



HCHS/SOL Visit 2- Pregnancy Complications

PCE- QxQ

General Instructions

A. The pregnancy complications history questions are designed to ask about pregnancies that occurred after the first SOL visit date. Each PCE form captures information about a *single* pregnancy and/or delivery. The form can capture information on more than one baby in the case of childbirths with multiple babies (twins, triplets, quadruples). Please note refusals in the DMS as refusals and not as unsure.

Question by Question Instructions

Q1 We will start with the first of these pregnancies [this pregnancy (if only one pregnancy)] that occurred after SOL Visit 1 on [Date] that lasted more than 6 months.

Use a new form for each pregnancy.

1a Pregnancy number

This is to identify the order of the pregnancy since the first visit. Enter a '1' for the first pregnancy that lasted 6 months or longer and was after the initial SOL visit then complete the remaining questions. Loop back to question 1a using a *second* PCE form, if there is another pregnancy that lasted 6 months or longer and was after the initial SOL visit, and enter '2', until all pregnancies that lasted 6 month or longer and after the initial SOL visit are entered.

1b What was the date of this birth [or when did this pregnancy end]?

This is to record the date the pregnancy ended, whether it was a live birth or stillbirth. If the baby died prior to delivery then this still refers to the date of delivery of the baby. If there was more than one baby then it is the delivery of the last baby.

1c For this pregnancy, did you receive prenatal care, and if so was care received both inside and outside of the United States, in the United States only, or outside the United States only? Choose only one answer.

1d Did you have high blood pressure or hypertension during this pregnancy?

Ask if the participant was told by her health care provider that she had high blood pressure or hypertension during this pregnancy. If they had high blood pressure before this pregnancy, AND during then pregnancy then answer YES.

d1. Did you have high blood pressure or hypertension before this pregnancy and at a time when you were not pregnant?

Ask if the participant was told by her health care provider that she had high blood pressure or hypertension before this pregnancy and at a time when they were not pregnant. Make sure to emphasize "before this pregnancy". We are trying to understand if the participant has high blood pressure outside of pregnancy. They may have had high blood pressure *during* prior pregnancies, but not when they were not pregnant, in which case the answer is NO.

1e Did you have preeclampsia or toxemia during this pregnancy?

Ask if the participant was told by her health care provider that she had preeclampsia or

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toxemia (if unclear mention that this is typically identified through an increase in blood pressure and/or protein in urine). If they had pre-eclampsia then developed eclampsia then answer YES. If they just had eclampsia but pre-eclampsia was not detected then answer NO.

1f Did you have eclampsia or a seizure during this pregnancy?

Ask if the participant was told by her health care provider that she had eclampsia or had a seizure during this pregnancy (if unclear then mention that eclampsia is typically identified through convulsions and seizures during pregnancy).

1g Did you have diabetes or high blood sugar during this pregnancy?

Ask if the participant was told by her health care provider that she had diabetes during this pregnancy, or that her blood sugar was high? (if unclear mention that this is typically identified through high blood sugar, usually after drinking a sweet drink at a prenatal visit). If she had diabetes before and during pregnancy then answer YES.

1.g1. Did you take medication for your blood sugar during this pregnancy? If YES, then clarify if this was pills for diabetes or insulin or both. Choose only one answer.

1.g2. Did you have diabetes before this pregnancy [and at a time when you weren't pregnant]? Ask them if they had diabetes before this pregnancy. Do not include gestational diabetes from an earlier pregnancy. If only prior gestational diabetes then answer NO. If they report that they had high blood sugar before this pregnancy that was not treated with medication (diet controlled diabetes) then answer, YES.

1h During the last 3 months of your pregnancy, did you smoke daily, occasionally, or not at all? The goal of this question is to capture cigarette smoking. If they report smoking e-cigarettes or vapor only then do not include this as cigarette smoking, and answer NO. IF they report smoking clove cigarettes or marijuana then answer NO.

1i In the three months before your pregnancy, or before you realized you were pregnant, did you smoke daily, occasionally, or not at all?

The goal of this question is to capture cigarette smoking. If they report smoking e-cigarettes or vapor only then do not include this as cigarette smoking, and answer NO. IF they report smoking clove cigarettes or marijuana then answer NO.

1j How much weight did you gain during this pregnancy? Enter weight in pounds or kilograms depending on how they report it to you. If they are unsure then enter "999".

1ja. Choose pounds or kilograms for the weight that was entered in 1j.

Q2 How many months or weeks had you been pregnant when [the baby was born/the babies were born/the pregnancy ended]?

This question is to determine the amount of time the woman has been pregnant at the time that she gave birth or that the pregnancy ended. Enter "99" if she is unsure of the number of weeks or months, and skip question 2a.1 that is to indicate weeks or months, then answer question 3.

Q3 Was the baby or were the babies born alive, or was this a miscarriage, an ectopic pregnancy, stillbirth or other outcome? Choose only one. Note that if at least one baby

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was born alive then choose live birth and continue on with Q3a.

A miscarriage would be loss of a baby prior to 24 weeks of pregnancy. Miscarriage is when a pregnancy isn't viable, that is the embryo or fetus dies in the uterus within the early stages of pregnancy.

A stillbirth would be loss of a baby at 24 weeks or later in a pregnancy. Still birth is the death of the fetus after week 24 when the fetus is viable. Still birth (or Still born) is also used to describe an infant dead at birth.

An ectopic or tubal pregnancy is when the embryo or fetus implants somewhere outside of the uterus, usually in the fallopian tube. This likely results in a "miscarriage", but we would like to distinguish this as an ectopic pregnancy rather than a miscarriage.

We did not include abortion as an option due to the sensitivity of discussing abortion; however participants can indicate "other" for abortion. If they report a miscarriage, tubal or ectopic pregnancy, other, refuse, or unsure/don't know then go to the end of the form. IF they report stillbirth then answer questions 4 and 5 and go to the end. If they report a live birth then continue on with Q4.

3a. If at least one live birth indicated in #3, then how many babies were born from this pregnancy? If there was a live child and a stillbirth then the answer is 2.

Q4 Was this birth by C-section or vaginal delivery (choose one)? If they tried vaginal delivery and ended up with a C-section then answer C-section. Or if they had multiples, and one by vaginal then required C-section then answer C-section.

Q5 Where did you give birth (check one)?

Ask where the birth occurred. Check only one answer choice. If they started the delivery at home or in a birthing center then required the hospital then answer "in a hospital". If this was at home or somewhere other than a hospital/birthing center, go to question 6. So answer with the highest level of care that was needed for delivery [from low to high, home ->birthing center ->hospital].

5a-c Record the information for birthing center or hospital, and record the name that was provided at the time of the delivery.

Q6 How many babies were born during this birth?

Ask how many babies were born during this birth, as in was this twins or triplets, or just a single birth (most common answer). This can be automatically filled in from Question 3a.

If multiple babies in the pregnancy then say "I want to ask you questions about each baby starting with the first born. Take your time to remember."

Q7. For each baby from this pregnancy mentioned in Q6, record the information required in table 7a-7e, thru 10a-10e depending on the number of babies. Consider going in order of delivery but not necessary.

7a. Was this baby born alive or a stillbirth? Record live = 1 if born alive, and record stillbirth = 0 if the baby had died by the time of delivery, called a stillbirth.

If Stillbirth reported, then skip to question 8 for baby 2, or if no other baby in this pregnancy then to the end of the questionnaire.

7b. What was the gender of this baby? Record M=1 for male, or F=2 for female. Unsure is available as an option.

7c. [For live births only] How much did this baby weigh at delivery? Record weight in lbs for c. or in ounces for c1 or in grams in c2. A weight may also be reported in pounds and ounces, such as 6 lbs and 2 ounces, and in that case, use both boxes. If unsure of weight then enter NA (Not Applicable) in CDART and instead answer question 7d. If a weight is provided for 7c then CDART will automatically skip 7d.

7d. If unable to provide an exact weight in question 7c, then ask if they know whether the baby weighed less than 5 and ½ pounds (or 2500 grams) or between 5 and ½ and 9 pounds (or 4000 grams), or more than 9 pounds? If still unsure then choose “unsure”.

7e. Are you currently breastfeeding this baby or pumping milk? We are interested in whether the baby is still receiving breast milk, so if the mother is pumping and providing it to the baby then answer “Yes, I am still breastfeeding this baby”. If not, then choose between “No, never breastfed this baby” or “No, I stopped breastfeeding this baby”. Note that if the mother pumped to feed her baby and has now stopped that you would choose “No, I stopped breastfeeding this baby”. If unsure then choose “unsure”. For those that answer “No, I stopped breastfeeding this baby”, then answer question 7e.1. For those that never breastfed this baby then skip to question 7e.3, as we still want to know if they wanted to breastfeed. If they are unsure or are still breastfeeding then skip to question 8 for the next baby or to the end of the questionnaire if there isn’t another baby. If they are still breastfeeding the baby, then skip to question e4.

7e.1 How old was this baby when you completely stopped breastfeeding or pumping milk? Ask how old the baby was when the participant was no longer breastfeeding or expressing or pumping milk and giving it to this baby. Record the age that she stopped expressing or pumping milk, even if the baby was fed stored milk after she stopped producing milk. If unsure then enter “99”, and skip Q7e.2.

7e.2 Indicate whether the provided answer in 7e.1 is in days, weeks or months.

7e.3 Did you breastfeed as long as you wanted to?

This question determines if the participant was able to produce milk for her baby for as long as she wanted to, and was able to provide it to the baby. Again this includes pumping milk and providing it to the baby. For those that did not breastfeed then we still would like to know if they wanted to breastfeed and were unable or if they chose not to breastfeed. In this case, you could say, “I know you said you did not breastfeed this baby, so we want to ask did you want to breastfeed, and then weren’t able to?”

7e.4 How old was this baby when first fed formula or solid foods?

This question determines how old the baby was when formula or solid foods were introduced. If they are unsure then enter “99”, and skip Q7e.5.

7e.5 Indicate whether the answer provided in 7e.4 was reported in days, weeks or month. If the answer to 7e.4 was “99” for unsure then do not choose weeks or months.

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This question is the end of the form unless there is another baby in this pregnancy.
Continue to answer these questions for each baby.