



The Arizona Border Study

An Extension of the Arizona National Human Exposure Assessment Survey (NHEXAS)Study Sponsored by the Environmental Health Workgroup of the Border XXI Program

Quality Systems and Implementation Plan for Human Exposure Assessment

The University of Arizona Tucson, Arizona 85721

Cooperative Agreement CR 824719

Standard Operating Procedure

SOP-UA-D-10.0

Title: Coding: Food Diary Follow Up

Source: The University of Arizona

U.S. Environmental Protection Agency Office of Research and Development Human Exposure & Atmospheric Sciences Division Exposure & Dose Research Branch

Notice: The U.S. Environmental Protection Agency (EPA), through its Office of Research and Development (ORD), partially funded and collaborated in the research described here. This protocol is part of the Quality Systems Implementation Plan (QSIP) that was reviewed by the EPA and approved for use in this demonstration/scoping study. Mention of trade names or commercial products does not constitute endorsement or recommendation by EPA for use.

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Coding: Food Diary Follow Up

1.0 Purpose and Applicability

This procedure defines the coding strategy for the Food Diary Follow Up. This questionnaire was developed for use in NHEXAS, the Border Study, and other Health and Environment Projects.

2.0 Definitions

- 2.1 BORDER STUDY: An alias for "Total Human Exposure Arizona: A comparison of the border communities and the state" conducted in Arizona by the University of Arizona/Battelle/Illinois Institute of Technology consortium.
- 2.2 CODE, GLOBAL: A set of standard codes used in data within the project designating the status of a data field in three cases: datum refused, datum non-applicable, and datum missing.
- 2.3 HEALTH AND ENVIRONMENT PROJECTS (or H & E): An umbrella title for all projects funded to M. D. Lebowitz and/or M. K. O'Rourke (or their designees) which examine purported or real relationships among environmental factors and any aspect of human health.
- 2.4 HRP SITE: The Health Related Professions building, located at 1435 North Fremont Avenue; Tucson, AZ 85719. This is an annex of the Arizona Prevention Center and the primary site of NHEXAS Arizona.
- 2.5 NHEXAS Arizona: Acronym for National Human EXposure Assessment Survey, a research project conducted in Arizona by the University of Arizona/Battelle/ Illinois Institute of Technology Consortium.

3.0 References

Teleform 5.0, Copyright 1991-1996 by Cardiff Software, Inc., San Marcos, CA.

4.0 Discussion

The Food Diary Follow Up is a scanable form. The questionnaire will be completed by the subject in the field, QA checked by the interviewer or technician and office staff and then scanned into the database.

SOP# UA-D-10.0 Revision #0 June 1997 Page: 2 of 11

The OMB approved questions were formatted into a scanable form using the Teleform program package and following procedures outlined in SOP # UA-D-30.x. This package has a dictionary feature and a feature that prints out the characteristics of each created form.

The overall coding scheme will follow SOP# UA-D-31.x: Global Coding for Scanned Forms. The data will be stored as flat ASCII files and re-coded according to EPA's coding scheme when it is ready to be submitted to EPA.

A final version of the Food Diary Follow Up form is presented in the attached Appendix A. The Appendix contains the entire form. A description of all fields and variables may be found in UA-D-21.x Appendix B. Field descriptions contain the name of the field on the form, the variable name, the object id attributes, the constraint level for recognition of the code, the length of the field and the type of the field (i.e., hand writing recognition, and automated Dictionary Correction, etc.).

Special Coding lists will be developed as needed to accommodate unanticipated responses. Such coding lists will be attached to each of the appendices as generated.

A summary table of questions needing specific codes and coding lists used are found in Table 1.

5.0 Responsibilities

The Project Data Coordinator is responsible for creating the forms, defining the databases and writing the coding instructions for the Food Diary Follow Up form.

6.0 Materials and Reagents

- 6.1 Codes are to be written with a black felt tip pen only.
- 6.2 Questionnaires are put into a batch once they are coded and recorded on the Batch Description and Custody Record.
- Those coding lists that are not in the Coding Lists notebook can be found on line in the /rsc53/TrackNHEXAZ/codes/ directory. The coding lists that pertain to the Food Diary Follow Up Questionnaire are listed in section 8.0 Records, and include Tables 2 through 3. Food codes for the Food Diary Follow Up are located in the "For Office Use Only" box on the Diet Diary adjacent to the three digit handwriting recognition boxes where coding occurs. (See UA-D-43.x Appendix A).

- 6.4 Networked Computer Workstation that can access FoxPro.
- 6.5 Microsoft FoxPro Professional Edition version 2.6, Copyright 1989-1993 Microsoft Corporation.
- 6.6 Coding Program v1.0, developed in-house using FoxPro 2.6.

7.0 Procedural Steps for Coding of the Food Diary Follow Up

7.1 Preparation

- A. Remove a batch of Food Diary Follow Up Questionnaire forms from the Data Coordinator's file cabinets.
- B. Bring forms to an area where coding can be done.
- C. Use only a black felt-tip pen for coding.
- D. Find the Coding Lists notebook which contains the coding list specified in Table 1 and bring it to the coding area.

7.2 Coding Forms

- A. Begin by checking for missing information, illogical answers, and necessary codes throughout the entire form.
- B. Follow the Global Coding scheme (UA-D-31.x) as necessary.
- C. If there is no code appropriate to the given response then create a new code and add it to the coding list according to the procedure found in UA-D-31.x.
- 7.3 Creation of a New Code
 - A. New codes can be added by the Data Coordinator or his or her designee.
 - B. See UA-D-31.x for the procedure to create a new code.

8.0 Records

Inclusions:

Table 1. Questionnaires Needing Codes & Coding Lists

Table 2. Other Reason Table 3. Other Location

Appendix A. Food Diary Follow Up

Table 1. Questionnaires Needing Codes & Coding Lists

SOP# UA-D-10.0 Revision #0 June 1997 Page: 5 of 11

Table 2. Other Reason

19

CODE DESC 01 **DUE TO PREGNANCY** CARING FOR SOMEONE ELSE 02 03 DID NOT EAT MUCH ON PREVIOUS DAYS RELATIVE NOT FEELING WELL DID NOT HAVE TIME TO PREPARE NORMAL MEAL 05 INVOLVED IN A SPORTING EVENT 06 07 **CRAVING ENTERTAINING GUESTS** 08 **RELIGIOUS REASONS** 09 SEASONAL AVAILABILITY 10 FOOD CHOICES IN THE CAFETERIA 11 12 **USUALLY EAT MORE MEATS** TRIED SOMETHING NEW 13 DOCTOR'S APPOINTMENT 14 DID NOT GO TO SCHOOL OR WORK 15 **BLOATING** 16 ATE MORE BECAUSE IT WAS A FAVORITE 17 18 DO NOT COOK REGULARLY EATS BETTER ON SOMEDAYS AND NOT ON OTHER

SOP# UA-D-10.0 Revision #0 June 1997 Page: 6 of 11

Table 3. Other Location

OTHER ROOM 4

44

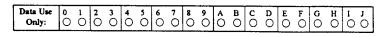
CODE	DESC	CODE	DESC
00	YARD, NOI	45	OTHER ROOM 5
01	BEDROOM 1	46	FIREPLACE
02	BEDROOM 2	47	CARPORT
03	BEDROOM 3	48	BABYSITTER'S
04	BEDROOM 4	49	WHILE IN TRANSIT, IN CAR
05	BEDROOM 5	50	GOLF COURSE
06	BEDROOM 6	51	BEDROOM 1 AND 2
07	BEDROOM 7	52	STORAGE IN BEDROOM
08	BEDROOM 8	53	KITCHEN SINK
10	OUTSIDE, NOI	54	DOOR
11	ATTIC, ROOF, OR CEILING	55	AUNT'S HOUSE
12	BASEMENT	56	RESTAURANT
13	DARKROOM, WORKSHOP, WEIGHTROOM	57	FRONT ROOM
14	DEN, STUDY, OFFICE, BAR, MUSIC/SEW ROOM	58	STUDIO
15	DINING ROOM	59	GREENHOUSE
16	ENCLOSED PORCH, ARIZONA, ATRIUM, FOYER	60	PORCH
17	GARAGE	61	COMPANY'S OFFICE
18	HALLWAY	62	OUTDOOR FAIR/EVENT
19	KITCHEN	63	SUPER MARKET
20	LAUNDRY, BOILER, UTILITY	64	MASTER BEDROOM
21	MAIN, FAMILY	65	STORAGE ROOM
22	MASTER BATH, VANITY	66	FRIEND'S
23	OPEN PORCH, BACK PORCH	67	CHURCH
24	PANTRY, STOREROOM, CLOSET	68	BOYS AND GIRLS CLUB
25	SECOND BATH, GUEST BATH	69	KINDERGARDEN
26	LIVING ROOM	70	TOWNHOUSES
27	TV ROOM, PLAYROOM	71	CONDOMINIUM
28	THIRD BATH	72	SON'S HOME
29	OTHER/FRIEND'S HOUSE	73	BY TRUCK SIDE
30	MOTHER'S HOUSE	74	LITTLE BIT HIGHER TAHN MAIN L. QUATERS
31	FRONT YARD	75	PREMIXED
33	OTHER ROOM	76	SHED, DETACHED STORAGE
34	BACKYARD	77	SECOND OFFICE
35	PERSON DOESN'T KNOW, DK	78	PARK
36	WINDOW SILL	79	LOWER THAN MAIN LIVING QUARTERS
38	STREET	80	UPPER LEVEL
39	DRIVEWAY	81	SIDE/BACK OF HOUSE
40	BREAKFAST NOOK	82	EXTRACURRICULAR ACTIVITIES (PRACTICE)
41	LOFT	83	HEAD START/SCHOOL
42	OTHER ROOM 2	99	MISSING INFO/LOCATION
43	OTHER ROOM 3		

Appendix A. Food Diary Follow Up

HHID	HHID	F.S.	IRN#
			1272

ADULT FOOD DIARY FOLLOW UP

National Human Exposure Assessment Survey
FIRST Name (ONLY): Date of Completion: FNAME Date of Completion: FNAME FNAME Date of Completion:
INSTRUCTIONS
• Please use the black, felt tip pen provided in the notebook when you complete this questionnaire.
 Please follow the special guidelines typed in bold italics. They tell you to either Continue to the question below, or to GO TO a given question.
• Please answer questions printed on a white background only. Shaded areas are for office use only.
 Multiple Choice Questions: Please fill in the appropriate bubble(s) () that appear to the left of each response.
For example: How old is the puppy? Fill in ONE bubble. ○ 1 week • 2 weeks ○ 3 weeks
Please shade bubbles like this: ● and not like this: ※ ※
 Open Ended Questions: Please write your answer on the line(s) or in the box(es) provided. Please write your numbers in the boxes using a block style without touching the sides of the boxes.
For example: 0 1 2 3 4 5 6 7 8 9
For example: How old is the puppy? week(s)
 If You Make a Mistake: For multiple choice, cross out the incorrect answer(s). For open-ended questions, cross out the incorrect value(s) and write the correct value(s) above or beside the boxes.
For example: How old is the puppy? Fill in ONE bubble. 1 week 2 weeks 3 weeks
For example: How old is the puppy? week(s)
If you wish to not answer a question, then please draw a line through it, but not through the answer space.
For example: How old is the puppy? week(s)
All data gathered in this questionnaire is kept strictly confidential. Thank you for your time and support!
Public reporting burden for this collection of information is estimated to average 5 minutes per response, and to require 0 hours of recordiceping. This includes the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing the burden, to Chief, Information Policy Branch, 2136, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20469, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington D.C. 20503. OMB





the participant is LESS THAN 10 YEARS OLD, what is the first name of the individual who providing the answers for the designated respondent? GR YEN Y		PAGE 2 Adult Food Follow Up
FIRST Name (ONLY): GENANT GE	DESIGNATED PARTICIPANT	OFFICE USE ONL
FIRST Name (ONLY): GENANE RN#: GIRN GI	f the participant is LESS THAN 10 YEARS OLD, what is the first name of the individual who s providing the answers for the designated respondent?	
That is the relationship of this individual to the person for whom the responses are provided? I	FIRST Name (ONLY): GENAME	☐ Y's.N
That is the relationship of this individual to the person for whom the responses are provided? Il in ONE bubble.	그는 그들은 그는 그들은 그는 그는 그를 가는 것이 없었다. 그는 그들은 그는 그들은 그는 그들은 그는 그를 모르는 것이다.	□-5.R □-8.N
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2MSTAT 25700	EXAS Form ID	DAY YR

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		PAGE 3
COMPLET	TE THIS ON THE SAME DAY THE POOR THE	Adult Food Follow Up
	TE THIS ON THE SAME DAY THE FOOD SAMPLES ARE COLLECTED	OFFICE USE ONL
l. Was br	eakfast eaten? Fill in ONE bubble.	
0	1. Yes Continue below	RN
0	2. No	O 55 O 88 O
	twent -	33 V. V.
2. where	Was your breakfast prepared and eaten? Pand at at a second and eaten?	OLoc.
11017	RED and EATEN for the location(s) that apply.	
	PREPARED EATEN	B-ouria
a.	Home	RN
	**************************************	O:55 O 88 O
		0.55 0.88 0
d.	Work site	055 088 0
		0 55 0 88 0
	Other: OPB-school E	055 088 0
	_	
choices	en do you eat a breakfast like the one you described in the diary? Read and fill in ONE bubble.	
0	1. 6 to 7 times per week	R N)
0	 2. 1 to 5 times per week 3. Less than once a week 	055 088 09
O	5. Less than once a week	
. Was lund	ch eaten? Fill in ONE bubble.	
	1. Yes	R N M
Ō	2. No	055 088 09
	Lunch	
. Where w	as your lunch prepared and eaten? Read choices and fill in bubble for	Oloc
PREPAI	RED and EATEN for the location(s) that apply.	
	DD ED 4 D ED	L-and
a.	Home PL-home E	R N M
		055 088 09
	Work site	055 088 09
d.	Work site OP - restau E School or day care center	055 088 09
	O F	055 088 09
e.	Other: O PL_0+Nev O E	055 088 09
How ofte	on do you eat a lunch like the one you described in the diary? Read choices	
una jiil l	n ONE bubble.	
0	1. 6 to 7 times per week	R N M
0	2. 1 to 5 times per week LN-Orten	0 55 0 88 0 99
0	3. Less than once a week	

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		PAGE 4
		Adult Food Follow Up
7.	Was dinner eaten? Fill in ONE bubble.	OFFICE USE ONLY
	O 1. Yes	R N M
	O 2. No	0 55 0 88 0 99
8.	Where was your dinner prepared and eaten? Read choices and shade bubble for PREPARED and EATEN for the location(s) that apply.	Olos.
	<u>PREPARED</u> <u>EATEN</u>	RD-SHUCK
	a. Home 0 PD_None E	055 088 099
	b. Restaurant or cafeteria O PD-vesta E	055 088 099
	c. Work site O PD-WOVID E	055 088 099
	d. School or day care center OPD-School E	055 088 099
	e. Other: P_{D-O+he}	055 088 099
9.	How often do you eat a dinner like the one you described in the diary? Read choices and fill in ONE bubble.	
	O 1. 6 to 7 times per week	R N M
	O 2. 1 to 5 times per week	055 088 099
	O 3. Less than once a week	
10	Please think back. Were there any foods or beverages that you could not or did not collect for us? Please list identity, source, and amount of each missing food.	
	a. At breakfast:	R N M
	0 1. Yes	055 088 099
	O 2. No	D-FOOD
		R 2001 5
		B-f-20193
	b. At lunch:	R N M
	○ 1. Yes	055 088 099
		L Food T
		L Food 2
		C-1-040 3
	c. At Dinner:	R N M
	0 1. YesPlease LIST below	055 088 099
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	HALL PS: IRN:	PAGE 5
		Adult Food Follow Up
10.	(Continued) Please think back. Were there any foods or beverages that you could not or did not collect for us?	OFFICE USE ONLY
	d. For snacks include beverages such as coffee or tea	0 55 0 88 0 99
	 ○ 1. Yes	
	\circ 2. No	D-taga
		5-FOOTET
		S. Food 2
		5
11.	Did you, for any reason, eat more or less food than usual? Read choices and fill in ONE bubble.	
	CIVE bubble.	R N M
	0 1. More food than usual Continue below	055 088 099
	2. Less food than usual Continue below	
	O 3. Same as usual GO TO Question #13 (this page below)	
12	Because of Read choices and fill in bubbles of ALL THAT APPLY.	
	1. Travel or vacation	R N M
	2. Weight control diet	055 088 099
1	3. Illness or medical condition	
	O 4. Work or school schedule	
	○ 5. Entertainment or social occasion MI	
	O 6. Because of the food collection study	
	O 7. Ease/quickness of preparation	O Ress.
	O 8. Other (Specify:)	
12	Did you for any record and 1966 of the death of the last of the la	M-othed
13.	Did you, for any reason, eat different foods than your usual diet? Fill in ONE bubble.	
	O 1 Ver	R N M
	○ 1. Yes	0 55 0 88 0 99
14.	Because of Read choices and fill in bubbles of ALL THAT APPLY.	
	O 1. Travel or vacation	R N M
		055 088 099
	 2. Weight control diet 3. Illness or medical condition 	
	4. Work or school schedule	
	O 5. Entertainment or social occasion	
	O 6. Because of the food collection study	
	O 7. Ease/quickness of preparation	O Rees.
	O 8. Other (Specify:)	
		Dr. arred
	Thank you for your participation!	25700