

Multi-Ethnic Study of Atherosclerosis



Vitamins, Minerals,
other Nutritional Supplements

Participant ID:

Visit Date:

		/			/				
--	--	---	--	--	---	--	--	--	--

Acrostic:

--	--	--	--	--	--	--	--

Draft

Section I:

1. ¿Toma usted vitaminas, minerales u otros complementos como mínimo una vez por semana?

☐ Sí☐ Nogo to the **END OF THE FORM****Section II: Multi Vitamins and/or Multi-Vitamins + Minerals (please give title and brand name)**

Name/Brand	# Pills per week (i.e., daily use = 7)	Duration of use <i>i.e., how long has ppt been using this product or another similar to it? (choose one option)</i>
1.		<input type="radio"/> < 1 mon. <input type="radio"/> ^{>1} mon., but <6 mons. <input type="radio"/> ^{>6} mons., but <1 yr. <input type="radio"/> ≥ 1 yr.
2. (will allow expansion of the # of entries as needed)		<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>

Other: (not on the list):

1. (will allow expansion of the # of entries as needed)		<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>
---	--	---

Section III: Single Nutrient Supplements (e.g., vitamin C) or Combination Nutrient Supplements (e.g. calcium + vitamin D)

Nutrient(s)	# Pills per week (i.e., daily use = 7)	Dose per pill (units)	Duration of use <i>i.e., how long has ppt been using this product or another similar to it? (choose one option)</i>
1.			<input type="radio"/> < 1 mon. <input type="radio"/> ^{>1} mon., but <6 mons. <input type="radio"/> ^{>6} mons., but <1 yr. <input type="radio"/> ≥ 1 yr.
2. (will allow expansion of the # of entries as needed)			<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>

Other: (not on the list):

1. (will allow expansion of the # of entries as needed)			<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>
---	--	--	---

Section IV: Other Supplements

Supplements	Duration of use <i>i.e., how long has ppt been using this product or another similar to it? (choose one option)</i>
1.	<input type="radio"/> < 1 mon. <input type="radio"/> ≥1 mon., but <6 mons. <input type="radio"/> ≥6 mons., but <1 yr. <input type="radio"/> ≥ 1 yr.
2. <i>(will allow expansion of the # of entries as needed)</i>	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>
Other: (not on the list):	
1. <i>(will allow expansion of the # of entries as needed)</i>	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>