

DATA SET: ce_checkin_checkout_20170928_c
 DATE CREATED: 09/28/2017
 Number of Observations: 3401
 Number of Variables: 24
 Organization of file: One Record per Participant (ID)

VARIABLE NAME	LABEL (VAR)	TYPE	FORMAT	MEAN	RANGE	N	CATEGORY	FREQUENCY	PERCENT	
GULFID	Gulf ID	CHAR	\$.-					
CE_SITE	CE_SITE. Site of Clinical Exam Completion	CHAR	\$CHAR		.-					
CE_A1_DATE	CE_A1_DATE. Participant's Exam Start Date [DATE: MM/DD/YYYY]	NUM	MMDDYY	07/02/15	08/27/14-06/30/16	3398	MISSING	3	0.1	
CE_A2_TIME	CE_A2_TIME. Participant's Exam Start Time [TIME: HH:MM (00:00-23:59)]	NUM	TIME	10:11	7:10-16:27	3399	MISSING	2	0.1	
CE_B1_DATE	CE_B1_DATE. Consent Date [DATE: MM/DD/YYYY]	NUM	MMDDYY	07/02/15	08/27/14-06/30/16	3393	MISSING	8	0.2	
CE_B1_TIME	CE_B1_TIME. Consent Time [TIME: HH:MM (00:00-23:59)]	NUM	TIME	11:18	8:14-20:40	3393	MISSING	8	0.2	
CE_B2	CE_B2. Record Consent Version#	NUM	CEVERSION					5	1009	29.7
					.		Missing	2	0.1	
					1		V1.0 (Practice)	1	0.0	
					2		V5.0 (Main)	2045	60.1	
					3		V6.0 (Main Revised)	169	5.0	
					4		V7.0 (Main [Isu Only])	175	5.1	
CE_B2A_YN	CE_B2A_YN. Did the participant consent to the full clinical exam?	NUM	YN		.		Missing	18	0.5	
					1		Yes	3377	99.3	
					2		No	6	0.2	
CE_B2B_TXT	CE_B2B_TXT. Reason for full exam consent refusal [TEXT: SPECIFY]	CHAR	\$CHAR		.-					
CE_B2C_YN	CE_B2C_YN. Did the participant consent to the mini clinical exam?	NUM	YN		.S		Skipped	3375	99.2	
					1		Yes	26	0.8	
CE_B2D_TXT	CE_B2D_TXT. Reason for mini exam consent refusal [TEXT: SPECIFY]	CHAR	\$CHAR		.-					
CE_B3_TXT	CE_B3_TXT. Scanned consent form barcode [TEXT: BARCODE]	CHAR	\$CHAR		.-					
CE_AA1	CE_AA1. Gift card amount participant received for visit remuneration	NUM	RENUM_FMT		.		Missing	23	0.7	
					1		\$100 (Full Exam)	3356	98.7	
					2		\$50 (Mini Exam)	21	0.6	
					3		None	1	0.0	

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CE_AA1A_TXT	CE_AA1A_TXT. Reason participant did not receive gift card for visit remuneration [TEXT: SPECIFY]	CHAR	\$CHAR		..				
CE_AA2_TXT	CE_AA2_TXT. Visit gift card serial number #1 [TEXT: GIFT CARD SERIAL NUMBER]	CHAR	\$CHAR		..				
CE_AA3_TXT	CE_AA3_TXT. Visit gift card serial number #2 [TEXT: GIFT CARD SERIAL NUMBER]	CHAR	\$CHAR		..				
CE_AA4	CE_AA4. Gift card amount participant received for travel	NUM	TRAVRENUM_FMT		.		Missing	35	1.0
					1		\$50 (61 Miles Or More Round Trip)	1936	56.9
					2		\$25 (60 Miles Or Less Round Trip)	1427	42.0
					3		None	3	0.1
CE_AA4A_TXT	CE_AA4A_TXT. Reason participant did not receive gift card for travel [TEXT: SPECIFY]	CHAR	\$CHAR		..				
CE_AA5_TXT	CE_AA5_TXT. Travel gift card serial number [TEXT: GIFT CARD SERIAL NUMBER]	CHAR	\$CHAR		..				
CE_AA6	CE_AA6. Gift card amount participant received for meals	NUM	OVRENUM_FMT		.		Missing	38	1.1
					1		\$25 (Overnight Stay)	30	0.9
					2		None	3333	98.0
CE_AA7_TXT	CE_AA7_TXT. Meals gift card serial number [TEXT: GIFT CARD SERIAL NUMBER]	CHAR	\$CHAR		..				
CE_AA8_TXT	CE_AA8_TXT. Scanned receipt barcode [TEXT: BARCODE]	CHAR	\$CHAR		..				
CE_AA9_TXT	CE_AA9_TXT. Scanned barcode of at-home saliva collection kit ID [TEXT: BARCODE]	CHAR	\$CHAR		..				
CE_AA10_TIME	CE_AA10_TIME. Enter participant's exam end time [TIME: HH:MM (00:00-23:59)]	NUM	TIME	13:45	9:49-20:30	3345	MISSING	56	1.6

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VARIABLE NAME	LABEL (VAR)	TYPE	FORMAT	MEAN	RANGE	N	CATEGORY	FREQUENCY	PERCENT
GULFID	Gulf ID	CHAR	\$..				
CE_C1	CE_C1. What is the highest grade or level of school you have completed or the highest degree you have received?	NUM	EDUCA		2		1st Grade	2	0.1
					4		3rd Grade	6	0.2
					5		4th Grade	7	0.2
					6		5th Grade	5	0.1
					7		6th Grade	26	0.8
					8		7th Grade	30	0.9
					9		8th Grade	71	2.1
					10		9th Grade	119	3.5
					11		10th Grade	156	4.6
					12		11th Grade	223	6.6
					13		12th Grade, No Diploma	85	2.5
					14		High School Graduate	851	25.0
					15		Ged Or Equivalent	262	7.7
					16		Some College, No Degree	679	20.0
					17		Associate Degree: Occupational, Technical Or Vocational Program	201	5.9
					18		Associate Degree: Academic Program	184	5.4
					19		Bachelor's Degree (Example: Ba, Ab, Bs, Bba)	352	10.3
					20		Master's Degree (Example: Ma, Ms, Meng, Med, Mba)	99	2.9
					21		Professional School Degree (Example: Md, Dds, Dvm, Jd)	11	0.3
					22		Doctoral Degree (Example: Phd, Edd)	29	0.9
					88		Don't Know	2	0.1
					99		Refused	1	0.0
CE_C2	CE_C2. What language do you speak at home?	NUM	RACEA		.		Missing	1	0.0
					1		English	3343	98.3
					2		Spanish	9	0.3
					3		Vietnamese	5	0.1
					5		Other, Specify	43	1.3

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CE_C2_OTHER_TXT	CE_C2_OTHER_TXT. What language do you speak at home? Other, SPECIFY [TEXT: SPECIFY]	CHAR	\$CHAR		..				
CE_C3_YN	CE_C3_YN. Are you currently pregnant?	NUM	DKREFYN		.		Missing	1	0.0
					.S		Skipped	2603	76.5
					1		Yes	6	0.2
					2		No	789	23.2
					8		Don't Know	2	0.1
CE_C4_YN	CE_C4_YN. During the past 24 hours, have you used a short-term or long-acting bronchodilator?	NUM	DKREFYN		.		Missing	2	0.1
					1		Yes	124	3.6
					2		No	3259	95.8
					8		Don't Know	16	0.5
CE_C5_YN	CE_C5_YN. In the past 3 months, have you had heart surgery?	NUM	DKREFYN		1		Yes	11	0.3
					2		No	3390	99.7
CE_C6_YN	CE_C6_YN. In the past 3 months, have you had an angioplasty or stent placement?	NUM	DKREFYN		1		Yes	17	0.5
					2		No	3384	99.5
CE_C7_YN	CE_C7_YN. In the past 3 months, have you had any (other) surgery to your chest or abdomen?	NUM	DKREFYN		1		Yes	58	1.7
					2		No	3343	98.3
CE_C8_YN	CE_C8_YN. In the past 3 months, have you had a heart attack or myocardial infarction?	NUM	DKREFYN		1		Yes	11	0.3
					2		No	3386	99.6
					8		Don't Know	4	0.1
CE_C9_YN	CE_C9_YN. In the past 3 months, have you had a stroke?	NUM	DKREFYN		.		Missing	1	0.0
					1		Yes	8	0.2
					2		No	3390	99.7
					8		Don't Know	2	0.1
CE_C9A_YN	CE_C9A_YN. Over the past 3 months, have you had new or worsening chest pain or pressure?	NUM	DKREFYN		.		Missing	2	0.1
					.S		Skipped	1619	47.6
					1		Yes	220	6.5
					2		No	1559	45.8

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					8		Don't Know	1	0.0
CE_C9B_YN	CE_C9B_YN. Over the past 3 months, have you had new or worsening symptoms of angina or been diagnosed with angina?	NUM	DKREFYN		.		Missing	2	0.1
					.S		Skipped	1619	47.6
					1		Yes	14	0.4
					2		No	1757	51.7
					8		Don't Know	9	0.3
CE_C9C_YN	CE_C9C_YN. Over the past 3 months, have you had new or worsening shortness of breath at rest or low exertion?	NUM	DKREFYN		.		Missing	2	0.1
					.S		Skipped	1619	47.6
					1		Yes	413	12.1
					2		No	1367	40.2
CE_C10_YN	CE_C10_YN. In the past 3 months, have you been hospitalized for any other heart problem?	NUM	DKREFYN		.		Missing	2	0.1
					1		Yes	29	0.9
					2		No	3369	99.1
					8		Don't Know	1	0.0
CE_C11_YN	CE_C11_YN. In the past 3 months, have you had a detached retina or eye surgery?	NUM	DKREFYN		.		Missing	1	0.0
					1		Yes	25	0.7
					2		No	3374	99.2
					8		Don't Know	1	0.0
CE_C12_YN	CE_C12_YN. Are you currently taking medication for tuberculosis?	NUM	DKREFYN		2		No	3401	100.0
CE_C13_YN	CE_C13_YN. In the past 12 months, has a doctor told you that you had an ear infection?	NUM	DKREFYN		1		Yes	155	4.6
					2		No	3236	95.1
					8		Don't Know	10	0.3
CE_C13A	CE_C13A. What was the month and year of your [ear infection] diagnosis?	NUM	DTFORM_CE		.S		Skipped	3246	95.4
					1		Mm/Yyyy	144	4.2
					8		Don't Know	11	0.3
CE_C13A_DATE	CE_C13A_DATE. What was the month and year of your [ear infection] diagnosis? [DATE: MM/YYYY]	NUM	MMYYS	02/2015	02/2011-05/2016	144	DON'T KNOW	11	0.3
					SKIPPE D			3246	95.4

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CE_C13B_YN	CE_C13B_YN. Was the ear infection treated with antibiotics?	NUM	DKREFYN		.S		Skipped	3246	95.4
					1		Yes	149	4.4
					2		No	5	0.1
					8		Don't Know	1	0.0
CE_C14_YN	CE_C14_YN. Have you ever had inner ear surgery?	NUM	DKREFYN		.		Missing	1	0.0
					1		Yes	107	3.1
					2		No	3289	96.7
					8		Don't Know	4	0.1
CE_C14A	CE_C14A. What was the month and year of your [inner ear] surgery?	NUM	DTFORM_CE		.		Missing	2	0.1
					.S		Skipped	3293	96.8
					1		Mm/Yyyy	77	2.3
					8		Don't Know	29	0.9
CE_C14A_DATE	CE_C14A_DATE. What was the month and year of your [inner ear] ssurgery? [DATE: MM/YYYY]	NUM	MMYYS	04/1986	08/1956 -01/2016	77	MISSING	2	0.1
							DON'T KNOW	29	0.9
							SKIPPE D	3293	96.8
CE_C15A1_YN	CE_C15A1_YN. Has a doctor ever told you that you have a brain tumor?	NUM	DKREFYN		.		Missing	3	0.1
					1		Yes	15	0.4
					2		No	3382	99.4
					8		Don't Know	1	0.0
CE_C15A2_MM	CE_C15A2_MM. What was the month you were diagnosed with a brain tumor? [MONTH: MM]	NUM	BEST	5.1	1-11	14	MISSING	3	0.1
							DON'T KNOW	1	0.0
							SKIPPE D	3383	99.5
CE_C15A2_YYYY	CE_C15A2_YYYY. What was the year you were diagnosed with a brain tumor? [YEAR: YYYY]	NUM	BEST	2007.8	1997-201 5	14	MISSING	3	0.1
							DON'T KNOW	1	0.0
							SKIPPE D	3383	99.5

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CE_C15A3_TXT	CE_C15A3_TXT. Has a doctor ever told you that you have a brain tumor? Comments/Notes [TEXT: SPECIFY]	CHAR	\$CHAR		.-.				
CE_C15B1_YN	CE_C15B1_YN. Has a doctor ever told you that you have polio?	NUM	DKREFYN		.		Missing	3	0.1
					1		Yes	10	0.3
					2		No	3388	99.6
CE_C15B2_MM	CE_C15B2_MM. What was the month you were diagnosed with polio? [MONTH: MM]	NUM	BEST	6.7	1-11	9	MISSING	3	0.1
					DON'T KNOW			1	0.0
					SKIPPE D			3388	99.6
CE_C15B2_YYYY	CE_C15B2_YYYY. What was the year you were diagnosed with polio? [YEAR: YYYY]	NUM	BEST	1956.9	1951-199 0	9	MISSING	3	0.1
					DON'T KNOW			1	0.0
					SKIPPE D			3388	99.6
CE_C15B3_TXT	CE_C15B3_TXT. Has a doctor ever told you that you have polio? Comments/Notes [TEXT: SPECIFY]	CHAR	\$CHAR		.-.				
CE_C15C1_YN	CE_C15C1_YN. Has a doctor ever told you that you have amyotrophic lateral sclerosis?	NUM	DKREFYN		.		Missing	3	0.1
					2		No	3395	99.8
					8		Don't Know	3	0.1
CE_C15C2_MM	CE_C15C2_MM. What was the month you were diagnosed with amyotrophic lateral sclerosis? [MONTH: MM]	NUM	BEST		MISSIN G			3	0.1
					SKIPPE D			3398	99.9
CE_C15C2_YYYY	CE_C15C2_YYYY. What was the year you were diagnosed with amyotrophic lateral sclerosis? [YEAR: YYYY]	NUM	BEST		MISSIN G			3	0.1
					SKIPPE D			3398	99.9
CE_C15C3_TXT	CE_C15C3_TXT. Has a doctor ever told you that you have amyotrophic lateral sclerosis? Comments/Notes [TEXT: SPECIFY]	CHAR	\$CHAR		.-.				
CE_C15D1_YN	CE_C15D1_YN. Has a doctor ever told you that you have multiple sclerosis?	NUM	DKREFYN		.		Missing	3	0.1
					1		Yes	5	0.1
					2		No	3391	99.7

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						8	Don't Know	2	0.1
CE_C15D2_MM	CE_C15D2_MM. What was the month you were diagnosed with multiple sclerosis? [MONTH: MM]	NUM	BEST	6.4	2-10	5	MISSING	3	0.1
						SKIPPE D		3393	99.8
CE_C15D2_YYYY	CE_C15D2_YYYY. What was the year you were diagnosed with multiple sclerosis? [YEAR: YYYY]	NUM	BEST	2006.4	1997-2015	5	MISSING	3	0.1
						SKIPPE D		3393	99.8
CE_C15D3_TXT	CE_C15D3_TXT. Has a doctor ever told you that you have multiple sclerosis? Comments/Notes [TEXT: SPECIFY]	CHAR	\$CHAR		.-.				
CE_C15E1_YN	CE_C15E1_YN. Has a doctor ever told you that you have Parkinson's disease?	NUM	DKREFYN		.		Missing	3	0.1
					1		Yes	6	0.2
					2		No	3388	99.6
					8		Don't Know	4	0.1
CE_C15E2_MM	CE_C15E2_MM. What was the month you were diagnosed with Parkinson's disease? [MONTH: MM]	NUM	BEST	8.3	4-11	6	MISSING	3	0.1
						SKIPPE D		3392	99.7
CE_C15E2_YYYY	CE_C15E2_YYYY. What was the year you were diagnosed with Parkinson's disease? [YEAR: YYYY]	NUM	BEST	2009.3	1998-2014	6	MISSING	3	0.1
						SKIPPE D		3392	99.7
CE_C15E3_TXT	CE_C15E3_TXT. Has a doctor ever told you that you have Parkinson's disease? Comments/Notes [TEXT: SPECIFY]	CHAR	\$CHAR		.-.				
CE_C15F1_YN	CE_C15F1_YN. Has a doctor ever told you that you had a stroke?	NUM	DKREFYN		.		Missing	3	0.1
					1		Yes	85	2.5
					2		No	3306	97.2
					8		Don't Know	7	0.2
CE_C15F2_MM	CE_C15F2_MM. What was the month you were diagnosed with a stroke? [MONTH: MM]	NUM	BEST	7.1	1-12	73	MISSING	4	0.1
						DON'T KNOW		11	0.3
						SKIPPE D		3313	97.4

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CE_C15F2_YYYY	CE_C15F2_YYYY. What was the year you were diagnosed with a stroke? [YEAR: YYYY]	NUM	BEST	2010.1	1989-2015	74	MISSING	3	0.1
							DONT KNOW	11	0.3
							SKIPPE D	3313	97.4
CE_C15F3_TXT	CE_C15F3_TXT. Has a doctor ever told you that you had a stroke? Comments/Notes [TEXT: SPECIFY]	CHAR	\$CHAR		.-.				
CE_C15G1_YN	CE_C15G1_YN. Has a doctor ever told you that you have low thyroid function?	NUM	DKREFYN		.		Missing	3	0.1
					1		Yes	122	3.6
					2		No	3252	95.6
					8		Don't Know	24	0.7
CE_C15G2_MM	CE_C15G2_MM. What was the month you were diagnosed with low thyroid function? [MONTH: MM]	NUM	BEST	5.9	1-12	105	MISSING	4	0.1
							DONT KNOW	16	0.5
							SKIPPE D	3276	96.3
CE_C15G2_YYYY	CE_C15G2_YYYY. What was the year you were diagnosed with low thyroid function? [YEAR: YYYY]	NUM	BEST	2005.6	1964-2015	108	MISSING	3	0.1
							DONT KNOW	14	0.4
							SKIPPE D	3276	96.3
CE_C15G3_TXT	CE_C15G3_TXT. Has a doctor ever told you that you have low thyroid function? Comments/Notes [TEXT: SPECIFY]	CHAR	\$CHAR		.-.				
CE_C15H1_YN	CE_C15H1_YN. Has a doctor ever told you that you have diabetes?	NUM	DKREFYN		.		Missing	3	0.1
					1		Yes	407	12.0
					2		No	2972	87.4
					8		Don't Know	19	0.6
CE_C15H2_MM	CE_C15H2_MM. What was the month you were diagnosed with diabetes? [MONTH: MM]	NUM	BEST	5.9	1-12	348	MISSING	8	0.2
							DONT KNOW	54	1.6
							SKIPPE D	2991	87.9

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CE_C15H2_YYYY	CE_C15H2_YYYY. What was the year you were diagnosed with diabetes? [YEAR: YYYY]	NUM	BEST	2006.7	1965-2016	357	MISSING	3	0.1
					DONT KNOW			50	1.5
					SKIPPE D			2991	87.9
CE_C15H3_TXT	CE_C15H3_TXT. Has a doctor ever told you that you have diabetes? Comments/Notes [TEXT: SPECIFY]	CHAR	\$CHAR		.-.				
CE_C15I1_YN	CE_C15I1_YN. Has a doctor ever told you that you have retinal or macular degeneration?	NUM	DKREFYN		.		Missing	3	0.1
					1		Yes	35	1.0
					2		No	3339	98.2
					8		Don't Know	24	0.7
CE_C15I2_MM	CE_C15I2_MM. What was the month you were diagnosed with retinal or macular degeneration? [MONTH: MM]	NUM	BEST	5.2	1-12	30	MISSING	5	0.1
					DONT KNOW			3	0.1
					SKIPPE D			3363	98.9
CE_C15I2_YYYY	CE_C15I2_YYYY. What was the year you were diagnosed with retinal or macular degeneration? [YEAR: YYYY]	NUM	BEST	2006.4	1951-2015	32	MISSING	3	0.1
					DONT KNOW			3	0.1
					SKIPPE D			3363	98.9
CE_C15I3_TXT	CE_C15I3_TXT. Has a doctor ever told you that you have retinal or macular degeneration? Comments/Notes [TEXT: SPECIFY]	CHAR	\$CHAR		.-.				
CE_C16_YN	CE_C16_YN. Are you currently under a doctor's care for any other short-term or long-term illness(es) or conditions not listed above?	NUM	DKREFYN		.		Missing	1	0.0
					1		Yes	1547	45.5
					2		No	1850	54.4
					8		Don't Know	3	0.1
CE_C16A_TXT_1	CE_C16A_TXT_1. What illnesses or conditions do you have? [1]	CHAR	\$CHAR		.-.				
CE_C16A_TXT_2	CE_C16A_TXT_2. What illnesses or conditions do you have? [2]	CHAR	\$CHAR		.-.				

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CE_C16A_TXT_3	CE_C16A_TXT_3. What illnesses or conditions do you have? [3]	CHAR	\$CHAR		..				
CE_C16A_TXT_4	CE_C16A_TXT_4. What illnesses or conditions do you have? [4]	CHAR	\$CHAR		..				
CE_C16A_TXT_5	CE_C16A_TXT_5. What illnesses or conditions do you have? [5]	CHAR	\$CHAR		..				
CE_C16A_TXT_6	CE_C16A_TXT_6. What illnesses or conditions do you have? [6]	CHAR	\$CHAR		..				
CE_C16A_TXT_7	CE_C16A_TXT_7. What illnesses or conditions do you have? [7]	CHAR	\$CHAR		..				
CE_C16A_TXT_8	CE_C16A_TXT_8. What illnesses or conditions do you have? [8]	CHAR	\$CHAR		..				
CE_C16A_TXT_9	CE_C16A_TXT_9. What illnesses or conditions do you have? [9]	CHAR	\$CHAR		..				
CE_C16A_TXT_10	CE_C16A_TXT_10. What illnesses or conditions do you have? [10]	CHAR	\$CHAR		..				
CE_C16A_TXT_11	CE_C16A_TXT_11. What illnesses or conditions do you have? [11]	CHAR	\$CHAR		..				
CE_C16A_TXT_12	CE_C16A_TXT_12. What illnesses or conditions do you have? [12]	CHAR	\$CHAR		..				
CE_C16A_TXT_13	CE_C16A_TXT_13. What illnesses or conditions do you have? [13]	CHAR	\$CHAR		..				
CE_C16A_TXT_14	CE_C16A_TXT_14. What illnesses or conditions do you have? [14]	CHAR	\$CHAR		..				
CE_C16A_TXT_15	CE_C16A_TXT_15. What illnesses or conditions do you have? [15]	CHAR	\$CHAR		..				
CE_C16A_TXT_16	CE_C16A_TXT_16. What illnesses or conditions do you have? [16]	CHAR	\$CHAR		..				
CE_C16A_TXT_17	CE_C16A_TXT_17. What illnesses or conditions do you have? [17]	CHAR	\$CHAR		..				
CE_C16A_TXT_18	CE_C16A_TXT_18. What illnesses or conditions do you have? [18]	CHAR	\$CHAR		..				
CE_C16A_TXT_19	CE_C16A_TXT_19. What illnesses or conditions do you have? [19]	CHAR	\$CHAR		..				
CE_C16A_TXT_20	CE_C16A_TXT_20. What illnesses or conditions do you have? [20]	CHAR	\$CHAR		..				
CE_C16A_TXT_21	CE_C16A_TXT_21. What illnesses or conditions do you have? [21]	CHAR	\$CHAR		..				
CE_C16A_TXT_22	CE_C16A_TXT_22. What illnesses or conditions do you have? [22]	CHAR	\$CHAR		..				
CE_C16A_TXT_23	CE_C16A_TXT_23. What illnesses or conditions do you have? [23]	CHAR	\$CHAR		..				
CE_C16A_TXT_24	CE_C16A_TXT_24. What illnesses or conditions do you have? [24]	CHAR	\$CHAR		..				

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CE_C16A_TXT_25	CE_C16A_TXT_25. What illnesses or conditions do you have? [25]	CHAR	\$CHAR		.-.				
CE_C17_YN	CE_C17_YN. Have you experienced any illness, injury or condition affecting the use of your arms or legs?	NUM	DKREFYN		1		Yes	994	29.2
					2		No	2407	70.8
CE_C17A_TXT_1	CE_C17A_TXT_1. What are these illnesses, injuries or conditions? [1]	CHAR	\$CHAR		.-.				
CE_C17A_TXT_2	CE_C17A_TXT_2. What are these illnesses, injuries or conditions? [2]	CHAR	\$CHAR		.-.				
CE_C17A_TXT_3	CE_C17A_TXT_3. What are these illnesses, injuries or conditions? [3]	CHAR	\$CHAR		.-.				
CE_C17A_TXT_4	CE_C17A_TXT_4. What are these illnesses, injuries or conditions? [4]	CHAR	\$CHAR		.-.				
CE_C17A_TXT_5	CE_C17A_TXT_5. What are these illnesses, injuries or conditions? [5]	CHAR	\$CHAR		.-.				
CE_C17A_TXT_6	CE_C17A_TXT_6. What are these illnesses, injuries or conditions? [6]	CHAR	\$CHAR		.-.				
CE_C17A_TXT_7	CE_C17A_TXT_7. What are these illnesses, injuries or conditions? [7]	CHAR	\$CHAR		.-.				
CE_C17A_TXT_8	CE_C17A_TXT_8. What are these illnesses, injuries or conditions? [8]	CHAR	\$CHAR		.-.				
CE_C17A_TXT_9	CE_C17A_TXT_9. What are these illnesses, injuries or conditions? [9]	CHAR	\$CHAR		.-.				
CE_C17A_TXT_10	CE_C17A_TXT_10. What are these illnesses, injuries or conditions? [10]	CHAR	\$CHAR		.-.				
CE_C17A_TXT_11	CE_C17A_TXT_11. What are these illnesses, injuries or conditions? [11]	CHAR	\$CHAR		.-.				
CE_C17A_TXT_12	CE_C17A_TXT_12. What are these illnesses, injuries or conditions? [12]	CHAR	\$CHAR		.-.				
CE_C17A_TXT_13	CE_C17A_TXT_13. What are these illnesses, injuries or conditions? [13]	CHAR	\$CHAR		.-.				
CE_C18_YN	CE_C18_YN. Have you ever had a head injury?	NUM	DKREFYN		1		Yes	636	18.7
					2		No	2757	81.1
					8		Don't Know	8	0.2
CE_C18A	CE_C18A. In what month and year was your most recent head injury?	NUM	DTFORM_CE		.S		Skipped	2765	81.3
					1		Mm/Yyyy	554	16.3
					8		Don't Know	82	2.4
CE_C18A_DATE	CE_C18A_DATE. In what month and year was your most recent head injury? [DATE: MM/YYYY]	NUM	MMYY	08/1994	06/1939 -04/2016	554	DON'T KNOW	82	2.4

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							SKIPPED	2765	81.3
							D		
CE_C19_YN	CE_C19_YN. Have you ever had a head injury where you lost consciousness?	NUM	DKREFYN		.S		Skipped	2765	81.3
					1		Yes	336	9.9
					2		No	281	8.3
					8		Don't Know	19	0.6
CE_C19A	CE_C19A. How many times in your life have you had a head injury that resulted in loss of consciousness?	NUM	TIMESNUM		.S		Skipped	3065	90.1
					1		[# Times]	332	9.8
					8		Don't Know	4	0.1
CE_C19A_NUM	CE_C19A_NUM. How many times in your life have you had a head injury that resulted in loss of consciousness? [UNIT: NUMBER OF TIMES]	NUM	BEST	1.5	1-20	332	DON'T KNOW	4	0.1
							SKIPPED	3065	90.1
							D		
CE_C19B	CE_C19B. How many of these were seen or treated by a health care provider?	NUM	SOMETIME		.S		Skipped	3065	90.1
					1		[# Of Them]	76	2.2
					2		All Of Them	197	5.8
					3		Some Of Them	1	0.0
					4		Just One	28	0.8
					5		None Of Them	32	0.9
					8		Don't Know	2	0.1
CE_C19B_NUM	CE_C19B_NUM. How many of these were seen or treated by a health care provider? [UNIT: NUMBER OF TIMES]	NUM	BEST	1.3	1-6	76	SKIPPED	3325	97.8
CE_C19C_1	CE_C19C_1. When did your [FIRST] head injury with loss of consciousness occur? [HEAD INJURY 1]	NUM	AGETIME		.		Missing	4	0.1
					.S		Skipped	3065	90.1
					1		Mm / Yyyy	221	6.5
					2		Age	100	2.9
					8		Don't Know	11	0.3
CE_C19C_DATE_1	CE_C19C_DATE_1. When did your [FIRST] head injury with loss of consciousness occur? [DATE: MM/YYYY] [HEAD INJURY 1]	NUM	MMYY5	08/1992	06/1937 -01/2016	220	MISSING	105	3.1
							DON'T KNOW	11	0.3

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VARIABLE NAME	LABEL (VAR)	TYPE	FORMAT	MEAN	RANGE	N	CATEGORY	FREQUENCY	PERCENT
								3065	90.1
					SKIPPE D				
CE_C19C_AGE_1	CE_C19C_AGE_1. When did your [FIRST] head injury with loss of consciousness occur? [AGE] [HEAD INJURY 1]	NUM	BEST	16.0	2-63	100	MISSING	225	6.6
					DONT KNOW			11	0.3
					SKIPPE D			3065	90.1
CE_C19D_1	CE_C19D_1. Approximately how long were you unconscious? [HEAD INJURY 1]	NUM	LENGTHTIME		.		Missing	4	0.1
					.S		Skipped	3065	90.1
					1		< 30 Minutes	149	4.4
					2		>= 30 Minutes	111	3.3
					8		Don't Know	72	2.1
CE_C19E_YN_1	CE_C19E_YN_1. Did you seek medical treatment for your head injury? [HEAD INJURY 1]	NUM	DKREFYN		.		Missing	4	0.1
					.S		Skipped	3065	90.1
					1		Yes	288	8.5
					2		No	44	1.3
CE_C19F_YN_1	CE_C19F_YN_1. Were you hospitalized overnight as a result of your head injury? [HEAD INJURY 1]	NUM	DKREFYN		.		Missing	4	0.1
					.S		Skipped	3065	90.1
					1		Yes	161	4.7
					2		No	160	4.7
					8		Don't Know	11	0.3
CE_C19G_NUM_1	CE_C19G_NUM_1. What was the total number of days you spent in the hospital? [UNIT: NUMBER OF DAYS] [HEAD INJURY 1]	NUM	BEST	23.4	1-360	149	MISSING	4	0.1
					DONT KNOW			12	0.4
					SKIPPE D			3236	95.1
CE_C19H_YN_1	CE_C19H_YN_1. Did your head injury occur on the job? [HEAD INJURY 1]	NUM	DKREFYN		.		Missing	4	0.1
					.S		Skipped	3065	90.1
					1		Yes	38	1.1
					2		No	294	8.6

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CE_C19I_YN_1	CE_C19I_YN_1. Did your head injury occur in a motor vehicle accident? [HEAD INJURY 1]	NUM	DKREFYN		.		Missing	4	0.1	
					.S		Skipped	3065	90.1	
					1		Yes	145	4.3	
					2		No	187	5.5	
CE_C19J_YN_1	CE_C19J_YN_1. Did your head injury occur at work on a farm? [HEAD INJURY 1]	NUM	DKREFYN		.		Missing	4	0.1	
					.S		Skipped	3065	90.1	
					1		Yes	8	0.2	
					2		No	324	9.5	
CE_C19K_YN_1	CE_C19K_YN_1. Did your head injury occur in another way [HEAD INJURY 1]?	NUM	DKREFYN		.		Missing	4	0.1	
					.S		Skipped	3065	90.1	
					1		Yes	182	5.4	
					2		No	150	4.4	
CE_C19K_TXT_1	CE_C19K_TXT_1. Did your head injury occur in another way? YES [TEXT: SPECIFY] [HEAD INJURY 1]	CHAR	\$CHAR		.-.					
CE_C19C_2	CE_C19C_2. When did your [SECOND] head injury with loss of consciousness occur? [HEAD INJURY 2]	NUM	AGETIME		.S		Skipped	3315	97.5	
					1		Mm / Yyyy	40	1.2	
					2		Age	41	1.2	
					8		Don't Know	5	0.1	
CE_C19C_DATE_2	CE_C19C_DATE_2. When did your [SECOND] head injury with loss of consciousness occur? [DATE: MM/YYYY] [HEAD INJURY 2]	NUM	MMYYS	06/1996	06/1939 -11/2014	39	MISSING	42	1.2	
									5	0.1
									3315	97.5
CE_C19C_AGE_2	CE_C19C_AGE_2. When did your [SECOND] head injury with loss of consciousness occur? [AGE] [HEAD INJURY 2]	NUM	BEST	23.3	4-55	41	MISSING	40	1.2	
									5	0.1
									3315	97.5
CE_C19D_2	CE_C19D_2. Approximately how long were you unconscious? [HEAD INJURY 2]	NUM	LENGTHTIME		.S		Skipped	3315	97.5	
					1		< 30 Minutes	49	1.4	

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							>= 30 Minutes	20	0.6
							Don't Know	17	0.5
CE_C19E_YN_2	CE_C19E_YN_2. Did you seek medical treatment for your head injury? [HEAD INJURY 2]	NUM	DKREFYN		.S		Skipped	3315	97.5
							Yes	59	1.7
							No	26	0.8
							Don't Know	1	0.0
CE_C19F_YN_2	CE_C19F_YN_2. Were you hospitalized overnight as a result of your head injury? [HEAD INJURY 2]	NUM	DKREFYN		.S		Skipped	3315	97.5
							Yes	20	0.6
							No	63	1.9
							Don't Know	3	0.1
CE_C19G_NUM_2	CE_C19G_NUM_2. What was the total number of days you spent in the hospital? [UNIT: NUMBER OF DAYS] [HEAD INJURY 2]	NUM	BEST	6.9	1-30	20	SKIPPED	3381	99.4
CE_C19H_YN_2	CE_C19H_YN_2. Did your head injury occur on the job? [HEAD INJURY 2]	NUM	DKREFYN		.S		Skipped	3315	97.5
							Yes	10	0.3
							No	75	2.2
							Don't Know	1	0.0
CE_C19I_YN_2	CE_C19I_YN_2. Did your head injury occur in a motor vehicle accident? [HEAD INJURY 2]	NUM	DKREFYN		.S		Skipped	3315	97.5
							Yes	22	0.6
							No	64	1.9
CE_C19J_YN_2	CE_C19J_YN_2. Did your head injury occur at work on a farm? [HEAD INJURY 2]	NUM	DKREFYN		.S		Skipped	3315	97.5
							Yes	1	0.0
							No	85	2.5
CE_C19K_YN_2	CE_C19K_YN_2. Did your head injury occur in another way [HEAD INJURY 2]?	NUM	DKREFYN		.S		Skipped	3315	97.5
							Yes	57	1.7
							No	28	0.8
							Don't Know	1	0.0
CE_C19K_TXT_2	CE_C19K_TXT_2. Did your head injury occur in another way? YES [TEXT: SPECIFY] [HEAD INJURY 2]	CHAR	\$CHAR		.-				

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CE_C19C_3	CE_C19C_3. When did your [THIRD] head injury with loss of consciousness occur? [HEAD INJURY 3]	NUM	AGETIME		.S		Skipped	3372	99.1	
					1		Mm / Yyyy	11	0.3	
					2		Age	16	0.5	
					8		Don't Know	2	0.1	
CE_C19C_DATE_3	CE_C19C_DATE_3. When did your [THIRD] head injury with loss of consciousness occur? [DATE: MM/YYYY] [HEAD INJURY 3]	NUM	MMYY5	04/2005	08/1991-07/2013	11	MISSING	16	0.5	
							DON'T KNOW	2	0.1	
							SKIPPE D	3372	99.1	
CE_C19C_AGE_3	CE_C19C_AGE_3. When did your [THIRD] head injury with loss of consciousness occur? [AGE] [HEAD INJURY 3]	NUM	BEST	26.8	13-55	16	MISSING	11	0.3	
							DONT KNOW	2	0.1	
							SKIPPE D	3372	99.1	
CE_C19D_3	CE_C19D_3. Approximately how long were you unconscious? [HEAD INJURY 3]	NUM	LENGTHTIME		.S		Skipped	3372	99.1	
					1		< 30 Minutes	17	0.5	
					2		>= 30 Minutes	6	0.2	
							8	Don't Know	6	0.2
CE_C19E_YN_3	CE_C19E_YN_3. Did you seek medical treatment for your head injury? [HEAD INJURY 3]	NUM	DKREFYN		.S		Skipped	3372	99.1	
					1		Yes	17	0.5	
					2		No	11	0.3	
					8		Don't Know	1	0.0	
CE_C19F_YN_3	CE_C19F_YN_3. Were you hospitalized overnight as a result of your head injury? [HEAD INJURY 3]	NUM	DKREFYN		.S		Skipped	3372	99.1	
					1		Yes	9	0.3	
					2		No	19	0.6	
					8		Don't Know	1	0.0	
CE_C19G_NUM_3	CE_C19G_NUM_3. What was the total number of days you spent in the hospital? [UNIT: NUMBER OF DAYS] [HEAD INJURY 3]	NUM	BEST	16.6	1-96	8	DON'T KNOW	1	0.0	
							SKIPPE D	3392	99.7	

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CE_C19H_YN_3	CE_C19H_YN_3. Did your head injury occur on the job? [HEAD INJURY 3]	NUM	DKREFYN		.S		Skipped	3372	99.1
							Yes	6	0.2
							No	22	0.6
							Don't Know	1	0.0
CE_C19I_YN_3	CE_C19I_YN_3. Did your head injury occur in a motor vehicle accident? [HEAD INJURY 3]	NUM	DKREFYN		.S		Skipped	3372	99.1
							Yes	7	0.2
							No	21	0.6
							Don't Know	1	0.0
CE_C19J_YN_3	CE_C19J_YN_3. Did your head injury occur at work on a farm? [HEAD INJURY 3]	NUM	DKREFYN		.S		Skipped	3372	99.1
							Yes	1	0.0
							No	27	0.8
							Don't Know	1	0.0
CE_C19K_YN_3	CE_C19K_YN_3. Did your head injury occur in another way [HEAD INJURY 3]?	NUM	DKREFYN		.S		Skipped	3372	99.1
							Yes	18	0.5
							No	10	0.3
							Don't Know	1	0.0
CE_C19K_TXT_3	CE_C19K_TXT_3. Did your head injury occur in another way? YES [TEXT: SPECIFY] [HEAD INJURY 3]	CHAR	\$CHAR		.-.				
CE_C19C_4	CE_C19C_4. When did your [FOURTH] head injury with loss of consciousness occur? [HEAD INJURY 4]	NUM	AGETIME		.S		Skipped	3388	99.6
							Mm / Yyyy	3	0.1
							Age	9	0.3
							Don't Know	1	0.0
CE_C19C_DATE_4	CE_C19C_DATE_4. When did your [FOURTH] head injury with loss of consciousness occur? [DATE: MM/YYYY] [HEAD INJURY 4]	NUM	MMYY5	11/2003	12/1992-04/2012	3	MISSING	9	0.3
							DON'T KNOW	1	0.0
							SKIPPE D	3388	99.6
CE_C19C_AGE_4	CE_C19C_AGE_4. When did your [FOURTH] head injury with loss of consciousness occur? [AGE] [HEAD INJURY 4]	NUM	BEST	27.1	10-55	9	MISSING	3	0.1
							DON'T KNOW	1	0.0

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							SKIPPED	3388	99.6
							D		
CE_C19D_4	CE_C19D_4. Approximately how long were you unconscious? [HEAD INJURY 4]	NUM	LENGTHTIME		.S		Skipped	3388	99.6
					1		< 30 Minutes	9	0.3
					8		Don't Know	4	0.1
CE_C19E_YN_4	CE_C19E_YN_4. Did you seek medical treatment for your head injury? [HEAD INJURY 4]	NUM	DKREFYN		.S		Skipped	3388	99.6
					1		Yes	7	0.2
					2		No	5	0.1
					8		Don't Know	1	0.0
CE_C19F_YN_4	CE_C19F_YN_4. Were you hospitalized overnight as a result of your head injury? [HEAD INJURY 4]	NUM	DKREFYN		.S		Skipped	3388	99.6
					1		Yes	2	0.1
					2		No	10	0.3
					8		Don't Know	1	0.0
CE_C19G_NUM_4	CE_C19G_NUM_4. What was the total number of days you spent in the hospital? [UNIT: NUMBER OF DAYS] [HEAD INJURY 4]	NUM	BEST	2.0	2-2	2	SKIPPED	3399	99.9
CE_C19H_YN_4	CE_C19H_YN_4. Did your head injury occur on the job? [HEAD INJURY 4]	NUM	DKREFYN		.S		Skipped	3388	99.6
					1		Yes	1	0.0
					2		No	11	0.3
					8		Don't Know	1	0.0
CE_C19I_YN_4	CE_C19I_YN_4. Did your head injury occur in a motor vehicle accident? [HEAD INJURY 4]	NUM	DKREFYN		.S		Skipped	3388	99.6
					1		Yes	3	0.1
					2		No	9	0.3
					8		Don't Know	1	0.0
CE_C19J_YN_4	CE_C19J_YN_4. Did your head injury occur at work on a farm? [HEAD INJURY 4]	NUM	DKREFYN		.S		Skipped	3388	99.6
					2		No	12	0.4
					8		Don't Know	1	0.0
CE_C19K_YN_4	CE_C19K_YN_4. Did your head injury occur in another way [HEAD INJURY 4]?	NUM	DKREFYN		.S		Skipped	3388	99.6
					1		Yes	10	0.3
					2		No	2	0.1

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						8	Don't Know	1	0.0
CE_C19K_TXT_4	CE_C19K_TXT_4. Did your head injury occur in another way? YES [TEXT: SPECIFY] [HEAD INJURY 4]	CHAR	\$CHAR		.-.				
CE_C19C_5	CE_C19C_5. When did your [FIFTH] head injury with loss of consciousness occur? [HEAD INJURY 5]	NUM	AGETIME		.S		Skipped	3392	99.7
					1		Mm / Yyyy	2	0.1
					2		Age	6	0.2
					9		Refused	1	0.0
CE_C19C_DATE_5	CE_C19C_DATE_5. When did your [FIFTH] head injury with loss of consciousness occur? [DATE: MM/YYYY] [HEAD INJURY 5]	NUM	MMYY5	01/1987	08/1974 -07/1999	2	MISSING	6	0.2
					REFUSE D			1	0.0
					SKIPPE D			3392	99.7
CE_C19C_AGE_5	CE_C19C_AGE_5. When did your [FIFTH] head injury with loss of consciousness occur? [AGE] [HEAD INJURY 5]	NUM	BEST	27.8	15-51	6	MISSING	3	0.1
					SKIPPE D			3392	99.7
CE_C19D_5	CE_C19D_5. Approximately how long were you unconscious? [HEAD INJURY 5]	NUM	LENGTHTIME		.S		Skipped	3392	99.7
					1		< 30 Minutes	5	0.1
					2		>= 30 Minutes	1	0.0
					8		Don't Know	2	0.1
					9		Refused	1	0.0
CE_C19E_YN_5	CE_C19E_YN_5. Did you seek medical treatment for your head injury? [HEAD INJURY 5]	NUM	DKREFYN		.S		Skipped	3392	99.7
					1		Yes	6	0.2
					2		No	2	0.1
					9		Refused	1	0.0
CE_C19F_YN_5	CE_C19F_YN_5. Were you hospitalized overnight as a result of your head injury? [HEAD INJURY 5]	NUM	DKREFYN		.S		Skipped	3392	99.7
					1		Yes	4	0.1
					2		No	4	0.1
					9		Refused	1	0.0

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CE_C19G_NUM_5	CE_C19G_NUM_5. What was the total number of days you spent in the hospital? [UNIT: NUMBER OF DAYS] [HEAD INJURY 5]	NUM	BEST	23.3	1-90	4	SKIPPED	3397	99.9
CE_C19H_YN_5	CE_C19H_YN_5. Did your head injury occur on the job? [HEAD INJURY 5]	NUM	DKREFYN		.S 1 2 8 9		Skipped Yes No Don't Know Refused	3392 1 6 1 1	99.7 0.0 0.2 0.0 0.0
CE_C19I_YN_5	CE_C19I_YN_5. Did your head injury occur in a motor vehicle accident? [HEAD INJURY 5]	NUM	DKREFYN		.S 1 2 9		Skipped Yes No Refused	3392 2 6 1	99.7 0.1 0.2 0.0
CE_C19J_YN_5	CE_C19J_YN_5. Did your head injury occur at work on a farm? [HEAD INJURY 5]	NUM	DKREFYN		.S 2 9		Skipped No Refused	3392 8 1	99.7 0.2 0.0
CE_C19K_YN_5	CE_C19K_YN_5. Did your head injury occur in another way [HEAD INJURY 5]?	NUM	DKREFYN		.S 1 2 9		Skipped Yes No Refused	3392 4 4 1	99.7 0.1 0.1 0.0
CE_C19K_TXT_5	CE_C19K_TXT_5. Did your head injury occur in another way? YES [TEXT: SPECIFY] [HEAD INJURY 5]	CHAR	\$CHAR		.-.				
CE_C20_YN	CE_C20_YN. Have you ever had a concussion?	NUM	DKREFYN		. 1 2 8		Missing Yes No Don't Know	1 490 2818 92	0.0 14.4 82.9 2.7
CE_C20A	CE_C20A. How many times in your life have you had a concussion?	NUM	TIMESNUM		. .S 1 8		Missing Skipped [# Times] Don't Know	1 2910 474 16	0.0 85.6 13.9 0.5
CE_C20A_NUM	CE_C20A_NUM. How many times in your life have you had a concussion? [UNIT: NUMBER OF TIMES]	NUM	BEST	1.8	1-20	474	MISSING	1	0.0

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							DON'T KNOW	16	0.5
							SKIPPE D	2910	85.6
CE_C20B	CE_C20B. How many of these were diagnosed by a health care provider?	NUM	SOMETIME	.			Missing	3	0.1
				.S			Skipped	2910	85.6
				1			[# Of Them]	95	2.8
				2			All Of Them	249	7.3
				3			Some Of Them	1	0.0
				4			Just One	38	1.1
				5			None Of Them	95	2.8
				8			Don't Know	10	0.3
CE_C20B_NUM	CE_C20B_NUM. How many of these were diagnosed by a health care provider? [UNIT: NUMBER OF CONCUSSIONS]	NUM	BEST	1.4	0-5	95	SKIPPED	3306	97.2
CE_C22_YN	CE_C22_YN. Do you usually drink 1 or more beverages containing caffeine a day? Including coffee, energy drinks, regular tea, cola beverages and other sodas ... that have caffeine.	NUM	DKREFYN	.			Missing	1	0.0
				1			Yes	2684	78.9
				2			No	716	21.1
CE_C23_MINUTES_NUM	CE_C23_MINUTES_NUM. How long has it been since you last drank a caffeinated beverage? [UNIT: MINUTES]	NUM	BEST	57671.2	0-262080	3363	MISSING	3	0.1
					00		DON'T KNOW	34	1.0
							REFUSE D	1	0.0
CE_C23_NUM	CE_C23_NUM. How long has it been since you last drank a caffeinated beverage? [COUNT]	NUM	BEST	9.4	0-150	3363	MISSING	3	0.1
							DON'T KNOW	34	1.0
							REFUSE D	1	0.0
CE_C23_UNITS	CE_C23_UNITS. How long has it been since you last drank a caffeinated beverage? [UNITS: MINUTES, HOURS, DAYS, WEEKS, MONTHS, YEARS]	NUM	MINWEEK	.			Missing	3	0.1
				1			Minutes	674	19.8
				2			Hours	1776	52.2
				3			Days	658	19.3

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							Weeks	114	3.4
							Months	86	2.5
							Years	55	1.6
							Don't Know	34	1.0
							Refused	1	0.0
CE_C24	CE_C24. Have you ever smoked cigarettes or used other tobacco products on a daily basis?	NUM	SMOKEA	.			Missing	2	0.1
							No, Never	1133	33.3
							Yes, In The Past, But Not Currently	953	28.0
							Yes, I Currently Use Cigarettes Or Tobacco Products On A Daily Basis	1311	38.5
							Don't Know	2	0.1
CE_C24A_MINUTES_NUM	CE_C24A_MINUTES_NUM. How long has it been you last smoked or used tobacco products? [UNIT: MINUTES]	NUM	BEST	3001338.7	1-33022080	2262	MISSING	2	0.1
							DON'T KNOW	2	0.1
							SKIPPE D	1135	33.4
CE_C24A_NUM	CE_C24A_NUM. How long has it been since you last smoked or used tobacco products? [COUNT]	NUM	BEST	15.8	1-365	2262	MISSING	2	0.1
							DONT KNOW	2	0.1
							SKIPPE D	1135	33.4
CE_C24A_UNITS	CE_C24A_UNITS. How long has it been since you last smoked or used tobacco products? [UNITS: MINUTES, HOURS, DAYS, WEEKS, MONTHS, YEARS]	NUM	MINWEEK	.			Missing	2	0.1
							Skipped	1135	33.4
							Minutes	639	18.8
							Hours	622	18.3
							Days	111	3.3
							Weeks	60	1.8
							Months	109	3.2
							Years	721	21.2
							Don't Know	2	0.1

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VARIABLE NAME	LABEL (VAR)	TYPE	FORMAT	MEAN	RANGE	N	CATEGORY	FREQUENCY	PERCENT
CE_C24B_YN	CE_C24B_YN. Have you ever used an electronic cigarette or e-cigarette, such as NJOY, Blu, or Smoking Everywhere, even one or two times?	NUM	DKREFYN		.		Missing	2	0.1
					1		Yes	573	16.8
					2		No	2821	82.9
					8		Don't Know	5	0.1
CE_C24C	CE_C24C. Do you now use e-cigarettes...	NUM	EVERY		.		Missing	2	0.1
					.S		Skipped	2826	83.1
					1		Every Day	55	1.6
					2		Some Days	73	2.1
					3		Not At All	444	13.1
					8		Don't Know	1	0.0
CE_C24D	CE_C24D. What brand of e-cigarette do/did you use? [PROBE: What company makes the e-cigarette that you usually use/used?]	NUM	DKREFNULL		.		Missing	2	0.1
					.S		Skipped	2826	83.1
					1		Null	287	8.4
					8		Don't Know	285	8.4
					9		Refused	1	0.0
CE_C24D_TXT	CE_C24D_TXT. What brand of e-cigarette do/did you use? [TEXT: SPECIFY]	CHAR	\$CHAR		.-.				
CE_C24E	CE_C24E. About how many disposable e-cigarettes or e-cigarette cartridges have you used in the past year?	NUM	SMOKEQNTY		.		Missing	2	0.1
					.S		Skipped	2826	83.1
					1		None	115	3.4
					2		1 Or More Puffs, But Never A Whole One	155	4.6
					3		1-10	225	6.6
					4		11-20	16	0.5
					5		21-50	14	0.4
					6		51-99	5	0.1
					7		100 Or More	10	0.3
8	Don't Know	33	1.0						
CE_C25_MINUTES_NUM	CE_C25_MINUTES_NUM. How long has it been since you last drank alcohol? [UNIT: MINUTES]	NUM	BEST	968673.9	20-33546	3000	MISSING	1	0.0
					240			DONT KNOW	8

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VARIABLE NAME	LABEL (VAR)	TYPE	FORMAT	MEAN	RANGE	N	CATEGORY	FREQUENCY	PERCENT
							SKIPPE D	392	11.5
CE_C25_NUM	CE_C25_NUM. How long has it been since you last drank alcohol? [COUNT]	NUM	BEST	7.4	1-365	3000	MISSING	1	0.0
							DON'T KNOW	8	0.2
							SKIPPE D	392	11.5
CE_C25_UNITS	CE_C25_UNITS. How long has it been since you last drank alcohol? [UNITS: MINUTES, HOURS, DAYS, WEEKS, MONTHS, YEARS]	NUM	DRNKWEEK		.		Missing	1	0.0
					1		Minutes	4	0.1
					2		Hours	670	19.7
					3		Days	1038	30.5
					4		Weeks	390	11.5
					5		Months	405	11.9
					6		Years	493	14.5
					7		I Don't Drink	392	11.5
					8		Don't Know	8	0.2
CE_C26	CE_C26. During the past 12 months, about how many drinks containing alcohol did you have on a typical weekend?	NUM	DRINNUM		.		Missing	4	0.1
					.S		Skipped	885	26.0
					1		# Of Drinks:	2492	73.3
					8		Don't Know	20	0.6
CE_C26_NUM	CE_C26_NUM. During the past 12 months, about how many drinks containing alcohol did you have on a typical weekend? [UNIT: NUMBER OF DRINKS]	NUM	BEST	4.7	0-86	2492	MISSING	4	0.1
							DON'T KNOW	20	0.6
							SKIPPE D	885	26.0
CE_C27	CE_C27. During the past 12 months, about how many drinks containing alcohol did you have during a typical week?	NUM	DRINNUM		.		Missing	3	0.1
					.S		Skipped	885	26.0
					1		# Of Drinks:	2499	73.5
					8		Don't Know	13	0.4
					9		Refused	1	0.0

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CE_C27_NUM	CE_C27_NUM. During the past 12 months, about how many drinks containing alcohol did you have during a typical week? [UNIT: NUMBER OF DRINKS]	NUM	BEST	3.6	0-144	2499	MISSING	3	0.1
							DONT KNOW	13	0.4
							REFUSE D	1	0.0
							SKIPPE D	885	26.0
CE_C28	CE_C28. During the past 12 months, about how many times did you have 5 or more drinks containing alcohol on one occasion?	NUM	TIMESNUM		.		Missing	5	0.1
					.S		Skipped	885	26.0
					1		[# Times]	2469	72.6
					8		Don't Know	40	1.2
					9		Refused	2	0.1
CE_C28_NUM	CE_C28_NUM. During the past 12 months, about how many times did you have 5 or more drinks containing alcohol on one occasion? [UNIT: NUMBER OF TIMES]	NUM	BEST	10.1	0-365	2469	MISSING	5	0.1
							DONT KNOW	40	1.2
							REFUSE D	2	0.1
							SKIPPE D	885	26.0
CE_C29_YN	CE_C29_YN. Now, please think about your use of alcohol throughout your life. Have you ever sought help to cut back or stop drinking?	NUM	DKREFYN		.		Missing	6	0.2
					.S		Skipped	885	26.0
					1		Yes	227	6.7
					2		No	2283	67.1
CE_C30A_YN	CE_C30A_YN. Have you ever worked with or been exposed to gasoline for 8 hours a week or more in a past job, your present job, at home (i.e. hobbies), or any other locations where you spend time?	NUM	DKREFYN		.		Missing	6	0.2
					1		Yes	881	25.9
					2		No	2503	73.6
					8		Don't Know	11	0.3
CE_C30A_START_YYYY	CE_C30A_START_YYYY. What year did you start being exposed to gasoline? [YEAR: YYYY]	NUM	BEST	1994.4	1942-2016	856	MISSING	6	0.2
							DONT KNOW	25	0.7

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					SKIPPE D			2514	73.9
CE_C30A_STOP_YYYY	CE_C30A_STOP_YYYY. What year did you stop being exposed to gasoline? [YEAR: YYYY]	NUM	BEST	2006.6	1949-2016	739	MISSING	124	3.6
					DONT KNOW			24	0.7
					SKIPPE D			2514	73.9
CE_C30A_TXT	CE_C30A_TXT. Have you ever worked with or been exposed to gasoline for 8 hours a week or more in a past job, your present job, at home (i.e. hobbies), or any other locations where you spend time? Comments/Notes [TEXT: SPECIFY]	CHAR	\$CHAR		.-.				
CE_C30B_YN	CE_C30B_YN. Have you ever worked with or been exposed to paint or lacquer thinner for 8 hours a week or more in a past job, your present job, at home (i.e. hobbies), or any other locations where you spend time?	NUM	DKREFYN		.		Missing	6	0.2
					1		Yes	816	24.0
					2		No	2571	75.6
					8		Don't Know	8	0.2
CE_C30B_START_YYYY	CE_C30B_START_YYYY. What year did you start being exposed to paint or lacquer thinner? [YEAR: YYYY]	NUM	BEST	1996.4	1939-2016	791	MISSING	6	0.2
					DONT KNOW			25	0.7
					SKIPPE D			2579	75.8
CE_C30B_STOP_YYYY	CE_C30B_STOP_YYYY. What year did you stop being exposed to paint or lacquer thinner? [YEAR: YYYY]	NUM	BEST	2006.2	1952-2016	689	MISSING	108	3.2
					DONT KNOW			25	0.7
					SKIPPE D			2579	75.8
CE_C30B_TXT	CE_C30B_TXT. Have you ever worked with or been exposed to paint or lacquer thinner for 8 hours a week or more in a past job, your present job, at home (i.e. hobbies), or any other locations where you spend time? Comments/Notes [TEXT: SPECIFY]	CHAR	\$CHAR		.-.				
CE_C30C_YN	CE_C30C_YN. Have you ever worked with or been exposed to turpentine for 8 hours a week or more in a past job, your present job, at home (i.e. hobbies), or any other locations where you spend time?	NUM	DKREFYN		.		Missing	6	0.2
					1		Yes	209	6.1
					2		No	3156	92.8
					8		Don't Know	30	0.9

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CE_C30C_START_YYYY	CE_C30C_START_YYYY. What year did you start being exposed to turpentine? [YEAR: YYYY]	NUM	BEST	1992.1	1950-2016	196	MISSING	6	0.2
								13	0.4
								3186	93.7
CE_C30C_STOP_YYYY	CE_C30C_STOP_YYYY. What year did you stop being exposed to turpentine? [YEAR: YYYY]	NUM	BEST	2003.9	1958-2016	184	MISSING	18	0.5
								13	0.4
								3186	93.7
CE_C30C_TXT	CE_C30C_TXT. Have you ever worked with or been exposed to turpentine for 8 hours a week or more in a past job, your present job, at home (i.e. hobbies), or any other locations where you spend time? Comments/Notes [TEXT: SPECIFY]	CHAR	\$CHAR		.-.				
CE_C30D_YN	CE_C30D_YN. Have you ever worked with or been exposed to benzene for 8 hours a week or more in a past job, your present job, at home (i.e. hobbies), or any other locations where you spend time?	NUM	DKREFYN		.		Missing	6	0.2
					1		Yes	393	11.6
					2		No	2925	86.0
					8		Don't Know	77	2.3
CE_C30D_START_YYYY	CE_C30D_START_YYYY. What year did you start being exposed to benzene? [YEAR: YYYY]	NUM	BEST	1997.2	1939-2015	386	MISSING	6	0.2
								7	0.2
								3002	88.3
CE_C30D_STOP_YYYY	CE_C30D_STOP_YYYY. What year did you stop being exposed to benzene? [YEAR: YYYY]	NUM	BEST	2006.2	1962-2016	366	MISSING	26	0.8
								7	0.2
								3002	88.3
CE_C30D_TXT	CE_C30D_TXT. Have you ever worked with or been exposed to benzene for 8 hours a week or more in a past job, your present job, at home (i.e. hobbies), or any other locations where you spend time? Comments/Notes [TEXT: SPECIFY]	CHAR	\$CHAR		.-.				

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CE_C30E_YN	CE_C30E_YN. Have you ever worked with or been exposed to toluene for 8 hours a week or more in a past job, your present job, at home (i.e. hobbies), or any other locations where you spend time?	NUM	DKREFYN				Missing	6	0.2
							Yes	186	5.5
							No	3133	92.1
							Don't Know	76	2.2
CE_C30E_START_YYYY	CE_C30E_START_YYYY. What year did you start being exposed to toluene? [YEAR: YYYY]	NUM	BEST	1993.1	1954-2015	182	MISSING	6	0.2
							DON'T KNOW	4	0.1
							SKIPPE D	3209	94.4
CE_C30E_STOP_YYYY	CE_C30E_STOP_YYYY. What year did you stop being exposed to toluene? [YEAR: YYYY]	NUM	BEST	2003.1	1962-2016	170	MISSING	18	0.5
							DON'T KNOW	4	0.1
							SKIPPE D	3209	94.4
CE_C30E_TXT	CE_C30E_TXT. Have you ever worked with or been exposed to toluene for 8 hours a week or more in a past job, your present job, at home (i.e. hobbies), or any other locations where you spend time? Comments/Notes [TEXT: SPECIFY]	CHAR	\$CHAR		..				
CE_C30F_YN	CE_C30F_YN. Have you ever worked with or been exposed to petroleum distillates for 8 hours a week or more in a past job, your present job, at home (i.e. hobbies), or any other locations where you spend time?	NUM	DKREFYN				Missing	6	0.2
							Yes	460	13.5
							No	2851	83.8
							Don't Know	84	2.5
CE_C30F_START_YYYY	CE_C30F_START_YYYY. What year did you start being exposed to petroleum distillates? [YEAR: YYYY]	NUM	BEST	1996.6	1952-2015	452	MISSING	6	0.2
							DON'T KNOW	8	0.2
							SKIPPE D	2935	86.3
CE_C30F_STOP_YYYY	CE_C30F_STOP_YYYY. What year did you stop being exposed to petroleum distillates? [YEAR: YYYY]	NUM	BEST	2007.0	1962-2016	413	MISSING	45	1.3
							DON'T KNOW	8	0.2

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					SKIPPE D			2935	86.3
CE_C30F_TXT	CE_C30F_TXT. Have you ever worked with or been exposed to petroleum distillates for 8 hours a week or more in a past job, your present job, at home (i.e. hobbies), or any other locations where you spend time? Comments/Notes [TEXT: SPECIFY]	CHAR	\$CHAR		.-.				
CE_C30G_YN	CE_C30G_YN. Have you ever worked with or been exposed to welding fumes for 8 hours a week or more in a past job, your present job, at home (i.e. hobbies), or any other locations where you spend time?	NUM	DKREFYN		.		Missing	6	0.2
					1		Yes	823	24.2
					2		No	2564	75.4
					8		Don't Know	8	0.2
CE_C30G_START_YYYY	CE_C30G_START_YYYY. What year did you start being exposed to welding fumes? [YEAR: YYYY]	NUM	BEST	1995.0	1952-2016	802	MISSING	6	0.2
					DON'T KNOW			21	0.6
					SKIPPE D			2572	75.6
CE_C30G_STOP_YYYY	CE_C30G_STOP_YYYY. What year did you stop being exposed to welding fumes? [YEAR: YYYY]	NUM	BEST	2005.1	1957-2016	719	MISSING	90	2.6
					DON'T KNOW			20	0.6
					SKIPPE D			2572	75.6
CE_C30G_TXT	CE_C30G_TXT. Have you ever worked with or been exposed to welding fumes for 8 hours a week or more in a past job, your present job, at home (i.e. hobbies), or any other locations where you spend time? Comments/Notes [TEXT: SPECIFY]	CHAR	\$CHAR		.-.				
CE_C30H_YN	CE_C30H_YN. Have you ever worked with or been exposed to soldering products for 8 hours a week or more in a past job, your present job, at home (i.e. hobbies), or any other locations where you spend time?	NUM	DKREFYN		.		Missing	6	0.2
					1		Yes	287	8.4
					2		No	3097	91.1
					8		Don't Know	11	0.3
CE_C30H_START_YYYY	CE_C30H_START_YYYY. What year did you start being exposed to soldering products? [YEAR: YYYY]	NUM	BEST	1995.0	1954-2016	274	MISSING	6	0.2
					DON'T KNOW			13	0.4
					SKIPPE D			3108	91.4

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VARIABLE NAME	LABEL (VAR)	TYPE	FORMAT	MEAN	RANGE	N	CATEGORY	FREQUENCY	PERCENT
CE_C30H_STOP_YYYY	CE_C30H_STOP_YYYY. What year did you stop being exposed to soldering products? [YEAR: YYYY]	NUM	BEST	2005.8	1962-2016	239	MISSING	41	1.2
							DONT KNOW	13	0.4
							SKIPPE D	3108	91.4
CE_C30H_TXT	CE_C30H_TXT. Have you ever worked with or been exposed to soldering products for 8 hours a week or more in a past job, your present job, at home (i.e. hobbies), or any other locations where you spend time? Comments/Notes [TEXT: SPECIFY]	CHAR	\$CHAR		.-.				
CE_C30I_YN	CE_C30I_YN. Have you ever worked with or been exposed to pesticides for 8 hours a week or more in a past job, your present job, at home (i.e. hobbies), or any other locations where you spend time?	NUM	DKREFYN		.		Missing	6	0.2
							Yes	187	5.5
							No	3204	94.2
							Don't Know	4	0.1
CE_C30I_START_YYYY	CE_C30I_START_YYYY. What year did you start being exposed to pesticides? [YEAR: YYYY]	NUM	BEST	1995.2	1958-2015	180	MISSING	6	0.2
							DONT KNOW	7	0.2
							SKIPPE D	3208	94.3
CE_C30I_STOP_YYYY	CE_C30I_STOP_YYYY. What year did you stop being exposed to pesticides? [YEAR: YYYY]	NUM	BEST	2004.1	1968-2016	156	MISSING	30	0.9
							DONT KNOW	7	0.2
							SKIPPE D	3208	94.3
CE_C30I_TXT	CE_C30I_TXT. Have you ever worked with or been exposed to pesticides for 8 hours a week or more in a past job, your present job, at home (i.e. hobbies), or any other locations where you spend time? Comments/Notes [TEXT: SPECIFY]	CHAR	\$CHAR		.-.				
CE_C31	CE_C31. Around what time did you fall asleep last night? [UNITS: AM, PM]	NUM	AMPM		.		Missing	1	0.0
							Am	978	28.8
							Pm	2382	70.0
							Don't Know	38	1.1
							Refused	2	0.1

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VARIABLE NAME	LABEL (VAR)	TYPE	FORMAT	MEAN	RANGE	N	CATEGORY	FREQUENCY	PERCENT
CE_C31_TIME	CE_C31_TIME. Around what time did you fall asleep last night? [TIME: HH:MM (00:00-23:59)]	NUM	TIME	15:58	0:00-23:45	3360	MISSING	1	0.0
					DONT KNOW			38	1.1
					REFUSE D			2	0.1
CE_C32	CE_C32. What time do you usually wake up? [UNITS: AM, PM]	NUM	AMPM		.		Missing	1	0.0
					1		Am	3296	96.9
					2		Pm	68	2.0
					8		Don't Know	35	1.0
					9		Refused	1	0.0
CE_C32_TIME	CE_C32_TIME. What time do you usually wake up? [TIME: HH:MM (00:00-23:59)]	NUM	TIME	6:10	0:00-23:30	3364	MISSING	1	0.0
					DONT KNOW			35	1.0
					REFUSE D			1	0.0
CE_C33	CE_C33. What time did you wake up today? [UNITS: AM, PM]	NUM	AMPM		.		Missing	2	0.1
					1		Am	3357	98.7
					2		Pm	7	0.2
					8		Don't Know	32	0.9
					9		Refused	3	0.1
CE_C33_TIME	CE_C33_TIME. What time did you wake up today? [TIME: HH:MM (00:00-23:59)]	NUM	TIME	6:00	0:00-23:30	3364	MISSING	2	0.1
					DONT KNOW			32	0.9
					REFUSE D			3	0.1
CE_C34	CE_C34. How many times did you wake up last night?	NUM	TIMESNUM		.		Missing	2	0.1
					1		[# Times]	3363	98.9
					8		Don't Know	33	1.0
					9		Refused	3	0.1
CE_C34_NUM	CE_C34_NUM. How many times did you wake up last night? [UNIT: NUMBER OF TIMES]	NUM	BEST	1.5	0-15	3363	MISSING	2	0.1

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VARIABLE NAME	LABEL (VAR)	TYPE	FORMAT	MEAN	RANGE	N	CATEGORY	FREQUENCY	PERCENT
					DONT KNOW			33	1.0
					REFUSE D			3	0.1
CE_C35	CE_C35. How much sleep did you get last night? Would you say...?	NUM	USUAL		.		Missing	2	0.1
					1		About The Usual Amount	2131	62.7
					2		Less Than Usual	937	27.6
					3		More Than Usual	324	9.5
					8		Don't Know	7	0.2
CE_C36	CE_C36. How many hours and minutes of sleep did you get last night?	NUM	TIMEHRSMIN		.		Missing	1	0.0
					1		[hh:mm]	3378	99.3
					8		Don't Know	21	0.6
					9		Refused	1	0.0
CE_C36_TIME	CE_C36_TIME. How many hours and minutes of sleep did you get last night? [TIME: HH:MM]	NUM	TIME	6:19	0:00-15:00	3378	MISSING	1	0.0
					DONT KNOW			21	0.6
					REFUSE D			1	0.0
CE_C37	CE_C37. How many hours and minutes of sleep do you usually get a night?	NUM	TIMEHRSMIN		.		Missing	1	0.0
					1		[hh:mm]	3381	99.4
					8		Don't Know	19	0.6
CE_C37_TIME	CE_C37_TIME. How many hours and minutes of sleep do you usually get a night? [TIME: HH:MM]	NUM	TIME	6:46	0:00-16:00	3381	MISSING	1	0.0
					DONT KNOW			19	0.6
CE_C38_YN	CE_C38_YN. Since 2010, have you used hair dye to color your hair?	NUM	DKREFYN		1		Yes	692	20.3
					2		No	2707	79.6
					8		Don't Know	2	0.1
CE_C39_1_YN	CE_C39_1_YN. In what years did you do this? (SELECT ALL THAT APPLY) 2010	NUM	NYREFDK		.		Missing	7	0.2
					.S		Skipped	2707	79.6
					0		No	260	7.6
					1		Yes	422	12.4

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VARIABLE NAME	LABEL (VAR)	TYPE	FORMAT	MEAN	RANGE	N	CATEGORY	FREQUENCY	PERCENT
					8		Don't Know	5	0.1
CE_C39_2_YN	CE_C39_2_YN. In what years did you do this? (SELECT ALL THAT APPLY) 2011	NUM	NYREFDK		.		Missing	7	0.2
					.S		Skipped	2707	79.6
					0		No	239	7.0
					1		Yes	443	13.0
					8		Don't Know	5	0.1
CE_C39_3_YN	CE_C39_3_YN. In what years did you do this? (SELECT ALL THAT APPLY) 2012	NUM	NYREFDK		.		Missing	7	0.2
					.S		Skipped	2707	79.6
					0		No	216	6.4
					1		Yes	466	13.7
					8		Don't Know	5	0.1
CE_C39_4_YN	CE_C39_4_YN. In what years did you do this? (SELECT ALL THAT APPLY) 2013	NUM	NYREFDK		.		Missing	7	0.2
					.S		Skipped	2707	79.6
					0		No	191	5.6
					1		Yes	491	14.4
					8		Don't Know	5	0.1
CE_C39_5_YN	CE_C39_5_YN. In what years did you do this? (SELECT ALL THAT APPLY) 2014	NUM	NYREFDK		.		Missing	7	0.2
					.S		Skipped	2707	79.6
					0		No	178	5.2
					1		Yes	504	14.8
					8		Don't Know	5	0.1
CE_C39_6_YN	CE_C39_6_YN. In what years did you do this? (SELECT ALL THAT APPLY) 2015	NUM	NYREFDK		.		Missing	7	0.2
					.S		Skipped	2707	79.6
					0		No	269	7.9
					1		Yes	413	12.1
					8		Don't Know	5	0.1
CE_C40	CE_C40. In what month and year did you last dye your hair?	NUM	DTFORM_CE		.		Missing	2	0.1
					.S		Skipped	2707	79.6
					1		Mm/Yyyy	660	19.4
					8		Don't Know	32	0.9

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VARIABLE NAME	LABEL (VAR)	TYPE	FORMAT	MEAN	RANGE	N	CATEGORY	FREQUENCY	PERCENT	
CE_C40_DATE	CE_C40_DATE. In what month and year did you last dye your hair? [DATE: MM/YYYY]	NUM	MMYYSS	11/2014	03/2010 -06/2016	660	MISSING	2	0.1	
							DONT KNOW	32	0.9	
							SKIPPE D	2707	79.6	
CE_C41	CE_C41. What color do/did you usually use?	NUM	HAIRCOLORB				Missing	2	0.1	
							.S	Skipped	2707	79.6
							1	Black	211	6.2
							2	Light Brown	54	1.6
							3	Medium Brown	87	2.6
							4	Dark Brown	55	1.6
							5	Light Blond	117	3.4
							6	Dark Blond	56	1.6
							7	Light Red	21	0.6
							8	Dark Red	27	0.8
9	Other	54	1.6							
88	Don't Know	10	0.3							
CE_C42	CE_C42. What type of hair dye do you use most often?	NUM	DYEHAIR				Missing	2	0.1	
							.S	Skipped	2707	79.6
							1	Temporary Dyes (Wash Out With A Few Shampoos)	121	3.6
							2	Semi-Permanent Dyes	176	5.2
							3	Demi-Permanent Dyes	20	0.6
							4	Permanent Dyes	351	10.3
8	Don't Know	24	0.7							
CE_C43	CE_C43. In the past two weeks (14 days), about how often have you used an anti-dandruff shampoo, conditioner, or other hair or scalp treatment?	NUM	TIMEPERWEEK				Missing	1	0.0	
							.S	Skipped	267	7.9
							1	None	2410	70.9
							2	Once Or Twice	190	5.6
							3	1-2 Times A Week	146	4.3
							4	3-4 Times A Week	118	3.5
5	5-6 Times A Week	39	1.1							
6	Every Day	225	6.6							

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					8		Don't Know	5	0.1
CE_C44_NUM	CE_C44_NUM. How long has it been since you last used an anti-dandruff shampoo, conditioner, or other hair or scalp treatment? [COUNT]	NUM	BEST	5.2	0-48	701	MISSING	8	0.2
					DONT KNOW			10	0.3
					SKIPPE D			2682	78.9
CE_C44_UNITS	CE_C44_UNITS. How long has it been since you last used an anti-dandruff shampoo, conditioner, or other hair or scalp treatment? [UNITS: HOURS, DAYS, WEEKS]	NUM	DYHRWK		.		Missing	1	0.0
					.S		Skipped	2682	78.9
					1		Hours	314	9.2
					2		Days	286	8.4
					3		Weeks	108	3.2
					8		Don't Know	10	0.3
CE_C45_TXT	CE_C45_TXT. In the past two weeks, what brands have you used? [TEXT: SPECIFY]	CHAR	\$CHAR		.-.				

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VARIABLE NAME	LABEL (VAR)	TYPE	FORMAT	MEAN	RANGE	N	CATEGORY	FREQUENCY	PERCENT
GULFID	Gulf ID	CHAR	\$.-				
CE_C21A_TXT_1	CE_C21A_TXT_1. What is the name of the prescription or over-the-counter medication? [1]	CHAR	\$CHAR		.-				
CE_C21B_TXT_1	CE_C21B_TXT_1. What is the reason you take this? [1]	CHAR	\$CHAR		.-				
CE_C21C_NUM_1	CE_C21C_NUM_1. What is the dosage? [COUNT] [1]	NUM	BEST	177.4	1-5000	1820	MISSING	3	0.1
					DON'T KNOW			435	12.8
					REFUSE D			13	0.4
					SKIPPE D			1130	33.2
CE_C21D_UNITS_1	CE_C21D_UNITS_1. What is the dosage unit? [UNITS: IU, Mcg, mL, g, tbsp, tsp, OTHER] [1]	NUM	DOSEUNIT		.		Missing	3	0.1
					.S		Skipped	1130	33.2
					3		Other	232	6.8
					4		Don't Know	224	6.6
					119		Mg	1681	49.4
					120		Iu	30	0.9
					121		Mcg	82	2.4
					122		MI	8	0.2
					123		G	4	0.1
					124		Tbsp	6	0.2
					125		Tsp	1	0.0
CE_C21E_TXT_1	CE_C21E_TXT_1. What is the dosage unit? OTHER [TEXT: SPECIFY] [1]	CHAR	\$CHAR		.-				
CE_C21F_1	CE_C21F_1. How often do you take this? [1]	NUM	MEDSPERWEEK		.		Missing	3	0.1
					.S		Skipped	1130	33.2
					4		Don't Know	5	0.1
					110		Once A Month Or Less	52	1.5
					418		Less Than Once A Week	30	0.9
					419		Once A Week	35	1.0
					421		2-3 Days A Week	178	5.2
					422		4-5 Days A Week	98	2.9
					423		6-7 Days A Week	1870	55.0

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VARIABLE NAME	LABEL (VAR)	TYPE	FORMAT	MEAN	RANGE	N	CATEGORY	FREQUENCY	PERCENT
CE_C21G_1	CE_C21G_1. On days when you take it, how many times do you take it? [UNIT: NUMBER OF TIMES PER DAY] [1]	NUM	MEDSPERDAY		.		Missing	3	0.1
					.S		Skipped	1130	33.2
					4		Don't Know	11	0.3
					424		1 Time Per Day	1703	50.1
					425		2 Times Per Day	401	11.8
					426		3 Times Per Day	111	3.3
					427		4 Times Per Day	35	1.0
					428		5 Or More Times Per Day	7	0.2
CE_C21H_MM_1	CE_C21H_MM_1. When did you start taking this? [MONTH: MM] [1]	NUM	BEST	5.7	1-12	1871	MISSING	179	5.3
					DON'T KNOW			215	6.3
					REFUSE D			6	0.2
					SKIPPE D			1130	33.2
CE_C21H_YYYY_1	CE_C21H_YYYY_1. When did you start taking this? [YEAR: YYYY] [1]	NUM	BEST	2010.4	1964-2016	2047	MISSING	3	0.1
					DON'T KNOW			215	6.3
					REFUSE D			6	0.2
					SKIPPE D			1130	33.2
CE_C21A_TXT_2	CE_C21A_TXT_2. What is the name of the prescription or over-the-counter medication? [2]	CHAR	\$CHAR		.-.				
CE_C21B_TXT_2	CE_C21B_TXT_2. What is the reason you take this? [2]	CHAR	\$CHAR		.-.				
CE_C21C_NUM_2	CE_C21C_NUM_2. What is the dosage? [COUNT] [2]	NUM	BEST	179.1	1-5000	1439	MISSING	3	0.1
					DON'T KNOW			346	10.2
					REFUSE D			13	0.4
					SKIPPE D			1600	47.0
CE_C21D_UNITS_2	CE_C21D_UNITS_2. What is the dosage unit? [UNITS: IU, Mcg, mL, g, tbsp, tsp, OTHER] [2]	NUM	DOSEUNIT		.		Missing	3	0.1

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VARIABLE NAME	LABEL (VAR)	TYPE	FORMAT	MEAN	RANGE	N	CATEGORY	FREQUENCY	PERCENT
					.S		Skipped	1600	47.0
					3		Other	211	6.2
					4		Don't Know	161	4.7
					119		Mg	1329	39.1
					120		Iu	30	0.9
					121		Mcg	48	1.4
					122		MI	9	0.3
					123		G	6	0.2
					124		Tbsp	2	0.1
					125		Tsp	2	0.1
CE_C21E_TXT_2	CE_C21E_TXT_2. What is the dosage unit? OTHER [TEXT: SPECIFY] [2]	CHAR	\$CHAR		.-.				
CE_C21F_2	CE_C21F_2. How often do you take this? [2]	NUM	MEDSPERWEEK		.		Missing	3	0.1
					.S		Skipped	1600	47.0
					4		Don't Know	7	0.2
					110		Once A Month Or Less	30	0.9
					418		Less Than Once A Week	40	1.2
					419		Once A Week	24	0.7
					421		2-3 Days A Week	108	3.2
					422		4-5 Days A Week	66	1.9
					423		6-7 Days A Week	1523	44.8
CE_C21G_2	CE_C21G_2. On days when you take it, how many times do you take it? [UNIT: NUMBER OF TIMES PER DAY] [2]	NUM	MEDSPERDAY		.		Missing	3	0.1
					.S		Skipped	1600	47.0
					4		Don't Know	6	0.2
					424		1 Time Per Day	1415	41.6
					425		2 Times Per Day	271	8.0
					426		3 Times Per Day	78	2.3
					427		4 Times Per Day	22	0.6
					428		5 Or More Times Per Day	6	0.2
CE_C21H_MM_2	CE_C21H_MM_2. When did you start taking this? [MONTH: MM] [2]	NUM	BEST	5.6	1-12	1455	MISSING	160	4.7
					DON'T KNOW			183	5.4

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VARIABLE NAME	LABEL (VAR)	TYPE	FORMAT	MEAN	RANGE	N	CATEGORY	FREQUENCY	PERCENT
					REFUSE D			3	0.1
					SKIPPE D			1600	47.0
CE_C21H_YYYY_2	CE_C21H_YYYY_2. When did you start taking this? [YEAR: YYYY] [2]	NUM	BEST	2010.3	1964-2016	1612	MISSING	3	0.1
					DON'T KNOW			183	5.4
					REFUSE D			3	0.1
					SKIPPE D			1600	47.0
CE_C21A_TXT_3	CE_C21A_TXT_3. What is the name of the prescription or over-the-counter medication? [3]	CHAR	\$CHAR		.-.				
CE_C21B_TXT_3	CE_C21B_TXT_3. What is the reason you take this? [3]	CHAR	\$CHAR		.-.				
CE_C21C_NUM_3	CE_C21C_NUM_3. What is the dosage? [COUNT] [3]	NUM	BEST	200.8	1-5000	1184	MISSING	3	0.1
					DON'T KNOW			239	7.0
					REFUSE D			5	0.1
					SKIPPE D			1970	57.9
CE_C21D_UNITS_3	CE_C21D_UNITS_3. What is the dosage unit? [UNITS: IU, Mcg, mL, g, tbsp, tsp, OTHER] [3]	NUM	DOSEUNIT		.		Missing	3	0.1
					.S		Skipped	1970	57.9
					3		Other	147	4.3
					4		Don't Know	106	3.1
					119		Mg	1093	32.1
					120		Iu	18	0.5
					121		Mcg	51	1.5
					122		MI	8	0.2
					123		G	2	0.1
					124		Tbsp	2	0.1
					125		Tsp	1	0.0
CE_C21E_TXT_3	CE_C21E_TXT_3. What is the dosage unit? OTHER [TEXT: SPECIFY] [3]	CHAR	\$CHAR		.-.				

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VARIABLE NAME	LABEL (VAR)	TYPE	FORMAT	MEAN	RANGE	N	CATEGORY	FREQUENCY	PERCENT
CE_C21F_3	CE_C21F_3. How often do you take this? [3]	NUM	MEDSPERWEEK		.		Missing	3	0.1
					.S		Skipped	1970	57.9
					4		Don't Know	7	0.2
					5		Refused	1	0.0
					110		Once A Month Or Less	29	0.9
					418		Less Than Once A Week	25	0.7
					419		Once A Week	21	0.6
					421		2-3 Days A Week	81	2.4
					422		4-5 Days A Week	44	1.3
					423		6-7 Days A Week	1220	35.9
CE_C21G_3	CE_C21G_3. On days when you take it, how many times do you take it? [UNIT: NUMBER OF TIMES PER DAY] [3]	NUM	MEDSPERDAY		.		Missing	3	0.1
					.S		Skipped	1970	57.9
					4		Don't Know	9	0.3
					5		Refused	1	0.0
					424		1 Time Per Day	1106	32.5
					425		2 Times Per Day	230	6.8
					426		3 Times Per Day	62	1.8
					427		4 Times Per Day	17	0.5
					428		5 Or More Times Per Day	3	0.1
CE_C21H_MM_3	CE_C21H_MM_3. When did you start taking this? [MONTH: MM] [3]	NUM	BEST	5.5	1-12	1136	MISSING	128	3.8
					DON'T KNOW			163	4.8
					REFUSED			4	0.1
					SKIPPE D			1970	57.9
CE_C21H_YYYY_3	CE_C21H_YYYY_3. When did you start taking this? [YEAR: YYYY] [3]	NUM	BEST	2010.4	1957-2016	1261	MISSING	3	0.1
					DON'T KNOW			163	4.8
					REFUSED			4	0.1
					SKIPPE D			1970	57.9

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VARIABLE NAME	LABEL (VAR)	TYPE	FORMAT	MEAN	RANGE	N	CATEGORY	FREQUENCY	PERCENT
CE_C21A_TXT_4	CE_C21A_TXT_4. What is the name of the prescription or over-the-counter medication? [4]	CHAR	\$CHAR		.-				
CE_C21B_TXT_4	CE_C21B_TXT_4. What is the reason you take this? [4]	CHAR	\$CHAR		.-				
CE_C21C_NUM_4	CE_C21C_NUM_4. What is the dosage? [COUNT] [4]	NUM	BEST	197.3	1-5000	951	MISSING	3	0.1
					DON'T KNOW			199	5.9
					REFUSE D			3	0.1
					SKIPPE D			2245	66.0
CE_C21D_UNITS_4	CE_C21D_UNITS_4. What is the dosage unit? [UNITS: IU, Mcg, mL, g, tbsp, tsp, OTHER] [4]	NUM	DOSEUNIT		.		Missing	3	0.1
					.S		Skipped	2245	66.0
					3		Other	121	3.6
					4		Don't Know	92	2.7
					119		Mg	876	25.8
					120		Iu	19	0.6
					121		Mcg	37	1.1
					122		ML	5	0.1
					123		G	1	0.0
					124		Tbsp	1	0.0
					125		Tsp	1	0.0
CE_C21E_TXT_4	CE_C21E_TXT_4. What is the dosage unit? OTHER [TEXT: SPECIFY] [4]	CHAR	\$CHAR		.-				
CE_C21F_4	CE_C21F_4. How often do you take this? [4]	NUM	MEDSPERWEEK		.		Missing	3	0.1
					.S		Skipped	2245	66.0
					4		Don't Know	3	0.1
					5		Refused	1	0.0
					110		Once A Month Or Less	27	0.8
					418		Less Than Once A Week	36	1.1
					419		Once A Week	13	0.4
					421		2-3 Days A Week	69	2.0
					422		4-5 Days A Week	18	0.5
					423		6-7 Days A Week	986	29.0

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VARIABLE NAME	LABEL (VAR)	TYPE	FORMAT	MEAN	RANGE	N	CATEGORY	FREQUENCY	PERCENT	
CE_C21G_4	CE_C21G_4. On days when you take it, how many times do you take it? [UNIT: NUMBER OF TIMES PER DAY] [4]	NUM	MEDSPERDAY		.	906	Missing	3	0.1	
					.S		Skipped	2245	66.0	
					4		Don't Know	4	0.1	
					424		1 Time Per Day	899	26.4	
					425		2 Times Per Day	168	4.9	
					426		3 Times Per Day	67	2.0	
					427		4 Times Per Day	12	0.4	
				428	5 Or More Times Per Day	3	0.1			
CE_C21H_MM_4	CE_C21H_MM_4. When did you start taking this? [MONTH: MM] [4]	NUM	BEST	5.6	1-12	906	MISSING	105	3.1	
								DON'T KNOW	143	4.2
								REFUSE D	2	0.1
								SKIPPE D	2245	66.0
CE_C21H_YYYY_4	CE_C21H_YYYY_4. When did you start taking this? [YEAR: YYYY] [4]	NUM	BEST	2010.0	1964-2016	1008	MISSING	3	0.1	
								DON'T KNOW	143	4.2
								REFUSE D	2	0.1
								SKIPPE D	2245	66.0
CE_C21A_TXT_5	CE_C21A_TXT_5. What is the name of the prescription or over-the-counter medication? [5]	CHAR	\$CHAR		.-.					
CE_C21B_TXT_5	CE_C21B_TXT_5. What is the reason you take this? [5]	CHAR	\$CHAR		.-.					
CE_C21C_NUM_5	CE_C21C_NUM_5. What is the dosage? [COUNT] [5]	NUM	BEST	236.0	1-8500	757	MISSING	3	0.1	
								DON'T KNOW	152	4.5
								REFUSE D	3	0.1
								SKIPPE D	2486	73.1
CE_C21D_UNITS_5	CE_C21D_UNITS_5. What is the dosage unit? [UNITS: IU, Mcg, mL, g, tbsp, tsp, OTHER] [5]	NUM	DOSEUNIT		.		Missing	3	0.1	

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VARIABLE NAME	LABEL (VAR)	TYPE	FORMAT	MEAN	RANGE	N	CATEGORY	FREQUENCY	PERCENT
					.S		Skipped	2486	73.1
					3		Other	114	3.4
					4		Don't Know	68	2.0
					119		Mg	672	19.8
					120		Iu	13	0.4
					121		Mcg	33	1.0
					122		MI	4	0.1
					123		G	5	0.1
					124		Tbsp	2	0.1
					125		Tsp	1	0.0
CE_C21E_TXT_5	CE_C21E_TXT_5. What is the dosage unit? OTHER [TEXT: SPECIFY] [5]	CHAR	\$CHAR		.-.				
CE_C21F_5	CE_C21F_5. How often do you take this? [5]	NUM	MEDSPERWEEK		.		Missing	3	0.1
					.S		Skipped	2486	73.1
					4		Don't Know	1	0.0
					110		Once A Month Or Less	22	0.6
					418		Less Than Once A Week	20	0.6
					419		Once A Week	19	0.6
					421		2-3 Days A Week	46	1.4
					422		4-5 Days A Week	23	0.7
					423		6-7 Days A Week	781	23.0
CE_C21G_5	CE_C21G_5. On days when you take it, how many times do you take it? [UNIT: NUMBER OF TIMES PER DAY] [5]	NUM	MEDSPERDAY		.		Missing	3	0.1
					.S		Skipped	2486	73.1
					4		Don't Know	2	0.1
					424		1 Time Per Day	718	21.1
					425		2 Times Per Day	140	4.1
					426		3 Times Per Day	36	1.1
					427		4 Times Per Day	13	0.4
					428		5 Or More Times Per Day	3	0.1
CE_C21H_MM_5	CE_C21H_MM_5. When did you start taking this? [MONTH: MM] [5]	NUM	BEST	5.5	1-12	707	MISSING	89	2.6
					DON'T KNOW			119	3.5

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VARIABLE NAME	LABEL (VAR)	TYPE	FORMAT	MEAN	RANGE	N	CATEGORY	FREQUENCY	PERCENT
					SKIPPE D			2486	73.1
CE_C21H_YYYY_5	CE_C21H_YYYY_5. When did you start taking this? [YEAR: YYYY] [5]	NUM	BEST	2010.2	1970-201 6	793	MISSING	3	0.1
					DONT KNOW			119	3.5
					SKIPPE D			2486	73.1
CE_C21A_TXT_6	CE_C21A_TXT_6. What is the name of the prescription or over-the-counter medication? [6]	CHAR	\$CHAR		.-.				
CE_C21B_TXT_6	CE_C21B_TXT_6. What is the reason you take this? [6]	CHAR	\$CHAR		.-.				
CE_C21C_NUM_6	CE_C21C_NUM_6. What is the dosage? [COUNT] [6]	NUM	BEST	206.8	1-4000	579	MISSING	3	0.1
					DONT KNOW			140	4.1
					REFUSE D			3	0.1
					SKIPPE D			2676	78.7
CE_C21D_UNITS_6	CE_C21D_UNITS_6. What is the dosage unit? [UNITS: IU, Mcg, mL, g, tbsp, tsp, OTHER] [6]	NUM	DOSEUNIT		.		Missing	3	0.1
					.S		Skipped	2676	78.7
					3		Other	97	2.9
					4		Don't Know	64	1.9
					119		Mg	516	15.2
					120		Iu	11	0.3
					121		Mcg	28	0.8
					122		ML	2	0.1
					123		G	2	0.1
					125		Tsp	2	0.1
CE_C21E_TXT_6	CE_C21E_TXT_6. What is the dosage unit? OTHER [TEXT: SPECIFY] [6]	CHAR	\$CHAR		.-.				
CE_C21F_6	CE_C21F_6. How often do you take this? [6]	NUM	MEDSPERWEEK		.		Missing	3	0.1
					.S		Skipped	2676	78.7
					4		Don't Know	2	0.1
					5		Refused	1	0.0

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VARIABLE NAME	LABEL (VAR)	TYPE	FORMAT	MEAN	RANGE	N	CATEGORY	FREQUENCY	PERCENT
							Once A Month Or Less	6	0.2
							Less Than Once A Week	23	0.7
							Once A Week	11	0.3
							2-3 Days A Week	35	1.0
							4-5 Days A Week	19	0.6
							6-7 Days A Week	625	18.4
CE_C21G_6	CE_C21G_6. On days when you take it, how many times do you take it? [UNIT: NUMBER OF TIMES PER DAY] [6]	NUM	MEDSPERDAY	.			Missing	3	0.1
				.S			Skipped	2676	78.7
				4			Don't Know	4	0.1
				5			Refused	1	0.0
				424			1 Time Per Day	560	16.5
				425			2 Times Per Day	108	3.2
				426			3 Times Per Day	34	1.0
				427			4 Times Per Day	12	0.4
				428			5 Or More Times Per Day	3	0.1
CE_C21H_MM_6	CE_C21H_MM_6. When did you start taking this? [MONTH: MM] [6]	NUM	BEST	5.3	1-12	567	MISSING	62	1.8
							DON'T KNOW	94	2.8
							REFUSE D	2	0.1
							SKIPPE D	2676	78.7
CE_C21H_YYYY_6	CE_C21H_YYYY_6. When did you start taking this? [YEAR: YYYY] [6]	NUM	BEST	2010.2	1973-2016	626	MISSING	3	0.1
							DON'T KNOW	94	2.8
							REFUSE D	2	0.1
							SKIPPE D	2676	78.7
CE_C21A_TXT_7	CE_C21A_TXT_7. What is the name of the prescription or over-the-counter medication? [7]	CHAR	\$CHAR		.-.				
CE_C21B_TXT_7	CE_C21B_TXT_7. What is the reason you take this? [7]	CHAR	\$CHAR		.-.				
CE_C21C_NUM_7	CE_C21C_NUM_7. What is the dosage? [COUNT] [7]	NUM	BEST	277.6	1-8887	470	MISSING	3	0.1

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VARIABLE NAME	LABEL (VAR)	TYPE	FORMAT	MEAN	RANGE	N	CATEGORY	FREQUENCY	PERCENT
					DONT KNOW			96	2.8
					REFUSE D			1	0.0
					SKIPPE D			2831	83.2
CE_C21D_UNITS_7	CE_C21D_UNITS_7. What is the dosage unit? [UNITS: IU, Mcg, mL, g, tbsp, tsp, OTHER] [7]	NUM	DOSEUNIT	.			Missing	3	0.1
				.S			Skipped	2831	83.2
				3			Other	65	1.9
				4			Don't Know	53	1.6
				119			Mg	398	11.7
				120			Iu	13	0.4
				121			Mcg	29	0.9
				122			MI	5	0.1
				123			G	2	0.1
				125			Tsp	2	0.1
CE_C21E_TXT_7	CE_C21E_TXT_7. What is the dosage unit? OTHER [TEXT: SPECIFY] [7]	CHAR	\$CHAR	.-.					
CE_C21F_7	CE_C21F_7. How often do you take this? [7]	NUM	MEDSPERWEEK	.			Missing	3	0.1
				.S			Skipped	2831	83.2
				4			Don't Know	2	0.1
				110			Once A Month Or Less	13	0.4
				418			Less Than Once A Week	10	0.3
				419			Once A Week	8	0.2
				421			2-3 Days A Week	24	0.7
				422			4-5 Days A Week	17	0.5
				423			6-7 Days A Week	493	14.5
CE_C21G_7	CE_C21G_7. On days when you take it, how many times do you take it? [UNIT: NUMBER OF TIMES PER DAY] [7]	NUM	MEDSPERDAY	.			Missing	3	0.1
				.S			Skipped	2831	83.2
				4			Don't Know	3	0.1
				424			1 Time Per Day	442	13.0
				425			2 Times Per Day	89	2.6
				426			3 Times Per Day	27	0.8

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					427		4 Times Per Day	4	0.1
					428		5 Or More Times Per Day	2	0.1
CE_C21H_MM_7	CE_C21H_MM_7. When did you start taking this? [MONTH: MM] [7]	NUM	BEST	5.4	1-12	439	MISSING	52	1.5
					DONT KNOW			78	2.3
					REFUSE D			1	0.0
					SKIPPE D			2831	83.2
CE_C21H_YYYY_7	CE_C21H_YYYY_7. When did you start taking this? [YEAR: YYYY] [7]	NUM	BEST	2010.3	1959-2016	488	MISSING	3	0.1
					DONT KNOW			78	2.3
					REFUSE D			1	0.0
					SKIPPE D			2831	83.2
CE_C21A_TXT_8	CE_C21A_TXT_8. What is the name of the prescription or over-the-counter medication? [8]	CHAR	\$CHAR		.-.				
CE_C21B_TXT_8	CE_C21B_TXT_8. What is the reason you take this? [8]	CHAR	\$CHAR		.-.				
CE_C21C_NUM_8	CE_C21C_NUM_8. What is the dosage? [COUNT] [8]	NUM	BEST	263.7	1-5000	359	MISSING	3	0.1
					DONT KNOW			86	2.5
					REFUSE D			1	0.0
					SKIPPE D			2952	86.8
CE_C21D_UNITS_8	CE_C21D_UNITS_8. What is the dosage unit? [UNITS: IU, Mcg, mL, g, tbsps, tsp, OTHER] [8]	NUM	DOSEUNIT		.		Missing	3	0.1
					.S		Skipped	2952	86.8
					3		Other	64	1.9
					4		Don't Know	41	1.2
					119		Mg	294	8.6
					120		Iu	16	0.5
					121		Mcg	20	0.6
					122		MI	6	0.2

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					123		G	4	0.1
					124		Tbsp	1	0.0
CE_C21E_TXT_8	CE_C21E_TXT_8. What is the dosage unit? OTHER [TEXT: SPECIFY] [8]	CHAR	\$CHAR		..				
CE_C21F_8	CE_C21F_8. How often do you take this? [8]	NUM	MEDSPERWEEK		.		Missing	3	0.1
					.S		Skipped	2952	86.8
					4		Don't Know	1	0.0
					110		Once A Month Or Less	6	0.2
					418		Less Than Once A Week	12	0.4
					419		Once A Week	8	0.2
					421		2-3 Days A Week	24	0.7
					422		4-5 Days A Week	9	0.3
					423		6-7 Days A Week	386	11.3
CE_C21G_8	CE_C21G_8. On days when you take it, how many times do you take it? [UNIT: NUMBER OF TIMES PER DAY] [8]	NUM	MEDSPERDAY		.		Missing	3	0.1
					.S		Skipped	2952	86.8
					4		Don't Know	2	0.1
					424		1 Time Per Day	355	10.4
					425		2 Times Per Day	71	2.1
					426		3 Times Per Day	14	0.4
					427		4 Times Per Day	3	0.1
					428		5 Or More Times Per Day	1	0.0
CE_C21H_MM_8	CE_C21H_MM_8. When did you start taking this? [MONTH: MM] [8]	NUM	BEST	5.5	1-12	348	MISSING	40	1.2
					DON'T KNOW			60	1.8
					REFUSE D			1	0.0
					SKIPPE D			2952	86.8
CE_C21H_YYYY_8	CE_C21H_YYYY_8. When did you start taking this? [YEAR: YYYY] [8]	NUM	BEST	2010.2	1974-2016	385	MISSING	3	0.1
					DON'T KNOW			60	1.8
					REFUSE D			1	0.0

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VARIABLE NAME	LABEL (VAR)	TYPE	FORMAT	MEAN	RANGE	N	CATEGORY	FREQUENCY	PERCENT
					SKIPPE D			2952	86.8
CE_C21A_TXT_9	CE_C21A_TXT_9. What is the name of the prescription or over-the-counter medication? [9]	CHAR	\$CHAR		..				
CE_C21B_TXT_9	CE_C21B_TXT_9. What is the reason you take this? [9]	CHAR	\$CHAR		..				
CE_C21C_NUM_9	CE_C21C_NUM_9. What is the dosage? [COUNT] [9]	NUM	BEST	259.4	1-5000	288	MISSING	3	0.1
					DON'T KNOW			65	1.9
					REFUSE D			3	0.1
					SKIPPE D			3042	89.4
CE_C21D_UNITS_9	CE_C21D_UNITS_9. What is the dosage unit? [UNITS: IU, Mcg, mL, g, tbsp, tsp, OTHER] [9]	NUM	DOSEUNIT		.		Missing	3	0.1
					.S		Skipped	3042	89.4
					3		Other	50	1.5
					4		Don't Know	34	1.0
					119		Mg	233	6.9
					120		Iu	8	0.2
					121		Mcg	24	0.7
					122		MI	1	0.0
					123		G	5	0.1
					125		Tsp	1	0.0
CE_C21E_TXT_9	CE_C21E_TXT_9. What is the dosage unit? OTHER [TEXT: SPECIFY] [9]	CHAR	\$CHAR		..				
CE_C21F_9	CE_C21F_9. How often do you take this? [9]	NUM	MEDSPERWEEK		.		Missing	3	0.1
					.S		Skipped	3042	89.4
					4		Don't Know	2	0.1
					110		Once A Month Or Less	9	0.3
					418		Less Than Once A Week	10	0.3
					419		Once A Week	9	0.3
					421		2-3 Days A Week	15	0.4
					422		4-5 Days A Week	3	0.1
					423		6-7 Days A Week	308	9.1

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VARIABLE NAME	LABEL (VAR)	TYPE	FORMAT	MEAN	RANGE	N	CATEGORY	FREQUENCY	PERCENT
CE_C21G_9	CE_C21G_9. On days when you take it, how many times do you take it? [UNIT: NUMBER OF TIMES PER DAY] [9]	NUM	MEDSPERDAY		.	278	Missing	3	0.1
					.S		Skipped	3042	89.4
					4		Don't Know	2	0.1
					424		1 Time Per Day	269	7.9
					425		2 Times Per Day	64	1.9
					426		3 Times Per Day	16	0.5
					427		4 Times Per Day	4	0.1
					428		5 Or More Times Per Day	1	0.0
CE_C21H_MM_9	CE_C21H_MM_9. When did you start taking this? [MONTH: MM] [9]	NUM	BEST	5.3	1-12	278	MISSING	32	0.9
							DONT KNOW	48	1.4
							REFUSE D	1	0.0
							SKIPPE D	3042	89.4
CE_C21H_YYYY_9	CE_C21H_YYYY_9. When did you start taking this? [YEAR: YYYY] [9]	NUM	BEST	2010.1	1975-2016	307	MISSING	3	0.1
							DONT KNOW	48	1.4
							REFUSE D	1	0.0
							SKIPPE D	3042	89.4
CE_C21A_TXT_10	CE_C21A_TXT_10. What is the name of the prescription or over-the-counter medication? [10]	CHAR	\$CHAR				..		
CE_C21B_TXT_10	CE_C21B_TXT_10. What is the reason you take this? [10]	CHAR	\$CHAR				..		
CE_C21C_NUM_10	CE_C21C_NUM_10. What is the dosage? [COUNT] [10]	NUM	BEST	382.1	1-5000	214	MISSING	3	0.1
							DONT KNOW	60	1.8
							REFUSE D	2	0.1
							SKIPPE D	3122	91.8
CE_C21D_UNITS_10	CE_C21D_UNITS_10. What is the dosage unit? [UNITS: IU, Mcg, mL, g, tbsp, tsp, OTHER] [10]	NUM	DOSEUNIT		.		Missing	3	0.1

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					.S		Skipped	3122	91.8
					3		Other	48	1.4
					4		Don't Know	32	0.9
					119		Mg	166	4.9
					120		Iu	14	0.4
					121		Mcg	12	0.4
					122		MI	2	0.1
					123		G	2	0.1
CE_C21E_TXT_10	CE_C21E_TXT_10. What is the dosage unit? OTHER [TEXT: SPECIFY] [10]	CHAR	\$CHAR		.-.				
CE_C21F_10	CE_C21F_10. How often do you take this? [10]	NUM	MEDSPERWEEK		.		Missing	3	0.1
					.S		Skipped	3122	91.8
					4		Don't Know	1	0.0
					110		Once A Month Or Less	4	0.1
					418		Less Than Once A Week	9	0.3
					419		Once A Week	5	0.1
					421		2-3 Days A Week	11	0.3
					422		4-5 Days A Week	2	0.1
					423		6-7 Days A Week	244	7.2
CE_C21G_10	CE_C21G_10. On days when you take it, how many times do you take it? [UNIT: NUMBER OF TIMES PER DAY] [10]	NUM	MEDSPERDAY		.		Missing	3	0.1
					.S		Skipped	3122	91.8
					4		Don't Know	1	0.0
					424		1 Time Per Day	218	6.4
					425		2 Times Per Day	40	1.2
					426		3 Times Per Day	11	0.3
					427		4 Times Per Day	4	0.1
					428		5 Or More Times Per Day	2	0.1
CE_C21H_MM_10	CE_C21H_MM_10. When did you start taking this? [MONTH: MM] [10]	NUM	BEST	5.6	1-12	214	MISSING	28	0.8
					DON'T KNOW			36	1.1
					REFUSE D			1	0.0
					SKIPPE D			3122	91.8

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VARIABLE NAME	LABEL (VAR)	TYPE	FORMAT	MEAN	RANGE	N	CATEGORY	FREQUENCY	PERCENT
CE_C21H_YYYY_10	CE_C21H_YYYY_10. When did you start taking this? [YEAR: YYYY] [10]	NUM	BEST	2010.0	1970-2016	239	MISSING	3	0.1
					DON'T KNOW			36	1.1
					REFUSE D			1	0.0
					SKIPPE D			3122	91.8
CE_C21A_TXT_11	CE_C21A_TXT_11. What is the name of the prescription or over-the-counter medication? [11]	CHAR	\$CHAR		.-.				
CE_C21B_TXT_11	CE_C21B_TXT_11. What is the reason you take this? [11]	CHAR	\$CHAR		.-.				
CE_C21C_NUM_11	CE_C21C_NUM_11. What is the dosage? [COUNT] [11]	NUM	BEST	242.9	1-5000	175	MISSING	3	0.1
					DON'T KNOW			37	1.1
					REFUSE D			3	0.1
					SKIPPE D			3183	93.6
CE_C21D_UNITS_11	CE_C21D_UNITS_11. What is the dosage unit? [UNITS: IU, Mcg, mL, g, tbsp, tsp, OTHER] [11]	NUM	DOSEUNIT		.		Missing	3	0.1
					.S		Skipped	3183	93.6
					3		Other	36	1.1
					4		Don't Know	19	0.6
					119		Mg	139	4.1
					120		Iu	7	0.2
					121		Mcg	13	0.4
					123		G	1	0.0
CE_C21E_TXT_11	CE_C21E_TXT_11. What is the dosage unit? OTHER [TEXT: SPECIFY] [11]	CHAR	\$CHAR		.-.				
CE_C21F_11	CE_C21F_11. How often do you take this? [11]	NUM	MEDSPERWEEK		.		Missing	3	0.1
					.S		Skipped	3183	93.6
					4		Don't Know	1	0.0
					110		Once A Month Or Less	6	0.2
					418		Less Than Once A Week	10	0.3
					419		Once A Week	7	0.2

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VARIABLE NAME	LABEL (VAR)	TYPE	FORMAT	MEAN	RANGE	N	CATEGORY	FREQUENCY	PERCENT
					421		2-3 Days A Week	12	0.4
					422		4-5 Days A Week	1	0.0
					423		6-7 Days A Week	178	5.2
CE_C21G_11	CE_C21G_11. On days when you take it, how many times do you take it? [UNIT: NUMBER OF TIMES PER DAY] [11]	NUM	MEDSPERDAY	.			Missing	3	0.1
				.S			Skipped	3183	93.6
				4			Don't Know	1	0.0
				424			1 Time Per Day	168	4.9
				425			2 Times Per Day	36	1.1
				426			3 Times Per Day	7	0.2
				427			4 Times Per Day	3	0.1
CE_C21H_MM_11	CE_C21H_MM_11. When did you start taking this? [MONTH: MM] [11]	NUM	BEST	5.2	1-12	166	MISSING	24	0.7
					DONT KNOW			27	0.8
					REFUSE D			1	0.0
					SKIPPE D			3183	93.6
CE_C21H_YYYY_11	CE_C21H_YYYY_11. When did you start taking this? [YEAR: YYYY] [11]	NUM	BEST	2010.3	1970-2016	187	MISSING	3	0.1
					DONT KNOW			27	0.8
					REFUSE D			1	0.0
					SKIPPE D			3183	93.6
CE_C21A_TXT_12	CE_C21A_TXT_12. What is the name of the prescription or over-the-counter medication? [12]	CHAR	\$CHAR		..				
CE_C21B_TXT_12	CE_C21B_TXT_12. What is the reason you take this? [12]	CHAR	\$CHAR		..				
CE_C21C_NUM_12	CE_C21C_NUM_12. What is the dosage? [COUNT] [12]	NUM	BEST	347.0	1-5000	118	MISSING	3	0.1
					DONT KNOW			32	0.9
					REFUSE D			2	0.1
					SKIPPE D			3246	95.4

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VARIABLE NAME	LABEL (VAR)	TYPE	FORMAT	MEAN	RANGE	N	CATEGORY	FREQUENCY	PERCENT
CE_C21D_UNITS_12	CE_C21D_UNITS_12. What is the dosage unit? [UNITS: IU, Mcg, mL, g, tbsp, tsp, OTHER] [12]	NUM	DOSEUNIT				Missing	3	0.1
							Skipped	3246	95.4
							Other	27	0.8
							Don't Know	20	0.6
							Mg	78	2.3
							Iu	6	0.2
							Mcg	16	0.5
							MI	3	0.1
							G	1	0.0
							Tbsp	1	0.0
CE_C21E_TXT_12	CE_C21E_TXT_12. What is the dosage unit? OTHER [TEXT: SPECIFY] [12]	CHAR	\$CHAR		.-.				
CE_C21F_12	CE_C21F_12. How often do you take this? [12]	NUM	MEDSPERWEEK				Missing	3	0.1
							Skipped	3246	95.4
							Don't Know	1	0.0
							Once A Month Or Less	3	0.1
							Less Than Once A Week	8	0.2
							Once A Week	6	0.2
							2-3 Days A Week	10	0.3
							4-5 Days A Week	5	0.1
							6-7 Days A Week	119	3.5
CE_C21G_12	CE_C21G_12. On days when you take it, how many times do you take it? [UNIT: NUMBER OF TIMES PER DAY] [12]	NUM	MEDSPERDAY				Missing	3	0.1
							Skipped	3246	95.4
							Don't Know	2	0.1
							1 Time Per Day	114	3.4
							2 Times Per Day	23	0.7
							3 Times Per Day	11	0.3
							4 Times Per Day	2	0.1
							CE_C21H_MM_12	CE_C21H_MM_12. When did you start taking this? [MONTH: MM] [12]	NUM
							DON'T KNOW	20	0.6

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VARIABLE NAME	LABEL (VAR)	TYPE	FORMAT	MEAN	RANGE	N	CATEGORY	FREQUENCY	PERCENT
					SKIPPE D			3246	95.4
CE_C21H_YYYY_12	CE_C21H_YYYY_12. When did you start taking this? [YEAR: YYYY] [12]	NUM	BEST	2009.5	1980-201 6	132	MISSING	3	0.1
					DONT KNOW			20	0.6
					SKIPPE D			3246	95.4
CE_C21A_TXT_13	CE_C21A_TXT_13. What is the name of the prescription or over-the-counter medication? [13]	CHAR	\$CHAR		.-.				
CE_C21B_TXT_13	CE_C21B_TXT_13. What is the reason you take this? [13]	CHAR	\$CHAR		.-.				
CE_C21C_NUM_13	CE_C21C_NUM_13. What is the dosage? [COUNT] [13]	NUM	BEST	334.8	1-5000	83	MISSING	3	0.1
					DONT KNOW			29	0.9
					REFUSE D			2	0.1
					SKIPPE D			3284	96.6
CE_C21D_UNITS_13	CE_C21D_UNITS_13. What is the dosage unit? [UNITS: IU, Mcg, mL, g, tbsp, tsp, OTHER] [13]	NUM	DOSEUNIT		.		Missing	3	0.1
					.S		Skipped	3284	96.6
					3		Other	20	0.6
					4		Don't Know	15	0.4
					119		Mg	64	1.9
					120		Iu	5	0.1
					121		Mcg	8	0.2
					122		ML	1	0.0
					123		G	1	0.0
CE_C21E_TXT_13	CE_C21E_TXT_13. What is the dosage unit? OTHER [TEXT: SPECIFY] [13]	CHAR	\$CHAR		.-.				
CE_C21F_13	CE_C21F_13. How often do you take this? [13]	NUM	MEDSPERWEEK		.		Missing	3	0.1
					.S		Skipped	3284	96.6
					4		Don't Know	1	0.0
					110		Once A Month Or Less	1	0.0
					418		Less Than Once A Week	3	0.1

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VARIABLE NAME	LABEL (VAR)	TYPE	FORMAT	MEAN	RANGE	N	CATEGORY	FREQUENCY	PERCENT
							Once A Week	4	0.1
							2-3 Days A Week	6	0.2
							4-5 Days A Week	3	0.1
							6-7 Days A Week	96	2.8
CE_C21G_13	CE_C21G_13. On days when you take it, how many times do you take it? [UNIT: NUMBER OF TIMES PER DAY] [13]	NUM	MEDSPERDAY	.			Missing	3	0.1
							Skipped	3284	96.6
							1 Time Per Day	83	2.4
							2 Times Per Day	22	0.6
							3 Times Per Day	5	0.1
							4 Times Per Day	4	0.1
CE_C21H_MM_13	CE_C21H_MM_13. When did you start taking this? [MONTH: MM] [13]	NUM	BEST	5.4	1-12	91	MISSING	9	0.3
							DON'T KNOW	17	0.5
							SKIPPE D	3284	96.6
CE_C21H_YYYY_13	CE_C21H_YYYY_13. When did you start taking this? [YEAR: YYYY] [13]	NUM	BEST	2009.7	1980-2016	97	MISSING	3	0.1
							DON'T KNOW	17	0.5
							SKIPPE D	3284	96.6
CE_C21A_TXT_14	CE_C21A_TXT_14. What is the name of the prescription or over-the-counter medication? [14]	CHAR	\$CHAR						
CE_C21B_TXT_14	CE_C21B_TXT_14. What is the reason you take this? [14]	CHAR	\$CHAR						
CE_C21C_NUM_14	CE_C21C_NUM_14. What is the dosage? [COUNT] [14]	NUM	BEST	237.7	1-1750	56	MISSING	3	0.1
							DON'T KNOW	25	0.7
							REFUSE D	2	0.1
							SKIPPE D	3315	97.5
CE_C21D_UNITS_14	CE_C21D_UNITS_14. What is the dosage unit? [UNITS: IU, Mcg, mL, g, tbsp, tsp, OTHER] [14]	NUM	DOSEUNIT	.			Missing	3	0.1
							Skipped	3315	97.5

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VARIABLE NAME	LABEL (VAR)	TYPE	FORMAT	MEAN	RANGE	N	CATEGORY	FREQUENCY	PERCENT
							Other	22	0.6
							Don't Know	8	0.2
							Mg	43	1.3
							Iu	1	0.0
							Mcg	7	0.2
							MI	1	0.0
							Tbsp	1	0.0
CE_C21E_TXT_14	CE_C21E_TXT_14. What is the dosage unit? OTHER [TEXT: SPECIFY] [14]	CHAR	\$CHAR		-. .				
CE_C21F_14	CE_C21F_14. How often do you take this? [14]	NUM	MEDSPERWEEK				Missing	3	0.1
							Skipped	3315	97.5
							Don't Know	3	0.1
							Once A Month Or Less	2	0.1
							Less Than Once A Week	3	0.1
							Once A Week	2	0.1
							2-3 Days A Week	10	0.3
							4-5 Days A Week	1	0.0
							6-7 Days A Week	62	1.8
CE_C21G_14	CE_C21G_14. On days when you take it, how many times do you take it? [UNIT: NUMBER OF TIMES PER DAY] [14]	NUM	MEDSPERDAY				Missing	3	0.1
							Skipped	3315	97.5
							Don't Know	3	0.1
							1 Time Per Day	64	1.9
							2 Times Per Day	13	0.4
							3 Times Per Day	2	0.1
							4 Times Per Day	1	0.0
CE_C21H_MM_14	CE_C21H_MM_14. When did you start taking this? [MONTH: MM] [14]	NUM	BEST	6.3	1-12	65	MISSING	8	0.2
							DON'T KNOW	13	0.4
							SKIPPE D	3315	97.5
CE_C21H_YYYY_14	CE_C21H_YYYY_14. When did you start taking this? [YEAR: YYYY] [14]	NUM	BEST	2010.1	1980-2016	70	MISSING	3	0.1

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VARIABLE NAME	LABEL (VAR)	TYPE	FORMAT	MEAN	RANGE	N	CATEGORY	FREQUENCY	PERCENT
					DON'T KNOW			13	0.4
					SKIPPE D			3315	97.5
CE_C21A_TXT_15	CE_C21A_TXT_15. What is the name of the prescription or over-the-counter medication? [15]	CHAR	\$CHAR		.-.				
CE_C21B_TXT_15	CE_C21B_TXT_15. What is the reason you take this? [15]	CHAR	\$CHAR		.-.				
CE_C21C_NUM_15	CE_C21C_NUM_15. What is the dosage? [COUNT] [15]	NUM	BEST	267.3	1-1200	43	MISSING	3	0.1
					DON'T KNOW			12	0.4
					SKIPPE D			3343	98.3
CE_C21D_UNITS_15	CE_C21D_UNITS_15. What is the dosage unit? [UNITS: IU, Mcg, mL, g, tbsp, tsp, OTHER] [15]	NUM	DOSEUNIT		.		Missing	3	0.1
					.S		Skipped	3343	98.3
					3		Other	10	0.3
					4		Don't Know	4	0.1
					119		Mg	36	1.1
					120		Iu	1	0.0
					121		Mcg	4	0.1
CE_C21E_TXT_15	CE_C21E_TXT_15. What is the dosage unit? OTHER [TEXT: SPECIFY] [15]	CHAR	\$CHAR		.-.				
CE_C21F_15	CE_C21F_15. How often do you take this? [15]	NUM	MEDSPERWEEK		.		Missing	3	0.1
					.S		Skipped	3343	98.3
					110		Once A Month Or Less	1	0.0
					418		Less Than Once A Week	2	0.1
					419		Once A Week	3	0.1
					421		2-3 Days A Week	6	0.2
					423		6-7 Days A Week	43	1.3
CE_C21G_15	CE_C21G_15. On days when you take it, how many times do you take it? [UNIT: NUMBER OF TIMES PER DAY] [15]	NUM	MEDSPERDAY		.		Missing	3	0.1
					.S		Skipped	3343	98.3
					4		Don't Know	2	0.1
					424		1 Time Per Day	36	1.1

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VARIABLE NAME	LABEL (VAR)	TYPE	FORMAT	MEAN	RANGE	N	CATEGORY	FREQUENCY	PERCENT
					425		2 Times Per Day	13	0.4
					426		3 Times Per Day	2	0.1
					427		4 Times Per Day	2	0.1
CE_C21H_MM_15	CE_C21H_MM_15. When did you start taking this? [MONTH: MM] [15]	NUM	BEST	5.5	1-12	44	MISSING	5	0.1
					DON'T KNOW			9	0.3
					SKIPPE D			3343	98.3
CE_C21H_YYYY_15	CE_C21H_YYYY_15. When did you start taking this? [YEAR: YYYY] [15]	NUM	BEST	2009.7	1990-2016	46	MISSING	3	0.1
					DON'T KNOW			9	0.3
					SKIPPE D			3343	98.3
CE_C21A_TXT_16	CE_C21A_TXT_16. What is the name of the prescription or over-the-counter medication? [16]	CHAR	\$CHAR		.-				
CE_C21B_TXT_16	CE_C21B_TXT_16. What is the reason you take this? [16]	CHAR	\$CHAR		.-				
CE_C21C_NUM_16	CE_C21C_NUM_16. What is the dosage? [COUNT] [16]	NUM	BEST	401.0	1-4200	29	MISSING	3	0.1
					DON'T KNOW			7	0.2
					SKIPPE D			3362	98.9
CE_C21D_UNITS_16	CE_C21D_UNITS_16. What is the dosage unit? [UNITS: IU, Mcg, mL, g, tbsp, tsp, OTHER] [16]	NUM	DOSEUNIT		.		Missing	3	0.1
					.S		Skipped	3362	98.9
					3		Other	8	0.2
					4		Don't Know	2	0.1
					119		Mg	23	0.7
					121		Mcg	1	0.0
					122		ML	2	0.1
CE_C21E_TXT_16	CE_C21E_TXT_16. What is the dosage unit? OTHER [TEXT: SPECIFY] [16]	CHAR	\$CHAR		.-				
CE_C21F_16	CE_C21F_16. How often do you take this? [16]	NUM	MEDSPERWEEK		.		Missing	3	0.1
					.S		Skipped	3362	98.9

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VARIABLE NAME	LABEL (VAR)	TYPE	FORMAT	MEAN	RANGE	N	CATEGORY	FREQUENCY	PERCENT
						4	Don't Know	1	0.0
						418	Less Than Once A Week	3	0.1
						421	2-3 Days A Week	5	0.1
						422	4-5 Days A Week	1	0.0
						423	6-7 Days A Week	26	0.8
CE_C21G_16	CE_C21G_16. On days when you take it, how many times do you take it? [UNIT: NUMBER OF TIMES PER DAY] [16]	NUM	MEDSPERDAY	.			Missing	3	0.1
				.S			Skipped	3362	98.9
				4			Don't Know	1	0.0
				424			1 Time Per Day	25	0.7
				425			2 Times Per Day	3	0.1
				426			3 Times Per Day	6	0.2
				427			4 Times Per Day	1	0.0
CE_C21H_MM_16	CE_C21H_MM_16. When did you start taking this? [MONTH: MM] [16]	NUM	BEST	5.2	1-12	32	MISSING	4	0.1
					DON'T KNOW			3	0.1
					SKIPPE D			3362	98.9
CE_C21H_YYYY_16	CE_C21H_YYYY_16. When did you start taking this? [YEAR: YYYY] [16]	NUM	BEST	2010.4	1980-2016	33	MISSING	3	0.1
					DON'T KNOW			3	0.1
					SKIPPE D			3362	98.9
CE_C21A_TXT_17	CE_C21A_TXT_17. What is the name of the prescription or over-the-counter medication? [17]	CHAR	\$CHAR		.-.				
CE_C21B_TXT_17	CE_C21B_TXT_17. What is the reason you take this? [17]	CHAR	\$CHAR		.-.				
CE_C21C_NUM_17	CE_C21C_NUM_17. What is the dosage? [COUNT] [17]	NUM	BEST	450.8	1-3000	16	MISSING	3	0.1
					DON'T KNOW			7	0.2
					SKIPPE D			3375	99.2
CE_C21D_UNITS_17	CE_C21D_UNITS_17. What is the dosage unit? [UNITS: IU, Mcg, mL, g, tbsp, tsp, OTHER] [17]	NUM	DOSEUNIT	.			Missing	3	0.1

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VARIABLE NAME	LABEL (VAR)	TYPE	FORMAT	MEAN	RANGE	N	CATEGORY	FREQUENCY	PERCENT
					.S		Skipped	3375	99.2
					3		Other	5	0.1
					4		Don't Know	2	0.1
					119		Mg	16	0.5
CE_C21E_TXT_17	CE_C21E_TXT_17. What is the dosage unit? OTHER [TEXT: SPECIFY] [17]	CHAR	\$CHAR		.-.				
CE_C21F_17	CE_C21F_17. How often do you take this? [17]	NUM	MEDSPERWEEK		.		Missing	3	0.1
					.S		Skipped	3375	99.2
					110		Once A Month Or Less	2	0.1
					422		4-5 Days A Week	1	0.0
					423		6-7 Days A Week	20	0.6
CE_C21G_17	CE_C21G_17. On days when you take it, how many times do you take it? [UNIT: NUMBER OF TIMES PER DAY] [17]	NUM	MEDSPERDAY		.		Missing	3	0.1
					.S		Skipped	3375	99.2
					424		1 Time Per Day	15	0.4
					425		2 Times Per Day	6	0.2
					426		3 Times Per Day	2	0.1
CE_C21H_MM_17	CE_C21H_MM_17. When did you start taking this? [MONTH: MM] [17]	NUM	BEST	6.9	1-12	20	MISSING	3	0.1
					DON'T KNOW			3	0.1
					SKIPPE D			3375	99.2
CE_C21H_YYYY_17	CE_C21H_YYYY_17. When did you start taking this? [YEAR: YYYY] [17]	NUM	BEST	2012.4	2009-2016	20	MISSING	3	0.1
					DON'T KNOW			3	0.1
					SKIPPE D			3375	99.2
CE_C21A_TXT_18	CE_C21A_TXT_18. What is the name of the prescription or over-the-counter medication? [18]	CHAR	\$CHAR		.-.				
CE_C21B_TXT_18	CE_C21B_TXT_18. What is the reason you take this? [18]	CHAR	\$CHAR		.-.				
CE_C21C_NUM_18	CE_C21C_NUM_18. What is the dosage? [COUNT] [18]	NUM	BEST	211.7	1-750	15	MISSING	3	0.1
					DON'T KNOW			7	0.2

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							SKIPPED	3376	99.3
CE_C21D_UNITS_18	CE_C21D_UNITS_18. What is the dosage unit? [UNITS: IU, Mcg, mL, g, tbsp, tsp, OTHER] [18]	NUM	DOSEUNIT	.			Missing	3	0.1
				.S			Skipped	3376	99.3
				3			Other	6	0.2
				4			Don't Know	2	0.1
				119			Mg	14	0.4
CE_C21E_TXT_18	CE_C21E_TXT_18. What is the dosage unit? OTHER [TEXT: SPECIFY] [18]	CHAR	\$CHAR		.-.				
CE_C21F_18	CE_C21F_18. How often do you take this? [18]	NUM	MEDSPERWEEK	.			Missing	3	0.1
				.S			Skipped	3376	99.3
				110			Once A Month Or Less	1	0.0
				421			2-3 Days A Week	2	0.1
				423			6-7 Days A Week	19	0.6
CE_C21G_18	CE_C21G_18. On days when you take it, how many times do you take it? [UNIT: NUMBER OF TIMES PER DAY] [18]	NUM	MEDSPERDAY	.			Missing	3	0.1
				.S			Skipped	3376	99.3
				424			1 Time Per Day	10	0.3
				425			2 Times Per Day	9	0.3
				426			3 Times Per Day	2	0.1
				427			4 Times Per Day	1	0.0
CE_C21H_MM_18	CE_C21H_MM_18. When did you start taking this? [MONTH: MM] [18]	NUM	BEST	4.7	1-12	19	MISSING	3	0.1
							DON'T KNOW	3	0.1
							SKIPPED	3376	99.3
CE_C21H_YYYY_18	CE_C21H_YYYY_18. When did you start taking this? [YEAR: YYYY] [18]	NUM	BEST	2010.6	1980-2016	19	MISSING	3	0.1
							DON'T KNOW	3	0.1
							SKIPPED	3376	99.3
CE_C21A_TXT_19	CE_C21A_TXT_19. What is the name of the prescription or over-the-counter medication? [19]	CHAR	\$CHAR		.-.				

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VARIABLE NAME	LABEL (VAR)	TYPE	FORMAT	MEAN	RANGE	N	CATEGORY	FREQUENCY	PERCENT
CE_C21B_TXT_19	CE_C21B_TXT_19. What is the reason you take this? [19]	CHAR	\$CHAR		.-.				
CE_C21C_NUM_19	CE_C21C_NUM_19. What is the dosage? [COUNT] [19]	NUM	BEST	71.8	1-400	13	MISSING	3	0.1
					DON'T KNOW			3	0.1
					REFUSE D			1	0.0
					SKIPPE D			3381	99.4
CE_C21D_UNITS_19	CE_C21D_UNITS_19. What is the dosage unit? [UNITS: IU, Mcg, mL, g, tbsp, tsp, OTHER] [19]	NUM	DOSEUNIT		.		Missing	3	0.1
					.S		Skipped	3381	99.4
					3		Other	1	0.0
					4		Don't Know	3	0.1
					119		Mg	10	0.3
					121		Mcg	1	0.0
					123		G	1	0.0
					125		Tsp	1	0.0
CE_C21E_TXT_19	CE_C21E_TXT_19. What is the dosage unit? OTHER [TEXT: SPECIFY] [19]	CHAR	\$CHAR		.-.				
CE_C21F_19	CE_C21F_19. How often do you take this? [19]	NUM	MEDSPERWEEK		.		Missing	3	0.1
					.S		Skipped	3381	99.4
					419		Once A Week	1	0.0
					422		4-5 Days A Week	1	0.0
					423		6-7 Days A Week	15	0.4
CE_C21G_19	CE_C21G_19. On days when you take it, how many times do you take it? [UNIT: NUMBER OF TIMES PER DAY] [19]	NUM	MEDSPERDAY		.		Missing	3	0.1
					.S		Skipped	3381	99.4
					424		1 Time Per Day	10	0.3
					425		2 Times Per Day	6	0.2
					426		3 Times Per Day	1	0.0
CE_C21H_MM_19	CE_C21H_MM_19. When did you start taking this? [MONTH: MM] [19]	NUM	BEST	6.3	1-12	16	MISSING	3	0.1
					DON'T KNOW			1	0.0

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VARIABLE NAME	LABEL (VAR)	TYPE	FORMAT	MEAN	RANGE	N	CATEGORY	FREQUENCY	PERCENT
					SKIPPE D			3381	99.4
CE_C21H_YYYY_19	CE_C21H_YYYY_19. When did you start taking this? [YEAR: YYYY] [19]	NUM	BEST	2010.3	1990-2016	16	MISSING	3	0.1
					DON'T KNOW			1	0.0
					SKIPPE D			3381	99.4
CE_C21A_TXT_20	CE_C21A_TXT_20. What is the name of the prescription or over-the-counter medication? [20]	CHAR	\$CHAR		.-.				
CE_C21B_TXT_20	CE_C21B_TXT_20. What is the reason you take this? [20]	CHAR	\$CHAR		.-.				
CE_C21C_NUM_20	CE_C21C_NUM_20. What is the dosage? [COUNT] [20]	NUM	BEST	273.8	1-1000	11	MISSING	3	0.1
					DON'T KNOW			3	0.1
					SKIPPE D			3384	99.5
CE_C21D_UNITS_20	CE_C21D_UNITS_20. What is the dosage unit? [UNITS: IU, Mcg, mL, g, tbsp, tsp, OTHER] [20]	NUM	DOSEUNIT		.		Missing	3	0.1
					.S		Skipped	3384	99.5
					3		Other	1	0.0
					4		Don't Know	3	0.1
					119		Mg	7	0.2
					120		Iu	1	0.0
					121		Mcg	1	0.0
					125		Tsp	1	0.0
CE_C21E_TXT_20	CE_C21E_TXT_20. What is the dosage unit? OTHER [TEXT: SPECIFY] [20]	CHAR	\$CHAR		.-.				
CE_C21F_20	CE_C21F_20. How often do you take this? [20]	NUM	MEDSPERWEEK		.		Missing	3	0.1
					.S		Skipped	3384	99.5
					422		4-5 Days A Week	1	0.0
					423		6-7 Days A Week	13	0.4
CE_C21G_20	CE_C21G_20. On days when you take it, how many times do you take it? [UNIT: NUMBER OF TIMES PER DAY] [20]	NUM	MEDSPERDAY		.		Missing	3	0.1
					.S		Skipped	3384	99.5

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VARIABLE NAME	LABEL (VAR)	TYPE	FORMAT	MEAN	RANGE	N	CATEGORY	FREQUENCY	PERCENT
					424		1 Time Per Day	8	0.2
					425		2 Times Per Day	5	0.1
					426		3 Times Per Day	1	0.0
CE_C21H_MM_20	CE_C21H_MM_20. When did you start taking this? [MONTH: MM] [20]	NUM	BEST	6.6	1-12	13	MISSING	3	0.1
					DON'T KNOW			1	0.0
					SKIPPE D			3384	99.5
CE_C21H_YYYY_20	CE_C21H_YYYY_20. When did you start taking this? [YEAR: YYYY] [20]	NUM	BEST	2008.5	1980-2016	13	MISSING	3	0.1
					DON'T KNOW			1	0.0
					SKIPPE D			3384	99.5
CE_C21A_TXT_21	CE_C21A_TXT_21. What is the name of the prescription or over-the-counter medication? [21]	CHAR	\$CHAR		.-				
CE_C21B_TXT_21	CE_C21B_TXT_21. What is the reason you take this? [21]	CHAR	\$CHAR		.-				
CE_C21C_NUM_21	CE_C21C_NUM_21. What is the dosage? [COUNT] [21]	NUM	BEST	78.9	2-300	9	MISSING	3	0.1
					DON'T KNOW			2	0.1
					REFUSE D			1	0.0
					SKIPPE D			3386	99.6
CE_C21D_UNITS_21	CE_C21D_UNITS_21. What is the dosage unit? [UNITS: IU, Mcg, mL, g, tbsp, tsp, OTHER] [21]	NUM	DOSEUNIT		.		Missing	3	0.1
					.S		Skipped	3386	99.6
					3		Other	3	0.1
					4		Don't Know	1	0.0
					119		Mg	7	0.2
					121		Mcg	1	0.0
CE_C21E_TXT_21	CE_C21E_TXT_21. What is the dosage unit? OTHER [TEXT: SPECIFY] [21]	CHAR	\$CHAR		.-				
CE_C21F_21	CE_C21F_21. How often do you take this? [21]	NUM	MEDSPERWEEK		.		Missing	3	0.1
					.S		Skipped	3386	99.6

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VARIABLE NAME	LABEL (VAR)	TYPE	FORMAT	MEAN	RANGE	N	CATEGORY	FREQUENCY	PERCENT
					421		2-3 Days A Week	1	0.0
					423		6-7 Days A Week	11	0.3
CE_C21G_21	CE_C21G_21. On days when you take it, how many times do you take it? [UNIT: NUMBER OF TIMES PER DAY] [21]	NUM	MEDSPERDAY	.			Missing	3	0.1
					.S		Skipped	3386	99.6
					424		1 Time Per Day	7	0.2
					425		2 Times Per Day	2	0.1
					426		3 Times Per Day	3	0.1
CE_C21H_MM_21	CE_C21H_MM_21. When did you start taking this? [MONTH: MM] [21]	NUM	BEST	7.8	1-12	11	MISSING	3	0.1
					DON'T KNOW			1	0.0
					SKIPPE D			3386	99.6
CE_C21H_YYYY_21	CE_C21H_YYYY_21. When did you start taking this? [YEAR: YYYY] [21]	NUM	BEST	2009.5	1980-2016	11	MISSING	3	0.1
					DON'T KNOW			1	0.0
					SKIPPE D			3386	99.6
CE_C21A_TXT_22	CE_C21A_TXT_22. What is the name of the prescription or over-the-counter medication? [22]	CHAR	\$CHAR		..				
CE_C21B_TXT_22	CE_C21B_TXT_22. What is the reason you take this? [22]	CHAR	\$CHAR		..				
CE_C21C_NUM_22	CE_C21C_NUM_22. What is the dosage? [COUNT] [22]	NUM	BEST	172.7	1-500	6	MISSING	3	0.1
					DON'T KNOW			3	0.1
					SKIPPE D			3389	99.6
CE_C21D_UNITS_22	CE_C21D_UNITS_22. What is the dosage unit? [UNITS: IU, Mcg, mL, g, tbsp, tsp, OTHER] [22]	NUM	DOSEUNIT		.		Missing	3	0.1
					.S		Skipped	3389	99.6
					3		Other	2	0.1
					4		Don't Know	2	0.1
					119		Mg	4	0.1
					120		Iu	1	0.0

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VARIABLE NAME	LABEL (VAR)	TYPE	FORMAT	MEAN	RANGE	N	CATEGORY	FREQUENCY	PERCENT
CE_C21E_TXT_22	CE_C21E_TXT_22. What is the dosage unit? OTHER [TEXT: SPECIFY] [22]	CHAR	\$CHAR		..				
CE_C21F_22	CE_C21F_22. How often do you take this? [22]	NUM	MEDSPERWEEK		.		Missing	3	0.1
					.S		Skipped	3389	99.6
					418		Less Than Once A Week	1	0.0
					423		6-7 Days A Week	8	0.2
CE_C21G_22	CE_C21G_22. On days when you take it, how many times do you take it? [UNIT: NUMBER OF TIMES PER DAY] [22]	NUM	MEDSPERDAY		.		Missing	3	0.1
					.S		Skipped	3389	99.6
					424		1 Time Per Day	3	0.1
					425		2 Times Per Day	4	0.1
					426		3 Times Per Day	2	0.1
CE_C21H_MM_22	CE_C21H_MM_22. When did you start taking this? [MONTH: MM] [22]	NUM	BEST	6.6	1-12	9	MISSING	3	0.1
					SKIPPE D			3389	99.6
CE_C21H_YYYY_22	CE_C21H_YYYY_22. When did you start taking this? [YEAR: YYYY] [22]	NUM	BEST	2012.8	2010-2016	9	MISSING	3	0.1
					SKIPPE D			3389	99.6
CE_C21A_TXT_23	CE_C21A_TXT_23. What is the name of the prescription or over-the-counter medication? [23]	CHAR	\$CHAR		..				
CE_C21B_TXT_23	CE_C21B_TXT_23. What is the reason you take this? [23]	CHAR	\$CHAR		..				
CE_C21C_NUM_23	CE_C21C_NUM_23. What is the dosage? [COUNT] [23]	NUM	BEST	47.5	10-200	6	MISSING	3	0.1
					DON'T KNOW			1	0.0
					REFUSE D			1	0.0
					SKIPPE D			3390	99.7
CE_C21D_UNITS_23	CE_C21D_UNITS_23. What is the dosage unit? [UNITS: IU, Mcg, mL, g, tbsp, tsp, OTHER] [23]	NUM	DOSEUNIT		.		Missing	3	0.1
					.S		Skipped	3390	99.7
					4		Don't Know	2	0.1
					119		Mg	6	0.2

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VARIABLE NAME	LABEL (VAR)	TYPE	FORMAT	MEAN	RANGE	N	CATEGORY	FREQUENCY	PERCENT
CE_C21E_TXT_23	CE_C21E_TXT_23. What is the dosage unit? OTHER [TEXT: SPECIFY] [23]	CHAR	\$CHAR		..				
CE_C21F_23	CE_C21F_23. How often do you take this? [23]	NUM	MEDSPERWEEK		.		Missing	3	0.1
					.S		Skipped	3390	99.7
					419		Once A Week	1	0.0
					423		6-7 Days A Week	7	0.2
CE_C21G_23	CE_C21G_23. On days when you take it, how many times do you take it? [UNIT: NUMBER OF TIMES PER DAY] [23]	NUM	MEDSPERDAY		.		Missing	3	0.1
					.S		Skipped	3390	99.7
					424		1 Time Per Day	6	0.2
					425		2 Times Per Day	1	0.0
					427		4 Times Per Day	1	0.0
CE_C21H_MM_23	CE_C21H_MM_23. When did you start taking this? [MONTH: MM] [23]	NUM	BEST	7.1	1-12	8	MISSING	3	0.1
					SKIPPE D			3390	99.7
CE_C21H_YYYY_23	CE_C21H_YYYY_23. When did you start taking this? [YEAR: YYYY] [23]	NUM	BEST	2012.1	2010-2015	8	MISSING	3	0.1
					SKIPPE D			3390	99.7
CE_C21A_TXT_24	CE_C21A_TXT_24. What is the name of the prescription or over-the-counter medication? [24]	CHAR	\$CHAR		..				
CE_C21B_TXT_24	CE_C21B_TXT_24. What is the reason you take this? [24]	CHAR	\$CHAR		..				
CE_C21C_NUM_24	CE_C21C_NUM_24. What is the dosage? [COUNT] [24]	NUM	BEST	464.0	20-1000	5	MISSING	3	0.1
					DON'T KNOW			1	0.0
					SKIPPE D			3392	99.7
CE_C21D_UNITS_24	CE_C21D_UNITS_24. What is the dosage unit? [UNITS: IU, Mcg, mL, g, tbsp, tsp, OTHER] [24]	NUM	DOSEUNIT		.		Missing	3	0.1
					.S		Skipped	3392	99.7
					3		Other	1	0.0
					119		Mg	5	0.1
CE_C21E_TXT_24	CE_C21E_TXT_24. What is the dosage unit? OTHER [TEXT: SPECIFY] [24]	CHAR	\$CHAR		..				

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VARIABLE NAME	LABEL (VAR)	TYPE	FORMAT	MEAN	RANGE	N	CATEGORY	FREQUENCY	PERCENT
CE_C21F_24	CE_C21F_24. How often do you take this? [24]	NUM	MEDSPERWEEK		.	6	Missing	3	0.1
					.S		Skipped	3392	99.7
					423		6-7 Days A Week	6	0.2
CE_C21G_24	CE_C21G_24. On days when you take it, how many times do you take it? [UNIT: NUMBER OF TIMES PER DAY] [24]	NUM	MEDSPERDAY		.	6	Missing	3	0.1
					.S		Skipped	3392	99.7
					424		1 Time Per Day	3	0.1
					425		2 Times Per Day	1	0.0
					426		3 Times Per Day	2	0.1
CE_C21H_MM_24	CE_C21H_MM_24. When did you start taking this? [MONTH: MM] [24]	NUM	BEST	9.0	2-12	6	MISSING	3	0.1
							SKIPPE D	3392	99.7
CE_C21H_YYYY_24	CE_C21H_YYYY_24. When did you start taking this? [YEAR: YYYY] [24]	NUM	BEST	2012.0	2010-2016	6	MISSING	3	0.1
							SKIPPE D	3392	99.7
CE_C21A_TXT_25	CE_C21A_TXT_25. What is the name of the prescription or over-the-counter medication? [25]	CHAR	\$CHAR		..				
CE_C21B_TXT_25	CE_C21B_TXT_25. What is the reason you take this? [25]	CHAR	\$CHAR		..				
CE_C21C_NUM_25	CE_C21C_NUM_25. What is the dosage? [COUNT] [25]	NUM	BEST	53.0	1-118	3	MISSING	3	0.1
							DON'T KNOW	1	0.0
							REFUSE D	1	0.0
							SKIPPE D	3393	99.8
CE_C21D_UNITS_25	CE_C21D_UNITS_25. What is the dosage unit? [UNITS: IU, Mcg, mL, g, tbsp, tsp, OTHER] [25]	NUM	DOSEUNIT		.	3	Missing	3	0.1
					.S		Skipped	3393	99.8
					4		Don't Know	3	0.1
					119		Mg	1	0.0
					122		MI	1	0.0
CE_C21E_TXT_25	CE_C21E_TXT_25. What is the dosage unit? OTHER [TEXT: SPECIFY] [25]	CHAR	\$CHAR		..				

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CE_C21F_25	CE_C21F_25. How often do you take this? [25]	NUM	MEDSPERWEEK		.		Missing	3	0.1
					.S		Skipped	3393	99.8
					418		Less Than Once A Week	1	0.0
					421		2-3 Days A Week	1	0.0
					423		6-7 Days A Week	3	0.1
CE_C21G_25	CE_C21G_25. On days when you take it, how many times do you take it? [UNIT: NUMBER OF TIMES PER DAY] [25]	NUM	MEDSPERDAY		.		Missing	3	0.1
					.S		Skipped	3393	99.8
					424		1 Time Per Day	5	0.1
CE_C21H_MM_25	CE_C21H_MM_25. When did you start taking this? [MONTH: MM] [25]	NUM	BEST	8.4	3-12	5	MISSING	3	0.1
							SKIPPED	3393	99.8
CE_C21H_YYYY_25	CE_C21H_YYYY_25. When did you start taking this? [YEAR: YYYY] [25]	NUM	BEST	2011.2	2009-2014	5	MISSING	3	0.1
							SKIPPED	3393	99.8
CE_C21A_TXT_26	CE_C21A_TXT_26. What is the name of the prescription or over-the-counter medication? [26]	CHAR	\$CHAR		..				
CE_C21B_TXT_26	CE_C21B_TXT_26. What is the reason you take this? [26]	CHAR	\$CHAR		..				
CE_C21C_NUM_26	CE_C21C_NUM_26. What is the dosage? [COUNT] [26]	NUM	BEST	25.0	10-40	2	MISSING	3	0.1
							DON'T KNOW	1	0.0
							SKIPPED	3395	99.8
CE_C21D_UNITS_26	CE_C21D_UNITS_26. What is the dosage unit? [UNITS: IU, Mcg, mL, g, tbsp, tsp, OTHER] [26]	NUM	DOSEUNIT		.		Missing	3	0.1
					.S		Skipped	3395	99.8
					3		Other	1	0.0
					119		Mg	2	0.1
CE_C21E_TXT_26	CE_C21E_TXT_26. What is the dosage unit? OTHER [TEXT: SPECIFY] [26]	CHAR	\$CHAR		..				
CE_C21F_26	CE_C21F_26. How often do you take this? [26]	NUM	MEDSPERWEEK		.		Missing	3	0.1
					.S		Skipped	3395	99.8

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VARIABLE NAME	LABEL (VAR)	TYPE	FORMAT	MEAN	RANGE	N	CATEGORY	FREQUENCY	PERCENT
					110		Once A Month Or Less	1	0.0
					423		6-7 Days A Week	2	0.1
CE_C21G_26	CE_C21G_26. On days when you take it, how many times do you take it? [UNIT: NUMBER OF TIMES PER DAY] [26]	NUM	MEDSPERDAY	.			Missing	3	0.1
				.S			Skipped	3395	99.8
				424			1 Time Per Day	3	0.1
CE_C21H_MM_26	CE_C21H_MM_26. When did you start taking this? [MONTH: MM] [26]	NUM	BEST	7.0	5-8	3	MISSING	3	0.1
					SKIPPE D			3395	99.8
CE_C21H_YYYY_26	CE_C21H_YYYY_26. When did you start taking this? [YEAR: YYYY] [26]	NUM	BEST	2011.0	2007-2015	3	MISSING	3	0.1
					SKIPPE D			3395	99.8
CE_C21A_TXT_27	CE_C21A_TXT_27. What is the name of the prescription or over-the-counter medication? [27]	CHAR	\$CHAR		..				
CE_C21B_TXT_27	CE_C21B_TXT_27. What is the reason you take this? [27]	CHAR	\$CHAR		..				
CE_C21C_NUM_27	CE_C21C_NUM_27. What is the dosage? [COUNT] [27]	NUM	BEST	12.5	5-20	2	MISSING	3	0.1
					DON'T KNOW			1	0.0
					SKIPPE D			3395	99.8
CE_C21D_UNITS_27	CE_C21D_UNITS_27. What is the dosage unit? [UNITS: IU, Mcg, mL, g, tbsp, tsp, OTHER] [27]	NUM	DOSEUNIT	.			Missing	3	0.1
				.S			Skipped	3395	99.8
				4			Don't Know	1	0.0
				119			Mg	2	0.1
CE_C21E_TXT_27	CE_C21E_TXT_27. What is the dosage unit? OTHER [TEXT: SPECIFY] [27]	CHAR	\$CHAR		..				
CE_C21F_27	CE_C21F_27. How often do you take this? [27]	NUM	MEDSPERWEEK	.			Missing	3	0.1
				.S			Skipped	3395	99.8
				421			2-3 Days A Week	1	0.0
				423			6-7 Days A Week	2	0.1

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VARIABLE NAME	LABEL (VAR)	TYPE	FORMAT	MEAN	RANGE	N	CATEGORY	FREQUENCY	PERCENT
CE_C21G_27	CE_C21G_27. On days when you take it, how many times do you take it? [UNIT: NUMBER OF TIMES PER DAY] [27]	NUM	MEDSPERDAY		.		Missing	3	0.1
					.S		Skipped	3395	99.8
					424		1 Time Per Day	3	0.1
CE_C21H_MM_27	CE_C21H_MM_27. When did you start taking this? [MONTH: MM] [27]	NUM	BEST	6.0	2-11	3	MISSING	3	0.1
					SKIPPE D			3395	99.8
CE_C21H_YYYY_27	CE_C21H_YYYY_27. When did you start taking this? [YEAR: YYYY] [27]	NUM	BEST	2013.3	2011-2015	3	MISSING	3	0.1
					SKIPPE D			3395	99.8
CE_C21A_TXT_28	CE_C21A_TXT_28. What is the name of the prescription or over-the-counter medication? [28]	CHAR	\$CHAR		.-.				
CE_C21B_TXT_28	CE_C21B_TXT_28. What is the reason you take this? [28]	CHAR	\$CHAR		.-.				
CE_C21C_NUM_28	CE_C21C_NUM_28. What is the dosage? [COUNT] [28]	NUM	BEST	50.0	50-50	1	MISSING	3	0.1
					DON'T KNOW			1	0.0
					SKIPPE D			3396	99.9
CE_C21D_UNITS_28	CE_C21D_UNITS_28. What is the dosage unit? [UNITS: IU, Mcg, mL, g, tbsp, tsp, OTHER] [28]	NUM	DOSEUNIT		.		Missing	3	0.1
					.S		Skipped	3396	99.9
					4		Don't Know	1	0.0
					119		Mg	1	0.0
CE_C21E_TXT_28	CE_C21E_TXT_28. What is the dosage unit? OTHER [TEXT: SPECIFY] [28]	CHAR	\$CHAR		.-.				
CE_C21F_28	CE_C21F_28. How often do you take this? [28]	NUM	MEDSPERWEEK		.		Missing	3	0.1
					.S		Skipped	3396	99.9
					418		Less Than Once A Week	1	0.0
					423		6-7 Days A Week	1	0.0
CE_C21G_28	CE_C21G_28. On days when you take it, how many times do you take it? [UNIT: NUMBER OF TIMES PER DAY] [28]	NUM	MEDSPERDAY		.		Missing	3	0.1
					.S		Skipped	3396	99.9
					424		1 Time Per Day	2	0.1

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VARIABLE NAME	LABEL (VAR)	TYPE	FORMAT	MEAN	RANGE	N	CATEGORY	FREQUENCY	PERCENT
CE_C21H_MM_28	CE_C21H_MM_28. When did you start taking this? [MONTH: MM] [28]	NUM	BEST	6.0	3-9	2	MISSING	3	0.1
					SKIPPE D			3396	99.9
CE_C21H_YYYY_28	CE_C21H_YYYY_28. When did you start taking this? [YEAR: YYYY] [28]	NUM	BEST	2000.0	1989-2011	2	MISSING	3	0.1
					SKIPPE D			3396	99.9
CE_C21A_TXT_29	CE_C21A_TXT_29. What is the name of the prescription or over-the-counter medication? [29]	CHAR	\$CHAR		.-.				
CE_C21B_TXT_29	CE_C21B_TXT_29. What is the reason you take this? [29]	CHAR	\$CHAR		.-.				
CE_C21C_NUM_29	CE_C21C_NUM_29. What is the dosage? [COUNT] [29]	NUM	BEST	250.0	250-250	1	MISSING	3	0.1
					DON'T KNOW			1	0.0
					SKIPPE D			3396	99.9
CE_C21D_UNITS_29	CE_C21D_UNITS_29. What is the dosage unit? [UNITS: IU, Mcg, mL, g, tbsp, tsp, OTHER] [29]	NUM	DOSEUNIT		.		Missing	3	0.1
					.S		Skipped	3396	99.9
					4		Don't Know	1	0.0
					119		Mg	1	0.0
CE_C21E_TXT_29	CE_C21E_TXT_29. What is the dosage unit? OTHER [TEXT: SPECIFY] [29]	CHAR	\$CHAR		.-.				
CE_C21F_29	CE_C21F_29. How often do you take this? [29]	NUM	MEDSPERWEEK		.		Missing	3	0.1
					.S		Skipped	3396	99.9
					423		6-7 Days A Week	2	0.1
CE_C21G_29	CE_C21G_29. On days when you take it, how many times do you take it? [UNIT: NUMBER OF TIMES PER DAY] [29]	NUM	MEDSPERDAY		.		Missing	3	0.1
					.S		Skipped	3396	99.9
					424		1 Time Per Day	1	0.0
					425		2 Times Per Day	1	0.0
CE_C21H_MM_29	CE_C21H_MM_29. When did you start taking this? [MONTH: MM] [29]	NUM	BEST	10.5	9-12	2	MISSING	3	0.1
					SKIPPE D			3396	99.9

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VARIABLE NAME	LABEL (VAR)	TYPE	FORMAT	MEAN	RANGE	N	CATEGORY	FREQUENCY	PERCENT
CE_C21H_YYYY_29	CE_C21H_YYYY_29. When did you start taking this? [YEAR: YYYY] [29]	NUM	BEST	2011.5	2010-2013	2	MISSING	3	0.1
					SKIPPE D			3396	99.9
CE_C21A_TXT_30	CE_C21A_TXT_30. What is the name of the prescription or over-the-counter medication? [30]	CHAR	\$CHAR		.-.				
CE_C21B_TXT_30	CE_C21B_TXT_30. What is the reason you take this? [30]	CHAR	\$CHAR		.-.				
CE_C21C_NUM_30	CE_C21C_NUM_30. What is the dosage? [COUNT] [30]	NUM	BEST	81.0	81-81	1	MISSING	3	0.1
					SKIPPE D			3397	99.9
CE_C21D_UNITS_30	CE_C21D_UNITS_30. What is the dosage unit? [UNITS: IU, Mcg, mL, g, tbspc, tsp, OTHER] [30]	NUM	DOSEUNIT		.		Missing	3	0.1
					.S		Skipped	3397	99.9
					121		Mcg	1	0.0
CE_C21E_TXT_30	CE_C21E_TXT_30. What is the dosage unit? OTHER [TEXT: SPECIFY] [30]	CHAR	\$CHAR		.-.				
CE_C21F_30	CE_C21F_30. How often do you take this? [30]	NUM	MEDSPERWEEK		.		Missing	3	0.1
					.S		Skipped	3397	99.9
					423		6-7 Days A Week	1	0.0
CE_C21G_30	CE_C21G_30. On days when you take it, how many times do you take it? [UNIT: NUMBER OF TIMES PER DAY] [30]	NUM	MEDSPERDAY		.		Missing	3	0.1
					.S		Skipped	3397	99.9
					426		3 Times Per Day	1	0.0
CE_C21H_MM_30	CE_C21H_MM_30. When did you start taking this? [MONTH: MM] [30]	NUM	BEST	9.0	9-9	1	MISSING	3	0.1
					SKIPPE D			3397	99.9
CE_C21H_YYYY_30	CE_C21H_YYYY_30. When did you start taking this? [YEAR: YYYY] [30]	NUM	BEST	2005.0	2005-2005	1	MISSING	3	0.1
					SKIPPE D			3397	99.9

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VARIABLE NAME	LABEL (VAR)	TYPE	FORMAT	MEAN	RANGE	N	CATEGORY	FREQUENCY	PERCENT
GULFID	Gulf ID	CHAR	\$..				
CE_D1A_M1_SYS_NUM	CE_D1A_M1_SYS_NUM. Measurement 1 - Systolic Blood Pressure [UNIT: mmHg]	NUM	BEST	129.7	82-224	3396	MISSING	5	0.1
CE_D1B_M2_SYS_NUM	CE_D1B_M2_SYS_NUM. Measurement 2 - Systolic Blood Pressure [UNIT: mmHg]	NUM	BEST	127.3	82-216	3396	MISSING	5	0.1
CE_D1C_M3_SYS_NUM	CE_D1C_M3_SYS_NUM. Measurement 3 - Systolic Blood Pressure [UNIT: mmHg]	NUM	BEST	126.9	83-214	3396	MISSING	5	0.1
CE_D1D_AVG_SYS_NUM	CE_D1D_AVG_SYS_NUM. Average Measurement Systolic Blood Pressure [UNIT: mmHg]	NUM	BEST	127.4	83-215	3396	MISSING	5	0.1
CE_D2A_M1_DIA_NUM	CE_D2A_M1_DIA_NUM. Measurement 1 - Diastolic Blood Pressure [UNIT: mmHg]	NUM	BEST	75.2	45-125	3396	MISSING	5	0.1
CE_D2B_M2_DIA_NUM	CE_D2B_M2_DIA_NUM. Measurement 2 - Diastolic Blood Pressure [UNIT: mmHg]	NUM	BEST	74.6	47-128	3396	MISSING	5	0.1
CE_D2C_M3_DIA_NUM	CE_D2C_M3_DIA_NUM. Measurement 3 - Diastolic Blood Pressure [UNIT: mmHg]	NUM	BEST	74.6	46-124	3396	MISSING	5	0.1
CE_D2D_AVG_DIA_NUM	CE_D2D_AVG_DIA_NUM. Average Measurement Diastolic Blood Pressure [UNIT: mmHg]	NUM	BEST	74.9	48-123	3396	MISSING	5	0.1
CE_D3A_M1_HR_NUM	CE_D3A_M1_HR_NUM. Measurement 1 - Heart Rate [UNIT: BPM]	NUM	BEST	73.0	38-164	3396	MISSING	5	0.1
CE_D3B_M2_HR_NUM	CE_D3B_M2_HR_NUM. Measurement 2 - Heart Rate [UNIT: BPM]	NUM	BEST	72.7	30-164	3396	MISSING	5	0.1
CE_D3C_M3_HR_NUM	CE_D3C_M3_HR_NUM. Measurement 3 - Heart Rate [UNIT: BPM]	NUM	BEST	73.1	30-169	3396	MISSING	5	0.1
CE_D3D_AVG_HR_NUM	CE_D3D_AVG_HR_NUM. Average Measurement Heart Rate [UNIT: BPM]	NUM	BEST	73.1	30-167	3396	MISSING	5	0.1
CE_D_EX_VITALS	CE_D_EX_VITALS. Enter why any vital measurement not collected	NUM	EQMSMNT		.		Missing	2	0.1
					.S		Skipped	3395	99.8
					3		Other	4	0.1
CE_D_EX_VITALS_TXT	CE_D_EX_VITALS_TXT. Enter why any vital measurement not collected: Other, specify [TEXT: SPECIFY]	CHAR	\$CHAR		..				
CE_E1A_M1_HT_CM_NUM	CE_E1A_M1_HT_CM_NUM. Measurement 1 - Height [UNIT: cm]	NUM	BEST	173.3	140-200	3398	MISSING	3	0.1
CE_E1B_M2_HT_CM_NUM	CE_E1B_M2_HT_CM_NUM. Measurement 2 - Height [UNIT: cm]	NUM	BEST	173.3	141-200	3397	MISSING	4	0.1
CE_E1C_M3_HT_CM_NUM	CE_E1C_M3_HT_CM_NUM. Measurement 3 - Height [UNIT: cm]	NUM	BEST	173.3	141-199	3397	MISSING	4	0.1
CE_E1D_AVG_HT_CM_NUM	CE_E1D_AVG_HT_CM_NUM. Average Measurement Height [UNIT: cm]	NUM	BEST	173.3	141-200	3398	MISSING	3	0.1
CE_E2A_M1_HT_IN_NUM	CE_E2A_M1_HT_IN_NUM. Measurement 1 - Height [UNIT: in]	NUM	BEST	68.2	55-79	3398	MISSING	3	0.1

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CE_E2B_M2_HT_IN_NUM	CE_E2B_M2_HT_IN_NUM. Measurement 2 - Height [UNIT: in]	NUM	BEST	68.2	56-79	3397	MISSING	4	0.1
CE_E2C_M3_HT_IN_NUM	CE_E2C_M3_HT_IN_NUM. Measurement 3 - Height [UNIT: in]	NUM	BEST	68.2	55-79	3397	MISSING	4	0.1
CE_E2D_AVG_HT_IN_NUM	CE_E2D_AVG_HT_IN_NUM. Average Measurement Height [UNIT: in]	NUM	BEST	68.2	55-79	3398	MISSING	3	0.1
CE_E_EX_HT	CE_E_EX_HT. Enter why height not collected	NUM	EQMSMNT		.		Missing	2	0.1
					.S		Skipped	3395	99.8
					3		Other	4	0.1
CE_E_EX_HT_TXT	CE_E_EX_HT_TXT. Enter why height not collected: Other, specify [TEXT: SPECIFY]	CHAR	\$CHAR		.-.				
CE_F1A_M1_WGT_KG_NUM	CE_F1A_M1_WGT_KG_NUM. Measurement 1 - Weight [UNIT: kg]	NUM	BEST	91.7	40-209	3397	MISSING	4	0.1
CE_F1B_M2_WGT_KG_NUM	CE_F1B_M2_WGT_KG_NUM. Measurement 2 - Weight [UNIT: kg]	NUM	BEST	91.7	40-209	3396	MISSING	5	0.1
CE_F1C_M3_WGT_KG_NUM	CE_F1C_M3_WGT_KG_NUM. Measurement 3 - Weight [UNIT: kg]	NUM	BEST	91.7	40-209	3396	MISSING	5	0.1
CE_F1D_AVG_WGT_KG_NUM	CE_F1D_AVG_WGT_KG_NUM. Average Measurement Weight [UNIT: kg]	NUM	BEST	91.7	40-209	3397	MISSING	4	0.1
CE_F2A_M1_WGT_LBS_NUM	CE_F2A_M1_WGT_LBS_NUM. Measurement 1 - Weight [UNIT: lb]	NUM	BEST	202.2	89-461	3397	MISSING	4	0.1
CE_F2B_M2_WGT_LBS_NUM	CE_F2B_M2_WGT_LBS_NUM. Measurement 2 - Weight [UNIT: lb]	NUM	BEST	202.2	88-461	3396	MISSING	5	0.1
CE_F2C_M3_WGT_LBS_NUM	CE_F2C_M3_WGT_LBS_NUM. Measurement 3 - Weight [UNIT: lb]	NUM	BEST	202.2	88-461	3396	MISSING	5	0.1
CE_F2D_AVG_WGT_LBS_NUM	CE_F2D_AVG_WGT_LBS_NUM. Average Measurement Weight [UNIT: lb]	NUM	BEST	202.2	89-461	3397	MISSING	4	0.1
CE_F_EX_WGT	CE_F_EX_WGT. Enter why weight not collected	NUM	EQMSMNT		.		Missing	2	0.1
					.S		Skipped	3395	99.8
					3		Other	3	0.1
					9		Refused	1	0.0
CE_F_EX_WGT_TXT	CE_F_EX_WGT_TXT. Enter why weight not collected: Other, specify [TEXT: SPECIFY]	CHAR	\$CHAR		.-.				
CE_F3A_M1_BMI_NUM	CE_F3A_M1_BMI_NUM. Measurement 1 - Body Mass Index [UNIT: kg/m2]	NUM	BEST	30.5	17-64	3397	MISSING	4	0.1
CE_F3B_M2_BMI_NUM	CE_F3B_M2_BMI_NUM. Measurement 2 - Body Mass Index [UNIT: kg/m2]	NUM	BEST	30.5	17-65	3396	MISSING	5	0.1
CE_F3C_M3_BMI_NUM	CE_F3C_M3_BMI_NUM. Measurement 3 - Body Mass Index [UNIT: kg/m2]	NUM	BEST	30.5	16-65	3396	MISSING	5	0.1

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VARIABLE NAME	LABEL (VAR)	TYPE	FORMAT	MEAN	RANGE	N	CATEGORY	FREQUENCY	PERCENT
CE_F3D_AVG_BMI_NUM	CE_F3D_AVG_BMI_NUM. Average Measurement Body Mass Index [UNIT: kg/m2]	NUM	BEST	30.5	17-64	3397	MISSING	4	0.1
CE_G1A_M1_WAIST_NUM	CE_G1A_M1_WAIST_NUM. Measurement 1 - Waist circumference [UNIT: cm]	NUM	BEST	102.5	35-177	3394	MISSING	7	0.2
CE_G1B_M2_WAIST_NUM	CE_G1B_M2_WAIST_NUM. Measurement 2 - Waist circumference [UNIT: cm]	NUM	BEST	102.5	35-177	3394	MISSING	7	0.2
CE_G1C_M3_WAIST_NUM	CE_G1C_M3_WAIST_NUM. Measurement 3 - Waist circumference [UNIT: cm]	NUM	BEST	102.5	35-178	3393	MISSING	8	0.2
CE_G1D_AVG_WAIST_NUM	CE_G1D_AVG_WAIST_NUM. Average Measurement Waist circumference [UNIT: cm]	NUM	BEST	102.5	35-177	3394	MISSING	7	0.2
CE_G_EX_WAIST	CE_G_EX_WAIST. Enter why waist circumference not collected	NUM	EQMSMNT		.		Missing	3	0.1
					.S		Skipped	3393	99.8
					3		Other	4	0.1
					9		Refused	1	0.0
CE_G_EX_WAIST_TXT	CE_G_EX_WAIST_TXT. Enter why waist circumference not collected: Other, specify [TEXT: SPECIFY]	CHAR	\$CHAR		.-.				
CE_H1A_M1_HIP_NUM	CE_H1A_M1_HIP_NUM. Measurement 1 - Hip circumference [UNIT: cm]	NUM	BEST	108.8	40-168	3392	MISSING	9	0.3
CE_H1B_M2_HIP_NUM	CE_H1B_M2_HIP_NUM. Measurement 2 - Hip circumference [UNIT: cm]	NUM	BEST	108.8	40-174	3391	MISSING	10	0.3
CE_H1C_M3_HIP_NUM	CE_H1C_M3_HIP_NUM. Measurement 3 - Hip circumference [UNIT: cm]	NUM	BEST	108.8	40-173	3391	MISSING	10	0.3
CE_H1D_AVG_HIP_NUM	CE_H1D_AVG_HIP_NUM. Average Measurement Hip circumference [UNIT: cm]	NUM	BEST	108.8	40-172	3392	MISSING	9	0.3
CE_H_EX_HIP	CE_H_EX_HIP. Enter why hip circumference not collected	NUM	EQMSMNT		.		Missing	2	0.1
					.S		Skipped	3391	99.7
					3		Other	6	0.2
					9		Refused	2	0.1
CE_H_EX_HIP_TXT	CE_H_EX_HIP_TXT. Enter why hip circumference not collected: Other, specify [TEXT: SPECIFY]	CHAR	\$CHAR		.-.				

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VARIABLE NAME	LABEL (VAR)	TYPE	FORMAT	MEAN	RANGE	N	CATEGORY	FREQUENCY	PERCENT
GULFID	GULFID. GULF ID	CHAR	\$CHAR		.-.				
CE_I1_YN	CE_I1_YN. Was a hair sample collected?	NUM	YN		1		Yes	2086	61.3
					2		No	1315	38.7
CE_I1A	CE_I1A. Was a hair sample collected? If no, provide a reason	NUM	YNHAIR		.S		Skipped	2086	61.3
					1		Not Enough Hair	1137	33.4
					2		Other, Specify	147	4.3
					9		Refused	31	0.9
CE_I1A_OTHER_TXT	CE_I1A_OTHER_TXT. Was a hair sample collected? If no, provide a reason: OTHER, SPECIFY [TEXT: SPECIFY]	CHAR	\$CHAR		.-.				
CE_I2_YN	CE_I2_YN. Were the proximal and distal ends of the hair designated/marked?	NUM	YN		.S		Skipped	1315	38.7
					1		Yes	2085	61.3
					2		No	1	0.0
CE_I2A	CE_I2A. Were the proximal and distal ends of the hair designated/marked? If no, provide a reason	NUM	OTHDKREF		.S		Skipped	3400	100.0
					1		Other, Specify	1	0.0
CE_I2A_OTHER_TXT	CE_I2A_OTHER_TXT. Were the proximal and distal ends of the hair designated/marked? If no, provide a reason: OTHER, SPECIFY [TEXT: SPECIFY]	CHAR	\$CHAR		.-.				
CE_J1_YN	CE_J1_YN. Are you currently wearing false toenails, nail tips, acrylic and or gel on your toenails?	NUM	YN		1		Yes	35	1.0
					2		No	3366	99.0
CE_J2_YN	CE_J2_YN. Are you currently wearing nail polish, nail hardener or any other nail product on your toenails?	NUM	YN		.S		Skipped	35	1.0
					1		Yes	305	9.0
					2		No	3061	90.0
CE_J2A_YN	CE_J2A_YN. Did participant remove nail polish, nail hardener or any other nail product using nail polish remover or acetone?	NUM	YN		.S		Skipped	3096	91.0
					1		Yes	180	5.3
					2		No	125	3.7
CE_J3_YN	CE_J3_YN. Were toenail samples collected?	NUM	YN		.		Missing	1	0.0
					.S		Skipped	160	4.7
					1		Yes	2896	85.2

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VARIABLE NAME	LABEL (VAR)	TYPE	FORMAT	MEAN	RANGE	N	CATEGORY	FREQUENCY	PERCENT
						2	No	344	10.1
CE_J3A	CE_J3A. Were toenail samples collected? If no, provide a reason	NUM	TOENAIL	.			Missing	1	0.0
				.S			Skipped	3056	89.9
				1			Nails Not Long Enough	292	8.6
				2			Missing Toenails/Toes/Foot	12	0.4
				3			Medical Condition	20	0.6
				4			Other, Specify	20	0.6
CE_J3A_OTHER_TXT	CE_J3A_OTHER_TXT. Were toenail samples collected? If no, provide a reason: OTHER, SPECIFY [TEXT: SPECIFY]	CHAR	\$CHAR	.-.					
CE_J4_YN	CE_J4_YN. Participant agreed to collect and send toenail samples at a later date?	NUM	YN	.			Missing	1	0.0
				.S			Skipped	2896	85.2
				1			Yes	495	14.6
				2			No	9	0.3
CE_J5	CE_J5. Barcode scan of toenail sample collection envelope	CHAR	\$CHAR	.-.					
CE_K1_YN	CE_K1_YN. Was a mid-stream urine sample collected during the clinical exam?	NUM	YN	.			Missing	2	0.1
				1			Yes	3379	99.4
				2			No	20	0.6
CE_K1A	CE_K1A. Was a mid-stream urine sample collected during the clinical exam? If no, provide a reason	NUM	COLLYN	.			Missing	2	0.1
				.S			Skipped	3379	99.4
				1			Unable To Collect	14	0.4
				3			Other, Specify	4	0.1
				9			Refused	2	0.1
CE_K1A_OTHER_TXT	CE_K1A_OTHER_TXT. Was a mid-stream urine sample collected during the clinical exam? If no, provide a reason: OTHER, SPECIFY [TEXT: SPECIFY]	CHAR	\$CHAR	.-.					
CE_K2_NUM	CE_K2_NUM. Volume of the random urine sample collected [UNIT: ML]	NUM	BEST	77.4	5-90	3343	MISSING	38	1.1
							SKIPPE D	20	0.6
CE_K3_DATE	CE_K3_DATE. Date of random urine sample [DATE: MM/DD/YYYY]	NUM	MMDDYY	07/02/15	08/27/14- 06/30/16	3379	MISSING	2	0.1
							SKIPPE D	20	0.6

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VARIABLE NAME	LABEL (VAR)	TYPE	FORMAT	MEAN	RANGE	N	CATEGORY	FREQUENCY	PERCENT	
CE_K4_TIME	CE_K4_TIME. Enter time the random urine sample was collected [TIME: HH:MM (00:00-23:59)]	NUM	TIME	11:20	7:15-19:20	3379	MISSING	2	0.1	
					SKIPPE D			20	0.6	
CE_K5A_LEUKOCYTE	CE_K5A_LEUKOCYTE. Urine dipstick results: LEUKOCYTE	NUM	BLOODRESULT		.		Missing	25	0.7	
					.S		Skipped	20	0.6	
					1		-	2999	88.2	
					2		+-	167	4.9	
					3		1+	83	2.4	
					4		2+	62	1.8	
					5		3+	45	1.3	
CE_K5B_NITRITE	CE_K5B_NITRITE. Urine dipstick results: NITRITE	NUM	BLOODCOLL		.		Missing	25	0.7	
					.S		Skipped	20	0.6	
					1		-	3306	97.2	
					2		+	50	1.5	
CE_K5C_UROBILINOGEN	CE_K5C_UROBILINOGEN. Urine dipstick results: UROBILINOGEN	NUM	BLOODRESULT		.		Missing	25	0.7	
					.S		Skipped	20	0.6	
					1		-	2808	82.6	
					2		+-	456	13.4	
					3		1+	69	2.0	
					4		2+	19	0.6	
					5		3+	4	0.1	
CE_K5D_PROTEIN	CE_K5D_PROTEIN. Urine dipstick results: PROTEIN	NUM	BLOODRESULT		.		Missing	25	0.7	
					.S		Skipped	20	0.6	
					1		-	2732	80.3	
					2		+-	401	11.8	
					3		1+	159	4.7	
					4		2+	46	1.4	
					5		3+	18	0.5	
CE_K5E_PH	CE_K5E_PH. Urine dipstick results: PH	NUM	BLOOD_PH		.		Missing	25	0.7	
					.S		Skipped	20	0.6	
					1			5	109	3.2

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VARIABLE NAME	LABEL (VAR)	TYPE	FORMAT	MEAN	RANGE	N	CATEGORY	FREQUENCY	PERCENT
CE_K5F_BLOOD	CE_K5F_BLOOD. Urine dipstick results: BLOOD	NUM	BLOODRESULT				Missing	25	0.7
							Skipped	20	0.6
							-	2890	85.0
							+-	290	8.5
							1+	65	1.9
							2+	50	1.5
							3+	61	1.8
CE_K5G_SPECIFIC_GRAVITY	CE_K5G_SPECIFIC_GRAVITY. Urine dipstick results: SPECIFIC GRAVITY	NUM	BLOODSPEC				Missing	25	0.7
							Skipped	20	0.6
							1.000	3	0.1
							1.005	68	2.0
							1.010	337	9.9
							1.015	799	23.5
							1.020	617	18.1
							1.025	681	20.0
							1.030	851	25.0
CE_K5H_KETONES	CE_K5H_KETONES. Urine dipstick results: KETONES	NUM	BLOODRESULT				Missing	25	0.7
							Skipped	20	0.6
							-	3206	94.3
							+-	134	3.9
							1+	8	0.2
							2+	5	0.1
							3+	3	0.1
CE_K5I_BILIRUBIN	CE_K5I_BILIRUBIN. Urine dipstick results: BILIRUBIN	NUM	BLOODRESULT				Missing	25	0.7
							Skipped	20	0.6

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VARIABLE NAME	LABEL (VAR)	TYPE	FORMAT	MEAN	RANGE	N	CATEGORY	FREQUENCY	PERCENT
CE_K5J_GLUKOSE	CE_K5J_GLUKOSE. Urine dipstick results: GLUCOSE	NUM	BLOODRESULT	.			Missing	25	0.7
				.S			Skipped	20	0.6
				1			-	3151	92.6
				2			+-	35	1.0
				3			1+	34	1.0
				4			2+	20	0.6
				5			3+	116	3.4
CE_K5A	CE_K5A. Barcode scan for participant POCT results form	CHAR	\$CHAR	.					
CE_K6_YN	CE_K6_YN. Was remaining urine sample sent to lab to be aliquotted for long term storage and future analysis?	NUM	YN	.			Missing	103	3.0
				.S			Skipped	20	0.6
				1			Yes	3276	96.3
				2			No	2	0.1
CE_K6A	CE_K6A. Was remaining urine sample sent to lab to be aliquotted for long term storage and future analysis? If no, provide a reason	NUM	NOBLOOD	.			Missing	103	3.0
				.S			Skipped	3296	96.9
				1			Insufficient Sample	2	0.1
CE_K6A_OTHER_TXT	CE_K6A_OTHER_TXT. Was remaining urine sample sent to lab to be aliquotted for long term storage and future analysis? If no, provide a reason: OTHER, SPECIFY [TEXT: SPECIFY]	CHAR	\$CHAR	.					
CE_L2_YN	CE_L2_YN. Participant was selected for at-home saliva sample collection. Did participant agree to complete at-home saliva sample collection?	NUM	YN	.			Missing	3	0.1
				.S			Skipped	2533	74.5
				1			Yes	861	25.3
				2			No	4	0.1
CE_L3_YN	CE_L3_YN. Was a practive saliva sample obtained?	NUM	YN	.			Missing	3	0.1
				.S			Skipped	2537	74.6

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					1		Yes	860	25.3
					2		No	1	0.0
CE_L3A_DATE	CE_L3A_DATE. Date of practice saliva sample collection [DATE: MM/DD/YYYY]	NUM	MMDDYY	09/21/15	08/29/14-06/30/16	860	MISSING	3	0.1
					SKIPPE D			2538	74.6
CE_L3B_TIME	CE_L3B_TIME. Enter time of practice saliva sample collection [TIME: HH:MM (00:00-23:59)]	NUM	TIME	10:33	7:41-16:59	859	MISSING	4	0.1
					SKIPPE D			2538	74.6
CE_L3C	CE_L3C. Was a practice saliva sample obtained? If no, provide a reason	NUM	NOCOLL		.		Missing	4	0.1
					.S		Skipped	3396	99.9
					1		Medical Reason	1	0.0
CE_L3C_OTHER_TXT	CE_L3C_OTHER_TXT. Was a practice saliva sample obtained? If no, provide a reason: OTHER, SPECIFY [TEXT: SPECIFY]	CHAR	\$CHAR		.-.				
CE_L4A_YN	CE_L4A_YN. In the past 20 minutes, have you done any of the following? Brushed teeth?	NUM	DKREFYN		.		Missing	3	0.1
					.S		Skipped	2538	74.6
					1		Yes	9	0.3
					2		No	851	25.0
CE_L4B_YN	CE_L4B_YN. In the past 20 minutes, have you done any of the following? Eaten anything?	NUM	DKREFYN		.		Missing	3	0.1
					.S		Skipped	2538	74.6
					1		Yes	90	2.6
					2		No	770	22.6
CE_L4C_YN	CE_L4C_YN. In the past 20 minutes, have you done any of the following? Drank anything?	NUM	DKREFYN		.		Missing	3	0.1
					.S		Skipped	2538	74.6
					1		Yes	420	12.3
					2		No	440	12.9
CE_L4D_YN	CE_L4D_YN. In the past 20 minutes, have you done any of the following? Exercised?	NUM	DKREFYN		.		Missing	3	0.1
					.S		Skipped	2538	74.6
					1		Yes	37	1.1

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VARIABLE NAME	LABEL (VAR)	TYPE	FORMAT	MEAN	RANGE	N	CATEGORY	FREQUENCY	PERCENT
					2		No	823	24.2
CE_L5	CE_L5. Do you feel happy, excited, or content right now?	NUM	SOMEWHAT		.		Missing	3	0.1
					.S		Skipped	2538	74.6
					1		Not At All	79	2.3
					2		Somewhat	466	13.7
					3		Very Much	222	6.5
					4		Extremely	91	2.7
					8		Don't Know	2	0.1
CE_L6	CE_L6. Do you feel worried, anxious, or fearful right now?	NUM	SOMEWHAT		.		Missing	3	0.1
					.S		Skipped	2538	74.6
					1		Not At All	677	19.9
					2		Somewhat	154	4.5
					3		Very Much	21	0.6
					4		Extremely	8	0.2
CE_L7_TXT	CE_L7_TXT. Do you have any problems or concerns right now? Specify. [TEXT: SPECIFY]	CHAR	\$CHAR		.-.				
CE_L8	CE_L8. Scanned barcode of saliva log	CHAR	\$CHAR		.-.				

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VARIABLE NAME	LABEL (VAR)	TYPE	FORMAT	MEAN	RANGE	N	CATEGORY	FREQUENCY	PERCENT
GULFID	GULFID. GULF ID	CHAR	\$CHAR		.-				
CE_M1_YN	CE_M1_YN. Was blood draw attempted?	NUM	YN		1 2		Yes No	3385 16	99.5 0.5
CE_M1A_DATE	CE_M1A_DATE. Date of blood collection attempt [DATE: MM/DD/YYYY]	NUM	MMDDYY	07/02/15	08/27/14- 06/30/16	3385	SKIPPED	16	0.5
CE_M1B_TIME	CE_M1B_TIME. Enter time of blood collection attempt [TIME: HH:MM AM/PM]	NUM	TIME	10:57	7:42-17:1 5	3385	SKIPPED	16	0.5
CE_MIC_1_YN	CE_MIC_1_YN. Record site for blood collection attempts [RIGHT ARM]	NUM	DYNF		. .S 0 1		Missing Skipped No Yes	3 16 672 2710	0.1 0.5 19.8 79.7
CE_MIC_2_YN	CE_MIC_2_YN. Record site for blood collection attempts [RIGHT HAND]	NUM	DYNF		. .S 0 1		Missing Skipped No Yes	3 16 3259 123	0.1 0.5 95.8 3.6
CE_MIC_3_YN	CE_MIC_3_YN. Record site for blood collection attempts [LEFT ARM]	NUM	DYNF		. .S 0 1		Missing Skipped No Yes	3 16 2553 829	0.1 0.5 75.1 24.4
CE_MIC_4_YN	CE_MIC_4_YN. Record site for blood collection attempts [LEFT HAND]	NUM	DYNF		. .S 0 1		Missing Skipped No Yes	3 16 3293 89	0.1 0.5 96.8 2.6
CE_M1D_NUM	CE_M1D_NUM. Record number of blood draw attempts	NUM	BEST	1.2	1-3	3383	MISSING	2	0.1
					SKIPPE D			16	0.5
CE_M1E_YN	CE_M1E_YN. Was any blood collected?	NUM	YN		.S 1 2		Skipped Yes No	16 3351 34	0.5 98.5 1.0
CE_M1F	CE_M1F. Was any blood collected? If not collected, provide a reason	NUM	NOCOLLA		.S		Skipped	3351	98.5

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VARIABLE NAME	LABEL (VAR)	TYPE	FORMAT	MEAN	RANGE	N	CATEGORY	FREQUENCY	PERCENT
							Unable To Collect	27	0.8
							Medical Reason	3	0.1
							Other, Specify	5	0.1
							Refused	15	0.4
CE_M1F_OTHER_TXT	CE_M1F_OTHER_TXT. Was any blood collected? If not collected, provide a reason OTHER, SPECIFY [TEXT: SPECIFY]	CHAR	\$CHAR		.-.				
CE_M3A_RED100_COLLECTED_YN	CE_M3A_RED100_COLLECTED_YN. Was Red tube RED100 collected?	NUM	YN		.S		Skipped	50	1.5
							Yes	3348	98.4
							No	3	0.1
CE_M3B_RED100_WHY_NOT	CE_M3B_RED100_WHY_NOT. Was Red tube RED100 collected? If no, why?	NUM	NOCOLLB		.S		Skipped	3398	99.9
							Unable To Collect	3	0.1
CE_M3C_RED100_OTHER_TXT	CE_M3C_RED100_OTHER_TXT. Was Red tube RED100 collected? If 'other', specify [TEXT: SPECIFY]	CHAR	\$CHAR		.-.				
CE_M3A_RED200_COLLECTED_YN	CE_M3A_RED200_COLLECTED_YN. Was Red tube RED200 collected?	NUM	YN		.S		Skipped	50	1.5
							Yes	3341	98.2
							No	10	0.3
CE_M3B_RED200_WHY_NOT	CE_M3B_RED200_WHY_NOT. Was Red tube RED200 collected? If no, why?	NUM	NOCOLLB		.S		Skipped	3391	99.7
							Unable To Collect	8	0.2
							Other	1	0.0
							Refused	1	0.0
CE_M3C_RED200_OTHER_TXT	CE_M3C_RED200_OTHER_TXT. Was Red tube RED200 collected? If 'other', specify [TEXT: SPECIFY]	CHAR	\$CHAR		.-.				
CE_M3A_LAV100_COLLECTED_YN	CE_M3A_LAV100_COLLECTED_YN. Was Lavender tube LAV100 collected?	NUM	YN		.S		Skipped	50	1.5
							Yes	3334	98.0
							No	17	0.5
CE_M3B_LAV100_WHY_NOT	CE_M3B_LAV100_WHY_NOT. Was Lavender tube LAV100 collected? If no, why?	NUM	NOCOLLB		.S		Skipped	3384	99.5
							Unable To Collect	13	0.4
							Medical Reason	2	0.1
							Other	1	0.0

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					9		Refused	1	0.0
CE_M3C_LAV100_OTHER_TXT	CE_M3C_LAV100_OTHER_TXT. Was Lavender tube LAV100 collected? If 'other', specify [TEXT: SPECIFY]	CHAR	\$CHAR		.-				
CE_M3A_LAV200_COLLECTED_YN	CE_M3A_LAV200_COLLECTED_YN. Was Lavender tube LAV200 collected?	NUM	YN		.S		Skipped	50	1.5
					1		Yes	3331	97.9
					2		No	20	0.6
CE_M3B_LAV200_WHY_NOT	CE_M3B_LAV200_WHY_NOT. Was Lavender tube LAV200 collected? If no, why?	NUM	NOCOLLB		.S		Skipped	3381	99.4
					1		Unable To Collect	16	0.5
					2		Medical Reason	2	0.1
					5		Other	1	0.0
					9		Refused	1	0.0
CE_M3C_LAV200_OTHER_TXT	CE_M3C_LAV200_OTHER_TXT. Was Lavender tube LAV200 collected? If 'other', specify [TEXT: SPECIFY]	CHAR	\$CHAR		.-				
CE_M3A_LAV300_COLLECTED_YN	CE_M3A_LAV300_COLLECTED_YN. Was Lavender tube LAV300 [LSU ONLY] collected?	NUM	YN		.		Missing	702	20.6
					.S		Skipped	2368	69.6
					1		Yes	325	9.6
					2		No	6	0.2
CE_M3B_LAV300_WHY_NOT	CE_M3B_LAV300_WHY_NOT. Was Lavender tube LAV300 [LSU ONLY] collected? If no, why?	NUM	NOCOLLB		.		Missing	702	20.6
					.S		Skipped	2693	79.2
					1		Unable To Collect	4	0.1
					5		Other	2	0.1
CE_M3C_LAV300_OTHER_TXT	CE_M3C_LAV300_OTHER_TXT. Was Lavender tube LAV300 [LSU ONLY] collected? If 'other', specify [TEXT: SPECIFY]	CHAR	\$CHAR		.-				
CE_M3A_ACD100_COLLECTED_YN	CE_M3A_ACD100_COLLECTED_YN. Was Yellow tube ACD100 collected?	NUM	YN		.S		Skipped	50	1.5
					1		Yes	3327	97.8
					2		No	24	0.7
CE_M3B_ACD100_WHY_NOT	CE_M3B_ACD100_WHY_NOT. Was Yellow tube ACD100 collected? If no, why?	NUM	NOCOLLB		.S		Skipped	3377	99.3
					1		Unable To Collect	18	0.5

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					2		Medical Reason	2	0.1
					4		Refused	3	0.1
					5		Other	1	0.0
CE_M3C_ACD100_OTHER_TXT	CE_M3C_ACD100_OTHER_TXT. Was Yellow tube ACD100 collected? If 'other', specify [TEXT: SPECIFY]	CHAR	\$CHAR		.-.				
CE_M3A_ACD200_COLLECTED_YN	CE_M3A_ACD200_COLLECTED_YN. Was Yellow tube ACD200 collected?	NUM	YN		.S		Skipped	2368	69.6
					1		Yes	1019	30.0
					2		No	14	0.4
CE_M3B_ACD200_WHY_NOT	CE_M3B_ACD200_WHY_NOT. Was Yellow tube ACD200 collected? If no, why?	NUM	NOCOLLB		.S		Skipped	3387	99.6
					1		Unable To Collect	11	0.3
					2		Medical Reason	2	0.1
					9		Refused	1	0.0
CE_M3C_ACD200_OTHER_TXT	CE_M3C_ACD200_OTHER_TXT. Was Yellow tube ACD200 collected? If 'other', specify [TEXT: SPECIFY]	CHAR	\$CHAR		.-.				
CE_M3A_BLU101_COLLECTED_YN	CE_M3A_BLU101_COLLECTED_YN. Was Royal Blue tube BLU101 collected?	NUM	YN		.S		Skipped	50	1.5
					1		Yes	3315	97.5
					2		No	36	1.1
CE_M3B_BLU101_WHY_NOT	CE_M3B_BLU101_WHY_NOT. Was Royal Blue tube BLU101 collected? If no, why?	NUM	NOCOLLB		.S		Skipped	3365	98.9
					1		Unable To Collect	27	0.8
					2		Medical Reason	4	0.1
					5		Other	2	0.1
					9		Refused	3	0.1
CE_M3C_BLU101_OTHER_TXT	CE_M3C_BLU101_OTHER_TXT. Was Royal Blue tube BLU101 collected? If 'other', specify [TEXT: SPECIFY]	CHAR	\$CHAR		.-.				
CE_M3A_PAX101_COLLECTED_YN	CE_M3A_PAX101_COLLECTED_YN. Was Paxgene tube PAX101 collected?	NUM	YN		.S		Skipped	50	1.5
					1		Yes	3294	96.9
					2		No	57	1.7
CE_M3B_PAX101_WHY_NOT	CE_M3B_PAX101_WHY_NOT. Was Paxgene tube PAX101 collected? If no, why?	NUM	NOCOLLB		.S		Skipped	3344	98.3
					1		Unable To Collect	47	1.4

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						2	Medical Reason	4	0.1
						5	Other	3	0.1
						9	Refused	3	0.1
CE_M3C_PAX101_OTHER_TXT	CE_M3C_PAX101_OTHER_TXT. Was Paxgene tube PAX101 collected? If 'other', specify [TEXT: SPECIFY]	CHAR	SCHAR		.-.				
CE_N2_YN	CE_N2_YN. Participant selected for quality control blood draw. Did the participant agree to the collection of additional quality control blood tubes?	NUM	YN		.S		Skipped	3188	93.7
						1	Yes	208	6.1
						2	No	5	0.1
CE_N3A_QRED_COLLECTED_YN	CE_N3A_QRED_COLLECTED_YN. Was the Red quality control tube QRED collected?	NUM	YN		.S		Skipped	3193	93.9
						1	Yes	205	6.0
						2	No	3	0.1
CE_N3B_QRED_WHY_NOT	CE_N3B_QRED_WHY_NOT. Was the Red quality control tube QRED collected? If no, why?	NUM	NOCOLLB		.S		Skipped	3398	99.9
						1	Unable To Collect	3	0.1
CE_N3C_QRED_OTHER_TXT	CE_N3C_QRED_OTHER_TXT. Was the Red quality control tube QRED collected? If 'other', specify [TEXT: SPECIFY]	CHAR	SCHAR		.-.				
CE_N3A_QLAV_COLLECTED_YN	CE_N3A_QLAV_COLLECTED_YN. Was the Lavender quality control tube QLAV collected?	NUM	YN		.S		Skipped	3193	93.9
						1	Yes	201	5.9
						2	No	7	0.2
CE_N3B_QLAV_WHY_NOT	CE_N3B_QLAV_WHY_NOT. Was the Lavender quality control tube QLAV collected? If no, why?	NUM	NOCOLLB		.S		Skipped	3394	99.8
						1	Unable To Collect	6	0.2
						2	Medical Reason	1	0.0
CE_N3C_QLAV_OTHER_TXT	CE_N3C_QLAV_OTHER_TXT. Was the Lavender quality control tube QLAV collected? If 'other', specify [TEXT: SPECIFY]	CHAR	SCHAR		.-.				
CE_N3A_QACD_COLLECTED_YN	CE_N3A_QACD_COLLECTED_YN. Was the Yellow quality control tube QACD collected?	NUM	YN		.S		Skipped	3193	93.9
						1	Yes	200	5.9
						2	No	8	0.2

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VARIABLE NAME	LABEL (VAR)	TYPE	FORMAT	MEAN	RANGE	N	CATEGORY	FREQUENCY	PERCENT
CE_N3B_QACD_WHY_NOT	CE_N3B_QACD_WHY_NOT. Was the Yellow quality control tube QACD collected? If no, why?	NUM	NOCOLLB		.S		Skipped	3393	99.8
							Unable To Collect	7	0.2
							Medical Reason	1	0.0
CE_N3C_QACD_OTHER_TXT	CE_N3C_QACD_OTHER_TXT. Was the Yellow quality control tube QACD collected? If 'other', specify [TEXT: SPECIFY]	CHAR	\$CHAR		.-.				
CE_N3A_QBLU01_COLLECTED_YN	CE_N3A_QBLU01_COLLECTED_YN. Was the Royal Blue quality control tube QBLU collected?	NUM	YN		.S		Skipped	3193	93.9
							Yes	194	5.7
							No	14	0.4
CE_N3B_QBLU01_WHY_NOT	CE_N3B_QBLU01_WHY_NOT. Was the Royal Blue quality control tube QBLU collected? If no, why?	NUM	NOCOLLB		.S		Skipped	3387	99.6
							Unable To Collect	13	0.4
							Medical Reason	1	0.0
CE_N3C_QBLU01_OTHER_TXT	CE_N3C_QBLU01_OTHER_TXT. Was the Royal Blue quality control tube QBLU collected? If 'other', specify [TEXT: SPECIFY]	CHAR	\$CHAR		.-.				
CE_N5_YN	CE_N5_YN. Participant selected for expanded lymphocyte isolation blood collection. Did the participant agree to the collection of additional expanded lymphocyte isolation blood tubes?	NUM	YN		.		Missing	3	0.1
							Skipped	3068	90.2
							Yes	318	9.4
							No	12	0.4
CE_N6A_ACD300_COLLECTED_YN	CE_N6A_ACD300_COLLECTED_YN. Was the Yellow expanded lymphocyte isolation tube ACD300 collected?	NUM	YN		.		Missing	3	0.1
							Skipped	3080	90.6
							Yes	305	9.0
							No	13	0.4
CE_N6B_ACD300_WHY_NOT	CE_N6B_ACD300_WHY_NOT. Was the Yellow expanded lymphocyte isolation tube ACD300 collected? If no, why?	NUM	NOCOLLB		.		Missing	3	0.1
							Skipped	3385	99.5
							Unable To Collect	12	0.4
							Medical Reason	1	0.0
CE_N6C_ACD300_OTHER_TXT	CE_N6C_ACD300_OTHER_TXT. Was the Yellow expanded lymphocyte isolation tube ACD300 collected? If 'other', specify [TEXT: SPECIFY]	CHAR	\$CHAR		.-.				

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Organization of file: One Record per Participant (ID)

VARIABLE NAME	LABEL (VAR)	TYPE	FORMAT	MEAN	RANGE	N	CATEGORY	FREQUENCY	PERCENT
CE_N6A_ACD400_COLLECTED_YN	CE_N6A_ACD400_COLLECTED_YN. Was the Yellow expanded lymphocyte isolation tube ACD400 collected?	NUM	YN		.		Missing	3	0.1
							Skipped	3080	90.6
							Yes	301	8.9
							No	17	0.5
CE_N6B_ACD400_WHY_NOT	CE_N6B_ACD400_WHY_NOT. Was the Yellow expanded lymphocyte isolation tube ACD400 collected? If no, why?	NUM	NOCOLLB		.		Missing	3	0.1
							Skipped	3381	99.4
							Unable To Collect	15	0.4
							Medical Reason	1	0.0
							Other	1	0.0
CE_N6C_ACD400_OTHER_TXT	CE_N6C_ACD400_OTHER_TXT. Was the Yellow expanded lymphocyte isolation tube ACD400 collected? If 'other', specify [TEXT: SPECIFY]	CHAR	SCHAR		.-.				
CE_N6A_ACD500_COLLECTED_YN	CE_N6A_ACD500_COLLECTED_YN. Was the Yellow expanded lymphocyte isolation tube ACD500 collected?	NUM	YN		.		Missing	3	0.1
							Skipped	3080	90.6
							Yes	299	8.8
							No	19	0.6
CE_N6B_ACD500_WHY_NOT	CE_N6B_ACD500_WHY_NOT. Was the Yellow expanded lymphocyte isolation tube ACD500 collected? If no, why?	NUM	NOCOLLB		.		Missing	3	0.1
							Skipped	3379	99.4
							Unable To Collect	16	0.5
							Medical Reason	1	0.0
							Other	2	0.1
CE_N6C_ACD500_OTHER_TXT	CE_N6C_ACD500_OTHER_TXT. Was the Yellow expanded lymphocyte isolation tube ACD500 collected? If 'other', specify [TEXT: SPECIFY]	CHAR	SCHAR		.-.				
CE_N6A_ACD600_COLLECTED_YN	CE_N6A_ACD600_COLLECTED_YN. Was the Yellow expanded lymphocyte isolation tube ACD600 collected?	NUM	YN		.		Missing	3	0.1
							Skipped	3080	90.6
							Yes	294	8.6
							No	24	0.7
CE_N6B_ACD600_WHY_NOT	CE_N6B_ACD600_WHY_NOT. Was the Yellow expanded lymphocyte isolation tube ACD600 collected? If no, why?	NUM	NOCOLLB		.		Missing	3	0.1

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Organization of file: One Record per Participant (ID)

VARIABLE NAME	LABEL (VAR)	TYPE	FORMAT	MEAN	RANGE	N	CATEGORY	FREQUENCY	PERCENT
					.S		Skipped	3374	99.2
					1		Unable To Collect	22	0.6
					2		Medical Reason	1	0.0
					5		Other	1	0.0
CE_N6C_ACD600_OTHER_TXT	CE_N6C_ACD600_OTHER_TXT. Was the Yellow expanded lymphocyte isolation tube ACD600 collected? If 'other', specify [TEXT: SPECIFY]	CHAR	\$CHAR		.-.				
CE_O1_YN	CE_O1_YN. Was a finger stick capillary blood sample collected?	NUM	YN		1		Yes	3390	99.7
					2		No	11	0.3
CE_O1A_DATE	CE_O1A_DATE. Date of capillary blood sample [DATE: MM/DD/YYYY]	NUM	MMDDYY	07/02/15	08/27/14-06/30/16	3389	MISSING	1	0.0
					SKIPPE D			11	0.3
CE_O1B_TIME	CE_O1B_TIME. Enter time of capillary blood sample collection [TIME: HH:MM AM/PM]	NUM	TIME	11:04	7:47-17:21	3385	MISSING	5	0.1
					SKIPPE D			11	0.3
CE_O1C	CE_O1C. Was a finger stick capillary blood sample collected? If no, provide a reason	NUM	NOCOLLC		.S		Skipped	3390	99.7
					2		Medical Reason	1	0.0
					5		Other, Specify	1	0.0
					9		Refused	9	0.3
CE_O1C_OTHER_TXT	CE_O1C_OTHER_TXT. Was a finger stick capillary blood sample collected? If no, provide a reason OTHER, SPECIFY [TEXT: SPECIFY]	CHAR	\$CHAR		.-.				
CE_O2	CE_O2. Record hemoglobin A1C result	NUM	HEMOGLOBIN		.		Missing	10	0.3
					.S		Skipped	11	0.3
					1		< 2.5 %	1	0.0
					2		[enter Value Between 2.5 And 14%]	3374	99.2
					3		> 14.0 %	5	0.1
CE_O2_NUM	CE_O2_NUM. Recorded value of hemoglobin A1C result	NUM	BEST	5.7	4-14	3366	MISSING	18	0.5
					SKIPPE D			17	0.5
CE_O3A_TOTAL_CHOLESTEROL_NUM	CE_O3A_TOTAL_CHOLESTEROL_NUM. Recorded result of Total Cholesterol [UNIT: mg/dL]	NUM	BEST	182.5	0-427	3377	MISSING	13	0.4

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Organization of file: One Record per Participant (ID)

VARIABLE NAME	LABEL (VAR)	TYPE	FORMAT	MEAN	RANGE	N	CATEGORY	FREQUENCY	PERCENT
								11	0.3
					SKIPPE D				
CE_O3B_HDL_ CHOLESTEROL_NUM	CE_O3B_HDL_CHOLESTEROL_NUM. Recorded result of HDL Cholesterol [UNIT: mg/dL]	NUM	BEST	47.3	0-100	3377	MISSING	13	0.4
					SKIPPE D			11	0.3
CE_O3C_TRIGLYCERIDES_ NUM	CE_O3C_TRIGLYCERIDES_NUM. Recorded result of Triglycerides [UNIT: mg/dL]	NUM	BEST	158.4	0-650	3377	MISSING	13	0.4
					SKIPPE D			11	0.3
CE_O3D_LDL_ CHOLESTEROL_NUM	CE_O3D_LDL_CHOLESTEROL_NUM. Recorded result of LDL Cholesterol [UNIT: mg/dL]	NUM	BEST	95.3	0-312	3377	MISSING	13	0.4
					SKIPPE D			11	0.3
BASO_ABSOLUTE	BASO_ABSOLUTE. Baso (Absolute) - x10E3/uL	NUM		0.0	0-0	319	MISSING	3072	90.3
					SKIPPE D			10	0.3
BASOS	BASOS. Basos - %	NUM		0.4	0-3	319	MISSING	3072	90.3
					SKIPPE D			10	0.3
EOS	EOS. Eos - %	NUM		2.5	0-14	319	MISSING	3072	90.3
					SKIPPE D			10	0.3
EOS_ABSOLUTE	EOS_ABSOLUTE. Eos (Absolute) - x10E3/uL	NUM		0.2	0-1	319	MISSING	3072	90.3
					SKIPPE D			10	0.3
HEMATOCRIT	HEMATOCRIT. Hematocrit - %	NUM		42.5	27-54	319	MISSING	3072	90.3
					SKIPPE D			10	0.3
HEMOGLOBIN	HEMOGLOBIN. Hemoglobin - g/dL	NUM		14.2	9-18	319	MISSING	3072	90.3
					SKIPPE D			10	0.3
IMMATURE_CELLS	IMMATURE_CELLS. Immature Cells	NUM			MISSIN G			3390	99.7

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Organization of file: One Record per Participant (ID)

VARIABLE NAME	LABEL (VAR)	TYPE	FORMAT	MEAN	RANGE	N	CATEGORY	FREQUENCY	PERCENT
					SKIPPE D			11	0.3
IMMATURE_GRANS_ABS	IMMATURE_GRANS_ABS. Immature Grans (Absolute) - x10E3/uL	NUM		0.0	0-0	313	MISSING	3078	90.5
					SKIPPE D			10	0.3
IMMATURE_GRANULOCYTES	IMMATURE_GRANULOCYTES. Immature Granulocytes - %	NUM		0.1	0-4	313	MISSING	3078	90.5
					SKIPPE D			10	0.3
LYMPHS	LYMPHS. Lymphs - %	NUM		31.2	10-72	319	MISSING	3072	90.3
					SKIPPE D			10	0.3
LYMPHS_ABSOLUTE	LYMPHS_ABSOLUTE. Lymphs (Absolute) - x10E3/uL	NUM		2.1	0-6	319	MISSING	3072	90.3
					SKIPPE D			10	0.3
MCH	MCH. MCH - pg	NUM		29.5	19-36	319	MISSING	3072	90.3
					SKIPPE D			10	0.3
MCHC	MCHC. MCHC - g/dL	NUM		33.3	29-36	319	MISSING	3072	90.3
					SKIPPE D			10	0.3
MCV	MCV. MCV - fL	NUM		88.5	61-105	319	MISSING	3072	90.3
					SKIPPE D			10	0.3
MONOCYTES	MONOCYTES. Monocytes - %	NUM		7.5	1-16	319	MISSING	3072	90.3
					SKIPPE D			10	0.3
MONOCYTES_ABSOLUTE	MONOCYTES_ABSOLUTE. Monocytes (Absolute) - x10E3/uL	NUM		0.5	0-1	319	MISSING	3072	90.3
					SKIPPE D			10	0.3
NEUTROPHILS	NEUTROPHILS. Neutrophils - %	NUM		58.3	10-82	319	MISSING	3072	90.3
					SKIPPE D			10	0.3
NEUTROPHILS_ABSOLUTE	NEUTROPHILS_ABSOLUTE. Neutrophils (Absolute) - x10E3/uL	NUM		4.1	1-11	319	MISSING	3072	90.3

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VARIABLE NAME	LABEL (VAR)	TYPE	FORMAT	MEAN	RANGE	N	CATEGORY	FREQUENCY	PERCENT
					SKIPPE D			10	0.3
NRBC	NRBC. NRBC - %	NUM			MISSIN G			3390	99.7
					SKIPPE D			11	0.3
PLATELETS	PLATELETS. Platelets - x10E3/uL	NUM		246.2	91-544	318	MISSING	3073	90.4
					SKIPPE D			10	0.3
RBC	RBC. RBC - x10E6/uL	NUM		4.8	3-6	319	MISSING	3072	90.3
					SKIPPE D			10	0.3
RDW	RDW. RDW - %	NUM		14.2	12-21	319	MISSING	3072	90.3
					SKIPPE D			10	0.3
WBC	WBC. WBC - x10E3/uL	NUM		6.8	3-15	319	MISSING	3072	90.3
					SKIPPE D			10	0.3
WRITTEN_AUTHORIZATION	WRITTEN_AUTHORIZATION. Written Authorization	CHAR	\$.-.				
VERBAL_ORDER	VERBAL_ORDER. Verbal Order	CHAR	\$.-.				
REQUEST_PROBLEM	REQUEST_PROBLEM. Request Problem	CHAR	\$.-.				
SPECIMEN_STATUS_REPORT	SPECIMEN_STATUS_REPORT. Specimen Status Report	CHAR	\$.-.				
EXAM_SAMPLE	EXAM_SAMPLE. Selected for clinical exam	NUM	DYNF		.		Missing	3069	90.2
					.S		Skipped	10	0.3
					1		Yes	322	9.5
CBC_WBC_ALT	CBC_WBC_ALT. WBC - Alert	NUM	CBC_ALERT		.		Missing	3069	90.2
					.S		Skipped	10	0.3
					3		High	17	0.5
					4		Low	11	0.3
					5		No	294	8.6

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VARIABLE NAME	LABEL (VAR)	TYPE	FORMAT	MEAN	RANGE	N	CATEGORY	FREQUENCY	PERCENT
CBC_HEMOG_ALT	CBC_HEMOG_ALT. Hemoglobin - Alert	NUM	CBC_ALERT		.		Missing	3069	90.2
					.S		Skipped	10	0.3
					2		Alert - Low	12	0.4
					3		High	7	0.2
					4		Low	12	0.4
					5		No	291	8.6
CBC_HEMATO_ALT	CBC_HEMATO_ALT. Hematocrit - Alert	NUM	CBC_ALERT		.		Missing	3069	90.2
					.S		Skipped	10	0.3
					1		Alert - High	1	0.0
					5		No	321	9.4
CBC_PLAT_ALT	CBC_PLAT_ALT. Platelets - Alert	NUM	CBC_ALERT		.		Missing	3069	90.2
					.S		Skipped	10	0.3
					1		Alert - High	1	0.0
					5		No	321	9.4

DATA SET: ce_visual_20170928_c

DATE CREATED: 09/28/2017

Number of Observations: 3401

Number of Variables: 46

Organization of file: One Record per Participant (ID)

VARIABLE NAME	LABEL (VAR)	TYPE	FORMAT	MEAN	RANGE	N	CATEGORY	FREQUENCY	PERCENT
GULFID	GULFID. GULF ID	CHAR	\$.-				
CE_P1_YN	CE_P1_YN. Do you normally wear or use glasses, contacts or something else to help you see at a distance (for example, while driving a car)?	NUM	DKREFYN		.		Missing	11	0.3
					1		Yes	1186	34.9
					2		No	2201	64.7
					8		Don't Know	1	0.0
					9		Refused	2	0.1
CE_P1A_YN	CE_P1A_YN. Are you wearing them or do you have them with you today?	NUM	DKREFYN		.		Missing	14	0.4
					.S		Skipped	2204	64.8
					1		Yes	979	28.8
					2		No	204	6.0
CE_P2_YN	CE_P2_YN. Was visual acuity test attempted?	NUM	YN		.		Missing	6	0.2
					1		Yes	3387	99.6
					2		No	8	0.2
CE_P2A	CE_P2A. Was visual acuity test attempted? If no, provide a reason	NUM	NOCOLL		.		Missing	6	0.2
					.S		Skipped	3387	99.6
					3		Other, Specify	6	0.2
					9		Refused	2	0.1
CE_P2A_OTHER_TXT	CE_P2A_OTHER_TXT. Was visual acuity test attempted? If no, provide a reason OTHER, SPECIFY [TEXT: SPECIFY]	CHAR	\$CHAR		.-				
CE_P3_DATE	CE_P3_DATE. Date of visual acuity test [DATE: MM/DD/YYYY]	NUM	MMDDYY	07/02/15	08/27/14-06/30/16	3384	MISSING	9	0.3
					SKIPPE D			8	0.2
CE_P4_START_TIME	CE_P4_START_TIME. Start time of visual acuity test [TIME: HH:MM (00:00-23:59)]	NUM	TIME	11:22	7:57-17:40	3387	MISSING	6	0.2
					SKIPPE D			8	0.2
CE_P4A_NUM	CE_P4A_NUM. Highest row selected for the visual acuity test	NUM	ACUTTY		.		Missing	6	0.2
					.S		Skipped	8	0.2
					1		1	49	1.4
					2		2	89	2.6

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VARIABLE NAME	LABEL (VAR)	TYPE	FORMAT	MEAN	RANGE	N	CATEGORY	FREQUENCY	PERCENT
							3	149	4.4
							4	366	10.8
							5	570	16.8
							6	1118	32.9
							7	954	28.1
							8	92	2.7
							Results Not Obtained		
CE_P5_YN	CE_P5_YN. Was participant wearing corrective lenses?	NUM	YN				Missing	7	0.2
							Skipped	100	2.9
							Yes	1234	36.3
							No	2060	60.6
CE_P6	CE_P6. If result not obtained, provide a reason	NUM	NOCOLL				Missing	7	0.2
							Skipped	3302	97.1
							Equipment Malfunction	2	0.1
							Examinee Unable To Understand/Follow Directions	5	0.1
							Other, Specify	85	2.5
CE_P6_OTHER_TXT	CE_P6_OTHER_TXT. If result not obtained, provide a reason OTHER, SPECIFY [TEXT: SPECIFY]	CHAR	\$CHAR						
CE_P6A_STOP_TIME	CE_P6A_STOP_TIME. Stop time of visual acuity test [TIME: HH:MM (00:00-23:59)]	NUM	TIME	11:23	7:57-17:42	3386	MISSING	7	0.2
							SKIPPED	8	0.2
CE_P7_YN	CE_P7_YN. Was contrast sensitivity test attempted?	NUM	YN				Missing	5	0.1
							Yes	3383	99.5
							No	13	0.4
CE_P7A	CE_P7A. Was contrast sensitivity test attempted? If no, provide a reason	NUM	NOCOLL				Missing	5	0.1
							Skipped	3383	99.5
							Examinee Unable To Understand/Follow Directions	1	0.0
							Other, Specify	10	0.3
							Refused	2	0.1
CE_P7A_OTHER_TXT	CE_P7A_OTHER_TXT. Was contrast sensitivity test attempted? If no, provide a reason OTHER, SPECIFY [TEXT: SPECIFY]	CHAR	\$CHAR						

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VARIABLE NAME	LABEL (VAR)	TYPE	FORMAT	MEAN	RANGE	N	CATEGORY	FREQUENCY	PERCENT
CE_P8_DATE	CE_P8_DATE. Date of contrast sensitivity test [DATE: MM/DD/YYYY]	NUM	MMDDYY	07/02/15	08/27/14-06/30/16	3375	MISSING	13	0.4
					SKIPPE D			13	0.4
CE_P9_START_TIME	CE_P9_START_TIME. Start time of contrast sensitivity test [TIME: HH:MM (00:00-23:59)]	NUM	TIME	11:24	7:57-17:42	3383	MISSING	5	0.1
					SKIPPE D			13	0.4
CE_P10A_NUM	CE_P10A_NUM. Test A result value	NUM	CONTRAST_RESULT		.		Missing	7	0.2
					.S		Skipped	13	0.4
					1		1	13	0.4
					2		2	27	0.8
					3		3	31	0.9
					4		4	1880	55.3
					5		5	748	22.0
					6		6	544	16.0
					7		7	71	2.1
					8		8	7	0.2
					9		9	6	0.2
					10		Participant Unable To Understand/Follow Instructions	5	0.1
					12		Other,specify	49	1.4
CE_P10A_OTHER_TXT	CE_P10A_OTHER_TXT. Test A result value OTHER, SPECIFY [TEXT: SPECIFY]	CHAR	\$CHAR		.-.				
CE_P10B_NUM	CE_P10B_NUM. Test B result value	NUM	CONTRAST_RESULT		.		Missing	7	0.2
					.S		Skipped	13	0.4
					1		1	16	0.5
					2		2	29	0.9
					3		3	101	3.0
					4		4	576	16.9
					5		5	846	24.9
					6		6	1503	44.2
					7		7	281	8.3

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VARIABLE NAME	LABEL (VAR)	TYPE	FORMAT	MEAN	RANGE	N	CATEGORY	FREQUENCY	PERCENT
					8		8	10	0.3
					9		9	9	0.3
					10		Participant Unable To Understand/Follow Instructions	5	0.1
					12		Other,specify	5	0.1
CE_P10B_OTHER_TXT	CE_P10B_OTHER_TXT. Test B result value OTHER, SPECIFY [TEXT: SPECIFY]	CHAR	\$CHAR		.-				
CE_P10C_NUM	CE_P10C_NUM. Test C result value	NUM	CONTRAST_RESULT		.		Missing	7	0.2
					.S		Skipped	13	0.4
					1		1	22	0.6
					2		2	75	2.2
					3		3	276	8.1
					4		4	950	27.9
					5		5	163	4.8
					6		6	966	28.4
					7		7	783	23.0
					8		8	20	0.6
					9		9	112	3.3
					10		Participant Unable To Understand/Follow Instructions	7	0.2
					12		Other,specify	7	0.2
CE_P10C_OTHER_TXT	CE_P10C_OTHER_TXT. Test C result value OTHER, SPECIFY [TEXT: SPECIFY]	CHAR	\$CHAR		.-				
CE_P10D_NUM	CE_P10D_NUM. Test D result value	NUM	CONTRAST_RESULT		.		Missing	7	0.2
					.S		Skipped	13	0.4
					1		1	28	0.8
					2		2	243	7.1
					3		3	620	18.2
					4		4	440	12.9
					5		5	296	8.7
					6		6	1233	36.3
					7		7	397	11.7
					8		8	9	0.3
					9		9	84	2.5

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VARIABLE NAME	LABEL (VAR)	TYPE	FORMAT	MEAN	RANGE	N	CATEGORY	FREQUENCY	PERCENT
					10		Participant Unable To Understand/Follow Instructions	7	0.2
					12		Other,specify	24	0.7
CE_P10D_OTHER_TXT	CE_P10D_OTHER_TXT. Test D result value OTHER, SPECIFY [TEXT: SPECIFY]	CHAR	\$CHAR		.-				
CE_P10E_NUM	CE_P10E_NUM. Test E result value	NUM	CONTRAST_RESULT		.		Missing	7	0.2
					.S		Skipped	13	0.4
					1		1	232	6.8
					2		2	169	5.0
					3		3	469	13.8
					4		4	787	23.1
					5		5	594	17.5
					6		6	797	23.4
					7		7	96	2.8
					8		8	5	0.1
					9		9	12	0.4
					10		Participant Unable To Understand/Follow Instructions	13	0.4
					12		Other,specify	207	6.1
CE_P10E_OTHER_TXT	CE_P10E_OTHER_TXT. Test E result value OTHER, SPECIFY [TEXT: SPECIFY]	CHAR	\$CHAR		.-				
CE_P11_STOP_TIME	CE_P11_STOP_TIME. Stop time of contrast sensitivity test [TIME: HH:MM (00:00-23:59)]	NUM	TIME	11:26	7:59-17:45	3380	MISSING	8	0.2
					SKIPPE D			13	0.4

DATA SET: ce_grip_strength_20170928_c

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Number of Observations: 3401

Number of Variables: 35

Organization of file: One Record per Participant (ID)

VARIABLE NAME	LABEL (VAR)	TYPE	FORMAT	MEAN	RANGE	N	CATEGORY	FREQUENCY	PERCENT
GULFID	GULFID. GULF ID	CHAR	\$.-				
CE_Q1_YN	CE_Q1_YN. Did participant attempt hang/grip strength test?	NUM	YN		.		Missing	5	0.1
					1		Yes	3393	99.8
					2		No	3	0.1
CE_Q1A	CE_Q1A. Did participant attempt hang/grip strength test? If no, provide a reason	NUM	NOCOLL		.		Missing	5	0.1
					.S		Skipped	3393	99.8
					3		Other, Specify	1	0.0
					9		Refused	2	0.1
CE_Q1A_OTHER_TXT	CE_Q1A_OTHER_TXT. Did participant attempt hang/grip strength test? If no, provide a reason OTHER, SPECIFY [TEXT: SPECIFY]	CHAR	\$CHAR		.-				
CE_Q2_DATE	CE_Q2_DATE. Date of hand/grip strength test [DATE: MM/DD/YYYY]	NUM	MMDDYY	07/02/15	08/27/14-06/30/16	3392	MISSING	6	0.2
					SKIPPE D			3	0.1
CE_Q3	CE_Q3. Are you right handed, left handed, or do you use both hands equally to write with and complete most other tasks?	NUM	HANDED		.		Missing	6	0.2
					.S		Skipped	3	0.1
					1		Right Handed	2947	86.7
					2		Left Handed	297	8.7
					3		Ambidextrous (Use Both Hands Equally)	147	4.3
					8		Don't Know	1	0.0
CE_Q4_START_TIME	CE_Q4_START_TIME. Start time of hand/grip strength test [TIME: HH:MM (00:00-23:59)]	NUM	TIME	11:27	8:00-17:46	3392	MISSING	6	0.2
					SKIPPE D			3	0.1
CE_Q5A_TRIAL_1_RIGHT_NUM	CE_Q5A_TRIAL_1_RIGHT_NUM. Right hand grip trial 1 results [UNIT: LBS]	NUM	BEST	109.4	7-200	3378	MISSING	20	0.6
					SKIPPE D			3	0.1
CE_Q5B_TRIAL_2_RIGHT_NUM	CE_Q5B_TRIAL_2_RIGHT_NUM. Right hand grip trial 2 results [UNIT: LBS]	NUM	BEST	106.2	6-200	3378	MISSING	20	0.6
					SKIPPE D			3	0.1

DATA SET: ce_grip_strength_20170928_c

DATE CREATED: 09/28/2017

Number of Observations: 3401

Number of Variables: 35

Organization of file: One Record per Participant (ID)

VARIABLE NAME	LABEL (VAR)	TYPE	FORMAT	MEAN	RANGE	N	CATEGORY	FREQUENCY	PERCENT
CE_Q5C_TRIAL_3_RIGHT_NUM	CE_Q5C_TRIAL_3_RIGHT_NUM. Right hand grip trial 3 results [UNIT: LBS]	NUM	BEST	103.0	6-200	3378	MISSING	20	0.6
					SKIPPE D			3	0.1
CE_Q5D_TRIAL_4_RIGHT_YN	CE_Q5D_TRIAL_4_RIGHT_YN. Were all right hand grip trials done?	NUM	YN	.			Missing	8	0.2
				.S			Skipped	3	0.1
				1			Yes	3376	99.3
				2			No	14	0.4
CE_Q5E_REASON_RIGHT	CE_Q5E_REASON_RIGHT. Were all right hand grip trials done? NO: Reason	NUM	NOCOLLH	.			Missing	8	0.2
				.S			Skipped	3379	99.4
				3			Other, Specify	14	0.4
CE_Q5E1_NOTE_RIGHT_TXT	CE_Q5E1_NOTE_RIGHT_TXT. Were all right hand grip trials done? NO: Reason OTHER [TEXT: SPECIFY]	CHAR	\$CHAR	.-					
CE_Q5A_TRIAL_1_LEFT_NUM	CE_Q5A_TRIAL_1_LEFT_NUM. Left hand grip trial 1 results [UNIT: LBS]	NUM	BEST	105.6	4-200	3381	MISSING	17	0.5
					SKIPPE D			3	0.1
CE_Q5B_TRIAL_2_LEFT_NUM	CE_Q5B_TRIAL_2_LEFT_NUM. Left hand grip trial 2 results [UNIT: LBS]	NUM	BEST	101.3	12-200	3380	MISSING	18	0.5
					SKIPPE D			3	0.1
CE_Q5C_TRIAL_3_LEFT_NUM	CE_Q5C_TRIAL_3_LEFT_NUM. Left hand grip trial 3 results [UNIT: LBS]	NUM	BEST	97.5	11-200	3379	MISSING	19	0.6
					SKIPPE D			3	0.1
CE_Q5D_TRIAL_4_LEFT_YN	CE_Q5D_TRIAL_4_LEFT_YN. Were all left hand grip trials done?	NUM	YN	.			Missing	8	0.2
				.S			Skipped	3	0.1
				1			Yes	3378	99.3
				2			No	12	0.4
CE_Q5E_REASON_LEFT	CE_Q5E_REASON_LEFT. Were all left hand grip trials done? NO: Reason	NUM	NOCOLLH	.			Missing	8	0.2
				.S			Skipped	3381	99.4
				3			Other, Specify	11	0.3
				9			Refused	1	0.0
CE_Q5E1_NOTE_LEFT_TXT	CE_Q5E1_NOTE_LEFT_TXT. Were all left hand grip trials done? NO: Reason OTHER [TEXT: SPECIFY]	CHAR	\$CHAR	.-					

DATA SET: ce_grip_strength_20170928_c

DATE CREATED: 09/28/2017

Number of Observations: 3401

Number of Variables: 35

Organization of file: One Record per Participant (ID)

VARIABLE NAME	LABEL (VAR)	TYPE	FORMAT	MEAN	RANGE	N	CATEGORY	FREQUENCY	PERCENT
CE_Q6_STOP_TIME	CE_Q6_STOP_TIME. Stop time of hand/grip strength test [TIME: HH:MM (00:00-23:59)]	NUM	TIME	11:30	8:02-17:48	3390	MISSING	8	0.2
					SKIPPE D			3	0.1

DATA SET: ce_vibrotactile_20170928_c

DATE CREATED: 09/28/2017

Number of Observations: 3401

Number of Variables: 41

Organization of file: One Record per Participant (ID)

VARIABLE NAME	LABEL (VAR)	TYPE	FORMAT	MEAN	RANGE	N	CATEGORY	FREQUENCY	PERCENT
GULFID	Gulf ID	CHAR	\$.-				
CE_R1_YN	CE_R1_YN. Was vibrotactile threshold test attempted?	NUM	YN		.		Missing	5	0.1
					1		Yes	3384	99.5
					2		No	12	0.4
CE_R1A	CE_R1A. Was vibrotactile threshold test attempted? If no, provide a reason	NUM	NOCOLL		.		Missing	5	0.1
					.S		Skipped	3384	99.5
					1		Equipment Malfunction	2	0.1
					3		Other, Specify	5	0.1
					9		Refused	5	0.1
CE_R1A_OTHER_TXT	CE_R1A_OTHER_TXT. Was vibrotactile threshold test attempted? If no, provide a reason OTHER, SPECIFY [TEXT: SPECIFY]	CHAR	\$CHAR		.-				
CE_R2_DATE	CE_R2_DATE. Date of vibrotactile threshold test [DATE: MM/DD/YYYY]	NUM	MMDDYY	07/02/15	08/27/14-06/30/16	3384	MISSING	5	0.1
					SKIPPE D			12	0.4
CE_R3_START_TIME	CE_R3_START_TIME. Start time of vibrotactile threshold test [TIME: HH:MM (00:00-23:59)]	NUM	TIME	11:30	8:02-17:48	3383	MISSING	6	0.2
					SKIPPE D			12	0.4
CE_R4A_RIGHT_TOE_1_DOWN_NUM	CE_R4A_RIGHT_TOE_1_DOWN_NUM. Result of Trial 1 right toe down	NUM	BEST	3.9	0-20	3337	MISSING	52	1.5
					SKIPPE D			12	0.4
CE_R4A_RIGHT_TOE_2_UP_NUM	CE_R4A_RIGHT_TOE_2_UP_NUM. Result of Trial 2 right toe up	NUM	BEST	4.5	0-22	3326	MISSING	63	1.9
					SKIPPE D			12	0.4
CE_R4A_RIGHT_TOE_3_DOWN_NUM	CE_R4A_RIGHT_TOE_3_DOWN_NUM. Result of Trial 3 right toe down	NUM	BEST	3.9	0-22	3325	MISSING	64	1.9
					SKIPPE D			12	0.4
CE_R4A_RIGHT_TOE_4_UP_NUM	CE_R4A_RIGHT_TOE_4_UP_NUM. Result of Trial 4 right toe up	NUM	BEST	4.6	0-22	3321	MISSING	68	2.0
					SKIPPE D			12	0.4

DATA SET: ce_vibrotactile_20170928_c

DATE CREATED: 09/28/2017

Number of Observations: 3401

Number of Variables: 41

Organization of file: One Record per Participant (ID)

VARIABLE NAME	LABEL (VAR)	TYPE	FORMAT	MEAN	RANGE	N	CATEGORY	FREQUENCY	PERCENT
CE_R4A_RIGHT_TOE_5_DOWN_NUM	CE_R4A_RIGHT_TOE_5_DOWN_NUM. Result of Trial 5 right toe down	NUM	BEST	3.9	0-21	3319	MISSING	70	2.1
							SKIPPED	12	0.4
CE_R4A_RIGHT_TOE_TRIAL_DONE_YN	CE_R4A_RIGHT_TOE_TRIAL_DONE_YN. Were all right toe trials done?	NUM	YN				Missing	8	0.2
							Skipped	12	0.4
							Yes	3319	97.6
							No	62	1.8
CE_R4A_RIGHT_TOE_REASON	CE_R4A_RIGHT_TOE_REASON. Were all right toe trials done? NO: Reason	NUM	NOCOLLE				Missing	8	0.2
							Skipped	3331	97.9
							Participant Unable To Understand / Follow Instructions	19	0.6
							Other	43	1.3
CE_R4A_RIGHT_TOE_REASON_NOTE_TXT	CE_R4A_RIGHT_TOE_REASON_NOTE_TXT. Were all right toe trials done? NO: Reason OTHER [TEXT: SPECIFY]	CHAR	\$CHAR		.-.				
CE_R4B_LEFT_TOE_1_DOWN_NUM	CE_R4B_LEFT_TOE_1_DOWN_NUM. Result of Trial 1 left toe down	NUM	BEST	3.9	0-21	3351	MISSING	38	1.1
							SKIPPED	12	0.4
CE_R4B_LEFT_TOE_2_UP_NUM	CE_R4B_LEFT_TOE_2_UP_NUM. Result of Trial 2 left toe up	NUM	BEST	4.6	1-22	3348	MISSING	41	1.2
							SKIPPED	12	0.4
CE_R4B_LEFT_TOE_3_DOWN_NUM	CE_R4B_LEFT_TOE_3_DOWN_NUM. Result of Trial 3 left toe down	NUM	BEST	4.0	0-22	3347	MISSING	42	1.2
							SKIPPED	12	0.4
CE_R4B_LEFT_TOE_4_UP_NUM	CE_R4B_LEFT_TOE_4_UP_NUM. Result of Trial 4 left toe up	NUM	BEST	4.7	1-22	3343	MISSING	46	1.4
							SKIPPED	12	0.4
CE_R4B_LEFT_TOE_5_DOWN_NUM	CE_R4B_LEFT_TOE_5_DOWN_NUM. Result of Trial 5 left toe down	NUM	BEST	4.0	0-22	3343	MISSING	46	1.4

DATA SET: ce_vibrotactile_20170928_c
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 Organization of file: One Record per Participant (ID)

VARIABLE NAME	LABEL (VAR)	TYPE	FORMAT	MEAN	RANGE	N	CATEGORY	FREQUENCY	PERCENT
					SKIPPE D			12	0.4
CE_R4B_LEFT_TOE_TRIAL_DONE_YN	CE_R4B_LEFT_TOE_TRIAL_DONE_YN. Were all left toe trials done?	NUM	YN		.		Missing	8	0.2
					.S		Skipped	12	0.4
					1		Yes	3342	98.3
					2		No	39	1.1
CE_R4B_LEFT_TOE_REASON	CE_R4B_LEFT_TOE_REASON. Were all left toe trials done? NO: Reason	NUM	NOCOLLE		.		Missing	8	0.2
					.S		Skipped	3354	98.6
					1		Equipment Malfunction	1	0.0
					2		Participant Unable To Understand / Follow Instructions	11	0.3
					5		Other	27	0.8
CE_R4B_LEFT_TOE_REASON_NOTE_TXT	CE_R4B_LEFT_TOE_REASON_NOTE_TXT. Were all left toe trials done? NO: Reason OTHER [TEXT: SPECIFY]	CHAR	\$CHAR		.-.				
CE_R5_STOP_TIME	CE_R5_STOP_TIME. Stop time of vibrotactile threshold test [TIME: HH:MM (00:00-23:59)]	NUM	TIME	11:35	8:05-17:53	3384	MISSING	5	0.1
					SKIPPE D			12	0.4

DATA SET: ce_accusway_20170928_c

DATE CREATED: 09/28/2017

Number of Observations: 3401

Number of Variables: 18

Organization of file: One Record per Participant (ID)

VARIABLE NAME	LABEL (VAR)	TYPE	FORMAT	MEAN	RANGE	N	CATEGORY	FREQUENCY	PERCENT
GULFID	Gulf ID	CHAR	\$.-.				
CE_S1_YN	CE_S1_YN. Was postural stability/standing steadiness test (sway) performed?	NUM	YN		.		Missing	5	0.1
					1		Yes	3361	98.8
					2		No	35	1.0
CE_S1A	CE_S1A. Was postural stability/standing steadiness test (sway) performed? If no, provide a reason	NUM	NOCOLL		.		Missing	5	0.1
					.S		Skipped	3361	98.8
					1		Equipment Malfunction	4	0.1
					2		Examinee Unable To Understand/Follow Directions	2	0.1
					3		Other, Specify	27	0.8
					9		Refused	2	0.1
CE_S1A_OTHER_TXT	CE_S1A_OTHER_TXT. Was postural stability/standing steadiness test (sway) performed? If no, provide a reason OTHER, SPECIFY [TEXT: SPECIFY]	CHAR	\$CHAR		.-.				
CE_S2_DATE	CE_S2_DATE. Date of postural stability/standing steadiness (sway) test [DATE: MM/DD/YYYY]	NUM	MMDDYY	07/02/15	08/27/14-06/30/16	3361	MISSING	5	0.1
					SKIPPE D			35	1.0
CE_S3_START_TIME	CE_S3_START_TIME. Start time of postural stability/standing steadiness (sway) test [TIME: HH:MM (00:00-23:59)]	NUM	TIME	11:36	8:05-17:54	3360	MISSING	6	0.2
					SKIPPE D			35	1.0
CE_S3A	CE_S3A. Enter problems encountered during accusway test	NUM	NONEOTH		.		Missing	6	0.2
					.S		Skipped	312	9.2
					1		None	2884	84.8
					2		Other, Specify	199	5.9
CE_S3A_OTHER_TXT	CE_S3A_OTHER_TXT. Enter problems encountered during accusway test OTHER, SPECIFY [TEXT: SPECIFY]	CHAR	\$CHAR		.-.				
CE_S4_STOP_TIME	CE_S4_STOP_TIME. Stop time of postural stability/standing steadiness (sway) test [TIME: HH:MM (00:00-23:59)]	NUM	TIME	11:44	8:12-18:03	3340	MISSING	26	0.8
					SKIPPE D			35	1.0
CE_S_1_EYES_OPEN	CE_S_1_EYES_OPEN. Postural stability/standing steadiness (sway) test _1_Eyes_Open	NUM	BEST	40.5	1-383	3341	MISSING	60	1.8

DATA SET: ce_accusway_20170928_c

DATE CREATED: 09/28/2017

Number of Observations: 3401

Number of Variables: 18

Organization of file: One Record per Participant (ID)

VARIABLE NAME	LABEL (VAR)	TYPE	FORMAT	MEAN	RANGE	N	CATEGORY	FREQUENCY	PERCENT
CE_S_2_EYES_CLOSED	CE_S_2_EYES_CLOSED. Postural stability/standing steadiness (sway) test _2_Eyes_Closed	NUM	BEST	62.3	1-777	3330	MISSING	71	2.1
CE_S_3_EYES_OPEN	CE_S_3_EYES_OPEN. Postural stability/standing steadiness (sway) test _3_Eyes_Open	NUM	BEST	40.6	1-777	3325	MISSING	76	2.2
CE_S_4_EYES_CLOSED	CE_S_4_EYES_CLOSED. Postural stability/standing steadiness (sway) test _4_Eyes_Closed	NUM	BEST	62.4	1-777	3275	MISSING	126	3.7

DATA SET: ce_single_leg_stance_20170928_c
 DATE CREATED: 09/28/2017
 Number of Observations: 3401
 Number of Variables: 31
 Organization of file: One Record per Participant (ID)

VARIABLE NAME	LABEL (VAR)	TYPE	FORMAT	MEAN	RANGE	N	CATEGORY	FREQUENCY	PERCENT
GULFID	Gulf ID	CHAR	\$.-				
CE_T1_YN	CE_T1_YN. Was one leg stand trial 1 attempted?	NUM	YN		.		Missing	5	0.1
					1		Yes	3316	97.5
					2		No	80	2.4
CE_T1A	CE_T1A. Was one leg stand trial 1 attempted? If no, provide a reason	NUM	NOCOLLF		.		Missing	5	0.1
					.S		Skipped	3316	97.5
					1		Examinee Unable To Understand/Follow Directions	2	0.1
					2		Other, Specify	65	1.9
					9		Refused	13	0.4
CE_T1A_OTHER_TXT	CE_T1A_OTHER_TXT. Was one leg stand trial 1 attempted? If no, provide a reason OTHER, SPECIFY [TEXT: SPECIFY]	CHAR	\$CHAR		.-				
CE_T1B_START_TIME	CE_T1B_START_TIME. Start time of single leg stance test [TIME: HH:MM (00:00-23:59)]	NUM	TIME	11:41	8:12-17:11	3053	MISSING	6	0.2
					1		SKIPPED	342	10.1
CE_T2	CE_T2. Record result of one leg stand trial 1	NUM	HOLD		.		Missing	5	0.1
					.S		Skipped	80	2.4
					1		Unable To Attain Position	66	1.9
					2		Unable To Hold For 1 Sec	51	1.5
					3		Holds For 1 Sec But < 30 Sec	1309	38.5
					4		Holds For 30 Sec	1890	55.6
CE_T2_NUM	CE_T2_NUM. Recorded result value of one leg stand trial 1	NUM		10.8	1-30	1309	MISSING	5	0.1
					SKIPPED			2087	61.4
CE_T3_YN	CE_T3_YN. Was one leg stand trial 2 performed?	NUM	YN		.		Missing	5	0.1
					.S		Skipped	2087	61.4
					1		Yes	1304	38.3
					2		No	5	0.1
CE_T3A	CE_T3A. Was one leg stand trial 2 performed? If no, provide a reason	NUM	NOCOLLF		.		Missing	5	0.1
					.S		Skipped	3391	99.7
					2		Other, Specify	2	0.1

DATA SET: ce_single_leg_stance_20170928_c

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Number of Variables: 31

Organization of file: One Record per Participant (ID)

VARIABLE NAME	LABEL (VAR)	TYPE	FORMAT	MEAN	RANGE	N	CATEGORY	FREQUENCY	PERCENT
					9		Refused	3	0.1
CE_T3A_OTHER_TXT	CE_T3A_OTHER_TXT. Was one leg stand trial 2 performed? If no, provide a reason OTHER, SPECIFY [TEXT: SPECIFY]	CHAR	\$CHAR		.-.				
CE_T4	CE_T4. Record result of one leg stand trial 2	NUM	HOLD		.		Missing	5	0.1
					.S		Skipped	2092	61.5
					1		Unable To Attain Position	11	0.3
					2		Unable To Hold For 1 Sec	11	0.3
					3		Holds For 1 Sec But < 30 Sec	858	25.2
					4		Holds For 30 Sec	424	12.5
CE_T4_NUM	CE_T4_NUM. Recorded result value of one leg stand trial 2	NUM		11.0	1-30	858	MISSING	5	0.1
					SKIPPE D			2538	74.6
CE_T5_YN	CE_T5_YN. Was one leg stand trial 3 performed?	NUM	YN		.		Missing	5	0.1
					.S		Skipped	2538	74.6
					1		Yes	845	24.8
					2		No	13	0.4
CE_T5A	CE_T5A. Was one leg stand trial 3 performed? If no, provide a reason	NUM	NOCOLLF		.		Missing	5	0.1
					.S		Skipped	3383	99.5
					2		Other, Specify	7	0.2
					9		Refused	6	0.2
CE_T5A_OTHER_TXT	CE_T5A_OTHER_TXT. Was one leg stand trial 3 performed? If no, provide a reason OTHER, SPECIFY [TEXT: SPECIFY]	CHAR	\$CHAR		.-.				
CE_T6	CE_T6. Record result of one leg stand trial 3	NUM	HOLD		.		Missing	5	0.1
					.S		Skipped	2551	75.0
					1		Unable To Attain Position	7	0.2
					2		Unable To Hold For 1 Sec	10	0.3
					3		Holds For 1 Sec But < 30 Sec	627	18.4
					4		Holds For 30 Sec	201	5.9
CE_T6_NUM	CE_T6_NUM. Recorded result value of one leg stand trial 3	NUM		10.9	1-30	627	MISSING	5	0.1
					SKIPPE D			2769	81.4

DATA SET: ce_single_leg_stance_20170928_c
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 Number of Observations: 3401
 Number of Variables: 31
 Organization of file: One Record per Participant (ID)

VARIABLE NAME	LABEL (VAR)	TYPE	FORMAT	MEAN	RANGE	N	CATEGORY	FREQUENCY	PERCENT
CE_T6A_STOP_TIME	CE_T6A_STOP_TIME. Stop time of single leg stance test [TIME: HH:MM (00:00-23:59)]	NUM	TIME	11:42	8:13-17:12	3054	MISSING	5	0.1
					SKIPPE D			342	10.1

DATA SET: ce_ldcw_20170928_c

DATE CREATED: 09/28/2017

Number of Observations: 3401

Number of Variables: 85

Organization of file: One Record per Participant (ID)

VARIABLE NAME	LABEL (VAR)	TYPE	FORMAT	MEAN	RANGE	N	CATEGORY	FREQUENCY	PERCENT
GULFID	Gulf ID	CHAR	\$.-				
CE_U1_YN	CE_U1_YN. Is there any reason you would feel unsafe or unable to complete the walking tests?	NUM	DKREFYN		.		Missing	44	1.3
					.S		Skipped	549	16.1
					1		Yes	112	3.3
					2		No	2692	79.2
					8		Don't Know	2	0.1
					9		Refused	2	0.1
CE_U1_SPECIFY_TXT	CE_U1_SPECIFY_TXT. Is there any reason you would feel unsafe or unable to complete the walking tests? YES, SPECIFY [TEXT: SPECIFY]	CHAR	\$CHAR		.-				
CE_U2_YN	CE_U2_YN. Will you need any walking aids or assistive devices such as crutches, a cane or walker to help you complete the walking tests today?	NUM	DKREFYN		.		Missing	44	1.3
					.S		Skipped	661	19.4
					1		Yes	24	0.7
					2		No	2669	78.5
					8		Don't Know	1	0.0
					9		Refused	2	0.1
CE_U3_YN	CE_U3_YN. Are you wearing shoes that make it difficult for you to walk?	NUM	DKREFYN		.		Missing	44	1.3
					.S		Skipped	685	20.1
					1		Yes	1	0.0
					2		No	2659	78.2
					8		Don't Know	10	0.3
					9		Refused	2	0.1
CE_U4_DATE	CE_U4_DATE. Date of long distance corridor walk [DATE: MM/DD/YYYY]	NUM	MMDDYY	06/10/15	08/27/14-06/30/16	2670	MISSING	45	1.3
					SKIPPE D			686	20.2
CE_U5A_LAP_START_TIME_LAP_START	CE_U5A_LAP_START_TIME_LAP_START. Start time of laps	NUM	TIME	11:50	8:14-18:07	2655	MISSING	60	1.8
					SKIPPE D			686	20.2
CE_U5B_LAP_TIME_LAP_START	CE_U5B_LAP_TIME_LAP_START. Lap start time	NUM	TIME	0:00	0:00-0:00	2655	MISSING	60	1.8

DATA SET: ce_ldcw_20170928_c

DATE CREATED: 09/28/2017

Number of Observations: 3401

Number of Variables: 85

Organization of file: One Record per Participant (ID)

VARIABLE NAME	LABEL (VAR)	TYPE	FORMAT	MEAN	RANGE	N	CATEGORY	FREQUENCY	PERCENT
					SKIPPE D			686	20.2
CE_U5C_LAP_ELAPSED_LAP_START	CE_U5C_LAP_ELAPSED_LAP_START. Start time elapsed	NUM	TIME	0:00	0:00-0:00	2655	MISSING	60	1.8
					SKIPPE D			686	20.2
CE_U5A_LAP_START_TIME_LAP_1	CE_U5A_LAP_START_TIME_LAP_1. Start time of lap 1	NUM	TIME	11:50	8:15-18:07	2653	MISSING	62	1.8
					SKIPPE D			686	20.2
CE_U5B_LAP_TIME_LAP_1	CE_U5B_LAP_TIME_LAP_1. Lap time of lap 1	NUM	TIME	0:00	0:00-0:01	2653	MISSING	62	1.8
					SKIPPE D			686	20.2
CE_U5C_LAP_ELAPSED_LAP_1	CE_U5C_LAP_ELAPSED_LAP_1. Elapsed time of lap 1	NUM	TIME	0:00	0:00-0:01	2653	MISSING	62	1.8
					SKIPPE D			686	20.2
CE_U5A_LAP_START_TIME_LAP_2	CE_U5A_LAP_START_TIME_LAP_2. Start time of lap 2	NUM	TIME	11:51	8:15-18:07	2650	MISSING	65	1.9
					SKIPPE D			686	20.2
CE_U5B_LAP_TIME_LAP_2	CE_U5B_LAP_TIME_LAP_2. Lap time of lap 2	NUM	TIME	0:00	0:00-0:01	2649	MISSING	66	1.9
					SKIPPE D			686	20.2
CE_U5C_LAP_ELAPSED_LAP_2	CE_U5C_LAP_ELAPSED_LAP_2. Elapsed time of lap 2	NUM	TIME	0:00	0:00-0:01	2649	MISSING	66	1.9
					SKIPPE D			686	20.2
CE_U5A_LAP_START_TIME_LAP_3	CE_U5A_LAP_START_TIME_LAP_3. Start time of lap 3	NUM	TIME	11:51	8:15-18:08	2647	MISSING	68	2.0
					SKIPPE D			686	20.2
CE_U5B_LAP_TIME_LAP_3	CE_U5B_LAP_TIME_LAP_3. Lap time of lap 3	NUM	TIME	0:00	0:00-0:01	2648	MISSING	67	2.0

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					SKIPPE D			686	20.2
CE_U5C_LAP_ELAPSED_LAP_3	CE_U5C_LAP_ELAPSED_LAP_3. Elapsed time of lap 3	NUM	TIME	0:01	0:00-0:02	2648	MISSING	67	2.0
					SKIPPE D			686	20.2
CE_U5A_LAP_START_TIME_LAP_4	CE_U5A_LAP_START_TIME_LAP_4. Start time of lap 4	NUM	TIME	11:51	8:16-18:08	2638	MISSING	76	2.2
					SKIPPE D			687	20.2
CE_U5B_LAP_TIME_LAP_4	CE_U5B_LAP_TIME_LAP_4. Lap time of lap 4	NUM	TIME	0:00	0:00-0:01	2637	MISSING	77	2.3
					SKIPPE D			687	20.2
CE_U5C_LAP_ELAPSED_LAP_4	CE_U5C_LAP_ELAPSED_LAP_4. Elapsed time of lap 4	NUM	TIME	0:01	0:01-0:04	2637	MISSING	77	2.3
					SKIPPE D			687	20.2
CE_U5A_LAP_START_TIME_LAP_5	CE_U5A_LAP_START_TIME_LAP_5. Start time of lap 5	NUM	TIME	11:52	8:16-18:08	2631	MISSING	83	2.4
					SKIPPE D			687	20.2
CE_U5B_LAP_TIME_LAP_5	CE_U5B_LAP_TIME_LAP_5. Lap time of lap 5	NUM	TIME	0:00	0:00-0:00	2631	MISSING	83	2.4
					SKIPPE D			687	20.2
CE_U5C_LAP_ELAPSED_LAP_5	CE_U5C_LAP_ELAPSED_LAP_5. Elapsed time of lap 5	NUM	TIME	0:02	0:01-0:05	2631	MISSING	83	2.4
					SKIPPE D			687	20.2
CE_U5A_LAP_START_TIME_LAP_6	CE_U5A_LAP_START_TIME_LAP_6. Start time of lap 6	NUM	TIME	11:52	8:16-18:09	2615	MISSING	97	2.9
					SKIPPE D			689	20.3
CE_U5B_LAP_TIME_LAP_6	CE_U5B_LAP_TIME_LAP_6. Lap time of lap 6	NUM	TIME	0:00	0:00-0:01	2616	MISSING	96	2.8

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VARIABLE NAME	LABEL (VAR)	TYPE	FORMAT	MEAN	RANGE	N	CATEGORY	FREQUENCY	PERCENT
					SKIPPE D			689	20.3
CE_U5C_LAP_ELAPSED_LAP_6	CE_U5C_LAP_ELAPSED_LAP_6. Elapsed time of lap 6	NUM	TIME	0:02	0:01-0:06	2615	MISSING	97	2.9
					SKIPPE D			689	20.3
CE_U5A_LAP_START_TIME_LAP_7	CE_U5A_LAP_START_TIME_LAP_7. Start time of lap 7	NUM	TIME	11:52	8:17-18:09	2607	MISSING	105	3.1
					SKIPPE D			689	20.3
CE_U5B_LAP_TIME_LAP_7	CE_U5B_LAP_TIME_LAP_7. Lap time of lap 7	NUM	TIME	0:00	0:00-0:01	2606	MISSING	106	3.1
					SKIPPE D			689	20.3
CE_U5C_LAP_ELAPSED_LAP_7	CE_U5C_LAP_ELAPSED_LAP_7. Elapsed time of lap 7	NUM	TIME	0:03	0:02-0:07	2607	MISSING	105	3.1
					SKIPPE D			689	20.3
CE_U5A_LAP_START_TIME_LAP_8	CE_U5A_LAP_START_TIME_LAP_8. Start time of lap 8	NUM	TIME	11:53	8:17-18:10	2603	MISSING	109	3.2
					SKIPPE D			689	20.3
CE_U5B_LAP_TIME_LAP_8	CE_U5B_LAP_TIME_LAP_8. Lap time of lap 8	NUM	TIME	0:00	0:00-0:01	2604	MISSING	108	3.2
					SKIPPE D			689	20.3
CE_U5C_LAP_ELAPSED_LAP_8	CE_U5C_LAP_ELAPSED_LAP_8. Elapsed time of lap 8	NUM	TIME	0:03	0:02-0:08	2602	MISSING	110	3.2
					SKIPPE D			689	20.3
CE_U5A_LAP_START_TIME_LAP_9	CE_U5A_LAP_START_TIME_LAP_9. Start time of lap 9	NUM	TIME	11:53	8:17-18:10	2600	MISSING	112	3.3
					SKIPPE D			689	20.3
CE_U5B_LAP_TIME_LAP_9	CE_U5B_LAP_TIME_LAP_9. Lap time of lap 9	NUM	TIME	0:00	0:00-0:01	2600	MISSING	112	3.3

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VARIABLE NAME	LABEL (VAR)	TYPE	FORMAT	MEAN	RANGE	N	CATEGORY	FREQUENCY	PERCENT
					SKIPPE D			689	20.3
CE_U5C_LAP_ELAPSED_LAP_9	CE_U5C_LAP_ELAPSED_LAP_9. Elapsed time of lap 9	NUM	TIME	0:04	0:02-0:09	2599	MISSING	113	3.3
					SKIPPE D			689	20.3
CE_U5A_LAP_START_TIME_LAP_END	CE_U5A_LAP_START_TIME_LAP_END. End time of laps	NUM	TIME	11:54	8:18-18:10	2596	MISSING	116	3.4
					SKIPPE D			689	20.3
CE_U5B_LAP_TIME_LAP_END	CE_U5B_LAP_TIME_LAP_END. Lap end time	NUM	TIME	0:00	0:00-0:01	2596	MISSING	116	3.4
					SKIPPE D			689	20.3
CE_U5C_LAP_ELAPSED_LAP_END	CE_U5C_LAP_ELAPSED_LAP_END. End time of elapsed laps	NUM	TIME	0:04	0:02-0:10	2596	MISSING	116	3.4
					SKIPPE D			689	20.3
CE_U5A_LAP_START_TIME_TEST_QUIT	CE_U5A_LAP_START_TIME_TEST_QUIT. Start time of quit lap	NUM	TIME	12:10	8:54-16:26	53	MISSING	66	1.9
					SKIPPE D			3282	96.5
CE_U5B_LAP_TIME_TEST_QUIT	CE_U5B_LAP_TIME_TEST_QUIT. Lap end time if lap ended prematurely	NUM	TIME	0:00	0:00-0:01	53	MISSING	66	1.9
					SKIPPE D			3282	96.5
CE_U5C_LAP_ELAPSED_TEST_QUIT	CE_U5C_LAP_ELAPSED_TEST_QUIT. Elapsed time if lap ended prematurely	NUM	TIME	0:03	0:00-0:05	53	MISSING	66	1.9
					SKIPPE D			3282	96.5
CE_U6	CE_U6. Enter reason long distance corridor walk was not completed	NUM	WALK		.		Missing	67	2.0
					.S		Skipped	3282	96.5
					1		Participant Unable To Walk Full Distance	41	1.2
					2		Other, Specify	10	0.3
					9		Refused	1	0.0

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VARIABLE NAME	LABEL (VAR)	TYPE	FORMAT	MEAN	RANGE	N	CATEGORY	FREQUENCY	PERCENT
CE_U6_OTHER_TXT	CE_U6_OTHER_TXT. Enter reason long distance corridor walk was not completed OTHER, SPECIFY [TEXT: SPECIFY]	CHAR	\$CHAR		.-				

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VARIABLE NAME	LABEL (VAR)	TYPE	FORMAT	MEAN	RANGE	N	CATEGORY	FREQUENCY	PERCENT
GULFID	Gulf ID	CHAR	\$.-				
CE_V1_YN	CE_V1_YN. Was trailmaking test attempted?	NUM	YN		.		Missing	2	0.1
					1		Yes	3395	99.8
					2		No	4	0.1
CE_V1A	CE_V1A. Was trailmaking test attempted? If no, provide a reason	NUM	NOCOLLF		.		Missing	2	0.1
					.S		Skipped	3395	99.8
					2		Other, Specify	3	0.1
					9		Refused	1	0.0
CE_V1A_OTHER_TXT	CE_V1A_OTHER_TXT. Was trailmaking test attempted? If no, provide a reason OTHER, SPECIFY [TEXT: SPECIFY]	CHAR	\$CHAR		.-				
CE_V2_DATE	CE_V2_DATE. Date of trailmaking test [DATE: MM/DD/YYYY]	NUM	MMDDYY	07/02/15	08/27/14-06/30/16	3393	MISSING	4	0.1
					SKIPPE D			4	0.1
CE_V3_START_TIME	CE_V3_START_TIME. Start time of trailmaking test [TIME: HH:MM (00:00-23:59)]	NUM	TIME	11:48	8:07-18:11	3394	MISSING	3	0.1
					SKIPPE D			4	0.1
CE_V4A_TEST_A_YN	CE_V4A_TEST_A_YN. Score obtained for trailmaking test A?	NUM	YN		.		Missing	13	0.4
					.S		Skipped	4	0.1
					1		Yes	3372	99.1
					2		No	12	0.4
CE_V4B_TEST_A_TIME	CE_V4B_TEST_A_TIME. Enter time of trailmaking test A [TIME: HH:MM (00:00-23:59)]	NUM	TIME	0:00	0:00-0:01	3372	MISSING	13	0.4
					SKIPPE D			16	0.5
CE_V4C_TEST_A	CE_V4C_TEST_A. Reason why trailmaking test A score not obtained	NUM	NOCOLLG		.		Missing	13	0.4
					.S		Skipped	3376	99.3
					1		Equipment Malfunction	1	0.0
					2		Participant Unable To Understand / Follow Instruction(S)	3	0.1
					5		Other	8	0.2

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VARIABLE NAME	LABEL (VAR)	TYPE	FORMAT	MEAN	RANGE	N	CATEGORY	FREQUENCY	PERCENT
CE_V4C1_TEST_A_TXT	CE_V4C1_TEST_A_TXT. Reason why trailmaking test A score not obtained: OTHER [TEXT: SPECIFY]	CHAR	\$CHAR		.-				
CE_V4A_TEST_B_YN	CE_V4A_TEST_B_YN. Score obtained for trailmaking test B?	NUM	YN		.		Missing	13	0.4
					.S		Skipped	4	0.1
					1		Yes	3292	96.8
					2		No	92	2.7
CE_V4B_TEST_B_TIME	CE_V4B_TEST_B_TIME. Enter time of trailmaking test B [TIME: HH:MM (00:00-23:59)]	NUM	TIME	0:01	0:00-0:05	3292	MISSING	13	0.4
					SKIPPE D			96	2.8
CE_V4C_TEST_B	CE_V4C_TEST_B. Reason why trailmaking test B score not obtained	NUM	NOCOLLG		.		Missing	13	0.4
					.S		Skipped	3296	96.9
					2		Participant Unable To Understand / Follow Instruction(S)	62	1.8
					5		Other	30	0.9
CE_V4C1_TEST_B_TXT	CE_V4C1_TEST_B_TXT. Reason why trailmaking test B score not obtained: OTHER [TEXT: SPECIFY]	CHAR	\$CHAR		.-				
CE_V5_STOP_TIME	CE_V5_STOP_TIME. Stop time of trailmaking test [TIME: HH:MM (00:00-23:59)]	NUM	TIME	11:53	8:10-18:18	3387	MISSING	10	0.3
					8			4	0.1
					SKIPPE D				
CE_V6	CE_V6. Scan barcode for trailmaking form A	CHAR	\$CHAR		.-				
CE_V7	CE_V7. Scan barcode for trailmaking form B	CHAR	\$CHAR		.-				

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VARIABLE NAME	LABEL (VAR)	TYPE	FORMAT	MEAN	RANGE	N	CATEGORY	FREQUENCY	PERCENT
GULFID	Gulf ID	CHAR	\$.-				
CE_W1_YN	CE_W1_YN. Were any of the neurobehavioral test battery (BARS computer tests) completed?	NUM	YN		.		Missing	27	0.8
					1		Yes	3365	98.9
					2		No	9	0.3
CE_W1A	CE_W1A. Were any of the neurobehavioral test battery (BARS computer tests) completed? If no, provide a reason	NUM	NOCOLL		.		Missing	27	0.8
					.S		Skipped	3365	98.9
					1		Equipment Malfunction	1	0.0
					2		Examinee Unable To Understand/Follow Directions	1	0.0
					3		Other, Specify	6	0.2
					9		Refused	1	0.0
CE_W1A_TXT	CE_W1A_TXT. Were any of the neurobehavioral test battery (BARS computer tests) completed? If no, provide a reason: OTHER, SPECIFY [TEXT: SPECIFY]	CHAR			.-				
CE_W2_DATE	CE_W2_DATE. Date of BARS tests [DATE: MM/DD/YYYY]	NUM	MMDDYY	07/02/15	08/27/14-06/30/16	3364	MISSING	28	0.8
					SKIPPE D			9	0.3
CE_W3_START_TIME	CE_W3_START_TIME. Start time of BARS test (military time) [TIME: HH:MM (00:00-23:59)]	NUM	TIME	11:47	7:51-18:19	3362	MISSING	30	0.9
					SKIPPE D			9	0.3
CE_W3A	CE_W3A. Problems encountered during BARS tests	NUM	NONEOTH		.		Missing	28	0.8
					.S		Skipped	393	11.6
					1		None	2882	84.7
					2		Other, Specify	98	2.9
CE_W3A_OTHER_TXT	CE_W3A_OTHER_TXT. Problems encountered during BARS tests: OTHER, SPECIFY [TEXT: SPECIFY]	CHAR	\$CHAR		.-				
CE_W4_STOP_TIME	CE_W4_STOP_TIME. Stop time of BARS tests (military time) [TIME: HH:MM (00:00-23:59)]	NUM	TIME	12:24	8:23-19:00	3230	MISSING	162	4.8
					SKIPPE D			9	0.3

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VARIABLE NAME	LABEL (VAR)	TYPE	FORMAT	MEAN	RANGE	N	CATEGORY	FREQUENCY	PERCENT
CE_A1_DATE	Exam Start Date	NUM	MMDDYY	07/02/15	08/27/14-06/30/16	3398	MISSING	3	0.1
CE_BARS_TAP_RIGHT1_PREF	CE_BARS_TAP_RIGHT1_PREF. Right Hand Trial 1, Preferred: Number of Taps	NUM	BEST	98.3	0-173	3043	MISSING	358	10.5
CE_BARS_TAP_LEFT2_NONPREF	CE_BARS_TAP_LEFT2_NONPREF. Left Hand Trial 2, Non-Preferred: Number of Taps	NUM	BEST	90.0	11-177	3043	MISSING	358	10.5
CE_BARS_TAP_RIGHT3_PREF	CE_BARS_TAP_RIGHT3_PREF. Right Hand Trial 3, Preferred: Number of Taps	NUM	BEST	98.1	0-183	3043	MISSING	358	10.5
CE_BARS_TAP_LEFT4_NONPREF	CE_BARS_TAP_LEFT4_NONPREF. Left Hand Trial 4, Non-Preferred: Number of Taps	NUM	BEST	88.7	0-155	3043	MISSING	358	10.5
CE_BARS_TAP_ALT5_BOTH	CE_BARS_TAP_ALT5_BOTH. Alternating Hands Trial 5: Number of Taps	NUM	BEST	58.7	0-125	3343	MISSING	58	1.7
CE_BARS_TAP_ALT6_BOTH	CE_BARS_TAP_ALT6_BOTH. Alternating Hands Trial 6: Number of Taps	NUM	BEST	55.8	0-124	3343	MISSING	58	1.7
CE_BARS_TAP_RIGHT1_NONPREF	CE_BARS_TAP_RIGHT1_NONPREF. Right Hand Trial 1, Non-Preferred: Number of Taps	NUM	BEST	94.4	5-139	300	MISSING	3101	91.2
CE_BARS_TAP_LEFT2_PREF	CE_BARS_TAP_LEFT2_PREF. Left Hand Trial 2, Preferred: Number of Taps	NUM	BEST	97.2	23-147	300	MISSING	3101	91.2
CE_BARS_TAP_RIGHT3_NONPREF	CE_BARS_TAP_RIGHT3_NONPREF. Right Hand Trial 3, Non-Preferred: Number of Taps	NUM	BEST	93.5	0-135	300	MISSING	3101	91.2
CE_BARS_TAP_LEFT4_PREF	CE_BARS_TAP_LEFT4_PREF. Left Hand Trial 4, Preferred: Number of Taps	NUM	BEST	96.3	0-158	300	MISSING	3101	91.2
CE_BARS_TAP_RIGHT_NONPREF_AVG	CE_BARS_TAP_RIGHT_NONPREF_AVG. Right Hand Trial, Non-Preferred: Mean Number of Taps	NUM		94.0	6-134	300	MISSING	3101	91.2
CE_BARS_TAP_LEFT_PREF_AVG	CE_BARS_TAP_LEFT_PREF_AVG. Left Hand Trial, Preferred: Mean Number of Taps	NUM		96.7	12-153	300	MISSING	3101	91.2
CE_BARS_TAP_ALT_BOTH_AVG	CE_BARS_TAP_ALT_BOTH_AVG. Alternating Hands Trial: Mean Number of Taps	NUM		57.2	0-123	3343	MISSING	58	1.7
CE_BARS_TAP_RIGHT_PREF_AVG	CE_BARS_TAP_RIGHT_PREF_AVG. Right Hand Trial, Preferred: Mean Number of Taps	NUM		98.2	13-173	3043	MISSING	358	10.5
CE_BARS_TAP_LEFT_NONPREF_AVG	CE_BARS_TAP_LEFT_NONPREF_AVG. Left Hand Trial, Non-Preferred: Mean Number of Taps	NUM		89.3	8-150	3043	MISSING	358	10.5
CE_BARS_SDT_AVE_COR_LAT	CE_BARS_SDT_AVE_COR_LAT. Average Correct Latency (msec)	NUM		2459.4	416-21321	3339	MISSING	62	1.8
CE_BARS_SDT_TOTAL_ERRS	CE_BARS_SDT_TOTAL_ERRS. Total Errors	NUM		2.2	0-41	3339	MISSING	62	1.8

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CE_BARS_SDT_COR_LAT_T1	CE_BARS_SDT_COR_LAT_T1. Average Correct Latency: Trial 1 (msec)	NUM		2676.3	0-61793	3339	MISSING	62	1.8
CE_BARS_SDT_ERR_CNT_T1	CE_BARS_SDT_ERR_CNT_T1. Error Count: Trial 1	NUM		0.6	0-8	3339	MISSING	62	1.8
CE_BARS_SDT_COR_LAT_T2	CE_BARS_SDT_COR_LAT_T2. Average Correct Latency: Trial 2 (msec)	NUM		2516.5	0-11254	3339	MISSING	62	1.8
CE_BARS_SDT_ERR_CNT_T2	CE_BARS_SDT_ERR_CNT_T2. Error Count: Trial 2	NUM		0.5	0-8	3339	MISSING	62	1.8
CE_BARS_SDT_COR_LAT_T3	CE_BARS_SDT_COR_LAT_T3. Average Correct Latency: Trial 3 (msec)	NUM		2438.6	0-22089	3339	MISSING	62	1.8
CE_BARS_SDT_ERR_CNT_T3	CE_BARS_SDT_ERR_CNT_T3. Error Count: Trial 3	NUM		0.4	0-8	3339	MISSING	62	1.8
CE_BARS_SDT_COR_LAT_T4	CE_BARS_SDT_COR_LAT_T4. Average Correct Latency: Trial 4 (msec)	NUM		2367.0	0-24115	3339	MISSING	62	1.8
CE_BARS_SDT_ERR_CNT_T4	CE_BARS_SDT_ERR_CNT_T4. Error Count: Trial 4	NUM		0.3	0-8	3339	MISSING	62	1.8
CE_BARS_SDT_COR_LAT_T5	CE_BARS_SDT_COR_LAT_T5. Average Correct Latency: Trial 5 (msec)	NUM		2339.9	0-21385	3339	MISSING	62	1.8
CE_BARS_SDT_ERR_CNT_T5	CE_BARS_SDT_ERR_CNT_T5. Error Count: Trial 5	NUM		0.3	0-8	3339	MISSING	62	1.8
CE_BARS_SRT_AVE_COR_LAT	CE_BARS_SRT_AVE_COR_LAT. Average Correct Latency (msec)	NUM		334.7	188-2216	3338	MISSING	63	1.9
CE_BARS_SRT_AVE_COR_TMLY_LAT	CE_BARS_SRT_AVE_COR_TMLY_LAT. Average Correct Timely Latency (msec)	NUM		323.6	188-965	3336	MISSING	65	1.9
CE_BARS_SRT_TOTAL_ERRS	CE_BARS_SRT_TOTAL_ERRS. Total Number of Errors	NUM		1.5	0-50	3340	MISSING	61	1.8
CE_BARS_SRT_TOTAL_SLOW_RESPS	CE_BARS_SRT_TOTAL_SLOW_RESPS. Total Number of Slow Responses	NUM		0.0	0-0	3340	MISSING	61	1.8
CE_BARS_SRT_B1_AVE_COR_LAT	CE_BARS_SRT_B1_AVE_COR_LAT. Block 1: Average Correct Latency (msec)	NUM		357.9	180-2736	3334	MISSING	67	2.0
CE_BARS_SRT_B1_AVE_TMLY_COR_LAT	CE_BARS_SRT_B1_AVE_TMLY_COR_LAT. Block 1: Average Correct Timely Latency (msec)	NUM		336.1	180-965	3316	MISSING	85	2.5
CE_BARS_SRT_B1_ERR_CNT	CE_BARS_SRT_B1_ERR_CNT. Block 1: Number of Errors	NUM		0.4	0-10	3340	MISSING	61	1.8
CE_BARS_SRT_B1_SLOW_RESP_CNT	CE_BARS_SRT_B1_SLOW_RESP_CNT. Block 1: Number of Slow Responses	NUM		0.1	0-8	3340	MISSING	61	1.8
CE_BARS_SRT_B1_DURATION	CE_BARS_SRT_B1_DURATION. Block 1: Duration (sec)	NUM		9.6	0-10	3340	MISSING	61	1.8
CE_BARS_SRT_B2_AVE_COR_LAT	CE_BARS_SRT_B2_AVE_COR_LAT. Block 2: Average Correct Latency (msec)	NUM		326.7	143-2397	3318	MISSING	83	2.4

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VARIABLE NAME	LABEL (VAR)	TYPE	FORMAT	MEAN	RANGE	N	CATEGORY	FREQUENCY	PERCENT
CE_BARS_SRT_B2_AVE_TMLY_COR_LAT	CE_BARS_SRT_B2_AVE_TMLY_COR_LAT. Block 2: Average Correct Timely Latency (msec)	NUM		319.3	143-902	3316	MISSING	85	2.5
CE_BARS_SRT_B2_ERR_CNT	CE_BARS_SRT_B2_ERR_CNT. Block 2: Number of Errors	NUM		0.3	0-10	3340	MISSING	61	1.8
CE_BARS_SRT_B2_SLOW_RESP_CNT	CE_BARS_SRT_B2_SLOW_RESP_CNT. Block 2: Number of Slow Responses	NUM		0.1	0-10	3340	MISSING	61	1.8
CE_BARS_SRT_B2_DURATION	CE_BARS_SRT_B2_DURATION. Block 2: Duration (sec)	NUM		9.7	0-10	3340	MISSING	61	1.8
CE_BARS_SRT_B3_AVE_COR_LAT	CE_BARS_SRT_B3_AVE_COR_LAT. Block 3: Average Correct Latency (msec)	NUM		327.3	130-2456	3319	MISSING	82	2.4
CE_BARS_SRT_B3_AVE_TMLY_COR_LAT	CE_BARS_SRT_B3_AVE_TMLY_COR_LAT. Block 3: Average Correct Timely Latency (msec)	NUM		318.8	32-976	3316	MISSING	85	2.5
CE_BARS_SRT_B3_ERR_CNT	CE_BARS_SRT_B3_ERR_CNT. Block 3: Number of Errors	NUM		0.3	0-10	3340	MISSING	61	1.8
CE_BARS_SRT_B3_SLOW_RESP_CNT	CE_BARS_SRT_B3_SLOW_RESP_CNT. Block 3: Number of Slow Responses	NUM		0.1	0-10	3340	MISSING	61	1.8
CE_BARS_SRT_B3_DURATION	CE_BARS_SRT_B3_DURATION. Block 3: Duration (sec)	NUM		9.7	0-10	3340	MISSING	61	1.8
CE_BARS_SRT_B4_AVE_COR_LAT	CE_BARS_SRT_B4_AVE_COR_LAT. Block 4: Average Correct Latency (msec)	NUM		327.0	152-2113	3322	MISSING	79	2.3
CE_BARS_SRT_B4_AVE_TMLY_COR_LAT	CE_BARS_SRT_B4_AVE_TMLY_COR_LAT. Block 4: Average Correct Timely Latency (msec)	NUM		319.3	152-931	3320	MISSING	81	2.4
CE_BARS_SRT_B4_ERR_CNT	CE_BARS_SRT_B4_ERR_CNT. Block 4: Number of Errors	NUM		0.3	0-10	3340	MISSING	61	1.8
CE_BARS_SRT_B4_SLOW_RESP_CNT	CE_BARS_SRT_B4_SLOW_RESP_CNT. Block 4: Number of Slow Responses	NUM		0.1	0-9	3340	MISSING	61	1.8
CE_BARS_SRT_B4_DURATION	CE_BARS_SRT_B4_DURATION. Block 4: Duration (sec)	NUM		9.7	0-10	3340	MISSING	61	1.8
CE_BARS_SRT_B5_AVE_COR_LAT	CE_BARS_SRT_B5_AVE_COR_LAT. Block 5: Average Correct Latency (msec)	NUM		331.6	117-2001	3324	MISSING	77	2.3
CE_BARS_SRT_B5_AVE_TMLY_COR_LAT	CE_BARS_SRT_B5_AVE_TMLY_COR_LAT. Block 5: Average Correct Timely Latency (msec)	NUM		322.1	117-992	3324	MISSING	77	2.3
CE_BARS_SRT_B5_ERR_CNT	CE_BARS_SRT_B5_ERR_CNT. Block 5: Number of Errors	NUM		0.3	0-10	3340	MISSING	61	1.8
CE_BARS_SRT_B5_SLOW_RESP_CNT	CE_BARS_SRT_B5_SLOW_RESP_CNT. Block 5: Number of Slow Responses	NUM		0.1	0-9	3340	MISSING	61	1.8

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VARIABLE NAME	LABEL (VAR)	TYPE	FORMAT	MEAN	RANGE	N	CATEGORY	FREQUENCY	PERCENT
CE_BARS_SRT_B5_DURATION	CE_BARS_SRT_B5_DURATION. Block 5: Duration (sec)	NUM		9.7	0-10	3340	MISSING	61	1.8
CE_BARS_DST_FORWARD_KEY	CE_BARS_DST_FORWARD_KEY. Forward Key	CHAR	\$.-				
CE_BARS_DST_REVERSE_KEY	CE_BARS_DST_REVERSE_KEY. Reverse Key	CHAR	\$.-				
CE_BARS_DST_FORWARD_CNT	CE_BARS_DST_FORWARD_CNT. Forward Count	NUM		5.4	0-9	3335	MISSING	66	1.9
CE_BARS_DST_REVERSE_CNT	CE_BARS_DST_REVERSE_CNT. Reverse Count	NUM		4.2	0-9	3335	MISSING	66	1.9
CE_BARS_MTS_COR_CNT	CE_BARS_MTS_COR_CNT. Number of Correct Responses	NUM		17.5	2-20	3330	MISSING	71	2.1
CE_BARS_MTS_WRONG_CNT	CE_BARS_MTS_WRONG_CNT. Number of Incorrect Responses	NUM		2.5	0-18	3330	MISSING	71	2.1
CE_BARS_MTS_OMITTED_CNT	CE_BARS_MTS_OMITTED_CNT. Number of Omitted Responses	NUM		0.2	0-12	3330	MISSING	71	2.1
CE_BARS_MTS_AVE_COR_LAT	CE_BARS_MTS_AVE_COR_LAT. Average Correct Latency (msec)	NUM		3134.4	1461-672 6	3330	MISSING	71	2.1
CE_BARS_MTS_LAT_DELAY	CE_BARS_MTS_LAT_DELAY. Correct Latency, 1000 (msec)	NUM		2883.3	1229-864 1	3330	MISSING	71	2.1
CE_BARS_MTS_COR_CNT_DELAY	CE_BARS_MTS_COR_CNT_DELAY. Number of Correct Responses, 1000 (msec)	NUM		9.2	1-10	3330	MISSING	71	2.1
CE_BARS_MTS_LAT_DELAY2	CE_BARS_MTS_LAT_DELAY2. Correct Latency, 4000 (msec)	NUM		3414.1	1181-746 7	3328	MISSING	73	2.1
CE_BARS_MTS_COR_CNT_DELAY2	CE_BARS_MTS_COR_CNT_DELAY2. Number of Correct Responses, 4000 (msec)	NUM		8.4	1-10	3328	MISSING	73	2.1
CE_BARS_CPT_TRIALS	CE_BARS_CPT_TRIALS. Number of Trials	NUM	BEST	300.0	300-300	3307	MISSING	94	2.8
CE_BARS_CPT_HITS	CE_BARS_CPT_HITS. Number of Hits	NUM	BEST	68.1	0-75	3307	MISSING	94	2.8
CE_BARS_CPT_MISSES	CE_BARS_CPT_MISSES. Number of Misses	NUM	BEST	6.8	0-75	3307	MISSING	94	2.8
CE_BARS_CPT_INCORRECTS	CE_BARS_CPT_INCORRECTS. Number of Incorrect Selections	NUM	BEST	0.1	0-46	3307	MISSING	94	2.8
CE_BARS_CPT_CR	CE_BARS_CPT_CR. Number of Correct Response	NUM	BEST	217.5	5-225	3307	MISSING	94	2.8

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CE_BARS_CPT_FA	CE_BARS_CPT_FA. Number of False Alarms	NUM	BEST	7.5	0-220	3307	MISSING	94	2.8
CE_BARS_CPT_FAT	CE_BARS_CPT_FAT. Number of False Alarms (T)	NUM	BEST	1.7	0-75	3307	MISSING	94	2.8
CE_BARS_CPT_FANT	CE_BARS_CPT_FANT. Number of False Alarms (NT)	NUM	BEST	5.8	0-145	3307	MISSING	94	2.8
CE_BARS_CPT_ANTI ANTICIPATIONS	CE_BARS_CPT_ANTI ANTICIPATIONS. Number of Anticipations	NUM	BEST	0.0	0-0	3307	MISSING	94	2.8
CE_BARS_CPT_EXTRAS	CE_BARS_CPT_EXTRAS. Number of Extra Selections	NUM	BEST	0.2	0-8	3307	MISSING	94	2.8
CE_BARS_CPT_ERRORS	CE_BARS_CPT_ERRORS. Number of Errors	NUM	BEST	14.3	0-220	3307	MISSING	94	2.8
CE_BARS_CPT_HIT_ FRACTION	CE_BARS_CPT_HIT_ FRACTION. Hit Fraction (%)	NUM	BEST	0.9	0-1	3307	MISSING	94	2.8
CE_BARS_CPT_CR_ FRACTION	CE_BARS_CPT_CR_ FRACTION. Correct Response Fraction (%)	NUM	BEST	1.0	0-1	3307	MISSING	94	2.8
CE_BARS_CPT_FA_ FRACTION	CE_BARS_CPT_FA_ FRACTION. False Alarm Fraction (%)	NUM	BEST	0.0	0-1	3307	MISSING	94	2.8
CE_BARS_CPT_COR_ HIT_ FRACTION	CE_BARS_CPT_COR_ HIT_ FRACTION. Corrected Hit Fraction (%)	NUM	BEST	0.9	0-1	3307	MISSING	94	2.8
CE_BARS_CPT_COR_ FA_ FRACTION	CE_BARS_CPT_COR_ FA_ FRACTION. Corrected False Alarm Fraction (%)	NUM	BEST	0.0	0-1	3307	MISSING	94	2.8
CE_BARS_CPT_D_ PRIME	CE_BARS_CPT_D_ PRIME. D Prime	NUM	BEST	3.7	-2-5	3307	MISSING	94	2.8
CE_BARS_CPT_HIT_ LATENCY	CE_BARS_CPT_HIT_ LATENCY. Hit Latency (msec)	NUM	BEST	377.0	0-938	3307	MISSING	94	2.8
CE_BARS_CPT_FA_ LATENCY	CE_BARS_CPT_FA_ LATENCY. False Alarm Latency (msec)	NUM	BEST	369.9	0-2183	3307	MISSING	94	2.8
CE_BARS_PRT_ TOTAL_ TAPS	CE_BARS_PRT_ TOTAL_ TAPS. Total Taps	NUM	BEST	597.4	68-979	3308	MISSING	93	2.7
CE_BARS_PRT_ TOTAL_ REINFORCERS	CE_BARS_PRT_ TOTAL_ REINFORCERS. Total Reinforcers	NUM	BEST	9.9	3-13	3308	MISSING	93	2.7
INTAP	INTAP. Record Present: Finger Tapping (TAP)	NUM	YN				Missing	56	1.6
							Yes	3343	98.3
							No	2	0.1
INSDT	INSDT. Record Present: Symbol-Digit (SDT)	NUM	YN				Missing	56	1.6
							Yes	3339	98.2
							No	6	0.2

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VARIABLE NAME	LABEL (VAR)	TYPE	FORMAT	MEAN	RANGE	N	CATEGORY	FREQUENCY	PERCENT
INSRT	INSRT. Record Present: Simple Reaction Time (SRT)	NUM	YN	.	1		Missing	56	1.6
							Yes	3340	98.2
							No	5	0.1
INDST	INDST. Record Present: Digit Span Test (DST)	NUM	YN	.	1		Missing	56	1.6
							Yes	3335	98.1
							No	10	0.3
INMTS	INMTS. Record Present: Match-to-Sample (MTS)	NUM	YN	.	1		Missing	56	1.6
							Yes	3330	97.9
							No	15	0.4
INCPT	INCPT. Record Present: Continuous Performance Test (CPT)	NUM	YN	.	1		Missing	56	1.6
							Yes	3307	97.2
							No	38	1.1
INPRT	INPRT. Record Present: Progressive Ratio Test (PRT)	NUM	YN	.	1		Missing	56	1.6
							Yes	3308	97.3
							No	37	1.1

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VARIABLE NAME	LABEL (VAR)	TYPE	FORMAT	MEAN	RANGE	N	CATEGORY	FREQUENCY	PERCENT
GULFID	Gulf ID	CHAR	\$.-				
CE_X1_YN	CE_X1_YN. Within the last hour, have you smoked a cigarette, cigar, pipe, or used any other tobacco product?	NUM	DKREFYN		.		Missing	201	5.9
					1		Yes	115	3.4
					2		No	3079	90.5
					8		Don't Know	2	0.1
					9		Refused	4	0.1
CE_X2_YN	CE_X2_YN. Within the last hour, have you done any vigorous or strenuous exercise? ...	NUM	DKREFYN		.		Missing	201	5.9
					1		Yes	247	7.3
					2		No	2946	86.6
					8		Don't Know	3	0.1
					9		Refused	4	0.1
CE_X3_YN	CE_X3_YN. Within the last hour, have you had anything to eat or drink?	NUM	DKREFYN		.		Missing	201	5.9
					1		Yes	2232	65.6
					2		No	956	28.1
					8		Don't Know	8	0.2
					9		Refused	4	0.1
CE_X4_YN	CE_X4_YN. Within the last 3 hours, have you eaten beets, broccoli, cabbage, celery, lettuce, spinach, radishes or root vegetables?	NUM	DKREFYN		.		Missing	200	5.9
					1		Yes	119	3.5
					2		No	3068	90.2
					8		Don't Know	10	0.3
					9		Refused	4	0.1
CE_X5_YN	CE_X5_YN. Within the last 3 hours, have you eaten bacon, ham, hot dogs, or smoked fish?	NUM	DKREFYN		.		Missing	200	5.9
					1		Yes	156	4.6
					2		No	3037	89.3
					8		Don't Know	4	0.1
					9		Refused	4	0.1
CE_X6_YN	CE_X6_YN. Within the past 2 days, have you used any oral or inhaled steroids? (I.e. inhaled glucocorticoids and montelukast)?	NUM	DKREFYN		.		Missing	200	5.9
					1		Yes	122	3.6

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VARIABLE NAME	LABEL (VAR)	TYPE	FORMAT	MEAN	RANGE	N	CATEGORY	FREQUENCY	PERCENT
							No	3069	90.2
							Don't Know	6	0.2
							Refused	4	0.1
CE_X7_YN	CE_X7_YN. In the past 7 days, have you had a cough, cold, airway infection, respiratory illness, phlegm or runny nose? Do not count allergies or hay fever.	NUM	DKREFYN	.			Missing	182	5.4
							Yes	758	22.3
							No	2437	71.7
							Don't Know	20	0.6
							Refused	4	0.1
CE_X8_YN	CE_X8_YN. Was test for exhaled nitric oxide completed?	NUM	YN	.			Missing	49	1.4
							Yes	2804	82.4
							No	548	16.1
CE_X8A	CE_X8A. Was test for exhaled nitric oxide completed? If no, provide a reason	NUM	NOCOLL	.			Missing	49	1.4
				.S			Skipped	2804	82.4
				1			Equipment Malfunction	531	15.6
				2			Examinee Unable To Understand/Follow Directions	5	0.1
				3			Other, Specify	10	0.3
				9			Refused	2	0.1
CE_X8A_OTHER_TXT	CE_X8A_OTHER_TXT. Was test for exhaled nitric oxide completed? If no, provide a reason: OTHER, SPECIFY [TEXT: SPECIFY]	CHAR	\$CHAR	.-.					
CE_X9_DATE	CE_X9_DATE. Date exhaled nitric oxide test performed [DATE: MM/DD/YYYY]	NUM	MMDDYY	07/08/15	08/27/14-06/30/16	2785	MISSING	68	2.0
							SKIPPE D	548	16.1
CE_X10_START_TIME	CE_X10_START_TIME. Start time of exhaled nitric oxide test [TIME: HH:MM (00:00-23:59)]	NUM	TIME	12:31	8:44-18:53	2803	MISSING	50	1.5
							SKIPPE D	548	16.1
CE_X11_NUM	CE_X11_NUM. How many total maneuvers/attempts were performed?	NUM	BEST	4.5	1-8	2785	MISSING	68	2.0
							SKIPPE D	548	16.1

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VARIABLE NAME	LABEL (VAR)	TYPE	FORMAT	MEAN	RANGE	N	CATEGORY	FREQUENCY	PERCENT
CE_X12_STOP_TIME	CE_X12_STOP_TIME. Stop time of exhaled nitric oxide test [TIME: HH:MM (00:00-23:59)]	NUM	TIME	12:38	8:50-19:19	2786	MISSING	67	2.0
					SKIPPE D			548	16.1
FILE	FILE. File	CHAR			.-				
SITE	SITE. Site	CHAR	\$.-				
ENODT	ENODT. Exhaled nitric oxide date	NUM	MMDDYY	07/08/15	08/27/14-06/30/16	2798	MISSING	59	1.7
					SKIPPE D			544	16.0
ENOTM	ENOTM. Exhaled nitric oxide time	NUM	TIME	12:38	8:50-19:19	2798	MISSING	59	1.7
					SKIPPE D			544	16.0
NO1	NO1. NO results 1	NUM		24.0	0-283	2798	MISSING	59	1.7
					SKIPPE D			544	16.0
NO2	NO2. NO results 2	NUM		24.1	0-254	2775	MISSING	79	2.3
					SKIPPE D			547	16.1
NO3	NO3. NO results 3	NUM		24.3	1-257	2753	MISSING	100	2.9
					SKIPPE D			548	16.1
ATS1	ATS1. ATS results 1	NUM		0.9	0-1	2798	MISSING	59	1.7
					SKIPPE D			544	16.0
ATS2	ATS2. ATS results 2	NUM		0.9	0-1	2775	MISSING	79	2.3
					SKIPPE D			547	16.1
ATS3	ATS3. ATS results 3	NUM		0.9	0-1	2753	MISSING	100	2.9
					SKIPPE D			548	16.1
AVG_NO	AVG_NO. Average NO results	NUM		23.9	0-263	2798	MISSING	59	1.7

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VARIABLE NAME	LABEL (VAR)	TYPE	FORMAT	MEAN	RANGE	N	CATEGORY	FREQUENCY	PERCENT
					SKIPPE D			544	16.0
PCT_AVG_DEV	PCT_AVG_DEV. Percent average deviation results	NUM		3.4	0-84	2798	MISSING	59	1.7
					SKIPPE D			544	16.0

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Organization of file: One Record per Participant (ID)

VARIABLE NAME	LABEL (VAR)	TYPE	FORMAT	MEAN	RANGE	N	CATEGORY	FREQUENCY	PERCENT
GULFID	GULFID. GULF ID	CHAR	\$CHAR		.-				
CE_Y1_YN	CE_Y1_YN. Do you consider yourself to be Hispanic or Latino?	NUM	DKREFYN		.		Missing	5	0.1
					.S		Skipped	216	6.4
					1		Yes	76	2.2
					2		No	3093	90.9
					8		Don't Know	4	0.1
					9		Refused	7	0.2
CE_Y2_1_YN	CE_Y2_1_YN. What race do you consider yourself to be? Please select one or more of these categories: American Indian or Alaskan Native	NUM	NYREFDK		.		Missing	5	0.1
					.S		Skipped	216	6.4
					0		No	3021	88.8
					1		Yes	151	4.4
					9		Refused	8	0.2
CE_Y2_2_YN	CE_Y2_2_YN. What race do you consider yourself to be? Please select one or more of these categories: Asian	NUM	NYREFDK		.		Missing	5	0.1
					.S		Skipped	216	6.4
					0		No	3150	92.6
					1		Yes	22	0.6
					9		Refused	8	0.2
CE_Y2_3_YN	CE_Y2_3_YN. What race do you consider yourself to be? Please select one or more of these categories: Black or African American	NUM	NYREFDK		.		Missing	5	0.1
					.S		Skipped	216	6.4
					0		No	1888	55.5
					1		Yes	1284	37.8
					9		Refused	8	0.2
CE_Y2_4_YN	CE_Y2_4_YN. What race do you consider yourself to be? Please select one or more of these categories: Native Hawaiian or Pacific Islander	NUM	NYREFDK		.		Missing	5	0.1
					.S		Skipped	216	6.4
					0		No	3160	92.9
					1		Yes	12	0.4
					9		Refused	8	0.2
CE_Y2_5_YN	CE_Y2_5_YN. What race do you consider yourself to be? Please select one or more of these categories: White	NUM	NYREFDK		.		Missing	5	0.1

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VARIABLE NAME	LABEL (VAR)	TYPE	FORMAT	MEAN	RANGE	N	CATEGORY	FREQUENCY	PERCENT
					.S		Skipped	216	6.4
					0		No	1431	42.1
					1		Yes	1741	51.2
					9		Refused	8	0.2
CE_Y2_6_YN	CE_Y2_6_YN. What race do you consider yourself to be? Please select one or more of these categories: OTHER, SPECIFY	NUM	NYREFDK	.			Missing	5	0.1
					.S		Skipped	216	6.4
					0		No	3110	91.4
					1		Yes	62	1.8
					9		Refused	8	0.2
CE_Y2_6_OTHER_TXT	CE_Y2_6_OTHER_TXT. What race do you consider yourself to be? Please select one or more of these categories: OTHER, SPECIFY [TEXT: SPECIFY]	CHAR	SCHAR	.-.					
CE_Y3_YN	CE_Y3_YN. Do you consider your (biological) mother to be Hispanic or Latino?	NUM	DKREFYN	.			Missing	5	0.1
					.S		Skipped	216	6.4
					1		Yes	51	1.5
					2		No	3112	91.5
					8		Don't Know	10	0.3
					9		Refused	7	0.2
CE_Y4_1_YN	CE_Y4_1_YN. What race do you consider your (biological) mother to be? Please select one or more of these categories: American Indian or Alaskan Native	NUM	NYREFDK	.			Missing	5	0.1
					.S		Skipped	216	6.4
					0		No	3004	88.3
					1		Yes	159	4.7
					8		Don't Know	9	0.3
					9		Refused	8	0.2
CE_Y4_2_YN	CE_Y4_2_YN. What race do you consider your (biological) mother to be? Please select one or more of these categories: Asian	NUM	NYREFDK	.			Missing	5	0.1
					.S		Skipped	216	6.4
					0		No	3138	92.3
					1		Yes	25	0.7
					8		Don't Know	9	0.3
					9		Refused	8	0.2

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VARIABLE NAME	LABEL (VAR)	TYPE	FORMAT	MEAN	RANGE	N	CATEGORY	FREQUENCY	PERCENT
CE_Y4_3_YN	CE_Y4_3_YN. What race do you consider your (biological) mother to be? Please select one or more of these categories: Black or African American	NUM	NYREFDK	.			Missing	5	0.1
				.S			Skipped	216	6.4
				0			No	1905	56.0
				1			Yes	1258	37.0
				8			Don't Know	9	0.3
				9			Refused	8	0.2
CE_Y4_4_YN	CE_Y4_4_YN. What race do you consider your (biological) mother to be? Please select one or more of these categories: Native Hawaiian or Pacific Islander	NUM	NYREFDK	.			Missing	5	0.1
				.S			Skipped	216	6.4
				0			No	3154	92.7
				1			Yes	9	0.3
				8			Don't Know	9	0.3
				9			Refused	8	0.2
CE_Y4_5_YN	CE_Y4_5_YN. What race do you consider your (biological) mother to be? Please select one or more of these categories: White	NUM	NYREFDK	.			Missing	5	0.1
				.S			Skipped	216	6.4
				0			No	1449	42.6
				1			Yes	1714	50.4
				8			Don't Know	9	0.3
				9			Refused	8	0.2
CE_Y4_6_YN	CE_Y4_6_YN. What race do you consider your (biological) mother to be? Please select one or more of these categories: OTHER, SPECIFY	NUM	NYREFDK	.			Missing	5	0.1
				.S			Skipped	216	6.4
				0			No	3091	90.9
				1			Yes	72	2.1
				8			Don't Know	9	0.3
				9			Refused	8	0.2
CE_Y4_6_OTHER_TXT	CE_Y4_6_OTHER_TXT. What race do you consider your (biological) mother to be? Please select one or more of these categories: OTHER, SPECIFY [TEXT: SPECIFY]	CHAR	SCHAR	.-.					
CE_Y5_YN	CE_Y5_YN. Do you consider your (biological) father to be Hispanic or Latino?	NUM	DKREFYN	.			Missing	5	0.1
				.S			Skipped	216	6.4
				1			Yes	56	1.6

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VARIABLE NAME	LABEL (VAR)	TYPE	FORMAT	MEAN	RANGE	N	CATEGORY	FREQUENCY	PERCENT
					2		No	3098	91.1
					8		Don't Know	20	0.6
					9		Refused	6	0.2
CE_Y6_1_YN	CE_Y6_1_YN. What race do you consider your (biological) father to be? Please select one or more of these categories: American Indian or Alaskan Native	NUM	NYREFDK	.			Missing	5	0.1
				.S			Skipped	216	6.4
				0			No	3004	88.3
				1			Yes	145	4.3
				8			Don't Know	24	0.7
				9			Refused	7	0.2
CE_Y6_2_YN	CE_Y6_2_YN. What race do you consider your (biological) father to be? Please select one or more of these categories: Asian	NUM	NYREFDK	.			Missing	5	0.1
				.S			Skipped	216	6.4
				0			No	3126	91.9
				1			Yes	23	0.7
				8			Don't Know	24	0.7
				9			Refused	7	0.2
CE_Y6_3_YN	CE_Y6_3_YN. What race do you consider your (biological) father to be? Please select one or more of these categories: Black or African American	NUM	NYREFDK	.			Missing	5	0.1
				.S			Skipped	216	6.4
				0			No	1879	55.2
				1			Yes	1270	37.3
				8			Don't Know	24	0.7
				9			Refused	7	0.2
CE_Y6_4_YN	CE_Y6_4_YN. What race do you consider your (biological) father to be? Please select one or more of these categories: Native Hawaiian or Pacific Islander	NUM	NYREFDK	.			Missing	5	0.1
				.S			Skipped	216	6.4
				0			No	3140	92.3
				1			Yes	9	0.3
				8			Don't Know	24	0.7
				9			Refused	7	0.2
CE_Y6_5_YN	CE_Y6_5_YN. What race do you consider your (biological) father to be? Please select one or more of these categories: White	NUM	NYREFDK	.			Missing	5	0.1

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VARIABLE NAME	LABEL (VAR)	TYPE	FORMAT	MEAN	RANGE	N	CATEGORY	FREQUENCY	PERCENT
					.S		Skipped	216	6.4
					0		No	1451	42.7
					1		Yes	1698	49.9
					8		Don't Know	24	0.7
					9		Refused	7	0.2
CE_Y6_6_YN	CE_Y6_6_YN. What race do you consider your (biological) father to be? Please select one or more of these categories: OTHER, SPECIFY	NUM	NYREFDK	.			Missing	5	0.1
					.S		Skipped	216	6.4
					0		No	3080	90.6
					1		Yes	69	2.0
					8		Don't Know	24	0.7
					9		Refused	7	0.2
CE_Y6_6_OTHER_TXT	CE_Y6_6_OTHER_TXT. What race do you consider your (biological) father to be? Please select one or more of these categories: OTHER, SPECIFY [TEXT: SPECIFY]	CHAR	SCHAR	.-.					
CE_Y7_YN	CE_Y7_YN. Did participant complete pulmonary function testing (PFT)?	NUM	YN	.			Missing	5	0.1
					.S		Skipped	216	6.4
					1		Yes	3132	92.1
					2		No	48	1.4
CE_Y7A	CE_Y7A. Did participant complete pulmonary function testing (PFT)? If no, provide a reason	NUM	NOCOLLH	.			Missing	38	1.1
					.S		Skipped	3348	98.4
					3		Other, Specify	15	0.4
CE_Y7A_OTHER_TXT	CE_Y7A_OTHER_TXT. Did participant complete pulmonary function testing (PFT)? If no, provide a reason: OTHER, SPECIFY [TEXT: SPECIFY]	CHAR	SCHAR	.-.					
CE_Y8_DATE	CE_Y8_DATE. Date of PFT procedure [DATE: MM/DD/YYYY]	NUM	MMDDYY	07/04/15	08/27/14-06/30/16	3121	MISSING	14	0.4
					SKIPPE D			266	7.8
CE_Y10	CE_Y10. Record start time of pre-bronchodilator (albuterol) spirometry	NUM	AMPM	.			Missing	13	0.4
					.S		Skipped	264	7.8
					1		Am	1260	37.0
					2		Pm	1864	54.8

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CE_Y10_PRE_START_TIME	CE_Y10_PRE_START_TIME. Start time of pre-bronchodilator (albuterol) spirometry	NUM	TIME	12:47	8:55-19:05	3124	MISSING	13	0.4
					SKIPPE D			264	7.8
CE_Y10A_YN	CE_Y10A_YN. Did participant agree to albuterol administration?	NUM	YN	.	.S		Missing	239	7.0
				1			Skipped	266	7.8
				2			Yes	2817	82.8
							No	79	2.3
CE_Y10B	CE_Y10B. Did participant agree to albuterol administration? If no, provide a reason	NUM	NOCOLL	.	.S		Missing	239	7.0
				1			Skipped	3083	90.6
				2			Medical Reason	16	0.5
				9			Other, Specify	37	1.1
							Refused	26	0.8
CE_Y10B_OTHER_TXT	CE_Y10B_OTHER_TXT. Did participant agree to albuterol administration? If no, provide a reason: OTHER, SPECIFY [TEXT: SPECIFY]	CHAR	\$CHAR	.-.					
CE_Y11	CE_Y11. Record start time of bronchodilator (albuterol) administration [UNITS: AM, PM]	NUM	AMPM	.	.S		Missing	22	0.6
				1			Skipped	345	10.1
				2			Am	1165	34.3
							Pm	1869	55.0
CE_Y11_START_TIME	CE_Y11_START_TIME. Start time of bronchodilator (albuterol) administration [TIME: HH:MM (00:00-23:59)]	NUM	TIME	12:53	8:58-19:14	3034	MISSING	22	0.6
					SKIPPE D			345	10.1
CE_Y12_NUM	CE_Y12_NUM. Bronchodilator (albuterol) puffs administered [UNITS: NUMBER OF PUFFS ADMINISTERED]	NUM	BEST	4.0	1-4	3031	MISSING	25	0.7
					SKIPPE D			345	10.1
CE_Y13	CE_Y13. Record start time of post-bronchodilator (albuterol) spirometry [UNITS: AM, PM]	NUM	AMPM	.	.S		Missing	48	1.4
				1			Skipped	349	10.3
				2			Am	1044	30.7
							Pm	1960	57.6

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VARIABLE NAME	LABEL (VAR)	TYPE	FORMAT	MEAN	RANGE	N	CATEGORY	FREQUENCY	PERCENT
CE_Y13_POST_START_TIME	CE_Y13_POST_START_TIME. Start time of post-bronchodilator (albuterol) spirometry [TIME: HH:MM (00:00-23:59)]	NUM	TIME	13:06	9:12-19:29	3004	MISSING	48	1.4
					SKIPPE D			349	10.3
CE_Y14	CE_Y14. Record stop time of spirometry test [UNITS: AM, PM]	NUM	AMPM		.		Missing	76	2.2
					.S		Skipped	274	8.1
					1		Am	1016	29.9
					2		Pm	2035	59.8
CE_Y14_STOP_TIME	CE_Y14_STOP_TIME. Stop time of spirometry test [TIME: HH:MM (00:00-23:59)]	NUM	TIME	13:11	9:14-19:33	3051	MISSING	76	2.2
					SKIPPE D			274	8.1

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VARIABLE NAME	LABEL (VAR)	TYPE	FORMAT	MEAN	RANGE	N	CATEGORY	FREQUENCY	PERCENT
GULFID	Gulf ID	CHAR	\$.-				
EXAM_COMPLETE	Completed Clinical Exam	NUM	DYNF		1		Yes	3401	100.0
MASTER_ID	Master ID	CHAR	\$.-				
PRE_POST_BD	Pre Post BD	NUM		1.0	0-1	3140	MISSING	261	7.7
PATIENT_ID	Patient ID	CHAR	\$.-				
DATE	Date	NUM	MMDDYY	07/04/15	08/27/14-06/30/16	3140	MISSING	261	7.7
TIME	Time	CHAR	\$.-				
AGE	Age	NUM		49.0	24-86	3140	MISSING	261	7.7
HEIGHT_CM	Height - CM	NUM		173.3	127-199	3140	MISSING	261	7.7
WEIGHT_KG	Weight - Kg	NUM		0.7	0-133	3140	MISSING	261	7.7
SEX	Sex	CHAR	\$.-				
RACE	Race	CHAR	\$.-				
TECH_ID	Tech ID	CHAR	\$.-				
SERIAL_NUMBER	Serial Number	NUM		207245.4	204173-210946	3140	MISSING	261	7.7
COMPUTER_QC_FLOW_	Computer QC (Flow)	CHAR	\$.-				
COMPUTER_QC_VOLUME_	Computer QC (Volume)	CHAR	\$.-				
DATE_TIME_REVIEWED	Date Time Reviewed	NUM	DATETIME	1751794257	1.72549E9-1.7833E9	3140	MISSING	261	7.7
QX_RACE	[Clinical Exam Machine] Race/Ethnicity categories using derived variables EN_RACE2 and EN_HISPANIC2	CHAR	\$.-				
CALC_RACE_NEW_ASIAN	[Clinical Exam Machine] Flag for Asian .88 adjustment used in calculating the Hankinson (1999) equations	CHAR	\$.-				
LAB_RACE	[Clinical Exam Machine] Race/Ethnicity value keyed into spirometer by examiner	CHAR	\$.-				

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VARIABLE NAME	LABEL (VAR)	TYPE	FORMAT	MEAN	RANGE	N	CATEGORY	FREQUENCY	PERCENT
ORIG_LAB_RACE	[Clinical Exam Machine] Flag for Asian .88 adjustment used in calculating the Hankinson (1999) equations[obsolete]	CHAR	\$.-				
CALC_RACE_NEW	[Clinical Exam Machine] Race/Ethnicity value for calculating predicted values using the Hankinson (1999) method	CHAR			.-				
CALC_RACE_OLD	[Clinical Exam Machine] Race/Ethnicity value for calculating predicted values using the Hankinson (1999) method [obsolete]	CHAR			.-				
QX_GENDER	[Clinical Exam Machine] Gender using derived variable EN_GENDER	CHAR	\$.-				
LAB_GENDER	[Clinical Exam Machine] Gender value keyed into spirometer by examiner	CHAR	\$.-				
CALC_GENDER	[Clinical Exam Machine] Gender value for calculating predicted values using the Hankinson (1999) method	CHAR			.-				
QX_AGE	[Clinical Exam Machine] Age using derived variable BEST_DOB and EXAM_COMP_DATE [Clinical Exam Complete Date]	NUM		48.8	23-86	3401		3401	100.0
LAB_AGE	[Clinical Exam Machine] Age using DOB keyed into spirometer and EXAM_COMP_DATE [Clinical Exam Complete Date]	NUM		48.4	23-86	3143	MISSING	258	7.6
CALC_AGE	[Clinical Exam Machine] Age value for calculating predicted values using the Hankinson (1999) method	NUM		48.8	23-86	3401		3401	100.0
QX_HEIGHTCM	[Clinical Exam Machine] Average height from questionnaire variable ce_d_avg_ht_cm (cm)	NUM		173.3	141-200	3398	MISSING	3	0.1
LAB_HEIGHTCM	[Clinical Exam Machine] Height value keyed into spirometer by examiner (cm)	NUM		173.4	127-270	3143	MISSING	258	7.6
CALC_HEIGHTCM	[Clinical Exam Machine] Height value for calculating predicted values using the Hankinson (1999) method (cm)	NUM		173.3	141-200	3398	MISSING	3	0.1
PFT_COMPLETE	[Clinical Exam Machine] Flag for machine completion	NUM	PFTCOMP		.		Missing	5	0.1
					0		Neither Pre-BD or Post-BD Complete	256	7.5
					1		Both Pre-BD and Post-BD Complete	3045	89.5
					2		Only Pre-BD Complete	95	2.8
CE_PRE_SAMPLE_TEST_DATE	[Clinical Exam Machine] Pre-BD sample test date/timestamp	NUM	DATETIME	17516423 24	1.72477E 9-1.7829 1E9	3143	MISSING	258	7.6
CE_PRE_TEST_ID	[Clinical Exam Machine] Pre-BD test ID	NUM	BEST	3133.8	33-6234	3143	MISSING	258	7.6

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CE_PRE_TEST_DATE	[Clinical Exam Machine] Pre-BD test date/timestamp	NUM	MMDDYY	*****	***** _***** *E9	3143	MISSING	258	7.6
CE_PRE_TRIAL_ID	[Clinical Exam Machine] Pre-BD trial ID	NUM	BEST	18790.8	188-3701 8	3143	MISSING	258	7.6
CE_PRE_QUALITY_GRADE	[Clinical Exam Machine] Pre-BD PFT Quality Grade	CHAR	\$.-.				
CE_PRE_PFT_INTERP_OLD	[Clinical Exam Machine] Interpretation of PRE-BD PFT results using Hankinson (1999) method [obsolete]	CHAR			.-.				
CE_PRE_PFT_INTERP_NEW	[Clinical Exam Machine] Interpretation of PRE-BD PFT results using Hankinson (1999) method	CHAR			.-.				
CE_PRE_BEV	[Clinical Exam Machine] Pre-BD Back Extrapolated Volume (L)	NUM	BEST	0.1	0-1	3143	MISSING	258	7.6
CE_PRE_EOTV	[Clinical Exam Machine] Pre-BD End of Test Volume (L)	NUM	BEST	0.0	0-2	3143	MISSING	258	7.6
CE_PRE_FEF10	[Clinical Exam Machine] Pre-BD Forced Expiratory Flow at 10% of FVC (L/s)	NUM	BEST	7.0	0-14	3143	MISSING	258	7.6
CE_PRE_FEF25	[Clinical Exam Machine] Pre-BD Forced Expiratory Flow at 25% of FVC (L/s)	NUM	BEST	6.5	0-13	3143	MISSING	258	7.6
CE_PRE_FEF2575	[Clinical Exam Machine] Pre-BD Average flow rate between 25 and 75% of FVC (L/s)	NUM	BEST	2.8	0-9	3143	MISSING	258	7.6
CE_PRE_FEF2575_PRED	[Clinical Exam Machine] Pre-BD Predicted Average flow rate between 25 and 75% of FVC (L/s)	NUM	BEST	3.3	1-5	3143	MISSING	258	7.6
CE_PRE_FEF2575_LLN	[Clinical Exam Machine] Pre-BD Average flow rate between 25 and 75% of FVC lower limit of normal (L/s)	NUM	BEST	1.7	0-3	3141	MISSING	260	7.6
CE_PRE_FEF2575_6	[Clinical Exam Machine] Pre-BD Average flow rate between 25% and 75% of FVC6 (L/s)	NUM	BEST	3.1	0-9	3143	MISSING	258	7.6
CE_PRE_FEF2575_FVC	[Clinical Exam Machine] Pre-BD Ratio of FEF2575 and FVC (%)	NUM	BEST	0.7	0-3	3143	MISSING	258	7.6
CE_PRE_FEF40	[Clinical Exam Machine] Pre-BD Forced Expiratory Flow at 40% of FVC (L/s)	NUM	BEST	4.8	0-12	3143	MISSING	258	7.6
CE_PRE_FEF50	[Clinical Exam Machine] Pre-BD Forced Expiratory Flow at 50% of FVC (L/s)	NUM	BEST	3.7	0-10	3143	MISSING	258	7.6
CE_PRE_FEF50_FVC	[Clinical Exam Machine] Pre-BD Ratio of FEF50 and FVC (%)	NUM	BEST	0.9	0-3	3143	MISSING	258	7.6
CE_PRE_FEF50_VCMAX	[Clinical Exam Machine] Pre-BD Ratio of FEF50 and VCMAX (%)	NUM	BEST	0.9	0-3	3143	MISSING	258	7.6
CE_PRE_FEF60	[Clinical Exam Machine] Pre-BD Forced Expiratory Flow at 60% of FVC (L/s)	NUM	BEST	2.6	0-9	3143	MISSING	258	7.6

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VARIABLE NAME	LABEL (VAR)	TYPE	FORMAT	MEAN	RANGE	N	CATEGORY	FREQUENCY	PERCENT
CE_PRE_FEF75	[Clinical Exam Machine] Pre-BD Forced Expiratory Flow at 75% of FVC (L/s)	NUM	BEST	1.1	0-5	3143	MISSING	258	7.6
CE_PRE_FEF7585	[Clinical Exam Machine] Pre-BD Average flow rate between 75 and 85% of FVC (L/s)	NUM	BEST	0.6	0-4	3143	MISSING	258	7.6
CE_PRE_FEF80	[Clinical Exam Machine] Pre-BD Forced Expiratory Flow at 80% of FVC (L/s)	NUM	BEST	0.7	0-4	3143	MISSING	258	7.6
CE_PRE_FET	[Clinical Exam Machine] Pre-BD Forced Expiratory Time. Elapsed time since T0 at which end-of-test criteria is met. (s)	NUM	BEST	10.3	1-25	3143	MISSING	258	7.6
CE_PRE_FET2575	[Clinical Exam Machine] Pre-BD Forced Expiratory Time between FEF25 and FEF75. Also called Mean Expiratory Time. (s)	NUM	BEST	0.9	0-9	3143	MISSING	258	7.6
CE_PRE_FEV1	[Clinical Exam Machine] Pre-BD Forced Expiratory Volume after 1 second (L)	NUM		3.1	1-6	3143	MISSING	258	7.6
CE_PRE_FEV1_PRED	[Clinical Exam Machine] Pre-BD Predicted FEV1 (L)	NUM		3.4	1-6	3143	MISSING	258	7.6
CE_PRE_FEV1_LLN	[Clinical Exam Machine] Pre-BD FEV1 lower limit of normal (L)	NUM		2.7	1-5	3143	MISSING	258	7.6
CE_PRE_FEV1_FEV6	[Clinical Exam Machine] Pre-BD Ratio of FEV1 and FEV6 (%)	NUM		0.8	0-1	3143	MISSING	258	7.6
CE_PRE_FEV1_FEV6_PRED	[Clinical Exam Machine] Pre-BD Predicted Ratio of FEV1 to FEV6 (%)	NUM		0.8	1-1	3143	MISSING	258	7.6
CE_PRE_FEV1_FEV6_LLN	[Clinical Exam Machine] Pre-BD Ratio of FEV1 to FEV6 lower limit of normal (%)	NUM		0.7	1-1	3143	MISSING	258	7.6
CE_PRE_FEV1_FVC	[Clinical Exam Machine] Pre-BD Tiffenau Index, ratio of FEV1 and FVC (%)	NUM		0.8	0-1	3143	MISSING	258	7.6
CE_PRE_FEV1_FVC_PRED	[Clinical Exam Machine] Pre-BD Predicted FEV1/FVC (%)	NUM		0.8	1-1	3143	MISSING	258	7.6
CE_PRE_FEV1_FVC_LLN	[Clinical Exam Machine] Pre-BD FEV1/FVC lower limit of normal (%)	NUM		0.7	1-1	3143	MISSING	258	7.6
CE_PRE_FEV1_VCMAx	[Clinical Exam Machine] Pre-BD Ratio of FEV1 to VCMAx (%)	NUM		0.8	0-1	3143	MISSING	258	7.6
CE_PRE_FEV1_VCMAx_PRED	[Clinical Exam Machine] Pre-BD Predicted Ratio of FEV1 to VCMAx (%)	NUM		0.8	1-1	3143	MISSING	258	7.6
CE_PRE_FEV1_VCMAx_LLN	[Clinical Exam Machine] Pre-BD Ratio of FEV1 to VCMAx lower limit of normal (%)	NUM		0.7	1-1	3143	MISSING	258	7.6
CE_PRE_FEV_25	[Clinical Exam Machine] Pre-BD Forced Expiratory Volume after 0.25 seconds (L)	NUM		1.6	0-3	3143	MISSING	258	7.6
CE_PRE_FEV3	[Clinical Exam Machine] Pre-BD Forced Expiratory Volume after 3 seconds (L)	NUM		3.6	1-7	3143	MISSING	258	7.6
CE_PRE_FEV3_FVC	[Clinical Exam Machine] Pre-BD Ratio of FEV3 and FVC (%)	NUM		0.9	1-1	3143	MISSING	258	7.6

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CE_PRE_FEV3_VCMAx	[Clinical Exam Machine] Pre-BD Ratio of FEV3 and VCMAx (%)	NUM		0.9	1-1	3143	MISSING	258	7.6
CE_PRE_FEV_5	[Clinical Exam Machine] Pre-BD Forced Expiratory Volume after 0.5 seconds (L)	NUM		2.4	0-5	3143	MISSING	258	7.6
CE_PRE_FEV_5_FVC	[Clinical Exam Machine] Pre-BD Ratio of FEV.5 and FVC (%)	NUM		0.6	0-1	3143	MISSING	258	7.6
CE_PRE_FEV6	[Clinical Exam Machine] Pre-BD Forced Expiratory Volume after 6 seconds (L)	NUM		3.9	1-8	3143	MISSING	258	7.6
CE_PRE_FEV6_PRED	[Clinical Exam Machine] Pre-BD Predicted Forced Expiratory Volume after 6 seconds (L)	NUM		4.2	2-7	3143	MISSING	258	7.6
CE_PRE_FEV6_LLN	[Clinical Exam Machine] Pre-BD Forced Expiratory Volume after 6 seconds lower limit of normal (L)	NUM		3.4	1-6	3143	MISSING	258	7.6
CE_PRE_FEV_75	[Clinical Exam Machine] Pre-BD Forced expiratory volume after 0.75 seconds (L)	NUM		2.8	1-6	3143	MISSING	258	7.6
CE_PRE_FEV_75_FEV6	[Clinical Exam Machine] Pre-BD Ratio of FEV.75 and FEV6 (%)	NUM		0.7	0-1	3143	MISSING	258	7.6
CE_PRE_FEV_75_FVC	[Clinical Exam Machine] Pre-BD Ratio of FEV.75 and FVC (%)	NUM		0.7	0-1	3143	MISSING	258	7.6
CE_PRE_FEV_75_VCMAx	[Clinical Exam Machine] Pre-BD Ratio of FEV.75 and VCMAx (%)	NUM		0.7	0-1	3143	MISSING	258	7.6
CE_PRE_FVC	[Clinical Exam Machine] Pre-BD Forced vital capacity (L)	NUM		4.0	1-8	3143	MISSING	258	7.6
CE_PRE_FVC_PRED	[Clinical Exam Machine] Pre-BD Predicted FVC (L)	NUM		4.3	2-7	3143	MISSING	258	7.6
CE_PRE_FVC_LLN	[Clinical Exam Machine] Pre-BD FVC lower limit of normal (L)	NUM		3.5	1-6	3143	MISSING	258	7.6
CE_PRE_MEF20	[Clinical Exam Machine] Pre-BD Forced Expiratory Flow at 20% of FVC which still can be exhaled (FEF80) (L/s)	NUM		0.7	0-4	3143	MISSING	258	7.6
CE_PRE_MEF25	[Clinical Exam Machine] Pre-BD Forced Expiratory Flow at 25% of FVC which still can be exhaled (FEF75) (L/s)	NUM		1.1	0-5	3143	MISSING	258	7.6
CE_PRE_MEF40	[Clinical Exam Machine] Pre-BD Forced Expiratory Flow at 40% of FVC which still can be exhaled (FEF60) (L/s)	NUM		2.6	0-9	3143	MISSING	258	7.6
CE_PRE_MEF50	[Clinical Exam Machine] Pre-BD Forced Expiratory Flow at 50% of FVC which still can be exhaled (FEF50) (L/s)	NUM		3.7	0-10	3143	MISSING	258	7.6
CE_PRE_MEF60	[Clinical Exam Machine] Pre-BD Forced Expiratory Flow at 60% of FVC which still can be exhaled (FEF40) (L/s)	NUM		4.8	0-12	3143	MISSING	258	7.6

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VARIABLE NAME	LABEL (VAR)	TYPE	FORMAT	MEAN	RANGE	N	CATEGORY	FREQUENCY	PERCENT
CE_PRE_MEF75	[Clinical Exam Machine] Pre-BD Forced Expiratory Flow at 75% of FVC which still can be exhaled (FEF25) (L/s)	NUM		6.5	0-13	3143	MISSING	258	7.6
CE_PRE_MEF90	[Clinical Exam Machine] Pre-BD Forced Expiratory Flow at 90% of FVC which still can be exhaled (FEF10) (L/s)	NUM		7.0	0-14	3143	MISSING	258	7.6
CE_PRE_MMEF	[Clinical Exam Machine] Pre-BD Average flow rate between 25 and 75% of FVC (L/s)	NUM		2.8	0-9	3143	MISSING	258	7.6
CE_PRE_MMEF_PRED	[Clinical Exam Machine] Pre-BD Predicted Average flow rate between 25 and 75% of FVC (L/s)	NUM		3.3	1-5	3143	MISSING	258	7.6
CE_PRE_MMEF_LLN	[Clinical Exam Machine] Pre-BD Average flow rate between 25 and 75% of FVC lower limit of normal (L/s)	NUM		1.7	0-3	3141	MISSING	260	7.6
CE_PRE_MTC1	[Clinical Exam Machine] Pre-BD (FEF75 - FEF50) * 4 / FVC	NUM		-2.7	-9-1	3143	MISSING	258	7.6
CE_PRE_MTC2	[Clinical Exam Machine] Pre-BD (FEF50 - FEF25) * 4 / FVC	NUM		-2.8	-9-2	3143	MISSING	258	7.6
CE_PRE_MTC3	[Clinical Exam Machine] Pre-BD FEF25 * 4 / FVC	NUM		6.6	1-16	3143	MISSING	258	7.6
CE_PRE_MTCR	[Clinical Exam Machine] Pre-BD MTC1 / MTC3	NUM		1.0	-337-133	3143	MISSING	258	7.6
CE_PRE_PEF	[Clinical Exam Machine] Pre-BD Peak Expiratory Flow (L/s)	NUM		8.3	1-16	3143	MISSING	258	7.6
CE_PRE_PEF_PRED	[Clinical Exam Machine] Pre-BD Predicted Peak Expiratory Flow (L/s)	NUM		8.6	4-12	3143	MISSING	258	7.6
CE_PRE_PEF_LLN	[Clinical Exam Machine] Pre-BD Peak Expiratory Flow lower limit of normal (L/s)	NUM		6.3	2-9	3143	MISSING	258	7.6
CE_PRE_PEF_L_MIN	[Clinical Exam Machine] Pre-BD Peak Expiratory Flow in liters per minute	NUM		499.0	88-977	3143	MISSING	258	7.6
CE_PRE_PEF_L_MIN_PRED	[Clinical Exam Machine] Pre-BD Predicted Peak Expiratory Flow in liters per minute	NUM		517.0	249-737	3143	MISSING	258	7.6
CE_PRE_PEF_L_MIN_LLN	[Clinical Exam Machine] Pre-BD Peak Expiratory Flow in liters per minute lower limit of normal	NUM		379.7	149-563	3143	MISSING	258	7.6
CE_PRE_PEFT	[Clinical Exam Machine] Pre-BD Peak Expiratory Flow time (s)	NUM		0.1	0-1	3143	MISSING	258	7.6
CE_PRE_T0	[Clinical Exam Machine] Pre-BD T0 value	NUM		0.2	0-7	3143	MISSING	258	7.6
CE_PRE_VCMAX	[Clinical Exam Machine] Pre-BD Largest VC value of a trial (L)	NUM		4.0	1-8	3143	MISSING	258	7.6
CE_PRE_VCMAX_PRED	[Clinical Exam Machine] Pre-BD Predicted Largest VC value of a trial (L)	NUM	BEST	4.3	2-7	3143	MISSING	258	7.6

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VARIABLE NAME	LABEL (VAR)	TYPE	FORMAT	MEAN	RANGE	N	CATEGORY	FREQUENCY	PERCENT
CE_PRE_VC_MAX_LL_N	[Clinical Exam Machine] Pre-BD Largest VC value of a trial lower limit of normal (L)	NUM	BEST	3.5	1-6	3143	MISSING	258	7.6
CE_POST_SAMPLE_TEST_DATE	[Clinical Exam Machine] Post-BD sample test date/timestamp	NUM	DATETIME	1751664693	1.72477E9-1.78291E9	3048	MISSING	353	10.4
CE_POST_TEST_ID	[Clinical Exam Machine] Post-BD test ID	NUM	BEST	3137.9	34-6233	3048	MISSING	353	10.4
CE_POST_TEST_DATE	[Clinical Exam Machine] Post-BD test date/timestamp	NUM	MMDDYY	*****	*****_***** *E9	3048	MISSING	353	10.4
CE_POST_TRIAL_ID	[Clinical Exam Machine] Post-BD trial ID	NUM	BEST	18815.6	193-37014	3048	MISSING	353	10.4
CE_POST_QUALITY_GRADE	[Clinical Exam Machine] Post-BD PFT Quality Grade	CHAR	\$.-.				
CE_POST_PFT_INTERP_OLD	[Clinical Exam Machine] Interpretation of POST-BD PFT results using Hankinson (1999) method [obsolete]	CHAR			.-.				
CE_POST_PFT_INTERP_NEW	[Clinical Exam Machine] Interpretation of POST-BD PFT results using Hankinson (1999) method	CHAR			.-.				
CE_POST_BEV	[Clinical Exam Machine] Post-BD Back Extrapolated Volume (L)	NUM	BEST	0.1	0-1	3048	MISSING	353	10.4
CE_POST_EOTV	[Clinical Exam Machine] Post-BD End of Test Volume (L)	NUM	BEST	0.0	0-2	3048	MISSING	353	10.4
CE_POST_FEF10	[Clinical Exam Machine] Post-BD Forced Expiratory Flow at 10% of FVC (L/s)	NUM	BEST	7.3	0-16	3048	MISSING	353	10.4
CE_POST_FEF25	[Clinical Exam Machine] Post-BD Forced Expiratory Flow at 25% of FVC (L/s)	NUM	BEST	6.9	1-14	3048	MISSING	353	10.4
CE_POST_FEF2575	[Clinical Exam Machine] Post-BD Average flow rate between 25 and 75% of FVC (L/s)	NUM	BEST	3.3	0-9	3048	MISSING	353	10.4
CE_POST_FEF2575_PRED	[Clinical Exam Machine] Post-BD Predicted Average flow rate between 25 and 75% of FVC (L/s)	NUM	BEST	3.3	1-5	3048	MISSING	353	10.4
CE_POST_FEF2575_LL_N	[Clinical Exam Machine] Post-BD Average flow rate between 25 and 75% of FVC lower limit of normal (L/s)	NUM	BEST	1.7	0-3	3047	MISSING	354	10.4
CE_POST_FEF2575_6	[Clinical Exam Machine] Post-BD Average flow rate between 25% and 75% of FVC6 (L/s)	NUM	BEST	3.5	0-9	3048	MISSING	353	10.4
CE_POST_FEF2575_FVC	[Clinical Exam Machine] Post-BD Ratio of FEF2575 and FVC (%)	NUM	BEST	0.8	0-2	3048	MISSING	353	10.4
CE_POST_FEF40	[Clinical Exam Machine] Post-BD Forced Expiratory Flow at 40% of FVC (L/s)	NUM	BEST	5.3	0-13	3048	MISSING	353	10.4

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VARIABLE NAME	LABEL (VAR)	TYPE	FORMAT	MEAN	RANGE	N	CATEGORY	FREQUENCY	PERCENT
CE_POST_FEF50	[Clinical Exam Machine] Post-BD Forced Expiratory Flow at 50% of FVC (L/s)	NUM	BEST	4.1	0-11	3048	MISSING	353	10.4
CE_POST_FEF50_FVC	[Clinical Exam Machine] Post-BD Ratio of FEF50 and FVC (%)	NUM	BEST	1.1	0-3	3048	MISSING	353	10.4
CE_POST_FEF50_VCMAX	[Clinical Exam Machine] Post-BD Ratio of FEF50 and VCMax (%)	NUM	BEST	1.1	0-3	3048	MISSING	353	10.4
CE_POST_FEF60	[Clinical Exam Machine] Post-BD Forced Expiratory Flow at 60% of FVC (L/s)	NUM	BEST	3.0	0-8	3048	MISSING	353	10.4
CE_POST_FEF75	[Clinical Exam Machine] Post-BD Forced Expiratory Flow at 75% of FVC (L/s)	NUM	BEST	1.3	0-5	3048	MISSING	353	10.4
CE_POST_FEF7585	[Clinical Exam Machine] Post-BD Average flow rate between 75 and 85% of FVC (L/s)	NUM	BEST	0.8	0-5	3048	MISSING	353	10.4
CE_POST_FEF80	[Clinical Exam Machine] Post-BD Forced Expiratory Flow at 80% of FVC (L/s)	NUM	BEST	0.9	0-5	3048	MISSING	353	10.4
CE_POST_FET	[Clinical Exam Machine] Post-BD Forced Expiratory Time. Elapsed time since T0 at which end-of-test criteria is met. (s)	NUM	BEST	9.4	2-25	3048	MISSING	353	10.4
CE_POST_FET2575	[Clinical Exam Machine] Post-BD Forced Expiratory Time between FEF25 and FEF75. Also called Mean Expiratory Time. (s)	NUM	BEST	0.8	0-12	3048	MISSING	353	10.4
CE_POST_FEV1	[Clinical Exam Machine] Post-BD Forced Expiratory Volume after 1 second (L)	NUM	BEST	3.2	1-6	3048	MISSING	353	10.4
CE_POST_FEV1_PRED	[Clinical Exam Machine] Post-BD Predicted FEV1 (L)	NUM	BEST	3.4	1-6	3048	MISSING	353	10.4
CE_POST_FEV1_LLN	[Clinical Exam Machine] Post-BD FEV1 lower limit of normal (L)	NUM	BEST	2.7	1-5	3048	MISSING	353	10.4
CE_POST_FEV1_FEV6	[Clinical Exam Machine] Post-BD Ratio of FEV1 and FEV6 (%)	NUM	BEST	0.8	0-1	3048	MISSING	353	10.4
CE_POST_FEV1_FEV6_PRED	[Clinical Exam Machine] Post-BD Predicted Ratio of FEV1 to FEV6 (%)	NUM	BEST	0.8	1-1	3048	MISSING	353	10.4
CE_POST_FEV1_FEV6_LLN	[Clinical Exam Machine] Post-BD Ratio of FEV1 to FEV6 lower limit of normal (%)	NUM	BEST	0.7	1-1	3048	MISSING	353	10.4
CE_POST_FEV1_FVC	[Clinical Exam Machine] Post-BD Tiffenau Index, ratio of FEV1 and FVC (%)	NUM	BEST	0.8	0-1	3048	MISSING	353	10.4
CE_POST_FEV1_FVC_PRED	[Clinical Exam Machine] Post-BD Predicted FEV1/FVC (%)	NUM	BEST	0.8	1-1	3048	MISSING	353	10.4
CE_POST_FEV1_FVC_LLN	[Clinical Exam Machine] Post-BD FEV1/FVC lower limit of normal (%)	NUM	BEST	0.7	1-1	3048	MISSING	353	10.4
CE_POST_FEV1_VCMAX	[Clinical Exam Machine] Post-BD Ratio of FEV1 to VCMax (%)	NUM	BEST	0.8	0-1	3048	MISSING	353	10.4
CE_POST_FEV1_VCMAX_PRED	[Clinical Exam Machine] Post-BD Predicted Ratio of FEV1 to VCMax (%)	NUM	BEST	0.8	1-1	3048	MISSING	353	10.4

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VARIABLE NAME	LABEL (VAR)	TYPE	FORMAT	MEAN	RANGE	N	CATEGORY	FREQUENCY	PERCENT
CE_POST_FEV1_VCMAX_LLN	[Clinical Exam Machine] Post-BD Ratio of FEV1 to VCMax lower limit of normal (%)	NUM	BEST	0.7	1-1	3048	MISSING	353	10.4
CE_POST_FEV_25	[Clinical Exam Machine] Post-BD Forced Expiratory Volume after 0.25 seconds (L)	NUM	BEST	1.7	0-3	3048	MISSING	353	10.4
CE_POST_FEV3	[Clinical Exam Machine] Post-BD Forced Expiratory Volume after 3 seconds (L)	NUM	BEST	3.7	1-8	3048	MISSING	353	10.4
CE_POST_FEV3_FVC	[Clinical Exam Machine] Post-BD Ratio of FEV3 and FVC (%)	NUM	BEST	0.9	0-1	3048	MISSING	353	10.4
CE_POST_FEV3_VCMAX	[Clinical Exam Machine] Post-BD Ratio of FEV3 and VCMax (%)	NUM	BEST	0.9	0-1	3048	MISSING	353	10.4
CE_POST_FEV_5	[Clinical Exam Machine] Post-BD Forced Expiratory Volume after 0.5 seconds (L)	NUM	BEST	2.5	1-5	3048	MISSING	353	10.4
CE_POST_FEV_5_FVC	[Clinical Exam Machine] Post-BD Ratio of FEV.5 and FVC (%)	NUM	BEST	0.6	0-1	3048	MISSING	353	10.4
CE_POST_FEV6	[Clinical Exam Machine] Post-BD Forced Expiratory Volume after 6 seconds (L)	NUM	BEST	3.9	1-8	3048	MISSING	353	10.4
CE_POST_FEV6_PRED	[Clinical Exam Machine] Post-BD Predicted Forced Expiratory Volume after 6 seconds (L)	NUM	BEST	4.2	2-7	3048	MISSING	353	10.4
CE_POST_FEV6_LLN	[Clinical Exam Machine] Post-BD Forced Expiratory Volume after 6 seconds lower limit of normal (L)	NUM	BEST	3.4	1-6	3048	MISSING	353	10.4
CE_POST_FEV_75	[Clinical Exam Machine] Post-BD Forced expiratory volume after 0.75 seconds (L)	NUM	BEST	3.0	1-6	3048	MISSING	353	10.4
CE_POST_FEV_75_FEV6	[Clinical Exam Machine] Post-BD Ratio of FEV.75 and FEV6 (%)	NUM	BEST	0.8	0-1	3048	MISSING	353	10.4
CE_POST_FEV_75_FVC	[Clinical Exam Machine] Post-BD Ratio of FEV.75 and FVC (%)	NUM	BEST	0.7	0-1	3048	MISSING	353	10.4
CE_POST_FEV_75_VCMAX	[Clinical Exam Machine] Post-BD Ratio of FEV.75 and VCMax (%)	NUM	BEST	0.7	0-1	3048	MISSING	353	10.4
CE_POST_FVC	[Clinical Exam Machine] Post-BD Forced vital capacity (L)	NUM	BEST	4.0	1-8	3048	MISSING	353	10.4
CE_POST_FVC_PRED	[Clinical Exam Machine] Post-BD Predicted FVC (L)	NUM	BEST	4.3	2-7	3048	MISSING	353	10.4
CE_POST_FVC_LLN	[Clinical Exam Machine] Post-BD FVC lower limit of normal (L)	NUM	BEST	3.5	1-6	3048	MISSING	353	10.4
CE_POST_MEF20	[Clinical Exam Machine] Post-BD Forced Expiratory Flow at 20% of FVC which still can be exhaled (FEF80) (L/s)	NUM	BEST	0.9	0-5	3048	MISSING	353	10.4

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VARIABLE NAME	LABEL (VAR)	TYPE	FORMAT	MEAN	RANGE	N	CATEGORY	FREQUENCY	PERCENT
CE_POST_MEF25	[Clinical Exam Machine] Post-BD Forced Expiratory Flow at 25% of FVC which still can be exhaled (FEF75) (L/s)	NUM	BEST	1.3	0-5	3048	MISSING	353	10.4
CE_POST_MEF40	[Clinical Exam Machine] Post-BD Forced Expiratory Flow at 40% of FVC which still can be exhaled (FEF60) (L/s)	NUM	BEST	3.0	0-8	3048	MISSING	353	10.4
CE_POST_MEF50	[Clinical Exam Machine] Post-BD Forced Expiratory Flow at 50% of FVC which still can be exhaled (FEF50) (L/s)	NUM	BEST	4.1	0-11	3048	MISSING	353	10.4
CE_POST_MEF60	[Clinical Exam Machine] Post-BD Forced Expiratory Flow at 60% of FVC which still can be exhaled (FEF40) (L/s)	NUM	BEST	5.3	0-13	3048	MISSING	353	10.4
CE_POST_MEF75	[Clinical Exam Machine] Post-BD Forced Expiratory Flow at 75% of FVC which still can be exhaled (FEF25) (L/s)	NUM	BEST	6.9	1-14	3048	MISSING	353	10.4
CE_POST_MEF90	[Clinical Exam Machine] Post-BD Forced Expiratory Flow at 90% of FVC which still can be exhaled (FEF10) (L/s)	NUM	BEST	7.3	0-16	3048	MISSING	353	10.4
CE_POST_MMEF	[Clinical Exam Machine] Post-BD Average flow rate between 25 and 75% of FVC (L/s)	NUM	BEST	3.3	0-9	3048	MISSING	353	10.4
CE_POST_MMEF_PRED	[Clinical Exam Machine] Post-BD Predicted Average flow rate between 25 and 75% of FVC (L/s)	NUM	BEST	3.3	1-5	3048	MISSING	353	10.4
CE_POST_MMEF_LLN	[Clinical Exam Machine] Post-BD Average flow rate between 25 and 75% of FVC lower limit of normal (L/s)	NUM	BEST	1.7	0-3	3047	MISSING	354	10.4
CE_POST_MTC1	[Clinical Exam Machine] Post-BD (FEF75 - FEF50) * 4 / FVC	NUM	BEST	-2.9	-10-1	3048	MISSING	353	10.4
CE_POST_MTC2	[Clinical Exam Machine] Post-BD (FEF50 - FEF25) * 4 / FVC	NUM	BEST	-2.8	-9-2	3048	MISSING	353	10.4
CE_POST_MTC3	[Clinical Exam Machine] Post-BD FEF25 * 4 / FVC	NUM	BEST	7.1	1-16	3048	MISSING	353	10.4
CE_POST_MTCR	[Clinical Exam Machine] Post-BD MTC1 / MTC3	NUM	BEST	2.1	-178-136 8	3048	MISSING	353	10.4
CE_POST_PEF	[Clinical Exam Machine] Post-BD Peak Expiratory Flow (L/s)	NUM	BEST	8.6	1-16	3048	MISSING	353	10.4
CE_POST_PEF_PRED	[Clinical Exam Machine] Post-BD Predicted Peak Expiratory Flow (L/s)	NUM	BEST	8.6	4-12	3048	MISSING	353	10.4
CE_POST_PEF_LLN	[Clinical Exam Machine] Post-BD Peak Expiratory Flow lower limit of normal (L/s)	NUM	BEST	6.3	2-9	3048	MISSING	353	10.4
CE_POST_PEF_L_MIN	[Clinical Exam Machine] Post-BD Peak Expiratory Flow in liters per minute	NUM	BEST	514.0	83-982	3048	MISSING	353	10.4
CE_POST_PEF_L_MIN_PRED	[Clinical Exam Machine] Post-BD Predicted Peak Expiratory Flow in liters per minute	NUM	BEST	517.4	249-737	3048	MISSING	353	10.4

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VARIABLE NAME	LABEL (VAR)	TYPE	FORMAT	MEAN	RANGE	N	CATEGORY	FREQUENCY	PERCENT
CE_POST_PEF_L_MIN_LLN	[Clinical Exam Machine] Post-BD Peak Expiratory Flow in liters per minute lower limit of normal	NUM	BEST	380.2	149-563	3048	MISSING	353	10.4
CE_POST_PEFT	[Clinical Exam Machine] Post-BD Peak Expiratory Flow time (s)	NUM	BEST	0.1	0-0	3048	MISSING	353	10.4
CE_POST_T0	[Clinical Exam Machine] Post-BD T0 value	NUM	BEST	0.2	0-3	3048	MISSING	353	10.4
CE_POST_VCMAX	[Clinical Exam Machine] Post-BD Largest VC value of a trial (L)	NUM	BEST	4.0	1-8	3048	MISSING	353	10.4
CE_POST_VCMAX_PRED	[Clinical Exam Machine] Post-BD Predicted Largest VC value of a trial (L)	NUM	BEST	4.3	2-7	3048	MISSING	353	10.4
CE_POST_VCMAX_LLN	[Clinical Exam Machine] Post-BD Largest VC value of a trial lower limit of normal (L)	NUM	BEST	3.5	1-6	3048	MISSING	353	10.4
CE_HANK_FEF2575_PRED_OLD	[Clinical Exam Machine] Predicted Average flow rate between 25 and 75% of FVC using Hankinson (1999) method (L) [obsolete]	NUM		3.3	1-5	3141	MISSING	260	7.6
CE_HANK_FEF2575_PRED_NEW	[Clinical Exam Machine] Predicted Average flow rate between 25 and 75% of FVC using Hankinson (1999) method (L)	NUM		3.2	1-5	3147	MISSING	254	7.5
CE_HANK_FEV1_PRED_OLD	[Clinical Exam Machine] Predicted FEV1 using Hankinson (1999) method (L) [obsolete]	NUM		3.4	2-6	3141	MISSING	260	7.6
CE_HANK_FEV1_LLN_OLD	[Clinical Exam Machine] FEV1 lower limit of normal using Hankinson (1999) method (L) [obsolete]	NUM		2.7	1-5	3141	MISSING	260	7.6
CE_HANK_FEV1_PRED_NEW	[Clinical Exam Machine] Predicted FEV1 using Hankinson (1999) method (L)	NUM		3.4	2-6	3147	MISSING	254	7.5
CE_HANK_FEV1_LLN_NEW	[Clinical Exam Machine] FEV1 lower limit of normal using Hankinson (1999) method (L)	NUM		2.7	1-5	3147	MISSING	254	7.5
CE_HANK_FEV1_FVC_PRED_OLD	[Clinical Exam Machine] Predicted FEV1/FVC using Hankinson (1999) method (%) [obsolete]	NUM		0.8	1-1	3141	MISSING	260	7.6
CE_HANK_FEV1_FVC_LLN_OLD	[Clinical Exam Machine] FEV1/FVC lower limit of normal using Hankinson (1999) method (%) [obsolete]	NUM		0.7	1-1	3141	MISSING	260	7.6
CE_HANK_FEV1_FVC_PRED_NEW	[Clinical Exam Machine] Predicted FEV1/FVC using Hankinson (1999) method (%)	NUM		0.8	1-1	3149	MISSING	252	7.4
CE_HANK_FEV1_FVC_LLN_NEW	[Clinical Exam Machine] FEV1/FVC lower limit of normal using Hankinson (1999) method (%)	NUM		0.7	1-1	3149	MISSING	252	7.4
CE_HANK_FVC_PRED_OLD	[Clinical Exam Machine] Predicted FVC using Hankinson (1999) method (L) [obsolete]	NUM		4.3	2-7	3141	MISSING	260	7.6

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VARIABLE NAME	LABEL (VAR)	TYPE	FORMAT	MEAN	RANGE	N	CATEGORY	FREQUENCY	PERCENT
CE_HANK_FVC_LLN_OLD	[Clinical Exam Machine] FVC lower limit of normal using Hankinson (1999) method (L) [obsolete]	NUM		3.5	2-6	3141	MISSING	260	7.6
CE_HANK_FVC_PRED_NEW	[Clinical Exam Machine] Predicted FVC using Hankinson (1999) method (L)	NUM		4.3	2-7	3147	MISSING	254	7.5
CE_HANK_FVC_LLN_NEW	[Clinical Exam Machine] FVC lower limit of normal using Hankinson (1999) method (L)	NUM		3.4	1-6	3147	MISSING	254	7.5
CE_PRE_TEST_TIME	[Clinical Exam Machine] Pre-BD test time	NUM	TIME	12:49	8:56-19:10	3140	MISSING	261	7.7
CE_POST_TEST_TIME	[Clinical Exam Machine] Post-BD test time	NUM	TIME	13:07	9:12-19:29	3045	MISSING	356	10.5
CE_OVR_BEST_FVC_PRE	[Clinic Exam Overread] Best measure of forced expiratory vital capacity (L)	NUM		4.0	1-8	3140	MISSING	261	7.7
CE_OVR_BEST_FEV1_PRE	[Clinic Exam Overread] Best measure of forced expiratory volume after 1 second (L)	NUM		3.1	1-6	3140	MISSING	261	7.7
CE_OVR_BEST_PEF_PRE	[Clinic Exam Overread] Best measure of peak expiratory flow (L)	NUM		7.8	1-15	3140	MISSING	261	7.7
CE_OVR_BEST_2575_PRE	[Clinic Exam Overread] Best measure of the average flow rate between 25 and 75% of FVC (L)	NUM		2.9	0-9	3140	MISSING	261	7.7
CE_OVR_SCND_FVC_PRE	[Clinic Exam Overread] Second best measure of forced expiratory vital capacity (L)	NUM		3.9	-1-8	3131	MISSING	270	7.9
CE_OVR_SCND_FEV1_PRE	[Clinic Exam Overread] Second best measure of forced expiratory volume after 1 second (L)	NUM		3.0	-1-6	3131	MISSING	270	7.9
CE_OVR_SCND_PEF_PRE	[Clinic Exam Overread] Second best measure of peak expiratory flow (L)	NUM		7.7	-1-15	3131	MISSING	270	7.9
CE_OVR_SCND_2575_PRE	[Clinic Exam Overread] Second best measure of the average flow rate between 25 and 75% of FVC (L)	NUM		2.8	-1-8	3131	MISSING	270	7.9
CE_OVR_THRD_FVC_PRE	[Clinic Exam Overread] Third best measure of forced expiratory vital capacity (L)	NUM		3.8	-1-8	3025	MISSING	376	11.1
CE_OVR_THRD_FEV1_PRE	[Clinic Exam Overread] Third best measure of forced expiratory volume after 1 second (L)	NUM		2.9	-1-6	3025	MISSING	376	11.1
CE_OVR_THRD_PEF_PRE	[Clinic Exam Overread] Third best measure of peak expiratory flow (L)	NUM		7.5	-1-15	3025	MISSING	376	11.1
CE_OVR_THRD_2575_PRE	[Clinic Exam Overread] Third best measure of the average flow rate between 25 and 75% of FVC (L)	NUM		2.7	-1-8	3025	MISSING	376	11.1

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VARIABLE NAME	LABEL (VAR)	TYPE	FORMAT	MEAN	RANGE	N	CATEGORY	FREQUENCY	PERCENT
CE_OVR_READER_QC_FEV1_PRE	[Clinic Exam Overread] Quality score for forced expiratory volume in 1 second assigned by overreader	NUM		3.4	0-4	3140	MISSING	261	7.7
CE_OVR_READER_QC_FVC_PRE	[Clinic Exam Overread] Quality score for forced expiratory vital capacity assigned by overreader	NUM		3.3	0-4	3140	MISSING	261	7.7
CE_OVR_READER_QC_FLOW_PRE	[Clinic Exam Overread] Quality score for flow assigned by overreader	NUM		3.2	0-4	3140	MISSING	261	7.7
CE_OVR_COMMENTS_PRE	[Clinic Exam Overread] Comments from the overreader about quality of test	CHAR			.-.				
PRE_BD	Pre Post BD	NUM		0.0	0-0	3140	MISSING	261	7.7
CE_OVR_BEST_FVC_POST	[Clinic Exam Overread] Best measure of forced expiratory vital capacity (L)	NUM		4.0	1-8	3044	MISSING	357	10.5
CE_OVR_BEST_FEV1_POST	[Clinic Exam Overread] Best measure of forced expiratory volume after 1 second (L)	NUM		3.2	1-6	3044	MISSING	357	10.5
CE_OVR_BEST_PEF_POST	[Clinic Exam Overread] Best measure of peak expiratory flow (L)	NUM		8.1	2-16	3044	MISSING	357	10.5
CE_OVR_BEST_2575_POST	[Clinic Exam Overread] Best measure of the average flow rate between 25 and 75% of FVC (L)	NUM		3.3	0-9	3044	MISSING	357	10.5
CE_OVR_SCND_FVC_POST	[Clinic Exam Overread] Second best measure of forced expiratory vital capacity (L)	NUM		3.9	1-8	3040	MISSING	361	10.6
CE_OVR_SCND_FEV1_POST	[Clinic Exam Overread] Second best measure of forced expiratory volume after 1 second (L)	NUM		3.1	1-6	3040	MISSING	361	10.6
CE_OVR_SCND_PEF_POST	[Clinic Exam Overread] Second best measure of peak expiratory flow (L)	NUM		8.0	1-16	3040	MISSING	361	10.6
CE_OVR_SCND_2575_POST	[Clinic Exam Overread] Second best measure of the average flow rate between 25 and 75% of FVC (L)	NUM		3.2	0-9	3040	MISSING	361	10.6
CE_OVR_THRD_FVC_POST	[Clinic Exam Overread] Third best measure of forced expiratory vital capacity (L)	NUM		3.8	1-7	2969	MISSING	432	12.7
CE_OVR_THRD_FEV1_POST	[Clinic Exam Overread] Third best measure of forced expiratory volume after 1 second (L)	NUM		3.0	1-6	2969	MISSING	432	12.7
CE_OVR_THRD_PEF_POST	[Clinic Exam Overread] Third best measure of peak expiratory flow (L)	NUM		7.8	1-14	2969	MISSING	432	12.7
CE_OVR_THRD_2575_POST	[Clinic Exam Overread] Third best measure of the average flow rate between 25 and 75% of FVC (L)	NUM		3.1	0-10	2969	MISSING	432	12.7
CE_OVR_READER_QC_FEV1_POST	[Clinic Exam Overread] Quality score for forced expiratory volume in 1 second assigned by overreader	NUM		3.5	0-4	3044	MISSING	357	10.5

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CE_OVR_READER_QC_FVC_POST	[Clinic Exam Overread] Quality score for forced expiratory vital capacity assigned by overreader	NUM		3.4	0-4	3044	MISSING	357	10.5
CE_OVR_READER_QC_FLOW_POST	[Clinic Exam Overread] Quality score for flow assigned by overreader	NUM		3.3	0-4	3044	MISSING	357	10.5
CE_OVR_COMMENTS_POST	[Clinic Exam Overread] Comments from the overreader about quality of test	CHAR			.-.				
POST_BD	Pre Post BD	NUM		1.0	1-1	3044	MISSING	357	10.5
CE_PFT_COMP	[Clinical Exam Machine] Flag for machine completion	NUM	PFTCOMP		0		Neither Pre-BD or Post-BD Complete	258	7.6
					1		Both Pre-BD and Post-BD Complete	3048	89.6
					2		Only Pre-BD Complete	95	2.8
CE_PRE_DISP	[Clinical Exam Machine] Flag for Pre-BD completion	NUM	PFTDISP_CE		1		Pft Complete	3143	92.4
					2		Visit Terminated Early	2	0.1
					3		Medical Exclusion	232	6.8
					4		Participant Refused	1	0.0
					5		Technical Problem	2	0.1
					6		No Result, Reason Unknown	16	0.5
					7		Other Medical Reason	4	0.1
					8		Did Not Follow Directions	1	0.0
CE_POST_DISP	[Clinical Exam Machine] Flag for Post-BD completion	NUM	PFTDISP_CE		1		Pft Complete	3048	89.6
					2		Visit Terminated Early	2	0.1
					3		Medical Exclusion	232	6.8
					4		Participant Refused	35	1.0
					5		Technical Problem	7	0.2
					6		No Result, Reason Unknown	24	0.7
					7		Other Medical Reason	49	1.4
					8		Did Not Follow Directions	4	0.1
CE_QUAN_SEX	[Clinical Exam Quanjer] Sex value used in calculating Quanjer (2012) equations	NUM	QSEX		1		Male	2604	76.6
					2		Female	797	23.4
CE_QUAN_AGE	[Clinical Exam Quanjer] Age value used in calculating Quanjer (2012) equations	NUM		49.3	24-87	3401		3401	100.0

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VARIABLE NAME	LABEL (VAR)	TYPE	FORMAT	MEAN	RANGE	N	CATEGORY	FREQUENCY	PERCENT
CE_QUAN_HEIGHT	[Clinical Exam Quanjer] Height value used in calculating Quanjer (2012) equations	NUM		173.3	141-199	3398	MISSING	3	0.1
CE_QUAN_ETHNICITY	[Clinical Exam Quanjer] Ethnicity value used in calculating Quanjer (2012) equations	NUM	QRACE					10	0.3
					1		White	1802	53.0
					2		Black	1326	39.0
					3		NE Asian	1	0.0
					4		SE Asian	19	0.6
					5		Other/Unknown	243	7.1
CE_QUAN_PRE_FEV1_VALUE	[Clinical Exam Quanjer] Forced expiratory volume after 1 second (L)	NUM		3.1	1-6	3143	MISSING	258	7.6
CE_QUAN_PRE_L_SPLINE	[Clinical Exam Quanjer] One of three splines (L,M, and S) which vary by age, sex, height, and ethnicity used to calculate Quanjer (2012) equations	NUM		0.0	0-0	3401		3401	100.0
CE_QUAN_PRE_M_SPLINE	[Clinical Exam Quanjer] One of three splines (L,M, and S) which vary by age, sex, height, and ethnicity used to calculate Quanjer (2012) equations	NUM		-0.0	-0-0	3401		3401	100.0
CE_QUAN_PRE_S_SPLINE	[Clinical Exam Quanjer] One of three splines (L,M, and S) which vary by age, sex, height, and ethnicity used to calculate Quanjer (2012) equations	NUM		0.0	-0-0	3401		3401	100.0
CE_QUAN_PRE_FEV1_M	[Clinical Exam Quanjer] Predicted FEV1 using Quanjer (2012) method (L)	NUM		3.4	2-6	3398	MISSING	3	0.1
CE_QUAN_PRE_FEV1_Z	[Clinical Exam Quanjer] Z score for FEV1 using Quanjer (2012) method (L)	NUM		-0.6	-5-3	3143	MISSING	258	7.6
CE_QUAN_PRE_FEV1_PCT_PRED	[Clinical Exam Quanjer] Percent predicted for FEV1 using Quanjer (2012) method (%)	NUM		90.7	21-144	3143	MISSING	258	7.6
CE_QUAN_PRE_FEV1_LLN	[Clinical Exam Quanjer] FEV1 lower limit of normal using Quanjer (2012) method (L)	NUM		2.6	1-5	3398	MISSING	3	0.1
CE_QUAN_PRE_FVC_VALUE	[Clinical Exam Quanjer] Forced vital capacity (L)	NUM		4.0	1-8	3143	MISSING	258	7.6
CE_QUAN_PRE_FVC_M	[Clinical Exam Quanjer] Predicted FVC using Quanjer (2012) method (L)	NUM		4.2	2-7	3398	MISSING	3	0.1
CE_QUAN_PRE_FVC_Z	[Clinical Exam Quanjer] Z score for FVC using Quanjer (2012) method (L)	NUM		-0.4	-6-3	3143	MISSING	258	7.6
CE_QUAN_PRE_FVC_PCT_PRED	[Clinical Exam Quanjer] Percent predicted for FVC using Quanjer (2012) method (%)	NUM		94.4	27-145	3143	MISSING	258	7.6
CE_QUAN_PRE_FVC_LLN	[Clinical Exam Quanjer] FVC lower limit of normal using Quanjer (2012) method (L)	NUM		3.3	1-6	3398	MISSING	3	0.1

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VARIABLE NAME	LABEL (VAR)	TYPE	FORMAT	MEAN	RANGE	N	CATEGORY	FREQUENCY	PERCENT
CE_QUAN_PRE_FEV1FVC_VALUE	[Clinical Exam Quanjer] Tiffenau Index, ratio of FEV1 and FVC (%)	NUM		0.8	0-1	3143	MISSING	258	7.6
CE_QUAN_PRE_FEV1FVC_M	[Clinical Exam Quanjer] Predicted FEV1/FVC using Quanjer (2012) method (%)	NUM		0.8	1-1	3398	MISSING	3	0.1
CE_QUAN_PRE_FEV1FVC_Z	[Clinical Exam Quanjer] Z score for FEV1/FVC using Quanjer (2012) method (%)	NUM		-0.4	-5-4	3143	MISSING	258	7.6
CE_QUAN_PRE_FEV1FVC_LLN	[Clinical Exam Quanjer] FEV1/FVC lower limit of normal using Quanjer (2012) method (%)	NUM		0.7	1-1	3398	MISSING	3	0.1
CE_QUAN_PRE_FEV1FVC_PCT_PRED	[Clinical Exam Quanjer] Percent predicted for FEV1/FVC using Quanjer (2012) method (%)	NUM		95.8	38-125	3143	MISSING	258	7.6
CE_QUAN_PRE_FEF2575_VALUE	[Clinical Exam Quanjer] Average flow rate between 25 and 75% of FVC (L)	NUM		2.8	0-9	3143	MISSING	258	7.6
CE_QUAN_PRE_FEF2575_M	[Clinical Exam Quanjer] Predicted average flow rate between 25 and 75% of FVC using Quanjer (2012) method (L)	NUM		3.2	1-6	3398	MISSING	3	0.1
CE_QUAN_PRE_FEF2575_Z	[Clinical Exam Quanjer] Z score for average flow rate between 25 and 75% of FVC using Quanjer (2012) method (L)	NUM		-0.4	-5-4	3143	MISSING	258	7.6
CE_QUAN_PRE_FEF2575_LLN	[Clinical Exam Quanjer] FEF2575 lower limit of normal using Quanjer (2012) method (L)	NUM		1.7	1-4	3398	MISSING	3	0.1
CE_QUAN_PRE_FEF2575_PCT_PRED	[Clinical Exam Quanjer] Percent predicted for FEF2575 using Quanjer (2012) method (%)	NUM		89.4	7-313	3143	MISSING	258	7.6
CE_QUAN_PRE_FEF75_VALUE	[Clinical Exam Quanjer] Forced expiratory flow at 75% of FVC (L)	NUM		1.1	0-5	3143	MISSING	258	7.6
CE_QUAN_PRE_FEF75_M	[Clinical Exam Quanjer] Predicted FEF75 using Quanjer (2012) method (L)	NUM		1.1	0-3	3398	MISSING	3	0.1
CE_QUAN_PRE_FEF75_Z	[Clinical Exam Quanjer] Z score for FEF75 using Quanjer (2012) method (L)	NUM		-0.2	-5-4	3143	MISSING	258	7.6
CE_QUAN_PRE_FEF75_LLN	[Clinical Exam Quanjer] FEF75 lower limit of normal using Quanjer (2012) method (L)	NUM		0.5	0-1	3398	MISSING	3	0.1
CE_QUAN_PRE_FEF75_PCT_PRED	[Clinical Exam Quanjer] Percent predicted for FEF25 using Quanjer (2012) method (%)	NUM		104.1	7-805	3143	MISSING	258	7.6
CE_QUAN_POST_FEV1_VALUE	[Clinical Exam Quanjer] Forced expiratory volume after 1 second (L)	NUM		3.2	1-6	3048	MISSING	353	10.4
CE_QUAN_POST_L_SPLINE	[Clinical Exam Quanjer] One of three splines (L,M, and S) which vary by age, sex, height, and ethnicity used to calculate Quanjer (2012) equations	NUM		0.0	0-0	3401		3401	100.0

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VARIABLE NAME	LABEL (VAR)	TYPE	FORMAT	MEAN	RANGE	N	CATEGORY	FREQUENCY	PERCENT
CE_QUAN_POST_M_SPLINE	[Clinical Exam Quanjer] One of three splines (L,M, and S) which vary by age, sex, height, and ethnicity used to calculate Quanjer (2012) equations	NUM		-0.0	-0-0	3401		3401	100.0
CE_QUAN_POST_S_SPLINE	[Clinical Exam Quanjer] One of three splines (L,M, and S) which vary by age, sex, height, and ethnicity used to calculate Quanjer (2012) equations	NUM		0.0	-0-0	3401		3401	100.0
CE_QUAN_POST_FEV1_M	[Clinical Exam Quanjer] Predicted FEV1 using Quanjer (2012) method (L)	NUM		3.4	2-6	3398	MISSING	3	0.1
CE_QUAN_POST_FEV1_Z	[Clinical Exam Quanjer] Z score for FEV1 using Quanjer (2012) method (L)	NUM		-0.4	-5-5	3048	MISSING	353	10.4
CE_QUAN_POST_FEV1_PCT_PRED	[Clinical Exam Quanjer] Percent predicted for FEV1 using Quanjer (2012) method (%)	NUM		93.6	23-162	3048	MISSING	353	10.4
CE_QUAN_POST_FEV1_LLN	[Clinical Exam Quanjer] FEV1 lower limit of normal using Quanjer (2012) method (L)	NUM		2.6	1-5	3398	MISSING	3	0.1
CE_QUAN_POST_FVC_VALUE	[Clinical Exam Quanjer] Forced vital capacity (L)	NUM		4.0	1-8	3048	MISSING	353	10.4
CE_QUAN_POST_FVC_M	[Clinical Exam Quanjer] Predicted FVC using Quanjer (2012) method (L)	NUM		4.2	2-7	3398	MISSING	3	0.1
CE_QUAN_POST_FVC_Z	[Clinical Exam Quanjer] Z score for FVC using Quanjer (2012) method (L)	NUM		-0.4	-5-4	3048	MISSING	353	10.4
CE_QUAN_POST_FVC_PCT_PRED	[Clinical Exam Quanjer] Percent predicted for FVC using Quanjer (2012) method (%)	NUM		94.4	37-155	3048	MISSING	353	10.4
CE_QUAN_POST_FVC_LLN	[Clinical Exam Quanjer] FVC lower limit of normal using Quanjer (2012) method (L)	NUM		3.3	1-6	3398	MISSING	3	0.1
CE_QUAN_POST_FEV1FVC_VALUE	[Clinical Exam Quanjer] Tiffenau Index, ratio of FEV1 and FVC (%)	NUM		0.8	0-1	3048	MISSING	353	10.4
CE_QUAN_POST_FEV1FVC_M	[Clinical Exam Quanjer] Predicted FEV1/FVC using Quanjer (2012) method (%)	NUM		0.8	1-1	3398	MISSING	3	0.1
CE_QUAN_POST_FEV1FVC_Z	[Clinical Exam Quanjer] Z score for FEV1/FVC using Quanjer (2012) method (%)	NUM		-0.0	-5-3	3048	MISSING	353	10.4
CE_QUAN_POST_FEV1FVC_LLN	[Clinical Exam Quanjer] FEV1/FVC lower limit of normal using Quanjer (2012) method (%)	NUM		0.7	1-1	3398	MISSING	3	0.1
CE_QUAN_POST_FEV1FVC_PCT_PRED	[Clinical Exam Quanjer] Percent predicted for FEV1/FVC using Quanjer (2012) method (%)	NUM		99.0	36-123	3048	MISSING	353	10.4
CE_QUAN_POST_FEF2575_VALUE	[Clinical Exam Quanjer] Average flow rate between 25 and 75% of FVC (L)	NUM		3.3	0-9	3048	MISSING	353	10.4
CE_QUAN_POST_FEF2575_M	[Clinical Exam Quanjer] Predicted average flow rate between 25 and 75% of FVC using Quanjer (2012) method (L)	NUM		3.2	1-6	3398	MISSING	3	0.1

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CE_QUAN_POST_FEF2575_Z	[Clinical Exam Quanjer] Z score for average flow rate between 25 and 75% of FVC using Quanjer (2012) method (L)	NUM		-0.1	-5-3	3048	MISSING	353	10.4
CE_QUAN_POST_FEF2575_LL \bar{N}	[Clinical Exam Quanjer] FEF2575 lower limit of normal using Quanjer (2012) method (L)	NUM		1.7	1-4	3398	MISSING	3	0.1
CE_QUAN_POST_FEF2575_PCT_PRED	[Clinical Exam Quanjer] Percent predicted for FEF2575 using Quanjer (2012) method (%)	NUM		101.9	7-278	3048	MISSING	353	10.4
CE_QUAN_POST_FEF75_VALUE	[Clinical Exam Quanjer] Forced expiratory flow at 75% of FVC (L)	NUM		1.3	0-5	3048	MISSING	353	10.4
CE_QUAN_POST_FEF75_M	[Clinical Exam Quanjer] Predicted FEF75 using Quanjer (2012) method (L)	NUM		1.1	0-3	3398	MISSING	3	0.1
CE_QUAN_POST_FEF75_Z	[Clinical Exam Quanjer] Z score for FEF75 using Quanjer (2012) method (L)	NUM		0.2	-4-4	3048	MISSING	353	10.4
CE_QUAN_POST_FEF75_LL \bar{N}	[Clinical Exam Quanjer] FEF75 lower limit of normal using Quanjer (2012) method (L)	NUM		0.5	0-1	3398	MISSING	3	0.1
CE_QUAN_POST_FEF75_PCT_PRED	[Clinical Exam Quanjer] Percent predicted for FEF25 using Quanjer (2012) method (%)	NUM		124.6	10-501	3048	MISSING	353	10.4
CE_OVR_SESSION_SCORE_PRE	[Clinical Exam Overread] Minimum quality score for FEV1 and FVC	NUM		3.1	0-4	3140	MISSING	261	7.7
CE_OVR_QUALITY_PRE	[Clinical Exam Overread] Overread quality score	CHAR			.-.				
CE_OVR_PASS_PRE	[Clinical Exam Overread] Overread passing quality score	NUM	NY		.		Missing	261	7.7
					0		No	302	8.9
					1		Yes	2838	83.4
CE_PRE_PASS_PRE	[Clinical Exam Machine] Machine passing quality score	NUM	NY		.		Missing	258	7.6
					0		No	532	15.6
					1		Yes	2611	76.8
CE_OVR_SAVED_PRE	[Clinical Exam Overread] Passing overread score, failing machine score	NUM	NY		.		Missing	261	7.7
					0		No	2870	84.4
					1		Yes	270	7.9
CE_OVR_TOSSED_PRE	[Clinical Exam Overread] Failing overread score, passing machine score	NUM	NY		.		Missing	261	7.7
					0		No	3100	91.1
					1		Yes	40	1.2

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CE_OVR_SESSION_SCORE_POST	[Clinical Exam Overread] Minimum quality score for FEV1 and FVC	NUM		3.2	0-4	3044	MISSING	357	10.5
CE_OVR_QUALITY_POST	[Clinical Exam Overread] Overread quality score	CHAR			.-				
CE_OVR_PASS_POST	[Clinical Exam Overread] Overread passing quality score	NUM	NY		.		Missing	357	10.5
					0		No	216	6.4
					1		Yes	2828	83.2
CE_PRE_PASS_POST	[Clinical Exam Machine] Machine passing quality score	NUM	NY		.		Missing	353	10.4
					0		No	361	10.6
					1		Yes	2687	79.0
CE_OVR_SAVED_POST	[Clinical Exam Overread] Passing overread score, failing machine score	NUM	NY		.		Missing	357	10.5
					0		No	2864	84.2
					1		Yes	180	5.3
CE_OVR_TOSSED_POST	[Clinical Exam Overread] Failing overread score, passing machine score	NUM	NY		.		Missing	357	10.5
					0		No	3009	88.5
					1		Yes	35	1.0
CE_Y1_YN	CE_Y1_YN. Do you consider yourself to be Hispanic or Latino?	NUM	DKREFYN		.		Missing	5	0.1
					.S		Skipped	216	6.4
					1		Yes	76	2.2
					2		No	3093	90.9
					8		Don't Know	4	0.1
					9		Refused	7	0.2
CE_Y2_1_YN	CE_Y2_1_YN. What race do you consider yourself to be? Please select one or more of these categories: American Indian or Alaskan Native	NUM	NYREFDK		.		Missing	5	0.1
					.S		Skipped	216	6.4
					0		No	3021	88.8
					1		Yes	151	4.4
					9		Refused	8	0.2
CE_Y2_2_YN	CE_Y2_2_YN. What race do you consider yourself to be? Please select one or more of these categories: Asian	NUM	NYREFDK		.		Missing	5	0.1
					.S		Skipped	216	6.4
					0		No	3150	92.6

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							Yes	22	0.6
							Refused	8	0.2
CE_Y2_3_YN	CE_Y2_3_YN. What race do you consider yourself to be? Please select one or more of these categories: Black or African American	NUM	NYREFDK	.			Missing	5	0.1
							Skipped	216	6.4
							No	1888	55.5
							Yes	1284	37.8
							Refused	8	0.2
CE_Y2_4_YN	CE_Y2_4_YN. What race do you consider yourself to be? Please select one or more of these categories: Native Hawaiian or Pacific Islander	NUM	NYREFDK	.			Missing	5	0.1
							Skipped	216	6.4
							No	3160	92.9
							Yes	12	0.4
							Refused	8	0.2
CE_Y2_5_YN	CE_Y2_5_YN. What race do you consider yourself to be? Please select one or more of these categories: White	NUM	NYREFDK	.			Missing	5	0.1
							Skipped	216	6.4
							No	1431	42.1
							Yes	1741	51.2
							Refused	8	0.2
CE_Y2_6_YN	CE_Y2_6_YN. What race do you consider yourself to be? Please select one or more of these categories: OTHER, SPECIFY	NUM	NYREFDK	.			Missing	5	0.1
							Skipped	216	6.4
							No	3110	91.4
							Yes	62	1.8
							Refused	8	0.2
CE_Y2_6_OTHER_TXT	CE_Y2_6_OTHER_TXT. What race do you consider yourself to be? Please select one or more of these categories: OTHER, SPECIFY [TEXT: SPECIFY]	CHAR	\$CHAR	.-.					
CE_Y3_YN	CE_Y3_YN. Do you consider your (biological) mother to be Hispanic or Latino?	NUM	DKREFYN	.			Missing	5	0.1
							Skipped	216	6.4
							Yes	51	1.5
							No	3112	91.5
							Don't Know	10	0.3

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VARIABLE NAME	LABEL (VAR)	TYPE	FORMAT	MEAN	RANGE	N	CATEGORY	FREQUENCY	PERCENT
					9		Refused	7	0.2
CE_Y4_1_YN	CE_Y4_1_YN. What race do you consider your (biological) mother to be? Please select one or more of these categories: American Indian or Alaskan Native	NUM	NYREFDK	.			Missing	5	0.1
				.S			Skipped	216	6.4
				0			No	3004	88.3
				1			Yes	159	4.7
				8			Don't Know	9	0.3
				9			Refused	8	0.2
CE_Y4_2_YN	CE_Y4_2_YN. What race do you consider your (biological) mother to be? Please select one or more of these categories: Asian	NUM	NYREFDK	.			Missing	5	0.1
				.S			Skipped	216	6.4
				0			No	3138	92.3
				1			Yes	25	0.7
				8			Don't Know	9	0.3
				9			Refused	8	0.2
CE_Y4_3_YN	CE_Y4_3_YN. What race do you consider your (biological) mother to be? Please select one or more of these categories: Black or African American	NUM	NYREFDK	.			Missing	5	0.1
				.S			Skipped	216	6.4
				0			No	1905	56.0
				1			Yes	1258	37.0
				8			Don't Know	9	0.3
				9			Refused	8	0.2
CE_Y4_4_YN	CE_Y4_4_YN. What race do you consider your (biological) mother to be? Please select one or more of these categories: Native Hawaiian or Pacific Islander	NUM	NYREFDK	.			Missing	5	0.1
				.S			Skipped	216	6.4
				0			No	3154	92.7
				1			Yes	9	0.3
				8			Don't Know	9	0.3
				9			Refused	8	0.2
CE_Y4_5_YN	CE_Y4_5_YN. What race do you consider your (biological) mother to be? Please select one or more of these categories: White	NUM	NYREFDK	.			Missing	5	0.1
				.S			Skipped	216	6.4

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VARIABLE NAME	LABEL (VAR)	TYPE	FORMAT	MEAN	RANGE	N	CATEGORY	FREQUENCY	PERCENT
					0		No	1449	42.6
					1		Yes	1714	50.4
					8		Don't Know	9	0.3
					9		Refused	8	0.2
CE_Y4_6_YN	CE_Y4_6_YN. What race do you consider your (biological) mother to be? Please select one or more of these categories: OTHER, SPECIFY	NUM	NYREFDK		.		Missing	5	0.1
					.S		Skipped	216	6.4
					0		No	3091	90.9
					1		Yes	72	2.1
					8		Don't Know	9	0.3
					9		Refused	8	0.2
CE_Y4_6_OTHER_TXT	CE_Y4_6_OTHER_TXT. What race do you consider your (biological) mother to be? Please select one or more of these categories: OTHER, SPECIFY [TEXT: SPECIFY]	CHAR	\$CHAR		.-.				
CE_Y5_YN	CE_Y5_YN. Do you consider your (biological) father to be Hispanic or Latino?	NUM	DKREFYN		.		Missing	5	0.1
					.S		Skipped	216	6.4
					1		Yes	56	1.6
					2		No	3098	91.1
					8		Don't Know	20	0.6
					9		Refused	6	0.2
CE_Y6_1_YN	CE_Y6_1_YN. What race do you consider your (biological) father to be? Please select one or more of these categories: American Indian or Alaskan Native	NUM	NYREFDK		.		Missing	5	0.1
					.S		Skipped	216	6.4
					0		No	3004	88.3
					1		Yes	145	4.3
					8		Don't Know	24	0.7
					9		Refused	7	0.2
CE_Y6_2_YN	CE_Y6_2_YN. What race do you consider your (biological) father to be? Please select one or more of these categories: Asian	NUM	NYREFDK		.		Missing	5	0.1
					.S		Skipped	216	6.4
					0		No	3126	91.9
					1		Yes	23	0.7
					8		Don't Know	24	0.7

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VARIABLE NAME	LABEL (VAR)	TYPE	FORMAT	MEAN	RANGE	N	CATEGORY	FREQUENCY	PERCENT
						9	Refused	7	0.2
CE_Y6_3_YN	CE_Y6_3_YN. What race do you consider your (biological) father to be? Please select one or more of these categories: Black or African American	NUM	NYREFDK	.			Missing	5	0.1
				.S			Skipped	216	6.4
				0			No	1879	55.2
				1			Yes	1270	37.3
				8			Don't Know	24	0.7
				9			Refused	7	0.2
CE_Y6_4_YN	CE_Y6_4_YN. What race do you consider your (biological) father to be? Please select one or more of these categories: Native Hawaiian or Pacific Islander	NUM	NYREFDK	.			Missing	5	0.1
				.S			Skipped	216	6.4
				0			No	3140	92.3
				1			Yes	9	0.3
				8			Don't Know	24	0.7
				9			Refused	7	0.2
CE_Y6_5_YN	CE_Y6_5_YN. What race do you consider your (biological) father to be? Please select one or more of these categories: White	NUM	NYREFDK	.			Missing	5	0.1
				.S			Skipped	216	6.4
				0			No	1451	42.7
				1			Yes	1698	49.9
				8			Don't Know	24	0.7
				9			Refused	7	0.2
CE_Y6_6_YN	CE_Y6_6_YN. What race do you consider your (biological) father to be? Please select one or more of these categories: OTHER, SPECIFY	NUM	NYREFDK	.			Missing	5	0.1
				.S			Skipped	216	6.4
				0			No	3080	90.6
				1			Yes	69	2.0
				8			Don't Know	24	0.7
				9			Refused	7	0.2
CE_Y6_6_OTHER_TXT	CE_Y6_6_OTHER_TXT. What race do you consider your (biological) father to be? Please select one or more of these categories: OTHER, SPECIFY [TEXT: SPECIFY]	CHAR	\$CHAR	.-.					
CE_Y7_YN	CE_Y7_YN. Did participant complete pulmonary function testing (PFT)?	NUM	YN	.			Missing	5	0.1

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VARIABLE NAME	LABEL (VAR)	TYPE	FORMAT	MEAN	RANGE	N	CATEGORY	FREQUENCY	PERCENT
					.S		Skipped	216	6.4
					1		Yes	3132	92.1
					2		No	48	1.4
CE_Y7A	CE_Y7A. Did participant complete pulmonary function testing (PFT)? If no, provide a reason	NUM	NOCOLLH		.		Missing	38	1.1
					.S		Skipped	3348	98.4
					3		Other, Specify	15	0.4
CE_Y7A_OTHER_TXT	CE_Y7A_OTHER_TXT. Did participant complete pulmonary function testing (PFT)? If no, provide a reason: OTHER, SPECIFY [TEXT: SPECIFY]	CHAR	\$CHAR		.-.				
CE_Y8_DATE	CE_Y8_DATE. Date of PFT procedure [DATE: MM/DD/YYYY]	NUM	MMDDYY	07/04/15	08/27/14-06/30/16	3121	MISSING	14	0.4
					SKIPPE D			266	7.8
CE_Y10	CE_Y10. Record start time of pre-bronchodilator (albuterol) spirometry	NUM	AMPM		.		Missing	13	0.4
					.S		Skipped	264	7.8
					1		Am	1260	37.0
					2		Pm	1864	54.8
CE_Y10_PRE_START_TIME	CE_Y10_PRE_START_TIME. Start time of pre-bronchodilator (albuterol) spirometry	NUM	TIME	12:47	8:55-19:05	3124	MISSING	13	0.4
					SKIPPE D			264	7.8
CE_Y10A_YN	CE_Y10A_YN. Did participant agree to albuterol administration?	NUM	YN		.		Missing	239	7.0
					.S		Skipped	266	7.8
					1		Yes	2817	82.8
					2		No	79	2.3
CE_Y10B	CE_Y10B. Did participant agree to albuterol administration? If no, provide a reason	NUM	NOCOLL		.		Missing	239	7.0
					.S		Skipped	3083	90.6
					1		Medical Reason	16	0.5
					2		Other, Specify	37	1.1
					9		Refused	26	0.8
CE_Y10B_OTHER_TXT	CE_Y10B_OTHER_TXT. Did participant agree to albuterol administration? If no, provide a reason: OTHER, SPECIFY [TEXT: SPECIFY]	CHAR	\$CHAR		.-.				

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VARIABLE NAME	LABEL (VAR)	TYPE	FORMAT	MEAN	RANGE	N	CATEGORY	FREQUENCY	PERCENT
CE_Y11	CE_Y11. Record start time of bronchodilator (albuterol) administration [UNITS: AM, PM]	NUM	AMP		.	3034	Missing	22	0.6
					.S		Skipped	345	10.1
					1		Am	1165	34.3
					2		Pm	1869	55.0
CE_Y11_START_TIME	CE_Y11_START_TIME. Start time of bronchodilator (albuterol) administration [TIME: HH:MM (00:00-23:59)]	NUM	TIME	12:53	8:58-19:14	3034	MISSING	22	0.6
					SKIPPE		345	10.1	
					D				
CE_Y12_NUM	CE_Y12_NUM. Bronchodilator (albuterol) puffs administered [UNITS: NUMBER OF PUFFS ADMINISTERED]	NUM	BEST	4.0	1-4	3031	MISSING	25	0.7
					SKIPPE		345	10.1	
					D				
CE_Y13	CE_Y13. Record start time of post-bronchodilator (albuterol) spirometry [UNITS: AM, PM]	NUM	AMP		.	3004	Missing	48	1.4
					.S		Skipped	349	10.3
					1		Am	1044	30.7
					2		Pm	1960	57.6
CE_Y13_POST_START_TIME	CE_Y13_POST_START_TIME. Start time of post-bronchodilator (albuterol) spirometry [TIME: HH:MM (00:00-23:59)]	NUM	TIME	13:06	9:12-19:29	3004	MISSING	48	1.4
					SKIPPE		349	10.3	
					D				
CE_Y14	CE_Y14. Record stop time of spirometry test [UNITS: AM, PM]	NUM	AMP		.	3051	Missing	76	2.2
					.S		Skipped	274	8.1
					1		Am	1016	29.9
					2		Pm	2035	59.8
CE_Y14_STOP_TIME	CE_Y14_STOP_TIME. Stop time of spirometry test [TIME: HH:MM (00:00-23:59)]	NUM	TIME	13:11	9:14-19:33	3051	MISSING	76	2.2
					SKIPPE		274	8.1	
					D				

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VARIABLE NAME	LABEL (VAR)	TYPE	FORMAT	MEAN	RANGE	N	CATEGORY	FREQUENCY	PERCENT
GULFID	Gulf ID	CHAR	\$..				
CE_MH_A1	CE_MH_A1. In general, would you say your health is...	NUM	EXCEL		.		Missing	48	1.4
					1		Excellent	239	7.0
					2		Very Good	735	21.6
					3		Good	1334	39.2
					4		Fair	866	25.5
					5		Poor	174	5.1
					8		Don't Know	2	0.1
					9		Refused	3	0.1
CE_MH_A2	CE_MH_A2. In the past month (4 weeks), has your health limited you in...Moderate activities such as moving a table, pushing a vacuum cleaner, or carrying groceries. Would you say...	NUM	LIMIT		.		Missing	53	1.6
					1		Yes, Limited A Lot	341	10.0
					2		Yes, Limited A Little	592	17.4
					3		No, Not Limited At All	2412	70.9
					8		Don't Know	1	0.0
					9		Refused	2	0.1
CE_MH_A3	CE_MH_A3. In the past month (4 weeks), has your health limited you in...Climbing several flights of stairs. Would you say...	NUM	LIMIT		.		Missing	53	1.6
					1		Yes, Limited A Lot	498	14.6
					2		Yes, Limited A Little	764	22.5
					3		No, Not Limited At All	2072	60.9
					8		Don't Know	12	0.4
					9		Refused	2	0.1
CE_MH_A4	CE_MH_A4. During the past 4 weeks, how much of the time have you accomplished less than you would like as a result of your physical health?	NUM	FEEL		.		Missing	55	1.6
					1		All Of The Time	167	4.9
					2		Most Of The Time	383	11.3
					3		Some Of The Time	732	21.5
					4		A Little Of The Time	450	13.2
					5		None Of The Time	1610	47.3
					8		Don't Know	2	0.1
					9		Refused	2	0.1

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VARIABLE NAME	LABEL (VAR)	TYPE	FORMAT	MEAN	RANGE	N	CATEGORY	FREQUENCY	PERCENT	
CE_MH_A5	CE_MH_A5. During the past 4 weeks, how much of the time have you been limited in the kind of work or other activities you could do as a result of your physical health?	NUM	FEEL				Missing	56	1.6	
							1	All Of The Time	181	5.3
							2	Most Of The Time	319	9.4
							3	Some Of The Time	675	19.8
							4	A Little Of The Time	401	11.8
							5	None Of The Time	1765	51.9
							8	Don't Know	2	0.1
							9	Refused	2	0.1
							CE_MH_A6	CE_MH_A6. During the past 4 weeks, how much of the time have you accomplished less than you would like as a result of any emotional problems (such as feeling depressed or anxious)?	NUM	FEEL
1	All Of The Time	91	2.7							
2	Most Of The Time	218	6.4							
3	Some Of The Time	567	16.7							
4	A Little Of The Time	347	10.2							
5	None Of The Time	2115	62.2							
8	Don't Know	6	0.2							
9	Refused	2	0.1							
CE_MH_A7	CE_MH_A7. During the past 4 weeks, how much of the time did you do work or other activities less carefully than usual as a result of any emotional problems (such as feeling depressed or anxious)?	NUM	FEEL							
							1	All Of The Time	68	2.0
							2	Most Of The Time	175	5.1
							3	Some Of The Time	458	13.5
							4	A Little Of The Time	313	9.2
							5	None Of The Time	2323	68.3
							8	Don't Know	6	0.2
							9	Refused	2	0.1
							CE_MH_A8	CE_MH_A8. During the past 4 weeks, how much did pain interfere with your normal work, including work outside the home and housework?	NUM	AMOUNT
1	Not At All	1388	40.8							
2	A Little Bit	824	24.2							
3	Moderately	496	14.6							
4	Quite A Bit	375	11.0							

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							Extremely	258	7.6
							Refused	2	0.1
CE_MH_A9	CE_MH_A9. How much of the time during the past 4 weeks have you felt calm and peaceful?	NUM	FEEL	.			Missing	56	1.6
							All Of The Time	642	18.9
							Most Of The Time	1461	43.0
							Some Of The Time	802	23.6
							A Little Of The Time	300	8.8
							None Of The Time	137	4.0
							Don't Know	1	0.0
							Refused	2	0.1
CE_MH_A10	CE_MH_A10. How much of the time during the past 4 weeks did you have a lot of energy?	NUM	FEEL	.			Missing	56	1.6
							All Of The Time	390	11.5
							Most Of The Time	1182	34.8
							Some Of The Time	1099	32.3
							A Little Of The Time	425	12.5
							None Of The Time	245	7.2
							Don't Know	2	0.1
							Refused	2	0.1
CE_MH_A11	CE_MH_A11. How much of the time during the past 4 weeks have you felt downhearted and depressed?	NUM	FEEL	.			Missing	56	1.6
							All Of The Time	88	2.6
							Most Of The Time	206	6.1
							Some Of The Time	683	20.1
							A Little Of The Time	572	16.8
							None Of The Time	1793	52.7
							Don't Know	1	0.0
							Refused	2	0.1
CE_MH_A12	CE_MH_A12. During the past 4 weeks, how much of the time has your physical health or emotional problems interfered with your social activities, like visiting friends or relatives?	NUM	FEEL	.			Missing	49	1.4
							All Of The Time	112	3.3
							Most Of The Time	214	6.3

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VARIABLE NAME	LABEL (VAR)	TYPE	FORMAT	MEAN	RANGE	N	CATEGORY	FREQUENCY	PERCENT
							Some Of The Time	489	14.4
							A Little Of The Time	294	8.6
							None Of The Time	2233	65.7
							Don't Know	7	0.2
							Refused	3	0.1
CE_MH_B1	CE_MH_B1. How much do you agree with the following statement as it applies to you over the past month: I am able to adapt when changes occur.	NUM	TRUE	.			Missing	53	1.6
							Not True At All	82	2.4
							Rarely True	98	2.9
							Sometimes True	611	18.0
							Often True	841	24.7
							True Nearly All The Time	1710	50.3
							Don't Know	4	0.1
							Refused	2	0.1
CE_MH_B2	CE_MH_B2. How much do you agree with the following statement as it applies to you over the past month: I can deal with whatever comes my way.	NUM	TRUE	.			Missing	55	1.6
							Not True At All	60	1.8
							Rarely True	54	1.6
							Sometimes True	595	17.5
							Often True	878	25.8
							True Nearly All The Time	1752	51.5
							Don't Know	2	0.1
							Refused	5	0.1
CE_MH_B3	CE_MH_B3. How much do you agree with the following statement as it applies to you over the past month: I try to see the humorous side of things when I am faced with problems.	NUM	TRUE	.			Missing	58	1.7
							Not True At All	66	1.9
							Rarely True	87	2.6
							Sometimes True	680	20.0
							Often True	843	24.8
							True Nearly All The Time	1659	48.8
							Don't Know	6	0.2
							Refused	2	0.1

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VARIABLE NAME	LABEL (VAR)	TYPE	FORMAT	MEAN	RANGE	N	CATEGORY	FREQUENCY	PERCENT	
CE_MH_B4	CE_MH_B4. How much do you agree with the following statement as it applies to you over the past month: Having to cope with stress can make me stronger.	NUM	TRUE				Missing	57	1.7	
							1	Not True At All	352	10.3
							2	Rarely True	198	5.8
							3	Sometimes True	846	24.9
							4	Often True	725	21.3
							5	True Nearly All The Time	1200	35.3
							8	Don't Know	20	0.6
							9	Refused	3	0.1
							CE_MH_B5	CE_MH_B5. How much do you agree with the following statement as it applies to you over the past month: I tend to bounce back after illness, injury, or other hardships.	NUM	TRUE
1	Not True At All	79	2.3							
2	Rarely True	68	2.0							
3	Sometimes True	518	15.2							
4	Often True	849	25.0							
5	True Nearly All The Time	1821	53.5							
8	Don't Know	7	0.2							
9	Refused	2	0.1							
CE_MH_B6	CE_MH_B6. How much do you agree with the following statement as it applies to you over the past month: I believe I can achieve my goals, even if there are obstacles.	NUM	TRUE							
							1	Not True At All	40	1.2
							2	Rarely True	49	1.4
							3	Sometimes True	442	13.0
							4	Often True	894	26.3
							5	True Nearly All The Time	1914	56.3
							8	Don't Know	2	0.1
							9	Refused	2	0.1
							CE_MH_B7	CE_MH_B7. How much do you agree with the following statement as it applies to you over the past month: Under pressure, I stay focused and think clearly.	NUM	TRUE
1	Not True At All	96	2.8							
2	Rarely True	94	2.8							
3	Sometimes True	653	19.2							
4	Often True	992	29.2							
5	True Nearly All The Time	1506	44.3							

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							8	Don't Know	1	0.0
							9	Refused	2	0.1
CE_MH_B8	CE_MH_B8. How much do you agree with the following statement as it applies to you over the past month: I am not easily discouraged by failure.	NUM	TRUE	.			Missing	59	1.7	
							1	Not True At All	215	6.3
							2	Rarely True	128	3.8
							3	Sometimes True	637	18.7
							4	Often True	821	24.1
							5	True Nearly All The Time	1534	45.1
							8	Don't Know	5	0.1
							9	Refused	2	0.1
CE_MH_B9	CE_MH_B9. How much do you agree with the following statement as it applies to you over the past month: I think of myself as a strong person when dealing with life's challenges and difficulties.	NUM	TRUE	.			Missing	58	1.7	
							1	Not True At All	28	0.8
							2	Rarely True	49	1.4
							3	Sometimes True	349	10.3
							4	Often True	865	25.4
							5	True Nearly All The Time	2050	60.3
							9	Refused	2	0.1
CE_MH_B10	CE_MH_B10. How much do you agree with the following statement as it applies to you over the past month: I am able to handle unpleasant or painful feelings like sadness, fear and anger.	NUM	TRUE	.			Missing	51	1.5	
							1	Not True At All	79	2.3
							2	Rarely True	86	2.5
							3	Sometimes True	623	18.3
							4	Often True	981	28.8
							5	True Nearly All The Time	1574	46.3
							8	Don't Know	5	0.1
							9	Refused	2	0.1
CE_MH_C1	CE_MH_C1. How important to you is religion or spirituality? Is it...	NUM	IMPORTANT	.			Missing	48	1.4	
							1	Very Important	2303	67.7
							2	Somewhat Important	654	19.2
							3	Slightly Important	212	6.2

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						4	Not At All Important	171	5.0
						8	Don't Know	6	0.2
						9	Refused	7	0.2
CE_MH_C2	CE_MH_C2. How often, if at all, do you attend church, synagogue, a mosque, or other religious or spiritual services?	NUM	NEVER	.			Missing	49	1.4
						1	Never	539	15.8
						2	Less Than Once A Year	219	6.4
						3	A Few Times A Year	684	20.1
						4	About Once A Month	613	18.0
						5	Once A Week	1221	35.9
						6	Everyday	70	2.1
						8	Don't Know	3	0.1
						9	Refused	3	0.1
CE_MH_C3	CE_MH_C3. What is your present religion, if any?	NUM	RELIG	.			Missing	48	1.4
						1	Protestant (Baptist, Methodist, Non-Denominational, ...	2046	60.2
						2	Roman Catholic (Catholic)	609	17.9
						3	Mormon (Lds/Church Of Jesus Christ Of Latter-Day Saints)	8	0.2
						4	Orthodox (Greek, Russian, Or Some Other Orthodox Church)	2	0.1
						5	Jewish (Judaism)	7	0.2
						6	Muslim (Islam)	12	0.4
						7	Buddhist	15	0.4
						8	Hindu	1	0.0
						9	Atheist (Do Not Believe In God)	16	0.5
						10	Agnostic (Not Sure If There Is A God)	26	0.8
						11	Something Else	61	1.8
						12	Nothing In Particular	216	6.4
						13	(Do Not Read) Christian	314	9.2
						14	(Do Not Read) Unitarian (Universalist)	2	0.1
						88	Don't Know	12	0.4
						99	Refused	6	0.2

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CE_MH_C3A_OTHER_TXT	CE_MH_C3A_OTHER_TXT. What is your present religion, if any? Something else: Specify [TEXT: SPECIFY]	CHAR	\$CHAR		..				
CE_MH_C4	CE_MH_C4. How often, if at all, do you pray or meditate?	NUM	NEVER		.		Missing	45	1.3
					1		Never	189	5.6
					2		Less Than Once A Year	44	1.3
					3		A Few Times A Year	136	4.0
					4		About Once A Month	148	4.4
					5		Once A Week	371	10.9
					6		Everyday	2463	72.4
					8		Don't Know	1	0.0
					9		Refused	4	0.1
CE_MH_D1	CE_MH_D1. Would you describe your current residence as...?	NUM	HOME		.		Missing	45	1.3
					1		Single Family Home	2560	75.3
					2		Trailer Or Mobile Home	372	10.9
					3		Apartment, Condominium	370	10.9
					4		Hotel Or Motel	6	0.2
					5		Other	45	1.3
					9		Refused	3	0.1
CE_MH_D1A_OTHER_TXT	CE_MH_D1A_OTHER_TXT. Would you describe your current residence as...? Other: Specify other [TEXT: SPECIFY]	CHAR	\$CHAR		..				
CE_MH_D1B	CE_MH_D1B. Who owns the property on which the trailer is located?	NUM	WHOM		.		Missing	46	1.4
					.S		Skipped	2984	87.7
					1		Respondent (Or Other Household Member)	195	5.7
					2		Other Family Member	74	2.2
					3		Friend	9	0.3
					4		Other	89	2.6
					8		Don't Know	3	0.1
					9		Refused	1	0.0
CE_MH_D1B_OTHER_TXT	CE_MH_D1B_OTHER_TXT. Specify other property owner of trailer	CHAR	\$CHAR		..				
CE_MH_D2_DATE	CE_MH_D2_DATE. When did you move to this residence? [DATE: MM/YYYY]	NUM	MMYY	09/2003	06/1941 -06/2016	3257	MISSING	46	1.4

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					DON'T KNOW			93	2.7
					REFUSE D			5	0.1
CE_MH_D3_YN	CE_MH_D3_YN. Do you think you might have to move within the next 3 months?	NUM	DKREFYN	.			Missing	39	1.1
				1			Yes	242	7.1
				2			No	3081	90.6
				8			Don't Know	36	1.1
				9			Refused	3	0.1
CE_MH_D3A_YN	CE_MH_D3A_YN. Do you think you might have to move within the next year?	NUM	DKREFYN	.			Missing	44	1.3
				.S			Skipped	242	7.1
				1			Yes	289	8.5
				2			No	2738	80.5
				8			Don't Know	85	2.5
				9			Refused	3	0.1
CE_MH_D3B1_TXT	CE_MH_D3B1_TXT. Do you think you might have to move within the next year? [TEXT: SPECIFY]	CHAR	\$CHAR	.-.					
CE_MH_D4_YN	CE_MH_D4_YN. Do you currently own this or any other house, mobile home, or condo?	NUM	DKREFYN	.			Missing	40	1.2
				1			Yes	1790	52.6
				2			No	1563	46.0
				8			Don't Know	5	0.1
				9			Refused	3	0.1
CE_MH_D4A_YN	CE_MH_D4A_YN. Is that where you are currently living?	NUM	DKREFYN	.			Missing	44	1.3
				.S			Skipped	1571	46.2
				1			Yes	1735	51.0
				2			No	51	1.5
CE_MH_D5_YN	CE_MH_D5_YN. Since 2010, have you lived, at any time, in a place that you consider permanent and stable?	NUM	DKREFYN	.			Missing	38	1.1
				1			Yes	2715	79.8
				2			No	641	18.8
				8			Don't Know	4	0.1
				9			Refused	3	0.1

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CE_MH_D5A_DATE	CE_MH_D5A_DATE. When did you move to this permanent and stable housing? [DATE: MM/YYYY]	NUM	MMYY5	11/2001	06/1941 -04/2016	2630	MISSING	39	1.1
							DON'T KNOW	84	2.5
							SKIPPE D	648	19.1
CE_MH_D5B_YN	CE_MH_D5B_YN. Is that where you live now?	NUM	DKREFYN				Missing	38	1.1
							Skipped	648	19.1
							Yes	2436	71.6
							No	279	8.2
CE_MH_D6_NUM	CE_MH_D6_NUM. Since we came to your home on [HOME VISIT DATE], how many times have you moved? [UNIT: NUMBER OF TIMES HAVE MOVED SINCE HOME VISIT]	NUM	BEST	0.5	0-30	3344	MISSING	45	1.3
							DON'T KNOW	9	0.3
							REFUSE D	3	0.1
CE_MH_E1	CE_MH_E1. Have you ever served in a war-zone or in a noncombat job that exposed you to war-related casualties, such as working as a medic or on graves registration duty?	NUM	EVER				Missing	49	1.4
							Never	3075	90.4
							Once	128	3.8
							Twice	36	1.1
							3 Times	22	0.6
							4 Times	8	0.2
							5 Times	7	0.2
							More Than 5 Times	71	2.1
							Don't Know	1	0.0
Refused	4	0.1							
CE_MH_E1A_AGE	CE_MH_E1A_AGE. How old were you when this [serving in a war-zone or noncombat job] first happened? [AGE]	NUM	BEST	23.6	1-63	272	MISSING	49	1.4
							SKIPPE D	3080	90.6
CE_MH_E1B_AGE	CE_MH_E1B_AGE. How old were you when this [serving in a war-zone or noncombat job] last happened? [AGE]	NUM	BEST	30.6	16-65	268	MISSING	50	1.5
							DON'T KNOW	3	0.1

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							SKIPPE D	3080	90.6
CE_MH_E2	CE_MH_E2. Have you ever been in a serious car accident, or serious accident at work or somewhere else?	NUM	EVER		.		Missing	46	1.4
					1		Never	2095	61.6
					2		Once	744	21.9
					3		Twice	296	8.7
					4		3 Times	102	3.0
					5		4 Times	39	1.1
					6		5 Times	32	0.9
					7		More Than 5 Times	42	1.2
					8		Don't Know	2	0.1
					9		Refused	3	0.1
CE_MH_E2A_AGE	CE_MH_E2A_AGE. How old were you when this [being in a serious accident] first happened? [AGE]	NUM	BEST	26.4	1-77	1239	MISSING	46	1.4
					DON'T KNOW			16	0.5
					SKIPPE D			2100	61.7
CE_MH_E2B_AGE	CE_MH_E2B_AGE. How old were you when this [being in a serious accident] last happened? [AGE]	NUM	BEST	32.9	1-77	1240	MISSING	49	1.4
					DON'T KNOW			12	0.4
					SKIPPE D			2100	61.7
CE_MH_E3	CE_MH_E3. Have you ever been in a major natural disaster, such as a fire, tornado, hurricane, flood, or earthquake?	NUM	EVER		.		Missing	41	1.2
					1		Never	893	26.3
					2		Once	643	18.9
					3		Twice	451	13.3
					4		3 Times	359	10.6
					5		4 Times	221	6.5
					6		5 Times	203	6.0
					7		More Than 5 Times	586	17.2
					8		Don't Know	1	0.0
					9		Refused	3	0.1

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CE_MH_E3A_AGE	CE_MH_E3A_AGE. How old were you when this [being in a major natural disaster] first happened? [AGE]	NUM	BEST	21.2	0-71	2403	MISSING	41	1.2
					DON'T KNOW			60	1.8
					SKIPPE D			897	26.4
CE_MH_E3B_AGE	CE_MH_E3B_AGE. How old were you when this [being in a major natural disaster] last happened? [AGE]	NUM	BEST	40.6	1-78	2440	MISSING	43	1.3
					DON'T KNOW			21	0.6
					SKIPPE D			897	26.4
CE_MH_E4	CE_MH_E4. Have you ever had a life-threatening illness, such as cancer, a heart attack, leukemia, AIDS, multiple sclerosis, and so forth?	NUM	EVER	.			Missing	50	1.5
					1		Never	2908	85.5
					2		Once	365	10.7
					3		Twice	47	1.4
					4		3 Times	19	0.6
					5		4 Times	2	0.1
					6		5 Times	2	0.1
					7		More Than 5 Times	3	0.1
					8		Don't Know	2	0.1
					9		Refused	3	0.1
CE_MH_E4A_AGE	CE_MH_E4A_AGE. How old were you when this [having a life-threatening illness] first happened? [AGE]	NUM	BEST	44.8	0-79	437	MISSING	50	1.5
					DON'T KNOW			1	0.0
					SKIPPE D			2913	85.7
CE_MH_E4B_AGE	CE_MH_E4B_AGE. How old were you when this [having a life-threatening illness] last happened? [AGE]	NUM	BEST	47.2	0-86	437	MISSING	50	1.5
					DON'T KNOW			1	0.0
					SKIPPE D			2913	85.7
CE_MH_E5	CE_MH_E5. Have you ever been attacked, beaten up, or mugged by anyone, including friends, family members, or strangers?	NUM	EVER	.			Missing	48	1.4

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							Never	2558	75.2
							Once	358	10.5
							Twice	137	4.0
							3 Times	63	1.9
							4 Times	27	0.8
							5 Times	27	0.8
							More Than 5 Times	174	5.1
							Don't Know	5	0.1
							Refused	4	0.1
CE_MH_E5A_AGE	CE_MH_E5A_AGE. How old were you when this [being attacked, beaten up, or mugged by anyone] first happened? [AGE]	NUM	BEST	22.7	4-69	778	MISSING	48	1.4
							DON'T KNOW	8	0.2
							SKIPPE D	2567	75.5
CE_MH_E5B_AGE	CE_MH_E5B_AGE. How old were you when this [being attacked, beaten up, or mugged by anyone] last happened? [AGE]	NUM	BEST	29.9	7-69	778	MISSING	48	1.4
							DON'T KNOW	8	0.2
							SKIPPE D	2567	75.5
CE_MH_E6	CE_MH_E6. As a child, were you ever physically punished or beaten by a parent, caretaker, or teacher so that you were very frightened; or you thought you would be injured; or you received bruises, cuts, welts, lumps, or other injuries?	NUM	EVER	.			Missing	49	1.4
							Never	2908	85.5
							Once	47	1.4
							Twice	19	0.6
							3 Times	20	0.6
							4 Times	12	0.4
							5 Times	14	0.4
							More Than 5 Times	319	9.4
							Don't Know	7	0.2
							Refused	6	0.2
CE_MH_E6A_AGE	CE_MH_E6A_AGE. How old were you when this [being physically punished or beaten by a parent, caretaker, or teacher] first happened? [AGE]	NUM	BEST	7.2	1-32	402	MISSING	50	1.5

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					DON'T KNOW			27	0.8
					REFUSE D			1	0.0
					SKIPPE D			2921	85.9
CE_MH_E6B_AGE	CE_MH_E6B_AGE. How old were you when this [being physically punished or beaten by a parent, caretaker, or teacher] last happened? [AGE]	NUM	BEST	13.9	1-43	417	MISSING	49	1.4
					DON'T KNOW			13	0.4
					REFUSE D			1	0.0
					SKIPPE D			2921	85.9
CE_MH_E7	CE_MH_E7. Have you ever been in a situation in which someone made or pressured you into having some type of unwanted sexual contact?	NUM	EVER	.			Missing	50	1.5
					1		Never	3045	89.5
					2		Once	121	3.6
					3		Twice	59	1.7
					4		3 Times	26	0.8
					5		4 Times	9	0.3
					6		5 Times	8	0.2
					7		More Than 5 Times	66	1.9
					8		Don't Know	6	0.2
					9		Refused	11	0.3
CE_MH_E7A_AGE	CE_MH_E7A_AGE. How old were you when this [unwanted sexual contact] first happened? [AGE]	NUM	BEST	15.3	3-52	279	MISSING	50	1.5
					DON'T KNOW			10	0.3
					SKIPPE D			3062	90.0
CE_MH_E7B_AGE	CE_MH_E7B_AGE. How old were you when this [unwanted sexual contact] last happened? [AGE]	NUM	BEST	19.8	4-60	280	MISSING	50	1.5
					DON'T KNOW			9	0.3
					SKIPPE D			3062	90.0

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CE_MH_E8_YN	CE_MH_E8_YN. Have you ever been in any other situation in which you were seriously injured or in which you feared you might be seriously injured or killed?	NUM	DKREFYN				Missing	47	1.4
							Yes	761	22.4
							No	2584	76.0
							Don't Know	6	0.2
							Refused	3	0.1
CE_MH_E8A_AGE	CE_MH_E8A_AGE. How old were you when this [serious injury or fear of serious injury] first happened? [AGE]	NUM	BEST	26.0	2-71	748	MISSING	48	1.4
							DON'T KNOW	12	0.4
							SKIPPE D	2593	76.2
CE_MH_E8B_AGE	CE_MH_E8B_AGE. How old were you when this [serious injury or fear of serious injury] last happened? [AGE]	NUM	BEST	33.9	2-71	750	MISSING	47	1.4
							DON'T KNOW	11	0.3
							SKIPPE D	2593	76.2
CE_MH_E9	CE_MH_E9. Have you ever witnessed a situation in which someone with whom you were very close was seriously injured or killed, or in which you feared someone would be seriously injured or killed?	NUM	EVER				Missing	45	1.3
							Never	2271	66.8
							Once	496	14.6
							Twice	234	6.9
							3 Times	125	3.7
							4 Times	35	1.0
							5 Times	37	1.1
							More Than 5 Times	145	4.3
							Don't Know	6	0.2
Refused	7	0.2							
CE_MH_E9A_AGE	CE_MH_E9A_AGE. How old were you when this [witnessing a situation of someone else very close to you seriously injured or killed] first happened? [AGE]	NUM	BEST	24.1	2-75	1052	MISSING	46	1.4
							DON'T KNOW	18	0.5
							REFUSE D	1	0.0

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							SKIPPE D	2284	67.2
CE_MH_E9B_AGE	CE_MH_E9B_AGE. How old were you when this [witnessing a situation of someone else very close to you seriously injured or killed] last happened? [AGE]	NUM	BEST	32.4	2-79	1053	MISSING	46	1.4
							DON'T KNOW	18	0.5
							SKIPPE D	2284	67.2
CE_MH_E10	CE_MH_E10. Have you ever witnessed a situation in which someone with whom you were not so close was seriously injured or killed or in which you feared someone would be seriously injured or killed?	NUM	EVER		.		Missing	48	1.4
					1		Never	2108	62.0
					2		Once	497	14.6
					3		Twice	211	6.2
					4		3 Times	123	3.6
					5		4 Times	52	1.5
					6		5 Times	54	1.6
					7		More Than 5 Times	297	8.7
					8		Don't Know	7	0.2
					9		Refused	4	0.1
CE_MH_E10A_AGE	CE_MH_E10A_AGE. How old were you when this [witnessing a situation of someone else not so close to you seriously injured or killed] first happened? [AGE]	NUM	BEST	24.9	3-74	1204	MISSING	48	1.4
							DON'T KNOW	29	0.9
							REFUSE D	1	0.0
							SKIPPE D	2119	62.3
CE_MH_E10B_AGE	CE_MH_E10B_AGE. How old were you when this [witnessing a situation of someone else not so close to you seriously injured or killed] last happened? [AGE]	NUM	BEST	34.4	4-76	1206	MISSING	48	1.4
							DON'T KNOW	27	0.8
							REFUSE D	1	0.0
							SKIPPE D	2119	62.3
CE_MH_E11	CE_MH_E11. Have any close family members or friends died violently, for example, in a serious car crash, mugging, or attack?	NUM	EVER		.		Missing	48	1.4

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							Never	2202	64.7
							Once	678	19.9
							Twice	234	6.9
							3 Times	93	2.7
							4 Times	44	1.3
							5 Times	25	0.7
							More Than 5 Times	71	2.1
							Don't Know	3	0.1
							Refused	3	0.1
CE_MH_E11A_AGE	CE_MH_E11A_AGE. How old were you when this [close family members or friends died violently] first happened? [AGE]	NUM	BEST	26.4	0-76	1122	MISSING	49	1.4
							DON'T KNOW	22	0.6
							SKIPPE D	2208	64.9
CE_MH_E11B_AGE	CE_MH_E11B_AGE. How old were you when this [close family members or friends died violently] last happened? [AGE]	NUM	BEST	32.8	0-76	1125	MISSING	51	1.5
							DON'T KNOW	17	0.5
							SKIPPE D	2208	64.9
CE_MH_E12	CE_MH_E12. Have you experienced the death of any of your children?	NUM	EVER	.			Missing	51	1.5
							Never	3052	89.7
							Once	253	7.4
							Twice	28	0.8
							3 Times	6	0.2
							4 Times	2	0.1
							5 Times	1	0.0
							More Than 5 Times	2	0.1
							Don't Know	1	0.0
							Refused	5	0.1
CE_MH_E12A_AGE	CE_MH_E12A_AGE. How old were you when this [death of any of your children] first happened? [AGE]	NUM	BEST	36.2	13-78	288	MISSING	51	1.5
							DON'T KNOW	3	0.1

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VARIABLE NAME	LABEL (VAR)	TYPE	FORMAT	MEAN	RANGE	N	CATEGORY	FREQUENCY	PERCENT
					REFUSE D			1	0.0
					SKIPPE D			3058	89.9
CE_MH_E12B_AGE	CE_MH_E12B_AGE. How old were you when this [death of any of your children] last happened? [AGE]	NUM	BEST	37.3	13-78	288	MISSING	51	1.5
					DON'T KNOW			3	0.1
					REFUSE D			1	0.0
					SKIPPE D			3058	89.9
CE_MH_E13_YN	CE_MH_E13_YN. Have you experienced a seriously traumatic event not already covered in any of these questions?	NUM	DKREFYN		.		Missing	49	1.4
					1		Yes	441	13.0
					2		No	2903	85.4
					8		Don't Know	4	0.1
					9		Refused	4	0.1
CE_MH_E13A_TXT	CE_MH_E13A_TXT. Have you experienced a seriously traumatic event not already covered in any of these questions? Please describe your experience [TEXT: SPECIFY]	CHAR	\$CHAR		..				
CE_MH_E13B_AGE	CE_MH_E13B_AGE. How old were you when this [seriously traumatic event] first happened? [AGE]	NUM	BEST	37.8	1-76	433	MISSING	51	1.5
					DON'T KNOW			3	0.1
					REFUSE D			3	0.1
					SKIPPE D			2911	85.6
CE_MH_E13C_AGE	CE_MH_E13C_AGE. How old were you when this [seriously traumatic event] last happened? [AGE]	NUM	BEST	41.1	1-76	431	MISSING	51	1.5
					DON'T KNOW			5	0.1
					REFUSE D			3	0.1
					SKIPPE D			2911	85.6
CE_MH_F1_YN	CE_MH_F1_YN. During the past 12 months, have you been evicted due to not paying rent?	NUM	DKREFYN		.		Missing	59	1.7

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							Yes	58	1.7
							No	3280	96.4
							Refused	4	0.1
CE_MH_F2_YN	CE_MH_F2_YN. During the past 12 months, have you received assistance from non-government organizations such as church or community groups?	NUM	DKREFYN	.			Missing	65	1.9
							Yes	219	6.4
							No	3111	91.5
							Refused	6	0.2
CE_MH_F3_YN	CE_MH_F3_YN. During the past 12 months, have you applied for federal government disability benefits?	NUM	DKREFYN	.			Missing	64	1.9
							Yes	436	12.8
							No	2897	85.2
							Refused	4	0.1
CE_MH_F3A	CE_MH_F3A. During the past 12 months, did you receive these disability benefits?	NUM	MH_F3A_FMT	.			Missing	65	1.9
							Skipped	2901	85.3
							Yes	211	6.2
							No	119	3.5
							Awaiting Decision On Application	105	3.1
CE_MH_F4	CE_MH_F4. During the past 12 months, have you borrowed money from friends or family to help pay bills?	NUM	ASKHELP	.			Missing	65	1.9
							Yes	769	22.6
							No, You Asked But Were Turned Down	16	0.5
							No, You Didn't Ask	985	29.0
							No (No Detail Provided)	1560	45.9
							Refused	6	0.2
CE_MH_F5_YN	CE_MH_F5_YN. During the past 12 months, have you sold possessions or property to raise money?	NUM	DKREFYN	.			Missing	63	1.9
							Yes	439	12.9
							No	2892	85.0
							Don't Know	1	0.0
							Refused	6	0.2

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VARIABLE NAME	LABEL (VAR)	TYPE	FORMAT	MEAN	RANGE	N	CATEGORY	FREQUENCY	PERCENT
CE_MH_F6_YN	CE_MH_F6_YN. During the past 12 months, has your spouse or partner begun to work outside of the home?	NUM	DKREFYN	.			Missing	64	1.9
							Yes	276	8.1
							No	3052	89.7
							Don't Know	3	0.1
							Refused	6	0.2
CE_MH_F7_YN	CE_MH_F7_YN. During the past 12 months, has your spouse or partner stopped working outside of the home?	NUM	DKREFYN	.			Missing	64	1.9
							Yes	170	5.0
							No	3155	92.8
							Don't Know	3	0.1
							Refused	9	0.3
CE_MH_F8_YN	CE_MH_F8_YN. During the past 12 months, have you cashed in life insurance?	NUM	DKREFYN	.			Missing	64	1.9
							Yes	56	1.6
							No	3272	96.2
							Don't Know	1	0.0
							Refused	8	0.2
CE_MH_F9_YN	CE_MH_F9_YN. During the past 12 months, have you changed residence to save money, for example, moving somewhere with lower rent, sleeping on a couch with friends or family, living on a boat, etc.?	NUM	DKREFYN	.			Missing	64	1.9
							Yes	214	6.3
							No	3113	91.5
							Refused	10	0.3
CE_MH_F10_YN	CE_MH_F10_YN. During the past 12 months, have you taken in a housemate to increase income?	NUM	DKREFYN	.			Missing	66	1.9
							Yes	130	3.8
							No	3198	94.0
							Refused	7	0.2
CE_MH_F11_YN	CE_MH_F11_YN. During the past 12 months, have you reduced medical insurance?	NUM	DKREFYN	.			Missing	65	1.9
							Yes	200	5.9
							No	3127	91.9
							Don't Know	2	0.1
							Refused	7	0.2

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CE_MH_F12_YN	CE_MH_F12_YN. During the past 12 months, have you eliminated medical insurance?	NUM	DKREFYN				Missing	66	1.9
							Yes	234	6.9
							No	3092	90.9
							Don't Know	2	0.1
							Refused	7	0.2
CE_MH_F13_YN	CE_MH_F13_YN. During the past 12 months, have you changed food shopping habits to save money?	NUM	DKREFYN				Missing	65	1.9
							Yes	1042	30.6
							No	2285	67.2
							Don't Know	2	0.1
							Refused	7	0.2
CE_MH_F14_YN	CE_MH_F14_YN. During the past 12 months, have you changed eating habits to save money?	NUM	DKREFYN				Missing	65	1.9
							Yes	900	26.5
							No	2428	71.4
							Don't Know	1	0.0
							Refused	7	0.2
CE_MH_F15_YN	CE_MH_F15_YN. During the past 12 months, have you postponed paying property tax?	NUM	DKREFYN				Missing	66	1.9
							Yes	201	5.9
							No	3127	91.9
							Refused	7	0.2
CE_MH_F16_YN	CE_MH_F16_YN. During the past 12 months, have you postponed paying rent?	NUM	DKREFYN				Missing	68	2.0
							Yes	239	7.0
							No	3087	90.8
							Refused	7	0.2
CE_MH_F17_YN	CE_MH_F17_YN. During the past 12 months, have you received shut-off warning(s) regarding utilities such as electricity, gas, water, phone, or cable due to late payment?	NUM	DKREFYN				Missing	66	1.9
							Yes	504	14.8
							No	2823	83.0
							Don't Know	1	0.0
							Refused	7	0.2

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VARIABLE NAME	LABEL (VAR)	TYPE	FORMAT	MEAN	RANGE	N	CATEGORY	FREQUENCY	PERCENT
CE_MH_F18_YN	CE_MH_F18_YN. During the past 12 months, were your utilities actually shut-off due to late payment or non-payment?	NUM	DKREFYN				Missing	64	1.9
							Yes	297	8.7
							No	3032	89.2
							Don't Know	1	0.0
							Refused	7	0.2
CE_MH_F19_YN	CE_MH_F19_YN. During the past 12 months, have you cut back on social activities and entertainment expenses?	NUM	DKREFYN				Missing	64	1.9
							Yes	1429	42.0
							No	1900	55.9
							Don't Know	1	0.0
							Refused	7	0.2
CE_MH_F20_YN	CE_MH_F20_YN. During the past 12 months, have you postponed major household purchases?	NUM	DKREFYN				Missing	65	1.9
							Yes	969	28.5
							No	2356	69.3
							Don't Know	2	0.1
							Refused	9	0.3
CE_MH_F21_YN	CE_MH_F21_YN. During the past 12 months, have you postponed clothing purchases?	NUM	DKREFYN				Missing	66	1.9
							Yes	1005	29.6
							No	2323	68.3
							Refused	7	0.2
CE_MH_F22_YN	CE_MH_F22_YN. During the past 12 months, have you changed transportation patterns to save money?	NUM	DKREFYN				Missing	67	2.0
							Yes	844	24.8
							No	2483	73.0
							Refused	7	0.2
CE_MH_F23_YN	CE_MH_F23_YN. During the past 12 months, have you cut back on charitable donations and/or tithing?	NUM	DKREFYN				Missing	66	1.9
							Yes	751	22.1
							No	2577	75.8
							Refused	7	0.2
CE_MH_F24_YN	CE_MH_F24_YN. During the past 12 months, have you reduced household utility use?	NUM	DKREFYN				Missing	67	2.0

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							Yes	1209	35.5
							No	2116	62.2
							Don't Know	2	0.1
							Refused	7	0.2
CE_MH_F25	CE_MH_F25. During the past 12 months, have you taken on additional employment to help meet expenses?	NUM	SEEKEMPLOY	.			Missing	67	2.0
							Yes	581	17.1
							No, You Sought Additional Employment, But Didn't Find Any	158	4.6
							No, You Didn't Try To Find Any	2584	76.0
							Don't Know	4	0.1
							Refused	7	0.2
CE_MH_F26	CE_MH_F26. During the past 12 months, has your spouse taken on additional employment to help meet expenses?	NUM	SEEKEMPLOYA	.			Missing	70	2.1
							Yes	236	6.9
							No, He/She Sought Additional Employment, But Didn't Find Any	45	1.3
							No, He/She Didn't Try To Find Any	2371	69.7
							N/A	666	19.6
							Don't Know	6	0.2
							Refused	7	0.2
CE_MH_F27	CE_MH_F27. During the past 12 months, has your child taken on additional employment to help meet expenses?	NUM	SEEKEMPLOYA	.			Missing	66	1.9
							Yes	103	3.0
							No, He/She Sought Additional Employment, But Didn't Find Any	27	0.8
							No, He/She Didn't Try To Find Any	1986	58.4
							N/A	1206	35.5
							Don't Know	7	0.2
							Refused	6	0.2
CE_MH_G1_YN	CE_MH_G1_YN. In the past 6 months, have you wanted to speak with anyone about any emotional or psychological issues?	NUM	DKREFYN	.			Missing	40	1.2
							Yes	501	14.7
							No	2852	83.9
							Don't Know	3	0.1

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					9		Refused	5	0.1
CE_MH_G1A_YN	CE_MH_G1A_YN. Did you talk with any professional or provider about any of these issues?	NUM	DKREFYN	.			Missing	40	1.2
				.S			Skipped	2860	84.1
				1			Yes	265	7.8
				2			No	236	6.9
CE_MH_G1B_1_YN	CE_MH_G1B_1_YN. Did you talk with any professional or provider about any of these issues? Why not?: Don't know where to go	NUM	NYREFDK	.			Missing	40	1.2
				.S			Skipped	3125	91.9
				0			No	174	5.1
				1			Yes	55	1.6
				8			Don't Know	6	0.2
				9			Refused	1	0.0
CE_MH_G1B_2_YN	CE_MH_G1B_2_YN. Did you talk with any professional or provider about any of these issues? Why not?: No insurance	NUM	NYREFDK	.			Missing	40	1.2
				.S			Skipped	3125	91.9
				0			No	153	4.5
				1			Yes	76	2.2
				8			Don't Know	6	0.2
				9			Refused	1	0.0
CE_MH_G1B_3_YN	CE_MH_G1B_3_YN. Did you talk with any professional or provider about any of these issues? Why not?: Insurance doesn't cover it	NUM	NYREFDK	.			Missing	40	1.2
				.S			Skipped	3125	91.9
				0			No	199	5.9
				1			Yes	30	0.9
				8			Don't Know	6	0.2
				9			Refused	1	0.0
CE_MH_G1B_4_YN	CE_MH_G1B_4_YN. Did you talk with any professional or provider about any of these issues? Why not?: No transportation	NUM	NYREFDK	.			Missing	40	1.2
				.S			Skipped	3125	91.9
				0			No	213	6.3
				1			Yes	16	0.5
				8			Don't Know	6	0.2

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VARIABLE NAME	LABEL (VAR)	TYPE	FORMAT	MEAN	RANGE	N	CATEGORY	FREQUENCY	PERCENT
							Refused	1	0.0
CE_MH_G1B_5_YN	CE_MH_G1B_5_YN. Did you talk with any professional or provider about any of these issues? Why not?: No child care	NUM	NYREFDK	.			Missing	40	1.2
					.S		Skipped	3125	91.9
					0		No	222	6.5
					1		Yes	7	0.2
					8		Don't Know	6	0.2
					9		Refused	1	0.0
CE_MH_G1B_6_YN	CE_MH_G1B_6_YN. Did you talk with any professional or provider about any of these issues? Why not?: Other	NUM	NYREFDK	.			Missing	40	1.2
					.S		Skipped	3125	91.9
					0		No	110	3.2
					1		Yes	119	3.5
					8		Don't Know	6	0.2
					9		Refused	1	0.0
CE_MH_G1B1_OTHER_TXT	CE_MH_G1B1_OTHER_TXT. Did you talk with any professional or provider about any of these issues? Why not?: Other, Specify other [TEXT: SPECIFY]	CHAR	\$CHAR	.					
CE_MH_G1C_1_YN	CE_MH_G1C_1_YN. What type or types of provider were they? Psychologist	NUM	NYREFDK	.			Missing	40	1.2
					.S		Skipped	3096	91.0
					0		No	200	5.9
					1		Yes	64	1.9
					8		Don't Know	1	0.0
CE_MH_G1C_2_YN	CE_MH_G1C_2_YN. What type or types of provider were they? Psychiatrist	NUM	NYREFDK	.			Missing	40	1.2
					.S		Skipped	3096	91.0
					0		No	153	4.5
					1		Yes	111	3.3
					8		Don't Know	1	0.0
CE_MH_G1C_3_YN	CE_MH_G1C_3_YN. What type or types of provider were they? Case manager, case worker, or outreach worker	NUM	NYREFDK	.			Missing	40	1.2
					.S		Skipped	3096	91.0
					0		No	242	7.1
					1		Yes	22	0.6

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					8		Don't Know	1	0.0
CE_MH_G1C_4_YN	CE_MH_G1C_4_YN. What type or types of provider were they? Social worker	NUM	NYREFDK	.			Missing	40	1.2
				.S			Skipped	3096	91.0
				0			No	239	7.0
				1			Yes	25	0.7
				8			Don't Know	1	0.0
CE_MH_G1C_5_YN	CE_MH_G1C_5_YN. What type or types of provider were they? Nurse	NUM	NYREFDK	.			Missing	40	1.2
				.S			Skipped	3096	91.0
				0			No	254	7.5
				1			Yes	10	0.3
				8			Don't Know	1	0.0
CE_MH_G1C_6_YN	CE_MH_G1C_6_YN. What type or types of provider were they? Physician	NUM	NYREFDK	.			Missing	40	1.2
				.S			Skipped	3096	91.0
				0			No	219	6.4
				1			Yes	45	1.3
				8			Don't Know	1	0.0
CE_MH_G1C_7_YN	CE_MH_G1C_7_YN. What type or types of provider were they? Clergy	NUM	NYREFDK	.			Missing	40	1.2
				.S			Skipped	3096	91.0
				0			No	232	6.8
				1			Yes	32	0.9
				8			Don't Know	1	0.0
CE_MH_G1C_8_YN	CE_MH_G1C_8_YN. What type or types of provider were they? School counselor or guidance counselor	NUM	NYREFDK	.			Missing	40	1.2
				.S			Skipped	3096	91.0
				0			No	249	7.3
				1			Yes	15	0.4
				8			Don't Know	1	0.0
CE_MH_G1C_9_YN	CE_MH_G1C_9_YN. What type or types of provider were they? Other	NUM	NYREFDK	.			Missing	40	1.2
				.S			Skipped	3096	91.0
				0			No	225	6.6
				1			Yes	39	1.1

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					8		Don't Know	1	0.0
CE_MH_G1C1_OTHER_TXT	CE_MH_G1C1_OTHER_TXT. What type or types of provider were they? Other, Specify other [TEXT: SPECIFY]	CHAR	\$CHAR		.-.				
CE_MH_G2	CE_MH_G2. Let's talk about the mental health care professional you most recently visited. What type of provider were they?	NUM	MHPROF		.		Missing	40	1.2
					.S		Skipped	3322	97.7
					1		Psychologist	14	0.4
					2		Psychiatrist	17	0.5
					3		Social Worker	3	0.1
					5		Physician	3	0.1
					6		Other	2	0.1
CE_MH_G2A_OTHER_TXT	CE_MH_G2A_OTHER_TXT. Let's talk about the mental health care professional you most recently visited. What type of provider were they? Other, Specify other [TEXT: SPECIFY]	CHAR	\$CHAR		.-.				
CE_MH_G3	CE_MH_G3. Thinking back to the first time you went to this [mental health provider], did you go on your own, did someone refer you, were you just taken there, or were you there for something else?	NUM	MHSEEK		.		Missing	42	1.2
					.S		Skipped	3161	92.9
					1		On Your Own	130	3.8
					2		Were Referred	51	1.5
					3		Were Just Taken There	11	0.3
					4		Were There For Something Else	6	0.2
CE_MH_G3A	CE_MH_G3A. Who referred you to this [mental health provider]?	NUM	MHWHO		.		Missing	42	1.2
					.S		Skipped	3308	97.3
					1		A Friend, Relative, Or Acquaintance	13	0.4
					2		Another Medical Provider	28	0.8
					3		A Case Manager	6	0.2
					4		Someone Else	4	0.1
CE_MH_G3B	CE_MH_G3B. Overall, how satisfied are you with the care that you get from this [mental health provider] in terms of psychological counseling or support?	NUM	SATISFY		.		Missing	63	1.9
					.S		Skipped	3161	92.9
					1		Very Satisfied	103	3.0
					2		Somewhat Satisfied	54	1.6

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							Somewhat Dissatisfied	9	0.3
							Very Dissatisfied	8	0.2
							Don't Know	3	0.1
CE_MH_G3B1_TXT	CE_MH_G3B1_TXT. Could you briefly explain why you are dissatisfied? [TEXT: SPECIFY]	CHAR	\$CHAR		.-.				
CE_MH_G4_TXT	CE_MH_G4_TXT. Is there anything else you feel is important to tell me about your mental health care provider? [TEXT: SPECIFY]	CHAR	\$CHAR		.-.				
CE_MH_H1_YN	CE_MH_H1_YN. At any time in the last 6 months, did you ever delay or not get the assistance you thought you needed because the staff at the office or clinic do not speak your language?	NUM	DKREFYN		.		Missing	56	1.6
							Yes	36	1.1
							No	3302	97.1
							Don't Know	3	0.1
							Refused	4	0.1
CE_MH_H1A	CE_MH_H1A. Did this happen when you needed medical services, social services, or both?	NUM	MEDVISIT		.		Missing	56	1.6
							Skipped	3309	97.3
							Medical	22	0.6
							Social	4	0.1
							Both	9	0.3
							Don't Know	1	0.0
CE_MH_H2_YN	CE_MH_H2_YN. At any time in the last 6 months, did you ever delay or not get the assistance you thought you needed because it cost too much or it wasn't covered by insurance?	NUM	DKREFYN		.		Missing	53	1.6
							Yes	489	14.4
							No	2852	83.9
							Don't Know	3	0.1
							Refused	4	0.1
CE_MH_H2A	CE_MH_H2A. Did this happen when you needed medical services, social services, or both?	NUM	MEDVISIT		.		Missing	57	1.7
							Skipped	2859	84.1
							Medical	308	9.1
							Social	23	0.7
							Both	151	4.4

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					8		Don't Know	3	0.1
CE_MH_H3_YN	CE_MH_H3_YN. At any time in the last 6 months, did you ever delay or not get the assistance you thought you needed because you felt the staff at the office or clinic was not competent to deal with your problem?	NUM	DKREFYN		.		Missing	57	1.7
					1		Yes	119	3.5
					2		No	3210	94.4
					8		Don't Know	11	0.3
					9		Refused	4	0.1
CE_MH_H3A	CE_MH_H3A. Did this happen when you needed medical services, social services, or both?	NUM	MEDVISIT		.		Missing	57	1.7
					.S		Skipped	3225	94.8
					1		Medical	58	1.7
					2		Social	20	0.6
					3		Both	39	1.1
					8		Don't Know	2	0.1
CE_MH_H4_YN	CE_MH_H4_YN. At any time in the last 6 months, did you ever delay or not get the assistance you thought you needed because you didn't know or weren't sure where to go?	NUM	DKREFYN		.		Missing	54	1.6
					1		Yes	231	6.8
					2		No	3104	91.3
					8		Don't Know	7	0.2
					9		Refused	5	0.1
CE_MH_H4A	CE_MH_H4A. Did this happen when you needed medical services, social services, or both?	NUM	MEDVISIT		.		Missing	57	1.7
					.S		Skipped	3116	91.6
					1		Medical	88	2.6
					2		Social	40	1.2
					3		Both	98	2.9
					8		Don't Know	2	0.1
CE_MH_H5_YN	CE_MH_H5_YN. At any time in the last 6 months, did you ever delay or not get the assistance you thought you needed because it was difficult to get transportation there?	NUM	DKREFYN		.		Missing	55	1.6
					1		Yes	152	4.5
					2		No	3186	93.7
					8		Don't Know	3	0.1
					9		Refused	5	0.1

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CE_MH_H5A	CE_MH_H5A. Did this happen when you needed medical services, social services, or both?	NUM	MEDVISIT				Missing	56	1.6
							Skipped	3194	93.9
							1	48	1.4
							2	15	0.4
							3	87	2.6
							8	1	0.0
CE_MH_H6_YN	CE_MH_H6_YN. At any time in the last 6 months, did you ever delay or not get the assistance you thought you needed because the staff at the office or clinic are often not polite, are disrespectful, or are insensitive to your needs?	NUM	DKREFYN				Missing	60	1.8
							1	111	3.3
							2	3220	94.7
							8	5	0.1
							9	5	0.1
CE_MH_H6A	CE_MH_H6A. Did this happen when you needed medical services, social services, or both?	NUM	MEDVISIT				Missing	60	1.8
							Skipped	3230	95.0
							1	55	1.6
							2	16	0.5
							3	38	1.1
							8	2	0.1
CE_MH_H7_YN	CE_MH_H7_YN. At any time in the last 6 months, did you ever delay or not get the assistance you thought you needed because you weren't sure that the staff at the office or clinic would understand your problems?	NUM	DKREFYN				Missing	59	1.7
							1	124	3.6
							2	3204	94.2
							8	7	0.2
							9	7	0.2
CE_MH_H7A	CE_MH_H7A. Did this happen when you needed medical services, social services, or both?	NUM	MEDVISIT				Missing	61	1.8
							Skipped	3218	94.6
							1	51	1.5
							2	20	0.6
							3	48	1.4

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					8		Don't Know	3	0.1
CE_MH_H8_YN	CE_MH_H8_YN. At any time in the last 6 months, did you ever delay or not get the assistance you thought you needed because you felt that the staff is not good at listening to your problems or needs?	NUM	DKREFYN	.			Missing	59	1.7
				1			Yes	127	3.7
				2			No	3202	94.1
				8			Don't Know	7	0.2
				9			Refused	6	0.2
CE_MH_H8A	CE_MH_H8A. Did this happen when you needed medical services, social services, or both?	NUM	MEDVISIT	.			Missing	60	1.8
				.S			Skipped	3215	94.5
				1			Medical	62	1.8
				2			Social	14	0.4
				3			Both	49	1.4
				8			Don't Know	1	0.0
CE_MH_H9_YN	CE_MH_H9_YN. At any time in the last 6 months, did you ever delay or not get the assistance you thought you needed because you needed someone to take care of your children?	NUM	DKREFYN	.			Missing	58	1.7
				1			Yes	28	0.8
				2			No	3309	97.3
				8			Don't Know	1	0.0
				9			Refused	5	0.1
CE_MH_H9A	CE_MH_H9A. Did this happen when you needed medical services, social services, or both?	NUM	MEDVISIT	.			Missing	59	1.7
				.S			Skipped	3315	97.5
				1			Medical	8	0.2
				2			Social	3	0.1
				3			Both	16	0.5
CE_MH_H10_YN	CE_MH_H10_YN. At any time in the last 6 months, did you ever delay or not get the assistance you thought you needed because you were nervous or afraid of what the doctor/service provider might say?	NUM	DKREFYN	.			Missing	46	1.4
				1			Yes	130	3.8
				2			No	3219	94.6
				8			Don't Know	1	0.0
				9			Refused	5	0.1

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CE_MH_H10A	CE_MH_H10A. Did this happen when you needed medical services, social services, or both?	NUM	MEDVISIT	.	.S		Missing	46	1.4
							Skipped	3225	94.8
							Medical	63	1.9
							Social	9	0.3
							Both	56	1.6
							Don't Know	2	0.1
CE_MH_I1	CE_MH_I1. Can you count on anyone to provide you with emotional support such as talking over problems or helping you make a difficult decision?	NUM	YNHELP	.			Missing	42	1.2
							Yes	2925	86.0
							No	411	12.1
							I Don't Need Help	17	0.5
							Don't Know	2	0.1
							Refused	4	0.1
CE_MH_I2_1_YN	CE_MH_I2_1_YN. In the last 12 months, who has been helpful in providing you with emotional support? [SPOUSE]	NUM	NYREFDK	.			Missing	39	1.1
							No	1826	53.7
							Yes	1530	45.0
							Refused	6	0.2
CE_MH_I2_2_YN	CE_MH_I2_2_YN. In the last 12 months, who has been helpful in providing you with emotional support? [DAUGHTER]	NUM	NYREFDK	.			Missing	39	1.1
							No	2949	86.7
							Yes	407	12.0
							Refused	6	0.2
CE_MH_I2_3_YN	CE_MH_I2_3_YN. In the last 12 months, who has been helpful in providing you with emotional support? [SON]	NUM	NYREFDK	.			Missing	39	1.1
							No	3016	88.7
							Yes	340	10.0
							Refused	6	0.2
CE_MH_I2_4_YN	CE_MH_I2_4_YN. In the last 12 months, who has been helpful in providing you with emotional support? [SISTER/BROTHER]	NUM	NYREFDK	.			Missing	39	1.1
							No	2483	73.0
							Yes	873	25.7

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					9		Refused	6	0.2
CE_MH_I2_5_YN	CE_MH_I2_5_YN. In the last 12 months, who has been helpful in providing you with emotional support? [PARENT]	NUM	NYREFDK	.			Missing	39	1.1
				0			No	2357	69.3
				1			Yes	999	29.4
				9			Refused	6	0.2
CE_MH_I2_6_YN	CE_MH_I2_6_YN. In the last 12 months, who has been helpful in providing you with emotional support? [OTHER RELATIVE]	NUM	NYREFDK	.			Missing	39	1.1
				0			No	2921	85.9
				1			Yes	435	12.8
				9			Refused	6	0.2
CE_MH_I2_7_YN	CE_MH_I2_7_YN. In the last 12 months, who has been helpful in providing you with emotional support? [NEIGHBORS]	NUM	NYREFDK	.			Missing	39	1.1
				0			No	3243	95.4
				1			Yes	113	3.3
				9			Refused	6	0.2
CE_MH_I2_8_YN	CE_MH_I2_8_YN. In the last 12 months, who has been helpful in providing you with emotional support? [CO-WORKERS]	NUM	NYREFDK	.			Missing	39	1.1
				0			No	3212	94.4
				1			Yes	144	4.2
				9			Refused	6	0.2
CE_MH_I2_9_YN	CE_MH_I2_9_YN. In the last 12 months, who has been helpful in providing you with emotional support? [CHURCH MEMBERS]	NUM	NYREFDK	.			Missing	39	1.1
				0			No	3004	88.3
				1			Yes	352	10.3
				9			Refused	6	0.2
CE_MH_I2_10_YN	CE_MH_I2_10_YN. In the last 12 months, who has been helpful in providing you with emotional support? [CLUB MEMBERS]	NUM	NYREFDK	.			Missing	39	1.1
				0			No	3325	97.8
				1			Yes	31	0.9
				9			Refused	6	0.2
CE_MH_I2_11_YN	CE_MH_I2_11_YN. In the last 12 months, who has been helpful in providing you with emotional support? [PROFESSIONALS]	NUM	NYREFDK	.			Missing	39	1.1

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							No	3253	95.6
							Yes	103	3.0
							Refused	6	0.2
CE_MH_I2_I2_YN	CE_MH_I2_I2_YN. In the last 12 months, who has been helpful in providing you with emotional support? [FRIENDS]	NUM	NYREFDK	.			Missing	39	1.1
							No	2311	68.0
							Yes	1045	30.7
							Refused	6	0.2
CE_MH_I2_I3_YN	CE_MH_I2_I3_YN. In the last 12 months, who has been helpful in providing you with emotional support? [OTHER]	NUM	NYREFDK	.			Missing	39	1.1
							No	3222	94.7
							Yes	134	3.9
							Refused	6	0.2
CE_MH_I2_I4_YN	CE_MH_I2_I4_YN. In the last 12 months, who has been helpful in providing you with emotional support? [NO ONE]	NUM	NYREFDK	.			Missing	39	1.1
							No	3051	89.7
							Yes	305	9.0
							Refused	6	0.2
CE_MH_I3_YN	CE_MH_I3_YN. In the last 12 months, could you have used more emotional support than you received?	NUM	DKREFYN	.			Missing	43	1.3
							Yes	905	26.6
							No	2438	71.7
							Don't Know	11	0.3
							Refused	4	0.1
CE_MH_I3A	CE_MH_I3A. Concerning emotional support, would you say that you could have used...?	NUM	MORE	.			Missing	45	1.3
				.S			Skipped	2453	72.1
				1			A Lot More	299	8.8
				2			Some More	274	8.1
				3			A Little More	328	9.6
				8			Don't Know	2	0.1
CE_MH_I4_UNITS	CE_MH_I4_UNITS. How often do you attend church or religious services? [UNITS: TIMES PER DAY, TIMES PER WEEK, TIMES PER MONTH, TIMES PER YEAR]	NUM	TIMEPER	.			Missing	40	1.2
				1			Per Day	35	1.0

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							Per Week	799	23.5
							Per Month	1176	34.6
							Per Year	1314	38.6
							Don't Know	28	0.8
							Refused	9	0.3
CE_MH_I4_NUM	CE_MH_I4_NUM. How often do you attend church or religious services? [COUNT]	NUM	BEST	2.2	0-365	3317	MISSING	48	1.4
							DON'T KNOW	27	0.8
							REFUSED	9	0.3
CE_MH_I5	CE_MH_I5. Is there someone you could count on to help you if you were sick, for example, to take you to the doctor or help you with daily chores?	NUM	ACCEPTHELP				Missing	42	1.2
							Yes	3098	91.1
							No	232	6.8
							Yes, But I Wouldn't Accept It	7	0.2
							Don't Know	18	0.5
							Refused	4	0.1
CE_MH_I6	CE_MH_I6. If you need some extra help financially, could you count on anyone to help you, for example, by paying any bills, housing costs, medical expenses, or providing you with food or clothes?	NUM	ACCEPTHELP				Missing	42	1.2
							Yes	2457	72.2
							No	806	23.7
							Yes, But I Wouldn't Accept It	43	1.3
							Don't Know	49	1.4
							Refused	4	0.1
CE_MH_I7_NUM	CE_MH_I7_NUM. In general how many close friends do you have? [UNIT: NUMBER OF CLOSE FRIENDS]	NUM	BEST	6.2	0-87	3334	MISSING	48	1.4
							DON'T KNOW	12	0.4
							REFUSED	7	0.2
CE_MH_J1	CE_MH_J1. Generally speaking, would you say that most people can be trusted or that you can't be too careful in dealing with people?	NUM	TRUST				Missing	40	1.2
							Most People Can Be Trusted	1116	32.8
							Can't Be Too Careful	2074	61.0

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							Other	160	4.7
							Don't Know	7	0.2
							Refused	4	0.1
CE_MH_J2	CE_MH_J2. Do you think most people would try to take advantage of you if they got the chance, or would they try to be fair?	NUM	TRUSTA	.			Missing	41	1.2
							Take Advantage Of You	1427	42.0
							Try To Be Fair	1677	49.3
							Other	239	7.0
							Don't Know	13	0.4
							Refused	4	0.1
CE_MH_J3	CE_MH_J3. Would you say that most of the time people try to be helpful, or that they are mostly just looking out for themselves?	NUM	TRUSTB	.			Missing	41	1.2
							Try To Be Helpful	1577	46.4
							Just Looking Out For Themselves	1504	44.2
							Other	269	7.9
							Don't Know	5	0.1
							Refused	5	0.1
CE_MH_K1	CE_MH_K1. How strongly do you agree or disagree with the following statement: People around here are willing to help their neighbors.	NUM	DISAGREE	.			Missing	40	1.2
							Strongly Disagree	261	7.7
							Somewhat Disagree	304	8.9
							Neither Agree Nor Disagree	165	4.9
							Somewhat Agree	1134	33.3
							Strongly Agree	1465	43.1
							Don't Know	27	0.8
							Refused	5	0.1
CE_MH_K2	CE_MH_K2. How strongly do you agree or disagree with the following statement: This is a close-knit neighborhood.	NUM	DISAGREE	.			Missing	41	1.2
							Strongly Disagree	339	10.0
							Somewhat Disagree	435	12.8
							Neither Agree Nor Disagree	208	6.1
							Somewhat Agree	962	28.3
							Strongly Agree	1376	40.5
							Don't Know	35	1.0

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							Refused	5	0.1
CE_MH_K3	CE_MH_K3. How strongly do you agree or disagree with the following statement: People in this neighborhood can be trusted.	NUM	DISAGREE		.		Missing	41	1.2
							Strongly Disagree	367	10.8
							Somewhat Disagree	350	10.3
							Neither Agree Nor Disagree	255	7.5
							Somewhat Agree	1060	31.2
							Strongly Agree	1283	37.7
							Don't Know	40	1.2
							Refused	5	0.1
CE_MH_K4	CE_MH_K4. How strongly do you agree or disagree with the following statement: People in this neighborhood generally do not get along with each other.	NUM	DISAGREE		.		Missing	43	1.3
							Strongly Disagree	1502	44.2
							Somewhat Disagree	983	28.9
							Neither Agree Nor Disagree	242	7.1
							Somewhat Agree	360	10.6
							Strongly Agree	212	6.2
							Don't Know	52	1.5
							Refused	7	0.2
CE_MH_K5	CE_MH_K5. How strongly do you agree or disagree with the following statement: People in neighborhood do not share same values.	NUM	DISAGREE		.		Missing	43	1.3
							Strongly Disagree	985	29.0
							Somewhat Disagree	821	24.1
							Neither Agree Nor Disagree	393	11.6
							Somewhat Agree	623	18.3
							Strongly Agree	443	13.0
							Don't Know	88	2.6
							Refused	5	0.1
CE_MH_L1_NUM	CE_MH_L1_NUM. Over the last 2 weeks, how many days have you had little interest or pleasure in doing things? [UNIT: NUMBER OF DAYS]	NUM	BEST	2.1	0-14	3331	MISSING	48	1.4
							DONT KNOW	15	0.4
							REFUSE D	7	0.2

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CE_MH_L2_NUM	CE_MH_L2_NUM. Over the last 2 weeks, how many days have you felt down, depressed or hopeless? [UNIT: NUMBER OF DAYS]	NUM	BEST	1.8	0-14	3337	MISSING	48	1.4
							DONT KNOW	8	0.2
							REFUSE D	8	0.2
CE_MH_L3_NUM	CE_MH_L3_NUM. Over the last 2 weeks, how many days have you had trouble falling asleep or staying asleep or sleeping too much? [UNIT: NUMBER OF DAYS]	NUM	BEST	3.7	0-14	3339	MISSING	49	1.4
							DONT KNOW	6	0.2
							REFUSE D	7	0.2
CE_MH_L4_NUM	CE_MH_L4_NUM. Over the last 2 weeks, how many days have you felt tired or had little energy? [UNIT: NUMBER OF DAYS]	NUM	BEST	4.0	0-14	3334	MISSING	49	1.4
							DONT KNOW	11	0.3
							REFUSE D	7	0.2
CE_MH_L5_NUM	CE_MH_L5_NUM. Over the last 2 weeks, how many days have you had a poor appetite or eaten too much? [UNIT: NUMBER OF DAYS]	NUM	BEST	2.2	0-14	3333	MISSING	49	1.4
							DONT KNOW	12	0.4
							REFUSE D	7	0.2
CE_MH_L6_NUM	CE_MH_L6_NUM. Over the last 2 weeks, how many days have you felt bad about yourself or that you were a failure or had let yourself or your family down? [UNIT: NUMBER OF DAYS]	NUM	BEST	1.3	0-14	3338	MISSING	48	1.4
							DONT KNOW	6	0.2
							REFUSE D	9	0.3
CE_MH_L7_NUM	CE_MH_L7_NUM. Over the last 2 weeks, how many days have you had trouble concentrating on things, such as reading the newspaper or watching the TV? [UNIT: NUMBER OF DAYS]	NUM	BEST	1.6	0-14	3334	MISSING	47	1.4
							DONT KNOW	13	0.4
							REFUSE D	7	0.2

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CE_MH_L8_NUM	CE_MH_L8_NUM. Over the last 2 weeks, how many days have you moved or spoken so slowly that other people could have noticed? Or the opposite - being so fidgety or restless that you have been moving around a lot more than usual? [UNIT: NUMBER OF DAYS]	NUM	BEST	1.1	0-14	3315	MISSING	48	1.4	
							DON'T KNOW	31	0.9	
							REFUSE D	7	0.2	
CE_MH_L9_NUM	CE_MH_L9_NUM. Over the last 2 weeks, how many days have you had thoughts that you would be better off dead or of hurting yourself in some way? [UNIT: NUMBER OF DAYS]	NUM	BEST	0.3	0-14	3344	MISSING	39	1.1	
							DON'T KNOW	7	0.2	
							REFUSE D	11	0.3	
CE_MH_M1	CE_MH_M1. Over the past week, to what extent have you felt...Upset?	NUM	SLIGHT	.			Missing	56	1.6	
							1	Slightly Or None	1946	57.2
							2	A Little	654	19.2
							3	Moderately	377	11.1
							4	Quite A Bit	230	6.8
							5	Extremely	129	3.8
							8	Don't Know	4	0.1
9	Refused	5	0.1							
CE_MH_M2	CE_MH_M2. Over the past week, to what extent have you felt...Hostile?	NUM	SLIGHT	.			Missing	58	1.7	
							1	Slightly Or None	2745	80.7
							2	A Little	332	9.8
							3	Moderately	131	3.9
							4	Quite A Bit	66	1.9
							5	Extremely	61	1.8
							8	Don't Know	3	0.1
9	Refused	5	0.1							
CE_MH_M3	CE_MH_M3. Over the past week, to what extent have you felt...Alert?	NUM	SLIGHT	.			Missing	58	1.7	
							1	Slightly Or None	301	8.9
							2	A Little	230	6.8
							3	Moderately	633	18.6
							4	Quite A Bit	999	29.4

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							Extremely	1167	34.3
							Don't Know	8	0.2
							Refused	5	0.1
CE_MH_M4	CE_MH_M4. Over the past week, to what extent have you felt...Ashamed?	NUM	SLIGHT				Missing	60	1.8
							Slightly Or None	2879	84.7
							A Little	238	7.0
							Moderately	112	3.3
							Quite A Bit	65	1.9
							Extremely	40	1.2
							Don't Know	2	0.1
							Refused	5	0.1
CE_MH_M5	CE_MH_M5. Over the past week, to what extent have you felt...Inspired?	NUM	SLIGHT				Missing	61	1.8
							Slightly Or None	646	19.0
							A Little	511	15.0
							Moderately	875	25.7
							Quite A Bit	731	21.5
							Extremely	561	16.5
							Don't Know	11	0.3
							Refused	5	0.1
CE_MH_M6	CE_MH_M6. Over the past week, to what extent have you felt...Nervous?	NUM	SLIGHT				Missing	59	1.7
							Slightly Or None	2046	60.2
							A Little	593	17.4
							Moderately	365	10.7
							Quite A Bit	182	5.4
							Extremely	150	4.4
							Don't Know	1	0.0
							Refused	5	0.1
CE_MH_M7	CE_MH_M7. Over the past week, to what extent have you felt...Determined?	NUM	SLIGHT				Missing	60	1.8
							Slightly Or None	333	9.8
							A Little	232	6.8
							Moderately	648	19.1
							Quite A Bit	934	27.5

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VARIABLE NAME	LABEL (VAR)	TYPE	FORMAT	MEAN	RANGE	N	CATEGORY	FREQUENCY	PERCENT
							Extremely	1185	34.8
							Don't Know	4	0.1
							Refused	5	0.1
CE_MH_M8	CE_MH_M8. Over the past week, to what extent have you felt...Attentive?	NUM	SLIGHT				Missing	59	1.7
							Slightly Or None	365	10.7
							A Little	276	8.1
							Moderately	816	24.0
							Quite A Bit	973	28.6
							Extremely	882	25.9
							Don't Know	25	0.7
							Refused	5	0.1
CE_MH_M9	CE_MH_M9. Over the past week, to what extent have you felt...Active?	NUM	SLIGHT				Missing	59	1.7
							Slightly Or None	319	9.4
							A Little	349	10.3
							Moderately	871	25.6
							Quite A Bit	830	24.4
							Extremely	968	28.5
							Refused	5	0.1
CE_MH_M10	CE_MH_M10. Over the past week, to what extent have you felt...Afraid?	NUM	SLIGHT				Missing	42	1.2
							Slightly Or None	2764	81.3
							A Little	330	9.7
							Moderately	145	4.3
							Quite A Bit	62	1.8
							Extremely	52	1.5
							Don't Know	1	0.0
							Refused	5	0.1
CE_MH_N1_YN	CE_MH_N1_YN. During the past 30 days, have you had nightmares about the oil spill or any clean-up efforts you engaged in or thought about it when you did not want to?	NUM	DKREFYN				Missing	41	1.2
							Yes	438	12.9
							No	2916	85.7
							Don't Know	2	0.1
							Refused	4	0.1

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VARIABLE NAME	LABEL (VAR)	TYPE	FORMAT	MEAN	RANGE	N	CATEGORY	FREQUENCY	PERCENT
CE_MH_N2_YN	CE_MH_N2_YN. During the past 30 days, have you tried hard not to think about the oil spill or any clean-up efforts you engaged in or went out of your way to avoid situations that remind you of it?	NUM	DKREFYN				Missing	41	1.2
							Yes	822	24.2
							No	2531	74.4
							Don't Know	3	0.1
							Refused	4	0.1
CE_MH_N3_YN	CE_MH_N3_YN. During the past 30 days, have you been constantly on guard, watchful or easily startled?	NUM	DKREFYN				Missing	43	1.3
							Yes	817	24.0
							No	2529	74.4
							Don't Know	8	0.2
							Refused	4	0.1
CE_MH_N4_YN	CE_MH_N4_YN. During the past 30 days, have you felt numb or detached from others, activities or your surroundings?	NUM	DKREFYN				Missing	42	1.2
							Yes	671	19.7
							No	2675	78.7
							Don't Know	9	0.3
							Refused	4	0.1
CE_MH_O1_NUM	CE_MH_O1_NUM. Over the last 2 weeks, how often have you been bothered by feeling nervous, anxious or on edge? [UNIT: NUMBER OF DAYS]	NUM	BEST	2.2	0-14	3335	MISSING	50	1.5
							DONT KNOW	10	0.3
							REFUSE D	6	0.2
CE_MH_O2_NUM	CE_MH_O2_NUM. Over the last 2 weeks, how often have you been bothered by not being able to stop or control worrying? [UNIT: NUMBER OF DAYS]	NUM	BEST	2.2	0-14	3331	MISSING	52	1.5
							DONT KNOW	11	0.3
							REFUSE D	7	0.2
CE_MH_O3_NUM	CE_MH_O3_NUM. Over the last 2 weeks, how often have you been bothered by worrying too much about different things? [UNIT: NUMBER OF DAYS]	NUM	BEST	2.8	0-14	3326	MISSING	55	1.6
							DONT KNOW	15	0.4
							REFUSE D	5	0.1

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VARIABLE NAME	LABEL (VAR)	TYPE	FORMAT	MEAN	RANGE	N	CATEGORY	FREQUENCY	PERCENT	
CE_MH_O4_NUM	CE_MH_O4_NUM. Over the last 2 weeks, how often have you been bothered by trouble relaxing? [UNIT: NUMBER OF DAYS]	NUM	BEST	2.7	0-14	3332	MISSING	55	1.6	
							DONT KNOW	9	0.3	
							REFUSED	5	0.1	
CE_MH_O5_NUM	CE_MH_O5_NUM. Over the last 2 weeks, how often have you been bothered by being so restless that it's hard to sit still? [UNIT: NUMBER OF DAYS]	NUM	BEST	2.3	0-14	3329	MISSING	54	1.6	
							DONT KNOW	13	0.4	
							REFUSED	5	0.1	
CE_MH_O6_NUM	CE_MH_O6_NUM. Over the last 2 weeks, how often have you been bothered by becoming easily annoyed or irritable? [UNIT: NUMBER OF DAYS]	NUM	BEST	2.4	0-14	3328	MISSING	54	1.6	
							DONT KNOW	12	0.4	
							REFUSED	7	0.2	
CE_MH_O7_NUM	CE_MH_O7_NUM. Over the last 2 weeks, how often have you been bothered by feeling afraid as if something awful might happen? [UNIT: NUMBER OF DAYS]	NUM	BEST	1.4	0-14	3331	MISSING	53	1.6	
							DONT KNOW	10	0.3	
							REFUSED	7	0.2	
CE_MH_O8	CE_MH_O8. If you checked off any problems, how difficult have these made it for you to do your work, take care of things at home, or get along with other people?	NUM	DIFFICULT				Missing	38	1.1	
							1	Not Difficult At All	2477	72.8
							2	Somewhat Difficult	674	19.8
							3	Very Difficult	116	3.4
							4	Extremely Difficult	86	2.5
							8	Don't Know	5	0.1
							9	Refused	5	0.1

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VARIABLE NAME	LABEL (VAR)	TYPE	FORMAT	MEAN	RANGE	N	CATEGORY	FREQUENCY	PERCENT
GULFID	Gulf ID	CHAR	\$.-.				
CE_SA1_1_YN	CE_SA1_1_YN. Have you ever used any of the following? Marijuana	NUM	NYREFDK		.		Missing	54	1.6
					0		No	1581	46.5
					1		Yes	1688	49.6
					8		Don't Know	14	0.4
					9		Refused	64	1.9
CE_SA1_2_YN	CE_SA1_2_YN. Have you ever used any of the following? Cocaine	NUM	NYREFDK		.		Missing	54	1.6
					0		No	2648	77.9
					1		Yes	621	18.3
					8		Don't Know	14	0.4
					9		Refused	64	1.9
CE_SA1_3_YN	CE_SA1_3_YN. Have you ever used any of the following? Crack	NUM	NYREFDK		.		Missing	54	1.6
					0		No	3084	90.7
					1		Yes	185	5.4
					8		Don't Know	14	0.4
					9		Refused	64	1.9
CE_SA1_4_YN	CE_SA1_4_YN. Have you ever used any of the following? Heroin	NUM	NYREFDK		.		Missing	54	1.6
					0		No	3182	93.6
					1		Yes	87	2.6
					8		Don't Know	14	0.4
					9		Refused	64	1.9
CE_SA1_5_YN	CE_SA1_5_YN. Have you ever used any of the following? Hallucinogens	NUM	NYREFDK		.		Missing	54	1.6
					0		No	2981	87.7
					1		Yes	288	8.5
					8		Don't Know	14	0.4
					9		Refused	64	1.9
CE_SA1_6_YN	CE_SA1_6_YN. Have you ever used any of the following? Other	NUM	NYREFDK		.		Missing	54	1.6
					0		No	3120	91.7
					1		Yes	149	4.4
					8		Don't Know	14	0.4
					9		Refused	64	1.9

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VARIABLE NAME	LABEL (VAR)	TYPE	FORMAT	MEAN	RANGE	N	CATEGORY	FREQUENCY	PERCENT
CE_SA1_6_OTHER_TXT	CE_SA1_6_OTHER_TXT. Have you ever used any of the following? Other [TEXT: SPECIFY]	CHAR	\$CHAR		.-.				
CE_SA1A_MARIJUANA	CE_SA1A_MARIJUANA. Compared to your use of marijuana before the oil spill, would you say your current use is...	NUM	DRUGUSE		.		Missing	54	1.6
					.S		Skipped	1653	48.6
					1		A Lot More	112	3.3
					2		A Little More	90	2.6
					3		The Same	220	6.5
					4		A Little Less	82	2.4
					5		A Lot Less	236	6.9
					6		I Have Not Used [drug] Since The Spill	870	25.6
					8		Don't Know	42	1.2
					9		Refused	42	1.2
CE_SA1B_MARIJUANA_NUM	CE_SA1B_MARIJUANA_NUM. About how many times have you used marijuana in the past month? [UNIT: NUMBER OF TIMES IN PAST MONTH]	NUM	BEST	10.6	0-180	663	MISSING	54	1.6
					DONT KNOW			120	3.5
					REFUSE D			41	1.2
					SKIPPE D			2523	74.2
CE_SA1A_COCAINE	CE_SA1A_COCAINE. Compared to your use of cocaine before the oil spill, would you say your current use is...	NUM	DRUGUSE		.		Missing	54	1.6
					.S		Skipped	2724	80.1
					1		A Lot More	7	0.2
					2		A Little More	9	0.3
					3		The Same	22	0.6
					4		A Little Less	13	0.4
					5		A Lot Less	88	2.6
					6		I Have Not Used [drug] Since The Spill	453	13.3
					8		Don't Know	12	0.4
					9		Refused	19	0.6
CE_SA1B_COCAINE_NUM	CE_SA1B_COCAINE_NUM. About how many times have you used cocaine in the past month? [UNIT: NUMBER OF TIMES IN PAST MONTH]	NUM	BEST	2.3	0-100	137	MISSING	54	1.6

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VARIABLE NAME	LABEL (VAR)	TYPE	FORMAT	MEAN	RANGE	N	CATEGORY	FREQUENCY	PERCENT
							DONT KNOW	18	0.5
							REFUSED	15	0.4
							SKIPPED	3177	93.4
CE_SA1A_CRACK	CE_SA1A_CRACK. Compared to your use of crack before the oil spill, would you say your current use is...	NUM	DRUGUSE	.			Missing	54	1.6
				.S			Skipped	3162	93.0
				1			A Lot More	2	0.1
				2			A Little More	4	0.1
				3			The Same	3	0.1
				4			A Little Less	3	0.1
				5			A Lot Less	20	0.6
				6			I Have Not Used [drug] Since The Spill	138	4.1
				8			Don't Know	3	0.1
				9			Refused	12	0.4
CE_SA1B_CRACK_NUM	CE_SA1B_CRACK_NUM. About how many times have you used crack in the past month? [UNIT: NUMBER OF TIMES IN PAST MONTH]	NUM	BEST	2.9	0-30	36	MISSING	54	1.6
							DONT KNOW	3	0.1
							REFUSED	8	0.2
							SKIPPED	3300	97.0
CE_SA1A HEROIN	CE_SA1A HEROIN. Compared to your use of heroin before the oil spill, would you say your current use is...	NUM	DRUGUSE	.			Missing	54	1.6
				.S			Skipped	3260	95.9
				1			A Lot More	4	0.1
				2			A Little More	5	0.1
				3			The Same	1	0.0
				4			A Little Less	1	0.0
				5			A Lot Less	4	0.1
				6			I Have Not Used [drug] Since The Spill	65	1.9
				8			Don't Know	1	0.0

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VARIABLE NAME	LABEL (VAR)	TYPE	FORMAT	MEAN	RANGE	N	CATEGORY	FREQUENCY	PERCENT
							Refused	6	0.2
CE_SA1B_HEROIN_NUM	CE_SA1B_HEROIN_NUM. About how many times have you used heroin in the past month? [UNIT: NUMBER OF TIMES IN PAST MONTH]	NUM	BEST	4.9	0-30	18	MISSING	54	1.6
							REFUSED	4	0.1
							SKIPPE	3325	97.8
CE_SA1A_HALLUCINOGENS	CE_SA1A_HALLUCINOGENS. Compared to your use of hallucinogens before the oil spill, would you say your current use is...	NUM	DRUGUSE				Missing	54	1.6
							.S	3059	89.9
							1	1	0.0
							2	3	0.1
							3	13	0.4
							4	2	0.1
							5	19	0.6
							6	236	6.9
							I Have Not Used [drug] Since The Spill		
							8	4	0.1
							9	10	0.3
CE_SA1B_HALLUCINOGENS_NUM	CE_SA1B_HALLUCINOGENS_NUM. About how many times have you used hallucinogens in the past month? [UNIT: NUMBER OF TIMES IN PAST MONTH]	NUM	BEST	1.1	0-30	40	MISSING	54	1.6
							DONT KNOW	1	0.0
							REFUSED	11	0.3
							SKIPPE	3295	96.9
CE_SA1A_OTHER	CE_SA1A_OTHER. Compared to your use of [CE_SA1_F_OTHER_TXT] before the oil spill, would you say your current use is...	NUM	DRUGUSE				Missing	54	1.6
							.S	3197	94.0
							1	17	0.5
							2	6	0.2
							3	30	0.9
							4	5	0.1
							5	21	0.6

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VARIABLE NAME	LABEL (VAR)	TYPE	FORMAT	MEAN	RANGE	N	CATEGORY	FREQUENCY	PERCENT
						6	I Have Not Used [drug] Since The Spill	64	1.9
						8	Don't Know	2	0.1
						9	Refused	5	0.1
CE_SA1B_OTHER_NUM	CE_SA1B_OTHER_NUM. About how many times have you used [CE_SA1_F_OTHER_TXT] in the past month? [UNIT: NUMBER OF TIMES IN PAST MONTH]	NUM	BEST	8.6	0-30	73	MISSING	54	1.6
							DONT KNOW	8	0.2
							REFUSED	5	0.1
							SKIPPE D	3261	95.9
CE_SA2_YN	CE_SA2_YN. Have you ever used any prescription pain killer that was not prescribed for you or that you took mainly for the experience or feeling it caused?	NUM	DKREFYN				Missing	60	1.8
						1	Yes	368	10.8
						2	No	2919	85.8
						8	Don't Know	24	0.7
						9	Refused	30	0.9
CE_SA2A	CE_SA2A. Compared to your use of prescription pain killers before the oil spill, would you say your current use is...	NUM	RXPILLUSE				Missing	60	1.8
						.S	Skipped	2965	87.2
						1	A Lot More	56	1.6
						2	A Little More	50	1.5
						3	The Same	56	1.6
						4	A Little Less	23	0.7
						5	A Lot Less	70	2.1
						6	I Have Not Used Prescription Pain Killers Since The Spill	99	2.9
						8	Don't Know	13	0.4
						9	Refused	9	0.3
CE_SA2B_NUM	CE_SA2B_NUM. About how many times have you used prescription pain killers in the past month? [UNIT: NUMBER OF TIMES IN PAST MONTH]	NUM	BEST	7.4	0-120	231	MISSING	60	1.8
							DONT KNOW	35	1.0
							REFUSED	11	0.3

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VARIABLE NAME	LABEL (VAR)	TYPE	FORMAT	MEAN	RANGE	N	CATEGORY	FREQUENCY	PERCENT
					SKIPPE D			3064	90.1
CE_SA3_YN	CE_SA3_YN. Have you ever used any prescription tranquilizer that was not prescribed for you or that you took mainly for the experience or feeling it caused?	NUM	DKREFYN		.		Missing	66	1.9
					1		Yes	164	4.8
					2		No	3119	91.7
					8		Don't Know	22	0.6
					9		Refused	30	0.9
CE_SA3A	CE_SA3A. Compared to your use of prescription tranquilizers before the oil spill, would you say your current use is...	NUM	TRANQUSE		.		Missing	66	1.9
					.S		Skipped	3169	93.2
					1		A Lot More	20	0.6
					2		A Little More	24	0.7
					3		The Same	25	0.7
					4		A Little Less	3	0.1
					5		A Lot Less	28	0.8
					6		I Have Not Used Tranquilizers Since The Spill	55	1.6
					8		Don't Know	7	0.2
					9		Refused	4	0.1
CE_SA3B_NUM	CE_SA3B_NUM. About how many times have you used prescription tranquilizers in the past month? [UNIT: NUMBER OF TIMES IN PAST MONTH]	NUM	BEST	7.2	0-31	101	MISSING	66	1.9
					DONT KNOW			7	0.2
					REFUSE D			3	0.1
					SKIPPE D			3224	94.8
CE_SA4_YN	CE_SA4_YN. Have you ever used any prescription stimulant that was not prescribed for you or that you took mainly for the experience or feeling it caused?	NUM	DKREFYN		.		Missing	66	1.9
					1		Yes	96	2.8
					2		No	3184	93.6
					8		Don't Know	27	0.8
					9		Refused	28	0.8
CE_SA4A	CE_SA4A. Compared to your use of prescription stimulants before the oil spill, would you say your current use is...	NUM	RXSTIMUSE		.		Missing	66	1.9

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VARIABLE NAME	LABEL (VAR)	TYPE	FORMAT	MEAN	RANGE	N	CATEGORY	FREQUENCY	PERCENT
							Skipped	3239	95.2
							A Lot More	8	0.2
							A Little More	7	0.2
							The Same	7	0.2
							A Little Less	4	0.1
							A Lot Less	11	0.3
							I Have Not Used Prescription Stimulants Since The Spill	58	1.7
							Don't Know	1	0.0
CE_SA4B_NUM	CE_SA4B_NUM. About how many times have you used prescription stimulants in the past month? [UNIT: NUMBER OF TIMES IN PAST MONTH]	NUM	BEST	4.7	0-30	38	MISSING	66	1.9
							SKIPPE D	3297	96.9
CE_SA5_YN	CE_SA5_YN. Have you ever used any prescription sedative that was not prescribed for you or that you took mainly for the experience or feeling it caused?	NUM	DKREFYN	.			Missing	66	1.9
							Yes	64	1.9
							No	3216	94.6
							Don't Know	19	0.6
							Refused	36	1.1
CE_SA5A	CE_SA5A. Compared to your use of prescription sedatives before the oil spill, would you say your current use is...	NUM	SEDAUSE	.			Missing	66	1.9
							Skipped	3271	96.2
							A Lot More	5	0.1
							A Little More	3	0.1
							The Same	6	0.2
							A Lot Less	6	0.2
							I Have Not Used Sedatives Since The Spill	42	1.2
							Don't Know	2	0.1
CE_SA5B_NUM	CE_SA5B_NUM. About how many times have you used prescription sedatives in the past month? [UNIT: NUMBER OF TIMES IN PAST MONTH]	NUM	BEST	7.1	0-40	21	MISSING	66	1.9
							DONT KNOW	1	0.0
							SKIPPE D	3313	97.4