



Data Collection Worksheet

Please Note: The Data Collection Worksheet (DCW) is a tool to aid integration of a PhenX protocol into a study. The PhenX DCW is not designed to be a data collection instrument. Investigators will need to decide the best way to collect data for the PhenX protocol in their study. Variables captured in the DCW, along with variable names and unique PhenX variable identifiers, are included in the PhenX Data Dictionary (DD) files.

SP = Sample Person

The following questions are about the different ways that certain drugs can be used.

1. Have you **ever**, even once, used a needle to inject a drug **not prescribed** by a doctor?

INSTRUCTIONS TO SP:

Please select . . .

- 1 Yes
- 2 No
- 7 Refused
- 9 Dont Know

If respondent answers, "No," "Refused," or "Dont Know," the protocol is complete.

2. Which of the following drugs have you injected using a needle?

INSTRUCTIONS TO SP:

Please select all the drugs that you injected.

- 1 Cocaine
- 2 Heroin
- 3 Methamphetamine
- 4 Steroids
- 5 Any other drugs

7 [] Refused

9 [] Dont Know

3. How old were you when you **first** used a needle to inject any drug not prescribed by a doctor?

INSTRUCTION TO SP:

Please enter an age.

__ __ ENTER AGE IN YEARS

77 [] Refused

99 [] Dont Know

4. How long ago has it been since you **last** used a needle to inject a drug not prescribed by a doctor?

INSTRUCTIONS TO SP:

Please enter the number of days, weeks, months, or years, and then select the unit of time.

__ __ __ ENTER NUMBER OF DAYS, WEEKS, MONTHS, OR YEARS

7777 [] Refused

9999 [] Dont Know

ENTER UNIT

1 [] Days

2 [] Weeks

3 [] Months

4 [] Years

7 [] Refused

9 [] Dont Know

5. During your **life**, altogether how many times have you injected drugs not prescribed by a doctor?

INSTRUCTIONS TO SP:

Please enter one of the following choices:

- 1 Once
- 2 2-5 times
- 3 6-19 times
- 4 20-49 times
- 5 50-99 times
- 6 100 times or more
- 77 Refused
- 99 Dont Know

6. Think about the period of your life when you injected drugs the **most often**. How often did you inject then?

INSTRUCTIONS TO SP:

Please select one of the following choices.

- 1 More than once a day
- 2 About once a day
- 3 At least once a week but not every day
- 4 At least once a month but not every week
- 5 Less than once a month
- 7 Refused
- 9 Dont Know

7. Have you **ever** been in a drug treatment or drug rehabilitation program?

INSTRUCTION TO SP:

Please select . . .

- 1 Yes
- 2 No
- 7 Refused
- 9 Dont Know

Protocol source: <https://www.phenxtoolkit.org/protocols/view/161101>