woman who will be the biological mother of your child be interested in participating in this study?
If she agrees to be part of the Parental Health Study we will contact her in three months. At that point we will ask if her if she has become pregnant and whether she would be interested in providing further information about the pregnancy.
Only answer this question if the following conditions are met: Answer was 'Yes, my spouse or partner may become pregnant within the next year' or 'Yes, we are actively trying' at question '36 [trypreg]' (Are you and your spouse or partner actively trying to become pregnant or do you think that you may become pregnant at some point within the next year?)
Please choose only one of the following:
Yes, I think she would want to be involved in the Parental Health Study.
No, I do not think she would be interested in the Parental Health Study.
[]Please give us the name and email of the woman who will be the biological mother of the baby.
Only answer this question if the following conditions are met: trymhs (/limesurvey/index.php/admin/questions/sal/view/surveyid/118238/gid/1078/qid/30508) == "1"
Please write your answer(s) here:
First Name
Last Name
Email Email
Littell
[]The following 5 questions are about the woman who will be the biological mother of

your child?

How old is she?

☐ Don't Know

_____(write in)

Only answer this question if the following conditions are met: Answer was 'Yes' at question '31 [currpreg]' (Is your spouse or partner currently pregnant?) Please choose only one of the following: Don't Know []How tall do you think she is? Only answer this question if the following conditions are met: Answer was 'Yes' at question '31 [currpreg]' (Is your spouse or partner currently pregnant?) Please choose the appropriate response for each item: Feet Inches 3 4 5 6 7 0 1 2 3 4 Height () () () () () () () () \bigcirc \circ []How much do you think she weighs? Only answer this question if the following conditions are met: Answer was 'Yes' at question '31 [currpreg]' (Is your spouse or partner currently pregnant?) Please write your answer here:____pounds []Is she Hispanic or Latina? Only answer this question if the following conditions are met: Answer was 'Yes' at question '31 [currpreg]' (Is your spouse or partner currently pregnant?) Please choose only one of the following: O No O Yes O Don't Know []Which race do you consider her to be? Only answer this question if the following conditions are met: Answer was 'Yes' at question '31 [currpreg]' (Is your spouse or partner currently pregnant?) Please choose all that apply: White Black or African American American Indian or Alaska Native ■ Native Hawaiian or other Pacific Islander ☐ Middle Eastern or North African

Part of the Growing Up Today Study is a Parental Health Study. We will investigate how diet, activity, and other factors during pregnancy may influence women's pregnancy experiences and their babies. Would the woman who will be the biological mother of your child be interested in participating in this study

If she agrees to be part of the Parental Health Study, we will send her some additional questionnaires later during this pregnancy and one after the pregnancy ends.

Only answer this question if the following conditions are met: Answer was 'Yes' at question '31 [currpreg]' (Is your spouse or partner currently pregnant?)
Please choose only one of the following:
Yes, I think she would want to be involved in the Parental Health Study.
No, I do not think she would be interested in the Parental Health Study.
[]Please give us the name and email of the woman who will be the biological mother of the baby.
Only answer this question if the following conditions are met:
LOGIC
Please write your answer(s) here:
First Name(write in) Last Name(write in) Email(write in)
Lifetime Pregnancy
To your knowledge, how many times have you ever gotten a woman pregnant? (intended or unintended). Please include all miscarriages, abortions, live births and stillbirths. Do not include anonymous sperm donation.
{if(currpreg.code=='2','DO NOT INCLUDE CURRENT PREGNANCY.',' ')}
Please choose only one of the following:
0 (Not including any CURRENT pregnancy)
01
O 2
O 3
O 4
O 5
○ 6
O 7
○ 8
O 9
O 10
O 11
O 12
O 13
O 14
O 15+
Next, we will ask you a set of questions for each of the pregnancies you have fathered

Please start with the FIRST pregnancy. Month and year in which the **first pregnancy** ended?

Only answer this question if the following conditions are met:				
Please choose the appropriate response for each item:				
January February March April May June July August September October November December Date O O O O O O O O O O O O O O O O O O O	1985	1986	1987	198
Only answer this question if the following conditions are met: LOGIC				
Please choose only one of the following:				
8-11 weeks				
○ 12-19 weeks				
O 20-27 weeks				
② 28-31 weeks				
32-36 weeks 37-39 weeks				
○ 40-42 (term)				
○ 43+ weeks				
[]What was the outcome of this first pregnancy ?				
Only answer this question if the following conditions are met:				
Please choose only one of the following:				
○ Single live birth				
○ Twins				
○ Triplets +				
Miscarriage/Stillbirth				
○ Induced abortion ○ Tubal or Ectopic				
]Did the biological mother have any of these complications related to pregnancy or				
actation during this first pregnancy ?				
Only answer this question if the following conditions are met:				
LOGIC				
Please choose all that apply:				
☐ Gestational diabetes				
Pregnancy-related high blood pressure				
☐ Pre-eclampsia/Toxemia ☐ Mastitis/Breast infection				
□ No				
[]Regarding this pregnancy, my partner and I:				
Only answer this question if the following conditions are met:				
LOGIC				
Please choose only one of the following:				
 Were actively trying to become pregnant. Were not actively trying, but were glad to become pregnant. 				
Wanted to be pregnant someday, but not now.				
O Did not want to be pregnant now or at any time in the future.				
Second Pregnancy				
[]Month and year in which the second pregnancy that you fathered ended?				
Only answer this question if the following conditions are met:				
Answer was '5' or '3' or '2' or '4' or '7' or '15+' or '14' or '13' or '12' or '11' or '10' or '9' or '8' or '6' at question '49 [lifepreg]' (To your knowledge, how many times have you ever gotten a woman pregnant? (intended or unintended). Please include all miscarriages, abortions, live births and stillbirths. Do not include anonymous sperm donation. (if(currpreg.code=='2','DO NOT INCLUDE CURRENT PREGNANCY.', ')))				
Please choose the appropriate response for each item:				
January February March April May June July August September October November December Date O O O O O O O O O O O O O O O O O O O	1985	1986	1987	198
Please choose only one of the following:				
S weeks				
8-11 weeks				
① 12-19 weeks				
20-27 weeks				

28-31 weeks 32-36 weeks 37-39 weeks 40-42 (term) 43+ weeks []What was the outcome of this second pregnancy? Please choose only one of the following: Single live birth Twins Triplets + Miscarriage/Stillbirth Induced abortion				
Tubal or Ectopic []Did the biological mother have any of these complications related to pregnancy or lactation during this second pregnancy ? Only a new this question if the following conditions are met:				
LOGIC Please choose all that apply:				
Gestational diabetes Pregnancy-related high blood pressure Pre-eclampsia/Toxemia Mastitis/Breast infection No				
[]Regarding this pregnancy, my partner and I:				
Please choose only one of the following: Were actively trying to become pregnant. Were not actively trying, but were glad to become pregnant. Wanted to be pregnant someday, but not now. Did not want to be pregnant now or at any time in the future.				
Third Pregnancy				
[]Month and year in which the third pregnancy that you fathered ended? Please choose the appropriate response for each item:				
January February March April May June July August September October November December Date \(\)	1985	1986	1987	198
< 8 weeks 8-11 weeks 12-19 weeks 20-27 weeks 28-31 weeks 32-36 weeks 37-39 weeks 40-42 (term) 43+ weeks				
[]What was the outcome of this third pregnancy ? Please choose only one of the following:				
Single live birth Twins Triplets + Miscarriage/Stillbirth				

☐ Induced abortion☐ Tubal or Ectopic				
[]Did the biological mother have any of these complications related to pregnancy or lactation during this third pregnancy ?				
Only answer this question if the following conditions are met:				
LOGIC				
Please choose all that apply:				
Gestational diabetes				
Pregnancy-related high blood pressure				
Pre-eclampsia/Toxemia				
☐ Mastitis/Breast infection ☐ No				
[]Regarding this pregnancy, my partner and I:				
Please choose only one of the following:				
Were actively trying to become pregnant.				
Were not actively trying, but I was glad to become pregnant.Wanted to become pregnant someday, but not then.				
Wanted to become pregnant someday, but not then. Did not want to be pregnant then or at any time in the future.				
5 a not want to be prognant their of at any time in the ration.				
Fourth Pregnancy				
[]Month and year in which the fourth pregnancy that you fathered ended?				
Please choose the appropriate response for each item:				
Month January February March April May June July August September October November December	1985	1986	1987	198
January February March April May June July August September October November December Date O O O O O O O	0	0	0	0
[]How long did this fourth pregnancy last?				
Please choose only one of the following:				
○ < 8 weeks				
○ 8-11 weeks				
○ 12-19 weeks				
O 20-27 weeks				
② 28-31 weeks				
○ 32-36 weeks ○ 37-39 weeks				
37-39 weeks 40-42 (term)				
43+ weeks				
[]What was the outcome of this fourth pregnancy ?				
Please choose only one of the following: Single live birth				
↑ Twins				
○ Triplets +				
○ Miscarriage/Stillbirth				
O Induced abortion				
O Tubal or Ectopic				
[]Did the biological mother have any of these complications related to pregnancy or lactation during this fourth pregnancy ?				
Only answer this question if the following conditions are met:				
Answer was '43+ weeks' or '40-42 (term)' or '37-39 weeks' or '32-36 weeks' or '20-27 weeks' or '28-31 weeks' at question '66 [preg4last]' (How long did this fourth pregnancy last?)				
Please choose all that apply:				
Gestational diabetes				
Pregnancy-related high blood pressure				
☐ Pre-eclampsia/ Toxemia				
Mastitis/breast infection				

□ No
[]Regarding this pregnancy, my partner and I: Please choose only one of the following:
Were actively trying to become pregnant.
Were not actively trying, but I was glad to become pregnant.
Wanted to become pregnant someday, but not then.
Old not want to be pregnant then or at any time in the future.
Fifth Pregnancy []Month and year in which the fifth pregnancy that you fathered ended?
Please choose the appropriate response for each item: Month
January February March April May June July August September October November December 1985 1986 1987 198 Date O O O O O O O O O O []How long did this fifth pregnancy last? Please choose only one of the following:
○ < 8 weeks
O 8-11 weeks
O 12-19 weeks
② 20-27 weeks
② 28-31 weeks ③ 32-36 weeks
37-39 weeks
40-42 (term)
O 43+ weeks
[]What was the outcome of this fifth pregnancy ? Please choose only one of the following:
Single live birth
O Twins
○ Triplets +
Miscarriage/Stillbirth
O Induced abortion
O Tubal or Ectopic []Did the biological mother have any of these complications related to pregnancy or
lactation during this fifth pregnancy ?
Only answer this question if the following conditions are met: LOGIC
Please choose all that apply:
Gestational diabetes
Pregnancy-related high blood pressure
Pre-eclampsia/Toxemia MacHiti/Dranat infantion
☐ Mastitis/Breast infection ☐ No
[]Regarding this pregnancy, my partner and I :
Please choose only one of the following:
Were actively trying to become pregnant. Were not actively trying, but I was glad to become pregnant.
Were not actively trying, but I was glad to become pregnant. Wanted to become pregnant someday, but not then.
Did not want to be pregnant then or at any time in the future.
Sixth Pregnancy
[]Month and year in which the sixth pregnancy that you fathered ended?

Please choose the appropriate resp	onse for each item:										
January February Date O O []How long did th	o o is sixth preg	May June O O nancy las	Month July August C C t?	September	October	November	December	1985	1986	1987	198
Please choose only one of the fo	llowing:										
< 8 weeks											
8-11 weeks											
12-19 weeks 20-27 weeks											
20-27 weeks 28-31 weeks											
32-36 weeks											
37-39 weeks											
() 40-42 (term)											
43+ weeks											
[]What was the o	utcome of this	s civth nr	eanancy?								
Please choose only one of the fo		S SIXUI PI	egnancy								
	llowing.										
Single live birth Twins											
Triplets +											
Miscarriage/Stillbirth											
O Induced abortion											
Tubal or Ectopic											
[]Did the biological lactation during the Only answer this question if the LOGIC	nis sixth pre g	gnancy?	hese comp	lications ı	related	to pregna	ancy or				
Please choose all that apply:											
Gestational diabetes											
Pregnancy-related high blo	ood pressure										
☐ Pre-eclampsia/Toxemia											
Mastitis/Breast infection											
☐ No											
[]Regarding this p	regnancy, m	v partner	and I:								
Please choose only one of the fo		, pa									
 Were actively trying to be 											
Not actively trying, but I wa	· -	nant.									
Wanted to become pregna											
O Did not want to be pregna	nt then or at any time in	the future.									
Carrantle Duane											
Seventh Pregna	•										
[]Month and year	in which the	seventh	pregnancy	, that you	ı father	ed endec	1?				
Please choose the appropriate re	sponse for each item:										
January February	March April	May June	Month July August	September	October	November	December	1985	1986	1987	198
Date O	0 0	0 0	0 0	O	O	O	O	0	0	0	0
[]How long did th	is seventh p	regnancy	last?								
Only answer this question if the	e following conditions a	re met:									
LOGIC											
Please choose only one of the	following:										
< 8 weeks											
8-11 weeks											
12-19 weeks 20-27 weeks											
20-27 weeks											
32-36 weeks											
37-39 weeks											
0 40-42 (term)											
() 43+ weeks											

[]What was the outcome of this seventh pregnancy ? Only answer this question if the following conditions are met:				
LOGIC				
Please choose only one of the following:				
○ Single live birth				
O Twins				
○ Triplets +				
 Miscarriage/Stillbirth Induced abortion 				
Tubal or Ectopic				
[]Did the biological mother have any of these complications related to pregnancy or lactation during this seventh pregnancy ? Only answer this question if the following conditions are met: LOGIC				
Please choose all that apply:				
Gestational diabetes				
Pregnancy-related high blood pressure				
☐ Pre-eclampsia/Toxemia				
Mastitis/Breast infection				
□ No				
[]Regarding this pregnancy, my partner and I: Please choose only one of the following:				
Were actively trying to become pregnant.				
Were not actively trying, but I was glad to become pregnant.Wanted to become pregnant someday, but not then.				
 Did not want to be pregnant then or at any time in the future. Eighth Pregnancy 				
[]Month and year in which the eighth pregnancy that you fathered ended?				
Please choose the appropriate response for each item:				
Date	0	0	0	C
[]What was the outcome of this eighth pregnancy ?				
Please choose only one of the following:				
Single live birth				
○ Twins				
○ Triplets +				
 ✓ Miscarriage/Stillbirth ✓ Induced abortion 				
Tubal or Ectopic				
[]Did the biological mother have any of these complications related to pregnancy or lactation during this eighth pregnancy? Only answer this question if the following conditions are met:				
LOGIC				
Please choose all that apply:				
Gestational diabetes				
 ☐ Pregnancy-related high blood pressure ☐ Pre-eclampsia/Toxemia 				
Mastitis/Breast infection				
□ No				

[]Regarding this pregnancy, my partner and I: Please choose only one of the following:				
 Were actively trying to become pregnant. Were not actively trying, but I was glad to become pregnant. Wanted to become pregnant someday, but not then. Did not want to be pregnant then or at any time in the future. 				
Ninth Pregnancy				
[]Month and year in which the ninth pregnancy that you fathered ended?				
Please choose the appropriate response for each item:				
Month				
January February March April May June July August September October November December Date O O O O O O O O O O O O O O O O O O O	1985	1986	1987	198
20-27 weeks				
○ 28-31 weeks ○ 32-36 weeks				
○ 37-39 weeks				
○ 40-42 (term)				
○ 43+ weeks				
[]What was the outcome of this ninth pregnancy ?				
Please choose only one of the following: Single live birth				
① Twins				
Triplets +				
				
[]Did the biological mother have any of these complications related to pregnancy or lactation during this ninth pregnancy?				
Only answer this question if the following conditions are met: LOGIC				
Please choose all that apply:				
☐ Gestational diabetes ☐ Pregnancy-related high blood pressure ☐ Pre-eclampsia/Toxemia ☐ Mastitis/Breast infection ☐ No				
$\label{eq:constraint} \begin{tabular}{ll} [] Regarding this pregnancy, my partner and I: \\ Please choose $\mbox{only one}$ of the following: \\ \end{tabular}$				
 Were actively trying to become pregnant. Were not actively trying, but I was glad to become pregnant. Wanted to become pregnant someday, but not then. Did not want to be pregnant then or at any time in the future. 				
Tenth Pregnancy				
[]Month and year in which the tenth pregnancy that you fathered ended? Please choose the appropriate response for each item:				
January February March April May June July August September October November December Date O O O O O O O O O O O O O O O O O O O	1985	1986	1987	198
8 weeks				
O 8-11 weeks				
① 12-19 weeks				
○ 20-27 weeks ○ 28-31 weeks				

○ 32-36 weeks ○ 37-39 weeks		
○ 40-42 (term)		
43+ weeks []What was the outcome of this tenth pregnancy ?		
Please choose only one of the following:		
 Single live birth Twins Triplets + Miscarriage/Stillbirth Induced abortion 		
○ Tubal or Ectopic		
[]Did the biological mother have any of these complications relate lactation during this tenth pregnancy ?	ed to pregnancy or	
Only answer this question if the following conditions are met: Gestational dia Pregnancy-related high blood pressure Pre-eclampsia/Toxemia Mastitis/Breast infection No	iabetes	
[] Regarding this pregnancy, my partner and I : Please choose $\mbox{only one}$ of the following:		
 Were actively trying to become pregnant. Were not actively trying, but I was glad to become pregnant. Wanted to become pregnant someday, but not then. Did not want to be pregnant then or at any time in the future. 		
Eleventh Pregnancy []Month and year in which the eleventh pregnancy that you fath Please choose the appropriate response for each item: Month January February March April May June July August September October		37 198
Date O O O O O O O O O O O O O O O O O O O) ()
Please choose only one of the following: < 8 weeks		
8-11 weeks		
O 12-19 weeks		
20-27 weeks		
28-31 weeks 32-36 weeks		
○ 37-39 weeks		
○ 40-42 (term)		
43+ weeks		
[] What was the outcome of this eleventh pregnancy ? Please choose only one of the following:		
Single live birth Twins		
○ Triplets +		
Miscarriage/Stillbirth		
☐ Induced abortion ☐ Tubal or Ectopic		
[]Did the biological mother have any of these complications relate lactation during this eleventh pregnancy ?	ed to pregnancy or	
Only answer this question if the following conditions are met: LOGIC		
Please choose all that apply:		
Gestational diabetes		
☐ Pregnancy-related high blood pressure ☐ Pre-eclampsia/Toxemia		
Mastitis/Breast infection		
□ No		

[]Regarding this pregnancy, my partner and I: Please choose only one of the following: Were actively trying to become pregnant. Were not actively trying, but I was glad to become pregnant. Wanted to become pregnant someday, but not then. Did not want to be pregnant then or at any time in the future.
Twelfth Pregnancy
[]Month and year in which the twelfth pregnancy that you fathered ended? Please choose the appropriate response for each item:
Month
January February March April May June July August September October November December 1985 1986 1987 198 Date O O O O O O O O O []How long did this twelfth pregnancy last?
Please choose only one of the following:
O <8 weeks
8-11 weeks
12-19 weeks 20-27 weeks
② 28-31 weeks
○ 32-36 weeks
○ 37-39 weeks
40-42 (term)
43+ weeks
[]What was the outcome of this twelfth pregnancy ?
Please choose only one of the following:
○ Single live birth ○ Twins
O Triplets +
Miscarriage/Stillbirth
O Induced abortion
○ Tubal or Ectopic
[]Did the biological mother have any of these complications related to pregnancy or lactation during this twelfth pregnancy ?
Only answer this question if the following conditions are met: LOGIC
Please choose all that apply:
Gestational diabetes
Pregnancy-related high blood pressure
Pre-eclampsia/Toxemia
Mastitis/Breast infection
□ No
[]Regarding this pregnancy, my partner and I :
[]Regarding this pregnancy, my partner and I: Please choose only one of the following:
[]Regarding this pregnancy, my partner and I :
[]Regarding this pregnancy, my partner and I: Please choose only one of the following: Were actively trying to become pregnant.
[]Regarding this pregnancy, my partner and I: Please choose only one of the following: Were actively trying to become pregnant. Were not actively trying, but I was glad to become pregnant.
[]Regarding this pregnancy, my partner and I: Please choose only one of the following: Were actively trying to become pregnant. Were not actively trying, but I was glad to become pregnant. Wanted to become pregnant someday, but not then.
[]Regarding this pregnancy, my partner and I: Please choose only one of the following: Were actively trying to become pregnant. Were not actively trying, but I was glad to become pregnant. Wanted to become pregnant someday, but not then. Did not want to be pregnant then or at any time in the future. Thirteenth Pregnancy
[]Regarding this pregnancy, my partner and I: Please choose only one of the following: () Were actively trying to become pregnant. () Were not actively trying, but I was glad to become pregnant. () Wanted to become pregnant someday, but not then. () Did not want to be pregnant then or at any time in the future. Thirteenth Pregnancy []Month and year in which the thirteenth pregnancy that you fathered ended? Please choose the appropriate response for each item:
[]Regarding this pregnancy, my partner and I: Please choose only one of the following: Were actively trying to become pregnant. Were not actively trying, but I was glad to become pregnant. Wanted to become pregnant someday, but not then. Did not want to be pregnant then or at any time in the future. Thirteenth Pregnancy []Month and year in which the thirteenth pregnancy that you fathered ended? Please choose the appropriate response for each item: Month January February March April May June July August September October November December 1985 1986 1987 198
[]Regarding this pregnancy, my partner and I : Please choose only one of the following: Were actively trying to become pregnant. Were not actively trying, but I was glad to become pregnant. Did not want to be pregnant someday, but not then. Did not want to be pregnant then or at any time in the future. Thirteenth Pregnancy []Month and year in which the thirteenth pregnancy that you fathered ended? Please choose the appropriate response for each item: Month January February March April May June July August September October November December 1985 1986 1997 198 Date O O O O O O O O O
[]Regarding this pregnancy, my partner and I: Please choose only one of the following: Were actively trying to become pregnant. Were not actively trying, but I was glad to become pregnant. Did not want to be pregnant someday, but not then. Did not want to be pregnant then or at any time in the future. Thirteenth Pregnancy []Month and year in which the thirteenth pregnancy that you fathered ended? Please choose the appropriate response for each item: Month January February March April May June July August September October November December 1985 1986 1987 1980 1981 1981 1981 1982 1983 1983 1983 1983 1984 1984 1985
[]Regarding this pregnancy, my partner and I: Please choose only one of the following: Were actively trying to become pregnant. Were not actively trying, but I was glad to become pregnant. Did not want to be pregnant someday, but not then. Did not want to be pregnant then or at any time in the future. Thirteenth Pregnancy []Month and year in which the thirteenth pregnancy that you fathered ended? Please choose the appropriate response for each item: Month January February March April May June July August September October November December 1985 1986 1987 198 Date Older October October November December 1985 1986 1987 198 October Oc
[]Regarding this pregnancy, my partner and I: Please choose only one of the following: Were actively trying to become pregnant. Were not actively trying, but I was glad to become pregnant. Did not want to be pregnant someday, but not then. Did not want to be pregnant then or at any time in the future. Thirteenth Pregnancy []Month and year in which the thirteenth pregnancy that you fathered ended? Please choose the appropriate response for each item: Month January February March April May June July August September October November December 1985 1986 1987 1980 1981 1981 1981 1982 1983 1983 1983 1983 1984 1984 1985

O 20-27 weeks

○ 28-31 weeks○ 32-36 weeks				
○ 37-39 weeks ○ 40-42 (term)				
○ 43+ weeks				
[]What was the outcome of this thirteenth pregnancy ? Please choose only one of the following:				
 Single live birth Twins Triplets + Miscarriage/Stillbirth Induced abortion 				
O Tubal or Ectopic []Did the biological mother have any of these complications related to pregnancy or lactation during this thirteenth pregnancy ?				
Only answer this question if the following conditions are met: LOGIC				
Please choose all that apply:				
 ☐ Gestational diabetes ☐ Pregnancy-related high blood pressure ☐ Pre-eclampsia/Toxemia ☐ Mastitis/Breast infection ☐ No 				
[] Regarding this pregnancy, my partner and I : Please choose only one of the following:				
 Were actively trying to become pregnant. Were not actively trying, but I was glad to become pregnant. Wanted to become pregnant someday, but not then. Did not want to be pregnant then or at any time in the future. 				
Fourteenth Pregnancy				
[]Month and year in which the fourteenth pregnancy that you fathered ended?				
Please choose the appropriate response for each item:				
January February March April May June July August September October November December Date O O O O O O O O O []How long did this fourteenth pregnancy last?	1985	1986	1987	198
 < 8 weeks 8-11 weeks 12-19 weeks 20-27 weeks 28-31 weeks 32-36 weeks 37-39 weeks 40-42 (term) 43+ weeks 				
[]What was the outcome of this fourteenth pregnancy ? Please choose only one of the following:				
 ○ Single live birth ○ Twins ○ Triplets + ○ Miscarriage/Stillbirth 				

○ Induced abortion	
Tubal or Ectopic[]Did the biological mother have any of these complications related to pregnancy or	
lactation during this fourteenth pregnancy?	
Only answer this question if the following conditions are met: LOGIC	
Please choose all that apply:	
Gestational diabetes	
☐ Pregnancy-related high blood pressure ☐ Pre-eclampsia/Toxemia	
Mastitis/Breast infection	
□ No	
$\label{eq:continuous} \begin{tabular}{ll} \hline \end{tabular} Regarding this pregnancy, my partner and $I:$ \\ \hline \end{tabular}$ Please choose only one of the following:	
Were actively trying to become pregnant.	
 Were not actively trying, but I was glad to become pregnant. Wanted to become pregnant someday, but not then. 	
Did not want to be pregnant then or at any time in the future.	
Fifteenth Pregnancy	
[]Month and year in which the fifteenth pregnancy that you fathered ended?	
Please choose the appropriate response for each item:	
January February March April May June July August September October November December 1980 Date O O O O O O O O [] How long did this fifteenth pregnancy last? Please choose only one of the following:	1987 19
○ < 8 weeks	
8-11 weeks	
12-19 weeks 20-27 weeks	
② 28-31 weeks	
32-36 weeks	
○ 37-39 weeks ○ 40-42 (term)	
○ 43+ weeks	
[]What was the outcome of this fifteenth pregnancy ?	
Please choose only one of the following:	
○ Single live birth ○ Twins	
O Triplets +	
Miscarriage/Stillbirth	
○ Induced abortion ○ Tubal or Ectopic	
[]Did the biological mother have any of these complications related to pregnancy or	
lactation during this fifteenth pregnancy ?	
Only answer this question if the following conditions are met: LOGIC	
Please choose all that apply:	

Gestational diabetes

 □ Pregnancy-related high blood pressure □ Pre-eclampsia/Toxemia □ Mastitis/Breast infection □ No
[]Regarding this pregnancy, my partner and I :
Please choose only one of the following:
 Were actively trying to become pregnant. Were not actively trying, but I was glad to become pregnant. Wanted to become pregnant someday, but not then. Did not want to be pregnant then or at any time in the future.
Illness
[] Have you EVER had any of these clinician-diagnosed illnesses, conditions, or procedures?
Please choose all that apply:
· CARDIOVASCULAR
High cholesterol, triglycerides, or lipids
High blood pressure (hypertension)
Deep vein thrombosis
- CANCER & BENIGN TUMORS
☐ Melanoma
Squamous cell skin cancer
Basal cell skin cancer
☐ Breast cancer
Fibrocystic or other benign breast disease
Colon or rectal polyps (benign)
Leukemia/Lymphoma/Hodgkin's disease
Other cancer (please report type on next page)
· DIABETES, METABOLIC & ENDOCRINE CONDITIONS
☐ Diabetes-Type I
☐ Diabetes-Type II
Gestational diabetes (diabetes during pregnancy)
☐ Impaired glucose tolerance/Prediabetes
Graves' disease/Hyperthyroidism
☐ Hypothyroidism
GYNECOLOGICAL CONDITIONS & PROCEDURES
Endometriosis
Uterine fibroids
Polycystic ovary syndrome (PCOS)
☐ Tubal ligation
C-Section/Cesarean section
Hysterectomy
- ALLERGIC CONDITIONS
Asthma Disiritie (hour found)
Rhinitis (hay fever)
ARTHRITIS, JOINT & AUTOIMMUNE CONDITIONS
Systemic lupus erythematosus (SLE)
Rheumatoid arthritis
Other arthritis
· SKIN CONDITIONS

	Eczema (atopic dermatitis) Psoriasis
	GASTROINTESTINAL CONDITIONS & PROCEDURES Gallstones
	Gallbladder removal (cholecystectomy)
	Ulcerative colitis/Crohn's disease/Microscopic colitis
	Irritable bowel syndrome
\Box	Celiac disease
	Eosinophilic esophagitis
\Box	Diverticulitis
\Box	Appendectomy
\Box	Fatty liver/Non-alcoholic fatty liver disease
	Gastric banding/Lap band
	Gastric bypass
\Box	Gastric sleeve (sleeve gastrectomy)
\Box	Other weight loss procedures with bariatric devices
	• EATING DISORDERS
	Anorexia
	Bulimia
	Binge eating disorder (BED)
	Avoidant/restrictive food intake disorder (ARFID)
	Eating disorder: Other/Not Specified
	OTHER CONDITIONS & PROCEDURES
	Kidney stones
	Tonsillectomy
Ш	Hernia
	Seizure (1 or more)/Epilepsy
	Sleep apnea
	Mononucleosis
	Depression (clinician-diagnosed)
	Anxiety (clinician-diagnosed)
	Attention-deficit/hyperactivity disorder (ADHD)/Attention-deficit disorder (ADD) (clinician-diagnosed)
	Migraine headaches
	Multiple sclerosis
Ш	Any joint surgery (shoulder, hip, knee, ankle, etc.)
Ш	Other major illness or surgery
III	ness Confirmation
For	each illness below, please indicate the timeframe of your EARLIEST diagnosis.
	bu did not have the diagnosis or procedure, please mark "No, did not have."
-	
	When were you first diagnosed with: High cholesterol, triglycerides, or lipids
	y answer this question if the following conditions are met:
LC	OGIC
Plea	ase choose only one of the following:

 2006-2009 2010-2013 2014-2017 After 2017 No, did not have
[]When were you first diagnosed with: High blood pressure (hypertension)
Only answer this question if the following conditions are met:
LOGIC
Please choose only one of the following:
Before 2006
2006-2009
2010-2013
2014-2017
After 2017
O No, did not have []When were you first diagnosed with: Deep vein thrombosis
Only answer this question if the following conditions are met:
LOGIC
Please choose only one of the following:
Before 2006
2006-2009 2010-2013
2014-2017
After 2017
No, did not have
[]When were you first diagnosed with: Melanoma
Only answer this question if the following conditions are met:
LOGIC
Please choose only one of the following:
Please choose only one of the following: Before 2006
Please choose only one of the following: Before 2006 2006-2009
Please choose only one of the following: Before 2006 2006-2009 2010-2013
Please choose only one of the following: Before 2006 2006-2009
Please choose only one of the following: Before 2006 2006-2009 2010-2013 2014-2017
Please choose only one of the following: Before 2006 2006-2009 2010-2013 2014-2017 After 2017
Please choose only one of the following: Before 2006 2006-2009 2010-2013 2014-2017 After 2017 No, did not have []When were you first diagnosed with:
Please choose only one of the following: Before 2006 2006-2009 2010-2013 2014-2017 After 2017 No, did not have []When were you first diagnosed with: Squamous cell skin cancer
Please choose only one of the following: Before 2006 2006-2009 2010-2013 2014-2017 After 2017 No, did not have []When were you first diagnosed with: Squamous cell skin cancer Only answer this question if the following conditions are met:
Please choose only one of the following: Before 2006 2006-2009 2010-2013 2014-2017 After 2017 No, did not have When were you first diagnosed with: Squamous cell skin cancer Only answer this question if the following conditions are met: LOGIC
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Please choose only one of the following: Before 2006 2006-2009 2010-2013 2014-2017 After 2017 No, did not have When were you first diagnosed with: Squamous cell skin cancer Only answer this question if the following conditions are met: LOGIC Please choose only one of the following: Before 2006
Please choose only one of the following: Before 2006 2006-2009 2010-2013 2014-2017 After 2017 No, did not have When were you first diagnosed with: Squamous cell skin cancer Only answer this question if the following conditions are met: LOGIC Please choose only one of the following: Before 2006 2006-2009 2010-2013 2014-2017
Please choose only one of the following: Before 2006 2006-2009 2010-2013 2014-2017 After 2017 No, did not have When were you first diagnosed with: Squamous cell skin cancer Only answer this question if the following conditions are met: LOGIC Please choose only one of the following: Before 2006 2006-2009 2010-2013 2014-2017 After 2017
Please choose only one of the following: Before 2006 2006-2009 2010-2013 2014-2017 After 2017 No, did not have When were you first diagnosed with: Squamous cell skin cancer Only answer this question if the following conditions are met: LOGIC Please choose only one of the following: Before 2006 2006-2009 2010-2013 2014-2017 After 2017 No, did not have
Please choose only one of the following: Before 2006 2006-2009 2010-2013 2014-2017 After 2017 No, did not have When were you first diagnosed with: Squamous cell skin cancer Only answer this question if the following conditions are met: LOGIC Please choose only one of the following: Before 2006 2006-2009 2010-2013 2014-2017 After 2017 No, did not have When were you first diagnosed with: Basal cell skin cancer
Please choose only one of the following: Before 2006 2006-2009 2010-2013 2014-2017 After 2017 No, did not have When were you first diagnosed with: Squamous cell skin cancer Only answer this question if the following conditions are met: LOGIC Please choose only one of the following: Before 2006 2006-2009 2010-2013 2014-2017 After 2017 No, did not have []When were you first diagnosed with: Basal cell skin cancer Only answer this question if the following conditions are met:
Please choose only one of the following: Before 2006 2006-2009 2010-2013 2014-2017 After 2017 No, did not have When were you first diagnosed with: Squamous cell skin cancer Only answer this question if the following conditions are met: LOGIC Please choose only one of the following: Before 2006 2006-2009 2010-2013 2014-2017 After 2017 No, did not have When were you first diagnosed with: Basal cell skin cancer
Please choose only one of the following: Before 2006 2006-2009 2010-2013 2014-2017 After 2017 No, did not have When were you first diagnosed with: Squamous cell skin cancer Only answer this question if the following conditions are met: LOGIC Please choose only one of the following: Before 2006 2006-2009 2010-2013 2014-2017 After 2017 No, did not have []When were you first diagnosed with: Basal cell skin cancer Only answer this question if the following conditions are met:
Please choose only one of the following: Before 2006 2006-2009 2010-2013 2014-2017 After 2017 No, did not have When were you first diagnosed with: Squamous cell skin cancer Only answer this question if the following conditions are met: LOGIC Please choose only one of the following: Before 2006 2006-2009 2010-2013 2014-2017 After 2017 No, did not have When were you first diagnosed with: Basal cell skin cancer Only answer this question if the following conditions are met: LOGIC Please choose only one of the following conditions are met: LOGIC Please choose only one of the following:
Please choose only one of the following: Before 2006 2006-2009 2010-2013 2014-2017 After 2017 No, did not have When were you first diagnosed with: Squamous cell skin cancer Only answer this question if the following conditions are met: LOGIC Please choose only one of the following: Before 2006 2006-2009 2010-2013 2014-2017 After 2017 No, did not have When were you first diagnosed with: Basal cell skin cancer Only answer this question if the following conditions are met: LOGIC Please choose only one of the following conditions are met: LOGIC Please choose only one of the following: Before 2006 2006-2009
Please choose only one of the following: Before 2006 2006-2009 2010-2013 2014-2017 After 2017 No, did not have When were you first diagnosed with: Squamous cell skin cancer Only answer this question if the following conditions are met: LOGIC Please choose only one of the following: Before 2006 2006-2009 2010-2013 2014-2017 After 2017 No, did not have When were you first diagnosed with: Basal cell skin cancer Only answer this question if the following conditions are met: LOGIC Please choose only one of the following conditions are met: LOGIC Please choose only one of the following: Before 2006 2006-2009 2010-2013
Please choose only one of the following: Before 2006 2006-2009 2010-2013 2014-2017 After 2017 No, did not have When were you first diagnosed with: Squamous cell skin cancer Only answer this question if the following conditions are met: LOGIC Please choose only one of the following: Before 2006 2006-2009 2010-2013 2014-2017 After 2017 No, did not have When were you first diagnosed with: Basal cell skin cancer Only answer this question if the following conditions are met: LOGIC Please choose only one of the following conditions are met: LOGIC Please choose only one of the following: Before 2006 2006-2009

[]When were you first diagnosed with: Breast cancer
Only answer this question if the following conditions are met:
LOGIC
Please choose only one of the following:
O Before 2006
O 2006-2009
O 2010-2013
O 2014-2017
O After 2017
O No, did not have
[]When were you first diagnosed with: Fibrocystic or other benign breast disease
Only answer this question if the following conditions are met:
LOGIC
Please choose only one of the following:
Before 2006
2006-2009
2010-2013
○ 2014-2017
After 2017
No, did not have
[]Was the Fibrocystic or other benign breast disease confirmed by breast biopsy?
Only answer this question if the following conditions are met: LOGIC
Please choose only one of the following:
○ Yes
O No
[]When were you first diagnosed with: Colon or rectal polyps (benign)
Only answer this question if the following conditions are met:
LOGIC
Please choose only one of the following:
© Before 2006
2006-2009
O 2010-2013
O 2014-2017
After 2017
No, did not have
[]When were you first diagnosed with:
Leukemia/Lymphoma/Hodgkin's disease
Only answer this question if the following conditions are met:
LOGIC
LOGIC
Please choose only one of the following:
Please choose only one of the following: Before 2006
Please choose only one of the following: Before 2006 2006-2009
Please choose only one of the following: Before 2006 2006-2009 2010-2013
Please choose only one of the following: Before 2006 2006-2009 2010-2013 2014-2017
Please choose only one of the following: Before 2006 2006-2009 2010-2013 2014-2017 After 2017
Please choose only one of the following:
Please choose only one of the following: Before 2006 2006-2009 2010-2013 2014-2017 After 2017 No, did not have []When were you first diagnosed with:
Please choose only one of the following: Before 2006 2006-2009 2010-2013 2014-2017 After 2017 No, did not have []When were you first diagnosed with: Other cancer
Please choose only one of the following: Before 2006 2006-2009 2010-2013 2014-2017 After 2017 No, did not have []When were you first diagnosed with: Other cancer Only answer this question if the following conditions are met:
Please choose only one of the following: Before 2006 2006-2009 2010-2013 2014-2017 After 2017 No, did not have When were you first diagnosed with: Other cancer Only answer this question if the following conditions are met: LOGIC
Please choose only one of the following: Before 2006 2006-2009 2010-2013 2014-2017 After 2017 No, did not have [] When were you first diagnosed with: Other cancer Only answer this question if the following conditions are met: LOGIC Please choose only one of the following:
Please choose only one of the following: Before 2006 2006-2009 2010-2013 2014-2017 After 2017 No, did not have When were you first diagnosed with: Other cancer Only answer this question if the following conditions are met: LOGIC
Please choose only one of the following: Before 2006 2006-2009 2010-2013 2014-2017 After 2017 No, did not have When were you first diagnosed with: Other cancer Only answer this question if the following conditions are met: LOGIC Please choose only one of the following: Before 2006 Before 2006

O After 2017

O No, did not have
[]What was the location or type of cancer?
Only answer this question if the following conditions are met: Answer was 'After 2017' or '2014-2017' or '2010-2013' or '2006-2009' or 'Before 2006' at question '137 [othercancer]' (When were you first diagnosed with: Other cancer)
Please choose only one of the following:
○ Abdomen
○ Adenocarcinoma
Adrenal
○ Appendix
O Bile Duct-Gallbladder
O Bladder
○ Bone
O Brain
O Bronchus
○ Chronic Lymphocytic Leukemia
Colon
Connective Tissue
O Dermatofibrosarcoma
O Digestive organs
O Endeavine related
C Englocine gland
C Eve Capper/Eye Melanoma
Eye Cancer/Eye Melanoma Floor of mouth
○ Gallbladder
() Genital
○ Gum
O Hodgkin's Disease
O Hydatidiform Mole
○ Hypopharynx
O Intrahepatic Bile Duct
○ Kidney-Wilms' Tumor
C Large Intestine
○ Larynx
○ Leiomyosarcoma
O Leukemia
O Leukemia, lymphatic
C Leukemia, monocytic
C Leukemia, myeloid Lip
O Liver
C Lymph Nodes, secondary capacit
Umph Nodes, secondary cancer Umphatic Leukemia
() Lymphosarcoma
Melanoma of the eye
Meningioma
Merkle Cell
O Middle Ear
○ Monocytic Leukemia
○ Mouth
Multiple Myeloma
○ Myelofibrosis
Myeloid Leukemia
Myeloproliferative Disease
○ Nasal Cavities
○ Nasopharynx
O Nerves
Non-Hodgkins Lymphoma
Nose Cancer, NOT skin cancer of nose Oropharynx
/ Oropharytix

Pancreas	
O Parotid Gland	
O Pelvis	
O Peritoneum	
O Pharynx	
Pituitary Gland	
O Pleura	
Polycythemia Vera	
Prostate	
Rectosigmoid Junction	
Rectum	
Respiratory	
Salivary Gland	
Secondary Cancer, other	
Secondary Neoplasm, lymph nodes	
Secondary Neoplasm, respiratory & digestive	
Sinuses	
○ Site Unspecified	
Small Bowel	
Small Intestine	
Spine	
Stomach Testigular	
○ Testicular ○ Throat	
○ Thymus Gland ○ Thyroid	
○ Tongue	
○ Tonsils	
○ Trachea	
○ Ureter	
○ Vocal Cord	
Waldenstrom's Macroglobulinemia	
Wilms' Tumor (kidney)	
[7]\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	_
[]When were you first diagnosed with	٠
Diabetes Type I	
Only answer this question if the following conditions are met:	
LOGIC	
Please choose only one of the following:	
○ Before 2006	
2006-2009	
O 2010-2013	
O 2014-2017	
After 2017	
No, did not have	
[]When were you first diagnosed with Diabetes Type 2	:
Only answer this question if the following conditions are met:	
LOGIC	

O Before 2006

O Before 2006
2006-2009
O 2010-2013
2014-2017
After 2017
No, did not have
[]When were you first diagnosed with: Gestational diabetes (diabetes during pregnancy)
Only answer this question if the following conditions are met:
LOGIC
Please choose only one of the following:
○ Before 2006
2006-2009
2010-2013
O 2014-2017
After 2017
○ No, did not have
[]When were you first diagnosed with: Impaired glucose tolerance/Prediabetes Only answer this question if the following conditions are met:
LOGIC
Please choose only one of the following:
O Before 2006
2006-2009
2010-2013
O 2014-2017
After 2017
No, did not have
[]When were you first diagnosed with:
Graves' disease/Hyperthyroidism
Graves' disease/Hyperthyroidism Only answer this question if the following conditions are met: LOGIC
Graves' disease/Hyperthyroidism Only answer this question if the following conditions are met: LOGIC Please choose only one of the following:
Graves' disease/Hyperthyroidism Only answer this question if the following conditions are met: LOGIC Please choose only one of the following: Before 2006
Graves' disease/Hyperthyroidism Only answer this question if the following conditions are met: LOGIC Please choose only one of the following: Before 2006 2006-2009
Graves' disease/Hyperthyroidism Only answer this question if the following conditions are met: LOGIC Please choose only one of the following: Before 2006 2006-2009 2010-2013
Graves' disease/Hyperthyroidism Only answer this question if the following conditions are met: LOGIC Please choose only one of the following: Before 2006 2006-2009
Graves' disease/Hyperthyroidism Only answer this question if the following conditions are met: LOGIC Please choose only one of the following: Before 2006 2006-2009 2010-2013 2014-2017
Graves' disease/Hyperthyroidism Only answer this question if the following conditions are met: LOGIC Please choose only one of the following: Before 2006 2006-2009 2010-2013 2014-2017 After 2017
Graves' disease/Hyperthyroidism Only answer this question if the following conditions are met: LOGIC Please choose only one of the following: Before 2006 2006-2009 2010-2013 2014-2017 After 2017 No, did not have []When were you first diagnosed with: Hypothyroidism
Graves' disease/Hyperthyroidism Only answer this question if the following conditions are met: LOGIC Please choose only one of the following: Before 2006 2006-2009 2010-2013 2014-2017 After 2017 No, did not have []When were you first diagnosed with:
Graves' disease/Hyperthyroidism Only answer this question if the following conditions are met: LOGIC Please choose only one of the following: Before 2006 2006-2009 2010-2013 2014-2017 After 2017 No, did not have []When were you first diagnosed with: Hypothyroidism Only answer this question if the following conditions are met:
Graves' disease/Hyperthyroidism Only answer this question if the following conditions are met: LOGIC Please choose only one of the following: Before 2006 2006-2009 2010-2013 2014-2017 After 2017 No, did not have []When were you first diagnosed with: Hypothyroidism Only answer this question if the following conditions are met: LOGIC
Graves' disease/Hyperthyroidism Only answer this question if the following conditions are met: LOGIC Please choose only one of the following: Before 2006 2006-2009 2010-2013 2014-2017 After 2017 No, did not have []When were you first diagnosed with: Hypothyroidism Only answer this question if the following conditions are met: LOGIC Please choose only one of the following:
Graves' disease/Hyperthyroidism Only answer this question if the following conditions are met: LOGIC Please choose only one of the following: Before 2006 2006-2009 2010-2013 2014-2017 After 2017 No, did not have []When were you first diagnosed with: Hypothyroidism Only answer this question if the following conditions are met: LOGIC Please choose only one of the following: Before 2006
Graves' disease/Hyperthyroidism Only answer this question if the following conditions are met: LOGIC Please choose only one of the following: Before 2006 2006-2009 2010-2013 2014-2017 After 2017 No, did not have When were you first diagnosed with: Hypothyroidism Only answer this question if the following conditions are met: LOGIC Please choose only one of the following: Before 2006 2006-2009
Graves' disease/Hyperthyroidism Only answer this question if the following conditions are met: LOGIC Please choose only one of the following: Before 2006 2006-2009 2010-2013 2014-2017 After 2017 No, did not have []When were you first diagnosed with: Hypothyroidism Only answer this question if the following conditions are met: LOGIC Please choose only one of the following: Before 2006 2006-2009 2010-2013
Graves' disease/Hyperthyroidism Only answer this question if the following conditions are met: LOGIC Please choose only one of the following: Before 2006 2006-2009 2010-2013 2014-2017 After 2017 No, did not have When were you first diagnosed with: Hypothyroidism Only answer this question if the following conditions are met: LOGIC Please choose only one of the following: Before 2006 2006-2009 2010-2013 2014-2017
Graves' disease/Hyperthyroidism Only answer this question if the following conditions are met: LOGIC Please choose only one of the following: Before 2006 2006-2009 2010-2013 2014-2017 After 2017 No, did not have []When were you first diagnosed with: Hypothyroidism Only answer this question if the following conditions are met: LOGIC Please choose only one of the following: Before 2006 2006-2009 2010-2013 2014-2017 After 2017
Graves' disease/Hyperthyroidism Only answer this question if the following conditions are met: LOGIC Please choose only one of the following: Before 2006 2006-2009 2010-2013 2014-2017 After 2017 No, did not have When were you first diagnosed with: Hypothyroidism Only answer this question if the following conditions are met: LOGIC Please choose only one of the following: Before 2006 2006-2009 2010-2013 2014-2017 After 2017 No, did not have []When were you first diagnosed with:
Graves' disease/Hyperthyroidism Only answer this question if the following conditions are met: LOGIC Please choose only one of the following: Before 2006 2006-2009 2010-2013 2014-2017 After 2017 No, did not have When were you first diagnosed with: Hypothyroidism Only answer this question if the following conditions are met: LOGIC Please choose only one of the following: Before 2006 2006-2009 2010-2013 2014-2017 After 2017 No, did not have When were you first diagnosed with: Endometriosis Only answer this question if the following conditions are met:
Graves' disease/Hyperthyroidism Only answer this question if the following conditions are met: LOGIC Please choose only one of the following: Before 2006 2006-2009 2010-2013 2014-2017 After 2017 No, did not have When were you first diagnosed with: Hypothyroidism Only answer this question if the following conditions are met: LOGIC Please choose only one of the following: Before 2006 2006-2009 2010-2013 2014-2017 After 2017 No, did not have When were you first diagnosed with: Endometriosis Only answer this question if the following conditions are met: LOGIC
Graves' disease/Hyperthyroidism Only answer this question if the following conditions are met: LOGIC Please choose only one of the following: Before 2006 2006-2009 2010-2013 2014-2017 After 2017 No, did not have When were you first diagnosed with: Hypothyroidism Only answer this question if the following conditions are met: LOGIC Please choose only one of the following: Before 2006 2006-2009 2010-2013 2014-2017 After 2017 No, did not have When were you first diagnosed with: Endometriosis Only answer this question if the following conditions are met: LOGIC Please choose only one of the following conditions are met: LOGIC Please choose only one of the following conditions are met: LOGIC Please choose only one of the following: Before 2006 2006-2009
Graves' disease/Hyperthyroidism Only answer this question if the following conditions are met: LOGIC Please choose only one of the following: Before 2006 2006-2009 2010-2013 2014-2017 After 2017 No, did not have When were you first diagnosed with: Hypothyroidism Only answer this question if the following conditions are met: LOGIC Please choose only one of the following: Before 2006 2006-2009 2010-2013 2014-2017 After 2017 No, did not have When were you first diagnosed with: Endometriosis Only answer this question if the following conditions are met: LOGIC

O After 2017
No, did not have
[] Was the Endometriosis confirmed by laparoscopy?
Only answer this question if the following conditions are met: LOGIC
Please choose only one of the following:
○ Yes
O No
[]When were you first diagnosed with: Uterine fibroids
Only answer this question if the following conditions are met:
Please choose only one of the following:
Before 2006
O 2006-2009
O 2010-2013
O 2014-2017
After 2017
O No, did not have
[]When were you first diagnosed with: Polycystic ovary syndrome (PCOS)
Only answer this question if the following conditions are met:
Please choose only one of the following:
○ Before 2006
O 2006-2009
O 2010-2013
O 2014-2017
After 2017
O No, did not have
[]When did you have: Tubal ligation
Only answer this question if the following conditions are met: LOGIC
LOGIC
Please choose only one of the following:
○ Before 2006
O 2006-2009
O 2010-2013
O 2014-2017
After 2017
O No, did not have
[]When did you have first: C-Section/Cesarean section
Only answer this question if the following conditions are met:
LOGIC
Please choose only one of the following:
O Before 2006
O 2006-2009
O 2010-2013
O 2014-2017
○ After 2017
O No, did not have
[]When did you have: Hysterectomy
Only answer this question if the following conditions are met:
LOGIC

Please choose **only one** of the following:

	Before 2006
	2006-2009
-	2010-2013
-	2014-2017
	After 2017
-	No, did not have
	[]When were you first diagnosed with: Asthma Only answer this question if the following conditions are met:
	LOGIC
	ease choose only one of the following:
	Before 2006
	2006-2009
	0 2010-2013
	○ 2014-2017 ○ After 2017
	No, did not have
	[]When were you first diagnosed with: Rhinitis (hay fever)
	Only answer this question if the following conditions are met:
	LOGIC
F	Please choose only one of the following:
	Before 2006
	2006-2009
	2010-2013
	2014-2017
	[]When were you first diagnosed with: Systemic lupus erythematosus (SLE)
(Only answer this question if the following conditions are met:
	LOGIC
F	Please choose only one of the following:
	○ Before 2006
	2006-2009
	2010-2013
-	2014-2017
	After 2017
-	No, did not have
	[]When were you first diagnosed with: Rheumatoid arthritis
(Only answer this question if the following conditions are met:
	LOGIC
F	Please choose only one of the following:
	Before 2006
	2006-2009
	2010-2013
-	2014-2017
-	After 2017
	No, did not have
	[]When were you first diagnosed with: Other arthritis
(Only answer this question if the following conditions are met:
	LOGIC
F	Please choose only one of the following:
-	Before 2006
-	2006-2009
	2010-2013
	2014-2017
	After 2017
-	No, did not have

[]When were you first diagnosed with: Eczema (atopic dermatitis)
Only answer this question if the following conditions are met:
LOGIC
Please choose only one of the following:
 □ Before 2006 □ 2006-2009 □ 2010-2013 □ 2014-2017 □ After 2017 □ No, did not have
[]You will be receiving a follow-up email in the near future to gather some more
information on your eczema.
Only answer this question if the following conditions are met: Answer was 'After 2017' or '2014-2017' or '2010-2013' or '2006-2009' or 'Before 2006' at question '157 [ecze]' (When were you first diagnosed with: Eczema (atopic dermatitis))
[]When were you first diagnosed with: Psoriasis
Only answer this question if the following conditions are met: Please choose only one of the following:
○ Before 2006
O 2006-2009
O 2010-2013
② 2014-2017
After 2017 No, did not have
[]When were you first diagnosed with: Gallstones
Only answer this question if the following conditions are met:
LOGIC
Please choose only one of the following:
 □ Before 2006 □ 2006-2009 □ 2010-2013 □ 2014-2017 □ After 2017 □ No, did not have
[]When did you have: Gallbladder removal (cholecystectomy)
Only answer this question if the following conditions are met:
LOGIC
Please choose only one of the following:
 □ Before 2006 □ 2006-2009 □ 2010-2013 □ 2014-2017 □ After 2017 □ No, did not have
[]When were you first diagnosed with: Ulcerative colitis/Crohn's disease/Microscopic colitis
Only answer this question if the following conditions are met:
LOGIC
Please choose only one of the following:
 ○ Before 2006 ○ 2006-2009 ○ 2010-2013 ○ 2014-2017 ○ After 2017 ○ No. did not have
○ No, did not have []When were you first diagnosed with:
Irritable bowel syndrome

Only answer this question if the following conditions are met:

LOGIC	
Please choose only one of the following:	
O Before 2006	
2006-2009	
O 2010-2013	
O 2014-2017	
○ After 2017 ○ No, did not have	
[]When were you first diagnosed with: Celiac disease	
Only answer this question if the following conditions are met:	
LOGIC	
Please choose only one of the following:	
Before 2006	
2006-2009 2010-2013	
O 2014-2017	
After 2017	
O No, did not have	
[]When were you first diagnosed with: Eosinophilic esophagitis	
Only answer this question if the following conditions are met:	
LOGIC	
Please choose only one of the following:	
O Before 2006	
2006-2009 2010-2013	
2014-2017	
After 2017	
○ No, did not have	
[]When were you first diagnosed with: Diverticulitis	
Diverticulitis	
Diverticulitis Only answer this question if the following conditions are met:	
Diverticulitis Only answer this question if the following conditions are met: LOGIC	
Diverticulitis Only answer this question if the following conditions are met: LOGIC Please choose only one of the following: Before 2006 2006-2009	
Diverticulitis Only answer this question if the following conditions are met: LOGIC Please choose only one of the following: Before 2006 2006-2009 2010-2013	
Diverticulitis Only answer this question if the following conditions are met: LOGIC Please choose only one of the following: Before 2006 2006-2009 2010-2013 2014-2017	
Diverticulitis Only answer this question if the following conditions are met: LOGIC Please choose only one of the following: Before 2006 2006-2009 2010-2013	
Diverticulitis Only answer this question if the following conditions are met: LOGIC Please choose only one of the following: Before 2006 2006-2009 2010-2013 2014-2017 After 2017 No, did not have	
Diverticulitis Only answer this question if the following conditions are met: LOGIC Please choose only one of the following: Before 2006 2006-2009 2010-2013 2014-2017 After 2017 No, did not have []When did you have: Appendectomy Only answer this question if the following conditions are met:	
Diverticulitis Only answer this question if the following conditions are met: LOGIC Please choose only one of the following: Before 2006 2006-2009 2010-2013 2014-2017 After 2017 No, did not have []When did you have: Appendectomy Only answer this question if the following conditions are met: LOGIC	
Diverticulitis Only answer this question if the following conditions are met: LOGIC Please choose only one of the following: Before 2006 2006-2009 2010-2013 2014-2017 After 2017 No, did not have []When did you have: Appendectomy Only answer this question if the following conditions are met: LOGIC Please choose only one of the following:	
Diverticulitis Only answer this question if the following conditions are met: LOGIC Please choose only one of the following: Before 2006 2006-2009 2010-2013 2014-2017 After 2017 No, did not have []When did you have: Appendectomy Only answer this question if the following conditions are met: LOGIC Please choose only one of the following: Before 2006	
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Diverticulitis Only answer this question if the following conditions are met: LOGIC Please choose only one of the following: Before 2006 2006-2009 2010-2013 2014-2017 No, did not have []When did you have: Appendectomy Only answer this question if the following conditions are met: LOGIC Please choose only one of the following: Before 2006 2006-2009 2010-2013 2014-2017 After 2017 No, did not have []When were you first diagnosed with: Fatty liver/Non-alcoholic fatty liver disease Only answer this question if the following conditions are met: LOGIC	

After 2017
No, did not have
[]When did you have first: Gastric banding/Lap band
Only answer this question if the following conditions are met:
LOGIC
Please choose only one of the following:
O Before 2006 O 2006-2009
2010-2013
O 2014-2017
After 2017
No, did not have
[] When did you have first: Gastric bypass
Only answer this question if the following conditions are met:
LOGIC
Please choose only one of the following:
O Before 2006
2006-2009
O 2010-2013
2014-2017 After 2017
No, did not have
[]When did you have first:
Gastric sleeve (sleeve gastrectomy)
Only answer this question if the following conditions are met:
LOGIC
Please choose only one of the following:
O Before 2006
2006-2009
O 2010-2013
O 2014-2017
After 2017 No, did not have
[]When did you have first: Other weight loss procedures with bariatric devices
Only answer this question if the following conditions are met:
LOGIC
Please choose only one of the following:
O Before 2006
2006-2009
O 2010-2013
2014-2017
After 2017 No, did not have
[]When were you first diagnosed with: Anorexia
Only answer this question if the following conditions are met:
LOGIC
Please choose only one of the following:
Before 2006
2006-2009
O 2010-2013
2014-2017
O After 2017
No, did not have
[]When were you first diagnosed with: Bulimia
Only answer this question if the following conditions are met-

LOGIC

Please choose only one of the following:
O Before 2006
2006-2009
2010-2013
2014-2017
After 2017
No, did not have
[]When were you first diagnosed with:
Binge eating disorder (BED)
LOGIC
Please choose only one of the following:
O Before 2006
2006-2009
2010-2013
2014-2017
After 2017
No, did not have
[]When were you first diagnosed with: Avoidant/Restrictive Food Intake Disorder (ARFID)
Only answer this question if the following conditions are met:
LOGIC
Please choose only one of the following:
O Before 2006
O 2006-2009
O 2010-2013
O 2014-2017
After 2017
O No, did not have
[]When were you first diagnosed with: Eating disorder: Other/Not Specified
Only answer this question if the following conditions are met:
LOGIC
Please choose only one of the following:
O 2006 2000
2006-2009 2010-2013
O 2014-2017
() After 2017
No, did not have
[]When were you first diagnosed with: Kidney stones
•
Only answer this question if the following conditions are met:
LOGIC
Please choose only one of the following:
O Before 2006
2006-2009
2010-2013
2014-2017
After 2017
No, did not have
[]When did you have: Tonsillectomy
Only answer this question if the following conditions are met:
LOGIC
Please choose only one of the following:
O Before 2006
Q 2006-2009
O 2010-2013
O 2014-2017
After 2017

No, did not have
[]When did you have first: Hernia
Only answer this question if the following conditions are met:
LOGIC
Please choose only one of the following:
O Before 2006
2006-2009
O 2010-2013
2014-2017
After 2017No, did not have
[]When were you first diagnosed with: Seizure (1 or more)/Epilepsy Only answer this question if the following conditions are met:
LOGIC
Please choose only one of the following:
○ Before 2006
2006-2009
2010-2013
2014-2017
After 2017
No, did not have
[]When were you first diagnosed with: Sleep apnea
Only answer this question if the following conditions are met:
LOGIC
Please choose only one of the following:
Before 2006
2006-2009 2010-2013
2014-2017
After 2017
No, did not have
[]When were you first diagnosed with: Mononucleosis
Only answer this question if the following conditions are met:
LOGIC
Please choose only one of the following:
Before 2006
2006-2009 2010-2013
2014-2017
After 2017
No, did not have
[]When were you first diagnosed with: Depression (clinician-diagnosed)
Only answer this question if the following conditions are met:
LOGIC
Please choose only one of the following:
O Before 2006
2006-2009
2010-2013
2014-2017 After 2017
No, did not have
[]When were you first diagnosed with:
Anxiety (clinician-diagnosed)

Only answer this question if the following conditions are met:

LOGIC
Please choose only one of the following:
O Before 2006
2006-2009
O 2010-2013
2014-2017 After 2017
No, did not have
[]When were you first diagnosed with: ADHD/ADD (clinician diagnosed)
Only answer this question if the following conditions are met:
LOGIC
Please choose only one of the following:
○ Before 2006
2006-2009
O 2010-2013
O 2014-2017
After 2017
No, did not have
[]When were you first diagnosed with: Migraine headaches
Only answer this question if the following conditions are met:
LOGIC
Please choose only one of the following:
O Before 2006
2006-2009
O 2010-2013
2014-2017 After 2017
No, did not have
[]When were you first diagnosed with:
Multiple sclerosis
Only answer this question if the following conditions are met:
LOGIC
Please choose only one of the following:
Before 2006
2006-2009 2010-2013
2010-2017
After 2017
No, did not have
[]When did you first have: Joint surgery (shoulder, hip, knee, ankle, etc.)
Only answer this question if the following conditions are met:
LOGIC
Please choose only one of the following:
O Before 2006
2006-2009
O 2010-2013
2014-2017 After 2017
No, did not have

Only answer this question if the following conditions are met:							
OGIC							
Describe Other Major Illness Year of First Diagnosis/Surgery							
Health Screening							
•		1					
]When was your last routine (preventat	tive) pn	ysıcaı	exam	or ched	ck-up?	,	
Please choose only one of the following:							
Less than 1 year ago							
1-2 years ago							
More than 2 years ago							
]							
f you have a comment on this section, I	please v	vrite i	t here	. You w	ill hav	e spac	ce late
or additional comments.				•		- 12 - 27	
lease write your answer here:(write in)							
,							
Cosmetic Procedures							
-							
]							
Please rank each item on a scale from 1	(strong	gly ag	ree) to) / (stro	ongly (disagr	ee).
lease choose the appropriate response for each item:							
				Neither			
				agree			Strongly
	Strongly			nor disagree			disagree
				4	5	6	7
	agree 1	2	3				
	agree 1	2	3	Ō	0	0	0
I could have a surgical procedure done for free, I would consider	-				0	0	0
f I could have a surgical procedure done for free, I would consider rying cosmetic surgery.	0	0	0	0	0	0	0
I I could have a surgical procedure done for free, I would consider rying cosmetic surgery. I knew there would be no negative side effects or pain, I would like o try cosmetic surgery.	0	0	0	0	0	0	0
I I could have a surgical procedure done for free, I would consider rying cosmetic surgery. I knew there would be no negative side effects or pain, I would like o try cosmetic surgery. In the future, I could end up having some kind of cosmetic surgery.	0 0	0 0	0 0	0 0	0	0	0
I could have a surgical procedure done for free, I would consider ying cosmetic surgery. I knew there would be no negative side effects or pain, I would like of try cosmetic surgery. In the future, I could end up having some kind of cosmetic surgery. Would never have any kind of cosmetic surgery.	0	0	0	0	0	0	0
I could have a surgical procedure done for free, I would consider ying cosmetic surgery. I knew there would be no negative side effects or pain, I would like or try cosmetic surgery. In the future, I could end up having some kind of cosmetic surgery. would never have any kind of cosmetic surgery.	0 0 0 0	0 0 0	0 0 0	0 0 0	0	0	0
I could have a surgical procedure done for free, I would consider ying cosmetic surgery. I knew there would be no negative side effects or pain, I would like or try cosmetic surgery. In the future, I could end up having some kind of cosmetic surgery. would never have any kind of cosmetic surgery.	0 0 0 0	0 0 0	0 0 0	0 0 0	0	0	0
I could have a surgical procedure done for free, I would consider ying cosmetic surgery. I knew there would be no negative side effects or pain, I would like of try cosmetic surgery. In the future, I could end up having some kind of cosmetic surgery. would never have any kind of cosmetic surgery. Ave you EVER had any of the following	O O O Cosme	O O O O O tic sur	O O O O		O O O Cedure	0 0 0	0 0 0
I could have a surgical procedure done for free, I would consider ying cosmetic surgery. I knew there would be no negative side effects or pain, I would like to try cosmetic surgery. In the future, I could end up having some kind of cosmetic surgery. would never have any kind of cosmetic surgery. Ave you EVER had any of the following Do NOT count reconstructive surgery, s	o o o o cosme	O O O O O tic sur	O O O O		O O O Cedure	0 0 0	0 0 0
I could have a surgical procedure done for free, I would consider ying cosmetic surgery. I knew there would be no negative side effects or pain, I would like or try cosmetic surgery. In the future, I could end up having some kind of cosmetic surgery. I would never have any kind of cosmetic surgery. Average you EVER had any of the following Do NOT count reconstructive surgery, s	o o o o cosme	O O O O O tic sur	O O O O		O O O Cedure	0 0 0	0 0 0
I I could have a surgical procedure done for free, I would consider trying cosmetic surgery. If I knew there would be no negative side effects or pain, I would like or try cosmetic surgery. In the future, I could end up having some kind of cosmetic surgery. I would never have any kind of cosmetic surgery. I have you EVER had any of the following Do NOT count reconstructive surgery, sassault, cancer treatment, or birth defects	o o o o cosme	O O O O O tic sur	O O O O		O O O Cedure	0 0 0	0 0 0
I could have a surgical procedure done for free, I would consider ying cosmetic surgery. It knew there would be no negative side effects or pain, I would like of try cosmetic surgery. In the future, I could end up having some kind of cosmetic surgery. I would never have any kind of cosmetic surgery. J have you EVER had any of the following Do NOT count reconstructive surgery, sassault, cancer treatment, or birth defects	o o o o cosme	O O O O O tic sur	O O O O		O O O Cedure	0 0 0	0 0 0
I could have a surgical procedure done for free, I would consider rying cosmetic surgery. I knew there would be no negative side effects or pain, I would like of try cosmetic surgery. In the future, I could end up having some kind of cosmetic surgery. would never have any kind of cosmetic surgery. Ave you EVER had any of the following Do NOT count reconstructive surgery, sassault, cancer treatment, or birth defect lease choose all that apply:	o o o o cosme	O O O O O tic sur	O O O O		O O O Cedure	0 0 0	0 0 0
I could have a surgical procedure done for free, I would consider ying cosmetic surgery. I knew there would be no negative side effects or pain, I would like of the cosmetic surgery. In the future, I could end up having some kind of cosmetic surgery. would never have any kind of cosmetic surgery. Ave you EVER had any of the following Do NOT count reconstructive surgery, sussault, cancer treatment, or birth defect lease choose all that apply: Breast implants	o o o o cosme	O O O O O tic sur	O O O O		O O O Cedure	0 0 0	0 0 0
I could have a surgical procedure done for free, I would consider ying cosmetic surgery. I knew there would be no negative side effects or pain, I would like to try cosmetic surgery. In the future, I could end up having some kind of cosmetic surgery. I would never have any kind of cosmetic surgery. J have you EVER had any of the following Do NOT count reconstructive surgery, sussault, cancer treatment, or birth defect lease choose all that apply: Breast implants Breast implants removal "Nose job" (rhinoplasty)	o o o o cosme	O O O O O tic sur	O O O O		O O O Cedure	0 0 0	0 0 0
I could have a surgical procedure done for free, I would consider ying cosmetic surgery. I knew there would be no negative side effects or pain, I would like to try cosmetic surgery. In the future, I could end up having some kind of cosmetic surgery. I would never have any kind of cosmetic surgery. Ave you EVER had any of the following Do NOT count reconstructive surgery, sussault, cancer treatment, or birth defect lease choose all that apply: Breast implants Breast implants removal "Nose job" (rhinoplasty) Liposuction	o o o o cosme	O O O O O tic sur	O O O O		O O O Cedure	0 0 0	0 0 0
I could have a surgical procedure done for free, I would consider ying cosmetic surgery. I knew there would be no negative side effects or pain, I would like by try cosmetic surgery. In the future, I could end up having some kind of cosmetic surgery. I would never have any kind of cosmetic surgery. I have you EVER had any of the following Do NOT count reconstructive surgery, sussault, cancer treatment, or birth defect lease choose all that apply: Breast implants Breast implants removal "Nose job" (rhinoplasty) Liposuction "Tummy tuck" (abdominoplasty)	o o o o cosme	O O O O O tic sur	O O O O		O O O Cedure	0 0 0	0 0 0
I could have a surgical procedure done for free, I would consider ying cosmetic surgery. I knew there would be no negative side effects or pain, I would like or try cosmetic surgery. In the future, I could end up having some kind of cosmetic surgery. would never have any kind of cosmetic surgery.] Have you EVER had any of the following Do NOT count reconstructive surgery, sassault, cancer treatment, or birth defect lease choose all that apply: Breast implants Breast implants removal "Nose job" (rhinoplasty) Liposuction "Tummy tuck" (abdominoplasty) Injection with botulinum toxin (For example: Botox or Dysport)	cosme	O O O O Stic sur	O O O O rgeries	o o o or prod motor v	O O O Cedure	0 0 0	0 0 0
I could have a surgical procedure done for free, I would consider ying cosmetic surgery. I knew there would be no negative side effects or pain, I would like or try cosmetic surgery. In the future, I could end up having some kind of cosmetic surgery. I would never have any kind of cosmetic surgery. I have you EVER had any of the following Do NOT count reconstructive surgery, sussault, cancer treatment, or birth defect lease choose all that apply: Breast implants Breast implants Breast implants removal "Nose job" (rhinoplasty) Liposuction "Tummy tuck" (abdominoplasty) Injection with botulinum toxin (For example: Botox or Dysport) Injection with soft tissue fillers [For example: fat, collagen, silicone	cosme	O O O O Stic sur	O O O O rgeries	o o o or prod motor v	O O O Cedure	0 0 0	0 0 0
I could have a surgical procedure done for free, I would consider ying cosmetic surgery. I knew there would be no negative side effects or pain, I would like by try cosmetic surgery. In the future, I could end up having some kind of cosmetic surgery. I would never have any kind of cosmetic surgery. I have you EVER had any of the following Do NOT count reconstructive surgery, sussault, cancer treatment, or birth defect lease choose all that apply: Breast implants Breast implants Breast implants removal "Nose job" (rhinoplasty) Liposuction "Tummy tuck" (abdominoplasty) Injection with botulinum toxin (For example: Botox or Dysport) Injection with soft tissue fillers [For example: fat, collagen, silicone] Eyelid surgery (blepharoplasty)	cosme	O O O O Stic sur	O O O O rgeries	o o o or prod motor v	O O O Cedure	0 0 0	0 0 0
I could have a surgical procedure done for free, I would consider ying cosmetic surgery. I knew there would be no negative side effects or pain, I would like by try cosmetic surgery. In the future, I could end up having some kind of cosmetic surgery. Would never have any kind of cosmetic surgery. I have you EVER had any of the following Do NOT count reconstructive surgery, sussault, cancer treatment, or birth defect lease choose all that apply: Breast implants Breast implants Breast implants removal "Nose job" (rhinoplasty) Liposuction "Tummy tuck" (abdominoplasty) Injection with botulinum toxin (For example: Botox or Dysport) Injection with soft tissue fillers [For example: fat, collagen, silicone Eyelid surgery (blepharoplasty)) Face lift	cosme	O O O O Stic sur	O O O O rgeries	o o o or prod motor v	O O O Cedure	0 0 0	0 0 0
I could have a surgical procedure done for free, I would consider lying cosmetic surgery. It knew there would be no negative side effects or pain, I would like of try cosmetic surgery. In the future, I could end up having some kind of cosmetic surgery. I would never have any kind of cosmetic surgery. I have you EVER had any of the following Do NOT count reconstructive surgery, sassault, cancer treatment, or birth defect lease choose all that apply: Breast implants Breast implants removal "Nose job" (rhinoplasty) Liposuction "Tummy tuck" (abdominoplasty) Injection with botulinum toxin (For example: Botox or Dysport) Injection with soft tissue fillers [For example: fat, collagen, silicone Eyelid surgery (blepharoplasty) Face lift Breast lift	cosme	O O O O Stic sur	O O O O rgeries	o o o or prod motor v	O O O Cedure	0 0 0	0 0 0
I could have a surgical procedure done for free, I would consider lying cosmetic surgery. It knew there would be no negative side effects or pain, I would like of try cosmetic surgery. In the future, I could end up having some kind of cosmetic surgery. I would never have any kind of cosmetic surgery. I have you EVER had any of the following Do NOT count reconstructive surgery, sassault, cancer treatment, or birth defect lease choose all that apply: Breast implants Breast implants removal "Nose job" (rhinoplasty) Liposuction "Tummy tuck" (abdominoplasty) Injection with botulinum toxin (For example: Botox or Dysport) Injection with soft tissue fillers [For example: fat, collagen, silicone Eyelid surgery (blepharoplasty) Face lift	cosme	O O O O Stic sur	O O O O rgeries	o o o or prod motor v	O O O Cedure	0 0 0	0 0 0
I could have a surgical procedure done for free, I would consider lying cosmetic surgery. It knew there would be no negative side effects or pain, I would like of try cosmetic surgery. In the future, I could end up having some kind of cosmetic surgery. I would never have any kind of cosmetic surgery. I have you EVER had any of the following Do NOT count reconstructive surgery, sassault, cancer treatment, or birth defect lease choose all that apply: Breast implants Breast implants removal "Nose job" (rhinoplasty) Liposuction "Tummy tuck" (abdominoplasty) Injection with botulinum toxin (For example: Botox or Dysport) Injection with soft tissue fillers [For example: fat, collagen, silicone Eyelid surgery (blepharoplasty) Face lift Breast lift	cosme	O O O O Stic sur	O O O O rgeries	o o o or prod motor v	O O O Cedure	0 0 0	0 0 0
I could have a surgical procedure done for free, I would consider tying cosmetic surgery. I knew there would be no negative side effects or pain, I would like to try cosmetic surgery. In the future, I could end up having some kind of cosmetic surgery. Would never have any kind of cosmetic surgery. Have you EVER had any of the following Do NOT count reconstructive surgery, sassault, cancer treatment, or birth defect lease choose all that apply: Breast implants Breast implants removal "Nose job" (rhinoplasty) Liposuction "Tummy tuck" (abdominoplasty) Injection with botulinum toxin (For example: Botox or Dysport) Injection with soft tissue fillers [For example: fat, collagen, silicone Eyelid surgery (blepharoplasty) Face lift Breast lift "Fat Freezing" (cryolipolysis)	cosme	O O O O Stic sur	O O O O rgeries	o o o or prod motor v	O O O Cedure	0 0 0	0 0 0
I could have a surgical procedure done for free, I would consider tying cosmetic surgery. I knew there would be no negative side effects or pain, I would like on the future, I could end up having some kind of cosmetic surgery. Would never have any kind of cosmetic surgery. Have you EVER had any of the following Do NOT count reconstructive surgery, sassault, cancer treatment, or birth defect lease choose all that apply: Breast implants Breast implants Breast implants removal "Nose job" (rhinoplasty) Liposuction "Tummy tuck" (abdominoplasty) Injection with botulinum toxin (For example: Botox or Dysport) Injection with soft tissue fillers [For example: fat, collagen, silicone Eyelid surgery (blepharoplasty) Face lift Breast lift "Fat Freezing" (cryolipolysis) Hair transplantation	cosme	O O O O Stic sur	O O O O rgeries	o o o or prod motor v	O O O Cedure	0 0 0	0 0 0
I could have a surgical procedure done for free, I would consider tying cosmetic surgery. I knew there would be no negative side effects or pain, I would like by try cosmetic surgery. In the future, I could end up having some kind of cosmetic surgery. Would never have any kind of cosmetic surgery. Have you EVER had any of the following Do NOT count reconstructive surgery, sassault, cancer treatment, or birth defect lease choose all that apply: Breast implants Breast implants removal "Nose job" (rhinoplasty) Liposuction "Tummy tuck" (abdominoplasty) Injection with botulinum toxin (For example: Botox or Dysport) Injection with soft tissue fillers [For example: fat, collagen, silicone Eyelid surgery (blepharoplasty) Face lift Breast lift "Fat Freezing" (cryolipolysis) Hair transplantation "Vaginal rejuvenation" (vaginoplasty) or Labiaplasty	cosme	O O O O Stic sur	O O O O rgeries	o o o or prod motor v	O O O Cedure	0 0 0	0 0 0
I could have a surgical procedure done for free, I would consider ying cosmetic surgery. It knew there would be no negative side effects or pain, I would like by try cosmetic surgery. In the future, I could end up having some kind of cosmetic surgery. I would never have any kind of cosmetic surgery. I have you EVER had any of the following Do NOT count reconstructive surgery, sussault, cancer treatment, or birth defect lease choose all that apply: Breast implants Breast implants Breast implants removal "Nose job" (rhinoplasty) Liposuction "Tummy tuck" (abdominoplasty) Injection with botulinum toxin (For example: Botox or Dysport) Injection with soft tissue fillers [For example: fat, collagen, silicone Eyelid surgery (blepharoplasty) Face lift Breast lift "Fat Freezing" (cryolipolysis) Hair transplantation "Vaginal rejuvenation" (vaginoplasty) or Labiaplasty Laser hair removal	cosme	O O O O Stic sur	O O O O rgeries	o o o or prod motor v	O O O Cedure	0 0 0	0 0 0
Breast implants removal "Nose job" (rhinoplasty) Liposuction "Tummy tuck" (abdominoplasty) Injection with botulinum toxin (For example: Botox or Dysport) Injection with soft tissue fillers [For example: fat, collagen, silicone Eyelid surgery (blepharoplasty) Face lift Breast lift "Fat Freezing" (cryolipolysis) Hair transplantation "Vaginal rejuvenation" (vaginoplasty) or Labiaplasty Laser hair removal Laser skin resurfacing or Dermabrasion	cosme	O O O O Stic sur	O O O O rgeries	o o o or prod motor v	O O O Cedure	0 0 0	0 0 0

Other cosmetic surgery or procedures

	many times did you have br	east implant surgery?
Answer wa	ver this question if the following conditions are met: as at question '194 [cosmeticsurgery]' (Have you EVER h ach as following a motor vehicle accident, assault, cance	ad any of the following cosmetic surgeries or procedures? (Dor treatment, or birth defect.))
Please cho	pose only one of the following:	
O 1		
O 2		
O 3		
O 4		
_	en did you have your FIRST b	reast implant procedure?
Only answ	ver this question if the following conditions are met:	is]" (How many times did you have breast implant surgery?)
Please cho	pose only one of the following:	
0	1985	。 2003
0	1986	。 2004
0	1987	o 2005
0	1988	。 2006
0	1989	o 2007
0	1990	o 2008
0	1991	o 2010
0	1992	o 2011
0	1993	o 2012
0	1994	o 2013
0	1995	o 2014
0	1996	o 2015
0	1997	o 2016
0	1998	o 2017
0	1999	o 2018
0	2000	o 2019
0	2001	o 2020
0	2002	
	en did you have your SECOND	breast implant procedure?
inswer wa	ver this question if the following conditions are met: as '4' or '3' or '2' or '5+' at question '195 [numimplants]' (H	ow many times did you have breast implant surgery?)
	pose only one of the following:	2000
1985		2000
1986		2001
1987		2002
1988		2003
1989		2004
1990		2005
1991		2006
1992		2007
1993		2008
1994		2009
1995		2010
1996		2011
1997		2012
1998		2013
1999		2014

(Do NOT count reconstructive

2015	2018
2016	2019
2017	2020
[]When did you have your THIRD breast impla	ant procedure?
Only answer this question if the following conditions are met: Answer was '4' or '5+' or '3' at question '195 [numimplants]' (How many times did you ha	ve breast implant surgery?)

0	1985	0	2004
0	1986	0	2005
0	1987	0	2006
0	1989	0	2007
0	1990	0	2008
0	1991	0	2009
0	1992	0	2010
0	1993	0	2011
0	1994	0	2012
0	1995	0	2013
0	1996	0	2014
0	1997	0	2015
0	1998	0	2016
0	1999	0	2017
0	2000	0	2018
0	2001	0	2019
0	2002	0	2020
0	2003		

[]When did you have your FOURTH breast implant procedure?

Only answer this question if the following conditions are met:

Answer was '4' or '5+' at question '195 [numimplants]' (How many times did you have breast implant surgery?)

Please choose **only one** of the following:

Please choose only one of the following:

0	1985	0	2003
0	1986	0	2004
0	1987	0	2005
0	1988	0	2006
0	1989	0	2008
0	1990	0	2009
0	1991	0	2010
0	1992	0	2011
0	1993	0	2012
0	1994	0	2013
0	1995	0	2014
0	1996	0	2015
0	1997	0	2016
0	1998	0	2017
0	1999	0	2018
0	2000	0	2019
0	2001	0	2020
0	2002		

[]When did you have your FIFTH breast implant procedure?

Only answer this question if the following conditions are met:

Answer was '5+' at question '195 [numimplants]' (How many times did you have breast implant surgery?)

Please choose only one of the following:

0	1996		
0	1997		
0	1998		
0	1999		
0	2000		
0	2002		
0	2003		
0	2004		
0	2005		
0	2006		
0	2007		
0	2008		
0	2009		
0	2010		
0	2012		
0	2013		
0	2014		
0	2015		
0	2016		
0	2017		
0	2018		
0	2019 2020		
Only answer Answer was surgery, suc	many times did you have breast implant removal? er this question if the following conditions are met: at question '194 [cosmeticsurgery]' (Have you EVER had any of the following cosmetic surgeries or procedure as following a motor vehicle accident, assault, cancer treatment, or birth defect.)) use only one of the following:	cedure	s? (Do NOT count reconstructive
Only answer	n did you have your FIRST breast implant removal? or this question if the following conditions are met: '3' or '4' or '5+' or '1' or '2' at question '201 [numremoval]' (How many times did you have breast implant to the see only one of the following:	remova	il?)
	1985	0	1995
0	1986	0	1996
0		0	
0	1987	0	1997
0	1988	0	1998
0	1989	0	1999
0	1990	0	2000
0	1991	0	2001
0	1992	0	2002
0	1993	0	2003
O 2009	1994	0	2004

0	2005	0	2013
0	2006	0	2014
0	2007	0	2015
0	2008	0	2016
0	2009	0	2017
0	2010	0	2018
0	2011	0	2019
0	2012	0	2020

[]When did you have your SECOND breast implant removal?

Only answer this question if the following conditions are met:

Answer was '5+' or '3' or '4' or '2' at question '201 [numremoval]' (How many times did you have breast implant removal?)

Please choose only one of the following:

0	1985	0	2004
0	1986	0	2005
0	1987	0	2006
0	1988	0	2007
0	1989	0	2008
0	1990	0	2009
0	1991	0	2010
0	1992	0	2011
0	1993	0	2012
0	1994	0	2013
0	1996	0	2014
0	1997	0	2015
0	1998	0	2016
0	1999	0	2017
0	2000	0	2018
0	2001	0	2019
0	2002	0	2020
0	2003		

[]When did you have your THIRD breast implant removal?

Only answer this question if the following conditions are met:

Answer was '3' or '5+' or '4' at question '201 [numremoval]' (How many times did you have breast implant removal?)

Please choose **only one** of the following:

0	1985
0	1986
0	1987
0	1988
0	1989
0	1990
0	1991
0	1992
0	1993
0	1994
0	1995
0	1996
0	1997
0	1998
0	1999
0	2000
0	2001
0	2002
0	2003
0	2004

[]When did you have your FOURTH breast implant removal? Only answer this question if the following conditions are met: Answer was '5+' or '4' at question '201 [numremoval]' (How many times did you have breast implant removal?) Please choose only one of the following: O 1985 O 2004 O 1986 O 2005 O 1987 O 2006 O 1988 O 2007 O 1989 O 2008 O 1990 O 2009 0 1991 O 2010 O 1992 O 2011 O 1993 O 2012 O 1994 O 2013 O 1995 O 2014 O 1996 O 2015 O 1997 O 2016 O 1998 O 2017 O 1999 O 2018 O 2000 O 2019 O 2001 O 2020 O 2002 O 2003 []When did you have your FIFTH breast implant removal? Only answer this question if the following conditions are met: $Answer was \ '5+' \ at \ question \ '201 \ [numremoval]' \ (How \ many \ times \ did \ you \ have \ breast \ implant \ removal?)$ Please choose only one of the following: O 1985 O 1986 O 1987 O 1988 O 1989 O 1990 O 1991 O 1992 O 1994 O 1995 O 1996 O 1997 O 1998 O 1999 O 2000 O 2001 O 2002 O 2003 O 2004 O 2005 O 2006 O 2007 2008 O 2009 O 2010 O 2011 O 2012 O 2013 0 2014 2015 O 2016 O 2017 O 2018 O 1993

2019	
O 2020	
[]How many times did you have "nose job" (rhinoplasty)?	
Only answer this question if the following conditions are met: Answer was at question '194 [cosmeticsurgery]' (Have you EVER had any of the following cosmetic surgeries surgery, such as following a motor vehicle accident, assault, cancer treatment, or birth defect.))	or procedures? (Do NOT count reconstructive
Please choose only one of the following:	
01	
O 2	
O 3	
O 4	
○ 5+	
[]When did you have your FIRST "nose job" (rhinoplasty)	?
Only answer this question if the following conditions are met:	
Answer was '5+' or '4' or '3' or '1' or '2' at question '207 [numnosejob]' (How many times did you have "nose job")	b" (rhinoplasty)?)
Please choose only one of the following:	
O 1985	
O 1986	
O 1987	
O 1988	
① 1989	
1990	
O 1991	
1992	
O 1993	
0 1994	
1995	
O 1996	
O 1997	
O 1998	
O 1999	
O 2000	
O 2001	
O 2003	
○ 2004	
O 2005	
O 2006	
O 2007	
○ 2008	
O 2009	
O 2010	
O 2011	
O 2012	
O 2013	
O 2014	
O 2015	
O 2016	
O 2017	
O 2018	
O 2019	
O 2020	
[]When did you have your CECOND "ness joh" (rhinenless	t. () 2
[]When did you have your SECOND "nose job" (rhinoplas	ty)?
Only answer this question if the following conditions are met: Answer was '5+' or '4' or '3' or '2' at question '207 [numnosejob]' (How many times did you have "nose job" (rh	inonlastv)?)
	op.aoty): /
Please choose only one of the following:	
O 1985	O 1989
O 1986	O 1990
O 1987	O 1991
O 1988	O 1992
O 2002	-

O 1993	○ 2007
O 1994	○ 2008
O 1995	2009
O 1996	O 2010
O 1997	O 2011
○ 1998	○ 2012
O 1999	O 2013
○ 2000	O 2014
O 2001	O 2015
O 2002	O 2016
O 2003	O 2017
O 2004	O 2018
2005	O 2019
O 2006	O 2020
[]When did you have your THIRD "nose job" (Only answer this question if the following conditions are met: Answer was '4' or '5+' or '3' at question '207 [numnosejob]' (How many times did you h	
Please choose only one of the following:	are needjes (mineplacty).)
O 1985	
O 1986	2004
O 1987	2005
O 1988	O 2006
O 1989	2007
O 1990	O 2008
O 1991	O 2010
O 1992	O 2011
O 1993	O 2012
O 1994	O 2013
O 1995	O 2014
O 1996	O 2015
O 1997	O 2016
○ 1998	O 2017
○ 1999	O 2018
○ 2000	O 2019
O 2001	2020
2002	
O 2003	
[]When did you have your FOURTH "nose job	o" (rhinoplasty)?
Only answer this question if the following conditions are met: Answer was '5+' or'4' at question '207 [numnosejob]' (How many times did you have "	nose job" (rhinoplasty)?)
Please choose only one of the following:	
1985	
O 1986	
O 1987	
O 1988	
○ 1989	
O 1990	
O 1991	
O 1992	
O 1993	
0 1994	
0 1995	
0 1996	
0 1997	
O 1998	
O 1999	
2000	
2002	
O 2003	
O 1993	

○ 2004○ 2005○ 2006○ 2007○ 2008○ 2009○ 2010○ 2011○ 2012○ 2013	
2014	
0	
2015	
2016	
2017	
2018	
2019	
O 2020	
[]When did you have your F Only answer this question if the following condition Answer was '5+' at question '207 [numnosejob]' (How	
Please choose only one of the following:	
O 1985	
O 1986	
O 1987	
O 1988	
O 1989	
O 1990	
O 1991	
O 1992	
O 1993	
O 1994	
O 1995	
O 1996	
O 1997	
O 1998	
O 1999	
O 2000	
2001	
2002	
2003	
2004	
2005	
2006	
2007 2008	
2009	
O 2010	
2011	
2012	
O 2013	
2014	
2015	
2016	
2017	
2018	
2019	
]	
How many times did you ha	ve liposuction?

Only answer this question if the following conditions are met:

Answer was at question '194 [cosmeticsurgery]' (Have you EVER had any of the following cosmetic surgeries or procedures? (Do NOT count reconstructive surgery, such as following a motor vehicle accident, assault, cancer treatment, or birth defect.))

Please choose only one of the following:	
O 1	
O 2	
○ 3	
○ 4	
○ 5+	
[]When did you have your FIRST liposuction?	
Only answer this question if the following conditions are met: Answer was '5+' or '4' or '3' or '2' or '1' at question '213 [numlipo]' (How many times did you have liposuction?)	1
Please choose only one of the following:	
0.444	
① 1985 ② 1986	2004
O 1987	2005
O 1988	2006
O 1989	2007
O 1990	2008
O 1991	2009
O 1992	2010 2011
O 1993	2012
O 1994	2013
O 1995	2014
O 1996	2015
O 1997	2016
O 1998	2017
O 1999	2018
O 2000	2019
O 2001	2020
O 2002	
[]When did you have your SECOND liposuction?	
Only answer this question if the following conditions are met: Answer was '5+' or '4' or '3' or '2' at question '213 [numlipo]' (How many times did you have liposuction?)	
Please choose only one of the following:	
O 1985	
O 1986	
O 1987	
○ 1989	
O 1990	
O 1991	
O 1992	
O 1993	
O 1994	
○ 1995 ○ 1996	
O 1997	
O 1998	
O 1999	
O 2000	
O 2001	
○ 2002	
O 2003	
O 2004	
O 2005	
O 2006	
2007	
○ 2008	
2000	
○ 2009 ○ 2010	
2010	
○ 2010 ○ 2011	
2010	

O 2013	
O 2014	
O 2015	
O 2016	
O 2017	
O 2018	
O 2019	
O 2020	
[]When did you have your THIRD liposuction?	
Only answer this question if the following conditions are met:	
Answer was '5+' or'3' or '4' at question '213 [numlipo]' (How many times did you have liposuction?)	
Please choose only one of the following:	
O 1985	
O 1986	
O 1987	
O 1988	
O 1989	
O 1990	
O 1991	
O 1992	
O 1993	
O 1994	
O 1995	
O 1996	
O 1997	
O 1998	
O 1999	
O 2000	
O 2001	
O 2002	
O 2003	
O 2004	
O 2005	
O 2006	
O 2008	
2009	
O 2010	
O 2011	
O 2012	
O 2013	
O 2014	
O 2015	
O 2016	
O 2017	
O 2018	
O 2019	
O 2020	
]When did you have your FOURTH liposuction?	
Only answer this question if the following conditions are met: Answer was '5+' or '4' at question '213 [numlipo]' (How many times did you have liposuction?)	
Please choose only one of the following:	
① 1985	0
① 1986	1994
① 1987	1995
O 1988	1996
O 1989	1997
O 1990	O 1998
O 1991	O 1999
O 1992	2000
O 1993	2001
1988	2002
1000	

O 2003
O 2004
O 2005
O 2006
○ 2007
○ 2008
○ 2009
O 2010
O 2011
[]When did you have your FIFTH liposuction?
Only answer this question if the following conditions are met: Answer was '5+' at question '213 [numlipo]' (How many times did you have liposuction?)
Please choose only one of the following:
O 1985
1987
1988
O 1989
① 1990
O 1991
O 1992
① 1993
O 1994
O 1995
O 1996
O 1997
O 1998
O 1999
2000
2001
2002
2003
2004
2005
2006
2007
2008
2009
2010
O 2011
O 2012
O 2013
O 2014
2015
2016
2017
2018
O 2019
O 2020

[]How many times did you have "tummy tuck" (abdominoplasty)?
Only answer this question if the following conditions are met: Answer was at question '194 [cosmeticsurgery]' (Have you EVER had any of the following cosmetic surgeries or procedures? (Do NOT count reconstructive surgery, such as following a motor vehicle accident, assault, cancer treatment, or birth defect.))
Please choose only one of the following:
0 1
O 2
O 3
O 4
O 5+
[]When did you have your FIRST "tummy tuck" (abdominoplasty)? Only answer this question if the following conditions are met:
Answer was '3' or '2' or '1' or '4' or '5+' at question '219 [numtuck]' (How many times did you have "tummy tuck" (abdominoplasty)?)
Please choose only one of the following:
O 1985
O 1986
O 1987
O 1988
O 1989
0 1990
0 1991
O 1992
0 1993
0 1994
O 1996
O 1997
O 1998
O 1999
O 2000
0 2001
0 2002
O 2003
0 2004
O 2005
○ 2006 ○ 2007
○ 2008 ○ 2009
O 2010
O 2011
O 2012
O 2013
O 2014
O 2015
O 2016
O 2017
O 2018
O 2019
O 2020
[]When did you have your SECOND "tummy tuck" (abdominoplasty)?
Only answer this question if the following conditions are met: Answer was '5+' or '4' or '3' or '2' at question '219 [numtuck]' (How many times did you have "tummy tuck" (abdominoplasty)?)
Please choose only one of the following:
① 1985
① 1986
1987
1988
1989
O 1990
O 2012

1991	
O 1992	
O 1993	
O 1994	
O 1995	
O 1996	
O 1997	
O 1998	
O 1999	
2000	
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O 2020	
	very have very THIDD \\text{\ticr{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\texi}\tint{\text{\text{\text{\text{\texi}\text{\text{\text{\text{\texi}\text{\text{\text{\text{\text{\text{\t
[]wnen aia	you have your THIRD "tummy tuck" (abdominoplasty)?
Only answer this o	question if the following conditions are met:
Only answer this o	question if the following conditions are met: '4' or '3' at question '219 [numtuck]' (How many times did you have "tummy tuck" (abdominoplasty)?)
Only answer this of Answer was '5+' or '	
Only answer this of Answer was '5+' or '	'4' or '3' at question '219 [numtuck]' (How many times did you have "tummy tuck" (abdominoplasty)?)
Only answer this of Answer was '5+' or ' Please choose only	'4' or '3' at question '219 [numtuck]' (How many times did you have "tummy tuck" (abdominoplasty)?)
Only answer this of Answer was '5+' or' Please choose only 1985	'4' or '3' at question '219 [numtuck]' (How many times did you have "tummy tuck" (abdominoplasty)?)
Only answer this of Answer was '5+' or 'Please choose only 1985	'4' or '3' at question '219 [numtuck]' (How many times did you have "tummy tuck" (abdominoplasty)?)
Only answer this of Answer was '5+' or 'Please choose only 1985 1986 1987	'4' or '3' at question '219 [numtuck]' (How many times did you have "tummy tuck" (abdominoplasty)?)
Only answer this of Answer was '5+' or' Please choose only 1985 1986 1987 1988 1988	'4' or '3' at question '219 [numtuck]' (How many times did you have "tummy tuck" (abdominoplasty)?)
Only answer this of Answer was '5+' or' Please choose only 1985 1986 1987 1988 1989 1990	'4' or '3' at question '219 [numtuck]' (How many times did you have "tummy tuck" (abdominoplasty)?)
Only answer this of Answer was '5+' or ' Please choose only 1985 1986 1987 1988 1989 1990 1991	'4' or '3' at question '219 [numtuck]' (How many times did you have "tummy tuck" (abdominoplasty)?)
Only answer this of Answer was '5+' or' Please choose only 1985 1986 1987 1988 1989 1990 1990 1991	'4' or '3' at question '219 [numtuck]' (How many times did you have "tummy tuck" (abdominoplasty)?)
Only answer this of Answer was '5+' or' Please choose only 1985 1986 1987 1988 1989 1990 1990 1991 1992 1993	'4' or '3' at question '219 [numtuck]' (How many times did you have "tummy tuck" (abdominoplasty)?)
Only answer this of Answer was '5+' or' Please choose only 1985 1986 1987 1988 1989 1990 1990 1991 1992 1993 1994	'4' or '3' at question '219 [numtuck]' (How many times did you have "tummy tuck" (abdominoplasty)?)
Only answer this of Answer was '5+' or ' Please choose only 1985 1986 1987 1988 1989 1990 1991 1991 1992 1993 1994 1995	'4' or '3' at question '219 [numtuck]' (How many times did you have "tummy tuck" (abdominoplasty)?)
Only answer this of Answer was '5+' or ' Please choose only 1985 1986 1987 1988 1989 1990 1991 1991 1992 1993 1994 1995 1996	'4' or '3' at question '219 [numtuck]' (How many times did you have "tummy tuck" (abdominoplasty)?)
Only answer this of Answer was '5+' or' Please choose only 1985 1986 1987 1988 1989 1990 1991 1992 1993 1994 1995 1996 1997	'4' or '3' at question '219 [numtuck]' (How many times did you have "tummy tuck" (abdominoplasty)?)
Only answer this of Answer was '5+' or' Please choose only 1985 1986 1987 1988 1989 1990 1991 1992 1993 1994 1995 1996 1997	'4' or '3' at question '219 [numtuck]' (How many times did you have "tummy tuck" (abdominoplasty)?)
Only answer this of Answer was '5+' or' Please choose only 1985 1986 1987 1988 1989 1990 1991 1992 1993 1994 1995 1996 1997 1998	'4' or '3' at question '219 [numtuck]' (How many times did you have "tummy tuck" (abdominoplasty)?)
Only answer this of Answer was '5+' or' Please choose only 1985 1986 1987 1988 1989 1990 1991 1992 1993 1993 1994 1995 1996 1997 1998 1999 2000	'4' or '3' at question '219 [numtuck]' (How many times did you have "tummy tuck" (abdominoplasty)?)
Only answer this of Answer was '5+' or' Please choose only 1985 1986 1987 1988 1989 1990 1991 1992 1993 1994 1995 1995 1996 1997 1998 1999 2000 2001	'4' or '3' at question '219 [numtuck]' (How many times did you have "tummy tuck" (abdominoplasty)?)
Only answer this of Answer was '5+' or' Please choose only 1985 1986 1987 1988 1989 1990 1991 1992 1993 1994 1995 1996 1997 1998 1999 2000 2001 2001	'4' or '3' at question '219 [numtuck]' (How many times did you have "tummy tuck" (abdominoplasty)?)
Only answer this of Answer was '5+' or' Please choose only 1985 1986 1987 1988 1999 1990 1991 1992 1993 1994 1995 1996 1997 1998 1999 2000 2001 2002	'4' or '3' at question '219 [numtuck]' (How many times did you have "tummy tuck" (abdominoplasty)?)
Only answer this of Answer was '5+' or' Please choose only 1985 1986 1987 1988 1990 1991 1992 1993 1994 1995 1996 1997 1998 1999 2000 2001 2002 2003	'4' or '3' at question '219 [numtuck]' (How many times did you have "tummy tuck" (abdominoplasty)?)
Only answer this of Answer was '5+' or' Please choose only 1985 1986 1987 1988 1990 1991 1992 1993 1994 1995 1996 1997 1998 1999 2000 2001 2001 2002 2003 2004	'4' or '3' at question '219 [numtuck]' (How many times did you have "tummy tuck" (abdominoplasty)?)
Only answer this of Answer was '5+' or' Please choose only 1985 1986 1987 1988 1990 1991 1992 1993 1994 1995 1996 1997 1998 1999 2000 2001 2001 2002 2003 2004 2005 2006	'4' or '3' at question '219 [numtuck]' (How many times did you have "tummy tuck" (abdominoplasty)?)
Only answer this of Answer was '5+' or' Please choose only 1985 1986 1987 1988 1990 1991 1992 1993 1994 1995 1996 1997 1998 1999 2000 2001 2001 2002 2003 2004 2005 2006	'4' or '3' at question '219 [numtuck]' (How many times did you have "tummy tuck" (abdominoplasty)?)
Only answer this of Answer was '5+' or' Please choose only 1985 1986 1987 1988 1990 1991 1992 1993 1994 1995 1996 1997 1998 1999 2000 2001 2001 2002 2003 2004 2005 2006	'4' or '3' at question '219 [numtuck]' (How many times did you have "tummy tuck" (abdominoplasty)?)
Only answer this of Answer was '5+' or' Please choose only 1985 1986 1987 1988 1990 1991 1992 1993 1994 1995 1996 1997 1998 1999 2000 2001 2001 2002 2003 2004 2005 2006	'4' or '3' at question '219 [numtuck]' (How many times did you have "tummy tuck" (abdominoplasty)?)
Only answer this of Answer was '5+' or' Please choose only 1985 1986 1987 1988 1990 1991 1992 1993 1994 1995 1996 1997 1998 1999 2000 2001 2001 2002 2003 2004 2005 2006 2007	'4' or '3' at question '219 [numtuck]' (How many times did you have "tummy tuck" (abdominoplasty)?)
Only answer this of Answer was '5+' or' Please choose only 1985 1986 1987 1988 1990 1991 1992 1993 1994 1995 1996 1997 1998 1999 2000 2001 2001 2002 2003 2004 2005 2006 2007 2008	'4' or '3' at question '219 [numtuck]' (How many times did you have "tummy tuck" (abdominoplasty)?)
Only answer this of Answer was '5+' or' Please choose only 1985 1986 1987 1988 1990 1991 1992 1993 1994 1995 1996 1997 1998 1999 2000 2001 2002 2001 2002 2003 2004 2005 2006 2007 2008 2009 2010 2010	'4' or '3' at question '219 [numtuck]' (How many times did you have "tummy tuck" (abdominoplasty)?)
Only answer this of Answer was '5+' or' Please choose only 1985 1986 1987 1988 1990 1991 1992 1993 1994 1995 1996 1997 1998 1999 2000 2001 2002 2003 2004 2005 2006 2007 2008 2009 2010	'4' or '3' at question '219 [numtuck]' (How many times did you have "tummy tuck" (abdominoplasty)?)

O 2013
O 2014
O 2015
○ 2016
O 2017
O 2018
O 2019
0 2020
[]When did you have your FOURTH "tummy tuck" (abdominoplasty)?
Only answer this question if the following conditions are met:
Answer was '5+' or '4' at question '219 [numtuck]' (How many times did you have "tummy tuck" (abdominoplasty)?)
Please choose only one of the following:
O 1985
O 1986
O 1987
O 1989
0 1990
O 1991
O 1992
O 1994
O 1995
O 1996
O 1997
O 1998
O 1999
○ 2000
O 2001
O 2002
O 2003
O 2004
O 2005
O 2006
O 2007
2008
O 2009
O 2010
O 2011
O 2012
O 2013
O 2014
O 2015
O 2016
○ 2017
O 2018
O 2019
○ 2020
[]When did you have your [][][] "tummy tuck" (abdeminentativ)?
[]When did you have your FIFTH "tummy tuck" (abdominoplasty)? Only answer this question if the following conditions are met: Answer was '5+' at question '219 [numtuck]' (How many times did you have "tummy tuck" (abdominoplasty)?)
Please choose only one of the following:
O 1985
O 1986
O 1987
O 1988
O 1989
O 1990
O 1991
O 1992
O 1993
O 2012
▽

O 1995
O 1996
O 1997
O 1998
O 1999
O 2000
O 2001
O 2002
O 2003
O 2004
O 2005
O 2006
O 2007
O 2008
O 2009
O 2010
O 2011
O 2013
O 2014
O 2015
O 2016
O 2017
O 2018
O 2019
O 2020
[]How many times did you have an injection with botulinum toxin (For example: Botox, Dysport)? Only answer this question if the following conditions are met:
Answer was at question '194 [cosmeticsurgery]' (Have you EVER had any of the following cosmetic surgeries or procedures? (Do NOT count reconstructive surgery, such as following a motor vehicle accident, assault, cancer treatment, or birth defect.))
Please choose only one of the following:
The state of the s
0 1
O 2
O 2 O 3
O 2
O 2 O 3
0 2 0 3 0 4
○ 2 ○ 3 ○ 4 ○ 5
○ 2 ○ 3 ○ 4 ○ 5 ○ 6
○ 2 ○ 3 ○ 4 ○ 5 ○ 6 ○ 7
○ 2 ○ 3 ○ 4 ○ 5 ○ 6 ○ 7 ○ 8
○ 2 ○ 3 ○ 4 ○ 5 ○ 6 ○ 7 ○ 8 ○ 9 ○ 10+
○ 2 ○ 3 ○ 4 ○ 5 ○ 6 ○ 7 ○ 8 ○ 9
2 3 4 5 6 7 8 9 10+ [] When did you have your FIRST injection with botullinum toxin (For example: Botox
2 3 4 5 6 7 8 9 10+ [] When did you have your FIRST injection with botullinum toxin (For example: Botox or Dysport)? Only answer this question if the following conditions are met: Answer was '8' or '7' or '10+' or '9' or '6' or '5' or '4' or '3' or '2' or '1' at question '225 [numbotox]' (How many times did you have an injection with botulinum toxin (For example: Botox, Dysport)?)
2 3 4 5 6 7 8 9 10+ [] When did you have your FIRST injection with botullinum toxin (For example: Botox or Dysport)? Only answer this question if the following conditions are met: Answer was '8' or '7' or '10+' or '9' or '6' or '5' or '4' or '3' or '2' or '1' at question '225 [numbotox]' (How many times did you have an injection with botulinum toxin (For example: Botox, Dysport)?) Please choose only one of the following:
2 3 4 5 6 7 8 9 10+ [] When did you have your FIRST injection with botullinum toxin (For example: Botox or Dysport)? Only answer this question if the following conditions are met: Answer was '8' or '7' or '10+' or '9' or '6' or '5' or '4' or '3' or '2' or '1' at question '225 [numbotox]' (How many times did you have an injection with botulinum toxin (For example: Botox, Dysport)?) Please choose only one of the following: 1985
2 3 4 5 6 7 8 9 10+ [] When did you have your FIRST injection with botullinum toxin (For example: Botox or Dysport)? Only answer this question if the following conditions are met: Answer was '8' or '7' or '10+' or '9' or '6' or '5' or '4' or '3' or '2' or '1' at question '225 [numbotox]' (How many times did you have an injection with botulinum toxin (For example: Botox, Dysport)?) Please choose only one of the following: 1985 1986
2 3 4 5 6 6 7 8 9 10+ [] When did you have your FIRST injection with botullinum toxin (For example: Botox or Dysport)? Only answer this question if the following conditions are met: Answer was '8' or '7' or '10+' or '9' or '6' or '5' or '4' or '3' or '2' or '1' at question '225 [numbotox]' (How many times did you have an injection with botulinum toxin (For example: Botox, Dysport)?) Please choose only one of the following: 1985 1986 1987
2 3 4 5 6 7 8 9 10+ [] When did you have your FIRST injection with botullinum toxin (For example: Botox or Dysport)? Only answer this question if the following conditions are met: Answer was '8' or '7' or '10+' or '9' or '6' or '5' or '4' or '3' or '2' or '1' at question '225 [numbotox]' (How many times did you have an injection with botulinum toxin (For example: Botox, Dysport)?) Please choose only one of the following: 1985 1986
2 3 4 5 6 6 7 8 9 10+ [] When did you have your FIRST injection with botullinum toxin (For example: Botox or Dysport)? Only answer this question if the following conditions are met: Answer was '8' or '7' or '10+' or '9' or '6' or '5' or '4' or '3' or '2' or '1' at question '225 [numbotox]' (How many times did you have an injection with botulinum toxin (For example: Botox, Dysport)?) Please choose only one of the following: 1985 1986 1987
2 3 4 5 6 6 7 8 9 10+ [] When did you have your FIRST injection with botullinum toxin (For example: Botox or Dysport)? Only answer this question if the following conditions are met: Answer was '8' or '7' or '10+' or '9' or '6' or '5' or '4' or '3' or '2' or '1' at question '225 [numbotox]' (How many times did you have an injection with botulinum toxin (For example: Botox, Dysport)?) Please choose only one of the following: 1985 1986 1987
2 3 4 5 6 7 8 9 10+ [] When did you have your FIRST injection with botullinum toxin (For example: Botox or Dysport)? Only answer this question if the following conditions are met: Answer was '8' or '7' or '10+' or '9' or '6' or '5' or '4' or '3' or '2' or '1' at question '225 [numbotox]' (How many times did you have an injection with botulinum toxin (For example: Botox, Dysport)?) Please choose only one of the following: 1985 1986 1987 1988 1989
2 3 4 5 6 7 8 9 10+ [] When did you have your FIRST injection with botullinum toxin (For example: Botox or Dysport)? Only answer this question if the following conditions are met: Answer was '8' or '7' or '10+' or '9' or '6' or '5' or '4' or '3' or '2' or '1' at question '225 [numbotox]' (How many times did you have an injection with botulinum toxin (For example: Botox, Dysport)?) Please choose only one of the following: 1985 1986 1987 1988 1989 1990
2 3 4 5 6 7 8 9 10+ [] When did you have your FIRST injection with botullinum toxin (For example: Botox or Dysport)? Only answer this question if the following conditions are met: Answer was '8' or '7' or '10+' or '9' or '6' or '5' or '4' or '3' or '2' or '1' at question '225 [numbotox]' (How many times did you have an injection with botulinum toxin (For example: Botox, Dysport)?) Please choose only one of the following: 1985 1986 1987 1988 1989 1990 1990
2 3 4 5 6 7 8 9 10+ [] When did you have your FIRST injection with botullinum toxin (For example: Botox or Dysport)? Only answer this question if the following conditions are met: Answer was '8' or '7' or '10+' or '9' or '6' or '5' or '4' or '3' or '2' or '1' at question '225 [numbotox]' (How many times did you have an injection with botulinum toxin (For example: Botox, Dysport)?) Please choose only one of the following: 1985 1986 1988 1989 1990 1991 1991
2 3 4 5 6 6 7 8 9 10+ [] When did you have your FIRST injection with botullinum toxin (For example: Botox or Dysport)? Only answer this question if the following conditions are met: Answer was '8' or '7' or '10+' or '9' or '6' or '5' or '4' or '3' or '2' or '1' at question '225 [numbotox]' (How many times did you have an injection with botulinum toxin (For example: Botox, Dysport)?) Please choose only one of the following: 1985 1986 1987 1988 1989 1990 1991 1992 1993

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O 2020 [] When did you have your SECOND injection with botulinum toxin (For example: Botox, Dysport)? Output Description Botox, Dysport Description Desc
Only answer this question if the following conditions are met: Answer was '5' or '4' or '3' or '2' or '1' at question '225 [numbotox]' (How many times did you have an injection with botulinum toxin (For example: Botox, Dysport)?)
Please choose only one of the following:
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[]When did you have your THIRD injection with botulinum toxin (For example: Botox or Dysport)?
Only answer this question if the following conditions are met: Answer was '5' or '3' or '4' at question '225 [numbotox]' (How many times did you have an injection with botulinum toxin (For example: Botox, Dysport)?)
Please choose only one of the following:
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© 2020 []When did you have your FOURTH injection with botulinum toxin (For example:
Botox or Dysport)?
Only answer this question if the following conditions are met: Answer was '4' or '5' at question '225 [numbotox]' (How many times did you have an injection with botulinum toxin (For example: Botox, Dysport)?)
Please choose only one of the following:
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[]When did you have your FIFTH injection with botulinum or Dysport)? Only answer this question if the following conditions are met:	toxin (For example: Botox
Answer was '5' at question '225 [numbotox]' (How many times did you have an injection with botulinum toxin (For example: Botox, Dysport)?)
Please choose only one of the following:	
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example: Botox or Dysport)? Only answer this question if the following conditions are met: Answer was '6' or '7' or '8' or '9' or '10+' at question '225 [numbotox]' (How many times did you have an injection with botulinum toxin (For example: Botox, Dysport)?) Please choose only one of the following: () 1985 2004 O 1986 O 2005 O 1987 O 2006 O 1988 O 2007 O 1989 O 2008 O 1990 O 2009 0 1991 O 2010 0 1992 O 2011 0 1993 O 2012 O 1994 O 2013 O 1995 0 2014 O 1996 O 2015 O 1997 O 2016 O 1998 O 2017 O 1999 O 2018 O 2000 O 2019 O 2001 O 2020 2002 2003 []How often do you have injections with botulinum toxin (For example: Botox, Dysport)? Only answer this question if the following conditions are met: Answer was '6' or '7' or '8' or '9' or '10+' at question '225 [numbotox]' (How many times did you have an injection with botulinum toxin (For example: Botox, Please choose only one of the following: Less than once per year Once per year Twice per year Three or more times per year []How many times did you have Injection with soft tissue fillers (For example: fat, collagen, silicone, hyaluronic acid [Restylane, Juvederm])? Only answer this question if the following conditions are met: Answer was at question '194 [cosmeticsurgery]' (Have you EVER had any of the following cosmetic surgeries or procedures? (Do NOT count reconstructive surgery, such as following a motor vehicle accident, assault, cancer treatment, or birth defect.)) Please choose only one of the following: 0 1 O 2 () 3 O 4 O 5 O 6 0 7 O 9 0 10+ []When did you have your FIRST injection with soft tissue fillers (For example: fat, collagen, silicone, hyaluronic acid [Restylane, Juvederm])? Only answer this question if the following conditions are met: Answer was '5' or '4' or '10+' or '9' or '8' or '7" or '6' or '2' or '3' or '1' at question '233 [numsofttissue]' (How many times did you have Injection with soft tissue fillers (For example: fat, collagen, silicone, hyaluronic acid [Restylane, Juvederm])?) Please choose only one of the following: () 1985 O 1990 O 1986 0 1991 1987 0 1992 O 1988 0 1993 O 1989 0 1994 0 8

[]What year did you have your MOST RECENT injection with botulinum toxin (For

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[]When did you have your SECOND injection with soft tis collagen, silicone, hyaluronic acid [Restylane, Juvederm] Only answer this question if the following conditions are met: Answer was '5' or '4' or '3' or '2' at question '233 [numsofttissue]' (How many times did you have Injection with the collaboration of the following conditions are met:)?
hyaluronic acid [Restylane, Juvederm])?)	
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[]When did you have your THIRD injection with soft tissu collagen, silicone, hyaluronic acid [Restylane, Juvederm]	le fillers (For example: fat,)?
Only answer this question if the following conditions are met: Answer was '5' or '4' or '3' at question '233 [numsofttissue]' (How many times did you have Injection with soft hyaluronic acid [Restylane, Juvederm])?)	tissue fillers (For example: fat, collagen, silicone,
Please choose only one of the following:	
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[]W	2019 2020	d you have your FOURTH injection with soft tissue fillers (For example: fat, silicone, hyaluronic acid [Restylane, Juvederm])?
[]W	2019 2020 Chen dagen, answer the over was '5' or	d you have your FOURTH injection with soft tissue fillers (For example: fat, silicone, hyaluronic acid [Restylane, Juvederm])? s question if the following conditions are met: r'4' at question '233 [numsofttissue]' (How many times did you have Injection with soft tissue fillers (For example: fat, collagen, silicone, hyaluronic)
Only Answ	2019 2020 Chen dagen, answer the ore was '5' of [Restylane,]	d you have your FOURTH injection with soft tissue fillers (For example: fat, silicone, hyaluronic acid [Restylane, Juvederm])? s question if the following conditions are met: '4' at question '233 [numsofttissue]' (How many times did you have Injection with soft tissue fillers (For example: fat, collagen, silicone, hyaluron Juvederm])?)
Only Answ	2019 2020 Zhen dagen, answer the ver was '5' of [Restylane, see choose of the content of the c	d you have your FOURTH injection with soft tissue fillers (For example: fat, silicone, hyaluronic acid [Restylane, Juvederm])? s question if the following conditions are met: r'4' at question '233 [numsofttissue]' (How many times did you have Injection with soft tissue fillers (For example: fat, collagen, silicone, hyaluronic)
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Only Answ acid Pleas	2019 2020 2020 2020 2020 2020 2020 2020	d you have your FOURTH injection with soft tissue fillers (For example: fat, silicone, hyaluronic acid [Restylane, Juvederm])? s question if the following conditions are met: r'4' at question '233 [numsofttissue]' (How many times did you have Injection with soft tissue fillers (For example: fat, collagen, silicone, hyaluroni Juvederm])?) nly one of the following:
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Only Answ acid Pleas	2019 2020	d you have your FOURTH injection with soft tissue fillers (For example: fat, silicone, hyaluronic acid [Restylane, Juvederm])? s question if the following conditions are met: '4' at question '233 [numsofttissue]' (How many times did you have Injection with soft tissue fillers (For example: fat, collagen, silicone, hyaluron Juvederm])?) nly one of the following: 2004
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Only Only Answacid Pleas	2019 2020 2020 2020 2020 2020 2020 2020	d you have your FOURTH injection with soft tissue fillers (For example: fat, silicone, hyaluronic acid [Restylane, Juvederm])? s question if the following conditions are met: r'4' at question '233 [numsofttissue]' (How many times did you have Injection with soft tissue fillers (For example: fat, collagen, silicone, hyaluroniduvederm])?) nly one of the following: 2004 2005 2006 2007 2008 2009 2010 2011 2011
Only Only Answ acid Pleas	2019 2020 2020 2020 2020 2020 2020 2020	d you have your FOURTH injection with soft tissue fillers (For example: fat, silicone, hyaluronic acid [Restylane, Juvederm])? s question if the following conditions are met: r'4' at question '233 [numsofttissue]' (How many times did you have Injection with soft tissue fillers (For example: fat, collagen, silicone, hyaluron Juvederm])?) nly one of the following: 2004 2005 2006 2007 2008 2009 2010 2011 2012 2012
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Only Colling C	2019 2020 2020 2020 2020 2020 2020 2020	d you have your FOURTH injection with soft tissue fillers (For example: fat, silicone, hyaluronic acid [Restylane, Juvederm])? s question if the following conditions are met: r'4': at question '2:33 [numsofttissue]' (How many times did you have Injection with soft tissue fillers (For example: fat, collagen, silicone, hyaluroni Juvederm])?) nly one of the following: 2004 2005 2006 2007 2008 2009 2010 2011 2012 2013 2014 2015
Only Colling Control of the Colling Co	2019 2020 2020 2020 2020 2020 2020 2020	d you have your FOURTH injection with soft tissue fillers (For example: fat, silicone, hyaluronic acid [Restylane, Juvederm])? s question if the following conditions are met: r'4' at question '233 [numsofttissue]' (How many times did you have Injection with soft tissue fillers (For example: fat, collagen, silicone, hyaluroni Juvederm])?) nly one of the following: 2004 2005 2006 2007 2008 2009 2010 2011 2012 2013 2014 2015 2015
Only Answacid Pleas	2019 2020 2020 2020 2020 2020 2020 2020	d you have your FOURTH injection with soft tissue fillers (For example: fat, silicone, hyaluronic acid [Restylane, Juvederm])? s question if the following conditions are met: r'4' at question '2'33 [numsofttissue]' (How many times did you have Injection with soft tissue fillers (For example: fat, collagen, silicone, hyaluron Juvederm])?) nly one of the following: 2004
Only Answacid Pleas	2019 2020 2020 2020 2020 2020 2020 2020	d you have your FOURTH injection with soft tissue fillers (For example: fat, silicone, hyaluronic acid [Restylane, Juvederm])? s question if the following conditions are met: r'4' at question '2'33 [numsofttissue]' (How many times did you have Injection with soft tissue fillers (For example: fat, collagen, silicone, hyaluron Juvederm])?) nly one of the following: 2004
Only Answacid Pleas	2019 2020 2020 2020 2020 2020 2020 2020	d you have your FOURTH injection with soft tissue fillers (For example: fat, silicone, hyaluronic acid [Restylane, Juvederm])? s question if the following conditions are met: r'4' at question '233 [numsofttissue]' (How many times did you have Injection with soft tissue fillers (For example: fat, collagen, silicone, hyaluron Juvederm])?) nly one of the following: 2004
Only Answacid Pleas	2019 2020 2020 2020 2020 2020 2020 2020	d you have your FOURTH injection with soft tissue fillers (For example: fat, silicone, hyaluronic acid [Restylane, Juvederm])? s question if the following conditions are met: r'4' at question '2'33 [numsofttissue]' (How many times did you have Injection with soft tissue fillers (For example: fat, collagen, silicone, hyaluron Juvederm])?) nly one of the following: 2004
Only Answacid Pleas	2019 2020 2020 2020 2020 2020 2020 2020	d you have your FOURTH injection with soft tissue fillers (For example: fat, silicone, hyaluronic acid [Restylane, Juvederm])? s question if the following conditions are met: r'4' at question '233 [numsofttissue]' (How many times did you have Injection with soft tissue fillers (For example: fat, collagen, silicone, hyaluron Juvederm])?) nly one of the following: 2004
Only Collist Only Answaring Only Answaring Only Only Only Only Only Only Only Only	2019 2020 2021 2020 2020 2020 2020 2020	d you have your FOURTH injection with soft tissue fillers (For example: fat, silicone, hyaluronic acid [Restylane, Juvederm])? s question if the following conditions are met: '4' at question '233 [numsofttissue]' (How many times did you have Injection with soft tissue fillers (For example: fat, collagen, silicone, hyaluron Juvederm])?) nly one of the following: 2004
Only Answaria	2019 2020 2021 2020 2020 2020 2020 2020	d you have your FOURTH injection with soft tissue fillers (For example: fat, silicone, hyaluronic acid [Restylane, Juvederm])? s question if the following conditions are met: r'd' at question '233 [numsofttissue]' (How many times did you have Injection with soft tissue fillers (For example: fat, collagen, silicone, hyaluron Juvederm])?) nly one of the following: 2004
Only Answacid Pleas	2019 2020 2021 2020 2020 2020 2020 2020	d you have your FOURTH injection with soft tissue fillers (For example: fat, silicone, hyaluronic acid [Restylane, Juvederm])? s question if the following conditions are met: '4' at question '233 [numsofttissue]' (How many times did you have Injection with soft tissue fillers (For example: fat, collagen, silicone, hyaluron Juvederm])?) nly one of the following: 2004

Only answer this question if the following conditions are met:		
Answer was '5' at question '233 [numsofttissue]' (How many times did you have Injection with soft tissue fillers (For example: fat, collagen, silicone, hyaluronic acid [Restylane, Juvederm])?)		
Please choose only one of the following:		
O 1985	0	
O 1986	2004	
O 1987	2005	
O 1989	2006	
O 1990	2007	
O 1991	2008	
O 1992	2009	
O 1993	O 2010	
O 1994	O 2011	
O 1995	O 2012	
O 1996	O 2013	
O 1997	○ 2014	
O 1998	O 2015	
	O 2016	
O 1999	O 2017	
2000	O 2018	
O 2001	2019	
2002	○ 2020	
2003		
[]What year did you have your MOST RECENT injection vexample: fat, collagen, silicone, hyaluronic acid [Restyla Only answer this question if the following conditions are met: Answer was '10+' or '9' or '8' or '7' or '6' at question '233 [numsofttissue]' (How many times did you have Inje	ne, Juvederm])?	
silicone, hyaluronic acid [Restylane, Juvederm])?)		
Please choose only one of the following:		
O 1985		
O 1986		
O 1987		
O 1988		
O 1989		
O 1990		
O 1991		
O 1992		
O 1993		
O 1994		
O 1995		
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O 2010		
O 2011		
O 2012		
2013		
2014		
O 2015		
O 2016		
O 2017		
O 2018		
O 1988		

O 2019
O 2020
[]How often do you have injection with soft tissue fillers (For example: fat, collagen, silicone, hyaluronic acid [Restylane, Juvederm])?
Only answer this question if the following conditions are met: Answer was '9' or '10+' or '6' or '7' or '8' at question '233 [numsofttissue]' (How many times did you have Injection with soft tissue fillers (For example: fat, collagen silicone, hyaluronic acid [Restylane, Juvederm])?)
Please choose only one of the following:
C Less than once per year
Once per year
○ Twice per year
○ Three or more times per year
[]How many times did you have eyelid surgery (blepharoplasty)?
Only answer this question if the following conditions are met:
Answer was at question '194 [cosmeticsurgery]' (Have you EVER had any of the following cosmetic surgeries or procedures? (Do NOT count reconstructive surgery, such as following a motor vehicle accident, assault, cancer treatment, or birth defect.))
Please choose only one of the following:
O 1
O 2
O 3
O 4
O 5+
[]When did you have your FIRST eyelid surgery (blepharoplasty)?
Only answer this question if the following conditions are met:
Answer was '4' or '5+' or '1' or '2' or '3' at question '241 [numeyelid]' (How many times did you have eyelid surgery (blepharoplasty)?)
Please choose only one of the following:
O 1985
O 1986
O 1987
O 1988
O 1989
O 1990
O 1991
O 1992
O 1993
O 1994
O 1995
O 1996
O 1997
O 1998
O 1999
O 2000
O 2001
O 2002
O 2003
O 2004
O 2006
O 2007
O 2008
O 2009
O 2010
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O 2012
O 2014
O 2014
O 2016
O 2017
O 2018
O 2018
○ 2019 ○ 2020
O 2020 O 2012

DGIC asse choose only one of the following: 1985 1986 1987 1988 1989 1990 1990 1991 1992 1992 1993 1994 1994 1995 1996 1997 2016	
1986 2005 1987 2006 1988 2007 1989 2008 1990 2009 1991 2010 1992 2011 1993 2012 1994 2013 1995 2014 1996 2015	
1986 2005 1987 2006 1988 2007 1989 2008 1990 2009 1991 2010 1992 2011 1993 2012 1994 2013 1995 2014 1996 2015	
1987	
1988	
1989	
1990	
1991	
1992	
1993	
1994 O 2013 1995 O 2014 1996 O 2015	
1995 O 2014 1996 O 2015	
1996	
1007	
1 1 2016	
1008	
1000	
2000	
2013	
2002	
2003	
y answer this question if the following conditions are met: OGIC	
ase choose only one of the following:	
1985	
1986 🔘 2019	
1987 🔘 2020	
1988	
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2002	
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2005	
2006	
2007	
2008	
2009	
2010	
2011	
2012	
2013	
2014	
2015	
2015 2016	

	you have your FOURTH eyelid surgery (blepharoplasty)? stion if the following conditions are met:
LOGIC	
Please choose only or	ne of the following:
O 1985	
O 1986	
O 1987	
1988	
O 1989	
O 1990	
O 1991	
O 1992	
O 1993	
1994	
1995	
1996	
0 1997	
O 1999	
2000	
O 2001	
2002	
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2004	
2006	
2007	
2008	
2009	
2010	
O 2011	
O 2012	
2013	
O 2014	
2015	
2016	
2017	
2018	
2019	
O 2020	
[]When did	you have your FIFTH eyelid surgery (blepharoplasty)?
Only answer this que	stion if the following conditions are met: imesurvey/index.php/admin/questions/sa/view/surveyid/118238/gid/1052/qid/29618) == "5"))
Please choose only or	
	e of the following.
1985	
1986	
○ 1987○ 1988	
-	
-	
1990 1991	
0 1992	
1993	
O 1994	
1995	
1996	
1997	
O 1998	
O 1999	
2000	
Q 2007	
O 2002	
O 2003	
O 2004	

O 2006	
O 2007	
O 2008	
O 2009	
O 2010	
O 2011	
O 2012	
O 2013	
O 2014	
O 2015	
O 2018	
O 2019	
O 2020	
[]How many times did you have face lift surgery?	
Only answer this question if the following conditions are met: Answer was at question '194 [cosmeticsurgery]' (Have you EVER had any of the following cosmetic surger surgery, such as following a motor vehicle accident, assault, cancer treatment, or birth defect.))	es or procedures? (Do NOT count reconstructive
Please choose only one of the following:	
O 1	
O 2	
O 3	
O 4	
O 5+	
[]When did you have your FIRST face lift surgery?	
Only answer this question if the following conditions are met:	
LOGIC	
Please choose only one of the following:	
O 1985	O 2004
O 1986	O 2005
O 1987	O 2006
O 1988	O 2007
O 1989	O 2008
O 1990	O 2009
O 1991	O 2010
O 1992	O 2011
O 1993	O 2012
O 1994	O 2013
O 1995	O 2014
O 1996	O 2015
O 1997	O 2016
O 1998	O 2017
O 1999	O 2018
O 2000	O 2019
O 2001	O 2020
O 2002	
O 2003	
[]When did you have your SECOND face lift surgery?	
Only answer this question if the following conditions are met: LOGIC	
Please choose only one of the following:	
O 1975	0 1088
O 1976	O 1988
O 1977	O 1989
O 1978	O 1990
O 1979	O 1991
O 1980	O 1992
O 1981	O 1993
O 1982	O 1994
O 1983	O 1995
O 1984	0 1996
① 1985	0 1997
① 1986	O 1998
	O 1999

O 2000	2011
O 2001	O 2012
O 2002	O 2013
_	
O 2003	O 2014
O 2004	O 2015
O 2005	O 2016
O 2006	O 2017
O 2007	O 2018
O 2008	O 2019
	•
O 2009	O 2020
O 2010	
[]When did you have your THIRD face lift	O 1996
	O 1997
surgery?	O 1998
Only answer this question if the following conditions are met:	O 1999
LOGIC	O 2000
Please choose only one of the following:	_
	2001
O 1975	O 2002
O 1976	2003
	O 2004
O 1978	O 2005
O 1979	O 2006
O 1980	_
-	2007
O 1981	2008
O 1982	○ 2009
O 1983	O 2010
O 1984	O 2011
O 1985	O 2012
-	=
O 1986	O 2013
O 1987	O 2014
O 1988	O 2015
O 1989	2016
O 1990	O 2017
O 1991	2018
O 1992	O 2019
O 1993	O 2020
O 1994	
O 1995	
FINAL did have FOURTH 6 lift	
[]When did you have your FOURTH face lift surgery?	
Only answer this question if the following conditions are met: ((facelift.NAOK (/limesurvey/index.php/admin/questions/sa/view/surveyid/118238/gid/1052/qid/29699) = "5"))	== "4" or facelift.NAOK
Please choose only one of the following:	
0 1975	
O 1976	
O 1977	
O 1978	
O 1979	
O 1981	
O 1982	
O 1983	
O 1984	
O 1986	
O 1987	
<u> </u>	
O 1988	
O 1989	
O 1990	
O 1991	
O 1992	
O 1993	
O	

0	1994
0	1995
0	1996
0	1997
_	1998
_	
_	1999
_	2000
0	2001
0	2002
0	2003
0	2004
_	2005
_	2006
_	
_	2007
O	2008
0	2009
0	2010
0	2011
0	2012
_	2013
_	2014
_	
_	2015
_	2016
0	2017
0	2018
0	2019
	O 2020
- 71	Albert 191 and
[]	When did you have your FIFTH face lift surgery?
Only	y answer this question if the following conditions are met:
((fac	celift.NAOK (/limesurvey/index.php/admin/questions/sa/view/surveyid/118238/gid/1052/qid/29699) == "5"))
Plea	ise choose only one of the following:
$\overline{}$	1975
\circ	1975
_	4070
0	1976
_	1976 1977
0	
0	1977
0	1977 1978
00000	1977 1978 1979 1980
00000	1977 1978 1979 1980 1981
000000	1977 1978 1979 1980 1981
0000000	1977 1978 1979 1980 1981 1982
00000000	1977 1978 1979 1980 1981 1982 1983
00000000	1977 1978 1979 1980 1981 1982
000000000	1977 1978 1979 1980 1981 1982 1983
0000000000	1977 1978 1979 1980 1981 1982 1983 1984
00000000000	1977 1978 1979 1980 1981 1982 1983 1984 1985
0000000000000	1977 1978 1979 1980 1981 1982 1983 1984 1985 1986 1987
00000000000000	1977 1978 1979 1980 1981 1982 1983 1984 1985 1986 1987 1988
000000000000000	1977 1978 1979 1980 1981 1982 1983 1984 1985 1986 1987 1988 1989
0000000000000000	1977 1978 1979 1980 1981 1982 1983 1984 1985 1986 1987 1988 1989 1990
0000000000000000	1977 1978 1979 1980 1981 1982 1983 1984 1985 1986 1987 1988 1989
00000000000000000	1977 1978 1979 1980 1981 1982 1983 1984 1985 1986 1987 1988 1989 1990
0000000000000000000	1977 1978 1979 1980 1981 1982 1983 1984 1985 1986 1987 1988 19990 1991
00000000000000000000	1977 1978 1979 1980 1981 1982 1983 1984 1985 1986 1987 1988 19989 1990 1991 1992
00000000000000000000	1977 1978 1979 1980 1981 1982 1983 1984 1985 1986 1987 1988 19989 1990 1991 1992 1993 1995
0000000000000000000000	1977 1978 1979 1980 1981 1982 1983 1984 1985 1986 1987 1998 1990 1991 1992 1993 1992 1993 1995 1996
000000000000000000000000000000000000000	1977 1978 1979 1980 1981 1982 1983 1984 1985 1986 1987 1998 1999 1999 1999 1999
000000000000000000000000000000000000000	1977 1978 1979 1980 1981 1982 1983 1984 1985 1986 1987 1998 1999 1990 1991 1992 1993 1992 1993 1995 1996 1997 1998 1999
000000000000000000000000000000000000000	1977 1978 1979 1980 1981 1982 1983 1984 1985 1986 1987 1998 1990 1991 1992 1993 1990 1991 1992 1993 1995 1996 1997 1998 1999 2000
000000000000000000000000000000000000000	1977 1978 1979 1980 1981 1982 1983 1984 1985 1986 1987 1988 1999 1990 1991 1992 1993 1992 1993 1995 1996 1997 1998 1999 2000 2001
000000000000000000000000000000000000000	1977 1978 1979 1980 1981 1982 1983 1984 1985 1986 1987 1988 19990 1991 1991 1992 1993 1995 1996 1997 1998 1999 2000 2001
000000000000000000000000000000000000000	1977 1978 1979 1980 1981 1982 1983 1984 1985 1986 1987 1988 1999 1990 1991 1992 1993 1992 1993 1995 1996 1997 1998 1999 2000 2001
000000000000000000000000000000000000000	1977 1978 1979 1980 1981 1982 1983 1984 1985 1986 1987 1988 19990 1991 1991 1992 1993 1995 1996 1997 1998 1999 2000 2001
000000000000000000000000000000000000000	1977 1978 1979 1980 1981 1982 1983 1984 1985 1986 1987 1988 1999 1990 1991 1992 1993 1995 1996 1997 1998 1999 2000 2001 2001 2002 2003 2004
000000000000000000000000000000000000000	1977 1978 1979 1980 1981 1982 1983 1984 1985 1986 1987 1988 1999 1990 1991 1992 1993 1993 1999 1999 1999 2000 2001 2001 2002 2003 2004
000000000000000000000000000000000000000	1977 1978 1979 1980 1981 1982 1983 1984 1985 1986 1987 1988 1999 1990 1991 1992 1993 1992 1993 1995 1996 1997 1998 1999 2000 2001 2001 2002 2003 2004
000000000000000000000000000000000000000	1977 1978 1979 1980 1981 1982 1983 1984 1985 1986 1987 1988 1999 1990 1991 1992 1993 1993 1999 1999 1999 2000 2001 2001 2002 2003 2004

 ○ 2010 ○ 2011 ○ 2012 ○ 2013 ○ 2014 ○ 2015 ○ 2016 ○ 2017 ○ 2018 ○ 2019 ○ 2020
[]How many times have you had breast lift surgery? Only answer this question if the following conditions are met: Answer was at question '194 [cosmeticsurgery]' (Have you EVER had any of the following cosmetic surgeries or procedures? (Do NOT count reconstructive surgery, such as following a motor vehicle accident, assault, cancer treatment, or birth defect.))
Please choose only one of the following:
1
O 2
O 3
O 4
O 5+
[]When did you have your FIRST breast lift surgery? Only answer this question if the following conditions are met: LOGIC
Please choose only one of the following:
O 1975
O 1976
0 1977
O 1978
○ 1979 ○ 1980
O 1981
O 1982
O 1983
O 1984
O 1985
O 1986
O 1987
O 1988
○ 1989○ 1991
O 1992
O 1993
O 1994
O 1995
O 1996
○ 1997○ 1998
O 1999
O 2000
O 2001
O 2002
O 2003
O 2004
○ 2005 ○ 2006
O 2007
O 2008
O 2009
© 1879
O 2011
○ 2012 ○ 2013

O 2015
O 2016
O 2017
O 2018
O 2019
O 2020
[]When did you have your SECOND breast lift surgery?
Only answer this question if the following conditions are met:
LOGIC
Please choose only one of the following:
O 1975
O 1976
O 1977
O 1978
O 1979
O 1980
O 1981
① 1982 ② 1983
○ 1983○ 1984
O 1985
O 1986
O 1987
O 1988
O 1989
O 1990
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O 2007
O 2008
○ 2009 ○ 2010
O 2011
O 2012
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O 2016
O 2017
O 2018
O 2019
O 2020

[]When did you have your THIRD breast lift surgery? Only answer this question if the following conditions are met: LOGIC Please choose only one of the following: O 1975 O 1976 0 1977 O 1978 O 1979 O 1980 O 1981 O 1982 O 1983 O 1984 O 1985 O 1986 O 1987 O 1988 O 1989 O 1990 O 1991 O 1992 O 1993 O 1994 O 1995 O 1996 O 1997 O 1998 O 1999 O 2000 O 2001 O 2002 O 2003 O 2004 O 2005 O 2006 O 2007 O 2008 O 2009 O 2010 O 2011 O 2012 O 2013 O 2014 O 2015 O 2016 O 2017 O 2018 O 2019 O 2020 []When did you have your FOURTH breast lift surgery? Only answer this question if the following conditions are met: breastlift.NAOK (/limesurvey/index.php/admin/questions/sa/view/surveyid/118238/gid/1052/qid/29700) == "5" OR breastlift.NAOK (/limesurvey/index.php/admin/questions/sa/view/surveyid/118238/gid/1052/qid/29700) == "4" Please choose only one of the following: O 1975 O 1976 O 1977 O 1978 0 1997 0 1980 O 1981 O 1982

O 1984	
O 1985	
O 1986	
O 1987	
O 1988	
O 1989	
O 1990	
O 1991	
O 1992	
O 1993	
O 1994	
O 1995	
O 1996	
O 1997	
O 1998	
O 1999	
○ 2000	
○ 2001	
O 2002	
O 2003	
O 2004	
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○ 2006	
○ 2007	
○ 2008	
○ 2009	
O 2010	
2011	
2012	
O 2014	
O 2015	
O 2016	
2016 2017	
2017 2018	
2017	
2017 2018	
○ 2017 ○ 2018 ○ 2019 ○ 2020	vour FIFTH breast lift surgery?
○ 2017 ○ 2018 ○ 2019 ○ 2020 []When did you have	your FIFTH breast lift surgery?
2017 2018 2019 2020 []When did you have Only answer this question if the follow	
2017 2018 2019 2020 []When did you have Only answer this question if the follow LOGIC	
2017 2018 2019 2020 []When did you have Only answer this question if the follow	
2017 2018 2019 2020 []When did you have Only answer this question if the follow LOGIC	
2017 2018 2019 2020 []When did you have Only answer this question if the follow LOGIC Please choose only one of the following:	ring conditions are met:
2017 2018 2019 2020 []When did you have Only answer this question if the follow LOGIC Please choose only one of the following:	ring conditions are met:
○ 2017 ○ 2018 ○ 2019 ○ 2020 [] When did you have Only answer this question if the follow LOGIC Please choose only one of the following: ○ 1975 ○ 1976 ○ 1977 ○ 1978	ing conditions are met: 1999 2000
2017 2018 2019 2020 []When did you have Only answer this question if the follow LOGIC Please choose only one of the following: 1975 1976 1977	ing conditions are met: 1999
O 2017 O 2018 O 2019 O 2020 [] When did you have Only answer this question if the follow LOGIC Please choose only one of the following: O 1975 O 1976 O 1977 O 1978	1999 2000 2001 2002
○ 2017 ○ 2018 ○ 2019 ○ 2020 [] When did you have Only answer this question if the follow LOGIC Please choose only one of the following: ○ 1975 ○ 1976 ○ 1977 ○ 1978 ○ 1979	1999 2000 2001 2002
○ 2017 ○ 2018 ○ 2019 ○ 2020 []When did you have Only answer this question if the follow LOGIC Please choose only one of the following: ○ 1975 ○ 1976 ○ 1977 ○ 1978 ○ 1979 ○ 1980	1999 2000 2001 2002 2003
○ 2017 ○ 2018 ○ 2019 ○ 2020 []When did you have Only answer this question if the follow LOGIC Please choose only one of the following: ○ 1975 ○ 1976 ○ 1977 ○ 1978 ○ 1979 ○ 1980 ○ 1981 ○ 1982 ○ 1983	1999 2000 2001 2002 2003 2004 2005
○ 2017 ○ 2018 ○ 2019 ○ 2020 []When did you have Only answer this question if the follow LOGIC Please choose only one of the following: ○ 1975 ○ 1976 ○ 1977 ○ 1978 ○ 1979 ○ 1980 ○ 1981 ○ 1982 ○ 1983 ○ 1984	1999 2000 2001 2002 2003 2004 2005 2006
○ 2017 ○ 2018 ○ 2019 ○ 2020 []When did you have Only answer this question if the follow LOGIC Please choose only one of the following: ○ 1975 ○ 1976 ○ 1977 ○ 1978 ○ 1979 ○ 1980 ○ 1981 ○ 1982 ○ 1983	1999 2000 2001 2002 2003 2004 2005 2006
 ○ 2017 ○ 2018 ○ 2019 ○ 2020 [] When did you have Only answer this question if the follow LOGIC Please choose only one of the following: ○ 1975 ○ 1976 ○ 1977 ○ 1978 ○ 1979 ○ 1980 ○ 1981 ○ 1982 ○ 1983 ○ 1984 ○ 1985 ○ 1986 	1999 2000 2001 2002 2003 2004 2005 2006 2007
 ○ 2017 ○ 2018 ○ 2019 ○ 2020 [] When did you have Only answer this question if the follow LOGIC Please choose only one of the following: ○ 1975 ○ 1976 ○ 1977 ○ 1978 ○ 1979 ○ 1980 ○ 1981 ○ 1982 ○ 1983 ○ 1984 ○ 1985 ○ 1986 ○ 1987 	1999 2000 2001 2002 2003 2004 2005 2006 2007 2008
 ○ 2017 ○ 2018 ○ 2019 ○ 2020 [] When did you have Only answer this question if the follow LOGIC Please choose only one of the following: ○ 1975 ○ 1976 ○ 1977 ○ 1978 ○ 1979 ○ 1980 ○ 1981 ○ 1982 ○ 1983 ○ 1984 ○ 1985 ○ 1986 ○ 1987 ○ 1988 	1999 2000 2001 2002 2003 2004 2005 2006 2007 2008 2009
 ○ 2017 ○ 2018 ○ 2019 ○ 2020 [] When did you have Only answer this question if the follow LOGIC Please choose only one of the following: ○ 1975 ○ 1976 ○ 1977 ○ 1978 ○ 1979 ○ 1980 ○ 1981 ○ 1982 ○ 1983 ○ 1984 ○ 1985 ○ 1986 ○ 1987 ○ 1988 ○ 1989 	1999 2000 2001 2002 2003 2004 2005 2006 2007 2008 2009 2010 2011
 ○ 2017 ○ 2018 ○ 2019 ○ 2020 [] When did you have Only answer this question if the follow LOGIC Please choose only one of the following: ○ 1975 ○ 1976 ○ 1977 ○ 1978 ○ 1979 ○ 1980 ○ 1981 ○ 1982 ○ 1983 ○ 1984 ○ 1985 ○ 1986 ○ 1987 ○ 1988 ○ 1989 ○ 1990 	1999 2000 2001 2002 2003 2004 2005 2006 2007 2008 2009 2010 2011 2011
 ○ 2017 ○ 2018 ○ 2019 ○ 2020 [] When did you have Only answer this question if the follow LOGIC Please choose only one of the following: ○ 1975 ○ 1976 ○ 1977 ○ 1978 ○ 1979 ○ 1980 ○ 1981 ○ 1982 ○ 1983 ○ 1984 ○ 1985 ○ 1986 ○ 1987 ○ 1988 ○ 1989 ○ 1990 ○ 1991 	1999 2000 2001 2002 2003 2004 2005 2006 2007 2008 2009 2010 2011 2011
 ○ 2017 ○ 2018 ○ 2019 ○ 2020 [] When did you have Only answer this question if the following: ○ 1975 ○ 1976 ○ 1977 ○ 1978 ○ 1979 ○ 1980 ○ 1981 ○ 1982 ○ 1983 ○ 1984 ○ 1985 ○ 1986 ○ 1987 ○ 1988 ○ 1989 ○ 1990 ○ 1991 ○ 1992 	1999 2000 2001 2002 2003 2004 2005 2006 2007 2008 2009 2010 2011 2012 2013 2014 2012 2013 2014
 ○ 2017 ○ 2018 ○ 2019 ○ 2020 [] When did you have Only answer this question if the following: ○ 1975 ○ 1976 ○ 1977 ○ 1978 ○ 1979 ○ 1980 ○ 1981 ○ 1982 ○ 1983 ○ 1984 ○ 1985 ○ 1986 ○ 1987 ○ 1988 ○ 1989 ○ 1990 ○ 1991 ○ 1992 ○ 1993 	1999 2000 2001 2002 2003 2004 2005 2006 2007 2008 2009 2010 2011 2012 2013 2014 2015 2014 2015 2015 2016 2017 2018 2019 2010 2011 2012 2013 2014 2015
 ○ 2017 ○ 2018 ○ 2019 ○ 2020 [] When did you have Only answer this question if the following: ○ 1975 ○ 1976 ○ 1977 ○ 1978 ○ 1979 ○ 1980 ○ 1981 ○ 1982 ○ 1983 ○ 1984 ○ 1985 ○ 1986 ○ 1987 ○ 1988 ○ 1989 ○ 1990 ○ 1991 ○ 1992 ○ 1993 ○ 1994 	1999 2000 2001 2002 2003 2004 2005 2006 2007 2008 2009 2010 2011 2012 2013 2014 2015 2014 2015 2016
 ○ 2017 ○ 2018 ○ 2019 ○ 2020 [] When did you have Only answer this question if the following: ○ 1975 ○ 1976 ○ 1977 ○ 1978 ○ 1979 ○ 1980 ○ 1981 ○ 1982 ○ 1983 ○ 1984 ○ 1985 ○ 1986 ○ 1987 ○ 1988 ○ 1989 ○ 1990 ○ 1991 ○ 1992 ○ 1993 ○ 1994 ○ 1995 	1999 2000 2001 2002 2003 2004 2005 2006 2007 2008 2009 2010 2011 2012 2013 2014 2015 2016 2017 2016 2016 2017 2016 2016 2017
○ 2017 ○ 2018 ○ 2019 ○ 2020 []When did you have Only answer this question if the follow LOGIC Please choose only one of the following: ○ 1975 ○ 1976 ○ 1977 ○ 1978 ○ 1979 ○ 1980 ○ 1981 ○ 1982 ○ 1983 ○ 1984 ○ 1985 ○ 1986 ○ 1987 ○ 1988 ○ 1989 ○ 1990 ○ 1991 ○ 1991 ○ 1992 ○ 1993 ○ 1994 ○ 1995 ○ 1996	1999 2000 2001 2002 2003 2004 2005 2006 2007 2008 2009 2010 2011 2012 2013 2014 2015 2016 2017 2018 2016 2017 2018 2017 2018 2017 2018 2017 2018 2017 2018 2017 2018 2017 2018 2017 2018 2017 2018 2017 2018 2017 2018 2017 2018 2017 2018 2018 2017 2018 2018 2017 2018 2018 2018 2017 2018
 ○ 2017 ○ 2018 ○ 2019 ○ 2020 [] When did you have Only answer this question if the following: ○ 1975 ○ 1976 ○ 1977 ○ 1978 ○ 1979 ○ 1980 ○ 1981 ○ 1982 ○ 1983 ○ 1984 ○ 1985 ○ 1986 ○ 1987 ○ 1988 ○ 1989 ○ 1990 ○ 1991 ○ 1992 ○ 1993 ○ 1994 ○ 1995 	1999 2000 2001 2002 2003 2004 2005 2006 2007 2008 2009 2010 2011 2012 2013 2014 2015 2016 2017 2018 2017 2018 2019

[] How many times did you have cryolipolysis ("fat freezing")? Only answer this question if the following conditions are met: Answer was at question '194 [cosmeticsurgery]' (Have you EVER had any of the following cosmetic surgeries or procedures? (Do NOT count reconstructive procedures) are following a material phila popular answer transferred or high defeat.)	
surgery, such as following a motor vehicle accident, assault, cancer treatment, or birth defect.)) Please choose only one of the following:	
01	
O 3	
O 4	
O 5+	
[]When did you have your FIRST "fat freezing" (cryolipolysis)?	
Only answer this question if the following conditions are met: LOGIC	
Please choose only one of the following:	
1975	
O 1976	
0.47	
○ 1981 ○ 1982	
○ 1984 ○ 1985	
O 1986	
O 1987	
O 1988	
O 1989	
O 1990	
O 1991	
O 1992	
O 1993	
O 1994	
O 1995	
O 1996	
O 1997	
O 1998	
O 1999	
O 2000	
O 2001	
O 2002	
O 2003	
O 2004	
O 2005	
O 2006	
O 2007	
O 2008	
O 2009	
O 2010	
O 2011	
O 2012	
O 2013	
O 2014	
O 2015	
O 2016	
O 2018	
O 2019	
2020	
O 1994	

[]When did you have your SECOND "fat freezing" (cryolipolysis)? Only answer this question if the following conditions are met: LOGIC Please choose only one of the following: O 1975 O 1999 0 1976 O 2000 O 1977 O 2001 O 1978 O 2002 O 1979 O 2003 O 1980 O 2004 O 1981 O 2005 O 1982 2006 O 1983 O 2007 O 1984 O 2008 O 1985 O 2009 O 1986 O 2010 O 1987 O 2011 O 1988 O 2012 O 1989 O 2013 O 1990 O 2014 O 1991 O 2015 O 1992 O 2016 O 1993 O 2017 O 1994 O 2018 O 1995 O 2019 O 1996 O 2020 O 1997 O 1998 []When did you have your THIRD cryolipolysis ("fat freezing")? Only answer this question if the following conditions are met: **LOGIC** Please choose only one of the following: 0 1975 0 1976 O 1977 O 1978 0 1979 O 1980 O 1981 O 1982 O 1983 O 1984 O 1985 O 1986 O 1987 O 1988 O 1989 O 1990 O 1991 O 1992 O 1993 O 1994 O 1995 O 1996 O 1997 O 1998 O 1999 O 2000 O 2001 O 2002 O 2003 O 2004 2005

○ 2007○ 2008○ 2009○ 2010○ 2011○ 2012○ 2013	
 2014 2015 2016 2017 2018 2019 2020 	
O 2020	
[]When did you have your FOURTH "fat freezing" (cryolipolysis)? Only answer this question if the following conditions are met:	
LOGIC	
Please choose only one of the following:	
O 1975	
O 1976	
○ 1977 ○ 1978	
O 1979	
O 1980	
O 1981	
O 1982	
○ 1983 ○ 1984	
① 1985	
O 1986	
O 1987	
O 1988	
O 1989	
○ 1990 ○ 1991	
O 1992	
O 1993	
O 1994	
O 1995	
O 1996	
○ 1997 ○ 1998	
O 1999	
O 2000	
○ 2001	
O 2002	
○ 2003 ○ 2004	
O 2005	
O 2006	
○ 2007	
2008	
○ 2009 ○ 2010	
○ 2010	
O 2012	
○ 2013	
O 2014	
2996	
○ 2016○ 2017	
2017	

○ 2019 ○ 2020
O 2020 []When did you have your FIFTH "fat freezing" (cryolipolysis)?
Only answer this question if the following conditions are met:
«LOGIC
Please choose only one of the following:
O 1975
O 1976
O 1977
O 1978
O 1979
O 1980
O 1981
O 1982
O 1983
O 1984
O 1985
O 1986
O 1987
O 1988
O 1989
1990
0 1992
O 1993
0 1994
O 1995
○ 1996 ○ 1997
O 1998
O 1999
O 2000
O 2001
O 2002
O 2003
O 2004
○ 2005
○ 2006
○ 2007
○ 2008
○ 2009
O 2010
O 2011
O 2012
O 2013
O 2014
O 2015
O 2016
○ 2017 ○ 2018
2019
O 2020

[]How many times did you have hair transplantation?
Only answer this question if the following conditions are met: Answer was at question '194 [cosmeticsurgery]' (Have you EVER had any of the following cosmetic surgeries or procedures? (Do NOT count reconstructive surgery, such as following a motor vehicle accident, assault, cancer treatment, or birth defect.))
Please choose only one of the following:
O 1
O 2
O 3
O 4
○ 5+
[]When did you have your FIRST hair transplant? LOGIC
Please choose only one of the following:
O 1975
O 1976
O 1977
○ 1978 ○ 1979
○ 1979 ○ 1980
O 1981
O 1982
O 1983
O 1984
O 1985
O 1986
○ 1987 ○ 1988
O 1989
O 1990
O 1991
O 1992
O 1993
0 1994
○ 1995○ 1996
O 1997
O 1998
O 1999
○ 2000
○ 2001
2002
○ 2003 ○ 2004
○ 2005
O 2006
O 2007
○ 2008
O 2009
2010
O 2011
○ 2012 ○ 2013
O 2014
O 2015
O 2016
○ 2017
2018
2019
O 2020

[]When did you have your SECOND hair transplant?

Only answer this question if the following conditions are met: LOGIC Please choose only one of the following: O 1975 O 1976 0 1977 O 1978 O 1979 O 1980 O 1981 O 1982 O 1983 O 1984 O 1985 O 1986 O 1987 O 1988 O 1989 O 1990 O 1991 O 1992 O 1993 O 1995 O 1996 O 1997 O 1998 O 1999 O 2000 O 2001 O 2002 O 2003 O 2004 O 2005 O 2006 O 2007 O 2008 O 2009 2010 O 2011 O 2012 O 2013 O 2014 O 2015 O 2016 O 2017 O 2018 O 2019 O 2020

[]When did you have your THIRD hair transplant?	
Only answer this question if the following conditions are met: LOGIC	
Please choose only one of the following:	
① 1975	
O 1976	
O 1977	
O 1978	
O 1979	
O 1980	
O 1981	
O 1982	
O 1983	
O 1984	
O 1985	
O 1986	
O 1987	
O 1988	
O 1989	
O 1990	
O 1991	
O 1992	
O 1993	
O 1994	
O 1995	
O 1996	
O 1997	
O 1998	
O 1999	
O 2000	
O 2001	
O 2003	
○ 2004	
○ 2005	
○ 2006	
○ 2007	
○ 2008	
O 2009	
O 2010	
O 2011	
O 2012	
O 2013	
O 2014	
O 2015	
O 2016	
O 2017	
O 2018	
O 2019	
O 2020	
[]When did you have your FOURTH hair transplant?	
Only answer this question if the following conditions are met:	
LOGIC	
Please choose only one of the following:	
O 1975	
O 1976	
O 1977	
O 1978	
O 1979	
○ 2002	

O 1980
O 1981
O 1982
O 1983
O 1984
O 1985
O 1986
O 1987
O 1988
O 1989
O 1990
O 1991
O 1992
O 1993
O 1994
O 1995
O 1996
O 1997
O 1998
O 1999
2000
○ 2001 ○ 2002
O 2003
O 2004
O 2005
O 2006
O 2007
O 2008
O 2009
O 2011
O 2012
O 2013
O 2014
O 2015
O 2016
○ 2017
○ 2018
O 2019
O 2020
[]When did you have your FIFTH hair transplant?
Only answer this question if the following conditions are met:
((LOGIC
Please choose only one of the following:
O 1975
O 1976
○ 1977 ○ 1978
1979
O 1980
O 1981
O 1982
$\overline{\smile}$
O 1983
○ 1983 ○ 1984
○ 1984
○ 1984○ 1985
○ 1984○ 1985○ 1986
☐ 1984☐ 1985☐ 1986☐ 1987
☐ 1984☐ 1985☐ 1986☐ 1987☐ 1988
☐ 1984☐ 1985☐ 1986☐ 1987☐ 1988☐ 1989

O 1991
O 1992
O 1993
O 1994
O 1995
O 1996
O 1997
O 1998
O 1999
O 2000
O 2001
O 2002
O 2003
O 2004
O 2005
O 2006
O 2007
O 2008
O 2009
O 2010
O 2011
O 2012
O 2013
O 2014
O 2015
O 2016
O 2017
O 2018
[]How many times did you have "Vaginal rejuvenation" (vaginoplasty) or Labiaplasty? Only answer this question if the following conditions are met: Answer was at question '194 [cosmeticsurgery]' (Have you EVER had any of the following cosmetic surgeries or procedures? (Do NOT count reconstructive surgery, such as following a motor vehicle accident, assault, cancer treatment, or birth defect.))
Please choose only one of the following:
O 1
O 2
O 3
O 4
○ 5+
[]When did you have your FIRST "Vaginal rejuvenation" (vaginoplasty) or Labiaplasty?
Only answer this question if the following conditions are met: LOGIC
Please choose only one of the following:
O 1975
O 1976
O 1977
O 1978
O 1979
O 1980
O 1981
O 1982
O 1983
O 1984
O 1985
O 1986
O 1987
O 1988
○ 1988○ 1989
O 1989

_) 1991
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0) 1993
0) 1994
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) 1997
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0) 2001
0) 2002
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) 2009
_) 2010
_) 2011
_) 2012
0) 2013
0	2014
0	2015
0	2016
0	2017
0	2018
0	2019
	O 2020
	ly answer this question if the following conditions are met:
	OGIC
LC	
L(OGIC
Plea	OGIC vase choose only one of the following:
Plea O	DGIC ase choose only one of the following:) 1975) 1976
Plea O O	OGIC ase choose only one of the following:) 1975) 1976) 1977
Pleas O O O	OGIC asse choose only one of the following:) 1975) 1976) 1977) 1978
Plea O O O	OGIC asse choose only one of the following:) 1975) 1976) 1977) 1978) 1979
Plea O O O O	OGIC asse choose only one of the following:) 1975) 1976) 1977) 1978) 1979) 1980
Plea	DGIC asse choose only one of the following:) 1975) 1976) 1977) 1978) 1979) 1980) 1981
Pleas	DGIC ase choose only one of the following:) 1975) 1976) 1977) 1978) 1979) 1980) 1981
Pless O O O O O O O O O	DGIC asse choose only one of the following:) 1975) 1976) 1977) 1978) 1979) 1980) 1981) 1982) 1983
Pless O O O O O O O O O O O O O O O O O O	DGIC ase choose only one of the following:) 1975) 1976) 1977) 1978) 1979) 1980) 1981) 1982) 1983) 1984
Pleze	DGIC ase choose only one of the following:) 1975) 1976) 1977) 1978) 1979) 1980) 1981) 1982) 1983) 1984) 1985
Pleze	DGIC ase choose only one of the following:) 1975) 1976) 1977) 1978) 1979) 1980) 1981) 1982) 1983) 1984) 1985) 1986
Pleze	DGIC asse choose only one of the following:) 1975) 1976) 1977) 1978) 1979) 1980) 1981) 1982) 1983) 1984) 1985) 1986) 1987
Please Pl	DGIC asse choose only one of the following:) 1975) 1976) 1977) 1978) 1979) 1980) 1981) 1982) 1983) 1984) 1985) 1986) 1987) 1988
Pless O O O O O O O O O O O O O O O O O O O	DGIC asse choose only one of the following:) 1975) 1976) 1978) 1978) 1980) 1980) 1981) 1982) 1983) 1984) 1985) 1986) 1987) 1988) 1988
Please Pl	DGIC asse choose only one of the following:) 1975) 1976) 1977) 1978) 1980) 1981) 1982) 1983) 1984) 1985) 1986) 1987) 1988) 1988) 1989) 1990
Plese	ase choose only one of the following:) 1975) 1976) 1977) 1978) 1979) 1980) 1981) 1982) 1983) 1984) 1985) 1986) 1987) 1988) 1989) 1999) 1999) 1999
Plese	ase choose only one of the following:) 1975) 1976) 1977) 1978) 1980) 1981) 1982) 1983) 1984) 1985) 1986) 1987) 1988) 1998) 1999) 1999) 1999
Plese	ase choose only one of the following:) 1975) 1976) 1977) 1978) 1980) 1981) 1982) 1983) 1984) 1985) 1986) 1987) 1988) 1999) 1990) 1991) 1992) 1993
Plese	ase choose only one of the following:) 1975) 1976) 1977) 1978) 1980) 1981) 1982) 1983) 1984) 1985) 1986) 1987) 1988) 1998) 1998) 1999) 1989) 1989) 1999) 1989) 1999) 1999) 1999) 1999
Plese	ase choose only one of the following:) 1975) 1976) 1977) 1978) 1980) 1981) 1982) 1983) 1984) 1985) 1986) 1987) 1988) 1999) 1990) 1991) 1992) 1993
Please Pl	ase choose only one of the following:) 1975) 1976) 1977) 1978) 1980) 1981) 1982) 1983) 1984) 1985) 1986) 1987) 1988) 1998) 1998) 1999) 1989) 1989) 1999) 1989) 1999) 1999) 1999) 1999
Please Pl	ase choose only one of the following:) 1975) 1976) 1977) 1978) 1980) 1981) 1982) 1983 1984) 1985) 1986) 1987) 1988) 1999) 1989) 1989) 1989) 1989) 1989) 1999) 1999) 1999) 1999) 1999) 1991) 1992) 1993) 1994) 1995
Plese	ase choose only one of the following: 1975
Plese	ase choose only one of the following:) 1975) 1976) 1977 1978) 1980) 1980) 1981 1 1982) 1983) 1984) 1985) 1986) 1988) 1998) 1999) 1991) 1992) 1993) 1990) 1991) 1992 1993) 1994) 1995 1996 1997 1998
Plese Plese O O O O O O O O O O O O O O O O O O	DOCIC asse choose only one of the following:) 1975) 1976) 1977) 1978) 1980) 1980) 1981) 1982) 1983) 1984) 1985 1986) 1987) 1988) 1999
Plese	ase choose only one of the following:) 1975) 1976) 1977 1978) 1980) 1980) 1981 1 1982) 1983) 1984) 1985) 1986) 1988) 1998) 1999) 1991) 1992) 1993) 1990) 1991) 1992 1993) 1994) 1995 1996 1997 1998

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O 2011	
2012	
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O 2014	
O 2015	
O 2016	
O 2017	
O 2018	
O 2019	
[]When did you have your THIRD "Vaginal rejuvenation" Labiaplasty?	(vaginoplasty) or
Only answer this question if the following conditions are met: LOGIC	
Please choose only one of the following:	
O 1975	
O 1976	O 2012
O 1977	O 2013
	O 2014
O 1978	O 2015
0 1979	2016
O 1980	O 2017
O 1981	O 2018
O 1982	O 2019
O 1983	O 2020
O 1984	
O 1985	
O 1986	
O 1987	
○ 1988	
O 1989	
○ 1990	
O 1991	
O 1992	
O 1993	
O 1994	
O 1995	
O 1996	
O 1997	
O 1998	
O 1999	
O 2000	
O 2001	
2002	
2003	
2004	
2005	
2006	
O 2007	
O 2008	
○ 2009	
O 2010	
O 2011	

[]When did you have your FOURTH "Vaginal rejuvenation" (vaginoplasty) or Labiaplasty?

Only answer this question if the following conditions are met:

LOGIC
Please choose only one of the following:
O 1976
O 1977
O 1978
O 1979
O 1980
O 1981
O 1982
O 1983
O 1984
O 1985
O 1986
O 1987
O 1988
O 1989
O 1990
O 1991
O 1992
O 1993
O 1994
O 1995
O 1996
O 1997
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O 1999
O 2000
O 2001
O 2002
O 2003
O 2004
O 2005
O 2006
O 2007
O 2008
O 2009
O 2010
O 2011
O 2012
O 2013
O 2014
O 2015
O 2016
O 2017
O 2018
O 2019
O 2020

[]When did you have your FIFTH "Vaginal rejuvenation" (vaginoplasty) or Labiaplasty?
Only answer this question if the following conditions are met: ((vagino.NAOK (/limesurvey/index.php/admin/questions/sa/view/surveyid/118238/gid/1052/qid/29703) == "5"))
Please choose only one of the following:
O 1975
0 1976
0 1977
O 1978
0 1979
O 1980
O 1981
O 1982
O 1984
0 1985
0 1986
O 1987
O 1988
O 1989
O 1990
O 1991
O 1992
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O 1994
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O 2004
O 2005
○ 2006
O 2007
○ 2008
O 2009
O 2010
O 2011
O 2012
O 2013
O 2014
O 2015
O 2016
O 2017
O 2018
O 2019
2020
[]How many times did you have laser hair removal?
Only answer this question if the following conditions are met: Answer was at question '194 [cosmeticsurgery]' (Have you EVER had any of the following cosmetic surgeries or procedures? (Do NOT count reconstructive surgery, such as following a motor vehicle accident, assault, cancer treatment, or birth defect.))
Please choose only one of the following:
O 1
0 2
O 3
0 4
0.5
O 2019

○ 6	
O 7	
○ 8	
O 9	
O 10+	
[]When did you have your FIRST laser hair removal? Only answer this question if the following conditions are met: Answer was '9' or '8' or '7' or '1' or '2' or '3' or '4' or '5' or '6' or '10+' at question '277 [laserhair]' (How many tim	es did you have laser hair removal?)
Please choose only one of the following:	
O 1975	
0 1976	
O 1978	○ 2000
O 1979	O 2001
O 1980	O 2002
O 1981	O 2003
O 1982	O 2004
O 1983	O 2005
O 1984	O 2006
O 1985	O 2007
O 1986	2008
O 1987	O 2009
O 1988	O 2010
O 1989	O 2011
O 1990	O 2012
O 1991	O 2013
O 1992	O 2014
O 1993	O 2015
O 1994	O 2016
O 1995	O 2017
O 1996	O 2018
① 1997	O 2019
O 1998	O 2020
O 1999	0 2020
[]When did you have your SECOND laser hair removal?	
Only answer this question if the following conditions are met:	
Answer was '5' or '4' or '3' or '2' at question '277 [laserhair]' (How many times did you have laser hair removal?	()
Please choose only one of the following:	
O 1975	
O 1976	
0 1977	
0 1978	
0 1979	
O 1980	
0 1981	
O 1982	
1983	
O 1984	
O 1985	
0	
1987	O 1998
O 1988	O 1999
O 1989	○ 2000
O 1990	O 2001
O 1991	O 2002
O 1992	O 2003
O 1993	O 2004
O 1994	2005
0 1995	2006
O 1996	O 2007
○ 1997 ○ 2010	2008

2009	2015
O 2010	2016
○ 2011	2017
O 2012	2018
O 2013	2019
O 2014	2020
[]When did you have your THIRD lacer hair removal?	
[]When did you have your THIRD laser hair removal?	
Only answer this question if the following conditions are met: Answer was '5' or '4' or '3' at question '277 [laserhair]' (How many times did you have laser hair removal?)	
Please choose only one of the following:	
0 1975	
0 1976	
0 1977	
0 1978	
1979	
1980	
O 1981	
O 1982	
O 1983	
O 1984	
O 1985	
O 1986	
O 1987	
○ 1988	
O 1989	
○ 1990	
O 1991	
O 1992	
O 1993	
O 1994	
0	
1996	2009
① 1997	2010
	2010
O 1998	_
O 1999	2012
○ 1999○ 2000	O 2012
1999 2000 2001	2012 2013 2014
1999 2000 2001 2002	2012 2013 2014 2015
1999 2000 2001 2002 2003	2012 2013 2014 2015 2016
1999 2000 2001 2002 2003 2004	2012 2013 2014 2015 2016 2017
1999 2000 2001 2002 2003 2004 2005	2012 2013 2014 2015 2016 2017 2018
1999 2000 2001 2002 2003 2004 2005 2006	2012 2013 2014 2015 2016 2017 2018 2019
1999 2000 2001 2002 2003 2004 2005 2006 2007	2012 2013 2014 2015 2016 2017 2018
1999 2000 2001 2002 2003 2004 2005 2006	2012 2013 2014 2015 2016 2017 2018 2019
1999 2000 2001 2002 2003 2004 2005 2006 2007	2012 2013 2014 2015 2016 2017 2018 2019
1999 2000 2001 2002 2003 2004 2005 2006 2007 2008	2012 2013 2014 2015 2016 2017 2018 2019
1999 2000 2001 2002 2002 2003 2004 2005 2006 2007 2008 [] When did you have your FOURTH laser hair removal? Only answer this question if the following conditions are met: Answer was '5' or '4' at question '277 [laserhair]' (How many times did you have laser hair removal?)	2012 2013 2014 2015 2016 2017 2018 2019
1999 2000 2001 2002 2003 2004 2005 2006 2007 2008 [] When did you have your FOURTH laser hair removal? Only answer this question if the following conditions are met:	2012 2013 2014 2015 2016 2017 2018 2019
1999 2000 2001 2002 2002 2003 2004 2005 2006 2007 2008 [] When did you have your FOURTH laser hair removal? Only answer this question if the following conditions are met: Answer was '5' or '4' at question '277 [laserhair]' (How many times did you have laser hair removal?)	2012 2013 2014 2015 2016 2017 2018 2019
1999 2000 2001 2002 2003 2004 2005 2006 2007 2008 []When did you have your FOURTH laser hair removal? Only answer this question if the following conditions are met: Answer was '5' or '4' at question '277 [laserhair]' (How many times did you have laser hair removal?) Please choose only one of the following:	2012 2013 2014 2015 2016 2017 2018 2019
1999 2000 2001 2002 2003 2004 2005 2006 2007 2008 []When did you have your FOURTH laser hair removal? Only answer this question if the following conditions are met: Answer was '5' or '4' at question '277 [laserhair]' (How many times did you have laser hair removal?) Please choose only one of the following:	2012 2013 2014 2015 2016 2017 2018 2019
1999 2000 2001 2002 2003 2004 2005 2006 2007 2008 []When did you have your FOURTH laser hair removal? Only answer this question if the following conditions are met: Answer was '5' or '4' at question '277 [laserhair]' (How many times did you have laser hair removal?) Please choose only one of the following: 1975 1976	2012 2013 2014 2015 2016 2017 2018 2019
1999 2000 2001 2002 2003 2004 2005 2006 2007 2008 [] When did you have your FOURTH laser hair removal? Only answer this question if the following conditions are met: Answer was '5' or '4' at question '277 [laserhair]' (How many times did you have laser hair removal?) Please choose only one of the following: 1975 1976 1977	2012 2013 2014 2015 2016 2017 2018 2019
1999 2000 2001 2002 2003 2004 2005 2006 2007 2008 [] When did you have your FOURTH laser hair removal? Only answer this question if the following conditions are met: Answer was '5' or '4' at question '277 [laserhair]' (How many times did you have laser hair removal?) Please choose only one of the following: 1975 1976 1977 1978	2012 2013 2014 2015 2016 2017 2018 2019
1999 2000 2001 2002 2003 2004 2005 2006 2007 2008 [] When did you have your FOURTH laser hair removal? Only answer this question if the following conditions are met: Answer was '5' or '4' at question '277 [laserhair]' (How many times did you have laser hair removal?) Please choose only one of the following: 1975 1976 1977 1978 1979	2012 2013 2014 2015 2016 2017 2018 2019
1999 2000 2001 2002 2003 2004 2005 2006 2007 2008 [] When did you have your FOURTH laser hair removal? Only answer this question if the following conditions are met: Answer was '5' or '4' at question '277 [laserhair]' (How many times did you have laser hair removal?) Please choose only one of the following: 1975 1976 1976 1977 1978 1979 1980	2012 2013 2014 2015 2016 2017 2018 2019
1999	2012 2013 2014 2015 2016 2017 2018 2019
1999	2012 2013 2014 2015 2016 2017 2018 2019
1999	2012 2013 2014 2015 2016 2017 2018 2019
1999 2000 2001 2002 2003 2004 2005 2006 2007 2008 2008 2008 2008 2008 2008 2007 2008 2009	2012 2013 2014 2015 2016 2017 2018 2019

O 1987
○ 1988
○ 1989
O 1990
O 1991
O 1992
O 1993
O 1994
O 1995
O 1996
O 1997
O 1998
O 1999
○ 2000
2001
2002
2003
2005
O 2006
○ 2007 ○ 2008
Q 2009
O 2010
O 2011
O 2012
O 2013
O 2014
O 2015
○ 2016
○ 2017
○ 2018
0.0040
2019
0 2020
 2020 []When did you have your FIFTH laser hair removal? Only answer this question if the following conditions are met:
Only answer this question if the following conditions are met: Answer was '5' at question '277 [laserhair]' (How many times did you have laser hair removal?)
O 2020 [] When did you have your FIFTH laser hair removal? Only answer this question if the following conditions are met: Answer was '5' at question '277 [laserhair]' (How many times did you have laser hair removal?) Please choose only one of the following:
 2020 [] When did you have your FIFTH laser hair removal? Only answer this question if the following conditions are met: Answer was '5' at question '277 [laserhair]' (How many times did you have laser hair removal?) Please choose only one of the following: 1975
2020 []When did you have your FIFTH laser hair removal? Only answer this question if the following conditions are met: Answer was '5' at question '277 [laserhair]' (How many times did you have laser hair removal?) Please choose only one of the following: 1975 1976
○ 2020 []When did you have your FIFTH laser hair removal? Only answer this question if the following conditions are met: Answer was '5' at question '277 [laserhair]' (How many times did you have laser hair removal?) Please choose only one of the following: ○ 1975 ○ 1976 ○ 1977
○ 2020 []When did you have your FIFTH laser hair removal? Only answer this question if the following conditions are met: Answer was '5' at question '277 [laserhair]' (How many times did you have laser hair removal?) Please choose only one of the following: ○ 1975 ○ 1976 ○ 1977 ○ 1978
2020 []When did you have your FIFTH laser hair removal? Only answer this question if the following conditions are met: Answer was '5' at question '277 [laserhair]' (How many times did you have laser hair removal?) Please choose only one of the following: 1975 1976 1977 1978 1979
2020 []When did you have your FIFTH laser hair removal? Only answer this question if the following conditions are met: Answer was '5' at question '277 [laserhair]' (How many times did you have laser hair removal?) Please choose only one of the following: 1975 1976 1977 1978 1979 1980
Only answer this question if the following conditions are met: Answer was '5' at question '277 [laserhair]' (How many times did you have laser hair removal?) Please choose only one of the following: 1975 1976 1977 1978 1979 1980 1981
Only answer this question if the following conditions are met: Answer was '5' at question '277 [laserhair]' (How many times did you have laser hair removal?) Please choose only one of the following: 1975 1976 1977 1978 1979 1980 1981 1982
Only answer this question if the following conditions are met: Answer was '5' at question '277 [laserhair]' (How many times did you have laser hair removal?) Please choose only one of the following: 1975 1976 1977 1978 1979 1980 1981 1982 1983
Only answer this question if the following conditions are met: Answer was '5' at question '277 [laserhair]' (How many times did you have laser hair removal?) Please choose only one of the following: 1975 1976 1977 1978 1979 1980 1981 1982
○ 2020 []When did you have your FIFTH laser hair removal? Only answer this question if the following conditions are met: Answer was '5' at question '277 [laserhair]' (How many times did you have laser hair removal?) Please choose only one of the following: ○ 1975 ○ 1976 ○ 1977 ○ 1978 ○ 1979 ○ 1980 ○ 1981 ○ 1982 ○ 1983 ○ 1984
Only answer this question if the following conditions are met: Answer was '5' at question '277 [laserhair]' (How many times did you have laser hair removal?) Please choose only one of the following: 1975 1976 1977 1978 1979 1980 1981 1982 1983 1984
Only answer this question if the following conditions are met: Answer was '5' at question '277 [laserhair]' (How many times did you have laser hair removal?) Please choose only one of the following: 1975 1976 1977 1978 1979 1980 1981 1982 1982 1984 1985 1986
Only answer this question if the following conditions are met: Answer was '5' at question '277 [laserhair]' (How many times did you have laser hair removal?) Please choose only one of the following: 1975 1976 1977 1978 1980 1981 1982 1983 1984 1985 1986 1987 1988 1989
Only answer this question if the following conditions are met: Answer was '5' at question '277 [laserhair]' (How many times did you have laser hair removal?) Please choose only one of the following: 1975 1976 1977 1978 1980 1981 1982 1983 1984 1985 1986 1987 1988 1989 1990
Only answer this question if the following conditions are met: Answer was '5' at question '277 [laserhair]' (How many times did you have laser hair removal?) Please choose only one of the following: 1975 1976 1977 1978 1980 1981 1982 1983 1984 1985 1986 1987 1988 1989 1990 1990
 ○ 2020 [] When did you have your FIFTH laser hair removal? Only answer this question if the following conditions are met: Answer was '5' at question '277 [laserhair]' (How many times did you have laser hair removal?) Please choose only one of the following: ○ 1975 ○ 1976 ○ 1977 ○ 1978 ○ 1979 ○ 1980 ○ 1981 ○ 1982 ○ 1983 ○ 1984 ○ 1985 ○ 1986 ○ 1987 ○ 1988 ○ 1989 ○ 1990 ○ 1991 ○ 1992
 ○ 2020 [] When did you have your FIFTH laser hair removal? Only answer this question if the following conditions are met: Answer was '5' at question '277 [laserhair]' (How many times did you have laser hair removal?) Please choose only one of the following: ○ 1975 ○ 1976 ○ 1977 ○ 1978 ○ 1979 ○ 1980 ○ 1981 ○ 1982 ○ 1983 ○ 1984 ○ 1985 ○ 1986 ○ 1987 ○ 1988 ○ 1999 ○ 1991 ○ 1992 ○ 1993
 ○ 2020 [] When did you have your FIFTH laser hair removal? Only answer this question if the following conditions are met: Answer was '5' at question '277 [laserhair]' (How many times did you have laser hair removal?) Please choose only one of the following: ○ 1975 ○ 1976 ○ 1977 ○ 1978 ○ 1979 ○ 1980 ○ 1981 ○ 1982 ○ 1983 ○ 1984 ○ 1985 ○ 1986 ○ 1987 ○ 1988 ○ 1990 ○ 1991 ○ 1992 ○ 1993 ○ 1994
 ○ 2020 [] When did you have your FIFTH laser hair removal? Only answer this question if the following conditions are met: Answer was '5' at question '277 [laserhair]' (How many times did you have laser hair removal?) Please choose only one of the following: ○ 1975 ○ 1976 ○ 1977 ○ 1978 ○ 1979 ○ 1980 ○ 1981 ○ 1982 ○ 1983 ○ 1984 ○ 1985 ○ 1986 ○ 1987 ○ 1988 ○ 1989 ○ 1990 ○ 1991 ○ 1992 ○ 1993 ○ 1994 ○ 1995
 ○ 2020 [] When did you have your FIFTH laser hair removal? Only answer this question if the following conditions are met: Answer was '5' at question '277 [laserhair]' (How many times did you have laser hair removal?) Please choose only one of the following: ○ 1975 ○ 1976 ○ 1977 ○ 1978 ○ 1979 ○ 1980 ○ 1981 ○ 1982 ○ 1983 ○ 1984 ○ 1985 ○ 1986 ○ 1987 ○ 1988 ○ 1989 ○ 1990 ○ 1991 ○ 1992 ○ 1993 ○ 1994 ○ 1995 ○ 1996
 ○ 2020 [] When did you have your FIFTH laser hair removal? Only answer this question if the following conditions are met: Answer was '5' at question '277 [laserhair]' (How many times did you have laser hair removal?) Please choose only one of the following: ○ 1975 ○ 1976 ○ 1977 ○ 1978 ○ 1979 ○ 1980 ○ 1981 ○ 1982 ○ 1983 ○ 1984 ○ 1985 ○ 1986 ○ 1987 ○ 1988 ○ 1989 ○ 1990 ○ 1991 ○ 1992 ○ 1993 ○ 1994 ○ 1995

0	1999
0	2000
0	2001
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0	2003
Ō	2004
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	2007
_	2008
_	2009
Õ	2012
0	2011
0	2012
_	2014
_	2015
_	2016
_	2017
_	2018
_	2019
_	2020
_	
ΓJ	What year did you have your MOST RECENT laser hair removal?
	y answer this question if the following conditions are met:
	wer was '10+' or '9' or '8' or '7' or '6' at question '277 [laserhair]' (How many times did you have laser hair removal?)
	ase choose only one of the following:
0	1985
0	1986
0	1987
0	1988
0	1989
_	
	1001
0	1551
_	
Ō	
000	1992 1993 1994
0000	1992 1993 1994 1995
00000	1992 1993 1994 1995 1996
000000	1992 1993 1994 1995 1996
0000000	1992 1993 1994 1995 1996 1997
00000000	1992 1993 1994 1995 1996 1997 1998
000000000	1992 1993 1994 1995 1996 1997 1998 1999
0000000000	1992 1993 1994 1995 1996 1997 1998 1999 2000
00000000000	1992 1993 1994 1995 1996 1997 1998 1999 2000 2001
0000000000000	1992 1993 1994 1995 1996 1997 1998 1999 2000 2001 2002
00000000000000	1992 1993 1994 1995 1996 1997 1998 1999 2000 2001 2002 2003 2004
00000000000000	1992 1993 1994 1995 1996 1997 1998 1999 2000 2001 2002 2003 2004 2005
000000000000000	1992 1993 1994 1995 1996 1997 1998 1999 2000 2001 2002 2003 2004 2005 2006
00000000000000000	1992 1993 1994 1995 1996 1997 1998 1999 2000 2001 2002 2003 2004 2005 2006 2007
000000000000000000	1992 1993 1994 1995 1996 1997 1998 1999 2000 2001 2002 2003 2004 2005 2006 2007 2008
0000000000000000000	1992 1993 1994 1995 1996 1997 1998 1999 2000 2001 2002 2003 2004 2005 2006 2007 2008
00000000000000000000	1992 1993 1994 1995 1996 1997 1998 1999 2000 2001 2001 2002 2003 2004 2005 2006 2007 2008 2009 2010
000000000000000000000	1992 1993 1994 1995 1996 1997 1998 1999 2000 2001 2002 2003 2004 2005 2006 2007 2008 2009 2010 2011
00000000000000000000000	1992 1993 1994 1995 1996 1997 1998 1999 2000 2001 2001 2002 2003 2004 2005 2006 2007 2008 2009 2010 2011 2012
00000000000000000000000	1992 1993 1994 1995 1996 1997 1998 1999 2000 2001 2002 2003 2004 2005 2006 2007 2008 2009 2010 2011 2012 2013
0000000000000000000000000	1992 1993 1994 1995 1996 1997 1998 1999 2000 2001 2001 2002 2003 2004 2005 2006 2007 2008 2009 2010 2011 2012 2013 2014
00000000000000000000000000	1992 1993 1994 1995 1996 1997 1998 1999 2000 2001 2002 2003 2004 2005 2006 2007 2008 2009 2010 2011 2012 2013 2014 2015
000000000000000000000000000	1992 1993 1994 1995 1996 1997 1998 1999 2000 2001 2001 2002 2003 2004 2005 2006 2007 2008 2009 2010 2011 2012 2013 2014 2015 2016
000000000000000000000000000000000000000	1992 1993 1994 1995 1996 1997 1998 1999 2000 2001 2001 2002 2003 2004 2005 2006 2007 2008 2009 2010 2011 2012 2013 2014 2015 2016 2017
000000000000000000000000000000000000000	1992 1993 1994 1995 1996 1997 1998 1999 2000 2001 2001 2002 2003 2004 2005 2006 2007 2008 2009 2010 2011 2012 2013 2014 2015 2016 2017 2018
000000000000000000000000000000000000000	1992 1993 1994 1995 1996 1997 1998 1999 2000 2001 2001 2002 2003 2004 2005 2006 2007 2008 2009 2010 2011 2012 2013 2014 2015 2016 2017

[]How often do you have laser hair removal?
Only answer this question if the following conditions are met: Answer was '6' or '9' or '8' or '7' or '10+' at question '277 [laserhair]' (How many times did you have laser hair removal?)
Please choose only one of the following:
O Less than once per year
Once per year
○ Twice per year
Three or more times per year
[]How many times did you have Laser skin resurfacing or Dermabrasion?
Only answer this question if the following conditions are met: Answer was at question '194 [cosmeticsurgery]' (Have you EVER had any of the following cosmetic surgeries or procedures? (Do NOT count reconstructive surgery, such as following a motor vehicle accident, assault, cancer treatment, or birth defect.))
Please choose only one of the following:
O 1
O 2
O 3
O 4
O 5+
[]When did you have your FIRST Laser skin resurfacing or Dermabrasion?
Only answer this question if the following conditions are met:
LOGIC
Please choose only one of the following:
O 1975
O 1976
O 1977
O 1978
O 1979
O 1980
O 1981
O 1982
O 1983
O 1984
O 1985
O 1986
O 1987
O 1988
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O 1990
○ 1991○ 1992
O 1993
O 1994
O 1995
O 1996
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O 1999
○ 2000
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Q 2006
O 2007
O 2008
○ 2009 ○ 2010
O 2010

O 2011	
O 2012	
2013	
2014	
2015	
2016	
O 2017	
2018	
2019	
O 2020	
[]When did you have your SECOND Las	ser skin resurfacing or Dermahrasion?
Only answer this question if the following conditions are met:	ser skin resurracing or bermabiasion.
LOGIC	
Please choose only one of the following:	
O 1975	O 1999
O 1976	O 2000
O 1977	○ 2001
O 1978	O 2002
O 1979	O 2003
O 1980	O 2004
O 1981	O 2005
O 1982	2006
O 1983	O 2007
O 1984	○ 2008
O 1985	O 2009
O 1986	2010
O 1987	O 2011
O 1988	O 2012
O 1989	2013
O 1990	O 2014
O 1991	2015
O 1992	○ 2016
O 1993	O 2017
O 1994	2018
O 1995	2019
O 1996	O 2020
O 1997	
O 1998	
[]When did you have your THIRD Laser	skin resurfacing or Dermabrasion?
Only answer this question if the following conditions are met:	5
LOGIC	
Please choose only one of the following:	
O 1975	
○ 1977	
0 1978	O 1992
O 1979	O 1993
O 1980	O 1994
O 1981	O 1995
O 1982	O 1996
O 1983	O 1997
O 1984	O 1998
O 1985	O 1999
O 1986	O 2000
O 1987	O 2001
O 1988	O 2002
1989	O 2003
1990	Q 2004
1991	Q 2005
2004	Ú 2003
O ====	

O 2006	O 2014
O 2007	O 2015
2008	O 2016
○ 2009	O 2017
O 2010	2018
O 2011	O 2019
O 2012	O 2020
O 2013	
	D
[]When did you have your FOURTH Laser skin resurfacing	or Dermadrasion?
Only answer this question if the following conditions are met: ((laserskin.NAOK (/limesurvey/index.php/admin/questions/sa/view/surveyid/118238/gid/1052/qid/2970	E) "5" OP locarckin NAOK
(/limesurvey/index.php/admin/questions/sa/view/surveyid/118238/gid/1052/qid/29705) == "4"))	5) 5 OR Idserskiii.NAOK
Please choose only one of the following:	
0 1975	
0 1976	
0 1977	
0 1978	
0 1979	
O 1980	
0 1981	
1982	
O 1983	
O 1984	0
O 1985	2004
O 1986	2005
O 1987	2006
O 1988	○ 2007
O 1989	2008
O 1990	2009
O 1991	O 2010
O 1992	O 2011
O 1993	O 2012
O 1994	O 2013
O 1995	O 2014
O 1996	O 2015
O 1997	O 2016
O 1998	O 2017
O 1999	O 2018
O 2000	O 2019
O 2001	O 2020
O 2002	
O 2003	
[]When did you have your FIFTH Laser skin resurfacing o	r Dermabrasion?
Only answer this question if the following conditions are met:	
((laserskin.NAOK (/limesurvey/index.php/admin/questions/sa/view/surveyid/118238/gid/1052/qid/2970	5) == "5"))
Please choose only one of the following:	
O 1985	
O 1986	
O 1987	
O 1988	
O 1989	
O 1990	
O 1991	
O 1992	
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O 2004	
O 2005	
O 2006	
O 2007	
○ 2008	
O 2009	
O 2010	
O 2011	
O 2012	
O 2013	
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O 2017	
O 2018	
O 2019	
O 2020	
[]How many times did you have laser treatment of leg veins or Sclerotherapy? Only answer this question if the following conditions are met: Answer was at question '194 [cosmeticsurgery]' (Have you EVER had any of the following cosmetic surgeries or procedures? (Do NOT count reconstructi surgery, such as following a motor vehicle accident, assault, cancer treatment, or birth defect.)	√e
Please choose only one of the following:	
O 1	
O 2	
O 3	
O 4	
O 5+	
[]When did you have your FIRST laser treatment of leg veins or Sclerotherapy?	
Only answer this question if the following conditions are met: LOGIC	
Please choose only one of the following:	
O 1985	
O 1986	
O 1987	
O 1988	
O 1989	
O 1990	
O 1991	
O 1992	
O 1993	
O 1994	
O 1995	
O 1996	
O 1997	
O 1998	
O 1999	
O 2000	
O 2001	
O 2002	
○ 2002○ 2003	
○ 2002○ 2003○ 2004	
○ 2002○ 2003○ 2004○ 2005	
○ 2002○ 2003○ 2004○ 2005○ 2006	
○ 2002○ 2003○ 2004○ 2005	

	O 2015
O 2009	
O 2010	O 2016
O 2011	O 2017
O 2012	O 2018
O 2013	O 2019
	O 2020
O 2014	
[]When did you have your SECOND	
laser treatment of leg veins or Sclerotherapy?	
Only answer this question if the following conditions are met:	
LOGIC	
Please choose only one of the following:	
Please choose only one of the following.	
O 1985	O 2004
O 1986	O 2005
O 1987	_
O 1988	O 2006
O 1989	2007
	O 2008
O 1990	O 2009
O 1991	O 2010
O 1992	O 2011
O 1993	_
O 1994	O 2012
① 1995	2013
	O 2014
O 1996	O 2015
O 1997	2016
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O 1999	O 2018
O 2000	_
O 2001	2019
	O 2020
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O 2003	
laser treatment of leg veins or Sclerotherapy? Only answer this question if the following conditions are met: LOGIC	
Please choose only one of the following:	
① 1985	
	O 2004
O 1986	O 2005
O 1987	2006
O 1988	O 2007
O 1989	O 2008
O 1990	
O 1991	2009
	2009
1 1 1 1 2 2 7	O 2010
○ 1992 ○ 1993	
O 1993	O 2010
○ 1993○ 1994	O 2010 O 2011
○ 1993○ 1994	2010 2011 2012
○ 1993○ 1994	20102011201220132014
☐ 1993☐ 1994☐ 1995	2010 2011 2012 2013 2014 2015
19931994199519961997	2010 2011 2012 2013 2014 2015 2016
199319941995199619971998	2010 2011 2012 2013 2014 2015 2016 2017
 1993 1994 1995 1996 1997 1998 1999 	2010 2011 2012 2013 2014 2015 2016
 ☐ 1993 ☐ 1994 ☐ 1995 ☐ 1996 ☐ 1997 ☐ 1998 ☐ 1999 ☐ 2000 	2010 2011 2012 2013 2014 2015 2016 2017
 ☐ 1993 ☐ 1994 ☐ 1995 ☐ 1996 ☐ 1997 ☐ 1998 ☐ 1999 ☐ 2000 ☐ 2001 	2010 2011 2012 2013 2014 2015 2016 2017
 ☐ 1993 ☐ 1994 ☐ 1995 ☐ 1996 ☐ 1997 ☐ 1998 ☐ 1999 ☐ 2000 ☐ 2001 	2010 2011 2012 2013 2014 2015 2016 2017 2018 2019
 ☐ 1993 ☐ 1994 ☐ 1995 ☐ 1996 ☐ 1997 ☐ 1998 ☐ 1999 ☐ 2000 ☐ 2001 	2010 2011 2012 2013 2014 2015 2016 2017 2018 2019
 1993 1994 1995 1996 1997 1998 1999 2000 2001 2002 2003 [] When did you have your FOURTH 	2010 2011 2012 2013 2014 2015 2016 2017 2018 2019
 1993 1994 1995 1996 1997 1998 1999 2000 2001 2002 2003 [] When did you have your FOURTH laser treatment of leg veins or Sclerotherapy? 	2010 2011 2012 2013 2014 2015 2016 2017 2018 2019
 1993 1994 1995 1996 1997 1998 1999 2000 2001 2002 2003 [] When did you have your FOURTH laser treatment of leg veins or Sclerotherapy? Only answer this question if the following conditions are met: 	2010 2011 2012 2013 2014 2015 2016 2017 2018 2019
 1993 1994 1995 1996 1997 1998 1999 2000 2001 2002 2003 [] When did you have your FOURTH laser treatment of leg veins or Sclerotherapy? Only answer this question if the following conditions are met: LOGIC 	2010 2011 2012 2013 2014 2015 2016 2017 2018 2019
 1993 1994 1995 1996 1997 1998 1999 2000 2001 2002 2003 [] When did you have your FOURTH laser treatment of leg veins or Sclerotherapy? Only answer this question if the following conditions are met: LOGIC Please choose only one of the following:	2010 2011 2012 2013 2014 2015 2016 2017 2018 2019
1993 1994 1995 1996 1997 1998 1999 2000 2001 2002 2003 [] When did you have your FOURTH laser treatment of leg veins or Sclerotherapy? Only answer this question if the following conditions are met: LOGIC Please choose only one of the following: 1985	2010 2011 2012 2013 2014 2015 2016 2017 2018 2019
 1993 1994 1995 1996 1997 1998 1999 2000 2001 2002 2003 [] When did you have your FOURTH laser treatment of leg veins or Sclerotherapy? Only answer this question if the following conditions are met: LOGIC Please choose only one of the following:	2010 2011 2012 2013 2014 2015 2016 2017 2018 2019

1988	
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O 1992	
O 1993	
0 1995	
O 1996	
0 1997	_
O 1998	2010
O 1999	2011
O 2000	2012
O 2001	2013
O 2002	2014
O 2003	2015
O 2004	2016
O 2005	O 2017
○ 2006	2018
○ 2007	2019
○ 2008	2020
O 2009	
[]When did you have your FIFTH laser treatment of leg veins or Sclerotherapy? Only answer this question if the following conditions are met:	
((legveins.NAOK (/limesurvey/index.php/admin/questions/sa/view/surveyid/118238/gid/1052/qid/29708	6) == "5"))
Please choose only one of the following:	
O 1986	
0 1987	
O 1988	
O 1989	
O 1990	
0 1991	
O 1992	
O 1993	
O 1994	
O 1995	
O 1996	
O 1997	
<u>1998</u>	
<u>1999</u>	
O 2000	
O 2001	
O 2002	
O 2003	
○ 2004	
O 2005	
○ 2006	
O 2007	
O 2008	
O 2009	
○ 2010	
O 2011	
O 2012	
O 2013	
O 2014	
O 2016	
O 2017	
O 2018	
O 2019	
O 2020	
[]How many times did you have ear surgery (otoplasty)?	
- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1	

Please choose only one of the following:		
O 1		
O 2		
O 3		
O 4		
O 5+		
	to alock () 2	
[]When did you have your FIRST ear surgery (c	itopiasty)?	
Only answer this question if the following conditions are met:		
LOGIC		
Please choose only one of the following:		
O 1985	O 2004	
O 1986	O 2005	
O 1987	O 2006	
O 1988	O 2007	
O 1989	O 2008	
O 1990	O 2009	
O 1991	O 2010	
O 1992	O 2011	
O 1993	O 2012	
O 1994	O 2013	
O 1995	O 2014	
O 1996	O 2015	
O 1997	O 2016	
O 1998	O 2017	
O 1999	O 2018	
O 2000	O 2019	
2001	O 2020	
2002		
O 2003		
[]When did you have your SECOND ear surgery	(otoplasty)?	
Only answer this question if the following conditions are met:		
LOGIC		
Please choose only one of the following:		
○ 1985	_	
	2003	
	2003 2004	
O 1986	O 2004	
○ 1986○ 1987	○ 2004 ○ 2005	
☐ 1986☐ 1987☐ 1988	2004 2005 2006	
☐ 1986☐ 1987☐ 1988☐ 1989	2004 2005 2006 2007	
☐ 1986☐ 1987☐ 1988☐ 1989☐ 1990	2004 2005 2006 2007	
☐ 1986☐ 1987☐ 1988☐ 1989☐ 1990☐ 1991	2004 2005 2006 2007	
 □ 1986 □ 1987 □ 1988 □ 1989 □ 1990 □ 1991 □ 1992 	2004 2005 2006 2007 2008	
1986 1987 1988 1989 1990 1991 1992 1993	2004 2005 2006 2007 2008 2009 2010	
1986 1987 1988 1989 1990 1991 1992 1993 1994	2004 2005 2006 2007 2008 2009 2010 2011	
1986 1987 1988 1989 1990 1991 1992 1993 1994	 ○ 2004 ○ 2005 ○ 2006 ○ 2007 ○ 2008 ○ 2009 ○ 2010 ○ 2011 ○ 2012 	
1986 1987 1988 1989 1990 1991 1992 1993 1994 1995	2004 2005 2006 2007 2008 2009 2010 2011 2012	
1986 1987 1988 1989 1990 1991 1992 1993 1994 1995 1996	2004 2005 2006 2007 2008 2009 2010 2011 2012 2013 2014	
 □ 1986 □ 1987 □ 1988 □ 1989 □ 1990 □ 1991 □ 1992 □ 1993 □ 1994 □ 1995 □ 1996 □ 1997 □ 1998 	2004 2005 2006 2007 2008 2009 2010 2011 2012 2013 2014 2015	
 □ 1986 □ 1987 □ 1988 □ 1990 □ 1991 □ 1992 □ 1993 □ 1994 □ 1995 □ 1996 □ 1997 □ 1998 □ 1999 	2004 2005 2006 2007 2008 2009 2010 2011 2012 2013 2014 2015 2016	
 □ 1986 □ 1987 □ 1988 □ 1990 □ 1991 □ 1992 □ 1993 □ 1994 □ 1995 □ 1996 □ 1997 □ 1998 □ 1999 □ 2000 	 ○ 2004 ○ 2005 ○ 2006 ○ 2007 ○ 2008 ○ 2009 ○ 2010 ○ 2011 ○ 2012 ○ 2013 ○ 2014 ○ 2015 ○ 2016 ○ 2017 	
 □ 1986 □ 1987 □ 1988 □ 1990 □ 1991 □ 1992 □ 1993 □ 1994 □ 1995 □ 1996 □ 1997 □ 1998 □ 1999 □ 2000 □ 2001 	2004 2005 2006 2007 2008 2009 2010 2011 2012 2013 2014 2015 2016 2017	
 □ 1986 □ 1987 □ 1988 □ 1990 □ 1991 □ 1992 □ 1993 □ 1994 □ 1995 □ 1996 □ 1997 □ 1998 □ 1999 □ 2000 □ 2001 □ 2002 [] When did you have your THIRD 	2004 2005 2006 2006 2007 2008 2009 2010 2011 2012 2013 2014 2015 2016 2016 2017 2018	
 □ 1986 □ 1987 □ 1988 □ 1990 □ 1991 □ 1992 □ 1993 □ 1994 □ 1995 □ 1996 □ 1997 □ 1998 □ 1999 □ 2000 □ 2001 □ 2002 	2004 2005 2006 2006 2007 2008 2009 2010 2011 2012 2013 2014 2015 2016 2016 2017 2018	
 □ 1986 □ 1987 □ 1988 □ 1990 □ 1991 □ 1992 □ 1993 □ 1994 □ 1995 □ 1996 □ 1997 □ 1998 □ 1999 □ 2000 □ 2001 □ 2002 □ When did you have your THIRD 	2004 2005 2006 2006 2007 2008 2009 2010 2011 2012 2013 2014 2015 2016 2016 2017 2018	
 □ 1986 □ 1988 □ 1989 □ 1990 □ 1991 □ 1992 □ 1993 □ 1994 □ 1995 □ 1996 □ 1997 □ 1998 □ 1999 □ 2000 □ 2001 □ 2002 [] When did you have your THIRD ear surgery (otoplasty)? Only answer this question if the following conditions are met: 	2004 2005 2006 2006 2007 2008 2009 2010 2011 2012 2013 2014 2015 2016 2016 2017 2018	
 □ 1986 □ 1988 □ 1989 □ 1990 □ 1991 □ 1992 □ 1993 □ 1994 □ 1995 □ 1996 □ 1997 □ 1998 □ 1999 □ 2000 □ 2001 □ 2002 []When did you have your THIRD ear surgery (otoplasty)? Only answer this question if the following conditions are met: LOGIC Please choose only one of the following: 	2004 2005 2006 2006 2007 2008 2009 2010 2011 2012 2013 2014 2015 2016 2016 2017 2018	
 □ 1986 □ 1987 □ 1988 □ 1990 □ 1991 □ 1992 □ 1993 □ 1994 □ 1995 □ 1996 □ 1997 □ 1998 □ 1999 □ 2000 □ 2001 □ 2002 [] When did you have your THIRD ear surgery (otoplasty)? Only answer this question if the following conditions are met: LOGIC 	2004 2005 2006 2006 2007 2008 2009 2010 2011 2012 2013 2014 2015 2016 2016 2017 2018	
 □ 1986 □ 1987 □ 1988 □ 1990 □ 1991 □ 1992 □ 1993 □ 1994 □ 1995 □ 1996 □ 1997 □ 1998 □ 1999 □ 2000 □ 2001 □ 2002 [] When did you have your THIRD ear surgery (otoplasty)? Only answer this question if the following conditions are met: LOGIC Please choose only one of the following: □ 1985 	2004 2005 2006 2006 2007 2008 2009 2010 2011 2012 2013 2014 2015 2016 2016 2017 2018	
 □ 1986 □ 1987 □ 1988 □ 1990 □ 1991 □ 1992 □ 1993 □ 1994 □ 1995 □ 1996 □ 1997 □ 1998 □ 1999 □ 2000 □ 2001 □ 2002 [] When did you have your THIRD ear surgery (otoplasty)? Only answer this question if the following conditions are met: LOGIC Please choose only one of the following: □ 1985 □ 1986 	2004 2005 2006 2006 2007 2008 2009 2010 2011 2012 2013 2014 2015 2016 2016 2017 2018	

O 1990

 □ 1991 □ 1993 □ 1994 □ 1995 □ 1997 □ 1998 □ 1999 □ 2000 □ 2001 □ 2002 □ 2003 □ 2004 □ 2005 □ 2006 □ 2008 □ 2008 	 ○ 2010 ○ 2011 ○ 2012 ○ 2013 ○ 2014 ○ 2015 ○ 2016 ○ 2017 ○ 2018 ○ 2019 ○ 2020
© 2009 []When did you have your FOURTH ear surgery (otoplasty)?	
Only answer this question if the following conditions are met:	
LOGIC	
Please choose only one of the following:	
O 1985	
O 1986	
○ 1987 ○ 1988	
O 1989	
O 1990	
O 1991	
O 1992	
O 1993	
O 1994	
○ 1995 ○ 1996	
O 1997	
O 1998	
O 1999	
○ 2000	
O 2001	
O 2002	
○ 2003 ○ 2004	
O 2005	
○ 2006	
O 2007	
O 2008	
○ 2009 ○ 2010	
O 2011	
O 2012	
O 2013	
2015	
O 2016	
○ 2017 ○ 2018	
O 2019	
O 2020	
[]When did you have your FIFTH ear surgery (otoplasty)?	

Only answer this question if the following conditions are met:	
Please choose only one of the following:	
1985	○ 2004
O 1986	O 2005
O 1987	O 2006
1988	Q 2007
1989	O 2008
1990	2009
1991	O 2010
1992	O 2011
1993	O 2012
1994	○ 2012 ○ 2013
1995	Q 2014
1996	O 2015
O 1997	2016
○ 1999	O 2017
2000	O 2018
2001	O 2019
2002	○ 2020
2003	
[]How many times did you have	
penile enlargement surgery?	
Only answer this question if the following conditions are met:	
Answer was at question '194 [cosmeticsurgery]' (Have you EVER h surgery, such as following a motor vehicle accident, assault, cance	ad any of the following cosmetic surgeries or procedures? (Do NOT count reconstructive r treatment, or birth defect.)
	a southern, or small delection, y
Please choose only one of the following:	
O 1	
O 2	
O 3	
O 4	
O 5+	
[]When did you have your FIRCT	
[]When did you have your FIRST penile enlargement surgery?	
Only answer this question if the following conditions are met:	
LOGIC	
Please choose only one of the following:	
1985	
1986	
1987	
1988	
O 1989	
1990	
1991	
1992	
1993	
1994	
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) 1997	
J 1001	
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1998 1999	
1998 1999 2000	
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1998 1999 2000 2001 2002 2003 2004 2005	
1998 1999 2000 2001 2002 2003 2004 2005 2006	
 1998 1999 2000 2001 2002 2003 2004 2005 	

O 2007	
O 2008	
O 2009	
O 2010	
O 2011	
2012	
O 2013	
O 2014	
O 2015	
O 2016	
O 2017	
O 2018	
O 2019	
O 2020	
[]When did you have your SECOND penile enlargement surgery?	
Only answer this question if the following conditions are met:	
LOGIC	
Please choose only one of the following:	
O 1985	
O 1986	
O 1987	
O 1988	
O 1989	
O 1990	
O 1991	
O 1992	
O 1994	O 2008
O 1995	O 2009
O 1996	O 2010
O 1997	O 2011
O 1998	O 2012
O 1999	
-	O 2013
2000	2014
2001	2015
2002	2016
2003	2017
○ 2004	O 2018
○ 2005	O 2019
○ 2006	O 2020
○ 2007	
[]When did you have your THIRD	
penile enlargement surgery?	
Only answer this question if the following conditions are met:	
LOGIC	
Please choose only one of the following:	
O 1975	
O 1976	
O 1977	
O 1978	
O 1979	
O 1980	
O 1981	
O 1982	
O 1983	
① 1984	
O 1985	
① 1986	
O 1987	
O 1996	

O 1989	
O 1990	
0 1991	
O 1992	
O 1993	
O 1994	
O 1995	
O 1996	
O 1997	
O 1998	
O 1999	
O 2000	0.0044
O 2001	O 2011
O 2002	O 2012
O 2003	O 2013
○ 2004	O 2014
○ 2005	O 2015
○ 2006	O 2016
O 2007	O 2017
O 2008	2018
O 2009	2019
O 2010	O 2020
[]When did you have your FOURTH	
Penile enlargement surgery?	
Only answer this question if the following conditions are met:	
LOGIC	
LOGIC	
Please choose only one of the following:	
0 1975	
O 1976	
O 1977	
O 1978	
O 1979	
O 1980	
O 1981	
O 1982	
O 1983	
O 1984	
O 1985	
O 1986	
O 1987	
O 1988	
O 1989	
O 1990	
O 1991	
O 1992	
O 1993	
O 1994	
O 1995	
1996	
○ 1996 ○ 1997	
O 1997	
○ 1997○ 1998	
○ 1997○ 1998○ 1999	
○ 1997○ 1998○ 1999○ 2000	
19971998199920002001	
199719981999200020012002	
○ 1997○ 1998○ 1999○ 2000○ 2001○ 2002○ 2003	
199719981999200020012002	
○ 1997○ 1998○ 1999○ 2000○ 2001○ 2002○ 2003○ 2004	
 1997 1998 1999 2000 2001 2002 2003 2004 2005 	
 1997 1998 1999 2000 2001 2002 2003 2004 2005 2006 	
 1997 1998 1999 2000 2001 2002 2003 2004 2005 2006 2007 	
 1997 1998 1999 2000 2001 2002 2003 2004 2005 2006 2007 2009 	
 1997 1998 1999 2000 2001 2002 2003 2004 2005 2006 2007 2009 2010 2010<!--</td--><td></td>	
 1997 1998 1999 2000 2001 2002 2003 2004 2005 2006 2007 2009 2898 2011 	
 1997 1998 1999 2000 2001 2002 2003 2004 2005 2006 2007 2009 2010 2010<!--</td--><td></td>	

O 2014	
0 2015	
0 2016	
0 2017	
2018	
2019	
O 2020	
[]When did you have your FIFTH penile enlarge	gement surgery?
Only answer this question if the following conditions are met:	
LOGIC	
Please choose only one of the following:	
○ 1985	
① 1986	O 2004
1987	2005
O 1988	2006
○ 1989	O 2007
O 1990	O 2008
O 1991	○ 2009 ○ 2010
O 1992	O 2011
O 1993	O 2012
○ 1994	O 2013
O 1995	2014
○ 1996	O 2015
O 1997	O 2016
O 1998	O 2017
O 1999	O 2018
O 2000	O 2019
0 2001	O 2020
2002	
2003	
Answer was at question '194 [cosmeticsurgery]' (Have you EVER had any of the folio surgery, such as following a motor vehicle accident, assault, cancer treatment, or bir Please write your answer here:(write in)	
[] If you have a comment on this section, pleas	se write it here. You will have space later
for additional comments. Please write your answer here:	
Hearing	
[] In the PAST 12 MONTHS, have you had ringi	ng, roaring, or buzzing in your ears or
head? Please choose only one of the following:	
○ Never	
C Less than once/week	
About once/week	
O Several times/week	
Almost every day	
C Every day	
On the days you hear the sound, how long d	loes it last?
Only answer this question if the following conditions are met:	
Please choose only one of the following:	
A few seconds	
Less than 5 minutes	
5 minutes to an hour	
O Several hours	
All the time	
[]Does the sound affect your ability to do the	e followina?
La - 1 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2	- · - · · · · · · · · · · · · · · · · ·

Only answer this question if the following conditions are met:

LOGIC
Please choose all that apply:
☐ Sleep ☐ Work
Perform other activities
Concentrate
None of these
[] Which best describes your hearing?
Please choose only one of the following:
Cood Excellent
A little hearing trouble
Moderate hearing trouble
A lot of hearing trouble
O Deaf
[]If your hearing is not as good as it used to be, at what age did you first notice a change?
Please choose only one of the following:
○ Hearing problem since birth ○ < 12 years old
① 12-17 years
① 18-22 years
23-28 years
② 29-34 years ③ 35 or older
Hearing has not changed
O
Blood Pressure
[] What is your current usual blood pressure? (most recent/within 2 years)
If you are using blood pressure lowering medication, please provide your current
pressure on medication.
Please choose all that apply and provide a comment: What is your systolic blood pressure reading? (write in)
What is your diastolic blood pressure reading? (write in)
Don't know
Are you currently using blood pressure lowering medication?
Please choose only one of the following:
() Yes
○ No
[]What was your most recent blood pressure prior to using medication?
Only answer this question if the following conditions are met:
Answer was 'Yes' at question '317 [q2c]' (Are you currently using blood pressure lowering medication?)
Please choose all that apply and provide a comment: What is your systolic blood pressure reading?(write in)
What is your diastolic blood pressure reading? (write in)
Don't know
If you have a comment on this section, please write it here. You will have space later for additional comments.
Please write your answer here: (write in)

[] The Growing Up Today Study is in a position to be a leader in the study of how gut bacteria (aka the microbiome) influence human disease.
If we send you a convenient collection kit, would you be willing to provide a sample of your saliva and of your stool?
For more details, please read the blue text below.
Please choose only one of the following: Yes, definitely Yes, possibly No
In the question above, we ask you to participate in a ground-breaking new sub-study to examine the role that gut bacteria (aka the microbiome) play in affecting human health. To make this important research possible, we are asking everyone to help us by providing a sample of their saliva and their stool.
Scientists are just beginning to examine how the human microbiome works. Humans and microbes depend on one another – our bodies provide microbes with resources, and the microbes provide functions necessary for our health. It is crucial to learn what types of microbes live in a healthy human, what they are doing, and how they can influence the development of disease. By collecting saliva and stool samples from tens of thousands of people like you, we can begin to describe what makes up a healthy microbiome and start to define when it may be unhealthy.
The collection process is surprisingly easy, hygienic, and not particularly gross. You will be able to provide a sample at a time that is convenient for you. If you agree, we will send you a consent form and detailed instructions with all the supplies you will need. The samples can be returned to us by standard US mail, in a provided postage-paid shipping box.
[]Would you be interested in providing a semen sample by mail for which you would receive at least \$50?
Please choose only one of the following:
○ Yes
○ No
[]Would you also be willing to provide any of the following?
Please choose all that apply:
Swabbing inside my mouth to obtain DNA.
A urine sample to measure various biomarkers.
Residential History
We are interested in studying environmental and neighborhood exposures around places you have lived throughout your life.
First, we will ask you to provide information on the address where you lived when you were born. Please provide as much information as you remember. The more accurate the address information, the more accurately we will be able to assess the impact of environmental and neighborhood exposures on your health.
[]Address at BIRTH (Please provide as much as you can remember.) Please write your answer(s) here:
Street Address
Street Address(write in) City(write in) State/Province(write in) Postal Code(write in) Country(write in)

Sample Collection

[]Year moved into current address
Please choose only one of the following:
O 2019
O 2018
O 2017
O 2016
O 2015
O 2014
O 2013
O 2012
O 2011
O 2010
O 2009
Q 2008
O 2007
○ 2006 ○ 2005
O 2004
O 2003
O 2002
O 2001
O 2000
O 1999
O 1998
O 1997
O 1996
O 1995
O 1994
O 1993
O 1992
O 1991
O 1990
O 1989
○ 1988 ○ 1987
○ 1987 ○ 1986
O 1985
O 1984
O 1983
O 1982
O 1981
O 1980
O 1979
Have you lived at least 6 months at any other address prior to your current home?
Please choose only one of the following:
○ Yes
○ No
Previous Address 1
[] Please list the previous address where you lived for at least 6 months.
Please provide as much information as you can.
If you can't remember the street address, please provide an intersection, college/university name, etc.
If you lived at more than one place at the same time, list the address where you stayed the most often.

Please write your answer(s) here:
Street Address_____(write in)
City______(write in)
State/Province_____(write in)

Postal Code	(write in)	
Country	(write in)	
[]What vear	did you move into this address?	
Please choose only one		
O 2019		
O 2018		
2017		
2016		
2015		
2014		
2013		
2012		
O 2011		
2010		
2009		
2008		
2007		
2006		
2005		
2004		
2003		
2002		
2001		
2000		
○ 1999 ○ 1998		
0 1997		
O 1996		
0 1995		
O 1994		
O 1993		
O 1992		
O 1991		
O 1990		
O 1989		
O 1988		
1987		
1986		
1985		
1984		
1983		
1982		
○ 1981○ 1980		
0 1979		
_		
[] Did van liva s	+ + b d d	m th 2
	t another address for at least 6 m	nonths?
Please choose only one	of the following:	
O Yes		
○ No		
Previous Ad	dress 2	
[]		
	ne previous address where you	u lived for at least 6 months

Please list the previous address where you lived for at least 6 months.

Please provide as much information as you can.

If you can't remember the street address, please provide an intersection, college/university name, etc.

Street Address	
State/Province	
Postal Code	
Country	
[]What waar d	d you mayo into this address?
[]VVIIat year u Please choose only one o	d you move into this address? the following:
O 2019	
O 2018	
O 2017	
O 2016	
2015	
2014	
2013	
2012	
O 2011	
2010	
2009	
2008	
2007	
2006	
2005	
2004	
2003	
2002	
2001	
2000	
1999	
1998	
1997	
1996	
1995	
1994	
1993	
1992	
O 1991	
O 1990	
1989	
1988	
1987	
1986	
1985	
1984	
1983	
1982	
1981	
1980	
1979	
[] Did you live at	another address for at least 6 months
Dia you live a	another address for at least o months

Please choose only one of the following:

O Yes O

Previous Address 3
Please list the previous address where you lived for at least 6 months.
Please provide as much information as you can.
,
If you can't remember the street address, please provide an intersection, college/university name, etc.
If you lived at more than one place at the same time, list the address where you stayed the most often.
Please write your answer(s) here:
Street Address(write in) City(write in)
State/Province(write in)
Postal Code(write in)
Country(write in)
[]What year did you move into this address?
Please choose only one of the following:
○ 2019
O 2018
() 2017
O 2016
O 2015
O 2014
O 2013
O 2012
O 2011
O 2010
O 2009
O 2008
O 2007
O 2006
○ 2005
O 2004
○ 2003
O 2002
O 2001
○ 2000
O 1999
O 1998
O 1997
O 1996
O 1995
O 1994
O 1993
O 1992
O 1991
O 1990
O 1989
O 1988

[] Did you live at another address for at least 6 months? Please choose only one of the following:
○ Yes ○ No
Previous Address 4
[] Please list the previous address where you lived for at least 6 months.
Please provide as much information as you can.
If you can't remember the street address, please provide an intersection, college/university name, etc.
If you lived at more than one place at the same time, list the address where you stayed the most often.
Please write your answer(s) here: Street Address(write in)
City(write in)
State/Province(write in)
Postal Code (write in)
Country(write in)
[]What year did you move into this address?
Please choose only one of the following:
O 2019
O 2018
O 2017
O 2016
O 2015
O 2014
O 2013
O 2012
O 2011
O 2010
O 2009
O 2008
○ 2007
○ 2006
O 2005
O 2004
O 2003
O 2002
O 2001
O 2000
O 1999
O 1998
O 1997
O 1996
O 1995
O 1994
O 1993
O 1992
O 1991
O 1990
○ 1989
O 1988
○ 1987 ○ 1996
○ 1986 ○ 1995
O 1985
○ 1984 ○ 1983
○ 1983 ○ 1982
○ 1982 ○ 1994
○ 1981○ 1980
0 1000

O 1979

[] Did you live at another address for at least 6 months? Please choose only one of the following:
○ Yes ○ No
Previous Address 5
Please list the previous address where you lived for at least 6 months. Please provide as much information as you can.
If you can't remember the street address, please provide an intersection, college/university name, etc.
If you lived at more than one place at the same time, list the address where you stayed the most often.
Please write your answer(s) here: Street Address(write in)
City(write in)
State/Province(write in)
Postal Code(write in)
Country(write in)
[]What year did you move into this address?
Please choose only one of the following:
O 2019
O 2018
O 2017
○ 2016
O 2015
O 2014
O 2013
O 2012
O 2011
2010
2009
O 2008
O 2007
○ 2006 ○ 2005
Q 2004
2003
O 2002
O 2001
O 2000
O 1999
O 1998
O 1997
O 1996
O 1995
O 1994
O 1993
O 1992
O 1991
O 1990
○ 1990 ○ 1989
O 1989
○ 1989○ 1988
○ 1989○ 1988○ 1987
☐ 1989☐ 1988☐ 1987☐ 1986
○ 1989○ 1988○ 1987

O 1983	
O 1982	
O 1981	
O 1980	
O 1979	
Did you live at another address for at least 6 months?	
Please choose only one of the following:	
Yes	
O No	
0.10	
Previous Address 6	
Please list the previous address where you lived for	r at least 6 months.
Please provide as much information as you can.	
If you can't remember the street address, please provide college/university name, etc.	an intersection,
If you lived at more than one place at the same time, list stayed the most often.	the address where you
Please write your answer(s) here:	
Street Address(write in)	
City(write in)	
State/Province(write in) Postal Code (write in)	
Country (write in)	
[]What year did you move into this address?	
Please choose only one of the following:	
2019	
○ 2018 ○ 2017	
2016	
2015	
2014	
2014	
Q 2012	
O 2011	
O 2010	
2009	
2008	
O 2007	
O 2006	
O 2005	
O 2004	
O 2003	
O 2002	
O 2001	
O 2000	
O 1999	
O 1998	
O 1997	O 1982
O 1996	O 1981
O 1995	O 1980
O 1994	O 1979
O 1993	
O 1992	
O 1991	
O 1990	
O 1989	
O 1988	
O 1987	
O 1986	
O 1985	
O 1984	
O 1983	

Did you live at another address for at least 6 m Please choose only one of the following:	nonths?
○ Yes	
○ No	
Previous Address 7	
[] Please list the previous address where yo	ou lived for at least 6 months
Please provide as much information as you ca	
If you can't remember the street address, pleacollege/university name, etc.	
If you lived at more than one place at the san stayed the most often.	ne time, list the address where you
Please write your answer(s) here: Street Address(write in)	
City(write in)	
State/Province(write in)	
Postal Code(write in) Country(write in)	
[]What year did you move into this address?	
Please choose only one of the following:	
O 2019	
○ 2018	
2017	
2016	
2015 2014	
2013	
0	
S 2011	_
2010	O 1994
2009 2008	○ 1993 ○ 1992
2007	O 1991
O 2006	O 1990
O 2005	O 1989
2004	O 1988
○ 2003	O 1987
○ 2002	O 1986
O 2001	O 1985
2000	O 1984
O 1999	O 1983
1998 1997	○ 1982 ○ 1981
O 1996	O 1980
O 1995	O 1979
Did you live at another address for at least 6 m	nonths?
○ Yes	
○ No	
Previous Address 8	
Please list the previous address where yo	ou lived for at least 6 months.
Please provide as much information as you ca	
, , , , , , , , , , , , , , , , , , , ,	

If you can't remember the street address, please provide an intersection,

college/university name, etc.

, , , , , , , , , , , , , , , , , , , ,		
Please write your answer((s) here:	
Street Address	(write in)	
City	(write in)	
State/Province	,	
Postal Code	, ,	
Country	(write in)	
TWhat year di	d you move into this add	dross?
Please choose only one o	•	11 €35 :
_	of the following.	
2019		O 1998
2018		O 1997
2017		O 1996
2016		O 1995
2015		O 1994
2014		O 1993
2013		O 1992
2012		O 1991
2011		O 1990
2010		O 1989
2009		O 1988
2008		O 1987
2007		O 1986
2006		① 1985
2005		① 1984
O 2004		
2003		() 1983 () 1983
2002		O 1982
O 2001		() 1981 () 1982
2000		O 1980
8 1999		1979
Did you live a Please choose only one o Yes No	nt another address for at of the following:	least 6 months?
		there you lived for at least 6 months. s you can.
	emember the street addr rsity name, etc.	ess, please provide an intersection,
If you lived at stayed the mo		the same time, list the address where you
Please write your answer(Street Address	(write in) (write in) (write in) (write in) (write in)	
[]What year o	did you move into this ac	ldress?
	of the following.	
2019		
2018		
0 2017		
2016		

O 2015
O 2014
O 2013
O 2012
O 2011
O 2010
O 2009
○ 2008
○ 2007
○ 2006
O 2005
O 2004
O 2003
O 2002
O 2001
O 2000
O 1999
O 1998
O 1997
O 1996
O 1995
O 1994
O 1993
O 1992
O 1991
○ 1990○ 1989
O 1988
O 1987
O 1986
O 1985
O 1984
O 1983
O 1982
O 1981
O 1980
O 1979
Did you live at another address for at least 6 months?
Please choose only one of the following:
O No.
○ No
Dravious Address 10
Previous Address 10
Please list the previous address where you lived for at least 6 months.
This is the final address we will ask you about. If you have not already
provided the address where you lived for the longest time, please do so
here.
Please provide as much information as you can.
If you can't remember the street address, please provide an intersection,
college/university name, etc.
If you lived at more than one place at the same time, list the address where you stayed the most often.
Please write your answer(s) here: Street Address (write in)
City(write in)
State/Province(write in)
Postal Code(write in)
Country(write in)
[]Womat year did you move into this address?
Please choose only one of the following:
O 2019
O 2018

O 2017	
O 2016	
O 2015	
O 2014	
O 2013	
O 2012	
O 2011	
2010	
2009 2008	
2007	
2006	
2005	
O 2004	
O 2003	
O 2002	
O 2001	
○ 2000	
O 1999	
O 1998	
O 1997	
O 1996	
○ 1995 ○ 1994	
O 1993	
O 1992	
O 1991	
O 1990	
O 1989	
O 1988	
O 1987	
O 1986	
O 1985	
O 1984	
O 1983	
O 1982	
O 1981	
○ 1980 ○ 1979	
Address Where You Lived the Longest	
Select the ONE address that you lived at for the LONGEST time in your life:	
Please choose all that apply:	
LOGIC	
Address Where You Lived the Longest	
[] The following questions pertain to the following address:	
LOGIC	
[]What type of dwelling was this?	
Please choose only one of the following:	
O Detached house not on a farm	
O Detached house on a farm	
O Duplex/Triplex	
Row house/Town house	
Low rise apartment (1-3 floors) High rise apartment (Over 3 floors)	
Mobile home/Trailer	
Other	
O Don't know/Don't remember	
[]What was the water supply for this address?	
11 / 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	

City/Community/Public water	er supply				
O Don't know					
Other					
Spirituality					
The following questions on this sun higher power or a divine force. We	use the word "God" bel	ow to refer to these differen	nt ways of understanding.		about God, such as a
Please substitute your own prefe			ah, Allah, Higher Power,	Ancestors, etc.).	
If you feel uncomfortable answering [] For each of the foll disagree.			ality," tell us l	how much yo	ou agree or
"Spirituality" is					
Please choose the appropriate resp	ponse for each item:			O annough at	
	Strongly agree	Somewhat agree	Neutral	Somewhat disagree	Strongly disagree
the search for meaning and purpose in life.	0	0	0	0	0
about your personal relationship with God.	0	0	0	0	0
the search for enlightenment.	0	0	0	0	0
a connection to all of life that goes beyond the physical world.	0	0 (0	0	
embracing the traditions of my ancestors.	0	0	0	0	0
[]Which one of the	se statemen	ts is closest to	your own de	finition of "sr	nirituality"?
Please choose only one of the follo	owina:				
The search for enlightenment A connection to all of life that					
Embracing the traditions of	my ancestors		religious," tell	us how muc	h you agree
Embracing the traditions of [] For each of the follor disagree.	my ancestors lowing items		religious," tell	us how muc	h you agree
Embracing the traditions of [] For each of the follor disagree. Being "religious" is	my ancestors lowing items		religious," tell	us how muc	h you agree
Embracing the traditions of [] For each of the follor disagree.	my ancestors lowing items		religious," tell		h you agree
Embracing the traditions of [] For each of the follor disagree. Being "religious" is	my ancestors lowing items		religious," tell Neutral	us how muc	h you agree Strongly disagree
Embracing the traditions of [] For each of the follor disagree. Being "religious" is	lowing items ponse for each item:	about being "		Somewhat	
Embracing the traditions of [] For each of the follor disagree. Being "religious" is Please choose the appropriate responsible to the second s	lowing items conse for each item: Strongly agree	about being " Somewhat agree	Neutral –	Somewhat disagree	Strongly disagree
Embracing the traditions of [] For each of the follor disagree. Being "religious" is Please choose the appropriate responder to the right way to livemaking efforts to strengthen your faith through membership in a particular church, temple, mosque or	lowing items ponse for each item: Strongly agree	about being " Somewhat agree	Neutral	Somewhat disagree	Strongly disagree
Embracing the traditions of [] For each of the foll or disagree. Being "religious" is Please choose the appropriate rest. identifying with a shared set of practices or beliefs about the right way to live. making efforts to strengthen your faith through membership in a particular church, temple, mosque or other faith community. following formal teachings or doctrines. about your personal	Iowing items S Strongly agree	about being " Somewhat agree	Neutral O	Somewhat disagree	Strongly disagree
Embracing the traditions of [] For each of the foll or disagree. Being "religious" is Please choose the appropriate responsive to the second of the practices or beliefs about the right way to live. making efforts to strengthen your faith through membership in a particular church, temple, mosque or other faith community. following formal teachings or doctrines.	Iowing items S ponse for each item: Strongly agree	about being " Somewhat agree	Neutral O O O O	Somewhat disagree	Strongly disagree
Embracing the traditions of [] For each of the foll or disagree. Being "religious" is Please choose the appropriate responder of practices or beliefs about the right way to live. making efforts to strengthen your faith through membership in a particular church, temple, mosque or other faith community. following formal teachings or doctrines. about your personal relationship with God. [] Which one of the	lowing items ponse for each item: Strongly agree	about being " Somewhat agree	Neutral O O O O	Somewhat disagree	Strongly disagree
Embracing the traditions of [] For each of the foll or disagree. Being "religious" is Please choose the appropriate responsive to the second of practices or beliefs about the right way to livemaking efforts to strengthen your faith through membership in a particular church, temple, mosque or other faith communityfollowing formal teachings or doctrinesabout your personal relationship with God. []Which one of the "religious"?	Inwing items Suppose for each item: Strongly agree Compared to the item: Strongly agree Com	about being " Somewhat agree O O atements is classes about the right way to	Neutral O O O O Osest to your	Somewhat disagree	Strongly disagree

O Very positive
O Positive
O Neutral or mixed
○ Negative
O Very negative
[]Which of the statements best describes you?
Please choose only one of the following:
I am neither spiritual nor religious.
☐ I am spiritual, but not religious. ☐ I am religious, but not spiritual.
Tam religious, but not spiritual. I am both spiritual and religious.
[]To what extent do you consider yourself a religious or spiritual person?
Please choose only one of the following:
○ Very
○ Moderately
○ Slightly
O Not at all
If you have a comment on this section, please write it here. You will have space later
for additional comments.
Please write your answer here:(write in)
Spirituality 2
[]What is your religious preference?
Please choose all that apply:
Agnostic (impossible to know whether God exists)
Atheist (there is no God)
☐ Buddhist
Catholic/Roman Catholic
Catholic/Roman Catholic Christian, non-denominational
Christian, non-denominational
Christian, non-denominational Hindu
Christian, non-denominational Hindu Jewish
Christian, non-denominational Hindu Jewish Muslim
Christian, non-denominational Hindu Jewish Muslim Protestant
Christian, non-denominational Hindu Jewish Muslim Protestant I do not belong to any religion
Christian, non-denominational Hindu Jewish Muslim Protestant I do not belong to any religion Other:(write in)
Christian, non-denominational Hindu Jewish Muslim Protestant I do not belong to any religion Other:(write in) []What is your denomination, if any? Only answer this question if the following conditions are met:
Christian, non-denominational Hindu Jewish Muslim Protestant I do not belong to any religion Other:(write in) [] What is your denomination, if any? Only answer this question if the following conditions are met: Answer was 'Protestant' at question '368 [religionpreg]' (What is your religious preference?)
Christian, non-denominational Hindu Jewish Muslim Protestant I do not belong to any religion Other:(write in) []What is your denomination, if any? Only answer this question if the following conditions are met: Answer was 'Protestant' at question '368 [religionpreg]' (What is your religious preference?) Please choose only one of the following:
Christian, non-denominational Hindu Jewish Muslim Protestant I do not belong to any religion Other:(write in) []What is your denomination, if any? Only answer this question if the following conditions are met: Answer was 'Protestant' at question '368 [religionpreg]' (What is your religious preference?) Please choose only one of the following: Apostolic/New Apostolic
Christian, non-denominational Hindu Jewish Muslim Protestant I do not belong to any religion Other:(write in) [] What is your denomination, if any? Only answer this question if the following conditions are met: Answer was 'Protestant' at question '368 [religionpreg]' (What is your religious preference?) Please choose only one of the following: Apostolic/New Apostolic Assemblies of God
Christian, non-denominational Hindu Jewish Muslim Protestant I do not belong to any religion Other:(write in) [] What is your denomination, if any? Only answer this question if the following conditions are met: Answer was 'Protestant' at question '368 [religionpreg]' (What is your religious preference?) Please choose only one of the following: Apostolic/New Apostolic Assemblies of God Baptist Born Again Christian Reform
Christian, non-denominational Hindu Jewish Muslim Protestant I do not belong to any religion Other:(write in) [] What is your denomination, if any? Only answer this question if the following conditions are met: Answer was 'Protestant ' at question '368 [religionpreg]' (What is your religious preference?) Please choose only one of the following: Apostolic/New Apostolic Assemblies of God Baptist Born Again Christian Reform Christian Science
Christian, non-denominational Hindu Jewish Muslim Protestant I do not belong to any religion Other:(write in) [] What is your denomination, if any? Only answer this question if the following conditions are met: Answer was 'Protestant' at question '368 [religionpreg]' (What is your religious preference?) Please choose only one of the following: Apostolic/New Apostolic Assemblies of God Baptist Born Again Christian Reform

0	Church of the Brethren				
\circ	Church of the Nazarene				
\circ	Churches of Christ				
0	Congregational/United Church of Chris	st			
\circ	Disciples of Christ				
\circ	Episcopalian/Anglican				
\circ	Evangelical				
\circ	Foursquare Gospel				
0	Full Gospel				
0	Fundamentalist				
0	Holiness/Holy				
_	Independent Christian Church				
0	Jehovah's Witness				
_	Lutheran				
0	Mennonite				
0	Methodist / United Methodist / Wesleya	an			
0	Mormon / Latter-Day Saints				
_	Nondenominational				
_	Orthodox (Eastern)				
_	Pentecostal/Charismatic				
_	Presbyterian				
_	Quaker				
_	Reformed/Dutch Reform				
_	Salvation Army				
_	Seventh-Day Adventist				
0	Other(write in)				
[]	How often do you atte	nd religious sei	rvices?		
Plea	ase choose only one of the following:				
0	Never				
_	Rarely				
_	About once a month				
_	2-3 times per month				
Ö	Once a week				
0	Several times per week				
- Г1і	Do you consider yours	olf part of a rol	igious congrega	tion or community?	
		en part or a rei	ngious congrega	cion or community:	
	ase choose only one of the following:				
	Yes				
0	No				
[]	Please fill in how often	the following I	nappens:		
Onl	y answer this question if the following o	onditions are met:			
Ans	wer was 'Yes' at question '371 [relcomm]' (Do you consider yourself pa	art of a religious congregation of	or community?)	
Plea	ase choose the appropriate response for ea	ach item:			
Here		ry often	Fairly often	Once in a while	Never
	v often does someone in r congregation or religious	_	_	_	_
	nmunity show that they	0	0	0	0
	or care for you?				
	v often do you show neone in your				
con	gregation or religious	0	0	0	
	community that you love or e for them?				
	v often are people in your				
con	gregation or religious	0	0	0	0
	nmunity critical of you or r lifestyle?		O	0	
	v often do you feel				
igno	ored or neglected by	0	0	0	0
	ple in your congregation eligious community?	~	· ·	~	~
	· ·				

[]Some churches or religious communities provide important community services in addition to religious services. Please answer the following questions about your church or religious community.

Answer was 'Yes' at question '371 [re	elcomm]' (Do you co	onsider yourself pa	art of a religious c	ongregation or cor	mmunity?)		
Please choose the appropriate response						B ##	
My church or religious	Yes			No		Don't Kno	W
community offers social							
services (For example: food							
pantry, legal or financial	0			0			
help, childcare, education,	0			0			
health care services)							
beyond religious services.							
In the past, I or a family							
member have been helped							
by a non-religious program				_			
or service that my church or	0			0		0	
religious community							
provides.							
In the past year, I have							
volunteered at my church or							
religious community to help	0			0			
provide a non-religious							
service to the community.							
If I had problems and							
needed help, my church or religious community would	0			0		0	
help me out.							
[]How often do you	do the fol	lowing2					
Please choose the appropriate response		lowing:					
riease choose the appropriate respo	onse for each item.						
	0		More than	0	Several	Several	
	Several times a day	Once a day	once a week	Once a week	times a month	times a	Never
Pray in a group other than at a	unies a day	Once a day	week	week	monui	year	Nevei
religious service	0	0	0	0	0	0	0
Pray by yourself	0	0	0	0	0	0	0
When you are by yourself, how		_	_	_	_		
often do you pray for others?	0	0	0	0	0	0	0
Read scriptures	0	0	0	0	0	0	0
Meditate (For example:		0	0	0	0	0	0
mindfulness, silent reflection)	0	0	0	0	0	0	0
Practice yoga	0	0	0	0	0	0	0
Practice Tai Chi	0	0	0	0	0	0	0
[]To what extent is	your relig	ion or spiı	rituality ir	nvolved in	understa	nding or c	lealing
with stressful situat							
Please choose only one of the follow	wina:						
r lease choose only one of the lonor	wiig.						
Not at all							
Not very much							
○ Somewhat							
0							
Very much so							
[]							
If you have a comn	nant on thi	c section	nlease w	rita it har	ra Vou wil	I have en	aca latar
for additional comn		3 30001011,	, picase v	ville it liei	C. TOU WII	i ilave spi	acc later
ioi additional comin	nents.						
Please write your answer here:	(write	e in)					
Spirituality 3							
[]Please mark the r	response t	nat best c	lescribes	how you t	feel:		
Please choose the appropriate response				,			
11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1					Tends not t	o be	
	Definitely true	Tends to	be true	Unsure	true		nitely not true
I believe in life after death.	oʻ	0		0	0		Ó
I believe that God exists.	0			0	0		0

Only answer this question if the following conditions are met:

[]Please mark the response that best describes how you feel:

Only answer this question if the following conditions are met:

Answer was 'Tends not to be true' or 'Unsure' or 'Tends to be true' or 'Definitely true' at question '377 [feel]' (Please mark the response that best describes how you feel: (I believe that God exists.))

Please choose the appropriate response for each item:

	Definitely true of me	Tends to be true me	of	Unsure	Tends not to be true of me	Definitely not true of me
I feel God's love or care for me, through others.	0	0		0	0	0
God gives me the strength to do things that I otherwise could not do myself.	0	0	0	0	0	
God's spirit dwells in my body.	0	0		0	0	0
I desire to be closer to God, or in union with God.	0	0		0	0	0
God loves or cares for me unconditionally, in a way that I could never earn.	0	0	0	0	0	
Throughout my life, God has come through for me.	0	0		0	0	0
My relationship with God is what really lies behind my whole approach to life.	0	0	0	0	0	
When I pray, I feel a deep sense of closeness with God.	0	0		0	0	0
I try to express my gratitude to God in my daily life.	0	0		0	0	0
God is the center of my life.	0	0		0	0	0

[]The following items deal with ways you have coped with stressful situations in your life. Different people deal with things in different ways. We want to know to what extent you did what the item says, not whether or not it worked.

Only answer this question if the following conditions are met:

Answer was 'Tends not to be true' or 'Unsure' or 'Tends to be true' or 'Definitely true' at question '377 [feet]' (Please mark the response that best describes how you feel: (I believe that God exists.))

Please choose the appropriate response for each item:

	A great deal	Quite a bit	Somewhat	Not at all
I saw my situation as part of God's plan.	0	0	0	0
I tried to see how God might be trying to strengthen me in these situations.	0	0	0	
I wondered what I did for God to punish me.	0	0	0	0
I wondered if God allowed this event to happen to me because of my wrongdoings.	0	0	0	
I believed the devil or evil spirits were responsible for my situation.	0	0	0	
I felt as though the devil or an evil spirit was trying to turn me away from God.	0	0	0	
I tried to make sense of the situation with God.	0	0	0	0
I worked together with God to relieve my worries.	0	0	0	0
I did what I could and put the rest in God's hands.	0	0	0	0
I took control over what I could, and gave the rest up to God.	0	0	0	
I sought God's love or care.	0	0	0	0
I trusted that God would be by my side.	0	0	0	0
I wondered whether God had abandoned me.	0	0	0	0
I questioned God's love or care for me.	0	0	0	0
I felt confused about my religious or spiritual beliefs.	0	0	0	0
I felt troubled by doubts or questions about my religion or spirituality.	0	0	0	
I felt hopeful that God would help me get through one day at a time.	0	0	0	

	A great deal	Quite	a bit	Sor	mewhat	Not at all
I looked to my faith in God for hope about the future.	0	(Э		0	0
[]When you think a threatening illness,						from life-
Only answer this question if the factor Answer was 'Tends not to be true' of feel: (I believe that God exists.))	-		e' at ques	tion '377 [feel]' (Pleas	se mark the response t	hat best describes how you
Please choose only one of the follo	owing:					
I believe that God intervenes I believe that God provides of				_		physical healing).
[]When you think a closest to your own		relationship	to y	our health,	which of the	e following is
Only answer this question if the f Answer was 'Tends not to be true' o feel: (I believe that God exists.))			e' at ques	tion '377 [feel]' (Pleas	se mark the response the	hat best describes how you
Please choose only one of the follo	owing:					
My health is determined by	my own actions and be	ehaviors.				
When it comes to my health	, God and I both have	a role to play.				
O God determines my health,	regardless of my own	actions and behavio	rs.			
[]To what extent d	o you agree	with each o	f the	following:		
Only answer this question if the f Answer was 'Tends not to be true' of feel: (I believe that God exists.))	following conditions are	e met:			se mark the response t	hat best describes how you
Please choose the appropriate resp	oonse for each item:				0 1 1	
	Strongly agree	Somewhat agree		Neutral	Somewhat disagree	Strongly disagree
God gave me the ability to make good choices, and so when I face a difficult situation it is up to me to figure out the right thing to do.	0	0	0	0	0	
When I face a difficult situation, I bring it to God and together we figure out the best way to handle it.	0	0		0	0	0
When I face a difficult situation, I turn it over to God knowing that God will work things out according to God's plan.	0	0	0	0	0	
[]Please indicate he statements:		agree or d	isagr	ee with eac	h of the follo	owing
Please choose the appropriate resp					Somewhat	
I have so much in life to be	Strongly agree	Somewhat agree		Neutral	disagree	Strongly disagree
thankful for.	0	0		0	0	0
If I had to list everything that I felt grateful for, it would be a very long list.	0	0	0	0	0	
[]Have there been to you a long time		you can't f	orgiv	e because t	they did or s	aid something
Please choose only one of the follo	owing:					
○ Yes ○ No						
[]How much do yo	u agree or di	sagree with	the f	following:		
Please choose the appropriate resp	oonse for each item:					
Before I can forgive others,	Strongly agree	Ag	ree	Di	sagree	Strongly disagree
they must promise not to do the same thing again.	0	(0		0	
I find it hard to forgive myself for some of the things I have done wrong.	0	(0		0	
I have forgiven those who have hurt me.	0	(С		0	0
I feel that others have not forgiven me for things that I have done.	0	(0		0	

I have trouble finding peace		Agree	D	isagree	Strongly disagree
of mind.	Strongly agree	0		0	0
I have a sense of direction and purpose in life.	0	0		0	0
I'm not sure my life adds up to much.	0	0		0	0
[]If you have a co	mment, please v	write it here.			
Please write your answer here:	(write in)				
Spirituality 4					
[]The list that follo consider how often should have).	ows includes iter n you have had t	ns you may this experien	or may not ce (not whe	have experie ther or not y	enced. Please ou think you
Please choose the appropriate res	ponse for each item:				
I experience a connection to	Many times a day	Every day	Some days	Once in a while	Never
all of life. I feel deep inner peace or	0	0	0	0	0
harmony.	0	0	0	0	0
I am touched by the beauty of nature.	0	0	0	0	0
I feel a selfless caring for others.	0	0	0	0	0
[] Last year, what wa members?	as your total hou	ısehold incon	ne before ta	xes from all	household
Please include inco child support in th	e past year).	rces (such as	s social secu	rity, stocks,	alimony, and
Please choose only one of the foll	owing:				
Less than \$10,000 \$10,001 - \$15,000					
\$15,001 - \$20,000 \$20,001 - \$25,000 \$25,001 - \$30,000 \$30,001 - \$50,000 \$50,001 - \$70,000 \$70,001 - \$90,000 \$90,001 - \$110,000 \$110,001 - \$200,000					
\$15,001 - \$20,000 \$20,001 - \$25,000 \$25,001 - \$30,000 \$30,001 - \$50,000 \$50,001 - \$70,000 \$70,001 - \$90,000 \$90,001 - \$110,000 \$110,001 - \$200,000					
\$15,001 - \$20,000 \$20,001 - \$25,000 \$25,001 - \$30,000 \$30,001 - \$50,000 \$50,001 - \$70,000 \$70,001 - \$90,000 \$90,001 - \$110,000 \$110,001 - \$200,000	nany people, inc	luding yourse	elf, were sup	oported by th	nis household
\$15,001 - \$20,000 \$20,001 - \$25,000 \$25,001 - \$30,000 \$30,001 - \$50,000 \$70,001 - \$70,000 \$90,001 - \$110,000 \$110,001 - \$200,000 More than \$200,000		luding yourse	elf, were sup	pported by th	nis household

[]In the following section, we ask about your emotional life, in particular how you control (that is, regulate and manage) your emotions. For each item, please answer using the following scale from 1 to 7, where 1 means that you strongly disagree, 4 means that you are neutral, and 7 means that you strongly agree.

Please choose the appropriate response for each item:

I keep my emotions to myself.	1 - Strongly Disagree	2		3	4 - Neutral	5	6	7 - Strongly Agree
When I want to feel less negative emotion (such as sadness or anger), I change what I am thinking about	0	0		0	0	0	0	0
When I am feeling positive emotions (such as joy or amusement), I am careful not to express them.	0	0		0	0	0	0	0
When I'm faced with a stressful situation, I make myself think about it in a way that helps me stay calm.	0	0		0	0	0	0	0
I control my emotions by not expressing them.								
When I want to feel positive emotion, I change the way I'm thinking about the situation.	9	00	0	00	8	0 0	0	0
I control my emotions by changing the way I think about the situation I'm in.	0	0	0	0	0	0		
When I am feeling negative emotions, I make sure not to express them.	0	0	0	0	0	0		
When I want to feel less negative emotion, I change the way I'm thinking about the situation.	0	0	0	0	0	0		
гэ								

If you have a comment please write it here. This is the last page of the questionnaire.

Please write your answer here:_____(write in)

If you wish to print your answers, click the "PRINT YOUR ANSWERS" link below. On the next page you must use your web browser's print button and not the "PDF Export" that appears on the screen. (It will take approximately 30 pages to print.)

Submit your survey.
Thank you for completing this survey.

[&]quot;Thank you for completing the 2019 GUTS Questionnaire! Your answers have been submitted.