

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.

Section 1. Changes to Your Work Schedule

1. A	t any	time 1	from	when	you	were	first	diagnose	d with	cancer	until	now,	were
you	work	ing for	pay	at a jo	ob o	r busi	ness?	1					

[] Yes
[] No →GO TO Question 38

These next questions ask about different ways cancer, its treatment, or the lasting effects of that treatment may have affected your work - that is, your hours, duties, or employment status.

As you answer these questions, please think about the entire time from when you were first diagnosed with cancer to now.

If you have had more than one type of cancer please think about your experiences across all of them. If that is not possible, please focus on the most severe, and if they were equally severe, please focus on the most recent.

2. At any time since your first cancer diagnosis, did you take extended paid time off from work, unpaid time off, or make a change in your hours, duties or employment status?

[]	Yes→ GO	TO Question	5
[]	No		

3. At any time since your first cancer diagnosis, did you ask for extended paid time off from work, unpaid time off, or a change in your hours, duties or employment status?

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Γ	1	No→	GO	то	Oue	stion	27

4. Did you ask for these work changes
[] Because of your cancer, its treatment or its lasting effect \rightarrow GO TO Question 27
[] Some other reason? \rightarrow GO TO Question 27
5. Did you make these work changes
[] Because of your cancer, its treatment or its lasting effects?
[] Some other reason? \rightarrow GO TO Question 27
6. Did you ever take extended time off from work (vacation, sick time and/or disability leave)? By extended time off, we mean more than an occasional day off here and there.
[] Yes
[] No →GO TO Question 10
7. When did you take extended paid time off from work?
Mark x all that apply.
[] At the time of diagnosis
[] During treatment
[] Less than on year after treatment was finished
[] One year or more after treatment was finished
8. What do you estimate was the total amount of extended paid time off from work that you took?
[] Less than 2 months
[] 2 months to less than 6 months
[] 6 months to less than 1 year
[] 1 year to 3 years
[] More than 3 years
9. Is your extended paid time off from work ongoing?
[] Yes
[] No

10. Did you ever take unpaid time off from work?
[] Yes
[] No →GO TO Question 14
11. When did you take unpaid time off from work?
Mark x all that apply.
[] At the time of diagnosis
[] During treatment
[] Less than one year after treatment was finished
[] One year or more after treatment was finished
12. What do you estimate was the total amount of unpaid time off from work that you took?
[] Less than 2 months
[] 2 months to less than 6 months
[] 6 months to less than 1 year
[] 1 year to 3 years
[] More than 3 years
13. Is your unpaid time off ongoing?
[] Yes
[] No
14. Did you ever change from working part-time to working full-time?
[] Yes
[] No→ GO TO Question 18
15. When did you change from working part-time to working full-time?
Mark x all that apply.
[] At the time of diagnosis
[] During treatment

[] Less than one year after treatment was finished
[] One year or more after treatment was finished
16. What do you estimate was the total amount of time you worked full-time?
[] Less than 2 months
[] 2 months to less than 6 months
[] 6 months to less than 1 year
[] 1 year to 3 years
[] More than 3 years
17. Is this change ongoing?
[] Yes
[] No
18. Did you ever change from working full-time to working part-time?
[] Yes
[] No →GO TO Question 22
19. When did you change from working full-time to working part-time?
Mark X all that apply.
[] At the time of diagnosis
[] During treatment
[] Less than one year after treatment was finished
[] One year or more after treatment was finished
20. What do you estimate was the total amount of time you worked part-time?
[] Less than 2 months
[] 2 months to less than 6 months
[] 6 months to less than 1 year
[] 1 year to 3 years
[] More than 3 years

Z1. Is this change ongoing:
[] Yes
[] No
22. Did you ever change from a set work schedule, where you start and end at the same time every day, to a flexible work schedule, where your start and end times vary from day-to-day?
[] Yes
[] No →GO TO Question 24
23. When did you change to a flexible work schedule?
Mark x all that apply.
[] At the time of diagnosis
[] During treatment
[] Less than one year after treatment was finished
[] One year or more after treatment was finished
24. Did you ever change to a less demanding job?
[] Yes
[] No \rightarrow GO TO Question 27
25. When did you change to a less demanding job?
Mark x all that apply.
[] At the time of diagnosis
[] During treatment
[] Less than one year after treatment was finished
[] One year or more after treatment was finished
26. Is the change ongoing?
[] Yes
[] No
27. Did you make any other type of work arrangements because of your cancer, its

treatment, or the lasting effects of that treatment?
[] Yes
[] No \rightarrow GO TO Question 28
If Yes, please describe:
28. Because of your cancer, its treatment, or the lasting effects of that treatment did you ever decide not to pursue an advancement or promotion?
[] Yes
[] No
29. Because of your cancer, its treatment, or the lasting effects of that treatment did you retire earlier than you had planned?
[] Yes →GO TO Section 2
[] No
30. Because of your cancer, its treatment, or the lasting effects of that treatment did you delay retirement beyond when you had planned?
[] Yes
[] No
Section 2. Other Aspects of Work

Please continue to think about all your work experiences from the time you were first diagnosed with cancer to now.

If you have had more than one type of cancer please think about your experiences across all of them. If that is not possible, please focus on the most severe, and if they were equally severe, please focus on the most recent.

31. Did you ever feel that your cancer, its treatment, or the lasting affects of that treatment interfered with your ability to perform any physical tasks required by

your job?
[] Yes
[] No
[] I was never required to perform physical tasks as part of my job
32. Did you ever feel that your cancer, its treatment, or the lasting effects of that treatment interfered with your ability to perform any mental tasks required by your job?
[] Yes
[] No
33. Did you ever feel that, because of your cancer, its treatment, or the lasting effects of that treatment, you were less productive at work?
[] Yes
[] No
34. Did you ever worry that, because of the effects of cancer on your health, you might be forced to retire or quit work before you are ready?
[] Yes
[] No
35. Did you ever stay at a job in part because you were concerned about losing your health insurance?
[] Yes
[] No →GO TO Question 37
36. Were you concerned about losing your health insurance because of your cancer?
[] Yes
[] No
37. Thinking about your work life or career, what effect has your experience with cancer, its treatment, or the lasting effects of that treatment had on it?
[] Mostly positive effect
[] Mostly negative effect

[] Equally positive and negative effect
[] Neither positive nor negative effect
38. Did your spouse or significant other ever stay at a job in part because he/s was concerned about losing health insurance for the family?
[] Yes
[] No
[] Does not apply

Protocol source: https://www.phenxtoolkit.org/protocols/view/320101