

## 2003-04 Questionnaire

### DERMATOLOGY - DEQ\_C

DEQ.011 Next are some general questions about {your/SP's} skin and hair.

How many moles {do you/does SP} have that are at least 1/4 inch in diameter?

HAND CARD DEQ1

NONE .....	0
1 OR 2 .....	1
3 TO 5.....	2
6 TO 10.....	3
MORE THAN 10 .....	4
REFUSED .....	7
DON'T KNOW.....	9

DEQ.021 What {is/was} {your/SP's} natural hair color {at 18}?

CAPI INSTRUCTION:

DISPLAY {WAS} {YOUR} {at 18} IF SP AGE > 18.

DISPLAY {IS} {SP'S/YOUR} IF SP AGE IS <= 18.

RED .....	1
BLONDE .....	2
LIGHT BROWN .....	3
MEDIUM BROWN .....	4
DARK BROWN .....	5
BLACK.....	6
OTHER .....	7
REFUSED .....	77
DON'T KNOW.....	99

DEQ.031 If after several months of not being in the sun, {you/SP} **then** went out in the sun without sunscreen or protective clothing for **a half hour**, which one of these would happen to {your/his/her} skin?

HAND CARD DEQ2

- GET A SEVERE SUNBURN WITH  
BLISTERS ..... 1
- A SEVERE SUNBURN FOR A FEW DAYS  
WITH PEELING ..... 2
- MILDLY BURNED WITH SOME TANNING... 3
- TURNING DARKER WITHOUT A  
SUNBURN..... 4
- NOTHING WOULD HAPPEN IN HALF AN  
HOUR ..... 5
- OTHER ..... 6
- REFUSED ..... 7
- DON'T KNOW..... 9

DEQ.034 When you go outside on a very sunny day, for **more** than one hour, how often do you . . .

HAND CARD DEQ2A

a. Stay in the shade? Would you say . . .

- always,..... 1
- most of the time, ..... 2
- sometimes, ..... 3
- rarely, or ..... 4
- never?..... 5
- DON'T GO OUT IN THE SUN ..... 6 (DEQ.038)
- REFUSED ..... 7
- DON'T KNOW..... 9

b. Wear a hat that shades your face, ears **and** neck? Would you say . . .

- always,..... 1
- most of the time, ..... 2
- sometimes, ..... 3
- rarely, or ..... 4
- never?..... 5
- REFUSED ..... 7
- DON'T KNOW..... 9

CAPI INSTRUCTION:

INCLUDE THE FOLLOWING HELP SCREEN AT THIS SCREEN.

**HELP SCREEN:**

Include any wide-brimmed hat that shades your face, ears and neck from the sun. Do NOT include visors, baseball caps, or hats that do not shade the ears and neck.

c. Wear a long sleeved shirt? Would you say . . .

- always,..... 1
- most of the time, ..... 2
- sometimes, ..... 3
- rarely, or ..... 4
- never?..... 5
- REFUSED ..... 7
- DON'T KNOW..... 9

d. Use sunscreen? Would you say . . .

- always,..... 1
- most of the time, ..... 2
- sometimes, ..... 3
- rarely, or ..... 4
- never?..... 5 (DEQ.038)
- REFUSED ..... 7 (DEQ.038)
- DON'T KNOW..... 9 (DEQ.038)

DEQ.036 What is the SPF number of the sunscreen you use **most** often?

**READ IF NECESSARY:**

IF USE MORE THAN ONE OR DIFFERENT ONES, PICK THE ONE YOU USE MOST OFTEN.

|\_|\_|

ENTER NUMBER OF SPF

CAPI INSTRUCTION:

BUILD HARD EDITS AS 1-50.

INCLUDE THE FOLLOWING HELP SCREEN:

**HELP SCREEN:**

By SPF, we mean the "Sun Protection Factor"; the number on the label of the sunscreen that tells you how much protection against the sun it has.

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

DEQ.038 How many times in the **past year** have you had a sunburn?

|\_|\_|\_|

ENTER NUMBER OF TIMES

- NEVER ..... 000
- REFUSED ..... 777
- DON'T KNOW..... 999

CAPI INSTRUCTION:

BUILD HARD EDITS AS 1-365.

DEQ.041 {Have you/Has SP} **ever** been told by a doctor or other health professional that {you/s/he/SP} had melanoma?

- YES ..... 1
- NO ..... 2
- HAS SKIN CANCER BUT DOES NOT  
KNOW WHAT TYPE (CODE ONLY IF  
VOLUNTEERED)..... 3
- REFUSED ..... 7
- DON'T KNOW..... 9

DEQ.051 Have any of {your/SP's} **close blood relatives ever** been told by a doctor or other health professional that they had melanoma? By **close** blood relatives, we mean parents, grandparents, brothers, sisters, or children.

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

DEQ.053 {Have you/Has SP} ever been told by a health care provider that {you/he/she} had psoriasis (sore-eye-asis)?

- YES ..... 1
- NO ..... 2 (DEQ.061)
- REFUSED ..... 7 (DEQ.061)
- DON'T KNOW..... 9 (DEQ.061)

DEQ.055 On a scale of 1 to 10, how much of a problem has {your/his/her} psoriasis been in {your/his/her} everyday life, where 1 means no problem at all and 10 means a very large problem?

HAND CARD DEQ3

- ( )
- REFUSED ..... 7
- DON'T KNOW..... 9

CAPI INSTRUCTION:  
ONLY ALLOW ENTRY OF 1 THROUGH 10 (NO '0' ALLOWED).

DEQ.057 {Do you/SP} currently have . . .

HAND CARD DEQ4

- Little or no psoriasis, ..... 1
- Only a few patches (that could be covered by one or two palms of {your/his/her} hand), ..... 2
- Scattered patches (that could be covered between three and ten palms of {your/his/her} hand), or ..... 3
- Extensive psoriasis (covering large areas of the body, that would be more than ten palms of {your/his/her} hand)? ..... 4
- REFUSED ..... 7
- DON'T KNOW..... 9

DEQ.061 During the **past 12 months**, that is since {DISPLAY CURRENT MONTH} a year ago, {have you/has SP} had dermatitis, eczema, or any other type of red, inflamed skin rash?

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

DEQ.071 {Do you/Does SP} have this skin condition **today**?

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

DEQ.083 Please look at this card and tell me the parts of the body that {were/are} affected by this skin condition?  
**PROBE:** Any other parts?

CODE ALL THAT APPLY

HAND CARD DEQ5

- HANDS ..... 10
- ARMS ..... 11
- HEAD, FACE, OR NECK..... 12
- TORSO..... 13
- LEGS ..... 14
- SHOULDER..... 15
- GROIN..... 16
- BUTTOCKS ..... 17
- FEET ..... 18
- OTHER BODY AREA (SPECIFY) \_\_\_\_\_ 30
- REFUSED ..... 7
- DON'T KNOW..... 9