**Survey Intro Language:**
This survey asks questions about your overall health. Your privacy is very important to us. Your answers will only be shared with approved researchers only after we have removed your name. It takes about 5 to 10 minutes to answer these questions. Please answer each question as honestly as possible. There are no right or wrong answers to any of the questions. It is important that you answer as many questions as you can. We are looking for your own answers, and not what you think your doctors, family, or friends want you to say.

Don't feel like you have to spend a long time over each question. The first answer that comes to you is usually the best one. If you aren't sure how to answer a question, choose the best answer from the options given. The next set of questions are about medical forms and other health information. Your answers will help us learn whether you find medical forms easy or hard to understand.

**Survey Outro Language:**
Thank you. Your answers will help researchers to better understand health and advance how we prevent and treat disease.

<table>
<thead>
<tr>
<th>Item ID:</th>
<th>Ref. Survey</th>
<th>Question Stem</th>
<th>Responses</th>
</tr>
</thead>
<tbody>
<tr>
<td>BHL1</td>
<td>BHLS</td>
<td>How confident are you filling out medical forms by yourself?</td>
<td>Extremely; Quite a bit; Somewhat; A little bit; Not at all</td>
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<tr>
<td>BHL2</td>
<td>BHLS</td>
<td>How often do you have someone help you read health-related materials?</td>
<td></td>
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<tr>
<td></td>
<td></td>
<td>Always</td>
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<td></td>
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<td>Often</td>
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<td></td>
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<td>Sometimes</td>
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<td>Occasionally</td>
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<td></td>
<td></td>
<td>Never</td>
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<tr>
<td>BHL3</td>
<td>BHLS</td>
<td>How often do you have problems learning about your medical condition because of difficulty understanding written information?</td>
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<td></td>
<td></td>
<td>Always</td>
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<td>Often</td>
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<td>Occasionally</td>
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<td></td>
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<td>Never</td>
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</tbody>
</table>

The next 10 questions ask you how you feel about your health and daily activities.

<p>| | | |</p>
<table>
<thead>
<tr>
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</thead>
<tbody>
<tr>
<td>G1</td>
<td>PROMIS Global Health</td>
<td>In general, would you say your health is:</td>
</tr>
<tr>
<td></td>
<td></td>
<td>5 = Excellent</td>
</tr>
<tr>
<td></td>
<td></td>
<td>4 = Very good</td>
</tr>
<tr>
<td></td>
<td></td>
<td>3 = Good</td>
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<tr>
<td></td>
<td></td>
<td>2 = Fair</td>
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<tr>
<td></td>
<td></td>
<td>1 = Poor</td>
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<tr>
<td>G2</td>
<td>PROMIS Global Health</td>
<td>In general, would you say your quality of life is:</td>
</tr>
<tr>
<td></td>
<td></td>
<td>5 = Excellent</td>
</tr>
<tr>
<td></td>
<td></td>
<td>4 = Very good</td>
</tr>
<tr>
<td></td>
<td></td>
<td>3 = Good</td>
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<tr>
<td></td>
<td></td>
<td>2 = Fair</td>
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<tr>
<td></td>
<td></td>
<td>1 = Poor</td>
</tr>
<tr>
<td>G3</td>
<td>PROMIS Global Health</td>
<td>In general, how would you rate your physical health?</td>
</tr>
<tr>
<td></td>
<td></td>
<td>5 = Excellent</td>
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<tr>
<td></td>
<td></td>
<td>4 = Very good</td>
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<tr>
<td></td>
<td></td>
<td>3 = Good</td>
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<td>2 = Fair</td>
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<tr>
<td></td>
<td></td>
<td>1 = Poor</td>
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<tr>
<td></td>
<td>PROMIS Global Health</td>
<td>Question</td>
</tr>
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<td>---</td>
<td>----------------------</td>
<td>--------------------------------------------------------------------------</td>
</tr>
</tbody>
</table>
| G4 | PROMIS Global Health | In general, how would you rate your mental health, including your mood and your ability to think? | 5 = Excellent  
4 = Very good  
3 = Good  
2 = Fair  
1 = Poor |
| G5 | PROMIS Global Health | In general, how would you rate your satisfaction with your social activities and relationships? | 5 = Excellent  
4 = Very good  
3 = Good  
2 = Fair  
1 = Poor |
| G6 | PROMIS Global Health | To what extent are you able to carry out your everyday physical activities, such as walking, climbing stairs, carrying groceries, or moving a chair? | 5 = Completely  
4 = Mostly  
3 = Moderately  
2 = A little  
1 = Not at all |
| G7 | PROMIS Global Health | In the past 7 days, how would you rate your pain on average? | 5 = 0 No pain  
4 = 1  
4 = 2  
4 = 3  
3 = 4  
3 = 5  
3 = 6  
2 = 7  
2 = 8  
2 = 9  
1 = 10 Worst pain imaginable |
| G8 | PROMIS Global Health | In the past 7 days, how would you rate your fatigue on average? | 5 = None  
4 = Mild  
3 = Moderate  
2 = Severe  
1 = Very severe |
### G9
**PROMIS Global Health**
In general, please rate how well you carry out your usual social roles. (This includes activities at home, at work, and in your community, and responsibilities as a parent, child, spouse, employee, friend, etc.)

<table>
<thead>
<tr>
<th>Score</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>5</td>
<td>Excellent</td>
</tr>
<tr>
<td>4</td>
<td>Very good</td>
</tr>
<tr>
<td>3</td>
<td>Good</td>
</tr>
<tr>
<td>2</td>
<td>Fair</td>
</tr>
<tr>
<td>1</td>
<td>Poor</td>
</tr>
</tbody>
</table>

### G10
**PROMIS Global Health**
In the past 7 days, how often have you been bothered by emotional problems, such as feeling anxious, depressed, or irritable?

<table>
<thead>
<tr>
<th>Score</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>5</td>
<td>Never</td>
</tr>
<tr>
<td>4</td>
<td>Rarely</td>
</tr>
<tr>
<td>3</td>
<td>Sometimes</td>
</tr>
<tr>
<td>2</td>
<td>Often</td>
</tr>
<tr>
<td>1</td>
<td>Always</td>
</tr>
</tbody>
</table>

The next few questions are about women’s health issues. Women’s health is very important when considering your overall health. Answering these questions will help us get a more complete picture of your total health.

Note: The questions WH1–WH4 will only be asked if in sociodemographic the questions about sex at birth were answered female, intersex, or (please specify).

### WH2
**Have your menstrual periods stopped permanently?**

- No (go to WH1, then skip to BS1)
- Yes, I have no menstrual periods (Skip to WH3)
- Yes, but I have periods induced by hormones (skip to WH3)
- Not sure (go to WH1)
- Prefer not to answer

### WH1
**Are you currently pregnant?**

- No
- Yes
- Not sure
- Prefer not to answer
### WH3
Why did your periods stop?

- Natural menopause (change of life)
- Surgery (a hysterectomy to remove your uterus and/or an oophorectomy to remove your ovaries)
- Endometrial ablation (removal of the lining of the uterus)
- Medication, chemotherapy, or radiation
- Other
- Not sure
- Prefer not to answer

### WH4
Have you ever had a hysterectomy (that is, surgery to remove your uterus or womb)?

- No (go to question WH5/ovary removed)
- Yes
- Not sure (go to WH5)
- Prefer not to answer (go to WH5)

### WH4A
If yes, age at surgery?

_____ (age in years)

### WH5
Have you ever had an ovary removed?

- No (go to question BS1)
- Yes, but only one ovary or part of one ovary
- Yes, both ovaries
- Yes, but don't know whether one or both ovaries
- Not sure (go to BS1)
- Prefer not to answer (go to BS1)
### WH5A
If yes, age at surgery?  
____ (age in years)

A blood sample may be drawn as part of this study. Some conditions or prior procedures, such as a bone marrow transplant, may cause problems in using your blood sample for research. In addition, some information about you, such as your travel history, may not generally be in your medical record but may still be helpful to researchers. Traveling outside the country may increase your risk of coming into contact with certain infections not commonly present in this country. The following questions are asked to address two of these situations.

### BS1
Have you had a transplant of any type?  
Yes
No (go to BS2)
Don’t know (go to BS2)

### BS1A
If yes, please check all that apply.  
Heart  
Kidney  
Liver  
Lung  
Pancreas  
Intestine  
Other organ (free text field)  
Cornea  
Bone  
Heart  
Valve  
Skin  
Blood vessels  
Other tissue (free text field)

### BS1B
*Date of transplant:  
*asked for each item selected

### BS2
Have you traveled outside of the country within the past 6 months?  
Yes  
No  
Don’t know (end of module)

### BS2A
If yes,  
1. Where?  
2. How long?  
Free text number (days, weeks, months, years)
Key: PROMIS = Patient-Reported Outcomes Measurement Information System
BHLS = Brief Health Literacy Screen
PHCS = Perceived Health Competency Scale