

Data Set Name: mhcs_i_abstract.sas7bdat

Num	Variable	Type	Len	Label
1	FORM	Num	3	FORM NUMBER 01
2	HAWBC	Num	5	WBC (XX.X) THOU/CU MM
3	HARBC	Num	5	RBC (X.XX) MIL/CU MM)
4	HAHEMGLB	Num	5	HEMOGLOBIN (XX.X) GM/DL
5	HAHEMCRT	Num	5	HEMATOCRIT (XX.X) %
6	HAMCV	Num	5	MCV (XXX.X) CU MIC
7	HAMCH	Num	5	MCH (XX.X) PG
8	HAMCHC	Num	5	MCHC (XX.X) GM%
9	HAPLAT	Num	5	PLATELET COUNT THOU/CU MM
10	HALYMPHS	Num	5	LYMPHS (%)
11	HAMONOS	Num	5	MONOS (%)
12	HAPMNS	Num	5	PMNS (%)
13	HAEOS	Num	5	EOS (%)
14	HABASOS	Num	5	BASOS (%)
15	HAOTHSP1	Num	5	OTHER13 (%)
16	HAOTHSP2	Num	5	OTHER14 (%)
17	HAA1B	Num	3	SOURCE OF INFORMATION
18	HAA2A	Num	3	VITAL STATUS AT THAT DATE
19	HAA2B1	Num	3	CAUSE OF DEATH 1
20	HAA2B2	Num	3	CAUSE OF DEATH 2
21	HAA2B3	Num	3	CAUSE OF DEATH 3
22	HAA2B4	Num	3	CAUSE OF DEATH 4
23	HAA4A1	Num	3	AHF (F-VIII CONCENTRATE)
24	HAA4A2	Num	3	TOTAL AHF DOSE
25	HAA4A3	Num	3	KONYNE
26	HAA4A4	Num	3	PROPLEX
27	HAA4A5	Num	3	PROPLEX SF
28	HAA4A6	Num	3	FEIBA/AUTOPLEX
29	HAA4A7	Num	3	TOTAL F-IX CONCENTRATE DOSE
30	HAA4A8	Num	3	CRYOPRECIPITATE/PLASMA
31	HAA4A9	Num	3	OTHER
32	HAA4A9S	Num	3	OTHER SPECIFIED
33	HAA4B1	Num	3	AHF (F-VIII CONCENTRATE)
34	HAA4B2	Num	3	TOTAL AHF DOSE
35	HAA4B3	Num	3	KONYNE
36	HAA4B4	Num	3	PROPLEX
37	HAA4B5	Num	3	PROPLEX SF

Num	Variable	Type	Len	Label
38	HAA4B6	Num	3	FEIBA/AUTOPLEX
39	HAA4B7	Num	3	TOTAL F-IX CONCENTRATE DOSE
40	HAA4B8	Num	3	OTHER
41	HAA4B8S	Num	3	OTHER SPECIFIED
42	HAA5	Num	3	FORM COMPLETED BEFORE
43	HAB1	Num	3	SEX
44	HAB2	Num	3	Race: 1=White, 2=Black, 3=Other
45	HAB6	Num	3	HEMOPHILIA TYPE
46	HAB7	Num	3	SEVERITY
47	HAB8A1	Num	3	AHF (F-VIII CONCENTRATE)
48	HAB8A2	Num	3	CUMULATIVE AHF DOSE SINCE 1978
49	HAB8A3	Num	3	KONYNE
50	HAB8A4	Num	3	PROPLEX
51	HAB8A5	Num	3	PROPLEX SF
52	HAB8A6	Num	3	FEIBA/AUTOPLEX
53	HAB8A7	Num	3	CUM F-IX DOSE SINCE 1978 (ALL BRANDS)
54	HAB8A8	Num	3	CRYOPRECIPITATE/PLASMA
55	HAB8A9	Num	3	OTHER
56	HAB8A9S	Num	3	OTHER SPECIFIED
57	HAB8B1	Num	3	AHF (F-VIII CONCENTRATE)
58	HAB8B2	Num	3	TOTAL AHF DOSE
59	HAB8B3	Num	3	KONYNE
60	HAB8B4	Num	3	PROPLEX
61	HAB8B5	Num	3	PROPLEX SF
62	HAB8B6	Num	3	FEIBA/AUTOPLEX
63	HAB8B7	Num	3	TOTAL F-IX CONCENTRATE DOSE
64	HAB8B8	Num	3	OTHER
65	HAB8B8S	Num	3	OTHER SPECIFIED
66	HAC1A	Num	3	FIRST OR FOLLOW-UP FORM
67	HAC2	Num	3	KAPOSI SARCOMA
68	HAC3	Num	3	OTHER MALIGNANCY/LYMPHOMA
69	HAC3O	Num	3	OTHER MALIGNANCY/LYMPHOMA SPECIFIED
70	HAC4	Num	3	PNEUMOCYSTIS CARINII PNEUMONIA
71	HAC5	Num	3	OTHER PNEUMONIA
72	HAC5O	Num	3	OTHER PNEUMONIA SPECIFIED
73	HAC6	Num	3	HERPES ZOSTER
74	HAC7A	Num	3	ORAL CANDIDIASIS
75	HAC7B	Num	3	CANDIDIASIS SUBSEQUENT TO ANTIBIOTIC
76	HAC8	Num	3	ORAL HAIRY LEUKOPLAKIA

Num	Variable	Type	Len	Label
77	HAC9	Num	3	TUBERCULOSIS
78	HAC9O	Num	3	OTHER TUBERCULOSIS SPECIFIED
79	HAC10	Num	3	OTHER AIDS-RELATED INFECTION
80	HAC10O	Num	3	OTHER AIDS-RELATED INFECTION SPECIFIED
81	HAC11	Num	3	HISTORY OF JAUNDICE
82	HAC12	Num	3	HISTORY OF TRANSAMINASE ELEVATION
83	HAC13	Num	3	HISTORY OF SPLENOMEGALY
84	HAC13O	Num	3	OTHER SPLENOMEGALY SPECIFIED
85	HAC14	Num	3	CERVICAL LYMPHADENOPATHY
86	HAC15	Num	3	OTHER EXTRAINGUINAL LYMPHADENOPATHY
87	HAC16	Num	3	PERSISTENT/INTERMITTENT DIARRHEA
88	HAC16O	Num	3	OTHER DIARRHEA SPECIFIED
89	HAC17	Num	3	PERSISTENT FEVER
90	HAC18	Num	3	PERSISTENT NON-PRODUCTIVE COUGH
91	HAC19	Num	3	WEIGHT LOSS GREATER THAN 10 LBS
92	HAC20	Num	3	CHANGE IN PERSONALITY OR AFFECT
93	HAC21	Num	3	NEUROLOGICAL ABNORMALITIES
94	HAC21O	Num	3	OTHER NEUROLOGICAL ABNORMALITIES SPEC
95	HAD2	Num	3	JAUNDICE
96	HAD3	Num	3	SPIDER ANGIOMATA
97	HAD4	Num	3	ASCITES
98	HAD5	Num	3	HEPATOMEGALY
99	HAD6	Num	3	SPLENOMEGALY
100	HAD7AC	Num	3	LYMPHADENOPATHY-CERVICAL SITES
101	HAD7AO	Num	3	LYMPHADENOPATHY-OTHER EXTRAINGUINAL
102	HA7BL	Num	5	LARGEST DIMENSION (XX.X) CM
103	HA7BS	Num	5	SECOND LARGEST (XX.X) CM
104	SAMPL_ID	Char	7	MHCS Sample ID
105	DABS_DAYS	Num	8	DATE ABSTRACTED : Converted to days since reference point
106	HA1A_DAYS	Num	8	DATE DRAWN : Converted to days since reference point
107	HAA1A_DAYS	Num	8	DATE MOST RECENT PATIENT CONTACT : Converted to days since reference point
108	HAA2C_DAYS	Num	8	DATE OF DEATH : Converted to days since reference point
109	HAA2D_DAYS	Num	8	IF AIDS BEFORE DEATH DATE DIAGNOSED : Converted to days since reference point
110	HAA4A1_DAYS	Num	8	DATE LAST RECEIVED AHF : Converted to days since reference point
111	HAA4A3_DAYS	Num	8	DATE LAST RECEIVED KONYNE : Converted to days since reference point
112	HAA4A4_DAYS	Num	8	DATE LAST RECEIVED PROPLEX : Converted to days since reference point
113	HAA4A5_DAYS	Num	8	DATE LAST RECD PROPLEX SF : Converted to days since reference point
114	HAA4A6_DAYS	Num	8	DATE LAST RECEIVED FEIBA/AUTOPLEX : Converted to days since reference point
115	HAA4A8_DAYS	Num	8	DATE LAST RECD CRYO : Converted to days since reference point

Num	Variable	Type	Len	Label
116	HAA4A9_DAYS	Num	8	DATE LAST RECEIVED OTHER : Converted to days since reference point
117	HAA4B1_DAYS	Num	8	DATE LAST RECEIVED AHF : Converted to days since reference point
118	HAA4B3_DAYS	Num	8	DATE LAST RECEIVED KONYNE : Converted to days since reference point
119	HAA4B4_DAYS	Num	8	DATE LAST RECEIVED PROPLEX : Converted to days since reference point
120	HAA4B5_DAYS	Num	8	DATE LAST RECEIVED PROPLEX SF : Converted to days since reference point
121	HAA4B6_DAYS	Num	8	DATE LAST RECEIVED FEIBA : Converted to days since reference point
122	HAA4B8_DAYS	Num	8	DATE LAST RECEIVED OTHER : Converted to days since reference point
123	HAB3_DAYS	Num	8	BIRTHDATE : Converted to days since reference point
124	HAB4_DAYS	Num	8	DATE FIRST SEEN AT CLINIC : Converted to days since reference point
125	HAB8A1_DAYS	Num	8	DATE LAST RECEIVED AHF : Converted to days since reference point
126	HAB8A3_DAYS	Num	8	DATE LAST RECEIVED KONYNE : Converted to days since reference point
127	HAB8A4_DAYS	Num	8	DATE LAST RECEIVED PROPLEX : Converted to days since reference point
128	HAB8A5_DAYS	Num	8	DATE LAST RECEIVED PROPLEX SF : Converted to days since reference point
129	HAB8A6_DAYS	Num	8	DATE LAST RECEIVED FEIBA : Converted to days since reference point
130	HAB8A8_DAYS	Num	8	DATE LAST RECEIVED CRYO : Converted to days since reference point
131	HAB8A9_DAYS	Num	8	DATE LAST RECEIVED OTHER : Converted to days since reference point
132	HAB8B1_DAYS	Num	8	DATE FIRST RECEIVED AHF : Converted to days since reference point
133	HAB8B3_DAYS	Num	8	DATE FIRST RECEIVED KONYNE : Converted to days since reference point
134	HAB8B4_DAYS	Num	8	DATE FIRST RECEIVED PROPLEX : Converted to days since reference point
135	HAB8B5_DAYS	Num	8	DATE FIRST RECEIVED PROPLEX SF : Converted to days since reference point
136	HAB8B6_DAYS	Num	8	DATE FIRST RECEIVED FEIBA : Converted to days since reference point
137	HAB8B8_DAYS	Num	8	DATE FIRST RECEIVED OTHER : Converted to days since reference point
138	HAC10_DAYS	Num	8	DATE OTHER AIDS-RELATED INFECTION : Converted to days since reference point
139	HAC11_DAYS	Num	8	JAUNDICE : Converted to days since reference point
140	HAC12_DAYS	Num	8	TRANSAMINASE ELEVATION : Converted to days since reference point
141	HAC13_DAYS	Num	8	DATE SPLENOMEGALY : Converted to days since reference point
142	HAC14_DAYS	Num	8	DATE CERVICAL LYMPHADENOPATHY : Converted to days since reference point
143	HAC15_DAYS	Num	8	DATE OTHER LYMPHADENOPATHY (DY)
144	HAC16_DAYS	Num	8	DATE DIARRHEA : Converted to days since reference point
145	HAC17_DAYS	Num	8	DATE FEVER : Converted to days since reference point
146	HAC18_DAYS	Num	8	DATE COUGH : Converted to days since reference point
147	HAC19_DAYS	Num	8	DATE WEIGHT LOSS : Converted to days since reference point
148	HAC1B_DAYS	Num	8	DATE PREVIOUS EVALUATION : Converted to days since reference point
149	HAC2_DAYS	Num	8	DATE KAPOSI SARCOMA DIAGNOSED : Converted to days since reference point
150	HAC20_DAYS	Num	8	DATE OF PERSONALITY CHANGE : Converted to days since reference point
151	HAC21_DAYS	Num	8	DATE NEUROLOGICAL ABNORMALITIES : Converted to days since reference point
152	HAC3_DAYS	Num	8	DATE OTHER MALIGNANCY DIAGNOSED : Converted to days since reference point
153	HAC4_DAYS	Num	8	DATE PNEUMOCYSTIS DIAGNOSED : Converted to days since reference point
154	HAC5_DAYS	Num	8	DATE OTHER PNEUMONIA DIAGNOSED : Converted to days since reference point

Num	Variable	Type	Len	Label
155	HAC6_DAYS	Num	8	DATE HERPES ZOSTER DIAGNOSED : Converted to days since reference point
156	HAC7A_DAYS	Num	8	DATE ORAL CANDIDIASIS DIAGNOSED : Converted to days since reference point
157	HAC8_DAYS	Num	8	DATE ORAL LEUKOPLAKIA : Converted to days since reference point
158	HAC9_DAYS	Num	8	DATE TUBERCULOSIS : Converted to days since reference point
159	HAD1_DAYS	Num	8	DATE CURRENT PHYSICAL EXAM : Converted to days since reference point
160	SUBJ_ID	Char	8	Subject identifier

Data Set Name: mhcs_i_cbc.sas7bdat

Num	Variable	Type	Len	Label
1	FORM	Num	3	FORM NUMBER 05
2	SAMPL_ID	Char	7	SAMPLE IDENTIFICATION NUMBER
3	HAWBC	Num	5	WBC (XX.X) THOU/CU MM
4	HARBC	Num	5	RBC (X.XX) MIL/CU MM
5	HAHEMGLB	Num	5	HEMOGLOBIN (XX.X) GM/DL
6	HAHEMCRT	Num	5	HEMATOCRIT (XX.X) %
7	HAMCV	Num	5	MCV (XXX.X) CU MIC
8	HAMCH	Num	5	MCH (XX.X) PG
9	HAMCHC	Num	5	MCHC (XX.X) GM%
10	HAPMNS	Num	5	PMNS (%)
11	HALYMPHS	Num	5	LYMPHS (%)
12	HAMONOS	Num	5	MONOS (%)
13	HAEOS	Num	5	EOS (%)
14	HABASOS	Num	5	BASOS (%)
15	HABANDS	Num	5	BANDS (%)
16	HAATYCAL	Num	5	ATYPICAL LYMPHS (%)
17	HAOTHSP1	Num	5	OTHER (%)
18	HAPLAT	Num	5	PLATELET COUNT(THOU/CU MM)
19	HASGOT	Num	5	SGOT (U/L)
20	HASGOTN	Num	3	SGOT (U/L)NORMAL RANGE
21	HASGPT	Num	5	SGPT (U/L)
22	HASGPTN	Num	3	SGPT (U/L)NORMAL RANGE
23	HASGGT	Num	5	SGGT (U/L)
24	HASGGTN	Num	3	SGGT (U/L)NORMAL RANGE
25	HAOTHSP2	Num	5	OTHER14 (%)
26	HABILIR	Num	5	BILIRUBIN (XX.X)
27	HA1A_days	Num	8	DATE DRAWN - Converted to days since reference point
28	SUBJ_ID	Char	8	Subject identifier

Data Set Name: mhcs_i_cureval.sas7bdat

Num	Variable	Type	Len	Label
1	FORM	Num	3	Form Number
2	CEA1B	Num	3	SOURCE OF INFORMATION FOR ABOVE DATE
3	CEA2A_1	Num	3	1ST VITAL STATUS AT ABOVE DATE
4	CEA2A_2	Num	3	2ND VITAL STATUS AT ABOVE DATE
5	CEA2A_3	Num	3	3RD VITAL STATUS AT ABOVE DATE
6	CEA2A_4	Num	3	4TH VITAL STATUS AT ABOVE DATE
7	CEA2C_PR	Num	3	PRIMARY CAUSE OF DEATH
8	CEA2C_S1	Num	3	1ST SECONDARY CAUSE OF DEATH
9	CEA2C_S2	Num	3	2ND SECONDARY CAUSE OF DEATH
10	CEA2C_S3	Num	3	3RD SECONDARY CAUSE OF DEATH
11	CEA2C_S4	Num	3	4TH SECONDARY CAUSE OF DEATH
12	CEA2C_S5	Num	3	5TH SECONDARY CAUSE OF DEATH
13	CEA2D	Num	3	WAS AUTOPSY DONE
14	CEB1_S1	Num	4	1ST FACTOR VIII PRODUCTS IN PAST 12 MOS
15	CEB1_S2	Num	4	2ND FACTOR VIII PRODUCTS IN PAST 12 MOS
16	CEB1_S3	Num	4	3RD FACTOR VIII PRODUCTS IN PAST 12 MOS
17	CEB1_S4	Num	4	4TH FACTOR VIII PRODUCTS IN PAST 12 MOS
18	CEB1_S5	Num	4	5TH FACTOR VIII PRODUCTS IN PAST 12 MOS
19	CEB2_S1	Num	4	1ST FACTOR IX PRODUCTS IN PAST 12 MOS
20	CEB2_S2	Num	4	2ND FACTOR IX PRODUCTS IN PAST 12 MOS
21	CEB2_S3	Num	4	3RD FACTOR IX PRODUCTS IN PAST 12 MOS
22	CEB2_S4	Num	4	4TH FACTOR IX PRODUCTS IN PAST 12 MOS
23	CEB2_S5	Num	4	5TH FACTOR IX PRODUCTS IN PAST 12 MOS
24	CEB3	Num	3	CRYOPRECIPITATE/PLASMA/FFP PAST 12 MOS
25	CEB4	Num	3	DDAVP (STIMATE) RECVD IN PAST 12 MOS
26	CEB5_S1	Num	3	1ST OTHER HUMAN BLOOD PRODUCT RECVD-SP
27	CEB5_S2	Num	3	2ND OTHER HUMAN BLOOD PRODUCT RECVD-SP
28	CEB6A	Num	3	TOTAL HEAT TREATED FACTOR VIII
29	CEB6B	Num	3	TOTAL HEAT TREATED FACTOR IX ALL BRANDS
30	CEC1_YN	Num	3	HAS THIS PATIENT BEEN DIAGNOSED W/AIDS
31	CEC2_S1	Num	3	FIRST AIDS-DEFINING DISEASES DIAGNOSED
32	CEC2_S2	Num	3	SECOND AIDS-DEFINING DISEASES DIAGNOSED
33	CEC2_S3	Num	3	THIRD AIDS-DEFINING DISEASES DIAGNOSED
34	CEC2_S4	Num	3	FOURTH AIDS-DEFINING DISEASES DIAGNOSED
35	CEC2_S5	Num	3	FIFTH AIDS-DEFINING DISEASES DIAGNOSED
36	NHL_TYPE	Num	3	NON-HODGKIN'S LYMPHOMA DIAGNOSED-SP SITE

Num	Variable	Type	Len	Label
37	MAI_SITE	Num	3	MYCOBACTERIUM AVIUM DIAGNOSED-SP SITE
38	CMV_SITE	Num	3	CMV DIAGNOSED-SP SITE
39	BACTERIA	Num	3	BACTERIAL INFECTION DISGNOSED-SP BACTERI
40	CD4NUM	Num	5	CD4 <200, COUNT
41	CD4PCT	Num	3	CD4 <200, PERCENT
42	CEC3A_YN	Num	3	HAS THIS PATIENT BEEN DIAGNOSED W/ARC
43	CEC4_S1	Num	3	FIRST DISEASE/SYMP THAT CAUSED DIAGNOSIS
44	CEC4_S2	Num	3	SECOND DISEASE/SYMP THAT CAUSED DIAGNOSI
45	CEC4_S3	Num	3	THIRD DISEASE/SYMP THAT CAUSED DIAGNOSIS
46	CEC4_S4	Num	3	FOURTH DISEASE/SYMP THAT CAUSED DIAGNOSI
47	CEC4_S5	Num	3	FIFTH DISEASE/SYMP THAT CAUSED DIAGNOSIS
48	CED1_YN	Num	3	HAS PATIENT RCVD ANY OF FOLLOWING DRUGS
49	CED1_RXA	Num	5	MONTHS RECEIVED AZT(RETROVIR)
50	CED1_RXB	Num	5	MONTHS RECEIVED DDI(DIDEOXYLNOSINE)
51	CED1_RXC	Num	5	MONTHS RECEIVED DDC(DIDEOXYCYTIDINE)
52	CED1_RXD	Num	5	MONTHS RECEIVED ACYCLOVIR(ORAL OR IV)
53	CED1_RXE	Num	5	MONTHS RECEIVED ALPHA INTERFERON
54	CED1_RXF	Num	5	MONTHS RECEIVED FOSCARNET
55	CED1_RXG	Num	5	MONTHS RECEIVED AERO PENTAMIDINE
56	CED1_RXH	Num	5	MONTHS RECEIVED PENTAMIDINE-IV
57	CED1_RXI	Num	5	MONTHS RECEIVED FLUCONAZOLE
58	CED1_RXJ	Num	5	MONTHS RECEIVED DAPSONE
59	CED1_RXK	Num	5	MONTHS RECEIVED TRIMETHOPRIM-SULFA
60	CED1OTS1	Num	5	OTHER ANTI-HIV RX SPECIFY1
61	CED1RXS1	Num	5	MONTHS RECEIVED OTHER ANTI-HIV RX1
62	CED1OTS2	Num	5	OTHER ANTI-HIV RX SPECIFY2
63	CED1RXS2	Num	5	MONTHS RECEIVED OTHER ANTI-HIV RX2
64	CED1OTS3	Num	5	OTHER ANTI-HIV RX SPECIFY3
65	CED1RXS3	Num	5	MONTHS RECEIVED-OTHER ANTI-HIV RX3
66	CED1OTS4	Num	5	OTHER ANTI-HIV RX SPECIFY4
67	CED1RXS4	Num	5	MONTHS RECEIVED OTHER ANTI-HIV RX4
68	CED1OTS5	Num	5	OTHER ANTI-HIV RX SPECIFY5
69	CED1RXS5	Num	5	MONTHS RECEIVED OTHER ANTI-HIV RX5
70	CED2_YN	Num	3	PARTICIPATED IN CLINICAL TRIAL
71	CEE1_YN	Num	3	KAPOSIS SARCOMA-PRESENT SINCE LAST FORM
72	CEE1	Num	3	KAPOSIS SARCOMA-SPECIFY HOW PROVEN
73	CEE2_YN	Num	3	LYMPHOMA PRESNT SINCE LAST FORM COMPLTD
74	CEE2	Num	3	LYMPHOMA,SPECIFY SITE & TYPE
75	CEE3_YN	Num	3	OTHER MALIGNANCY PRESNT SINCE LAST FORM

Num	Variable	Type	Len	Label
76	CEE3	Num	3	OTHER MALIGNANCY,SPECIFY SITE & TYPE
77	CEE4_YN	Num	3	PNEUMOCYSTIS CARINII PNEUMONIA Y/N
78	CEE4	Num	3	PNEUMOCYSTIS CARINII PNEUMONIA-SP
79	CEE5_YN	Num	3	OTHER PNEUMONIA PRESNT SINCE LAST FORM
80	CEE5	Num	3	OTHER PNEUMONIA,SPECIFY TYPE
81	CEE6_YN	Num	3	TUBERCULOSIS PRESENT SINCE LAST FORM
82	CEE6	Num	3	PULMONARY TUBERCULOSIS, SP ORGANISM
83	CEE7_YN	Num	3	EXTRAPUL TUBERCULOSIS PRESENT SINCE LAST
84	CEE7	Num	3	EXTRAPULMONARY TUBERCULOSIS,SP TB SITE &
85	CEE8_YN	Num	3	TOXOPLASMOSIS PRESENT SINCE LAST FORM
86	CEE8	Num	3	TOXOPLASMOSIS OR THE BRAIN, SP HOW PROVE
87	CEE9_YN	Num	3	CMV RETINITIS PRESENT SINCE LAST FORM
88	CEE10_YN	Num	3	OTHER CMV INFECTION SINCE LAST FORM
89	CEE10	Num	3	OTHER CMV INFECTION, SP SITE
90	CEE11_YN	Num	3	STAPH AUREUS INFECTION SINCE LAST FORM
91	CEE11	Num	3	STAPH AUREUS INFECTION, SP SITE
92	CEE12_YN	Num	3	JOINT OR SOFT TISSUE INFECT LAST FORM
93	CEE12	Num	3	JOINT OR SOFT TISSUE INFECT,SP SITE & OR
94	CEE13_YN	Num	3	PERSIS/INTER DIARRHEA SINCE LAST FORM
95	CEE13	Num	3	PERSISTENT/INTERM DIARRHEA, SP CAUSE
96	CEE14_YN	Num	3	OTHER AIDS-RELATED INFECTION SINCE LAST
97	CEE14_S1	Num	5	OTHER AIDS-RELATED INFECTION(SP1)
98	CEE14_S2	Num	5	OTHER AIDS-RELATED INFECTION(SP2)
99	CEE14_S3	Num	5	OTHER AIDS-RELATED INFECTION(SP3)
100	CEE15_YN	Num	3	LIVER DISEASE 1 SINCE LAST FORM
101	CEE15_S1	Num	3	LIVER DISEASE-SPECIFY1
102	CEE15_S2	Num	3	LIVER DISEASE-SPECIFY2
103	CEF1_YN	Num	3	INHIB (ANTIBODY TO FVIII/FIX) DETECT PLA
104	CEF2_YN	Num	3	INHIBITOR DETECTED LAST 12 MONTHS
105	CEF2_BU	Num	5	HIGHEST DOCUMENTED INHIB TITER LST 12 MO
106	CEF3_YN	Num	3	INHIBITOR SPONTANEOUSLY DISAPPEAR LST 12
107	CEF4_YN	Num	3	RECHALLENGED WITH FACTOR LAST 12 MO
108	CEF4B_YN	Num	3	INHIB REDEVELOP SUBSEQ TO RECHALLENGE
109	CEF4C_BU	Num	5	HIGHEST INHIB TITER DOCUM SUBSEQ TO RECH
110	CEG1A	Num	3	HBS ANTIBODY STATUS THAT DATE
111	CEG1B	Num	3	HBS ANTIGEN STATUS THAT DATE
112	CEG1C	Num	3	HB CORE ANTIBODY STATUS THAT DATE
113	CEGN2_A	Num	3	HEPATITIS C ANTIBODY STATUS
114	CEGN2_B	Num	3	HEPATITIS C ANTIBODY STATUS-EVER POSITIV

Num	Variable	Type	Len	Label
115	CEG2A_YN	Num	3	EVER RCVD HEPATITIS B VACCINE
116	CEG2A_TD	Num	3	TOTAL DOSE HEPATITIS B VACCINE
117	CEG2B_YN	Num	3	EVER RCVD PNEUMOCOCCAL VACCINE
118	CEG2B_TD	Num	3	TOTAL DOSE PNEUMOCOCCAL VACCINE
119	CEG2C_YN	Num	3	EVER RCVD INFLUENZA VACCINE
120	CEG2C_TD	Num	3	TOTAL DOSE INFLUENZA VACCINE
121	CEG2D_YN	Num	3	EVER RCVD HEPATITIS A VACCINE
122	CEG2D_TD	Num	3	TOTAL DOSE HEPATITIS A VACCINE
123	BRAND1	Num	3	1ST PRODUCT BRAND RCVD IN PAST 12 MOS
124	BRAND2	Num	3	2ND PRODUCT BRAND RCVD IN PAST 12 MOS
125	BRAND3	Num	3	3RD PRODUCT BRAND RCVD IN PAST 12 MOS
126	BRAND4	Num	3	4TH PRODUCT BRAND RCVD IN PAST 12 MOS
127	BRAND5	Num	3	5TH PRODUCT BRAND RCVD IN PAST 12 MOS
128	NHTF8	Num	3	TOTAL NON-HEAT TREATED FACTOR VIII
129	NHTF9	Num	3	TOTAL NON-HEAT TREATED FACTOR IX
130	NTOTH_YN	Num	3	OTHER NON-HEAT TREATED BLOOD PRODUCT
131	HTOTH_YN	Num	3	OTHER HEAT TREATED BLOOD PRODUCT
132	AZTPM_YN	Num	3	AZT DURING PAST MONTH
133	RIBPM_YN	Num	3	RIBAVIRIN DURING PAST MONTH
134	DDCPM_YN	Num	3	DDC DURING PAST MONTH
135	ACYPM_YN	Num	3	ACYCLOVIR DURING PAST MONTH
136	INTPM_YN	Num	3	ALPHA INTERFERON DURING PAST MONTH
137	DDIPM_YN	Num	3	DDI DURING PAST MONTH
138	AERPM_YN	Num	3	AERO PENTAMIDINE DURING PAST MONTH
139	PM_YN721	Num	3	AL 721 DURING PAST MONTH
140	AMPPM_YN	Num	3	AMPLIGEN DURING PAST MONTH
141	TRIPM_YN	Num	3	TRIMETHOPRIM-SULFA DURING PAST MONTH
142	PENPM_YN	Num	3	IV PENTAMIDINE DURING PAST MONTH
143	HBV_E	Num	3	HB E STATUS THAT DATE
144	RECPMOS1	Num	3	FIRST-OTHER DRUG DURING PAST MONTH
145	RECPMOS2	Num	3	SECOND-OTHER DRUG DURING PAST MONTH
146	RECPMOS3	Num	3	THIRD OTHER DRUG DURING PAST MONTH
147	RECPMOS4	Num	3	FOURTH-OTHER DRUG DURING PAST MONTH
148	RECPMOS5	Num	3	FIFTH-OTHER DRUG DURING PAST MONTH
149	RIBTOTWK	Num	5	WKS RECEIVED RIBAVIRIN
150	TOTWK721	Num	5	WKS RECEIVED AL 721
151	AMPTOTWK	Num	5	WKS RECEIVED AMPLIGEN
152	HBVAB_LV	Num	5	HBS ANTIBODY POSITIVE-LEVEL
153	HBVAG_LV	Num	5	HBS ABNTIGEN POSITIVE-LEVEL

Num	Variable	Type	Len	Label
154	CEA1A_DAYS	Num	8	DATE OF MOST CURRENT INFORMATION - Converted to days since reference point
155	CEA2B_DAYS	Num	8	DATE OF DEATH - Converted to days since reference point
156	CEC2_1_DAYS	Num	8	1ST SECONDARY CAUSE OF DEATH - Converted to days since reference point
157	CEC2_2_DAYS	Num	8	2ND SECONDARY CAUSE OF DEATH - Converted to days since reference point
158	CEC2_3_DAYS	Num	8	3RD SECONDARY CAUSE OF DEATH - Converted to days since reference point
159	CEC2_4_DAYS	Num	8	4TH SECONDARY CAUSE OF DEATH - Converted to days since reference point
160	CEC2_5_DAYS	Num	8	5TH SECONDARY CAUSE OF DEATH - Converted to days since reference point
161	CEC3_DAYS	Num	8	ARC DATE OF DIAGNOSIS - Converted to days since reference point
162	CEE14_1_DAYS	Num	8	DATE DIAG OTHER AIDS INFECTION 1 - Converted to days since reference point
163	CEE14_2_DAYS	Num	8	DATE DIAG OTHER AIDS INFECTION 2 - Converted to days since reference point
164	CEE14_3_DAYS	Num	8	DATE DIAG OTHER AIDS INFECTION 3 - Converted to days since reference point
165	CEE15_1_DAYS	Num	8	DATE DIAG LIVER DISEASE(1) - Converted to days since reference point
166	CEE15_2_DAYS	Num	8	DATE DIAG LIVER DISEASE(1) - Converted to days since reference point
167	A721ST_MONTHS	Num	8	DATE STARTED AL 721 - Converted to months since reference point
168	AMPLST_MONTHS	Num	8	DATE STARTED AMPLIGEN - Converted to months since reference point
169	RIBAST_MONTHS	Num	8	DATE STARTED RIBAVIRIN - Converted to months since reference point
170	CED1L_S1_MONTHS	Num	8	DATE LAST RCVD 1ST OTH RX - Converted to months since reference point
171	CED1L_S2_MONTHS	Num	8	DATE LAST RCVD 2ND OTH RX - Converted to months since reference point
172	CED1L_S3_MONTHS	Num	8	DATE LAST RCVD 3RD OTH RX - Converted to months since reference point
173	CED1L_S4_MONTHS	Num	8	DATE LAST RCVD 4TH OTH RX - Converted to months since reference point
174	CED1L_S5_MONTHS	Num	8	DATE LAST RCVD 5TH OTH RX - Converted to months since reference point
175	CED1L_A_MONTHS	Num	8	DATE LAST RECVD AZT - Converted to months since reference point
176	CED1L_B_MONTHS	Num	8	DATE LAST RECVD DDI - Converted to months since reference point
177	CED1L_C_MONTHS	Num	8	DATE LAST RECVD DDC - Converted to months since reference point
178	CED1L_D_MONTHS	Num	8	DATE LAST RECVD ACYCLOVIR - Converted to months since reference point
179	CED1L_E_MONTHS	Num	8	DATE LAST RCVD ALPHA INTERFERON - Converted to months since reference point
180	CED1L_F_MONTHS	Num	8	DATE LAST RCVD FOSCARNET - Converted to months since reference point
181	CED1L_G_MONTHS	Num	8	DATE LAST RCVD AERO PENTAMIDINE - Converted to months since reference point
182	CED1L_H_MONTHS	Num	8	DATE LAST RCVD IV PENTAMIDINE - Converted to months since reference point
183	CED1L_I_MONTHS	Num	8	DATE LAST RCVD FLUCONAZOLE - Converted to months since reference point
184	CED1L_J_MONTHS	Num	8	DATE LAST RCVD DAPSONE - Converted to months since reference point
185	CED1L_K_MONTHS	Num	8	DATE LAST RCVD TRIMETHOPRIM-SULPHA - Converted to months since reference point
186	CED1S_S1_MONTHS	Num	8	DATE STARTED 1ST OTH RX - Converted to months since reference point
187	CED1S_S2_MONTHS	Num	8	DATE STARTED 1ST OTH RX - Converted to months since reference point
188	CED1S_S3_MONTHS	Num	8	DATE STARTED 1ST OTH RX - Converted to months since reference point
189	CED1S_S4_MONTHS	Num	8	DATE STARTED 1ST OTH RX - Converted to months since reference point
190	CED1S_S5_MONTHS	Num	8	DATE STARTED 1ST OTH RX - Converted to months since reference point
191	CED1S_A_MONTHS	Num	8	DATE STARTED AZT - Converted to months since reference point

Num	Variable	Type	Len	Label
192	CED1S_B_MONTHS	Num	8	DATE STARTED DDI - Converted to months since reference point
193	CED1S_C_MONTHS	Num	8	DATE STARTED DDC - Converted to months since reference point
194	CED1S_D_MONTHS	Num	8	DATE STARTED ACYCLOVIR - Converted to months since reference point
195	CED1S_E_MONTHS	Num	8	DATE STARTED ALPHA INTERFERON - Converted to months since reference point
196	CED1S_F_MONTHS	Num	8	DATE STARTED FOSCARNET - Converted to months since reference point
197	CED1S_G_MONTHS	Num	8	DATE STARTED AERO PENTAMIDINE - Converted to months since reference point
198	CED1S_H_MONTHS	Num	8	DATE STARTED IV PENTAMIDINE - Converted to months since reference point
199	CED1S_I_MONTHS	Num	8	DATE STARTED FLUCONAZOLE - Converted to months since reference point
200	CED1S_J_MONTHS	Num	8	DATE STARTED DAPSONE - Converted to months since reference point
201	CED1S_K_MONTHS	Num	8	DATE STARTED TRIMETHOPRIM-SULPHA - Converted to months since reference point
202	CEF4A_DAYS	Num	8	DATE OF RECHALLENGE - Converted to days since reference point
203	CEG1_DAYS	Num	8	DATE OF MOST RECENT HEPATITIS B EVAL - Converted to days since reference point
204	CEG2A_F_MONTHS	Num	8	DATE FIRST DOSE HEPATITIS B VACCINE - Converted to months since reference point
205	CEG2A_L_MONTHS	Num	8	DATE MOST RECENT DOSE HEPATITIS B VACCINE - Converted to months since reference point
206	CEG2B_F_MONTHS	Num	8	DATE FIRST DOSE PNEUMOCOCCAL VACCINE - Converted to months since reference point
207	CEG2B_L_MONTHS	Num	8	DATE MOST RECENT DOSE PNEUMOCOCCAL VACCINE - Converted to months since reference point
208	CEG2C_F_MONTHS	Num	8	DATE FIRST DOSE INFLUENZA VACCINE - Converted to months since reference point
209	CEG2C_L_MONTHS	Num	8	DATE MOST RECENT DOSE INFLUENZA VACCINE - Converted to months since reference point
210	CEG2D_F_MONTHS	Num	8	DATE FIRST DOSE HEPATITIS A VACCINE - Converted to months since reference point
211	CEG2D_L_MONTHS	Num	8	DATE MOST RECENT DOSE HEPATITIS A VACCINE - Converted to months since reference point
212	CEGN2_DAYS	Num	8	DATE MOST RECENT HEPATITIS C EVAL - Converted to days since reference point
213	CEE1_DAYS	Num	8	DATE OF DIAGNOSIS - KAPOSIS SARCOMA - Converted to days since reference point
214	CEE2_DAYS	Num	8	DATE OF DIAGNOSIS - LYMPHOMA - Converted to days since reference point
215	CEE3_DAYS	Num	8	DATE OF DIAGNOSIS - OTHER MALIGNANCY - Converted to days since reference point
216	CEE4_DAYS	Num	8	DATE OF DIAGNOSIS - PNEUMOCYSTIS CARINII - Converted to days since reference point
217	CEE5_DAYS	Num	8	DATE OF DIAGNOSIS - OTHER PNEUMONIA - Converted to days since reference point
218	CEE6_DAYS	Num	8	DATE OF DIAGNOSIS - TUBERCULOSIS - Converted to days since reference point
219	CEE7_DAYS	Num	8	DATE OF DIAGNOSIS - EXTRAPUL TUBERCULO - Converted to days since reference point
220	CEE8_DAYS	Num	8	DATE OF DIAGNOSIS - TOXOPLASMOSIS - Converted to days since reference point
221	CEE9_DAYS	Num	8	DATE OF DIAGNOSIS - CMV RETINITIS - Converted to days since reference point
222	CEE10_DAYS	Num	8	DATE OF DIAGNOSIS - OTHER CMV INFECT - Converted to days since reference point
223	CEE11_DAYS	Num	8	DATE OF DIAGNOSIS - STAPH AUREUS - Converted to days since reference point
224	CEE12_DAYS	Num	8	DATE OF DIAGNOSIS - JOINT/SOFT TISSUE - Converted to days since reference point

Num	Variable	Type	Len	Label
225	CEE13_DAYS	Num	8	DATE OF DIAGNOSIS - PERSIS/INTER DIARRHEA - Converted to days since reference point
226	SUBJ_ID	Char	8	Subject identifier

Data Set Name: mhcs_i_followup.sas7bdat

Num	Variable	Type	Len	Label
1	FORM	Num	8	Form Number
2	H27_A3	Num	8	SUBJECT HIV STATUS
3	H27_A4	Num	8	SUBJECT HAD LOW CD4 SINCE LAST VISIT
4	H27_A4A	Num	8	CD4 ABSOLUTE
5	H27_A4P	Num	8	CD4 PERCENT
6	H27_A5	Num	8	SUBJECT DIAGNOSED WITH WITH ANY DISEASE
7	H27_A6	Num	8	WHICH AIDS-DEFINING DISEASE(S)
8	H27_A6A	Num	8	PNEUMOCYSTIS CARINII PNEUMONIA
9	H27_A6B	Num	8	WASTING SYNDROME
10	H27_A6C	Num	8	HIV ENCEPHALOPATHY/HIV DEMENTIA
11	H27_A6D	Num	8	CANDIDIASIS OF ESOPHAGUS/LUNGS
12	H27_A6E	Num	8	CRYPTOSPORIDIOSIS WITH DIARRHEA
13	H27_A6F	Num	8	HERPES SIMPLEX IN LUNGS/ESOPHAGUS
14	H27_A6G	Num	8	HERPES SIMPLEX ULCER FOR >1 MONTH
15	H27_A6H	Num	8	PROGRESSIVE MULTIFOCAL LEUKOENCEPHALOPAT
16	H27_A6I	Num	8	TOXOPLASMOSIS OF THE BRAIN
17	H27_A6J	Num	8	COCCIDIOIDOMYCOSIS, EXTRAPULMONARY
18	H27_A6K	Num	8	HISTOPLASMOSIS, EXTRAPULMONARY
19	H27_A6L	Num	8	CYPTOCOCCOSIS, EXTRAPULMONARY
20	H27_A6M	Num	8	SALMONELLA, SEPTICEMIA, RECURRENT
21	H27_A6N	Num	8	ISOSPORIASIS WITH DIARRHEA
22	H27_A6O	Num	8	LIP OR PULMONARY LYMPHOID HYPERPLASIA
23	H27_A6P	Num	8	LYMPHOMA OF THE BRAIN
24	H27_A6Q	Num	8	NON-HODGIN'S LYMPHOMA
25	H27A6QSS	Num	8	SPECIFY NHL SITE
26	H27A6QST	Num	8	SPECIFY NHL TYPE
27	H27_A6R	Num	8	KAPOS'I'S SARCOMA
28	H27_A6S	Num	8	MYCOBACTERIUM AVIUM
29	H27_A6SS	Num	8	SPECIFY MAI SITE
30	H27_A6T	Num	8	CMV
31	H27_A6TS	Num	8	CMV-SPECIFY SITE
32	H27_A6U	Num	8	BACTERIAL INFECTIONS
33	H27_A6U1	Num	8	BACTERIAL INFECTIONS-1
34	H27A6US1	Num	8	SPECIFY BACTERIA 1
35	H27_A6U2	Num	8	BACTERIAL INFECTIONS-2
36	H27A6US2	Num	8	SPECIFY BACTERIA 2

Num	Variable	Type	Len	Label
37	H27_A6W	Num	8	PULMONARY TUBERCULOSIS
38	H27_A6X	Num	8	RECURRENT PNEUMONIA
39	H27_A6Y	Num	8	OTHER DISEASE NOT LISTED
40	H27_A6YS	Num	8	SPECIFY OTHER DIESEASE NOT LISTED
41	H27_A7	Num	8	SUBJECT RECEIVED HIV-RELATED MEDS
42	H27_B1	Num	8	SUBJECT DIAGNOSED WITH CANCER
43	H27_B2	Num	8	CANCER PREVIOUSLY REPORTED
44	H27_B2AT	Num	8	FIRST CANCER-TYPE
45	H27_B2AS	Num	8	FIRST CANCER-SITE
46	H27_B2AP	Num	8	FIRST CANCER-IS SITE PRIMARY
47	H27_B2AU	Num	8	FIRST CANCER-DIAGNOSIS DATE-UNKNOWN
48	H27_B2BT	Num	8	SECOND CANCER-TYPE
49	H27_B2BS	Num	8	SECOND CANCER-SITE
50	H27_B2BP	Num	8	SECOND CANCER-IS SITE PRIMARY
51	H27_B2BU	Num	8	SECOND CANCER-DIAGNOSIS DATE-UNKNOWN
52	H27_C1	Num	8	DIAGNOSED WITH CONDITION RELATED TO LIVE
53	H27_C1AA	Num	8	LIVER CONDITION-ASCITES
54	H27_C1AB	Num	8	LIVER CONDITION-ESOPHAGEAL VARCIES
55	H27_C1AC	Num	8	LIVER CONDITION-CIRRHOSIS
56	H27_C1AD	Num	8	LIVER CONDITION-HEPATIC ENCEPHALOPATHY
57	H27_C1AE	Num	8	LIVER CONDITION-JAUNDICE
58	H27_C1AF	Num	8	LIVER CONDITION-HEPATOCELLULAR CARCINOMA
59	H27_C1AG	Num	8	LIVER CONDITION-ALCOHOLIC LIVER DISEASE
60	H27_C1AH	Num	8	OTHER LIVER DISEASE
61	H27C1AHS	Num	8	OTHER LIVER DISEASE-SPECIFY
62	H27_C1B	Num	8	ANTI-HCV LIVER DISEASE MEDICATIONS TAKEN
63	H27_C1CA	Num	8	INTERFERON ALPHA-2B
64	H27_C1CB	Num	8	INTERFERON ALPHA-2A
65	H27_C1CC	Num	8	INTERFERON ALFA-N1
66	H27_C1CD	Num	8	RIBAVIRON,REBETOL
67	H27_C1CE	Num	8	INTERFERON ALFACON-1
68	H27_C1CF	Num	8	REBETRON
69	H27_C1CG	Num	8	FEMOCLOVIR
70	H27_C1CH	Num	8	LAMIVUDINE,3TC
71	H27_C1CI	Num	8	OTHER ANTI HCV OR LIVER DISEASE DRUG
72	H27C1CIS	Num	8	SPECIFY OTHER HCV DRUG
73	H27_D1	Num	8	DIAGNOSED WITH CONDITION NOT REPORTED TO
74	H27_D2A	Num	8	NON-AIDS PNEUMONIA
75	H27_D2AS	Num	8	NON-AIDS PNEUMONIA-SPECIFY TYPE

Num	Variable	Type	Len	Label
76	H27_D2B	Num	8	NON-AIDS CMV INFECTION
77	H27_D2BS	Num	8	NON-AIDS CMV INFECTION-SPECIFY SITE
78	H27_D2C	Num	8	STAPH AUREUS INFECTION
79	H27_D2CS	Num	8	STAPH AUREUS INFECTION-SPECIFY SITE
80	H27_D2D	Num	8	JOINT OR SOFT TISSUE INFECTION
81	H27_D2DS	Num	8	JOINT/TISSUE INFECTION-SPECIFY SITE
82	H27_D2E	Num	8	NON-AIDS DEFINING PERSISTENT DIARRHEA
83	H27_D2ES	Num	8	NON-AIDS DEFINING DIARRHEA-SPECIFY CAUSE
84	H27_D2F	Num	8	HERPES ZOSTER/SHINGLES
85	H27_D2FS	Num	8	HERPES ZOSTER/SHINGLES-SPECIFY SITE
86	H27D2G1S	Num	8	SPECIFY OTHER HIV-RELATED INFECTION-1
87	H27D2G2S	Num	8	SPECIFY OTHER HIV-RELATED INFECTION-2
88	H27D2G3S	Num	8	SPECIFY OTHER HIV-RELATED INFECTION-3
89	H27_E1	Num	8	SUBJECT EVALUATED FOR HEPATITIS B
90	H27_E1A	Num	8	HSs ANTIBODY
91	H27_E1B	Num	8	HSc ANTIBODY
92	H27_E1C	Num	8	HS CORE ANTIBODY
93	H27_E2	Num	8	SUBJECT EVALUATED FOR HEPATITIS C
94	H27_E2A	Num	8	HEPATITIS C ANTIBODY
95	H27_E2B	Num	8	HEPATITIS C ANTIBODY EVER POSITIVE
96	H27_E3A	Num	8	HEPATITIS B VACCINE?
97	H27E3AD	Num	8	HEPATITIS B VACCINE-DOSES
98	H27_E3B	Num	8	PNEUMOCOCCAL VACCINE?
99	H27_E3C	Num	8	INFLUENZA VACCINE?
100	H27_E3D	Num	8	HEPATITIS A VACCINE?
101	H27E3DD	Num	8	HEPATITIS A VACCINE-DOSES
102	H27_E3E	Num	8	VARICELLA VACCINE?
103	H27E3ED	Num	8	VARICELLA VACCINE-DOSES
104	H27_F1	Num	8	SUBJECT USE FACTOR VIII PRODUCTS
105	H27F1AR1	Num	8	FACTOR VIII-SPECIFY RECOMBINANT PRODUCT-
106	H27F1AR2	Num	8	FACTOR VIII-SPECIFY RECOMBINANT PRODUCT-
107	H27F1AR3	Num	8	FACTOR VIII-SPECIFY RECOMBINANT PRODUCT-
108	H27F1AR4	Num	8	FACTOR VIII-SPECIFY RECOMBINANT PRODUCT-
109	H27F1AM1	Num	8	FACTOR VIII-SPECIFY MONOCLONAL-1
110	H27F1AM2	Num	8	FACTOR VIII-SPECIFY MONOCLONAL-2
111	H27F1AM3	Num	8	FACTOR VIII-SPECIFY MONOCLONAL-3
112	H27F1AM4	Num	8	FACTOR VIII-SPECIFY MONOCLONAL-4
113	H27F1AI1	Num	8	FACTOR VIII-SPECIFY INTERMEDIATE/HIGH PU
114	H27F1AI2	Num	8	FACTOR VIII-SPECIFY INTERMEDIATE/HIGH PU

Num	Variable	Type	Len	Label
115	H27F1AI3	Num	8	FACTOR VIII-SPECIFY INTERMEDIATE/HIGH PU
116	H27F1AI4	Num	8	FACTOR VIII-SPECIFY INTERMEDIATE/HIGH PU
117	H27_F2	Num	8	SUBJECT USE FACTOR IX PRODUCTS
118	H27F2AR1	Num	8	FACTOR IX-SPECIFY RECOMBINANT PRODUCT-1
119	H27F2AR2	Num	8	FACTOR IX-SPECIFY RECOMBINANT PRODUCT-2
120	H27F2AR3	Num	8	FACTOR IX-SPECIFY RECOMBINANT PRODUCT-3
121	H27F2AR4	Num	8	FACTOR IX-SPECIFY RECOMBINANT PRODUCT-4
122	H27F2AM1	Num	8	FACTOR IX-SPECIFY MONOCLONAL-1
123	H27F2AM2	Num	8	FACTOR IX-SPECIFY MONOCLONAL-2
124	H27F2AM3	Num	8	FACTOR IX-SPECIFY MONOCLONAL-3
125	H27F2AM4	Num	8	FACTOR IX-SPECIFY MONOCLONAL-4
126	H27F2AI1	Num	8	FACTOR IX-SPECIFY INTERMEDIATE/HIGH PURI
127	H27F2AI2	Num	8	FACTOR IX-SPECIFY INTERMEDIATE/HIGH PURI
128	H27F2AI3	Num	8	FACTOR IX-SPECIFY INTERMEDIATE/HIGH PURI
129	H27F2AI4	Num	8	FACTOR IX-SPECIFY INTERMEDIATE/HIGH PURI
130	H27_F3	Num	8	SUBJECT USE INHIBITOR PRODUCTS
131	H27_F3_1	Num	8	SUBJECT USE HYATE C
132	H27_F3_2	Num	8	SUBJECT USE FEIBA
133	H27_F3_3	Num	8	SUBJECT USE AUTOPLEX T
134	H27_F3_4	Num	8	SUBJECT USE FACTOR VIIa
135	H27_F3_5	Num	8	SUBJECT USE OTHER INHIBITOR PRODUCT
136	H27_F3S	Num	8	SPECIFY OTHER INHIBITOR PRODUCT USED
137	H27_F4	Num	8	CRYOPRECIPITATE,PLASMA, OR FFP RECEIVED
138	H27_F5	Num	8	STIMATE (DDAVP) RECEIVED
139	H27_F6	Num	8	ANY OTHER BLOOD COMPONENTS RECEIVED
140	H27_F6S1	Num	8	SPECIFY OTHER BLOOD COMPONENT RECEIVED-1
141	H27_F6S2	Num	8	SPECIFY OTHER BLOOD COMPONENT RECEIVED-2
142	H27_F7A	Num	8	TOTAL FACTOR VIII RECEIVED
143	H27_F7B	Num	8	TOTAL FACTOR IX RECEIVED
144	H27_G1	Num	8	SUBJECT'S HEMOPHILIA GENETIC DEFECT
145	H27_G1S	Num	8	SUBJECT'S HEMOPHILIA GENETIC DEFECT-SPEC
146	H27_G2	Num	8	WAS AN INHIBITOR EVER DETECTED IN THE PL
147	H27_G3	Num	8	WAS AN INHIBITOR DETECTED IN THE PAST 1
148	H27_G3A	Num	8	HIGHEST DOCUMENTED INHIBITOR PAST 12 MON
149	H27_G3AU	Num	8	HIGHEST DOCUMENTED INHIBITOR-UNKNOWN
150	H27_G4	Num	8	INHIBITOR SPONTANEOUSLY DISAPPEAR
151	H27_G5	Num	8	SUBJECT BEEN RECHALLENGED
152	H27_G6	Num	8	INHIBITOR RECUR SUBSEQUENT TO RECHALLENG
153	H27_G7	Num	8	SUBJECT ON IMMUNE TOLERANCE TREATMENT

Num	Variable	Type	Len	Label
154	H27_G8	Num	8	OUTCOME OF IMMUNE TOLERANCE TREATMENT
155	H27_H1	Num	8	SUBJECT STATUS IN STUDY
156	H27_H2	Num	8	REASON FOR DISCONTINUATION
157	H27_H3U	Num	8	DATE LAST KNOW ALIVE-UNKNOWN
158	H27_H4	Num	8	IS DATE OF DEATH KNOW
159	H27_H5	Num	8	CAUSE OF DEATH KNOWN
160	H27_H5AP	Num	8	PRIMARY CAUSE OF DEATH
161	H27H5AP2	Num	8	OTHER PRIMARY CAUSE OF DEATH-SPECIFY
162	H27_H5A1	Num	8	SECONDARY CAUSE OF DEATH: AIDS
163	H27_H5A2	Num	8	SECONDARY CAUSE OF DEATH: OTHER HIV DISE
164	H27_H5A3	Num	8	SECONDARY CAUSE OF DEATH: LIVER FAILURE
165	H27_H5A4	Num	8	SECONDARY CAUSE OF DEATH: HEMORRHAGE
166	H27_H5A5	Num	8	SECONDARY CAUSE OF DEATH: OTHER BLOOD DI
167	H27_H5A6	Num	8	SECONDARY CAUSE OF DEATH: CANCER
168	H27H5A6S	Num	8	SECONDARY CAUSE OF DEATH: SPECIFY CANCER
169	H27_H5A7	Num	8	SECONDARY CAUSE OF DEATH: TRAUMA
170	H27_H5A8	Num	8	SECONDARY CAUSE OF DEATH: HEART DISEASE
171	H27_H5A9	Num	8	SECONDARY CAUSE OF DEATH: RENAL DISEASE
172	H27H5A10	Num	8	SECONDARY CAUSE OF DEATH: NON AIDS INFEC
173	H27H5A11	Num	8	SECONDARY CAUSE OF DEATH: STROKE
174	H27H5AS2	Num	8	OTHER SECONDARY CAUSE OF DEATH-SPECIFY
175	H27H5AS3	Num	8	OTHER SECONDARY CAUSE OF DEATH-SPECIFY
176	H27_H6	Num	8	WAS AN AUTOPSY PERFORMED
177	H276U1_DAYS	Num	8	BACTERIAL INFECTIONS-1 - Converted to days since reference point
178	H276U2_DAYS	Num	8	BACTERIAL INFECTIONS-2 - Converted to days since reference point
179	H27A6A_DAYS	Num	8	PNEUMOCYSTIS CARINII PNEUMONIA DATE - Converted to days since reference point
180	H27A6B_DAYS	Num	8	WASTING SYNDROME DATE - Converted to days since reference point
181	H27A6C_DAYS	Num	8	HIV ENCEPHALOTPATHY/HIV DEMENTIA DATE - Converted to days since reference point
182	H27A6D_DAYS	Num	8	CANDIDIASIS OF ESOPHAGUS/LUNGS - Converted to days since reference point
183	H27A6E_DAYS	Num	8	CRYPTOSPORIDIOSIS WITH DIARRHEA - Converted to days since reference point
184	H27A6F_DAYS	Num	8	HERPES SIMPLEX IN LUNGS/ESOPHAGUS - Converted to days since reference point
185	H27A6G_DAYS	Num	8	HERPES SIMPLEX ULCER FOR >1 MONTH - Converted to days since reference point
186	H27A6H_DAYS	Num	8	PROGRESSIVE MULTIFOCAL LEUKOENCEPHALOPATHY - Converted to days since reference point
187	H27A6I_DAYS	Num	8	TOXOPLASMOSIS OF THE BRAIN - Converted to days since reference point
188	H27A6J_DAYS	Num	8	COCCIDIOIDOMYCOSIS, EXTRAPULMONARY - Converted to days since reference point
189	H27A6K_DAYS	Num	8	HISTOPLASMOSIS, EXTRAPULMONARY - Converted to days since reference point
190	H27A6L_DAYS	Num	8	CYPTOCOCCOSIS, EXTRAPULMONARY - Converted to days since reference point

Num	Variable	Type	Len	Label
191	H27A6M_DAYS	Num	8	SALMONELLA, SEPTICEMIA, RECURREN - Converted to days since reference point
192	H27A6N_DAYS	Num	8	ISOSPORIASIS WITH DIARRHEA - Converted to days since reference point
193	H27A6O_DAYS	Num	8	LIP OR PULMONARY LYMPHOID HYPERPLASIA - Converted to days since reference point
194	H27A6P_DAYS	Num	8	LYMPHOMA OF THE BRAIN - Converted to days since reference point
195	H27A6Q_DAYS	Num	8	NON-HODGINS LYMPHOMA - Converted to days since reference point
196	H27A6R_DAYS	Num	8	KAPOSIS SARCOMA - Converted to days since reference point
197	H27A6S_DAYS	Num	8	MYCOBACTERIUM AVIUM - Converted to days since reference point
198	H27A6T_DAYS	Num	8	CMV - Converted to days since reference point
199	H27A6U_DAYS	Num	8	BACTERIAL INFECTIONS - Converted to days since reference point
200	H27A6W_DAYS	Num	8	PULMONARY TUBERCULOSIS - Converted to days since reference point
201	H27A6X_DAYS	Num	8	RECURRENT PNEUMONIA - Converted to days since reference point
202	H27A6Y_DAYS	Num	8	OTHER DISEASE NOT LISTED - Converted to days since reference point
203	H27_B2A_DAYS	Num	8	FIRST CANCER-DIAGNOSIS DATE - Converted to days since reference point
204	H27_B2B_DAYS	Num	8	SECOND CANCER-DIAGNOSIS DATE - Converted to days since reference point
205	H27C1AA_DAYS	Num	8	ASCITES-DATE - Converted to days since reference point
206	H27C1AB_DAYS	Num	8	ESOPHAGEAL VARCIES-DATE - Converted to days since reference point
207	H27C1AC_DAYS	Num	8	CIRRHOSIS-DATE - Converted to days since reference point
208	H27C1AD_DAYS	Num	8	HEPATIC ENCEPHALOPATHY-DATE - Converted to days since reference point
209	H27C1AE_DAYS	Num	8	JAUNDICE-DATE - Converted to days since reference point
210	H27C1AF_DAYS	Num	8	HEPATOCELLULAR CARCINOMA-DATE - Converted to days since reference point
211	H27C1AG_DAYS	Num	8	ALCOHOLIC LIVER DISEASE-DATE - Converted to days since reference point
212	H27C1AH_DAYS	Num	8	OTHER LIVER DISEASE-DATE - Converted to days since reference point
213	H27C1AR_MONTHS	Num	8	INTERFERON ALPHA-2B-DATE MOST RECENTLY - Converted to months since reference point
214	H27C1AS_MONTHS	Num	8	INTERFERON ALPHA-2B-DATE STARTED - Converted to months since reference point
215	H27C1BR_MONTHS	Num	8	INTERFERON ALPHA-2A-DATE MOST RECENTLY - Converted to months since reference point
216	H27C1BS_MONTHS	Num	8	INTERFERON ALPHA-2A-DATE STARTED - Converted to months since reference point
217	H27C1CR_MONTHS	Num	8	INTERFERON ALFA-N1-DATE MOST RECENTLY - Converted to months since reference point
218	H27C1CS_MONTHS	Num	8	INTERFERON ALFA-N1-DATE MOST RECENTLY - Converted to months since reference point
219	H27C1DR_MONTHS	Num	8	RIBAVIRON,REBETOL-DATE MOST RECENTLY - Converted to months since reference point
220	H27C1DS_MONTHS	Num	8	RIBAVIRON,REBETOL-DATE STARTED - Converted to months since reference point
221	H27C1ER_MONTHS	Num	8	INTERFERON ALFACON-1-DATE MOST RECENTLY - Converted to months since reference point
222	H27C1ES_MONTHS	Num	8	INTERFERON ALFACON-1-DATE MOST RECENTLY - Converted to months since reference point
223	H27C1FR_MONTHS	Num	8	REBETRON-DATE MOST RECENTLY - Converted to months since reference point

Num	Variable	Type	Len	Label
224	H27C1FS_MONTHS	Num	8	REBETRON-DATE STARTED - Converted to months since reference point
225	H27C1GR_MONTHS	Num	8	FEMOCLOVIR-DATE MOST RECENTLY - Converted to months since reference point
226	H27C1GS_MONTHS	Num	8	FEMOCLOVIR-DATE STARTED - Converted to months since reference point
227	H27C1HR_MONTHS	Num	8	LAMIVUDINE,3TC-DATE MOST RECENTLY - Converted to months since reference point
228	H27C1HS_MONTHS	Num	8	LAMIVUDINE,3TC-DATE STARTED - Converted to months since reference point
229	H27C1IR_MONTHS	Num	8	OTHER HCV DRUG-DATE MOST RECENTLY - Converted to months since reference point
230	H27C1IS_MONTHS	Num	8	OTHER HCV DRUG-DATE STARTED - Converted to months since reference point
231	H27D2G1_DAYS	Num	8	OTHER HIV-RELATED INFECTION 1-DATE - Converted to days since reference point
232	H27D2G2_DAYS	Num	8	OTHER HIV-RELATED INFECTION 2-DATE - Converted to days since reference point
233	H27D2G3_DAYS	Num	8	OTHER HIV-RELATED INFECTION 3-DATE - Converted to days since reference point
234	H27_D2A_DAYS	Num	8	NON-AIDS PNEUMONIA-DATE - Converted to days since reference point
235	H27_D2B_DAYS	Num	8	NON-AIDS CMV INFECTION-DATE - Converted to days since reference point
236	H27_D2C_DAYS	Num	8	STAPH AUREUS INFECTION-DATE - Converted to days since reference point
237	H27_D2D_DAYS	Num	8	JOINT/TISSUE INFECTION-DATE - Converted to days since reference point
238	H27_D2E_DAYS	Num	8	NON-AIDS DEFINING DIARRHEA-DATE - Converted to days since reference point
239	H27_D2F_DAYS	Num	8	HERPES ZOSTER/SHINGLES-DATE - Converted to days since reference point
240	H27_E1_DAYS	Num	8	SUBJECT EVALUATED FOR HEPATITIS B-DATE - Converted to days since reference point
241	H27_E2_DAYS	Num	8	SUBJECT EVALUATED FOR HEPATITIS C-DATE - Converted to days since reference point
242	H27E3AF_MONTHS	Num	8	HEPATITIS B VACCINE-DATE FIRST DOSE - Converted to months since reference point
243	H27E3AR_MONTHS	Num	8	HEPATITIS B VACCINE-DATE MOST RECENT DOSE - Converted to months since reference point
244	H27E3BR_MONTHS	Num	8	PNEUMOCOCCAL VACCINE-DATE MOST RECENT DOSE - Converted to months since reference point
245	H27E3CR_MONTHS	Num	8	INFLUENZA VACCINE-DATE MOST RECENT DOSE - Converted to months since reference point
246	H27E3DF_MONTHS	Num	8	HEPATITIS A VACCINE-DATE FIRST DOSE - Converted to months since reference point
247	H27E3DR_MONTHS	Num	8	HEPATITIS A VACCINE-DATE MOST RECENT DOSE - Converted to months since reference point
248	H27E3EF_MONTHS	Num	8	VARICELLA VACCINE-DATE FIRST DOSE - Converted to months since reference point
249	H27E3ER_MONTHS	Num	8	VARICELLA VACCINE-DATE MOST RECENT DOSE - Converted to months since reference point
250	H27_A1_DAYS	Num	8	DATE FORM COMPLETED - Converted to days since reference point
251	H27_A2_DAYS	Num	8	DATE OF MOST CURRENT EVALUATION - Converted to days since reference point
252	H27_A4_DAYS	Num	8	DATE SAMPLE DRAWN - Converted to days since reference point
253	H27_H3_DAYS	Num	8	DATE LAST KNOW ALIVE - Converted to days since reference point
254	H27_H4A_DAYS	Num	8	DATE LAST KNOW ALIVE - Converted to days since reference point
255	H27_H4D_DAYS	Num	8	DATE OF DEATH - Converted to days since reference point
256	SUBJ_ID	Char	8	Subject identifier

Data Set Name: mhcs_i_hipurity.sas7bdat

Num	Variable	Type	Len	Label
1	FORM	Num	4	Form Number
2	H17_2A	Num	4	FACTORS OBTAINED:NON-HOSPITAL CARE COMPA
3	H17_2B	Num	4	FACTORS OBTAINED:HOSPITAL HOME CARE COMP
4	H17_2C	Num	4	FACTORS OBTAINED:HOSPITAL PHARMACY
5	H17_2D	Num	4	FACTORS OBTAINED:STATE PROGRAM
6	H17_2E	Num	4	FACTORS OBTAINED:CONSORTIUM
7	H17_2F	Num	4	FACTORS OBTAINED:CLINICAL TRIAL
8	H17_2G	Num	4	FACTORS OBTAINED:OTHER SPECIFY
9	H17_3	Num	4	PRODUCT PATIENT CURRENTLY BEING TREATED
10	H17_4	Num	8	CHARGE PER UNIT TO PATIENT FOR PRODUCT
11	H17_5BOX	Num	4	HEM A: PATIENT NEVER USED AFFINITY PURIF
12	H17_6BOX	Num	4	HEM A: PATIENT NEVER USED RECOMBINANT PR
13	H17_7A	Num	4	HEM A: PATIENT REQUESTED PRODUCT
14	H17_7B	Num	4	HEM A: PATIENT'S HIV/CD4/AIDS STATUS
15	H17_7C	Num	4	HEM A: PATIENT NOT PREVIOUSLY TRANSFUSED
16	H17_7D	Num	4	HEM A: PT. ENROLLED IN CLINICAL TRIAL OF
17	H17_7E	Num	4	HEM A: INSURANCE REIMBURSEMENT
18	H17_7F	Num	4	HEM A: HOME CARE COMPANY RECOMMENDATION
19	H17_7G	Num	4	HEM A: DECREASED RISK OF TRANSFUSION-ASS
20	H17_7H	Num	4	HEM A:DECISION TO PLACE PT. ON RECOMBINA
21	H17_8A	Num	4	HEM A: PATIENT DECISION
22	H17_8B	Num	4	HEM A:FEAR OF INHIBITOR DEVELOPMENT
23	H17_8C	Num	4	HEM A: SATISFACTION WITH ANOTHER PRODUCT
24	H17_8D	Num	4	HEM A PATIENT: COST/INSURANCE
25	H17_8E	Num	4	HEM A PATIENT: PRODUCT NOT AVAILABLE
26	H17_8F	Num	4	HEM A PATIENT: DIMINISHED/LACK OF EFFICA
27	H17_8G	Num	4	HEM A PATIENT: NONE OF THE ABOVE
28	H17_9BOX	Num	4	HEM B: PATIENT NEVER USED PURIFIED PRODU
29	H17_10A	Num	4	HEM B: PATIENT REQUESTED PRODUCT
30	H17_10B	Num	4	HEM B: DECREASED RISK OF THROMBOSIS
31	H17_10C	Num	4	HEM B: PATIENT'S HIV/CD4/AIDS STATUS
32	H17_10D	Num	4	HEM B: PATIENT NOT PREVIOUSLY TRANSFUSED
33	H17_10E	Num	4	HEM B: HOME CARE COMPANY RECOMMENDATION
34	H17_10F	Num	4	HEM B: ONLY PRODUCT AVAILABLE
35	H17_10G	Num	4	HEM B: INSURANCE REIMBURSEMENT
36	H17_10H	Num	4	HEM B: DECREASED RISK INFECTION

Num	Variable	Type	Len	Label
37	H17_10I	Num	4	HEM B: INFLUENCED DECISION-OTHER SPECIFY
38	H17_11A	Num	4	HEM B: NOT PLACED ON F-IX: PATIENT DECIS
39	H17_11B	Num	4	HEM B: NOT PLACED ON F-IX: COST/INSURANC
40	H17_11C	Num	4	HEM B: NOT PLACED ON F-IX: SATISFIED W/
41	H17_11D	Num	4	HEM B: NOT PLACED ON F-IX: PRODUCT NOT A
42	H17_11E	Num	4	HEM B: NOT PLACED ON F-IX: DIMINSHED/LAC
43	H17_11F	Num	4	HEM B: NOT PLACED ON F-IX: NONE OF THE A
44	H17LS_DAYS	Num	8	DATE PATIENT WAS LAST SEEN - Converted to days since reference point
45	H17_5_MONTHS	Num	8	HEM A: DATE 1ST PURIFIED F-VIII PRODUCT - Converted to months since reference point
46	H17_6_MONTHS	Num	8	HEM A: DATE 1ST RECOMBINANT F-VIII PRODUCT - Converted to months since reference point
47	H17_9_MONTHS	Num	8	HEM B: DATE 1ST PURIFIED F-IX PRODUCT - Converted to months since reference point
48	SUBJ_ID	Char	8	Subject identifier

Data Set Name: mhcs_i_history.sas7bdat

Num	Variable	Type	Len	Format	Informat	Label
1	SUBJ_ID	Char	9	\$11.	\$11.	Subject identifier
2	FORM	Num	3			Form Number
3	HHA1	Num	3			SEX
4	HHA2	Num	3			Race: 1=White, 2=Black, 3=Other
5	HHA4	Num	3			MARITAL STATUS
6	HHA5	Num	3			HEMOPHILIA TYPE
7	HHA6	Num	3			SEVERITY
8	HHA7_O1A	Num	3			1ST OTHER REL ALSO IN STUDY-RELAT CODE
9	HHA7_O2A	Num	3			2ND OTHER REL ALSO IN STUDY-RELAT CODE
10	HHA7_O3A	Num	3			3RD OTHER REL ALSO IN STUDY-RELAT CODE
11	HHA7_O4A	Num	3			4TH OTHER REL ALSO IN STUDY-RELAT CODE
12	HHA10A	Num	3			LAST KNOWN HIV-1 SEROSTATUS OF PATIENT
13	HHA14A	Num	3			TOTAL NON-HEAT TRTD FACTR VIII RCVD-1978
14	HHA14B	Num	3			TOTAL NON-HEAT TRTD FACTR VIII RCVD-1979
15	HHA14C	Num	3			TOTAL NON-HEAT TRTD FACTR VIII RCVD-1980
16	HHA14D	Num	3			TOTAL NON-HEAT TRTD FACTR VIII RCVD-1981
17	HHA14E	Num	3			TOTAL NON-HEAT TRTD FACTR VIII RCVD-1982
18	HHA14F	Num	3			TOTAL NON-HEAT TRTD FACTR VIII RCVD-1983
19	HHA14G	Num	3			TOTAL NON-HEAT TRTD FACTR VIII RCVD-1984
20	HHA14H	Num	3			TOTAL NON-HEAT TRTD FACTR VIII RCVD-1985
21	HHA14I	Num	3			TOTAL NON-HEAT TRTD FACTR VIII RCVD-1986
22	HHA15A	Num	3			TOTAL HEAT TREATED FACTOR VIII RCVD-1983
23	HHA15B	Num	3			TOTAL HEAT TREATED FACTOR VIII RCVD-1984
24	HHA15C	Num	3			TOTAL HEAT TREATED FACTOR VIII RCVD-1985
25	HHA15D	Num	3			TOTAL HEAT TREATED FACTOR VIII RCVD-1986
26	HHA15E	Num	3			TOTAL HEAT TREATED FACTOR VIII RCVD-1987
27	HHA15F	Num	3			TOTAL HEAT TREATED FACTOR VIII RCVD-1988
28	HHA15G	Num	3			TOTAL HEAT TREATED FACTOR VIII RCVD-1989
29	HHA15H	Num	3			TOTAL HEAT TREATED FACTOR VIII RCVD-1990
30	HHA15I	Num	3			TOTAL HEAT TREATED FACTOR VIII RCVD-1991
31	HHA15J	Num	4			TOTAL HEAT TREATED FACTOR VIII RCVD-1992
32	HHA15K	Num	4			TOTAL HEAT TREATED FACTOR VIII RCVD-1993
33	HHA15L	Num	4			TOTAL HEAT TREATED FACTOR VIII RCVD-1994
34	HHA15M	Num	4			TOTAL HEAT TREATED FACTOR VIII RCVD-1995
35	HHA15N	Num	4			TOTAL HEAT TREATED FACTOR VIII RCVD-1996
36	HHA15O	Num	4			TOTAL HEAT TREATED FACTOR VIII RCVD-1997

Num	Variable	Type	Len	Format	Informat	Label
37	HHA16A	Num	3			TOTAL NON-HEAT TREATD FACTR IX RCVD-1978
38	HHA16B	Num	3			TOTAL NON-HEAT TREATD FACTR IX RCVD-1979
39	HHA16C	Num	3			TOTAL NON-HEAT TREATD FACTR IX RCVD-1980
40	HHA16D	Num	3			TOTAL NON-HEAT TREATD FACTR IX RCVD-1981
41	HHA16E	Num	3			TOTAL NON-HEAT TREATD FACTR IX RCVD-1982
42	HHA16F	Num	3			TOTAL NON-HEAT TREATD FACTR IX RCVD-1983
43	HHA16G	Num	3			TOTAL NON-HEAT TREATD FACTR IX RCVD-1984
44	HHA16H	Num	3			TOTAL NON-HEAT TREATD FACTR IX RCVD-1985
45	HHA16I	Num	3			TOTAL NON-HEAT TREATD FACTR IX RCVD-1986
46	HHA17A	Num	3			TOTAL HEAT TREATED FACTOR IX RCVD-1983
47	HHA17B	Num	3			TOTAL HEAT TREATED FACTOR IX RCVD-1984
48	HHA17C	Num	3			TOTAL HEAT TREATED FACTOR IX RCVD-1985
49	HHA17D	Num	3			TOTAL HEAT TREATED FACTOR IX RCVD-1986
50	HHA17E	Num	3			TOTAL HEAT TREATED FACTOR IX RCVD-1987
51	HHA17F	Num	3			TOTAL HEAT TREATED FACTOR IX RCVD-1988
52	HHA17G	Num	3			TOTAL HEAT TREATED FACTOR IX RCVD-1989
53	HHA17H	Num	3			TOTAL HEAT TREATED FACTOR IX RCVD-1990
54	HHA17I	Num	3			TOTAL HEAT TREATED FACTOR IX RCVD-1991
55	HHA17J	Num	4			TOTAL HEAT TREATED FACTOR IX RCVD-1992
56	HHA17K	Num	4			TOTAL HEAT TREATED FACTOR IX RCVD-1993
57	HHA17L	Num	4			TOTAL HEAT TREATED FACTOR IX RCVD-1994
58	HHA17M	Num	4			TOTAL HEAT TREATED FACTOR IX RCVD-1995
59	HHA17N	Num	4			TOTAL HEAT TREATED FACTOR IX RCVD-1996
60	HHA17O	Num	4			TOTAL HEAT TREATED FACTOR IX RCVD-1997
61	HHB1A	Num	3			HAS PATIENT EVER BEEN DIAGNOSED W/AIDS
62	HHB1B_S1	Num	3			FIRST DISEASE/SYMP THAT CAUSED DIAGNOSIS
63	HHB1B_S2	Num	3			SECOND DISEASE/SYMP THAT CAUSED DIAGNOSI
64	HHB1B_S3	Num	3			THIRD DISEASE/SYMP THAT CAUSED DIAGNOSIS
65	HHB1B_S4	Num	3			FOURTH DISEASE/SYMP THAT CAUSED DIAGNOSI
66	HHB1B_S5	Num	3			FIFTH DISEASE/SYMP THAT CAUSED DIAGNOSIS
67	HHB2A	Num	3			HAS PATIENT EVER BEEN DIAGNOSED W/ARC
68	HHB2B_S1	Num	3			FIRST DISEASE/SYMP THAT CAUSED DIAGNOSIS
69	HHB2B_S2	Num	3			SECOND DISEASE/SYMP THAT CAUSED DIAGNOSI
70	HHB2B_S3	Num	3			THIRD DISEASE/SYMP THAT CAUSED DIAGNOSIS
71	HHB2B_S4	Num	3			FOURTH DISEASE/SYMP THAT CAUSED DIAGNOSI
72	HHB2B_S5	Num	3			FIFTH DISEASE/SYMP THAT CAUSED DIAGNOSIS
73	HHB3A	Num	3			HAS PATIENT RCVD ANY OF FOLLOWING DRUGS
74	HHB3_RX1	Num	5			TOTAL WEEKS ON AZT(RETROVIR)
75	HHB3YN_1	Num	3			RCVD AZT DURING PAST MONTH

Num	Variable	Type	Len	Format	Informat	Label
76	HHB3_RX2	Num	5			TOTAL WEEKS ON RIBAVIRIN
77	HHB3YN_2	Num	3			RCVD RIBAVIRIN DURING PAST MONTH
78	HHB3_RX3	Num	5			TOTAL WEEKS ON DDC (DIDEOXYCYTIDINE)
79	HHB3YN_3	Num	3			RCVD DDC DURING PAST MONTH
80	HHB3_RX4	Num	5			TOTAL WEEKS ON ACYCLOVIR (ORAL OR IV)
81	HHB3YN_4	Num	3			RCVD ACYCLOVIR DURING PAST MONTH
82	HHB3_RX5	Num	5			TOTAL WEEKS ON ALPHA INTERFERON
83	HHB3YN_5	Num	3			RCVD ALPHA INTERFERON DURING PAST MONTH
84	HHB3_RX6	Num	5			TOTAL WEEKS ON DDI
85	HHB3YN_6	Num	3			RCVD DDI DURING PAST MONTH
86	HHB3_RX7	Num	5			TOTAL WEEKS ON AEROSOL. PENTAMIDINE
87	HHB3YN_7	Num	3			RCVD AERO PENTAMIDINE DURING PAST MONTH
88	HHB3_RX8	Num	5			TOTAL WEEKS ON AL 721
89	HHB3YN_8	Num	3			RCVD AL 721 DURING PAST MONTH
90	HHB3_RX9	Num	5			TOTAL WEEKS ON AMPLIGEN
91	HHB3YN_9	Num	3			RCVD AMPLIGEN DURING PAST MONTH
92	HHB3RX10	Num	5			TOTAL WEEKS ON TRIMETHOPRIM-SULFA
93	HHB3YN10	Num	3			RCVD TRIMETHOPRIM-SULFA DURING PAST MO
94	HHB3RX11	Num	5			TOTAL WEEKS ON IV PENTAMIDINE
95	HHB3YN11	Num	3			RCVD IV PENTAMIDINE DURING PAST MONTH
96	HHB3OTS1	Num	3			1ST OTHER ANTI-AIDS RX RCVD-SPECIFY
97	HHB3RXS1	Num	5			WEEKS ON 1ST OTHER ANTI-AIDS RX
98	HHB3YNS1	Num	3			RCVD 1ST OTHER RX DURING PAST MONTH
99	HHB3OTS2	Num	3			2ND OTHER ANTI-AIDS RX RCVD-SPECIFY
100	HHB3RXS2	Num	5			WEEKS ON 2ND OTHER ANTI-AIDS RX
101	HHB3YNS2	Num	3			RCVD 2ND OTHER RX DURING PAST MONTH
102	HHB3OTS3	Num	3			3RD OTHER ANTI-AIDS RX RCVD-SPECIFY
103	HHB3RXS3	Num	5			WEEKS ON 3RD OTHER ANTI-AIDS RX
104	HHB3YNS3	Num	3			RCVD 3RD OTHER RX DURING PAST MONTH
105	HHB3OTS4	Num	3			4TH OTHER ANTI-AIDS RX RCVD-SPECIFY
106	HHB3RXS4	Num	5			WEEKS ON 4TH OTHER ANTI-AIDS RX
107	HHB3YNS4	Num	3			RCVD 4TH OTHER RX DURING PAST MONTH
108	HHB3OTS5	Num	3			5TH OTHER ANTI-AIDS RX RCVD-SPECIFY
109	HHB3RXS5	Num	5			WEEKS ON 5TH OTHER ANTI-AIDS RX
110	HHB3YNS5	Num	3			RCVD 5TH OTHER RX DURING PAST MONTH
111	HHB4A	Num	3			EVER ENROLLED IN DOUBLE-BLINDED TRIAL
112	HHB4A_S1	Num	3			1ST DRUG USED IN THIS TRIAL
113	HHB4A_S2	Num	3			2ND DRUG USED IN THIS TRIAL
114	HHB4A_S3	Num	3			3RD DRUG USED IN THIS TRIAL

Num	Variable	Type	Len	Format	Informat	Label
115	HHB4A_S4	Num	3			4TH DRUG USED IN THIS TRIAL
116	HHB5	Num	3			KAPOSIS SARCOMA-SPECIFY HOW PROVEN
117	HHB5_YN	Num	3			WAS KAPOSIS SARCOMA PRESENT AT ANY TIME
118	HHB6	Num	3			LYMPHOMA-SPECIFY SITE AND TYPE
119	HHB6_YN	Num	3			WAS LYMPHOMA PRESENT AT ANY TIME
120	HHB7	Num	3			OTHER MALIGNANCY-SPECIFY SITE AND TYPE
121	HHB7_YN	Num	3			WERE OTHER MALIGNACIES PRSNT AT ANY TIME
122	HHB8	Num	3			PNEUMOCYSTIS CARINII PNEUMONIA-HOW PROV
123	HHB8_YN	Num	3			PNEUMOCYSTIS CARINII PNEUMONIA EVER PRES
124	HHB9	Num	3			OTHER PNEUMONIA-SPECIFY TYPE
125	HHB9_YN	Num	3			OTHER PNEUMONIA PRESENT AT ANY TIME
126	HHB10_YN	Num	3			HERPES ZOSTER(SHINGLES) EVER PRESENT
127	HHB11_YN	Num	3			ORAL CANDIDIASIS(THRUSH) EVER PRESENT
128	HHB11A	Num	3			CANDIDIASIS DUR OR SUBSQ TO ANTIBIOTIC T
129	HHB12_YN	Num	3			ORAL HAIRY LEUKOPLAKIA EVER PRESENT
130	HHB13	Num	3			TUBERCULOSIS-SPECIFY TYPE
131	HHB13_YN	Num	3			WAS TUBERCULOSIS PRESENT AT ANY TIME
132	HHB14	Num	3			TOXOPLASMOSIS-SPECIFY HOW PROVEN
133	HHB14_YN	Num	3			TOXOPLASMOSIS PRESENT AT ANY TIME
134	HHB15	Num	4			OTHER AIDS-RELATED INFECTION-SPECIFY
135	HHB15_YN	Num	3			OTHER AIDS-RELATED INFECTION EVER PRES
136	HHB16	Num	3			PERSISTENT OR INTERMIT DIARRHEA-SP CAUSE
137	HHB16_YN	Num	3			PERSIS OR INTERMIT DIARRHEA EVER PRESENT
138	HHB17_YN	Num	3			PERSISTENT FEVER PRESENT AT ANY TIME
139	HHB18_YN	Num	3			PERSIS NON-PRODUCTIVE COUGH EVER PRESENT
140	HHB19_YN	Num	3			UNEXPLAINED WEIGHT LOSS EVER PRESENT
141	HHB20_YN	Num	3			MEMORY OR CONCENTRATION PROB EVER PRES
142	HHB21_YN	Num	3			HIV-RELATD COORD OR MOTOR PROB EVER PRES
143	HHB22_YN	Num	3			CHANGE IN MOOD OR AFFECT EVER PRESENT
144	HHB23	Num	3			OTHER HIV NEUROLOGICAL ABNORMALITIES-SP
145	HHB23_YN	Num	3			OTHER HIV NEURO ABNORMALITIES EVER PRES
146	HHB24_YN	Num	3			PERSISTENT ANEMIA PRESENT AT ANY TIME
147	HHB25_YN	Num	3			PERSISTENT LEUKOPENIA PRESENT ANY TIME
148	HHB26	Num	3			PERSIS THROMBOCYTOPENIA-SP LOWEST COUNT
149	HHB26_YN	Num	3			PERSISTENT THROMBOCYTOPENIA EVER PRESENT
150	HHB27_YN	Num	3			CERVICAL LYMPHADENOPATHY EVER PRESENT
151	HHB28_YN	Num	3			OTHER EXTRAINGUINAL LYMPHADENOPATHY PRES
152	HHB29_YN	Num	3			HISTORY OF JAUNDICE PRESENT AT ANY TIME
153	HHB30_YN	Num	3			HISTORY OF TRANSAMINASE ELEVATION PRES

Num	Variable	Type	Len	Format	Informat	Label
154	HHB31_YN	Num	3			HISTORY OF SPLENOMEGALY EVER PRESENT
155	HHB31_SP	Num	3			SPLENOMEG-SP MAX CM BELOW COSTAL MARGIN
156	HHB32_YN	Num	3			HISTORY OF HEPATOMEGALY PRES AT ANY TIME
157	HHB32_SP	Num	3			HEPATOMEG-SP MAX CM BELOW COSTAL MARGIN
158	HHB1A_DAYS	Num	8			AIDS DATE OF DIAGNOSIS - Converted to days since reference point
159	HHB2A_DAYS	Num	8			ARC DATE OF DIAGNOSIS - Converted to days since reference point
160	HHA13_DAYS	Num	8			DATE ENROLLED IN STUDY - Converted to days since reference point
161	HHA12_DAYS	Num	8			FIRST DATE IN MED/CLINIC RECORD - Converted to days since reference point
162	HHA3_DAYS	Num	8			DATE OF BIRTH - Converted to days since reference point
163	HHB3_S1_MONTHS	Num	8			DATE STARTED 1ST OTH RX - Converted to months since reference point
164	HHB3_S2_MONTHS	Num	8			DATE STARTED 2ND OTH RX - Converted to months since reference point
165	HHB3_S3_MONTHS	Num	8			DATE STARTED 3RD OTH RX - Converted to months since reference point
166	HHB3_S4_MONTHS	Num	8			DATE STARTED 4TH OTH RX - Converted to months since reference point
167	HHB3_S5_MONTHS	Num	8			DATE STARTED 5TH OTH RX - Converted to months since reference point
168	HHB3_1_MONTHS	Num	8			DATE STARTED AZT - Converted to months since reference point
169	HHB3_2_MONTHS	Num	8			DATE STARTED RIBAVIRIN - Converted to months since reference point
170	HHB3_3_MONTHS	Num	8			DATE STARTED DDC - Converted to months since reference point
171	HHB3_4_MONTHS	Num	8			DATE STARTED ACYCLOVIR - Converted to months since reference point
172	HHB3_5_MONTHS	Num	8			DATE STARTED ALPHA INTERFERON - Converted to months since reference point
173	HHB3_6_MONTHS	Num	8			DATE STARTED DDI - Converted to months since reference point
174	HHB3_7_MONTHS	Num	8			DATE STARTED AERO PENTAMIDINE - Converted to months since reference point
175	HHB3_8_MONTHS	Num	8			DATE STARTED AL 721 - Converted to months since reference point
176	HHB3_9_MONTHS	Num	8			DATE STARTED AMPLIGEN - Converted to months since reference point
177	HHB3_10_MONTHS	Num	8			DATE STARTED TRIMETHOPRIM-SULFA - Converted to months since reference point
178	HHB3_11_MONTHS	Num	8			DATE STARTED IV PENTAMIDINE - Converted to months since reference point
179	HHB4A_DAYS	Num	8			DATE STARTED ON CLINICAL TRIAL - Converted to months since reference point
180	HHA10B_DAYS	Num	8			DATE LAST NEGATIVE SAMPL - Converted to days since reference point
181	HHA10c_DAYS	Num	8			DATE FIRST POSITIVE SAMPL - Converted to months since reference point

Num	Variable	Type	Len	Format	Informat	Label
182	HHA14j_DAYS	Num	8			LAST DATE RCVD NON-HEAT TRTD FACT VIII - Converted to days since reference point
183	HHA16j_DAYS	Num	8			LAST DATE RCVD NON-HEAT TRTD FACTR IX - Converted to days since reference point
184	HHB5_DAYS	Num	8			KAPOSIS SARCOMA-DATE OF DIAGNOSIS - Converted to days since reference point
185	HHB6_DAYS	Num	8			LYMPHOMA - DATE OF DIAGNOSIS - Converted to days since reference point
186	HHB7_DAYS	Num	8			OTHER MALIGNANCIES - DATE OF DIAGNOSIS - Converted to days since reference point
187	HHB8_DAYS	Num	8			PNEUMOCYSTIS CARINII PNEUMONIA - DATE OF DIAGNOSIS - Converted to days since reference point
188	HHB9_DAYS	Num	8			OTHER PNEUMONIA - DATE OF DIAGNOSIS - Converted to days since reference point
189	HHB10_DAYS	Num	8			HERPES ZOSTER - DATE OF DIAGNOSIS - Converted to days since reference point
190	HHB11_DAYS	Num	8			ORAL CANDIDIASIS - DATE OF DIAGNOSIS - Converted to days since reference point
191	HHB12_DAYS	Num	8			LEUKOPLAKIA - DATE OF DIAGNOSIS - Converted to days since reference point
192	HHB13_DAYS	Num	8			TUBERCULOSIS - DATE OF DIAGNOSIS - Converted to days since reference point
193	HHB14_DAYS	Num	8			TOXOPLASMOSIS - DATE OF DIAGNOSIS - Converted to days since reference point
194	HHB15_DAYS	Num	8			OTHER AIDS-REL INFEC - DATE OF DIAGNOSIS - Converted to days since reference point
195	HHB16_DAYS	Num	8			PERSIS/INTERMIT DIARRHEA - DATE OF DIAGNOSIS - Converted to days since reference point
196	HHB17_DAYS	Num	8			PERSISTENT FEVER - DATE OF DIAGNOSIS - Converted to days since reference point
197	HHB18_DAYS	Num	8			PERSIS NON-PROD COUGH - DATE OF DIAGNOSIS - Converted to days since reference point
198	HHB19_DAYS	Num	8			UNEXPLAINED WEIGHT LOSS - DATE OF DIAGNOSIS - Converted to days since reference point
199	HHB20_DAYS	Num	8			MEMORY OR CONC PROB- - DATE OF DIAGNOSIS - Converted to days since reference point
200	HHB21_DAYS	Num	8			COORD OR MOTOR PROBLEM - DATE OF DIAGNOSIS - Converted to days since reference point
201	HHB22_DAYS	Num	8			CHANGE IN MOOD/AFFECT - DATE OF DIAGNOSIS - Converted to days since reference point
202	HHB23_DAYS	Num	8			OTHER HIV NEURO ABNORMLTIES - DATE OF DIAGNOSIS - Converted to days since reference point
203	HHB24_DAYS	Num	8			PERSISTENT ANEMIA - DATE OF DIAGNOSIS - Converted to days since reference point
204	HHB25_DAYS	Num	8			PERSISTENT LEUKOPENIA - DATE OF DIAGNOSIS - Converted to days since reference point

Num	Variable	Type	Len	Format	Informat	Label
205	HHB26_DAYS	Num	8			PERSISTENT THROMBOCYTOPENIA - DATE OF DIAGNOSIS - Converted to days since reference point
206	HHB27_DAYS	Num	8			CERVICAL LYMPHADENOPATHY - DATE OF DIAGNOSIS - Converted to days since reference point
207	HHB28_DAYS	Num	8			OTHER EXTRAINGUINAL LYMPH - DATE OF DIAGNOSIS - Converted to days since reference point
208	HHB29_DAYS	Num	8			HISTORY OF JAUNDICE - DATE OF DIAGNOSIS - Converted to days since reference point
209	HHB30_DAYS	Num	8			HISTORY OF TRANSAMINASE ELEV - DATE OF DIAGNOSIS - Converted to days since reference point
210	HHB31_DAYS	Num	8			HISTORY OF SPLENOMEGALY - DATE OF DIAGNOSIS - Converted to days since reference point
211	HHB32_DAYS	Num	8			HISTORY OF HEPATOMEGALY - DATE OF DIAGNOSIS - Converted to days since reference point
212	HHA7_B1	Char	6			ID 1ST HEMO BRO ALSO IN STUDY
213	HHA7_B2	Char	6			ID 2ND HEMO BRO ALSO IN STUDY
214	HHA7_B3	Char	6			ID 3RD HEMO BRO ALSO IN STUDY
215	HHA7_C1	Char	6			ID 1ST HEMO COUS ALSO IN STUDY
216	HHA7_C2	Char	6			ID 2ND HEMO COUS ALSO IN STUDY
217	HHA7_C3	Char	6			ID 3RD HEMO COUS ALSO IN STUDY
218	HHA7_O1	Char	6			1ST OTHER REL ALSO IN STUDY
219	HHA7_O2	Char	6			2ND OTHER REL ALSO IN STUDY
220	HHA7_O3	Char	6			3RD OTHER REL ALSO IN STUDY
221	HHA7_O4	Char	6			4TH OTHER REL ALSO IN STUDY
222	HHA7_U1	Char	6			ID 1ST HEMO UNCLE ALSO IN STUDY
223	HHA7_U2	Char	6			ID 2ND HEMO UNCLE ALSO IN STUDY
224	HHA7_U3	Char	6			ID 3RD HEMO UNCLE ALSO IN STUDY

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Num	Variable	Type	Len	Label
1	L18_4YR	Num	5	YEAR OF SPLENECTOMY?
2	FORM	Num	4	Form Number
3	L18_2AP	Num	4	JAUNDICE PRESENT?
4	L18_2AA	Num	4	JAUNDICE-HOW ASCERTAINED?
5	L18_2AAS	Num	4	JAUNDICE-HOW ASCERTAINED-OTHER SPECIFY
6	L18_2BP	Num	4	ASCITES PRESENT?
7	L18_2BA	Num	4	ASCITES-HOW ASCERTAINED?
8	L18_2BAS	Num	4	ASCITES-HOW ASCERTAINED-OTHER SPECIFY
9	L18_2CP	Num	4	ESOPHAGEAL VARICES PRESENT?
10	L18_2CA	Num	4	ESOPHAGEAL VARICES-HOW ASCERTAINED?
11	L18_2CAS	Num	4	ESOPHAGEAL VARICES-HOW ASCERTAINED-OTHER
12	L18_2DSP	Num	4	SPECIFY OTHER SIGN OF HEPATIC FAILURE
13	L18_2DP	Num	4	OTHER SIGN OF HEPATIC FAILURE PRESENT?
14	L18_2DA	Num	4	OTHER SIGN OF HEPATIC FAILURE-HOW ASCERT
15	L18_2DAS	Num	4	HOW OTHER SIGN ASCERTAINED-OTHER SPECIFY
16	L18_3	Num	4	DOES SUBJECT HAVE SIGNS OF HEPATIC ENCEP
17	L18_3S	Num	4	SIGNS OF HEPATIC ENCEPHALOPHTHY-SPECIFY S
18	L18_4	Num	4	STATUS OF SUBJECT'S SPLEEN?
19	L18_4CM	Num	4	STATUS OF SUBJECT'S SPLEEN-ENLARGED, SPE
20	L18_4R	Num	4	STATUS OF SUBJECT'S SPLEEN-POST-SPLENECT
21	L18_5AR	Num	8	DIRECT BILIRUBIN (CONJUGATED)-SUBJECT'
22	L18_5AU	Num	8	DIRECT BILIRUBIN (CONJUGATED)-UPPER LI
23	L18_5BR	Num	8	INDIRECT BILIRUBIN (UNCONJUGATED)-SUBJEC
24	L18_5BU	Num	8	INDIRECT BILIRUBIN (UNCONJUGATED)-UPPER
25	L18_5CR	Num	8	TOTAL BILIRUBIN-SUBJECT'S RESULTS
26	L18_5CU	Num	8	TOTAL BILIRUBIN-UPPER LIMITS
27	L18_6AR	Num	8	PROTHROMBIN TIME(PT)-SUBJECT'S RESULTS
28	L18_6AU	Num	8	PROTHROMBIN TIME(PT)-UPPER LIMITS
29	L18_6BR	Num	8	INTERNATIONAL NORMALIZED RATIO-SUBJECTS
30	L18_6BU	Num	8	INTERNATIONAL NORMALIZED RATIO-UPPER LIM
31	L18_7	Num	4	IS THERE A REASON TO SUSPECT ALCOHOL ABU
32	L18_7E	Num	4	REASON TO SUSPECT ALCOHOL ABUSE-EXPLAIN
33	L18_8	Num	4	SUBJECT CURRENTLY TAKING ANY DRUGS?
34	L18_8A	Num	4	TAKING AZT
35	L18_8B	Num	4	TAKING DDI
36	L18_8C	Num	4	TAKING DDC

Num	Variable	Type	Len	Label
37	L18_8D	Num	4	TAKING D4T
38	L18_8E	Num	4	TAKING ACYCLOVIR
39	L18_8F	Num	4	TAKING FOSCARNET
40	L18_8G	Num	4	TAKING GANCICLOVIR
41	L18_8H	Num	4	TAKING ANTOVEQONE
42	L18_8I	Num	4	TAKING AEROSOLIZED PENTAMIDINE
43	L18_8J	Num	4	TAKING PENTAMIDINE -IV ONLY
44	L18_8K	Num	4	TAKING DAPSONE
45	L18_8L	Num	4	TAKING TRIMETHOPRIM-SULFA
46	L18_8M	Num	4	TAKING FLUCONAZOLE
47	L18_8N	Num	4	TAKING KETACONAZOLE
48	L18_8O	Num	4	TAKING ITRACONAZOLE
49	L18_8P	Num	4	TAKING OTHER DRUG-SPECIFY 1
50	L18_8Q	Num	4	TAKING OTHER DRUG-SPECIFY 2
51	L18_8R	Num	4	TAKING OTHER DRUG-SPECIFY 3
52	L18_9	Num	4	HAS SUBJECT TAKEN ALPHA INTERFERON?
53	L18_10R	Num	4	HOW WOULD YOU RATE THE ACCURACY OF RESPO
54	L18_10RS	Num	4	ACCURACY OF RESPONSES-SPECIFY
55	L18_11_1	Num	4	QUESTIONNAIRE ADMINISTERED-MAILED TO SUB
56	L18_11_2	Num	4	QUESTIONNAIRE ADMINISTERED-FACE-TO-FACE
57	L18_11_3	Num	4	QUESTIONNAIRE ADMINISTERED-SELF ADMIN. A
58	L18_11_4	Num	4	QUESTIONNAIRE ADMINISTERED-SELF ADMIN. W
59	L18_11_5	Num	4	QUESTIONNAIRE ADMIN.-ANOTHER PERSON COMP
60	L18_11_6	Num	4	HOW WAS QUESTIONNAIRE ADMINISTERED-UNKNO
61	L18_12HH	Num	4	LENGTH OF TIME ELAPSED FROM BLOOD DRAW-H
62	L18_12MM	Num	4	LENGTH OF TIME ELAPSED FROM BLOOD DRAW-M
63	L18DC_DAYS	Num	8	DATE FORM COMPLETED - Converted to days since entry
64	L18_9_DAYS	Num	8	DATE OF LAST DOSE OF INTERFERON - Converted to days since entry
65	SUBJ_ID	Char	8	Subject identifier

Data Set Name: mhcs_i_ldquest.sas7bdat

Num	Variable	Type	Len	Label
1	FORM	Num	4	Form Number
2	L19_AGE	Num	4	AGE WHEN FIRST RECEIVED PLASMA PRODUCT
3	L19_A1	Num	4	HOW OFTEN DO YOU TAKE MEDICATION FOR PAI
4	L19_A21N	Num	4	NAME OF MEDICATION TAKEN-1
5	L19_A21S	Num	4	STRENGTH OF MEDICATION TAKEN-1
6	L19_A22N	Num	4	NAME OF MEDICATION TAKEN-2
7	L19_A22S	Num	4	STRENGTH OF MEDICATION TAKEN-2
8	L19_A23N	Num	4	NAME OF MEDICATION TAKEN-3
9	L19_A23S	Num	4	STRENGTH OF MEDICATION TAKEN-3
10	L19_A24N	Num	4	NAME OF MEDICATION TAKEN-4
11	L19_A24S	Num	4	STRENGTH OF MEDICATION TAKEN-4
12	L19_A25N	Num	4	NAME OF MEDICATION TAKEN-5
13	L19_A25S	Num	4	STRENGTH OF MEDICATION TAKEN-5
14	L19_A26N	Num	4	NAME OF MEDICATION TAKEN-6
15	L19_A26S	Num	4	STRENGTH OF MEDICATION TAKEN-6
16	L19_A27N	Num	4	NAME OF MEDICATION TAKEN-7
17	L19_A27S	Num	4	STRENGTH OF MEDICATION TAKEN-7
18	L19_A3AD	Num	4	3 MONTHS: NUMBER OF PILLS USUALLY TAKEN-
19	L19_A3AW	Num	4	3 MONTHS: NUMBER OF PILLS USUALLY TAKEN-
20	L19_A3AM	Num	4	3 MONTHS: NUMBER OF PILLS USUALLY TAKEN-
21	L19_A3BD	Num	4	3 MONTHS: MAX NUMBER OF PILLS YOU TOOK-D
22	L19_A3BW	Num	4	3 MONTHS: MAX NUMBER OF PILLS YOU TOOK-W
23	L19_A3BM	Num	4	3 MONTHS: MAX NUMBER OF PILLS YOU TOOK-M
24	L19_A4AD	Num	4	3-12 MONTHS: NUMBER OF PILLS USUALLY TAK
25	L19_A4AW	Num	4	3-12 MONTHS: NUMBER OF PILLS USUALLY TAK
26	L19_A4AM	Num	4	3-12 MONTHS: NUMBER OF PILLS USUALLY TAK
27	L19_A4BD	Num	4	3-12 MONTHS: MAX NUMBER OF PILLS YOU TOO
28	L19_A4BW	Num	4	3-12 MONTHS: MAX NUMBER OF PILLS YOU TOO
29	L19_A4BM	Num	4	3-12 MONTHS: MAX NUMBER OF PILLS YOU TOO
30	L19_A5AD	Num	4	10-20 YEARS: NUMBER OF PILLS USUALLY TAK
31	L19_A5AW	Num	4	10-20 YEARS: NUMBER OF PILLS USUALLY TAK
32	L19_A5AM	Num	4	10-20 YEARS: NUMBER OF PILLS USUALLY TAK
33	L19_A5BD	Num	4	10-20 YEARS: MAX NUMBER OF PILLS YOU TOO
34	L19_A5BW	Num	4	10-20 YEARS: MAX NUMBER OF PILLS YOU TOO
35	L19_A5BM	Num	4	10-20 YEARS: MAX NUMBER OF PILLS YOU TOO
36	L19_A6AD	Num	4	20-30 YEARS: NUMBER OF PILLS USUALLY TAK

Num	Variable	Type	Len	Label
37	L19_A6AW	Num	4	20-30 YEARS: NUMBER OF PILLS USUALLY TAK
38	L19_A6AM	Num	4	20-30 YEARS: NUMBER OF PILLS USUALLY TAK
39	L19_A6BD	Num	4	20-30 YEARS: MAX NUMBER OF PILLS YOU TOO
40	L19_A6BW	Num	4	20-30 YEARS: MAX NUMBER OF PILLS YOU TOO
41	L19_A6BM	Num	4	20-30 YEARS: MAX NUMBER OF PILLS YOU TOO
42	L19_BOX1	Num	4	SECTION A: SUBJECT YOUNGER THAN 30 YEARS
43	L19_A7AD	Num	4	30-40 YEARS: NUMBER OF PILLS USUALLY TAK
44	L19_A7AW	Num	4	30-40 YEARS: NUMBER OF PILLS USUALLY TAK
45	L19_A7AM	Num	4	30-40 YEARS: NUMBER OF PILLS USUALLY TAK
46	L19_A7BD	Num	4	30-40 YEARS: MAX NUMBER OF PILLS YOU TOO
47	L19_A7BW	Num	4	30-40 YEARS: MAX NUMBER OF PILLS YOU TOO
48	L19_A7BM	Num	4	30-40 YEARS: MAX NUMBER OF PILLS YOU TOO
49	L19_BOX2	Num	4	SECTION A: SUBJECT YOUNGER THAN 40 YEARS
50	L19_A8AD	Num	4	40-50 YEARS: NUMBER OF PILLS USUALLY TAK
51	L19_A8AW	Num	4	40-50 YEARS: NUMBER OF PILLS USUALLY TAK
52	L19_A8AM	Num	4	40-50 YEARS: NUMBER OF PILLS USUALLY TAK
53	L19_A8BD	Num	4	40-50 YEARS: MAX NUMBER OF PILLS YOU TOO
54	L19_A8BW	Num	4	40-50 YEARS: MAX NUMBER OF PILLS YOU TOO
55	L19_A8BM	Num	4	40-50 YEARS: MAX NUMBER OF PILLS YOU TOO
56	L19_BOX3	Num	4	SECTION A: SUBJECT YOUNGER THAN 50 YEARS
57	L19_A9AD	Num	4	50-60 YEARS: NUMBER OF PILLS USUALLY TAK
58	L19_A9AW	Num	4	50-60 YEARS: NUMBER OF PILLS USUALLY TAK
59	L19_A9AM	Num	4	50-60 YEARS: NUMBER OF PILLS USUALLY TAK
60	L19_A9BD	Num	4	50-60 YEARS: MAX NUMBER OF PILLS YOU TOO
61	L19_A9BW	Num	4	50-60 YEARS: MAX NUMBER OF PILLS YOU TOO
62	L19_A9BM	Num	4	50-60 YEARS: MAX NUMBER OF PILLS YOU TOO
63	L19_BOX4	Num	4	SECTION A: SUBJECT YOUNGER THAN 60 YEARS
64	L19A10AD	Num	4	>=60 YEARS: NUMBER OF PILLS USUALLY TAKE
65	L19A10AW	Num	4	>=60 YEARS: NUMBER OF PILLS USUALLY TAKE
66	L19A10AM	Num	4	>=60 YEARS: NUMBER OF PILLS USUALLY TAKE
67	L19A10BD	Num	4	>=60 YEARS: MAX NUMBER OF PILLS YOU TOOK
68	L19A10BW	Num	4	>=60 YEARS: MAX NUMBER OF PILLS YOU TOOK
69	L19A10BM	Num	4	>=60 YEARS: MAX NUMBER OF PILLS YOU TOOK
70	L19_B1	Num	4	HAVE YOU FELT YOU SHOULD CUT DOWN ON DRI
71	L19_B2	Num	4	HAVE PEOPLE ANNOYED YOU ABOUT DRINKING
72	L19_B3	Num	4	HAVE YOU FELT BAD OR GUILTY ABOUT DRINKI
73	L19_B4	Num	4	EVER HAD A DRINK FIRST THING IN THE MORN
74	L19_B5	Num	4	EVER HAD MORE THANK 2 DRINKS IN A 24 HOU
75	L19_B6AD	Num	4	3 MONTHS: # OF DRINKS YOU USUALLY TOOK-D

Num	Variable	Type	Len	Label
76	L19_B6AW	Num	4	3 MONTHS: # OF DRINKS USUALLY TOOK-WEEKS
77	L19_B6BD	Num	4	3 MONTHS: MAX NUMBER OF DRINKS YOU HAD-D
78	L19_B6BW	Num	4	3 MONTHS: MAX NUMBER OF DRINKS YOU HAD-W
79	L19_B7AD	Num	4	3-12 MONTHS: # OF DRINKS YOU USUALLY TOO
80	L19_B7AW	Num	4	3-12 MONTHS: # OF DRINKS USUALLY TOOK-WE
81	L19_B7BD	Num	4	3-12 MONTHS: MAX NUMBER OF DRINKS YOU HA
82	L19_B7BW	Num	4	3-12 MONTHS: MAX NUMBER OF DRINKS YOU HA
83	L19_B8AD	Num	4	10-20 YEARS: # OF DRINKS YOU USUALLY TOO
84	L19_B8AW	Num	4	10-20 YEARS: # OF DRINKS USUALLY TOOK-WE
85	L19_B8BD	Num	4	10-20 YEARS: MAX NUMBER OF DRINKS YOU HA
86	L19_B8BW	Num	4	10-20 YEARS: MAX NUMBER OF DRINKS YOU HA
87	L19_B9AD	Num	4	20-30 YEARS: # OF DRINKS YOU USUALLY TOO
88	L19_B9AW	Num	4	20-30 YEARS: # OF DRINKS USUALLY TOOK-WE
89	L19_B9BD	Num	4	20-30 YEARS: MAX NUMBER OF DRINKS YOU HA
90	L19_B9BW	Num	4	20-30 YEARS: MAX NUMBER OF DRINKS YOU HA
91	L19_BOX5	Num	4	SECTION B: SUBJECT YOUNGER THAN 30 YEARS
92	L19B10AD	Num	4	30-40 YEARS: # OF DRINKS YOU USUALLY TOO
93	L19B10AW	Num	4	30-40 YEARS: # OF DRINKS USUALLY TOOK-WE
94	L19B10BD	Num	4	30-40 YEARS: MAX NUMBER OF DRINKS YOU HA
95	L19B10BW	Num	4	30-40 YEARS: MAX NUMBER OF DRINKS YOU HA
96	L19_BOX6	Num	4	SECTION B: SUBJECT YOUNGER THAN 40 YEARS
97	L19B11AD	Num	4	40-50 YEARS: # OF DRINKS YOU USUALLY TOO
98	L19B11AW	Num	4	40-50 YEARS: # OF DRINKS USUALLY TOOK-WE
99	L19B11BD	Num	4	40-50 YEARS: MAX NUMBER OF DRINKS YOU HA
100	L19B11BW	Num	4	40-50 YEARS: MAX NUMBER OF DRINKS YOU HA
101	L19_BOX7	Num	4	SECTION B: SUBJECT YOUNGER THAN 50 YEARS
102	L19B12AD	Num	4	50-60 YEARS: # OF DRINKS YOU USUALLY TOO
103	L19B12AW	Num	4	50-60 YEARS: # OF DRINKS USUALLY TOOK-WE
104	L19B12BD	Num	4	50-60 YEARS: MAX NUMBER OF DRINKS YOU HA
105	L19B12BW	Num	4	50-60 YEARS: MAX NUMBER OF DRINKS YOU HA
106	L19_BOX8	Num	4	SECTION B: SUBJECT YOUNGER THAN 60 YEARS
107	L19B13AD	Num	4	>=60 YEARS: # OF DRINKS YOU USUALLY TOOK
108	L19B13AW	Num	4	>= 60 YEARS: # OF DRINKS USUALLY TOOK-WE
109	L19B13BD	Num	4	>= 60 YEARS: MAX NUMBER OF DRINKS YOU HA
110	L19B13BW	Num	4	>= 60 YEARS: MAX NUMBER OF DRINKS YOU HA
111	L19DC_DAYS	Num	8	DATE FORM COMPLETED - Converted to days since entry
112	SUBJ_ID	Char	8	Subject identifier

Data Set Name: mhcs_i_liverdis.sas7bdat

Num	Variable	Type	Len	Label
1	FORM	Num	8	Form Number
2	L30_2	Num	8	ASCITES ATTRIBUTABLE TO LIVER DISEASE
3	L30_2B	Num	8	CLASSIFICATION OF ASCITES
4	L30_3	Num	8	EVER HAVE ESOPHAGEAL VARICES/BLEEDING
5	L30_4	Num	8	PROTHROMBIN TIME GREATER THAN 3 SECONDS
6	L30_5A	Num	8	PROTHROMBIN RESULT (MOST RECENT)
7	L30_5B_1	Num	8	PROTHROMBIN REFERENCE RANGE-1
8	L30_5B_2	Num	8	PROTHROMBIN REFERENCE RANGE-2
9	L30_5PTT	Num	8	PTT RESULT (MOST RECENT)
10	L30_5BLL	Num	8	PTT REFERENCE RANGE LOWER LIMIT
11	L30_5BUL	Num	8	PTT REFERENCE RANGE UPPER LIMIT
12	L30_6	Num	8	WAS ALBUMIN EVER 2.0 MG/DL OR BELOW
13	L30_7A	Num	8	ALBUMIN RESULT (MOST RECENT) MG/DL
14	L30_7B	Num	8	ALBUMIN UPPER LIMIT OF NORMAL MG/DL
15	L308IR	Num	8	RESULTS: TOTAL BILIRUBIN
16	L308IU	Num	8	UPPER LIMITS OF NORMAL: TOTAL BILIRUBIN
17	L308IIR	Num	8	RESULTS: BILIRUBIN DIRECT (CONJUGATED)
18	L308IIU	Num	8	UPPER LIMITS OF NORMAL: BILIRUBIN (CONJU
19	L308IIIR	Num	8	RESULTS: BILIRUBIN INDIRECT (UNCONJUGAT
20	L308IIIU	Num	8	UPPER LIMITS OF NORMAL: BILIRUBIN (UNCON
21	L30_9	Num	8	WAS BILIRUBIN EVER 2.0 MG/DL OR GREATER
22	L30_9A	Num	8	WAS ELEVATION ATTRIBUTED TO MEDICATIONS
23	L30_9B_1	Num	8	SPECIFY MEDICATIONS-1
24	L30_9B_2	Num	8	SPECIFY MEDICATIONS-2
25	L30_9B_3	Num	8	SPECIFY MEDICATIONS-3
26	L30_9B_4	Num	8	SPECIFY MEDICATIONS-4
27	L30_9B_5	Num	8	SPECIFY MEDICATIONS-5
28	L30_9B_6	Num	8	SPECIFY MEDICATIONS-6
29	L30_10	Num	8	WAS SPLENOMEGALY EVER FOUND
30	L30_10B	Num	8	NUMBER OF CM BELOW COSTAL MARGIN BY PALP
31	L30_10BN	Num	8	NUMBER OF CM BELOW-NOT RECORDED
32	L30_10C	Num	8	TRANSVERSE LENGTH OF SPLEEN BY SCAN
33	L30_10CN	Num	8	TRANSVERSE LENGTH OF SPLEEN BY SCAN-NOT
34	L30_11	Num	8	EVER DIAGNOSED WITH HEPATIC ENCEPHALOPAT
35	L30_11B	Num	8	SEVERITY OF HEPATIC ENCEPHALOPATHY
36	L30_12	Num	8	DID SUBJECT EVER HAVE A LIVER BIOPSY

Num	Variable	Type	Len	Label
37	L30_12B	Num	8	WERE RESULTS OF LIVER BIOPSY CONSISTENT
38	L30_13	Num	8	EVER HAD ANY OTHER DIAGNOSIS
39	L30_13A1	Num	8	OTHER DIAGNOSIS: ALCOHOL (ETOH) ABUSE
40	L30_13A2	Num	8	OTHER DIAGNOSIS: HEPATITIS B VIRUS
41	L30_13A3	Num	8	OTHER DIAGNOSIS: OTHER
42	L3013AS1	Num	8	OTHER DIAGNOSIS: SPECIFY 1
43	L3013AS2	Num	8	OTHER DIAGNOSIS: SPECIFY 2
44	L3013AS3	Num	8	OTHER DIAGNOSIS: SPECIFY 3
45	L3013AS4	Num	8	OTHER DIAGNOSIS: SPECIFY 4
46	L3013AS5	Num	8	OTHER DIAGNOSIS: SPECIFY 5
47	L3013AS6	Num	8	OTHER DIAGNOSIS: SPECIFY 6
48	L3013AS7	Num	8	OTHER DIAGNOSIS: SPECIFY 7
49	L3013AS8	Num	8	OTHER DIAGNOSIS: SPECIFY 8
50	L3013AS9	Num	8	OTHER DIAGNOSIS: SPECIFY 9
51	L3013A10	Num	8	OTHER DIAGNOSIS: SPECIFY 10
52	L3013A11	Num	8	OTHER DIAGNOSIS: SPECIFY 11
53	L30_14	Num	8	IS SUBJECT DEAD OR ALIVE
54	L30_16	Num	8	DID SUBJECT HAVE A POST-MORTEM EXAMINATI
55	L30_17	Num	8	RESULTS CONSISTENT W/ DIAGNOSIS OF CIRRH
56	L30_18	Num	8	RESULTS CONSISTENT W/ DIAGNOSIS OF HEPAT
57	L30DC_DAYS	Num	8	DATE FORM COMPLETED - Converted to days since entry
58	L30_10A_DAYS	Num	8	DATE SPLENOMEGALY FOUND- - Converted to days since reference point
59	L30_11A_DAYS	Num	8	DATE DIAGNOSED WITH HEPATIC ENCEPHALOPAT - Converted to days since reference point
60	L30_12A_DAYS	Num	8	DATE OF LIVER BIOPSY- - Converted to days since reference point
61	L30_15_DAYS	Num	8	DATE OF DEATH- - Converted to days since reference point
62	L30_2A_DAYS	Num	8	ASCITES ATTRIBUTABLE TO LIVER DISEASE-DA - Converted to days since reference point
63	L30_3A_DAYS	Num	8	DATE HAD ESOPHAGEAL VARICES/BLEEDING- - Converted to days since reference point
64	L30_5_DAYS	Num	8	DATE OF MOST RECENT PROTHROMBIN TIME- - Converted to days since reference point
65	L30_7_DAYS	Num	8	DATE OF MOST RECENT ALBUMIN- - Converted to days since reference point
66	L30_8_DAYS	Num	8	DATE OF MOST RECENT BILIRUBIN- - Converted to days since reference point
67	SUBJ_ID	Char	8	Subject identifier

Data Set Name: mhcs_i_meduse.sas7bdat

Num	Variable	Type	Len	Label
1	FORM	Num	8	Form Number
2	H28_A1	Num	8	SUBJECT RECEIVED HIV-RELATED MEDICATIONS
3	H28_A2	Num	8	SUBJECT PARTICIPATED IN ANY TRIAL NOT RE
4	H28_B1	Num	8	SUBJECT RECEIVED ANY NRTI'S
5	H28B1_1M	Num	8	MONTHS ON ABACAVIR
6	H28B1_2M	Num	8	MONTHS ON AZT
7	H28B1_3M	Num	8	MONTHS ON COMBIVIR
8	H28B1_4M	Num	8	MONTHS ON DDC
9	H28B1_5M	Num	8	MONTHS ON DDI
10	H28B1_6M	Num	8	MONTHS ON D4T
11	H28B1_7M	Num	8	MONTHS ON 3TC
12	H28B181S	Num	8	SPECIFY OTHER NRTI-1
13	H28B181M	Num	8	MONTHS ON OTHER NRTI-1
14	H28B182S	Num	8	SPECIFY OTHER NRTI-2
15	H28B182M	Num	8	MONTHS ON OTHER NRTI-2
16	H28B183S	Num	8	SPECIFY OTHER NRTI-3
17	H28B183M	Num	8	MONTHS ON OTHER NRTI-3
18	H28_B2	Num	8	RECEIVED ANTIRETROVIRAL PROTEASE INHIBIT
19	H28B2_1M	Num	8	MONTHS ON FORTOVASE
20	H28B2_2M	Num	8	MONTHS ON INDINAVIR
21	H28B2_3M	Num	8	MONTHS ON RITONAVIR
22	H28B2_4M	Num	8	MONTHS ON NELFINAVIR
23	H28B2_5M	Num	8	MONTHS ON SAQUINAVIR
24	H28B261S	Num	8	OTHER PROTEASE INHIBITOR-SPECIFY-1
25	H28B261M	Num	8	MONTHS ON OTHER PROTEASE INHIB-1
26	H28B262S	Num	8	OTHER PROTEASE INHIBITOR-SPECIFY-2
27	H28B262M	Num	8	MONTHS ON OTHER PROTEASE INHIB-2
28	H28B263S	Num	8	OTHER PROTEASE INHIBITOR-SPECIFY-3
29	H28B263M	Num	8	MONTHS ON OTHER PROTEASE INHIB-3
30	H28_B3	Num	8	RECEIVED ANY NNRTIs
31	H28B3_1M	Num	8	MONTHS ON DELAVIRDINE
32	H28B3_2M	Num	8	MONTHS ON ELAVIRENZ
33	H28B3_3M	Num	8	MONTHS ON LOVIRIDE
34	H28B3_4M	Num	8	MONTHS ON NEVIRAPINE
35	H28B351S	Num	8	OTHER NNRTI-SPECIFY-1
36	H28B351M	Num	8	MONTHS ON OTHER NNRTI-1

Num	Variable	Type	Len	Label
37	H28B352S	Num	8	OTHER NNRTI-SPECIFY-2
38	H28B352M	Num	8	MONTHS ON OTHER NNRTI-2
39	H28B353S	Num	8	OTHER NNRTI-SPECIFY-3
40	H28B353M	Num	8	MONTHS ON OTHER NNRTI-3
41	H28_B4	Num	8	RECEIVED NUCLEOTIDE RTI DRUGS
42	H28B4_1M	Num	8	MONTHS ON ADEFOVIR
43	H28B4_2M	Num	8	MONTHS ON PMPA
44	H28B431S	Num	8	OTHER NUCLEOTIDE RTI-SPECIFY-1
45	H28B431M	Num	8	MONTHS ON OTHER NUCLEOTIDE RTI-1
46	H28B432S	Num	8	OTHER NUCLEOTIDE RTI-SPECIFY-2
47	H28B432M	Num	8	MONTHS ON OTHER NUCLEOTIDE RTI-2
48	H28B433S	Num	8	OTHER NUCLEOTIDE RTI-SPECIFY-3
49	H28B433M	Num	8	MONTHS ON OTHER NUCLEOTIDE RTI-3
50	H28_B5	Num	8	RECEIVED ANY OTHER ANTIVIRAL MEDICATIONS
51	H28B5_1M	Num	8	MONTHS ON ACYCLOVIR
52	H28B5_2M	Num	8	MONTHS ON FAMCICLOVIR
53	H28B5_3M	Num	8	MONTHS ON GANCICLOVIR
54	H28B5_4M	Num	8	MONTHS ON VALACYCLOVIR
55	H28B5_5M	Num	8	MONTHS ON CIDOFOVIR
56	H28B251S	Num	8	OTHER ANTIVIRAL DRUG-SPECIFY-1
57	H28B251M	Num	8	MONTHS ON OTHER ANTIVIRAL DRUG-1
58	H28B252S	Num	8	OTHER ANTIVIRAL DRUG-SPECIFY-2
59	H28B252M	Num	8	MONTHS ON OTHER ANTIVIRAL DRUG-2
60	H28B253S	Num	8	OTHER ANTIVIRAL DRUG-SPECIFY-3
61	H28B253M	Num	8	MONTHS ON OTHER ANTIVIRAL DRUG-3
62	H28_B6	Num	8	SUBJECT TAKEN NY ANTIFUNGAL MEDICATIONS?
63	H28B6_1M	Num	8	MONTHS ON AMPHOTERICIN B
64	H28B6_2M	Num	8	MONTHS ON CLOTRIMAZOLE
65	H28B6_3M	Num	8	MONTHS ON FLUCONAZOLE
66	H28B6_4M	Num	8	MONTHS ON INTACONAZOLE
67	H28B6_5M	Num	8	MONTHS ON KETOCONAZOLE
68	H28261_S	Num	8	OTHER ANTIFUNGAL DRUG-SPECIFY-1
69	H28261_M	Num	8	MONTHS ON OTHER ANTIFUNGAL DRUG-1
70	H28262_S	Num	8	OTHER ANTIFUNGAL DRUG-SPECIFY-2
71	H28262_M	Num	8	MONTHS ON OTHER ANTIFUNGAL DRUG-2
72	H28263_S	Num	8	OTHER ANTIFUNGAL DRUG-SPECIFY-3
73	H28263_M	Num	8	MONTHS ON OTHER ANTIFUNGAL DRUG-3
74	H28_B7	Num	8	RECEIVED ANY ANTIPNEUMOCYSTIS/TOXOPLASMA
75	H28B7_1M	Num	8	MONTHS ON ATOVAQUONE

Num	Variable	Type	Len	Label
76	H28B7_2M	Num	8	MONTHS ON DAPSONE
77	H28B7_3M	Num	8	MONTHS ON PENTAMIDINE
78	H28B7_4M	Num	8	MONTHS ON PYRIMETHAMINE
79	H28B7_5M	Num	8	MONTHS ON SULFADIAZINE
80	H28B7_6M	Num	8	MONTHS ON TRIMETHOPRIM
81	H28B7_7M	Num	8	MONTHS ON TRIMETHOPRIM-SULF
82	H28B781S	Num	8	OTHER TOXOPLASMA DRUG-SPECIFY-1
83	H28B781M	Num	8	MONTHS ON OTHER TOXOPLASMA DRUG-1
84	H28B782S	Num	8	OTHER TOXOPLASMA DRUG-SPECIFY-2
85	H28B782M	Num	8	MONTHS ON OTHER TOXOPLASMA DRUG-2
86	H28_B8	Num	8	EVER RECEIVED ANTIMYCOBACTERIAL AGENTS
87	H28B8_1M	Num	8	MONTHS ON AZITHROMYCIN
88	H28B8_2M	Num	8	MONTHS ON CIPROFLOXACIN
89	H28B8_3M	Num	8	MONTHS ON CLARITHROMYCIN
90	H28B8_4M	Num	8	MONTHS ON CLOFAZIMINE
91	H28B8_5M	Num	8	MONTHS ON ETHAMBUTOL
92	H28B8_6M	Num	8	MONTHS ON ISONIAZID
93	H28B8_7M	Num	8	MONTHS ON OFLOXACIN
94	H28B8_8M	Num	8	MONTHS ON PYRAZINAMIDE
95	H28B8_9M	Num	8	MONTHS ON RIFABUTIN
96	H28B810M	Num	8	MONTHS ON RIFAMPIN
97	H28B811M	Num	8	MONTHS ON RIFAMATE
98	H28B812M	Num	8	MONTHS ON RIFATER
99	HB831S	Num	8	OTHER ANTIMYCOBACTERIAL-SPECIFY-1
100	HB8131M	Num	8	MONTHS ON OTHER ANTIMYCOBACTERIAL-1
101	HB832S	Num	8	OTHER ANTIMYCOBACTERIAL-SPECIFY-2
102	HB8132M	Num	8	MONTHS ON OTHER ANTIMYCOBACTERIAL-2
103	HB833S	Num	8	OTHER ANTIMYCOBACTERIAL-SPECIFY-3
104	HB8133M	Num	8	MONTHS ON OTHER ANTIMYCOBACTERIAL-3
105	H28_B9	Num	8	RECEIVED ANY OTHER HIV-RELATED MEDICATIO
106	HB91_1S	Num	8	OTHER HIV-RELATED-SPECIFY-1
107	HB91_1M	Num	8	MONTHS ON OTHER HIV-RELATED-1
108	HB91_2S	Num	8	OTHER HIV-RELATED-SPECIFY-2
109	HB91_2M	Num	8	MONTHS ON OTHER HIV-RELATED-3
110	HB91_3S	Num	8	OTHER HIV-RELATED-SPECIFY-3
111	HB91_3M	Num	8	MONTHS ON OTHER HIV-RELATED-3
112	HB91_4S	Num	8	OTHER HIV-RELATED-SPECIFY-4
113	HB91_4M	Num	8	MONTHS ON OTHER HIV-RELATED-4
114	HB91_5S	Num	8	OTHER HIV-RELATED-SPECIFY-5

Num	Variable	Type	Len	Label
115	HB91_5M	Num	8	MONTHS ON OTHER HIV-RELATED-5
116	HB91_6S	Num	8	OTHER HIV-RELATED-SPECIFY-6
117	HB91_6M	Num	8	MONTHS ON OTHER HIV-RELATED-6
118	HB91_7S	Num	8	OTHER HIV-RELATED-SPECIFY-7
119	HB91_7M	Num	8	MONTHS ON OTHER HIV-RELATED-7
120	HB91_8S	Num	8	OTHER HIV-RELATED-SPECIFY-8
121	HB91_8M	Num	8	MONTHS ON OTHER HIV-RELATED-8
122	HB91_9S	Num	8	OTHER HIV-RELATED-SPECIFY-9
123	HB91_9M	Num	8	MONTHS ON OTHER HIV-RELATED-9
124	HB91_10S	Num	8	OTHER HIV-RELATED-SPECIFY-1
125	HB91_10M	Num	8	MONTHS ON OTHER HIV-RELATED-1
126	H28_DC_days	Num	8	DATE FORM COMPLETED - Converted to days since entry
127	H28181_L_MONTHS	Num	8	DATE LAST RECEIVED OTHER NRTI-1 - Converted to months since reference point
128	H28181_S_MONTHS	Num	8	DATE STARTED OTHER NRTI-1 - Converted to months since reference point
129	H28182_L_MONTHS	Num	8	DATE LAST RECEIVED OTHER NRTI-2 - Converted to months since reference point
130	H28182_S_MONTHS	Num	8	DATE STARTED OTHER NRTI- - Converted to months since reference point
131	H28183_L_MONTHS	Num	8	DATE LAST RECEIVED OTHER NRTI-3 - Converted to months since reference point
132	H28183_S_MONTHS	Num	8	DATE STARTED OTHER NRTI-3 - Converted to months since reference point
133	H28251_L_MONTHS	Num	8	DATE LAST RECEIVED OTHER ANTIVIRAL DRUG- - Converted to months since reference point
134	H28251_S_MONTHS	Num	8	DATE STARTED OTHER ANTIVIRAL DRUG-1 - Converted to months since reference point
135	H28252_L_MONTHS	Num	8	DATE LAST RECEIVED OTHER ANTIVIRAL DRUG- - Converted to months since reference point
136	H28252_S_MONTHS	Num	8	DATE STARTED OTHER ANTIVIRAL DRUG-2 - Converted to months since reference point
137	H28253_L_MONTHS	Num	8	DATE LAST RECEIVED OTHER ANTIVIRAL DRUG- - Converted to months since reference point
138	H28253_S_MONTHS	Num	8	DATE STARTED OTHER ANTIVIRAL DRUG-3 - Converted to months since reference point
139	H28261_L_MONTHS	Num	8	DATE LAST RECEIVED OTHER PROTEASE INHIB. - Converted to months since reference point
140	H28261_S_MONTHS	Num	8	DATE STARTED OTHER PROTEASE INHIB.-1 - Converted to months since reference point
141	H28262_L_MONTHS	Num	8	DATE LAST RECEIVED OTHER PROTEASE INHIB. - Converted to months since reference point
142	H28262_S_MONTHS	Num	8	DATE STARTED OTHER PROTEASE INHIB.-2 - Converted to months since reference point
143	H28263_L_MONTHS	Num	8	DATE LAST RECEIVED OTHER PROTEASE INHIB. - Converted to months since reference point
144	H28263_S_MONTHS	Num	8	DATE STARTED OTHER PROTEASE INHIB.-3 - Converted to months since reference point
145	H28351_L_MONTHS	Num	8	DATE LAST RECEIVED OTHER NNRTI-1 - Converted to months since reference point
146	H28351_S_MONTHS	Num	8	DATE STARTED OTHER NNRTI.-1 - Converted to months since reference point
147	H28352_L_MONTHS	Num	8	DATE LAST RECEIVED OTHER NNRTI-2 - Converted to months since reference point

Num	Variable	Type	Len	Label
148	H28352_S_MONTHS	Num	8	DATE STARTED OTHER NNRTI.-2 - Converted to months since reference point
149	H28353_L_MONTHS	Num	8	DATE LAST RECEIVED OTHER NNRTI-3 - Converted to months since reference point
150	H28353_S_MONTHS	Num	8	DATE STARTED OTHER NNRTI.-3 - Converted to months since reference point
151	H28431_L_MONTHS	Num	8	DATE LAST RECEIVED OTHER NUCLEOTIDE RTI- - Converted to months since reference point
152	H28431_S_MONTHS	Num	8	DATE STARTED OTHER NUCLEOTIDE RTI.-1 - Converted to months since reference point
153	H28432_L_MONTHS	Num	8	DATE LAST RECEIVED OTHER NUCLEOTIDE RTI- - Converted to months since reference point
154	H28432_S_MONTHS	Num	8	DATE STARTED OTHER NUCLEOTIDE RTI.-2 - Converted to months since reference point
155	H28433_L_MONTHS	Num	8	DATE LAST RECEIVED OTHER NUCLEOTIDE RTI- - Converted to months since reference point
156	H28433_S_MONTHS	Num	8	DATE STARTED OTHER NUCLEOTIDE RTI.-3 - Converted to months since reference point
157	H28781_L_MONTHS	Num	8	DATE LAST RECEIVED OTHER TOXOPLASMA DRUG - Converted to months since reference point
158	H28781_S_MONTHS	Num	8	DATE STARTED OTHER TOXOPLASMA DRUG-1 - Converted to months since reference point
159	H28782_L_MONTHS	Num	8	DATE LAST RECEIVED OTHER TOXOPLASMA DRUG - Converted to months since reference point
160	H28782_S_MONTHS	Num	8	DATE STARTED OTHER TOXOPLASMA DRUG-2 - Converted to months since reference point
161	H28B11_L_MONTHS	Num	8	DATE LAST RECEIVED ABACAVIR - Converted to months since reference point
162	H28B11_S_MONTHS	Num	8	DATE STARTED ABACAVIR - Converted to months since reference point
163	H28B12_L_MONTHS	Num	8	DATE LAST RECEIVED AZR - Converted to months since reference point
164	H28B12_S_MONTHS	Num	8	DATE STARTED AZT - Converted to months since reference point
165	H28B13_L_MONTHS	Num	8	DATE LAST RECEIVED COMBIVIR - Converted to months since reference point
166	H28B13_S_MONTHS	Num	8	DATE STARTED COMBIVIR - Converted to months since reference point
167	H28B14_L_MONTHS	Num	8	DATE LAST RECEIVED DDC - Converted to months since reference point
168	H28B14_S_MONTHS	Num	8	DATE STARTED DDC - Converted to months since reference point
169	H28B15_L_MONTHS	Num	8	DATE LAST RECEIVED DDI - Converted to months since reference point
170	H28B15_S_MONTHS	Num	8	DATE STARTED DDI - Converted to months since reference point
171	H28B16_L_MONTHS	Num	8	DATE LAST RECEIVED D4T - Converted to months since reference point
172	H28B16_S_MONTHS	Num	8	DATE STARTED D4T - Converted to months since reference point
173	H28B17_L_MONTHS	Num	8	DATE LAST RECEIVED 3TC - Converted to months since reference point
174	H28B17_S_MONTHS	Num	8	DATE STARTED 3TC - Converted to months since reference point
175	H28B21_L_MONTHS	Num	8	DATE LAST RECEIVED FORTOVASE - Converted to months since reference point
176	H28B21_S_MONTHS	Num	8	DATE STARTED FORTOVASE - Converted to months since reference point
177	H28B22_L_MONTHS	Num	8	DATE LAST RECEIVED INDINAVIR - Converted to months since reference point
178	H28B22_S_MONTHS	Num	8	DATE STARTED INDINAVIR - Converted to months since reference point
179	H28B23_L_MONTHS	Num	8	DATE LAST RECEIVED RITONAVIR - Converted to months since reference point
180	H28B23_S_MONTHS	Num	8	DATE STARTED RITONAVIR - Converted to months since reference point
181	H28B24_L_MONTHS	Num	8	DATE LAST RECEIVED NELFINAVIR - Converted to months since reference point

Num	Variable	Type	Len	Label
182	H28B24_S_MONTHS	Num	8	DATE STARTED NELFINAVIR - Converted to months since reference point
183	H28B25_L_MONTHS	Num	8	DATE LAST RECEIVED SAQUINAVIR - Converted to months since reference point
184	H28B25_S_MONTHS	Num	8	DATE STARTED SAQUINAVIR - Converted to months since reference point
185	H28B31_L_MONTHS	Num	8	DATE LAST RECEIVED DELAVIRDINE - Converted to months since reference point
186	H28B31_S_MONTHS	Num	8	DATE STARTED DELAVIRDINE - Converted to months since reference point
187	H28B32_L_MONTHS	Num	8	DATE LAST RECEIVED ELZVIRENZ - Converted to months since reference point
188	H28B32_S_MONTHS	Num	8	DATE STARTED ELAVIRENZ - Converted to months since reference point
189	H28B33_L_MONTHS	Num	8	DATE LAST RECEIVED LOVIRIDE - Converted to months since reference point
190	H28B33_S_MONTHS	Num	8	DATE STARTED LOVIRIDE - Converted to months since reference point
191	H28B34_L_MONTHS	Num	8	DATE LAST RECEIVED NEVIRAPINE - Converted to months since reference point
192	H28B34_S_MONTHS	Num	8	DATE STARTED NEVIRAPINE - Converted to months since reference point
193	H28B41_L_MONTHS	Num	8	DATE LAST RECEIVED ADEFOVIR - Converted to months since reference point
194	H28B41_S_MONTHS	Num	8	DATE STARTED ADEFOVIR - Converted to months since reference point
195	H28B42_L_MONTHS	Num	8	DATE LAST RECEIVED PMPA - Converted to months since reference point
196	H28B42_S_MONTHS	Num	8	DATE STARTED PMPA - Converted to months since reference point
197	H28B51_L_MONTHS	Num	8	DATE LAST RECEIVED ACYCLOVIR - Converted to months since reference point
198	H28B51_S_MONTHS	Num	8	DATE STARTED ACYCLOVIR - Converted to months since reference point
199	H28B52_L_MONTHS	Num	8	DATE LAST RECEIVED FAMCICLOVIR - Converted to months since reference point
200	H28B52_S_MONTHS	Num	8	DATE STARTED FAMCICLOVIR - Converted to months since reference point
201	H28B53_L_MONTHS	Num	8	DATE LAST RECEIVED GANCICLOVIR - Converted to months since reference point
202	H28B53_S_MONTHS	Num	8	DATE STARTED GANCICLOVIR - Converted to months since reference point
203	H28B54_L_MONTHS	Num	8	DATE LAST RECEIVED VALACYCLOVIR - Converted to months since reference point
204	H28B54_S_MONTHS	Num	8	DATE STARTED VALACYCLOVIR - Converted to months since reference point
205	H28B55_L_MONTHS	Num	8	DATE LAST RECEIVED CIDOFOVIR - Converted to months since reference point
206	H28B55_S_MONTHS	Num	8	DATE STARTED CIDOFOVIR - Converted to months since reference point
207	H28B61_L_MONTHS	Num	8	DATE LAST RECEIVED AMPHOTERICIN B - Converted to months since reference point
208	H28B61_S_MONTHS	Num	8	DATE STARTED AMPHOTERICIN B - Converted to months since reference point
209	H28B62_L_MONTHS	Num	8	DATE LAST RECEIVED CLOTIMAZOLE - Converted to months since reference point
210	H28B62_S_MONTHS	Num	8	DATE STARTED CLORTIMAZOLE - Converted to months since reference point
211	H28B63_L_MONTHS	Num	8	DATE LAST RECEIVED FLUCONAZOLE - Converted to months since reference point
212	H28B63_S_MONTHS	Num	8	DATE STARTED FLUCONAZOLE - Converted to months since reference point
213	H28B64_L_MONTHS	Num	8	DATE LAST RECEIVED ITRACONAZOLE - Converted to months since reference point
214	H28B64_S_MONTHS	Num	8	DATE STARTED ITRACONAZOLE - Converted to months since reference point
215	H28B65_L_MONTHS	Num	8	DATE LAST RECEIVED KETOCONAZOLE - Converted to months since reference point
216	H28B65_S_MONTHS	Num	8	DATE STARTED KETOCONAZOLE - Converted to months since reference point
217	H28B71_L_MONTHS	Num	8	DATE LAST RECEIVED ATOCAQUONE - Converted to months since reference point
218	H28B71_S_MONTHS	Num	8	DATE STARTED ATOVAQUONE - Converted to months since reference point
219	H28B72_L_MONTHS	Num	8	DATE LAST RECEIVED DAPSONE - Converted to months since reference point
220	H28B72_S_MONTHS	Num	8	DATE STARTED DAPSONE - Converted to months since reference point

Num	Variable	Type	Len	Label
221	H28B73_L_MONTHS	Num	8	DATE LAST RECEIVED PENTAMIDINE - Converted to months since reference point
222	H28B73_S_MONTHS	Num	8	DATE STARTED PENTAMIDINE - Converted to months since reference point
223	H28B74_L_MONTHS	Num	8	DATE LAST RECEIVED PYRIMETHAMINE - Converted to months since reference point
224	H28B74_S_MONTHS	Num	8	DATE STARTED PYRIMETHAMINE - Converted to months since reference point
225	H28B75_L_MONTHS	Num	8	DATE LAST RECEIVED SULFADIAZINE - Converted to months since reference point
226	H28B75_S_MONTHS	Num	8	DATE STARTED SULFADIAZINE - Converted to months since reference point
227	H28B76_L_MONTHS	Num	8	DATE LAST RECEIVED TRIMETHOPRIM - Converted to months since reference point
228	H28B76_S_MONTHS	Num	8	DATE STARTED TRIMETHOPRIM - Converted to months since reference point
229	H28B77_L_MONTHS	Num	8	DATE LAST RECEIVED TRIMETHOPRIM-SULF - Converted to months since reference point
230	H28B77_S_MONTHS	Num	8	DATE STARTED TRIMETHOPRIM-SULF - Converted to months since reference point
231	H28B81_L_MONTHS	Num	8	DATE LAST RECEIVED AZITHROMYCIN - Converted to months since reference point
232	H28B81_S_MONTHS	Num	8	DATE STARTED AZITHROMYCIN - Converted to months since reference point
233	H28B82_L_MONTHS	Num	8	DATE LAST RECEIVED CIPROFLOXACIN - Converted to months since reference point
234	H28B82_S_MONTHS	Num	8	DATE STARTED CIPROFLOXACIN - Converted to months since reference point
235	H28B83_L_MONTHS	Num	8	DATE LAST RECEIVED CLARITHROMYCIN - Converted to months since reference point
236	H28B83_S_MONTHS	Num	8	DATE STARTED CLARITHROMYCIN - Converted to months since reference point
237	H28B84_L_MONTHS	Num	8	DATE LAST RECEIVED CLOFAZIMINE - Converted to months since reference point
238	H28B84_S_MONTHS	Num	8	DATE STARTED CLOFAZIMINE - Converted to months since reference point
239	H28B85_L_MONTHS	Num	8	DATE LAST RECEIVED ETHAMBUTOL - Converted to months since reference point
240	H28B85_S_MONTHS	Num	8	DATE STARTED ETHAMBUTOL - Converted to months since reference point
241	H28B86_L_MONTHS	Num	8	DATE LAST RECEIVED ISONIAZID - Converted to months since reference point
242	H28B86_S_MONTHS	Num	8	DATE STARTED ISONIAZID - Converted to months since reference point
243	H28B87_L_MONTHS	Num	8	DATE LAST RECEIVED OFLOXACIN - Converted to months since reference point
244	H28B87_S_MONTHS	Num	8	DATE STARTED OFLOXACIN - Converted to months since reference point
245	H28B88_L_MONTHS	Num	8	DATE LAST RECEIVED PYRAZINAMIDE - Converted to months since reference point
246	H28B88_S_MONTHS	Num	8	DATE STARTED PYRAZINAMIDE - Converted to months since reference point
247	H28B89_L_MONTHS	Num	8	DATE LAST RECEIVED RIFABUTIN - Converted to months since reference point
248	H28B89_S_MONTHS	Num	8	DATE STARTED RIFABUTIN - Converted to months since reference point
249	HB810_L_MONTHS	Num	8	DATE LAST RECEIVED RIFAMPIN - Converted to months since reference point
250	HB810_S_MONTHS	Num	8	DATE STARTED RIFAMPIN - Converted to months since reference point
251	HB811_L_MONTHS	Num	8	DATE LAST RECEIVED RIFAMATE - Converted to months since reference point
252	HB811_S_MONTHS	Num	8	DATE STARTED RIFAMATE - Converted to months since reference point
253	HB812_L_MONTHS	Num	8	DATE LAST RECEIVED RIFATER - Converted to months since reference point
254	HB812_S_MONTHS	Num	8	DATE STARTED RIFATER - Converted to months since reference point
255	HB8131_L_MONTHS	Num	8	DATE LAST RECEIVED OTHER ANTIMYCOBACTERI - Converted to months since reference point
256	HB8131_S_MONTHS	Num	8	DATE STARTED OTHER ANTIMYCOBACTERIAL-1 - Converted to months since reference point

Num	Variable	Type	Len	Label
257	HB8132_L_MONTHS	Num	8	DATE LAST RECEIVED OTHER ANTIMYCOBACTERI - Converted to months since reference point
258	HB8132_S_MONTHS	Num	8	DATE STARTED OTHER ANTIMYCOBACTERIAL-2 - Converted to months since reference point
259	HB8133_L_MONTHS	Num	8	DATE LAST RECEIVED OTHER ANTIMYCOBACTERI - Converted to months since reference point
260	HB8133_S_MONTHS	Num	8	DATE STARTED OTHER ANTIMYCOBACTERIAL-3 - Converted to months since reference point
261	HB91_1_L_MONTHS	Num	8	DATE LAST RECEIVED OTHER HIV-RELATED-1 - Converted to months since reference point
262	HB91_1_S_MONTHS	Num	8	DATE STARTED OTHER HIV-RELATED-1 - Converted to months since reference point
263	HB91_2_L_MONTHS	Num	8	DATE LAST RECEIVED OTHER HIV-RELATED-2 - Converted to months since reference point
264	HB91_2_S_MONTHS	Num	8	DATE STARTED OTHER HIV-RELATED-2 - Converted to months since reference point
265	HB91_3_L_MONTHS	Num	8	DATE LAST RECEIVED OTHER HIV-RELATED-3 - Converted to months since reference point
266	HB91_3_S_MONTHS	Num	8	DATE STARTED OTHER HIV-RELATED-3 - Converted to months since reference point
267	HB91_4_L_MONTHS	Num	8	DATE LAST RECEIVED OTHER HIV-RELATED-4 - Converted to months since reference point
268	HB91_4_S_MONTHS	Num	8	DATE STARTED OTHER HIV-RELATED-4 - Converted to months since reference point
269	HB91_5_L_MONTHS	Num	8	DATE LAST RECEIVED OTHER HIV-RELATED-5 - Converted to months since reference point
270	HB91_5_S_MONTHS	Num	8	DATE STARTED OTHER HIV-RELATED-5 - Converted to months since reference point
271	HB91_6_L_MONTHS	Num	8	DATE LAST RECEIVED OTHER HIV-RELATED-6 - Converted to months since reference point
272	HB91_6_S_MONTHS	Num	8	DATE STARTED OTHER HIV-RELATED-6 - Converted to months since reference point
273	HB91_7_L_MONTHS	Num	8	DATE LAST RECEIVED OTHER HIV-RELATED-7 - Converted to months since reference point
274	HB91_7_S_MONTHS	Num	8	DATE STARTED OTHER HIV-RELATED-7 - Converted to months since reference point
275	HB91_8_L_MONTHS	Num	8	DATE LAST RECEIVED OTHER HIV-RELATED-8 - Converted to months since reference point
276	HB91_8_S_MONTHS	Num	8	DATE STARTED OTHER HIV-RELATED-8 - Converted to months since reference point
277	HB91_9_L_MONTHS	Num	8	DATE LAST RECEIVED OTHER HIV-RELATED-9 - Converted to months since reference point
278	HB91_9_S_MONTHS	Num	8	DATE STARTED OTHER HIV-RELATED-9 - Converted to months since reference point
279	HB9110_L_MONTHS	Num	8	DATE LAST RECEIVED OTHER HIV-RELATED-1 - Converted to months since reference point
280	HB9110_S_MONTHS	Num	8	DATE STARTED OTHER HIV-RELATED-1 - Converted to months since reference point
281	HB261_L_MONTHS	Num	8	DATE LAST RECEIVED OTHER ANTIFUNGAL DRUG - Converted to months since reference point
282	HB261_S_MONTHS	Num	8	DATE STARTED OTHER ANTIFUNGAL DRUG-1 - Converted to months since reference point
283	HB262_L_MONTHS	Num	8	DATE LAST RECEIVED OTHER ANTIFUNGAL DRUG - Converted to months since reference point

Num	Variable	Type	Len	Label
284	HB262_S_MONTHS	Num	8	DATE STARTED OTHER ANTIFUNGAL DRUG-2 - Converted to months since reference point
285	HB263_L_MONTHS	Num	8	DATE LAST RECEIVED OTHER ANTIFUNGAL DRUG - Converted to months since reference point
286	HB263_S_MONTHS	Num	8	DATE STARTED OTHER ANTIFUNGAL DRUG-3 - Converted to months since reference point
287	SUBJ_ID	Char	8	Subject identifier

Data Set Name: mhcs_i_pexam.sas7bdat

Num	Variable	Type	Len	Label
1	SEGMENT	Num	5	Segment Identifier
2	FORM	Num	3	Form Number
3	STUDY	Num	3	Study NUMBER
4	PE2	Num	3	KARNOFSKY PERFORMANCE
5	PE3	Num	3	IS SCORE AFFECTED BY HEMOPHILIC ARTHROPA
6	PE6	Num	3	ALCOHOL CONSUMPTION
7	PE7	Num	3	CIGARETTE SMOKER
8	PE7A	Num	3	CIGARETTES PER DAY
9	PE8	Num	3	SMOKED CIGARS OR PIPE
10	PE9	Num	5	CONSUMPTION OF ACETAMINOPHEN
11	PE10LBS	Num	5	WEIGHT-POUNDS
12	PE10KG	Num	5	WEIGHT-KG (XX.X IMPLIED DECIMAL)
13	PE11F	Num	5	TEMPERATURE-FAHRENHEIT
14	PE11C	Num	5	TEMPERATURE-CENTIGRADE (XX.X IMPLIED DEC
15	PE12	Num	3	HEPATOMEGALY
16	PE13	Num	3	SPLENOMEGALY
17	PE14	Num	3	JAUNDICE
18	PE15	Num	3	SPIDER ANGIOMATA
19	PE16	Num	3	ASCITES
20	PE17	Num	3	NEW WART OR GROWTH
21	PE18	Num	3	SEBORRHEIC DERMATITIS
22	PE19	Num	3	ONYCHOMYCOSIS
23	PE20	Num	3	WIDESPREAD PITYRIASIS (TINEA) VERSICOLOR
24	PE21	Num	3	WIDESPREAD PYODERMA
25	PE22	Num	3	HIV-PAPULOSIS
26	PE23	Num	3	HERPES ZOSTER
27	PE24	Num	3	ORAL CANDIDIASIS
28	PE24A	Num	3	CANDIDIASIS DURING/SUBSEQUENT TO ANTIBIO
29	PE25	Num	3	ORAL HAIRY LEUKOPLAKIA
30	PE26	Num	3	PERSISTENT FEVER
31	PE27	Num	3	PERSISTENT NON-PRODUCTIVE COUGH
32	PE28	Num	3	UNEXPLAINED WEIGHT LOSS
33	PE29	Num	3	MEMORY OR CONCENTRATION PROBLEM
34	PE30	Num	3	COORDINATION OR MOTOR PROBLEM
35	PE31	Num	3	CHANGE IN MOOD OR AFFECT
36	PE32	Num	3	ORO-LABIAL HERPES SIMPLEX

Num	Variable	Type	Len	Label
37	PE33	Num	3	GENITAL WARTS
38	PE34	Num	3	GENITAL HERPES SIMPLEX, ULCERS OR OTHER
39	PE34SP	Num	3	GENITAL HERPES SIMPLEX, ULCERS OR OTHER
40	PE35	Num	3	OTHER HIV NEUROLOGICAL ABNORMALITIES
41	PE35SP	Num	3	OTHER HIV NEUROLOGICAL ABNORMALITIES-SPE
42	PE36	Num	3	CHRONIC JOINT DISEASE
43	PE37	Num	3	BLOOD IN EJACULATE
44	PE38_1	Num	3	LYMPHADENOPATHY-# OF CERVICAL SITES
45	PE38_2	Num	3	LYMPHADENOPATHY-# OF EXTRAINGUINAL SITES
46	PE38_3	Num	3	LYMPHADENOPATHY-CM OF LARGEST NODE (X.X
47	PE39_SP1	Num	5	OTHER AIDS-RELATED CONDITIONS 1
48	PE39_SP2	Num	5	OTHER AIDS-RELATED CONDITIONS 2
49	PE39_SP3	Num	5	OTHER AIDS-RELATED CONDITIONS 3
50	PE40_SP1	Num	5	OTHER CURRENT DIAGNOSES 1
51	PE40_SP2	Num	5	OTHER CURRENT DIAGNOSES 2
52	PE40_SP3	Num	5	OTHER CURRENT DIAGNOSES 3
53	PE41	Num	3	HAS PATIENT BEEN CIRCUMCISED
54	CDC	Num	3	CDC CLASSIFICATION
55	ULC_HERP	Num	3	GENITAL ULCERS OR HERPES SIMPLEX
56	OTHERSTD	Num	3	OTHER STD
57	OTHSTDSP	Num	3	SPECIFY STD
58	SPCAUSE	Num	3	SPECIFY CAUSE (ULCERS OR HERPES)
59	CMOF2ND	Num	3	CM OF 2ND/EQUALLY LRGST NODE(IMP DEC X.X
60	CDCSUB1	Char	1	SUBCLASS 1
61	CDCSUB2	Char	1	SUBCLASS 2
62	PE1_DAYS	Num	8	DATE OF CURRENT PHYSICAL EXAM - Converted to days since reference point
63	SUBJ_ID	Char	8	Subject identifier

Data Set Name: mhcs_i_suplhst.sas7bdat

Num	Variable	Type	Len	Label
1	FORM	Num	3	Form Number
2	SH2	Num	3	RECVD COMMERCL NON-HEATD CONCNRTRT 79-85
3	SH2A_79	Num	3	#DIFFRNT LOTS OF CONCENTRAT RECVD IN 79
4	SH2A_80	Num	3	#DIFFRNT LOTS OF CONCENTRAT RECVD IN 80
5	SH2A_81	Num	3	#DIFFRNT LOTS OF CONCENTRAT RECVD IN 81
6	SH2A_82	Num	3	#DIFFRNT LOTS OF CONCENTRAT RECVD IN 82
7	SH2A_83	Num	3	#DIFFRNT LOTS OF CONCENTRAT RECVD IN 83
8	SH2A_84	Num	3	#DIFFRNT LOTS OF CONCENTRAT RECVD IN 84
9	SH2A_85	Num	3	#DIFFRNT LOTS OF CONCENTRAT RECVD IN 85
10	SH3	Num	3	SMOKED CIGARETTES REGULARLY FOR 3 MNTS
11	SH3_A	Num	3	APPROXIMATE YEAR BEGAN SMOKING REGULARLY
12	SH3_C	Num	4	AVERAGE #OF CIGARETTES YOU SMOKE PER DAY
13	SH4	Num	3	EXPOSED TO OTHER'S SMOKE DAILY
14	SH4_A	Num	3	# YEARS EXPOSED TO OTHER'S SMOKE DAILY
15	SH5	Num	3	REGULARLY SMOKED CIGARS OR PIPE
16	SH5_A	Num	3	YEAR BEGAN SMOKING CIGARS/PIPE REGULARLY
17	SH5_B	Num	4	# OF CIGARS OR PIPEFULS SMOKED PER WEEK
18	SH6	Num	3	CHEWED TOBACCO OR DIPPED SNUFF REGULARLY
19	SH1_DAYS	Num	8	CURRENT DATE - Converted to days since reference point
20	SH3_B_MONTHS	Num	8	DATE STOPPED SMOKING REGULARLY - Converted to months since reference point
21	SH4_B_MONTHS	Num	8	DATE LAST EXPOSED TO OTHERS SMOKE DAILY - Converted to months since reference point
22	SH5_C_MONTHS	Num	8	DATE LAST SMOKED CIGARS/PIPE REGULARLY - Converted to months since reference point
23	SH6_A_MONTHS	Num	8	DATE BEGAN CHEWING TOBACCO/DIPPING SNUFF - Converted to months since reference point
24	SH6_B_MONTHS	Num	8	DATE LAST CHEWED TOBACCO/DIPPED SNUFF - Converted to months since reference point
25	SUBJ_ID	Char	8	Subject identifier

Data Set Name: mhcs_i_tcells.sas7bdat

Num	Variable	Type	Len	Label
1	FORM	Num	8	Form Number
2	SAMPL_ID	Char	7	SAMPLE ID
3	HT4	Num	8	T4 %
4	HT8	Num	8	T8 %
5	HT3	Num	8	T3 %
6	HT11	Num	8	T11 %
7	HB1	Num	8	B1 %
8	HLEU_12	Num	8	LEU/16 %
9	HANTI_LE	Num	8	ANTI LEUKOCYTE %
10	HTOTWBC	Num	8	TOTAL WBC
11	HLYMPHS	Num	8	LYMPHOCYTES
12	HTOTLYMP	Num	8	TOTAL LYMPHOCYTES MM
13	H4MANUF	Num	8	MANUFACTURER OF TEST
14	H4RESULT	Num	8	HIV VIRAL LOAD RESULTS
15	H4MATER	Char	1	MATERIAL USED FOR TEST
16	H4LOWER	Num	8	LOWER LIMIT OF DETECTABILITY
17	HTOTT4	Num	5	TOTAL T4 RANGE
18	HTOTT8	Num	5	TOTAL T8 RANGE
19	HTOTT	Num	5	TOTAL T RANGE
20	HT4T8	Num	5	T4:T8 RATIO RANGE
21	HT4PT8P	Num	3	T4+ T8+ RANGE
22	HT11PB1P	Num	3	T11+ B1+ RANGE
23	HT4PT8N	Num	3	T4+ T8- RANGE
24	HT11PB1N	Num	3	T11+ B1- RANGE
25	HT4NT8P	Num	3	T4- T8+ RANGE
26	HT11NB1P	Num	3	T11- B1+ RANGE
27	HT4NT8N	Num	3	T4- T8- RANGE
28	HT11NB1N	Num	3	T11- B1- RANGE
29	H4LEU	Char	2	LEU/16 %
30	H4LEUK	Char	3	ANTI LEUKOCYTE %
31	H4WBC	Char	5	TOTAL WBC
32	H4LYMP	Char	2	LYMPHOCYTES
33	H4TOTAL	Char	5	TOTAL LYMPHOCYTES MM
34	HT0TWBC	Num	8	
35	DABS_DAYS	Num	8	DATE SAMPLE DRAWN - Converted to days since reference point
36	H4DOS_DAYS	Num	8	DATE OF SAMPLE FOR VIRAL LOAD - Converted to days since reference point

Num	Variable	Type	Len	Label
37	H4DST_DAYS	Num	8	DATE SAMPLE TESTED - Converted to days since reference point
38	SUBJ_ID	Char	8	Subject identifier

Data Set Name: mhcs_i_transfer.sas7bdat

Num	Variable	Type	Len	Label
1	FORM	Num	8	Form Number
2	H29_3	Num	8	SUBJECT TRANSFER TO ANOTHER MCHS CENTER
3	H29_4	Num	8	SUBJECT HAD LOW CD4 SINCE LAST VISIT
4	H29_4CD4	Num	8	CD4 ABSOLUTE
5	H29_4CDP	Num	8	CD4 PERCENT
6	H29_5	Num	8	SUBJECT DIAGNOSED WITH WITH ANY DISEASE
7	H29_6	Num	8	WHICH AIDS-DEFINING DISEASE(S)
8	H29_6A	Num	8	PNEUMOCYSTIS CARINII PNEUMONIA
9	H29_6B	Num	8	WASTING SYNDROME
10	H29_6C	Num	8	HIV ENCEPHALOPATHY/HIV DEMENTIA
11	H29_6D	Num	8	CANDIDIASIS OF ESOPHAGUS/LUNGS
12	H29_6E	Num	8	CRYPTOSPORIDIOSIS WITH DIARRHEA
13	H29_6F	Num	8	HERPES SIMPLEX IN LUNGS/ESOPHAGUS
14	H29_6G	Num	8	HERPES SIMPLEX ULCER FOR >1 MONTH
15	H29_6H	Num	8	PROGRESSIVE MULTIFOCAL LEUKOENCEPHALOPAT
16	H29_6I	Num	8	TOXOPLASMOSIS OF THE BRAIN
17	H29_6J	Num	8	COCCIDIOIDOMYCOSIS, EXTRAPULMONARY
18	H29_6K	Num	8	HISTOPLASMOSIS, EXTRAPULMONARY
19	H29_6L	Num	8	CYPTOCOCCOSIS, EXTRAPULMONARY
20	H29_6M	Num	8	SALMONELLA, SEPTICEMIA, RECURRENT
21	H29_6N	Num	8	ISOSPORIASIS WITH DIARRHEA
22	H29_6O	Num	8	LIP OR PULMONARY LYMPHOID HYPERPLASIA
23	H29_6P	Num	8	LYMPHOMA OF THE BRAIN
24	H29_6Q	Num	8	NON-HODGIN'S LYMPHOMA
25	H29_6QSS	Num	8	SPECIFY NHL SITE
26	H29_6QST	Num	8	SPECIFY NHL TYPE
27	H29_6R	Num	8	KAPOSI'S SARCOMA
28	H29_6S	Num	8	MYCOBACTERIUM AVIUM
29	H29_6SS	Num	8	SPECIFY MAI SITE
30	H29_6T	Num	8	CMV
31	H29_6TS	Num	8	CMV-SPECIFY SITE
32	H29_6U	Num	8	BACTERIAL INFECTIONS
33	H29_6U1	Num	8	BACTERIAL INFECTIONS-1
34	H29_6US1	Num	8	SPECIFY BACTERIA 1
35	H29_6U2	Num	8	BACTERIAL INFECTIONS-2
36	H29_6US2	Num	8	SPECIFY BACTERIA 2

Num	Variable	Type	Len	Label
37	H29_6W	Num	8	PULMONARY TUBERCULOSIS
38	H29_6X	Num	8	RECURRENT PNEUMONIA
39	H29_6Y	Num	8	OTHER DISEASE NOT LISTED
40	H29_6YS	Num	8	SPECIFY OTHER DIESEASE NOT LISTED
41	H29_7	Num	8	REASON FOR DISCONTINUATION
42	H29_7S	Num	8	REASON FOR DISCONTINUATION-SPECIFY
43	H29_8U	Num	8	DATE LAST KNOW ALIVE-UNKNOWN
44	H29_9	Num	8	IS DATE OF DEATH KNOW
45	H29_10	Num	8	CAUSE OF DEATH KNOWN
46	H29_10AP	Num	8	PRIMARY CAUSE OF DEATH
47	H2910AP2	Num	8	OTHER PRIMARY CAUSE OF DEATH-SPECIFY
48	H29_10A1	Num	8	SECONDARY CAUSE OF DEATH: AIDS
49	H29_10A2	Num	8	SECONDARY CAUSE OF DEATH: OTHER HIV DISE
50	H29_10A3	Num	8	SECONDARY CAUSE OF DEATH: LIVER FAILURE
51	H29_10A4	Num	8	SECONDARY CAUSE OF DEATH: HEMORRHAGE
52	H29_10A5	Num	8	SECONDARY CAUSE OF DEATH: OTHER BLOOD DI
53	H29_10A6	Num	8	SECONDARY CAUSE OF DEATH: CANCER
54	H2910A6S	Num	8	SECONDARY CAUSE OF DEATH: SPECIFY CANCER
55	H29_10A7	Num	8	SECONDARY CAUSE OF DEATH: TRAUMA
56	H29_10A8	Num	8	SECONDARY CAUSE OF DEATH: HEART DISEASE
57	H29_10A9	Num	8	SECONDARY CAUSE OF DEATH: RENAL DISEASE
58	H2910A10	Num	8	SECONDARY CAUSE OF DEATH: NON AIDS INFEC
59	H2910A11	Num	8	SECONDARY CAUSE OF DEATH: STROKE
60	H2910AS2	Num	8	OTHER SECONDARY CAUSE OF DEATH-SPECIFY
61	H2910AS3	Num	8	OTHER SECONDARY CAUSE OF DEATH-SPECIFY
62	H29_11	Num	8	WAS AN AUTOPSY PERFORMED
63	H296U1_DAYS	Num	8	BACTERIAL INFECTIONS-1-DATE - Converted to days since reference point
64	H296U2_DAYS	Num	8	BACTERIAL INFECTIONS-2-DATE - Converted to days since reference point
65	H29_1_DAYS	Num	8	DATE FORM COMPLETED: DATE - Converted to days since reference point
66	H29_2_DAYS	Num	8	DATE MOST CURRENT INFORMATION: DATE - Converted to days since reference point
67	H29_3_DAYS	Num	8	DATE OF TRANSFER: DATE - Converted to days since reference point
68	H29_4_DAYS	Num	8	DATE SAMPLE DRAWN-DATE - Converted to days since reference point
69	H29_6A_DAYS	Num	8	PNEUMOCYSTIS CARINII PNEUMONIA-DATE - Converted to days since reference point
70	H29_6B_DAYS	Num	8	WASTING SYNDROME-DATE - Converted to days since reference point
71	H29_6C_DAYS	Num	8	HIV ENCEPHALOPATHY/HIV DEMENTIA-DATE - Converted to days since reference point
72	H29_6D_DAYS	Num	8	CANDIDIASIS OF ESOPHAGUS/LUNGS -DATE - Converted to days since reference point
73	H29_6E_DAYS	Num	8	CRYPTOSPORIDIOSIS WITH DIARRHEA-DATE - Converted to days since reference point
74	H29_6F_DAYS	Num	8	HERPES SIMPLEX IN LUNGS/ESOPHAGUS-DATE - Converted to days since reference point
75	H29_6G_DAYS	Num	8	HERPES SIMPLEX ULCER FOR >1 MONTH-DATE - Converted to days since reference point

Num	Variable	Type	Len	Label
76	H29_6H_DAYS	Num	8	PROGRESSIVE MULTIFOCAL LEUKOENCEPHALOPAT - Converted to days since reference point
77	H29_6I_DAYS	Num	8	TOXOPLASMOSIS OF THE BRAIN-DATE - Converted to days since reference point
78	H29_6J_DAYS	Num	8	COCCIDIOIDOMYCOSIS, EXTRAPULMONARY -DATE - Converted to days since reference point
79	H29_6K_DAYS	Num	8	HISTOPLASMOSIS, EXTRAPULMONARY-DATE - Converted to days since reference point
80	H29_6L_DAYS	Num	8	CYPTOCOCCOSIS, EXTRAPULMONARY-DATE - Converted to days since reference point
81	H29_6M_DAYS	Num	8	SALMONELLA, SEPTICEMIA, RECURRENT-DATE - Converted to days since reference point
82	H29_6N_DAYS	Num	8	ISOSPORIASIS WITH DIARRHEA-DATE - Converted to days since reference point
83	H29_6O_DAYS	Num	8	LIP OR PULMONARY LYMPHOID HYPERPLASIA DATE - Converted to days since reference point
84	H29_6P_DAYS	Num	8	LYMPHOMA OF THE BRAIN-DATE - Converted to days since reference point
85	H29_6Q_DAYS	Num	8	NON-HODGIN'S LYMPHOMA-DATE - Converted to days since reference point
86	H29_6R_DAYS	Num	8	KAPOSI'S SARCOMA-DATE - Converted to days since reference point
87	H29_6S_DAYS	Num	8	MYCOBACTERIUM AVIUM-DATE - Converted to days since reference point
88	H29_6T_DAYS	Num	8	CMV-DATE - Converted to days since reference point
89	H29_6U_DAYS	Num	8	BACTERIAL INFECTIONS-DATE - Converted to days since reference point
90	H29_6W_DAYS	Num	8	PULMONARY TUBERCULOSIS-DATE - Converted to days since reference point
91	H29_6X_DAYS	Num	8	RECURRENT PNEUMONIA-DATE - Converted to days since reference point
92	H29_6Y_DAYS	Num	8	OTHER DISEASE NOT LISTED-DATE - Converted to days since reference point
93	H29_8_DAYS	Num	8	DATE LAST KNOW ALIVE-DATE - Converted to days since reference point
94	H29_9A_DAYS	Num	8	DATE LAST KNOW ALIVE-DATE - Converted to days since reference point
95	H29_9D_DAYS	Num	8	DATE OF DEATH-DATE - Converted to days since reference point
96	SUBJ_ID	Char	8	Subject identifier

Data Set Name: mhcs_i_vital25.sas7bdat

Num	Variable	Type	Len	Label
1	FORM	Num	8	Form Number
2	H25_1	Num	8	IS THIS PATIENT ALIVE
3	H25_2A	Num	8	PRIMARY CAUSE OF DEATH
4	H25_2B1	Num	8	SECONDARY CAUSE(S) OF DEATH-ONE
5	H25_2B2	Num	8	SECONDARY CAUSE(S) OF DEATH-TWO
6	H25_2B3	Num	8	SECONDARY CAUSE(S) OF DEATH-THREE
7	H25_3A	Num	8	HOW DO YOU KNOW PATIENT WAS ALIVE ON THA
8	H25_4	Num	8	WAS AIDS EVER DIAGNOSED IN THIS PATIENT
9	H25_4A	Num	8	DISEASE PRESENT TO CAUSE AIDS DIAGNOSIS-
10	H25_4B	Num	8	DISEASE PRESENT TO CAUSE AIDS DIAGNOSIS-
11	H25_4C	Num	8	DISEASE PRESENT TO CAUSE AIDS DIAGNOSIS-
12	H25_4D	Num	8	DISEASE PRESENT TO CAUSE AIDS DIAGNOSIS-
13	H25_4E	Num	8	DISEASE PRESENT TO CAUSE AIDS DIAGNOSIS-
14	H25_2_DAYS	Num	8	DATE OF DEATH - Converted to days since reference point
15	H25_3_DAYS	Num	8	DATE LAST KNOWN ALIVE - Converted to days since reference point
16	H25_4A_DAYS	Num	8	DATE 1ST DISEASE DIAGNOSED THAT CAUSED AIDS - Converted to days since reference point
17	H25_4B_DAYS	Num	8	DATE 2ND DISEASE DIAGNOSED THAT CAUSED AIDS - Converted to days since reference point
18	H25_4C_DAYS	Num	8	DATE 3RD DISEASE DIAGNOSED THAT CAUSED AIDS - Converted to days since reference point
19	H25_4D_DAYS	Num	8	DATE 4TH DISEASE DIAGNOSED THAT CAUSED AIDS - Converted to days since reference point
20	H25_4E_DAYS	Num	8	DATE 5TH DISEASE DIAGNOSED THAT CAUSED AIDS - Converted to days since reference point
21	SUBJ_ID	Char	8	Subject identifier

Data Set Name: mhcs_ii_f26.sas7bdat

Num	Variable	Type	Len	Format	Label
1	H26_NS	Num	8		NOTIFICATION SOURCE
2	H26_NSS	Num	8		NOTIFICATION SOURCE-SPECIFY
3	H26_CC	Num	8		CONFIRMATION CATEGORY
4	H26_DIA	Char	65		DIAGNOSIS
5	H26_CTY	Num	8		CANCER TYPE
6	H26_ICD	Char	10		ICD-O CODE
7	H26_AD	Num	8		AIDS DEFINING
8	H26_CD	Num	8		CONFIRMING DOCUMENTATION
9	H26_DT	Num	8		DOCUMENTATION TYPE
10	H26_DTS	Num	8		DOCUMENTATION TYPE-SPECIFY
11	H26_CT	Num	8		WAS CANCER TREATED
12	H26_RX	Num	8		DID CANCER RESPOND TO RX
13	H26_CTF	Num	8		CASE CLOSED TO FOLLOW-UP
14	DIA_DT	Num	4	8.	DIAGNOSIS DATE: SAS DATE: Converted to days since reference date
15	DIA_DF	Num	8		DIAGNOSIS DATE: IMPUTE FLAG
16	SUBJ_ID	Char	8		MHCS SUBJECT IDENTIFIER

Data Set Name: mhcs_ii_f50.sas7bdat

Num	Variable	Type	Len	Format	Label
1	PRODHX_V	Num	4		FLAG TO INDICATE PRODUCT HIST. VERIFIED
2	H50_LANG	Num	4		WHAT LANGUAGE IS SURVEY PRINTED IN ?
3	FORM	Num	4		Form Number
4	H50_A1	Num	4		RELATIVE HAD HEMOPHILIA OR von WILLEBRAN
5	H50_A1A	Num	4		RELATIVE WITH HEMOPHILIA OR vW HAD AN IN
6	H50_A2	Num	4		ANY BROTHERS WITH HEMOPHILIA
7	H50_A2A	Num	4		# BROTHERS WITH HEMOPHILIA: TOP-CODED AT 3
8	H50_A3	Num	4		SISTERS/BROTHERS W/ von WILLEBRAND'S DIS
9	H50_A3A	Num	4		# SISTERS/BROTHERS W/ von WILLEBRAND'S DISEASE: TOP-CODED AT 3
10	H50_B4	Num	4		RECEIVED PLASMA OR CRYOPRECIPITATE
11	H50_B4AA	Num	4		AGE (YRS) FIRST RECEIVED PLASMA OR CRYOP
12	H50_B4AM	Num	4		AGE (MTHS) FRST RECEIVED PLASMA/CRYOPREC
13	H50_B4BA	Num	4		AGE (YRS) LAST RECEIVED PLASMA/CRYOPRECI
14	H50_B4BM	Num	4		AGE (MTHS) LAST RECEIVED PLASMA/CRYOPREC
15	h50_B5	Num	4		RECEIVED A TRANSFUSION OF WHOLE OR RED C
16	H50_B5AA	Num	4		AGE (YRS) RECVD A TRANSFUSION OF WHOLE/R
17	H50_B5AM	Num	4		AGE (MTHS) RECVD A TRANSFUSION OF WHOLE/
18	H50_B6	Num	4		RECEIVED A TRANSFUSION OF PLATELETS
19	H50_B6AA	Num	4		AGE (YRS) RECVD A TRANSFUSION OF PLATELE
20	H50_B6AM	Num	4		AGE (MTHS) RECVD A TRANSFUSION OF PLATEL
21	H50_B7	Num	4		RECEIVED A NON-HEAT-TREATED FACTOR
22	H50_B7AA	Num	4		AGE (YRS) RECVD A NON-HEAT-TREATED FACTO
23	H50_B7AM	Num	4		AGE (MTHS) RECVD A NON-HEAT-TREATED FACT
24	H50_B8	Num	4		RCVD AT LEAST 50,000 UNITS OF FACTOR CON
25	H50_B8A	Num	4		AGE 1ST RCVD AT LEAST 50,000 UNITS OF FA
26	H50_B8B	Num	4		AGE 2ND RCVD AT LEAST 50,000 UNITS OF FA
27	H50_B8C	Num	4		AGE 3RD RCVD AT LEAST 50,000 UNITS OF FA
28	H50_B9	Num	4		<6 YEARS OLD, USE FACTOR CONCENTRATE
29	H50_B9A	Num	4		<6 YEARS OLD, AVERAGE USE OF FACTOR CONC
30	H50_B10	Num	4		<6 YEARS OLD, USE PLASMA/CRYOPRECIPIATE
31	H50_B10A	Num	4		<6 YEARS OLD, AVERAGE USE OF PLASMA/CRYO
32	H50_B11	Num	4		6-12 YEARS OLD, USE FACTOR CONCENTRATE
33	H50_B11A	Num	4		6-12 YEARS OLD, AVERAGE USE OF FACTOR CO
34	H50_B12	Num	4		6-12 YEARS OLD, USE PLASMA/CRYOPRECIPIAT
35	H50_B12A	Num	4		6-12 YEARS OLD, AVG USE OF PLASMA/CRYOPR
36	H50_B13	Num	4		13-20 YEARS OLD, USE FACTOR CONCENTRATE

Num	Variable	Type	Len	Format	Label
37	H50_B13A	Num	4		13-20 YEARS OLD, AVERAGE USE OF FACTOR C
38	H50_B14	Num	4		13-20 YEARS OLD, USE PLASMA/CRYOPRECIPIA
39	H50_B14A	Num	4		13-20 YRS: AVERAGE USE OF PLASMA/CRYOPRE
40	H50_B15	Num	4		21-30 YEARS OLD, USE FACTOR CONCENTRATE
41	H50_B15A	Num	4		21-30 YEARS OLD, AVERAGE USE OF FACTOR C
42	H50_B16	Num	4		21-30 YEARS OLD, USE PLASMA/CRYOPRECIPIA
43	H50_B16A	Num	4		21-30 YRS: AVERAGE USE OF PLASMA/CRYOPRE
44	H50_B17	Num	4		31-40 YEARS OLD, USE FACTOR CONCENTRATE
45	H50_B17A	Num	4		31-40 YEARS OLD, AVERAGE USE OF FACTOR C
46	H50_B18	Num	4		31-40 YEARS OLD, USE PLASMA/CRYOPRECIPIA
47	H50_B18A	Num	4		31-40 YRS: AVERAGE USE OF PLASMA/CRYOPRE
48	H50_B19	Num	4		41-50 YEARS OLD, USE FACTOR CONCENTRATE
49	H50_B19A	Num	4		41-50 YEARS OLD, AVERAGE USE OF FACTOR C
50	H50_B20	Num	4		41-50 YEARS OLD, USE PLASMA/CRYOPRECIPIA
51	H50_B20A	Num	4		41-50 YRS: AVERAGE USE OF PLASMA/CRYOPRE
52	H50_B21	Num	4		51-60 YEARS OLD, USE FACTOR CONCENTRATE
53	H50_B21A	Num	4		51-60 YEARS OLD, AVERAGE USE OF FACTOR C
54	H50_B22	Num	4		51-60 YEARS OLD, USE PLASMA/CRYOPRECIPIA
55	H50_B22A	Num	4		51-60 YRS: AVERAGE USE OF PLASMA/CRYOPRE
56	H50_B23	Num	4		>=60 YEARS OLD, USE FACTOR CONCENTRATE
57	H50_B23A	Num	4		>=60 YEARS OLD, AVERAGE USE OF FACTOR CO
58	H50_B24	Num	4		>= YEARS OLD, USE PLASMA/CRYOPRECIPIATE
59	H50_B24A	Num	4		>= YEARS OLD, AVERAGE USE OF PLASMA/CRYO
60	H50_C1	Num	4		1ST PRESCRIPTION DRUG TAKEN
61	H50_C1Y	Num	4		1ST PRESCRIPTION DRUG TAKEN-hEPATOTOXIC?
62	H50_C2	Num	4		2ND PRESCRIPTION DRUG TAKEN
63	H50_C2Y	Num	4		2ND PRESCRIPTION DRUG TAKEN-hEPATOTOXIC?
64	H50_C3	Num	4		3RD PRESCRIPTION DRUG TAKEN
65	H50_C3Y	Num	4		3RD PRESCRIPTION DRUG TAKEN-hEPATOTOXIC?
66	H50_C4	Num	4		4TH PRESCRIPTION DRUG TAKEN
67	H50_C4Y	Num	4		4TH PRESCRIPTION DRUG TAKEN-hEPATOTOXIC?
68	H50_C5	Num	4		5TH PRESCRIPTION DRUG TAKEN
69	H50_C5Y	Num	4		5TH PRESCRIPTION DRUG TAKEN-hEPATOTOXIC?
70	H50_C6	Num	4		6TH PRESCRIPTION DRUG TAKEN
71	H50_C6Y	Num	4		6TH PRESCRIPTION DRUG TAKEN-hEPATOTOXIC?
72	H50_C7	Num	4		7TH PRESCRIPTION DRUG TAKEN
73	H50_C7Y	Num	4		7TH PRESCRIPTION DRUG TAKEN-hEPATOTOXIC?
74	H50_C8	Num	4		8TH PRESCRIPTION DRUG TAKEN
75	H50_C8Y	Num	4		8TH PRESCRIPTION DRUG TAKEN-hEPATOTOXIC?

Num	Variable	Type	Len	Format	Label
76	H50_C9	Num	4		9TH PRESCRIPTION DRUG TAKEN
77	H50_C9Y	Num	4		9TH PRESCRIPTION DRUG TAKEN-hEPATOTOXIC?
78	H50_C10	Num	4		10TH PRESCRIPTION DRUG TAKEN
79	H50_C10Y	Num	4		10TH PRESCRIPTION DRUG TAKEN-hEPATOTOXIC
80	H50_HIV	Num	4		CURRENTLY TAKING MEDS FOR HIV/AIDS
81	H50_HD1	Num	4		ANTIRETROVIRAL MEDS-AMPRENAVIR
82	H50_HD2	Num	4		ANTIRETROVIRAL MEDS-ABACAVIR
83	H50_HD3	Num	4		ANTIRETROVIRAL MEDS-COMBIVIR
84	H50_HD4	Num	4		ANTIRETROVIRAL MEDS-DIDANOSINE (DDI)
85	H50_HD5	Num	4		ANTIRETROVIRAL MEDS-DELAVIRDINE
86	H50_HD6	Num	4		ANTIRETROVIRAL MEDS-EFAVIRENZ
87	H50_HD7	Num	4		ANTIRETROVIRAL MEDS-HYDROXYUREA
88	H50_HD8	Num	4		ANTIRETROVIRAL MEDS-INDINAVIR
89	H50_HD9	Num	4		ANTIRETROVIRAL MEDS-LAMIVUDINE (3TC)
90	H50_HD10	Num	4		ANTIRETROVIRAL MEDS-LOPINAVIR/RITONAVIR(
91	H50_HD11	Num	4		ANTIRETROVIRAL MEDS-NEVIRAPINE(VIRAMUNE)
92	H50_HD12	Num	4		ANTIRETROVIRAL MEDS-NELFINAVIR
93	H50_HD13	Num	4		ANTIRETROVIRAL MEDS-RITONAVIR
94	H50_HD14	Num	4		ANTIRETROVIRAL MEDS-SAQUINAVIR
95	H50_HD15	Num	4		ANTIRETROVIRAL MEDS-STAVUDINE
96	H50_HD16	Num	4		ANTIRETROVIRAL MEDS-TRIZAVIR
97	H50_HD17	Num	4		ANTIRETROVIRAL MEDS-ZALCITABINE (DDC)
98	H50_HD18	Num	4		ANTIRETROVIRAL MEDS-ZIDOVUDINE (AZT)
99	H50_HD19	Num	4		PROPHYLAXIS MEDS-ACYCLOVIR
100	H50_HD20	Num	4		PROPHYLAXIS MEDS-AEROSOLIZED PENTAMIDINE
101	H50_HD21	Num	4		PROPHYLAXIS MEDS-ATOVAQUONE
102	H50_HD22	Num	4		PROPHYLAXIS MEDS-DAPSONE
103	H50_HD23	Num	4		PROPHYLAXIS MEDS-AZITHROMYCIN
104	H50_HD24	Num	4		PROPHYLAXIS MEDS-CLARITHROMYCIN
105	H50_HD25	Num	4		PROPHYLAXIS MEDS-FAMCICLOVIR
106	H50_HD26	Num	4		PROPHYLAXIS MEDS-FLUCONAZOLE
107	H50_HD27	Num	4		PROPHYLAXIS MEDS-GANCICLOVIR
108	H50_HD28	Num	4		PROPHYLAXIS MEDS-RIFABUTIN
109	H50_HD29	Num	4		PROPHYLAXIS MEDS-TRIMETHOPRIM/SULFA
110	H50_HD30	Num	4		PROPHYLAXIS MEDS-VALACYCLOVIR
111	H50_OHD1	Num	4		1ST OTHER HIV TREATMENT DRUG
112	H50_OHD2	Num	4		2ND OTHER HIV TREATMENT DRUG
113	H50_OHD3	Num	4		3RD OTHER HIV TREATMENT DRUG
114	H50_OHD4	Num	4		4TH OTHER HIV TREATMENT DRUG

Num	Variable	Type	Len	Format	Label
115	H50_OHD5	Num	4		5TH OTHER HIV TREATMENT DRUG
116	H50_LA1	Num	4		REDUCE AMOUNT OF TIME SPENT ON WORK?
117	H50_LA2	Num	4		ACCOMPLISH LESS THAN YOU WOULD LIKE?
118	H50_LA3	Num	4		LIMITED IN THE KIND OF WORK/ACTIVITIES?
119	H50_LA4	Num	4		HAVE DIFFICULTY PERFORMING WORK/ACTIVITI
120	H50_LA5	Num	4		PAIN IN YOUR JOINTS PAST 4 WEEKS
121	H50_LA6	Num	4		PAIN OF OTHER TYPES PAST 4 WEEKS
122	H50_LA7	Num	4		HOW MUCH DID PAIN INTERFERE WITH NORMAL
123	H50_LB8	Num	4		PAST MONTH: HOW OFTEN TAKEN ACETAMINOPHE
124	H50_LB9	Num	4		PAST 3 MONTHS: # ACETAMINOPHEN A WEEK
125	H50_LB10	Num	4		PAST 3 MONTHS: MAX # ACETAMINOPHEN A WEE
126	H50_LB11	Num	4		3-12 MONTHS: # ACETAMINOPHEN A WEEK
127	H50_LB12	Num	4		3-12 MONTHS: MAX # ACETAMINOPHEN A WEEK
128	H50_LB13	Num	4		PAST MONTH: HOW OFTEN TAKEN NSAIDS
129	H50_LB14	Num	4		PAST 3 MONTHS: # NSAIDS A WEEK
130	H50_LB15	Num	4		PAST 3 MONTHS: MAX # NSAIDS A WEEK
131	H50_LB16	Num	4		3-12 MONTHS: # NSAIDS A WEEK
132	H50_LB17	Num	4		3-12 MONTHS: MAX # NSAIDS A WEEK
133	H50_LB18	Num	4		PAST MONTH: HOW OFTEN TAKEN CODEINE/OTHE
134	H50LB19P	Num	4		PAST 3 MONTHS: # CODEINE/OTHER PILLS A W
135	H50LB19I	Num	4		PAST 3 MONTHS: # CODEINE/OTHER INJECTION
136	H50LB20P	Num	4		PAST 3 MONTHS: MAX # CODEINE/OTHER PILLS
137	H50LB20I	Num	4		PAST 3 MONTHS: MAX # CODEINE/OTHER INJEC
138	H50LB21P	Num	4		3-12 MONTHS: # CODEINE/OTHER PILLS A WEE
139	H50LB21I	Num	4		3-12 MONTHS: # CODEINE/OTHER INJECTIONS
140	H50LB22P	Num	4		3-12 MONTHS: MAX # CODEINE/OTHER PILLS A
141	H50LB22I	Num	4		3-12 MONTHS: MAX # CODEINE/OTHER INJECTI
142	H50_LC23	Num	4		EVER HAD A DRINK CONTAINIGN ALCOHOL
143	H50LC23A	Num	4		AGE FIRST HAD A DRINK
144	H50LC23B	Num	4		AGE LAST HAD A DRINK
145	H50LC24W	Num	4		PAST 3 MONTH, # OF DRINKS PER WEEK
146	H50LC24M	Num	4		PAST 3 MONTH, # OF DRINKS PER MONTH
147	H50LC25W	Num	4		PAST 3 MONTHS, MAX # DRINKS ANY ONE WEEK
148	H50LC25D	Num	4		PAST 3 MONTHS, MAX # DRINKS ANY ONE DAY
149	H50_LC26	Num	4		YEAR FOUND OUT YOU HAD HCV
150	H50LC27W	Num	4		YEAR BEFORE HCV, # OF DRINKS A WEEK
151	H50LC27M	Num	4		YEAR BEFORE HCV, # OF DRINKS A MONTH
152	H50LC28W	Num	4		YEAR BEFORE HCV, MAX # OF DRINKS A WEEK
153	H50LC28D	Num	4		YEAR BEFORE HCV, MAX # OF DRINKS A DAY

Num	Variable	Type	Len	Format	Label
154	H50LC29W	Num	4		YEAR AFTER HCV, # OF DRINKS A WEEK
155	H50LC29M	Num	4		YEAR AFTER HCV, # OF DRINKS A MONTH
156	H50LC30W	Num	4		YEAR AFTER HCV, MAX # OF DRINKS A WEEK
157	H50LC30D	Num	4		YEAR AFTER HCV, MAX # OF DRINKS A DAY
158	H50_LC31	Num	4		IN LAST YEAR: UNABLE TO STOP DRINKING
159	H50_LC32	Num	4		IN LAST YEAR: FAILED TO DUE WHAT NORMALL
160	H50_LC33	Num	4		IN LAST YEAR: NEED DRINK FIRST THING
161	H50_LC34	Num	4		IN LAST YEAR: FELT GUILTY AFTER DRINKING
162	H50_LC35	Num	4		IN LAST YEAR: UNABLE TO REMEMBER WHAT HA
163	H50_LC36	Num	4		IN LAST YEAR: YOU OR SOMEONE ELSE BEEN I
164	H50_LC37	Num	4		IN LAST YR: SOMEONE CONCERNED ABOUT YOUR
165	H50_LD38	Num	4		EVER SMOKED CIGARETTES REGULARLY
166	H50_LD39	Num	4		SMOKED CIGARETTES PAST SIX MONTHS
167	H50_LD40	Num	4		WHAT AGE DID YOU BEGIN SMOKING CIGARETTE
168	H50_LD41	Num	4		WHAT AGE STOPPED SMOKING CIGARETTES
169	H50_LD42	Num	4		HOW MANY CIGARETES SMOKED PER DAY
170	H50_LD43	Num	4		SMOKED A PIPEOR CIGAR IN THE PAST 6 MONT
171	H50_LD44	Num	4		# OF PIPES/CIGARS SMOKED
172	H50_HS1	Num	4		HERBAL SUPPLEMENTS-ALCHEMILLA
173	H50_HS2	Num	4		HERBAL SUPPLEMENTS-CHAPARRAL
174	H50_HS3	Num	4		HERBAL SUPPLEMENTS-CHONDROITIN
175	H50_HS4	Num	4		HERBAL SUPPLEMENTS-EVENING PRIMROSE
176	H50_HS5	Num	4		HERBAL SUPPLEMENTS-EPHEDRA
177	H50_HS6	Num	4		HERBAL SUPPLEMENTS-FEVERFEW
178	H50_HS7	Num	4		HERBAL SUPPLEMENTS-FISH OIL
179	H50_HS8	Num	4		HERBAL SUPPLEMENTS-GENTIAN
180	H50_HS9	Num	4		HERBAL SUPPLEMENTS-GERMANDER
181	H50_HS10	Num	4		HERBAL SUPPLEMENTS-GINKGO
182	H50_HS11	Num	4		HERBAL SUPPLEMENTS-GINSENG
183	H50_HS12	Num	4		HERBAL SUPPLEMENTS-GINGER
184	H50_HS13	Num	4		HERBAL SUPPLEMENTS-GLUCOSAMINE
185	H50_HS14	Num	4		HERBAL SUPPLEMENTS-JI BU HUAN
186	H50_HS15	Num	4		HERBAL SUPPLEMENTS-MILK THISTLE
187	H50_HS16	Num	4		HERBAL SUPPLEMENTS-SENNA
188	H50_HS17	Num	4		HERBAL SUPPLEMENTS-SHARK CARTILAGE
189	H50_HS18	Num	4		HERBAL SUPPLEMENTS-SCURELLARIA
190	H50_HS19	Num	4		HERBAL SUPPLEMENTS-ST. JOHN'S WART
191	H50_OD28	Num	4		OTHER DRUGS-OTHER
192	H50_ODS1	Num	4		OTHER DRUGS-OTHER SPECIFY-1

Num	Variable	Type	Len	Format	Label
193	H50_ODS2	Num	4		OTHER DRUGS-OTHER SPECIFY-S
194	H50_ODS3	Num	4		OTHER DRUGS-OTHER SPECIFY-3
195	H50_LF45	Num	4		PAST 2 WKS: ABDOMINAL BLOATING
196	H50_LF46	Num	4		PAST 2 WKS: TIRED OR FATIGUED
197	H50_LF47	Num	4		PAST 2 WKS: BODILY PAIN
198	H50_LF48	Num	4		PAST 2 WKS: FELT SLEEPING DURING THE DAY
199	H50_LF49	Num	4		PAST 2 WKS: ABDOMINAL PAIN
200	H50_LF50	Num	4		PAST 2 WKS: SHORTNESS OF BREATH
201	H50_LF51	Num	4		PAST 2 WKS: NOT ABLE TO EAT MUCH
202	H50_LF52	Num	4		PAST 2 WKS: DECREASED STRENGTH
203	H50_LF53	Num	4		PAST 2 WKS: TROUBLE LIFTING HEAVY OBJECT
204	H50_LF54	Num	4		PAST 2 WKS: FELT ANXIOUS
205	H50_LF55	Num	4		PAST 2 WKS: DECREASED LEVEL OF ENERGY
206	H50_LF56	Num	4		PAST 2 WKS: FELT UNHAPPY
207	H50_LF57	Num	4		PAST 2 WKS: FELT DROWSY
208	H50_LF58	Num	4		PAST 2 WKS: LIMITATION OF YOUR DIET
209	H50_LF59	Num	4		PAST 2 WKS: BEEN IRRITABLE
210	H50_LF60	Num	4		PAST 2 WKS: DIFFICULTY SLEEPING
211	H50_LF61	Num	4		PAST 2 WKS: ABDOMINAL DISCOMFORT
212	H50_LF62	Num	4		PAST 2 WKS: WORRIED/IMPACT HEPATIC C VIR
213	H50_LF63	Num	4		PAST 2 WKS: MOOD SWINGS
214	H50_LF64	Num	4		PAST 2 WKS: UNABLE TO FALL ASLEEP AY NIG
215	H50_LF65	Num	4		PAST 2 WKS: MUSCLE CRAMPS
216	H50_LF66	Num	4		PAST 2 WKS: WORRIED ABOUT YOUR SYMPTOMS
217	H50_LF67	Num	4		PAST 2 WKS: DRY MOUTH
218	H50_LF68	Num	4		PAST 2 WKS: FELT DEPRESSED
219	H50_LF69	Num	4		PAST 2 WKS: WORRIED VIRUS INFECTION GETT
220	H50_LF70	Num	4		PAST 2 WKS: PROBLEM CONCENTRATING
221	H50_LF71	Num	4		PAST 2 WKS: TROUBLED BY ITCHING
222	H50_LF72	Num	4		PAST 2 WKS: WORRIED ABOUT NEVER FEELING
223	H50_LF73	Num	4		PAST 2 WKS: CONCERNED AVAILABILITY OF LI
224	H50_DT	Num	4	8.	DATE FORM COMPLETED-SAS DATE: Converted to days since reference date
225	H50_DF	Num	4		DATE FORM COMPLETED-IMPUTED FLAG
226	DRNKWK24	Num	4		Last 90 days usual drinks/wk
227	DRNKWK25	Num	4		Last 90 days max drinks/wk
228	DRNKWK27	Num	4		Before HCV usual drinks/wk
229	DRNKWK28	Num	4		Before HCV max drinks/wk
230	DRNKWK29	Num	4		After HCV usual drinks/wk
231	DRNKWK30	Num	4		After HCV max drinks/wk

Num	Variable	Type	Len	Format	Label
232	F50ABDOM	Num	4	6.2	SUMMARY QUALITY OF LIFE: ABDOMINAL
233	F50FATIG	Num	4	6.2	SUMMARY QUALITY OF LIFE: FATIGUE
234	F50SYSTM	Num	4	6.2	SUMMARY QUALITY OF LIFE: SYSTEM
235	F50ACTIV	Num	4	6.2	SUMMARY QUALITY OF LIFE: ACTIVITY
236	F50EMOTN	Num	4	6.2	SUMMARY QUALITY OF LIFE: EMOTION
237	F50WORRY	Num	4	6.2	SUMMARY QUALITY OF LIFE: WORRY
238	H50LF45R	Num	4		RECODED VALUE OF H50_LF45 FOR QOL CALC.
239	H50LF49R	Num	4		RECODED VALUE OF H50_LF49 FOR QOL CALC.
240	H50LF61R	Num	4		RECODED VALUE OF H50_LF61 FOR QOL CALC.
241	H50LF46R	Num	4		RECODED VALUE OF H50_LF46 FOR QOL CALC.
242	H50LF48R	Num	4		RECODED VALUE OF H50_LF48 FOR QOL CALC.
243	H50LF52R	Num	4		RECODED VALUE OF H50_LF52 FOR QOL CALC.
244	H50LF55R	Num	4		RECODED VALUE OF H50_LF55 FOR QOL CALC.
245	H50LF57R	Num	4		RECODED VALUE OF H50_LF57 FOR QOL CALC.
246	H50LF47R	Num	4		RECODED VALUE OF H50_LF47 FOR QOL CALC.
247	H50LF50R	Num	4		RECODED VALUE OF H50_LF50 FOR QOL CALC.
248	H50LF65R	Num	4		RECODED VALUE OF H50_LF65 FOR QOL CALC.
249	H50LF67R	Num	4		RECODED VALUE OF H50_LF67 FOR QOL CALC.
250	H50LF71R	Num	4		RECODED VALUE OF H50_LF71 FOR QOL CALC.
251	H50LF51R	Num	4		RECODED VALUE OF H50_LF51 FOR QOL CALC.
252	H50LF53R	Num	4		RECODED VALUE OF H50_LF53 FOR QOL CALC.
253	H50LF58R	Num	4		RECODED VALUE OF H50_LF58 FOR QOL CALC.
254	H50LF54R	Num	4		RECODED VALUE OF H50_LF54 FOR QOL CALC.
255	H50LF56R	Num	4		RECODED VALUE OF H50_LF56 FOR QOL CALC.
256	H50LF59R	Num	4		RECODED VALUE OF H50_LF59 FOR QOL CALC.
257	H50LF60R	Num	4		RECODED VALUE OF H50_LF60 FOR QOL CALC.
258	H50LF63R	Num	4		RECODED VALUE OF H50_LF63 FOR QOL CALC.
259	H50LF64R	Num	4		RECODED VALUE OF H50_LF64 FOR QOL CALC.
260	H50LF68R	Num	4		RECODED VALUE OF H50_LF68 FOR QOL CALC.
261	H50LF70R	Num	4		RECODED VALUE OF H50_LF70 FOR QOL CALC.
262	H50LF62R	Num	4		RECODED VALUE OF H50_LF62 FOR QOL CALC.
263	H50LF66R	Num	4		RECODED VALUE OF H50_LF66 FOR QOL CALC.
264	H50LF69R	Num	4		RECODED VALUE OF H50_LF69 FOR QOL CALC.
265	H50LF72R	Num	4		RECODED VALUE OF H50_LF72 FOR QOL CALC.
266	H50LF73R	Num	4		RECODED VALUE OF H50_LF73 FOR QOL CALC.
267	ILLEGAL_DRUGS	Num	8		Use of Marijuana, Speed, Heroin, MDMA, Phencyclidine, Anabolic Steroids, Glues/Solvents, or Cocaine
268	SUBJ_ID	Char	8		MHCS SUBJECT IDENTIFIER

Data Set Name: mhcs_ii_f50s.sas7bdat

Num	Variable	Type	Len	Format	Label
1	FORM	Num	4		Form Number
2	H50S_NT	Num	4		NOT TREATED FOR HCV
3	H50S_1	Num	4		TREATED W/STANDARD INTERFERON AND RIBAVI
4	H50S_1B	Num	4		ARE YOU CURRENTLY USING INTERFERON/RIBAV
5	H50S_1C	Num	4		WHY ARE YOU NO LONGER USING INTERFERON/R
6	H50S_2	Num	4		TREATED W/STANDARD INTERFERON W/OUT RIBA
7	H50S_2B	Num	4		CURRENTLY USING INTERFERON W/OUT RIBAVIR
8	H50S_2C	Num	4		NO LONGER USING INTERFERON W/OUT RIBAVIR
9	H50S_3	Num	4		TREATED W/PEGYLATED INTERFERON AND RIBAV
10	H50S_3B	Num	4		CURRENTLY USING PEGYLATED INTERFERON/RIB
11	H50S_3C	Num	4		NO LONGER USING PEGYLATED INTERFERON/RIB
12	H50S_4	Num	4		TREATED W/PEGYLATED INTERFERON W/OUT RIB
13	H50S_4B	Num	4		USING PEGYLATED INTERFERON W/OUT RIBAVIR
14	H50S_4C	Num	4		NOT USING PEGYLATED INTERFERON W/OUT RIB
15	H50S_5N	Num	4		PAST TWO WEEK, COX-2 INHIBITORS-NONE
16	H50S_5V	Num	4		PAST TWO WEEKS, COX-2 INHIBITORS-VIOXX
17	H50S_5C	Num	4		PAST TWO WEEK, COX-2 INHIBITORS-CELEBREX
18	H50S_5O1	Num	4		Q5. PAST 2 WKS,COX-2 INHIB-OTHER SPEC 1
19	H50S_5O2	Num	4		Q5. PAST 2 WKS,COX-2 INHIB-OTHER SPEC 2
20	H50S_5O3	Num	4		Q5. PAST 2 WKS,COX-2 INHIB-OTHER SPEC 3
21	H50S_5O4	Num	4		Q5. PAST 2 WKS,COX-2 INHIB-OTHER SPEC 4
22	H50S_5O5	Num	4		Q5. PAST 2 WKS,COX-2 INHIB-OTHER SPEC 5
23	H50S_5O6	Num	4		Q5. PAST 2 WKS,COX-2 INHIB-OTHER SPEC 6
24	H50S_5O7	Num	4		Q5. PAST 2 WKS,COX-2 INHIB-OTHER SPEC 7
25	H50S_5O8	Num	4		Q5. PAST 2 WKS,COX-2 INHIB-OTHER SPEC 8
26	H50S_5O9	Num	4		Q5. PAST 2 WKS,COX-2 INHIB-OTHER SPEC 9
27	H50S5O10	Num	4		Q5. PAST 2 WKS,COX-2 INHIB-OTHER SPEC 10
28	H50S_5A	Num	4		HOW MANY MONTHS HAD YOU BEEN USING COX-2
29	H50S_6	Num	4		PAST TWO WEEKS, TAKE ANY OTHER NSAIDS
30	H50S_6A	Num	4		HOW MANY MONTHS USING ANY OTHER NSAID
31	H50S_7N	Num	4		NO GI GLEED, PERFORATION, OBSTRUCTION
32	H50S_7GB	Num	4		YES, GI BLEED
33	H50S_7GP	Num	4		YES, GASTROINTESTINAL PERFORATION
34	H50S_7GO	Num	4		YES, GASTROINTESTINAL OBSTRUCTION
35	H50S1_DT	Num	4	8.	DATE FIRST USED ST.INT/RIBA: SAS DATE: Converted to days since reference date
36	H50S1_DF	Num	4		DATE FIRST USED ST. INT/RIBA:IMPUTE FLAG

Num	Variable	Type	Len	Format	Label
37	H50S2_DT	Num	4	8.	FIRST USE ST.INT. W/O RIBA:SAS DATE: Converted to days since reference date
38	H50S2_DF	Num	4		FIRST USE ST.INT. W/O RIBA:IMPUTE FLAG
39	H50S3_DT	Num	4	8.	DATE FIRST USE PEG.INT./RIBA: SAS DATE: Converted to days since reference date
40	H50S3_DF	Num	4		DATE FIRST USE PEG.INT/RIBA: IMPUTE FLAG
41	H50S4_DT	Num	4	8.	DATE 1ST USE PEG.INT.W/O RIBA: SAS DATE: Converted to days since reference date
42	H50S4_DF	Num	4		1ST USE PEG.INT. W/O RIBA: IMPUTE FLAG
43	ENTRY_DT	Num	8	8.	ENTRY_DT: Converted to days since reference date
44	H50S_1A_MONTHS	Num	8		FIRST USED STANDARD INTERFERON/RIBAVIRIN - Converted to months since reference point
45	H50S_2A_MONTHS	Num	8		1ST USED STANDARD INTERFERON W/OUT RIBAV - Converted to months since reference point
46	H50S_3A_MONTHS	Num	8		FIRST USED PEGYLATED INTERFERON/RIBAVIRI - Converted to months since reference point
47	H50S_4A_MONTHS	Num	8		1ST USED PEGYLATED INTERFERON W/OUT RIBA - Converted to months since reference point
48	SUBJ_ID	Char	8		MHCS SUBJECT IDENTIFIER

Data Set Name: mhcs_ii_f51.sas7bdat

Num	Variable	Type	Len	Format	Informat	Label
1	VISITNUM	Num	4	1.		VISIT NUMBER
2	ASCCODE	Num	4			Q16. ASCITES UNTREATED REASON SPEC. CODE
3	NOCOND	Num	4	4.	4.	Q.21 NO CONDITIONS PRESENT CURRENTLY
4	NEUROCD	Num	4			OTHER NEUROLOGICAL ABNORMALITIES CODE
5	feet	Num	4	2.	19.	Q1. FEET (HEIGHT)
6	inches	Num	4	3.	19.	Q1. INCHES (HEIGHT)
7	cms	Num	4	6.	19.	Q1. CENTIMETERS (HEIGHT)
8	pounds	Num	4	5.1	19.	Q2. WEIGHT IN POUNDS
9	kgs	Num	4	5.1	19.	Q2. WEIGHT IN KILOGRAMS
10	fahrenheit	Num	4	5.1		Q3. TEMPERATURE IN FAHRENHEIT
11	celsius	Num	4	5.1		Q3. TEMPERATURE IN CELSIUS
12	systolic	Num	4	6.	19.	Q4. BLOOD PRESSURE - SYSTOLIC
13	diastolic	Num	4	6.	19.	Q4. BLOOD PRESSURE - DIASTOLIC
14	blood	Num	4	1.	4.	Q5. URINALYSIS - BLOOD LEVEL
15	protein	Num	4	1.	4.	Q6. URINALYSIS - PROTEIN LEVEL
16	nitrite	Num	4	1.	4.	Q7. URINALYSIS - NITRITE LEVEL
17	a_acid	Num	4	1.	4.	Q8. URINALYSIS - ASCORBIC ACID LEVEL
18	glucose	Num	4	1.	4.	Q9. URINALYSIS - GLUCOSE LEVEL
19	ph	Num	4	1.	4.	Q10. URINALYSIS - pH LEVEL
20	hem_arth	Num	4	1.	4.	Q12. HEMOPHILIC ARTHROPATHY
21	kar_perf	Num	4	1.	4.	Q13. KARNOFSKY PERFORMANCE
22	affected	Num	4	1.	4.	Q14. KAR PERF AFFECTED BY HEM ARTH
23	fatigue	Num	4	1.	4.	Q15. FATIGUE LEVEL
24	ascites	Num	4	1.	4.	Q16. ASCITES
25	hepatome	Num	4	1.	4.	Q17. HEPATOMEGALY
26	splenome	Num	4	1.	4.	Q18. SPLENOMEGALY
27	splnsize	Num	4	19.	19.	Q18. SPLEEN'S SIZE (IN CM.)
28	h_zoster	Num	4	1.	4.	Q19. HERPES ZOSTER (SHINGLES)
29	lym_none	Num	4	2.	4.	Q20. LYMPHADENOPATHY - NONE
30	lym_cerv	Num	4	1.	4.	Q20. LYMPHADENOPATHY - CERVICAL
31	cervsite	Num	4	2.	19.	Q20. CERVICAL LYMPH - # SITES
32	cervshot	Num	4	1.	4.	Q20. CERVICAL LYMPH - SHOTTY
33	lym_othe	Num	4	1.	4.	Q20. LYMPHADENOPATHY - OTHER
34	lgstnode	Num	4	2.	19.	Q20a.DIAMETER OF LARGEST LYMPH NODE
35	p_neurop	Num	4	1.	4.	Q21. PERIPHERAL NEUROPATHY
36	spider	Num	4	1.	4.	Q21. SPIDER ANGIOMATA

Num	Variable	Type	Len	Format	Informat	Label
37	neuro_ab	Num	4	1.	4.	Q21. OTHER NEUROLOGICAL ABNORMAL
38	palmare	Num	4	1.	4.	Q21. PALMAR ERYTHEMA
39	wgt_loss	Num	4	1.	4.	Q21. UNEXPLAINED WEIGHT LOSS
40	edema	Num	4	1.	4.	Q21. LOWER EXTREMITY EDEMA
41	memory	Num	4	1.	4.	Q21. MEMORY OR CONCENTRATION PROBLEMS
42	depressn	Num	4	1.	4.	Q21. CHRONIC DEPRESSION
43	gynecomia	Num	4	1.	4.	Q21. GYNECOMASTIA
44	arthralg	Num	4	1.	4.	Q21. ARTHRALGIAS/ARTHRITIS
45	nausea	Num	4	1.	4.	Q21. NAUSEA
46	tenderns	Num	4	1.	4.	Q21. RIGHT UP QUAD ABD/LIVER TENDERNESS
47	i_sclera	Num	4	1.	4.	Q21. ICTERIC SCLERA
48	jaundice	Num	4	1.	4.	Q21. JAUNDICE
49	atrophy	Num	4	1.	4.	Q21. TEMPORAL MUSCLE ATROPHY
50	VISIT_DT	Num	4	8.		VISIT DATE (SAS DATE): Converted to days since reference date
51	SUBJ_ID	Char	8			MHCS SUBJECT IDENTIFIER

Data Set Name: mhcs_ii_f52.sas7bdat

Num	Variable	Type	Len	Format	Informat	Label
1	FQ1AE	Num	4	4.	4.	Q25. Cancer #1-Where cancer diagnosed
2	FQ1BE	Num	4	4.	4.	Q25. Cancer #2-Where cancer diagnosed
3	GENDEFCD	Num	4			Q10.OTHER HEM. GENETIC DEFECT-NUMERIC CD
4	AQ5	Num	4	2.	4.	Q5. SEX
5	AQ8	Num	4	2.	6.	Q8. HEMOPHILIA TYPE
6	AQ9	Num	4	2.	4.	Q9. SEVERITY OF HEMOPHILIA
7	AQ10	Num	4	2.	6.	Q10.HEMOPHILIA GENETIC DEFECT
8	AQ11	Num	4	2.	6.	Q11.INHIBITOR EVER DETECTED
9	AQ11a	Num	4	7.1	20.1	Q11A.HIGHEST INHIBITOR TITER
10	AQ12	Num	4	2.	6.	Q12.SUBJECT HAS HEMOPHILIC SIBLING
11	BQ1a	Num	4	2.	6.	Q13A. FACTOR VIII
12	BQ1b	Num	4	2.	6.	Q13B. FACTOR IX
13	BQ1c	Num	4	2.	6.	Q13C. FRESH FROZEN PLASMA
14	BQ1d	Num	4	2.	6.	Q13D. CRYOPRECIPITATE
15	BQ1e	Num	4	2.	6.	Q13E. BLOOD/RBC TRANSFUSSION
16	BQ1f	Num	4	2.	6.	Q13F. PLATELETS
17	BQ1g	Num	4	2.	6.	Q13G. UNSPECIFIED TYPE OF BLOOD PROD.
18	CQ1	Num	4	2.	6.	Q14. EVER TESTED POSITIVE FOR HCV
19	CQ2	Num	4	2.	6.	Q15. EVER HAD ANY POSITIVE HBV MARKER
20	CQ3	Num	4	2.	6.	Q16. EVER BEEN VACCINATED AGAINST HEP. B
21	CQ4	Num	4	2.	6.	Q17. HBV CHRONIC CARRIER STATUS
22	DQ1	Num	4	2.	6.	Q18. EVER TESTED POSITIVE FOR HIV
23	DQ2a	Num	4	5.	19.	Q19. CD4 %
24	DQ2b	Num	4	5.	19.	Q19. CD4 CELLS 10**9/L
25	DQ2c	Num	4	5.	19.	Q19. CD8 %
26	DQ2d	Num	4	5.	19.	Q19. CD8 CELLS 10**9/L
27	DQ3	Num	4	2.	6.	Q20. EVER DIAGNOSED WITH AIDS
28	D2Q3a	Num	4	2.	4.	Q20A. AIDS-DEFINING DISEASE UNKNOWN
29	D2Q3a1	Num	4	2.	4.	Q20A. CD4<200 CELLS/ 5L OR 14%
30	D2Q3a2	Num	4	2.	4.	Q20A. CMV (NOT LIVER, SPLEEN, LYMPH)
31	D2Q3a3	Num	4	2.	4.	Q20A. CANDIDIASIS ESOPHAGUS OR LUNGS
32	D2Q3a4	Num	4	2.	4.	Q20A. CERVICAL CANCER, INVASIVE
33	D2Q3a5	Num	4	2.	4.	Q20A. COCCIDIOIDMYCOSIS, EXTRAPULMONARY
34	D2Q3a6	Num	4	2.	4.	Q20A. CRYPTOCOCCOSIS, EXTRAPULMONARY
35	D2Q3a7	Num	4	2.	4.	Q20A. CRYPTOSPORIDIOSIS W/DIARRHEA >1 MO
36	D2Q3a8	Num	4	2.	4.	Q20A. HERPES SIMPLEX, ULCER >1 MO.

Num	Variable	Type	Len	Format	Informat	Label
37	D2Q3a9	Num	4	4.	4.	Q20A. HERPES SIMPLEX IN LUNGS/ESOPHAGUS
38	D2Q3a10	Num	4	2.	4.	Q20A. HISTOPLASMOSIS, EXTRAPULMONARY
39	D2Q3a11	Num	4	2.	4.	Q20A. HIV ENCEPHALOPATHY/DEMENTIA
40	D2Q3a12	Num	4	2.	4.	Q20A. ISOSPORIASIS W/DIARRHEA >1 MO.
41	D2Q3a13	Num	4	2.	4.	Q20A. KAPOSIS'S SARCOMA
42	D2Q3a14	Num	4	2.	4.	Q20A. LIP OR PULMONARY LYMPHOID HYPERPLA
43	D2Q3a15	Num	4	2.	4.	Q20A. LYMPHOMA OF THE BRAIN
44	D2Q3a16	Num	4	2.	4.	Q20A. MYCOBACTERIUM AVIUM
45	D2Q3a17	Num	4	2.	4.	Q20A. NON-HODGKIN'S LYMPHOMA
46	D2Q3a18	Num	4	2.	4.	Q20A. PCP
47	D2Q3a19	Num	4	2.	4.	Q20A. RECUR. BACT PNEUMONIA>ONCE IN 12MO
48	D2Q3a20	Num	4	2.	4.	Q20A. PML
49	D2Q3a21	Num	4	2.	4.	Q20A. PULMONARY TUBERCULOSIS
50	D2Q3a22	Num	4	2.	4.	Q20A. SALMONELLA SEPTICEMIA, RECURRENT
51	D2Q3a23	Num	4	2.	4.	Q20A. TOXOPLASMOSIS OF THE BRAIN
52	D2Q3a24	Num	4	2.	4.	Q20A. WASTING SYNDROME
53	D2Q3a25	Num	4	2.	4.	Q20A. OTHER MULT./REC. BACT. INF(>=2/2YR
54	EQ1a	Num	4	2.	4.	Q21. NONE OF CONDITIONS EQ1B-F DIAGNOSED
55	EQ1b	Num	4	2.	4.	Q21. JAUNDICE, PERSISTEN >1 MO.
56	EQ1c	Num	4	2.	4.	Q21. ASCITES (HEPATIC-RELATED)
57	EQ1e	Num	4	2.	4.	Q21. ESOPHAGEAL VARICES
58	EQ1f	Num	4	2.	4.	Q21. BLEEDING ESOPHAGEAL VARICES
59	EQ2a	Num	4	2.	4.	Q22. NONE OF CONDITIONS EQ2A-G DIAGNOSED
60	EQ2g	Num	4	2.	4.	Q22. OTHER LIVER DISEASE-RELATED CONDITI
61	EQ3	Num	4	2.	6.	Q23. LIVER BIOPSY IN THE LAST 5 YEARS
62	EQ4	Num	4	2.	6.	Q24. SUBJECT ELIGIBLE FOR LIVER TRANSPLA
63	FQ1	Num	4	6.	6.	Q25. EVER DIAGNOSED WITH ANY TYPE OF CAN
64	FQ1ac	Num	4	4.	4.	Q25. CNCR #1 -PRIMARY SITE(=1)/METAS(=2)
65	FQ1bc	Num	4	4.	4.	Q25. CNCR #2 -PRIMARY SITE(=1)/METAS(=2)
66	AQ1_DT	Num	4	8.		Q1. BIRTH DATE (SAS DATE): Converted to days since reference date
67	AQ2_DT	Num	4	8.		Q2.DATE FORM COMPLETED (SAS DATE): Converted to days since reference date
68	AQ3_DT	Num	4	8.		Q3. DATE OF ENROLLMENT VISIT (SAS DATE): Converted to days since reference date
69	BQ1A_YR	Num	4			Q13A. YR 1ST USE FACTOR VIII
70	BQ1B_YR	Num	4			Q13B. YR 1ST USE FACTOR IX
71	BQ1C_YR	Num	4			Q13C. YR 1ST USE FRESH FROZEN PLASMA
72	BQ1D_YR	Num	4			Q13D. YR 1ST USE CRYOPRECIPITATE
73	BQ1E_YR	Num	4			Q13E. YR 1ST USE BLOOD/RBC TRANSF.

Num	Variable	Type	Len	Format	Informat	Label
74	BQ1F_YR	Num	4			Q13F. YR 1ST USE PLATELETS
75	BQ1G_YR	Num	4			Q13G. YR 1ST USE UNSPFD. BLOOD PROD.
76	CQ1_YR	Num	4			Q14. YEAR OF 1ST POSITIVE HCV TEST
77	CQ3_YR	Num	4			Q16. YEAR OF 1ST HBV VACCINATION
78	D2Q3AY	Num	4			Q20A. AIDS-DEFINING DISEASE UNK.- YR DX
79	D2Q3A1Y	Num	4			Q20A. CD4<200 CELLS/ 5L OR 14% - YR DX
80	D2Q3A2Y	Num	4			Q20A. CMV - YR DX
81	D2Q3A3Y	Num	4			Q20A. CANDIDIASIS ESOPH. OR LUNGS-YR DX
82	D2Q3A4Y	Num	4			Q20A. CERVICAL CANCER, INVASIVE - YR DX
83	D2Q3A5Y	Num	4			Q20A. COCCIDIOIDMYCOSIS, EXTRAPUL-YR DX
84	D2Q3A6Y	Num	4			Q20A. CRYPTOCOCCOSIS, EXTRAPUL- YR DX
85	D2Q3A7Y	Num	4			Q20A. CRYPTOSPORIDIOSIS W/DIARRHEA-YR DX
86	D2Q3A8Y	Num	4			Q20A. HERPES SIMPLEX, ULCER >1 MO.-YR DX
87	D2Q3A9Y	Num	4			Q20A. HERPES SIMPLEX LUNGS/ESOPH-YR DX
88	D2Q3A10Y	Num	4			Q20A. HISTOPLASMOSIS, EXTRAPUL - YR DX
89	D2Q3A11Y	Num	4			Q20A. HIV ENCEPHALOP/DEMENTIA - YR DX
90	D2Q3A12Y	Num	4			Q20A. ISOSPORIASIS W/DIARRHEA>1MO.-YR DX
91	D2Q3A13Y	Num	4			Q20A. KAPOS'S SARCOMA - YR DX
92	D2Q3A14Y	Num	4			Q20A. LIP OR PULM. LYMPHOID HYPER- YR DX
93	D2Q3A15Y	Num	4			Q20A. LYMPHOMA OF THE BRAIN - YR DX
94	D2Q3A16Y	Num	4			Q20A. MYCOBACTERIUM AVIUM - YR DX
95	D2Q3A17Y	Num	4			Q20A. NON-HODGKIN'S LYMPHOMA - YR DX
96	D2Q3A18Y	Num	4			Q20A. PCP - YR DX
97	D2Q3A19Y	Num	4			Q20A. RECURRENT BACT PNEUMONIA - YR DX
98	D2Q3A20Y	Num	4			Q20A. PML - YR DX
99	D2Q3A21Y	Num	4			Q20A. PULMONARY TUBERCULOSIS - YR DX
100	D2Q3A22Y	Num	4			Q20A. SALMONELLA SEPTICEMIA,RECUR-YR DX
101	D2Q3A23Y	Num	4			Q20A. TOXOPLASMOSIS OF THE BRAIN -YR DX
102	D2Q3A24Y	Num	4			Q20A. WASTING SYNDROME - YR DX
103	D2Q3A25Y	Num	4			Q20A. OTHER MULT./REC.BACT. INFECT-YR DX
104	EQ1B2_YR	Num	4			Q21. JAUNDICE, PERSISTEN >1 MO. - YR DX
105	EQ1C2_YR	Num	4			Q21. ASCITES (HEPATIC-RELATED) - YR DX
106	EQ1E2_YR	Num	4			Q21. ESOPHAGEAL VARICES - YR DX
107	EQ1F2_YR	Num	4			Q21. BLEEDING ESOPHAGEAL VARICES - YR DX
108	EQ2G2_YR	Num	4			Q22. OTHER LD RELATED CONDITION - YR DX
109	FQ1AAN	Num	4			Q25. CANCER #1 -PRIMARY SITE NUMERIC CD
110	FQ1BAN	Num	4			Q25. CANCER #2 -PRIMARY SITE NUMERIC CD
111	FQ1AB2N	Num	4			Q25. CANCER #1-HISTOLOGIC SUBTYPE NUM CD
112	FQ1BB2N	Num	4			Q25. CANCER #2-HISTOLOGIC SUBTYPE NUM CD

Num	Variable	Type	Len	Format	Informat	Label
113	FQ1ABN	Num	4			Q25. CANCER #1 -TYPE NUMERIC CODE
114	FQ1BBN	Num	4			Q25. CANCER #2 -TYPE NUMERIC CODE
115	HCVna	Num	4	4.	4.	TEST NOT DONE
116	HCVviral	Num	4	4.	4.	VIRAL LOAD TOO LOW FOR GENOTYPE TEST
117	HCVGEN1	Char	3	\$3.	\$3.	HCV GENOTYPE 1
118	HCVGEN2	Char	3	\$3.	\$3.	HCV GENOTYPE 2
119	HCVGEN3	Char	3	\$3.	\$3.	HCV GENOTYPE 3
120	HCVGEN4	Char	3	\$3.	\$3.	HCV GENOTYPE 4
121	HCVGEN5	Char	3	\$3.	\$3.	HCV GENOTYPE 5
122	HCVGEN6	Char	3	\$3.	\$3.	HCV GENOTYPE 6
123	HCVGEN7	Char	3	\$3.	\$3.	HCV GENOTYPE 7
124	HCVGEN8	Char	3	\$3.	\$3.	HCV GENOTYPE 8
125	HCVGEN9	Char	3	\$3.	\$3.	HCV GENOTYPE 9
126	HCVGEN10	Char	3	\$3.	\$3.	HCV GENOTYPE 10
127	HCV_yr	Num	4	11.	11.	YEAR OF MOST RECENT TEST
128	HCVGENO	Char	50			ALL GENOTYPES IN COMMA DELIMITED FORMAT
129	FQ1A_MONTHS	Num	8			Q25. CANCER #1- DATE OF DIAGNOSIS - Converted to months since entry
130	FQ1B_MONTHS	Num	8			Q25. CANCER #2- DATE OF DIAGNOSIS - Converted to months since entry
131	RACE	Num	8			Q6. Collapsed Race variable: 1=White/European, 2=Black/African, 3=Other
132	SUBJ_ID	Char	8			MHCS SUBJECT IDENTIFIER

Data Set Name: mhcs_ii_f53.sas7bdat

Num	Variable	Type	Len	Format	Label
1	OUTL_V	Num	4		FLAG TO INDICATE AN OUTLIER VALUE
2	PTT_DF	Num	4		PTT DATE: IMPUTE FLAG
3	H53_PTPP	Num	4		PTT PATIENT VALUE
4	H53_PTTC	Num	4		PTT CONTROL VALUE
5	PTT_DT	Num	4	8.	DATE OF PTT TEST (SAS DATE): Converted to days since reference date
6	H53_24A	Num	4		WHAT TYPE OF TEST WAS IT
7	FORM	Num	4		Form Number
8	H53_1	Num	4		CBC-WBC
9	H53_2	Num	4		CBC-HEMOGLOBIN
10	H53_3	Num	4		CBC-HEMATOCRIT
11	H53_4	Num	4		CBC-LYMPHOCYTES
12	H53_5	Num	4		CBC-NEUTROPHILS
13	H53_6	Num	4		CBC-PLATELET COUNT
14	H53_7U	Num	4		ALT (SGPT) U/L
15	H53_7K	Num	4		ALT (SGPT) UKAT/L
16	H53_8U	Num	4		AST (SGOT) U/L
17	H53_8K	Num	4		AST (SGOT) UKAT/L
18	H53_9U	Num	4		ALKALINE PHOSPHATASE U/L
19	H53_9K	Num	4		ALKALINE PHOSPHATASE UKAT/L
20	H53_10MG	Num	4		TOTAL BILIRUBIN MG/DL
21	H53_10MO	Num	4		TOTAL BILIRUBIN UMOL/L
22	H53_11MG	Num	4		DIRECT BILIRUBIN MG/DL
23	H53_11MO	Num	4		DIRECT BILIRUBIN UMOL/L
24	H53_12MG	Num	4		INDIRECT BILIRUBIN MG/DL
25	H53_12MO	Num	4		INDIRECT BILIRUBIN UMOL/L
26	H53_13MG	Num	4		SERUM CREATININE MG/DL
27	H53_13MO	Num	4		SERUM CREATININE UMOL/L
28	H53_14MG	Num	4		CHOLESTEROL MG/DL
29	H53_14MO	Num	4		CHOLESTEROL MMOL/L
30	H53_15MG	Num	4		BUN MG/DL
31	H53_15MO	Num	4		BUN MMOL/L
32	H53_16	Num	4		ALBUMIN G/DL
33	H53_17	Num	4		GLOBULIN G/DL
34	H53_18PV	Num	4		PROTHROMBIN TIME-PATENT VALUE=SECONDS
35	H53_18CV	Num	4		PROTHROMBIN TIME-PATENT CONTROL=SECONDS
36	H53_19	Num	4		INR-RATIO VALUE

Num	Variable	Type	Len	Format	Label
37	H53_20DL	Num	4		SERUM IRON UG/DL
38	H53_20MO	Num	4		SERUM IRON UMOL/L
39	H53_21DL	Num	4		TOTAL IRON-BINDING CAPACITY UG/DL
40	H53_21MO	Num	4		TOTAL IRON-BINDING CAPACITY UMOL/L
41	H53_22NG	Num	4		SERUM FERRITIN NG/ML
42	H53_22GL	Num	4		SERUM FERRITIN UG/L
43	H53_23	Num	4		WAS AN INHIBITOR LEVEL DETECTED ON THIS
44	H53_23A	Num	4		INHIBITOR TITER-BETHESDA UNITS
45	H53_24	Num	4		HAS PATIENT HAD A RUQ ULTRASOUND
46	H53_25A	Num	4		LIVER SIZE
47	H53_25B	Num	4		LIVER ECHOGENECITY
48	H53_25C	Num	4		LIVER MASS
49	H53_25CD	Num	4		LIVER MASS-SPECIFY DIAMETER
50	H53_25CC	Num	4		LIVER MASS-CODE ASSIGNED TO OTHER SPECIF
51	H53_25D	Num	4		SPLEEN SIZE
52	H53_25E	Num	4		SPLEEN ABNORMALITY
53	H53_25EC	Num	4		SPLEEN ABNORMALITY-CODE ASSIGNED TO SPEC
54	H53_25F	Num	4		ASCITES
55	H53_25G	Num	4		PORTAL VEIN THROMBOSIS
56	CBC_DT	Num	4	8.	DATE OF MOST RECENT CBC: SAS DATE: Converted to days since reference date
57	CBC_DF	Num	4		DATE OF MOST RECENT CBC: IMPUTE FLAG
58	SC_DT	Num	4	8.	DATE MOST RECENT SERUM CHEM: SAS DATE: Converted to days since reference date
59	SC_DF	Num	4		DATE MOST RECENT SERUM CHEM: IMPUTE FLAG
60	IRL_DT	Num	4	8.	DATE MOST RECENT IRON LEVEL: SAS DATE: Converted to days since reference date
61	IRL_DF	Num	4		DATE MOST RECENT IRON LEVEL: IMPUTE FLAG
62	IL_DT	Num	4	8.	INHIBITOR LEVEL DATE: SAS DATE: Converted to days since reference date
63	IL_DF	Num	4		INHIBITOR LEVEL DATE: IMPUTE FLAG
64	US_DT	Num	4	8.	DATE MOST RECENT ULTRASOUND: SAS DATE: Converted to days since reference date
65	US_DF	Num	4		DATE MOST RECENT ULTRASOUND: IMPUTE FLAG
66	SUBJ_ID	Char	8		MHCS SUBJECT IDENTIFIER

Data Set Name: mhcs_ii_f57.sas7bdat

Num	Variable	Type	Len	Format	Label
1	FORM	Num	4		Form Number
2	H57_1	Num	4		CONDITION OF BIOPSY
3	H57_7	Num	4		STEATOSIS
4	H57_8	Num	4		IRON
5	H57_9	Num	4		PORTAL AREAS
6	H57_10	Num	4		MALLORY BODIES
7	H57_11	Num	4		ZONE 3 BALLOONING DEGENERATION
8	H57_2A	Num	4		# OF SLIDES REVIEWED
9	H57_2SP	Num	4		STAINS REVIEWED: OTHER SPECIFY
10	H57_2_1	Num	4		STAINS REVIEWED: H and E
11	H57_2_2	Num	4		STAINS REVIEWED: IRON
12	H57_2_3	Num	4		STAINS REVIEWED: MASSON TRICHROME
13	H57_2_4	Num	4		STAINS REVIEWED: PAS
14	H57_2_5	Num	4		STAINS REVIEWED: PAS-D
15	H57_2_6	Num	4		STAINS REVIEWED: RETICULIN
16	H57_2_7	Num	4		STAINS REVIEWED: UNSTAINED
17	H57_2_8	Num	4		STAINS REVIEWED: STAINED
18	H57_3_1	Num	4		INFLAMMATION SCORING(KNODELL)-PERIPORTAL
19	H57_3_2	Num	4		INFLAMMATION SCORING(KNODELL)-LOBULAR SC
20	H57_3_3	Num	4		INFLAMMATION SCORING(KNODELL)-PORTAL SCO
21	H57_6_1	Num	4		FIBROSIS SCORING-KNODELL SCORE
22	H57_6_2	Num	4		FIBROSIS SCORING-MODIFIED ISHAK SCORE
23	H57_6_4	Num	4		FIBROSIS SCORING-PERICENTRAL/ZONE 3 SINU
24	H57_DF	Num	8		DATE FORM COMPLETED IMPUTE FLAG
25	H57_DT	Num	4	8.	DATE FORM COMPLETED (SAS DATE): Converted to days since reference date
26	H57_SID	Char	7		SAMPLE ID
27	H57_4_1	Num	4		INFLAMMATION SCORE(MOD.ISHAK-PERIPORTAL
28	H57_4_2	Num	4		INFLAMMATION SCORE(MOD ISHAK)-CONFLUENT
29	H57_4_3	Num	4		INFLAMMATION SCORE(MOD.ISHAK)-LOBULAR IN
30	H57_4_4	Num	4		INFLAMMATION SCORE(MOD.ISHAK)-PORTAL INF
31	H57_5	Num	4		METAVIR ACTIVITY
32	H57_6_3	Num	4		FIRBOSIS SCORING-METAVIR FIBROSIS
33	SUBJ_ID	Char	8		MHCS SUBJECT IDENTIFIER

Data Set Name: mhcs_ii_f60.sas7bdat

Num	Variable	Type	Len	Format	Label
1	PRODHX_V	Num	4		FLAG TO INDICATE PRODUCT HIST. VERIFIED
2	FORM	Num	4		Form Number
3	H60VISIT	Num	4		VISIT NUMBER
4	H60A1	Num	4		NOT HIV POSITIVE/NOT USING MEDS
5	H60A1_1	Num	4		CURRENTLY TAKING ABACAVIR
6	H60A11L	Num	4		LENGTH OF TIME-NUMERIC-ABACAVIR
7	H60A11U	Num	4		LENGTH OF TIME-UNIT OF TIME-ABACAVIR
8	H60A1_2	Num	4		CURRENTLY TAKING AMPRENAVIR
9	H60A12L	Num	4		LENGTH OF TIME-NUMERIC-AMPRENAVIR
10	H60A12U	Num	4		LENGTH OF TIME-UNIT OF TIME-AMPRENAVIR
11	H60A1_3	Num	4		CURRENTLY TAKING COMBIVIR
12	H60A13L	Num	4		LENGTH OF TIME-NUMERIC-COMBIVIR
13	H60A13U	Num	4		LENGTH OF TIME-UNIT OF TIME-COMBIVIR
14	H60A1_4	Num	4		CURRENTLY TAKING DELAVIRDINE
15	H60A14L	Num	4		LENGTH OF TIME-NUMERIC-DELAVIRDINE
16	H60A14U	Num	4		LENGTH OF TIME-UNIT OF TIME-DELAVIRDINE
17	H60A1_5	Num	4		CURRENTLY TAKING DIDANOSINE
18	H60A15L	Num	4		LENGTH OF TIME-NUMERIC-DIDANOSINE
19	H60A15U	Num	4		LENGTH OF TIME-UNIT OF TIME-DIDANOSINE
20	H60A1_6	Num	4		CURRENTLY TAKING EFAVIRENZ
21	H60A16L	Num	4		LENGTH OF TIME-NUMERIC- EFAVIRENZ
22	H60A16U	Num	4		LENGTH OF TIME-UNIT OF TIME-EFAVIRENZ
23	H60A1_7	Num	4		CURRENTLY TAKING HYDROXYUREA
24	H60A17L	Num	4		LENGTH OF TIME-NUMERIC-HYDROXYUREA
25	H60A17U	Num	4		LENGTH OF TIME-UNIT OF TIME-HYDROXYUREA
26	H60A1_8	Num	4		CURRENTLY TAKING INDINAVIR
27	H60A18L	Num	4		LENGTH OF TIME-NUMERIC-INDINAVIR
28	H60A18U	Num	4		LENGTH OF TIME-UNIT OF TIME-INDINAVIR
29	H60A1_9	Num	4		CURRENTLY TAKING LOPINAVIR/RITONAVIR
30	H60A19L	Num	4		LENGTH OF TIME-NUMERIC-LOPINAVIR/RITONAV
31	H60A19U	Num	4		LENGTH OF TIME-UNIT OF TIME-LOPINAVIR/RI
32	H60A1_10	Num	4		CURRENTLY TAKING LAMIVUDINE
33	H60A110L	Num	4		LENGTH OF TIME-NUMERIC-LAMIVUDINE
34	H60A110U	Num	4		LENGTH OF TIME-UNIT OF TIME-LAMIVUDINE
35	H60A1_11	Num	4		CURRENTLY TAKING NELFINAVIR
36	H60A111L	Num	4		LENGTH OF TIME-NUMERIC-NELFINAVIR

Num	Variable	Type	Len	Format	Label
37	H60A111U	Num	4		LENGTH OF TIME-UNIT OF TIME-NELFINAVIR
38	H60A1_12	Num	4		CURRENTLY TAKING NEVIRAPINE
39	H60A112L	Num	4		LENGTH OF TIME-NUMERIC-NEVIRAPINE
40	H60A112U	Num	4		LENGTH OF TIME-UNIT OF TIME-NEVIRAPINE
41	H60A1_13	Num	4		CURRENTLY TAKING RITONAVIR
42	H60A113L	Num	4		LENGTH OF TIME-NUMERIC-RITONAVIR
43	H60A113U	Num	4		LENGTH OF TIME-UNIT OF TIME-RITONAVIR
44	H60A1_14	Num	4		CURRENTLY TAKING SAQUINAVIR
45	H60A114L	Num	4		LENGTH OF TIME-NUMERIC-SAQUINAVIR
46	H60A114U	Num	4		LENGTH OF TIME-UNIT OF TIME-SAQUINAVIR
47	H60A1_15	Num	4		CURRENTLY TAKING STAVUDINE
48	H60A115L	Num	4		LENGTH OF TIME-NUMERIC-STAVUDINE
49	H60A115U	Num	4		LENGTH OF TIME-UNIT OF TIME-STAVUDINE
50	H60A1_16	Num	4		CURRENTLY TAKING TENOFOVIR
51	H60A116L	Num	4		LENGTH OF TIME-NUMERIC-TENOFOVIR
52	H60A116U	Num	4		LENGTH OF TIME-UNIT OF TIME-TENOFOVIR
53	H60A1_17	Num	4		CURRENTLY TAKING TRIZAVIR
54	H60A117L	Num	4		LENGTH OF TIME-NUMERIC-TRIZAVIR
55	H60A117U	Num	4		LENGTH OF TIME-UNIT OF TIME-TRIZAVIR
56	H60A1_18	Num	4		CURRENTLY TAKING ZALCITABINE
57	H60A118L	Num	4		LENGTH OF TIME-NUMERIC-ZALCITABINE
58	H60A118U	Num	4		LENGTH OF TIME-UNIT OF TIME-ZALCITABINE
59	H60A1_19	Num	4		CURRENTLY TAKING ZIDOVUDINE
60	H60A119L	Num	4		LENGTH OF TIME-NUMERIC-ZIDOVUDINE
61	H60A119U	Num	4		LENGTH OF TIME-UNIT OF TIME-ZIDOVUDINE
62	H60A1_20	Num	4		CURRENTLY TAKING ACYCLOVIR
63	H60A120L	Num	4		LENGTH OF TIME-NUMERIC-ACYCLOVIR
64	H60A120U	Num	4		LENGTH OF TIME-UNIT OF TIME-ACYCLOVIR
65	H60A1_21	Num	4		CURRENTLY TAKING AEROSOLIZED PENTAMIDINE
66	H60A121L	Num	4		LENGTH OF TIME-NUMERIC-AEROSOLIZED PENTA
67	H60A121U	Num	4		LENGTH-UNIT OF TIME-AEROSOLIZED PENTAMID
68	H60A1_22	Num	4		CURRENTLY TAKING ATOVAQUONE
69	H60A122L	Num	4		LENGTH OF TIME-NUMERIC-ATOVAQUONE
70	H60A122U	Num	4		LENGTH OF TIME-UNIT OF TIME-ATOVAQUONE
71	H60A1_23	Num	4		CURRENTLY TAKING AZITHROMYCINE
72	H60A123L	Num	4		LENGTH OF TIME-NUMERIC-AZITHROMYVINE
73	H60A123U	Num	4		LENGTH OF TIME-UNIT OF TIME-AZITHROMYCIN
74	H60A1_24	Num	4		CURRENTLY TAKING CLARITHROMYCIN
75	H60A124L	Num	4		LENGTH OF TIME-NUMERIC-CLARITHROMYCINE

Num	Variable	Type	Len	Format	Label
76	H60A124U	Num	4		LENGTH OF TIME-UNIT OF TIME-CLARITHROMYC
77	H60A1_25	Num	4		CURRENTLY TAKING DAPSONE
78	H60A125L	Num	4		LENGTH OF TIME-NUMERIC-DAPSONE
79	H60A125U	Num	4		LENGTH OF TIME-UNIT OF TIME-DAPSONE
80	H60A1_26	Num	4		CURRENTLY TAKING FAMCICLOVIR
81	H60A126L	Num	4		LENGTH OF TIME-NUMERIC-FAMCICLOVIR
82	H60A126U	Num	4		LENGTH OF TIME-UNIT OF TIME-FAMCICLOVIR
83	H60A1_27	Num	4		CURRENTLY TAKING FLUCONAZOLE
84	H60A127L	Num	4		LENGTH OF TIME-NUMERIC-FLUCONAZOLE
85	H60A127U	Num	4		LENGTH OF TIME-UNIT OF TIME-FLUCONAZOLE
86	H60A1_28	Num	4		CURRENTLY TAKING GANCICLOVIR
87	H60A128L	Num	4		LENGTH OF TIME-NUMERIC-GANCICLOVIR
88	H60A128U	Num	4		LENGTH OF TIME-UNIT OF TIME-GANCICLOVIR
89	H60A1_29	Num	4		CURRENTLY TAKING RIFABUTINE
90	H60A129L	Num	4		LENGTH OF TIME-NUMERIC-RIFABUTIN
91	H60A129U	Num	4		LENGTH OF TIME-UNIT OF TIME-RIFABUTIN
92	H60A1_30	Num	4		CURRENTLY TAKING TRIMETHOPRIM/SULFA
93	H60A130L	Num	4		LENGTH OF TIME-NUMERIC-TRIMETHOPRIM/SULF
94	H60A130U	Num	4		LENGTH OF TIME-UNIT OF TIME-TRIMETHOPRIM
95	H60A1_31	Num	4		CURRENTLY TAKING VALACYCLOVIR
96	H60A131L	Num	4		LENGTH OF TIME-NUMERIC-VALACYCLOVIR
97	H60A131U	Num	4		LENGTH OF TIME-UNIT OF TIME-VALACYCLOVIR
98	H60A1_O1	Num	4		CURRENTLY TAKING OTHER HIV/AIDS DRUG-1
99	H60A1O1L	Num	4		LENGTH OF TIME-NUMERIC-OTHER HIV/AIDS DR
100	H60A1O1U	Num	4		LENGTH OF TIME-UNIT OF TIME-OTHER HIV DR
101	H60A1_O2	Num	4		CURRENTLY TAKING OTHER HIV/AIDS DRUG-2
102	H60A1O2L	Num	4		LENGTH OF TIME-NUMERIC-OTHER HIV/AIDS DR
103	H60A1O2U	Num	4		LENGTH OF TIME-UNIT OF TIME-OTHER HIV DR
104	H60A1_O3	Num	4		CURRENTLY TAKING OTHER HIV/AIDS DRUG-3
105	H60A1O3L	Num	4		LENGTH OF TIME-NUMERIC-OTHER HIV/AIDS DR
106	H60A1O3U	Num	4		LENGTH OF TIME-UNIT OF TIME-OTHER HIV DR
107	H60A1_O4	Num	4		CURRENTLY TAKING OTHER HIV/AIDS DRUG-4
108	H60A1O4L	Num	4		LENGTH OF TIME-NUMERIC-OTHER HIV/AIDS DR
109	H60A1O4U	Num	4		LENGTH OF TIME-UNIT OF TIME-OTHER HIV DR
110	H60A1_O5	Num	4		CURRENTLY TAKING OTHER HIV/AIDS DRUG-5
111	H60A1O5L	Num	4		LENGTH OF TIME-NUMERIC-OTHER HIV/AIDS DR
112	H60A1O5U	Num	4		LENGTH OF TIME-UNIT OF TIME-OTHER HIV DR
113	H60A1_O6	Num	4		CURRENTLY TAKING OTHER HIV/AIDS DRUG-6
114	H60A1O6L	Num	4		LENGTH OF TIME-NUMERIC-OTHER HIV/AIDS DR

Num	Variable	Type	Len	Format	Label
115	H60A1O6U	Num	4		LENGTH OF TIME-UNIT OF TIME-OTHER HIV DR
116	H60A1_O7	Num	4		CURRENTLY TAKING OTHER HIV/AIDS DRUG-7
117	H60A1O7L	Num	4		LENGTH OF TIME-NUMERIC-OTHER HIV/AIDS DR
118	H60A1O7U	Num	4		LENGTH OF TIME-UNIT OF TIME-OTHER HIV DR
119	H60A1_O8	Num	4		CURRENTLY TAKING OTHER HIV/AIDS DRUG-8
120	H60A1O8L	Num	4		LENGTH OF TIME-NUMERIC-OTHER HIV/AIDS DR
121	H60A1O8U	Num	4		LENGTH OF TIME-UNIT OF TIME-OTHER HIV DR
122	H60A1_O9	Num	4		CURRENTLY TAKING OTHER HIV/AIDS DRUG-9
123	H60A1O9L	Num	4		LENGTH OF TIME-NUMERIC-OTHER HIV/AIDS DR
124	H60A1O9U	Num	4		LENGTH OF TIME-UNIT OF TIME-OTHER HIV DR
125	H60A1O10	Num	4		CURRENTLY TAKING OTHER HIV/AIDS DRUG-10
126	H60A10L	Num	4		LENGTH OF TIME-NUMERIC-OTHER HIV/AIDS DR
127	H60A10U	Num	4		LENGTH OF TIME-UNIT OF TIME-OTHER HIV DR
128	H60A2	Num	4		DIDN'T USE ANY HCV MEDS
129	H60A2_1	Num	4		HCV MEDICATIONS: INTRON
130	H60A2_2	Num	4		HCV MEDICATIONS: ROFERON
131	H60A2_3	Num	4		HCV MEDICATIONS: INFERGEN
132	H60A2_4	Num	4		HCV MEDICATIONS: STANDARD INTERFERON
133	H60A2_5	Num	4		HCV MEDICATIONS: REBETOL
134	H60A2_6	Num	4		HCV MEDICATIONS: VIRAZOLE
135	H60A2_7	Num	4		HCV MEDICATIONS: REBETRON
136	H60A2_8	Num	4		HCV MEDICATIONS: PEG-INTRON
137	H60A2_9	Num	4		HCV MEDICATIONS: PEGASYS
138	H60A3	Num	4		DIDN'T USE ANY OTHER PRESCRIPTION MED
139	H60A3_1	Num	4		OTHER PRESCRIPTION MEDS: VIOXX
140	H60A3_2	Num	4		OTHER PRESCRIPTION MEDS: CELEBREX
141	H60A3_3	Num	4		OTHER PRESCRIPTION MEDS: VICODIN
142	H60A3_4	Num	4		OTHER PRESCRIPTION MEDS: TYLENOL #3
143	H60A3_5	Num	4		OTHER PRESCRIPTION MEDS: PERCOCET
144	H60A3_6	Num	4		OTHER PRESCRIPTION MEDS: OXYIR
145	H60A3_7	Num	4		OTHER PRESCRIPTION MEDS: HYDROCHLOROTHIA
146	H60A3_8	Num	4		OTHER PRESCRIPTION MEDS: PRILOSEC
147	H60A3_9	Num	4		OTHER PRESCRIPTION MEDS: ZOLOFT
148	H60A3_10	Num	4		OTHER PRESCRIPTION MEDS: NEURONTIN
149	H60A3_O1	Num	4		OTHER PRESCRIPTION MEDS: SPECIFY 1
150	H60A3_O2	Num	4		OTHER PRESCRIPTION MEDS: SPECIFY 2
151	H60A3_O3	Num	4		OTHER PRESCRIPTION MEDS: SPECIFY 3
152	H60A3_O4	Num	4		OTHER PRESCRIPTION MEDS: SPECIFY 4
153	H60A3_O5	Num	4		OTHER PRESCRIPTION MEDS: SPECIFY 5

Num	Variable	Type	Len	Format	Label
154	H60A3_O6	Num	4		OTHER PRESCRIPTION MEDS: SPECIFY 6
155	H60A3_O7	Num	4		OTHER PRESCRIPTION MEDS: SPECIFY 7
156	H60A3_O8	Num	4		OTHER PRESCRIPTION MEDS: SPECIFY 8
157	H60A3_O9	Num	4		OTHER PRESCRIPTION MEDS: SPECIFY 9
158	H60A3O10	Num	4		OTHER PRESCRIPTION MEDS: SPECIFY 10
159	H60A4	Num	4		DIDNT USE HERBS/DRUGS
160	H60A4_1	Num	4		HERBAL SUPPLEMENTS: ALCHEMILLA
161	H60A4_2	Num	4		HERBAL SUPPLEMENTS: CHAPARRAL
162	H60A4_3	Num	4		HERBAL SUPPLEMENTS: CHONDROITIN
163	H60A4_4	Num	4		HERBAL SUPPLEMENTS: EVENING PRIMROSE
164	H60A4_5	Num	4		HERBAL SUPPLEMENTS: EPHEDRA
165	H60A4_6	Num	4		HERBAL SUPPLEMENTS: FEWERFEW
166	H60A4_7	Num	4		HERBAL SUPPLEMENTS: FISH OIL
167	H60A4_8	Num	4		HERBAL SUPPLEMENTS: GENTIAN
168	H60A4_9	Num	4		HERBAL SUPPLEMENTS: GERMANDER
169	H60A4_10	Num	4		HERBAL SUPPLEMENTS: GINKGO
170	H60A4_11	Num	4		HERBAL SUPPLEMENTS: GINSENG
171	H60A4_12	Num	4		HERBAL SUPPLEMENTS: GINGER
172	H60A4_13	Num	4		HERBAL SUPPLEMENTS: GLUCOSAMINE
173	H60A4_14	Num	4		HERBAL SUPPLEMENTS: JU BU HUAN
174	H60A4_15	Num	4		HERBAL SUPPLEMENTS: MILK THISTLE
175	H60A4_16	Num	4		HERBAL SUPPLEMENTS: SENNA
176	H60A4_17	Num	4		HERBAL SUPPLEMENTS: SHARK CARTILAGE
177	H60A4_18	Num	4		HERBAL SUPPLEMENTS: SCURELLARIA
178	H60A4_19	Num	4		HERBAL SUPPLEMENTS: ST. JOHNS WART
179	H60A4_H1	Num	4		HERBAL SUPPLEMENTS: SPECIFY 1
180	H60A4_H2	Num	4		HERBAL SUPPLEMENTS: SPECIFY 2
181	H60A4_H3	Num	4		HERBAL SUPPLEMENTS: SPECIFY 3
182	H60A4_H4	Num	4		HERBAL SUPPLEMENTS: SPECIFY 4
183	H60A4_H5	Num	4		HERBAL SUPPLEMENTS: SPECIFY 5
184	H60A4_H6	Num	4		HERBAL SUPPLEMENTS: SPECIFY 6
185	H60A4_H7	Num	4		HERBAL SUPPLEMENTS: SPECIFY 7
186	H60A4_H8	Num	4		HERBAL SUPPLEMENTS: SPECIFY 8
187	H60A4_H9	Num	4		HERBAL SUPPLEMENTS: SPECIFY 9
188	H60A4H10	Num	4		HERBAL SUPPLEMENTS: SPECIFY 10
189	H60A4_O1	Num	4		OTHER DRUGS: SPECIFY 1
190	H60A4_O2	Num	4		OTHER DRUGS: SPECIFY 2
191	H60A4_O3	Num	4		OTHER DRUGS: SPECIFY 3
192	H60A4_O4	Num	4		OTHER DRUGS: SPECIFY 4

Num	Variable	Type	Len	Format	Label
193	H60A4_O5	Num	4		OTHER DRUGS: SPECIFY 5
194	H60A4_O6	Num	4		OTHER DRUGS: SPECIFY 6
195	H60A4_O7	Num	4		OTHER DRUGS: SPECIFY 7
196	H60A4_O8	Num	4		OTHER DRUGS: SPECIFY 8
197	H60A4_O9	Num	4		OTHER DRUGS: SPECIFY 9
198	H60A4O10	Num	4		OTHER DRUGS: SPECIFY 10
199	H60_B1	Num	4		REDUCE AMOUNT OF TIME SPENT ON WORK?
200	H60_B2	Num	4		ACCOMPLISH LESS THAN YOU WOULD LIKE?
201	H60_B3	Num	4		LIMITED IN THE KIND OF WORK/ACTIVITIES?
202	H60_B4	Num	4		HAVE DIFFICULTY PERFORMING WORK/ACTIVITI
203	H60_B5	Num	4		PAIN IN YOUR JOINTS PAST 4 WEEKS
204	H60_B6	Num	4		PAIN OF OTHER TYPES PAST 4 WEEKS
205	H60_B7	Num	4		HOW MUCH DID PAIN INTERFERE WITH NORMAL
206	H60_C1	Num	4		PAST MONTH: HOW OFTEN TAKEN ACETAMINOPHE
207	H60_C2	Num	4		PAST 3 MONTHS: # ACETAMINOPHEN A WEEK
208	H60_C3	Num	4		PAST 3 MONTHS: MAX # ACETAMINOPHEN A WEE
209	H60_C4	Num	4		3-12 MONTHS: # ACETAMINOPHEN A WEEK
210	H60_C5	Num	4		3-12 MONTHS: MAX # ACETAMINOPHEN A WEEK
211	H60C6_1	Num	4		PAST TWO WEEKS: COX-2 INHIBITOR TAKEN-NO
212	H60C6_2	Num	4		PAST TWO WEEKS: COX-2 INHIBITOR TAKEN-VI
213	H60C6_3	Num	4		PAST TWO WEEKS: COX-2 INHIBITOR TAKEN-CE
214	H60C6O_1	Num	4		PAST TWO WEEKS: COX-2 INHIBITOR TAKEN-SP
215	H60C6O_2	Num	4		PAST TWO WEEKS: COX-2 INHIBITOR TAKEN-SP
216	H60C6O_3	Num	4		PAST TWO WEEKS: COX-2 INHIBITOR TAKEN-SP
217	H60C6O_4	Num	4		PAST TWO WEEKS: COX-2 INHIBITOR TAKEN-SP
218	H60C6O_5	Num	4		PAST TWO WEEKS: COX-2 INHIBITOR TAKEN-SP
219	H60C6O_6	Num	4		PAST TWO WEEKS: COX-2 INHIBITOR TAKEN-SP
220	H60C6O_7	Num	4		PAST TWO WEEKS: COX-2 INHIBITOR TAKEN-SP
221	H60C6O_8	Num	4		PAST TWO WEEKS: COX-2 INHIBITOR TAKEN-SP
222	H60C6O_9	Num	4		PAST TWO WEEKS: COX-2 INHIBITOR TAKEN-SP
223	H60C6O10	Num	4		PAST TWO WEEKS: COX-2 INHIBITOR TAKEN-SP
224	H60_C6A	Num	4		FOR HOW MANY MONTHS USED COX-2 INHIBITOR
225	H60_C7	Num	4		PAST 2 WEEKS: TAKE OTHER NSAIDS
226	H60_C7A	Num	4		FOR HOW MANY MONTHS USED OTHER NSAIDS
227	H60_C8	Num	4		PAST 3 MONTHS: # NSAIDS A WEEK
228	H60_C9	Num	4		PAST 3 MONTHS: MAX # NSAIDS A WEEK
229	H60_C10	Num	4		3-12 MONTHS: # NSAIDS A WEEK
230	H60_C11	Num	4		3-12 MONTHS: MAX # NSAIDS A WEEK
231	H60_C12	Num	4		PAST MONTH: HOW OFTEN TAKEN CODEINE/OTHE

Num	Variable	Type	Len	Format	Label
232	H60_C13P	Num	4		PAST 3 MONTHS: # CODEINE/OTHER PILLS A W
233	H60_C13I	Num	4		PAST 3 MONTHS: # CODEINE/OTHER INJECTION
234	H60_C14P	Num	4		PAST 3 MONTHS: MAX # CODEINE/OTHER PILLS
235	H60_C14I	Num	4		PAST 3 MONTHS: MAX # CODEINE/OTHER INJEC
236	H60_C15P	Num	4		3-12 MONTHS: # CODEINE/OTHER PILLS A WEE
237	H60_C15I	Num	4		3-12 MONTHS: # CODEINE/OTHER INJECTIONS
238	H60_C16P	Num	4		3-12 MONTHS: MAX # CODEINE/OTHER PILLS A
239	H60_C16I	Num	4		3-12 MONTHS: MAX # CODEINE/OTHER INJECTI
240	H60_D1	Num	4		PAST YEAR SMOKED CIGARETTES REGULARLY
241	H60_D2	Num	4		PAST YEAR HAD A DRINK CONTAINING ALCOHOL
242	H60_D3	Num	4		PAST 3 MONTH, # OF DRINKS PER WEEK
243	H60_D4	Num	4		PAST 3 MONTH, MAX # OF DRINKS PER DAY
244	H60_D5	Num	4		3-12 MONTHS: # OF DRINKS PER WEEK
245	H60_D6	Num	4		3-12 MONTHS: MAX # OF DRINKS PER DAY
246	H60_D7	Num	4		UNABLE TO STOP DRINKING
247	H60_D8	Num	4		FAILED TO DO SOMETHING YOU WERE EXPECTED
248	H60_D9	Num	4		NEEDED A DRINK FIRST THING IN THE MORNIN
249	H60_D10	Num	4		FELT GUILTY AFTER DRINKING
250	H60_D11	Num	4		UNABLE TO REMEMBER AFTER DRINKING
251	H60_D12	Num	4		YOU OR SOMEONE BEEN INJURED DUE TO DRINK
252	H60_D13	Num	4		RELATIVE CONCERNED ABOUT YOUR DRINKING
253	H60_E1	Num	4		PAST 2 WKS: ABDOMINAL BLOATING
254	H60_E2	Num	4		PAST 2 WKS: TIRED OR FATIGUED
255	H60_E3	Num	4		PAST 2 WKS: BODILY PAIN
256	H60_E4	Num	4		PAST 2 WKS: FELT SLEEPING DURING THE DAY
257	H60_E5	Num	4		PAST 2 WKS: ABDOMINAL PAIN
258	H60_E6	Num	4		PAST 2 WKS: SHORTNESS OF BREATH
259	H60_E7	Num	4		PAST 2 WKS: NOT ABLE TO EAT MUCH
260	H60_E8	Num	4		PAST 2 WKS: DECREASED STRENGTH
261	H60_E9	Num	4		PAST 2 WKS: TROUBLE LIFTING HEAVY OBJECT
262	H60_E10	Num	4		PAST 2 WKS: FELT ANXIOUS
263	H60_E11	Num	4		PAST 2 WKS: DECREASED LEVEL OF ENERGY
264	H60_E12	Num	4		PAST 2 WKS: FELT UNHAPPY
265	H60_E13	Num	4		PAST 2 WKS: FELT DROWSY
266	H60_E14	Num	4		PAST 2 WKS: LIMITATION OF YOUR DIET
267	H60_E15	Num	4		PAST 2 WKS: BEEN IRRITABLE
268	H60_E16	Num	4		PAST 2 WKS: DIFFICULTY SLEEPING
269	H60_E17	Num	4		PAST 2 WKS: ABDOMINAL DISCOMFORT
270	H60_E18	Num	4		PAST 2 WKS: WORRIED/IMPACT HEPATIC C VIR

Num	Variable	Type	Len	Format	Label
271	H60_E19	Num	4		PAST 2 WKS: MOOD SWINGS
272	H60_E20	Num	4		PAST 2 WKS: UNABLE TO FALL ASLEEP AY NIG
273	H60_E21	Num	4		PAST 2 WKS: MUSCLE CRAMPS
274	H60_E22	Num	4		PAST 2 WKS: WORRIED ABOUT YOUR SYMPTOMS
275	H60_E23	Num	4		PAST 2 WKS: DRY MOUTH
276	H60_E24	Num	4		PAST 2 WKS: FELT DEPRESSED
277	H60_E25	Num	4		PAST 2 WKS: WORRIED VIRUS INFECTION GETT
278	H60_E26	Num	4		PAST 2 WKS: PROBLEM CONCENTRATING
279	H60_E27	Num	4		PAST 2 WKS: TROUBLED BY ITCHING
280	H60_E28	Num	4		PAST 2 WKS: WORRIED ABOUT NOT FEELING BE
281	H60_E29	Num	4		PAST 2 WKS: CONCERNED AVAILABILITY OF LI
282	H60_DT	Num	4	8.	DATE FORM COMPLETED (SAS DATE): Converted to days since reference date
283	H60_DF	Num	4		DATE FORM COMPLETED (IMPUTE FLAG)
284	F60ABDOM	Num	4	6.2	SUMMARY QUALITY OF LIFE: ABDOMINAL
285	F60FATIG	Num	4	6.2	SUMMARY QUALITY OF LIFE: FATIGUE
286	F60SYSTM	Num	4	6.2	SUMMARY QUALITY OF LIFE: SYSTEM
287	F60ACTIV	Num	4	6.2	SUMMARY QUALITY OF LIFE: ACTIVITY
288	F60EMOTN	Num	4	6.2	SUMMARY QUALITY OF LIFE: EMOTION
289	F60WORRY	Num	4	6.2	SUMMARY QUALITY OF LIFE: WORRY
290	H60_E1R	Num	4		RECODED VALUE OF H60_E1 FOR QOL CALC.
291	H60_E5R	Num	4		RECODED VALUE OF H60_E5 FOR QOL CALC.
292	H60_E17R	Num	4		RECODED VALUE OF H60_E17 FOR QOL CALC.
293	H60_E2R	Num	4		RECODED VALUE OF H60_E2 FOR QOL CALC.
294	H60_E4R	Num	4		RECODED VALUE OF H60_E4 FOR QOL CALC.
295	H60_E8R	Num	4		RECODED VALUE OF H60_E8 FOR QOL CALC.
296	H60_E11R	Num	4		RECODED VALUE OF H60_E11 FOR QOL CALC.
297	H60_E13R	Num	4		RECODED VALUE OF H60_E13 FOR QOL CALC.
298	H60_E3R	Num	4		RECODED VALUE OF H60_E3 FOR QOL CALC.
299	H60_E6R	Num	4		RECODED VALUE OF H60_E6 FOR QOL CALC.
300	H60_E21R	Num	4		RECODED VALUE OF H60_E21 FOR QOL CALC.
301	H60_E23R	Num	4		RECODED VALUE OF H60_E23 FOR QOL CALC.
302	H60_E27R	Num	4		RECODED VALUE OF H60_E27 FOR QOL CALC.
303	H60_E7R	Num	4		RECODED VALUE OF H60_E7 FOR QOL CALC.
304	H60_E9R	Num	4		RECODED VALUE OF H60_E9 FOR QOL CALC.
305	H60_E14R	Num	4		RECODED VALUE OF H60_E14 FOR QOL CALC.
306	H60_E10R	Num	4		RECODED VALUE OF H60_E10 FOR QOL CALC.
307	H60_E12R	Num	4		RECODED VALUE OF H60_E12 FOR QOL CALC.
308	H60_E15R	Num	4		RECODED VALUE OF H60_E15 FOR QOL CALC.
309	H60_E16R	Num	4		RECODED VALUE OF H60_E16 FOR QOL CALC.

Num	Variable	Type	Len	Format	Label
310	H60_E19R	Num	4		RECODED VALUE OF H60_E19 FOR QOL CALC.
311	H60_E20R	Num	4		RECODED VALUE OF H60_E20 FOR QOL CALC.
312	H60_E24R	Num	4		RECODED VALUE OF H60_E24 FOR QOL CALC.
313	H60_E26R	Num	4		RECODED VALUE OF H60_E26 FOR QOL CALC.
314	H60_E18R	Num	4		RECODED VALUE OF H60_E18 FOR QOL CALC.
315	H60_E22R	Num	4		RECODED VALUE OF H60_E22 FOR QOL CALC.
316	H60_E25R	Num	4		RECODED VALUE OF H60_E25 FOR QOL CALC.
317	H60_E28R	Num	4		RECODED VALUE OF H60_E28 FOR QOL CALC.
318	H60_E29R	Num	4		RECODED VALUE OF H60_E29 FOR QOL CALC.
319	ILLEGAL_DRUGS	Num	8		Use of Marijuana, Speed, Heroin, MDMA, Phencyclidine, Anabolic Steroids, Glues/Solvents, or Cocaine
320	SUBJ_ID	Char	8		MHCS SUBJECT IDENTIFIER

Data Set Name: mhcs_ii_f61.sas7bdat

Num	Variable	Type	Len	Format	Informat	Label
1	ASCCODE	Num	4			Q15. ASCITES UNTREATED REASON SPEC. CODE
2	NEUROCD	Num	4			OTHER NEUROLOGICAL ABNORMALITIES CODE
3	VISITNUM	Num	4	1.		VISIT NUMBER
4	NoBM	Num	4	4.	4.	BASIC MEASUREMENTS NOT OBTAINED
5	feet	Num	4	2.	19.	Q1. FEET (HEIGHT)
6	inches	Num	4	3.	19.	Q1. INCHES (HEIGHT)
7	cms	Num	4	6.	19.	Q1. CENTIMETERS (HEIGHT)
8	pounds	Num	4	5.1	19.	Q2. WEIGHT IN POUNDS
9	kgs	Num	4	5.1	19.	Q2. WEIGHT IN KILOGRAMS
10	fahrenheit	Num	4	5.1		Q3. TEMPERATURE IN FAHRENHEIT
11	celsius	Num	4	5.1		Q3. TEMPERATURE IN CELSIUS
12	systolic	Num	4	6.	19.	Q4. BLOOD PRESSURE - SYSTOLIC
13	diastolic	Num	4	6.	19.	Q4. BLOOD PRESSURE - DIASTOLIC
14	blood	Num	4	1.	4.	Q5. URINALYSIS - BLOOD LEVEL
15	protein	Num	4	1.	4.	Q6. URINALYSIS - PROTEIN LEVEL
16	nitrite	Num	4	1.	4.	Q7. URINALYSIS - NITRITE LEVEL
17	a_acid	Num	4	1.	4.	Q8. URINALYSIS - ASCORBIC ACID LEVEL
18	glucose	Num	4	1.	4.	Q9. URINALYSIS - GLUCOSE LEVEL
19	ph	Num	4	1.	4.	Q10. URINALYSIS - pH LEVEL
20	hem_arth	Num	4	1.	4.	Q11. HEMOPHILIC ARTHROPATHY
21	HEMARTH1	Num	4	4.	4.	Q11. HAS JOINT REPLACEMENT
22	HEMARTH2	Num	4	4.	4.	Q11. JOINT AFFECTED NOW
23	HEMARTH3	Num	4	4.	4.	Q11. TWO OR MORE JOINTS
24	kar_perf	Num	4	1.	4.	Q12. KARNOFSKY PERFORMANCE
25	affected	Num	4	1.	4.	Q13. KAR PERF AFFECTED BY HEM ARTH
26	fatigue	Num	4	1.	4.	Q14. FATIGUE LEVEL
27	ascites	Num	4	1.	4.	Q15. ASCITES
28	hepatome	Num	4	1.	4.	Q16. HEPATOMEGALY
29	splenome	Num	4	1.	4.	Q17. SPLENOMEGALY
30	splnsize	Num	4	19.	19.	Q17. SPLEEN'S SIZE (IN CM.)
31	h_zoster	Num	4	1.	4.	Q18. HERPES ZOSTER (SHINGLES)
32	lym_none	Num	4	2.	4.	Q19. LYMPHADENOPATHY - NONE
33	lym_cerv	Num	4	1.	4.	Q19. LYMPHADENOPATHY - CERVICAL
34	cervsite	Num	4	2.	19.	Q19. CERVICAL LYMPH - # SITES
35	cervshot	Num	4	1.	4.	Q19. CERVICAL LYMPH - SHOTTY
36	lym_othe	Num	4	1.	4.	Q19. LYMPHADENOPATHY - OTHER

Num	Variable	Type	Len	Format	Informat	Label
37	lgstnode	Num	4	2.	19.	Q19a.DIAMETER OF LARGEST LYMPH NODE
38	nocond	Num	4	4.	4.	NOTHING CHECKED FOR Q.20
39	p_neurop	Num	4	1.	4.	Q20. PERIPHERAL NEUROPATHY
40	spider	Num	4	1.	4.	Q20. SPIDER ANGIOMATA
41	neuro_ab	Num	4	1.	4.	Q20. OTHER NEUROLOGICAL ABNORMAL
42	palmare	Num	4	1.	4.	Q20. PALMAR ERYTHEMA
43	wgt_loss	Num	4	1.	4.	Q20. UNEXPLAINED WEIGHT LOSS
44	edema	Num	4	1.	4.	Q20. LOWER EXTREMITY EDEMA
45	memory	Num	4	1.	4.	Q20. MEMORY OR CONCENTRATION PROBLEMS
46	depressn	Num	4	1.	4.	Q20. CHRONIC DEPRESSION
47	gynecom	Num	4	1.	4.	Q20. GYNECOMASTIA
48	arthralg	Num	4	1.	4.	Q20. ARTHRALGIAS/ARTHRITIS
49	nausea	Num	4	1.	4.	Q20. NAUSEA
50	tenderns	Num	4	1.	4.	Q20. RIGHT UP QUAD ABD/LIVER TENDERNESS
51	i_sclera	Num	4	1.	4.	Q20. ICTERIC SCLERA
52	jaundice	Num	4	1.	4.	Q20. JAUNDICE
53	atrophy	Num	4	1.	4.	Q20. TEMPORAL MUSCLE ATROPHY
54	visit_DT	Num	4	8.		FOLLOW UP PE VISIT DATE (SAS DATE): Converted to days since reference date
55	visit_DF	Num	4			FOLLOW UP PE VISIT DATE IMPUTE FLAG
56	phase	Num	8	4.	4.	phase
57	SUBJ_ID	Char	8			MHCS SUBJECT IDENTIFIER

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Num	Variable	Type	Len	Format	Informat	Label
1	OLDHCV1	Num	4			Q16. OLD code assigned to other HCV
2	OLDHCV2	Num	4			Q16. OLD code assigned to other HCV
3	q1reason	Num	4	4.	4.	Q1. Reason withdrew from study
4	q24adiag	Num	4	4.	4.	Q24A. Cancer #1-Where cancer diagnosed
5	q24bdiag	Num	4	4.	4.	Q24B. Cancer #2-Where cancer diagnosed
6	Q6_NONE	Num	4	4.	4.	Q6. Units of factor concentrate-NONE
7	Q6_UNIT	Num	4	4.	4.	Q6. Units of factor concentrate-KNOWN
8	Q6_MG	Num	4	4.	4.	Q6. Units of factor conc-MICROGRAMS
9	Q6_UNK	Num	4	4.	4.	Q6. Units of factor concentrate-UNKNOWN
10	Q6_MICRO	Num	4	19.	19.	Q6. Number units factor conc.-MICROGRAMS
11	Q6UNITS	Num	4	19.	19.	Q6. Number of units
12	GENDEFCD	Num	4			Q4A. Code assigned to other genetic def.
13	Q8AVE	Num	4			Q8. Ave annual amount of factor conc.
14	q7bags	Num	4			Q7. # of bags
15	q7mls	Num	4			Q7. Total MLS
16	DRUGCD1	Num	4			Q18. Code assigned to other brand used (
17	DRUGCD2	Num	4			Q19. Code assigned to other brand used (
18	DRUGCD3	Num	4			Q20. Code assigned to other brand used (
19	DRUGCD4	Num	4			Q21. Code assigned to other brand used (
20	Q12YEAR	Num	4			Q12. Year of Hep A vaccination
21	Q1	Num	4	4.	4.	Q1. Subject status
22	CNCRCD	Num	4	6.	6.	Q1B. Code assigned to other cancer
23	Q1c	Num	4	6.	6.	Q1C. Autopsy performed
24	Q1d	Num	4	6.	6.	Q1D. Liver Tissue obtained
25	Q2a	Num	4	4.	4.	Q2A. After or same as date of enrollment
26	Q4	Num	4	4.	4.	Q4. Is hemophilia genetic defect correct
27	Q4a	Num	4	6.	6.	Q4A. What is hemophilia genetic defect?
28	Q5a	Num	4	4.	4.	Q5A. Clotting Factor Products-None
29	Q5b	Num	4	4.	4.	Q5B. Clotting Factor Products-Recombin.
30	Q5c	Num	4	4.	4.	Q5C. Clotting Factor Products-Monoclonal
31	Q5d	Num	4	4.	4.	Q5D. Clotting Factor Products-High Pur
32	Q5e	Num	4	4.	4.	Q5E. Clotting Factor Products-Int Purity
33	Q5f	Num	4	4.	4.	Q5F. Clotting Factor Products-Cryoprecip
34	Q5g	Num	4	4.	4.	Q5G. Other Blood Components
35	Q6a	Num	4	4.	4.	Q6A. Basis factor was administered
36	Q7	Num	4	6.	6.	Q7. How many units of cryo did sub rec

Num	Variable	Type	Len	Format	Informat	Label
37	Q9	Num	4	4.	4.	Q9. More info. about the subj factor use
38	Q10	Num	4	6.	6.	Q10. Did the subject receive an HBV vacc
39	Q11	Num	4	4.	4.	Q11. Is HBV chron carrier stat accurate?
40	Q11a	Num	4	6.	6.	Q11A. HBV chronic carrier stat of subj
41	Q12	Num	4	6.	6.	Q12. Vaccinated for hepatitis A
42	Q13	Num	4	6.	6.	Q13. Current HCV antibody status
43	Q14	Num	4	4.	4.	Q14. HIV status
44	Q15	Num	4	6.	6.	Q15. AIDS-defining condition
45	Q15a1	Num	4	4.	4.	Q15A1. CD4 <200 cells/ul or <14%
46	Q15a2	Num	4	4.	4.	Q15A2. CMV (not liver, spleen, lymph)
47	Q15a3	Num	4	4.	4.	Q15A3. Candidiasis of esophagus or lungs
48	Q15a4	Num	4	4.	4.	Q15A4. Cervical cancer, invasive
49	Q15a5	Num	4	4.	4.	Q15A5. Coccidioidmycosis, extrapulmonary
50	Q15a6	Num	4	4.	4.	Q15A6. Cryptococcosis, extrapulmonary
51	Q15a7	Num	4	4.	4.	Q15A7. Cryptosporidiosis with diarrhea f
52	Q15a8	Num	4	4.	4.	Q15A8. Herpes simplex, ulcer for > 1 mon
53	Q15a9	Num	4	4.	4.	Q15A9. Herpes simplex in lungs or esopha
54	Q15a10	Num	4	4.	4.	Q15A10. Histoplasmosis, extrapulmonary
55	Q15a11	Num	4	4.	4.	Q15A11. HIV encephalopathy/dementia
56	Q15a12	Num	4	4.	4.	Q15A12. Isosporiasis with diarrhea for >
57	Q15a13	Num	4	4.	4.	Q15A13. Kaposi's syndrome
58	Q15a14	Num	4	4.	4.	Q15A14. Lymphoid interstitial pneumonia
59	Q15a15	Num	4	4.	4.	Q15A15. Lymphoma of the brain (CNS Prima
60	Q15a16	Num	4	4.	4.	Q15A16. Mycobacterium avium (not only lu
61	Q15a17	Num	4	4.	4.	Q15A17. Non-Hodgkin's Lymphoma (not T-c
62	Q15a18	Num	4	4.	4.	Q15A18. Pneumocystis carinii pneumonia (
63	Q15a19	Num	4	4.	4.	Q15A19. Pneumonia, recurrent bacterial (
64	Q15a20	Num	4	4.	4.	Q15A20. Progressive multifocal leukoence
65	Q15a21	Num	4	4.	4.	Q15A21. Pulmonary tuberculosis
66	Q15a22	Num	4	4.	4.	Q15A22. Salmonella septicemia, recurrent
67	Q15a23	Num	4	4.	4.	Q15A23. Toxoplasmosis of the brain
68	Q15a24	Num	4	4.	4.	Q15A24. Wasting syndrome (emaciation,"sl
69	Q15a25	Num	4	4.	4.	Q15A25. Other multiple of recurrent bact
70	Q16a	Num	4	4.	4.	Q16A. HCV related conditions-None
71	Q16b	Num	4	4.	4.	Q16B. Jaundice, persistent > 1 month
72	Q16b_mo	Num	4	6.	6.	Q16B. Jaundice, persistent > 1 month mon
73	Q16b_yr	Num	4	11.	11.	Q16B. Jaundice, persistent > 1 year year
74	Q16c	Num	4	4.	4.	Q16C. Ascites (hepatic-related)
75	Q16e	Num	4	4.	4.	Q16E. Esophageal varices

Num	Variable	Type	Len	Format	Informat	Label
76	Q16f	Num	4	4.	4.	Q16F. Bleeding esophageal varices
77	Q16l	Num	4	4.	4.	Q16L. Biopsy proven Cirrhosis
78	Q16m	Num	4	4.	4.	Q16M. Other, specify
79	HCVCode1	Num	4	6.	6.	Q16. Code assigned to other HCV related
80	HCVCode2	Num	4	6.	6.	Q16. Code assigned to other HCV related
81	Q17	Num	4	6.	6.	Q17. Did the subject receive HCV treatme
82	Q18	Num	4	4.	4.	Q18. Was the subject treated at the same
83	Q18a	Num	4	6.	6.	Q18A. Brand used
84	Q18c	Num	4	6.	6.	Q18C. Is subject currently using it?
85	Q18d	Num	4	6.	6.	Q18D. Why is the subject no longer using
86	Q19	Num	4	4.	4.	Q19. Was the subject treated with standa
87	Q19a	Num	4	4.	4.	Q19A. Brand used
88	Q19c	Num	4	4.	4.	Q19C. Is subject currently using it?
89	Q19d	Num	4	4.	4.	Q19D. Why is the subject no longer using
90	Q20	Num	4	4.	4.	Q20. Was the subject treated at the same
91	Q20a1	Num	4	4.	4.	Q20A. Brand used: PEG-Intron
92	Q20a2	Num	4	4.	4.	Q20A. Brand used: Pegasys
93	Q20a3	Num	4	4.	4.	Q20A. Brand used: Rebetol
94	Q20a4	Num	4	4.	4.	Q20A. Brand used: Virazole
95	Q20a5	Num	4	4.	4.	Q20A. Brand used: Other
96	Q20c	Num	4	4.	4.	Q20C. Is subject currently using it?
97	Q20d	Num	4	4.	4.	Q20D. Why is the subject no longer using
98	Q21	Num	4	4.	4.	Q21. Was the subject treated with pegyla
99	Q21a	Num	4	6.	6.	Q21A. Brand used
100	Q21c	Num	4	6.	6.	Q21C. Is subject currently using it?
101	Q21d	Num	4	6.	6.	Q21D. Why is the subject no longer using
102	Q22	Num	4	4.	4.	Q22. Has the subject had a liver biopsy?
103	Q22a	Num	4	4.	4.	Q22A. What was the reason for the biopsy
104	Q23	Num	4	6.	6.	Q23. Has the subject ever been consider
105	Q23a	Num	4	4.	4.	Q23A. Has the subject received a liver t
106	Q24	Num	4	4.	4.	Q24. Has the subject been diagnosed with
107	Q24ASCD1	Num	4	11.	11.	Q24A. Cancer #1-PRIMARY SITE CODE
108	Q24AHCD1	Num	4	11.	11.	Q24A. Cancer #1-HISTOLOGIC SUBTYPE CODE
109	Q24ATCD1	Num	4	11.	11.	Q24A. Cancer #1-TYPE CODE
110	Q24a_loc	Num	4	6.	6.	Q24A. Cancer #1-Is this cancer localized
111	Q24BSCD2	Num	4	11.	11.	Q24B. Cancer #2-PRIMARY SITE CODE
112	Q24BHCD2	Num	4	11.	11.	Q24B. Cancer #2-HISTOLOGIC SUBTYPE CODE
113	Q24BTCD2	Num	4	11.	11.	Q24B. Cancer #2-TYPE CODE
114	Q24b_loc	Num	4	6.	6.	Q24B. Cancer #2-Is this cancer localized

Num	Variable	Type	Len	Format	Informat	Label
115	Q25a	Num	4	4.	4.	Q25A. NO GI BLEED, ETC. SINCE ENR. VISIT
116	Q25b	Num	4	4.	4.	Q25B. YES-GI BLEED SINCE ENR. VISIT
117	Q25c	Num	4	4.	4.	Q25C. YES-GASTROINT. PERF. SINCE VISIT
118	Q25d	Num	4	4.	4.	Q25D. YES-GASTROINT. OBST. SINCE VISIT
119	Q25e	Num	4	6.	6.	Q25E. UNKNOWN-GI BLEED, ETC. SINCE VISIT
120	Q25a2	Num	4	4.	4.	Q25A. Have you sent in an Upper GI Suppl
121	DEATH_DT	Num	4	8.		DATE OF DEATH (SAS DATE): Converted to days since reference date
122	DEATH_DF	Num	4			DATE OF DEATH IMPUTE FLAG
123	CVIS_DT	Num	4	8.		DATE MOST RECENT CLINIC VISIT (SAS DATE): Converted to days since reference date
124	CVIS_DF	Num	4			DATE MOST REC. CLINIC VISIT IMPUTE FLAG
125	FUVIS_DT	Num	4	8.		DATE OF FIRST FOLLOW UP (SAS DATE): Converted to days since reference date
126	FUVIS_DF	Num	4			DATE FIRST FOLLOW UP IMPUTE FLAG
127	FORM_DT	Num	4	8.		DATE FORM COMPLETED (SAS DATE): Converted to days since reference date
128	FORM_DF	Num	4			DATE FORM COMPLETED IMPUTE FLAG
129	BiopsyCode	Num	8	6.	6.	BiopsyCode
130	BIOPSYCD	Num	4	6.	6.	Q22A. REASON FOR BIOPSY CODE
131	Q15A1_MONTHS	Num	8			Q15A1. CD4 <200 cells/ul or <14% date - Converted to months since reference
132	Q15A2_MONTHS	Num	8			Q15A2. CMV (not liver, spleen, lymph) date - Converted to months since reference
133	Q15A3_MONTHS	Num	8			Q15A3. Candidiasis of esophagus or lungs date - Converted to months since reference
134	Q15A4_MONTHS	Num	8			Q15A4. Cervical cancer, invasive date - Converted to months since reference
135	Q15A5_MONTHS	Num	8			Q15A5. Coccidioidmycosis, extrapulmonary date - Converted to months since reference
136	Q15A6_MONTHS	Num	8			Q15A6. Cryptococcosis, extrapulmonary date - Converted to months since reference
137	Q15A7_MONTHS	Num	8			Q15A7. Cryptosporidiosis with diarrhea f date - Converted to months since reference
138	Q15A8_MONTHS	Num	8			Q15A8. Herpes simplex, ulcer for > 1 mon date - Converted to months since reference
139	Q15A9_MONTHS	Num	8			Q15A9. Herpes simplex in lungs or esopha date - Converted to months since reference
140	Q15A10_MONTHS	Num	8			Q15A10. Histoplasmosis, extrapulmonary date - Converted to months since reference
141	Q15A11_MONTHS	Num	8			Q15A11. HIV encephalopathy/dementia date - Converted to months since reference
142	Q15A12_MONTHS	Num	8			Q15A12. Isosporiasis with diarrhea for > date - Converted to months since reference
143	Q15A13_MONTHS	Num	8			Q15A13. Kaposi's syndrome date - Converted to months since reference

Num	Variable	Type	Len	Format	Informat	Label
144	Q15A14_MONTHS	Num	8			Q15A14. Lymphoid interstitial pneumonia date - Converted to months since reference
145	Q15A15_MONTHS	Num	8			Q15A15. Lymphoma of the brain (CNS Primary) date - Converted to months since reference
146	Q15A16_MONTHS	Num	8			Q15A16. Mycobacterium avium (not only...) date - Converted to months since reference
147	Q15A17_MONTHS	Num	8			Q15A17. Non-Hodgkin's Lymphoma (not..) date - Converted to months since reference
148	Q15A18_MONTHS	Num	8			Q15A18. Pneumocystis carinii pneumonia date - Converted to months since reference
149	Q15A19_MONTHS	Num	8			Q15A19. Pneumonia, recurrent bacterial date - Converted to months since reference
150	Q15A20_MONTHS	Num	8			Q15A20. Progressive multifocal leukoence date - Converted to months since reference
151	Q15A21_MONTHS	Num	8			Q15A21. Pulmonary tuberculosis date - Converted to months since reference
152	Q15A22_MONTHS	Num	8			Q15A22. Salmonella septicemia, recurrent date - Converted to months since reference
153	Q15A23_MONTHS	Num	8			Q15A23. Toxoplasmosis of the brain date - Converted to months since reference
154	Q15A24_MONTHS	Num	8			Q15A24. Wasting syndrome (emaciation...) - Converted to months since reference
155	Q15A25_MONTHS	Num	8			Q15A25. Other multiple of recurrent bact date - Converted to months since reference
156	Q16C__MONTHS	Num	8			Q16C. Ascites (hepatic-related) - Date converted to months since reference point
157	Q16E__MONTHS	Num	8			Q16E. Esophageal varices - Date converted to months since reference point
158	Q16F__MONTHS	Num	8			Q16F. Bleeding esophageal varices - Date converted to months since reference point
159	Q16L__MONTHS	Num	8			Q16L. Biopsy proven Cirrhosis - Date converted to months since reference point
160	Q16M__MONTHS	Num	8			Q16M. Other, specify - Date converted to months since reference point
161	Q18B__MONTHS	Num	8			Q18B. Date use began - Converted to months since reference point
162	Q19B__MONTHS	Num	8			Q19B. Date use began - Converted to months since reference point
163	Q20B__MONTHS	Num	8			Q20B. Date use began - Converted to months since reference point
164	Q21B__MONTHS	Num	8			Q21B. Date use began - Converted to months since reference point
165	Q23A__MONTHS	Num	8			Q23A. Date of liver transplant - Converted to months since reference point
166	Q24A__MONTHS	Num	8			Q24A. Cancer #1-Date of diagnosis - Converted to months since reference point
167	Q24B__MONTHS	Num	8			Q24B. Cancer #2-Date of diagnosis - Converted to months since reference point
168	SUBJ_ID	Char	8			MHCS SUBJECT IDENTIFIER

Data Set Name: mhcs_ii_f63.sas7bdat

Num	Variable	Type	Len	Format	Label
1	OUTL_V	Num	4		FLAG TO INDICATE AN OUTLIER VALUE
2	PTT_DF	Num	4		PTT DATE: IMPUTE FLAG
3	H63_PTPP	Num	4		PTT PATIENT VALUE
4	H63_PTTC	Num	4		PTT CONTROL VALUE
5	PTT_DT	Num	4	8.	DATE OF PTT TEST (SAS DATE): Converted to days since reference date
6	H63_27H	Num	4		CIRRHOSIS
7	FORM	Num	4		Form Number
8	H63VISIT	Num	4		VISIT NUMBER
9	H63_1	Num	4		CBC-WBC
10	H63_2	Num	4		CBC-HEMOGLOBIN
11	H63_3	Num	4		CBC-HEMATOCRIT
12	H63_4	Num	4		CBC-LYMPHOCYTES
13	H63_5	Num	4		CBC-NEUTROPHILS
14	H63_6	Num	4		CBC-PLATELET COUNT
15	H63_7U	Num	4		ALT (SGPT) U/L
16	H63_7K	Num	4		ALT (SGPT) UKAT/L
17	H63_8U	Num	4		AST (SGOT) U/L
18	H63_8K	Num	4		AST (SGOT) UKAT/L
19	H63_9U	Num	4		ALKALINE PHOSPHATASE U/L
20	H63_9K	Num	4		ALKALINE PHOSPHATASE UKAT/L
21	H63_10MG	Num	4		TOTAL BILIRUBIN MG/DL
22	H63_10MO	Num	4		TOTAL BILIRUBIN UMOL/L
23	H63_11MG	Num	4		DIRECT BILIRUBIN MG/DL
24	H63_11MO	Num	4		DIRECT BILIRUBIN UMOL/L
25	H63_12MG	Num	4		INDIRECT BILIRUBIN MG/DL
26	H63_12MO	Num	4		INDIRECT BILIRUBIN UMOL/L
27	H63_13MG	Num	4		SERUM CREATININE MG/DL
28	H63_13MO	Num	4		SERUM CREATININE UMOL/L
29	H63_14MG	Num	4		BUN MG/DL
30	H63_14MO	Num	4		BUN MMOL/L
31	H63_15	Num	4		ALBUMIN G/DL
32	H63_16	Num	4		GLOBULIN G/DL
33	H63_17PV	Num	4		PROTHROMBIN TIME-PATENT VALUE=SECONDS
34	H63_17CV	Num	4		PROTHROMBIN TIME-PATENT CONTROL=SECONDS
35	H63_17IN	Num	4		INR-RATIO VALUE
36	H63_18MG	Num	4		CHOLESTEROL MG/DL

Num	Variable	Type	Len	Format	Label
37	H63_18MO	Num	4		CHOLESTEROL MMOL/L
38	H63_19P	Num	4		CD4 VALUES %
39	H63_19L	Num	4		CD4 VALUES 10**9/L
40	H63_20P	Num	4		CD8 VALUES %
41	H63_20L	Num	4		CD8 VALUES 10**9/L
42	H63_21DL	Num	4		SERUM IRON UG/DL
43	H63_21MO	Num	4		SERUM IRON UMOL/L
44	H63_22DL	Num	4		TOTAL IRON-BINDING CAPACITY UG/DL
45	H63_22MO	Num	4		TOTAL IRON-BINDING CAPACITY UMOL/L
46	H63_23NG	Num	4		SERUM FERRITIN NG/ML
47	H63_23GL	Num	4		SERUM FERRITIN UG/L
48	H63_24	Num	4		WAS AN INHIBITOR LEVEL DETECTED ON THIS
49	H63_24A	Num	4		INHIBITOR TITER-BETHESDA UNITS
50	H63_TNM	Num	4		TITER NOT MEASURED 01=CHECKED
51	H63_25	Num	4		HAS PATIENT HAD A RUQ ULTRASOUND,CAT OR
52	H63_26	Num	4		WHAT TYPE OF TEST WAS IT
53	H63_27A	Num	4		LIVER SIZE
54	H63_27B	Num	4		LIVER OR PARENCHYMA ECHOGENECITY
55	H63_27C	Num	4		LIVER MASS
56	H63_27CD	Num	4		LIVER MASS-SPECIFY DIAMETER
57	H63_27CC	Num	4		LIVER MASS-CODE ASSIGNED TO OTHER SPECIF
58	H63_27D	Num	4		SPLEEN SIZE
59	H63_27E	Num	4		SPLEEN ABNORMALITY
60	H63_27EC	Num	4		SPLEEN ABNORMALITY-CODE ASSIGNED TO SPEC
61	H63_27F	Num	4		ASCITES
62	H63_27G	Num	4		PORTAL VEIN THROMBOSIS
63	CBC_DT	Num	4	8.	DATE OF MOST RECENT CBC: SAS DATE: Converted to days since reference date
64	CBC_DF	Num	4		DATE OF MOST RECENT CBC: IMPUTE FLAG
65	SC_DT	Num	4	8.	DATE OF MOST RECENT SERUM CHEM:SAS DATE: Converted to days since reference date
66	SC_DF	Num	4		DATE OF MOST RECENT SERUM CHEM:IMPUTE FL
67	PT_DT	Num	4	8.	MOST RECENT PROTHROMBIN TIME:SAS DATE: Converted to days since reference date
68	PT_DF	Num	4		MOST RECENT PROTHROMBIN TIME:IMPUTE DATE
69	CH_DT	Num	4	8.	MOST RECENT CHOLESTEROL: SAS DATE: Converted to days since reference date
70	CH_DF	Num	4		MOST RECENT CHOLESTEROL: IMPUTE FLAG
71	HIV_DT	Num	4	8.	MOST RECENT HIV/AIDS: SAS DATE: Converted to days since reference date
72	HIV_DF	Num	4		MOST RECENT HIV/AIDS: IMPUTE FLAG
73	IRL_DT	Num	4	8.	DATE OF MOST RECENT IRON LEVEL:SAS DATE: Converted to days since reference date
74	IRL_DF	Num	4		DATE OF MOST RECENT IRON LEVEL:IMPUTE FL

Num	Variable	Type	Len	Format	Label
75	IL_DT	Num	4	8.	INHIBITOR LEVEL DATE: SAS DATE: Converted to days since reference date
76	IL_DF	Num	4		INHIBITOR LEVEL DATE: IMPUTE FLAG
77	US_DT	Num	4	8.	MOST RECENT TEST ULTRASOUND:SAS DATE: Converted to days since reference date
78	US_DF	Num	4		MOST RECENT TEST ULTRASOUND: IMPUTE FLAG
79	SUBJ_ID	Char	8		MHCS SUBJECT IDENTIFIER

Data Set Name: mhcs_ii_f63web.sas7bdat

Num	Variable	Type	Len	Format	Label
1	H63_15GL	Num	4		ALBUMIN g/L
2	phase	Num	4		STUDY PHASE (H63VISIT - 1)
3	nolab	Num	4		NO LAB TEST RESULTS AVAILABLE PAST 12 MO
4	CBC_NA	Num	4		NO CBC RESULTS AVAILABLE PAST 12 MONTHS
5	H63_1	Num	4		CBC-WBC 10**3/MM**3 (=10**9/L =K/uL)
6	H63_1_NA	Num	4		WBC NOT AVAILABLE
7	h63_2	Num	4		CBC-HEMOGLOBIN G/DL
8	H63_2_GL	Num	4		CBC-HEMOGLOBIN G/L
9	H63_2_NA	Num	4		HEMOGLOBIN NOT AVAILABLE
10	H63_3	Num	4		CBC-HEMATOCRIT %
11	H63_3_NA	Num	4		HEMATOCRIT NOT AVAILABLE
12	H63_4	Num	4		CBC-LYMPHOCYTES %
13	H63_4_NA	Num	4		LYMPHOCYTES NOT AVAILABLE
14	H63_5	Num	4		CBC-NEUTROPHILS%
15	H63_5_NA	Num	4		NEUTROPHILS NOT AVAILABLE
16	H63_6	Num	4		CBC-PLATELET COUNT 10**3/MM**3(=10**9/L)
17	H63_6_NA	Num	4		PLATELET COUNT NOT AVAILABLE
18	Serum_na	Num	4		NO SERUM CHEMISTRY
19	H63_7U	Num	4		ALT (SGPT) U/L
20	H63_7K	Num	4		ALT (SGPT) uKAT/L
21	H63_7_NA	Num	4		ALT (SGPT) NOT AVAILABLE
22	H63_8U	Num	4		AST (SGOT) U/L
23	H63_8K	Num	4		AST (SGOT) uKAT/L
24	H63_8_NA	Num	4		AST (SGOT) NOT AVAILABLE
25	H63_9U	Num	4		ALKALINE PHOSPHATASE U/L
26	H63_9K	Num	4		ALKALINE PHOSPHATASE uKAT/L
27	H63_9_NA	Num	4		ALKALINE PHOSPHATASE NOT AVAILABLE
28	H63_10MG	Num	4		TOTAL BILIRUBIN MG/DL
29	H63_10MO	Num	4		TOTAL BILIRUBIN uMOL/L
30	H63_10NA	Num	4		TOTAL BILIRUBIN NOT AVAILABLE
31	H63_11MG	Num	4		DIRECT BILIRUBIN MG/DL
32	H63_11MO	Num	4		DIRECT BILIRUBIN uMOL/L
33	H63_11NA	Num	4		DIRECT BILIRUBIN NOT AVAILABLE
34	H63_12MG	Num	4		INDIRECT BILIRUBIN MG/DL
35	H63_12MO	Num	4		INDIRECT BILIRUBIN uMOL/L
36	H63_12NA	Num	4		INDIRECT BILIRUBIN NOT AVAILABLE

Num	Variable	Type	Len	Format	Label
37	H63_13MG	Num	4		SERUM CREATININE MG/DL
38	H63_13MO	Num	4		SERUM CREATININE uMOL/L
39	H63_13NA	Num	4		SERUM CREATININE NOT AVAILABLE
40	H63_14MG	Num	4		BUN MG/DL
41	H63_14MO	Num	4		BUN MMOL/L
42	H63_14NA	Num	4		BUN NOT AVAILABLE
43	H63_15	Num	4		ALBUMIN G/DL
44	H63_15NA	Num	4		ALBUMIN NOT AVAILABLE
45	H63_16	Num	4		GLOBULIN G/DL
46	H63_16NA	Num	4		GLOBULIN NOT AVAILABLE
47	H63_17PV	Num	4		PROTHROMBIN TIME-PATENT VALUE=SECONDS
48	H6317PNA	Num	4		PATIENT VALUE NOT AVAILABLE
49	H63_17CV	Num	4		PROTHROMBIN TIME-PATENT CONTROL=SECONDS
50	H6317CNA	Num	4		CONTROL VALUE NOT AVAILABLE
51	H63_17IN	Num	4		INR-RATIO VALUE
52	H6317INA	Num	4		INR NOT AVAILABLE
53	H63_18MG	Num	4		CHOLESTEROL MG/DL
54	H63_18MO	Num	4		CHOLESTEROL MMOL/L
55	H63_18NA	Num	4		CHOLESTEROL NOT AVAILABLE
56	H63HIVNA	Num	4		HIV DATA NOT AVAILABLE
57	nohiv	Num	4		SUBJECT NOT HIV POSITIVE
58	H63_19P	Num	4		CD4 VALUES %
59	H63_19L	Num	4		CD4 VALUES 10**6/L
60	H63_20P	Num	4		CD8 VALUES %
61	H63_20L	Num	4		CD8 VALUES 10**6/L
62	H63IRONA	Num	4		NO IRON RESULTS AVAILABLE W/I PAST 12 MO
63	H63_21DL	Num	4		SERUM IRON uG/DL
64	H63_21MO	Num	4		SERUM IRON uMOL/L
65	H63_21NA	Num	4		SERUM IRON NOT AVAILABLE
66	H63_22DL	Num	4		TOTAL IRON-BINDING CAPACITY uG/DL
67	H63_22MO	Num	4		TOTAL IRON-BINDING CAPACITY uMOL/L
68	H63_22NA	Num	4		TOTAL IRON-BINDING CAPACITY NOT AVAIL.
69	H63_23NG	Num	4		SERUM FERRITIN NG/ML
70	H63_23GL	Num	4		SERUM FERRITIN uG/L
71	H63_23NA	Num	4		SERUM FERRITIN NOT AVAILABLE
72	H63INHNA	Num	4		NO INHIBITOR RESULTS AVAIL. PAST 12 MO
73	H63_24	Num	4		POSITIVE INHIBITOR DETECTED
74	H63_24A	Num	4		POSITIVE INHIBITOR TITER-BETHESDA UNITS
75	H63_TNM	Num	4		TITER NOT AVAILABLE

Num	Variable	Type	Len	Format	Label
76	H63_25	Num	4		HAS PATIENT HAD A RUQ ULTRASOUND,CAT OR
77	H63_26	Num	4		WHAT TYPE OF TEST
78	H63_27A	Num	4		LIVER SIZE
79	H63_27B	Num	4		LIVER OR PARENCHYMA ECHOGENECITY
80	H63_27C	Num	4		LIVER MASS
81	H63_27CD	Num	4		LIVER MASS SIZE (CM)
82	H63_27D	Num	4		SPLEEN SIZE
83	H63_27E	Num	4		SPLEEN ABNORMALITY
84	H63_27F	Num	4		ASCITES
85	H63_27G	Num	4		PORTAL VEIN THROMBOSIS
86	H63_27H	Num	4		CIRRHOSIS
87	H63VISIT	Num	4		VISIT NUMBER (PHASE + 1)
88	FORM	Char	3		FORM NUMBER
89	VISIT_DT	Num	4	8.	VISIT DATE (SAS DATE): Converted to days since reference date
90	VISIT_DF	Num	4		VISIT DATE: IMPUTE FLAG
91	CBC_DT	Num	4	8.	DATE OF MOST RECENT CBC: SAS DATE: Converted to days since reference date
92	CBC_DF	Num	4		DATE OF MOST RECENT CBC: IMPUTE FLAG
93	SC_DT	Num	4	8.	DATE OF MOST RECENT SERUM CHEM:SAS DATE: Converted to days since reference date
94	SC_DF	Num	4		DATE OF MOST RECENT SERUM CHEM:IMPUTE FL
95	PT_DT	Num	4	8.	MOST RECENT PROTHROMBIN TIME:SAS DATE: Converted to days since reference date
96	PT_DF	Num	4		MOST RECENT PROTHROMBIN TIME:IMPUTE DATE
97	CH_DT	Num	4	8.	MOST RECENT CHOLESTEROL: SAS DATE: Converted to days since reference date
98	CH_DF	Num	4		MOST RECENT CHOLESTEROL: IMPUTE FLAG
99	HIV_DT	Num	4	8.	MOST RECENT HIV/AIDS: SAS DATE: Converted to days since reference date
100	HIV_DF	Num	4		MOST RECENT HIV/AIDS: IMPUTE FLAG
101	IRL_DT	Num	4	8.	DATE MOST RECENT IRON LEVEL:SAS DATE: Converted to days since reference date
102	IRL_DF	Num	4		DATE MOST RECENT IRON LEVEL:IMPUTE FLAG
103	IL_DT	Num	4	8.	INHIBITOR LEVEL DATE: SAS DATE: Converted to days since reference date
104	IL_DF	Num	4		INHIBITOR LEVEL DATE: IMPUTE FLAG
105	US_DT	Num	4	8.	MOST RECENT TEST ULTRASOUND:SAS DATE: Converted to days since reference date
106	US_DF	Num	4		MOST RECENT TEST ULTRASOUND: IMPUTE FLAG
107	H63_27CC	Num	4		SPECIFY OTHER LIVER MASS code ?
108	H63_27EC	Num	4		SPECIFY SPLEEN ABNORMALITY code ?
109	SUBJ_ID	Char	8		MHCS SUBJECT IDENTIFIER

Data Set Name: mhcs_ii_f66.sas7bdat

Num	Variable	Type	Len	Format	Label
1	PRODHX_V	Num	4		FLAG TO INDICATE PRODUCT HIST. VERIFIED
2	FORM	Num	4		Form Number
3	H66VISIT	Num	4		VISIT NUMBER
4	H66_A1	Num	4		RELATIVE HAD HEMOPHILIA OR von WILLEBRAN
5	H66_A1A	Num	4		RELATIVE WITH HEMOPHILIA OR vW HAD AN IN
6	H66_A2	Num	4		ANY BROTHERS WITH HEMOPHILIA
7	H66_A2A	Num	4		# BROTHERS WITH HEMOPHILIA: TOP-CODED AT 3
8	H66_A3	Num	4		SISTERS/BROTHERS W/ von WILLEBRAND'S DIS
9	H66_A3A	Num	4		# SISTERS/BROTHERS W/ von WILLEBRAND'S DISEASE: TOP-CODED AT 3
10	H66_B4	Num	4		RECEIVED PLASMA OR CRYOPRECIPITATE
11	H66_B4AA	Num	4		AGE (YRS) FIRST RECEIVED PLASMA OR CRYOP
12	H66_B4AM	Num	4		AGE (MTHS) FIRST RECEIVED PLASMA OR CRYO
13	H66_B4BA	Num	4		AGE (YRS) LAST RECEIVED PLASMA OR CRYOP
14	H66_B4BM	Num	4		AGE (MTHS) LAST RECEIVED PLASMA OR CRYO
15	H66_B5	Num	4		RECEIVED A TRANSFUSION OF WHOLE OR RED C
16	H66_B5AA	Num	4		AGE (YRS) RECVD A TRANSFUSION OF WHOLE/R
17	H66_B5AM	Num	4		AGE (MTHS) RECVD A TRANSFUSION OF WHOLE/
18	H66_B6	Num	4		RECEIVED A TRANSFUSION OF PLATELETS
19	H66_B6AA	Num	4		AGE (YRS) RECVD A TRANSFUSION OF PLATELE
20	H66_B6AM	Num	4		AGE (MTHS) RECVD A TRANSFUSION OF PLATEL
21	H66_B7	Num	4		RECEIVED A NON-HEAT-TREATED FACTOR
22	H66_B7AA	Num	4		AGE (YRS) RECVD A NON-HEAT-TREATED FACTO
23	H66_B7AM	Num	4		AGE (MTHS) RECVD A NON-HEAT-TREATED FACT
24	H66_B8	Num	4		RCVD AT LEAST 50,000 UNITS OF FACTOR CON
25	H66_B8A	Num	4		AGE 1ST RCVD AT LEAST 50,000 UNITS OF FA
26	H66_B8B	Num	4		AGE 2ND RCVD AT LEAST 50,000 UNITS OF FA
27	H66_B8C	Num	4		AGE 3RD RCVD AT LEAST 50,000 UNITS OF FA
28	H66_B9	Num	4		<6 YEARS OLD, USE FACTOR CONCENTRATE
29	H66_B9A	Num	4		<6 YEARS OLD, AVERAGE USE OF FACTOR CONC
30	H66_B10	Num	4		<6 YEARS OLD, USE PLASMA/CRYOPRECIPIATE
31	H66_B10A	Num	4		<6 YEARS OLD, AVERAGE USE OF PLASMA/CRYO
32	H66_B11	Num	4		6-12 YEARS OLD, USE FACTOR CONCENTRATE
33	H66_B11A	Num	4		6-12 YEARS OLD, AVERAGE USE OF FACTOR CO
34	H66_B12	Num	4		6-12 YEARS OLD, USE PLASMA/CRYOPRECIPIAT
35	H66_B12A	Num	4		6-12 YEARS OLD, AVERAGE USE OF PLASMA/CR
36	H66_B13	Num	4		13-20 YEARS OLD, USE FACTOR CONCENTRATE

Num	Variable	Type	Len	Format	Label
37	H66_B13A	Num	4		13-20 YEARS OLD, AVERAGE USE OF FACTOR C
38	H66_B14	Num	4		13-20 YEARS OLD, USE PLASMA/CRYOPRECIPIA
39	H66_B14A	Num	4		13-20 YEARS OLD, AVERAGE USE OF PLASMA/C
40	H66_B15	Num	4		21-30 YEARS OLD, USE FACTOR CONCENTRATE
41	H66_B15A	Num	4		21-30 YEARS OLD, AVERAGE USE OF FACTOR C
42	H66_B16	Num	4		21-30 YEARS OLD, USE PLASMA/CRYOPRECIPIA
43	H66_B16A	Num	4		21-30 YEARS OLD, AVERAGE USE OF PLASMA/C
44	H66_B17	Num	4		31-40 YEARS OLD, USE FACTOR CONCENTRATE
45	H66_B17A	Num	4		31-40 YEARS OLD, AVERAGE USE OF FACTOR C
46	H66_B18	Num	4		31-40 YEARS OLD, USE PLASMA/CRYOPRECIPIA
47	H66_B18A	Num	4		31-40 YEARS OLD, AVERAGE USE OF PLASMA/C
48	H66_B19	Num	4		41-50 YEARS OLD, USE FACTOR CONCENTRATE
49	H66_B19A	Num	4		41-50 YEARS OLD, AVERAGE USE OF FACTOR C
50	H66_B20	Num	4		41-50 YEARS OLD, USE PLASMA/CRYOPRECIPIA
51	H66_B20A	Num	4		41-50 YEARS OLD, AVERAGE USE OF PLASMA/C
52	H66_B21	Num	4		51-60 YEARS OLD, USE FACTOR CONCENTRATE
53	H66_B21A	Num	4		51-60 YEARS OLD, AVERAGE USE OF FACTOR C
54	H66_B22	Num	4		51-60 YEARS OLD, USE PLASMA/CRYOPRECIPIA
55	H66_B22A	Num	4		51-60 YEARS OLD, AVERAGE USE OF PLASMA/C
56	H66_B23	Num	4		>=60 YEARS OLD, USE FACTOR CONCENTRATE
57	H66_B23A	Num	4		>=60 YEARS OLD, AVERAGE USE OF FACTOR CO
58	H66_B24	Num	4		>= YEARS OLD, USE PLASMA/CRYOPRECIPIATE
59	H66_B24A	Num	4		>= YEARS OLD, AVERAGE USE OF PLASMA/CRYO
60	H66_DT	Num	4	8.	DATE FORM COMPLETED (SAS DATE): Converted to days since reference date
61	H66_DF	Num	4		DATE FORM COMPLETED (IMPUTE FLAG)
62	SUBJ_ID	Char	8		MHCS SUBJECT IDENTIFIER

Data Set Name: mhcs_ii_f70.sas7bdat

Num	Variable	Type	Len	Format	Label
1	PRODHX_V	Num	4		FLAG TO INDICATE PRODUCT HIST. VERIFIED
2	FORM	Num	4		Form Number
3	H70VISIT	Num	4		VISIT NUMBER
4	H70_A1	Num	4		NOT HIV POSITIVE
5	H70_A1N	Num	4		HAVE YOU USED ANY HIV RELATED MEDS
6	H70_221	Num	4		HIV MEDS: ABACAVIR
7	H70221_1	Num	4		REASON STOPPED ABACAVIR-SIDE EFFECT
8	H70221_2	Num	4		REASON STOPPED ABACAVIR-WASN'T WORKING
9	H70221_3	Num	4		REASON STOPPED ABACAVIR-CHANGED TO NEW R
10	H70221_4	Num	4		REASON STOPPED ABACAVIR-PLANNED INTERRUPT
11	H70221_5	Num	4		REASON STOPPED ABACAVIR-NO INSURANCE
12	H70221_6	Num	4		REASON STOPPED ABACAVIR-OTHER REASON
13	H70221_S	Num	4		REASON STOPPED ABACAVIR-SPECIFY REASON
14	H70_222	Num	4		HIV MEDS: AMPRENAVIR
15	H70222_1	Num	4		REASON STOPPED AMPRENAVIR-SIDE EFFECT
16	H70222_2	Num	4		REASON STOPPED AMPRENAVIR-WASN'T WORKING
17	H70222_3	Num	4		REASON STOPPED AMPRENAVIR-CHANGED TO NEW
18	H70222_4	Num	4		REASON STOPPED AMPRENAVIR-PLANNED INTERRUPT
19	H70222_5	Num	4		REASON STOPPED AMPRENAVIR-NO INSURANCE
20	H70222_6	Num	4		REASON STOPPED AMPRENAVIR-OTHER REASON
21	H70222_S	Num	4		REASON STOPPED AMPRENAVIR-SPECIFY REASON
22	H70_223	Num	4		HIV MEDS: COMBIVIR
23	H70223_1	Num	4		REASON STOPPED COMBIVIR-SIDE EFFECT
24	H70223_2	Num	4		REASON STOPPED COMBIVIR-WASN'T WORKING
25	H70223_3	Num	4		REASON STOPPED COMBIVIR-CHANGED TO NEW R
26	H70223_4	Num	4		REASON STOPPED COMBIVIR-PLANNED INTERRUPT
27	H70223_5	Num	4		REASON STOPPED COMBIVIR-NO INSURANCE
28	H70223_6	Num	4		REASON STOPPED COMBIVIR-OTHER REASON
29	H70223_S	Num	4		REASON STOPPED COMBIVIR-SPECIFY REASON
30	H70_224	Num	4		HIV MEDS: DELAVIRDINE
31	H70224_1	Num	4		REASON STOPPED DELAVIRDINE -SIDE EFFECT
32	H70224_2	Num	4		REASON STOPPED DELAVIRDINE -WASN'T WORKI
33	H70224_3	Num	4		REASON STOPPED DELAVIRDINE -CHANGED TO N
34	H70224_4	Num	4		REASON STOPPED DELAVIRDINE -PLANNED INTE
35	H70224_5	Num	4		REASON STOPPED DELAVIRDINE -NO INSURANCE
36	H70224_6	Num	4		REASON STOPPED DELAVIRDINE -OTHER REASON

Num	Variable	Type	Len	Format	Label
37	H70224_S	Num	4		REASON STOPPED DELAVIRDINE -SPECIFY REAS
38	H70_225	Num	4		HIV MEDS: DIDANOSINE
39	H70225_1	Num	4		REASON STOPPED DIDANOSINE-SIDE EFFECT
40	H70225_2	Num	4		REASON STOPPED DIDANOSINE-WASN'T WORKING
41	H70225_3	Num	4		REASON STOPPED DIDANOSINE-CHANGED TO NEW
42	H70225_4	Num	4		REASON STOPPED DIDANOSINE-PLANNED INTERR
43	H70225_5	Num	4		REASON STOPPED DIDANOSINE-NO INSURANCE
44	H70225_6	Num	4		REASON STOPPED DIDANOSINE-OTHER REASON
45	H70225_S	Num	4		REASON STOPPED DIDANOSINE-SPECIFY REASON
46	H70_226	Num	4		HIV MEDS: EFAVIRENZ
47	H70226_1	Num	4		REASON STOPPED EFAVIRENA-SIDE EFFECT
48	H70226_2	Num	4		REASON STOPPED EFAVIRENA-WASN'T WORKING
49	H70226_3	Num	4		REASON STOPPED EFAVIRENA-CHANGED TO NEW
50	H70226_4	Num	4		REASON STOPPED EFAVIRENA-PLANNED INTERRU
51	H70226_5	Num	4		REASON STOPPED EFAVIRENA-NO INSURANCE
52	H70226_6	Num	4		REASON STOPPED EFAVIRENA-OTHER REASON
53	H70226_S	Num	4		REASON STOPPED EFAVIRENA-SPECIFY REASON
54	H70_227	Num	4		HIV MEDS: HYDROXYUREA
55	H70227_1	Num	4		REASON STOPPED HYDROXYUREA -SIDE EFFECT
56	H70227_2	Num	4		REASON STOPPED HYDROXYUREA -WASN'T WORKI
57	H70227_3	Num	4		REASON STOPPED HYDROXYUREA -CHANGED TO N
58	H70227_4	Num	4		REASON STOPPED HYDROXYUREA -PLANNED INTE
59	H70227_5	Num	4		REASON STOPPED HYDROXYUREA -NO INSURANCE
60	H70227_6	Num	4		REASON STOPPED HYDROXYUREA -OTHER REASON
61	H70227_S	Num	4		REASON STOPPED HYDROXYUREA -SPECIFY REAS
62	H70_228	Num	4		HIV MEDS: INDINAVIR
63	H70228_1	Num	4		REASON STOPPED INDINAVIR-SIDE EFFECT
64	H70228_2	Num	4		REASON STOPPED INDINAVIR-WASN'T WORKING
65	H70228_3	Num	4		REASON STOPPED INDINAVIR-CHANGED TO NEW
66	H70228_4	Num	4		REASON STOPPED INDINAVIR-PLANNED INTERRU
67	H70228_5	Num	4		REASON STOPPED INDINAVIR-NO INSURANCE
68	H70228_6	Num	4		REASON STOPPED INDINAVIR-OTHER REASON
69	H70228_S	Num	4		REASON STOPPED INDINAVIR-SPECIFY REASON
70	H70_229	Num	4		HIV MEDS: LOPINAVIR/RITONAVIR
71	H70229_1	Num	4		REASON STOPPED LOPINAVIR/RITONAVIR-SIDE
72	H70229_2	Num	4		REASON STOPPED LOPINAVIR/RITONAVIR-WASN'
73	H70229_3	Num	4		RSN STPD LOPINAVIR/RITONAVIR-CGN TO NEW
74	H70229_4	Num	4		RSN STPD LOPINAVIR/RITONAVIR-PLANNED INT
75	H70229_5	Num	4		REASON STOPPED LOPINAVIR/RITONAVIR-NO IN

Num	Variable	Type	Len	Format	Label
76	H70229_6	Num	4		REASON STOPPED LOPINAVIR/RITONAVIR-OTHER
77	H70229_S	Num	4		REASON STOPPED LOPINAVIR/RITONAVIR-SPECI
78	H70_230	Num	4		HIV MEDS: LAMIVUDINE
79	H70230_1	Num	4		REASON STOPPED LAMIVUDINE-SIDE EFFECT
80	H70230_2	Num	4		REASON STOPPED LAMIVUDINE-WASN'T WORKING
81	H70230_3	Num	4		REASON STOPPED LAMIVUDINE-CHANGED TO NEW
82	H70230_4	Num	4		RSN STPD LAMIVUDINE-PLANNED INTERRUPTION
83	H70230_5	Num	4		REASON STOPPED LAMIVUDINE-NO INSURANCE
84	H70230_6	Num	4		REASON STOPPED LAMIVUDINE-OTHER REASON
85	H70230_S	Num	4		REASON STOPPED LAMIVUDINE-SPECIFY REASON
86	H70_231	Num	4		HIV MEDS: NELFINAVIR
87	H70231_1	Num	4		REASON STOPPED NELFINAVIR-SIDE EFFECT
88	H70231_2	Num	4		REASON STOPPED NELFINAVIR-WASN'T WORKING
89	H70231_3	Num	4		REASON STOPPED NELFINAVIR-CHANGED TO NEW
90	H70231_4	Num	4		REASON STOPPED NELFINAVIR-PLANNED INTERR
91	H70231_5	Num	4		REASON STOPPED NELFINAVIR-NO INSURANCE
92	H70231_6	Num	4		REASON STOPPED NELFINAVIR-OTHER REASON
93	H70231_S	Num	4		REASON STOPPED NELFINAVIR-SPECIFY REASON
94	H70_232	Num	4		HIV MEDS: NEVIRAPINE
95	H70232_1	Num	4		REASON STOPPED NEVIRAPINE-SIDE EFFECT
96	H70232_2	Num	4		REASON STOPPED NEVIRAPINE-WASN'T WORKING
97	H70232_3	Num	4		REASON STOPPED NEVIRAPINE-CHANGED TO NEW
98	H70232_4	Num	4		REASON STOPPED NEVIRAPINE-PLANNED INTERR
99	H70232_5	Num	4		REASON STOPPED NEVIRAPINE-NO INSURANCE
100	H70232_6	Num	4		REASON STOPPED NEVIRAPINE-OTHER REASON
101	H70232_S	Num	4		REASON STOPPED NEVIRAPINE-SPECIFY REASON
102	H70_233	Num	4		HIV MEDS: RITONAVIR
103	H70233_1	Num	4		REASON STOPPED RITONAVIR-SIDE EFFECT
104	H70233_2	Num	4		REASON STOPPED RITONAVIR-WASN'T WORKING
105	H70233_3	Num	4		REASON STOPPED RITONAVIR-CHANGED TO NEW
106	H70233_4	Num	4		REASON STOPPED RITONAVIR-PLANNED INTERRU
107	H70233_5	Num	4		REASON STOPPED RITONAVIR-NO INSURANCE
108	H70233_6	Num	4		REASON STOPPED RITONAVIR-OTHER REASON
109	H70233_S	Num	4		REASON STOPPED RITONAVIR-SPECIFY REASON
110	H70_234	Num	4		HIV MEDS: SAQUINAVIR
111	H70234_1	Num	4		REASON STOPPED SAQUINAVIR-SIDE EFFECT
112	H70234_2	Num	4		REASON STOPPED SAQUINAVIR-WASN'T WORKING
113	H70234_3	Num	4		REASON STOPPED SAQUINAVIR-CHANGED TO NEW
114	H70234_4	Num	4		REASON STOPPED SAQUINAVIR-PLANNED INTERR

Num	Variable	Type	Len	Format	Label
115	H70234_5	Num	4		REASON STOPPED SAQUINAVIR-NO INSURANCE
116	H70234_6	Num	4		REASON STOPPED SAQUINAVIR-OTHER REASON
117	H70234_S	Num	4		REASON STOPPED SAQUINAVIR-SPECIFY REASON
118	H70_235	Num	4		HIV MEDS: STAVUDINE
119	H70235_1	Num	4		REASON STOPPED STAVUDINE -SIDE EFFECT
120	H70235_2	Num	4		REASON STOPPED STAVUDINE -WASN'T WORKING
121	H70235_3	Num	4		REASON STOPPED STAVUDINE -CHANGED TO NEW
122	H70235_4	Num	4		REASON STOPPED STAVUDINE -PLANNED INTERR
123	H70235_5	Num	4		REASON STOPPED STAVUDINE -NO INSURANCE
124	H70235_6	Num	4		REASON STOPPED STAVUDINE -OTHER REASON
125	H70235_S	Num	4		REASON STOPPED STAVUDINE -SPECIFY REASON
126	H70_109	Num	4		HIV MEDS: TENOFOVIR
127	H70109_1	Num	4		REASON STOPPED TENOFOVIR -SIDE EFFECT
128	H70109_2	Num	4		REASON STOPPED TENOFOVIR -WASN'T WORKING
129	H70109_3	Num	4		REASON STOPPED TENOFOVIR -CHANGED TO NEW
130	H70109_4	Num	4		REASON STOPPED TENOFOVIR -PLANNED INTERR
131	H70109_5	Num	4		REASON STOPPED TENOFOVIR -NO INSURANCE
132	H70109_6	Num	4		REASON STOPPED TENOFOVIR -OTHER REASON
133	H70109_S	Num	4		REASON STOPPED TENOFOVIR -SPECIFY REASON
134	H70_236	Num	4		HIV MEDS: TRIZAVIR
135	H70236_1	Num	4		REASON STOPPED TRIZAVIR-SIDE EFFECT
136	H70236_2	Num	4		REASON STOPPED TRIZAVIR-WASN'T WORKING
137	H70236_3	Num	4		REASON STOPPED TRIZAVIR-CHANGED TO NEW R
138	H70236_4	Num	4		REASON STOPPED TRIZAVIR-PLANNED INTERRUPT
139	H70236_5	Num	4		REASON STOPPED TRIZAVIR-NO INSURANCE
140	H70236_6	Num	4		REASON STOPPED TRIZAVIR-OTHER REASON
141	H70236_S	Num	4		REASON STOPPED TRIZAVIR-SPECIFY REASON
142	H70_237	Num	4		HIV MEDS: ZALCITABINE
143	H70237_1	Num	4		REASON STOPPED ZALCITABINE-SIDE EFFECT
144	H70237_2	Num	4		REASON STOPPED ZALCITABINE-WASN'T WORKIN
145	H70237_3	Num	4		REASON STOPPED ZALCITABINE-CHANGED TO NE
146	H70237_4	Num	4		REASON STOPPED ZALCITABINE-PLANNED INTER
147	H70237_5	Num	4		REASON STOPPED ZALCITABINE-NO INSURANCE
148	H70237_6	Num	4		REASON STOPPED ZALCITABINE-OTHER REASON
149	H70237_S	Num	4		REASON STOPPED ZALCITABINE-SPECIFY REASO
150	H70_238	Num	4		HIV MEDS: ZIDOVUDINE
151	H70238_1	Num	4		REASON STOPPED ZIDOVUDINE-SIDE EFFECT
152	H70238_2	Num	4		REASON STOPPED ZIDOVUDINE-WASN'T WORKING
153	H70238_3	Num	4		REASON STOPPED ZIDOVUDINE-CHANGED TO NEW

Num	Variable	Type	Len	Format	Label
154	H70238_4	Num	4		REASON STOPPED ZIDOVUDINE-PLANNED INTERR
155	H70238_5	Num	4		REASON STOPPED ZIDOVUDINE-NO INSURANCE
156	H70238_6	Num	4		REASON STOPPED ZIDOVUDINE-OTHER REASON
157	H70238_S	Num	4		REASON STOPPED ZIDOVUDINE-SPECIFY REASON
158	H70_O1	Num	4		HIV MEDS: OTHER SPECIFY 1
159	H70_O1_1	Num	4		REASON STOPPED OTHER SPECIFY 1 SIDE EFFE
160	H70_O1_2	Num	4		REASON STOPPED OTHER SPECIFY 1-WASN'T WO
161	H70_O1_3	Num	4		REASON STOPPED OTHER SPECIFY 1-NEW REGIM
162	H70_O1_4	Num	4		REASON STOPPED OTHER SPECIFY 1-PLANNED I
163	H70_O1_5	Num	4		REASON STOPPED OTHER SPECIFY 1-NO INSURA
164	H70_O1_6	Num	4		REASON STOPPED OTHER SPECIFY 1-OTHER REA
165	H70_O1_S	Num	4		REASON STOPPED OTHER SPECIFY 1-SPECIFY R
166	H70_O2	Num	4		HIV MEDS: OTHER SPECIFY 2
167	H70_O2_1	Num	4		REASON STOPPED OTHER SPECIFY 2 SIDE EFFE
168	H70_O2_2	Num	4		REASON STOPPED OTHER SPECIFY 2-WASN'T WO
169	H70_O2_3	Num	4		REASON STOPPED OTHER SPECIFY 2-NEW REGIM
170	H70_O2_4	Num	4		REASON STOPPED OTHER SPECIFY 2-PLANNED I
171	H70_O2_5	Num	4		REASON STOPPED OTHER SPECIFY 2-NO INSURA
172	H70_O2_6	Num	4		REASON STOPPED OTHER SPECIFY 2-OTHER REA
173	H70_O2_S	Num	4		REASON STOPPED OTHER SPECIFY 2-SPECIFY R
174	H70_A2	Num	4		DIDN'T USE ANY PROPHYLAXIS MEDICATIONS
175	H70A2_1	Num	4		PROPHYLAXIS MEDS: ACYCLOVIR
176	H70A2_2	Num	4		PROPHYLAXIS MEDS: AEROSOLIZED PENTAMIDIN
177	H70A2_3	Num	4		PROPHYLAXIS MEDS: ATOVAQUONE
178	H70A2_4	Num	4		PROPHYLAXIS MEDS: AZITHROMYCIN
179	H70A2_5	Num	4		PROPHYLAXIS MEDS: CLARITHROMYCIN
180	H70A2_6	Num	4		PROPHYLAXIS MEDS: DAPSONE
181	H70A2_7	Num	4		PROPHYLAXIS MEDS: FAMCICLOVIR
182	H70A2_8	Num	4		PROPHYLAXIS MEDS: FLUCONAZOLE
183	H70A2_9	Num	4		PROPHYLAXIS MEDS: GANCICLOVIR
184	H70A2_10	Num	4		PROPHYLAXIS MEDS: RIFABUTIN
185	H70A2_11	Num	4		PROPHYLAXIS MEDS: TRIMETHOPRIM
186	H70A2_12	Num	4		PROPHYLAXIS MEDS: VALACYCLOVIR
187	H70A2_O1	Num	4		PROPHYLAXIS MEDS: OTHER HIV DRUG-1
188	H70A2_O2	Num	4		PROPHYLAXIS MEDS: OTHER HIV DRUG-2
189	H70A2_O3	Num	4		PROPHYLAXIS MEDS: OTHER HIV DRUG-3
190	H70A2_O4	Num	4		PROPHYLAXIS MEDS: OTHER HIV DRUG-4
191	H70A2_O5	Num	4		PROPHYLAXIS MEDS: OTHER HIV DRUG-5
192	H70_A3	Num	4		DIDN'T USE ANY HCV MEDS

Num	Variable	Type	Len	Format	Label
193	H70A3_1	Num	4		HCV MEDICATIONS: INTRON
194	H70A3_2	Num	4		HCV MEDICATIONS: ROFERON
195	H70A3_3	Num	4		HCV MEDICATIONS: INFERGEN
196	H70A3_4	Num	4		HCV MEDICATIONS: STANDARD INTERFERON
197	H70A3_5	Num	4		HCV MEDICATIONS: REBETOL
198	H70A3_6	Num	4		HCV MEDICATIONS: VIRAZOLE
199	H70A3_7	Num	4		HCV MEDICATIONS: REBETRON
200	H70A3_8	Num	4		HCV MEDICATIONS: PEG-INTRON
201	H70A3_9	Num	4		HCV MEDICATIONS: PEGASYS
202	H70_A4	Num	4		DIDN'T USE ANY OTHER PRESCRIPTION MED
203	H70A4_1	Num	4		OTHER PRESCRIPTION MEDS: VIOXX
204	H70A4_2	Num	4		OTHER PRESCRIPTION MEDS: CELEBREX
205	H70A4_3	Num	4		OTHER PRESCRIPTION MEDS: VICODIN
206	H70A4_4	Num	4		OTHER PRESCRIPTION MEDS: TYLENOL #3
207	H70A4_5	Num	4		OTHER PRESCRIPTION MEDS: PERCOCET
208	H70A4_6	Num	4		OTHER PRESCRIPTION MEDS: OXYIR
209	H70A4_7	Num	4		OTHER PRESCRIPTION MEDS: LASIX
210	H70A4_8	Num	4		OTHER PRESCRIPTION MEDS: PRILOSEC
211	H70A4_9	Num	4		OTHER PRESCRIPTION MEDS: ZOLOFT
212	H70A4_10	Num	4		OTHER PRESCRIPTION MEDS: NEURONTIN
213	H70A4_O1	Num	4		OTHER PRESCRIPTION MEDS: SPECIFY 1
214	H70A4_O2	Num	4		OTHER PRESCRIPTION MEDS: SPECIFY 2
215	H70A4_O3	Num	4		OTHER PRESCRIPTION MEDS: SPECIFY 3
216	H70A4_O4	Num	4		OTHER PRESCRIPTION MEDS: SPECIFY 4
217	H70A4_O5	Num	4		OTHER PRESCRIPTION MEDS: SPECIFY 5
218	H70A4_O6	Num	4		OTHER PRESCRIPTION MEDS: SPECIFY 6
219	H70A4_O7	Num	4		OTHER PRESCRIPTION MEDS: SPECIFY 7
220	H70A4_O8	Num	4		OTHER PRESCRIPTION MEDS: SPECIFY 8
221	H70A4_O9	Num	4		OTHER PRESCRIPTION MEDS: SPECIFY 9
222	H70A4O10	Num	4		OTHER PRESCRIPTION MEDS: SPECIFY 10
223	H70_A5	Num	4		DIDN'T USE HERBS/DRUGS
224	H70A5_1	Num	4		HERBAL SUPPLEMENTS: ALCHEMILLA
225	H70A5_2	Num	4		HERBAL SUPPLEMENTS: CHAPARRAL
226	H70A5_3	Num	4		HERBAL SUPPLEMENTS: CHONDROITIN
227	H70A5_4	Num	4		HERBAL SUPPLEMENTS: EVENING PRIMROSE
228	H70A5_5	Num	4		HERBAL SUPPLEMENTS: EPHEDRA
229	H70A5_6	Num	4		HERBAL SUPPLEMENTS: FEWERFEW
230	H70A5_7	Num	4		HERBAL SUPPLEMENTS: FISH OIL
231	H70A5_8	Num	4		HERBAL SUPPLEMENTS: GENTIAN

Num	Variable	Type	Len	Format	Label
232	H70A5_9	Num	4		HERBAL SUPPLEMENTS: GERMANDER
233	H70A5_10	Num	4		HERBAL SUPPLEMENTS: GINKGO
234	H70A5_11	Num	4		HERBAL SUPPLEMENTS: GINSENG
235	H70A5_12	Num	4		HERBAL SUPPLEMENTS: GINGER
236	H70A5_13	Num	4		HERBAL SUPPLEMENTS: GLUCOSAMINE
237	H70A5_14	Num	4		HERBAL SUPPLEMENTS: JU BU HUAN
238	H70A5_15	Num	4		HERBAL SUPPLEMENTS: MILK THISTLE
239	H70A5_16	Num	4		HERBAL SUPPLEMENTS: SENNA
240	H70A5_17	Num	4		HERBAL SUPPLEMENTS: SHARK CARTILAGE
241	H70A5_18	Num	4		HERBAL SUPPLEMENTS: SCURELLARIA
242	H70A5_19	Num	4		HERBAL SUPPLEMENTS: ST. JOHN;S WART
243	H70A5_H1	Num	4		HERBAL SUPPLEMENTS: SPECIFY 1
244	H70A5_H2	Num	4		HERBAL SUPPLEMENTS: SPECIFY 2
245	H70A5_H3	Num	4		HERBAL SUPPLEMENTS: SPECIFY 3
246	H70A5_H4	Num	4		HERBAL SUPPLEMENTS: SPECIFY 4
247	H70A5_H5	Num	4		HERBAL SUPPLEMENTS: SPECIFY 5
248	H70A5_H6	Num	4		HERBAL SUPPLEMENTS: SPECIFY 6
249	H70A5_H7	Num	4		HERBAL SUPPLEMENTS: SPECIFY 7
250	H70A5_H8	Num	4		HERBAL SUPPLEMENTS: SPECIFY 8
251	H70A5_H9	Num	4		HERBAL SUPPLEMENTS: SPECIFY 9
252	H70A5H10	Num	4		HERBAL SUPPLEMENTS: SPECIFY 10
253	H70A5_O1	Num	4		OTHER DRUGS: SPECIFY 1
254	H70A5_O2	Num	4		OTHER DRUGS: SPECIFY 2
255	H70A5_O3	Num	4		OTHER DRUGS: SPECIFY 3
256	H70A5_O4	Num	4		OTHER DRUGS: SPECIFY 4
257	H70A5_O5	Num	4		OTHER DRUGS: SPECIFY 5
258	H70A5_O6	Num	4		OTHER DRUGS: SPECIFY 6
259	H70A5_O7	Num	4		OTHER DRUGS: SPECIFY 7
260	H70A5_O8	Num	4		OTHER DRUGS: SPECIFY 8
261	H70A5_O9	Num	4		OTHER DRUGS: SPECIFY 9
262	H70A5O10	Num	4		OTHER DRUGS: SPECIFY 10
263	H70_B1	Num	4		REDUCE AMOUNT OF TIME SPENT ON WORK?
264	H70_B2	Num	4		ACCOMPLISH LESS THAN YOU WOULD LIKE?
265	H70_B3	Num	4		LIMITED IN THE KIND OF WORK/ACTIVITIES?
266	H70_B4	Num	4		HAVE DIFFICULTY PERFORMING WORK/ACTIVITI
267	H70_B5	Num	4		PAIN IN YOUR JOINTS PAST 4 WEEKS
268	H70_B6	Num	4		PAIN OF OTHER TYPES PAST 4 WEEKS
269	H70_B7	Num	4		HOW MUCH DID PAIN INTERFERE WITH NORMAL
270	H70_C	Num	4		DIDN'T USE ACETAMINOPHEN SINCE LAST VISI

Num	Variable	Type	Len	Format	Label
271	H70_C1	Num	4		PAST MONTH: HOW OFTEN TAKEN ACETAMINOPHE
272	H70_C2	Num	4		PAST 3 MONTHS: # ACETAMINOPHEN A WEEK
273	H70_C3	Num	4		PAST 3 MONTHS: MAX # ACETAMINOPHEN A WEE
274	H70_C4	Num	4		3-12 MONTHS: # ACETAMINOPHEN A WEEK
275	H70_C5	Num	4		3-12 MONTHS: MAX # ACETAMINOPHEN A WEEK
276	H70C6_1	Num	4		PAST TWO WEEKS: COX-2 INHIBITOR TAKEN-NO
277	H70C6_2	Num	4		PAST TWO WEEKS: COX-2 INHIBITOR TAKEN-VI
278	H70C6_3	Num	4		PAST TWO WEEKS: COX-2 INHIBITOR TAKEN-CE
279	H70C6O_1	Num	4		PAST TWO WEEKS: COX-2 INHIBITOR TAKEN-SP
280	H70C6O_2	Num	4		PAST TWO WEEKS: COX-2 INHIBITOR TAKEN-SP
281	H70C6O_3	Num	4		PAST TWO WEEKS: COX-2 INHIBITOR TAKEN-SP
282	H70C6O_4	Num	4		PAST TWO WEEKS: COX-2 INHIBITOR TAKEN-SP
283	H70C6O_5	Num	4		PAST TWO WEEKS: COX-2 INHIBITOR TAKEN-SP
284	H70C6O_6	Num	4		PAST TWO WEEKS: COX-2 INHIBITOR TAKEN-SP
285	H70C6O_7	Num	4		PAST TWO WEEKS: COX-2 INHIBITOR TAKEN-SP
286	H70C6O_8	Num	4		PAST TWO WEEKS: COX-2 INHIBITOR TAKEN-SP
287	H70C6O_9	Num	4		PAST TWO WEEKS: COX-2 INHIBITOR TAKEN-SP
288	H70C6O10	Num	4		PAST TWO WEEKS: COX-2 INHIBITOR TAKEN-SP
289	H70_C6A	Num	4		FOR HOW MANY MONTHS USED COX-2 INHIBITOR
290	H70_C7	Num	4		PAST 2 WEEKS: TAKE OTHER NSAIDS
291	H70_C7A	Num	4		FOR HOW MANY MONTHS USED OTHER NSAIDS
292	H70_CNN	Num	4		DIDN'T USE NSAIDS SINCE LAST VISIT
293	H70_C8	Num	4		PAST 3 MONTHS: # NSAIDS A WEEK
294	H70_C9	Num	4		PAST 3 MONTHS: MAX # NSAIDS A WEEK
295	H70_C10	Num	4		3-12 MONTHS: # NSAIDS A WEEK
296	H70_C11	Num	4		3-12 MONTHS: MAX # NSAIDS A WEEK
297	H70_CNC	Num	4		DIDN'T USE NARCOTICS SINCE LAST VISIT
298	H70_C12	Num	4		PAST MONTH: HOW OFTEN TAKEN CODEINE/OTHE
299	H70_C13P	Num	4		PAST 3 MONTHS: # CODEINE/OTHER PILLS A W
300	H70_C13I	Num	4		PAST 3 MONTHS: # CODEINE/OTHER INJECTION
301	H70_C14P	Num	4		PAST 3 MONTHS: MAX # CODEINE/OTHER PILLS
302	H70_C14I	Num	4		PAST 3 MONTHS: MAX # CODEINE/OTHER INJEC
303	H70_C15P	Num	4		3-12 MONTHS: # CODEINE/OTHER PILLS A WEE
304	H70_C15I	Num	4		3-12 MONTHS: # CODEINE/OTHER INJECTIONS
305	H70_C16P	Num	4		3-12 MONTHS: MAX # CODEINE/OTHER PILLS A
306	H70_C16I	Num	4		3-12 MONTHS: MAX # CODEINE/OTHER INJECTI
307	H70_D1	Num	4		PAST YEAR SMOKED CIGARETTES REGULARLY
308	H70_D2	Num	4		PAST YEAR HAD A DRINK CONTAINING ALCOHOL
309	H70_D3	Num	4		PAST 3 MONTH, # OF DRINKS PER WEEK

Num	Variable	Type	Len	Format	Label
310	H70_D4	Num	4		PAST 3 MONTH, MAX # OF DRINKS PER DAY
311	H70_D5	Num	4		3-12 MONTHS: # OF DRINKS PER WEEK
312	H70_D6	Num	4		3-12 MONTHS: MAX # OF DRINKS PER DAY
313	H70_D7	Num	4		UNABLE TO STOP DRINKING
314	H70_D8	Num	4		FAILED TO DO SOMETHING YOU WERE EXPECTED
315	H70_D9	Num	4		NEEDED A DRINK FIRST THING IN THE MORNIN
316	H70_D10	Num	4		FELT GUILTY AFTER DRINKING
317	H70_D11	Num	4		UNABLE TO REMEMBER AFTER DRINKING
318	H70_D12	Num	4		YOU OR SOMEONE BEEN INJURED DUE TO DRINK
319	H70_D13	Num	4		RELATIVE CONCERNED ABOUT YOUR DRINKING
320	H70_E1	Num	4		PAST 2 WKS: ABDOMINAL BLOATING
321	H70_E2	Num	4		PAST 2 WKS: TIRED OR FATIGUED
322	H70_E3	Num	4		PAST 2 WKS: BODILY PAIN
323	H70_E4	Num	4		PAST 2 WKS: FELT SLEEPING DURING THE DAY
324	H70_E5	Num	4		PAST 2 WKS: ABDOMINAL PAIN
325	H70_E6	Num	4		PAST 2 WKS: SHORTNESS OF BREATH
326	H70_E7	Num	4		PAST 2 WKS: NOT ABLE TO EAT MUCH
327	H70_E8	Num	4		PAST 2 WKS: DECREASED STRENGTH
328	H70_E9	Num	4		PAST 2 WKS: TROUBLE LIFTING HEAVY OBJECT
329	H70_E10	Num	4		PAST 2 WKS: FELT ANXIOUS
330	H70_E11	Num	4		PAST 2 WKS: DECREASED LEVEL OF ENERGY
331	H70_E12	Num	4		PAST 2 WKS: FELT UNHAPPY
332	H70_E13	Num	4		PAST 2 WKS: FELT DROWSY
333	H70_E14	Num	4		PAST 2 WKS: LIMITATION OF YOUR DIET
334	H70_E15	Num	4		PAST 2 WKS: BEEN IRRITABLE
335	H70_E16	Num	4		PAST 2 WKS: DIFFICULTY SLEEPING
336	H70_E17	Num	4		PAST 2 WKS: ABDOMINAL DISCOMFORT
337	H70_E18	Num	4		PAST 2 WKS: WORRIED/IMPACT HEPATIC C VIR
338	H70_E19	Num	4		PAST 2 WKS: MOOD SWINGS
339	H70_E20	Num	4		PAST 2 WKS: UNABLE TO FALL ASLEEP AT NIG
340	H70_E21	Num	4		PAST 2 WKS: MUSCLE CRAMPS
341	H70_E22	Num	4		PAST 2 WKS: WORRIED ABOUT YOUR SYMPTOMS
342	H70_E23	Num	4		PAST 2 WKS: DRY MOUTH
343	H70_E24	Num	4		PAST 2 WKS: FELT DEPRESSED
344	H70_E25	Num	4		PAST 2 WKS: WORRIED VIRUS INFECTION GETT
345	H70_E26	Num	4		PAST 2 WKS: PROBLEM CONCENTRATING
346	H70_E27	Num	4		PAST 2 WKS: TROUBLED BY ITCHING
347	H70_E28	Num	4		PAST 2 WKS: WORRIED ABOUT NOT FEELING BE
348	H70_E29	Num	4		PAST 2 WKS: CONCERNED AVAILABILITY OF LI

Num	Variable	Type	Len	Format	Label
349	H70_DT	Num	4	8.	DATE FORM COMPLETED (SAS DATE): Converted to days since reference date
350	H70_DF	Num	4		DATE FORM COMPLETED (IMPUTE FLAG)
351	F70ABDOM	Num	4	6.2	SUMMARY QUALITY OF LIFE: ABDOMINAL
352	F70FATIG	Num	4	6.2	SUMMARY QUALITY OF LIFE: FATIGUE
353	F70SYSTEM	Num	4	6.2	SUMMARY QUALITY OF LIFE: SYSTEM
354	F70ACTIV	Num	4	6.2	SUMMARY QUALITY OF LIFE: ACTIVITY
355	F70EMOTN	Num	4	6.2	SUMMARY QUALITY OF LIFE: EMOTION
356	F70WORRY	Num	4	6.2	SUMMARY QUALITY OF LIFE: WORRY
357	H70_E1R	Num	4		RECODED VALUE OF H70_E1 FOR QOL CALC.
358	H70_E5R	Num	4		RECODED VALUE OF H70_E5 FOR QOL CALC.
359	H70_E17R	Num	4		RECODED VALUE OF H70_E17 FOR QOL CALC.
360	H70_E2R	Num	4		RECODED VALUE OF H70_E2 FOR QOL CALC.
361	H70_E4R	Num	4		RECODED VALUE OF H70_E4 FOR QOL CALC.
362	H70_E8R	Num	4		RECODED VALUE OF H70_E8 FOR QOL CALC.
363	H70_E11R	Num	4		RECODED VALUE OF H70_E11 FOR QOL CALC.
364	H70_E13R	Num	4		RECODED VALUE OF H70_E13 FOR QOL CALC.
365	H70_E3R	Num	4		RECODED VALUE OF H70_E3 FOR QOL CALC.
366	H70_E6R	Num	4		RECODED VALUE OF H70_E6 FOR QOL CALC.
367	H70_E21R	Num	4		RECODED VALUE OF H70_E21 FOR QOL CALC.
368	H70_E23R	Num	4		RECODED VALUE OF H70_E23 FOR QOL CALC.
369	H70_E27R	Num	4		RECODED VALUE OF H70_E27 FOR QOL CALC.
370	H70_E7R	Num	4		RECODED VALUE OF H70_E7 FOR QOL CALC.
371	H70_E9R	Num	4		RECODED VALUE OF H70_E9 FOR QOL CALC.
372	H70_E14R	Num	4		RECODED VALUE OF H70_E14 FOR QOL CALC.
373	H70_E10R	Num	4		RECODED VALUE OF H70_E10 FOR QOL CALC.
374	H70_E12R	Num	4		RECODED VALUE OF H70_E12 FOR QOL CALC.
375	H70_E15R	Num	4		RECODED VALUE OF H70_E15 FOR QOL CALC.
376	H70_E16R	Num	4		RECODED VALUE OF H70_E16 FOR QOL CALC.
377	H70_E19R	Num	4		RECODED VALUE OF H70_E19 FOR QOL CALC.
378	H70_E20R	Num	4		RECODED VALUE OF H70_E20 FOR QOL CALC.
379	H70_E24R	Num	4		RECODED VALUE OF H70_E24 FOR QOL CALC.
380	H70_E26R	Num	4		RECODED VALUE OF H70_E26 FOR QOL CALC.
381	H70_E18R	Num	4		RECODED VALUE OF H70_E18 FOR QOL CALC.
382	H70_E22R	Num	4		RECODED VALUE OF H70_E22 FOR QOL CALC.
383	H70_E25R	Num	4		RECODED VALUE OF H70_E25 FOR QOL CALC.
384	H70_E28R	Num	4		RECODED VALUE OF H70_E28 FOR QOL CALC.
385	H70_E29R	Num	4		RECODED VALUE OF H70_E29 FOR QOL CALC.
386	ILLEGAL_DRUGS	Num	8		Use of Marijuana, Speed, Heroin, MDMA, Phencyclidine, Anabolic Steroids, Glues/Solvents, or Cocaine

Num	Variable	Type	Len	Format	Label
387	ENTRY_DT	Num	8	8.	ENTRY_DT: Converted to days since reference date
388	H70_O1F_MONTHS	Num	8		DATE FIRST USED OTHER SPECIFY 1 - Converted to months since reference point
389	H70_O1L_MONTHS	Num	8		DATE LAST USED OTHER SPECIFY 1 - Converted to months since reference point
390	H70_O2F_MONTHS	Num	8		DATE FIRST USED OTHER SPECIFY 2 - Converted to months since reference point
391	H70_O2L_MONTHS	Num	8		DATE LAST USED OTHER SPECIFY 2 - Converted to months since reference point
392	H70109F_MONTHS	Num	8		DATE FIRST USED TENOFOVIR - Converted to months since reference point
393	H70109L_MONTHS	Num	8		DATE LAST USED TENOFOVIR - Converted to months since reference point
394	H70221F_MONTHS	Num	8		DATE FIRST USED ABACAVIR- Converted to months since reference point
395	H70221L_MONTHS	Num	8		DATE LAST USED ABACAVIR - Converted to months since reference point
396	H70222F_MONTHS	Num	8		DATE FIRST USED AMPRENAVIR - Converted to months since reference point
397	H70222L_MONTHS	Num	8		DATE LAST USED AMPRENAVIR - Converted to months since reference point
398	H70223F_MONTHS	Num	8		DATE FIRST USED COMBIVIR - Converted to months since reference point
399	H70223L_MONTHS	Num	8		DATE LAST USED COMBIVIR - Converted to months since reference point
400	H70224F_MONTHS	Num	8		DATE FIRST USED DELAVIRDINE - Converted to months since reference point
401	H70224L_MONTHS	Num	8		DATE LAST USED DELAVIRDINE - Converted to months since reference point
402	H70225F_MONTHS	Num	8		DATE FIRST USED DIDANOSINE - Converted to months since reference point
403	H70225L_MONTHS	Num	8		DATE LAST USED DIDANOSINE - Converted to months since reference point
404	H70226F_MONTHS	Num	8		DATE FIRST USED EFAVIRENZ- Converted to months since reference point
405	H70226L_MONTHS	Num	8		DATE LAST USED EFAVIRENZ - Converted to months since reference point
406	H70227F_MONTHS	Num	8		DATE FIRST USED HYDROXYUREA- Converted to months since reference point
407	H70227L_MONTHS	Num	8		DATE LAST USED HYDROXYUREA - Converted to months since reference point
408	H70228F_MONTHS	Num	8		DATE FIRST USED INDINAVIR - Converted to months since reference point
409	H70228L_MONTHS	Num	8		DATE LAST USED INDINAVIR - Converted to months since reference point
410	H70229F_MONTHS	Num	8		DATE FIRST USED LOPINAVIR/RITONAVIR - Converted to months since reference point
411	H70229L_MONTHS	Num	8		DATE LAST USED LOPINAVIR/RITONAVIR - Converted to months since reference point
412	H70230F_MONTHS	Num	8		DATE FIRST USED LAMIVUDINE- Converted to months since reference point
413	H70230L_MONTHS	Num	8		DATE LAST USED LAMIVUDINE - Converted to months since reference point
414	H70231F_MONTHS	Num	8		DATE FIRST USED NELFINAVIR - Converted to months since reference point
415	H70231L_MONTHS	Num	8		DATE LAST USED NELFINAVIR - Converted to months since reference point
416	H70232F_MONTHS	Num	8		DATE FIRST USED NEVIRAPINE - Converted to months since reference point
417	H70232L_MONTHS	Num	8		DATE LAST USED NEVIRAPINE - Converted to months since reference point
418	H70233F_MONTHS	Num	8		DATE FIRST USED RITONAVIR -- Converted to months since reference point
419	H70233L_MONTHS	Num	8		DATE LAST USED RITONAVIR - Converted to months since reference point
420	H70234F_MONTHS	Num	8		DATE FIRST USED SAQUINAVIR - Converted to months since reference point
421	H70234L_MONTHS	Num	8		DATE LAST USED SAQUINAVIR - Converted to months since reference point

Num	Variable	Type	Len	Format	Label
422	H70235F_MONTHS	Num	8		DATE FIRST USED STAVUDINE - Converted to months since reference point
423	H70235L_MONTHS	Num	8		DATE LAST USED STAVUDINE - Converted to months since reference point
424	H70236F_MONTHS	Num	8		DATE FIRST USED TRIZAVIR - Converted to months since reference point
425	H70236L_MONTHS	Num	8		DATE LAST USED TRIZAVIR - Converted to months since reference point
426	H70237F_MONTHS	Num	8		DATE FIRST USED ZALCITABINE - Converted to months since reference point
427	H70237L_MONTHS	Num	8		DATE LAST USED ZALCITABINE - Converted to months since reference point
428	H70238F_MONTHS	Num	8		DATE FIRST USED ZIDOVUDINE - Converted to months since reference point
429	H70238L_MONTHS	Num	8		DATE LAST USED ZIDOVUDINE - Converted to months since reference point
430	SUBJ_ID	Char	8		MHCS SUBJECT IDENTIFIER

Data Set Name: mhcs_ii_f71.sas7bdat

Num	Variable	Type	Len	Format	Informat	Label
1	ASCCODE	Num	4			Q15. ASCITES UNTREATED REASON SPEC. CODE
2	NEUROCD	Num	4			OTHER NEUROLOGICAL ABNORMALITIES CODE
3	VISITNUM	Num	4	1.		VISIT NUMBER
4	NoBM	Num	4	4.	4.	BASIC MEASUREMENTS NOT OBTAINED
5	feet	Num	4	2.	19.	Q1. FEET (HEIGHT)
6	inches	Num	4	3.	19.	Q1. INCHES (HEIGHT)
7	cms	Num	4	6.	19.	Q1. CENTIMETERS (HEIGHT)
8	pounds	Num	4	5.1	19.	Q2. WEIGHT IN POUNDS
9	kgs	Num	4	5.1	19.	Q2. WEIGHT IN KILOGRAMS
10	fahrenheit	Num	4	5.1		Q3. TEMPERATURE IN FAHRENHEIT
11	celsius	Num	4	5.1		Q3. TEMPERATURE IN CELSIUS
12	systolic	Num	4	6.	19.	Q4. BLOOD PRESSURE - SYSTOLIC
13	diastolic	Num	4	6.	19.	Q4. BLOOD PRESSURE - DIASTOLIC
14	blood	Num	4	1.	4.	Q5. URINALYSIS - BLOOD LEVEL
15	protein	Num	4	1.	4.	Q6. URINALYSIS - PROTEIN LEVEL
16	nitrite	Num	4	1.	4.	Q7. URINALYSIS - NITRITE LEVEL
17	a_acid	Num	4	1.	4.	Q8. URINALYSIS - ASCORBIC ACID LEVEL
18	glucose	Num	4	1.	4.	Q9. URINALYSIS - GLUCOSE LEVEL
19	ph	Num	4	1.	4.	Q10. URINALYSIS - pH LEVEL
20	hem_arth	Num	4	1.	4.	Q11. HEMOPHILIC ARTHROPATHY
21	HEMARTH1	Num	4	4.	4.	Q11. HAS JOINT REPLACEMENT
22	HEMARTH2	Num	4	4.	4.	Q11. JOINT AFFECTED NOW
23	HEMARTH3	Num	4	4.	4.	Q11. TWO OR MORE JOINTS
24	kar_perf	Num	4	1.	4.	Q12. KARNOFSKY PERFORMANCE
25	affected	Num	4	1.	4.	Q13. KAR PERF AFFECTED BY HEM ARTH
26	fatigue	Num	4	1.	4.	Q14. FATIGUE LEVEL
27	ascites	Num	4	1.	4.	Q15. ASCITES
28	hepatome	Num	4	1.	4.	Q16. HEPATOMEGALY
29	splenome	Num	4	1.	4.	Q17. SPLENOMEGALY
30	splnsize	Num	4	19.	19.	Q17. SPLEEN'S SIZE (IN CM.)
31	h_zoster	Num	4	1.	4.	Q18. HERPES ZOSTER (SHINGLES)
32	lym_none	Num	4	2.	4.	Q19. LYMPHADENOPATHY - NONE
33	lym_cerv	Num	4	1.	4.	Q19. LYMPHADENOPATHY - CERVICAL
34	cervsite	Num	4	2.	19.	Q19. CERVICAL LYMPH - # SITES
35	cervshot	Num	4	1.	4.	Q19. CERVICAL LYMPH - SHOTTY
36	lym_othe	Num	4	1.	4.	Q19. LYMPHADENOPATHY - OTHER

Num	Variable	Type	Len	Format	Informat	Label
37	lgstnode	Num	4	2.	19.	Q19a.DIAMETER OF LARGEST LYMPH NODE
38	nocond	Num	4	4.	4.	NOTHING CHECKED FOR Q.20
39	p_neurop	Num	4	1.	4.	Q20. PERIPHERAL NEUROPATHY
40	spider	Num	4	1.	4.	Q20. SPIDER ANGIOMATA
41	neuro_ab	Num	4	1.	4.	Q20. OTHER NEUROLOGICAL ABNORMAL
42	palmare	Num	4	1.	4.	Q20. PALMAR ERYTHEMA
43	wgt_loss	Num	4	1.	4.	Q20. UNEXPLAINED WEIGHT LOSS
44	edema	Num	4	1.	4.	Q20. LOWER EXTREMITY EDEMA
45	memory	Num	4	1.	4.	Q20. MEMORY OR CONCENTRATION PROBLEMS
46	depressn	Num	4	1.	4.	Q20. CHRONIC DEPRESSION
47	gynecom	Num	4	1.	4.	Q20. GYNECOMASTIA
48	arthralg	Num	4	1.	4.	Q20. ARTHRALGIAS/ARTHRITIS
49	nausea	Num	4	1.	4.	Q20. NAUSEA
50	tenderns	Num	4	1.	4.	Q20. RIGHT UP QUAD ABD/LIVER TENDERNESS
51	i_sclera	Num	4	1.	4.	Q20. ICTERIC SCLERA
52	jaundice	Num	4	1.	4.	Q20. JAUNDICE
53	atrophy	Num	4	1.	4.	Q20. TEMPORAL MUSCLE ATROPHY
54	visit_DT	Num	4	8.		FOLLOW UP PE VISIT DATE (SAS DATE): Converted to days since reference date
55	visit_DF	Num	4			FOLLOW UP PE VISIT DATE IMPUTE FLAG
56	SUBJ_ID	Char	8			MHCS SUBJECT IDENTIFIER

Data Set Name: mhcs_ii_f72.sas7bdat

Num	Variable	Type	Len	Format	Informat	Label
1	OLDHCV1	Num	4			Q16. OLD code assigned to other HCV
2	OLDHCV2	Num	4			Q16. OLD code assigned to other HCV
3	GENDEFCD	Num	4			Q4A. Code assigned to other genetic def.
4	q7bags	Num	4			Q7. # of bags
5	q7mls	Num	4			Q7. Total MLS
6	DRUGCD1	Num	4			Q16. Code assigned to other brand used (
7	DRUGCD2	Num	4			Q17. Code assigned to other brand used (
8	DRUGCD3	Num	4			Q18. Code assigned to other brand used (
9	DRUGCD4	Num	4			Q19. Code assigned to other brand used (
10	Q1	Num	4	4.	4.	Q1. Subject status
11	Q1REASON	Num	4	4.	4.	Q1. Reason withdrew from study
12	Q1REASCD	Num	4	6.	6.	Q1. Reason withdrew -Other Sp. CODE
13	CNCRCD	Num	4	6.	6.	Q1B. Code assigned to other cancer
14	Q1c	Num	4	6.	6.	Q1C. Autopsy performed
15	Q1d	Num	4	6.	6.	Q1D. Liver Tissue obtained
16	Q1e1	Num	4	4.	4.	Q1E1. Source=death certificate
17	Q1e2	Num	4	4.	4.	Q1E2. Source=medical record
18	Q1e3	Num	4	4.	4.	Q1E3. Source=spouse or relative
19	Q1e4	Num	4	4.	4.	Q1E4. Source=non-relative
20	Q1e5	Num	4	4.	4.	Q1E5. Source=obituary
21	Q1e6	Num	4	4.	4.	Q1E6. Source=other
22	Q2a	Num	4	4.	4.	Q2A. After or same as date of enrollment
23	Q4	Num	4	4.	4.	Q4. Is hemophilia genetic defect correct
24	Q4a	Num	4	6.	6.	Q4A. What is hemophilia genetic defect?
25	Q5a	Num	4	4.	4.	Q5A. Clotting Factor Products-None
26	Q5b	Num	4	4.	4.	Q5B. Clotting Factor Products-Recombin.
27	Q5c	Num	4	4.	4.	Q5C. Clotting Factor Products-Monoclonal
28	Q5d	Num	4	4.	4.	Q5D. Clotting Factor Products-High Pur
29	Q5e	Num	4	4.	4.	Q5E. Clotting Factor Products-Int Purity
30	Q5f	Num	4	4.	4.	Q5F. Clotting Factor Products-Cryoprecip
31	Q5g	Num	4	4.	4.	Q5G. Other Blood Components
32	Q6_none	Num	4	4.	4.	Q6. No factor concentrate was received
33	Q6_unit	Num	4	4.	4.	Q6. Units of factor concentrate KNOWN
34	Q6_mg	Num	4	4.	4.	Q6. Micrograms of factor concentrate
35	Q6_unk	Num	4	4.	4.	Q6. UNKNOWN amount of factor concentrate
36	Q6_units	Num	4	19.	19.	Q6. Number of units factor concentrate

Num	Variable	Type	Len	Format	Informat	Label
37	Q6_micro	Num	4	19.	19.	Q6. No. of micrograms of factor conc.
38	Q6a	Num	4	4.	4.	Q6A. Basis factor was administered
39	Q7	Num	4	6.	6.	Q7. How many units of cryo did sub rec
40	Q8	Char	3	\$3.	\$3.	Q8. HBV vaccine since 1st Follow-Up vis?
41	Q9	Num	4	4.	4.	Q9. Is HBV chron carrier stat accurate?
42	Q9a	Num	4	6.	6.	Q9A. HBV chronic carrier stat of subj
43	Q10	Num	4	6.	6.	Q10. Vaccinated for hep A since 1st FU
44	Q11	Num	4	6.	6.	Q11. Current HCV antibody status
45	Q12	Num	4	6.	6.	Q12. HIV status
46	Q13	Num	4	4.	4.	Q13. AIDS-defining condition
47	Q13a1	Num	4	4.	4.	Q13A1. CD4 <200 cells/ul or <14%
48	Q13a2	Num	4	4.	4.	Q13A2. CMV (not liver, spleen, lymph)
49	Q13a3	Num	4	4.	4.	Q13A3. Candidiasis of esophagus or lungs
50	Q13a4	Num	4	4.	4.	Q13A4. Cervical cancer, invasive
51	Q13a5	Num	4	4.	4.	Q13A5. Coccidioidmycosis, extrapulmonary
52	Q13a6	Num	4	4.	4.	Q13A6. Cryptococcosis, extrapulmonary
53	Q13a7	Num	4	4.	4.	Q13A7. Cryptosporidiosis with diarrhea f
54	Q13a8	Num	4	4.	4.	Q13A8. Herpes simplex, ulcer for > 1 mon
55	Q13a9	Num	4	4.	4.	Q13A9. Herpes simplex in lungs or esopha
56	Q13a10	Num	4	4.	4.	Q13A10. Histoplasmosis, extrapulmonary
57	Q13a11	Num	4	4.	4.	Q13A11. HIV encephalopathy/dementia
58	Q13a12	Num	4	4.	4.	Q13A12. Isosporiasis with diarrhea for >
59	Q13a13	Num	4	4.	4.	Q13A13. Kaposi's syndrome
60	Q13a14	Num	4	4.	4.	Q13A14. Lymphoid interstitial pneumonia
61	Q13a15	Num	4	4.	4.	Q13A15. Lymphoma of the brain (CNS Prima
62	Q13a16	Num	4	4.	4.	Q13A16. Mycobacterium avium (not only lu
63	Q13a17	Num	4	4.	4.	Q13A17. Non-Hodgkin's Lymphoma (not T-c
64	Q13a18	Num	4	4.	4.	Q13A18. Pneumocystis carinii pneumonia (
65	Q13a19	Num	4	4.	4.	Q13A19. Pneumonia, recurrent bacterial (
66	Q13a20	Num	4	4.	4.	Q13A20. Progressive multifocal leukoence
67	Q13a21	Num	4	4.	4.	Q13A21. Pulmonary tuberculosis
68	Q13a22	Num	4	4.	4.	Q13A22. Salmonella septicemia, recurrent
69	Q13a23	Num	4	4.	4.	Q13A23. Toxoplasmosis of the brain
70	Q13a24	Num	4	4.	4.	Q13A24. Wasting syndrome (emaciation,"sl
71	Q13a25	Num	4	4.	4.	Q13A25. Other multiple of recurrent bact
72	Q14a	Num	4	4.	4.	Q14A. HCV related conditions-None
73	Q14b	Num	4	4.	4.	Q14B. Jaundice, persistent > 1 month
74	Q14c	Num	4	4.	4.	Q14C. Ascites (hepatic-related)
75	Q14e	Num	4	4.	4.	Q14E. Esophageal varices

Num	Variable	Type	Len	Format	Informat	Label
76	Q14f	Num	4	4.	4.	Q14F. Bleeding esophageal varices
77	Q14l	Num	4	4.	4.	Q14L. Biopsy proven Cirrhosis
78	HCVCode1	Num	4	6.	6.	Q14. Code assigned to other HCV related
79	HCVCode2	Num	4	6.	6.	Q14. Code assigned to other HCV related
80	Q15	Num	4	6.	6.	Q15. Did subject receive HCV treatment
81	Q16	Num	4	4.	4.	Q16. Was the subject treated at the same
82	Q16a	Num	4	6.	6.	Q16A. Brand used
83	Q16c	Num	4	6.	6.	Q16C. Is subject currently using it?
84	Q16d	Num	4	6.	6.	Q16D. Why is the subject no longer using
85	Q17	Num	4	4.	4.	Q17. Was the subject treated with standa
86	Q17a	Num	4	4.	4.	Q17A. Brand used
87	Q17c	Num	4	4.	4.	Q17C. Is subject currently using it?
88	Q17d	Num	4	4.	4.	Q17D. Why is the subject no longer using
89	Q18	Num	4	4.	4.	Q18. Was the subject treated at the same
90	Q18a1	Num	4	4.	4.	Q18A. Brand used: PEG-Intron
91	Q18a2	Num	4	4.	4.	Q18A. Brand used: Pegasys
92	Q18a3	Num	4	4.	4.	Q18A. Brand used: Rebetol
93	Q18a4	Num	4	4.	4.	Q18A. Brand used: Virazole
94	Q18a5	Num	4	4.	4.	Q18A. Brand used: Other
95	Q18c	Num	4	4.	4.	Q18C. Is subject currently using it?
96	Q18d	Num	4	4.	4.	Q18D. Why is the subject no longer using
97	Q19	Num	4	4.	4.	Q19. Was the subject treated with pegyla
98	Q19a	Num	4	6.	6.	Q19A. Brand used
99	Q19c	Num	4	6.	6.	Q19C. Is subject currently using it?
100	Q19d	Num	4	6.	6.	Q19D. Why is the subject no longer using
101	Q20	Num	4	4.	4.	Q20. Since 1st FU, had liver biopsy ?
102	Q20a	Num	4	4.	4.	Q20A. reason for the liver biopsy
103	BIOPSYCD	Num	4	6.	6.	Q20A. Other reason for liver biopsy code
104	Q21	Num	4	6.	6.	Q21. Since 1st FU, cons. for liver trans
105	Q21a	Num	4	4.	4.	Q21A. Has the subject received a liver t
106	Q22	Num	4	4.	4.	Q22. Has the subject been diagnosed with
107	Q22ASCD1	Num	4	11.	11.	Q22A. Cancer #1-PRIMARY SITE CODE
108	Q22AHCD1	Num	4	11.	11.	Q22A. Cancer #1-HISTOLOGIC SUBTYPE CODE
109	Q22ATCD1	Num	4	11.	11.	Q22A. Cancer #1-TYPE CODE
110	Q22a_loc	Num	4	6.	6.	Q22A. Cancer #1-Is this cancer localized
111	Q22ADIAG	Num	4	4.	4.	Q22A. Cancer #1-Where cancer diagnosed
112	Q22BSCD2	Num	4	11.	11.	Q22B. Cancer #2-PRIMARY SITE CODE
113	Q22BHCD2	Num	4	11.	11.	Q22B. Cancer #2-HISTOLOGIC SUBTYPE CODE
114	Q22BTCD2	Num	4	11.	11.	Q22B. Cancer #2-TYPE CODE

Num	Variable	Type	Len	Format	Informat	Label
115	Q22b_loc	Num	4	6.	6.	Q22B. Cancer #2-Is this cancer localized
116	Q22BDIAG	Num	4	4.	4.	Q22B. Cancer #2-Where cancer diagnosed
117	Q23a	Num	4	4.	4.	Q23A. NO GI BLEED, ETC. SINCE 1st FU
118	Q23b	Num	4	4.	4.	Q23B. YES-GI BLEED SINCE 1st fu visit
119	Q23c	Num	4	4.	4.	Q23C. YES-GASTROINT. PERF. 1st FU visit
120	Q23d	Num	4	4.	4.	Q23D. YES-GASTROINT. OBST. SINCE 1st FU
121	Q23e	Num	4	6.	6.	Q23E. UNKNOWN-GI BLEED,ETC. SINCE 1st FU
122	Q23a2	Num	4	4.	4.	Q23A. Have you sent in an Upper GI Suppl
123	DEATH_DT	Num	4	8.		DATE OF DEATH (SAS DATE): Converted to days since reference date
124	DEATH_DF	Num	4			DATE OF DEATH IMPUTE FLAG
125	CVIS_DT	Num	4	8.		DATE MOST RECENT CLINIC VISIT (SAS DATE): Converted to days since reference date
126	CVIS_DF	Num	4			DATE MOST REC. CLINIC VISIT IMPUTE FLAG
127	FUVIS_DT	Num	4	8.		DATE OF FIRST FOLLOW UP (SAS DATE): Converted to days since reference date
128	FUVIS_DF	Num	4			DATE FIRST FOLLOW UP IMPUTE FLAG
129	FORM_DT	Num	4	8.		DATE FORM COMPLETED (SAS DATE): Converted to days since reference date
130	FORM_DF	Num	4			DATE FORM COMPLETED IMPUTE FLAG
131	Q10__MONTHS	Num	8			Q10. Date of last Hep A vaccination - Converted to months since reference point
132	Q13A1_MONTHS	Num	8			Q13A1. CD4 <200 cells/ul or <14% date - Converted to months since reference
133	Q13A2_MONTHS	Num	8			Q13A2. CMV (not liver, spleen, lymph) date - Converted to months since reference
134	Q13A3_MONTHS	Num	8			Q13A3. Candidiasis of esophagus or lungs date - Converted to months since reference
135	Q13A4_MONTHS	Num	8			Q13A4. Cervical cancer, invasive date - Converted to months since reference
136	Q13A5_MONTHS	Num	8			Q13A5. Coccidioidmycosis, extrapulmonary date - Converted to months since reference
137	Q13A6_MONTHS	Num	8			Q13A6. Cryptococcosis, extrapulmonary date - Converted to months since reference
138	Q13A7_MONTHS	Num	8			Q13A7. Cryptosporidiosis with diarrhea f date - Converted to months since reference
139	Q13A8_MONTHS	Num	8			Q13A8. Herpes simplex, ulcer for > 1 mon date - Converted to months since reference
140	Q13A9_MONTHS	Num	8			Q13A9. Herpes simplex in lungs or esopha date - Converted to months since reference
141	Q13A10_MONTHS	Num	8			Q13A10. Histoplasmosis, extrapulmonary date - Converted to months since reference
142	Q13A11_MONTHS	Num	8			Q13A11. HIV encephalopathy/dementia date - Converted to months since reference

Num	Variable	Type	Len	Format	Informat	Label
143	Q13A12_MONTHS	Num	8			Q13A12. Isosporiasis with diarrhea for > date - Converted to months since reference
144	Q13A13_MONTHS	Num	8			Q13A13. Kaposi's syndrome date - Converted to months since reference
145	Q13A14_MONTHS	Num	8			Q13A14. Lymphoid interstitial pneumonia date - Converted to months since reference
146	Q13A15_MONTHS	Num	8			Q13A15. Lymphoma of the brain (CNS Primary) date - Converted to months since reference
147	Q13A16_MONTHS	Num	8			Q13A16. Mycobacterium avium (not only...) date - Converted to months since reference
148	Q13A17_MONTHS	Num	8			Q13A17. Non-Hodgkin's Lymphoma (not..) date - Converted to months since reference
149	Q13A18_MONTHS	Num	8			Q13A18. Pneumocystis carinii pneumonia date - Converted to months since reference
150	Q13A19_MONTHS	Num	8			Q13A19. Pneumonia, recurrent bacterial date - Converted to months since reference
151	Q13A20_MONTHS	Num	8			Q13A20. Progressive multifocal leukoence date - Converted to months since reference
152	Q13A21_MONTHS	Num	8			Q13A21. Pulmonary tuberculosis date - Converted to months since reference
153	Q13A22_MONTHS	Num	8			Q13A22. Salmonella septicemia, recurrent date - Converted to months since reference
154	Q13A23_MONTHS	Num	8			Q13A23. Toxoplasmosis of the brain date - Converted to months since reference
155	Q13A24_MONTHS	Num	8			Q13A24. Wasting syndrome (emaciation...) - Converted to months since reference
156	Q13A25_MONTHS	Num	8			Q13A25. Other multiple of recurrent bact date - Converted to months since reference
157	Q14B__MONTHS	Num	8			Q14B. Jaundice, persistent > 1 month - Date converted to months since reference point
158	Q14C__MONTHS	Num	8			Q14C. Ascites (hepatic-related) - Date converted to months since reference point
159	Q14E__MONTHS	Num	8			Q14E. Esophageal varices - Date converted to months since reference point
160	Q14F__MONTHS	Num	8			Q14F. Bleeding esophageal varices - Date converted to months since reference point
161	Q14L__MONTHS	Num	8			Q14L. Biopsy proven Cirrhosis - Date converted to months since reference point
162	Q16B__MONTHS	Num	8			Q16B. Date use began - Converted to months since reference point
163	Q17B__MONTHS	Num	8			Q17B. Date use began - Converted to months since reference point
164	Q18B__MONTHS	Num	8			Q18B. Date use began - Converted to months since reference point
165	Q19B__MONTHS	Num	8			Q19B. Date use began - Converted to months since reference point
166	Q21A__MONTHS	Num	8			Q21A. Date of liver transplant - Converted to months since reference point
167	Q22A__MONTHS	Num	8			Q22A. Cancer #1-Date of diagnosis - Converted to months since reference point
168	Q22B__MONTHS	Num	8			Q22B. Cancer #2-Date of diagnosis - Converted to months since reference point

Num	Variable	Type	Len	Format	Informat	Label
169	SUBJ_ID	Char	8			MHCS SUBJECT IDENTIFIER

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Num	Variable	Type	Len	Format	Label
1	FORM	Num	4		Form Number
2	H80VISIT	Num	4		VISIT NUMBER
3	H80_A1	Num	4		NOT HIV POSITIVE
4	H80_A1N	Num	4		HAVE YOU USED ANY HIV RELATED MEDS
5	H80_221	Num	4		HIV MEDS: ABACAVIR
6	H80221_1	Num	4		REASON STOPPED ABACAVIR-SIDE EFFECT
7	H80221_2	Num	4		REASON STOPPED ABACAVIR-WASN'T WORKING
8	H80221_3	Num	4		REASON STOPPED ABACAVIR-CHANGED TO NEW R
9	H80221_4	Num	4		REASON STOPPED ABACAVIR-PLANNED INTERRUPT
10	H80221_5	Num	4		REASON STOPPED ABACAVIR-NO INSURANCE
11	H80221_6	Num	4		REASON STOPPED ABACAVIR-OTHER REASON
12	H80221_S	Num	4		REASON STOPPED ABACAVIR-SPECIFY REASON
13	H80_222	Num	4		HIV MEDS: AMPRENAVIR
14	H80222_1	Num	4		REASON STOPPED AMPRENAVIR-SIDE EFFECT
15	H80222_2	Num	4		REASON STOPPED AMPRENAVIR-WASN'T WORKING
16	H80222_3	Num	4		REASON STOPPED AMPRENAVIR-CHANGED TO NEW
17	H80222_4	Num	4		REASON STOPPED AMPRENAVIR-PLANNED INTERRUPT
18	H80222_5	Num	4		REASON STOPPED AMPRENAVIR-NO INSURANCE
19	H80222_6	Num	4		REASON STOPPED AMPRENAVIR-OTHER REASON
20	H80222_S	Num	4		REASON STOPPED AMPRENAVIR-SPECIFY REASON
21	H80_223	Num	4		HIV MEDS: COMBIVIR
22	H80223_1	Num	4		REASON STOPPED COMBIVIR-SIDE EFFECT
23	H80223_2	Num	4		REASON STOPPED COMBIVIR-WASN'T WORKING
24	H80223_3	Num	4		REASON STOPPED COMBIVIR-CHANGED TO NEW R
25	H80223_4	Num	4		REASON STOPPED COMBIVIR-PLANNED INTERRUPT
26	H80223_5	Num	4		REASON STOPPED COMBIVIR-NO INSURANCE
27	H80223_6	Num	4		REASON STOPPED COMBIVIR-OTHER REASON
28	H80223_S	Num	4		REASON STOPPED COMBIVIR-SPECIFY REASON
29	H80_224	Num	4		HIV MEDS: DELAVIRDINE
30	H80224_1	Num	4		REASON STOPPED DELAVIRDINE -SIDE EFFECT
31	H80224_2	Num	4		REASON STOPPED DELAVIRDINE -WASN'T WORKI
32	H80224_3	Num	4		REASON STOPPED DELAVIRDINE -CHANGED TO N
33	H80224_4	Num	4		REASON STOPPED DELAVIRDINE -PLANNED INTE
34	H80224_5	Num	4		REASON STOPPED DELAVIRDINE -NO INSURANCE
35	H80224_6	Num	4		REASON STOPPED DELAVIRDINE -OTHER REASON
36	H80224_S	Num	4		REASON STOPPED DELAVIRDINE -SPECIFY REAS

Num	Variable	Type	Len	Format	Label
37	H80_225	Num	4		HIV MEDS: DIDANOSINE
38	H80225_1	Num	4		REASON STOPPED DIDANOSINE-SIDE EFFECT
39	H80225_2	Num	4		REASON STOPPED DIDANOSINE-WASN'T WORKING
40	H80225_3	Num	4		REASON STOPPED DIDANOSINE-CHANGED TO NEW
41	H80225_4	Num	4		REASON STOPPED DIDANOSINE-PLANNED INTERR
42	H80225_5	Num	4		REASON STOPPED DIDANOSINE-NO INSURANCE
43	H80225_6	Num	4		REASON STOPPED DIDANOSINE-OTHER REASON
44	H80225_S	Num	4		REASON STOPPED DIDANOSINE-SPECIFY REASON
45	H80_226	Num	4		HIV MEDS: EFAVIRENZ
46	H80226_1	Num	4		REASON STOPPED EFAVIRENA-SIDE EFFECT
47	H80226_2	Num	4		REASON STOPPED EFAVIRENA-WASN'T WORKING
48	H80226_3	Num	4		REASON STOPPED EFAVIRENA-CHANGED TO NEW
49	H80226_4	Num	4		REASON STOPPED EFAVIRENA-PLANNED INTERRU
50	H80226_5	Num	4		REASON STOPPED EFAVIRENA-NO INSURANCE
51	H80226_6	Num	4		REASON STOPPED EFAVIRENA-OTHER REASON
52	H80226_S	Num	4		REASON STOPPED EFAVIRENA-SPECIFY REASON
53	H80_227	Num	4		HIV MEDS: HYDROXYUREA
54	H80227_1	Num	4		REASON STOPPED HYDROXYUREA -SIDE EFFECT
55	H80227_2	Num	4		REASON STOPPED HYDROXYUREA -WASN'T WORKI
56	H80227_3	Num	4		REASON STOPPED HYDROXYUREA -CHANGED TO N
57	H80227_4	Num	4		REASON STOPPED HYDROXYUREA -PLANNED INTE
58	H80227_5	Num	4		REASON STOPPED HYDROXYUREA -NO INSURANCE
59	H80227_6	Num	4		REASON STOPPED HYDROXYUREA -OTHER REASON
60	H80227_S	Num	4		REASON STOPPED HYDROXYUREA -SPECIFY REAS
61	H80_228	Num	4		HIV MEDS: INDINAVIR
62	H80228_1	Num	4		REASON STOPPED INDINAVIR-SIDE EFFECT
63	H80228_2	Num	4		REASON STOPPED INDINAVIR-WASN'T WORKING
64	H80228_3	Num	4		REASON STOPPED INDINAVIR-CHANGED TO NEW
65	H80228_4	Num	4		REASON STOPPED INDINAVIR-PLANNED INTERRU
66	H80228_5	Num	4		REASON STOPPED INDINAVIR-NO INSURANCE
67	H80228_6	Num	4		REASON STOPPED INDINAVIR-OTHER REASON
68	H80228_S	Num	4		REASON STOPPED INDINAVIR-SPECIFY REASON
69	H80_229	Num	4		HIV MEDS: LOPINAVIR/RITONAVIR
70	H80229_1	Num	4		REASON STOPPED LOPINAVIR/RITONAVIR-SIDE
71	H80229_2	Num	4		REASON STOPPED LOPINAVIR/RITONAVIR-WASN'
72	H80229_3	Num	4		RSN STPD LOPINAVIR/RITONAVIR-CGN TO NEW
73	H80229_4	Num	4		RSN STPD LOPINAVIR/RITONAVIR-PLANNED INT
74	H80229_5	Num	4		REASON STOPPED LOPINAVIR/RITONAVIR-NO IN
75	H80229_6	Num	4		REASON STOPPED LOPINAVIR/RITONAVIR-OTHER

Num	Variable	Type	Len	Format	Label
76	H80229_S	Num	4		REASON STOPPED LOPINAVIR/RITONAVIR-SPECI
77	H80_230	Num	4		HIV MEDS: LAMIVUDINE
78	H80230_1	Num	4		REASON STOPPED LAMIVUDINE-SIDE EFFECT
79	H80230_2	Num	4		REASON STOPPED LAMIVUDINE-WASN'T WORKING
80	H80230_3	Num	4		REASON STOPPED LAMIVUDINE-CHANGED TO NEW
81	H80230_4	Num	4		RSN STPD LAMIVUDINE-PLANNED INTERRUPTION
82	H80230_5	Num	4		REASON STOPPED LAMIVUDINE-NO INSURANCE
83	H80230_6	Num	4		REASON STOPPED LAMIVUDINE-OTHER REASON
84	H80230_S	Num	4		REASON STOPPED LAMIVUDINE-SPECIFY REASON
85	H80_231	Num	4		HIV MEDS: NELFINAVIR
86	H80231_1	Num	4		REASON STOPPED NELFINAVIR-SIDE EFFECT
87	H80231_2	Num	4		REASON STOPPED NELFINAVIR-WASN'T WORKING
88	H80231_3	Num	4		REASON STOPPED NELFINAVIR-CHANGED TO NEW
89	H80231_4	Num	4		REASON STOPPED NELFINAVIR-PLANNED INTERR
90	H80231_5	Num	4		REASON STOPPED NELFINAVIR-NO INSURANCE
91	H80231_6	Num	4		REASON STOPPED NELFINAVIR-OTHER REASON
92	H80231_S	Num	4		REASON STOPPED NELFINAVIR-SPECIFY REASON
93	H80_232	Num	4		HIV MEDS: NEVIRAPINE
94	H80232_1	Num	4		REASON STOPPED NEVIRAPINE-SIDE EFFECT
95	H80232_2	Num	4		REASON STOPPED NEVIRAPINE-WASN'T WORKING
96	H80232_3	Num	4		REASON STOPPED NEVIRAPINE-CHANGED TO NEW
97	H80232_4	Num	4		REASON STOPPED NEVIRAPINE-PLANNED INTERR
98	H80232_5	Num	4		REASON STOPPED NEVIRAPINE-NO INSURANCE
99	H80232_6	Num	4		REASON STOPPED NEVIRAPINE-OTHER REASON
100	H80232_S	Num	4		REASON STOPPED NEVIRAPINE-SPECIFY REASON
101	H80_233	Num	4		HIV MEDS: RITONAVIR
102	H80233_1	Num	4		REASON STOPPED RITONAVIR-SIDE EFFECT
103	H80233_2	Num	4		REASON STOPPED RITONAVIR-WASN'T WORKING
104	H80233_3	Num	4		REASON STOPPED RITONAVIR-CHANGED TO NEW
105	H80233_4	Num	4		REASON STOPPED RITONAVIR-PLANNED INTERRU
106	H80233_5	Num	4		REASON STOPPED RITONAVIR-NO INSURANCE
107	H80233_6	Num	4		REASON STOPPED RITONAVIR-OTHER REASON
108	H80233_S	Num	4		REASON STOPPED RITONAVIR-SPECIFY REASON
109	H80_234	Num	4		HIV MEDS: SAQUINAVIR
110	H80234_1	Num	4		REASON STOPPED SAQUINAVIR-SIDE EFFECT
111	H80234_2	Num	4		REASON STOPPED SAQUINAVIR-WASN'T WORKING
112	H80234_3	Num	4		REASON STOPPED SAQUINAVIR-CHANGED TO NEW
113	H80234_4	Num	4		REASON STOPPED SAQUINAVIR-PLANNED INTERR
114	H80234_5	Num	4		REASON STOPPED SAQUINAVIR-NO INSURANCE

Num	Variable	Type	Len	Format	Label
115	H80234_6	Num	4		REASON STOPPED SAQUINAVIR-OTHER REASON
116	H80234_S	Num	4		REASON STOPPED SAQUINAVIR-SPECIFY REASON
117	H80_235	Num	4		HIV MEDS: STAVUDINE
118	H80235_1	Num	4		REASON STOPPED STAVUDINE -SIDE EFFECT
119	H80235_2	Num	4		REASON STOPPED STAVUDINE -WASN'T WORKING
120	H80235_3	Num	4		REASON STOPPED STAVUDINE -CHANGED TO NEW
121	H80235_4	Num	4		REASON STOPPED STAVUDINE -PLANNED INTERR
122	H80235_5	Num	4		REASON STOPPED STAVUDINE -NO INSURANCE
123	H80235_6	Num	4		REASON STOPPED STAVUDINE -OTHER REASON
124	H80235_S	Num	4		REASON STOPPED STAVUDINE -SPECIFY REASON
125	H80_109	Num	4		HIV MEDS: TENOFOVIR
126	H80109_1	Num	4		REASON STOPPED TENOFOVIR -SIDE EFFECT
127	H80109_2	Num	4		REASON STOPPED TENOFOVIR -WASN'T WORKING
128	H80109_3	Num	4		REASON STOPPED TENOFOVIR -CHANGED TO NEW
129	H80109_4	Num	4		REASON STOPPED TENOFOVIR -PLANNED INTERR
130	H80109_5	Num	4		REASON STOPPED TENOFOVIR -NO INSURANCE
131	H80109_6	Num	4		REASON STOPPED TENOFOVIR -OTHER REASON
132	H80109_S	Num	4		REASON STOPPED TENOFOVIR -SPECIFY REASON
133	H80_236	Num	4		HIV MEDS: TRIZAVIR
134	H80236_1	Num	4		REASON STOPPED TRIZAVIR-SIDE EFFECT
135	H80236_2	Num	4		REASON STOPPED TRIZAVIR-WASN'T WORKING
136	H80236_3	Num	4		REASON STOPPED TRIZAVIR-CHANGED TO NEW R
137	H80236_4	Num	4		REASON STOPPED TRIZAVIR-PLANNED INTERRUPT
138	H80236_5	Num	4		REASON STOPPED TRIZAVIR-NO INSURANCE
139	H80236_6	Num	4		REASON STOPPED TRIZAVIR-OTHER REASON
140	H80236_S	Num	4		REASON STOPPED TRIZAVIR-SPECIFY REASON
141	H80_237	Num	4		HIV MEDS: ZALCITABINE
142	H80237_1	Num	4		REASON STOPPED ZALCITABINE-SIDE EFFECT
143	H80237_2	Num	4		REASON STOPPED ZALCITABINE-WASN'T WORKIN
144	H80237_3	Num	4		REASON STOPPED ZALCITABINE-CHANGED TO NE
145	H80237_4	Num	4		REASON STOPPED ZALCITABINE-PLANNED INTER
146	H80237_5	Num	4		REASON STOPPED ZALCITABINE-NO INSURANCE
147	H80237_6	Num	4		REASON STOPPED ZALCITABINE-OTHER REASON
148	H80237_S	Num	4		REASON STOPPED ZALCITABINE-SPECIFY REASO
149	H80_238	Num	4		HIV MEDS: ZIDOVUDINE
150	H80238_1	Num	4		REASON STOPPED ZIDOVUDINE-SIDE EFFECT
151	H80238_2	Num	4		REASON STOPPED ZIDOVUDINE-WASN'T WORKING
152	H80238_3	Num	4		REASON STOPPED ZIDOVUDINE-CHANGED TO NEW
153	H80238_4	Num	4		REASON STOPPED ZIDOVUDINE-PLANNED INTERR

Num	Variable	Type	Len	Format	Label
154	H80238_5	Num	4		REASON STOPPED ZIDOVUDINE-NO INSURANCE
155	H80238_6	Num	4		REASON STOPPED ZIDOVUDINE-OTHER REASON
156	H80238_S	Num	4		REASON STOPPED ZIDOVUDINE-SPECIFY REASON
157	H80_O1	Num	4		HIV MEDS: OTHER SPECIFY 1
158	H80_O1_1	Num	4		REASON STOPPED OTHER SPECIFY 1 SIDE EFFE
159	H80_O1_2	Num	4		REASON STOPPED OTHER SPECIFY 1-WASN'T WO
160	H80_O1_3	Num	4		REASON STOPPED OTHER SPECIFY 1-NEW REGIM
161	H80_O1_4	Num	4		REASON STOPPED OTHER SPECIFY 1-PLANNED I
162	H80_O1_5	Num	4		REASON STOPPED OTHER SPECIFY 1-NO INSURA
163	H80_O1_6	Num	4		REASON STOPPED OTHER SPECIFY 1-OTHER REA
164	H80_O1_S	Num	4		REASON STOPPED OTHER SPECIFY 1-SPECIFY R
165	H80_O2	Num	4		HIV MEDS: OTHER SPECIFY 2
166	H80_O2_1	Num	4		REASON STOPPED OTHER SPECIFY 2 SIDE EFFE
167	H80_O2_2	Num	4		REASON STOPPED OTHER SPECIFY 2-WASN'T WO
168	H80_O2_3	Num	4		REASON STOPPED OTHER SPECIFY 2-NEW REGIM
169	H80_O2_4	Num	4		REASON STOPPED OTHER SPECIFY 2-PLANNED I
170	H80_O2_5	Num	4		REASON STOPPED OTHER SPECIFY 2-NO INSURA
171	H80_O2_6	Num	4		REASON STOPPED OTHER SPECIFY 2-OTHER REA
172	H80_O2_S	Num	4		REASON STOPPED OTHER SPECIFY 2-SPECIFY R
173	H80_A2	Num	4		DIDN'T USE ANY PROPHYLAXIS MEDICATIONS
174	H80A2_1	Num	4		PROPHYLAXIS MEDS: ACYCLOVIR
175	H80A2_2	Num	4		PROPHYLAXIS MEDS: AEROSOLIZED PENTAMIDIN
176	H80A2_3	Num	4		PROPHYLAXIS MEDS: ATOVAQUONE
177	H80A2_4	Num	4		PROPHYLAXIS MEDS: AZITHROMYCIN
178	H80A2_5	Num	4		PROPHYLAXIS MEDS: CLARITHROMYCIN
179	H80A2_6	Num	4		PROPHYLAXIS MEDS: DAPSONE
180	H80A2_7	Num	4		PROPHYLAXIS MEDS: FAMCICLOVIR
181	H80A2_8	Num	4		PROPHYLAXIS MEDS: FLUCONAZOLE
182	H80A2_9	Num	4		PROPHYLAXIS MEDS: GANCICLOVIR
183	H80A2_10	Num	4		PROPHYLAXIS MEDS: RIFABUTIN
184	H80A2_11	Num	4		PROPHYLAXIS MEDS: TRIMETHOPRIM
185	H80A2_12	Num	4		PROPHYLAXIS MEDS: VALACYCLOVIR
186	H80A2_O1	Num	4		PROPHYLAXIS MEDS: OTHER HIV DRUG-1
187	H80A2_O2	Num	4		PROPHYLAXIS MEDS: OTHER HIV DRUG-2
188	H80A2_O3	Num	4		PROPHYLAXIS MEDS: OTHER HIV DRUG-3
189	H80A2_O4	Num	4		PROPHYLAXIS MEDS: OTHER HIV DRUG-4
190	H80A2_O5	Num	4		PROPHYLAXIS MEDS: OTHER HIV DRUG-5
191	H80_A3	Num	4		DIDN'T USE ANY HCV MEDS
192	H80A3_1	Num	4		HCV MEDICATIONS: INTRON

Num	Variable	Type	Len	Format	Label
193	H80A3_2	Num	4		HCV MEDICATIONS: ROFERON
194	H80A3_3	Num	4		HCV MEDICATIONS: INFERGEN
195	H80A3_4	Num	4		HCV MEDICATIONS: STANDARD INTERFERON
196	H80A3_5	Num	4		HCV MEDICATIONS: REBETOL
197	H80A3_6	Num	4		HCV MEDICATIONS: VIRAZOLE
198	H80A3_7	Num	4		HCV MEDICATIONS: REBETRON
199	H80A3_8	Num	4		HCV MEDICATIONS: PEG-INTRON
200	H80A3_9	Num	4		HCV MEDICATIONS: PEGASYS
201	H80_A4	Num	4		DIDN'T USE ANY OTHER PRESCRIPTION MED
202	H80A4_1	Num	4		OTHER PRESCRIPTION MEDS: VIOXX
203	H80A4_2	Num	4		OTHER PRESCRIPTION MEDS: CELEBREX
204	H80A4_3	Num	4		OTHER PRESCRIPTION MEDS: VICODIN
205	H80A4_4	Num	4		OTHER PRESCRIPTION MEDS: TYLENOL #3
206	H80A4_5	Num	4		OTHER PRESCRIPTION MEDS: PERCOCET
207	H80A4_6	Num	4		OTHER PRESCRIPTION MEDS: OXYIR
208	H80A4_7	Num	4		OTHER PRESCRIPTION MEDS: LASIX
209	H80A4_8	Num	4		OTHER PRESCRIPTION MEDS: PRILOSEC
210	H80A4_9	Num	4		OTHER PRESCRIPTION MEDS: ZOLOFT
211	H80A4_10	Num	4		OTHER PRESCRIPTION MEDS: NEURONTIN
212	H80A4_O1	Num	4		OTHER PRESCRIPTION MEDS: SPECIFY 1
213	H80A4_O2	Num	4		OTHER PRESCRIPTION MEDS: SPECIFY 2
214	H80A4_O3	Num	4		OTHER PRESCRIPTION MEDS: SPECIFY 3
215	H80A4_O4	Num	4		OTHER PRESCRIPTION MEDS: SPECIFY 4
216	H80A4_O5	Num	4		OTHER PRESCRIPTION MEDS: SPECIFY 5
217	H80A4_O6	Num	4		OTHER PRESCRIPTION MEDS: SPECIFY 6
218	H80A4_O7	Num	4		OTHER PRESCRIPTION MEDS: SPECIFY 7
219	H80A4_O8	Num	4		OTHER PRESCRIPTION MEDS: SPECIFY 8
220	H80A4_O9	Num	4		OTHER PRESCRIPTION MEDS: SPECIFY 9
221	H80A4O10	Num	4		OTHER PRESCRIPTION MEDS: SPECIFY 10
222	H80_A5	Num	4		DIDN'T USE HERBS/DRUGS
223	H80A5_1	Num	4		HERBAL SUPPLEMENTS: ALCHEMILLA
224	H80A5_2	Num	4		HERBAL SUPPLEMENTS: CHAPARRAL
225	H80A5_3	Num	4		HERBAL SUPPLEMENTS: CHONDROITIN
226	H80A5_4	Num	4		HERBAL SUPPLEMENTS: EVENING PRIMROSE
227	H80A5_5	Num	4		HERBAL SUPPLEMENTS: EPHEDRA
228	H80A5_6	Num	4		HERBAL SUPPLEMENTS: FEWERFEW
229	H80A5_7	Num	4		HERBAL SUPPLEMENTS: FISH OIL
230	H80A5_8	Num	4		HERBAL SUPPLEMENTS: GENTIAN
231	H80A5_9	Num	4		HERBAL SUPPLEMENTS: GERMANDER

Num	Variable	Type	Len	Format	Label
232	H80A5_10	Num	4		HERBAL SUPPLEMENTS: GINKGO
233	H80A5_11	Num	4		HERBAL SUPPLEMENTS: GINSENG
234	H80A5_12	Num	4		HERBAL SUPPLEMENTS: GINGER
235	H80A5_13	Num	4		HERBAL SUPPLEMENTS: GLUCOSAMINE
236	H80A5_14	Num	4		HERBAL SUPPLEMENTS: JU BU HUAN
237	H80A5_15	Num	4		HERBAL SUPPLEMENTS: MILK THISTLE
238	H80A5_16	Num	4		HERBAL SUPPLEMENTS: SENNA
239	H80A5_17	Num	4		HERBAL SUPPLEMENTS: SHARK CARTILAGE
240	H80A5_18	Num	4		HERBAL SUPPLEMENTS: SCURELLARIA
241	H80A5_19	Num	4		HERBAL SUPPLEMENTS: ST. JOHNS WART
242	H80A5_H1	Num	4		HERBAL SUPPLEMENTS: SPECIFY 1
243	H80A5_H2	Num	4		HERBAL SUPPLEMENTS: SPECIFY 2
244	H80A5_H3	Num	4		HERBAL SUPPLEMENTS: SPECIFY 3
245	H80A5_H4	Num	4		HERBAL SUPPLEMENTS: SPECIFY 4
246	H80A5_H5	Num	4		HERBAL SUPPLEMENTS: SPECIFY 5
247	H80A5_H6	Num	4		HERBAL SUPPLEMENTS: SPECIFY 6
248	H80A5_H7	Num	4		HERBAL SUPPLEMENTS: SPECIFY 7
249	H80A5_H8	Num	4		HERBAL SUPPLEMENTS: SPECIFY 8
250	H80A5_H9	Num	4		HERBAL SUPPLEMENTS: SPECIFY 9
251	H80A5H10	Num	4		HERBAL SUPPLEMENTS: SPECIFY 10
252	H80A5_O1	Num	4		OTHER DRUGS: SPECIFY 1
253	H80A5_O2	Num	4		OTHER DRUGS: SPECIFY 2
254	H80A5_O3	Num	4		OTHER DRUGS: SPECIFY 3
255	H80A5_O4	Num	4		OTHER DRUGS: SPECIFY 4
256	H80A5_O5	Num	4		OTHER DRUGS: SPECIFY 5
257	H80A5_O6	Num	4		OTHER DRUGS: SPECIFY 6
258	H80A5_O7	Num	4		OTHER DRUGS: SPECIFY 7
259	H80A5_O8	Num	4		OTHER DRUGS: SPECIFY 8
260	H80A5_O9	Num	4		OTHER DRUGS: SPECIFY 9
261	H80A5O10	Num	4		OTHER DRUGS: SPECIFY 10
262	H80_B1	Num	4		REDUCE AMOUNT OF TIME SPENT ON WORK?
263	H80_B2	Num	4		ACCOMPLISH LESS THAN YOU WOULD LIKE?
264	H80_B3	Num	4		LIMITED IN THE KIND OF WORK/ACTIVITIES?
265	H80_B4	Num	4		HAVE DIFFICULTY PERFORMING WORK/ACTIVITI
266	H80_B5	Num	4		PAIN IN YOUR JOINTS PAST 4 WEEKS
267	H80_B6	Num	4		PAIN OF OTHER TYPES PAST 4 WEEKS
268	H80_B7	Num	4		HOW MUCH DID PAIN INTERFERE WITH NORMAL
269	H80_C1	Num	4		DID YOU USE ACETAMINOPHEN SINCE LAST VIS
270	H80_C2	Num	4		PAST 3 MONTHS: # ACETAMINOPHEN A WEEK

Num	Variable	Type	Len	Format	Label
271	H80_C3	Num	4		PAST 3 MONTHS: MAX # ACETAMINOPHEN A WEE
272	H80_C4	Num	4		3-12 MONTHS: # ACETAMINOPHEN A WEEK
273	H80_C5	Num	4		3-12 MONTHS: MAX # ACETAMINOPHEN A WEEK
274	H80_C6	Num	4		DID YOU USE NSAIDS SINCE LAST VISIT (OLD
275	H80_C8	Num	4		PAST 3 MONTHS: # NSAIDS A WEEK
276	H80_C9	Num	4		PAST 3 MONTHS: MAX # NSAIDS A WEEK
277	H80_C9A1	Num	4		PAST 3 MONTHS: TYPE OF NSAID-COX 2
278	H80_C9A2	Num	4		PAST 3 MONTHS: TYPE OF NSAID-OTHER NSAID
279	H80_C9A3	Num	4		PAST 3 MONTHS: TYPE OF NSAID-NONE
280	H80_C9B1	Num	4		PAST 2 WEEKS: TYPE OF NSAID-COX 2
281	H80_C9B2	Num	4		PAST 2 WEEKS: TYPE OF NSAID-OTHER NSAID
282	H80_C9B3	Num	4		PAST 2 WEEKS: TYPE OF NSAID-NONE
283	H80_C10	Num	4		3-12 MONTHS: # NSAIDS A WEEK
284	H80_C11	Num	4		3-12 MONTHS: MAX # NSAIDS A WEEK
285	H80C11A1	Num	4		PAST YEAR: TYPE OF NSAID-COX 2
286	H80C11A2	Num	4		PAST YEAR: TYPE OF NSAID-OTHER NSAID
287	H80C11A3	Num	4		PAST YEAR: TYPE OF NSAID-NONE
288	H80_C12	Num	4		SINCE YOUR LAST STUDY VISIT DID YOU USE
289	H80_C13P	Num	4		PAST 3 MONTHS: # CODEINE/OTHER PILLS A W
290	H80_C13I	Num	4		PAST 3 MONTHS: # CODEINE/OTHER INJECTION
291	H80_C14P	Num	4		PAST 3 MONTHS: MAX # CODEINE/OTHER PILLS
292	H80_C14I	Num	4		PAST 3 MONTHS: MAX # CODEINE/OTHER INJEC
293	H80_C15P	Num	4		3-12 MONTHS: # CODEINE/OTHER PILLS A WEE
294	H80_C15I	Num	4		3-12 MONTHS: # CODEINE/OTHER INJECTIONS
295	H80_C16P	Num	4		3-12 MONTHS: MAX # CODEINE/OTHER PILLS A
296	H80_C16I	Num	4		3-12 MONTHS: MAX # CODEINE/OTHER INJECTI
297	H80_D1	Num	4		PAST YEAR SMOKED CIGARETTES REGULARLY
298	H80_D2	Num	4		PAST YEAR HAD A DRINK CONTAINING ALCOHOL
299	H80_D3	Num	4		PAST 3 MONTH, # OF DRINKS PER WEEK
300	H80_D4	Num	4		PAST 3 MONTH, MAX # OF DRINKS PER DAY
301	H80_D5	Num	4		3-12 MONTHS: # OF DRINKS PER WEEK
302	H80_D6	Num	4		3-12 MONTHS: MAX # OF DRINKS PER DAY
303	H80_D7	Num	4		UNABLE TO STOP DRINKING
304	H80_D8	Num	4		FAILED TO DO SOMETHING YOU WERE EXPECTED
305	H80_D9	Num	4		NEEDED A DRINK FIRST THING IN THE MORNIN
306	H80_D10	Num	4		FELT GUILTY AFTER DRINKING
307	H80_D11	Num	4		UNABLE TO REMEMBER AFTER DRINKING
308	H80_D12	Num	4		YOU OR SOMEONE BEEN INJURED DUE TO DRINK
309	H80_D13	Num	4		RELATIVE CONCERNED ABOUT YOUR DRINKING

Num	Variable	Type	Len	Format	Label
310	H80_E1	Num	4		PAST 2 WKS: ABDOMINAL BLOATING
311	H80_E2	Num	4		PAST 2 WKS: TIRED OR FATIGUES
312	H80_E3	Num	4		PAST 2 WKS: BODILY PAIN
313	H80_E4	Num	4		PAST 2 WKS: FELT SLEEPING DURING THE DAY
314	H80_E5	Num	4		PAST 2 WKS: ABDOMINAL PAIN
315	H80_E6	Num	4		PAST 2 WKS: SHORTNESS OF BREATH
316	H80_E7	Num	4		PAST 2 WKS: NOT ABLE TO EAT MUCH
317	H80_E8	Num	4		PAST 2 WKS: DECREASED STRENGTH
318	H80_E9	Num	4		PAST 2 WKS: TROUBLE LIFTING HEAVY OBJECT
319	H80_E10	Num	4		PAST 2 WKS: FELT ANXIOUS
320	H80_E11	Num	4		PAST 2 WKS: DECREASED LEVEL OF ENERGY
321	H80_E12	Num	4		PAST 2 WKS: FELT UNHAPPY
322	H80_E13	Num	4		PAST 2 WKS: FELT DROWSY
323	H80_E14	Num	4		PAST 2 WKS: LIMITATION OF YOUR DIET
324	H80_E15	Num	4		PAST 2 WKS: BEEN IRRITABLE
325	H80_E16	Num	4		PAST 2 WKS: DIFFICULTY SLEEPING
326	H80_E17	Num	4		PAST 2 WKS: ABDOMINAL DISCOMFORT
327	H80_E18	Num	4		PAST 2 WKS: WORRIED/IMPACT HEPATIC C VIR
328	H80_E19	Num	4		PAST 2 WKS: MOOD SWINGS
329	H80_E20	Num	4		PAST 2 WKS: UNABLE TO FALL ASLEEP AT NIG
330	H80_E21	Num	4		PAST 2 WKS: MUSCLE CRAMPS
331	H80_E22	Num	4		PAST 2 WKS: WORRIED ABOUT YOUR SYMPTOMS
332	H80_E23	Num	4		PAST 2 WKS: DRY MOUTH
333	H80_E24	Num	4		PAST 2 WKS: FELT DEPRESSED
334	H80_E25	Num	4		PAST 2 WKS: WORRIED VIRUS INFECTION GETT
335	H80_E26	Num	4		PAST 2 WKS: PROBLEM CONCENTRATING
336	H80_E27	Num	4		PAST 2 WKS: TROUBLED BY ITCHING
337	H80_E28	Num	4		PAST 2 WKS: WORRIED ABOUT NOT FEELING BE
338	H80_E29	Num	4		PAST 2 WKS: CONCERNED AVAILABILITY OF LI
339	PRODHX_V	Num	4		FLAG TO INDICATE PRODUCT HISTORY VERIFIE
340	H80_DT	Num	4	8.	DATE FORM COMPLETED (SAS DATE): Converted to days since reference date
341	H80_DF	Num	4		DATE FORM COMPLETED (IMPUTE FLAG)
342	F80ABDOM	Num	4	6.2	SUMMARY QUALITY OF LIFE: ABDOMINAL
343	F80FATIG	Num	4	6.2	SUMMARY QUALITY OF LIFE: FATIGUE
344	F80SYSTEM	Num	4	6.2	SUMMARY QUALITY OF LIFE: SYSTEM
345	F80ACTIV	Num	4	6.2	SUMMARY QUALITY OF LIFE: ACTIVITY
346	F80EMOTN	Num	4	6.2	SUMMARY QUALITY OF LIFE: EMOTION
347	F80WORRY	Num	4	6.2	SUMMARY QUALITY OF LIFE: WORRY
348	H80_E1R	Num	4		RECODED VALUE OF H80_E1 FOR QOL CALC.

Num	Variable	Type	Len	Format	Label
349	H80_E5R	Num	4		RECODED VALUE OF H80_E5 FOR QOL CALC.
350	H80_E17R	Num	4		RECODED VALUE OF H80_E17 FOR QOL CALC.
351	H80_E2R	Num	4		RECODED VALUE OF H80_E2 FOR QOL CALC.
352	H80_E4R	Num	4		RECODED VALUE OF H80_E4 FOR QOL CALC.
353	H80_E8R	Num	4		RECODED VALUE OF H80_E8 FOR QOL CALC.
354	H80_E11R	Num	4		RECODED VALUE OF H80_E11 FOR QOL CALC.
355	H80_E13R	Num	4		RECODED VALUE OF H80_E13 FOR QOL CALC.
356	H80_E3R	Num	4		RECODED VALUE OF H80_E3 FOR QOL CALC.
357	H80_E6R	Num	4		RECODED VALUE OF H80_E6 FOR QOL CALC.
358	H80_E21R	Num	4		RECODED VALUE OF H80_E21 FOR QOL CALC.
359	H80_E23R	Num	4		RECODED VALUE OF H80_E23 FOR QOL CALC.
360	H80_E27R	Num	4		RECODED VALUE OF H80_E27 FOR QOL CALC.
361	H80_E7R	Num	4		RECODED VALUE OF H80_E7 FOR QOL CALC.
362	H80_E9R	Num	4		RECODED VALUE OF H80_E9 FOR QOL CALC.
363	H80_E14R	Num	4		RECODED VALUE OF H80_E14 FOR QOL CALC.
364	H80_E10R	Num	4		RECODED VALUE OF H80_E10 FOR QOL CALC.
365	H80_E12R	Num	4		RECODED VALUE OF H80_E12 FOR QOL CALC.
366	H80_E15R	Num	4		RECODED VALUE OF H80_E15 FOR QOL CALC.
367	H80_E16R	Num	4		RECODED VALUE OF H80_E16 FOR QOL CALC.
368	H80_E19R	Num	4		RECODED VALUE OF H80_E19 FOR QOL CALC.
369	H80_E20R	Num	4		RECODED VALUE OF H80_E20 FOR QOL CALC.
370	H80_E24R	Num	4		RECODED VALUE OF H80_E24 FOR QOL CALC.
371	H80_E26R	Num	4		RECODED VALUE OF H80_E26 FOR QOL CALC.
372	H80_E18R	Num	4		RECODED VALUE OF H80_E18 FOR QOL CALC.
373	H80_E22R	Num	4		RECODED VALUE OF H80_E22 FOR QOL CALC.
374	H80_E25R	Num	4		RECODED VALUE OF H80_E25 FOR QOL CALC.
375	H80_E28R	Num	4		RECODED VALUE OF H80_E28 FOR QOL CALC.
376	H80_E29R	Num	4		RECODED VALUE OF H80_E29 FOR QOL CALC.
377	ILLEGAL_DRUGS	Num	8		Use of Marijuana, Speed, Heroin, MDMA, Phencyclidine, Anabolic Steroids, Glues/Solvents, or Cocaine
378	ENTRY_DT	Num	8	8.	ENTRY_DT: Converted to days since reference date
379	H80_O1F_MONTHS	Num	8		DATE FIRST USED OTHER SPECIFY 1 - Converted to months since reference point
380	H80_O1L_MONTHS	Num	8		DATE LAST USED OTHER SPECIFY 1 - Converted to months since reference point
381	H80_O2F_MONTHS	Num	8		DATE FIRST USED OTHER SPECIFY 2 - Converted to months since reference point
382	H80_O2L_MONTHS	Num	8		DATE LAST USED OTHER SPECIFY 2 - Converted to months since reference point
383	H80109F_MONTHS	Num	8		DATE FIRST USED TENOFOVIR - Converted to months since reference point

Num	Variable	Type	Len	Format	Label
384	H80109L_MONTHS	Num	8		DATE LAST USED TENOFOVIR - Converted to months since reference point
385	H80221F_MONTHS	Num	8		DATE FIRST USED ABACAVIR- Converted to months since reference point
386	H80221L_MONTHS	Num	8		DATE LAST USED ABACAVIR - Converted to months since reference point
387	H80222F_MONTHS	Num	8		DATE FIRST USED AMPRENAVIR - Converted to months since reference point
388	H80222L_MONTHS	Num	8		DATE LAST USED AMPRENAVIR - Converted to months since reference point
389	H80223F_MONTHS	Num	8		DATE FIRST USED COMBIVIR - Converted to months since reference point
390	H80223L_MONTHS	Num	8		DATE LAST USED COMBIVIR - Converted to months since reference point
391	H80224F_MONTHS	Num	8		DATE FIRST USED DELAVIRDINE - Converted to months since reference point
392	H80224L_MONTHS	Num	8		DATE LAST USED DELAVIRDINE - Converted to months since reference point
393	H80225F_MONTHS	Num	8		DATE FIRST USED DIDANOSINE - Converted to months since reference point
394	H80225L_MONTHS	Num	8		DATE LAST USED DIDANOSINE - Converted to months since reference point
395	H80226F_MONTHS	Num	8		DATE FIRST USED EFAVIRENZ- Converted to months since reference point
396	H80226L_MONTHS	Num	8		DATE LAST USED EFAVIRENZ - Converted to months since reference point
397	H80227F_MONTHS	Num	8		DATE FIRST USED HYDROXYUREA- Converted to months since reference point
398	H80227L_MONTHS	Num	8		DATE LAST USED HYDROXYUREA - Converted to months since reference point
399	H80228F_MONTHS	Num	8		DATE FIRST USED INDINAVIR - Converted to months since reference point
400	H80228L_MONTHS	Num	8		DATE LAST USED INDINAVIR - Converted to months since reference point
401	H80229F_MONTHS	Num	8		DATE FIRST USED LOPINAVIR/RITONAVIR - Converted to months since reference point
402	H80229L_MONTHS	Num	8		DATE LAST USED LOPINAVIR/RITONAVIR - Converted to months since reference point
403	H80230F_MONTHS	Num	8		DATE FIRST USED LAMIVUDINE- Converted to months since reference point
404	H80230L_MONTHS	Num	8		DATE LAST USED LAMIVUDINE - Converted to months since reference point
405	H80231F_MONTHS	Num	8		DATE FIRST USED NELFINAVIR - Converted to months since reference point
406	H80231L_MONTHS	Num	8		DATE LAST USED NELFINAVIR - Converted to months since reference point
407	H80232F_MONTHS	Num	8		DATE FIRST USED NEVIRAPINE - Converted to months since reference point
408	H80232L_MONTHS	Num	8		DATE LAST USED NEVIRAPINE - Converted to months since reference point
409	H80233F_MONTHS	Num	8		DATE FIRST USED RITONAVIR -- Converted to months since reference point
410	H80233L_MONTHS	Num	8		DATE LAST USED RITONAVIR - Converted to months since reference point
411	H80234F_MONTHS	Num	8		DATE FIRST USED SAQUINAVIR - Converted to months since reference point
412	H80234L_MONTHS	Num	8		DATE LAST USED SAQUINAVIR - Converted to months since reference point
413	H80235F_MONTHS	Num	8		DATE FIRST USED STAVUDINE - Converted to months since reference point
414	H80235L_MONTHS	Num	8		DATE LAST USED STAVUDINE - Converted to months since reference point
415	H80236F_MONTHS	Num	8		DATE FIRST USED TRIZAVIR - Converted to months since reference point
416	H80236L_MONTHS	Num	8		DATE LAST USED TRIZAVIR - Converted to months since reference point
417	H80237F_MONTHS	Num	8		DATE FIRST USED ZALCITABINE - Converted to months since reference point
418	H80237L_MONTHS	Num	8		DATE LAST USED ZALCITABINE - Converted to months since reference point
419	H80238F_MONTHS	Num	8		DATE FIRST USED ZIDOVUDINE - Converted to months since reference point
420	H80238L_MONTHS	Num	8		DATE LAST USED ZIDOVUDINE - Converted to months since reference point

Num	Variable	Type	Len	Format	Label
421	SUBJ_ID	Char	8		MHCS SUBJECT IDENTIFIER

Data Set Name: mhcs_ii_f81.sas7bdat

Num	Variable	Type	Len	Format	Informat	Label
1	ASCCODE	Num	4			Q15. ASCITES UNTREATED REASON SPEC. CODE
2	NEUROCD	Num	4			OTHER NEUROLOGICAL ABNORMALITIES CODE
3	VISITNUM	Num	4	1.		VISIT NUMBER
4	NoBM	Num	4	4.	4.	BASIC MEASUREMENTS NOT OBTAINED
5	feet	Num	4	2.	19.	Q1. FEET (HEIGHT)
6	inches	Num	4	3.	19.	Q1. INCHES (HEIGHT)
7	cms	Num	4	6.	19.	Q1. CENTIMETERS (HEIGHT)
8	pounds	Num	4	5.1	19.	Q2. WEIGHT IN POUNDS
9	kgs	Num	4	5.1	19.	Q2. WEIGHT IN KILOGRAMS
10	fahrenheit	Num	4	5.1		Q3. TEMPERATURE IN FAHRENHEIT
11	celsius	Num	4	5.1		Q3. TEMPERATURE IN CELSIUS
12	systolic	Num	4	6.	19.	Q4. BLOOD PRESSURE - SYSTOLIC
13	diastolic	Num	4	6.	19.	Q4. BLOOD PRESSURE - DIASTOLIC
14	blood	Num	4	1.	4.	Q5. URINALYSIS - BLOOD LEVEL
15	protein	Num	4	1.	4.	Q6. URINALYSIS - PROTEIN LEVEL
16	nitrite	Num	4	1.	4.	Q7. URINALYSIS - NITRITE LEVEL
17	a_acid	Num	4	1.	4.	Q8. URINALYSIS - ASCORBIC ACID LEVEL
18	glucose	Num	4	1.	4.	Q9. URINALYSIS - GLUCOSE LEVEL
19	ph	Num	4	1.	4.	Q10. URINALYSIS - pH LEVEL
20	hem_arth	Num	4	1.	4.	Q11. HEMOPHILIC ARTHROPATHY-NONE
21	HEMARTH1	Num	4	4.	4.	Q11. HAS JOINT REPLACEMENT
22	HEMARTH2	Num	4	4.	4.	Q11. JOINT AFFECTED NOW
23	HEMARTH3	Num	4	4.	4.	Q11. TWO OR MORE JOINTS
24	kar_perf	Num	4	1.	4.	Q12. KARNOFSKY PERFORMANCE
25	affected	Num	4	1.	4.	Q13. KAR PERF AFFECTED BY HEM ARTH
26	fatigue	Num	4	1.	4.	Q14. FATIGUE LEVEL
27	ascites	Num	4	1.	4.	Q15. ASCITES
28	hepatome	Num	4	1.	4.	Q16. HEPATOMEGALY
29	splenome	Num	4	1.	4.	Q17. SPLENOMEGALY
30	splnsize	Num	4	19.	19.	Q17. SPLEEN'S SIZE (IN CM.)
31	h_zoster	Num	4	1.	4.	Q18. HERPES ZOSTER (SHINGLES)
32	lym_none	Num	4	2.	4.	Q19. LYMPHADENOPATHY - NONE
33	lym_cerv	Num	4	1.	4.	Q19. LYMPHADENOPATHY - CERVICAL
34	cervsite	Num	4	2.	19.	Q19. CERVICAL LYMPH - # SITES
35	cervshot	Num	4	1.	4.	Q19. CERVICAL LYMPH - SHOTTY
36	lym_othe	Num	4	1.	4.	Q19. LYMPHADENOPATHY - OTHER

Num	Variable	Type	Len	Format	Informat	Label
37	lgstnode	Num	4	2.	19.	Q19a.DIAMETER OF LARGEST LYMPH NODE
38	nocond	Num	4	4.	4.	NOTHING CHECKED FOR Q.20
39	p_neurop	Num	4	1.	4.	Q20. PERIPHERAL NEUROPATHY
40	spider	Num	4	1.	4.	Q20. SPIDER ANGIOMATA
41	neuro_ab	Num	4	1.	4.	Q20. OTHER NEUROLOGICAL ABNORMAL
42	palmare	Num	4	1.	4.	Q20. PALMAR ERYTHEMA
43	wgt_loss	Num	4	1.	4.	Q20. UNEXPLAINED WEIGHT LOSS
44	edema	Num	4	1.	4.	Q20. LOWER EXTREMITY EDEMA
45	memory	Num	4	1.	4.	Q20. MEMORY OR CONCENTRATION PROBLEMS
46	depressn	Num	4	1.	4.	Q20. CHRONIC DEPRESSION
47	gynecom	Num	4	1.	4.	Q20. GYNECOMASTIA
48	arthralg	Num	4	1.	4.	Q20. ARTHRALGIAS/ARTHRITIS
49	nausea	Num	4	1.	4.	Q20. NAUSEA
50	tenderns	Num	4	1.	4.	Q20. RIGHT UP QUAD ABD/LIVER TENDERNESS
51	i_sclera	Num	4	1.	4.	Q20. ICTERIC SCLERA
52	jaundice	Num	4	1.	4.	Q20. JAUNDICE
53	atrophy	Num	4	1.	4.	Q20. TEMPORAL MUSCLE ATROPHY
54	visit_DT	Num	4	8.		FOLLOW UP PE VISIT DATE (SAS DATE): Converted to days since reference date
55	visit_DF	Num	4			FOLLOW UP PE VISIT DATE IMPUTE FLAG
56	SUBJ_ID	Char	8			MHCS SUBJECT IDENTIFIER

Data Set Name: mhcs_ii_f82.sas7bdat

Num	Variable	Type	Len	Format	Informat	Label
1	OLDHCV1	Num	4			Q16. OLD code assigned to other HCV
2	OLDHCV2	Num	4			Q16. OLD code assigned to other HCV
3	GENDEFCD	Num	4			Q4A. Code assigned to other genetic def.
4	q7bags	Num	4			Q7. # of bags
5	q7mls	Num	4			Q7. Total MLS
6	DRUGCD1A	Num	4			Q16A. Code for 2nd other standard int.
7	DRUGCD1B	Num	4			Q16A. Code for 2nd other ribavirin
8	DRUGCD2	Num	4			Q17. Code assigned to other brand used (
9	DRUGCD3	Num	4			Q18. Code assigned to other brand used (
10	DRUGCD4	Num	4			Q19. Code assigned to other brand used (
11	DRUGCD5	Num	4			Q19. Code assigned to other brand used (
12	Q1	Num	4	4.	4.	Q1. Subject status
13	Q1REASON	Num	4	4.	4.	Q1. Reason withdrew from study
14	Q1REASCD	Num	4	6.	6.	Q1. Reason withdrew -Other Sp. CODE
15	CNCRCD	Num	4	6.	6.	Q1B. Code assigned to other cancer
16	Q1c	Num	4	6.	6.	Q1C. Autopsy performed
17	Q1d	Num	4	6.	6.	Q1D. Liver Tissue obtained
18	Q1e1	Num	4	4.	4.	Q1E1. Source=death certificate
19	Q1e2	Num	4	4.	4.	Q1E2. Source=medical record
20	Q1e3	Num	4	4.	4.	Q1E3. Source=spouse or relative
21	Q1e4	Num	4	4.	4.	Q1E4. Source=non-relative
22	Q1e5	Num	4	4.	4.	Q1E5. Source=obituary
23	Q1e6	Num	4	4.	4.	Q1E6. Source=other
24	Q2a	Num	4	4.	4.	Q2A. After or same as date of enrollment
25	Q4	Num	4	4.	4.	Q4. Is hemophilia genetic defect correct
26	Q4a	Num	4	6.	6.	Q4A. What is hemophilia genetic defect?
27	Q5a	Num	4	4.	4.	Q5A. Clotting Factor Products-None
28	Q5b	Num	4	4.	4.	Q5B. Clotting Factor Products-Recombin.
29	Q5c	Num	4	4.	4.	Q5C. Clotting Factor Products-Monoclonal
30	Q5d	Num	4	4.	4.	Q5D. Clotting Factor Products-High Pur
31	Q5e	Num	4	4.	4.	Q5E. Clotting Factor Products-Int Purity
32	Q5f	Num	4	4.	4.	Q5F. Clotting Factor Products-Cryoprecip
33	Q5g	Num	4	4.	4.	Q5G. Other Blood Components
34	Q6_none	Num	4	4.	4.	Q6. No factor concentrate was received
35	Q6_unit	Num	4	4.	4.	Q6. Units of factor concentrate KNOWN
36	Q6_mg	Num	4	4.	4.	Q6. Micrograms of factor concentrate

Num	Variable	Type	Len	Format	Informat	Label
37	Q6_unk	Num	4	4.	4.	Q6. UNKNOWN amount of factor concentrate
38	Q6_units	Num	4	19.	19.	Q6. Number of units factor concentrate
39	Q6_micro	Num	4	19.	19.	Q6. No. of micrograms of factor conc.
40	Q6a	Num	4	4.	4.	Q6A. Basis factor was administered
41	Q7	Num	4	6.	6.	Q7. How many units of cryo did sub rec
42	Q8	Char	3	\$3.	\$3.	Q8. HBV vaccine since 2nd Follow-Up vis?
43	Q9	Num	4	4.	4.	Q9. Is HBV chron carrier stat accurate?
44	Q9a	Num	4	6.	6.	Q9A. HBV chronic carrier stat of subj
45	Q10	Num	4	6.	6.	Q10. Vaccinated for hep A since 1st FU
46	Q11	Num	4	6.	6.	Q11. Current HCV antibody status
47	Q12	Num	4	6.	6.	Q12. HIV status
48	Q13	Num	4	6.	6.	Q13. AIDS-defining condition
49	Q13a1	Num	4	4.	4.	Q13A1. CD4 <200 cells/ul or <14%
50	Q13a2	Num	4	4.	4.	Q13A2. CMV (not liver, spleen, lymph)
51	Q13a3	Num	4	4.	4.	Q13A3. Candidiasis of esophagus or lungs
52	Q13a4	Num	4	4.	4.	Q13A4. Cervical cancer, invasive
53	Q13a5	Num	4	4.	4.	Q13A5. Coccidioidmycosis, extrapulmonary
54	Q13a6	Num	4	4.	4.	Q13A6. Cryptococcosis, extrapulmonary
55	Q13a7	Num	4	4.	4.	Q13A7. Cryptosporidiosis with diarrhea f
56	Q13a8	Num	4	4.	4.	Q13A8. Herpes simplex, ulcer for > 1 mon
57	Q13a9	Num	4	4.	4.	Q13A9. Herpes simplex in lungs or esopha
58	Q13a10	Num	4	4.	4.	Q13A10. Histoplasmosis, extrapulmonary
59	Q13a11	Num	4	4.	4.	Q13A11. HIV encephalopathy/dementia
60	Q13a12	Num	4	4.	4.	Q13A12. Isosporiasis with diarrhea for >
61	Q13a13	Num	4	4.	4.	Q13A13. Kaposi's syndrome
62	Q13a14	Num	4	4.	4.	Q13A14. Lymphoid interstitial pneumonia
63	Q13a15	Num	4	4.	4.	Q13A15. Lymphoma of the brain (CNS Prima
64	Q13a16	Num	4	4.	4.	Q13A16. Mycobacterium avium (not only lu
65	Q13a17	Num	4	4.	4.	Q13A17. Non-Hodgkin's Lymphoma (not T-c
66	Q13a18	Num	4	4.	4.	Q13A18. Pneumocystis carinii pneumonia (
67	Q13a19	Num	4	4.	4.	Q13A19. Pneumonia, recurrent bacterial (
68	Q13a20	Num	4	4.	4.	Q13A20. Progressive multifocal leukoence
69	Q13a21	Num	4	4.	4.	Q13A21. Pulmonary tuberculosis
70	Q13a22	Num	4	4.	4.	Q13A22. Salmonella septicemia, recurrent
71	Q13a23	Num	4	4.	4.	Q13A23. Toxoplasmosis of the brain
72	Q13a24	Num	4	4.	4.	Q13A24. Wasting syndrome (emaciation,"sl
73	Q13a25	Num	4	4.	4.	Q13A25. Other multiple of recurrent bact
74	Q14a	Num	4	4.	4.	Q14A. HCV related conditions-None
75	Q14b	Num	4	4.	4.	Q14B. Jaundice, persistent > 1 month

Num	Variable	Type	Len	Format	Informat	Label
76	Q14c	Num	4	4.	4.	Q14C. Ascites (hepatic-related)
77	Q14e	Num	4	4.	4.	Q14E. Esophageal varices
78	Q14f	Num	4	4.	4.	Q14F. Bleeding esophageal varices
79	Q14l	Num	4	4.	4.	Q14L. Biopsy proven Cirrhosis
80	HCVCode1	Num	4	6.	6.	Q14. Code assigned to other HCV related
81	HCVCode2	Num	4	6.	6.	Q14. Code assigned to other HCV related
82	Q15	Num	4	6.	6.	Q15. Did subject receive HCV treatment
83	Q16	Num	4	4.	4.	Q16. Was the subject treated at the same
84	Q16a1	Num	4	6.	6.	Q16A. Rebetrone (standard interferon & ri
85	Q16a2	Num	4	6.	6.	Q16A. Other standard interferon
86	Q16a3	Num	4	4.	4.	Q16A. Other ribarivin
87	Q16c	Num	4	6.	6.	Q16C. Is subject currently using it?
88	Q16d	Num	4	6.	6.	Q16D. Why is the subject no longer using
89	Q17	Num	4	4.	4.	Q17. Was the subject treated with standa
90	Q17a	Num	4	4.	4.	Q17A. Brand used
91	Q17c	Num	4	4.	4.	Q17C. Is subject currently using it?
92	Q17d	Num	4	4.	4.	Q17D. Why is the subject no longer using
93	Q18	Num	4	4.	4.	Q18. Was the subject treated at the same
94	Q18a1	Num	4	4.	4.	Q18A. Brand used: PEG-Intron
95	Q18a2	Num	4	4.	4.	Q18A. Brand used: Pegasys
96	Q18a3	Num	4	4.	4.	Q18A. Brand used: Rebetol
97	Q18a4	Num	4	4.	4.	Q18A. Brand used: Virazole
98	Q18a5	Num	4	4.	4.	Q18A. Brand used: Other
99	Q18a6	Num	8	4.	4.	Q18a6
100	Q18c	Num	4	4.	4.	Q18C. Is subject currently using it?
101	Q18d	Num	4	4.	4.	Q18D. Why is the subject no longer using
102	Q19	Num	4	4.	4.	Q19. Was the subject treated with pegyla
103	Q19a	Num	4	6.	6.	Q19A. Brand used
104	Q19c	Num	4	6.	6.	Q19C. Is subject currently using it?
105	Q19d	Num	4	6.	6.	Q19D. Why is the subject no longer using
106	Q20	Num	4	4.	4.	Q20. Since 2nd FU, had liver biopsy ?
107	Q20a	Num	4	4.	4.	Q20A. reason for the liver biopsy
108	BIOPSYCD	Num	4	6.	6.	Q20A. Other reason for liver biopsy code
109	Q21	Num	4	6.	6.	Q21. Since 2nd FU, cons. for liver trans
110	Q21a	Num	4	4.	4.	Q21A. Has the subject received a liver t
111	Q22	Num	4	4.	4.	Q22. Subject been diagnosed with cancer
112	Q22ASCD1	Num	4	11.	11.	Q22A. Cancer #1-PRIMARY SITE CODE
113	Q22AHCD1	Num	4	11.	11.	Q22A. Cancer #1-HISTOLOGIC SUBTYPE CODE
114	Q22ATCD1	Num	4	11.	11.	Q22A. Cancer #1-TYPE CODE

Num	Variable	Type	Len	Format	Informat	Label
115	Q22a_loc	Num	4	6.	6.	Q22A. Cancer #1-Is this cancer localized
116	Q22ADIAG	Num	4	4.	4.	Q22A. Cancer #1-Where cancer diagnosed
117	Q22BSCD2	Num	4	11.	11.	Q22B. Cancer #2-PRIMARY SITE CODE
118	Q22BHCD2	Num	4	11.	11.	Q22B. Cancer #2-HISTOLOGIC SUBTYPE CODE
119	Q22BTCD2	Num	4	11.	11.	Q22B. Cancer #2-TYPE CODE
120	Q22b_loc	Num	4	6.	6.	Q22B. Cancer #2-Is this cancer localized
121	Q22BDIAG	Num	4	4.	4.	Q22B. Cancer #2-Where cancer diagnosed
122	Q23a	Num	4	4.	4.	Q23A. NO GI BLEED, ETC. SINCE 2nd FU
123	Q23b	Num	4	4.	4.	Q23B. YES-GI BLEED SINCE 2nd FU visit
124	Q23c	Num	4	4.	4.	Q23C. YES-GASTROINT. PERF. 2nd FU visit
125	Q23d	Num	4	4.	4.	Q23D. YES-GASTROINT. OBST. SINCE 2nd FU
126	Q23e	Num	4	6.	6.	Q23E. UNKNOWN-GI BLEED,ETC. SINCE 2nd FU
127	Q23a2	Num	4	4.	4.	Q23A. Have you sent in an Upper GI Suppl
128	DEATH_DT	Num	4	8.		DATE OF DEATH (SAS DATE): Converted to days since reference date
129	DEATH_DF	Num	4			DATE OF DEATH IMPUTE FLAG
130	CVIS_DT	Num	4	8.		DATE MOST RECENT CLINIC VISIT (SAS DATE): Converted to days since reference date
131	CVIS_DF	Num	4			DATE MOST REC. CLINIC VISIT IMPUTE FLAG
132	FUVIS_DT	Num	4	8.		DATE OF 3rd FOLLOW UP (SAS DATE): Converted to days since reference date
133	FUVIS_DF	Num	4			DATE 3rd FOLLOW UP IMPUTE FLAG
134	FORM_DT	Num	4	8.		DATE FORM COMPLETED (SAS DATE): Converted to days since reference date
135	FORM_DF	Num	4			DATE FORM COMPLETED IMPUTE FLAG
136	BLEED_DT	Num	4	8.		Q23B. DATE THE BLEED OCCURRED (SAS DATE): Converted to days since reference date
137	BLEED_DF	Num	4			Q23B. DATE BLEED OCCURRED IMPUTE FLAG
138	readydate	Num	8			
139	Q10__MONTHS	Num	8			Q10. Date of last Hep A vaccination - Converted to months since reference point
140	Q13A1_MONTHS	Num	8			Q13A1. CD4 <200 cells/ul or <14% date - Converted to months since reference
141	Q13A2_MONTHS	Num	8			Q13A2. CMV (not liver, spleen, lymph) date - Converted to months since reference
142	Q13A3_MONTHS	Num	8			Q13A3. Candidiasis of esophagus or lungs date - Converted to months since reference
143	Q13A4_MONTHS	Num	8			Q13A4. Cervical cancer, invasive date - Converted to months since reference
144	Q13A5_MONTHS	Num	8			Q13A5. Coccidioidmycosis, extrapulmonary date - Converted to months since reference
145	Q13A6_MONTHS	Num	8			Q13A6. Cryptococcosis, extrapulmonary date - Converted to months since reference

Num	Variable	Type	Len	Format	Informat	Label
146	Q13A7_MONTHS	Num	8			Q13A7. Cryptosporidiosis with diarrhea f date - Converted to months since reference
147	Q13A8_MONTHS	Num	8			Q13A8. Herpes simplex, ulcer for > 1 mon date - Converted to months since reference
148	Q13A9_MONTHS	Num	8			Q13A9. Herpes simplex in lungs or esopha date - Converted to months since reference
149	Q13A10_MONTHS	Num	8			Q13A10. Histoplasmosis, extrapulmonary date - Converted to months since reference
150	Q13A11_MONTHS	Num	8			Q13A11. HIV encephalopathy/dementia date - Converted to months since reference
151	Q13A12_MONTHS	Num	8			Q13A12. Isosporiasis with diarrhea for > date - Converted to months since reference
152	Q13A13_MONTHS	Num	8			Q13A13. Kaposi's syndrome date - Converted to months since reference
153	Q13A14_MONTHS	Num	8			Q13A14. Lymphoid interstitial pneumonia date - Converted to months since reference
154	Q13A15_MONTHS	Num	8			Q13A15. Lymphoma of the brain (CNS Primary) date - Converted to months since reference
155	Q13A16_MONTHS	Num	8			Q13A16. Mycobacterium avium (not only...) date - Converted to months since reference
156	Q13A17_MONTHS	Num	8			Q13A17. Non-Hodgkin's Lymphoma (not..) date - Converted to months since reference
157	Q13A18_MONTHS	Num	8			Q13A18. Pneumocystis carinii pneumonia date - Converted to months since reference
158	Q13A19_MONTHS	Num	8			Q13A19. Pneumonia, recurrent bacterial date - Converted to months since reference
159	Q13A20_MONTHS	Num	8			Q13A20. Progressive multifocal leukoence date - Converted to months since reference
160	Q13A21_MONTHS	Num	8			Q13A21. Pulmonary tuberculosis date - Converted to months since reference
161	Q13A22_MONTHS	Num	8			Q13A22. Salmonella septicemia, recurrent date - Converted to months since reference
162	Q13A23_MONTHS	Num	8			Q13A23. Toxoplasmosis of the brain date - Converted to months since reference
163	Q13A24_MONTHS	Num	8			Q13A24. Wasting syndrome (emaciation...) - Converted to months since reference
164	Q13A25_MONTHS	Num	8			Q13A25. Other multiple of recurrent bact date - Converted to months since reference
165	Q14B__MONTHS	Num	8			Q14B. Jaundice, persistent > 1 month - Date converted to months since reference point
166	Q14C__MONTHS	Num	8			Q14C. Ascites (hepatic-related) - Date converted to months since reference point
167	Q14E__MONTHS	Num	8			Q14E. Esophageal varices - Date converted to months since reference point
168	Q14F__MONTHS	Num	8			Q14F. Bleeding esophageal varices - Date converted to months since reference point
169	Q14L__MONTHS	Num	8			Q14L. Biopsy proven Cirrhosis - Date converted to months since reference point

Num	Variable	Type	Len	Format	Informat	Label
170	Q16B__MONTHS	Num	8			Q16B. Date use began - Converted to months since reference point
171	Q17B__MONTHS	Num	8			Q17B. Date use began - Converted to months since reference point
172	Q18B__MONTHS	Num	8			Q18B. Date use began - Converted to months since reference point
173	Q19B__MONTHS	Num	8			Q19B. Date use began - Converted to months since reference point
174	Q21A__MONTHS	Num	8			Q21A. Date of liver transplant - Converted to months since reference point
175	Q22A__MONTHS	Num	8			Q22A. Cancer #1-Date of diagnosis - Converted to months since reference point
176	Q22B__MONTHS	Num	8			Q22B. Cancer #2-Date of diagnosis - Converted to months since reference point
177	SUBJ_ID	Char	8			MHCS SUBJECT IDENTIFIER

Data Set Name: mhcs_ii_f90.sas7bdat

Num	Variable	Type	Len	Format	Label
1	FORM	Num	4		Form Number
2	H90VISIT	Num	4		VISIT NUMBER
3	H90_A1	Num	4		NOT HIV POSITIVE
4	H90_A1N	Num	4		HAVE YOU USED ANY HIV RELATED MEDS
5	H90_221	Num	4		HIV MEDS: ABACAVIR
6	H90221_1	Num	4		REASON STOPPED ABACAVIR-SIDE EFFECT
7	H90221_2	Num	4		REASON STOPPED ABACAVIR-WASN'T WORKING
8	H90221_3	Num	4		REASON STOPPED ABACAVIR-CHANGED TO NEW R
9	H90221_4	Num	4		REASON STOPPED ABACAVIR-PLANNED INTERRUPT
10	H90221_5	Num	4		REASON STOPPED ABACAVIR-NO INSURANCE
11	H90221_6	Num	4		REASON STOPPED ABACAVIR-OTHER REASON
12	H90221_S	Num	4		REASON STOPPED ABACAVIR-SPECIFY REASON
13	H90_222	Num	4		HIV MEDS: AMPRENAVIR
14	H90222_1	Num	4		REASON STOPPED AMPRENAVIR-SIDE EFFECT
15	H90222_2	Num	4		REASON STOPPED AMPRENAVIR-WASN'T WORKING
16	H90222_3	Num	4		REASON STOPPED AMPRENAVIR-CHANGED TO NEW
17	H90222_4	Num	4		REASON STOPPED AMPRENAVIR-PLANNED INTERRUPT
18	H90222_5	Num	4		REASON STOPPED AMPRENAVIR-NO INSURANCE
19	H90222_6	Num	4		REASON STOPPED AMPRENAVIR-OTHER REASON
20	H90222_S	Num	4		REASON STOPPED AMPRENAVIR-SPECIFY REASON
21	H90_223	Num	4		HIV MEDS: COMBIVIR
22	H90223_1	Num	4		REASON STOPPED COMBIVIR-SIDE EFFECT
23	H90223_2	Num	4		REASON STOPPED COMBIVIR-WASN'T WORKING
24	H90223_3	Num	4		REASON STOPPED COMBIVIR-CHANGED TO NEW R
25	H90223_4	Num	4		REASON STOPPED COMBIVIR-PLANNED INTERRUPT
26	H90223_5	Num	4		REASON STOPPED COMBIVIR-NO INSURANCE
27	H90223_6	Num	4		REASON STOPPED COMBIVIR-OTHER REASON
28	H90223_S	Num	4		REASON STOPPED COMBIVIR-SPECIFY REASON
29	H90_224	Num	4		HIV MEDS: DELAVIRDINE
30	H90224_1	Num	4		REASON STOPPED DELAVIRDINE -SIDE EFFECT
31	H90224_2	Num	4		REASON STOPPED DELAVIRDINE -WASN'T WORKI
32	H90224_3	Num	4		REASON STOPPED DELAVIRDINE -CHANGED TO N
33	H90224_4	Num	4		REASON STOPPED DELAVIRDINE -PLANNED INTE
34	H90224_5	Num	4		REASON STOPPED DELAVIRDINE -NO INSURANCE
35	H90224_6	Num	4		REASON STOPPED DELAVIRDINE -OTHER REASON
36	H90224_S	Num	4		REASON STOPPED DELAVIRDINE -SPECIFY REAS

Num	Variable	Type	Len	Format	Label
37	H90_225	Num	4		HIV MEDS: DIDANOSINE
38	H90225_1	Num	4		REASON STOPPED DIDANOSINE-SIDE EFFECT
39	H90225_2	Num	4		REASON STOPPED DIDANOSINE-WASN'T WORKING
40	H90225_3	Num	4		REASON STOPPED DIDANOSINE-CHANGED TO NEW
41	H90225_4	Num	4		REASON STOPPED DIDANOSINE-PLANNED INTERR
42	H90225_5	Num	4		REASON STOPPED DIDANOSINE-NO INSURANCE
43	H90225_6	Num	4		REASON STOPPED DIDANOSINE-OTHER REASON
44	H90225_S	Num	4		REASON STOPPED DIDANOSINE-SPECIFY REASON
45	H90_226	Num	4		HIV MEDS: EFAVIRENZ
46	H90226_1	Num	4		REASON STOPPED EFAVIRENA-SIDE EFFECT
47	H90226_2	Num	4		REASON STOPPED EFAVIRENA-WASN'T WORKING
48	H90226_3	Num	4		REASON STOPPED EFAVIRENA-CHANGED TO NEW
49	H90226_4	Num	4		REASON STOPPED EFAVIRENA-PLANNED INTERRU
50	H90226_5	Num	4		REASON STOPPED EFAVIRENA-NO INSURANCE
51	H90226_6	Num	4		REASON STOPPED EFAVIRENA-OTHER REASON
52	H90226_S	Num	4		REASON STOPPED EFAVIRENA-SPECIFY REASON
53	H90_227	Num	4		HIV MEDS: HYDROXYUREA
54	H90227_1	Num	4		REASON STOPPED HYDROXYUREA -SIDE EFFECT
55	H90227_2	Num	4		REASON STOPPED HYDROXYUREA -WASN'T WORKI
56	H90227_3	Num	4		REASON STOPPED HYDROXYUREA -CHANGED TO N
57	H90227_4	Num	4		REASON STOPPED HYDROXYUREA -PLANNED INTE
58	H90227_5	Num	4		REASON STOPPED HYDROXYUREA -NO INSURANCE
59	H90227_6	Num	4		REASON STOPPED HYDROXYUREA -OTHER REASON
60	H90227_S	Num	4		REASON STOPPED HYDROXYUREA -SPECIFY REAS
61	H90_228	Num	4		HIV MEDS: INDINAVIR
62	H90228_1	Num	4		REASON STOPPED INDINAVIR-SIDE EFFECT
63	H90228_2	Num	4		REASON STOPPED INDINAVIR-WASN'T WORKING
64	H90228_3	Num	4		REASON STOPPED INDINAVIR-CHANGED TO NEW
65	H90228_4	Num	4		REASON STOPPED INDINAVIR-PLANNED INTERRU
66	H90228_5	Num	4		REASON STOPPED INDINAVIR-NO INSURANCE
67	H90228_6	Num	4		REASON STOPPED INDINAVIR-OTHER REASON
68	H90228_S	Num	4		REASON STOPPED INDINAVIR-SPECIFY REASON
69	H90_229	Num	4		HIV MEDS: LOPINAVIR/RITONAVIR
70	H90229_1	Num	4		REASON STOPPED LOPINAVIR/RITONAVIR-SIDE
71	H90229_2	Num	4		REASON STOPPED LOPINAVIR/RITONAVIR-WASN'
72	H90229_3	Num	4		RSN STPD LOPINAVIR/RITONAVIR-CGN TO NEW
73	H90229_4	Num	4		RSN STPD LOPINAVIR/RITONAVIR-PLANNED INT
74	H90229_5	Num	4		REASON STOPPED LOPINAVIR/RITONAVIR-NO IN
75	H90229_6	Num	4		REASON STOPPED LOPINAVIR/RITONAVIR-OTHER

Num	Variable	Type	Len	Format	Label
76	H90229_S	Num	4		REASON STOPPED LOPINAVIR/RITONAVIR-SPECI
77	H90_230	Num	4		HIV MEDS: LAMIVUDINE
78	H90230_1	Num	4		REASON STOPPED LAMIVUDINE-SIDE EFFECT
79	H90230_2	Num	4		REASON STOPPED LAMIVUDINE-WASN'T WORKING
80	H90230_3	Num	4		REASON STOPPED LAMIVUDINE-CHANGED TO NEW
81	H90230_4	Num	4		RSN STPD LAMIVUDINE-PLANNED INTERRUPTION
82	H90230_5	Num	4		REASON STOPPED LAMIVUDINE-NO INSURANCE
83	H90230_6	Num	4		REASON STOPPED LAMIVUDINE-OTHER REASON
84	H90230_S	Num	4		REASON STOPPED LAMIVUDINE-SPECIFY REASON
85	H90_231	Num	4		HIV MEDS: NELFINAVIR
86	H90231_1	Num	4		REASON STOPPED NELFINAVIR-SIDE EFFECT
87	H90231_2	Num	4		REASON STOPPED NELFINAVIR-WASN'T WORKING
88	H90231_3	Num	4		REASON STOPPED NELFINAVIR-CHANGED TO NEW
89	H90231_4	Num	4		REASON STOPPED NELFINAVIR-PLANNED INTERR
90	H90231_5	Num	4		REASON STOPPED NELFINAVIR-NO INSURANCE
91	H90231_6	Num	4		REASON STOPPED NELFINAVIR-OTHER REASON
92	H90231_S	Num	4		REASON STOPPED NELFINAVIR-SPECIFY REASON
93	H90_232	Num	4		HIV MEDS: NEVIRAPINE
94	H90232_1	Num	4		REASON STOPPED NEVIRAPINE-SIDE EFFECT
95	H90232_2	Num	4		REASON STOPPED NEVIRAPINE-WASN'T WORKING
96	H90232_3	Num	4		REASON STOPPED NEVIRAPINE-CHANGED TO NEW
97	H90232_4	Num	4		REASON STOPPED NEVIRAPINE-PLANNED INTERR
98	H90232_5	Num	4		REASON STOPPED NEVIRAPINE-NO INSURANCE
99	H90232_6	Num	4		REASON STOPPED NEVIRAPINE-OTHER REASON
100	H90232_S	Num	4		REASON STOPPED NEVIRAPINE-SPECIFY REASON
101	H90_233	Num	4		HIV MEDS: RITONAVIR
102	H90233_1	Num	4		REASON STOPPED RITONAVIR-SIDE EFFECT
103	H90233_2	Num	4		REASON STOPPED RITONAVIR-WASN'T WORKING
104	H90233_3	Num	4		REASON STOPPED RITONAVIR-CHANGED TO NEW
105	H90233_4	Num	4		REASON STOPPED RITONAVIR-PLANNED INTERRU
106	H90233_5	Num	4		REASON STOPPED RITONAVIR-NO INSURANCE
107	H90233_6	Num	4		REASON STOPPED RITONAVIR-OTHER REASON
108	H90233_S	Num	4		REASON STOPPED RITONAVIR-SPECIFY REASON
109	H90_234	Num	4		HIV MEDS: SAQUINAVIR
110	H90234_1	Num	4		REASON STOPPED SAQUINAVIR-SIDE EFFECT
111	H90234_2	Num	4		REASON STOPPED SAQUINAVIR-WASN'T WORKING
112	H90234_3	Num	4		REASON STOPPED SAQUINAVIR-CHANGED TO NEW
113	H90234_4	Num	4		REASON STOPPED SAQUINAVIR-PLANNED INTERR
114	H90234_5	Num	4		REASON STOPPED SAQUINAVIR-NO INSURANCE

Num	Variable	Type	Len	Format	Label
115	H90234_6	Num	4		REASON STOPPED SAQUINAVIR-OTHER REASON
116	H90234_S	Num	4		REASON STOPPED SAQUINAVIR-SPECIFY REASON
117	H90_235	Num	4		HIV MEDS: STAVUDINE
118	H90235_1	Num	4		REASON STOPPED STAVUDINE -SIDE EFFECT
119	H90235_2	Num	4		REASON STOPPED STAVUDINE -WASN'T WORKING
120	H90235_3	Num	4		REASON STOPPED STAVUDINE -CHANGED TO NEW
121	H90235_4	Num	4		REASON STOPPED STAVUDINE -PLANNED INTERR
122	H90235_5	Num	4		REASON STOPPED STAVUDINE -NO INSURANCE
123	H90235_6	Num	4		REASON STOPPED STAVUDINE -OTHER REASON
124	H90235_S	Num	4		REASON STOPPED STAVUDINE -SPECIFY REASON
125	H90_109	Num	4		HIV MEDS: TENOFOVIR
126	H90109_1	Num	4		REASON STOPPED TENOFOVIR -SIDE EFFECT
127	H90109_2	Num	4		REASON STOPPED TENOFOVIR -WASN'T WORKING
128	H90109_3	Num	4		REASON STOPPED TENOFOVIR -CHANGED TO NEW
129	H90109_4	Num	4		REASON STOPPED TENOFOVIR -PLANNED INTERR
130	H90109_5	Num	4		REASON STOPPED TENOFOVIR -NO INSURANCE
131	H90109_6	Num	4		REASON STOPPED TENOFOVIR -OTHER REASON
132	H90109_S	Num	4		REASON STOPPED TENOFOVIR -SPECIFY REASON
133	H90_236	Num	4		HIV MEDS: TRIZAVIR
134	H90236_1	Num	4		REASON STOPPED TRIZAVIR-SIDE EFFECT
135	H90236_2	Num	4		REASON STOPPED TRIZAVIR-WASN'T WORKING
136	H90236_3	Num	4		REASON STOPPED TRIZAVIR-CHANGED TO NEW R
137	H90236_4	Num	4		REASON STOPPED TRIZAVIR-PLANNED INTERRUPT
138	H90236_5	Num	4		REASON STOPPED TRIZAVIR-NO INSURANCE
139	H90236_6	Num	4		REASON STOPPED TRIZAVIR-OTHER REASON
140	H90236_S	Num	4		REASON STOPPED TRIZAVIR-SPECIFY REASON
141	H90_237	Num	4		HIV MEDS: ZALCITABINE
142	H90237_1	Num	4		REASON STOPPED ZALCITABINE-SIDE EFFECT
143	H90237_2	Num	4		REASON STOPPED ZALCITABINE-WASN'T WORKIN
144	H90237_3	Num	4		REASON STOPPED ZALCITABINE-CHANGED TO NE
145	H90237_4	Num	4		REASON STOPPED ZALCITABINE-PLANNED INTER
146	H90237_5	Num	4		REASON STOPPED ZALCITABINE-NO INSURANCE
147	H90237_6	Num	4		REASON STOPPED ZALCITABINE-OTHER REASON
148	H90237_S	Num	4		REASON STOPPED ZALCITABINE-SPECIFY REASO
149	H90_238	Num	4		HIV MEDS: ZIDOVUDINE
150	H90238_1	Num	4		REASON STOPPED ZIDOVUDINE-SIDE EFFECT
151	H90238_2	Num	4		REASON STOPPED ZIDOVUDINE-WASN'T WORKING
152	H90238_3	Num	4		REASON STOPPED ZIDOVUDINE-CHANGED TO NEW
153	H90238_4	Num	4		REASON STOPPED ZIDOVUDINE-PLANNED INTERR

Num	Variable	Type	Len	Format	Label
154	H90238_5	Num	4		REASON STOPPED ZIDOVUDINE-NO INSURANCE
155	H90238_6	Num	4		REASON STOPPED ZIDOVUDINE-OTHER REASON
156	H90238_S	Num	4		REASON STOPPED ZIDOVUDINE-SPECIFY REASON
157	H90_O1	Num	4		HIV MEDS: OTHER SPECIFY 1
158	H90_O1_1	Num	4		REASON STOPPED OTHER SPECIFY 1 SIDE EFFE
159	H90_O1_2	Num	4		REASON STOPPED OTHER SPECIFY 1-WASN'T WO
160	H90_O1_3	Num	4		REASON STOPPED OTHER SPECIFY 1-NEW REGIM
161	H90_O1_4	Num	4		REASON STOPPED OTHER SPECIFY 1-PLANNED I
162	H90_O1_5	Num	4		REASON STOPPED OTHER SPECIFY 1-NO INSURA
163	H90_O1_6	Num	4		REASON STOPPED OTHER SPECIFY 1-OTHER REA
164	H90_O1_S	Num	4		REASON STOPPED OTHER SPECIFY 1-SPECIFY R
165	H90_O2	Num	4		HIV MEDS: OTHER SPECIFY 2
166	H90_O2_1	Num	4		REASON STOPPED OTHER SPECIFY 2 SIDE EFFE
167	H90_O2_2	Num	4		REASON STOPPED OTHER SPECIFY 2-WASN'T WO
168	H90_O2_3	Num	4		REASON STOPPED OTHER SPECIFY 2-NEW REGIM
169	H90_O2_4	Num	4		REASON STOPPED OTHER SPECIFY 2-PLANNED I
170	H90_O2_5	Num	4		REASON STOPPED OTHER SPECIFY 2-NO INSURA
171	H90_O2_6	Num	4		REASON STOPPED OTHER SPECIFY 2-OTHER REA
172	H90_O2_S	Num	4		REASON STOPPED OTHER SPECIFY 2-SPECIFY R
173	H90_A2	Num	4		DIDN'T USE ANY PROPHYLAXIS MEDICATIONS
174	H90A2_1	Num	4		PROPHYLAXIS MEDS: ACYCLOVIR
175	H90A2_2	Num	4		PROPHYLAXIS MEDS: AEROSOLIZED PENTAMIDIN
176	H90A2_3	Num	4		PROPHYLAXIS MEDS: ATOVAQUONE
177	H90A2_4	Num	4		PROPHYLAXIS MEDS: AZITHROMYCIN
178	H90A2_5	Num	4		PROPHYLAXIS MEDS: CLARITHROMYCIN
179	H90A2_6	Num	4		PROPHYLAXIS MEDS: DAPSONE
180	H90A2_7	Num	4		PROPHYLAXIS MEDS: FAMCICLOVIR
181	H90A2_8	Num	4		PROPHYLAXIS MEDS: FLUCONAZOLE
182	H90A2_9	Num	4		PROPHYLAXIS MEDS: GANCICLOVIR
183	H90A2_10	Num	4		PROPHYLAXIS MEDS: RIFABUTIN
184	H90A2_11	Num	4		PROPHYLAXIS MEDS: TRIMETHOPRIM
185	H90A2_12	Num	4		PROPHYLAXIS MEDS: VALACYCLOVIR
186	H90A2_O1	Num	4		PROPHYLAXIS MEDS: OTHER HIV DRUG-1
187	H90A2_O2	Num	4		PROPHYLAXIS MEDS: OTHER HIV DRUG-2
188	H90A2_O3	Num	4		PROPHYLAXIS MEDS: OTHER HIV DRUG-3
189	H90A2_O4	Num	4		PROPHYLAXIS MEDS: OTHER HIV DRUG-4
190	H90A2_O5	Num	4		PROPHYLAXIS MEDS: OTHER HIV DRUG-5
191	H90_A3	Num	4		DIDN'T USE ANY HCV MEDS
192	H90A3_1	Num	4		HCV MEDICATIONS: INTRON

Num	Variable	Type	Len	Format	Label
193	H90A3_2	Num	4		HCV MEDICATIONS: ROFERON
194	H90A3_3	Num	4		HCV MEDICATIONS: INFERGEN
195	H90A3_4	Num	4		HCV MEDICATIONS: STANDARD INTERFERON
196	H90A3_5	Num	4		HCV MEDICATIONS: REBETOL
197	H90A3_6	Num	4		HCV MEDICATIONS: VIRAZOLE
198	H90A3_7	Num	4		HCV MEDICATIONS: REBETRON
199	H90A3_8	Num	4		HCV MEDICATIONS: PEG-INTRON
200	H90A3_9	Num	4		HCV MEDICATIONS: PEGASYS
201	H90_A4	Num	4		DIDN'T USE ANY OTHER PRESCRIPTION MED
202	H90A4_1	Num	4		OTHER PRESCRIPTION MEDS: VIOXX
203	H90A4_2	Num	4		OTHER PRESCRIPTION MEDS: CELEBREX
204	H90A4_3	Num	4		OTHER PRESCRIPTION MEDS: VICODIN
205	H90A4_4	Num	4		OTHER PRESCRIPTION MEDS: TYLENOL #3
206	H90A4_5	Num	4		OTHER PRESCRIPTION MEDS: PERCOCET
207	H90A4_6	Num	4		OTHER PRESCRIPTION MEDS: OXYIR
208	H90A4_7	Num	4		OTHER PRESCRIPTION MEDS: LASIX
209	H90A4_8	Num	4		OTHER PRESCRIPTION MEDS: PRILOSEC
210	H90A4_9	Num	4		OTHER PRESCRIPTION MEDS: ZOLOFT
211	H90A4_10	Num	4		OTHER PRESCRIPTION MEDS: NEURONTIN
212	H90A4_O1	Num	4		OTHER PRESCRIPTION MEDS: SPECIFY 1
213	H90A4_O2	Num	4		OTHER PRESCRIPTION MEDS: SPECIFY 2
214	H90A4_O3	Num	4		OTHER PRESCRIPTION MEDS: SPECIFY 3
215	H90A4_O4	Num	4		OTHER PRESCRIPTION MEDS: SPECIFY 4
216	H90A4_O5	Num	4		OTHER PRESCRIPTION MEDS: SPECIFY 5
217	H90A4_O6	Num	4		OTHER PRESCRIPTION MEDS: SPECIFY 6
218	H90A4_O7	Num	4		OTHER PRESCRIPTION MEDS: SPECIFY 7
219	H90A4_O8	Num	4		OTHER PRESCRIPTION MEDS: SPECIFY 8
220	H90A4_O9	Num	4		OTHER PRESCRIPTION MEDS: SPECIFY 9
221	H90A4O10	Num	4		OTHER PRESCRIPTION MEDS: SPECIFY 10
222	H90_A5	Num	4		DIDN'T USE HERBS/DRUGS
223	H90A5_1	Num	4		HERBAL SUPPLEMENTS: ALCHEMILLA
224	H90A5_2	Num	4		HERBAL SUPPLEMENTS: CHAPARRAL
225	H90A5_3	Num	4		HERBAL SUPPLEMENTS: CHONDROITIN
226	H90A5_4	Num	4		HERBAL SUPPLEMENTS: EVENING PRIMROSE
227	H90A5_5	Num	4		HERBAL SUPPLEMENTS: EPHEDRA
228	H90A5_6	Num	4		HERBAL SUPPLEMENTS: FEWERFEW
229	H90A5_7	Num	4		HERBAL SUPPLEMENTS: FISH OIL
230	H90A5_8	Num	4		HERBAL SUPPLEMENTS: GENTIAN
231	H90A5_9	Num	4		HERBAL SUPPLEMENTS: GERMANDER

Num	Variable	Type	Len	Format	Label
232	H90A5_10	Num	4		HERBAL SUPPLEMENTS: GINKGO
233	H90A5_11	Num	4		HERBAL SUPPLEMENTS: GINSENG
234	H90A5_12	Num	4		HERBAL SUPPLEMENTS: GINGER
235	H90A5_13	Num	4		HERBAL SUPPLEMENTS: GLUCOSAMINE
236	H90A5_14	Num	4		HERBAL SUPPLEMENTS: JU BU HUAN
237	H90A5_15	Num	4		HERBAL SUPPLEMENTS: MILK THISTLE
238	H90A5_16	Num	4		HERBAL SUPPLEMENTS: SENNA
239	H90A5_17	Num	4		HERBAL SUPPLEMENTS: SHARK CARTILAGE
240	H90A5_18	Num	4		HERBAL SUPPLEMENTS: SCURELLARIA
241	H90A5_19	Num	4		HERBAL SUPPLEMENTS: ST. JOHNS WART
242	H90A5_H1	Num	4		HERBAL SUPPLEMENTS: SPECIFY 1
243	H90A5_H2	Num	4		HERBAL SUPPLEMENTS: SPECIFY 2
244	H90A5_H3	Num	4		HERBAL SUPPLEMENTS: SPECIFY 3
245	H90A5_H4	Num	4		HERBAL SUPPLEMENTS: SPECIFY 4
246	H90A5_H5	Num	4		HERBAL SUPPLEMENTS: SPECIFY 5
247	H90A5_H6	Num	4		HERBAL SUPPLEMENTS: SPECIFY 6
248	H90A5_H7	Num	4		HERBAL SUPPLEMENTS: SPECIFY 7
249	H90A5_H8	Num	4		HERBAL SUPPLEMENTS: SPECIFY 8
250	H90A5_H9	Num	4		HERBAL SUPPLEMENTS: SPECIFY 9
251	H90A5H10	Num	4		HERBAL SUPPLEMENTS: SPECIFY 10
252	H90A5_O1	Num	4		OTHER DRUGS: SPECIFY 1
253	H90A5_O2	Num	4		OTHER DRUGS: SPECIFY 2
254	H90A5_O3	Num	4		OTHER DRUGS: SPECIFY 3
255	H90A5_O4	Num	4		OTHER DRUGS: SPECIFY 4
256	H90A5_O5	Num	4		OTHER DRUGS: SPECIFY 5
257	H90A5_O6	Num	4		OTHER DRUGS: SPECIFY 6
258	H90A5_O7	Num	4		OTHER DRUGS: SPECIFY 7
259	H90A5_O8	Num	4		OTHER DRUGS: SPECIFY 8
260	H90A5_O9	Num	4		OTHER DRUGS: SPECIFY 9
261	H90A5O10	Num	4		OTHER DRUGS: SPECIFY 10
262	H90_B1	Num	4		REDUCE AMOUNT OF TIME SPENT ON WORK?
263	H90_B2	Num	4		ACCOMPLISH LESS THAN YOU WOULD LIKE?
264	H90_B3	Num	4		LIMITED IN THE KIND OF WORK/ACTIVITIES?
265	H90_B4	Num	4		HAVE DIFFICULTY PERFORMING WORK/ACTIVITI
266	H90_B5	Num	4		PAIN IN YOUR JOINTS PAST 4 WEEKS
267	H90_B6	Num	4		PAIN OF OTHER TYPES PAST 4 WEEKS
268	H90_B7	Num	4		HOW MUCH DID PAIN INTERFERE WITH NORMAL
269	H90_C1	Num	4		DID YOU USE ACETAMINOPHEN SINCE LAST VIS
270	H90_C2	Num	4		PAST 3 MONTHS: # ACETAMINOPHEN A WEEK

Num	Variable	Type	Len	Format	Label
271	H90_C3	Num	4		PAST 3 MONTHS: MAX # ACETAMINOPHEN A WEE
272	H90_C4	Num	4		3-12 MONTHS: # ACETAMINOPHEN A WEEK
273	H90_C5	Num	4		3-12 MONTHS: MAX # ACETAMINOPHEN A WEEK
274	H90_C6	Num	4		DID YOU USE NSAIDS SINCE LAST VISIT (OLD
275	H90_C8	Num	4		PAST 3 MONTHS: # NSAIDS A WEEK
276	H90_C9	Num	4		PAST 3 MONTHS: MAX # NSAIDS A WEEK
277	H90_C9A1	Num	4		PAST 3 MONTHS: TYPE OF NSAID-COX 2
278	H90_C9A2	Num	4		PAST 3 MONTHS: TYPE OF NSAID-OTHER NSAID
279	H90_C9A3	Num	4		PAST 3 MONTHS: TYPE OF NSAID-NONE
280	H90_C9B1	Num	4		PAST 2 WEEKS: TYPE OF NSAID-COX 2
281	H90_C9B2	Num	4		PAST 2 WEEKS: TYPE OF NSAID-OTHER NSAID
282	H90_C9B3	Num	4		PAST 2 WEEKS: TYPE OF NSAID-NONE
283	H90_C10	Num	4		3-12 MONTHS: # NSAIDS A WEEK
284	H90_C11	Num	4		3-12 MONTHS: MAX # NSAIDS A WEEK
285	H90C11A1	Num	4		PAST YEAR: TYPE OF NSAID-COX 2
286	H90C11A2	Num	4		PAST YEAR: TYPE OF NSAID-OTHER NSAID
287	H90C11A3	Num	4		PAST YEAR: TYPE OF NSAID-NONE
288	H90_C12	Num	4		SINCE YOUR LAST STUDY VISIT DID YOU USE
289	H90_C13P	Num	4		PAST 3 MONTHS: # CODEINE/OTHER PILLS A W
290	H90_C13I	Num	4		PAST 3 MONTHS: # CODEINE/OTHER INJECTION
291	H90_C14P	Num	4		PAST 3 MONTHS: MAX # CODEINE/OTHER PILLS
292	H90_C14I	Num	4		PAST 3 MONTHS: MAX # CODEINE/OTHER INJEC
293	H90_C15P	Num	4		3-12 MONTHS: # CODEINE/OTHER PILLS A WEE
294	H90_C15I	Num	4		3-12 MONTHS: # CODEINE/OTHER INJECTIONS
295	H90_C16P	Num	4		3-12 MONTHS: MAX # CODEINE/OTHER PILLS A
296	H90_C16I	Num	4		3-12 MONTHS: MAX # CODEINE/OTHER INJECTI
297	H90_D1	Num	4		PAST YEAR SMOKED CIGARETTES REGULARLY
298	H90_D2	Num	4		PAST YEAR HAD A DRINK CONTAINING ALCOHOL
299	H90_D3	Num	4		PAST 3 MONTH, # OF DRINKS PER WEEK
300	H90_D4	Num	4		PAST 3 MONTH, MAX # OF DRINKS PER DAY
301	H90_D5	Num	4		3-12 MONTHS: # OF DRINKS PER WEEK
302	H90_D6	Num	4		3-12 MONTHS: MAX # OF DRINKS PER DAY
303	H90_D7	Num	4		UNABLE TO STOP DRINKING
304	H90_D8	Num	4		FAILED TO DO SOMETHING YOU WERE EXPECTED
305	H90_D9	Num	4		NEEDED A DRINK FIRST THING IN THE MORNIN
306	H90_D10	Num	4		FELT GUILTY AFTER DRINKING
307	H90_D11	Num	4		UNABLE TO REMEMBER AFTER DRINKING
308	H90_D12	Num	4		YOU OR SOMEONE BEEN INJURED DUE TO DRINK
309	H90_D13	Num	4		RELATIVE CONCERNED ABOUT YOUR DRINKING

Num	Variable	Type	Len	Format	Label
310	H90_E1	Num	4		PAST 2 WKS: ABDOMINAL BLOATING
311	H90_E2	Num	4		PAST 2 WKS: TIRED OR FATIGUES
312	H90_E3	Num	4		PAST 2 WKS: BODILY PAIN
313	H90_E4	Num	4		PAST 2 WKS: FELT SLEEPING DURING THE DAY
314	H90_E5	Num	4		PAST 2 WKS: ABDOMINAL PAIN
315	H90_E6	Num	4		PAST 2 WKS: SHORTNESS OF BREATH
316	H90_E7	Num	4		PAST 2 WKS: NOT ABLE TO EAT MUCH
317	H90_E8	Num	4		PAST 2 WKS: DECREASED STRENGTH
318	H90_E9	Num	4		PAST 2 WKS: TROUBLE LIFTING HEAVY OBJECT
319	H90_E10	Num	4		PAST 2 WKS: FELT ANXIOUS
320	H90_E11	Num	4		PAST 2 WKS: DECREASED LEVEL OF ENERGY
321	H90_E12	Num	4		PAST 2 WKS: FELT UNHAPPY
322	H90_E13	Num	4		PAST 2 WKS: FELT DROWSY
323	H90_E14	Num	4		PAST 2 WKS: LIMITATION OF YOUR DIET
324	H90_E15	Num	4		PAST 2 WKS: BEEN IRRITABLE
325	H90_E16	Num	4		PAST 2 WKS: DIFFICULTY SLEEPING
326	H90_E17	Num	4		PAST 2 WKS: ABDOMINAL DISCOMFORT
327	H90_E18	Num	4		PAST 2 WKS: WORRIED/IMPACT HEPATIC C VIR
328	H90_E19	Num	4		PAST 2 WKS: MOOD SWINGS
329	H90_E20	Num	4		PAST 2 WKS: UNABLE TO FALL ASLEEP AT NIG
330	H90_E21	Num	4		PAST 2 WKS: MUSCLE CRAMPS
331	H90_E22	Num	4		PAST 2 WKS: WORRIED ABOUT YOUR SYMPTOMS
332	H90_E23	Num	4		PAST 2 WKS: DRY MOUTH
333	H90_E24	Num	4		PAST 2 WKS: FELT DEPRESSED
334	H90_E25	Num	4		PAST 2 WKS: WORRIED VIRUS INFECTION GETT
335	H90_E26	Num	4		PAST 2 WKS: PROBLEM CONCENTRATING
336	H90_E27	Num	4		PAST 2 WKS: TROUBLED BY ITCHING
337	H90_E28	Num	4		PAST 2 WKS: WORRIED ABOUT NOT FEELING BE
338	H90_E29	Num	4		PAST 2 WKS: CONCERNED AVAILABILITY OF LI
339	PRODHX_V	Num	4		FLAG TO INDICATE PRODUCT HISTORY VERIFIE
340	H90_DT	Num	4	8.	DATE FORM COMPLETED (SAS DATE): Converted to days since reference date
341	H90_DF	Num	4		DATE FORM COMPLETED (IMPUTE FLAG)
342	F90ABDOM	Num	4	6.2	SUMMARY QUALITY OF LIFE: ABDOMINAL
343	F90FATIG	Num	4	6.2	SUMMARY QUALITY OF LIFE: FATIGUE
344	F90SYSTM	Num	4	6.2	SUMMARY QUALITY OF LIFE: SYSTEM
345	F90ACTIV	Num	4	6.2	SUMMARY QUALITY OF LIFE: ACTIVITY
346	F90EMOTN	Num	4	6.2	SUMMARY QUALITY OF LIFE: EMOTION
347	F90WORRY	Num	4	6.2	SUMMARY QUALITY OF LIFE: WORRY
348	H90_E1R	Num	4		RECODED VALUE OF H90_E1 FOR QOL CALC.

Num	Variable	Type	Len	Format	Label
349	H90_E5R	Num	4		RECODED VALUE OF H90_E5 FOR QOL CALC.
350	H90_E17R	Num	4		RECODED VALUE OF H90_E17 FOR QOL CALC.
351	H90_E2R	Num	4		RECODED VALUE OF H90_E2 FOR QOL CALC.
352	H90_E4R	Num	4		RECODED VALUE OF H90_E4 FOR QOL CALC.
353	H90_E8R	Num	4		RECODED VALUE OF H90_E8 FOR QOL CALC.
354	H90_E11R	Num	4		RECODED VALUE OF H90_E11 FOR QOL CALC.
355	H90_E13R	Num	4		RECODED VALUE OF H90_E13 FOR QOL CALC.
356	H90_E3R	Num	4		RECODED VALUE OF H90_E3 FOR QOL CALC.
357	H90_E6R	Num	4		RECODED VALUE OF H90_E6 FOR QOL CALC.
358	H90_E21R	Num	4		RECODED VALUE OF H90_E21 FOR QOL CALC.
359	H90_E23R	Num	4		RECODED VALUE OF H90_E23 FOR QOL CALC.
360	H90_E27R	Num	4		RECODED VALUE OF H90_E27 FOR QOL CALC.
361	H90_E7R	Num	4		RECODED VALUE OF H90_E7 FOR QOL CALC.
362	H90_E9R	Num	4		RECODED VALUE OF H90_E9 FOR QOL CALC.
363	H90_E14R	Num	4		RECODED VALUE OF H90_E14 FOR QOL CALC.
364	H90_E10R	Num	4		RECODED VALUE OF H90_E10 FOR QOL CALC.
365	H90_E12R	Num	4		RECODED VALUE OF H90_E12 FOR QOL CALC.
366	H90_E15R	Num	4		RECODED VALUE OF H90_E15 FOR QOL CALC.
367	H90_E16R	Num	4		RECODED VALUE OF H90_E16 FOR QOL CALC.
368	H90_E19R	Num	4		RECODED VALUE OF H90_E19 FOR QOL CALC.
369	H90_E20R	Num	4		RECODED VALUE OF H90_E20 FOR QOL CALC.
370	H90_E24R	Num	4		RECODED VALUE OF H90_E24 FOR QOL CALC.
371	H90_E26R	Num	4		RECODED VALUE OF H90_E26 FOR QOL CALC.
372	H90_E18R	Num	4		RECODED VALUE OF H90_E18 FOR QOL CALC.
373	H90_E22R	Num	4		RECODED VALUE OF H90_E22 FOR QOL CALC.
374	H90_E25R	Num	4		RECODED VALUE OF H90_E25 FOR QOL CALC.
375	H90_E28R	Num	4		RECODED VALUE OF H90_E28 FOR QOL CALC.
376	H90_E29R	Num	4		RECODED VALUE OF H90_E29 FOR QOL CALC.
377	ILLEGAL_DRUGS	Num	8		Use of Marijuana, Speed, Heroin, MDMA, Phencyclidine, Anabolic Steroids, Glues/Solvents, or Cocaine
378	ENTRY_DT	Num	8	8.	ENTRY_DT: Converted to days since reference date
379	H90_O1F_MONTHS	Num	8		DATE FIRST USED OTHER SPECIFY 1 - Converted to months since reference point
380	H90_O1L_MONTHS	Num	8		DATE LAST USED OTHER SPECIFY 1 - Converted to months since reference point
381	H90_O2F_MONTHS	Num	8		DATE FIRST USED OTHER SPECIFY 2 - Converted to months since reference point
382	H90_O2L_MONTHS	Num	8		DATE LAST USED OTHER SPECIFY 2 - Converted to months since reference point
383	H90109F_MONTHS	Num	8		DATE FIRST USED TENOFOVIR - Converted to months since reference point

Num	Variable	Type	Len	Format	Label
384	H90109L_MONTHS	Num	8		DATE LAST USED TENOFOVIR - Converted to months since reference point
385	H90221F_MONTHS	Num	8		DATE FIRST USED ABACAVIR- Converted to months since reference point
386	H90221L_MONTHS	Num	8		DATE LAST USED ABACAVIR - Converted to months since reference point
387	H90222F_MONTHS	Num	8		DATE FIRST USED AMPRENAVIR - Converted to months since reference point
388	H90222L_MONTHS	Num	8		DATE LAST USED AMPRENAVIR - Converted to months since reference point
389	H90223F_MONTHS	Num	8		DATE FIRST USED COMBIVIR - Converted to months since reference point
390	H90223L_MONTHS	Num	8		DATE LAST USED COMBIVIR - Converted to months since reference point
391	H90224F_MONTHS	Num	8		DATE FIRST USED DELAVIRDINE - Converted to months since reference point
392	H90224L_MONTHS	Num	8		DATE LAST USED DELAVIRDINE - Converted to months since reference point
393	H90225F_MONTHS	Num	8		DATE FIRST USED DIDANOSINE - Converted to months since reference point
394	H90225L_MONTHS	Num	8		DATE LAST USED DIDANOSINE - Converted to months since reference point
395	H90226F_MONTHS	Num	8		DATE FIRST USED EFAVIRENZ- Converted to months since reference point
396	H90226L_MONTHS	Num	8		DATE LAST USED EFAVIRENZ - Converted to months since reference point
397	H90227F_MONTHS	Num	8		DATE FIRST USED HYDROXYUREA- Converted to months since reference point
398	H90227L_MONTHS	Num	8		DATE LAST USED HYDROXYUREA - Converted to months since reference point
399	H90228F_MONTHS	Num	8		DATE FIRST USED INDINAVIR - Converted to months since reference point
400	H90228L_MONTHS	Num	8		DATE LAST USED INDINAVIR - Converted to months since reference point
401	H90229F_MONTHS	Num	8		DATE FIRST USED LOPINAVIR/RITONAVIR - Converted to months since reference point
402	H90229L_MONTHS	Num	8		DATE LAST USED LOPINAVIR/RITONAVIR - Converted to months since reference point
403	H90230F_MONTHS	Num	8		DATE FIRST USED LAMIVUDINE- Converted to months since reference point
404	H90230L_MONTHS	Num	8		DATE LAST USED LAMIVUDINE - Converted to months since reference point
405	H90231F_MONTHS	Num	8		DATE FIRST USED NELFINAVIR - Converted to months since reference point
406	H90231L_MONTHS	Num	8		DATE LAST USED NELFINAVIR - Converted to months since reference point
407	H90232F_MONTHS	Num	8		DATE FIRST USED NEVIRAPINE - Converted to months since reference point
408	H90232L_MONTHS	Num	8		DATE LAST USED NEVIRAPINE - Converted to months since reference point
409	H90233F_MONTHS	Num	8		DATE FIRST USED RITONAVIR -- Converted to months since reference point
410	H90233L_MONTHS	Num	8		DATE LAST USED RITONAVIR - Converted to months since reference point
411	H90234F_MONTHS	Num	8		DATE FIRST USED SAQUINAVIR - Converted to months since reference point
412	H90234L_MONTHS	Num	8		DATE LAST USED SAQUINAVIR - Converted to months since reference point
413	H90235F_MONTHS	Num	8		DATE FIRST USED STAVUDINE - Converted to months since reference point
414	H90235L_MONTHS	Num	8		DATE LAST USED STAVUDINE - Converted to months since reference point
415	H90236F_MONTHS	Num	8		DATE FIRST USED TRIZAVIR - Converted to months since reference point
416	H90236L_MONTHS	Num	8		DATE LAST USED TRIZAVIR - Converted to months since reference point
417	H90237F_MONTHS	Num	8		DATE FIRST USED ZALCITABINE - Converted to months since reference point
418	H90237L_MONTHS	Num	8		DATE LAST USED ZALCITABINE - Converted to months since reference point
419	H90238F_MONTHS	Num	8		DATE FIRST USED ZIDOVUDINE - Converted to months since reference point
420	H90238L_MONTHS	Num	8		DATE LAST USED ZIDOVUDINE - Converted to months since reference point

Num	Variable	Type	Len	Format	Label
421	SUBJ_ID	Char	8		MHCS SUBJECT IDENTIFIER

Data Set Name: mhcs_ii_f91.sas7bdat

Num	Variable	Type	Len	Format	Informat	Label
1	ASCCODE	Num	4			Q15. ASCITES UNTREATED REASON SPEC. CODE
2	NEUROCD	Num	4			OTHER NEUROLOGICAL ABNORMALITIES CODE
3	VISITNUM	Num	4	1.		VISIT NUMBER
4	NoBM	Num	4	4.	4.	BASIC MEASUREMENTS NOT OBTAINED
5	feet	Num	4	2.	19.	Q1. FEET (HEIGHT)
6	inches	Num	4	3.	19.	Q1. INCHES (HEIGHT)
7	cms	Num	4	6.	19.	Q1. CENTIMETERS (HEIGHT)
8	pounds	Num	4	5.1	19.	Q2. WEIGHT IN POUNDS
9	kgs	Num	4	5.1	19.	Q2. WEIGHT IN KILOGRAMS
10	fahrenheit	Num	4	5.1		Q3. TEMPERATURE IN FAHRENHEIT
11	celsius	Num	4	5.1		Q3. TEMPERATURE IN CELSIUS
12	systolic	Num	4	6.	19.	Q4. BLOOD PRESSURE - SYSTOLIC
13	diastolic	Num	4	6.	19.	Q4. BLOOD PRESSURE - DIASTOLIC
14	blood	Num	4	1.	4.	Q5. URINALYSIS - BLOOD LEVEL
15	protein	Num	4	1.	4.	Q6. URINALYSIS - PROTEIN LEVEL
16	nitrite	Num	4	1.	4.	Q7. URINALYSIS - NITRITE LEVEL
17	a_acid	Num	4	1.	4.	Q8. URINALYSIS - ASCORBIC ACID LEVEL
18	glucose	Num	4	1.	4.	Q9. URINALYSIS - GLUCOSE LEVEL
19	ph	Num	4	1.	4.	Q10. URINALYSIS - pH LEVEL
20	hem_arth	Num	4	1.	4.	Q11. HEMOPHILIC ARTHROPATHY-NONE
21	HEMARTH1	Num	4	4.	4.	Q11. HAS JOINT REPLACEMENT
22	HEMARTH2	Num	4	4.	4.	Q11. JOINT AFFECTED NOW
23	HEMARTH3	Num	4	4.	4.	Q11. TWO OR MORE JOINTS
24	kar_perf	Num	4	1.	4.	Q12. KARNOFSKY PERFORMANCE
25	affected	Num	4	1.	4.	Q13. KAR PERF AFFECTED BY HEM ARTH
26	fatigue	Num	4	1.	4.	Q14. FATIGUE LEVEL
27	ascites	Num	4	1.	4.	Q15. ASCITES
28	hepatome	Num	4	1.	4.	Q16. HEPATOMEGALY
29	splenome	Num	4	1.	4.	Q17. SPLENOMEGALY
30	splnsize	Num	4	19.	19.	Q17. SPLEEN'S SIZE (IN CM.)
31	h_zoster	Num	4	1.	4.	Q18. HERPES ZOSTER (SHINGLES)
32	lym_none	Num	4	2.	4.	Q19. LYMPHADENOPATHY - NONE
33	lym_cerv	Num	4	1.	4.	Q19. LYMPHADENOPATHY - CERVICAL
34	cervsite	Num	4	2.	19.	Q19. CERVICAL LYMPH - # SITES
35	cervshot	Num	4	1.	4.	Q19. CERVICAL LYMPH - SHOTTY
36	lym_othe	Num	4	1.	4.	Q19. LYMPHADENOPATHY - OTHER

Num	Variable	Type	Len	Format	Informat	Label
37	lgstnode	Num	4	2.	19.	Q19a.DIAMETER OF LARGEST LYMPH NODE
38	nocond	Num	4	4.	4.	NOTHING CHECKED FOR Q.20
39	p_neurop	Num	4	1.	4.	Q20. PERIPHERAL NEUROPATHY
40	spider	Num	4	1.	4.	Q20. SPIDER ANGIOMATA
41	neuro_ab	Num	4	1.	4.	Q20. OTHER NEUROLOGICAL ABNORMAL
42	palmare	Num	4	1.	4.	Q20. PALMAR ERYTHEMA
43	wgt_loss	Num	4	1.	4.	Q20. UNEXPLAINED WEIGHT LOSS
44	edema	Num	4	1.	4.	Q20. LOWER EXTREMITY EDEMA
45	memory	Num	4	1.	4.	Q20. MEMORY OR CONCENTRATION PROBLEMS
46	depressn	Num	4	1.	4.	Q20. CHRONIC DEPRESSION
47	gynecom	Num	4	1.	4.	Q20. GYNECOMASTIA
48	arthralg	Num	4	1.	4.	Q20. ARTHRALGIAS/ARTHRITIS
49	nausea	Num	4	1.	4.	Q20. NAUSEA
50	tenderns	Num	4	1.	4.	Q20. RIGHT UP QUAD ABD/LIVER TENDERNESS
51	i_sclera	Num	4	1.	4.	Q20. ICTERIC SCLERA
52	jaundice	Num	4	1.	4.	Q20. JAUNDICE
53	atrophy	Num	4	1.	4.	Q20. TEMPORAL MUSCLE ATROPHY
54	visit_DT	Num	4	8.		FOLLOW UP PE VISIT DATE (SAS DATE): Converted to days since reference date
55	visit_DF	Num	4			FOLLOW UP PE VISIT DATE IMPUTE FLAG
56	SUBJ_ID	Char	8			MHCS SUBJECT IDENTIFIER

Data Set Name: mhcs_ii_f92.sas7bdat

Num	Variable	Type	Len	Format	Informat	Label
1	GENDEFCD	Num	4			Q4A. Code assigned to other genetic def.
2	q7bags	Num	4			Q7. # of bags
3	q7mls	Num	4			Q7. Total MLS
4	DRUGCD1A	Num	4			Q16A. Code for 2nd other standard int.
5	DRUGCD1B	Num	4			Q16A. Code for 2nd other ribavirin
6	DRUGCD2	Num	4			Q17. Code assigned to other brand used (
7	DRUGCD3	Num	4			Q18. Code assigned to other brand used (
8	DRUGCD4	Num	4			Q19. Code assigned to other brand used (
9	DRUGCD5	Num	4			Q19. Code assigned to other brand used (
10	Q1	Num	4	4.	4.	Q1. Subject status
11	Q1REASON	Num	4	4.	4.	Q1. Reason withdrew from study
12	Q1REASCD	Num	4	6.	6.	Q1. Reason withdrew -Other Sp. CODE
13	CNCRCD	Num	4	6.	6.	Q1B. Code assigned to other cancer
14	Q1c	Num	4	6.	6.	Q1C. Autopsy performed
15	Q1d	Num	4	6.	6.	Q1D. Liver Tissue obtained
16	Q1e1	Num	4	4.	4.	Q1E1. Source=death certificate
17	Q1e2	Num	4	4.	4.	Q1E2. Source=medical record
18	Q1e3	Num	4	4.	4.	Q1E3. Source=spouse or relative
19	Q1e4	Num	4	4.	4.	Q1E4. Source=non-relative
20	Q1e5	Num	4	4.	4.	Q1E5. Source=obituary
21	Q1e6	Num	4	4.	4.	Q1E6. Source=other
22	Q2a	Num	4	4.	4.	Q2A. After or same as date of enrollment
23	Q3	Num	8	6.	6.	Q4A. What is hemophilia genetic defect
24	Q5a	Num	4	4.	4.	Q5A. Clotting Factor Products-None
25	Q5b	Num	4	4.	4.	Q5B. Clotting Factor Products-Recombin.
26	Q5c	Num	4	4.	4.	Q5C. Clotting Factor Products-Monoclonal
27	Q5d	Num	4	4.	4.	Q5D. Clotting Factor Products-High Pur
28	Q5e	Num	4	4.	4.	Q5E. Clotting Factor Products-Int Purity
29	Q5f	Num	4	4.	4.	Q5F. Clotting Factor Products-Cryoprecip
30	Q5g	Num	4	4.	4.	Q5G. Other Blood Components
31	Q6_none	Num	4	4.	4.	Q6. No factor concentrate was received
32	Q6_unit	Num	4	4.	4.	Q6. Units of factor concentrate KNOWN
33	Q6_mg	Num	4	4.	4.	Q6. Micrograms of factor concentrate
34	Q6_unk	Num	4	4.	4.	Q6. UNKNOWN amount of factor concentrate
35	Q6_units	Num	4	19.	19.	Q6. Number of units factor concentrate
36	Q6_micro	Num	4	19.	19.	Q6. No. of micrograms of factor conc.

Num	Variable	Type	Len	Format	Informat	Label
37	Q6a	Num	4	4.	4.	Q6A. Basis factor was administered
38	Q7	Num	4	6.	6.	Q7. How many units of cryo did sub rec
39	Q8	Char	3	\$3.	\$3.	Q8. HBV vaccine since last FU visit ?
40	Q9a	Num	4	6.	6.	Q9A. HBV chronic carrier stat of subj
41	Q10	Num	4	6.	6.	Q10. Vaccinated for hep A since 1st FU
42	Q11	Num	4	6.	6.	Q11. Current HCV antibody status
43	Q12	Num	4	6.	6.	Q12. HIV status
44	Q13	Num	4	6.	6.	Q13. AIDS-defining condition
45	Q13a1	Num	4	4.	4.	Q13A1. CD4 <200 cells/ul or <14%
46	Q13a2	Num	4	4.	4.	Q13A2. CMV (not liver, spleen, lymph)
47	Q13a3	Num	4	4.	4.	Q13A3. Candidiasis of esophagus or lungs
48	Q13a4	Num	4	4.	4.	Q13A4. Cervical cancer, invasive
49	Q13a5	Num	4	4.	4.	Q13A5. Coccidioidmycosis, extrapulmonary
50	Q13a6	Num	4	4.	4.	Q13A6. Cryptococcosis, extrapulmonary
51	Q13a7	Num	4	4.	4.	Q13A7. Cryptosporidiosis with diarrhea f
52	Q13a8	Num	4	4.	4.	Q13A8. Herpes simplex, ulcer for > 1 mon
53	Q13a9	Num	4	4.	4.	Q13A9. Herpes simplex in lungs or esopha
54	Q13a10	Num	4	4.	4.	Q13A10. Histoplasmosis, extrapulmonary
55	Q13a11	Num	4	4.	4.	Q13A11. HIV encephalopathy/dementia
56	Q13a12	Num	4	4.	4.	Q13A12. Isosporiasis with diarrhea for >
57	Q13a13	Num	4	4.	4.	Q13A13. Kaposi's syndrome
58	Q13a14	Num	4	4.	4.	Q13A14. Lymphoid interstitial pneumonia
59	Q13a15	Num	4	4.	4.	Q13A15. Lymphoma of the brain (CNS Prima
60	Q13a16	Num	4	4.	4.	Q13A16. Mycobacterium avium (not only lu
61	Q13a17	Num	4	4.	4.	Q13A17. Non-Hodgkin's Lymphoma (not T-c
62	Q13a18	Num	4	4.	4.	Q13A18. Pneumocystis carinii pneumonia (
63	Q13a19	Num	4	4.	4.	Q13A19. Pneumonia, recurrent bacterial (
64	Q13a20	Num	4	4.	4.	Q13A20. Progressive multifocal leukoence
65	Q13a21	Num	4	4.	4.	Q13A21. Pulmonary tuberculosis
66	Q13a22	Num	4	4.	4.	Q13A22. Salmonella septicemia, recurrent
67	Q13a23	Num	4	4.	4.	Q13A23. Toxoplasmosis of the brain
68	Q13a24	Num	4	4.	4.	Q13A24. Wasting syndrome (emaciation,"sl
69	Q13a25	Num	4	4.	4.	Q13A25. Other multiple of recurrent bact
70	Q14a	Num	4	4.	4.	Q14A. HCV related conditions-None
71	Q14b	Num	4	4.	4.	Q14B. Jaundice, persistent > 1 month
72	Q14c	Num	4	4.	4.	Q14C. Ascites (hepatic-related)
73	Q14e	Num	4	4.	4.	Q14E. Esophageal varices
74	Q14f	Num	4	4.	4.	Q14F. Bleeding esophageal varices
75	Q14l	Num	4	4.	4.	Q14L. Biopsy proven Cirrhosis

Num	Variable	Type	Len	Format	Informat	Label
76	HCVCod1	Num	4	6.	6.	Q14. Code assigned to other HCV related
77	HCVCod2	Num	4	6.	6.	Q14. Code assigned to other HCV related
78	Q15	Num	4	6.	6.	Q15. Did subject receive HCV treatment
79	Q16	Num	4	4.	4.	Q16. Was the subject treated at the same
80	Q16a1	Num	4	6.	6.	Q16A. Rebetrone (standard interferon & ri
81	Q16a2	Num	4	6.	6.	Q16A. Other standard interferon
82	Q16a3	Num	4	4.	4.	Q16A. Other ribarivin
83	Q16c	Num	4	6.	6.	Q16C. Is subject currently using it?
84	Q16d	Num	4	6.	6.	Q16D. Why is the subject no longer using
85	Q17	Num	4	4.	4.	Q17. Was the subject treated with standa
86	Q17a	Num	4	4.	4.	Q17A. Brand used
87	Q17c	Num	4	4.	4.	Q17C. Is subject currently using it?
88	Q17d	Num	4	4.	4.	Q17D. Why is the subject no longer using
89	Q18	Num	4	4.	4.	Q18. Was the subject treated at the same
90	Q18a1	Num	4	4.	4.	Q18A. Brand used: PEG-Intron
91	Q18a2	Num	4	4.	4.	Q18A. Brand used: Pegasys
92	Q18a3	Num	4	4.	4.	Q18A. Brand used: Rebetol
93	Q18a4	Num	4	4.	4.	Q18A. Brand used: Virazole
94	Q18a5	Num	4	4.	4.	Q18A. Brand used: Other Pegylated Interf
95	Q18a6	Num	8	4.	4.	Q18A. Brand used: Other Ribavirin
96	Q18c	Num	4	4.	4.	Q18C. Is subject currently using it?
97	Q18d	Num	4	4.	4.	Q18D. Why is the subject no longer using
98	Q19	Num	4	4.	4.	Q19. Was the subject treated with pegyla
99	Q19a	Num	4	6.	6.	Q19A. Brand used
100	Q19c	Num	4	6.	6.	Q19C. Is subject currently using it?
101	Q19d	Num	4	6.	6.	Q19D. Why is the subject no longer using
102	Q20	Num	4	4.	4.	Q20. Since last FU, had liver biopsy ?
103	Q20a	Num	4	4.	4.	Q20A. reason for the liver biopsy
104	BIOPSYCD	Num	4	6.	6.	Q20A. Other reason for liver biopsy code
105	Q21	Num	4	6.	6.	Q21. Subject ever cons. for liver transp
106	Q21a	Num	4	4.	4.	Q21A. Has the subject received a liver t
107	Q22	Num	4	4.	4.	Q22. Subject been diagnosed with cancer
108	Q22ASCD1	Num	4	11.	11.	Q22A. Cancer #1-PRIMARY SITE CODE
109	Q22AHCD1	Num	4	11.	11.	Q22A. Cancer #1-HISTOLOGIC SUBTYPE CODE
110	Q22ATCD1	Num	4	11.	11.	Q22A. Cancer #1-TYPE CODE
111	Q22a_loc	Num	4	6.	6.	Q22A. Cancer #1-Is this cancer localized
112	Q22ADIAG	Num	4	4.	4.	Q22A. Cancer #1-Where cancer diagnosed
113	Q22BSCD2	Num	4	11.	11.	Q22B. Cancer #2-PRIMARY SITE CODE
114	Q22BHCD2	Num	4	11.	11.	Q22B. Cancer #2-HISTOLOGIC SUBTYPE CODE

Num	Variable	Type	Len	Format	Informat	Label
115	Q22BTCD2	Num	4	11.	11.	Q22B. Cancer #2-TYPE CODE
116	Q22b_loc	Num	4	6.	6.	Q22B. Cancer #2-Is this cancer localized
117	Q22BDIAG	Num	4	4.	4.	Q22B. Cancer #2-Where cancer diagnosed
118	Q23a	Num	4	4.	4.	Q23A. NO GI BLEED, ETC. SINCE las visit
119	Q23b	Num	4	4.	4.	Q23B. YES-GI BLEED SINCE last visit
120	Q23c	Num	4	4.	4.	Q23C. YES-GASTROINT. PERF. last visit
121	Q23d	Num	4	4.	4.	Q23D. YES-GASTROINT. OBST. SINCE last vi
122	Q23e	Num	4	6.	6.	Q23E. UNKNOWN-GI BLEED,ETC. SINCE last v
123	Q23a2	Num	4	4.	4.	Q23A. Have you sent in an Upper GI Suppl
124	DEATH_DT	Num	4	8.		Q1a. DATE OF DEATH (SAS DATE): Converted to days since reference date
125	DEATH_DF	Num	4			Q1a. DATE OF DEATH IMPUTE FLAG
126	CVIS_DT	Num	4	8.		DATE MOST RECENT CLINIC VISIT (SAS DATE): Converted to days since reference date
127	CVIS_DF	Num	4			DATE MOST REC. CLINIC VISIT IMPUTE FLAG
128	FORM_DT	Num	4	8.		Q24. DATE FORM COMPLETED (SAS DATE): Converted to days since reference date
129	FORM_DF	Num	4			Q24. DATE FORM COMPLETED IMPUTE FLAG
130	BLEED_DT	Num	4	8.		Q23. DATE THE BLEED OCCURRED (SAS DATE): Converted to days since reference date
131	BLEED_DF	Num	4			Q23. DATE BLEED OCCURRED IMPUTE FLAG
132	Q10__MONTHS	Num	8			Q10. Date of last Hep A vaccination - Converted to months since reference point
133	Q13A1_MONTHS	Num	8			Q13A1. CD4 <200 cells/ul or <14% date - Converted to months since reference
134	Q13A2_MONTHS	Num	8			Q13A2. CMV (not liver, spleen, lymph) date - Converted to months since reference
135	Q13A3_MONTHS	Num	8			Q13A3. Candidiasis of esophagus or lungs date - Converted to months since reference
136	Q13A4_MONTHS	Num	8			Q13A4. Cervical cancer, invasive date - Converted to months since reference
137	Q13A5_MONTHS	Num	8			Q13A5. Coccidioidmycosis, extrapulmonary date - Converted to months since reference
138	Q13A6_MONTHS	Num	8			Q13A6. Cryptococcosis, extrapulmonary date - Converted to months since reference
139	Q13A7_MONTHS	Num	8			Q13A7. Cryptosporidiosis with diarrhea f date - Converted to months since reference
140	Q13A8_MONTHS	Num	8			Q13A8. Herpes simplex, ulcer for > 1 mon date - Converted to months since reference
141	Q13A9_MONTHS	Num	8			Q13A9. Herpes simplex in lungs or esopha date - Converted to months since reference
142	Q13A10_MONTHS	Num	8			Q13A10. Histoplasmosis, extrapulmonary date - Converted to months since reference

Num	Variable	Type	Len	Format	Informat	Label
143	Q13A11_MONTHS	Num	8			Q13A11. HIV encephalopathy/dementia date - Converted to months since reference
144	Q13A12_MONTHS	Num	8			Q13A12. Isosporiasis with diarrhea for > date - Converted to months since reference
145	Q13A13_MONTHS	Num	8			Q13A13. Kaposi's syndrome date - Converted to months since reference
146	Q13A14_MONTHS	Num	8			Q13A14. Lymphoid interstitial pneumonia date - Converted to months since reference
147	Q13A15_MONTHS	Num	8			Q13A15. Lymphoma of the brain (CNS Primary) date - Converted to months since reference
148	Q13A16_MONTHS	Num	8			Q13A16. Mycobacterium avium (not only...) date - Converted to months since reference
149	Q13A17_MONTHS	Num	8			Q13A17. Non-Hodgkin's Lymphoma (not..) date - Converted to months since reference
150	Q13A18_MONTHS	Num	8			Q13A18. Pneumocystis carinii pneumonia date - Converted to months since reference
151	Q13A19_MONTHS	Num	8			Q13A19. Pneumonia, recurrent bacterial date - Converted to months since reference
152	Q13A20_MONTHS	Num	8			Q13A20. Progressive multifocal leukoence date - Converted to months since reference
153	Q13A21_MONTHS	Num	8			Q13A21. Pulmonary tuberculosis date - Converted to months since reference
154	Q13A22_MONTHS	Num	8			Q13A22. Salmonella septicemia, recurrent date - Converted to months since reference
155	Q13A23_MONTHS	Num	8			Q13A23. Toxoplasmosis of the brain date - Converted to months since reference
156	Q13A24_MONTHS	Num	8			Q13A24. Wasting syndrome (emaciation...) - Converted to months since reference
157	Q13A25_MONTHS	Num	8			Q13A25. Other multiple of recurrent bact date - Converted to months since reference
158	Q14B__MONTHS	Num	8			Q14B. Jaundice, persistent > 1 month - Date converted to months since reference point
159	Q14C__MONTHS	Num	8			Q14C. Ascites (hepatic-related) - Date converted to months since reference point
160	Q14E__MONTHS	Num	8			Q14E. Esophageal varices - Date converted to months since reference point
161	Q14F__MONTHS	Num	8			Q14F. Bleeding esophageal varices - Date converted to months since reference point
162	Q14L__MONTHS	Num	8			Q14L. Biopsy proven Cirrhosis - Date converted to months since reference point
163	Q16B__MONTHS	Num	8			Q16B. Date use began - Converted to months since reference point
164	Q17B__MONTHS	Num	8			Q17B. Date use began - Converted to months since reference point
165	Q18B__MONTHS	Num	8			Q18B. Date use began - Converted to months since reference point
166	Q19B__MONTHS	Num	8			Q19B. Date use began - Converted to months since reference point
167	Q21A__MONTHS	Num	8			Q21A. Date of liver transplant - Converted to months since reference point
168	Q22A__MONTHS	Num	8			Q22A. Cancer #1-Date of diagnosis - Converted to months since reference point

Num	Variable	Type	Len	Format	Informat	Label
169	Q22B__MONTHS	Num	8			Q22B. Cancer #2-Date of diagnosis - Converted to months since reference point
170	SUBJ_ID	Char	8			MHCS SUBJECT IDENTIFIER

Data Set Name: f26.sas7bdat

Num	Variable	Type	Len	Format	Label
1	H26_NS	Num	8		NOTIFICATION SOURCE
2	H26_NSS	Num	8		NOTIFICATION SOURCE-SPECIFY
3	H26_CC	Num	8		CONFIRMATION CATEGORY
4	H26_DIA	Char	65		DIAGNOSIS
5	H26_CTY	Num	8		CANCER TYPE
6	H26_ICD	Char	10		ICD-O CODE
7	H26_AD	Num	8		AIDS DEFINING
8	H26_CD	Num	8		CONFIRMING DOCUMENTATION
9	H26_DT	Num	8		DOCUMENTATION TYPE
10	H26_DTS	Num	8		DOCUMENTATION TYPE-SPECIFY
11	H26_CT	Num	8		WAS CANCER TREATED
12	H26_RX	Num	8		DID CANCER RESPOND TO RX
13	H26_CTF	Num	8		CASE CLOSED TO FOLLOW-UP
14	DIA_DT	Num	4	8.	DIAGNOSIS DATE: SAS DATE: Converted to days since reference date
15	DIA_DF	Num	8		DIAGNOSIS DATE: IMPUTE FLAG
16	SUBJ_ID	Char	8		MHCS SUBJECT IDENTIFIER

Data Set Name: f50.sas7bdat

Num	Variable	Type	Len	Format	Label
1	PRODHX_V	Num	4		FLAG TO INDICATE PRODUCT HIST. VERIFIED
2	H50_LANG	Num	4		WHAT LANGUAGE IS SURVEY PRINTED IN ?
3	FORM	Num	4		Form Number
4	H50_A1	Num	4		RELATIVE HAD HEMOPHILIA OR von WILLEBRAN
5	H50_A1A	Num	4		RELATIVE WITH HEMOPHILIA OR vW HAD AN IN
6	H50_A2	Num	4		ANY BROTHERS WITH HEMOPHILIA
7	H50_A2A	Num	4		# BROTHERS WITH HEMOPHILIA: TOP-CODED AT 3
8	H50_A3	Num	4		SISTERS/BROTHERS W/ von WILLEBRAND'S DIS
9	H50_A3A	Num	4		# SISTERS/BROTHERS W/ von WILLEBRAND'S DISEASE: TOP-CODED AT 3
10	H50_B4	Num	4		RECEIVED PLASMA OR CRYOPRECIPITATE
11	H50_B4AA	Num	4		AGE (YRS) FIRST RECEIVED PLASMA OR CRYOP
12	H50_B4AM	Num	4		AGE (MTHS) FRST RECEIVED PLASMA/CRYOPREC
13	H50_B4BA	Num	4		AGE (YRS) LAST RECEIVED PLASMA/CRYOPRECI
14	H50_B4BM	Num	4		AGE (MTHS) LAST RECEIVED PLASMA/CRYOPREC
15	h50_B5	Num	4		RECEIVED A TRANSFUSION OF WHOLE OR RED C
16	H50_B5AA	Num	4		AGE (YRS) RECVD A TRANSFUSION OF WHOLE/R
17	H50_B5AM	Num	4		AGE (MTHS) RECVD A TRANSFUSION OF WHOLE/
18	H50_B6	Num	4		RECEIVED A TRANSFUSION OF PLATELETS
19	H50_B6AA	Num	4		AGE (YRS) RECVD A TRANSFUSION OF PLATELE
20	H50_B6AM	Num	4		AGE (MTHS) RECVD A TRANSFUSION OF PLATEL
21	H50_B7	Num	4		RECEIVED A NON-HEAT-TREATED FACTOR
22	H50_B7AA	Num	4		AGE (YRS) RECVD A NON-HEAT-TREATED FACTO
23	H50_B7AM	Num	4		AGE (MTHS) RECVD A NON-HEAT-TREATED FACT
24	H50_B8	Num	4		RCVD AT LEAST 50,000 UNITS OF FACTOR CON
25	H50_B8A	Num	4		AGE 1ST RCVD AT LEAST 50,000 UNITS OF FA
26	H50_B8B	Num	4		AGE 2ND RCVD AT LEAST 50,000 UNITS OF FA
27	H50_B8C	Num	4		AGE 3RD RCVD AT LEAST 50,000 UNITS OF FA
28	H50_B9	Num	4		<6 YEARS OLD, USE FACTOR CONCENTRATE
29	H50_B9A	Num	4		<6 YEARS OLD, AVERAGE USE OF FACTOR CONC
30	H50_B10	Num	4		<6 YEARS OLD, USE PLASMA/CRYOPRECIPIATE
31	H50_B10A	Num	4		<6 YEARS OLD, AVERAGE USE OF PLASMA/CRYO
32	H50_B11	Num	4		6-12 YEARS OLD, USE FACTOR CONCENTRATE
33	H50_B11A	Num	4		6-12 YEARS OLD, AVERAGE USE OF FACTOR CO
34	H50_B12	Num	4		6-12 YEARS OLD, USE PLASMA/CRYOPRECIPIAT
35	H50_B12A	Num	4		6-12 YEARS OLD, AVG USE OF PLASMA/CRYOPR
36	H50_B13	Num	4		13-20 YEARS OLD, USE FACTOR CONCENTRATE

Num	Variable	Type	Len	Format	Label
37	H50_B13A	Num	4		13-20 YEARS OLD, AVERAGE USE OF FACTOR C
38	H50_B14	Num	4		13-20 YEARS OLD, USE PLASMA/CRYOPRECIPIA
39	H50_B14A	Num	4		13-20 YRS: AVERAGE USE OF PLASMA/CRYOPRE
40	H50_B15	Num	4		21-30 YEARS OLD, USE FACTOR CONCENTRATE
41	H50_B15A	Num	4		21-30 YEARS OLD, AVERAGE USE OF FACTOR C
42	H50_B16	Num	4		21-30 YEARS OLD, USE PLASMA/CRYOPRECIPIA
43	H50_B16A	Num	4		21-30 YRS: AVERAGE USE OF PLASMA/CRYOPRE
44	H50_B17	Num	4		31-40 YEARS OLD, USE FACTOR CONCENTRATE
45	H50_B17A	Num	4		31-40 YEARS OLD, AVERAGE USE OF FACTOR C
46	H50_B18	Num	4		31-40 YEARS OLD, USE PLASMA/CRYOPRECIPIA
47	H50_B18A	Num	4		31-40 YRS: AVERAGE USE OF PLASMA/CRYOPRE
48	H50_B19	Num	4		41-50 YEARS OLD, USE FACTOR CONCENTRATE
49	H50_B19A	Num	4		41-50 YEARS OLD, AVERAGE USE OF FACTOR C
50	H50_B20	Num	4		41-50 YEARS OLD, USE PLASMA/CRYOPRECIPIA
51	H50_B20A	Num	4		41-50 YRS: AVERAGE USE OF PLASMA/CRYOPRE
52	H50_B21	Num	4		51-60 YEARS OLD, USE FACTOR CONCENTRATE
53	H50_B21A	Num	4		51-60 YEARS OLD, AVERAGE USE OF FACTOR C
54	H50_B22	Num	4		51-60 YEARS OLD, USE PLASMA/CRYOPRECIPIA
55	H50_B22A	Num	4		51-60 YRS: AVERAGE USE OF PLASMA/CRYOPRE
56	H50_B23	Num	4		>=60 YEARS OLD, USE FACTOR CONCENTRATE
57	H50_B23A	Num	4		>=60 YEARS OLD, AVERAGE USE OF FACTOR CO
58	H50_B24	Num	4		>= YEARS OLD, USE PLASMA/CRYOPRECIPIATE
59	H50_B24A	Num	4		>= YEARS OLD, AVERAGE USE OF PLASMA/CRYO
60	H50_C1	Num	4		1ST PRESCRIPTION DRUG TAKEN
61	H50_C1Y	Num	4		1ST PRESCRIPTION DRUG TAKEN-hEPATOTOXIC?
62	H50_C2	Num	4		2ND PRESCRIPTION DRUG TAKEN
63	H50_C2Y	Num	4		2ND PRESCRIPTION DRUG TAKEN-hEPATOTOXIC?
64	H50_C3	Num	4		3RD PRESCRIPTION DRUG TAKEN
65	H50_C3Y	Num	4		3RD PRESCRIPTION DRUG TAKEN-hEPATOTOXIC?
66	H50_C4	Num	4		4TH PRESCRIPTION DRUG TAKEN
67	H50_C4Y	Num	4		4TH PRESCRIPTION DRUG TAKEN-hEPATOTOXIC?
68	H50_C5	Num	4		5TH PRESCRIPTION DRUG TAKEN
69	H50_C5Y	Num	4		5TH PRESCRIPTION DRUG TAKEN-hEPATOTOXIC?
70	H50_C6	Num	4		6TH PRESCRIPTION DRUG TAKEN
71	H50_C6Y	Num	4		6TH PRESCRIPTION DRUG TAKEN-hEPATOTOXIC?
72	H50_C7	Num	4		7TH PRESCRIPTION DRUG TAKEN
73	H50_C7Y	Num	4		7TH PRESCRIPTION DRUG TAKEN-hEPATOTOXIC?
74	H50_C8	Num	4		8TH PRESCRIPTION DRUG TAKEN
75	H50_C8Y	Num	4		8TH PRESCRIPTION DRUG TAKEN-hEPATOTOXIC?

Num	Variable	Type	Len	Format	Label
76	H50_C9	Num	4		9TH PRESCRIPTION DRUG TAKEN
77	H50_C9Y	Num	4		9TH PRESCRIPTION DRUG TAKEN-hEPATOTOXIC?
78	H50_C10	Num	4		10TH PRESCRIPTION DRUG TAKEN
79	H50_C10Y	Num	4		10TH PRESCRIPTION DRUG TAKEN-hEPATOTOXIC
80	H50_HIV	Num	4		CURRENTLY TAKING MEDS FOR HIV/AIDS
81	H50_HD1	Num	4		ANTIRETROVIRAL MEDS-AMPRENAVIR
82	H50_HD2	Num	4		ANTIRETROVIRAL MEDS-ABACAVIR
83	H50_HD3	Num	4		ANTIRETROVIRAL MEDS-COMBIVIR
84	H50_HD4	Num	4		ANTIRETROVIRAL MEDS-DIDANOSINE (DDI)
85	H50_HD5	Num	4		ANTIRETROVIRAL MEDS-DELAVIRDINE
86	H50_HD6	Num	4		ANTIRETROVIRAL MEDS-EFAVIRENZ
87	H50_HD7	Num	4		ANTIRETROVIRAL MEDS-HYDROXYUREA
88	H50_HD8	Num	4		ANTIRETROVIRAL MEDS-INDINAVIR
89	H50_HD9	Num	4		ANTIRETROVIRAL MEDS-LAMIVUDINE (3TC)
90	H50_HD10	Num	4		ANTIRETROVIRAL MEDS-LOPINAVIR/RITONAVIR(
91	H50_HD11	Num	4		ANTIRETROVIRAL MEDS-NEVIRAPINE(VIRAMUNE)
92	H50_HD12	Num	4		ANTIRETROVIRAL MEDS-NELFINAVIR
93	H50_HD13	Num	4		ANTIRETROVIRAL MEDS-RITONAVIR
94	H50_HD14	Num	4		ANTIRETROVIRAL MEDS-SAQUINAVIR
95	H50_HD15	Num	4		ANTIRETROVIRAL MEDS-STAVUDINE
96	H50_HD16	Num	4		ANTIRETROVIRAL MEDS-TRIZAVIR
97	H50_HD17	Num	4		ANTIRETROVIRAL MEDS-ZALCITABINE (DDC)
98	H50_HD18	Num	4		ANTIRETROVIRAL MEDS-ZIDOVUDINE (AZT)
99	H50_HD19	Num	4		PROPHYLAXIS MEDS-ACYCLOVIR
100	H50_HD20	Num	4		PROPHYLAXIS MEDS-AEROSOLIZED PENTAMIDINE
101	H50_HD21	Num	4		PROPHYLAXIS MEDS-ATOVAQUONE
102	H50_HD22	Num	4		PROPHYLAXIS MEDS-DAPSONE
103	H50_HD23	Num	4		PROPHYLAXIS MEDS-AZITHROMYCIN
104	H50_HD24	Num	4		PROPHYLAXIS MEDS-CLARITHROMYCIN
105	H50_HD25	Num	4		PROPHYLAXIS MEDS-FAMCICLOVIR
106	H50_HD26	Num	4		PROPHYLAXIS MEDS-FLUCONAZOLE
107	H50_HD27	Num	4		PROPHYLAXIS MEDS-GANCICLOVIR
108	H50_HD28	Num	4		PROPHYLAXIS MEDS-RIFABUTIN
109	H50_HD29	Num	4		PROPHYLAXIS MEDS-TRIMETHOPRIM/SULFA
110	H50_HD30	Num	4		PROPHYLAXIS MEDS-VALACYCLOVIR
111	H50_OHD1	Num	4		1ST OTHER HIV TREATMENT DRUG
112	H50_OHD2	Num	4		2ND OTHER HIV TREATMENT DRUG
113	H50_OHD3	Num	4		3RD OTHER HIV TREATMENT DRUG
114	H50_OHD4	Num	4		4TH OTHER HIV TREATMENT DRUG

Num	Variable	Type	Len	Format	Label
115	H50_OHD5	Num	4		5TH OTHER HIV TREATMENT DRUG
116	H50_LA1	Num	4		REDUCE AMOUNT OF TIME SPENT ON WORK?
117	H50_LA2	Num	4		ACCOMPLISH LESS THAN YOU WOULD LIKE?
118	H50_LA3	Num	4		LIMITED IN THE KIND OF WORK/ACTIVITIES?
119	H50_LA4	Num	4		HAVE DIFFICULTY PERFORMING WORK/ACTIVITI
120	H50_LA5	Num	4		PAIN IN YOUR JOINTS PAST 4 WEEKS
121	H50_LA6	Num	4		PAIN OF OTHER TYPES PAST 4 WEEKS
122	H50_LA7	Num	4		HOW MUCH DID PAIN INTERFERE WITH NORMAL
123	H50_LB8	Num	4		PAST MONTH: HOW OFTEN TAKEN ACETAMINOPHE
124	H50_LB9	Num	4		PAST 3 MONTHS: # ACETAMINOPHEN A WEEK
125	H50_LB10	Num	4		PAST 3 MONTHS: MAX # ACETAMINOPHEN A WEE
126	H50_LB11	Num	4		3-12 MONTHS: # ACETAMINOPHEN A WEEK
127	H50_LB12	Num	4		3-12 MONTHS: MAX # ACETAMINOPHEN A WEEK
128	H50_LB13	Num	4		PAST MONTH: HOW OFTEN TAKEN NSAIDS
129	H50_LB14	Num	4		PAST 3 MONTHS: # NSAIDS A WEEK
130	H50_LB15	Num	4		PAST 3 MONTHS: MAX # NSAIDS A WEEK
131	H50_LB16	Num	4		3-12 MONTHS: # NSAIDS A WEEK
132	H50_LB17	Num	4		3-12 MONTHS: MAX # NSAIDS A WEEK
133	H50_LB18	Num	4		PAST MONTH: HOW OFTEN TAKEN CODEINE/OTHE
134	H50LB19P	Num	4		PAST 3 MONTHS: # CODEINE/OTHER PILLS A W
135	H50LB19I	Num	4		PAST 3 MONTHS: # CODEINE/OTHER INJECTION
136	H50LB20P	Num	4		PAST 3 MONTHS: MAX # CODEINE/OTHER PILLS
137	H50LB20I	Num	4		PAST 3 MONTHS: MAX # CODEINE/OTHER INJEC
138	H50LB21P	Num	4		3-12 MONTHS: # CODEINE/OTHER PILLS A WEE
139	H50LB21I	Num	4		3-12 MONTHS: # CODEINE/OTHER INJECTIONS
140	H50LB22P	Num	4		3-12 MONTHS: MAX # CODEINE/OTHER PILLS A
141	H50LB22I	Num	4		3-12 MONTHS: MAX # CODEINE/OTHER INJECTI
142	H50_LC23	Num	4		EVER HAD A DRINK CONTAINIGN ALCOHOL
143	H50LC23A	Num	4		AGE FIRST HAD A DRINK
144	H50LC23B	Num	4		AGE LAST HAD A DRINK
145	H50LC24W	Num	4		PAST 3 MONTH, # OF DRINKS PER WEEK
146	H50LC24M	Num	4		PAST 3 MONTH, # OF DRINKS PER MONTH
147	H50LC25W	Num	4		PAST 3 MONTHS, MAX # DRINKS ANY ONE WEEK
148	H50LC25D	Num	4		PAST 3 MONTHS, MAX # DRINKS ANY ONE DAY
149	H50_LC26	Num	4		YEAR FOUND OUT YOU HAD HCV
150	H50LC27W	Num	4		YEAR BEFORE HCV, # OF DRINKS A WEEK
151	H50LC27M	Num	4		YEAR BEFORE HCV, # OF DRINKS A MONTH
152	H50LC28W	Num	4		YEAR BEFORE HCV, MAX # OF DRINKS A WEEK
153	H50LC28D	Num	4		YEAR BEFORE HCV, MAX # OF DRINKS A DAY

Num	Variable	Type	Len	Format	Label
154	H50LC29W	Num	4		YEAR AFTER HCV, # OF DRINKS A WEEK
155	H50LC29M	Num	4		YEAR AFTER HCV, # OF DRINKS A MONTH
156	H50LC30W	Num	4		YEAR AFTER HCV, MAX # OF DRINKS A WEEK
157	H50LC30D	Num	4		YEAR AFTER HCV, MAX # OF DRINKS A DAY
158	H50_LC31	Num	4		IN LAST YEAR: UNABLE TO STOP DRINKING
159	H50_LC32	Num	4		IN LAST YEAR: FAILED TO DUE WHAT NORMALL
160	H50_LC33	Num	4		IN LAST YEAR: NEED DRINK FIRST THING
161	H50_LC34	Num	4		IN LAST YEAR: FELT GUILTY AFTER DRINKING
162	H50_LC35	Num	4		IN LAST YEAR: UNABLE TO REMEMBER WHAT HA
163	H50_LC36	Num	4		IN LAST YEAR: YOU OR SOMEONE ELSE BEEN I
164	H50_LC37	Num	4		IN LAST YR: SOMEONE CONCERNED ABOUT YOUR
165	H50_LD38	Num	4		EVER SMOKED CIGARETTES REGULARLY
166	H50_LD39	Num	4		SMOKED CIGARETTES PAST SIX MONTHS
167	H50_LD40	Num	4		WHAT AGE DID YOU BEGIN SMOKING CIGARETTE
168	H50_LD41	Num	4		WHAT AGE STOPPED SMOKING CIGARETTES
169	H50_LD42	Num	4		HOW MANY CIGARETES SMOKED PER DAY
170	H50_LD43	Num	4		SMOKED A PIPEOR CIGAR IN THE PAST 6 MONT
171	H50_LD44	Num	4		# OF PIPES/CIGARS SMOKED
172	H50_HS1	Num	4		HERBAL SUPPLEMENTS-ALCHEMILLA
173	H50_HS2	Num	4		HERBAL SUPPLEMENTS-CHAPARRAL
174	H50_HS3	Num	4		HERBAL SUPPLEMENTS-CHONDROITIN
175	H50_HS4	Num	4		HERBAL SUPPLEMENTS-EVENING PRIMROSE
176	H50_HS5	Num	4		HERBAL SUPPLEMENTS-EPHEDRA
177	H50_HS6	Num	4		HERBAL SUPPLEMENTS-FEVERFEW
178	H50_HS7	Num	4		HERBAL SUPPLEMENTS-FISH OIL
179	H50_HS8	Num	4		HERBAL SUPPLEMENTS-GENTIAN
180	H50_HS9	Num	4		HERBAL SUPPLEMENTS-GERMANDER
181	H50_HS10	Num	4		HERBAL SUPPLEMENTS-GINKGO
182	H50_HS11	Num	4		HERBAL SUPPLEMENTS-GINSENG
183	H50_HS12	Num	4		HERBAL SUPPLEMENTS-GINGER
184	H50_HS13	Num	4		HERBAL SUPPLEMENTS-GLUCOSAMINE
185	H50_HS14	Num	4		HERBAL SUPPLEMENTS-JI BU HUAN
186	H50_HS15	Num	4		HERBAL SUPPLEMENTS-MILK THISTLE
187	H50_HS16	Num	4		HERBAL SUPPLEMENTS-SENNA
188	H50_HS17	Num	4		HERBAL SUPPLEMENTS-SHARK CARTILAGE
189	H50_HS18	Num	4		HERBAL SUPPLEMENTS-SCURELLARIA
190	H50_HS19	Num	4		HERBAL SUPPLEMENTS-ST. JOHN'S WART
191	H50_OD28	Num	4		OTHER DRUGS-OTHER
192	H50_ODS1	Num	4		OTHER DRUGS-OTHER SPECIFY-1

Num	Variable	Type	Len	Format	Label
193	H50_ODS2	Num	4		OTHER DRUGS-OTHER SPECIFY-S
194	H50_ODS3	Num	4		OTHER DRUGS-OTHER SPECIFY-3
195	H50_LF45	Num	4		PAST 2 WKS: ABDOMINAL BLOATING
196	H50_LF46	Num	4		PAST 2 WKS: TIRED OR FATIGUED
197	H50_LF47	Num	4		PAST 2 WKS: BODILY PAIN
198	H50_LF48	Num	4		PAST 2 WKS: FELT SLEEPING DURING THE DAY
199	H50_LF49	Num	4		PAST 2 WKS: ABDOMINAL PAIN
200	H50_LF50	Num	4		PAST 2 WKS: SHORTNESS OF BREATH
201	H50_LF51	Num	4		PAST 2 WKS: NOT ABLE TO EAT MUCH
202	H50_LF52	Num	4		PAST 2 WKS: DECREASED STRENGTH
203	H50_LF53	Num	4		PAST 2 WKS: TROUBLE LIFTING HEAVY OBJECT
204	H50_LF54	Num	4		PAST 2 WKS: FELT ANXIOUS
205	H50_LF55	Num	4		PAST 2 WKS: DECREASED LEVEL OF ENERGY
206	H50_LF56	Num	4		PAST 2 WKS: FELT UNHAPPY
207	H50_LF57	Num	4		PAST 2 WKS: FELT DROWSY
208	H50_LF58	Num	4		PAST 2 WKS: LIMITATION OF YOUR DIET
209	H50_LF59	Num	4		PAST 2 WKS: BEEN IRRITABLE
210	H50_LF60	Num	4		PAST 2 WKS: DIFFICULTY SLEEPING
211	H50_LF61	Num	4		PAST 2 WKS: ABDOMINAL DISCOMFORT
212	H50_LF62	Num	4		PAST 2 WKS: WORRIED/IMPACT HEPATIC C VIR
213	H50_LF63	Num	4		PAST 2 WKS: MOOD SWINGS
214	H50_LF64	Num	4		PAST 2 WKS: UNABLE TO FALL ASLEEP AY NIG
215	H50_LF65	Num	4		PAST 2 WKS: MUSCLE CRAMPS
216	H50_LF66	Num	4		PAST 2 WKS: WORRIED ABOUT YOUR SYMPTOMS
217	H50_LF67	Num	4		PAST 2 WKS: DRY MOUTH
218	H50_LF68	Num	4		PAST 2 WKS: FELT DEPRESSED
219	H50_LF69	Num	4		PAST 2 WKS: WORRIED VIRUS INFECTION GETT
220	H50_LF70	Num	4		PAST 2 WKS: PROBLEM CONCENTRATING
221	H50_LF71	Num	4		PAST 2 WKS: TROUBLED BY ITCHING
222	H50_LF72	Num	4		PAST 2 WKS: WORRIED ABOUT NEVER FEELING
223	H50_LF73	Num	4		PAST 2 WKS: CONCERNED AVAILABILITY OF LI
224	H50_DT	Num	4	8.	DATE FORM COMPLETED-SAS DATE: Converted to days since reference date
225	H50_DF	Num	4		DATE FORM COMPLETED-IMPURED FLAG
226	DRNKWK24	Num	4		Last 90 days usual drinks/wk
227	DRNKWK25	Num	4		Last 90 days max drinks/wk
228	DRNKWK27	Num	4		Before HCV usual drinks/wk
229	DRNKWK28	Num	4		Before HCV max drinks/wk
230	DRNKWK29	Num	4		After HCV usual drinks/wk
231	DRNKWK30	Num	4		After HCV max drinks/wk

Num	Variable	Type	Len	Format	Label
232	F50ABDOM	Num	4	6.2	SUMMARY QUALITY OF LIFE: ABDOMINAL
233	F50FATIG	Num	4	6.2	SUMMARY QUALITY OF LIFE: FATIGUE
234	F50SYSTM	Num	4	6.2	SUMMARY QUALITY OF LIFE: SYSTEM
235	F50ACTIV	Num	4	6.2	SUMMARY QUALITY OF LIFE: ACTIVITY
236	F50EMOTN	Num	4	6.2	SUMMARY QUALITY OF LIFE: EMOTION
237	F50WORRY	Num	4	6.2	SUMMARY QUALITY OF LIFE: WORRY
238	H50LF45R	Num	4		RECODED VALUE OF H50_LF45 FOR QOL CALC.
239	H50LF49R	Num	4		RECODED VALUE OF H50_LF49 FOR QOL CALC.
240	H50LF61R	Num	4		RECODED VALUE OF H50_LF61 FOR QOL CALC.
241	H50LF46R	Num	4		RECODED VALUE OF H50_LF46 FOR QOL CALC.
242	H50LF48R	Num	4		RECODED VALUE OF H50_LF48 FOR QOL CALC.
243	H50LF52R	Num	4		RECODED VALUE OF H50_LF52 FOR QOL CALC.
244	H50LF55R	Num	4		RECODED VALUE OF H50_LF55 FOR QOL CALC.
245	H50LF57R	Num	4		RECODED VALUE OF H50_LF57 FOR QOL CALC.
246	H50LF47R	Num	4		RECODED VALUE OF H50_LF47 FOR QOL CALC.
247	H50LF50R	Num	4		RECODED VALUE OF H50_LF50 FOR QOL CALC.
248	H50LF65R	Num	4		RECODED VALUE OF H50_LF65 FOR QOL CALC.
249	H50LF67R	Num	4		RECODED VALUE OF H50_LF67 FOR QOL CALC.
250	H50LF71R	Num	4		RECODED VALUE OF H50_LF71 FOR QOL CALC.
251	H50LF51R	Num	4		RECODED VALUE OF H50_LF51 FOR QOL CALC.
252	H50LF53R	Num	4		RECODED VALUE OF H50_LF53 FOR QOL CALC.
253	H50LF58R	Num	4		RECODED VALUE OF H50_LF58 FOR QOL CALC.
254	H50LF54R	Num	4		RECODED VALUE OF H50_LF54 FOR QOL CALC.
255	H50LF56R	Num	4		RECODED VALUE OF H50_LF56 FOR QOL CALC.
256	H50LF59R	Num	4		RECODED VALUE OF H50_LF59 FOR QOL CALC.
257	H50LF60R	Num	4		RECODED VALUE OF H50_LF60 FOR QOL CALC.
258	H50LF63R	Num	4		RECODED VALUE OF H50_LF63 FOR QOL CALC.
259	H50LF64R	Num	4		RECODED VALUE OF H50_LF64 FOR QOL CALC.
260	H50LF68R	Num	4		RECODED VALUE OF H50_LF68 FOR QOL CALC.
261	H50LF70R	Num	4		RECODED VALUE OF H50_LF70 FOR QOL CALC.
262	H50LF62R	Num	4		RECODED VALUE OF H50_LF62 FOR QOL CALC.
263	H50LF66R	Num	4		RECODED VALUE OF H50_LF66 FOR QOL CALC.
264	H50LF69R	Num	4		RECODED VALUE OF H50_LF69 FOR QOL CALC.
265	H50LF72R	Num	4		RECODED VALUE OF H50_LF72 FOR QOL CALC.
266	H50LF73R	Num	4		RECODED VALUE OF H50_LF73 FOR QOL CALC.
267	ILLEGAL_DRUGS	Num	8		Use of Marijuana, Speed, Heroin, MDMA, Phencyclidine, Anabolic Steroids, Glues/Solvents, or Cocaine
268	SUBJ_ID	Char	8		MHCS SUBJECT IDENTIFIER

Data Set Name: f50s.sas7bdat

Num	Variable	Type	Len	Format	Label
1	FORM	Num	4		Form Number
2	H50S_NT	Num	4		NOT TREATED FOR HCV
3	H50S_1	Num	4		TREATED W/STANDARD INTERFERON AND RIBAVI
4	H50S_1AM	Num	4		FIRST USED STANDARD INTERFERON/RIBAVIRIN
5	H50S_1AY	Num	4		FIRST USED STANDARD INTERFERON/RIBAVIRIN
6	H50S_1B	Num	4		ARE YOU CURRENTLY USING INTERFERON/RIBAV
7	H50S_1C	Num	4		WHY ARE YOU NO LONGER USING INTERFERON/R
8	H50S_2	Num	4		TREATED W/STANDARD INTERFERON W/OUT RIBA
9	H50S_2AM	Num	4		1ST USED STANDARD INTERFERON W/OUT RIBAV
10	H50S_2AY	Num	4		1ST USED STANDARD INTERFERON W/OUT RIBAV
11	H50S_2B	Num	4		CURRENTLY USING INTERFERON W/OUT RIBAVIR
12	H50S_2C	Num	4		NO LONGER USING INTERFERON W/OUT RIBAVIR
13	H50S_3	Num	4		TREATED W/PEGYLATED INTERFERON AND RIBAV
14	H50S_3AM	Num	4		FIRST USED PEGYLATED INTERFERON/RIBAVIRI
15	H50S_3AY	Num	4		FIRST USED PEGYLATED INTERFERON/RIBAVIRI
16	H50S_3B	Num	4		CURRENTLY USING PEGYLATED INTERFERON/RIB
17	H50S_3C	Num	4		NO LONGER USING PEGYLATED INTERFERON/RIB
18	H50S_4	Num	4		TREATED W/PEGYLATED INTERFERON W/OUT RIB
19	H50S_4AM	Num	4		1ST USED PEGYLATED INTERFERON W/OUT RIBA
20	H50S_4AY	Num	4		1ST USED PEGYLATED INTERFERON W/OUT RIBA
21	H50S_4B	Num	4		USING PEGYLATED INTERFERON W/OUT RIBAVIR
22	H50S_4C	Num	4		NOT USING PEGYLATED INTERFERON W/OUT RIB
23	H50S_5N	Num	4		PAST TWO WEEK, COX-2 INHIBITORS-NONE
24	H50S_5V	Num	4		PAST TWO WEEKS, COX-2 INHIBITORS-VIOXX
25	H50S_5C	Num	4		PAST TWO WEEK, COX-2 INHIBITORS-CELEBREX
26	H50S_5O1	Num	4		Q5. PAST 2 WKS,COX-2 INHIB-OTHER SPEC 1
27	H50S_5O2	Num	4		Q5. PAST 2 WKS,COX-2 INHIB-OTHER SPEC 2
28	H50S_5O3	Num	4		Q5. PAST 2 WKS,COX-2 INHIB-OTHER SPEC 3
29	H50S_5O4	Num	4		Q5. PAST 2 WKS,COX-2 INHIB-OTHER SPEC 4
30	H50S_5O5	Num	4		Q5. PAST 2 WKS,COX-2 INHIB-OTHER SPEC 5
31	H50S_5O6	Num	4		Q5. PAST 2 WKS,COX-2 INHIB-OTHER SPEC 6
32	H50S_5O7	Num	4		Q5. PAST 2 WKS,COX-2 INHIB-OTHER SPEC 7
33	H50S_5O8	Num	4		Q5. PAST 2 WKS,COX-2 INHIB-OTHER SPEC 8
34	H50S_5O9	Num	4		Q5. PAST 2 WKS,COX-2 INHIB-OTHER SPEC 9
35	H50S5O10	Num	4		Q5. PAST 2 WKS,COX-2 INHIB-OTHER SPEC 10
36	H50S_5A	Num	4		HOW MANY MONTHS HAD YOU BEEN USING COX-2

Num	Variable	Type	Len	Format	Label
37	H50S_6	Num	4		PAST TWO WEEKS, TAKE ANY OTHER NSAIDS
38	H50S_6A	Num	4		HOW MANY MONTHS USING ANY OTHER NSAID
39	H50S_7N	Num	4		NO GI GLEED, PERFORATION, OBSTRUCTION
40	H50S_7GB	Num	4		YES, GI BLEED
41	H50S_7GP	Num	4		YES, GASTROINTESTINAL PERFORATION
42	H50S_7GO	Num	4		YES, GASTROINTESTINAL OBSTRUCTION
43	H50S1_DT	Num	4	8.	DATE FIRST USED ST.INT/RIBA: SAS DATE: Converted to days since reference date
44	H50S1_DF	Num	4		DATE FIRST USED ST. INT/RIBA:IMPUTE FLAG
45	H50S2_DT	Num	4	8.	FIRST USE ST.INT. W/O RIBA:SAS DATE: Converted to days since reference date
46	H50S2_DF	Num	4		FIRST USE ST.INT. W/O RIBA:IMPUTE FLAG
47	H50S3_DT	Num	4	8.	DATE FIRST USE PEG.INT./RIBA: SAS DATE: Converted to days since reference date
48	H50S3_DF	Num	4		DATE FIRST USE PEG.INT/RIBA: IMPUTE FLAG
49	H50S4_DT	Num	4	8.	DATE 1ST USE PEG.INT.W/O RIBA: SAS DATE: Converted to days since reference date
50	H50S4_DF	Num	4		1ST USE PEG.INT. W/O RIBA: IMPUTE FLAG
51	SUBJ_ID	Char	8		MHCS SUBJECT IDENTIFIER

Data Set Name: f51.sas7bdat

Num	Variable	Type	Len	Format	Informat	Label
1	VISITNUM	Num	4	1.		VISIT NUMBER
2	ASCCODE	Num	4			Q16. ASCITES UNTREATED REASON SPEC. CODE
3	NOCOND	Num	4	4.	4.	Q.21 NO CONDITIONS PRESENT CURRENTLY
4	NEUROCD	Num	4			OTHER NEUROLOGICAL ABNORMALITIES CODE
5	feet	Num	4	2.	19.	Q1. FEET (HEIGHT)
6	inches	Num	4	3.	19.	Q1. INCHES (HEIGHT)
7	cms	Num	4	6.	19.	Q1. CENTIMETERS (HEIGHT)
8	pounds	Num	4	5.1	19.	Q2. WEIGHT IN POUNDS
9	kgs	Num	4	5.1	19.	Q2. WEIGHT IN KILOGRAMS
10	fahrenheit	Num	4	5.1		Q3. TEMPERATURE IN FAHRENHEIT
11	celsius	Num	4	5.1		Q3. TEMPERATURE IN CELSIUS
12	systolic	Num	4	6.	19.	Q4. BLOOD PRESSURE - SYSTOLIC
13	diastolic	Num	4	6.	19.	Q4. BLOOD PRESSURE - DIASTOLIC
14	blood	Num	4	1.	4.	Q5. URINALYSIS - BLOOD LEVEL
15	protein	Num	4	1.	4.	Q6. URINALYSIS - PROTEIN LEVEL
16	nitrite	Num	4	1.	4.	Q7. URINALYSIS - NITRITE LEVEL
17	a_acid	Num	4	1.	4.	Q8. URINALYSIS - ASCORBIC ACID LEVEL
18	glucose	Num	4	1.	4.	Q9. URINALYSIS - GLUCOSE LEVEL
19	ph	Num	4	1.	4.	Q10. URINALYSIS - pH LEVEL
20	hem_arth	Num	4	1.	4.	Q12. HEMOPHILIC ARTHROPATHY
21	kar_perf	Num	4	1.	4.	Q13. KARNOFSKY PERFORMANCE
22	affected	Num	4	1.	4.	Q14. KAR PERF AFFECTED BY HEM ARTH
23	fatigue	Num	4	1.	4.	Q15. FATIGUE LEVEL
24	ascites	Num	4	1.	4.	Q16. ASCITES
25	hepatome	Num	4	1.	4.	Q17. HEPATOMEGALY
26	splenome	Num	4	1.	4.	Q18. SPLENOMEGALY
27	splnsize	Num	4	19.	19.	Q18. SPLEEN'S SIZE (IN CM.)
28	h_zoster	Num	4	1.	4.	Q19. HERPES ZOSTER (SHINGLES)
29	lym_none	Num	4	2.	4.	Q20. LYMPHADENOPATHY - NONE
30	lym_cerv	Num	4	1.	4.	Q20. LYMPHADENOPATHY - CERVICAL
31	cervsite	Num	4	2.	19.	Q20. CERVICAL LYMPH - # SITES
32	cervshot	Num	4	1.	4.	Q20. CERVICAL LYMPH - SHOTTY
33	lym_othe	Num	4	1.	4.	Q20. LYMPHADENOPATHY - OTHER
34	lgstnode	Num	4	2.	19.	Q20a.DIAMETER OF LARGEST LYMPH NODE
35	p_neurop	Num	4	1.	4.	Q21. PERIPHERAL NEUROPATHY
36	spider	Num	4	1.	4.	Q21. SPIDER ANGIOMATA

Num	Variable	Type	Len	Format	Informat	Label
37	neuro_ab	Num	4	1.	4.	Q21. OTHER NEUROLOGICAL ABNORMAL
38	palmare	Num	4	1.	4.	Q21. PALMAR ERYTHEMA
39	wgt_loss	Num	4	1.	4.	Q21. UNEXPLAINED WEIGHT LOSS
40	edema	Num	4	1.	4.	Q21. LOWER EXTREMITY EDEMA
41	memory	Num	4	1.	4.	Q21. MEMORY OR CONCENTRATION PROBLEMS
42	depressn	Num	4	1.	4.	Q21. CHRONIC DEPRESSION
43	gynecomia	Num	4	1.	4.	Q21. GYNECOMASTIA
44	arthralg	Num	4	1.	4.	Q21. ARTHRALGIAS/ARTHRITIS
45	nausea	Num	4	1.	4.	Q21. NAUSEA
46	tenderns	Num	4	1.	4.	Q21. RIGHT UP QUAD ABD/LIVER TENDERNESS
47	i_sclera	Num	4	1.	4.	Q21. ICTERIC SCLERA
48	jaundice	Num	4	1.	4.	Q21. JAUNDICE
49	atrophy	Num	4	1.	4.	Q21. TEMPORAL MUSCLE ATROPHY
50	VISIT_DT	Num	4	8.		VISIT DATE (SAS DATE): Converted to days since reference date
51	SUBJ_ID	Char	8			MHCS SUBJECT IDENTIFIER

Data Set Name: f52.sas7bdat

Num	Variable	Type	Len	Format	Informat	Label
1	FQ1AE	Num	4	4.	4.	Q25. Cancer #1-Where cancer diagnosed
2	FQ1BE	Num	4	4.	4.	Q25. Cancer #2-Where cancer diagnosed
3	GENDEFCD	Num	4			Q10.OTHER HEM. GENETIC DEFECT-NUMERIC CD
4	AQ5	Num	4	2.	4.	Q5. SEX
5	AQ8	Num	4	2.	6.	Q8. HEMOPHILIA TYPE
6	AQ9	Num	4	2.	4.	Q9. SEVERITY OF HEMOPHILIA
7	AQ10	Num	4	2.	6.	Q10.HEMOPHILIA GENETIC DEFECT
8	AQ11	Num	4	2.	6.	Q11.INHIBITOR EVER DETECTED
9	AQ11a	Num	4	7.1	20.1	Q11A.HIGHEST INHIBITOR TITER
10	AQ12	Num	4	2.	6.	Q12.SUBJECT HAS HEMOPHILIC SIBLING
11	BQ1a	Num	4	2.	6.	Q13A. FACTOR VIII
12	BQ1b	Num	4	2.	6.	Q13B. FACTOR IX
13	BQ1c	Num	4	2.	6.	Q13C. FRESH FROZEN PLASMA
14	BQ1d	Num	4	2.	6.	Q13D. CRYOPRECIPITATE
15	BQ1e	Num	4	2.	6.	Q13E. BLOOD/RBC TRANSFUSSION
16	BQ1f	Num	4	2.	6.	Q13F. PLATELETS
17	BQ1g	Num	4	2.	6.	Q13G. UNSPECIFIED TYPE OF BLOOD PROD.
18	CQ1	Num	4	2.	6.	Q14. EVER TESTED POSITIVE FOR HCV
19	CQ2	Num	4	2.	6.	Q15. EVER HAD ANY POSITIVE HBV MARKER
20	CQ3	Num	4	2.	6.	Q16. EVER BEEN VACCINATED AGAINST HEP. B
21	CQ4	Num	4	2.	6.	Q17. HBV CHRONIC CARRIER STATUS
22	DQ1	Num	4	2.	6.	Q18. EVER TESTED POSITIVE FOR HIV
23	DQ2a	Num	4	5.	19.	Q19. CD4 %
24	DQ2b	Num	4	5.	19.	Q19. CD4 CELLS 10**9/L
25	DQ2c	Num	4	5.	19.	Q19. CD8 %
26	DQ2d	Num	4	5.	19.	Q19. CD8 CELLS 10**9/L
27	DQ3	Num	4	2.	6.	Q20. EVER DIAGNOSED WITH AIDS
28	D2Q3a	Num	4	2.	4.	Q20A. AIDS-DEFINING DISEASE UNKNOWN
29	D2Q3a1	Num	4	2.	4.	Q20A. CD4<200 CELLS/ 5L OR 14%
30	D2Q3a2	Num	4	2.	4.	Q20A. CMV (NOT LIVER, SPLEEN, LYMPH)
31	D2Q3a3	Num	4	2.	4.	Q20A. CANDIDIASIS ESOPHAGUS OR LUNGS
32	D2Q3a4	Num	4	2.	4.	Q20A. CERVICAL CANCER, INVASIVE
33	D2Q3a5	Num	4	2.	4.	Q20A. COCCIDIOIDMYCOSIS, EXTRAPULMONARY
34	D2Q3a6	Num	4	2.	4.	Q20A. CRYPTOCOCCOSIS, EXTRAPULMONARY
35	D2Q3a7	Num	4	2.	4.	Q20A. CRYPTOSPORIDIOSIS W/DIARRHEA >1 MO
36	D2Q3a8	Num	4	2.	4.	Q20A. HERPES SIMPLEX, ULCER >1 MO.

Num	Variable	Type	Len	Format	Informat	Label
37	D2Q3a9	Num	4	4.	4.	Q20A. HERPES SIMPLEX IN LUNGS/ESOPHAGUS
38	D2Q3a10	Num	4	2.	4.	Q20A. HISTOPLASMOSIS, EXTRAPULMONARY
39	D2Q3a11	Num	4	2.	4.	Q20A. HIV ENCEPHALOPATHY/DEMENTIA
40	D2Q3a12	Num	4	2.	4.	Q20A. ISOSPORIASIS W/DIARRHEA >1 MO.
41	D2Q3a13	Num	4	2.	4.	Q20A. KAPOS'I'S SARCOMA
42	D2Q3a14	Num	4	2.	4.	Q20A. LIP OR PULMONARY LYMPHOID HYPERPLA
43	D2Q3a15	Num	4	2.	4.	Q20A. LYMPHOMA OF THE BRAIN
44	D2Q3a16	Num	4	2.	4.	Q20A. MYCOBACTERIUM AVIUM
45	D2Q3a17	Num	4	2.	4.	Q20A. NON-HODGKIN'S LYMPHOMA
46	D2Q3a18	Num	4	2.	4.	Q20A. PCP
47	D2Q3a19	Num	4	2.	4.	Q20A. RECUR. BACT PNEUMONIA>ONCE IN 12MO
48	D2Q3a20	Num	4	2.	4.	Q20A. PML
49	D2Q3a21	Num	4	2.	4.	Q20A. PULMONARY TUBERCULOSIS
50	D2Q3a22	Num	4	2.	4.	Q20A. SALMONELLA SEPTICEMIA, RECURRENT
51	D2Q3a23	Num	4	2.	4.	Q20A. TOXOPLASMOSIS OF THE BRAIN
52	D2Q3a24	Num	4	2.	4.	Q20A. WASTING SYNDROME
53	D2Q3a25	Num	4	2.	4.	Q20A. OTHER MULT./REC. BACT. INF(>=2/2YR
54	EQ1a	Num	4	2.	4.	Q21. NONE OF CONDITIONS EQ1B-F DIAGNOSED
55	EQ1b	Num	4	2.	4.	Q21. JAUNDICE, PERSISTEN >1 MO.
56	EQ1c	Num	4	2.	4.	Q21. ASCITES (HEPATIC-RELATED)
57	EQ1e	Num	4	2.	4.	Q21. ESOPHAGEAL VARICES
58	EQ1f	Num	4	2.	4.	Q21. BLEEDING ESOPHAGEAL VARICES
59	EQ2a	Num	4	2.	4.	Q22. NONE OF CONDITIONS EQ2A-G DIAGNOSED
60	EQ2g	Num	4	2.	4.	Q22. OTHER LIVER DISEASE-RELATED CONDITI
61	EQ3	Num	4	2.	6.	Q23. LIVER BIOPSY IN THE LAST 5 YEARS
62	EQ4	Num	4	2.	6.	Q24. SUBJECT ELIGIBLE FOR LIVER TRANSPLA
63	FQ1	Num	4	6.	6.	Q25. EVER DIAGNOSED WITH ANY TYPE OF CAN
64	FQ1ac	Num	4	4.	4.	Q25. CNCR #1 -PRIMARY SITE(=1)/METAS(=2)
65	FQ1bc	Num	4	4.	4.	Q25. CNCR #2 -PRIMARY SITE(=1)/METAS(=2)
66	AQ1_DT	Num	4	8.		Q1. BIRTH DATE (SAS DATE): Converted to days since reference date
67	AQ2_DT	Num	4	8.		Q2.DATE FORM COMPLETED (SAS DATE): Converted to days since reference date
68	AQ3_DT	Num	4	8.		Q3. DATE OF ENROLLMENT VISIT (SAS DATE): Converted to days since reference date
69	BQ1A_YR	Num	4			Q13A. YR 1ST USE FACTOR VIII
70	BQ1B_YR	Num	4			Q13B. YR 1ST USE FACTOR IX
71	BQ1C_YR	Num	4			Q13C. YR 1ST USE FRESH FROZEN PLASMA
72	BQ1D_YR	Num	4			Q13D. YR 1ST USE CRYOPRECIPITATE
73	BQ1E_YR	Num	4			Q13E. YR 1ST USE BLOOD/RBC TRANSF.

Num	Variable	Type	Len	Format	Informat	Label
74	BQ1F_YR	Num	4			Q13F. YR 1ST USE PLATELETS
75	BQ1G_YR	Num	4			Q13G. YR 1ST USE UNSPFD. BLOOD PROD.
76	CQ1_YR	Num	4			Q14. YEAR OF 1ST POSITIVE HCV TEST
77	CQ3_YR	Num	4			Q16. YEAR OF 1ST HBV VACCINATION
78	D2Q3AY	Num	4			Q20A. AIDS-DEFINING DISEASE UNK.- YR DX
79	D2Q3A1Y	Num	4			Q20A. CD4<200 CELLS/ 5L OR 14% - YR DX
80	D2Q3A2Y	Num	4			Q20A. CMV - YR DX
81	D2Q3A3Y	Num	4			Q20A. CANDIDIASIS ESOPH. OR LUNGS-YR DX
82	D2Q3A4Y	Num	4			Q20A. CERVICAL CANCER, INVASIVE - YR DX
83	D2Q3A5Y	Num	4			Q20A. COCCIDIOIDMYCOSIS, EXTRAPUL-YR DX
84	D2Q3A6Y	Num	4			Q20A. CRYPTOCOCCOSIS, EXTRAPUL- YR DX
85	D2Q3A7Y	Num	4			Q20A. CRYPTOSPORIDIOSIS W/DIARRHEA-YR DX
86	D2Q3A8Y	Num	4			Q20A. HERPES SIMPLEX, ULCER >1 MO.-YR DX
87	D2Q3A9Y	Num	4			Q20A. HERPES SIMPLEX LUNGS/ESOPH-YR DX
88	D2Q3A10Y	Num	4			Q20A. HISTOPLASMOSIS, EXTRAPUL - YR DX
89	D2Q3A11Y	Num	4			Q20A. HIV ENCEPHALOP/DEMENTIA - YR DX
90	D2Q3A12Y	Num	4			Q20A. ISOSPORIASIS W/DIARRHEA>1MO.-YR DX
91	D2Q3A13Y	Num	4			Q20A. KAPOSII'S SARCOMA - YR DX
92	D2Q3A14Y	Num	4			Q20A. LIP OR PULM. LYMPHOID HYPER- YR DX
93	D2Q3A15Y	Num	4			Q20A. LYMPHOMA OF THE BRAIN - YR DX
94	D2Q3A16Y	Num	4			Q20A. MYCOBACTERIUM AVIUM - YR DX
95	D2Q3A17Y	Num	4			Q20A. NON-HODGKIN'S LYMPHOMA - YR DX
96	D2Q3A18Y	Num	4			Q20A. PCP - YR DX
97	D2Q3A19Y	Num	4			Q20A. RECURRENT BACT PNEUMONIA - YR DX
98	D2Q3A20Y	Num	4			Q20A. PML - YR DX
99	D2Q3A21Y	Num	4			Q20A. PULMONARY TUBERCULOSIS - YR DX
100	D2Q3A22Y	Num	4			Q20A. SALMONELLA SEPTICEMIA,RECUR-YR DX
101	D2Q3A23Y	Num	4			Q20A. TOXOPLASMOSIS OF THE BRAIN -YR DX
102	D2Q3A24Y	Num	4			Q20A. WASTING SYNDROME - YR DX
103	D2Q3A25Y	Num	4			Q20A. OTHER MULT./REC.BACT. INFECT-YR DX
104	EQ1B2_YR	Num	4			Q21. JAUNDICE, PERSISTEN >1 MO. - YR DX
105	EQ1C2_YR	Num	4			Q21. ASCITES (HEPATIC-RELATED) - YR DX
106	EQ1E2_YR	Num	4			Q21. ESOPHAGEAL VARICES - YR DX
107	EQ1F2_YR	Num	4			Q21. BLEEDING ESOPHAGEAL VARICES - YR DX
108	EQ2G2_YR	Num	4			Q22. OTHER LD RELATED CONDITION - YR DX
109	FQ1A_YR	Num	4			Q25. CANCER #1- YEAR OF DIAGNOSIS
110	FQ1B_YR	Num	4			Q25. CANCER #2- YEAR OF DIAGNOSIS
111	FQ1AAN	Num	4			Q25. CANCER #1 -PRIMARY SITE NUMERIC CD
112	FQ1BAN	Num	4			Q25. CANCER #2 -PRIMARY SITE NUMERIC CD

Num	Variable	Type	Len	Format	Informat	Label
113	FQ1AB2N	Num	4			Q25. CANCER #1-HISTOLOGIC SUBTYPE NUM CD
114	FQ1BB2N	Num	4			Q25. CANCER #2-HISTOLOGIC SUBTYPE NUM CD
115	FQ1ABN	Num	4			Q25. CANCER #1 -TYPE NUMERIC CODE
116	FQ1BBN	Num	4			Q25. CANCER #2 -TYPE NUMERIC CODE
117	FQ1A_MM	Num	4			Q25. CANCER #1- MONTH OF DIAGNOSIS
118	FQ1B_MM	Num	4			Q25. CANCER #2- MONTH OF DIAGNOSIS
119	HCVna	Num	4	4.	4.	TEST NOT DONE
120	HCVviral	Num	4	4.	4.	VIRAL LOAD TOO LOW FOR GENOTYPE TEST
121	HCVGEN1	Char	3	\$3.	\$3.	HCV GENOTYPE 1
122	HCVGEN2	Char	3	\$3.	\$3.	HCV GENOTYPE 2
123	HCVGEN3	Char	3	\$3.	\$3.	HCV GENOTYPE 3
124	HCVGEN4	Char	3	\$3.	\$3.	HCV GENOTYPE 4
125	HCVGEN5	Char	3	\$3.	\$3.	HCV GENOTYPE 5
126	HCVGEN6	Char	3	\$3.	\$3.	HCV GENOTYPE 6
127	HCVGEN7	Char	3	\$3.	\$3.	HCV GENOTYPE 7
128	HCVGEN8	Char	3	\$3.	\$3.	HCV GENOTYPE 8
129	HCVGEN9	Char	3	\$3.	\$3.	HCV GENOTYPE 9
130	HCVGEN10	Char	3	\$3.	\$3.	HCV GENOTYPE 10
131	HCV_yr	Num	4	11.	11.	YEAR OF MOST RECENT TEST
132	HCVGENO	Char	50			ALL GENOTYPES IN COMMA DELIMITED FORMAT
133	RACE	Num	8			Q6. Collapsed Race variable: 1=White/European, 2=Black/African, 3=Other
134	SUBJ_ID	Char	8			MHCS SUBJECT IDENTIFIER

Data Set Name: f53.sas7bdat

Num	Variable	Type	Len	Format	Label
1	OUTL_V	Num	4		FLAG TO INDICATE AN OUTLIER VALUE
2	PTT_DF	Num	4		PTT DATE: IMPUTE FLAG
3	H53_PTPP	Num	4		PTT PATIENT VALUE
4	H53_PTTC	Num	4		PTT CONTROL VALUE
5	PTT_DT	Num	4	8.	DATE OF PTT TEST (SAS DATE): Converted to days since reference date
6	H53_24A	Num	4		WHAT TYPE OF TEST WAS IT
7	FORM	Num	4		Form Number
8	H53_1	Num	4		CBC-WBC
9	H53_2	Num	4		CBC-HEMOGLOBIN
10	H53_3	Num	4		CBC-HEMATOCRIT
11	H53_4	Num	4		CBC-LYMPHOCYTES
12	H53_5	Num	4		CBC-NEUTROPHILS
13	H53_6	Num	4		CBC-PLATELET COUNT
14	H53_7U	Num	4		ALT (SGPT) U/L
15	H53_7K	Num	4		ALT (SGPT) UKAT/L
16	H53_8U	Num	4		AST (SGOT) U/L
17	H53_8K	Num	4		AST (SGOT) UKAT/L
18	H53_9U	Num	4		ALKALINE PHOSPHATASE U/L
19	H53_9K	Num	4		ALKALINE PHOSPHATASE UKAT/L
20	H53_10MG	Num	4		TOTAL BILIRUBIN MG/DL
21	H53_10MO	Num	4		TOTAL BILIRUBIN UMOL/L
22	H53_11MG	Num	4		DIRECT BILIRUBIN MG/DL
23	H53_11MO	Num	4		DIRECT BILIRUBIN UMOL/L
24	H53_12MG	Num	4		INDIRECT BILIRUBIN MG/DL
25	H53_12MO	Num	4		INDIRECT BILIRUBIN UMOL/L
26	H53_13MG	Num	4		SERUM CREATININE MG/DL
27	H53_13MO	Num	4		SERUM CREATININE UMOL/L
28	H53_14MG	Num	4		CHOLESTEROL MG/DL
29	H53_14MO	Num	4		CHOLESTEROL MMOL/L
30	H53_15MG	Num	4		BUN MG/DL
31	H53_15MO	Num	4		BUN MMOL/L
32	H53_16	Num	4		ALBUMIN G/DL
33	H53_17	Num	4		GLOBULIN G/DL
34	H53_18PV	Num	4		PROTHROMBIN TIME-PATENT VALUE=SECONDS
35	H53_18CV	Num	4		PROTHROMBIN TIME-PATENT CONTROL=SECONDS
36	H53_19	Num	4		INR-RATIO VALUE

Num	Variable	Type	Len	Format	Label
37	H53_20DL	Num	4		SERUM IRON UG/DL
38	H53_20MO	Num	4		SERUM IRON UMOL/L
39	H53_21DL	Num	4		TOTAL IRON-BINDING CAPACITY UG/DL
40	H53_21MO	Num	4		TOTAL IRON-BINDING CAPACITY UMOL/L
41	H53_22NG	Num	4		SERUM FERRITIN NG/ML
42	H53_22GL	Num	4		SERUM FERRITIN UG/L
43	H53_23	Num	4		WAS AN INHIBITOR LEVEL DETECTED ON THIS
44	H53_23A	Num	4		INHIBITOR TITER-BETHESDA UNITS
45	H53_24	Num	4		HAS PATIENT HAD A RUQ ULTRASOUND
46	H53_25A	Num	4		LIVER SIZE
47	H53_25B	Num	4		LIVER ECHOGENECITY
48	H53_25C	Num	4		LIVER MASS
49	H53_25CD	Num	4		LIVER MASS-SPECIFY DIAMETER
50	H53_25CC	Num	4		LIVER MASS-CODE ASSIGNED TO OTHER SPECIF
51	H53_25D	Num	4		SPLEEN SIZE
52	H53_25E	Num	4		SPLEEN ABNORMALITY
53	H53_25EC	Num	4		SPLEEN ABNORMALITY-CODE ASSIGNED TO SPEC
54	H53_25F	Num	4		ASCITES
55	H53_25G	Num	4		PORTAL VEIN THROMBOSIS
56	CBC_DT	Num	4	8.	DATE OF MOST RECENT CBC: SAS DATE: Converted to days since reference date
57	CBC_DF	Num	4		DATE OF MOST RECENT CBC: IMPUTE FLAG
58	SC_DT	Num	4	8.	DATE MOST RECENT SERUM CHEM: SAS DATE: Converted to days since reference date
59	SC_DF	Num	4		DATE MOST RECENT SERUM CHEM: IMPUTE FLAG
60	IRL_DT	Num	4	8.	DATE MOST RECENT IRON LEVEL: SAS DATE: Converted to days since reference date
61	IRL_DF	Num	4		DATE MOST RECENT IRON LEVEL: IMPUTE FLAG
62	IL_DT	Num	4	8.	INHIBITOR LEVEL DATE: SAS DATE: Converted to days since reference date
63	IL_DF	Num	4		INHIBITOR LEVEL DATE: IMPUTE FLAG
64	US_DT	Num	4	8.	DATE MOST RECENT ULTRASOUND: SAS DATE: Converted to days since reference date
65	US_DF	Num	4		DATE MOST RECENT ULTRASOUND: IMPUTE FLAG
66	SUBJ_ID	Char	8		MHCS SUBJECT IDENTIFIER

Data Set Name: f57.sas7bdat

Num	Variable	Type	Len	Format	Label
1	FORM	Num	4		Form Number
2	H57_1	Num	4		CONDITION OF BIOPSY
3	H57_7	Num	4		STEATOSIS
4	H57_8	Num	4		IRON
5	H57_9	Num	4		PORTAL AREAS
6	H57_10	Num	4		MALLORY BODIES
7	H57_11	Num	4		ZONE 3 BALLOONING DEGENERATION
8	H57_2A	Num	4		# OF SLIDES REVIEWED
9	H57_2SP	Num	4		STAINS REVIEWED: OTHER SPECIFY
10	H57_2_1	Num	4		STAINS REVIEWED: H and E
11	H57_2_2	Num	4		STAINS REVIEWED: IRON
12	H57_2_3	Num	4		STAINS REVIEWED: MASSON TRICHROME
13	H57_2_4	Num	4		STAINS REVIEWED: PAS
14	H57_2_5	Num	4		STAINS REVIEWED: PAS-D
15	H57_2_6	Num	4		STAINS REVIEWED: RETICULIN
16	H57_2_7	Num	4		STAINS REVIEWED: UNSTAINED
17	H57_2_8	Num	4		STAINS REVIEWED: STAINED
18	H57_3_1	Num	4		INFLAMMATION SCORING(KNODELL)-PERIPORTAL
19	H57_3_2	Num	4		INFLAMMATION SCORING(KNODELL)-LOBULAR SC
20	H57_3_3	Num	4		INFLAMMATION SCORING(KNODELL)-PORTAL SCO
21	H57_6_1	Num	4		FIBROSIS SCORING-KNODELL SCORE
22	H57_6_2	Num	4		FIBROSIS SCORING-MODIFIED ISHAK SCORE
23	H57_6_4	Num	4		FIBROSIS SCORING-PERICENTRAL/ZONE 3 SINU
24	H57_DF	Num	8		DATE FORM COMPLETED IMPUTE FLAG
25	H57_DT	Num	4	8.	DATE FORM COMPLETED (SAS DATE): Converted to days since reference date
26	H57_SID	Char	7		SAMPLE ID
27	H57_4_1	Num	4		INFLAMMATION SCORE(MOD.ISHAK-PERIPORTAL
28	H57_4_2	Num	4		INFLAMMATION SCORE(MOD ISHAK)-CONFLUENT
29	H57_4_3	Num	4		INFLAMMATION SCORE(MOD.ISHAK)-LOBULAR IN
30	H57_4_4	Num	4		INFLAMMATION SCORE(MOD.ISHAK)-PORTAL INF
31	H57_5	Num	4		METAVIR ACTIVITY
32	H57_6_3	Num	4		FIRBOSIS SCORING-METAVIR FIBROSIS
33	SUBJ_ID	Char	8		MHCS SUBJECT IDENTIFIER

Data Set Name: f60.sas7bdat

Num	Variable	Type	Len	Format	Label
1	PRODHX_V	Num	4		FLAG TO INDICATE PRODUCT HIST. VERIFIED
2	FORM	Num	4		Form Number
3	H60VISIT	Num	4		VISIT NUMBER
4	H60A1	Num	4		NOT HIV POSITIVE/NOT USING MEDS
5	H60A1_1	Num	4		CURRENTLY TAKING ABACAVIR
6	H60A11L	Num	4		LENGTH OF TIME-NUMERIC-ABACAVIR
7	H60A11U	Num	4		LENGTH OF TIME-UNIT OF TIME-ABACAVIR
8	H60A1_2	Num	4		CURRENTLY TAKING AMPRENAVIR
9	H60A12L	Num	4		LENGTH OF TIME-NUMERIC-AMPRENAVIR
10	H60A12U	Num	4		LENGTH OF TIME-UNIT OF TIME-AMPRENAVIR
11	H60A1_3	Num	4		CURRENTLY TAKING COMBIVIR
12	H60A13L	Num	4		LENGTH OF TIME-NUMERIC-COMBIVIR
13	H60A13U	Num	4		LENGTH OF TIME-UNIT OF TIME-COMBIVIR
14	H60A1_4	Num	4		CURRENTLY TAKING DELAVIRDINE
15	H60A14L	Num	4		LENGTH OF TIME-NUMERIC-DELAVIRDINE
16	H60A14U	Num	4		LENGTH OF TIME-UNIT OF TIME-DELAVIRDINE
17	H60A1_5	Num	4		CURRENTLY TAKING DIDANOSINE
18	H60A15L	Num	4		LENGTH OF TIME-NUMERIC-DIDANOSINE
19	H60A15U	Num	4		LENGTH OF TIME-UNIT OF TIME-DIDANOSINE
20	H60A1_6	Num	4		CURRENTLY TAKING EFAVIRENZ
21	H60A16L	Num	4		LENGTH OF TIME-NUMERIC- EFAVIRENZ
22	H60A16U	Num	4		LENGTH OF TIME-UNIT OF TIME-EFAVIRENZ
23	H60A1_7	Num	4		CURRENTLY TAKING HYDROXYUREA
24	H60A17L	Num	4		LENGTH OF TIME-NUMERIC-HYDROXYUREA
25	H60A17U	Num	4		LENGTH OF TIME-UNIT OF TIME-HYDROXYUREA
26	H60A1_8	Num	4		CURRENTLY TAKING INDINAVIR
27	H60A18L	Num	4		LENGTH OF TIME-NUMERIC-INDINAVIR
28	H60A18U	Num	4		LENGTH OF TIME-UNIT OF TIME-INDINAVIR
29	H60A1_9	Num	4		CURRENTLY TAKING LOPINAVIR/RITONAVIR
30	H60A19L	Num	4		LENGTH OF TIME-NUMERIC-LOPINAVIR/RITONAV
31	H60A19U	Num	4		LENGTH OF TIME-UNIT OF TIME-LOPINAVIR/RI
32	H60A1_10	Num	4		CURRENTLY TAKING LAMIVUDINE
33	H60A110L	Num	4		LENGTH OF TIME-NUMERIC-LAMIVUDINE
34	H60A110U	Num	4		LENGTH OF TIME-UNIT OF TIME-LAMIVUDINE
35	H60A1_11	Num	4		CURRENTLY TAKING NELFINAVIR
36	H60A111L	Num	4		LENGTH OF TIME-NUMERIC-NELFINAVIR

Num	Variable	Type	Len	Format	Label
37	H60A111U	Num	4		LENGTH OF TIME-UNIT OF TIME-NELFINAVIR
38	H60A1_12	Num	4		CURRENTLY TAKING NEVIRAPINE
39	H60A112L	Num	4		LENGTH OF TIME-NUMERIC-NEVIRAPINE
40	H60A112U	Num	4		LENGTH OF TIME-UNIT OF TIME-NEVIRAPINE
41	H60A1_13	Num	4		CURRENTLY TAKING RITONAVIR
42	H60A113L	Num	4		LENGTH OF TIME-NUMERIC-RITONAVIR
43	H60A113U	Num	4		LENGTH OF TIME-UNIT OF TIME-RITONAVIR
44	H60A1_14	Num	4		CURRENTLY TAKING SAQUINAVIR
45	H60A114L	Num	4		LENGTH OF TIME-NUMERIC-SAQUINAVIR
46	H60A114U	Num	4		LENGTH OF TIME-UNIT OF TIME-SAQUINAVIR
47	H60A1_15	Num	4		CURRENTLY TAKING STAVUDINE
48	H60A115L	Num	4		LENGTH OF TIME-NUMERIC-STAVUDINE
49	H60A115U	Num	4		LENGTH OF TIME-UNIT OF TIME-STAVUDINE
50	H60A1_16	Num	4		CURRENTLY TAKING TENOFOVIR
51	H60A116L	Num	4		LENGTH OF TIME-NUMERIC-TENOFOVIR
52	H60A116U	Num	4		LENGTH OF TIME-UNIT OF TIME-TENOFOVIR
53	H60A1_17	Num	4		CURRENTLY TAKING TRIZAVIR
54	H60A117L	Num	4		LENGTH OF TIME-NUMERIC-TRIZAVIR
55	H60A117U	Num	4		LENGTH OF TIME-UNIT OF TIME-TRIZAVIR
56	H60A1_18	Num	4		CURRENTLY TAKING ZALCITABINE
57	H60A118L	Num	4		LENGTH OF TIME-NUMERIC-ZALCITABINE
58	H60A118U	Num	4		LENGTH OF TIME-UNIT OF TIME-ZALCITABINE
59	H60A1_19	Num	4		CURRENTLY TAKING ZIDOVUDINE
60	H60A119L	Num	4		LENGTH OF TIME-NUMERIC-ZIDOVUDINE
61	H60A119U	Num	4		LENGTH OF TIME-UNIT OF TIME-ZIDOVUDINE
62	H60A1_20	Num	4		CURRENTLY TAKING ACYCLOVIR
63	H60A120L	Num	4		LENGTH OF TIME-NUMERIC-ACYCLOVIR
64	H60A120U	Num	4		LENGTH OF TIME-UNIT OF TIME-ACYCLOVIR
65	H60A1_21	Num	4		CURRENTLY TAKING AEROSOLIZED PENTAMIDINE
66	H60A121L	Num	4		LENGTH OF TIME-NUMERIC-AEROSOLIZED PENTA
67	H60A121U	Num	4		LENGTH-UNIT OF TIME-AEROSOLIZED PENTAMID
68	H60A1_22	Num	4		CURRENTLY TAKING ATOVAQUONE
69	H60A122L	Num	4		LENGTH OF TIME-NUMERIC-ATOVAQUONE
70	H60A122U	Num	4		LENGTH OF TIME-UNIT OF TIME-ATOVAQUONE
71	H60A1_23	Num	4		CURRENTLY TAKING AZITHROMYCINE
72	H60A123L	Num	4		LENGTH OF TIME-NUMERIC-AZITHROMYVINE
73	H60A123U	Num	4		LENGTH OF TIME-UNIT OF TIME-AZITHROMYCIN
74	H60A1_24	Num	4		CURRENTLY TAKING CLARITHROMYCIN
75	H60A124L	Num	4		LENGTH OF TIME-NUMERIC-CLARITHROMYCINE

Num	Variable	Type	Len	Format	Label
76	H60A124U	Num	4		LENGTH OF TIME-UNIT OF TIME-CLARITHROMYC
77	H60A1_25	Num	4		CURRENTLY TAKING DAPSONE
78	H60A125L	Num	4		LENGTH OF TIME-NUMERIC-DAPSONE
79	H60A125U	Num	4		LENGTH OF TIME-UNIT OF TIME-DAPSONE
80	H60A1_26	Num	4		CURRENTLY TAKING FAMCICLOVIR
81	H60A126L	Num	4		LENGTH OF TIME-NUMERIC-FAMCICLOVIR
82	H60A126U	Num	4		LENGTH OF TIME-UNIT OF TIME-FAMCICLOVIR
83	H60A1_27	Num	4		CURRENTLY TAKING FLUCONAZOLE
84	H60A127L	Num	4		LENGTH OF TIME-NUMERIC-FLUCONAZOLE
85	H60A127U	Num	4		LENGTH OF TIME-UNIT OF TIME-FLUCONAZOLE
86	H60A1_28	Num	4		CURRENTLY TAKING GANCICLOVIR
87	H60A128L	Num	4		LENGTH OF TIME-NUMERIC-GANCICLOVIR
88	H60A128U	Num	4		LENGTH OF TIME-UNIT OF TIME-GANCICLOVIR
89	H60A1_29	Num	4		CURRENTLY TAKING RIFABUTINE
90	H60A129L	Num	4		LENGTH OF TIME-NUMERIC-RIFABUTIN
91	H60A129U	Num	4		LENGTH OF TIME-UNIT OF TIME-RIFABUTIN
92	H60A1_30	Num	4		CURRENTLY TAKING TRIMETHOPRIM/SULFA
93	H60A130L	Num	4		LENGTH OF TIME-NUMERIC-TRIMETHOPRIM/SULF
94	H60A130U	Num	4		LENGTH OF TIME-UNIT OF TIME-TRIMETHOPRIM
95	H60A1_31	Num	4		CURRENTLY TAKING VALACYCLOVIR
96	H60A131L	Num	4		LENGTH OF TIME-NUMERIC-VALACYCLOVIR
97	H60A131U	Num	4		LENGTH OF TIME-UNIT OF TIME-VALACYCLOVIR
98	H60A1_O1	Num	4		CURRENTLY TAKING OTHER HIV/AIDS DRUG-1
99	H60A1O1L	Num	4		LENGTH OF TIME-NUMERIC-OTHER HIV/AIDS DR
100	H60A1O1U	Num	4		LENGTH OF TIME-UNIT OF TIME-OTHER HIV DR
101	H60A1_O2	Num	4		CURRENTLY TAKING OTHER HIV/AIDS DRUG-2
102	H60A1O2L	Num	4		LENGTH OF TIME-NUMERIC-OTHER HIV/AIDS DR
103	H60A1O2U	Num	4		LENGTH OF TIME-UNIT OF TIME-OTHER HIV DR
104	H60A1_O3	Num	4		CURRENTLY TAKING OTHER HIV/AIDS DRUG-3
105	H60A1O3L	Num	4		LENGTH OF TIME-NUMERIC-OTHER HIV/AIDS DR
106	H60A1O3U	Num	4		LENGTH OF TIME-UNIT OF TIME-OTHER HIV DR
107	H60A1_O4	Num	4		CURRENTLY TAKING OTHER HIV/AIDS DRUG-4
108	H60A1O4L	Num	4		LENGTH OF TIME-NUMERIC-OTHER HIV/AIDS DR
109	H60A1O4U	Num	4		LENGTH OF TIME-UNIT OF TIME-OTHER HIV DR
110	H60A1_O5	Num	4		CURRENTLY TAKING OTHER HIV/AIDS DRUG-5
111	H60A1O5L	Num	4		LENGTH OF TIME-NUMERIC-OTHER HIV/AIDS DR
112	H60A1O5U	Num	4		LENGTH OF TIME-UNIT OF TIME-OTHER HIV DR
113	H60A1_O6	Num	4		CURRENTLY TAKING OTHER HIV/AIDS DRUG-6
114	H60A1O6L	Num	4		LENGTH OF TIME-NUMERIC-OTHER HIV/AIDS DR

Num	Variable	Type	Len	Format	Label
115	H60A1O6U	Num	4		LENGTH OF TIME-UNIT OF TIME-OTHER HIV DR
116	H60A1_O7	Num	4		CURRENTLY TAKING OTHER HIV/AIDS DRUG-7
117	H60A1O7L	Num	4		LENGTH OF TIME-NUMERIC-OTHER HIV/AIDS DR
118	H60A1O7U	Num	4		LENGTH OF TIME-UNIT OF TIME-OTHER HIV DR
119	H60A1_O8	Num	4		CURRENTLY TAKING OTHER HIV/AIDS DRUG-8
120	H60A1O8L	Num	4		LENGTH OF TIME-NUMERIC-OTHER HIV/AIDS DR
121	H60A1O8U	Num	4		LENGTH OF TIME-UNIT OF TIME-OTHER HIV DR
122	H60A1_O9	Num	4		CURRENTLY TAKING OTHER HIV/AIDS DRUG-9
123	H60A1O9L	Num	4		LENGTH OF TIME-NUMERIC-OTHER HIV/AIDS DR
124	H60A1O9U	Num	4		LENGTH OF TIME-UNIT OF TIME-OTHER HIV DR
125	H60A1O10	Num	4		CURRENTLY TAKING OTHER HIV/AIDS DRUG-10
126	H60A10L	Num	4		LENGTH OF TIME-NUMERIC-OTHER HIV/AIDS DR
127	H60A10U	Num	4		LENGTH OF TIME-UNIT OF TIME-OTHER HIV DR
128	H60A2	Num	4		DIDN'T USE ANY HCV MEDS
129	H60A2_1	Num	4		HCV MEDICATIONS: INTRON
130	H60A2_2	Num	4		HCV MEDICATIONS: ROFERON
131	H60A2_3	Num	4		HCV MEDICATIONS: INFERGEN
132	H60A2_4	Num	4		HCV MEDICATIONS: STANDARD INTERFERON
133	H60A2_5	Num	4		HCV MEDICATIONS: REBETOL
134	H60A2_6	Num	4		HCV MEDICATIONS: VIRAZOLE
135	H60A2_7	Num	4		HCV MEDICATIONS: REBETRON
136	H60A2_8	Num	4		HCV MEDICATIONS: PEG-INTRON
137	H60A2_9	Num	4		HCV MEDICATIONS: PEGASYS
138	H60A3	Num	4		DIDN'T USE ANY OTHER PRESCRIPTION MED
139	H60A3_1	Num	4		OTHER PRESCRIPTION MEDS: VIOXX
140	H60A3_2	Num	4		OTHER PRESCRIPTION MEDS: CELEBREX
141	H60A3_3	Num	4		OTHER PRESCRIPTION MEDS: VICODIN
142	H60A3_4	Num	4		OTHER PRESCRIPTION MEDS: TYLENOL #3
143	H60A3_5	Num	4		OTHER PRESCRIPTION MEDS: PERCOCET
144	H60A3_6	Num	4		OTHER PRESCRIPTION MEDS: OXYIR
145	H60A3_7	Num	4		OTHER PRESCRIPTION MEDS: HYDROCHLOROTHIA
146	H60A3_8	Num	4		OTHER PRESCRIPTION MEDS: PRILOSEC
147	H60A3_9	Num	4		OTHER PRESCRIPTION MEDS: ZOLOFT
148	H60A3_10	Num	4		OTHER PRESCRIPTION MEDS: NEURONTIN
149	H60A3_O1	Num	4		OTHER PRESCRIPTION MEDS: SPECIFY 1
150	H60A3_O2	Num	4		OTHER PRESCRIPTION MEDS: SPECIFY 2
151	H60A3_O3	Num	4		OTHER PRESCRIPTION MEDS: SPECIFY 3
152	H60A3_O4	Num	4		OTHER PRESCRIPTION MEDS: SPECIFY 4
153	H60A3_O5	Num	4		OTHER PRESCRIPTION MEDS: SPECIFY 5

Num	Variable	Type	Len	Format	Label
154	H60A3_O6	Num	4		OTHER PRESCRIPTION MEDS: SPECIFY 6
155	H60A3_O7	Num	4		OTHER PRESCRIPTION MEDS: SPECIFY 7
156	H60A3_O8	Num	4		OTHER PRESCRIPTION MEDS: SPECIFY 8
157	H60A3_O9	Num	4		OTHER PRESCRIPTION MEDS: SPECIFY 9
158	H60A3O10	Num	4		OTHER PRESCRIPTION MEDS: SPECIFY 10
159	H60A4	Num	4		DIDNT USE HERBS/DRUGS
160	H60A4_1	Num	4		HERBAL SUPPLEMENTS: ALCHEMILLA
161	H60A4_2	Num	4		HERBAL SUPPLEMENTS: CHAPARRAL
162	H60A4_3	Num	4		HERBAL SUPPLEMENTS: CHONDROITIN
163	H60A4_4	Num	4		HERBAL SUPPLEMENTS: EVENING PRIMROSE
164	H60A4_5	Num	4		HERBAL SUPPLEMENTS: EPHEDRA
165	H60A4_6	Num	4		HERBAL SUPPLEMENTS: FEWERFEW
166	H60A4_7	Num	4		HERBAL SUPPLEMENTS: FISH OIL
167	H60A4_8	Num	4		HERBAL SUPPLEMENTS: GENTIAN
168	H60A4_9	Num	4		HERBAL SUPPLEMENTS: GERMANDER
169	H60A4_10	Num	4		HERBAL SUPPLEMENTS: GINKGO
170	H60A4_11	Num	4		HERBAL SUPPLEMENTS: GINSENG
171	H60A4_12	Num	4		HERBAL SUPPLEMENTS: GINGER
172	H60A4_13	Num	4		HERBAL SUPPLEMENTS: GLUCOSAMINE
173	H60A4_14	Num	4		HERBAL SUPPLEMENTS: JU BU HUAN
174	H60A4_15	Num	4		HERBAL SUPPLEMENTS: MILK THISTLE
175	H60A4_16	Num	4		HERBAL SUPPLEMENTS: SENNA
176	H60A4_17	Num	4		HERBAL SUPPLEMENTS: SHARK CARTILAGE
177	H60A4_18	Num	4		HERBAL SUPPLEMENTS: SCURELLARIA
178	H60A4_19	Num	4		HERBAL SUPPLEMENTS: ST. JOHNS WART
179	H60A4_H1	Num	4		HERBAL SUPPLEMENTS: SPECIFY 1
180	H60A4_H2	Num	4		HERBAL SUPPLEMENTS: SPECIFY 2
181	H60A4_H3	Num	4		HERBAL SUPPLEMENTS: SPECIFY 3
182	H60A4_H4	Num	4		HERBAL SUPPLEMENTS: SPECIFY 4
183	H60A4_H5	Num	4		HERBAL SUPPLEMENTS: SPECIFY 5
184	H60A4_H6	Num	4		HERBAL SUPPLEMENTS: SPECIFY 6
185	H60A4_H7	Num	4		HERBAL SUPPLEMENTS: SPECIFY 7
186	H60A4_H8	Num	4		HERBAL SUPPLEMENTS: SPECIFY 8
187	H60A4_H9	Num	4		HERBAL SUPPLEMENTS: SPECIFY 9
188	H60A4H10	Num	4		HERBAL SUPPLEMENTS: SPECIFY 10
189	H60A4_O1	Num	4		OTHER DRUGS: SPECIFY 1
190	H60A4_O2	Num	4		OTHER DRUGS: SPECIFY 2
191	H60A4_O3	Num	4		OTHER DRUGS: SPECIFY 3
192	H60A4_O4	Num	4		OTHER DRUGS: SPECIFY 4

Num	Variable	Type	Len	Format	Label
193	H60A4_O5	Num	4		OTHER DRUGS: SPECIFY 5
194	H60A4_O6	Num	4		OTHER DRUGS: SPECIFY 6
195	H60A4_O7	Num	4		OTHER DRUGS: SPECIFY 7
196	H60A4_O8	Num	4		OTHER DRUGS: SPECIFY 8
197	H60A4_O9	Num	4		OTHER DRUGS: SPECIFY 9
198	H60A4O10	Num	4		OTHER DRUGS: SPECIFY 10
199	H60_B1	Num	4		REDUCE AMOUNT OF TIME SPENT ON WORK?
200	H60_B2	Num	4		ACCOMPLISH LESS THAN YOU WOULD LIKE?
201	H60_B3	Num	4		LIMITED IN THE KIND OF WORK/ACTIVITIES?
202	H60_B4	Num	4		HAVE DIFFICULTY PERFORMING WORK/ACTIVITI
203	H60_B5	Num	4		PAIN IN YOUR JOINTS PAST 4 WEEKS
204	H60_B6	Num	4		PAIN OF OTHER TYPES PAST 4 WEEKS
205	H60_B7	Num	4		HOW MUCH DID PAIN INTERFERE WITH NORMAL
206	H60_C1	Num	4		PAST MONTH: HOW OFTEN TAKEN ACETAMINOPHE
207	H60_C2	Num	4		PAST 3 MONTHS: # ACETAMINOPHEN A WEEK
208	H60_C3	Num	4		PAST 3 MONTHS: MAX # ACETAMINOPHEN A WEE
209	H60_C4	Num	4		3-12 MONTHS: # ACETAMINOPHEN A WEEK
210	H60_C5	Num	4		3-12 MONTHS: MAX # ACETAMINOPHEN A WEEK
211	H60C6_1	Num	4		PAST TWO WEEKS: COX-2 INHIBITOR TAKEN-NO
212	H60C6_2	Num	4		PAST TWO WEEKS: COX-2 INHIBITOR TAKEN-VI
213	H60C6_3	Num	4		PAST TWO WEEKS: COX-2 INHIBITOR TAKEN-CE
214	H60C6O_1	Num	4		PAST TWO WEEKS: COX-2 INHIBITOR TAKEN-SP
215	H60C6O_2	Num	4		PAST TWO WEEKS: COX-2 INHIBITOR TAKEN-SP
216	H60C6O_3	Num	4		PAST TWO WEEKS: COX-2 INHIBITOR TAKEN-SP
217	H60C6O_4	Num	4		PAST TWO WEEKS: COX-2 INHIBITOR TAKEN-SP
218	H60C6O_5	Num	4		PAST TWO WEEKS: COX-2 INHIBITOR TAKEN-SP
219	H60C6O_6	Num	4		PAST TWO WEEKS: COX-2 INHIBITOR TAKEN-SP
220	H60C6O_7	Num	4		PAST TWO WEEKS: COX-2 INHIBITOR TAKEN-SP
221	H60C6O_8	Num	4		PAST TWO WEEKS: COX-2 INHIBITOR TAKEN-SP
222	H60C6O_9	Num	4		PAST TWO WEEKS: COX-2 INHIBITOR TAKEN-SP
223	H60C6O10	Num	4		PAST TWO WEEKS: COX-2 INHIBITOR TAKEN-SP
224	H60_C6A	Num	4		FOR HOW MANY MONTHS USED COX-2 INHIBITOR
225	H60_C7	Num	4		PAST 2 WEEKS: TAKE OTHER NSAIDS
226	H60_C7A	Num	4		FOR HOW MANY MONTHS USED OTHER NSAIDS
227	H60_C8	Num	4		PAST 3 MONTHS: # NSAIDS A WEEK
228	H60_C9	Num	4		PAST 3 MONTHS: MAX # NSAIDS A WEEK
229	H60_C10	Num	4		3-12 MONTHS: # NSAIDS A WEEK
230	H60_C11	Num	4		3-12 MONTHS: MAX # NSAIDS A WEEK
231	H60_C12	Num	4		PAST MONTH: HOW OFTEN TAKEN CODEINE/OTHE

Num	Variable	Type	Len	Format	Label
232	H60_C13P	Num	4		PAST 3 MONTHS: # CODEINE/OTHER PILLS A W
233	H60_C13I	Num	4		PAST 3 MONTHS: # CODEINE/OTHER INJECTION
234	H60_C14P	Num	4		PAST 3 MONTHS: MAX # CODEINE/OTHER PILLS
235	H60_C14I	Num	4		PAST 3 MONTHS: MAX # CODEINE/OTHER INJEC
236	H60_C15P	Num	4		3-12 MONTHS: # CODEINE/OTHER PILLS A WEE
237	H60_C15I	Num	4		3-12 MONTHS: # CODEINE/OTHER INJECTIONS
238	H60_C16P	Num	4		3-12 MONTHS: MAX # CODEINE/OTHER PILLS A
239	H60_C16I	Num	4		3-12 MONTHS: MAX # CODEINE/OTHER INJECTI
240	H60_D1	Num	4		PAST YEAR SMOKED CIGARETTES REGULARLY
241	H60_D2	Num	4		PAST YEAR HAD A DRINK CONTAINING ALCOHOL
242	H60_D3	Num	4		PAST 3 MONTH, # OF DRINKS PER WEEK
243	H60_D4	Num	4		PAST 3 MONTH, MAX # OF DRINKS PER DAY
244	H60_D5	Num	4		3-12 MONTHS: # OF DRINKS PER WEEK
245	H60_D6	Num	4		3-12 MONTHS: MAX # OF DRINKS PER DAY
246	H60_D7	Num	4		UNABLE TO STOP DRINKING
247	H60_D8	Num	4		FAILED TO DO SOMETHING YOU WERE EXPECTED
248	H60_D9	Num	4		NEEDED A DRINK FIRST THING IN THE MORNIN
249	H60_D10	Num	4		FELT GUILTY AFTER DRINKING
250	H60_D11	Num	4		UNABLE TO REMEMBER AFTER DRINKING
251	H60_D12	Num	4		YOU OR SOMEONE BEEN INJURED DUE TO DRINK
252	H60_D13	Num	4		RELATIVE CONCERNED ABOUT YOUR DRINKING
253	H60_E1	Num	4		PAST 2 WKS: ABDOMINAL BLOATING
254	H60_E2	Num	4		PAST 2 WKS: TIRED OR FATIGUED
255	H60_E3	Num	4		PAST 2 WKS: BODILY PAIN
256	H60_E4	Num	4		PAST 2 WKS: FELT SLEEPING DURING THE DAY
257	H60_E5	Num	4		PAST 2 WKS: ABDOMINAL PAIN
258	H60_E6	Num	4		PAST 2 WKS: SHORTNESS OF BREATH
259	H60_E7	Num	4		PAST 2 WKS: NOT ABLE TO EAT MUCH
260	H60_E8	Num	4		PAST 2 WKS: DECREASED STRENGTH
261	H60_E9	Num	4		PAST 2 WKS: TROUBLE LIFTING HEAVY OBJECT
262	H60_E10	Num	4		PAST 2 WKS: FELT ANXIOUS
263	H60_E11	Num	4		PAST 2 WKS: DECREASED LEVEL OF ENERGY
264	H60_E12	Num	4		PAST 2 WKS: FELT UNHAPPY
265	H60_E13	Num	4		PAST 2 WKS: FELT DROWSY
266	H60_E14	Num	4		PAST 2 WKS: LIMITATION OF YOUR DIET
267	H60_E15	Num	4		PAST 2 WKS: BEEN IRRITABLE
268	H60_E16	Num	4		PAST 2 WKS: DIFFICULTY SLEEPING
269	H60_E17	Num	4		PAST 2 WKS: ABDOMINAL DISCOMFORT
270	H60_E18	Num	4		PAST 2 WKS: WORRIED/IMPACT HEPATIC C VIR

Num	Variable	Type	Len	Format	Label
271	H60_E19	Num	4		PAST 2 WKS: MOOD SWINGS
272	H60_E20	Num	4		PAST 2 WKS: UNABLE TO FALL ASLEEP AY NIG
273	H60_E21	Num	4		PAST 2 WKS: MUSCLE CRAMPS
274	H60_E22	Num	4		PAST 2 WKS: WORRIED ABOUT YOUR SYMPTOMS
275	H60_E23	Num	4		PAST 2 WKS: DRY MOUTH
276	H60_E24	Num	4		PAST 2 WKS: FELT DEPRESSED
277	H60_E25	Num	4		PAST 2 WKS: WORRIED VIRUS INFECTION GETT
278	H60_E26	Num	4		PAST 2 WKS: PROBLEM CONCENTRATING
279	H60_E27	Num	4		PAST 2 WKS: TROUBLED BY ITCHING
280	H60_E28	Num	4		PAST 2 WKS: WORRIED ABOUT NOT FEELING BE
281	H60_E29	Num	4		PAST 2 WKS: CONCERNED AVAILABILITY OF LI
282	H60_DT	Num	4	8.	DATE FORM COMPLETED (SAS DATE): Converted to days since reference date
283	H60_DF	Num	4		DATE FORM COMPLETED (IMPUTE FLAG)
284	F60ABDOM	Num	4	6.2	SUMMARY QUALITY OF LIFE: ABDOMINAL
285	F60FATIG	Num	4	6.2	SUMMARY QUALITY OF LIFE: FATIGUE
286	F60SYSTM	Num	4	6.2	SUMMARY QUALITY OF LIFE: SYSTEM
287	F60ACTIV	Num	4	6.2	SUMMARY QUALITY OF LIFE: ACTIVITY
288	F60EMOTN	Num	4	6.2	SUMMARY QUALITY OF LIFE: EMOTION
289	F60WORRY	Num	4	6.2	SUMMARY QUALITY OF LIFE: WORRY
290	H60_E1R	Num	4		RECODED VALUE OF H60_E1 FOR QOL CALC.
291	H60_E5R	Num	4		RECODED VALUE OF H60_E5 FOR QOL CALC.
292	H60_E17R	Num	4		RECODED VALUE OF H60_E17 FOR QOL CALC.
293	H60_E2R	Num	4		RECODED VALUE OF H60_E2 FOR QOL CALC.
294	H60_E4R	Num	4		RECODED VALUE OF H60_E4 FOR QOL CALC.
295	H60_E8R	Num	4		RECODED VALUE OF H60_E8 FOR QOL CALC.
296	H60_E11R	Num	4		RECODED VALUE OF H60_E11 FOR QOL CALC.
297	H60_E13R	Num	4		RECODED VALUE OF H60_E13 FOR QOL CALC.
298	H60_E3R	Num	4		RECODED VALUE OF H60_E3 FOR QOL CALC.
299	H60_E6R	Num	4		RECODED VALUE OF H60_E6 FOR QOL CALC.
300	H60_E21R	Num	4		RECODED VALUE OF H60_E21 FOR QOL CALC.
301	H60_E23R	Num	4		RECODED VALUE OF H60_E23 FOR QOL CALC.
302	H60_E27R	Num	4		RECODED VALUE OF H60_E27 FOR QOL CALC.
303	H60_E7R	Num	4		RECODED VALUE OF H60_E7 FOR QOL CALC.
304	H60_E9R	Num	4		RECODED VALUE OF H60_E9 FOR QOL CALC.
305	H60_E14R	Num	4		RECODED VALUE OF H60_E14 FOR QOL CALC.
306	H60_E10R	Num	4		RECODED VALUE OF H60_E10 FOR QOL CALC.
307	H60_E12R	Num	4		RECODED VALUE OF H60_E12 FOR QOL CALC.
308	H60_E15R	Num	4		RECODED VALUE OF H60_E15 FOR QOL CALC.
309	H60_E16R	Num	4		RECODED VALUE OF H60_E16 FOR QOL CALC.

Num	Variable	Type	Len	Format	Label
310	H60_E19R	Num	4		RECODED VALUE OF H60_E19 FOR QOL CALC.
311	H60_E20R	Num	4		RECODED VALUE OF H60_E20 FOR QOL CALC.
312	H60_E24R	Num	4		RECODED VALUE OF H60_E24 FOR QOL CALC.
313	H60_E26R	Num	4		RECODED VALUE OF H60_E26 FOR QOL CALC.
314	H60_E18R	Num	4		RECODED VALUE OF H60_E18 FOR QOL CALC.
315	H60_E22R	Num	4		RECODED VALUE OF H60_E22 FOR QOL CALC.
316	H60_E25R	Num	4		RECODED VALUE OF H60_E25 FOR QOL CALC.
317	H60_E28R	Num	4		RECODED VALUE OF H60_E28 FOR QOL CALC.
318	H60_E29R	Num	4		RECODED VALUE OF H60_E29 FOR QOL CALC.
319	ILLEGAL_DRUGS	Num	8		Use of Marijuana, Speed, Heroin, MDMA, Phencyclidine, Anabolic Steroids, Glues/Solvents, or Cocaine
320	SUBJ_ID	Char	8		MHCS SUBJECT IDENTIFIER

Data Set Name: f61.sas7bdat

Num	Variable	Type	Len	Format	Informat	Label
1	ASCCODE	Num	4			Q15. ASCITES UNTREATED REASON SPEC. CODE
2	NEUROCD	Num	4			OTHER NEUROLOGICAL ABNORMALITIES CODE
3	VISITNUM	Num	4	1.		VISIT NUMBER
4	NoBM	Num	4	4.	4.	BASIC MEASUREMENTS NOT OBTAINED
5	feet	Num	4	2.	19.	Q1. FEET (HEIGHT)
6	inches	Num	4	3.	19.	Q1. INCHES (HEIGHT)
7	cms	Num	4	6.	19.	Q1. CENTIMETERS (HEIGHT)
8	pounds	Num	4	5.1	19.	Q2. WEIGHT IN POUNDS
9	kgs	Num	4	5.1	19.	Q2. WEIGHT IN KILOGRAMS
10	fahrenheit	Num	4	5.1		Q3. TEMPERATURE IN FAHRENHEIT
11	celsius	Num	4	5.1		Q3. TEMPERATURE IN CELSIUS
12	systolic	Num	4	6.	19.	Q4. BLOOD PRESSURE - SYSTOLIC
13	diastolic	Num	4	6.	19.	Q4. BLOOD PRESSURE - DIASTOLIC
14	blood	Num	4	1.	4.	Q5. URINALYSIS - BLOOD LEVEL
15	protein	Num	4	1.	4.	Q6. URINALYSIS - PROTEIN LEVEL
16	nitrite	Num	4	1.	4.	Q7. URINALYSIS - NITRITE LEVEL
17	a_acid	Num	4	1.	4.	Q8. URINALYSIS - ASCORBIC ACID LEVEL
18	glucose	Num	4	1.	4.	Q9. URINALYSIS - GLUCOSE LEVEL
19	ph	Num	4	1.	4.	Q10. URINALYSIS - pH LEVEL
20	hem_arth	Num	4	1.	4.	Q11. HEMOPHILIC ARTHROPATHY
21	HEMARTH1	Num	4	4.	4.	Q11. HAS JOINT REPLACEMENT
22	HEMARTH2	Num	4	4.	4.	Q11. JOINT AFFECTED NOW
23	HEMARTH3	Num	4	4.	4.	Q11. TWO OR MORE JOINTS
24	kar_perf	Num	4	1.	4.	Q12. KARNOFSKY PERFORMANCE
25	affected	Num	4	1.	4.	Q13. KAR PERF AFFECTED BY HEM ARTH
26	fatigue	Num	4	1.	4.	Q14. FATIGUE LEVEL
27	ascites	Num	4	1.	4.	Q15. ASCITES
28	hepatome	Num	4	1.	4.	Q16. HEPATOMEGALY
29	splenome	Num	4	1.	4.	Q17. SPLENOMEGALY
30	splnsize	Num	4	19.	19.	Q17. SPLEEN'S SIZE (IN CM.)
31	h_zoster	Num	4	1.	4.	Q18. HERPES ZOSTER (SHINGLES)
32	lym_none	Num	4	2.	4.	Q19. LYMPHADENOPATHY - NONE
33	lym_cerv	Num	4	1.	4.	Q19. LYMPHADENOPATHY - CERVICAL
34	cervsite	Num	4	2.	19.	Q19. CERVICAL LYMPH - # SITES
35	cervshot	Num	4	1.	4.	Q19. CERVICAL LYMPH - SHOTTY
36	lym_othe	Num	4	1.	4.	Q19. LYMPHADENOPATHY - OTHER

Num	Variable	Type	Len	Format	Informat	Label
37	lgstnode	Num	4	2.	19.	Q19a.DIAMETER OF LARGEST LYMPH NODE
38	nocond	Num	4	4.	4.	NOTHING CHECKED FOR Q.20
39	p_neurop	Num	4	1.	4.	Q20. PERIPHERAL NEUROPATHY
40	spider	Num	4	1.	4.	Q20. SPIDER ANGIOMATA
41	neuro_ab	Num	4	1.	4.	Q20. OTHER NEUROLOGICAL ABNORMAL
42	palmare	Num	4	1.	4.	Q20. PALMAR ERYTHEMA
43	wgt_loss	Num	4	1.	4.	Q20. UNEXPLAINED WEIGHT LOSS
44	edema	Num	4	1.	4.	Q20. LOWER EXTREMITY EDEMA
45	memory	Num	4	1.	4.	Q20. MEMORY OR CONCENTRATION PROBLEMS
46	depressn	Num	4	1.	4.	Q20. CHRONIC DEPRESSION
47	gynecom	Num	4	1.	4.	Q20. GYNECOMASTIA
48	arthralg	Num	4	1.	4.	Q20. ARTHRALGIAS/ARTHRITIS
49	nausea	Num	4	1.	4.	Q20. NAUSEA
50	tenderns	Num	4	1.	4.	Q20. RIGHT UP QUAD ABD/LIVER TENDERNESS
51	i_sclera	Num	4	1.	4.	Q20. ICTERIC SCLERA
52	jaundice	Num	4	1.	4.	Q20. JAUNDICE
53	atrophy	Num	4	1.	4.	Q20. TEMPORAL MUSCLE ATROPHY
54	visit_DT	Num	4	8.		FOLLOW UP PE VISIT DATE (SAS DATE): Converted to days since reference date
55	visit_DF	Num	4			FOLLOW UP PE VISIT DATE IMPUTE FLAG
56	phase	Num	8	4.	4.	phase
57	SUBJ_ID	Char	8			MHCS SUBJECT IDENTIFIER

Data Set Name: f62.sas7bdat

Num	Variable	Type	Len	Format	Informat	Label
1	OLDHCV1	Num	4			Q16. OLD code assigned to other HCV
2	OLDHCV2	Num	4			Q16. OLD code assigned to other HCV
3	q1reason	Num	4	4.	4.	Q1. Reason withdrew from study
4	q24adiag	Num	4	4.	4.	Q24A. Cancer #1-Where cancer diagnosed
5	q24bdiag	Num	4	4.	4.	Q24B. Cancer #2-Where cancer diagnosed
6	Q6_NONE	Num	4	4.	4.	Q6. Units of factor concentrate-NONE
7	Q6_UNIT	Num	4	4.	4.	Q6. Units of factor concentrate-KNOWN
8	Q6_MG	Num	4	4.	4.	Q6. Units of factor conc-MICROGRAMS
9	Q6_UNK	Num	4	4.	4.	Q6. Units of factor concentrate-UNKNOWN
10	Q6_MICRO	Num	4	19.	19.	Q6. Number units factor conc.-MICROGRAMS
11	Q6UNITS	Num	4	19.	19.	Q6. Number of units
12	GENDEFCD	Num	4			Q4A. Code assigned to other genetic def.
13	Q8AVE	Num	4			Q8. Ave annual amount of factor conc.
14	q7bags	Num	4			Q7. # of bags
15	q7mls	Num	4			Q7. Total MLS
16	DRUGCD1	Num	4			Q18. Code assigned to other brand used (
17	DRUGCD2	Num	4			Q19. Code assigned to other brand used (
18	DRUGCD3	Num	4			Q20. Code assigned to other brand used (
19	DRUGCD4	Num	4			Q21. Code assigned to other brand used (
20	Q12YEAR	Num	4			Q12. Year of Hep A vaccination
21	Q23AYR	Num	4			Q23A. Year of liver transplant
22	Q1	Num	4	4.	4.	Q1. Subject status
23	CNCRCD	Num	4	6.	6.	Q1B. Code assigned to other cancer
24	Q1c	Num	4	6.	6.	Q1C. Autopsy performed
25	Q1d	Num	4	6.	6.	Q1D. Liver Tissue obtained
26	Q2a	Num	4	4.	4.	Q2A. After or same as date of enrollment
27	Q4	Num	4	4.	4.	Q4. Is hemophilia genetic defect correct
28	Q4a	Num	4	6.	6.	Q4A. What is hemophilia genetic defect?
29	Q5a	Num	4	4.	4.	Q5A. Clotting Factor Products-None
30	Q5b	Num	4	4.	4.	Q5B. Clotting Factor Products-Recombin.
31	Q5c	Num	4	4.	4.	Q5C. Clotting Factor Products-Monoclonal
32	Q5d	Num	4	4.	4.	Q5D. Clotting Factor Products-High Pur
33	Q5e	Num	4	4.	4.	Q5E. Clotting Factor Products-Int Purity
34	Q5f	Num	4	4.	4.	Q5F. Clotting Factor Products-Cryoprecip
35	Q5g	Num	4	4.	4.	Q5G. Other Blood Components
36	Q6a	Num	4	4.	4.	Q6A. Basis factor was administered

Num	Variable	Type	Len	Format	Informat	Label
37	Q7	Num	4	6.	6.	Q7. How many units of cryo did sub rec
38	Q9	Num	4	4.	4.	Q9. More info. about the subj factor use
39	Q10	Num	4	6.	6.	Q10. Did the subject receive an HBV vacc
40	Q11	Num	4	4.	4.	Q11. Is HBV chron carrier stat accurate?
41	Q11a	Num	4	6.	6.	Q11A. HBV chronic carrier stat of subj
42	Q12	Num	4	6.	6.	Q12. Vaccinated for hepatitis A
43	Q13	Num	4	6.	6.	Q13. Current HCV antibody status
44	Q14	Num	4	4.	4.	Q14. HIV status
45	Q15	Num	4	6.	6.	Q15. AIDS-defining condition
46	Q15a1	Num	4	4.	4.	Q15A1. CD4 <200 cells/ul or <14%
47	Q15A1MO	Num	4	6.	6.	Q15A1. CD4 <200 cells/ul or <14% month o
48	Q15A1YR	Num	4	11.	11.	Q15A1. CD4 <200 cells/ul or <14% year of
49	Q15a2	Num	4	4.	4.	Q15A2. CMV (not liver, spleen, lymph)
50	Q15A2MO	Num	4	6.	6.	Q15A2. CMV (not liver, spleen, lymph) mo
51	Q15A2YR	Num	4	11.	11.	Q15A2. CMV (not liver, spleen, lymph) ye
52	Q15a3	Num	4	4.	4.	Q15A3. Candidiasis of esophagus or lungs
53	Q15A3MO	Num	4	6.	6.	Q15A3. Candidiasis of esophagus or lungs
54	Q15A3YR	Num	4	11.	11.	Q15A3. Candidiasis of esophagus or lungs
55	Q15a4	Num	4	4.	4.	Q15A4. Cervical cancer, invasive
56	Q15A4MO	Num	4	6.	6.	Q15A4. Cervical cancer, invasive month o
57	Q15A4YR	Num	4	11.	11.	Q15A4. Cervical cancer, invasive year of
58	Q15a5	Num	4	4.	4.	Q15A5. Coccidioidmycosis, extrapulmonary
59	Q15A5MO	Num	4	6.	6.	Q15A5. Coccidioidmycosis, extrapulmonary
60	Q15A5YR	Num	4	11.	11.	Q15A5. Coccidioidmycosis, extrapulmonary
61	Q15a6	Num	4	4.	4.	Q15A6. Cryptococcosis, extrapulmonary
62	Q15A6MO	Num	4	6.	6.	Q15A6. Cryptococcosis, extrapulmonary mo
63	Q15A6YR	Num	4	11.	11.	Q15A6. Cryptococcosis, extrapulmonary ye
64	Q15a7	Num	4	4.	4.	Q15A7. Cryptosporidiosis with diarrhea f
65	Q15A7MO	Num	4	6.	6.	Q15A7. Cryptosporidiosis with diarrhea f
66	Q15A7YR	Num	4	11.	11.	Q15A7. Cryptosporidiosis with diarrhea f
67	Q15a8	Num	4	4.	4.	Q15A8. Herpes simplex, ulcer for > 1 mon
68	Q15A8MO	Num	4	6.	6.	Q15A8. Herpes simplex, ulcer for > 1 mon
69	Q15A8YR	Num	4	11.	11.	Q15A8. Herpes simplex, ulcer for > 1 mon
70	Q15a9	Num	4	4.	4.	Q15A9. Herpes simplex in lungs or esopha
71	Q15A9MO	Num	4	6.	6.	Q15A9. Herpes simplex in lungs or esopha
72	Q15A9YR	Num	4	11.	11.	Q15A9. Herpes simplex in lungs or esopha
73	Q15a10	Num	4	4.	4.	Q15A10. Histoplasmosis, extrapulmonary
74	Q15A10MO	Num	4	6.	6.	Q15A10. Histoplasmosis, extrapulmonary m
75	Q15A10YR	Num	4	11.	11.	Q15A10. Histoplasmosis, extrapulmonary y

Num	Variable	Type	Len	Format	Informat	Label
76	Q15a11	Num	4	4.	4.	Q15A11. HIV encephalopathy/dementia
77	Q15A11MO	Num	4	6.	6.	Q15A11. HIV encephalopathy/dementia mont
78	Q15A11YR	Num	4	11.	11.	Q15A11. HIV encephalopathy/dementia year
79	Q15a12	Num	4	4.	4.	Q15A12. Isosporiasis with diarrhea for >
80	Q15A12MO	Num	4	6.	6.	Q15A12. Isosporiasis with diarrhea for >
81	Q15A12YR	Num	4	11.	11.	Q15A12. Isosporiasis with diarrhea for >
82	Q15a13	Num	4	4.	4.	Q15A13. Kaposi's syndrome
83	Q15A13MO	Num	4	6.	6.	Q15A13. Kaposi's syndrome month of diag
84	Q15A13YR	Num	4	11.	11.	Q15A13. Kaposi's syndrome year of diagn
85	Q15a14	Num	4	4.	4.	Q15A14. Lymphoid interstitial pneumonia
86	Q15A14MO	Num	4	6.	6.	Q15A14. Lymphoid interstitial pn(LIP) or
87	Q15A14YR	Num	4	11.	11.	Q15A14. Lymphoid interstitial pneumonia
88	Q15a15	Num	4	4.	4.	Q15A15. Lymphoma of the brain (CNS Prima
89	Q15A15MO	Num	4	6.	6.	Q15A15. Lymphoma of the brain (CNS Prima
90	Q15A15YR	Num	4	11.	11.	Q15A15. Lymphoma of the brain (CNS Prima
91	Q15a16	Num	4	4.	4.	Q15A16. Mycobacterium avium (not only lu
92	Q15A16MO	Num	4	6.	6.	Q15A16. Mycobacterium avium (not only lu
93	Q15A16YR	Num	4	11.	11.	Q15A16. Mycobacterium avium (not only lu
94	Q15a17	Num	4	4.	4.	Q15A17. Non-Hodgkin's Lymphoma (not T-c
95	Q15A17MO	Num	4	6.	6.	Q15A17. Non-Hodgkin's Lymphoma (not T-c
96	Q15A17YR	Num	4	11.	11.	Q15A17. Non-Hodgkin's Lymphoma (not T-c
97	Q15a18	Num	4	4.	4.	Q15A18. Pneumocystis carinii pneumonia (
98	Q15A18MO	Num	4	6.	6.	Q15A18. Pneumocystis carinii pneumonia (
99	Q15A18YR	Num	4	11.	11.	Q15A18. Pneumocystis carinii pneumonia (
100	Q15a19	Num	4	4.	4.	Q15A19. Pneumonia, recurrent bacterial (
101	Q15A19MO	Num	4	6.	6.	Q15A19. Pneumonia, recurrent bacterial (
102	Q15A19YR	Num	4	11.	11.	Q15A19. Pneumonia, recurrent bacterial (
103	Q15a20	Num	4	4.	4.	Q15A20. Progressive multifocal leukoence
104	Q15A20MO	Num	4	6.	6.	Q15A20. Progressive multifocal leukoence
105	Q15A20YR	Num	4	11.	11.	Q15A20. Progressive multifocal leukoence
106	Q15a21	Num	4	4.	4.	Q15A21. Pulmonary tuberculosis
107	Q15A21MO	Num	4	6.	6.	Q15A21. Pulmonary tuberculosis month of
108	Q15A21YR	Num	4	11.	11.	Q15A21. Pulmonary tuberculosis year of d
109	Q15a22	Num	4	4.	4.	Q15A22. Salmonella septicemia, recurrent
110	Q15A22MO	Num	4	6.	6.	Q15A22. Salmonella septicemia, recurrent
111	Q15A22YR	Num	4	11.	11.	Q15A22. Salmonella septicemia, recurrent
112	Q15a23	Num	4	4.	4.	Q15A23. Toxoplasmosis of the brain
113	Q15A23MO	Num	4	6.	6.	Q15A23. Toxoplasmosis of the brain month
114	Q15A23YR	Num	4	11.	11.	Q15A23. Toxoplasmosis of the brain year

Num	Variable	Type	Len	Format	Informat	Label
115	Q15a24	Num	4	4.	4.	Q15A24. Wasting syndrome (emaciation,"sl
116	Q15A24MO	Num	4	6.	6.	Q15A24. Wasting syndrome (emaciation,"sl
117	Q15A24YR	Num	4	11.	11.	Q15A24. Wasting syndrome (emaciation,"sl
118	Q15a25	Num	4	4.	4.	Q15A25. Other multiple of recurrent bact
119	Q15A25MO	Num	4	6.	6.	Q15A25. Other multiple of recurrent bact
120	Q15A25YR	Num	4	11.	11.	Q15A25. Other multiple of recurrent bact
121	Q16a	Num	4	4.	4.	Q16A. HCV related conditions-None
122	Q16b	Num	4	4.	4.	Q16B. Jaundice, persistent > 1 month
123	Q16b_mo	Num	4	6.	6.	Q16B. Jaundice, persistent > 1 month mon
124	Q16b_yr	Num	4	11.	11.	Q16B. Jaundice, persistent > 1 year year
125	Q16c	Num	4	4.	4.	Q16C. Ascites (hepatic-related)
126	Q16c_mo	Num	4	6.	6.	Q16C. Ascites (hepatic-related) month of
127	Q16c_yr	Num	4	11.	11.	Q16C. Ascites (hepatic-related) year of
128	Q16e	Num	4	4.	4.	Q16E. Esophageal varices
129	Q16e_mo	Num	4	6.	6.	Q16E. Esophageal varices month of diagno
130	Q16e_yr	Num	4	11.	11.	Q16E. Esophageal varices year of diagnos
131	Q16f	Num	4	4.	4.	Q16F. Bleeding esophageal varices
132	Q16f_mo	Num	4	6.	6.	Q16F. Bleeding esophageal varices month
133	Q16f_yr	Num	4	11.	11.	Q16F. Bleeding esophageal varices year o
134	Q16l	Num	4	4.	4.	Q16L. Biopsy proven Cirrhosis
135	Q16l_mo	Num	4	6.	6.	Q16L. Biopsy proven Cirrhosis month of d
136	Q16l_yr	Num	4	11.	11.	Q16L. Biopsy proven Cirrhosis year of di
137	Q16m	Num	4	4.	4.	Q16M. Other, specify
138	Q16m_mo	Num	4	6.	6.	Q16M. Other, specify month of diagnosis
139	Q16m_yr	Num	4	11.	11.	Q16M. Other, specify year of diagnosis
140	HCVCode1	Num	4	6.	6.	Q16. Code assigned to other HCV related
141	HCVCode2	Num	4	6.	6.	Q16. Code assigned to other HCV related
142	Q17	Num	4	6.	6.	Q17. Did the subject receive HCV treatme
143	Q18	Num	4	4.	4.	Q18. Was the subject treated at the same
144	Q18a	Num	4	6.	6.	Q18A. Brand used
145	Q18b_mo	Num	4	6.	6.	Q18B. Month use began
146	Q18b_yr	Num	4	11.	11.	Q18B. Year use began
147	Q18c	Num	4	6.	6.	Q18C. Is subject currently using it?
148	Q18d	Num	4	6.	6.	Q18D. Why is the subject no longer using
149	Q19	Num	4	4.	4.	Q19. Was the subject treated with standa
150	Q19a	Num	4	4.	4.	Q19A. Brand used
151	Q19b_mo	Num	4	6.	6.	Q19B. Month use began
152	Q19b_yr	Num	4	11.	11.	Q19B. Year use began
153	Q19c	Num	4	4.	4.	Q19C. Is subject currently using it?

Num	Variable	Type	Len	Format	Informat	Label
154	Q19d	Num	4	4.	4.	Q19D. Why is the subject no longer using
155	Q20	Num	4	4.	4.	Q20. Was the subject treated at the same
156	Q20a1	Num	4	4.	4.	Q20A. Brand used: PEG-Intron
157	Q20a2	Num	4	4.	4.	Q20A. Brand used: Pegasys
158	Q20a3	Num	4	4.	4.	Q20A. Brand used: Rebetol
159	Q20a4	Num	4	4.	4.	Q20A. Brand used: Virazole
160	Q20a5	Num	4	4.	4.	Q20A. Brand used: Other
161	Q20b_mo	Num	4	6.	6.	Q20B. Month use began
162	Q20b_yr	Num	4	11.	11.	Q20B. Year use began
163	Q20c	Num	4	4.	4.	Q20C. Is subject currently using it?
164	Q20d	Num	4	4.	4.	Q20D. Why is the subject no longer using
165	Q21	Num	4	4.	4.	Q21. Was the subject treated with pegyla
166	Q21a	Num	4	6.	6.	Q21A. Brand used
167	Q21b_mo	Num	4	6.	6.	Q21B. Month use began
168	Q21b_yr	Num	4	11.	11.	Q21B. Year use began
169	Q21c	Num	4	6.	6.	Q21C. Is subject currently using it?
170	Q21d	Num	4	6.	6.	Q21D. Why is the subject no longer using
171	Q22	Num	4	4.	4.	Q22. Has the subject had a liver biopsy?
172	Q22a	Num	4	4.	4.	Q22A. What was the reason for the biopsy
173	Q23	Num	4	6.	6.	Q23. Has the subject ever been consider
174	Q23a	Num	4	4.	4.	Q23A. Has the subject received a liver t
175	Q23a_mo	Num	4	6.	6.	Q23A. Month of liver transplant
176	Q24	Num	4	4.	4.	Q24. Has the subject been diagnosed with
177	Q24ASCD1	Num	4	11.	11.	Q24A. Cancer #1-PRIMARY SITE CODE
178	Q24AHCD1	Num	4	11.	11.	Q24A. Cancer #1-HISTOLOGIC SUBTYPE CODE
179	Q24ATCD1	Num	4	11.	11.	Q24A. Cancer #1-TYPE CODE
180	Q24a_loc	Num	4	6.	6.	Q24A. Cancer #1-Is this cancer localized
181	Q24a_mo	Num	4	6.	6.	Q24A. Cancer #1-Month of diagnosis
182	Q24a_yr	Num	4	11.	11.	Q24A. Cancer #1-Year of diagnosis
183	Q24BSCD2	Num	4	11.	11.	Q24B. Cancer #2-PRIMARY SITE CODE
184	Q24BHCD2	Num	4	11.	11.	Q24B. Cancer #2-HISTOLOGIC SUBTYPE CODE
185	Q24BTCD2	Num	4	11.	11.	Q24B. Cancer #2-TYPE CODE
186	Q24b_loc	Num	4	6.	6.	Q24B. Cancer #2-Is this cancer localized
187	Q24b_mo	Num	4	6.	6.	Q24B. Cancer #2-Month of diagnosis
188	Q24b_yr	Num	4	11.	11.	Q24B. Cancer #2-Year of diagnosis
189	Q25a	Num	4	4.	4.	Q25A. NO GI BLEED, ETC. SINCE ENR. VISIT
190	Q25b	Num	4	4.	4.	Q25B. YES-GI BLEED SINCE ENR. VISIT
191	Q25c	Num	4	4.	4.	Q25C. YES-GASTROINT. PERF. SINCE VISIT
192	Q25d	Num	4	4.	4.	Q25D. YES-GASTROINT. OBST. SINCE VISIT

Num	Variable	Type	Len	Format	Informat	Label
193	Q25e	Num	4	6.	6.	Q25E. UNKNOWN-GI BLEED, ETC. SINCE VISIT
194	Q25a2	Num	4	4.	4.	Q25A. Have you sent in an Upper GI Suppl
195	DEATH_DT	Num	4	8.		DATE OF DEATH (SAS DATE): Converted to days since reference date
196	DEATH_DF	Num	4			DATE OF DEATH IMPUTE FLAG
197	CVIS_DT	Num	4	8.		DATE MOST RECENT CLINIC VISIT (SAS DATE): Converted to days since reference date
198	CVIS_DF	Num	4			DATE MOST REC. CLINIC VISIT IMPUTE FLAG
199	FUVIS_DT	Num	4	8.		DATE OF FIRST FOLLOW UP (SAS DATE): Converted to days since reference date
200	FUVIS_DF	Num	4			DATE FIRST FOLLOW UP IMPUTE FLAG
201	FORM_DT	Num	4	8.		DATE FORM COMPLETED (SAS DATE): Converted to days since reference date
202	FORM_DF	Num	4			DATE FORM COMPLETED IMPUTE FLAG
203	BiopsyCode	Num	8	6.	6.	BiopsyCode
204	BIOPSYCD	Num	4	6.	6.	Q22A. REASON FOR BIOPSY CODE
205	SUBJ_ID	Char	8			MHCS SUBJECT IDENTIFIER

Data Set Name: f63.sas7bdat

Num	Variable	Type	Len	Format	Label
1	OUTL_V	Num	4		FLAG TO INDICATE AN OUTLIER VALUE
2	PTT_DF	Num	4		PTT DATE: IMPUTE FLAG
3	H63_PTPP	Num	4		PTT PATIENT VALUE
4	H63_PTTC	Num	4		PTT CONTROL VALUE
5	PTT_DT	Num	4	8.	DATE OF PTT TEST (SAS DATE): Converted to days since reference date
6	H63_27H	Num	4		CIRRHOSIS
7	FORM	Num	4		Form Number
8	H63VISIT	Num	4		VISIT NUMBER
9	H63_1	Num	4		CBC-WBC
10	H63_2	Num	4		CBC-HEMOGLOBIN
11	H63_3	Num	4		CBC-HEMATOCRIT
12	H63_4	Num	4		CBC-LYMPHOCYTES
13	H63_5	Num	4		CBC-NEUTROPHILS
14	H63_6	Num	4		CBC-PLATELET COUNT
15	H63_7U	Num	4		ALT (SGPT) U/L
16	H63_7K	Num	4		ALT (SGPT) UKAT/L
17	H63_8U	Num	4		AST (SGOT) U/L
18	H63_8K	Num	4		AST (SGOT) UKAT/L
19	H63_9U	Num	4		ALKALINE PHOSPHATASE U/L
20	H63_9K	Num	4		ALKALINE PHOSPHATASE UKAT/L
21	H63_10MG	Num	4		TOTAL BILIRUBIN MG/DL
22	H63_10MO	Num	4		TOTAL BILIRUBIN UMOL/L
23	H63_11MG	Num	4		DIRECT BILIRUBIN MG/DL
24	H63_11MO	Num	4		DIRECT BILIRUBIN UMOL/L
25	H63_12MG	Num	4		INDIRECT BILIRUBIN MG/DL
26	H63_12MO	Num	4		INDIRECT BILIRUBIN UMOL/L
27	H63_13MG	Num	4		SERUM CREATININE MG/DL
28	H63_13MO	Num	4		SERUM CREATININE UMOL/L
29	H63_14MG	Num	4		BUN MG/DL
30	H63_14MO	Num	4		BUN MMOL/L
31	H63_15	Num	4		ALBUMIN G/DL
32	H63_16	Num	4		GLOBULIN G/DL
33	H63_17PV	Num	4		PROTHROMBIN TIME-PATENT VALUE=SECONDS
34	H63_17CV	Num	4		PROTHROMBIN TIME-PATENT CONTROL=SECONDS
35	H63_17IN	Num	4		INR-RATIO VALUE
36	H63_18MG	Num	4		CHOLESTEROL MG/DL

Num	Variable	Type	Len	Format	Label
37	H63_18MO	Num	4		CHOLESTEROL MMOL/L
38	H63_19P	Num	4		CD4 VALUES %
39	H63_19L	Num	4		CD4 VALUES 10**9/L
40	H63_20P	Num	4		CD8 VALUES %
41	H63_20L	Num	4		CD8 VALUES 10**9/L
42	H63_21DL	Num	4		SERUM IRON UG/DL
43	H63_21MO	Num	4		SERUM IRON UMOL/L
44	H63_22DL	Num	4		TOTAL IRON-BINDING CAPACITY UG/DL
45	H63_22MO	Num	4		TOTAL IRON-BINDING CAPACITY UMOL/L
46	H63_23NG	Num	4		SERUM FERRITIN NG/ML
47	H63_23GL	Num	4		SERUM FERRITIN UG/L
48	H63_24	Num	4		WAS AN INHIBITOR LEVEL DETECTED ON THIS
49	H63_24A	Num	4		INHIBITOR TITER-BETHESDA UNITS
50	H63_TNM	Num	4		TITER NOT MEASURED 01=CHECKED
51	H63_25	Num	4		HAS PATIENT HAD A RUQ ULTRASOUND,CAT OR
52	H63_26	Num	4		WHAT TYPE OF TEST WAS IT
53	H63_27A	Num	4		LIVER SIZE
54	H63_27B	Num	4		LIVER OR PARENCHYMA ECHOGENECITY
55	H63_27C	Num	4		LIVER MASS
56	H63_27CD	Num	4		LIVER MASS-SPECIFY DIAMETER
57	H63_27CC	Num	4		LIVER MASS-CODE ASSIGNED TO OTHER SPECIF
58	H63_27D	Num	4		SPLEEN SIZE
59	H63_27E	Num	4		SPLEEN ABNORMALITY
60	H63_27EC	Num	4		SPLEEN ABNORMALITY-CODE ASSIGNED TO SPEC
61	H63_27F	Num	4		ASCITES
62	H63_27G	Num	4		PORTAL VEIN THROMBOSIS
63	H63_COM1	Char	50		COMMENTS-RTI INTERNAL USE
64	H63_COM2	Char	50		COMMENTS-RTI INTERNAL USE
65	CBC_DT	Num	4	8.	DATE OF MOST RECENT CBC: SAS DATE: Converted to days since reference date
66	CBC_DF	Num	4		DATE OF MOST RECENT CBC: IMPUTE FLAG
67	SC_DT	Num	4	8.	DATE OF MOST RECENT SERUM CHEM:SAS DATE: Converted to days since reference date
68	SC_DF	Num	4		DATE OF MOST RECENT SERUM CHEM:IMPUTE FL
69	PT_DT	Num	4	8.	MOST RECENT PROTHROMBIN TIME:SAS DATE: Converted to days since reference date
70	PT_DF	Num	4		MOST RECENT PROTHROMBIN TIME:IMPUTE DATE
71	CH_DT	Num	4	8.	MOST RECENT CHOLESTEROL: SAS DATE: Converted to days since reference date
72	CH_DF	Num	4		MOST RECENT CHOLESTEROL: IMPUTE FLAG
73	HIV_DT	Num	4	8.	MOST RECENT HIV/AIDS: SAS DATE: Converted to days since reference date
74	HIV_DF	Num	4		MOST RECENT HIV/AIDS: IMPUTE FLAG

Num	Variable	Type	Len	Format	Label
75	IRL_DT	Num	4	8.	DATE OF MOST RECENT IRON LEVEL:SAS DATE: Converted to days since reference date
76	IRL_DF	Num	4		DATE OF MOST RECENT IRON LEVEL:IMPUTE FL
77	IL_DT	Num	4	8.	INHIBITOR LEVEL DATE: SAS DATE: Converted to days since reference date
78	IL_DF	Num	4		INHIBITOR LEVEL DATE: IMPUTE FLAG
79	US_DT	Num	4	8.	MOST RECENT TEST ULTRASOUND:SAS DATE: Converted to days since reference date
80	US_DF	Num	4		MOST RECENT TEST ULTRASOUND: IMPUTE FLAG
81	SUBJ_ID	Char	8		MHCS SUBJECT IDENTIFIER

Data Set Name: f63web.sas7bdat

Num	Variable	Type	Len	Format	Label
1	H63_15GL	Num	4		ALBUMIN g/L
2	phase	Num	4		STUDY PHASE (H63VISIT - 1)
3	nolab	Num	4		NO LAB TEST RESULTS AVAILABLE PAST 12 MO
4	CBC_NA	Num	4		NO CBC RESULTS AVAILABLE PAST 12 MONTHS
5	H63_1	Num	4		CBC-WBC 10**3/MM**3 (=10**9/L =K/uL)
6	H63_1_NA	Num	4		WBC NOT AVAILABLE
7	h63_2	Num	4		CBC-HEMOGLOBIN G/DL
8	H63_2_GL	Num	4		CBC-HEMOGLOBIN G/L
9	H63_2_NA	Num	4		HEMOGLOBIN NOT AVAILABLE
10	H63_3	Num	4		CBC-HEMATOCRIT %
11	H63_3_NA	Num	4		HEMATOCRIT NOT AVAILABLE
12	H63_4	Num	4		CBC-LYMPHOCYTES %
13	H63_4_NA	Num	4		LYMPHOCYTES NOT AVAILABLE
14	H63_5	Num	4		CBC-NEUTROPHILS%
15	H63_5_NA	Num	4		NEUTROPHILS NOT AVAILABLE
16	H63_6	Num	4		CBC-PLATELET COUNT 10**3/MM**3(=10**9/L)
17	H63_6_NA	Num	4		PLATELET COUNT NOT AVAILABLE
18	Serum_na	Num	4		NO SERUM CHEMISTRY
19	H63_7U	Num	4		ALT (SGPT) U/L
20	H63_7K	Num	4		ALT (SGPT) uKAT/L
21	H63_7_NA	Num	4		ALT (SGPT) NOT AVAILABLE
22	H63_8U	Num	4		AST (SGOT) U/L
23	H63_8K	Num	4		AST (SGOT) uKAT/L
24	H63_8_NA	Num	4		AST (SGOT) NOT AVAILABLE
25	H63_9U	Num	4		ALKALINE PHOSPHATASE U/L
26	H63_9K	Num	4		ALKALINE PHOSPHATASE uKAT/L
27	H63_9_NA	Num	4		ALKALINE PHOSPHATASE NOT AVAILABLE
28	H63_10MG	Num	4		TOTAL BILIRUBIN MG/DL
29	H63_10MO	Num	4		TOTAL BILIRUBIN uMOL/L
30	H63_10NA	Num	4		TOTAL BILIRUBIN NOT AVAILABLE
31	H63_11MG	Num	4		DIRECT BILIRUBIN MG/DL
32	H63_11MO	Num	4		DIRECT BILIRUBIN uMOL/L
33	H63_11NA	Num	4		DIRECT BILIRUBIN NOT AVAILABLE
34	H63_12MG	Num	4		INDIRECT BILIRUBIN MG/DL
35	H63_12MO	Num	4		INDIRECT BILIRUBIN uMOL/L
36	H63_12NA	Num	4		INDIRECT BILIRUBIN NOT AVAILABLE

Num	Variable	Type	Len	Format	Label
37	H63_13MG	Num	4		SERUM CREATININE MG/DL
38	H63_13MO	Num	4		SERUM CREATININE uMOL/L
39	H63_13NA	Num	4		SERUM CREATININE NOT AVAILABLE
40	H63_14MG	Num	4		BUN MG/DL
41	H63_14MO	Num	4		BUN MMOL/L
42	H63_14NA	Num	4		BUN NOT AVAILABLE
43	H63_15	Num	4		ALBUMIN G/DL
44	H63_15NA	Num	4		ALBUMIN NOT AVAILABLE
45	H63_16	Num	4		GLOBULIN G/DL
46	H63_16NA	Num	4		GLOBULIN NOT AVAILABLE
47	H63_17PV	Num	4		PROTHROMBIN TIME-PATENT VALUE=SECONDS
48	H6317PNA	Num	4		PATIENT VALUE NOT AVAILABLE
49	H63_17CV	Num	4		PROTHROMBIN TIME-PATENT CONTROL=SECONDS
50	H6317CNA	Num	4		CONTROL VALUE NOT AVAILABLE
51	H63_17IN	Num	4		INR-RATIO VALUE
52	H6317INA	Num	4		INR NOT AVAILABLE
53	H63_18MG	Num	4		CHOLESTEROL MG/DL
54	H63_18MO	Num	4		CHOLESTEROL MMOL/L
55	H63_18NA	Num	4		CHOLESTEROL NOT AVAILABLE
56	H63HIVNA	Num	4		HIV DATA NOT AVAILABLE
57	nohiv	Num	4		SUBJECT NOT HIV POSITIVE
58	H63_19P	Num	4		CD4 VALUES %
59	H63_19L	Num	4		CD4 VALUES 10**6/L
60	H63_20P	Num	4		CD8 VALUES %
61	H63_20L	Num	4		CD8 VALUES 10**6/L
62	H63IRONA	Num	4		NO IRON RESULTS AVAILABLE W/I PAST 12 MO
63	H63_21DL	Num	4		SERUM IRON uG/DL
64	H63_21MO	Num	4		SERUM IRON uMOL/L
65	H63_21NA	Num	4		SERUM IRON NOT AVAILABLE
66	H63_22DL	Num	4		TOTAL IRON-BINDING CAPACITY uG/DL
67	H63_22MO	Num	4		TOTAL IRON-BINDING CAPACITY uMOL/L
68	H63_22NA	Num	4		TOTAL IRON-BINDING CAPACITY NOT AVAIL.
69	H63_23NG	Num	4		SERUM FERRITIN NG/ML
70	H63_23GL	Num	4		SERUM FERRITIN uG/L
71	H63_23NA	Num	4		SERUM FERRITIN NOT AVAILABLE
72	H63INHNA	Num	4		NO INHIBITOR RESULTS AVAIL. PAST 12 MO
73	H63_24	Num	4		POSITIVE INHIBITOR DETECTED
74	H63_24A	Num	4		POSITIVE INHIBITOR TITER-BETHESDA UNITS
75	H63_TNM	Num	4		TITER NOT AVAILABLE

Num	Variable	Type	Len	Format	Label
76	H63_25	Num	4		HAS PATIENT HAD A RUQ ULTRASOUND,CAT OR
77	H63_26	Num	4		WHAT TYPE OF TEST
78	H63_27A	Num	4		LIVER SIZE
79	H63_27B	Num	4		LIVER OR PARENCHYMA ECHOGENECITY
80	H63_27C	Num	4		LIVER MASS
81	H63_27CD	Num	4		LIVER MASS SIZE (CM)
82	H63_27D	Num	4		SPLEEN SIZE
83	H63_27E	Num	4		SPLEEN ABNORMALITY
84	H63_27F	Num	4		ASCITES
85	H63_27G	Num	4		PORTAL VEIN THROMBOSIS
86	H63_27H	Num	4		CIRRHOSIS
87	H63VISIT	Num	4		VISIT NUMBER (PHASE + 1)
88	FORM	Char	3		FORM NUMBER
89	VISIT_DT	Num	4	8.	VISIT DATE (SAS DATE): Converted to days since reference date
90	VISIT_DF	Num	4		VISIT DATE: IMPUTE FLAG
91	CBC_DT	Num	4	8.	DATE OF MOST RECENT CBC: SAS DATE: Converted to days since reference date
92	CBC_DF	Num	4		DATE OF MOST RECENT CBC: IMPUTE FLAG
93	SC_DT	Num	4	8.	DATE OF MOST RECENT SERUM CHEM:SAS DATE: Converted to days since reference date
94	SC_DF	Num	4		DATE OF MOST RECENT SERUM CHEM:IMPUTE FL
95	PT_DT	Num	4	8.	MOST RECENT PROTHROMBIN TIME:SAS DATE: Converted to days since reference date
96	PT_DF	Num	4		MOST RECENT PROTHROMBIN TIME:IMPUTE DATE
97	CH_DT	Num	4	8.	MOST RECENT CHOLESTEROL: SAS DATE: Converted to days since reference date
98	CH_DF	Num	4		MOST RECENT CHOLESTEROL: IMPUTE FLAG
99	HIV_DT	Num	4	8.	MOST RECENT HIV/AIDS: SAS DATE: Converted to days since reference date
100	HIV_DF	Num	4		MOST RECENT HIV/AIDS: IMPUTE FLAG
101	IRL_DT	Num	4	8.	DATE MOST RECENT IRON LEVEL:SAS DATE: Converted to days since reference date
102	IRL_DF	Num	4		DATE MOST RECENT IRON LEVEL:IMPUTE FLAG
103	IL_DT	Num	4	8.	INHIBITOR LEVEL DATE: SAS DATE: Converted to days since reference date
104	IL_DF	Num	4		INHIBITOR LEVEL DATE: IMPUTE FLAG
105	US_DT	Num	4	8.	MOST RECENT TEST ULTRASOUND:SAS DATE: Converted to days since reference date
106	US_DF	Num	4		MOST RECENT TEST ULTRASOUND: IMPUTE FLAG
107	H63_27CC	Num	4		SPECIFY OTHER LIVER MASS code ?
108	H63_27EC	Num	4		SPECIFY SPLEEN ABNORMALITY code ?
109	SUBJ_ID	Char	8		MHCS SUBJECT IDENTIFIER

Data Set Name: f66.sas7bdat

Num	Variable	Type	Len	Format	Label
1	PRODHX_V	Num	4		FLAG TO INDICATE PRODUCT HIST. VERIFIED
2	FORM	Num	4		Form Number
3	H66VISIT	Num	4		VISIT NUMBER
4	H66_A1	Num	4		RELATIVE HAD HEMOPHILIA OR von WILLEBRAN
5	H66_A1A	Num	4		RELATIVE WITH HEMOPHILIA OR vW HAD AN IN
6	H66_A2	Num	4		ANY BROTHERS WITH HEMOPHILIA
7	H66_A2A	Num	4		# BROTHERS WITH HEMOPHILIA: TOP-CODED AT 3
8	H66_A3	Num	4		SISTERS/BROTHERS W/ von WILLEBRAND'S DIS
9	H66_A3A	Num	4		# SISTERS/BROTHERS W/ von WILLEBRAND'S DISEASE: TOP-CODED AT 3
10	H66_B4	Num	4		RECEIVED PLASMA OR CRYOPRECIPITATE
11	H66_B4AA	Num	4		AGE (YRS) FIRST RECEIVED PLASMA OR CRYOP
12	H66_B4AM	Num	4		AGE (MTHS) FIRST RECEIVED PLASMA OR CRYO
13	H66_B4BA	Num	4		AGE (YRS) LAST RECEIVED PLASMA OR CRYOP
14	H66_B4BM	Num	4		AGE (MTHS) LAST RECEIVED PLASMA OR CRYO
15	H66_B5	Num	4		RECEIVED A TRANSFUSION OF WHOLE OR RED C
16	H66_B5AA	Num	4		AGE (YRS) RECVD A TRANSFUSION OF WHOLE/R
17	H66_B5AM	Num	4		AGE (MTHS) RECVD A TRANSFUSION OF WHOLE/
18	H66_B6	Num	4		RECEIVED A TRANSFUSION OF PLATELETS
19	H66_B6AA	Num	4		AGE (YRS) RECVD A TRANSFUSION OF PLATELE
20	H66_B6AM	Num	4		AGE (MTHS) RECVD A TRANSFUSION OF PLATEL
21	H66_B7	Num	4		RECEIVED A NON-HEAT-TREATED FACTOR
22	H66_B7AA	Num	4		AGE (YRS) RECVD A NON-HEAT-TREATED FACTO
23	H66_B7AM	Num	4		AGE (MTHS) RECVD A NON-HEAT-TREATED FACT
24	H66_B8	Num	4		RCVD AT LEAST 50,000 UNITS OF FACTOR CON
25	H66_B8A	Num	4		AGE 1ST RCVD AT LEAST 50,000 UNITS OF FA
26	H66_B8B	Num	4		AGE 2ND RCVD AT LEAST 50,000 UNITS OF FA
27	H66_B8C	Num	4		AGE 3RD RCVD AT LEAST 50,000 UNITS OF FA
28	H66_B9	Num	4		<6 YEARS OLD, USE FACTOR CONCENTRATE
29	H66_B9A	Num	4		<6 YEARS OLD, AVERAGE USE OF FACTOR CONC
30	H66_B10	Num	4		<6 YEARS OLD, USE PLASMA/CRYOPRECIPIATE
31	H66_B10A	Num	4		<6 YEARS OLD, AVERAGE USE OF PLASMA/CRYO
32	H66_B11	Num	4		6-12 YEARS OLD, USE FACTOR CONCENTRATE
33	H66_B11A	Num	4		6-12 YEARS OLD, AVERAGE USE OF FACTOR CO
34	H66_B12	Num	4		6-12 YEARS OLD, USE PLASMA/CRYOPRECIPIAT
35	H66_B12A	Num	4		6-12 YEARS OLD, AVERAGE USE OF PLASMA/CR
36	H66_B13	Num	4		13-20 YEARS OLD, USE FACTOR CONCENTRATE

Num	Variable	Type	Len	Format	Label
37	H66_B13A	Num	4		13-20 YEARS OLD, AVERAGE USE OF FACTOR C
38	H66_B14	Num	4		13-20 YEARS OLD, USE PLASMA/CRYOPRECIPIA
39	H66_B14A	Num	4		13-20 YEARS OLD, AVERAGE USE OF PLASMA/C
40	H66_B15	Num	4		21-30 YEARS OLD, USE FACTOR CONCENTRATE
41	H66_B15A	Num	4		21-30 YEARS OLD, AVERAGE USE OF FACTOR C
42	H66_B16	Num	4		21-30 YEARS OLD, USE PLASMA/CRYOPRECIPIA
43	H66_B16A	Num	4		21-30 YEARS OLD, AVERAGE USE OF PLASMA/C
44	H66_B17	Num	4		31-40 YEARS OLD, USE FACTOR CONCENTRATE
45	H66_B17A	Num	4		31-40 YEARS OLD, AVERAGE USE OF FACTOR C
46	H66_B18	Num	4		31-40 YEARS OLD, USE PLASMA/CRYOPRECIPIA
47	H66_B18A	Num	4		31-40 YEARS OLD, AVERAGE USE OF PLASMA/C
48	H66_B19	Num	4		41-50 YEARS OLD, USE FACTOR CONCENTRATE
49	H66_B19A	Num	4		41-50 YEARS OLD, AVERAGE USE OF FACTOR C
50	H66_B20	Num	4		41-50 YEARS OLD, USE PLASMA/CRYOPRECIPIA
51	H66_B20A	Num	4		41-50 YEARS OLD, AVERAGE USE OF PLASMA/C
52	H66_B21	Num	4		51-60 YEARS OLD, USE FACTOR CONCENTRATE
53	H66_B21A	Num	4		51-60 YEARS OLD, AVERAGE USE OF FACTOR C
54	H66_B22	Num	4		51-60 YEARS OLD, USE PLASMA/CRYOPRECIPIA
55	H66_B22A	Num	4		51-60 YEARS OLD, AVERAGE USE OF PLASMA/C
56	H66_B23	Num	4		>=60 YEARS OLD, USE FACTOR CONCENTRATE
57	H66_B23A	Num	4		>=60 YEARS OLD, AVERAGE USE OF FACTOR CO
58	H66_B24	Num	4		>= YEARS OLD, USE PLASMA/CRYOPRECIPIATE
59	H66_B24A	Num	4		>= YEARS OLD, AVERAGE USE OF PLASMA/CRYO
60	H66_DT	Num	4	8.	DATE FORM COMPLETED (SAS DATE): Converted to days since reference date
61	H66_DF	Num	4		DATE FORM COMPLETED (IMPUTE FLAG)
62	SUBJ_ID	Char	8		MHCS SUBJECT IDENTIFIER

Data Set Name: f70.sas7bdat

Num	Variable	Type	Len	Format	Label
1	PRODHX_V	Num	4		FLAG TO INDICATE PRODUCT HIST. VERIFIED
2	FORM	Num	4		Form Number
3	H70VISIT	Num	4		VISIT NUMBER
4	H70_A1	Num	4		NOT HIV POSITIVE
5	H70_A1N	Num	4		HAVE YOU USED ANY HIV RELATED MEDS
6	H70_221	Num	4		HIV MEDS: ABACAVIR
7	H70221FM	Num	4		MONTH FIRST USED ABACAVIR
8	H70221FY	Num	4		YEAR FIRST USED ABACAVIR
9	H70221LM	Num	4		MONTH LAST USED ABACAVIR
10	H70221LY	Num	4		YEAR LAST USED ABACAVIR
11	H70221_1	Num	4		REASON STOPPED ABACAVIR-SIDE EFFECT
12	H70221_2	Num	4		REASON STOPPED ABACAVIR-WASN'T WORKING
13	H70221_3	Num	4		REASON STOPPED ABACAVIR-CHANGED TO NEW R
14	H70221_4	Num	4		REASON STOPPED ABACAVIR-PLANNED INTERRUPT
15	H70221_5	Num	4		REASON STOPPED ABACAVIR-NO INSURANCE
16	H70221_6	Num	4		REASON STOPPED ABACAVIR-OTHER REASON
17	H70221_S	Num	4		REASON STOPPED ABACAVIR-SPECIFY REASON
18	H70_222	Num	4		HIV MEDS: AMPRENAVIR
19	H70222FM	Num	4		MONTH FIRST USED AMPRENAVIR
20	H70222FY	Num	4		YEAR FIRST USED AMPRENAVIR
21	H70222LM	Num	4		MONTH LAST USED AMPRENAVIR
22	H70222LY	Num	4		YEAR LAST USED AMPRENAVIR
23	H70222_1	Num	4		REASON STOPPED AMPRENAVIR-SIDE EFFECT
24	H70222_2	Num	4		REASON STOPPED AMPRENAVIR-WASN'T WORKING
25	H70222_3	Num	4		REASON STOPPED AMPRENAVIR-CHANGED TO NEW
26	H70222_4	Num	4		REASON STOPPED AMPRENAVIR-PLANNED INTERRUPT
27	H70222_5	Num	4		REASON STOPPED AMPRENAVIR-NO INSURANCE
28	H70222_6	Num	4		REASON STOPPED AMPRENAVIR-OTHER REASON
29	H70222_S	Num	4		REASON STOPPED AMPRENAVIR-SPECIFY REASON
30	H70_223	Num	4		HIV MEDS: COMBIVIR
31	H70223FM	Num	4		MONTH FIRST USED COMBIVIR
32	H70223FY	Num	4		YEAR FIRST USED COMBIVIR
33	H70223LM	Num	4		MONTH LAST USED COMBIVIR
34	H70223LY	Num	4		YEAR LAST USED COMBIVIR
35	H70223_1	Num	4		REASON STOPPED COMBIVIR-SIDE EFFECT
36	H70223_2	Num	4		REASON STOPPED COMBIVIR-WASN'T WORKING

Num	Variable	Type	Len	Format	Label
37	H70223_3	Num	4		REASON STOPPED COMBIVIR-CHANGED TO NEW R
38	H70223_4	Num	4		REASON STOPPED COMBIVIR-PLANNED INTERRUPT
39	H70223_5	Num	4		REASON STOPPED COMBIVIR-NO INSURANCE
40	H70223_6	Num	4		REASON STOPPED COMBIVIR-OTHER REASON
41	H70223_S	Num	4		REASON STOPPED COMBIVIR-SPECIFY REASON
42	H70_224	Num	4		HIV MEDS: DELAVIRDINE
43	H70224FM	Num	4		MONTH FIRST USED DELAVIRDINE
44	H70224FY	Num	4		YEAR FIRST USED DELAVIRDINE
45	H70224LM	Num	4		MONTH LAST USED DELAVIRDINE
46	H70224LY	Num	4		YEAR LAST USED DELAVIRDINE
47	H70224_1	Num	4		REASON STOPPED DELAVIRDINE -SIDE EFFECT
48	H70224_2	Num	4		REASON STOPPED DELAVIRDINE -WASN'T WORKI
49	H70224_3	Num	4		REASON STOPPED DELAVIRDINE -CHANGED TO N
50	H70224_4	Num	4		REASON STOPPED DELAVIRDINE -PLANNED INTE
51	H70224_5	Num	4		REASON STOPPED DELAVIRDINE -NO INSURANCE
52	H70224_6	Num	4		REASON STOPPED DELAVIRDINE -OTHER REASON
53	H70224_S	Num	4		REASON STOPPED DELAVIRDINE -SPECIFY REAS
54	H70_225	Num	4		HIV MEDS: DIDANOSINE
55	H70225FM	Num	4		MONTH FIRST USED DIDANOSINE
56	H70225FY	Num	4		YEAR FIRST USED DIDANOSINE
57	H70225LM	Num	4		MONTH LAST USED DIDANOSINE
58	H70225LY	Num	4		YEAR LAST USED DIDANOSINE
59	H70225_1	Num	4		REASON STOPPED DIDANOSINE-SIDE EFFECT
60	H70225_2	Num	4		REASON STOPPED DIDANOSINE-WASN'T WORKING
61	H70225_3	Num	4		REASON STOPPED DIDANOSINE-CHANGED TO NEW
62	H70225_4	Num	4		REASON STOPPED DIDANOSINE-PLANNED INTERRU
63	H70225_5	Num	4		REASON STOPPED DIDANOSINE-NO INSURANCE
64	H70225_6	Num	4		REASON STOPPED DIDANOSINE-OTHER REASON
65	H70225_S	Num	4		REASON STOPPED DIDANOSINE-SPECIFY REASON
66	H70_226	Num	4		HIV MEDS: EFAVIRENZ
67	H70226FM	Num	4		MONTH FIRST USED EFAVIRENZ
68	H70226FY	Num	4		YEAR FIRST USED EFAVIRENA
69	H70226LM	Num	4		MONTH LAST USED EFAVIRENA
70	H70226LY	Num	4		YEAR LAST USED EFAVIRENA
71	H70226_1	Num	4		REASON STOPPED EFAVIRENA-SIDE EFFECT
72	H70226_2	Num	4		REASON STOPPED EFAVIRENA-WASN'T WORKING
73	H70226_3	Num	4		REASON STOPPED EFAVIRENA-CHANGED TO NEW
74	H70226_4	Num	4		REASON STOPPED EFAVIRENA-PLANNED INTERRU
75	H70226_5	Num	4		REASON STOPPED EFAVIRENA-NO INSURANCE

Num	Variable	Type	Len	Format	Label
76	H70226_6	Num	4		REASON STOPPED EFAVIRENA-OTHER REASON
77	H70226_S	Num	4		REASON STOPPED EFAVIRENA-SPECIFY REASON
78	H70_227	Num	4		HIV MEDS: HYDROXYUREA
79	H70227FM	Num	4		MONTH FIRST USED HYDROXYUREA
80	H70227FY	Num	4		YEAR FIRST USED HYDROXYUREA
81	H70227LM	Num	4		MONTH LAST USED HYDROXYUREA
82	H70227LY	Num	4		YEAR LAST USED HYDROXYUREA
83	H70227_1	Num	4		REASON STOPPED HYDROXYUREA -SIDE EFFECT
84	H70227_2	Num	4		REASON STOPPED HYDROXYUREA -WASN'T WORKI
85	H70227_3	Num	4		REASON STOPPED HYDROXYUREA -CHANGED TO N
86	H70227_4	Num	4		REASON STOPPED HYDROXYUREA -PLANNED INTE
87	H70227_5	Num	4		REASON STOPPED HYDROXYUREA -NO INSURANCE
88	H70227_6	Num	4		REASON STOPPED HYDROXYUREA -OTHER REASON
89	H70227_S	Num	4		REASON STOPPED HYDROXYUREA -SPECIFY REAS
90	H70_228	Num	4		HIV MEDS: INDINAVIR
91	H70228FM	Num	4		MONTH FIRST USED INDINAVIR
92	H70228FY	Num	4		YEAR FIRST USED INDINAVIR
93	H70228LM	Num	4		MONTH LAST USED INDINAVIR
94	H70228LY	Num	4		YEAR LAST USED INDINAVIR
95	H70228_1	Num	4		REASON STOPPED INDINAVIR-SIDE EFFECT
96	H70228_2	Num	4		REASON STOPPED INDINAVIR-WASN'T WORKING
97	H70228_3	Num	4		REASON STOPPED INDINAVIR-CHANGED TO NEW
98	H70228_4	Num	4		REASON STOPPED INDINAVIR-PLANNED INTERRU
99	H70228_5	Num	4		REASON STOPPED INDINAVIR-NO INSURANCE
100	H70228_6	Num	4		REASON STOPPED INDINAVIR-OTHER REASON
101	H70228_S	Num	4		REASON STOPPED INDINAVIR-SPECIFY REASON
102	H70_229	Num	4		HIV MEDS: LOPINAVIR/RITONAVIR
103	H70229FM	Num	4		MONTH FIRST USED LOPINAVIR/RITONAVIR
104	H70229FY	Num	4		YEAR FIRST USED LOPINAVIR/RITONAVIR
105	H70229LM	Num	4		MONTH LAST USED LOPINAVIR/RITONAVIR
106	H70229LY	Num	4		YEAR LAST USED LOPINAVIR/RITONAVIR
107	H70229_1	Num	4		REASON STOPPED LOPINAVIR/RITONAVIR-SIDE
108	H70229_2	Num	4		REASON STOPPED LOPINAVIR/RITONAVIR-WASN'
109	H70229_3	Num	4		RSN STPD LOPINAVIR/RITONAVIR-CGN TO NEW
110	H70229_4	Num	4		RSN STPD LOPINAVIR/RITONAVIR-PLANNED INT
111	H70229_5	Num	4		REASON STOPPED LOPINAVIR/RITONAVIR-NO IN
112	H70229_6	Num	4		REASON STOPPED LOPINAVIR/RITONAVIR-OTHER
113	H70229_S	Num	4		REASON STOPPED LOPINAVIR/RITONAVIR-SPECI
114	H70_230	Num	4		HIV MEDS: LAMIVUDINE

Num	Variable	Type	Len	Format	Label
115	H70230FM	Num	4		MONTH FIRST USED LAMIVUDINE
116	H70230FY	Num	4		YEAR FIRST USED LAMIVUDINE
117	H70230LM	Num	4		MONTH LAST USED LAMIVUDINE
118	H70230LY	Num	4		YEAR LAST USED LAMIVUDINE
119	H70230_1	Num	4		REASON STOPPED LAMIVUDINE-SIDE EFFECT
120	H70230_2	Num	4		REASON STOPPED LAMIVUDINE-WASN'T WORKING
121	H70230_3	Num	4		REASON STOPPED LAMIVUDINE-CHANGED TO NEW
122	H70230_4	Num	4		RSN STPD LAMIVUDINE-PLANNED INTERRUPTION
123	H70230_5	Num	4		REASON STOPPED LAMIVUDINE-NO INSURANCE
124	H70230_6	Num	4		REASON STOPPED LAMIVUDINE-OTHER REASON
125	H70230_S	Num	4		REASON STOPPED LAMIVUDINE-SPECIFY REASON
126	H70_231	Num	4		HIV MEDS: NELFINAVIR
127	H70231FM	Num	4		MONTH FIRST USED NELFINAVIR
128	H70231FY	Num	4		YEAR FIRST USED NELFINAVIR
129	H70231LM	Num	4		MONTH LAST USED NELFINAVIR
130	H70231LY	Num	4		YEAR LAST USED NELFINAVIR
131	H70231_1	Num	4		REASON STOPPED NELFINAVIR-SIDE EFFECT
132	H70231_2	Num	4		REASON STOPPED NELFINAVIR-WASN'T WORKING
133	H70231_3	Num	4		REASON STOPPED NELFINAVIR-CHANGED TO NEW
134	H70231_4	Num	4		REASON STOPPED NELFINAVIR-PLANNED INTERR
135	H70231_5	Num	4		REASON STOPPED NELFINAVIR-NO INSURANCE
136	H70231_6	Num	4		REASON STOPPED NELFINAVIR-OTHER REASON
137	H70231_S	Num	4		REASON STOPPED NELFINAVIR-SPECIFY REASON
138	H70_232	Num	4		HIV MEDS: NEVIRAPINE
139	H70232FM	Num	4		MONTH FIRST USED NEVIRAPINE
140	H70232FY	Num	4		YEAR FIRST USED NEVIRAPINE
141	H70232LM	Num	4		MONTH LAST USED NEVIRAPINE
142	H70232LY	Num	4		YEAR LAST USED NEVIRAPINE
143	H70232_1	Num	4		REASON STOPPED NEVIRAPINE-SIDE EFFECT
144	H70232_2	Num	4		REASON STOPPED NEVIRAPINE-WASN'T WORKING
145	H70232_3	Num	4		REASON STOPPED NEVIRAPINE-CHANGED TO NEW
146	H70232_4	Num	4		REASON STOPPED NEVIRAPINE-PLANNED INTERR
147	H70232_5	Num	4		REASON STOPPED NEVIRAPINE-NO INSURANCE
148	H70232_6	Num	4		REASON STOPPED NEVIRAPINE-OTHER REASON
149	H70232_S	Num	4		REASON STOPPED NEVIRAPINE-SPECIFY REASON
150	H70_233	Num	4		HIV MEDS: RITONAVIR
151	H70233FM	Num	4		MONTH FIRST USED RITONAVIR
152	H70233FY	Num	4		YEAR FIRST USED RITONAVIR
153	H70233LM	Num	4		MONTH LAST USED RITONAVIR

Num	Variable	Type	Len	Format	Label
154	H70233LY	Num	4		YEAR LAST USED RITONAVIR
155	H70233_1	Num	4		REASON STOPPED RITONAVIR-SIDE EFFECT
156	H70233_2	Num	4		REASON STOPPED RITONAVIR-WASN'T WORKING
157	H70233_3	Num	4		REASON STOPPED RITONAVIR-CHANGED TO NEW
158	H70233_4	Num	4		REASON STOPPED RITONAVIR-PLANNED INTERRU
159	H70233_5	Num	4		REASON STOPPED RITONAVIR-NO INSURANCE
160	H70233_6	Num	4		REASON STOPPED RITONAVIR-OTHER REASON
161	H70233_S	Num	4		REASON STOPPED RITONAVIR-SPECIFY REASON
162	H70_234	Num	4		HIV MEDS: SAQUINAVIR
163	H70234FM	Num	4		MONTH FIRST USED SAQUINAVIR
164	H70234FY	Num	4		YEAR FIRST USED SAQUINAVIR
165	H70234LM	Num	4		MONTH LAST USED SAQUINAVIR
166	H70234LY	Num	4		YEAR LAST USED SAQUINAVIR
167	H70234_1	Num	4		REASON STOPPED SAQUINAVIR-SIDE EFFECT
168	H70234_2	Num	4		REASON STOPPED SAQUINAVIR-WASN'T WORKING
169	H70234_3	Num	4		REASON STOPPED SAQUINAVIR-CHANGED TO NEW
170	H70234_4	Num	4		REASON STOPPED SAQUINAVIR-PLANNED INTERRU
171	H70234_5	Num	4		REASON STOPPED SAQUINAVIR-NO INSURANCE
172	H70234_6	Num	4		REASON STOPPED SAQUINAVIR-OTHER REASON
173	H70234_S	Num	4		REASON STOPPED SAQUINAVIR-SPECIFY REASON
174	H70_235	Num	4		HIV MEDS: STAVUDINE
175	H70235FM	Num	4		MONTH FIRST USED STAVUDINE
176	H70235FY	Num	4		YEAR FIRST USED STAVUDINE
177	H70235LM	Num	4		MONTH LAST USED STAVUDINE
178	H70235LY	Num	4		YEAR LAST USED STAVUDINE
179	H70235_1	Num	4		REASON STOPPED STAVUDINE -SIDE EFFECT
180	H70235_2	Num	4		REASON STOPPED STAVUDINE -WASN'T WORKING
181	H70235_3	Num	4		REASON STOPPED STAVUDINE -CHANGED TO NEW
182	H70235_4	Num	4		REASON STOPPED STAVUDINE -PLANNED INTERRU
183	H70235_5	Num	4		REASON STOPPED STAVUDINE -NO INSURANCE
184	H70235_6	Num	4		REASON STOPPED STAVUDINE -OTHER REASON
185	H70235_S	Num	4		REASON STOPPED STAVUDINE -SPECIFY REASON
186	H70_109	Num	4		HIV MEDS: TENOFOVIR
187	H70109FM	Num	4		MONTH FIRST USED TENOFOVIR
188	H70109FY	Num	4		YEAR FIRST USED TENOFOVIR
189	H70109LM	Num	4		MONTH LAST USED TENOFOVIR
190	H70109LY	Num	4		YEAR LAST USED TENOFOVIR
191	H70109_1	Num	4		REASON STOPPED TENOFOVIR -SIDE EFFECT
192	H70109_2	Num	4		REASON STOPPED TENOFOVIR -WASN'T WORKING

Num	Variable	Type	Len	Format	Label
193	H70109_3	Num	4		REASON STOPPED TENOFOVIR -CHANGED TO NEW
194	H70109_4	Num	4		REASON STOPPED TENOFOVIR -PLANNED INTERR
195	H70109_5	Num	4		REASON STOPPED TENOFOVIR -NO INSURANCE
196	H70109_6	Num	4		REASON STOPPED TENOFOVIR -OTHER REASON
197	H70109_S	Num	4		REASON STOPPED TENOFOVIR -SPECIFY REASON
198	H70_236	Num	4		HIV MEDS: TRIZAVIR
199	H70236FM	Num	4		MONTH FIRST USED TRIZAVIR
200	H70236FY	Num	4		YEAR FIRST USED TRIZAVIR
201	H70236LM	Num	4		MONTH LAST USED TRIZAVIR
202	H70236LY	Num	4		YEAR LAST USED TRIZAVIR
203	H70236_1	Num	4		REASON STOPPED TRIZAVIR-SIDE EFFECT
204	H70236_2	Num	4		REASON STOPPED TRIZAVIR-WASN'T WORKING
205	H70236_3	Num	4		REASON STOPPED TRIZAVIR-CHANGED TO NEW R
206	H70236_4	Num	4		REASON STOPPED TRIZAVIR-PLANNED INTERRUPT
207	H70236_5	Num	4		REASON STOPPED TRIZAVIR-NO INSURANCE
208	H70236_6	Num	4		REASON STOPPED TRIZAVIR-OTHER REASON
209	H70236_S	Num	4		REASON STOPPED TRIZAVIR-SPECIFY REASON
210	H70_237	Num	4		HIV MEDS: ZALCITABINE
211	H70237FM	Num	4		MONTH FIRST USED ZALCITABINE
212	H70237FY	Num	4		YEAR FIRST USED ZALCITABINE
213	H70237LM	Num	4		MONTH LAST USED ZALCITABINE
214	H70237LY	Num	4		YEAR LAST USED ZALCITABINE
215	H70237_1	Num	4		REASON STOPPED ZALCITABINE-SIDE EFFECT
216	H70237_2	Num	4		REASON STOPPED ZALCITABINE-WASN'T WORKIN
217	H70237_3	Num	4		REASON STOPPED ZALCITABINE-CHANGED TO NE
218	H70237_4	Num	4		REASON STOPPED ZALCITABINE-PLANNED INTER
219	H70237_5	Num	4		REASON STOPPED ZALCITABINE-NO INSURANCE
220	H70237_6	Num	4		REASON STOPPED ZALCITABINE-OTHER REASON
221	H70237_S	Num	4		REASON STOPPED ZALCITABINE-SPECIFY REASO
222	H70_238	Num	4		HIV MEDS: ZIDOVUDINE
223	H70238FM	Num	4		MONTH FIRST USED ZIDOVUDINE
224	H70238FY	Num	4		YEAR FIRST USED ZIDOVUDINE
225	H70238LM	Num	4		MONTH LAST USED ZIDOVUDINE
226	H70238LY	Num	4		YEAR LAST USED ZIDOVUDINE
227	H70238_1	Num	4		REASON STOPPED ZIDOVUDINE-SIDE EFFECT
228	H70238_2	Num	4		REASON STOPPED ZIDOVUDINE-WASN'T WORKING
229	H70238_3	Num	4		REASON STOPPED ZIDOVUDINE-CHANGED TO NEW
230	H70238_4	Num	4		REASON STOPPED ZIDOVUDINE-PLANNED INTERR
231	H70238_5	Num	4		REASON STOPPED ZIDOVUDINE-NO INSURANCE

Num	Variable	Type	Len	Format	Label
232	H70238_6	Num	4		REASON STOPPED ZIDOVUDINE-OTHER REASON
233	H70238_S	Num	4		REASON STOPPED ZIDOVUDINE-SPECIFY REASON
234	H70_O1	Num	4		HIV MEDS: OTHER SPECIFY 1
235	H70_O1FM	Num	4		MONTH FIRST USED OTHER SPECIFY 1
236	H70_O1FY	Num	4		YEAR FIRST USED OTHER SPECIFY 1
237	H70_O1LM	Num	4		MONTH LAST USED OTHER SPECIFY 1
238	H70_O1LY	Num	4		YEAR LAST USED OTHER SPECIFY 1
239	H70_O1_1	Num	4		REASON STOPPED OTHER SPECIFY 1 SIDE EFFE
240	H70_O1_2	Num	4		REASON STOPPED OTHER SPECIFY 1-WASN'T WO
241	H70_O1_3	Num	4		REASON STOPPED OTHER SPECIFY 1-NEW REGIM
242	H70_O1_4	Num	4		REASON STOPPED OTHER SPECIFY 1-PLANNED I
243	H70_O1_5	Num	4		REASON STOPPED OTHER SPECIFY 1-NO INSURA
244	H70_O1_6	Num	4		REASON STOPPED OTHER SPECIFY 1-OTHER REA
245	H70_O1_S	Num	4		REASON STOPPED OTHER SPECIFY 1-SPECIFY R
246	H70_O2	Num	4		HIV MEDS: OTHER SPECIFY 2
247	H70_O2FM	Num	4		MONTH FIRST USED OTHER SPECIFY 2
248	H70_O2FY	Num	4		YEAR FIRST USED OTHER SPECIFY 2
249	H70_O2LM	Num	4		MONTH LAST USED OTHER SPECIFY 2
250	H70_O2LY	Num	4		YEAR LAST USED OTHER SPECIFY 2
251	H70_O2_1	Num	4		REASON STOPPED OTHER SPECIFY 2 SIDE EFFE
252	H70_O2_2	Num	4		REASON STOPPED OTHER SPECIFY 2-WASN'T WO
253	H70_O2_3	Num	4		REASON STOPPED OTHER SPECIFY 2-NEW REGIM
254	H70_O2_4	Num	4		REASON STOPPED OTHER SPECIFY 2-PLANNED I
255	H70_O2_5	Num	4		REASON STOPPED OTHER SPECIFY 2-NO INSURA
256	H70_O2_6	Num	4		REASON STOPPED OTHER SPECIFY 2-OTHER REA
257	H70_O2_S	Num	4		REASON STOPPED OTHER SPECIFY 2-SPECIFY R
258	H70_A2	Num	4		DIDN'T USE ANY PROPHYLAXIS MEDICATIONS
259	H70A2_1	Num	4		PROPHYLAXIS MEDS: ACYCLOVIR
260	H70A2_2	Num	4		PROPHYLAXIS MEDS: AEROSOLIZED PENTAMIDIN
261	H70A2_3	Num	4		PROPHYLAXIS MEDS: ATOVAQUONE
262	H70A2_4	Num	4		PROPHYLAXIS MEDS: AZITHROMYCIN
263	H70A2_5	Num	4		PROPHYLAXIS MEDS: CLARITHROMYCIN
264	H70A2_6	Num	4		PROPHYLAXIS MEDS: DAPSONE
265	H70A2_7	Num	4		PROPHYLAXIS MEDS: FAMCICLOVIR
266	H70A2_8	Num	4		PROPHYLAXIS MEDS: FLUCONAZOLE
267	H70A2_9	Num	4		PROPHYLAXIS MEDS: GANCICLOVIR
268	H70A2_10	Num	4		PROPHYLAXIS MEDS: RIFABUTIN
269	H70A2_11	Num	4		PROPHYLAXIS MEDS: TRIMETHOPRIM
270	H70A2_12	Num	4		PROPHYLAXIS MEDS: VALACYCLOVIR

Num	Variable	Type	Len	Format	Label
271	H70A2_O1	Num	4		PROPHYLAXIS MEDS: OTHER HIV DRUG-1
272	H70A2_O2	Num	4		PROPHYLAXIS MEDS: OTHER HIV DRUG-2
273	H70A2_O3	Num	4		PROPHYLAXIS MEDS: OTHER HIV DRUG-3
274	H70A2_O4	Num	4		PROPHYLAXIS MEDS: OTHER HIV DRUG-4
275	H70A2_O5	Num	4		PROPHYLAXIS MEDS: OTHER HIV DRUG-5
276	H70_A3	Num	4		DIDN'T USE ANY HCV MEDS
277	H70A3_1	Num	4		HCV MEDICATIONS: INTRON
278	H70A3_2	Num	4		HCV MEDICATIONS: ROFERON
279	H70A3_3	Num	4		HCV MEDICATIONS: INFERGEN
280	H70A3_4	Num	4		HCV MEDICATIONS: STANDARD INTERFERON
281	H70A3_5	Num	4		HCV MEDICATIONS: REBETOL
282	H70A3_6	Num	4		HCV MEDICATIONS: VIRAZOLE
283	H70A3_7	Num	4		HCV MEDICATIONS: REBETRON
284	H70A3_8	Num	4		HCV MEDICATIONS: PEG-INTRON
285	H70A3_9	Num	4		HCV MEDICATIONS: PEGASYS
286	H70_A4	Num	4		DIDN'T USE ANY OTHER PRESCRIPTION MED
287	H70A4_1	Num	4		OTHER PRESCRIPTION MEDS: VIOXX
288	H70A4_2	Num	4		OTHER PRESCRIPTION MEDS: CELEBREX
289	H70A4_3	Num	4		OTHER PRESCRIPTION MEDS: VICODIN
290	H70A4_4	Num	4		OTHER PRESCRIPTION MEDS: TYLENOL #3
291	H70A4_5	Num	4		OTHER PRESCRIPTION MEDS: PERCOCET
292	H70A4_6	Num	4		OTHER PRESCRIPTION MEDS: OXYIR
293	H70A4_7	Num	4		OTHER PRESCRIPTION MEDS: LASIX
294	H70A4_8	Num	4		OTHER PRESCRIPTION MEDS: PRILOSEC
295	H70A4_9	Num	4		OTHER PRESCRIPTION MEDS: ZOLOFT
296	H70A4_10	Num	4		OTHER PRESCRIPTION MEDS: NEURONTIN
297	H70A4_O1	Num	4		OTHER PRESCRIPTION MEDS: SPECIFY 1
298	H70A4_O2	Num	4		OTHER PRESCRIPTION MEDS: SPECIFY 2
299	H70A4_O3	Num	4		OTHER PRESCRIPTION MEDS: SPECIFY 3
300	H70A4_O4	Num	4		OTHER PRESCRIPTION MEDS: SPECIFY 4
301	H70A4_O5	Num	4		OTHER PRESCRIPTION MEDS: SPECIFY 5
302	H70A4_O6	Num	4		OTHER PRESCRIPTION MEDS: SPECIFY 6
303	H70A4_O7	Num	4		OTHER PRESCRIPTION MEDS: SPECIFY 7
304	H70A4_O8	Num	4		OTHER PRESCRIPTION MEDS: SPECIFY 8
305	H70A4_O9	Num	4		OTHER PRESCRIPTION MEDS: SPECIFY 9
306	H70A4O10	Num	4		OTHER PRESCRIPTION MEDS: SPECIFY 10
307	H70_A5	Num	4		DIDN'T USE HERBS/DRUGS
308	H70A5_1	Num	4		HERBAL SUPPLEMENTS: ALCHEMILLA
309	H70A5_2	Num	4		HERBAL SUPPLEMENTS: CHAPARRAL

Num	Variable	Type	Len	Format	Label
310	H70A5_3	Num	4		HERBAL SUPPLEMENTS: CHONDROITIN
311	H70A5_4	Num	4		HERBAL SUPPLEMENTS: EVENING PRIMROSE
312	H70A5_5	Num	4		HERBAL SUPPLEMENTS: EPHEDRA
313	H70A5_6	Num	4		HERBAL SUPPLEMENTS: FEWERFEW
314	H70A5_7	Num	4		HERBAL SUPPLEMENTS: FISH OIL
315	H70A5_8	Num	4		HERBAL SUPPLEMENTS: GENTIAN
316	H70A5_9	Num	4		HERBAL SUPPLEMENTS: GERMANDER
317	H70A5_10	Num	4		HERBAL SUPPLEMENTS: GINKGO
318	H70A5_11	Num	4		HERBAL SUPPLEMENTS: GINSENG
319	H70A5_12	Num	4		HERBAL SUPPLEMENTS: GINGER
320	H70A5_13	Num	4		HERBAL SUPPLEMENTS: GLUCOSAMINE
321	H70A5_14	Num	4		HERBAL SUPPLEMENTS: JU BU HUAN
322	H70A5_15	Num	4		HERBAL SUPPLEMENTS: MILK THISTLE
323	H70A5_16	Num	4		HERBAL SUPPLEMENTS: SENNA
324	H70A5_17	Num	4		HERBAL SUPPLEMENTS: SHARK CARTILAGE
325	H70A5_18	Num	4		HERBAL SUPPLEMENTS: SCURELLARIA
326	H70A5_19	Num	4		HERBAL SUPPLEMENTS: ST. JOHN;S WART
327	H70A5_H1	Num	4		HERBAL SUPPLEMENTS: SPECIFY 1
328	H70A5_H2	Num	4		HERBAL SUPPLEMENTS: SPECIFY 2
329	H70A5_H3	Num	4		HERBAL SUPPLEMENTS: SPECIFY 3
330	H70A5_H4	Num	4		HERBAL SUPPLEMENTS: SPECIFY 4
331	H70A5_H5	Num	4		HERBAL SUPPLEMENTS: SPECIFY 5
332	H70A5_H6	Num	4		HERBAL SUPPLEMENTS: SPECIFY 6
333	H70A5_H7	Num	4		HERBAL SUPPLEMENTS: SPECIFY 7
334	H70A5_H8	Num	4		HERBAL SUPPLEMENTS: SPECIFY 8
335	H70A5_H9	Num	4		HERBAL SUPPLEMENTS: SPECIFY 9
336	H70A5H10	Num	4		HERBAL SUPPLEMENTS: SPECIFY 10
337	H70A5_O1	Num	4		OTHER DRUGS: SPECIFY 1
338	H70A5_O2	Num	4		OTHER DRUGS: SPECIFY 2
339	H70A5_O3	Num	4		OTHER DRUGS: SPECIFY 3
340	H70A5_O4	Num	4		OTHER DRUGS: SPECIFY 4
341	H70A5_O5	Num	4		OTHER DRUGS: SPECIFY 5
342	H70A5_O6	Num	4		OTHER DRUGS: SPECIFY 6
343	H70A5_O7	Num	4		OTHER DRUGS: SPECIFY 7
344	H70A5_O8	Num	4		OTHER DRUGS: SPECIFY 8
345	H70A5_O9	Num	4		OTHER DRUGS: SPECIFY 9
346	H70A5O10	Num	4		OTHER DRUGS: SPECIFY 10
347	H70_B1	Num	4		REDUCE AMOUNT OF TIME SPENT ON WORK?
348	H70_B2	Num	4		ACCOMPLISH LESS THAN YOU WOULD LIKE?

Num	Variable	Type	Len	Format	Label
349	H70_B3	Num	4		LIMITED IN THE KIND OF WORK/ACTIVITIES?
350	H70_B4	Num	4		HAVE DIFFICULTY PERFORMING WORK/ACTIVITI
351	H70_B5	Num	4		PAIN IN YOUR JOINTS PAST 4 WEEKS
352	H70_B6	Num	4		PAIN OF OTHER TYPES PAST 4 WEEKS
353	H70_B7	Num	4		HOW MUCH DID PAIN INTERFERE WITH NORMAL
354	H70_C	Num	4		DIDN'T USE ACETAMINOPHEN SINCE LAST VISI
355	H70_C1	Num	4		PAST MONTH: HOW OFTEN TAKEN ACETAMINOPHE
356	H70_C2	Num	4		PAST 3 MONTHS: # ACETAMINOPHEN A WEEK
357	H70_C3	Num	4		PAST 3 MONTHS: MAX # ACETAMINOPHEN A WEE
358	H70_C4	Num	4		3-12 MONTHS: # ACETAMINOPHEN A WEEK
359	H70_C5	Num	4		3-12 MONTHS: MAX # ACETAMINOPHEN A WEEK
360	H70C6_1	Num	4		PAST TWO WEEKS: COX-2 INHIBITOR TAKEN-NO
361	H70C6_2	Num	4		PAST TWO WEEKS: COX-2 INHIBITOR TAKEN-VI
362	H70C6_3	Num	4		PAST TWO WEEKS: COX-2 INHIBITOR TAKEN-CE
363	H70C6O_1	Num	4		PAST TWO WEEKS: COX-2 INHIBITOR TAKEN-SP
364	H70C6O_2	Num	4		PAST TWO WEEKS: COX-2 INHIBITOR TAKEN-SP
365	H70C6O_3	Num	4		PAST TWO WEEKS: COX-2 INHIBITOR TAKEN-SP
366	H70C6O_4	Num	4		PAST TWO WEEKS: COX-2 INHIBITOR TAKEN-SP
367	H70C6O_5	Num	4		PAST TWO WEEKS: COX-2 INHIBITOR TAKEN-SP
368	H70C6O_6	Num	4		PAST TWO WEEKS: COX-2 INHIBITOR TAKEN-SP
369	H70C6O_7	Num	4		PAST TWO WEEKS: COX-2 INHIBITOR TAKEN-SP
370	H70C6O_8	Num	4		PAST TWO WEEKS: COX-2 INHIBITOR TAKEN-SP
371	H70C6O_9	Num	4		PAST TWO WEEKS: COX-2 INHIBITOR TAKEN-SP
372	H70C6O10	Num	4		PAST TWO WEEKS: COX-2 INHIBITOR TAKEN-SP
373	H70_C6A	Num	4		FOR HOW MANY MONTHS USED COX-2 INHIBITOR
374	H70_C7	Num	4		PAST 2 WEEKS: TAKE OTHER NSAIDS
375	H70_C7A	Num	4		FOR HOW MANY MONTHS USED OTHER NSAIDS
376	H70_CNN	Num	4		DIDN'T USE NSAIDS SINCE LAST VISIT
377	H70_C8	Num	4		PAST 3 MONTHS: # NSAIDS A WEEK
378	H70_C9	Num	4		PAST 3 MONTHS: MAX # NSAIDS A WEEK
379	H70_C10	Num	4		3-12 MONTHS: # NSAIDS A WEEK
380	H70_C11	Num	4		3-12 MONTHS: MAX # NSAIDS A WEEK
381	H70_CNC	Num	4		DIDN'T USE NARCOTICS SINCE LAST VISIT
382	H70_C12	Num	4		PAST MONTH: HOW OFTEN TAKEN CODEINE/OTHE
383	H70_C13P	Num	4		PAST 3 MONTHS: # CODEINE/OTHER PILLS A W
384	H70_C13I	Num	4		PAST 3 MONTHS: # CODEINE/OTHER INJECTION
385	H70_C14P	Num	4		PAST 3 MONTHS: MAX # CODEINE/OTHER PILLS
386	H70_C14I	Num	4		PAST 3 MONTHS: MAX # CODEINE/OTHER INJEC
387	H70_C15P	Num	4		3-12 MONTHS: # CODEINE/OTHER PILLS A WEE

Num	Variable	Type	Len	Format	Label
388	H70_C15I	Num	4		3-12 MONTHS: # CODEINE/OTHER INJECTIONS
389	H70_C16P	Num	4		3-12 MONTHS: MAX # CODEINE/OTHER PILLS A
390	H70_C16I	Num	4		3-12 MONTHS: MAX # CODEINE/OTHER INJECTI
391	H70_D1	Num	4		PAST YEAR SMOKED CIGARETTES REGULARLY
392	H70_D2	Num	4		PAST YEAR HAD A DRINK CONTAINING ALCOHOL
393	H70_D3	Num	4		PAST 3 MONTH, # OF DRINKS PER WEEK
394	H70_D4	Num	4		PAST 3 MONTH, MAX # OF DRINKS PER DAY
395	H70_D5	Num	4		3-12 MONTHS: # OF DRINKS PER WEEK
396	H70_D6	Num	4		3-12 MONTHS: MAX # OF DRINKS PER DAY
397	H70_D7	Num	4		UNABLE TO STOP DRINKING
398	H70_D8	Num	4		FAILED TO DO SOMETHING YOU WERE EXPECTED
399	H70_D9	Num	4		NEEDED A DRINK FIRST THING IN THE MORNIN
400	H70_D10	Num	4		FELT GUILTY AFTER DRINKING
401	H70_D11	Num	4		UNABLE TO REMEMBER AFTER DRINKING
402	H70_D12	Num	4		YOU OR SOMEONE BEEN INJURED DUE TO DRINK
403	H70_D13	Num	4		RELATIVE CONCERNED ABOUT YOUR DRINKING
404	H70_E1	Num	4		PAST 2 WKS: ABDOMINAL BLOATING
405	H70_E2	Num	4		PAST 2 WKS: TIRED OR FATIGUED
406	H70_E3	Num	4		PAST 2 WKS: BODILY PAIN
407	H70_E4	Num	4		PAST 2 WKS: FELT SLEEPING DURING THE DAY
408	H70_E5	Num	4		PAST 2 WKS: ABDOMINAL PAIN
409	H70_E6	Num	4		PAST 2 WKS: SHORTNESS OF BREATH
410	H70_E7	Num	4		PAST 2 WKS: NOT ABLE TO EAT MUCH
411	H70_E8	Num	4		PAST 2 WKS: DECREASED STRENGTH
412	H70_E9	Num	4		PAST 2 WKS: TROUBLE LIFTING HEAVY OBJECT
413	H70_E10	Num	4		PAST 2 WKS: FELT ANXIOUS
414	H70_E11	Num	4		PAST 2 WKS: DECREASED LEVEL OF ENERGY
415	H70_E12	Num	4		PAST 2 WKS: FELT UNHAPPY
416	H70_E13	Num	4		PAST 2 WKS: FELT DROWSY
417	H70_E14	Num	4		PAST 2 WKS: LIMITATION OF YOUR DIET
418	H70_E15	Num	4		PAST 2 WKS: BEEN IRRITABLE
419	H70_E16	Num	4		PAST 2 WKS: DIFFICULTY SLEEPING
420	H70_E17	Num	4		PAST 2 WKS: ABDOMINAL DISCOMFORT
421	H70_E18	Num	4		PAST 2 WKS: WORRIED/IMPACT HEPATIC C VIR
422	H70_E19	Num	4		PAST 2 WKS: MOOD SWINGS
423	H70_E20	Num	4		PAST 2 WKS: UNABLE TO FALL ASLEEP AT NIG
424	H70_E21	Num	4		PAST 2 WKS: MUSCLE CRAMPS
425	H70_E22	Num	4		PAST 2 WKS: WORRIED ABOUT YOUR SYMPTOMS
426	H70_E23	Num	4		PAST 2 WKS: DRY MOUTH

Num	Variable	Type	Len	Format	Label
427	H70_E24	Num	4		PAST 2 WKS: FELT DEPRESSED
428	H70_E25	Num	4		PAST 2 WKS: WORRIED VIRUS INFECTION GETT
429	H70_E26	Num	4		PAST 2 WKS: PROBLEM CONCENTRATING
430	H70_E27	Num	4		PAST 2 WKS: TROUBLED BY ITCHING
431	H70_E28	Num	4		PAST 2 WKS: WORRIED ABOUT NOT FEELING BE
432	H70_E29	Num	4		PAST 2 WKS: CONCERNED AVAILABILITY OF LI
433	H70_DT	Num	4	8.	DATE FORM COMPLETED (SAS DATE): Converted to days since reference date
434	H70_DF	Num	4		DATE FORM COMPLETED (IMPUTE FLAG)
435	F70ABDOM	Num	4	6.2	SUMMARY QUALITY OF LIFE: ABDOMINAL
436	F70FATIG	Num	4	6.2	SUMMARY QUALITY OF LIFE: FATIGUE
437	F70SYSTM	Num	4	6.2	SUMMARY QUALITY OF LIFE: SYSTEM
438	F70ACTIV	Num	4	6.2	SUMMARY QUALITY OF LIFE: ACTIVITY
439	F70EMOTN	Num	4	6.2	SUMMARY QUALITY OF LIFE: EMOTION
440	F70WORRY	Num	4	6.2	SUMMARY QUALITY OF LIFE: WORRY
441	H70_E1R	Num	4		RECODED VALUE OF H70_E1 FOR QOL CALC.
442	H70_E5R	Num	4		RECODED VALUE OF H70_E5 FOR QOL CALC.
443	H70_E17R	Num	4		RECODED VALUE OF H70_E17 FOR QOL CALC.
444	H70_E2R	Num	4		RECODED VALUE OF H70_E2 FOR QOL CALC.
445	H70_E4R	Num	4		RECODED VALUE OF H70_E4 FOR QOL CALC.
446	H70_E8R	Num	4		RECODED VALUE OF H70_E8 FOR QOL CALC.
447	H70_E11R	Num	4		RECODED VALUE OF H70_E11 FOR QOL CALC.
448	H70_E13R	Num	4		RECODED VALUE OF H70_E13 FOR QOL CALC.
449	H70_E3R	Num	4		RECODED VALUE OF H70_E3 FOR QOL CALC.
450	H70_E6R	Num	4		RECODED VALUE OF H70_E6 FOR QOL CALC.
451	H70_E21R	Num	4		RECODED VALUE OF H70_E21 FOR QOL CALC.
452	H70_E23R	Num	4		RECODED VALUE OF H70_E23 FOR QOL CALC.
453	H70_E27R	Num	4		RECODED VALUE OF H70_E27 FOR QOL CALC.
454	H70_E7R	Num	4		RECODED VALUE OF H70_E7 FOR QOL CALC.
455	H70_E9R	Num	4		RECODED VALUE OF H70_E9 FOR QOL CALC.
456	H70_E14R	Num	4		RECODED VALUE OF H70_E14 FOR QOL CALC.
457	H70_E10R	Num	4		RECODED VALUE OF H70_E10 FOR QOL CALC.
458	H70_E12R	Num	4		RECODED VALUE OF H70_E12 FOR QOL CALC.
459	H70_E15R	Num	4		RECODED VALUE OF H70_E15 FOR QOL CALC.
460	H70_E16R	Num	4		RECODED VALUE OF H70_E16 FOR QOL CALC.
461	H70_E19R	Num	4		RECODED VALUE OF H70_E19 FOR QOL CALC.
462	H70_E20R	Num	4		RECODED VALUE OF H70_E20 FOR QOL CALC.
463	H70_E24R	Num	4		RECODED VALUE OF H70_E24 FOR QOL CALC.
464	H70_E26R	Num	4		RECODED VALUE OF H70_E26 FOR QOL CALC.
465	H70_E18R	Num	4		RECODED VALUE OF H70_E18 FOR QOL CALC.

Num	Variable	Type	Len	Format	Label
466	H70_E22R	Num	4		RECODED VALUE OF H70_E22 FOR QOL CALC.
467	H70_E25R	Num	4		RECODED VALUE OF H70_E25 FOR QOL CALC.
468	H70_E28R	Num	4		RECODED VALUE OF H70_E28 FOR QOL CALC.
469	H70_E29R	Num	4		RECODED VALUE OF H70_E29 FOR QOL CALC.
470	ILLEGAL_DRUGS	Num	8		Use of Marijuana, Speed, Heroin, MDMA, Phencyclidine, Anabolic Steroids, Glues/Solvents, or Cocaine
471	SUBJ_ID	Char	8		MHCS SUBJECT IDENTIFIER

Data Set Name: f71.sas7bdat

Num	Variable	Type	Len	Format	Informat	Label
1	ASCCODE	Num	4			Q15. ASCITES UNTREATED REASON SPEC. CODE
2	NEUROCD	Num	4			OTHER NEUROLOGICAL ABNORMALITIES CODE
3	VISITNUM	Num	4	1.		VISIT NUMBER
4	NoBM	Num	4	4.	4.	BASIC MEASUREMENTS NOT OBTAINED
5	feet	Num	4	2.	19.	Q1. FEET (HEIGHT)
6	inches	Num	4	3.	19.	Q1. INCHES (HEIGHT)
7	cms	Num	4	6.	19.	Q1. CENTIMETERS (HEIGHT)
8	pounds	Num	4	5.1	19.	Q2. WEIGHT IN POUNDS
9	kgs	Num	4	5.1	19.	Q2. WEIGHT IN KILOGRAMS
10	fahrenheit	Num	4	5.1		Q3. TEMPERATURE IN FAHRENHEIT
11	celsius	Num	4	5.1		Q3. TEMPERATURE IN CELSIUS
12	systolic	Num	4	6.	19.	Q4. BLOOD PRESSURE - SYSTOLIC
13	diastolic	Num	4	6.	19.	Q4. BLOOD PRESSURE - DIASTOLIC
14	blood	Num	4	1.	4.	Q5. URINALYSIS - BLOOD LEVEL
15	protein	Num	4	1.	4.	Q6. URINALYSIS - PROTEIN LEVEL
16	nitrite	Num	4	1.	4.	Q7. URINALYSIS - NITRITE LEVEL
17	a_acid	Num	4	1.	4.	Q8. URINALYSIS - ASCORBIC ACID LEVEL
18	glucose	Num	4	1.	4.	Q9. URINALYSIS - GLUCOSE LEVEL
19	ph	Num	4	1.	4.	Q10. URINALYSIS - pH LEVEL
20	hem_arth	Num	4	1.	4.	Q11. HEMOPHILIC ARTHROPATHY
21	HEMARTH1	Num	4	4.	4.	Q11. HAS JOINT REPLACEMENT
22	HEMARTH2	Num	4	4.	4.	Q11. JOINT AFFECTED NOW
23	HEMARTH3	Num	4	4.	4.	Q11. TWO OR MORE JOINTS
24	kar_perf	Num	4	1.	4.	Q12. KARNOFSKY PERFORMANCE
25	affected	Num	4	1.	4.	Q13. KAR PERF AFFECTED BY HEM ARTH
26	fatigue	Num	4	1.	4.	Q14. FATIGUE LEVEL
27	ascites	Num	4	1.	4.	Q15. ASCITES
28	hepatome	Num	4	1.	4.	Q16. HEPATOMEGALY
29	splenome	Num	4	1.	4.	Q17. SPLENOMEGALY
30	splnsize	Num	4	19.	19.	Q17. SPLEEN'S SIZE (IN CM.)
31	h_zoster	Num	4	1.	4.	Q18. HERPES ZOSTER (SHINGLES)
32	lym_none	Num	4	2.	4.	Q19. LYMPHADENOPATHY - NONE
33	lym_cerv	Num	4	1.	4.	Q19. LYMPHADENOPATHY - CERVICAL
34	cervsite	Num	4	2.	19.	Q19. CERVICAL LYMPH - # SITES
35	cervshot	Num	4	1.	4.	Q19. CERVICAL LYMPH - SHOTTY
36	lym_othe	Num	4	1.	4.	Q19. LYMPHADENOPATHY - OTHER

Num	Variable	Type	Len	Format	Informat	Label
37	lgstnode	Num	4	2.	19.	Q19a.DIAMETER OF LARGEST LYMPH NODE
38	nocond	Num	4	4.	4.	NOTHING CHECKED FOR Q.20
39	p_neurop	Num	4	1.	4.	Q20. PERIPHERAL NEUROPATHY
40	spider	Num	4	1.	4.	Q20. SPIDER ANGIOMATA
41	neuro_ab	Num	4	1.	4.	Q20. OTHER NEUROLOGICAL ABNORMAL
42	palmare	Num	4	1.	4.	Q20. PALMAR ERYTHEMA
43	wgt_loss	Num	4	1.	4.	Q20. UNEXPLAINED WEIGHT LOSS
44	edema	Num	4	1.	4.	Q20. LOWER EXTREMITY EDEMA
45	memory	Num	4	1.	4.	Q20. MEMORY OR CONCENTRATION PROBLEMS
46	depressn	Num	4	1.	4.	Q20. CHRONIC DEPRESSION
47	gynecom	Num	4	1.	4.	Q20. GYNECOMASTIA
48	arthralg	Num	4	1.	4.	Q20. ARTHRALGIAS/ARTHRITIS
49	nausea	Num	4	1.	4.	Q20. NAUSEA
50	tenderns	Num	4	1.	4.	Q20. RIGHT UP QUAD ABD/LIVER TENDERNESS
51	i_sclera	Num	4	1.	4.	Q20. ICTERIC SCLERA
52	jaundice	Num	4	1.	4.	Q20. JAUNDICE
53	atrophy	Num	4	1.	4.	Q20. TEMPORAL MUSCLE ATROPHY
54	visit_DT	Num	4	8.		FOLLOW UP PE VISIT DATE (SAS DATE): Converted to days since reference date
55	visit_DF	Num	4			FOLLOW UP PE VISIT DATE IMPUTE FLAG
56	SUBJ_ID	Char	8			MHCS SUBJECT IDENTIFIER

Data Set Name: f72.sas7bdat

Num	Variable	Type	Len	Format	Informat	Label
1	OLDHCV1	Num	4			Q16. OLD code assigned to other HCV
2	OLDHCV2	Num	4			Q16. OLD code assigned to other HCV
3	GENDEFCD	Num	4			Q4A. Code assigned to other genetic def.
4	q7bags	Num	4			Q7. # of bags
5	q7mls	Num	4			Q7. Total MLS
6	q21a_yr	Num	4			Q21A. Year of liver transplant
7	DRUGCD1	Num	4			Q16. Code assigned to other brand used (
8	DRUGCD2	Num	4			Q17. Code assigned to other brand used (
9	DRUGCD3	Num	4			Q18. Code assigned to other brand used (
10	DRUGCD4	Num	4			Q19. Code assigned to other brand used (
11	Q1	Num	4	4.	4.	Q1. Subject status
12	Q1REASON	Num	4	4.	4.	Q1. Reason withdrew from study
13	Q1REASCD	Num	4	6.	6.	Q1. Reason withdrew -Other Sp. CODE
14	CNCRCD	Num	4	6.	6.	Q1B. Code assigned to other cancer
15	Q1c	Num	4	6.	6.	Q1C. Autopsy performed
16	Q1d	Num	4	6.	6.	Q1D. Liver Tissue obtained
17	Q1e1	Num	4	4.	4.	Q1E1. Source=death certificate
18	Q1e2	Num	4	4.	4.	Q1E2. Source=medical record
19	Q1e3	Num	4	4.	4.	Q1E3. Source=spouse or relative
20	Q1e4	Num	4	4.	4.	Q1E4. Source=non-relative
21	Q1e5	Num	4	4.	4.	Q1E5. Source=obituary
22	Q1e6	Num	4	4.	4.	Q1E6. Source=other
23	Q2a	Num	4	4.	4.	Q2A. After or same as date of enrollment
24	Q4	Num	4	4.	4.	Q4. Is hemophilia genetic defect correct
25	Q4a	Num	4	6.	6.	Q4A. What is hemophilia genetic defect?
26	Q5a	Num	4	4.	4.	Q5A. Clotting Factor Products-None
27	Q5b	Num	4	4.	4.	Q5B. Clotting Factor Products-Recombin.
28	Q5c	Num	4	4.	4.	Q5C. Clotting Factor Products-Monoclonal
29	Q5d	Num	4	4.	4.	Q5D. Clotting Factor Products-High Pur
30	Q5e	Num	4	4.	4.	Q5E. Clotting Factor Products-Int Purity
31	Q5f	Num	4	4.	4.	Q5F. Clotting Factor Products-Cryoprecip
32	Q5g	Num	4	4.	4.	Q5G. Other Blood Components
33	Q6_none	Num	4	4.	4.	Q6. No factor concentrate was received
34	Q6_unit	Num	4	4.	4.	Q6. Units of factor concentrate KNOWN
35	Q6_mg	Num	4	4.	4.	Q6. Micrograms of factor concentrate
36	Q6_unk	Num	4	4.	4.	Q6. UNKNOWN amount of factor concentrate

Num	Variable	Type	Len	Format	Informat	Label
37	Q6_units	Num	4	19.	19.	Q6. Number of units factor concentrate
38	Q6_micro	Num	4	19.	19.	Q6. No. of micrograms of factor conc.
39	Q6a	Num	4	4.	4.	Q6A. Basis factor was administered
40	Q7	Num	4	6.	6.	Q7. How many units of cryo did sub rec
41	Q8	Char	3	\$3.	\$3.	Q8. HBV vaccine since 1st Follow-Up vis?
42	Q9	Num	4	4.	4.	Q9. Is HBV chron carrier stat accurate?
43	Q9a	Num	4	6.	6.	Q9A. HBV chronic carrier stat of subj
44	Q10	Num	4	6.	6.	Q10. Vaccinated for hep A since 1st FU
45	Q10_mo	Num	4	6.	6.	Q10. Month of last Hep A vaccination
46	Q10_yr	Num	4	6.	6.	Q10. Year of last Hep A vaccination
47	Q11	Num	4	6.	6.	Q11. Current HCV antibody status
48	Q12	Num	4	6.	6.	Q12. HIV status
49	Q13	Num	4	4.	4.	Q13. AIDS-defining condition
50	Q13a1	Num	4	4.	4.	Q13A1. CD4 <200 cells/ul or <14%
51	Q13A1MO	Num	4	6.	6.	Q13A1. CD4 <200 cells/ul or <14% month o
52	Q13A1YR	Num	4	11.	11.	Q13A1. CD4 <200 cells/ul or <14% year of
53	Q13a2	Num	4	4.	4.	Q13A2. CMV (not liver, spleen, lymph)
54	Q13A2MO	Num	4	6.	6.	Q13A2. CMV (not liver, spleen, lymph) mo
55	Q13A2YR	Num	4	11.	11.	Q13A2. CMV (not liver, spleen, lymph) ye
56	Q13a3	Num	4	4.	4.	Q13A3. Candidiasis of esophagus or lungs
57	Q13A3MO	Num	4	6.	6.	Q13A3. Candidiasis of esophagus or lungs
58	Q13A3YR	Num	4	11.	11.	Q13A3. Candidiasis of esophagus or lungs
59	Q13a4	Num	4	4.	4.	Q13A4. Cervical cancer, invasive
60	Q13A4MO	Num	4	6.	6.	Q13A4. Cervical cancer, invasive month o
61	Q13A4YR	Num	4	11.	11.	Q13A4. Cervical cancer, invasive year of
62	Q13a5	Num	4	4.	4.	Q13A5. Coccidioidmycosis, extrapulmonary
63	Q13A5MO	Num	4	6.	6.	Q13A5. Coccidioidmycosis, extrapulmonary
64	Q13A5YR	Num	4	11.	11.	Q13A5. Coccidioidmycosis, extrapulmonary
65	Q13a6	Num	4	4.	4.	Q13A6. Cryptococcosis, extrapulmonary
66	Q13A6MO	Num	4	6.	6.	Q13A6. Cryptococcosis, extrapulmonary mo
67	Q13A6YR	Num	4	11.	11.	Q13A6. Cryptococcosis, extrapulmonary ye
68	Q13a7	Num	4	4.	4.	Q13A7. Cryptosporidiosis with diarrhea f
69	Q13A7MO	Num	4	6.	6.	Q13A7. Cryptosporidiosis with diarrhea f
70	Q13A7YR	Num	4	11.	11.	Q13A7. Cryptosporidiosis with diarrhea f
71	Q13a8	Num	4	4.	4.	Q13A8. Herpes simplex, ulcer for > 1 mon
72	Q13A8MO	Num	4	6.	6.	Q13A8. Herpes simplex, ulcer for > 1 mon
73	Q13A8YR	Num	4	11.	11.	Q13A8. Herpes simplex, ulcer for > 1 mon
74	Q13a9	Num	4	4.	4.	Q13A9. Herpes simplex in lungs or esopha
75	Q13A9MO	Num	4	6.	6.	Q13A9. Herpes simplex in lungs or esopha

Num	Variable	Type	Len	Format	Informat	Label
76	Q13A9YR	Num	4	11.	11.	Q13A9. Herpes simplex in lungs or esopha
77	Q13a10	Num	4	4.	4.	Q13A10. Histoplasmosis, extrapulmonary
78	Q13A10MO	Num	4	6.	6.	Q13A10. Histoplasmosis, extrapulmonary m
79	Q13A10YR	Num	4	11.	11.	Q13A10. Histoplasmosis, extrapulmonary y
80	Q13a11	Num	4	4.	4.	Q13A11. HIV encephalopathy/dementia
81	Q13A11MO	Num	4	6.	6.	Q13A11. HIV encephalopathy/dementia mont
82	Q13A11YR	Num	4	11.	11.	Q13A11. HIV encephalopathy/dementia year
83	Q13a12	Num	4	4.	4.	Q13A12. Isosporiasis with diarrhea for >
84	Q13A12MO	Num	4	6.	6.	Q13A12. Isosporiasis with diarrhea for >
85	Q13A12YR	Num	4	11.	11.	Q13A12. Isosporiasis with diarrhea for >
86	Q13a13	Num	4	4.	4.	Q13A13. Kaposi's syndrome
87	Q13A13MO	Num	4	6.	6.	Q13A13. Kaposi's syndrome month of diag
88	Q13A13YR	Num	4	11.	11.	Q13A13. Kaposi's syndrome year of diagn
89	Q13a14	Num	4	4.	4.	Q13A14. Lymphoid interstitial pneumonia
90	Q13A14MO	Num	4	6.	6.	Q13A14. Lymphoid interstitial pn(LIP) or
91	Q13A14YR	Num	4	11.	11.	Q13A14. Lymphoid interstitial pneumonia
92	Q13a15	Num	4	4.	4.	Q13A15. Lymphoma of the brain (CNS Prima
93	Q13A15MO	Num	4	6.	6.	Q13A15. Lymphoma of the brain (CNS Prima
94	Q13A15YR	Num	4	11.	11.	Q13A15. Lymphoma of the brain (CNS Prima
95	Q13a16	Num	4	4.	4.	Q13A16. Mycobacterium avium (not only lu
96	Q13A16MO	Num	4	6.	6.	Q13A16. Mycobacterium avium (not only lu
97	Q13A16YR	Num	4	11.	11.	Q13A16. Mycobacterium avium (not only lu
98	Q13a17	Num	4	4.	4.	Q13A17. Non-Hodgkin's Lymphoma (not T-c
99	Q13A17MO	Num	4	6.	6.	Q13A17. Non-Hodgkin's Lymphoma (not T-c
100	Q13A17YR	Num	4	11.	11.	Q13A17. Non-Hodgkin's Lymphoma (not T-c
101	Q13a18	Num	4	4.	4.	Q13A18. Pneumocystis carinii pneumonia (
102	Q13A18MO	Num	4	6.	6.	Q13A18. Pneumocystis carinii pneumonia (
103	Q13A18YR	Num	4	11.	11.	Q13A18. Pneumocystis carinii pneumonia (
104	Q13a19	Num	4	4.	4.	Q13A19. Pneumonia, recurrent bacterial (
105	Q13A19MO	Num	4	6.	6.	Q13A19. Pneumonia, recurrent bacterial (
106	Q13A19YR	Num	4	11.	11.	Q13A19. Pneumonia, recurrent bacterial (
107	Q13a20	Num	4	4.	4.	Q13A20. Progressive multifocal leukoence
108	Q13A20MO	Num	4	6.	6.	Q13A20. Progressive multifocal leukoence
109	Q13A20YR	Num	4	11.	11.	Q13A20. Progressive multifocal leukoence
110	Q13a21	Num	4	4.	4.	Q13A21. Pulmonary tuberculosis
111	Q13A21MO	Num	4	6.	6.	Q13A21. Pulmonary tuberculosis month of
112	Q13A21YR	Num	4	11.	11.	Q13A21. Pulmonary tuberculosis year of d
113	Q13a22	Num	4	4.	4.	Q13A22. Salmonella septicemia, recurrent
114	Q13A22MO	Num	4	6.	6.	Q13A22. Salmonella septicemia, recurrent

Num	Variable	Type	Len	Format	Informat	Label
115	Q13A22YR	Num	4	11.	11.	Q13A22. Salmonella septicemia, recurrent
116	Q13a23	Num	4	4.	4.	Q13A23. Toxoplasmosis of the brain
117	Q13A23MO	Num	4	6.	6.	Q13A23. Toxoplasmosis of the brain month
118	Q13A23YR	Num	4	11.	11.	Q13A23. Toxoplasmosis of the brain year
119	Q13a24	Num	4	4.	4.	Q13A24. Wasting syndrome (emaciation,"sl
120	Q13A24MO	Num	4	6.	6.	Q13A24. Wasting syndrome (emaciation,"sl
121	Q13A24YR	Num	4	11.	11.	Q13A24. Wasting syndrome (emaciation,"sl
122	Q13a25	Num	4	4.	4.	Q13A25. Other multiple of recurrent bact
123	Q13A25MO	Num	4	6.	6.	Q13A25. Other multiple of recurrent bact
124	Q13A25YR	Num	4	11.	11.	Q13A25. Other multiple of recurrent bact
125	Q14a	Num	4	4.	4.	Q14A. HCV related conditions-None
126	Q14b	Num	4	4.	4.	Q14B. Jaundice, persistent > 1 month
127	Q14b_mo	Num	4	6.	6.	Q14B. Jaundice, persistent > 1 month mon
128	Q14b_yr	Num	4	11.	11.	Q14B. Jaundice, persistent > 1 year year
129	Q14c	Num	4	4.	4.	Q14C. Ascites (hepatic-related)
130	Q14c_mo	Num	4	6.	6.	Q14C. Ascites (hepatic-related) month of
131	Q14c_yr	Num	4	11.	11.	Q14C. Ascites (hepatic-related) year of
132	Q14e	Num	4	4.	4.	Q14E. Esophageal varices
133	Q14e_mo	Num	4	6.	6.	Q14E. Esophageal varices month of diagno
134	Q14e_yr	Num	4	11.	11.	Q14E. Esophageal varices year of diagnos
135	Q14f	Num	4	4.	4.	Q14F. Bleeding esophageal varices
136	Q14f_mo	Num	4	6.	6.	Q14F. Bleeding esophageal varices month
137	Q14f_yr	Num	4	11.	11.	Q14F. Bleeding esophageal varices year o
138	Q14l	Num	4	4.	4.	Q14L. Biopsy proven Cirrhosis
139	Q14l_mo	Num	4	6.	6.	Q14L. Biopsy proven Cirrhosis month of d
140	Q14l_yr	Num	4	11.	11.	Q14L. Biopsy proven Cirrhosis year of di
141	HCVCCode1	Num	4	6.	6.	Q14. Code assigned to other HCV related
142	HCVCCode2	Num	4	6.	6.	Q14. Code assigned to other HCV related
143	Q15	Num	4	6.	6.	Q15. Did subject receive HCV treatment
144	Q16	Num	4	4.	4.	Q16. Was the subject treated at the same
145	Q16a	Num	4	6.	6.	Q16A. Brand used
146	Q16b_mo	Num	4	6.	6.	Q16B. Month use began
147	Q16b_yr	Num	4	11.	11.	Q16B. Year use began
148	Q16c	Num	4	6.	6.	Q16C. Is subject currently using it?
149	Q16d	Num	4	6.	6.	Q16D. Why is the subject no longer using
150	Q17	Num	4	4.	4.	Q17. Was the subject treated with standa
151	Q17a	Num	4	4.	4.	Q17A. Brand used
152	Q17b_mo	Num	4	6.	6.	Q17B. Month use began
153	Q17b_yr	Num	4	11.	11.	Q17B. Year use began

Num	Variable	Type	Len	Format	Informat	Label
154	Q17c	Num	4	4.	4.	Q17C. Is subject currently using it?
155	Q17d	Num	4	4.	4.	Q17D. Why is the subject no longer using
156	Q18	Num	4	4.	4.	Q18. Was the subject treated at the same
157	Q18a1	Num	4	4.	4.	Q18A. Brand used: PEG-Intron
158	Q18a2	Num	4	4.	4.	Q18A. Brand used: Pegasys
159	Q18a3	Num	4	4.	4.	Q18A. Brand used: Rebetol
160	Q18a4	Num	4	4.	4.	Q18A. Brand used: Virazole
161	Q18a5	Num	4	4.	4.	Q18A. Brand used: Other
162	Q18b_mo	Num	4	6.	6.	Q18B. Month use began
163	Q18b_yr	Num	4	11.	11.	Q18B. Year use began
164	Q18c	Num	4	4.	4.	Q18C. Is subject currently using it?
165	Q18d	Num	4	4.	4.	Q18D. Why is the subject no longer using
166	Q19	Num	4	4.	4.	Q19. Was the subject treated with pegyla
167	Q19a	Num	4	6.	6.	Q19A. Brand used
168	Q19b_mo	Num	4	6.	6.	Q19B. Month use began
169	Q19b_yr	Num	4	11.	11.	Q19B. Year use began
170	Q19c	Num	4	6.	6.	Q19C. Is subject currently using it?
171	Q19d	Num	4	6.	6.	Q19D. Why is the subject no longer using
172	Q20	Num	4	4.	4.	Q20. Since 1st FU, had liver biopsy ?
173	Q20a	Num	4	4.	4.	Q20A. reason for the liver biopsy
174	BIOPSYCD	Num	4	6.	6.	Q20A. Other reason for liver biopsy code
175	Q21	Num	4	6.	6.	Q21. Since 1st FU, cons. for liver trans
176	Q21a	Num	4	4.	4.	Q21A. Has the subject received a liver t
177	Q21a_mo	Num	4	6.	6.	Q21A. Month of liver transplant
178	Q22	Num	4	4.	4.	Q22. Has the subject been diagnosed with
179	Q22ASCD1	Num	4	11.	11.	Q22A. Cancer #1-PRIMARY SITE CODE
180	Q22AHCD1	Num	4	11.	11.	Q22A. Cancer #1-HISTOLOGIC SUBTYPE CODE
181	Q22ATCD1	Num	4	11.	11.	Q22A. Cancer #1-TYPE CODE
182	Q22a_loc	Num	4	6.	6.	Q22A. Cancer #1-Is this cancer localized
183	Q22a_mo	Num	4	6.	6.	Q22A. Cancer #1-Month of diagnosis
184	Q22a_yr	Num	4	11.	11.	Q22A. Cancer #1-Year of diagnosis
185	Q22ADIAG	Num	4	4.	4.	Q22A. Cancer #1-Where cancer diagnosed
186	Q22BSCD2	Num	4	11.	11.	Q22B. Cancer #2-PRIMARY SITE CODE
187	Q22BHCD2	Num	4	11.	11.	Q22B. Cancer #2-HISTOLOGIC SUBTYPE CODE
188	Q22BTCD2	Num	4	11.	11.	Q22B. Cancer #2-TYPE CODE
189	Q22b_loc	Num	4	6.	6.	Q22B. Cancer #2-Is this cancer localized
190	Q22b_mo	Num	4	6.	6.	Q22B. Cancer #2-Month of diagnosis
191	Q22b_yr	Num	4	11.	11.	Q22B. Cancer #2-Year of diagnosis
192	Q22BDIAG	Num	4	4.	4.	Q22B. Cancer #2-Where cancer diagnosed

Num	Variable	Type	Len	Format	Informat	Label
193	Q23a	Num	4	4.	4.	Q23A. NO GI BLEED, ETC. SINCE 1st FU
194	Q23b	Num	4	4.	4.	Q23B. YES-GI BLEED SINCE 1st fu visit
195	Q23c	Num	4	4.	4.	Q23C. YES-GASTROINT. PERF. 1st FU visit
196	Q23d	Num	4	4.	4.	Q23D. YES-GASTROINT. OBST. SINCE 1st FU
197	Q23e	Num	4	6.	6.	Q23E. UNKNOWN-GI BLEED,ETC. SINCE 1st FU
198	Q23a2	Num	4	4.	4.	Q23A. Have you sent in an Upper GI Suppl
199	DEATH_DT	Num	4	8.		DATE OF DEATH (SAS DATE): Converted to days since reference date
200	DEATH_DF	Num	4			DATE OF DEATH IMPUTE FLAG
201	CVIS_DT	Num	4	8.		DATE MOST RECENT CLINIC VISIT (SAS DATE): Converted to days since reference date
202	CVIS_DF	Num	4			DATE MOST REC. CLINIC VISIT IMPUTE FLAG
203	FUVIS_DT	Num	4	8.		DATE OF FIRST FOLLOW UP (SAS DATE): Converted to days since reference date
204	FUVIS_DF	Num	4			DATE FIRST FOLLOW UP IMPUTE FLAG
205	FORM_DT	Num	4	8.		DATE FORM COMPLETED (SAS DATE): Converted to days since reference date
206	FORM_DF	Num	4			DATE FORM COMPLETED IMPUTE FLAG
207	SUBJ_ID	Char	8			MHCS SUBJECT IDENTIFIER

Data Set Name: f80.sas7bdat

Num	Variable	Type	Len	Format	Label
1	FORM	Num	4		Form Number
2	H80VISIT	Num	4		VISIT NUMBER
3	H80_A1	Num	4		NOT HIV POSITIVE
4	H80_A1N	Num	4		HAVE YOU USED ANY HIV RELATED MEDS
5	H80_221	Num	4		HIV MEDS: ABACAVIR
6	H80221FM	Num	4		MONTH FIRST USED ABACAVIR
7	H80221FY	Num	4		YEAR FIRST USED ABACAVIR
8	H80221LM	Num	4		MONTH LAST USED ABACAVIR
9	H80221LY	Num	4		YEAR LAST USED ABACAVIR
10	H80221_1	Num	4		REASON STOPPED ABACAVIR-SIDE EFFECT
11	H80221_2	Num	4		REASON STOPPED ABACAVIR-WASN'T WORKING
12	H80221_3	Num	4		REASON STOPPED ABACAVIR-CHANGED TO NEW R
13	H80221_4	Num	4		REASON STOPPED ABACAVIR-PLANNED INTERRUPT
14	H80221_5	Num	4		REASON STOPPED ABACAVIR-NO INSURANCE
15	H80221_6	Num	4		REASON STOPPED ABACAVIR-OTHER REASON
16	H80221_S	Num	4		REASON STOPPED ABACAVIR-SPECIFY REASON
17	H80_222	Num	4		HIV MEDS: AMPRENAVIR
18	H80222FM	Num	4		MONTH FIRST USED AMPRENAVIR
19	H80222FY	Num	4		YEAR FIRST USED AMPRENAVIR
20	H80222LM	Num	4		MONTH LAST USED AMPRENAVIR
21	H80222LY	Num	4		YEAR LAST USED AMPRENAVIR
22	H80222_1	Num	4		REASON STOPPED AMPRENAVIR-SIDE EFFECT
23	H80222_2	Num	4		REASON STOPPED AMPRENAVIR-WASN'T WORKING
24	H80222_3	Num	4		REASON STOPPED AMPRENAVIR-CHANGED TO NEW
25	H80222_4	Num	4		REASON STOPPED AMPRENAVIR-PLANNED INTERRUPT
26	H80222_5	Num	4		REASON STOPPED AMPRENAVIR-NO INSURANCE
27	H80222_6	Num	4		REASON STOPPED AMPRENAVIR-OTHER REASON
28	H80222_S	Num	4		REASON STOPPED AMPRENAVIR-SPECIFY REASON
29	H80_223	Num	4		HIV MEDS: COMBIVIR
30	H80223FM	Num	4		MONTH FIRST USED COMBIVIR
31	H80223FY	Num	4		YEAR FIRST USED COMBIVIR
32	H80223LM	Num	4		MONTH LAST USED COMBIVIR
33	H80223LY	Num	4		YEAR LAST USED COMBIVIR
34	H80223_1	Num	4		REASON STOPPED COMBIVIR-SIDE EFFECT
35	H80223_2	Num	4		REASON STOPPED COMBIVIR-WASN'T WORKING
36	H80223_3	Num	4		REASON STOPPED COMBIVIR-CHANGED TO NEW R

Num	Variable	Type	Len	Format	Label
37	H80223_4	Num	4		REASON STOPPED COMBIVIR-PLANNED INTERRUPT
38	H80223_5	Num	4		REASON STOPPED COMBIVIR-NO INSURANCE
39	H80223_6	Num	4		REASON STOPPED COMBIVIR-OTHER REASON
40	H80223_S	Num	4		REASON STOPPED COMBIVIR-SPECIFY REASON
41	H80_224	Num	4		HIV MEDS: DELAVIRDINE
42	H80224FM	Num	4		MONTH FIRST USED DELAVIRDINE
43	H80224FY	Num	4		YEAR FIRST USED DELAVIRDINE
44	H80224LM	Num	4		MONTH LAST USED DELAVIRDINE
45	H80224LY	Num	4		YEAR LAST USED DELAVIRDINE
46	H80224_1	Num	4		REASON STOPPED DELAVIRDINE -SIDE EFFECT
47	H80224_2	Num	4		REASON STOPPED DELAVIRDINE -WASN'T WORKI
48	H80224_3	Num	4		REASON STOPPED DELAVIRDINE -CHANGED TO N
49	H80224_4	Num	4		REASON STOPPED DELAVIRDINE -PLANNED INTE
50	H80224_5	Num	4		REASON STOPPED DELAVIRDINE -NO INSURANCE
51	H80224_6	Num	4		REASON STOPPED DELAVIRDINE -OTHER REASON
52	H80224_S	Num	4		REASON STOPPED DELAVIRDINE -SPECIFY REAS
53	H80_225	Num	4		HIV MEDS: DIDANOSINE
54	H80225FM	Num	4		MONTH FIRST USED DIDANOSINE
55	H80225FY	Num	4		YEAR FIRST USED DIDANOSINE
56	H80225LM	Num	4		MONTH LAST USED DIDANOSINE
57	H80225LY	Num	4		YEAR LAST USED DIDANOSINE
58	H80225_1	Num	4		REASON STOPPED DIDANOSINE-SIDE EFFECT
59	H80225_2	Num	4		REASON STOPPED DIDANOSINE-WASN'T WORKING
60	H80225_3	Num	4		REASON STOPPED DIDANOSINE-CHANGED TO NEW
61	H80225_4	Num	4		REASON STOPPED DIDANOSINE-PLANNED INTERRU
62	H80225_5	Num	4		REASON STOPPED DIDANOSINE-NO INSURANCE
63	H80225_6	Num	4		REASON STOPPED DIDANOSINE-OTHER REASON
64	H80225_S	Num	4		REASON STOPPED DIDANOSINE-SPECIFY REASON
65	H80_226	Num	4		HIV MEDS: EFAVIRENZ
66	H80226FM	Num	4		MONTH FIRST USED EFAVIRENZ
67	H80226FY	Num	4		YEAR FIRST USED EFAVIRENA
68	H80226LM	Num	4		MONTH LAST USED EFAVIRENA
69	H80226LY	Num	4		YEAR LAST USED EFAVIRENA
70	H80226_1	Num	4		REASON STOPPED EFAVIRENA-SIDE EFFECT
71	H80226_2	Num	4		REASON STOPPED EFAVIRENA-WASN'T WORKING
72	H80226_3	Num	4		REASON STOPPED EFAVIRENA-CHANGED TO NEW
73	H80226_4	Num	4		REASON STOPPED EFAVIRENA-PLANNED INTERRU
74	H80226_5	Num	4		REASON STOPPED EFAVIRENA-NO INSURANCE
75	H80226_6	Num	4		REASON STOPPED EFAVIRENA-OTHER REASON

Num	Variable	Type	Len	Format	Label
76	H80226_S	Num	4		REASON STOPPED EFAVIRENA-SPECIFY REASON
77	H80_227	Num	4		HIV MEDS: HYDROXYUREA
78	H80227FM	Num	4		MONTH FIRST USED HYDROXYUREA
79	H80227FY	Num	4		YEAR FIRST USED HYDROXYUREA
80	H80227LM	Num	4		MONTH LAST USED HYDROXYUREA
81	H80227LY	Num	4		YEAR LAST USED HYDROXYUREA
82	H80227_1	Num	4		REASON STOPPED HYDROXYUREA -SIDE EFFECT
83	H80227_2	Num	4		REASON STOPPED HYDROXYUREA -WASN'T WORKI
84	H80227_3	Num	4		REASON STOPPED HYDROXYUREA -CHANGED TO N
85	H80227_4	Num	4		REASON STOPPED HYDROXYUREA -PLANNED INTE
86	H80227_5	Num	4		REASON STOPPED HYDROXYUREA -NO INSURANCE
87	H80227_6	Num	4		REASON STOPPED HYDROXYUREA -OTHER REASON
88	H80227_S	Num	4		REASON STOPPED HYDROXYUREA -SPECIFY REAS
89	H80_228	Num	4		HIV MEDS: INDINAVIR
90	H80228FM	Num	4		MONTH FIRST USED INDINAVIR
91	H80228FY	Num	4		YEAR FIRST USED INDINAVIR
92	H80228LM	Num	4		MONTH LAST USED INDINAVIR
93	H80228LY	Num	4		YEAR LAST USED INDINAVIR
94	H80228_1	Num	4		REASON STOPPED INDINAVIR-SIDE EFFECT
95	H80228_2	Num	4		REASON STOPPED INDINAVIR-WASN'T WORKING
96	H80228_3	Num	4		REASON STOPPED INDINAVIR-CHANGED TO NEW
97	H80228_4	Num	4		REASON STOPPED INDINAVIR-PLANNED INTERRU
98	H80228_5	Num	4		REASON STOPPED INDINAVIR-NO INSURANCE
99	H80228_6	Num	4		REASON STOPPED INDINAVIR-OTHER REASON
100	H80228_S	Num	4		REASON STOPPED INDINAVIR-SPECIFY REASON
101	H80_229	Num	4		HIV MEDS: LOPINAVIR/RITONAVIR
102	H80229FM	Num	4		MONTH FIRST USED LOPINAVIR/RITONAVIR
103	H80229FY	Num	4		YEAR FIRST USED LOPINAVIR/RITONAVIR
104	H80229LM	Num	4		MONTH LAST USED LOPINAVIR/RITONAVIR
105	H80229LY	Num	4		YEAR LAST USED LOPINAVIR/RITONAVIR
106	H80229_1	Num	4		REASON STOPPED LOPINAVIR/RITONAVIR-SIDE
107	H80229_2	Num	4		REASON STOPPED LOPINAVIR/RITONAVIR-WASN'
108	H80229_3	Num	4		RSN STPD LOPINAVIR/RITONAVIR-CGN TO NEW
109	H80229_4	Num	4		RSN STPD LOPINAVIR/RITONAVIR-PLANNED INT
110	H80229_5	Num	4		REASON STOPPED LOPINAVIR/RITONAVIR-NO IN
111	H80229_6	Num	4		REASON STOPPED LOPINAVIR/RITONAVIR-OTHER
112	H80229_S	Num	4		REASON STOPPED LOPINAVIR/RITONAVIR-SPECI
113	H80_230	Num	4		HIV MEDS: LAMIVUDINE
114	H80230FM	Num	4		MONTH FIRST USED LAMIVUDINE

Num	Variable	Type	Len	Format	Label
115	H80230FY	Num	4		YEAR FIRST USED LAMIVUDINE
116	H80230LM	Num	4		MONTH LAST USED LAMIVUDINE
117	H80230LY	Num	4		YEAR LAST USED LAMIVUDINE
118	H80230_1	Num	4		REASON STOPPED LAMIVUDINE-SIDE EFFECT
119	H80230_2	Num	4		REASON STOPPED LAMIVUDINE-WASN'T WORKING
120	H80230_3	Num	4		REASON STOPPED LAMIVUDINE-CHANGED TO NEW
121	H80230_4	Num	4		RSN STPD LAMIVUDINE-PLANNED INTERRUPTION
122	H80230_5	Num	4		REASON STOPPED LAMIVUDINE-NO INSURANCE
123	H80230_6	Num	4		REASON STOPPED LAMIVUDINE-OTHER REASON
124	H80230_S	Num	4		REASON STOPPED LAMIVUDINE-SPECIFY REASON
125	H80_231	Num	4		HIV MEDS: NELFINAVIR
126	H80231FM	Num	4		MONTH FIRST USED NELFINAVIR
127	H80231FY	Num	4		YEAR FIRST USED NELFINAVIR
128	H80231LM	Num	4		MONTH LAST USED NELFINAVIR
129	H80231LY	Num	4		YEAR LAST USED NELFINAVIR
130	H80231_1	Num	4		REASON STOPPED NELFINAVIR-SIDE EFFECT
131	H80231_2	Num	4		REASON STOPPED NELFINAVIR-WASN'T WORKING
132	H80231_3	Num	4		REASON STOPPED NELFINAVIR-CHANGED TO NEW
133	H80231_4	Num	4		REASON STOPPED NELFINAVIR-PLANNED INTERR
134	H80231_5	Num	4		REASON STOPPED NELFINAVIR-NO INSURANCE
135	H80231_6	Num	4		REASON STOPPED NELFINAVIR-OTHER REASON
136	H80231_S	Num	4		REASON STOPPED NELFINAVIR-SPECIFY REASON
137	H80_232	Num	4		HIV MEDS: NEVIRAPINE
138	H80232FM	Num	4		MONTH FIRST USED NEVIRAPINE
139	H80232FY	Num	4		YEAR FIRST USED NEVIRAPINE
140	H80232LM	Num	4		MONTH LAST USED NEVIRAPINE
141	H80232LY	Num	4		YEAR LAST USED NEVIRAPINE
142	H80232_1	Num	4		REASON STOPPED NEVIRAPINE-SIDE EFFECT
143	H80232_2	Num	4		REASON STOPPED NEVIRAPINE-WASN'T WORKING
144	H80232_3	Num	4		REASON STOPPED NEVIRAPINE-CHANGED TO NEW
145	H80232_4	Num	4		REASON STOPPED NEVIRAPINE-PLANNED INTERR
146	H80232_5	Num	4		REASON STOPPED NEVIRAPINE-NO INSURANCE
147	H80232_6	Num	4		REASON STOPPED NEVIRAPINE-OTHER REASON
148	H80232_S	Num	4		REASON STOPPED NEVIRAPINE-SPECIFY REASON
149	H80_233	Num	4		HIV MEDS: RITONAVIR
150	H80233FM	Num	4		MONTH FIRST USED RITONAVIR
151	H80233FY	Num	4		YEAR FIRST USED RITONAVIR
152	H80233LM	Num	4		MONTH LAST USED RITONAVIR
153	H80233LY	Num	4		YEAR LAST USED RITONAVIR

Num	Variable	Type	Len	Format	Label
154	H80233_1	Num	4		REASON STOPPED RITONAVIR-SIDE EFFECT
155	H80233_2	Num	4		REASON STOPPED RITONAVIR-WASN'T WORKING
156	H80233_3	Num	4		REASON STOPPED RITONAVIR-CHANGED TO NEW
157	H80233_4	Num	4		REASON STOPPED RITONAVIR-PLANNED INTERRU
158	H80233_5	Num	4		REASON STOPPED RITONAVIR-NO INSURANCE
159	H80233_6	Num	4		REASON STOPPED RITONAVIR-OTHER REASON
160	H80233_S	Num	4		REASON STOPPED RITONAVIR-SPECIFY REASON
161	H80_234	Num	4		HIV MEDS: SAQUINAVIR
162	H80234FM	Num	4		MONTH FIRST USED SAQUINAVIR
163	H80234FY	Num	4		YEAR FIRST USED SAQUINAVIR
164	H80234LM	Num	4		MONTH LAST USED SAQUINAVIR
165	H80234LY	Num	4		YEAR LAST USED SAQUINAVIR
166	H80234_1	Num	4		REASON STOPPED SAQUINAVIR-SIDE EFFECT
167	H80234_2	Num	4		REASON STOPPED SAQUINAVIR-WASN'T WORKING
168	H80234_3	Num	4		REASON STOPPED SAQUINAVIR-CHANGED TO NEW
169	H80234_4	Num	4		REASON STOPPED SAQUINAVIR-PLANNED INTERR
170	H80234_5	Num	4		REASON STOPPED SAQUINAVIR-NO INSURANCE
171	H80234_6	Num	4		REASON STOPPED SAQUINAVIR-OTHER REASON
172	H80234_S	Num	4		REASON STOPPED SAQUINAVIR-SPECIFY REASON
173	H80_235	Num	4		HIV MEDS: STAVUDINE
174	H80235FM	Num	4		MONTH FIRST USED STAVUDINE
175	H80235FY	Num	4		YEAR FIRST USED STAVUDINE
176	H80235LM	Num	4		MONTH LAST USED STAVUDINE
177	H80235LY	Num	4		YEAR LAST USED STAVUDINE
178	H80235_1	Num	4		REASON STOPPED STAVUDINE -SIDE EFFECT
179	H80235_2	Num	4		REASON STOPPED STAVUDINE -WASN'T WORKING
180	H80235_3	Num	4		REASON STOPPED STAVUDINE -CHANGED TO NEW
181	H80235_4	Num	4		REASON STOPPED STAVUDINE -PLANNED INTERR
182	H80235_5	Num	4		REASON STOPPED STAVUDINE -NO INSURANCE
183	H80235_6	Num	4		REASON STOPPED STAVUDINE -OTHER REASON
184	H80235_S	Num	4		REASON STOPPED STAVUDINE -SPECIFY REASON
185	H80_109	Num	4		HIV MEDS: TENOFOVIR
186	H80109FM	Num	4		MONTH FIRST USED TENOFOVIR
187	H80109FY	Num	4		YEAR FIRST USED TENOFOVIR
188	H80109LM	Num	4		MONTH LAST USED TENOFOVIR
189	H80109LY	Num	4		YEAR LAST USED TENOFOVIR
190	H80109_1	Num	4		REASON STOPPED TENOFOVIR -SIDE EFFECT
191	H80109_2	Num	4		REASON STOPPED TENOFOVIR -WASN'T WORKING
192	H80109_3	Num	4		REASON STOPPED TENOFOVIR -CHANGED TO NEW

Num	Variable	Type	Len	Format	Label
193	H80109_4	Num	4		REASON STOPPED TENOFOVIR -PLANNED INTERR
194	H80109_5	Num	4		REASON STOPPED TENOFOVIR -NO INSURANCE
195	H80109_6	Num	4		REASON STOPPED TENOFOVIR -OTHER REASON
196	H80109_S	Num	4		REASON STOPPED TENOFOVIR -SPECIFY REASON
197	H80_236	Num	4		HIV MEDS: TRIZAVIR
198	H80236FM	Num	4		MONTH FIRST USED TRIZAVIR
199	H80236FY	Num	4		YEAR FIRST USED TRIZAVIR
200	H80236LM	Num	4		MONTH LAST USED TRIZAVIR
201	H80236LY	Num	4		YEAR LAST USED TRIZAVIR
202	H80236_1	Num	4		REASON STOPPED TRIZAVIR-SIDE EFFECT
203	H80236_2	Num	4		REASON STOPPED TRIZAVIR-WASN'T WORKING
204	H80236_3	Num	4		REASON STOPPED TRIZAVIR-CHANGED TO NEW R
205	H80236_4	Num	4		REASON STOPPED TRIZAVIR-PLANNED INTERRUPT
206	H80236_5	Num	4		REASON STOPPED TRIZAVIR-NO INSURANCE
207	H80236_6	Num	4		REASON STOPPED TRIZAVIR-OTHER REASON
208	H80236_S	Num	4		REASON STOPPED TRIZAVIR-SPECIFY REASON
209	H80_237	Num	4		HIV MEDS: ZALCITABINE
210	H80237FM	Num	4		MONTH FIRST USED ZALCITABINE
211	H80237FY	Num	4		YEAR FIRST USED ZALCITABINE
212	H80237LM	Num	4		MONTH LAST USED ZALCITABINE
213	H80237LY	Num	4		YEAR LAST USED ZALCITABINE
214	H80237_1	Num	4		REASON STOPPED ZALCITABINE-SIDE EFFECT
215	H80237_2	Num	4		REASON STOPPED ZALCITABINE-WASN'T WORKIN
216	H80237_3	Num	4		REASON STOPPED ZALCITABINE-CHANGED TO NE
217	H80237_4	Num	4		REASON STOPPED ZALCITABINE-PLANNED INTER
218	H80237_5	Num	4		REASON STOPPED ZALCITABINE-NO INSURANCE
219	H80237_6	Num	4		REASON STOPPED ZALCITABINE-OTHER REASON
220	H80237_S	Num	4		REASON STOPPED ZALCITABINE-SPECIFY REASO
221	H80_238	Num	4		HIV MEDS: ZIDOVUDINE
222	H80238FM	Num	4		MONTH FIRST USED ZIDOVUDINE
223	H80238FY	Num	4		YEAR FIRST USED ZIDOVUDINE
224	H80238LM	Num	4		MONTH LAST USED ZIDOVUDINE
225	H80238LY	Num	4		YEAR LAST USED ZIDOVUDINE
226	H80238_1	Num	4		REASON STOPPED ZIDOVUDINE-SIDE EFFECT
227	H80238_2	Num	4		REASON STOPPED ZIDOVUDINE-WASN'T WORKING
228	H80238_3	Num	4		REASON STOPPED ZIDOVUDINE-CHANGED TO NEW
229	H80238_4	Num	4		REASON STOPPED ZIDOVUDINE-PLANNED INTERR
230	H80238_5	Num	4		REASON STOPPED ZIDOVUDINE-NO INSURANCE
231	H80238_6	Num	4		REASON STOPPED ZIDOVUDINE-OTHER REASON

Num	Variable	Type	Len	Format	Label
232	H80238_S	Num	4		REASON STOPPED ZIDOVUDINE-SPECIFY REASON
233	H80_O1	Num	4		HIV MEDS: OTHER SPECIFY 1
234	H80_O1FM	Num	4		MONTH FIRST USED OTHER SPECIFY 1
235	H80_O1FY	Num	4		YEAR FIRST USED OTHER SPECIFY 1
236	H80_O1LM	Num	4		MONTH LAST USED OTHER SPECIFY 1
237	H80_O1LY	Num	4		YEAR LAST USED OTHER SPECIFY 1
238	H80_O1_1	Num	4		REASON STOPPED OTHER SPECIFY 1 SIDE EFFE
239	H80_O1_2	Num	4		REASON STOPPED OTHER SPECIFY 1-WASN'T WO
240	H80_O1_3	Num	4		REASON STOPPED OTHER SPECIFY 1-NEW REGIM
241	H80_O1_4	Num	4		REASON STOPPED OTHER SPECIFY 1-PLANNED I
242	H80_O1_5	Num	4		REASON STOPPED OTHER SPECIFY 1-NO INSURA
243	H80_O1_6	Num	4		REASON STOPPED OTHER SPECIFY 1-OTHER REA
244	H80_O1_S	Num	4		REASON STOPPED OTHER SPECIFY 1-SPECIFY R
245	H80_O2	Num	4		HIV MEDS: OTHER SPECIFY 2
246	H80_O2FM	Num	4		MONTH FIRST USED OTHER SPECIFY 2
247	H80_O2FY	Num	4		YEAR FIRST USED OTHER SPECIFY 2
248	H80_O2LM	Num	4		MONTH LAST USED OTHER SPECIFY 2
249	H80_O2LY	Num	4		YEAR LAST USED OTHER SPECIFY 2
250	H80_O2_1	Num	4		REASON STOPPED OTHER SPECIFY 2 SIDE EFFE
251	H80_O2_2	Num	4		REASON STOPPED OTHER SPECIFY 2-WASN'T WO
252	H80_O2_3	Num	4		REASON STOPPED OTHER SPECIFY 2-NEW REGIM
253	H80_O2_4	Num	4		REASON STOPPED OTHER SPECIFY 2-PLANNED I
254	H80_O2_5	Num	4		REASON STOPPED OTHER SPECIFY 2-NO INSURA
255	H80_O2_6	Num	4		REASON STOPPED OTHER SPECIFY 2-OTHER REA
256	H80_O2_S	Num	4		REASON STOPPED OTHER SPECIFY 2-SPECIFY R
257	H80_A2	Num	4		DIDN'T USE ANY PROPHYLAXIS MEDICATIONS
258	H80A2_1	Num	4		PROPHYLAXIS MEDS: ACYCLOVIR
259	H80A2_2	Num	4		PROPHYLAXIS MEDS: AEROSOLIZED PENTAMIDIN
260	H80A2_3	Num	4		PROPHYLAXIS MEDS: ATOVAQUONE
261	H80A2_4	Num	4		PROPHYLAXIS MEDS: AZITHROMYCIN
262	H80A2_5	Num	4		PROPHYLAXIS MEDS: CLARITHROMYCIN
263	H80A2_6	Num	4		PROPHYLAXIS MEDS: DAPSONE
264	H80A2_7	Num	4		PROPHYLAXIS MEDS: FAMCICLOVIR
265	H80A2_8	Num	4		PROPHYLAXIS MEDS: FLUCONAZOLE
266	H80A2_9	Num	4		PROPHYLAXIS MEDS: GANCICLOVIR
267	H80A2_10	Num	4		PROPHYLAXIS MEDS: RIFABUTIN
268	H80A2_11	Num	4		PROPHYLAXIS MEDS: TRIMETHOPRIM
269	H80A2_12	Num	4		PROPHYLAXIS MEDS: VALACYCLOVIR
270	H80A2_O1	Num	4		PROPHYLAXIS MEDS: OTHER HIV DRUG-1

Num	Variable	Type	Len	Format	Label
271	H80A2_O2	Num	4		PROPHYLAXIS MEDS: OTHER HIV DRUG-2
272	H80A2_O3	Num	4		PROPHYLAXIS MEDS: OTHER HIV DRUG-3
273	H80A2_O4	Num	4		PROPHYLAXIS MEDS: OTHER HIV DRUG-4
274	H80A2_O5	Num	4		PROPHYLAXIS MEDS: OTHER HIV DRUG-5
275	H80_A3	Num	4		DIDN'T USE ANY HCV MEDS
276	H80A3_1	Num	4		HCV MEDICATIONS: INTRON
277	H80A3_2	Num	4		HCV MEDICATIONS: ROFERON
278	H80A3_3	Num	4		HCV MEDICATIONS: INFERGEN
279	H80A3_4	Num	4		HCV MEDICATIONS: STANDARD INTERFERON
280	H80A3_5	Num	4		HCV MEDICATIONS: REBETOL
281	H80A3_6	Num	4		HCV MEDICATIONS: VIRAZOLE
282	H80A3_7	Num	4		HCV MEDICATIONS: REBETRON
283	H80A3_8	Num	4		HCV MEDICATIONS: PEG-INTRON
284	H80A3_9	Num	4		HCV MEDICATIONS: PEGASYS
285	H80_A4	Num	4		DIDN'T USE ANY OTHER PRESCRIPTION MED
286	H80A4_1	Num	4		OTHER PRESCRIPTION MEDS: VIOXX
287	H80A4_2	Num	4		OTHER PRESCRIPTION MEDS: CELEBREX
288	H80A4_3	Num	4		OTHER PRESCRIPTION MEDS: VICODIN
289	H80A4_4	Num	4		OTHER PRESCRIPTION MEDS: TYLENOL #3
290	H80A4_5	Num	4		OTHER PRESCRIPTION MEDS: PERCOCET
291	H80A4_6	Num	4		OTHER PRESCRIPTION MEDS: OXYIR
292	H80A4_7	Num	4		OTHER PRESCRIPTION MEDS: LASIX
293	H80A4_8	Num	4		OTHER PRESCRIPTION MEDS: PRILOSEC
294	H80A4_9	Num	4		OTHER PRESCRIPTION MEDS: ZOLOFT
295	H80A4_10	Num	4		OTHER PRESCRIPTION MEDS: NEURONTIN
296	H80A4_O1	Num	4		OTHER PRESCRIPTION MEDS: SPECIFY 1
297	H80A4_O2	Num	4		OTHER PRESCRIPTION MEDS: SPECIFY 2
298	H80A4_O3	Num	4		OTHER PRESCRIPTION MEDS: SPECIFY 3
299	H80A4_O4	Num	4		OTHER PRESCRIPTION MEDS: SPECIFY 4
300	H80A4_O5	Num	4		OTHER PRESCRIPTION MEDS: SPECIFY 5
301	H80A4_O6	Num	4		OTHER PRESCRIPTION MEDS: SPECIFY 6
302	H80A4_O7	Num	4		OTHER PRESCRIPTION MEDS: SPECIFY 7
303	H80A4_O8	Num	4		OTHER PRESCRIPTION MEDS: SPECIFY 8
304	H80A4_O9	Num	4		OTHER PRESCRIPTION MEDS: SPECIFY 9
305	H80A4O10	Num	4		OTHER PRESCRIPTION MEDS: SPECIFY 10
306	H80_A5	Num	4		DIDN'T USE HERBS/DRUGS
307	H80A5_1	Num	4		HERBAL SUPPLEMENTS: ALCHEMILLA
308	H80A5_2	Num	4		HERBAL SUPPLEMENTS: CHAPARRAL
309	H80A5_3	Num	4		HERBAL SUPPLEMENTS: CHONDROITIN

Num	Variable	Type	Len	Format	Label
310	H80A5_4	Num	4		HERBAL SUPPLEMENTS: EVENING PRIMROSE
311	H80A5_5	Num	4		HERBAL SUPPLEMENTS: EPHEDRA
312	H80A5_6	Num	4		HERBAL SUPPLEMENTS: FEWERFEW
313	H80A5_7	Num	4		HERBAL SUPPLEMENTS: FISH OIL
314	H80A5_8	Num	4		HERBAL SUPPLEMENTS: GENTIAN
315	H80A5_9	Num	4		HERBAL SUPPLEMENTS: GERMANDER
316	H80A5_10	Num	4		HERBAL SUPPLEMENTS: GINKGO
317	H80A5_11	Num	4		HERBAL SUPPLEMENTS: GINSENG
318	H80A5_12	Num	4		HERBAL SUPPLEMENTS: GINGER
319	H80A5_13	Num	4		HERBAL SUPPLEMENTS: GLUCOSAMINE
320	H80A5_14	Num	4		HERBAL SUPPLEMENTS: JU BU HUAN
321	H80A5_15	Num	4		HERBAL SUPPLEMENTS: MILK THISTLE
322	H80A5_16	Num	4		HERBAL SUPPLEMENTS: SENNA
323	H80A5_17	Num	4		HERBAL SUPPLEMENTS: SHARK CARTILAGE
324	H80A5_18	Num	4		HERBAL SUPPLEMENTS: SCURELLARIA
325	H80A5_19	Num	4		HERBAL SUPPLEMENTS: ST. JOHNS WART
326	H80A5_H1	Num	4		HERBAL SUPPLEMENTS: SPECIFY 1
327	H80A5_H2	Num	4		HERBAL SUPPLEMENTS: SPECIFY 2
328	H80A5_H3	Num	4		HERBAL SUPPLEMENTS: SPECIFY 3
329	H80A5_H4	Num	4		HERBAL SUPPLEMENTS: SPECIFY 4
330	H80A5_H5	Num	4		HERBAL SUPPLEMENTS: SPECIFY 5
331	H80A5_H6	Num	4		HERBAL SUPPLEMENTS: SPECIFY 6
332	H80A5_H7	Num	4		HERBAL SUPPLEMENTS: SPECIFY 7
333	H80A5_H8	Num	4		HERBAL SUPPLEMENTS: SPECIFY 8
334	H80A5_H9	Num	4		HERBAL SUPPLEMENTS: SPECIFY 9
335	H80A5H10	Num	4		HERBAL SUPPLEMENTS: SPECIFY 10
336	H80A5_O1	Num	4		OTHER DRUGS: SPECIFY 1
337	H80A5_O2	Num	4		OTHER DRUGS: SPECIFY 2
338	H80A5_O3	Num	4		OTHER DRUGS: SPECIFY 3
339	H80A5_O4	Num	4		OTHER DRUGS: SPECIFY 4
340	H80A5_O5	Num	4		OTHER DRUGS: SPECIFY 5
341	H80A5_O6	Num	4		OTHER DRUGS: SPECIFY 6
342	H80A5_O7	Num	4		OTHER DRUGS: SPECIFY 7
343	H80A5_O8	Num	4		OTHER DRUGS: SPECIFY 8
344	H80A5_O9	Num	4		OTHER DRUGS: SPECIFY 9
345	H80A5O10	Num	4		OTHER DRUGS: SPECIFY 10
346	H80_B1	Num	4		REDUCE AMOUNT OF TIME SPENT ON WORK?
347	H80_B2	Num	4		ACCOMPLISH LESS THAN YOU WOULD LIKE?
348	H80_B3	Num	4		LIMITED IN THE KIND OF WORK/ACTIVITIES?

Num	Variable	Type	Len	Format	Label
349	H80_B4	Num	4		HAVE DIFFICULTY PERFORMING WORK/ACTIVITI
350	H80_B5	Num	4		PAIN IN YOUR JOINTS PAST 4 WEEKS
351	H80_B6	Num	4		PAIN OF OTHER TYPES PAST 4 WEEKS
352	H80_B7	Num	4		HOW MUCH DID PAIN INTERFERE WITH NORMAL
353	H80_C1	Num	4		DID YOU USE ACETAMINOPHEN SINCE LAST VIS
354	H80_C2	Num	4		PAST 3 MONTHS: # ACETAMINOPHEN A WEEK
355	H80_C3	Num	4		PAST 3 MONTHS: MAX # ACETAMINOPHEN A WEE
356	H80_C4	Num	4		3-12 MONTHS: # ACETAMINOPHEN A WEEK
357	H80_C5	Num	4		3-12 MONTHS: MAX # ACETAMINOPHEN A WEEK
358	H80_C6	Num	4		DID YOU USE NSAIDS SINCE LAST VISIT (OLD
359	H80_C8	Num	4		PAST 3 MONTHS: # NSAIDS A WEEK
360	H80_C9	Num	4		PAST 3 MONTHS: MAX # NSAIDS A WEEK
361	H80_C9A1	Num	4		PAST 3 MONTHS: TYPE OF NSAID-COX 2
362	H80_C9A2	Num	4		PAST 3 MONTHS: TYPE OF NSAID-OTHER NSAID
363	H80_C9A3	Num	4		PAST 3 MONTHS: TYPE OF NSAID-NONE
364	H80_C9B1	Num	4		PAST 2 WEEKS: TYPE OF NSAID-COX 2
365	H80_C9B2	Num	4		PAST 2 WEEKS: TYPE OF NSAID-OTHER NSAID
366	H80_C9B3	Num	4		PAST 2 WEEKS: TYPE OF NSAID-NONE
367	H80_C10	Num	4		3-12 MONTHS: # NSAIDS A WEEK
368	H80_C11	Num	4		3-12 MONTHS: MAX # NSAIDS A WEEK
369	H80C11A1	Num	4		PAST YEAR: TYPE OF NSAID-COX 2
370	H80C11A2	Num	4		PAST YEAR: TYPE OF NSAID-OTHER NSAID
371	H80C11A3	Num	4		PAST YEAR: TYPE OF NSAID-NONE
372	H80_C12	Num	4		SINCE YOUR LAST STUDY VISIT DID YOU USE
373	H80_C13P	Num	4		PAST 3 MONTHS: # CODEINE/OTHER PILLS A W
374	H80_C13I	Num	4		PAST 3 MONTHS: # CODEINE/OTHER INJECTION
375	H80_C14P	Num	4		PAST 3 MONTHS: MAX # CODEINE/OTHER PILLS
376	H80_C14I	Num	4		PAST 3 MONTHS: MAX # CODEINE/OTHER INJEC
377	H80_C15P	Num	4		3-12 MONTHS: # CODEINE/OTHER PILLS A WEE
378	H80_C15I	Num	4		3-12 MONTHS: # CODEINE/OTHER INJECTIONS
379	H80_C16P	Num	4		3-12 MONTHS: MAX # CODEINE/OTHER PILLS A
380	H80_C16I	Num	4		3-12 MONTHS: MAX # CODEINE/OTHER INJECTI
381	H80_D1	Num	4		PAST YEAR SMOKED CIGARETTES REGULARLY
382	H80_D2	Num	4		PAST YEAR HAD A DRINK CONTAINING ALCOHOL
383	H80_D3	Num	4		PAST 3 MONTH, # OF DRINKS PER WEEK
384	H80_D4	Num	4		PAST 3 MONTH, MAX # OF DRINKS PER DAY
385	H80_D5	Num	4		3-12 MONTHS: # OF DRINKS PER WEEK
386	H80_D6	Num	4		3-12 MONTHS: MAX # OF DRINKS PER DAY
387	H80_D7	Num	4		UNABLE TO STOP DRINKING

Num	Variable	Type	Len	Format	Label
388	H80_D8	Num	4		FAILED TO DO SOMETHING YOU WERE EXPECTED
389	H80_D9	Num	4		NEEDED A DRINK FIRST THING IN THE MORNIN
390	H80_D10	Num	4		FELT GUILTY AFTER DRINKING
391	H80_D11	Num	4		UNABLE TO REMEMBER AFTER DRINKING
392	H80_D12	Num	4		YOU OR SOMEONE BEEN INJURED DUE TO DRINK
393	H80_D13	Num	4		RELATIVE CONCERNED ABOUT YOUR DRINKING
394	H80_E1	Num	4		PAST 2 WKS: ABDOMINAL BLOATING
395	H80_E2	Num	4		PAST 2 WKS: TIRED OR FATIGUES
396	H80_E3	Num	4		PAST 2 WKS: BODILY PAIN
397	H80_E4	Num	4		PAST 2 WKS: FELT SLEEPING DURING THE DAY
398	H80_E5	Num	4		PAST 2 WKS: ABDOMINAL PAIN
399	H80_E6	Num	4		PAST 2 WKS: SHORTNESS OF BREATH
400	H80_E7	Num	4		PAST 2 WKS: NOT ABLE TO EAT MUCH
401	H80_E8	Num	4		PAST 2 WKS: DECREASED STRENGTH
402	H80_E9	Num	4		PAST 2 WKS: TROUBLE LIFTING HEAVY OBJECT
403	H80_E10	Num	4		PAST 2 WKS: FELT ANXIOUS
404	H80_E11	Num	4		PAST 2 WKS: DECREASED LEVEL OF ENERGY
405	H80_E12	Num	4		PAST 2 WKS: FELT UNHAPPY
406	H80_E13	Num	4		PAST 2 WKS: FELT DROWSY
407	H80_E14	Num	4		PAST 2 WKS: LIMITATION OF YOUR DIET
408	H80_E15	Num	4		PAST 2 WKS: BEEN IRRITABLE
409	H80_E16	Num	4		PAST 2 WKS: DIFFICULTY SLEEPING
410	H80_E17	Num	4		PAST 2 WKS: ABDOMINAL DISCOMFORT
411	H80_E18	Num	4		PAST 2 WKS: WORRIED/IMPACT HEPATIC C VIR
412	H80_E19	Num	4		PAST 2 WKS: MOOD SWINGS
413	H80_E20	Num	4		PAST 2 WKS: UNABLE TO FALL ASLEEP AT NIG
414	H80_E21	Num	4		PAST 2 WKS: MUSCLE CRAMPS
415	H80_E22	Num	4		PAST 2 WKS: WORRIED ABOUT YOUR SYMPTOMS
416	H80_E23	Num	4		PAST 2 WKS: DRY MOUTH
417	H80_E24	Num	4		PAST 2 WKS: FELT DEPRESSED
418	H80_E25	Num	4		PAST 2 WKS: WORRIED VIRUS INFECTION GETT
419	H80_E26	Num	4		PAST 2 WKS: PROBLEM CONCENTRATING
420	H80_E27	Num	4		PAST 2 WKS: TROUBLED BY ITCHING
421	H80_E28	Num	4		PAST 2 WKS: WORRIED ABOUT NOT FEELING BE
422	H80_E29	Num	4		PAST 2 WKS: CONCERNED AVAILABILITY OF LI
423	PRODHX_V	Num	4		FLAG TO INDICATE PRODUCT HISTORY VERIFIE
424	H80_DT	Num	4	8.	DATE FORM COMPLETED (SAS DATE): Converted to days since reference date
425	H80_DF	Num	4		DATE FORM COMPLETED (IMPUTE FLAG)
426	F80ABDOM	Num	4	6.2	SUMMARY QUALITY OF LIFE: ABDOMINAL

Num	Variable	Type	Len	Format	Label
427	F80FATIG	Num	4	6.2	SUMMARY QUALITY OF LIFE: FATIGUE
428	F80SYSTEM	Num	4	6.2	SUMMARY QUALITY OF LIFE: SYSTEM
429	F80ACTIV	Num	4	6.2	SUMMARY QUALITY OF LIFE: ACTIVITY
430	F80EMOTN	Num	4	6.2	SUMMARY QUALITY OF LIFE: EMOTION
431	F80WORRY	Num	4	6.2	SUMMARY QUALITY OF LIFE: WORRY
432	H80_E1R	Num	4		RECODED VALUE OF H80_E1 FOR QOL CALC.
433	H80_E5R	Num	4		RECODED VALUE OF H80_E5 FOR QOL CALC.
434	H80_E17R	Num	4		RECODED VALUE OF H80_E17 FOR QOL CALC.
435	H80_E2R	Num	4		RECODED VALUE OF H80_E2 FOR QOL CALC.
436	H80_E4R	Num	4		RECODED VALUE OF H80_E4 FOR QOL CALC.
437	H80_E8R	Num	4		RECODED VALUE OF H80_E8 FOR QOL CALC.
438	H80_E11R	Num	4		RECODED VALUE OF H80_E11 FOR QOL CALC.
439	H80_E13R	Num	4		RECODED VALUE OF H80_E13 FOR QOL CALC.
440	H80_E3R	Num	4		RECODED VALUE OF H80_E3 FOR QOL CALC.
441	H80_E6R	Num	4		RECODED VALUE OF H80_E6 FOR QOL CALC.
442	H80_E21R	Num	4		RECODED VALUE OF H80_E21 FOR QOL CALC.
443	H80_E23R	Num	4		RECODED VALUE OF H80_E23 FOR QOL CALC.
444	H80_E27R	Num	4		RECODED VALUE OF H80_E27 FOR QOL CALC.
445	H80_E7R	Num	4		RECODED VALUE OF H80_E7 FOR QOL CALC.
446	H80_E9R	Num	4		RECODED VALUE OF H80_E9 FOR QOL CALC.
447	H80_E14R	Num	4		RECODED VALUE OF H80_E14 FOR QOL CALC.
448	H80_E10R	Num	4		RECODED VALUE OF H80_E10 FOR QOL CALC.
449	H80_E12R	Num	4		RECODED VALUE OF H80_E12 FOR QOL CALC.
450	H80_E15R	Num	4		RECODED VALUE OF H80_E15 FOR QOL CALC.
451	H80_E16R	Num	4		RECODED VALUE OF H80_E16 FOR QOL CALC.
452	H80_E19R	Num	4		RECODED VALUE OF H80_E19 FOR QOL CALC.
453	H80_E20R	Num	4		RECODED VALUE OF H80_E20 FOR QOL CALC.
454	H80_E24R	Num	4		RECODED VALUE OF H80_E24 FOR QOL CALC.
455	H80_E26R	Num	4		RECODED VALUE OF H80_E26 FOR QOL CALC.
456	H80_E18R	Num	4		RECODED VALUE OF H80_E18 FOR QOL CALC.
457	H80_E22R	Num	4		RECODED VALUE OF H80_E22 FOR QOL CALC.
458	H80_E25R	Num	4		RECODED VALUE OF H80_E25 FOR QOL CALC.
459	H80_E28R	Num	4		RECODED VALUE OF H80_E28 FOR QOL CALC.
460	H80_E29R	Num	4		RECODED VALUE OF H80_E29 FOR QOL CALC.
461	ILLEGAL_DRUGS	Num	8		Use of Marijuana, Speed, Heroin, MDMA, Phencyclidine, Anabolic Steroids, Glues/Solvents, or Cocaine
462	SUBJ_ID	Char	8		MHCS SUBJECT IDENTIFIER

Data Set Name: f81.sas7bdat

Num	Variable	Type	Len	Format	Informat	Label
1	ASCCODE	Num	4			Q15. ASCITES UNTREATED REASON SPEC. CODE
2	NEUROCD	Num	4			OTHER NEUROLOGICAL ABNORMALITIES CODE
3	VISITNUM	Num	4	1.		VISIT NUMBER
4	NoBM	Num	4	4.	4.	BASIC MEASUREMENTS NOT OBTAINED
5	feet	Num	4	2.	19.	Q1. FEET (HEIGHT)
6	inches	Num	4	3.	19.	Q1. INCHES (HEIGHT)
7	cms	Num	4	6.	19.	Q1. CENTIMETERS (HEIGHT)
8	pounds	Num	4	5.1	19.	Q2. WEIGHT IN POUNDS
9	kgs	Num	4	5.1	19.	Q2. WEIGHT IN KILOGRAMS
10	fahrenheit	Num	4	5.1		Q3. TEMPERATURE IN FAHRENHEIT
11	celsius	Num	4	5.1		Q3. TEMPERATURE IN CELSIUS
12	systolic	Num	4	6.	19.	Q4. BLOOD PRESSURE - SYSTOLIC
13	diastolic	Num	4	6.	19.	Q4. BLOOD PRESSURE - DIASTOLIC
14	blood	Num	4	1.	4.	Q5. URINALYSIS - BLOOD LEVEL
15	protein	Num	4	1.	4.	Q6. URINALYSIS - PROTEIN LEVEL
16	nitrite	Num	4	1.	4.	Q7. URINALYSIS - NITRITE LEVEL
17	a_acid	Num	4	1.	4.	Q8. URINALYSIS - ASCORBIC ACID LEVEL
18	glucose	Num	4	1.	4.	Q9. URINALYSIS - GLUCOSE LEVEL
19	ph	Num	4	1.	4.	Q10. URINALYSIS - pH LEVEL
20	hem_arth	Num	4	1.	4.	Q11. HEMOPHILIC ARTHROPATHY-NONE
21	HEMARTH1	Num	4	4.	4.	Q11. HAS JOINT REPLACEMENT
22	HEMARTH2	Num	4	4.	4.	Q11. JOINT AFFECTED NOW
23	HEMARTH3	Num	4	4.	4.	Q11. TWO OR MORE JOINTS
24	kar_perf	Num	4	1.	4.	Q12. KARNOFSKY PERFORMANCE
25	affected	Num	4	1.	4.	Q13. KAR PERF AFFECTED BY HEM ARTH
26	fatigue	Num	4	1.	4.	Q14. FATIGUE LEVEL
27	ascites	Num	4	1.	4.	Q15. ASCITES
28	hepatome	Num	4	1.	4.	Q16. HEPATOMEGALY
29	splenome	Num	4	1.	4.	Q17. SPLENOMEGALY
30	splnsize	Num	4	19.	19.	Q17. SPLEEN'S SIZE (IN CM.)
31	h_zoster	Num	4	1.	4.	Q18. HERPES ZOSTER (SHINGLES)
32	lym_none	Num	4	2.	4.	Q19. LYMPHADENOPATHY - NONE
33	lym_cerv	Num	4	1.	4.	Q19. LYMPHADENOPATHY - CERVICAL
34	cervsite	Num	4	2.	19.	Q19. CERVICAL LYMPH - # SITES
35	cervshot	Num	4	1.	4.	Q19. CERVICAL LYMPH - SHOTTY
36	lym_othe	Num	4	1.	4.	Q19. LYMPHADENOPATHY - OTHER

Num	Variable	Type	Len	Format	Informat	Label
37	lgstnode	Num	4	2.	19.	Q19a.DIAMETER OF LARGEST LYMPH NODE
38	nocond	Num	4	4.	4.	NOTHING CHECKED FOR Q.20
39	p_neurop	Num	4	1.	4.	Q20. PERIPHERAL NEUROPATHY
40	spider	Num	4	1.	4.	Q20. SPIDER ANGIOMATA
41	neuro_ab	Num	4	1.	4.	Q20. OTHER NEUROLOGICAL ABNORMAL
42	palmare	Num	4	1.	4.	Q20. PALMAR ERYTHEMA
43	wgt_loss	Num	4	1.	4.	Q20. UNEXPLAINED WEIGHT LOSS
44	edema	Num	4	1.	4.	Q20. LOWER EXTREMITY EDEMA
45	memory	Num	4	1.	4.	Q20. MEMORY OR CONCENTRATION PROBLEMS
46	depressn	Num	4	1.	4.	Q20. CHRONIC DEPRESSION
47	gynecom	Num	4	1.	4.	Q20. GYNECOMASTIA
48	arthralg	Num	4	1.	4.	Q20. ARTHRALGIAS/ARTHRITIS
49	nausea	Num	4	1.	4.	Q20. NAUSEA
50	tenderns	Num	4	1.	4.	Q20. RIGHT UP QUAD ABD/LIVER TENDERNESS
51	i_sclera	Num	4	1.	4.	Q20. ICTERIC SCLERA
52	jaundice	Num	4	1.	4.	Q20. JAUNDICE
53	atrophy	Num	4	1.	4.	Q20. TEMPORAL MUSCLE ATROPHY
54	visit_DT	Num	4	8.		FOLLOW UP PE VISIT DATE (SAS DATE): Converted to days since reference date
55	visit_DF	Num	4			FOLLOW UP PE VISIT DATE IMPUTE FLAG
56	SUBJ_ID	Char	8			MHCS SUBJECT IDENTIFIER

Data Set Name: f82.sas7bdat

Num	Variable	Type	Len	Format	Informat	Label
1	OLDHCV1	Num	4			Q16. OLD code assigned to other HCV
2	OLDHCV2	Num	4			Q16. OLD code assigned to other HCV
3	GENDEFCD	Num	4			Q4A. Code assigned to other genetic def.
4	q7bags	Num	4			Q7. # of bags
5	q7mls	Num	4			Q7. Total MLS
6	q21a_yr	Num	4			Q21A. Year of liver transplant
7	DRUGCD1A	Num	4			Q16A. Code for 2nd other standard int.
8	DRUGCD1B	Num	4			Q16A. Code for 2nd other ribavirin
9	DRUGCD2	Num	4			Q17. Code assigned to other brand used (
10	DRUGCD3	Num	4			Q18. Code assigned to other brand used (
11	DRUGCD4	Num	4			Q19. Code assigned to other brand used (
12	DRUGCD5	Num	4			Q19. Code assigned to other brand used (
13	Q1	Num	4	4.	4.	Q1. Subject status
14	Q1REASON	Num	4	4.	4.	Q1. Reason withdrew from study
15	Q1REASCD	Num	4	6.	6.	Q1. Reason withdrew -Other Sp. CODE
16	CNCRCD	Num	4	6.	6.	Q1B. Code assigned to other cancer
17	Q1c	Num	4	6.	6.	Q1C. Autopsy performed
18	Q1d	Num	4	6.	6.	Q1D. Liver Tissue obtained
19	Q1e1	Num	4	4.	4.	Q1E1. Source=death certificate
20	Q1e2	Num	4	4.	4.	Q1E2. Source=medical record
21	Q1e3	Num	4	4.	4.	Q1E3. Source=spouse or relative
22	Q1e4	Num	4	4.	4.	Q1E4. Source=non-relative
23	Q1e5	Num	4	4.	4.	Q1E5. Source=obituary
24	Q1e6	Num	4	4.	4.	Q1E6. Source=other
25	Q2a	Num	4	4.	4.	Q2A. After or same as date of enrollment
26	Q4	Num	4	4.	4.	Q4. Is hemophilia genetic defect correct
27	Q4a	Num	4	6.	6.	Q4A. What is hemophilia genetic defect?
28	Q5a	Num	4	4.	4.	Q5A. Clotting Factor Products-None
29	Q5b	Num	4	4.	4.	Q5B. Clotting Factor Products-Recombin.
30	Q5c	Num	4	4.	4.	Q5C. Clotting Factor Products-Monoclonal
31	Q5d	Num	4	4.	4.	Q5D. Clotting Factor Products-High Pur
32	Q5e	Num	4	4.	4.	Q5E. Clotting Factor Products-Int Purity
33	Q5f	Num	4	4.	4.	Q5F. Clotting Factor Products-Cryoprecip
34	Q5g	Num	4	4.	4.	Q5G. Other Blood Components
35	Q6_none	Num	4	4.	4.	Q6. No factor concentrate was received
36	Q6_unit	Num	4	4.	4.	Q6. Units of factor concentrate KNOWN

Num	Variable	Type	Len	Format	Informat	Label
37	Q6_mg	Num	4	4.	4.	Q6. Micrograms of factor concentrate
38	Q6_unk	Num	4	4.	4.	Q6. UNKNOWN amount of factor concentrate
39	Q6_units	Num	4	19.	19.	Q6. Number of units factor concentrate
40	Q6_micro	Num	4	19.	19.	Q6. No. of micrograms of factor conc.
41	Q6a	Num	4	4.	4.	Q6A. Basis factor was administered
42	Q7	Num	4	6.	6.	Q7. How many units of cryo did sub rec
43	Q8	Char	3	\$3.	\$3.	Q8. HBV vaccine since 2nd Follow-Up vis?
44	Q9	Num	4	4.	4.	Q9. Is HBV chron carrier stat accurate?
45	Q9a	Num	4	6.	6.	Q9A. HBV chronic carrier stat of subj
46	Q10	Num	4	6.	6.	Q10. Vaccinated for hep A since 1st FU
47	Q10_mo	Num	4	6.	6.	Q10. Month of last Hep A vaccination
48	Q10_yr	Num	4	6.	6.	Q10. Year of last Hep A vaccination
49	Q11	Num	4	6.	6.	Q11. Current HCV antibody status
50	Q12	Num	4	6.	6.	Q12. HIV status
51	Q13	Num	4	6.	6.	Q13. AIDS-defining condition
52	Q13a1	Num	4	4.	4.	Q13A1. CD4 <200 cells/ul or <14%
53	Q13A1MO	Num	4	6.	6.	Q13A1. CD4 <200 cells/ul or <14% month o
54	Q13A1YR	Num	4	11.	11.	Q13A1. CD4 <200 cells/ul or <14% year of
55	Q13a2	Num	4	4.	4.	Q13A2. CMV (not liver, spleen, lymph)
56	Q13A2MO	Num	4	6.	6.	Q13A2. CMV (not liver, spleen, lymph) mo
57	Q13A2YR	Num	4	11.	11.	Q13A2. CMV (not liver, spleen, lymph) ye
58	Q13a3	Num	4	4.	4.	Q13A3. Candidiasis of esophagus or lungs
59	Q13A3MO	Num	4	6.	6.	Q13A3. Candidiasis of esophagus or lungs
60	Q13A3YR	Num	4	11.	11.	Q13A3. Candidiasis of esophagus or lungs
61	Q13a4	Num	4	4.	4.	Q13A4. Cervical cancer, invasive
62	Q13A4MO	Num	4	6.	6.	Q13A4. Cervical cancer, invasive month o
63	Q13A4YR	Num	4	11.	11.	Q13A4. Cervical cancer, invasive year of
64	Q13a5	Num	4	4.	4.	Q13A5. Coccidioidmycosis, extrapulmonary
65	Q13A5MO	Num	4	6.	6.	Q13A5. Coccidioidmycosis, extrapulmonary
66	Q13A5YR	Num	4	11.	11.	Q13A5. Coccidioidmycosis, extrapulmonary
67	Q13a6	Num	4	4.	4.	Q13A6. Cryptococcosis, extrapulmonary
68	Q13A6MO	Num	4	6.	6.	Q13A6. Cryptococcosis, extrapulmonary mo
69	Q13A6YR	Num	4	11.	11.	Q13A6. Cryptococcosis, extrapulmonary ye
70	Q13a7	Num	4	4.	4.	Q13A7. Cryptosporidiosis with diarrhea f
71	Q13A7MO	Num	4	6.	6.	Q13A7. Cryptosporidiosis with diarrhea f
72	Q13A7YR	Num	4	11.	11.	Q13A7. Cryptosporidiosis with diarrhea f
73	Q13a8	Num	4	4.	4.	Q13A8. Herpes simplex, ulcer for > 1 mon
74	Q13A8MO	Num	4	6.	6.	Q13A8. Herpes simplex, ulcer for > 1 mon
75	Q13A8YR	Num	4	11.	11.	Q13A8. Herpes simplex, ulcer for > 1 mon

Num	Variable	Type	Len	Format	Informat	Label
76	Q13a9	Num	4	4.	4.	Q13A9. Herpes simplex in lungs or esopha
77	Q13A9MO	Num	4	6.	6.	Q13A9. Herpes simplex in lungs or esopha
78	Q13A9YR	Num	4	11.	11.	Q13A9. Herpes simplex in lungs or esopha
79	Q13a10	Num	4	4.	4.	Q13A10. Histoplasmosis, extrapulmonary
80	Q13A10MO	Num	4	6.	6.	Q13A10. Histoplasmosis, extrapulmonary m
81	Q13A10YR	Num	4	11.	11.	Q13A10. Histoplasmosis, extrapulmonary y
82	Q13a11	Num	4	4.	4.	Q13A11. HIV encephalopathy/dementia
83	Q13A11MO	Num	4	6.	6.	Q13A11. HIV encephalopathy/dementia mont
84	Q13A11YR	Num	4	11.	11.	Q13A11. HIV encephalopathy/dementia year
85	Q13a12	Num	4	4.	4.	Q13A12. Isosporiasis with diarrhea for >
86	Q13A12MO	Num	4	6.	6.	Q13A12. Isosporiasis with diarrhea for >
87	Q13A12YR	Num	4	11.	11.	Q13A12. Isosporiasis with diarrhea for >
88	Q13a13	Num	4	4.	4.	Q13A13. Kaposi's syndrome
89	Q13A13MO	Num	4	6.	6.	Q13A13. Kaposi's syndrome month of diag
90	Q13A13YR	Num	4	11.	11.	Q13A13. Kaposi's syndrome year of diagn
91	Q13a14	Num	4	4.	4.	Q13A14. Lymphoid interstitial pneumonia
92	Q13A14MO	Num	4	6.	6.	Q13A14. Lymphoid interstitial pn(LIP) or
93	Q13A14YR	Num	4	11.	11.	Q13A14. Lymphoid interstitial pneumonia
94	Q13a15	Num	4	4.	4.	Q13A15. Lymphoma of the brain (CNS Prima
95	Q13A15MO	Num	4	6.	6.	Q13A15. Lymphoma of the brain (CNS Prima
96	Q13A15YR	Num	4	11.	11.	Q13A15. Lymphoma of the brain (CNS Prima
97	Q13a16	Num	4	4.	4.	Q13A16. Mycobacterium avium (not only lu
98	Q13A16MO	Num	4	6.	6.	Q13A16. Mycobacterium avium (not only lu
99	Q13A16YR	Num	4	11.	11.	Q13A16. Mycobacterium avium (not only lu
100	Q13a17	Num	4	4.	4.	Q13A17. Non-Hodgkin's Lymphoma (not T-c
101	Q13A17MO	Num	4	6.	6.	Q13A17. Non-Hodgkin's Lymphoma (not T-c
102	Q13A17YR	Num	4	11.	11.	Q13A17. Non-Hodgkin's Lymphoma (not T-c
103	Q13a18	Num	4	4.	4.	Q13A18. Pneumocystis carinii pneumonia (
104	Q13A18MO	Num	4	6.	6.	Q13A18. Pneumocystis carinii pneumonia (
105	Q13A18YR	Num	4	11.	11.	Q13A18. Pneumocystis carinii pneumonia (
106	Q13a19	Num	4	4.	4.	Q13A19. Pneumonia, recurrent bacterial (
107	Q13A19MO	Num	4	6.	6.	Q13A19. Pneumonia, recurrent bacterial (
108	Q13A19YR	Num	4	11.	11.	Q13A19. Pneumonia, recurrent bacterial (
109	Q13a20	Num	4	4.	4.	Q13A20. Progressive multifocal leukoence
110	Q13A20MO	Num	4	6.	6.	Q13A20. Progressive multifocal leukoence
111	Q13A20YR	Num	4	11.	11.	Q13A20. Progressive multifocal leukoence
112	Q13a21	Num	4	4.	4.	Q13A21. Pulmonary tuberculosis
113	Q13A21MO	Num	4	6.	6.	Q13A21. Pulmonary tuberculosis month of
114	Q13A21YR	Num	4	11.	11.	Q13A21. Pulmonary tuberculosis year of d

Num	Variable	Type	Len	Format	Informat	Label
115	Q13a22	Num	4	4.	4.	Q13A22. Salmonella septicemia, recurrent
116	Q13A22MO	Num	4	6.	6.	Q13A22. Salmonella septicemia, recurrent
117	Q13A22YR	Num	4	11.	11.	Q13A22. Salmonella septicemia, recurrent
118	Q13a23	Num	4	4.	4.	Q13A23. Toxoplasmosis of the brain
119	Q13A23MO	Num	4	6.	6.	Q13A23. Toxoplasmosis of the brain month
120	Q13A23YR	Num	4	11.	11.	Q13A23. Toxoplasmosis of the brain year
121	Q13a24	Num	4	4.	4.	Q13A24. Wasting syndrome (emaciation,"sl
122	Q13A24MO	Num	4	6.	6.	Q13A24. Wasting syndrome (emaciation,"sl
123	Q13A24YR	Num	4	11.	11.	Q13A24. Wasting syndrome (emaciation,"sl
124	Q13a25	Num	4	4.	4.	Q13A25. Other multiple of recurrent bact
125	Q13A25MO	Num	4	6.	6.	Q13A25. Other multiple of recurrent bact
126	Q13A25YR	Num	4	11.	11.	Q13A25. Other multiple of recurrent bact
127	Q14a	Num	4	4.	4.	Q14A. HCV related conditions-None
128	Q14b	Num	4	4.	4.	Q14B. Jaundice, persistent > 1 month
129	Q14b_mo	Num	4	6.	6.	Q14B. Jaundice, persistent > 1 month mon
130	Q14b_yr	Num	4	11.	11.	Q14B. Jaundice, persistent > 1 year year
131	Q14c	Num	4	4.	4.	Q14C. Ascites (hepatic-related)
132	Q14c_mo	Num	4	6.	6.	Q14C. Ascites (hepatic-related) month of
133	Q14c_yr	Num	4	11.	11.	Q14C. Ascites (hepatic-related) year of
134	Q14e	Num	4	4.	4.	Q14E. Esophageal varices
135	Q14e_mo	Num	4	6.	6.	Q14E. Esophageal varices month of diagno
136	Q14e_yr	Num	4	11.	11.	Q14E. Esophageal varices year of diagnos
137	Q14f	Num	4	4.	4.	Q14F. Bleeding esophageal varices
138	Q14f_mo	Num	4	6.	6.	Q14F. Bleeding esophageal varices month
139	Q14f_yr	Num	4	11.	11.	Q14F. Bleeding esophageal varices year o
140	Q14l	Num	4	4.	4.	Q14L. Biopsy proven Cirrhosis
141	Q14l_mo	Num	4	6.	6.	Q14L. Biopsy proven Cirrhosis month of d
142	Q14l_yr	Num	4	11.	11.	Q14L. Biopsy proven Cirrhosis year of di
143	HCVCCode1	Num	4	6.	6.	Q14. Code assigned to other HCV related
144	HCVCCode2	Num	4	6.	6.	Q14. Code assigned to other HCV related
145	Q15	Num	4	6.	6.	Q15. Did subject receive HCV treatment
146	Q16	Num	4	4.	4.	Q16. Was the subject treated at the same
147	Q16a1	Num	4	6.	6.	Q16A. Rebetron (standard interferon & ri
148	Q16a2	Num	4	6.	6.	Q16A. Other standard interferon
149	Q16a3	Num	4	4.	4.	Q16A. Other ribarivin
150	Q16b_mo	Num	4	6.	6.	Q16B. Month use began
151	Q16b_yr	Num	4	11.	11.	Q16B. Year use began
152	Q16c	Num	4	6.	6.	Q16C. Is subject currently using it?
153	Q16d	Num	4	6.	6.	Q16D. Why is the subject no longer using

Num	Variable	Type	Len	Format	Informat	Label
154	Q17	Num	4	4.	4.	Q17. Was the subject treated with standa
155	Q17a	Num	4	4.	4.	Q17A. Brand used
156	Q17b_mo	Num	4	6.	6.	Q17B. Month use began
157	Q17b_yr	Num	4	11.	11.	Q17B. Year use began
158	Q17c	Num	4	4.	4.	Q17C. Is subject currently using it?
159	Q17d	Num	4	4.	4.	Q17D. Why is the subject no longer using
160	Q18	Num	4	4.	4.	Q18. Was the subject treated at the same
161	Q18a1	Num	4	4.	4.	Q18A. Brand used: PEG-Intron
162	Q18a2	Num	4	4.	4.	Q18A. Brand used: Pegasys
163	Q18a3	Num	4	4.	4.	Q18A. Brand used: Rebetol
164	Q18a4	Num	4	4.	4.	Q18A. Brand used: Virazole
165	Q18a5	Num	4	4.	4.	Q18A. Brand used: Other
166	Q18a6	Num	8	4.	4.	Q18a6
167	Q18b_mo	Num	4	6.	6.	Q18B. Month use began
168	Q18b_yr	Num	4	11.	11.	Q18B. Year use began
169	Q18c	Num	4	4.	4.	Q18C. Is subject currently using it?
170	Q18d	Num	4	4.	4.	Q18D. Why is the subject no longer using
171	Q19	Num	4	4.	4.	Q19. Was the subject treated with pegyla
172	Q19a	Num	4	6.	6.	Q19A. Brand used
173	Q19b_mo	Num	4	6.	6.	Q19B. Month use began
174	Q19b_yr	Num	4	11.	11.	Q19B. Year use began
175	Q19c	Num	4	6.	6.	Q19C. Is subject currently using it?
176	Q19d	Num	4	6.	6.	Q19D. Why is the subject no longer using
177	Q20	Num	4	4.	4.	Q20. Since 2nd FU, had liver biopsy ?
178	Q20a	Num	4	4.	4.	Q20A. reason for the liver biopsy
179	BIOPSYCD	Num	4	6.	6.	Q20A. Other reason for liver biopsy code
180	Q21	Num	4	6.	6.	Q21. Since 2nd FU, cons. for liver trans
181	Q21a	Num	4	4.	4.	Q21A. Has the subject received a liver t
182	Q21a_mo	Num	4	6.	6.	Q21A. Month of liver transplant
183	Q22	Num	4	4.	4.	Q22. Subject been diagnosed with cancer
184	Q22ASCD1	Num	4	11.	11.	Q22A. Cancer #1-PRIMARY SITE CODE
185	Q22AHCD1	Num	4	11.	11.	Q22A. Cancer #1-HISTOLOGIC SUBTYPE CODE
186	Q22ATCD1	Num	4	11.	11.	Q22A. Cancer #1-TYPE CODE
187	Q22a_loc	Num	4	6.	6.	Q22A. Cancer #1-Is this cancer localized
188	Q22a_mo	Num	4	6.	6.	Q22A. Cancer #1-Month of diagnosis
189	Q22a_yr	Num	4	11.	11.	Q22A. Cancer #1-Year of diagnosis
190	Q22ADIAG	Num	4	4.	4.	Q22A. Cancer #1-Where cancer diagnosed
191	Q22BSCD2	Num	4	11.	11.	Q22B. Cancer #2-PRIMARY SITE CODE
192	Q22BHCD2	Num	4	11.	11.	Q22B. Cancer #2-HISTOLOGIC SUBTYPE CODE

Num	Variable	Type	Len	Format	Informat	Label
193	Q22BTCD2	Num	4	11.	11.	Q22B. Cancer #2-TYPE CODE
194	Q22b_loc	Num	4	6.	6.	Q22B. Cancer #2-Is this cancer localized
195	Q22b_mo	Num	4	6.	6.	Q22B. Cancer #2-Month of diagnosis
196	Q22b_yr	Num	4	11.	11.	Q22B. Cancer #2-Year of diagnosis
197	Q22BDIAG	Num	4	4.	4.	Q22B. Cancer #2-Where cancer diagnosed
198	Q23a	Num	4	4.	4.	Q23A. NO GI BLEED, ETC. SINCE 2nd FU
199	Q23b	Num	4	4.	4.	Q23B. YES-GI BLEED SINCE 2nd FU visit
200	Q23c	Num	4	4.	4.	Q23C. YES-GASTROINT. PERF. 2nd FU visit
201	Q23d	Num	4	4.	4.	Q23D. YES-GASTROINT. OBST. SINCE 2nd FU
202	Q23e	Num	4	6.	6.	Q23E. UNKNOWN-GI BLEED,ETC. SINCE 2nd FU
203	Q23a2	Num	4	4.	4.	Q23A. Have you sent in an Upper GI Suppl
204	DEATH_DT	Num	4	8.		DATE OF DEATH (SAS DATE): Converted to days since reference date
205	DEATH_DF	Num	4			DATE OF DEATH IMPUTE FLAG
206	CVIS_DT	Num	4	8.		DATE MOST RECENT CLINIC VISIT (SAS DATE): Converted to days since reference date
207	CVIS_DF	Num	4			DATE MOST REC. CLINIC VISIT IMPUTE FLAG
208	FUVIS_DT	Num	4	8.		DATE OF 3rd FOLLOW UP (SAS DATE): Converted to days since reference date
209	FUVIS_DF	Num	4			DATE 3rd FOLLOW UP IMPUTE FLAG
210	FORM_DT	Num	4	8.		DATE FORM COMPLETED (SAS DATE): Converted to days since reference date
211	FORM_DF	Num	4			DATE FORM COMPLETED IMPUTE FLAG
212	BLEED_DT	Num	4	8.		Q23B. DATE THE BLEED OCCURRED (SAS DATE): Converted to days since reference date
213	BLEED_DF	Num	4			Q23B. DATE BLEED OCCURRED IMPUTE FLAG
214	readydate	Num	8			
215	SUBJ_ID	Char	8			MHCS SUBJECT IDENTIFIER

Data Set Name: f90.sas7bdat

Num	Variable	Type	Len	Format	Label
1	FORM	Num	4		Form Number
2	H90VISIT	Num	4		VISIT NUMBER
3	H90_A1	Num	4		NOT HIV POSITIVE
4	H90_A1N	Num	4		HAVE YOU USED ANY HIV RELATED MEDS
5	H90_221	Num	4		HIV MEDS: ABACAVIR
6	H90221FM	Num	4		MONTH FIRST USED ABACAVIR
7	H90221FY	Num	4		YEAR FIRST USED ABACAVIR
8	H90221LM	Num	4		MONTH LAST USED ABACAVIR
9	H90221LY	Num	4		YEAR LAST USED ABACAVIR
10	H90221_1	Num	4		REASON STOPPED ABACAVIR-SIDE EFFECT
11	H90221_2	Num	4		REASON STOPPED ABACAVIR-WASN'T WORKING
12	H90221_3	Num	4		REASON STOPPED ABACAVIR-CHANGED TO NEW R
13	H90221_4	Num	4		REASON STOPPED ABACAVIR-PLANNED INTERRUPT
14	H90221_5	Num	4		REASON STOPPED ABACAVIR-NO INSURANCE
15	H90221_6	Num	4		REASON STOPPED ABACAVIR-OTHER REASON
16	H90221_S	Num	4		REASON STOPPED ABACAVIR-SPECIFY REASON
17	H90_222	Num	4		HIV MEDS: AMPRENAVIR
18	H90222FM	Num	4		MONTH FIRST USED AMPRENAVIR
19	H90222FY	Num	4		YEAR FIRST USED AMPRENAVIR
20	H90222LM	Num	4		MONTH LAST USED AMPRENAVIR
21	H90222LY	Num	4		YEAR LAST USED AMPRENAVIR
22	H90222_1	Num	4		REASON STOPPED AMPRENAVIR-SIDE EFFECT
23	H90222_2	Num	4		REASON STOPPED AMPRENAVIR-WASN'T WORKING
24	H90222_3	Num	4		REASON STOPPED AMPRENAVIR-CHANGED TO NEW
25	H90222_4	Num	4		REASON STOPPED AMPRENAVIR-PLANNED INTERRUPT
26	H90222_5	Num	4		REASON STOPPED AMPRENAVIR-NO INSURANCE
27	H90222_6	Num	4		REASON STOPPED AMPRENAVIR-OTHER REASON
28	H90222_S	Num	4		REASON STOPPED AMPRENAVIR-SPECIFY REASON
29	H90_223	Num	4		HIV MEDS: COMBIVIR
30	H90223FM	Num	4		MONTH FIRST USED COMBIVIR
31	H90223FY	Num	4		YEAR FIRST USED COMBIVIR
32	H90223LM	Num	4		MONTH LAST USED COMBIVIR
33	H90223LY	Num	4		YEAR LAST USED COMBIVIR
34	H90223_1	Num	4		REASON STOPPED COMBIVIR-SIDE EFFECT
35	H90223_2	Num	4		REASON STOPPED COMBIVIR-WASN'T WORKING
36	H90223_3	Num	4		REASON STOPPED COMBIVIR-CHANGED TO NEW R

Num	Variable	Type	Len	Format	Label
37	H90223_4	Num	4		REASON STOPPED COMBIVIR-PLANNED INTERRUPT
38	H90223_5	Num	4		REASON STOPPED COMBIVIR-NO INSURANCE
39	H90223_6	Num	4		REASON STOPPED COMBIVIR-OTHER REASON
40	H90223_S	Num	4		REASON STOPPED COMBIVIR-SPECIFY REASON
41	H90_224	Num	4		HIV MEDS: DELAVIRDINE
42	H90224FM	Num	4		MONTH FIRST USED DELAVIRDINE
43	H90224FY	Num	4		YEAR FIRST USED DELAVIRDINE
44	H90224LM	Num	4		MONTH LAST USED DELAVIRDINE
45	H90224LY	Num	4		YEAR LAST USED DELAVIRDINE
46	H90224_1	Num	4		REASON STOPPED DELAVIRDINE -SIDE EFFECT
47	H90224_2	Num	4		REASON STOPPED DELAVIRDINE -WASN'T WORKI
48	H90224_3	Num	4		REASON STOPPED DELAVIRDINE -CHANGED TO N
49	H90224_4	Num	4		REASON STOPPED DELAVIRDINE -PLANNED INTE
50	H90224_5	Num	4		REASON STOPPED DELAVIRDINE -NO INSURANCE
51	H90224_6	Num	4		REASON STOPPED DELAVIRDINE -OTHER REASON
52	H90224_S	Num	4		REASON STOPPED DELAVIRDINE -SPECIFY REAS
53	H90_225	Num	4		HIV MEDS: DIDANOSINE
54	H90225FM	Num	4		MONTH FIRST USED DIDANOSINE
55	H90225FY	Num	4		YEAR FIRST USED DIDANOSINE
56	H90225LM	Num	4		MONTH LAST USED DIDANOSINE
57	H90225LY	Num	4		YEAR LAST USED DIDANOSINE
58	H90225_1	Num	4		REASON STOPPED DIDANOSINE-SIDE EFFECT
59	H90225_2	Num	4		REASON STOPPED DIDANOSINE-WASN'T WORKING
60	H90225_3	Num	4		REASON STOPPED DIDANOSINE-CHANGED TO NEW
61	H90225_4	Num	4		REASON STOPPED DIDANOSINE-PLANNED INTERR
62	H90225_5	Num	4		REASON STOPPED DIDANOSINE-NO INSURANCE
63	H90225_6	Num	4		REASON STOPPED DIDANOSINE-OTHER REASON
64	H90225_S	Num	4		REASON STOPPED DIDANOSINE-SPECIFY REASON
65	H90_226	Num	4		HIV MEDS: EFAVIRENZ
66	H90226FM	Num	4		MONTH FIRST USED EFAVIRENZ
67	H90226FY	Num	4		YEAR FIRST USED EFAVIRENA
68	H90226LM	Num	4		MONTH LAST USED EFAVIRENA
69	H90226LY	Num	4		YEAR LAST USED EFAVIRENA
70	H90226_1	Num	4		REASON STOPPED EFAVIRENA-SIDE EFFECT
71	H90226_2	Num	4		REASON STOPPED EFAVIRENA-WASN'T WORKING
72	H90226_3	Num	4		REASON STOPPED EFAVIRENA-CHANGED TO NEW
73	H90226_4	Num	4		REASON STOPPED EFAVIRENA-PLANNED INTERRU
74	H90226_5	Num	4		REASON STOPPED EFAVIRENA-NO INSURANCE
75	H90226_6	Num	4		REASON STOPPED EFAVIRENA-OTHER REASON

Num	Variable	Type	Len	Format	Label
76	H90226_S	Num	4		REASON STOPPED EFAVIRENA-SPECIFY REASON
77	H90_227	Num	4		HIV MEDS: HYDROXYUREA
78	H90227FM	Num	4		MONTH FIRST USED HYDROXYUREA
79	H90227FY	Num	4		YEAR FIRST USED HYDROXYUREA
80	H90227LM	Num	4		MONTH LAST USED HYDROXYUREA
81	H90227LY	Num	4		YEAR LAST USED HYDROXYUREA
82	H90227_1	Num	4		REASON STOPPED HYDROXYUREA -SIDE EFFECT
83	H90227_2	Num	4		REASON STOPPED HYDROXYUREA -WASN'T WORKI
84	H90227_3	Num	4		REASON STOPPED HYDROXYUREA -CHANGED TO N
85	H90227_4	Num	4		REASON STOPPED HYDROXYUREA -PLANNED INTE
86	H90227_5	Num	4		REASON STOPPED HYDROXYUREA -NO INSURANCE
87	H90227_6	Num	4		REASON STOPPED HYDROXYUREA -OTHER REASON
88	H90227_S	Num	4		REASON STOPPED HYDROXYUREA -SPECIFY REAS
89	H90_228	Num	4		HIV MEDS: INDINAVIR
90	H90228FM	Num	4		MONTH FIRST USED INDINAVIR
91	H90228FY	Num	4		YEAR FIRST USED INDINAVIR
92	H90228LM	Num	4		MONTH LAST USED INDINAVIR
93	H90228LY	Num	4		YEAR LAST USED INDINAVIR
94	H90228_1	Num	4		REASON STOPPED INDINAVIR-SIDE EFFECT
95	H90228_2	Num	4		REASON STOPPED INDINAVIR-WASN'T WORKING
96	H90228_3	Num	4		REASON STOPPED INDINAVIR-CHANGED TO NEW
97	H90228_4	Num	4		REASON STOPPED INDINAVIR-PLANNED INTERRU
98	H90228_5	Num	4		REASON STOPPED INDINAVIR-NO INSURANCE
99	H90228_6	Num	4		REASON STOPPED INDINAVIR-OTHER REASON
100	H90228_S	Num	4		REASON STOPPED INDINAVIR-SPECIFY REASON
101	H90_229	Num	4		HIV MEDS: LOPINAVIR/RITONAVIR
102	H90229FM	Num	4		MONTH FIRST USED LOPINAVIR/RITONAVIR
103	H90229FY	Num	4		YEAR FIRST USED LOPINAVIR/RITONAVIR
104	H90229LM	Num	4		MONTH LAST USED LOPINAVIR/RITONAVIR
105	H90229LY	Num	4		YEAR LAST USED LOPINAVIR/RITONAVIR
106	H90229_1	Num	4		REASON STOPPED LOPINAVIR/RITONAVIR-SIDE
107	H90229_2	Num	4		REASON STOPPED LOPINAVIR/RITONAVIR-WASN'
108	H90229_3	Num	4		RSN STPD LOPINAVIR/RITONAVIR-CGN TO NEW
109	H90229_4	Num	4		RSN STPD LOPINAVIR/RITONAVIR-PLANNED INT
110	H90229_5	Num	4		REASON STOPPED LOPINAVIR/RITONAVIR-NO IN
111	H90229_6	Num	4		REASON STOPPED LOPINAVIR/RITONAVIR-OTHER
112	H90229_S	Num	4		REASON STOPPED LOPINAVIR/RITONAVIR-SPECI
113	H90_230	Num	4		HIV MEDS: LAMIVUDINE
114	H90230FM	Num	4		MONTH FIRST USED LAMIVUDINE

Num	Variable	Type	Len	Format	Label
115	H90230FY	Num	4		YEAR FIRST USED LAMIVUDINE
116	H90230LM	Num	4		MONTH LAST USED LAMIVUDINE
117	H90230LY	Num	4		YEAR LAST USED LAMIVUDINE
118	H90230_1	Num	4		REASON STOPPED LAMIVUDINE-SIDE EFFECT
119	H90230_2	Num	4		REASON STOPPED LAMIVUDINE-WASN'T WORKING
120	H90230_3	Num	4		REASON STOPPED LAMIVUDINE-CHANGED TO NEW
121	H90230_4	Num	4		RSN STPD LAMIVUDINE-PLANNED INTERRUPTION
122	H90230_5	Num	4		REASON STOPPED LAMIVUDINE-NO INSURANCE
123	H90230_6	Num	4		REASON STOPPED LAMIVUDINE-OTHER REASON
124	H90230_S	Num	4		REASON STOPPED LAMIVUDINE-SPECIFY REASON
125	H90_231	Num	4		HIV MEDS: NELFINAVIR
126	H90231FM	Num	4		MONTH FIRST USED NELFINAVIR
127	H90231FY	Num	4		YEAR FIRST USED NELFINAVIR
128	H90231LM	Num	4		MONTH LAST USED NELFINAVIR
129	H90231LY	Num	4		YEAR LAST USED NELFINAVIR
130	H90231_1	Num	4		REASON STOPPED NELFINAVIR-SIDE EFFECT
131	H90231_2	Num	4		REASON STOPPED NELFINAVIR-WASN'T WORKING
132	H90231_3	Num	4		REASON STOPPED NELFINAVIR-CHANGED TO NEW
133	H90231_4	Num	4		REASON STOPPED NELFINAVIR-PLANNED INTERR
134	H90231_5	Num	4		REASON STOPPED NELFINAVIR-NO INSURANCE
135	H90231_6	Num	4		REASON STOPPED NELFINAVIR-OTHER REASON
136	H90231_S	Num	4		REASON STOPPED NELFINAVIR-SPECIFY REASON
137	H90_232	Num	4		HIV MEDS: NEVIRAPINE
138	H90232FM	Num	4		MONTH FIRST USED NEVIRAPINE
139	H90232FY	Num	4		YEAR FIRST USED NEVIRAPINE
140	H90232LM	Num	4		MONTH LAST USED NEVIRAPINE
141	H90232LY	Num	4		YEAR LAST USED NEVIRAPINE
142	H90232_1	Num	4		REASON STOPPED NEVIRAPINE-SIDE EFFECT
143	H90232_2	Num	4		REASON STOPPED NEVIRAPINE-WASN'T WORKING
144	H90232_3	Num	4		REASON STOPPED NEVIRAPINE-CHANGED TO NEW
145	H90232_4	Num	4		REASON STOPPED NEVIRAPINE-PLANNED INTERR
146	H90232_5	Num	4		REASON STOPPED NEVIRAPINE-NO INSURANCE
147	H90232_6	Num	4		REASON STOPPED NEVIRAPINE-OTHER REASON
148	H90232_S	Num	4		REASON STOPPED NEVIRAPINE-SPECIFY REASON
149	H90_233	Num	4		HIV MEDS: RITONAVIR
150	H90233FM	Num	4		MONTH FIRST USED RITONAVIR
151	H90233FY	Num	4		YEAR FIRST USED RITONAVIR
152	H90233LM	Num	4		MONTH LAST USED RITONAVIR
153	H90233LY	Num	4		YEAR LAST USED RITONAVIR

Num	Variable	Type	Len	Format	Label
154	H90233_1	Num	4		REASON STOPPED RITONAVIR-SIDE EFFECT
155	H90233_2	Num	4		REASON STOPPED RITONAVIR-WASN'T WORKING
156	H90233_3	Num	4		REASON STOPPED RITONAVIR-CHANGED TO NEW
157	H90233_4	Num	4		REASON STOPPED RITONAVIR-PLANNED INTERRU
158	H90233_5	Num	4		REASON STOPPED RITONAVIR-NO INSURANCE
159	H90233_6	Num	4		REASON STOPPED RITONAVIR-OTHER REASON
160	H90233_S	Num	4		REASON STOPPED RITONAVIR-SPECIFY REASON
161	H90_234	Num	4		HIV MEDS: SAQUINAVIR
162	H90234FM	Num	4		MONTH FIRST USED SAQUINAVIR
163	H90234FY	Num	4		YEAR FIRST USED SAQUINAVIR
164	H90234LM	Num	4		MONTH LAST USED SAQUINAVIR
165	H90234LY	Num	4		YEAR LAST USED SAQUINAVIR
166	H90234_1	Num	4		REASON STOPPED SAQUINAVIR-SIDE EFFECT
167	H90234_2	Num	4		REASON STOPPED SAQUINAVIR-WASN'T WORKING
168	H90234_3	Num	4		REASON STOPPED SAQUINAVIR-CHANGED TO NEW
169	H90234_4	Num	4		REASON STOPPED SAQUINAVIR-PLANNED INTERRU
170	H90234_5	Num	4		REASON STOPPED SAQUINAVIR-NO INSURANCE
171	H90234_6	Num	4		REASON STOPPED SAQUINAVIR-OTHER REASON
172	H90234_S	Num	4		REASON STOPPED SAQUINAVIR-SPECIFY REASON
173	H90_235	Num	4		HIV MEDS: STAVUDINE
174	H90235FM	Num	4		MONTH FIRST USED STAVUDINE
175	H90235FY	Num	4		YEAR FIRST USED STAVUDINE
176	H90235LM	Num	4		MONTH LAST USED STAVUDINE
177	H90235LY	Num	4		YEAR LAST USED STAVUDINE
178	H90235_1	Num	4		REASON STOPPED STAVUDINE -SIDE EFFECT
179	H90235_2	Num	4		REASON STOPPED STAVUDINE -WASN'T WORKING
180	H90235_3	Num	4		REASON STOPPED STAVUDINE -CHANGED TO NEW
181	H90235_4	Num	4		REASON STOPPED STAVUDINE -PLANNED INTERRU
182	H90235_5	Num	4		REASON STOPPED STAVUDINE -NO INSURANCE
183	H90235_6	Num	4		REASON STOPPED STAVUDINE -OTHER REASON
184	H90235_S	Num	4		REASON STOPPED STAVUDINE -SPECIFY REASON
185	H90_109	Num	4		HIV MEDS: TENOFOVIR
186	H90109FM	Num	4		MONTH FIRST USED TENOFOVIR
187	H90109FY	Num	4		YEAR FIRST USED TENOFOVIR
188	H90109LM	Num	4		MONTH LAST USED TENOFOVIR
189	H90109LY	Num	4		YEAR LAST USED TENOFOVIR
190	H90109_1	Num	4		REASON STOPPED TENOFOVIR -SIDE EFFECT
191	H90109_2	Num	4		REASON STOPPED TENOFOVIR -WASN'T WORKING
192	H90109_3	Num	4		REASON STOPPED TENOFOVIR -CHANGED TO NEW

Num	Variable	Type	Len	Format	Label
193	H90109_4	Num	4		REASON STOPPED TENOFOVIR -PLANNED INTERR
194	H90109_5	Num	4		REASON STOPPED TENOFOVIR -NO INSURANCE
195	H90109_6	Num	4		REASON STOPPED TENOFOVIR -OTHER REASON
196	H90109_S	Num	4		REASON STOPPED TENOFOVIR -SPECIFY REASON
197	H90_236	Num	4		HIV MEDS: TRIZAVIR
198	H90236FM	Num	4		MONTH FIRST USED TRIZAVIR
199	H90236FY	Num	4		YEAR FIRST USED TRIZAVIR
200	H90236LM	Num	4		MONTH LAST USED TRIZAVIR
201	H90236LY	Num	4		YEAR LAST USED TRIZAVIR
202	H90236_1	Num	4		REASON STOPPED TRIZAVIR-SIDE EFFECT
203	H90236_2	Num	4		REASON STOPPED TRIZAVIR-WASN'T WORKING
204	H90236_3	Num	4		REASON STOPPED TRIZAVIR-CHANGED TO NEW R
205	H90236_4	Num	4		REASON STOPPED TRIZAVIR-PLANNED INTERRUPT
206	H90236_5	Num	4		REASON STOPPED TRIZAVIR-NO INSURANCE
207	H90236_6	Num	4		REASON STOPPED TRIZAVIR-OTHER REASON
208	H90236_S	Num	4		REASON STOPPED TRIZAVIR-SPECIFY REASON
209	H90_237	Num	4		HIV MEDS: ZALCITABINE
210	H90237FM	Num	4		MONTH FIRST USED ZALCITABINE
211	H90237FY	Num	4		YEAR FIRST USED ZALCITABINE
212	H90237LM	Num	4		MONTH LAST USED ZALCITABINE
213	H90237LY	Num	4		YEAR LAST USED ZALCITABINE
214	H90237_1	Num	4		REASON STOPPED ZALCITABINE-SIDE EFFECT
215	H90237_2	Num	4		REASON STOPPED ZALCITABINE-WASN'T WORKIN
216	H90237_3	Num	4		REASON STOPPED ZALCITABINE-CHANGED TO NE
217	H90237_4	Num	4		REASON STOPPED ZALCITABINE-PLANNED INTER
218	H90237_5	Num	4		REASON STOPPED ZALCITABINE-NO INSURANCE
219	H90237_6	Num	4		REASON STOPPED ZALCITABINE-OTHER REASON
220	H90237_S	Num	4		REASON STOPPED ZALCITABINE-SPECIFY REASO
221	H90_238	Num	4		HIV MEDS: ZIDOVUDINE
222	H90238FM	Num	4		MONTH FIRST USED ZIDOVUDINE
223	H90238FY	Num	4		YEAR FIRST USED ZIDOVUDINE
224	H90238LM	Num	4		MONTH LAST USED ZIDOVUDINE
225	H90238LY	Num	4		YEAR LAST USED ZIDOVUDINE
226	H90238_1	Num	4		REASON STOPPED ZIDOVUDINE-SIDE EFFECT
227	H90238_2	Num	4		REASON STOPPED ZIDOVUDINE-WASN'T WORKING
228	H90238_3	Num	4		REASON STOPPED ZIDOVUDINE-CHANGED TO NEW
229	H90238_4	Num	4		REASON STOPPED ZIDOVUDINE-PLANNED INTERR
230	H90238_5	Num	4		REASON STOPPED ZIDOVUDINE-NO INSURANCE
231	H90238_6	Num	4		REASON STOPPED ZIDOVUDINE-OTHER REASON

Num	Variable	Type	Len	Format	Label
232	H90238_S	Num	4		REASON STOPPED ZIDOVUDINE-SPECIFY REASON
233	H90_O1	Num	4		HIV MEDS: OTHER SPECIFY 1
234	H90_O1FM	Num	4		MONTH FIRST USED OTHER SPECIFY 1
235	H90_O1FY	Num	4		YEAR FIRST USED OTHER SPECIFY 1
236	H90_O1LM	Num	4		MONTH LAST USED OTHER SPECIFY 1
237	H90_O1LY	Num	4		YEAR LAST USED OTHER SPECIFY 1
238	H90_O1_1	Num	4		REASON STOPPED OTHER SPECIFY 1 SIDE EFFE
239	H90_O1_2	Num	4		REASON STOPPED OTHER SPECIFY 1-WASN'T WO
240	H90_O1_3	Num	4		REASON STOPPED OTHER SPECIFY 1-NEW REGIM
241	H90_O1_4	Num	4		REASON STOPPED OTHER SPECIFY 1-PLANNED I
242	H90_O1_5	Num	4		REASON STOPPED OTHER SPECIFY 1-NO INSURA
243	H90_O1_6	Num	4		REASON STOPPED OTHER SPECIFY 1-OTHER REA
244	H90_O1_S	Num	4		REASON STOPPED OTHER SPECIFY 1-SPECIFY R
245	H90_O2	Num	4		HIV MEDS: OTHER SPECIFY 2
246	H90_O2FM	Num	4		MONTH FIRST USED OTHER SPECIFY 2
247	H90_O2FY	Num	4		YEAR FIRST USED OTHER SPECIFY 2
248	H90_O2LM	Num	4		MONTH LAST USED OTHER SPECIFY 2
249	H90_O2LY	Num	4		YEAR LAST USED OTHER SPECIFY 2
250	H90_O2_1	Num	4		REASON STOPPED OTHER SPECIFY 2 SIDE EFFE
251	H90_O2_2	Num	4		REASON STOPPED OTHER SPECIFY 2-WASN'T WO
252	H90_O2_3	Num	4		REASON STOPPED OTHER SPECIFY 2-NEW REGIM
253	H90_O2_4	Num	4		REASON STOPPED OTHER SPECIFY 2-PLANNED I
254	H90_O2_5	Num	4		REASON STOPPED OTHER SPECIFY 2-NO INSURA
255	H90_O2_6	Num	4		REASON STOPPED OTHER SPECIFY 2-OTHER REA
256	H90_O2_S	Num	4		REASON STOPPED OTHER SPECIFY 2-SPECIFY R
257	H90_A2	Num	4		DIDN'T USE ANY PROPHYLAXIS MEDICATIONS
258	H90A2_1	Num	4		PROPHYLAXIS MEDS: ACYCLOVIR
259	H90A2_2	Num	4		PROPHYLAXIS MEDS: AEROSOLIZED PENTAMIDIN
260	H90A2_3	Num	4		PROPHYLAXIS MEDS: ATOVAQUONE
261	H90A2_4	Num	4		PROPHYLAXIS MEDS: AZITHROMYCIN
262	H90A2_5	Num	4		PROPHYLAXIS MEDS: CLARITHROMYCIN
263	H90A2_6	Num	4		PROPHYLAXIS MEDS: DAPSONE
264	H90A2_7	Num	4		PROPHYLAXIS MEDS: FAMCICLOVIR
265	H90A2_8	Num	4		PROPHYLAXIS MEDS: FLUCONAZOLE
266	H90A2_9	Num	4		PROPHYLAXIS MEDS: GANCICLOVIR
267	H90A2_10	Num	4		PROPHYLAXIS MEDS: RIFABUTIN
268	H90A2_11	Num	4		PROPHYLAXIS MEDS: TRIMETHOPRIM
269	H90A2_12	Num	4		PROPHYLAXIS MEDS: VALACYCLOVIR
270	H90A2_O1	Num	4		PROPHYLAXIS MEDS: OTHER HIV DRUG-1

Num	Variable	Type	Len	Format	Label
271	H90A2_O2	Num	4		PROPHYLAXIS MEDS: OTHER HIV DRUG-2
272	H90A2_O3	Num	4		PROPHYLAXIS MEDS: OTHER HIV DRUG-3
273	H90A2_O4	Num	4		PROPHYLAXIS MEDS: OTHER HIV DRUG-4
274	H90A2_O5	Num	4		PROPHYLAXIS MEDS: OTHER HIV DRUG-5
275	H90_A3	Num	4		DIDN'T USE ANY HCV MEDS
276	H90A3_1	Num	4		HCV MEDICATIONS: INTRON
277	H90A3_2	Num	4		HCV MEDICATIONS: ROFERON
278	H90A3_3	Num	4		HCV MEDICATIONS: INFERGEN
279	H90A3_4	Num	4		HCV MEDICATIONS: STANDARD INTERFERON
280	H90A3_5	Num	4		HCV MEDICATIONS: REBETOL
281	H90A3_6	Num	4		HCV MEDICATIONS: VIRAZOLE
282	H90A3_7	Num	4		HCV MEDICATIONS: REBETRON
283	H90A3_8	Num	4		HCV MEDICATIONS: PEG-INTRON
284	H90A3_9	Num	4		HCV MEDICATIONS: PEGASYS
285	H90_A4	Num	4		DIDN'T USE ANY OTHER PRESCRIPTION MED
286	H90A4_1	Num	4		OTHER PRESCRIPTION MEDS: VIOXX
287	H90A4_2	Num	4		OTHER PRESCRIPTION MEDS: CELEBREX
288	H90A4_3	Num	4		OTHER PRESCRIPTION MEDS: VICODIN
289	H90A4_4	Num	4		OTHER PRESCRIPTION MEDS: TYLENOL #3
290	H90A4_5	Num	4		OTHER PRESCRIPTION MEDS: PERCOCET
291	H90A4_6	Num	4		OTHER PRESCRIPTION MEDS: OXYIR
292	H90A4_7	Num	4		OTHER PRESCRIPTION MEDS: LASIX
293	H90A4_8	Num	4		OTHER PRESCRIPTION MEDS: PRILOSEC
294	H90A4_9	Num	4		OTHER PRESCRIPTION MEDS: ZOLOFT
295	H90A4_10	Num	4		OTHER PRESCRIPTION MEDS: NEURONTIN
296	H90A4_O1	Num	4		OTHER PRESCRIPTION MEDS: SPECIFY 1
297	H90A4_O2	Num	4		OTHER PRESCRIPTION MEDS: SPECIFY 2
298	H90A4_O3	Num	4		OTHER PRESCRIPTION MEDS: SPECIFY 3
299	H90A4_O4	Num	4		OTHER PRESCRIPTION MEDS: SPECIFY 4
300	H90A4_O5	Num	4		OTHER PRESCRIPTION MEDS: SPECIFY 5
301	H90A4_O6	Num	4		OTHER PRESCRIPTION MEDS: SPECIFY 6
302	H90A4_O7	Num	4		OTHER PRESCRIPTION MEDS: SPECIFY 7
303	H90A4_O8	Num	4		OTHER PRESCRIPTION MEDS: SPECIFY 8
304	H90A4_O9	Num	4		OTHER PRESCRIPTION MEDS: SPECIFY 9
305	H90A4O10	Num	4		OTHER PRESCRIPTION MEDS: SPECIFY 10
306	H90_A5	Num	4		DIDN'T USE HERBS/DRUGS
307	H90A5_1	Num	4		HERBAL SUPPLEMENTS: ALCHEMILLA
308	H90A5_2	Num	4		HERBAL SUPPLEMENTS: CHAPARRAL
309	H90A5_3	Num	4		HERBAL SUPPLEMENTS: CHONDROITIN

Num	Variable	Type	Len	Format	Label
310	H90A5_4	Num	4		HERBAL SUPPLEMENTS: EVENING PRIMROSE
311	H90A5_5	Num	4		HERBAL SUPPLEMENTS: EPHEDRA
312	H90A5_6	Num	4		HERBAL SUPPLEMENTS: FEWERFEW
313	H90A5_7	Num	4		HERBAL SUPPLEMENTS: FISH OIL
314	H90A5_8	Num	4		HERBAL SUPPLEMENTS: GENTIAN
315	H90A5_9	Num	4		HERBAL SUPPLEMENTS: GERMANDER
316	H90A5_10	Num	4		HERBAL SUPPLEMENTS: GINKGO
317	H90A5_11	Num	4		HERBAL SUPPLEMENTS: GINSENG
318	H90A5_12	Num	4		HERBAL SUPPLEMENTS: GINGER
319	H90A5_13	Num	4		HERBAL SUPPLEMENTS: GLUCOSAMINE
320	H90A5_14	Num	4		HERBAL SUPPLEMENTS: JU BU HUAN
321	H90A5_15	Num	4		HERBAL SUPPLEMENTS: MILK THISTLE
322	H90A5_16	Num	4		HERBAL SUPPLEMENTS: SENNA
323	H90A5_17	Num	4		HERBAL SUPPLEMENTS: SHARK CARTILAGE
324	H90A5_18	Num	4		HERBAL SUPPLEMENTS: SCURELLARIA
325	H90A5_19	Num	4		HERBAL SUPPLEMENTS: ST. JOHNS WART
326	H90A5_H1	Num	4		HERBAL SUPPLEMENTS: SPECIFY 1
327	H90A5_H2	Num	4		HERBAL SUPPLEMENTS: SPECIFY 2
328	H90A5_H3	Num	4		HERBAL SUPPLEMENTS: SPECIFY 3
329	H90A5_H4	Num	4		HERBAL SUPPLEMENTS: SPECIFY 4
330	H90A5_H5	Num	4		HERBAL SUPPLEMENTS: SPECIFY 5
331	H90A5_H6	Num	4		HERBAL SUPPLEMENTS: SPECIFY 6
332	H90A5_H7	Num	4		HERBAL SUPPLEMENTS: SPECIFY 7
333	H90A5_H8	Num	4		HERBAL SUPPLEMENTS: SPECIFY 8
334	H90A5_H9	Num	4		HERBAL SUPPLEMENTS: SPECIFY 9
335	H90A5H10	Num	4		HERBAL SUPPLEMENTS: SPECIFY 10
336	H90A5_O1	Num	4		OTHER DRUGS: SPECIFY 1
337	H90A5_O2	Num	4		OTHER DRUGS: SPECIFY 2
338	H90A5_O3	Num	4		OTHER DRUGS: SPECIFY 3
339	H90A5_O4	Num	4		OTHER DRUGS: SPECIFY 4
340	H90A5_O5	Num	4		OTHER DRUGS: SPECIFY 5
341	H90A5_O6	Num	4		OTHER DRUGS: SPECIFY 6
342	H90A5_O7	Num	4		OTHER DRUGS: SPECIFY 7
343	H90A5_O8	Num	4		OTHER DRUGS: SPECIFY 8
344	H90A5_O9	Num	4		OTHER DRUGS: SPECIFY 9
345	H90A5O10	Num	4		OTHER DRUGS: SPECIFY 10
346	H90_B1	Num	4		REDUCE AMOUNT OF TIME SPENT ON WORK?
347	H90_B2	Num	4		ACCOMPLISH LESS THAN YOU WOULD LIKE?
348	H90_B3	Num	4		LIMITED IN THE KIND OF WORK/ACTIVITIES?

Num	Variable	Type	Len	Format	Label
349	H90_B4	Num	4		HAVE DIFFICULTY PERFORMING WORK/ACTIVITI
350	H90_B5	Num	4		PAIN IN YOUR JOINTS PAST 4 WEEKS
351	H90_B6	Num	4		PAIN OF OTHER TYPES PAST 4 WEEKS
352	H90_B7	Num	4		HOW MUCH DID PAIN INTERFERE WITH NORMAL
353	H90_C1	Num	4		DID YOU USE ACETAMINOPHEN SINCE LAST VIS
354	H90_C2	Num	4		PAST 3 MONTHS: # ACETAMINOPHEN A WEEK
355	H90_C3	Num	4		PAST 3 MONTHS: MAX # ACETAMINOPHEN A WEE
356	H90_C4	Num	4		3-12 MONTHS: # ACETAMINOPHEN A WEEK
357	H90_C5	Num	4		3-12 MONTHS: MAX # ACETAMINOPHEN A WEEK
358	H90_C6	Num	4		DID YOU USE NSAIDS SINCE LAST VISIT (OLD
359	H90_C8	Num	4		PAST 3 MONTHS: # NSAIDS A WEEK
360	H90_C9	Num	4		PAST 3 MONTHS: MAX # NSAIDS A WEEK
361	H90_C9A1	Num	4		PAST 3 MONTHS: TYPE OF NSAID-COX 2
362	H90_C9A2	Num	4		PAST 3 MONTHS: TYPE OF NSAID-OTHER NSAID
363	H90_C9A3	Num	4		PAST 3 MONTHS: TYPE OF NSAID-NONE
364	H90_C9B1	Num	4		PAST 2 WEEKS: TYPE OF NSAID-COX 2
365	H90_C9B2	Num	4		PAST 2 WEEKS: TYPE OF NSAID-OTHER NSAID
366	H90_C9B3	Num	4		PAST 2 WEEKS: TYPE OF NSAID-NONE
367	H90_C10	Num	4		3-12 MONTHS: # NSAIDS A WEEK
368	H90_C11	Num	4		3-12 MONTHS: MAX # NSAIDS A WEEK
369	H90C11A1	Num	4		PAST YEAR: TYPE OF NSAID-COX 2
370	H90C11A2	Num	4		PAST YEAR: TYPE OF NSAID-OTHER NSAID
371	H90C11A3	Num	4		PAST YEAR: TYPE OF NSAID-NONE
372	H90_C12	Num	4		SINCE YOUR LAST STUDY VISIT DID YOU USE
373	H90_C13P	Num	4		PAST 3 MONTHS: # CODEINE/OTHER PILLS A W
374	H90_C13I	Num	4		PAST 3 MONTHS: # CODEINE/OTHER INJECTION
375	H90_C14P	Num	4		PAST 3 MONTHS: MAX # CODEINE/OTHER PILLS
376	H90_C14I	Num	4		PAST 3 MONTHS: MAX # CODEINE/OTHER INJEC
377	H90_C15P	Num	4		3-12 MONTHS: # CODEINE/OTHER PILLS A WEE
378	H90_C15I	Num	4		3-12 MONTHS: # CODEINE/OTHER INJECTIONS
379	H90_C16P	Num	4		3-12 MONTHS: MAX # CODEINE/OTHER PILLS A
380	H90_C16I	Num	4		3-12 MONTHS: MAX # CODEINE/OTHER INJECTI
381	H90_D1	Num	4		PAST YEAR SMOKED CIGARETTES REGULARLY
382	H90_D2	Num	4		PAST YEAR HAD A DRINK CONTAINING ALCOHOL
383	H90_D3	Num	4		PAST 3 MONTH, # OF DRINKS PER WEEK
384	H90_D4	Num	4		PAST 3 MONTH, MAX # OF DRINKS PER DAY
385	H90_D5	Num	4		3-12 MONTHS: # OF DRINKS PER WEEK
386	H90_D6	Num	4		3-12 MONTHS: MAX # OF DRINKS PER DAY
387	H90_D7	Num	4		UNABLE TO STOP DRINKING

Num	Variable	Type	Len	Format	Label
388	H90_D8	Num	4		FAILED TO DO SOMETHING YOU WERE EXPECTED
389	H90_D9	Num	4		NEEDED A DRINK FIRST THING IN THE MORNIN
390	H90_D10	Num	4		FELT GUILTY AFTER DRINKING
391	H90_D11	Num	4		UNABLE TO REMEMBER AFTER DRINKING
392	H90_D12	Num	4		YOU OR SOMEONE BEEN INJURED DUE TO DRINK
393	H90_D13	Num	4		RELATIVE CONCERNED ABOUT YOUR DRINKING
394	H90_E1	Num	4		PAST 2 WKS: ABDOMINAL BLOATING
395	H90_E2	Num	4		PAST 2 WKS: TIRED OR FATIGUES
396	H90_E3	Num	4		PAST 2 WKS: BODILY PAIN
397	H90_E4	Num	4		PAST 2 WKS: FELT SLEEPING DURING THE DAY
398	H90_E5	Num	4		PAST 2 WKS: ABDOMINAL PAIN
399	H90_E6	Num	4		PAST 2 WKS: SHORTNESS OF BREATH
400	H90_E7	Num	4		PAST 2 WKS: NOT ABLE TO EAT MUCH
401	H90_E8	Num	4		PAST 2 WKS: DECREASED STRENGTH
402	H90_E9	Num	4		PAST 2 WKS: TROUBLE LIFTING HEAVY OBJECT
403	H90_E10	Num	4		PAST 2 WKS: FELT ANXIOUS
404	H90_E11	Num	4		PAST 2 WKS: DECREASED LEVEL OF ENERGY
405	H90_E12	Num	4		PAST 2 WKS: FELT UNHAPPY
406	H90_E13	Num	4		PAST 2 WKS: FELT DROWSY
407	H90_E14	Num	4		PAST 2 WKS: LIMITATION OF YOUR DIET
408	H90_E15	Num	4		PAST 2 WKS: BEEN IRRITABLE
409	H90_E16	Num	4		PAST 2 WKS: DIFFICULTY SLEEPING
410	H90_E17	Num	4		PAST 2 WKS: ABDOMINAL DISCOMFORT
411	H90_E18	Num	4		PAST 2 WKS: WORRIED/IMPACT HEPATIC C VIR
412	H90_E19	Num	4		PAST 2 WKS: MOOD SWINGS
413	H90_E20	Num	4		PAST 2 WKS: UNABLE TO FALL ASLEEP AT NIG
414	H90_E21	Num	4		PAST 2 WKS: MUSCLE CRAMPS
415	H90_E22	Num	4		PAST 2 WKS: WORRIED ABOUT YOUR SYMPTOMS
416	H90_E23	Num	4		PAST 2 WKS: DRY MOUTH
417	H90_E24	Num	4		PAST 2 WKS: FELT DEPRESSED
418	H90_E25	Num	4		PAST 2 WKS: WORRIED VIRUS INFECTION GETT
419	H90_E26	Num	4		PAST 2 WKS: PROBLEM CONCENTRATING
420	H90_E27	Num	4		PAST 2 WKS: TROUBLED BY ITCHING
421	H90_E28	Num	4		PAST 2 WKS: WORRIED ABOUT NOT FEELING BE
422	H90_E29	Num	4		PAST 2 WKS: CONCERNED AVAILABILITY OF LI
423	PRODHX_V	Num	4		FLAG TO INDICATE PRODUCT HISTORY VERIFIE
424	H90_DT	Num	4	8.	DATE FORM COMPLETED (SAS DATE): Converted to days since reference date
425	H90_DF	Num	4		DATE FORM COMPLETED (IMPUTE FLAG)
426	F90ABDOM	Num	4	6.2	SUMMARY QUALITY OF LIFE: ABDOMINAL

Num	Variable	Type	Len	Format	Label
427	F90FATIG	Num	4	6.2	SUMMARY QUALITY OF LIFE: FATIGUE
428	F90SYSTEM	Num	4	6.2	SUMMARY QUALITY OF LIFE: SYSTEM
429	F90ACTIV	Num	4	6.2	SUMMARY QUALITY OF LIFE: ACTIVITY
430	F90EMOTN	Num	4	6.2	SUMMARY QUALITY OF LIFE: EMOTION
431	F90WORRY	Num	4	6.2	SUMMARY QUALITY OF LIFE: WORRY
432	H90_E1R	Num	4		RECODED VALUE OF H90_E1 FOR QOL CALC.
433	H90_E5R	Num	4		RECODED VALUE OF H90_E5 FOR QOL CALC.
434	H90_E17R	Num	4		RECODED VALUE OF H90_E17 FOR QOL CALC.
435	H90_E2R	Num	4		RECODED VALUE OF H90_E2 FOR QOL CALC.
436	H90_E4R	Num	4		RECODED VALUE OF H90_E4 FOR QOL CALC.
437	H90_E8R	Num	4		RECODED VALUE OF H90_E8 FOR QOL CALC.
438	H90_E11R	Num	4		RECODED VALUE OF H90_E11 FOR QOL CALC.
439	H90_E13R	Num	4		RECODED VALUE OF H90_E13 FOR QOL CALC.
440	H90_E3R	Num	4		RECODED VALUE OF H90_E3 FOR QOL CALC.
441	H90_E6R	Num	4		RECODED VALUE OF H90_E6 FOR QOL CALC.
442	H90_E21R	Num	4		RECODED VALUE OF H90_E21 FOR QOL CALC.
443	H90_E23R	Num	4		RECODED VALUE OF H90_E23 FOR QOL CALC.
444	H90_E27R	Num	4		RECODED VALUE OF H90_E27 FOR QOL CALC.
445	H90_E7R	Num	4		RECODED VALUE OF H90_E7 FOR QOL CALC.
446	H90_E9R	Num	4		RECODED VALUE OF H90_E9 FOR QOL CALC.
447	H90_E14R	Num	4		RECODED VALUE OF H90_E14 FOR QOL CALC.
448	H90_E10R	Num	4		RECODED VALUE OF H90_E10 FOR QOL CALC.
449	H90_E12R	Num	4		RECODED VALUE OF H90_E12 FOR QOL CALC.
450	H90_E15R	Num	4		RECODED VALUE OF H90_E15 FOR QOL CALC.
451	H90_E16R	Num	4		RECODED VALUE OF H90_E16 FOR QOL CALC.
452	H90_E19R	Num	4		RECODED VALUE OF H90_E19 FOR QOL CALC.
453	H90_E20R	Num	4		RECODED VALUE OF H90_E20 FOR QOL CALC.
454	H90_E24R	Num	4		RECODED VALUE OF H90_E24 FOR QOL CALC.
455	H90_E26R	Num	4		RECODED VALUE OF H90_E26 FOR QOL CALC.
456	H90_E18R	Num	4		RECODED VALUE OF H90_E18 FOR QOL CALC.
457	H90_E22R	Num	4		RECODED VALUE OF H90_E22 FOR QOL CALC.
458	H90_E25R	Num	4		RECODED VALUE OF H90_E25 FOR QOL CALC.
459	H90_E28R	Num	4		RECODED VALUE OF H90_E28 FOR QOL CALC.
460	H90_E29R	Num	4		RECODED VALUE OF H90_E29 FOR QOL CALC.
461	ILLEGAL_DRUGS	Num	8		Use of Marijuana, Speed, Heroin, MDMA, Phencyclidine, Anabolic Steroids, Glues/Solvents, or Cocaine
462	H80A5O10	Num	8		
463	SUBJ_ID	Char	8		MHCS SUBJECT IDENTIFIER

Data Set Name: f91.sas7bdat

Num	Variable	Type	Len	Format	Informat	Label
1	ASCCODE	Num	4			Q15. ASCITES UNTREATED REASON SPEC. CODE
2	NEUROCD	Num	4			OTHER NEUROLOGICAL ABNORMALITIES CODE
3	VISITNUM	Num	4	1.		VISIT NUMBER
4	NoBM	Num	4	4.	4.	BASIC MEASUREMENTS NOT OBTAINED
5	feet	Num	4	2.	19.	Q1. FEET (HEIGHT)
6	inches	Num	4	3.	19.	Q1. INCHES (HEIGHT)
7	cms	Num	4	6.	19.	Q1. CENTIMETERS (HEIGHT)
8	pounds	Num	4	5.1	19.	Q2. WEIGHT IN POUNDS
9	kgs	Num	4	5.1	19.	Q2. WEIGHT IN KILOGRAMS
10	fahrenheit	Num	4	5.1		Q3. TEMPERATURE IN FAHRENHEIT
11	celsius	Num	4	5.1		Q3. TEMPERATURE IN CELSIUS
12	systolic	Num	4	6.	19.	Q4. BLOOD PRESSURE - SYSTOLIC
13	diastolic	Num	4	6.	19.	Q4. BLOOD PRESSURE - DIASTOLIC
14	blood	Num	4	1.	4.	Q5. URINALYSIS - BLOOD LEVEL
15	protein	Num	4	1.	4.	Q6. URINALYSIS - PROTEIN LEVEL
16	nitrite	Num	4	1.	4.	Q7. URINALYSIS - NITRITE LEVEL
17	a_acid	Num	4	1.	4.	Q8. URINALYSIS - ASCORBIC ACID LEVEL
18	glucose	Num	4	1.	4.	Q9. URINALYSIS - GLUCOSE LEVEL
19	ph	Num	4	1.	4.	Q10. URINALYSIS - pH LEVEL
20	hem_arth	Num	4	1.	4.	Q11. HEMOPHILIC ARTHROPATHY-NONE
21	HEMARTH1	Num	4	4.	4.	Q11. HAS JOINT REPLACEMENT
22	HEMARTH2	Num	4	4.	4.	Q11. JOINT AFFECTED NOW
23	HEMARTH3	Num	4	4.	4.	Q11. TWO OR MORE JOINTS
24	kar_perf	Num	4	1.	4.	Q12. KARNOFSKY PERFORMANCE
25	affected	Num	4	1.	4.	Q13. KAR PERF AFFECTED BY HEM ARTH
26	fatigue	Num	4	1.	4.	Q14. FATIGUE LEVEL
27	ascites	Num	4	1.	4.	Q15. ASCITES
28	hepatome	Num	4	1.	4.	Q16. HEPATOMEGALY
29	splenome	Num	4	1.	4.	Q17. SPLENOMEGALY
30	splnsize	Num	4	19.	19.	Q17. SPLEEN'S SIZE (IN CM.)
31	h_zoster	Num	4	1.	4.	Q18. HERPES ZOSTER (SHINGLES)
32	lym_none	Num	4	2.	4.	Q19. LYMPHADENOPATHY - NONE
33	lym_cerv	Num	4	1.	4.	Q19. LYMPHADENOPATHY - CERVICAL
34	cervsite	Num	4	2.	19.	Q19. CERVICAL LYMPH - # SITES
35	cervshot	Num	4	1.	4.	Q19. CERVICAL LYMPH - SHOTTY
36	lym_othe	Num	4	1.	4.	Q19. LYMPHADENOPATHY - OTHER

Num	Variable	Type	Len	Format	Informat	Label
37	lgstnode	Num	4	2.	19.	Q19a.DIAMETER OF LARGEST LYMPH NODE
38	nocond	Num	4	4.	4.	NOTHING CHECKED FOR Q.20
39	p_neurop	Num	4	1.	4.	Q20. PERIPHERAL NEUROPATHY
40	spider	Num	4	1.	4.	Q20. SPIDER ANGIOMATA
41	neuro_ab	Num	4	1.	4.	Q20. OTHER NEUROLOGICAL ABNORMAL
42	palmare	Num	4	1.	4.	Q20. PALMAR ERYTHEMA
43	wgt_loss	Num	4	1.	4.	Q20. UNEXPLAINED WEIGHT LOSS
44	edema	Num	4	1.	4.	Q20. LOWER EXTREMITY EDEMA
45	memory	Num	4	1.	4.	Q20. MEMORY OR CONCENTRATION PROBLEMS
46	depressn	Num	4	1.	4.	Q20. CHRONIC DEPRESSION
47	gynecom	Num	4	1.	4.	Q20. GYNECOMASTIA
48	arthralg	Num	4	1.	4.	Q20. ARTHRALGIAS/ARTHRITIS
49	nausea	Num	4	1.	4.	Q20. NAUSEA
50	tenderns	Num	4	1.	4.	Q20. RIGHT UP QUAD ABD/LIVER TENDERNESS
51	i_sclera	Num	4	1.	4.	Q20. ICTERIC SCLERA
52	jaundice	Num	4	1.	4.	Q20. JAUNDICE
53	atrophy	Num	4	1.	4.	Q20. TEMPORAL MUSCLE ATROPHY
54	visit_DT	Num	4	8.		FOLLOW UP PE VISIT DATE (SAS DATE): Converted to days since reference date
55	visit_DF	Num	4			FOLLOW UP PE VISIT DATE IMPUTE FLAG
56	SUBJ_ID	Char	8			MHCS SUBJECT IDENTIFIER

Data Set Name: f92.sas7bdat

Num	Variable	Type	Len	Format	Informat	Label
1	GENDEFCD	Num	4			Q4A. Code assigned to other genetic def.
2	q7bags	Num	4			Q7. # of bags
3	q7mls	Num	4			Q7. Total MLS
4	q21a_yr	Num	4			Q21A. Year of liver transplant
5	DRUGCD1A	Num	4			Q16A. Code for 2nd other standard int.
6	DRUGCD1B	Num	4			Q16A. Code for 2nd other ribavirin
7	DRUGCD2	Num	4			Q17. Code assigned to other brand used (
8	DRUGCD3	Num	4			Q18. Code assigned to other brand used (
9	DRUGCD4	Num	4			Q19. Code assigned to other brand used (
10	DRUGCD5	Num	4			Q19. Code assigned to other brand used (
11	Q1	Num	4	4.	4.	Q1. Subject status
12	Q1REASON	Num	4	4.	4.	Q1. Reason withdrew from study
13	Q1REASCD	Num	4	6.	6.	Q1. Reason withdrew -Other Sp. CODE
14	CNCRCD	Num	4	6.	6.	Q1B. Code assigned to other cancer
15	Q1c	Num	4	6.	6.	Q1C. Autopsy performed
16	Q1d	Num	4	6.	6.	Q1D. Liver Tissue obtained
17	Q1e1	Num	4	4.	4.	Q1E1. Source=death certificate
18	Q1e2	Num	4	4.	4.	Q1E2. Source=medical record
19	Q1e3	Num	4	4.	4.	Q1E3. Source=spouse or relative
20	Q1e4	Num	4	4.	4.	Q1E4. Source=non-relative
21	Q1e5	Num	4	4.	4.	Q1E5. Source=obituary
22	Q1e6	Num	4	4.	4.	Q1E6. Source=other
23	Q2a	Num	4	4.	4.	Q2A. After or same as date of enrollment
24	Q3	Num	8	6.	6.	Q4A. What is hemophilia genetic defect
25	Q5a	Num	4	4.	4.	Q5A. Clotting Factor Products-None
26	Q5b	Num	4	4.	4.	Q5B. Clotting Factor Products-Recombin.
27	Q5c	Num	4	4.	4.	Q5C. Clotting Factor Products-Monoclonal
28	Q5d	Num	4	4.	4.	Q5D. Clotting Factor Products-High Pur
29	Q5e	Num	4	4.	4.	Q5E. Clotting Factor Products-Int Purity
30	Q5f	Num	4	4.	4.	Q5F. Clotting Factor Products-Cryoprecip
31	Q5g	Num	4	4.	4.	Q5G. Other Blood Components
32	Q6_none	Num	4	4.	4.	Q6. No factor concentrate was received
33	Q6_unit	Num	4	4.	4.	Q6. Units of factor concentrate KNOWN
34	Q6_mg	Num	4	4.	4.	Q6. Micrograms of factor concentrate
35	Q6_unk	Num	4	4.	4.	Q6. UNKNOWN amount of factor concentrate
36	Q6_units	Num	4	19.	19.	Q6. Number of units factor concentrate

Num	Variable	Type	Len	Format	Informat	Label
37	Q6_micro	Num	4	19.	19.	Q6. No. of micrograms of factor conc.
38	Q6a	Num	4	4.	4.	Q6A. Basis factor was administered
39	Q7	Num	4	6.	6.	Q7. How many units of cryo did sub rec
40	Q8	Char	3	\$3.	\$3.	Q8. HBV vaccine since last FU visit ?
41	Q9a	Num	4	6.	6.	Q9A. HBV chronic carrier stat of subj
42	Q10	Num	4	6.	6.	Q10. Vaccinated for hep A since 1st FU
43	Q10_mo	Num	4	6.	6.	Q10. Month of last Hep A vaccination
44	Q10_yr	Num	4	6.	6.	Q10. Year of last Hep A vaccination
45	Q11	Num	4	6.	6.	Q11. Current HCV antibody status
46	Q12	Num	4	6.	6.	Q12. HIV status
47	Q13	Num	4	6.	6.	Q13. AIDS-defining condition
48	Q13a1	Num	4	4.	4.	Q13A1. CD4 <200 cells/ul or <14%
49	Q13A1MO	Num	4	6.	6.	Q13A1. CD4 <200 cells/ul or <14% month o
50	Q13A1YR	Num	4	11.	11.	Q13A1. CD4 <200 cells/ul or <14% year of
51	Q13a2	Num	4	4.	4.	Q13A2. CMV (not liver, spleen, lymph)
52	Q13A2MO	Num	4	6.	6.	Q13A2. CMV (not liver, spleen, lymph) mo
53	Q13A2YR	Num	4	11.	11.	Q13A2. CMV (not liver, spleen, lymph) ye
54	Q13a3	Num	4	4.	4.	Q13A3. Candidiasis of esophagus or lungs
55	Q13A3MO	Num	4	6.	6.	Q13A3. Candidiasis of esophagus or lungs
56	Q13A3YR	Num	4	11.	11.	Q13A3. Candidiasis of esophagus or lungs
57	Q13a4	Num	4	4.	4.	Q13A4. Cervical cancer, invasive
58	Q13A4MO	Num	4	6.	6.	Q13A4. Cervical cancer, invasive month o
59	Q13A4YR	Num	4	11.	11.	Q13A4. Cervical cancer, invasive year of
60	Q13a5	Num	4	4.	4.	Q13A5. Coccidioidmycosis, extrapulmonary
61	Q13A5MO	Num	4	6.	6.	Q13A5. Coccidioidmycosis, extrapulmonary
62	Q13A5YR	Num	4	11.	11.	Q13A5. Coccidioidmycosis, extrapulmonary
63	Q13a6	Num	4	4.	4.	Q13A6. Cryptococcosis, extrapulmonary
64	Q13A6MO	Num	4	6.	6.	Q13A6. Cryptococcosis, extrapulmonary mo
65	Q13A6YR	Num	4	11.	11.	Q13A6. Cryptococcosis, extrapulmonary ye
66	Q13a7	Num	4	4.	4.	Q13A7. Cryptosporidiosis with diarrhea f
67	Q13A7MO	Num	4	6.	6.	Q13A7. Cryptosporidiosis with diarrhea f
68	Q13A7YR	Num	4	11.	11.	Q13A7. Cryptosporidiosis with diarrhea f
69	Q13a8	Num	4	4.	4.	Q13A8. Herpes simplex, ulcer for > 1 mon
70	Q13A8MO	Num	4	6.	6.	Q13A8. Herpes simplex, ulcer for > 1 mon
71	Q13A8YR	Num	4	11.	11.	Q13A8. Herpes simplex, ulcer for > 1 mon
72	Q13a9	Num	4	4.	4.	Q13A9. Herpes simplex in lungs or esopha
73	Q13A9MO	Num	4	6.	6.	Q13A9. Herpes simplex in lungs or esopha
74	Q13A9YR	Num	4	11.	11.	Q13A9. Herpes simplex in lungs or esopha
75	Q13a10	Num	4	4.	4.	Q13A10. Histoplasmosis, extrapulmonary

Num	Variable	Type	Len	Format	Informat	Label
76	Q13A10MO	Num	4	6.	6.	Q13A10. Histoplasmosis, extrapulmonary m
77	Q13A10YR	Num	4	11.	11.	Q13A10. Histoplasmosis, extrapulmonary y
78	Q13a11	Num	4	4.	4.	Q13A11. HIV encephalopathy/dementia
79	Q13A11MO	Num	4	6.	6.	Q13A11. HIV encephalopathy/dementia mont
80	Q13A11YR	Num	4	11.	11.	Q13A11. HIV encephalopathy/dementia year
81	Q13a12	Num	4	4.	4.	Q13A12. Isosporiasis with diarrhea for >
82	Q13A12MO	Num	4	6.	6.	Q13A12. Isosporiasis with diarrhea for >
83	Q13A12YR	Num	4	11.	11.	Q13A12. Isosporiasis with diarrhea for >
84	Q13a13	Num	4	4.	4.	Q13A13. Kaposi's syndrome
85	Q13A13MO	Num	4	6.	6.	Q13A13. Kaposi's syndrome month of diag
86	Q13A13YR	Num	4	11.	11.	Q13A13. Kaposi's syndrome year of diagn
87	Q13a14	Num	4	4.	4.	Q13A14. Lymphoid interstitial pneumonia
88	Q13A14MO	Num	4	6.	6.	Q13A14. Lymphoid interstitial pn(LIP) or
89	Q13A14YR	Num	4	11.	11.	Q13A14. Lymphoid interstitial pneumonia
90	Q13a15	Num	4	4.	4.	Q13A15. Lymphoma of the brain (CNS Prima
91	Q13A15MO	Num	4	6.	6.	Q13A15. Lymphoma of the brain (CNS Prima
92	Q13A15YR	Num	4	11.	11.	Q13A15. Lymphoma of the brain (CNS Prima
93	Q13a16	Num	4	4.	4.	Q13A16. Mycobacterium avium (not only lu
94	Q13A16MO	Num	4	6.	6.	Q13A16. Mycobacterium avium (not only lu
95	Q13A16YR	Num	4	11.	11.	Q13A16. Mycobacterium avium (not only lu
96	Q13a17	Num	4	4.	4.	Q13A17. Non-Hodgkin's Lymphoma (not T-c
97	Q13A17MO	Num	4	6.	6.	Q13A17. Non-Hodgkin's Lymphoma (not T-c
98	Q13A17YR	Num	4	11.	11.	Q13A17. Non-Hodgkin's Lymphoma (not T-c
99	Q13a18	Num	4	4.	4.	Q13A18. Pneumocystis carinii pneumonia (
100	Q13A18MO	Num	4	6.	6.	Q13A18. Pneumocystis carinii pneumonia (
101	Q13A18YR	Num	4	11.	11.	Q13A18. Pneumocystis carinii pneumonia (
102	Q13a19	Num	4	4.	4.	Q13A19. Pneumonia, recurrent bacterial (
103	Q13A19MO	Num	4	6.	6.	Q13A19. Pneumonia, recurrent bacterial (
104	Q13A19YR	Num	4	11.	11.	Q13A19. Pneumonia, recurrent bacterial (
105	Q13a20	Num	4	4.	4.	Q13A20. Progressive multifocal leukoence
106	Q13A20MO	Num	4	6.	6.	Q13A20. Progressive multifocal leukoence
107	Q13A20YR	Num	4	11.	11.	Q13A20. Progressive multifocal leukoence
108	Q13a21	Num	4	4.	4.	Q13A21. Pulmonary tuberculosis
109	Q13A21MO	Num	4	6.	6.	Q13A21. Pulmonary tuberculosis month of
110	Q13A21YR	Num	4	11.	11.	Q13A21. Pulmonary tuberculosis year of d
111	Q13a22	Num	4	4.	4.	Q13A22. Salmonella septicemia, recurrent
112	Q13A22MO	Num	4	6.	6.	Q13A22. Salmonella septicemia, recurrent
113	Q13A22YR	Num	4	11.	11.	Q13A22. Salmonella septicemia, recurrent
114	Q13a23	Num	4	4.	4.	Q13A23. Toxoplasmosis of the brain

Num	Variable	Type	Len	Format	Informat	Label
115	Q13A23MO	Num	4	6.	6.	Q13A23. Toxoplasmosis of the brain month
116	Q13A23YR	Num	4	11.	11.	Q13A23. Toxoplasmosis of the brain year
117	Q13a24	Num	4	4.	4.	Q13A24. Wasting syndrome (emaciation,"sl
118	Q13A24MO	Num	4	6.	6.	Q13A24. Wasting syndrome (emaciation,"sl
119	Q13A24YR	Num	4	11.	11.	Q13A24. Wasting syndrome (emaciation,"sl
120	Q13a25	Num	4	4.	4.	Q13A25. Other multiple of recurrent bact
121	Q13A25MO	Num	4	6.	6.	Q13A25. Other multiple of recurrent bact
122	Q13A25YR	Num	4	11.	11.	Q13A25. Other multiple of recurrent bact
123	Q14a	Num	4	4.	4.	Q14A. HCV related conditions-None
124	Q14b	Num	4	4.	4.	Q14B. Jaundice, persistent > 1 month
125	Q14b_mo	Num	4	6.	6.	Q14B. Jaundice, persistent > 1 month mon
126	Q14b_yr	Num	4	11.	11.	Q14B. Jaundice, persistent > 1 year year
127	Q14c	Num	4	4.	4.	Q14C. Ascites (hepatic-related)
128	Q14c_mo	Num	4	6.	6.	Q14C. Ascites (hepatic-related) month of
129	Q14c_yr	Num	4	11.	11.	Q14C. Ascites (hepatic-related) year of
130	Q14e	Num	4	4.	4.	Q14E. Esophageal varices
131	Q14e_mo	Num	4	6.	6.	Q14E. Esophageal varices month of diagno
132	Q14e_yr	Num	4	11.	11.	Q14E. Esophageal varices year of diagnos
133	Q14f	Num	4	4.	4.	Q14F. Bleeding esophageal varices
134	Q14f_mo	Num	4	6.	6.	Q14F. Bleeding esophageal varices month
135	Q14f_yr	Num	4	11.	11.	Q14F. Bleeding esophageal varices year o
136	Q14l	Num	4	4.	4.	Q14L. Biopsy proven Cirrhosis
137	Q14l_mo	Num	4	6.	6.	Q14L. Biopsy proven Cirrhosis month of d
138	Q14l_yr	Num	4	11.	11.	Q14L. Biopsy proven Cirrhosis year of di
139	HCVCode1	Num	4	6.	6.	Q14. Code assigned to other HCV related
140	HCVCode2	Num	4	6.	6.	Q14. Code assigned to other HCV related
141	Q15	Num	4	6.	6.	Q15. Did subject receive HCV treatment
142	Q16	Num	4	4.	4.	Q16. Was the subject treated at the same
143	Q16a1	Num	4	6.	6.	Q16A. Rebetron (standard interferon & ri
144	Q16a2	Num	4	6.	6.	Q16A. Other standard interferon
145	Q16a3	Num	4	4.	4.	Q16A. Other ribarivin
146	Q16b_mo	Num	4	6.	6.	Q16B. Month use began
147	Q16b_yr	Num	4	11.	11.	Q16B. Year use began
148	Q16c	Num	4	6.	6.	Q16C. Is subject currently using it?
149	Q16d	Num	4	6.	6.	Q16D. Why is the subject no longer using
150	Q17	Num	4	4.	4.	Q17. Was the subject treated with standa
151	Q17a	Num	4	4.	4.	Q17A. Brand used
152	Q17b_mo	Num	4	6.	6.	Q17B. Month use began
153	Q17b_yr	Num	4	11.	11.	Q17B. Year use began

Num	Variable	Type	Len	Format	Informat	Label
154	Q17c	Num	4	4.	4.	Q17C. Is subject currently using it?
155	Q17d	Num	4	4.	4.	Q17D. Why is the subject no longer using
156	Q18	Num	4	4.	4.	Q18. Was the subject treated at the same
157	Q18a1	Num	4	4.	4.	Q18A. Brand used: PEG-Intron
158	Q18a2	Num	4	4.	4.	Q18A. Brand used: Pegasys
159	Q18a3	Num	4	4.	4.	Q18A. Brand used: Rebetol
160	Q18a4	Num	4	4.	4.	Q18A. Brand used: Virazole
161	Q18a5	Num	4	4.	4.	Q18A. Brand used: Other Pegylated Interf
162	Q18a6	Num	8	4.	4.	Q18A. Brand used: Other Ribavvirin
163	Q18b_mo	Num	4	6.	6.	Q18B. Month use began
164	Q18b_yr	Num	4	11.	11.	Q18B. Year use began
165	Q18c	Num	4	4.	4.	Q18C. Is subject currently using it?
166	Q18d	Num	4	4.	4.	Q18D. Why is the subject no longer using
167	Q19	Num	4	4.	4.	Q19. Was the subject treated with pegyla
168	Q19a	Num	4	6.	6.	Q19A. Brand used
169	Q19b_mo	Num	4	6.	6.	Q19B. Month use began
170	Q19b_yr	Num	4	11.	11.	Q19B. Year use began
171	Q19c	Num	4	6.	6.	Q19C. Is subject currently using it?
172	Q19d	Num	4	6.	6.	Q19D. Why is the subject no longer using
173	Q20	Num	4	4.	4.	Q20. Since last FU, had liver biopsy ?
174	Q20a	Num	4	4.	4.	Q20A. reason for the liver biopsy
175	BIOPSYCD	Num	4	6.	6.	Q20A. Other reason for liver biopsy code
176	Q21	Num	4	6.	6.	Q21. Subject ever cons. for liver transp
177	Q21a	Num	4	4.	4.	Q21A. Has the subject received a liver t
178	Q21a_mo	Num	4	6.	6.	Q21A. Month of liver transplant
179	Q22	Num	4	4.	4.	Q22. Subject been diagnosed with cancer
180	Q22ASCD1	Num	4	11.	11.	Q22A. Cancer #1-PRIMARY SITE CODE
181	Q22AHCD1	Num	4	11.	11.	Q22A. Cancer #1-HISTOLOGIC SUBTYPE CODE
182	Q22ATCD1	Num	4	11.	11.	Q22A. Cancer #1-TYPE CODE
183	Q22a_loc	Num	4	6.	6.	Q22A. Cancer #1-Is this cancer localized
184	Q22a_mo	Num	4	6.	6.	Q22A. Cancer #1-Month of diagnosis
185	Q22a_yr	Num	4	11.	11.	Q22A. Cancer #1-Year of diagnosis
186	Q22ADIAG	Num	4	4.	4.	Q22A. Cancer #1-Where cancer diagnosed
187	Q22BSCD2	Num	4	11.	11.	Q22B. Cancer #2-PRIMARY SITE CODE
188	Q22BHCD2	Num	4	11.	11.	Q22B. Cancer #2-HISTOLOGIC SUBTYPE CODE
189	Q22BTCD2	Num	4	11.	11.	Q22B. Cancer #2-TYPE CODE
190	Q22b_loc	Num	4	6.	6.	Q22B. Cancer #2-Is this cancer localized
191	Q22b_mo	Num	4	6.	6.	Q22B. Cancer #2-Month of diagnosis
192	Q22b_yr	Num	4	11.	11.	Q22B. Cancer #2-Year of diagnosis

Num	Variable	Type	Len	Format	Informat	Label
193	Q22BDIAG	Num	4	4.	4.	Q22B. Cancer #2-Where cancer diagnosed
194	Q23a	Num	4	4.	4.	Q23A. NO GI BLEED, ETC. SINCE las visit
195	Q23b	Num	4	4.	4.	Q23B. YES-GI BLEED SINCE last visit
196	Q23c	Num	4	4.	4.	Q23C. YES-GASTROINT. PERF. last visit
197	Q23d	Num	4	4.	4.	Q23D. YES-GASTROINT. OBST. SINCE last vi
198	Q23e	Num	4	6.	6.	Q23E. UNKNOWN-GI BLEED,ETC. SINCE last v
199	Q23a2	Num	4	4.	4.	Q23A. Have you sent in an Upper GI Suppl
200	DEATH_DT	Num	4	8.		Q1a. DATE OF DEATH (SAS DATE): Converted to days since reference date
201	DEATH_DF	Num	4			Q1a. DATE OF DEATH IMPUTE FLAG
202	CVIS_DT	Num	4	8.		DATE MOST RECENT CLINIC VISIT (SAS DATE): Converted to days since reference date
203	CVIS_DF	Num	4			DATE MOST REC. CLINIC VISIT IMPUTE FLAG
204	FORM_DT	Num	4	8.		Q24. DATE FORM COMPLETED (SAS DATE): Converted to days since reference date
205	FORM_DF	Num	4			Q24. DATE FORM COMPLETED IMPUTE FLAG
206	BLEED_DT	Num	4	8.		Q23. DATE THE BLEED OCCURRED (SAS DATE): Converted to days since reference date
207	BLEED_DF	Num	4			Q23. DATE BLEED OCCURRED IMPUTE FLAG
208	SUBJ_ID	Char	8			MHCS SUBJECT IDENTIFIER

Data Set Name: labdata.sas7bdat

Num	Variable	Type	Len	Format	Label
1	ALT	Num	8		ALT (Serum) standardized value
2	AST	Num	8		AST (Serum) standardized value
3	ALKPHOS	Num	8		Alkaline Phosphatase standardized value
4	TOTBILI	Num	8		Total Bilirubin standardized value
5	DIRBILI	Num	8		Direct Bilirubin standardized value
6	INDBILI	Num	8		Indirect Bilirubin standardized value
7	SCREAT	Num	8		Serum Creatinine standardized value
8	CHOLESTR	Num	8		Cholesterol standardized value
9	BUN	Num	8		BUN standardized value
10	SERMIRON	Num	8		Serum Iron standardized value
11	TIBC	Num	8		Total Iron-Binding Capacity standardized
12	SERMFERR	Num	8		Serum Ferritin standardized value
13	FORM	Char	3		FORM NUMBER
14	OUTL_V	Num	4		FLAG TO INDICATE AN OUTLIER VALUE
15	PTT_DF	Num	4		PTT DATE: IMPUTE FLAG
16	PTTIME_P	Num	4		PROTHROMBIN TIME-PATIENT (20-100 RANGE)
17	PTTIME_C	Num	4		PROTHROMBIN TIME-CONTROL (20-40 RANGE)
18	PTT_DT	Num	4	8.	DATE OF PTT TEST (SAS DATE): Converted to days since reference date
19	RUQ_TYPE	Num	4		WHAT TYPE OF TEST WAS IT
20	WBC	Num	4		CBC-WBC
21	HEMOGLBN	Num	4		CBC-HEMOGLOBIN G/DL
22	HEMATOCR	Num	4		CBC-HEMATOCRIT
23	LYMPHO	Num	4		CBC-LYMPHOCYTES
24	NEUTROPH	Num	4		CBC-NEUTROPHILS
25	PLATELET	Num	4		CBC-PLATELET COUNT
26	ALTU	Num	4		ALT (SGPT) U/L
27	ALTKAT	Num	4		ALT (SGPT) uKAT/L
28	ASTU	Num	4		AST (SGOT) U/L
29	ASTKAT	Num	4		AST (SGOT) uKAT/L
30	ALKPHOSU	Num	4		ALKALINE PHOSPHATASE U/L
31	ALKPHOSK	Num	4		ALKALINE PHOSPHATASE uKAT/L
32	TOTBLRMG	Num	4		TOTAL BILIRUBIN MG/DL
33	TOTBLRMO	Num	4		TOTAL BILIRUBIN uMOL/L
34	DTBLRMG	Num	4		DIRECT BILIRUBIN MG/DL
35	DTBLRMO	Num	4		DIRECT BILIRUBIN uMOL/L
36	INDBLRMG	Num	4		INDIRECT BILIRUBIN MG/DL

Num	Variable	Type	Len	Format	Label
37	INDBLRMO	Num	4		INDIRECT BILIRUBIN uMOL/L
38	SCREATMG	Num	4		SERUM CREATININE MG/DL
39	SCREATMO	Num	4		SERUM CREATININE uMOL/L
40	CHOLSTMG	Num	4		CHOLESTEROL MG/DL
41	CHOLSTMO	Num	4		CHOLESTEROL MMOL/L
42	BUNMG	Num	4		BUN MG/DL
43	BUNMO	Num	4		BUN MMOL/L
44	ALBUMIN	Num	4		ALBUMIN G/DL
45	GLOBULIN	Num	4		GLOBULIN G/DL
46	PTIME_PV	Num	4		PROTHROMBIN TIME-PATIENT VALUE=SECONDS
47	PTIME_CV	Num	4		PROTHROMBIN TIME-CONTROL VALUE=SECONDS
48	INR	Num	4		INR-RATIO VALUE
49	SRIRONG	Num	4		SERUM IRON uG/DL
50	SRIRONMO	Num	4		SERUM IRON uMOL/L
51	TTIRONDL	Num	4		TOTAL IRON-BINDING CAPACITY UG/DL
52	TTIRONMO	Num	4		TOTAL IRON-BINDING CAPACITY uMOL/L
53	SRFENG	Num	4		SERUM FERRITIN NG/ML
54	SRFEUG	Num	4		SERUM FERRITIN uG/L
55	INHIB	Num	4		WAS AN INHIBITOR LEVEL DETECTED ON THIS
56	INHIBTT	Num	4		INHIBITOR TITER-BETHESDA UNITS
57	RUQ	Num	4		HAS PATIENT HAD A RUQ ULTRASOUND
58	LVSZ	Num	4		LIVER SIZE
59	LVECHO	Num	4		LIVER ECHOGENECITY
60	LVMASS	Num	4		LIVER MASS
61	LVMASSD	Num	4		LIVER MASS-SPECIFY DIAMETER
62	LVMASSOT	Num	4		LIVER MASS-CODE ASSIGNED TO OTHER SPECIF
63	SPLNSZ	Num	4		SPLEEN SIZE
64	SPLNAB	Num	4		SPLEEN ABNORMALITY
65	SPLNABSP	Num	4		SPLEEN ABNORMALITY-CODE ASSIGNED TO SPEC
66	ASCITES	Num	4		ASCITES UPDATED STATUS OF KEYED RECORD
67	PVTHROMB	Num	4		PORTAL VEIN THROMBOSIS VERDATE
68	CBC_DT	Num	4	8.	DATE OF MOST RECENT CBC: SAS DATE: Converted to days since reference date
69	CBC_DF	Num	4		DATE OF MOST RECENT CBC: IMPUTE FLAG
70	SC_DT	Num	4	8.	DATE MOST RECENT SERUM CHEM: SAS DATE: Converted to days since reference date
71	SC_DF	Num	4		DATE MOST RECENT SERUM CHEM: IMPUTE FLAG
72	IRL_DT	Num	4	8.	DATE MOST RECENT IRON LEVEL: SAS DATE: Converted to days since reference date
73	IRL_DF	Num	4		DATE MOST RECENT IRON LEVEL: IMPUTE FLAG
74	IL_DT	Num	4	8.	INHIBITOR LEVEL DATE: SAS DATE: Converted to days since reference date

Num	Variable	Type	Len	Format	Label
75	IL_DF	Num	4		INHIBITOR LEVEL DATE: IMPUTE FLAG
76	US_DT	Num	4	8.	DATE MOST RECENT ULTRASOUND: SAS DATE: Converted to days since reference date
77	US_DF	Num	4		DATE MOST RECENT ULTRASOUND: IMPUTE FLAG
78	CIRRHOS	Num	4		CIRRHOSIS
79	H63VISIT	Num	4		VISIT NUMBER
80	CD4PCT	Num	4		CD4 VALUES %
81	CD4CNT	Num	4		CD4 VALUES 10**9/L
82	CD8PCT	Num	4		CD8 VALUES %
83	CD8CNT	Num	4		CD8 VALUES 10**9/L
84	TITERNM	Num	4		TITER NOT MEASURED 01=CHECKED
85	PT_DT	Num	4	8.	MOST RECENT PROTHROMBIN TIME:SAS DATE: Converted to days since reference date
86	PT_DF	Num	4		MOST RECENT PROTHROMBIN TIME:IMPUTE DATE
87	CH_DT	Num	4	8.	MOST RECENT CHOLESTEROL: SAS DATE: Converted to days since reference date
88	CH_DF	Num	4		MOST RECENT CHOLESTEROL: IMPUTE FLAG
89	HIV_DT	Num	4	8.	MOST RECENT HIV/AIDS: SAS DATE: Converted to days since reference date
90	HIV_DF	Num	4		MOST RECENT HIV/AIDS: IMPUTE FLAG
91	H63_15GL	Num	4		ALBUMIN g/L
92	phase	Num	4		STUDY PHASE (H63VISIT - 1)
93	nolab	Num	4		NO LAB TEST RESULTS AVAILABLE PAST 12 MO
94	CBC_NA	Num	4		NO CBC RESULTS AVAILABLE PAST 12 MONTHS
95	H63_1_NA	Num	4		WBC NOT AVAILABLE
96	HEMOGLB2	Num	4		CBC-HEMOGLOBIN G/L (VAR IN F63WEB ONLY)
97	H63_2_NA	Num	4		HEMOGLOBIN NOT AVAILABLE
98	H63_3_NA	Num	4		HEMATOCRIT NOT AVAILABLE
99	H63_4_NA	Num	4		LYMPHOCYTES NOT AVAILABLE
100	H63_5_NA	Num	4		NEUTROPHILS NOT AVAILABLE
101	H63_6_NA	Num	4		PLATELET COUNT NOT AVAILABLE
102	Serum_na	Num	4		NO SERUM CHEMISTRY
103	H63_7_NA	Num	4		ALT (SGPT) NOT AVAILABLE
104	H63_8_NA	Num	4		AST (SGOT) NOT AVAILABLE
105	H63_9_NA	Num	4		ALKALINE PHOSPHATASE NOT AVAILABLE
106	H63_10NA	Num	4		TOTAL BILIRUBIN NOT AVAILABLE
107	H63_11NA	Num	4		DIRECT BILIRUBIN NOT AVAILABLE
108	H63_12NA	Num	4		INDIRECT BILIRUBIN NOT AVAILABLE
109	H63_13NA	Num	4		SERUM CREATININE NOT AVAILABLE
110	H63_14NA	Num	4		BUN NOT AVAILABLE
111	H63_15NA	Num	4		ALBUMIN NOT AVAILABLE

Num	Variable	Type	Len	Format	Label
112	H63_16NA	Num	4		GLOBULIN NOT AVAILABLE
113	H6317PNA	Num	4		PATIENT VALUE NOT AVAILABLE
114	H6317CNA	Num	4		CONTROL VALUE NOT AVAILABLE
115	H6317INA	Num	4		INR NOT AVAILABLE
116	H63_18NA	Num	4		CHOLESTEROL NOT AVAILABLE
117	H63HIVNA	Num	4		HIV DATA NOT AVAILABLE
118	nohiv	Num	4		SUBJECT NOT HIV POSITIVE
119	H63IRONA	Num	4		NO IRON RESULTS AVAILABLE W/I PAST 12 MO
120	H63_21NA	Num	4		SERUM IRON NOT AVAILABLE
121	H63_22NA	Num	4		TOTAL IRON-BINDING CAPACITY NOT AVAIL.
122	H63_23NA	Num	4		SERUM FERRITIN NOT AVAILABLE
123	H63INHNA	Num	4		NO INHIBITOR RESULTS AVAIL. PAST 12 MO
124	VISIT_DT	Num	4	8.	VISIT DATE (SAS DATE): Converted to days since reference date
125	VISIT_DF	Num	4		VISIT DATE: IMPUTE FLAG
126	SUBJ_ID	Char	8		MHCS SUBJECT IDENTIFIER