

Protocol ID: _____

Study Name: _____

Site: _____

Event Name: _____

Event Date: _____

Study Subject ID: _____

Interviewer Name: _____

Interview Date: _____

BLSA Parental Longevity - Ver 1.0

Section Title: Family History

Instructions:

Parental Longevity

Date Completed

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Tester ID

INTRODUCTION: The following questions will help us learn about your family history.

1. Were you adopted? ☐ Yes ☐ No ☐ Don't know ☐ Prefer not to answer Click to deselect entry *If No, skip questions 4 and 5*

Biological Parents

2. Is your biological mother alive? ☐ Yes ☐ No ☐ Don't know ☐ Prefer not to answer Click to deselect entry *If Yes go to 2a, if No go to 2b and 2c
If Don't know or Prefer not to answer, go to 3*

2a. What is your mother's age
now?

2b. How old was your mother
when she died?

2c. What was the cause?

- ☐ Myocardial infarction
- ☐ Stroke
- ☐ Other CVD
- ☐ Cancer
- ☐ COPD (emphysema chronic bronchitis)
- ☐ Alzheimer's disease/other dementia
- ☐ Diabetes
- ☐ Influenza or pneumonia
- ☐ Kidney disease
- ☐ Complications of fracture
- ☐ Accident/trauma
- ☐ Intentional self-harm (suicide)
- ☐ Other (please specify)
- ☐ Undetermined/unknown

[Click to deselect entry](#)

Other - please specify

3. Is your biological father alive? ☐ Yes ☐ No ☐ Don't know ☐ Prefer not to answer

[Click to deselect entry](#) *If Yes go to 3a, if No go to 3b and 3c
If Don't know or Prefer not to answer, go to 4*

3a. What is your father's age now?

3b. How old was your father when
he died?

3c. What was the cause?

- ☐ Myocardial infarction
- ☐ Stroke
- ☐ Other CVD
- ☐ Cancer
- ☐ COPD (emphysema chronic bronchitis)
- ☐ Alzheimer's disease/other dementia
- ☐ Diabetes
- ☐ Influenza or pneumonia
- ☐ Kidney disease
- ☐ Complications of fracture
- ☐ Accident/trauma
- ☐ Intentional self-harm (suicide)
- ☐ Other (please specify)
- ☐ Undetermined/unknown

Click to deselect entry

Other - please specify

Adoptive Parents

4. Is your adoptive mother alive? ☐ Yes ☐ No ☐ Don't know ☐ Prefer not to answer

Click to deselect entry
If Yes go to 4a, if No go to 4b and 4c
If Don't know or Prefer not to answer, go to 5

4a. What is your mother's age
now?

4b. How old was your mother
when she died?

4c. What was the cause?

- ☐ Myocardial infarction
- ☐ Stroke
- ☐ Other CVD
- ☐ Cancer
- ☐ COPD (emphysema chronic bronchitis)
- ☐ Alzheimer's disease/other dementia
- ☐ Diabetes
- ☐ Influenza or pneumonia
- ☐ Kidney disease
- ☐ Complications of fracture
- ☐ Accident/trauma
- ☐ Intentional self-harm (suicide)
- ☐ Other (please specify)
- ☐ Undetermined/unknown

[Click to deselect entry](#)

Other - please specify

5. Is your adoptive father alive? ☐ Yes ☐ No ☐ Don't know ☐ Prefer not to answer

[Click to deselect entry](#) *If Yes go to 5a, if No go to 5b and 5c
If Don't know or Prefer not to answer, go to END*

5a. What is your father's age now?

5b. How old was your father when
he died?

5c. What was the cause?

- ☐ Myocardial infarction
- ☐ Stroke
- ☐ Other CVD
- ☐ Cancer
- ☐ COPD (emphysema chronic bronchitis)
- ☐ Alzheimer's disease/other dementia
- ☐ Diabetes
- ☐ Influenza or pneumonia
- ☐ Kidney disease
- ☐ Complications of fracture
- ☐ Accident/trauma
- ☐ Intentional self-harm (suicide)
- ☐ Other (please specify)
- ☐ Undetermined/unknown

Click to deselect entry

Other - please specify