Data Set Name: sh01.sas7bdat

Num	Variable	Type	Len	Label
1	SH01_RECORD_LENGTH	Num	8	
2	SH01_KEYPUNCH_CODE	Num	8	SH01 Keypuncher Code
3	SH01_BATCHDATE	Num	8	SH01 Batch Date
4	SH01_VERIFYER_CODE	Num	8	SH01 Verifyer Code
5	SH01_DATE_LAST_MODIFIED	Num	8	SH01 Date record was last modified
6	SH01_TIME_LAST_MODIFIED	Num	8	SH01 Time record was last modified
7	SH01_EDIT_STATUS_CODE	Num	8	SH01 Edit status code
8	SHEPID	Num	8	SHEP ID
9	FORMNUM	Num	8	Form number
10	SH01_VERSNNUM	Num	8	Version number
11	SH01_RANDDATE	Num	8	Randomization Date (in days from randomization)
12	SH01_SEQUENCE	Num	8	Sequence number
13	ACROSTIC	Num	8	Acrostic
14	SH01_BIRTHDATE	Num	8	Birth Date (in days from randomization)
15	SH01_MED_STATUS	Num	8	Medication status
16	SH01_SYSTBP	Num	8	Initial Systolic blood pressure (mmHg)
17	SH01_DIASTBP	Num	8	Initial Diastolic blood pressure (mmHg)
18	SH01_ELIGIBLE	Num	8	Is subject eligible?
19	SH01_SYSTBP_BLV1	Num	8	Systolic blood pressure at baseline visit 1 (mmHg)
20	SH01_DIASTBP_BLV1	Num	8	Diastolic blood pressure at baseline visit 1 (mmHg)
21	SH01_SH06_DATA_TRANSMITTED	Num	8	SH06 Data transmitted correctly prior to RZ?
22	SH01_CREATININE_AVAILABLE	Num	8	Creatinine measurement available?
23	SH01_CREATININE	Num	8	Creatinine (mg/dl)
24	SH01_SYSTBP_BLV2	Num	8	Systolic blood pressure at baseline visit 2 (mmHg)
25	SH01_DIASTBP_BLV2	Num	8	Diastolic blood pressure at baseline visit 2 (mmHg)
26	SH01_EXCLUSIONS	Num	8	Exclusions present?
27	SH01_CONSENT_SIGNED	Num	8	Consent form signed?
28	SH01_SIGNATURE_CODE	Num	8	Signature code
29	SH01_SYSTBP_GOAL	Num	8	Goal systolic blood pressure (mmHg)
30	SH01_RANDGROUP	Num	8	Randomization group
31	SH01_C1_BOTTLENUM	Num	8	C-1 Bottle number
32	SH01_C2_BOTTLENUM	Num	8	C-2 Bottle number
33	SH01_A1_BOTTLENUM	Num	8	A-1 Bottle number
34	SH01_A2_BOTTLENUM	Num	8	A-2 Bottle number
35	SH01_R_BOTTLENUM	Num	8	R Bottle number
36	SH01_RECORD_TYPE	Char	1	SH01 Record type
37	SH01_DATE_RECEIVED	Num	8	SH01 Date Tape Received from Metpath Lab

Num	Variable	Type	Len	Label
38	SH01_UPDATE_NUMBER	Num	8	SH01 Update number of record
39	SH01_DATE_LAST_PROCESSED	Num	8	SH01 Date Last Processed
40	SH01_CROSS_FORM_EDITS	Num	8	SH01 Cross Form Edits
41	SH01_OBSOLETE_DATA	Num	8	SH01 Obsolete data
42	SH01_SYSTBP_LDEV	Num	8	Systolic blood pressure at Last Drug Evaluation Visit (mmHg)
43	SH01_DIASTBP_LDEV	Num	8	Diastolic blood pressure at Last Drug Evaluation Visit (mmHg)

Data Set Name: sh03.sas7bdat

Num	Variable	Type	Len	Label
1	SH03_RECORD_LENGTH	Num	8	SH03 Record Length
2	SH03_KEYPUNCH_CODE	Num	8	SH03 Keypuncher Code
3	SH03_BATCHDATE	Num	8	SH03 Batch Date
4	SH03_VERIFYER_CODE	Num	8	SH03 Verifyer Code
5	SH03_DATE_LAST_MODIFIED	Num	8	SH03 Date record was last modified
6	SH03_TIME_LAST_MODIFIED	Num	8	SH03 Time record was last modified
7	SH03_EDIT_STATUS_CODE	Num	8	SH03 Edit status code
8	SHEPID	Num	8	SHEP ID
9	FORMNUM	Num	8	Form number
10	SH03_VERSNNUM	Num	8	SH03 Version number
11	SH03_VISITDATE	Num	8	SH03 Visit Date (in days from randomization)
12	SH03_SEQUENCE	Num	8	SH03 Sequence
13	ACROSTIC	Num	8	Acrostic
14	SH03_VISITTIME_HR	Num	8	SH03 Visit time (hours)
15	SH03_VISITTIME_MIN	Num	8	SH03 Visit time (minutes)
16	SH03_VISITTIME_PERIOD	Num	8	SH03 Visit time period (am/pm)
17	SH03_Q1	Num	8	Sex
18	SH03_Q2	Num	8	Race (Asian, Hispanic, Other combined into response 3)
19	SH03_Q3	Num	8	Highest grade or year of school completed?
20	SH03_Q4	Num	8	Current employment status?
21	SH03_Q5	Num	8	Current marital status?
22	SH03_Q6A	Num	8	Currently smoke cigarettes?
23	SH03_Q6B	Num	8	How many cigarettes do you now smoke per day?
24	SH03_Q6C	Num	8	How old were you when you started smoking?
25	SH03_Q7A	Num	8	Did you ever smoke cigarettes?
26	SH03_Q7B	Num	8	How many cigarettes a day did you usually smoke?
27	SH03_Q7C	Num	8	How old were you when you started smoking?
28	SH03_Q7D	Num	8	How old were you when you stopped smoking?
29	SH03_Q8A	Num	8	How often do you drink wine, beer or liquor?
30	SH03_Q8B	Num	8	When you drink alcohol, how many do you drink per day?
31	SH03_Q9A	Num	8	Are you taking any prescription medications?
32	SH03_Q9B	Num	8	Total number of prescription medications being taken?
33	SH03_Q10	Num	8	Have you stopped taking any prescription meds in the past 2 weeks?
34	SH03_Q11A	Num	8	Are you presently taking any OTC medicines or supplements?
35	SH03_Q11B	Num	8	Total number of OTC medicines being taken
36	SH03_Q12A	Num	8	Would you object us sending BP results to your health care provider?

Num	Variable	Type	Len	Label
37	SH03_Q12B	Num	8	Clinic Name or Doctor
38	SH03_RECORD_TYPE	Num	8	SH03 Record Type
39	SH03_DATE_RECEIVED	Num	8	SH03 Date Tape Received from Metpath Lab
40	SH03_UPDATE_NUMBER	Num	8	SH03 Update Number
41	SH03_DATE_LAST_PROCESSED	Num	8	SH03 Date Last Processed
42	SH03_PAPER_COPY	Num	8	SH03 Paper Copy
43	SH03_CROSS_FORM_EDITS	Num	8	SH03 Cross Form Edits

Data Set Name: sh04.sas7bdat

Num	Variable	Type	Len	Label
1	SH04_RECORD_LENGTH	Num	8	SH04 Record Length
2	SH04_KEYPUNCH_CODE	Num	8	SH04 Keypuncher Code
3	SH04_BATCHDATE	Num	8	SH04 Batch Date
4	SH04_VERIFYER_CODE	Num	8	SH04 Verifyer Code
5	SH04_DATE_LAST_MODIFIED	Num	8	SH04 Date record was last modified
6	SH04_TIME_LAST_MODIFIED	Num	8	SH04 Time record was last modified
7	SH04_EDIT_STATUS_CODE	Num	8	SH04 Edit status code
8	SHEPID	Num	8	SHEP ID
9	FORMNUM	Num	8	Form number
10	SH04_VERSNNUM	Num	8	SH04 Version number
11	SH04_VISITDATE	Num	8	SH04 Visit date (in days from randomization)
12	SH04_SEQUENCE	Num	8	SH04 Sequence
13	ACROSTIC	Num	8	Acrostic
14	SH04_VISITTIME_HR	Num	8	SH04 Visit time (hours)
15	SH04_VISITTIME_MIN	Num	8	SH04 Visit time (minutes)
16	SH04_VISITTIME_PERIOD	Num	8	SH04 Visit time period (am/pm)
17	SH04_Q1	Num	8	Has a doctor ever said you have high blood pressure?
18	SH04_Q2	Num	8	Has a doctor ever said you have high blood pressure severe enough for hospitalization?
19	SH04_Q3	Num	8	Has a doctor ever said you have had a heart attack?
20	SH04_Q4	Num	8	Has a doctor ever said you have angina?
21	SH04_Q5	Num	8	Has a doctor ever said you have congenital heart problems?
22	SH04_Q6	Num	8	Has a doctor ever said you have rheumatic heart problems?
23	SH04_Q7	Num	8	Has a doctor ever said you have other heart problems
24	SH04_Q8	Num	8	Has a doctor ever said you have had a stroke?
25	SH04_Q9	Num	8	Has a doctor ever said you have epilepsy?
26	SH04_Q10	Num	8	Has a doctor ever said you have memory problems or other brain problems?
27	SH04_Q11	Num	8	Has a doctor ever said you have diabetes?
28	SH04_Q12	Num	8	Has a doctor ever said you have gout?
29	SH04_Q13	Num	8	Has a doctor ever said you have kidney problems (nephritis,infection,stones)?
30	SH04_Q14	Num	8	Has a doctor ever said you have prostate problems (infection,enlargement)?
31	SH04_Q15	Num	8	Has a doctor ever said you have problems of female organs?
32	SH04_Q16	Num	8	Has a doctor ever said you have urinary tract infection or bladder problems?
33	SH04_Q17	Num	8	Has a doctor ever said you have pneumonia
34	SH04_Q18	Num	8	Has a doctor ever said you have lung problems (TB,emphysema,pleurisy,etc.)?
35	SH04_Q19	Num	8	Has a doctor ever said you have a thyroid problem?
36	SH04_Q20	Num	8	Has a doctor ever said you have stomach or duodenal ulcers?

Num	Variable	Type	Len	Label
37	SH04_Q21	Num	8	Has a doctor ever said you have colitis or intenstinal problems?
38	SH04_Q22	Num	8	Has a doctor ever said you have liver problems (hepatitis,cirrhosis,etc.)?
39	SH04_Q23	Num	8	Has a doctor ever said you have gallstones or gall bladder disease?
40	SH04_Q24	Num	8	Has a doctor ever said you have anemia?
41	SH04_Q25	Num	8	Has a doctor ever said you have cancer?
42	SH04_Q26	Num	8	Has a doctor ever said you have nervous or emotional disorder?
43	SH04_Q27	Num	8	Has a doctor ever said you have arthritis?
44	SH04_Q28	Num	8	Has a doctor ever said you have hives or hay fever?
45	SH04_Q29	Num	8	Has a doctor ever said you have any other major diseases?
46	SH04_Q30	Num	8	During the past year, have you experienced skin rash or unusual bruises?
47	SH04_Q31	Num	8	During the past year, have you experienced headaches so bad you had to stop what you were doing?
48	SH04_Q32	Num	8	During the past year, have you experienced headaches, racing heart and sweating all at the same time?
49	SH04_Q33	Num	8	During the past year, have you experienced faintness or light-headedness when you stood up quickly?
50	SH04_Q34	Num	8	During the past year, have you experienced your heart beating unusually fast or skipping beats?
51	SH04_Q35	Num	8	During the past year, have you experienced blacking out or losing consciousness?
52	SH04_Q36	Num	8	During the past year, have you experienced frequent stomach pains?
53	SH04_Q37	Num	8	During the past year, have you experienced waking up early, having trouble getting back to sleep?
54	SH04_Q38	Num	8	During the past year, have you experienced black or tarry stools?
55	SH04_Q39	Num	8	During the past year, have you experienced bright red blood in your stools?
56	SH04_Q40	Num	8	During the past year, have you experienced weight loss without dieting?
57	SH04_Q41_V1	Num	8	About how many days over the past year were you kept in bed all day because of illness/injury?
58	SH04_Q42A	Num	8	Have you ever had any pain or discomfort in your chest?
59	SH04_Q42B	Num	8	Have you ever had any pressure or heaviness in your chest?
60	SH04_Q42C	Num	8	Do you get this pain, discomfort, pressure or heaviness when you walk uphill or hurry?
61	SH04_Q42D	Num	8	Do you get this pain, discomfort, pressure or heaviness when you walk at ordinary pace on the level ground?
62	SH04_Q42E	Num	8	What do you do when you get this chest pain while you are walking?
63	SH04_Q42F	Num	8	Does the chest pain go away when you stand still?
64	SH04_Q42G	Num	8	How soon after you stand still does the pain go away?
65	SH04_Q42H	Num	8	Do you experience chest pain or discomfort in location 1?
66	SH04_Q42I	Num	8	Do you experience chest pain or discomfort in location 2?
67	SH04_Q42J	Num	8	Do you experience chest pain or discomfort in location 3?
68	SH04_Q43	Num	8	Have you ever had severe pain across the front of your chest lasting for half an hour or more?
69	SH04_Q44A	Num	8	Have you ever had a heart attack (myocardial infarction, coronary thrombosis)?

Num	Variable	Type	Len	Label
70	SH04_Q44B	Num	8	Were you ever hospitalized for any heart attacks?
71	SH04_Q44C	Num	8	How many heart attacks have you had?
72	SH04_Q45A	Num	8	Do you get pain in either leg when walking?
73	SH04_Q45B	Num	8	Does leg pain ever begin when standing still or sitting?
74	SH04_Q45C	Num	8	Do you get leg pain in your calves?
75	SH04_Q45D	Num	8	Do you get leg pain when you walk uphill or hurry?
76	SH04_Q45E	Num	8	Do you get leg pain when you walk at ordinary pace on level ground?
77	SH04_Q45F	Num	8	Does leg pain ever disappear while you are still walking?
78	SH04_Q45G	Num	8	What do you do if you get leg pain while walking?
79	SH04_Q45H	Num	8	Does leg pain go away when you stand still?
80	SH04_Q45I	Num	8	How soon after you stand still does leg pain go away?
81	SH04_Q46A	Num	8	Do you usually cough first thing in the morning in winter?
82	SH04_Q46B	Num	8	Do you usually cough during the day or at night in the winter?
83	SH04_Q46C	Num	8	Do you cough like this on most days for as much as 3 months each year?
84	SH04_Q46D	Num	8	Do you usually bring up phlegm from your chest first thing in the morning in winter?
85	SH04_Q46E	Num	8	Do you usually bring up phlegm from your chest during the day or at night in winter?
86	SH04_Q46F	Num	8	Do you bring up phlegm on most days for as much as 3 months each year?
87	SH04_Q46G	Num	8	In past 3 years, have you had a period of increased cough and phlegm for 3 or more weeks?
88	SH04_Q47A	Num	8	Are you troubled by shortness of breath when hurrying on level ground or walking up slight hill?
89	SH04_Q47B	Num	8	Do you get short of breath walking with people of your own age on level ground?
90	SH04_Q47C	Num	8	Do you ever wake up at night gasping for breath?
91	SH04_Q47D	Num	8	Do you get short of breath at night unless you sleep on two or more pillows?
92	SH04_Q47E	Num	8	Have you ever had asthma?
93	SH04_Q47F	Num	8	Have you had any asthma attacks in the past three years?
94	SH04_Q47G	Num	8	Do you take medication to control or treat asthma?
95	SH04_Q48A	Num	8	Have you ever had any sudden feeling of numbness, tingling etc. in arm, hand, leg foot or face?
96	SH04_Q48B	Num	8	How many attacks of such numbness or tingling have you had?
97	SH04_Q48C	Num	8	How long did each of the numbness attacks usually last?
98	SH04_Q48D	Num	8	Did you see a doctor for the numbness/tingling/loss of feeling?
99	SH04_Q49A	Num	8	Have you ever had any sudden attacks of paralysis/loss of use in arm, hand, leg or foot?
100	SH04_Q49B	Num	8	How many attacks of such paralysis have you had?
101	SH04_Q49C	Num	8	How long did attacks of paralysis last?
102	SH04_Q49D	Num	8	Did you see a doctor for this paralysis?
103	SH04_Q50A	Num	8	Have you ever had any sudden loss of eyesight or blurry vision for short period of time?

Num	Variable	Type	Len	Label
104	SH04_Q50B	Num	8	What part of your vision was affected?
105	SH04_Q50C	Num	8	How many attacks of loss of eyesight or blurry vision have you had?
106	SH04_Q50D	Num	8	How long did the attack(s) of loss of eyesight/blurry vision usually last?
107	SH04_Q50E	Num	8	Did you see a doctor for this vision problem?
108	SH04_Q51A	Num	8	Have you ever had any sudden attacks of changes in speech or loss of speech?
109	SH04_Q51B	Num	8	How many attacks of loss of speech have you had?
110	SH04_Q51C	Num	8	How long did the attack(s) of loss of speech usually last?
111	SH04_Q51D	Num	8	Did you see a doctor for your speech problem?
112	SH04_Q52A	Num	8	Have you ever had dizziness?
113	SH04_Q52B	Num	8	Have you ever had vertigo?
114	SH04_Q52C	Num	8	Have you ever had loss of balance?
115	SH04_Q52D	Num	8	Have you ever had difficulty walking?
116	SH04_Q52E	Num	8	Have you ever had blackouts or fainting?
117	SH04_Q52F	Num	8	Have you ever had frequent falls?
118	SH04_Q53A	Num	8	Did you answer yes to any of the problems in question 52?
119	SH04_Q53B	Num	8	About how many total attacks of all conditions checked do you think you ever had?
120	SH04_Q53C	Num	8	How long did the attack(s) usually last?
121	SH04_Q53D	Num	8	Did you see a doctor for any of these spells?
122	SH04_Q54A	Num	8	Have you ever had surgery to improve blood flow in arteries or vessels?
123	SH04_Q54B	Num	8	Did you have surgery on your neck vessels?
124	SH04_Q54C	Num	8	Did you have surgery on your heart?
125	SH04_Q54D	Num	8	Did you have surgery on your aorta or leg arteries?
126	SH04_Q55A	Num	8	Have you been hospitalized for any reason within the past 5 years?
127	SH04_Q56A	Num	8	Have you ever had a fractured hip?
128	SH04_Q56B	Num	8	Have you ever had a fractured spine?
129	SH04_Q56C	Num	8	Have you ever had a fractured forearm?
130	SH04_Q57A	Num	8	About how many times would you say you have fallen for no obvious reason in the last 3 months?
131	SH04_Q57B	Num	8	Did you have any injury from those falls that required a doctor's attention?
132	SH04_Q58	Num	8	Have any medicines you are/have taken ever caused a skin rash or allergic reaction?
133	SH04_RECORD_TYPE	Num	8	SH04 Record Type
134	SH04_DATE_RECEIVED	Num	8	SH04 Date Tape Received from Metpath Lab
135	SH04_UPDATE_NUMBER	Num	8	SH04 Update Number
136	SH04_DATE_LAST_PROCESSED	Num	8	SH04 Date Last Processed
137	SH04_PAPER_COPY	Num	8	SH04 Paper Copy
138	SH04_CROSS_FORM_EDITS	Num	8	SH04 Cross Form Edits
139	SH04_Q59A	Num	8	Living alone at baseline
140	SH04_Q59B	Num	8	Living with spouse at baseline

Num	Variable	Type	Len	Label
141	SH04_Q59C	Num	8	Living with related individuals at baseline
142	SH04_Q59D	Num	8	Living with non-related friends at baseline
143	SH04_Q59E	Num	8	Living with non-related paid help at baseline
144	SH04_Q59F	Num	8	Don't know living arrangements at baseline
145	SH04_Q41A_V2	Num	8	How many days over past 2 weeks have you reduced social activities because you did not feel well?
146	SH04_Q41B_V2	Num	8	How many days over past 2 weeks have you reduced major work activity at home because you did not feel well?
147	SH04_Q41C_V2	Num	8	How many days over past 2 weeks have you reduced ordinary work activity at home because you did not feel well?
148	SH04_Q41D_V2	Num	8	How many days over past 2 weeks have you spent most of the day in bed because you did not feel well?

Data Set Name: sh06.sas7bdat

Num	Variable	Type	Len	Label
1	SH06_RECORD_LENGTH	Num	8	SH06 Record Length
2	SH06_KEYPUNCH_CODE	Num	8	SH06 Keypuncher Code
3	SH06_BATCHDATE	Num	8	SH06 Batch Date
4	SH06_VERIFYER_CODE	Num	8	SH06 Verifyer Code
5	SH06_DATE_LAST_MODIFIED	Num	8	SH06 Date record was last modified
6	SH06_TIME_LAST_MODIFIED	Num	8	SH06 Time record was last modified
7	SH06_EDIT_STATUS_CODE	Num	8	SH06 Edit status code
8	SHEPID	Num	8	SHEP ID
9	FORMNUM	Num	8	Form number
10	SH06_VERSNNUM	Num	8	SH06 Version number
11	SH06_VISITDATE	Num	8	SH06 Visit Date (in days from randomization)
12	SH06_SEQUENCE	Num	8	SH06 Sequence number
13	ACROSTIC	Num	8	Acrostic
14	SH06_BIRTHDATE	Num	8	Birth Date (in days from randomization, 0=999999)
15	SH06_ANTIHYPER_MEDS_IC	Num	8	Was participant on antihypertensive medications at Intial Contact?
16	SH06_ICV_DEV_SYSTBP1	Num	8	Systolic Blood Pressure, ICV or DEV, Reading #1
17	SH06_ICV_DEV_DIASTBP1	Num	8	Diastolic Blood Pressure,ICV or DEV, Reading #1
18	SH06_ICV_DEV_SYSTBP2	Num	8	Systolic Blood Pressure, ICV or DEV, Reading #2
19	SH06_ICV_DEV_DIASTBP2	Num	8	Diastolic Blood Pressure,ICV or DEV, Reading #2
20	SH06_ICV_DEV_SYSTBP3	Num	8	Systolic Blood Pressure, ICV or DEV, Reading #3
21	SH06_ICV_DEV_DIASTBP3	Num	8	Diastolic Blood Pressure, ICV or DEV, Reading #3
22	SH06_ICV_DEV_BPDATE	Num	8	Date of ICV or DEV Blood Pressure measurements
23	SH06_SSN	Num	8	Social Security Number
24	SH06_MEDICARE_NUMBER	Num	8	Medicare number
25	SH06_NOT_BP_ELIGIBLE	Num	8	Participant is not BP eligible
26	SH06_ECG	Num	8	ECG completed?
27	SH06_PHYSICAL	Num	8	Physical completed?
28	SH06_URINALYSIS	Num	8	Dipstick urinalysis completed?
29	SH06_BLOOD_DRAWN	Num	8	Blood sample drawn?
30	SH06_VISIT_RESULT	Num	8	Result of this visit
31	SH06_VISIT2_DATE	Num	8	Date of baseline visit 2 (in days from randomization)
32	SH06_VISIT2TIME_HR	Num	8	Hour of baseline visit 2
33	SH06_VISIT2TIME_MIN	Num	8	Minutes of baseline visit 2
34	SH06_VISIT2TIME_PERIOD	Num	8	Time period (am/pm) of baseline visit 2
35	SH06_PULSE	Num	8	Pulse (bpm)
36	SH06_CUFFSIZE	Num	8	Cuff size

Num	Variable	Type	Len	Label
37	SH06_SEATED_SYSTBP1	Num	8	Systolic blood pressure, seated (reading 1)
38	SH06_SEATED_DIASTBP1	Num	8	Diastolic blood pressure, seated (reading 1)
39	SH06_SEATED_SYSTBP_ZEROLVL1	Num	8	Systolic blood pressure zero level, seated (reading 1)
40	SH06_SEATED_DIASTBP_ZEROLVL1	Num	8	Diastolic blood pressure zero level, seated (reading 1)
41	SH06_SEATED_SYSTBP1_CORR	Num	8	Systolic blood pressure corrected, seated (reading 1)
42	SH06_SEATED_DIASTBP1_CORR	Num	8	Diastolic blood pressure corrected, seated (reading 1)
43	SH06_SEATED_SYSTBP2	Num	8	Systolic blood pressure, seated (reading 2)
44	SH06_SEATED_DIASTBP2	Num	8	Diastolic blood pressure, seated (reading 2)
45	SH06_SEATED_SYSTBP_ZEROLVL2	Num	8	Systolic blood pressure zero level, seated (reading 2)
46	SH06_SEATED_DIASTBP_ZEROLVL2	Num	8	Diastolic blood pressure zero level, seated (reading 2)
47	SH06_SEATED_SYSTBP2_CORR	Num	8	Systolic blood pressure corrected, seated (reading 2)
48	SH06_SEATED_DIASTBP2_CORR	Num	8	Diastolic blood pressure corrected, seated (reading 2)
49	SH06_SEATED_SYSTBP_SUM	Num	8	Sum of systolic blood pressure readings 1 and 2, seated
50	SH06_SEATED_DIASTBP_SUM	Num	8	Sum of diastolic blood pressure readings 1 and 2, seated
51	SH06_SEATED_SYSTBP_AVG	Num	8	Average diastolic blood pressure, seated
52	SH06_STAND_PULSE_1MIN	Num	8	Pulse (bpm), 1 minute
53	SH06_STAND_SYSTBP1	Num	8	Systolic blood pressure, standing (reading 1)
54	SH06_STAND_DIASTBP1	Num	8	Diastolic blood pressure, standing (reading 1)
55	SH06_STAND_SYSTBP_ZEROLVL1	Num	8	Systolic blood pressure zero level, standing (reading 1)
56	SH06_STAND_DIASTBP_ZEROLVL1	Num	8	Diastolic blood pressure zero level, standing (reading 1)
57	SH06_STAND_SYSTBP1_CORR	Num	8	Systolic blood pressure corrected, standing (reading 1)
58	SH06_STAND_DIASTBP1_CORR	Num	8	Diastolic blood pressure corrected, standing (reading 1)
59	SH06_STAND_PULSE_3MIN	Num	8	Pulse (bpm), 3 minutes
60	SH06_STAND_SYSTBP2	Num	8	Systolic blood pressure, standing (reading 2)
61	SH06_STAND_DIASTBP2	Num	8	Diastolic blood pressure, standing (reading 2)
62	SH06_STAND_SYSTBP_ZEROLVL2	Num	8	Systolic blood pressure zero level, standing (reading 2)
63	SH06_STAND_DIASTBP_ZEROLVL2	Num	8	Diastolic blood pressure zero level, standing (reading 2)
64	SH06_STAND_SYSTBP2_CORR	Num	8	Systolic blood pressure corrected, standing (reading 2)
65	SH06_STAND_DIASTBP2_CORR	Num	8	Diastolic blood pressure corrected, standing (reading 2)
66	SH06_SYMPTOMS_STANDING	Num	8	Did participant volunteer any symptoms on standing?
67	SH06_DIZZINESS_STANDING	Num	8	Did participant volunteer dizziness on standing?
68	SH06_OTHER_SYMPTOMS_STANDING	Num	8	Did participant volunteer other symptoms on standing?
69	SH06_BP_ELIGIBLE	Num	8	Eligibility check (based on average of two corrected bp readings)
70	SH06_BP_OBSERVER_CODE	Num	8	Observer code
71	SH06_BP_MEDICATION	Num	8	Currently (last 2 weeks) taking any blood pressure medications?
72	SH06_DIGITALIS	Num	8	Currently (last 2 weeks) taking digitalis?
73	SH06_NITRATES	Num	8	Currently (last 2 weeks) taking nitrates (including nitroglycerine)?
74	SH06_PROPRANOLOL	Num	8	Currently (last 2 weeks) taking propranolol (other beta blockers) for reasons other than BP?

Num	Variable	Type	Len	Label
75	SH06_ANTI_ARRHYTHMIC	Num	8	Currently (last 2 weeks) taking anti-arrhythmic drugs?
76	SH06_LIPID_LOWERING	Num	8	Currently (last 2 weeks) taking lipid-lowering drugs (clofibrate,cholestryramine, colestipol,etc.)?
77	SH06_GOUT_AGENTS	Num	8	Currently (last 2 weeks) taking agents for gout (including probenecid, allopurinol or colchicine)?
78	SH06_INSULIN	Num	8	Currently (last 2 weeks) taking insulin?
79	SH06_ORAL_HYPOGLYCEMIC	Num	8	Currently (last 2 weeks) taking oral hypoglycemic agents?
80	SH06_ANTICOAGULANTS	Num	8	Currently (last 2 weeks) taking anticoagulants?
81	SH06_ANTIBIOTICS	Num	8	Currently (last 2 weeks) taking antibiotics or anti-infection agents?
82	SH06_CORTISONE	Num	8	Currently (last 2 weeks) taking cortisone or other gluco corticoids?
83	SH06_AMPHETAMINES	Num	8	Currently (last 2 weeks) taking amphetamines or other stimulants?
84	SH06_FLURAZEPAM	Num	8	Currently (last 2 weeks) taking flurazepam or other sedative?
85	SH06_ANTI_DEPRESSANTS	Num	8	Currently (last 2 weeks) taking anti-depressants?
86	SH06_LIBRIUM_VALIUM	Num	8	Currently (last 2 weeks) taking librium, valium or other antianxiety agents?
87	SH06_OTHER_PHYSCOTROPIC	Num	8	Currently (last 2 weeks) taking other psychotropic agents?
88	SH06_POTASSIUM_SUPP	Num	8	Currently (last 2 weeks) taking potassium supplementation (other than dietary recommendations)?
89	SH06_ESTROGEN	Num	8	Currently (last 2 weeks) taking estrogen?
90	SH06_ANTURANE	Num	8	Currently taking anturane (sulfinpyrazone) for at least 4 weeks?
91	SH06_PERSANTINE	Num	8	Currently taking persantine (dipyridamole) for at least 4 weeks?
92	SH06_ASPIRIN	Num	8	Currently taking aspirin for at least 4 weeks?
93	SH06_NON_STEROIDAL	Num	8	Currently (last 2 weeks) taking non-steroidal anti-inflammatory drugs?
94	SH06_WEIGHT	Num	8	Weight (in pounds)
95	SH06_HEIGHT	Num	8	Height (in inches)
96	SH06_SKIN_EXAM	Num	8	Skin exam results
97	SH06_HEAD_EXAM	Num	8	Head, ears, nose and throat exam results
98	SH06_EYES_FUNDI_EXAM	Num	8	Eye exam, fundi exam results
99	SH06_EYES_OTHER_EXAM	Num	8	Eye exam, other parts of eye examined?
100	SH06_NECK_RAISED_JUGULAR	Num	8	Neck exam, raised jugular venous pressure?
101	SH06_NECK_CAROTID_BRUITS	Num	8	Neck exam, carotid bruits?
102	SH06_NECK_CAROTID_BRUITS_POS	Num	8	Neck exam, position of carotid bruits?
103	SH06_NECK_CAROTID_PULSES_ABSENT	Num	8	Neck exam, carotid pulses absent or markedly diminished?
104	SH06_NECK_CAROTID_PULSES_POS	Num	8	Neck exam, position of absent carotid pulses?
105	SH06_NECK_THYROID_ABNORMAL	Num	8	Neck exam, thryoid abnormality?
106	SH06_NECK_OTHER_PROBLEM	Num	8	Neck exam, other neck problems?
107	SH06_LYMPH_NODES_EXAM	Num	8	Lymph node exam results?
108	SH06_CHEST_RALES_DONT_CLEAR	Num	8	Chest exam, bilateral rales that do not clear with coughing?

Num	Variable	Type	Len	Label
109	SH06_CHEST_RESP_RATE_GE20	Num	8	Chest exam, respiratory rate 20 or more?
110	SH06_CHEST_WHEEZING	Num	8	Chest exam, wheezing?
111	SH06_CHEST_OTHER_PROBLEM	Num	8	Chest exam, other problems?
112	SH06_HEART_PMI_GE2CM	Num	8	Heart exam, PMI more than 2 cm lateral to midclavicular line?
113	SH06_HEART_MURMUR	Num	8	Heart exam, any murmur?
114	SH06_HEART_THIRD_SOUND	Num	8	Heart exam, third heart sound?
115	SH06_HEART_FOURTH_SOUND	Num	8	Heart exam, fourth heart sound?
116	SH06_HEART_PULSE_IRREGULAR	Num	8	Heart exam, pulse irregular?
117	SH06_HEART_OTHER_PROBLEM	Num	8	Heart exam, other heart problems?
118	SH06_BREAST_EXAM	Num	8	Breast exam results?
119	SH06_ABDOMEN_LIVERSPAN_GE10CM	Num	8	Abdomen exam, liver span 10 cm or more?
120	SH06_ABDOMEN_ABNORMAL_PULSE	Num	8	Abdomen exam, abnormal abdominal pulse?
121	SH06_ABDOMEN_MASSES	Num	8	Abdomen exam, any masses?
122	SH06_ABDOMEN_BRUIT	Num	8	Abdomen exam, bruit?
123	SH06_ABDOMEN_OTHER_PROBLEM	Num	8	Abdomen exam, other abdomen problems?
124	SH06_EXTREMITY_ANKLE_EDEMA	Num	8	Extremity exam, pitting ankle edema?
125	SH06_EXTREMITY_FEMORAL_BRUIT	Num	8	Extremity exam, femoral bruit?
126	SH06_EXTREMITY_PULSES_ABSENT	Num	8	Extremity exam, any peripheral pulses absent/markedly diminished?
127	SH06_EXTREMITY_OTHER_PROBLEM	Num	8	Extremity exam, other extremity problems?
128	SH06_NEURO_GAIT_LEFT	Num	8	Neurological exam, left hemiparetic gait?
129	SH06_NEURO_GAIT_RIGHT	Num	8	Neurological exam, right hemiparetic gait?
130	SH06_NEURO_WALK_TOES_LEFT_WEAK	Num	8	Neurological exam, walking on toes left weakness?
131	SH06_NEURO_WALK_TOES_RIGHT_WEAK	Num	8	Neurological exam, walking on toes right weakness?
132	SH06_NEURO_WALK_HEELS_LEFT_WEAK	Num	8	Neurological exam, walking on heels left weakness?
133	SH06_NEURO_WALK_HEELS_RIGHT_WEAK	Num	8	Neurological exam, walking on heels right weakness?
134	SH06_NEURO_STAND_EYES_CLOSED	Num	8	Neurological exam, stand stationary for 30 seconds with eyes closed?
135	SH06_NEURO_STAND_EYES_OPEN	Num	8	Neurological exam, stand stationary for 30 seconds with eyes open? (if unable with eyes closed)
136	SH06_NEURO_CRANIAL_LEFT_WEAK	Num	8	Neurological exam, cranial nerves, facial weakness left?
137	SH06_NEURO_CRANIAL_RIGHT_WEAK	Num	8	Neurological exam, cranial nerves, facial weakness right?
138	SH06_NEURO_VISUAL_DEFICIT_LEFT	Num	8	Neurological exam, visual field deficit, left side?
139	SH06_NEURO_VISUAL_DEFICIT_RIGHT	Num	8	Neurological exam, visual field deficit, right side?
140	SH06_NEURO_EXTENSORS_LEFT_WEAK	Num	8	Neurological exam, motor wrist extensors, left weakness?
141	SH06_NEURO_EXTENSORS_RIGHT_WEAK	Num	8	Neurological exam, motor wrist extensors, right weakness?
142	SH06_NEURO_COORD_LEFT_PATTING	Num	8	Neurological exam, coordination, left hand patting?
143	SH06_NEURO_COORD_RIGHT_PATTING	Num	8	Neurological exam, coordination, right hand patting?
144	SH06_NEURO_REFLEX_PATELLA_ASSYM	Num	8	Neurological exam, reflexes, assymetry of patellar tendon?
145	SH06_NEURO_REFLEX_BABINSKI_LEFT	Num	8	Neurological exam, reflexes, Babinski sign left?

Num	Variable	Type	Len	Label
146	SH06_NEURO_REFLEX_BABINSKI_RIGHT	Num	8	Neurological exam, reflexes, Babinski sign right?
147	SH06_NEURO_SPEECH_PROBLEMS	Num	8	Neurological exam, speech or language problems?
148	SH06_OTHER_PHYSICAL_FINDINGS	Num	8	Other physical findings?
149	SH06_CLINICIAN_CODE	Num	8	Clinician code
150	SH06_MALIG_HYPERTENSION_EVER	Num	8	On basis of history and physical exam, do you believe participant ever had malignant hypertension?
151	SH06_ANGINA_PECTORIS	Num	8	On basis of history and physical exam, do you believe participant has angina pectoris?
152	SH06_MYO_INFARC_EVER	Num	8	On basis of history and physical exam, do you believe participant ever had a myocardial infarction?
153	SH06_MYO_INFARC_LAST6MOS	Num	8	Was myocardial infarction in the last 6 months?
154	SH06_CORONARY_BYPASS_EVER	Num	8	Is there a history of coronary bypass?
155	SH06_CORONARY_BYPASS_LAST6MOS	Num	8	Was coronary bypass in last 6 months?
156	SH06_CONGEST_HEART_FAIL_LASTYR	Num	8	On basis of history and physical exam, do you believe participant has had congestive heart failure during last year?
157	SH06_ECG_ATRIAL_FLUTTER	Num	8	ECG results, atrial fibrillation or flutter present?
158	SH06_ECG_2ND_3RD_DEG_AV_BLOCK	Num	8	ECG results, second or third degree A-V block present?
159	SH06_ECG_VPBS	Num	8	ECG results, VPBs multifocal, pairs or runs, or more than 10% of beats?
160	SH06_ECG_BRADYCARDIA	Num	8	ECG results, braycardia (<50 beats/min)?
161	SH06_ECG_PACEMAKER	Num	8	Does participant currently have a pacemaker?
162	SH06_VASCULAR_SURG_EVER	Num	8	History of vascular surgery?
163	SH06_VASCULAR_SURG_BYPASS_GRAFT	Num	8	History of aortic, iliac, popliteal or femoral bypass or graft?
164	SH06_VASCUALR_SURG_OTHER	Num	8	History of other vascular surgery?
165	SH06_ARTERIAL_DISEASE	Num	8	On basis of history and physical exam, does participant have arterial disease with tissue necrosis?
166	SH06_CHRONIC_BRONCHITIS	Num	8	On basis of history and physical exam, does participant have chronic bronchitis?
167	SH06_EMPHYSEMA	Num	8	On basis of history and physical exam, does participant have emphysema?
168	SH06_STROKE_EVER	Num	8	On basis of history and physical exam, and keeping SHEP criteria in mind, do you believe participant has ever had a stroke?
169	SH06_STROKE_MOST_RECENT_MO	Num	8	When was the most recent (month) episode of probable stroke (not TIA)?
170	SH06_STROKE_MOST_RECENT_YR	Num	8	When was the most recent (year) episode of probable stroke (not TIA)?
171	SH06_STROKE_RESIDUAL_EFFECTS	Num	8	Are there any residual effects of stroke still present?
172	SH06_TIA_ATTACKS_LASTYR	Num	8	On basis of history and physical exam, do you believe participant has had TIA attacks within the last 12 months?
173	SH06_CAROTID_ENDARTERECTOMY	Num	8	Is there a history of carotid endarterectomy?
174	SH06_CHLORTHALIDONE_CONTRAINDIC	Num	8	On basis of history and physical exam, does participant have any contraindication to chlorthalidone?
175	SH06_ATENOLOL_CONTRAINDIC	Num	8	On basis of history and physical exam, does participant have any contraindication to atenolol?

Num	Variable	Type	Len	Label
176	SH06_RESERPINE_CONTRAINDIC	Num	8	On basis of history and physical exam, does participant have any contraindication to reserpine?
177	SH06_ATENOLOL_AND_RESERPINE	Num	8	Does participant have contraindication to atenolol and reserpine?
178	SH06_ALCOHOLISM	Num	8	On basis of history and physical exam, do you believe participant currently drinks 6+ drinks/day or that alcoholism/liver disease has been present in past?
179	SH06_DEMENTIA	Num	8	On basis of history and physical exam, do you believe participant definitely has any form of dementia?
180	SH06_ALLERGIC_TO_SHEP_MEDS	Num	8	On basis of history and physical exam, do you believe participant is allergic to one of the SHEP medications?
181	SH06_LIFE_THREATENING_DISEASE	Num	8	On basis of history and physical exam, is there any life-threatening disease/other reason that might impair individual's participation over next 5 yrs?
182	SH06_FRACTURE_HIP_EVER	Num	8	Do you believe the participant has ever had a fracture of the hip?
183	SH06_FRACTURE_SPINE_EVER	Num	8	Do you believe the participant has ever had a fracture of the spine?
184	SH06_FRACTURE_FOREARM_EVER	Num	8	Do you believe the participant has ever had a fracture of the forearm?
185	SH06_FREQUENT_FALLS	Num	8	Do you believe the participant has had a problem with frequent falls?
186	SH06_ELIGIBILITY	Num	8	Based on the information in this review, is the participant eligible for SHEP?
187	SH06_ELIGIBILITY_CLINICIAN_CODE	Num	8	Clinician code for person completing eligibility assessment
188	SH06_HIST_KIDNEY_DISEASE	Num	8	Does participant have a history of kidney disease or protein or blood in urine?
189	SH06_RECORD_TYPE	Num	8	Record Type
190	SH06_DATE_RECEIVED	Num	8	SH06 Date Tape Received from Metpath Lab
191	SH06_UPDATE_NUMBER	Num	8	SH06 Update Number
192	SH06_DATE_LAST_PROCESSED	Num	8	SH06 Date Last Processed
193	SH06_PAPER_COPY	Num	8	SH06 Paper Copy
194	SH06_CROSS_FORM_EDITS	Num	8	SH06 Cross Form Edits
195	SH06_SH04FORM	Num	8	Completed Baseline Medical History form (SH04)?
196	SH06_END_VISIT_PERSON_CODE	Num	8	Code of person who completed section of form at termination of visit
197	SH06_ICV_DATE	Num	8	Date of Initial Contact Visit (in days from randomization)
198	SH06_ICV_SYSTBP1	Num	8	Systolic Blood Pressure, Reading #1 at ICV
199	SH06_ICV_DIASTBP1	Num	8	Diastolic Blood Pressure, Reading #1 at ICV
200	SH06_ICV_SYSTBP2	Num	8	Systolic Blood Pressure, Reading #2 at ICV
201	SH06_ICV_DIASTBP2	Num	8	Diastolic Blood Pressure, Reading #2 at ICV
202	SH06_ICV_SYSTBP3	Num	8	Systolic Blood Pressure, Reading #3 at ICV
203	SH06_ICV_DIASTBP3	Num	8	Diastolic Blood Pressure, Reading #3 at ICV
204	SH06_ANTIHYPER_MED_WTHDRWDATE	Num	8	Date of withdrawal of antihypertensive medications (in days from randomization)

Num	Variable	Type	Len	Label
205	SH06_WTHDRW_SYSTBP1	Num	8	Systolic Blood Pressure, Reading #1 at withdraw date of antihypertensive medication
206	SH06_WTHDRW_DIASTBP1	Num	8	Diastolic Blood Pressure, Reading #1 at withdraw date of antihypertensive medication
207	SH06_WTHDRW_SYSTBP2	Num	8	Systolic Blood Pressure, Reading #2 at withdraw date of antihypertensive medication
208	SH06_WTHDRW_DIASTBP2	Num	8	Diastolic Blood Pressure, Reading #2 at withdraw date of antihypertensive medication
209	SH06_WTHDRW_SYSTBP3	Num	8	Systolic Blood Pressure, Reading #3 at withdraw date of antihypertensive medication
210	SH06_WTHDRW_DIASTBP3	Num	8	Diastolic Blood Pressure, Reading #3 at withdraw date of antihypertensive medication
211	SH06_DEV_DATE	Num	8	Date of most recent Drug Evaluation Visit (in days from randomization)
212	SH06_DEV_SYSTBP1	Num	8	Systolic Blood Pressure, Reading #1 at DEV
213	SH06_DEV_DIASTBP1	Num	8	Diastolic Blood Pressure, Reading #1 at DEV
214	SH06_DEV_SYSTBP2	Num	8	Systolic Blood Pressure, Reading #2 at DEV
215	SH06_DEV_DIASTBP2	Num	8	Diastolic Blood Pressure, Reading #2 at DEV
216	SH06_DEV_SYSTBP3	Num	8	Systolic Blood Pressure, Reading #3 at DEV
217	SH06_DEV_DIASTBP3	Num	8	Diastolic Blood Pressure, Reading #3 at DEV
218	SH06_POP_OBSERVED	Num	8	Pulse Obliteration Pressure, Observed value
219	SH06_POP_SUBTRACT_ZEROLVL	Num	8	Pulse Obliteration Pressure, Zero level
220	SH06_POP_CORRECTED_VALUE	Num	8	Pulse Obliteration Pressure, Corrected value
221	SH06_POP_MAXZEROLVL_PLUS20	Num	8	Pulse Obliteration Pressure, Maximum zero level plus 20
222	SH06_POP_PEAK_INFLATION	Num	8	Pulse Obliteration Pressure, Peak inflation level
223	SH06_BLOOD_DRAWN_SER_CREAT	Num	8	Was blood sample drawn for local determination of serum creatinine?
224	SH06_LOCAL_CREATININE_RESULT	Num	8	Local creatinine result
225	SH06_TIMOPTIC_EYE_DROPS	Num	8	Currently (last 2 weeks) taking timoptic eye drops?
226	SH06_EXPERIMENTAL_DRUGS	Num	8	Currently (last 2 weeks) taking any experimental drugs?
227	SH06_ANGIOPLASTY	Num	8	Is there a history of angioplasty?

Data Set Name: sh07.sas7bdat

Num	Variable	Type	Len	Label
1	SH07_RECORD_LENGTH	Num	8	SH07 Record Length
2	SH07_KEYPUNCH_CODE	Num	8	SH07 Keypuncher Code
3	SH07_BATCHDATE	Num	8	SH07 Batch Date
4	SH07_VERIFYER_CODE	Num	8	SH07 Verifyer Code
5	SH07_DATE_LAST_MODIFIED	Num	8	SH07 Date record was last modified
6	SH07_TIME_LAST_MODIFIED	Num	8	SH07 Time record was last modified
7	SH07_EDIT_STATUS_CODE	Num	8	SH07 Edit status code
8	SHEPID	Num	8	SHEP ID
9	FORMNUM	Num	8	Form number
10	SH07_VERSNNUM	Num	8	SH07 Version number
11	SH07_VISITDATE	Num	8	SH07 Visit Date (in days from randomization)
12	SH07_SEQUENCE	Num	8	SH07 Sequence number
13	ACROSTIC	Num	8	Acrostic
14	SH07_BV2_REPEAT	Num	8	Is this a repeat Baseline Visit 2?
15	SH07_PREV_BV2_SYSTBP	Num	8	Previous BV2 Systolic blood pressure (average of corrected readings) (mmHg)
16	SH07_PREV_BV2_DIASTBP	Num	8	Previous BV2 Diastolic blood pressure (average of corrected readings) (mmHg)
17	SH07_VISIT_RESULT	Num	8	Result of Baseline Visit 2
18	SH07_INELIGIBLE_REASON	Num	8	Reason Participant is not eligible
19	SH07_GOAL_SYSTBP	Num	8	Goal Systolic Blood Pressure (mmHg)
20	SH07_DRUG1_BOTTLENUM	Num	8	Bottle Number of step 1, dose 1 drug
21	SH07_CLINIC_APPT	Num	8	Clinic appointment for one month visit scheduled?
22	SH07_CLINIC_APPT_DATE	Num	8	Date of clinic appointment (in days from randomization)
23	SH07_CLINIC_APPT_TIME_HR	Num	8	Time of clinic appointment, Hour
24	SH07_CLINIC_APPT_TIME_MIN	Num	8	Time of clinic appointment, minutes
25	SH07_CLINIC_APPT_TIME_PERIOD	Num	8	Time period (am/pm) of clinic appointment
26	SH07_PULSE	Num	8	Pulse
27	SH07_CUFFSIZE	Num	8	Cuff size
28	SH07_SEATED_SYSTBP1	Num	8	Systolic blood pressure, seated (reading #1)
29	SH07_SEATED_DIASTBP1	Num	8	Diastolic blood pressure, seated (reading #1)
30	SH07_SEATED_SYSTBP_ZEROLVL1	Num	8	Systolic zero level, seated (reading #1)
31	SH07_SEATED_DIASTBP_ZEROLVL1	Num	8	Diastolic zero level, seated (reading #1)
32	SH07_SEATED_SYSTBP1_CORR	Num	8	Corrected systolic blood pressure, seated (reading #1)
33	SH07_SEATED_DIASTBP1_CORR	Num	8	Corrected diastolic blood pressure, seated (reading #1)
34	SH07_SEATED_SYSTBP2	Num	8	Systolic blood pressure, seated (reading #2)
35	SH07_SEATED_DIASTBP2	Num	8	Diastolic blood pressure, seated (reading #2)

Num	Variable	Type	Len	Label
36	SH07_SEATED_SYSTBP_ZEROLVL2	Num	8	Systolic zero level, seated (reading #2)
37	SH07_SEATED_DIASTBP_ZEROLVL2	Num	8	Diastolic zero level, seated (reading #2)
38	SH07_SEATED_SYSTBP2_CORR	Num	8	Corrected systolic blood pressure, seated (reading #2)
39	SH07_SEATED_DIASTBP2_CORR	Num	8	Corrected diastolic blood pressure, seated (reading #2)
40	SH07_SEATED_SYSTBP_SUM	Num	8	Sum of two corrected Systolic blood pressure readings, seated
41	SH07_SEATED_DIASTBP_SUM	Num	8	Sum of two corrected Diastolic blood pressure readings, seated
42	SH07_SEATED_SYSTBP_AVG	Num	8	Average of two corrected Systolic blood pressure readings, seated
43	SH07_SEATED_DIASTBP_AVG	Num	8	Average of two corrected Diastolic blood pressure readings, seated
44	SH07_STAND_PULSE_1MIN	Num	8	Pulse, standing (1 minute)
45	SH07_STAND_SYSTBP_1MIN	Num	8	Systolic blood pressure, standing (1 minute)
46	SH07_STAND_DIASTBP_1MIN	Num	8	Diastolic blood pressure, standing (1 minute)
47	SH07_STAND_SYSTBP_ZEROLVL_1MIN	Num	8	Systolic blood pressure zero level, standing (1 minute)
48	SH07_STAND_DIASTBP_ZEROLVL_1MIN	Num	8	Diastolic blood pressure zero level, standing (1 minute)
49	SH07_STAND_SYSTBP_1MIN_CORR	Num	8	Corrected systolic blood pressure, standing (1 minute)
50	SH07_STAND_DIASTBP_1MIN_CORR	Num	8	Corrected diastolic blood pressure, standing (1 minute)
51	SH07_STAND_PULSE_3MIN	Num	8	Pulse, standing (3 minute)
52	SH07_STAND_SYSTBP_3MIN	Num	8	Systolic blood pressure, standing (3 minute)
53	SH07_STAND_DIASTBP_3MIN	Num	8	Diastolic blood pressure, standing (3 minute)
54	SH07_STAND_SYSTBP_ZEROLVL_3MIN	Num	8	Systolic blood pressure zero level, standing (3 minute)
55	SH07_STAND_DIASTBP_ZEROLVL_3MIN	Num	8	Diastolic blood pressure zero level, standing (3 minute)
56	SH07_STAND_SYSTBP_3MIN_CORR	Num	8	Corrected systolic blood pressure, standing (3 minute)
57	SH07_STAND_DIASTBP_3MIN_CORR	Num	8	Corrected diastolic blood pressure, standing (3 minute)
58	SH07_SYMPTOMS_STANDING	Num	8	Did participant volunteer any symptoms on standing?
59	SH07_DIZZINESS_STANDING	Num	8	Did participant volunteer dizziness on standing?
60	SH07_OTHER_SYMPTOMS_STANDING	Num	8	Did participant volunteer other symptoms on standing?
61	SH07_BP_ELIGIBLE	Num	8	Eligibility check (using average of two corrected BP readings)?
62	SH07_BV1_AVG_SYSTRZBP	Num	8	Average R-Z Systolic blood pressure, Baseline Visit 1
63	SH07_BV1_AVG_DIASTRZBP	Num	8	Average R-Z Diastolic blood pressure, Baseline Visit 1
64	SH07_BV2_AVG_SYSTRZBP	Num	8	Average R-Z Systolic blood pressure, from Section 5b
65	SH07_BV2_AVG_DIASTRZBP	Num	8	Average R-Z Diastolic blood pressure, from Section 5b
66	SH07_SUM_AVG_SYSTRZBP	Num	8	Sum of average R-Z systolic blood pressure, BV1 + BV2
67	SH07_SUM_AVG_DIASTRZBP	Num	8	Sum of average R-Z diastolic blood pressure, BV1 + BV2
68	SH07_BASELINE_SYSTRZBP	Num	8	Baseline R-Z systolic blood pressure, ((BV1+BV2)/2)
69	SH07_BASELINE_DIASTRZBP	Num	8	Baseline R-Z diastolic blood pressure, ((BV1+BV2)/2)
70	SH07_BASELINE_BP_ELIGIBLE	Num	8	Baseline blood pressure eligibility (Average of BV1 and BV2)
71	SH07_CREATININE_ELIGIBLE	Num	8	Creatinine eligibility
72	SH07_OBSERVERS_CODE	Num	8	Observer's code
73	SH07_DEMENTIA_EVAL	Num	8	Result of SHORTCARE evaluation, dementia component
74	SH07_SLV_UNWELL	Num	8	Since last visit, have you felt unwell?

Num	Variable	Type	Len	Label
75	SH07_SLV_DIFFERENT_PROBS	Num	8	Are any of these problems different from the way things were at last visit?
76	SH07_SLV_DOC_VISIT	Num	8	Since last visit, have you seen a doctor for any reason?
77	SH07_SLV_HOSP	Num	8	Since your last visit, have you been in the hospital for any reason?
78	SH07_SLV_HOSP_NUMVISITS	Num	8	Number of times in hospital since last visit
79	SH07_SLV_HOSP_VISIT1_DATE	Num	8	Date of first visit to hospital (in days from randomization)
80	SH07_SLV_HOSP_VISIT1_DAYS	Num	8	Length of first hospital stay (in days)
81	SH07_SLV_HOSP_VISIT2_DATE	Num	8	Date of second visit to hospital (in days from randomization)
82	SH07_SLV_HOSP_VISIT2_DAYS	Num	8	Length of second hospital stay (in days)
83	SH07_SLV_HOSP_VISIT3_DATE	Num	8	Date of third visit to hospital (in days from randomization)
84	SH07_SLV_HOSP_VISIT3_DAYS	Num	8	Length of third hospital stay (in days)
85	SH07_NUMBNESS_SLV	Num	8	Since your last visit, have you had unusual coldness or numbness in hands/feet?
86	SH07_NUMBNESS_NEW	Num	8	Is this new since last visit?
87	SH07_NUMBNESS_FREQ	Num	8	Frequency of unusual coldness or numbness in hands/feet
88	SH07_NUMBNESS_SEVERITY	Num	8	Severity of unusual coldness or numbness in hands/feet
89	SH07_SKIN_RASH_SLV	Num	8	Since your last visit, have you had unusual skin rash or bruising?
90	SH07_SKIN_RASH_NEW	Num	8	Is this new since last visit?
91	SH07_SKIN_RASH_FREQ	Num	8	Frequency of unusual skin rash or bruising
92	SH07_SKIN_RASH_SEVERITY	Num	8	Severity of unusual skin rash or bruising
93	SH07_SKIN_RASH_PRESENT	Num	8	Is an acute skin rash present on physical exam?
94	SH07_IMBALANCE_SLV	Num	8	Since your last visit, have you had feelings of unsteadiness or imbalance?
95	SH07_IMBALANCE_NEW	Num	8	Is this new since last visit?
96	SH07_IMBALANCE_FREQ	Num	8	Frequency of feelings of unsteadiness or imbalance
97	SH07_IMBALANCE_SEVERITY	Num	8	Severity of feelings of unsteadiness or imbalance
98	SH07_LIGHTHEADED_SLV	Num	8	Since your last visit, have you had faintness or light headedness when stand up quickly?
99	SH07_LIGHTHEADED_NEW	Num	8	Is this new since last visit?
100	SH07_LIGHTHEADED_FREQ	Num	8	Frequency of faintness or light headedness when stand up quickly
101	SH07_LIGHTHEADED_SEVERITY	Num	8	Severity of faintness or light headedness when stand up quickly
102	SH07_PASSOUT_SLV	Num	8	Since your last visit, have you had loss of consciousness or passing out?
103	SH07_PASSOUT_NEW	Num	8	Is this new since last visit?
104	SH07_PASSOUT_FREQ	Num	8	Frequency of loss of consciousness or passing out
105	SH07_PASSOUT_SEVERITY	Num	8	Severity of loss of consciousness or passing out
106	SH07_DROP_IN_BP	Num	8	Is there an observable postural drop in blood pressure?
107	SH07_FALLS_SLV	Num	8	Since your last visit, have you had falls?
108	SH07_FALLS_NEW	Num	8	Is this new since last visit?
109	SH07_FALLS_FREQ	Num	8	Frequency of falls

Num	Variable	Type	Len	Label
110	SH07_FALLS_SEVERITY	Num	8	Severity of falls
111	SH07_FRACTURES_SLV	Num	8	Since your last visit, have you had fractures?
112	SH07_FRACTURES_NEW	Num	8	Is this new since last visit?
113	SH07_FRACTURES_FREQ	Num	8	Frequency of fractures
114	SH07_FRACTURES_SEVERITY	Num	8	Severity of fractures
115	SH07_FRACTURES_HIP	Num	8	Hip fracture since last visit?
116	SH07_FRACTURES_SPINE	Num	8	Spine fracture since last visit?
117	SH07_FRACTURES_FOREARM	Num	8	Forearm fracture since last visit?
118	SH07_JOINTPAIN_SLV	Num	8	Since your last visit, have you had unusual pain in joints?
119	SH07_JOINTPAIN_NEW	Num	8	Is this new since last visit?
120	SH07_JOINTPAIN_FREQ	Num	8	Frequency of unusual pain in joints
121	SH07_JOINTPAIN_SEVERITY	Num	8	Severity of unusual pain in joints
122	SH07_JOINTPAIN_ARTHRITIS	Num	8	Are there physical signs of acute arthritis?
123	SH07_MUSCLEWEAK_SLV	Num	8	Since your last visit, have you had muscle weakness or cramping?
124	SH07_MUSCLEWEAK_NEW	Num	8	Is this new since last visit?
125	SH07_MUSCLEWEAK_FREQ	Num	8	Frequency of muscle weakness or cramping
126	SH07_MUSCLEWEAK_SEVERITY	Num	8	Severity of muscle weakness or cramping
127	SH07_EXCESSTHIRST_SLV	Num	8	Since your last visit, have you had excessive thirst?
128	SH07_EXCESSTHIRST_NEW	Num	8	Is this new since last visit?
129	SH07_EXCESSTHIRST_FREQ	Num	8	Frequency of excessive thirst
130	SH07_EXCESSTHIRST_SEVERITY	Num	8	Severity of excessive thirst
131	SH07_LOSSAPPETITE_SLV	Num	8	Since your last visit, have you had loss of appetite
132	SH07_LOSSAPPETITE_NEW	Num	8	Is this new since last visit?
133	SH07_LOSSAPPETITE_FREQ	Num	8	Frequency of loss of appetite
134	SH07_LOSSAPPETITE_SEVERITY	Num	8	Severity of loss of appetite
135	SH07_NAUSEA_SLV	Num	8	Since your last visit, have you had nausea or vomitting?
136	SH07_NAUSEA_NEW	Num	8	Is this new since last visit?
137	SH07_NAUSEA_FREQ	Num	8	Frequency of nausea or vomitting
138	SH07_NAUSEA_SEVERITY	Num	8	Severity of nausea or vomitting
139	SH07_INDIGESTION_SLV	Num	8	Since your last visit, have you had unusual indigestion?
140	SH07_INDIGESTION_NEW	Num	8	Is this new since last visit?
141	SH07_INDIGESTION_FREQ	Num	8	Frequency of unusual indigestion
142	SH07_INDIGESTION_SEVERITY	Num	8	Severity of unusual indigestion
143	SH07_BOWELCHANGE_SLV	Num	8	Since your last visit, have you had change in bowel habits
144	SH07_BOWELCHANGE_NEW	Num	8	Is this new since last visit?
145	SH07_BOWELCHANGE_FREQ	Num	8	Frequency of change in bowel habits
146	SH07_BOWELCHANGE_SEVERITY	Num	8	Severity of change in bowel habits
147	SH07_TARRYSTOOL_SLV	Num	8	Since your last visit, have you had tarry black stool or red blood in stool?

Num	Variable	Type	Len	Label
148	SH07_TARRYSTOOL_NEW	Num	8	Is this new since last visit?
149	SH07_TARRYSTOOL_FREQ	Num	8	Frequency of tarry black stool or red blood in stool
150	SH07_TARRYSTOOL_SEVERITY	Num	8	Severity of tarry black stool or red blood in stool
151	SH07_FASTHB_SLV	Num	8	Since your last visit, have you had heart beating unusually fast/skipping beats?
152	SH07_FASTHB_NEW	Num	8	Is this new since last visit?
153	SH07_FASTHB_FREQ	Num	8	Frequency of heart beating unusually fast/skipping beats
154	SH07_FASTHB_SEVERITY	Num	8	Severity of heart beating unusually fast/skipping beats
155	SH07_SLOWHB_SLV	Num	8	Since your last visit, have you had heart beating unusually slow?
156	SH07_SLOWHB_NEW	Num	8	Is this new since last visit?
157	SH07_SLOWHB_FREQ	Num	8	Frequency of heart beating unusually slow
158	SH07_SLOWHB_SEVERITY	Num	8	Severity of heart beating unusually slow
159	SH07_CHESTPAIN_SLV	Num	8	Since your last visit, have you had episodes of chest pain or heaviness in chest?
160	SH07_CHESTPAIN_NEW	Num	8	Is this new since last visit?
161	SH07_CHESTPAIN_FREQ	Num	8	Frequency of episodes of chest pain or heaviness in chest
162	SH07_CHESTPAIN_SEVERITY	Num	8	Severity of episodes of chest pain or heaviness in chest
163	SH07_ARRHYTHMIA_PRESENT	Num	8	Is an arrhythmia present on physical exam?
164	SH07_HEADACHES_SLV	Num	8	Since your last visit, have you had headaches so bad you had to stop what you were doing?
165	SH07_HEADACHES_NEW	Num	8	Is this new since last visit?
166	SH07_HEADACHES_FREQ	Num	8	Frequency of headaches so bad you had to stop what you were doing
167	SH07_HEADACHES_SEVERITY	Num	8	Severity of headaches so bad you had to stop what you were doing
168	SH07_STUFFYNOSE_SLV	Num	8	Since your last visit, have you had stuffy nose?
169	SH07_STUFFYNOSE_NEW	Num	8	Is this new since last visit?
170	SH07_STUFFYNOSE_FREQ	Num	8	Frequency of stuffy nose
171	SH07_STUFFYNOSE_SEVERITY	Num	8	Severity of stuffy nose
172	SH07_WHEEZING_SLV	Num	8	Since your last visit, have you had unusual shortness of breath or wheezing?
173	SH07_WHEEZING_NEW	Num	8	Is this new since last visit?
174	SH07_WHEEZING_FREQ	Num	8	Frequency of unusual shortness of breath or wheezing
175	SH07_WHEEZING_SEVERITY	Num	8	Severity of unusual shortness of breath or wheezing
176	SH07_WHEEZING_BRONCOSPASM	Num	8	Is there evidence for bronchospasm on auscultation of the chest?
177	SH07_TIREDNESS_SLV	Num	8	Since your last visit, have you had unusual tiredness or loss of pep?
178	SH07_TIREDNESS_NEW	Num	8	Is this new since last visit?
179	SH07_TIREDNESS_FREQ	Num	8	Frequency of unusual tiredness or loss of pep
180	SH07_TIREDNESS_SEVERITY	Num	8	Severity of unusual tiredness or loss of pep
181	SH07_ANKLESSWELL_SLV	Num	8	Since your last visit, have you had swelling of ankles?
182	SH07_ANKLESSWELL_NEW	Num	8	Is this new since last visit?
183	SH07_ANKLESSWELL_FREQ	Num	8	Frequency of swelling of ankles

Num	Variable	Type	Len	Label
184	SH07_ANKLESSWELL_SEVERITY	Num	8	Severity of swelling of ankles
185	SH07_CHF_PRESENT	Num	8	Is there evidence of CHF on physical exam?
186	SH07_DEPRESSION_SLV	Num	8	Since your last visit, have you had depression so bad it interfered with work, recreation, etc.?
187	SH07_DEPRESSION_NEW	Num	8	Is this new since last visit?
188	SH07_DEPRESSION_FREQ	Num	8	Frequency of depression so bad it interfered with work, recreation, etc.
189	SH07_DEPRESSION_SEVERITY	Num	8	Severity of depression so bad it interfered with work, recreation, etc.
190	SH07_MEMORY_SLV	Num	8	Since your last visit, have you had trouble with memory or concentration?
191	SH07_MEMORY_NEW	Num	8	Is this new since last visit?
192	SH07_MEMORY_FREQ	Num	8	Frequency of trouble with memory or concentration
193	SH07_MEMORY_SEVERITY	Num	8	Severity of trouble with memory or concentration
194	SH07_NIGHTMARES_SLV	Num	8	Since your last visit, have you had nightmares?
195	SH07_NIGHTMARES_NEW	Num	8	Is this new since last visit?
196	SH07_NIGHTMARES_FREQ	Num	8	Frequency of nightmares
197	SH07_NIGHTMARES_SEVERITY	Num	8	Severity of nightmares
198	SH07_SEXACTIVITY_SLV	Num	8	Since your last visit, have you had any changes in sexual activity?
199	SH07_SEXACTIVITY_NEW	Num	8	Is this new since last visit?
200	SH07_SEXACTIVITY_FREQ	Num	8	Frequency of changes in sexual activity
201	SH07_SEXACTIVITY_SEVERITY	Num	8	Severity of changes in sexual activity
202	SH07_SEXACTIVITY_LOI	Num	8	Change in sexual activity due to loss of interest?
203	SH07_SEXACTIVITY_FREQ_DECLINE	Num	8	Change in sexual activity due to decline in frequency?
204	SH07_SEXACTIVITY_LOE	Num	8	Change in sexual activity due to loss of enjoyment?
205	SH07_SEXACTIVITY_FUNC_IMPAIR	Num	8	Change in sexual activity due to functional impairment?
206	SH07_SLEEP_SLV	Num	8	Since your last visit, have you had trouble going to sleep/waking up early/getting back to sleep?
207	SH07_SLEEP_NEW	Num	8	Is this new since last visit?
208	SH07_SLEEP_FREQ	Num	8	Frequency of trouble going to sleep/waking up early/getting back to sleep
209	SH07_SLEEP_SEVERITY	Num	8	Severity of trouble going to sleep/waking up early/getting back to sleep
210	SH07_NIGHTURINATE_SLV	Num	8	Since your last visit, have you been waking up more frequently at night to urinate?
211	SH07_NIGHTURINATE_NEW	Num	8	Is this new since last visit?
212	SH07_NIGHTURINATE_FREQ	Num	8	Frequency of waking up more frequently at night to urinate
213	SH07_NIGHTURINATE_SEVERITY	Num	8	Severity of waking up more frequently at night to urinate
214	SH07_ANXIETY_SLV	Num	8	Since your last visit, have you had more worry or anxiety than usual?
215	SH07_ANXIETY_NEW	Num	8	Is this new since last visit?
216	SH07_ANXIETY_FREQ	Num	8	Frequency of more worry or anxiety than usual
217	SH07_ANXIETY_SEVERITY	Num	8	Severity of more worry or anxiety than usual

Num	Variable	Type	Len	Label
218	SH07_WEAK1SIDE_SLV	Num	8	Since your last visit, have you had weakness/numbness on one side or unexpected difficulties talking/thinking?
219	SH07_WEAK1SIDE_NEW	Num	8	Is this new since last visit?
220	SH07_WEAK1SIDE_FREQ	Num	8	Frequency of weakness/numbness on one side or unexpected difficulties talking/thinking
221	SH07_WEAK1SIDE_SEVERITY	Num	8	Severity of weakness/numbness on one side or unexpected difficulties talking/thinking
222	SH07_STROKE_EVIDENCE	Num	8	Is there evidence of a stroke on physical exam?
223	SH07_OTHERSYMPTOMS_SLV	Num	8	Since your last visit, have you had other relevant symptoms?
224	SH07_OTHERSYMPTOMS_NEW	Num	8	Is this new since last visit?
225	SH07_OTHERSYMPTOMS_FREQ	Num	8	Frequency of other relevant symptoms
226	SH07_OTHERSYMPTOMS_SEVERITY	Num	8	Severity of other relevant symptoms
227	SH07_OTHER_RELEVANT_SIGNS	Num	8	Are there other revelant signs on physical exam?
228	SH07_POSITIVE_RESPONSES_7AB	Num	8	Are there any positive responses in Side effects history section?
229	SH07_EXCLUDE	Num	8	In the clinician's judgement, should participant be excluded from SHEP due to any of these conditions?
230	SH07_EXCLUDE_COMMENTS	Num	8	Comments on exclusion
231	SH07_RANDOMIZATION_COMPLETE	Num	8	Randomization complete?
232	SH07_FORM_COMPLETER_CODE	Num	8	Code of person who completed randomization section
233	SH07_CLINIC_PHYSICIAN_CODE	Num	8	Code of clinic physician
234	SH07_DOUBLE_NEXT_DOSE	Num	8	If you miss a dose, have you been told to wait and double the next dose?
235	SH07_TAKE_NEXT_SCHEDULED_DOSE	Num	8	If you miss a dose, have you been told to just take next dose as usual?
236	SH07_REPORT_MISSED_DOSE	Num	8	If you miss a dose, have you been told to report the missed dose(s) at next clinic visit?
237	SH07_CALL_CLINIC	Num	8	If you miss a dose, have you been told to call SHEP clinic?
238	SH07_RECORD_MISSED_DOSE	Num	8	If you miss a dose, have you been told to record missed dose(s)?
239	SH07_TAKE_LATER	Num	8	If you miss a dose, have you been told to take it later?
240	SH07_NOTHING	Num	8	If you miss a dose, have you been told to do nothing?
241	SH07_OTHER	Num	8	If you miss a dose, have you been told to do something else?
242	SH07_PILLS_TIMESPERDAY	Num	8	How many times per day should you take your pills that were given today?
243	SH07_PILLS_NUMBER	Num	8	How many pills should you take each time?
244	SH07_PILLS_TIMEOFDAY	Num	8	When should you take these pills?
245	SH07_PILLS_REMINDER_NEEDED	Num	8	Will you need to do anything to help you to take the SHEP medicine(s)?
246	SH07_PILLS_SOMEONE_REMIND	Num	8	Will there be anyone who helps remind you to take the SHEP medicine(s)?
247	SH07_PILLS_SOMEONE_REMIND_WHO	Num	8	Who is the person that will help remind you?
248	SH07_PILLS_SOMEONE_REMIND_LIVE	Num	8	Does this person live with you?
249	SH07_REASON_IMPROVE_HEALTH	Num	8	Joined SHEP to improve my health
250	SH07_REASON_FREE_MED_CARE	Num	8	Joined SHEP for free medical care

Num	Variable	Type	Len	Label
251	SH07_REASON_CONTRIBUTE	Num	8	Joined SHEP to contribute to science
252	SH07_REASON_IMPROVE_OTH_HEALTH	Num	8	Joined SHEP to improve health of others
253	SH07_REASON_PLACE_TO_GO	Num	8	Joined SHEP for some place to go
254	SH07_REASON_SOMEONE_TO_TALK	Num	8	Joined SHEP for somone to talk with
255	SH07_REASON_OTHER	Num	8	Joined SHEP for other reasons
256	SH07_BLOOD_SAMPLE_DRAWN	Num	8	Blood sample drawn
257	SH07_DRAWDATE	Num	8	Date blood sample was drawn (in days from randomization)
258	SH07_OTHER_PARTICIPANT_ID	Num	8	Other participant ID
259	SH07_RECORD_TYPE	Num	8	SH07 Record Type
260	SH07_DATE_RECEIVED	Num	8	SH07 Date Tape Received from Metpath Lab
261	SH07_UPDATE_NUMBER	Num	8	SH07 Update Number
262	SH07_DATE_LAST_PROCESSED	Num	8	SH07 Date Last Processed
263	SH07_PAPER_COPY	Num	8	SH07 Paper Copy
264	SH07_CROSS_FORM_EDITS	Num	8	SH07 Cross Form Edits
265	SH07_SH30_COMPLETED	Num	8	SHORTCARE evalution (SH30) completed?
266	SH07_BLOOD_SAMPLE_COLLECTED	Num	8	Blood sample collected?
267	SH07_HEMATOLOGY_RESULTS	Num	8	Local hematology results entered on SH11?
268	SH07_SH33_COMPLETED	Num	8	Activities of daily life form (SH33) completed?
269	SH07_SH35_COMPLETED	Num	8	Behavioral evaluation - part II (SH35) completed?
270	SH07_REVIEWER_CODE	Num	8	Reviewer's code
271	SH07_POP_OBSERVED	Num	8	Pulse Obliteration Pressure, Observed value
272	SH07_POP_ZEROLVL	Num	8	Pulse Obliteration Pressure, Zero level
273	SH07_POP_CORRECTED	Num	8	Pulse Obliteration Pressure, Corrected value
274	SH07_POP_MAXZEROLVL_PLUS20	Num	8	Pulse Obliteration Pressure, Maximum zero level plus 20
275	SH07_POP_PEAK_INFLATION	Num	8	Pulse Obliteration Pressure, Peak inflation level

Data Set Name: sh08.sas7bdat

Num	Variable	Type	Len	Label
1	SH08_RECORD_LENGTH	Num	8	SH08 Record Length
2	SH08_KEYPUNCH_CODE	Num	8	SH08 Keypuncher Code
3	SH08_BATCHDATE	Num	8	SH08 Batch Date
4	SH08_VERIFYER_CODE	Num	8	SH08 Verifyer Code
5	SH08_DATE_LAST_MODIFIED	Num	8	SH08 Date record was last modified
6	SH08_TIME_LAST_MODIFIED	Num	8	SH08 Time record was last modified
7	SH08_EDIT_STATUS_CODE	Num	8	SH08 Edit status code
8	SHEPID	Num	8	SHEP ID
9	FORMNUM	Num	8	Form number
10	SH08_VERSNNUM	Num	8	SH08 Version number
11	SH08_VISITDATE	Num	8	Date of visit (in days from randomization
12	SH08_SEQUENCE	Num	8	SH08 sequence number
13	ACROSTIC	Num	8	Acrostic
14	SH08_VISIT_SEQNUM	Num	8	Sequence number of clinic visit
15	SH08_VISIT_TYPE_V1	Num	8	Type of visit (version 1)
16	SH08_VISIT_REASON_V1	Num	8	Reason for other interim visit (version 1)
17	SH08_VISIT_PLACE	Num	8	Place of visit
18	SH08_STEP1_MEDS_START_LV	Num	8	Were Step 1 medications started or increased at last visit?
19	SH08_STEP2_MEDS_START_LV	Num	8	Were Step 2 medications started or increased at last visit?
20	SH08_BP_WEIGHT_COMPLETED	Num	8	Pulse, BP and weight measured at this visit?
21	SH08_SH11_URINALYSIS_COMPLETED	Num	8	Dipstick urinalysis completed at this visit?
22	SH08_SH12_COMPLETED	Num	8	Blood (central) completed at this visit?
23	SH08_SH11_OTHLABWORK_COMPLETED	Num	8	Other lab work (local) completed at this visit?
24	SH08_SH40_COMPLETED	Num	8	Compliance completed at this visit?
25	SH08_SH41_COMPLETED	Num	8	General well-being completed at this visit?
26	SH08_SH42_COMPLETED	Num	8	Specific side effects completed at this visit?
27	SH08_SH43_COMPLETED	Num	8	Medication and Scheduling decision completed at this visit?
28	SH08_SH30_COMPLETED	Num	8	SHORTCARE/CES-D completed at this visit?
29	SH08_SH34_COMPLETED	Num	8	Social Network completed at this visit?
30	SH08_PULSE	Num	8	Pulse
31	SH08_CUFFSIZE	Num	8	Cuff size
32	SH08_SEATED_SYSTBP1	Num	8	Systolic blood pressure, seated (reading #1)
33	SH08_SEATED_DIASTBP1	Num	8	Diastolic blood pressure, seated (reading #1)
34	SH08_SEATED_SYSTBP_ZEROLVL1	Num	8	Systolic zero level, seated (reading #1)
35	SH08_SEATED_DIASTBP_ZEROLVL1	Num	8	Diastolic zero level, seated (reading #1)
36	SH08_SEATED_SYSTBP1_CORR	Num	8	Corrected systolic blood pressure, seated (reading #1)

Num	Variable	Type	Len	Label
37	SH08_SEATED_DIASTBP1_CORR	Num	8	Corrected diastolic blood pressure, seated (reading #1)
38	SH08_SEATED_SYSTBP2	Num	8	Systolic blood pressure, seated (reading #2)
39	SH08_SEATED_DIASTBP2	Num	8	Diastolic blood pressure, seated (reading #2)
40	SH08_SEATED_SYSTBP_ZEROLVL2	Num	8	Systolic zero level, seated (reading #2)
41	SH08_SEATED_DIASTBP_ZEROLVL2	Num	8	Diastolic zero level, seated (reading #2)
42	SH08_SEATED_SYSTBP2_CORR	Num	8	Corrected systolic blood pressure, seated (reading #2)
43	SH08_SEATED_DIASTBP2_CORR	Num	8	Corrected diastolic blood pressure, seated (reading #2)
44	SH08_SEATED_SYSTBP_SUM	Num	8	Sum of two corrected Systolic blood pressure readings, seated
45	SH08_SEATED_DIASTBP_SUM	Num	8	Sum of two corrected Diastolic blood pressure readings, seated
46	SH08_SEATED_SYSTBP_AVG	Num	8	Average of two corrected Systolic blood pressure readings, seated
47	SH08_SEATED_DIASTBP_AVG	Num	8	Average of two corrected Diastolic blood pressure readings, seated
48	SH08_STAND_PULSE_1MIN	Num	8	Pulse, standing (1 minute)
49	SH08_STAND_SYSTBP_1MIN	Num	8	Systolic blood pressure, standing (1 minute)
50	SH08_STAND_DIASTBP_1MIN	Num	8	Diastolic blood pressure, standing (1 minute)
51	SH08_STAND_SYSTBP_ZEROLVL_1MIN	Num	8	Systolic blood pressure zero level, standing (1 minute)
52	SH08_STAND_DIASTBP_ZEROLVL_1MIN	Num	8	Diastolic blood pressure zero level, standing (1 minute)
53	SH08_STAND_SYSTBP_1MIN_CORR	Num	8	Corrected systolic blood pressure, standing (1 minute)
54	SH08_STAND_DIASTBP_1MIN_CORR	Num	8	Corrected diastolic blood pressure, standing (1 minute)
55	SH08_STAND_PULSE_3MIN	Num	8	Pulse, standing (3 minute)
56	SH08_STAND_SYSTBP_3MIN	Num	8	Systolic blood pressure, standing (3 minute)
57	SH08_STAND_DIASTBP_3MIN	Num	8	Diastolic blood pressure, standing (3 minute)
58	SH08_STAND_SYSTBP_ZEROLVL_3MIN	Num	8	Systolic blood pressure zero level, standing (3 minute)
59	SH08_STAND_DIASTBP_ZEROLVL_3MIN	Num	8	Diastolic blood pressure zero level, standing (3 minute)
60	SH08_STAND_SYSTBP_3MIN_CORR	Num	8	Corrected systolic blood pressure, standing (3 minute)
61	SH08_STAND_DIASTBP_3MIN_CORR	Num	8	Corrected diastolic blood pressure, standing (3 minute)
62	SH08_SYMPTOMS_STANDING	Num	8	Did participant volunteer any symptoms on standing?
63	SH08_DIZZINESS_STANDING	Num	8	Did participant volunteer dizziness on standing?
64	SH08_OTHER_SYMPTOMS_STANDING	Num	8	Did participant volunteer other symptoms on standing?
65	SH08_WEIGHT	Num	8	Weight (pounds)
66	SH08_OBSERVER_CODE	Num	8	SH08 Observer code
67	SH08_ACTIONSREQ_NONE	Num	8	Action required as a result of this visit, Nothing
68	SH08_ACTIONSREQ_SH20	Num	8	Action required as a result of this visit, Initial Notification of Morbid Event (SH20)
69	SH08_ACTIONSREQ_SH27	Num	8	Action required as a result of this visit, Neurologic Exam for Stroke (SH27)
70	SH08_ACTIONSREQ_SH28	Num	8	Action required as a result of this visit, Neurologic Exam for TIA (SH28)
71	SH08_ACTIONSREQ_SH48	Num	8	Action required as a result of this visit, Deviation from Protocol (SH48)
72	SH08_ACTIONSREQ_SH31	Num	8	Action required as a result of this visit, Dementia Referral (SH31)

Num	Variable	Type	Len	Label
73	SH08_ACTIONSREQ_SH32	Num	8	Action required as a result of this visit, Depression Referral (SH32)
74	SH08_ACTIONSREQ_SH49	Num	8	Action required as a result of this visit, Report of Unblinding (SH49)
75	SH08_VISIT_COMMENTS	Num	8	Comments on this visit
76	SH08_NEXT_VISIT_DATE	Num	8	Date of next clinic visit (in days from randomization)
77	SH08_NEXT_VISIT_TIME_HR	Num	8	Time of next clinic visit (hour)
78	SH08_NEXT_VISIT_TIME_MIN	Num	8	Time of next clinic visit (minutes)
79	SH08_NEXT_VISIT_TIME_PERIOD	Num	8	Time period of next clinic visit (am/pm)
80	SH08_RECORD_TYPE	Num	8	SH08 Record Type
81	SH08_DATE_RECEIVED	Num	8	SH08 Date Tape Received from Metpath Lab
82	SH08_UPDATE_NUMBER	Num	8	SH08 Update Number
83	SH08_DATE_LAST_PROCESSED	Num	8	SH08 Date Last Processed
84	SH08_PAPER_COPY	Num	8	SH08 Paper Copy
85	SH08_CROSS_FORM_EDITS	Num	8	SH08 Cross Form Edits
86	SH08_VISIT_TYPE_V2	Num	8	Type of visit (version 2)
87	SH08_VISIT_SCHEDULED	Num	8	Visit scheduled by:
88	SH08_VISIT_REASON_BP	Num	8	Reason for visit, BP check
89	SH08_VISIT_REASON_K	Num	8	Reason for visit, Potassium re-check (local)
90	SH08_VISIT_REASON_SIDE_EFFECTS	Num	8	Reason for visit, Possible side effects
91	SH08_VISIT_REASON_OTHER	Num	8	Reason for visit, Other
92	SH08_PROTOCOL_COMPLETED	Num	8	Protocol review completed at this visit?
93	SH08_BEHAVIOR_EVAL_COMPLETED	Num	8	Behavioral evaluation - Part 2 completed this visit?
94	SH08_REVIEWER_CODE	Num	8	SH08 Reviewer Code
95	SH08_POP_OBSERVED	Num	8	Pulse Obliteration Pressure, Observed value
96	SH08_POP_ZEROLVL	Num	8	Pulse Obliteration Pressure, Zero level
97	SH08_POP_CORRECTED	Num	8	Pulse Obliteration Pressure, Corrected value
98	SH08_POP_MAXZEROLVL_PLUS20	Num	8	Pulse Obliteration Pressure, Maximum zero level plus 20
99	SH08_POP_PEAK_INFLATION	Num	8	Pulse Obliteration Pressure, Peak inflation level
100	SH08_SLV_UNWELL	Num	8	Have you felt unwell in any way since your last visit; has anything been bothering you?
101	SH08_SLV_DIFFERENT_PROBS	Num	8	Are any of these problems different from the way things were at your last visit?
102	SH08_SLV_DOC_VISIT	Num	8	Since your last visit, have you seen a doctor for any reason?
103	SH08_SLV_HOSP	Num	8	Since your last visit, have you been in the hospital for any reason?
104	SH08_SLV_HOSP_NUMVISITS	Num	8	Number of times in hosptial since last visit
105	SH08_SLV_HOSP_VISIT1_DATE	Num	8	Date of admission to hospital (Visit #1) (in days from randomization)
106	SH08_SLV_HOSP_VISIT1_DAYS	Num	8	Number of days spent in hospital (Visit #1)
107	SH08_SLV_HOSP_VISIT2_DATE	Num	8	Date of admission to hospital (Visit #2) (in days from randomization)
108	SH08_SLV_HOSP_VISIT2_DAYS	Num	8	Number of days spent in hospital (Visit #2)
109	SH08_SLV_HOSP_VISIT3_DATE	Num	8	Date of admission to hospital (Visit #3) (in days from randomization)

Num	Variable	Type	Len	Label
110	SH08_SLV_HOSP_VISIT3_DAYS	Num	8	Number of days spent in hospital (Visit #3)
111	SH08_NUMBNESS_SLV	Num	8	Since last visit, have you had any sudden feeling of numbess/tingling/loss of feeling in arm, hand, leg, foot or face?
112	SH08_NUMBNESS_NUM	Num	8	How many attacks of such numbness/tingling have you had?
113	SH08_NUMBNESS_LENGTH	Num	8	How long did each of the attacks of numbness/tingling usually last?
114	SH08_PARALYSIS_SLV	Num	8	Since last visit, have you had any sudden attacks of paralysis/loss of use in arm, hand, leg or foot?
115	SH08_PARALYSIS_NUM	Num	8	How many attacks of such paralysis have you had?
116	SH08_PARALYSIS_LENGTH	Num	8	How long did each of the attacks of paralysis usually last?
117	SH08_LOSSEYESIGHT_SLV	Num	8	Since last visit, have you had any sudden loss of eyesight/blurring of vision for short period of time?
118	SH08_LOSSEYESIGHT_PART_LOST	Num	8	What part of your vision was affected?
119	SH08_LOSSEYESIGHT_NUM	Num	8	How many attacks of loss of eyesight/blurring of vision have you had?
120	SH08_LOSSEYESIGHT_LENGTH	Num	8	How long did each of the attacks of loss of eyesight usually last?
121	SH08_LOSSSPEECH_SLV	Num	8	Since last visit, have you had any sudden attacks of loss of speech?
122	SH08_LOSSSPEECH_NUM	Num	8	How many attacks of loss of speech have you had?
123	SH08_LOSSSPEECH_LENGTH	Num	8	How long did each of the attacks of loss of speech usually last?
124	SH08_OTHERSYMPTS_DIZZY	Num	8	Since last visit, have you experienced dizziness?
125	SH08_OTHERSYMPTS_VERTIGO	Num	8	Since last visit, have you experienced vertigo?
126	SH08_OTHERSYMPTS_LOSSBALANCE	Num	8	Since last visit, have you experienced loss of balance?
127	SH08_OTHERSYMPTS_WALK	Num	8	Since last visit, have you experienced difficulty walking?
128	SH08_OTHERSYMPTS_FAINT	Num	8	Since last visit, have you experienced blackouts or fainting?
129	SH08_OTHERSYMPTS_FALLS	Num	8	Since last visit, have you experienced frequent falls?
130	SH08_OTHERSYMPTS_NUM	Num	8	About how many total attacks of all of these conditions do you think you ever had?
131	SH08_OTHERSYMPTS_LENGTH	Num	8	How long did the attack(s) usually last?
132	SH08_STROKE_SLV	Num	8	Since your last SHEP visit, have you been told by a doctor or otherwise learned that you may have had a stroke?
133	SH08_STOPPED_MEDS_SLV	Num	8	Have you stopped taking any medications since your last visit?
134	SH08_INC_DEC_MEDS_SLV	Num	8	Have you increased or decreased any medications since your last visit?
135	SH08_NEW_MEDS_SLV	Num	8	Have you started taking any new medications since your last visit?
136	SH08_BRING_NONSHEP_MEDS	Num	8	Did the participant bring all non-SHEP medications to the clinic at this visit?
137	SH08_SYMPTOMS_REPORTED	Num	8	Did the participant volunteer any complaints/problems?
138	SH08_PROBS_STUDY_RELATED	Num	8	Are these problems that, in your opinion, may be related to study medications?
139	SH08_SIDE_EFFECTS	Num	8	Are there positive responses to items 16-25 or on Side effects questionnaire (SH42)?
140	SH08_SIDE_EFFECTS_STROKE	Num	8	In the judgement of the SHEP clinician, are any of these positive/abnormal responses a result of a stroke?

Num	Variable	Type	Len	Label
141	SH08_SIDE_EFFECTS_MYOINFARC	Num	8	In the judgement of the SHEP clinician, are any of these positive/abnormal responses a result of acute myocardial infarction?
142	SH08_SIDE_EFFECTS_LTVENTFAIL	Num	8	In the judgement of the SHEP clinician, are any of these positive/abnormal responses a result of left ventricular failure?
143	SH08_SIDE_EFFECTS_TIA	Num	8	In the judgement of the SHEP clinician, are any of these positive/abnormal responses a result of TIA?
144	SH08_SIDE_EFFECTS_OTHCARDIO	Num	8	In the judgement of the SHEP clinician, are any of these positive/abnormal responses a result of other cardiovascular hospitalization?
145	SH08_SIDE_EFFECTS_OTHHOSP	Num	8	In the judgement of the SHEP clinician, are any of these positive/abnormal responses a result of any other hospitalization?
146	SH08_SIDE_EFFECTS_NURSEHOME	Num	8	In the judgement of the SHEP clinician, are any of these positive/abnormal responses a result of intermediate or skilled care nursing home admission?
147	SH08_HOSPITALIZED	Num	8	Was the participant hospitalized or seen by a physician for any of the side effects?
148	SH08_CONDITIONS_FROM_SHEPMEDS	Num	8	Does the participant think that any of these conditions are due to the SHEP medications?
149	SH08_COMPLETER_CODE	Num	8	Code of person completing Side effects section of SH08
150	SH08_SHEP_MEDS_PRESCRIBED_LV	Num	8	At the last visit, were SHEP medications prescribed in dosages specified in the protocol?
151	SH08_SHEP_MEDS_ALTERED_SLV	Num	8	Since the last visit, have SHEP medications been altered to dosages other than prescribed at the last visit?
152	SH08_OPEN_ANTIHYPER_MEDS_SLV	Num	8	Since the last visit, have open-label antihypertensive medications been prescribed or taken?
153	SH08_DEVIATION_REPORTED	Num	8	Has this deviation already been reported on a Deviation from Protocol form (SH48)?
154	SH08_DEVIATION_CAUSE	Num	8	What has happened with respect to the problem which caused this deviation from protocol?
155	SH08_DEVIATION_SERIOUS	Num	8	Have any other potentially serious conditions arisen since last visit which are probably a result of the use of SHEP medications?
156	SH08_DEVIATION_RESTORE	Num	8	At this visit, do you plan to restore participant to SHEP drugs and doses specified in protocol? (including discontinuing open-label antihypertensives)
157	SH08_DEVIATION_SIDE_EFFECTS	Num	8	Reason for not returning to protocol at this visit, Side effects judged to be severe enough to deviate from protocol
158	SH08_DEVIATION_ESCAPE_BP	Num	8	Reason for not returning to protocol at this visit, Participant has reached escape blood pressure
159	SH08_DEVIATION_PRIVATE_MD	Num	8	Reason for not returning to protocol at this visit, Private MD has prescribed alternative BP therapy
160	SH08_DEVIATION_PARTICIPANT	Num	8	Reason for not returning to protocol at this visit, Participant request
161	SH08_DEVIATION_OTHER	Num	8	Reason for not returning to protocol at this visit, Other
162	SH08_SIDE_EFFECTS_SHEPMEDS	Num	8	In judgment of SHEP clinician, are any of the positive/abnormal responses in General Well-Being/Side effects sections related to current use of SHEP meds?

Num	Variable	Type	Len	Label
163	SH08_DEVIATION_REQUIRED	Num	8	In judgment of SHEP clinician and physician, do any of these responses require a deviation from protocol in prescribing SHEP medication?
164	SH08_CONDITIONS_HARMFUL	Num	8	Are any of these conditions possibly harmful to the participant?
165	SH08_OTHER_REASONS	Num	8	Are there reasons other than these that require a deviation from protocol in prescribing SHEP meds (e.g. interference from other meds)?
166	SH08_STEP1MEDS_LV_V2	Num	8	Step 1 Medication prescription at last visit? (version 2)
167	SH08_STEP1MEDS_LV_BOTTLE	Num	8	Bottle number of Step 1 medications from last visit
168	SH08_STEP2MEDS_LV_V2	Num	8	Step 2 Medication prescription at last visit? (version 2)
169	SH08_STEP2MEDS_LV_BOTTLE	Num	8	Bottle number of Step 2 mediations from last visit
170	SH08_OL_ANTIHYPER_LV_V2	Num	8	Open-label antihypertensives prescribed last visit? (version 2)
171	SH08_POTASSIUM_SUPP_LV_V2	Num	8	Potassium supplement prescribed last visit? (version 2)
172	SH08_POTASSIUM_DOSE_LV	Num	8	Dose of potassium supplement prescribed last visit (meq/day)
173	SH08_URIC_ACID_LV_V2	Num	8	Uric acid agent prescribed last visit? (version 2)
174	SH08_NOCHANGE_MEDS_TV	Num	8	No change to medication prescriptions at this visit?
175	SH08_STEP1MEDS_TV_V2	Num	8	Step 1 Medication prescriptions at this visit? (version 2)
176	SH08_STEP1MEDS_TV_BOTTLE	Num	8	Bottle number of Step 1 medications from this visit
177	SH08_STEP2MEDS_TV_V2	Num	8	Step 2 Medication prescriptions at this visit? (version 2)
178	SH08_STEP2MEDS_TV_BOTTLE	Num	8	Bottle number of Step 2 mediations from this visit
179	SH08_OL_ANTIHYPER_TV_V2	Num	8	Open-label antihypertensives prescribe this visit? (version 2)
180	SH08_POTASSIUM_SUPP_TV_V2	Num	8	Potassium supplement prescribed this visit? (version 2)
181	SH08_POTASSIUM_DOSE_TV	Num	8	Dose of potassium supplement prescribed this visit (meq/day)
182	SH08_URIC_ACID_TV_V2	Num	8	Uric acid agent prescribed this visit? (version 2)
183	SH08_CLINICIAN_CODE	Num	8	Code of clinician completing SH08 medication section
184	SH08_SH33_COMPLETED	Num	8	Activities of Daily Life completed this visit?
185	SH08_BLINDED_MEDS_SLV	Num	8	Were any SHEP blinded medications prescribed at the last visit?
186	SH08_BLINDED_MEDS_DC_SLV	Num	8	Were all SHEP blinded medications discontinued since the last visit?
187	SH08_BLINDED_MEDS_OTH_SLV	Num	8	Were there any other changes made in the SHEP blinded medications since the last visit?
188	SH08_OL_ANTIHYPER_MEDS_LV	Num	8	Were open-label antihypertensive medications prescribed at last visit (any source)?
189	SH08_OL_ANTIHYPER_MEDS_SLV	Num	8	Were open-label antihypertensive medications prescribed since last visit (any source)?
190	SH08_ESCAPE_BP_TV	Num	8	Has the participant reached the escape blood pressure at this visit?
191	SH08_VISIT1_BPDATE	Num	8	Date of visit #1 (in days from randomization)
192	SH08_VISIT1_SYSTBP	Num	8	Systolic blood pressure at visit #1
193	SH08_VISIT1_DIASTBP	Num	8	Diastolic blood pressure at visit #1
194	SH08_VISIT2_BPDATE	Num	8	Date of visit #2 (in days from randomization)
195	SH08_VISIT2_SYSTBP	Num	8	Systolic blood pressure at visit #2
196	SH08_VISIT2_DIASTBP	Num	8	Diastolic blood pressure at visit #2

Num	Variable	Type	Len	Label
197	SH08_VISIT3_BPDATE	Num	8	Date of visit #3 (in days from randomization)
198	SH08_VISIT3_SYSTBP	Num	8	Systolic blood pressure at visit #3
199	SH08_VISIT3_DIASTBP	Num	8	Diastolic blood pressure at visit #3
200	SH08_Q38_A	Num	8	Will you be prescribing SHEP medications according to prescribed SHEP blood pressure treatment regimen at this visit?
201	SH08_Q38_B	Num	8	Will you be prescribing open-label antihypertensive medications at this visit?
202	SH08_Q38_C	Num	8	Reason for not prescribing SHEP medications according to BP regimen, Participant reached escape blood pressure
203	SH08_Q38_D	Num	8	Reason for not prescribing SHEP medications according to BP regimen, Possible/probably side effects in judgement of SHEP clinician
204	SH08_Q38_E	Num	8	Reason for not prescribing SHEP medications according to BP regimen, Perceived side effects in judgement of participant
205	SH08_Q38_F	Num	8	Reason for not prescribing SHEP medications according to BP regimen, Stroke
206	SH08_Q38_G	Num	8	Reason for not prescribing SHEP medications according to BP regimen, Myocardial infarction
207	SH08_Q38_H	Num	8	Reason for not prescribing SHEP medications according to BP regimen, Left ventricular failure
208	SH08_Q38_I	Num	8	Reason for not prescribing SHEP medications according to BP regimen, Angina
209	SH08_Q38_J	Num	8	Reason for not prescribing SHEP medications according to BP regimen, Other medical reason
210	SH08_Q38_K	Num	8	Reason for not prescribing SHEP medications according to BP regimen, Participant refusal or preference
211	SH08_Q38_L	Num	8	Reason for not prescribing SHEP medications according to BP regimen, Private MD request
212	SH08_Q38_M	Num	8	Reason for not prescribing SHEP medications according to BP regimen, Other
213	SH08_STEP1MEDS_LV_V3	Num	8	Step 1 Medication prescription at last visit? (version 3)
214	SH08_STEP2MEDS_LV_V3	Num	8	Step 2 Medication prescription at last visit? (version 3)
215	SH08_OL_DRUGS_LV	Num	8	Open-label drugs prescribed last visit?
216	SH08_OL_DRUGS_SOURCE_LV	Num	8	Source of open label drugs last visit
217	SH08_POTASSIUM_SUPP_LV_V3	Num	8	Potassium supplement prescribed last visit? (version 3)
218	SH08_URIC_ACID_LV_V3	Num	8	Uric acid agent prescribed last visit? (version 3)
219	SH08_STEP1MEDS_TV_V3	Num	8	Step 1 Medication prescriptions at this visit? (version 3)
220	SH08_STEP2MEDS_TV_V3	Num	8	Step 2 Medication prescriptions at this visit? (version 3)
221	SH08_OL_DRUGS_TV	Num	8	Open-label drugs prescribed this visit?
222	SH08_OL_DRUGS_SOURCE_TV	Num	8	Source of open label drugs this visit
223	SH08_POTASSIUM_SUPP_TV_V3	Num	8	Potassium supplement prescribed this visit? (version 2)
224	SH08_URIC_ACID_TV_V3	Num	8	Uric acid agent prescribed this visit? (version 2)
225	SH08_NEXT_SCHEDULED_APPT	Num	8	Scheduled next appointment?

Data Set Name: sh09.sas7bdat

Num	Variable	Type	Len	Label
1	SH09_RECORD_LENGTH	Num	8	SH09 Record Length
2	SH09_KEYPUNCH_CODE	Num	8	SH09 Keypuncher Code
3	SH09_BATCHDATE	Num	8	SH09 Batch Date
4	SH09_VERIFYER_CODE	Num	8	SH09 Verifyer Code
5	SH09_DATE_LAST_MODIFIED	Num	8	SH09 Date record was last modified
6	SH09_TIME_LAST_MODIFIED	Num	8	SH09 Time record was last modified
7	SH09_EDIT_STATUS_CODE	Num	8	SH09 Edit status code
8	SHEPID	Num	8	SHEP ID
9	FORMNUM	Num	8	Form number
10	SH09_VERSNNUM	Num	8	SH09 Version number
11	SH09_VISITDATE	Num	8	Date of visit (in days from randomization
12	SH09_SEQUENCE	Num	8	SH09 sequence number
13	ACROSTIC	Num	8	Acrostic
14	SH09_VISIT_SEQNUM	Num	8	Sequence number of clinic visit
15	SH09_STUDYYR	Num	8	Year of Study
16	SH09_VISIT_LOCATION	Num	8	Location of visit
17	SH09_VISIT_TIME_HR	Num	8	Time of visit (hour)
18	SH09_VISIT_TIME_MIN	Num	8	Time of visit (minutes)
19	SH09_VISIT_TIME_PD	Num	8	Time of visit (am/pm)
20	SH09_SH44_DTV	Num	8	Annual Medical and Medication and Habits History form (SH44) done this visit?
21	SH09_SH10_DTV	Num	8	ECG and two-minute rhythm strip (SH10) done this visit?
22	SH09_URINALYSIS_DTV	Num	8	Dipstick urinalysis done this visit?
23	SH09_URINE_SAMP_DTV	Num	8	Urine sample (central) done this visit?
24	SH09_BLOOD_SAMP_DTV	Num	8	Blood sample (local) done this visit?
25	SH09_FAST_BLOOD_SAMP_DTV	Num	8	Fasting blood sample (central) done this visit?
26	SH09_NONFAST_BLOOD_SAMP_DTV	Num	8	Non-fasting blood sample (central) done this visit?
27	SH09_SHORTCARE_DTV	Num	8	SHORTCARE/CES-D done this visit?
28	SH09_SH33_DTV	Num	8	Activities of Daily Life done this visit?
29	SH09_SH34_DTV	Num	8	Social Network done this visit?
30	SH09_SH35_DTV	Num	8	Behavioral Evaluation Part II done this visit?
31	SH09_ACTIONSREQ_NONE	Num	8	Actions required as a result of this visit, None
32	SH09_ACTIONSREQ_SH20	Num	8	Actions required as a result of this visit, Initial Notification of Morbid Event (SH20)
33	SH09_ACTIONSREQ_SH27	Num	8	Actions required as a result of this visit, SHEP Neurological Evaluation for Strokes (SH27)
34	SH09_ACTIONSREQ_SH28	Num	8	Actions required as a result of this visit, SHEP Neurological Evaluation for TIA (SH28)

Num	Variable	Type	Len	Label
35	SH09_ACTIONSREQ_SH31	Num	8	Actions required as a result of this visit, Dementia Referral (SH31)
36	SH09_ACTIONSREQ_SH32	Num	8	Actions required as a result of this visit, Depression Referral (SH32)
37	SH09_ACTIONSREQ_SH48	Num	8	Actions required as a result of this visit, Deviation from Protocol (SH48)
38	SH09_ACTIONSREQ_SH49	Num	8	Actions required as a result of this visit, Report of Unblinding (SH49)
39	SH09_NEXT_VISIT_DATE	Num	8	Date of next clinic visit (in days from randomization)
40	SH09_NEXT_VISIT_TIME_HR	Num	8	Time of next clinic visit (hour)
41	SH09_NEXT_VISIT_TIME_MIN	Num	8	Time of next clinic visit (minutes)
42	SH09_NEXT_VISIT_TIME_PD	Num	8	Time of next clinic visit (am/pm)
43	SH09_VISIT_COMPLETED_TIME_HR	Num	8	Time visit completed (hour)
44	SH09_VISIT_COMPLETED_TIME_MIN	Num	8	Time visit completed (minutes)
45	SH09_VISIT_COMPLETED_TIME_PD	Num	8	Time visit completed (am/pm)
46	SH09_REVIEWER_CODE	Num	8	Code of person reviewing SH09
47	SH09_PULSE	Num	8	Pulse
48	SH09_CUFFSIZE	Num	8	Cuff Size
49	SH09_POP_OBSERVED	Num	8	Pulse Obliteration Pressure, Observed value
50	SH09_POP_ZEROLVL	Num	8	Pulse Obliteration Pressure, Zero level
51	SH09_POP_CORRECTED	Num	8	Pulse Obliteration Pressure, Corrected value
52	SH09_POP_MAXZEROLVL_PLUS20	Num	8	Pulse Obliteration Pressure, Maximum zero level plus 20
53	SH09_POP_PEAK_INFLATION	Num	8	Pulse Obliteration Pressure, Peak inflation level
54	SH09_SEATED_SYSTBP1	Num	8	Systolic blood pressure, seated (reading #1)
55	SH09_SEATED_DIASTBP1	Num	8	Diastolic blood pressure, seated (reading #1)
56	SH09_SEATED_SYSTBP_ZEROLVL1	Num	8	Systolic zero level, seated (reading #1)
57	SH09_SEATED_DIASTBP_ZEROLVL1	Num	8	Diastolic zero level, seated (reading #1)
58	SH09_SEATED_SYSTBP1_CORR	Num	8	Corrected systolic blood pressure, seated (reading #1)
59	SH09_SEATED_DIASTBP1_CORR	Num	8	Corrected diastolic blood pressure, seated (reading #1)
60	SH09_SEATED_SYSTBP2	Num	8	Systolic blood pressure, seated (reading #2)
61	SH09_SEATED_DIASTBP2	Num	8	Diastolic blood pressure, seated (reading #2)
62	SH09_SEATED_SYSTBP_ZEROLVL2	Num	8	Systolic zero level, seated (reading #2)
63	SH09_SEATED_DIASTBP_ZEROLVL2	Num	8	Diastolic zero level, seated (reading #2)
64	SH09_SEATED_SYSTBP2_CORR	Num	8	Corrected systolic blood pressure, seated (reading #2)
65	SH09_SEATED_DIASTBP2_CORR	Num	8	Corrected diastolic blood pressure, seated (reading #2)
66	SH09_SEATED_SYSTBP_SUM	Num	8	Sum of two corrected Systolic blood pressure readings, seated
67	SH09_SEATED_DIASTBP_SUM	Num	8	Sum of two corrected Diastolic blood pressure readings, seated
68	SH09_SEATED_SYSTBP_AVG	Num	8	Average of two corrected Systolic blood pressure readings, seated
69	SH09_SEATED_DIASTBP_AVG	Num	8	Average of two corrected Diastolic blood pressure readings, seated

Num	Variable	Type	Len	Label
70	SH09_STAND_PULSE_1MIN	Num	8	Pulse, standing (1 minute)
71	SH09_STAND_SYSTBP_1MIN	Num	8	Systolic blood pressure, standing (1 minute)
72	SH09_STAND_DIASTBP_1MIN	Num	8	Diastolic blood pressure, standing (1 minute)
73	SH09_STAND_SYSTBP_ZEROLVL_1MIN	Num	8	Systolic blood pressure zero level, standing (1 minute)
74	SH09_STAND_DIASTBP_ZEROLVL_1MIN	Num	8	Diastolic blood pressure zero level, standing (1 minute)
75	SH09_STAND_SYSTBP_1MIN_CORR	Num	8	Corrected systolic blood pressure, standing (1 minute)
76	SH09_STAND_DIASTBP_1MIN_CORR	Num	8	Corrected diastolic blood pressure, standing (1 minute)
77	SH09_STAND_PULSE_3MIN	Num	8	Pulse, standing (3 minute)
78	SH09_STAND_SYSTBP_3MIN	Num	8	Systolic blood pressure, standing (3 minute)
79	SH09_STAND_DIASTBP_3MIN	Num	8	Diastolic blood pressure, standing (3 minute)
80	SH09_STAND_SYSTBP_ZEROLVL_3MIN	Num	8	Systolic blood pressure zero level, standing (3 minute)
81	SH09_STAND_DIASTBP_ZEROLVL_3MIN	Num	8	Diastolic blood pressure zero level, standing (3 minute)
82	SH09_STAND_SYSTBP_3MIN_CORR	Num	8	Corrected systolic blood pressure, standing (3 minute)
83	SH09_STAND_DIASTBP_3MIN_CORR	Num	8	Corrected diastolic blood pressure, standing (3 minute)
84	SH09_SYMPTOMS_STANDING	Num	8	Did participant volunteer any symptoms on standing?
85	SH09_DIZZINESS_STANDING	Num	8	Did participant volunteer dizziness on standing?
86	SH09_OTHER_SYMPTOMS_STANDING	Num	8	Did participant volunteer other symptoms on standing?
87	SH09_PHONE_BP_SLV	Num	8	Since the last time that you came to the SHEP clinic, have you had your blood pressure taken? (telephone interviews)
88	SH09_PHONE_BP_DATE_SLV_MO	Num	8	When was the last time you had your blood pressure taken (month)? (telephone interviews)
89	SH09_PHONE_BP_DATE_SLV_YR	Num	8	When was the last time you had your blood pressure taken (year)? (telephone interviews)
90	SH09_PHONE_SYSTBP_SLV	Num	8	Systolic blood pressure at last measurement (telephone interviews)
91	SH09_PHONE_DIASTBP_SLV	Num	8	Diastolic blood pressure at last measurement (telephone interviews)
92	SH09_OBSERVER_CODE	Num	8	SH09 Observer code
93	SH09_COMP_MISSED_MEDS_LAST7	Num	8	Have you missed taking your SHEP medicines anytime in the past 7 days?
94	SH09_COMP_NUM_DAYS_MISSED	Num	8	Number of days missed taking your SHEP medicines in past 7 days?
95	SH09_COMP_REASON_MISSED_UNWELL	Num	8	Reason of missing taking medicine, Wasn't feeling well
96	SH09_COMP_REASON_MISSED_MADEILL	Num	8	Reason of missing taking medicine, Medicine made participant ill
97	SH09_COMP_REASON_MISSED_FORGOT	Num	8	Reason of missing taking medicine, Just forgot
98	SH09_COMP_REASON_MISSED_AWAY	Num	8	Reason of missing taking medicine, Away from home/didn't have medicine
99	SH09_COMP_REASON_MISSED_RANOUT	Num	8	Reason of missing taking medicine, Ran out of medicine
100	SH09_COMP_REASON_MISSED_NOWANT	Num	8	Reason of missing taking medicine, Didn't want to take
101	SH09_COMP_REASON_MISSED_DOCTOR	Num	8	Reason of missing taking medicine, Doctor (usual source of care) told me to stop

Num	Variable	Type	Len	Label
102	SH09_COMP_REASON_MISSED_OTHER	Num	8	Reason of missing taking medicine, Other
103	SH09_COMP_ACTION_MISSED_DOUBLE	Num	8	Action when missed taking SHEP medicine, Waited and doubled next dose
104	SH09_COMP_ACTION_MISSED_USUAL	Num	8	Action when missed taking SHEP medicine, Did nothing/took usual dose next time
105	SH09_COMP_ACTION_MISSED_REPORT	Num	8	Action when missed taking SHEP medicine, Reports missed dose(s) at next clinic visit
106	SH09_COMP_ACTION_MISSED_CALL	Num	8	Action when missed taking SHEP medicine, Called SHEP clinic
107	SH09_COMP_ACTION_MISSED_RECORD	Num	8	Action when missed taking SHEP medicine, Recorded missed dose(s)
108	SH09_COMP_ACTION_MISSED_TOOK	Num	8	Action when missed taking SHEP medicine, Took it later
109	SH09_COMP_ACTION_MISSED_OTHER	Num	8	Action when missed taking SHEP medicine, Other
110	SH09_COMP_STEP1_TIMESPERDAY	Num	8	How many times a day do you take your C1/C2 (Step 1 drug)?
111	SH09_COMP_STEP1_NUMPILLS	Num	8	How many Step 1 pills do you take each time?
112	SH09_COMP_STEP1_TIMEOFDAY	Num	8	When do you take your step 1 pills?
113	SH09_COMP_STEP2_TIMESPERDAY	Num	8	How many times a day do you take your A1/A2/R (Step 2 drug)?
114	SH09_COMP_STEP2_NUMPILLS	Num	8	How many Step 2 pills do you take each time?
115	SH09_COMP_STEP2_TIMEOFDAY	Num	8	When do you take your Step 2 pills?
116	SH09_COMP_PILLCOUNT	Num	8	Was a pill count done at this visit?
117	SH09_COMP_PILLCOUNT_STEP1	Num	8	Step 1 pill count result
118	SH09_COMP_PILLCOUNT_STEP2	Num	8	Step 2 pill count result
119	SH09_UNWELL_SLV	Num	8	Have you felt unwell in any way since your last visit; has anything been bothering you?
120	SH09_DIFFERENT_PROBS_SLV	Num	8	Are any of these problems different from the way things were at your last visit?
121	SH09_DOC_VISIT_SLV	Num	8	Since your last visit, have you seen a doctor for any reason?
122	SH09_HOSP_SLV	Num	8	Since your last visit, have you been in the hospital for any reason?
123	SH09_HOSP_NUMVISITS_SLV	Num	8	Number of times in hosptial since last visit
124	SH09_HOSP_VISIT1_DATE_SLV	Num	8	Date of admission to hospital (Visit #1) (in days from randomization)
125	SH09_HOSP_VISIT1_DAYS_SLV	Num	8	Number of days spent in hospital (Visit #1)
126	SH09_HOSP_VISIT2_DATE_SLV	Num	8	Date of admission to hospital (Visit #2) (in days from randomization)
127	SH09_HOSP_VISIT2_DAYS_SLV	Num	8	Number of days spent in hospital (Visit #2)
128	SH09_HOSP_VISIT3_DATE_SLV	Num	8	Date of admission to hospital (Visit #3) (in days from randomization)
129	SH09_HOSP_VISIT3_DAYS_SLV	Num	8	Number of days spent in hospital (Visit #3)
130	SH09_STROKE_SLV	Num	8	Since your last SHEP visit, have you been told by a doctor or otherwise learned that you may have had a stroke?
131	SH09_STOPPED_MEDS_SLV	Num	8	Have you stopped taking any medications since your last visit?
132	SH09_INC_DEC_MEDS_SLV	Num	8	Have you increased or decreased any medications since your last visit?

Num	Variable	Type	Len	Label
133	SH09_STARTED_MEDS_SLV	Num	8	Have you started taking any new medications since your last visit?
134	SH09_BRING_NON_SHEP_MEDS	Num	8	Did the participant bring all non-SHEP medications to the clinic at this visit?
135	SH09_NUMBNESS_SLV	Num	8	Since last visit, have you had unusual coldness/numbness of hands or feet?
136	SH09_NUMBNESS_NEW	Num	8	Is this coldness/numbness of hands or feet new since last visit?
137	SH09_NUMBNESS_FREQ	Num	8	What is the frequency of this coldness/numbness of hands or feet?
138	SH09_NUMBNESS_SEVERITY	Num	8	What is the severity of this coldness/numbness of hands or feet?
139	SH09_NUMBNESS_FROM_SHEP_MEDS	Num	8	In the opinion of SHEP clinician, is coldness/numbness of hands or feet due to use of SHEP medications?
140	SH09_SKIN_RASH_SLV	Num	8	Since last visit, have you had unusual skin rash or bruising?
141	SH09_SKIN_RASH_NEW	Num	8	Is this skin rash or bruising new since last visit?
142	SH09_SKIN_RASH_FREQ	Num	8	What is the frequency of this skin rash or bruising?
143	SH09_SKIN_RASH_SEVERITY	Num	8	What is the severity of this skin rash or bruising?
144	SH09_SKIN_RASH_FROM_SHEP_MEDS	Num	8	In the opinion of SHEP clinician, is skin rash or bruising due to use of SHEP medications?
145	SH09_SKIN_RASH_PRESENT	Num	8	Is an acute skin rash present on physical exam?
146	SH09_IMBALANCE_SLV	Num	8	Since last visit, have you had feelings of unsteadiness or loss of balance?
147	SH09_IMBALANCE_NEW	Num	8	Is this unsteadiness/loss of balance new since last visit?
148	SH09_IMBALANCE_FREQ	Num	8	What is the frequency of this unsteadiness/loss of balance?
149	SH09_IMBALANCE_SEVERITY	Num	8	What is the severity of this unsteadiness/loss of balance?
150	SH09_IMBALANCE_FROM_SHEP_MEDS	Num	8	In the opinion of SHEP clinician, is unsteadiness/loss of balance due to use of SHEP medications?
151	SH09_LIGHTHEADED_SLV	Num	8	Since last visit, have you had faintness or lightheadedness when stand up quickly?
152	SH09_LIGHTHEADED_NEW	Num	8	Is this faintness or lightheadedness new since last visit?
153	SH09_LIGHTHEADED_FREQ	Num	8	What is the frequency of this faintness or lightheadedness?
154	SH09_LIGHTHEADED_SEVERITY	Num	8	What is the severity of this faintness or lightheadedness?
155	SH09_LIGHTHEADED_FROM_SHEP_MEDS	Num	8	In the opinion of SHEP clinician, is faintness or lightheadedness due to use of SHEP medications?
156	SH09_PASSOUT_SLV	Num	8	Since last visit, have you had loss of consciousness or passing out?
157	SH09_PASSOUT_NEW	Num	8	Is this loss of consciousness/passing out new since last visit?
158	SH09_PASSOUT_FREQ	Num	8	What is the frequency of this loss of consciousness/passing out?
159	SH09_PASSOUT_SEVERITY	Num	8	What is the severity of this loss of consciousness/passing out?
160	SH09_PASSOUT_FROM_SHEP_MEDS	Num	8	In the opinion of SHEP clinician, is loss of consciousness/passing out due to use of SHEP medications?
161	SH09_DROP_IN_BP	Num	8	Is there an observable postural drop in blood pressure?
162	SH09_FALLS_SLV	Num	8	Since last visit, have you had any falls?
163	SH09_FALLS_NEW	Num	8	Are these falls new since last visit?

Num	Variable	Type	Len	Label
164	SH09_FALLS_FREQ	Num	8	What is the frequency of these falls?
165	SH09_FALLS_SEVERITY	Num	8	What is the severity of these falls?
166	SH09_FALLS_FROM_SHEP_MEDS	Num	8	In the opinion of SHEP clinician, are these falls due to use of SHEP medications?
167	SH09_FRACTURES_SLV	Num	8	Since last visit, have you had any fractures?
168	SH09_FRACTURES_NEW	Num	8	Are this fractures new since last visit?
169	SH09_FRACTURES_FREQ	Num	8	What is the frequency of these fractures?
170	SH09_FRACTURES_SEVERITY	Num	8	What is the severity of these fractures?
171	SH09_FRACTURES_FROM_SHEP_MEDS	Num	8	In the opinion of SHEP clinician, are fractures due to use of SHEP medications?
172	SH09_FRACTURES_HIP	Num	8	Since last visit, have you had a hip fracture?
173	SH09_FRACTURES_SPINE	Num	8	Since last visit, have you had a spine fracture?
174	SH09_FRACTURES_FOREARM	Num	8	Since last visit, have you had a forearm fracture?
175	SH09_JOINTPAIN_SLV	Num	8	Since last visit, have you had unusual pain in any joints?
176	SH09_JOINTPAIN_NEW	Num	8	Is this unusual pain in joints new since last visit?
177	SH09_JOINTPAIN_FREQ	Num	8	What is the frequency of this unusual pain in joints?
178	SH09_JOINTPAIN_SEVERITY	Num	8	What is the severity of this unusual pain in joints?
179	SH09_JOINTPAIN_FROM_SHEP_MEDS	Num	8	In the opinion of SHEP clinician, is this unusual pain in joints due to use of SHEP medications?
180	SH09_JOINTPAIN_ARTHRITIS	Num	8	Are there physical signs of acute arthritis?
181	SH09_MUSCLEWEAK_SLV	Num	8	Since last visit, have you had any muscle weakness or cramping?
182	SH09_MUSCLEWEAK_NEW	Num	8	Is this muscle weakness/cramping new since last visit?
183	SH09_MUSCLEWEAK_FREQ	Num	8	What is the frequency of this muscle weakness/cramping?
184	SH09_MUSCLEWEAK_SEVERITY	Num	8	What is the severity of this muscle weakness/cramping?
185	SH09_MUSCLEWEAK_FROM_SHEP_MEDS	Num	8	In the opinion of SHEP clinician, is this muscle weakness/cramping due to use of SHEP medications?
186	SH09_EXCESSTHIRST_SLV	Num	8	Since last visit, have you had excessive thirst?
187	SH09_EXCESSTHIRST_NEW	Num	8	Is this excessive thirst new since last visit?
188	SH09_EXCESSTHIRST_FREQ	Num	8	What is the frequency of this excessive thirst?
189	SH09_EXCESSTHIRST_SEVERITY	Num	8	What is the severity of this excessive thirst?
190	SH09_EXCESSTHIRST_FROM_SHEP_MEDS	Num	8	In the opinion of SHEP clinician, is this excessive thirst due to use of SHEP medications?
191	SH09_LOSSAPPETITE_SLV	Num	8	Since last visit, have you had loss of appetite?
192	SH09_LOSSAPPETITE_NEW	Num	8	Is this loss of appetite new since last visit?
193	SH09_LOSSAPPETITE_FREQ	Num	8	What is the frequency of this loss of appetite?
194	SH09_LOSSAPPETITE_SEVERITY	Num	8	What is the severity of this loss of appetite?
195	SH09_LOSSAPPETITE_FROM_SHEP_MEDS	Num	8	In the opinion of SHEP clinician, is this loss of appetite due to use of SHEP medications?
196	SH09_NAUSEA_SLV	Num	8	Since last visit, have you had nausea or vomitting?
197	SH09_NAUSEA_NEW	Num	8	Is this nausea or vomitting new since last visit?
198	SH09_NAUSEA_FREQ	Num	8	What is the frequency of this nausea or vomitting?

Num	Variable	Type	Len	Label
199	SH09_NAUSEA_SEVERITY	Num	8	What is the severity of this nausea or vomitting?
200	SH09_NAUSEA_FROM_SHEP_MEDS	Num	8	In the opinion of SHEP clinician, is this nausea or vomitting due to use of SHEP medications?
201	SH09_INDIGESTION_SLV	Num	8	Since last visit, have you had unusual indigestion?
202	SH09_INDIGESTION_NEW	Num	8	Is this unusual indigestion new since last visit?
203	SH09_INDIGESTION_FREQ	Num	8	What is the frequency of this unusual indigestion?
204	SH09_INDIGESTION_SEVERITY	Num	8	What is the severity of this unusual indigestion?
205	SH09_INDIGESTION_FROM_SHEP_MEDS	Num	8	In the opinion of SHEP clinician, is this unusual indigestion due to use of SHEP medications?
206	SH09_BOWELCHANGE_SLV	Num	8	Since last visit, have you had a change in bowel habits?
207	SH09_BOWELCHANGE_NEW	Num	8	Is this change in bowel habits new since last visit?
208	SH09_BOWELCHANGE_FREQ	Num	8	What is the frequency of this change in bowel habits?
209	SH09_BOWELCHANGE_SEVERITY	Num	8	What is the severity of this change in bowel habits?
210	SH09_BOWELCHANGE_FROM_SHEP_MEDS	Num	8	In the opinion of SHEP clinician, is this change in bowel habits due to use of SHEP medications?
211	SH09_TARRYSTOOL_SLV	Num	8	Since last visit, have you had tarry black stool or red blood in stool?
212	SH09_TARRYSTOOL_NEW	Num	8	Is this tarry black stool or red blood in stool new since last visit?
213	SH09_TARRYSTOOL_FREQ	Num	8	What is the frequency of this tarry black stool or red blood in stool?
214	SH09_TARRYSTOOL_SEVERITY	Num	8	What is the severity of this tarry black stool or red blood in stool?
215	SH09_TARRYSTOOL_FROM_SHEP_MEDS	Num	8	In the opinion of SHEP clinician, is this tarry black or red blood in stool due to use of SHEP medications?
216	SH09_FASTHB_SLV	Num	8	Since last visit, have you had unusually fast heart beat or skipping beats?
217	SH09_FASTHB_NEW	Num	8	Is this unusually fast heart beat or skipping beats new since last visit?
218	SH09_FASTHB_FREQ	Num	8	What is the frequency of this unusually fast heart beat or skipping beats?
219	SH09_FASTHB_SEVERITY	Num	8	What is the severity of this unusually fast heart beat or skipping beats?
220	SH09_FASTHB_FROM_SHEP_MEDS	Num	8	In the opinion of SHEP clinician, is this unusually fast heart beat or skipping beats due to use of SHEP medications?
221	SH09_SLOWHB_SLV	Num	8	Since last visit, have you had unusually slow heart beat?
222	SH09_SLOWHB_NEW	Num	8	Is this unusually slow heart beat new since last visit?
223	SH09_SLOWHB_FREQ	Num	8	What is the frequency of this unusually slow heart beat?
224	SH09_SLOWHB_SEVERITY	Num	8	What is the severity of this unusually slow heart beat?
225	SH09_SLOWHB_FROM_SHEP_MEDS	Num	8	In the opinion of SHEP clinician, is this unusually slow heart beat due to use of SHEP medications?
226	SH09_CHESTPAIN_SLV	Num	8	Since last visit, have you had episodes of chest pain or heaviness in chest?
227	SH09_CHESTPAIN_NEW	Num	8	Are these episodes of chest pain/heaviness in chest new since last visit?

Num	Variable	Type	Len	Label
228	SH09_CHESTPAIN_FREQ	Num	8	What is the frequency of these episodes of chest pain/heaviness in chest?
229	SH09_CHESTPAIN_SEVERITY	Num	8	What is the severity of these episodes of chest pain/heaviness in chest?
230	SH09_CHESTPAIN_FROM_SHEP_MEDS	Num	8	In the opinion of SHEP clinician, are these episodes of chest pain/heaviness in chest due to use of SHEP medications?
231	SH09_ARRHYTHMIA_PRESENT	Num	8	Is an arrhythmia present on physical exam?
232	SH09_HEADACHES_SLV	Num	8	Since last visit, have you had headaches so bad you had to stop what you were doing?
233	SH09_HEADACHES_NEW	Num	8	Are these headaches new since last visit?
234	SH09_HEADACHES_FREQ	Num	8	What is the frequency of these headaches?
235	SH09_HEADACHES_SEVERITY	Num	8	What is the severity of these headaches?
236	SH09_HEADACHES_FROM_SHEP_MEDS	Num	8	In the opinion of SHEP clinician, are these headaches due to use of SHEP medications?
237	SH09_STUFFYNOSE_SLV	Num	8	Since last visit, have you had a stuffy nose?
238	SH09_STUFFYNOSE_NEW	Num	8	Is this stuffy nose new since last visit?
239	SH09_STUFFYNOSE_FREQ	Num	8	What is the frequency of this stuffy nose?
240	SH09_STUFFYNOSE_SEVERITY	Num	8	What is the severity of this stuffy nose?
241	SH09_STUFFYNOSE_FROM_SHEP_MEDS	Num	8	In the opinion of SHEP clinician, is this stuffy nose due to use of SHEP medications?
242	SH09_WHEEZING_SLV	Num	8	Since last visit, have you had a unusual shortness of breath/wheezing?
243	SH09_WHEEZING_NEW	Num	8	Is this unusual shortness of breath/wheezing new since last visit?
244	SH09_WHEEZING_FREQ	Num	8	What is the frequency of this unusual shortness of breath/wheezing?
245	SH09_WHEEZING_SEVERITY	Num	8	What is the severity of this unusual shortness of breath/wheezing?
246	SH09_WHEEZING_FROM_SHEP_MEDS	Num	8	In the opinion of SHEP clinician, is this unusual shortness of breath/wheezing due to use of SHEP medications?
247	SH09_WHEEZING_BRONCOSPASM	Num	8	Is there evidence for broncospasm on auscultation of the chest?
248	SH09_TIREDNESS_SLV	Num	8	Since last visit, have you had a unusual tiredness/loss of pep?
249	SH09_TIREDNESS_NEW	Num	8	Is this unusual tiredness/loss of pep new since last visit?
250	SH09_TIREDNESS_FREQ	Num	8	What is the frequency of this unusual tiredness/loss of pep?
251	SH09_TIREDNESS_SEVERITY	Num	8	What is the severity of this unusual tiredness/loss of pep?
252	SH09_TIREDNESS_FROM_SHEP_MEDS	Num	8	In the opinion of SHEP clinician, is this unusual tiredness/loss of pep due to use of SHEP medications?
253	SH09_ANKLESSWELL_SLV	Num	8	Since last visit, have you had a swelling of ankles?
254	SH09_ANKLESSWELL_NEW	Num	8	Is this swelling of ankles new since last visit?
255	SH09_ANKLESSWELL_FREQ	Num	8	What is the frequency of this swelling of ankles?
256	SH09_ANKLESSWELL_SEVERITY	Num	8	What is the severity of this swelling of ankles?
257	SH09_ANKLESSWELL_FROM_SHEP_MEDS	Num	8	In the opinion of SHEP clinician, is this swelling of ankles due to use of SHEP medications?
258	SH09_CHF_PRESENT	Num	8	Is there evidence of CHF on physical exam?

Num	Variable	Type	Len	Label
259	SH09_DEPRESSION_SLV	Num	8	Since last visit, have you had a feeling so depressed that it interferes with work, recreation or sleep?
260	SH09_DEPRESSION_NEW	Num	8	Is this depression new since last visit?
261	SH09_DEPRESSION_FREQ	Num	8	What is the frequency of this depression?
262	SH09_DEPRESSION_SEVERITY	Num	8	What is the severity of this depression?
263	SH09_DEPRESSION_FROM_SHEP_MEDS	Num	8	In the opinion of SHEP clinician, is this depression due to use of SHEP medications?
264	SH09_MEMORY_SLV	Num	8	Since last visit, have you had a trouble with memory or concentration?
265	SH09_MEMORY_NEW	Num	8	Is this trouble with memory or concentration new since last visit?
266	SH09_MEMORY_FREQ	Num	8	What is the frequency of this trouble with memory or concentration?
267	SH09_MEMORY_SEVERITY	Num	8	What is the severity of this trouble with memory or concentration?
268	SH09_MEMORY_FROM_SHEP_MEDS	Num	8	In the opinion of SHEP clinician, is this trouble with memory or concentration due to use of SHEP medications?
269	SH09_NIGHTMARES_SLV	Num	8	Since last visit, have you had nightmares?
270	SH09_NIGHTMARES_NEW	Num	8	Are these nightmares new since last visit?
271	SH09_NIGHTMARES_FREQ	Num	8	What is the frequency of these nightmares?
272	SH09_NIGHTMARES_SEVERITY	Num	8	What is the severity of these nightmares?
273	SH09_NIGHTMARES_FROM_SHEP_MEDS	Num	8	In the opinion of SHEP clinician, are thes nightmares due to use of SHEP medications?
274	SH09_SEXACTIVITY_SLV	Num	8	Since last visit, have you had any changes in sexual activity?
275	SH09_SEXACTIVITY_NEW	Num	8	Are these changes in sexual activity new since last visit?
276	SH09_SEXACTIVITY_FREQ	Num	8	What is the frequency of these changes in sexual activity?
277	SH09_SEXACTIVITY_SEVERITY	Num	8	What is the severity of these changes in sexual activity?
278	SH09_SEXACTIVITY_FROM_SHEP_MEDS	Num	8	In the opinion of SHEP clinician, are these changes in sexual activity due to use of SHEP medications?
279	SH09_SEXACTIVITY_LOI	Num	8	Is the change is sexual activity due to loss of interest?
280	SH09_SEXACTIVITY_FREQ_DECLINE	Num	8	Is the change is sexual activity due to decline in frequency?
281	SH09_SEXACTIVITY_LOE	Num	8	Is the change is sexual activity due to loss of enjoyment?
282	SH09_SEXACTIVITY_FUNC_IMPAIR	Num	8	Is the change is sexual activity due to functional impairment?
283	SH09_SLEEP_SLV	Num	8	Since your last visit, have you had trouble going to sleep/waking up early/getting back to sleep?
284	SH09_SLEEP_NEW	Num	8	Is this trouble going to sleep/waking up early/getting back to sleep new since last visit?
285	SH09_SLEEP_FREQ	Num	8	What is frequency of this trouble going to sleep/waking up early/getting back to sleep?
286	SH09_SLEEP_SEVERITY	Num	8	What is severity of this trouble going to sleep/waking up early/getting back to sleep?
287	SH09_SLEEP_FROM_SHEP_MEDS	Num	8	In the opinion of SHEP clinician, is this trouble going to sleep/waking up early/getting back to sleep due to use of SHEP medications?

Num	Variable	Type	Len	Label
288	SH09_NIGHTURINATE_SLV	Num	8	Since your last visit, have you been waking up more frequently at night to urinate?
289	SH09_NIGHTURINATE_NEW	Num	8	Is this waking up more frequently at night to urinate new since last visit?
290	SH09_NIGHTURINATE_FREQ	Num	8	What is frequency of waking up more frequently at night to urinate?
291	SH09_NIGHTURINATE_SEVERITY	Num	8	What is severity of waking up more frequently at night to urinate?
292	SH09_NIGHTURINATE_FROM_SHEP_MEDS	Num	8	In the opinion of SHEP clinician, is this waking up more frequently at night to urinate due to use of SHEP medications?
293	SH09_ANXIETY_SLV	Num	8	Since your last visit, have you had more worry or anxiety than usual?
294	SH09_ANXIETY_NEW	Num	8	Is this increased worry or anxiety new since last visit?
295	SH09_ANXIETY_FREQ	Num	8	What is frequency of increased worry or anxiety?
296	SH09_ANXIETY_SEVERITY	Num	8	What is severity of increased worry or anxiety?
297	SH09_ANXIETY_FROM_SHEP_MEDS	Num	8	In the opinion of SHEP clinician, is this increased worry or anxiety due to use of SHEP medications?
298	SH09_WEAK1SIDE_SLV	Num	8	Since your last visit, have you had weakness/numbness on one side or unexpected difficulties talking/thinking?
299	SH09_WEAK1SIDE_NEW	Num	8	Is this weakness/numbness on one side or unexpected difficulties talking/thinking new since last visit?
300	SH09_WEAK1SIDE_FREQ	Num	8	What is frequency of weakness/numbness on one side or unexpected difficulties talking/thinking?
301	SH09_WEAK1SIDE_SEVERITY	Num	8	What is severity of weakness/numbness on one side or unexpected difficulties talking/thinking?
302	SH09_WEAK1SIDE_FROM_SHEP_MEDS	Num	8	In the opinion of SHEP clinician, is this weakness/numbness on one side or unexpected difficulties talking/thinking due to use of SHEP medications?
303	SH09_STROKE_EVIDENCE	Num	8	Is there evidence of a stroke on physical exam?
304	SH09_OTHERSYMPTOM_SLV	Num	8	Since your last visit, have you had other relevant symptoms?
305	SH09_OTHERSYMPTOM_NEW	Num	8	Are these other relevant symptoms new since last visit?
306	SH09_OTHERSYMPTOM_FREQ	Num	8	What is frequency of other relevant symptoms?
307	SH09_OTHERSYMPTOM_SEVERITY	Num	8	What is severity of other relevant symptoms?
308	SH09_OTHERSYMPTOM_FROM_SHEP_MEDS	Num	8	In the opinion of SHEP clinician, are these other relevant symptoms due to use of SHEP medications?
309	SH09_OTHER_RELEVANT_SIGNS	Num	8	Are there other revelant signs on physical exam?
310	SH09_MEDS_BP_ANTIHYPER	Num	8	Is participant taking any medication for blood pressure or any drugs with antihypertensive action?
311	SH09_MEDS_DIGITALIS	Num	8	Is participant taking digitalis?
312	SH09_MEDS_NITRATES	Num	8	Is participant taking nitrates (including nitroglycerine or other coronary vasodilator)?
313	SH09_MEDS_PROPRANOLOL	Num	8	Is participant taking propranolol or other beta blockers for other than treatment of blood pressure (excluding timoptic eye drops)?
314	SH09_MEDS_TIMOPTIC_EYEDROPS	Num	8	Is participant taking timoptic eye drops?
315	SH09_MEDS_ANTI_ARRHYTHMIC	Num	8	Is participant taking anti-arrhythmic drugs?

Num	Variable	Type	Len	Label
316	SH09_MEDS_LIPID_LOWERING_V1	Num	8	Is participant taking lipid-lowering drugs (including clofibrate, cholestryramine, colestipol, nicotinic acid, etc.)?
317	SH09_MEDS_GOUT_AGENTS	Num	8	Is participant taking agents for gout (including probenecid,allopurinol or colchincine)?
318	SH09_MEDS_INSULIN	Num	8	Is participant taking insulin?
319	SH09_MEDS_ORAL_HYPOGLYCEMIC	Num	8	Is participant taking oral hypoglycemic agents?
320	SH09_MEDS_ANTICOAGULANTS	Num	8	Is participant taking anticoagulants?
321	SH09_MEDS_ANTIBOTICS	Num	8	Is participant taking antibotics or anti-infection agents?
322	SH09_MEDS_CORTISONE	Num	8	Is participant taking cortisone or other gluco corticoids?
323	SH09_MEDS_AMPHETAMINES	Num	8	Is participant taking amphetamines or other stimulant?
324	SH09_MEDS_FLURAZEPAM	Num	8	Is participant taking flurazepam or other sedative?
325	SH09_MEDS_ANTI_DEPRESSANTS	Num	8	Is participant taking anti-depressants?
326	SH09_MEDS_LIBRIUM	Num	8	Is participant taking librium, valium or other antianxiety agents?
327	SH09_MEDS_OTHER_PSYCHOTROPIC	Num	8	Is participant taking other physcotropic agents?
328	SH09_MEDS_POTASSIUM_SUPP	Num	8	Is participant taking potassium supplementation other than dietary recommendations?
329	SH09_MEDS_ESTROGEN	Num	8	Is participant taking estrogen?
330	SH09_MEDS_ANTURANE	Num	8	Is participant taking anturane (sulfinpyrazone) at least 4 weeks?
331	SH09_MEDS_PERSANTINE	Num	8	Is participant taking persantine (dipyridamole) at least 4 weeks?
332	SH09_MEDS_ASPIRIN	Num	8	Is participant taking aspirin at least 4 weeks?
333	SH09_MEDS_NON_STEROIDAL	Num	8	Is participant taking non-steroidal anti-inflammatory drugs?
334	SH09_MEDS_EXPERIMENTAL	Num	8	Is participant taking any experimental drugs?
335	SH09_WEIGHT	Num	8	Weight (in pounds)
336	SH09_HEIGHT	Num	8	Height (in inches)
337	SH09_SKIN_EXAM	Num	8	Skin exam results
338	SH09_HEAD_EXAM	Num	8	Head, ears, nose and throat exam results
339	SH09_EYES_FUNDI	Num	8	Eye exam, fundi exam results
340	SH09_EYES_OTHER	Num	8	Eye exam, other parts of eye examined?
341	SH09_NECK_RAISED_JUGULAR	Num	8	Neck exam, raised jugular venous pressure?
342	SH09_NECK_CAROTID_BRUITS	Num	8	Neck exam, carotid bruits?
343	SH09_NECK_CAROTID_BRUITS_POS	Num	8	Neck exam, position of carotid bruits?
344	SH09_NECK_CAROTID_PULSES_DIM	Num	8	Neck exam, carotid pulses absent or markedly diminished?
345	SH09_NECK_CAROTID_PULSES_POS	Num	8	Neck exam, position of absent carotid pulses?
346	SH09_NECK_THYROID	Num	8	Neck exam, thryoid abnormality?
347	SH09_NECK_OTHER	Num	8	Neck exam, other neck problems?
348	SH09_LYMPH_NODES_EXAM	Num	8	Lymph node exam results?
349	SH09_CHEST_RALES_DONT_CLEAR	Num	8	Chest exam, bilateral rales that do not clear with coughing?
350	SH09_CHEST_RESP_RATE_GE20	Num	8	Chest exam, respiratory rate 20 or more?
351	SH09_CHEST_WHEEZING	Num	8	Chest exam, wheezing?
352	SH09_CHEST_OTHER_PROBLEM	Num	8	Chest exam, other problems?

Num	Variable	Type	Len	Label
353	SH09_HEART_PMI_GE2CM	Num	8	Heart exam, PMI more than 2 cm lateral to midclavicular line?
354	SH09_HEART_MURMUR	Num	8	Heart exam, any murmur?
355	SH09_HEART_THIRD_SOUND	Num	8	Heart exam, third heart sound?
356	SH09_HEART_FOURTH_SOUND	Num	8	Heart exam, fourth heart sound?
357	SH09_HEART_PULSE_IRREGULAR	Num	8	Heart exam, pulse irregular?
358	SH09_HEART_OTHER_PROBLEM	Num	8	Heart exam, other heart problems?
359	SH09_BREAST_EXAM	Num	8	Breast exam results?
360	SH09_ABDOMEN_LIVERSPAN_GE10CM	Num	8	Abdomen exam, liver span 10 cm or more?
361	SH09_ABDOMEN_ABNORMAL_PULSE	Num	8	Abdomen exam, abnormal abdominal pulse?
362	SH09_ABDOMEN_MASSES	Num	8	Abdomen exam, any masses?
363	SH09_ABDOMEN_BRUIT	Num	8	Abdomen exam, bruit?
364	SH09_ABDOMEN_OTHER_PROBLEM	Num	8	Abdomen exam, other abdomen problems?
365	SH09_EXTREMITY_ANKLE_EDEMA	Num	8	Extremity exam, pitting ankle edema?
366	SH09_EXTREMITY_FEMORAL_BRUIT	Num	8	Extremity exam, femoral bruit?
367	SH09_EXTREMITY_PULSES_ABSENT	Num	8	Extremity exam, any peripheral pulses absent/markedly diminished?
368	SH09_EXTREMITY_OTHER_PROBLEM	Num	8	Extremity exam, other extremity problems?
369	SH09_NEURO_GAIT_LEFT	Num	8	Neurological exam, left hemiparetic gait?
370	SH09_NEURO_GAIT_RIGHT	Num	8	Neurological exam, right hemiparetic gait?
371	SH09_NEURO_WALK_TOES_LEFT_WEAK	Num	8	Neurological exam, walking on toes left weakness?
372	SH09_NEURO_WALK_TOES_RIGHT_WEAK	Num	8	Neurological exam, walking on toes right weakness?
373	SH09_NEURO_WALK_HEELS_LEFT_WEAK	Num	8	Neurological exam, walking on heels left weakness?
374	SH09_NEURO_WALK_HEELS_RIGHT_WEAK	Num	8	Neurological exam, walking on heels right weakness?
375	SH09_NEURO_STAND_EYES_CLOSED	Num	8	Neurological exam, stand stationary for 30 seconds with eyes closed?
376	SH09_NEURO_STAND_EYES_OPEN	Num	8	Neurological exam, stand stationary for 30 seconds with eyes open? (if unable with eyes closed)
377	SH09_NEURO_CRANIAL_LEFT_WEAK	Num	8	Neurological exam, cranial nerves, facial weakness left?
378	SH09_NEURO_CRANIAL_RIGHT_WEAK	Num	8	Neurological exam, cranial nerves, facial weakness right?
379	SH09_NEURO_VISUAL_DEFICIT_LEFT	Num	8	Neurological exam, visual field deficit, left side?
380	SH09_NEURO_VISUAL_DEFICIT_RIGHT	Num	8	Neurological exam, visual field deficit, right side?
381	SH09_NEURO_EXTENSORS_LEFT_WEAK	Num	8	Neurological exam, motor wrist extensors, left weakness?
382	SH09_NEURO_EXTENSORS_RIGHT_WEAK	Num	8	Neurological exam, motor wrist extensors, right weakness?
383	SH09_NEURO_COORD_LEFT_PATTING	Num	8	Neurological exam, coordination, left hand patting?
384	SH09_NEURO_COORD_RIGHT_PATTING	Num	8	Neurological exam, coordination, right hand patting?
385	SH09_NEURO_REFLEX_PATELLA_ASSYM	Num	8	Neurological exam, reflexes, assymetry of patellar tendon?
386	SH09_NEURO_REFLEX_BABINSKI_LEFT	Num	8	Neurological exam, reflexes, Babinski sign left?
387	SH09_NEURO_REFLEX_BABINSKI_RIGHT	Num	8	Neurological exam, reflexes, Babinski sign right?
388	SH09_NEURO_SPEECH_PROBLEMS	Num	8	Neurological exam, speech or language problems?
389	SH09_PHYSEXAM_CLINICIAN_CODE	Num	8	Clinician code

Num	Variable	Type	Len	Label
390	SH09_ANGINA_PECTORIS	Num	8	On the basis of your history and/or physical exam, do you believe that the participant has angina pectoris?
391	SH09_MYO_INFARC_PASTYR	Num	8	On the basis of ECG and/or your history and physical exam, do you believe the paricipant has had a myocardial infarction in the past year?
392	SH09_MYO_INFARC_PASTYR_DATE	Num	8	When was the most recent possible myocardial infarction (in months from randomization)?
393	SH09_CORONARY_BYPASS_PASTYR	Num	8	Is there a history of coronary bypass in the past year?
394	SH09_CORONARY_BYPASS_DATE	Num	8	Date of coronary bypass surgery (in months from randomization)
395	SH09_CONGEST_HEART_FAIL_PASTYR	Num	8	On the basis of your history and/or physical exam, do you believe the participant has had congestive heart failure in the past year?
396	SH09_ECG_PERFORMED	Num	8	Was an ECG performed this visit?
397	SH09_ECG_ATRIAL_FLUTTER	Num	8	ECG, is artrial fibrillation or flutter present?
398	SH09_ECG_2ND_3RD_DEG_AV_BLOCK	Num	8	ECG, is second or third degree A-V block present?
399	SH09_ECG_VPBS	Num	8	ECG, are VPBS - multifocal, pairs or runs, or more than 10% of beats present?
400	SH09_ECG_BRADYCARDIA	Num	8	ECG, is Bradycardia (<50 beats/min) present?
401	SH09_ECG_PACEMAKER	Num	8	Does the participant currently have a pacemaker?
402	SH09_VASCULAR_SURG_PASTYR	Num	8	Is there a history of vascular surgery in the past year?
403	SH09_VASCULAR_SURG_BYPASS_GRAFT	Num	8	Is there history of aortic, iliac, popliteal or femoral bypass or graft?
404	SH09_VASCULAR_SURG_ANGIOPLASTY	Num	8	Is there history of angioplasty?
405	SH09_VASCULAR_SURG_OTHER	Num	8	Is there history of other vascular surgery?
406	SH09_ARTERIAL_DISEASE	Num	8	On the basis of your history and/or physical exam, does the participant have arterial disease with tissue necrosis or related loss of an extremity?
407	SH09_CHRONIC_BRONCHITIS	Num	8	On the basis of the history and/or physical exam, does participant have chronic bronchitis?
408	SH09_EMPHYSEMA	Num	8	On the basis of the history and/or physical exam, does participant have emphysema?
409	SH09_STROKE_PASTYR	Num	8	On the basis of your history and/or physical exam, and keeping the SHEP criteria in mind, do you believe the participant has had a stroke in the past year?
410	SH09_STROKE_MOSTRECENT_DATE	Num	8	When was the most recent episode of probable stroke (in months from randomization)?
411	SH09_STROKE_RESIDUAL_EFFECTS	Num	8	Are there any residual effects of stroke still present?
412	SH09_TIA_PASTYR	Num	8	On the basis of your history and/or physical exam, do you believe the participant has had transcient cerebral ischemic attacks within the past year?
413	SH09_CAROTID_ENDART_PASTYR	Num	8	Is there a history of carotid endarterectomy in the past year?
414	SH09_CONTRAINDIC_CHLORTHALIDONE	Num	8	On the basis of your history and/or physical examination, does this participant have any contraindication or allergy to chlorthalidone?
415	SH09_CONTRAINDIC_ATENOLOL	Num	8	On the basis of your history and/or physical examination, does this participant have any contraindication or allergy to atenolol?

Num	Variable	Type	Len	Label
416	SH09_CONTRAINDIC_RESERPINE	Num	8	On the basis of your history and/or physical examination, does this participant have any contraindication or allergy to reserpine?
417	SH09_FRACTURE_HIP_PASTYR	Num	8	Do you believe the participant has had a fracture of the hip in the past year?
418	SH09_FRACTURE_SPINE_PASTYR	Num	8	Do you believe the participant has had a fracture of the spine in the past year?
419	SH09_FRACTURE_FOREARM_PASTYR	Num	8	Do you believe the participant has had a fracture of the forearm in the past year?
420	SH09_FREQUENT_FALLS_PASTYR	Num	8	Do you believe the participant has had a problem with frequent falls in the past year?
421	SH09_ALCOHOLISM_PASTYR	Num	8	On the basis of your history and/or physical exam, do you believe the participant drinks 6 or more drinks/day or alcoholism or alcoholic liver disease have been present in the past year?
422	SH09_DEMENTIA	Num	8	On the basis of your history and physical exam, do you believe the participant definitely has any form of dementia?
423	SH09_CANCER_PASTYR	Num	8	Has the participant had cancer (except basal cell cancer) diagnosed within the past year?
424	SH09_OTHER_HOSPITALIZED_PASTYR	Num	8	Other than possible stroke, TIA, left ventricular failure, myocardial infarction and vascular surgery, was participant hospitalized or admitted to intermediate or skilled care nursing home in past year?
425	SH09_LIFETHREAT_DISEASE_NEXTYR	Num	8	On the basis of history and/or physical exam, is there any other life-threatening disease or reason that might seriously impair individual's participation in SHEP over the next year?
426	SH09_JUDGEMENT_CLINICIAN_CODE	Num	8	Clinician Code
427	SH09_SHEP_MEDS_PRESCRIBED_LV	Num	8	At last visit, were SHEP medications prescribed in dosages specified in protocol?
428	SH09_SHEP_MEDS_ALTERED_SLV	Num	8	Since the last visit, have SHEP medications been altered to dosages other than prescribed at the last visit?
429	SH09_OPEN_ANTIHYPER_MEDS_SLV	Num	8	Since the last visit, have open-label antihypertensive medications been prescribed or taken?
430	SH09_DEV_REPORTED	Num	8	Has this deviation from protocol been reported on a Deviation from Protocol form (SH48)?
431	SH09_DEV_CAUSE	Num	8	What happened with respect to the problem which caused this deviation from protocol?
432	SH09_SERIOUS_CONDITIONS_SLV	Num	8	Have any other potentially serious conditions arisen since the last visit that are probably a result of use of SHEP medications?
433	SH09_RESTORE_SHEP_MEDS	Num	8	At this visit, do you plan to restore participant to SHEP drugs and doses specifed in protocol (inlcuding discontinuing open-label antihypertensives)?
434	SH09_DEV_REASON_SIDE_EFFECTS	Num	8	Reason for deviation from protocol, Side effects judged to be severe enough to deviate from protocol
435	SH09_DEV_REASON_ESCAPE_BP	Num	8	Reason for deviation from protocol, Participant has reached escape blood pressure
436	SH09_DEV_REASON_ALTERNATE_BP	Num	8	Reason for deviation from protocol, Private MD has prescribed alternative BP therapy
437	SH09_DEV_REASON_PARTICIPANT_REQ	Num	8	Reason for deviation from protocol, Participant's request

Num	Variable	Type	Len	Label
438	SH09_DEV_REASON_OTHER	Num	8	Reason for deviation from protocol, Other
439	SH09_SIDE_OR_GWB_FROM_SHEP_MEDS	Num	8	In judgment of SHEP clinician are any of the positive/abnormal responses in General-Well being or side effects sections related to current use of SHEP meds?
440	SH09_DEVIATION_REQUIRED	Num	8	In judgment of SHEP clinician and physician, do any of these responses require deviation from protocol in prescrbing SHEP medication?
441	SH09_CONDITIONS_HARMFUL	Num	8	Are any of these conditions possibly harmful to participant?
442	SH09_OTHER_REASONS_DEVIATION	Num	8	Are there reasons other than those in questions 104-111 that require deviation from protocol in prescribing SHEP meds (e.g. interference from other medicine)?
443	SH09_STEP1MEDS_LV_V1	Num	8	Step 1 medications prescribed last visit? (Version 1)
444	SH09_STEP1MEDS_BOTTLENUM_LV	Num	8	Bottle number of Step 1 medications prescribed last visit
445	SH09_STEP2MEDS_LV_V1	Num	8	Step 2 medications prescribed last visit? (Version 1)
446	SH09_STEP2MEDS_BOTTLENUM_LV	Num	8	Bottle number of Step 2 medications prescribed last visit
447	SH09_OPEN_ANTIHYPER_LV	Num	8	Open-label antihypertensives prescribed last visit?
448	SH09_POTASSIUM_SUPP_LV_V1	Num	8	Potassium supplement prescribed last visit? (Version 1)
449	SH09_POTASSIUM_SUPP_DOSE_LV	Num	8	Potassium supplement dosage prescribed last visit (meg/day)
450	SH09_URICACID_LV_V1	Num	8	Uric acid agent prescribed last visit? (Version 1)
451	SH09_NO_CHANGE_TO_MEDS_TV	Num	8	No changes made to medications this visit
452	SH09_STEP1MEDS_TV_V1	Num	8	Step 1 medications prescribed this visit? (Version 1)
453	SH09_STEP1MEDS_BOTTLENUM_TV	Num	8	Bottle number of Step 1 medications prescribed this visit
454	SH09_STEP2MEDS_TV_V1	Num	8	Step 2 medications prescribed this visit (Version 1)
455	SH09_STEP2MEDS_BOTTLENUM_TV	Num	8	Bottle number of Step 2 medications prescribed this visit
456	SH09_OPEN_ANTIHYPER_TV	Num	8	Open-label antihypertensives prescribed this visit?
457	SH09_POTASSIUM_SUPP_TV_V1	Num	8	Potassium supplement prescribed this visit? (Version 1)
458	SH09_POTASSIUM_SUPP_DOSE_TV	Num	8	Potassium supplement dosage prescribed this visit (meq/day)
459	SH09_URICACID_TV_V1	Num	8	Uric acid agent prescribed this visit? (Version 1)
460	SH09_MEDREV_CLINICIAN_CODE	Num	8	Code of clinician completing medication review
461	SH09_RECORD_TYPE	Num	8	SH09 Record Type
462	SH09_DATE_RECEIVED	Num	8	SH09 Date Tape Received from Metpath Lab
463	SH09_UPDATE_NUMBER	Num	8	SH09 Update Number
464	SH09_DATE_LAST_PROCESSED	Num	8	SH09 Date Last Processed
465	SH09_PAPER_COPY	Num	8	SH09 Paper Copy
466	SH09_CROSS_FORM_EDITS	Num	8	SH09 Cross form edits
467	SH09_VITAL_STATUS	Num	8	Vital status
468	SH09_MEDS_HMG_COA	Num	8	Is participant taking HMG CoA reductase inhibitors (e.g. Lovastatin, Mevicor)?
469	SH09_BLIND_MEDS_PRES_LV	Num	8	Were any SHEP blinded medications prescribed at the last visit?
470	SH09_BLIND_MEDS_DIS_SLV	Num	8	Were all SHEP blinded medications discontinued since the last visit?

Num	Variable	Type	Len	Label
471	SH09_BLIND_MEDS_OCHANGES_SLV	Num	8	Were there any other changes made in the SHEP blinded medications since last visit?
472	SH09_OPEN_ANTIHYPER_PRES_LV	Num	8	Were open-label antihypertensive medications prescribed at last visit (any source)?
473	SH09_OPEN_ANTIHYPER_PRES_SLV	Num	8	Were open-label antihypertensive medications prescribed since last visit (any source)?
474	SH09_ESCAPE_BP_REACHED	Num	8	Has the participant reached escape blood pressure at this visit?
475	SH09_VISIT1_BPDATE	Num	8	Date of visit #1 (in days from randomization)
476	SH09_VISIT1_SYSTBP	Num	8	Systolic blood pressure at visit #1
477	SH09_VISIT1_DIASTBP	Num	8	Diastolic blood pressure at visit #1
478	SH09_VISIT2_BPDATE	Num	8	Date of visit #2 (in days from randomization)
479	SH09_VISIT2_SYSTBP	Num	8	Systolic blood pressure at visit #2
480	SH09_VISIT2_DIASTBP	Num	8	Diastolic blood pressure at visit #2
481	SH09_VISIT3_BPDATE	Num	8	Date of visit #3 (in days from randomization)
482	SH09_VISIT3_SYSTBP	Num	8	Systolic blood pressure at visit #3
483	SH09_VISIT3_DIASTBP	Num	8	Diastolic blood pressure at visit #3
484	SH09_107A	Num	8	Will you be prescribing SHEP medications acording to prescribed SHEP blood pressure treatment regimen at this visit?
485	SH09_107B	Num	8	Will you be prescribing open-label antihypertensive medications at this visit?
486	SH09_107C	Num	8	Reasons, Participant has reached escape blood pressure at this visit or a previous visit
487	SH09_107D	Num	8	Reasons, Possible or probable side effects in judgment of SHEP clinician
488	SH09_107E	Num	8	Reasons, Perceived side effects in judgment of participant
489	SH09_107F	Num	8	Reasons, Stroke
490	SH09_107G	Num	8	Reasons, Myocardial infarction
491	SH09_107H	Num	8	Reasons, Left ventricular failure
492	SH09_107I	Num	8	Reasons, Angina
493	SH09_107J	Num	8	Reasons, Other medical
494	SH09_107K	Num	8	Reasons, Participant refusal or preference
495	SH09_107L	Num	8	Reasons, Private MD request
496	SH09_107M	Num	8	Reasons, Other
497	SH09_STEP1MEDS_LV_V2	Num	8	Step 1 medications prescribed last visit (Version 2)
498	SH09_STEP2MEDS_LV_V2	Num	8	Step 2 medications prescribed last visit (Version 2)
499	SH09_OL_DRUGS_LV	Num	8	Open-label drugs prescribed last visit
500	SH09_OL_DRUGS_SOURCE_LV	Num	8	Source of open-label drugs prescribed last visit
501	SH09_POTASSIUM_SUPP_LV_V2	Num	8	Potassium supplement prescribed last visit (Version 2)
502	SH09_URICACID_LV_V2	Num	8	Uric acid agent prescribed last visit (Version 2)
503	SH09_STEP1MEDS_TV_V2	Num	8	Step 1 medications prescribed this visit (Version 2)
504	SH09_STEP2MEDS_TV_V2	Num	8	Step 2 medications prescribed this visit (Version 2)

Num	Variable	Type	Len	Label
505	SH09_OL_DRUGS_TV	Num	8	Open-label drugs prescribed this visit
506	SH09_OL_DRUGS_SOURCE_TV	Num	8	Source of open-label drugs prescribed this visit
507	SH09_POTASSIUM_SUPP_TV_V2	Num	8	Potassium supplement prescribed this visit (Version 2)
508	SH09_URICACID_TV_V2	Num	8	Uric acid agent prescribed this visit (Version 2)
509	SH09_NEXT_VISIT_SCHEDULED	Num	8	Scheduled next appointment
510	SH09_MEDS_OTHER_LIPID_LOWERING	Num	8	Other lipid-lowering drugs, including clofibrate, cholestryramine, colestipol nicotinic acid, etc.?

Data Set Name: sh10.sas7bdat

Num	Variable	Type	Len	Label
1	SH10_RECORD_LENGTH	Num	8	SH10 Record Length
2	SH10_KEYPUNCH_CODE	Num	8	SH10 Keypuncher Code
3	SH10_BATCHDATE	Num	8	SH10 Batch Date
4	SH10_VERIFYER_CODE	Num	8	SH10 Verifyer Code
5	SH10_DATE_LAST_MODIFIED	Num	8	SH10 Date record was last modified
6	SH10_TIME_LAST_MODIFIED	Num	8	SH10 Time record was last modified
7	SH10_EDIT_STATUS_CODE	Num	8	SH10 Edit status code
8	SHEPID	Num	8	SHEP ID
9	FORMNUM	Num	8	Form number
10	SH10_VERSNNUM	Num	8	SH10 Version number
11	SH10_ECG_DATE	Num	8	Date ECG recorded at Clinical Center (in days from randomization)
12	SH10_SEQUENCE	Num	8	SH10 Sequence
13	ACROSTIC	Num	8	Acrostic
14	SH10_VISIT_TYPE	Num	8	Type of visit
15	SH10_ECG_TECH_CODE	Num	8	ECG Technician code
16	SH10_DATE_SENT_TO_CC	Num	8	Date sent to Coordinating Center (in days from randomization)
17	SH10_DATE_CC_SENT_TO_ECG	Num	8	Date Coordinating Center sends to ECG Reading Center (in days from randomization)
18	SH10_CODING_DATE	Num	8	Date of coding (in days from randomization)
19	SH10_ECG_QQS_1LV6	Num	8	Twelve-lead ECG, Q and QS Patterns (1X), 1L V6
20	SH10_ECG_QQS_23F	Num	8	Twelve-lead ECG, Q and QS Patterns (1X), 23 F
21	SH10_ECG_QQS_V1V5	Num	8	Twelve-lead ECG, Q and QS Patterns (1X), V1 V5
22	SH10_ECG_STJ_1LV6	Num	8	Twelve-lead ECG, S-T Junction and Segment Depression (4X), 1L V6
23	SH10_ECG_STJ_23F	Num	8	Twelve-lead ECG, S-T Junction and Segment Depression (4X), 23 F
24	SH10_ECG_STJ_V1V5	Num	8	Twelve-lead ECG, S-T Junction and Segment Depression (4X), V1 V5
25	SH10_ECG_TWAVE_1LV6	Num	8	Twelve-lead ECG, T Wave Items (5X), 1L V6
26	SH10_ECG_TWAVE_23F	Num	8	Twelve-lead ECG, T Wave Items (5X), 23 F
27	SH10_ECG_TWAVE_V1V5	Num	8	Twelve-lead ECG, T Wave Items (5X), V1 V5
28	SH10_ECG_STSE_1LV6	Num	8	Twelve-lead ECG, ST Segment Elevation (9.2), 1L V6
29	SH10_ECG_STSE_23F	Num	8	Twelve-lead ECG, ST Segment Elevation (9.2), 23 F
30	SH10_ECG_STSE_V1V5	Num	8	Twelve-lead ECG, ST Segment Elevation (9.2), V1 V5
31	SH10_ECG_R3X	Num	8	Twelve-lead ECG, R 3X
32	SH10_ECG_AV_CONDUCT	Num	8	Twelve-lead ECG, A-V Conduction Defect (6X)
33	SH10_ECG_VENT_CONDUCT	Num	8	Twelve-lead ECG, Ventricular Conduction Defect (7x)
34	SH10_ECG_ARRHYTHMIA_1X	Num	8	Twelve-lead ECG, Arrhythmias (8X), 1X
35	SH10_ECG_ARRHYTHMIA_2X	Num	8	Twelve-lead ECG, Arrhythmias (8X), 2X
36	SH10_ECG_ARRHYTHMIA_3X	Num	8	Twelve-lead ECG, Arrhythmias (8X), 3X

Num	Variable	Type	Len	Label
37	SH10_ECG_ARRHYTHMIA_4X	Num	8	Twelve-lead ECG, Arrhythmias (8X), 4X
38	SH10_ECG_ARRHYTHMIA_5X	Num	8	Twelve-lead ECG, Arrhythmias (8X), 5X
39	SH10_ECG_ARRHYTHMIA_6X	Num	8	Twelve-lead ECG, Arrhythmias (8X), 6X
40	SH10_ECG_ECTOPIC_SVPB	Num	8	Twelve-lead ECG, Ectopic Codes, SVPB
41	SH10_ECG_ECTOPIC_VPB	Num	8	Twelve-lead ECG, Ectopic Codes, VPB
42	SH10_ECG_ECTOPIC_RNBG	Num	8	Twelve-lead ECG, Ectopic Codes, RN BG
43	SH10_ECG_ECTOPIC_MF	Num	8	Twelve-lead ECG, Ectopic Codes, M F
44	SH10_ECG_ECTOPIC_TR	Num	8	Twelve-lead ECG, Ectopic Codes, T-R
45	SH10_ECG_MISC_91	Num	8	Twelve-lead ECG, Miscellaneous Items, 91
46	SH10_ECG_MISC_93	Num	8	Twelve-lead ECG, Miscellaneous Items, 93
47	SH10_ECG_MISC_95	Num	8	Twelve-lead ECG, Miscellaneous Items, 95
48	SH10_ECG_MISC_U	Num	8	Twelve-lead ECG, Miscellaneous Items, U
49	SH10_ECG_HEART_RATE	Num	8	Twelve-lead ECG, Heart Rate (beats/min)
50	SH10_ECG_QRS_AXIS_SIGN	Char	1	Twelve-lead ECG, QRS Axis sign (+/-)
51	SH10_ECG_QRS_AXIS	Num	8	Twelve-lead ECG, QRS Axis
52	SH10_ECG_MAX_R_HT_L123	Num	8	Twelve-lead ECG, Max R Height (mm), Lead I,II,III
53	SH10_ECG_MAX_R_HT_V456	Num	8	Twelve-lead ECG, Max R Height (mm), Lead V 4,5,6
54	SH10_ECG_MAX_S_HT_L123	Num	8	Twelve-lead ECG, Max S Height (mm), Lead I,II,III
55	SH10_ECG_MAX_S_HT_V456	Num	8	Twelve-lead ECG, Max S Height (mm), Lead V 4,5,6
56	SH10_ECG_T_HT_V5_SIGN	Char	1	Twelve-lead ECG, T Height V5 Sign (+/-)
57	SH10_ECG_T_HT_V5	Num	8	Twelve-lead ECG, T Height V5 (mm)
58	SH10_ECG_R_HT_AVL	Num	8	Twelve-lead ECG, R Height AVL (mm)
59	SH10_ECG_TECHPROB98	Num	8	Twelve-lead ECG, TechProb98
60	SH10_ECG_TERMPV1_DUR	Num	8	Twelve-lead ECG, Terminal P V1 Duration
61	SH10_ECG_TERMPV1_DEPTH	Num	8	Twelve-lead ECG, Terminal P V1 Depth (mm)
62	SH10_ECG_CLEAR10	Num	8	Twelve-lead ECG, Clear 1.0
63	SH10_RHYTHM_HEART_RATE	Num	8	Two-minute rhythm strip, Heart Rate (beats/min)
64	SH10_RHYTHM_QTDUR	Num	8	Two-minute rhythm strip, QT duration (m.sec)
65	SH10_RHYTHM_COUP_INT	Num	8	Two-minute rhythm strip, Coupling interval (m. sec)
66	SH10_RHYTHM_RR	Num	8	Two-minute rhythm strip, R-R (m.m)
67	SH10_RHYTHM_ECTOPIC_VPB	Num	8	Two-minute rhythm strip, Ectopic codes, VPB
68	SH10_RHYTHM_ECTOPIC_RNBG	Num	8	Two-minute rhythm strip, Ectopic codes, RN BG
69	SH10_RHYTHM_ECTOPIC_MF	Num	8	Two-minute rhythm strip, Ectopic codes, M F
70	SH10_RECORD_TYPE	Num	8	SH10 Record Type
71	SH10_DATE_RECEIVED	Num	8	SH10 Date Tape Received from Metpath Lab
72	SH10_UPDATE_NUMBER	Num	8	SH10 Update Number
73	SH10_DATE_LAST_PROCESSED	Num	8	SH10 Date Last Processed
74	SH10_CROSS_FORM_EDITS	Num	8	SH10 Cross form edits

Data Set Name: sh11.sas7bdat

Num	Variable	Type	Len	Label
1	SH11_RECORD_LENGTH	Num	8	SH11 Record Length
2	SH11_KEYPUNCH_CODE	Num	8	SH11 Keypuncher Code
3	SH11_BATCHDATE	Num	8	SH11 Batch Date
4	SH11_VERIFYER_CODE	Num	8	SH11 Verifyer Code
5	SH11_DATE_LAST_MODIFIED	Num	8	SH11 Date record was last modified
6	SH11_TIME_LAST_MODIFIED	Num	8	SH11 Time record was last modified
7	SH11_EDIT_STATUS_CODE	Num	8	SH11 Edit status code
8	SHEPID	Num	8	SHEP ID
9	FORMNUM	Num	8	Form number
10	SH11_VERSNNUM	Num	8	SH11 Version number
11	SH11_CLINIC_VISITDATE	Num	8	Clinic visit date for which SH11 form is needed (in days from randomization)
12	SH11_SEQUENCE	Num	8	SH11 sequence
13	ACROSTIC	Num	8	Acrostic
14	SH11_VISIT_SEQNUM	Num	8	Sequence number of clinic visit
15	SH11_COMPLETION_DATE	Num	8	Date of SH11 form completion (in days from randomization)
16	SH11_BLOODWORK_NOT_COMPLETE	Num	8	Blood results not completed
17	SH11_POTASSIUM_MEASURED	Num	8	Potassium measured?
18	SH11_POTASSIUM	Num	8	Potassium (mEq/l)
19	SH11_URICACID_MEASURED	Num	8	Uric acid measured?
20	SH11_URICACID	Num	8	Uric acid (mg/dl)
21	SH11_CREATININE_MEASURED	Num	8	Creatinine measured?
22	SH11_CREATININE	Num	8	Creatinine (mg/dl)
23	SH11_GLUCOSE_MEASURED	Num	8	Glucose measured?
24	SH11_GLUCOSE	Num	8	Glucose (mg/dl)
25	SH11_SODIUM_MEASURED	Num	8	Sodium measured?
26	SH11_SODIUM	Num	8	Sodium (mEq/l)
27	SH11_CHOLESTEROL_MEASURED	Num	8	Cholesterol measured?
28	SH11_CHOLESTEROL	Num	8	Cholesterol (mg/dl)
29	SH11_BUN_MEASURED	Num	8	BUN measured?
30	SH11_BUN	Num	8	BUM (mg/dl)
31	SH11_SGOT_MEASURED	Num	8	SGOT measured?
32	SH11_SGOT	Num	8	SGOT (mu/ml)
33	SH11_CALCIUM_MEASURED	Num	8	Calcium measured?
34	SH11_CALCIUM	Num	8	Calcium (mg/dl)
35	SH11_HDL_MEASURED	Num	8	HDL measured?
36	SH11_HDL	Num	8	HDL (mg/dl)

Num	Variable	Type	Len	Label
37	SH11_TRIGLYCERIDES_MEASURED	Num	8	Triglycerides measured?
38	SH11_TRIGLYCERIDES	Num	8	Triglycerides (mg/dl)
39	SH11_OTHER_MEASURED	Num	8	Other measurements?
40	SH11_HEMATOLOGY_NOT_COMPLETED	Num	8	Hematology results not completed
41	SH11_WBC	Num	8	WBC (thousands)
42	SH11_HEMATOCRIT	Num	8	Hematocrit (%)
43	SH11_HEMOGLOBIN	Num	8	Hemoglobin (g/100ml)
44	SH11_URINALYSIS_NOT_COMPLETED	Num	8	Dipstick urinalysis not completed
45	SH11_URINALYSIS_PROTEIN	Num	8	Urinalysis protein results
46	SH11_URINALYSIS_GLUCOSE	Num	8	Urinalysis glucose results
47	SH11_URINALYSIS_PH	Num	8	Urinalysis PH results
48	SH11_URINALYSIS_BLOOD	Num	8	Urinalysis blood results
49	SH11_URINALYSIS_BILIRUBIN	Num	8	Urinalysis bilirubin results
50	SH11_URINALYSIS_KETONES	Num	8	Urinalysis ketones results
51	SH11_URINALYSIS_UROBILINOGEN	Num	8	Urinalysis urobilinogen results
52	SH11_NO_OTHER_TESTS	Num	8	No other tests run
53	SH11_OTHER_TESTS	Num	8	Other tests run?
54	SH11_COMPLETER_CODE	Num	8	Code of person who completed form
55	SH11_RECORD_TYPE	Num	8	SH11 Record Type
56	SH11_DATE_RECEIVED	Num	8	SH11 Date Tape Received from Metpath Lab
57	SH11_UPDATE_NUMBER	Num	8	SH11 Update Number
58	SH11_DATE_LAST_PROCESSED	Num	8	SH11 Date Last Processed
59	SH11_PAPER_COPY	Num	8	SH11 Paper Copy
60	SH11_CROSS_FORM_EDITS	Num	8	SH11 Cross form edits

Data Set Name: sh12.sas7bdat

Num	Variable	Type	Len	Label
1	SH12_RECORD_LENGTH	Num	8	SH12 Record Length
2	SH12_KEYPUNCH_CODE	Num	8	SH12 Keypuncher Code
3	SH12_BATCHDATE	Num	8	SH12 Batch Date
4	SH12_VERIFYER_CODE	Num	8	SH12 Verifyer Code
5	SH12_DATE_LAST_MODIFIED	Num	8	SH12 Date record was last modified
6	SH12_TIME_LAST_MODIFIED	Num	8	SH12 Time record was last modified
7	SH12_EDIT_STATUS_CODE	Num	8	SH12 Edit status code
8	SHEPID	Num	8	SHEP ID
9	FORMNUM	Num	8	Form number
10	SH12_VERSNNUM	Num	8	SH12 Version number
11	SH12_DRAWDATE	Num	8	Date Blood sample was drawn (in days from randomization)
12	SH12_SEQUENCE	Num	8	SH12 Sequence
13	ACROSTIC	Num	8	Acrostic
14	SH12_VISIT_SEQNUM	Num	8	Sequence number of clinic visit
15	SH12_CLINIC_ACCOUNTNUM	Num	8	Clinic Account number
16	SH12_BLOOD_SPECNUM	Char	6	Blood sample specimen number
17	SH12_DATE_LAB_RECEIVED	Num	8	Date specimen received at lab (in days from randomization)
18	SH12_DATE_LAB_PROCESSED	Num	8	Date specimen processed by lab (in days from randomization)
19	SH12_CHEMSCREEN_PANEL	Num	8	Chemistry screen panel done?
20	SH12_CHEMSCREEN_QUALITY	Char	3	Quality of Chemistry Panel tests?
21	SH12_ALKALINE_PHOS	Char	6	Alkaline Phosphatase (I.U/L) (implied decimal XXXX.XX)
22	SH12_ALKALINE_PHOS_FLAG	Char	1	Alkaline Phosphatase range flag
23	SH12_ALKALINE_PHOS_MESSAGE	Char	3	Message code for alkaline phospatase test result
24	SH12_BUN	Num	8	BUN (mg/dL) (implied decimal XXXX.XX)
25	SH12_BUN_FLAG	Char	1	BUN range flag
26	SH12_BUN_MESSAGE	Char	3	Message code for BUN test result
27	SH12_CA	Num	8	Calcium (mg/dL) (implied decimal XXXX.XX)
28	SH12_CA_FLAG	Char	1	Calcium range flag
29	SH12_CA_MESSAGE	Char	3	Message code for Calcium test result
30	SH12_CREATININE	Num	8	Creatinine (mg/dL) (implied decimal XXXX.XX)
31	SH12_CREATININE_FLAG	Char	1	Creatinine range flag
32	SH12_CREATININE_MESSAGE	Char	3	Message code for Creatinine test result
33	SH12_G_GLUTAMYL	Char	6	G-Glutamyl Transpeptide (units/L) (implied decimal XXXX.XX)
34	SH12_G_GLUTAMYL_FLAG	Char	1	G-Glutamyl Transpeptide range flag
35	SH12_G_GLUTAMYL_MESSAGE	Char	3	Message code for G-Glutamyl Transpeptide test result
36	SH12_GLUCOSE	Char	6	Glucose (mg/dL) (implied decimal XXXX.XX)

Num	Variable	Type	Len	Label
37	SH12_GLUCOSE_FLAG	Char	1	Glucose range flag
38	SH12_GLUCOSE_MESSAGE	Char	3	Message code for Glucose test result
39	SH12_POTASSIUM	Char	6	Potassium (mmol/L) (implied decimal XXXX.XX)
40	SH12_POTASSIUM_FLAG	Char	1	Potassium range flag
41	SH12_POTASSIUM_MESSAGE	Char	3	Message code for Potassium test result
42	SH12_SGOT	Num	8	SGOT (IU/L) (implied decimal XXXX.XX)
43	SH12_SGOT_FLAG	Char	1	SGOT range flag
44	SH12_SGOT_MESSAGE	Char	3	Message code for SGOT test result
45	SH12_SODIUM	Char	6	Sodium (mmol/L) (implied decimal XXXX.XX)
46	SH12_SODIUM_FLAG	Char	1	Sodium range flag
47	SH12_SODIUM_MESSAGE	Char	3	Message code for Sodium test result
48	SH12_URICACID	Num	8	Uric Acid (mg/dL) (implied decimal XXXX.XX)
49	SH12_URICACID_FLAG	Char	1	Uric Acid range flag
50	SH12_URICACID_MESSAGE	Char	3	Message code for Uric Acid test result
51	SH12_CHOLESTEROL	Char	6	Cholesterol (mg/dL) (implied decimal XXXX.XX)
52	SH12_CHOLESTEROL_FLAG	Char	1	Cholesterol range flag
53	SH12_CHOLESTEROL_MESSAGE	Char	3	Message code for Cholesterol test result
54	SH12_HDL	Num	8	HDL (mg/dL) (implied decimal XXXX.XX)
55	SH12_HDL_FLAG	Char	1	HDL range flag
56	SH12_HDL_MESSAGE	Char	3	Message code for HDL test result
57	SH12_TRIGLYCERIDE	Num	8	Triglycerides (mg/dL) (implied decimal XXXX.XX)
58	SH12_TRIGLYCERIDE_FLAG	Char	1	Triglycerides range flag
59	SH12_TRIGLYCERIDE_MESSAGE	Char	3	Message code for Triglycerides test result
60	SH12_LIPID_MESSAGE	Char	3	Message code for Lipid Pattern
61	SH12_LIPID_FLAG	Char	1	Range flag for Lipid Pattern test
62	SH12_RECORD_TYPE	Num	8	SH12 Record Type
63	SH12_DATE_RECEIVED	Num	8	SH12 Date Tape Received from Metpath Lab
64	SH12_UPDATE_NUMBER	Num	8	SH12 Update Number
65	SH12_DATE_LAST_PROCESSED	Num	8	SH12 Date Last Processed
66	SH12_CROSS_FORM_EDITS	Num	8	SH12 Cross form edits

Data Set Name: sh13.sas7bdat

Num	Variable	Type	Len	Label
1	SH13_RECORD_LENGTH	Num	8	SH13 Record Length
2	SH13_KEYPUNCH_CODE	Num	8	SH13 Keypuncher Code
3	SH13_BATCHDATE	Num	8	SH13 Batch Date
4	SH13_VERIFYER_CODE	Num	8	SH13 Verifyer Code
5	SH13_DATE_LAST_MODIFIED	Num	8	SH13 Date record was last modified
6	SH13_TIME_LAST_MODIFIED	Num	8	SH13 Time record was last modified
7	SH13_EDIT_STATUS_CODE	Num	8	SH13 Edit status code
8	SHEPID	Num	8	SHEP ID
9	FORMNUM	Num	8	Form number
10	SH13_VERSNNUM	Num	8	SH13 Version number
11	SH13_VISITDATE	Num	8	Date of clinic visit (in days from randomization)
12	SH13_SEQUENCE	Num	8	SH13 Sequence
13	ACROSTIC	Num	8	Acrostic
14	SH13_VISIT_SEQNUM	Num	8	Sequence number of clinic visit
15	SH13_DATE_RESULT_RCVD	Num	8	Date test result received (in days from randomization)
16	SH13_DATE_CLINICIAN_RCVD	Num	8	Date test result received by clinician (in days from randomization)
17	SH13_POTASSIUM_ABNORMAL	Num	8	Potassium result abnormal?
18	SH13_POTASSIUM_VALUE	Num	8	Potassium (mEq/L) (implied decimal X.X)
19	SH13_URICACID_ABNORMAL	Num	8	Uric Acid result abnormal?
20	SH13_URICACID_VALUE	Num	8	Uric Acid (mg/dL) (implied decimal XX.X)
21	SH13_OTHER_ABNORMAL	Num	8	Other results abnormal?
22	SH13_RECEIVER_CODE	Num	8	Code of person receiving result
23	SH13_CLINICIAN_CODE	Num	8	Code of clinician reviewing result
24	SH13_RECORD_TYPE	Num	8	SH13 Record Type
25	SH13_DATE_RECEIVED	Num	8	SH13 Date Tape Received from Metpath Lab
26	SH13_UPDATE_NUMBER	Num	8	SH13 Update Number
27	SH13_DATE_LAST_PROCESSED	Num	8	SH13 Date Last Processed
28	SH13_PAPER_COPY	Num	8	SH13 Paper Copy
29	SH13_CROSS_FORM_EDITS	Num	8	SH13 Cross form edits

Data Set Name: sh14.sas7bdat

Num	Variable	Type	Len	Label
1	SH14_RECORD_LENGTH	Num	8	SH14 Record Length
2	SH14_KEYPUNCH_CODE	Num	8	SH14 Keypuncher Code
3	SH14_BATCHDATE	Num	8	SH14 Batch Date
4	SH14_VERIFYER_CODE	Num	8	SH14 Verifyer Code
5	SH14_DATE_LAST_MODIFIED	Num	8	SH14 Date record was last modified
6	SH14_TIME_LAST_MODIFIED	Num	8	SH14 Time record was last modified
7	SH14_EDIT_STATUS_CODE	Num	8	SH14 Edit status code
8	SHEPID	Num	8	SHEP ID
9	FORMNUM	Num	8	Form number
10	SH14_VERSNNUM	Num	8	SH14 Version number
11	SH14_DATE_INITIATED	Num	8	Date SH14 form was initiated (in days from randomization)
12	SH14_SEQUENCE	Num	8	SH14 sequence number
13	ACROSTIC	Num	8	Acrostic
14	SH14_CT_SCAN_DATE	Num	8	Date of CT Scan (in days from randomization)
15	SH14_CT_SCAN_SOURCE	Num	8	Source of CT Scan
16	SH14_FINAL_REPORT_DATE	Num	8	Date of Final report to which this CT Scan applies (in days from randomization)
17	SH14_ONSET_DATE	Num	8	Date of Onset (in days from randomization)
18	SH14_DATE_CC_SENDS_RC	Num	8	Date Coordinating Center sends to CT Scan Reading Center (in days from randomization)
19	SH14_CODER_NUMBER	Char	2	Coder number
20	SH14_CODING_DATE	Num	8	Date of coding at CT Scan Reading Center (in days from randomization)
21	SH14_SCAN_TYPE	Num	8	Type of Scan
22	SH14_TECHNICAL_ADEQUACY	Num	8	Technical adequacy of scan?
23	SH14_CT_SCAN_NORMAL	Num	8	Is CT Scan normal?
24	SH14_NUM_LESIONS	Num	8	Number of lesions related to this event
25	SH14_LESION1_SIDE	Num	8	Side, Lesion 1
26	SH14_LESION2_SIDE	Num	8	Side, Lesion 2
27	SH14_LESION3_SIDE	Num	8	Side, Lesion 3
28	SH14_LESION4_SIDE	Num	8	Side, Lesion 4
29	SH14_LESION5_SIDE	Num	8	Side, Lesion 5
30	SH14_LESION6_SIDE	Num	8	Side, Lesion 6
31	SH14_LESION1_PATHOLOGY1	Num	8	Pathology 1, Lesion 1
32	SH14_LESION1_PATHOLOGY2	Num	8	Pathology 2, Lesion 1
33	SH14_LESION1_PATHOLOGY3	Num	8	Pathology 3, Lesion 1
34	SH14_LESION1_PATHOLOGY4	Num	8	Pathology 4, Lesion 1
35	SH14_LESION2_PATHOLOGY1	Num	8	Pathology 1, Lesion 2

Num	Variable	Type	Len	Label
36	SH14_LESION2_PATHOLOGY2	Num	8	Pathology 2, Lesion 2
37	SH14_LESION2_PATHOLOGY3	Num	8	Pathology 3, Lesion 2
38	SH14_LESION2_PATHOLOGY4	Num	8	Pathology 4, Lesion 2
39	SH14_LESION3_PATHOLOGY1	Num	8	Pathology 1, Lesion 3
40	SH14_LESION3_PATHOLOGY2	Num	8	Pathology 2, Lesion 3
41	SH14_LESION3_PATHOLOGY3	Num	8	Pathology 3, Lesion 3
42	SH14_LESION3_PATHOLOGY4	Num	8	Pathology 4, Lesion 3
43	SH14_LESION4_PATHOLOGY1	Num	8	Pathology 1, Lesion 4
44	SH14_LESION4_PATHOLOGY2	Num	8	Pathology 2, Lesion 4
45	SH14_LESION4_PATHOLOGY3	Num	8	Pathology 3, Lesion 4
46	SH14_LESION4_PATHOLOGY4	Num	8	Pathology 4, Lesion 4
47	SH14_LESION5_PATHOLOGY1	Num	8	Pathology 1, Lesion 5
48	SH14_LESION5_PATHOLOGY2	Num	8	Pathology 2, Lesion 5
49	SH14_LESION5_PATHOLOGY3	Num	8	Pathology 3, Lesion 5
50	SH14_LESION5_PATHOLOGY4	Num	8	Pathology 4, Lesion 5
51	SH14_LESION6_PATHOLOGY1	Num	8	Pathology 1, Lesion 6
52	SH14_LESION6_PATHOLOGY2	Num	8	Pathology 2, Lesion 6
53	SH14_LESION6_PATHOLOGY3	Num	8	Pathology 3, Lesion 6
54	SH14_LESION6_PATHOLOGY4	Num	8	Pathology 4, Lesion 6
55	SH14_LESION1_ANATOMY1	Num	8	Anatomy 1, Lesion 1
56	SH14_LESION1_ANATOMY2	Num	8	Anatomy 2, Lesion 1
57	SH14_LESION1_ANATOMY3	Num	8	Anatomy 3, Lesion 1
58	SH14_LESION1_ANATOMY4	Num	8	Anatomy 4, Lesion 1
59	SH14_LESION1_ANATOMY5	Num	8	Anatomy 5, Lesion 1
60	SH14_LESION2_ANATOMY1	Num	8	Anatomy 1, Lesion 2
61	SH14_LESION2_ANATOMY2	Num	8	Anatomy 2, Lesion 2
62	SH14_LESION2_ANATOMY3	Num	8	Anatomy 3, Lesion 2
63	SH14_LESION2_ANATOMY4	Num	8	Anatomy 4, Lesion 2
64	SH14_LESION2_ANATOMY5	Num	8	Anatomy 5, Lesion 2
65	SH14_LESION3_ANATOMY1	Num	8	Anatomy 1, Lesion 3
66	SH14_LESION3_ANATOMY2	Num	8	Anatomy 2, Lesion 3
67	SH14_LESION3_ANATOMY3	Num	8	Anatomy 3, Lesion 3
68	SH14_LESION3_ANATOMY4	Num	8	Anatomy 4, Lesion 3
69	SH14_LESION3_ANATOMY5	Num	8	Anatomy 5, Lesion 3
70	SH14_LESION4_ANATOMY1	Num	8	Anatomy 1, Lesion 4
71	SH14_LESION4_ANATOMY2	Num	8	Anatomy 2, Lesion 4
72	SH14_LESION4_ANATOMY3	Num	8	Anatomy 3, Lesion 4
73	SH14_LESION4_ANATOMY4	Num	8	Anatomy 4, Lesion 4
74	SH14_LESION4_ANATOMY5	Num	8	Anatomy 5, Lesion 4

Num	Variable	Type	Len	Label
75	SH14_LESION5_ANATOMY1	Num	8	Anatomy 1, Lesion 5
76	SH14_LESION5_ANATOMY2	Num	8	Anatomy 2, Lesion 5
77	SH14_LESION5_ANATOMY3	Num	8	Anatomy 3, Lesion 5
78	SH14_LESION5_ANATOMY4	Num	8	Anatomy 4, Lesion 5
79	SH14_LESION5_ANATOMY5	Num	8	Anatomy 5, Lesion 5
80	SH14_LESION6_ANATOMY1	Num	8	Anatomy 1, Lesion 6
81	SH14_LESION6_ANATOMY2	Num	8	Anatomy 2, Lesion 6
82	SH14_LESION6_ANATOMY3	Num	8	Anatomy 3, Lesion 6
83	SH14_LESION6_ANATOMY4	Num	8	Anatomy 4, Lesion 6
84	SH14_LESION6_ANATOMY5	Num	8	Anatomy 5, Lesion 6
85	SH14_LESION1_DENSITY	Num	8	Density, Lesion 1
86	SH14_LESION2_DENSITY	Num	8	Density, Lesion 2
87	SH14_LESION3_DENSITY	Num	8	Density, Lesion 3
88	SH14_LESION4_DENSITY	Num	8	Density, Lesion 4
89	SH14_LESION5_DENSITY	Num	8	Density, Lesion 5
90	SH14_LESION6_DENSITY	Num	8	Density, Lesion 6
91	SH14_LESION1_SIZE_SCALE	Num	8	Size scale, Lesion 1
92	SH14_LESION2_SIZE_SCALE	Num	8	Size scale, Lesion 2
93	SH14_LESION3_SIZE_SCALE	Num	8	Size scale, Lesion 3
94	SH14_LESION4_SIZE_SCALE	Num	8	Size scale, Lesion 4
95	SH14_LESION5_SIZE_SCALE	Num	8	Size scale, Lesion 5
96	SH14_LESION6_SIZE_SCALE	Num	8	Size scale, Lesion 6
97	SH14_LESION1_SIZE_CHANGE	Num	8	Change in size from previous CT scan, Lesion 1
98	SH14_LESION2_SIZE_CHANGE	Num	8	Change in size from previous CT scan, Lesion 2
99	SH14_LESION3_SIZE_CHANGE	Num	8	Change in size from previous CT scan, Lesion 3
100	SH14_LESION4_SIZE_CHANGE	Num	8	Change in size from previous CT scan, Lesion 4
101	SH14_LESION5_SIZE_CHANGE	Num	8	Change in size from previous CT scan, Lesion 5
102	SH14_LESION6_SIZE_CHANGE	Num	8	Change in size from previous CT scan, Lesion 6
103	SH14_LESION1_EDEMA	Num	8	Edema, Lesion 1
104	SH14_LESION2_EDEMA	Num	8	Edema, Lesion 2
105	SH14_LESION3_EDEMA	Num	8	Edema, Lesion 3
106	SH14_LESION4_EDEMA	Num	8	Edema, Lesion 4
107	SH14_LESION5_EDEMA	Num	8	Edema, Lesion 5
108	SH14_LESION6_EDEMA	Num	8	Edema, Lesion 6
109	SH14_LESION1_MASS_EFFECT	Num	8	Mass Effect, Lesion 1
110	SH14_LESION2_MASS_EFFECT	Num	8	Mass Effect, Lesion 2
111	SH14_LESION3_MASS_EFFECT	Num	8	Mass Effect, Lesion 3
112	SH14_LESION4_MASS_EFFECT	Num	8	Mass Effect, Lesion 4
113	SH14_LESION5_MASS_EFFECT	Num	8	Mass Effect, Lesion 5

Num	Variable	Type	Len	Label
114	SH14_LESION6_MASS_EFFECT	Num	8	Mass Effect, Lesion 6
115	SH14_LESION1_ENHANCEMENT	Num	8	Enhancement, Lesion 1
116	SH14_LESION2_ENHANCEMENT	Num	8	Enhancement, Lesion 2
117	SH14_LESION3_ENHANCEMENT	Num	8	Enhancement, Lesion 3
118	SH14_LESION4_ENHANCEMENT	Num	8	Enhancement, Lesion 4
119	SH14_LESION5_ENHANCEMENT	Num	8	Enhancement, Lesion 5
120	SH14_LESION6_ENHANCEMENT	Num	8	Enhancement, Lesion 6
121	SH14_LESION1_ENHANCEMENT_TYPE	Num	8	Enhancement type, Lesion 1
122	SH14_LESION2_ENHANCEMENT_TYPE	Num	8	Enhancement type, Lesion 2
123	SH14_LESION3_ENHANCEMENT_TYPE	Num	8	Enhancement type, Lesion 3
124	SH14_LESION4_ENHANCEMENT_TYPE	Num	8	Enhancement type, Lesion 4
125	SH14_LESION5_ENHANCEMENT_TYPE	Num	8	Enhancement type, Lesion 5
126	SH14_LESION6_ENHANCEMENT_TYPE	Num	8	Enhancement type, Lesion 6
127	SH14_LESION1_CLIN_RELEVANCE	Num	8	Clin revelance, Lesion 1
128	SH14_LESION2_CLIN_RELEVANCE	Num	8	Clin revelance, Lesion 2
129	SH14_LESION3_CLIN_RELEVANCE	Num	8	Clin revelance, Lesion 3
130	SH14_LESION4_CLIN_RELEVANCE	Num	8	Clin revelance, Lesion 4
131	SH14_LESION5_CLIN_RELEVANCE	Num	8	Clin revelance, Lesion 5
132	SH14_LESION6_CLIN_RELEVANCE	Num	8	Clin revelance, Lesion 6
133	SH14_LESION1_HEMORRHAGE	Num	8	Hemorrhage, Lesion 1
134	SH14_LESION2_HEMORRHAGE	Num	8	Hemorrhage, Lesion 2
135	SH14_LESION3_HEMORRHAGE	Num	8	Hemorrhage, Lesion 3
136	SH14_LESION4_HEMORRHAGE	Num	8	Hemorrhage, Lesion 4
137	SH14_LESION5_HEMORRHAGE	Num	8	Hemorrhage, Lesion 5
138	SH14_LESION6_HEMORRHAGE	Num	8	Hemorrhage, Lesion 6
139	SH14_CORTICAL_ATROPHY	Num	8	Cortical atrophy?
140	SH14_HYDROCEPHALUS	Num	8	Hydrocephalus?
141	SH14_RECORD_TYPE	Num	8	SH14 Record Type
142	SH14_DATE_RECEIVED	Num	8	SH14 Date Tape Received from Metpath Lab
143	SH14_UPDATE_NUMBER	Num	8	SH14 Update Number
144	SH14_DATE_LAST_PROCESSED	Num	8	SH14 Date Last Processed
145	SH14_PAPER_COPY	Num	8	SH14 Paper Copy
146	SH14_CROSS_FORM_EDITS	Num	8	SH14 Cross form edits
147	SH14_LESION1_VOLUME	Num	8	Volume, Lesion 1 (cc)
148	SH14_LESION2_VOLUME	Num	8	Volume, Lesion 2 (cc)
149	SH14_LESION3_VOLUME	Num	8	Volume, Lesion 3 (cc)
150	SH14_LESION4_VOLUME	Num	8	Volume, Lesion 4 (cc)
151	SH14_LESION5_VOLUME	Num	8	Volume, Lesion 5 (cc)
152	SH14_LESION6_VOLUME	Num	8	Volume, Lesion 6 (cc)

Num	Variable	Type	Len	Label
153	SH14_LESION1_DIAMETER	Num	8	Diameter, Lesion 1 (mm)
154	SH14_LESION2_DIAMETER	Num	8	Diameter, Lesion 2 (mm)
155	SH14_LESION3_DIAMETER	Num	8	Diameter, Lesion 3 (mm)
156	SH14_LESION4_DIAMETER	Num	8	Diameter, Lesion 4 (mm)
157	SH14_LESION5_DIAMETER	Num	8	Diameter, Lesion 5 (mm)
158	SH14_LESION6_DIAMETER	Num	8	Diameter, Lesion 6 (mm)
159	SH14_CORONAL_VIEWS	Num	8	If SAH, were coronal views done?
160	SH14_CORONAL_VIEW_RESULTS	Num	8	Results of coronal views
161	SH14_LESION1_THICKNESS	Num	8	Thickness, Lesion 1 (mm)
162	SH14_LESION2_THICKNESS	Num	8	Thickness, Lesion 2 (mm)
163	SH14_LESION3_THICKNESS	Num	8	Thickness, Lesion 3 (mm)
164	SH14_LESION4_THICKNESS	Num	8	Thickness, Lesion 4 (mm)
165	SH14_LESION5_THICKNESS	Num	8	Thickness, Lesion 5 (mm)
166	SH14_LESION6_THICKNESS	Num	8	Thickness, Lesion 6 (mm)
167	SH14_LESION1_NUM_SECTIONS	Num	8	Number of sections lesion 1 is visible in
168	SH14_LESION2_NUM_SECTIONS	Num	8	Number of sections lesion 2 is visible in
169	SH14_LESION3_NUM_SECTIONS	Num	8	Number of sections lesion 3 is visible in
170	SH14_LESION4_NUM_SECTIONS	Num	8	Number of sections lesion 4 is visible in
171	SH14_LESION5_NUM_SECTIONS	Num	8	Number of sections lesion 5 is visible in
172	SH14_LESION6_NUM_SECTIONS	Num	8	Number of sections lesion 6 is visible in
173	SH14_LESION1_LARGEST_DIA	Num	8	Largest diameter, Lesion 1 (mm)
174	SH14_LESION2_LARGEST_DIA	Num	8	Largest diameter, Lesion 2 (mm)
175	SH14_LESION3_LARGEST_DIA	Num	8	Largest diameter, Lesion 3 (mm)
176	SH14_LESION4_LARGEST_DIA	Num	8	Largest diameter, Lesion 4 (mm)
177	SH14_LESION5_LARGEST_DIA	Num	8	Largest diameter, Lesion 5 (mm)
178	SH14_LESION6_LARGEST_DIA	Num	8	Largest diameter, Lesion 6 (mm)
179	SH14_LESION1_DIA_RT_ANGLE	Num	8	Diameter at right angles to largest diameter, Lesion 1 (mm)
180	SH14_LESION2_DIA_RT_ANGLE	Num	8	Diameter at right angles to largest diameter, Lesion 2 (mm)
181	SH14_LESION3_DIA_RT_ANGLE	Num	8	Diameter at right angles to largest diameter, Lesion 3 (mm)
182	SH14_LESION4_DIA_RT_ANGLE	Num	8	Diameter at right angles to largest diameter, Lesion 4 (mm)
183	SH14_LESION5_DIA_RT_ANGLE	Num	8	Diameter at right angles to largest diameter, Lesion 5 (mm)
184	SH14_LESION6_DIA_RT_ANGLE	Num	8	Diameter at right angles to largest diameter, Lesion 6 (mm)
185	SH14_PERIVENT_HYPODENSITY	Num	8	Periventricular hypodensity (by CT)?
186	SH14_BRIGHT_PLAQUES	Num	8	Bright plaques (T 2 image MRI)?
187	SH14_COMMENTS	Num	8	Comments or additional description?
188	SH14_CODING_RESULT	Num	8	Coding result
189	SH14_ADJUDICATION_RESULT	Num	8	Result of adjudication

Data Set Name: sh15.sas7bdat

Num	Variable	Type	Len	Label
1	SH15_RECORD_LENGTH	Num	8	SH15 Record Length
2	SH15_KEYPUNCH_CODE	Num	8	SH15 Keypuncher Code
3	SH15_BATCHDATE	Num	8	SH15 Batch Date
4	SH15_VERIFYER_CODE	Num	8	SH15 Verifyer Code
5	SH15_DATE_LAST_MODIFIED	Num	8	SH15 Date record was last modified
6	SH15_TIME_LAST_MODIFIED	Num	8	SH15 Time record was last modified
7	SH15_EDIT_STATUS_CODE	Num	8	SH15 Edit status code
8	SHEPID	Num	8	SHEP ID
9	FORMNUM	Num	8	Form number
10	SH15_VERSNNUM	Num	8	SH15 Version number
11	SH15_DATE_COLLECTED	Num	8	Urine sample collection date (in days from randomization)
12	SH15_SEQUENCE	Num	8	SH15 Sequence
13	ACROSTIC	Num	8	Acrostic
14	SH15_VISIT_SEQNUM	Num	8	Sequence number of clinic visit
15	SH15_CLINIC_ACCOUNTNUM	Num	8	Clinic Account number
16	SH15_URINE_SPECNUM	Char	6	Urine sample specimen number
17	SH15_DATE_LAB_RECEIVED	Num	8	Date Lab received sample (in days from randomization)
18	SH15_DATE_LAB_PROCESS	Num	8	Date Lab processed sample (in days from randomization)
19	SH15_CHLORTHALIDONE	Num	8	Presence of Chlorthalidone confirmed?
20	SH15_CHLORTHALIDONE_MESSAGE	Char	3	Message code for Chlorthalidone test result
21	SH15_RECORD_TYPE	Num	8	SH15 Record Type
22	SH15_DATE_RECEIVED	Num	8	SH15 Date Tape Received from Metpath Lab
23	SH15_UPDATE_NUMBER	Num	8	SH15 Update Number
24	SH15_DATE_LAST_PROCESSED	Num	8	SH15 Date Last Processed
25	SH15_PAPER_COPY	Num	8	SH15 Paper Copy

Data Set Name: sh16.sas7bdat

Num	Variable	Type	Len	Label
1	SH16_RECORD_LENGTH	Num	8	SH16 Record Length
2	SH16_KEYPUNCH_CODE	Num	8	SH16 Keypuncher Code
3	SH16_BATCHDATE	Num	8	SH16 Batch Date
4	SH16_VERIFYER_CODE	Num	8	SH16 Verifyer Code
5	SH16_DATE_LAST_MODIFIED	Num	8	SH16 Date record was last modified
6	SH16_TIME_LAST_MODIFIED	Num	8	SH16 Time record was last modified
7	SH16_EDIT_STATUS_CODE	Num	8	SH16 Edit status code
8	SHEPID	Num	8	SHEP ID
9	FORMNUM	Num	8	Form number
10	SH16_VERSNNUM	Num	8	SH16 Version number
11	SH16_DATE_INITIATED	Num	8	Date SH16 was initiated (in days from randomization)
12	SH16_SEQUENCE	Num	8	SH16 sequence number
13	ACROSTIC	Num	8	Acrostic
14	SH16_CT_SCAN_DATE	Num	8	Date of CT scan (in days from randomization)
15	SH16_CT_SCAN_SOURCE	Num	8	Source of CT scan
16	SH16_SH31_DATE	Num	8	Date of Dementia Evaluation Form (SH31) this CT scan applies (in days from randomization)
17	SH16_DATE_CC_SENDS_CT	Num	8	Date Coordinating Center sends to CT Scan Reading Center (in days from randomization)
18	SH16_CODER_NUMBER	Num	8	Coder number
19	SH16_CODING_DATE	Num	8	Date of coding at CT Scan Reading Center (in days from randomization)
20	SH16_SCAN_TYPE	Num	8	Type of Scan
21	SH16_ADEQUACY	Num	8	Technical adequacy of this study
22	SH16_CT_SCAN_NORMAL	Num	8	Is CT scan normal?
23	SH16_NUM_FOCAL_LESIONS	Num	8	Number of focal lesions related to this event
24	SH16_LESION1_SIDE	Num	8	Side, Lesion 1
25	SH16_LESION2_SIDE	Num	8	Side, Lesion 2
26	SH16_LESION3_SIDE	Num	8	Side, Lesion 3
27	SH16_LESION4_SIDE	Num	8	Side, Lesion 4
28	SH16_LESION5_SIDE	Num	8	Side, Lesion 5
29	SH16_LESION6_SIDE	Num	8	Side, Lesion 6
30	SH16_LESION1_PATHOLOGY1	Num	8	Pathology 1, Lesion 1
31	SH16_LESION1_PATHOLOGY2	Num	8	Pathology 2, Lesion 1
32	SH16_LESION1_PATHOLOGY3	Num	8	Pathology 3, Lesion 1
33	SH16_LESION1_PATHOLOGY4	Num	8	Pathology 4, Lesion 1
34	SH16_LESION2_PATHOLOGY1	Num	8	Pathology 1, Lesion 2
35	SH16_LESION2_PATHOLOGY2	Num	8	Pathology 2, Lesion 2

Num	Variable	Type	Len	Label
36	SH16_LESION2_PATHOLOGY3	Num	8	Pathology 3, Lesion 2
37	SH16_LESION2_PATHOLOGY4	Num	8	Pathology 4, Lesion 2
38	SH16_LESION3_PATHOLOGY1	Num	8	Pathology 1, Lesion 3
39	SH16_LESION3_PATHOLOGY2	Num	8	Pathology 2, Lesion 3
40	SH16_LESION3_PATHOLOGY3	Num	8	Pathology 3, Lesion 3
41	SH16_LESION3_PATHOLOGY4	Num	8	Pathology 4, Lesion 3
42	SH16_LESION4_PATHOLOGY1	Num	8	Pathology 1, Lesion 4
43	SH16_LESION4_PATHOLOGY2	Num	8	Pathology 2, Lesion 4
44	SH16_LESION4_PATHOLOGY3	Num	8	Pathology 3, Lesion 4
45	SH16_LESION4_PATHOLOGY4	Num	8	Pathology 4, Lesion 4
46	SH16_LESION5_PATHOLOGY1	Num	8	Pathology 1, Lesion 5
47	SH16_LESION5_PATHOLOGY2	Num	8	Pathology 2, Lesion 5
48	SH16_LESION5_PATHOLOGY3	Num	8	Pathology 3, Lesion 5
49	SH16_LESION5_PATHOLOGY4	Num	8	Pathology 4, Lesion 5
50	SH16_LESION6_PATHOLOGY1	Num	8	Pathology 1, Lesion 6
51	SH16_LESION6_PATHOLOGY2	Num	8	Pathology 2, Lesion 6
52	SH16_LESION6_PATHOLOGY3	Num	8	Pathology 3, Lesion 6
53	SH16_LESION6_PATHOLOGY4	Num	8	Pathology 4, Lesion 6
54	SH16_LESION1_ANATOMY1	Num	8	Anatomy 1, Lesion 1
55	SH16_LESION1_ANATOMY2	Num	8	Anatomy 2, Lesion 1
56	SH16_LESION1_ANATOMY3	Num	8	Anatomy 3, Lesion 1
57	SH16_LESION1_ANATOMY4	Num	8	Anatomy 4, Lesion 1
58	SH16_LESION1_ANATOMY5	Num	8	Anatomy 5, Lesion 1
59	SH16_LESION2_ANATOMY1	Num	8	Anatomy 1, Lesion 2
60	SH16_LESION2_ANATOMY2	Num	8	Anatomy 2, Lesion 2
61	SH16_LESION2_ANATOMY3	Num	8	Anatomy 3, Lesion 2
62	SH16_LESION2_ANATOMY4	Num	8	Anatomy 4, Lesion 2
63	SH16_LESION2_ANATOMY5	Num	8	Anatomy 5, Lesion 2
64	SH16_LESION3_ANATOMY1	Num	8	Anatomy 1, Lesion 3
65	SH16_LESION3_ANATOMY2	Num	8	Anatomy 2, Lesion 3
66	SH16_LESION3_ANATOMY3	Num	8	Anatomy 3, Lesion 3
67	SH16_LESION3_ANATOMY4	Num	8	Anatomy 4, Lesion 3
68	SH16_LESION3_ANATOMY5	Num	8	Anatomy 5, Lesion 3
69	SH16_LESION4_ANATOMY1	Num	8	Anatomy 1, Lesion 4
70	SH16_LESION4_ANATOMY2	Num	8	Anatomy 2, Lesion 4
71	SH16_LESION4_ANATOMY3	Num	8	Anatomy 3, Lesion 4
72	SH16_LESION4_ANATOMY4	Num	8	Anatomy 4, Lesion 4
73	SH16_LESION4_ANATOMY5	Num	8	Anatomy 5, Lesion 4
74	SH16_LESION5_ANATOMY1	Num	8	Anatomy 1, Lesion 5

Num	Variable	Type	Len	Label
75	SH16_LESION5_ANATOMY2	Num	8	Anatomy 2, Lesion 5
76	SH16_LESION5_ANATOMY3	Num	8	Anatomy 3, Lesion 5
77	SH16_LESION5_ANATOMY4	Num	8	Anatomy 4, Lesion 5
78	SH16_LESION5_ANATOMY5	Num	8	Anatomy 5, Lesion 5
79	SH16_LESION6_ANATOMY1	Num	8	Anatomy 1, Lesion 6
80	SH16_LESION6_ANATOMY2	Num	8	Anatomy 2, Lesion 6
81	SH16_LESION6_ANATOMY3	Num	8	Anatomy 3, Lesion 6
82	SH16_LESION6_ANATOMY4	Num	8	Anatomy 4, Lesion 6
83	SH16_LESION6_ANATOMY5	Num	8	Anatomy 5, Lesion 6
84	SH16_LESION1_THICKNESS	Num	8	Thickness, Lesion 1 (mm)
85	SH16_LESION2_THICKNESS	Num	8	Thickness, Lesion 2 (mm)
86	SH16_LESION3_THICKNESS	Num	8	Thickness, Lesion 3 (mm)
87	SH16_LESION4_THICKNESS	Num	8	Thickness, Lesion 4 (mm)
88	SH16_LESION5_THICKNESS	Num	8	Thickness, Lesion 5 (mm)
89	SH16_LESION6_THICKNESS	Num	8	Thickness, Lesion 6 (mm)
90	SH16_LESION1_NUM_SECTIONS	Num	8	Number of sections lesion 1 is visible in
91	SH16_LESION2_NUM_SECTIONS	Num	8	Number of sections lesion 2 is visible in
92	SH16_LESION3_NUM_SECTIONS	Num	8	Number of sections lesion 3 is visible in
93	SH16_LESION4_NUM_SECTIONS	Num	8	Number of sections lesion 4 is visible in
94	SH16_LESION5_NUM_SECTIONS	Num	8	Number of sections lesion 5 is visible in
95	SH16_LESION6_NUM_SECTIONS	Num	8	Number of sections lesion 6 is visible in
96	SH16_LESION1_LARGEST_DIA	Num	8	Largest diameter, Lesion 1 (mm)
97	SH16_LESION2_LARGEST_DIA	Num	8	Largest diameter, Lesion 2 (mm)
98	SH16_LESION3_LARGEST_DIA	Num	8	Largest diameter, Lesion 3 (mm)
99	SH16_LESION4_LARGEST_DIA	Num	8	Largest diameter, Lesion 4 (mm)
100	SH16_LESION5_LARGEST_DIA	Num	8	Largest diameter, Lesion 5 (mm)
101	SH16_LESION6_LARGEST_DIA	Num	8	Largest diameter, Lesion 6 (mm)
102	SH16_LESION1_DIA_RIGHT_ANGLE	Num	8	Diameter at right angles to largest diameter, Lesion 1 (mm)
103	SH16_LESION2_DIA_RIGHT_ANGLE	Num	8	Diameter at right angles to largest diameter, Lesion 2 (mm)
104	SH16_LESION3_DIA_RIGHT_ANGLE	Num	8	Diameter at right angles to largest diameter, Lesion 3 (mm)
105	SH16_LESION4_DIA_RIGHT_ANGLE	Num	8	Diameter at right angles to largest diameter, Lesion 4 (mm)
106	SH16_LESION5_DIA_RIGHT_ANGLE	Num	8	Diameter at right angles to largest diameter, Lesion 5 (mm)
107	SH16_LESION6_DIA_RIGHT_ANGLE	Num	8	Diameter at right angles to largest diameter, Lesion 6 (mm)
108	SH16_LESION1_DENSITY	Num	8	Density, Lesion 1
109	SH16_LESION2_DENSITY	Num	8	Density, Lesion 2
110	SH16_LESION3_DENSITY	Num	8	Density, Lesion 3
111	SH16_LESION4_DENSITY	Num	8	Density, Lesion 4
112	SH16_LESION5_DENSITY	Num	8	Density, Lesion 5
113	SH16_LESION6_DENSITY	Num	8	Density, Lesion 6

Num	Variable	Type	Len	Label
114	SH16_LESION1_SIZE_SCALE	Num	8	Size scale, Lesion 1
115	SH16_LESION2_SIZE_SCALE	Num	8	Size scale, Lesion 2
116	SH16_LESION3_SIZE_SCALE	Num	8	Size scale, Lesion 3
117	SH16_LESION4_SIZE_SCALE	Num	8	Size scale, Lesion 4
118	SH16_LESION5_SIZE_SCALE	Num	8	Size scale, Lesion 5
119	SH16_LESION6_SIZE_SCALE	Num	8	Size scale, Lesion 6
120	SH16_LESION1_SIZE_CHANGE	Num	8	Change in size from previous CT scan, Lesion 1
121	SH16_LESION2_SIZE_CHANGE	Num	8	Change in size from previous CT scan, Lesion 2
122	SH16_LESION3_SIZE_CHANGE	Num	8	Change in size from previous CT scan, Lesion 3
123	SH16_LESION4_SIZE_CHANGE	Num	8	Change in size from previous CT scan, Lesion 4
124	SH16_LESION5_SIZE_CHANGE	Num	8	Change in size from previous CT scan, Lesion 5
125	SH16_LESION6_SIZE_CHANGE	Num	8	Change in size from previous CT scan, Lesion 6
126	SH16_LESION1_EDEMA	Num	8	Edema, Lesion 1
127	SH16_LESION2_EDEMA	Num	8	Edema, Lesion 2
128	SH16_LESION3_EDEMA	Num	8	Edema, Lesion 3
129	SH16_LESION4_EDEMA	Num	8	Edema, Lesion 4
130	SH16_LESION5_EDEMA	Num	8	Edema, Lesion 5
131	SH16_LESION6_EDEMA	Num	8	Edema, Lesion 6
132	SH16_LESION1_MASS_EFFECT	Num	8	Mass Effect, Lesion 1
133	SH16_LESION2_MASS_EFFECT	Num	8	Mass Effect, Lesion 2
134	SH16_LESION3_MASS_EFFECT	Num	8	Mass Effect, Lesion 3
135	SH16_LESION4_MASS_EFFECT	Num	8	Mass Effect, Lesion 4
136	SH16_LESION5_MASS_EFFECT	Num	8	Mass Effect, Lesion 5
137	SH16_LESION6_MASS_EFFECT	Num	8	Mass Effect, Lesion 6
138	SH16_LESION1_ENHANCEMENT	Num	8	Enhancement, Lesion 1
139	SH16_LESION2_ENHANCEMENT	Num	8	Enhancement, Lesion 2
140	SH16_LESION3_ENHANCEMENT	Num	8	Enhancement, Lesion 3
141	SH16_LESION4_ENHANCEMENT	Num	8	Enhancement, Lesion 4
142	SH16_LESION5_ENHANCEMENT	Num	8	Enhancement, Lesion 5
143	SH16_LESION6_ENHANCEMENT	Num	8	Enhancement, Lesion 6
144	SH16_LESION1_ENHANCEMENT_TYPE	Num	8	Enhancement type, Lesion 1
145	SH16_LESION2_ENHANCEMENT_TYPE	Num	8	Enhancement type, Lesion 2
146	SH16_LESION3_ENHANCEMENT_TYPE	Num	8	Enhancement type, Lesion 3
147	SH16_LESION4_ENHANCEMENT_TYPE	Num	8	Enhancement type, Lesion 4
148	SH16_LESION5_ENHANCEMENT_TYPE	Num	8	Enhancement type, Lesion 5
149	SH16_LESION6_ENHANCEMENT_TYPE	Num	8	Enhancement type, Lesion 6
150	SH16_LESION1_CLIN_REVELANCE	Num	8	Clin revelance, Lesion 1
151	SH16_LESION2_CLIN_REVELANCE	Num	8	Clin revelance, Lesion 2
152	SH16_LESION3_CLIN_REVELANCE	Num	8	Clin revelance, Lesion 3

Num	Variable	Type	Len	Label
153	SH16_LESION4_CLIN_REVELANCE	Num	8	Clin revelance, Lesion 4
154	SH16_LESION5_CLIN_REVELANCE	Num	8	Clin revelance, Lesion 5
155	SH16_LESION6_CLIN_REVELANCE	Num	8	Clin revelance, Lesion 6
156	SH16_LESION1_HEMORRHAGE	Num	8	Hemorrhage, Lesion 1
157	SH16_LESION2_HEMORRHAGE	Num	8	Hemorrhage, Lesion 2
158	SH16_LESION3_HEMORRHAGE	Num	8	Hemorrhage, Lesion 3
159	SH16_LESION4_HEMORRHAGE	Num	8	Hemorrhage, Lesion 4
160	SH16_LESION5_HEMORRHAGE	Num	8	Hemorrhage, Lesion 5
161	SH16_LESION6_HEMORRHAGE	Num	8	Hemorrhage, Lesion 6
162	SH16_CORTICAL_ATROPHY	Num	8	Cortical atrophy?
163	SH16_HYDROCEPHALUS	Num	8	Hydrocephalus?
164	SH16_PERIVENT_HYPODENSITY	Num	8	Periventricular hypodensity (by CT)?
165	SH16_BRIGHT_PLAQUES	Num	8	Bright plaques (T 2 image MRI)
166	SH16_SULCUS_WIDTH_LT	Num	8	Sulcus/fissure enlargement, Average sulcus width, left side (mm)
167	SH16_SULCUS_WIDTH_RT	Num	8	Sulcus/fissure enlargement, Average sulcus width, right side (mm)
168	SH16_ANTERIOR_END_SYLVIAN_LT	Num	8	Sulcus/fissure enlargement, Anterior end of sylvian fissure, left side (mm)
169	SH16_ANTERIOR_END_SYLVIAN_RT	Num	8	Sulcus/fissure enlargement, Anterior end of sylvian fissure, right side (mm)
170	SH16_INTERHEMISPHERE_SPACE	Num	8	Sulcus/fissure enlargement, Interhemisphere space anteriorly at the level of the body of the lateral ventricles (mm)
171	SH16_3RD_VENTRICLE	Num	8	Ventricular measures and ratios, 3rd ventricle (mm)
172	SH16_TEMPORAL_HORNS_WIDTH_LT	Num	8	Ventricular measures and ratios, Width of temporal horns, left (mm)
173	SH16_TEMPORAL_HORNS_WIDTH_RT	Num	8	Ventricular measures and ratios, Width of temporal horns, right (mm)
174	SH16_LATERAL_FRONTAL_HORN	Num	8	Ventricular measures and ratios, Lateral frontal horn distance, maximum (mm)
175	SH16_SKULL_DIAMETER_HORN	Num	8	Ventricular measures and ratios, Skull diameter at location of lateral frontal horn maximum distance (mm)
176	SH16_SKULL_FRONTAL_HORN_RATIO	Num	8	Ventricular measures and ratios, Ratio of lateral frontal horn distance to skull diameter
177	SH16_TRANSVERSE_DIA_LAT_VENTS	Num	8	Cella media ratio, Transverse diameter of the body of lateral ventricles (mm)
178	SH16_SKULL_DIAMETER_LAT_VENTS	Num	8	Cella media ratio, Skull diameter at location of transverse diameter measurement
179	SH16_SKULL_LAT_VENTS_RATIO	Num	8	Cella media ratio, Transverse diameter to skull diameter ratio
180	SH16_LT_SYLVIAN_3RD_VENT_DIST	Num	8	3rd ventricle-Sylvian fissure/skull ratio, Distance from left sylvian fissure to 3rd ventricle (mm)
181	SH16_RT_SYLVIAN_3RD_VENT_DIST	Num	8	3rd ventricle-Sylvian fissure/skull ratio, Distance from right sylvian fissure to 3rd ventricle (mm)
182	SH16_SKULL_DIAMETER_SYLVIAN	Num	8	3rd ventricle-Sylvian fissure/skull ratio, Diameter of skull at same location (mm)
183	SH16_LT_RT_SYLVIAN_RATIO	Num	8	3rd ventricle-Sylvian fissure/skull ratio ((Dist. from left + Dist. from right)/Skull diameter)

Num	Variable	Type	Len	Label
184	SH16_COMMENTS	Num	8	Comments or additional descriptions of other abnormalities
185	SH16_CODING_RESULT	Num	8	Coding result
186	SH16_ADJUDICATION_RESULT	Num	8	Result of adjudication
187	SH16_RECORD_TYPE	Num	8	SH16 Record Type
188	SH16_DATE_RECEIVED	Num	8	SH16 Date Tape Received from Metpath Lab
189	SH16_UPDATE_NUMBER	Num	8	SH16 Update Number
190	SH16_DATE_LAST_PROCESSED	Num	8	SH16 Date Last Processed
191	SH16_PAPER_COPY	Num	8	SH16 Paper Copy
192	SH16_CROSS_FORM_EDITS	Num	8	SH16 Cross Form Edits

Data Set Name: sh17.sas7bdat

Num	Variable	Type	Len	Label
1	SH17_RECORD_LENGTH	Num	8	SH17 Record Length
2	SH17_KEYPUNCH_CODE	Num	8	SH17 Keypuncher Code
3	SH17_BATCHDATE	Num	8	SH17 Batch Date
4	SH17_VERIFYER_CODE	Num	8	SH17 Verifyer Code
5	SH17_DATE_LAST_MODIFIED	Num	8	SH17 Date record was last modified
6	SH17_TIME_LAST_MODIFIED	Num	8	SH17 Time record was last modified
7	SH17_EDIT_STATUS_CODE	Num	8	SH17 Edit status code
8	SHEPID	Num	8	SHEP ID
9	FORMNUM	Num	8	Form number
10	SH17_VERSNNUM	Num	8	SH17 Version number
11	SH17_KEYDATE	Num	8	Date data was received (in days from randomization)
12	SH17_SEQUENCE	Num	8	SH17 Sequence number
13	ACROSTIC	Num	8	Acrostic
14	SH17_BASE_ECG_DATE	Num	8	Date of baseline ECG scan (in days from randomization)
15	SH17_BASE_ECG_QS1	Num	8	Baseline QS1
16	SH17_BASE_ECG_QS2	Num	8	Baseline QS2
17	SH17_BASE_ECG_QS3	Num	8	Baseline QS3
18	SH17_2YR_ECG_DATE	Num	8	Date of two-year ECG scan (in days from randomization)
19	SH17_2YR_ECG_QS1	Num	8	Two-year QS1
20	SH17_2YR_ECG_QS2	Num	8	Two-year QS2
21	SH17_2YR_ECG_QS3	Num	8	Two-year QS3
22	SH17_FINAL_ECG_DATE	Num	8	Date of final annual ECG scan (in days from randomization)
23	SH17_FINAL_ECG_QS1	Num	8	Final annual QS1
24	SH17_FINAL_ECG_QS2	Num	8	Final annual QS2
25	SH17_FINAL_ECG_QS3	Num	8	Final annual QS3
26	SH17_BASE_TO_2YR	Num	8	Myocardial infarction between baseline and two-year ECG
27	SH17_BASE_TO_2YR_ED_RULE	Num	8	Evolving diagnostic between baseline and two-year ECG
28	SH17_BASE_TO_FINAL	Num	8	Myocardial infarction between baseline and final annual ECG
29	SH17_BASE_TO_FINAL_ED_RULE	Num	8	Evolving diagnostic between baseline and final annual ECG
30	SH17_2YR_TO_FINAL	Num	8	Myocardial infarction between two-year and final annual ECG
31	SH17_2YR_TO_FINAL_ED_RULE	Num	8	Evolving diagnostic between two-year and final annual ECG

Data Set Name: sh20.sas7bdat

Num	Variable	Type	Len	Label
1	SH20_RECORD_LENGTH	Num	8	SH20 Record Length
2	SH20_KEYPUNCH_CODE	Num	8	SH20 Keypuncher Code
3	SH20_BATCHDATE	Num	8	SH20 Batch Date
4	SH20_VERIFYER_CODE	Num	8	SH20 Verifyer Code
5	SH20_DATE_LAST_MODIFIED	Num	8	SH20 Date record was last modified
6	SH20_TIME_LAST_MODIFIED	Num	8	SH20 Time record was last modified
7	SH20_EDIT_STATUS_CODE	Num	8	SH20 Edit status code
8	SHEPID	Num	8	SHEP ID
9	FORMNUM	Num	8	Form number
10	SH20_VERSNNUM	Num	8	SH20 Version number
11	SH20_MORBID_EVENT_DATE	Num	8	Date of onset of morbid event (in days from randomization)
12	SH20_SEQUENCE	Num	8	SH20 sequence number
13	ACROSTIC	Num	8	Acrostic
14	SH20_DATE_COMPLETED	Num	8	Date SH20 form completed (in days from randomization)
15	SH20_EVENT_STROKE	Num	8	Morbid event was a Stroke
16	SH20_EVENT_AMI	Num	8	Morbid event was Acute Myocardial Infarction
17	SH20_EVENT_LVF	Num	8	Morbid event was Left Ventricular Failure
18	SH20_EVENT_TIA	Num	8	Morbid event was Transient Ischemic Attack
19	SH20_HOSPITALIZED	Num	8	Was the participant hospitalized?
20	SH20_NON_SHEP_DOCTOR	Num	8	Was the participant seen by a non SHEP doctor?
21	SH20_COMPLETER_CODE	Num	8	Code of the person that completed this form
22	SH20_RECORD_TYPE	Num	8	SH20 Record Type
23	SH20_DATE_RECEIVED	Num	8	SH20 Date Tape Received from Metpath Lab
24	SH20_UPDATE_NUMBER	Num	8	SH20 Update Number
25	SH20_DATE_LAST_PROCESSED	Num	8	SH20 Date Last Processed
26	SH20_PAPER_COPY	Num	8	SH20 Paper Copy
27	SH20_CROSS_FORM_EDITS	Num	8	SH20 Cross Form Edits
28	SH20_EVENT_OTHER	Num	8	Morbid event was Other Hospitalization
29	SH20_EVENT_NURSING_HOME	Num	8	Morbid event was Admission to intermediate or skilled nursing home

Data Set Name: sh21.sas7bdat

Num	Variable	Type	Len	Label
1	SH21_RECORD_LENGTH	Num	8	SH21 Record Length
2	SH21_KEYPUNCH_CODE	Num	8	SH21 Keypuncher Code
3	SH21_BATCHDATE	Num	8	SH21 Batch Date
4	SH21_VERIFYER_CODE	Num	8	SH21 Verifyer Code
5	SH21_DATE_LAST_MODIFIED	Num	8	SH21 Date record was last modified
6	SH21_TIME_LAST_MODIFIED	Num	8	SH21 Time record was last modified
7	SH21_EDIT_STATUS_CODE	Num	8	SH21 Edit status code
8	SHEPID	Num	8	SHEP ID
9	FORMNUM	Num	8	Form number
10	SH21_VERSNNUM	Num	8	SH21 Version number
11	SH21_MORBID_EVENT_DATE	Num	8	Date of onset of morbid event (in days from randomization)
12	SH21_SEQUENCE	Num	8	SH21 sequence number
13	ACROSTIC	Num	8	Acrostic
14	SH21_DATE_COMPLETED	Num	8	Date SH20 form completed (in days from randomization)
15	SH21_HOSPITALIZED	Num	8	Was participant hospitalized or admitted to a skilled or intermediate care nursing home?
16	SH21_ADMISSION_DATE	Num	8	Date of admission (if hospitalized) (in days from randomization)
17	SH21_DISCHARGE_DATE	Num	8	Date of discharge (if applicable) (in days from randomization)
18	SH21_HOSP_DISCHARGE_SUMM	Num	8	Hospital discharge summary enclosed?
19	SH21_HOSP_DISCHARGE_DIAG	Num	8	Hospital discharge diagnosis enclosed?
20	SH21_HOSP_ECG_RESULTS	Num	8	Hospital ECG results enclosed?
21	SH21_HOSP_LAB_RESULTS	Num	8	Hospital laboratory results enclosed?
22	SH21_NON_SHEP_CT_SCAN	Num	8	Non-SHEP CT scan results enclosed?
23	SH21_HOSP_XRAYS	Num	8	Hospital X-ray or angiography results enclosed?
24	SH21_HOSP_SURGICAL_RESULTS	Num	8	Hospital surgical pathology results enclosed?
25	SH21_SH27	Num	8	SHEP Neurologic Exam for Stroke (SH27) enclosed?
26	SH21_SHEP_CT_SCAN	Num	8	SHEP CT Scan results enclosed?
27	SH21_SH28	Num	8	SHEP Neurologic Exam for TIA (SH28) enclosed?
28	SH21_EMERGENCY_RECORDS	Num	8	Emergency room records enclosed?
29	SH21_AMBULANCE_RECORDS	Num	8	Ambulance records enclosed?
30	SH21_NURSINGHOME_RECORDS	Num	8	Nursing home records enclosed?
31	SH21_USUALCARE_RECORDS	Num	8	Records from usual source of care enclosed?
32	SH21_INTERVIEWS_PARTICIPANT	Num	8	Interview (SH24) with participant enclosed?
33	SH21_INTERVIEWS_PHYSICIAN	Num	8	Interview (SH24) with participant's physician enclosed?
34	SH21_INTERVIEWS_NEXTOFKIN	Num	8	Interview (SH24) with participant's next of kin enclosed?
35	SH21_COMPLETER_CODE	Num	8	Code of person completing SH21 form
36	SH21_RECORD_TYPE	Num	8	SH21 Record Type

Num	Variable	Type	Len	Label
37	SH21_DATE_RECEIVED	Num	8	SH21 Date Tape Received from Metpath Lab
38	SH21_UPDATE_NUMBER	Num	8	SH21 Update Number
39	SH21_DATE_LAST_PROCESSED	Num	8	SH21 Date Last Processed
40	SH21_PAPER_COPY	Num	8	SH21 Paper Copy
41	SH21_CROSS_FORM_EDITS	Num	8	SH21 Cross Form Edits

Data Set Name: sh22.sas7bdat

Num	Variable	Type	Len	Label
1	SH22_RECORD_LENGTH	Num	8	SH22 Record Length
2	SH22_KEYPUNCH_CODE	Num	8	SH22 Keypuncher Code
3	SH22_BATCHDATE	Num	8	SH22 Batch Date
4	SH22_VERIFYER_CODE	Num	8	SH22 Verifyer Code
5	SH22_DATE_LAST_MODIFIED	Num	8	SH22 Date record was last modified
6	SH22_TIME_LAST_MODIFIED	Num	8	SH22 Time record was last modified
7	SH22_EDIT_STATUS_CODE	Num	8	SH22 Edit status code
8	SHEPID	Num	8	SHEP ID
9	FORMNUM	Num	8	Form number
10	SH22_VERSNNUM	Num	8	SH22 Version number
11	SH22_DEATH_DATE	Num	8	Death Date (in days from randomization)
12	SH22_SEQUENCE	Num	8	SH22 sequence number
13	ACROSTIC	Num	8	Acrostic
14	SH22_DATE_COMPLETED	Num	8	Date SH22 form completed (in days from randomization)
15	SH22_DATE_LEARNED	Num	8	Date SHEP staff learned of death (in days from randomization)
16	SH22_DEATH_STATE	Num	8	State of Death
17	SH22_DEATH_ZIP	Num	8	Zip code of death
18	SH22_TAKEN_HOSPITAL	Num	8	After onset of the fatal event, was participant taken to hospital?
19	SH22_CLINICIAN_SEEN	Num	8	After onset of the fatal event, was participant seen by a clinician?
20	SH22_COMPLETER_CODE	Num	8	Code of person completing SH22 form
21	SH22_RECORD_TYPE	Num	8	SH22 Record Type
22	SH22_DATE_RECEIVED	Num	8	SH22 Date Tape Received from Metpath Lab
23	SH22_UPDATE_NUMBER	Num	8	SH22 Update Number
24	SH22_DATE_LAST_PROCESSED	Num	8	SH22 Date Last Processed
25	SH22_PAPER_COPY	Num	8	SH22 Paper Copy
26	SH22_CROSS_FORM_EDITS	Num	8	SH22 Cross Form Edits

Data Set Name: sh23.sas7bdat

Num	Variable	Type	Len	Label
1	SH23_RECORD_LENGTH	Num	8	SH23 Record Length
2	SH23_KEYPUNCH_CODE	Num	8	SH23 Keypuncher Code
3	SH23_BATCHDATE	Num	8	SH23 Batch Date
4	SH23_VERIFYER_CODE	Num	8	SH23 Verifyer Code
5	SH23_DATE_LAST_MODIFIED	Num	8	SH23 Date record was last modified
6	SH23_TIME_LAST_MODIFIED	Num	8	SH23 Time record was last modified
7	SH23_EDIT_STATUS_CODE	Num	8	SH23 Edit status code
8	SHEPID	Num	8	SHEP ID
9	FORMNUM	Num	8	Form number
10	SH23_VERSNNUM	Num	8	SH23 Version number
11	SH23_DEATH_DATE	Num	8	Death Date (in days from randomization)
12	SH23_SEQUENCE	Num	8	SH23 sequence number
13	ACROSTIC	Num	8	Acrostic
14	SH23_DATE_COMPLETED	Num	8	Date SH23 form completed (in days from randomization)
15	SH23_DEATH_TIME_HR	Num	8	Time of death (hour)
16	SH23_DEATH_TIME_MIN	Num	8	Time of death (minutes
17	SH23_DEATH_TIME_PD	Num	8	Time of death (am/pm)
18	SH23_DEATH_CERTIFICATE	Num	8	Is a copy of death certificate enclosed?
19	SH23_AUTOPSY	Num	8	Was an autopsy performed?
20	SH23_AUTOPSY_RESULTS	Num	8	Copy of autopsy report enclosed?
21	SH23_HOSP_DISCHARGE_SUMM	Num	8	Hospital discharge summary enclosed?
22	SH23_HOSP_DISCHARGE_DIAG	Num	8	Hospital discharge diagnosis enclosed?
23	SH23_HOSP_ECG_RESULTS	Num	8	Hospital ECG results enclosed?
24	SH23_HOSP_LAB_RESULTS	Num	8	Hospital laboratory results enclosed?
25	SH23_NON_SHEP_CT_SCAN	Num	8	Non-SHEP CT scan results enclosed?
26	SH23_HOSP_XRAYS	Num	8	Hospital X-ray or angiography results enclosed?
27	SH23_HOSP_SURGICAL_RESULTS	Num	8	Hospital surgical pathology results enclosed?
28	SH23_SH27	Num	8	SHEP Neurologic Exam for Stroke (SH27) enclosed?
29	SH23_SHEP_CT_SCAN	Num	8	SHEP CT Scan results enclosed?
30	SH23_SH28	Num	8	SHEP Neurologic Exam for TIA (SH28) enclosed?
31	SH23_EMERGENCY_RECORDS	Num	8	Emergency room records enclosed?
32	SH23_AMBULANCE_RECORDS	Num	8	Ambulance records enclosed?
33	SH23_NURSINGHOME_RECORDS	Num	8	Nursing home records enclosed?
34	SH23_USUALCARE_RECORDS	Num	8	Records from usual source of care enclosed?
35	SH23_INTERVIEWS_WITNESS	Num	8	Interview (SH26) with witness to death enclosed?
36	SH23_INTERVIEWS_NEXTOFKIN	Num	8	Interview (SH26) with next-of-kin enclosed?

Num	Variable	Type	Len	Label
37	SH23_INTERVIEWS_CLINICIAN	Num	8	Interview (SH26) with participant's clinician enclosed?
38	SH23_COMMENTS	Num	8	SH23 Comments
39	SH23_COMPLETER_CODE	Num	8	Code of person completing SH23 form
40	SH23_RECORD_TYPE	Num	8	SH23 Record Type
41	SH23_DATE_RECEIVED	Num	8	SH23 Date Tape Received from Metpath Lab
42	SH23_UPDATE_NUMBER	Num	8	SH23 Update Number
43	SH23_DATE_LAST_PROCESSED	Num	8	SH23 Date Last Processed
44	SH23_PAPER_COPY	Num	8	SH23 Paper Copy
45	SH23_CROSS_FORM_EDITS	Num	8	SH23 Cross Form Edits

Data Set Name: sh27.sas7bdat

Num	Variable	Type	Len	Label
1	SH27_RECORD_LENGTH	Num	8	SH27 Record Length
2	SH27_KEYPUNCH_CODE	Num	8	SH27 Keypuncher Code
3	SH27_BATCHDATE	Num	8	SH27 Batch Date
4	SH27_VERIFYER_CODE	Num	8	SH27 Verifyer Code
5	SH27_DATE_LAST_MODIFIED	Num	8	SH27 Date record was last modified
6	SH27_TIME_LAST_MODIFIED	Num	8	SH27 Time record was last modified
7	SH27_EDIT_STATUS_CODE	Num	8	SH27 Edit status code
8	SHEPID	Num	8	SHEP ID
9	FORMNUM	Num	8	Form number
10	SH27_VERSNNUM	Num	8	SH27 Version number
11	SH27_EVAL_DATE	Num	8	Date of evaluation (in days from randomization)
12	SH27_SEQUENCE	Num	8	SH27 Sequence number
13	ACROSTIC	Num	8	Acrostic
14	SH27_HANDEDNESS	Num	8	Handedness
15	SH27_MYOCARDIAL_INFARC	Num	8	Previous or simultaneous myocardial infarction
16	SH27_MYOCARDIAL_INFARC_DATE	Num	8	Date of most recent myocardial infarction (in days from randomization)
17	SH27_VALVULAR_HEART_DISEASE	Num	8	Evidence of valvular heart disease?
18	SH27_ATRIAL_FIBRILLATION	Num	8	Has patient been diagnosed or treated for Atrial fibrillation?
19	SH27_OTHER_ARRHYTHMIA	Num	8	Has patient been diagnosed or treated for Other arrhythmias?
20	SH27_ANGINA	Num	8	Has patient been diagnosed or treated for Angina?
21	SH27_CONGESTIVE_FAILURE	Num	8	Has patient been diagnosed or treated for Congestive failure?
22	SH27_CLAUDICATION	Num	8	Has patient been diagnosed or treated for Claudication in lower limbs?
23	SH27_MURAL_THROMBUS	Num	8	Echocardiogram or cardiac CT shows mural thrombus or source of emboli
24	SH27_SYSTEMIC_EMBOLI	Num	8	Has patient been diagnosed or treated for Systemic emboli?
25	SH27_OTHER_EMBOLI	Num	8	Has patient been diagnosed or treated for other source of emboli?
26	SH27_DIABETES	Num	8	Has patient ever been diagnosed or treated for diabetes?
27	SH27_CANCER	Num	8	Has patient ever been diagnosed or treated for cancer?
28	SH27_Q11	Num	8	Is there evidence for intracranial infectious disease, brain tumor, trauma or metabolic cause for neurologic symptoms?
29	SH27_HISTORY_MIGRANES	Num	8	Evidence of a history of migraines?
30	SH27_HISTORY_SEIZURES	Num	8	Evidence of a history of seizures?
31	SH27_NEURO_SYMPTOM_DATE	Num	8	Date of onset of neurologic symptoms? (in days from randomization)
32	SH27_NEURO_SYMPTOM_TIME_HR	Num	8	Time (hour) of onset of neurologic symptoms?
33	SH27_NEURO_SYMPTOM_TIME_PD	Num	8	Time period (am/pm) of onset of neurologic symptoms
34	SH27_TIA_EVER	Num	8	Has patient ever had a TIA?

Num	Variable	Type	Len	Label
35	SH27_TIA_HOW_LONG_AGO	Num	8	How long ago was last TIA?
36	SH27_TIA_NUM_ATTACKS	Num	8	Number of TIA attacks?
37	SH27_TIA_VASCULAR_TERR	Num	8	Vascular territory of past TIAs?
38	SH27_TIA_SAME_TERR_SYMPTOMS	Num	8	Prior TIA in same territory as present neurologic symptoms?
39	SH27_STROKE_EVER	Num	8	Has patient ever had a stroke before this event?
40	SH27_STROKE_HOW_LONG_AGO	Num	8	How long ago was last stroke?
41	SH27_STROKE_NUM	Num	8	Number of strokes?
42	SH27_STROKE_TYPE_ISCHEMIC	Num	8	Type of stroke, Ischemic?
43	SH27_STROKE_TYPE_ICH	Num	8	Type of stroke, Intracerebral hemorrhage (ICH)?
44	SH27_STROKE_TYPE_SAH	Num	8	Type of stroke, Subarachnoid hemorrhage (SAH)?
45	SH27_STROKE_TYPE_UNKNOWN	Num	8	Type of stroke, Unknown?
46	SH27_STROKE_VASCULAR_TERR	Num	8	Vascular territory of Stroke?
47	SH27_DEFICIT_PRESENT_AWAKEN	Num	8	Was deficit present on awakening?
48	SH27_ONSET_SEVERE_HEADACHE	Num	8	At time of onset, was there a severe headache?
49	SH27_ONSET_VOMITTING	Num	8	At time of onset, was there vomitting?
50	SH27_ONSET_SEIZURES	Num	8	At time of onset, was there seizures?
51	SH27_ONSET_FOCAL_DEFICIT	Num	8	At time of onset, was there a focal deficit?
52	SH27_ONSET_DEC_CONSCIOUS	Num	8	At time of onset, was there decreased consciousness?
53	SH27_ONSET_COMA	Num	8	At time of onset, was there a coma?
54	SH27_SUDDEN_ONSET_MAXDEF	Num	8	Was there a sudden onset with maximum deficit within 10 minutes?
55	SH27_WORSENING_STEPLIKE	Num	8	Was the worsening steplike?
56	SH27_WORSENING_GRADUAL	Num	8	Was the worsening gradual?
57	SH27_MAXDEF_WITHIN_1WK	Num	8	Deficit reached maximum within one week of onset?
58	SH27_IMPROVE_WITHIN_24HRS	Num	8	Improvement occured (even temporarily) within the first 24 hours after onset?
59	SH27_HYPOTENSION_PRECIP	Num	8	Was documented hypotension a possible precipitator of this event?
60	SH27_ANTICOAGULANTS	Num	8	Were anticoagulants (heparin, coumadin) being used at time of event?
61	SH27_ANTIPLATELET	Num	8	Were antiplatelet drugs being used at time of event?
62	SH27_EXAM_NOT_DONE	Num	8	Examination not done
63	SH27_EXAM_VERBAL_RESPONSE	Num	8	Examination, Verbal response
64	SH27_EXAM_EYE_OPENING	Num	8	Examination, Eye opening
65	SH27_EXAM_MOTOR_RESPONSE	Num	8	Examination, Motor response
66	SH27_EXAM_ALERTNESS	Num	8	Examination, Degree of alertness
67	SH27_EXAM_REMAINDER	Num	8	Examination, Remainder of neurologic exam
68	SH27_EXAM_REMAINDER_RELATED	Num	8	Examination, if remainder of neurologic exam abnormal, is it related to current event?
69	SH27_EXAM_WEAKNESS	Num	8	Examination, Weakness
70	SH27_EXAM_WEAKNESS_RELATED	Num	8	Examination, is weakness related to current event?
71	SH27_EXAM_TONGUE_WEAK_LT	Num	8	Examination, Weakness scale, Left tongue

Num	Variable	Type	Len	Label
72	SH27_EXAM_TONGUE_WEAK_LT_NR	Num	8	Examination, Left tongue not related to current event
73	SH27_EXAM_TONGUE_WEAK_RT	Num	8	Examination, Weakness, scale, Right tongue
74	SH27_EXAM_TONGUE_WEAK_RT_NR	Num	8	Examination, Right tongue not related to current event
75	SH27_EXAM_FACE_WEAK_LT	Num	8	Examination, Weakness scale, Left face
76	SH27_EXAM_FACE_WEAK_LT_NR	Num	8	Examination, Left face not related to current event
77	SH27_EXAM_FACE_WEAK_RT	Num	8	Examination, Weakness, scale, Right face
78	SH27_EXAM_FACE_WEAK_RT_NR	Num	8	Examination, Right face not related to current event
79	SH27_EXAM_SHOULDER_WEAK_LT	Num	8	Examination, Weakness scale, Left shoulder
80	SH27_EXAM_SHOULDER_WEAK_LT_NR	Num	8	Examination, Left shoulder not related to current event
81	SH27_EXAM_SHOULDER_WEAK_RT	Num	8	Examination, Weakness, scale, Right shoulder
82	SH27_EXAM_SHOULDER_WEAK_RT_NR	Num	8	Examination, Right shoulder not related to current event
83	SH27_EXAM_HAND_WEAK_LT	Num	8	Examination, Weakness scale, Left hand
84	SH27_EXAM_HAND_WEAK_LT_NR	Num	8	Examination, Left hand not related to current event
85	SH27_EXAM_HAND_WEAK_RT	Num	8	Examination, Weakness, scale, Right hand
86	SH27_EXAM_HAND_WEAK_RT_NR	Num	8	Examination, Right hand not related to current event
87	SH27_EXAM_HIP_WEAK_LT	Num	8	Examination, Weakness scale, Left hip
88	SH27_EXAM_HIP_WEAK_LT_NR	Num	8	Examination, Left hip not related to current event
89	SH27_EXAM_HIP_WEAK_RT	Num	8	Examination, Weakness, scale, Right hip
90	SH27_EXAM_HIP_WEAK_RT_NR	Num	8	Examination, Right hip not related to current event
91	SH27_EXAM_FOOT_WEAK_LT	Num	8	Examination, Weakness, scale, Left foot
92	SH27_EXAM_FOOT_WEAK_LT_NR	Num	8	Examination, Left foot not related to current event
93	SH27_EXAM_FOOT_WEAK_RT	Num	8	Examination, Weakness, scale, Right foot
94	SH27_EXAM_FOOT_WEAK_RT_NR	Num	8	Examination, Right foot not related to current event
95	SH27_EXAM_ATAXIA	Num	8	Examination, Ataxia
96	SH27_EXAM_ATAXIA_RELATED	Num	8	Examination, ataxia related to current event?
97	SH27_EXTRAOCULAR_MOVEMENTS	Num	8	Examination, Extraocular movements?
98	SH27_EXTRA_HOR_GAZE_PALSY	Num	8	Extraocular movements, Horizontal gaze palsy
99	SH27_EXTRA_HOR_GAZE_PALSY_NR	Num	8	Extraocular movements, Horizontal gaze palsy not related to current event
100	SH27_EXTRA_VERT_GAZE_PALSY	Num	8	Extraocular movements, Vertical gaze palsy
101	SH27_EXTRA_VERT_GAZE_PALSY_NR	Num	8	Extraocular movements, Vertical gaze palsy not related to current event
102	SH27_EXTRA_OPTHALMOPLEGIA	Num	8	Extraocular movements, Internuc opthalmoplegia
103	SH27_EXTRA_OPTHALMOPLEGIA_NR	Num	8	Extraocular movements, Internuc opthalmoplegia not related to current event
104	SH27_EXTRA_CN_III_PALSY	Num	8	Extraocular movements, CN III palsy
105	SH27_EXTRA_CN_III_PALSY_NR	Num	8	Extraocular movements, CN III palsy not related to current event
106	SH27_EXTRA_CN_VI_PALSY	Num	8	Extraocular movements, CN VI palsy
107	SH27_EXTRA_CN_VI_PALSY_NR	Num	8	Extraocular movements, CN VI palsy not related to current event
108	SH27_EXTRA_SKEW_DEVIATION	Num	8	Extraocular movements, Skew deviation

Num	Variable	Type	Len	Label
109	SH27_EXTRA_SKEW_DEVIATION_NR	Num	8	Extraocular movements, Skew deviation not related to current event
110	SH27_EXTRA_VERT_NYSTAGMUS	Num	8	Extraocular movements, Vertical nystagmus
111	SH27_EXTRA_VERT_NYSTAGMUS_NR	Num	8	Extraocular movements, Vertical nystagmus not related to current event
112	SH27_EXTRA_HOR_NYSTAGMUS	Num	8	Extraocular movements, Horizontal nystagmus
113	SH27_EXTRA_HOR_NYSTAGMUS_NR	Num	8	Extraocular movements, Horizontal nystagmus not related to current event
114	SH27_EXTRA_FIXED_PUPILS	Num	8	Extraocular movements, Fixed pupils
115	SH27_EXTRA_FIXED_PUPILS_NR	Num	8	Extraocular movements, Fixed pupils not related to current event
116	SH27_EXTRA_SUBHYALOID_HEM	Num	8	Extraocular movements, Subhyaloid hemorrhage
117	SH27_EXTRA_SUBHYALOID_HEM_NR	Num	8	Extraocular movements, Subhyaloid hemorrhage not related to current event
118	SH27_SENSORY_DEFICITS	Num	8	Examination, Sensory deficits (pin test)
119	SH27_SENSORY_FACE_LT	Num	8	Sensory deficit scale, Left face
120	SH27_SENSORY_FACE_LT_NR	Num	8	Left face deficit not related to current event
121	SH27_SENSORY_FACE_RT	Num	8	Sensory deficit scale, Right face
122	SH27_SENSORY_FACE_RT_NR	Num	8	Right face deficit not related to current event
123	SH27_SENSORY_SHOULDER_LT	Num	8	Sensory deficit scale, Left shoulder
124	SH27_SENSORY_SHOULDER_LT_NR	Num	8	Left shoulder deficit not related to current event
125	SH27_SENSORY_SHOULDER_RT	Num	8	Sensory deficit scale, Right shoulder
126	SH27_SENSORY_SHOULDER_RT_NR	Num	8	Right shoulder deficit not related to current event
127	SH27_SENSORY_HAND_LT	Num	8	Sensory deficit scale, Left hand
128	SH27_SENSORY_HAND_LT_NR	Num	8	Left hand deficit not related to current event
129	SH27_SENSORY_HAND_RT	Num	8	Sensory deficit scale, Right hand
130	SH27_SENSORY_HAND_RT_NR	Num	8	Right hand deficit not related to current event
131	SH27_SENSORY_HIP_LT	Num	8	Sensory deficit scale, Left hip
132	SH27_SENSORY_HIP_LT_NR	Num	8	Left hip deficit not related to current event
133	SH27_SENSORY_HIP_RT	Num	8	Sensory deficit scale, Right hip
134	SH27_SENSORY_HIP_RT_NR	Num	8	Right hip deficit not related to current event
135	SH27_SENSORY_FOOT_LT	Num	8	Sensory deficit scale, Left foot
136	SH27_SENSORY_FOOT_LT_NR	Num	8	Left foot deficit not related to current event
137	SH27_SENSORY_FOOT_RT	Num	8	Sensory deficit scale, Right foot
138	SH27_SENSORY_FOOT_RT_NR	Num	8	Right foot deficit not related to current event
139	SH27_SENSORY_TRUNK_LT	Num	8	Sensory deficit scale, Left trunk
140	SH27_SENSORY_TRUNK_LT_NR	Num	8	Left trunk deficit not related to current event
141	SH27_SENSORY_TRUNK_RT	Num	8	Sensory deficit scale, Right trunk
142	SH27_SENSORY_TRUNK_RT_NR	Num	8	Right trunk deficit not related to current event
143	SH27_VISUAL_FIELDS	Num	8	Examination, Visual fields
144	SH27_VISUAL_MONOCULAR	Num	8	Visual fields, Monocular
145	SH27_VISUAL_MONOCULAR_NR	Num	8	Monocular is not related to current event

Num	Variable	Type	Len	Label
146	SH27_VISUAL_QUADRANTANOPIA	Num	8	Visual fields, Quadrantanopia
147	SH27_VISUAL_QUADRANTANOPIA_NR	Num	8	Quadrantanopia is not related to current event
148	SH27_VISUAL_HEMIANOPIA	Num	8	Visual fields, Hemianopia
149	SH27_VISUAL_HEMIANOPIA_NR	Num	8	Hemianopia is not related to current event
150	SH27_VISUAL_HEMINEGLECT	Num	8	Visual fields, Hemineglect
151	SH27_VISUAL_HEMINEGLECT_NR	Num	8	Hemineglect is not related to current event
152	SH27_LANGUAGE	Num	8	Examination, Language
153	SH27_LANGUAGE_RELATED	Num	8	Language problems related to current event?
154	SH27_DYSARTHRIA	Num	8	Examination, Dysarthria?
155	SH27_DYSARTHRIA_RELATED	Num	8	Examination, Dysarthria related to current event?
156	SH27_NUCHAL_RIGIDITY	Num	8	Examination, Nuchal rigidity?
157	SH27_NUCHAL_RIGIDITY_RELATED	Num	8	Examination, Nuchal rigidity related to current event?
158	SH27_CERVICAL_BRUIT	Num	8	Examination, Cervical bruit
159	SH27_CERVICAL_LT_CAROTID	Num	8	Examination, Left carotid
160	SH27_CERVICAL_LT_CAROTID_NR	Num	8	Examination, Left carotid not related to current event
161	SH27_CERVICAL_RT_CAROTID	Num	8	Examination, Right carotid
162	SH27_CERVICAL_RT_CAROTID_NR	Num	8	Examination, Right carotid not related to current event
163	SH27_CERVICAL_LT_SUBCLAVIAN	Num	8	Examination, Left subclavian
164	SH27_CERVICAL_LT_SUBCLAVIAN_NR	Num	8	Examination, Left subclavian not related to current event
165	SH27_CERVICAL_RT_SUBCLAVIAN	Num	8	Examination, Right subclavian
166	SH27_CERVICAL_RT_SUBCLAVIAN_NR	Num	8	Examination, Right subclavian not related to current event
167	SH27_PERIPHERAL_PULSE_ANKLE	Num	8	Examination, Peripheral pulses in the foot and ankle
168	SH27_OTHER_HEMISPHERAL_SIGNS	Num	8	Examination, Other hemispheral signs (apraxia, neglect, etc.)
169	SH27_OTHER_HEMISPHERAL_RELATED	Num	8	Examination, Other hemispheral signs related to current event?
170	SH27_DIAG_PRIM_DIAGNOSIS	Num	8	Diagnosis, Primary diagnosis
171	SH27_DIAG_PRIM_CERE_SITECODE	Num	8	Diagnosis, Primary cerebral site (2-digit code)
172	SH27_DIAG_OTHER_CERE_SITECODE1	Num	8	Diagnosis, Other cerebral site 1 (2-digit code)
173	SH27_DIAG_OTHER_CERE_SITECODE2	Num	8	Diagnosis, Other cerebral site 2 (2-digit code)
174	SH27_DIAG_OTHER_CERE_SITECODE3	Num	8	Diagnosis, Other cerebral site 3 (2-digit code)
175	SH27_DIAG_OTHER_CERE_SITECODE4	Num	8	Diagnosis, Other cerebral site 4 (2-digit code)
176	SH27_DIAG_GT5_CEREBRAL_SITES	Num	8	Diagnosis, Are more than 5 cerebral sites listed?
177	SH27_DIAG_PRIM_VASC_SITECODE	Num	8	Diagnosis, Primary Vascular site (2-digit code)
178	SH27_DIAG_OTHER_VASC_SITECODE1	Num	8	Diagnosis, Other vascular site 1 (2-digit code)
179	SH27_DIAG_OTHER_VASC_SITECODE2	Num	8	Diagnosis, Other vascular site 2 (2-digit code)
180	SH27_DIAG_OTHER_VASC_SITECODE3	Num	8	Diagnosis, Other vascular site 3 (2-digit code)
181	SH27_DIAG_OTHER_VASC_SITECODE4	Num	8	Diagnosis, Other vascular site 4 (2-digit code)
182	SH27_DIAG_GT5_VASCULAR_SITES	Num	8	Diagnosis, Are more than 5 vascular sites listed?
183	SH27_FINAL_DEFICIT_GE24HR	Num	8	Final Assessment, Is there evidence of a deficit lasting 24+ hours or until death intervenes?

Num	Variable	Type	Len	Label
184	SH27_FINAL_RAPID_ONSET	Num	8	Final Assessment, Is there evidence of rapid onset of deficit?
185	SH27_FINAL_LOSS_CONSCIOUSNESS	Num	8	Final Assessment, Is there evidence of loss of consciousness?
186	SH27_FINAL_Q50	Num	8	Final Assessment, Is there evidence of focal brain deficit?
187	SH27_FINAL_Q50A	Num	8	Final Assessment, Is there evidence that focal brain deficit lacunar in type?
188	SH27_FINAL_Q50A_1	Num	8	Final Assessment, If focal brain deficit is lacunar, is it pure motor hemiparesis?
189	SH27_FINAL_Q50A_2	Num	8	Final Assessment, If focal brain deficit is lacunar, is it pure sensory?
190	SH27_FINAL_Q50A_3	Num	8	Final Assessment, If focal brain deficit is lacunar, is it pure dysarthria clumsy hand?
191	SH27_FINAL_Q50A_4	Num	8	Final Assessment, If focal brain deficit is lacunar, is it pure ataxic hemiparesis?
192	SH27_FINAL_Q50B	Num	8	Final Assessment, Is there evidence that focal brain deficit is sensory motor only?
193	SH27_FINAL_Q50C	Num	8	Final Assessment, Is there evidence that focal brain deficit is hemichorea?
194	SH27_FINAL_Q50D	Num	8	Final Assessment, Is there evidence that focal brain deficit is aphasia only?
195	SH27_FINAL_Q50E	Num	8	Final Assessment, Is there evidence that focal brain deficit is visual field defect only?
196	SH27_FINAL_Q50F	Num	8	Final Assessment, Is there evidence that focal brain deficit is other hemisphere deficit?
197	SH27_FINAL_Q50G	Num	8	Final Assessment, Is there evidence that focal brain deficit is bilateral brainstem-cerebellar?
198	SH27_FINAL_Q50H	Num	8	Final Assessment, Is there evidence that focal brain deficit is unilateral brainstem-cerebrellar (not under 50a)?
199	SH27_FINAL_Q50I	Num	8	Final Assessment, Is there evidence that focal brain deficit is other?
200	SH27_FINAL_LP_HEMORRHAGE	Num	8	Final Assessment, LP evidence of hemorrhage?
201	SH27_FINAL_Q52	Num	8	Final Assessment, CT scan evidence of a lesion compatible with this event?
202	SH27_FINAL_Q52A	Num	8	Final Assessment, CT results, Deep lacunar infarction (<2cm)?
203	SH27_FINAL_Q52B	Num	8	Final Assessment, CT results, Cortical infarction (<1/2 lobe)?
204	SH27_FINAL_Q52C	Num	8	Final Assessment, CT results, Larger infarction?
205	SH27_FINAL_Q52D	Num	8	Final Assessment, CT results, Mottled hemorrhagic infarction?
206	SH27_FINAL_Q52E	Num	8	Final Assessment, CT results, Subarachnoid hemorrhage?
207	SH27_FINAL_Q52F	Num	8	Final Assessment, CT results, Intraparenchymal hemorrhage?
208	SH27_FINAL_Q52G	Num	8	Final Assessment, CT results, Watershed area infarction?
209	SH27_FINAL_Q52H	Num	8	Final Assessment, CT results, More than 1 infarction (old or new)?
210	SH27_FINAL_EEG_ABNORMAL	Num	8	Final Assessment, EEG abnormal?
211	SH27_FINAL_EEG_FOCAL_SLOWING	Num	8	Final Assessment, EEG shows focal slowing compatible with stroke?
212	SH27_FINAL_SEVERE_STENOSIS	Num	8	Final Assessment, Non-invasive testing shows evidence of severe stenosis or occlusion of relevant carotid?
213	SH27_FINAL_Q55	Num	8	Final Assessment, Angiographic evidence of a cause or source of event exists?

Num	Variable	Type	Len	Label
214	SH27_FINAL_Q55A	Num	8	Final Assessment, Angiographic evidence, AVM
215	SH27_FINAL_Q55B	Num	8	Final Assessment, Angiographic evidence, Aneurysm
216	SH27_FINAL_Q55C	Num	8	Final Assessment, Angiographic evidence, Mass effect
217	SH27_FINAL_Q55D	Num	8	Final Assessment, Angiographic evidence, Source for embolus (ulcerated plaque or free clot)
218	SH27_FINAL_Q55E1	Num	8	Final Assessment, Angiographic evidence, Stenosis (>=70%) or occlusion of relevant extracranial artery
219	SH27_FINAL_Q55E2	Num	8	Final Assessment, Angiographic evidence, Stenosis (>=70%) or occlusion of relevant major cerebral stem or basilar
220	SH27_FINAL_Q55E3	Num	8	Final Assessment, Angiographic evidence, Stenosis (>=70%) or occlusion of relevant branch occlusion
221	SH27_FINAL_Q55F	Num	8	Final Assessment, Angiographic evidence, Arteritis
222	SH27_FINAL_Q55G	Num	8	Final Assessment, Angiographic evidence, Dissection of the arterial wall
223	SH27_FINAL_Q55H	Num	8	Final Assessment, Angiographic evidence, Other
224	SH27_FINAL_SURGERY_STROKE	Num	8	Final Assessment, Surgical evidence of stroke?
225	SH27_FINAL_AUTOPSY_STROKE	Num	8	Final Assessment, for deaths, autopsy evidence of stroke?
226	SH27_FINAL_Q58A	Num	8	Final Assessment, Evidence is for Subarachnoid hemorrhage
227	SH27_FINAL_Q58B	Num	8	Final Assessment, Evidence is for Intraparenchymal hemorrhage
228	SH27_FINAL_Q58C	Num	8	Final Assessment, Evidence is for Ischemic Stroke
229	SH27_FINAL_Q58C1	Num	8	Final Assessment, Evidence is for Lacune ischemic stroke
230	SH27_FINAL_Q58C2	Num	8	Final Assessment, Evidence is for Embolic ischemic stroke
231	SH27_FINAL_Q58C3	Num	8	Final Assessment, Evidence is for Atherosclerotic ischemic stroke
232	SH27_FINAL_Q58C4	Num	8	Final Assessment, Evidence is for other ischemic stroke
233	SH27_FINAL_DEATH_WITHIN24HRS	Num	8	Final Assessment, Death occured within 24 hours of event?
234	SH27_FINAL_COMMENTS	Num	8	Final Assessment, Comments
235	SH27_NEUROLOGIST_CODE	Num	8	Neurologist code
236	SH27_RECORD_TYPE	Num	8	SH27 Record Type
237	SH27_DATE_RECEIVED	Num	8	SH27 Date Tape Received from Metpath Lab
238	SH27_UPDATE_NUMBER	Num	8	SH27 Update Number
239	SH27_DATE_LAST_PROCESSED	Num	8	SH27 Date Last Processed
240	SH27_PAPER_COPY	Num	8	SH27 Paper Copy
241	SH27_CROSS_FORM_EDITS	Num	8	SH27 Cross Form Edits

Data Set Name: sh28.sas7bdat

Num	Variable	Type	Len	Label
1	SH28_RECORD_LENGTH	Num	8	SH28 Record Length
2	SH28_KEYPUNCH_CODE	Num	8	SH28 Keypuncher Code
3	SH28_BATCHDATE	Num	8	SH28 Batch Date
4	SH28_VERIFYER_CODE	Num	8	SH28 Verifyer Code
5	SH28_DATE_LAST_MODIFIED	Num	8	SH28 Date record was last modified
6	SH28_TIME_LAST_MODIFIED	Num	8	SH28 Time record was last modified
7	SH28_EDIT_STATUS_CODE	Num	8	SH28 Edit status code
8	SHEPID	Num	8	SHEP ID
9	FORMNUM	Num	8	Form number
10	SH28_VERSNNUM	Num	8	SH28 Version number
11	SH28_EVAL_DATE	Num	8	Date of evaluation (in days from randomization)
12	SH28_SEQUENCE	Num	8	SH28 sequence number
13	ACROSTIC	Num	8	Acrostic
14	SH28_EVENT_LAST_LT24HRS	Num	8	Have you had event(s) lasting less than 24 hours?
15	SH28_EVENT_LAST_MT30SEC	Num	8	Have you had event(s) lasting more than 30 seconds?
16	SH28_EVENT_MAX_DEF_LT5MIN	Num	8	Have you had event(s) where maximum deficit was attained in less than 5 minutes?
17	SH28_PROCEEDING_HEAD_TRAUMA	Num	8	History of proceeding head trauma?
18	SH28_CLONIC_JERKING	Num	8	History of clonic jerking?
19	SH28_CONJUGATE_EYE_DEVIATION	Num	8	History of conjugate eye deviation?
20	SH28_SCINTILLATING_SCOTOMA	Num	8	History of scintillating scotoma?
21	SH28_HEADACHES_WITH_NAUSEA	Num	8	History of headaches with nausea and vomiting?
22	SH28_EVIDENCE_SEIZURES	Num	8	Other evidence for seizures?
23	SH28_EVIDENCE_HYPOGLYCEMIA	Num	8	Other evidence for hypoglycemia?
24	SH28_EVIDENCE_MIGRAINE	Num	8	Other evidence for migraine?
25	SH28_EVIDENCE_DRUG_INTOX	Num	8	Other evidence for drug intoxication?
26	SH28_EVIDENCE_ORTHOSTATIC	Num	8	Other evidence for orthostatic hypotension?
27	SH28_EVIDENCE_BRAIN_TUMOR	Num	8	Other evidence for brain tumor?
28	SH28_EVIDENCE_CERE_ISCHEMIA	Num	8	Other evidence for generalized cerebral ischemia?
29	SH28_VISION_LOSS_LT_EYE	Num	8	Symptoms during attack(s), Loss of vision in left eye?
30	SH28_VISION_LOSS_RT_EYE	Num	8	Symptoms during attack(s), Loss of vision in right eye?
31	SH28_LT_VISUAL_FIELD_LOSS	Num	8	Symptoms during attack(s), Left visual field loss?
32	SH28_RT_VISUAL_FIELD_LOSS	Num	8	Symptoms during attack(s), Right visual field loss?
33	SH28_SIM_VISUAL_FIELD_LOSS	Num	8	Symptoms during attack(s), Simultaneously visual field loss?
34	SH28_PARALYSIS_LT_FACE	Num	8	Symptoms during attack(s), Weakness, paralysis, or clumsiness of left face?

Num	Variable	Type	Len	Label
35	SH28_PARALYSIS_RT_FACE	Num	8	Symptoms during attack(s), Weakness, paralysis, or clumsiness of right face?
36	SH28_PARALYSIS_LT_ARM	Num	8	Symptoms during attack(s), Weakness, paralysis, or clumsiness of left arm?
37	SH28_PARALYSIS_RT_ARM	Num	8	Symptoms during attack(s), Weakness, paralysis, or clumsiness of right arm?
38	SH28_PARALYSIS_LT_LEG	Num	8	Symptoms during attack(s), Weakness, paralysis, or clumsiness of left leg?
39	SH28_PARALYSIS_RT_LEG	Num	8	Symptoms during attack(s), Weakness, paralysis, or clumsiness of right leg?
40	SH28_LOF_LT_FACE	Num	8	Symptoms during attack(s), Loss of feeling in left face?
41	SH28_LOF_RT_FACE	Num	8	Symptoms during attack(s), Loss of feeling in right face?
42	SH28_LOF_LT_ARM	Num	8	Symptoms during attack(s), Loss of feeling in left arm?
43	SH28_LOF_RT_ARM	Num	8	Symptoms during attack(s), Loss of feeling in right arm?
44	SH28_LOF_LT_LEG	Num	8	Symptoms during attack(s), Loss of feeling in left leg?
45	SH28_LOF_RT_LEG	Num	8	Symptoms during attack(s), Loss of feeling in right leg?
46	SH28_NUMBNESS_LT_FACE	Num	8	Symptoms during attack(s), Numbness paresthesias in left face?
47	SH28_NUMBNESS_RT_FACE	Num	8	Symptoms during attack(s), Numbness paresthesias in right face?
48	SH28_NUMBNESS_LT_ARM	Num	8	Symptoms during attack(s), Numbness paresthesias in left arm?
49	SH28_NUMBNESS_RT_ARM	Num	8	Symptoms during attack(s), Numbness paresthesias in right arm?
50	SH28_NUMBNESS_LT_LEG	Num	8	Symptoms during attack(s), Numbness paresthesias in left leg?
51	SH28_NUMBNESS_RT_LEG	Num	8	Symptoms during attack(s), Numbness paresthesias in right leg?
52	SH28_DYSARTHRIA	Num	8	Symptoms during attack(s), Dysarthria?
53	SH28_APHASIA	Num	8	Symptoms during attack(s), Aphasia?
54	SH28_ATAXIA	Num	8	Symptoms during attack(s), Ataxia?
55	SH28_LOSS_BALANCE	Num	8	Symptoms during attack(s), Loss of balance?
56	SH28_VERTIGO	Num	8	Symptoms during attack(s), Vertigo?
57	SH28_DIPLOPIA	Num	8	Symptoms during attack(s), Diplopia?
58	SH28_DYSPHAGIA	Num	8	Symptoms during attack(s), Dysphagia?
59	SH28_ATTACKS_STEROTYPED	Num	8	Symptoms during attack(s), Attacks are sterotyped?
60	SH28_NUM_ATTACKS	Num	8	Number of attacks
61	SH28_EVENTS_DESC	Num	8	Description of event(s)
62	SH28_ATTACKS_TIA	Num	8	In your opinion, do these attacks represent TIA?
63	SH28_TIA_LOC_LT_CAROTID	Num	8	Location of TIA, Left carotid
64	SH28_TIA_LOC_RT_CAROTID	Num	8	Location of TIA, Right carotid
65	SH28_TIA_LOC_VERTEBROBASILAR	Num	8	Location of TIA, Vertebrobasilar
66	SH28_TIA_LOC_MULTIFOCAL	Num	8	Location of TIA, Multifocal
67	SH28_NEUROLOGIST_CODE	Num	8	Code of Neurologist completing SH28
68	SH28_ONSET_DATE	Num	8	Date of onset (in days from randomization)
69	SH28_RECORD_TYPE	Num	8	SH28 Record Type
70	SH28_DATE_RECEIVED	Num	8	SH28 Date Tape Received from Metpath Lab

Num	Variable	Type	Len	Label
71	SH28_UPDATE_NUMBER	Num	8	SH28 Update Number
72	SH28_DATE_LAST_PROCESSED	Num	8	SH28 Date Last Processed
73	SH28_PAPER_COPY	Num	8	SH28 Paper Copy
74	SH28_CROSS_FORM_EDITS	Num	8	SH28 Cross Form Edits

Data Set Name: sh30.sas7bdat

Num	Variable	Type	Len	Label
1	SH30_RECORD_LENGTH	Num	8	SH30 Record Length
2	SH30_KEYPUNCH_CODE	Num	8	SH30 Keypuncher Code
3	SH30_BATCHDATE	Num	8	SH30 Batch Date
4	SH30_VERIFYER_CODE	Num	8	SH30 Verifyer Code
5	SH30_DATE_LAST_MODIFIED	Num	8	SH30 Date record was last modified
6	SH30_TIME_LAST_MODIFIED	Num	8	SH30 Time record was last modified
7	SH30_EDIT_STATUS_CODE	Num	8	SH30 Edit status code
8	SHEPID	Num	8	SHEP ID
9	FORMNUM	Num	8	Form number
10	SH30_VERSNNUM	Num	8	SH30 Version number
11	SH30_VISITDATE	Num	8	Date of clinic visit (in days from randomization)
12	SH30_SEQUENCE	Num	8	SH30 sequence number
13	ACROSTIC	Num	8	Acrostic
14	SH30_VISIT_SEQNUM	Num	8	Clinic visit sequence number
15	SH30_SHORTCARE_DATE	Num	8	Date of SHORTCARE evaluation (in days from randomization)
16	SH30_TOTAL_SCORE1	Num	8	Total Score #1
17	SH30_TOTAL_SCORE2	Num	8	Total Score #2
18	SH30_REFERRED_DEMENTIA	Num	8	Participant referred for dementia evaluation (SH31)
19	SH30_REFERRED_DEPRESSION	Num	8	Participant referred for depression evaluation (SH32)
20	SH30_REFERRED_OTHER	Num	8	Participant referred for other evaluation
21	SH30_EVALUATION_COMMENTS	Num	8	Evaluation comments
22	SH30_INTERVIEWER_CODE	Num	8	Interviewer's code
23	SH30_Q8A	Num	8	Subject cannot repeat rough approximation of rater's name
24	SH30_Q9A	Num	8	Stated answer to: 'How old are you?'
25	SH30_Q9B	Num	8	Subject does not know or does not complete reply to: 'How old are you?'
26	SH30_Q9C	Num	8	Stated age different by more than 1 year from most accurate estimate
27	SH30_Q10A	Num	8	Stated answer to: 'What year were you born?' (in months from randomization)
28	SH30_Q10B	Num	8	Subject does not know or doesn't complete reply to: 'What year were you born?'
29	SH30_Q10C	Num	8	Stated birth year different from most accurate estimate
30	SH30_Q11A	Num	8	Discrepency between stated birthdate AND stated age is not corrected by subject
31	SH30_Q11B	Num	8	Subject shows marked uncertainty about age AND birthdate
32	SH30_Q11C	Num	8	Either stated birthdate, stated age or both are obviously wrong
33	SH30_Q12A	Num	8	Subject does not know or doesn't complete reply to: 'How long have you lived in this neighborhood?'
34	SH30_Q13A	Num	8	Subject does not know or doesn't complete reply to: 'What is your home address?'

Num	Variable	Type	Len	Label
35	SH30_Q13B	Num	8	Subject gives incorrect or incomplete house number and/or town
36	SH30_Q14A	Num	8	Subject does not know or doesn't complete reply to: 'How long have you lived at this address?'
37	SH30_Q15A	Num	8	Subject does have a telephone
38	SH30_Q15B	Num	8	Subject does not know or doesn't complete reply to: 'What is your telephone number?'
39	SH30_Q15C	Num	8	Subject gives incorrect or incomplete phone number
40	SH30_Q16A	Num	8	Subject admits to worrying without further probing
41	SH30_Q16B	Num	8	Subject worries about almost everything
42	SH30_Q17A	Num	8	Subject has been sad or depressed during past month
43	SH30_Q17B	Num	8	Subject has had depression that lasts longer than just the occasional few hours
44	SH30_Q17C	Num	8	Subject's depression is worst at the beginning of the day
45	SH30_Q17D	Num	8	Subject has felt live wasn't worth living
46	SH30_Q18A	Num	8	Subject has cried
47	SH30_Q18B	Num	8	Subject has felt like crying but did not
48	SH30_Q19A	Num	8	How do you feel about your future? What are your hopes for the future?
49	SH30_Q20A	Num	8	In the past month have you at any time felt that you would rather be dead or felt that you wanted to end it all?
50	SH30_Q21A	Num	8	Subject does not mention feeling happy in the last month
51	SH30_Q22A	Num	8	Do you feel happy about yourself as a person? If no, do you have regrets? Do you blame yourself for anything?
52	SH30_Q23A	Num	8	Subject has had trouble falling or staying asleep in the past month
53	SH30_Q23B	Num	8	Subject is taking medication for sleeping
54	SH30_Q23C	Num	8	Difficulty sleeping is due to altered moods or tension
55	SH30_Q24A	Num	8	Subject awakes about 2 hours or more before normal time of awakening and cannot go back to sleep
56	SH30_Q24B	Num	8	Subject wakes up feeling tired
57	SH30_Q25A	Num	8	Subject claims difficulty with memories
58	SH30_Q25B	Num	8	Subject forgets what he/she is attending to or has just attended to in TV, reading, radio, talking
59	SH30_Q26A	Num	8	Subject does not recall even a rough approximation of rater's name
60	SH30_Q27A	Num	8	Subject does not recall the name of the current President
61	SH30_Q27B	Num	8	Subject does not recall the name of previous President
62	SH30_Q28A	Num	8	Subject does not know month or does not complete reply to: 'What month is it?'
63	SH30_Q28B	Num	8	Subject gives incorrect month to question:'What month is it?'
64	SH30_Q28C	Num	8	Subject does not know year or does not complete reply to: 'What year is it?'
65	SH30_Q28D	Num	8	Subject gives incorrect year to question: 'What year is it?'
66	SH30_Q29A	Num	8	Recently, have you felt listlessness or subjective restriction of energy?
67	SH30_Q30A	Num	8	Do you feel you have become subjectively slowed down in physical movements?
68	SH30_Q31A	Num	8	Have you been doing less than usual?

Num	Variable	Type	Len	Label
69	SH30_Q31B	Num	8	Do you experience slowness or anergia worst in mornings?
70	SH30_Q31C	Num	8	Do you sit or lay around becuase of lack of energy?
71	SH30_Q32A	Num	8	Subject admits to being restless
72	SH30_Q33A	Num	8	Subject did not previously and does not currently recall even a rough approximation of rater's name
73	SH30_Q34A	Num	8	Subject has headaches
74	SH30_Q35A	Num	8	Subject has enjoyed almost nothing in the past month
75	SH30_Q36A	Num	8	Subject spent less time than usual on interests or activities
76	SH30_Q37A	Num	8	Subject has less interest or enjoyment in activities than before
77	SH30_Q37B	Num	8	Subject is too depressed or nervous to enjoy activities
78	SH30_Q38A	Num	8	In general, how happy are you?
79	SH30_Q39A	Num	8	Subject has felt lonely in the past month
80	SH30_Q39B	Num	8	Subject often feels lonely
81	SH30_Q40A	Num	8	How much of the cooking and preparation of meals do you do yourself? Is that without any help from anyone?
82	SH30_Q41A	Num	8	Subject performed one or more incorrect manuevers
83	SH30_Q42A	Num	8	Subject has problems handling personal business by self
84	SH30_Q43A	Num	8	Do you do all of your own shopping without any help from anyone else?
85	SH30_Q44A	Num	8	How many light chores do you do by yourself? Is that without any help from anyone else?
86	SH30_Q45A	Num	8	What heavy chores do you do yourself? Is that without any help from anyone else?
87	SH30_Q46A	Num	8	Subject has problems/difficulty in basic dressing
88	SH30_Q47	Num	8	During the past week, How often were you bothered by things that usually don't bother you?
89	SH30_Q48	Num	8	During the past week, How often did you not feel like eating, had a poor appetite?
90	SH30_Q49	Num	8	During the past week, How often did you feel that you could not shake off the blues even with help from friends/family?
91	SH30_Q50	Num	8	How often did you feel like you were as good as other people?
92	SH30_Q51	Num	8	How often did you have trouble keeping your mind on what you were doing?
93	SH30_Q52	Num	8	During the past week, How often did you feel depressed?
94	SH30_Q53	Num	8	How often did you feel that everything you did was an effort?
95	SH30_Q54	Num	8	How often did you feel hopeful about the future?
96	SH30_Q55	Num	8	During the past week, How often did you feel your life was a failure?
97	SH30_Q56	Num	8	How often did you feel fearful?
98	SH30_Q57	Num	8	How often was your sleep restless?
99	SH30_Q58	Num	8	During the past week, How often were you happy?
100	SH30_Q59	Num	8	How often did it seem like you talked less than usual?
101	SH30_Q60	Num	8	How often did you feel lonely?
102	SH30_Q61	Num	8	During the past week, How often were people unfriendly to you?

Num	Variable	Type	Len	Label
103	SH30_Q62	Num	8	How often did you enjoy life?
104	SH30_Q63	Num	8	How often have you had crying spells?
105	SH30_Q64	Num	8	During the past week, How often have you felt sad?
106	SH30_Q65	Num	8	How often have you felt people disliked you?
107	SH30_Q66	Num	8	How often could you not get going?
108	SH30_Q67	Num	8	Total Score
109	SH30_Q68	Num	8	Were all items in this questionnaire read?
110	SH30_Q69	Num	8	How would you rate the overall validity of the responses obtained?
111	SH30_Q70A	Num	8	Did anything in particular contribute non-completion or adversely effect quality of interview?
112	SH30_Q70B	Num	8	Did a hearing problem effect completion?
113	SH30_Q70C	Num	8	Did language difficulty effect completion?
114	SH30_Q70D	Num	8	Did mental confusion effect completion?
115	SH30_Q70E	Num	8	Did a hostile attitude effect completion?
116	SH30_Q70F	Num	8	Did lack of interest effect completion?
117	SH30_Q70G	Num	8	Did fatigue effect completion?
118	SH30_Q70H	Num	8	Did participant's proxy effect completion?
119	SH30_Q70I	Num	8	Did noise or interruptions effect completion?
120	SH30_Q70J	Num	8	Did time pressure effect completion?
121	SH30_Q70K	Num	8	Other things effect completion?
122	SH30_RECORD_TYPE	Num	8	SH30 Record Type
123	SH30_DATE_RECEIVED	Num	8	SH30 Date Tape Received from Metpath Lab
124	SH30_UPDATE_NUMBER	Num	8	SH30 Update Number
125	SH30_DATE_LAST_PROCESSED	Num	8	SH30 Date Last Processed
126	SH30_PAPER_COPY	Num	8	SH30 Paper Copy
127	SH30_CROSS_FORM_EDITS	Num	8	SH30 Cross Form Edits

Data Set Name: sh31.sas7bdat

Num	Variable	Type	Len	Label
1	SH31_RECORD_LENGTH	Num	8	SH31 Record Length
2	SH31_KEYPUNCH_CODE	Num	8	SH31 Keypuncher Code
3	SH31_BATCHDATE	Num	8	SH31 Batch Date
4	SH31_VERIFYER_CODE	Num	8	SH31 Verifyer Code
5	SH31_DATE_LAST_MODIFIED	Num	8	SH31 Date record was last modified
6	SH31_TIME_LAST_MODIFIED	Num	8	SH31 Time record was last modified
7	SH31_EDIT_STATUS_CODE	Num	8	SH31 Edit status code
8	SHEPID	Num	8	SHEP ID
9	FORMNUM	Num	8	Form number
10	SH31_VERSNNUM	Num	8	SH31 Version number
11	SH31_VISITDATE	Num	8	Date of clinic visit (in days from randomization)
12	SH31_SEQUENCE	Num	8	SH31 sequence number
13	ACROSTIC	Num	8	Acrostic
14	SH31_VISIT_SEQNUM	Num	8	Sequence number of clinic visit
15	SH31_SHORTCARE_DATE	Num	8	Date of SHORTCARE evaluation (in days from randomization)
16	SH31_LOSS_INTELLECTUAL	Num	8	Loss of intellectual abilities severe enough to interfere with social/occupational functioning present?
17	SH31_MEMORY_IMPAIR	Num	8	Memory impairment present?
18	SH31_ABSTRACT_IMPAIR	Num	8	Impairment of abstract thinking present?
19	SH31_JUDGMENT_IMPAIR	Num	8	Impaired judgment present?
20	SH31_OTHER_DISTURBANCES	Num	8	Other disturbances of higher cortical function (aphasia, apraxia, agnosia, etc.) present?
21	SH31_PERSONALITY_CHANGE	Num	8	Personality change present?
22	SH31_UNCLOUDED_STATE	Num	8	Unclouded state of consciousness present?
23	SH31_NO_REVERSIBLE_COURSE	Num	8	Evidence from history, exam, and lab tests that no specific reversible course of dementia is present?
24	SH31_CT_SCAN_RESULTS	Num	8	Results of CT Scan present?
25	SH31_HACHINSKI_SCORE	Num	8	Hachinski Ischemic Score
26	SH31_CAUSE_COGNITIVE_DECLINE	Num	8	Does patient have psychiatric cause for cognitive decline?
27	SH31_DEMENTIA	Num	8	In your opinion, does the participant have dementia?
28	SH31_DEMENTIA_TYPE_V1	Num	8	What type of dementia? (form version 1)
29	SH31_SYMPTOMS_ABRUPT	Num	8	Did patient's symptoms of cognitive deterioration appear abruptly?
30	SH31_DETER_STEPWISE	Num	8	Did the deterioration appear to progress in a stepwise fashion over time, each new step characterized by additional level of impairment?
31	SH31_DETER_FLUCTUATED	Num	8	Did the patient experience a fluctuating course of his deterioration?
32	SH31_NOCTURNAL_CONFUSION	Num	8	Does the patient appear relatively lucid during the daytime but exhibit evidence of nocturnal confusion?

Num	Variable	Type	Len	Label
33	SH31_WELL_PRESERVED	Num	8	Does the patient's general personality appear to be well-preserved?
34	SH31_DEPRESSION	Num	8	Is depression present?
35	SH31_SOMATIC_COMPLAINTS	Num	8	Does patient present somatic complaints (headache, dizziness, fatigue, etc.)?
36	SH31_EMOTIONAL_INCONTINENCE	Num	8	Does patient exhibit evidence of emotional incontinence?
37	SH31_HYPERTENSION	Num	8	Does patient have history of hypertension (DBP >= 90 mmHg and/or SBP >=160 mmHg)?
38	SH31_STROKE	Num	8	Does the patient present a history of prior strokes or cerebrovascular accidents?
39	SH31_ATHEROSCLEROSIS	Num	8	Is there other evidence of atherosclerosis in this patient (retinal artery changes, etc.)?
40	SH31_TRANSIENT_FOCAL_SYMPTOMS	Num	8	Does the patient describe experiencing transient focal neurologica symptoms (visual/sensory disturbances, etc.)?
41	SH31_EVAL_FOCAL_NEURO_SIGNS	Num	8	Upon neurological evaluation, is there evidence of focal neurological signs (sluggish pupils, visual field defects, etc.)?
42	SH31_OBSERVER_CODE	Num	8	SH31 Observer Code
43	SH31_EXAMINER_CODE	Num	8	SH31 Examiner Code
44	SH31_RECORD_TYPE	Num	8	SH31 Record Type
45	SH31_DATE_RECEIVED	Num	8	SH31 Date Tape Received from Metpath Lab
46	SH31_UPDATE_NUMBER	Num	8	SH31 Update Number
47	SH31_DATE_LAST_PROCESSED	Num	8	SH31 Date Last Processed
48	SH31_PAPER_COPY	Num	8	SH31 Paper Copy
49	SH31_CROSS_FORM_EDITS	Num	8	SH31 Cross Form Edits
50	SH31_EXAMINER	Num	8	Examiner is:
51	SH31_NEUROLOGIST_CODE	Num	8	Neurologist or Psychiatrist code
52	SH31_HIST1_INTERVIEW_PATIENT	Num	8	Dementia history #1 Interview with patient
53	SH31_HIST1_INTERVIEW_FRIEND	Num	8	Dementia history #1 Interview with friend
54	SH31_HIST1_INTERVIEW_FAMILY	Num	8	Dementia history #1 Interview with family member
55	SH31_HIST1_INTERVIEW_RECORDS	Num	8	Dementia history #1 Interview based on medical records
56	SH31_HIST1_INTERVIEW_OTHER	Num	8	Dementia history #1 Interview with other person
57	SH31_LAST_GRADE_ATTENDED	Num	8	Last grade attended in school
58	SH31_EDUCATION	Num	8	Maximum education attainment
59	SH31_PREMORBID_ABILITY	Num	8	Estimate of premorbid intellectual ability based on employment history and life activities?
60	SH31_MENTAL_STATUS	Num	8	Present mental status
61	SH31_DETER_ON_JOB	Num	8	Is there a history of deterioration in intellectual performance on the job?
62	SH31_DETER_SOCIALLY	Num	8	Is there a history of deterioration in intellectual performance socially?
63	SH31_DETER_HOUSEHOLD_TASKS	Num	8	Is there a history of deterioration in intellectual performance in household tasks (cooking, etc.)?
64	SH31_DETER_COPING_MONEY	Num	8	Is there a history of deterioration in intellectual performance in coping with small sums of money?

Num	Variable	Type	Len	Label
65	SH31_DETER_REMEMBER_SHORTLIST	Num	8	Is there a history of deterioration in intellectual performance remembering short list of items?
66	SH31_DETER_FAMILIAR_STREETS	Num	8	Is there a history of deterioration in intellectual performance finding the way about on familiar streets?
67	SH31_DETER_FIND_WAY_INDOORS	Num	8	Is there a history of deterioration in intellectual performance finding the way about indoors?
68	SH31_DETER_RECALLING_EVENTS	Num	8	Is there a history of deterioration in intellectual performance recalling events?
69	SH31_DETER_INTERPRETING	Num	8	Is there a history of deterioration in intellectual performance interpreting surroundings?
70	SH31_DETER_OTHER	Num	8	Is there a history of deterioration in intellectual performance in other situations?
71	SH31_SYMPT_DIFF_DRESSING	Num	8	Does the patient have difficulty dressing?
72	SH31_SYMPT_CONSTRUCTIONAL	Num	8	Does the patient have problems putting things together?
73	SH31_SYMPT_IMPAIR_JUDGMENT	Num	8	Does the patient have impaired judgement?
74	SH31_SYMPT_SEIZURES	Num	8	Does the patient have seizures?
75	SH31_SYMPT_NIGHT_CONFUSION	Num	8	Does the patient have confusion at night or in unfamiliar places?
76	SH31_SYMPT_REPEATS_SELF	Num	8	Does the patient repeat self?
77	SH31_PERSONAL_CHANGE_PAST6MOS	Num	8	Patient has had difficulty with personality change (decreased initiative, apathy, etc.) in past 6 months?
78	SH31_HALLUCINATIONS_PAST6MOS	Num	8	Patient has had difficulty with seeing or hearing things that are not present in past 6 months?
79	SH31_LANGUAGE_PROBS_PAST6MOS	Num	8	Patient has had difficulty with language (speech problems, reading, etc.) in past 6 months?
80	SH31_MOTOR_SYMPTOMS_PAST6MOS	Num	8	Patient has had difficulty with motor symptoms (falls, tremors, gait) in past 6 months?
81	SH31_BOWEL_INCONTINENCE	Num	8	Patient has had difficulty with urinary/bowel incontinence in past 6 months?
82	SH31_MINI_ORIENTATION_SCORE1	Num	8	Mini-Mental State Exam, Orientation Score #1 (What is year/season/date/day/month)
83	SH31_MINI_ORIENTATION_SCORE2	Num	8	Mini-Mental State Exam, Orientation Score #2 (Where are we state/country/town/hospital/floor?)
84	SH31_MINI_REGISTRATION_SCORE1	Num	8	Mini-Mental State Exam, Registration Score #1 (Patient repeat words ball, house, flower)
85	SH31_MINI_REGISTRATION_SCORE2	Num	8	Mini-Mental State Exam, Registration Score #2 (Number of trials for patient to learn 3 words)
86	SH31_MINI_ATTENTION_SCORE	Num	8	Mini-Mental State Exam, Attention and Calculation Score (Serial 7s)
87	SH31_MINI_RECALL_SCORE	Num	8	Mini-Mental State Exam, Recall Score #1 (Ask subject to repeat 3 words from Registration)
88	SH31_MINI_LANGUAGE_SCORE1	Num	8	Mini-Mental State Exam, Language Score #1 (Name a pencil and a watch)
89	SH31_MINI_LANGUAGE_SCORE2	Num	8	Mini-Mental State Exam, Language Score #2 (Repeat:'No ifs, ands or buts')
90	SH31_MINI_LANGUAGE_SCORE3	Num	8	Mini-Mental State Exam, Language Score #3 (Follow 3-stage command)

Num	Variable	Type	Len	Label
91	SH31_MINI_LANGUAGE_SCORE4	Num	8	Mini-Mental State Exam, Language Score #4 (Obey command: 'Close your eyes')
92	SH31_MINI_LANGUAGE_SCORE5	Num	8	Mini-Mental State Exam, Language Score #5 (Obey command: 'Write a sentence')
93	SH31_MINI_LANGUAGE_SCORE6	Num	8	Mini-Mental State Exam, Language Score #6 (Obey command: 'Copy design')
94	SH31_MINI_TOTAL_SCORE	Num	8	Mini-Mental State Exam score (do not include Registration Score #2)
95	SH31_MINI_DETERIORATION	Num	8	Based on preceding history and Mini-Mental State score (<23), is there evidence of intellectual deterioration/current performance below that expected from employment activities and schooling attainment?
96	SH31_EVAL_COMPLETER_CODE	Num	8	Code of person completing Dementia evaluation history #1 section
97	SH31_HIST2_INTERVIEW_PATIENT	Num	8	Dementia history #2 Interview with patient
98	SH31_HIST2_INTERVIEW_FRIEND	Num	8	Dementia history #2 Interview with friend
99	SH31_HIST2_INTERVIEW_FAMILY	Num	8	Dementia history #2 Interview with family member
100	SH31_HIST2_INTERVIEW_RECORDS	Num	8	Dementia history #2 Interview based on medical records
101	SH31_HIST2_INTERVIEW_OTHER	Num	8	Dementia history #2 Interview with other person
102	SH31_DEMENTIA_ONSET	Num	8	Onset of dementia?
103	SH31_DEMENTIA_COURSE	Num	8	Course of dementia?
104	SH31_DEMENTIA_PLATEAUS	Num	8	Dementia Plateaus?
105	SH31_DEMENTIA_DURATION	Num	8	Duration of dementia?
106	SH31_STROKE_HIST2	Num	8	Is there a history of stroke?
107	SH31_VISION_IMPAIR_24HRS	Num	8	Was there a sudden impairment of vision last longer than 24 hours?
108	SH31_SPEECH_IMPAIR_24HRS	Num	8	Was there a sudden impairment of speech last longer than 24 hours?
109	SH31_STRENGTH_IMPAIR_24HRS	Num	8	Was there a sudden impairment of strength last longer than 24 hours?
110	SH31_SENSATION_IMPAIR_24HRS	Num	8	Was there a sudden impairment of sensation last longer than 24 hours?
111	SH31_HEAD_TRAUMA_UNCONSCIOUS	Num	8	Is there a history of head trauma with unconsciousness?
112	SH31_HEAD_TRAUMA_CONSCIOUS	Num	8	Is there a history of head trauma without definite unconsciousness?
113	SH31_MEDICAL_ILLNESS_PRIOR	Num	8	History of other medical illness preceding or with onset of dementia?
114	SH31_PSYHCIATRIC_ILLNESS_PRIOR	Num	8	History of psychiatric illness preceding or with onset of dementia?
115	SH31_PSYHCIATRIC_TREATMENT	Num	8	Treatment employed for psychiatric illnesses?
116	SH31_DEMENTIA_FROM_DEPRESSION	Num	8	Evidence of dementia due to depression?
117	SH31_DEPRESSION_HIST2	Num	8	Evidence of depression? (Dementia Evaluation History #2)
118	SH31_CURR_ALCOHOL_USE	Num	8	Current alcohol use?
119	SH31_CAGE_REVIEW_POSITIVE	Num	8	Is Cage Review positive for alcoholism?
120	SH31_ALCOHOL_POTENTIAL_CAUSE	Num	8	Is alcohol intake a potential cause for dementia?

Num	Variable	Type	Len	Label
121	SH31_MEDS_ANTI_ANXIETY	Num	8	Does the patient use anti-anxiety medications?
122	SH31_MEDS_PHENOTHIAZINES	Num	8	Does the patient use phenothiazines?
123	SH31_MEDS_BARBITURATES	Num	8	Does the patient use barbiturates?
124	SH31_MEDS_ANTIDEPRESSANTS	Num	8	Does the patient use antidepressants?
125	SH31_MEDS_SLEEPING_PILLS	Num	8	Does the patient use sleeping pills?
126	SH31_MEDS_OTHER	Num	8	Does the patient use other medications that may impair cognition?
127	SH31_HYPERPARATHYROIDISM	Num	8	Medical history of possible treatable causes of dementia, Hyperparathyroidism?
128	SH31_HYPOTHYROIDISM	Num	8	Medical history of possible treatable causes of dementia, Hypothyroidism?
129	SH31_B12_DEFICIENCY	Num	8	Medical history of possible treatable causes of dementia, B12 deficiency?
130	SH31_SYPHILIS	Num	8	Medical history of possible treatable causes of dementia, Syphilis?
131	SH31_BRAIN_ABSCESS	Num	8	Medical history of possible treatable causes of dementia, Brain abscess?
132	SH31_BRAIN_TUMOR	Num	8	Medical history of possible treatable causes of dementia, Brain tumor?
133	SH31_SUBARACHNOID_HEMORRHAGE	Num	8	Medical history of possible treatable causes of dementia, Subarachnoid hemorrhage?
134	SH31_SUBDURAL_HEMATOMA	Num	8	Medical history of possible treatable causes of dementia, Subdural hematoma?
135	SH31_MENINGITIS	Num	8	Medical history of possible treatable causes of dementia, Bacterial/fungal meningitis or viral encephalitis?
136	SH31_LIVER_DISEASE	Num	8	Medical history of possible treatable causes of dementia, Liver disease?
137	SH31_KIDNEY_DISEASE	Num	8	Medical history of possible treatable causes of dementia, Kidney disease?
138	SH31_SEVERE_PULMONARY_DISEASE	Num	8	Medical history of possible treatable causes of dementia, Severe obstructive pulmonary disease?
139	SH31_VASCULAR_DISEASE	Num	8	Medical history of possible treatable causes of dementia, Collagen/vascular disease?
140	SH31_OTHER_MEDICAL_CAUSES	Num	8	Medical history of possible treatable causes of dementia, Other?
141	SH31_FAMHIST_DEMENTIA	Num	8	Is there a family history of dementia?
142	SH31_STAND_STILL_EYES_OPEN	Num	8	Ability to stand and maintain station on a narrow base with arms oustretched for 30 seconds with eyes open?
143	SH31_STAND_STILL_EYES_CLOSED	Num	8	Ability to stand and maintain station on a narrow base with arms oustretched for 30 seconds with eyes closed?
144	SH31_DOWNWARD_LEFT_ARM	Num	8	If unsuccessful with eyes open, Downward drift of left arm?
145	SH31_DOWNWARD_RIGHT_ARM	Num	8	If unsuccessful with eyes open, Downward drift of right arm?
146	SH31_WALK_ORDINARY_GAIT	Num	8	Able to perform ordinary gait without difficulty when walking?
147	SH31_WALK_HEELS_LT_DROOP	Num	8	When walking on heels, left foot droops?
148	SH31_WALK_HEELS_RT_DROOP	Num	8	When walking on heels, left right droops?
149	SH31_WALK_HEEL_TOE	Num	8	Tandem walking (heel to toe) without difficulty?
150	SH31_PAPILLEDEMA	Num	8	Fundoscopic examination, Papilledema present?

Num	Variable	Type	Len	Label
151	SH31_VISION_FIELD_CUT	Num	8	Visual field cut?
152	SH31_VISION_MONOCULAR_LOSS	Num	8	Monocular loss?
153	SH31_PUPIL_ROUNDESS	Num	8	Pupil roundness present?
154	SH31_PUPIL_REACT_LIGHT	Num	8	React to light and accommodation?
155	SH31_FULL_LT_LATERAL_GAZE	Num	8	Extraocular movements, Full left lateral gaze
156	SH31_FULL_RT_LATERAL_GAZE	Num	8	Extraocular movements, Full right lateral gaze
157	SH31_FULL_UPWARD_GAZE	Num	8	Extraocular movements, Full upward gaze
158	SH31_FULL_DOWNWARD_GAZE	Num	8	Extraocular movements, Full downward gaze
159	SH31_ROTATE_HEAD_HOR	Num	8	Occulocephalic reflex, have patient fixate on a point and rotate head horizontally
160	SH31_ROTATE_HEAD_VERT	Num	8	Occulocephalic reflex, have patient fixate on a point and rotate head vertically
161	SH31_FORCED_EYE_CLOSURE	Num	8	Forced eye closure
162	SH31_BLOWOUT_CHEEKS	Num	8	Blow out cheeks
163	SH31_TONGUE_IN_CHEEK_LT	Num	8	Tongue in left cheek
164	SH31_TONGUE_IN_CHEEK_RT	Num	8	Tongue in right cheek
165	SH31_SHOW_TEETH_LT_FACE	Num	8	Show teeth, left face
166	SH31_SHOW_TEETH_RT_FACE	Num	8	Show teeth, right face
167	SH31_STRENGTH_LEFT_ARM	Num	8	Strength, left arm/hand
168	SH31_STRENGTH_RIGHT_ARM	Num	8	Strength, right arm/hand
169	SH31_STRENGTH_LEFT_LEG	Num	8	Strength, left leg
170	SH31_STRENGTH_RIGHT_LEG	Num	8	Strength, right leg
171	SH31_TONE_ARM_LEG	Num	8	Tone of arms and legs
172	SH31_LT_ARM_ABNORMALITY	Num	8	Type of left arm abnormality
173	SH31_LT_LEG_ABNORMALITY	Num	8	Type of left leg abnormality
174	SH31_RT_ARM_ABNORMALITY	Num	8	Type of right arm abnormality
175	SH31_RT_LEG_ABNORMALITY	Num	8	Type of right leg abnormality
176	SH31_REFLEXES	Num	8	Reflexes in arms and legs
177	SH31_REFLEX_BICEPS_LT_ABNORM	Num	8	Left biceps reflex abnormal
178	SH31_REFLEX_BICEPS_RT_ABNORM	Num	8	Right biceps reflex abnormal
179	SH31_REFLEX_TRICEPS_LT_ABNORM	Num	8	Left triceps reflex abnormal
180	SH31_REFLEX_TRICEPS_RT_ABNORM	Num	8	Right triceps reflex abnormal
181	SH31_REFLEX_KNEE_LT_ABNORM	Num	8	Left knee reflex abnormal
182	SH31_REFLEX_KNEE_RT_ABNORM	Num	8	Right knee reflex abnormal
183	SH31_REFLEX_ANKLE_LT_ABNORM	Num	8	Left ankle reflex abnormal
184	SH31_REFLEX_ANKLE_RT_ABNORM	Num	8	Right ankle reflex abnormal
185	SH31_REFLEX_PLANTAR_LT_ABNORM	Num	8	Left plantar reflex abnormal
186	SH31_REFLEX_PLANTAR_RT_ABNORM	Num	8	Right plantar reflex abnormal
187	SH31_REFLEX_ANKLE_DEPRESS	Num	8	Reflexes at ankle when depressed?

Num	Variable	Type	Len	Label
188	SH31_REFLEX_KNEE_DEPRESS	Num	8	Reflexes at knee when depressed?
189	SH31_SENSATION_PIN	Num	8	Sensation, Pin
190	SH31_SENSATION_POSITION_TOES	Num	8	Sensation, Position sense toes
191	SH31_EXAM_REFLEXES_SNOUT	Num	8	Additional reflexes, snout/suck/rooting
192	SH31_EXAM_REFLEXES_GRASP	Num	8	Additional reflexes, grasp/reflex/hand
193	SH31_EXAM_REFLEXES_GLABELLAR	Num	8	Additional reflexes, glabellar
194	SH31_COORD_FINGER_NOSE_LT	Num	8	Coordination, Finger to nose, left
195	SH31_COORD_FINGER_NOSE_RT	Num	8	Coordination, Finger to nose, right
196	SH31_COORD_HAND_PAT_LT	Num	8	Coordination, patting left hand
197	SH31_COORD_HAND_PAT_RT	Num	8	Coordination, patting right hand
198	SH31_EXAM_TREMOR_AT_REST	Num	8	On the basis of the examination and observation have you seen tremor at rest?
199	SH31_EXAM_TREMOR_POSTURE_HOLD	Num	8	On the basis of the examination and observation have you seen tremor on posture holding?
200	SH31_EXAM_TREMOR_ON_ACTION	Num	8	On the basis of the examination and observation have you seen tremor on action?
201	SH31_EXAM_CHOREA	Num	8	On the basis of the examination and observation have you seen chorea?
202	SH31_EXAM_OTHER_INVOL_MOVEMENTS	Num	8	On the basis of the examination and observation have you seen other involuntary movements?
203	SH31_EXAM_BRADYKINESIA	Num	8	On the basis of the examination and observation have you seen bradykinesia?
204	SH31_EXAM_MOTOR_PERSISTENCE	Num	8	On the basis of the examination and observation have you seen motor persistence?
205	SH31_EXAM_MOTOR_IMPERSISTENCE	Num	8	On the basis of the examination and observation have you seen motor impersistence?
206	SH31_EXAM_APRAXIA	Num	8	On the basis of the examination and observation have you seen apraxia?
207	SH31_EXAM_AGNOSIA	Num	8	On the basis of the examination and observation have you seen agnosia?
208	SH31_EXAM_MOTOR_APHASIA	Num	8	On the basis of the examination and observation have you seen speech/language/motor aphasia?
209	SH31_EXAM_COMPREHENSION	Num	8	On the basis of the examination and observation have you seen comprehension deficit?
210	SH31_EXAM_DYSARTHRIA	Num	8	On the basis of the examination and observation have you seen articulation/dysarthria?
211	SH31_FOCAL_NEURO_ABNORMALITIES	Num	8	Are focal neurologic abnormalities present?
212	SH31_ABNORMALITIES_STROKE	Num	8	If yes, are focal neurologic abnormalities consistent with stroke?
213	SH31_CBC	Num	8	Laboratory Exam of Dementia, CBC?
214	SH31_ELECTROLYTES	Num	8	Laboratory Exam of Dementia, Electrolytes?
215	SH31_GLUCOSE	Num	8	Laboratory Exam of Dementia, Glucose?
216	SH31_LIVER_FUNCTION	Num	8	Laboratory Exam of Dementia, Liver function tests?
217	SH31_RENAL	Num	8	Laboratory Exam of Dementia, Renal (BUN, Creat)?

Num	Variable	Type	Len	Label
218	SH31_THYROID_PANEL	Num	8	Laboratory Exam of Dementia, Thyroid panel?
219	SH31_VDRL	Num	8	Laboratory Exam of Dementia, VDRL/FTA?
220	SH31_SED_RATE	Num	8	Laboratory Exam of Dementia, Sed Rate?
221	SH31_B12_LVL	Num	8	Laboratory Exam of Dementia, B12 level?
222	SH31_DRUG_SCREEN	Num	8	Laboratory Exam of Dementia, Drug screen?
223	SH31_EEG	Num	8	Laboratory Exam of Dementia, EEG?
224	SH31_LUMBAR_PUNCTURE	Num	8	Laboratory Exam of Dementia, Lumbar puncture?
225	SH31_ANGIOGRAM	Num	8	Laboratory Exam of Dementia, Angiogram/DSA?
226	SH31_PSYCHOLOGICAL_TESTS	Num	8	Laboratory Exam of Dementia, Psychological testing?
227	SH31_OTHER_DSMIII_CRITERIA	Num	8	Does patient have at least one criteria (impaired abstract, impair judgement, other)?
228	SH31_MEETS_DSMIII_CRITERIA	Num	8	Does patient meet all DSM III criteria for dementia?
229	SH31_PSEUDODEMENTIA	Num	8	Are pseudodementia and/or depression appearing to make a significant contribution to mental disturbance?
230	SH31_TREATABLE_CAUSE	Num	8	Is there a potential treatable cause for dementia?
231	SH31_ASSOCIATED_OTHER_NEURO	Num	8	Is the dementia associated with other neurological diseases?
232	SH31_NON_NEURO_CAUSE	Num	8	Is there any other non-neurological cause for dementia?
233	SH31_DEMENTIA_CAUSE	Num	8	Probable cause of dementia?
234	SH31_DEMENTIA_PRESENT	Num	8	Is dementia present?
235	SH31_DEMENTIA_TYPE_V2	Num	8	Type of dementia (versions 2 & 3)
236	SH31_DATE_FINAL_CODING	Num	8	Date of final coding (in days from randomization)
237	SH31_MINI_SUM_MAX_SCORES	Num	8	Sum of maximum scores for scored Mini-Mental State exam tasks
238	SH31_MINI_CORRECTED_SCORE	Num	8	Corrected score for Mini-Mental State exam

Data Set Name: sh32.sas7bdat

Num	Variable	Type	Len	Label
1	SH32_RECORD_LENGTH	Num	8	SH32 Record Length
2	SH32_KEYPUNCH_CODE	Num	8	SH32 Keypuncher Code
3	SH32_BATCHDATE	Num	8	SH32 Batch Date
4	SH32_VERIFYER_CODE	Num	8	SH32 Verifyer Code
5	SH32_DATE_LAST_MODIFIED	Num	8	SH32 Date record was last modified
6	SH32_TIME_LAST_MODIFIED	Num	8	SH32 Time record was last modified
7	SH32_EDIT_STATUS_CODE	Num	8	SH32 Edit status code
8	SHEPID	Num	8	SHEP ID
9	FORMNUM	Num	8	Form number
10	SH32_VERSNNUM	Num	8	SH32 Version number
11	SH32_VISITDATE	Num	8	Date of clinic visit (in days from randomization)
12	SH32_SEQUENCE	Num	8	SH32 sequence number
13	ACROSTIC	Num	8	Acrostic
14	SH32_VISIT_SEQNUM	Num	8	Clinic visit sequence number
15	SH32_SHORTCARE_DATE	Num	8	Date of SHORTCARE evaluation (in days from randomization)
16	SH32_Q5	Num	8	Dysphoric mood or loss of interest in usual activities or past times
17	SH32_Q5A	Num	8	Mood is characterized by symptoms such as depression, sad, blue, etc.
18	SH32_Q5B	Num	8	Mood disturbance is prominent and relatively persistent
19	SH32_Q6A	Num	8	Poor appetite with weight loss or increased appetite with weight gain
20	SH32_Q6B	Num	8	Insomnia or hypersomnia
21	SH32_Q6C	Num	8	Psychomotor agitation or retardation
22	SH32_Q6D	Num	8	Loss of interest/pleasure in sexual activities or decrease in sexual drive
23	SH32_Q6E	Num	8	Loss of energy or fatigue
24	SH32_Q6F	Num	8	Feelings of worthlessness, self-reproach or excessive/inappropriate guilt
25	SH32_Q6G	Num	8	Complaints or evidence of diminished ability to think or concentrate
26	SH32_Q6H	Num	8	Recurrent thoughts of death, suicidal indication, wishes to be dead or suicide attempt
27	SH32_Q7A	Num	8	Preoccupation with a mood, delusion or hallucination
28	SH32_Q7B	Num	8	Bizarre behavior
29	SH32_Q8	Num	8	Not superimposed upon either schizophrenia, schizophreniform or paranoid disorder
30	SH32_Q9	Num	8	Not due to any organic mental disorder or uncomplicated bereavement
31	SH32_Q10	Num	8	In your opinion, does this participant have depression?
32	SH32_COMPLETER_CODE	Num	8	Code for completer of SH32
33	SH32_RECORD_TYPE	Num	8	SH32 Record Type
34	SH32_DATE_RECEIVED	Num	8	SH32 Date Tape Received from Metpath Lab
35	SH32_UPDATE_NUMBER	Num	8	SH32 Update Number

Num	Variable	Type	Len	Label
36	SH32_DATE_LAST_PROCESSED	Num	8	SH32 Date Last Processed
37	SH32_PAPER_COPY	Num	8	SH32 Paper Copy
38	SH32_CROSS_FORM_EDITS	Num	8	SH32 Cross Form Edits

Data Set Name: sh33.sas7bdat

Num	Variable	Type	Len	Label
1	SH33_RECORD_LENGTH	Num	8	SH33 Record Length
2	SH33_KEYPUNCH_CODE	Num	8	SH33 Keypuncher Code
3	SH33_BATCHDATE	Num	8	SH33 Batch Date
4	SH33_VERIFYER_CODE	Num	8	SH33 Verifyer Code
5	SH33_DATE_LAST_MODIFIED	Num	8	SH33 Date record was last modified
6	SH33_TIME_LAST_MODIFIED	Num	8	SH33 Time record was last modified
7	SH33_EDIT_STATUS_CODE	Num	8	SH33 Edit status code
8	SHEPID	Num	8	SHEP ID
9	FORMNUM	Num	8	Form number
10	SH33_VERSNNUM	Num	8	SH33 Version number
11	SH33_DATE	Num	8	Date of completion (in days from randomization)
12	SH33_SEQUENCE	Num	8	SH33 sequence number
13	ACROSTIC	Num	8	Acrostic
14	SH33_VISIT_TYPE	Num	8	Visit type (Baseline/Annual)
15	SH33_ANNUAL_VISIT_YR	Num	8	If Annual visit, which annual visit?
16	SH33_WALK_SMROOM_HELP	Num	8	At present time, do you need help to walk across a small room?
17	SH33_WALK_SMROOM_HELP_TYPE	Num	8	Do you need help from a person, special equipment or both to walk across a small room?
18	SH33_WALK_SMROOM_DIFF_LVL	Num	8	On average, how much difficulty do you have walking across a small room?
19	SH33_BATHING_HELP	Num	8	At present time, do you need help bathing?
20	SH33_BATHING_HELP_TYPE	Num	8	Do you need help from a person, special equipment or both to bath?
21	SH33_BATHING_DIFF_LVL	Num	8	On average, how much difficulty do you have bathing?
22	SH33_GROOMING_HELP	Num	8	At present time, do you need help grooming?
23	SH33_GROOMING_HELP_TYPE	Num	8	Do you need help from a person, special equipment or both to groom?
24	SH33_GROOMING_DIFF_LVL	Num	8	On average, how much difficulty do you have grooming?
25	SH33_DRESSING_HELP	Num	8	At present time, do you need help dressing?
26	SH33_DRESSING_HELP_TYPE	Num	8	Do you need help from a person, special equipment or both to get dressed?
27	SH33_DRESSING_DIFF_LVL	Num	8	On average, how much difficulty do you have dressing?
28	SH33_EATING_HELP	Num	8	At present time, do you need help eating?
29	SH33_EATING_HELP_TYPE	Num	8	Do you need help from a person, special equipment or both to eat?
30	SH33_EATING_DIFF_LVL	Num	8	On average, how much difficulty do you have eating?
31	SH33_GETTING_UP_HELP	Num	8	At present time, do you need help getting out of bed to a chair?
32	SH33_GETTING_UP_HELP_TYPE	Num	8	Do you need help from a person, special equipment or both to get from bed to chair?
33	SH33_GETTING_UP_DIFF_LVL	Num	8	On average, how much difficulty do you have getting from bed to a chair?
34	SH33_TOILET_HELP	Num	8	At present time, do you need help using the toilet?

Num	Variable	Type	Len	Label
35	SH33_TOILET_HELP_TYPE	Num	8	Do you need help from a person, special equipment or both to use the toilet?
36	SH33_TOILET_HELP_DIFF_LVL	Num	8	On average, how much difficulty do you have using the toilet?
37	SH33_HEAVY_WORK	Num	8	Are you ABLE to do heavy work around the house, like washing windows, walls, floors without help?
38	SH33_WALK_STAIRS	Num	8	Are you ABLE to walk up and down stairs to the second floor without help?
39	SH33_WALK_HALF_MILE	Num	8	Are you ABLE to walk half a mile (8 blocks) without help?
40	SH33_PULL_PUSH_LG_OBJS	Num	8	How much difficulty do you have pulling/pushing large objects (e.g. living room chair)?
41	SH33_KNEELING	Num	8	How much difficulty do you have stooping, crouching or kneeling?
42	SH33_CARRY_LT10LBS	Num	8	How much difficulty do you have lifting or carrying weights under 10 pounds?
43	SH33_EXTENDING_ARMS	Num	8	How much difficulty do you have reaching or extending your arms above shoulder level?
44	SH33_WRITING	Num	8	How much difficulty do you have writing or handling small objects?
45	SH33_ALL_ITEMS_READ	Num	8	Were all items in SH33 questionnaire read or was questionnaire not completed?
46	SH33_RESPONSES_FROM	Num	8	From who were responses obtained?
47	SH33_VALIDITY	Num	8	How would you rate the overall validity of the responses that were obtained?
48	SH33_FACTORS_NON_COMPLETION	Num	8	Did anything in particular contribute to non-completion or adversely effect quality of interview?
49	SH33_FACTORS_HEARING	Num	8	Did hearing problem effect completion?
50	SH33_FACTORS_LANGUAGE	Num	8	Did language difficulty effect completion?
51	SH33_FACTORS_CONFUSION	Num	8	Did mental confusion effect completion?
52	SH33_FACTORS_HOSTILE	Num	8	Did hostile attitude effect completion?
53	SH33_FACTORS_LACKINTEREST	Num	8	Did lack of interest effect completion?
54	SH33_FACTORS_FATIGUE	Num	8	Did fatigue effect completion?
55	SH33_FACTORS_PROXY	Num	8	Did pariticipant's proxy effect completion?
56	SH33_FACTORS_NOISE	Num	8	Did noise/interruptions effect completion?
57	SH33_FACTORS_TIME_PRESSURE	Num	8	Did time pressure effect completion?
58	SH33_FACTORS_OTHER	Num	8	Did other factors effect completion?
59	SH33_INTERVIEWER_CODE	Num	8	Code of person conducting SH33 interview
60	SH33_RECORD_TYPE	Num	8	SH33 Record Type
61	SH33_DATE_RECEIVED	Num	8	SH33 Date Tape Received from Metpath Lab
62	SH33_UPDATE_NUMBER	Num	8	SH33 Update Number
63	SH33_DATE_LAST_PROCESSED	Num	8	SH33 Date Last Processed
64	SH33_PAPER_COPY	Num	8	SH33 Paper Copy
65	SH33_CROSS_FORM_EDITS	Num	8	SH33 Cross Form Edits

Data Set Name: sh34.sas7bdat

Num	Variable	Type	Len	Label
1	SH34_RECORD_LENGTH	Num	8	SH34 Record Length
2	SH34_KEYPUNCH_CODE	Num	8	SH34 Keypuncher Code
3	SH34_BATCHDATE	Num	8	SH34 Batch Date
4	SH34_VERIFYER_CODE	Num	8	SH34 Verifyer Code
5	SH34_DATE_LAST_MODIFIED	Num	8	SH34 Date record was last modified
6	SH34_TIME_LAST_MODIFIED	Num	8	SH34 Time record was last modified
7	SH34_EDIT_STATUS_CODE	Num	8	SH34 Edit status code
8	SHEPID	Num	8	SHEP ID
9	FORMNUM	Num	8	Form number
10	SH34_VERSNNUM	Num	8	SH34 Version number
11	SH34_DATE	Num	8	Date Social Network Questionnaire was completed (in days from randomization)
12	SH34_SEQUENCE	Num	8	SH34 sequence number
13	ACROSTIC	Num	8	Acrostic
14	SH34_VISIT_TYPE	Num	8	Visit type
15	SH34_ANNUAL_VISIT_YR	Num	8	If Annual visit, what year annual visit?
16	SH34_MARITAL_STATUS	Num	8	Are you now married, widowed, divorced, separated or never married?
17	SH34_FAMILY_FINANCES	Num	8	Who is responsible for handling family finances?
18	SH34_CLEAN_HOUSE	Num	8	Who is responsible for cleaning the house?
19	SH34_TRACK_APPTS	Num	8	Who is responsible for keeping track of medical appointments?
20	SH34_HEALTH_MATTERS	Num	8	Who is responsible for taking care of health matters in the family?
21	SH34_CHILDREN_NUM	Num	8	How many living children do you have?
22	SH34_CHILDREN_WITHIN1HR	Num	8	How many of your children live within an hour of you?
23	SH34_CHILDREN_SEE_EACHWK	Num	8	How many of your children do you see at least once a week?
24	SH34_CHILDREN_PHONE_EACHWK	Num	8	How many of your children do you talk to on the phone at least once per week?
25	SH34_CHILDREN_CLOSE	Num	8	How many of your children do you feel very close to?
26	SH34_CHILDREN_SEE_MORE	Num	8	Would you like to see your children more often, about the same or less often than you do now?
27	SH34_PARENTS_GIVE_GIFTS	Num	8	Do you help your children by giving them gifts?
28	SH34_PARENTS_HELP_MONEY	Num	8	Do you help your children with money?
29	SH34_PARENTS_HELP_ILL	Num	8	Do you help your children when someone is ill?
30	SH34_PARENTS_HELP_HOUSE	Num	8	Do you help your children keep or fix things around the house?
31	SH34_PARENTS_HELP_GRANDKIDS	Num	8	Do you help your children by babysitting grandchildren?
32	SH34_CHILDREN_HELP_ILL	Num	8	Do your children help you when you (or your spouse) are ill?
33	SH34_CHILDREN_GIVE_GIFTS	Num	8	Do your children help you by giving you gifts?
34	SH34_CHILDREN_SHOP	Num	8	Do your children help by shopping or running errands for you?

Num	Variable	Type	Len	Label
35	SH34_CHILDREN_KEEP_HOUSE	Num	8	Do your children help keep/fix things around the house for you?
36	SH34_CHILDREN_HELP_MONEY	Num	8	Do your children help you with money?
37	SH34_CHILDREN_PREP_MEALS	Num	8	Do your children prepare meals for you?
38	SH34_CHILDREN_DRIVE	Num	8	Do your children drive you places (doctor,shopping,church)?
39	SH34_RELATIVES_CLOSE	Num	8	In general, how many relatives do you have that you feel close to (excluding children)?
40	SH34_RELATIVES_WITH1HR	Num	8	Of these close relatives, how many live within an hour of you?
41	SH34_RELATIVES_SEE_EACHMO	Num	8	How many close relatives do you see at least once a month?
42	SH34_RELATIVES_PHONE	Num	8	How many close relatives do you correspond with (phone or letter) a few times a year?
43	SH34_FRIENDS_CLOSE	Num	8	In general, how many close friends do you have?
44	SH34_FRIENDS_WITH1HR	Num	8	Of these close friends, how many live within an hour of you?
45	SH34_FRIENDS_SEE_EACHMO	Num	8	How many close friends do you see at least once a month?
46	SH34_FRIENDS_PHONE	Num	8	How many close friends do you exchange letters or calls a few times a year?
47	SH34_FRIENDS_LENGTH	Num	8	How long have you known most of your close friends?
48	SH34_INTIMATE_PERSON	Num	8	Is there a special person you know that you feel very close and intimate with?
49	SH34_INTIMATE_PERSON_SEE	Num	8	How often do you get together with this intimate person?
50	SH34_INTIMATE_PERSON_PHONE	Num	8	How often do you talk on the phone with this intimate person?
51	SH34_PERSON_FOR_HELP	Num	8	When you need some extra help, can you count on anyone to help with daily tasks?
52	SH34_MOSTHELP_PASTYR_SPOUSE	Num	8	Over the past year, Spouse has been most helpful with daily tasks
53	SH34_MOSTHELP_PASTYR_DAUGHTER	Num	8	Over the past year, Daughter has been most helpful with daily tasks
54	SH34_MOSTHELP_PASTYR_SON	Num	8	Over the past year, Son has been most helpful with daily tasks
55	SH34_MOSTHELP_PASTYR_SIBLING	Num	8	Over the past year, Siblings have been most helpful with daily tasks
56	SH34_MOSTHELP_PASTYR_OTHERREL	Num	8	Over the past year, Other relatives have been most helpful with daily tasks
57	SH34_MOSTHELP_PASTYR_NEIGHBOR	Num	8	Over the past year, Neighbors have been most helpful with daily tasks
58	SH34_MOSTHELP_PASTYR_COWORKER	Num	8	Over the past year, Co-workers have been most helpful with daily tasks
59	SH34_MOSTHELP_PASTYR_CHURCHMEM	Num	8	Over the past year, Church members have been most helpful with daily tasks
60	SH34_MOSTHELP_PASTYR_CLUBMEM	Num	8	Over the past year, Club members have been most helpful with daily tasks
61	SH34_MOSTHELP_PASTYR_PROS	Num	8	Over the past year, Professionals have been most helpful with daily tasks
62	SH34_MOSTHELP_PASTYR_FRIENDS	Num	8	Over the past year, Friends (not included in other categories) have been most helpful with daily tasks
63	SH34_MOSTHELP_PASTYR_NO_ONE	Num	8	Over the past year, No one has been most helpful with daily tasks
64	SH34_USE_MORE_HELP	Num	8	Could you have used more help with daily tasks than you received?

Num	Variable	Type	Len	Label
65	SH34_EMOTIONAL_SUPPORT	Num	8	Can you count on anyone to provide you with emotional support?
66	SH34_EMOTIONAL_PASTYR_SPOUSE	Num	8	Over the past year, Spouse has been most helpful providing emotional support
67	SH34_EMOTIONAL_PASTYR_DAUGHTER	Num	8	Over the past year, Daughter has been most helpful providing emotional support
68	SH34_EMOTIONAL_PASTYR_SON	Num	8	Over the past year, Son has been most helpful providing emotional support
69	SH34_EMOTIONAL_PASTYR_SIBLING	Num	8	Over the past year, Siblings have been most helpful providing emotional support
70	SH34_EMOTIONAL_PASTYR_OTHERREL	Num	8	Over the past year, Other relatives have been most helpful providing emotional support
71	SH34_EMOTIONAL_PASTYR_NEIGHBORS	Num	8	Over the past year, Neighbors have been most helpful providing emotional support
72	SH34_EMOTIONAL_PASTYR_COWORKERS	Num	8	Over the past year, Co-workers have been most helpful providing emotional support
73	SH34_EMOTIONAL_PASTYR_CHURCHMEM	Num	8	Over the past year, Church members have been most helpful providing emotional support
74	SH34_EMOTIONAL_PASTYR_CLUBMEM	Num	8	Over the past year, Club members have been most helpful providing emotional support
75	SH34_EMOTIONAL_PASTYR_PROS	Num	8	Over the past year, Professionals have been most helpful providing emotional support
76	SH34_EMOTIONAL_PASTYR_FRIENDS	Num	8	Over the past year, Friends (not included in other categories) have been most helpful providing emotional support
77	SH34_EMOTIONAL_PASTYR_NO_ONE	Num	8	Over the past year, No one has been most helpful providing emotional support
78	SH34_USE_MORE_EMOTIONAL_SUPP	Num	8	Could you have used more emotional support than you received?
79	SH34_FINANCIAL_SUPPORT	Num	8	When you need some extra help financially, can you count on anyone to help?
80	SH34_FINANCIAL_PASTYR_SPOUSE	Num	8	Over the past year, Spouse has been most helpful in offering financial assistance
81	SH34_FINANCIAL_PASTYR_DAUGHTER	Num	8	Over the past year, Daughter has been most helpful in offering financial assistance
82	SH34_FINANCIAL_PASTYR_SON	Num	8	Over the past year, Son has been most helpful in offering financial assistance
83	SH34_FINANCIAL_PASTYR_SIBLING	Num	8	Over the past year, Siblings have been most helpful in offering financial assistance
84	SH34_FINANCIAL_PASTYR_OTHERREL	Num	8	Over the past year, Other relatives have been most helpful in offering financial assistance
85	SH34_FINANCIAL_PASTYR_NEIGHBORS	Num	8	Over the past year, Neighbors have been most helpful in offering financial assistance
86	SH34_FINANCIAL_PASTYR_COWORKERS	Num	8	Over the past year, Co-workers have been most helpful in offering financial assistance
87	SH34_FINANCIAL_PASTYR_CHURCHMEM	Num	8	Over the past year, Church members have been most helpful in offering financial assistance
88	SH34_FINANCIAL_PASTYR_CLUBMEM	Num	8	Over the past year, Club members have been most helpful in offering financial assistance

Num	Variable	Type	Len	Label
89	SH34_FINANCIAL_PASTYR_PROS	Num	8	Over the past year, Professionals have been most helpful in offering financial assistance
90	SH34_FINANCIAL_PASTYR_FRIENDS	Num	8	Over the past year, Friends (not included in other categories) have been most helpful in offering financial assistance
91	SH34_FINANCIAL_PASTYR_NO_ONE	Num	8	Over the past year, No one has been most helpful in offering financial assistance
92	SH34_USE_MORE_FINANCIAL_HELP	Num	8	Could you have used more financial assistance than you received?
93	SH34_NEIGHBORS_FRIENDLY	Num	8	Do you consider your neighbors to be friendly?
94	SH34_NEIGHBORS_VISIT	Num	8	How many neighbors do you know well enough that you visit each other's homes or go out together?
95	SH34_NEIGHBORS_HELP_THEM	Num	8	How often do you help out any of your neighbors with small things (e.g. borrowing a cup of sugar)?
96	SH34_NEIGHBORS_HELP_YOU	Num	8	How often do your neighbors help you out with small things (e.g. borrowing a cup of sugar)?
97	SH34_GROUPS_PARTICIPATE	Num	8	Do you participate in any groups (senior center, church group, etc.)?
98	SH34_GROUPS_INVOLVEMENT	Num	8	Would you say you are very involved, moderately involved or only a little involved in these groups?
99	SH34_ALL_ITEMS_READ	Num	8	Were all items in Social Network Questionnaire (SH34) read or was questionnaire not completed?
100	SH34_RESPONSES_FROM	Num	8	From whom were responses obtained?
101	SH34_VALIDITY	Num	8	How would you rate the overall validity of the responses that were obtained?
102	SH34_FACTORS_NON_COMPLETION	Num	8	Did anything in particular contribute to non-completion or adversely effect overall quality of interview?
103	SH34_FACTORS_HEARING	Num	8	Did hearing problem effect completion?
104	SH34_FACTORS_LANGUAGE	Num	8	Did language difficulty effect completion?
105	SH34_FACTORS_CONFUSION	Num	8	Did mental confusion effect completion?
106	SH34_FACTORS_HOSTILE	Num	8	Did hostile attitude effect completion?
107	SH34_FACTORS_LACKINTEREST	Num	8	Did lack of interest effect completion?
108	SH34_FACTORS_FATIGUE	Num	8	Did fatigue effect completion?
109	SH34_FACTORS_PROXY	Num	8	Did pariticipant's proxy effect completion?
110	SH34_FACTORS_NOISE	Num	8	Did noise/interruptions effect completion?
111	SH34_FACTORS_TIME_PRESSURE	Num	8	Did time pressure effect completion?
112	SH34_FACTORS_OTHER	Num	8	Did other factors effect completion?
113	SH34_INTERVIEWER_CODE	Num	8	Code of person conducting SH34 interview
114	SH34_RECORD_TYPE	Num	8	SH34 Record Type
115	SH34_DATE_RECEIVED	Num	8	SH34 Date Tape Received from Metpath Lab
116	SH34_UPDATE_NUMBER	Num	8	SH34 Update Number
117	SH34_DATE_LAST_PROCESSED	Num	8	SH34 Date Last Processed
118	SH34_PAPER_COPY	Num	8	SH34 Paper Copy
119	SH34_CROSS_FORM_EDITS	Num	8	SH34 Cross Form Edits

Data Set Name: sh35.sas7bdat

Num	Variable	Type	Len	Label
1	SH35_RECORD_LENGTH	Num	8	SH35 Record Length
2	SH35_KEYPUNCH_CODE	Num	8	SH35 Keypuncher Code
3	SH35_BATCHDATE	Num	8	SH35 Batch Date
4	SH35_VERIFYER_CODE	Num	8	SH35 Verifyer Code
5	SH35_DATE_LAST_MODIFIED	Num	8	SH35 Date record was last modified
6	SH35_TIME_LAST_MODIFIED	Num	8	SH35 Time record was last modified
7	SH35_EDIT_STATUS_CODE	Num	8	SH35 Edit status code
8	SHEPID	Num	8	SHEP ID
9	FORMNUM	Num	8	Form number
10	SH35_VERSNNUM	Num	8	SH35 Version number
11	SH35_VISITDATE	Num	8	Date of clinic visit (in days from randomization)
12	SH35_SEQUENCE	Num	8	SH35 sequence number
13	ACROSTIC	Num	8	Acrostic
14	SH35_VISIT_TYPE	Num	8	Type of clinic visit
15	SH35_ANNUAL_VISIT_YR	Num	8	If Annual visit, what year annual visit?
16	SH35_EVAL_DATE	Num	8	Date of Evaluation (in days from randomization)
17	SH35_ANGER_EVAL	Num	8	Anger evaluation refused or not done
18	SH35_UNUSUAL_ANGER_OTHERS	Num	8	Subject has felt unusually angry with others in past month
19	SH35_UNUSUAL_IRRITABILITY	Num	8	Subject admits to being more irritable than usual lately
20	SH35_FREQUENT_HEATED_ARGUMENTS	Num	8	Subject indicates he/she frequently gets into heated arguments
21	SH35_ANGRY_SELF	Num	8	Subject gets angry with self
22	SH35_TRAILMAKING_TASK	Num	8	Trailmaking task refused or not done
23	SH35_TRAILMAKING_A_ACCURATE	Num	8	Trailmaking task sample A accurately performed?
24	SH35_TRAILMAKING_A_SECONDS	Num	8	Trailmaking task sample A, Number of seconds used (max 180)
25	SH35_TRAILMAKING_A_POINTS	Num	8	Trailmaking task sample A, Number of segments completed correctly
26	SH35_TRAILMAKING_A_ERRORS	Num	8	Trailmaking task sample A, Number of missing segments, up to highest number connected
27	SH35_TRAILMAKING_B_ACCURATE	Num	8	Trailmaking task sample B accurately performed?
28	SH35_TRAILMAKING_B_SECONDS	Num	8	Trailmaking task sample B, Number of seconds used (max 240)
29	SH35_TRAILMAKING_B_POINTS	Num	8	Trailmaking task sample B, Number of segments completed correctly
30	SH35_TRAILMAKING_B_ERRORS	Num	8	Trailmaking task sample B, Number of missing segments, up to highest number or letter connected
31	SH35_DIGIT_SYMBOL_SUB	Num	8	Digit-Symbol Substitution refused or not done
32	SH35_SYMBOLS_CORRECT	Num	8	Digit-Symbol Substitution, Number of symbols coded correctly
33	SH35_SYMBOLS_INCORRECT	Num	8	Digit-Symbol Substitution, Number of symbols coded incorrectly
34	SH35_ADDITION_TASK	Num	8	Addition task refused or not done
35	SH35_ADDITION_TOTAL_CORRECT	Num	8	Addition task, Total number correct (max 60)

Num	Variable	Type	Len	Label
36	SH35_FIND_A_TASK	Num	8	Find A's task refused or not done
37	SH35_FIND_A_WORDS_CORRECT	Num	8	Find A's task, Number of words marked correctly (max 100)
38	SH35_BOSTON_NAMING	Num	8	Boston Naming Task refused or not done
39	SH35_BOSTON_TOTAL_CORRECT	Num	8	Boston Naming Task, Total correct
40	SH35_DELAYED_RECOG_SPAN	Num	8	Delayed Recognition Span Task refused or not done
41	SH35_DELAYED_TOTAL_BEFORE_ERR	Num	8	Delayed Recognition Span Task, Total correct before first error
42	SH35_DELAYED_TOTAL_OVERALL	Num	8	Delayed Recognition Span Task, Total correct overall
43	SH35_QUALITY_LIFE	Num	8	Quality of Life Evaluation refused or not completed
44	SH35_QUALITY_WHOLE	Num	8	Quality of Life, How do you feel about life as a whole?
45	SH35_QUALITY_THESE_DAYS	Num	8	Quality of Life, Taking all things together, how would you say things are these days?
46	SH35_QUALITY_OVERALL_HEALTH	Num	8	Quality of Life, for your age, would you say, in general, that your health is excellent, good, fair, poor or bad?
47	SH35_FIRST_RECALL	Num	8	First Recall task refused or not done
48	SH35_FIRST_WORDS_CORRECT	Num	8	First Recall task, Total words correctly recalled
49	SH35_ACTIVITIES	Num	8	Activities evaluation refused or not done
50	SH35_ACTIVITIES_SPORTS	Num	8	In the last month, how often have you participated in active sports or swimming?
51	SH35_ACTIVITIES_WALKS	Num	8	In the last month, how often have you taken walks?
52	SH35_ACTIVITIES_GARDEN	Num	8	In the last month, how often have you done work in the garden/yard?
53	SH35_ACTIVITIES_EXERCISE	Num	8	In the last month, how often have you done physical exercises?
54	SH35_ACTIVITIES_PREP_MEALS	Num	8	In the last month, how often have you prepared meals?
55	SH35_ACTIVITIES_HOBBIES	Num	8	In the last month, how often have you worked at a hobby?
56	SH35_ACTIVITIES_SHOPPING	Num	8	In the last month, how often have you gone out and done some shopping?
57	SH35_ACTIVITIES_MOVIES	Num	8	In the last month, how often have you gone to a movie, restaurant or sporting event?
58	SH35_ACTIVITIES_READ	Num	8	In the last month, how often have you read books, magazines or newspapers?
59	SH35_ACTIVITIES_TV	Num	8	In the last month, how often have you watched TV?
60	SH35_ACTIVITIES_DAYTRIPS	Num	8	In the last month, how often have you taken day trips or overnight trips?
61	SH35_ACTIVITIES_VOLUNTEER	Num	8	In the last month, how often have you done unpaid community/volunteer work?
62	SH35_ACTIVITIES_PAID_COMMUNITY	Num	8	In the last month, how often have you done paid community work?
63	SH35_ACTIVITIES_PLAY_CARDS	Num	8	In the last month, how often have you regularly played cards/games/bingo?
64	SH35_ACTIVITIES_OTHER	Num	8	In the last month, how often have you done other activities?
65	SH35_SECOND_RECALL	Num	8	Second Recall task refused or not done
66	SH35_SECOND_WORDS_CORRECT	Num	8	Second Recall task, Total words recalled correctly
67	SH35_LETTER_SETS	Num	8	Letter Sets task refused or not done
68	SH35_LETTER_CORRECT	Num	8	Letter Sets task, Number marked correctly

Num	Variable	Type	Len	Label
69	SH35_LETTER_INCORRECT	Num	8	Letter Sets task, Number marked incorrectly
70	SH35_LETTER_TOTAL_SCORE	Num	8	Letter Sets task, Total score (# correct - (1/4)(# incorrect))
71	SH35_UNDERSTOOD_QUESTIONS	Num	8	How well do you think participant understood the questions in the tasks?
72	SH35_EFFORT_TASKS	Num	8	How great an effort do you think participant put into the tasks?
73	SH35_NERVOUS_TASKS	Num	8	How nervous do you think the participant was about the tasks?
74	SH35_APPROPRIATE_BEHAVIOR	Num	8	How often was the participant's behavior toward the interviewer and the interviewing situation appropriate?
75	SH35_VISION_IMPAIRED	Num	8	Was the participant's vision impaired to the degree that performance was affected
76	SH35_HEARING_IMPAIRED	Num	8	Was the participant's hearing impaired to the degree that performance was affected
77	SH35_INTERVIEWER_COMMENTS	Num	8	Interviewer's comment
78	SH35_INTERVIEWER_CODE	Num	8	Code of person conducting SH35 interview
79	SH35_RECORD_TYPE	Num	8	SH35 Record Type
80	SH35_DATE_RECEIVED	Num	8	SH35 Date Tape Received from Metpath Lab
81	SH35_UPDATE_NUMBER	Num	8	SH35 Update Number
82	SH35_DATE_LAST_PROCESSED	Num	8	SH35 Date Last Processed
83	SH35_PAPER_COPY	Num	8	SH35 Paper Copy
84	SH35_CROSS_FORM_EDITS	Num	8	SH35 Cross Form Edits

Data Set Name: sh40.sas7bdat

Num	Variable	Type	Len	Label
1	SH40_RECORD_LENGTH	Num	8	SH40 Record Length
2	SH40_KEYPUNCH_CODE	Num	8	SH40 Keypuncher Code
3	SH40_BATCHDATE	Num	8	SH40 Batch Date
4	SH40_VERIFYER_CODE	Num	8	SH40 Verifyer Code
5	SH40_DATE_LAST_MODIFIED	Num	8	SH40 Date record was last modified
6	SH40_TIME_LAST_MODIFIED	Num	8	SH40 Time record was last modified
7	SH40_EDIT_STATUS_CODE	Num	8	SH40 Edit status code
8	SHEPID	Num	8	SHEP ID
9	FORMNUM	Num	8	Form number
10	SH40_VERSNNUM	Num	8	SH40 Version number
11	SH40_VISITDATE	Num	8	Date of clinic visit (in days from randomization)
12	SH40_SEQUENCE	Num	8	SH40 sequence number
13	ACROSTIC	Num	8	Acrostic
14	SH40_VISIT_SEQNUM	Num	8	Clinic visit sequence number
15	SH40_MISSED_MEDS_PAST7DAYS	Num	8	Have you missed taking your SHEP medicines anytime in the past 7 days?
16	SH40_NUM_DAYS_MISSED_MEDS	Num	8	How many times have you missed taking your SHEP medicines in the past 7 days?
17	SH40_MISSED_REASON_UNWELL	Num	8	Dose(s) missed because participant was not feeling well
18	SH40_MISSED_REASON_MADE_ILL	Num	8	Dose(s) missed because the medicines made participant ill
19	SH40_MISSED_REASON_FORGOT	Num	8	Dose(s) missed because participant forgot
20	SH40_MISSED_REASON_AWAY	Num	8	Dose(s) missed because participant was away from home/did not have medicine
21	SH40_MISSED_REASON_RANOUT	Num	8	Dose(s) missed because participant ran out of medicine
22	SH40_MISSED_REASON_DIDNTWANT	Num	8	Dose(s) missed because participant did not want to take medicine
23	SH40_MISSED_REASON_DOCTOR	Num	8	Dose(s) missed because participant's usual doctor told participant to stop taking medicine
24	SH40_MISSED_REASON_OTHER	Num	8	Dose(s) missed for other reasons
25	SH40_MISSED_ACTION_DOUBLE	Num	8	When participant missed a dose, the participant doubled the next dose
26	SH40_MISSED_ACTION_USUAL	Num	8	When participant missed a dose, the participant took the next dose as usual
27	SH40_MISSED_ACTION_REPORT	Num	8	When participant missed a dose, the participant reported the missed dose(s) at next clinic visit
28	SH40_MISSED_ACTION_CALL	Num	8	When participant missed a dose, the participant called SHEP clinic
29	SH40_MISSED_ACTION_RECORD	Num	8	When participant missed a dose, the participant recorded the missed dose(s)
30	SH40_MISSED_ACTION_TOOK_LATER	Num	8	When participant missed a dose, the participant took the missed dose later
31	SH40_STEP1MEDS_TIMESPERDAY	Num	8	How many times a day to you take your C1/C2?
32	SH40_STEP1MEDS_NUMPILLS	Num	8	How many C1/C2 pills do you take each time?

Num	Variable	Type	Len	Label
33	SH40_STEP1MEDS_TIMEOFDAY	Num	8	What time of day do you take the C1/C2?
34	SH40_STEP2MEDS_TIMESPERDAY	Num	8	How many times a day to you take your A1/A2/R?
35	SH40_STEP2MEDS_NUMPILLS	Num	8	How many A1/A2/R pills do you take each time?
36	SH40_STEP2MEDS_TIMEOFDAY	Num	8	What time of day do you take the A1/A2/R?
37	SH40_PILL_COUNT_COMPLETED	Num	8	Was a pill count done at this visit?
38	SH40_STEP1_PILL_COUNT	Num	8	Step 1 pill count result (%, XXX.X)
39	SH40_STEP2_PILL_COUNT	Num	8	Step 2 pill count result (%, XXX.X)
40	SH40_RECORD_TYPE	Num	8	SH40 Record Type
41	SH40_DATE_RECEIVED	Num	8	SH40 Date Tape Received from Metpath Lab
42	SH40_UPDATE_NUMBER	Num	8	SH40 Update Number
43	SH40_DATE_LAST_PROCESSED	Num	8	SH40 Date Last Processed
44	SH40_PAPER_COPY	Num	8	SH40 Paper Copy
45	SH40_CROSS_FORM_EDITS	Num	8	SH40 Cross Form Edits
46	SH40_MISSED_ACTION_OTHER	Num	8	When participant missed a dose, the participant handled it in another manner

Data Set Name: sh41.sas7bdat

Num	Variable	Type	Len	Label
1	SH41_RECORD_LENGTH	Num	8	SH41 Record Length
2	SH41_KEYPUNCH_CODE	Num	8	SH41 Keypuncher Code
3	SH41_BATCHDATE	Num	8	SH41 Batch Date
4	SH41_VERIFYER_CODE	Num	8	SH41 Verifyer Code
5	SH41_DATE_LAST_MODIFIED	Num	8	SH41 Date record was last modified
6	SH41_TIME_LAST_MODIFIED	Num	8	SH41 Time record was last modified
7	SH41_EDIT_STATUS_CODE	Num	8	SH41 Edit status code
8	SHEPID	Num	8	SHEP ID
9	FORMNUM	Num	8	Form number
10	SH41_VERSNNUM	Num	8	SH41 Version number
11	SH41_VISITDATE	Num	8	Date of clinic visit (in days from randomization)
12	SH41_SEQUENCE	Num	8	SH41 sequence number
13	ACROSTIC	Num	8	Acrostic
14	SH41_VISIT_SEQNUM	Num	8	Clinic visit sequence number
15	SH41_UNWELL_SLV	Num	8	Have you felt unwell in any way since your last clinic visit; has anything been bothering you?
16	SH41_DIFFERENT_PROBS_SLV	Num	8	Are any of these problems different from the way things were at your last clinic visit?
17	SH41_DOC_VISIT_SLV	Num	8	Since your last visit, have you seen a doctor for any reason?
18	SH41_HOSP_SLV	Num	8	Since your last visit, have you been in the hospital for any reason?
19	SH41_HOSP_NUMVISITS_SLV	Num	8	How many times have you been in the hospital since your last clinic visit?
20	SH41_HOSP_VISIT1_DATE_SLV	Num	8	Date of admission to hospital (visit #1) (in days from randomization)
21	SH41_HOSP_VISIT1_DAYS_SLV	Num	8	Number of days spent in hospital (visit #1)
22	SH41_HOSP_VISIT2_DATE_SLV	Num	8	Date of admission to hospital (visit #2)
23	SH41_HOSP_VISIT2_DAYS_SLV	Num	8	Number of days spent in hospital (visit #2) (in days from randomization)
24	SH41_HOSP_VISIT3_DATE_SLV	Num	8	Date of admission to hospital (visit #2)
25	SH41_HOSP_VISIT3_DAYS_SLV	Num	8	Number of days spent in hospital (visit #2) (in days from randomization)
26	SH41_NUMBNESS_SLV	Num	8	Since last visit, have you had any sudden feeling of numbess/tingling/loss of feeling in arm, hand, leg, foot or face?
27	SH41_NUMBNESS_NUM	Num	8	How many attacks of such numbness/tingling have you had?
28	SH41_NUMBNESS_LENGTH	Num	8	How long did each of the attacks of numbness/tingling usually last?
29	SH41_PARALYSIS_SLV	Num	8	Since last visit, have you had any sudden attacks of paralysis/loss of use in arm, hand, leg or foot?
30	SH41_PARALYSIS_NUM	Num	8	How many attacks of such paralysis have you had?
31	SH41_PARALYSIS_LENGTH	Num	8	How long did each of the attacks of paralysis usually last?

Num	Variable	Type	Len	Label
32	SH41_LOSSVISION_SLV	Num	8	Since last visit, have you had any sudden loss of eyesight/blurring of vision for short period of time?
33	SH41_LOSSVISION_PART	Num	8	What part of your vision was affected?
34	SH41_LOSSVISION_NUM	Num	8	How many attacks of loss of eyesight/blurring of vision have you had?
35	SH41_LOSSVISION_LENGTH	Num	8	How long did each of the attacks of loss of eyesight usually last?
36	SH41_LOSSSPEECH_SLV	Num	8	Since last visit, have you had any sudden attacks of loss of speech?
37	SH41_LOSSSPEECH_NUM	Num	8	How many attacks of loss of speech have you had?
38	SH41_LOSSSPEECH_LENGTH	Num	8	How long did each of the attacks of loss of speech usually last?
39	SH41_SYMPT_DIZZINESS_SLV	Num	8	Since last visit, have you experienced dizziness?
40	SH41_SYMPT_VERTIGO_SLV	Num	8	Since last visit, have you experienced vertigo?
41	SH41_SYMPT_LOSSBALANCE_SLV	Num	8	Since last visit, have you experienced loss of balance?
42	SH41_SYMPT_DIFFICULTY_WALK_SLV	Num	8	Since last visit, have you experienced difficulty walking?
43	SH41_SYMPT_BLACKOUTS_SLV	Num	8	Since last visit, have you experienced blackouts or fainting?
44	SH41_SYMPT_FREQUENT_FALLS_SLV	Num	8	Since last visit, have you experienced frequent falls?
45	SH41_SYMPT_FREQ	Num	8	About how many total attacks of all of these conditions do you think you ever had?
46	SH41_SYMPT_LENGTH	Num	8	How long did these attack(s) usually last?
47	SH41_STROKE_SLV	Num	8	Since your last visit, have you been told by a doctor or learned that you may have had a stroke?
48	SH41_STOPPED_MEDS_SLV	Num	8	Since your last visit, Have you stopped taking any medications?
49	SH41_INC_DEC_MEDS_SLV	Num	8	Since your last visit, Have you increased or decreased any medications you were taking?
50	SH41_STARTED_MEDS_SLV	Num	8	Since your last visit, Have you started taking any new medications?
51	SH41_BRING_NON_SHEP_MEDS	Num	8	Did the participant bring all non-SHEP medications to the clinic at this visit?
52	SH41_SH42_REQUIRED	Num	8	Is an SH42 required at this visit?
53	SH41_POSITIVE_RESPONSES	Num	8	Are there any positive responses to Questions 5,7,8,9-14 or on the Side Effects form (SH42)?
54	SH41_Q19A_STROKE	Num	8	In the judgment of the SHEP clinician, are any of these postive/abnormal responses a result of a stroke?
55	SH41_Q19B_AMI	Num	8	In the judgment of the SHEP clinician, are any of these postive/abnormal responses a result of an acute myocardial infarction?
56	SH41_Q19C_LVF	Num	8	In the judgment of the SHEP clinician, are any of these postive/abnormal responses a result of left ventricular failure?
57	SH41_Q19D_TIA	Num	8	In the judgment of the SHEP clinician, are any of these postive/abnormal responses a result of a transient ischemic attack?
58	SH41_Q19E_AORTIC_DISSECTION	Num	8	In the judgment of the SHEP clinician, are any of these postive/abnormal responses a result of aortic dissection?
59	SH41_Q19F_CORONARY_BYPASS	Num	8	In the judgment of the SHEP clinician, are any of these postive/abnormal responses a result of coronary artery bypass surgery?
60	SH41_Q19G_AORTIC_ANEURYSM	Num	8	In the judgment of the SHEP clinician, are any of these postive/abnormal responses a result of an aortic aneurysm?
61	SH41_Q19H_FRACTURE	Num	8	In the judgment of the SHEP clinician, are any of these postive/abnormal responses a result of a fracture?

Num	Variable	Type	Len	Label
62	SH41_Q19I_NURSING_HOME	Num	8	In the judgment of the SHEP clinician, are any of these postive/abnormal responses a result of intermediate or skilled nursing home admission?
63	SH41_Q19J_OTHER_HOSPITALIZATION	Num	8	In the judgment of the SHEP clinician, are any of these postive/abnormal responses a result of hospitalization for another reason?
64	SH41_HOSPITALIZED_FOR_Q19	Num	8	Was the participant hospitalized or seen by a physician for any event in question 19?
65	SH41_SHEP_MEDS_CAUSED	Num	8	Does the participant think that any of these conditions are due to the SHEP medications?
66	SH41_COMMENTS	Num	8	Comments
67	SH41_COMPLETER_CODE	Num	8	Code of person completing this form
68	SH41_RECORD_TYPE	Num	8	SH41 Record Type
69	SH41_DATE_RECEIVED	Num	8	SH41 Date Tape Received from Metpath Lab
70	SH41_UPDATE_NUMBER	Num	8	SH41 Update Number
71	SH41_DATE_LAST_PROCESSED	Num	8	SH41 Date Last Processed
72	SH41_PAPER_COPY	Num	8	SH41 Paper Copy
73	SH41_CROSS_FORM_EDITS	Num	8	SH41 Cross Form Edits

Data Set Name: sh42.sas7bdat

Num	Variable	Type	Len	Label
1	SH42_RECORD_LENGTH	Num	8	SH42 Record Length
2	SH42_KEYPUNCH_CODE	Num	8	SH42 Keypuncher Code
3	SH42_BATCHDATE	Num	8	SH42 Batch Date
4	SH42_VERIFYER_CODE	Num	8	SH42 Verifer Code
5	SH42_DATE_LAST_MODIFIED	Num	8	SH42 Date record was last modified
6	SH42_TIME_LAST_MODIFIED	Num	8	SH42 Time record was last modified
7	SH42_EDIT_STATUS_CODE	Num	8	SH42 Edit status code
8	SHEPID	Num	8	SHEP ID
9	FORMNUM	Num	8	Form number
10	SH42_VERSNNUM	Num	8	SH42 Version number
11	SH42_VISITDATE	Num	8	Date of clinic visit to which this form applies (in days from randomization)
12	SH42_SEQUENCE	Num	8	SH42 sequence number
13	ACROSTIC	Num	8	Acrostic
14	SH42_VISIT_SEQNUM	Num	8	Clinic visit sequence number
15	SH42_NUMBNESS_SLV	Num	8	Since last visit, have you had unusual coldness/numbness of hands or feet?
16	SH42_NUMBNESS_NEW	Num	8	Is this coldness/numbness of hands or feet new since last visit?
17	SH42_NUMBNESS_FREQ	Num	8	What is the frequency of this coldness/numbness of hands or feet?
18	SH42_NUMBNESS_SEVERITY	Num	8	What is the severity of this coldness/numbness of hands or feet?
19	SH42_NUMBNESS_FROM_SHEP_MEDS	Num	8	In the opinion of SHEP clinician, is coldness/numbness of hands or feet due to use of SHEP medications?
20	SH42_SKIN_RASH_SLV	Num	8	Since last visit, have you had unusual skin rash or bruising?
21	SH42_SKIN_RASH_NEW	Num	8	Is this skin rash or bruising new since last visit?
22	SH42_SKIN_RASH_FREQ	Num	8	What is the frequency of this skin rash or bruising?
23	SH42_SKIN_RASH_SEVERITY	Num	8	What is the severity of this skin rash or bruising?
24	SH42_SKIN_RASH_FROM_SHEP_MEDS	Num	8	In the opinion of SHEP clinician, is skin rash or bruising due to use of SHEP medications?
25	SH42_SKIN_RASH_PRESENT	Num	8	Is an acute skin rash present on physical exam?
26	SH42_IMBALANCE_SLV	Num	8	Since last visit, have you had feelings of unsteadiness or loss of balance?
27	SH42_IMBALANCE_NEW	Num	8	Is this unsteadness/loss of balance new since last visit?
28	SH42_IMBALANCE_FREQ	Num	8	What is the frequency of this unsteadness/loss of balance?
29	SH42_IMBALANCE_SEVERITY	Num	8	What is the severity of this unsteadness/loss of balance?
30	SH42_IMBALANCE_FROM_SHEP_MEDS	Num	8	In the opinion of SHEP clinician, is unsteadness/loss of balance due to use of SHEP medications?
31	SH42_LIGHTHEADED_SLV	Num	8	Since last visit, have you had faintness or lightheadedness when stand up quickly?

Num	Variable	Type	Len	Label
32	SH42_LIGHTHEADED_NEW	Num	8	Is this faintness or lightheadedness new since last visit?
33	SH42_LIGHTHEADED_FREQ	Num	8	What is the frequency of this faintness or lightheadedness?
34	SH42_LIGHTHEADED_SEVERITY	Num	8	What is the severity of this faintness or lightheadedness?
35	SH42_LIGHTHEADED_FROM_SHEP_MEDS	Num	8	In the opinion of SHEP clinician, is faintness or lightheadedness due to use of SHEP medications?
36	SH42_PASSOUT_SLV	Num	8	Since last visit, have you had loss of consciousness or passing out?
37	SH42_PASSOUT_NEW	Num	8	Is this loss of consciousness/passing out new since last visit?
38	SH42_PASSOUT_FREQ	Num	8	What is the frequency of this loss of consciousness/passing out?
39	SH42_PASSOUT_SEVERITY	Num	8	What is the severity of this loss of consciousness/passing out?
40	SH42_PASSOUT_FROM_SHEP_MEDS	Num	8	In the opinion of SHEP clinician, is loss of consciousness/passing out due to use of SHEP medications?
41	SH42_DROP_IN_BP	Num	8	Is there an observable postural drop in blood pressure?
42	SH42_FALLS_SLV	Num	8	Since last visit, have you had any falls?
43	SH42_FALLS_NEW	Num	8	Are these falls new since last visit?
44	SH42_FALLS_FREQ	Num	8	What is the frequency of these falls?
45	SH42_FALLS_SEVERITY	Num	8	What is the severity of these falls?
46	SH42_FALLS_FROM_SHEP_MEDS	Num	8	In the opinion of SHEP clinician, are these falls due to use of SHEP medications?
47	SH42_FRACTURES_SLV	Num	8	Since last visit, have you had any fractures?
48	SH42_FRACTURES_NEW	Num	8	Are this fractures new since last visit?
49	SH42_FRACTURES_FREQ	Num	8	What is the frequency of these fractures?
50	SH42_FRACTURES_SEVERITY	Num	8	What is the severity of these fractures?
51	SH42_FRACTURES_FROM_SHEP_MEDS	Num	8	In the opinion of SHEP clinician, are fractures due to use of SHEP medications?
52	SH42_FRACTURES_HIP	Num	8	Since last visit, have you had a hip fracture?
53	SH42_FRACTURES_SPINE	Num	8	Since last visit, have you had a spine fracture?
54	SH42_FRACTURES_FOREARM	Num	8	Since last visit, have you had a forearm fracture?
55	SH42_JOINTPAIN_SLV	Num	8	Since last visit, have you had unusual pain in any joints?
56	SH42_JOINTPAIN_NEW	Num	8	Is this unusual pain in joints new since last visit?
57	SH42_JOINTPAIN_FREQ	Num	8	What is the frequency of this unusual pain in joints?
58	SH42_JOINTPAIN_SEVERITY	Num	8	What is the severity of this unusual pain in joints?
59	SH42_JOINTPAIN_FROM_SHEP_MEDS	Num	8	In the opinion of SHEP clinician, is this unusual pain in joints due to use of SHEP medications?
60	SH42_JOINTPAIN_ARTHRITIS	Num	8	Are there physical signs of acute arthritis?
61	SH42_MUSCLEWEAK_SLV	Num	8	Since last visit, have you had any muscle weakness or cramping?
62	SH42_MUSCLEWEAK_NEW	Num	8	Is this muscle weakness/cramping new since last visit?
63	SH42_MUSCLEWEAK_FREQ	Num	8	What is the frequency of this muscle weakness/cramping?
64	SH42_MUSCLEWEAK_SEVERITY	Num	8	What is the severity of this muscle weakness/cramping?
65	SH42_MUSCLEWEAK_FROM_SHEP_MEDS	Num	8	In the opinion of SHEP clinician, is this muscle weakness/cramping due to use of SHEP medications?

Num	Variable	Type	Len	Label
66	SH42_EXCESSTHIRST_SLV	Num	8	Since last visit, have you had excessive thirst?
67	SH42_EXCESSTHIRST_NEW	Num	8	Is this excessive thirst new since last visit?
68	SH42_EXCESSTHIRST_FREQ	Num	8	What is the frequency of this excessive thirst?
69	SH42_EXCESSTHIRST_SEVERITY	Num	8	What is the severity of this excessive thirst?
70	SH42_EXCESSTHIRST_FROM_SHEP_MEDS	Num	8	In the opinion of SHEP clinician, is this excessive thirst due to use of SHEP medications?
71	SH42_LOSSAPPETITE_SLV	Num	8	Since last visit, have you had loss of appetite?
72	SH42_LOSSAPPETITE_NEW	Num	8	Is this loss of appetite new since last visit?
73	SH42_LOSSAPPETITE_FREQ	Num	8	What is the frequency of this loss of appetite?
74	SH42_LOSSAPPETITE_SEVERITY	Num	8	What is the severity of this loss of appetite?
75	SH42_LOSSAPPETITE_FROM_SHEP_MEDS	Num	8	In the opinion of SHEP clinician, is this loss of appetite due to use of SHEP medications?
76	SH42_NAUSEA_SLV	Num	8	Since last visit, have you had nausea or vomitting?
77	SH42_NAUSEA_NEW	Num	8	Is this nausea or vomitting new since last visit?
78	SH42_NAUSEA_FREQ	Num	8	What is the frequency of this nausea or vomitting?
79	SH42_NAUSEA_SEVERITY	Num	8	What is the severity of this nausea or vomitting?
80	SH42_NAUSEA_FROM_SHEP_MEDS	Num	8	In the opinion of SHEP clinician, is this nausea or vomitting due to use of SHEP medications?
81	SH42_INDIGESTION_SLV	Num	8	Since last visit, have you had unusual indigestion?
82	SH42_INDIGESTION_NEW	Num	8	Is this unusual indigestion new since last visit?
83	SH42_INDIGESTION_FREQ	Num	8	What is the frequency of this unusual indigestion?
84	SH42_INDIGESTION_SEVERITY	Num	8	What is the severity of this unusual indigestion?
85	SH42_INDIGESTION_FROM_SHEP_MEDS	Num	8	In the opinion of SHEP clinician, is this unusual indigestion due to use of SHEP medications?
86	SH42_BOWELCHANGE_SLV	Num	8	Since last visit, have you had a change in bowel habits?
87	SH42_BOWELCHANGE_NEW	Num	8	Is this change in bowel habits new since last visit?
88	SH42_BOWELCHANGE_FREQ	Num	8	What is the frequency of this change in bowel habits?
89	SH42_BOWELCHANGE_SEVERITY	Num	8	What is the severity of this change in bowel habits?
90	SH42_BOWELCHANGE_FROM_SHEP_MEDS	Num	8	In the opinion of SHEP clinician, is this change in bowel habits due to use of SHEP medications?
91	SH42_TARRYSTOOL_SLV	Num	8	Since last visit, have you had tarry black stool or red blood in stool?
92	SH42_TARRYSTOOL_NEW	Num	8	Is this tarry black stool or red blood in stool new since last visit?
93	SH42_TARRYSTOOL_FREQ	Num	8	What is the frequency of this tarry black stool or red blood in stool?
94	SH42_TARRYSTOOL_SEVERITY	Num	8	What is the severity of this tarry black stool or red blood in stool?
95	SH42_TARRYSTOOL_FROM_SHEP_MEDS	Num	8	In the opinion of SHEP clinician, is this tarry black or red blood in stool due to use of SHEP medications?
96	SH42_FASTHB_SLV	Num	8	Since last visit, have you had unusually fast heart beat or skipping beats?
97	SH42_FASTHB_NEW	Num	8	Is this unusually fast heart beat or skipping beats new since last visit?

Num	Variable	Type	Len	Label
98	SH42_FASTHB_FREQ	Num	8	What is the frequency of this unusually fast heart beat or skipping beats?
99	SH42_FASTHB_SEVERITY	Num	8	What is the severity of this unusually fast heart beat or skipping beats?
100	SH42_FASTHB_FROM_SHEP_MEDS	Num	8	In the opinion of SHEP clinician, is this unusually fast heart beat or skipping beats due to use of SHEP medications?
101	SH42_SLOWHB_SLV	Num	8	Since last visit, have you had unusually slow heart beat?
102	SH42_SLOWHB_NEW	Num	8	Is this unusually slow heart beat new since last visit?
103	SH42_SLOWHB_FREQ	Num	8	What is the frequency of this unusually slow heart beat?
104	SH42_SLOWHB_SEVERITY	Num	8	What is the severity of this unusually slow heart beat?
105	SH42_SLOWHB_FROM_SHEP_MEDS	Num	8	In the opinion of SHEP clinician, is this unusually slow heart beat due to use of SHEP medications?
106	SH42_CHESTPAIN_SLV	Num	8	Since last visit, have you had episodes of chest pain or heaviness in chest?
107	SH42_CHESTPAIN_NEW	Num	8	Are these episodes of chest pain/heaviness in chest new since last visit?
108	SH42_CHESTPAIN_FREQ	Num	8	What is the frequency of these episodes of chest pain/heaviness in chest?
109	SH42_CHESTPAIN_SEVERITY	Num	8	What is the severity of these episodes of chest pain/heaviness in chest?
110	SH42_CHESTPAIN_FROM_SHEP_MEDS	Num	8	In the opinion of SHEP clinician, are these episodes of chest pain/heaviness in chest due to use of SHEP medications?
111	SH42_ARRHYTHMIA_PRESENT	Num	8	Is an arrhythmia present on physical exam?
112	SH42_HEADACHES_SLV	Num	8	Since last visit, have you had headaches so bad you had to stop what you were doing?
113	SH42_HEADACHES_NEW	Num	8	Are these headaches new since last visit?
114	SH42_HEADACHES_FREQ	Num	8	What is the frequency of these headaches?
115	SH42_HEADACHES_SEVERITY	Num	8	What is the severity of these headaches?
116	SH42_HEADACHES_FROM_SHEP_MEDS	Num	8	In the opinion of SHEP clinician, are these headaches due to use of SHEP medications?
117	SH42_STUFFYNOSE_SLV	Num	8	Since last visit, have you had a stuffy nose?
118	SH42_STUFFYNOSE_NEW	Num	8	Is this stuffy nose new since last visit?
119	SH42_STUFFYNOSE_FREQ	Num	8	What is the frequency of this stuffy nose?
120	SH42_STUFFYNOSE_SEVERITY	Num	8	What is the severity of this stuffy nose?
121	SH42_STUFFYNOSE_FROM_SHEP_MEDS	Num	8	In the opinion of SHEP clinician, is this stuffy nose due to use of SHEP medications?
122	SH42_WHEEZING_SLV	Num	8	Since last visit, have you had a unusual shortness of breath/wheezing?
123	SH42_WHEEZING_NEW	Num	8	Is this unusual shortness of breath/wheezing new since last visit?
124	SH42_WHEEZING_FREQ	Num	8	What is the frequency of this unusual shortness of breath/wheezing?
125	SH42_WHEEZING_SEVERITY	Num	8	What is the severity of this unusual shortness of breath/wheezing?

Num	Variable	Type	Len	Label
126	SH42_WHEEZING_FROM_SHEP_MEDS	Num	8	In the opinion of SHEP clinician, is this unusual shortness of breath/wheezing due to use of SHEP medications?
127	SH42_WHEEZING_BRONCOSPASM	Num	8	Is there evidence for broncospasm on auscultation of the chest?
128	SH42_TIREDNESS_SLV	Num	8	Since last visit, have you had a unusual tiredness/loss of pep?
129	SH42_TIREDNESS_NEW	Num	8	Is this unusual tiredness/loss of pep new since last visit?
130	SH42_TIREDNESS_FREQ	Num	8	What is the frequency of this unusual tiredness/loss of pep?
131	SH42_TIREDNESS_SEVERITY	Num	8	What is the severity of this unusual tiredness/loss of pep?
132	SH42_TIREDNESS_FROM_SHEP_MEDS	Num	8	In the opinion of SHEP clinician, is this unusual tiredness/loss of pep due to use of SHEP medications?
133	SH42_ANKLESSWELL_SLV	Num	8	Since last visit, have you had a swelling of ankles?
134	SH42_ANKLESSWELL_NEW	Num	8	Is this swelling of ankles new since last visit?
135	SH42_ANKLESSWELL_FREQ	Num	8	What is the frequency of this swelling of ankles?
136	SH42_ANKLESSWELL_SEVERITY	Num	8	What is the severity of this swelling of ankles?
137	SH42_ANKLESSWEEL_FROM_SHEP_MEDS	Num	8	In the opinion of SHEP clinician, is this swelling of ankles due to use of SHEP medications?
138	SH42_CHF_PRESENT	Num	8	Is there evidence of CHF on physical exam?
139	SH42_DEPRESSION_SLV	Num	8	Since last visit, have you had a feeling so depressed that it interferes with work, recreation or sleep?
140	SH42_DEPRESSION_NEW	Num	8	Is this depression new since last visit?
141	SH42_DEPRESSION_FREQ	Num	8	What is the frequency of this depression?
142	SH42_DEPRESSION_SEVERITY	Num	8	What is the severity of this depression?
143	SH42_DEPRESSION_FROM_SHEP_MEDS	Num	8	In the opinion of SHEP clinician, is this depression due to use of SHEP medications?
144	SH42_MEMORY_SLV	Num	8	Since last visit, have you had a trouble with memory or concentration?
145	SH42_MEMORY_NEW	Num	8	Is this trouble with memory or concentration new since last visit?
146	SH42_MEMORY_FREQ	Num	8	What is the frequency of this trouble with memory or concentration?
147	SH42_MEMORY_SEVERITY	Num	8	What is the severity of this trouble with memory or concentration?
148	SH42_MEMORY_FROM_SHEP_MEDS	Num	8	In the opinion of SHEP clinician, is this trouble with memory or concentration due to use of SHEP medications?
149	SH42_NIGHTMARES_SLV	Num	8	Since last visit, have you had nightmares?
150	SH42_NIGHTMARES_NEW	Num	8	Are these nightmares new since last visit?
151	SH42_NIGHTMARES_FREQ	Num	8	What is the frequency of these nightmares?
152	SH42_NIGHTMARES_SEVERITY	Num	8	What is the severity of these nightmares?
153	SH42_NIGHTMARES_FROM_SHEP_MEDS	Num	8	In the opinion of SHEP clinician, are thes nightmares due to use of SHEP medications?
154	SH42_SEXACTIVITY_SLV	Num	8	Since last visit, have you had any changes in sexual activity?
155	SH42_SEXACTIVITY_NEW	Num	8	Are these changes in sexual activity new since last visit?
156	SH42_SEXACTIVITY_FREQ	Num	8	What is the frequency of these changes in sexual activity?
157	SH42_SEXACTIVITY_SEVERITY	Num	8	What is the severity of these changes in sexual activity?

Num	Variable	Type	Len	Label
158	SH42_SEXACTIVITY_FROM_SHEP_MEDS	Num	8	In the opinion of SHEP clinician, are these changes in sexual activity due to use of SHEP medications?
159	SH42_SEXACTIVITY_LOI	Num	8	Is the change is sexual activity due to loss of interest?
160	SH42_SEXACTIVITY_FREQ_DECLINE	Num	8	Is the change is sexual activity due to decline in frequency?
161	SH42_SEXACTIVITY_LOE	Num	8	Is the change is sexual activity due to loss of enjoyment?
162	SH42_SEXACTIVITY_FUNC_IMPAIR	Num	8	Is the change is sexual activity due to functional impairment?
163	SH42_SLEEP_SLV	Num	8	Since your last visit, have you had trouble going to sleep/waking up early/getting back to sleep?
164	SH42_SLEEP_NEW	Num	8	Is this trouble going to sleep/waking up early/getting back to sleep new since last visit?
165	SH42_SLEEP_FREQ	Num	8	What is frequency of this trouble going to sleep/waking up early/getting back to sleep?
166	SH42_SLEEP_SEVERITY	Num	8	What is severity of this trouble going to sleep/waking up early/getting back to sleep?
167	SH42_SLEEP_FROM_SHEP_MEDS	Num	8	In the opinion of SHEP clinician, is this trouble going to sleep/waking up early/getting back to sleep due to use of SHEP medications?
168	SH42_NIGHTURINATE_SLV	Num	8	Since your last visit, have you been waking up more frequently at night to urinate?
169	SH42_NIGHTURINATE_NEW	Num	8	Is this waking up more frequently at night to urinate new since last visit?
170	SH42_NIGHTURINATE_FREQ	Num	8	What is frequency of waking up more frequently at night to urinate?
171	SH42_NIGHTURINATE_SEVERITY	Num	8	What is severity of waking up more frequently at night to urinate?
172	SH42_NIGHTURINATE_FROM_SHEP_MEDS	Num	8	In the opinion of SHEP clinician, is this waking up more frequently at night to urinate due to use of SHEP medications?
173	SH42_ANXIETY_SLV	Num	8	Since your last visit, have you had more worry or anxiety than usual?
174	SH42_ANXIETY_NEW	Num	8	Is this increased worry or anxiety new since last visit?
175	SH42_ANXIETY_FREQ	Num	8	What is frequency of increased worry or anxiety?
176	SH42_ANXIETY_SEVERITY	Num	8	What is severity of increased worry or anxiety?
177	SH42_ANXIETY_FROM_SHEP_MEDS	Num	8	In the opinion of SHEP clinician, is this increased worry or anxiety due to use of SHEP medications?
178	SH42_WEAK1SIDE_SLV	Num	8	Since your last visit, have you had weakness/numbness on one side or unexpected difficulties talking/thinking?
179	SH42_WEAK1SIDE_NEW	Num	8	Is this weakness/numbness on one side or unexpected difficulties talking/thinking new since last visit?
180	SH42_WEAK1SIDE_FREQ	Num	8	What is frequency of weakness/numbness on one side or unexpected difficulties talking/thinking?
181	SH42_WEAK1SIDE_SEVERITY	Num	8	What is severity of weakness/numbness on one side or unexpected difficulties talking/thinking?
182	SH42_WEAK1SIDE_FROM_SHEP_MEDS	Num	8	In the opinion of SHEP clinician, is this weakness/numbness on one side or unexpected difficulties talking/thinking due to use of SHEP medications?
183	SH42_STROKE_EVIDENCE	Num	8	Is there evidence of a stroke on physical exam?

Num	Variable	Type	Len	Label
184	SH42_OTHERSYMPTOM_SLV	Num	8	Since your last visit, have you had other relevant symptoms?
185	SH42_OTHERSYMPTOM_NEW	Num	8	Are these other relevant symptoms new since last visit?
186	SH42_OTHERSYMPTOM_FREQ	Num	8	What is frequency of other relevant symptoms?
187	SH42_OTHERSYMPTOM_SEVERITY	Num	8	What is severity of other relevant symptoms?
188	SH42_OTHERSYMPTOM_FROM_SHEP_MEDS	Num	8	In the opinion of SHEP clinician, are these other relevant symptoms due to use of SHEP medications?
189	SH42_OTHER_RELEVANT_SIGNS	Num	8	Are there other revelant signs on physical exam?
190	SH42_RECORD_TYPE	Num	8	SH42 Record Type
191	SH42_DATE_RECEIVED	Num	8	SH42 Date Tape Received from Metpath Lab
192	SH42_UPDATE_NUMBER	Num	8	SH42 Update Number
193	SH42_DATE_LAST_PROCESSED	Num	8	SH42 Date Last Processed
194	SH42_PAPER_COPY	Num	8	SH42 Paper Copy
195	SH42_CROSS_FORM_EDITS	Num	8	SH42 Cross Form Edits

Data Set Name: sh43.sas7bdat

Num	Variable	Type	Len	Label
1	SH43_RECORD_LENGTH	Num	8	SH43 Record Length
2	SH43_KEYPUNCH_CODE	Num	8	SH43 Keypuncher Code
3	SH43_BATCHDATE	Num	8	SH43 Batch Date
4	SH43_VERIFYER_CODE	Num	8	SH43 Verifyer Code
5	SH43_DATE_LAST_MODIFIED	Num	8	SH43 Date record was last modified
6	SH43_TIME_LAST_MODIFIED	Num	8	SH43 Time record was last modified
7	SH43_EDIT_STATUS_CODE	Num	8	SH43 Edit status code
8	SHEPID	Num	8	SHEP ID
9	FORMNUM	Num	8	Form number
10	SH43_VERSNNUM	Num	8	SH43 Version number
11	SH43_VISITDATE	Num	8	Date of clinic visit (in days from randomization)
12	SH43_SEQUENCE	Num	8	SH43 sequence number
13	ACROSTIC	Num	8	Acrostic
14	SH43_VISIT_SEQNUM	Num	8	Clinic visit sequence number
15	SH43_MEDS_TO_PROTOCOL	Num	8	At the last clinic visit, were SHEP medications prescribed in dosages specified in the protocol?
16	SH43_RESULT_DEVIATION_PROTOCOL	Num	8	What has happened with respect to the problem which caused this deviation from protocol?
17	SH43_OTH_SERIOUS_CONDITIONS_SLV	Num	8	Have any other potentially serious conditions arisen since the last visit which are probably a result of use of SHEP medications?
18	SH43_RESTORE_MEDS_TO_PROTOCOL_TV	Num	8	At this visit, do you plan to restore participant to SHEP drugs and doses specified in the protocol?
19	SH43_NOT_RESTORE_SIDE_EFFECTS	Num	8	Reason for not restoring medications to protocol, Side effects judged to be severe enough to deviate
20	SH43_NOT_RESTORE_ESCAPE_BP	Num	8	Reason for not restoring medications to protocol, Participant has reached escape blood pressure and requires deviation
21	SH43_NOT_RESTORE_OTHER	Num	8	Reason for not restoring medications to protocol, Other
22	SH43_DECISION_REPORTED	Num	8	Has this decision already been reported on a Deviation from Protocol form (SH48)?
23	SH43_ABNORMAL_FROM_SHEP_MEDS	Num	8	In the judgment of SHEP clinician, are any of the positive or abnormal results in General Well-Being or Side effects section related to current use of SHEP meds?
24	SH43_DEVIATION_REQUIRED	Num	8	In the judgment of SHEP clinician and physician, do any of these responses require deviation from protocol in prescribing SHEP meds?
25	SH43_CONDITIONS_HARMFUL	Num	8	Are any of these conditions possibly harmful to the participant?
26	SH43_DEVIATION_REASON_OTHER	Num	8	Are there reasons other than those in Q5-Q13 that require a deviation from protocol in prescribing SHEP meds (e.g. interference from other meds)?
27	SH43_Q15A	Num	8	Blood pressure review

Num	Variable	Type	Len	Label
28	SH43_Q15A1_B	Num	8	If answer to Q15A is 1, Is this at least the second consecutive visit at these levels on same dose and step?
29	SH43_Q15A2_B	Num	8	If answer to Q15A is 2, Is this at least the second consecutive visit at these levels on same step and dose?
30	SH43_Q15A4_B	Num	8	If answer to Q15A is 4, Are drugs being stepped down this visit?
31	SH43_Q15A5_B	Num	8	If answer to Q15A is 5, Has escape BP criteria been reached?
32	SH43_Q15C	Num	8	Schedule next visit at earliest interval according to answer in Q15A
33	SH43_STEP1MEDS_LV	Num	8	Type of step 1 medications prescribed at last visit
34	SH43_STEP1MEDS_BOTTLENUM_LV	Num	8	Bottle number of step 1 medications prescribed at last visit
35	SH43_STEP2MEDS_LV	Num	8	Type of step 2 medications prescribed at last visit
36	SH43_STEP2MEDS_BOTTLENUM_LV	Num	8	Bottle number of step 2 medications prescribed at last visit
37	SH43_OPEN_ANTIHYPER_MEDS_LV	Num	8	Were open-label antihypertensive drugs prescribed at last visit?
38	SH43_POTASSIUM_SUPP_LV	Num	8	Was potassium supplement prescribed at last visit?
39	SH43_POTASSIUM_SUPP_DOSE_LV	Num	8	What dose of potassium supplement was prescribed at last visit? (meq/day)
40	SH43_URICACID_LV	Num	8	Was uric acid agent prescribed at last visit?
41	SH43_NOCHANGE_MEDS_TV	Num	8	At this visit, No changes have been made do medicines prescribed
42	SH43_STEP1MEDS_TV	Num	8	Type of step 1 medications prescribed at this visit
43	SH43_STEP1MEDS_BOTTLENUM_TV	Num	8	Bottle number of step 1 medications prescribed at this visit
44	SH43_STEP2MEDS_TV	Num	8	Type of step 2 medications prescribed at this visit
45	SH43_STEP2MEDS_BOTTLENUM_TV	Num	8	Bottle number of step 2 medications prescribed at this visit
46	SH43_OPEN_ANTIHYPER_MEDS_TV	Num	8	Were open-label antihypertensive drugs prescribed at this visit?
47	SH43_POTASSIUM_SUPP_TV	Num	8	Was potassium supplement prescribed at this visit?
48	SH43_POTASSIUM_SUPP_DOSE_TV	Num	8	What dose of potassium supplement was prescribed at this visit? (meq/day)
49	SH43_URICACID_TV	Num	8	Was uric acid agent prescribed at this visit?
50	SH43_CLINICIAN_CODE	Num	8	SH43 Clinician Code
51	SH43_RECORD_TYPE	Num	8	SH43 Record Type
52	SH43_DATE_RECEIVED	Num	8	SH43 Date Tape Received from Metpath Lab
53	SH43_UPDATE_NUMBER	Num	8	SH43 Update Number
54	SH43_DATE_LAST_PROCESSED	Num	8	SH43 Date Last Processed
55	SH43_PAPER_COPY	Num	8	SH43 Paper Copy
56	SH43_CROSS_FORM_EDITS	Num	8	SH43 Cross Form Edits

Data Set Name: sh44.sas7bdat

Num	Variable	Type	Len	Label
1	SH44_RECORD_LENGTH	Num	8	SH44 Record Length
2	SH44_KEYPUNCH_CODE	Num	8	SH44 Keypuncher Code
3	SH44_BATCHDATE	Num	8	SH44 Batch Date
4	SH44_VERIFYER_CODE	Num	8	SH44 Verifyer Code
5	SH44_DATE_LAST_MODIFIED	Num	8	SH44 Date record was last modified
6	SH44_TIME_LAST_MODIFIED	Num	8	SH44 Time record was last modified
7	SH44_EDIT_STATUS_CODE	Num	8	SH44 Edit status code
8	SHEPID	Num	8	SHEP ID
9	FORMNUM	Num	8	Form number
10	SH44_VERSNNUM	Num	8	SH44 Version number
11	SH44_NEXT_VISITDATE	Num	8	Date of next clinic visit (in days from randomization)
12	SH44_SEQUENCE	Num	8	SH44 sequence number
13	ACROSTIC	Num	8	Acrostic
14	SH44_NEXT_VISIT_TIME_HR	Num	8	Time of next clinic visit (hour)
15	SH44_NEXT_VISIT_TIME_MIN	Num	8	Time of next clinic visit (minutes)
16	SH44_NEXT_VISIT_TIME_PD	Num	8	Time period of next clinic visit (am/pm)
17	SH44_DOC_HIGHBP_PASTYR	Num	8	In the past year, has a doctor told you that you had high blood pressure severe enough to lead to hospitalization?
18	SH44_DOC_HEART_ATTACK_PASTYR	Num	8	In the past year, has a doctor told you that you had a heart attack (myocardial infarction, coronary occlusion or coronary thrombosis)?
19	SH44_DOC_ANGINA_PASTYR	Num	8	In the past year, has a doctor told you that you had angina?
20	SH44_DOC_OTH_HEART_PROBS_PASTYR	Num	8	In the past year, has a doctor told you that you had other heart problems?
21	SH44_DOC_STROKE_PASTYR	Num	8	In the past year, has a doctor told you that you had a stroke (cerebrovascular accident, CVA)?
22	SH44_DOC_MEMORY_PROBS_PASTYR	Num	8	In the past year, has a doctor told you that you had memory problems or other brain problems?
23	SH44_DOC_DIABETES_PASTYR	Num	8	In the past year, has a doctor told you that you had diabetes (high blood or urine sugar)?
24	SH44_DOC_GOUT_PASTYR	Num	8	In the past year, has a doctor told you that you had gout?
25	SH44_DOC_CANCER_PASTYR	Num	8	In the past year, has a doctor told you that you had cancer
26	SH44_DOC_OTHER_DISEASES_PASTYR	Num	8	In the past year, has a doctor told you that you had another major disease?
27	SH44_Q11A	Num	8	How many days in the past two weeks have you had to substantially reduce social activities outside of home (meetings, shopping) because you did not feel well?
28	SH44_Q11B	Num	8	How many days in the past two weeks have you had to substantially reduce major work at home (cleaning, laundry) because you did not feel well?

Num	Variable	Type	Len	Label
29	SH44_Q11C	Num	8	How many days in the past two weeks have you had to substantially reduce ordinary work at home (cooking, dressing) because you did not feel well?
30	SH44_Q11D	Num	8	How many days in the past two weeks did you spend most of the day in bed because you did not feel well?
31	SH44_CHEST_PAIN_PASTYR	Num	8	In the past year, have you had any pain or discomfort in your chest?
32	SH44_CHEST_PRESSURE_PASTYR	Num	8	In the past year, have you had any pressure or heaviness in your chest?
33	SH44_CHEST_PAIN_WALK_UPHILL	Num	8	Do you get his pain/discomfort/pressure/heaviness when you walk uphill or hurry?
34	SH44_CHEST_PAIN_WALK_LEVEL	Num	8	Do you get his pain/discomfort/pressure/heaviness when you walk at ordinary pace on level ground?
35	SH44_CHEST_PAIN_DO_ONSET	Num	8	What do you do when you get this pain/discomfort/pressure/heaviness when you are walking?
36	SH44_CHEST_PAIN_GO_AWAY	Num	8	Does this pain/discomfort/pressure/heaviness go away when you stand still?
37	SH44_CHEST_PAIN_HOW_SOON	Num	8	How long does it take this pain/discomfort/pressure/heaviness to go away when stand still?
38	SH44_CHEST_PAIN_LOCATION1	Num	8	Do you get pain/discomfort/pressure/heaviness in Location 1?
39	SH44_CHEST_PAIN_LOCATION2	Num	8	Do you get pain/discomfort/pressure/heaviness in Location 2?
40	SH44_CHEST_PAIN_LOCATION3	Num	8	Do you get pain/discomfort/pressure/heaviness in Location 3?
41	SH44_Q13	Num	8	In the past year, have you had a severe pain across the front of your chest lasting for half an hour or more?
42	SH44_HEART_ATTACK_PASTYR	Num	8	Have you had a heart attack (myocardial infarction, coronary thrombosis) in the past year?
43	SH44_HEART_ATTACK_HOSP	Num	8	Were you hospitalized for any heart attacks in the past year?
44	SH44_HEART_ATTACK_NUM	Num	8	How many such heart attacks have you had?
45	SH44_LEG_PAIN_WALK	Num	8	Do you get a pain in either leg on walking?
46	SH44_LEG_PAIN_STAND_SIT	Num	8	Do this leg pain ever being when you are standing still or sitting?
47	SH44_LEG_PAIN_CALF	Num	8	Do you get this leg pain in your calf (or calves)?
48	SH44_LEG_PAIN_WALK_UPHILL	Num	8	Do you get this leg pain when you walk uphill or hurry?
49	SH44_LEG_PAIN_WALK_LEVEL	Num	8	Do you get this leg pain when you walk at an ordinary pace on level ground?
50	SH44_LEG_PAIN_DISAPPEAR_WALK	Num	8	Does this leg pain ever disappear while you are still walking?
51	SH44_LEG_PAIN_DO_ONSET	Num	8	What do you do if you get this leg pain while you are walking?
52	SH44_LEG_PAIN_GO_AWAY	Num	8	Does this leg pain go away when you stand still?
53	SH44_LEG_PAIN_HOW_SOON	Num	8	How soon after you stand still does this leg pain go away?
54	SH44_COUGH_WINTER_MORN	Num	8	Do you usually cough first thing in the morning in the winter?
55	SH44_COUGH_WINTER	Num	8	Do you usually cough during the day or at night in winter?
56	SH44_COUGH_3MOS_PERYR	Num	8	Do you cough like this on most days for as much as 3 months each year?
57	SH44_COUGH_PHLEGM_WINTER_MORN	Num	8	Do you usually bring up any phlegm (mucus) from your chest first thing in the morning in winter?

Num	Variable	Type	Len	Label
58	SH44_COUGH_PHLEGM_WINTER	Num	8	Do you usually bring up any phlegm from your chest during the day or at night in winter?
59	SH44_COUGH_PHLEGM_3MOS_PERYR	Num	8	Do you bring up phlegm like this on most days for as much as 3 months per year?
60	SH44_COUGH_GE3WKS_PASTYR	Num	8	In the past year, have you had a period of increased cough and phlegm lasting for 3 weeks or more?
61	SH44_SOB_WALK_UPHILL	Num	8	Are you troubled by shortness of breath when hurrying on level ground or walking up a slight hill?
62	SH44_SOB_WALK_LEVEL	Num	8	Do you get short of breat walking with other people your own age on level ground?
63	SH44_WAKE_GASPING	Num	8	Do you ever wake up at night gasping for breath?
64	SH44_SOB_2PILLOWS	Num	8	Do you get short of breath at night unless you sleep on two or more pillows?
65	SH44_ASTHMA_EVER	Num	8	Have you ever had asthma?
66	SH44_ASTHMA_ATTACKS_PASTYR	Num	8	Have you had any asthma attacks in the past year?
67	SH44_ASTHMA_MEDS	Num	8	Do you take medication to control or treat asthma?
68	SH44_NUMBNESS_PASTYR	Num	8	In the past year, have you had any sudden feeling of numbness, tingling or loss of feeling in either arm, hand, leg, foot or face?
69	SH44_NUMBNESS_NUM	Num	8	How many attacks of such numbness or tingling have you had in the past year?
70	SH44_NUMBNESS_LENGTH	Num	8	How long did the numbness/tingling attack(s) usually last?
71	SH44_NUMBNESS_DOCTOR	Num	8	Did you see the doctor for the numbness, tingling or loss of feeling?
72	SH44_PARALYSIS_PASTYR	Num	8	In the past year, have you had any sudden attacks of paralysis or loss of use of either arm, hand, leg or foot?
73	SH44_PARALYSIS_NUM	Num	8	How many attacks of such paralysis have you had in the past year?
74	SH44_PARALYSIS_LENGTH	Num	8	How long did the paralysis attack(s) usually last?
75	SH44_PARALYSIS_DOCTOR	Num	8	Did you see the doctor for this paralysis?
76	SH44_LOSSVISION_PASTYR	Num	8	In the past year, have you had any sudden loss of eyesight or blurring of vision for a short period of time?
77	SH44_LOSSVISION_PART	Num	8	What part of your vision was affected?
78	SH44_LOSSVISION_NUM	Num	8	How many attacks of loss of eyesight or blurring of vision have you had in the past year?
79	SH44_LOSSVISION_LENGTH	Num	8	How long did the loss of eyesight or blurring vision attack(s) usually last?
80	SH44_LOSSVISION_DOCTOR	Num	8	Did you see a doctor for this vision problem?
81	SH44_LOSSSPEECH_PASTYR	Num	8	In the past year, have you had any sudden attacks of changes in speech, loss of speech or inability to say words?
82	SH44_LOSSSPEECH_NUM	Num	8	How many attacks of loss of speech have you had in the past year?
83	SH44_LOSSSPEECH_LENGTH	Num	8	How long did the loss of speech attack(s) usually last?
84	SH44_LOSSSPEECH_DOCTOR	Num	8	Did you see a doctor for your speech problem?
85	SH44_Q22_DIZZINESS_PASTYR	Num	8	In the past year, have you experienced dizziness?
86	SH44_Q22_VERTIGO_PASTYR	Num	8	In the past year, have you experienced vertigo?
87	SH44_Q22_LOSSBALANCE_PASTYR	Num	8	In the past year, have you experienced loss of balance?

Num	Variable	Type	Len	Label
88	SH44_Q22_DIFFICULTY_WALK_PASTYR	Num	8	In the past year, have you experienced difficulty walking?
89	SH44_Q22_BLACKOUTS_PASTYR	Num	8	In the past year, have you experienced blackouts or fainting?
90	SH44_Q22_FREQUENT_FALLS_PASTYR	Num	8	In the past year, have you experienced frequent falls?
91	SH44_ANSWER_YES_Q22	Num	8	Did you answer 'yes' to any of the problems in question 22?
92	SH44_NUM_ATTACKS_Q22	Num	8	About how many total attacks of all conditions checked do you think you had in the past year?
93	SH44_LENGTH_ATTACKS_Q22	Num	8	How long did these attack(s) of the conditions in q22 usually last?
94	SH44_DOCTOR_Q22	Num	8	Did you see the doctor about any of these conditions (from q22)?
95	SH44_SURGERY_BLOODFLOW_PASTYR	Num	8	In the past year, have you had surgery to improve the blood flow in your arteries or veing (endarterectomy, by-pass)?
96	SH44_SURGERY_NECK_VESSELS	Num	8	Did you have surgery on your neck vessels (carotid artery)?
97	SH44_SURGERY_HEART	Num	8	Did you have surgery on your heart (coronary by-pass)?
98	SH44_SURGERY_AORTA_LEG	Num	8	Did you have surgery on aorta or leg arteries?
99	SH44_HOSPITALIZED_PASTYR	Num	8	Have you been hospitalized for any reason within the past year?
100	SH44_FRACTURE_HIP_PASTYR	Num	8	In the past year, have you had a hip fracture?
101	SH44_FRACTURE_SPINE_PASTYR	Num	8	In the past year, have you had a spine fracture?
102	SH44_FRACTURE_FOREARM_PASTYR	Num	8	In the past year, have you had a forearm fracture?
103	SH44_FALLS_PAST3MOS	Num	8	About how many times would you say that you have fallen to the floor/ground for no obvious reason in the past 3 months?
104	SH44_FALLS_DOCTOR_ATTN	Num	8	Did you have any injury from these falls that required a doctor's attention?
105	SH44_ALLERGIC_REACT_MEDS_PASTYR	Num	8	Has any medicine you may be taking, or have taken in past year, ever caused you to have a skin rash or allergic reaction?
106	SH44_EMPLOYMENT	Num	8	What is your current employment status?
107	SH44_EMPLOYMENT_RETIRE_DATE	Num	8	If retired, when was your last paid employment (20 hours/week or more)? (in months from randomization)
108	SH44_MARITAL	Num	8	What is your current marital status?
109	SH44_SMOKE_CURRENT	Num	8	Do you currently smoke cigarettes?
110	SH44_SMOKE_CIGSPERDAY	Num	8	How many cigarettes do you currently smoke per day?
111	SH44_ALCOHOL_FREQ	Num	8	How often do you drink currently?
112	SH44_ALCOHOL_NUM	Num	8	When you drink alcoholic beverages, how many do you usually drink in a day?
113	SH44_PRESCRIPTION_MEDS	Num	8	Are you taking any medicines that require a prescription from a doctor?
114	SH44_NUM_PRESCRIPTION_MEDS	Num	8	Total number of prescription drugs being taken?
115	SH44_PRESMEDS_STOPPED_PAST2WKS	Num	8	Have you stopped taking any prescription medications in the past two weeks?
116	SH44_PRESMED1_STOPPED_DOCTOR	Num	8	Stopped taking prescription medication #1 because the doctor advised you to stop
117	SH44_PRESMED1_STOPPED_RANOUT	Num	8	Stopped taking prescription medication #1 because the prescription ran out
118	SH44_PRESMED1_STOPPED_BETTER	Num	8	Stopped taking prescription medication #1 because I was felt better

Num	Variable	Type	Len	Label
119	SH44_PRESMED1_STOPPED_REMEMBER	Num	8	Stopped taking prescription medication #1 because I could not remember to take them
120	SH44_PRESMED1_STOPPED_BOTHERED	Num	8	Stopped taking prescription medication #1 because I could not be bothered taking them
121	SH44_PRESMED1_STOPPED_FEELSICK	Num	8	Stopped taking prescription medication #1 because they made me feel sick
122	SH44_PRESMED1_STOPPED_NOTWORKING	Num	8	Stopped taking prescription medication #1 because I did not think they were working
123	SH44_PRESMED1_STOPPED_FRIEND	Num	8	Stopped taking prescription medication #1 because a friend told me to stop
124	SH44_PRESMED1_STOPPED_DONTKNOW	Num	8	Do not know why I stopped taking prescription medication #1
125	SH44_PRESMED1_STOPPED_OTHER	Num	8	Stopped taking prescription medication #1 for other reasons
126	SH44_PRESMED2_STOPPED_DOCTOR	Num	8	Stopped taking prescription medication #2 because the doctor advised you to stop
127	SH44_PRESMED2_STOPPED_RANOUT	Num	8	Stopped taking prescription medication #2 because the prescription ran out
128	SH44_PRESMED2_STOPPED_BETTER	Num	8	Stopped taking prescription medication #2 because I was felt better
129	SH44_PRESMED2_STOPPED_REMEMBER	Num	8	Stopped taking prescription medication #2 because I could not remember to take them
130	SH44_PRESMED2_STOPPED_BOTHERED	Num	8	Stopped taking prescription medication #2 because I could not be bothered taking them
131	SH44_PRESMED2_STOPPED_FEELSICK	Num	8	Stopped taking prescription medication #2 because they made me feel sick
132	SH44_PRESMED2_STOPPED_NOTWORKING	Num	8	Stopped taking prescription medication #2 because I did not think they were working
133	SH44_PRESMED2_STOPPED_FRIEND	Num	8	Stopped taking prescription medication #2 because a friend told me to stop
134	SH44_PRESMED2_STOPPED_DONTKNOW	Num	8	Do not know why I stopped taking prescription medication #2
135	SH44_PRESMED2_STOPPED_OTHER	Num	8	Stopped taking prescription medication #2 for other reasons
136	SH44_PRESMED3_STOPPED_DOCTOR	Num	8	Stopped taking prescription medication #3 because the doctor advised you to stop
137	SH44_PRESMED3_STOPPED_RANOUT	Num	8	Stopped taking prescription medication #3 because the prescription ran out
138	SH44_PRESMED3_STOPPED_BETTER	Num	8	Stopped taking prescription medication #3 because I was felt better
139	SH44_PRESMED3_STOPPED_REMEMBER	Num	8	Stopped taking prescription medication #3 because I could not remember to take them
140	SH44_PRESMED3_STOPPED_BOTHERED	Num	8	Stopped taking prescription medication #3 because I could not be bothered taking them
141	SH44_PRESMED3_STOPPED_FEELSICK	Num	8	Stopped taking prescription medication #3 because they made me feel sick
142	SH44_PRESMED3_STOPPED_NOTWORKING	Num	8	Stopped taking prescription medication #3 because I did not think they were working
143	SH44_PRESMED3_STOPPED_FRIEND	Num	8	Stopped taking prescription medication #3 because a friend told me to stop

Num	Variable	Type	Len	Label
144	SH44_PRESMED3_STOPPED_DONTKNOW	Num	8	Do not know why I stopped taking prescription medication #3
145	SH44_PRESMED3_STOPPED_OTHER	Num	8	Stopped taking prescription medication #3 for other reasons
146	SH44_OTC_MEDS	Num	8	Are you presently taking any medicines or diet supplements that you buy without a prescription?
147	SH44_NUM_OTC_MEDS	Num	8	Total number of non-prescription medicines being taken
148	SH44_CHANGED_MED_CARE_PASTYR	Num	8	In the past year, have you changed where you go for medical care?
149	SH44_OBJECT_BP_TO_USUALCARE	Num	8	Would you object to us sending your blood pressure results to person or clinic that usual supplies your health care?
150	SH44_RECORD_TYPE	Num	8	SH44 Record Type
151	SH44_DATE_RECEIVED	Num	8	SH44 Date Tape Received from Metpath Lab
152	SH44_UPDATE_NUMBER	Num	8	SH44 Update Number
153	SH44_DATE_LAST_PROCESSED	Num	8	SH44 Date Last Processed
154	SH44_PAPER_COPY	Num	8	SH44 Paper Copy
155	SH44_CROSS_FORM_EDITS	Num	8	SH44 Cross Form Edits
156	SH44_LIVE_ALONE	Num	8	Participant currently lives alone
157	SH44_LIVE_SPOUSE	Num	8	Participant currently lives with spouse
158	SH44_LIVE_OTHER_RELATIVES	Num	8	Participant currently lives with other related individuals
159	SH44_LIVE_FRIENDS	Num	8	Participant currently lives with non-related friends
160	SH44_LIVE_PAID_HELP	Num	8	Participant currently lives with non-related paid help

Data Set Name: sh48.sas7bdat

Num	Variable	Type	Len	Label
1	SH48_RECORD_LENGTH	Num	8	SH48 Record Length
2	SH48_KEYPUNCH_CODE	Num	8	SH48 Keypuncher Code
3	SH48_BATCHDATE	Num	8	SH48 Batch Date
4	SH48_VERIFYER_CODE	Num	8	SH48 Verifyer Code
5	SH48_DATE_LAST_MODIFIED	Num	8	SH48 Date record was last modified
6	SH48_TIME_LAST_MODIFIED	Num	8	SH48 Time record was last modified
7	SH48_EDIT_STATUS_CODE	Num	8	SH48 Edit status code
8	SHEPID	Num	8	SHEP ID
9	FORMNUM	Num	8	Form number
10	SH48_VERSNNUM	Num	8	SH48 Version number
11	SH48_VISITDATE	Num	8	Date of clinic visit (in days from randomization)
12	SH48_SEQUENCE	Num	8	SH48 sequence number
13	ACROSTIC	Num	8	Acrostic
14	SH48_VISIT_SEQNUM	Num	8	Sequence number of clinic visit
15	SH48_MEDICATION_STATUS	Num	8	Status of study medications
16	SH48_OPEN_LABEL_MEDS_TV	Num	8	Initiation of open-label therapy at this visit?
17	SH48_REASON	Num	8	Reason
18	SH48_REMAIN_IN_SHEP	Num	8	For drug discontinuations only, is the participant still willing to be followed in SHEP clinic?
19	SH48_VISIT1_DATE	Num	8	Date of clinic visit #1 (in days from randomization)
20	SH48_VISIT1_SYSTBP	Num	8	Systolic blood pressure at clinic visit #1
21	SH48_VISIT1_DIASTBP	Num	8	Diastolic blood pressure at clinic visit #1
22	SH48_VISIT2_DATE	Num	8	Date of clinic visit #2 (in days from randomization)
23	SH48_VISIT2_SYSTBP	Num	8	Systolic blood pressure at clinic visit #2
24	SH48_VISIT2_DIASTBP	Num	8	Diastolic blood pressure at clinic visit #2
25	SH48_VISIT3_DATE	Num	8	Date of clinic visit #3 (in days from randomization)
26	SH48_VISIT3_SYSTBP	Num	8	Systolic blood pressure at clinic visit #3
27	SH48_VISIT3_DIASTBP	Num	8	Diastolic blood pressure at clinic visit #3
28	SH48_COMMENTS	Num	8	SH48 Comments
29	SH48_COMPLETER_CODE	Num	8	Code of person completing SH48 form
30	SH48_PHYSICIAN_CODE	Num	8	Physician code
31	SH48_RECORD_TYPE	Num	8	SH48 Record Type
32	SH48_DATE_RECEIVED	Num	8	SH48 Date Tape Received from Metpath Lab
33	SH48_UPDATE_NUMBER	Num	8	SH48 Update Number
34	SH48_DATE_LAST_PROCESSED	Num	8	SH48 Date Last Processed
35	SH48_PAPER_COPY	Num	8	SH48 Paper Copy
36	SH48_CROSS_FORM_EDITS	Num	8	SH48 Cross Form Edits

Data Set Name: sh49.sas7bdat

Num	Variable	Type	Len	Label
1	SH49_RECORD_LENGTH	Num	8	SH49 Record Length
2	SH49_KEYPUNCH_CODE	Num	8	SH49 Keypuncher Code
3	SH49_BATCHDATE	Num	8	SH49 Batch Date
4	SH49_VERIFYER_CODE	Num	8	SH49 Verifyer Code
5	SH49_DATE_LAST_MODIFIED	Num	8	SH49 Date record was last modified
6	SH49_TIME_LAST_MODIFIED	Num	8	SH49 Time record was last modified
7	SH49_EDIT_STATUS_CODE	Num	8	SH49 Edit status code
8	SHEPID	Num	8	SHEP ID
9	FORMNUM	Num	8	Form number
10	SH49_VERSNNUM	Num	8	SH49 Version number
11	SH49_DISCLOSURE_DATE	Num	8	Date of Disclosure (in days from randomization)
12	SH49_SEQUENCE	Num	8	SH49 sequence number
13	ACROSTIC	Num	8	Acrostic
14	SH49_DATE_COMPLETED	Num	8	Date SH49 form completed (in days from randomization)
15	SH49_REASON_ADVERSE_REACTION	Num	8	Reason for disclosure was suspect adverse reaction to SHEP medications
16	SH49_REASON_SURGERY	Num	8	Reason for disclosure was diagnostic test and/or surgery where there was not enough time to taper patient off mediactions with unblinding
17	SH49_REASON_OTHER_MEDICAL	Num	8	Other medical reasons were reason for disclosure
18	SH49_REASON_PRIVATE_PHYSICIAN	Num	8	Reason for disclosure was request from private physician (no reason given)
19	SH49_REASON_CURIOSITY	Num	8	Reason for disclosure was participant's curiosity
20	SH49_REASON_OTHER	Num	8	Other reasons were reason for disclosure
21	SH49_PARTICIPANT_KNOWS	Num	8	Participant knows which SHEP medication they are taking
22	SH49_SHEP_KNOWS	Num	8	SHEP personnel knows which SHEP medication the participant is taking
23	SH49_PHARMACY_KNOWS	Num	8	Pharmacy knows which SHEP medication the participant is taking
24	SH49_PRIVATE_PHYSICIAN_KNOWS	Num	8	Participant's private physician knows which SHEP medications the participant is taking
25	SH49_OTHER_KNOWS	Num	8	Other people know which SHEP medications the participant is taking
26	SH49_CHAIRMAN_CONSULTED	Num	8	Was chairman of the Steering Committee or Coordinating Center consulted prior to unblinding?
27	SH49_COMMENTS	Num	8	SH49 Comments
28	SH49_COMPLETER_CODE	Num	8	Code of person completing SH49 form
29	SH49_RECORD_TYPE	Num	8	SH49 Record Type
30	SH49_DATE_RECEIVED	Num	8	SH49 Date Tape Received from Metpath Lab
31	SH49_UPDATE_NUMBER	Num	8	SH49 Update Number
32	SH49_DATE_LAST_PROCESSED	Num	8	SH49 Date Last Processed
33	SH49_PAPER_COPY	Num	8	SH49 Paper Copy
34	SH49_CROSS_FORM_EDITS	Num	8	SH49 Cross Form Edits

Data Set Name: sh50.sas7bdat

Num	Variable	Type	Len	Label
1	SH50_RECORD_LENGTH	Num	8	SH50 Record Length
2	SH50_KEYPUNCH_CODE	Num	8	SH50 Keypuncher Code
3	SH50_BATCHDATE	Num	8	SH50 Batch Date
4	SH50_VERIFYER_CODE	Num	8	SH50 Verifyer Code
5	SH50_DATE_LAST_MODIFIED	Num	8	SH50 Date record was last modified
6	SH50_TIME_LAST_MODIFIED	Num	8	SH50 Time record was last modified
7	SH50_EDIT_STATUS_CODE	Num	8	SH50 Edit status code
8	SHEPID	Num	8	SHEP ID
9	FORMNUM	Num	8	Form number
10	SH50_VERSNNUM	Num	8	SH50 Version number
11	SH50_DATE_COMPLETED	Num	8	Date of completion of SH50 (in days from randomization)
12	SH50_SEQUENCE	Num	8	SH50 sequence number
13	ACROSTIC	Num	8	Acrostic
14	SH50_REFUSAL_LOST_TO_FUP	Num	8	Does this form document refusal or lost to follow-up?
15	SH50_LTF_MOVED	Num	8	Has the participant moved?
16	SH50_LTF_CONTACT_ATTEMTS_SLV	Num	8	Have attempts been made to contact the participant since last clinic visit?
17	SH50_REFUSAL_REASON	Num	8	Primary reason for refusal?
18	SH50_PARTICIPANT_CONTACTED	Num	8	Has the participant been contacted?
19	SH50_TELEPHONE_QUARTERLY	Num	8	Is the participant willing to be contacted by telephone at quarterly visits for a short assessment of general well-being?
20	SH50_COMMENTS	Num	8	SH50 Comments
21	SH50_COMPLETER_CODE	Num	8	Code of person completing SH50 form
22	SH50_RECORD_TYPE	Num	8	SH50 Record Type
23	SH50_DATE_RECEIVED	Num	8	SH50 Date Tape Received from Metpath Lab
24	SH50_UPDATE_NUMBER	Num	8	SH50 Update Number
25	SH50_DATE_LAST_PROCESSED	Num	8	SH50 Date Last Processed
26	SH50_PAPER_COPY	Num	8	SH50 Paper Copy
27	SH50_CROSS_FORM_EDITS	Num	8	SH50 Cross Form Edits

Data Set Name: sh51.sas7bdat

Num	Variable	Type	Len	Label
1	SH51_RECORD_LENGTH	Num	8	SH51 Record Length
2	SH51_KEYPUNCH_CODE	Num	8	SH51 Keypuncher Code
3	SH51_BATCHDATE	Num	8	SH51 Batch Date
4	SH51_VERIFYER_CODE	Num	8	SH51 Verifyer Code
5	SH51_DATE_LAST_MODIFIED	Num	8	SH51 Date record was last modified
6	SH51_TIME_LAST_MODIFIED	Num	8	SH51 Time record was last modified
7	SH51_EDIT_STATUS_CODE	Num	8	SH51 Edit status code
8	SHEPID	Num	8	SHEP ID
9	FORMNUM	Num	8	Form number
10	SH51_VERSNNUM	Num	8	SH51 Version number
11	SH51_DATE_COMPLETED	Num	8	Date SH51 form was completed (in days from randomization)
12	SH51_SEQUENCE	Num	8	SH51 sequence number
13	ACROSTIC	Num	8	Acrostic
14	SH51_VISIT_TYPE_MISSED	Num	8	Type of visit missed
15	SH51_EARLIEST_WINDOW_MISSED	Num	8	Earliest window date of missed visit (from randomization verification report) (in days from randomization)
16	SH51_MISSED_VISIT_REASON	Num	8	Reason for missed visit
17	SH51_DATE_LAST_ATTEMPT_CONTACT	Num	8	Date of last attempt to contact participant (in days from randomization)
18	SH51_DATE_LAST_KNOWN_ALIVE	Num	8	Date participant was last known alive (in days from randomization)
19	SH51_SHEP_MEDS	Num	8	Is participant on SHEP medications?
20	SH51_OPEN_LABEL_THERAPY	Num	8	Is participant on open-label therapy?
21	SH51_STROKE	Num	8	Has participant had a new stroke?
22	SH51_TIA	Num	8	Has participant had a new TIA?
23	SH51_MI	Num	8	Has participant had a new MI?
24	SH51_LVF	Num	8	Has participant had a new LVF?
25	SH51_OTHER_HOSPITALIZATION	Num	8	Has participant had a new other hospitalization?
26	SH51_NURSING_HOME	Num	8	Has participant had a new nursing home admission?
27	SH51_INFO_SOURCE	Num	8	Who is the primary source of information?
28	SH51_COMPLETER_CODE	Num	8	Code for person completing SH51 form
29	SH51_RECORD_TYPE	Num	8	SH51 Record Type
30	SH51_DATE_RECEIVED	Num	8	SH51 Date Tape Received from Metpath Lab
31	SH51_UPDATE_NUMBER	Num	8	SH51 Update Number
32	SH51_DATE_LAST_PROCESSED	Num	8	SH51 Date Last Processed
33	SH51_PAPER_COPY	Num	8	SH51 Paper Copy
34	SH51_CROSS_FORM_EDITS	Num	8	SH51 Cross Form Edits

Data Set Name: sh70.sas7bdat

Num	Variable	Type	Len	Label
1	SH70_RECORD_LENGTH	Num	8	SH70 Record Length
2	SH70_KEYPUNCH_CODE	Num	8	SH70 Keypuncher Code
3	SH70_BATCHDATE	Num	8	SH70 Batch Date
4	SH70_VERIFYER_CODE	Num	8	SH70 Verifyer Code
5	SH70_DATE_LAST_MODIFIED	Num	8	SH70 Date record was last modified
6	SH70_TIME_LAST_MODIFIED	Num	8	SH70 Time record was last modified
7	SH70_EDIT_STATUS_CODE	Num	8	SH70 Edit status code
8	SHEPID	Num	8	SHEP ID
9	FORMNUM	Num	8	Form number
10	SH70_VERSNNUM	Num	8	SH70 Version number
11	SH70_DATE_COMPLETED	Num	8	Date SH70 form was completed (in days from randomization)
12	SH70_SEQUENCE	Num	8	SH70 sequence number
13	ACROSTIC	Num	8	Acrostic
14	SH70_VOLUNTEER_AGAIN	Num	8	On the basis of your experience, would you volunteer for SHEP if you had it to do over again?
15	SH70_RECOMMEND_FRIEND	Num	8	Would you recommend the SHEP program or a similar program to a good friend if he/she was eligible?
16	SH70_FEWER_COLDS	Num	8	Do you think you have fewer colds from of taking part in SHEP?
17	SH70_BETTER_VISION	Num	8	Do you think you have better vision from taking part in SHEP?
18	SH70_LONGER_LIFE	Num	8	Do you think you have a longer life from taking part in SHEP?
19	SH70_LOWER_RISK_CANCER	Num	8	Do you think you have a lower risk of getting cancer from taking part in SHEP?
20	SH70_LOWER_RISK_HEART_DISEASE	Num	8	Do you think you have a lower risk of getting heart disease from taking part in SHEP?
21	SH70_LOWER_RISK_STROKE	Num	8	Do you think you have a lower risk of having a stroke from taking part in SHEP?
22	SH70_LESS_DEPRESSED	Num	8	Do you think you are less depressed/discouraged from taking part in SHEP?
23	SH70_OTHER_IMPROVEMENTS	Num	8	Are there other improvements that have results from taking part in SHEP?
24	SH70_PROVIDED_GOOD_CARE	Num	8	Do you agree that SHEP staff provided good care?
25	SH70_FRIENDLY	Num	8	Do you agree that SHEP staff were friendly and pleasant?
26	SH70_TRANSPORTATION_PROBLEM	Num	8	Do you agree that Transportation to SHEP clinic was a serious problem?
27	SH70_IMPORTANT_INFO_TO_MEDSCI	Num	8	Do you agree that SHEP will provide important information to medical science?
28	SH70_NOT_MIND_BP_MEDS	Num	8	Do you agree that you did not mind taking SHEP medicine for blood pressure?
29	SH70_TOO_MANY_VISITS	Num	8	Do you agree that there were too many SHEP visits?
30	SH70_CLINIC_LOCATION	Num	8	How satisfied are you with clinic location?

Num	Variable	Type	Len	Label
31	SH70_CLINIC_FACILITIES	Num	8	How satisfied are you with clinic facilities?
32	SH70_CLINIC_WAIT_TIME	Num	8	How satisfied are you with waiting time at clinic?
33	SH70_CLINIC_STAFF	Num	8	How satisfied are you with clinic staff?
34	SH70_INFO_FROM_STAFF	Num	8	How satisfied are you with information from clinic staff?
35	SH70_TRANSPORTATION	Num	8	How satisfied are you with transportation?
36	SH70_PARKING	Num	8	How satisfied are you with parking?
37	SH70_SATISFIED_OTHER	Num	8	How satisfied are you with other aspects of SHEP?
38	SH70_REASON_IMPROVE_HEALTHCARE	Num	8	Importance of improving your health care in decision to join SHEP?
39	SH70_REASON_FREE_MEDICALCARE	Num	8	Importance of free medical care in decision to join SHEP?
40	SH70_REASON_CONTRIBUTE_SCIENCE	Num	8	Importance of contribution to science in decision to join SHEP?
41	SH70_REASON_IMPROVE_OTHERS	Num	8	Importance of improving health of others in decision to join SHEP?
42	SH70_REASON_SOMEPLACE_TOGO	Num	8	Importance of its some place to go in decision to join SHEP?
43	SH70_REASON_SOMEONE_TALK	Num	8	Importance of its someone to talk with in decision to join SHEP?
44	SH70_REASON_OTHER	Num	8	Importance of other reason(s) in decision to join SHEP?
45	SH70_COMMENTS	Num	8	SH70 Comments

Data Set Name: sh71.sas7bdat

Num	Variable	Type	Len	Label
1	SH71_RECORD_LENGTH	Num	8	SH71 Record Length
2	SH71_KEYPUNCH_CODE	Num	8	SH71 Keypuncher Code
3	SH71_BATCHDATE	Num	8	SH71 Batch Date
4	SH71_VERIFYER_CODE	Num	8	SH71 Verifyer Code
5	SH71_DATE_LAST_MODIFIED	Num	8	SH71 Date record was last modified
6	SH71_TIME_LAST_MODIFIED	Num	8	SH71 Time record was last modified
7	SH71_EDIT_STATUS_CODE	Num	8	SH71 Edit status code
8	SHEPID	Num	8	SHEP ID
9	FORMNUM	Num	8	Form number
10	SH71_VERSNNUM	Num	8	SH71 Version number
11	SH71_VISITDATE	Num	8	Date of visit (in days from randomization)
12	SH71_SEQUENCE	Num	8	SH71 sequence number
13	ACROSTIC	Num	8	Acrostic
14	SH71_VISIT_PLACE	Num	8	Place of visit
15	SH71_INTERVIEWER_CODE	Num	8	Code of person conducting interview
16	SH71_ASSESSOR_CODE	Num	8	Assessor's ID code
17	SH71_ASSESSOR_GUESS	Num	8	Without scrutiny of the medical records, which type of medicine would you guess the participant was assigned to?
18	SH71_ASSESS_REASON_STROKE	Num	8	Assessor's guess based on stroke?
19	SH71_ASSESS_REASON_MORBID_EVENT	Num	8	Assessor's guess based on other morbid event?
20	SH71_ASSESS_REASON_POTASSIUM	Num	8	Assessor's guess based on serum potassium?
21	SH71_ASSESS_REASON_URIC_ACID	Num	8	Assessor's guess based on serum uric acid?
22	SH71_ASSESS_REASON_GLUCOSE	Num	8	Assessor's guess based on blood glucose?
23	SH71_ASSESS_REASON_OTHER_LAB	Num	8	Assessor's guess based on other laboratory findings?
24	SH71_ASSESS_REASON_SIDE_EFFECTS	Num	8	Assessor's guess based on side effects (or lack of them)?
25	SH71_ASSESS_REASON_BP	Num	8	Assessor's guess based on blood pressure readings?
26	SH71_ASSESS_REASON_HEART_RATE	Num	8	Assessor's guess based on heart rate?
27	SH71_ASSESS_REASON_DIABETES	Num	8	Assessor's guess based on diabetes?
28	SH71_ASSESS_REASON_GOUT	Num	8	Assessor's guess based on gout?
29	SH71_ASSESS_REASON_ASTHMA	Num	8	Assessor's guess based on asthma?
30	SH71_ASSESS_REASON_VASC_DISEASE	Num	8	Assessor's guess based on peripheral vascular disease?
31	SH71_ASSESS_REASON_MENTALSTATUS	Num	8	Assessor's guess based on mental status?
32	SH71_ASSESS_REASON_OTHER	Num	8	Assessor's guess based on other reasons?
33	SH71_ASSESS_REASON_NONE	Num	8	Assessor has no reason for guess
34	SH71_REASONS_NOT_TAKE_MEDS	Num	8	Were there any reasons that kept you from taking your SHEP medications as directed?

Num	Variable	Type	Len	Label
35	SH71_MEDS_REASON_SIZE_PILLS	Num	8	Size of pills kept participant from taking SHEP medications as directed
36	SH71_MEDS_REASON_TASTE	Num	8	Taste of pills kept participant from taking SHEP medications as directed
37	SH71_MEDS_REASON_FORGET	Num	8	Forgetting to take medications kept particpant from taking SHEP medications as directed
38	SH71_MEDS_REASON_NOT_NECESSARY	Num	8	Thinking medicine is necessary kept participant from taking SHEP medications as directed
39	SH71_MEDS_REASON_TRAVEL	Num	8	Travel/away from home too much kept participant from taking SHEP medications as directed
40	SH71_MEDS_REASON_INSTRUCTIONS	Num	8	Intructions too difficult to understand kept participant from taking SHEP medications as directed
41	SH71_MEDS_REASON_FEEL_BAD	Num	8	Medicine made participant feel bad so SHEP medications were not taken as directed
42	SH71_MEDS_REASON_FAMILY	Num	8	Family member objection kept participant from taking SHEP medications as directed
43	SH71_MEDS_REASON_DOCTOR	Num	8	Doctor told participant to stop taking SHEP medications
44	SH71_MEDS_REASON_OTHER	Num	8	Other reasons kept participant from taking SHEP medications as directed
45	SH71_MEDS_REASON_NOT_GIVEN	Num	8	No reason was given as to why participant did not take SHEP medications as directed
46	SH71_PARTICIPANT_GUESS	Num	8	What type of SHEP medicine would you guess you have been taking?
47	SH71_PART_REASON_FELT_BETTER	Num	8	Participant's guess based on fact that participant felt better
48	SH71_PART_REASON_FELT_WORSE	Num	8	Participant's guess based on fact that participant felt worse
49	SH71_PART_REASON_BP	Num	8	Participant's guess based on blood pressure readings
50	SH71_PART_REASON_STAFF_TREAT	Num	8	Participant's guess based on the way the SHEP staff treated them
51	SH71_PART_REASON_DONT_KNOW	Num	8	No reason for participant's guess
52	SH71_PART_REASON_OTHER	Num	8	Other reasons lead to participant's guess
53	SH71_ACTUAL_DRUG_ASSIGNMENT	Num	8	Actual drug assignment
54	SH71_RECORD_TYPE	Num	8	SH71 Record Type
55	SH71_DATE_RECEIVED	Num	8	SH71 Date Tape Received from Metpath Lab
56	SH71_UPDATE_NUMBER	Num	8	SH71 Update Number
57	SH71_DATE_LAST_PROCESSED	Num	8	SH71 Date Last Processed
58	SH71_PAPER_COPY	Num	8	SH71 Paper Copy

Data Set Name: sh72.sas7bdat

Num	Variable	Type	Len	Label
1	SH72_RECORD_LENGTH	Num	8	SH72 Record Length
2	SH72_KEYPUNCH_CODE	Num	8	SH72 Keypuncher Code
3	SH72_BATCHDATE	Num	8	SH72 Batch Date
4	SH72_VERIFYER_CODE	Num	8	SH72 Verifyer Code
5	SH72_DATE_LAST_MODIFIED	Num	8	SH72 Date record was last modified
6	SH72_TIME_LAST_MODIFIED	Num	8	SH72 Time record was last modified
7	SH72_EDIT_STATUS_CODE	Num	8	SH72 Edit status code
8	SHEPID	Num	8	SHEP ID
9	FORMNUM	Num	8	Form number
10	SH72_VERSNNUM	Num	8	SH72 Version number
11	SH72_DATE_COMPLETED	Num	8	Date SH72 was completed (in days from randomization)
12	SH72_SEQUENCE	Num	8	SH72 sequence number
13	ACROSTIC	Num	8	Acrostic
14	SH72_PERSON_CONTACTED	Num	8	Person contacted
15	SH72_LAST_KNOWN_ALIVE_DATE	Num	8	Date participant last known alive (in days from randomization)
16	SH72_STROKE	Num	8	Has participant had a new stroke on or before 1/18/1991?
17	SH72_STROKE_DATE	Num	8	Date of stroke (in days from randomization)
18	SH72_MI	Num	8	Has participant had a new myocardial infarction on or before 1/18/1991?
19	SH72_MI_DATE	Num	8	Date of myocardial infarction (in days from randomization)
20	SH72_DEATH	Num	8	Has participant died on or before 1/18/1991?
21	SH72_DEATH_DATE	Num	8	Date of death (in days from randomization)
22	SH72_COMPLETER_CODE	Num	8	Code of person completing SH72
23	SH72_RECORD_TYPE	Num	8	SH72 Record Type
24	SH72_DATE_RECEIVED	Num	8	SH72 Date Tape Received from Metpath Lab
25	SH72_UPDATE_NUMBER	Num	8	SH72 Update Number
26	SH72_DATE_LAST_PROCESSED	Num	8	SH72 Date Last Processed
27	SH72_PAPER_COPY	Num	8	SH72 Paper Copy

Data Set Name: sh90.sas7bdat

Num	Variable	Type	Len	Label
1	SH90_RECORD_LENGTH	Num	8	SH90 Record Length
2	SH90_KEYPUNCH_CODE	Num	8	SH90 Keypuncher Code
3	SH90_BATCHDATE	Num	8	SH90 Batch Date
4	SH90_VERIFYER_CODE	Num	8	SH90 Verifyer Code
5	SH90_DATE_LAST_MODIFIED	Num	8	SH90 Date record was last modified
6	SH90_TIME_LAST_MODIFIED	Num	8	SH90 Time record was last modified
7	SH90_EDIT_STATUS_CODE	Num	8	SH90 Edit status code
8	SHEPID	Num	8	SHEP ID
9	FORMNUM	Num	8	Form number
10	SH90_VERSNNUM	Num	8	SH90 Version number
11	SH90_DATE_RCVD	Num	8	Date SH90 received (in days from randomization)
12	SH90_SEQUENCE	Num	8	SH90 sequence number
13	ACROSTIC	Num	8	Acrostic
14	SH90_INITIAL_REPORT_DATE	Num	8	Date of Initial Report (in days from randomization)
15	SH90_ONSET_DATE	Num	8	Date of Onset (in days from randomization)
16	SH90_EVENT_TYPE_STROKE	Num	8	Type of event, Stroke
17	SH90_EVENT_TYPE_TIA	Num	8	Type of event, TIA
18	SH90_EVENT_TYPE_MI	Num	8	Type of event, Myocardial Infarction
19	SH90_EVENT_TYPE_LVF	Num	8	Type of event, Left ventricular failure
20	SH90_EVENT_TYPE_OTHER	Num	8	Type of event, Other
21	SH90_FINAL_REPORT_DATE	Num	8	Date of Final Report (in days from randomization)
22	SH90_HOSPITAL_RECORDS	Num	8	Hospital records received?
23	SH90_CT_SCAN	Num	8	CT Scan received?
24	SH90_SH24	Num	8	SH24 received?
25	SH90_SH27	Num	8	SH27 received?
26	SH90_SH28	Num	8	SH28 received?
27	SH90_DOCUMENTATION_DATE	Num	8	Date documentation was completed (in days from randomization)
28	SH90_CT_SCAN_CODED	Num	8	CT scan to be coded?
29	SH90_DATE_CT_SCAN_CODING_RCVD	Num	8	Date all CT coding received (in days from randomization)
30	SH90_CT_SCAN_CODING_FINAL	Num	8	CT coding final?
31	SH90_CT_SCAN_ADJUDICATED	Num	8	CT to be adjudicated?
32	SH90_DATE_CT_SCAN_ADJUDICATED	Num	8	Date CT adjudication completed (in days from randomization)
33	SH90_DATE_EVENT_SENT_CODERS	Num	8	Date event sent to coders (in days from randomization)
34	SH90_CODER_NUMBER1	Char	2	Coder #1
35	SH90_CODER_NUMBER2	Char	2	Coder #2
36	SH90_CODER_NUMBER3	Char	2	Coder #3

Num	Variable	Type	Len	Label
37	SH90_DATE_RECEIVED_FROM_CODERS	Num	8	Date all received from coders (in days from randomization)
38	SH90_CODING_FINAL	Num	8	Coding final?
39	SH90_EVENT_ADJUDICATED	Num	8	Event to be adjudicated?
40	SH90_DATE_EVENT_ADJUDICATED	Num	8	Date adjudicated (in days from randomization
41	SH90_STROKE	Num	8	Coding Results, Stroke
42	SH90_TIA	Num	8	Coding Results, TIA
43	SH90_AMI	Num	8	Coding Results, Acute myocardial infarction
44	SH90_LVF	Num	8	Coding Results, Left ventricular failure
45	SH90_INDETERMINATE	Num	8	Coding Results, Indeterminate
46	SH90_DATE_STROKE_SUBTYPE_SENT	Num	8	Date stroke subtyping was sent (in days from randomization)
47	SH90_DATE_STROKE_SUBTYPE_RCVD	Num	8	Date stroke subtyping was received (in days from randomization)
48	SH90_STROKE_SUBTYPE_FINAL	Num	8	Stroke subtyping final?
49	SH90_STROKE_SUBTYPE_ADJUDICATED	Num	8	Stroke subtyping adjudicated?
50	SH90_DATE_SUBTYPE_ADJUDICATED	Num	8	Date stroke subtying was adjudicated (in days from randomization)
51	SH90_STROKE_SUBARACHNOID	Num	8	Stroke subtype, Subarachnoid hemorrhage
52	SH90_STROKE_INTRAPARENCHYMAL	Num	8	Stroke subtype, Intra parenchymal hemorrhage
53	SH90_STROKE_LACUNAR	Num	8	Stroke subtype, Lacunar
54	SH90_STROKE_EMBOLIC	Num	8	Stroke subtype, Embolic
55	SH90_STROKE_ATHEROSCLEROTIC	Num	8	Stroke subtype, Atherosclerotic
56	SH90_STROKE_ISCHEMIC	Num	8	Stroke subtype, Unknown/Ischemic
57	SH90_STROKE_TYPE_UNKNOWN	Num	8	Stroke subtype, Unknown type
58	SH90_EVENT_TYPE_NURSING_HOME	Num	8	Type of event, Admission to nursing home
59	SH90_CORONARY_BYPASS	Num	8	Coding Results, Coronary artery bypass surgery
60	SH90_CAROTID_ENDARTERECTOMY	Num	8	Coding Results, Carotid endarterectomy or carotid bypass
61	SH90_OTHER_CORONARY_PROCEDURE	Num	8	Coding Results, Other coronary artery procedure (including angioplasty)
62	SH90_OTHER_VASCULAR_SURGERY	Num	8	Coding Results, Other vascular surgery
63	SH90_ANGINA_PECTORIS	Num	8	Coding Results, Angina pectoris
64	SH90_VENTRICULAR_ARRHYTHMIA	Num	8	Coding Results, Ventricular arrhythmia
65	SH90_AORTIC_ANEURYSM	Num	8	Coding Results, Aortic aneurysm
66	SH90_PULMONARY_EMBOLISM	Num	8	Coding Results, Pulmonary embolism
67	SH90_ATRIAL_FIBRILLATION	Num	8	Coding Results, Atrial fibrillation
68	SH90_VALVULAR_HEART_DISEASE	Num	8	Coding Results, Valvular heart disease
69	SH90_CARDIOMYOPATHY	Num	8	Coding Results, Cardiomyopathy
70	SH90_LT_VENT_HYPERTROPHY	Num	8	Coding Results, Left ventricular hypertrophy
71	SH90_OTHER_CARDIOVASCULAR	Num	8	Coding Results, Other cardiovascular
72	SH90_RENAL_DISEASE	Num	8	Coding Results, Renal disease
73	SH90_DIABETES_MELLITUS	Num	8	Coding Results, Diabetes mellitus
74	SH90_NEOPLASTIC_DISEASE	Num	8	Coding Results, Neoplastic disease

Num	Variable	Type	Len	Label
75	SH90_GASTROINTESTINAL_DISEASE	Num	8	Coding Results, Gastrointestinal disease
76	SH90_RESPIRATORY_DISEASE	Num	8	Coding Results, Respiratory disease
77	SH90_INFECTIOUS_DISEASE	Num	8	Coding Results, Infectious disease
78	SH90_ACCIDENT	Num	8	Coding Results, Accident/injury
79	SH90_OTHER_NON_CARDIOVASCULAR	Num	8	Coding Results, Other non-cardiovascular
80	SH90_IND_CORONARY_BYPASS	Num	8	If indeterminate, Coronary artery bypass surgery
81	SH90_IND_CAROTID_ENDARTERECTOMY	Num	8	If indeterminate, Carotid endarterectomy or carotid bypass
82	SH90_IND_OTHER_CORONARY_PROC	Num	8	If indeterminate, Other coronary artery procedure (including angioplasty)
83	SH90_IND_OTHER_VASCULAR_SURGERY	Num	8	If indeterminate, Other vascular surgery
84	SH90_IND_ANGINA_PECTORIS	Num	8	If indeterminate, Angina pectoris
85	SH90_IND_VENTRICULAR_ARRHYTHMIA	Num	8	If indeterminate, Ventricular arrhythmia
86	SH90_IND_AORTIC_ANEURYSM	Num	8	If indeterminate, Aortic aneurysm
87	SH90_IND_PULMONARY_EMBOLISM	Num	8	If indeterminate, Pulmonary embolism
88	SH90_IND_ATRIAL_FIBRILLATION	Num	8	If indeterminate, Atrial fibrillation
89	SH90_IND_VALVULAR_HEART_DISEASE	Num	8	If indeterminate, Valvular heart disease
90	SH90_IND_CARDIOMYOPATHY	Num	8	If indeterminate, Cardiomyopathy
91	SH90_IND_LT_VENT_HYPERTROPHY	Num	8	If indeterminate, Left ventricular hypertrophy
92	SH90_IND_OTHER_CARDIOVASCULAR	Num	8	If indeterminate, Other cardiovascular
93	SH90_IND_RENAL_DISEASE	Num	8	If indeterminate, Renal disease
94	SH90_IND_DIABETES_MELLITUS	Num	8	If indeterminate, Diabetes mellitus
95	SH90_IND_NEOPLASTIC_DISEASE	Num	8	If indeterminate, Neoplastic disease
96	SH90_IND_GASTROINTESTINAL_DIS	Num	8	If indeterminate, Gastrointestinal disease
97	SH90_IND_RESPIRATORY_DISEASE	Num	8	If indeterminate, Respiratory disease
98	SH90_IND_INFECTIOUS_DISEASE	Num	8	If indeterminate, Infectious disease
99	SH90_IND_ACCIDENT	Num	8	If indeterminate, Accident/injury
100	SH90_IND_OTHER_NON_CARDIOVASC	Num	8	If indeterminate, Other non-cardiovascular
101	SH90_IND_INDETERMINATE	Num	8	If indeterminate, Indeterminate
102	SH90_ANGIOPLASTY	Num	8	Other coronary artery procedure, Angioplasty
103	SH90_CATHETERIZATION	Num	8	Other coronary artery procedure, Catheterization
104	SH90_OTHER_CORONARY_PROC	Num	8	Other coronary artery procedure, Other
105	SH90_CANCER_SITE1	Num	8	Neoplastic disease, Cancer primary site #1
106	SH90_CANCER_SITE2	Num	8	Neoplastic disease, Cancer primary site #2
107	SH90_CANCER_SITE3	Num	8	Neoplastic disease, Cancer primary site #3

Data Set Name: sh91.sas7bdat

Num	Variable	Type	Len	Label
1	SH91_RECORD_LENGTH	Num	8	SH91 Record Length
2	SH91_KEYPUNCH_CODE	Num	8	SH91 Keypuncher Code
3	SH91_BATCHDATE	Num	8	SH91 Batch Date
4	SH91_VERIFYER_CODE	Num	8	SH91 Verifyer Code
5	SH91_DATE_LAST_MODIFIED	Num	8	SH91 Date record was last modified
6	SH91_TIME_LAST_MODIFIED	Num	8	SH91 Time record was last modified
7	SH91_EDIT_STATUS_CODE	Num	8	SH91 Edit status code
8	SHEPID	Num	8	SHEP ID
9	FORMNUM	Num	8	Form number
10	SH91_VERSNNUM	Num	8	SH91 Version number
11	SH91_FORM_DATE	Num	8	Date SH91 form was completed (in days from randomization)
12	SH91_SEQUENCE	Num	8	SH91 sequence number
13	ACROSTIC	Num	8	Acrostic
14	SH91_INITIAL_REPORT_DATE	Num	8	Date of Initial Report (SH22) (in days from randomization)
15	SH91_DEATH_DATE	Num	8	Date of death (in days from randomization)
16	SH91_FINAL_REPORT_DATE	Num	8	Date of Final Report (SH23) (in days from randomization)
17	SH91_DEATH_CERTIFICATE	Num	8	Death certificate received?
18	SH91_AUTOPSY_REPORT	Num	8	Autopsy report received?
19	SH91_HOSPITAL_RECORDS	Num	8	Hospital records received?
20	SH91_CT_SCAN	Num	8	CT scan received?
21	SH91_SH25	Num	8	SH25 received?
22	SH91_SH26	Num	8	SH26 received?
23	SH91_DOCUMENTATION_DATE	Num	8	Date documentation was completed (in days from randomization)
24	SH91_CT_SCAN_CODED	Num	8	CT scan to be coded?
25	SH91_DATE_CT_SCAN_CODING_RCVD	Num	8	Date all CT coding received (in days from randomization)
26	SH91_CT_SCAN_CODING_FINAL	Num	8	CT coding final?
27	SH91_CT_SCAN_ADJUDICATED	Num	8	CT to be adjudicated?
28	SH91_DATE_CT_SCAN_ADJUDICATED	Num	8	Date CT adjudication completed (in days from randomization)
29	SH91_DATE_EVENT_SENT_CODERS	Num	8	Date event sent to coders (in days from randomization)
30	SH91_CODER_NUMBER1	Char	2	Coder #1
31	SH91_CODER_NUMBER2	Char	2	Coder #2
32	SH91_CODER_NUMBER3	Char	2	Coder #3
33	SH91_DATE_RECEIVED_FROM_CODERS	Num	8	Date all received from coders (in days from randomization)
34	SH91_CODING_FINAL	Num	8	Coding final?
35	SH91_CAUSE_ADJUDICATED	Num	8	Cause to be adjudicated?
36	SH91_DATE_CAUSE_ADJUDICATED	Num	8	Date death cause was adjudicated (in days from randomization)

Num	Variable	Type	Len	Label
37	SH91_DEATH_CAUSE_STROKE	Num	8	Cause of death, Stroke
38	SH91_DEATH_CAUSE_SUDDEN_DEATH	Num	8	Cause of death, Sudden death (<1 hr)
39	SH91_DEATH_CAUSE_RAPID_DEATH	Num	8	Cause of death, Rapid death (1-24 hrs)
40	SH91_DEATH_CAUSE_MI	Num	8	Cause of death, Myocardial infarction
41	SH91_DEATH_CAUSE_LVF	Num	8	Cause of death, Left ventricular failure
42	SH91_DEATH_CAUSE_INDETERMINATE	Num	8	Cause of death, Indeterminate
43	SH91_DATE_STROKE_SUBTYPE_SENT	Num	8	Date stroke subtyping was sent (in days from randomization)
44	SH91_DATE_STROKE_SUBTYPE_RCVD	Num	8	Date stroke subtyping was received (in days from randomization)
45	SH91_STROKE_SUBTYPE_FINAL	Num	8	Stroke subtyping final?
46	SH91_STROKE_SUBTYPE_ADJUDICATED	Num	8	Stroke subtyping adjudicated?
47	SH91_DATE_SUBTYPE_ADJUDICATED	Num	8	Date stroke subtying was adjudicated (in days from randomization)
48	SH91_STROKE_SUBARACHNOID	Num	8	Stroke subtype, Subarachnoid hemorrhage
49	SH91_STROKE_INTRAPARENCHYMAL	Num	8	Stroke subtype, Intra parenchymal hemorrhage
50	SH91_STROKE_LACUNAR	Num	8	Stroke subtype, Lacunar
51	SH91_STROKE_EMBOLIC	Num	8	Stroke subtype, Embolic
52	SH91_STROKE_ATHEROSCLEROTIC	Num	8	Stroke subtype, Atherosclerotic
53	SH91_STROKE_ISCHEMIC	Num	8	Stroke subtype, Unknown/Ischemic
54	SH91_STROKE_TYPE_UNKNOWN	Num	8	Stroke subtype, Unknown type
55	SH91_DEATH_CAUSE_OTHER_CARDIO	Num	8	Cause of death, Other cardiovascular
56	SH91_DEATH_CAUSE_RENAL	Num	8	Cause of death, Renal disease
57	SH91_DEATH_CAUSE_DIABETES	Num	8	Cause of death, Diabetes mellitus
58	SH91_DEATH_CAUSE_NEOPLASTIC	Num	8	Cause of death, Neoplastic disease
59	SH91_DEATH_CAUSE_GASTROINTEST	Num	8	Cause of death, Gastrointestinal disease
60	SH91_DEATH_CAUSE_RESPIRATORY	Num	8	Cause of death, Respiratory disease
61	SH91_DEATH_CAUSE_INFECTIOUS	Num	8	Cause of death, Infectious disease
62	SH91_DEATH_CAUSE_ACCIDENT	Num	8	Cause of death, Accident, suicide, or homicide
63	SH91_DEATH_CAUSE_OTHER_NONCARDIO	Num	8	Cause of death, Other non-cardiovascular
64	SH91_ICDA_CODE	Num	8	Cause of death, ICDA code
65	SH91_CANCER_SITE1	Num	8	Neoplastic disease, Cancer primary site #1
66	SH91_CANCER_SITE2	Num	8	Neoplastic disease, Cancer primary site #2
67	SH91_CANCER_SITE3	Num	8	Neoplastic disease, Cancer primary site #3