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Online™

Study of Osteoporotic Fractures (SOF)

Study Collection Forms

Visit 4

Lifestyle

Physical Activity and Exercise

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.

Physical Activity

This question asks about physical activity in the past 12 months. This includes activities such as dancing and walking for exercise, organized sports such as golf and bowling, and any other activities such as those listed here. Here are some examples.

V4TTMYR

V4YRWTNP

V4TOTKNP

V4LOWKNP

V4MEDKNP

V4MTWKNP

V4LTWKNP

Walking

Swimming

Bicycling

Dance Exercise

Aerobic Dance

Square Dancing

Other Dancing

Gardening

Golf (walking)

Golf (with a cart)

Bowling

Calisthenics

Any Other

24. IN THE PAST 12 MONTHS, did you participate in any physical activities, recreation, or sports?

V4PHYS

Yes ☐

No ☐

Don't know ☐

PLEASE GO TO QUESTION 25

IF YES, write down these activities and answer the questions about how often "on average" you did each of these in the past 12 months.

code
activity

Clinic
Use

Activity

How many weeks
per year do you
do it?

How many times
per week do you
do it?

minutes
per time

Clinic
Use

Weight Loss

- 13.** SINCE YOU LAST COMPLETED A QUESTIONNAIRE FOR THE STUDY, have you been trying to lose weight?

V4INVWLS

Yes ☐

No ☐

Don't know ☐

V4WTLS

PLEASE GO TO QUESTION 14

If yes, by what means were you trying to lose weight? (Check all that apply)

☐ Diet **V4DIET**

☐ Diet program (Weight Watchers, Jenny Craig Nutra System) **V4PROG**

☐ Exercise

☐ Diet liquids (Slim Fast) **V4DLIQ**

V4EXERWL

☐ Diet pills

☐ Other: specify _____

V4PILLS

V4WTLSOT

Medications

- 14.** SINCE YOU LAST COMPLETED A QUESTIONNAIRE FOR THE STUDY, have you taken fluoride (sodium fluoride) pills for osteoporosis?

Yes ☐

No ☐

Don't know ☐

- 15.** SINCE YOU LAST COMPLETED A QUESTIONNAIRE FOR THE STUDY, have you taken calcitonin (Calcimar) injections, shots or nasal spray for osteoporosis or Paget's disease?

Yes ☐

No ☐

Don't know ☐

- 16.** SINCE YOU LAST COMPLETED A QUESTIONNAIRE FOR THE STUDY, have you taken etidronate or Didronel, sometimes given to persons with osteoporosis or Paget's disease?

Yes ☐

No ☐

Don't know ☐