



**Residential History
Questionnaire**

Id#:

Acrostic:

RHXDT2

Date: / /

Month Day Year

The following questions refer to the places where you have lived in the past. We are asking you these questions to study if things about the places where people have lived (such as air pollution) are related to getting heart disease or stroke. Using this information together with information on air pollution monitoring stations all over the country, we will be able to determine if persons exposed to higher levels of pollution have more disease. This information will be kept strictly confidential.

Calculate the participant's age in 1980 BEFORE beginning this form. Calculate approximate age in 1980 as current age - 23 if administered in 2003 and current age - 24 if administered in 2004.

Let's start in 1980. That would be when you were about _____ years old.

ADDRESS 1

- 1 Where did you live in January of 1980? Complete all available information. If non-US, complete only city/town, province and country.

Street Address (Street and number):

RHXSTR12

RHXSTR22

City/Town:

RHXCITY2

County (Province, if non-US):

RHXCNTY2

State:

RHXST2

Zip code:

RHXZIP2

Country:

RHXCNTY2

→ If US but participant does not remember exact street address:

We realize it may not be easy to remember the exact street address. Do you remember the nearest intersection? Please include the suffix for the street name, for example Street, Avenue, Boulevard.

RHXINT12

and

RHXINT22

- 2 Did you smoke at the time you lived at this address? If necessary, clarify: "If you quit or started smoking while you lived there, tell me if you smoked most of the time you were there."

RHXSMK2 No Yes Do not remember

3 Did anyone else living with you smoke inside your home while you were living at this address?
If necessary, clarify: "If this changed while you lived at this address, tell me if someone who lived with you smoked inside your home for most of the time you lived there."

RHXSHSM2 No Yes Do not remember

4 If you were working, did people who worked with you smoke at work?

RHXWKSM2
 No Did not work
 Yes Do not remember

5 Did you live anywhere else after you lived at this address?

Interviewer: Repeat the last reported address if necessary.

No → Confirm that the last reported address is the current address

RHXCUR2

QUESTIONNAIRE ENDS HERE →

Thank you so much for completing this questionnaire! This information will be kept strictly confidential and will help us understand if air pollution is related to heart disease and stroke

Yes → Continue to Question 6, and complete Supplementary Page for next address

RHXMVMO2

RHXMVYR2

6 When did you move from this address?

Month (e.g.08=Aug)

Year

COMPLETE SUPPLEMENTARY PAGES AS NECESSARY UNTIL CURRENT ADDRESS IS REACHED

For MESA Field Center Use Only:

RHXTID2

Interviewer ID:

RHXRID2

Reviewer ID:

RHXDID2

Data Entry ID: