RADx Exec Comm Required CDEs2   PID 109

📖 Codebook ▾

📖 Data Dictionary Codebook

⌃ Collapse all instruments   Collapse all instruments

#	Variable / Field Name	Field Label / *Field Note*	Field Attributes (Field Type, Validation, Choices, Calculations, etc.)
	Instrument: Radx Cdes2 (radx_cdes2)	📲 Enabled as survey	⌃ Collapse Collapse
1	record_id	Record ID	text
2	identity	Section Header: *1. Identity* Project-specific identifier	text
3	race_ethn_race	Section Header: *2A. Race* What is your race? Mark one or more boxes. *Check all that apply*	checkbox 1 · race_ethn_race___1 · American Indian or Alaska Native 2 · race_ethn_race___2 · Black or African American 3 · race_ethn_race___3 · Asian 4 · race_ethn_race___4 · Native Hawaiian or Other Pacific Islander 5 · race_ethn_race___5 · White 96 · race_ethn_race___96 · Some other race Field Annotation: @NONEOFTHEABOVE = '99' PX011901 | https://www.phenxtoolkit.org/protocols/view/11901 | U.S. Census Bureau, Census 2020, Questionnaire | Reduced to OMB + specifiy, added 99, Prefer not to answer
4	race_ethn_hispanic	Section Header: *2B. Ethnicity* Are you of Hispanic or Latino origin?	radio 1 · Yes, of Hispanic or Latino origin 0 · No, not of Hispanic or Latino origin Field Annotation: PX011901 | https://www.phenxtoolkit.org/protocols/view/11901 | U.S. Census Bureau, Census 2020, Questionnaire | Reduced to OMB, Added 99, Prefer not to answer
5	age_yrs	Section Header: *3. Age* Age For babies less than 1 year old, write 0 as the age. *Years*	text (integer, Min: 0, Max: 110) Field Annotation: Census | https://www2.census.gov/programs-surveys/acs/methodology/questionnaires/2020/quest20.pdf | Census ACS
6	bio_sex_birth	Section Header: *4. Sex* What is your biological sex assigned at birth?	radio 0 · Male 1 · Female 2 · Intersex 96 · None of these describe me Field Annotation: PX011601 |https://www.phenxtoolkit.org/protocols/view/11601 | HHS/CDC COVID Lab Reporting Specifications | Removed 'Biological' term

		7	edu_years_of_school	Section Header: *5. Education* How many years of education have you completed?	dropdown (autocomplete) 	0	0
1	1
2	2
3	3
4	4
5	5
6	6
7	7
8	8
9	9
10	10
11	11
12	12
13	13
14	14
15	15
16	16
17	17
18	18
19	19
20	20 +	 Field Annotation: |||Recommendation from RADx-UP projects
		8	zipcode	Section Header: *6. Domicile* What is your zip code? *5-digit zip code*	text Field Annotation: |||New Question
		9	current_employment_status	Section Header: *7. Employment* Are you employed?	radio | 1	Employed in a permanent position
2	Employed in a temporary position
0	Not currently employed	 Field Annotation: PX011301|https://www.phenxtoolkit.org/protocols/view/11301|Study of Income Dynamics (PSID), 2007||Added 99, Prefer not to answer
		10	hi_coverage_type	Section Header: *8. Insurance Status* What kind of health insurance do you have?	radio | 1	Private insurance
2	Public insurance
0	None	 Field Annotation: Adapted for CEAL Program from DMACS= COVID 19 Survey. https://detroitsurvey.umich.edu/COVID 19-survey-and-resources/. Further simplified.
		11	disability_deaf	Section Header: *9. Disability Status* Are you deaf or do you have serious difficulty hearing?	yesno | 1	Yes
0	No	 Custom alignment: RH Field Annotation: CDC Disability|https://www.cdc.gov/ncbddd/disabilityandhealth/data
		12	disability_blind	Are you blind or do you have serious difficulty seeing, even when= wearing glasses?	yesno | 1	Yes
0	No	 Custom alignment: RH Field Annotation: CDC Disability|https://www.cdc.gov/ncbddd/disabilityandhealth/data

13	disability_decisions	Because of a physical, mental, or emotional condition, do you have= serious difficulty concentrating, remembering, or making= decisions?	yesno 1 Yes 0 No Custom alignment: RH Field Annotation: CDC Disability|https://www.cdc.gov/ncbddd/disabilityandhealth/data
14	disability_walking	Do you have serious difficulty walking or climbing stairs?	yesno 1 Yes 0 No Custom alignment: RH Field Annotation: CDC Disability|https://www.cdc.gov/ncbddd/disabilityandhealth/data
15	disability_dress	Do you have difficulty dressing or bathing?	yesno 1 Yes 0 No Custom alignment: RH Field Annotation: CDC Disability|https://www.cdc.gov/ncbddd/disabilityandhealth/data
16	disability_errands	Because of a physical, mental, or emotional condition, do you have= difficulty doing errands alone such as visiting a doctor's office or= shopping?	yesno 1 Yes 0 No Custom alignment: RH Field Annotation: CDC Disability|https://www.cdc.gov/ncbddd/disabilityandhealth/data
17	medhx_vaping_use	Section Header: *10. Medical history* Vaping use	yesno 1 Yes 0 No Custom alignment: RH Field Annotation: RADx-UP projects
18	medhx_nicotine_use	Nicotine use	yesno 1 Yes 0 No Custom alignment: RH Field Annotation: RADx-UP projects
19	medhx_alcohol_use	Alcohol Use	yesno 1 Yes 0 No Custom alignment: RH Field Annotation: RADx-UP projects
20	medhx_asthma	Asthma	yesno 1 Yes 0 No Custom alignment: RH
21	medhx_cancer	Cancer	yesno 1 Yes 0 No Custom alignment: RH Field Annotation: JHU C4WARD|https://www.phenxtoolkit.org/toolkit_content/PDF/JHU from JHU Community Survey

	22	medhx_cvd	Cardiovascular disease (CVD or heart disease)	yesno 1 Yes 0 No Custom alignment: RH Field Annotation: JHU C4WARD | https://www.phenxtoolkit.org/toolkit_content/PDF/JHU from JHU Community Survey
	23	medhx_chronickd	Chronic kidney disease (CKD)	yesno 1 Yes 0 No Custom alignment: RH Field Annotation: JHU C4WARD | https://www.phenxtoolkit.org/toolkit_content/PDF/JHU from JHU Community Survey
	24	medhx_chroniclung	Chronic lung disease	yesno 1 Yes 0 No Custom alignment: RH Field Annotation: RADx-UP projects
	25	medhx_diabetes	Diabetes	yesno 1 Yes 0 No Custom alignment: RH Field Annotation: JHU C4WARD | https://www.phenxtoolkit.org/toolkit_content/PDF/JHU from JHU Community Survey
	26	medhx_htn	Hypertension (HTN, high blood pressure)	yesno 1 Yes 0 No Custom alignment: RH Field Annotation: JHU C4WARD | https://www.phenxtoolkit.org/toolkit_content/PDF/JHU from JHU Community Survey
	27	medhx_immunosup	Immunosuppressive condition	yesno 1 Yes 0 No Custom alignment: RH Field Annotation: JHU C4WARD | https://www.phenxtoolkit.org/toolkit_content/PDF/JHU from JHU Community Survey- Update with reference if exists
	28	medhx_mentalillness	Serious mental illness	yesno 1 Yes 0 No Custom alignment: RH Field Annotation: RADx-UP projects
	29	medhx_sicklecell	Sickle Cell Anemia	yesno 1 Yes 0 No Custom alignment: RH Field Annotation: JHU C4WARD | https://www.phenxtoolkit.org/toolkit_content/PDF/JHU from JHU Community Survey -Update with reference if exists
	30	medhx_preg_status	Pregnancy status	yesno 1 Yes 0 No Custom alignment: RH

| 31 | covid_cough | Section Header: *11. Symptoms*

Cough | yesno

| 1 | Yes |
0	No	 Custom alignment: RH Field Annotation: |https://www.cdc.gov/screening/index.html|CDC COVID-19= Screening | modified to 1 week based on feedback from= RADx-UP projects | Only for projects that are providing= acute COVID-19 testing
32	covid_fever	Fever	yesno | 1	Yes
0	No	 Custom alignment: RH Field Annotation: |https://www.cdc.gov/screening/index.html|CDC COVID-19 Screening
33	covid_diffbreath	Shortness of breath or difficulty breathing	yesno | 1	Yes
0	No	 Custom alignment: RH Field Annotation: |https://www.cdc.gov/screening/index.html|CDC COVID-19 Screening
34	covid_headache	Headache	yesno | 1	Yes
0	No	 Custom alignment: RH Field Annotation: |https://www.cdc.gov/screening/index.html|CDC COVID-19 Screening
35	covid_myalgia	Muscle ache	yesno | 1	Yes
0	No	 Custom alignment: RH Field Annotation: |https://www.cdc.gov/screening/index.html|CDC COVID-19 Screening
36	covid_olfactory	New loss of taste or smell	yesno | 1	Yes
0	No	 Custom alignment: RH Field Annotation: |https://www.cdc.gov/screening/index.html|CDC COVID-19 Screening
37	covid_chills	Chills	yesno | 1	Yes
0	No	 Custom alignment: RH
38	covid_fatique	Excessive fatique	yesno | 1	Yes
0	No	 Custom alignment: RH Field Annotation: |https://www.cdc.gov/screening/index.html|CDC COVID-19= Screening | modified to 1 week based on feedback from= RADx-UP projects

	39	covid_nausea	Nausea/vomiting	yesno 1 Yes 0 No Custom alignment: RH Field Annotation: |https://www.cdc.gov/screening/index.html|CDC COVID-19= Screening | modified to 1 week based on feedback from= RADx-UP projects
	40	covid_diarrhea	Diarrhea	yesno 1 Yes 0 No Custom alignment: RH
	41	covid_abpain	Abdominal Pain	yesno 1 Yes 0 No Custom alignment: RH Field Annotation: |From NIH communications
	42	covid_skinrash	Skin Rash	yesno 1 Yes 0 No Custom alignment: RH Field Annotation: |From NIH communications
	43	covid_conjunctivitis	Conjunctivitis	yesno 1 Yes 0 No Custom alignment: RH Field Annotation: |https://www.cdc.gov/screening/index.html|CDC COVID-19 Screening
	44	self_report_desc	Section Header: *12. Health status* What is your height in feet and inches?	descriptive
	45	self_height_feet	Feet *feet*	text (integer, Min: 0, Max: 10) Field Annotation: PX020704|https://www.phenxtoolkit.org/protocols/view/20704? origin=search|2007-2008 National Health and Nutritional Examination Survey (NHANES) Weight History Questionnaire
	46	self_height_inches	Inches *inches*	text (integer, Min: 0, Max: 11) Field Annotation: PX020704|https://www.phenxtoolkit.org/protocols/view/20704? origin=search|2007-2008 National Health and Nutritional Examination Survey (NHANES) Weight History Questionnaire
	47	self_weight_lbs	What is your weight in pounds? *lbs*	text (number, Min: 0, Max: 635) Field Annotation: PX021502|https://www.phenxtoolkit.org/protocols/view/21502? origin=search||2007-2008 National Health and Nutrition Examination Survey (NHANES) Anthropometry Procedures Manual
	48	self_health_status	Would you say that (your) health in general is excellent, very good, good, fair, or poor?	radio 1 Excellent 2 Very good 3 Good 4 Fair 5 Poor Field Annotation: PX770101
	49	radx_cdes2_complete	Section Header: *Form Status* Complete?	dropdown 0 Incomplete 1 Unverified 2 Complete