# [SrvScr\_INTROSCREEN\_v1r0] **Cancer Screening History Survey**

In this set of questions, we ask about tests that may be used to screen for cancer. Screening tests are routine tests that look for cancer before a person has symptoms. It may be helpful to review your medical records before you start this survey. If you are not sure of an answer, please make your best guess.

1. [SrvScr\_SEX2\_v3r1] We want to ask questions that make sense for you. Please select all of the body parts you currently have.

If you are male, you probably have:

0 Penis (Phallus)

1 Testes (Testicles)

2 Prostate

If you are female, you probably have:

3 Vagina

4 Cervix

5 Uterus (Womb)

6 Ovaries

7 Fallopian Tubes

1. [SrvScr\_BRSTTISS\_v1r0] Have you **ever** had breasts or breast tissue growth? Please do not include breast implants.

0 No

1 Yes, because of puberty or hormones already in my body

2 Yes, because of hormonal medication or device

77 Don’t know

1. [SrvScr\_MHGROUP9\_v1r1] Have you **ever** had any of these surgeries? Select allthat apply.

0 Tonsils removed (tonsillectomy)

1 Gallbladder removed (cholecystectomy)

2 Appendix removed (appendectomy)

14 Spleen removed (splenectomy)

15 Thyroid removed (thyroidectomy)

16 Removal of one or both kidneys (nephrectomy)

3 Liposuction

4 Bariatric surgery (lap band, gastric bypass)

5 Breast surgery

6 Uterus removed (hysterectomy) **[DISPLAY IF SrvScr\_SEX2\_v3r1= 5]**

7 Tubes tied (tubal ligation) **[DISPLAY IF SrvScr\_SEX2\_v3r1= 7]**

8 Removal of one or both ovaries (oophorectomy) **[DISPLAY IF SrvScr\_SEX2\_v3r1= 6]**

9 Removal of one or both fallopian tubes (salpingectomy) **[DISPLAY IF SrvScr\_SEX2\_v3r1= 7]**

10 Vasectomy **[DISPLAY IF SrvScr\_SEX2\_v3r1= 0 AND 1]**

11 Removal of one or both testicles (orchiectomy or orchidectomy) **[DISPLAY IF SrvScr\_SEX2\_v3r1= 1]**

12 Prostate removed (prostatectomy) **[DISPLAY IF SrvScr\_SEX2\_v3r1= 2]**

13 Penis removed (penectomy) **[DISPLAY IF SrvScr\_SEX2\_v3r1= 0]**

88 I have **not** had any of these surgeries à **GO TO SrvScr\_ORSCREENINT\_v1r0**

*NO RESPONSE* ***à GO TO SrvScr\_ORSCREENINT\_v1r0***

***RANGE CHECK FOR ALL SrvScr\_MHGROUP9\_v1r1 FOLLOWUP AGE: min = 0, max = age***

***RANGE CHECK FOR ALL SrvScr\_MHGROUP 9\_v1r1 FOLLOWUP YEAR: min = yob, max = Current Year***

**[DISPLAY IF SrvScr\_MHGROUP9\_v1r1= 0]**

1. [SrvScr\_TONSILS\_v1r0] How old were you when you had your **tonsils removed (tonsillectomy)**?

|\_\_|\_\_| Age at surgery

Or, if it is easier to remember the year, enter that here:

|\_\_|\_\_|\_\_|\_\_| Year of surgery

**[DISPLAY IF SrvScr\_MHGROUP9\_v1r1= 1]**

1. [SrvScr\_GALLREM\_v1r0] How old were you when you had your **gallbladder removed (cholecystectomy)**?

|\_\_|\_\_| Age at surgery

Or, if it is easier to remember the year, enter that here:

|\_\_|\_\_|\_\_|\_\_| Year of surgery

**[DISPLAY IF SrvScr\_MHGROUP9\_v1r1= 2]**

1. [SrvScr\_APPEND\_v1r0] How old were you when you had your **appendix removed (appendectomy)**?

|\_\_|\_\_| Age at surgery

Or, if it is easier to remember the year, enter that here:

|\_\_|\_\_|\_\_|\_\_| Year of surgery

**[DISPLAY IF SrvScr\_MHGROUP9\_v1r1= 14]**

1. [SrvScr\_SPLEENREM\_v1r0] How old were you when you had your **spleen removed (splenectomy)**?

|\_\_|\_\_| Age at surgery

Or, if it is easier to remember the year, enter that here:

|\_\_|\_\_|\_\_|\_\_| Year of surgery

**[DISPLAY IF SrvScr\_MHGROUP9\_v1r1= 15]**

1. [SrvScr\_THYRDREM\_v1r0] How old were you when you had your **thyroid removed (thyroidectomy)**?

|\_\_|\_\_| Age at surgery

Or, if it is easier to remember the year, enter that here:

|\_\_|\_\_|\_\_|\_\_| Year of surgery

**[DISPLAY IF SrvScr\_MHGROUP9\_v1r1= 16]**

1. [SrvScr\_KidneySurgType\_v1r0] Which of these best describes the type of **kidney removal surgery** that you had?

0 I had surgery to remove one kidney

1 I had surgery to remove both kidneys

88 None of the above à **GO TO SrvScr\_LIPOSUCT\_v1r0**

*NO RESPONSE* ***à GO TO SrvScr\_LIPOSUCT\_v1r0***

**[DISPLAY IF SrvScr\_KidneySurgType\_v1r0 = 0 OR 1]**

1. [SrvScr\_KIDREM2\_v1r0] How old were you when you had one or both kidneys removed (nephrectomy)? If you have had more than one procedure, at what age did you **last** have this procedure?

|\_\_|\_\_| Age at surgery

Or, if it is easier to remember the year, enter that here:

|\_\_|\_\_|\_\_|\_\_| Year of surgery

**[DISPLAY IF SrvScr\_MHGROUP9\_v1r1= 3]**

1. [SrvScr\_LIPOSUCT\_v1r0] How old were you when you **first** had **liposuction?**

|\_\_|\_\_| Age at surgery

Or, if it is easier to remember the year, enter that here:

|\_\_|\_\_|\_\_|\_\_| Year of surgery

**[DISPLAY IF SrvScr\_MHGROUP9\_v1r1= 4]**

1. [SrvScr\_BARSUR\_v1r0] How old were you when you had your **bariatric surgery (lap band, gastric bypass)?**

|\_\_|\_\_| Age at surgery

Or, if it is easier to remember the year, enter that here:

|\_\_|\_\_|\_\_|\_\_| Year of surgery

**[DISPLAY IF SrvScr\_MHGROUP9\_v1r1= 5]**

1. [SrvScr\_BREASTSUR\_v1r0] Which of these **breast surgeries** have you had? Please do not include a biopsy. Select all that apply.

0 Breast implants (augmentation surgery)

1 Breast lift surgery (mastopexy)

2 Breast reconstruction surgery

3 Breast reduction (reduction mammaplasty)

4 Removal of a part of my breast tissue (breast-conserving surgery (BCS), lumpectomy, partial mastectomy, or segmental mastectomy)

5 Removal of one breast (mastectomy)

6 Removal of both breasts (double or bilateral mastectomy)

7 Surgery for a breast abscess (such as incision and draining)

8 Removal of a lactiferous or milk duct (microdochectomy)

55 Other: Please describe [text box]

88 None of the above ***à* GO TO SrvScr\_HYSTER\_v1r0**

*NO RESPONSE* ***à GO TO SrvScr\_HYSTER\_v1r0***

***RANGE CHECK FOR ALL SrvScr\_BREASTSUR\_v1r0 FOLLOWUP AGE: min = 0, max = age***

***RANGE CHECK FOR ALL SrvScr\_BREASTSUR\_v1r0 FOLLOWUP YEAR: min = yob, max = Current Year***

**[DISPLAY IF SrvScr\_BREASTSUR\_v1r0= 0]**

1. [SrvScr\_BREASTSUR0\_v1r0] How old were you when you had **breast implants surgery** (augmentation surgery)?

|\_\_|\_\_| Age at surgery

Or, if it is easier to remember the year, enter that here:

|\_\_|\_\_|\_\_|\_\_| Year of surgery

**[DISPLAY IF SrvScr\_BREASTSUR\_v1r0= 1]**

1. [SrvScr\_BREASTSUR1\_v1r0] How old were you when you had **breast lift surgery** (mastopexy)?

|\_\_|\_\_| Age at surgery

Or, if it is easier to remember the year, enter that here:

|\_\_|\_\_|\_\_|\_\_| Year of surgery

**[DISPLAY IF SrvScr\_BREASTSUR\_v1r0= 2]**

1. [SrvScr\_BREASTSUR2\_v2r0] How old were you when you had **breast reconstruction surgery**?

|\_\_|\_\_| Age at surgery

Or, if it is easier to remember the year, enter that here:

|\_\_|\_\_|\_\_|\_\_| Year of surgery

**[DISPLAY IF SrvScr\_BREASTSUR\_v1r0= 3]**

1. [SrvScr\_BREASTSUR3\_v1r0] How old were you when you had **breast reduction surgery** (reduction mammaplasty)?

|\_\_|\_\_| Age at surgery

Or, if it is easier to remember the year, enter that here:

|\_\_|\_\_|\_\_|\_\_| Year of surgery

**[DISPLAY IF SrvScr\_BREASTSUR\_v1r0= 4]**

1. [SrvScr\_BREASTSUR4\_v1r0] How old were you when you had **surgery for** **removal of part of your breast tissue** (breast-conserving surgery (BCS), lumpectomy, partial mastectomy, or segmental mastectomy)?

|\_\_|\_\_| Age at surgery

Or, if it is easier to remember the year, enter that here:

|\_\_|\_\_|\_\_|\_\_| Year of surgery

**[DISPLAY IF SrvScr\_BREASTSUR\_v1r0= 5]**

1. [SrvScr\_BREASTSUR5\_v1r0] How old were you when you had **surgery for removal of one breast** (mastectomy)?

|\_\_|\_\_| Age at surgery

Or, if it is easier to remember the year, enter that here:

|\_\_|\_\_|\_\_|\_\_| Year of surgery

**[DISPLAY IF SrvScr\_BREASTSUR\_v1r0= 6]**

1. [SrvScr\_BREASTSUR6A\_v1r0] Which of these best describes the type of breast removal surgery that you had?

0 I had both breasts removed during one surgery

1 I had both of my breasts removed, each during a separate surgery **à GO TO SrvScr\_BREASTSUR6B\_v1r0**

88 None of the above **à GO TO** **SrvScr\_BREASTSUR7\_v1r0**

*NO RESPONSE* ***à GO TO SrvScr\_BREASTSUR7\_v1r0***

**[DISPLAY IF SrvScr\_BREASTSUR6A\_v1r0= 0]**

1. [SrvScr\_BREASTSUR6\_v1r0] How old were you when you had **surgery for removal of both breasts** (double or bilateral mastectomy)?

|\_\_|\_\_| Age at surgery

Or, if it is easier to remember the year, enter that here:

|\_\_|\_\_|\_\_|\_\_| Year of surgery

**[DISPLAY IF SrvScr\_BREASTSUR6A\_v1r0= 1]**

1. [SrvScr\_BREASTSUR6B\_v1r0] How old were you when you had the **first** **surgery for removal of one breast**?

|\_\_|\_\_| Age at surgery

Or, if it is easier to remember the year, enter that here:

|\_\_|\_\_|\_\_|\_\_| Year of surgery

**[DISPLAY IF SrvScr\_BREASTSUR6A\_v1r0= 1]**

1. [SrvScr\_BREASTSUR6C\_v1r0] How old were you when you had the **second** **surgery for removal of one breast**?

|\_\_|\_\_| Age at surgery

Or, if it is easier to remember the year, enter that here:

|\_\_|\_\_|\_\_|\_\_| Year of surgery

**[DISPLAY IF SrvScr\_BREASTSUR\_v1r0= 7]**

1. [SrvScr\_BREASTSUR7\_v1r0] How old were you when you had **surgery for** **a breast abscess** **(such as incision and draining)**?

|\_\_|\_\_| Age at surgery

Or, if it is easier to remember the year, enter that here:

|\_\_|\_\_|\_\_|\_\_| Year of surgery

**[DISPLAY IF SrvScr\_BREASTSUR\_v1r0= 8]**

1. [SrvScr\_BREASTSUR8\_v1r0] How old were you when you had **surgery for removal of a lactiferous or milk duct** (microdochectomy)?

|\_\_|\_\_| Age at surgery

Or, if it is easier to remember the year, enter that here:

|\_\_|\_\_|\_\_|\_\_| Year of surgery

**[DISPLAY IF SrvScr\_BREASTSUR\_v1r0= 55]**

**[FILL RESPONSE FROM SrvScr\_BREASTSUR\_v1r0. IF NO TEXT PROVIDED, FILL “another type of breast surgery”]**

1. [SrvScr\_BREASTSUR9\_v1r0] How old were you when you had [**SrvScr\_BREASTSUR\_v1r0 response/ another type of breast surgery**]?

|\_\_|\_\_| Age at surgery

Or, if it is easier to remember the year, enter that here:

|\_\_|\_\_|\_\_|\_\_| Year of surgery

**[DISPLAY IF SrvScr\_MHGROUP9\_v1r1= 6]**

1. [SrvScr\_HYSTER\_v1r0] How old were you when you had your **uterus removed (hysterectomy)**?

|\_\_|\_\_| Age at surgery

Or, if it is easier to remember the year, enter that here:

|\_\_|\_\_|\_\_|\_\_| Year of surgery

**[DISPLAY IF SrvScr\_MHGROUP9\_v1r1= 7]**

1. [SrvScr\_TUBLIG\_v1r0] How old were you when you had your **tubes tied** **(tubal ligation)**?

|\_\_|\_\_| Age at surgery

Or, if it is easier to remember the year, enter that here:

|\_\_|\_\_|\_\_|\_\_| Year of surgery

**[DISPLAY IF SrvScr\_MHGROUP9\_v1r1= 8]**

1. [SrvScr\_OvarySurg\_v1r0] Which of these best describes the type of **ovary removal surgery** that you had?

0 I had surgery to remove one ovary

1 I had surgery to remove both ovaries

88 None of the above à **GO TO SrvScr\_FTREM\_v1r0**

*NO RESPONSE* ***à GO TO SrvScr\_FTREM\_v1r0***

**[DISPLAY IF SrvScr\_OvarySurg\_v1r0 = 0 OR 1]**

1. [SrvScr\_OVARYREM2\_v1r0] How old were you when you had one or both ovaries removed (oophorectomy)? If you have had more than one procedure, at what age did you **last** have this procedure?

|\_\_|\_\_| Age at surgery

Or, if it is easier to remember the year, enter that here:

|\_\_|\_\_|\_\_|\_\_| Year of surgery

**[DISPLAY IF SrvScr\_MHGROUP9\_v1r1= 9]**

1. [SrvScr\_FallTubeSurg\_v1r0] Which of these best describes the type of **fallopian tube removal surgery** that you had?

0 I had surgery to remove one fallopian tube

1 I had surgery to remove both fallopian tubes

88 None of the above à **GO TO SrvScr\_VASEC\_v1r0**

*NO RESPONSE* ***à GO TO SrvScr\_VASEC\_v1r0***

**[DISPLAY IF SrvScr\_FallTubeSurg\_v1r0 = 0 OR 1]**

1. [SrvScr\_FTREM2\_v1r0] How old were you when you had one or both fallopian tubes removed (salpingectomy)? If you have had more than one procedure, at what age did you **last** have this procedure?

|\_\_|\_\_| Age at surgery

Or, if it is easier to remember the year, enter that here:

|\_\_|\_\_|\_\_|\_\_| Year of surgery

**[DISPLAY IF SrvScr\_MHGROUP9\_v1r1= 10]**

1. [SrvScr\_VASEC\_v1r0] How old were you when you had a **vasectomy**?

|\_\_|\_\_| Age at surgery

Or, if it is easier to remember the year, enter that here:

|\_\_|\_\_|\_\_|\_\_| Year of surgery

**[DISPLAY IF SrvScr\_MHGROUP9\_v1r1= 11]**

1. [ SrvScr\_TestRemSurg\_v1r0] Which of these best describes the type of **testicle removal surgery** that you had?

0 I had surgery to remove one testicle

1 I had surgery to remove both testicles

88 None of the above à **GO TO SrvScr\_PROSREM\_v1r0**

*NO RESPONSE* ***à GO TO SrvScr\_PROSREM\_v1r0***

**[DISPLAY IF SrvScr\_TestRemSurg\_v1r0 = 0 OR 1]**

1. [SrvScr\_TESTREM2\_v1r0] How old were you when you hadone or both testicles removed (orchiectomy or orchidectomy)? If you have had more than one procedure, at what age did you **last** have this procedure?

|\_\_|\_\_| Age at surgery

Or, if it is easier to remember the year, enter that here:

|\_\_|\_\_|\_\_|\_\_| Year of surgery

**[DISPLAY IF SrvScr\_MHGROUP9\_v1r1= 12]**

1. [SrvScr\_ProsRemSurg\_v1r0] Which of these best describes the type of **prostate removal surgery** that you had?

0 I had surgery to remove part of my prostate

1 I had surgery to remove my whole prostate

88 None of the above à **GO TO SrvScr\_PENREM\_v1r0**

*NO RESPONSE* ***à GO TO SrvScr\_PENREM\_v1r0***

**[DISPLAY IF SrvScr\_ProsRemSurg\_v1r0 = 0 OR 1]**

1. [SrvScr\_PROSREM2\_v1r0] How old were you when you had part or all of your prostate removed (prostatectomy)? If you have had more than one procedure, at what age did you **last** have this procedure?

|\_\_|\_\_| Age at surgery

Or, if it is easier to remember the year, enter that here:

|\_\_|\_\_|\_\_|\_\_| Year of surgery

**[DISPLAY IF SrvScr\_MHGROUP9\_v1r1= 13]**

1. [SrvScr\_PENREM\_v1r0] How old were you when you had your **penis removed (penectomy)**?

|\_\_|\_\_| Age at surgery

Or, if it is easier to remember the year, enter that here:

|\_\_|\_\_|\_\_|\_\_| Year of diagnosis

## [SrvScr\_ORSCREENINT\_v1r0] **Oral Cancer Screening**

Oral cancer screening is an examination performed by a dentist or healthcare professional to look for cancer in your mouth. This is different from a regular check-up at your dentist.

During an oral cancer screening, your provider may do one or both of the following exams: a visual exam in which the provider looks inside your mouth for patches or mouth sores, and a physical exam in which the provider feels for lumps or bumps in your mouth. Your provider may also ask you to rinse your mouth with a special blue dye that highlights abnormal tissue, or use a special light to make abnormal tissue appear white.

1. [SrvScr\_ORSCREEN\_v1r0] Have you **ever** had an oral cancer screening by a dentist or healthcare professional to check for signs of cancer in your mouth?

0 No **--> GO TO SrvScr\_COLSCREEN\_v1r0**

1 Yes

77 Don’t know **--> GO TO SrvScr\_COLSCREEN\_v1r0**

*NO RESPONSE* ***--> GO TO SrvScr\_COLSCREEN\_v1r0***

**[DISPLAY IF SrvScr\_ORSCREEN\_v1r0 = 1**

**ELSE, GO TO SrvScr\_COLSCREEN\_v1r0]**

1. [SrvScr\_ORSCREEN1\_v1r0] When were you **first** screened for oral cancer?

0 Less than 1 year ago

1 More than 1 year ago, but less than 2 years ago

2 More than 2 years ago, but less than 5 years ago

3 More than 5 years ago, but less than 10 years ago

4 Over 10 years ago

77 Don’t know

1. [SrvScr\_ORSCREEN2\_v1r0] How many times have you been screened for oral cancer?

0 Once **--> GO TO SrvScr\_ORSCREEN4\_v1r0**

1 Twice

2 3 to 5 times

3 6 to 10 times

4 Over 10 times

77 Don’t know

*NO RESPONSE* ***--> GO TO SrvScr\_ORSCREEN4\_v1r0***

**[DISPLAY IF SrvScr\_ORSCREEN2\_v1r0= 1, 2, 3, 4, OR 77]**

1. [SrvScr\_ORSCREEN3\_v1r0] When were you **last** screened for oral cancer?

0 Less than 1 year ago

1 More than 1 year ago, but less than 2 years ago

2 More than 2 years ago, but less than 5 years ago

3 More than 5 years ago, but less than 10 years ago

4 Over 10 years ago

77 Don’t know

1. [SrvScr\_ORSCREEN4\_v1r0] Did you **ever** have an oral biopsy? (In a biopsy, a small amount of oral tissue or cells are removed and then looked at under a microscope to check for cancer or other problems.)

0 No **--> GO TO SrvScr\_COLSCREEN\_v1r0**

1 Yes

77 Don’t know **--> GO TO SrvScr\_COLSCREEN\_v1r0**

*NO RESPONSE* ***--> GO TO SrvScr\_COLSCREEN\_v1r0***

**[DISPLAY IF SrvScr\_ORSCREEN4\_v1r0 = 1**

**ELSE, GO TO SrvScr\_COLSCREEN\_v1r0]**

1. [SrvScr\_ORSCREEN5\_v1r0] When did you **first** have an oral biopsy?

0 Less than 1 year ago

1 More than 1 year ago, but less than 2 years ago

2 More than 2 years ago, but less than 5 years ago

3 More than 5 years ago, but less than 10 years ago

4 Over 10 years ago

77 Don’t know

1. [SrvScr\_ORSCREEN6\_v1r0] How many times have you had an oral biopsy?

0 Once **--> GO TO SrvScr\_COLSCREEN\_v1r0**

1 Twice

2 3 to 5 times

3 6 to 10 times

4 Over 10 times

77 Don’t know

*NO RESPONSE* ***--> GO TO SrvScr\_COLSCREEN\_v1r0***

**[DISPLAY IF SrvScr\_ORSCREEN6\_v1r0 = 1, 2, 3, 4, OR 77]**

1. [SrvScr\_ORSCREEN7\_v1r0] When did you **last** have an oral biopsy?

0 Less than 1 year ago

1 More than 1 year ago, but less than 2 years ago

2 More than 2 years ago, but less than 5 years ago

3 More than 5 years ago, but less than 10 years ago

4 Over 10 years ago

77 Don’t know

## [SrvScr\_COLSCREEN\_v1r0] **Colon and Rectal Cancer Screening**

1. Have you **ever** had any of these tests or procedures for colorectal cancer or other medical conditions? Select all that apply.

*[NOTE TO PROGRAMMERS: IF 88 IS SELECTED, DE-SELECT ALL OTHER RESPONSES]*

0 **Colonoscopy**

Before the procedure, it is likely that a medicine was given through a needle in your arm to make you sleepy. A healthcare provider used a long tube-like instrument to examine your colon and check for cancer or other problems. Someone else needed to drive you home.

1 **CT Colonoscopy**

Also known as a “virtual” colonoscopy or CT colonography, a special CAT scan of the lower part of your colon that made detailed pictures of your colon to see if there were colon polyps or cancer. Your body passed through a large tunnel-shaped X-ray machine.

2 **Sigmoidoscopy**

Also known as flexible sigmoidoscopy. You were awake and not given medicine to make you sleepy. A healthcare provider used a short tube-like instrument to examine the lower part of your colon and check for cancer or other problems. You were probably able to drive yourself home.

3 **Proctoscopy**

Also known as a rigid sigmoidoscopy. You were awake and not given medicine to make you sleepy. A healthcare provider used a thin, tube-like instrument with a light and a lens to examine the inside of your rectum and check for cancer or other problems. You were probably able to drive yourself home. This test is rarely used now and was more commonly used in the past.

4 **Stool (fecal) test**

A test for blood or abnormal DNA in your stool. This test is sometimes called a fecal occult blood test (a FOBT), or a fecal immunochemical test (FIT), a Stool DNA Test (Cologuard®). These tests should be done at home and the sample is mailed in.

88 I have **not** had any of these screening tests **--> GO TO SrvScr\_ANALSCREEN\_v1r0**

*NO RESPONSE* ***--> GO TO SrvScr\_ANALSCREEN\_v1r0***

**[DISPLAY IF SrvScr\_COLSCREEN\_v1r0 = 0**

**ELSE, GO TO SrvScr\_CTCOL1\_v1r0]**

1. [SrvScr\_COL1\_v1r0] When did you **first** have a colonoscopy?

0 Less than 1 year ago

1 More than 1 year ago, but less than 2 years ago

2 More than 2 years ago, but less than 5 years ago

3 More than 5 years ago, but less than 10 years ago

4 Over 10 years ago

77 Don’t know

1. [SrvScr\_COL2\_v1r0] How many times have you had a colonoscopy?

0 Once **--> GO TO SrvScr\_CTCOL1\_v1r0**

1 Twice

2 3 or more times

77 Don’t know

*NO RESPONSE* ***-->* GO TO SrvScr\_CTCOL1\_v1r0**

**[DISPLAY IF SrvScr\_COL2\_v1r0 = 1, 2, OR 77]**

1. [SrvScr\_COL3\_v1r0] When did you **last** have a colonoscopy?

0 Less than 1 year ago

1 More than 1 year ago, but less than 2 years ago

2 More than 2 years ago, but less than 5 years ago

3 More than 5 years ago, but less than 10 years ago

4 Over 10 years ago

77 Don’t know

**[DISPLAY IF SrvScr\_COLSCREEN\_v1r0 = 1**

**ELSE, GO TO SrvScr\_SIG1\_v1r0]**

1. [SrvScr\_CTCOL1\_v1r0] When did you **first** have a CT colonoscopy?

0 Less than 1 year ago

1 More than 1 year ago, but less than 2 years ago

2 More than 2 years ago, but less than 5 years ago

3 More than 5 years ago, but less than 10 years ago

4 Over 10 years ago

77 Don’t know

1. [SrvScr\_CTCOL2\_v1r0] How many times have you had a CT colonoscopy?

0 Once **--> GO TO SrvScr\_SIG1\_v1r0**

1 Twice

2 3 or more times

77 Don’t know

*NO RESPONSE* ***-->* GO TO SrvScr\_SIG1\_v1r0**

**[DISPLAY IF** SrvScr\_CTCOL2\_v1r0 = 1, 2, OR 77**]**

1. [SrvScr\_CTCOL3\_v1r0] When did you **last** have a CT colonoscopy?

0 Less than 1 year ago

1 More than 1 year ago, but less than 2 years ago

2 More than 2 years ago, but less than 5 years ago

3 More than 5 years ago, but less than 10 years ago

4 Over 10 years ago

77 Don’t know

**[DISPLAY IF SrvScr\_COLSCREEN\_v1r0 = 2**

**ELSE, GO TO SrvScr\_PROCT1\_v1r0]**

1. [SrvScr\_SIG1\_v1r0] When did you **first** have a sigmoidoscopy?

0 Less than 1 year ago

1 More than 1 year ago, but less than 2 years ago

2 More than 2 years ago, but less than 5 years ago

3 More than 5 years ago, but less than 10 years ago

4 Over 10 years ago

77 Don’t know

1. [SrvScr\_SIG2\_v1r0] How many times have you had a sigmoidoscopy?

0 Once **--> GO TO SrvScr\_PROCT1\_v1r0**

1 Twice

2 3 or more times

77 Don’t know

*NO RESPONSE* **--> GO TO SrvScr\_PROCT1\_v1r0**

**[DISPLAY IF SrvScr\_SIG2\_v1r0 = 1, 2, OR 77]**

1. [SrvScr\_SIG3\_v1r0] When did you **last** have a sigmoidoscopy?

0 Less than 1 year ago

1 More than 1 year ago, but less than 2 years ago

2 More than 2 years ago, but less than 5 years ago

3 More than 5 years ago, but less than 10 years ago

4 Over 10 years ago

77 Don’t know

**[DISPLAY IF SrvScr\_COLSCREEN\_v1r0 = 3**

**ELSE, GO TO SrvScr\_STOOL1\_v1r0]**

1. [SrvScr\_PROCT1\_v1r0] When did you **first** have a proctoscopy?

0 Less than 1 year ago

1 More than 1 year ago, but less than 2 years ago

2 More than 2 years ago, but less than 5 years ago

3 More than 5 years ago, but less than 10 years ago

4 Over 10 years ago

77 Don’t know

1. [SrvScr\_PROCT2\_v1r0] How many times have you had a proctoscopy?

0 Once **--> GO TO SrvScr\_STOOL1\_v1r0**

1 Twice

2 3 or more times

77 Don’t know

*NO RESPONSE* ***--> GO TO SrvScr\_STOOL1\_v1r0***

**[DISPLAY IF SrvScr\_PROCT2\_v1r0 = 1, 2, OR 77]**

1. [SrvScr\_PROCT3\_v1r0] When did you **last** have a proctoscopy?

0 Less than 1 year ago

1 More than 1 year ago, but less than 2 years ago

2 More than 2 years ago, but less than 5 years ago

3 More than 5 years ago, but less than 10 years ago

4 Over 10 years ago

77 Don’t know

**[DISPLAY IF SrvScr\_COLSCREEN\_v1r0 = 4**

**ELSE, GO TO SrvScr\_ANALSCREEN\_v1r0]**

1. [SrvScr\_STOOL1\_v1r0] When did you **first** have a stool (fecal) test?

0 Less than 1 year ago

1 More than 1 year ago, but less than 2 years ago

2 More than 2 years ago, but less than 5 years ago

3 More than 5 years ago, but less than 10 years ago

4 Over 10 years ago

77 Don’t know

1. [SrvScr\_STOOL2\_v1r0] How many times have you had a stool (fecal) test?

0 Once **--> GO TO SrvScr\_ANALSCREEN\_v1r0**

1 Twice

2 3 to 5 times

3 6 to 10 times

4 Over 10 times

77 Don’t know

*NO RESPONSE* ***--> GO TO SrvScr\_ANALSCREEN\_v1r0***

**[DISPLAY IF SrvScr\_STOOL2\_v1r0 = 1, 2, 3, 4, OR 77]**

1. [SrvScr\_STOOL3\_v1r0] When did you **last** have a stool (fecal) test?

0 Less than 1 year ago

1 More than 1 year ago, but less than 2 years ago

2 More than 2 years ago, but less than 5 years ago

3 More than 5 years ago, but less than 10 years ago

4 Over 10 years ago

77 Don’t know

## [SrvScr\_ANALSCREEN\_v1r0] **Anal Cancer Screening**

1. Have you **ever** had an anal screening test to look for anal cancer or other medical conditions? During an anal screening test, you were lying on your side or bending over an exam table. A healthcare provider inserted a swab (which looks like a long Q-tip) into your anus to collect a small amount of cells. The cells were checked for the type of HPV that can lead to anal cancer.

0 No **-->** **GO TO SrvScr\_LUNGCT\_v1r0**

1 Yes

77 Don’t know **-->** **GO TO SrvScr\_LUNGCT\_v1r0**

*NO RESPONSE* ***--> GO TO SrvScr\_LUNGCT\_v1r0***

**[DISPLAY IF SrvScr\_ANALSCREEN\_v1r0 = 1**

**ELSE, GO TO SrvScr\_LUNGCT\_v1r0]**

1. [SrvScr\_ANALSCREEN1\_v1r0] When were you **first** screened for anal cancer?

0 Less than 1 year ago

1 More than 1 year ago, but less than 2 years ago

2 More than 2 years ago, but less than 5 years ago

3 More than 5 years ago, but less than 10 years ago

4 Over 10 years ago

77 Don’t know

1. [SrvScr\_ANALSCREEN2\_v1r0] How many times have you been screened for anal cancer?

0 Once **--> GO TO SrvScr\_LUNGCT\_v1r0**

1 Twice

2 3 to 5 times

3 6 to 10 times

4 Over 10 times

77 Don’t know

*NO RESPONSE* ***--> GO TO SrvScr\_LUNGCT\_v1r0***

**[DISPLAY IF SrvScr\_ANALSCREEN2\_v1r0 = 1, 2, 3, 4, OR 77]**

1. [SrvScr\_ANALSCREEN3\_v1r0] When were you **last** screened for anal cancer?

0 Less than 1 year ago

1 More than 1 year ago, but less than 2 years ago

2 More than 2 years ago, but less than 5 years ago

3 More than 5 years ago, but less than 10 years ago

4 Over 10 years ago

77 Don’t know

## [SrvScr\_LUNGCT\_v1r0] **Lung Cancer Screening**

1. Have you **ever** had a low dose CT of the lungs to check for lung cancer or other conditions? This is a CAT scan of the lungs. Your body would have passed through a large, tunnel shaped x-ray machine. This is not the same as a chest X-ray, where you would be standing during the exam.

0 No **--> GO TO SrvScr\_SKIN\_v1r0**

1 Yes

77 Don’t know **--> GO TO SrvScr\_SKIN\_v1r0**

*NO RESPONSE* ***--> GO TO SrvScr\_SKIN\_v1r0***

**[DISPLAY IF SrvScr\_LUNGCT\_v1r0 = 1**

**ELSE, GO TO SrvScr\_SKIN\_v1r0]**

1. [SrvScr\_LUNGCT1\_v1r0] When did you **first** have a low dose CT of the lungs?

0 Less than 1 year ago

1 More than 1 year ago, but less than 2 years ago

2 More than 2 years ago, but less than 5 years ago

3 More than 5 years ago, but less than 10 years ago

4 Over 10 years ago

77 Don’t know

1. [SrvScr\_LUNGCT2\_v1r0] How many times have you had a low dose CT of the lungs?

0 Once **--> GO TO SrvScr\_SKIN\_v1r0**

1 Twice

2 3 or more times

77 Don’t know

*NO RESPONSE* **--> GO TO SrvScr\_SKIN\_v1r0**

**[DISPLAY IF SrvScr\_LUNGCT2\_v1r0 = 1, 2, 77]**

1. [SrvScr\_LUNGCT3\_v1r0] When did you **last** have a low dose CT of the lungs?

0 Less than 1 year ago

1 More than 1 year ago, but less than 2 years ago

2 More than 2 years ago, but less than 5 years ago

3 More than 5 years ago, but less than 10 years ago

4 Over 10 years ago

77 Don’t know

## [SrvScr\_SKIN\_v1r0] **Skin Cancer Screening**

1. Have you **ever** had a visual skin examination to check for skin cancer by a healthcare professional? You may have removed your clothing and worn a gown as a healthcare provider examined your skin to look for abnormal spots that could be cancerous.

0 No **--> GO TO SrvScr\_UPENDO\_v1r0**

1 Yes

77 Don’t know **--> GO TO SrvScr\_UPENDO\_v1r0**

*NO RESPONSE* ***--> GO TO SrvScr\_UPENDO\_v1r0***

**[DISPLAY IF SrvScr\_SKIN\_v1r0 = 1**

**ELSE GO TO SrvScr\_UPENDO\_v1r0]**

1. [SrvScr\_SKIN1\_v1r0] When you had a visual skin examination, how much of your body was screened for skin cancer? Select all that apply.

0 I have had a specific spot on my body screened for skin cancer **--> GO TO SrvScr\_UPENDO\_v1r0**

1 I have had part of my body screened for skin cancer **--> GO TO SrvScr\_UPENDO\_v1r0**

2 I have had a full body skin examination to screen for skin cancer

77 Don’t know **--> GO TO SrvScr\_UPENDO\_v1r0**

*NO RESPONSE* ***--> GO TO SrvScr\_UPENDO\_v1r0***

**[DISPLAY IF SrvScr\_SKIN1\_v1r0 = 2**

**ELSE GO TO SrvScr\_UPENDO\_v1r0]**

1. [SrvScr\_SKIN2\_v1r0] When did you **first** have a full body skin examination?

0 Less than 1 year ago

1 More than 1 year ago, but less than 2 years ago

2 More than 2 years ago, but less than 5 years ago

3 More than 5 years ago, but less than 10 years ago

4 Over 10 years ago

77 Don’t know

1. [SrvScr\_SKIN3\_v1r0] How many times have you had a full body skin examination?

0 Once **--> GO TO SrvScr\_UPENDO\_v1r0**

1 Twice

2 3 to 5 times

3 6 to 10 times

4 Over 10 times

77 Don’t know

*NO RESPONSE* ***--> GO TO SrvScr\_UPENDO\_v1r0***

**[DISPLAY IF SrvScr\_SKIN3\_v1r0 = 1, 2, 3, 4, OR 77]**

1. [SrvScr\_SKIN4\_v1r0] When did you **last** have a full body skin examination?

0 Less than 1 year ago

1 More than 1 year ago, but less than 2 years ago

2 More than 2 years ago, but less than 5 years ago

3 More than 5 years ago, but less than 10 years ago

4 Over 10 years ago

77 Don’t know

## [SrvScr\_UPENDO\_v1r0] **Upper Endoscopy Screening Test**

1. Have you **ever** had an upper endoscopy to check for cancer or other conditions? During an upper endoscopy, a thin, tube-like instrument called an endoscope is passed through your mouth and down your throat to look inside your esophagus, stomach, and duodenum (first part of the small intestine).

0 No **--> GO TO SrvScr\_PROSCREEN\_v1r0**

1 Yes

77 Don’t know **--> GO TO SrvScr\_PROSCREEN\_v1r0**

*NO RESPONSE* ***--> GO TO SrvScr\_PROSCREEN\_v1r0***

**[DISPLAY IF SrvScr\_UPENDO\_v1r0 = 1**

**ELSE, GO TO SrvScr\_PROSCREEN\_v1r0]**

1. [SrvScr\_UPENDO1\_v1r0] When did you **first** have an upper endoscopy?

0 Less than 1 year ago

1 More than 1 year ago, but less than 2 years ago

2 More than 2 years ago, but less than 5 years ago

3 More than 5 years ago, but less than 10 years ago

4 Over 10 years ago

77 Don’t know

1. [SrvScr\_UPENDO2\_v1r0] How many times have you had an upper endoscopy?

0 Once **--> GO TO SrvScr\_PROSCREEN\_v1r0**

1 Twice

2 3 or more times

77 Don’t know

*NO RESPONSE* ***--> GO TO SrvScr\_PROSCREEN\_v1r0***

**[DISPLAY IF SrvScr\_UPENDO2\_v1r0= 1, 2, OR 77]**

1. [SrvScr\_UPENDO3\_v1r0] When did you **last** have an upper endoscopy?

0 Less than 1 year ago

1 More than 1 year ago, but less than 2 years ago

2 More than 2 years ago, but less than 5 years ago

3 More than 5 years ago, but less than 10 years ago

4 Over 10 years ago

77 Don’t know

**[DISPLAY IF SrvScr\_SEX2\_v3r1= 2**

**ELSE, GO TO SrvScr\_BRSTSCREEN\_v1r0]**

## [SrvScr\_PROSCREEN\_v1r0] **Prostate Cancer Screening**

1. Have you **ever** had any of these tests to check for prostate cancer or other conditions? Select all that apply.

*[NOTE TO PROGRAMMERS: IF 88 IS SELECTED, DE-SELECT ALL OTHER RESPONSES]*

0 **Rectal Examination of Prostate**

A healthcare provider inserted a gloved, lubricated finger into your rectum to feel the prostate and check for cancer or other problems.

1 **PSA Blood Test**

A blood test to check for prostate cancer.

2 **Prostate Biopsy**

A small amount of the prostate tissue or cells are removed with a biopsy needle or during surgery. The tissue or cells are then looked at under a microscope to check for cancer or other problems.

88 I have **not** had any of these screening tests **--> GO TO SrvScr\_BRSTSCREEN\_v1r0**

*NO RESPONSE* ***--> GO TO SrvScr\_BRSTSCREEN\_v1r0***

**[DISPLAY IF SrvScr\_PROSCREEN\_v1r0 = 0**

**ELSE, GO TO SrvScr\_PSA1\_v1r0]**

1. [SrvScr\_RECTEX1\_v1r0] When did you **first** have a rectal examination of your prostate?

0 Less than 1 year ago

1 More than 1 year ago, but less than 2 years ago

2 More than 2 years ago, but less than 5 years ago

3 More than 5 years ago, but less than 10 years ago

4 Over 10 years ago

77 Don’t know

1. [SrvScr\_RECTEX2\_v1r0] How many times have you had a rectal examination of your prostate?

0 Once **--> GO TO SrvScr\_PSA1\_v1r0**

1 Twice

2 3 to 5 times

3 6 to 10 times

4 Over 10 times

77 Don’t know

*NO RESPONSE* **--> GO TO SrvScr\_PSA1\_v1r0**

**[DISPLAY IF** **SrvScr\_RECTEX2\_v1r0 = 1, 2, 3, 4, OR 77]**

1. [SrvScr\_RECTEX3\_v1r0] When did you **last** have a rectal examination of your prostate?

0 Less than 1 year ago

1 More than 1 year ago, but less than 2 years ago

2 More than 2 years ago, but less than 5 years ago

3 More than 5 years ago, but less than 10 years ago

4 Over 10 years ago

77 Don’t know

**[DISPLAY** **IF SrvScr\_PROSCREEN\_v1r0 = 1**

**ELSE, GO TO SrvScr\_PROBIOP1\_v1r0]**

1. [SrvScr\_PSA1\_v1r0] When did you **first** have a PSA blood test?

0 Less than 1 year ago

1 More than 1 year ago, but less than 2 years ago

2 More than 2 years ago, but less than 5 years ago

3 More than 5 years ago, but less than 10 years ago

4 Over 10 years ago

77 Don’t know

1. [SrvScr\_PSA2\_v1r0] How many times have you had a PSA blood test?

0 Once **--> GO TO SrvScr\_PROBIOP1\_v1r0**

1 Twice

2 3 to 5 times

3 6 to 10 times

4 Over 10 times

77 Don’t know

*NO RESPONSE* **--> GO TO SrvScr\_PROBIOP1\_v1r0**

**[DISPLAY IF SrvScr\_PSA2\_v1r0 = 1, 2, 3, 4, OR 77]**

1. [SrvScr\_PSA3\_v1r0] When did you **last** have a PSA blood test?

0 Less than 1 year ago

1 More than 1 year ago, but less than 2 years ago

2 More than 2 years ago, but less than 5 years ago

3 More than 5 years ago, but less than 10 years ago

4 Over 10 years ago

77 Don’t know

**[DISPLAY IF SrvScr\_PROSCREEN\_v1r0 = 2**

**ELSE, GO TO SrvScr\_BRSTSCREEN\_v1r0]**

1. [SrvScr\_PROBIOP1\_v1r0] When did you **first** have a prostate biopsy?

0 Less than 1 year ago

1 More than 1 year ago, but less than 2 years ago

2 More than 2 years ago, but less than 5 years ago

3 More than 5 years ago, but less than 10 years ago

4 Over 10 years ago

77 Don’t know

1. [SrvScr\_PROBIOP2\_v1r0] How many times have you had a prostate biopsy?

0 Once **--> GO TO SrvScr\_BRSTSCREEN\_v1r0**

1 Twice

2 3 or more times

77 Don’t know

*NO RESPONSE* **--> GO TO SrvScr\_BRSTSCREEN\_v1r0**

**[DISPLAY IF SrvScr\_PROBIOP2\_v1r0= 1, 2, OR 77]**

1. [SrvScr\_PROBIOP3\_v1r0] When did you **last** have a prostate biopsy?

0 Less than 1 year ago

1 More than 1 year ago, but less than 2 years ago

2 More than 2 years ago, but less than 5 years ago

3 More than 5 years ago, but less than 10 years ago

4 Over 10 years ago

77 Don’t know

**[DISPLAY IF SrvScr\_BRSTTISS\_v1r0= 1 OR 2**

**ELSE, GO TO SrvScr\_OVSCREEN\_v1r0]**

## [SrvScr\_BRSTSCREEN\_v1r0] **Breast Cancer Screening**

1. Have you **ever** had any of these procedures to check for breast cancer or other conditions? Select all that apply.

*[NOTE TO PROGRAMMERS: IF 88 IS SELECTED, DE-SELECT ALL OTHER RESPONSES]*

0 **Mammogram**

An x-ray of the breast. Involves standing in front of mammography machine that compresses your breasts between 2 plates.

1 **Breast MRI**

An MRI (Magnetic Resonance Imaging) of the breast. Detailed pictures of the inside of your breast are taken while you were laying down in an MRI machine. Usually requires getting a dye through a needle in your arm.

2 **Breast Ultrasound**

An ultrasound of the breast. A healthcare provider moved a wand-like device called a transducer over your skin to make the images of your breasts.

3 **Breast Biopsy**

Small amounts of the breast are removed with a biopsy needle or during surgery. The breast tissue or cells are then looked at under a microscope to check for cancer or other problems.

88 I have **not** had any of these screening tests **--> GO TO SrvScr\_OVSCREEN\_v1r0**

*NO RESPONSE* ***--> GO TO SrvScr\_OVSCREEN\_v1r0***

**[DISPLAY IF SrvScr\_BRSTSCREEN\_v1r0 = 0**

**ELSE, GO TO SrvScr\_BRSTMRI1\_v1r0]**

1. [SrvScr\_MAMMO1\_v1r0] When did you **first** have a mammogram?

0 Less than 1 year ago

1 More than 1 year ago, but less than 2 years ago

2 More than 2 years ago, but less than 5 years ago

3 More than 5 years ago, but less than 10 years ago

4 Over 10 years ago

77 Don’t know

1. [SrvScr\_MAMMO2\_v1r0] How many times have you had a mammogram?

0 Once **--> GO TO SrvScr\_MAMMO3B\_v1r0**

1 Twice

2 3 to 5 times

3 6 to 10 times

4 Over 10 times

77 Don’t know

*NO RESPONSE* **--> GO TO SrvScr\_MAMMO3B\_v1r0**

**[DISPLAY IF** S**rvScr\_MAMMO2\_v1r0 = 1, 2, 3, 4, OR 77]**

1. [SrvScr\_MAMMO3\_v1r0] When did you **last** have a mammogram?

0 Less than 1 year ago

1 More than 1 year ago, but less than 2 years ago

2 More than 2 years ago, but less than 5 years ago

3 More than 5 years ago, but less than 10 years ago

4 Over 10 years ago

77 Don’t know

1. [SrvScr\_MAMMO3B \_v1r0] When you **last** had a mammogram, what type of mammogram did you have?

0 **2D Mammogram**

Also known as conventional digital mammography. Two pictures are typically taken of each breast—one from the side and one from above.

1 **3D Mammogram**

Also known as digital breast tomosynthesis. Multiple images are taken of the breast from different angles. A computer combines the images to create a 3D picture of the breast, which may give doctors a clearer view of the breast tissue.

77 I don’t know what type of mammogram I had.

**[DISPLAY IF SrvScr\_BRSTSCREEN\_v1r0 = 1**

**ELSE, GO TO SrvScr\_BRSTULTRA1\_v1r0]**

1. [SrvScr\_BRSTMRI1\_v1r0] When did you **first** have a breast MRI?

0 Less than 1 year ago

1 More than 1 year ago, but less than 2 years ago

2 More than 2 years ago, but less than 5 years ago

3 More than 5 years ago, but less than 10 years ago

4 Over 10 years ago

77 Don’t know

1. [SrvScr\_BRSTMRI2\_v1r0] How many times have you had a breast MRI?

0 Once **--> GO TO SrvScr\_BRSTULTRA1\_v1r0**

1 Twice

2 3 to 5 times

3 6 to 10 times

4 Over 10 times

77 Don’t know

*NO RESPONSE* **--> GO TO SrvScr\_BRSTULTRA1\_v1r0**

**[DISPLAY IF SrvScr\_BRSTMRI2\_v1r0= 1, 2, 3, 4, OR 77]**

1. [SrvScr\_BRSTMRI3\_v1r0] When did you **last** have a breast MRI?

0 Less than 1 year ago

1 More than 1 year ago, but less than 2 years ago

2 More than 2 years ago, but less than 5 years ago

3 More than 5 years ago, but less than 10 years ago

4 Over 10 years ago

77 Don’t know

**[DISPLAY IF** **SrvScr\_BRSTSCREEN\_v1r0 = 2**

**ELSE, GO TO SrvScr\_BRSTBIOP1\_v1r0]**

1. [SrvScr\_BRSTULTRA1\_v1r0] When did you **first** have a breast ultrasound?

0 Less than 1 year ago

1 More than 1 year ago, but less than 2 years ago

2 More than 2 years ago, but less than 5 years ago

3 More than 5 years ago, but less than 10 years ago

4 Over 10 years ago

77 Don’t know

1. [SrvScr\_BRSTULTRA2\_v1r0] How many times have you had a breast ultrasound?

0 Once **--> GO TO SrvScr\_BRSTBIOP1\_v1r0**

1 Twice

2 3 to 5 times

3 6 to 10 times

4 Over 10 times

77 Don’t know

*NO RESPONSE* **--> GO TO SrvScr\_BRSTBIOP1\_v1r0**

**[DISPLAY IF SrvScr\_BRSTULTRA2\_v1r0= 1, 2, 3, 4, OR 77]**

1. [SrvScr\_BRSTULTRA3\_v1r0] When did you **last** have a breast ultrasound?

0 Less than 1 year ago

1 More than 1 year ago, but less than 2 years ago

2 More than 2 years ago, but less than 5 years ago

3 More than 5 years ago, but less than 10 years ago

4 Over 10 years ago

77 Don’t know

**[DISPLAY IF SrvScr\_BRSTSCREEN\_v1r0 = 3**

**ELSE, GO TO SrvScr\_OVSCREEN\_v1r0]**

1. [SrvScr\_BRSTBIOP1\_v1r0] When did you **first** have a breast biopsy?

0 Less than 1 year ago

1 More than 1 year ago, but less than 2 years ago

2 More than 2 years ago, but less than 5 years ago

3 More than 5 years ago, but less than 10 years ago

4 Over 10 years ago

77 Don’t know

1. [SrvScr\_BRSTBIOP2\_v1r0] How many times have you had a breast biopsy?

0 Once **--> GO TO SrvScr\_OVSCREEN\_v1r0**

1 Twice

2 3 to 5 times

3 6 to 10 times

4 Over 10 times

77 Don’t know

*NO RESPONSE* ***--> GO TO SrvScr\_OVSCREEN\_v1r0***

**[DISPLAY IF SrvScr\_BRSTBIOP2\_v1r0= 1, 2, 3, 4, OR 77]**

1. [SrvScr\_BRSTBIOP3\_v1r0] When did you **last** have a breast biopsy?

0 Less than 1 year ago

1 More than 1 year ago, but less than 2 years ago

2 More than 2 years ago, but less than 5 years ago

3 More than 5 years ago, but less than 10 years ago

4 Over 10 years ago

77 Don’t know

**[DISPLAY IF** **SrvScr\_SEX2\_v3r1 6**

**ELSE, GO TO SrvScr\_CERVSCREEN\_v1r0]**

## [SrvScr\_OVSCREEN\_v1r0] **Ovarian Cancer Screening**

1. Have you **ever** had any of these tests to check for ovarian cancer or other conditions? Select all that apply.

*[NOTE TO PROGRAMMERS: IF 88 IS SELECTED, DE-SELECT ALL OTHER RESPONSES]*

0 **Blood test for ovarian cancer (CA-125)**

A blood test to check for ovarian cancer.

1 **Transvaginal Ultrasound**

Also known as a pelvic ultrasound, pelvic ultrasonography, gynecologic ultrasound, or endovaginal ultrasound. A healthcare provider inserted a wand- like device called a transducer into your vagina to make the images of your tissues and organs.

88 I have **not** had any of these screening tests **--> GO TO SrvScr\_CERVSCREEN\_v1r0**

*NO RESPONSE* ***--> GO TO SrvScr\_CERVSCREEN\_v1r0***

**[DISPLAY IF SrvScr\_OVSCREEN\_v1r0 = 0**

**ELSE, GO TO SrvScr\_OTVULTRA1\_v1r0]**

1. [SrvScr\_BLDOV1\_v1r0] When did you **first** have a blood test for ovarian cancer?

0 Less than 1 year ago

1 More than 1 year ago, but less than 2 years ago

2 More than 2 years ago, but less than 5 years ago

3 More than 5 years ago, but less than 10 years ago

4 Over 10 years ago

77 Don’t know

1. [SrvScr\_BLDOV2\_v1r0] How many times have you had a blood test for ovarian cancer?

0 Once **--> GO TO SrvScr\_OTVULTRA1\_v1r0**

1 Twice

2 3 to 5 times

3 6 to 10 times

4 Over 10 times

77 Don’t know

*NO RESPONSE* ***--> GO TO SrvScr\_OTVULTRA\_v1r0***

**[DISPLAY IF SrvScr\_BLDOV2\_v1r0= 1, 2, 3, 4, OR 77]**

1. [SrvScr\_BLDOV3\_v1r0] When did you **last** have a blood test for ovarian cancer?

0 Less than 1 year ago

1 More than 1 year ago, but less than 2 years ago

2 More than 2 years ago, but less than 5 years ago

3 More than 5 years ago, but less than 10 years ago

4 Over 10 years ago

77 Don’t know

**[DISPLAY IF SrvScr\_OVSCREEN\_v1r0 = 1**

**ELSE, GO TO SrvScr\_CERVSCREEN\_v1r0]**

1. [SrvScr\_OTVULTRA1\_v1r0] When did you **first** have a transvaginal ultrasound?

0 Less than 1 year ago

1 More than 1 year ago, but less than 2 years ago

2 More than 2 years ago, but less than 5 years ago

3 More than 5 years ago, but less than 10 years ago

4 Over 10 years ago

77 Don’t know

1. [SrvScr\_OTVULTRA2\_v1r0] How many times have you had a transvaginal ultrasound?

0 Once **--> GO TO SrvScr\_CERVSCREEN\_v1r0**

1 Twice

2 3 to 5 times

3 6 to 10 times

4 Over 10 times

77 Don’t know

*NO RESPONSE* ***--> GO TO SrvScr\_CERVSCREEN\_v1r0***

**[DISPLAY IF SrvScr\_OTVULTRA2\_v1r0= 1, 2, 3, 4, OR 77]**

1. [SrvScr\_OTVULTRA3\_v1r0] When did you **last** have a transvaginal ultrasound?

0 Less than 1 year ago

1 More than 1 year ago, but less than 2 years ago

2 More than 2 years ago, but less than 5 years ago

3 More than 5 years ago, but less than 10 years ago

4 Over 10 years ago

77 Don’t know

**[DISPLAY IF SrvScr\_SEX2\_v3r1 4**

**ELSE, GO TO SrvScr\_ENDOSCREEN\_v1r0]**

## [SrvScr\_CERVSCREEN\_v1r0] **Cervical Cancer Screening**

1. Have you **ever** had any of these tests to check for cervical cancer or other conditions? Select all that apply.

*[NOTE TO PROGRAMMERS: IF 2 OR 88 IS SELECTED, DE-SELECT ALL OTHER RESPONSES]*

0 **High-risk human papillomavirus (HrHPV) Test**

A healthcare provider used a plastic or metal instrument called a speculum to open your vagina, and used a soft brush or plastic spatula to collect cells from your cervix. The cells were checked for the type of HPV that can lead to cervical cancer.

1 **Pap Test**

Also known as Pap smear or cervical cytology. A healthcare provider used a plastic or metal instrument called a speculum to open your vagina, and used a soft brush or plastic spatula to collect cells from your cervix. The cells were checked for cancer or signs that they may become cancer.

2 I have had a cervical cancer screening test, but do not know which test I had

88 I have **not** had any of these screening tests **--> GO TO SrvScr\_ENDOSCREEN\_v1r0**

*NO RESPONSE* ***--> GO TO SrvScr\_ENDOSCREEN\_v1r0***

**[DISPLAY IF** **SrvScr\_CERVSCREEN\_v1r0 = 0**

**ELSE, GO TO SrvScr\_CPAP1\_v1r0]**

1. [SrvScr\_CHRHPV1\_v1r0] When did you **first** have a HrHPV test?

0 Less than 1 year ago

1 More than 1 year ago, but less than 2 years ago

2 More than 2 years ago, but less than 5 years ago

3 More than 5 years ago, but less than 10 years ago

4 Over 10 years ago

77 Don’t know

1. [SrvScr\_CHRHPV2\_v1r0] How many times have you had a HrHPV test?

0 Once **--> GO TO SrvScr\_CPAP1\_v1r0**

1 Twice

2 3 to 5 times

3 6 to 10 times

4 Over 10 times

77 Don’t know

*NO RESPONSE* **--> GO TO SrvScr\_CPAP1\_v1r0**

**[DISPLAY IF SrvScr\_CHRHPV2\_v1r0= 1, 2, 3, 4, OR 77]**

1. [SrvScr\_CHRHPV3\_v1r0] When did you **last** have a HrHPV test?

0 Less than 1 year ago

1 More than 1 year ago, but less than 2 years ago

2 More than 2 years ago, but less than 5 years ago

3 More than 5 years ago, but less than 10 years ago

4 Over 10 years ago

77 Don’t know

**[DISPLAY IF SrvScr\_CERVSCREEN\_v1r0 = 1**

**ELSE, GO TO SrvScr\_CERVIDK1\_v1r0]**

1. [SrvScr\_CPAP1\_v1r0] When did you **first** have a Pap test?

0 Less than 1 year ago

1 More than 1 year ago, but less than 2 years ago

2 More than 2 years ago, but less than 5 years ago

3 More than 5 years ago, but less than 10 years ago

4 Over 10 years ago

77 Don’t know

1. [SrvScr\_CPAP2\_v1r0] How many times have you had a Pap test?

0 Once **--> GO TO SrvScr\_CERVIDK1\_v1r0**

1 Twice

2 3 to 5 times

3 6 to 10 times

4 Over 10 times

77 Don’t know

*NO RESPONSE* **--> GO TO SrvScr\_CERVIDK1\_v1r0**

**[DISPLAY IF SrvScr\_CPAP2\_v1r0= 1, 2, 3, 4, OR 77]**

1. [SrvScr\_CPAP3\_v1r0] When did you **last** have a Pap test?

0 Less than 1 year ago

1 More than 1 year ago, but less than 2 years ago

2 More than 2 years ago, but less than 5 years ago

3 More than 5 years ago, but less than 10 years ago

4 Over 10 years ago

77 Don’t know

**[DISPLAY IF SrvScr\_CERVSCREEN\_v1r0 = 2**

**ELSE, GO TO SrvScr\_ENDOSCREEN\_v1r0]**

1. [SrvScr\_CERVIDK1\_v1r0] When were you **first** screened for cervical cancer?

0 Less than 1 year ago

1 More than 1 year ago, but less than 2 years ago

2 More than 2 years ago, but less than 5 years ago

3 More than 5 years ago, but less than 10 years ago

4 Over 10 years ago

77 Don’t know

1. [SrvScr\_CERVIDK2\_v1r0] How many times have you been screened for cervical cancer??

0 Once **--> GO TO SrvScr\_ENDOSCREEN\_v1r0**

1 Twice

2 3 to 5 times

3 6 to 10 times

4 Over 10 times

77 Don’t know

*NO RESPONSE* **--> GO TO SrvScr\_ENDOSCREEN\_v1r0**

**[DISPLAY IF SrvScr\_CERVIDK2\_v1r0= 1, 2, 3, 4, OR 77]**

1. [SrvScr\_CERVIDK3\_v1r0] When were you **last** screened for cervical cancer?

0 Less than 1 year ago

1 More than 1 year ago, but less than 2 years ago

2 More than 2 years ago, but less than 5 years ago

3 More than 5 years ago, but less than 10 years ago

4 Over 10 years ago

77 Don’t know

**[DISPLAY** **IF SrvScr\_SEX2\_v3r1= 5**

**ELSE, GO TO SrvScr\_MULTISCREEN\_v1r0]**

## [SrvScr\_ENDOSCREEN\_v1r0] **Endometrial Cancer Screening**

1. Have you **ever** had any of these tests to check for endometrial cancer or other conditions? Select all that apply.

*[NOTE TO PROGRAMMERS: IF 88 IS SELECTED, DE-SELECT ALL OTHER RESPONSES]*

0 **Transvaginal Ultrasound**

Also known as a pelvic ultrasound, pelvic ultrasonography, gynecologic ultrasound, or endovaginal ultrasound. A healthcare provider inserted a wand- like device called a transducer into your vagina to make the images of your tissues and organs.

1 **Hysteroscopy**

A healthcare provider inserted a thin, flexible tube through your vagina to look inside your uterus and check for cancer or other problems. It is likely that you were awake and may have had numbing medicine, but were able to drive yourself home. Your provider could also have given you a sedative to relax you, in which case someone else needed to drive you home.

2 **Endometrial Biopsy**

A healthcare provider used a plastic or metal instrument called a speculum to open your vagina, and inserted a very thin, flexible tube into your uterus. Then, using a suction, the provider took a small amount of tissue through the tube. The suctioning took about a minute or less and was likely done in your provider’s office. The tissue is then looked at under a microscope to check for cancer or other problems.

3 **Dilation and Curettage (D&C)**

Before the procedure, it is likely that a medicine was given through a needle in your arm to make you sleepy. During this surgical procedure, a healthcare provider enlarged (dilated) your cervix and inserted an instrument to scrape tissue from inside your uterus. Someone else needed to drive you home.

88 I have **not** had any of these screening tests **--> GO TO SrvScr\_MULTISCREEN\_v1r0**

*NO RESPONSE* ***--> GO TO SrvScr\_MULTISCREEN\_v1r0***

**[DISPLAY IF SrvScr\_ENDOCREEN\_v1r0 = 0**

**ELSE, GO TO SrvScr\_HYSTERO1\_v1r0]**

1. [SrvScr\_ETVULTRA1\_v1r0] When did you **first** have a transvaginal ultrasound?

0 Less than 1 year ago

1 More than 1 year ago, but less than 2 years ago

2 More than 2 years ago, but less than 5 years ago

3 More than 5 years ago, but less than 10 years ago

4 Over 10 years ago

77 Don’t know

1. [SrvScr\_ETVULTRA2\_v1r0] How many times have you had a transvaginal ultrasound?

0 Once **--> GO TO SrvScr\_HYSTERO1\_v1r0**

1 Twice

2 3 to 5 times

3 6 to 10 times

4 Over 10 times

77 Don’t know

*NO RESPONSE* ***--> GO TO SrvScr\_HYSTERO1\_v1r0***

**[DISPLAY IF SrvScr\_ETVULTRA2\_v1r0= 1, 2, 3, 4, OR 77]**

1. [SrvScr\_ETVULTRA3\_v1r0] When did you **last** have a transvaginal ultrasound?

0 Less than 1 year ago

1 More than 1 year ago, but less than 2 years ago

2 More than 2 years ago, but less than 5 years ago

3 More than 5 years ago, but less than 10 years ago

4 Over 10 years ago

77 Don’t know

**[DISPLAY IF** **SrvScr\_ENDOCREEN\_v1r0 = 1**

**ELSE, GO TO SrvScr\_ENDOBIOP1\_v1r0]**

1. [SrvScr\_HYSTERO1\_v1r0] When did you **first** have a hysteroscopy?

0 Less than 1 year ago

1 More than 1 year ago, but less than 2 years ago

2 More than 2 years ago, but less than 5 years ago

3 More than 5 years ago, but less than 10 years ago

4 Over 10 years ago

77 Don’t know

1. [SrvScr\_HYSTERO2\_v1r0] How many times have you had a hysteroscopy?

0 Once **--> GO TO SrvScr\_ENDOBIOP1\_v1r0**

1 Twice

2 3 to 5 times

3 6 to 10 times

4 Over 10 times

77 Don’t know

*NO RESPONSE* **--> GO TO SrvScr\_ENDOBIOP1\_v1r0**

**[DISPLAY IF SrvScr\_HYSTERO2\_v1r0= 1, 2, 3, 4, OR 77]**

1. [SrvScr\_HYSTERO3\_v1r0] When did you **last** have a hysteroscopy?

0 Less than 1 year ago

1 More than 1 year ago, but less than 2 years ago

2 More than 2 years ago, but less than 5 years ago

3 More than 5 years ago, but less than 10 years ago

4 Over 10 years ago

77 Don’t know

**[DISPLAY IF SrvScr\_ENDOCREEN\_v1r0 = 2**

**ELSE, GO TO SrvScr\_DILCUR1\_v1r0]**

1. [SrvScr\_ENDOBIOP1\_v1r0] When did you **first** have an endometrial biopsy?

0 Less than 1 year ago

1 More than 1 year ago, but less than 2 years ago

2 More than 2 years ago, but less than 5 years ago

3 More than 5 years ago, but less than 10 years ago

4 Over 10 years ago

77 Don’t know

1. [SrvScr\_ENDOBIOP2\_v1r0] How many times have you had an endometrial biopsy?

0 Once **--> GO TO SrvScr\_DILCUR1\_v1r0**

1 Twice

2 3 to 5 times

3 6 to 10 times

4 Over 10 times

77 Don’t know

*NO RESPONSE* ***--> GO TO SrvScr\_DILCUR1\_v1r0***

**[DISPLAY IF SrvScr\_ENDOBIOP2\_v1r0= 1, 2, 3, 4, OR 77]**

1. [SrvScr\_ENDOBIOP3\_v1r0] When did you **last** have an endometrial biopsy?

0 Less than 1 year ago

1 More than 1 year ago, but less than 2 years ago

2 More than 2 years ago, but less than 5 years ago

3 More than 5 years ago, but less than 10 years ago

4 Over 10 years ago

77 Don’t know

**[DISPLAY IF SrvScr\_ENDOCREEN\_v1r0 = 3**

**ELSE, GO TO SrvScr\_MULTISCREEN\_v1r0]**

1. [SrvScr\_DILCUR1\_v1r0] When did you **first** have a dilation and curettage (D&C)?

0 Less than 1 year ago

1 More than 1 year ago, but less than 2 years ago

2 More than 2 years ago, but less than 5 years ago

3 More than 5 years ago, but less than 10 years ago

4 Over 10 years ago

77 Don’t know

1. [SrvScr\_DILCUR2\_v1r0] How many times have you had a dilation and curettage (D&C)?

0 Once **--> GO TO SrvScr\_MULTISCREEN\_v1r0**

1 Twice

2 3 to 5 times

3 6 to 10 times

4 Over 10 times

77 Don’t know

*NO RESPONSE* ***--> GO TO SrvScr\_MULTISCREEN\_v1r0***

**[DISPLAY IF SrvScr\_DILCUR2\_v1r0= 1, 2, 3, 4, OR 77]**

1. [SrvScr\_DILCUR3\_v1r0] When did you **last** have a dilation and curettage (D&C)?

0 Less than 1 year ago

1 More than 1 year ago, but less than 2 years ago

2 More than 2 years ago, but less than 5 years ago

3 More than 5 years ago, but less than 10 years ago

4 Over 10 years ago

77 Don’t know

## [SrvScr\_MULTISCREEN\_v1r0] **Multi-Cancer Screening Tests**

1. Have you **ever** had any of these tests to check for multiple types of cancers? Select all that apply.

*[NOTE TO PROGRAMMERS: IF 88 IS SELECTED, DE-SELECT ALL OTHER RESPONSES]*

0 **Multi-cancer early detection (MCED) Test**

Also known as a liquid biopsy. MCED tests (for example, GRAIL’s Galleri ™ test) are blood tests that measure biological signals in body fluids that may be shed by cancer cells.

1 **Full body MRI or CT**

An MRI (Magnetic Resonance Imaging) or CT (CAT scan) of your body. Detailed pictures of the inside of your body were taken while you were laying down in an MRI or CT machine.

88 I have **not** had any of these screening tests **--> GO TO SrvScr\_QXAUTHOR1\_v1r0**

*NO RESPONSE* ***--> GO TO SrvScr\_QXAUTHOR1\_v1r0***

**[DISPLAY IF SrvScr\_MULTISCREEN\_v1r0 = 0**

**ELSE, GO TO SrvScr\_FBODMRI1\_v1r0]**

1. [SrvScr\_MCED1\_v1r0] When did you **first** have a MCED test?

0 Less than 1 year ago

1 More than 1 year ago, but less than 2 years ago

2 More than 2 years ago, but less than 5 years ago

3 More than 5 years ago, but less than 10 years ago

4 Over 10 years ago

77 Don’t know

1. [SrvScr\_MCED2\_v1r0] How many times have you had a MCED test?

0 Once **--> GO TO SrvScr\_FBODMRI1\_v1r0**

1 Twice

2 3 to 5 times

3 6 to 10 times

4 Over 10 times

77 Don’t know

*NO RESPONSE* **--> GO TO SrvScr\_FBODMRI1\_v1r0**

**[DISPLAY IF SrvScr\_MCED2\_v1r0= 1, 2, 3, 4, OR 77]**

1. [SrvScr\_MCED3\_v1r0] When did you **last** have a MCED test?

0 Less than 1 year ago

1 More than 1 year ago, but less than 2 years ago

2 More than 2 years ago, but less than 5 years ago

3 More than 5 years ago, but less than 10 years ago

4 Over 10 years ago

77 Don’t know

**[DISPLAY IF** **SrvScr\_MULTISCREEN\_v1r0= 1**

**ELSE, GO TO SrvScr\_QXAUTHOR1\_v1r0]**

1. [SrvScr\_FBODMRI1\_v1r0] When did you **first** have a full body MRI?

0 Less than 1 year ago

1 More than 1 year ago, but less than 2 years ago

2 More than 2 years ago, but less than 5 years ago

3 More than 5 years ago, but less than 10 years ago

4 Over 10 years ago

77 Don’t know

1. [SrvScr\_FBODMRI2\_v1r0] How many times have you had a full body MRI?

0 Once **--> GO TO SrvScr\_QXAUTHOR1\_v1r0**

1 Twice

2 3 to 5 times

3 6 to 10 times

4 Over 10 times

77 Don’t know

*NO RESPONSE* ***--> GO TO SrvScr\_QXAUTHOR1\_v1r0***

**[DISPLAY IF SrvScr\_FBODMRI2\_v1r0= 1, 2, 3, 4, OR 77]**

1. [SrvScr\_FBODMRI3\_v1r0] When did you **last** have a full body MRI?

0 Less than 1 year ago

1 More than 1 year ago, but less than 2 years ago

2 More than 2 years ago, but less than 5 years ago

3 More than 5 years ago, but less than 10 years ago

4 Over 10 years ago

77 Don’t know

1. [SrvScr\_WhoComplQx\_v1r0] Who completed this survey section?

0 Completed by study participant

1 Completed by someone else on behalf of study participant

**Closing remark on submit survey screen: “You have answered all of the questions in this survey. To submit your answers, select the “Submit Survey” button.”**