Data Set Name: ae.sas7bdat

Num	Variable	Type	Len	Format	Label
1	AE001V	Num	8	F2.	Visit month #: 1
2	AE001D	Num	8	F2.	# of episodes: 1
3	AE001E	Num	8	AE001E.	Severity: 1
4	AE001F	Num	8	AE001F.	Relationship to intervention: 1
5	AE001G	Num	8	AE001G.	Action taken: 1
6	AE001H	Num	8	AE001H.	Serious: 1
7	AE001I	Num	8	AE001I.	Expected: 1
8	AE002V	Num	8	F2.	Visit month #: 2
9	AE002D	Num	8	F2.	# of episodes: 2
10	AE002E	Num	8	AE002E.	Severity: 2
11	AE002F	Num	8	AE002F.	Relationship to intervention: 2
12	AE002G	Num	8	AE002G.	Action taken: 2
13	AE002H	Num	8	AE002H.	Serious: 2
14	AE002I	Num	8	AE002I.	Expected: 2
15	AE003V	Num	8	F2.	Visit month #: 3
16	AE003D	Num	8	F2.	# of episodes: 3
17	AE003E	Num	8	AE003E.	Severity: 3
18	AE003F	Num	8	AE003F.	Relationship to intervention: 3
19	AE003G	Num	8	AE003G.	Action taken: 3
20	AE003H	Num	8	AE003H.	Serious: 3
21	AE003I	Num	8	AE003I.	Expected: 3
22	AE004V	Num	8	F2.	Visit month #: 4
23	AE004D	Num	8	F2.	# of episodes: 4
24	AE004E	Num	8	AE004E.	Severity: 4
25	AE004F	Num	8	AE004F.	Relationship to intervention: 4
26	AE004G	Num	8	AE004G.	Action taken: 4
27	AE004H	Num	8	AE004H.	Serious: 4
28	AE004I	Num	8	AE004I.	Expected: 4
29	AE005V	Num	8	F2.	Visit month #: 5
30	AE005D	Num	8	F2.	# of episodes: 5
31	AE005E	Num	8	AE005E.	Severity: 5
32	AE005F	Num	8	AE005F.	Relationship to intervention: 5
33	AE005G	Num	8	AE005G.	Action taken: 5
34	AE005H	Num	8	AE005H.	Serious: 5
35	AE005I	Num	8	AE005I.	Expected: 5
36	AE006V	Num	8	F2.	Visit month #: 6
37	AE006D	Num	8	F2.	# of episodes: 6

Num	Variable	Type	Len	Format	Label
38	AE006E	Num	8	AE006E.	Severity: 6
39	AE006F	Num	8	AE006F.	Relationship to intervention: 6
40	AE006G	Num	8	AE006G.	Action taken: 6
41	AE006H	Num	8	AE006H.	Serious: 6
42	AE006I	Num	8	AE006I.	Expected: 6
43	AE007V	Num	8	F2.	Visit month #: 7
44	AE007D	Num	8	F2.	# of episodes: 7
45	AE007E	Num	8	AE007E.	Severity: 7
46	AE007F	Num	8	AE007F.	Relationship to intervention: 7
47	AE007G	Num	8	AE007G.	Action taken: 7
48	AE007H	Num	8	AE007H.	Serious: 7
49	AE007I	Num	8	AE007I.	Expected: 7
50	AE008V	Num	8	F2.	Visit month #: 8
51	AE008D	Num	8	F2.	# of episodes: 8
52	AE008E	Num	8	AE008E.	Severity: 8
53	AE008F	Num	8	AE008F.	Relationship to intervention: 8
54	AE008G	Num	8	AE008G.	Action taken: 8
55	AE008H	Num	8	AE008H.	Serious: 8
56	AE008I	Num	8	AE008I.	Expected: 8
57	AE009V	Num	8	F2.	Visit month #: 9
58	AE009D	Num	8	F2.	# of episodes: 9
59	AE009E	Num	8	AE009E.	Severity: 9
60	AE009F	Num	8	AE009F.	Relationship to intervention: 9
61	AE009G	Num	8	AE009G.	Action taken: 9
62	AE009H	Num	8	AE009H.	Serious: 9
63	AE009I	Num	8	AE009I.	Expected: 9
64	AE010V	Num	8	F2.	Visit month #: 10
65	AE010D	Num	8	F2.	# of episodes: 10
66	AE010E	Num	8	AE010E.	Severity: 10
67	AE010F	Num	8	AE010F.	Relationship to intervention: 10
68	AE010G	Num	8	AE010G.	Action taken: 10
69	AE010H	Num	8	AE010H.	Serious: 10
70	AE010I	Num	8	AE010I.	Expected: 10
71	AE011V	Num	8	F2.	Visit month #: 11
72	AE011D	Num	8	F2.	# of episodes: 11
73	AE011E	Num	8	AE011E.	Severity: 11
74	AE011F	Num	8	AE011F.	Relationship to intervention: 11
75	AE011G	Num	8	AE011G.	Action taken: 11
76	AE011H	Num	8	AE011H.	Serious: 11

Num	Variable	Type	Len	Format	Label
77	AE011I	Num	8	AE011I.	Expected: 11
78	AE012V	Num	8	F2.	Visit month #: 12
79	AE012D	Num	8	F2.	# of episodes: 12
80	AE012E	Num	8	AE012E.	Severity: 12
81	AE012F	Num	8	AE012F.	Relationship to intervention: 12
82	AE012G	Num	8	AE012G.	Action taken: 12
83	AE012H	Num	8	AE012H.	Serious: 12
84	AE012I	Num	8	AE012I.	Expected: 12
85	AE013V	Num	8	F2.	Visit month #: 13
86	AE013D	Num	8	F2.	# of episodes: 13
87	AE013E	Num	8	AE013E.	Severity: 13
88	AE013F	Num	8	AE013F.	Relationship to intervention: 13
89	AE013G	Num	8	AE013G.	Action taken: 13
90	AE013H	Num	8	AE013H.	Serious: 13
91	AE013I	Num	8	AE013I.	Expected: 13
92	AE014V	Num	8	F2.	Visit month #: 14
93	AE014D	Num	8	F2.	# of episodes: 14
94	AE014E	Num	8	AE014E.	Severity: 14
95	AE014F	Num	8	AE014F.	Relationship to intervention: 14
96	AE014G	Num	8	AE014G.	Action taken: 14
97	AE014H	Num	8	AE014H.	Serious: 14
98	AE014I	Num	8	AE014I.	Expected: 14
99	AE015V	Num	8	F2.	Visit month #: 15
100	AE015D	Num	8	F2.	# of episodes: 15
101	AE015E	Num	8	AE015E.	Severity: 15
102	AE015F	Num	8	AE015F.	Relationship to intervention: 15
103	AE015G	Num	8	AE015G.	Action taken: 15
104	AE015H	Num	8	AE015H.	Serious: 15
105	AE015I	Num	8	AE015I.	Expected: 15
106	AE016V	Num	8	F2.	Visit month #: 16
107	AE016D	Num	8	F2.	# of episodes: 16
108	AE016E	Num	8	AE016E.	Severity: 16
109	AE016F	Num	8	AE016F.	Relationship to intervention: 16
110	AE016G	Num	8	AE016G.	Action taken: 16
111	AE016H	Num	8	AE016H.	Serious: 16
112	AE016I	Num	8	AE016I.	Expected: 16
113	AE017V	Num	8	F2.	Visit month #: 17
114	AE017D	Num	8	F2.	# of episodes: 17
115	AE017E	Num	8	AE017E.	Severity: 17

Num	Variable	Type	Len	Format	Label
116	AE017F	Num	8	AE017F.	Relationship to intervention: 17
117	AE017G	Num	8	AE017G.	Action taken: 17
118	AE017H	Num	8	AE017H.	Serious: 17
119	AE017I	Num	8	AE017I.	Expected: 17
120	AE018V	Num	8	F2.	Visit month #: 18
121	AE018D	Num	8	F2.	# of episodes: 18
122	AE018E	Num	8	AE018E.	Severity: 18
123	AE018F	Num	8	AE018F.	Relationship to intervention: 18
124	AE018G	Num	8	AE018G.	Action taken: 18
125	AE018H	Num	8	AE018H.	Serious: 18
126	AE018I	Num	8	AE018I.	Expected: 18
127	AE019V	Num	8	F2.	Visit month #: 19
128	AE019D	Num	8	F2.	# of episodes: 19
129	AE019E	Num	8	AE019E.	Severity: 19
130	AE019F	Num	8	AE019F.	Relationship to intervention: 19
131	AE019G	Num	8	AE019G.	Action taken: 19
132	AE019H	Num	8	AE019H.	Serious: 19
133	AE019I	Num	8	AE019I.	Expected: 19
134	AE020V	Num	8	F2.	Visit month #: 20
135	AE020D	Num	8	F2.	# of episodes: 20
136	AE020E	Num	8	AE020E.	Severity: 20
137	AE020F	Num	8	AE020F.	Relationship to intervention: 20
138	AE020G	Num	8	AE020G.	Action taken: 20
139	AE020H	Num	8	AE020H.	Serious: 20
140	AE020I	Num	8	AE020I.	Expected: 20
141	DAYS_AE1	Num	8	F5.	Days with AE1
142	DAYS_AE2	Num	8	F5.	Days with AE2
143	DAYS_AE3	Num	8	F5.	Days with AE 3
144	DAYS_AE4	Num	8	F5.	Days with AE4
145	DAYS_AE5	Num	8	F5.	Days with AE5
146	DAYS_AE6	Num	8	F8.	Days with AE6
147	DAYS_AE7	Num	8	F5.	Days with AE7
148	DAYS_AE8	Num	8	F5.	Days with AE8
149	DAYS_AE9	Num	8	F5.	Days with AE9
150	DAYS_AE10	Num	8	F5.	Days with AE10
151	DAYS_AE11	Num	8	F5.	Days with AE11
152	DAYS_AE12	Num	8	F5.	Days with AE12
153	DAYS_AE13	Num	8	F5.	Days with AE13
154	DAYS_AE14	Num	8	F5.	Days with AE14

Num	Variable	Type	Len	Format	Label
155	DAYS_AE15	Num	8	F5.	Days with AE15
156	DAYS_AE16	Num	8	F5.	Days with AE16
157	DAYS_AE17	Num	8	F5.	Days with AE 17
158	DAYS_AE18	Num	8	F5.	Days with AE18
159	DAYS_AE19	Num	8	F5.	Days with AE19
160	DAYS_AE20	Num	8	F5.	Days with AE20
161	RAND_ID	Num	8		Randomized ID

Data Set Name: baseline_qre.sas7bdat

Num	Variable	Type	Len	Label
1	GENDER	Num	3	Gender
2	AGE1	Num	3	Age
3	MARISTAT	Num	3	Marital Status
4	SMOKE1	Num	3	Smoked at least 100 cigarettes in entire life
5	SMOKE2	Num	3	Do you smoke cigarettes every day, some days, or not at all
6	ALCOHOL1	Num	8	How many servings of alcohol do you have in a typical week
7	ETHNICITY	Num	3	Are you Hispanic or Latino
8	RACE_NEW	Num	3	Race
9	HEALTH_INS	Num	3	Health Insurance
10	HIS2	Num	3	Do you have one person you think of as personal doctor
11	HIS3	Num	3	Was there a time in the past 12 months when you needed to see a doctor but could not because of cost
12	EDUCATE1	Num	3	What is the highest grade or year of school you completed
13	INCOME1	Num	3	Are you currently
14	INCOME2	Num	3	Annual household income
15	DIABETE1	Num	3	Have you ever been told by a doctor or other health professional that you have diabetes
16	DIABETE2	Num	3	Because of your diabetes, have you ever been prescribed medicine
17	DIABETE3	Num	3	Because of your diabetes, are you now taking prescribed medicine
18	BLDPRE1	Num	3	Have you ever been told by a doctor or other health professional that you have hypertension
19	BLDPRE2	Num	3	Because of your hypertension, have you ever been prescribed medicine
20	BLDPRE3	Num	3	Because of your hypertension, are you now taking prescribed medicine
21	HIGHCHO1	Num	3	Have you ever been told by a doctor or other health professional that your blood cholesterol level was high
22	HIGHCHO2	Num	3	Because of your cholesterol, have you ever been prescribed medicine
23	HIGHCHO3	Num	3	Because of your cholesterol, are you now taking medicine
24	CARDIO1	Num	3	Have you ever been told by a doctor or other health professional that you had heart attack
25	CARDIO2	Num	3	Have you ever been told by a doctor or other health professional that you had stroke
26	CARDIO3	Num	3	Have you ever had coronary artery bypass surgery or any procedure to open up the arteries of your heart
27	CARDIO4	Num	3	Have you ever been told by a doctor or other health professional that you had angina
28	CARDIO5	Num	3	Have you ever had a blockage in the arteries to your legs
29	HEALIT1	Num	3	How often do you have someone to help you read medical materials
30	HEALIT2	Num	3	How confident are you filling out medical forms about yourself
31	HEALIT3	Num	3	How often do you have problems learning about your medical condition because of difficulty understanding written information
32	PRIMLAN1	Num	3	Your primary language
33	INTRNT1	Num	3	How often do you use the internet for personal matters?
34	INTRNT21	Num	3	Where do you have access to the internet for personal matters: at home

Num	Variable	Type	Len	Label
35	INTRNT22	Num	3	Where do you have access to the internet for personal matters: at work
36	INTRNT23	Num	3	Where do you have access to the internet for personal matters: at library, church, or other public location
37	INTRNT24	Num	3	Where do you have access to the internet for personal matters: from mobile device
38	INTRNT25	Num	3	Where do you have access to the internet for personal matters: other
39	INTRNT26	Num	3	Where do you have access to the internet for personal matters: refuse to answer
40	Visit	Num	3	Visit
41	RAND_ID	Num	8	Randomized ID

Data Set Name: bphq.sas7bdat

Num	Variable	Type	Len	Label
1	BPH001A	Num	3	Over the past 2 weeks, how often bothered by: little interest or pleasure doing things
2	BPH001B	Num	3	Over the past 2 weeks, how often bothered by: feeling down
3	BPH001C	Num	3	Over the past 2 weeks, how often bothered by: trouble falling or staying asleep or sleeping too much
4	BPH001D	Num	3	Over the past 2 weeks, how often bothered by: feeling tired
5	BPH001E	Num	3	Over the past 2 weeks, how often bothered by: poor appetite or overeating
6	BPH001F	Num	3	Over the past 2 weeks, how often bothered by: feeling bad about yourself
7	BPH001G	Num	3	Over the past 2 weeks, how often bothered by: trouble concentrating on things
8	BPH001H	Num	3	Over the past 2 weeks, how often bothered by: moving or speaking so slowly
9	Visit	Num	3	Visit
10	RAND_ID	Num	8	Randomized ID

Data Set Name: conmeds.sas7bdat

Num	Variable	Type	Len	Label
1	CON001A	Char	23	Medication: 1
2	CON001D	Num	3	Ongoing: 1
3	CON001E	Num	8	Dose: 1
4	CON001F	Char	4	Unit: 1
5	CON001G	Num	3	Route: 1
6	CON001H	Num	3	Frequency of dose: 1
7	CON001I	Char	6	Drug class: 1
8	CON001J	Char	35	Indication: 1
9	CON001K	Num	3	Cost per month: 1
10	CON002A	Char	24	Medication: 2
11	CON002D	Num	3	Ongoing: 2
12	CON002E	Num	8	Dose: 2
13	CON002F	Char	4	Unit: 2
14	CON002G	Num	3	Route: 2
15	CON002H	Num	3	Frequency of dose: 2
16	CON002I	Char	6	Drug class: 2
17	CON002J	Char	44	Indication: 2
18	CON002K	Num	3	Cost per month: 2
19	CON003A	Char	32	Medication: 3
20	CON003D	Num	3	Ongoing: 3
21	CON003E	Num	8	Dose: 3
22	CON003F	Char	4	Unit: 3
23	CON003G	Num	3	Route: 3
24	CON003H	Num	3	Frequency of dose: 3
25	CON003I	Char	6	Drug class: 3
26	CON003J	Char	44	Indication: 3
27	CON003K	Num	3	Cost per month: 3
28	CON004A	Char	31	Medication: 4
29	CON004D	Num	3	Ongoing: 4
30	CON004E	Num	8	Dose: 4
31	CON004F	Char	4	Unit: 4
32	CON004G	Num	3	Route: 4
33	CON004H	Num	3	Frequency of dose: 4
34	CON004I	Char	6	Drug class: 4
35	CON004J	Char	37	Indication: 4
36	CON004K	Num	3	Cost per month: 4

Num	Variable	Type	Len	Label
37	CON005A	Char	28	Medication: 5
38	CON005D	Num	3	Ongoing: 5
39	CON005E	Num	8	Dose: 5
40	CON005F	Char	4	Unit: 5
41	CON005G	Num	3	Route: 5
42	CON005H	Num	3	Frequency of dose: 5
43	CON005I	Char	6	Drug class: 5
44	CON005J	Char	37	Indication: 5
45	CON005K	Num	3	Cost per month: 5
46	CON006A	Char	28	Medication: 6
47	CON006D	Num	3	Ongoing: 6
48	CON006E	Num	8	Dose: 6
49	CON006F	Char	4	Unit: 6
50	CON006G	Num	3	Route: 6
51	CON006H	Num	3	Frequency of dose: 6
52	CON006I	Char	6	Drug class: 6
53	CON006J	Char	37	Indication: 6
54	CON006K	Num	3	Cost per month: 6
55	CON007A	Char	25	Medication: 7
56	CON007D	Num	3	Ongoing: 7
57	CON007E	Num	8	Dose: 7
58	CON007F	Char	4	Unit: 7
59	CON007G	Num	3	Route: 7
60	CON007H	Num	3	Frequency of dose: 7
61	CON007I	Char	6	Drug class: 7
62	CON007J	Char	36	Indication: 7
63	CON007K	Num	3	Cost per month: 7
64	CON008A	Char	31	Medication: 8
65	CON008D	Num	3	Ongoing: 8
66	CON008E	Num	8	Dose: 8
67	CON008F	Char	3	Unit: 8
68	CON008G	Num	3	Route: 8
69	CON008H	Num	3	Frequency of dose: 8
70	CON008I	Char	6	Drug class: 8
71	CON008J	Char	36	Indication: 8
72	CON008K	Num	3	Cost per month: 8
73	CON009A	Char	21	Medication: 9
74	CON009D	Num	3	Ongoing: 9
75	CON009E	Num	8	Dose: 9

Num	Variable	Type	Len	Label
76	CON009F	Char	4	Unit: 9
77	CON009G	Num	3	Route: 9
78	CON009H	Num	3	Frequency of dose: 9
79	CON009I	Char	6	Drug class: 9
80	CON009J	Char	36	Indication: 9
81	CON009K	Num	3	Cost per month: 9
82	CON010A	Char	25	Medication: 10
83	CON010D	Num	3	Ongoing: 10
84	CON010E	Num	8	Dose: 10
85	CON010F	Char	4	Unit: 10
86	CON010G	Num	3	Route: 10
87	CON010H	Num	3	Frequency of dose: 10
88	CON010I	Char	6	Drug class: 10
89	CON010J	Char	36	Indication: 10
90	CON010K	Num	3	Cost per month: 10
91	CON011A	Char	21	Medication: 11
92	CON011D	Num	3	Ongoing: 11
93	CON011E	Num	8	Dose: 11
94	CON011F	Char	4	Unit: 11
95	CON011G	Num	3	Route: 11
96	CON011H	Num	3	Frequency of dose: 11
97	CON011I	Char	6	Drug class: 11
98	CON011J	Char	31	Indication: 11
99	CON011K	Num	3	Cost per month: 11
100	CON012A	Char	22	Medication: 12
101	CON012D	Num	3	Ongoing: 12
102	CON012E	Num	8	Dose: 12
103	CON012F	Char	4	Unit: 12
104	CON012G	Num	3	Route: 12
105	CON012H	Num	3	Frequency of dose: 12
106	CON012I	Char	6	Drug class: 12
107	CON012J	Char	36	Indication: 12
108	CON012K	Num	3	Cost per month: 12
109	CON013A	Char	31	Medication: 13
110	CON013D	Num	3	Ongoing: 13
111	CON013E	Num	8	Dose: 13
112	CON013F	Char	4	Unit: 13
113	CON013G	Num	3	Route: 13
114	CON013H	Num	3	Frequency of dose: 13

Num	Variable	Type	Len	Label
115	CON013I	Char	5	Drug class: 13
116	CON013J	Char	36	Indication: 13
117	CON013K	Num	3	Cost per month: 13
118	CON014A	Char	25	Medication: 14
119	CON014D	Num	3	Ongoing: 14
120	CON014E	Num	8	Dose: 14
121	CON014F	Char	3	Unit: 14
122	CON014G	Num	3	Route: 14
123	CON014H	Num	3	Frequency of dose: 14
124	CON014I	Char	6	Drug class: 14
125	CON014J	Char	36	Indication: 14
126	CON014K	Num	3	Cost per month: 14
127	CON015A	Char	19	Medication: 15
128	CON015D	Num	3	Ongoing: 15
129	CON015E	Num	8	Dose: 15
130	CON015F	Char	4	Unit: 15
131	CON015G	Num	3	Route: 15
132	CON015H	Num	3	Frequency of dose: 15
133	CON015I	Char	5	Drug class: 15
134	CON015J	Char	36	Indication: 15
135	CON015K	Num	3	Cost per month: 15
136	CON016A	Char	15	Medication: 16
137	CON016D	Num	3	Ongoing: 16
138	CON016E	Num	8	Dose: 16
139	CON016F	Char	3	Unit: 16
140	CON016G	Num	3	Route: 16
141	CON016H	Num	3	Frequency of dose: 16
142	CON016I	Char	6	Drug class: 16
143	CON016J	Char	36	Indication: 16
144	CON016K	Num	3	Cost per month: 16
145	CON017A	Char	19	Medication: 17
146	CON017D	Num	3	Ongoing: 17
147	CON017E	Num	4	Dose: 17
148	CON017F	Char	2	Unit: 17
149	CON017G	Num	3	Route: 17
150	CON017H	Num	3	Frequency of dose: 17
151	CON017I	Char	5	Drug class: 17
152	CON017J	Char	36	Indication: 17
153	CON017K	Num	3	Cost per month: 17

Num	Variable	Type	Len	Label
154	CON018A	Char	13	Medication: 18
155	CON018D	Num	3	Ongoing: 18
156	CON018E	Num	8	Dose: 18
157	CON018F	Char	2	Unit: 18
158	CON018G	Num	3	Route: 18
159	CON018H	Num	3	Frequency of dose: 18
160	CON018I	Char	5	Drug class: 18
161	CON018J	Char	28	Indication: 18
162	CON018K	Num	3	Cost per month: 18
163	CON019A	Char	33	Medication: 19
164	CON019D	Num	3	Ongoing: 19
165	CON019E	Num	8	Dose: 19
166	CON019F	Char	2	Unit: 19
167	CON019G	Num	3	Route: 19
168	CON019H	Num	3	Frequency of dose: 19
169	CON019I	Char	6	Drug class: 19
170	CON019J	Char	32	Indication: 19
171	CON019K	Num	3	Cost per month: 19
172	CON020A	Char	11	Medication: 20
173	CON020D	Num	3	Ongoing: 20
174	CON020E	Num	4	Dose: 20
175	CON020F	Char	2	Unit: 20
176	CON020G	Num	3	Route: 20
177	CON020H	Num	3	Frequency of dose: 20
178	CON020I	Char	4	Drug class: 20
179	CON020J	Char	14	Indication: 20
180	CON020K	Num	3	Cost per month: 20
181	CON021A	Char	13	Medication: 21
182	CON021D	Num	3	Ongoing: 21
183	CON021E	Num	4	Dose: 21
184	CON021F	Char	2	Unit: 21
185	CON021G	Num	3	Route: 21
186	CON021H	Num	3	Frequency of dose: 21
187	CON021I	Char	4	Drug class: 21
188	CON021J	Char	14	Indication: 21
189	CON021K	Num	3	Cost per month: 21
190	CON022A	Char	21	Medication: 22
191	CON022D	Num	3	Ongoing: 22
192	CON022E	Num	3	Dose: 22

Num	Variable	Type	Len	Label
193	CON022F	Char	2	Unit: 22
194	CON022G	Num	3	Route: 22
195	CON022H	Num	3	Frequency of dose: 22
196	CON022I	Char	4	Drug class: 22
197	CON022J	Char	12	Indication: 22
198	CON022K	Num	3	Cost per month: 22
199	CON023A	Char	11	Medication: 23
200	CON023D	Num	3	Ongoing: 23
201	CON023E	Num	4	Dose: 23
202	CON023F	Char	2	Unit: 23
203	CON023G	Num	3	Route: 23
204	CON023H	Num	3	Frequency of dose: 23
205	CON023I	Char	5	Drug class: 23
206	CON023J	Char	12	Indication: 23
207	CON023K	Num	3	Cost per month: 23
208	CON024A	Char	11	Medication: 24
209	CON024D	Num	3	Ongoing: 24
210	CON024E	Num	3	Dose: 24
211	CON024F	Char	2	Unit: 24
212	CON024G	Num	3	Route: 24
213	CON024H	Num	3	Frequency of dose: 24
214	CON024I	Char	2	Drug class: 24
215	CON024J	Char	8	Indication: 24
216	CON024K	Num	3	Cost per month: 24
217	CON025A	Char	1	Medication: 25
218	CON025D	Num	3	Ongoing: 25
219	CON025E	Num	3	Dose: 25
220	CON025F	Char	1	Unit: 25
221	CON025G	Num	3	Route: 25
222	CON025H	Num	3	Frequency of dose: 25
223	CON025I	Char	1	Drug class: 25
224	CON025J	Char	1	Indication: 25
225	CON025K	Num	3	Cost per month: 25
226	Visit	Num	3	Visit
227	DAYS_CMED1	Num	4	Days on conmed 1
228	DAYS_CMED2	Num	4	Days on conmed 2
229	DAYS_CMED3	Num	4	Days on conmed 3
230	DAYS_CMED4	Num	4	Days on conmed 4
231	DAYS_CMED5	Num	4	Days on conmed 5

Num	Variable	Type	Len	Label
232	DAYS_CMED6	Num	4	Days on conmed 6
233	DAYS_CMED7	Num	4	Days on conmed 7
234	DAYS_CMED8	Num	4	Days on conmed 8
235	DAYS_CMED9	Num	4	Days on conmed 9
236	DAYS_CMED10	Num	6	Days on conmed 10
237	DAYS_CMED11	Num	4	Days on conmed 11
238	DAYS_CMED12	Num	4	Days on conmed 12
239	DAYS_CMED13	Num	4	Days on conmed 13
240	DAYS_CMED14	Num	4	Days on conmed 14
241	DAYS_CMED15	Num	4	Days on conmed 15
242	DAYS_CMED16	Num	3	Days on conmed 16
243	DAYS_CMED17	Num	4	Days on conmed 17
244	DAYS_CMED18	Num	4	Days on conmed 18
245	DAYS_CMED19	Num	4	Days on conmed 19
246	DAYS_CMED20	Num	4	Days on conmed 20
247	DAYS_CMED21	Num	3	Days on conmed 21
248	DAYS_MED22	Num	4	Days on conmed 22
249	DAYS_CMED23	Num	4	Days on conmed 23
250	DAYS_MED24	Num	4	Days on conmed 24
251	DAYS_CMED25	Num	3	Days on conmed 25
252	RAND_ID	Num	8	Randomized ID

Data Set Name: dal.sas7bdat

Num	Variable	Type	Len	Label
1	DAL001A	Num	3	Visit: 1
2	DAL001C	Char	11	Name: 1
3	DAL001D	Num	3	Dose: 1
4	DAL001E	Num	3	# of pills dispensed: 1
5	DAL001G	Num	3	# of pills returned: 1
6	DAL001H	Char	25	Comments: 1
7	DAL002A	Num	3	Visit: 2
8	DAL002C	Char	11	Name: 2
9	DAL002D	Num	3	Dose: 2
10	DAL002E	Num	3	# of pills dispensed: 2
11	DAL002G	Num	3	# of pills returned: 2
12	DAL002H	Char	16	Comments: 2
13	DAL003A	Num	3	Visit: 3
14	DAL003C	Char	11	Name: 3
15	DAL003D	Num	3	Dose: 3
16	DAL003E	Num	3	# of pills dispensed: 3
17	DAL003G	Num	3	# of pills returned: 3
18	DAL003H	Char	22	Comments: 3
19	DAL004A	Num	3	Visit: 4
20	DAL004C	Char	11	Name: 4
21	DAL004D	Num	3	Dose: 4
22	DAL004E	Num	3	# of pills dispensed: 4
23	DAL004G	Num	3	# of pills returned: 4
24	DAL004H	Char	16	Comments: 4
25	DAL005A	Num	3	Visit: 5
26	DAL005C	Char	11	Name: 5
27	DAL005D	Num	3	Dose: 5
28	DAL005E	Num	3	# of pills dispensed: 5
29	DAL005G	Num	3	# of pills returned: 5
30	DAL005H	Char	21	Comments: 5
31	DAL006A	Num	3	Visit: 6
32	DAL006C	Char	11	Name: 6
33	DAL006D	Num	3	Dose: 6
34	DAL006E	Num	3	# of pills dispensed: 6
35	DAL006G	Num	3	# of pills returned: 6
36	DAL006H	Char	16	Comments: 6

Num	Variable	Type	Len	Label
37	DAL007A	Num	3	Visit: 7
38	DAL007C	Char	11	Name: 7
39	DAL007D	Num	4	Dose: 7
40	DAL007E	Num	3	# of pills dispensed: 7
41	DAL007G	Num	3	# of pills returned: 7
42	DAL007H	Char	20	Comments: 7
43	DAL008A	Num	3	Visit: 8
44	DAL008C	Char	11	Name: 8
45	DAL008D	Num	4	Dose: 8
46	DAL008E	Num	3	# of pills dispensed: 8
47	DAL008G	Num	3	# of pills returned: 8
48	DAL008H	Char	17	Comments: 8
49	DAL009A	Num	3	Visit: 9
50	DAL009C	Char	11	Name: 9
51	DAL009D	Num	4	Dose: 9
52	DAL009E	Num	3	# of pills dispensed: 9
53	DAL009G	Num	3	# of pills returned: 9
54	DAL009H	Char	16	Comments: 9
55	DAL010A	Num	3	Visit: 10
56	DAL010C	Char	11	Name: 10
57	DAL010D	Num	4	Dose: 10
58	DAL010E	Num	3	# of pills dispensed: 10
59	DAL010G	Num	3	# of pills returned: 10
60	DAL010H	Char	14	Comments: 10
61	DAL011A	Num	3	Visit: 11
62	DAL011C	Char	11	Name: 11
63	DAL011D	Num	4	Dose: 11
64	DAL011E	Num	4	# of pills dispensed: 11
65	DAL011G	Num	3	# of pills returned: 11
66	DAL011H	Char	21	Comments: 11
67	DAL012A	Num	3	Visit: 12
68	DAL012C	Char	11	Name: 12
69	DAL012D	Num	4	Dose: 12
70	DAL012E	Num	3	# of pills dispensed: 12
71	DAL012G	Num	3	# of pills returned: 12
72	DAL012H	Char	22	Comments: 12
73	DAL013A	Num	3	Visit: 13
74	DAL013C	Char	11	Name: 13
75	DAL013D	Num	4	Dose: 13

Num	Variable	Type	Len	Label
76	DAL013E	Num	4	# of pills dispensed: 13
77	DAL013G	Num	3	# of pills returned: 13
78	DAL013H	Char	24	Comments: 13
79	DAL014A	Num	3	Visit: 14
80	DAL014C	Char	11	Name: 14
81	DAL014D	Num	4	Dose: 14
82	DAL014E	Num	3	# of pills dispensed: 14
83	DAL014G	Num	3	# of pills returned: 14
84	DAL014H	Char	18	Comments: 14
85	DAL015A	Num	3	Visit: 15
86	DAL015C	Char	11	Name: 15
87	DAL015D	Num	4	Dose: 15
88	DAL015E	Num	3	# of pills dispensed: 15
89	DAL015G	Num	3	# of pills returned: 15
90	DAL015H	Char	21	Comments: 15
91	DAL016A	Num	3	Visit: 16
92	DAL016C	Char	11	Name: 16
93	DAL016D	Num	4	Dose: 16
94	DAL016E	Num	4	# of pills dispensed: 16
95	DAL016G	Num	3	# of pills returned: 16
96	DAL016H	Char	12	Comments: 16
97	DAL017A	Num	3	Visit: 17
98	DAL017C	Char	11	Name: 17
99	DAL017D	Num	4	Dose: 17
100	DAL017E	Num	4	# of pills dispensed: 17
101	DAL017G	Num	4	# of pills returned: 17
102	DAL017H	Char	14	Comments: 17
103	DAL018A	Num	3	Visit: 18
104	DAL018C	Char	11	Name: 18
105	DAL018D	Num	4	Dose: 18
106	DAL018E	Num	4	# of pills dispensed: 18
107	DAL018G	Num	3	# of pills returned: 18
108	DAL018H	Char	14	Comments: 18
109	DAL019A	Num	3	Visit: 19
110	DAL019C	Char	11	Name: 19
111	DAL019D	Num	4	Dose: 19
112	DAL019E	Num	4	# of pills dispensed: 19
113	DAL019G	Num	3	# of pills returned: 19
114	DAL019H	Char	14	Comments: 19

Num	Variable	Type	Len	Label
115	DAL020A	Num	3	Visit: 20
116	DAL020C	Char	11	Name: 20
117	DAL020D	Num	4	Dose: 20
118	DAL020E	Num	4	# of pills dispensed: 20
119	DAL020G	Num	3	# of pills returned: 20
120	DAL020H	Char	23	Comments: 20
121	DAL021A	Num	3	Visit: 21
122	DAL021C	Char	11	Name: 21
123	DAL021D	Num	4	Dose: 21
124	DAL021E	Num	4	# of pills dispensed: 21
125	DAL021G	Num	3	# of pills returned: 21
126	DAL021H	Char	23	Comments: 21
127	DAL022A	Num	3	Visit: 22
128	DAL022C	Char	11	Name: 22
129	DAL022D	Num	4	Dose: 22
130	DAL022E	Num	4	# of pills dispensed: 22
131	DAL022G	Num	3	# of pills returned: 22
132	DAL022H	Char	14	Comments: 22
133	DAL023A	Num	3	Visit: 23
134	DAL023C	Char	11	Name: 23
135	DAL023D	Num	4	Dose: 23
136	DAL023E	Num	4	# of pills dispensed: 23
137	DAL023G	Num	4	# of pills returned: 23
138	DAL023H	Char	14	Comments: 23
139	TOTALE	Num	4	Total # of pills dispensed
140	TOTALG	Num	4	Total # of pills returned
141	Visit	Num	3	Visit
142	DAYS_MED1	Num	4	Days on med 1
143	DAYS_MED2	Num	4	Days on med 2
144	DAYS_MED3	Num	4	Days on med 3
145	DAYS_MED4	Num	4	Days on Med 4
146	DAYS_MED5	Num	4	Days on Med 5
147	DAYS_MED6	Num	4	Days on Med 6
148	DAYS_MED7	Num	4	Days on Med 7
149	DAYS_MED8	Num	4	Days on Med 8
150	DAYS_MED9	Num	4	Days on Med 9
151	DAYS_MED10	Num	4	Days on Med 10
152	DAYS_MED11	Num	4	Days on Med 11
153	DAYS_MED12	Num	4	Days on Med 12

Num	Variable	Type	Len	Label
154	DAYS_MED13	Num	4	Days on Med 13
155	DAYS_MED14	Num	4	Days on Med 14
156	DAYS_MED15	Num	4	Days on Med 15
157	DAYS_MED16	Num	4	Days on Med 16
158	DAYS_MED17	Num	4	Days on Med 17
159	DAYS_MED18	Num	4	Days on Med 18
160	DAYS_MED19	Num	4	Days on Med 19
161	DAYS_MED20	Num	4	Days on Med 20
162	DAYS_MED21	Num	4	Days on Med 21
163	DAYS_MED22	Num	4	Days on Med 22
164	DAYS_MED23	Num	4	Days on Med 23
165	RAND_ID	Num	8	Randomized ID

Data Set Name: dsmb_chklist.sas7bdat

Num	Variable	Type	Len	Label
1	CHK002A	Num	3	Waist: RV
2	CHK003A	Num	3	Blood pressure: RV
3	CHK004A	Num	3	Medication questinnaire: RV
4	CHK005A	Num	3	PHQ-8: RV
5	CHK006A	Num	3	Interim event form: RV
6	CHK007A	Num	3	Participation cost form: RV
7	CHK008A	Num	3	Lipids: RV
8	CHK009A	Num	3	Glucose: RV
9	CHK010A	Num	3	The fat screener: RV
10	CHK011A	Num	3	The fruit and vegetable screener: RV
11	CHK012A	Num	3	The Paffengarger Survey: RV
12	CHK013A	Num	3	Weight (6 wk window): RV
13	CHK002B	Num	3	Waist: 6 months
14	CHK003B	Num	3	Blood pressure: 6 months
15	CHK004B	Num	3	Medication questinnaire: 6 months
16	CHK005B	Num	3	PHQ-8: 6 months
17	CHK006B	Num	3	Interim event form: 6 months
18	CHK007B	Num	3	Participation cost form: 6 months
19	CHK008B	Num	3	Lipids: 6 months
20	CHK009B	Num	3	Glucose: 6 months
21	CHK010B	Num	3	The fat screener: 6 months
22	CHK011B	Num	3	The fruit and vegetable screener: 6 months
23	CHK012B	Num	3	The Paffenbarger Survey: 6 months
24	CHK013B	Num	3	Weight (6 wk window): 6 months
25	CHK014B	Num	3	Weight (8 wk window): 6 months
26	CHK002C	Num	3	Waist: 12 months
27	CHK003C	Num	3	Blood pressure: 12 months
28	CHK004C	Num	3	Medication questinnaire: 12 months
29	CHK005C	Num	3	PHQ-8: 12 months
30	CHK006C	Num	3	Interim event form: 12 months
31	CHK007C	Num	3	Participation cost form: 12 months
32	CHK008C	Num	3	Lipids: 12 months
33	CHK009C	Num	3	Glucose: 12 months
34	CHK010C	Num	3	The fat screener: 12 months
35	CHK011C	Num	3	The fruit and vegetable screener: 12 months
36	CHK012C	Num	3	The Paffenbarger Survey: 12 months

Num	Variable	Type	Len	Label
37	CHK013C	Num	3	Weight (6 wk window): 12 months
38	CHK014C	Num	3	Weight (8 wk window): 12 months
39	CHK002D	Num	3	Waist: 18 months
40	CHK003D	Num	3	Blood pressure: 18 months
41	CHK004D	Num	3	Medication questinnaire: 18 months
42	CHK005D	Num	3	PHQ-8: 18 months
43	CHK006D	Num	3	Interim event form: 18 months
44	CHK007D	Num	3	Participation cost form: 18 months
45	CHK008D	Num	3	Lipids: 18 months
46	CHK009D	Num	3	Glucose: 18 months
47	CHK010D	Num	3	The fat screener: 18 months
48	CHK011D	Num	3	The fruit and vegetable screener: 18 months
49	CHK012D	Num	3	The Paffenbarger Survey: 18 months
50	CHK013D	Num	3	Weight (6 wk window): 18 months
51	CHK014D	Num	3	Weight (8 wk window): 18 months
52	CHK002E	Num	3	Waist: 24 months
53	CHK003E	Num	3	Blood pressure: 24 months
54	CHK004E	Num	3	Medication questinnaire: 24 months
55	CHK005E	Num	3	PHQ-8: 24 months
56	CHK006E	Num	3	Interim event form: 24 months
57	CHK007E	Num	3	Participation cost form: 24 months
58	CHK008E	Num	3	Lipids: 24 months
59	CHK009E	Num	3	Glucose: 24 months
60	CHK010E	Num	3	The fat screener: 24 months
61	CHK011E	Num	3	The fruit and vegetable screener: 24 months
62	CHK012E	Num	3	The Paffenbarger Survey: 24 months
63	CHK013E	Num	3	Weight (6 wk window): 24 months
64	CHK014E	Num	3	Weight (8 wk window): 24 months
65	RAND_ID	Num	8	Randomized ID

Data Set Name: eat_inventory.sas7bdat

Num	Variable	Type	Len	Label
1	EAT001	Char	1	When I smell a sizzling steak or see a juicy piece of meat, I find it very difficult to keep from eating, even if I have just finished a meal
2	EAT002	Char	1	I usually eat too much at social occasions, like parties and picnics
3	EAT003	Char	1	I am usually so hungry that I eat more than three times a day
4	EAT004	Char	1	When I have eaten my quota of calories or fat, I am usually good about not eating any more
5	EAT005	Char	1	Dieting is so hard for me because I just get too hungry
6	EAT006	Char	1	I deliberately take small helpings as a means of controlling my weight
7	EAT007	Char	1	Sometimes things just taste so good that I keep on eating even when I am no longer hungry
8	EAT008	Char	1	Since I am often hungry, I sometimes wish that while I am eating, an expert would tell me that I have had enough or that I can have something more to eat
9	EAT009	Char	1	When I feel anxious, I find myself eating
10	EAT010	Char	1	Life is too short to worry about dieting
11	EAT011	Char	1	Since my weight goes up and down, I have gone on reducing diets more than once
12	EAT012	Char	1	I often feel so hungry that I just have to eat something
13	EAT013	Char	1	When I am with someone who is overeating, I usually overeat too
14	EAT014	Char	1	I have a pretty good idea of the number of calories in common foods
15	EAT015	Char	1	Sometimes when I start eating, I just can't seem to stop
16	EAT016	Char	1	It is not difficult for me to leave something on my plate
17	EAT017	Char	1	At certain times of the day, I get hungry because I have gotten used to eating then
18	EAT018	Char	1	While on a diet, if I eat food that is not allowed, I consciously eat less for a period of time to make up for it
19	EAT019	Char	1	Being with someone who is eating often makes me hungry enough to eat also
20	EAT020	Char	1	When I feel sad or blue, I often overeat
21	EAT021	Char	1	I enjoy eating too much to spoil it by counting calories, or watching my weight
22	EAT022	Char	1	When I see a real delicacy, I often get so hungry that I have to eat right away
23	EAT023	Char	1	I often stop eating when I am not really full as a conscious means of limiting the amount that I eat
24	EAT024	Char	1	I get so hungry that my stomach often seems like a bottomless pit
25	EAT025	Char	1	My weight has hardly changed at all in the last ten years
26	EAT026	Char	1	I am always hungry, so it is hard for me to stop eating before I finish the food on my plate
27	EAT027	Char	1	When I feel lonely, I console myself by eating
28	EAT028	Char	1	I consciously hold back at meals in order not to gain weight
29	EAT029	Char	1	I sometimes get very hungry late in the evening or at night
30	EAT030	Char	1	I eat anything I want, any time I want
31	EAT031	Char	1	Without even thinking about it, I take a long time to eat
32	EAT032	Char	1	I count calories as a conscious means of controlling my weight
33	EAT033	Char	1	I do not eat some foods because they make me fat
34	EAT034	Char	1	I am always hungry enough to eat at any time
35	EAT035	Char	1	I pay a great deal of attention to changes in my figure

Num	Variable	Type	Len	Label
36	EAT036	Char	1	While on a diet, if I eat a food that is not allowed, I often then splurge and eat other high calorie foods
37	EAT037	Num	3	How often are you dieting in a conscious effort to control your weight?
38	EAT038	Num	3	Would a weight fluctuation of five pounds affect the way you live your life
39	EAT039	Num	3	How often do you feel hungry
40	EAT040	Num	3	Do your feelings of guilt about overeating help you to control your food intake?
41	EAT041	Num	3	How difficult would it be for you to stop eating halfway through dinner and not eat for the next four hours?
42	EAT042	Num	3	How conscious are you of what you are eating?
43	EAT043	Num	3	How frequently do you avoid stocking up on tempting foods?
44	EAT044	Num	3	How likely are you to shop for low-calorie foods
45	EAT045	Num	3	Do you eat sensibly in front of others and splurge alone?
46	EAT046	Num	3	How likely are you to consciously eat slowly in order to cut down on how much you eat?
47	EAT047	Num	3	How frequently do you skip dessert because you are no longer hungry?
48	EAT048	Num	3	How likely are you to consciously eat less than you want
49	EAT049	Num	3	Do you go on eating binges even though you are not hungry
50	EAT050	Num	3	I start dieting in the morning, by evening I have given up and eat what I want, promising myself to start dieting again tomorrow
51	EAT051	Num	3	what number would you give yourself?
52	Visit	Num	3	Visit
53	RAND_ID	Num	8	Randomized ID

Data Set Name: ebq.sas7bdat

Num	Variable	Type	Len	Label
1	EBQ001	Num	3	How hungry did you feel in the past week: length (mm)
2	EBQ002	Num	3	How much did you think about wanting to eat in the past week: length (mm)
3	EBQ003	Num	3	How convenient were your meals to prepare in the past week: Length (mm)
4	EBQ004	Num	3	How much did you like your meal in the past week: Length (mm)
5	EBQ005	Num	3	Indicate the extent to which your meals disrupted your normal social eating behavior: Length (mm)
6	EBQ006	Num	3	How full did you feel after consuming your meals in the past week: Length (mm)
7	EBQ007	Num	3	How often did you find yourself craving certain foods in the past week
8	EBQ008	Num	3	Rate your satisfaction with your diet in the past week: Length (mm)
9	Visit	Num	3	Visit
10	RAND_ID	Num	8	Randomized ID

Data Set Name: ef.sas7bdat

Num	Variable	Type	Len	Label
1	EF001	Num	3	Over the past 4 weeks, how often were you able to get an erection during sexual activity
2	EF002	Num	3	Over the past 4 weeks, when you had erections with sexual stimulation, how often were your erections hard enough for penetration
3	EF003	Num	3	Over the past 4 weeks, when you attempted sexual intercourse, how often were you able to penetrate (enter) your partner
4	EF004	Num	3	Over the past 4 weeks, during sexual intercourse, how often were you able to maintain your erection after you had penetrated (entered) your partner
5	EF005	Num	3	Over the past 4 weeks, during sexual intercourse, how difficult was it to maintain your erection to completion of intercourse
6	EF006	Num	3	Over the past 4 weeks, how many times have you attempted sexual intercourse
7	EF007	Num	3	Over the past 4 weeks, when you attempted sexual intercourse, how often was it satisfactory for you
8	EF008	Num	3	Over the past 4 weeks, how much have you enjoyed sexual intercourse
9	EF009	Num	3	Over the past 4 weeks, when you had sexual stimulation or intercourse, how often did you ejaculate
10	EF010	Num	3	Over the past 4 weeks, when you had sexual stimulation or intercourse, how often did you have the feeling of orgasm or climax
11	EF011	Num	3	Over the past 4 weeks, how often have you felt sexual desire
12	EF012	Num	3	Over the past 4 weeks, how would you rate your level of sexual desire
13	EF013	Num	3	Over the past 4 weeks, how satisfied have you been with your overall sex life
14	EF014	Num	3	Over the past 4 weeks, how satisfied have you been with your sexual relationship with your partner?
15	EF015	Num	3	Over the past 4 weeks, how do you rate your confidence that you could get and keep an erection
16	EF016	Num	3	Over the past 4 weeks, have you seen a doctor or other health professional for treatment of erectile dysfunction (impotence)?
17	EF016A	Num	3	If yes, are you taking/have you ever tried Viagra, Cialis, or Levitra OR are you receiving another medical treatment for Erectile Dysfunction
18	Visit	Num	3	Visit
19	RAND_ID	Num	8	Randomized ID

Data Set Name: eq.sas7bdat

Num	Variable	Type	Len	Label
1	EQ001A	Num	3	Less than 21 years of age
2	EQ002AA	Num	3	Lost >5% of your body weight past 6 months
3	EQ002BA	Num	3	Had stroke
4	EQ002CA	Num	3	Had or plan to have any weight loss surgery other than liposuction or abdominoplasty
5	EQ003A	Num	3	Within past 2 years, have you had a new diagnosis of cancer or been treated for cancer
6	EQ004A	Num	3	Do you have any medical conditions that would prevent you from losing weight
7	EQ005A	Num	3	Do you have any medical conditions or special dietary requirements that might interfere with your ability to change diet
8	EQ006AA	Num	3	Do you regularly take: Oral steroid or corticosteroid pills
9	EQ006BA	Num	3	Do you regularly take: Mood stabilizing drugs or antipsychotic drugs
10	EQ006CA	Num	3	Do you regularly take: Diet pills
11	EQ006DA	Num	3	Do you regularly take: Dilantin
12	EQ007	Num	3	Over the next 2 years, do you plan to move out of the area
13	EQ008	Num	3	Is anyone in your household currently enrolled in the POWER-Up study
14	EQ009A	Num	3	Have you been pregnant or breast feeding in the last 6 months
15	EQ010A	Num	3	Are you planning to become pregnant in the next 2 years
16	EQ011A	Num	3	Entrance criteria have been met for this subject to enter this study
17	Visit	Num	3	Visit
18	RAND_ID	Num	8	Randomized ID

Data Set Name: euroq5d.sas7bdat

Num	Variable	Type	Len	Label
1	EUQ001	Num	3	Mobility
2	EUQ002	Num	3	Self-care
3	EUQ003	Num	3	Usual activities
4	EUQ004	Num	3	Pain/discomfort
5	EUQ005	Num	3	Anxiety/Depression
6	EUQ006	Num	3	How good or bad your own health is today
7	Visit	Num	3	Visit
8	RAND_ID	Num	8	Randomized ID

Data Set Name: fat_screener.sas7bdat

Num	Variable	Type	Len	Label
1	QFS001A	Num	3	How often did you eat or drink: cold cereal
2	QFS001B	Num	3	How often did you eat or drink: skim milk
3	QFS001C	Num	3	How often did you eat or drink: eggs
4	QFS001D	Num	3	How often did you eat or drink: sausage or bacon
5	QFS001E	Num	3	How often did you eat or drink: margarine or butter on bread, rolls, pancakes
6	QFS001F	Num	3	How often did you eat or drink: orange juice or grapefruit juice
7	QFS001G	Num	3	How often did you eat or drink: fruit
8	QFS001H	Num	3	How often did you eat or drink: beef or pork hot dogs
9	QFS001I	Num	3	How often did you eat or drink: cheese
10	QFS001J	Num	3	How often did you eat or drink: french fries
11	QFS001K	Num	3	How often did you eat or drink: margarine or butter on vegetables
12	QFS001L	Num	3	How often did you eat or drink: mayonnaise
13	QFS001M	Num	3	How often did you eat or drink: salad dressings
14	QFS001N	Num	3	How often did you eat or drink: rice
15	QFS001O	Num	3	How often did you eat or drink: margarine, butter or oil on rice or pasta
16	QFS002	Num	3	How often did you use a reduced-fat margarine
17	QFS003	Num	3	Would you say your diet was high, medium or low in fat
18	Visit	Num	3	Visit
19	RAND_ID	Num	8	Randomized ID

Data Set Name: fsfi.sas7bdat

Num	Variable	Type	Len	Label
1	FSFI001	Num	3	Over the past 4 weeks, how often did you feel sexual desire or interest
2	FSFI002	Num	3	Over the past 4 weeks, how would you rate your level (degree) of sexual desire or interest
3	FSFI003	Num	3	Over the past 4 weeks, how often did you feel sexually aroused ("turned on") during sexual activity or intercourse
4	FSFI004	Num	3	Over the past 4 weeks, how would you rate your level of sexual arousal ("turn on") during sexual activity or intercourse
5	FSFI005	Num	3	Over the past 4 weeks, how confident were you about becoming sexually aroused during sexual activity or intercourse
6	FSFI006	Num	3	Over the past 4 weeks, how often have you been satisfied with your arousal (excitement) during sexual activity or intercourse
7	FSFI007	Num	3	Over the past 4 weeks, how often did you become lubricated ("wet") during sexual activity or intercourse
8	FSFI008	Num	3	Over the past 4 weeks, how difficult was it to become lubricated ("wet") during sexual activity or intercourse
9	FSFI009	Num	3	Over the past 4 weeks, how often did you maintain your lubrication ("wetness") until completion of sexual activity or intercourse
10	FSFI010	Num	3	Over the past 4 weeks, how difficult was it to maintain your lubrication ("wetness") until completion of sexual activity or intercourse
11	FSFI011	Num	3	Over the past 4 weeks, when you had sexual stimulation or intercourse, how often did you reach orgasm (climax)
12	FSFI012	Num	3	Over the past 4 weeks, when you had sexual stimulation or intercourse, how difficult was it for you to reach orgasm (climax)
13	FSFI013	Num	3	Over the past 4 weeks, how satisfied were you with your ability to reach orgasm (climax) during sexual activity or intercourse
14	FSFI014	Num	3	Over the past 4 weeks, how satisfied have you been with the amount of emotional closeness during sexual activity between you and your partner
15	FSFI015	Num	3	Over the past 4 weeks, how satisfied have you been with your sexual relationship with your partner
16	FSFI016	Num	3	Over the past 4 weeks, how satisfied have you been with your overall sexual life
17	FSFI017	Num	3	Over the past 4 weeks, how often did you experience discomfort or pain during vaginal penetration
18	FSFI018	Num	3	Over the past 4 weeks, how often did you experience discomfort or pain following vaginal penetration
19	FSFI019	Num	3	Over the past 4 weeks, how would you rate your overall level (degree) of discomfort or pain following vaginal penetration
20	FSFI020	Num	3	Have you seen a doctor or other health professional for treatment of a sexual problem
21	FSFI020A	Num	3	If yes, are you taking medication or receiving therapy for your sexual problem
22	Visit	Num	3	Visit
23	RAND_ID	Num	8	Randomized ID

Data Set Name: fv_screen.sas7bdat

Num	Variable	Type	Len	Label
1	EAT001	Num	3	Over the last month, how many times per month, week or day did you drink 100% juice
2	EAT001A	Num	3	Each time you drank 100% juice, how much did you usually drink
3	EAT002	Num	3	Over the last month, how many times per month, week or day did you eat fruit
4	EAT002A	Num	3	Each time you ate fruit, how much did you usually eat
5	EAT003	Num	3	Over the last month, how often did you eat lettuce salad
6	EAT003A	Num	3	Each time you ate lettuce, how much did you usually eat
7	EAT004	Num	3	Over the last month, how often did you eat French fries or fried potatoes
8	EAT004A	Num	3	Each time you ate French fries or fried potatoes, how much did you usually eat
9	EAT005	Num	3	Over the last month, how often did you eat other white potatoes
10	EAT005A	Num	3	Each time you ate these potatoes, how much did you usually eat
11	EAT006	Num	3	Over the last month, how often did you eat cooked dried beans
12	EAT006A	Num	3	Each time you ate these beans, how much did you usually eat
13	EAT007	Num	3	Over the last month, how often did you eat all other vegetables
14	EAT007A	Num	3	Each time you ate other vegetables, how much did you usually eat
15	EAT008	Num	3	Over the last month, how often did you eat tomato sauce
16	EAT008A	Num	3	Each time you ate tomato sauce, how much did you usually eat
17	EAT009	Num	3	Over the last month, how often did you eat vegetable soups
18	EAT009A	Num	3	Each time you ate vegetable soups, how much did you usually eat
19	EAT010	Num	3	Over the last month, how often did you eat mixtures that include vegetables
20	Visit	Num	3	Visit
21	RAND_ID	Num	8	Randomized ID

Data Set Name: ief.sas7bdat

Num	Variable	Type	Len	Label
1	IEF000E	Char	3	Visit
2	IEF001A	Num	3	Hospitalized overnight
3	IEF002A	Num	3	Torn ligament
4	IEF002H	Num	3	Resolved: Torn ligament
5	IEF002D	Num	3	1st report: Torn ligament
6	IEF002E	Num	3	Life-threatening: Torn ligament
7	IEF002F	Num	3	Resulted in disability: Torn ligament
8	IEF002G	Num	3	SAE form required: Torn ligament
9	IEF003A	Num	3	Broken, crushed or fractured bone
10	IEF003H	Num	3	Resolved: Broken, crushed or fractured bone
11	IEF003D	Num	3	1st report: Broken, crushed or fractured bone
12	IEF003E	Num	3	Life-threatening: Broken, crushed or fractured bone
13	IEF003F	Num	3	Resulted in disability: Broken, crushed or fractured bone
14	IEF003G	Num	3	SAE form required: Broken, crushed or fractured bone
15	IEF004A	Num	3	Other significant or serious injury
16	IEF004H	Num	3	Resolved: Other significant or serious injury
17	IEF004D	Num	3	1st report: Other significant or serious injury
18	IEF004E	Num	3	Life-threatening: Other significant or serious injury
19	IEF004F	Num	3	Resulted in disability: Other significant or serious injury
20	IEF004G	Num	3	SAE form required: Other significant or serious injury
21	IEF005A	Num	3	Low blood sugar
22	IEF005H	Num	3	Resolved: Low blood sugar
23	IEF005D	Num	3	1st report: Low blood sugar
24	IEF005E	Num	3	Life-threatening: Low blood sugar
25	IEF005F	Num	3	Resulted in disability: Low blood sugar
26	IEF005G	Num	3	SAE form required: Low blood sugar
27	IEF006A	Num	3	Gall stones
28	IEF006H	Num	3	Resolved: Gall stones
29	IEF006D	Num	3	1st report: Gall stones
30	IEF006E	Num	3	Life-threatening: Gall stones
31	IEF006F	Num	3	Resulted in disability: Gall stones
32	IEF006G	Num	3	SAE form required: Gall stones
33	IEF007A	Num	3	Procedure to remove gall bladder or gall stones
34	IEF007H	Num	3	Resolved: Procedure to remove gall bladder or gall stones
35	IEF007D	Num	3	1st report: Procedure to remove gall bladder or gall stones
36	IEF007E	Num	3	Life-threatening: Procedure to remove gall bladder or gall stones

Num	Variable	Type	Len	Label
37	IEF007F	Num	3	Resulted in disability: Procedure to remove gall bladder or gall stones
38	IEF007G	Num	3	SAE form required: Procedure to remove gall bladder or gall stones
39	IEF008A	Num	3	Heart attack
40	IEF008H	Num	3	Resolved: Heart attack
41	IEF008D	Num	3	1st report: Heart attack
42	IEF008E	Num	3	Life-threatening: Heart attack
43	IEF008F	Num	3	Resulted in disability: Heart attack
44	IEF008G	Num	3	SAE form required: Heart attack
45	IEF009A	Num	3	Heart failure
46	IEF009H	Num	3	Resolved: Heart failure
47	IEF009D	Num	3	1st report: Heart failure
48	IEF009E	Num	3	Life-threatening: Heart failure
49	IEF009F	Num	3	Resulted in disability: Heart failure
50	IEF009G	Num	3	SAE form required: Heart failure
51	IEF010A	Num	3	Coronary angioplasty or bypass surgery
52	IEF010H	Num	3	Resolved: Coronary angioplasty or bypass surgery
53	IEF010D	Num	3	1st report: Coronary angioplasty or bypass surgery
54	IEF010E	Num	3	Life-threatening: Coronary angioplasty or bypass surgery
55	IEF010F	Num	3	Resulted in disability: Coronary angioplasty or bypass surgery
56	IEF010G	Num	3	SAE form required: Coronary angioplasty or bypass surgery
57	IEF011A	Num	3	Procedure to unblock blocked arteries
58	IEF011H	Num	3	Resolved: Procedure to unblock blocked arteries
59	IEF011D	Num	3	1st report: Procedure to unblock blocked arteries
60	IEF011E	Num	3	Life-threatening: Procedure to unblock blocked arteries
61	IEF011F	Num	3	Resulted in disability: Procedure to unblock blocked arteries
62	IEF011G	Num	3	SAE form required: Procedure to unblock blocked arteries
63	IEF012A	Num	3	Transient ischemic attack
64	IEF012H	Num	3	Resolved: Transient ischemic attack
65	IEF012D	Num	3	1st report: Procedure to unblock transient ischemic attack
66	IEF012E	Num	3	Life-threatening: transient ischemic attack
67	IEF012F	Num	3	Resulted in disability: transient ischemic attack
68	IEF012G	Num	3	SAE form required: transient ischemic attack
69	IEF013A	Num	3	Stroke
70	IEF013H	Num	3	Resolved: Stroke
71	IEF013D	Num	3	1st report: Stroke
72	IEF013E	Num	3	Life-threatening: Stroke
73	IEF013F	Num	3	Resulted in disability: Stroke
74	IEF013G	Num	3	SAE form required: Stroke
75	IEF014A	Num	3	Cancer or malignant tumor

Num	Variable	Type	Len	Label
76	IEF014H	Num	3	Resolved: Cancer or malignant tumor
77	IEF014D	Num	3	1st report: Cancer or malignant tumor
78	IEF014E	Num	3	Life-threatening: Cancer or malignant tumor
79	IEF014F	Num	3	Resulted in disability: Cancer or malignant tumor
80	IEF014G	Num	3	SAE form required: Cancer or malignant tumor
81	IEF015A	Num	3	Pregnancy
82	IEF015H	Num	3	Resolved: Pregnancy
83	IEF015D	Num	3	1st report: Pregnancy
84	IEF015E	Num	3	Life-threatening: Pregnancy
85	IEF015F	Num	3	Resulted in disability: Pregnancy
86	IEF015G	Num	3	SAE form required: Pregnancy
87	IEF015AA	Num	3	Child born with birth defect
88	IEF015AH	Num	3	Resolved: Child born with birth defect
89	IEF015AD	Num	3	1st report: Child born with birth defect
90	IEF015AE	Num	3	Life-threatening: Child born with birth defect
91	IEF015AF	Num	3	Resulted in disability: Child born with birth defect
92	IEF015AG	Num	3	SAE form required: Child born with birth defect
93	IEF016A	Num	3	Bariatric surgery
94	IEF016H	Num	3	Resolved: Bariatric surgery
95	IEF016D	Num	3	1st report: Bariatric surgery
96	IEF016E	Num	3	Life-threatening: Bariatric surgery
97	IEF016F	Num	3	Resulted in disability: Bariatric surgery
98	IEF016G	Num	3	SAE form required: Bariatric surgery
99	IEF017A	Num	3	Other significant medical event
100	IEF017H	Num	3	Resolved: Other significant medical event
101	IEF017D	Num	3	1st report: Other significant medical event
102	IEF017E	Num	3	Life-threatening: Other significant medical event
103	IEF017F	Num	3	Resulted in disability: Other significant medical event
104	IEF017G	Num	3	SAE form required: Other significant medical event
105	IEF000X1	Num	3	Were you using a study drug or meal replacement at the time of the event
106	IEF000X2	Char	17	Were you using a study drug or meal replacement at the time of the event: list
107	IEF000Y1	Num	3	Had you used a study drug or meal replacement in the past, but stopped before the event?
108	IEF000Y2	Char	17	Had you used a study drug or meal replacement in the past, but stopped before the event: list
109	Visit	Num	3	Visit
110	DAYS_TORNLIG	Num	3	Days to resolve torn ligament
111	DAYS_BONEFX	Num	4	Days with bone fracture
112	DAYS_SERIOUSINJ	Num	4	Duration of serious injury (days)
113	DAYS_HYPOGLYC	Num	3	Duration hypoglycemia (days)
114	DAYS_GSTONE	Num	3	Duration of gallstones (days)

Num	Variable	Type	Len	Label
115	DAYS_MI	Num	3	Duration of heart attack illness (days)
116	DAYS_CHF	Num	3	Duration of heart failure (days)
117	DAYS_ANGIO	Num	3	Duration of angioplasty illness (days)
118	DAYS_BLKARTERY	Num	3	Duration of recovery from procedure to unblock artery (days)
119	DAYS_TIA	Num	3	Duration of recovery from TIA (days)
120	DAYS_STROKE	Num	3	Recovery time from stroke (days)
121	DAYS_CANCER	Num	3	Duration-cancer (days)
122	DAYS_PREG	Num	3	Duration of pregnancy (days)
123	DAYS_BIRTHDEF	Num	3	Duration of birth defect (days)
124	DAYS_BARSURG	Num	3	Duration-Bariatric surgery (days)
125	DAYS_OTHEVENT	Num	4	Duration of other medical event
126	RAND_ID	Num	8	Randomized ID

Data Set Name: iwqol_lite.sas7bdat

Num	Variable	Type	Len	Label
1	PHYF001	Num	3	Because of my weight I have trouble picking up objects.
2	PHYF002	Num	3	Because of my weight I have trouble tying my shoes.
3	PHYF003	Num	3	Because of my weight I have difficulty getting up from chairs
4	PHYF004	Num	3	Because of my weight I have trouble using stairs
5	PHYF005	Num	3	Because of my weight I have difficulty putting on or taking off my clothing
6	PHYF006	Num	3	Because of my weight I have trouble with mobility
7	PHYF007	Num	3	Because of my weight I have trouble crossing my legs
8	PHYF008	Num	3	I feel short of breath with only mild exertion
9	PHYF009	Num	3	I am troubled by painful or stiff joints
10	PHYF010	Num	3	My ankles and lower legs are swollen at the end of the day
11	PHYF011	Num	3	I am worried about my health
12	SLFE001	Num	3	Because of my weight I am self-conscious.
13	SLFE002	Num	3	Because of my weight my self-esteem is not what it could be.
14	SLFE003	Num	3	Because of my weight I feel unsure of myself
15	SLFE004	Num	3	Because of my weight I don't like myself.
16	SLFE005	Num	3	Because of my weight I am afraid of being rejected
17	SLFE006	Num	3	Because of my weight I avoid looking in mirrors or seeing myself in photographs
18	SLFE007	Num	3	Because of my weight I am embarrassed to be seen in public places
19	SEXL001	Num	3	Because of my weight I do not enjoy sexual activity.
20	SEXL002	Num	3	Because of my weight I have little or no sexual desire
21	SEXL003	Num	3	Because of my weight I have difficulty with sexual performance
22	SEXL004	Num	3	Because of my weight I avoid sexual encounters whenever possible
23	PUBD001	Num	3	Because of my weight I experience ridicule, teasing, or unwanted attention
24	PUBD002	Num	3	Because of my weight I worry about fitting into seats in public places
25	PUBD003	Num	3	Because of my weight I worry about fitting through aisles or turnstiles
26	PUBD004	Num	3	Because of my weight I worry about finding chairs that are strong enough to hold my weight
27	PUBD005	Num	3	Because of my weight I experience discrimination by others
28	WORK001	Num	3	Because of my weight I have trouble getting things accomplished or meeting my responsibilities
29	WORK002	Num	3	Because of my weight I am less productive than I could be
30	WORK003	Num	3	Because of my weight I don't receive appropriate raises, promotions or recognition at work
31	WORK004	Num	3	Because of my weight I am afraid to go on job interviews
32	Visit	Num	3	Visit
33	RAND_ID	Num	8	Randomized ID

Data Set Name: labs.sas7bdat

Num	Variable	Type	Len	Label
1	LAB001A	Num	4	Sodium: RV
2	LAB002A	Num	8	Potassium: RV
3	LAB003A	Num	4	Chloride: RV
4	LAB004A	Num	3	Co2 content: RV
5	LAB005A	Num	3	Urea Nitogen: RV
6	LAB006A	Num	8	Creatinine: RV
7	LAB007A	Num	4	Glucose: RV
8	LAB008A	Num	8	Calcium: RV
9	LAB009A	Num	8	Total Bilirubin: RV
10	LAB010A	Num	4	AST: RV
11	LAB011A	Num	4	ALT: RV
12	LAB012A	Num	4	ALK Phos: RV
13	LAB013A	Num	8	Total protein: RV
14	LAB014A	Num	8	Albumin: RV
15	LAB015A	Num	3	Glu: RV
16	LAB016A	Num	4	Triglycerides: RV
17	LAB017A	Num	4	Cholesterol: RV
18	LAB018A	Num	4	HDL Cholesterol: RV
19	LAB019A	Num	4	LDL Cholesterol: RV
20	LAB020A	Num	8	WBCs: RV
21	LAB021A	Num	8	RBCs: RV
22	LAB022A	Num	8	Hemoglobin: RV
23	LAB023A	Num	3	Hematocrit: RV
24	LAB024A	Num	3	MCV: RV
25	LAB025A	Num	3	MCH: RV
26	LAB026A	Num	3	MCHC: RV
27	LAB027A	Num	8	RDW: RV
28	LAB028A	Num	4	Platelet count: RV
29	LAB034A	Num	8	High sensitivity CRP: RV
30	LAB035A	Num	3	Insulin: RV
31	LAB036A	Num	3	Other lab alert values: RV
32	LAB001B	Num	4	Sodium: 6M
33	LAB002B	Num	8	Potassium: 6M
34	LAB003B	Num	4	Chloride: 6M
35	LAB004B	Num	3	Co2 content: 6M
36	LAB005B	Num	3	Urea Nitogen: 6M

Num	Variable	Type	Len	Label
37	LAB006B	Num	8	Creatinine: 6M
38	LAB007B	Num	4	Glucose: 6M
39	LAB008B	Num	8	Calcium: 6M
40	LAB009B	Num	8	Total Bilirubin: 6M
41	LAB010B	Num	3	AST: 6M
42	LAB011B	Num	4	ALT: 6M
43	LAB012B	Num	4	ALK Phos: 6M
44	LAB013B	Num	8	Total protein: 6M
45	LAB014B	Num	8	Albumin: 6M
46	LAB015B	Num	3	Glu: 6M
47	LAB016B	Num	4	Triglycerides: 6M
48	LAB017B	Num	4	Cholesterol: 6M
49	LAB018B	Num	4	HDL Cholesterol: 6M
50	LAB019B	Num	4	LDL Cholesterol: 6M
51	LAB020B	Num	8	WBCs: 6M
52	LAB021B	Num	8	RBCs: 6M
53	LAB022B	Num	8	Hemoglobin: 6M
54	LAB023B	Num	3	Hematocrit: 6M
55	LAB024B	Num	3	MCV: 6M
56	LAB025B	Num	3	MCH: 6M
57	LAB026B	Num	3	MCHC: 6M
58	LAB027B	Num	8	RDW: 6M
59	LAB028B	Num	4	Platelet count: 6M
60	LAB034B	Num	8	High sensitivity CRP: 6M
61	LAB035B	Num	4	Insulin: 6M
62	LAB036B	Num	3	Other lab alert values: 6M
63	LAB001C	Num	4	Sodium: 12M
64	LAB002C	Num	8	Potassium: 12M
65	LAB003C	Num	4	Chloride: 12M
66	LAB004C	Num	3	Co2 content: 12M
67	LAB005C	Num	3	Urea Nitogen: 12M
68	LAB006C	Num	8	Creatinine: 12M
69	LAB007C	Num	4	Glucose: 12M
70	LAB008C	Num	8	Calcium: 12M
71	LAB009C	Num	8	Total Bilirubin: 12M
72	LAB010C	Num	3	AST: 12M
73	LAB011C	Num	3	ALT: 12M
74	LAB012C	Num	4	ALK Phos: 12M
75	LAB013C	Num	8	Total protein: 12M

Num	Variable	Type	Len	Label
76	LAB014C	Num	8	Albumin: 12M
77	LAB015C	Num	3	Glu: 12M
78	LAB016C	Num	4	Triglycerides: 12M
79	LAB017C	Num	4	Cholesterol: 12M
80	LAB018C	Num	4	HDL Cholesterol: 12M
81	LAB019C	Num	4	LDL Cholesterol: 12M
82	LAB020C	Num	3	WBCs: 12M
83	LAB021C	Num	3	RBCs: 12M
84	LAB022C	Num	3	Hemoglobin: 12M
85	LAB023C	Num	3	Hematocrit: 12M
86	LAB024C	Num	3	MCV: 12M
87	LAB025C	Num	3	MCH: 12M
88	LAB026C	Num	3	MCHC: 12M
89	LAB027C	Num	3	RDW: 12M
90	LAB028C	Num	3	Platelet count: 12M
91	LAB034C	Num	8	High sensitivity CRP: 12M
92	LAB035C	Num	4	Insulin: 12M
93	LAB036C	Num	3	Other lab alert values: 12M
94	LAB001D	Num	4	Sodium: 24M
95	LAB002D	Num	8	Potassium: 24M
96	LAB003D	Num	4	Chloride: 24M
97	LAB004D	Num	3	Co2 content: 24M
98	LAB005D	Num	3	Urea Nitogen: 24M
99	LAB006D	Num	8	Creatinine: 24M
100	LAB007D	Num	4	Glucose: 24M
101	LAB008D	Num	8	Calcium: 24M
102	LAB009D	Num	8	Total Bilirubin: 24M
103	LAB010D	Num	3	AST: 24M
104	LAB011D	Num	4	ALT: 24M
105	LAB012D	Num	4	ALK Phos: 24M
106	LAB013D	Num	8	Total protein: 24M
107	LAB014D	Num	8	Albumin: 24M
108	LAB015D	Num	3	Glu: 24M
109	LAB016D	Num	4	Triglycerides: 24M
110	LAB017D	Num	4	Cholesterol: 24M
111	LAB018D	Num	4	HDL Cholesterol: 24M
112	LAB019D	Num	4	LDL Cholesterol: 24M
113	LAB020D	Num	8	WBCs: 24M
114	LAB021D	Num	8	RBCs: 24M

Num	Variable	Type	Len	Label
115	LAB022D	Num	8	Hemoglobin: 24M
116	LAB023D	Num	3	Hematocrit: 24M
117	LAB024D	Num	3	MCV: 24M
118	LAB025D	Num	3	MCH: 24M
119	LAB026D	Num	3	MCHC: 24M
120	LAB027D	Num	8	RDW: 24M
121	LAB028D	Num	4	Platelet count: 24M
122	LAB034D	Num	8	High sensitivity CRP: 24M
123	LAB035D	Num	8	Insulin: 24M
124	LAB036D	Num	3	Other lab alert values: 24M
125	Visit	Num	3	Visit
126	RAND_ID	Num	8	Randomized ID

Data Set Name: med_history.sas7bdat

Num	Variable	Type	Len	Format	Informat	Label
1	MED000	Num	8	MED000A.		Any relevant medical history
2	MED001C	Num	8	MED001C.		Onging: allergy or sensitivities
3	MED001C2	Num	8	MED0011A.		Onging 2: allergy or sensitivities
4	MED002C	Num	8	MED002C.		Onging: ear, nose, throat
5	MED002C2	Num	8	MED0021A.		Onging 2: ear, nose, throat
6	MED003C	Num	8	MED003C.		Onging: cardiovascular
7	MED003C2	Num	8	MED0031A.		Onging 2: cardiovascular
8	MED003C3	Num	8	MED0032A.		Onging 3: cardiovascular
9	MED003C4	Num	8	MED0033A.		Onging 4: cardiovascular
10	MED004C	Num	8	MED004C.		Onging: neurologic
11	MED004C2	Num	8	MED0041A.		Onging 2: neurologic
12	MEDPSYCH	Num	8	MEDPSYC.		Psych disorder:Type
13	MED005C	Num	8	MED005C.		Onging: psychiatric
14	MED005C2	Num	8	MED0051A.		Onging 2: psychiatric
15	MED006C	Num	8	MED006C.		Onging: respiratory
16	MED006C2	Num	8	MED0061A.		Onging 2: respiratory
17	MED007C	Num	8	MED007C.		Onging: gastrointestinal
18	MED007C2	Num	8	MED0071A.		Onging 2: gastrointestinal
19	MED007C3	Num	8	MED0072A.		Onging 3: gastrointestinal
20	MED008C	Num	8	MED008C.		Onging: genitourinary
21	MED008C2	Num	8	MED0081A.		Onging 2: genitourinary
22	MED009C	Num	8	MED009C.		Onging: musculoskeletal
23	MED009C2	Num	8	MED0091A.		Onging 2: musculoskeletal
24	MED009C3	Num	8	MED0092A.		Onging 3: musculoskeletal
25	MED009C4	Num	8	MED0093A.		Onging 4: musculoskeletal
26	MED009C5	Num	8	MED0094A.		Onging 5: musculoskeletal
27	MED010C	Num	8	MED010C.		Onging: endocrine
28	MED010C2	Num	8	MED0101A.		Onging 2: endocrine
29	MED010C3	Num	8	MED0102A.		Onging 3: endocrine
30	MED010D3	Char	150	$150.	$150.	Description 3: endocrine
31	MED011C	Num	8	MED011C.		Onging: dermatological
32	MED011C2	Num	8	MED0111A.		Onging 2: dermatological
33	MED012C	Num	8	MED012C.		Onging: Hematological
34	MED012C2	Num	8	MED0121A.		Onging 2: Hematological
35	MED013C	Num	8	MED013C.		Onging: Renal
36	MED013C2	Num	8	MED0131A.		Onging 2: Renal

Num	Variable	Type	Len	Format	Informat	Label
37	MED014C	Num	8	MED014C.		Onging: hepatic
38	MED014C2	Num	8	MED0141A.		Onging 2: hepatic
39	MED015C	Num	8	MED015C.		Onging: immunologic
40	MED015C2	Num	8	MED0151A.		Onging 2: immunologic
41	MED016C	Num	8	MED016C.		Onging: breast
42	MED016C2	Num	8	MED0161A.		Onging 2: breast
43	MED017C	Num	8	MED017C.		Onging: cancer or tumor
44	MED017C2	Num	8	MED0171A.		Onging 2: cancer or tumor
45	MED018C	Num	8	MED018C.		Onging: gynecological
46	MED018C2	Num	8	MED0181A.		Onging 2: gynecological
47	MED019C	Num	8	MED019C.		Onging: other
48	MED019C2	Num	8	MED0191A.		Onging: other 2
49	MED019C3	Num	8	MED0192A.		Onging: other 3
50	MED019C4	Num	8	MED0193A.		Onging: other 4
51	MED019C5	Num	8	MED0194A.		Onging: other 5
52	MED019C6	Num	8	MED0195A.		Onging: other 6
53	Visit	Num	8	F2.		Visit
54	DAYS_ALLERG	Num	8	F5.		Days with allergy condition
55	DAYS_ENT	Num	8	F5.		Day with with ear, nose, throat condition
56	DAYS_CARVAS	Num	8	F5.		Days with cardiovascular condition
57	DAYS_NEUR	Num	8	F5.		Days with neurological condition
58	DAYS_PSYCH	Num	8	F5.		Days with psych condition
59	DAYS_RESP	Num	8	F5.		Days with respiratory condition
60	DAYS_GI	Num	8	F5.		Days with gastrointestinal condition
61	DAYS_GU	Num	8	F5.		Days with genitourinary condition
62	DAYS_MS	Num	8	F5.		Days with musculoskeletal condition
63	DAYS_EN	Num	8	F5.		Days with endocrine condition
64	DAYS_DERM	Num	8	F5.		Days with dermatological condition
65	DAYS_HEME	Num	8	F5.		Days with hematological condition
66	DAYS_REN	Num	8	F5.		Days with renal condition
67	DAYS_HEP	Num	8	F5.		Days with hepatic condition
68	DAYS_IMM	Num	8	F5.		Days with immunological condition
69	DAYS_BR	Num	8	F5.		Days with breast condition
70	DAYS_CAN	Num	8	F5.		Days with cancer condition
71	DAYS_GYN	Num	8	F5.		Days with gynecological condition
72	DAYS_OTH1	Num	8	F5.		Days with other condition 1
73	DAYS_OTH2	Num	8	F5.		Days with other condition (2)
74	DAYS_OTH3	Num	8	F5.		Days with other condition (3)
75	DAYS_OTH4	Num	8	F5.		Days with other condition (4)

Num	Variable	Type	Len	Format	Informat	Label
76	DAYS_OTH5	Num	8	F5.		Days with other condition (5)
77	DAYS_OTH6	Num	8	F5.		Days with other condition (6)
78	RAND_ID	Num	8			Randomized ID

Data Set Name: ppaq.sas7bdat

Num	Variable	Type	Len	Label
1	PPA001	Num	4	How many stairs did you climb up on an average day during the past year
2	PPA002	Num	4	How many city blocks or their equivalent did you walk on an average day during the past year
3	PPA003A1	Num	4	Sports or recreation code: 1
4	PPA003B1	Num	8	METS: 1
5	PPA003C1	Num	8	Times per week: 1
6	PPA003D1	Num	8	Time per episode: 1
7	PPA003A2	Num	4	Sports or recreation code: 2
8	PPA003B2	Num	8	METS: 2
9	PPA003C2	Num	8	Times per week: 2
10	PPA003D2	Num	8	Time per episode: 2
11	PPA003A3	Num	4	Sports or recreation code: 3
12	PPA003B3	Num	8	METS: 3
13	PPA003C3	Num	8	Times per week: 3
14	PPA003D3	Num	8	Time per episode: 3
15	PPA003A4	Num	4	Sports or recreation code: 4
16	PPA003B4	Num	8	METS: 4
17	PPA003C4	Num	8	Times per week: 4
18	PPA003D4	Num	8	Time per episode: 4
19	PPA003A5	Num	4	Sports or recreation code: 5
20	PPA003B5	Num	8	METS: 5
21	PPA003C5	Num	8	Times per week: 5
22	PPA003D5	Num	4	Time per episode: 5
23	PPA003A6	Num	4	Sports or recreation code: 6
24	PPA003B6	Num	8	METS: 6
25	PPA003C6	Num	3	Times per week: 6
26	PPA003D6	Num	3	Time per episode: 6
27	Visit	Num	3	Visit
28	RAND_ID	Num	8	Randomized ID

Data Set Name: ppma.sas7bdat

Num	Variable	Type	Len	Label
1	PPM001B	Num	8	Height: screening
2	PPM001C1	Num	8	Weight 1: screening
3	PPM001C2	Num	8	Weight 2: screening
4	PPM001C3	Num	8	Average Weight: screening
5	PPM001D	Num	8	BMI: screening
6	PPM001E	Num	8	Waist 1: screening
7	PPM001F	Num	8	Waist 2: screening
8	PPM001G	Num	8	Waist avg: screening
9	PPM001H	Num	4	Systolic 1: screening
10	PPM001I	Num	4	Systolic 2: screening
11	PPM001J	Num	4	Systolic 3: screening
12	PPM001K	Num	8	Systolic avg: screening
13	PPM001L	Num	4	Diastolic 1: screening
14	PPM001M	Num	4	Diastolic 2: screening
15	PPM001N	Num	4	Diastolic 3: screening
16	PPM001O	Num	8	Diastolic avg: screening
17	PPM001P	Char	5	Time BP was taken: screening
18	PPM001Q	Num	8	Arm circumference: screening
19	PPM001R	Num	3	Cuff size: screening
20	PPM001S	Num	4	HR 1: screening
21	PPM001T	Num	4	HR 2: screening
22	PPM001U	Num	4	HR 3: screening
23	PPM001V	Num	8	HR avg: screening
24	PPM002B	Num	8	Height: RV
25	PPM002C1	Num	8	Weight 1: RV
26	PPM002C2	Num	8	Weight 2: RV
27	PPM002C3	Num	8	Average Weight: RV
28	PPM002D	Num	8	BMI: RV
29	PPM002E	Num	8	Waist 1: RV
30	PPM002F	Num	8	Waist 2: RV
31	PPM002G	Num	8	Waist avg: RV
32	PPM002H	Num	4	Systolic 1: RV
33	PPM002I	Num	4	Systolic 2: RV
34	PPM002J	Num	4	Systolic 3: RV
35	PPM002K	Num	8	Systolic avg: RV
36	PPM002L	Num	4	Diastolic 1: RV

Num	Variable	Type	Len	Label
37	PPM002M	Num	4	Diastolic 2: RV
38	PPM002N	Num	4	Diastolic 3: RV
39	PPM002O	Num	8	Diastolic avg: RV
40	PPM002P	Char	5	Time BP was taken: RV
41	PPM002Q	Num	8	Arm circumference: RV
42	PPM002R	Num	3	Cuff size: RV
43	PPM002S	Num	4	HR 1: RV
44	PPM002T	Num	4	HR 2: RV
45	PPM002U	Num	4	HR 3: RV
46	PPM002V	Num	8	HR avg: RV
47	PPM003B	Num	8	Height: V6
48	PPM003C1	Num	8	Weight 1: V6
49	PPM003C2	Num	8	Weight 2: V6
50	PPM003C3	Num	8	Average Weight: V6
51	PPM003D	Num	8	BMI: V6
52	PPM003E	Num	8	Waist 1: V6
53	PPM003F	Num	8	Waist 2: V6
54	PPM003G	Num	8	Waist avg: V6
55	PPM003H	Num	4	Systolic 1: V6
56	PPM003I	Num	4	Systolic 2: V6
57	PPM003J	Num	4	Systolic 3: V6
58	PPM003K	Num	8	Systolic avg: V6
59	PPM003L	Num	4	Diastolic 1: V6
60	PPM003M	Num	4	Diastolic 2: V6
61	PPM003N	Num	4	Diastolic 3: V6
62	PPM003O	Num	8	Diastolic avg: V6
63	PPM003P	Char	5	Time BP was taken: V6
64	PPM003Q	Num	8	Arm circumference: V6
65	PPM003R	Num	3	Cuff size: V6
66	PPM003S	Num	4	HR 1: V6
67	PPM003T	Num	4	HR 2: V6
68	PPM003U	Num	4	HR 3: V6
69	PPM003V	Num	8	HR avg: V6
70	PPM004B	Num	8	Height: V12
71	PPM004C1	Num	8	Weight 1: V12
72	PPM004C2	Num	8	Weight 2: V12
73	PPM004C3	Num	8	Average Weight: V12
74	PPM004D	Num	8	BMI: V12
75	PPM004E	Num	8	Waist 1: V12

Num	Variable	Type	Len	Label
76	PPM004F	Num	8	Waist 2: V12
77	PPM004G	Num	8	Waist avg: V12
78	PPM004H	Num	4	Systolic 1: V12
79	PPM004I	Num	4	Systolic 2: V12
80	PPM004J	Num	4	Systolic 3: V12
81	PPM004K	Num	8	Systolic avg: V12
82	PPM004L	Num	4	Diastolic 1: V12
83	PPM004M	Num	4	Diastolic 2: V12
84	PPM004N	Num	4	Diastolic 3: V12
85	PPM004O	Num	8	Diastolic avg: V12
86	PPM004P	Char	5	Time BP was taken: V12
87	PPM004Q	Num	8	Arm circumference: V12
88	PPM004R	Num	3	Cuff size: V12
89	PPM004S	Num	4	HR 1: V12
90	PPM004T	Num	4	HR 2: V12
91	PPM004U	Num	4	HR 3: V12
92	PPM004V	Num	8	HR avg: V12
93	PPM005B	Num	8	Height: V18
94	PPM005C1	Num	8	Weight 1: V18
95	PPM005C2	Num	8	Weight 2: V18
96	PPM005C3	Num	8	Average Weight: V18
97	PPM005D	Num	8	BMI: V18
98	PPM005E	Num	8	Waist 1: V18
99	PPM005F	Num	8	Waist 2: V18
100	PPM005G	Num	8	Waist avg: V18
101	PPM005H	Num	4	Systolic 1: V18
102	PPM005I	Num	4	Systolic 2: V18
103	PPM005J	Num	4	Systolic 3: V18
104	PPM005K	Num	8	Systolic avg: V18
105	PPM005L	Num	4	Diastolic 1: V18
106	PPM005M	Num	4	Diastolic 2: V18
107	PPM005N	Num	4	Diastolic 3: V18
108	PPM005O	Num	8	Diastolic avg: V18
109	PPM005P	Char	5	Time BP was taken: V18
110	PPM005Q	Num	8	Arm circumference: V18
111	PPM005R	Num	3	Cuff size: V18
112	PPM005S	Num	4	HR 1: V18
113	PPM005T	Num	4	HR 2: V18
114	PPM005U	Num	4	HR 3: V18

Num	Variable	Type	Len	Label
115	PPM005V	Num	8	HR avg: V18
116	PPM006B	Num	8	Height: V24
117	PPM006C1	Num	8	Weight 1: V24
118	PPM006C2	Num	8	Weight 2: V24
119	PPM006C3	Num	8	Average Weight: V24
120	PPM006D	Num	8	BMI: V24
121	PPM006E	Num	8	Waist 1: V24
122	PPM006F	Num	8	Waist 2: V24
123	PPM006G	Num	8	Waist avg: V24
124	PPM006H	Num	4	Systolic 1: V24
125	PPM006I	Num	4	Systolic 2: V24
126	PPM006J	Num	4	Systolic 3: V24
127	PPM006K	Num	8	Systolic avg: V24
128	PPM006L	Num	4	Diastolic 1: V24
129	PPM006M	Num	4	Diastolic 2: V24
130	PPM006N	Num	4	Diastolic 3: V24
131	PPM006O	Num	8	Diastolic avg: V24
132	PPM006P	Char	5	Time BP was taken: V24
133	PPM006Q	Num	8	Arm circumference: V24
134	PPM006R	Num	3	Cuff size: V24
135	PPM006S	Num	3	HR 1: V24
136	PPM006T	Num	4	HR 2: V24
137	PPM006U	Num	3	HR 3: V24
138	PPM006V	Num	8	HR avg: V24
139	RAND_ID	Num	8	Randomized ID

Data Set Name: psqii_v4.sas7bdat

Num	Variable	Type	Len	Label
1	PSQ001	Char	5	Past month, when have you gone to bed at night
2	PSQ002	Num	4	How long in minutes has it taken you to fall asleep
3	PSQ003	Char	5	When have you usually gotten up in the morning
4	PSQ004	Num	8	How many hours of actual sleep did you get that night
5	PSQ005A	Num	3	How often had trouble sleeping because: cannot get to sleep within 30 minutes
6	PSQ005B	Num	3	How often had trouble sleeping because: wake up in the middle of the night
7	PSQ005C	Num	3	How often had trouble sleeping because: have to get up to use the bathroom
8	PSQ005D	Num	3	How often had trouble sleeping because: cannot breathe comfortably
9	PSQ005E	Num	3	How often had trouble sleeping because: cough or snore loudly
10	PSQ005F	Num	3	How often had trouble sleeping because: feel too cold
11	PSQ005G	Num	3	How often had trouble sleeping because: feel too hot
12	PSQ005H	Num	3	How often had trouble sleeping because: have bad dreams
13	PSQ005I	Num	3	How often had trouble sleeping because: have pain
14	PSQ005J	Num	3	How often had trouble sleeping because: other reasons
15	PSQ006	Num	3	How would you rate your sleep quality
16	PSQ007	Num	3	How often have you taken medicine to help you sleep
17	PSQ008	Num	3	How often have you had trouble staying awake while driving, eating, or engaging in social activitiy
18	PSQ009	Num	3	How much of a problem has it been for you to keep up enthusiasm to get things done
19	PSQ010	Num	3	Do you have a bed partner or roomate
20	PSQ011A	Num	3	In the past month, have you had: loud snoring
21	PSQ011B	Num	3	In the past month, have you had: long pause between breaths while asleep
22	PSQ011C	Num	3	In the past month, have you had: legs twitching or jerking
23	PSQ011D	Num	3	In the past month, have you had: episodes of disorientation or confusion during sleep
24	PSQ011E	Num	3	In the past month, have you had: other restlessness
25	Visit	Num	3	Visit
26	RAND_ID	Num	8	Randomized ID

Data Set Name: pt_cost_a.sas7bdat

Num	Variable	Type	Len	Label
1	PCQB001	Num	3	Your work status in the past 6 months
2	PCQB002	Num	3	Type of work
3	PCQB003	Num	3	Level of pleasure get from exercise
4	PCQB004	Num	3	Annual household income
5	Visit	Num	3	Visit
6	RAND_ID	Num	8	Randomized ID

Data Set Name: pt_cost_b.sas7bdat

Num	Variable	Type	Len	Label
1	PCQF001	Num	3	Your work status in the past 6 months
2	PCQF002	Num	3	Type of work
3	PCQF003	Num	3	What would you usually be doing if you were not attending study visits
4	PCQF004	Num	3	Are you meeting with a lifestyle coach
5	PCQF005	Num	3	If the meetings with the lifestyle coach were not free, maximum amount of money you would be willing to pay
6	PCQF005A	Num	3	The amount that would make it most difficult for you to choose between paying for the meeting or keeping the money
7	PCQF006	Num	3	Level of pleasure get from exercise
8	PCQF007	Num	3	What has happened to the total costs of all the foods that you have eaten
9	PCQF008A	Num	3	During the last 6 months in the program, have you purchased: bicycle
10	PCQF008B	Num	3	During the last 6 months in the program, have you purchased: Exercise videos
11	PCQF008C	Num	3	During the last 6 months in the program, have you purchased: Free weights
12	PCQF008D	Num	3	During the last 6 months in the program, have you purchased: Home gym
13	PCQF008E	Num	3	During the last 6 months in the program, have you purchased: Walking, running, or exercise shoes
14	PCQF008F	Num	3	During the last 6 months in the program, have you purchased: Exercise clothes
15	PCQF008G	Num	3	During the last 6 months in the program, have you purchased: Stair master
16	PCQF008H	Num	3	During the last 6 months in the program, have you purchased: Elliptical machine
17	PCQF008I	Num	3	During the last 6 months in the program, have you purchased: Stationary bicycle
18	PCQF008J	Num	3	During the last 6 months in the program, have you purchased: Tennis racquet
19	PCQF008K	Num	3	During the last 6 months in the program, have you purchased: Treadmill
20	PCQF008L	Num	3	During the last 6 months in theprogram, have you purchased: Gym or YMCA membership
21	PCQF008M	Num	3	During the last 6 months in the program, have you purchased: Exercise classes
22	PCQF008N	Num	3	During the last 6 months in the program, have you purchased: Personal trainer
23	PCQF008O	Num	3	During the last 6 months in the program, have you purchased: Commercial weight loss program
24	PCQF008P	Num	3	During the last 6 months in the program, have you purchased: Other
25	PCQF008Q	Num	3	During the last 6 months in the program, have you purchased: I do not wish to answer
26	PCQF009A	Num	3	Over the past 6 months, times you seen: Your primary care physician
27	PCQF009B	Num	3	Over the past 6 months, times you seen: A medical sub-specialist
28	PCQF009S	Char	49	Over the past 6 months, type of sub-specialist
29	PCQF009C	Num	3	Over the past 6 months, times you seen: An surgical sub-specialist
30	PCQF009D	Num	3	Over the past 6 months, times you seen: A chiropractor
31	PCQF009E	Num	3	Over the past 6 months, times you seen: A physical therapist
32	PCQF010	Num	3	Over the past 6 months, days spent in hospital
33	PCQF011	Num	3	Over the past 6 months, times you go to ER
34	Visit	Num	3	Visit
35	RAND_ID	Num	8	Randomized ID

Data Set Name: sae.sas7bdat

Num	Variable	Type	Len	Label
1	ADMINIST	Num	3	Administration
2	SAE000E	Char	2	Visit
3	SAE001A	Num	3	Has participant experienced: any event that was life threatening
4	SAE001B	Num	3	Has participant experienced: any event that caused persistent or significant disability or incapacity
5	SAE001C	Num	3	Has participant experienced: any event that required or prolonged a hospitalization
6	SAE001D	Num	3	Has participant experienced: pregnancy that resulted in congenital anomaly or birth defect
7	SAE001E	Num	3	Has participant experienced: death
8	SAE001F	Num	3	Has participant experienced: an event that caused other hazards
9	SAE003A1	Num	3	Cardiovascular disease: Myocardial infarction
10	SAE003A2	Num	3	Cardiovascular disease: Angina pectoris
11	SAE003A3	Num	3	Cardiovascular disease: Congestive heart failure
12	SAE003A4	Num	3	Cardiovascular disease: Stroke
13	SAE003A5	Num	3	Cardiovascular disease: Transient ischemic attack
14	SAE003A6	Num	3	Cardiovascular disease: Atrial fibrillation
15	SAE003A7	Num	3	Cardiovascular disease: Other cardiovascular event
16	SAE003B1	Num	3	Cardiovascular Procedure: Coronary artery bypass surgery
17	SAE003B2	Num	3	Cardiovascular Procedure: PTCA +/- stent
18	SAE003B3	Num	3	Cardiovascular Procedure: Cardiac catheterization
19	SAE003B4	Num	3	Cardiovascular Procedure: Carotid endarterectomy
20	SAE003B5	Num	3	Cardiovascular Procedure: Peripheral vascular surgery
21	SAE003B6	Num	3	Cardiovascular Procedure: Pacemaker/ ICD device
22	SAE003B7	Num	3	Cardiovascular Procedure: Other CV procedure
23	SAE003C1	Num	3	Muskuloskeletal: Fracture
24	SAE003C2	Num	3	Muskuloskeletal: Sprain/ligament tear
25	SAE003C3	Num	3	Muskuloskeletal: Hip replacement
26	SAE003C4	Num	3	Muskuloskeletal: Knee replacement
27	SAE003C5	Num	3	Muskuloskeletal: Lumbar disk surgery
28	SAE003C6	Num	3	Muskuloskeletal: Limb amputation
29	SAE003C7	Num	3	Muskuloskeletal: Other Ortopedic
30	SAE003D1	Num	3	Gallbladder disease: Cholecystitis
31	SAE003D2	Num	3	Gallbladder disease: Cholecystectomy
32	SAE003D3	Num	3	Gallbladder disease: None of the above
33	SAE003E1	Num	3	Diabetes-related: serious hypoglycemia
34	SAE003E2	Num	3	Diabetes-related: serious hyperglycemia
35	SAE003E3	Num	3	Diabetes-related: other diabetes related
36	SAE003F1	Num	3	Other: Excessive weight loss

Num	Variable	Type	Len	Label
37	SAE003F2	Num	3	Other: Cancer
38	SAE003F3	Num	3	Other: Major depression
39	SAE003F4	Num	3	Other: Bariatric surgery
40	SAE004A	Num	3	Did the condition exist prior to the study
41	SAE004C	Num	3	Was the activity being performed in order to lost weight
42	SAE004D	Num	3	Did the participant receive treatment for the event
43	SAE004F	Num	3	Was there any change to the intervention as a result of the event
44	SAE005	Num	3	Outcome of the event
45	SAE000X1	Num	3	Were you using a study drug or meal replacement at the time of the event
46	SAE000Y1	Num	3	Had you used a study drug or meal replacement in the past, but stopped before the event
47	SAE007	Num	3	Was this event expected or unexpected
48	SAE008	Num	3	Rate the severity of the event based on your clinical judgment
49	SAE009	Num	3	In the opinion of investigator, was this adverse event related to the study intervention
50	Visit	Num	3	Visit
51	DAYS_SAE	Num	4	Duration of SAE (days)
52	DAYS_SAE_EXT	Num	3	Duration of SAE with sequelae (days)
53	RAND_ID	Num	8	Randomized ID

Data Set Name: sf12.sas7bdat

Num	Variable	Type	Len	Label
1	SF12001	Num	3	Your health in general
2	SF12002	Num	3	Your health limit you in moderate activities
3	SF12003	Num	3	Your health limit you in climbing stairs
4	SF12004	Num	3	Accomplish less as a result of physical health
5	SF12005	Num	3	Were limited in the kind of work as a result of physical health
6	SF12006	Num	3	Accomplished less as a result of emotional problems
7	SF12007	Num	3	Did not work as carefully as usual
8	SF12008	Num	3	To what extent has physical or emotional problems interfered
9	SF12009	Num	3	Felt calm
10	SF12010	Num	3	Have a lot of energy
11	SF12011	Num	3	Felt downhearted
12	SF12012	Num	3	How much of the time has phsical or emotional problems interfered
13	Visit	Num	3	Visit
14	RAND_ID	Num	8	Randomized ID

Data Set Name: substat.sas7bdat

Num	Variable	Type	Len	Label
1	SUB001	Num	3	Did subject complete all study visits
2	SUB002	Num	3	Subject status
3	SUB004	Num	3	Number of FD days to qualify
4	SUB003	Num	3	Random assignment
5	SUB003A	Num	3	For enhanced treatment only: sibutramine
6	SUB003B	Num	3	For enhanced treatment only: orlistat
7	SUB003C	Num	3	For enhanced treatment only: meal replacement
8	VISIT1B	Num	3	Attended coaching visit: visit 1 (0 weeks)
9	VISIT1D	Num	3	Attended PCP visit: visit 1 (0 weeks)
10	VISIT2B	Num	3	Attended coaching visit: visit 2 (2 weeks)
11	VISIT3B	Num	3	Attended coaching visit: visit 3 (1 month)
12	VISIT4B	Num	3	Attended coaching visit: visit 4 (2 months)
13	VISIT5B	Num	3	Attended coaching visit: visit 5 (3 months)
14	VISIT5D	Num	3	Attended PCP visit: visit 5 (3 months)
15	VISIT6B	Num	3	Attended coaching visit: visit 6 (4 months)
16	VISIT7B	Num	3	Attended coaching visit: visit 7 (5 months)
17	VISIT8B	Num	3	Attended coaching visit: visit 8 (6 months)
18	VISIT8D	Num	3	Attended PCP visit: visit 8 (6 months)
19	VISIT9B	Num	3	Attended coaching visit: visit 9 (7 months)
20	VISIT10B	Num	3	Attended coaching visit: visit 10 (8 months)
21	VISIT11B	Num	3	Attended coaching visit: visit 11 (9 months)
22	VISIT11D	Num	3	Attended PCP visit: visit 11 (9 months)
23	VISIT12B	Num	3	Attended coaching visit: visit 12 (10 months)
24	VISIT13B	Num	3	Attended coaching visit: visit 13 (11 months)
25	VISIT14B	Num	3	Attended coaching visit: visit 14 (12 months)
26	VISIT14D	Num	3	Attended PCP visit: visit 14 (12 months)
27	VISIT15B	Num	3	Attended coaching visit: visit 15 (13 months)
28	VISIT16B	Num	3	Attended coaching visit: visit 16 (14 months)
29	VISIT17B	Num	3	Attended coaching visit: visit 17 (15 months)
30	VISIT17D	Num	3	Attended PCP visit: visit 17 (15 months)
31	VISIT18B	Num	3	Attended coaching visit: visit 18 (16 months)
32	VISIT19B	Num	3	Attended coaching visit: visit 19 (17 months)
33	VISIT20B	Num	3	Attended coaching visit: visit 20 (18 months)
34	VISIT20D	Num	3	Attended PCP visit: visit 20 (18 months)
35	VISIT21B	Num	3	Attended coaching visit: visit 21 (19 months)
36	VISIT22B	Num	3	Attended coaching visit: visit 22 (20 months)

Num	Variable	Type	Len	Label
37	VISIT23B	Num	3	Attended coaching visit: visit 23 (21 months)
38	VISIT23D	Num	3	Attended PCP visit: visit 23 (21 months)
39	VISIT24B	Num	3	Attended coaching visit: visit 24 (22 months)
40	VISIT25B	Num	3	Attended coaching visit: visit 25 (23 months)
41	VISIT26B	Num	3	Attended coaching visit: visit 26 (24 months)
42	VISIT26D	Num	3	Attended PCP visit: visit 26 (24 months)
43	ENH000	Num	3	Has Participant switched treatment
44	ENH001A	Num	3	Enhancement: first
45	ENH001D	Num	3	Discontinued due to AE: first
46	ENH001E	Char	24	Reason for change: first
47	ENH002A	Num	3	Enhancement: 2nd
48	ENH002D	Num	3	Discontinued due to AE: 2nd
49	ENH002E	Char	24	Reason for change: 2nd
50	ENH003A	Num	3	Enhancement: 3rd
51	ENH003D	Num	3	Discontinued due to AE: 3rd
52	ENH003E	Char	22	Reason for change: 3rd
53	ENH004A	Num	3	Enhancement: 4th
54	ENH004D	Num	3	Discontinued due to AE: 4th
55	ENH004E	Char	1	Reason for change: 4th
56	NEH001	Num	3	Has participant stopped utilizing enhancement
57	NEH002	Num	3	Enhancement
58	NEH004	Num	3	Discontinued due to AE
59	Visit	Num	3	Visit
60	DAYS_ENH1	Num	4	Days on Enhancement 1
61	DAYS_ENH2	Num	4	Days on Enhancement 2
62	DAYS_ENH3	Num	4	Days on Enhancement 3
63	DAYS_ENH4	Num	4	Days on Enhancement 4
64	DAYS_ENH	Num	4	Days on Enhancement
65	RAND_ID	Num	8	Randomized ID

Data Set Name: svc.sas7bdat

Num	Variable	Type	Len	Label
1	SVC000	Num	3	Group assignment
2	SVC001B	Num	8	Weight: 1
3	SVC001C	Num	3	No. of food diary days: 1
4	SVC001D	Num	3	Physical activity (mins/week): 1
5	SVC001E	Num	4	Steps per week: 1
6	SVC001F	Num	3	No. of meal replacements dispensed: 1
7	SVC001F2	Num	3	No. of meal replacements consumed: 1
8	SVC001F3	Num	4	Systolic: 1
9	SVC001F4	Num	3	Diastolic: 1
10	SVC001F5	Num	3	Action Taken: 1
11	SVC001G	Num	3	Phone or in-person: 1
12	SVC002B	Num	8	Weight: 2
13	SVC002C	Num	3	No. of food diary days: 2
14	SVC002D	Num	4	Physical activity (mins/week): 2
15	SVC002E	Num	4	Steps per week: 2
16	SVC002F	Num	3	No. of meal replacements dispensed: 2
17	SVC002F2	Num	3	No. of meal replacements consumed: 2
18	SVC002F3	Num	4	Systolic: 2
19	SVC002F4	Num	3	Diastolic: 2
20	SVC002F5	Num	3	Action Taken: 2
21	SVC002G	Num	3	Phone or in-person: 2
22	SVC003B	Num	8	Weight: 3
23	SVC003C	Num	3	No. of food diary days: 3
24	SVC003D	Num	4	Physical activity (mins/week): 3
25	SVC003E	Num	4	Steps per week: 3
26	SVC003F	Num	4	No. of meal replacements dispensed: 3
27	SVC003F2	Num	4	No. of meal replacements consumed: 3
28	SVC003F3	Num	4	Systolic: 3
29	SVC003F4	Num	3	Diastolic: 3
30	SVC003F5	Num	3	Action Taken: 4
31	SVC003G	Num	3	Phone or in-person: 3
32	SVC004B	Num	8	Weight: 4
33	SVC004C	Num	3	No. of food diary days: 4
34	SVC004D	Num	4	Physical activity (mins/week): 4
35	SVC004E	Num	4	Steps per week: 4
36	SVC004F	Num	4	No. of meal replacements dispensed: 4

Num	Variable	Type	Len	Label
37	SVC004F2	Num	4	No. of meal replacements consumed: 4
38	SVC004F3	Num	4	Systolic: 4
39	SVC004F4	Num	3	Diastolic: 4
40	SVC004F5	Num	3	Action Taken: 4
41	SVC004G	Num	3	Phone or in-person: 4
42	SVC005B	Num	8	Weight: 5
43	SVC005C	Num	3	No. of food diary days: 5
44	SVC005D	Num	4	Physical activity (mins/week): 5
45	SVC005E	Num	4	Steps per week: 5
46	SVC005F	Num	4	No. of meal replacements dispensed: 5
47	SVC005F2	Num	4	No. of meal replacements consumed: 5
48	SVC005F3	Num	4	Systolic: 5
49	SVC005F4	Num	3	Diastolic: 5
50	SVC005F5	Num	3	Action Taken: 5
51	SVC005G	Num	3	Phone or in-person: 5
52	SVC006B	Num	8	Weight: 6
53	SVC006C	Num	4	No. of food diary days: 6
54	SVC006D	Num	4	Physical activity (mins/week): 6
55	SVC006E	Num	4	Steps per week: 6
56	SVC006F	Num	4	No. of meal replacements dispensed: 6
57	SVC006F2	Num	4	No. of meal replacements consumed: 6
58	SVC006F3	Num	4	Systolic: 6
59	SVC006F4	Num	3	Diastolic: 6
60	SVC006F5	Num	3	Action Taken: 6
61	SVC006G	Num	3	Phone or in-person: 6
62	SVC007B	Num	8	Weight: 7
63	SVC007C	Num	3	No. of food diary days: 7
64	SVC007D	Num	4	Physical activity (mins/week): 7
65	SVC007E	Num	3	Steps per week: 7
66	SVC007F	Num	4	No. of meal replacements dispensed: 7
67	SVC007F2	Num	4	No. of meal replacements consumed: 7
68	SVC007F3	Num	4	Systolic: 7
69	SVC007F4	Num	3	Diastolic: 7
70	SVC007F5	Num	3	Action Taken: 7
71	SVC007G	Num	3	Phone or in-person: 7
72	SVC008B	Num	8	Weight: 8
73	SVC008C	Num	3	No. of food diary days: 8
74	SVC008D	Num	4	Physical activity (mins/week): 8
75	SVC008E	Num	4	Steps per week: 8

Num	Variable	Type	Len	Label
76	SVC008F	Num	4	No. of meal replacements dispensed: 8
77	SVC008F2	Num	4	No. of meal replacements consumed: 8
78	SVC008F3	Num	4	Systolic: 8
79	SVC008F4	Num	3	Diastolic: 8
80	SVC008F5	Num	3	Action Taken: 8
81	SVC008G	Num	3	Phone or in-person: 8
82	SVC009B	Num	8	Weight: 9
83	SVC009C	Num	3	No. of food diary days: 9
84	SVC009D	Num	4	Physical activity (mins/week): 9
85	SVC009E	Num	6	Steps per week: 9
86	SVC009F	Num	4	No. of meal replacements dispensed: 9
87	SVC009F2	Num	4	No. of meal replacements consumed: 9
88	SVC009F3	Num	4	Systolic: 9
89	SVC009F4	Num	3	Diastolic: 9
90	SVC009F5	Num	3	Action Taken: 9
91	SVC009G	Num	3	Phone or in-person: 9
92	SVC010B	Num	8	Weight: 10
93	SVC010C	Num	3	No. of food diary days: 10
94	SVC010D	Num	4	Physical activity (mins/week): 10
95	SVC010E	Num	6	Steps per week: 10
96	SVC010F	Num	4	No. of meal replacements dispensed: 10
97	SVC010F2	Num	4	No. of meal replacements consumed: 10
98	SVC010F3	Num	4	Systolic: 10
99	SVC010F4	Num	3	Diastolic: 10
100	SVC010F5	Num	3	Action Taken: 10
101	SVC010G	Num	3	Phone or in-person: 10
102	SVC011B	Num	8	Weight: 11
103	SVC011C	Num	3	No. of food diary days: 11
104	SVC011D	Num	4	Physical activity (mins/week): 11
105	SVC011E	Num	6	Steps per week: 11
106	SVC011F	Num	4	No. of meal replacements dispensed: 11
107	SVC011F2	Num	4	No. of meal replacements consumed: 11
108	SVC011F3	Num	4	Systolic: 11
109	SVC011F4	Num	3	Diastolic: 11
110	SVC011F5	Num	3	Action Taken: 11
111	SVC011G	Num	3	Phone or in-person: 11
112	SVC012B	Num	8	Weight: 12
113	SVC012C	Num	3	No. of food diary days: 12
114	SVC012D	Num	4	Physical activity (mins/week): 12

Num	Variable	Type	Len	Label
115	SVC012E	Num	6	Steps per week: 12
116	SVC012F	Num	4	No. of meal replacements dispensed: 12
117	SVC012F2	Num	4	No. of meal replacements consumed: 12
118	SVC012F3	Num	4	Systolic: 12
119	SVC012F4	Num	3	Diastolic: 12
120	SVC012F5	Num	3	Action Taken: 12
121	SVC012G	Num	3	Phone or in-person: 12
122	SVC013B	Num	8	Weight: 13
123	SVC013C	Num	3	No. of food diary days: 13
124	SVC013D	Num	4	Physical activity (mins/week): 13
125	SVC013E	Num	6	Steps per week: 13
126	SVC013F	Num	4	No. of meal replacements dispensed: 13
127	SVC013F2	Num	4	No. of meal replacements consumed: 13
128	SVC013F3	Num	4	Systolic: 13
129	SVC013F4	Num	3	Diastolic: 13
130	SVC013F5	Num	3	Action Taken: 13
131	SVC013G	Num	3	Phone or in-person: 13
132	SVC014B	Num	8	Weight: 14
133	SVC014C	Num	3	No. of food diary days: 14
134	SVC014D	Num	4	Physical activity (mins/week): 14
135	SVC014E	Num	6	Steps per week: 14
136	SVC014F	Num	4	No. of meal replacements dispensed: 14
137	SVC014F2	Num	4	No. of meal replacements consumed: 14
138	SVC014F3	Num	4	Systolic: 14
139	SVC014F4	Num	3	Diastolic: 14
140	SVC014F5	Num	3	Action Taken: 14
141	SVC014G	Num	3	Phone or in-person: 14
142	SVC015B	Num	8	Weight: 15
143	SVC015C	Num	3	No. of food diary days: 15
144	SVC015D	Num	4	Physical activity (mins/week): 15
145	SVC015E	Num	6	Steps per week: 15
146	SVC015F	Num	4	No. of meal replacements dispensed: 15
147	SVC015F2	Num	4	No. of meal replacements consumed: 15
148	SVC015F3	Num	4	Systolic: 15
149	SVC015F4	Num	3	Diastolic: 15
150	SVC015F5	Num	3	Action Taken: 15
151	SVC015G	Num	3	Phone or in-person: 15
152	SVC016B	Num	8	Weight: 16
153	SVC016C	Num	4	No. of food diary days: 16

Num	Variable	Type	Len	Label
154	SVC016D	Num	4	Physical activity (mins/week): 16
155	SVC016E	Num	6	Steps per week: 16
156	SVC016F	Num	3	No. of meal replacements dispensed: 16
157	SVC016F2	Num	3	No. of meal replacements consumed: 16
158	SVC016F3	Num	4	Systolic: 16
159	SVC016F4	Num	3	Diastolic: 16
160	SVC016F5	Num	3	Action Taken: 16
161	SVC016G	Num	3	Phone or in-person: 16
162	SVC017B	Num	8	Weight: 17
163	SVC017C	Num	3	No. of food diary days: 17
164	SVC017D	Num	4	Physical activity (mins/week): 17
165	SVC017E	Num	6	Steps per week: 17
166	SVC017F	Num	4	No. of meal replacements dispensed: 17
167	SVC017F2	Num	3	No. of meal replacements consumed: 17
168	SVC017F3	Num	4	Systolic: 17
169	SVC017F4	Num	3	Diastolic: 17
170	SVC017F5	Num	3	Action Taken: 17
171	SVC017G	Num	3	Phone or in-person: 17
172	SVC018B	Num	8	Weight: 18
173	SVC018C	Num	3	No. of food diary days: 18
174	SVC018D	Num	4	Physical activity (mins/week): 18
175	SVC018E	Num	6	Steps per week: 18
176	SVC018F	Num	3	No. of meal replacements dispensed: 18
177	SVC018F2	Num	3	No. of meal replacements consumed: 18
178	SVC018F3	Num	4	Systolic: 18
179	SVC018F4	Num	3	Diastolic: 18
180	SVC018F5	Num	3	Action Taken: 18
181	SVC018G	Num	3	Phone or in-person: 18
182	SVC019B	Num	8	Weight: 19
183	SVC019C	Num	3	No. of food diary days: 19
184	SVC019D	Num	4	Physical activity (mins/week): 19
185	SVC019E	Num	6	Steps per week: 19
186	SVC019F	Num	3	No. of meal replacements dispensed: 19
187	SVC019F2	Num	3	No. of meal replacements consumed: 19
188	SVC019F3	Num	4	Systolic: 19
189	SVC019F4	Num	3	Diastolic: 19
190	SVC019F5	Num	3	Action Taken: 19
191	SVC019G	Num	3	Phone or in-person: 19
192	SVC020B	Num	8	Weight: 20

Num	Variable	Type	Len	Label
193	SVC020C	Num	3	No. of food diary days: 20
194	SVC020D	Num	4	Physical activity (mins/week): 20
195	SVC020E	Num	6	Steps per week: 20
196	SVC020F	Num	3	No. of meal replacements dispensed: 20
197	SVC020F2	Num	3	No. of meal replacements consumed: 20
198	SVC020F3	Num	4	Systolic: 20
199	SVC020F4	Num	3	Diastolic: 20
200	SVC020F5	Num	3	Action Taken: 20
201	SVC020G	Num	3	Phone or in-person: 20
202	SVC021B	Num	8	Weight: 21
203	SVC021C	Num	3	No. of food diary days: 21
204	SVC021D	Num	4	Physical activity (mins/week): 21
205	SVC021E	Num	6	Steps per week: 21
206	SVC021F	Num	3	No. of meal replacements dispensed: 21
207	SVC021F2	Num	3	No. of meal replacements consumed: 21
208	SVC021F3	Num	4	Systolic: 21
209	SVC021F4	Num	3	Diastolic: 21
210	SVC021F5	Num	3	Action Taken: 21
211	SVC021G	Num	3	Phone or in-person: 21
212	SVC022B	Num	8	Weight: 22
213	SVC022C	Num	3	No. of food diary days: 22
214	SVC022D	Num	4	Physical activity (mins/week): 22
215	SVC022E	Num	6	Steps per week: 22
216	SVC022F	Num	4	No. of meal replacements dispensed: 22
217	SVC022F2	Num	4	No. of meal replacements consumed: 22
218	SVC022F3	Num	4	Systolic: 22
219	SVC022F4	Num	3	Diastolic: 22
220	SVC022F5	Num	3	Action Taken: 22
221	SVC022G	Num	3	Phone or in-person: 22
222	SVC023B	Num	8	Weight: 23
223	SVC023C	Num	3	No. of food diary days: 23
224	SVC023D	Num	4	Physical activity (mins/week): 23
225	SVC023E	Num	6	Steps per week: 23
226	SVC023F	Num	3	No. of meal replacements dispensed: 23
227	SVC023F2	Num	3	No. of meal replacements consumed: 23
228	SVC023F3	Num	4	Systolic: 23
229	SVC023F4	Num	3	Diastolic: 23
230	SVC023F5	Num	3	Action Taken: 23
231	SVC023G	Num	3	Phone or in-person: 23

Num	Variable	Type	Len	Label
232	SVC024B	Num	8	Weight: 24
233	SVC024C	Num	3	No. of food diary days: 24
234	SVC024D	Num	4	Physical activity (mins/week): 24
235	SVC024E	Num	6	Steps per week: 24
236	SVC024F	Num	3	No. of meal replacements dispensed: 24
237	SVC024F2	Num	3	No. of meal replacements consumed: 24
238	SVC024F3	Num	4	Systolic: 24
239	SVC024F4	Num	3	Diastolic: 24
240	SVC024F5	Num	3	Action Taken: 24
241	SVC024G	Num	3	Phone or in-person: 24
242	SVC025B	Num	8	Weight: 25
243	SVC025C	Num	3	No. of food diary days: 25
244	SVC025D	Num	4	Physical activity (mins/week): 25
245	SVC025E	Num	6	Steps per week: 25
246	SVC025F	Num	3	No. of meal replacements dispensed: 25
247	SVC025F2	Num	3	No. of meal replacements consumed: 25
248	SVC025F3	Num	4	Systolic: 25
249	SVC025F4	Num	3	Diastolic: 25
250	SVC025F5	Num	3	Action Taken: 25
251	SVC025G	Num	3	Phone or in-person: 25
252	SVC026B	Num	8	Weight: 26
253	SVC026C	Num	3	No. of food diary days: 26
254	SVC026D	Num	4	Physical activity (mins/week): 26
255	SVC026E	Num	6	Steps per week: 26
256	SVC026F	Num	3	No. of meal replacements dispensed: 26
257	SVC026F2	Num	3	No. of meal replacements consumed: 26
258	SVC026F3	Num	4	Systolic: 26
259	SVC026F4	Num	3	Diastolic: 26
260	SVC026F5	Num	3	Action Taken: 26
261	SVC026G	Num	3	Phone or in-person: 26
262	Visit	Num	3	Visit
263	RAND_ID	Num	8	Randomized ID

Data Set Name: wt_pref_a.sas7bdat

Num	Variable	Type	Len	Label
1	WPQA001	Num	3	Weight
2	WPQA002	Num	3	Heaviness
3	WPQA003	Num	3	Obesity
4	WPQA004	Num	3	Body mass index
5	WPQA005	Num	3	Excess weight
6	WPQA006	Num	3	Fatness
7	WPQA007	Num	3	Excess fat
8	WPQA008	Num	3	Large size
9	WPQA009	Num	3	Unhealthy body weight
10	WPQA010	Num	3	Weight problem
11	WPQA011	Num	3	Unhealthy body mass index
12	WPQA012A	Char	30	You would most want your doctor to use: term 1
13	WPQA012B	Char	30	You would most want your doctor to use: term 2
14	WPQA013A	Char	30	You would least want your doctor to use: term 1
15	WPQA013B	Char	30	You would least want your doctor to use: term 2
16	Visit	Num	3	Visit
17	RAND_ID	Num	8	Randomized ID

Data Set Name: wt_pref_b.sas7bdat

Num	Variable	Type	Len	Label
1	WPQB001	Num	3	Unhealthy body mass index
2	WPQB002	Num	3	Weight problem
3	WPQB003	Num	3	Unhealthy body weight
4	WPQB004	Num	3	Large size
5	WPQB005	Num	3	Excess fat
6	WPQB006	Num	3	Fatness
7	WPQB007	Num	3	Excess weight
8	WPQB008	Num	3	Body mass index
9	WPQB009	Num	3	Obesity
10	WPQB010	Num	3	Heaviness
11	WPQB011	Num	3	Weight
12	WPQB012A	Char	30	You would least want your doctor to use: term 1
13	WPQB012B	Char	26	You would least want your doctor to use: term 2
14	WPQB013A	Char	30	You would most want your doctor to use: term 1
15	WPQB013B	Char	30	You would most want your doctor to use: term 2
16	Visit	Num	3	Visit
17	RAND_ID	Num	8	Randomized ID

Data Set Name: wtloss_efforts.sas7bdat

Num	Variable	Type	Len	Label
1	COW001B	Num	3	Additional contacts: 1
2	COW001C	Num	3	Outside weight loss efforts: 1
3	COW002B	Num	3	Additional contacts: 2
4	COW002C	Num	3	Outside weight loss efforts: 2
5	COW003B	Num	3	Additional contacts: 3
6	COW003C	Num	3	Outside weight loss efforts: 3
7	COW004B	Num	3	Additional contacts: 4
8	COW004C	Num	3	Outside weight loss efforts: 4
9	COW005B	Num	3	Additional contacts: 5
10	COW005C	Num	3	Outside weight loss efforts: 5
11	COW006B	Num	3	Additional contacts: 6
12	COW006C	Num	3	Outside weight loss efforts: 6
13	COW007B	Num	3	Additional contacts: 7
14	COW007C	Num	3	Outside weight loss efforts: 7
15	COW008B	Num	3	Additional contacts: 8
16	COW008C	Num	3	Outside weight loss efforts: 8
17	COW009B	Num	3	Additional contacts: 9
18	COW009C	Num	3	Outside weight loss efforts: 9
19	COW010B	Num	3	Additional contacts: 10
20	COW010C	Num	3	Outside weight loss efforts: 10
21	COW011B	Num	3	Additional contacts: 11
22	COW011C	Num	3	Outside weight loss efforts: 11
23	COW012B	Num	3	Additional contacts: 12
24	COW012C	Num	3	Outside weight loss efforts: 12
25	COW013B	Num	3	Additional contacts: 13
26	COW013C	Num	3	Outside weight loss efforts: 13
27	COW014B	Num	3	Additional contacts: 14
28	COW014C	Num	3	Outside weight loss efforts: 14
29	COW015B	Num	3	Additional contacts: 15
30	COW015C	Num	3	Outside weight loss efforts: 15
31	COW016B	Num	3	Additional contacts: 16
32	COW016C	Num	3	Outside weight loss efforts: 16
33	COW017B	Num	3	Additional contacts: 17
34	COW017C	Num	3	Outside weight loss efforts: 17
35	COW018B	Num	3	Additional contacts: 18
36	COW018C	Num	3	Outside weight loss efforts: 18

Num	Variable	Type	Len	Label
37	COW019B	Num	3	Additional contacts: 19
38	COW019C	Num	3	Outside weight loss efforts: 19
39	COW020B	Num	3	Additional contacts: 20
40	COW020C	Num	3	Outside weight loss efforts: 20
41	COW021B	Num	3	Additional contacts: 21
42	COW021C	Num	3	Outside weight loss efforts: 21
43	COW022B	Num	3	Additional contacts: 22
44	COW022C	Num	3	Outside weight loss efforts: 22
45	COW023B	Num	3	Additional contacts: 23
46	COW023C	Num	3	Outside weight loss efforts: 23
47	COW024B	Num	3	Additional contacts: 24
48	COW024C	Num	3	Outside weight loss efforts: 24
49	COW025B	Num	3	Additional contacts: 25
50	COW025C	Num	3	Outside weight loss efforts: 25
51	COW026B	Num	3	Additional contacts: 26
52	COW026C	Num	3	Outside weight loss efforts: 26
53	COW027B	Num	3	Additional contacts: 27
54	COW027C	Num	3	Outside weight loss efforts: 27
55	COW028B	Num	3	Additional contacts: 28
56	COW028C	Num	3	Outside weight loss efforts: 28
57	Visit	Num	3	Visit
58	RAND_ID	Num	8	Randomized ID