



HARVARD
MEDICAL
SCHOOL

NURSES' HEALTH STUDY II

SPECIAL HIGH SCHOOL QUESTIONNAIRE



HARVARD
SCHOOL of
PUBLIC HEALTH

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Dear Colleague:

Thank you for completing the 1997 Nurses' Health Study II questionnaire. Enclosed you will find a copy of the new NHS newsletter.

This year, in a one-time change from our usual biennial questionnaires, we are sending this **special** questionnaire regarding your diet during your high school years. You may recall that on the 1997 questionnaire, you indicated your willingness to complete a survey about the foods you ate during high school.

Accurate data about teenage dietary intake in relation to development of disease in adulthood are very scarce. Your answers, along with those of the other NHS II members who complete this form, will create a large and detailed source of information about teenage diet for future study!

I realize that for most of us, high school seems like a *long* time ago. While it may seem difficult to recall with great precision how often each of these foods was eaten, we are confident that your best estimates will prove to be quite informative.

As always, your answers will be kept strictly confidential and used only for medical statistical purposes. I look forward to receiving your completed form in the coming weeks. A postage-paid envelope is enclosed for your convenience.

In closing, let me thank you again for your continuing dedicated involvement with the Nurses' Health Study II. Your participation makes you part of a very special and important group and for that, we are grateful!

Sincerely,

Walter Willett

Walter Willett, M.D.
Professor of Epidemiology, Nutrition and Medicine

P.S. We look forward to receiving your completed questionnaire in the coming weeks. Your reply is important and we really appreciate your enthusiastic participation!

INSTRUCTIONS

Please use an ordinary No. 2 pencil (if at all possible). Remember that all the questions about your diet refer to the years that you attended high school (approximately ages 13 to 18).

Please keep all write-in responses **within** the spaces provided. Write any comments on a separate sheet.



Thank you for completing this special Nurses' Health Study II Questionnaire.

Please tear off the cover letter (to preserve confidentiality) and return the questionnaire in the enclosed postage-paid envelope.

If you need to make changes or corrections to your name/address, please note them on this cover letter and enclose it with your completed questionnaire.

Each of the following questions asks about your dietary habits when you were in high school (approximately ages 13 to 18). Please use your best estimate of your diet during that period for each question.

PLEASE USE PENCIL!

1. Did you usually take a multi-vitamin when you were in high school?

No Yes → If Yes, a) How many tablets did you take per week?
 2 or less 3-5 6-9 10 or more

2. Did you usually take vitamin C tablets or pills when you were in high school?

No Yes → If Yes, a) How many did you take per week?
 2 or less 3-5 6-9 10 or more

3. Which cold breakfast cereal did you eat most often between ages 13 and 18?

Didn't eat cold breakfast cereal. Specify brand & type (e.g., "Kellogg's Frosted Flakes")

4. For each food listed, fill in the circle indicating how often on average you used the amount specified between ages 13 and 18.

		Never, or less than once per month	1-3 per month	1 per week	2-4 per week	5-6 per week	1 per day	2-3 per day	4-5 per day	6+ per day
BEVERAGES										
Consider the serving size as 1 glass, bottle or can for these carbonated beverages.	Diet soda with caffeine, e.g., Tab	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> W	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> D	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
	Diet soda without caffeine, e.g., Diet 7-UP	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> W	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> D	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
	Soda with caffeine, e.g., Coke	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> W	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> D	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
	Soda without caffeine, e.g., 7-UP	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> W	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> D	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
	Iced tea (1 glass)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> W	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> D	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
	Hot tea (1 cup)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> W	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> D	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
	Coffee - not decaf. (1 cup)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> W	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> D	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

5. Between ages 13 and 18, what type of milk did you usually drink?

Whole milk Powdered milk Lowfat milk Skim/Nonfat milk Don't know Didn't drink milk

6. For each food listed, fill in the circle indicating how often on average you used the amount specified between ages 13 and 18.

		Never, or less than once per month	1-3 per month	1 per week	2-4 per week	5-6 per week	1 per day	2-3 per day	4-5 per day	6+ per day
DAIRY										
	Chocolate milk (8 oz. glass or carton)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> W	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> D	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
	Milk (8 oz. glass or carton)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> W	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> D	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
	Instant breakfast drink (1 packet)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> W	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> D	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
	Yogurt (1 cup)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> W	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> D	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
	Cottage or ricotta cheese	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> W	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> D	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
	Cheese, include grilled cheese sandwich, cheeseburgers, etc. (1 slice or 1 oz.)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> W	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> D	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
	Cream cheese (1 oz.)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> W	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> D	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
	Butter (1 pat) - NOT margarine	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> W	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> D	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
	Margarine (1 pat) - NOT butter	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> W	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> D	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

7. Between ages 13 and 18, what form and brand of margarine did your family use?

None Form? Stick Tub Don't know

What specific brand of margarine (e.g., Fleischman's or Blue Bonnet)?

8. Between ages 13 and 18, what type of fat did your family usually use . . .

For frying and sautéing at home?

Real butter Margarine Olive oil Vegetable oil Vegetable shortening (Crisco) Lard

For baking at home?

Real butter Margarine Olive oil Vegetable oil Vegetable shortening (Crisco) Lard

9. How often did you eat deep fried chicken, fish, shrimp or clams away from home during high school?

Less than once a week 1-3 times per week 4-6 times per week Daily

10. Is this your correct date of birth? →

Yes

No → If no, please write correct date.

Month / Day / Year

1	1	1	1	1	1	1	1	6	98	A	
2	2	2	2	2	2	2	2	7	99	B	
4	4	4	4	4	4	4	4	3	8	C	
8	8	8	8	8	8	8	8	4	9	11	
P	P	P	P	P	P	P	P	5	10	12	E

← THIS IS YOUR ID

Each of the following questions asks about your dietary habits when you were in high school (approximately ages 13 to 18).

11. For each food listed, fill in the circle indicating how often on average you used the amount specified between ages 13 and 18.

MAIN DISHES	Never, or less than once per month	1-3 per month	1 per week	2-4 per week	5-6 per week	1 per day	2-3 per day	4-5 per day	6+ per day
Eggs, including yolk (1)	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Chicken or turkey, fried, roasted or baked (4-6 oz.)	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Chicken or turkey as a sandwich or mixed dish, e.g., chicken salad, sliced turkey sandwich, chicken casserole	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Bacon (2 slices)	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Hot dogs (1)	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Processed meats, e.g., "Spam," salami, bologna, sausage, etc. (1 piece or slice)	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Hamburger (1)	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Meatloaf (1 slice)	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Beef or lamb as main dish, e.g., steak or roast (4-6 oz.)	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Pork as a main dish, e.g., ham or chops (4-6 oz.)	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Beef, pork or lamb as a sandwich or mixed dish, e.g., stew, "Hamburger Helper," lasagna, meatballs, chili, tacos	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Pasta (such as macaroni and cheese, spaghetti) (1 cup)	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Pizza (2 slices)	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Canned tuna fish (3-4 oz.) in sandwich, casserole, etc.	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Dark meat fish, e.g., mackerel, salmon, sardines, bluefish, swordfish (3-5 oz.)	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Breaded fish cakes, pieces, or fish sticks (store bought - 1 serving)	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Other fish (3-5 oz.)	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Shrimp, lobster, scallops as main course (1 serving)	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Chowder or cream soup (1 bowl)	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Liver: beef, calf or pork (4 oz.)	<input type="radio"/> Never	<input type="radio"/> 1-5/yr.	<input type="radio"/> 6-10/yr.	<input type="radio"/> 1/mo.	<input type="radio"/> 2-3/mo.	<input type="radio"/> 1/wk or more			
Liver: chicken or turkey (1 oz.)	<input type="radio"/> Never	<input type="radio"/> 1-5/yr.	<input type="radio"/> 6-10/yr.	<input type="radio"/> 1/mo.	<input type="radio"/> 2-3/mo.	<input type="radio"/> 1/wk or more			

BREAD/CEREAL/GRAINS	Never, or less than once per month	1-3 per month	1 per week	2-4 per week	5-6 per week	1 per day	2-3 per day	4-5 per day	6+ per day
Cold breakfast cereal (1 bowl)	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>					
Hot breakfast cereal, like oatmeal, grits (1 bowl)	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>					
White bread (include bread for sandwiches, toast, French toast, etc.) (1 slice)	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>					
Dark bread (1 slice)	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>					
English muffins or bagels (1)	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>					
Muffin (1)	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>					
Cornbread, corn toasties (1 square)	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>					
Biscuit/roll (1)	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>					
Rice (1 cup)	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>					
Tortilla (1)	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>					
Pancakes (2) or waffles (1)	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>					
French fries (1 serving)	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>					
Potatoes (1 baked, 1 boiled or 1 cup mashed)	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>					

12. Between ages 13 and 18, how much of the visible fat on your beef, pork or lamb did you remove before eating?

- Removed all visible fat Removed most Removed small part of fat Removed none Didn't eat meat

The following questions asks about your dietary habits when you were in high school (approximately ages 13 to18).

14. For each food listed, fill in the circle indicating how often on average you used the amount specified between ages 13 and 18.

	Never, or less than once per month	1-3 per month	1 per week	2-4 per week	5-6 per week	1 per day	2-3 per day	4-5 per day	6+ per day
SNACK FOODS/DESSERTS									
Potato chips (small bag or 1 oz.)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> W	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> D	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Corn chips/Doritos (small bag or 1 oz.)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> W	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> D	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Popcorn (small bag or 1 cup)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> W	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> D	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Pretzels (small bag or 5 large twist)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> W	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> D	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Peanuts (small bag or 1 oz.)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> W	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> D	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Other nuts (small bag or 1 oz.)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> W	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> D	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Seeds (1 oz. or 1/2 cup) e.g., Sunflower or Pumpkin	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> W	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> D	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Graham crackers (2 big or 4 small)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> W	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> D	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Crackers, like Wheat Thins or Ritz (5)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> W	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> D	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Poptarts (1)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> W	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> D	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Danish, sweetrolls, pastry (1)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> W	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> D	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Donuts (1)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> W	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> D	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Snack cakes, like Twinkies (1 package)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> W	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> D	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Cake (1 slice)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> W	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> D	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Cookies (1)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> W	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> D	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Brownies (1)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> W	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> D	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Pie (1 slice)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> W	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> D	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Chocolate (1 bar or packet) e.g., Hershey's or M&M's	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> W	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> D	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Other candy bars (1 bar) e.g., Milky Way, Snickers	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> W	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> D	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Candy without chocolate (1 pack) e.g., Sweet-tarts	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> W	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> D	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Jello (1/2 cup)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> W	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> D	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Pudding (1/2 cup)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> W	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> D	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Sherbet (1/2 cup)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> W	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> D	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Ice cream (1 cup)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> W	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> D	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Milkshake or frappe (1)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> W	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> D	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Popsicles (1)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> W	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> D	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

15. During high school, was there ever a period when you took laxatives or made yourself vomit in order to lose weight or keep from gaining weight?

- No Yes, but less than monthly Yes, 1-3 times a month Yes, at least weekly

16. During high school, was there ever a period when you went on eating binges (i.e., eating so much food that you would have been embarrassed if others saw you)?

- No Yes, but less than monthly Yes, 1-3 times a month Yes, at least weekly

If Yes, a) During these eating binges, did you feel out of control, like you couldn't stop even if you wanted to?
 Yes No

17. During high school, was there ever a period when you think that you suffered from:

- Anorexia nervosa Bulimia nervosa Neither

18. At what age did you begin drinking alcoholic beverages at least once per month?

- <12 12-14 15-17 18-20 21+ Never

19. During your high school years, in a typical week, how many days did you consume an alcoholic beverage of any type?

- Zero days 1 day 2 days 3 days 4 days 5 days 6 days 7 days

20. During this same age period, on average, how many drinks per day did you have on those days that you consumed alcoholic beverages (i.e., total number of beers, plus 4 oz. glasses of wine, plus shots of liquor)?

- 0 1 2 3 4 5 6 7 8 9 10 or more

21. At what age did you attain your maximum height (i.e., when did you stop growing)?

- <14 14 15 16 17 18+ Don't know

This last question does **NOT** refer to your high school diet!

22. Do you currently have an internet e-mail address either at home or at work?

- Yes No Please write your e-mail address in the box so we can send you occasional updates on the progress of the Nurses' Health Study III!

We will not release your e-mail address to anyone!

Please write neatly and carefully differentiate numbers and letters (e.g., 1 vs. l)