



S
O
F

Online™

Study of Osteoporotic Fractures (SOF)

Study Collection Forms

Visit 2

Medical History

Cardiovascular disease history

Form Type: Self-Administered Questionnaire

LEGEND:

Raw form variable names are located next to the question they represent and do not have a border around the variable name.

Calculated variable names are derived from other variables and have a border around the variable name. The calculated variables names are located in close proximity to the questions from which they were derived.

Some of the questions and measurements on these forms are not being released, and therefore no variable name is provided for them.

MEDICAL CONDITIONS

**SINCE YOU LAST VISITED OUR CLINIC
(ABOUT 2 YEARS AGO):**

23. Has a doctor told you that you had osteoporosis, sometimes called thin or brittle bones?

Yes

No

Don't know

PLEASE GO TO QUESTION 24

IF YES, in what year did a doctor tell you this?

19 _____

24. Has a doctor told you that you had a fracture of the spine or fracture of the vertebrae?

Yes

No

Don't know

PLEASE GO TO QUESTION 25

IF YES, in what year did a doctor tell you this?

19 _____

25. Has a doctor told you that you had a stroke, a blood clot in the brain, or bleeding in the brain?

V2SSTRK

Yes

No

Don't know

PLEASE GO TO QUESTION 26

IF YES, as a result of a stroke do you now have:

a. any weakness of an arm or hand?

Yes No Don't know

b. any weakness of a leg or foot?

Yes No Don't know

11. Did any of your full sisters ever break or fracture her wrist or forearm?

Yes No I never had any sisters Don't know

PLEASE GO TO QUESTION 12

IF YES, write down the first name of each sister who broke or fractured a wrist or forearm and her age when she broke it.

First name(s)	Age when broken	Clinic use:
_____	_____	S# _____
_____	_____	S# _____
_____	_____	S# _____
_____	_____	S# _____
_____	_____	S# _____
_____	_____	S# _____

FAMILY HISTORY OF STROKE

12. Did your mother ever have a stroke?

V2MSTK

Yes No Don't know

PLEASE GO TO QUESTION 13

IF YES, how old was she when she had her first stroke?
V2MSTY _____ years old.

13. Did your father ever have a stroke?

V2FSTK

Yes No Don't know

PLEASE GO TO QUESTION 14

IF YES, how old was he when he had his first stroke?
V2FSTY _____ years old.

HEART PROBLEMS

47. Has a doctor ever told you that you had any of the following:

V2EKG a. An abnormal electrocardiogram, EKG, or ECG?

Yes No Don't Know

V2EHEART b. A heart attack, coronary, or myocardial infarction?

Yes No Don't Know

V2EANGIN c. Angina?

Yes No Don't Know

V2MURM d. A heart murmur?

Yes No Don't Know

V2ENGHRT e. An enlarged heart?

Yes No Don't Know

V2ECHF f. Congestive heart failure?

Yes No Don't Know