
FORM:	38 - DAILY LIFE
Version:	6 – February 15, 1998
Description:	Self-administered; 12-page booklet; data entered at Clinical Center (CC).
When Used:	Collected at one year annual visit, and in subsample of selected annual visits.
Purpose:	To measure the quality of participants' lives after randomization including physical, social, and emotional well-being.

GENERAL INSTRUCTIONS

1. The form is printed in both English (*Form 38*) and Spanish (*Form 38S*). The English version is in mark-sense format and the Spanish version is in a key-enter format. (Note: Ver. 5 of the form was printed to correct an error in the skunk marks of Ver. 5. All instructions for Ver. 5 apply to Ver. 6.)

For both forms, follow the instructions on the front of the form for marking the answers.

2. Place the participant's barcode label on the front page of the questionnaire and mail to participant before her annual visit or ask her to complete in the CC.
3. If taken home, in appointment reminder ask participant to bring the completed form to visit.
4. Do not review the form with the participant, but look for skipped pages. Ask the participant to complete pages she may have skipped.
5. Forward the form to Data Entry.
6. Data Entry: Review the form for completeness. Return to the interviewer if one or more pages is not completed. Scan the English version of the form and key-enter the Spanish version. Initial the first page of the form after data entry.
7. File in the participant's file.

Item Instructions

Date received	Date the CC receives the completed form.
Reviewed by	Standard 3-digit WHI employee ID.
Contact type	Mark appropriate oval or box. (See common data items.)
Visit type	The contact at which the CC receives the completed form. If you receive the form between visits, use the most recent past visit. Mark appropriate oval or box for visit type and number. (See common data items.)
Form administration	<p>Method used to administer form to participant:</p> <p>1 - Self: Participant completed form by herself.</p> <p>2 - Group: Participant completed the form with a group of other participants.</p> <p>3 - Interview: CC staff person completed <u>entire</u> form as interview.</p> <p>4 - Assistance: Participant needed partial assistance from CC staff or others to complete the form.</p>
1. Rate quality of life	Scale representing participant's rating of her quality of life on a continuum, 0 to 10.
2. Satisfaction with quality of life	Scale representing participant's rating of her satisfaction with her current quality of life on a continuum, 0 to 10.
3. General health	Participant's rating of her health, in general.
4. Compared to one year ago, rate health today	Participant's ratings of her general health today compared with that of one year ago.
5.-14. Limitations in typical activities	Participant's view on whether or not her health limits her ability to partake in the listed activities. Ask the woman if her <u>health</u> limits her from doing the activity, even if she does not do it. If her health does not keep her from doing the activity, mark "No, not limited at all."
15. Last four weeks, health has impacted normal social	Participant's view on the last four weeks; if her health (physical and/or emotional) has interfered with her normal social activities.
16. Last four weeks, how much pain	The amount of bodily pain participant has experienced in the last four weeks.
17. Last four weeks, pain has impacted normal work	Participant's view on the last four weeks; if bodily pain has interfered with her normal work.
18.-21. Last four weeks, problems related to physical health	Participant's view on the last four weeks; if her physical health has limited her ability to carry out the listed activities.
22.-24. Last four weeks, emotional problems	No/Yes, if any of the listed activities have occurred as a result of an emotional problem.
25.-28. Health perceptions	Participant's view of the degree of truth of each statement related to her general health perceptions.

29.- 37.	Last four weeks, participant's feelings	Frequency with which participant has had the listed feelings during the past four weeks.
38.	Last four weeks, interference with social activities	Participant's view of how much time her physical health or emotional problems has interfered with her social activities in the last four weeks.
39.- 42.	Activities of daily living	Participant's view of her ability to do various routine activities. The four questions are the Activities of Daily Living (ADL) questions.
43.1.- 43.34.	Symptoms	Participant's view of severity of listed symptoms based on how much they interfere with her usual activities. Level of discomfort associated with each symptom listed.
44.- 54.	Hard things that happen to people	No/Yes and extent to which hard things upset participant.
55.1.- 57.1.	Depression scale	Questions 51.1. - 53.1. form a depression scale.
58.	Sad for two weeks	No/Yes. Refers to two consecutive weeks.
59.	Sad for two years	No/Yes. Refers to two consecutive years.
59.1.	Sad for past year	No/Yes.
60.- 67.	Sleep habits	The frequency with which participant experienced the listed sleep behaviors. Participant's description of her sleeping habits in the past four weeks.
68.	Overall sleep	The participant's view of the quality of a typical night's sleep during the past four weeks.
69.	Amount of sleep	Number of hours that best represents the amount of sleep participant got on a typical night in the past four weeks.
70.	Leaked urine	No/Yes.
71.	How often leaking occurs	The frequency with which leaking urine occurs.
72.	When leaking occurs	Situations during which leaking occurs. If "Other," describe. Data Entry: Do not key-enter "Other" text.
73.	Amount of urine leaked	Participant's view of the amount of urine leakage that occurs.
74.	Protection of urine leaking	The kind of protection participant wears in case of leaking.
75.	Limitations of activities because of leaking	How often leaking urine limits participant's daily activities.
76.	Bother due to leakage	Participant's view of level of disturbance due to leaking.
77.	Married or intimate relationship	No/Yes.

78.	Sexual activity with a partner in last year	No/Yes/Don't want to answer.
79.	Satisfaction with sexual activities	Participant's level of satisfaction with her current sexual activities, either with a partner or alone.
80.	Satisfaction with frequency of sexual activity	Participant's level of satisfaction with the frequency of her current sexual activities.
81.	Health worries about sexual activities	Participant's level of worry about her sexual activities affecting her health.
82.	Date	Date the participant completed this form.
	Comments	Data Entry: Do not key-enter comments.
	Language	Data Entry: English or Spanish version of the form. (See common data items.)