



Exam 6
Physical Activity
 Self Administered

Participant ID #:

Acrostic:

Technician ID:

Date: / /

Month Day Year

Self-administered

Interviewer-administered Interviewer ID:

Think about the types of activities you did in a typical week in the past month. Please indicate whether you did or did not perform each of the following activities in a typical week. For each item that you respond 'yes', you will be asked for the number of days in a typical week you did these activities and the average amount of time per day in hours and minutes.

Intensity Levels:

Light → easy effort

Moderate → harder than light but not all-out

Heavy → all-out

Example:

Conditioning Activities

Moderate Effort: Low impact aerobics, slow bicycling, rowing, leisurely swimming, health club machines - moderate intensity

Y N

Days/Week							Hours/Day						Minutes/Day			
1	2	3	4	5	6	7	1	2	3	4	5	5+	5	15	30	45
<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>

In this example, the activity was done 3 days per week, 1 hour and 30 minutes per day.

In a typical week in the past month, did you do:

Household chores	Days/Week							Hours/Day						Minutes/Day			
1. <u>Light Effort:</u> Such as cooking, dishes, ironing, straightening up, laundry, shopping	1	2	3	4	5	6	7	1	2	3	4	5	5+	5	15	30	45
Y N <input type="radio"/> <input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>



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In a typical week in the past month, did you do:

Household chores	Days/Week	Hours/Day	Minutes/Day
<p>2. <u>Moderate or Heavy Effort:</u> Such as heavy cleaning, scrubbing, mopping, home repairs, washing car, vacuuming</p> <p>Y N ○ ○</p>	<p>1 2 3 4 5 6 7 ○ ○ ○ ○ ○ ○ ○</p>	<p>1 2 3 4 5 5+ ○ ○ ○ ○ ○ ○</p>	<p>5 15 30 45 ○ ○ ○ ○</p>
<p>Lawn/Yard/Garden/Farm</p> <p>3. <u>Moderate Effort:</u> Such as weeding, mowing grass, raking, cleaning garage, sweeping</p> <p>Y N ○ ○</p>	<p>1 2 3 4 5 6 7 ○ ○ ○ ○ ○ ○ ○</p>	<p>1 2 3 4 5 5+ ○ ○ ○ ○ ○ ○</p>	<p>5 15 30 45 ○ ○ ○ ○</p>
<p>4. <u>Heavy Effort:</u> Such as digging dirt, shoveling snow, mending fences, chopping wood</p> <p>Y N ○ ○</p>	<p>1 2 3 4 5 6 7 ○ ○ ○ ○ ○ ○ ○</p>	<p>1 2 3 4 5 5+ ○ ○ ○ ○ ○ ○</p>	<p>5 15 30 45 ○ ○ ○ ○</p>
<p>Care of Children/Adults</p> <p>5. <u>Light effort:</u> Such as bathing, feeding, changing diapers, playing with child</p> <p>Y N ○ ○</p>	<p>1 2 3 4 5 6 7 ○ ○ ○ ○ ○ ○ ○</p>	<p>1 2 3 4 5 5+ ○ ○ ○ ○ ○ ○</p>	<p>5 15 30 45 ○ ○ ○ ○</p>
<p>6. <u>Moderate Effort:</u> Such as lifting and carrying, pushing wheelchair or stroller</p> <p>Y N ○ ○</p>	<p>1 2 3 4 5 6 7 ○ ○ ○ ○ ○ ○ ○</p>	<p>1 2 3 4 5 5+ ○ ○ ○ ○ ○ ○</p>	<p>5 15 30 45 ○ ○ ○ ○</p>



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In a typical week in the past month, did you do:

Transportation	Days/Week	Hours/Day	Minutes/Day
7. Drive or ride in car, ride the bus/ subway, including travel to work Y N <input type="radio"/> <input type="radio"/>	1 2 3 4 5 6 7 <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	1 2 3 4 5 5+ <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	5 15 30 45 <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>
Walking (not at work) 8. Walking to get places - to the bus, car, work, into the store Y N <input type="radio"/> <input type="radio"/>	1 2 3 4 5 6 7 <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	1 2 3 4 5 5+ <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	5 15 30 45 <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>
9. Walking for exercise, pleasure, social reasons, walking during work breaks, walking the dog Y N <input type="radio"/> <input type="radio"/>	1 2 3 4 5 6 7 <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	1 2 3 4 5 5+ <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	5 15 30 45 <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>
Dancing/Sport Activities 10. Dancing in church, ceremonies or for pleasure Y N <input type="radio"/> <input type="radio"/>	1 2 3 4 5 6 7 <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	1 2 3 4 5 5+ <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	5 15 30 45 <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>
11. Team sports - softball, volleyball, basketball, soccer Y N <input type="radio"/> <input type="radio"/>	1 2 3 4 5 6 7 <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	1 2 3 4 5 5+ <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	5 15 30 45 <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>
12. Dual sports - tennis, racketball, paddleball Y N <input type="radio"/> <input type="radio"/>	1 2 3 4 5 6 7 <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	1 2 3 4 5 5+ <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	5 15 30 45 <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>



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In a typical week in the past month, did you do:

Dancing/Sport Activities	Days/Week	Hours/Day	Minutes/Day
13. Individual activities - golf, bowling, yoga, T'ai Chi Y N <input type="radio"/> <input type="radio"/>	1 2 3 4 5 6 7 <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	1 2 3 4 5 5+ <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	5 15 30 45 <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>
Conditioning Activities 14. <u>Moderate Effort</u> : Low impact aerobics, slow bicycling, rowing, leisurely swimming, health club machines - moderate intensity Y N <input type="radio"/> <input type="radio"/>	1 2 3 4 5 6 7 <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	1 2 3 4 5 5+ <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	5 15 30 45 <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>
15. <u>Heavy Effort</u> : High impact aerobics, fast bicycling, running, jogging, fast swimming, health club machines - vigorous intensity, judo, kickboxing, karate Y N <input type="radio"/> <input type="radio"/>	1 2 3 4 5 6 7 <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	1 2 3 4 5 5+ <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	5 15 30 45 <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>
Leisure Activities 16. Sit or recline and watch TV Y N <input type="radio"/> <input type="radio"/>	1 2 3 4 5 6 7 <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	1 2 3 4 5 5+ <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	5 15 30 45 <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>
17. Read, knit, sew, visit, do nothing, non-work recreational computer Y N <input type="radio"/> <input type="radio"/>	1 2 3 4 5 6 7 <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	1 2 3 4 5 5+ <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	5 15 30 45 <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>



Occupational Activities

18. Do you work to earn money? *(if no, skip to Q. 24)*

- No Yes

19. How many days per week and hours per day do you work in all jobs?

Days/Week							Hours/Day																
1	2	3	4	5	6	7	<1	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Fill in the circles for the time you spent in each activity at work. The hours per day for all activities should equal the total hours per day you work.

At work, did you do:

20. Light Effort: While sitting (e.g. in an office, laboratory, child care, etc.)

- Yes No

Hours/Day																
<1	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

21. Light Effort: While standing (e.g. filing, copying, clerking, assembly, nursing, farming, etc.)

- Yes No

Hours/Day																
<1	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>



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At work, did you do:

22. Moderate Effort: While standing and/or walking (e.g. nursing, custodian, housekeeping), lifting & pushing, sustained walking (e.g. making deliveries)

Hours/Day

<1	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Yes No

23. Heavy Effort: Manual labor, ranch hand, farm labor, lifting, carrying, climbing, loading/unloading trucks

Hours/Day

<1	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Yes No

Volunteer Activities

24. Do you work as a volunteer and/or at church in activities you have not yet mentioned on this survey? (if no, skip to Q. 28)

No Yes

Did your volunteer work include:

25. Light Effort: Sitting or standing

Days/Week

Hours/Day

1	2	3	4	5	6	7	1	2	3	4	5	5+
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Yes No

26. Moderate Effort: Standing or walking

1	2	3	4	5	6	7	1	2	3	4	5	5+
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Yes No



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Did your volunteer work include:

	Days/Week							Hours/Day					
27. <u>Heavy Effort</u> : Pushing, lifting, carrying, climbing	1	2	3	4	5	6	7	1	2	3	4	5	5+
	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Yes													
No													
<input type="radio"/>													
<input type="radio"/>													

28. When you walk outside of your home, what is your usual pace?

- No walking at all
- Casual strolling (up to 2 mph)
- Average or normal (2 - 3 mph)
- Fairly briskly (4 - 5 mph)
- Brisk or striding (more than 5 mph)