ARIC Data Book

Cohort, Exam 3

MRI Screening Form: FORM CODE=MSC VERSION=A

<u>Instructions:</u> This form should be completed during the participant's visit. Whenever numerical responses are required, enter the number so that the last digit appears in the rightmost box. Enter leading zeroes where necessary to fill all boxes.

ID		Aric Participant Id
N	Value	Description
2887	Present	Text suppressed

1	MSCA1	Have you ever had an MRI scan? Q1
N	Value	Description
1	U	
540	Υ	Yes
2337	N	No
9		Missing

MSCA2		Have you ever had surgery on an aneurysm in your brain? Q2
N	Value	Description
10	Υ	Yes [skip to Q7]
2872	N	No
2	U	Unknown
3		Missing

MSCA3		Do you have metal fragments in your eyes, brain, or spinal cord? Q3
N	Value	Description
65	Υ	Yes [skip to Q7]
2809	N	No
13		Missing

MSCA4		Do you have a cardiac pacemaker or a heart valve prosthesis? Q4
N	Value	Description
20	Υ	Yes [skip to Q7]
2789	N	No
78		Missing

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1	MSCA5	Do you have any internal electrical devices, such as a cochlear implant or spinal cord stimulator? Q5
N	Value	Description
4	Υ	Yes [skip to Q7]
2784	N	No
99		Missing

٨	MSCA6	[For females only] Could you be pregnant? Q6
N	Value	Description
1808	N	No
1079		Missing

٨	ASCA7	Does participant pass all MRI exclusion criteria? Q7
N	Value	Description
2781	Υ	Yes
103	N	No [skip to Q16]
3		Missing

MSCA8A		Have you ever had an injury that resulted in loss of consciousness (knocked out)? Q8a
N	Value	Description
334	Υ	Yes
2415	N	No [skip to Q9a.]
29	D	Don't Know [skip to Q9a.]
109		Missing

N	ISCA8B	How many times? Q8b
N	Value	Description
277	1	
38	2	
8	3	
2	4	
2	5	
1	7	
2559		Missing

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N	ISCA9A	Have you ever been in a coma? Q9a
N	Value	Description
52	Υ	Yes
2713	N	No [skip to Q10]
11	D	Don't Know [skip to Q10]
111		Missing

M	ISCA9B	What was the cause? Q9b
N	Value	Description
51	Present	Text suppressed
2836		Missing

MSCA10		Have youe ver been told you have cerebral palsy? Q10
N	Value	Description
2777	N	No
1	D	Don't Know
109		Missing

MSCA11		Have you ever been told you have a brain tumor? Q11
N	Value	Description
5	Υ	Yes
2772	N	No
1	D	Don't Know
109		Missing

MSCA12A		Have you ever had an operation on your brain? Q12a
N	Value	Description
11	Υ	Yes
2765	N	No [skip to Q13]
1	D	Don't Know [skip to Q13]
110		Missing

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MSCA12B		What for? Q12b
N	Value	Description
1	BLOOD CLOT	
2	BRAIN TUMOR	
1	INJURY	
1	SKULL FRACTURE	
1	TUMOR REMOVAL	
1	UNKNOWN	
2880		Missing

MSCA13A		Have you ever had a seizure or convulsion? Q13a
N	Value	Description
85	Υ	Yes
2687	N	No [skip to Q14]
6	D	Don't Know [skip to Q14]
109		Missing

MSCA13B		Was this only as a child? Q13b
N	Value	Description
22	Υ	Yes [skip to Q14]
61	N	No
1	D	Don't Know
2803		Missing

MSCA13C		Did this occur within the last 5 years? Q13c
N	Value	Description
20	Υ	Yes
40	N	No
2	D	Don't Know
2825		Missing

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MSCA14		Do you have loss of memory other than for people's names? Q14
N	Value	Description
249	Υ	Yes
2517	N	No
8	D	Don't Know
113		Missing

M	SCA15A	Does participant agree to MRI? Q15a
N	Value	Description
2105	Υ	Yes [skip to Q16]
650	N	No
132		Missing

MSCA15B		Would you please tell me why you don't want the MRI examination? Q15b
N	Value	Description
326	N	No time/interest [skip to Q16]
157	С	Claustrophobia [skip to Q16]
36	Р	Previous MRI [skip to Q16]
13	I	Illness [skip to Q16]
80	0	Other
2275		Missing

MSCA15C		If other, specify: Q15c
N	Value	Description
80	Present	Text suppressed
2807		Missing

MSCA16		Date Of Data Collection Q16
N	Value	Description
2879	Range	03/09/1993 - 03/31/1995
8		Missing

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MSCA17		Method Of Data Collection Q17
N	Value	Description
1091	С	Computer
1790	Р	Paper
6		Missing

MSCA18		Code # Of Person Completing Form Q18
N	Value	Description
2881	Present	Text suppressed
6		Missing

MSCACY		Contact Year
N	Value	Description
2887	7	

MSCAFLAG		Indicator For Presence Of Form
N	Value	Description
2887	1	