REPRODUCTIVE HEALTH – RHQ – HOME EXAM

RHQ.540 {Have you/Has SP} ever used female hormones such as estrogen and progesterone? Please include any forms of female hormones, such as pills, cream, patch, and injectables, but do not include birth control methods or use for infertility.

YES ............................................................ 1
NO ............................................................ 2 (END OF SECTION)
REFUSED .................................................... 7 (END OF SECTION)
DON'T KNOW ............................................ 9 (END OF SECTION)

RHQ.541 Which forms of female hormones {have you/has SP} used?

CODE ALL THAT APPLY

PILLS ............................................................ 1
PATCHES .................................................... 2
CREAM/SUPPOSITORY/INJECTION ........... 3
REFUSED .................................................... 7
DON'T KNOW ............................................ 9

RHQ.550 At the time {you/SP} started using female hormones or hormone replacement therapy, {were you/was she} still having {your/her} periods or had {you/she} completely stopped having {your/her} periods?

STILL HAVING PERIODS ......................... 1
COMPLETELY STOPPED HAVING PERIODS ................ 2
REFUSED .................................................... 7
DON'T KNOW ............................................ 9

RHQ.551 What are {your/SP's} reasons for having used estrogen or progesterone?

CODE ALL THAT APPLY

MENOPAUSE-RELATED SYMPTOMS
(HOT FLASHES, SWEATING, VAGINAL DRYNESS, BLADDER PROBLEMS ....... 1
DEPRESSION, ANXIETY, EMOTIONAL DISTRESS ................................................. 2
HYSTERECTOMY OR OOPHERECTOMY (OVARY REMOVAL) .................. 3
OSTEOPOROSIS, BONE LOSS/THINNING FRACTURE PREVENTION .......... 4
CARDIOVASCULAR DISEASE PREVENTION ......................... 5
IRREGULAR MENSTRUAL PERIODS, TO REGULATE PERIODS .......... 6
OTHER REASONS .............................................. 7
REFUSED .................................................... 77
DON'T KNOW ............................................ 99

RHQ-1
CHECK ITEM RHQ.552:
IF SP USED FEMALE HORMONE PILLS (CODE '1') IN RHQ.541, CONTINUE WITH RHQ.554.
OTHERWISE, GO TO BOX 22.

RHQ.554 {Have you/Has SP} ever taken female hormone pills containing estrogen only (like Premarin)? (Do not include birth control pills.)

YES ............................................................... 1
NO ............................................................... 2 (RHQ.562)
REFUSED ..................................................... 7 (RHQ.562)
DON'T KNOW .................................................. 9 (RHQ.562)

RHQ.556 How old {were you/was SP} when {you/she} first started taking pills containing estrogen only?

|___|___|___|
ENTER AGE IN YEARS

REFUSED ..................................................... 777
DON'T KNOW .................................................. 999

RHQ.558 {Are you/Is SP} taking pills containing estrogen only now?

YES ............................................................... 1
NO ............................................................... 2
REFUSED ..................................................... 7
DON'T KNOW .................................................. 9

RHQ.560 Not counting any time when {you/SP} stopped taking them, for how long altogether {have you taken/did you take/has she taken/did she take} pills containing estrogen only?

CODE "1" FOR LESS THAN 1 MONTH

|___|___|___|
ENTER NUMBER

REFUSED ..................................................... 77
DON'T KNOW .................................................. 99

ENTER UNIT

MONTHS .......................................................... 1
YEARS .......................................................... 2
REFUSED ..................................................... 7
DON'T KNOW .................................................. 9

RHQ-2
RHQ.562  (Have you/Has SP) taken female hormone pills containing progestin only (like Provera)? (Do not include birth control pills.)

YES ............................................................... 1
NO ................................................................. 2 (RHQ.570)
REFUSED ..................................................... 7 (RHQ.570)
DON'T KNOW .................................................. 9 (RHQ.570)

RHQ.564  How old (were you/was SP) first started taking pills containing progestin only?

|___|___|___|
ENTER AGE IN YEARS

REFUSED ..................................................... 777
DON'T KNOW .................................................. 999

RHQ.566  (Are you/Is SP) taking pills containing progestin only now?

YES ............................................................... 1
NO ................................................................. 2
REFUSED ..................................................... 7
DON'T KNOW .................................................. 9

RHQ.568  Not counting any time when (you/SP) stopped taking them, for how long altogether (have you taken/did you take/has she taken/did she take) pills containing progestin only?

CODE "1" FOR LESS THAN 1 MONTH

|___|___|
ENTER NUMBER

REFUSED ..................................................... 77
DON'T KNOW .................................................. 99

ENTER UNIT

MONTHS ....................................................... 1
YEARS .......................................................... 2
REFUSED ..................................................... 7
DON'T KNOW .................................................. 9

RHQ.570  (Have you/Has SP) taken female hormone pills containing both estrogen and progestin (like Prempro, Premphase)? (Do not include birth control pills.)

YES ............................................................... 1
NO ................................................................. 2 (BOX 22)
REFUSED ..................................................... 7 (BOX 22)
DON'T KNOW .................................................. 9 (BOX 22)

RHQ.572  How old (were you/was SP) when (you/she) first started taking pills containing both estrogen and progestin?
ENTER AGE IN YEARS

REFUSED ..................................................... 777
DON'T KNOW .............................................. 999

RHQ.574  {Are you/Is SP} taking pills containing both estrogen and progestin now?

YES ............................................................... 1
NO ................................................................. 2
REFUSED ..................................................... 7
DON'T KNOW ............................................... 9

RHQ.576  Not counting any time when {you/SP} stopped taking them, for how long altogether {have you taken/did you take/has she taken/did she take} pills containing both estrogen and progestin?

CODE "1" FOR LESS THAN 1 MONTH

ENTER NUMBER

REFUSED ..................................................... 77
DON'T KNOW ............................................... 99

ENTER UNIT

MONTHS ....................................................... 1
YEARS .......................................................... 2
REFUSED ..................................................... 7
DON'T KNOW ............................................... 9

BOX 22

CHECK ITEM RHQ.578:
IF SP USED PATCHES (CODE '2') IN RHQ.541, CONTINUE WITH RHQ.580.
OTHERWISE, GO TO BOX 23.

RHQ.580  {Have you/Has SP} ever used female hormone patches containing estrogen only?

YES ............................................................... 1
NO ................................................................. 2 (RHQ.596)
REFUSED ..................................................... 7 (RHQ.596)
DON'T KNOW ............................................... 9 (RHQ.596)
RHQ.582  How old {were you/was SP} when {you/she} first started using patches containing estrogen only?

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ENTER AGE IN YEARS

REFUSED ..................................................... 777
DON'T KNOW ................................................. 999

RHQ.584  {Are you/Is SP} using patches containing estrogen only now?

YES ............................................................... 1
NO ................................................................. 2
REFUSED ..................................................... 7
DON'T KNOW .................................................. 9

RHQ.586  Not counting any time when {you/SP} stopped using them, for how long altogether {have you used/did you use/has she used/did she use} patches containing estrogen only?

CODE "1" FOR LESS THAN 1 MONTH

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ENTER NUMBER

REFUSED ..................................................... 77
DON'T KNOW ................................................ 99

ENTER UNIT

MONTHS .......................................................... 1
YEARS ........................................................... 2
REFUSED ..................................................... 7
DON'T KNOW .................................................. 9

RHQ.596  {Have you/Has SP} used female hormone patches containing both estrogen and progestin?

YES ............................................................... 1
NO ................................................................. 2 (BOX 23)
REFUSED ..................................................... 7 (BOX 23)
DON'T KNOW .................................................. 9 (BOX 23)

RHQ.598  How old {were you/was SP} when {you/she} first started using patches containing both estrogen and progestin?

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ENTER AGE IN YEARS
RHQ.600  {Are you/Is SP} using patches containing both estrogen and progestin now?

YES ............................................................... 1
NO ................................................................. 2
REFUSED ..................................................... 7
DON'T KNOW ............................................... 9

RHQ.602  Not counting any time when {you/SP} stopped using them, for how long altogether {have you used/did you use/has she used/did she use} patches containing both estrogen and progestin?

CODE "1" FOR LESS THAN 1 MONTH

[___] ENTER NUMBER

REFUSED ..................................................... 77
DON'T KNOW ............................................... 99

ENTER UNIT

MONTHS....................................................... 1
YEARS .......................................................... 2
REFUSED ..................................................... 7
DON'T KNOW ............................................... 9

BOX 23

CHECK ITEM RHQ.604:
IF SP USED VAGINAL CREAM, SUPPOSITORIES OR INJECTIONS (CODE '3') IN RHQ.541, CONTINUE WITH RHQ.606.
OTHERWISE, GO TO END OF SECTION.

RHQ.606  {Have you/Has SP} ever used female hormone creams, suppositories, or injections containing estrogen only?

YES ............................................................... 1
NO ................................................................. 2 (RHQ.614)
REFUSED ..................................................... 7 (RHQ.614)
DON'T KNOW ............................................... 9 (RHQ.614)

RHQ.608  How old {were you/was SP} when {you/she} first started using creams, suppositories, or injections containing estrogen only?

[___] ENTER AGE IN YEARS

REFUSED ..................................................... 777
DON'T KNOW ............................................... 999
RHQ.610  {Are you/Is SP} using creams, suppositories, or injections containing estrogen only now?

YES ...............................................................  1
NO .................................................................  2
REFUSED .....................................................  7
DON'T KNOW ..............................................  9

RHQ.612  Not counting any time when {you/SP} stopped using them, for how long altogether {have you used/did you use/has she used/did she use} creams, suppositories, or injections containing estrogen only?

CODE "1" FOR LESS THAN 1 MONTH

|___|___|
ENTER NUMBER

REFUSED .....................................................  77
DON'T KNOW ..............................................  99

ENTER UNIT

MONTHS ......................................................  1
YEARS .........................................................  2
REFUSED .....................................................  7
DON'T KNOW ..............................................  9

RHQ.614  {Have you/Has SP} used female hormone creams, suppositories, or injections containing progestin only?

YES ...............................................................  1
NO .................................................................  2 (RHQ.622)
REFUSED .....................................................  7 (RHQ.622)
DON'T KNOW ..............................................  9 (RHQ.622)

RHQ.616  How old {were you/was SP} when {you/she} first started using female hormone creams, suppositories, or injections containing progestin only?

|___|___|___|
ENTER AGE IN YEARS

REFUSED .....................................................  777
DON'T KNOW ..............................................  999

RHQ.618  {Are you/Is SP} using creams, suppositories, or injections containing progestin only now?

YES ...............................................................  1
NO .................................................................  2
REFUSED .....................................................  7
DON'T KNOW ..............................................  9
RHQ.620 Not counting any time when {you/SP} stopped using them, for how long altogether have you used/did you use/has she used/did she use creams, suppositories, or injections containing progestin only?

CODE "1" FOR LESS THAN 1 MONTH

|___|___|
ENTER NUMBER

REFUSED ..................................................... 77
DON'T KNOW ................................................. 99

ENTER UNIT

MONTHS....................................................... 1
YEARS .......................................................... 2
REFUSED ..................................................... 7
DON'T KNOW ................................................. 9

RHQ.622 {Have you/Has SP} used female hormone creams, suppositories or injections containing both estrogen and progestin?

YES ............................................................... 1
NO ................................................................. 2 (END OF SECTION)
REFUSED ..................................................... 7 (END OF SECTION)
DON'T KNOW ............................................... 9 (END OF SECTION)

RHQ.624 How old {were you/was SP} when {you/she} first started using creams, suppositories, or injections containing both estrogen and progestin?

|___|___|___|
ENTER AGE IN YEARS

REFUSED ..................................................... 777
DON'T KNOW ................................................. 999

RHQ.626 {Are you/Is SP} using creams, suppositories, or injections containing both estrogen and progestin now?

YES ............................................................... 1
NO ................................................................. 2
REFUSED ..................................................... 7
DON'T KNOW ................................................. 9
Not counting any time when {you/SP} stopped using them, for how long altogether {have you used/did you use/has she used/did she use} creams, suppositories, or injections containing both estrogen and progestin?

CODE "1" FOR LESS THAN 1 MONTH

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