

Data Set Name: *pilotlifekey.sas7bdat*

Num	Variable	Type	Len	Label
1	pMaskID	Num	8	LIFE PILOT Participant Identifier
2	Female	Num	8	Gender: 1=female, 0=male
3	Race	Char	32	Race\Ethnic Group
4	Baseline_Age	Num	8	[C] Age at Randomization
5	Arm	Num	8	Randomization Arm
6	Intervention	Char	17	Intervention Assignment: description
7	Clinic	Char	100	Randomization Clinic (code)

Data Set Name: *pl01_telephonescreening.sas7bdat*

Num	Variable	Type	Len	Label
1	pMaskID	Num	8	LIFE PILOT Participant Identifier
2	vc	Char	4	Visit Code
3	vis_days	Num	8	Date of Visit: converted to Days (in relation to randomization)
4	broch_tscr	Num	8	pL01: 5. How did you hear about the study? (Brochure with card)
5	mag_tscr	Num	8	pL01: 5. How did you hear about the study? (Magazine)
6	event_tscr	Num	8	pL01: 5. How did you hear about the study? (Event)
7	news_ad_tscr	Num	8	pL01: 5. How did you hear about the study? (Newspaper Ad)
8	flyer_tscr	Num	8	pL01: 5. How did you hear about the study? (Flyer)
9	referral_tscr	Num	8	pL01: 5. How did you hear about the study? (Referral)
10	fu_call_tscr	Num	8	pL01: 5. How did you hear about the study? (FU Call)
11	radio_ad_tscr	Num	8	pL01: 5. How did you hear about the study? (Radio Ad)
12	letter_tscr	Num	8	pL01: 5. How did you hear about the study? (Letter)
13	tv_ad_tscr	Num	8	pL01: 5. How did you hear about the study? (Television Ad)
14	dk_tscr	Num	8	pL01: 5. How did you hear about the study? (Don't know)
15	ref_tscr	Num	8	pL01: 5. How did you hear about the study? (Refused)
16	tar_area_tscr	Num	8	pL01: 6. Interviewer: Is volunteer's zip code in the study target area?
17	areayear_tscr	Num	8	pL01: 7. Do you plan to be in the area for the next year?
18	age_tscr	Char	100	pL01: 8. What is your age?
19	age_chk_tscr	Num	8	pL01: 8b. Interviewer: Is participant 70 to 89?
20	gender_tscr	Char	100	pL01: 10. May I ask your gender?
21	hisp_tscr	Num	8	pL01: 11. Are you Latino, Hispanic or of Spanish origin?
22	af_am_tscr	Num	8	pL01: 12. What is your race? African American/Black
23	native_tscr	Num	8	pL01: 12. What is your race? Native American/ Alaskan Native
24	asian_tscr	Num	8	pL01: 12. What is your race? Asian
25	oth_race_tscr	Num	8	pL01: 12. What is your race? Other
26	white_tscr	Num	8	pL01: 12. What is your race? Caucasian/White
27	othracsp_tscr	Char	100	pL01: 12. What is your race? Other, specify
28	hawaii_tscr	Num	8	pL01: 12. What is your race? Native Hawaiian/Pacific Islander
29	refused_tscr	Num	8	pL01: 12. What is your race? Refused
30	walker_tscr	Num	8	pL01: 13. Do you usually use a walker to get around the home?
31	walk_tscr	Num	8	pL01: 14. Are you able to walk a 1/4 mile, which is about 3 to 4 blocks, on a flat surface without the help of another person?
32	reg_ex_tscr	Num	8	pL01: 15. In the past month, have you spend at least 20 minutes a week getting regular exercise? Exercise includes activities like: brisk walking, jogging, weight lifting, cycling, aerobics, or dancing.
33	incrhr_tscr	Num	8	pL01: 15a. If yes, do these activities increase your heart rate, breathing and perspiration?
34	exdays_tscr	Char	100	pL01: 15b. i. If yes, How many days per week do you regularly do these activities? (days)
35	exmin_tscr	Char	100	pL01: 15ii. How many minutes per day? (minutes)

Num	Variable	Type	Len	Label
36	exminwk_tscr	Char	100	pL01: 16. Interviewer note: Calculate total # of minutes of exercise 1 day/ per week . Only eligible if below 20.
37	comm_tscr	Num	8	pL01: 17. DO NOT ASK: Does a hearing, speech or other problem make the candidate unable to communicate?
38	elig1_tscr	Num	8	pL01: 18. Is the participant eligible?
39	arthriti_tscr	Num	8	pL01: 19. Do you have arthritis that is so severe that it would prevent you from participating in a physical activity program?
40	oxygen_tscr	Num	8	pL01: 20. Do you have severe lung disease that requires you to wear oxygen or to regularly take steroid pills or injections?
41	hrtdis_tscr	Num	8	pL01: 21. Do you have severe heart disease that would prevent you from participating in an exercise program? For example, do you get chest pain when walking two or three blocks or up a flight of stairs?
42	cardiac_tscr	Num	8	pL01: 22. Have you ever had a cardiac arrest which required resuscitation?
43	imp_defb_tscr	Num	8	pL01: 23. Do you have an implanted cardiac defibrillator?
44	park_tscr	Num	8	pL01: 24. Do you have Parkinson's disease or some other serious neurological disorder? (Note to Interviewer: does NOT include stroke)
45	dial_tscr	Num	8	pL01: 25. Do you have severe kidney disease that requires dialysis?
46	alc14_tscr	Num	8	pL01: 26. During the past week, have you drunk more than 14 alcoholic beverages, including wine, beer, sherry, or liquor?
47	nurs_hom_tscr	Num	8	pL01: 27. Do you currently live in a nursing home?
48	househld_tscr	Num	8	pL01: 28. Is a member of your household enrolled in the study?
49	elig2_tscr	Num	8	pL01: 29. Is the participant eligible?
50	cncr_tscr	Num	8	pL01: 30. In the past three years, have you been treated for cancer or been told by a doctor that you had cancer or an malignant tumor?
51	brs_cncr_tscr	Num	8	pL01: 30a. Please tell me what type of cancer you had? Breast
52	crv_cncr_tscr	Num	8	pL01: 30a. Please tell me what type of cancer you had? Cervical
53	col_cncr_tscr	Num	8	pL01: 30a. Please tell me what type of cancer you had? Colon
54	prs_cncr_tscr	Num	8	pL01: 30a. Please tell me what type of cancer you had? Prostate
55	rec_cncr_tscr	Num	8	pL01: 30a. Please tell me what type of cancer you had? Rectal
56	ute_cncr_tscr	Num	8	pL01: 30a. Please tell me what type of cancer you had? Uterine
57	thy_cncr_tscr	Num	8	pL01: 30a. Please tell me what type of cancer you had? Thyroid
58	orl_cncr_tscr	Num	8	pL01: 30a. Please tell me what type of cancer you had? Oral
59	skin_tscr	Num	8	pL01: 30a. Please tell me what type of cancer you had? Nonmelanoma Skin
60	oth_cncr_tscr	Num	8	pL01: 30a. Please tell me what type of cancer you had? All Other Cancers
61	cncr_rad_tscr	Num	8	pL01: 30b. Are you currently receiving radiation treatment and/or chemotherapy for this cancer?
62	elig3_tscr	Num	8	pL01: 31. Is participant eligible based on previous sections?
63	future_tscr	Num	8	pL01: 31. Can we retain your name in our files for possible participation in future studies?
64	hip_tscr	Num	8	pL01: 32. Within the past 6 months, have you had a hip fracture?
65	knee_tscr	Num	8	pL01: 33. Within the past 6 months, have you had hip or knee replacement?
66	mi_tscr	Num	8	pL01: 34. Within the past 6 months, have you had a heart attack or myocardial infraction that require overnight hospitalization?
67	hrt_surg_tscr	Num	8	pL01: 35. Within the past 6 months, have you had major heart surgery, including valve replacement or bypass surgery?

Num	Variable	Type	Len	Label
68	stroke_tscr	Num	8	pL01: 36. Within the past 6 months, have you had a stroke? (Note: does not include TIA)
69	spine_tscr	Num	8	pL01: 37. Within the past 6 months, have you had spinal surgery?
70	clot_tscr	Num	8	pL01: 38. Within the past 6 months, have you had a blood clot in your leg or in your lungs?
71	phy_th_tscr	Num	8	pL01: 39. Are you currently receiving physical therapy aimed at the lower extremity or lower extremity functioning?
72	oth_tr_tscr	Num	8	pL01: 40. Are you currently enrolled in another intervention study?
73	try_ag_tscr	Num	8	pL01: 41. You are currently not eligible for our study, but may become eligible in the future. May I call you back in 1 - 6 months to check on how you are doing?
74	too_busy_tscr	Num	8	pL01: 42. Candidate defers clinic visit: Too Busy
75	sick_tscr	Num	8	pL01: 42. Candidate defers clinic visit: Sick
76	car_othr_tscr	Num	8	pL01: 42. Candidate defers clinic visit: Caring for others
77	no_intrs_tscr	Num	8	pL01: 42. Candidate defers clinic visit: Not interested
78	no_help_tscr	Num	8	pL01: 42. Candidate defers clinic visit: Do not think it would help
79	doctor_tscr	Num	8	pL01: 42. Candidate defers clinic visit: Doctor told me not to
80	lang	Num	8	pL01: Source Form Language

Data Set Name: *pl02_sppb.sas7bdat*

Num	Variable	Type	Len	Label
1	pMaskID	Num	8	LIFE PILOT Participant Identifier
2	vc	Char	4	Visit Code
3	vis_days	Num	8	Date of Visit: converted to Days (in relation to randomization)
4	wher_tst_sppb	Num	8	pL02: Examiner: Where was this test performed?
5	sbss_scr_sppb	Num	8	pL02: Balance,side-by-side-1. Score
6	sbss_sec_sppb	Num	8	pL02: Balance,side-by-side-2. Number of seconds held if less than 10 sec:
7	sts_scr_sppb	Num	8	pL02: Balance,semi-tadem-1. Score
8	sts_sec_sppb	Num	8	pL02: Balance,semi-tadem-2. Number of seconds held if less than 10 sec:
9	ts_scr_sppb	Num	8	pL02: Balance,tadem-1. Score
10	ts_sec_sppb	Num	8	pL02: Balance,tadem-2. Number of seconds held if less than 10 sec:
11	bal_not_sppb	Num	8	pL02: Balance-3. If participant did not attempt test or failed, check why
12	bal_scr_sppb	Num	8	pL02: Balance-4. Total Balance Tests Score (sum points possible range is 0 to 4)
13	gs_lngth_sppb	Num	8	pL02: Gait Speed-1. Length of walk test course:
14	gs_time1_sppb	Num	8	pL02: Gait Speed-3. Time for 3 or 4 meters (sec)
15	gs_not1_sppb	Num	8	pL02: Gait Speed-4. If participant did not attempt test
16	gs_aid1_sppb	Num	8	pL02: Gait Speed-5. Aids used for first walk:
17	gs_time2_sppb	Num	8	pL02: 2nd Gait Speed-1. Time for 3 or 4 meters (sec)
18	gs_not2_sppb	Num	8	pL02: 2nd Gait Speed-2. If participant did not attempt or failed
19	gs_aid2_sppb	Num	8	pL02: 2nd Gait Speed-3. Aids used for second walk:
20	gs_timef_sppb	Num	8	pL02: 2nd Gait Speed-3. Record the shorter of the two times (sec)
21	gs_4m_sc_sppb	Num	8	pL02: 2nd Gait Speed-4. For 4-Meter Walk: (use shorter time)
22	gs_3m_sc_sppb	Num	8	pL02: 2nd Gait Speed-4. For 3-Meter Walk: (use shorter time)
23	scs_sfwo_sppb	Num	8	pL02: Chair Stand-1. Safe to stand without help:
24	scs_rslt_sppb	Num	8	pL02: Chair Stand-2. Results
25	scs_not_sppb	Num	8	pL02: Chair Stand-3. If participant did not attempt or failed
26	rcs_sf_sppb	Num	8	pL02: Repeated Chair Stand-1. Safe to stand five times
27	rcs_time_sppb	Num	8	pL02: Repeated Chair Stand-2. Time to complete five stands (only enter if participant completes 5 stands) sec
28	rcs_not_sppb	Num	8	pL02: Repeated Chair Stand-3. If participant did not attempt test or failed
29	rcs_scr_sppb	Num	8	pL02: Repeated Chair Stand-4. Chair Stand Score
30	tbt_scr_sppb	Num	8	pL02: Scoring-1. Total Balance Test Score (points)
31	gst_scr_sppb	Num	8	pL02: Scoring-2. Gait Speed Test Score (points)
32	cst_scr_sppb	Num	8	pL02: Scoring-3. Chair Stand Test Score (points)
33	tot_scr_sppb	Num	8	pL02: Scoring-4. Total Score (sum of points above)
34	future_sppb	Num	8	pL02: Can we retain your name in our files for possible participation in future studies?
35	gaitspeed_bad	Num	8	[C] pL02: 4 meter gait speed too slow? (1=yes, 0=no)
36	gait_speed4m	Num	8	[C] pL02: Gait Speed 4m (m/sec)

Data Set Name: *pl03_demographics.sas7bdat*

Num	Variable	Type	Len	Label
1	pMaskID	Num	8	LIFE PILOT Participant Identifier
2	vc	Char	4	Visit Code
3	vis_days	Num	8	Date of Visit: converted to Days (in relation to randomization)
4	livalone_demg	Num	8	pL03: 1. Do you live alone?
5	spouse_demg	Num	8	pL03: 2. Who lives with you? (Spouse)
6	paidempl_demg	Num	8	pL03: 2. Who lives with you?(Paid Employee)
7	child_demg	Num	8	pL03: 2. Who lives with you? (Child)
8	othlv_demg	Num	8	pL03: 2. Who lives with you? (Other)
9	friend_demg	Num	8	pL03: 2. Who lives with you? (Friend)
10	othrel_demg	Num	8	pL03: 2. Who lives with you? (Other Relative)
11	liveref_demg	Num	8	pL03: 2. Who lives with you? (Refused)
12	tothhmem_demg	Num	8	pL03: 3. Including yourself, how many live in your household
13	tothhref_demg	Num	8	pL03: 3. Refused
14	marst_demg	Num	8	pL03: 4. Which of the following best describes your current marital status?
15	lastgr_demg	Num	8	pL03: 5. What was the last grade you completed in school?
16	lastyr_demg	Char	100	pL03: 5. Year: (last year completed school)
17	smokcurr_demg	Num	8	pL03: 6. Do you smoke any cigarettes at the present time?
18	cigperdy_demg	Num	8	pL03: 7. How many cigarettes do you usually smoke per day?
19	smokd100_demg	Num	8	pL03: 8. Have you smoked a total of 100 or more cigarettes during your lifetime?
20	numdrnk_demg	Num	8	pL03: 9. During the past 12 months, how many drinks did you have in a typical week? If you are unsure, please make your best guess.
21	numdrnk_demg	Num	8	pL03: 9. Number of Drinks (Don't Know)
22	workpyvl_demg	Num	8	pL03: 10. Did you work for pay or as a volunteer in the last 7 days?
23	hrsworkd_demg	Num	8	pL03: 11. How many hours per week did you work for pay and/or as a volunteer?
24	everempl_demg	Num	8	pL03: 12. Have you EVER been employed for wages or salary?
25	occpm_l_demg	Num	8	pL03: 13j. Member of the military
26	income_demg	Num	8	pL03: 14. Roughly how much income from all sources (including earnings, pensions, investments, etc.) did your household have last year (before taxes)?
27	childcare_demg	Num	8	pL03: 15. Are you currently providing childcare on a regular basis? (at least weekly)
28	crrel_demg	Num	8	pL03: 16. Are you currently taking care of a sick or frail older relative or friend on a regular basis?
29	crrelmon_demg	Num	8	pL03: 17. Approximately how long have you been caring for this person on a regular basis? (Months)
30	crrelyrs_demg	Num	8	pL03: 17. Approximately how long have you been caring for this person on a regular basis? (Years)

Data Set Name: *pl04_bprpulseweight.sas7bdat*

Num	Variable	Type	Len	Label
1	pMaskID	Num	8	LIFE PILOT Participant Identifier
2	vc	Char	4	Visit Code
3	vis_days	Num	8	Date of Visit: converted to Days (in relation to randomization)
4	arm_bpwh	Num	8	pL04: 1.a. Arm Used (Right arm should be used as default)
5	arm_circ_bpwh	Num	8	pL04: b. Arm Circumference (cm)
6	cuffsz_bpwh	Num	8	pL04: 2. Cuff size
7	radpuls1_bpwh	Num	8	pL04: 3. Radial Pulse a. Measurement 1 (beats/30 seconds x 2)
8	radpuls2_bpwh	Num	8	pL04: 3. Radial Pulse b. Measurement 2 (beats/30 seconds x 2)
9	palpsyst_bpwh	Num	8	pL04: 4. Palpated Systolic (mmHG)
10	maxinflv_bpwh	Num	8	pL04: 5. Maximal Inflation Level [MIL] (mmHG)
11	bpterm_bpwh	Num	8	pL04: 6. Was blood pressure measurement terminated because MIL >= 300 mmHG after second reading?
12	sysbp1_bpwh	Num	8	pL04: 7. Blood Pressure - a. Measurement 1 (Systolic)
13	diasbp1_bpwh	Num	8	pL04: 7. Blood Pressure - a. Measurement 1 (Diastolic)
14	sysbp2_bpwh	Num	8	pL04: 7. Blood Pressure - b. Measurement 2 (Systolic)
15	diasbp2_bpwh	Num	8	pL04: 7. Blood Pressure - b. Measurement 2 (Diastolic)
16	weight_bpwh	Num	8	pL04: 8. Weight (kg)
17	waistcrc1_bpwh	Num	8	pL04: 9. Waist Circumference (only complete at SV1, F06, and F12) A. Measurement 1 (cm)
18	waistcrc2_bpwh	Num	8	pL04: 9. Waist Circumference (only complete at SV1, F06, and F12) B. Measurement 2 (cm)
19	waistcrc3_bpwh	Num	8	pL04: 9. Waist Circumference (only complete at SV1, F06, and F12) C. Measurement 3 (cm)

Data Set Name: *pl05_bodyheight.sas7bdat*

Num	Variable	Type	Len	Label
1	pMaskID	Num	8	LIFE PILOT Participant Identifier
2	vc	Char	4	Visit Code
3	vis_days	Num	8	Date of Visit: converted to Days (in relation to randomization)
4	cm_bdht	Num	8	pL05: 1. Height (cm)
5	kyphosis_bdht	Num	8	pL05: 2. Is participant standing sideways due to kyphosis?

Data Set Name: *pl06_medinventory.sas7bdat*

Num	Variable	Type	Len	Label
1	pMaskID	Num	8	LIFE PILOT Participant Identifier
2	vc	Char	100	Visit Code
3	vis_days	Num	8	Date of Visit: converted to Days (in relation to randomization)
4	medic_minv	Num	8	pL06: Did the participant take any prescription or non-prescription medications in the past two weeks?
5	prmedi1_minv	Char	100	pL06: Prescription Medication -Medication Name (1)
6	prstr1_minv	Char	100	pL06: Prescription Medication -Strength (1)
7	prunit1_minv	Char	100	pL06: Prescription Medication -Units (1)
8	prfmcd1_minv	Char	100	pL06: Prescription Medication -Formulation Code (1)
9	prcont1_minv	Num	8	pL06: Prescription Medication -Container Seen? (1)
10	prmedi2_minv	Char	100	pL06: Prescription Medication -Medication Name (2)
11	prstr2_minv	Char	100	pL06: Prescription Medication -Strength (2)
12	prunit2_minv	Char	100	pL06: Prescription Medication -Units (2)
13	prfmcd2_minv	Char	100	pL06: Prescription Medication -Formulation Code (2)
14	prcont2_minv	Num	8	pL06: Prescription Medication -Container Seen? (2)
15	prmedi3_minv	Char	100	pL06: Prescription Medication -Medication Name (3)
16	prstr3_minv	Char	100	pL06: Prescription Medication -Strength (3)
17	prunit3_minv	Char	100	pL06: Prescription Medication -Units (3)
18	prfmcd3_minv	Char	100	pL06: Prescription Medication -Formulation Code (3)
19	prcont3_minv	Num	8	pL06: Prescription Medication -Container Seen? (3)
20	prmedi4_minv	Char	100	pL06: Prescription Medication -Medication Name (4)
21	prstr4_minv	Char	100	pL06: Prescription Medication -Strength (4)
22	prunit4_minv	Char	100	pL06: Prescription Medication -Units (4)
23	prfmcd4_minv	Char	100	pL06: Prescription Medication -Formulation Code (4)
24	prcont4_minv	Num	8	pL06: Prescription Medication -Container Seen? (4)
25	prmedi5_minv	Char	100	pL06: Prescription Medication -Medication Name (5)
26	prstr5_minv	Char	100	pL06: Prescription Medication -Strength (5)
27	prunit5_minv	Char	100	pL06: Prescription Medication -Units (5)
28	prfmcd5_minv	Char	100	pL06: Prescription Medication -Formulation Code (5)
29	prcont5_minv	Num	8	pL06: Prescription Medication -Container Seen? (5)
30	prmedi6_minv	Char	100	pL06: Prescription Medication -Medication Name (6)
31	prstr6_minv	Char	100	pL06: Prescription Medication -Strength (6)
32	prunit6_minv	Char	100	pL06: Prescription Medication -Units (6)
33	prfmcd6_minv	Char	100	pL06: Prescription Medication -Formulation Code (6)
34	prcont6_minv	Num	8	pL06: Prescription Medication -Container Seen? (6)
35	prmedi7_minv	Char	100	pL06: Prescription Medication -Medication Name (7)
36	prstr7_minv	Char	100	pL06: Prescription Medication -Strength (7)

Num	Variable	Type	Len	Label
37	prunit7_minv	Char	100	pL06: Prescription Medication -Units (7)
38	prfmcd7_minv	Char	100	pL06: Prescription Medication -Formulation Code (7)
39	prcont7_minv	Num	8	pL06: Prescription Medication -Container Seen? (7)
40	prmedi8_minv	Char	100	pL06: Prescription Medication -Medication Name (8)
41	prstr8_minv	Char	100	pL06: Prescription Medication -Strength (8)
42	prunit8_minv	Char	100	pL06: Prescription Medication -Units (8)
43	prfmcd8_minv	Char	100	pL06: Prescription Medication -Formulation Code (8)
44	prcont8_minv	Num	8	pL06: Prescription Medication -Container Seen? (8)
45	prmedi9_minv	Char	100	pL06: Prescription Medication -Medication Name (9)
46	prstr9_minv	Char	100	pL06: Prescription Medication -Strength (9)
47	prunit9_minv	Char	100	pL06: Prescription Medication -Units (9)
48	prfmcd9_minv	Char	100	pL06: Prescription Medication -Formulation Code (9)
49	prcont9_minv	Num	8	pL06: Prescription Medication -Container Seen? (9)
50	prmedi10_minv	Char	100	pL06: Prescription Medication -Medication Name-(10)
51	prstr10_minv	Char	100	pL06: Prescription Medication-Strength (10)
52	prunit10_minv	Char	100	pL06: Prescription Medication-Units (10)
53	prfmcd10_minv	Char	100	pL06: Prescription Medication-Formulation Code (10)
54	prcont10_minv	Num	8	pL06: Prescription Medication-Container Seen? (10)
55	prmedi11_minv	Char	100	pL06: Prescription Medication -Medication Name (11)
56	prstr11_minv	Char	100	pL06: Prescription Medication -Strength (11)
57	prunit11_minv	Char	100	pL06: Prescription Medication -Units (11)
58	prfmcd11_minv	Char	100	pL06: Prescription Medication -Formulation Code (11)
59	prcont11_minv	Num	8	pL06: Prescription Medication -Container Seen? (11)
60	prmedi12_minv	Char	100	pL06: Prescription Medication -Medication Name (12)
61	prstr12_minv	Char	100	pL06: Prescription Medication -Strength (12)
62	prunit12_minv	Char	100	pL06: Prescription Medication -Units (12)
63	prfmcd12_minv	Char	100	pL06: Prescription Medication -Formulation Code (12)
64	prcont12_minv	Num	8	pL06: Prescription Medication -Container Seen? (12)
65	prmedi13_minv	Char	100	pL06: Prescription Medication -Medication Name (13)
66	prstr13_minv	Char	100	pL06: Prescription Medication -Strength (13)
67	prunit13_minv	Char	100	pL06: Prescription Medication -Units (13)
68	prfmcd13_minv	Char	100	pL06: Prescription Medication -Formulation Code (13)
69	prcont13_minv	Num	8	pL06: Prescription Medication -Container Seen? (13)
70	prmedi14_minv	Char	100	pL06: Prescription Medication -Medication Name (14)
71	prstr14_minv	Char	100	pL06: Prescription Medication -Strength (14)
72	prunit14_minv	Char	100	pL06: Prescription Medication -Units (14)
73	prfmcd14_minv	Char	100	pL06: Prescription Medication -Formulation Code (14)
74	prcont14_minv	Num	8	pL06: Prescription Medication -Container Seen? (14)
75	prmedi15_minv	Char	100	pL06: Prescription Medication -Medication Name (15)

Num	Variable	Type	Len	Label
76	prstr15_minv	Char	100	pL06: Prescription Medication -Strength (15)
77	prunit15_minv	Char	100	pL06: Prescription Medication -Units (15)
78	prfmcd15_minv	Char	100	pL06: Prescription Medication -Formulation Code (15)
79	prcont15_minv	Num	8	pL06: Prescription Medication -Container Seen?-(15)
80	prmedi16_minv	Char	100	pL06: Prescription Medication -Medication Name (16)
81	prstr16_minv	Char	100	pL06: Prescription Medication -Strength (16)
82	prunit16_minv	Char	100	pL06: Prescription Medication -Units (16)
83	prfmcd16_minv	Char	100	pL06: Prescription Medication -Formulation Code (16)
84	prcont16_minv	Num	8	pL06: Prescription Medication -Container Seen? (16)
85	prmedi17_minv	Char	100	pL06: Prescription Medication -Medication Name (17)
86	prstr17_minv	Char	100	pL06: Prescription Medication -Strength (17)
87	prunit17_minv	Char	100	pL06: Prescription Medication -Units (17)
88	prfmcd17_minv	Char	100	pL06: Prescription Medication -Formulation Code (17)
89	prcont17_minv	Num	8	pL06: Prescription Medication -Container Seen? (17)
90	prmedi18_minv	Char	100	pL06: Prescription Medication -Medication Name (18)
91	prstr18_minv	Char	100	pL06: Prescription Medication -Strength (18)
92	prunit18_minv	Char	100	pL06: Prescription Medication -Units (18)
93	prfmcd18_minv	Char	100	pL06: Prescription Medication -Formulation Code (18)
94	prcont18_minv	Num	8	pL06: Prescription Medication -Container Seen? (18)
95	prmedi19_minv	Char	100	pL06: Prescription Medication -Medication Name (19)
96	prstr19_minv	Char	100	pL06: Prescription Medication -Strength (19)
97	prunit19_minv	Char	100	pL06: Prescription Medication -Units (19)
98	prfmcd19_minv	Char	100	pL06: Prescription Medication -Formulation Code (19)
99	prcont19_minv	Num	8	pL06: Prescription Medication -Container Seen? (19)
100	prmedi20_minv	Char	100	pL06: Prescription Medication -Medication Name (20)
101	prstr20_minv	Char	100	pL06: Prescription Medication -Strength (20)
102	prunit20_minv	Char	100	pL06: Prescription Medication -Units (20)
103	prfmcd20_minv	Char	100	pL06: Prescription Medication -Formulation Code (20)
104	prcont20_minv	Num	8	pL06: Prescription Medication -Container Seen? (20)
105	prmedi21_minv	Char	100	pL06: Prescription Medication -Medication Name (21)
106	prstr21_minv	Char	100	pL06: Prescription Medication -Strength (21)
107	prunit21_minv	Char	100	pL06: Prescription Medication -Units (21)
108	prfmcd21_minv	Char	100	pL06: Prescription Medication -Formulation Code (21)
109	prcont21_minv	Num	8	pL06: Prescription Medication -Container Seen? (21)
110	prmedi22_minv	Char	100	pL06: Prescription Medication -Medication Name (22)
111	prstr22_minv	Char	100	pL06: Prescription Medication -Strength (22)
112	prunit22_minv	Char	100	pL06: Prescription Medication -Units (22)
113	prfmcd22_minv	Char	100	pL06: Prescription Medication -Formulation Code (22)
114	prcont22_minv	Num	8	pL06: Prescription Medication -Container Seen? (22)

Num	Variable	Type	Len	Label
115	prmedi23_minv	Char	100	pL06: Prescription Medication -Medication Name (23)
116	prstr23_minv	Char	100	pL06: Prescription Medication -Strength (23)
117	prunit23_minv	Char	100	pL06: Prescription Medication -Units (23)
118	prfmcd23_minv	Char	100	pL06: Prescription Medication -Formulation Code (23)
119	prcont23_minv	Num	8	pL06: Prescription Medication -Container Seen? (23)
120	prmedi24_minv	Char	100	pL06: Prescription Medication -Medication Name (24)
121	prstr24_minv	Char	100	pL06: Prescription Medication -Strength (24)
122	prunit24_minv	Char	100	pL06: Prescription Medication -Units (24)
123	prfmcd24_minv	Char	100	pL06: Prescription Medication -Formulation Code (24)
124	prcont24_minv	Num	8	pL06: Prescription Medication -Container Seen? (24)
125	prmedi25_minv	Char	100	pL06: Prescription Medication -Medication Name (25)
126	prstr25_minv	Char	100	pL06: Prescription Medication -Strength (25)
127	prunit25_minv	Char	100	pL06: Prescription Medication -Units (25)
128	prfmcd25_minv	Char	100	pL06: Prescription Medication -Formulation Code (25)
129	prcont25_minv	Num	8	pL06: Prescription Medication -Container Seen? (25)
130	prmedi26_minv	Char	100	pL06: Prescription Medication -Medication Name (26)
131	prstr26_minv	Char	100	pL06: Prescription Medication -Strength (26)
132	prunit26_minv	Char	100	pL06: Prescription Medication -Units (26)
133	prfmcd26_minv	Char	100	pL06: Prescription Medication -Formulation Code (26)
134	prcont26_minv	Num	8	pL06: Prescription Medication -Container Seen? (26)
135	prmedi27_minv	Char	100	pL06: Prescription Medication -Medication Name (27)
136	prstr27_minv	Char	100	pL06: Prescription Medication -Strength (27)
137	prunit27_minv	Char	100	pL06: Prescription Medication -Units (27)
138	prfmcd27_minv	Char	100	pL06: Prescription Medication -Formulation Code (27)
139	prcont27_minv	Num	8	pL06: Prescription Medication -Container Seen? (27)
140	prmedi28_minv	Char	100	pL06: Prescription Medication -Medication Name (28)
141	prstr28_minv	Char	100	pL06: Prescription Medication -Strength (28)
142	prunit28_minv	Char	100	pL06: Prescription Medication -Units (28)
143	prfmcd28_minv	Char	100	pL06: Prescription Medication -Formulation Code (28)
144	prcont28_minv	Num	8	pL06: Prescription Medication -Container Seen? (28)
145	prmedi29_minv	Char	100	pL06: Prescription Medication -Medication Name (29)
146	prstr29_minv	Char	100	pL06: Prescription Medication -Strength (29)
147	prunit29_minv	Char	100	pL06: Prescription Medication -Units (29)
148	prfmcd29_minv	Char	100	pL06: Prescription Medication -Formulation Code (29)
149	prcont29_minv	Num	8	pL06: Prescription Medication -Container Seen? (29)
150	prmedi30_minv	Char	100	pL06: Prescription Medication -Medication Name (30)
151	prstr30_minv	Char	100	pL06: Prescription Medication -Strength (30)
152	prunit30_minv	Char	100	pL06: Prescription Medication -Units (30)
153	prfmcd30_minv	Char	100	pL06: Prescription Medication -Formulation Code (30)

Num	Variable	Type	Len	Label
154	prcont30_minv	Num	8	pL06: Prescription Medication -Container Seen? (30)
155	npmedi1_minv	Char	100	pL06: Over-the-counter -Medication Name (1)
156	npstr1_minv	Char	100	pL06: Over-the-counter -Strength (1)
157	npunit1_minv	Char	100	pL06: Over-the-counter -Units (1)
158	npfmcd1_minv	Char	100	pL06: Over-the-counter -Formulation Code (1)
159	npcont1_minv	Num	8	pL06: Over-the-counter -Container Seen? (1)
160	npmedi2_minv	Char	100	pL06: Over-the-counter -Medication Name (2)
161	npstr2_minv	Char	100	pL06: Over-the-counter -Strength (2)
162	npunit2_minv	Char	100	pL06: Over-the-counter -Units (2)
163	npfmcd2_minv	Char	100	pL06: Over-the-counter -Formulation Code (2)
164	npcont2_minv	Num	8	pL06: Over-the-counter -Container Seen? (2)
165	npmedi3_minv	Char	100	pL06: Over-the-counter -Medication Name (3)
166	npstr3_minv	Char	100	pL06: Over-the-counter -Strength (3)
167	npunit3_minv	Char	100	pL06: Over-the-counter -Units (3)
168	npfmcd3_minv	Char	100	pL06: Over-the-counter -Formulation Code (3)
169	npcont3_minv	Num	8	pL06: Over-the-counter -Container Seen? (3)
170	npmedi4_minv	Char	100	pL06: Over-the-counter -Medication Name (4)
171	npstr4_minv	Char	100	pL06: Over-the-counter -Strength (4)
172	npunit4_minv	Char	100	pL06: Over-the-counter -Units (4)
173	npfmcd4_minv	Char	100	pL06: Over-the-counter -Formulation Code (4)
174	npcont4_minv	Num	8	pL06: Over-the-counter -Container Seen? (4)
175	npmedi5_minv	Char	100	pL06: Over-the-counter -Medication Name (5)
176	npstr5_minv	Char	100	pL06: Over-the-counter -Strength (5)
177	npunit5_minv	Char	100	pL06: Over-the-counter -Units (5)
178	npfmcd5_minv	Char	100	pL06: Over-the-counter -Formulation Code (5)
179	npcont5_minv	Num	8	pL06: Over-the-counter -Container Seen? (5)
180	npmedi6_minv	Char	100	pL06: Over-the-counter -Medication Name (6)
181	npstr6_minv	Char	100	pL06: Over-the-counter -Strength (6)
182	npunit6_minv	Char	100	pL06: Over-the-counter -Units (6)
183	npfmcd6_minv	Char	100	pL06: Over-the-counter -Formulation Code (6)
184	npcont6_minv	Num	8	pL06: Over-the-counter -Container Seen? (6)
185	npmedi7_minv	Char	100	pL06: Over-the-counter -Medication Name (7)
186	npstr7_minv	Char	100	pL06: Over-the-counter -Strength (7)
187	npunit7_minv	Char	100	pL06: Over-the-counter -Units (7)
188	npfmcd7_minv	Char	100	pL06: Over-the-counter -Formulation Code (7)
189	npcont7_minv	Num	8	pL06: Over-the-counter -Container Seen? (7)
190	npmedi8_minv	Char	100	pL06: Over-the-counter -Medication Name (8)
191	npstr8_minv	Char	100	pL06: Over-the-counter -Strength (8)
192	npunit8_minv	Char	100	pL06: Over-the-counter -Units (8)

Num	Variable	Type	Len	Label
193	npfmcd8_minv	Char	100	pL06: Over-the-counter -Formulation Code (8)
194	npcont8_minv	Num	8	pL06: Over-the-counter -Container Seen? (8)
195	npmedi9_minv	Char	100	pL06: Over-the-counter -Medication Name (9)
196	npstr9_minv	Char	100	pL06: Over-the-counter -Strength (9)
197	npunit9_minv	Char	100	pL06: Over-the-counter -Units (9)
198	npfmcd9_minv	Char	100	pL06: Over-the-counter -Formulation Code (9)
199	npcont9_minv	Num	8	pL06: Over-the-counter -Container Seen (9)
200	npmedi10_minv	Char	100	pL06: Over-the-counter -Medication Name (10)
201	npstr10_minv	Char	100	pL06: Over-the-counter -Strength (10)
202	npunit10_minv	Char	100	pL06: Over-the-counter -Units (10)
203	npfmcd10_minv	Char	100	pL06: Over-the-counter -Formulation Code (10)
204	npcont10_minv	Num	8	pL06: Over-the-counter -Container Seen? (10)
205	npmedi11_minv	Char	100	pL06: Over-the-counter -Medication Name (11)
206	npstr11_minv	Char	100	pL06: Over-the-counter -Strength (11)
207	npunit11_minv	Char	100	pL06: Over-the-counter -Units (11)
208	npfmcd11_minv	Char	100	pL06: Over-the-counter -Formulation Code (11)
209	npcont11_minv	Num	8	pL06: Over-the-counter -Container Seen? (11)
210	npmedi12_minv	Char	100	pL06: Over-the-counter -Medication Name (12)
211	npstr12_minv	Char	100	pL06: Over-the-counter -Strength (12)
212	npunit12_minv	Char	100	pL06: Over-the-counter -Units (12)
213	npfmcd12_minv	Char	100	pL06: Over-the-counter -Formulation Code (12)
214	npcont12_minv	Num	8	pL06: Over-the-counter -Container Seen? (12)
215	npmedi13_minv	Char	100	pL06: Over-the-counter -Medication Name (13)
216	npstr13_minv	Char	100	pL06: Over-the-counter -Strength (13)
217	npunit13_minv	Char	100	pL06: Over-the-counter -Units (13)
218	npfmcd13_minv	Char	100	pL06: Over-the-counter -Formulation Code (13)
219	npcont13_minv	Num	8	pL06: Over-the-counter -Container Seen? (13)
220	npmedi14_minv	Char	100	pL06: Over-the-counter -Medication Name (14)
221	npstr14_minv	Char	100	pL06: Over-the-counter -Strength (14)
222	npunit14_minv	Char	100	pL06: Over-the-counter -Units (14)
223	npfmcd14_minv	Char	100	pL06: Over-the-counter -Formulation Code (14)
224	npcont14_minv	Num	8	pL06: Over-the-counter -Container Seen? (14)
225	npmedi15_minv	Char	100	pL06: Over-the-counter -Medication Name (15)
226	npstr15_minv	Char	100	pL06: Over-the-counter -Strength (15)
227	npunit15_minv	Char	100	pL06: Over-the-counter -Units (15)
228	npfmcd15_minv	Char	100	pL06: Over-the-counter -Formulation Code (15)
229	npcont15_minv	Num	8	pL06: Over-the-counter -Container Seen? (15)
230	npmedi16_minv	Char	100	pL06: Over-the-counter -Medication Name (16)
231	npstr16_minv	Char	100	pL06: Over-the-counter -Strength (16)

Num	Variable	Type	Len	Label
232	npunit16_minv	Char	100	pL06: Over-the-counter -Units (16)
233	npfmcd16_minv	Char	100	pL06: Over-the-counter -Formulation Code (16)
234	npcont16_minv	Num	8	pL06: Over-the-counter -Container Seen? (16)
235	npmedi17_minv	Char	100	pL06: Over-the-counter -Medication Name (17)
236	npstr17_minv	Char	100	pL06: Over-the-counter -Strength (17)
237	npunit17_minv	Char	100	pL06: Over-the-counter -Units (17)
238	npfmcd17_minv	Char	100	pL06: Over-the-counter -Formulation Code (17)
239	npcont17_minv	Num	8	pL06: Over-the-counter -Container Seen? (17)
240	npmedi18_minv	Char	100	pL06: Over-the-counter -Medication Name (18)
241	npstr18_minv	Char	100	pL06: Over-the-counter -Strength (18)
242	npunit18_minv	Char	100	pL06: Over-the-counter -Units (18)
243	npfmcd18_minv	Char	100	pL06: Over-the-counter -Formulation Code (18)
244	npcont18_minv	Num	8	pL06: Over-the-counter -Container Seen? (18)
245	npmedi19_minv	Char	100	pL06: Over-the-counter -Medication Name (19)
246	npstr19_minv	Char	100	pL06: Over-the-counter -Strength (19)
247	npunit19_minv	Char	100	pL06: Over-the-counter -Units (19)
248	npfmcd19_minv	Char	100	pL06: Over-the-counter -Formulation Code (19)
249	npcont19_minv	Num	8	pL06: Over-the-counter -Container Seen? (19)
250	npmedi20_minv	Char	100	pL06: Over-the-counter -Medication Name (20)
251	npstr20_minv	Char	100	pL06: Over-the-counter -Strength (20)
252	npunit20_minv	Char	100	pL06: Over-the-counter -Units (20)
253	npfmcd20_minv	Char	100	pL06: Over-the-counter -Formulation Code (20)
254	npcont20_minv	Num	8	pL06: Over-the-counter -Container Seen? (20)
255	npmedi21_minv	Char	100	pL06: Over-the-counter -Medication Name (21)
256	npstr21_minv	Char	100	pL06: Over-the-counter -Strength (21)
257	npunit21_minv	Char	100	pL06: Over-the-counter -Units (21)
258	npfmcd21_minv	Char	100	pL06: Over-the-counter -Formulation Code (21)
259	npcont21_minv	Num	8	pL06: Over-the-counter -Container Seen? (21)
260	npmedi22_minv	Char	100	pL06: Over-the-counter -Medication Name (22)
261	npstr22_minv	Char	100	pL06: Over-the-counter -Strength (22)
262	npunit22_minv	Char	100	pL06: Over-the-counter -Units (22)
263	npfmcd22_minv	Char	100	pL06: Over-the-counter -Formulation Code (22)
264	npcont22_minv	Num	8	pL06: Over-the-counter -Container Seen? (22)
265	npmedi23_minv	Char	100	pL06: Over-the-counter -Medication Name (23)
266	npstr23_minv	Char	100	pL06: Over-the-counter -Strength (23)
267	npunit23_minv	Char	100	pL06: Over-the-counter -Units (23)
268	npfmcd23_minv	Char	100	pL06: Over-the-counter -Formulation Code (23)
269	npcont23_minv	Num	8	pL06: Over-the-counter -Container Seen? (23)
270	npmedi24_minv	Char	100	pL06: Over-the-counter -Medication Name (24)

Num	Variable	Type	Len	Label
271	npstr24_minv	Char	100	pL06: Over-the-counter -Strength (24)
272	npunit24_minv	Char	100	pL06: Over-the-counter -Units (24)
273	npfmcd24_minv	Char	100	pL06: Over-the-counter -Formulation Code (24)
274	npcont24_minv	Num	8	pL06: Over-the-counter -Container Seen? (24)
275	npmedi25_minv	Char	100	pL06: Over-the-counter -Medication Name (25)
276	npstr25_minv	Char	100	pL06: Over-the-counter -Strength (25)
277	npunit25_minv	Char	100	pL06: Over-the-counter -Units (25)
278	npfmcd25_minv	Char	100	pL06: Over-the-counter -Formulation Code (25)
279	npcont25_minv	Num	8	pL06: Over-the-counter -Container Seen? (25)
280	npmedi26_minv	Char	100	pL06: Over-the-counter -Medication Name (26)
281	npstr26_minv	Char	100	pL06: Over-the-counter -Strength (26)
282	npunit26_minv	Char	100	pL06: Over-the-counter -Units (26)
283	npfmcd26_minv	Char	100	pL06: Over-the-counter -Formulation Code (26)
284	npcont26_minv	Num	8	pL06: Over-the-counter -Container Seen? (26)
285	npmedi27_minv	Char	100	pL06: Over-the-counter -Medication Name (27)
286	npstr27_minv	Char	100	pL06: Over-the-counter -Strength (27)
287	npunit27_minv	Char	100	pL06: Over-the-counter -Units (27)
288	npfmcd27_minv	Char	100	pL06: Over-the-counter -Formulation Code (27)
289	npcont27_minv	Num	8	pL06: Over-the-counter -Container Seen? (27)
290	npmedi28_minv	Char	100	pL06: Over-the-counter -Medication Name (28)
291	npstr28_minv	Char	100	pL06: Over-the-counter -Strength (28)
292	npunit28_minv	Char	100	pL06: Over-the-counter -Units (28)
293	npfmcd28_minv	Char	100	pL06: Over-the-counter -Formulation Code (28)
294	npcont28_minv	Num	8	pL06: Over-the-counter -Container Seen? (28)
295	npmedi29_minv	Char	100	pL06: Over-the-counter -Medication Name (29)
296	npstr29_minv	Char	100	pL06: Over-the-counter -Strength (29)
297	npunit29_minv	Char	100	pL06: Over-the-counter -Units (29)
298	npfmcd29_minv	Char	100	pL06: Over-the-counter -Formulation Code (29)
299	npcont29_minv	Num	8	pL06: Over-the-counter -Container Seen? (29)
300	npmedi30_minv	Char	100	pL06: Over-the-counter -Medication Name (30)
301	npstr30_minv	Char	100	pL06: Over-the-counter -Strength (30)
302	npunit30_minv	Char	100	pL06: Over-the-counter -Units (30)
303	npfmcd30_minv	Char	100	pL06: Over-the-counter -Formulation Code (30)
304	npcont30_minv	Num	8	pL06: Over-the-counter -Container Seen? (30)

Data Set Name: *pl07_medhospadmhx.sas7bdat*

Num	Variable	Type	Len	Label
1	pMaskID	Num	8	LIFE PILOT Participant Identifier
2	vc	Char	4	Visit Code
3	vis_days	Num	8	Date of Visit: converted to Days (in relation to randomization)
4	healthrt_mhah	Num	8	pL07: 1. Would you say your health is Excellent, Very Good, Good, Fair, or Poor?
5	hlth6mon_mhah	Num	8	pL07: 2. Compared with 6 months ago, would you say that your health is better now, about the same, or worse than it was then?
6	hbp_mhah	Num	8	pL07: 3. Has a doctor ever told you that you have high blood pressure or hypertension?
7	hbpmmed_mhah	Num	8	pL07: 4. Are you currently taking any medicine for your high blood pressure?
8	hrtattk_mhah	Num	8	pL07: 5. Has a doctor ever told you that you had a heart attack, or coronary, or myocardial infarction and you had to be hospitalized overnight?
9	hrtfailr_mhah	Num	8	pL07: 6. Has a doctor ever told you that you had heart failure or congestive heart failure?
10	pacemakr_mhah	Num	8	pL07: 7. Do you have a pacemaker?
11	stroke_mhah	Num	8	pL07: 8. Has a doctor ever told you that you had a stroke or brain hemorrhage and had to be hospitalized?
12	armlegwk_mhah	Num	8	pL07: 9. Do you still have difficulty from your stroke? (A) Arm and/or leg still weak or hard to use
13	trbwalk_mhah	Num	8	pL07: 9. Do you still have difficulty from your stroke? (B) Trouble Walking
14	trbspch_mhah	Num	8	pL07: 9. Do you still have difficulty from your stroke? (C) Trouble with speech
15	otstrk_mhah	Num	8	pL07: 9. Do you still have difficulty from your stroke? (D) Other
16	cancer_mhah	Num	8	pL07: 10. Has a doctor ever told you that you had cancer or a malignant tumor, excluding minor skin cancers?
17	diabetes_mhah	Num	8	pL07: 11. Has a doctor ever told you that you had diabetes, sugar in your urine, or high blood sugar?
18	diabmed_mhah	Num	8	pL07: 12. Are you now using medication that you swallow to treat or control your diabetes?
19	insulin_mhah	Num	8	pL07: 13. Are you now using insulin injections?
20	brokehip_mhah	Num	8	pL07: 14. Has a doctor ever told you that you had a broken or fractured hip and had to be hospitalized?
21	brokbone_mhah	Num	8	pL07: 15. Since the age of 50, have you ever been told by a doctor, nurse, therapist, or medical assistant that you had broken or fractured any other bones?
22	wrist_mhah	Num	8	pL07: 16. Where was it? (A) wrist?
23	arm_mhah	Num	8	pL07: 16. Where was it? (B) arm?
24	back_mhah	Num	8	pL07: 16. Where was it? (C) back or spine?
25	othbones_mhah	Num	8	pL07: 16. Where was it? (D) or any other bones?
26	numfall_mhah	Num	8	pL07: 17. How many times would you say that you have fallen over the past year? That is, how many times have you unintentionally come to rest on the ground or floor?
27	numfallr_mhah	Num	8	pL07: 17. How many times would you say that you have fallen over the past year? Don't know
28	fallsdoc_mhah	Num	8	pL07: 18. When you fell, did you suffer any injury that required you to go to the doctor or to an emergency room, hospital, or urgent care center?
29	arthrits_mhah	Num	8	pL07: 19. During the last 6 months, have you seen a doctor specifically for arthritis or rheumatism?
30	hands_mhah	Num	8	pL07: 20. Did you have pain and/or stiffness in any of the following joints? (A) Hands/Fingers
31	shoulder_mhah	Num	8	pL07: 20. Did you have pain and/or stiffness in any of the following joints? (B) Shoulders
32	knees_mhah	Num	8	pL07: 20. Did you have pain and/or stiffness in any of the following joints? (C) Knees

Num	Variable	Type	Len	Label
33	hips_mhah	Num	8	pL07: 20. Did you have pain and/or stiffness in any of the following joints? (D) Hips
34	backpain_mhah	Num	8	pL07: 20. Did you have pain and/or stiffness in any of the following joints? (E) Back/Spine
35	foot_mhah	Num	8	pL07: 20. Did you have pain and/or stiffness in any of the following joints? (F) Foot
36	legamp_mhah	Num	8	pL07: 21. Have you had an amputation of a leg?
37	artlimb_mhah	Num	8	pL07: 22. Did you obtain an artificial limb?
38	uselimb_mhah	Num	8	pL07: 23. Do you regularly use this limb now?
39	liverdis_mhah	Num	8	pL07: 24. Has a doctor ever told you that you have cirrhosis or liver disease?
40	lungdis_mhah	Num	8	pL07: 25. Has a doctor ever told you that you have chronic lung disease such as chronic bronchitis, COPD, asthma, or emphysema?
41	psychprb_mhah	Num	8	pL07: 26. Since the age of 50, have you seen a doctor for emotional, nervous, or psychiatric problems?
42	othosp_mhah	Num	8	pL07: 27. Other than the hospitalizations you have already told me about, have you been hospitalized for any other reason in the past 3 years?
43	backinj_mhah	Num	8	pL07: 28. In the past 5 years, have you sought the advice of a physician or medical professional for any of the following reasons? (a. Back Injury)
44	paralys_mhah	Num	8	pL07: 28. In the past 5 years, have you sought the advice of a physician or medical professional for any of the following reasons? (b. Paralysis)
45	fainting_mhah	Num	8	pL07: 28. In the past 5 years, have you sought the advice of a physician or medical professional for any of the following reasons? (c. Fainting or Passing Out)
46	shrtbrth_mhah	Num	8	pL07: 28. In the past 5 years, have you sought the advice of a physician or medical professional for any of the following reasons? (d. Shortness of Breath)
47	asthma_mhah	Num	8	pL07: 28. In the past 5 years, have you sought the advice of a physician or medical professional for any of the following reasons? (e. Asthma)
48	cough_mhah	Num	8	pL07: 28. In the past 5 years, have you sought the advice of a physician or medical professional for any of the following reasons? (f. Chest congestion/cough)
49	abnheart_mhah	Num	8	pL07: 28. In the past 5 years, have you sought the advice of a physician or medical professional for any of the following reasons? (g. Abnormal Heart Rhythm)
50	depress_mhah	Num	8	pL07: 28. In the past 5 years, have you sought the advice of a physician or medical professional for any of the following reasons? (h. Depression)
51	footulcr_mhah	Num	8	pL07: 28. In the past 5 years, have you sought the advice of a physician or medical professional for any of the following reasons? (i. Foot Ulcer)
52	wound_mhah	Num	8	pL07: 28. In the past 5 years, have you sought the advice of a physician or medical professional for any of the following reasons? (j. A wound that would not heal?)
53	anxiety_mhah	Num	8	pL07: 29. In the past 6 months, have you experienced any of the following symptoms? (a. Anxiety)
54	fatigue_mhah	Num	8	pL07: 29. In the past 6 months, have you experienced any of the following symptoms? (b. Fatigue)
55	decapp_mhah	Num	8	pL07: 29. In the past 6 months, have you experienced any of the following symptoms? (c. Decreased Appetite)
56	insomnia_mhah	Num	8	pL07: 29. In the past 6 months, have you experienced any of the following symptoms? (d. Insomnia)
57	dizziness_mhah	Num	8	pL07: 29. In the past 6 months, have you experienced any of the following symptoms? (e. Dizziness)
58	muscstff_mhah	Num	8	pL07: 29. In the past 6 months, have you experienced any of the following symptoms? (f. Muscle or Joint Stiffness)
59	muscstrn_mhah	Num	8	pL07: 29. In the past 6 months, have you experienced any of the following symptoms? (g. Muscle Strain or Soreness)
60	sprain_mhah	Num	8	pL07: 29. In the past 6 months, have you experienced any of the following symptoms? (h. Sprain (ankle or knee))

Num	Variable	Type	Len	Label
61	footpain_mhah	Num	8	pL07: 29. In the past 6 months, have you experienced any of the following symptoms? (i. Foot Pain)
62	othmedcn_mhah	Num	8	pL07: 30. Do you have any other medical conditions that might affect your ability to participate in a physical activity program?

Data Set Name: *pl08_ecg.sas7bdat*

Num	Variable	Type	Len	Label
1	pMaskID	Num	8	LIFE PILOT Participant Identifier
2	vc	Char	4	Visit Code
3	vis_days	Num	8	Date of Visit: converted to Days (in relation to randomization)
4	tempexcl_elec	Num	8	pL08: 1. 3rd degree heart block, Uncontrolled Arrhythmia, or > 3mm ST-depressions (Temporary Exclusion)
5	ventrate_elec	Num	8	pL08: 2. Ventricular rate/heart rate: (beats/min)
6	print_elec	Num	8	pL08: 3. PR Interval (sec)
7	qtint_elec	Num	8	pL08: 4. QT Interval (sec)
8	qrsint_elec	Num	8	pL08: 5. QRS duration (sec)
9	qtc_elec	Num	8	pL08: 6. QTc (sec)
10	ecg_elec	Num	8	pL08: 7. ECG ecg_elec
11	caf_elec	Num	8	pL08: 8. Were there any Clinical Alert Findings?
12	suprtach_elec	Num	8	pL08: 8. Clinical Alert Findings - Supraventricular or ventricular tachycardia (>= 100/min)
13	sintach2_elec	Num	8	pL08: 8. Clinical Alert Findings -Sinus tachycardia (>100)
14	juncrhyt_elec	Num	8	pL08: 8. Clinical Alert Findings -Junctional or ideoventricular rhythm
15	sinbrad2_elec	Num	8	pL08: 8. Clinical Alert Findings -Sinus bradycardia (<40/min)
16	atrialf1_elec	Num	8	pL08: 8. Clinical Alert Findings -New Atrial flutter
17	anybrady_elec	Num	8	pL08: 8. Clinical Alert Findings -Any other bradycardia (<50/min)
18	atrialfi_elec	Num	8	pL08: 8. Clinical Alert Findings -New Atrial fibrillation
19	accavcp_elec	Num	8	pL08: 8. Clinical Alert Findings -Accessory AV Conduction Pathway (Wolf- Parkinson-White, Lown-Ganong-Levine)
20	venttach_elec	Num	8	pL08: 8. Clinical Alert Findings -Ventricular tachycardia
21	qtprolon_elec	Num	8	pL08: 8. Clinical Alert Findings -QT prolongation (QTc >= 440 ms)
22	sdavblk1_elec	Num	8	pL08: 8. Clinical Alert Findings -Second degree AV block (Mobitz type I)
23	lvhstta_elec	Num	8	pL08: 8. Clinical Alert Findings -Left ventricular hypertrophy with ST-T abnormalities
24	sdavblk2_elec	Num	8	pL08: 8. Clinical Alert Findings -Second degree AV block (Mobitz type II)
25	myocinfr_elec	Num	8	pL08: 8. Clinical Alert Findings -Myocardial infarction/ischemic injury (possibly recent)/Marked T wave abnormality
26	tdavblk_elec	Num	8	pL08: 8. Clinical Alert Findings -Third degree AV block
27	othercaf_elec	Num	8	pL08: 8. Clinical Alert Findings -Other, specify in comments
28	sinbrady_elec	Num	8	pL08: 9. Other Abnormal Findings - Sinus bradycardia (50-60)
29	nsstta_elec	Num	8	pL08: 9. Other Abnormal Findings - Non-specific ST-T abnormalities
30	sinpause_elec	Num	8	pL08: 9. Other Abnormal Findings - Sinus pause/arrest
31	knatfib_elec	Num	8	pL08: 9. Other Abnormal Findings - Known artial fibrillation
32	ectatrhy_elec	Num	8	pL08: 9. Other Abnormal Findings - Ectopic atrial rhythm
33	knatflt_elec	Num	8	pL08: 9. Other Abnormal Findings - Known atrial flutter
34	ectsupco_elec	Num	8	pL08: 9. Other Abnormal Findings - Ectopic supraventricular complexes
35	rtatenlr_elec	Num	8	pL08: 9. Other Abnormal Findings - Right atrial enlargement

Num	Variable	Type	Len	Label
36	ectvenco_elec	Num	8	pL08: 9. Other Abnormal Findings - Ectopic ventricular complexes
37	lventhyp_elec	Num	8	pL08: 9. Other Abnormal Findings - Left ventricular hypertrophy
38	elecpace_elec	Num	8	pL08: 9. Other Abnormal Findings - Electronic pacemaker
39	laxisdev_elec	Num	8	pL08: 9. Other Abnormal Findings - Left axis deviation (QRS axis < -30 degrees)
40	fdavblk_elec	Num	8	pL08: 9. Other Abnormal Findings - First degree AV block (PR >= 210 ms)
41	raxisdev_elec	Num	8	pL08: 9. Other Abnormal Findings - Right axis deviation (QRS axis > 110 degrees)
42	lowqrsv_elec	Num	8	pL08: 9. Other Abnormal Findings - Low QRS voltage
43	rventhyp_elec	Num	8	pL08: 9. Other Abnormal Findings - Right ventricular hypertrophy
44	lbbblk_elec	Num	8	pL08: 9. Other Abnormal Findings - Left bundle branch block
45	inrbbblk_elec	Num	8	pL08: 9. Other Abnormal Findings - Incomplete right bundle branch block
46	rbbblk_elec	Num	8	pL08: 9. Other Abnormal Findings - Right bundle branch block
47	otheroaf_elec	Num	8	pL08: 9. Other Abnormal Findings - Other, specify in comments
48	myocinfo_elec	Num	8	pL08: 9. Other Abnormal Findings - Myocardial infarction (old)

Data Set Name: *pl09_physicalexam.sas7bdat*

Num	Variable	Type	Len	Label
1	pMaskID	Num	8	LIFE PILOT Participant Identifier
2	vc	Char	100	Visit Code
3	vis_days	Num	8	Date of Visit: converted to Days (in relation to randomization)
4	genapp_phex	Num	8	pL09: 1. General Apperance
5	skin_phex	Num	8	pL09: 2. Skin
6	neck_phex	Num	8	pL09: 3. Neck (including Thyroid)
7	head_phex	Num	8	pL09: 4. Head, ears, nose, throat
8	lungs_phex	Num	8	pL09: 5. Lungs
9	heart_phex	Num	8	pL09: 6. Heart
10	abdom_phex	Num	8	pL09: 7. Abdomen
11	extrs_phex	Num	8	pL09: 8. Extremities (Lower Extremity Range of motion)
12	neuro_phex	Num	8	pL09: 9. Sensory, Vision, Hearing and Neurological System
13	abpuls_phex	Num	8	pL09: 10. Vascular System: A. Abdominal Pulsation
14	fembru_phex	Num	8	pL09: 10. Vascular System: B. Femoral Bruit
15	carbru_phex	Num	8	pL09: 10. Vascular System: C. Carotid Bruit
16	furthervl_phex	Num	8	pL09: 11. Questionable symptoms that require further medical evaluation of the participant by the study physician?
17	physseen_phex	Num	8	pL09: 12. Has the physician seen the participant?
18	excluded_phex	Num	8	pL09: 13. On the basis of all available information, should this participant be randomized based on results of the physical exam?

Data Set Name: *pl10_disability.sas7bdat*

Num	Variable	Type	Len	Label
1	pMaskID	Num	8	LIFE PILOT Participant Identifier
2	vc	Char	4	Visit Code
3	vis_days	Num	8	Date of Visit: converted to Days (in relation to randomization)
4	intvcomp_disq	Num	8	pL10: 1. How was the interview completed?
5	walkout_disq	Num	8	pL10: 2. In the past two weeks, has [the participant] done any walking outside the home? (including neighborhood, other parts of the city, the mall, or the gym?)
6	walktime_disq	Num	8	pL10: 3. When you walked in the past two weeks, what is the longest amount of time that he/she walked without sitting down to rest?
7	walkdist_disq	Num	8	pL10: 4. When you walked in the past two weeks, what is the farthest distance you walked at one time without sitting down to rest?
8	milediff_disq	Num	8	pL10: 5. Because of a health or physical problem, do you have any difficulty walking a distance of one mile, which is about 8 to 12 blocks?
9	walkgroc_disq	Num	8	pL10: 6. Could you walk up and down every aisle in a grocery store without sitting down to rest or leaning on a cart?
10	walkquar_disq	Num	8	pL10: 7. Could you walk ¼ mile, that is about 3-4 blocks without sitting down to rest?
11	walkqudf_disq	Num	8	pL10: 8. [difficulty past month] Walking for a quarter of a mile, which is about 2 or 3 blocks because of your health?
12	walkrm_disq	Num	8	pL10: 9. [difficulty past month] Walking across a small room because of your health?
13	walkrmhp_disq	Num	8	pL10: 9a. [difficulty past month] Do you usually receive help from another person when you walk across a small room?
14	bathng_disq	Num	8	pL10: 10. [difficulty past month] Bathing or showering because of your health?
15	bathnghp_disq	Num	8	pL10: 10a. [difficulty past month] Do you usually receive help from another person when you bathe or shower?
16	chair_disq	Num	8	pL10: 11. [difficulty past month] Moving in and out of a chair because of your health?
17	chairhp_disq	Num	8	pL10: 11a. [difficulty past month] Do you usually receive help from another person when you move in or out of a chair?
18	bed_disq	Num	8	pL10: 12. [difficulty past month] Moving in and out of bed because of your health?
19	bedhp_disq	Num	8	pL10: 12a. [difficulty past month] Do you usually receive help from another person when you move in or out of a bed?
20	toilet_disq	Num	8	pL10: 13. [difficulty past month] Using the toilet because of your health?
21	toilethp_disq	Num	8	pL10: 13a. [difficulty past month] Do you usually receive help from another person when you use the toilet?
22	dress_disq	Num	8	pL10: 14. [difficulty past month] Dressing yourself because of your health?
23	dresshp_disq	Num	8	pL10: 14a. [difficulty past month] Do you usually receive help from another person when you get dressed?
24	feed_disq	Num	8	pL10: 15. [difficulty past month] Feeding yourself because of your health?
25	feedhp_disq	Num	8	pL10: 15a. [difficulty past month] Do you usually receive help from another person when you feed yourself?
26	canewlkr_disq	Num	8	pL10: 16. [difficulty past month] Do you have to use a cane, walker, crutches or special equipment to help you get around?
27	lthswrk_disq	Num	8	pL10: 17. [difficulty past month] Doing light housework because of your health?
28	wlkbks_disq	Num	8	pL10: 18. [difficulty past month] Walking several blocks because of your health?

Num	Variable	Type	Len	Label
29	lfthvobj_disq	Num	8	pL10: 19. [difficulty past month] Lifting heavy objects because of your health?
30	meals_disq	Num	8	pL10: 20. [difficulty past month] Preparing your own meals because of your health?
31	commact_disq	Num	8	pL10: 21. [difficulty past month] Participating in community activities because of your health?
32	wlk1blk_disq	Num	8	pL10: 22. [difficulty past month] Walking one block because of your health?
33	lft10lbs_disq	Num	8	pL10: 23. [difficulty past month] Lifting or carrying something as heavy as 10 pounds (i.e., a bag of groceries) because of your health?
34	mngmoney_disq	Num	8	pL10: 24. [difficulty past month] Managing your money because of your health?
35	visrels_disq	Num	8	pL10: 25. [difficulty past month] Visiting with relatives or friends because of your health?
36	griphnds_disq	Num	8	pL10: 26. [difficulty past month] Gripping with your hands because of your health?
37	usephone_disq	Num	8	pL10: 27. [difficulty past month] Using the telephone because of your health?
38	car_disq	Num	8	pL10: 28. [difficulty past month] Getting in and out of a car because of your health?
39	carefam_disq	Num	8	pL10: 29. [difficulty past month] Taking care of a family member because of your health?
40	raisearm_disq	Num	8	pL10: 30. [difficulty past month] Raising your arms above your head because of your health?
41	errands_disq	Num	8	pL10: 31. [difficulty past month] Doing errands because of your health?
42	clmbstrs_disq	Num	8	pL10: 32. [difficulty past month] Climbing 1 flight of stairs because of your health?
43	fast22	Num	8	[C] pL10: 22-item disability score
44	dsbscore	Num	8	[C] pL10: 24-item disability score
45	katzadl	Num	8	[C] pL10: 6-item Katz score
46	Basic	Num	8	[C] pL10: PAT-D Disability Domain 1: Basic ADL Score
47	Mobility	Num	8	[C] pL10: PAT-D Disability Domain 2: Mobility Score
48	IADLs	Num	8	[C] pL10: PAT-D Disability Domain 3: Instrumental Activities of Daily Living
49	PATD	Num	8	[C] pL10: PAT-D: Pepper Assessment Tool for Disability

Data Set Name: *pl11_400mwalk.sas7bdat*

Num	Variable	Type	Len	Label
1	pMaskID	Num	8	LIFE PILOT Participant Identifier
2	vc	Char	4	Visit Code
3	vis_days	Num	8	Date of Visit: converted to Days (in relation to randomization)
4	safe_w400	Num	8	pL11: 1. Do you feel it would be safe to try to walk up and down this hallway 10 times?
5	willing_w400	Num	8	pL11: 2. Would you be willing to try it and see how you feel?
6	walkdev_w400	Num	8	pL11: 3. Did participant bring a cane (walking device) to the clinic? (Screening visit 1, participant is ineligible)
7	safewkdv_w400	Num	8	pL11: 4. Do you feel it would be safe if you could use your cane (or other device)?
8	device_w400	Num	8	pL11: 4a. Did the participant use an assistive walking device during the test?
9	lap1_w400	Num	8	pL11: 5. Lap completed (Lap 1)
10	lap2_w400	Num	8	pL11: 5. Lap completed (Lap 2)
11	lap3_w400	Num	8	pL11: 5. Lap completed (Lap 3)
12	lap4_w400	Num	8	pL11: 5. Lap completed (Lap 4)
13	howhard_w400	Num	8	pL11: Please tell me how hard you feel you are working right now.
14	lap5_w400	Num	8	pL11: 5. Lap completed (Lap 5)
15	lap6_w400	Num	8	pL11: 5. Lap completed (Lap 6)
16	lap7_w400	Num	8	pL11: 5. Lap completed (Lap 7)
17	lap8_w400	Num	8	pL11: 5. Lap completed (Lap 8)
18	lap9_w400	Num	8	pL11: 5. Lap completed (Lap 9)
19	lap10_w400	Num	8	pL11: 5. Lap completed (Lap 10)
20	reststp1_w400	Num	8	pL11: 6. Rest stop number 1: length of time of the rest (standing rests only)
21	reststp2_w400	Num	8	pL11: 6. Rest stop number 2: length of time of the rest (standing rests only)
22	reststp3_w400	Num	8	pL11: 6. Rest stop number 3: length of time of the rest (standing rests only)
23	reststp4_w400	Num	8	pL11: 6. Rest stop number 4: length of time of the rest (standing rests only)
24	reststp5_w400	Num	8	pL11: 6. Rest stop number 5: length of time of the rest (standing rests only)
25	reststp6_w400	Num	8	pL11: 6. Rest stop number 6: length of time of the rest (standing rests only)
26	reststp7_w400	Num	8	pL11: 6. Rest stop number 7: length of time of the rest (standing rests only)
27	reststp8_w400	Num	8	pL11: 6. Rest stop number 8: length of time of the rest (standing rests only)
28	reststp9_w400	Num	8	pL11: 6. Rest stop number 9: length of time of the rest (standing rests only)
29	reststp10_w400	Num	8	pL11: 6. Rest stop number 10: length of time of the rest (standing rests only)
30	tot_stop_w400	Num	8	pL11: 6. Total Number of stops
31	walk_comp_w400	Num	8	pL11: 7. Did the participant complete the 400 meter walk? (first foot crosses the finish line)
32	m_cmp_w400	Num	8	pL11: 7. If No, Number of meters completed
33	walk_min_w400	Num	8	pL11: 8. TIME to walk 400 meters or to stopping the test: (Minutes)
34	walk_sec_w400	Num	8	pL11: 8. TIME to walk 400 meters or to stopping the test: (Seconds)
35	end_hr_w400	Num	8	pL11: 9. Sitting Radial Pulse: (beats/30sec x2) (bpm)
36	stp_brth_w400	Num	8	pL11: 10. Test stopped early: Shortness of breath

Num	Variable	Type	Len	Label
37	stp_fnt_w400	Num	8	pL11: 10. Test stopped early: Feeling Faint or Dizzy
38	stp_chst_w400	Num	8	pL11: 10. Test stopped early: Chest Pain
39	stp_fat_w400	Num	8	pL11: 10. Test stopped early: Fatigue
40	stp_leg_w400	Num	8	pL11: 10. Test stopped early: Leg Pain
41	stp_oth_w400	Num	8	pL11: 10. Test stopped early: Other
42	end_both_w400	Num	8	pL11: 11. At end of walk ask, Is there anything bothering you?
43	obs_brth_w400	Num	8	pL11: 12. Observed Symptoms at end of walk: Shortness of breath
44	obs_unst_w400	Num	8	pL11: 12. Observed Symptoms at end of walk: Unsteadiness
45	obs_oth_w400	Num	8	pL11: 12. Observed Symptoms at end of walk: Other
46	obs_whz_w400	Num	8	pL11: 12. Observed Symptoms at end of walk: Wheezing/dyspnea
47	obs_swt_w400	Num	8	pL11: 12. Observed Symptoms at end of walk: Sweating
48	obs_no_w400	Num	8	pL11: 12. Observed Symptoms at end of walk: No symptoms observed
49	obs_disc_w400	Num	8	pL11: 12. Observed Symptoms at end of walk: Other Signs of discomfort
50	walk400bad	Num	8	[C] pL11: 400 meter gait speed too slow? (1=yes, 0=no)
51	gait_speed400m	Num	8	[C] pL11: Gait speed 400m (m/sec)

Data Set Name: *pl12_processmeasures.sas7bdat*

Num	Variable	Type	Len	Label
1	pMaskID	Num	8	LIFE PILOT Participant Identifier
2	vc	Char	100	Visit Code
3	vis_days	Num	8	Date of Visit: converted to Days (in relation to randomization)
4	conf5_prms	Num	8	pL12: (400m Walk Efficacy) 1. Confidence to: walk 5 laps, at the same pace one week from now?
5	conf10_prms	Num	8	pL12: (400m Walk Efficacy) 2. Confidence to: walk 10 laps (the same distance that you did today), at the same pace, one week from now?
6	conf15_prms	Num	8	pL12: (400m Walk Efficacy) 3. Confidence to: walk 15 laps, at the same pace one week from now?
7	conf20_prms	Num	8	pL12: (400m Walk Efficacy) 4. Confidence to: walk 20 laps (about ½ mile), at the same pace one week from now?
8	conf25_prms	Num	8	pL12: (400m Walk Efficacy) 5. Confidence to: walk 25 laps , at the same pace, one week from now?
9	vacation_prms	Num	8	pL12: (Barriers) 1. Confidence in physical activity: When you are on vacation?
10	compint_prms	Num	8	pL12: (Barriers) 2. Confidence in physical activity: When you have other competing interests (like your favorite TV show)?
11	lotwork_prms	Num	8	pL12: (Barriers) 3. Confidence in physical activity: When you have a lot of work to do?
12	byself_prms	Num	8	pL12: (Barriers) 4. Confidence in physical activity: If you had to do it by yourself?
13	illness_prms	Num	8	pL12: (Barriers) 5. Confidence in physical activity: If you were recovering from an illness?
14	hectic_prms	Num	8	pL12: (Barriers) 6. Confidence in physical activity: When your schedule is hectic?
15	tired_prms	Num	8	pL12: (Barriers) 7. Confidence in physical activity: If you were tired?
16	crisis_prms	Num	8	pL12: (Barriers) 8. Confidence in physical activity: During or following a personal crisis?
17	badweath_prms	Num	8	pL12: (Barriers) 9. Confidence in physical activity: During bad weather?
18	fitlevel_prms	Num	8	pL12: 1. (Body Satisfaction) Your overall level of fitness? (past 4 weeks)
19	legstrth_prms	Num	8	pL12: 2. (Body Satisfaction) The muscle strength in your legs? (past 4 weeks)
20	stamina_prms	Num	8	pL12: 3. (Body Satisfaction) Your level of endurance or stamina? (past 4 weeks)
21	musctone_prms	Num	8	pL12: 4. (Body Satisfaction) Your muscle tone? (past 4 weeks)
22	energylv_prms	Num	8	pL12: 5. (Body Satisfaction) Your overall level of energy? (past 4 weeks)
23	abilwant_prms	Num	8	pL12: 6. (Body Satisfaction) Your ability to do what you want or need to do? (past 4 weeks)
24	heavhwrk_prms	Num	8	pL12: 1. (Desire for Competence) Having the ability to do heavy work in the house or yard
25	standlow_prms	Num	8	pL12: 2. (Desire for Competence) Having the ability to stand up from a low, soft couch/chair
26	carrystr_prms	Num	8	pL12: 3. (Desire for Competence) Having the ability to carry a ten pound object (i.e., a bag of groceries) while climbing one flight of stairs
27	walkmile_prms	Num	8	pL12: 4. (Desire for Competence) Having the ability to walk at a quick pace for a mile
28	intocar_prms	Num	8	pL12: 5. (Desire for Competence) Having the ability to get into and out of a car
29	walk3mil_prms	Num	8	pL12: 6. (Desire for Competence) Having the ability to walk 3 miles on hilly, uneven paths
30	lghthwrk_prms	Num	8	pL12: 7. (Desire for Competence) Having the ability to do light work in the house or yard
31	walkstrs_prms	Num	8	pL12: 8. (Desire for Competence) Having the ability to walk up and down a flight of stairs (hand rails available)
32	needpush_prms	Num	8	pL12: (Self-regulation) 1. Sometimes I need a push to get things started
33	workhard_prms	Num	8	pL12: (Self-regulation) 2. I work hard to achieve my goals
34	makeplan_prms	Num	8	pL12: (Self-regulation) 3. I make plans and stick to them

Num	Variable	Type	Len	Label
35	trackprg_prms	Num	8	pL12: (Self-regulation) 4. If I set goals, I keep close track of my progress
36	disorg_prms	Num	8	pL12: (Self-regulation) 5. I tend to be disorganized
37	efficacy_400	Num	8	[C] pL12: 400 Meter Walk Efficacy (%)
38	eff_barriers	Num	8	[C] pL12: Barriers (mean)
39	body_sat	Num	8	[C] pL12: Body Satisfaction (mean: rescaled, -3 to 3, 0=neutral)
40	desire_pc	Num	8	[C] pL12: Desire for Competence (mean: rescaled, 0-4, 0=no desire)
41	goal_setting	Num	8	[C] pL12: Self-regulation Goal Setting (mean: rescaled, -1 to 2, 0=neutral)

Data Set Name: *pl13_mmse.sas7bdat*

Num	Variable	Type	Len	Label
1	pMaskID	Num	8	LIFE PILOT Participant Identifier
2	vc	Char	4	Visit Code
3	vis_days	Num	8	Date of Visit: converted to Days (in relation to randomization)
4	year_mmse	Char	100	pL13: 1. Orientation a. What year is it?
5	season_mmse	Char	100	pL13: 1. Orientation b. What season is it?
6	month_mmse	Char	100	pL13: 1. Orientation c. What month is it?
7	day_mmse	Char	100	pL13: 1. Orientation d. What day of the week is today?
8	today_mmse	Char	100	pL13: 1. Orientation e. What is today's date?
9	state_mmse	Char	100	pL13: 1. Orientation f. What state are we in?
10	county_mmse	Char	100	pL13: 1. Orientation g. What county are we in?
11	town_mmse	Char	100	pL13: 1. Orientation h. What town are we in?
12	place_mmse	Char	100	pL13: 1. Orientation i. Can you tell me the name of this place?
13	floor_mmse	Char	100	pL13: 1. Orientation j. What floor of the building are we on?
14	tot_orie_mmse	Num	8	pL13: 1. Orientation SUBTOTAL CORRECT (0-10)
15	ball1_mmse	Char	100	pL13: 2. Registration (repeat word): Ball
16	flag1_mmse	Char	100	pL13: 2. Registration (repeat word): Flag
17	tree1_mmse	Char	100	pL13: 2. Registration (repeat word): Tree
18	tot_regi_mmse	Num	8	pL13: 2. Registration Trial #1 SCORE (0-3)
19	learn_mmse	Num	8	pL13: 2. Was the subject able to learn the words?
20	trials_mmse	Num	8	pL13: 2. Number of trials?
21	sub93_mmse	Char	100	pL13: 3. Attention and Calculation (serial subtraction, 7 from 100) (93)
22	sub86_mmse	Char	100	pL13: 3. Attention and Calculation (serial subtraction, 7 from 100) (86)
23	sub79_mmse	Char	100	pL13: 3. Attention and Calculation (serial subtraction, 7 from 100) (79)
24	sub72_mmse	Char	100	pL13: 3. Attention and Calculation (serial subtraction, 7 from 100) (72)
25	sub65_mmse	Char	100	pL13: 3. Attention and Calculation (serial subtraction, 7 from 100) (65)
26	tot_atte_mmse	Num	8	pL13: 3. Attention and Calculation SCORE (0-5)
27	ball2_mmse	Char	100	pL13: 4. Recall (from word registration): Ball
28	flag2_mmse	Char	100	pL13: 4. Recall (from word registration): Flag
29	tree2_mmse	Char	100	pL13: 4. Recall (from word registration): Tree
30	tot_reca_mmse	Num	8	pL13: 4. Recall SCORE (0-3)
31	watch_mmse	Char	100	pL13: 5.a Naming (object shown): Wrist watch
32	pen_mmse	Char	100	pL13: 5.b Naming (object shown): Pen or Pencil
33	tot_nami_mmse	Num	8	pL13: 5. Naming SCORE (0-2)
34	tot_repe_mmse	Num	8	pL13: 6. Repetition (phrase: NO IFS, ANDS, OR BUTS) SCORE (0-1)
35	right_mmse	Char	100	pL13: 7. 3-Stage Command: Take the paper in your right hand
36	folded_mmse	Char	100	pL13: 7. 3-Stage Command: Paper folded
37	placed_mmse	Char	100	pL13: 7. 3-Stage Command: Paper placed on floor

Num	Variable	Type	Len	Label
38	tot_3sta_mmse	Num	8	pL13: 7. 3-Stage Command SCORE (0-3)
39	tot_read_mmse	Num	8	pL13: 8. Reading (read the words, do what it says) SCORE (0-1)
40	tot_writ_mmse	Num	8	pL13: 9. Writing (write complete sentence) SCORE (0-1)
41	tot_copy_mmse	Num	8	pL13: 10. Copying (copy drawing) SCORE (0-1)
42	total_mmse	Num	8	pL13: MMSE Total Score (0-30)

Data Set Name: *pl14_dxa.sas7bdat*

Num	Variable	Type	Len	Label
1	pMaskID	Num	8	LIFE PILOT Participant Identifier
2	vc	Char	4	Visit Code
3	vis_days	Num	8	Date of Visit: converted to Days (in relation to randomization)
4	QCL	Char	50	Indicator for longitudinal DEXA quality control
5	wbtot_fat_cr	Num	8	Whole body: Total fat tissue for all included regions (kg) - (QCL: corrected as needed)
6	wbtot_lean_cr	Num	8	Whole body: Total lean tissue for all included regions (kg) - (QCL: corrected as needed)
7	wbtot_bmc_cr	Num	8	Whole body: Total BMC for all included regions - (QCL: corrected as needed)
8	wbtot_mass_cr	Num	8	Whole body: Total mass for all included regions (kg) - (QCL: corrected as needed)
9	wbtot_pfat_cr	Num	8	Whole body: fat tissue to total mass for all included regions (%) - (QCL: corrected as needed)
10	append_fat_cr	Num	8	Appendicular region fat tissue (kg) - (QCL: corrected as needed)
11	append_lean_cr	Num	8	Appendicular region lean tissue (kg) - (QCL: corrected as needed)
12	trunk_fat_cr	Num	8	Trunk region fat tissue (kg) - (QCL: corrected as needed)
13	trunk_mass_cr	Num	8	Trunk region region mass (kg) - (QCL: corrected as needed)
14	trunk_pfat_cr	Num	8	Trunk region: fat tissue to total tissue mass (%) - (QCL: corrected as needed)

Data Set Name: *pl15_qualitywellbeing.sas7bdat*

Num	Variable	Type	Len	Label
1	pMaskID	Num	8	LIFE PILOT Participant Identifier
2	vc	Char	4	Visit Code
3	vis_days	Num	8	Date of Visit: converted to Days (in relation to randomization)
4	blindboth_qwbs	Num	8	pL15: A1. Blindness or severely impaired vision in both eyes?
5	blndone_qwbs	Num	8	pL15: A2. Blindness or severely impaired vision in only one eye?
6	spchprob_qwbs	Num	8	pL15: A3. Speech problems such as stuttering or being unable to speak clearly?
7	misshfal_qwbs	Num	8	pL15: A4. Missing or paralyzed hands, feet, arms, or legs?
8	missft_qwbs	Num	8	pL15: A5. Missing or paralyzed fingers or toes?
9	deformty_qwbs	Num	8	pL15: A6. Any deformity of the face, fingers, hand or arm, foot or leg, or back (e.g. severe scoliosis?)
10	fatigue_qwbs	Num	8	pL15: A7. General fatigue, tiredness, or weakness?
11	wtgnls_qwbs	Num	8	pL15: A8. A problem with unwanted weight gain or weight loss?
12	unovwt_qwbs	Num	8	pL15: A9. A problem with being under or over weight?
13	chewprob_qwbs	Num	8	pL15: A10. Problems chewing your food adequately?
14	hearloss_qwbs	Num	8	pL15: A11. Any hearing loss or deafness?
15	skinprob_qwbs	Num	8	pL15: A12. Any noticeable skin problems, such as bad acne or large burns or scars on face, body, arms, or legs?
16	eczema_qwbs	Num	8	pL15: A13. Eczema or burning/itching rash?
17	dentures_qwbs	Num	8	pL15: B1. Dentures?
18	oxygentk_qwbs	Num	8	pL15: B2. Oxygen tank?
19	prosthss_qwbs	Num	8	pL15: B3. Prosthesis?
20	glasses_qwbs	Num	8	pL15: B4. Eye glasses or contact lenses?
21	hearaide_qwbs	Num	8	pL15: B5. Hearing aide?
22	magglass_qwbs	Num	8	pL15: B6. Magnifying glass?
23	brace_qwbs	Num	8	pL15: B7. Neck, back, or leg brace?
24	visprob0_qwbs	Num	8	pL15: C1. Any problems with your vision not corrected with glasses or contact lenses (such as double vision, distorted vision, flashes, or floaters)? No Days
25	visprob1_qwbs	Num	8	pL15: C1. Any problems with your vision not corrected with glasses or contact lenses (such as double vision, distorted vision, flashes, or floaters)? 1 day ago
26	visprob2_qwbs	Num	8	pL15: C1. Any problems with your vision not corrected with glasses or contact lenses (such as double vision, distorted vision, flashes, or floaters)? 2 days ago
27	visprob3_qwbs	Num	8	pL15: C1. Any problems with your vision not corrected with glasses or contact lenses (such as double vision, distorted vision, flashes, or floaters)? 3 days ago
28	eyepain0_qwbs	Num	8	pL15: C2. Any eye pain, irritation, discharge, or excessive sensitivity to light? No Days
29	eyepain1_qwbs	Num	8	pL15: C2. Any eye pain, irritation, discharge, or excessive sensitivity to light? 1 day ago
30	eyepain2_qwbs	Num	8	pL15: C2. Any eye pain, irritation, discharge, or excessive sensitivity to light? 2 days ago
31	eyepain3_qwbs	Num	8	pL15: C2. Any eye pain, irritation, discharge, or excessive sensitivity to light? 3 days ago
32	hdache0_qwbs	Num	8	pL15: C3. A headache? No Days
33	hdache1_qwbs	Num	8	pL15: C3. A headache? 1 day ago

Num	Variable	Type	Len	Label
34	hdache2_qwbs	Num	8	pL15: C3. A headache? 2 days ago
35	hdache3_qwbs	Num	8	pL15: C3. A headache? 3 days ago
36	earache0_qwbs	Num	8	pL15: C4. Dizziness, earache, or ringing in your ears? No Days
37	earache1_qwbs	Num	8	pL15: C4. Dizziness, earache, or ringing in your ears? 1 day ago
38	earache2_qwbs	Num	8	pL15: C4. Dizziness, earache, or ringing in your ears? 2 days ago
39	earache3_qwbs	Num	8	pL15: C4. Dizziness, earache, or ringing in your ears? 3 days ago
40	dffhear0_qwbs	Num	8	pL15: C5. Difficulty hearing or discharge, or bleeding from an ear? No Days
41	dffhear1_qwbs	Num	8	pL15: C5. Difficulty hearing or discharge, or bleeding from an ear? 1 day ago
42	dffhear2_qwbs	Num	8	pL15: C5. Difficulty hearing or discharge, or bleeding from an ear? 2 days ago
43	dffhear3_qwbs	Num	8	pL15: C5. Difficulty hearing or discharge, or bleeding from an ear? 3 days ago
44	nose0_qwbs	Num	8	pL15: C6. Stuffy or runny nose or bleeding from the nose? No Days
45	nose1_qwbs	Num	8	pL15: C6. Stuffy or runny nose or bleeding from the nose? 1 day ago
46	nose2_qwbs	Num	8	pL15: C6. Stuffy or runny nose or bleeding from the nose? 2 days ago
47	nose3_qwbs	Num	8	pL15: C6. Stuffy or runny nose or bleeding from the nose? 3 days ago
48	soretht0_qwbs	Num	8	pL15: C7. A sore throat, difficulty swallowing, or hoarse voice? No Days
49	soretht1_qwbs	Num	8	pL15: C7. A sore throat, difficulty swallowing, or hoarse voice? 1 day ago
50	soretht2_qwbs	Num	8	pL15: C7. A sore throat, difficulty swallowing, or hoarse voice? 2 days ago
51	soretht3_qwbs	Num	8	pL15: C7. A sore throat, difficulty swallowing, or hoarse voice? 3 days ago
52	tthache0_qwbs	Num	8	pL15: C8. A tooth ache or jaw pain? No Days
53	tthache1_qwbs	Num	8	pL15: C8. A tooth ache or jaw pain? 1 day ago
54	tthache2_qwbs	Num	8	pL15: C8. A tooth ache or jaw pain? 2 days ago
55	tthache3_qwbs	Num	8	pL15: C8. A tooth ache or jaw pain? 3 days ago
56	sorelip0_qwbs	Num	8	pL15: C9. Sore or bleeding lips, tongue or gums? No Days
57	sorelip1_qwbs	Num	8	pL15: C9. Sore or bleeding lips, tongue or gums? 1 day ago
58	sorelip2_qwbs	Num	8	pL15: C9. Sore or bleeding lips, tongue or gums? 2 days ago
59	sorelip3_qwbs	Num	8	pL15: C9. Sore or bleeding lips, tongue or gums? 3 days ago
60	cough0_qwbs	Num	8	pL15: C10. Coughing or wheezing? No Days
61	cough1_qwbs	Num	8	pL15: C10. Coughing or wheezing? 1 day ago
62	cough2_qwbs	Num	8	pL15: C10. Coughing or wheezing? 2 days ago
63	cough3_qwbs	Num	8	pL15: C10. Coughing or wheezing? 3 days ago
64	dffbrth0_qwbs	Num	8	pL15: C11. Shortness of breath or difficulty breathing? No Days
65	dffbrth1_qwbs	Num	8	pL15: C11. Shortness of breath or difficulty breathing? 1 day ago
66	dffbrth2_qwbs	Num	8	pL15: C11. Shortness of breath or difficulty breathing? 2 days ago
67	dffbrth3_qwbs	Num	8	pL15: C11. Shortness of breath or difficulty breathing? 3 days ago
68	chestds0_qwbs	Num	8	pL15: C12. Chest pain, pressure, palpitations, fast or skipped heart beat, or other discomfort in the chest? No Days
69	chestds1_qwbs	Num	8	pL15: C12. Chest pain, pressure, palpitations, fast or skipped heart beat, or other discomfort in the chest? 1 day ago
70	chestds2_qwbs	Num	8	pL15: C12. Chest pain, pressure, palpitations, fast or skipped heart beat, or other discomfort in the chest? 2 days ago

Num	Variable	Type	Len	Label
71	chestds3_qwbs	Num	8	pL15: C12. Chest pain, pressure, palpitations, fast or skipped heart beat, or other discomfort in the chest? 3 days ago
72	upsstom0_qwbs	Num	8	pL15: C13. An upset stomach, abdominal pain, nausea, heartburn, or vomiting? No Days
73	upsstom1_qwbs	Num	8	pL15: C13. An upset stomach, abdominal pain, nausea, heartburn, or vomiting? 1 day ago
74	upsstom2_qwbs	Num	8	pL15: C13. An upset stomach, abdominal pain, nausea, heartburn, or vomiting? 2 days ago
75	upsstom3_qwbs	Num	8	pL15: C13. An upset stomach, abdominal pain, nausea, heartburn, or vomiting? 3 days ago
76	bowel0_qwbs	Num	8	pL15: C14. Difficulty with bowel movements, diarrhea, constipation, rectal bleeding, black tar-like stools, or any pain or discomfort in the rectal area? No Days
77	bowel1_qwbs	Num	8	pL15: C14. Difficulty with bowel movements, diarrhea, constipation, rectal bleeding, black tar-like stools, or any pain or discomfort in the rectal area? 1 day ago
78	bowel2_qwbs	Num	8	pL15: C14. Difficulty with bowel movements, diarrhea, constipation, rectal bleeding, black tar-like stools, or any pain or discomfort in the rectal area? 2 days ago
79	bowel3_qwbs	Num	8	pL15: C14. Difficulty with bowel movements, diarrhea, constipation, rectal bleeding, black tar-like stools, or any pain or discomfort in the rectal area? 3 days ago
80	urine0_qwbs	Num	8	pL15: C15. Pain, burning, or blood in urine? No Days
81	urine1_qwbs	Num	8	pL15: C15. Pain, burning, or blood in urine? 1 day ago
82	urine2_qwbs	Num	8	pL15: C15. Pain, burning, or blood in urine? 2 days ago
83	urine3_qwbs	Num	8	pL15: C15. Pain, burning, or blood in urine? 3 days ago
84	bladder0_qwbs	Num	8	pL15: C16. Loss of bladder control, frequent night-time urination, or difficulty with urination? No Days
85	bladder1_qwbs	Num	8	pL15: C16. Loss of bladder control, frequent night-time urination, or difficulty with urination? 1 day ago
86	bladder2_qwbs	Num	8	pL15: C16. Loss of bladder control, frequent night-time urination, or difficulty with urination? 2 days ago
87	bladder3_qwbs	Num	8	pL15: C16. Loss of bladder control, frequent night-time urination, or difficulty with urination? 3 days ago
88	gnpain0_qwbs	Num	8	pL15: C17. Genital pain, itching, burning, abnormal discharge, pelvic cramping, or abnormal bleeding (does not include normal menstruation)? No Days
89	gnpain1_qwbs	Num	8	pL15: C17. Genital pain, itching, burning, abnormal discharge, pelvic cramping, or abnormal bleeding (does not include normal menstruation)? 1 day ago
90	gnpain2_qwbs	Num	8	pL15: C17. Genital pain, itching, burning, abnormal discharge, pelvic cramping, or abnormal bleeding (does not include normal menstruation)? 2 days ago
91	gnpain3_qwbs	Num	8	pL15: C17. Genital pain, itching, burning, abnormal discharge, pelvic cramping, or abnormal bleeding (does not include normal menstruation)? 3 days ago
92	brkbone0_qwbs	Num	8	pL15: C18. A broken arm, wrist, foot, leg, or any other broken bone (other than in back)? No Days
93	brkbone1_qwbs	Num	8	pL15: C18. A broken arm, wrist, foot, leg, or any other broken bone (other than in back)? 1 day ago
94	brkbone2_qwbs	Num	8	pL15: C18. A broken arm, wrist, foot, leg, or any other broken bone (other than in back)? 2 days ago
95	brkbone3_qwbs	Num	8	pL15: C18. A broken arm, wrist, foot, leg, or any other broken bone (other than in back)? 3 days ago
96	swellng0_qwbs	Num	8	pL15: C19. Swelling of ankles, hands, feet, or abdomen? No Days
97	swellng1_qwbs	Num	8	pL15: C19. Swelling of ankles, hands, feet, or abdomen? 1 day ago
98	swellng2_qwbs	Num	8	pL15: C19. Swelling of ankles, hands, feet, or abdomen? 2 days ago
99	swellng3_qwbs	Num	8	pL15: C19. Swelling of ankles, hands, feet, or abdomen? 3 days ago
100	fever0_qwbs	Num	8	pL15: C20. Fever, chills, or sweats? No Days

Num	Variable	Type	Len	Label
101	fever1_qwbs	Num	8	pL15: C20. Fever, chills, or sweats? 1 day ago
102	fever2_qwbs	Num	8	pL15: C20. Fever, chills, or sweats? 2 days ago
103	fever3_qwbs	Num	8	pL15: C20. Fever, chills, or sweats? 3 days ago
104	losscon0_qwbs	Num	8	pL15: C21. Loss of consciousness, fainting, or seizures? No Days
105	losscon1_qwbs	Num	8	pL15: C21. Loss of consciousness, fainting, or seizures? 1 day ago
106	losscon2_qwbs	Num	8	pL15: C21. Loss of consciousness, fainting, or seizures? 2 days ago
107	losscon3_qwbs	Num	8	pL15: C21. Loss of consciousness, fainting, or seizures? 3 days ago
108	backpn0_qwbs	Num	8	pL15: C22. Pain, stiffness, cramps, weakness, or numbness in the neck or back? No Days
109	backpn1_qwbs	Num	8	pL15: C22. Pain, stiffness, cramps, weakness, or numbness in the neck or back? 1 day ago
110	backpn2_qwbs	Num	8	pL15: C22. Pain, stiffness, cramps, weakness, or numbness in the neck or back? 2 days ago
111	backpn3_qwbs	Num	8	pL15: C22. Pain, stiffness, cramps, weakness, or numbness in the neck or back? 3 days ago
112	hippain0_qwbs	Num	8	pL15: C23. Pain, stiffness, cramps, weakness, or numbness in the hip or sides? No Days
113	hippain1_qwbs	Num	8	pL15: C23. Pain, stiffness, cramps, weakness, or numbness in the hip or sides? 1 day ago
114	hippain2_qwbs	Num	8	pL15: C23. Pain, stiffness, cramps, weakness, or numbness in the hip or sides? 2 days ago
115	hippain3_qwbs	Num	8	pL15: C23. Pain, stiffness, cramps, weakness, or numbness in the hip or sides? 3 days ago
116	jointpn0_qwbs	Num	8	pL15: C24. Pain, stiffness, cramps, weakness, or numbness in any of the joints or muscles of the hand, feet, arms, or legs? No Days
117	jointpn1_qwbs	Num	8	pL15: C24. Pain, stiffness, cramps, weakness, or numbness in any of the joints or muscles of the hand, feet, arms, or legs? 1 day ago
118	jointpn2_qwbs	Num	8	pL15: C24. Pain, stiffness, cramps, weakness, or numbness in any of the joints or muscles of the hand, feet, arms, or legs? 2 days ago
119	jointpn3_qwbs	Num	8	pL15: C24. Pain, stiffness, cramps, weakness, or numbness in any of the joints or muscles of the hand, feet, arms, or legs? 3 days ago
120	diffbal0_qwbs	Num	8	pL15: C25. Difficulty with your balance, standing or walking? No Days
121	diffbal1_qwbs	Num	8	pL15: C25. Difficulty with your balance, standing or walking? 1 day ago
122	diffbal2_qwbs	Num	8	pL15: C25. Difficulty with your balance, standing or walking? 2 days ago
123	diffbal3_qwbs	Num	8	pL15: C25. Difficulty with your balance, standing or walking? 3 days ago
124	sleep0_qwbs	Num	8	pL15: D26. Trouble falling asleep or staying asleep? No Days
125	sleep1_qwbs	Num	8	pL15: D26. Trouble falling asleep or staying asleep? 1 day ago
126	sleep2_qwbs	Num	8	pL15: D26. Trouble falling asleep or staying asleep? 2 days ago
127	sleep3_qwbs	Num	8	pL15: D26. Trouble falling asleep or staying asleep? 3 days ago
128	nervous0_qwbs	Num	8	pL15: D27. Spells of feeling nervous or shaky? No Days
129	nervous1_qwbs	Num	8	pL15: D27. Spells of feeling nervous or shaky? 1 day ago
130	nervous2_qwbs	Num	8	pL15: D27. Spells of feeling nervous or shaky? 2 days ago
131	nervous3_qwbs	Num	8	pL15: D27. Spells of feeling nervous or shaky? 3 days ago
132	upset0_qwbs	Num	8	pL15: D28. Spells of feeling upset, downhearted, or blue? No Days
133	upset1_qwbs	Num	8	pL15: D28. Spells of feeling upset, downhearted, or blue? 1 day ago
134	upset2_qwbs	Num	8	pL15: D28. Spells of feeling upset, downhearted, or blue? 2 days ago
135	upset3_qwbs	Num	8	pL15: D28. Spells of feeling upset, downhearted, or blue? 3 days ago
136	worry0_qwbs	Num	8	pL15: D29. Excessive worry or anxiety? No Days

Num	Variable	Type	Len	Label
137	worry1_qwbs	Num	8	pL15: D29. Excessive worry or anxiety? 1 day ago
138	worry2_qwbs	Num	8	pL15: D29. Excessive worry or anxiety? 2 days ago
139	worry3_qwbs	Num	8	pL15: D29. Excessive worry or anxiety? 3 days ago
140	lossctl0_qwbs	Num	8	pL15: D30. Feelings that you had little or no control over events in your life? No Days
141	lossctl1_qwbs	Num	8	pL15: D30. Feelings that you had little or no control over events in your life? 1 day ago
142	lossctl2_qwbs	Num	8	pL15: D30. Feelings that you had little or no control over events in your life? 2 days ago
143	lossctl3_qwbs	Num	8	pL15: D30. Feelings that you had little or no control over events in your life? 3 days ago
144	lonely0_qwbs	Num	8	pL15: D31. Feelings of being lonely or isolated? No Days
145	lonely1_qwbs	Num	8	pL15: D31. Feelings of being lonely or isolated? 1 day ago
146	lonely2_qwbs	Num	8	pL15: D31. Feelings of being lonely or isolated? 2 days ago
147	lonely3_qwbs	Num	8	pL15: D31. Feelings of being lonely or isolated? 3 days ago
148	frust0_qwbs	Num	8	pL15: D32. Feelings of frustration, irritation, or close to losing your temper? No Days
149	frust1_qwbs	Num	8	pL15: D32. Feelings of frustration, irritation, or close to losing your temper? 1 day ago
150	frust2_qwbs	Num	8	pL15: D32. Feelings of frustration, irritation, or close to losing your temper? 2 days ago
151	frust3_qwbs	Num	8	pL15: D32. Feelings of frustration, irritation, or close to losing your temper? 3 days ago
152	hangovr0_qwbs	Num	8	pL15: D33. A hangover? No Days
153	hangovr1_qwbs	Num	8	pL15: D33. A hangover? 1 day ago
154	hangovr2_qwbs	Num	8	pL15: D33. A hangover? 2 days ago
155	hangovr3_qwbs	Num	8	pL15: D33. A hangover? 3 days ago
156	dcxsint0_qwbs	Num	8	pL15: D34. Any decrease of sexual interest or performance? No Days
157	dcxsint1_qwbs	Num	8	pL15: D34. Any decrease of sexual interest or performance? 1 day ago
158	dcxsint2_qwbs	Num	8	pL15: D34. Any decrease of sexual interest or performance? 2 days ago
159	dcxsint3_qwbs	Num	8	pL15: D34. Any decrease of sexual interest or performance? 3 days ago
160	confusn0_qwbs	Num	8	pL15: D35. Confusion, difficulty understanding the written or spoken word, or significant memory loss? No Days
161	confusn1_qwbs	Num	8	pL15: D35. Confusion, difficulty understanding the written or spoken word, or significant memory loss? 1 day ago
162	confusn2_qwbs	Num	8	pL15: D35. Confusion, difficulty understanding the written or spoken word, or significant memory loss? 2 days ago
163	confusn3_qwbs	Num	8	pL15: D35. Confusion, difficulty understanding the written or spoken word, or significant memory loss? 3 days ago
164	thtimg0_qwbs	Num	8	pL15: D36. Thoughts or images you could not get out of your mind? No Days
165	thtimg1_qwbs	Num	8	pL15: D36. Thoughts or images you could not get out of your mind? 1 day ago
166	thtimg2_qwbs	Num	8	pL15: D36. Thoughts or images you could not get out of your mind? 2 days ago
167	thtimg3_qwbs	Num	8	pL15: D36. Thoughts or images you could not get out of your mind? 3 days ago
168	meds0_qwbs	Num	8	pL15: D37. To take any medication including over-the-counter remedies (aspirin/Tylenol, allergy medications, insulin, hormones, estrogen, thyroid, prednisone)? No Days
169	meds1_qwbs	Num	8	pL15: D37. To take any medication including over-the-counter remedies (aspirin/Tylenol, allergy medications, insulin, hormones, estrogen, thyroid, prednisone)? 1 day ago
170	meds2_qwbs	Num	8	pL15: D37. To take any medication including over-the-counter remedies (aspirin/Tylenol, allergy medications, insulin, hormones, estrogen, thyroid, prednisone)? 2 days ago

Num	Variable	Type	Len	Label
171	meds3_qwbs	Num	8	pL15: D37. To take any medication including over-the-counter remedies (aspirin/Tylenol, allergy medications, insulin, hormones, estrogen, thyroid, prednisone)? 3 days ago
172	diet0_qwbs	Num	8	pL15: D38. To stay on a medically prescribed diet for health reasons? No Days
173	diet1_qwbs	Num	8	pL15: D38. To stay on a medically prescribed diet for health reasons? 1 day ago
174	diet2_qwbs	Num	8	pL15: D38. To stay on a medically prescribed diet for health reasons? 2 days ago
175	diet3_qwbs	Num	8	pL15: D38. To stay on a medically prescribed diet for health reasons? 3 days ago
176	lossapp0_qwbs	Num	8	pL15: D39. A loss of appetite or over-eating? No Days
177	lossapp1_qwbs	Num	8	pL15: D39. A loss of appetite or over-eating? 1 day ago
178	lossapp2_qwbs	Num	8	pL15: D39. A loss of appetite or over-eating? 2 days ago
179	lossapp3_qwbs	Num	8	pL15: D39. A loss of appetite or over-eating? 3 days ago
180	hospitl0_qwbs	Num	8	pL15: (Self Care)1. Did you spend any part of the day or night as a patient in a hospital, nursing home, or rehabilitation center? No Days
181	hospitl1_qwbs	Num	8	pL15: (Self Care)1. Did you spend any part of the day or night as a patient in a hospital, nursing home, or rehabilitation center? 1 day ago
182	hospitl2_qwbs	Num	8	pL15: (Self Care)1. Did you spend any part of the day or night as a patient in a hospital, nursing home, or rehabilitation center? 2 days ago
183	hospitl3_qwbs	Num	8	pL15: (Self Care)1. Did you spend any part of the day or night as a patient in a hospital, nursing home, or rehabilitation center? 3 days ago
184	prscare0_qwbs	Num	8	pL15: (Self Care)2. Because of any impairment or health problem did you need help with your personal care needs, such as eating, dressing, bathing, or getting around your home? No Days
185	prscare1_qwbs	Num	8	pL15: (Self Care)2. Because of any impairment or health problem did you need help with your personal care needs, such as eating, dressing, bathing, or getting around your home? 1 day ago
186	prscare2_qwbs	Num	8	pL15: (Self Care)2. Because of any impairment or health problem did you need help with your personal care needs, such as eating, dressing, bathing, or getting around your home? 2 days ago
187	prscare3_qwbs	Num	8	pL15: (Self Care)2. Because of any impairment or health problem did you need help with your personal care needs, such as eating, dressing, bathing, or getting around your home? 3 days ago
188	motorvh0_qwbs	Num	8	pL15: (Mobility)1. Which days did you drive a motor vehicle? No Days
189	motorvh1_qwbs	Num	8	pL15: (Mobility)1. Which days did you drive a motor vehicle? 1 day ago
190	motorvh2_qwbs	Num	8	pL15: (Mobility)1. Which days did you drive a motor vehicle? 2 days ago
191	motorvh3_qwbs	Num	8	pL15: (Mobility)1. Which days did you drive a motor vehicle? 3 days ago
192	pubtran0_qwbs	Num	8	pL15: (Mobility)2. Which days did you use public transportation such as a bus, subway, Medi-van, train, or airplane? No Days
193	pubtran1_qwbs	Num	8	pL15: (Mobility)2. Which days did you use public transportation such as a bus, subway, Medi-van, train, or airplane? 1 day ago
194	pubtran2_qwbs	Num	8	pL15: (Mobility)2. Which days did you use public transportation such as a bus, subway, Medi-van, train, or airplane? 2 days ago
195	pubtran3_qwbs	Num	8	pL15: (Mobility)2. Which days did you use public transportation such as a bus, subway, Medi-van, train, or airplane? 3 days ago
196	notrans0_qwbs	Num	8	pL15: (Mobility)3. Which days did you either not drive a motor vehicle or not use public transportation because of your health or need help from another person to use? No Days
197	notrans1_qwbs	Num	8	pL15: (Mobility)3. Which days did you either not drive a motor vehicle or not use public transportation because of your health or need help from another person to use? 1 day ago
198	notrans2_qwbs	Num	8	pL15: (Mobility)3. Which days did you either not drive a motor vehicle or not use public transportation because of your health or need help from another person to use? 2 days ago

Num	Variable	Type	Len	Label
199	notrans3_qwbs	Num	8	pL15: (Mobility)3. Which days did you either not drive a motor vehicle or not use public transportation because of your health or need help from another person to use? 3 days ago
200	stairs0_qwbs	Num	8	pL15: (Physical Activity)1. Have trouble climbing stairs or inclines or walking off the curb? No Days
201	stairs1_qwbs	Num	8	pL15: (Physical Activity)1. Have trouble climbing stairs or inclines or walking off the curb? 1 day ago
202	stairs2_qwbs	Num	8	pL15: (Physical Activity)1. Have trouble climbing stairs or inclines or walking off the curb? 2 days ago
203	stairs3_qwbs	Num	8	pL15: (Physical Activity)1. Have trouble climbing stairs or inclines or walking off the curb? 3 days ago
204	trbwalk0_qwbs	Num	8	pL15: (Physical Activity)2. Avoid walking, have trouble walking, or walk more slowly than other people your age? No Days
205	trbwalk1_qwbs	Num	8	pL15: (Physical Activity)2. Avoid walking, have trouble walking, or walk more slowly than other people your age? 1 day ago
206	trbwalk2_qwbs	Num	8	pL15: (Physical Activity)2. Avoid walking, have trouble walking, or walk more slowly than other people your age? 2 days ago
207	trbwalk3_qwbs	Num	8	pL15: (Physical Activity)2. Avoid walking, have trouble walking, or walk more slowly than other people your age? 3 days ago
208	walkaid0_qwbs	Num	8	pL15: (Physical Activity)3. Limp or use a cane, crutches, or walker? No Days
209	walkaid1_qwbs	Num	8	pL15: (Physical Activity)3. Limp or use a cane, crutches, or walker? 1 day ago
210	walkaid2_qwbs	Num	8	pL15: (Physical Activity)3. Limp or use a cane, crutches, or walker? 2 days ago
211	walkaid3_qwbs	Num	8	pL15: (Physical Activity)3. Limp or use a cane, crutches, or walker? 3 days ago
212	trbbend0_qwbs	Num	8	pL15: (Physical Activity)4. Avoid or have trouble bending over, stooping or kneeling? No Days
213	trbbend1_qwbs	Num	8	pL15: (Physical Activity)4. Avoid or have trouble bending over, stooping or kneeling? 1 day ago
214	trbbend2_qwbs	Num	8	pL15: (Physical Activity)4. Avoid or have trouble bending over, stooping or kneeling? 2 days ago
215	trbbend3_qwbs	Num	8	pL15: (Physical Activity)4. Avoid or have trouble bending over, stooping or kneeling? 3 days ago
216	trblift0_qwbs	Num	8	pL15: (Physical Activity)5. Have any trouble lifting or carrying everyday objects such as books, a briefcase, or groceries? No Days
217	trblift1_qwbs	Num	8	pL15: (Physical Activity)5. Have any trouble lifting or carrying everyday objects such as books, a briefcase, or groceries? 1 day ago
218	trblift2_qwbs	Num	8	pL15: (Physical Activity)5. Have any trouble lifting or carrying everyday objects such as books, a briefcase, or groceries? 2 days ago
219	trblift3_qwbs	Num	8	pL15: (Physical Activity)5. Have any trouble lifting or carrying everyday objects such as books, a briefcase, or groceries? 3 days ago
220	othlim0_qwbs	Num	8	pL15: (Physical Activity)6. Have any other limitations in physical movements? No Days
221	othlim1_qwbs	Num	8	pL15: (Physical Activity)6. Have any other limitations in physical movements? 1 day ago
222	othlim2_qwbs	Num	8	pL15: (Physical Activity)6. Have any other limitations in physical movements? 2 days ago
223	othlim3_qwbs	Num	8	pL15: (Physical Activity)6. Have any other limitations in physical movements? 3 days ago
224	bedchr0_qwbs	Num	8	pL15: (Physical Activity)7. Spend all or most of the day in a bed, chair, or couch because of health reasons? No Days
225	bedchr1_qwbs	Num	8	pL15: (Physical Activity)7. Spend all or most of the day in a bed, chair, or couch because of health reasons? 1 day ago
226	bedchr2_qwbs	Num	8	pL15: (Physical Activity)7. Spend all or most of the day in a bed, chair, or couch because of health reasons? 2 days ago

Num	Variable	Type	Len	Label
227	bedchr3_qwbs	Num	8	pL15: (Physical Activity)7. Spend all or most of the day in a bed, chair, or couch because of health reasons? 3 days ago
228	whlchr0_qwbs	Num	8	pL15: (Physical Activity)8. Spend all or most of the day in a wheelchair? No Days
229	whlchr1_qwbs	Num	8	pL15: (Physical Activity)8. Spend all or most of the day in a wheelchair? 1 day ago
230	whlchr2_qwbs	Num	8	pL15: (Physical Activity)8. Spend all or most of the day in a wheelchair? 2 days ago
231	whlchr3_qwbs	Num	8	pL15: (Physical Activity)8. Spend all or most of the day in a wheelchair? 3 days ago
232	ctrlwc0_qwbs	Num	8	pL15: (Physical Activity)9. If you spent all or most of the day in a wheelchair, on which days did someone else control its movement? No Days
233	ctrlwc1_qwbs	Num	8	pL15: (Physical Activity)9. If you spent all or most of the day in a wheelchair, on which days did someone else control its movement? 1 day ago
234	ctrlwc2_qwbs	Num	8	pL15: (Physical Activity)9. If you spent all or most of the day in a wheelchair, on which days did someone else control its movement? 2 days ago
235	ctrlwc3_qwbs	Num	8	pL15: (Physical Activity)9. If you spent all or most of the day in a wheelchair, on which days did someone else control its movement? 3 days ago
236	trbwork0_qwbs	Num	8	pL15: (Usual Activity)1. Because of any physical or emotional health reasons, on which days did you avoid, need help with, or were limited in doing some of your usual activities, such as work, school, or housekeeping? No Days
237	trbwork1_qwbs	Num	8	pL15: (Usual Activity)1. Because of any physical or emotional health reasons, on which days did you avoid, need help with, or were limited in doing some of your usual activities, such as work, school, or housekeeping? 1 day ago
238	trbwork2_qwbs	Num	8	pL15: (Usual Activity)1. Because of any physical or emotional health reasons, on which days did you avoid, need help with, or were limited in doing some of your usual activities, such as work, school, or housekeeping? 2 days ago
239	trbwork3_qwbs	Num	8	pL15: (Usual Activity)1. Because of any physical or emotional health reasons, on which days did you avoid, need help with, or were limited in doing some of your usual activities, such as work, school, or housekeeping? 3 days ago
240	trbrec0_qwbs	Num	8	pL15: (Usual Activity)2. Because of physical/emotional health reasons, on which days did you avoid or feel limited in doing some of your usual activities, such as visiting family/friends, hobbies, shopping, recreational, or religious activities? No Days
241	trbrec1_qwbs	Num	8	pL15: (Usual Activity)2. Because of physical/emotional health reasons, on which days did you avoid or feel limited in doing some of your usual activities, such as visiting family/friends, hobbies, shopping, recreational, or religious activities? 1 day ago
242	trbrec2_qwbs	Num	8	pL15: (Usual Activity)2. Because of physical/emotional health reasons, on which days did you avoid or feel limited in doing some of your usual activities, such as visiting family/friends, hobbies, shopping, recreational, or religious activities? 2 days ago
243	trbrec3_qwbs	Num	8	pL15: (Usual Activity)2. Because of physical/emotional health reasons, on which days did you avoid or feel limited in doing some of your usual activities, such as visiting family/friends, hobbies, shopping, recreational, or religious activities? 3 days ago
244	chpln0_qwbs	Num	8	pL15: (Usual Activity)3. On which days did you have to change any of your plans or activities because of your health that you did not report on the previous two questions? No Days
245	chpln1_qwbs	Num	8	pL15: (Usual Activity)3. On which days did you have to change any of your plans or activities because of your health that you did not report on the previous two questions? 1 day ago
246	chpln2_qwbs	Num	8	pL15: (Usual Activity)3. On which days did you have to change any of your plans or activities because of your health that you did not report on the previous two questions? 2 days ago
247	chpln3_qwbs	Num	8	pL15: (Usual Activity)3. On which days did you have to change any of your plans or activities because of your health that you did not report on the previous two questions? 3 days ago
248	hlthrtng_qwbs	Num	8	pL15: (General Health)1. Would you say that your health is

Num	Variable	Type	Len	Label
249	hlthcomp_qwbs	Num	8	pL15: (General Health)2. Compared to a year ago, how would you rate your health in general now?
250	sthlth_qwbs	Num	8	pL15: (General Health)3. Think about a scale of 0 to 100, with zero being the least desirable state of health that you could imagine and 100 being perfect health. Rate state of your health, on average, over the past 3 days
251	total_QWB	Num	8	[C] pL15: Quality Well-being: Total Score

Data Set Name: *pl16_healthcareutil.sas7bdat*

Num	Variable	Type	Len	Label
1	pMaskID	Num	8	LIFE PILOT Participant Identifier
2	vc	Char	4	Visit Code
3	vis_days	Num	8	Date of Visit: converted to Days (in relation to randomization)
4	vishcp_hcuq	Char	100	pL16: 1. How many visits did you make to a physician, osteropath, or nurse prectitioner (past 3 mon)?
5	callshcp_hcuq	Char	100	pL16: 2. How many telephone calls did you make to your doctor or your doctor's staff (past 3 mon)?
6	erugcr_hcuq	Char	100	pL16: 3. How many times did you use a triage or urgent care center or emergency room (past 3 mon)?
7	vishmhcp_hcuq	Char	100	pL16: 4. How many visits did you have from a health care provider who came to your home (e.g. home health agency, nurse, physical or occupational therapist) (past 3 mon)?
8	dayshosp_hcuq	Char	100	pL16: 5. How many days were you in a hospical as an inpatient (past 3 mon)?
9	outpproc_hcuq	Char	100	pL16: 6. How many times did you have outpatient surgery or another procedure where you did not stay in the hospital overnight (past 3 mon)?
10	daysnrhm_hcuq	Char	100	pL16: 7. How many days were you in a nursing home as a resident (past 3 mon)?
11	medsupps_hcuq	Num	8	pL16: 8. Did you regularly use any medical supplies or equipment (past 3 mon)?
12	numprmed_hcuq	Char	100	pL16: 9. How many prescription medicines (including inhalers) do you take regularly (Include the total number of medications, not the number of pills/doses per day) (past 3 mon)?
13	numnpmed_hcuq	Char	100	pL16: 10. How many non-prescription medicines (including vitamins) do you take regularly (Include the total number of medications, not the number of pills/doses per day) (past 3 mon)?
14	ambulnc_hcuq	Char	100	pL16: 11. How many times did you use an ambulance (past 3 mon)?
15	call911_hcuq	Char	100	pL16: 11a. How many of these ambulance trips resulted from you calling 911 for emergency (past 3 mon)?
16	othmdex_hcuq	Num	8	pL16: 12. Did you have any other major medical expense during the past 3 months that has not been mentioned (past 3 mon)?

Data Set Name: *pl17_champs.sas7bdat*

Num	Variable	Type	Len	Label
1	pMaskID	Num	8	LIFE PILOT Participant Identifier
2	vc	Char	4	Visit Code
3	vis_days	Num	8	Date of Visit: converted to Days (in relation to randomization)
4	visit_chmp	Num	8	pL17: 1. Visit with friends or family? (other than those you live with) (typical week, past 4wks)
5	visittm_chmp	Num	8	pL17: 1. Visit (times/wk) (typical week, past 4wks)
6	visithr_chmp	Num	8	pL17: 1. Visit (hrs/wk) (typical week, past 4wks)
7	senctr_chmp	Num	8	pL17: 2. Go to the senior center? (typical week, past 4wks)
8	senctrtm_chmp	Num	8	pL17: 2. Senior center (times/wk) (typical week, past 4wks)
9	senctrhr_chmp	Num	8	pL17: 2. Senior center (hrs/wk) (typical week, past 4wks)
10	volwrk_chmp	Num	8	pL17: 3. Do volunteer work? (typical week, past 4wks)
11	volwrktm_chmp	Num	8	pL17: 3. Volunteer (times/wk) (typical week, past 4wks)
12	volwrkhr_chmp	Num	8	pL17: 3. Volunteer (hrs/wk) (typical week, past 4wks) (typical week, past 4wks)
13	church_chmp	Num	8	pL17: 4. Attend church or take part in church activities?
14	churchtm_chmp	Num	8	pL17: 4. Church (times/wk) (typical week, past 4wks)
15	churchhr_chmp	Num	8	pL17: 4. Church (hrs/wk) (typical week, past 4wks)
16	clubs_chmp	Num	8	pL17: 5. Attend other club or group meetings? (typical week, past 4wks)
17	clubstm_chmp	Num	8	pL17: 5. Club (times/wk) (typical week, past 4wks)
18	clubshr_chmp	Num	8	pL17: 5. Club (hrs/wk) (typical week, past 4wks)
19	comptr_chmp	Num	8	pL17: 6. Use a computer? (typical week, past 4wks)
20	comptrtm_chmp	Num	8	pL17: 6. Computer (times/wk) (typical week, past 4wks)
21	comptrhr_chmp	Num	8	pL17: 6. Computer (hrs/wk) (typical week, past 4wks)
22	dance_chmp	Num	8	pL17: 7. Dance? (such as square, fold, line ballroom)(NOT aerobic dance) (typical week, past 4wks)
23	dancetm_chmp	Num	8	pL17: 7. Dance (times/wk) (typical week, past 4wks)
24	dancehr_chmp	Num	8	pL17: 7. Dance (hrs/wk) (typical week, past 4wks)
25	crafts_chmp	Num	8	pL17: 8. Do woodworking, needlework, drawing, or other arts and crafts? (typical week, past 4wks)
26	craftstm_chmp	Num	8	pL17: 8. Crafts (times/wk) (typical week, past 4wks)
27	craftshr_chmp	Num	8	pL17: 8. Crafts (hrs/wk) (typical week, past 4wks)
28	golfcr_chmp	Num	8	pL17: 9. Play golf, carrying or pulling your equipment? (count walking time only) (typical week, past 4wks)
29	golfertm_chmp	Num	8	pL17: 9. Golf, walking (times/wk) (typical week, past 4wks)
30	golfcrhr_chmp	Num	8	pL17: 9. Golf, walking (hrs/wk) (typical week, past 4wks)
31	golfrd_chmp	Num	8	pL17: 10. Play golf, riding a cart? (count walking time only) (typical week, past 4wks)
32	golfrdtm_chmp	Num	8	pL17: 10. Golf, riding (times/wk) (typical week, past 4wks)
33	golfrdhr_chmp	Num	8	pL17: 10. Golf, riding (hrs/wk) (typical week, past 4wks)
34	concmv_chmp	Num	8	pL17: 11. Attend a concert, movie, lecture, or sport event? (typical week, past 4wks)
35	concmvtm_chmp	Num	8	pL17: 11. Event (times/wk) (typical week, past 4wks)
36	concmvhr_chmp	Num	8	pL17: 11. Event (hrs/wk) (typical week, past 4wks)

Num	Variable	Type	Len	Label
37	games_chmp	Num	8	pL17: 12. Play cards, bingo, or board games with other people? (typical week, past 4wks)
38	gamestm_chmp	Num	8	pL17: 12. Games (times/wk) (typical week, past 4wks)
39	gameshr_chmp	Num	8	pL17: 12. Games (hrs/wk) (typical week, past 4wks)
40	pool_chmp	Num	8	pL17: 13. Shoot pool or billiards? (typical week, past 4wks)
41	pooltm_chmp	Num	8	pL17: 13. Pool (times/wk) (typical week, past 4wks)
42	poolhr_chmp	Num	8	pL17: 13. Pool (hrs/wk) (typical week, past 4wks)
43	sntenn_chmp	Num	8	pL17: 14. Play singles tennis? (do not count doubles) (typical week, past 4wks)
44	sntenntm_chmp	Num	8	pL17: 14. Singles tennis (times/wk) (typical week, past 4wks)
45	sntennhr_chmp	Num	8	pL17: 14. Single tennis (hrs/wk) (typical week, past 4wks)
46	dbtenn_chmp	Num	8	pL17: 15. Play doubles tennis? (do not count singles) (typical week, past 4wks)
47	dbtenntm_chmp	Num	8	pL17: 15. Doubles tennis (times/wk) (typical week, past 4wks)
48	dbtennhr_chmp	Num	8	pL17: 15. Doubles tennis (hrs/wk) (typical week, past 4wks)
49	skate_chmp	Num	8	pL17: 16. Skate? (ice, roller, in-line) (typical week, past 4wks)
50	skatetm_chmp	Num	8	pL17: 16. Skate (times/wk) (typical week, past 4wks)
51	skatehr_chmp	Num	8	pL17: 16. Skate (hrs/wk) (typical week, past 4wks)
52	msinst_chmp	Num	8	pL17: 17. Play a musical instrument? (typical week, past 4wks)
53	msinsttm_chmp	Num	8	pL17: 17. Play music (times/wk) (typical week, past 4wks)
54	msinsthr_chmp	Num	8	pL17: 17. Play music (hrs/wk) (typical week, past 4wks)
55	read_chmp	Num	8	pL17: 18. Read? (typical week, past 4wks)
56	readtm_chmp	Num	8	pL17: 18. Read (times/wk) (typical week, past 4wks)
57	readhr_chmp	Num	8	pL17: 18. Read (hrs/wk) (typical week, past 4wks)
58	hvhwrk_chmp	Num	8	pL17: 19. Do heavy work around the house? (such as washing windows, cleaning gutters) (typical week, past 4wks)
59	hvhwrktm_chmp	Num	8	pL17: 19. Heavy housework (times/wk) (typical week, past 4wks)
60	hvhwrkhr_chmp	Num	8	pL17: 19. Heavy housework (hrs/wk) (typical week, past 4wks)
61	lthwrk_chmp	Num	8	pL17: 20. Do light work around the house? (such as sweeping or vacuuming) (typical week, past 4wks)
62	lthwrktm_chmp	Num	8	pL17: 20. Light housework (times/wk) (typical week, past 4wks)
63	lthwrkhr_chmp	Num	8	pL17: 20. Light housework (hrs/wk) (typical week, past 4wks)
64	hvgard_chmp	Num	8	pL17: 21. Do heavy gardening? (such as spading, raking) (typical week, past 4wks)
65	hvgardtm_chmp	Num	8	pL17: 21. Heavy gardening (times/wk) (typical week, past 4wks)
66	hvgardhr_chmp	Num	8	pL17: 21. Heavy gardening (hrs/wk) (typical week, past 4wks)
67	ltgard_chmp	Num	8	pL17: 22. Do light gardening? (such as watering plants) (typical week, past 4wks)
68	ltgardtm_chmp	Num	8	pL17: 22. Light gardening (times/wk) (typical week, past 4wks)
69	ltgardhr_chmp	Num	8	pL17: 22. Light gardening (hrs/wk) (typical week, past 4wks)
70	wrkcar_chmp	Num	8	pL17: 23. Work on your car, truck, lawn mower, or other machinery? (typical week, past 4wks)
71	wrkcartm_chmp	Num	8	pL17: 23. Work machinery (times/wk) (typical week, past 4wks)
72	wrkcarhr_chmp	Num	8	pL17: 23. Work machinery (hrs/wk) (typical week, past 4wks)
73	jogrun_chmp	Num	8	pL17: 24. Jog or run? (typical week, past 4wks)

Num	Variable	Type	Len	Label
74	jogruntm_chmp	Num	8	pL17: 24. Jog (times/wk) (typical week, past 4wks)
75	jogrunhr_chmp	Num	8	pL17: 24. Jog (hrs/wk) (typical week, past 4wks)
76	walkup_chmp	Num	8	pL17: 25. Walk uphill or hike uphill? (count only uphill part) (typical week, past 4wks)
77	walkuptm_chmp	Num	8	pL17: 25. Hike (times/wk) (typical week, past 4wks)
78	walkuphr_chmp	Num	8	pL17: 25. Hike (hrs/wk) (typical week, past 4wks)
79	walkfs_chmp	Num	8	pL17: 26. Walk fast or briskly for exercise? (do not count walking eisurely or uphill) (typical week, past 4wks)
80	walkfstm_chmp	Num	8	pL17: 26. Walk fast (times/wk) (typical week, past 4wks)
81	walkfshr_chmp	Num	8	pL17: 26. Walk fast (hrs/wk) (typical week, past 4wks)
82	walkrr_chmp	Num	8	pL17: 27. Walk to do errands? [such as to/from a store or to take children to school (count walk time only)] (typical week, past 4wks)
83	walkrrtm_chmp	Num	8	pL17: 27. Walk errands (times/wk) (typical week, past 4wks)
84	walkrrhr_chmp	Num	8	pL17: 27. Walk errands (hrs/wk) (typical week, past 4wks)
85	walkls_chmp	Num	8	pL17: 28. Walk leisurely for exercise or pleasure? (typical week, past 4wks)
86	walklstm_chmp	Num	8	pL17: 28. Walk leisure (times/wk) (typical week, past 4wks)
87	walklshr_chmp	Num	8	pL17: 28. Walk leisure (hrs/wk) (typical week, past 4wks)
88	bicycl_chmp	Num	8	pL17: 29. Ride a bicycle or stationary cycle? (typical week, past 4wks)
89	bicycltm_chmp	Num	8	pL17: 29. Bicycle (times/wk) (typical week, past 4wks)
90	bicyclhr_chmp	Num	8	pL17: 29. Bicycle (hrs/wk) (typical week, past 4wks)
91	aermch_chmp	Num	8	pL17: 30. Do other aerobic machines such as rowing, or step machines? (do not count treadmill or stationary cycle) (typical week, past 4wks)
92	aermchtm_chmp	Num	8	pL17: 30. Aerobic machine (times/wk) (typical week, past 4wks)
93	aermchhr_chmp	Num	8	pL17: 30. Aerobic machine (hrs/wk) (typical week, past 4wks)
94	watexr_chmp	Num	8	pL17: 31. Do water exercises? (do not count other swimming) (typical week, past 4wks)
95	watexrtm_chmp	Num	8	pL17: 31. Water exercise (times/wk) (typical week, past 4wks)
96	watexrhr_chmp	Num	8	pL17: 31. Water exercise (hrs/wk) (typical week, past 4wks)
97	swimfs_chmp	Num	8	pL17: 32. Swim moderately or fast? (typical week, past 4wks)
98	swimfstm_chmp	Num	8	pL17: 32. Swim fast (times/wk) (typical week, past 4wks)
99	swimfshr_chmp	Num	8	pL17: 32. Swim fast (hrs/wk) (typical week, past 4wks)
100	swimgn_chmp	Num	8	pL17: 33. Swim gently? (typical week, past 4wks)
101	swimgntm_chmp	Num	8	pL17: 33. Swim gently (times/wk) (typical week, past 4wks)
102	swimgnhr_chmp	Num	8	pL17: 33. Swim gently (hrs/wk) (typical week, past 4wks)
103	strtch_chmp	Num	8	pL17: 34. Do stretching or flexibility exercises? (do not count yoga or Tai-chi) (typical week, past 4wks)
104	strtchtm_chmp	Num	8	pL17: 34. Stretch (times/wk) (typical week, past 4wks)
105	strtchhr_chmp	Num	8	pL17: 34. Stretch (hrs/wk) (typical week, past 4wks)
106	yoga_chmp	Num	8	pL17: 35. Do yoga or Tai-chi? (typical week, past 4wks)
107	yogatm_chmp	Num	8	pL17: 35. Yoga (times/wk) (typical week, past 4wks)
108	yogahr_chmp	Num	8	pL17: 35. Yoga (hrs/wk) (typical week, past 4wks)
109	aerobc_chmp	Num	8	pL17: 36. Do aerobics or aerobic dancing? (typical week, past 4wks)

Num	Variable	Type	Len	Label
110	aerobctm_chmp	Num	8	pL17: 36. Aerobics (times/wk) (typical week, past 4wks)
111	aerobchr_chmp	Num	8	pL17: 26. Aerobics (hrs/wk) (typical week, past 4wks)
112	hvstr_chmp	Num	8	pL17: 37. Do moderate to heavy strength training? (such as hand-held weights of more than 5 lbs., weight machines or push-ups) (typical week, past 4wks)
113	hvstrtm_chmp	Num	8	pL17: 37. Heavy strength training (times/wk) (typical week, past 4wks)
114	hvstrhr_chmp	Num	8	pL17: 37. Heavy strength training (hrs/wk) (typical week, past 4wks)
115	ltstr_chmp	Num	8	pL17: 38. Do light strength training? (such as hand-held weights of 5 lbs. or less or elastic bands) (typical week, past 4wks)
116	ltstrtm_chmp	Num	8	pL17: 38. Light strength training (times/wk) (typical week, past 4wks)
117	ltstrhr_chmp	Num	8	pL17: 38. Light strength training (hrs/wk) (typical week, past 4wks)
118	gencnd_chmp	Num	8	pL17: 39. Do general conditioning exercises, such as light calisthenics or chair exercises? (typical week, past 4wks)
119	gencndtm_chmp	Num	8	pL17: 39. Conditioning (times/wk) (typical week, past 4wks)
120	gencndhr_chmp	Num	8	pL17: 39. Conditioning (hrs/wk) (typical week, past 4wks)
121	bbscrq_chmp	Num	8	pL17: 40. Play basketball, soccer, or racquetball? (do not count time on sidelines) (typical week, past 4wks)
122	bbscrqtm_chmp	Num	8	pL17: 40. Sports (times/wk) (typical week, past 4wks)
123	bbscrqhr_chmp	Num	8	pL17: 40. Sports (hrs/wk) (typical week, past 4wks)
124	otphy1_chmp	Num	8	pL17: 41. Do other types of physical activity not previously mentioned? (typical week, past 4wks)
125	otphy1tm_chmp	Num	8	pL17: 41. Other (times/wk) (typical week, past 4wks)
126	otphy1hr_chmp	Num	8	pL17: 41. Other (hrs/wk) (typical week, past 4wks)
127	otphy2_chmp	Num	8	pL17: 42. Do other types of physical activity not previously mentioned? (typical week, past 4wks)
128	otphy2tm_chmp	Num	8	pL17: 42. Other (times/wk) (typical week, past 4wks)
129	otphy2hr_chmp	Num	8	pL17: 42. Other (hrs/wk) (typical week, past 4wks)
130	otphy3_chmp	Num	8	pL17: 43. Do other types of physical activity not previously mentioned? (typical week, past 4wks)
131	otphy3tm_chmp	Num	8	pL17: 43. Other (times/wk) (typical week, past 4wks)
132	otphy3hr_chmp	Num	8	pL17: 43. Other (hrs/wk) (typical week, past 4wks)
133	valid_chmp	Num	8	pL17: Was this a valid interview?
134	min_all	Num	8	[C] pL17: Minutes/week in all exercise-related activities
135	min_mod	Num	8	[C] pL17: Minutes/week in moderate-intensity exercise-related activities
136	min_LE	Num	8	[C] pL17: Minutes/week in LOWER EXTREMITY exercise-related activities
137	min_wlk_str	Num	8	[C] pL17: Minutes/week spent in walking/strength exercises
138	min_wlk	Num	8	[C] pL17: Minutes/week in walking exercises
139	cal_exp_all	Num	8	[C] pL17: Caloric expenditure/week in all exercise-related activities
140	cal_exp_mod	Num	8	[C] pL17: Caloric expenditure/week in moderate-intensity exercise-related activities
141	freq_all	Num	8	[C] pL17: Frequency/week of all exercise-related activities
142	freq_mod	Num	8	[C] pL17: Frequency/week of moderate-intensity exercise-related activities
143	CHAMPS18	Num	8	[C] pL17: CHAMPS 18 item

Data Set Name: *pl18_gripstrength.sas7bdat*

Num	Variable	Type	Len	Label
1	pMaskID	Num	8	LIFE PILOT Participant Identifier
2	vc	Char	4	Visit Code
3	vis_days	Num	8	Date of Visit: converted to Days (in relation to randomization)
4	pain_grip	Num	8	pL18: 1. Has any pain or arthritis in your hands gotten much worse recently? (exclusion)
5	chshndpn_grip	Num	8	pL18: 1. Which hand?
6	hand_srg_grip	Num	8	pL18: 2. Have you had any surgery on your hands or wrists in the past three months?
7	wch_h_sg_grip	Num	8	pL18: 2. Which hand?
8	lt_or_rt_grip	Num	8	pL18: 3. Are you right or left-handed?
9	dyn_set_grip	Num	8	pL18: 3. Dynamometer setting:
10	notst_r1_grip	Num	8	pL18: Right Trial 1 (unable)
11	gp_st_r1_grip	Num	8	pL18: Right Trial 1 (kg)
12	notst_r2_grip	Num	8	pL18: Right Trial 2 (unable)
13	gp_st_r2_grip	Num	8	pL18: Right Trial 2 (kg)
14	notst_l1_grip	Num	8	pL18: Left Trial 1 (unable)
15	gp_st_l1_grip	Num	8	pL18: Left Trial 1 (kg)
16	notst_l2_grip	Num	8	pL18: Left Trial 2 (unable)
17	gp_st_l2_grip	Num	8	pL18: Left Trial 2 (kg)
18	avg_grip_strength	Num	8	[C] pL18: Mean grip strength: dominant hand (or non-dominant hand when dominant unavailable)

Data Set Name: *pl19_latmobilitytask.sas7bdat*

Num	Variable	Type	Len	Label
1	pMaskID	Num	8	LIFE PILOT Participant Identifier
2	vc	Char	4	Visit Code
3	vis_days	Num	8	Date of Visit: converted to Days (in relation to randomization)
4	practice_lmtk	Num	8	pL19: Practice trial
5	dlow1_lmtk	Num	8	pL19: Displaced Crossbar? Attempt 1 Low
6	dhigh1_lmtk	Num	8	pL19: Displaced Crossbar? Attempt 1 High
7	dlow2_lmtk	Num	8	pL19: Displaced Crossbar? Attempt 2 Low
8	dhigh2_lmtk	Num	8	pL19: Displaced Crossbar? Attempt 2 High
9	dlow3_lmtk	Num	8	pL19: Displaced Crossbar? Attempt 3 Low
10	dhigh3_lmtk	Num	8	pL19: Displaced Crossbar? Attempt 3 High
11	atmptrs_lmtk	Num	8	pL19: Displaced Crossbar? (unable to complete)
12	time1_lmtk	Num	8	pL19: Displaced Crossbar, Timed Trials - Time 1 (sec)
13	time2_lmtk	Num	8	pL19: Displaced Crossbar, Timed Trials - Time 2 (sec)
14	time3_lmtk	Num	8	pL19: Displaced Crossbar, Timed Trials - Time 3 (sec)
15	min_latmob	Num	8	[C] pL19: Minimum of timed trials
16	mean_latmob	Num	8	[C] pL19: Mean of timed trials

Data Set Name: *pl20_blouseshirttest.sas7bdat*

Num	Variable	Type	Len	Label
1	pMaskID	Num	8	LIFE PILOT Participant Identifier
2	vc	Char	4	Visit Code
3	vis_days	Num	8	Date of Visit: converted to Days (in relation to randomization)
4	puton_blst	Num	8	pL20: 1. Is participant able to put on Blouse/Shirt according to instruction?
5	button_blst	Num	8	pL20: 2. Is respondent able to button blouse/shirt?
6	time_min_blst	Num	8	pL20: 3. Time to complete task (stop after 4 min.) minutes
7	time_sec_blst	Num	8	pL20: 3. Time to complete task (stop after 4 min.) seconds
8	position_blst	Num	8	pL20: 4. Participant position

Data Set Name: *pl21_hrql.sas7bdat*

Num	Variable	Type	Len	Label
1	pMaskID	Num	8	LIFE PILOT Participant Identifier
2	vc	Char	4	Visit Code
3	vis_days	Num	8	Date of Visit: converted to Days (in relation to randomization)
4	bothered_hrql	Num	8	pL21: Mood (CES-D) - 1. I was bothered by things that usually don't bother me. (past wk)
5	appetite_hrql	Num	8	pL21: Mood (CES-D) - 2. I did not feel like eating: my appetite was poor. (past wk)
6	blues_hrql	Num	8	pL21: Mood (CES-D) - 3. I felt that I could not shake off the blues even with help from my family and friends. (past wk)
7	feltgood_hrql	Num	8	pL21: Mood (CES-D) - 4. I felt that I was just as good as other people. (past wk)
8	keepmind_hrql	Num	8	pL21: Mood (CES-D) - 5. I had trouble keeping my mind on what I was doing. (past wk)
9	depress_hrql	Num	8	pL21: Mood (CES-D) - 6. I was depressed. (past wk)
10	effort_hrql	Num	8	pL21: Mood (CES-D) - 7. I felt that everything I did was an effort. (past wk)
11	hopeful_hrql	Num	8	pL21: Mood (CES-D) - 8. I felt hopeful about the future. (past wk)
12	failure_hrql	Num	8	pL21: Mood (CES-D) - 9. I thought my life had been a failure. (past wk)
13	fearful_hrql	Num	8	pL21: Mood (CES-D) - 10. I felt fearful. (past wk)
14	restless_hrql	Num	8	pL21: Mood (CES-D) - 11. My sleep was restless. (past wk)
15	happy_hrql	Num	8	pL21: Mood (CES-D) - 12. I was happy. (past wk)
16	talkless_hrql	Num	8	pL21: Mood (CES-D) - 13. It seemed that I talked less than usual. (past wk)
17	lonely_hrql	Num	8	pL21: Mood (CES-D) - 14. I felt lonely. (past wk)
18	unfrndly_hrql	Num	8	pL21: Mood (CES-D) - 15. People were unfriendly. (past wk)
19	enjlfe_hrql	Num	8	pL21: Mood (CES-D) - 16. I enjoyed life. (past wk)
20	crying_hrql	Num	8	pL21: Mood (CES-D) - 17. I had crying spells. (past wk)
21	sad_hrql	Num	8	pL21: Mood (CES-D) - 18. I felt sad. (past wk)
22	disliked_hrql	Num	8	pL21: Mood (CES-D) - 19. I felt that people disliked me.
23	getgoing_hrql	Num	8	pL21: Mood (CES-D) - 20. I could not get going. (past wk)
24	fullpep_hrql	Num	8	pL21: Fatigue/Energy - 1. Full of Pep? (past wk)
25	fatigued_hrql	Num	8	pL21: Fatigue/Energy - 2. Fatigued? (past wk)
26	wornout_hrql	Num	8	pL21: Fatigue/Energy - 3. Worn Out? (past wk)
27	energy_hrql	Num	8	pL21: Fatigue/Energy - 4. Full of Energy?
28	tired_hrql	Num	8	pL21: Fatigue/Energy - 5. Tired? (past wk)
29	refresh_hrql	Num	8	pL21: Fatigue/Energy - 6. Refreshed? (past wk)
30	bedf_hrql	Num	8	pL21: Pain - 1. Got in and out of bed? (past wk)
31	wlkshrtf_hrql	Num	8	pL21: Pain - 2. Walked a short (1 block) distance? (past wk)
32	chairf_hrql	Num	8	pL21: Pain - 3. Got in and out of a chair? (past wk)
33	ustairsf_hrql	Num	8	pL21: Pain - 4. Walked up a flight of stairs? (past wk)
34	carf_hrql	Num	8	pL21: Pain - 5. Got in and out of a car? (past wk)
35	dstairsf_hrql	Num	8	pL21: Pain - 6. Walked down a flight of stairs? (past wk)
36	beds_hrql	Num	8	pL21: Pain, Severity - 7. Got in and out of bed? (past wk)

Num	Variable	Type	Len	Label
37	wlkshts_hrql	Num	8	pL21: Pain, Severity - 8. Walked a short (1 block) distance? (past wk)
38	chairs_hrql	Num	8	pL21: Pain, Severity - 9. Got in and out of a chair?
39	ustairss_hrql	Num	8	pL21: Pain, Severity - 10. Walked up a flight of stairs? (past wk)
40	cars_hrql	Num	8	pL21: Pain, Severity - 11. Got in and out of a car? (past wk)
41	dstairss_hrql	Num	8	pL21: Pain, Severity - 12. Walked down a flight of stairs? (past wk)
42	bedhr_hrql	Num	8	pL21: Sleep - 1. When have you usually gone to bed at night? (hour) (past mon)
43	bedmin_hrql	Num	8	pL21: Sleep - 1. When have you usually gone to bed at night? (minutes) (past mon)
44	bedap_hrql	Num	8	pL21: Sleep - 1. When have you usually gone to bed at night? (am:pm) (past mon)
45	bedrdk_hrql	Num	8	pL21: Sleep - 1. When have you usually gone to bed at night? (don't know/refused) (past mon)
46	fallasl_hrql	Num	8	pL21: Sleep - 2. How long (in minutes) has it usually taken you to fall asleep each night? (minutes) (past mon)
47	flaslrkd_hrql	Num	8	pL21: Sleep - 2. How long (in minutes) has it usually taken you to fall asleep each night? (don't know/refused) (past mon)
48	getuphr_hrql	Num	8	pL21: Sleep - 3. When have you usually gotten up in the morning? (hour) (past mon)
49	getupmin_hrql	Num	8	pL21: Sleep - 3. When have you usually gotten up in the morning? (minutes) (past mon)
50	getupap_hrql	Num	8	pL21: Sleep - 3. When have you usually gotten up in the morning? (am:pm) (past mon)
51	getuprdk_hrql	Num	8	pL21: Sleep - 3. When have you usually gotten up in the morning? (don't know/refused) (past mon)
52	sleephrs_hrql	Num	8	pL21: Sleep - 4. How many hours of actual sleep did you get in a typical night? (hours) (past mon)
53	sleepmin_hrql	Num	8	pL21: Sleep - 4. How many hours of actual sleep did you get in a typical night? (minutes) (past mon)
54	sleeprdk_hrql	Num	8	pL21: Sleep - 4. How many hours of actual sleep did you get in a typical night? (don't know/refused) (past mon)
55	naphrs_hrql	Num	8	pL21: Sleep - 5. How many hours do you nap or sleep during a typical day? (hours) (past mon)
56	napmin_hrql	Num	8	pL21: Sleep - 5. How many hours do you nap or sleep during a typical day? (minutes) (past mon)
57	naprdk_hrql	Num	8	pL21: Sleep - 5. How many hours do you nap or sleep during a typical day? (don't know/refused) (past mon)
58	cesd	Num	8	[C] pL21: CESD Score for Depression
59	energyscore	Num	8	[C] pL21: Average Score for Fatigue/Energy (higher score means more energy)
60	paininfreqscore	Num	8	[C] pL21: Average Score for Frequency of Pain (higher score means less frequent pain)
61	painsevscore	Num	8	[C] pL21: Average Score for Severity of Pain (higher score means less severe pain)
62	somatic	Num	8	[C] pL21: Somatic subscale (sum of items 1,2,5,7,11,13,20)
63	depressed_affect	Num	8	[C] pL21: Depressed affect subscale (sum of items 3,6,9,10,14,17,18 - adjusted as needed)
64	positive_affect	Num	8	[C] pL21: Positive affect subscale (sum of items 4,8,12,16 adjusted as needed)
65	interpersonal_problems	Num	8	[C] pL21: Interpersonal problems subscale (sum of items 15,19 - adjusted as needed)

Data Set Name: *pl22_latelifedisability.sas7bdat*

Num	Variable	Type	Len	Label
1	pMaskID	Num	8	LIFE PILOT Participant Identifier
2	vc	Char	4	Visit Code
3	vis_days	Num	8	Date of Visit: converted to Days (in relation to randomization)
4	kitoft_ldis	Num	8	pL22: 1. Keep in touch with others through letters, phone, or email (freq)
5	kitlim_ldis	Num	8	pL22: 1. Keep in touch with others through letters, phone, or email (limited)
6	visitoft_ldis	Num	8	pL22: 2. Visit friends and family in their homes (freq)
7	visitlim_ldis	Num	8	pL22: 2. Visit friends and family in their homes (limited)
8	provoft_ldis	Num	8	pL22: 3. Provide care or assistance to others, including providing personal care, transportation, and running errands for family members or friends (freq)
9	provlim_ldis	Num	8	pL22: 3. Provide care or assistance to others, including providing personal care, transportation, and running errands for family members or friends (limited)
10	homeoft_ldis	Num	8	pL22: 4. Take care of the inside of your home, including managing and taking responsibility for homemaking, laundry, housecleaning and minor household repairs (freq)
11	homelim_ldis	Num	8	pL22: 4. Take care of the inside of your home, including managing and taking responsibility for homemaking, laundry, housecleaning and minor household repairs (limited)
12	workoft_ldis	Num	8	pL22: 5. Work at a volunteer job outside your home (freq)
13	worklim_ldis	Num	8	pL22: 5. Work at a volunteer job outside your home (limited)
14	recroft_ldis	Num	8	pL22: 6. Take part in active recreation, including bowling, golf, tennis, hiking, jogging, or swimming (freq)
15	reclim_ldis	Num	8	pL22: 6. Take part in active recreation, including bowling, golf, tennis, hiking, jogging, or swimming (limited)
16	tcboft_ldis	Num	8	pL22: 7. Take care of household business and finances, including managing and taking responsibility for your money, paying bills, dealing with a landlord or tenants, dealing with utility companies or governmental agencies (freq)
17	tcblim_ldis	Num	8	pL22: 7. Take care of household business and finances, including managing and taking responsibility for your money, paying bills, dealing with a landlord or tenants, dealing with utility companies or governmental agencies (limited)
18	hlthoft_ldis	Num	8	pL22: 8. Take care of your own health, including managing daily medications, following a special diet, scheduling doctor's appointments (freq)
19	hlthlim_ldis	Num	8	pL22: 8. Take care of your own health, including managing daily medications, following a special diet, scheduling doctor's appointments (limited)
20	travoft_ldis	Num	8	pL22: 9. Travel out of town for at least an overnight stay (freq)
21	travlim_ldis	Num	8	pL22: 9. Travel out of town for at least an overnight stay (limited)
22	fitnsoft_ldis	Num	8	pL22: 10. Take part in a regular fitness program, including walking for exercise, stationary biking, weight lifting, or exercise classes (freq)
23	fitnslim_ldis	Num	8	pL22: 10. Take part in a regular fitness program, including walking for exercise, stationary biking, weight lifting, or exercise classes (limited)
24	invitoft_ldis	Num	8	pL22: 11. Invite people into your home for a meal or entertainment (freq)
25	invitlim_ldis	Num	8	pL22: 11. Invite people into your home for a meal or entertainment (limited)
26	gooutoft_ldis	Num	8	pL22: 12. Go out with others to public places such as restaurants or movies (freq)
27	gooutlim_ldis	Num	8	pL22: 12. Go out with others to public places such as restaurants or movies (limited)

Num	Variable	Type	Len	Label
28	prscroft_ldis	Num	8	pL22: 13. Take care of your own personal care needs. This includes bathing, dressing, and toileting (freq)
29	prscrlim_ldis	Num	8	pL22: 13. Take care of your own personal care needs. This includes bathing, dressing, and toileting (limited)
30	socloft_ldis	Num	8	pL22: 14. Take part in organized social activities, including clubs, card playing, senior center events, community or religious groups (freq)
31	soclim_ldis	Num	8	pL22: 14. Take part in organized social activities, including clubs, card playing, senior center events, community or religious groups (limited)
32	errndoft_ldis	Num	8	pL22: 15. Take care of local errands, including managing and taking responsibility for shopping for food and personal items, and going to the bank, library, or dry cleaner (freq)
33	errndlim_ldis	Num	8	pL22: 15. Take care of local errands, including managing and taking responsibility for shopping for food and personal items, and going to the bank, library, or dry cleaner (limited)
34	mealsoft_ldis	Num	8	pL22: 16. Prepare meals for yourself. This includes planning, cooking, serving, and cleaning up (freq)
35	mealslim_ldis	Num	8	pL22: 16. Prepare meals for yourself. This includes planning, cooking, serving, and cleaning up (limited)
36	ftot_raw	Num	8	[C] pL22: Frequency Domain -- Total
37	ftot_scale	Num	8	[C] pL22: Frequency Domain -- Total Scaled
38	fsoc_raw	Num	8	[C] pL22: Frequency Domain -- Social
39	fsoc_scale	Num	8	[C] pL22: Frequency Domain -- Social Scaled
40	fpers_raw	Num	8	[C] pL22: Frequency Domain -- Personal
41	fpers_scale	Num	8	[C] pL22: Frequency Domain -- Personal Scaled
42	ltot_raw	Num	8	[C] pL22: Limitation Domain -- Total
43	ltot_scale	Num	8	[C] pL22: Limitation Domain -- Total Scaled
44	linst_raw	Num	8	[C] pL22: Limitation Domain -- Instrumental
45	linst_scale	Num	8	[C] pL22: Limitation Domain -- Instrumental Scaled
46	lmgmt_raw	Num	8	[C] pL22: Limitation Domain -- Management
47	lmgmt_scale	Num	8	[C] pL22: Limitation Domain -- Management Scaled

Data Set Name: *pl23_400mwalkproxyq.sas7bdat*

Num	Variable	Type	Len	Label
1	pMaskID	Num	8	LIFE PILOT Participant Identifier
2	vc	Char	4	Visit Code
3	vis_days	Num	8	Date of Visit: converted to Days (in relation to randomization)
4	intvcomp_wkpr	Num	8	pL23: 1. How was the interview completed?
5	walkout_wkpr	Num	8	pL23: 2. In the past two weeks, has [the participant] done any walking outside the home? This would include walking in his/her neighborhood or in other parts of the city, walking in the mall or at the gym?
6	walktime_wkpr	Num	8	pL23: 3. When [the participant] walked in the past two weeks, what is the longest amount of time that he/she walked without sitting down to rest?
7	walkdist_wkpr	Num	8	pL23: 4. When [the participant] walked in the past two weeks, what is the farthest distance he/she walked at one time without sitting down to rest?
8	milediff_wkpr	Num	8	pL23: 5. Because of a health or physical problem, does [the participant] have any difficulty walking a distance of one mile, which is about 8 to 12 blocks?
9	walkgroc_wkpr	Num	8	pL23: 6. Could [the participant] walk up and down every aisle in a grocery store without sitting down to rest or leaning on a cart?
10	walkmall_wkpr	Num	8	pL23: 7. Could [the participant] walk the entire length of an indoor shopping mall without sitting down to rest?
11	walkquar_wkpr	Num	8	pL23: 8. Could [the participant] walk ¼ mile, that is about 3-4 blocks without sitting down to rest?
12	walkqudf_wkpr	Num	8	pL23: 9. Think about the past month. How much difficulty did [the participant] have walking for a quarter of a mile, which is about 2 or 3 blocks because of his/her health?

Data Set Name: *pl24_proxyadls.sas7bdat*

Num	Variable	Type	Len	Label
1	pMaskID	Num	8	LIFE PILOT Participant Identifier
2	vc	Char	4	Visit Code
3	vis_days	Num	8	Date of Visit: converted to Days (in relation to randomization)
4	intvcomp_padl	Num	8	pL24: 1. How was the interview completed?
5	hlpwk_padl	Num	8	pL24: 2. Does (participant) usually receive help from another person when he/she walks across a small room?
6	hlpbathe_padl	Num	8	pL24: 3. Does (participant) usually receive help from another person when he/she bathes or showers?
7	hlp2chair_padl	Num	8	pL24: 4. Does (participant) usually receive help from another person when he/she moves in or out of a chair?
8	hlp2bed_padl	Num	8	pL24: 5. Does (participant) usually receive help from another person when he/she moves in or out of a bed?
9	usejon_padl	Num	8	pL24: 6. Does (participant) usually receive help from another person when he/she uses the toilet?
10	hlpdress_padl	Num	8	pL24: 7. Does (participant) usually receive help from another person when he/she gets dressed?
11	hlpfeed_padl	Num	8	pL24: 8. Does (participant) usually receive help from another person when he/she feeds himself/herself?
12	speqpmnt_padl	Num	8	pL24: 9. Does (participant) have to use a cane, walker, crutches or special equipment to help himself/herself get around?
13	in_walk_padl	Num	8	pL24: 10. When you walk inside your home, do you usually require a walker?
14	out_walk_padl	Num	8	pL24: 11. When you walk outside your home, do you usually require a walker?
15	in_cane_padl	Num	8	pL24: 12. When you walk inside your home, do you usually require a cane?
16	out_cane_padl	Num	8	pL24: 13. When you walk outside your home, do you usually require a cane?

Data Set Name: *pl25_assistivedevice.sas7bdat*

Num	Variable	Type	Len	Label
1	pMaskID	Num	8	LIFE PILOT Participant Identifier
2	vc	Char	4	Visit Code
3	vis_days	Num	8	Date of Visit: converted to Days (in relation to randomization)
4	in_walk_assd	Num	8	pL25: 1. When you walk inside your home, do you usually require a walker?
5	out_walk_assd	Num	8	pL25: 2. When you walk outside your home, do you usually require a walker?
6	in_cane_assd	Num	8	pL25: 3. When you walk inside your home, do you usually require a cane?
7	out_cane_assd	Num	8	pL25: 4. When you walk outside your home, do you usually require a cane?

Data Set Name: *pl26_cognitionbattery.sas7bdat*

Num	Variable	Type	Len	Label
1	pMaskID	Num	8	LIFE PILOT Participant Identifier
2	vc	Char	4	Visit Code
3	vis_days	Num	8	Date of Visit: converted to Days (in relation to randomization)
4	a6totalrav1	Num	4	pL26: Rey AVLT Short-Delay Free Recall, 21.
5	totallong	Num	4	pL26: RAVLT Long-Delay Recall, 66.
6	SCORE_3ME	Num	8	[C] pL26: Modified Mini-Mental State Examination (3MSE)
7	SCORE_MME	Num	8	[C] pL26: Mini-Mental State Examination (MMSE)
8	totaldig1	Num	4	pL26: DIGIT SYMBOL, 46.
9	stroopfinalscore	Num	8	[C] pL26: Stroop Total score
10	total_recall	Num	8	[C] pL26: RAVLT Total score

Data Set Name: *pl60_healthevents.sas7bdat*

Num	Variable	Type	Len	Label
1	pMaskID	Num	8	LIFE PILOT Participant Identifier
2	vc	Char	4	Visit Code
3	vis_days	Num	8	Date of Visit: converted to Days (in relation to randomization)
4	howcomp_hevt	Num	8	pL60: 1. How was the interview completed?
5	source_hevt	Num	8	pL60: 2. Source of information?
6	frc_hevt	Num	8	pL60: 3. Did a doctor tell you that you fractured or broke a bone? (since last visit)
7	frc_xray_hevt	Num	8	pL60: 3a. Broken bone: did you have an x-ray?
8	frc_hosp_hevt	Num	8	pL60: 3b. Broken bone: did you stay overnight at a hospital for this problem?
9	frc_fall_hevt	Num	8	pL60: 3c. Broken bone: did you break a bone as a result of a fall?
10	frc_bone_hevt	Char	100	pL60: 3c. Broken bone (specify bone)
11	frc_type_hevt	Char	100	pL60: 3c. Broken bone (specify type)
12	hrt_hevt	Num	8	pL60: 4. Did a doctor tell you that you had a heart attack, angina or chest pain due to heart disease? (since last visit)
13	hrt_hosp_hevt	Num	8	pL60: 4a. Heart disease: did you stay overnight at a hospital for this problem?
14	stk_hevt	Num	8	pL60: 5. Did a doctor tell you that you had a stroke, mini-stroke, or TIA? (since last visit)
15	stk_hosp_hevt	Num	8	pL60: 5a. Stroke: did you stay overnight at a hospital for this problem?
16	chf_hevt	Num	8	pL60: 6. Did a doctor tell you that you had congestive heart failure? (since last visit)
17	chf_hosp_hevt	Num	8	pL60: 6a. CHF: did you stay overnight at a hospital for this problem?
18	anu_hevt	Num	8	pL60: 7. Did a doctor tell you that you had an abdominal aortic aneurysm or a ballooning of the wall of the artery in your stomach? (since last visit)
19	anu_hosp_hevt	Num	8	pL60: 7a. Aneurysm: did you stay overnight at a hospital for this problem?
20	crc_hevt	Num	8	pL60: 8. Did a doctor tell you that you had a problem with the circulation of blood to your legs or a peripheral arterial disease? (since last visit)
21	crc_hosp_hevt	Num	8	pL60: 8a. PAD: did you stay overnight at a hospital for this problem?
22	any_hosp_hevt	Num	8	pL60: 9. Other conditions: were you hospitalized overnight for any other reasons since? (since last visit)
23	ang_hevt	Num	8	pL60: 10. Have you had any same day outpatient surgery for angioplasty to open a blocked artery in your heart or to place a stent? (since last visit)
24	out_surg_hevt	Num	8	pL60: 11. Did you have any other outpatient surgery? (since last visit)
25	fall_hevt	Num	8	pL60: 12. Have you had any falls, that is when you went down unintentionally and landed on the floor or ground? (since last visit)
26	fall_num_hevt	Num	8	pL60: 12a. Falls: how many time would you say you've fallen?
27	fall_er_hevt	Num	8	pL60: 12b. Falls: did you see a doctor (or go to the ER)?
28	nrs_hevt	Num	8	pL60: 13. Have you stayed overnight in a nursing home, long-term or extended care facility? (since last visit)
29	nrs_days	Num	8	pL60: 13a. Nursing home: how many days did you stay?
30	highbp_hevt	Num	8	pL60: 14. Has a doctor or other health professional told you that you had high blood pressure or hypertension? (since last visit)
31	cancer_hevt	Num	8	pL60: 15. Has a doctor told you that you had cancer? (since last visit)
32	cancerfr_hevt	Num	8	pL60: 15b. Cancer: was this the first time you have been told you had this kind of cancer?

Num	Variable	Type	Len	Label
33	back_hevt	Num	8	pL60: 16a. Sought care: Back Injury (since last visit)
34	faint_hevt	Num	8	pL60: 16b. Sought care: Fainting or Passing out (since last visit)
35	asthma_hevt	Num	8	pL60: 16c. Sought care: Shortness of Breath or Asthma (since last visit)
36	rhyth_hevt	Num	8	pL60: 16d. Sought care: Abnormal Heart Rhythm (since last visit)
37	ftulcer_hevt	Num	8	pL60: 16e. Sought care: Foot Ulcer (since last visit)
38	jtsprain_hevt	Num	8	pL60: 16f. Sought care: Joint Sprain (since last visit)
39	walkany_hevt	Num	8	pL60: 16g. Sought care: Reason that affected your ability to walk? (since last visit)
40	fat_hevt	Num	8	pL60: 17.A Symptoms: Fatigue (since last visit)
41	fat_cut_hevt	Num	8	pL60: 17.A Did you have to cut down your usual activities for at least 3 days because of the fatigue?
42	diz_hevt	Num	8	pL60: 17.B Symptoms: Dizziness (since last visit)
43	diz_cut_hevt	Num	8	pL60: 17.B Did you have to cut down your usual activities for at least 3 days because of the dizziness?
44	musc_hevt	Num	8	pL60: 17.C Symptoms: Muscle Strain or Joint Stiffness/Soreness (since last visit)
45	musc_cut_hevt	Num	8	pL60: 17.C Did you have to cut down your usual activities for at least 3 days because of the Muscle Strain or Joint Stiffness/Soreness?
46	foot_hevt	Num	8	pL60: 17.D Symptoms: Foot Pain (since last visit)
47	foot_cut_hevt	Num	8	pL60: 17.D Did you have to cut down your usual activities for at least 3 days because of the foot pain?
48	any_cut_hevt	Num	8	pL60: 17.E Have you had any other serious health problems that made you cut down on your activities or take to bed for at least 3 days? (since last visit)

Data Set Name: *pl61_healtheventtracking.sas7bdat*

Num	Variable	Type	Len	Label
1	pMaskID	Num	8	LIFE PILOT Participant Identifier
2	vc	Char	4	Visit Code
3	vis_days	Num	8	Date of Visit: converted to Days (in relation to randomization)
4	typeevent_evtr	Char	40	Type of event
5	fractrau_evtr	Num	8	Fracture resulted from excessive trauma (0=no, 1=yes)
6	ovhAd_days	Num	8	Date hospital admission: converted to Days (in relation to randomization)
7	ovhDs_days	Num	8	Date hospital discharge: converted to Days (in relation to randomization)
8	fx_days	Num	8	Date fracture: converted to Days (in relation to randomization)
9	rvs_days	Num	8	Date revascularization: converted to Days (in relation to randomization)
10	death_days	Num	8	Date death: converted to Days (in relation to randomization)

Data Set Name: *pl62_adverseevents.sas7bdat*

Num	Variable	Type	Len	Label
1	pMaskID	Num	8	LIFE PILOT Participant Identifier
2	vc	Char	4	Visit Code
3	vis_days	Num	8	Date of Visit: converted to Days (in relation to randomization)
4	evtdate_adev_days	Num	8	pL62: 1. Date of Event: converted to Days (in relation to randomization)
5	frst_dat_adev	Num	8	pL62: 2. Is this the first event for this date?
6	whorep_adev	Num	8	pL62: 3. Who is reporting event?
7	rand_adev	Num	8	pL62: 4. Did the event occur to a randomized participant?
8	evnt_loc_adev	Char	50	pL62: 5. Location of event
9	death_adev	Num	8	pL62: 7a. Death
10	hospital_adev	Num	8	pL62: 7b. Hospitalization
11	emroom_adev	Num	8	pL62: 7c. Emergency Room or Urgent Care Visit
12	fracture_adev	Num	8	pL62: 7d. Fracture
13	outpsurg_adev	Num	8	pL62: 7e. Outpatient surgical procedure
14	backinj_adev	Num	8	pL62: 7f. Back injury
15	fainting_adev	Num	8	pL62: 7g. Fainting/Passing Out
16	dizznes_adev	Num	8	pL62: 7h. Dizziness
17	shrtbrth_adev	Num	8	pL62: 7i. Shortness of Breath/Asthma
18	fatigue_adev	Num	8	pL62: 7j. Fatigue
19	hrtrhyth_adev	Num	8	pL62: 7k. Abnormal Heart Rhythm
20	jointsp_adev	Num	8	pL62: 7l. Joint Sprain
21	muscstrn_adev	Num	8	pL62: 7m. Muscle Strain or Joint Stiffness/Soreness
22	footpain_adev	Num	8	pL62: 7n. Foot Pain
23	foodulcr_adev	Num	8	pL62: 7o. Food Ulcer
24	othillns_adev	Num	8	pL62: 7p. Other illness restricting activity for at least 3 days
25	othprb_adev	Num	8	pL62: 7q. Other problem affecting walking ability
26	status_adev	Char	100	pL62: 8. Has participation in the study changed due to this event?

Data Set Name: *pl63_injfallfx.sas7bdat*

Num	Variable	Type	Len	Label
1	pMaskID	Num	8	LIFE PILOT Participant Identifier
2	vc	Char	4	Visit Code
3	vis_days	Num	8	Date of Visit: converted to Days (in relation to randomization)
4	fracture_iffa	Num	8	pL63: 1a. Fracture per criteria in #3
5	headinj_iffa	Num	8	pL63: 1b. Non-fracture head injury with loss of consciousness, subdural or other intracranial hemotoma by MRI or CT, facial trauma requiring sutures with report, traumatic vision loss with report of visual function, or there similar head injury sequela.
6	longlie_iffa	Num	8	pL63: 1c. Consequences of long lie such as rhabdomyolysis with increases in muscle anzymes, dehydration with use of parental fluid replacement, decreased blood pressure, increase BUN and/or sodium level, or hypothermia (rectal temp<36° C)
7	othinj_iffa	Num	8	pL63: 1d. Other injury attributed to a fall such as burns, severe sprains, visceral injury, internal bleeding, or acute peripheral nerve damage (with supporting documentation).
8	datefall_days_iffa	Num	8	pL63: 2. Date of fracture: converted to Days (in relation to randomization)
9	criteria_iffa	Num	8	pL63: 3a. Fractures: Injury fracture criteria (must meet all criteria)
10	nonvert_iffa	Num	8	pL63: 3a.1 Radiologic evidence of non-vertebral fracture
11	rept1wk_iffa	Num	8	pL63: 3a.2 Report of fall within 1 week of diagnosis
12	abstraum_iffa	Num	8	pL63: 3a.3 Absence of major trauma (MVA or fall from height >3 feet) or periprosthetic fracture
13	noevid_iffa	Num	8	pL63: 3a.4 No evidence of pathologic fracture (malignancy, osteoporosis is not considered pathologic)
14	nose_iffa	Num	8	pL63: 3b. Fracture Site: Facial (1). Nose
15	othfac_iffa	Num	8	pL63: 3b. Fracture Site: Facial (2). Other facial
16	metacarp_iffa	Num	8	pL63: 3b. Fracture Site: Hand or Finger (3). One or more metacarpal bone(s)
17	fingers_iffa	Num	8	pL63: 3b. Fracture Site: Hand or Finger (4). One or more fingers
18	radius_iffa	Num	8	pL63: 3b. Fracture Site: Lower arm or wrist (5). Radius and/or ulna
19	carpal_iffa	Num	8	pL63: 3b. Fracture Site: Lower arm or wrist (6). One or more carpal bones (wrist)
20	lhumerus_iffa	Num	8	pL63: 3b. Fracture Site: Elbow (7). Lower end of Humerus
21	uradius_iffa	Num	8	pL63: 3b. Fracture Site: Elbow (8). Upper radius and /or ulna
22	uhumerus_iffa	Num	8	pL63: 3b. Fracture Site: Upper arm (humerus), shoulder, or clavicle: (9). Humerus, upper end
23	humerus_iffa	Num	8	pL63: 3b. Fracture Site: Upper arm (humerus), shoulder, or clavicle: (10). Humerus, shaft or unspecified part
24	clavicle_iffa	Num	8	pL63: 3b. Fracture Site: Upper arm (humerus), shoulder, or clavicle: (11). Clavicle
25	scapula_iffa	Num	8	pL63: 3b. Fracture Site: Upper arm (humerus), shoulder, or clavicle: (12). Scapula
26	rib_iffa	Num	8	pL63: 3b. Fracture Site: Rib (13). Rib
27	cervical_iffa	Num	8	pL63: 3b. Fracture Site: Spine or back (vertebra) (14). Cervical Spine
28	sacrum_iffa	Num	8	pL63: 3b. Fracture Site: Tailbone (15). Sacrum and/or coccyx
29	pelvis_iffa	Num	8	pL63: 3b. Fracture Site: Pelvis (16). Pelvis
30	nckfemur_iffa	Num	8	pL63: 3b. Fracture Site: Hip (17). Neck or femur (transcervical, cervical)
31	intertro_iffa	Num	8	pL63: 3b. Fracture Site: Hip (18). Intertrochanteric fracture
32	grtroch_iffa	Num	8	pL63: 3b. Fracture Site: Hip (19). Greater trochanter

Num	Variable	Type	Len	Label
33	prxfemur_iffa	Num	8	pL63: 3b. Fracture Site: Hip (20). Unspecified part of proximal femur
34	shtfemur_iffa	Num	8	pL63: 3b. Fracture Site: Upper leg (not hip) (21). Shaft of femur, including subtrochanteric region
35	patella_iffa	Num	8	pL63: 3b. Fracture Site: Knee (22). Patella
36	tibialpl_iffa	Num	8	pL63: 3b. Fracture Site: Knee (23). Tibial plateau
37	tibfib_iffa	Num	8	pL63: 3b. Fracture Site: Lower leg or ankle (24). Tibia or fibula
38	ankle_iffa	Num	8	pL63: 3b. Fracture Site: Lower leg or ankle (25). Ankle (very distal tibia/fibula and/or talus)
39	tarsal_iffa	Num	8	pL63: 3b. Fracture Site: Foot or Toe (26). One or more tarsal and/or metatarsal bones, heel and/or calcaneus
40	toes_iffa	Num	8	pL63: 3b. Fracture Site: Foot or Toe (27). One or more toes
41	fracconf_iffa	Num	8	pL63: 3c. Fracture confirmed (category)
42	overhosp_iffa	Num	8	pL63: 4. Did the injurious fracture or fall result in an overnight hospitalization?

Data Set Name: *pl64_vascularoutcomes.sas7bdat*

Num	Variable	Type	Len	Label
1	pMaskID	Num	8	LIFE PILOT Participant Identifier
2	vc	Char	4	Visit Code
3	vis_days	Num	8	Date of Visit: converted to Days (in relation to randomization)
4	evtdate_varw_days	Num	8	Date of Event: converted to Days (in relation to randomization)
5	myocinf_varw	Num	8	pL64: I. Myocardial Infraction
6	chstpain_varw	Num	8	pL64: I.a MI: Chest Pain
7	cardenz_varw	Num	8	pL64: I.b MI: Cardiac Enzymes
8	ecgser_varw	Num	8	pL64: I.c MI: ECG Serial Reading
9	procrel1_varw	Num	8	pL64: I.d MI: Procedure-Related
10	proctyp1_varw	Char	100	pL64: I.d MI: Procedure-Related, Type
11	cardarr_varw	Num	8	pL64: II. Resuscitated Cardiac Arrest
12	conhrtfl_varw	Num	8	pL64: III.a Congestive Heart Failure
13	medttchf_varw	Num	8	pL64: III.b CHF: diagnosed by physician and receiving medical treatment
14	pulmend_varw	Num	8	pL64: III.b CHF: Pulmonary edema/congestion by chest x-ray
15	dilvent_varw	Num	8	pL64: III.b CHF: Dilated ventricle or poor left ventricular function by echocardiography; radionuclide ventriculogram (RVG)/multigated acquisition (MUGA), or other contrast ventriculography, or evidence of left ventricular diastolic dysfunction.
16	procrel2_varw	Num	8	pL64: III.c CHF: Procedure-Related
17	proctyp2_varw	Char	100	pL64: III.c CHF: Procedure-Related, Type
18	corondis_varw	Num	8	pL64: III.d CHF Conditions: Coronary Disease
19	valvdis_varw	Num	8	pL64: III.d CHF Conditions: Valvular Disease
20	arrhythm_varw	Num	8	pL64: III.d CHF Conditions: Arrhythmia
21	hyperten_varw	Num	8	pL64: III.d CHF Conditions: Hypertension
22	pulmdis_varw	Num	8	pL64: III.d CHF Conditions: Pulmonary Disease
23	pulminf_varw	Num	8	pL64: III.d CHF Conditions: Pulmonary Infection
24	medwithd_varw	Num	8	pL64: III.d CHF Conditions: Medications Withdrawal
25	volover_varw	Num	8	pL64: III.d CHF Conditions: Volume Overload
26	toxins_varw	Num	8	pL64: III.d CHF Conditions: Toxins
27	other_varw	Num	8	pL64: III.d CHF Conditions: Other
28	bypassgr_varw	Num	8	pL64: IV.a Coronary Revascularization: Coronary Artery Bypass Graft (CABG)
29	ptca_varw	Num	8	pL64: IV.b Coronary Revascularization: Percutaneous transluminal coronary angioplasty (PTCA), coronary stent, or coronary atherectomy
30	perartds_varw	Num	8	pL64: V.a Peripheral Arterial Disease
31	paddiag_varw	Num	8	pL64: V.b PAD Symptomatic disease including intermittent claudication: Diagnosis
32	abaneur_varw	Num	8	pL64: V.c1 PAD Symptomatic disease - Criteria: Ultrasound, angiogram or CT demonstrated abdominal aneurysm with rupture or repair
33	demobstr_varw	Num	8	pL64: V.c2 PAD Symptomatic disease - Criteria: Ultrasonagraphically or angiographically demonstrated obstruction, or ulcerated plaque

Num	Variable	Type	Len	Label
34	abspulse_varw	Num	8	pL64: V.c3 PAD Symptomatic disease - Criteria: Absence of pulse by Doppler in any major vessel of lower extremities
35	leclaud_varw	Num	8	pL64: V.c4 PAD Symptomatic disease - Criteria: Exercise test that is positive for lower extremity claudication
36	surgery_varw	Num	8	pL64: V.c5 PAD Symptomatic disease - Criteria: Surgery, angioplasty, or thrombolysis for peripheral arterial disease
37	amputatn_varw	Num	8	pL64: V.c6 PAD Symptomatic disease - Criteria: Amputation of one or more toes or part of the lower extremity due to ischemia or gangrene
38	legpain_varw	Num	8	pL64: V.c7 PAD Symptomatic disease - Criteria: Claudication diagnosed by a physician or ankle-arm systolic blood pressure ration less than or equal to 0.8
39	procrel3_varw	Num	8	pL64: V.d. PAD Symptomatic disease - Criteria: Procedure-Related
40	proctyp3_varw	Char	100	pL64: V.d PAD Symptomatic disease - Criteria: Procedure Type
41	stroke_varw	Num	8	pL64: VI. Stroke Diagnosis
42	headache_varw	Num	8	pL64: VI.a1 Stroke - Symptoms: Severe Headache
43	focdefmt_varw	Num	8	pL64: VI.a2 Stroke - Symptoms: Rapid onset of Focal Deficit lasting 24 hours or longer or cause of death
44	focdeflt_varw	Num	8	pL64: VI.a3 Stroke - Symptoms: Rapid onset of Focal Deficit lasting longer than 1 hour, but less than 24 hours with brain image positive for a stroke.
45	brainimg_varw	Num	8	pL64: VI.b Stroke: Brain Image Findings
46	stroketp_varw	Num	8	pL64: VI.c Stroke Type
47	hemorrhg_varw	Num	8	pL64: VI.c Stroke Type (Hemorrhage)
48	ishemic_varw	Num	8	pL64: VI.c Stroke Type (Ischemic)
49	procrel4_varw	Num	8	pL64: VI.d Stroke: Procedure-Related
50	proctyp4_varw	Char	100	pL64: VI.d Stroke: Procedure-Related, Type
51	carendar_varw	Num	8	pL64: VII. Carotid Endarterectomy
52	surendar_varw	Num	8	pL64: VII.a Surgical Endarterectomy
53	percutrv_varw	Num	8	pL64: VII.b Percutaneous Revascularization
54	diedhosp_varw	Num	8	pL64: VIII. Did the patient die during the hospitalization?

Data Set Name: *pl65_medrecabstraction.sas7bdat*

Num	Variable	Type	Len	Label
1	pMaskID	Num	8	LIFE PILOT Participant Identifier
2	vc	Char	4	Visit Code
3	vis_days	Num	8	Date of Visit: converted to Days (in relation to randomization)
4	death_mrab	Num	8	Death
5	death_days_mrab	Num	8	Date of death: converted to Days (in relation to randomization)
6	myocin_mrab	Num	8	Myocardial infarction
7	myocin_days_mrab	Num	8	Date of myocardial infarction: converted to Days (in relation to randomization)
8	chf_mrab	Num	8	Congestive heart failure
9	chf_days_mrab	Num	8	Date of congestive heart failure: converted to Days (in relation to randomization)
10	correv_mrab	Num	8	Coronary revascularization
11	correv_days_mrab	Num	8	Date of coronary revascularization: converted to Days (in relation to randomization)
12	pad_mrab	Num	8	Peripheral artery disease
13	pad_days_mrab	Num	8	Date of PAD: converted to Days (in relation to randomization)
14	stroke_mrab	Num	8	Stroke
15	stroke_days_mrab	Num	8	Date of stroke: converted to Days (in relation to randomization)
16	fallfr_mrab	Num	8	Falls and fractures
17	fallfr_days_mrab	Num	8	Date of fall or fracture: converted to Days (in relation to randomization)
18	nota_mrab	Num	8	None of the above
19	icd9cod1_mrab	Char	20	ICD 9 code 1
20	icd9cod2_mrab	Char	20	ICD 9 code 2
21	icd9cod3_mrab	Char	20	ICD 9 code 3
22	icd9cod4_mrab	Char	20	ICD 9 code 4
23	icd9cod5_mrab	Char	20	ICD 9 code 5
24	icd9cod6_mrab	Char	20	ICD 9 code 6
25	proccod1_mrab	Num	8	Procedure code 1
26	proccod2_mrab	Num	8	Procedure code 2
27	proccod3_mrab	Num	8	Procedure code 3
28	proccod4_mrab	Num	8	Procedure code 4
29	adm_days_mrab	Num	8	Admission date: converted to Days (in relation to randomization)
30	dis_days_mrab	Num	8	Discharge date: converted to Days (in relation to randomization)

Data Set Name: *pl66_eventevaluation.sas7bdat*

Num	Variable	Type	Len	Label
1	pMaskID	Num	8	LIFE PILOT Participant Identifier
2	vc	Char	4	Visit Code
3	vis_days	Num	8	Date of Visit: converted to Days (in relation to randomization)
4	evnt_dat_days	Num	8	pL64: Date of Event: converted to Days (in relation to randomization)
5	source_eevl	Num	8	pL64: Event Evaluation Source
6	lifethrt_eevl	Num	8	pL64: 1. Criteria for Serious Adverse Events: A. Acute life threatening
7	sevdisab_eevl	Num	8	pL64: 1. Criteria for Serious Adverse Events: B. Results in prolonged, permanent severe disability
8	sewillns_eevl	Num	8	pL64: 1. Criteria for Serious Adverse Events: C. A severe illness, or accident (includes worsening of a pre-existing injury)
9	inhosp_eevl	Num	8	pL64: 1. Criteria for Serious Adverse Events: D. Inpatient hospitalization, surgical procedure, or treatment to prevent a serious event
10	death_eevl	Num	8	pL64: 1. Criteria for Serious Adverse Events: E. Event resulted in death
11	notser_eevl	Num	8	pL64: 2. Does not meet the criteria of serious but is unexpected.
12	relint_eevl	Num	8	pL64: 3. Relationship to Intervention: A. Causal relationship between the adverse event and the intervention
13	intstop_eevl	Num	8	pL64: 4. Has the intervention been interrupted or stopped in relation to this adverse event?
14	sdeff_eevl	Num	8	pL64: 5. Has the participant experienced other intolerable side effects or symptoms and requested suspension or reduction of the study?
15	listprot_eevl	Num	8	pL64: 6. Was the adverse event(s) listed in the protocol?
16	listinf_eevl	Num	8	pL64: 7. Was the adverse event(s) listed in the informed consent?
17	chnprot_eevl	Num	8	pL64: 8. Should a change in the protocol be considered to reduce or eliminate risk to subjects?
18	chninf_eevl	Num	8	pL64: 9. Should a change in the informed consent document(s) be considered to better inform and protect the rights and welfare of study subjects?
19	witness_eevl	Num	8	pL64: 10. Was the event witnessed on-site by study staff?
20	evnttyp_eevl	Char	100	pL64: Event Summary

Data Set Name: *pl75_primaryoutcome.sas7bdat*

Num	Variable	Type	Len	Label
1	pMaskID	Num	8	LIFE PILOT Participant Identifier
2	vc	Char	4	Visit Code
3	outcome	Char	75	Primary Outcome
4	outcome_days	Num	8	Date Primary Outcome: converted to days (in relation to randomization)
5	closeout	Num	3	Close Out visit (1=yes, 0=no)

Data Set Name: baseline_key_variables.sas7bdat

Num	Variable	Type	Len	Label
1	MaskID	Num	8	LIFE Participant Identifier
2	strata_gender	Num	8	Gender used for stratification
3	rand_year	Num	8	Randomization Year
4	rand_quarter	Num	8	Randomization Quarter
5	gender_tscr	Char	2	Gender
6	sub_female	Num	8	Subgroup Sex
7	age	Num	8	Age (yrs): at Randomization
8	sub_age	Num	8	Subgroup Age
9	hisp_tscr	Num	8	Latino, Hispanic or of Spanish origin
10	af_am_tscr	Num	8	African-American
11	native_tscr	Num	8	Native American/Alaskan Native
12	asian_tscr	Num	8	Asian
13	oth_race_tscr	Num	8	Other Race
14	white_tscr	Num	8	Caucasian/White
15	hawaii_tscr	Num	8	Native Hawaiian/Pacific Islander
16	nonwhite	Num	8	Non-white race (Hispanic: white)
17	nonwhiteH	Num	8	Non-white race (Hispanic: non-white)
18	racevar	Num	8	Race Group
19	sub_race	Num	8	Subgroup Race
20	livalone_demg	Num	8	Live Alone
21	marst_demg	Num	8	Marital Status
22	lastgr_demg	Num	8	Last Grade Completed
23	recode_edu	Num	8	Education reclassified from other specified
24	avesbp	Num	8	Average systolic blood pressure (mmHg)
25	avedbp	Num	8	Average diastolic blood pressure (mmHg)
26	avewc	Num	8	Average waist circumference (cm)
27	abi_abim_BL	Num	8	ABI calculated score (Q11)
28	cm_bdht	Num	8	Body Height (cm)
29	wtkg_BL	Num	8	Weight (kg)
30	bmi_BL	Num	8	Body Mass Index
31	smokcurr_demg	Num	8	Current Smoker
32	smokd100_demg	Num	8	Ever Smoked 100+ Cigarettes
33	smoking	Num	8	Smoking
34	healthrt_mhah	Num	8	Overall Health (Q1)
35	hrtattk_mhah	Num	8	MI/heart attack
36	hrtfailr_mhah	Num	8	Heart Failure or CHF (Q6)
37	sub_cvd	Num	8	Subgroup CVD

Num	Variable	Type	Len	Label
38	diabetes_mhah	Num	8	Diabetes
39	sub_diabetes	Num	8	Subgroup Diabetes
40	arthrits_mhah	Num	8	Arthritis or Rheumatism
41	lungdis_mhah	Num	8	Chronic Lung Disease (Q25)
42	totalscore_chmp_BL	Num	8	CHAMPS Total Score
43	trial1_grip_BL	Num	8	Grip Dom Hand First Trial
44	trial2_grip_BL	Num	8	Grip Dom Hand Second Trial
45	matsf_xml_BL	Num	8	matsf score auto generated
46	matsf_manual_BL	Num	8	matsf score manually entered
47	matsfscore_BL	Num	8	matsf score manual or generated
48	tbt_scr_sppb_BL	Num	8	Total Balance Test Score (corrected when not performed according to protocol)
49	gs_lngth_sppb_BL	Num	8	Length of SPPB Walk Test Course
50	gait_speed_sppb_BL	Num	8	Fastest SPPB Gait Speed (meters/sec)
51	sub_gait	Num	8	Subgroup SPPB Gait Speed
52	gst_scr_sppb_BL	Num	8	Gait Speed Test Score
53	rct_time_sppb_BL	Num	8	Time to Complete 5 Chair Stands (seconds)
54	cst_scr_sppb_BL	Num	8	Chair Stand Test Score
55	tot_scr_sppb_BL	Num	8	SPPB Total Score (corrected when not performed according to protocol)
56	sub_sppb	Num	8	Subgroup SPPB
57	walk_comp_w400_BL	Num	8	400 Meter Walk Completed
58	walk_min_w400_BL	Num	8	Minutes Walked
59	walk_sec_w400_BL	Num	8	Seconds Walked
60	walk_time_BL	Num	8	400 Meter Walk total time (sec)
61	selfefficacy_400m_BL	Num	8	PRMS:self efficacy 400m walk
62	assist_disq	Num	8	Requires assistance on at least 1 of 6 tasks
63	basic_adl_disq	Num	8	PAT-D Disability Domain 1: Basic ADL Score
64	mobility_disq	Num	8	PAT-D Disability Domain 2: Mobility Score
65	iadl_disq	Num	8	PAT-D Disability Domain 3: Instrumental Activities of Daily Living
66	total_score_disq	Num	8	PAT-D: Pepper Assessment Tool for Disability
67	sumfaq_BL	Num	8	FAQ Sum
68	cesdscore_BL	Num	8	CESD score
69	hrql_stressed_BL	Num	8	HRQL Stressed Score
70	sum_epworth_BL	Num	8	Epworth Sleepiness Scale (ESSQ)
71	nmis_epworth_BL	Num	8	ESSQ, number of missing items (8 items)
72	cat_epworth_BL	Num	8	ESSQ >= 10
73	sum_insi_BL	Num	8	Insomnia Severity Index (INSI)
74	nmis_insi_BL	Num	8	INSI, number of missing items (7 items)
75	cat_insi_BL	Num	8	INSI >= 8
76	sum_psqi_BL	Num	8	Pittsburgh Sleep Quality Index (PSQI)

Num	Variable	Type	Len	Label
77	nmis_psqi_BL	Num	8	PSQI, number of missing items (7 items)
78	cat_psqi_BL	Num	8	PSQI > 5
79	_3MSE_BL	Num	8	3MSE: Total Score (max=100)
80	sub_3MSE	Num	8	Post-hoc Subgroup 3MSE
81	LTmemory_BL	Num	8	3MSE: Long Term Memory Score (max=5)
82	Registration_BL	Num	8	3MSE: Registration Score (max=3)
83	ReversalN_BL	Num	8	3MSE: Mental Reversal, Numbers Score (max=2)
84	ReversalWord_BL	Num	8	3MSE: Mental Reversal, Word Score (max=5)
85	Recall1_BL	Num	8	3MSE: 1st Recall Score (max=9)
86	TemporalOrientation_BL	Num	8	3MSE: Temporal Orientation Score (max=15)
87	SpatialOrientation_BL	Num	8	3MSE: Spatial Orientation Score (max=5)
88	Naming_BL	Num	8	3MSE: Object Naming Score (max=5)
89	Naming4_BL	Num	8	3MSE: Naming 4-legged Animal Score (max=10)
90	Similarities_BL	Num	8	3MSE: Similarities Score (max=6)
91	Repetition_BL	Num	8	3MSE: Repitition Score (max=5)
92	Read_Obey_BL	Num	8	3MSE: Read and Obey Score (max=3)
93	Writing_BL	Num	8	3MSE: Writing Score (max=5)
94	CopyShape_BL	Num	8	3MSE: Copy Intersecting Pentagons Score (max=10)
95	Command3_BL	Num	8	3MSE: Three-Stage Command Score (max=3)
96	Recall2_BL	Num	8	3MSE: 2nd Recall Score (max=9)
97	dsst_score_BL	Num	8	WAIS/DSST score
98	hvltimmediate_BL	Num	8	HVLT: immediate recall
99	hvltdelayed_BL	Num	8	HVLT: delayed recall
100	hvltrcog_BL	Num	8	HVLT: 100*total_true/12
101	flanker_num_congr_trials_BL	Num	8	FLANKER # congruent trials
102	flanker_num_incongr_trials_BL	Num	8	FLANKER # incongruent trials
103	flanker_median_rt_incongr_BL	Num	8	FLANKER median reaction time,incongruent trials
104	flanker_median_rt_congr_BL	Num	8	FLANKER median reaction time,congruent trials
105	flanker_pct_accurate_congr_BL	Num	8	FLANKER %accurate,congruent trials
106	flanker_pct_accurate_incongr_BL	Num	8	FLANKER %accurate, incongruent trials
107	oneback_numtrials_m_BL	Num	8	ONEBACK #trials, m
108	oneback_numtrials_z_BL	Num	8	ONEBACK #trials, z
109	oneback_numtimeouts_m_BL	Num	8	ONEBACK # timeouts, m
110	oneback_numtimeouts_z_BL	Num	8	ONEBACK # timeouts,z
111	oneback_truepos_m_BL	Num	8	ONEBACK true pos rate,m trials(chose m)
112	oneback_truepos_z_BL	Num	8	ONEBACK true pos rate,z trials(chose z)
113	oneback_falsepos_m_BL	Num	8	ONEBACK false pos rate,m trials(chose z)
114	oneback_falsepos_z_BL	Num	8	ONEBACK false pos rate, z trials(chose m)
115	oneback_timeoutrate_z_BL	Num	8	ONEBACK time-out rate, z trials

Num	Variable	Type	Len	Label
116	oneback_timeoutrate_m_BL	Num	8	ONEBACK time-out rate, m trials
117	oneback_hmfa_m_BL	Num	8	ONEBACK hits-false alarms,m trials
118	twoback_numtrials_z_BL	Num	8	TWOBACK # trials, z
119	twoback_numtrials_m_BL	Num	8	TWOBACK # trials, m
120	twoback_truepos_m_BL	Num	8	TWOBACK true pos rate, m trials(chose m)
121	twoback_truepos_z_BL	Num	8	TWOBACK true pos rate, z trials(chose z)
122	twoback_falsepos_z_BL	Num	8	TWOBACK false pos rate, z trials(chose m)
123	twoback_falsepos_m_BL	Num	8	TWOBACK false pos rate, m trials(chose z)
124	twoback_timeouts_m_BL	Num	8	TWOBACK time-out rate, m trials
125	twoback_timeouts_z_BL	Num	8	TWOBACK time-out rate, z trials
126	twoback_hmfa_m_BL	Num	8	TWOBACK hits - false alarms,m trials
127	task_numcorrect_switch_BL	Num	8	TASKSWITCH # correct, Task-Switching, switch condition
128	task_numtrials_switch_BL	Num	8	TASKSWITCH #trials, switching
129	task_numcorrect_noswitch_BL	Num	8	TASKSWITCH #correct, Task-Switching, non-switch condition
130	task_numtrials_noswitch_BL	Num	8	TASKSWITCH #trials, no switching
131	task_reactiontime_switch_BL	Num	8	TASKSWITCH reaction time, switching
132	task_reactiontime_noswitch_BL	Num	8	TASKSWITCH reaction time, no switching
133	task_pctcorrect_switch_BL	Num	8	TASKSWITCH % correct, switching
134	task_pctcorrect_noswitch_BL	Num	8	TASKSWITCH % correct, no switching
135	MetSGlucose	Num	8	METS Glucose (≥ 100) or meds
136	MetSAbdominalObesity	Num	8	METS Abd Obese (Men WC ≥ 102 cm, Women WC ≥ 88 cm)
137	MetSHDL	Num	8	METS Lo HDL (Men < 40 , Women < 50) or meds
138	MetSTrig	Num	8	METS Hi Trig (≥ 150)
139	MetSBP	Num	8	METS Hi BP (Sys ≥ 130 &/or Dia ≥ 85) or meds
140	MetSCount	Num	8	Count of metabolic syndrome criteria
141	MetS	Num	8	Metabolic syndrome

Data Set Name: *life01_key.sas7bdat*

Num	Variable	Type	Len	Label
1	MaskID	Num	8	LIFE Participant Identifier
2	Arm	Num	8	Randomization Arm
3	Intervention	Char	20	Intervention Assignment: description
4	strata_gender	Num	8	Gender from randomization
5	ClinicalSite	Num	8	Geographic Clinical Site and Stratification variable (11-level)
6	daysMT_Living	Num	8	Main Trial: Last living contact with participant (days from randomization)
7	daysMT_MMD	Num	8	Main Trial: Last MMD (pass/fail) assessment (days from randomization)
8	daysMT_OutcomeEvents	Num	8	Main Trial: Last Hosp/Outcome events ascertainment (days from randomization)
9	daysMT_Collection	Num	8	Main Trial: Last data collection (days from randomization)
10	daysPIV_Living	Num	8	Post-Intervention: Last living contact with participant (days from randomization)
11	daysPIV_MMD	Num	8	Post-Intervention: Last MMD (pass/fail) assessment (days from randomization)
12	daysPIV_OutcomeEvents	Num	8	Post-Intervention: Last Hosp/Outcome events ascertainment (days from randomization)
13	daysPIV_Collection	Num	8	Post-Intervention: Last data collection (days from randomization)

Data Set Name: *life01b_activitystatus.sas7bdat*

Num	Variable	Type	Len	Label
1	MaskID	Num	8	LIFE Participant Identifier
2	vc	Char	5	Visit Sequence Code
3	CheckList_Days	Num	8	Time Study Visit Check List completed (days in relation to randomization)
4	Dropout_Days	Num	8	Time Participant Withdrew Consent or Lost to Follow-up (days in relation to randomization)
5	Deceased_Days	Num	8	Time of Participant Death (days in relation to randomization)
6	visit	Num	8	Data collected for visit
7	proxy	Num	8	Visit completed by Proxy
8	clsV	Num	8	Close-Out Visit
9	alive	Num	8	Alive (1=yes, 0=no, 2=unknown)
10	active	Num	8	Active Participant (1=yes, 0=no)
11	withdrew_consent	Num	8	Participant withdrew consent (1=yes)

Data Set Name: *life02_mmd.sas7bdat*

Num	Variable	Type	Len	Label
1	MaskID	Num	8	LIFE Participant Identifier
2	event_MMD	Num	8	Indicator for Major Mobility Disability
3	T_MMD	Num	8	Time between randomization and MMD or censoring (years)
4	censor_MMD	Num	8	Indicator for censoring of MMD

Data Set Name: *life02b_mmdpiv.sas7bdat*

Num	Variable	Type	Len	Label
1	MaskID	Num	8	LIFE Participant Identifier
2	event_MMD_piv	Num	8	Indicator for Major Mobility Disability through the Post-intervention visit
3	T_MMD_piv	Num	8	Time between randomization and MMD or censoring (years) through the Post-intervention visit
4	censor_MMD_piv	Num	8	Indicator for censoring of MMD through the Post-intervention visit

Data Set Name: *life02c_mmdrepeated.sas7bdat*

Num	Variable	Type	Len	Label
1	MaskID	Num	8	LIFE Participant Identifier
2	vc	Char	5	Visit Sequence Code
3	status_days	Num	8	Time to MMD determination: Pass, Fail, Unknown, Deceased (days in relation to randomization)
4	MMD_status	Char	9	Major Mobility Disability Status per visit
5	MMD_determination	Char	30	Source for determining Pass/Fail MMD status OR Unknown/Deceased MMD status
6	death	Num	8	Occurrence of death
7	comment	Char	150	Clarification notes as needed

Data Set Name: *life03_persistentmmd.sas7bdat*

Num	Variable	Type	Len	Label
1	MaskID	Num	8	LIFE Participant Identifier
2	event_pMMD	Num	8	Indicator for Persistent Major Mobility Disability
3	T_pMMD	Num	8	Time between randomization and Persistent MMD or censoring (years)
4	censor_pMMD	Num	8	Indicator for censoring of Persistent MMD

Data Set Name: *life03b_persistentmmdpiv.sas7bdat*

Num	Variable	Type	Len	Label
1	MaskID	Num	8	LIFE Participant Identifier
2	event_pMMD_piv	Num	8	Indicator for Persistent Major Mobility Disability through the Post-intervention visit
3	T_pMMD_piv	Num	8	Time between randomization and Persistent MMD or censoring (years) through the Post-intervention visit
4	censor_pMMD_piv	Num	8	Indicator for censoring of Persistent MMD through the Post-intervention visit

Data Set Name: *life04_sae.sas7bdat*

Num	Variable	Type	Len	Label
1	MaskID	Num	8	LIFE Participant Identifier
2	eventnum_primary	Char	7	Event Number
3	daysevntrn_eevl	Num	8	Time of Event: Days in relation to randomization
4	rand_eevl	Num	8	Status change due to event
5	evnt_loc_eevl	Char	20	Event location
6	death_eevl	Num	8	Death
7	hospital_eevl	Num	8	Hospitalization
8	emroom_eevl	Num	8	ER visit
9	fracture_eevl	Num	8	Fracture
10	outpsurg_eevl	Num	8	Outpatient surgery
11	lte_eevl	Num	8	Life threatening
12	disability_eevl	Num	8	Permanent/persistent Disability
13	disability_source	Num	8	Disability source
14	sigclinic_eevl	Num	8	Abnormal lab result
15	otherevent_eevl	Num	8	Other SAE
16	restrict_eevl	Num	8	Restricted activity
17	unexpected_eevl	Num	8	Unexpected AE
18	atsite_eevl	Num	8	Occurred at site
19	witnessed_eevl	Num	8	Witnessed by personnel
20	organocode_eevl	Char	100	Primary Organ Code
21	pricat_eevl	Char	100	Primary Dx Category
22	prterm_eevl	Char	100	Primary Dx Term
23	pricode_eevl	Num	8	Primary MedDRA Code
24	sec1cat_eevl	Char	100	Secondary Dx Category 1
25	sec1term_eevl	Char	100	Secondary Dx Term 1
26	sec1code_eevl	Num	8	Primary MedDRA Code 1
27	sec2cat_eevl	Char	100	Secondary Dx Category 2
28	sec2term_eevl	Char	100	Secondary Dx Term 2
29	sec2code_eevl	Num	8	Secondary MedDRA Code 2
30	causality_eevl	Num	8	Causal relationship
31	treatsae_eevl	Num	8	Received immediate treatment
32	eventongoing_eevl	Num	8	Event ongoing
33	finalstat_eevl	Num	8	Final Status of event
34	saeenddays_eevl	Num	8	Time SAE Closed: Days in relation to randomization
35	matched	Num	8	Hospitalization captured at assessment visit
36	admdays_ohos	Num	8	Time of Admission: Days in relation to randomization
37	disdays_ohos	Num	8	Time of Discharge: Days in relation to randomization

Num	Variable	Type	Len	Label
38	msosigname2	Num	8	Name of Medical Safety Officer signature
39	docsigname2	Num	8	Name of Study Physician signature
40	masked	Num	8	Reported to masked staff
41	who_ohos	Num	8	Who identified hospitalization
42	assoc_ohos	Num	8	Were outcomes associated with hosp?
43	ddc1_ohos	Num	8	ICD-9 Discharge Code 1
44	ddc2_ohos	Num	8	ICD-9 Discharge Code 2
45	ddc3_ohos	Num	8	ICD-9 Discharge Code 3
46	ddc4_ohos	Num	8	ICD-9 Discharge Code 4
47	ddc5_ohos	Num	8	ICD-9 Discharge Code 5
48	ddc6_ohos	Num	8	ICD-9 Discharge Code 6
49	ddc7_ohos	Num	8	ICD-9 Discharge Code 7
50	ddc8_ohos	Num	8	ICD-9 Discharge Code 8
51	ddc9_ohos	Num	8	ICD-9 Discharge Code 9
52	ddc10_ohos	Num	8	ICD-9 Discharge Code 10
53	prc1_ohos	Num	8	ICD-9 Procedure Code 1
54	prc2_ohos	Num	8	ICD-9 Procedure Code 2
55	prc3_ohos	Num	8	ICD-9 Procedure Code 3
56	prc4_ohos	Num	8	ICD-9 Procedure Code 4
57	prc5_ohos	Num	8	ICD-9 Procedure Code 5
58	prc6_ohos	Num	8	ICD-9 Procedure Code 6
59	prc7_ohos	Num	8	ICD-9 Procedure Code 7
60	prc8_ohos	Num	8	ICD-9 Procedure Code 8
61	prc9_ohos	Num	8	ICD-9 Procedure Code 9
62	prc10_ohos	Num	8	ICD-9 Procedure Code 10

Data Set Name: *life05_sa_intervention.sas7bdat*

Num	Variable	Type	Len	Label
1	MaskID	Num	8	LIFE Participant Identifier
2	attend_sags_n	Num	8	SA Sessions due (Adoption)
3	attend_sags_sum	Num	8	SA Sessions attended (Adoption)
4	attend_sags_pct	Num	8	SA % Sessions attended (Adoption)
5	attend_maint_n	Num	8	SA Sessions due (Maintenance)
6	attend_maint_sum	Num	8	SA Sessions attended (Maintenance)
7	attend_maint_pct	Num	8	SA % Sessions attended (Maintenance)
8	attend_phases_n	Num	8	SA Sessions due (Adoption+Maintenance)
9	attend_phases_sum	Num	8	SA Sessions attended (Adoption+Maintenance)
10	attend_phases_pct	Num	8	SA % Sessions attended (Adoption+Maintenance)
11	attend_phases_y1_n	Num	8	SA Sessions due In First Year (Adoption+Maintenance)
12	attend_phases_y1_sum	Num	8	SA Sessions attended In First Year (Adoption+Maintenance)
13	attend_phases_y1_pct	Num	8	SA % Sessions attended In First Year (Adoption+Maintenance)
14	attend_phases_y2_n	Num	8	SA Sessions due In First 2 Years (Adoption+Maintenance)
15	attend_phases_y2_sum	Num	8	SA Sessions attended In First 2 Years (Adoption+Maintenance)
16	attend_phases_y2_pct	Num	8	SA % Sessions attended In First 2 Years (Adoption+Maintenance)

Data Set Name: *life06_pa_intervention.sas7bdat*

Num	Variable	Type	Len	Label
1	MaskID	Num	8	LIFE Participant Identifier
2	attend_all_n	Num	8	PA Sessions due (all sessions)
3	attend_all_sum	Num	8	PA Sessions attended (all sessions)
4	attend_all_pct	Num	8	PA % Sessions attended (all sessions)
5	attend_all_y1_n	Num	8	PA Sessions due In First Year (all sessions)
6	attend_all_y1_sum	Num	8	PA Sessions attended In First Year (all sessions)
7	attend_all_y1_pct	Num	8	PA % Sessions attended In First Year (all sessions)
8	attend_all_y2_n	Num	8	PA Sessions due In First 2 years (all sessions)
9	attend_all_y2_sum	Num	8	PA Sessions attended In First 2 years (all sessions)
10	attend_all_y2_pct	Num	8	PA % Sessions attended In First 2 years (all sessions)
11	attend_noex_n	Num	8	PA Sessions due (excluding sessions during extended leave)
12	attend_noex_sum	Num	8	PA Sessions attended (excluding sessions during extended leave)
13	attend_noex_pct	Num	8	PA % Sessions attended (excluding sessions during extended leave)
14	attend_noex_y1_n	Num	8	PA Sessions due In First Year (excluding sessions during extended leave)
15	attend_noex_y1_sum	Num	8	PA Sessions attended In First Year (excluding sessions during extended leave)
16	attend_noex_y1_pct	Num	8	PA % Sessions attended In First Year (excluding sessions during extended leave)
17	attend_noex_y2_n	Num	8	PA Sessions due In First 2 years (excluding sessions during extended leave)
18	attend_noex_y2_sum	Num	8	PA Sessions attended In First 2 years (excluding sessions during extended leave)
19	attend_noex_y2_pct	Num	8	PA % Sessions attended In First 2 years (excluding sessions during extended leave)
20	EL_instances	Num	8	Instances of Extended Leave
21	suspnd_days_1	Num	8	Time to Start of Suspension 1: Days in relation to randomization
22	returned_1	Num	8	Returned from Suspension 1
23	restart_days_1	Num	8	Time to Return from Suspension 1: Days in relation to randomization
24	duration_1	Num	8	Duration of Suspension 1 (days)
25	suspnd_days_2	Num	8	Time to Start of Suspension 2: Days in relation to randomization
26	returned_2	Num	8	Returned from Suspension 2
27	restart_days_2	Num	8	Time to Return from Suspension 2: Days in relation to randomization
28	duration_2	Num	8	Duration of Suspension 2 (days)
29	suspnd_days_3	Num	8	Time to Start of Suspension 3: Days in relation to randomization
30	returned_3	Num	8	Returned from Suspension 3
31	restart_days_3	Num	8	Time to Return from Suspension 3: Days in relation to randomization
32	duration_3	Num	8	Duration of Suspension 3 (days)
33	suspnd_days_4	Num	8	Time to Start of Suspension 4: Days in relation to randomization
34	returned_4	Num	8	Returned from Suspension 4
35	restart_days_4	Num	8	Time to Return from Suspension 4: Days in relation to randomization
36	duration_4	Num	8	Duration of Suspension 4 (days)
37	suspnd_days_5	Num	8	Time to Start of Suspension 5: Days in relation to randomization

Num	Variable	Type	Len	Label
38	returned_5	Num	8	Returned from Suspension 5
39	restart_days_5	Num	8	Time to Return from Suspension 5: Days in relation to randomization
40	duration_5	Num	8	Duration of Suspension 5 (days)
41	suspnd_days_6	Num	8	Time to Start of Suspension 6: Days in relation to randomization
42	returned_6	Num	8	Returned from Suspension 6
43	restart_days_6	Num	8	Time to Return from Suspension 6: Days in relation to randomization
44	duration_6	Num	8	Duration of Suspension 6 (days)
45	suspnd_days_7	Num	8	Time to Start of Suspension 7: Days in relation to randomization
46	returned_7	Num	8	Returned from Suspension 7
47	restart_days_7	Num	8	Time to Return from Suspension 7: Days in relation to randomization
48	duration_7	Num	8	Duration of Suspension 7 (days)
49	suspnd_days_8	Num	8	Time to Start of Suspension 8: Days in relation to randomization
50	returned_8	Num	8	Returned from Suspension 8
51	restart_days_8	Num	8	Time to Return from Suspension 8: Days in relation to randomization
52	duration_8	Num	8	Duration of Suspension 8 (days)
53	suspnd_days_9	Num	8	Time to Start of Suspension 9: Days in relation to randomization
54	returned_9	Num	8	Returned from Suspension 9
55	restart_days_9	Num	8	Time to Return from Suspension 9: Days in relation to randomization
56	duration_9	Num	8	Duration of Suspension 9 (days)

Data Set Name: *life07_medications.sas7bdat*

Num	Variable	Type	Len	Label
1	MaskID	Num	8	LIFE Participant Identifier
2	vc	Char	5	Visit Sequence Code
3	vis_days	Num	8	Days in relation to randomization
4	AnyDrugs	Num	8	Taken Any Drugs
5	AntiHypertensives	Num	8	ANTIHYPERTENSIVES Any Meds
6	AntiHypertensives_num	Num	8	ANTIHYPERTENSIVES # of Meds
7	BB	Num	8	BETA BLOCKERS Any Meds
8	BB_num	Num	8	BETA BLOCKERS # of Meds
9	ACE	Num	8	ACE INHIBITORS Any Meds
10	ACE_num	Num	8	ACE INHIBITORS # of Meds
11	ARB	Num	8	ARB (ANGIOTENSIN TYPE 2 ANTAGONISTS) Any Meds
12	ARB_num	Num	8	ARB (ANGIOTENSIN TYPE 2 ANTAGONISTS) # of Meds
13	CCBlock	Num	8	CALCIUM CHANNEL BLOCKERS Any Meds
14	CCBlock_num	Num	8	CALCIUM CHANNEL BLOCKERS # of Meds
15	Hydralizine	Num	8	HYDRALIZINE Any Meds
16	Hydralizine_num	Num	8	HYDRALIZINE # of Meds
17	Clonidine	Num	8	CLONIDINE Any Meds
18	Clonidine_num	Num	8	CLONIDINE # of Meds
19	AlphaBlock	Num	8	ALPHA BLOCKERS Any Meds
20	AlphaBlock_num	Num	8	ALPHA BLOCKERS # of Meds
21	Diuretics	Num	8	DIURETICS Any Meds
22	Diuretics_num	Num	8	DIURETICS # of Meds
23	Statins	Num	8	STATINS Any Meds
24	Statins_num	Num	8	STATINS # of Meds
25	Niacin	Num	8	NIACIN Any Meds
26	Niacin_num	Num	8	NIACIN # of Meds
27	Fibrates	Num	8	FIBRATES Any Meds
28	Fibrates_num	Num	8	FIBRATES # of Meds
29	LipiDrug	Num	8	LIPID LOWERING Any Meds
30	LipiDrug_num	Num	8	LIPID LOWERING # of Meds
31	Aspirin	Num	8	ASPIRIN Any Meds
32	Aspirin_num	Num	8	ASPIRIN # of Meds
33	Warfarin	Num	8	WARFARIN Any Meds
34	Warfarin_num	Num	8	WARFARIN # of Meds
35	AntiCoagulants	Num	8	ANTICOAGULANTS Any Meds
36	AntiCoagulants_num	Num	8	ANTICOAGULANTS # of Meds
37	AntiPlatelets	Num	8	ANTIPLATELETS Any Meds

Num	Variable	Type	Len	Label
38	AntiPlatelets_num	Num	8	ANTIPLATELETS # of Meds
39	AntiArrhythmics	Num	8	ANTIARRHYTHMICS Any Meds
40	AntiArrhythmics_num	Num	8	ANTIARRHYTHMICS # of Meds
41	Insulins	Num	8	INSULINS Any Meds
42	Insulins_num	Num	8	INSULINS # of Meds
43	Metformin	Num	8	METFORMIN Any Meds
44	Metformin_num	Num	8	METFORMIN # of Meds
45	OralHypGly	Num	8	ORAL HYPOGLYCEMIC Any Meds
46	OralHypGly_num	Num	8	ORAL HYPOGLYCEMIC # of Meds
47	Lovaza	Num	8	LOVAZA Any Meds
48	Lovaza_num	Num	8	LOVAZA # of Meds
49	Omega3	Num	8	OMEGA-3 POLYUNSATURATED FATTY ACIDS Any Meds
50	Omega3_num	Num	8	OMEGA-3 POLYUNSATURATED FATTY ACIDS # of Meds
51	NSAID	Num	8	NSAIDs Any Meds
52	NSAID_num	Num	8	NSAIDs # of Meds

Data Set Name: *life08_labs.sas7bdat*

Num	Variable	Type	Len	Label
1	MaskID	Num	8	LIFE Participant Identifier
2	vc	Char	5	visit code
3	ALBUMIN	Num	8	Serum Chemistry Result: Metalobc Panel, Albumin (g/dL)
4	ALBUMIN_Alert	Char	4	Serum Chemistry (alert): Metalobc Panel, Albumin
5	ALKALINE_PHOSPHATASE	Num	8	Serum Chemistry Result: Metalobc Panel, Alkaline Phosphatase (U/L)
6	ALKALINE_PHOSPHATASE_Alert	Char	4	Serum Chemistry (alert): Metalobc Panel, Alkaline Phosphatase
7	ALAT_SGPT	Num	8	Serum Chemistry Result: Metalobc Panel, ALT (U/L)
8	ALAT_SGPT_Alert	Char	4	Serum Chemistry (alert): Metalobc Panel, ALT
9	ASAT_SGOT_	Num	8	Serum Chemistry Result: Metalobc Panel, Metalobc Panel, AST (U/L)
10	ASAT_SGOT_Alert	Char	4	Serum Chemistry (alert): Metalobc Panel, Metalobc Panel, AST
11	UREA_NITROGEN	Num	8	Serum Chemistry Result: Metalobc Panel, BUN (mg/dL)
12	UREA_NITROGEN_Alert	Char	4	Serum Chemistry (alert): Metalobc Panel, BUN
13	CALCIUM	Num	8	Serum Chemistry Result: Metalobc Panel, Calcium (mg/dL)
14	CALCIUM_Alert	Char	4	Serum Chemistry (alert): Metalobc Panel, Calcium
15	CHLORIDE	Num	8	Serum Chemistry Result: Metalobc Panel, Chloride (meq/L)
16	CHLORIDE_Alert	Char	4	Serum Chemistry (alert): Metalobc Panel, Chloride
17	CARBON_DIOXIDE_CO2	Num	8	Serum Chemistry Result: Metalobc Panel, CO2 (meq/L)
18	CARBON_DIOXIDE_CO2_Alert	Char	4	Serum Chemistry (alert): Metalobc Panel, CO2
19	CREATININE_ENZ_SER	Num	8	Serum Chemistry Result: Metalobc Panel, Creatinine (mg/dL)
20	CREATININE_ENZ_SER_Alert	Char	4	Serum Chemistry (alert): Metalobc Panel, Creatinine
21	GLUCOSE	Num	8	Serum Chemistry Result: Metalobc Panel, Glucose (mg/dL)
22	GLUCOSE_Alert	Char	4	Serum Chemistry (alert): Metalobc Panel, Glucose
23	POTASSIUM	Num	8	Serum Chemistry Result: Metalobc Panel, Potassium (meq/L)
24	POTASSIUM_Alert	Char	4	Serum Chemistry (alert): Metalobc Panel, Potassium
25	SODIUM	Num	8	Serum Chemistry Result: Metalobc Panel, Sodium (meq/L)
26	SODIUM_Alert	Char	4	Serum Chemistry (alert): Metalobc Panel, Sodium
27	BILIRUBIN_TOTAL	Num	8	Serum Chemistry Result: Metalobc Panel, Total Bilirubin (md/dL)
28	BILIRUBIN_TOTAL_Alert	Char	4	Serum Chemistry (alert): Metalobc Panel, Total Bilirubin
29	PROTEIN_TOTAL_SERUM	Num	8	Serum Chemistry Result: Metalobc Panel, Total Protein (g/dL)
30	PROTEIN_TOTAL_SERUM_Alert	Char	4	Serum Chemistry (alert): Metalobc Panel, Total Protein
31	BUN_CREAT_RATIO	Num	8	Serum Chemistry Result: Metalobc Panel, BUN/Creatinine Ratio
32	BUN_CREAT_RATIO_Alert	Char	4	Serum Chemistry (alert): Metalobc Panel, BUN/Creatinine Ratio
33	GLOBULIN	Num	8	Serum Chemistry Result: Metalobc Panel, Globulin (g/dL)
34	GLOBULIN_Alert	Char	4	Serum Chemistry (alert): Metalobc Panel, Globulin
35	A_G_RATIO	Num	8	Serum Chemistry Result: Metalobc Panel, Albumin/Globulin Ratio
36	A_G_RATIO_Alert	Char	4	Serum Chemistry (alert): Metalobc Panel, Albumin/Globulin Ratio
37	EST_CREATININE_CLEAR	Num	8	MDRD Estimate of GFR (mL/min/1.73*m ²)

Num	Variable	Type	Len	Label
38	EST_CREATININE_CLEAR_Alert	Char	4	MDRD Estimate of GFR: Alert
39	CHOLESTEROL_TOTAL	Num	8	Serum Chemistry Result: Lipid Panel, Total Cholesterol (mg/dL)
40	CHOLESTEROL_TOTAL_Alert	Char	4	Serum Chemistry (alert): Lipid Panel, Total Cholesterol
41	HDL_CHOL_DIRECT	Num	8	Serum Chemistry Result: Lipid Panel, HDL Cholesterol (mg/dL)
42	HDL_CHOL_DIRECT_Alert	Char	4	Serum Chemistry (alert): Lipid Panel, HDL Cholesterol
43	LDL_CHOL_CALCULATION	Num	8	Serum Chemistry Result: Lipid Panel, LDL Cholesterol, calculated (mg/dL)
44	LDL_CHOL_CALCULATION_Alert	Char	4	Serum Chemistry (alert): Lipid Panel, LDL Cholesterol, calculated
45	TRIGLYCERIDES	Num	8	Serum Chemistry Result: Lipid Panel, Triglycerides (mg/dL)
46	TRIGLYCERIDES_Alert	Char	4	Serum Chemistry (alert): Lipid Panel, Triglycerides
47	VLDL_CALCULATION	Num	8	Serum Chemistry Result: Lipid Panel, VLDL Cholesterol, calculated (mg/dL)
48	VLDL_CALCULATION_Alert	Char	4	Serum Chemistry (alert): Lipid Panel, VLDL Cholesterol, calculated
49	RED_CELL_COUNT	Num	8	CBC Result: Red Blood Cell count (millions/ μ L)
50	RED_CELL_COUNT_Alert	Char	4	CBC (alert): Red Cell count
51	WHITE_CELL_COUNT	Num	8	CBC Result: White Blood Cell count (thousands/ μ L)
52	WHITE_CELL_COUNT_Alert	Char	4	CBC (alert): White Blood Cell count
53	HEMATOCRIT	Num	8	CBC Result: Hematocrit (%)
54	HEMATOCRIT_Alert	Char	4	CBC (alert): Hematocrit
55	HEMOGLOBIN	Num	8	CBC Result: Hemoglobin (g/dL)
56	HEMOGLOBIN_Alert	Char	4	CBC (alert): Hemoglobin
57	MCV	Num	8	CBC Result: Mean corpuscular volume (fL)
58	MCV_Alert	Char	4	CBC (alert): Mean corpuscular volume
59	MCH	Num	8	CBC Result: Mean corpuscular hemoglobin (pg)
60	MCH_Alert	Char	4	CBC (alert): Mean corpuscular hemoglobin
61	MCHC	Num	8	CBC Result: Mean corpuscular hemoglobin concentration (%)
62	MCHC_Alert	Char	4	CBC (alert): Mean corpuscular hemoglobin concentration
63	RDW	Num	8	CBC Result: Red Blood Cell distribution width (%)
64	RDW_Alert	Char	4	CBC (alert): Red Blood Cell distribution width
65	PLATELET_COUNT	Num	8	CBC Result: Platelet count (/mm ³)
66	PLATELET_COUNT_Alert	Char	4	CBC (alert): Platelet count
67	MPV	Num	8	CBC Result: Mean platelet volume (fL)
68	MPV_Alert	Char	4	CBC (alert): Mean platelet volume
69	TOTAL_NEUTROPHILS	Num	8	CBC Result: Total Neutrophils (%)
70	TOTAL_NEUTROPHILS_Alert	Char	4	CBC (alert): Total Neutrophils
71	TOTAL_NEUTROPHILS_AB	Num	8	CBC Result: Total Neutrophils, absolute count (thousands/ μ L)
72	TOTAL_NEUTROPHILS_AB_Alert	Char	4	CBC (alert): Total Neutrophils, absolute count
73	NEUTROPHIL_SEGS	Num	8	CBC Result: Neutrophils, segmented (%)
74	NEUTROPHIL_SEGS_Alert	Char	4	CBC (alert): Neutrophils, segmented
75	NEUTROPHILS_ABSOLUTE	Num	8	CBC Result: Neutrophils, segmented, absolute count (thousands/ μ L)
76	NEUTROPHILS_ABSOLUTE_Alert	Char	4	CBC (alert): Neutrophils, segmented, absolute count

Num	Variable	Type	Len	Label
77	LYMPHOCYTES	Num	8	CBC Result: Lymphocytes (%)
78	LYMPHOCYTES_Alert	Char	4	CBC (alert): Lymphocytes
79	LYMPHOCYTES_ABSOLUTE	Num	8	CBC Result: Lymphocytes, absolute count (thousands/ μ L)
80	LYMPHOCYTES_ABSOLUTE_Alert	Char	4	CBC (alert): Lymphocytes, absolute count
81	MONOCYTES	Num	8	CBC Result: Monocytes (%)
82	MONOCYTES_Alert	Char	4	CBC (alert): Monocytes
83	MONOCYTES_ABSOLUTE	Num	8	CBC Result: Monocytes, absolute count (thousands/ μ L)
84	MONOCYTES_ABSOLUTE_Alert	Char	4	CBC (alert): Monocytes, absolute count
85	EOSINOPHILS	Num	8	CBC Result: Eosinophils (%)
86	EOSINOPHILS_Alert	Char	4	CBC (alert): Eosinophils
87	EOSINOPHILS_ABSOLUTE	Num	8	CBC Result: Eosinophils, absolute count (thousands/ μ L)
88	EOSINOPHILS_ABSOLUTE_Alert	Char	4	CBC (alert): Eosinophils, absolute count
89	BASOPHILS	Num	8	CBC Result: Basophils (%)
90	BASOPHILS_Alert	Char	4	CBC (alert): Basophils
91	BASOPHILS_ABSOLUTE	Num	8	CBC Result: Basophils, absolute count (thousands/ μ L)
92	BASOPHILS_ABSOLUTE_Alert	Char	4	CBC (alert): Basophils, absolute count

Data Set Name: life09_matsf.sas7bdat

Num	Variable	Type	Len	Label
1	MaskID	Num	8	LIFE Participant Identifier
2	vc	Char	5	visit code
3	MATsf_days	Num	8	Time of MATsf: Days in relation to randomization
4	MATsf_score	Num	8	MATsf Score: Manual or Generated
5	matsf_xml	Num	8	MATsf Score: Auto generated
6	matsf_manual	Num	8	MATsf Score: Manually entered

Data Set Name: *life10_accelerometry.sas7bdat*

Num	Variable	Type	Len	Label
1	MaskID	Num	8	LIFE Participant Identifier
2	vc	Char	5	visit code
3	days_accel	Num	8	First day valid accelerometry data collection (days in relation to randomization)
4	valid_days	Num	8	# of days having 600+ minutes of valid wear time for these daily average metrics
5	minutes_wear	Num	8	# of daily average minutes of wear time
6	minutes_nonwear	Num	8	# of daily average minutes of non-wear time
7	activity_total	Num	8	activity count daily average during wear time
8	steps_total	Num	8	steps count daily average during wear time
9	minutes_sedentary	Num	8	# of daily average wear time minutes with activity counts < 100
10	activity_sedentary	Num	8	activity total daily average for minutes with activity counts < 100
11	steps_sedentary	Num	8	steps total daily average for minutes with activity <100
12	minutes_light	Num	8	# of daily average wear time minutes with activity between 100 & 2019
13	activity_light	Num	8	activity total daily average for minutes with activity between 100 & 2019
14	steps_light	Num	8	steps total daily average for minutes with activity between 100 & 2019
15	minutes_moderate	Num	8	# of daily average wear time minutes with activity between 2020 & 5999
16	activity_moderate	Num	8	activity total daily average for minutes with activity between 2020 & 5999
17	steps_moderate	Num	8	steps total for minutes with activity between 2020 & < 5999
18	minutes_vigorous	Num	8	# of daily average wear time minutes with activity >=6000
19	activity_vigorous	Num	8	activity total daily average for minutes with activity >=6000
20	steps_vigorous	Num	8	steps total daily average for minutes with activity >=6000
21	minutes_500	Num	8	# of daily average wear time minutes with activity >=500
22	activity_500	Num	8	activity total daily average for minutes with activity >=500
23	steps_500	Num	8	steps total daily average for minutes with activity >=500
24	minutes_760	Num	8	# of daily average wear time minutes with activity >=760
25	activity_760	Num	8	activity total daily average for minutes with activity >=760
26	steps_760	Num	8	steps total daily average for minutes with activity >=760
27	minutes_1000	Num	8	# of daily average wear time minutes with activity >=1000
28	activity_1000	Num	8	activity total daily average for minutes with activity >=1000
29	steps_1000	Num	8	steps total daily average for minutes with activity >=1000
30	minutes_1500	Num	8	# of daily average wear time minutes with activity >=1500
31	activity_1500	Num	8	activity total daily average for minutes with activity >=1500
32	steps_1500	Num	8	steps total daily average for minutes with activity >=1500
33	minutes_2000	Num	8	# of daily average wear time minutes with activity >=2000
34	activity_2000	Num	8	activity total daily average for minutes with activity >=2000
35	steps_2000	Num	8	steps total daily average for minutes with activity >=2000
36	minutes_2500	Num	8	# of daily average wear time minutes with activity >=2500
37	activity_2500	Num	8	activity total daily average for minutes with activity >=2500

Num	Variable	Type	Len	Label
38	steps_2500	Num	8	steps total daily average for minutes with activity ≥ 2500
39	minutes_100_1040	Num	8	# of daily average wear time minutes with activity between 100 and 1040
40	minutes_1041_1951	Num	8	# of daily average wear time minutes with activity between 1041 and 1951
41	peak30min_cadence	Num	8	Peak 30 (consecutive) minute cadence
42	minutes_over100	Num	8	# of daily average wear time minutes with steps ≥ 100
43	Peak_Steps_1m	Num	8	Peak 1 minute cadence
44	Peak_Steps_5m	Num	8	Peak 5 minute cadence
45	Peak_Steps_10m	Num	8	Peak 10 minute cadence
46	Peak_Steps_15m	Num	8	Peak 15 minute cadence
47	Peak_Steps_20m	Num	8	Peak 20 minute cadence
48	Peak_Steps_30m	Num	8	Peak 30 minute cadence

Data Set Name: *life11_eprime.sas7bdat*

Num	Variable	Type	Len	Label
1	MaskID	Num	8	LIFE Participant Identifier
2	vc	Char	5	visit code
3	vis_days	Num	8	Time of ePrime: Days in relation to randomization
4	flanker_num_congr_trials	Num	8	FLANKER # congruent trials
5	flanker_num_incongr_trials	Num	8	FLANKER # incongruent trials
6	flanker_median_rt_incongr	Num	8	FLANKER median reaction time,incongruent trials
7	flanker_median_rt_congr	Num	8	FLANKER median reaction time,congruent trials
8	flanker_pct_accurate_congr	Num	8	FLANKER %accurate,congruent trials
9	flanker_pct_accurate_incongr	Num	8	FLANKER %accurate, incongruent trials
10	oneback_numtrials_m	Num	8	ONEBACK #trials, m
11	oneback_numtrials_z	Num	8	ONEBACK #trials, z
12	oneback_numtimeouts_m	Num	8	ONEBACK # timeouts, m
13	oneback_numtimeouts_z	Num	8	ONEBACK # timeouts,z
14	oneback_truepos_m	Num	8	ONEBACK true pos rate,m trials(chose m)
15	oneback_truepos_z	Num	8	ONEBACK true pos rate,z trials(chose z)
16	oneback_falsepos_m	Num	8	ONEBACK false pos rate,m trials(chose z)
17	oneback_falsepos_z	Num	8	ONEBACK false pos rate, z trials(chose m)
18	oneback_timeoutrate_z	Num	8	ONEBACK time-out rate, z trials
19	oneback_timeoutrate_m	Num	8	ONEBACK time-out rate, m trials
20	oneback_hmfa_m	Num	8	ONEBACK hits-false alarms,m trials
21	twoback_numtrials_z	Num	8	TWOBACK # trials, z
22	twoback_numtrials_m	Num	8	TWOBACK # trials, m
23	twoback_truepos_m	Num	8	TWOBACK true pos rate, m trials(chose m)
24	twoback_truepos_z	Num	8	TWOBACK true pos rate, z trials(chose z)
25	twoback_falsepos_z	Num	8	TWOBACK false pos rate, z trials(chose m)
26	twoback_falsepos_m	Num	8	TWOBACK false pos rate, m trials(chose z)
27	twoback_timeouts_m	Num	8	TWOBACK time-out rate, m trials
28	twoback_timeouts_z	Num	8	TWOBACK time-out rate, z trials
29	twoback_hmfa_m	Num	8	TWOBACK hits - false alarms,m trials
30	task_numcorrect_switch	Num	8	TASKSWITCH # correct, Task-Switching, switch condition
31	task_numtrials_switch	Num	8	TASKSWITCH #trials, switching
32	task_numcorrect_noswitch	Num	8	TASKSWITCH #correct, Task-Switching, non-switch condition
33	task_numtrials_noswitch	Num	8	TASKSWITCH #trials, no switching
34	task_reactiontime_switch	Num	8	TASKSWITCH reaction time, switching
35	task_reactiontime_noswitch	Num	8	TASKSWITCH reaction time, no switching
36	task_pctcorrect_switch	Num	8	TASKSWITCH % correct, switching
37	task_pctcorrect_noswitch	Num	8	TASKSWITCH % correct, no switching

Data Set Name: *life12_cognitivefunction.sas7bdat*

Num	Variable	Type	Len	Label
1	MaskID	Num	8	LIFE Participant Identifier
2	zglobcomp0	Num	8	Baseline: Global Cognitive Function z-score
3	zefcomp0	Num	8	Baseline: Executive Function z-score
4	znbackcomp0	Num	8	Baseline: (e-Prime) N-Back Test z-score
5	zflankcomp0	Num	8	Baseline: (e-Prime) Flanker Task z-score
6	ztscomp0	Num	8	Baseline: (e-Prime) Task Switching z-score
7	zhvltcomp0	Num	8	Baseline: HVLT z-score
8	zhvltimmediate0	Num	8	Baseline: HVLT immediate recall z-score
9	zhvltdelayed0	Num	8	Baseline: HVLT delayed recall z-score
10	zscore_wais0	Num	8	Baseline: WAIS-III DSST z-score
11	z_3mse0	Num	8	Baseline: 3MSE z-score
12	znbackcomp18	Num	8	18 Mo: (e-Prime) N-Back Test z-score
13	zflankcomp18	Num	8	18 Mo: (e-Prime) Flanker Task z-score
14	ztscomp18	Num	8	18 Mo: (e-Prime) Task Switching z-score
15	znbackcomp24	Num	8	24 Mo: (e-Prime) N-Back Test z-score
16	zflankcomp24	Num	8	24 Mo: (e-Prime) Flanker Task z-score
17	zhvltcomp24	Num	8	24 Mo: HVLT z-score
18	zhvltimmediate24	Num	8	24 Mo: HVLT immediate recall z-score
19	zhvltdelayed24	Num	8	24 Mo: HVLT delayed recall z-score
20	zscore_wais24	Num	8	24 Mo: WAIS-III DSST z-score
21	znbackcomp30	Num	8	30 Mo: (e-Prime) N-Back Test z-score
22	zflankcomp30	Num	8	30 Mo: (e-Prime) Flanker Task z-score
23	ztscomp30	Num	8	30 Mo: (e-Prime) Task Switching z-score
24	zglobcompfu	Num	8	Follow-Up: Global Cognitive Function z-score
25	zefcompfu	Num	8	Follow-Up: Executive Function z-score

Data Set Name: life13_cogimpairedevents.sas7bdat

Num	Variable	Type	Len	Label
1	MaskID	Num	8	LIFE Participant Identifier
2	vc	Char	5	visit code
3	eventCI_days	Num	8	Time of Cognitive Impairment Event (days in relation to randomization)
4	final_class_CI	Num	8	Cognitive Impairment Adjudication Classification

Data Set Name: *life14_secondaryoutcomes.sas7bdat*

Num	Variable	Type	Len	Label
1	MaskID	Num	8	LIFE Participant Identifier
2	eventSO_days	Num	8	Time of Secondary Outcome Event (days in relation to randomization)
3	final_class_SO	Num	8	Secondary Outcome Adjudication Classification
4	death_any	Num	8	Death occurred during follow-up, all records selected
5	sensorSO_days	Num	8	Time to Secondary Outcome Censoring (days in relation to randomization)

Data Set Name: *life15_fallsfractures.sas7bdat*

Num	Variable	Type	Len	Label
1	MaskID	Num	8	LIFE Participant Identifier
2	fall_days	Num	8	Date of Adjudicated Fracture (days from randomization)
3	Pb_reported	Num	8	Main Trial fractures reported in publication
4	anyfracture_matched	Num	8	Any Adjudicated Fracture
5	facial_matched	Num	8	Adjudicated Facial Fracture (nose or other)
6	hand_matched	Num	8	Adjudicated Hand or Finger Fracture (metacarpal or finger)
7	lowerarm_matched	Num	8	Adjudicated Lower Arm Fracture (radius, ulna, or carpal)
8	elbow_matched	Num	8	Adjudicated Elbow Fracture (lower humerus, upper radius, or ulna)
9	upperarm_matched	Num	8	Adjudicated Upper Arm Fracture (upper humerus, shaft, clavicle, or scapula)
10	rib_iffa_matched	Num	8	Adjudicated Rib fracture
11	pelvis_iffa_matched	Num	8	Adjudicated Pelvis Fracture
12	hip_matched	Num	8	Adjudicated Hip Fracture (Neck of femur, Intertrochanteric fracture, Greater trochanter, or proximal femur)
13	uleg_femur_iffa_matched	Num	8	Adjudicated shaft of femur fracture
14	knee_matched	Num	8	Adjudicated knee fracture (patella or tibial plateau)
15	leg_tib_iffa_matched	Num	8	Adjudicated fracture of tibia or fibula
16	leg_ankle_iffa_matched	Num	8	Adjudicated fracture of ankle (very distal tibia/fibula or talus)
17	foot_matched	Num	8	Adjudicated foot fracture (toes, tarsal, metatarsal bones, heel, or calcaneus)
18	oth_iffa_matched	Num	8	Adjudicated Other Fracture
19	spine_iffa_matched	Num	8	Adjudicated Spine or back (vertebra) fracture
20	tailbone_iffa_matched	Num	8	Adjudicated Tailbone fracture (Sacrum or coccyx)
21	OTHER_CAT_matched	Num	8	Adjudicated Fracture of Spine, Tailbone, or Other Fracture
22	hosp_matched	Num	8	Adjudicated hospitalization for fall or fracture

Data Set Name: *life16_spirometry.sas7bdat*

Num	Variable	Type	Len	Label
1	MaskID	Num	8	LIFE Participant Identifier
2	vc	Char	3	Visit Code
3	MIP5	Num	8	Maximum MIP Score (cmH2O)
4	llnmip	Num	8	Lower Limit of Normal MIP score (cmH2O)
5	fev1	Num	8	Forced Expiratory Volume after 1s (FEV1), L
6	FEV1_z_score	Num	8	Z-score of observed FEV1
7	FEV1_LLN	Num	8	Lower Limit of Normal FEV1, L
8	fef2575_z_score	Num	8	Z-score of observed FEF 25-75%
9	fef2575_LLN	Num	8	Lower Limit of Normal FEF 25-75%, L/s
10	fev6	Num	8	Forced Expiratory Volume after 6s (FEV6), L
11	fev1fev6	Num	8	Ratio of FEV1/FEV6
12	fef2575	Num	8	Forced Expiratory Flow 25-75%, L/s

Data Set Name: *life05a_sa_intattendance.sas7bdat*

Num	Variable	Type	Len	Label
1	MaskID	Num	8	LIFE Participant Identifier
2	vis_days	Num	8	Date of Visit: converted to Days (in relation to randomization)
3	attend_sags	Num	8	Successful Aging: Intervention Session attendance
4	reason_miv	Char	45	Successful Aging: Reason for missing intervention session

Data Set Name: *life05b_sa_intmaintenance.sas7bdat*

Num	Variable	Type	Len	Label
1	MaskID	Num	8	LIFE Participant Identifier
2	vis_days	Num	8	Date of Visit: converted to Days (in relation to randomization)
3	block	Num	8	Successful Aging: Intervention Session Block sequence (4-week increment)
4	session	Num	8	Successful Aging: Intervention Session - number per block
5	window_lower	Num	8	Successful Aging: Intervention Session - earliest date (converted to days in relation to randomization) for session block
6	window_upper	Num	8	Successful Aging: Intervention Session - latest date (converted to days in relation to randomization) for session block
7	missed_session	Num	8	Successful Aging: Intervention Session - failed to attend

Data Set Name: *life06a_pa_intattendance.sas7bdat*

Num	Variable	Type	Len	Label
1	MaskID	Num	8	LIFE Participant Identifier
2	vis_days	Num	8	Date of Visit: converted to Days (in relation to randomization)
3	attend_phac	Num	8	Physical Activity: Intervention Session attendance
4	reason_miv	Char	39	Physical Activity: Reason for missing intervention session
5	rpe2_phac	Num	8	Physical Activity: Intervention session - Borg Rating of Perceived Exertion Scale
6	ttwlktmm_phac	Num	8	Physical Activity: Intervention session - Total walk time (minutes)
7	strength_phac	Num	8	Physical Activity: Intervention session - Participated in strength exercise
8	balance_phac	Num	8	Physical Activity: Intervention session - Participated in balance exercise

Data Set Name: *life06b_pa_inthomelog.sas7bdat*

Num	Variable	Type	Len	Label
1	MaskID	Num	8	LIFE Participant Identifier
2	hl_days	Num	8	Date: converted to Days (in relation to randomization)
3	walking	Num	8	Physical Activity: Intervention Home Log Performance: Walking (minutes)
4	strength	Num	8	Physical Activity: Intervention Home Log Performance: Strength Exercises
5	stretches	Num	8	Physical Activity: Intervention Home Log Performance: Stretching Exercises
6	balance	Num	8	Physical Activity: Intervention Home Log Performance: Balance Exercise

Data Set Name: *life07a_medicationinventory.sas7bdat*

Num	Variable	Type	Len	Label
1	MaskID	Num	8	LIFE Participant Identifier
2	vc	Char	5	Visit Code
3	vis_days	Num	8	Date of Visit: converted to Days (in relation to randomization)
4	prescribed	Num	8	Medication Inventory: drug type
5	drugN	Num	8	Medication Inventory: reported sequence
6	DrugName	Char	75	Medication Inventory: name
7	DrugDose	Char	10	Medication Inventory: dose
8	DoseUnit	Char	7	Medication Inventory: unit
9	Formulation	Num	8	Formulation Code
10	Container	Num	8	Container Seen

Data Set Name: *life08a_labmeasurements.sas7bdat*

Num	Variable	Type	Len	Label
1	MaskID	Num	8	LIFE Participant Identifier
2	vc	Char	5	Visit Code
3	collection_days	Num	8	Specimen collection date: converted to Days (in relation to randomization)
4	reported_days	Num	8	Laboratory report date: converted to Days (in relation to randomization)
5	otc	Char	10	Orderable code
6	otcname	Char	50	Order Code Name
7	rtc	Char	25	Resultable test code
8	rtcname	Char	100	Analyte name (RTC name)
9	repunit	Char	25	Units of measure
10	replow	Char	7	Alert Range Low/As Reported Low reference range
11	rephigh	Char	7	Alert Range High/As Reported High reference range
12	resultaa	Char	50	text results - As Reported
13	retest	Num	8	Re-test number-A Site, Patient, Visit specific counter
14	rsltstat	Char	2	Results Status
15	rptstat	Char	1	Report Status
16	reprslt	Char	10	Result

Data Set Name: *life14a_ecgmeasurements.sas7bdat*

Num	Variable	Type	Len	Label
1	MaskID	Num	8	LIFE Participant Identifier
2	vc	Char	5	visit code
3	ECG_days	Num	8	Time of ECG (days in relation to randomization)
4	RBBB	Char	8	ARBBB, RBBB, RLAFB, RLPFB
5	LBbB	Char	8	ALBBB, LBbB
6	LAFB	Char	8	LAFB, IRAFB, RLAFB
7	LPFB	Char	8	LPFB, IRPFB, RLPFB
8	vcd_oth	Char	8	Any other (VCD)
9	qtc_gt500	Char	8	QTc>500
10	anyT_neg	Char	8	Any T more negative than .1, Except in AVR
11	anyQ_gt03	Char	8	Any Q>.03, Except in AVR
12	stmid_gt05	Char	8	STmid ELEV>.05 in 2 contiguous leads In V leads or in 2 of II,III, AVF
13	stmid_gt1tenth	Char	8	STmid ELEV>.1 in 2 contiguous leads In V leads or in 2 of II,III, AVF
14	stmid_depgt05	Char	8	STmid DEP> .05 in 2 contiguous leads In V leads or in 2 of II,III, AVF
15	stmid_depgt1tenth	Char	8	STmid DEP> .1 in 2 contiguous leads In V leads or in 2 of II,III, AVF
16	anyIMI	Char	8	Any IMI except IMI3, IMI4, IMI18
17	anyPMI	Char	8	Any PMI
18	anyLMI	Char	8	Any LMI except LMI10, LMI28
19	anyAMI	Char	8	Any AMI except AMI1, AMI3, AMI4, AMI16, AMI17
20	anyALI	Char	8	Any ALI
21	hrtrate	Num	8	Heart Rate
22	printerval	Num	8	PR interval
23	printerval_note	Char	8	PR interval: invalid
24	qrsinterval	Num	8	QRS interval
25	qrsinterval_note	Char	8	QRS interval: invalid
26	qtcinterval	Num	8	QTc interval
27	qtrr	Num	8	QTrr Gender adjusted, race and age(>50) not significant: for men, QTrr=QT+185(1-60/HR)+6
28	qrsfrontal	Num	8	QRS Frontal plane axis
29	qrstangle	Char	8	QRS-T angle
30	stmidV5	Num	8	STmid in V5
31	normECG	Char	8	Normal ECG Normal Severity
32	normSinusRhythm	Char	8	Normal sinus rhythm SR and HR is 60-100
33	sinusBradycardia	Char	8	Sinus bradycardia (<60) (SB,SR) &HR<60
34	ratelt40	Char	8	Rate<40 HR<40
35	sinusTachgt100	Char	8	Sinus tachycardia (>100) (ST,SR)&HR>100
36	rategt130	Char	8	Rate>130 HR>130
37	atrialFib	Char	8	Atrial fibrillation AFIB, AFIB0, FLFIB, 3AVFF, AFIBT

Num	Variable	Type	Len	Label
38	atrialFlutter	Char	8	Atrial flutter AFLT, AFLT2, AFL2, AFLT3, AFLT4, AFLTV, 3AVBFF, FLFIB
39	anyothrhythm	Char	8	Any other rhythm
40	anypacemaker	Char	8	Any pacemaker
41	atrialpremature	Char	8	Atrial premature complexes APC, MAPC, SVBIG, SVTRI
42	ventricularpremature	Char	8	Ventricular premature complexes VPC, MVPC, MFVPC, PVPC, RVPC, MFPVPC, MFRVPC, VBIG, VTRI
43	otherpremature	Char	8	Any other premature complex
44	avblock1st	Char	8	AV block, 1st degree BAVCD, 1AVB
45	avblock2ndM1	Char	8	AV block, 2nd degree Mobitz 1 2AVB, 2AVB2, 2AVB3, 2AVB4
46	avblock2ndM2	Char	8	AV block, 2nd degree Mobitz 2 2AVBV
47	avblock3rd	Char	8	AV block, 3rd degree 3AVB, 3AVBIR, 3AVBFF
48	lowvoltage	Char	8	Low voltage
49	rtventrichypertrophy	Char	8	Right ventricular hypertrophy except RSR1, LT, ET, Include BVH
50	lfventrichypertrophy	Char	8	Left ventricular hypertrophy except HVOLT

Data Set Name: *life16a_spirometrymeasures.sas7bdat*

Num	Variable	Type	Len	Label
1	MaskID	Num	8	LIFE Participant Identifier
2	vc	Char	5	Visit Code
3	QFEV1	Char	1	FEV1 quality attribute (A, B, C: acceptable, D or F: unacceptable)
4	FEV1	Num	8	Forced Expiratory Volume after 1s (FEV1), L
5	FEV1_M	Num	8	Predicted FEV, L
6	FEV1_z_score	Num	8	Z-score of observed FEV
7	FEV1_percent_predicted	Num	8	Percent of Predicted FEV, %
8	FEV1_LLNI	Num	8	Lower Limit of Normal FEV, L
9	FEV6_M	Num	8	Predicted Forced Expiratory Volume after 6s (FEV6), L
10	FEV6_z_score	Num	8	Z-score of observed FEV6
11	FEV6_percent_predicted	Num	8	Percent of Predicted FEV6, %
12	FEV6_LLNI	Num	8	Lower Limit of Normal FEV6, L
13	FEV1FEV6_M	Num	8	Predicted FEV/FEV6, L
14	FEV1FEV6_z_score	Num	8	Z-score of observed FEV/FEV6
15	FEV1FEV6_percent_predicted	Num	8	Percent of Predicted FEV1/FEV6, %
16	FEV1FEV6_LLNI	Num	8	Lower Limit of Normal FEV/FEV6, L
17	FEF2575_M	Num	8	Predicted FEF 25-75%, L/s
18	FEF2575_z_score	Num	8	Z-score of observed FEF 25-75%
19	FEF2575_percent_predicted	Num	8	Percent of Predicted FEF 25-75%, %
20	FEF2575_LLNI	Num	8	Lower Limit of Normal FEF 25-75%, L/s
21	FEV6	Num	8	Forced Expiratory Volume after 6s (FEV6), L
22	FEV1FEV6	Num	8	Ratio of FEV/FEV6
23	FEF2575	Num	8	Forced Expiratory Flow 25-75%, L/s

Data Set Name: *life16b_maxinspexppressures.sas7bdat*

Num	Variable	Type	Len	Label
1	MaskID	Num	8	LIFE Participant Identifier
2	vc	Char	5	Visit Code
3	FET	Num	8	Forced expiratory time (s) - Largest
4	MIP1	Num	8	Smallest MIP Score (cmH2O)
5	MIP2	Num	8	4th highest MIP Score (cmH2O)
6	MIP3	Num	8	3rd highest MIP Score (cmH2O)
7	MIP4	Num	8	2nd highest MIP Score (cmH2O)
8	MIP5	Num	8	Maximum MIP Score (cmH2O)
9	expmip	Num	8	Expected MIP score (cmH2O)
10	llnmip	Num	8	Lower Limit of Normal MIP score (cmH2O)

Data Set Name: f001_telephonescreening.sas7bdat

Num	Variable	Type	Len	Label
1	MaskID	Num	8	LIFE Participant Identifier
2	vc	Char	5	Visit Code
3	vis_days	Num	8	Date of Visit: converted to Days (in relation to randomization)
4	broch_tscr	Num	8	F001: 1. How did you hear about the study?(Brochure)
5	mag_tscr	Num	8	F001: 1. How did you hear about the study?(Magazine)
6	event_tscr	Num	8	F001: 1. How did you hear about the study?(Event)
7	news_ad_tscr	Num	8	F001: 1. How did you hear about the study?(Newspaper Ad)
8	flyer_tscr	Num	8	F001: 1. How did you hear about the study?(Flyer)
9	referral_tscr	Num	8	F001: 1. How did you hear about the study?(Referral)
10	fu_call_tscr	Num	8	F001: 1. How did you hear about the study?(FU Call)
11	radio_ad_tscr	Num	8	F001: 1. How did you hear about the study?(Radio Ad)
12	letter_tscr	Num	8	F001: 1. How did you hear about the study?(Letter)
13	tv_ad_tscr	Num	8	F001: 1. How did you hear about the study?(Television Ad)
14	dk_tscr	Num	8	F001: 1. How did you hear about the study?(Don't Know)
15	ref_tscr	Num	8	F001: 1. How did you hear about the study?(Refused)
16	other_hrd_tscr	Num	8	F001: 1. How did you hear about the study?(Other)
17	tar_area_tscr	Num	8	F001: 2. Is volunteer's zip code in the study target area?
18	areayear_tscr	Num	8	F001: 3.a Do you plan to be in the area for the next two years?
19	area6wks_tscr	Num	8	F001: 3.b Do you plan to be out of the area for more than 6 consecutive weeks in the next year?
20	Baseline_Age	Num	8	F001: 4.a. What is your age?
21	age_chk_tscr	Num	8	F001: 4.b. Is participant 70 to 89?
22	gender_tscr	Char	2	F001: 6. May I ask your gender?
23	hispc_tscr	Num	8	F001: 7. Are you Latino, Hispanic or of Spanish origin?
24	af_am_tscr	Num	8	F001: 8. What is your race?(African American/Black)
25	native_tscr	Num	8	F001: 8. What is your race?Native American/Alaskan Native)
26	asian_tscr	Num	8	F001: 8. What is your race?(Asian)
27	oth_race_tscr	Num	8	F001: 8. What is your race?(Other)
28	white_tscr	Num	8	F001: 8. What is your race?(Caucasian/White)
29	hawaii_tscr	Num	8	F001: 8. What is your race?Native Hawaiian/Pacific Islander)
30	refused_tscr	Num	8	F001: 8. What is your race?(Refused)
31	prevpat_tscr	Num	8	F001: 9. Did you previously participate in the LIFE Study?
32	prgmpat_tscr	Num	8	F001: 10. Did you participate in one of the two programs (physical activity or successful aging)?
33	walker_tscr	Num	8	F001: 11. Do you usually use a walker to get around?
34	walksmrm_tscr	Num	8	F001: 12. Are you able to walk across a small room without the help of another person?
35	walk_tscr	Num	8	F001: 12.a Are you able to walk a 1/4 mile, which is about 3 to 4 blocks, on a flat surface without the help of another person?

Num	Variable	Type	Len	Label
36	reg_ex_tscr	Num	8	F001: 13. In the past month, have you spent at least 20 minutes a week getting regular exercise? Exercise includes activities like: brisk walking, jogging, weight lifting, cycling, aerobics, or dancing.
37	incrhr_tscr	Num	8	F001: 13.a. Do these activities increase your heart rate, breathing and perspiration?
38	exdays_tscr	Num	8	F001: 13.b.i. How many days per week do you regularly do these activities?
39	exmin_tscr	Num	8	F001: 13.b.ii. How many minutes per day?
40	exminwk_tscr	Num	8	F001: 14. Calculate total # of minutes per week .
41	exdanceyn_tscr	Num	8	F001: 14.a. Dance? (such as square, folk, line, ballroom) (Do not count aerobic dance.)
42	exdanceminwk_tscr	Num	8	F001: 14.a. dance minutes week
43	exwalkyn_tscr	Num	8	F001: 14.b. Walk uphill or hike uphill?
44	exwalkminwk_tscr	Num	8	F001: 14.b. walk uphill minutes week
45	exfastyn_tscr	Num	8	F001: 14.c. Walk fast or briskly for exercise
46	exfastminwk_tscr	Num	8	F001: 14.c. walk fast minutes week
47	exwateryn_tscr	Num	8	F001: 14.d. Do water exercises? (Do not count other swimming)
48	exwaterminwk_tscr	Num	8	F001: 14.d. water exercises minutes week
49	extotalwk_tscr	Num	8	F001: 14.e. Sum of minutes per week. (Only eligible if #14e is less than 125 minutes.)
50	comm_tscr	Num	8	F001: 15. Does a hearing, speech or other problem make the candidate unable to communicate? (Only eligible if #15 is NO.)
51	elig1_tscr	Num	8	F001: 16. Is the participant eligible?
52	arthriti_tscr	Num	8	F001: 17. Do you have arthritis that is so severe that it would prevent you from participating in a physical activity program?
53	oxygen_tscr	Num	8	F001: 18. Do you have severe lung disease that requires you to wear oxygen or to regularly take steroid pills or injections?
54	hrtdis_tscr	Num	8	F001: 19. Do you have severe heart disease that would prevent you from participating in an exercise program? For example, do you get chest pain when walking two or three blocks or up a flight of stairs?
55	cardiac_tscr	Num	8	F001: 20. Have you ever had a cardiac arrest which required resuscitation?
56	imp_defb_tscr	Num	8	F001: 21. Do you have an implanted cardiac defibrillator?
57	park_tscr	Num	8	F001: 22. Do you have Parkinson's disease or some other serious neurological disorder? (does NOT include stroke)
58	dial_tscr	Num	8	F001: 23. Do you have severe kidney disease that requires dialysis?
59	alc14_tscr	Num	8	F001: 24. During the past week, have you drunk more than 14 alcoholic beverages, including wine, beer, sherry, or liquor?
60	nurs_hom_tscr	Num	8	F001: 25. Do you currently live in a nursing home?
61	househld_tscr	Num	8	F001: 26. Is a member of your household enrolled in the study?
62	elig2_tscr	Num	8	F001: 27. Is the participant eligible?
63	cncr_tscr	Num	8	F001: 28. In the past three years, have you been treated for cancer or been told by a doctor that you had cancer or an malignant tumor?
64	brs_cncr_tscr	Num	8	F001: 28.a. Please tell me what type of cancer you had?(Breast)
65	crv_cncr_tscr	Num	8	F001: 28.a. Please tell me what type of cancer you had?(Cervical)
66	col_cncr_tscr	Num	8	F001: 28.a. Please tell me what type of cancer you had?(Colon)
67	prs_cncr_tscr	Num	8	F001: 28.a. Please tell me what type of cancer you had?(Prostate)

Num	Variable	Type	Len	Label
68	rec_cncr_tscr	Num	8	F001: 28.a. Please tell me what type of cancer you had?(Rectal)
69	ute_cncr_tscr	Num	8	F001: 28.a. Please tell me what type of cancer you had?(Uterine)
70	thy_cncr_tscr	Num	8	F001: 28.a. Please tell me what type of cancer you had?(Thyroid)
71	orl_cncr_tscr	Num	8	F001: 28.a. Please tell me what type of cancer you had?(Oral)
72	skin_tscr	Num	8	F001: 28.a. Please tell me what type of cancer you had?(Nonmelanoma Skin)
73	oth_cncr_tscr	Num	8	F001: 28.a. Please tell me what type of cancer you had?(All Other)
74	ref_cncr_tscr	Num	8	F001: 28.a. Please tell me what type of cancer you had?(Refused)
75	cncr_rad_tscr	Num	8	F001: 28.b. Are you currently receiving radiation treatment and/or chemotherapy for this cancer?
76	elig3_tscr	Num	8	F001: 29. Is participant eligible?
77	future_tscr	Num	8	F001: 29. Can we retain your name in our files for possible participation in future studies?
78	hip_tscr	Num	8	F001: 30. Within the past 6 months, have you had a hip fracture?
79	knee_tscr	Num	8	F001: 31. Within the past 6 months, have you had hip or knee replacement?
80	infarct_tscr	Num	8	F001: 32. Within the past 6 months, have you had a heart attack or myocardial infraction that require overnight hospitalization?
81	hrt_surg_tscr	Num	8	F001: 33. Within the past 6 months, have you had major heart surgery, including valve replacement or bypass surgery?
82	stroke_tscr	Num	8	F001: 34. Within the past 6 months, have you had a stroke? (Note: does not include TIA)
83	spine_tscr	Num	8	F001: 35. Within the past 6 months, have you had spinal surgery?
84	clot_tscr	Num	8	F001: 36. Within the past 6 months, have you had a blood clot in your leg or in your lungs?
85	phy_th_tscr	Num	8	F001: 37. Are you currently receiving physical therapy aimed at the lower extremity or lower extremity functioning?
86	crpl_rhb_tscr	Num	8	F001: 38. Are you currently receiving cardiopulmonary rehabilitation?
87	oth_tr_tscr	Num	8	F001: 39. Are you currently enrolled in another intervention study? (observational studies are permissible)
88	elig4_tscr	Num	8	F001: 40. Is the participant eligible?
89	try_ag_tscr	Num	8	F001: 41. You are currently not eligible for our study, but may become eligible in the future. May I call you
90	too_busy_tscr	Num	8	F001: 42. Candidate defers clinic visit:(Too Busy)
91	sick_tscr	Num	8	F001: 42. Candidate defers clinic visit:(Sick)
92	car_othr_tscr	Num	8	F001: 42. Candidate defers clinic visit:(Caring for others)
93	no_intrs_tscr	Num	8	F001: 42. Candidate defers clinic visit:(Not interested)
94	no_help_tscr	Num	8	F001: 42. Candidate defers clinic visit:(Do not think it would help)
95	doctor_tscr	Num	8	F001: 42. Candidate defers clinic visit:(Doctor told me not to)
96	lang	Num	8	F001: Source Form Language:

Data Set Name: f003_sppb.sas7bdat

Num	Variable	Type	Len	Label
1	MaskID	Num	8	LIFE Participant Identifier
2	vc	Char	5	Visit Code
3	vis_days	Num	8	Date of Visit: converted to Days (in relation to randomization)
4	wher_tst_sppb	Num	8	F003: Where was this test performed?
5	sbss_scr_sppb	Num	8	F003: Balance Tests: 1. Side-by-Side Score
6	sbss_sec_sppb	Num	8	F003: Balance Tests: 2. Side-by-Side - Number of seconds held if less than 10 sec:
7	sts_scr_sppb	Num	8	F003: Balance Tests: 1. Semi-Tandem Stand Score
8	sts_sec_sppb	Num	8	F003: Balance Tests: 2. Semi-Tandem Stand - Number of seconds held if less than 10 sec:
9	ts_scr_sppb	Num	8	F003: Balance Tests: 1. Tandem Stand Score
10	ts_sec_sppb	Num	8	F003: Balance Tests: 2. Tandem Stand - Number of seconds held if less than 10 sec:
11	bal_not_sppb	Num	8	F003: Balance Tests: 3. If participant did not attempt test:
12	bal_scr_sppb	Num	8	F003: Total Balance Tests Score [score corrected when not performed according to protocol (or refused)]
13	recorded_bal	Num	8	F003: [Total Balance Tests Score as recorded]
14	gs_lngth_sppb	Num	8	F003: Gait Speed Test: First - 1. Length of walk test course:
15	gs_time1_sppb	Num	8	F003: Gait Speed Test: First - 3. Time for 3 or 4 meters (sec)
16	gs_not1_sppb	Num	8	F003: Gait Speed Test: First - 4. If participant did not attempt test:
17	gs_aid1_sppb	Num	8	F003: Gait Speed Test: First - 5. Aids used for first walk:
18	gs_time2_sppb	Num	8	F003: Gait Speed Test: Second - 1. Time for 3 or 4 meters (sec)
19	gs_not2_sppb	Num	8	F003: Gait Speed Test: Second - 2. If participant did not attempt or failed:
20	gs_aid2_sppb	Num	8	F003: Gait Speed Test: Second - 3. Aids used for second walk:
21	gs_timef_sppb	Num	8	F003: Gait Speed Test: Record the shorter of the two times (sec)
22	gs_4m_sc_sppb	Num	8	F003: Gait Speed Test: 4-Meter Gait speed score [corrected for refusal]
23	recorded_gs_4m_sc	Num	8	F003: [Gait Speed Test: 4-Meter Gait speed score as recorded]
24	gs_3m_sc_sppb	Num	8	F003: Gait Speed Test: 3-Meter Gait speed score [as recorded]
25	scs_sfwo_sppb	Num	8	F003: Chair Stand Test: 1. Safe to stand without help:
26	scs_rslt_sppb	Num	8	F003: Chair Stand Test: 2. Results
27	scs_not_sppb	Num	8	F003: Chair Stand Test: 3. If participant did not attempt or failed:
28	rscs_sf_sppb	Num	8	F003: Chair Stand Test: 1. Safe to stand five times
29	rscs_time_sppb	Num	8	F003: Chair Stand Test: 2. Time to complete five stands (sec)
30	rscs_not_sppb	Num	8	F003: Chair Stand Test: 3. If participant did not attempt test or failed:
31	rscs_scr_sppb	Num	8	F003: Chair Stand Test: 4. Chair Stand Score
32	tbt_scr_sppb	Num	8	F003: Total Balance Test Score [corrected when not performed according to protocol (or refused)]
33	recorded_tbt	Num	8	F003: [Total Balance Test Score as recorded]
34	gst_scr_sppb	Num	8	F003: Gait Speed Test Score [corrected for refusal]
35	recorded_gst	Num	8	F003: [Gait Speed Test Score as recorded]
36	cst_scr_sppb	Num	8	F003: Chair Stand Test Score

Num	Variable	Type	Len	Label
37	tot_scr_sppb	Num	8	F003: SPPB Total Score [corrected when not performed according to protocol (or refused)]
38	recorded_sppb	Num	8	F003: [SPPB score as recorded]
39	future_sppb	Num	8	F003: Can we retain your name in our files for possible participation in future studies?
40	lang	Num	8	F003: Source Form Language:
41	gait_speed_sppb	Num	8	[C] F003: Fastest SPPB Gait Speed (meters/sec)

Data Set Name: f004_champs.sas7bdat

Num	Variable	Type	Len	Label
1	MaskID	Num	8	LIFE Participant Identifier
2	vc	Char	5	Visit Code
3	vis_days	Num	8	Date of Visit: converted to Days (in relation to randomization)
4	visit_chmp	Num	8	F004: 1. Visit with friends or family? (other than those you live with)
5	visittm_chmp	Num	8	F004: 1. How many times a week?
6	visithr_chmp	Num	8	F004: 1. How many TOTAL hours a week did you usually do it?
7	senctr_chmp	Num	8	F004: 2. Go to the senior center?
8	senctrm_chmp	Num	8	F004: 2. How many times a week?
9	senctrhr_chmp	Num	8	F004: 2. How many TOTAL hours a week did you usually do it?
10	volwrk_chmp	Num	8	F004: 3. Do volunteer work?
11	volwrktm_chmp	Num	8	F004: 3. How many times a week?
12	volwrkhr_chmp	Num	8	F004: 3. How many TOTAL hours a week did you usually do it?
13	church_chmp	Num	8	F004: 4. Attend church or take part in church activities?
14	churchtm_chmp	Num	8	F004: 4. How many times a week?
15	churchhr_chmp	Num	8	F004: 4. How many TOTAL hours a week did you usually do it?
16	clubs_chmp	Num	8	F004: 5. Attend other club or group meetings?
17	clubstm_chmp	Num	8	F004: 5. How many times a week?
18	clubshr_chmp	Num	8	F004: 5. How many TOTAL hours a week did you usually do it?
19	comptr_chmp	Num	8	F004: 6. Use a computer?
20	comptrtm_chmp	Num	8	F004: 6. How many times a week?
21	comptrhr_chmp	Num	8	F004: 6. How many TOTAL hours a week did you usually do it?
22	crafts_chmp	Num	8	F004: 7. Do woodworking, needlework, drawing, or other arts and crafts?
23	craftstm_chmp	Num	8	F004: 7. How many times a week?
24	craftshr_chmp	Num	8	F004: 7. How many TOTAL hours a week did you usually do it?
25	dance_chmp	Num	8	F004: 8. Dance? (such as square, fold, line ballroom)(do not count aerobic dance here)
26	dancetm_chmp	Num	8	F004: 8. How many times a week?
27	dancehr_chmp	Num	8	F004: 8. How many TOTAL hours a week did you usually do it?
28	golfer_chmp	Num	8	F004: 9. Play golf, carrying or pulling your equipment? (count walking time only)
29	golferm_chmp	Num	8	F004: 9. How many times a week?
30	golferhr_chmp	Num	8	F004: 9. How many TOTAL hours a week did you usually do it?
31	golfrd_chmp	Num	8	F004: 10. Play golf, riding a cart? (count walking timeonly)
32	golfrdtm_chmp	Num	8	F004: 10. How many times a week?
33	golfrdhr_chmp	Num	8	F004: 10. How many TOTAL hours a week did you usually do it?
34	concmv_chmp	Num	8	F004: 11. Attend a concert, movie, lecture, or sport event?
35	concmvtm_chmp	Num	8	F004: 11. How many times a week?
36	concmvhr_chmp	Num	8	F004: 11. How many TOTAL hours a week did you usually do it?
37	games_chmp	Num	8	F004: 12. Play cards, bingo, or board games with other people?

Num	Variable	Type	Len	Label
38	gamestm_chmp	Num	8	F004: 12. How many times a week?
39	gameshr_chmp	Num	8	F004: 12. How many TOTAL hours a week did you usually do it?
40	pool_chmp	Num	8	F004: 13. Shoot pool or billiards?
41	pooltm_chmp	Num	8	F004: 13. How many times a week?
42	poolhr_chmp	Num	8	F004: 13. How many TOTAL hours a week did you usually do it?
43	sntenn_chmp	Num	8	F004: 14. Play singles tennis? (do not count doubles)
44	sntenntm_chmp	Num	8	F004: 14. How many times a week?
45	sntennhr_chmp	Num	8	F004: 14. How many TOTAL hours a week did you usually do it?
46	dbtenn_chmp	Num	8	F004: 15. Play doubles tennis? (do not count singles)
47	dbtenntm_chmp	Num	8	F004: 15. How many times a week?
48	dbtennhr_chmp	Num	8	F004: 15. How many TOTAL hours a week did you usually do it?
49	skate_chmp	Num	8	F004: 16. Skate? (ice, roller, in-line)
50	skatetm_chmp	Num	8	F004: 16. How many times a week?
51	skatehr_chmp	Num	8	F004: 16. How many TOTAL hours a week did you usually do it?
52	msinst_chmp	Num	8	F004: 17. Play a musical instrument?
53	msinsttm_chmp	Num	8	F004: 17. How many times a week?
54	msinsthr_chmp	Num	8	F004: 17. How many TOTAL hours a week did you usually do it?
55	read_chmp	Num	8	F004: 18. Read?
56	readtm_chmp	Num	8	F004: 18. How many times a week?
57	readhr_chmp	Num	8	F004: 18. How many TOTAL hours a week did you usually do it?
58	hvhwrk_chmp	Num	8	F004: 19. Do heavy work around the house? (such as washing windows, cleaning gutters)
59	hvhwrktm_chmp	Num	8	F004: 19. How many times a week?
60	hvhwrkhr_chmp	Num	8	F004: 19. How many TOTAL hours a week did you usually do it?
61	lthwrk_chmp	Num	8	F004: 20. Do light work around the house? (such as sweeping or vacuuming)
62	lthwrktm_chmp	Num	8	F004: 20. How many times a week?
63	lthwrkhr_chmp	Num	8	F004: 20. How many TOTAL hours a week did you usually do it?
64	hvgard_chmp	Num	8	F004: 21. Do heavy gardening ? (such as spading, raking)
65	hvgardtm_chmp	Num	8	F004: 21. How many times a week?
66	hvgardhr_chmp	Num	8	F004: 21. How many TOTAL hours a week did you usually do it?
67	ltgard_chmp	Num	8	F004: 22. Do light gardening? (such as watering plants)
68	ltgardtm_chmp	Num	8	F004: 22. How many times a week?
69	ltgardhr_chmp	Num	8	F004: 22. How many TOTAL hours a week did you usually do it?
70	wrkcar_chmp	Num	8	F004: 23. Work on your car, truck, lawn mower, or other machinery?
71	wrkcartm_chmp	Num	8	F004: 23. How many times a week?
72	wrkcarhr_chmp	Num	8	F004: 23. How many TOTAL hours a week did you usually do it?
73	jogrun_chmp	Num	8	F004: 24. Jog or run?
74	jogruntm_chmp	Num	8	F004: 24. How many times a week?
75	jogrunhr_chmp	Num	8	F004: 24. How many TOTAL hours a week did you usually do it?
76	walkup_chmp	Num	8	F004: 25. Walk uphill or hike uphill? (count only uphill part)

Num	Variable	Type	Len	Label
77	walkuptm_chmp	Num	8	F004: 25. How many times a week?
78	walkuphr_chmp	Num	8	F004: 25. How many TOTAL hours a week did you usually do it?
79	walkfs_chmp	Num	8	F004: 26. Walk fast or briskly for exercise? (do not count walking leisurely or uphill)
80	walkfstm_chmp	Num	8	F004: 26. How many times a week?
81	walkfshr_chmp	Num	8	F004: 26. How many TOTAL hours a week did you usually do it?
82	walkrr_chmp	Num	8	F004: 27. Walk to do errands? [such as to/from a store or to take children to school (count walk time only)]
83	walkrrtm_chmp	Num	8	F004: 27. How many times a week?
84	walkrrhr_chmp	Num	8	F004: 27. How many TOTAL hours a week did you usually do it?
85	walkls_chmp	Num	8	F004: 28. Walk leisurely for exercise or pleasure?
86	walklstm_chmp	Num	8	F004: 28. How many times a week?
87	walklshr_chmp	Num	8	F004: 28. How many TOTAL hours a week did you usually do it?
88	bicycl_chmp	Num	8	F004: 29. Ride a bicycle or stationary cycle?
89	bicycltm_chmp	Num	8	F004: 29. How many times a week?
90	bicyclhr_chmp	Num	8	F004: 29. How many TOTAL hours a week did you usually do it?
91	aermch_chmp	Num	8	F004: 30. Do other aerobic machines such as rowing, or step machines? (do not count treadmill or stationary cycle)
92	aermctm_chmp	Num	8	F004: 30. How many times a week?
93	aermchhr_chmp	Num	8	F004: 30. How many TOTAL hours a week did you usually do it?
94	watexr_chmp	Num	8	F004: 31. Do water exercises? (do not count other swimming)
95	watexrtm_chmp	Num	8	F004: 31. How many times a week?
96	watexrhr_chmp	Num	8	F004: 31. How many TOTAL hours a week did you usually do it?
97	swimfs_chmp	Num	8	F004: 32. Swim moderately or fast?
98	swimfstm_chmp	Num	8	F004: 32. How many times a week?
99	swimfshr_chmp	Num	8	F004: 32. How many TOTAL hours a week did you usually do it?
100	swimgn_chmp	Num	8	F004: 33. Swim gently?
101	swimgntm_chmp	Num	8	F004: 33. How many times a week?
102	swimgnhr_chmp	Num	8	F004: 33. How many TOTAL hours a week did you usually do it?
103	strtch_chmp	Num	8	F004: 34. Do stretching or flexibility exercises? (do not count yoga or Tai-chi)
104	strtchtm_chmp	Num	8	F004: 34. How many times a week?
105	strtchhr_chmp	Num	8	F004: 34. How many TOTAL hours a week did you usually do it?
106	yoga_chmp	Num	8	F004: 35. Do yoga or Tai-chi?
107	yogatm_chmp	Num	8	F004: 35. How many times a week?
108	yogahr_chmp	Num	8	F004: 35. How many TOTAL hours a week did you usually do it?
109	aerobc_chmp	Num	8	F004: 36. Do aerobics or aerobic dancing?
110	aerobctm_chmp	Num	8	F004: 36. How many times a week?
111	aerobchr_chmp	Num	8	F004: 36. How many TOTAL hours a week did you usually do it?
112	hvstr_chmp	Num	8	F004: 37. Do moderate to heavy strength training? (such as hand-held weights of more than 5 lbs., weight machines or pushups)
113	hvstrtm_chmp	Num	8	F004: 37. How many times a week?

Num	Variable	Type	Len	Label
114	hvstrhr_chmp	Num	8	F004: 37. How many TOTAL hours a week did you usually do it?
115	ltstr_chmp	Num	8	F004: 38. Do light strength training? (such as hand-held weights of 5 lbs. or less or elastic bands)
116	ltstrtm_chmp	Num	8	F004: 38. How many times a week?
117	ltstrhr_chmp	Num	8	F004: 38. How many TOTAL hours a week did you usually do it?
118	gencnd_chmp	Num	8	F004: 39. Do general conditioning exercises, such as light calisthenics or chair exercises? (do not count time on sidelines)
119	gencndtm_chmp	Num	8	F004: 39. How many times a week?
120	gencndhr_chmp	Num	8	F004: 39. How many TOTAL hours a week did you usually do it?
121	bbscrq_chmp	Num	8	F004: 40. Play basketball, soccer, or racquetbal 1? (do not count time on sidelines)
122	bbscrqtm_chmp	Num	8	F004: 40. How many times a week?
123	bbscrqhr_chmp	Num	8	F004: 40. How many TOTAL hours a week did you usually do it?
124	tv_chmp	Num	8	F004: 41. Watch TV?
125	tvtm_chmp	Num	8	F004: 41. How many times a week?
126	tvhr_chmp	Num	8	F004: 41. How many TOTAL hours a week did you usually do it?
127	bold1_chmp	Num	8	F004: [Screening Only] Add the total number of responses for each bolded data box: <1 Hour
128	bold2_chmp	Num	8	F004: [Screening Only] Add the total number of responses for each bolded data box: 1-2.5 Hours
129	bold3_chmp	Num	8	F004: [Screening Only] Add the total number of responses for each bolded data box: 3-4.5 Hours
130	bold4_chmp	Num	8	F004: [Screening Only] Add the total number of responses for each bolded data box: 5-6.5 Hours
131	bold5_chmp	Num	8	F004: [Screening Only] Add the total number of responses for each bolded data box: 7-8.5 Hours
132	bold6_chmp	Num	8	F004: [Screening Only] Add the total number of responses for each bolded data box: 9+ Hours
133	over3hours_chmp	Num	8	F004: [Screening Only] Is there a bolded response with duration of 3 or more hours?
134	totalscore_chmp	Num	8	F004: [Screening Only] Total score, bolded items
135	total125_chmp	Num	8	F004: [Screening Only] Is total greater than or equal to 125?
136	lang	Num	8	F004: Source Form Language
137	cal_exp_all	Num	8	[C] F004: Caloric expenditure/week in all exercise-related activities (see reference in Preparation Notes)
138	cal_exp_mod	Num	8	[C] F004: Caloric expenditure/week in moderate-intensity exercise-related activities (see reference in Preparation Notes)
139	cal_exp_allEst	Num	8	[C] F004: Caloric expenditure/week in all exercise-related activities, current weight OR Estimate from most recent weight (see reference in Preparation Notes)
140	cal_exp_modEst	Num	8	[C] F004: Caloric expenditure/week in moderate-intensity exercise-related activities, current weight OR Estimate from most recent weight (see reference in Preparation Notes)
141	freq_all	Num	8	[C] F004: Frequency/week of all exercise-related activities (see reference in Preparation Notes)
142	freq_mod	Num	8	[C] F004: Frequency/week of moderate-intensity exercise-related activities (see reference in Preparation Notes)
143	min_all	Num	8	[C] F004: Minutes/week in all exercise-related activities
144	min_mod	Num	8	[C] F004: Minutes/week in moderate-intensity exercise-related activities
145	min_LE	Num	8	[C] F004: Minutes/week in LOWER EXTREMITY exercise-related activities: (25)Walk uphill, (26)Walk fast, (29)Bike, (30)Aerobic Mach, (37)Mod Str Training, (38)Lgt Str Training
146	min_wlk_str	Num	8	[C] F004: Minutes/week spent in Exercise-related walking/strength exercises [JAMA publication]: (25)Walk uphill, (26)Walk fast, (28)Walk leisure, (37)Mod Str Training, (38)Lgt Str Training

Num	Variable	Type	Len	Label
147	min_wlk	Num	8	[C] F004: Minutes/week in walking exercises: (9)Walk/golf, (24)Jog, (25)Walk uphill, (26)Walk fast, (28)Walk leisure

Data Set Name: f008_demographics.sas7bdat

Num	Variable	Type	Len	Label
1	MaskID	Num	8	LIFE Participant Identifier
2	vc	Char	5	Visit Code
3	vis_days	Num	8	Date of Visit: converted to Days (in relation to randomization)
4	livalone_demg	Num	8	F008: 1. Do you live alone?
5	spouse_demg	Num	8	F008: 2. Who lives with you?(Spouse)
6	paidempl_demg	Num	8	F008: 2. Who lives with you?(Paid Employee)
7	child_demg	Num	8	F008: 2. Who lives with you?(Child)
8	othlv_demg	Num	8	F008: 2. Who lives with you?(Other)
9	friend_demg	Num	8	F008: 2. Who lives with you?(Friend)
10	othrel_demg	Num	8	F008: 2. Who lives with you?(Other relative)
11	liveref_demg	Num	8	F008: 2. Who lives with you?(Refused)
12	tothhmem_demg	Num	8	F008: 3. Including yourself, how many live in your household:
13	tothhref_demg	Num	8	F008: 3. Including yourself, how many live in your household: Refused
14	marst_demg	Num	8	F008: 4. Which of the following best describes your current marital status?
15	marstoth_demg2	Char	50	F008: 4. Marital status: other, please specify:
16	lastgr_demg	Num	8	F008: 5. What was the last grade you completed in school?
17	recode_edu	Num	8	F008: [5.] Education reclassified (including other specified)
18	smokcurr_demg	Num	8	F008: 6. Do you smoke any cigarettes at the present time?
19	cigperdy_demg	Num	8	F008: 7. How many cigarettes do you usually smoke per day?
20	smokd100_demg	Num	8	F008: 8. Have you smoked a total of 100 or more cigarettes during your lifetime?
21	numdrnk_demg	Num	8	F008: 9. During the past 12 months, how many drinks did you have in a typical week? (best guess) Number of Drinks
22	numdrnk_d_demg	Num	8	F008: 9. During the past 12 months, how many drinks did you have in a typical week? (best guess) Number of Drinks (unknown)
23	workpyvl_demg	Num	8	F008: 10. Did you work for pay or as a volunteer in the last 7 days?
24	hrsworkd_demg	Num	8	F008: 11. How many hours per week did you work for pay and/or as a volunteer?
25	everempl_demg	Num	8	F008: 12. Have you EVER been employed for wages or salary?
26	occp_demg	Char	2	F008: 13. What kind of work have you done most of your life? (What was your job called?)
27	occpml_demg	Num	8	F008: Member of the military (specify)
28	income_demg	Num	8	F008: 14. Roughly how much income from all sources (including earnings, pensions, investments, etc.) did your household have last year (before taxes)?
29	childcare_demg	Num	8	F008: 15. Are you currently providing childcare on a regular basis? (at least weekly)
30	crrel_demg	Num	8	F008: 16. Are you currently taking care of a sick or frail older relative or friend on a regular basis? (most ADLs)
31	crrelmon_demg	Num	8	F008: 17. Approximately how long have you been caring for this person on a regular basis? (Months)
32	crrelyrs_demg	Num	8	F008: 17. Approximately how long have you been caring for this person on a regular basis? (Years)
33	lang	Num	8	F008: Source Form Language:

Data Set Name: f009_bprpulseweight.sas7bdat

Num	Variable	Type	Len	Label
1	MaskID	Num	8	LIFE Participant Identifier
2	vc	Char	5	Visit Code
3	vis_days	Num	8	Date of Visit: converted to Days (in relation to randomization)
4	arm_bpwh	Num	8	F009: 1a. Arm Used (Right arm default)
5	arm_circ_bpwh	Num	8	F009: 1b. Arm Circumference (cm)
6	cuffsz_bpwh	Num	8	F009: 2. Cuff size
7	radpuls1_bpwh	Num	8	F009: 3a. Radial Pulse Measurement 1 (bpm)
8	radpuls2_bpwh	Num	8	F009: 3b. Radial Pulse Measurement 2 (bpm)
9	palpsyt_bpwh	Num	8	F009: 4. Palpated Systolic (+30 for Maximum Inflation Level)
10	maxinflv_bpwh	Num	8	F009: 5. Maximal Inflation Level [MIL] If MIL is >= 300 mmHG. Repeat the MIL. If MIL is still >= 300 mmHG, terminate blood pressure measurements.
11	bpterm_bpwh	Num	8	F009: 6. Blood pressure measurement terminated because MIL >= 300 mmHG after second reading
12	sytp1_bpwh	Num	8	F009: 7a. Blood Pressure Measurement (Systolic)
13	diasbp1_bpwh	Num	8	F009: 7a. Blood Pressure Measurement (Diastolic)
14	sytp2_bpwh	Num	8	F009: 7b. Blood Pressure Measurement (Systolic)
15	diasbp2_bpwh	Num	8	F009: 7b. Blood Pressure Measurement (Diastolic)
16	weight_bpwh	Num	8	F009: 8. Weight (kg)
17	decrweight_bpwh	Num	8	F009: 8a. Since your last visit, have you intentionally tried to decrease your weight?
18	waistrc1_bpwh	Num	8	F009: 9a. Waist Circumference Measurement (only SV1 and F24)
19	waistrc2_bpwh	Num	8	F009: 9b. Waist Circumference Measurement (only SV1 and F24)
20	waistrc3_bpwh	Num	8	F009: 9c. Waist Circumference Measurement (only SV1 and F24)
21	lang	Num	8	F009: Source Form Language:
22	BMI	Num	8	[C] F009: Body Mass Index

Data Set Name: *f010_physicalexam.sas7bdat*

Num	Variable	Type	Len	Label
1	MaskID	Num	8	LIFE Participant Identifier
2	vc	Char	5	Visit Code
3	vis_days	Num	8	Date of Visit: converted to Days (in relation to randomization)
4	skin_phex	Num	8	F010: 1. Skin
5	lungs_phex	Num	8	F010: 2. Lungs
6	heart_phex	Num	8	F010: 3. Heart
7	extremt_phex	Num	8	F010: 4. Extremities (lower extremity range of motion)
8	neuro_phex	Num	8	F010: 5. Neurological System
9	abdom_phex	Num	8	F010: 6. Vascular System: Abdominal Pulsation
10	furthevl_phex	Num	8	F010: 7. After reviewing: Medication Inventory/Physical Exam/Telephone Screening Interview/Blood Pressure, Radial Pulse, Weight/Medical and Hospital Admission History/ECG forms - any issues that require further medical evaluation (study physician)?
11	physseen_phex	Num	8	F010: 8. Has the physician seen the participant?
12	safe400m_phex	Num	8	F010: 9. On the basis of all available information, is it safe for this participant to perform a 400 m walk?
13	excluded_phex	Num	8	F010: 10. On the basis of all available information, should this participant be randomized (Completed by Study Physician)?
14	lang	Num	8	F010: Source Form Language:

Data Set Name: f012_bodyheight.sas7bdat

Num	Variable	Type	Len	Label
1	MaskID	Num	8	LIFE Participant Identifier
2	vc	Char	5	Visit Code
3	vis_days	Num	8	Date of Visit: converted to Days (in relation to randomization)
4	cm_bdht	Num	8	F012: 1. Height (cm)
5	kyphosis_bdht	Num	8	F012: 2. Is participant standing sideways due to kyphosis?
6	lang	Num	8	F012: Source Form Language:

Data Set Name: f014_medicalhospadmhistory.sas7bdat

Num	Variable	Type	Len	Label
1	MaskID	Num	8	LIFE Participant Identifier
2	vc	Char	5	Visit Code
3	vis_days	Num	8	Date of Visit: converted to Days (in relation to randomization)
4	healthrt_mhah	Num	8	F014: 1. Would you say your health is Excellent, Very Good, Good, Fair, or Poor?
5	hlth6mon_mhah	Num	8	F014: 2. Compared with 6 months ago, would you say that your health is better now, about the same, or worse than it was then?
6	hbp_mhah	Num	8	F014: 3. Has a doctor ever told you that you have high blood pressure or hypertension?
7	hbpmmed_mhah	Num	8	F014: 4. Are you currently taking any medicine for your high blood pressure?
8	hrtattk_mhah	Num	8	F014: 5. Has a doctor ever told you that you had a heart attack, or coronary, or myocardial infarction and you had to be hospitalized overnight?
9	hrtfailr_mhah	Num	8	F014: 6. Has a doctor ever told you that you had heart failure or congestive heart failure?
10	pacemakr_mhah	Num	8	F014: 7. Do you have a pacemaker?
11	stroke_mhah	Num	8	F014: 8. Has a doctor ever told you that you had a stroke or brain hemorrhage and had to be hospitalized?
12	armlegwk_mhah	Num	8	F014: 9. Do you still have difficulty from your stroke? (A) Arm and/or leg still weak or hard to use
13	trbwalk_mhah	Num	8	F014: 9. Stroke? (B) Trouble Walking
14	trbspch_mhah	Num	8	F014: 9. Stroke? (C) Trouble with speech
15	otstrk_mhah	Num	8	F014: 9. Stroke? (D) Other
16	cancer_mhah	Num	8	F014: 10. Has a doctor ever told you that you had cancer or a malignant tumor, excluding minor skin cancers?
17	diabetes_mhah	Num	8	F014: 11. Has a doctor ever told you that you had diabetes, sugar in your urine, or high blood sugar?
18	diabmed_mhah	Num	8	F014: 12. Are you now using medication that you swallow to treat or control your diabetes?
19	insulin_mhah	Num	8	F014: 13. Are you now using insulin injections?
20	brokehip_mhah	Num	8	F014: 14. Has a doctor ever told you that you had a broken or fractured hip and had to be hospitalized?
21	brokbone_mhah	Num	8	F014: 15. Since the age of 50, have you ever been told by a doctor, nurse, therapist, or medical assistant that you had broken or fractured any other bones?
22	wrist_mhah	Num	8	F014: 16. Broken bone: (A) wrist?
23	arm_mhah	Num	8	F014: 16. Broken bone: (B) arm?
24	back_mhah	Num	8	F014: 16. Broken bone: (C) back or spine?
25	othbones_mhah	Num	8	F014: 16. Broken bone: (D) or any other bones?
26	numfall_mhah	Num	8	F014: 17. How many times would you say that you have fallen over the past year? That is, how many times have you unintentionally come to rest on the ground or floor?
27	numfallr_mhah	Num	8	F014: 17. How many times would you say that you have fallen over the past year? That is, how many times have you unintentionally come to rest on the ground or floor? (Don't know)
28	fallsdoc_mhah	Num	8	F014: 18. When you fell, did you suffer any injury that required you to go to the doctor or to an emergency room, hospital, or urgent care center?
29	arthrits_mhah	Num	8	F014: 19. During the last 6 months, have you seen a doctor specifically for arthritis or rheumatism?
30	hands_mhah	Num	8	F014: 20. Did you have pain and/or stiffness in any of the following joints? (A) Hands/Fingers
31	shoulder_mhah	Num	8	F014: 20. Did you have pain and/or stiffness in any of the following joints? (B) Shoulders

Num	Variable	Type	Len	Label
32	knees_mhah	Num	8	F014: 20. Did you have pain and/or stiffness in any of the following joints? (C) Knees
33	hips_mhah	Num	8	F014: 20. Did you have pain and/or stiffness in any of the following joints? (D) Hips
34	backpain_mhah	Num	8	F014: 20. Did you have pain and/or stiffness in any of the following joints? (E) Back/Spine
35	foot_mhah	Num	8	F014: 20. Did you have pain and/or stiffness in any of the following joints? (F) Foot
36	legamp_mhah	Num	8	F014: 21. Have you had an amputation of a leg?
37	artlimb_mhah	Num	8	F014: 22. Did you obtain an artificial limb?
38	uselimb_mhah	Num	8	F014: 23. Do you regularly use this limb now?
39	liverdis_mhah	Num	8	F014: 24. Has a doctor ever told you that you have cirrhosis or liver disease?
40	lungdis_mhah	Num	8	F014: 25. Has a doctor ever told you that you have chronic lung disease such as chronic bronchitis, COPD, asthma, or emphysema?
41	psychprb_mhah	Num	8	F014: 26. Since the age of 50, have you seen a doctor for emotional, nervous, or psychiatric problems?
42	othospc_mhah	Num	8	F014: 27. Other than the hospitalizations you have already told me about, have you been hospitalized for any other reason in the past 3 years?
43	backinj_mhah	Num	8	F014: 28. In the past 5 years, have you sought the advice of a physician or medical professional for any of the following reasons? (a. Back Injury)
44	paralys_mhah	Num	8	F014: 28. In the past 5 years, have you sought the advice of a physician or medical professional for any of the following reasons? (b. Paralysis)
45	fainting_mhah	Num	8	F014: 28. In the past 5 years, have you sought the advice of a physician or medical professional for any of the following reasons? (c. Fainting or Passing Out)
46	shrtbrth_mhah	Num	8	F014: 28. In the past 5 years, have you sought the advice of a physician or medical professional for any of the following reasons? (d. Shortness of Breath)
47	asthma_mhah	Num	8	F014: 28. In the past 5 years, have you sought the advice of a physician or medical professional for any of the following reasons? (e. Asthma)
48	cough_mhah	Num	8	F014: 28. In the past 5 years, have you sought the advice of a physician or medical professional for any of the following reasons? (f. Chest congestion/cough)
49	abnheart_mhah	Num	8	F014: 28. In the past 5 years, have you sought the advice of a physician or medical professional for any of the following reasons? (g. Abnormal Heart Rhythm)
50	depress_mhah	Num	8	F014: 28. In the past 5 years, have you sought the advice of a physician or medical professional for any of the following reasons? (h. Depression)
51	footulcr_mhah	Num	8	F014: 28. In the past 5 years, have you sought the advice of a physician or medical professional for any of the following reasons?(i. Foot Ulcer)
52	wound_mhah	Num	8	F014: 28. In the past 5 years, have you sought the advice of a physician or medical professional for any of the following reasons?(j. A wound that would not heal)
53	anxiety_mhah	Num	8	F014: 29. In the past 6 months, have you experienced any of the following symptoms? (a. Anxiety)
54	fatigue_mhah	Num	8	F014: 29. In the past 6 months, have you experienced any of the following symptoms? (b. Fatigue)
55	decapp_mhah	Num	8	F014: 29. In the past 6 months, have you experienced any of the following symptoms? (c. Decreased Appetite)
56	insomnia_mhah	Num	8	F014: 29. In the past 6 months, have you experienced any of the following symptoms? (d. Insomnia)
57	dizziness_mhah	Num	8	F014: 29. In the past 6 months, have you experienced any of the following symptoms? (e. Dizziness)
58	muscstff_mhah	Num	8	F014: 29. In the past 6 months, have you experienced any of the following symptoms? (f. Muscle or Joint Stiffness)
59	muscstrn_mhah	Num	8	F014: 29. In the past 6 months, have you experienced any of the following symptoms? (g. Muscle Strain or Soreness)

Num	Variable	Type	Len	Label
60	sprain_mhah	Num	8	F014: 29. In the past 6 months, have you experienced any of the following symptoms? (h. Sprain (ankle or knee))
61	footpain_mhah	Num	8	F014: 29. In the past 6 months, have you experienced any of the following symptoms? (i. Foot Pain)
62	othmedcn_mhah	Num	8	F014: 30. Do you have any other medical conditions that might affect your ability to participate in a physical activity program?
63	lang	Num	8	F014: Source Form Language:

Data Set Name: *f015_disability.sas7bdat*

Num	Variable	Type	Len	Label
1	MaskID	Num	8	LIFE Participant Identifier
2	vc	Char	5	Visit Code
3	vis_days	Num	8	Date of Visit: converted to Days (in relation to randomization)
4	intvcomp_disq	Num	8	F015: 1. How was the interview completed?
5	walkqudf_disq	Num	8	F015: 2. Walking for a quarter of a mile, which is about 3 or 4 blocks because of your health?
6	walkrm_disq	Num	8	F015: 3. Walking across a small room because of your health?
7	walkrmhp_disq	Num	8	F015: 3a. Do you usually receive help from another person when you walk across a small room?
8	canewlkr_disq	Num	8	F015: 4. Do you have to use a cane, walker, crutches or special equipment to help you get around?
9	lthswrk_disq	Num	8	F015: 5. Doing light housework because of your health?
10	wlklbks_disq	Num	8	F015: 6. Walking several blocks because of your health?
11	lfthvobj_disq	Num	8	F015: 7. Lifting heavy objects because of your health?
12	commact_disq	Num	8	F015: 8. Participating in community activities such as religious services, social activities, or volunteer work because of your health?
13	wlk1blk_disq	Num	8	F015: 9. Walking one block because of your health?
14	lft10lbs_disq	Num	8	F015: 10. Lifting or carrying something as heavy
15	chair_disq	Num	8	F015: 11. Moving in and out of a chair because of your health?
16	chairhp_disq	Num	8	F015: 11a. Do you usually receive help from another person when you move in or out of a chair?
17	mngmoney_disq	Num	8	F015: 12. Managing your money, such as paying bills, because of your health?
18	visrels_disq	Num	8	F015: 13. Visiting with relatives or friends because of your health?
19	bed_disq	Num	8	F015: 14. Moving in and out of bed because of your health?
20	bedhp_disq	Num	8	F015: 14a. Do you usually receive help from another person when you move in or out of a bed?
21	griphnds_disq	Num	8	F015: 15. Gripping with your hands because of your health?
22	usephone_disq	Num	8	F015: 16. Using the telephone because of your health?
23	toilet_disq	Num	8	F015: 17. Using the toilet including getting on and off of the toilet because of your health?
24	toilethp_disq	Num	8	F015: 17a. Do you usually receive help from another person when you use the toilet?
25	dress_disq	Num	8	F015: 18. Dressing yourself because of your health?
26	dresshp_disq	Num	8	F015: 18a. Do you usually receive help from another person when you get dressed?
27	car_disq	Num	8	F015: 19. Getting in and out of a car because of your health?
28	bathe_disq	Num	8	F015: 20. Bathing or showering because of your health?
29	bathnghp_disq	Num	8	F015: 20a. Do you usually receive help from another person when you bathe or shower?
30	carefam_disq	Num	8	F015: 21. Taking care of a family member because of your health?
31	clmbsevstrs_disq	Num	8	F015: 22. Climbing several flights of stairs because of your health?
32	clmbstrs_disq	Num	8	F015: 23. Climbing 1 flight of stairs because of your health?
33	drivemiles_disq	Num	8	F015: 24. About how many miles did you personally drive during the last week?
34	lang	Num	8	F015: Source Form Language:
35	Basic	Num	8	[C] F015: PAT-D Disability Domain 1: Basic ADL Score
36	Mobility	Num	8	[C] F015: PAT-D Disability Domain 2: Mobility Score

Num	Variable	Type	Len	Label
37	IADLs	Num	8	[C] F015: PAT-D Disability Domain 3: Instrumental Activities of Daily Living
38	PATD	Num	8	[C] F015: PAT-D: Pepper Assessment Tool for Disability

Data Set Name: f016_400meterwalk.sas7bdat

Num	Variable	Type	Len	Label
1	MaskID	Num	8	LIFE Participant Identifier
2	vc	Char	5	Visit Code
3	vis_days	Num	8	Date of Visit: converted to Days (in relation to randomization)
4	walkdevf_w400	Num	8	F016b: (Follow-up Only) Did subject bring a cane, walker or other walking aid to the clinic?
5	safe_w400	Num	8	F016a: (1. Baseline Only) Do you feel it would be safe to try to walk up and down this hallway 10 times?
6	willing_w400	Num	8	F016a/b: (2. Baseline, 1. Follow-up) Would you be willing to try the test and see how you feel?
7	walkdev_w400	Num	8	F016a/b: (3.a Baseline, 2. Follow-up) Did participant bring a single straight cane to the clinic?
8	walkdevb_w400	Num	8	F016a: (3.b Baseline Only) Did participant bring a walker or other assistive device to the clinic?
9	safewkdv_w400	Num	8	F016a/b: (4. Baseline, 2.a Follow-up) Would you be willing to try the test if you could use your cane?
10	safewkdvb_w400	Num	8	F016b: (3. Follow-up Only) Remember, you don't need to complete the test, but I would like you to try it, even if you only take a few steps. I will be right beside you. Can you give it a try?
11	hesitant_w400	Num	8	F016b: (3. Follow-up Only: For subjects who did not bring a cane or other walking aid to the clinic) Is subject hesitant or indicates that s/he cannot do the test?
12	safety_w400	Num	8	F016b: (4. Follow-up Only) You don't need to complete the test, but I would like you to try it, even if you only take a few steps. I will be right beside you. Can you give it a try?
13	lap1_w400	Num	8	F016a/b: 5. Lap completed (Lap 1)
14	lap2_w400	Num	8	F016a/b: 5. Lap completed (Lap 2)
15	lap3_w400	Num	8	F016a/b: 5. Lap completed (Lap 3)
16	lap4_w400	Num	8	F016a/b: 5. Lap completed (Lap 4)
17	howhard_w400	Num	8	F016a/b: 5.a Please tell me how hard you feel you are working right now (following Lap 4).
18	lap5_w400	Num	8	F016a/b: 5. Lap completed (Lap 5)
19	lap6_w400	Num	8	F016a/b: 5. Lap completed (Lap 6)
20	lap7_w400	Num	8	F016a/b: 5. Lap completed (Lap 7)
21	lap8_w400	Num	8	F016a/b: 5. Lap completed (Lap 8)
22	lap9_w400	Num	8	F016a/b: 5. Lap completed (Lap 9)
23	lap10_w400	Num	8	F016a/b: 5. Lap completed (Lap 10)
24	reststp1_w400	Num	8	F016a/b: 6. Rest stop number 1 (length of time of the rest, standing rests only)
25	reststp2_w400	Num	8	F016a/b: 6. Rest stop number 2 (length of time of the rest, standing rests only)
26	reststp3_w400	Num	8	F016a/b: 6. Rest stop number 3 (length of time of the rest, standing rests only)
27	reststp4_w400	Num	8	F016a/b: 6. Rest stop number 4 (length of time of the rest, standing rests only)
28	reststp5_w400	Num	8	F016a/b: 6. Rest stop number 5 (length of time of the rest, standing rests only)
29	reststp6_w400	Num	8	F016a/b: 6. Rest stop number 6 (length of time of the rest, standing rests only)
30	reststp7_w400	Num	8	F016a/b: 6. Rest stop number 7 (length of time of the rest, standing rests only)
31	reststp8_w400	Num	8	F016a/b: 6. Rest stop number 8 (length of time of the rest, standing rests only)
32	reststp9_w400	Num	8	F016a/b: 6. Rest stop number 9 (length of time of the rest, standing rests only)
33	reststp10_w400	Num	8	F016a/b: 6. Rest stop number 10 (length of time of the rest, standing rests only)
34	tot_stop_w400	Num	8	F016a/b: 6. Total Number of stops:

Num	Variable	Type	Len	Label
35	walk_comp_w400	Num	8	F016a/b: 7. Did the participant complete the 400 meter walk? (Record time that first foot crosses the finish line.)
36	m_cmp_w400	Num	8	F016a/b: 7. If No, Number of meters completed:
37	walk_min_w400	Num	8	F016a/b: 8. TIME to walk 400 meters or to stopping the test: Minutes
38	walk_sec_w400	Num	8	F016a/b: 8. TIME to walk 400 meters or to stopping the test: Seconds
39	device_w400	Num	8	F016a/b: 8.a. Did the participant use a straight cane during the test?
40	borg_w400	Num	8	F016a/b: 8. Borg Index: rate difficulty of breathing (0-10: no difficulty at all -to- maximal difficulty)
41	end_hr_w400	Num	8	F016a/b: 9. Sitting Radial Pulse (bpm)
42	stp_brth_w400	Num	8	F016a/b: 10. If test stopped early: Why did you feel you couldn't continue? (Shortness of breath)
43	stp_fnt_w400	Num	8	F016a/b: 10. If test stopped early: Why did you feel you couldn't continue? (Feeling Faint or Dizzy)
44	stp_chst_w400	Num	8	F016a/b: 10. If test stopped early: Why did you feel you couldn't continue? (Chest Pain)
45	stp_fat_w400	Num	8	F016a/b: 10. If test stopped early: Why did you feel you couldn't continue? (Fatigue)
46	stp_leg_w400	Num	8	F016a/b: 10. If test stopped early: Why did you feel you couldn't continue? (Leg Pain)
47	stp_oth_w400	Num	8	F016a/b: 10. If test stopped early: Why did you feel you couldn't continue? (Other)
48	end_both_w400	Num	8	F016a/b: 11. At end of walk ask, Is there anything bothering you?
49	obs_brth_w400	Num	8	F016a/b: 12. Observed Symptoms at end of walk: Shortness of breath
50	obs_unst_w400	Num	8	F016a/b: 12. Observed Symptoms at end of walk: Unsteadiness
51	obs_oth_w400	Num	8	F016a/b: 12. Observed Symptoms at end of walk: Other
52	obs_whz_w400	Num	8	F016a/b: 12. Observed Symptoms at end of walk: Wheezing/dyspnea
53	obs_swt_w400	Num	8	F016a/b: 12. Observed Symptoms at end of walk: Sweating
54	obs_no_w400	Num	8	F016a/b: 12. Observed Symptoms at end of walk: No symptoms observed
55	obs_disc_w400	Num	8	F016a/b: 12. Observed Symptoms at end of walk: Signs of discomfort
56	lang	Num	8	F016a/b: Source Form Language:
57	walk_time	Num	8	[C] F016a/b: 400 Meter Walk total time (sec)
58	gait_speed	Num	8	[C] F016a/b: 400 Meter Walk gait speed (M/sec): distance/time - calculated for all attempted or completed

Data Set Name: f016c_400meterwalkaltcourse.sas7bdat

Num	Variable	Type	Len	Label
1	MaskID	Num	8	LIFE Participant Identifier
2	vc	Char	5	Visit Code
3	vis_days	Num	8	Date of Visit: converted to Days (in relation to randomization)
4	walkdevf_w400	Num	8	F016c: Did subject bring a cane, walker or other walking aid to the clinic?
5	willing_w400	Num	8	F016c: 1. Would you be willing to try the test and see how you feel?
6	walkdev_w400	Num	8	F016c: 2. Did participant bring a single straight cane?
7	safewkdv_w400	Num	8	F016c: 2a. Would you be willing to try the test if you could use your cane?
8	safewkdvb_w400	Num	8	F016c: 3. Remember, you don't need to complete the test, but I would like you to try it, even if you only take a few steps. I will be right beside you. Can you give it a try?
9	hesitant_w400	Num	8	F016c: 3. (For subjects who did not bring a cane or other walking aid to the clinic) Is subject hesitant or indicates that s/he cannot do the test?
10	safety_w400	Num	8	F016c: 4. You don't need to complete the test, but I would like you to try it, even if you only take a few steps. I will be right beside you. Can you give it a try?
11	lap_w400_c	Num	8	F016c: 5a. What is the distance for 1 lap? L=meters
12	laptotal_w400_c	Num	8	F016c: 5b. What is the total number of laps to walk 400 meters?
13	course_w400_c	Num	8	F016c: 5c. What type of course is this?
14	encourage_w400_c	Num	8	F016c: 5d. Encouragement (N) should be given at which laps? 40/L = N (Give count of laps and encouragement according to standard protocol at every N laps)
15	loe_w400_c	Num	8	F016c: 5e. Which lap should Level of Effort be asked per standard protocol below? (N x 4)
16	howhard_w400	Num	8	F016c: 5e. Please tell me how hard you feel you are working right now. (following specified lap)?
17	reststp1_w400	Num	8	F016c: 6. Rest stop number 1 (length of time of the rest, standing rests only)
18	reststp2_w400	Num	8	F016c: 6. Rest stop number 2 (length of time of the rest, standing rests only)
19	reststp3_w400	Num	8	F016c: 6. Rest stop number 3 (length of time of the rest, standing rests only)
20	reststp4_w400	Num	8	F016c: 6. Rest stop number 4 (length of time of the rest, standing rests only)
21	reststp5_w400	Num	8	F016c: 6. Rest stop number 5 (length of time of the rest, standing rests only)
22	reststp6_w400	Num	8	F016c: 6. Rest stop number 6 (length of time of the rest, standing rests only)
23	reststp7_w400	Num	8	F016c: 6. Rest stop number 7 (length of time of the rest, standing rests only)
24	reststp8_w400	Num	8	F016c: 6. Rest stop number 8 (length of time of the rest, standing rests only)
25	reststp9_w400	Num	8	F016c: 6. Rest stop number 9 (length of time of the rest, standing rests only)
26	reststp10_w400	Num	8	F016c: 6. Rest stop number 10 (length of time of the rest, standing rests only)
27	tot_stop_w400	Num	8	F016c: 6. Total Number of stops:
28	walk_comp_w400	Num	8	F016c: 7. Did the participant complete the 400 meter walk? (Record time that first foot crosses the finish line.)
29	lapscomp_w400_c	Num	8	F016c: 7. If No, Number of laps completed:
30	m_cmp_w400	Num	8	F016c: 7. Distance walked (meters)
31	walk_min_w400	Num	8	F016c: 8. TIME to walk 400 meters or to stopping the test: Minutes
32	walk_sec_w400	Num	8	F016c: 8. TIME to walk 400 meters or to stopping the test: Seconds
33	device_w400	Num	8	F016c: 8a. Did the participant use a straight cane during the test?

Num	Variable	Type	Len	Label
34	borg_w400	Num	8	F016c: 8. Borg Index: rate difficulty of breathing (0-10: no difficulty at all -to- maximal difficulty)
35	end_hr_w400	Num	8	F016c: 9. Sitting Radial Pulse (bpm)
36	stp_brth_w400	Num	8	F016c: 10. If test stopped early, ask: Why did you feel you couldn't continue? (Shortness of breath)
37	stp_fnt_w400	Num	8	F016c: 10. If test stopped early, ask: Why did you feel you couldn't continue? (Feeling Faint or Dizzy)
38	stp_chst_w400	Num	8	F016c: 10. If test stopped early, ask: Why did you feel you couldn't continue? (Chest Pain)
39	stp_fat_w400	Num	8	F016c: 10. If test stopped early, ask: Why did you feel you couldn't continue? (Fatigue)
40	stp_leg_w400	Num	8	F016c: 10. If test stopped early, ask: Why did you feel you couldn't continue? (Leg Pain)
41	stp_oth_w400	Num	8	F016c: 10. If test stopped early, ask: Why did you feel you couldn't continue? (Other)
42	end_both_w400	Num	8	F016c: 11. At end of walk ask, Is there anything bothering you?
43	obs_brth_w400	Num	8	F016c: 12. Observed Symptoms at end of walk: Shortness of breath
44	obs_unst_w400	Num	8	F016c: 12. Observed Symptoms at end of walk: Unsteadiness
45	obs_oth_w400	Num	8	F016c: 12. Observed Symptoms at end of walk: Other
46	obs_whz_w400	Num	8	F016c: 12. Observed Symptoms at end of walk: Wheezing/dyspnea
47	obs_swt_w400	Num	8	F016c: 12. Observed Symptoms at end of walk: Sweating
48	obs_no_w400	Num	8	F016c: 12. Observed Symptoms at end of walk: No symptoms observed
49	obs_disc_w400	Num	8	F016c: 12. Observed Symptoms at end of walk: Signs of discomfort
50	lang	Num	8	F016c: Source Form Language:
51	walk_time	Num	8	[C] F016c: 400 Meter Walk total time (sec)
52	gait_speed	Num	8	[C] F016c: 400 Meter Walk gait speed (M/sec): distance/time - calculated for all attempted or completed

Data Set Name: f017_processmeasures.sas7bdat

Num	Variable	Type	Len	Label
1	MaskID	Num	8	LIFE Participant Identifier
2	vc	Char	5	Visit Code
3	vis_days	Num	8	Date of Visit: converted to Days (in relation to randomization)
4	conf5_prms	Num	8	F017: (400m Walk Efficacy) 1. Confidence to: walk 5 laps, at the same pace one week from now?
5	conf10_prms	Num	8	F017: (400m Walk Efficacy) 2. Confidence to: walk 10 laps (the same distance that you did today), at the same pace, one week from now?
6	conf15_prms	Num	8	F017: (400m Walk Efficacy) 3. Confidence to: walk 15 laps, at the same pace one week from now?
7	conf20_prms	Num	8	F017: (400m Walk Efficacy) 4. Confidence to: walk 20 laps (about ½ mile), at the same pace one week from now?
8	conf25_prms	Num	8	F017: (400m Walk Efficacy) 5. Confidence to: walk 25 laps , at the same pace, one week from now?
9	vacation_prms	Num	8	F017: (Barriers) 1. Confidence in physical activity: When you are on vacation?
10	compint_prms	Num	8	F017: (Barriers) 2. Confidence in physical activity: When you have other competing interests (like your favorite TV show)?
11	lotwork_prms	Num	8	F017: (Barriers) 3. Confidence in physical activity: When you have a lot of work to do?
12	byself_prms	Num	8	F017: (Barriers) 4. Confidence in physical activity: If you had to do it by yourself?
13	illness_prms	Num	8	F017: (Barriers) 5. Confidence in physical activity: If you were recovering from an illness?
14	hectic_prms	Num	8	F017: (Barriers) 6. Confidence in physical activity: When your schedule is hectic?
15	tired_prms	Num	8	F017: (Barriers) 7. Confidence in physical activity: If you were tired?
16	crisis_prms	Num	8	F017: (Barriers) 8. Confidence in physical activity: During or following a personal crisis?
17	badweath_prms	Num	8	F017: (Barriers) 9. Confidence in physical activity: During bad weather?
18	fitlevel_prms	Num	8	F017: 1. (Body Satisfaction) Your overall level of fitness? (past 4 weeks)
19	legstrth_prms	Num	8	F017: 2. (Body Satisfaction) The muscle strength in your legs? (past 4 weeks)
20	stamina_prms	Num	8	F017: 3. (Body Satisfaction) Your level of endurance or stamina? (past 4 weeks)
21	musctone_prms	Num	8	F017: 4. (Body Satisfaction) Your muscle tone? (past 4 weeks)
22	energylv_prms	Num	8	F017: 5. (Body Satisfaction) Your overall level of energy? (past 4 weeks)
23	abilwant_prms	Num	8	F017: 6. (Body Satisfaction) Your ability to do what you want or need to do? (past 4 weeks)
24	heavhwrk_prms	Num	8	F017: 1. (Desire for Competence) Having the ability to do heavy work in the house or yard
25	standlow_prms	Num	8	F017: 2. (Desire for Competence) Having the ability to stand up from a low, soft couch/chair
26	carrystr_prms	Num	8	F017: 3. (Desire for Competence) Having the ability to carry a ten pound object (i.e., a bag of groceries) while climbing one flight of stairs
27	walkmile_prms	Num	8	F017: 4. (Desire for Competence) Having the ability to walk at a quick pace for a mile
28	intocar_prms	Num	8	F017: 5. (Desire for Competence) Having the ability to get into and out of a car
29	walk3mil_prms	Num	8	F017: 6. (Desire for Competence) Having the ability to walk 3 miles on hilly, uneven paths
30	lghthwrk_prms	Num	8	F017: 7. (Desire for Competence) Having the ability to do light work in the house or yard
31	walkstrs_prms	Num	8	F017: 8. (Desire for Competence) Having the ability to walk up and down a flight of stairs (hand rails available)
32	lang	Num	8	F017: Source Form Language:
33	selfefficacy_400m	Num	8	[C] F017: Self efficacy score: 400m walk (0-100)

Data Set Name: f018_qualitywellbeing.sas7bdat

Num	Variable	Type	Len	Label
1	MaskID	Num	8	LIFE Participant Identifier
2	vc	Char	5	Visit Code
3	vis_days	Num	8	Date of Visit: converted to Days (in relation to randomization)
4	proxy_qwbs	Num	8	Completed by Proxy (1=yes)
5	blindboth_qwbs	Num	8	F018: A1. Blindness or severely impaired vision in both eyes?
6	blndone_qwbs	Num	8	F018: A2. Blindness or severely impaired vision in only one eye?
7	spchprob_qwbs	Num	8	F018: A3. Speech problems such as stuttering or being unable to speak clearly?
8	misshfal_qwbs	Num	8	F018: A4. Missing or paralyzed hands, feet, arms, or legs?
9	missft_qwbs	Num	8	F018: A5. Missing or paralyzed fingers or toes?
10	deformty_qwbs	Num	8	F018: A6. Any deformity of the face, fingers, hand or arm, foot or leg, or back (e.g. severe scoliosis?)
11	fatigue_qwbs	Num	8	F018: A7. General fatigue, tiredness, or weakness?
12	wtgnls_qwbs	Num	8	F018: A8. A problem with unwanted weight gain or weight loss?
13	unovwt_qwbs	Num	8	F018: A9. A problem with being under or over weight?
14	chewprob_qwbs	Num	8	F018: A10. Problems chewing your food adequately?
15	hearloss_qwbs	Num	8	F018: A11. Any hearing loss or deafness?
16	skinprob_qwbs	Num	8	F018: A12. Any noticeable skin problems, such as bad acne or large burns or scars on face, body, arms, or legs?
17	eczema_qwbs	Num	8	F018: A13. Eczema or burning/itching rash?
18	dentures_qwbs	Num	8	F018: B1. Dentures?
19	oxygenk_qwbs	Num	8	F018: B2. Oxygen tank?
20	prosthss_qwbs	Num	8	F018: B3. Prosthesis?
21	glasses_qwbs	Num	8	F018: B4. Eye glasses or contact lenses?
22	hearaide_qwbs	Num	8	F018: B5. Hearing aide?
23	magglass_qwbs	Num	8	F018: B6. Magnifying glass?
24	brace_qwbs	Num	8	F018: B7. Neck, back, or leg brace?
25	visprob0_qwbs	Num	8	F018: C1. Any problems with your vision not corrected with glasses or contact lenses (such as double vision, distorted vision, flashes, or floaters)? No Days
26	visprob1_qwbs	Num	8	F018: C1. Any problems with your vision not corrected with glasses or contact lenses (such as double vision, distorted vision, flashes, or floaters)? 1 day ago
27	visprob2_qwbs	Num	8	F018: C1. Any problems with your vision not corrected with glasses or contact lenses (such as double vision, distorted vision, flashes, or floaters)? 2 days ago
28	visprob3_qwbs	Num	8	F018: C1. Any problems with your vision not corrected with glasses or contact lenses (such as double vision, distorted vision, flashes, or floaters)? 3 days ago
29	visprob4_qwbs	Num	8	F018: C1. Any problems with your vision not corrected with glasses or contact lenses (such as double vision, distorted vision, flashes, or floaters)? (Perm missing)
30	eyepain0_qwbs	Num	8	F018: C2. Any eye pain, irritation, discharge, or excessive sensitivity to light? No Days
31	eyepain1_qwbs	Num	8	F018: C2. Any eye pain, irritation, discharge, or excessive sensitivity to light? 1 day ago
32	eyepain2_qwbs	Num	8	F018: C2. Any eye pain, irritation, discharge, or excessive sensitivity to light? 2 days ago

Num	Variable	Type	Len	Label
33	eyepain3_qwbs	Num	8	F018: C2. Any eye pain, irritation, discharge, or excessive sensitivity to light? 3 days ago
34	eyepain4_qwbs	Num	8	F018: C2. Any eye pain, irritation, discharge, or excessive sensitivity to light? (Perm missing)
35	hdache0_qwbs	Num	8	F018: C3. A headache? No Days
36	hdache1_qwbs	Num	8	F018: C3. A headache? 1 day ago
37	hdache2_qwbs	Num	8	F018: C3. A headache? 2 days ago
38	hdache3_qwbs	Num	8	F018: C3. A headache? 3 days ago
39	hdache4_qwbs	Num	8	F018: C3. A headache? (Perm missing)
40	earache0_qwbs	Num	8	F018: C4. Dizziness, earache, or ringing in your ears? No Days
41	earache1_qwbs	Num	8	F018: C4. Dizziness, earache, or ringing in your ears? 1 day ago
42	earache2_qwbs	Num	8	F018: C4. Dizziness, earache, or ringing in your ears? 2 days ago
43	earache3_qwbs	Num	8	F018: C4. Dizziness, earache, or ringing in your ears? 3 days ago
44	earache4_qwbs	Num	8	F018: C4. Dizziness, earache, or ringing in your ears? (Perm missing)
45	dffhear0_qwbs	Num	8	F018: C5. Difficulty hearing or discharge, or bleeding from an ear? No Days
46	dffhear1_qwbs	Num	8	F018: C5. Difficulty hearing or discharge, or bleeding from an ear? 1 day ago
47	dffhear2_qwbs	Num	8	F018: C5. Difficulty hearing or discharge, or bleeding from an ear? 2 days ago
48	dffhear3_qwbs	Num	8	F018: C5. Difficulty hearing or discharge, or bleeding from an ear? 3 days ago
49	dffhear4_qwbs	Num	8	F018: C5. Difficulty hearing or discharge, or bleeding from an ear? (Perm missing)
50	nose0_qwbs	Num	8	F018: C6. Stuffy or runny nose or bleeding from the nose? No Days
51	nose1_qwbs	Num	8	F018: C6. Stuffy or runny nose or bleeding from the nose? 1 day ago
52	nose2_qwbs	Num	8	F018: C6. Stuffy or runny nose or bleeding from the nose? 2 days ago
53	nose3_qwbs	Num	8	F018: C6. Stuffy or runny nose or bleeding from the nose? 3 days ago
54	nose4_qwbs	Num	8	F018: C6. Stuffy or runny nose or bleeding from the nose? (Perm missing)
55	soretht0_qwbs	Num	8	F018: C7. A sore throat, difficulty swallowing, or hoarse voice? No Days
56	soretht1_qwbs	Num	8	F018: C7. A sore throat, difficulty swallowing, or hoarse voice? 1 day ago
57	soretht2_qwbs	Num	8	F018: C7. A sore throat, difficulty swallowing, or hoarse voice? 2 days ago
58	soretht3_qwbs	Num	8	F018: C7. A sore throat, difficulty swallowing, or hoarse voice? 3 days ago
59	soretht4_qwbs	Num	8	F018: C7. A sore throat, difficulty swallowing, or hoarse voice? (Perm missing)
60	tthache0_qwbs	Num	8	F018: C8. A tooth ache or jaw pain? No Days
61	tthache1_qwbs	Num	8	F018: C8. A tooth ache or jaw pain? 1 day ago
62	tthache2_qwbs	Num	8	F018: C8. A tooth ache or jaw pain? 2 days ago
63	tthache3_qwbs	Num	8	F018: C8. A tooth ache or jaw pain? 3 days ago
64	tthache4_qwbs	Num	8	F018: C8. A tooth ache or jaw pain? (Perm missing)
65	sorelip0_qwbs	Num	8	F018: C9. Sore or bleeding lips, tongue or gums? No Days
66	sorelip1_qwbs	Num	8	F018: C9. Sore or bleeding lips, tongue or gums? 1 day ago
67	sorelip2_qwbs	Num	8	F018: C9. Sore or bleeding lips, tongue or gums? 2 days ago
68	sorelip3_qwbs	Num	8	F018: C9. Sore or bleeding lips, tongue or gums? 3 days ago
69	sorelip4_qwbs	Num	8	F018: C9. Sore or bleeding lips, tongue or gums? (Perm missing)
70	cough0_qwbs	Num	8	F018: C10. Coughing or wheezing? No Days
71	cough1_qwbs	Num	8	F018: C10. Coughing or wheezing? 1 day ago

Num	Variable	Type	Len	Label
72	cough2_qwbs	Num	8	F018: C10. Coughing or wheezing? 2 days ago
73	cough3_qwbs	Num	8	F018: C10. Coughing or wheezing? 3 days ago
74	cough4_qwbs	Num	8	F018: C10. Coughing or wheezing? (Perm missing)
75	dffbrth0_qwbs	Num	8	F018: C11. Shortness of breath or difficulty breathing? No Days
76	dffbrth1_qwbs	Num	8	F018: C11. Shortness of breath or difficulty breathing? 1 day ago
77	dffbrth2_qwbs	Num	8	F018: C11. Shortness of breath or difficulty breathing? 2 days ago
78	dffbrth3_qwbs	Num	8	F018: C11. Shortness of breath or difficulty breathing? 3 days ago
79	dffbrth4_qwbs	Num	8	F018: C11. Shortness of breath or difficulty breathing? (Perm missing)
80	chestds0_qwbs	Num	8	F018: C12. Chest pain, pressure, palpitations, fast or skipped heart beat, or other discomfort in the chest? No Days
81	chestds1_qwbs	Num	8	F018: C12. Chest pain, pressure, palpitations, fast or skipped heart beat, or other discomfort in the chest? 1 day ago
82	chestds2_qwbs	Num	8	F018: C12. Chest pain, pressure, palpitations, fast or skipped heart beat, or other discomfort in the chest? 2 days ago
83	chestds3_qwbs	Num	8	F018: C12. Chest pain, pressure, palpitations, fast or skipped heart beat, or other discomfort in the chest? 3 days ago
84	chestds4_qwbs	Num	8	F018: C12. Chest pain, pressure, palpitations, fast or skipped heart beat, or other discomfort in the chest? (Perm missing)
85	upsstom0_qwbs	Num	8	F018: C13. An upset stomach, abdominal pain, nausea, heartburn, or vomiting? No Days
86	upsstom1_qwbs	Num	8	F018: C13. An upset stomach, abdominal pain, nausea, heartburn, or vomiting? 1 day ago
87	upsstom2_qwbs	Num	8	F018: C13. An upset stomach, abdominal pain, nausea, heartburn, or vomiting? 2 days ago
88	upsstom3_qwbs	Num	8	F018: C13. An upset stomach, abdominal pain, nausea, heartburn, or vomiting? 3 days ago
89	upsstom4_qwbs	Num	8	F018: C13. An upset stomach, abdominal pain, nausea, heartburn, or vomiting? (Perm missing)
90	bowel0_qwbs	Num	8	F018: C14. Difficulty with bowel movements, diarrhea, constipation, rectal bleeding, black tar-like stools, or any pain or discomfort in the rectal area? No Days
91	bowel1_qwbs	Num	8	F018: C14. Difficulty with bowel movements, diarrhea, constipation, rectal bleeding, black tar-like stools, or any pain or discomfort in the rectal area? 1 day ago
92	bowel2_qwbs	Num	8	F018: C14. Difficulty with bowel movements, diarrhea, constipation, rectal bleeding, black tar-like stools, or any pain or discomfort in the rectal area? 2 days ago
93	bowel3_qwbs	Num	8	F018: C14. Difficulty with bowel movements, diarrhea, constipation, rectal bleeding, black tar-like stools, or any pain or discomfort in the rectal area? 3 days ago
94	bowel4_qwbs	Num	8	F018: C14. Difficulty with bowel movements, diarrhea, constipation, rectal bleeding, black tar-like stools, or any pain or discomfort in the rectal area? (Perm missing)
95	urine0_qwbs	Num	8	F018: C15. Pain, burning, or blood in urine? No Days
96	urine1_qwbs	Num	8	F018: C15. Pain, burning, or blood in urine? 1 day ago
97	urine2_qwbs	Num	8	F018: C15. Pain, burning, or blood in urine? 2 days ago
98	urine3_qwbs	Num	8	F018: C15. Pain, burning, or blood in urine? 3 days ago
99	urine4_qwbs	Num	8	F018: C15. Pain, burning, or blood in urine? (Perm missing)
100	bladder0_qwbs	Num	8	F018: C16. Loss of bladder control, frequent night-time urination, or difficulty with urination? No Days
101	bladder1_qwbs	Num	8	F018: C16. Loss of bladder control, frequent night-time urination, or difficulty with urination? 1 day ago

Num	Variable	Type	Len	Label
102	bladder2_qwbs	Num	8	F018: C16. Loss of bladder control, frequent night-time urination, or difficulty with urination? 2 days ago
103	bladder3_qwbs	Num	8	F018: C16. Loss of bladder control, frequent night-time urination, or difficulty with urination? 3 days ago
104	bladder4_qwbs	Num	8	F018: C16. Loss of bladder control, frequent night-time urination, or difficulty with urination? (Perm missing)
105	gnpain0_qwbs	Num	8	F018: C17. Genital pain, itching, burning, abnormal discharge, pelvic cramping, or abnormal bleeding (does not include normal menstruation)? No Days
106	gnpain1_qwbs	Num	8	F018: C17. Genital pain, itching, burning, abnormal discharge, pelvic cramping, or abnormal bleeding (does not include normal menstruation)? 1 day ago
107	gnpain2_qwbs	Num	8	F018: C17. Genital pain, itching, burning, abnormal discharge, pelvic cramping, or abnormal bleeding (does not include normal menstruation)? 2 days ago
108	gnpain3_qwbs	Num	8	F018: C17. Genital pain, itching, burning, abnormal discharge, pelvic cramping, or abnormal bleeding (does not include normal menstruation)? 3 days ago
109	gnpain4_qwbs	Num	8	F018: C17. Genital pain, itching, burning, abnormal discharge, pelvic cramping, or abnormal bleeding (does not include normal menstruation)? (Perm missing)
110	brkbone0_qwbs	Num	8	F018: C18. A broken arm, wrist, foot, leg, or any other broken bone (other than in back)? No Days
111	brkbone1_qwbs	Num	8	F018: C18. A broken arm, wrist, foot, leg, or any other broken bone (other than in back)? 1 day ago
112	brkbone2_qwbs	Num	8	F018: C18. A broken arm, wrist, foot, leg, or any other broken bone (other than in back)? 2 days ago
113	brkbone3_qwbs	Num	8	F018: C18. A broken arm, wrist, foot, leg, or any other broken bone (other than in back)? 3 days ago
114	brkbone4_qwbs	Num	8	F018: C18. A broken arm, wrist, foot, leg, or any other broken bone (other than in back)? (Perm missing)
115	swellng0_qwbs	Num	8	F018: C19. Swelling of ankles, hands, feet, or abdomen? No Days
116	swellng1_qwbs	Num	8	F018: C19. Swelling of ankles, hands, feet, or abdomen? 1 day ago
117	swellng2_qwbs	Num	8	F018: C19. Swelling of ankles, hands, feet, or abdomen? 2 days ago
118	swellng3_qwbs	Num	8	F018: C19. Swelling of ankles, hands, feet, or abdomen? 3 days ago
119	swellng4_qwbs	Num	8	F018: C19. Swelling of ankles, hands, feet, or abdomen? (Perm missing)
120	fever0_qwbs	Num	8	F018: C20. Fever, chills, or sweats? No Days
121	fever1_qwbs	Num	8	F018: C20. Fever, chills, or sweats? 1 day ago
122	fever2_qwbs	Num	8	F018: C20. Fever, chills, or sweats? 2 days ago
123	fever3_qwbs	Num	8	F018: C20. Fever, chills, or sweats? 3 days ago
124	fever4_qwbs	Num	8	F018: C20. Fever, chills, or sweats? (Perm missing)
125	losscon0_qwbs	Num	8	F018: C21. Loss of consciousness, fainting, or seizures? No Days
126	losscon1_qwbs	Num	8	F018: C21. Loss of consciousness, fainting, or seizures? 1 day ago
127	losscon2_qwbs	Num	8	F018: C21. Loss of consciousness, fainting, or seizures? 2 days ago
128	losscon3_qwbs	Num	8	F018: C21. Loss of consciousness, fainting, or seizures? 3 days ago
129	losscon4_qwbs	Num	8	F018: C21. Loss of consciousness, fainting, or seizures? (Perm missing)
130	backpn0_qwbs	Num	8	F018: C22. Pain, stiffness, cramps, weakness, or numbness in the neck or back? No Days
131	backpn1_qwbs	Num	8	F018: C22. Pain, stiffness, cramps, weakness, or numbness in the neck or back? 1 day ago
132	backpn2_qwbs	Num	8	F018: C22. Pain, stiffness, cramps, weakness, or numbness in the neck or back? 2 days ago
133	backpn3_qwbs	Num	8	F018: C22. Pain, stiffness, cramps, weakness, or numbness in the neck or back? 3 days ago
134	backpn4_qwbs	Num	8	F018: C22. Pain, stiffness, cramps, weakness, or numbness in the neck or back? (Perm missing)

Num	Variable	Type	Len	Label
135	hippain0_qwbs	Num	8	F018: C23. Pain, stiffness, cramps, weakness, or numbness in the hip or sides? No Days
136	hippain1_qwbs	Num	8	F018: C23. Pain, stiffness, cramps, weakness, or numbness in the hip or sides? 1 day ago
137	hippain2_qwbs	Num	8	F018: C23. Pain, stiffness, cramps, weakness, or numbness in the hip or sides? 2 days ago
138	hippain3_qwbs	Num	8	F018: C23. Pain, stiffness, cramps, weakness, or numbness in the hip or sides? 3 days ago
139	hippain4_qwbs	Num	8	F018: C23. Pain, stiffness, cramps, weakness, or numbness in the hip or sides? (Perm missing)
140	jointpn0_qwbs	Num	8	F018: C24. Pain, stiffness, cramps, weakness, or numbness in any of the joints or muscles of the hand, feet, arms, or legs? No Days
141	jointpn1_qwbs	Num	8	F018: C24. Pain, stiffness, cramps, weakness, or numbness in any of the joints or muscles of the hand, feet, arms, or legs? 1 day ago
142	jointpn2_qwbs	Num	8	F018: C24. Pain, stiffness, cramps, weakness, or numbness in any of the joints or muscles of the hand, feet, arms, or legs? 2 days ago
143	jointpn3_qwbs	Num	8	F018: C24. Pain, stiffness, cramps, weakness, or numbness in any of the joints or muscles of the hand, feet, arms, or legs? 3 days ago
144	jointpn4_qwbs	Num	8	F018: C24. Pain, stiffness, cramps, weakness, or numbness in any of the joints or muscles of the hand, feet, arms, or legs? (Perm missing)
145	diffbal0_qwbs	Num	8	F018: C25. Difficulty with your balance, standing or walking? No Days
146	diffbal1_qwbs	Num	8	F018: C25. Difficulty with your balance, standing or walking? 1 day ago
147	diffbal2_qwbs	Num	8	F018: C25. Difficulty with your balance, standing or walking? 2 days ago
148	diffbal3_qwbs	Num	8	F018: C25. Difficulty with your balance, standing or walking? 3 days ago
149	diffbal4_qwbs	Num	8	F018: C25. Difficulty with your balance, standing or walking? (Perm missing)
150	sleep0_qwbs	Num	8	F018: D26. Trouble falling asleep or staying asleep? No Days
151	sleep1_qwbs	Num	8	F018: D26. Trouble falling asleep or staying asleep? 1 day ago
152	sleep2_qwbs	Num	8	F018: D26. Trouble falling asleep or staying asleep? 2 days ago
153	sleep3_qwbs	Num	8	F018: D26. Trouble falling asleep or staying asleep? 3 days ago
154	sleep4_qwbs	Num	8	F018: D26. Trouble falling asleep or staying asleep? (Perm missing)
155	nervous0_qwbs	Num	8	F018: D27. Spells of feeling nervous or shaky? No Days
156	nervous1_qwbs	Num	8	F018: D27. Spells of feeling nervous or shaky? 1 day ago
157	nervous2_qwbs	Num	8	F018: D27. Spells of feeling nervous or shaky? 2 days ago
158	nervous3_qwbs	Num	8	F018: D27. Spells of feeling nervous or shaky? 3 days ago
159	nervous4_qwbs	Num	8	F018: D27. Spells of feeling nervous or shaky? (Perm missing)
160	upset0_qwbs	Num	8	F018: D28. Spells of feeling upset, downhearted, or blue? No Days
161	upset1_qwbs	Num	8	F018: D28. Spells of feeling upset, downhearted, or blue? 1 day ago
162	upset2_qwbs	Num	8	F018: D28. Spells of feeling upset, downhearted, or blue? 2 days ago
163	upset3_qwbs	Num	8	F018: D28. Spells of feeling upset, downhearted, or blue? 3 days ago
164	upset4_qwbs	Num	8	F018: D28. Spells of feeling upset, downhearted, or blue? (Perm missing)
165	worry0_qwbs	Num	8	F018: D29. Excessive worry or anxiety? No Days
166	worry1_qwbs	Num	8	F018: D29. Excessive worry or anxiety? 1 day ago
167	worry2_qwbs	Num	8	F018: D29. Excessive worry or anxiety? 2 days ago
168	worry3_qwbs	Num	8	F018: D29. Excessive worry or anxiety? 3 days ago
169	worry4_qwbs	Num	8	F018: D29. Excessive worry or anxiety? (Perm missing)

Num	Variable	Type	Len	Label
170	lossctl0_qwbs	Num	8	F018: D30. Feelings that you had little or no control over events in your life? No Days
171	lossctl1_qwbs	Num	8	F018: D30. Feelings that you had little or no control over events in your life? 1 day ago
172	lossctl2_qwbs	Num	8	F018: D30. Feelings that you had little or no control over events in your life? 2 days ago
173	lossctl3_qwbs	Num	8	F018: D30. Feelings that you had little or no control over events in your life? 3 days ago
174	lossctl4_qwbs	Num	8	F018: D30. Feelings that you had little or no control over events in your life? (Perm missing)
175	lonely0_qwbs	Num	8	F018: D31. Feelings of being lonely or isolated? No Days
176	lonely1_qwbs	Num	8	F018: D31. Feelings of being lonely or isolated? 1 day ago
177	lonely2_qwbs	Num	8	F018: D31. Feelings of being lonely or isolated? 2 days ago
178	lonely3_qwbs	Num	8	F018: D31. Feelings of being lonely or isolated? 3 days ago
179	lonely4_qwbs	Num	8	F018: D31. Feelings of being lonely or isolated? (Perm missing)
180	frust0_qwbs	Num	8	F018: D32. Feelings of frustration, irritation, or close to losing your temper? No Days
181	frust1_qwbs	Num	8	F018: D32. Feelings of frustration, irritation, or close to losing your temper? 1 day ago
182	frust2_qwbs	Num	8	F018: D32. Feelings of frustration, irritation, or close to losing your temper? 2 days ago
183	frust3_qwbs	Num	8	F018: D32. Feelings of frustration, irritation, or close to losing your temper? 3 days ago
184	frust4_qwbs	Num	8	F018: D32. Feelings of frustration, irritation, or close to losing your temper? (Perm missing)
185	hangovr0_qwbs	Num	8	F018: D33. A hangover? No Days
186	hangovr1_qwbs	Num	8	F018: D33. A hangover? 1 day ago
187	hangovr2_qwbs	Num	8	F018: D33. A hangover? 2 days ago
188	hangovr3_qwbs	Num	8	F018: D33. A hangover? 3 days ago
189	hangovr4_qwbs	Num	8	F018: D33. A hangover? (Perm missing)
190	dcxsint0_qwbs	Num	8	F018: D34. Any decrease of sexual interest or performance? No Days
191	dcxsint1_qwbs	Num	8	F018: D34. Any decrease of sexual interest or performance? 1 day ago
192	dcxsint2_qwbs	Num	8	F018: D34. Any decrease of sexual interest or performance? 2 days ago
193	dcxsint3_qwbs	Num	8	F018: D34. Any decrease of sexual interest or performance? 3 days ago
194	dcxsint4_qwbs	Num	8	F018: D34. Any decrease of sexual interest or performance? (Perm missing)
195	confusn0_qwbs	Num	8	F018: D35. Confusion, difficulty understanding the written or spoken word, or significant memory loss? No Days
196	confusn1_qwbs	Num	8	F018: D35. Confusion, difficulty understanding the written or spoken word, or significant memory loss? 1 day ago
197	confusn2_qwbs	Num	8	F018: D35. Confusion, difficulty understanding the written or spoken word, or significant memory loss? 2 days ago
198	confusn3_qwbs	Num	8	F018: D35. Confusion, difficulty understanding the written or spoken word, or significant memory loss? 3 days ago
199	confusn4_qwbs	Num	8	F018: D35. Confusion, difficulty understanding the written or spoken word, or significant memory loss? (Perm missing)
200	thtimg0_qwbs	Num	8	F018: D36. Thoughts or images you could not get out of your mind? No Days
201	thtimg1_qwbs	Num	8	F018: D36. Thoughts or images you could not get out of your mind? 1 day ago
202	thtimg2_qwbs	Num	8	F018: D36. Thoughts or images you could not get out of your mind? 2 days ago
203	thtimg3_qwbs	Num	8	F018: D36. Thoughts or images you could not get out of your mind? 3 days ago
204	thtimg4_qwbs	Num	8	F018: D36. Thoughts or images you could not get out of your mind? (Perm missing)

Num	Variable	Type	Len	Label
205	meds0_qwbs	Num	8	F018: D37. To take any medication including over-the-counter remedies (aspirin/Tylenol, allergy medications, insulin, hormones, estrogen, thyroid, prednisone)? No Days
206	meds1_qwbs	Num	8	F018: D37. To take any medication including over-the-counter remedies (aspirin/Tylenol, allergy medications, insulin, hormones, estrogen, thyroid, prednisone)? 1 day ago
207	meds2_qwbs	Num	8	F018: D37. To take any medication including over-the-counter remedies (aspirin/Tylenol, allergy medications, insulin, hormones, estrogen, thyroid, prednisone)? 2 days ago
208	meds3_qwbs	Num	8	F018: D37. To take any medication including over-the-counter remedies (aspirin/Tylenol, allergy medications, insulin, hormones, estrogen, thyroid, prednisone)? 3 days ago
209	meds4_qwbs	Num	8	F018: D37. To take any medication including over-the-counter remedies (aspirin/Tylenol, allergy medications, insulin, hormones, estrogen, thyroid, prednisone)? (Perm missing)
210	diet0_qwbs	Num	8	F018: D38. To stay on a medically prescribed diet for health reasons? No Days
211	diet1_qwbs	Num	8	F018: D38. To stay on a medically prescribed diet for health reasons? 1 day ago
212	diet2_qwbs	Num	8	F018: D38. To stay on a medically prescribed diet for health reasons? 2 days ago
213	diet3_qwbs	Num	8	F018: D38. To stay on a medically prescribed diet for health reasons? 3 days ago
214	diet4_qwbs	Num	8	F018: D38. To stay on a medically prescribed diet for health reasons? (Perm missing)
215	lossapp0_qwbs	Num	8	F018: D39. A loss of appetite or over-eating? No Days
216	lossapp1_qwbs	Num	8	F018: D39. A loss of appetite or over-eating? 1 day ago
217	lossapp2_qwbs	Num	8	F018: D39. A loss of appetite or over-eating? 2 days ago
218	lossapp3_qwbs	Num	8	F018: D39. A loss of appetite or over-eating? 3 days ago
219	lossapp4_qwbs	Num	8	F018: D39. A loss of appetite or over-eating? (Perm missing)
220	hospitl0_qwbs	Num	8	F018: (Self Care)1. Did you spend any part of the day or night as a patient in a hospital, nursing home, or rehabilitation center? No Days
221	hospitl1_qwbs	Num	8	F018: (Self Care)1. Did you spend any part of the day or night as a patient in a hospital, nursing home, or rehabilitation center? 1 day ago
222	hospitl2_qwbs	Num	8	F018: (Self Care)1. Did you spend any part of the day or night as a patient in a hospital, nursing home, or rehabilitation center? 2 days ago
223	hospitl3_qwbs	Num	8	F018: (Self Care)1. Did you spend any part of the day or night as a patient in a hospital, nursing home, or rehabilitation center? 3 days ago
224	hospitl4_qwbs	Num	8	F018: (Self Care)1. Did you spend any part of the day or night as a patient in a hospital, nursing home, or rehabilitation center? (Perm missing)
225	prscare0_qwbs	Num	8	F018: (Self Care)2. Because of any impairment or health problem did you need help with your personal care needs, such as eating, dressing, bathing, or getting around your home? No Days
226	prscare1_qwbs	Num	8	F018: (Self Care)2. Because of any impairment or health problem did you need help with your personal care needs, such as eating, dressing, bathing, or getting around your home? 1 day ago
227	prscare2_qwbs	Num	8	F018: (Self Care)2. Because of any impairment or health problem did you need help with your personal care needs, such as eating, dressing, bathing, or getting around your home? 2 days ago
228	prscare3_qwbs	Num	8	F018: (Self Care)2. Because of any impairment or health problem did you need help with your personal care needs, such as eating, dressing, bathing, or getting around your home? 3 days ago
229	prscare4_qwbs	Num	8	F018: (Self Care)2. Because of any impairment or health problem did you need help with your personal care needs, such as eating, dressing, bathing, or getting around your home? (Perm missing)
230	motorvh0_qwbs	Num	8	F018: (Mobility)1. Which days did you drive a motor vehicle? No Days
231	motorvh1_qwbs	Num	8	F018: (Mobility)1. Which days did you drive a motor vehicle? 1 day ago
232	motorvh2_qwbs	Num	8	F018: (Mobility)1. Which days did you drive a motor vehicle? 2 days ago
233	motorvh3_qwbs	Num	8	F018: (Mobility)1. Which days did you drive a motor vehicle? 3 days ago

Num	Variable	Type	Len	Label
234	motorvh4_qwbs	Num	8	F018: (Mobility)1. Which days did you drive a motor vehicle? (Perm missing)
235	pubtran0_qwbs	Num	8	F018: (Mobility)2. Which days did you use public transportation such as a bus, subway, Medi-van, train, or airplane? No Days
236	pubtran1_qwbs	Num	8	F018: (Mobility)2. Which days did you use public transportation such as a bus, subway, Medi-van, train, or airplane? 1 day ago
237	pubtran2_qwbs	Num	8	F018: (Mobility)2. Which days did you use public transportation such as a bus, subway, Medi-van, train, or airplane? 2 days ago
238	pubtran3_qwbs	Num	8	F018: (Mobility)2. Which days did you use public transportation such as a bus, subway, Medi-van, train, or airplane? 3 days ago
239	pubtran4_qwbs	Num	8	F018: (Mobility)2. Which days did you use public transportation such as a bus, subway, Medi-van, train, or airplane? (Perm missing)
240	notrans0_qwbs	Num	8	F018: (Mobility)3. Which days did you either not drive a motor vehicle or not use public transportation because of your health or need help from another person to use? No Days
241	notrans1_qwbs	Num	8	F018: (Mobility)3. Which days did you either not drive a motor vehicle or not use public transportation because of your health or need help from another person to use? 1 day ago
242	notrans2_qwbs	Num	8	F018: (Mobility)3. Which days did you either not drive a motor vehicle or not use public transportation because of your health or need help from another person to use? 2 days ago
243	notrans3_qwbs	Num	8	F018: (Mobility)3. Which days did you either not drive a motor vehicle or not use public transportation because of your health or need help from another person to use? 3 days ago
244	notrans4_qwbs	Num	8	F018: (Mobility)3. Which days did you either not drive a motor vehicle or not use public transportation because of your health or need help from another person to use? (Perm missing)
245	stairs0_qwbs	Num	8	F018: (Physical Activity)1. Have trouble climbing stairs or inclines or walking off the curb? No Days
246	stairs1_qwbs	Num	8	F018: (Physical Activity)1. Have trouble climbing stairs or inclines or walking off the curb? 1 day ago
247	stairs2_qwbs	Num	8	F018: (Physical Activity)1. Have trouble climbing stairs or inclines or walking off the curb? 2 days ago
248	stairs3_qwbs	Num	8	F018: (Physical Activity)1. Have trouble climbing stairs or inclines or walking off the curb? 3 days ago
249	stairs4_qwbs	Num	8	F018: (Physical Activity)1. Have trouble climbing stairs or inclines or walking off the curb? (Perm missing)
250	trbwalk0_qwbs	Num	8	F018: (Physical Activity)2. Avoid walking, have trouble walking, or walk more slowly than other people your age? No Days
251	trbwalk1_qwbs	Num	8	F018: (Physical Activity)2. Avoid walking, have trouble walking, or walk more slowly than other people your age? 1 day ago
252	trbwalk2_qwbs	Num	8	F018: (Physical Activity)2. Avoid walking, have trouble walking, or walk more slowly than other people your age? 2 days ago
253	trbwalk3_qwbs	Num	8	F018: (Physical Activity)2. Avoid walking, have trouble walking, or walk more slowly than other people your age? 3 days ago
254	trbwalk4_qwbs	Num	8	F018: (Physical Activity)2. Avoid walking, have trouble walking, or walk more slowly than other people your age? (Perm missing)
255	walkaid0_qwbs	Num	8	F018: (Physical Activity)3. Limp or use a cane, crutches, or walker? No Days
256	walkaid1_qwbs	Num	8	F018: (Physical Activity)3. Limp or use a cane, crutches, or walker? 1 day ago
257	walkaid2_qwbs	Num	8	F018: (Physical Activity)3. Limp or use a cane, crutches, or walker? 2 days ago
258	walkaid3_qwbs	Num	8	F018: (Physical Activity)3. Limp or use a cane, crutches, or walker? 3 days ago
259	walkaid4_qwbs	Num	8	F018: (Physical Activity)3. Limp or use a cane, crutches, or walker? (Perm missing)

Num	Variable	Type	Len	Label
260	trbbend0_qwbs	Num	8	F018: (Physical Activity)4. Avoid or have trouble bending over, stooping or kneeling? No Days
261	trbbend1_qwbs	Num	8	F018: (Physical Activity)4. Avoid or have trouble bending over, stooping or kneeling? 1 day ago
262	trbbend2_qwbs	Num	8	F018: (Physical Activity)4. Avoid or have trouble bending over, stooping or kneeling? 2 days ago
263	trbbend3_qwbs	Num	8	F018: (Physical Activity)4. Avoid or have trouble bending over, stooping or kneeling? 3 days ago
264	trbbend4_qwbs	Num	8	F018: (Physical Activity)4. Avoid or have trouble bending over, stooping or kneeling? (Perm missing)
265	trblift0_qwbs	Num	8	F018: (Physical Activity)5. Have any trouble lifting or carrying everyday objects such as books, a briefcase, or groceries? No Days
266	trblift1_qwbs	Num	8	F018: (Physical Activity)5. Have any trouble lifting or carrying everyday objects such as books, a briefcase, or groceries? 1 day ago
267	trblift2_qwbs	Num	8	F018: (Physical Activity)5. Have any trouble lifting or carrying everyday objects such as books, a briefcase, or groceries? 2 days ago
268	trblift3_qwbs	Num	8	F018: (Physical Activity)5. Have any trouble lifting or carrying everyday objects such as books, a briefcase, or groceries? 3 days ago
269	trblift4_qwbs	Num	8	F018: (Physical Activity)5. Have any trouble lifting or carrying everyday objects such as books, a briefcase, or groceries? (Perm missing)
270	othlim0_qwbs	Num	8	F018: (Physical Activity)6. Have any other limitations in physical movements? No Days
271	othlim1_qwbs	Num	8	F018: (Physical Activity)6. Have any other limitations in physical movements? 1 day ago
272	othlim2_qwbs	Num	8	F018: (Physical Activity)6. Have any other limitations in physical movements? 2 days ago
273	othlim3_qwbs	Num	8	F018: (Physical Activity)6. Have any other limitations in physical movements? 3 days ago
274	othlim4_qwbs	Num	8	F018: (Physical Activity)6. Have any other limitations in physical movements? (Perm missing)
275	bedchr0_qwbs	Num	8	F018: (Physical Activity)7. Spend all or most of the day in a bed, chair, or couch because of health reasons? No Days
276	bedchr1_qwbs	Num	8	F018: (Physical Activity)7. Spend all or most of the day in a bed, chair, or couch because of health reasons? 1 day ago
277	bedchr2_qwbs	Num	8	F018: (Physical Activity)7. Spend all or most of the day in a bed, chair, or couch because of health reasons? 2 days ago
278	bedchr3_qwbs	Num	8	F018: (Physical Activity)7. Spend all or most of the day in a bed, chair, or couch because of health reasons? 3 days ago
279	bedchr4_qwbs	Num	8	F018: (Physical Activity)7. Spend all or most of the day in a bed, chair, or couch because of health reasons? (Perm missing)
280	whlchr0_qwbs	Num	8	F018: (Physical Activity)8. Spend all or most of the day in a wheelchair? No Days
281	whlchr1_qwbs	Num	8	F018: (Physical Activity)8. Spend all or most of the day in a wheelchair? 1 day ago
282	whlchr2_qwbs	Num	8	F018: (Physical Activity)8. Spend all or most of the day in a wheelchair? 2 days ago
283	whlchr3_qwbs	Num	8	F018: (Physical Activity)8. Spend all or most of the day in a wheelchair? 3 days ago
284	whlchr4_qwbs	Num	8	F018: (Physical Activity)8. Spend all or most of the day in a wheelchair? (Perm missing)
285	ctrlwc0_qwbs	Num	8	F018: (Physical Activity)9. If you spent all or most of the day in a wheelchair, on which days did someone else control its movement? No Days
286	ctrlwc1_qwbs	Num	8	F018: (Physical Activity)9. If you spent all or most of the day in a wheelchair, on which days did someone else control its movement? 1 day ago
287	ctrlwc2_qwbs	Num	8	F018: (Physical Activity)9. If you spent all or most of the day in a wheelchair, on which days did someone else control its movement? 2 days ago
288	ctrlwc3_qwbs	Num	8	F018: (Physical Activity)9. If you spent all or most of the day in a wheelchair, on which days did someone else control its movement? 3 days ago

Num	Variable	Type	Len	Label
289	ctrlwc4_qwbs	Num	8	F018: (Physical Activity)9. If you spent all or most of the day in a wheelchair, on which days did someone else control its movement? (Perm missing)
290	trbwork0_qwbs	Num	8	F018: (Usual Activity)1. Because of any physical or emotional health reasons, on which days did you avoid, need help with, or were limited in doing some of your usual activities, such as work, school, or housekeeping? No Days
291	trbwork1_qwbs	Num	8	F018: (Usual Activity)1. Because of any physical or emotional health reasons, on which days did you avoid, need help with, or were limited in doing some of your usual activities, such as work, school, or housekeeping? 1 day ago
292	trbwork2_qwbs	Num	8	F018: (Usual Activity)1. Because of any physical or emotional health reasons, on which days did you avoid, need help with, or were limited in doing some of your usual activities, such as work, school, or housekeeping? 2 days ago
293	trbwork3_qwbs	Num	8	F018: (Usual Activity)1. Because of any physical or emotional health reasons, on which days did you avoid, need help with, or were limited in doing some of your usual activities, such as work, school, or housekeeping? 3 days ago
294	trbwork4_qwbs	Num	8	F018: (Usual Activity)1. Because of any physical or emotional health reasons, on which days did you avoid, need help with, or were limited in doing some of your usual activities, such as work, school, or housekeeping? (Perm missing)
295	trbrec0_qwbs	Num	8	F018: (Usual Activity)2. Because of physical/emotional health reasons, on which days did you avoid/feel limited in doing some of your usual activities, such as visiting family/friends, hobbies, shopping, recreational, or religious actvts? No Days
296	trbrec1_qwbs	Num	8	F018: (Usual Activity)2. Because of physical/emotional health reasons, on which days did you avoid/feel limited in doing some of your usual activities, such as visiting family/friends, hobbies, shopping, recreational, or religious actvts? 1 day ago
297	trbrec2_qwbs	Num	8	F018: (Usual Activity)2. Because of physical/emotional health reasons, on which days did you avoid/feel limited in doing some of your usual activities, such as visiting family/friends, hobbies, shopping, recreational, or religious actvts? 2 days ago
298	trbrec3_qwbs	Num	8	F018: (Usual Activity)2. Because of physical/emotional health reasons, on which days did you avoid/feel limited in doing some of your usual activities, such as visiting family/friends, hobbies, shopping, recreational, or religious actvts? 3 days ago
299	trbrec4_qwbs	Num	8	F018: (Usual Activity)2. Because of physical/emotional health reasons, on which days did you avoid/feel limited in doing some of your usual activities, such as visiting family/friends, hobbies, shopping, recreational, or religious actvts? (Perm missing)
300	chpln0_qwbs	Num	8	F018: (Usual Activity)3. On which days did you have to change any of your plans or activities because of your health that you did not report on the previous two questions? No Days
301	chpln1_qwbs	Num	8	F018: (Usual Activity)3. On which days did you have to change any of your plans or activities because of your health that you did not report on the previous two questions? 1 day ago
302	chpln2_qwbs	Num	8	F018: (Usual Activity)3. On which days did you have to change any of your plans or activities because of your health that you did not report on the previous two questions? 2 days ago
303	chpln3_qwbs	Num	8	F018: (Usual Activity)3. On which days did you have to change any of your plans or activities because of your health that you did not report on the previous two questions? 3 days ago
304	chpln4_qwbs	Num	8	F018: (Usual Activity)3. On which days did you have to change any of your plans or activities because of your health that you did not report on the previous two questions? (Perm missing)
305	hlthrtng_qwbs	Num	8	F018: (General Health)1. Would you say that your health is
306	hlthcomp_qwbs	Num	8	F018: (General Health)2. Compared to a year ago, how would you rate your health in general now?
307	sthltg_qwbs	Num	8	F018: (General Health)3. Think about a scale of 0 to 100, with zero being the least desirable state of health that you could imagine and 100 being perfect health. Rate state of your health, on average, over the past 3 days
308	lang	Num	8	
309	effort_qwbs	Num	8	F018: PIV ONLY (Feeling Last 2 Weeks) 1. I felt that everything I did was an effort.

Num	Variable	Type	Len	Label
310	getgoing_qwbs	Num	8	F018: PIV ONLY (Feeling Last 2 Weeks) 2. I could not get going.
311	CPX	Num	8	[C] F018: QWB: Symptoms Score
312	MOB	Num	8	[C] F018: QWB: Mobility Score
313	PAC	Num	8	[C] F018: QWB: Physical Activity Score
314	SAC	Num	8	[C] F018: QWB: Social & Self-care Activity Score
315	TotalQWB	Num	8	[C] F018: QWB: Total Score

Data Set Name: *f019_healthcareutilization.sas7bdat*

Num	Variable	Type	Len	Label
1	MaskID	Num	8	LIFE Participant Identifier
2	vc	Char	5	Visit Code
3	proxy_hcuq	Num	8	Completed by Proxy (1=yes)
4	vis_days	Num	8	Date of Visit: converted to Days (in relation to randomization)
5	vishcp_hcuq	Num	8	F019: 1. How many visits did you make to a physician, osteopath, or nurse practitioner?
6	callshcp_hcuq	Num	8	F019: 2. How many telephone calls did you make to your doctor or your doctor's staff?
7	erugcr_hcuq	Num	8	F019: 3. How many times did you use a triage or urgent care center or emergency room?
8	vishmhcp_hcuq	Num	8	F019: 4. How many visits did you have from a health care provider who came to your home (e.g. home health agency, nurse, physical or occupational therapist)?
9	dayshospital_hcuq	Num	8	F019: 5. How many days were you in a hospital as an inpatient?
10	outpproc_hcuq	Num	8	F019: 6. How many times did you have outpatient surgery or another procedure where you did not stay in the hospital overnight?
11	daysnrhm_hcuq	Num	8	F019: 7. How many days were you in a nursing home as a resident?
12	medsupps_hcuq	Num	8	F019: 8. Did you regularly use any medical supplies or equipment?
13	numprmed_hcuq	Num	8	F019: 9. How many prescription medicines (including inhalers) do you take regularly (Include the total number of medications, not the number of pills/doses per day)?
14	numnpmed_hcuq	Num	8	F019: 10. How many non-prescription medicines (including vitamins) do you take regularly (Include the total number of medications, not the number of pills/doses per day)?
15	ambulnc_hcuq	Num	8	F019: 11. How many times did you use an ambulance?
16	call911_hcuq	Num	8	F019: 11a. How many of these ambulance trips resulted from you calling 911 for emergency?
17	othmdex_hcuq	Num	8	F019: 12. Did you have any other major medical expense during the past 3 months that has not been mentioned?
18	lang	Num	8	F019: Source Form Language:

Data Set Name: f020_gripstrength.sas7bdat

Num	Variable	Type	Len	Label
1	MaskID	Num	8	LIFE Participant Identifier
2	vc	Char	5	Visit Code
3	vis_days	Num	8	Date of Visit: converted to Days (in relation to randomization)
4	pain_grip	Num	8	F020: 1. Has any pain or arthritis in your hands gotten much worse recently?
5	chshndpn_grip	Num	8	F020: 1. Which hand (pain/arthritis worse)?
6	hand_srg_grip	Num	8	F020: 2. Have you had any surgery on your hands or wrists in the past three months?
7	wch_h_sg_grip	Num	8	F020: 2. Which hand (surgery)?
8	lt_or_rt_grip	Num	8	F020: 3. Are you right or left-handed?
9	dyn_set_grip	Num	8	F020: 3. Dynamometer setting:
10	trialhand1_grip	Num	8	F020: 3. Trial 1, hand tested
11	trial1_grip	Num	8	F020: 3. Trial 1 (kg)
12	trialhand2_grip	Num	8	F020: 3. Trial 2, hand tested
13	trial2_grip	Num	8	F020: 3. Trial 2 (kg)
14	lang	Num	8	F020: Source Form Language:

Data Set Name: f021_hrql.sas7bdat

Num	Variable	Type	Len	Label
1	MaskID	Num	8	LIFE Participant Identifier
2	vc	Char	5	Visit Code
3	vis_days	Num	8	Date of Visit: converted to Days (in relation to randomization)
4	effort_hrql	Num	8	F021: Mood - 1. I felt that everything I did was an effort. (past week)
5	appetite_hrql	Num	8	F021: Mood - 2. I did not feel like eating: my appetite was poor. (past week)
6	restless_hrql	Num	8	F021: Mood - 3. My sleep was restless. (past week)
7	depress_hrql	Num	8	F021: Mood - 4. I felt depressed. (past week)
8	happy_hrql	Num	8	F021: Mood - 5. I was happy. (past week)
9	lonely_hrql	Num	8	F021: Mood - 6. I felt lonely. (past week)
10	unfrndly_hrql	Num	8	F021: Mood - 7. People were unfriendly. (past week)
11	enjlfe_hrql	Num	8	F021: Mood - 8. I enjoyed life. (past week)
12	sad_hrql	Num	8	F021: Mood - 9. I felt sad. (past week)
13	disliked_hrql	Num	8	F021: Mood - 10. I felt that people disliked me. (past week)
14	getgoing_hrql	Num	8	F021: Mood - 11. I could not get going. (past week)
15	fullpep_hrql	Num	8	F021: Fatigue/Energy - 1. Full of Pep? (past week)
16	fatigued_hrql	Num	8	F021: Fatigue/Energy - 2. Fatigued? (past week)
17	wornout_hrql	Num	8	F021: Fatigue/Energy - 3. Worn Out? (past week)
18	energy_hrql	Num	8	F021: Fatigue/Energy - 4. Full of Energy? (past week)
19	tired_hrql	Num	8	F021: Fatigue/Energy - 5. Tired? (past week)
20	refresh_hrql	Num	8	F021: Fatigue/Energy - 6. Refreshed? (past week)
21	upset_hrql	Num	8	F021: Perceived Stress - 1. Been upset because of something that happened unexpectedly? (past month)
22	unablcntrl_hrql	Num	8	F021: Perceived Stress - 2. That you were unable to control the important things in your life? (past month)
23	stressed_hrql	Num	8	F021: Perceived Stress - 3. Felt nervous and stressed? (past month)
24	confident_hrql	Num	8	F021: Perceived Stress - 4. Felt confident about your ability to handle your personal problems? (past month)
25	yourway_hrql	Num	8	F021: Perceived Stress - 5. That things were going your way? (past month)
26	notcope_hrql	Num	8	F021: Perceived Stress - 6. Found that you could not cope with all the things you had to do? (past month)
27	irritations_hrql	Num	8	F021: Perceived Stress - 7. Been able to control irritations in your life? (past month)
28	ontop_hrql	Num	8	F021: Perceived Stress - 8. Felt that you were on top of things? (past month)
29	angered_hrql	Num	8	F021: Perceived Stress - 9. Been angered because of things that were outside of your control? (past month)
30	difficulties_hrql	Num	8	F021: Perceived Stress - 10. Felt difficulties were piling up so high that you could not overcome them? (past month)
31	lang	Num	8	F021: Source Form Language:
32	CESDscore	Num	8	[C] F021: CESD score
33	hrql_stressed	Num	8	[C] F021: HRQL Stressed Score

Data Set Name: *f022_proxyadl.sas7bdat*

Num	Variable	Type	Len	Label
1	MaskID	Num	8	LIFE Participant Identifier
2	vc	Char	5	Visit Code
3	vis_days	Num	8	Date of Visit: converted to Days (in relation to randomization)
4	intvcomp_padl	Num	8	F022: 1. How was the interview completed?
5	hlpwk_padl	Num	8	F022: 2. Does (participant) usually receive help from another person when he/she walks across a small room?
6	hlpbathe_padl	Num	8	F022: 3. Does (participant) usually receive help from another person when he/she bathes or showers?
7	hlp2chair_padl	Num	8	F022: 4. Does (participant) usually receive help from another person when he/she moves in or out of a chair?
8	hlp2bed_padl	Num	8	F022: 5. Does (participant) usually receive help from another person when he/she moves in or out of a bed?
9	usejon_padl	Num	8	F022: 6. Does (participant) usually receive help from another person when he/she uses the toilet?
10	hlpdress_padl	Num	8	F022: 7. Does (participant) usually receive help from another person when he/she gets dressed?
11	hlpfeed_padl	Num	8	F022: 8. Does (participant) usually receive help from another person when he/she feeds himself/herself?
12	speqpmnt_padl	Num	8	F022: 9. Does (participant) have to use a cane, walker, crutches or special equipment to help himself/herself get around?
13	lang	Num	8	F022: Source Form Language:

Data Set Name: *f023_assistivedevice.sas7bdat*

Num	Variable	Type	Len	Label
1	MaskID	Num	8	LIFE Participant Identifier
2	vc	Char	5	Visit Code
3	proxy_assd	Num	8	Completed by Proxy (1=yes)
4	vis_days	Num	8	Date of Visit: converted to Days (in relation to randomization)
5	out_walk_assd	Num	8	F023: 1. When you walk outside your home, do you usually require a walker?
6	out_cane_assd	Num	8	F023: 2. When you walk outside your home, do you usually require a cane?
7	in_walk_assd	Num	8	F023: 3. When you walk inside your home, do you usually require a walker?
8	walkblock_assd	Num	8	F023: 3a. Without your walker and the assistance of another person, could you walk as far as 1 block?
9	in_cane_assd	Num	8	F023: 4. When you walk inside your home, do you usually require a cane?
10	lang	Num	8	F023: Source Form Language:

Data Set Name: f024_outcomeevents.sas7bdat

Num	Variable	Type	Len	Label
1	MaskID	Num	8	LIFE Participant Identifier
2	vc	Char	5	Visit Code
3	proxy_hevt	Num	8	Completed by Proxy (1=yes)
4	vis_days	Num	8	Date of Visit: converted to Days (in relation to randomization)
5	howcomp_hevt	Num	8	F024: 1. How was the interview completed?
6	source_hevt	Num	8	F024: 2. Source of information?
7	expire_hevt	Num	8	F024: 3. Did the participant expire since the last visit?
8	frc_hevt	Num	8	F024: 4. Since [the last visit], did a doctor tell you that you fractured or broke a bone?
9	frc_fall_hevt	Num	8	F024: 4.b. Did you break a bone as a result of a fall?
10	frc_xray_hevt	Num	8	F024: 4.d. Did you have an x-ray?
11	frc_hosp_hevt	Num	8	F024: 4.e. Did you stay overnight at a hospital (fracture)?
12	xfrc_hosp_hevt	Num	8	F024: 4.f. How many times did you stay overnight in the hospital (fracture)?
13	hrt_hevt	Num	8	F024: 5. Since [the last visit] did a doctor tell you that you had a heart attack, angina or chest pain due to heart disease?
14	hrt_hosp_hevt	Num	8	F024: 5.1. Did you stay overnight at a hospital (heart attack etc)?
15	xhrt_hosp_hevt	Num	8	F024: 5.2. How many times did you stay overnight in the hospital (heart attack etc)?
16	hrtproc_hevt	Num	8	F024: 5.a.Since [the last visit], did you have a procedure, as an outpatient or overnight in the hospital, to open up the arteries in your heart such as an angioplasty, PTCA, coronary artery pass graft or CABG?
17	outhrt_hevt	Num	8	F024: 5.a1. Did you have an outpatient procedure (PTCA/CABG)?
18	xouthrt_hevt	Num	8	F024: 5.a2. How many outpatient procedures (PTCA/CABG) did you have?
19	hrtproc_hosp_hevt	Num	8	F024: 5.a3. Did you stay overnight at a hospital (PTCA/CABG)?
20	xhrtproc_hosp_hevt	Num	8	F024: 5.a4. How many times did you stay overnight at a hospital (PTCA/CABG)?
21	stk_hevt	Num	8	F024: 6. Since [the last visit] did a doctor tell you that you had a stroke, mini-stroke, or TIA?
22	stk_hosp_hevt	Num	8	F024: 6.1. Did you stay overnight at a hospital (stroke etc)?
23	xstk_hosp_hevt	Num	8	F024: 6.2. How many times did you stay overnight at a hospital (stroke etc)?
24	chf_hevt	Num	8	F024: 7. Since [the last visit], did a doctor tell you that you had congestive heart failure?
25	chf_hosp_hevt	Num	8	F024: 7.a. Did you stay overnight at a hospital (CHF)?
26	xchf_hosp_hevt	Num	8	F024: 7.b. How many times did you stay overnight at a hospital (CHF)?
27	anu_hevt	Num	8	F024: 8. Since [the last visit], did a doctor tell you that you had an abdominal aortic aneurysm or a ballooning of the wall of the artery in your abdomen?
28	anu_hosp_hevt	Num	8	F024: 8.a. Did you stay overnight at a hospital (abdominal aortic aneurysm)?
29	xanu_hosp_hevt	Num	8	F024: 8.b. How many times did you stay overnight at a hospital (abdominal aortic aneurysm)?
30	crc_hevt	Num	8	F024: 9. Since [the last visit], did a doctor tell you that you had poor blood flow to your legs, intermittent claudication, or peripheral arterial disease?
31	crcproc_hevt	Num	8	F024: 9.a. Since [the last visit], did you have a procedure, as an outpatient or overnight in the hospital, to open up the arteries in either of your legs such as an angioplasty, PTA, stent, or lower extremity bypass?
32	crc_hosp_hevt	Num	8	F024: 9.a1. Did you stay overnight at a hospital (leg arteries)?

Num	Variable	Type	Len	Label
33	xcrc_hosp_hevt	Num	8	F024: 9.a2. How many times did you stay overnight at a hospital (leg arteries)?
34	outcrc_hevt	Num	8	F024: 9.a3. Did you have an outpatient procedure (leg arteries)?
35	xoutcrc_hevt	Num	8	F024: 9.a4. How many outpatient procedures did you have (leg arteries)?
36	amp_hevt	Num	8	F024: 9.b. Since (the last visit), did you have an amputation of one or more toes or part of the lower extremity due to poor blood flow to your legs?
37	xamp_hosp_hevt	Num	8	F024: 9.b1. How many times did you stay overnight at a hospital (amputation)?
38	pad_hosp_hevt	Num	8	F024: 9.c. Since [the last visit], did you stay overnight in the hospital for poor blood flow to your legs, intermittent claudication, or peripheral arterial disease (without procedures improving blood flow or amputation)?
39	xpad_hosp_hevt	Num	8	F024: 9.c1. How many times did you stay overnight at a hospital (PAD)?
40	copd_hevt	Num	8	F024: 10. Since [the last visit] did a doctor tell you that you had asthma, bronchitis, emphysema, COPD?
41	copd_hosp_hevt	Num	8	F024: 10.a. Did you stay overnight at a hospital (asthma, bronchitis, emphysema, COPD)?
42	xcopd_hosp_hevt	Num	8	F024: 10.b. How many times did you stay in the hospital (asthma, bronchitis, emphysema, COPD)?
43	pneu_hevt	Num	8	F024: 11. Since [the last visit] did a doctor tell you that you had pneumonia?
44	pneu_hosp_hevt	Num	8	F024: 11.a. Did you stay overnight at a hospital (pneumonia)?
45	xpneu_hosp_hevt	Num	8	F024: 11.b. How many times did you stay in the hospital (pneumonia)?
46	canc_hevt	Num	8	F024: 12. Since the start of the study [randomization] or last visit, did a doctor tell you that you had cancer or a malignant tumor, excluding minor skin cancers?
47	canc_breast	Num	8	F024: 12.a. What type of cancer did you have? (Breast)
48	canc_colon	Num	8	F024: 12.a. What type of cancer did you have? (Colon)
49	canc_endo	Num	8	F024: 12.a. What type of cancer did you have? (Endometrial - lining of the uterus or womb) (women only)
50	canc_lung	Num	8	F024: 12.a. What type of cancer did you have? (Lung)
51	canc_prostate	Num	8	F024: 12.a. What type of cancer did you have? (Prostate) (men only)
52	canc_other	Num	8	F024: 12.a. What type of cancer did you have? (Other)
53	canc_unknown	Num	8	F024: 12.a. What type of cancer did you have? (Unknown cancer site)
54	canc_hosp_hevt	Num	8	F024: 12.b. Did you stay overnight at a hospital (cancer)?
55	xcanc_hosp_hevt	Num	8	F024: 12.c. How many times did you stay overnight at a hospital (cancer)?
56	canc_outp_hevt	Num	8	F024: 12.d. Did you have an outpatient procedure (e.g. a biopsy) (cancer)?
57	xcanc_outp_hevt	Num	8	F024: 12.e. How many outpatient procedures did you have (cancer)?
58	any_hosp_hevt	Num	8	F024: 13. Other than the conditions we just asked you about, were you hospitalized overnight for any other reasons since [the last visit]?
59	xany_hosp_hevt	Num	8	F024: 13.a. How many times were you hospitalized since the last visit?
60	nrs_hevt	Num	8	F024: 14. Since [the last visit], have you stayed overnight in a nursing home, longterm or extended care facility?
61	nrs_days_hevt	Num	8	F024: 14.a. Please tell me the number of days that you stayed overnight (nursing home, longterm or extended care facility).
62	unint_fall_hevt	Num	8	F024: 15. Since [the last visit], have you fallen, that is when you went down unintentionally and landed on the floor or ground?
63	inablvhm_hevt	Num	8	F024: 15.a. Did this fall result in an inability to leave home for at least one week?
64	lang	Num	8	F024: Source Form Language:

Data Set Name: *f025_sixitemscreener.sas7bdat*

Num	Variable	Type	Len	Label
1	MaskID	Num	8	LIFE Participant Identifier
2	vc	Char	5	Visit Code
3	vis_days	Num	8	Date of Visit: converted to Days (in relation to randomization)
4	repeat_sixs	Num	8	F025: Please repeat these words for me: APPLE, TABLE, PENNY. Did the participant correctly repeat all three objects?
5	year_sixs	Num	8	F025: 1. What is the year?
6	mon_sixs	Num	8	F025: 2. What is the month?
7	week_sixs	Num	8	F025: 3. What is the day of the week?
8	ob1_sixs	Num	8	F025: What were the three objects I asked you to remember? 4. APPLE
9	ob2_sixs	Num	8	F025: What were the three objects I asked you to remember? 5. TABLE
10	ob3_sixs	Num	8	F025: What were the three objects I asked you to remember? 5 PENNY
11	incorrect_sixs	Num	8	F025: Total Score: missed items {A score of 4 or more indicates a need for administration of questionnaires with the participant's proxy.}
12	lang	Num	8	F025: Source Form Language:

Data Set Name: f028_adverseevents.sas7bdat

Num	Variable	Type	Len	Label
1	MaskID	Num	8	LIFE Participant Identifier
2	vc	Char	5	Visit Code
3	vis_days	Num	8	Date of Visit: converted to Days (in relation to randomization)
4	ae_event_days	Num	8	F028: 1. Time of Adverse Event: Days in relation to randomization
5	reporter_adev	Num	8	F028: 2. Who is reporting the event?
6	death_adev	Num	8	F028: 4.a. Death
7	hospital_adev	Num	8	F028: 4.b. In-patient hospitalization
8	emroom_adev	Num	8	F028: 4.c. Emergency Room or Urgent Care Visit
9	fracture_adev	Num	8	F028: 4.d. Fracture
10	outpsurg_adev	Num	8	F028: 4.e. Outpatient surgery
11	lte_adev	Num	8	F028: 4.f. Life threatening illness or accidentf.
12	disability_adev	Num	8	F028: 4.g. Permanent disability or incapacity
13	sigclinic_adev	Num	8	F028: 4.h. Abnormal laboratory or diagnostic test result requiring immediate medical attention
14	otherevent_adev	Num	8	F028: 4.i. Other serious illness that might have resulted in an SAE without aggressive medical intervention
15	restrict_adev	Num	8	F028: 4.j. Restricted activity due to health problem potentially related to the study activity that led to an inability to leave home for at least ONE week
16	footulcr_adev	Num	8	F028: 4.j.1. Foot Ulcer
17	musache_adev	Num	8	F028: 4.j.2. Muscle or Joint aching
18	musstif_adev	Num	8	F028: 4.j.3. Muscle or Joint stiffness
19	backinj_adev	Num	8	F028: 4.j.4. Back pain
20	footpain_adev	Num	8	F028: 4.j.5. Foot Pain
21	dizznes_adev	Num	8	F028: 4.j.6. Dizziness
22	fatigue_adev	Num	8	F028: 4.j.7. Fatigue
23	fainting_adev	Num	8	F028: 4.j.8. Fainting or loss of consciousness
24	shrtbrth_adev	Num	8	F028: 4.j.9. Shortness of breath or asthma
25	hrtrhyth_adev	Num	8	F028: 4.j.10. Abnormal heart rhythm
26	fall_adev	Num	8	F028: 4.j.11. Fall
27	othprb_adev	Num	8	F028: 4.j.12. Any other health problem or symptom
28	unexpected_adev	Num	8	F028: 4.k. Unexpected event that may be related to study procedures
29	atsite_adev	Num	8	F028: 4.l. Adverse event occurred while under the supervision or guidance of study related personnel
30	aesae_adev	Num	8	F028: 4.l.1. Adverse event that meets criteria (A-J above) for SAE
31	actint_adev	Num	8	F028: 4.l.2. Event requiring active intervention by research staff to reduce potential harm
32	chest2_adev	Num	8	F028: 4.l.3. Chest pain for more than two minutes after stopping exercise
33	dysp2_adev	Num	8	F028: 4.l.4. Dyspnea for more than two minutes after stopping exercise
34	vital2_adev	Num	8	F028: 4.l.5. Vital signs out of range (systolic BP >= 250 or diastolic >= 115) for more than two minutes after stopping exercise

Num	Variable	Type	Len	Label
35	falldur_adev	Num	8	F028: 4.1.6. A fall during study recommended activity
36	sympmed_adev	Num	8	F028: 4.1.7. A symptom or illness that developed and required medical management or attention
37	atother_adev	Num	8	F028: 4.1.8. Other
38	eventnum_adev	Char	7	F028: Event Number
39	lang	Num	8	F028: Source Form Language:

Data Set Name: f030_tics.sas7bdat

Num	Variable	Type	Len	Label
1	MaskID	Num	8	LIFE Participant Identifier
2	vc	Char	5	Visit Code
3	vis_days	Num	8	Date of Visit: converted to Days (in relation to randomization)
4	refused	Num	8	Participant refused to complete questionnaire (1=yes)
5	fname_tics	Num	8	F030: 1. Please tell me your full name (First name)
6	lname_tics	Num	8	F030: 1. Please tell me your full name (Last name)
7	year_tics	Num	8	F030: 2. What is the year we are in?
8	season_tics	Num	8	F030: 3. What season is it?
9	month_tics	Num	8	F030: 4. What month are we in?
10	date_tics	Num	8	F030: 5. What is today's date?
11	day_tics	Num	8	F030: 6. What day of the week is today?
12	house_tics	Num	8	F030: 7. What is your home address? House number
13	street_tics	Num	8	F030: 7. What is your home address? Street Name
14	city_tics	Num	8	F030: 7. What is your home address? City
15	state_tics	Num	8	F030: 7. What is your home address? State
16	zip_tics	Num	8	F030: 7. What is your home address? Zip
17	total_01_tics	Num	8	F030: 7. (Total correct = 0-12)
18	score_01_tics	Num	8	F030: 8. Count backwards from 20 to 1. (Score = 0, 1 or 2)
19	cabin_tics	Num	8	F030: 9. I am going to read a list of 10 words. Please listen carefully and try to remember them. When I am done, tell me as many words as you can, in any order. (Cabin)
20	theatre_tics	Num	8	F030: 9. I am going to read a list of 10 words. Please listen carefully and try to remember them. When I am done, tell me as many words as you can, in any order. (Theatre)
21	pipe_tics	Num	8	F030: 9. I am going to read a list of 10 words. Please listen carefully and try to remember them. When I am done, tell me as many words as you can, in any order. (Pipe)
22	watch_tics	Num	8	F030: 9. I am going to read a list of 10 words. Please listen carefully and try to remember them. When I am done, tell me as many words as you can, in any order. (Watch)
23	elephant_tics	Num	8	F030: 9. I am going to read a list of 10 words. Please listen carefully and try to remember them. When I am done, tell me as many words as you can, in any order. (Elephant)
24	whip_tics	Num	8	F030: 9. I am going to read a list of 10 words. Please listen carefully and try to remember them. When I am done, tell me as many words as you can, in any order. (Whip)
25	chest_tics	Num	8	F030: 9. I am going to read a list of 10 words. Please listen carefully and try to remember them. When I am done, tell me as many words as you can, in any order. (Chest)
26	pillow_tics	Num	8	F030: 9. I am going to read a list of 10 words. Please listen carefully and try to remember them. When I am done, tell me as many words as you can, in any order. (Pillow)
27	silk_tics	Num	8	F030: 9. I am going to read a list of 10 words. Please listen carefully and try to remember them. When I am done, tell me as many words as you can, in any order. (Silk)
28	giant_tics	Num	8	F030: 9. I am going to read a list of 10 words. Please listen carefully and try to remember them. When I am done, tell me as many words as you can, in any order. (Giant)
29	total_02_tics	Num	8	F030: 9. (Total correct = 0-10)
30	q10_93_tics	Char	50	F030: 10. Now I'd like you to subtract 7 from 100. Then keep subtracting 7 from each answer until I tell you to stop. What is 100 take away 7? (93)

Num	Variable	Type	Len	Label
31	q10_86_tics	Char	50	F030: 10. Now I'd like you to subtract 7 from 100. Then keep subtracting 7 from each answer until I tell you to stop. What is 100 take away 7? (86)
32	q10_79_tics	Char	50	F030: 10. Now I'd like you to subtract 7 from 100. Then keep subtracting 7 from each answer until I tell you to stop. What is 100 take away 7? (79)
33	q10_72_tics	Char	50	F030: 10. Now I'd like you to subtract 7 from 100. Then keep subtracting 7 from each answer until I tell you to stop. What is 100 take away 7? (72)
34	q10_65_tics	Char	50	F030: 10. Now I'd like you to subtract 7 from 100. Then keep subtracting 7 from each answer until I tell you to stop. What is 100 take away 7? (65)
35	total_03_tics	Num	8	F030: 10. (Total correct = 0-5)
36	score_02_tics	Num	8	F030: 11. What do people usually use to cut paper? (Score = 1 point for scissors or shears)
37	score_03_tics	Num	8	F030: 12. How many things are in a dozen? (Score = 1 point for 12)
38	score_04_tics	Num	8	F030: 13. What do you call the prickly green plant that lives in the desert? (Score = 1 point for cactus only)
39	score_05_tics	Num	8	F030: 14. What animal does wool come from? (Score = 1 point for sheep or lamb only)
40	score_06_tics	Num	8	F030: 15. Say this, No ifs, ands or buts. (Score = 1 point for completely correct repetition on the first trial. Repeat only if poorly presented)
41	score_07_tics	Num	8	F030: 16. Say this, Methodist Episcopal. (Score = 1 point for completely correct repetition on the first trial. Repeat only if poorly presented)
42	score_08_tics	Num	8	F030: 17. Who is the President of the United States right now? (Score = 1 point for correct first and last name only)
43	score_09_tics	Num	8	F030: 18. Who is the Vice President? (Score = 1 point for correct first and last name only)
44	score_10_tics	Num	8	F030: 19. With your finger, tap 5 times on the part of the phone you speak into. (Score = 2 points if 5 taps are heard; 1 point if participant taps more or less than 5 times; 0 if no taps are heard)
45	score_11_tics	Num	8	F030: 20. I'm going to give you a word and I want you to give me its opposite. For example, the opposite of hot is cold. What is the opposite of west? (Score = 1 point for east)
46	score_12_tics	Num	8	F030: 21. What is the opposite of generous? (Score = 1 point for selfish, greedy, stingy, tight, cheap, mean, meager, skimpy or other good antonym)
47	cabin_13_tics	Num	8	F030: 22. Earlier I read a long list of words to you. Please tell me all of the words that you can remember from that list. (Cabin)
48	theatre_13_tics	Num	8	F030: 22. Earlier I read a long list of words to you. Please tell me all of the words that you can remember from that list. (Theatre)
49	pipe_13_tics	Num	8	F030: 22. Earlier I read a long list of words to you. Please tell me all of the words that you can remember from that list. (Pipe)
50	watch_13_tics	Num	8	F030: 22. Earlier I read a long list of words to you. Please tell me all of the words that you can remember from that list. (Watch)
51	elephant_13_tics	Num	8	F030: 22. Earlier I read a long list of words to you. Please tell me all of the words that you can remember from that list. (Elephant)
52	whip_13_tics	Num	8	F030: 22. Earlier I read a long list of words to you. Please tell me all of the words that you can remember from that list. (Whip)
53	chest_13_tics	Num	8	F030: 22. Earlier I read a long list of words to you. Please tell me all of the words that you can remember from that list. (Chest)
54	pillow_13_tics	Num	8	F030: 22. Earlier I read a long list of words to you. Please tell me all of the words that you can remember from that list. (Pillow)
55	silk_13_tics	Num	8	F030: 22. Earlier I read a long list of words to you. Please tell me all of the words that you can remember from that list. (Silk)

Num	Variable	Type	Len	Label
56	giant_13_tics	Num	8	F030: 22. Earlier I read a long list of words to you. Please tell me all of the words that you can remember from that list. (Giant)
57	score_13_tics	Num	8	F030: 22. (Score = 0-10)
58	total_04_tics	Num	8	F030: TOTAL CORRECT (sum of scores in right column)
59	lang	Num	8	F030: Source Form Language:

Data Set Name: *f031_news.sas7bdat*

Num	Variable	Type	Len	Label
1	MaskID	Num	8	LIFE Participant Identifier
2	vc	Char	5	Visit Code
3	vis_days	Num	8	Date of Visit: converted to Days (in relation to randomization)
4	housetype_news	Num	8	F031: A. Types of residences in your neighborhood: 1. What is the Main type of housing in your neighborhood?
5	access_stores_news	Num	8	F031: B. Access to Services: 1. Stores are within easy walking distance at my home.
6	access_parking_news	Num	8	F031: B. Access to Services: 2. Parking is difficult in local shopping areas.
7	access_places_news	Num	8	F031: B. Access to Services: 3. There are many places to go within easy walking distance at my home.
8	access_transit_news	Num	8	F031: B. Access to Services: 4. It is easy to walk to a transit stop (bus, train) from my home.
9	access_streets_news	Num	8	F031: B. Access to Services: 5. The streets in my neighborhood are hilly, making my neighborhood difficult to walk in.
10	access_travel_news	Num	8	F031: B. Access to Services: 6. In a typical week can you conveniently, safely and affordably travel to all the places you would like to?
11	street_culdesac_news	Num	8	F031: C. Streets in My Neighborhood: 1. The street in my neighborhood do not have many cul-de-sacs (dead-end streets).
12	street_intersect_news	Num	8	F031: C. Streets in My Neighborhood: 2. The distance between intersections in my neighborhood is usually short (100 yards or less; the length of a football field or less).
13	street_altroute_news	Num	8	F031: C. Streets in My Neighborhood: 3. There are many alternative routes for getting from place to place in my neighborhood. (I don't have to go the same way every time.)
14	place_sidewalk_news	Num	8	F031: D. Place for Walking: 1. There are sidewalks on most of the streets in my neighborhood.
15	place_separate_news	Num	8	F031: D. Place for Walking: 2. Sidewalks are separated from the road/traffic in my neighborhood by parked cars.
16	place_lit_news	Num	8	F031: D. Place for Walking: 3. My neighborhood streets are well lit at night.
17	place_seen_news	Num	8	F031: D. Place for Walking: 4. Walkers and bikers on the streets in my neighborhood can be easily seen by people in their homes.
18	place_signals_news	Num	8	F031: D. Place for Walking: 5. There are crosswalks and pedestrian signals to help walkers cross busy streets in my neighborhood.
19	surround_trees_news	Num	8	F031: E. Neighborhood Surroundings: 1. There are trees and foliage along the streets in my neighborhood.
20	surround_things_news	Num	8	F031: E. Neighborhood Surroundings: 2. There are many interesting things to look at while walking in my neighborhood.
21	surround_people_news	Num	8	F031: E. Neighborhood Surroundings: 3. I see many people being physically active in my neighborhood doing things like walking, jogging, cycling, or playing sports and active games.
22	traffic_difficult_news	Num	8	F031: F. Traffic Hazards: 1. There is so much traffic along nearby streets that it makes it difficult or unpleasant to walk in my neighborhood.
23	traffic_speed_news	Num	8	F031: F. Traffic Hazards: 2. The speed of traffic on most nearby streets is usually slow (30 mph or less).
24	traffic_exceed_news	Num	8	F031: F. Traffic Hazards: 3. Most drivers exceed the posted speed limits while driving in my neighborhood.
25	safety_crime_news	Num	8	F031: G. Safety from Crime: 1. There is a high crime rate in my neighborhood.

Num	Variable	Type	Len	Label
26	safety_day_news	Num	8	F031: G. Safety from Crime: 2. The crime rate in my neighborhood makes it unsafe to go on walks during the day.
27	safety_night_news	Num	8	F031: G. Safety from Crime: 3. The crime rate in my neighborhood makes it unsafe to go on walks at night.
28	social_help_news	Num	8	F031: H. Social Cohesion of Neighborhood: 1. People around my neighborhood are willing to help their neighbors.
29	social_close_news	Num	8	F031: H. Social Cohesion of Neighborhood: 2. This is a close-knit neighborhood.
30	social_trusted_news	Num	8	F031: H. Social Cohesion of Neighborhood: 3. People in this neighborhood can be trusted.
31	social_getalong_news	Num	8	F031: H. Social Cohesion of Neighborhood: 4. People in this neighborhood generally don't get along with each other.
32	social_share_news	Num	8	F031: H. Social Cohesion of Neighborhood: 5. People in this neighborhood do not share the same values.
33	social_differ_news	Num	8	F031: H. Social Cohesion of Neighborhood: 6. I have acquaintances/friends in my neighborhood that differ from me in terms of age, income, or ethnicity.
34	lang	Num	8	F031: Source Form Language:

Data Set Name: *f032_categoryfluencytest.sas7bdat*

Num	Variable	Type	Len	Label
1	MaskID	Num	8	LIFE Participant Identifier
2	vc	Char	5	Visit Code
3	vis_days	Num	8	Date of Visit: converted to Days (in relation to randomization)
4	total_catf	Num	8	F032: Name all the animals you can think of in one minute (one prompt is permitted if the participant makes no response for 15 seconds or expresses incapacity)
5	lang	Num	8	F032: Source Form Language:

Data Set Name: f041_3mse.sas7bdat

Num	Variable	Type	Len	Label
1	MaskID	Num	8	LIFE Participant Identifier
2	vc	Char	5	Visit Code
3	vis_days	Num	8	Date of Visit: converted to Days (in relation to randomization)
4	q1pa	Num	8	F041: 1. When were you born (mon)? [exchanged for points scored]
5	q1pb	Num	8	F041: 1. When were you born (day)? [exchanged for points scored]
6	q1pc	Num	8	F041: 1. When were you born (year)? [exchanged for points scored]
7	q1p1	Num	8	F041: 1.1 Place of birth (city or town)
8	q1p2	Num	8	F041: 1.2 Place of birth (state or county)
9	q2a	Num	8	F041: 2.a I am going to say three words for you to remember. Repeat them after I have said all three words: shirt, brown, honesty. (shirt)
10	q2b	Num	8	F041: 2.b I am going to say three words for you to remember. Repeat them after I have said all three words: shirt, brown, honesty. (brown)
11	q2c	Num	8	F041: 2.c I am going to say three words for you to remember. Repeat them after I have said all three words: shirt, brown, honesty. (honesty)
12	q2d	Char	50	F041: 2.d Number of presentations necessary for the participant to repeat the sequence (1-7)
13	q3p1	Num	8	F041: 3.1 I would like you to count from 1 to 5
14	q3p2a	Num	8	F041: 3.2 Now I would like you to count backwards from 5 to 1 (Response 1)
15	q3p2b	Num	8	F041: 3.2 Now I would like you to count backwards from 5 to 1 (Response 2)
16	q3p2c	Num	8	F041: 3.2 Now I would like you to count backwards from 5 to 1 (Response 3)
17	q3p2d	Num	8	F041: 3.2 Now I would like you to count backwards from 5 to 1 (Response 4)
18	q3p2e	Num	8	F041: 3.2 Now I would like you to count backwards from 5 to 1 (Response 5)
19	q4p1	Num	8	F041: 4. Spell: world
20	q4p2a	Char	50	F041: 4.2 Now spell: world, backwards. (Response 1)
21	q4p2b	Char	50	F041: 4.2 Now spell: world, backwards. (Response 2)
22	q4p2c	Char	50	F041: 4.2 Now spell: world, backwards. (Response 3)
23	q4p2d	Char	50	F041: 4.2 Now spell: world, backwards. (Response 4)
24	q4p2e	Char	50	F041: 4.2 Now spell: world, backwards. (Response 5)
25	q4check	Num	8	F041: 4.2 Participant gave more than 5 letters
26	q5p1	Num	8	F041: 5.1 What three words did I ask you to remember earlier? (shirt)
27	q5p2	Num	8	F041: 5.2 What three words did I ask you to remember earlier? (brown)
28	q5p3	Num	8	F041: 5.3 What three words did I ask you to remember earlier? (honesty)
29	q6p1a	Num	8	F041: 6.1 What is today's date? [exchanged for points scored]
30	q6p1b	Num	8	F041: 6.1 What is today's date? [exchanged for points scored]
31	q6p1c	Num	8	F041: 6.1 What is today's date? [exchanged for points scored]
32	q6p2	Num	8	F041: 6.2 What is the day of the week?
33	q6p3	Num	8	F041: 6.3 What season of the year is it?
34	q7p1	Num	8	F041: 7.1 What state are we in?
35	q7p2	Num	8	F041: 7.2 What county are we in?

Num	Variable	Type	Len	Label
36	q7p3	Num	8	F041: 7.3 What city/town are we in?
37	q7p4	Num	8	F041: 7.4 Are we in a clinic, store, or home?
38	q8p1	Num	8	F041: 8.1 What is this? (pencil)
39	q8p2	Num	8	F041: 8.2 What is this? (watch)
40	q8p3	Num	8	F041: 8.3 What do you call this part of the face? (forehead)
41	q8p4	Num	8	F041: 8.4 What do you call this part of the face? (chin)
42	q8p5	Num	8	F041: 8.5 What do you call this part of the face? (shoulder)
43	q8p6	Num	8	F041: 8.6 What do you call this part of the face? (elbow)
44	q8p7	Num	8	F041: 8.7 What do you call this part of the hand? (knuckle)
45	q9	Num	8	F041: 9. What animals have four legs? Tell me as many as you can.
46	q10p1	Num	8	F041: 10.1 In what way are an arm and a leg alike?
47	q10p2	Num	8	F041: 10.2 In what way are laughing and crying alike?
48	q10p3	Num	8	F041: 10.3 In what way are eating and sleeping alike?
49	q11	Num	8	F041: 11. Repeat what I say: I would like to go out.
50	q12p1	Num	8	F041: 12.1 Now repeat: No ifs, ands or buts. (no ifs)
51	q12p2	Num	8	F041: 12.2 Now repeat: No ifs, ands or buts. (ands)
52	q12p3	Num	8	F041: 12.3 Now repeat: No ifs, ands or buts. (buts)
53	q13	Num	8	F041: 13. Hold up Card with set of instructions and say: Please do this
54	q14p1	Num	8	F041: 14.1 Please write the following sentence: I would like to go out. (would)
55	q14p2	Num	8	F041: 14.2 Please write the following sentence: I would like to go out. (like)
56	q14p3	Num	8	F041: 14.3 Please write the following sentence: I would like to go out. (to)
57	q14p4	Num	8	F041: 14.4 Please write the following sentence: I would like to go out. (go)
58	q14p5	Num	8	F041: 14.5 Please write the following sentence: I would like to go out. (out)
59	q14p6	Num	8	F041: 14.6 Note which hand the participant uses to write. If this is not done, ask participant if she is right or left-handed.
60	q15p1	Num	8	F041: 15.1 Here is a drawing. Please copy the drawing onto this piece of paper. (pentagon 1)
61	q15p2	Num	8	F041: 15.2 Copy the drawing onto this piece of paper. (pentagon 2)
62	q15p3	Num	8	F041: 15.3 Copy the drawing onto this piece of paper. (intersection)
63	q16p1	Num	8	F041: 16.1 Take this paper with your left (right for left-handed person) hand, fold it in half, and hand it back to me. (takes paper in correct hand)
64	q16p2	Num	8	F041: 16.2 Take this paper with your left (right for left-handed person) hand, fold it in half, and hand it back to me. (folds paper in half)
65	q16p3	Num	8	F041: 16.3 Take this paper with your left (right for left-handed person) hand, fold it in half, and hand it back to me. (hands paper back)
66	q17p1	Num	8	F041: 17.1 What three words did I ask you to remember earlier? (shirt)
67	q17p2	Num	8	F041: 17.2 What three words did I ask you to remember earlier? (brown)
68	q17p3	Num	8	F041: 17.3 What three words did I ask you to remember earlier? (honesty)
69	q18p1	Num	8	F041: 18. Would you please tell me again where were you born? (city/town)
70	q18p2	Num	8	F041: 18. Would you please tell me again where were you born? (state/country)
71	q19	Num	8	F041: 19. Special problems?

Num	Variable	Type	Len	Label
72	q19p1	Num	8	F041: 19.1 Primary problem
73	q19p1b	Num	8	F041: Seconday problem
74	lang	Num	8	F041: Source Form Language:
75	LTmemory	Num	8	[C] F041: 3MSE: Long Term Memory Score (max=5)
76	Registration	Num	8	[C] F041: 3MSE: Registration Score (max=3)
77	ReversalN	Num	8	[C] F041: 3MSE: Mental Reversal, Numbers Score (max=2)
78	ReversalWord	Num	8	[C] F041: 3MSE: Mental Reversal, Word Score (max=5)
79	Recall1	Num	8	[C] F041: 3MSE: 1st Recall Score (max=9)
80	TemporalOrientation	Num	8	[C] F041: 3MSE: Temporal Orientation Score (max=15)
81	SpatialOrientation	Num	8	[C] F041: 3MSE: Spatial Orientation Score (max=5)
82	Naming	Num	8	[C] F041: 3MSE: Object Naming Score (max=5)
83	Naming4	Num	8	[C] F041: 3MSE: Naming 4-legged Animal Score (max=10)
84	Similarities	Num	8	[C] F041: 3MSE: Similarities Score (max=6)
85	Repetition	Num	8	[C] F041: 3MSE: Repitition Score (max=5)
86	Read_Obey	Num	8	[C] F041: 3MSE: Read and Obey Score (max=3)
87	Writing	Num	8	[C] F041: 3MSE: Writing Score (max=5)
88	CopyShape	Num	8	[C] F041: 3MSE: Copy Intersecting Pentagons Score (max=10)
89	Command3	Num	8	[C] F041: 3MSE: Three-Stage Command Score (max=3)
90	Recall2	Num	8	[C] F041: 3MSE: 2nd Recall Score (max=9)
91	_3MSE	Num	8	[C] F041: 3MSE: Total Score (max=100)

Data Set Name: f042_dementiaquestionnaire.sas7bdat

Num	Variable	Type	Len	Label
1	MaskID	Num	8	LIFE Participant Identifier
2	vc	Char	5	Visit Code
3	vis_days	Num	8	Date of Visit: converted to Days (in relation to randomization)
4	reliable_dmqu	Num	8	F042: PROXY: Seems Reliable
5	relationship_dmqu	Num	8	F042: PROXY: Relationship to participant:
6	howlong_dmqu	Num	8	F042: 1. How long have you known her/him?
7	howoften_dmqu	Num	8	F042: 2. How often did/do you have contact with her/him?
8	frequent_dmqu	Num	8	F042: 3. Most frequent type of contact?
9	memory_dmqu	Num	8	F042: 4. [I. MEMORY/COGNITION]: Memory
10	memory_yrsR_dmqu	Num	8	F042: 4. [I. MEMORY/COGNITION]: Memory (Years in relation to year of randomization)
11	names_dmqu	Num	8	F042: 5. [I. MEMORY/COGNITION]: Remembering people's names
12	names_yrsR_dmqu	Num	8	F042: 5. [I. MEMORY/COGNITION]: Remembering people's names (Years in relation to year of randomization)
13	faces_dmqu	Num	8	F042: 6. [I. MEMORY/COGNITION]: Recognizing familiar faces
14	faces_yrsR_dmqu	Num	8	F042: 6. [I. MEMORY/COGNITION]: Recognizing familiar faces (Years in relation to year of randomization)
15	indoors_dmqu	Num	8	F042: 7. [I. MEMORY/COGNITION]: Finding way about indoors
16	indorrs_yrsR_dmqu	Num	8	F042: 7. [I. MEMORY/COGNITION]: Finding way about indoors (Years in relation to year of randomization)
17	streets_dmqu	Num	8	F042: 8. [I. MEMORY/COGNITION]: Finding way on familiar streets
18	streets_yrsR_dmqu	Num	8	F042: 8. [I. MEMORY/COGNITION]: Finding way on familiar streets (Years in relation to year of randomization)
19	shortlist_dmqu	Num	8	F042: 9. [I. MEMORY/COGNITION]: Remembering a short list of items
20	shortlist_yrsR_dmqu	Num	8	F042: 9. [I. MEMORY/COGNITION]: Remembering a short list of items (Years in relation to year of randomization)
21	exp_word_dmqu	Num	8	F042: 10. [I. MEMORY/COGNITION]: Trouble finding the right word or expressing self
22	exp_word_yrsR_dmqu	Num	8	F042: 10. [I. MEMORY/COGNITION]: Trouble finding the right word or expressing self (Years in relation to year of randomization)
23	grasping_dmqu	Num	8	F042: 11. [I. MEMORY/COGNITION]: Trouble grasping situations or explanations
24	grasping_yrsR_dmqu	Num	8	F042: 11. [I. MEMORY/COGNITION]: Trouble grasping situations or explanations (Years in relation to year of randomization)
25	talkless_dmqu	Num	8	F042: 12. [I. MEMORY/COGNITION]: Talking less over time
26	talkless_yrsR_dmqu	Num	8	F042: 12. [I. MEMORY/COGNITION]: Talking less over time (Years in relation to year of randomization)
27	past_dmqu	Num	8	F042: 13. [I. MEMORY/COGNITION]: Tendency to dwell in the past
28	past_yrsR_dmqu	Num	8	F042: 13. [I. MEMORY/ COGNITION]: Tendency to dwell in the past (Years in relation to year of randomization)
29	suddenly_dmqu	Num	8	F042: 14. [II. ONSET AND COURSE]: Did these problems begin suddenly or slowly

Num	Variable	Type	Len	Label
30	steadily_dmqu	Num	8	F042: 15. [II. ONSET AND COURSE]: Have these problems stayed the same, been steadily getting worse, or have there been abrupt declines
31	doc_aware_dmqu	Num	8	F042: 16. [II. ONSET AND COURSE]: Is a doctor aware of these problems
32	cause_dmqu	Num	8	F042: 17. [II. ONSET AND COURSE]: What does the doctor believe is causing the problems
33	meds_dmqu	Num	8	F042: 19. [II. ONSET AND COURSE]: Did (s)he receive medications for memory problems
34	noticed_a_dmqu	Char	50	F042: 20.a [III. RECOGNITION OF PROBLEM]: What was noticed (the first 3 symptoms noticed)
35	noticed_a_yrsR_dmqu	Num	8	F042: 20.a [III. RECOGNITION OF PROBLEM]: What was noticed (the first 3 symptoms noticed) (Years in relation to year of randomization)
36	noticed_b_dmqu	Char	50	F042: 20.b [III. RECOGNITION OF PROBLEM]: What was noticed (the first 3 symptoms noticed)
37	noticed_b_yrsR_dmqu	Num	8	F042: 20.b [III. RECOGNITION OF PROBLEM]: What was noticed (the first 3 symptoms noticed) (Years in relation to year of randomization)
38	noticed_c_dmqu	Char	50	F042: 20.c [III. RECOGNITION OF PROBLEM]: What was noticed (the first 3 symptoms noticed)
39	noticed_c_yrsR_dmqu	Num	8	F042: 20.c [III. RECOGNITION OF PROBLEM]: What was noticed (the first 3 symptoms noticed) (Years in relation to year of randomization)
40	lasttime_yrsR_dmqu	Num	8	F042: 21. [III. RECOGNITION OF PROBLEM] (Years in relation to year of randomization)
41	lasttime_no_prob_dmqu	Num	8	F042: 21. [III. RECOGNITION OF PROBLEM]: No memory Problems
42	caregiver_dmqu	Num	8	F042: 22. [IV. CAREGIVING]: Is an in-home paid caregiver ever utilized (full or part-time)
43	caregiver_yrsR_dmqu	Num	8	F042: 22. [IV. CAREGIVING]: Is an in-home paid caregiver ever utilized (full or part-time) (Years in relation to year of randomization)
44	caregiver_mnth_dmqu	Num	8	F042: 22.a [IV. CAREGIVING]: How long was the caregiver utilized (in months) Months
45	caregiver_why_dmqu	Num	8	F042: 22.b [IV. CAREGIVING]: Why was caregiver utilized
46	relatives_dmqu	Num	8	F042: 23. [IV. CAREGIVING]: Did (s)he ever move in with relatives
47	relatives_yrsR_dmqu	Num	8	F042: 23. [IV. CAREGIVING]: Did (s)he ever move in with relatives (Years in relation to year of randomization)
48	relatives_mnth_dmqu	Num	8	F042: 23.a [IV. CAREGIVING]: How long did (s)he live with relatives (in months)
49	relatives_why_dmqu	Num	8	F042: 23.b [IV. CAREGIVING]: Why did (s)he move in with relatives
50	assisted_dmqu	Num	8	F042: 24. [IV. CAREGIVING]: Did (s)he ever reside in assisted living and/or board & care home
51	assisted_yrsR_dmqu	Num	8	F042: 24. [IV. CAREGIVING]: Did (s)he ever reside in assisted living and/or board & care home (Years in relation to year of randomization)
52	assisted_mnth_dmqu	Num	8	F042: 24.a [IV. CAREGIVING]: How long did (s)he reside in assisted living/board & care (in months)
53	assisted_why_dmqu	Num	8	F042: 24.b [IV. CAREGIVING]: Why did (s)he move to assisted living and/or board & care home
54	nursing_dmqu	Num	8	F042: 25. [IV. CAREGIVING]: Did (s)he ever reside in a nursing home
55	nursing_yrsR_dmqu	Num	8	F042: 25. [IV. CAREGIVING]: Did (s)he ever reside in a nursing home (Years in relation to year of randomization)

Num	Variable	Type	Len	Label
56	nursing_mnth_dmqu	Num	8	F042: 25.a [IV. CAREGIVING]: How long did (s)he reside in a nursing home (in months)
57	nursing_why_dmqu	Num	8	F042: 25.b [IV. CAREGIVING]: Why did (s)he move to a nursing
58	tasks_dmqu	Num	8	F042: 26 [V. DAILY FUNCTIONING]: Trouble with household tasks: using microwave, light cleaning i.e. putting items away
59	tasks_yrsR_dmqu	Num	8	F042: 26 [V. DAILY FUNCTIONING]: Trouble with household tasks: using microwave, light cleaning i.e. putting items away (Years in relation to year of randomization)
60	money_dmqu	Num	8	F042: 27. [V. DAILY FUNCTIONING]: Trouble handling money: paying bills, making change, writing checks, balancing check book, taxes, investments
61	money_yrsR_dmqu	Num	8	F042: 27. [V. DAILY FUNCTIONING]: Trouble handling money: paying bills, making change, writing checks, balancing check book, taxes, investments (Years in relation to year of randomization)
62	dressings_dmqu	Num	8	F042: 28. [V. DAILY FUNCTIONING]: Trouble dressing: choosing or changing clothes, tying shoes, using fasteners
63	dressings_yrsR_dmqu	Num	8	F042: 28. [V. DAILY FUNCTIONING]: Trouble dressing: choosing or changing clothes, tying shoes, using fasteners (Years in relation to year of randomization)
64	feeding_dmqu	Num	8	F042: 29. [V. DAILY FUNCTIONING]: Trouble feeding self: using cups or utensils, cutting meat, buttering bread
65	feeding_yrsR_dmqu	Num	8	F042: 29. [V. DAILY FUNCTIONING]: Trouble feeding self: using cups or utensils, cutting meat, buttering bread (Years in relation to year of randomization)
66	bathing_dmqu	Num	8	F042: 30. [V. DAILY FUNCTIONING]: Trouble bathing: knowing what to do in the shower or tub,
67	bathing_yrsR_dmqu	Num	8	F042: 30. [V. DAILY FUNCTIONING]: Trouble bathing: knowing what to do in the shower or tub, (Years in relation to year of randomization)
68	bladder_dmqu	Num	8	F042: 31. [V. DAILY FUNCTIONING]: Trouble controlling bladder or bowels
69	bladder_yrsR_dmqu	Num	8	F042: 31. [V. DAILY FUNCTIONING]: Trouble controlling bladder or bowels (Years in relation to year of randomization)
70	take_meds_dmqu	Num	8	F042: 32. [V. DAILY FUNCTIONING]: Trouble remembering to take medications
71	take_meds_yrsR_dmqu	Num	8	F042: 32. [V. DAILY FUNCTIONING]: Trouble remembering to take medications (Years in relation to year of randomization)
72	drive_dmqu	Num	8	F042: 33. [V. DAILY FUNCTIONING]: Did (s)he ever drive
73	drive_stop_dmqu	Num	8	F042: 33.a [V. DAILY FUNCTIONING]: Did (s)he ever stop driving
74	drive_stop_yrsR_dmqu	Num	8	F042: 33.a [V. DAILY FUNCTIONING]: Did (s)he ever stop driving (Years in relation to year of randomization)
75	drive_stop_why_dmqu	Num	8	F042: 33.b [V. DAILY FUNCTIONING]: Why did (s)he stop driving
76	drive_problems_dmqu	Num	8	F042: 33.c [V. DAILY FUNCTIONING]: Is (did)(s)he having (have) any problems (driving)
77	drive_problems_type_dmqu	Num	8	F042: 33.d DAILY FUNCTIONING: What type of problems (driving)
78	highbp_dmqu	Num	8	F042: 34. [IV. MEDICAL PROBLEMS]: High blood pressure
79	highbp_yrsR_dmqu	Num	8	F042: 34. [IV. MEDICAL PROBLEMS]: High blood pressure (Years in relation to year of randomization)
80	stroke_dmqu	Num	8	F042: 35. [IV. MEDICAL PROBLEMS]: Stroke (symptoms unresolved or >24 hrs)
81	stroke_yrsR_dmqu	Num	8	F042: 35. [IV. MEDICAL PROBLEMS]: Stroke (symptoms unresolved or >24 hrs) (Years in relation to year of randomization)

Num	Variable	Type	Len	Label
82	tia_dmqu	Num	8	F042: 36. [IV. MEDICAL PROBLEMS]: TIA (symptoms resolved = 24 hrs)
83	tia_yrsR_dmqu	Num	8	F042: 36. [IV. MEDICAL PROBLEMS]: TIA (symptoms resolved = 24 hrs) (Years in relation to year of randomization)
84	one_side_dmqu	Num	8	F042: 37. [IV. MEDICAL PROBLEMS]: Is the one side of the body weaker than the other side
85	one_side_yrsR_dmqu	Num	8	F042: 37. [IV. MEDICAL PROBLEMS]: Is the one side of the body weaker than the other side (Years in relation to year of randomization)
86	parkinsons_dmqu	Num	8	F042: 38. [IV. MEDICAL PROBLEMS]: Parkinson's disease (resting, tremor, shuffling gait, limb rigidity)
87	parkinsons_yrsR_dmqu	Num	8	F042: 38. [IV. MEDICAL PROBLEMS]: Parkinson's disease (resting, tremor, shuffling gait, limb rigidity) (Years in relation to year of randomization)
88	seizure_dmqu	Num	8	F042: 39. [IV. MEDICAL PROBLEMS]: Epileptic seizures or fits
89	seizure_yrsR_dmqu	Num	8	F042: 39. [IV. MEDICAL PROBLEMS]: Epileptic seizures or fits (Years in relation to year of randomization)
90	drinking_dmqu	Num	8	F042: 40. [IV. MEDICAL PROBLEMS]: Drinking problem
91	drinking_mem_dmqu	Num	8	F042: 40.a [IV. MEDICAL PROBLEMS]: Does (s)he have memory/thinking problems that could be due to drinking
92	depressed_dmqu	Num	8	F042: 41. [IV. MEDICAL PROBLEMS]: Ever depressed or sad for two weeks or more
93	depressed_yrsR_dmqu	Num	8	F042: 41. [IV. MEDICAL PROBLEMS]: Ever depressed or sad for two weeks or more (Years in relation to year of randomization)
94	dep_treat_dmqu	Num	8	F042: 41.a [IV. MEDICAL PROBLEMS]: Ever seek treatment
95	hallucinations_dmqu	Num	8	F042: 42. [IV. MEDICAL PROBLEMS]: Hallucinations (see or hear things/people not there)
96	hallucinations_yrsR_dmqu	Num	8	F042: 42. [IV. MEDICAL PROBLEMS]: Hallucinations (see or hear things/people not there) (Years in relation to year of randomization)
97	delusions_dmqu	Num	8	F042: 43. [IV. MEDICAL PROBLEMS]: Delusions (false beliefs, people stealing, wanting to harm, cheating)
98	delusions_yrsR_dmqu	Num	8	F042: 43. [IV. MEDICAL PROBLEMS]: Delusions (false beliefs, people stealing, wanting to harm, cheating) (Years in relation to year of randomization)
99	agitation_dmqu	Num	8	F042: 44. [IV. MEDICAL PROBLEMS]: Agitation and nervousness
100	agitation_yrsR_dmqu	Num	8	F042: 44. [IV. MEDICAL PROBLEMS]: Agitation and nervousness (Years in relation to year of randomization)
101	psych_dmqu	Num	8	F042: 45. [IV. MEDICAL PROBLEMS]: Ever seek psychiatric help for any reason
102	psych_hosp_dmqu	Num	8	F042: 45.a [IV. MEDICAL PROBLEMS]: Ever hospitalized for psychiatric illness
103	psych_hosp_yrsR_dmqu	Num	8	F042: 45.a [IV. MEDICAL PROBLEMS]: Ever hospitalized for psychiatric illness (Years in relation to year of randomization)
104	psych_exam_dmqu	Num	8	F042: 46. [IV. MEDICAL PROBLEMS]: Did (s)he ever have a neurological or psychiatric exam
105	ct_mri_dmqu	Num	8	F042: 47. [IV. MEDICAL PROBLEMS]: Did (s)he ever have a CT scan or MRI of the head
106	lang	Num	8	F042: Source Form Language:

Data Set Name: f043_bostonnaming.sas7bdat

Num	Variable	Type	Len	Label
1	MaskID	Num	8	LIFE Participant Identifier
2	vc	Char	5	Visit Code
3	vis_days	Num	8	Date of Visit: converted to Days (in relation to randomization)
4	pretzel_bona	Num	8	F043: 1. Name picture: Pretzel (cue: something to eat)
5	seahorse_bona	Num	8	F043: 2. Name picture: Seahorse (cue: horsefish, an ocean animal)
6	rhino_bona	Num	8	F043: 3. Name picture: Rhinoceros (cue: an animal)
7	acorn_bona	Num	8	F043: 4. Name picture: Acorn (cue: it comes from a tree)
8	dom_bona	Num	8	F043: 5. Name picture: Dominoes (cue: a game)
9	pelican_bona	Num	8	F043: 6. Name picture: Pelican (cue: a bird)
10	steth_bona	Num	8	F043: 7. Name picture: Stethoscope (cue: used by doctors and nurses)
11	muzzle_bona	Num	8	F043: 8. Name picture: Muzzle (cue: used on dogs)
12	unicorn_bona	Num	8	F043: 9. Name picture: Unicorn (cue: mythical animal)
13	aspara_bona	Num	8	F043: 10. Name picture: Asparagus (cue: something you eat)
14	scroll_bona	Num	8	F043: 11. Name picture: Scroll (cue: a document)
15	tongs_bona	Num	8	F043: 12. Name picture: Tongs (cue: a utensil)
16	sphinx_bona	Num	8	F043: 13. Name picture: Sphinx (cue: it's found in Egypt)
17	trellis_bona	Num	8	F043: 14. Name picture: Trellis (cue: used in garden)
18	palette_bona	Num	8	F043: 15. Name picture: Palette (cue: artists use it)
19	tot_correct_bona	Num	8	F043: Total Correct
20	tot_withcue_bona	Num	8	F043: Total Correct with cue
21	tot_incorrect_bona	Num	8	F043: Total Incorrect
22	lang	Num	8	F043: Source Form Language:

Data Set Name: f044_wais.sas7bdat

Num	Variable	Type	Len	Label
1	MaskID	Num	8	LIFE Participant Identifier
2	vc	Char	5	Visit Code
3	vis_days	Num	8	Date of Visit: converted to Days (in relation to randomization)
4	dsst_score	Num	8	F044: Digit Symbol Substitution Test Score
5	lang	Num	8	F044: Source Form Language:

Data Set Name: *f045_hvlt.sas7bdat*

Num	Variable	Type	Len	Label
1	MaskID	Num	8	LIFE Participant Identifier
2	vc	Char	5	Visit Code
3	vis_days	Num	8	Date of Visit: converted to Days (in relation to randomization)
4	t1_total_hvlt	Num	8	F045: Trial 1 Total Correct Responses:
5	t2_total_hvlt	Num	8	F045: Trial 2 Total Correct Responses:
6	t3_total_hvlt	Num	8	F045: Trial 3 Total Correct Responses:
7	t4_total_hvlt	Num	8	F045: Trial 4 Total Correct Responses:
8	t3_comphr_hvlt	Char	2	F045: Trial 3 Completion Time (hr):
9	t3_compmin_hvlt	Char	2	F045: Trial 3 Completion Time (min):
10	t4_starthr_hvlt	Char	2	F045: Trial 4 Start Time (hr):
11	t4_startmin_hvlt	Char	2	F045: Trial 4 Start Time (min):
12	total_true_hvlt	Num	8	F045: Total number of true-positive responses, with No shading (of 12)
13	semantic_related_hvlt	Num	8	F045: Semantically related false-positive errors, With light shading (of 6)
14	semantic_unrelated_hvlt	Num	8	F045: Semantically unrelated false-positive errors, With darker shading (of 6)
15	total_false_hvlt	Num	8	F045: Total number of false-positive errors (of 12)
16	lang	Num	8	F045: Source Form Language:
17	hvltimmediate	Num	8	[C] F045: HVLT: immediate recall
18	hvltdelayed	Num	8	[C] F045: HVLT: delayed recall
19	hvltrcog	Num	8	[C] F045: HVLT: 100*total_true/12

Data Set Name: *f046_trailmakingtest.sas7bdat*

Num	Variable	Type	Len	Label
1	MaskID	Num	8	LIFE Participant Identifier
2	vc	Char	5	Visit Code
3	vis_days	Num	8	Date of Visit: converted to Days (in relation to randomization)
4	timea_tmab	Num	8	F046: Scoring: Part A time to complete (sec):
5	errora_tmab	Num	8	F046: Scoring: Part A number of errors:
6	timeb_tmab	Num	8	F046: Scoring: Part B time to complete (sec):
7	errorb_tmab	Num	8	F046: Scoring: Part B number of errors:
8	lang	Num	8	F046: Source Form Language:
9	corrected_timea_tmab	Num	8	[C] F046: TestA Time: Corrected to maximum seconds, when errors equal/exceed 5
10	corrected_timeb_tmab	Num	8	[C] F046: TestB Time: Corrected to maximum seconds, when errors equal/exceed 5

Data Set Name: *f051_anklebrachialindex.sas7bdat*

Num	Variable	Type	Len	Label
1	MaskID	Num	8	LIFE Participant Identifier
2	vc	Char	5	Visit Code
3	vis_days	Num	8	Date of Visit: converted to Days (in relation to randomization)
4	rtprs1_abim	Num	8	F051: 1. Right Arm Pressure (Measurement #1)
5	rtpt1_abim	Num	8	F051: 2. Right PT (Measurement #1)
6	ltpt1_abim	Num	8	F051: 3. Left PT (Measurement #1)
7	ltprs1_abim	Num	8	F051: 4. Left Arm Pressure (Measurement #1)
8	ltprs2_abim	Num	8	F051: 5. Left Arm Pressure (Measurement #2)
9	ltpt2_abim	Num	8	F051: 6. Left PT (Measurement #2)
10	rtpt2_abim	Num	8	F051: 7. Right PT (Measurement #2)
11	rtprs2_abim	Num	8	F051: 8. Right Arm Pressure (Measurement #2)
12	ltabi_abim	Num	8	F051: 9. Left Leg ABI
13	rtabi_abim	Num	8	F051: 10. Right Leg ABI
14	abi_abim	Num	8	F051: 11. ABI
15	lang	Num	8	F051: Source Form Language:

Data Set Name: f052_baselineclaudication.sas7bdat

Num	Variable	Type	Len	Label
1	MaskID	Num	8	LIFE Participant Identifier
2	vc	Char	5	Visit Code
3	vis_days	Num	8	Date of Visit: converted to Days (in relation to randomization)
4	poorflow_sdcdb	Num	8	F052: 1. Has a doctor ever told you that you have poor blood flow to your legs (intermittent claudication, peripheral arterial disease, or peripheral vascular disease)?
5	hospflow_sdcdb	Num	8	F052: 2. Have you ever been in the hospital for an operation or procedure to improve the blood flow to your legs (including angioplasty or stent)? [most recent]
6	leg1_sdcdb	Num	8	F052: 2. Procedure, blood flow: Which leg?
7	days_hosp_sdcdb	Num	8	F052: 2. Procedure, blood flow: Time of Hospitalization (converted to days in relation to randomization)
8	abdomaa_sdcdb	Num	8	F052: 3. Has a doctor ever told you that you have had an abdominal aortic aneurysm that is an abnormal enlargement of the main artery in the abdomen?
9	abdomaasurg_sdcdb	Num	8	F052: 4. Have you had surgery for the abdominal aortic aneurysm?
10	pitbutt_sdcdb	Num	8	F052: 5. Do you get pain in either leg or either buttock when walking?
11	leg_sdcdb	Num	8	F052: 5. Pain when walking: Which leg?
12	sitleft_sdcdb	Num	8	F052: 6. Does this pain ever begin when you are STANDING STILL or SITTING? (Left)
13	sitright_sdcdb	Num	8	F052: 6. Does this pain ever begin when you are STANDING STILL or SITTING? (Right)
14	calfleft_sdcdb	Num	8	F052: 7. In what part of the leg or buttock do you feel the pain? - Calf (Left)
15	calfright_sdcdb	Num	8	F052: 7. In what part of the leg or buttock do you feel the pain? - Calf (Right)
16	thighleft_sdcdb	Num	8	F052: 8. In what part of the leg or buttock do you feel the pain? - Thigh (Left)
17	thighright_sdcdb	Num	8	F052: 8. In what part of the leg or buttock do you feel the pain? - Thigh (Right)
18	buttleft_sdcdb	Num	8	F052: 9. In what part of the leg or buttock do you feel the pain? - Buttock (Left)
19	buttright_sdcdb	Num	8	F052: 9. In what part of the leg or buttock do you feel the pain? - Buttock (Right)
20	uphillleft_sdcdb	Num	8	F052: 10. Do you get this pain when you walk UPHILL or HURRY? (Left)
21	nvrhurry_sdcdb	Num	8	F052: 10. Never walks uphill or hurries.
22	uphillright_sdcdb	Num	8	F052: 10. Do you get this pain when you walk UPHILL or HURRY? (Right)
23	paceleft_sdcdb	Num	8	F052: 11. Do you get this pain when you walk at an ORDINARY PACE on the level? (Left)
24	paceright_sdcdb	Num	8	F052: 11. Do you get this pain when you walk at an ORDINARY PACE on the level? (Right)
25	diswalkleft_sdcdb	Num	8	F052: 12. Does this pain ever DISAPPEAR while you are WALKING? (Left)
26	diswalkright_sdcdb	Num	8	F052: 12. Does this pain ever DISAPPEAR while you are WALKING? (Right)
27	walktreat_sdcdb	Num	8	F052: 13. What do you do if you get it when you are walking?
28	stillleft_sdcdb	Num	8	F052: 14. What happens if you STAND STILL? (Left)
29	stillright_sdcdb	Num	8	F052: 14. What happens if you STAND STILL? (Right)
30	soonleft_sdcdb	Num	8	F052: 15. If standing still relieves pain, HOW SOON? (Left)
31	soonright_sdcdb	Num	8	F052: 15. If standing still relieves pain, HOW SOON? (Right)
32	lang	Num	8	F052: Source Form Language:

Data Set Name: f053_followupclaudication.sas7bdat

Num	Variable	Type	Len	Label
1	MaskID	Num	8	LIFE Participant Identifier
2	vc	Char	5	Visit Code
3	vis_days	Num	8	Date of Visit: converted to Days (in relation to randomization)
4	bloodproc_sdcf	Num	8	F053: 1. Since your last visit on [date of last visit], have you had a procedure to improve the blood flow to your legs (including lower extremity revascularization, angioplasty, stent placement, or thrombolysis)?
5	leg1_sdcf	Num	8	F053: 1. Procedure 1 (blood flow): Which leg?
6	leg2_sdcf	Num	8	F053: 1. Procedure 2 (blood flow): Which leg?
7	hospflow_sdcf	Num	8	F053: 2. Since your last visit, have you been hospitalized for a blood flow problem to your legs such as gangrene or an amputation?
8	leg3_sdcf	Num	8	F053: 2. Gangrene/Amputation: Which leg?
9	poorflow_sdcf	Num	8	F053: 3. Since your last visit, has a doctor ever told you that you have poor blood flow to your legs (intermittent claudication, peripheral arterial disease, or peripheral vascular disease)?
10	abdomaneur_sdcf	Num	8	F053: 4. Since your last visit, has a doctor told you that you had an abdominal aortic aneurysm, that is an abnormal enlargement of the main artery in the abdomen?
11	surgeaneur_sdcf	Num	8	F053: 4.a. Have you had surgery for the abdominal aortic aneurysm?
12	pitbutt_sdcf	Num	8	F053: 5. Do you get pain in either leg or either buttock when walking?
13	leg_sdcf	Num	8	F053: 5. Pain walking - Which leg?
14	sitleft_sdcf	Num	8	F053: 6. Does this pain ever begin when you are STANDING STILL or SITTING? (Left)
15	sitright_sdcf	Num	8	F053: 6. Does this pain ever begin when you are STANDING STILL or SITTING? (Right)
16	calfleft_sdcf	Num	8	F053: 7. In what part of the leg or buttock do you feel the pain? - Calf (Left)
17	calfright_sdcf	Num	8	F053: 7. In what part of the leg or buttock do you feel the pain? - Calf (Right)
18	thighleft_sdcf	Num	8	F053: 8. In what part of the leg or buttock do you feel the pain? - Thigh (Left)
19	thighright_sdcf	Num	8	F053: 8. In what part of the leg or buttock do you feel the pain? - Thigh (Right)
20	buttleft_sdcf	Num	8	F053: 9. In what part of the leg or buttock do you feel the pain? - Buttock (Left)
21	buttright_sdcf	Num	8	F053: 9. In what part of the leg or buttock do you feel the pain? - Buttock (Right)
22	uphillleft_sdcf	Num	8	F053: 10. Do you get this pain when you walk UPHILL or HURRY? (Left)
23	nvrhurry_sdcf	Num	8	F053: 10. Never walks uphill or hurries.
24	uphillright_sdcf	Num	8	F053: 10. Do you get this pain when you walk UPHILL or HURRY? (Right)
25	paceleft_sdcf	Num	8	F053: 11. Do you get this pain when you walk at an ORDINARY PACE on the level? (Left)
26	paceright_sdcf	Num	8	F053: 11. Do you get this pain when you walk at an ORDINARY PACE on the level? (Right)
27	diswalkleft_sdcf	Num	8	F053: 12. Does this pain ever DISAPPEAR while you are WALKING? (Left)
28	diswalkright_sdcf	Num	8	F053: 12. Does this pain ever DISAPPEAR while you are WALKING? (Right)
29	walktreat_sdcf	Num	8	F053: 13. What do you do if you get it when you are walking?
30	stillleft_sdcf	Num	8	F053: 14. What happens if you STAND STILL? (Left)
31	stillright_sdcf	Num	8	F053: 14. What happens if you STAND STILL? (Right)
32	soonleft_sdcf	Num	8	F053: 15. If standing still relieves pain, HOW SOON? (Left)
33	soonright_sdcf	Num	8	F053: 15. If standing still relieves pain, HOW SOON? (Right)
34	lang	Num	8	F053: Source Form Language:

Data Set Name: f054_nappingcaffeine.sas7bdat

Num	Variable	Type	Len	Label
1	MaskID	Num	8	LIFE Participant Identifier
2	vc	Char	5	Visit Code
3	vis_days	Num	8	Date of Visit: converted to Days (in relation to randomization)
4	nap_ncei	Num	8	F054: 1. How much time do you spend napping or sleeping during a typical day, meaning prior to your bedtime? (minutes)
5	drink_ncei	Num	8	F054: 2. How many cups or cans of caffeinated beverages, such as soda, energy drinks, coffee, tea, iced coffee, or iced tea, do you typically drink each day?
6	lang	Num	8	F054: Source Form Language:

Data Set Name: *f055_epworthsleepinessscale.sas7bdat*

Num	Variable	Type	Len	Label
1	MaskID	Num	8	LIFE Participant Identifier
2	vc	Char	5	Visit Code
3	vis_days	Num	8	Date of Visit: converted to Days (in relation to randomization)
4	sitread_essq	Num	8	F055: 1. How likely are you to doze off or fall asleep in contrast to feeling just tired: while sitting and reading?
5	wtchtlv_essq	Num	8	F055: 2. How likely are you to doze off or fall asleep in contrast to feeling just tired: while watching TV?
6	public_essq	Num	8	F055: 3. How likely are you to doze off or fall asleep in contrast to feeling just tired: while sitting, inactive in a public place (at a theater or meeting)?
7	pssgrhr_essq	Num	8	F055: 4. How likely are you to doze off or fall asleep in contrast to feeling just tired: while a passenger in a car for an hour without a break?
8	lydwn_essq	Num	8	F055: 5. How likely are you to doze off or fall asleep in contrast to feeling just tired: while lying down to rest in the afternoon when circumstances permit?
9	sittlk_essq	Num	8	F055: 6. How likely are you to doze off or fall asleep in contrast to feeling just tired: while sitting and talking to someone?
10	aftlnch_essq	Num	8	F055: 7. How likely are you to doze off or fall asleep in contrast to feeling just tired: while sitting quietly after a lunch without alcohol?
11	pssgrmin_essq	Num	8	F055: 8. How likely are you to doze off or fall asleep in contrast to feeling just tired: while a passenger or driver in a car, stopped for a few minutes in traffic?
12	lang	Num	8	F055: Source Form Language:
13	sum_epworth	Num	8	[C] F055: Epworth Sleepiness Scale (ESSQ)
14	nmis_epworth	Num	8	[C] F055: ESSQ, number of missing items (8 items)
15	cat_epworth	Num	8	[C] F055: ESSQ >= 10

Data Set Name: *f056_insomniaseverityindex.sas7bdat*

Num	Variable	Type	Len	Label
1	MaskID	Num	8	LIFE Participant Identifier
2	vc	Char	5	Visit Code
3	vis_days	Num	8	Date of Visit: converted to Days (in relation to randomization)
4	fllas_insi	Num	8	F056: 1. How much difficulty have you had falling asleep? (avg past two weeks)
5	styas_insi	Num	8	F056: 2. How much difficulty have you had staying asleep? (avg past two weeks)
6	wkerly_insi	Num	8	F056: 3. How much difficulty have you had waking up too early? (avg past two weeks)
7	slpqlty_insi	Num	8	F056: 4. How satisfied are you with your current sleep quality? (avg past two weeks)
8	disfuntldly_insi	Num	8	F056: 5. To what extent do you consider your sleep quality as disturbing with your daily functioning (for example, daytime fatigue, ability to function at work/daily chores, concentration, memory, mood, etc). (avg past two weeks)
9	notcoth_insi	Num	8	F056: 6. How noticeable to others do you think the quality of your sleep is in terms of impairing the quality of your life. (avg past two weeks)
10	worri_insi	Num	8	F056: 7. How worried are you about your current sleep quality? (avg past two weeks)
11	lang	Num	8	F056: Source Form Language:
12	sum_insi	Num	8	[C] F056: Insomnia Severity Index (INSI)
13	nmis_insi	Num	8	[C] F056: INSI, number of missing items (7 items)
14	cat_insi	Num	8	[C] F056: INSI >= 8

Data Set Name: *f057_pittsburghsleepqualityindex.sas7bdat*

Num	Variable	Type	Len	Label
1	MaskID	Num	8	LIFE Participant Identifier
2	vc	Char	5	Visit Code
3	vis_days	Num	8	Date of Visit: converted to Days (in relation to randomization)
4	tobedhr_psqi	Char	2	F057: 1. At what hour have you usually gone to bed? (past mon)
5	fallasleep_psqi	Num	8	F057: 2. How long (in minutes) has it taken you to fall asleep each night? (past mon)
6	arisehr_psqi	Char	2	F057: 3. At what hour have you usually gotten up in the morning? (past mon)
7	sleephrs_psqi	Num	8	F057: 4. How many hours of actual sleep did you get last night? (This may be different than the hours you spend in bed.) (past mon)
8	insomnia_psqi	Num	8	F057: 5. Trouble sleeping: Cannot get to sleep with 30 minutes (past mon)?
9	wakeful_psqi	Num	8	F057: 6. Trouble sleeping: Wake up in the middle of the night or early morning? (past mon)
10	bathroom_psqi	Num	8	F057: 7. Trouble sleeping: Have to get up to use the bathroom? (past mon)
11	breathing_psqi	Num	8	F057: 8. Trouble sleeping: Cannot breathe comfortably? (past mon)
12	snoring_psqi	Num	8	F057: 9. Trouble sleeping: Cough or snore loudly? (past mon)
13	cold_psqi	Num	8	F057: 10. Trouble sleeping: Feel too cold? (past mon)
14	hot_psqi	Num	8	F057: 11. Trouble sleeping: Feel too hot? (past mon)
15	nightmares_psqi	Num	8	F057: 12. Trouble sleeping: Have bad dreams? (past mon)
16	pain_psqi	Num	8	F057: 13. Trouble sleeping: Have pain? (past mon)
17	other_psqi	Num	8	F057: 14. Trouble sleeping: Other reasons(s), please describe, including how often you have had trouble sleeping because of this reason(s). (past mon)
18	medsleep_psqi	Num	8	F057: 15. How often have you taken medicine (prescribed or over the counter) to help you sleep? (past mon)
19	drowsy_psqi	Num	8	F057: 16. How often have you had trouble staying awake while driving, eating meals, or engaging in social activities? (past mon)
20	enthused_psqi	Num	8	F057: 17. How much of a problem has it been for you to keep enthusiasm to get things done? (past mon)
21	sleepqual_psqi	Num	8	F057: 18. How would you rate your sleep quality overall? (past mon)
22	lang	Num	8	F057: Source Form Language:
23	sum_PSQI	Num	8	[C] F057: Pittsburgh Sleep Quality Index (PSQI)
24	nmis_PSQI	Num	8	[C] F057: PSQI, number of missing items (7 items)
25	cat_PSQI	Num	8	[C] F057: PSQI > 5

Data Set Name: f058_baselinepulmonary.sas7bdat

Num	Variable	Type	Len	Label
1	MaskID	Num	8	LIFE Participant Identifier
2	vc	Char	5	Visit Code
3	vis_days	Num	8	Date of Visit: converted to Days (in relation to randomization)
4	cough_atsb	Num	8	F058: 1.A Cough: Do you usually have a cough? {count a cough with first smoke or on first going out-of doors; exclude clearing of throat}
5	coughmuch_atsb	Num	8	F058: 1.B Cough: Do you usually cough as much as 4 to 6 times a day, 4 or more days of the week?
6	coughwake_atsb	Num	8	F058: 1.C Cough: Do you usually cough at all on getting up, or first thing in the morning?
7	coughday_atsb	Num	8	F058: 1.D Cough: Do you usually cough at all during the rest of the day or at night?
8	coughmonths_atsb	Num	8	F058: 1.E Cough: Do you usually cough like this on most days for 5 consecutive months or more during the year?
9	coughyrs_atsb	Num	8	F058: 1.F Cough: For how many years have you had this cough? (years)
10	phlegm_atsb	Num	8	F058: 2.A Phlegm: Do you usually bring up phlegm from your chest? {count phlegm with the first smoke or on first going out-of-doors; exclude phlegm from the nose; count swallowed phlegm}
11	phlegmmuch_atsb	Num	8	F058: 2.B Phlegm: Do you usually bring up phlegm like as much as twice a day, 4 or more days of the week?
12	phlegmwake_atsb	Num	8	F058: 2.C Phlegm: Do you usually bring up phlegm at all on getting up, or first thing in the morning?
13	phlegmday_atsb	Num	8	F058: 2.D Phlegm: Do you usually bring up phlegm at all during the rest of the day or at night?
14	phlegmmmonths_atsb	Num	8	F058: 2.E Phlegm: Do you usually bring up phlegm like this on most days for 3 consecutive months or more during the year?
15	phlegmyrs_atsb	Num	8	F058: 2.F Phlegm: For how many years have you had trouble with phlegm? (years)
16	coughinc_atsb	Num	8	F058: 3.A Cough: Have you had episodes of (increased*) cough and phlegm lasting for 3 weeks or more each year? {*for individuals who usually have cough and/or phlegm}
17	coughincyrs_atsb	Num	8	F058: 3.B Cough: For how long have you had at least 1 such episode per year? (years)
18	wheezcold_atsb	Num	8	F058: 4.A.1 Wheezing: Does your chest ever sound wheezy or whistling: When you have a cold?
19	wheezncold_atsb	Num	8	F058: 4.A.2 Wheezing: Does your chest ever sound wheezy or whistling: Occasionally apart from colds?
20	wheezdays_atsb	Num	8	F058: 4.A.3 Wheezing: Does your chest ever sound wheezy or whistling: Most days or nights?
21	wheezyrs_atsb	Num	8	F058: 4.B Wheezing: For how many years has this been present? (years)
22	wheezatk_atsb	Num	8	F058: 4.C Wheezing: Have you ever had an ATTACK of wheezing that has made you feel short of breath?
23	wheezatkyrs_atsb	Num	8	F058: 4.D Wheezing: How old were you when you had your first such attack? (years)
24	wheezepisodes_atsb	Num	8	F058: 4.E Wheezing: Have you had 2 or more such episodes?
25	wheeztreat_atsb	Num	8	F058: 4.F Wheezing: Have you ever required medicine or treatment for the(se) attack(s)?
26	breathhill_atsb	Num	8	F058: 5.B Breathlessness: Are you troubled by shortness of breath when hurrying on the level or walking up a slight hill?
27	breathlevel_atsb	Num	8	F058: 5.C Breathlessness: Do you have to walk slower than people of your age on level because of breathlessness?
28	breathstop_atsb	Num	8	F058: 5.D Breathlessness: Do you ever have to stop for breath when walking at your own pace on the level?

Num	Variable	Type	Len	Label
29	breathstop100_atlb	Num	8	F058: 5.E Breathlessness: Do you ever have to stop for breath after walking about 100 yards (or after a few minutes) on the level?
30	breathhouse_atlb	Num	8	F058: 5.F Breathlessness: Are you too breathless to leave the house or breathless on dressing or undressing?
31	chestill_atlb	Num	8	F058: 6.A Chest Colds and Chest Illnesses: If you get a cold, does it usually go to your chest? {usually means more than ½ the time}
32	chestdisable_atlb	Num	8	F058: 6.B Chest Colds and Chest Illnesses: During the past 3 years, have you had any chest illnesses that have kept you off work, indoors at home, or in bed?
33	chestphlegm_atlb	Num	8	F058: 6.C Chest Colds and Chest Illnesses: Did you produce phlegm with any of these chest illnesses?
34	chestyrs_atlb	Num	8	F058: 6.D Chest Colds and Chest Illnesses: In the last 3 years, how many such illnesses, with (increased) phlegm, did you have which lasted a week or more? (number)
35	chestyrsna_atlb	Num	8	F058: 6.D Chest Colds and Chest Illnesses: In the last 3 years, how many such illnesses, with (increased) phlegm, did you have which lasted a week or more? (none)
36	lung_atlb	Num	8	F058: 7.A Past Illnesses: Did you have any lung trouble before the age of 16?
37	bronch_atlb	Num	8	F058: 7.B Past Illnesses: Have you ever had attacks of Bronchitis?
38	bronchdoc_atlb	Num	8	F058: 7.B.1 Past Illnesses: Bronchitis: Was it confirmed by a doctor?
39	bronchage_atlb	Num	8	F058: 7.B.2 Past Illnesses: Bronchitis: At what age was your first attack? (age in years)
40	pneum_atlb	Num	8	F058: 7.C Past Illnesses: Have you ever had pneumonia (include bronchopneumonia)?
41	pneumdoc_atlb	Num	8	F058: 7.C.1 Past Illnesses: Pneumonia: Was it confirmed by a doctor?
42	pneumage_atlb	Num	8	F058: 7.C.2 Past Illnesses: Pneumonia? At what age was your first attack? (age in years)
43	hayfvr_atlb	Num	8	F058: 7.D Past Illnesses: Have you ever had Hay Fever?
44	hayfvrdoc_atlb	Num	8	F058: 7.D.1 Past Illnesses: Hay Fever: Was it confirmed by a doctor?
45	hayfvrage_atlb	Num	8	F058: 7.D.2 Past Illnesses: Hay Fever: At what age was your first attack? (age in years)
46	chbronch_atlb	Num	8	F058: 7.E Past Illnesses: Have you ever had chronic bronchitis?
47	chbronchstill_atlb	Num	8	F058: 7.E.1 Past Illnesses: Chronic bronchitis: Do you still have it?
48	chbronchdoc_atlb	Num	8	F058: 7.E.2 Past Illnesses: Chronic bronchitis: Was it confirmed by a doctor?
49	chbronchage_atlb	Num	8	F058: 7.E.3 Past Illnesses: Chronic bronchitis: At what age did it start? (age in years)
50	emph_atlb	Num	8	F058: 7.F Past Illnesses: Have you ever had emphysema?
51	emphstill_atlb	Num	8	F058: 7.F.1 Past Illnesses: Emphysema: Do you still have it?
52	emphdoc_atlb	Num	8	F058: 7.F.2 Past Illnesses: Emphysema: Was it confirmed by a doctor?
53	emphage_atlb	Num	8	F058: 7.F.3 Past Illnesses: Emphysema: At what age did it start? (age in years)
54	asthma_atlb	Num	8	F058: 7.G Past Illnesses: Have you ever had asthma?
55	asthmastill_atlb	Num	8	F058: 7.G.1 Past Illnesses: Asthma: Do you still have it?
56	asthmadoc_atlb	Num	8	F058: 7.G.2 Past Illnesses: Asthma: Was it confirmed by a doctor?
57	asthmaage_atlb	Num	8	F058: 7.G.3 Past Illnesses: Asthma: At what age did it start? (age in years)
58	asthmastopage_atlb	Num	8	F058: 7.G.4 Past Illnesses: Asthma: If you no longer have it, at what age did it stop? (age in years)
59	otherchest_atlb	Num	8	F058: 7.H Past Illnesses: Have you ever had any other chest illnesses?
60	chestops_atlb	Num	8	F058: 7.I Past Illnesses: Have you ever had any other chest operations?
61	chestinj_atlb	Num	8	F058: 7.J Past Illnesses: Have you ever had any other chest injuries?

Num	Variable	Type	Len	Label
62	fulltime_atsb	Num	8	F058: 8.A Occupational History: Have you ever worked full time (30 hours per week or more) for 6 months or more?
63	dustyjob_atsb	Num	8	F058: 8.A.1 Occupational History: Have you ever worked for a year or more in any dusty job?
64	dustyjobyrs_atsb	Num	8	F058: 8.A.1 Occupational History: Dust exposure (years worked)
65	dustyjobexp_atsb	Num	8	F058: 8.A.1 Occupational History: Dust exposure (severity)
66	fumes_atsb	Num	8	F058: 8.A.2 Occupational History: Have you ever been exposed to gas or chemical fumes in your work?
67	fumesyrs_atsb	Num	8	F058: 8.A.2 Occupational History: Chemicals: Fumes exposure (years worked)
68	fumesexp_atsb	Num	8	F058: 8.A.2 Occupational History: Chemicals: Fumes exposure (severity)
69	usualjobyrs_atsb	Num	8	F058: 8.A.3 Occupational History: What has been the usual occupation or job you have worked at the longest? (total years worked)
70	cigs_atsb	Num	8	F058: 9.A Tobacco/Smoking: Have you ever smoked cigarettes? {No means less than 20 pack of cigarettes or 12 oz. of tobacco in a lifetime or less than 1 cigarette a day for 1 year}
71	cigsnow_atsb	Num	8	F058: 9.A.1 Tobacco/Smoking: Do you now smoke cigarettes (as of 1 month ago)?
72	cigsage_atsb	Num	8	F058: 9.A.2 Tobacco/Smoking: How old were you when you first started cigarette smoking regularly? (age in years)
73	cigsstopage_atsb	Num	8	F058: 9.A.3 Tobacco/Smoking: If you have stopped smoking cigarettes completely, how old were you when you stopped? (age in years)
74	cigsstopagena_atsb	Num	8	F058: 9.A.3 Tobacco/Smoking: Cigarettes, still Smoking
75	cigsdaynow_atsb	Num	8	F058: 9.A.4 Tobacco/Smoking: How many cigarettes do you smoke per day now? (cig/day)
76	cigsdayavg_atsb	Num	8	F058: 9.A.5 Tobacco/Smoking: On the average of the entire time you smoked, how many cigarettes did you smoke per day? (cig/day)
77	cigsinhale_atsb	Num	8	F058: 9.A.6 Tobacco/Smoking: Do or did you inhale the cigarette smoke?
78	pipe_atsb	Num	8	F058: 9.B Tobacco/Smoking: Have you ever smoked a pipe regularly? {Yes means more than 12 oz tobacco in a lifetime}
79	pipeage_atsb	Num	8	F058: 9.B.1 Tobacco/Smoking: How old were you when you started to smoke a pipe regularly? (age in years)
80	pipestopage_atsb	Num	8	F058: 9.B.2 Tobacco/Smoking: If you have stopped smoking a pipe completely, how old were you when you stopped? (age in years)
81	pipestopagena_atsb	Num	8	F058: 9.B.2 Tobacco/Smoking: Pipe, still smoking
82	pipeoz_atsb	Num	8	F058: 9.B.3 Tobacco/Smoking: On the average of the entire time you smoked a pipe, how much pipe tobacco did you smoke per week? {a standard pouch of tobacco contains 1½ oz} (oz/week)
83	pipeoznow_atsb	Num	8	F058: 9.B.4 Tobacco/Smoking: How much pipe tobacco are you smoking now? (oz/week)
84	pipeinhale_atsb	Num	8	F058: 9.B.5 Tobacco/Smoking: Do or did you inhale the pipe smoke?
85	cigars_atsb	Num	8	F058: 9.C Tobacco/Smoking: Have you ever smoked cigars regularly? {Yes means more 1 cigar a week for a year}
86	cigarage_atsb	Num	8	F058: 9.C.1 Tobacco/Smoking: How old were you when you started to smoke cigars regularly? (age in years)
87	cigarstopage_atsb	Num	8	F058: 9.C.2 Tobacco/Smoking: If you have stopped smoking cigars completely, how old were you when you stopped? (age in years)
88	cigarstopagena_atsb	Num	8	F058: 9.C.2 Tobacco/Smoking: Cigars, still smoking
89	cigarsweek_atsb	Num	8	F058: 9.C.3 Tobacco/Smoking: On the average of the entire time you smoked cigars, how many cigars did you smoke per week? (cigars/week)
90	cigarsnow_atsb	Num	8	F058: 9.C.4 Tobacco/Smoking: How many cigars are you smoking now? (cigars/week)

Num	Variable	Type	Len	Label
91	cigarsinhale_at sb	Num	8	F058: 9.C.5 Tobacco/Smoking: Do or did you inhale the cigar smoke?
92	oxygen_at sb	Num	8	F058: 10.A Oxygen: Do you ever use oxygen therapy at home?
93	oxygenwhen_at sb	Num	8	F058: 10.A.1 Oxygen: When do you use it?
94	puffer_at sb	Num	8	F058: 11.A Breathing Medications: Inhalers (Puffers): Have you taken any inhalers, puffers or inhaled corticosteroids in the last 3 days for your breathing?
95	puffampm1_at sb	Num	8	F058: 11.A Breathing Medications: Inhalers/Puffers: Medication 1, AM/PM
96	puffwhen1_at sb	Num	8	F058: 11.A Breathing Medications: Inhalers/Puffers: Medication 1, Most recent use
97	puffampm2_at sb	Num	8	F058: 11.A Breathing Medications: Inhalers/Puffers: Medication 2, AM/PM
98	puffwhen2_at sb	Num	8	F058: 11.A Breathing Medications: Inhalers/Puffers: Medication 2, Most recent use
99	puffampm3_at sb	Num	8	F058: 11.A Breathing Medications: Inhalers/Puffers: Medication 3, AM/PM
100	puffwhen3_at sb	Num	8	F058: 11.A Breathing Medications: Inhalers/Puffers: Medication 3, Most recent use
101	pills_at sb	Num	8	F058: 11.B Breathing Medications: Pills: Have you taken any pills for your breathing in the last 3 days?
102	pillsampm1_at sb	Num	8	F058: 11.B Breathing Medications: Pills: Medication 1, AM/PM
103	pillswhen1_at sb	Num	8	F058: 11.B Breathing Medications: Pills: Medication 1, Most recent use
104	pillsampm2_at sb	Num	8	F058: 11.B Breathing Medications: Pills: Medication 2, AM/PM
105	pillswhen2_at sb	Num	8	F058: 11.B Breathing Medications: Pills: Medication 2, Most recent use
106	pillsampm3_at sb	Num	8	F058: 11.B Breathing Medications: Pills: Medication 3, AM/PM
107	pillswhen3_at sb	Num	8	F058: 11.B Breathing Medications: Pills: Medication 3, Most recent use
108	lang	Num	8	F058: Source Form Language:

Data Set Name: f059_followuppulmonary.sas7bdat

Num	Variable	Type	Len	Label
1	MaskID	Num	8	LIFE Participant Identifier
2	vc	Char	5	Visit Code
3	vis_days	Num	8	Date of Visit: converted to Days (in relation to randomization)
4	breathhill_at sf	Num	8	F059: 1.B Breathlessness: Are you troubled by shortness of breath when hurrying on the level or walking up a slight hill?
5	breathlevel_at sf	Num	8	F059: 1.C Breathlessness: Do you have to walk slower than people of your age on level because of breathlessness?
6	breathstop_at sf	Num	8	F059: 1.D Breathlessness: Do you ever have to stop for breath when walking at your own pace on the level?
7	breathstop100_at sf	Num	8	F059: 1.E Breathlessness: Do you ever have to stop for breath after walking about 100 yards (or after a few minutes) on the level?
8	breathhouse_at sf	Num	8	F059: 1.F Breathlessness: Are you too breathless to leave the house or breathless on dressing or undressing?
9	cigsnow_at sf	Num	8	F059: 2.A Tobacco/Smoking: Do you now smoke cigarettes (as of 1 month ago)?
10	pipenow_at sf	Num	8	F059: 2.B Tobacco/Smoking: Do you now smoke a pipe (as of 1 month ago)?
11	cigarsnow_at sf	Num	8	F059: 2.C Tobacco/Smoking: Do you now smoke cigars (as of 1 month ago)?
12	oxygen_at sf	Num	8	F059: 3.A Oxygen: Do you ever use oxygen therapy at home?
13	oxygenwhen_at sf	Num	8	F059: 3.A.1 Oxygen: When do you use it?
14	puffer_at sf	Num	8	F059: 4.A Breathing Medications: Inhalers (Puffers). Have you taken any inhalers, puffers or inhaled corticosteroids in the last 3 days for your breathing?
15	puffampm1_at sf	Num	8	F059: 4.A Breathing Medications: Inhaler/Puffer (1), AM/PM
16	puffwhen1_at sf	Num	8	F059: 4.A Breathing Medications: Inhaler/Puffer (1), Most recent use
17	puffampm2_at sf	Num	8	F059: 4.A Breathing Medications: Inhaler/Puffer (2), AM/PM
18	puffwhen2_at sf	Num	8	F059: 4.A Breathing Medications: Inhaler/Puffer (2), Most recent use
19	puffampm3_at sf	Num	8	F059: 4.A Breathing Medications: Inhaler/Puffer (3), AM/PM
20	puffwhen3_at sf	Num	8	F059: 4.A Breathing Medications: Inhaler/Puffer (3), Most recent use
21	pills_at sf	Num	8	F059: 4.B Pills: Have you taken any pills for your breathing in the last 3 days?
22	pillsampm1_at sf	Num	8	F059: 4.B Breathing Medications: Pills (1), AM/PM
23	pillswhen1_at sf	Num	8	F059: 4.B Breathing Medications: Pills (1), Most recent use
24	pillsampm2_at sf	Num	8	F059: 4.B Breathing Medications: Pills (2), AM/PM
25	pillswhen2_at sf	Num	8	F059: 4.B Breathing Medications: Pills (2), Most recent use
26	pillsampm3_at sf	Num	8	F059: 4.B Breathing Medications: Pills (3), AM/PM
27	pillswhen3_at sf	Num	8	F059: 4.B Breathing Medications: Pills (3), Most recent use
28	lang	Num	8	F059: Source Form Language:

Data Set Name: *f060_otherhealthrelatedevents.sas7bdat*

Num	Variable	Type	Len	Label
1	MaskID	Num	8	LIFE Participant Identifier
2	vc	Char	5	Visit Code
3	vis_days	Num	8	Date of Visit: converted to Days (in relation to randomization)
4	ftulcer_ohre	Num	8	F060: 1. Foot Ulcer (since the last visit)
5	result1_ohre	Num	8	F060: 1.a Foot Ulcer: Did this symptom result in an inability to leave home for at least one week?
6	muscache_ohre	Num	8	F060: 2. Muscle or Joint Aching (since the last visit)
7	result2_ohre	Num	8	F060: 2.a Muscle or Joint Aching: Did this symptom result in an inability to leave home for at least one week?
8	muscestiff_ohre	Num	8	F060: 3. Muscle or Joint Stiffness (since the last visit)
9	result3_ohre	Num	8	F060: 3.a Muscle or Joint Stiffness: Did this symptom result in an inability to leave home for at least one week?
10	backpn_ohre	Num	8	F060: 4. Back pain (since the last visit)
11	result4_ohre	Num	8	F060: 4.a Back pain: Did this symptom result in an inability to leave home for at least one week?
12	foot_ohre	Num	8	F060: 5. Foot pain (since the last visit)
13	result5_ohre	Num	8	F060: 5.a Foot pain: Did this symptom result in an inability to leave home for at least one week?
14	diz_ohre	Num	8	F060: 6. Dizziness (since the last visit)
15	result6_ohre	Num	8	F060: 6.a Dizziness: Did this symptom result in an inability to leave home for at least one week?
16	fat_ohre	Num	8	F060: 7. Fatigue (since the last visit)
17	result7_ohre	Num	8	F060: 7.a Fatigue: Did this symptom result in an inability to leave home for at least one week?
18	faint_ohre	Num	8	F060: 8. Fainting or Loss of Consciousness (since the last visit)
19	result8_ohre	Num	8	F060: 8.a Fainting or Loss of Consciousness: Did this symptom result in an inability to leave home for at least one week?
20	asthma_ohre	Num	8	F060: 9. Shortness of Breath or Asthma (since the last visit)
21	result9_ohre	Num	8	F060: 9.a Shortness of Breath or Asthma: Did this symptom result in an inability to leave home for at least one week?
22	rhyth_ohre	Num	8	F060: 10. Abnormal Heart Rhythm (since the last visit)
23	result10_ohre	Num	8	F060: 10.a Abnormal Heart Rhythm: Did this symptom result in an inability to leave home for at least one week?
24	fall_ohre	Num	8	F060: 11. Falls (that is when you went down unintentionally and landed on the floor or ground) (since the last visit)
25	result11_ohre	Num	8	F060: 11.a Falls: Did this symptom result in an inability to leave home for at least one week?
26	other_ohre	Num	8	F060: 12. Any other health related problem or symptom that led to inability to leave home for at least one week (since the last visit)
27	lang	Num	8	F060: Source Form Language:

Data Set Name: *f061_spirometry.sas7bdat*

Num	Variable	Type	Len	Label
1	MaskID	Num	8	LIFE Participant Identifier
2	vc	Char	5	Visit Code
3	vis_days	Num	8	Date of Visit: converted to Days (in relation to randomization)
4	hastroke_spir	Num	8	F061: 1. Have you been told that you had a heart attack or stroke in the last 3 months?
5	hadsurg_spir	Num	8	F061: 2. Have you had eye, chest or stomach surgery or eye injection in the last 3 months?
6	pastprob_spir	Num	8	F061: 3. Have you had any significant problems doing spirometry or MIP testing in the past?
7	caffeine_spir	Num	8	F061: 4. Did you have any caffeinated coffee, tea, or cola, or other caffeinated drink in the past 2 hours?
8	smoke_spir	Num	8	F061: 5. Did you smoke a cigarette, pipe or cigar during the last hour?
9	respinf_spir	Num	8	F061: 6. Have you had a respiratory infection in the past 2 weeks, for instance, cold, flu, bronchitis, or pneumonia?
10	spirtest_spir	Num	8	F061: 7. Was the participant able to complete spirometry and MIP testing? (Spirometry)
11	miptest_spir	Num	8	F061: MIP: Trials:
12	spirrefused_spir	Num	8	F061: Spirometry: (Refused)
13	spirphyunable_spir	Num	8	F061: Spirometry: (Physically Unable)
14	spircogunable_spir	Num	8	F061: Spirometry: (Cognitively Unable)
15	spirequip_spir	Num	8	F061: Spirometry: (Equipment Problem)
16	spirother_spir	Num	8	F061: Spirometry: (Other)
17	miprefused_spir	Num	8	F061: MIP: (Refused)
18	mipphyunable_spir	Num	8	F061: MIP: (Physically Unable)
19	mipcogunable_spir	Num	8	F061: MIP: (Cognitively Unable)
20	mipequip_spir	Num	8	F061: MIP: (Equipment Problem)
21	mipother_spir	Num	8	F061: MIP: (Other)
22	lang	Num	8	F061: Source Form Language:

Data Set Name: f064_berlinquestionnaire.sas7bdat

Num	Variable	Type	Len	Label
1	MaskID	Num	8	LIFE Participant Identifier
2	vc	Char	5	Visit Code
3	vis_days	Num	8	Date of Visit: converted to Days (in relation to randomization)
4	snore_berq	Num	8	F064: 1. Do you snore?
5	snorlv_berq	Num	8	F064: 2. Your snoring is:
6	snoroft_berq	Num	8	F064: 3. How often do you snore?
7	bthppl_berq	Num	8	F064: 4. Has your snoring ever bothered other people?
8	qtbrth_berq	Num	8	F064: 5. Has anyone noticed that you quit breathing during your sleep?
9	tired_berq	Num	8	F064: 6. How often do you feel tired or fatigued after your sleep?
10	wakfatgd_berq	Num	8	F064: 7. During your waking time, do you feel tired, fatigued or not up to par?
11	spldrv_berq	Num	8	F064: 8. Have you ever nodded off or fallen asleep while driving a vehicle?
12	spldrvof_berq	Num	8	F064: 9. How often does this occur (nod off/fall asleep driving)?
13	hgbp_berq	Num	8	F064: 10. Do you have high blood pressure?
14	lang	Num	8	F064: Source Form Language:

Data Set Name: *f076_proxyfaq.sas7bdat*

Num	Variable	Type	Len	Label
1	MaskID	Num	8	LIFE Participant Identifier
2	vc	Char	5	Visit Code
3	vis_days	Num	8	Date of Visit: converted to Days (in relation to randomization)
4	writing_checks_faq	Num	8	F076: 1. Any difficulty or need help with: Writing checks, paying bills or balancing checkbook. (past 4 weeks)
5	taxes_faq	Num	8	F076: 2. Any difficulty or need help with: Assembling tax records, business affairs, or other papers. (past 4 weeks)
6	shopping_faq	Num	8	F076: 3. Any difficulty or need help with: Shopping alone for clothes, household necessities, or groceries. (past 4 weeks)
7	game_faq	Num	8	F076: 4. Any difficulty or need help with: Playing a game of skill such as bridge or chess, working on a hobby. (past 4 weeks)
8	heating_water_faq	Num	8	F076: 5. Any difficulty or need help with: Heating water, making a cup of coffee, turning off the stove. (past 4 weeks)
9	meal_faq	Num	8	F076: 6. Any difficulty or need help with: Preparing a balanced meal. (past 4 weeks)
10	current_events_faq	Num	8	F076: 7. Any difficulty or need help with: Keeping track of current events. (past 4 weeks)
11	tv_faq	Num	8	F076: 8. Any difficulty or need help with: Paying attention to and understanding a TV program, book, or magazine. (past 4 weeks)
12	remembering_faq	Num	8	F076: 9. Any difficulty or need help with: Remembering appointments, family occasions, holidays, medications. (past 4 weeks)
13	traveling_faq	Num	8	F076: 10. Any difficulty or need help with: Traveling out of the neighborhood, driving or arranging to take public transportation. (past 4 weeks)
14	lang	Num	8	F076: Source Form Language:
15	sumfaq	Num	8	[C] F076: FAQ Sum

Data Set Name: *f077_modifiedreyo.sas7bdat*

Num	Variable	Type	Len	Label
1	MaskID	Num	8	LIFE Participant Identifier
2	vc	Char	5	Visit Code
3	vis_days	Num	8	Date of Visit: converted to Days (in relation to randomization)
4	one_copy_reyo	Num	8	F077: 1. Cross upper left corner, outside rectangle (COPY)
5	one_ir_reyo	Num	8	F077: 1. Cross upper left corner, outside rectangle (IR)
6	two_copy_reyo	Num	8	F077: 2. Large rectangle (COPY)
7	two_ir_reyo	Num	8	F077: 2. Large rectangle (IR)
8	three_copy_reyo	Num	8	F077: 3. Diagonal cross (COPY)
9	three_ir_reyo	Num	8	F077: 3. Diagonal cross (IR)
10	four_copy_reyo	Num	8	F077: 4. Horizontal midline of 2 (COPY)
11	four_ir_reyo	Num	8	F077: 4. Horizontal midline of 2 (IR)
12	five_copy_reyo	Num	8	F077: 5. Vertical midline of 2 (COPY)
13	five_ir_reyo	Num	8	F077: 5. Vertical midline of 2 (IR)
14	six_copy_reyo	Num	8	F077: 6. Small rectangle, in 2 to left (COPY)
15	six_ir_reyo	Num	8	F077: 6. Small rectangle, in 2 to left (IR)
16	seven_copy_reyo	Num	8	F077: 7. Triangle above 2, upper right (COPY)
17	seven_ir_reyo	Num	8	F077: 7. Triangle above 2, upper right (IR)
18	eight_copy_reyo	Num	8	F077: 8. Circle with 3 dots, in 2 (COPY)
19	eight_ir_reyo	Num	8	F077: 8. Circle with 3 dots, in 2 (IR)
20	nine_copy_reyo	Num	8	F077: 9. 5 parallel lines in 2, crossing 3, lower right (COPY)
21	nine_ir_reyo	Num	8	F077: 9. 5 parallel lines in 2, crossing 3, lower right (IR)
22	ten_copy_reyo	Num	8	F077: 10. Sides of triangle attached to 2 on right (COPY)
23	ten_ir_reyo	Num	8	F077: 10. Sides of triangle attached to 2 on right (IR)
24	eleven_copy_reyo	Num	8	F077: 11. Diamond attached to 10 (COPY)
25	eleven_ir_reyo	Num	8	F077: 11. Diamond attached to 10 (IR)
26	twelve_copy_reyo	Num	8	F077: 12. Horizontal line in 10, continuing 4 (COPY)
27	twelve_ir_reyo	Num	8	F077: 12. Horizontal line in 10, continuing 4 (IR)
28	total_copy_reyo	Num	8	F077: Total Scores (COPY)
29	total_ir_reyo	Num	8	F077: Total Scores (IR)
30	lang	Num	8	F077: Source Form Language:

Data Set Name: *f078_pa1stfacetofacecontact.sas7bdat*

Num	Variable	Type	Len	Label
1	MaskID	Num	8	LIFE Participant Identifier
2	vis_days	Num	8	Date of Visit: converted to Days (in relation to randomization)
3	lowvision	Num	8	F078: Accomodation Needs: low vision
4	hearimpair	Num	8	F078: Accomodation Needs: hearing impairment
5	birthday	Num	8	F078: Permission to acknowledge birthday
6	participation	Num	8	F078: D. Barriers/Facilitaing Factors: things interfering with participation
7	caregiving	Num	8	F078: D. Barriers/Facilitaing Factors: care for spouse/family member
8	healthissues	Num	8	F078: D. Barriers/Facilitaing Factors: health issues
9	physsymptoms	Num	8	F078: D. Barriers/Facilitaing Factors: current physical symptoms
10	other	Num	8	F078: D. Barriers/Facilitaing Factors: other
11	intergoal	Num	8	F078: D. Barriers/Facilitaing Factors: Interference with participation
12	neighborhood	Num	8	F078: D. Barriers/Facilitaing Factors: Neighborhood environment
13	famfriends	Num	8	F078: D. Barriers/Facilitaing Factors: Family/Friends support
14	doctor	Num	8	F078: D. Barriers/Facilitaing Factors: Doctor support
15	session_trans	Num	8	F078: D. Barriers/Facilitaing Factors: Session transportation required?
16	active_trans	Num	8	F078: D. Barriers/Facilitaing Factors: Travel from home, physical activity, transportation required?
17	confidence	Num	8	F078: D. Barriers/Facilitaing Factors: Confidence in participatation (Scale: 1 to 10)
18	valuegoals	Num	8	F078: F. Personal Goal and Concerns: Value goals (Scale: 1 to 10)

Data Set Name: *f079_sa1stfacetofacecontact.sas7bdat*

Num	Variable	Type	Len	Label
1	MaskID	Num	8	LIFE Participant Identifier
2	vis_days	Num	8	Date of Visit: converted to Days (in relation to randomization)
3	lowvision	Num	8	F079: Accomodation Needs: low vision
4	hearingpair	Num	8	F079: Accomodation Needs: hearing impairment
5	seating	Num	8	F079: Accomodation Needs: seating needs
6	birthday	Num	8	F079: Permission to acknowledge birthday
7	participation	Num	8	F079: D. Barriers/Facilitaing Factors: things interfering with participation
8	caregiving	Num	8	F079: D. Barriers/Facilitaing Factors: care for spouse/family member
9	healthissues	Num	8	F079: D. Barriers/Facilitaing Factors: health issues
10	physsymptoms	Num	8	F079: D. Barriers/Facilitaing Factors: current physical symptoms
11	other	Num	8	F079: D. Barriers/Facilitaing Factors: other
12	intergoal	Num	8	F079: D. Barriers/Facilitaing Factors: Interference with participation
13	famfriends	Num	8	F079: D. Barriers/Facilitaing Factors: Family/Friends support
14	doctor	Num	8	F079: D. Barriers/Facilitaing Factors: Doctor support
15	session_trans	Num	8	F079: D. Barriers/Facilitaing Factors: Session transportation required?
16	confidence	Num	8	F079: D. Barriers/Facilitaing Factors: Confidence in participatation
17	valuegoals	Num	8	F079: F. Personal Goal and Concerns: Value goals

Data Set Name: *f096_cancerhistory.sas7bdat*

Num	Variable	Type	Len	Label
1	MaskID	Num	8	LIFE Participant Identifier
2	vc	Char	5	Visit Code
3	vis_days	Num	8	Date of Visit: converted to Days (in relation to randomization)
4	breast_canc	Num	8	F096: 1. At the start of the study, you answered YES when we asked, has a doctor ever told you that you had cancer or a malignant tumor, excluding minor skin cancers? Can you please tell me what type of cancer you had? Breast Cancer
5	days_breast_canc	Num	8	F096: 1. Breast Cancer: Time of diagnosis: Days in relation to randomization
6	breast_surg_canc	Num	8	F096: 1. Breast Cancer: What type of treatment did you receive? (Surgery)
7	breast_horm_canc	Num	8	F096: 1. Breast Cancer: What type of treatment did you receive? (Hormonal Therapy (tamoxifen, etc.))
8	breast_chemo_canc	Num	8	F096: 1. Breast Cancer: What type of treatment did you receive? (Chemotherapy)
9	breast_other_canc	Num	8	F096: 1. Breast Cancer: What type of treatment did you receive? (Other)
10	breast_radia_canc	Num	8	F096: 1. Breast Cancer: What type of treatment did you receive? (Radiation Therapy)
11	colon_canc	Num	8	F096: 1. At the start of the study, you answered YES when we asked, has a doctor ever told you that you had cancer or a malignant tumor, excluding minor skin cancers? Can you please tell me what type of cancer you had? Colon Cancer
12	days_colon_canc	Num	8	F096: 1. Colon Cancer: Time of diagnosis: Days in relation to randomization
13	colon_surg_canc	Num	8	F096: 1. Colon Cancer: What type of treatment did you receive? (Surgery)
14	colon_horm_canc	Num	8	F096: 1. Colon Cancer: What type of treatment did you receive? (Hormonal Therapy (tamoxifen, etc.))
15	colon_chemo_canc	Num	8	F096: 1. Colon Cancer: What type of treatment did you receive? (Chemotherapy)
16	colon_other_canc	Num	8	F096: 1. Colon Cancer: What type of treatment did you receive? (Other)
17	colon_radia_canc	Num	8	F096: 1. Colon Cancer: What type of treatment did you receive? (Radiation Therapy)
18	lung_canc	Num	8	F096: 1. At the start of the study, you answered YES when we asked, has a doctor ever told you that you had cancer or a malignant tumor, excluding minor skin cancers? Can you please tell me what type of cancer you had? Lung Cancer
19	days_lung_canc	Num	8	F096: 1. Lung Cancer: Time of diagnosis: Days in relation to randomization
20	lung_surg_canc	Num	8	F096: 1. Lung Cancer: What type of treatment did you receive? (Surgery)
21	lung_horm_canc	Num	8	F096: 1. Lung Cancer: What type of treatment did you receive? (Hormonal Therapy (tamoxifen, etc.))
22	lung_chemo_canc	Num	8	F096: 1. Lung Cancer: What type of treatment did you receive? (Chemotherapy)
23	lung_other_canc	Num	8	F096: 1. Lung Cancer: What type of treatment did you receive? (Other)
24	lung_radia_canc	Num	8	F096: 1. Lung Cancer: What type of treatment did you receive? (Radiation Therapy)
25	endom_canc	Num	8	F096: 1. At the start of the study, you answered YES when we asked, has a doctor ever told you that you had cancer or a malignant tumor, excluding minor skin cancers? Can you please tell me what type of cancer you had? Endometrial Cancer
26	days_endom_canc	Num	8	F096: 1. Endometrial Cancer: Time of diagnosis: Days in relation to randomization
27	endom_surg_canc	Num	8	F096: 1. Endometrial Cancer: What type of treatment did you receive? (Surgery)
28	endom_horm_canc	Num	8	F096: 1. Endometrial Cancer: What type of treatment did you receive? (Hormonal Therapy (tamoxifen, etc.))
29	endom_chemo_canc	Num	8	F096: 1. Endometrial Cancer: What type of treatment did you receive? (Chemotherapy)

Num	Variable	Type	Len	Label
30	endom_other_canc	Num	8	F096: 1. Endometrial Cancer: What type of treatment did you receive? (Other)
31	endom_radia_canc	Num	8	F096: 1. Endometrial Cancer: What type of treatment did you receive? (Radiation Therapy)
32	prost_canc	Num	8	F096: 1. At the start of the study, you answered YES when we asked, has a doctor ever told you that you had cancer or a malignant tumor, excluding minor skin cancers? Can you please tell me what type of cancer you had? Prostate Cancer
33	days_prost_canc	Num	8	F096: 1. Prostrate Cancer: Time of diagnosis: Days in relation to randomization
34	prost_surg_canc	Num	8	F096: 1. Prostrate Cancer: What type of treatment did you receive? (Surgery)
35	prost_horm_canc	Num	8	F096: 1. Prostrate Cancer: What type of treatment did you receive? (Hormonal Therapy (tamoxifen, etc.))
36	prost_chemo_canc	Num	8	F096: 1. Prostrate Cancer: What type of treatment did you receive? (Chemotherapy)
37	prost_other_canc	Num	8	F096: 1. Prostrate Cancer: What type of treatment did you receive? (Other)
38	prost_radia_canc	Num	8	F096: 1. Prostrate Cancer: What type of treatment did you receive? (Radiation Therapy)
39	other1_canc	Num	8	F096: 1. At the start of the study, you answered YES when we asked, has a doctor ever told you that you had cancer or a malignant tumor, excluding minor skin cancers? Can you please tell me what type of cancer you had? Other1 Cancer
40	days_other1_canc	Num	8	F096: 1. Other1 Cancer: Time of diagnosis: Days in relation to randomization
41	other1_surg_canc	Num	8	F096: 1. Other1 Cancer: What type of treatment did you receive? (Surgery)
42	other1_horm_canc	Num	8	F096: 1. Other1 Cancer: What type of treatment did you receive? (Hormonal Therapy (tamoxifen, etc.))
43	other1_chemo_canc	Num	8	F096: 1. Other1 Cancer: What type of treatment did you receive? (Chemotherapy)
44	other1_other_canc	Num	8	F096: 1. Other1 Cancer: What type of treatment did you receive? (Other)
45	other1_radia_canc	Num	8	F096: 1. Other1 Cancer: What type of treatment did you receive? (Radiation Therapy)
46	other2_canc	Num	8	F096: 1. At the start of the study, you answered YES when we asked, has a doctor ever told you that you had cancer or a malignant tumor, excluding minor skin cancers? Can you please tell me what type of cancer you had? Other2 Cancer
47	days_other2_canc	Num	8	F096: 1. Other2 Cancer: Time of diagnosis: Days in relation to randomization
48	other2_surg_canc	Num	8	F096: 1. Other2 Cancer: What type of treatment did you receive? (Surgery)
49	other2_horm_canc	Num	8	F096: 1. Other2 Cancer: What type of treatment did you receive? (Hormonal Therapy (tamoxifen, etc.))
50	other2_chemo_canc	Num	8	F096: 1. Other2 Cancer: What type of treatment did you receive? (Chemotherapy)
51	other2_other_canc	Num	8	F096: 1. Other2 Cancer: What type of treatment did you receive? (Other)
52	other2_radia_canc	Num	8	F096: 1. Other2 Cancer: What type of treatment did you receive? (Radiation Therapy)
53	unknown_canc	Num	8	F096: 1. Unknown Cancer Site
54	lang	Num	8	F096: Source Form Language:

Data Set Name: f097_cardiovascularhistory.sas7bdat

Num	Variable	Type	Len	Label
1	MaskID	Num	8	LIFE Participant Identifier
2	vc	Char	5	Visit Code
3	vis_days	Num	8	Date of Visit: converted to Days (in relation to randomization)
4	cabg_cvhx	Num	8	F097: 1. Have you had coronary artery bypass surgery?
5	days_cabg_cvhx	Num	8	F097: 1. Time of CABG: Days in relation to randomization
6	cabg_before_cvhx	Num	8	F097: 1. CABG: If the entire date is not known: Was it before you enrolled in the study?
7	stent_cvhx	Num	8	F097: 2. Have you ever had a stent and/or an angioplasty of the coronary arteries, which is a dilation of the arteries of the heart with a balloon?
8	days_stent_cvhx	Num	8	F097: 2. Time of stent/angioplasty: Days in relation to randomization
9	stent_before_cvhx	Num	8	F097: 2. Stent: If the entire date is not known: Was it before you enrolled in the study?
10	angina_cvhx	Num	8	F097: 3. Has a doctor ever told you that you had angina or chest pain that was due to blockages in the arteries of your heart?
11	days_angina_cvhx	Num	8	F097: 3. Time of angina: Days in relation to randomization
12	angina_before_cvhx	Num	8	F097: 3. Angina: If the entire date is not known: Was it before you enrolled in the study?
13	carotid_cvhx	Num	8	F097: 4. Have you ever had a carotid endarterectomy, which is surgery on the arteries in your neck to improve blood flow to your brain?
14	days_carotid_cvhx	Num	8	F097: 4. Time of carotid endarterectomy: Days in relation to randomization
15	carotid_before_cvhx	Num	8	F097: 4. Carotid Endarterectomy: If the entire date is not known: Was it before you enrolled in the study?
16	tia_cvhx	Num	8	F097: 5. Has a doctor ever told you that you had a transient ischemic attack (TIA) or mini-stroke?
17	days_tia_cvhx	Num	8	F097: 5. Time of TIA: Days in relation to randomization
18	tia_before_cvhx	Num	8	F097: 5. TIA: If the entire date is not known: Was it before you enrolled in the study?
19	lang	Num	8	F097: Source Form Language:

Data Set Name: as03_01_latmob.sas7bdat

Num	Variable	Type	Len	Label
1	pMaskID	Num	8	LIFE PILOT Participant Identifier
2	vc	Char	4	vc
3	LMTK_date_days	Num	8	
4	practice_lmtk	Num	8	
5	dlow1_lmtk	Num	8	
6	dhigh1_lmtk	Num	8	
7	dlow2_lmtk	Num	8	
8	dhigh2_lmtk	Num	8	
9	dlow3_lmtk	Num	8	
10	dhigh3_lmtk	Num	8	
11	atmpters_lmtk	Num	8	
12	time1_lmtk	Num	8	
13	time2_lmtk	Num	8	
14	time3_lmtk	Num	8	
15	min_latmob	Num	8	
16	mean_latmob	Num	8	

Data Set Name: as03_02_cr_decline.sas7bdat

Num	Variable	Type	Len	Label
1	pMaskID	Num	8	LIFE PILOT Participant Identifier
2	Gender	Char	6	
3	SPPB	Num	8	SPPB
4	Weight	Num	8	Weight
5	AgePredMAX10	Num	8	Age Pred MAX - 10
6	Pcnt85PM	Num	8	85% of PM
7	Hr0	Num	8	Hr0
8	Vo2L0	Num	8	Vo2L0
9	RER0	Num	8	RER0
10	GE1_1	Num	8	>/=1.1
11	Hr6	Num	8	Hr6
12	W10beats	Num	8	w/in 10 beats
13	Pcnt85PM_1	Num	8	85% of PM_1
14	Vo2L6	Num	8	Vo2L6
15	Vo2L12_Wt	Num	8	Vo2L12*1000 / Weight
16	RER6	Num	8	RER6
17	Hr12	Num	8	Hr12
18	Vo2L12	Num	8	Vo2L12
19	RER12	Num	8	RER12
20	Pcnt85PM_2	Num	8	85% of PM_2
21	Vo2L0_Wt	Num	8	Vo2L0*1000 / Weight
22	comment	Char	21	
23	Vo2L6_Wt	Num	8	Vo2L6*1000 / Weight
24	W10beats_1	Num	8	w/in 10 beats_1

Data Set Name: as03_03_base_dxa_bodycomp.sas7bdat

Num	Variable	Type	Len	Label
1	pMaskID	Num	8	LIFE PILOT Participant Identifier
2	vc	Char	4	Visit
3	QCC	Char	1	indicator for baseline cross-sectional DEXA quality control
4	SEX	Char	1	
5	ETHNICITY	Char	2	
6	sitedexa	Num	8	
7	WBTOT_AREA	Num	8	
8	WBTOT_BMC	Num	8	
9	SUBTOT_AREA	Num	8	
10	HEAD_AREA	Num	8	
11	LARM_AREA	Num	8	
12	RARM_AREA	Num	8	
13	LRIB_AREA	Num	8	
14	RRIB_AREA	Num	8	
15	T_S_AREA	Num	8	
16	L_S_AREA	Num	8	
17	PELV_AREA	Num	8	
18	LLEG_AREA	Num	8	
19	RLEG_AREA	Num	8	
20	HEAD_FAT	Num	8	
21	HEAD_LEAN	Num	8	
22	HEAD_MASS	Num	8	
23	LARM_FAT	Num	8	
24	LARM_LEAN	Num	8	
25	LARM_MASS	Num	8	
26	RARM_FAT	Num	8	
27	RARM_LEAN	Num	8	
28	RARM_MASS	Num	8	
29	TRUNK_FAT	Num	8	
30	TRUNK_LEAN	Num	8	
31	TRUNK_MASS	Num	8	
32	L_LEG_FAT	Num	8	
33	L_LEG_LEAN	Num	8	
34	L_LEG_MASS	Num	8	
35	R_LEG_FAT	Num	8	
36	R_LEG_LEAN	Num	8	
37	R_LEG_MASS	Num	8	

Num	Variable	Type	Len	Label
38	SUBTOT_FAT	Num	8	
39	SUBTOT_LEAN	Num	8	
40	SUBTOT_MASS	Num	8	
41	WBTOT_FAT	Num	8	
42	WBTOT_LEAN	Num	8	
43	WBTOT_MASS	Num	8	
44	WBTOT_PFAT	Num	8	
45	age	Num	8	age
46	wbtot_leanbmc	Num	8	Lean + BMC Total
47	CLINIC	Num	8	Clinical Site
48	scale_age	Char	100	Age
49	scale_gender	Char	100	Gender
50	hbp_mhah	Num	8	Hypertension
51	hrtattk_mhah	Num	8	Heart Attack
52	hrtfailr_mhah	Num	8	Congestive Heart Failure
53	diabetes_mhah	Num	8	Diabetes
54	numfall_mhah	Num	8	Number of falls
55	lungdis_mhah	Num	8	Lung disease
56	gs_lngth_sppb	Num	8	Gait speed length
57	cesd	Num	8	CES-D Score
58	arm	Num	8	
59	site	Char	6	
60	scale_weight	Num	8	Weight in kg
61	gaitspeedtime	Num	8	Gait speed time
62	chairstandtime	Num	8	Repeated chair stand time
63	sppb	Num	8	Total SPPB score
64	gripr1	Num	8	Grip strength (kg) Right hand trial 1
65	gripr2	Num	8	Grip strength (kg) Right hand trial 2
66	gripl1	Num	8	Grip strength (kg) Left hand trial 1
67	gripl2	Num	8	Grip strength (kg) Left hand trial 2
68	dresstimemin	Num	8	Blouse/shirt test dressing time (min)
69	dresstimesec	Num	8	Blouse/shirt test dressing time (sec)
70	walk400min	Num	8	400 m walk (min)
71	walk400sec	Num	8	400 m walk (sec)
72	ces_d	Num	8	CES-D Score
73	scale_height	Num	8	Height in meter
74	scale_BMI	Num	8	BMI
75	gripleft	Num	8	
76	gripripleft	Num	8	

Num	Variable	Type	Len	Label
77	grip	Num	8	grip strength
78	dresstime	Num	8	Dressing time (sec)
79	walk400time	Num	8	
80	racew	Num	8	
81	append_fat	Num	8	appendicular fat mass (kg)
82	append_lean	Num	8	appendicular lean mass (kg)
83	gender	Num	8	
84	alm_ht	Num	8	aLM/height (kg/m)
85	afm_ht	Num	8	aFM/height (kg/m)
86	alm_ht2	Num	8	relative aLM
87	afm_ht2	Num	8	relative aFM
88	tot_fatkg	Num	8	
89	walktime	Num	8	
90	gait_t	Num	8	4m walk speed
91	chair_t	Num	8	inverse of chair stand time
92	walk_t	Num	8	400m walk speed

Data Set Name: as03_06_ald.sas7bdat

Num	Variable	Type	Len	Label
1	pMaskID	Num	8	LIFE PILOT Participant Identifier
2	mavgb	Num	8	MEAN IMT OF AVERAGE baseline
3	AADb	Num	8	MEAN AVERAGE CCA ADVENTITIAL DIAMETER baseline
4	ALDb	Num	8	MEAN AVERAGE CCA LUMEN DIAMETER baseline
5	mavgf	Num	8	MEAN IMT OF AVERAGE follow-up
6	AADf	Num	8	MEAN AVERAGE CCA ADVENTITIAL DIAMETER follow-up
7	ALDf	Num	8	MEAN AVERAGE CCA LUMEN DIAMETER follow-up
8	avgpwvf	Num	8	AVERAGE PWV
9	avgpwvb	Num	8	AVERAGE PWV
10	keep	Num	8	Ppt one of 52 chosen for analysis (avgpwvb attempted)
11	Group	Num	8	treatment group 1:Intervtn 2:Reference
12	smok100	Num	8	smoked >=100 cigarettes lifetime
13	weightb	Num	8	baseline weight (kg)
14	heightb	Num	8	baseline height (cm)
15	pib	Num	8	baseline plaque index
16	sbpb	Num	8	baseline systolic blood pressure (mmHg)
17	dbpb	Num	8	baseline diastolic blood pressure (mmHg)
18	waistcb	Num	8	baseline waist circumference (cm)
19	smokeb	Num	8	baseline smoking status 0:no 1:yes
20	hrb	Num	8	baseline heart rate (bpm)
21	bmib	Num	8	baseline body mass index (kg/m^2)
22	ppb	Num	8	baseline pulse pressure (mmHg)
23	gender	Char	1	F:female, M:male
24	age	Num	8	baseline age (years)
25	hispanic	Num	8	Hispanic Origin
26	af_am	Num	8	African American
27	native_am	Num	8	Native American
28	asian	Num	8	Asian
29	oth_race	Num	8	Race other AfAm As Hw NA W
30	white	Num	8	Caucasian
31	hawaiian	Num	8	Hawaiian
32	refused	Num	8	Refused to answer race
33	racevar	Num	8	1:Afr_Am 4:Caucasian
34	pif	Num	8	follow-up plaque index
35	davgpwv	Num	8	difference pwv follow-up - baseline
36	daad	Num	8	difference mean cca adventitial diameter follow-up - baseline
37	dmavg	Num	8	difference mean IMT follow-up - baseline

Num	Variable	Type	Len	Label
38	dpi	Num	8	difference pi follow-up - baseline
39	hx_htn	Num	8	Hypertension told by doctor
40	htn_med	Num	8	Taking anti-hypertensive medication(s)
41	hx_mi	Num	8	Myocardial infarction diagnosed by doctor + overnight hospitalization
42	hx_hf	Num	8	Heart failure told by doctor
43	hx_dm	Num	8	Diabetes told by doctor
44	dm_med	Num	8	Current use of oral diabetes medication
45	injins	Num	8	Current use injection insulin
46	male	Num	8	0:female 1:male
47	dald	Num	8	difference mean cca lumen diameter follow-up - baseline

Data Set Name: as04_01_inflammatory.sas7bdat

Num	Variable	Type	Len	Label
1	pMaskID	Num	8	LIFE PILOT Participant Identifier
2	vc	Char	100	vc
3	IL_6_pg_mL	Num	8	IL-6 pg/mL
4	CRP_mg_dL	Num	8	CRP mg/dL
5	IL6sr	Num	8	IL-6sR (pg/ml)
6	IL1srII	Num	8	IL-1sRII (pg/ml)
7	sTNFR1	Num	8	sTNFR1 (pg/ml)
8	sTNFR2	Num	8	sTNFR2 (pg/ml)
9	IL8	Num	8	IL-8 (pg/ml)
10	IL15	Num	8	IL-15 (pg/ml)
11	Adiponectin	Num	8	Adiponectin (ug/ml)
12	IL1ra	Num	8	IL-1ra (pg/ml)
13	IL2sr	Num	8	IL-2sR-alpha (pg/ml)
14	TNF_a	Num	8	TNF-alpha (pg/ml)

Data Set Name: as04_02_sleep.sas7bdat

Num	Variable	Type	Len	Label
1	pMaskID	Num	8	LIFE PILOT Participant Identifier
2	Female	Char	1	
3	Race	Char	1	
4	Married	Char	1	
5	h1_btime	Num	8	
6	h2_laten	Num	4	
7	h3_waken	Num	8	
8	h4_actual	Char	3	h4_actual
9	calc_tib	Char	4	
10	calc_effy	Char	4	calc_effy
11	h5_napdur	Char	6	h5_napdur
12	TST_napday_hrs_	Num	8	TST-napday(hrs)
13	Nap_duration__min_	Char	3	Nap duration (min)
14	a1a_napno	Num	3	a1a_napno
15	a2a_naptime	Num	8	a2a_naptime
16	a1_trblefal	Num	3	a1_trblefal
17	a2_wakesev	Num	3	a2_wakesev
18	a3_wakearly	Num	3	a3_wakearly
19	a4_trblret	Num	3	a4_trblret
20	a5_typqual	Num	3	a5_typqual
21	calc_WHI	Num	3	
22	sp1_regtime	Char	2	sp1_regtime
23	sp2_caffavoid	Char	2	sp2_caffavoid
24	sp3_etohavoid	Char	2	sp3_etohavoid
25	sp4_fluidavoid	Char	2	sp4_fluidavoid
26	sp5_cigavoid	Char	2	sp5_cigavoid
27	sp6_roomdark	Char	2	sp6_roomdark
28	sp7_exerreg	Char	1	sp7_exerreg
29	sp8_exeraft	Char	2	sp8_exeraft
30	sp9_outofbed	Char	2	sp9_outofbed
31	sp10_halfsun	Char	2	sp10_halfsun
32	sp11_relax	Char	1	sp11_relax
33	sp12_bedsleep	Char	2	sp12_bedsleep
34	calc_Hygiene	Char	2	calc_Hygiene
35	HScore_10_	Num	3	HScore(10)
36	sp13_partner	Char	1	sp13_partner
37	sp14_ptnrsnor	Char	2	sp14_ptnrsnor

Num	Variable	Type	Len	Label
38	sp15_ptnrmove	Char	2	sp15_ptnrmove
39	sp15b_sleephelp	Char	50	sp15b_sleephelp
40	sp16_sleeppays	Char	48	sp16_sleeppays
41	h1_6_btime	Num	8	h1_6_btime
42	h2_6_laten	Char	3	h2_6_laten
43	h3_6_waken	Num	8	h3_6_waken
44	h4_6_actual	Char	4	h4_6_actual
45	h5_6_napdur	Char	6	h5_6_napdur
46	a1a_6_napno	Num	3	a1a_6_napno
47	a2a_6_naptime	Num	8	a2a_6_naptime
48	a1_6_trblefal	Num	3	a1_6_trblefal
49	a2_6_wakesev	Num	3	a2_6_wakesev
50	a3_6_wakearly	Num	3	a3_6_wakearly
51	a4_6_trblret	Num	3	a4_6_trblret
52	a5_6_typqual	Num	3	a5_6_typqual
53	h1_12_btime	Num	8	h1_12_btime
54	h2_12_laten	Char	3	h2_12_laten
55	h3_12_waken	Num	8	h3_12_waken
56	h4_12_actual	Char	4	h4_12_actual
57	h5_12_napdur	Char	6	h5_12_napdur
58	a1a_12_napno	Num	3	a1a_12_napno
59	a2a_12_naptime	Num	8	a2a_12_naptime
60	a1_12_trblefal	Num	3	a1_12_trblefal
61	a2_12_wakesev	Num	3	a2_12_wakesev
62	a3_12_wakearly	Num	3	a3_12_wakearly
63	a4_12_trblret	Num	3	a4_12_trblret
64	a5_12_typqual	Num	3	a5_12_typqual
65	randarm	Char	17	Randomization Arm
66	age_tscr	Char	100	age_tscr
67	gender_tscr	Char	100	gender_tscr
68	age	Num	8	
69	race1	Num	8	
70	femgen	Num	8	
71	h2_6_latency	Num	8	
72	h2_12_latency	Num	8	
73	actualsleep0	Num	8	
74	actualsleep6	Num	8	
75	actualsleep12	Num	8	
76	napdur0	Num	8	

Num	Variable	Type	Len	Label
77	napdur6_temp	Num	8	
78	napdur12_temp	Num	8	
79	napdur6	Num	8	
80	napdur12	Num	8	
81	femgen_cat	Num	8	
82	napfreq0	Num	8	
83	hoursinbed0	Num	8	
84	sleepeffic0	Num	8	
85	whiirs0	Num	8	
86	totnapmin0	Num	8	
87	laten300	Num	8	
88	sleepeffic850	Num	8	
89	napfreq6	Num	8	
90	hoursinbed6	Num	8	
91	sleepeffic6	Num	8	
92	latendiff06	Num	8	
93	whiirs6	Num	8	
94	totnapmin6	Num	8	
95	laten306	Num	8	
96	sleepeffic856	Num	8	
97	sleepdiff06	Num	8	
98	napfreq12	Num	8	
99	hoursinbed12	Num	8	
100	sleepeffic12	Num	8	
101	latendiff612	Num	8	
102	latendiff012	Num	8	
103	whiirs12	Num	8	
104	totnapmin12	Num	8	
105	laten3012	Num	8	
106	sleepeffic8512	Num	8	
107	sleepdiff612	Num	8	
108	sleepdiff012	Num	8	
109	napdur0_cat	Num	8	
110	napdur6_cat	Num	8	
111	napdur12_cat	Num	8	
112	napdurdiff06	Num	8	
113	napdurdiff612	Num	8	
114	napdurdiff012	Num	8	
115	nonnapper0	Num	8	

Num	Variable	Type	Len	Label
116	nonnapper6	Num	8	
117	nonnapper12	Num	8	
118	ala_napno	Num	8	
119	ala_6_napno	Num	8	
120	ala_12_napno	Num	8	
121	whiirsdiff06	Num	8	
122	whiirsdiff612	Num	8	
123	whiirsdiff012	Num	8	
124	h2_6_latc	Num	8	
125	h2_12_latc	Num	8	
126	DOB_days	Num	8	

Data Set Name: as04_03_actigraph.sas7bdat

Num	Variable	Type	Len	Label
1	pMaskID	Num	8	LIFE PILOT Participant Identifier
2	vc	Char	4	
3	days_used	Num	8	
4	DAYS_WORN	Num	8	
5	TOTACT_ALLDAYS	Num	8	
6	TOTMIN_ALLDAYS	Num	8	
7	THRESHOLDA_MIN_ALLDAYS	Num	8	
8	THRESHOLDB_MIN_ALLDAYS	Num	8	
9	THRESHOLDC_MIN_ALLDAYS	Num	8	
10	TOTACT_DAY1	Num	8	
11	TOTMIN_DAY1	Num	8	
12	THRESHOLDA_MIN_DAY1	Num	8	
13	THRESHOLDB_MIN_DAY1	Num	8	
14	THRESHOLDC_MIN_DAY1	Num	8	
15	TOTACT_DAY2	Num	8	
16	TOTMIN_DAY2	Num	8	
17	THRESHOLDA_MIN_DAY2	Num	8	
18	THRESHOLDB_MIN_DAY2	Num	8	
19	THRESHOLDC_MIN_DAY2	Num	8	
20	TOTACT_DAY3	Num	8	
21	TOTMIN_DAY3	Num	8	
22	THRESHOLDA_MIN_DAY3	Num	8	
23	THRESHOLDB_MIN_DAY3	Num	8	
24	THRESHOLDC_MIN_DAY3	Num	8	
25	TOTACT_DAY4	Num	8	
26	TOTMIN_DAY4	Num	8	
27	THRESHOLDA_MIN_DAY4	Num	8	
28	THRESHOLDB_MIN_DAY4	Num	8	
29	THRESHOLDC_MIN_DAY4	Num	8	
30	TOTACT_DAY5	Num	8	
31	TOTMIN_DAY5	Num	8	
32	THRESHOLDA_MIN_DAY5	Num	8	
33	THRESHOLDB_MIN_DAY5	Num	8	
34	THRESHOLDC_MIN_DAY5	Num	8	
35	TOTACT_DAY6	Num	8	
36	TOTMIN_DAY6	Num	8	
37	THRESHOLDA_MIN_DAY6	Num	8	

Num	Variable	Type	Len	Label
38	THRESHOLDB_MIN_DAY6	Num	8	
39	THRESHOLDC_MIN_DAY6	Num	8	
40	TOTACT_DAY7	Num	8	
41	TOTMIN_DAY7	Num	8	
42	THRESHOLDA_MIN_DAY7	Num	8	
43	THRESHOLDB_MIN_DAY7	Num	8	
44	THRESHOLDC_MIN_DAY7	Num	8	
45	AVGACTPERHOUR_ALLDAYS	Num	8	
46	AVGACTPERHOUR_DAY1	Num	8	
47	AVGACTPERHOUR_DAY2	Num	8	
48	AVGACTPERHOUR_DAY3	Num	8	
49	AVGACTPERHOUR_DAY4	Num	8	
50	AVGACTPERHOUR_DAY5	Num	8	
51	AVGACTPERHOUR_DAY6	Num	8	
52	AVGACTPERHOUR_DAY7	Num	8	
53	THRESHA_BOUT5_ALLDAYS	Num	8	
54	THRESHB_BOUT5_ALLDAYS	Num	8	
55	THRESHC_BOUT5_ALLDAYS	Num	8	
56	THRESHA_BOUT5_DAY1	Num	8	
57	THRESHB_BOUT5_DAY1	Num	8	
58	THRESHC_BOUT5_DAY1	Num	8	
59	THRESHA_BOUT5_DAY3	Num	8	
60	THRESHB_BOUT5_DAY3	Num	8	
61	THRESHC_BOUT5_DAY3	Num	8	
62	THRESHA_BOUT5_DAY4	Num	8	
63	THRESHB_BOUT5_DAY4	Num	8	
64	THRESHC_BOUT5_DAY4	Num	8	
65	THRESHA_BOUT5_DAY5	Num	8	
66	THRESHB_BOUT5_DAY5	Num	8	
67	THRESHC_BOUT5_DAY5	Num	8	
68	THRESHA_BOUT5_DAY2	Num	8	
69	THRESHB_BOUT5_DAY2	Num	8	
70	THRESHC_BOUT5_DAY2	Num	8	
71	THRESHA_BOUT5_DAY6	Num	8	
72	THRESHB_BOUT5_DAY6	Num	8	
73	THRESHC_BOUT5_DAY6	Num	8	
74	THRESHA_BOUT5_DAY7	Num	8	
75	THRESHB_BOUT5_DAY7	Num	8	
76	THRESHC_BOUT5_DAY7	Num	8	

Num	Variable	Type	Len	Label
77	THRESHA_BOUT10_ALLDAYS	Num	8	
78	THRESHB_BOUT10_ALLDAYS	Num	8	
79	THRESHC_BOUT10_ALLDAYS	Num	8	
80	THRESHA_BOUT10_DAY1	Num	8	
81	THRESHB_BOUT10_DAY1	Num	8	
82	THRESHC_BOUT10_DAY1	Num	8	
83	THRESHA_BOUT10_DAY4	Num	8	
84	THRESHB_BOUT10_DAY4	Num	8	
85	THRESHC_BOUT10_DAY4	Num	8	
86	THRESHA_BOUT10_DAY2	Num	8	
87	THRESHB_BOUT10_DAY2	Num	8	
88	THRESHC_BOUT10_DAY2	Num	8	
89	THRESHA_BOUT10_DAY5	Num	8	
90	THRESHB_BOUT10_DAY5	Num	8	
91	THRESHC_BOUT10_DAY5	Num	8	
92	THRESHA_BOUT10_DAY3	Num	8	
93	THRESHB_BOUT10_DAY3	Num	8	
94	THRESHC_BOUT10_DAY3	Num	8	
95	THRESHA_BOUT10_DAY7	Num	8	
96	THRESHB_BOUT10_DAY7	Num	8	
97	THRESHC_BOUT10_DAY7	Num	8	
98	THRESHA_BOUT10_DAY6	Num	8	
99	THRESHB_BOUT10_DAY6	Num	8	
100	THRESHC_BOUT10_DAY6	Num	8	
101	ACTCOUNTS_THRESHA_ALLDAYS	Num	8	
102	ACTCOUNTS_THRESHB_ALLDAYS	Num	8	
103	ACTCOUNTS_THRESHC_ALLDAYS	Num	8	
104	ACTCOUNTS_THRESHA_DAY_1	Num	8	
105	ACTCOUNTS_THRESHB_DAY_1	Num	8	
106	ACTCOUNTS_THRESHC_DAY_1	Num	8	
107	ACTCOUNTS_THRESHA_DAY_2	Num	8	
108	ACTCOUNTS_THRESHB_DAY_2	Num	8	
109	ACTCOUNTS_THRESHC_DAY_2	Num	8	
110	ACTCOUNTS_THRESHA_DAY_3	Num	8	
111	ACTCOUNTS_THRESHB_DAY_3	Num	8	
112	ACTCOUNTS_THRESHC_DAY_3	Num	8	
113	ACTCOUNTS_THRESHA_DAY_4	Num	8	
114	ACTCOUNTS_THRESHB_DAY_4	Num	8	
115	ACTCOUNTS_THRESHC_DAY_4	Num	8	

Num	Variable	Type	Len	Label
116	ACTCOUNTS_THRESHA_DAY_5	Num	8	
117	ACTCOUNTS_THRESHB_DAY_5	Num	8	
118	ACTCOUNTS_THRESHC_DAY_5	Num	8	
119	ACTCOUNTS_THRESHA_DAY_6	Num	8	
120	ACTCOUNTS_THRESHB_DAY_6	Num	8	
121	ACTCOUNTS_THRESHC_DAY_6	Num	8	
122	ACTCOUNTS_THRESHA_DAY_7	Num	8	
123	ACTCOUNTS_THRESHB_DAY_7	Num	8	
124	ACTCOUNTS_THRESHC_DAY_7	Num	8	
125	threshold	Num	8	
126	threshmin	Num	8	
127	thresholdA	Num	8	
128	thresholdB	Num	8	
129	thresholdC	Num	8	
130	THRESHOLDSTD_MIN_ALLDAYS	Num	8	
131	THRESHOLDSTD_MIN_DAY1	Num	8	
132	THRESHOLDSTD_MIN_DAY2	Num	8	
133	THRESHOLDSTD_MIN_DAY3	Num	8	
134	THRESHOLDSTD_MIN_DAY4	Num	8	
135	THRESHOLDSTD_MIN_DAY5	Num	8	
136	THRESHOLDSTD_MIN_DAY6	Num	8	
137	THRESHOLDSTD_MIN_DAY7	Num	8	
138	THRESHSTD_BOUT5_ALLDAYS	Num	8	
139	THRESHSTD_BOUT5_DAY1	Num	8	
140	THRESHSTD_BOUT5_DAY3	Num	8	
141	THRESHSTD_BOUT5_DAY4	Num	8	
142	THRESHSTD_BOUT5_DAY5	Num	8	
143	THRESHSTD_BOUT5_DAY2	Num	8	
144	THRESHSTD_BOUT5_DAY6	Num	8	
145	THRESHSTD_BOUT5_DAY7	Num	8	
146	THRESHSTD_BOUT10_ALLDAYS	Num	8	
147	THRESHSTD_BOUT10_DAY1	Num	8	
148	THRESHSTD_BOUT10_DAY4	Num	8	
149	THRESHSTD_BOUT10_DAY2	Num	8	
150	THRESHSTD_BOUT10_DAY5	Num	8	
151	THRESHSTD_BOUT10_DAY3	Num	8	
152	THRESHSTD_BOUT10_DAY7	Num	8	
153	THRESHSTD_BOUT10_DAY6	Num	8	
154	ACTCOUNTS_THRESHSTD_ALLDAYS	Num	8	

Num	Variable	Type	Len	Label
155	ACTCOUNTS_THRESHSTD_DAY_1	Num	8	
156	ACTCOUNTS_THRESHSTD_DAY_2	Num	8	
157	ACTCOUNTS_THRESHSTD_DAY_4	Num	8	
158	ACTCOUNTS_THRESHSTD_DAY_5	Num	8	
159	ACTCOUNTS_THRESHSTD_DAY_6	Num	8	
160	ACTCOUNTS_THRESHSTD_DAY_3	Num	8	
161	ACTCOUNTS_THRESHSTD_DAY_7	Num	8	
162	startwalk	Num	8	
163	endwalk	Num	8	
164	walktime	Num	8	
165	thresholdSTD	Num	8	

Data Set Name: as05_01_metsyn.sas7bdat

Num	Variable	Type	Len	Label
1	pMaskID	Num	8	LIFE PILOT Participant Identifier
2	vc	Char	4	
3	visit	Num	8	visit
4	glucose	Num	8	glucose
5	Tchol	Num	8	Tchol
6	Trig	Num	8	Trig
7	hdl	Num	8	hdl
8	vldl	Num	8	vldl
9	ldl	Num	8	ldl
10	insulin	Num	8	insulin

Data Set Name: as05_04_testosterone.sas7bdat

Num	Variable	Type	Len	Label
1	pMaskID	Num	8	LIFE PILOT Participant Identifier
2	vc	Char	4	
3	value	Num	8	

Data Set Name: *as06_02_vitd.sas7bdat*

Num	Variable	Type	Len	Label
1	pMaskID	Num	8	LIFE PILOT Participant Identifier
2	vitDng_ml1	Num	8	25-hydroxyvitamin D (25-OH-D) at baseline, ng/ml
3	vitDng_ml2	Num	8	25-hydroxyvitamin D (25-OH-D) at 6-mo follow-up, ng/ml
4	vitDng_ml3	Num	8	25-hydroxyvitamin D (25-OH-D) at 12-mo follow-up, ng/ml
5	vitDnmol_11	Num	8	25-hydroxyvitamin D (25-OH-D) at baseline, nmol/l
6	vitDnmol_12	Num	8	25-hydroxyvitamin D (25-OH-D) at 6-mo follow-up, nmol/l
7	vitDnmol_13	Num	8	25-hydroxyvitamin D (25-OH-D) at 12-mo follow-up, nmol/l
8	vitDcv1	Num	8	25-hydroxyvitamin D (25-OH-D) CV at baseline
9	vitDcv2	Num	8	25-hydroxyvitamin D (25-OH-D) CV at 6-mo follow-up
10	vitDcv3	Num	8	25-hydroxyvitamin D (25-OH-D) CV at 12-mo follow-up
11	PTH	Num	8	Parathyroid hormone (PTH) at baseline, pg/ml
12	PTHcv	Num	8	PTH CV at baseline

Data Set Name: as07_01_mri.sas7bdat

Num	Variable	Type	Len	Label
1	pMaskID	Num	8	LIFE PILOT Participant Identifier
2	Block	Num	8	Control or DSST (1=Control, 2=DSST)
3	Group	Char	12	Group
4	Intervention	Num	8	Intervention
5	CorrectResponses	Num	8	Motor Performance_Behavioral: # of Correct Responses
6	CorrectResponses_perTrials	Num	8	Motor Performance_Behavioral: (# of Correct Responses/ # of trials)*100
7	Trials	Num	8	Motor Performance_Behavioral: # of trials
8	WrongResponses	Num	8	Motor Performance_Behavioral: # of Wrong responses
9	WrongResponses_perTrials	Num	8	Motor Performance_Behavioral: (# of Wrong Responses/# of trials)*100
10	NoResponses	Num	8	Motor Performance_Behavioral: # of no response
11	NoResponses_perTrials	Num	8	Motor Performance_Behavioral: (# of no responses/# of trials)*100
12	ACC_all	Num	8	Motor Performance_Behavioral: ACC_all (# of correct responses/# of trials)
13	ACC_xnoresp	Num	8	Motor Performance_Behavioral: ACC_xnoresp (# of correct response/ # of trials-# of no response)
14	MeanRT_ALL	Num	8	Motor Performance_Behavioral: Mean Response Time (all trials)
15	MeanRT_CorrectResponses	Num	8	Motor Performance_Behavioral: Mean Response Time of Correct Responses
16	RT_NoResponses_longestRT	Num	8	Motor Performance_Behavioral: RT of no response (longestRT)
17	Mean_RT_WrongResponses	Num	8	Motor Performance_Behavioral: Mean Response Time of Wrong Responses (replacing no response with longestRT)
18	Mean_RT_WrongResponses2	Num	8	Motor Performance_Behavioral: Mean Response Time of Wrong Responses (excluding no responses)
19	RT_NoResponse_MedianRT_ALL	Num	8	Motor Performance_Behavioral: RT of noresponse (MedianRT of all blocks)
20	Mean_RT_Wrong_Responses3	Num	8	Motor Performance_Behavioral: Mean Response Time of Wrong Responses (replacing noresponse with medianRT)
21	medianRT	Num	8	Motor Performance_Behavioral: Median Response Time
22	ROI1	Num	8	Motor Performance_fMRI: ROI1
23	ROI2	Num	8	Motor Performance_fMRI: ROI2
24	ROI3	Num	8	Motor Performance_fMRI: ROI3
25	ROI4	Num	8	Motor Performance_fMRI: ROI4
26	ROI5	Num	8	Motor Performance_fMRI: ROI5
27	ROI6	Num	8	Motor Performance_fMRI: ROI6
28	ROI7	Num	8	Motor Performance_fMRI: ROI7
29	ROI8	Num	8	Motor Performance_fMRI: ROI8
30	ROI9	Num	8	Motor Performance_fMRI: ROI9
31	ROI10	Num	8	Motor Performance_fMRI: ROI10
32	ROI11	Num	8	Motor Performance_fMRI: ROI11
33	ROI12	Num	8	Motor Performance_fMRI: ROI12
34	ROI13	Num	8	Motor Performance_fMRI: ROI13

Num	Variable	Type	Len	Label
35	ROI14	Num	8	Motor Performance_fMRI: ROI14
36	ROI15	Num	8	Motor Performance_fMRI: ROI15
37	ROI16	Num	8	Motor Performance_fMRI: ROI16

Data Set Name: as07_02_genpolymorph.sas7bdat

Num	Variable	Type	Len	Label
1	pMaskID	Num	8	LIFE PILOT Participant Identifier
2	ID	Char	13	Plate ID
3	control	Num	8	
4	ACE_4293	Char	2	
5	ACE__4295	Char	2	
6	ACE__4309	Char	2	
7	ACE__4311	Char	2	
8	ACE__4318	Char	2	
9	ACE__4344	Char	2	
10	ACE__4351	Char	2	
11	ACE__4357	Char	2	
12	ACE__4363	Char	2	
13	ACE__4364	Char	2	
14	AGTR1_5182	Char	2	
15	AGTR1_5183	Char	2	
16	AGT_7079	Char	2	
17	AGTR1_275649	Char	2	
18	AGTR1_275651	Char	2	
19	AGTR1_385338	Char	2	
20	AGTR1_389566	Char	2	
21	AGTR1_718858	Char	2	
22	AGTR1_1492098	Char	2	
23	AGTR1_1492099	Char	2	
24	AGTR1_1826361	Char	2	
25	AGT_2004776	Char	2	
26	AGTR1_2131127	Char	2	
27	AGT_2478523	Char	2	
28	AGT_2493131	Char	2	
29	AGT_2493132	Char	2	
30	AGTR1_2638363	Char	2	
31	AGTR1_2675511	Char	2	
32	AGTR1_3772616	Char	2	
33	AGTR1_4681443	Char	2	
34	AGT_7536290	Char	2	
35	AGT_7539020	Char	2	
36	AGT_11568045	Char	2	
37	AGTR1_12695918	Char	2	

Num	Variable	Type	Len	Label
38	AGTR1_12721221	Char	2	
39	AGTR1_12721234	Char	2	
40	AGTR1_12721241	Char	2	
41	AGTR1_12721286	Char	2	
42	AGT__5046	Char	2	
43	AGT__5050	Char	2	
44	AGT__1078499	Char	2	
45	AGT__2071405	Char	2	
46	AGT__2478539	Char	2	
47	AGT__2478543	Char	2	
48	AGT__2478544	Char	2	
49	AGT__2493134	Char	2	
50	AGT__3789671	Char	2	
51	AGT__3889728	Char	2	
52	AGT__6687360	Char	2	
53	AGT__11568026	Char	2	
54	BDKRB2_5225	Char	2	
55	BDKRB2_945032	Char	2	
56	BDKRB2_945039	Char	2	
57	BDKRB2_945040	Char	2	
58	BDKRB2_1799722	Char	2	
59	BDKRB2_1959053	Char	2	
60	BDKRB2_2069571	Char	2	
61	BDKRB2_2069574	Char	2	
62	BDKRB2_2069575	Char	2	
63	BDKRB2_2069577	Char	2	
64	BDKRB2_2069578	Char	2	
65	BDKRB2_2069582	Char	2	
66	BDKRB2_2069583	Char	2	
67	BDKRB2_2069586	Char	2	
68	BDKRB2_2069590	Char	2	
69	BDKRB2_2069596	Char	2	
70	BDKRB2_2069599	Char	2	
71	BDKRB2_2242966	Char	2	
72	BDKRB2_4144131	Char	2	
73	BDKRB2_4900312	Char	2	
74	BDKRB2_4905459	Char	2	
75	BDKRB2_4905461	Char	2	
76	BDKRB2_4905462	Char	2	

Num	Variable	Type	Len	Label
77	BDKRB2_4905470	Char	2	
78	BDKRB2_7149163	Char	2	
79	BDKRB2_7161518	Char	2	
80	BDKRB2_8012552	Char	2	
81	BDKRB2_8013400	Char	2	
82	BDKRB2_8016905	Char	2	
83	BDKRB2_10130005	Char	2	
84	BDKRB2_10132462	Char	2	
85	BDKRB2_11847625	Char	2	
86	BDKRB2_11848502	Char	2	
87	BDKRB2_12433275	Char	2	
88	REN_5705	Char	2	
89	REN_5707	Char	2	
90	REN_2368564	Char	2	
91	REN_2887284	Char	2	
92	REN_3795575	Char	2	
93	REN_6676670	Char	2	
94	REN_6681776	Char	2	
95	REN_6682082	Char	2	
96	REN_6693954	Char	2	
97	REN_7521667	Char	2	
98	REN_10900555	Char	2	
99	REN_11571078	Char	2	
100	REN_11571080	Char	2	
101	REN_11571082	Char	2	

Data Set Name: as09_10_mob_ef.sas7bdat

Num	Variable	Type	Len	Label
1	MaskID	Num	8	LIFE Participant Identifier
2	vc	Char	5	vc
3	days_7mwt	Num	8	7M Walk: date (converted to days in relation to randomization)
4	safe_7mwt	Num	8	7M Walk: 1.
5	willing_7mwt	Num	8	7M Walk: 2.
6	walkdev_7mwt	Num	8	7M Walk: 3.
7	safewkdv_7mwt	Num	8	7M Walk: 4.
8	device_7mwt	Num	8	7M Walk: 5.
9	walk_comp_7mwt	Num	8	7M Walk: 6.
10	walk_min_7mwt	Char	2	7M Walk: 7.
11	walk_sec_7mwt	Char	2	7M Walk: 7.
12	trials_7mwt	Char	2	7M Walk: 7.a
13	timerecord_7mwt	Num	8	7M Walk: 7.b
14	stopwatch_7mwt	Num	8	7M Walk: 7.c
15	stp_sob_7mwt	Num	8	7M Walk: 8.
16	stp_fnt_7mwt	Num	8	7M Walk: 8.
17	stp_chst_7mwt	Num	8	7M Walk: 8.
18	stp_fat_7mwt	Num	8	7M Walk: 8.
19	stp_leg_7mwt	Num	8	7M Walk: 8.
20	stp_oth_7mwt	Num	8	7M Walk: 8.
21	stp_otspc_7mwt	Char	50	7M Walk: 8.
22	moveobs_7mwt	Num	8	7M Walk: 9.
23	obs6cm_7mwt	Num	8	7M Walk: 9.a
24	obs30cm_7mwt	Num	8	7M Walk: 9.b
25	end_stmb_7mwt	Num	8	7M Walk: 10.
26	end_unstb_7mwt	Num	8	7M Walk: 10.
27	end_defpos_7mwt	Num	8	7M Walk: 10.
28	end_physhlp_7mwt	Num	8	7M Walk: 10.
29	comments_7mwt	Char	1024	7M Walk: 10.
30	walk_time_7mwt	Num	8	7M Walk: 10.
31	no_sympt_7mwt	Num	8	7M Walk: 10.
32	days_wdmt	Num	8	Walking Task: date (converted to days in relation to randomization)
33	tcond_wdmt	Num	8	Walking Task: Trial Condition
34	ttype1_wdmt	Num	8	Walking Task: Trial 1 - Type
35	terror1_wdmt	Num	8	Walking Task: Trial 1 - Error
36	ttime1_wdmt	Num	8	Walking Task: Trial 1 - Total Time
37	comments1_wdmt	Char	250	Walking Task: Trial 1 - Comments

Num	Variable	Type	Len	Label
38	ttype2_wdmt	Num	8	Walking Task: Trial 2 - Type
39	terror2_wdmt	Num	8	Walking Task: Trial 2 - Error
40	ttime2_wdmt	Num	8	Walking Task: Trial 2 - Total Time
41	comments2_wdmt	Char	250	Walking Task: Trial 2 - Comments
42	ttype3_wdmt	Num	8	Walking Task: Trial 3 - Type
43	terror3_wdmt	Num	8	Walking Task: Trial 3 - Error
44	ttime3_wdmt	Num	8	Walking Task: Trial 3 - Total Time
45	comments3_wdmt	Char	250	Walking Task: Trial 3 - Comments
46	ttype4_wdmt	Num	8	Walking Task: Trial 4 - Type
47	terror4_wdmt	Num	8	Walking Task: Trial 4 - Error
48	ttime4_wdmt	Num	8	Walking Task: Trial 4 - Total Time
49	comments4_wdmt	Char	250	Walking Task: Trial 4 - Comments
50	ttype5_wdmt	Num	8	Walking Task: Trial 5 - Type
51	terror5_wdmt	Num	8	Walking Task: Trial 5 - Error
52	ttime5_wdmt	Num	8	Walking Task: Trial 5 - Total Time
53	comments5_wdmt	Char	250	Walking Task: Trial 5 - Comments
54	ttype6_wdmt	Num	8	Walking Task: Trial 6 - Type
55	terror6_wdmt	Num	8	Walking Task: Trial 6 - Error
56	ttime6_wdmt	Num	8	Walking Task: Trial 6 - Total Time
57	comments6_wdmt	Char	250	Walking Task: Trial 6 - Comments
58	ttype7_wdmt	Num	8	Walking Task: Trial 7 - Type
59	terror7_wdmt	Num	8	Walking Task: Trial 7 - Error
60	ttime7_wdmt	Num	8	Walking Task: Trial 7 - Total Time
61	comments7_wdmt	Char	250	Walking Task: Trial 7 - Comments
62	ttype8_wdmt	Num	8	Walking Task: Trial 8 - Type
63	terror8_wdmt	Num	8	Walking Task: Trial 8 - Error
64	ttime8_wdmt	Num	8	Walking Task: Trial 8 - Total Time
65	comments8_wdmt	Char	250	Walking Task: Trial 8 - Comments
66	ttype9_wdmt	Num	8	Walking Task: Trial 9 - Type
67	terror9_wdmt	Num	8	Walking Task: Trial 9 - Error
68	ttime9_wdmt	Num	8	Walking Task: Trial 9 - Total Time
69	comments9_wdmt	Char	250	Walking Task: Trial 9 - Comments
70	ttype10_wdmt	Num	8	Walking Task: Trial 10 - Type
71	terror10_wdmt	Num	8	Walking Task: Trial 10 - Error
72	ttime10_wdmt	Num	8	Walking Task: Trial 10 - Total Time
73	comments10_wdmt	Char	250	Walking Task: Trial 10 - Comments
74	days_chek	Num	8	E-prime Testing Checklist and Scoring: date (converted to days in relation to randomization)
75	raadmin_chek	Num	8	E-prime Testing Checklist and Scoring - Recall Assessment Task administered

Num	Variable	Type	Len	Label
76	reason1_chek	Char	200	E-prime Testing Checklist and Scoring - Recollection Assessment Task administered: No, document reason
77	stmhr1_chek	Char	2	E-prime Testing Checklist and Scoring - Recollection Assessment Task: Start Time, hr
78	stmmmin1_chek	Char	2	E-prime Testing Checklist and Scoring - Recollection Assessment Task: Start Time, min
79	st1ampm_chek	Num	8	E-prime Testing Checklist and Scoring - Recollection Assessment Task: Start Time, am/pm
80	etmhr1_chek	Char	2	E-prime Testing Checklist and Scoring - Recollection Assessment Task: End Time, hr
81	etmmmin1_chek	Char	2	E-prime Testing Checklist and Scoring - Recollection Assessment Task: End Time, min
82	et1ampm_chek	Num	8	E-prime Testing Checklist and Scoring - Recollection Assessment Task: End Time, am/pm
83	soptadmin_chek	Num	8	E-prime Testing Checklist and Scoring - SOPT administered
84	reason2_chek	Char	200	E-prime Testing Checklist and Scoring - SOPT administered: No, document reason
85	stmhr2_chek	Char	2	E-prime Testing Checklist and Scoring - SOPT: Start Time, hr
86	stmmmin2_chek	Char	2	E-prime Testing Checklist and Scoring - SOPT: Start Time, min
87	st2ampm_chek	Num	8	E-prime Testing Checklist and Scoring - SOPT: Start Time, am/pm
88	etmhr2_chek	Char	2	E-prime Testing Checklist and Scoring - SOPT: End Time, hr
89	etmmmin2_chek	Char	2	E-prime Testing Checklist and Scoring - SOPT: End Time, min
90	et2ampm_chek	Num	8	E-prime Testing Checklist and Scoring - SOPT: End Time, am/p,
91	maxacc1_chek	Char	2	E-prime Testing Checklist and Scoring - Max Accuracy 1
92	maxacc2_chek	Char	2	E-prime Testing Checklist and Scoring - Max Accuracy 2
93	maxacc3_chek	Char	2	E-prime Testing Checklist and Scoring - Max Accuracy 3
94	comments_chek	Char	1024	E-prime Testing Checklist and Scoring - Comments
95	days_rcas	Num	8	Recollection Assessment: date (converted to days in relation to randomization)
96	session_rcas_1	Num	8	Recollection Assessment: 1st - Session
97	list_rcas_1	Num	8	Recollection Assessment: 1st - List
98	lags_rcas_1	Num	8	Recollection Assessment: 1st - Lags
99	seed_rcas_1	Num	8	Recollection Assessment: 1st - Seed
100	old_rcas_1	Char	2	Recollection Assessment: 1st - Score, Old
101	fillers_rcas_1	Char	2	Recollection Assessment: 1st - Score, Fillers
102	lag1_rcas_1	Char	2	Recollection Assessment: 1st - Score, Lag1
103	repeat1_rcas_1	Char	2	Recollection Assessment: 1st - Score, Repeat1
104	lag2_rcas_1	Char	2	Recollection Assessment: 1st - Score, Lag2
105	repeat2_rcas_1	Char	2	Recollection Assessment: 1st - Score, Repeat2
106	comments_rcas_1	Char	1024	Recollection Assessment: 1st - Comments
107	session_rcas_2	Num	8	Recollection Assessment: 2nd - Session
108	list_rcas_2	Num	8	Recollection Assessment: 2nd - List
109	lags_rcas_2	Num	8	Recollection Assessment: 2nd - Lags
110	seed_rcas_2	Num	8	Recollection Assessment: 2nd - Seed
111	old_rcas_2	Char	2	Recollection Assessment: 2nd - Score, Old
112	fillers_rcas_2	Char	2	Recollection Assessment: 2nd - Score, Fillers
113	lag1_rcas_2	Char	2	Recollection Assessment: 2nd - Score, Lag1

Num	Variable	Type	Len	Label
114	repeat1_rcas_2	Char	2	Recollection Assessment: 2nd - Score, Repeat1
115	lag2_rcas_2	Char	2	Recollection Assessment: 2nd - Score, Lag2
116	repeat2_rcas_2	Char	2	Recollection Assessment: 2nd - Score, Repeat2
117	comments_rcas_2	Char	1024	Recollection Assessment: 2nd - Comments
118	session_rcas_3	Num	8	Recollection Assessment: 3rd - Session
119	list_rcas_3	Num	8	Recollection Assessment: 3rd - List
120	lags_rcas_3	Num	8	Recollection Assessment: 3rd - Lags
121	seed_rcas_3	Num	8	Recollection Assessment: 3rd - Seed
122	old_rcas_3	Char	2	Recollection Assessment: 3rd - Score, Old
123	fillers_rcas_3	Char	2	Recollection Assessment: 3rd - Score, Fillers
124	lag1_rcas_3	Char	2	Recollection Assessment: 3rd - Score, Lag1
125	repeat1_rcas_3	Char	2	Recollection Assessment: 3rd - Score, Repeat1
126	lag2_rcas_3	Char	2	Recollection Assessment: 3rd - Score, Lag2
127	repeat2_rcas_3	Char	2	Recollection Assessment: 3rd - Score, Repeat2
128	comments_rcas_3	Char	1024	Recollection Assessment: 3rd - Comments

Data Set Name: *as10_02_ni_hippocampal.sas7bdat*

Num	Variable	Type	Len	Label
1	MaskID	Num	8	LIFE Participant Identifier
2	region	Char	12	
3	voxdimX	Num	8	voxdimX
4	voxdimY	Num	8	voxdimY
5	voxdimZ	Num	8	voxdimZ
6	wholebrain	Num	8	total # voxels of tissue type in whole brain
7	wh_l	Num	8	whole hippocampus, left
8	ca_l	Num	8	CA/cornu ammonis 1-3, left
9	dg_l	Num	8	dentate gyrus, left
10	erc_l	Num	8	entorhinal cortex, left
11	sub_l	Num	8	subiculum, left
12	wh_r	Num	8	whole hippocampus, right
13	ca_r	Num	8	CA/cornu ammonis 1-3, right
14	dg_r	Num	8	dentate gyrus, right
15	erc_r	Num	8	entorhinal cortex, right
16	sub_r	Num	8	subiculum, right
17	flagged_l	Num	8	flagged due to bad(ish) warp of region, left
18	flagged_r	Num	8	flagged due to bad(ish) warp of region, right

Data Set Name: *as10_02_ni_vasculature.sas7bdat*

Num	Variable	Type	Len	Label
1	MaskID	Num	8	LIFE Participant Identifier
2	t1_total_tort	Num	8	Total tortuous venular length across the two pre-defined regions of interest
3	t1_total_straight	Num	8	Total straight venular length across the two pre-defined regions of interest

Data Set Name: as11_03_mitochondrialfx.sas7bdat

Num	Variable	Type	Len	Label
1	MaskID	Num	8	LIFE Participant Identifier
2	predate_days	Num	8	
3	postdate_days	Num	8	
4	ATPmax_peak	Num	8	
5	PCr30	Num	3	
6	tau30	Num	8	
7	kPCr30	Num	8	
8	ATPmax30	Num	8	
9	PCr_ATP30	Num	3	
10	pH36	Num	8	
11	PCr36	Num	3	
12	tau36	Num	8	
13	kPCr36	Num	8	
14	ATPmax36	Num	8	
15	PCr_ATP36	Num	3	
16	pH30n	Num	8	
17	PCr30_6	Num	3	
18	PCr36_6	Num	3	
19	ATPmax_peak_6	Num	8	
20	ph_besttest_6	Num	8	
21	atpmax30_6n	Num	8	
22	ATPmax36_6n	Num	8	
23	kPCr30_6n	Num	8	
24	kPCr36_6n	Num	8	
25	pH30_6n	Num	8	
26	pH36_6n	Num	8	
27	tau30_6n	Num	8	
28	tau36_6n	Num	8	
29	pcr_atp36_6	Num	8	
30	pcr_atp30_6	Num	8	

Data Set Name: as11_06_p3np.sas7bdat

Num	Variable	Type	Len	Label
1	pMaskID	Num	8	LIFE PILOT Participant Identifier
2	ID	Char	6	ID
3	vc	Char	100	visit code
4	P3NP	Num	8	pg/mL

Data Set Name: *as11_07_dprs_gpm.sas7bdat*

Num	Variable	Type	Len	Label
1	pMaskID	Num	8	LIFE PILOT Participant Identifier
2	vc	Char	4	vc
3	somatic	Num	8	
4	depressed_affect	Num	8	
5	positive_affect	Num	8	
6	interpersonal_problems	Num	8	
7	cesd	Num	8	
8	cesd0	Num	8	
9	dif12mo_cesd	Num	8	
10	depressed_affect0	Num	8	
11	dif12mo_da	Num	8	
12	somatic0	Num	8	
13	dif12mo_som	Num	8	
14	positive_affect0	Num	8	
15	dif12mo_pa	Num	8	
16	randarm	Char	17	Randomization Arm
17	clinic	Char	100	
18	age_tscr	Char	100	age_tscr
19	gender_tscr	Char	100	gender_tscr
20	lastgr_demg	Num	8	lastgr_demg
21	smokcurr_demg	Num	8	smokcurr_demg
22	numdrnk_demg	Num	8	numdrnk_demg
23	comorbindindexnew	Num	8	new index: missing data has been estimated
24	race	Char	5	
25	gaitspeed	Num	8	
26	age_num	Num	8	
27	visit	Num	8	
28	intervention	Num	8	
29	BDNF	Char	12	BDNF
30	Met	Num	8	
31	fiveHTT	Char	3	fiveHTT
32	L_allele	Num	8	
33	L_additive	Num	8	
34	APOE_rs7412	Char	12	APOE rs7412
35	APOE_rs429358	Char	3	APOE rs429358
36	APOE_e4	Num	8	
37	e4_additive	Num	8	

Data Set Name: *as11_08_acceler.sas7bdat*

Num	Variable	Type	Len	Label
1	MaskID	Num	8	LIFE Participant Identifier
2	day	Num	8	
3	num_walk_bouts	Num	8	# of walking bouts
4	mean_min_walking	Num	8	mean # min per walk bout
5	total_min_walking	Num	8	total min across all walk bouts
6	mean_counts_min_walk	Num	8	mean counts/min while walking
7	total_counts_min_walk	Num	8	total counts/min across all walk bouts
8	var_counts_min_walk	Num	8	variance of counts/min across all walking
9	num_rest_stops	Num	8	# rest episodes < 100
10	mean_min_resting	Num	8	mean length of rest episodes (min)
11	total_min_resting	Num	8	total min rested
12	mean_counts_min_rest	Num	8	mean counts/min during rest
13	total_counts_min_rest	Num	8	total counts/min across all rest
14	var_counts_min_rest	Num	8	variance of counts/min across all rest
15	day1_median	Num	8	Median counts/min day 1
16	day2_median	Num	8	Median counts/min day 2
17	overall_median	Num	8	Median counts/min across both days
18	day1	Num	8	
19	day2	Num	8	

Data Set Name: as12_02_impact.sas7bdat

Num	Variable	Type	Len	Label
1	pMaskID	Num	8	LIFE PILOT Participant Identifier
2	vc	Char	4	
3	visit	Char	8	
4	gender_tscr	Char	1	
5	age_tscr	Num	8	
6	hisp_tscr	Num	8	
7	af_am_tscr	Num	8	
8	native_tscr	Num	8	
9	asian_tscr	Num	8	
10	oth_race_tscr	Num	8	
11	white_tscr	Num	8	
12	hawaii_tscr	Num	8	
13	refused_tscr	Num	8	
14	lastgr_demg	Num	8	
15	smokcurr_demg	Num	8	
16	sysbp1_bpwh	Num	8	
17	diasbp1_bpwh	Num	8	
18	sysbp2_bpwh	Num	8	
19	diasbp2_bpwh	Num	8	
20	radpuls1_bpwh	Num	8	
21	radpuls2_bpwh	Num	8	
22	weight_bpwh	Num	8	
23	waistcrc1_bpwh	Num	8	
24	waistcrc2_bpwh	Num	8	
25	waistcrc3_bpwh	Num	8	
26	cm_bdht	Num	8	
27	hbp_mhah	Num	8	
28	hbpmed_mhah	Num	8	
29	hrtattk_mhah	Num	8	
30	hrtfailr_mhah	Num	8	
31	diabetes_mhah	Num	8	
32	lungdis_mhah	Num	8	
33	champs18	Num	8	CHAMPS 18-item
34	champs20	Num	8	CHAMPS 20-item
35	randarm	Char	17	Randomization Arm

Data Set Name: as12_06_agrin.sas7bdat

Num	Variable	Type	Len	Label
1	pMaskID	Num	8	LIFE PILOT Participant Identifier
2	CAF_1	Num	8	
3	tCAF_1	Num	8	
4	AgrC110_1	Num	8	
5	CAF_2	Num	8	
6	tCAF_2	Num	8	
7	AgrC110_2	Num	8	
8	CAF_3	Num	8	
9	tCAF_3	Num	8	
10	AgrC110_3	Num	8	
11	ln_CAF1	Num	8	
12	ln_CAF2	Num	8	
13	ln_CAF3	Num	8	
14	ln_tCAF1	Num	8	
15	ln_tCAF2	Num	8	
16	ln_tCAF3	Num	8	
17	ln_Agr110_1	Num	8	
18	ln_Agr110_2	Num	8	
19	ln_Agr110_3	Num	8	

Data Set Name: as12_10_genotyping.sas7bdat

Num	Variable	Type	Len	Label
1	pMaskID	Num	8	LIFE PILOT Participant Identifier
2	id	Num	8	
3	rs139380413_0	Num	8	
4	rs138227502_0	Num	8	
5	rs62625753_0	Num	8	
6	rs150683134_0	Num	8	
7	rs41278081_G	Num	8	
8	rs1801106_A	Char	2	
9	rs146679395_0	Char	2	
10	rs76324416_0	Num	8	
11	rs12002324_0	Char	2	
12	rs201320326_0	Num	8	
13	rs143657689_G	Num	8	
14	rs140199133_A	Num	8	
15	rs247616_T	Char	2	
16	rs72807847_G	Char	2	
17	rs61744697_T	Char	2	
18	rs56063729_G	Char	2	
19	rs984274_C	Num	8	
20	rs7412_T	Char	2	
21	rs143080537_T	Num	8	

Data Set Name: as12_16_apoe.sas7bdat

Num	Variable	Type	Len	Label
1	MaskID	Num	8	LIFE Participant Identifier
2	ApoE4	Num	8	1 = 0 alleles, 2 = 1 or 2 alleles
3	batch	Num	8	
4	rs429358	Char	2	
5	r27412	Char	12	
6	allele1	Char	14	
7	allele2	Char	14	
8	num_e4	Num	8	
9	Allele1_apo	Char	2	
10	Allele2_apo	Char	2	

Data Set Name: as13_07_ckd_creatinine.sas7bdat

Num	Variable	Type	Len	Label
1	MaskID	Num	8	LIFE Participant Identifier
2	vc	Char	3	vc
3	creatinine	Num	8	creatinine (mg/dL)