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Online™

# Study of Osteoporotic Fractures (SOF)

## Study Collection Forms

### **Visit 5**

#### **Medications**

##### Specific Medications

Form Type: Clinic Interview

#### **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.

## Medications

In the last **TWO YEARS**, have you taken:

**43.** Fluoride (sodium fluoride) pills for osteoporosis?

V5FLOR

Yes

No

Don't  
know

**44.** Calcitonin (Calcimar) injections, shots or nasal spray for osteoporosis or Paget's disease?

V5CALCT

Yes

No

Don't  
know

**45.** Etidronate or Didronel, sometimes given to persons with osteoporosis or Paget's disease?

V5ETID

Yes

No

Don't  
know

In the last **30 DAYS** have you taken:

**46.** Vitamin D or a multivitamin containing vitamin D at least once a week?

V5VTDCUR

Yes

No

Don't  
know

**47.** Tums at least once a week?

V5TUMCUR

Yes

No

Don't  
know

**48.** Calcium supplements such as Os-Cal or Dolomite at least once a week?  
(DO NOT INCLUDE TUMS.)

V5CALCUR

Yes

No

Don't  
know

**49.** Multi-vitamins?

V5MLTVIT

Yes

No

Don't  
know

**50.** Iron Supplements?

V5IRON

Yes

No

Don't  
know

**51.** Any medication for arthritis or joint pain such as aspirin, Advil or Tylenol?

V5ARTMED

Yes

No

Don't  
know