

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.

PROMIS® v2.0 Brief Profile Sexual Function and Satisfaction (Male)

Brief Profile Sexual Function and Satisfaction (Male)				
Item ID	Item Context	Item Stem	Responses and Scores	Screener Question
SFINT101	In the past 30 days	How interested have you been in sexual activity?	<input type="checkbox"/> 1 = Not at all <input type="checkbox"/> 2 = A little bit <input type="checkbox"/> 3 = Somewhat <input type="checkbox"/> 4 = Quite a bit <input type="checkbox"/> 5 = Very	
SFINT201	In the past 30 days	How often have you felt like you wanted to have sexual activity?	<input type="checkbox"/> 1 = Never <input type="checkbox"/> 2 = Rarely <input type="checkbox"/> 3 = Sometimes <input type="checkbox"/> 4 = Often <input type="checkbox"/> 5 = Always	
SFSCR202	In the past 30 days	Did you have any type of sexual activity? (Examples of sexual activity are masturbation, oral sex, and sexual intercourse.)	<input type="checkbox"/> 1 = No <input type="checkbox"/> 2 = Yes	
SFSCR204bpm	In the past 30 days	There are many reasons why people may not have had sexual activity during the month. What are the reasons why you did not have sexual activity in the past 30 days? Please read the list carefully and check every reason that applies to you, even if it	<input type="checkbox"/> 1 = Was not interested in having sexual activity <input type="checkbox"/> 2 = Difficulties with my erections (penis not hard or is painful) <input type="checkbox"/> 3 = Difficulties with orgasm/climax <input type="checkbox"/> 4 = Don't enjoy sexual activity <input type="checkbox"/> 5 = Health condition	Conditional on answer 1=no for SFSCR202 - no activity

		happened only one time during the past 30 days.	<input type="checkbox"/> 6 = No partner <input type="checkbox"/> 7 = Partner was away <input type="checkbox"/> 8 = Partner was not interested in sexual activity <input type="checkbox"/> 9 = Partner's health condition <input type="checkbox"/> 10 = Some other reason (Specify) _____	
SFEFn005r	In the past 30 days	How often were you able to get an erection (get hard) during sexual activity?	<input type="checkbox"/> 1 = Almost never/never <input type="checkbox"/> 2 = A few times (much less than half the time) <input type="checkbox"/> 3 = Sometimes (about half the time) <input type="checkbox"/> 4 = Most times (much more than half the time) <input type="checkbox"/> 5 = Almost always/always	Conditional on answer 2 = yes for SFSCR202
SFEFN008r	In the past 30 days	During sexual intercourse how often were you able to maintain your erection (stay hard) after you had penetrated (entered) your partner?	<input type="checkbox"/> 0 = Did not attempt intercourse <input type="checkbox"/> 1 = Almost never/never <input type="checkbox"/> 2 = A few times (much less than half the time) <input type="checkbox"/> 3 = Sometimes (about half the time) <input type="checkbox"/> 4 = Most times (much more than half the time) <input type="checkbox"/> 5 = Almost always/always	Conditional on answer 2 = yes for SFSCR202
SFOGA201	In the past 30 days	How often have you been able to have an orgasm/climax when you wanted to?	<input type="checkbox"/> 0 = Have not tried to have an orgasm/climax in the past 30 days <input type="checkbox"/> 1 = Never <input type="checkbox"/> 2 = Rarely <input type="checkbox"/> 3 = Sometimes <input type="checkbox"/> 4 = Often <input type="checkbox"/> 5 = Always	Conditional on answer 2 = yes for SFSCR202
SFOGP203	In the past 30 days	How satisfying have your orgasms or climaxes been?	<input type="checkbox"/> 0 = Have not had an orgasm/climax in the past 30 days <input type="checkbox"/> 1 = Not at all <input type="checkbox"/> 2 = A little bit	Conditional on answer 2 = yes for SFSCR202

			<input type="checkbox"/> 3 = Somewhat <input type="checkbox"/> 4 = Quite a bit <input type="checkbox"/> 5 = Very	
SFSAT101	In the past 30 days	How satisfied have you been with your sex life?	<input type="checkbox"/> 1 = Not at all <input type="checkbox"/> 2 = A little bit <input type="checkbox"/> 3 = Somewhat <input type="checkbox"/> 4 = Quite a bit <input type="checkbox"/> 5 = Very	Conditional on answer 2 = yes for SFSCR202
SFSAT102r	In the past 30 days	How much pleasure has your sex life given you?	<input type="checkbox"/> 1 = None <input type="checkbox"/> 2 = A little bit <input type="checkbox"/> 3 = Some <input type="checkbox"/> 4 = Quite a bit <input type="checkbox"/> 5 = A lot	Conditional on answer 2 = yes for SFSCR202

Protocol source: <https://www.phenxtoolkit.org/protocols/view/880802>