

# CLM-Maternal and Infant Health

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Start of Block: Screening

Q1

**Cannabis Legalization in Michigan-Maternal and Infant Health (CLM)**

Welcome .....

Click on the arrow below if you agree to take part in our study.

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Page Break

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Q2 Please enter your study ID.

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Page Break

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Q3 What is your age in **years**?

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*Skip To: End of Block If Condition: What is your age in years? Is Less Than 21. Skip To: End of Block.  
Skip To: End of Block If Condition: What is your age in years? Is Greater Than 35. Skip To: End of Block.*

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Q4 Are you currently pregnant?

- Yes (1)
- No (2)
- I do not know (3)
- I do not wish to answer this question (4)

**End of Block: Screening**

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**Start of Block: Baseline data**



Q5 I have some general questions about your health.  
Would you say your health **in general** is .....

- Excellent (1)
  - Very good (2)
  - Good (3)
  - Fair (4)
  - Poor (5)
  - I do not know (6)
  - I do not wish to answer this question (7)
- 



Q6 Moderate-intensity sports, fitness or recreational activities cause small increases in breathing or heart rate and is done for **at least 10 minutes** continuously.  
In a typical week, on how many days do you do moderate-intensity sports, fitness or recreational activities?

▼ 0 days (1) ... I do not wish to answer this question (10)

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Page Break



Q7 The next set of questions are about recent health during the **past 30 days**.

Thinking about your **physical health**, which includes physical illness and injury, for how many days during the past 30 days was your physical health **not good**?

▼ 0 days (1) ... I do not wish to answer this question (33)

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Q8 Now thinking about your **mental health**, which includes stress, depression, and problems with emotions, for how many days during the past 30 days was your mental health **not good**?

▼ 0 days (1) ... I do not wish to answer this question (33)

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Page Break



Q9 During the past 30 days, for about how many days did poor physical or mental health keep you from doing your usual activities, such as self-care, work, school or recreation?

▼ 0 days (1) ... I do not wish to answer this question (33)

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Q10 During the **past 30 days**, for about how many days have you **felt worried, tense, or anxious**?

▼ 0 days (1) ... I do not wish to answer this question (33)

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Page Break

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X→

Q11 Did you have a **head cold or chest cold** that started during the **past 30 days**?

- Yes (1)
- No (2)
- I do not know (3)
- I do not wish to answer this question (4)

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*Display This Question:*

*If Did you have a head cold or chest cold that started during the past 30 days? = Yes*

X→

Q12 During the **past 30 days**, for about how many **days** did you have a **head cold or chest cold**?

▼ 1 day (1) ... I do not wish to answer this question (32)

X→

Q13 Did you have **flu, pneumonia, or ear infections** that started during the **past 30 days**?

- Yes (1)
- No (2)
- I do not know (3)
- I do not wish to answer this question (4)

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*Display This Question:*

*If Did you have flu, pneumonia, or ear infections that started during the past 30 days? = Yes*

X→

Q14 During the **past 30 days**, for about how many **days** did you have flu, pneumonia, or ear infections?

▼ 1 day (1) ... I do not wish to answer this question (32)

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Page Break



Q15 Just **before you got pregnant**, about how much did you weigh?

- Weight in pounds (1) \_\_\_\_\_
  - Weight in Kilograms (2) \_\_\_\_\_
  - I do not know (3)
  - I do not wish to answer this question (4)
- 



Q16 How tall are you without shoes?

- Feet and inches (1) \_\_\_\_\_
  - Meters (2) \_\_\_\_\_
  - I do not know (3)
  - I do not wish to answer this question (4)
- 

Page Break \_\_\_\_\_

X→

Q17 Thinking back to just **before you got pregnant**, how did you feel about becoming pregnant?

- I wanted to be pregnant sooner (1)
  - I wanted to be pregnant later (2)
  - I wanted to be pregnant then (3)
  - I didn't want to be pregnant then or at any time in the future (4)
  - I wasn't sure what I wanted (5)
  - I do not wish to answer this question (6)
- 

X→

Q18 During the **30 days before you got pregnant**, how many times a week did you take a multivitamin, prenatal vitamin or a folic acid vitamin?

- I didn't take a multivitamin, prenatal vitamin, or folic acid vitamin at all (1)
  - 1 to 3 times a week (2)
  - 4 to 6 times a week (3)
  - Every day of the week (4)
  - I do not know (5)
  - I do not wish to answer this question (6)
- 

Page Break



Q19 How many **months** pregnant are you?

- 1 month (1)
  - 2 months (2)
  - 3 months (3)
  - 4 months (4)
  - 5 months (5)
  - 6 months (6)
  - 7 months (7)
  - 8 months (8)
  - 9 months (9)
  - I do not know (10)
  - I do not wish to answer this question (11)
- 



Q20 About how much do you weigh **now**?

- Weight in pounds (1) \_\_\_\_\_
  - Weight in Kilograms (2) \_\_\_\_\_
  - I do not know (3)
  - I do not wish to answer this question (4)
- 



Q21 During the **past 30 days**, how many times a week did you take a multivitamin, prenatal vitamin or a folic acid vitamin?

- I didn't take a multivitamin, prenatal vitamin, or folic acid vitamin at all (1)
- 1 to 3 times a week (2)
- 4 to 6 times a week (3)
- Every day of the week (4)
- I do not know (5)
- I do not wish to answer this question (6)

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Page Break



Q22 How many times have you been pregnant?

Be sure to **count all your pregnancies** including current pregnancy, live births, miscarriages, stillbirths, ectopic or tubal pregnancies, or abortions.

- 1 (1)
- 2 (2)
- 3 (3)
- 4 (4)
- 5 or more (5)
- I do not know (6)
- I do not wish to answer this question (7)

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*Display This Question:*

*If How many times have you been pregnant? Be sure to count all your pregnancies including current pr... != 1*



Q23 How many of your pregnancies resulted in a **live birth**?

- 0 (1)
- 1 (2)
- 2 (3)
- 3 (4)
- 4 (5)
- 5 or more (6)
- I do not know (7)
- I do not wish to answer this question (8)

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*Display This Question:*

*If How many of your pregnancies resulted in a live birth? != 0*

*And How many times have you been pregnant? Be sure to count all your pregnancies including current pr... != 1*



Q24 How many months ago did you have a baby?

- Less than 6 months ago (1)
- 6-12 months ago (2)
- 13-24 months ago (3)
- More than 24 months (4)
- I do not know (5)
- I do not wish to answer this question (6)

Display This Question:

If How many months ago did you have a baby? = Less than 6 months ago

Or How many months ago did you have a baby? = 6-12 months ago

Or How many months ago did you have a baby? = 13-24 months ago



Q25 Are you now breastfeeding a child?

- Yes (1)
- No (2)
- I do not wish to answer this question (3)

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Page Break

Display This Question:

If How many times have you been pregnant? Be sure to count all your pregnancies including current pr... != 1

And How many of your pregnancies resulted in a live birth? != 0



Q26 During your past pregnancy/pregnancies, did you give birth to twins/multiples?  
If so, how many times did you give birth to twins/multiples?

- No (1)
- Yes, I gave birth to 1 set of twins/multiples (2)

Display This Choice:

If How many times have you been pregnant? Be sure to count all your pregnancies including current pr... = 2

Or How many times have you been pregnant? Be sure to count all your pregnancies including current pr... = 3

Or How many times have you been pregnant? Be sure to count all your pregnancies including current pr... = 4

Or How many times have you been pregnant? Be sure to count all your pregnancies including current pr... = 5 or more

- Yes, I gave birth to 2 sets of twins/multiples (3)

Display This Choice:

If How many times have you been pregnant? Be sure to count all your pregnancies including current pr... = 3

Or How many times have you been pregnant? Be sure to count all your pregnancies including current pr... = 4

Or How many times have you been pregnant? Be sure to count all your pregnancies including current pr... = 5 or more

- Yes, I gave birth to 3 or more sets of twins/multiples (4)
- I do not know (5)
- I do not wish to answer this question (6)

Display This Question:

If How many times have you been pregnant? Be sure to count all your pregnancies including current pr... != 1



Q27 A miscarriage is the spontaneous loss of baby **before the 20th week** of pregnancy.

During your **past pregnancy/pregnancies**, did you have a **miscarriage(s)**? If so, how many miscarriages did you have?

- No (1)
- Yes, I had 1 miscarriage (2)
- Yes, I had 2 miscarriages (3)
- Yes, I had 3 or more miscarriages (4)
- I do not know (5)
- I do not wish to answer this question (6)

---

Display This Question:

If How many times have you been pregnant? Be sure to count all your pregnancies including current pr... != 1



Q28 A stillbirth is the delivery, **after the 20th week** of pregnancy, of a baby who has died.

During your **past pregnancy/pregnancies**, did you have a **stillbirth(s)**? If so, how many stillbirths did you have?

- No (1)
- Yes, I had 1 stillbirth (2)
- Yes, I had 2 stillbirths (3)
- Yes, I had 3 or more stillbirths (4)
- I do not know (5)
- I do not wish to answer this question (6)

---

*Display This Question:*

*If How many times have you been pregnant? Be sure to count all your pregnancies including current pr... != 1*



Q29 Ectopic pregnancy is when a fertilized egg grows outside the uterus. In more than 90% of cases, the egg implants in a Fallopian tube (tubal pregnancy).

During you **past pregnancy/pregnancies**, did you have an **ectopic pregnancy**? If so, how many ectopic pregnancies did you have?

- No (1)
  - Yes, I had 1 ectopic pregnancy (2)
  - Yes, I had 2 ectopic pregnancies (3)
  - Yes, I had 3 or more ectopic pregnancies (4)
  - I do not know (5)
  - I do not wish to answer this question (6)
-

Display This Question:

If How many times have you been pregnant? Be sure to count all your pregnancies including current pr... != 1



Q30 During your **past pregnancy/pregnancies**, did you have a **cesarean section (C-section)**? If so, how many C-sections did you have?

- No (1)
- Yes, I had 1 C-section (2)
- Yes, I had 2 C-sections (3)
- Yes, I had 3 or more C-sections (4)
- I do not know (5)
- I do not wish to answer this question (6)

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Page Break

Display This Question:

If How many times have you been pregnant? Be sure to count all your pregnancies including current pr... != 1

And How many of your pregnancies resulted in a live birth? != 0



Q31 How much did your last child weigh at birth?

Birth weight in pounds (1)

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Birth weight in kilograms (2)

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I do not know (3)

I do not wish to answer this question (4)

Display This Question:

If How many times have you been pregnant? Be sure to count all your pregnancies including current pr... != 1

And How many of your pregnancies resulted in a live birth? != 0



Q32 At how many weeks of gestation was your last child delivered?

Gestational age in weeks (1)

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I do not know (2)

I do not wish to answer this question (3)

Page Break

*Display This Question:*

*If How many times have you been pregnant? Be sure to count all your pregnancies including current pr... != 1*



**Q33 During your last pregnancy**, did you experience nausea and/or vomiting?

- Yes (1)
- No (2)
- I do not know (3)
- I do not wish to answer this question (4)

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*Display This Question:*

*If During your last pregnancy, did you experience nausea and/or vomiting? = Yes*



**Q34 Because of your nausea and/or vomiting during your last pregnancy**, have you ever been told by a doctor to take **prescribed medicine**?

- Yes (1)
- No (2)
- I do not know (3)
- I do not wish to answer this question (4)

---

*Display This Question:*

*If During your last pregnancy, did you experience nausea and/or vomiting? = Yes*



Q35 Did you experience weight loss as a result of your nausea and/or vomiting **during your last pregnancy?**

- Yes (1)
- No (2)
- I do not know (3)
- I do not wish to answer this question (4)

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Page Break



Q36 In the **past 30 days**, have you used or taken **medication for which a prescription is needed?**

If yes, please list the **prescription medications** you have used or taken in the past 30 days.

- Yes (1) \_\_\_\_\_
  - No (2)
  - I do not know (3)
  - I do not wish to answer this question (4)
- 



Q37 In the **past 30 days**, have you used or taken **over-the-counter medication, for which a prescription was NOT needed?**

If yes, please list the **over-the-counter medications** you have used or taken in the past 30 days.

- Yes (1) \_\_\_\_\_
  - No (2)
  - I do not know (3)
  - I do not wish to answer this question (4)
- 

Page Break \_\_\_\_\_

X→

Q38 These questions are about the use of tobacco products. The first questions are about cigarettes only.

Have you ever smoked part or all of a cigarette, even once?

- Yes (1)
- No (2)
- I do not know (3)
- I do not wish to answer this question (4)

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*Display This Question:*

*If These questions are about the use of tobacco products. The first questions are about cigarettes o... = Yes*

X→

Q39 How long has it been since you last smoked part or all of a cigarette?

- Within the past 30 days (1)
- More than 30 days ago but within the past 3 months (2)
- More than 3 months ago but within the past 6 months (3)
- More than 6 months ago but within the last 12 months (4)
- More than 12 months ago (5)
- I do not know (6)
- I do not wish to answer this question (7)

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*Display This Question:*

*If How long has it been since you last smoked part or all of a cigarette? = Within the past 30 days*

X→

Q40 During the past 30 days, on how many days did you **smoke part or all of a cigarette**?

▼ 1 day (1) ... I do not wish to answer this question (32)

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*Display This Question:*

*If During the past 30 days, on how many days did you smoke part or all of a cigarette? = I do not know*

*Or During the past 30 days, on how many days did you smoke part or all of a cigarette? = I do not wish to answer this question*



Q41 During the **past 30 days**, what is **your best estimate** of the number of **days you smoked part or all of a cigarette** ?

- 1 to 4 days (1)
- 5 to 10 days (2)
- 11 to 18 days (3)
- 19 to 29 days (4)
- All 30 days (5)
- I do not know (6)
- I do not wish to answer this question (7)

---

*Display This Question:*

*If How long has it been since you last smoked part or all of a cigarette? = Within the past 30 days*



Q42 On the days you **smoked cigarettes** during the **past 30 days**, **how many** cigarettes did you smoke **per day**, on average?

- Less than one cigarette per day (1)
- 1 cigarette per day (2)
- 2 to 5 cigarettes per day (3)
- 6 to 15 cigarettes per day (about 1/2 pack) (4)
- 16 to 25 cigarettes per day (about 1 pack) (5)
- 26 to 35 cigarettes per day (about 1 1/2 packs) (6)
- More than 35 cigarettes per day (about 2 packs or more) (7)
- I do not know (8)
- I do not wish to answer this question (9)

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Page Break

X→

Q43 The following questions ask about using **smokeless tobacco**, such as snuff, dip, chewing tobacco, or snus.

Have you ever used “smokeless” tobacco, even once?

- Yes (1)
- No (2)
- I do not know (3)
- I do not wish to answer this question (4)

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*Display This Question:*

*If The following questions ask about using smokeless tobacco, such as snuff, dip, chewing tobacco, o... = Yes*

X→

Q44 How long has it been since you last used “smokeless” tobacco?

- Within the past 30 days (1)
- More than 30 days ago but within the past 3 months (2)
- More than 3 months ago but within the past 6 months (3)
- More than 6 months ago but within the last 12 months (4)
- More than 12 months ago (5)
- I do not know (6)
- I do not wish to answer this question (7)

---

*Display This Question:*

*If How long has it been since you last used “smokeless” tobacco? = Within the past 30 days*

X→

Q45 During the past 30 days, on how many days did you use smokeless tobacco?

▼ 1 day (1) ... I do not wish to answer this question (32)

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Page Break



Q46 The following questions ask about smoking other tobacco products such as pipes, cigars, little cigars or cigarillos, water pipes, hookahs, or e-cigarettes? Have you **ever smoked other tobacco products**, even once?

- Yes (1)
- No (2)
- I do not know (3)
- I do not wish to answer this question (4)

---

*Display This Question:*

*If The following questions ask about smoking other tobacco products such as pipes, cigars, little ci...  
= Yes*



Q47 How long has it been since you **last smoked other tobacco products** such as pipes, cigars, little cigars or cigarillos, water pipes, hookahs, or e-cigarettes?

- Within the past 30 days (1)
  - More than 30 days ago but within the past 3 months (2)
  - More than 3 months ago but within the past 6 months (3)
  - More than 6 months ago but within the last 12 months (4)
  - More than 12 months ago (5)
  - I do not know (6)
  - I do not wish to answer this question (7)
-

Display This Question:

If How long has it been since you last smoked other tobacco products such as pipes, cigars, little c...  
= Within the past 30 days



Q48 During the past 30 days, on how many days did you **smoke** other tobacco products such as pipes, cigars, little cigars or cigarillos, water pipes, hookahs, or e-cigarettes?

▼ 1 day (1) ... I do not wish to answer this question (32)

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Page Break

X→

Q49 These questions are about drinks of alcoholic beverages. Throughout these questions, by a “drink,” we mean a can or bottle of beer, a glass of wine or a wine cooler, a shot of liquor, or a mixed drink with liquor in it. We are not asking about times when you only had a sip or two from a drink. Have you ever, even once, had a drink of any type of alcoholic beverage? Please do not include times when you only had a sip or two from a drink

- Yes (1)
- No (2)
- I do not know (3)
- I do not wish to answer this question (4)

---

*Display This Question:*

*If These questions are about drinks of alcoholic beverages. Throughout these questions, by a “drink,... = Yes*

X→

Q50 How long has it been since you **last had a drink** of any type of alcoholic beverage? Please do not include times when you only had a sip or two from a drink

- Within the past 30 days (1)
  - More than 30 days ago but within the past 3 months (2)
  - More than 3 months ago but within the past 6 months (3)
  - More than 6 months ago but within the last 12 months (4)
  - More than 12 months ago (5)
  - I do not know (6)
  - I do not wish to answer this question (7)
-

Display This Question:

If How long has it been since you last had a drink of any type of alcoholic beverage? Please do not...  
= Within the past 30 days



Q51 During the past 30 days, on how many days did you have a **drink** of any type of alcoholic beverage? Please do not include times when you only had a sip or two from a drink

▼ 1 day (1) ... I do not wish to answer this question (32)

Display This Question:

If During the past 30 days, on how many days did you have a drink of any type of alcoholic beverage?... = I do not know

Or During the past 30 days, on how many days did you have a drink of any type of alcoholic beverage?... = I do not wish to answer this question



Q52 During the **past 30 days**, what is your **best estimate** of the number of **days you had a drink** of any type of alcoholic beverage?

- 1 to 4 days (1)
- 5 to 10 days (2)
- 11 to 18 days (3)
- 19 to 29 days (4)
- All 30 days (5)
- I do not know (6)
- I do not wish to answer this question (7)

Display This Question:

If How long has it been since you last had a drink of any type of alcoholic beverage? Please do not...  
= Within the past 30 days



Q53 On the days that you drank during the **past 30 days**, have you had **MORE THAN ONE drink** of any type of alcoholic beverage?

- Yes (1)
- No (2)
- I do not know (3)
- I do not wish to answer this question (4)

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Page Break

X→

Q54 The next questions are about cannabis (**marijuana**). Marijuana is also called pot or grass. Marijuana is usually smoked, either in cigarettes, called joints, or in a pipe. It is sometimes cooked in food. Hashish is a form of marijuana that is also called “hash.” It is usually smoked in a pipe. Another form of hashish is hash oil.

Please **do not** include cannabidiol (CBD) products such as CBD Gummy Bears or CBD oil, or hemp oil.

Have you **ever**, even once, used **marijuana**?

- Yes (1)
- No (2)
- I do not know (3)
- I do not wish to answer this question (4)

---

*Display This Question:*

*If The next questions are about cannabis (marijuana). Marijuana is also called pot or grass. Marijua...  
!= Yes*

X→

Q55

The answers that people give us about their use of marijuana are **important** to this study's success. We know that this information is personal, but remember your answers will be kept **confidential**.

**Please think again** about answering this question: Have you **ever**, even once, used **marijuana**?

- Yes (1)
- No (2)
- I do not know (3)
- I do not wish to answer this question (4)

Display This Question:

If The next questions are about cannabis (marijuana). Marijuana is also called pot or grass. Marijua... = Yes

Or The answers that people give us about their use of marijuana are important to this study's succes... = Yes



Q56

How **long** has it been since you **last used marijuana**?

- Within the past 30 days (1)
- More than 30 days ago but within the past 3 months (2)
- More than 3 months ago but within the past 6 months (3)
- More than 6 months ago but within the last 12 months (4)
- More than 12 months ago (5)
- I do not know (6)
- I do not wish to answer this question (7)

Display This Question:

If How long has it been since you last used marijuana? = Within the past 30 days



Q57 During the **past 30 days**, on how many **days** have you used **marijuana** ?

▼ 1 day (1) ... I do not wish to answer this question (32)

Display This Question:

If During the past 30 days, on how many days have you used marijuana ? = I do not know

Or During the past 30 days, on how many days have you used marijuana ? = I do not wish to answer this question



Q58 During the **past 30 days**, what is your **best estimate** of the number of **days you used marijuana**?

- 1 to 3 days (1)
- 4 to 10 days (2)
- 11 to 18 days (3)
- 19 to 29 days (4)
- All 30 days (5)
- I do not know (6)
- I do not wish to answer this question (7)

---

*Display This Question:*

*If How long has it been since you last used marijuana? = Within the past 30 days*



Q59 During the days that you used **marijuana** in the past 30 days, **how many** would you usually use **in a day**?

- 1 per day (1)
- 2 per day (2)
- 3-5 per day (3)
- 6 or more per day (4)
- I do not know (5)
- I do not wish to answer this question (6)

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Page Break

*Display This Question:*

*If The next questions are about cannabis (marijuana). Marijuana is also called pot or grass. Marijua... = Yes*

*Or The answers that people give us about their use of marijuana are important to this study's succes... = Yes*



Q60 How **old** were you the **first time** you used **marijuana**?

- Age in years (1) \_\_\_\_\_
- I do not know (2)
- I do not wish to answer this question (3)

---

*Display This Question:*

*If How long has it been since you last used marijuana? = Within the past 30 days*



Q61

Was any of your **marijuana** use in the **past 30 days** recommended by a doctor or other health care professional?

- Yes (1)
- No (2)
- I do not know (3)
- I do not wish to answer this question (4)

---

*Display This Question:*

*If How long has it been since you last used marijuana? = Within the past 30 days*



Q62 During the **past 30 days**, how did you use **marijuana**? Select all that apply.

- Smoked a cigar with marijuana in it, such as a blunt (1)
- Smoke it (such as a joint, bong, or pipe) (2)
- Eat it (such as in brownies, cakes, cookies, or candy) (3)
- Drink it (such as in tea, cola, or alcohol) (4)
- Vaporize it (such as using a vape pen or e-cigarette-like vaporizer) (5)
- Dab it (such as using butane hash oil, wax, or concentrates) (6)
- Used it in some other way. Please specify. (7)

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- I do not know (8)
- I do not wish to answer this question (9)

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Page Break

*Display This Question:*

*If The next questions are about cannabis (marijuana). Marijuana is also called pot or grass. Marijua... = Yes*

*Or The answers that people give us about their use of marijuana are important to this study's succes... = Yes*

Q63 In the 3 months before you were pregnant, were you using marijuana for any reason?

- Yes (1)
- No (2)
- I do not know (3)
- I do not wish to answer this question (4)

*Display This Question:*

*If In the 3 months before you were pregnant, were you using marijuana for any reason? = Yes*

Q64 You've indicated that you used marijuana in the 3 months before you were pregnant. Was any of your marijuana use recommended by a doctor or health care professional?

- Yes (1)
- No (2)
- I do not know (3)
- I do not wish to answer this question (4)

*Display This Question:*

*If How many times have you been pregnant? Be sure to count all your pregnancies including current pr... != 1*

*And The next questions are about cannabis (marijuana). Marijuana is also called pot or grass. Marijua... = Yes*

*Or The answers that people give us about their use of marijuana are important to this study's succes... = Yes*



Q66 During your last pregnancy, did you use marijuana?

- Yes (1)
- No (2)
- I do not know (3)
- I do not wish to answer this question (4)

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*Display This Question:*

*If During your last pregnancy, did you use marijuana? = Yes*



Q67 During your last pregnancy, did you use marijuana during the first trimester?

- Yes (1)
- No (2)
- I do not know (3)
- I do not wish to answer (4)

---

*Display This Question:*

*If During your last pregnancy, did you use marijuana? = Yes*



Q68 During your last pregnancy, did you use marijuana during the second trimester?

- Yes (1)
  - No (2)
  - I do not know (3)
  - I do not wish to answer (4)
-

Display This Question:

*If During your last pregnancy, did you use marijuana? = Yes*



Q69 During your last pregnancy, did you use marijuana during the third trimester?

- Yes (1)
- No (2)
- I do not know (3)
- I do not wish to answer (4)

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Page Break

X→

Q70

The next questions are about **cannabidiol (CBD)** products such as **CBD Gummy Bears** or **CBD oil**.

Have you **ever**, even once, used **CBD** products?

- Yes (1)
- No (2)
- I do not know (3)
- I do not wish to answer this question (4)

---

*Display This Question:*

*If The next questions are about cannabidiol (CBD) products such as CBD Gummy Bears or CBD oil. Hav... = Yes*

X→

Q71 How old were you the first time you used **CBD products**?

- Age in years (1) \_\_\_\_\_
- I do not know (2)
- I do not want to answer this question (3)

---

*Display This Question:*

*If The next questions are about cannabidiol (CBD) products such as CBD Gummy Bears or CBD oil. Hav... = Yes*

X→

Q72

How long has it been since you last used CBD products?

- Within the past 30 days (1)
- More than 30 days ago but within the past 3 months (2)
- More than 3 months ago but within the past 6 months (3)
- More than 6 months ago but within the last 12 months (4)
- More than 12 months ago (5)
- I do not know (6)
- I do not wish to answer this question (7)

---

*Display This Question:*

*If How long has it been since you last used CBD products? = Within the past 30 days*



Q73 During the past 30 days, on **how many days** did you use **CBD products**?

▼ 1 day (1) ... I do not wish to answer this question (32)

---

Page Break

X→

Q74 Have you ever used **cocaine or crack cocaine**?

- Yes (1)
- No (2)
- I do not know (3)
- I do not wish to answer this question (4)

---

*Display This Question:*

*If Have you ever used cocaine or crack cocaine? = Yes*

X→

Q75 How long has it been since you last used cocaine or crack cocaine?

- Within the past 30 days (1)
- More than 30 days ago but within the past 3 months (2)
- More than 3 months ago but within the past 6 months (3)
- More than 6 months ago but within the last 12 months (4)
- More than 12 months ago (5)
- I do not know (6)
- I do not wish to answer this question (7)

---

*Display This Question:*

*If How long has it been since you last used cocaine or crack cocaine? = Within the past 30 days*

X→

Q76 During the **past 30 days**, on how many **days** have you used **cocaine or crack cocaine**?

▼ 1 day (1) ... I do not wish to answer this question (32)

---

Page Break

X→

Q77 Have you ever used **heroin**?

- Yes (1)
- No (2)
- I do not know (3)
- I do not wish to answer this question (4)

---

*Display This Question:*

*If Have you ever used heroin? = Yes*

X→

Q78 How long has it been since you last used heroin?

- Within the past 30 days (1)
- More than 30 days ago but within the past 3 months (2)
- More than 3 months ago but within the past 6 months (3)
- More than 6 months ago but within the last 12 months (4)
- More than 12 months ago (5)
- I do not know (6)
- I do not wish to answer this question (7)

---

*Display This Question:*

*If How long has it been since you last used heroin? = Within the past 30 days*

X→

Q79 During the **past 30 days**, on how many **days** have you used **heroin**?

▼ 1 day (1) ... I do not wish to answer this question (32)

---

Page Break

X→

Q80 Have you ever used **methadone or buprenorphine** ?

- Yes (1)
- No (2)
- I do not know (3)
- I do not wish to answer this question (4)

---

*Display This Question:*

*If Have you ever used methadone or buprenorphine ? = Yes*

X→

Q81 How long has it been since you last used **methadone or buprenorphine** ?

- Within the past 30 days (1)
- More than 30 days ago but within the past 3 months (2)
- More than 3 months ago but within the past 6 months (3)
- More than 6 months ago but within the last 12 months (4)
- More than 12 months ago (5)
- I do not know (6)
- I do not wish to answer this question (7)

---

*Display This Question:*

*If How long has it been since you last used methadone or buprenorphine ? = Within the past 30 days*

X→

Q82 During the **past 30 days**, on how many **days** have you used **methadone or buprenorphine** ?

▼ 1 day (1) ... I do not wish to answer this question (32)

---

Page Break

X→

Q83 Have you ever used **methamphetamine**?

- Yes (1)
- No (2)
- I do not know (3)
- I do not wish to answer this question (4)

---

*Display This Question:*

*If Have you ever used methamphetamine? = Yes*

X→

Q84 How long has it been since you **last used methamphetamine**?

- Within the past 30 days (1)
- More than 30 days ago but within the past 3 months (2)
- More than 3 months ago but within the past 6 months (3)
- More than 6 months ago but within the last 12 months (4)
- More than 12 months ago (5)
- I do not know (6)
- I do not wish to answer this question (7)

---

*Display This Question:*

*If How long has it been since you last used methamphetamine? = Within the past 30 days*

X→

Q85 During the **past 30 days**, on how many **days** have you used **methamphetamine**?

▼ 1 day (1) ... I do not wish to answer this question (32)

---

Page Break

X→

Q86 Have you ever used **benzodiazepines**?

- Yes (1)
- No (2)
- I do not know (3)
- I do not wish to answer this question (4)

---

*Display This Question:*

*If Have you ever used benzodiazepines? = Yes*

X→

Q87 How long has it been since you **last used benzodiazepines**?

- Within the past 30 days (1)
- More than 30 days ago but within the past 3 months (2)
- More than 3 months ago but within the past 6 months (3)
- More than 6 months ago but within the last 12 months (4)
- More than 12 months ago (5)
- I do not know (6)
- I do not wish to answer this question (7)

---

*Display This Question:*

*If How long has it been since you last used benzodiazepines? = Within the past 30 days*

X→

Q88 During the **past 30 days**, on how many **days** have you used **benzodiazepines**?

▼ 1 day (1) ... I do not wish to answer this question (32)

---

Page Break

X→

Q89

These next questions are about any use of **prescription pain relievers**. Please **do not include** “over-the-counter” pain relievers such as aspirin, Tylenol, Advil, or Aleve..

Have you ever, even once, used **any** prescription pain reliever **in any way a doctor did not direct you to use it?**

This includes using it without a prescription of your own, using it in greater amounts, more often, or longer than you were told to take it or using it in any other way a doctor did not direct you to use it such as to feel good or get high?

- Yes (1)
- No (2)
- I do not know (3)
- I do not wish to answer this question (4)

---

*Display This Question:*

*If These next questions are about any use of prescription pain relievers. Please do not include “ove...  
= Yes*

X→

Q90 How long has it been since you last used **any prescription pain reliever** in any way a doctor did not direct you to use it?

- Within the past 30 days (1)
- More than 30 days ago but within the past 3 months (2)
- More than 3 months ago but within the past 6 months (3)
- More than 6 months ago but within the last 12 months (4)
- More than 12 months ago (5)
- I do not know (6)
- I do not wish to answer this question (7)

---

*Display This Question:*

*If How long has it been since you last used any prescription pain reliever in any way a doctor did n...  
= Within the past 30 days*



Q91 During the **past 30 days**, on how many **days** have you used any prescription pain reliever in any way a doctor did not direct you to use it?

▼ 1 day (1) ... I do not wish to answer this question (32)

---

Page Break



Q92 Are you of Hispanic, Latino, or Spanish origin or descent?

- Yes (1)
  - No (2)
  - I do not wish to answer this question (3)
- 



Q93 Which of these groups describes you? You can select more than one group.

- White (1)
  - Black or African American (2)
  - American Indian or Alaska Native (3)
  - Asian (4)
  - Native Hawaiian or Pacific Islander (5)
  - Other (Please specify) (6)
- 
- I do not wish to answer this question (7)
- 

Page Break

X→

Q94

What is the highest grade of school you have **completed**?

- Less than high school, no diploma (1)
  - High school graduate (high school diploma or equivalent including GED) (2)
  - Some college credit but no degree (3)
  - Associate degree (for example AA or AS) (4)
  - Bachelor's degree (for example BA or BS) (5)
  - Graduate or professional degree beyond Bachelor's degree (For example Master's degree, doctorate degree, PhD, MD, JD, PharmD, DVM, DDS) (6)
  - I do not wish to answer this question (7)
- 

X→

Q95 Information about income is **important** for the study. Please indicate the answer that includes your entire household income in (previous year) before taxes.

- Less than \$25,000 (1)
  - \$25,000 to \$49,999 (2)
  - \$50,000 to \$74,999 (3)
  - \$75,000 to \$99,999 (4)
  - \$100,000 to \$149,999 (5)
  - \$150,000 or more (6)
  - I do not wish to answer this question (7)
-



Q96 Are you covered by.....?

- Health insurance obtained through employment (1)
- Health insurance purchased directly (2)
- Government programs like Medicaid that help pay my medical bills (3)
- I am not covered by health insurance (4)
- I do not know (5)
- I do not wish to answer this question (6)

---

Page Break



Q97 Are you **now**.....?

- Married (1)
  - Widowed (2)
  - Divorced (3)
  - Separated (4)
  - Never married (5)
  - Other (please specify) (6)
- 

I do not wish to answer this question (7)



Q98 Altogether, how many people live **now** in your household, including yourself?

- 1 (1)
- 2 (2)
- 3 (3)
- 4 (4)
- 5 (5)
- 6 (6)
- 7 (7)
- 8 (8)
- 9 (9)
- 10 or more (10)
- I do not wish to answer this question (11)

---

Page Break

*Display This Question:*

*If Altogether, how many people live now in your household, including yourself? != 1*



Q99

How many **children under the age of 18** live in your household?

- 0 (1)
- 1 (2)
- 2 (3)
- 3 (4)
- 4 (5)
- 5 or more (6)
- I do not know (7)
- I do not wish to answer this question (8)

---

*Display This Question:*

*If How many children under the age of 18 live in your household? != 0*

*And Altogether, how many people live now in your household, including yourself? != 1*



Q100

How many **children under the age of 6** live in your household?

- 0 (1)
- 1 (2)
- 2 (3)
- 3 (4)
- 4 (5)
- 5 or more (6)
- I do not know (7)
- I do not wish to answer this question (8)

---

*Display This Question:*

*If How many children under the age of 6 live in your household? != 0*

*And How many children under the age of 18 live in your household? != 0*

*And Altogether, how many people live now in your household, including yourself? != 1*

X→

Q101

How many **children under the age of 2** live in your household?

- 0 (1)
- 1 (2)
- 2 (3)
- 3 (4)
- 4 (5)
- 5 or more (6)
- I do not know (7)
- I do not wish to answer this question (8)

---

Page Break

X→

Q102

We are interested in your opinion about the effects of using **marijuana**.

How much do women risk harming themselves physically and in other ways when they use marijuana once a month, **regardless of whether or not pregnant?**

- No risk (1)
  - Slight risk (2)
  - Moderate risk (3)
  - Great risk (4)
  - I do not know (5)
  - I do not wish to answer this question (6)
- 

X→

Q103

How much do women risk harming themselves physically and in other ways when they use marijuana once or twice a week, **regardless of whether or not pregnant?**

- No risk (1)
  - Slight risk (2)
  - Moderate risk (3)
  - Great risk (4)
  - I do not know (5)
  - I do not wish to answer this question (6)
- 

Page Break

X→

Q104 How much do **pregnant women** risk harming **themselves** physically and in other ways when they use marijuana once a month?

- No risk (1)
  - Slight risk (2)
  - Moderate risk (3)
  - Great risk (4)
  - I do not know (5)
  - I do not wish to answer this question (6)
- 

X→

Q105 How much do **pregnant women** risk harming **themselves** physically and in other ways when they use marijuana once or twice a week?

- No risk (1)
  - Slight risk (2)
  - Moderate risk (3)
  - Great risk (4)
  - I do not know (5)
  - I do not wish to answer this question (6)
- 

Page Break

X→

Q106 Can marijuana use once a month during pregnancy **harm the baby**?

- No risk (1)
  - Slight risk (2)
  - Moderate risk (3)
  - Great risk (4)
  - I do not know (5)
  - I do not wish to answer this question (6)
- 

X→

Q107 Can marijuana use once or twice a week during pregnancy **harm the baby**?

- No risk (1)
  - Slight risk (2)
  - Moderate risk (3)
  - Great risk (4)
  - I do not know (5)
  - I do not wish to answer this question (6)
- 

X→

Q108 Can marijuana use while breastfeeding harm the baby?

- No risk (1)
- Slight risk (2)
- Moderate risk (3)
- Great risk (4)
- I do not know (5)
- I do not wish to answer this question (6)

End of Block: Baseline data

---

Start of Block: Morning sickness



Q109 During your current pregnancy, have you experienced nausea?

- Yes (1)
- No (2)
- I do not know (3)
- I do not wish to answer this question (4)

*Skip To: Q110 If During your current pregnancy, have you experienced nausea? = Yes*

*Skip To: Q112 If During your current pregnancy, have you experienced nausea? = No*

*Skip To: Q112 If During your current pregnancy, have you experienced nausea? = I do not know*

*Skip To: Q112 If During your current pregnancy, have you experienced nausea? = I do not wish to answer this question*



Q110 On average, in a day, for how long do you feel nauseated or sick to your stomach?

- Not at all (1)
- Less than 1 hour (2)
- 2 to 3 hours (3)
- 4 to 5 hours (4)
- 6 or more hours (5)
- I do not know (6)
- I do not wish to answer this question (7)

---

*Display This Question:*

*If During your current pregnancy, have you experienced nausea? = Yes*



Q111 Because of your nausea, have you ever been told by a doctor to take **prescribed medicine**?

- Yes (1)
- No (2)
- I do not know (3)
- I do not wish to answer this question (4)

---

Page Break



Q112 During your current pregnancy, have you experienced vomiting?

- Yes (1)
- No (2)
- I do not know (3)
- I do not wish to answer this question (4)

---

*Display This Question:*

*If During your current pregnancy, have you experienced vomiting? = Yes*



Q113 On average, in a day, how many times do you vomit or throw up?

- None (1)
- 1 to 2 times (2)
- 3 to 4 times (3)
- 5 to 6 times (4)
- 7 or more times (5)
- I do not know (6)
- I do not wish to answer this question (7)

---

*Display This Question:*

*If During your current pregnancy, have you experienced vomiting? = Yes*



Q114 Because of your vomiting, have you ever been told by a doctor to take **prescribed medicine**?

- Yes (1)
  - No (2)
  - I do not know (3)
  - I do not wish to answer this question (4)
- 

Q115 During your current pregnancy, have you experienced retching or dry heaves without bringing anything up?

- Yes (1)
  - No (2)
  - I do not know (3)
  - I do not wish to answer this question (4)
- 

*Display This Question:*

*If During your current pregnancy, have you experienced retching or dry heaves without bringing anyth... = Yes*

X→

Q116 On average, in a day, how many times do you have retching or dry heaves without bringing anything up?

- None (1)
- 1 to 2 times (2)
- 3 to 4 times (3)
- 5 to 6 times (4)
- 7 or more times (5)
- I do not know (6)
- I do not wish to answer this question (7)

---

*Display This Question:*

*If During your current pregnancy, have you experienced retching or dry heaves without bringing anyth... = Yes*

Q117 Because of your retching or dry heaves, have you ever been told by a doctor to take prescribed medicine?

- Yes (1)
- No (2)
- I do not know (3)
- I do not wish to answer this question (4)

End of Block: Morning sickness

---

Start of Block: Cannabis use during current pregnancy



Q118 What is the date of the first day of your last menstrual period?

mm/dd/yyyy (1) \_\_\_\_\_

I do not know (2)

I do not wish to answer this question (3)

---

Page Break

Display This Question:

If The next questions are about cannabis (marijuana). Marijuana is also called pot or grass. Marijua... = Yes

Or The answers that people give us about their use of marijuana are important to this study's succes... = Yes



Q119 During your current pregnancy, did you use marijuana to relieve stress or anxiety?

- Yes (1)
- No (2)
- I do not know (3)
- I do not wish to answer this question (4)

---

Display This Question:

If The answers that people give us about their use of marijuana are important to this study's succes... = Yes

Or The next questions are about cannabis (marijuana). Marijuana is also called pot or grass. Marijua... = Yes



Q120 During your current pregnancy, did you use marijuana to relieve symptoms of a chronic condition?

- Yes (1)
  - No (2)
  - I do not know (3)
  - I do not wish to answer this question (4)
-

Display This Question:

If The next questions are about cannabis (marijuana). Marijuana is also called pot or grass. Marijua... = Yes

Or The answers that people give us about their use of marijuana are important to this study's succes... = Yes



Q121 During your current pregnancy, did you use marijuana to relieve pain?

- Yes (1)
  - No (2)
  - I do not know (3)
  - I do not wish to answer this question (4)
- 

Display This Question:

If The next questions are about cannabis (marijuana). Marijuana is also called pot or grass. Marijua... = Yes

Or The answers that people give us about their use of marijuana are important to this study's succes... = Yes



Q122 During your current pregnancy, did you use marijuana for fun or to relax?

- Yes (1)
  - No (2)
  - I do not know (3)
  - I do not wish to answer this question (4)
-

Display This Question:

If The next questions are about cannabis (marijuana). Marijuana is also called pot or grass. Marijua... = Yes

Or The answers that people give us about their use of marijuana are important to this study's succes... = Yes



Q123 Is there another reason you used marijuana?

- Yes. Please specify (1) \_\_\_\_\_
- No (2)
- I do not know (3)
- I do not wish to answer this question (4)

End of Block: Cannabis use during current pregnancy

---

Start of Block: Tobacco

Display This Question:

If These questions are about the use of tobacco products. The first questions are about cigarettes o... = Yes



Q124 How **old** were you the **first time** you **smoked** part or all of a **cigarette**?

- Age in years (1) \_\_\_\_\_
- I do not know (2)
- I do not wish to answer this question (3)

---

Display This Question:

If The following questions ask about using smokeless tobacco, such as snuff, dip, chewing tobacco, o... = Yes



Q125 How **old** were you the **first time** you used “**smokeless**” tobacco?

- Age in years (1) \_\_\_\_\_
- I do not know (2)
- I do not wish to answer this question (3)

---

*Display This Question:*

*If The following questions ask about smoking other tobacco products such as pipes, cigars, little ci...  
= Yes*



Q126 Have you **ever smoked** ..... **even once**? Check all that apply.

- Cigars (1)
  - Pipes (2)
  - Little cigars (3)
  - Cigarillos (4)
  - Water pipes/Hookah (5)
  - E-cigarettes (6)
  - Other. Please specify (7)
- 
- I have never smoked any of these tobacco products (8)
  - I do not know (9)
  - I do not wish to answer this question (10)

Display This Question:

If Have you ever smoked ..... even once? Check all that apply. = Cigars



Q127 How **old** were you the **first time** you **smoked** part or all of any type of **cigar**?

- Age in years (1) \_\_\_\_\_
- I do not know (2)
- I do not wish to answer this question (3)

Display This Question:

If Have you ever smoked ..... even once? Check all that apply. = Pipes



Q128 How **old** were you the **first time** you smoked tobacco in a pipe, even once?

- Age in years (1) \_\_\_\_\_
- I do not know (2)
- I do not wish to answer this question (3)

Display This Question:

If Have you ever smoked ..... even once? Check all that apply. = Little cigars



Q129 How **old** were you the **first time** you smoked part or all of any type of **little cigars**, even once?

- Age in years (1) \_\_\_\_\_
- I do not know (2)
- I do not wish to answer this question (3)

*Display This Question:*  
*If Have you ever smoked ..... even once? Check all that apply. = Cigarillos*



Q130 How **old** were you the **first time** you smoked part or all of any type of **cigarillos**, even once?

- Age in years (1) \_\_\_\_\_
- I do not know (2)
- I do not wish to answer this question (3)

*Display This Question:*  
*If Have you ever smoked ..... even once? Check all that apply. = E-cigarettes*



Q131 How **old** were you the **first time** you smoked **E-cigarettes**, even once?

- Age in years (1) \_\_\_\_\_
- I do not know (2)
- I do not wish to answer this question (3)

*Display This Question:*  
*If Have you ever smoked ..... even once? Check all that apply. = Other. Please specify*



Q132 How **old** were you the **first time** you smoked **other tobacco products**, even once?

- Age in years (1) \_\_\_\_\_
- I do not know (2)
- I do not wish to answer this question (3)

**End of Block: Tobacco**

---

Start of Block: Medical questions



Q133

Below is a list of health conditions that you may have had during your **lifetime**.

Please read the list and choose **all of the conditions** that a **physician or other health care professional** has ever told you that you had:

- Arthritis (1)
  - Cancer/malignancy (2)
  - Diabetes mellitus (3)
  - Heart condition (4)
  - High blood cholesterol (5)
  - Kidney condition (6)
  - HIV/AIDS (7)
  - Liver condition (8)
  - Lung disease (9)
  - Stroke (10)
  - Other. Please specify (11)
- 
- Never had any condition (12)
  - I do not know (13)
  - I do not wish to answer this question (14)

-----  
*Display This Question:*

*If Below is a list of health conditions that you may have had during your lifetime. Please read the... = Lung disease*



Q134

You have indicated that a physician or healthcare professional has told you that you have/had a **lung disease**. What **kind** of lung disease was it?

- Asthma (1)
  - Chronic bronchitis (2)
  - Emphysema (3)
  - Lung cancer (4)
  - Other. Please specify (5)
- 
- I do not know (6)
  - I do not wish to answer this question (7)

-----  
*Display This Question:*

*If Below is a list of health conditions that you may have had during your lifetime. Please read the... = Diabetes mellitus*



Q135 You have indicated that a physician or healthcare professional has told you that you have/had **diabetes mellitus**. What **type** of diabetes was it?

- Prediabetes (1)
  - Type 1 diabetes mellitus (2)
  - Type 2 diabetes mellitus (3)
  - Gestational or pregnancy diabetes (4)
  - Other. Please specify (5)
- 

- I do not know (6)
- I do not wish to answer this question (7)

*Display This Question:*

*If You have indicated that a physician or healthcare professional has told you that you have/had dia...  
= Prediabetes*



Q136 How **old** were you when **prediabetes** was **first diagnosed**?

- Age in years (1) \_\_\_\_\_
- I do not know (2)
- I do not wish to answer this question (3)

*Display This Question:*

*If You have indicated that a physician or healthcare professional has told you that you have/had dia...  
= Type 1 diabetes mellitus*



Q137 How **old** were you when **type 1** diabetes was **first diagnosed**?

- Age in years (1) \_\_\_\_\_
  - I do not know (2)
  - I do not wish to answer this question (3)
- 

*Display This Question:*

*If You have indicated that a physician or healthcare professional has told you that you have/had dia...  
= Type 2 diabetes mellitus*



Q138 How **old** were you when **type 2** diabetes was **first diagnosed**?

- Age in years (1) \_\_\_\_\_
  - I do not know (2)
  - I do not wish to answer this question (3)
- 

*Display This Question:*

*If You have indicated that a physician or healthcare professional has told you that you have/had dia...  
= Gestational or pregnancy diabetes*



Q139 How **old** were you when **gestational/pregnancy diabetes** was **first diagnosed**?

- Age in years (1) \_\_\_\_\_
  - I do not know (2)
  - I do not wish to answer this question (3)
-

Display This Question:

If You have indicated that a physician or healthcare professional has told you that you have/had dia... = Other. Please specify



Q140 How **old** were you when **diabetes** was **first diagnosed**?

- Age in years (1) \_\_\_\_\_
- I do not know (2)
- I do not wish to answer this question (3)

Display This Question:

If Below is a list of health conditions that you may have had during your lifetime. Please read the... = Diabetes mellitus



Q141 Are you now taking **insulin**?

- Yes (1)
- No (2)
- I do not wish to answer this question (3)

Display This Question:

If Below is a list of health conditions that you may have had during your lifetime. Please read the... = Diabetes mellitus



Q142 Are you now taking diabetic pills to lower your blood sugar? These are sometimes called oral agents or oral hypoglycemic agents.

- Yes (1)
- No (2)
- I do not wish to answer this question (3)

-----  
**Display This Question:**

*If Below is a list of health conditions that you may have had during your lifetime. Please read the... = Heart condition*



Q143 You have indicated that a physician or healthcare professional has told you that you have/had **heart condition**. What **type** of heart condition was it?

- Angina/angina pectoris (1)
  - Congestive heart disease (2)
  - Coronary heart disease (3)
  - Myocardial infarction/heart attack (4)
  - Other. Please specify (5)
- 
- I do not know (6)
  - I do not wish to answer this question (7)



Q144 **During your current or past pregnancies**, have you ever been told by a physician or healthcare professional that you have/had high blood pressure or preeclampsia?

- Yes (1)
  - No (2)
  - I do not know (3)
  - I do not wish to answer this question (4)
-

Display This Question:

If During your current or past pregnancies, have you ever been told by a physician or healthcare pro... = Yes



**Q145 During your current or past pregnancies, were you prescribed medicine for high blood pressure or preeclampsia?**

- Yes (1)
- No (2)
- I do not know (3)
- I do not wish to answer this question (4)

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Page Break



Q146 **Other than during pregnancy**, have you ever been told by a physician or healthcare professional that you have/had high blood pressure or hypertension?

- Yes (1)
  - No (2)
  - I do not know (3)
  - I do not wish to answer this question (4)
- 

*Display This Question:*

*If Other than during pregnancy, have you ever been told by a physician or healthcare professional th... = Yes*



Q147 Are you now taking **prescribed** medicine for **high blood pressure or hypertension**?

- Yes (1)
  - No (2)
  - I do not know (3)
  - I do not wish to answer this question (4)
- 

Page Break

Display This Question:

If Below is a list of health conditions that you may have had during your lifetime. Please read the... = High blood cholesterol



Q148 Are you now taking **prescribed** medicine to lower your blood cholesterol?

- Yes (1)
- No (2)
- I do not know (3)
- I do not wish to answer this question (4)

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Display This Question:

If Below is a list of health conditions that you may have had during your lifetime. Please read the... = HIV/AIDS



Q149 You have indicated that a physician or healthcare professional has told you that you have/had **liver condition**. What **kind** of liver condition was it?

- Hepatitis A (1)
  - Hepatitis B (2)
  - Hepatitis C (3)
  - Fatty liver disease (4)
  - Cirrhosis (5)
  - Liver cancer (6)
  - Other. Please specify (7)
- 

I do not know (8)

I do not wish to answer this question (9)

---

*Display This Question:*

*If Below is a list of health conditions that you may have had during your lifetime. Please read the... =  
Cancer/malignancy*



Q150 You have indicated that a physician or healthcare professional has told you that you have/had **cancer**. What **kind** of cancer was it?

- Blood (1)
- Bone (2)
- Brain (3)
- Breast (4)
- Cervix (cervical) (5)
- Colon (6)
- Esophagus (esophageal) (7)
- Gallbladder (8)
- Kidney (9)
- Larynx/ windpipe (10)
- Leukemia (11)
- Lymphoma/Hodgkin's disease (12)
- Melanoma (13)
- Ovary (ovarian) (14)
- Pancreas (pancreatic) (15)
- Rectum (rectal) (16)
- Skin (non-melanoma) (17)

- Stomach (18)
  - Thyroid (19)
  - Uterus (uterine) (20)
  - Other. Please specify (21)
- 

- I do not know (22)
- I do not wish to answer this question (23)

**End of Block: Medical questions**

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