# FITBIR Demographics Form

## Main Group Administration Questions

Study Name:

1. GUID:

2. Subject ID Number:

3. Age in Years:

4. Visit Date:

5. Site Name:

6. Days since Baseline:

7. Case Control Indicator

Case

Control

Unknown

## Form Administration

8. What time frame do the questions in this form refer to?

*Select one. If other is selected, please write in response:*

After injury

At time of assessment

Before injury

Last 2 weeks

Last 6 months

Last 24 hours

Last month

Last week

Last year

Prior to death

Since last interview

Time of injury

Other, specify:

9. Who filled out this form?

*Select one. If other is selected, please write in response:*

Brother

Chart/Medical Record

Daughter

Father

Friend

Mother

Participant/Subject

Physician

Sister

Son

Spouse

Other, specify:

## Demographics Questions

10. What is the subject’s date of birth?

YYYY-MM-DD

*Write in response.*

11. What is the subject’s gender?

*Select one:*

Female

Male

Not reported

Unknown

Unspecified

12. What is the subject’s sex or genotype?

*Select one. If other is selected, please write in response:*

XX

XY

XXX

XXY

XYY

Unknown

Unspecified

Other, specify:

13. What is the subject’s handedness preference, or dominant hand?

*Select one:*

Both

Left

Right

Unknown

14. What is the subject’s racial background (as defined by OMB)?

*Select all that apply.*

American Indian or Alaska Native

Asian

Black or African-American

Native Hawaiian or Other Pacific Islander

White

Not Reported

Unknown

15. What is the subject’s racial background (expanded categories)?

*Select all that apply.*

Alaskan Native

Black African

Black African American

Black Afro Caribbean

Far Eastern Asian

Hawaiian

Inuit

North American Indian

Pacific Islander

South/Central American Indian

South Asian

Western Asian

White African

White Australian

White European

White Middle Eastern

White North American

White South American

Other

Not Reported

16. What is the subject’s ethnic background?

*Select one: If other is selected, please write in response:*

Hispanic or Latino

Not Hispanic or Latino

Not reported

Unknown

Other, specify:

17. What is the subject’s birth country (use ISO code)?

For full list of codes, see BirthCntryISOCode variable in the data dictionary and provide information in the Other category

*Select one: If other is selected, please write in response:*

Australia (AU)

Canada (CA)

Mexico (MX)

United Kingdom (GB)

USA (US)

Other, specify:

18. What is the subject’s birth country name?

*Write in response.*

19. What is the subject’s current country of residence?

For full list of codes, see CntryResdnceISOCode variable in the data dictionary and provide information in the Other category

*Select one: If other is selected, please write in response:*

Australia (AU)

Canada (CA)

Mexico (MX)

United Kingdom (GB)

USA (US)

Other, specify:

20. What is the subject’s current country of residence name?

*Write in response.*

21. What is the subject’s primary language (use ISO code)?

*Select one: If other is selected, please write in response:*

eng (English)

spa (Spanish)

sgn (Sign Language)

chi (Chinese)

fre (French)

ger (German)

Other, specify

22. What are the ISO codes for each language the subject can speak fluently? The ISO codes represent the international codes for different countries.

*Write in response.*

23. Please list each language the subject can speak fluently:

*Write in response.*

24. What are the ISO codes for each language the subject can write fluently?

*Write in response.*

25. Please list each language the subject can write fluently:

*Write in response.*

26. What is the subject’s marital status?

*Select one: If other is selected, please write in response:*

Divorced

Domestic partnership

Married

Never married

Separated

Widowed

Other, specify:

27. If an adult: Who is the primary person living with the subject?

*Select one: If other is selected, please write in response:*

Alone

Child/children

Group living situation, boarding house

Homeless

Military barracks

Other (including correctional facility inmates)

Other patients (in hospital/nursing home)

Other residents

Parents

Personal care attendant

Roommates/friends

Siblings

Significant other partner

Spouse (including common law partner)

Unable to obtain information

Other, specify:

28. If a juvenile: What is the subject’s living situation?

*Select one: If other is selected, please write in response:*

Adoptive parents

Foster care

Other family members

Parents

Unable to obtain information

Other, specify:

29. What was the subject’s living situation prior before injury?

*Select one: If other is selected, please write in response:*

Homeless/Lives in shelter

Lives alone

Lives in group home/assisted living

Lives with friend(s) or roommate(s) or cohabiting

Lives with spouse and/or other family member(s)

Data Missing/Refused/Unknown/Refused

Other, specify:

30. What is the count of other people with whom the subject currently lives, cohabits, or stays?

*Write in response.*

31. What is the number of dependent children living in the subject’s household?

*Write in response.*

32. What is the total number of dependent children the subject has?

*Write in response.*

33. How would you describe the subject’s current location of residence?

*Select one:*

A big city (population greater than or equal to 250,000 including suburbs/outskirts)

A small town/small city (population 500 - 10,000)

Rural area (population less than 500)

Unknown

34. What type of residence does the subject currently live in?

*Select one: If other is selected, please write in response:*

Home

Hospital

Nursing home

Rehabilitation center

Unknown

N/A - patient died

Other, specify:

35. Approximately, what is the current annual income of the subject’s household?

*Select one:*

$100,000 and over

$75,000 - $99,999

$50,000 - $74,999

$35,000 - $49,999

$25,000 - $34,999

$15,000 - $24,999

Under $15,000

Unknown

Refused

36. What is the value, in U.S. dollars, of annual pre-tax, pre-deduction total income, of the subject’s household?

*Write in response. Please select one of one of the questions regarding income, you do not need to use both.*

37. What is the number of people supported by the above income?

*Write in response.*

38. How many wage earners live in the subject’s household?

*Write in response.*

39. Does the subject’s income meet the subject’s household's basic needs?

*Select one:*

Very poorly

Rather poorly

Adequately (neither well nor poorly)

Rather well

Very well

Unknown

Refused to answer

40. What best describes the highest level the subject completed in school?

*Select one:*

Never attended/Kindergarten only

1st Grade

2nd Grade

3rd Grade

4th Grade

5th Grade

6th Grade

7th Grade

8th Grade

9th Grade

10th Grade

11th Grade

12th Grade, no diploma

GED or equivalent

High school graduate

Some college, no degree

Associates degree

Bachelor's degree

Professional school degree

Master's degree

Doctoral degree

Unknown

41. What type of education did the subject receive?

*Select one: If other is selected, please write in response:*

Home school

Private

Public

Other, specify

42. How many years of education does the subject have?

*Write in response.*

43. What is the highest level of education the subject received pre-injury?

*Select one:*

None/basic primary = 0 - 4 years

Primary/Intermediate Primary = 5 - 8 years

Secondary = 12 years

Tertiary = 13 - 15 years (e.g., Teachers, Technicians)

University = 16 - 17 years

Post Graduate = 18 - 19 years (e.g., Masters, Doctoral)

Unknown

44. What is the subject’s current attendance in school?

*Select one:*

Going to school

On vacation from school (between grades)

Neither

Unknown

45. What is the type of education the subject receives with details of being with or without assistance?

*Select one: If other is selected, please write in response:*

Full-time regular education without aide

Full-time regular education with one to one aide

Regular education with pull-out for certain areas

Special education w/minimal inclusion (e.g., lunch)

Full-time regular education with no inclusion

Home-schooled

Special (MR/DD) school

Not in school

Other, specify:

46. What is the subject’s current primary occupational status?

*Select one: If other is selected, please write in response:*

Homemaker

Paid work

Retired

Student

Unemployed

Unpaid work

Unknown

Other, specify:

47. What is the status of the subject’s current employment?

*Select one: If other is selected, please write in response:*

Not in paid workforce

Sick leave or maternity leave

Special employment

Temporary/odd jobs/less than minimum wage jobs

Working 20-34 hours/week, at least minimum wage

Working less than 20 hours/week, at least minimum wage

Working full time

Unemployed

Unknown

Other, specify:

48. What was the subject’s pre-injury job classification?

*Select one: If other is selected, please write in response:*

Agricultural or fishery worker

Armed forces

Clerk

Craft of trades worker

Elementary worker

Legislator, or senior official, or manager

Plant/machine operator or assembler

Professional

Service or sales worker

Technician or Associate

Not applicable

Unknown

Other, specify:

49. What is the subject’s current job classification?

*Select one: If other is selected, please write in response:*

Agricultural or fishery worker

Armed forces

Clerk

Craft of trades worker

Elementary worker

Legislator, or senior official, or manager

Plant/machine operator or assembler

Professional

Service or sales worker

Technician or Associate

Not applicable

Unknown

Other, specify:

50. What is the subject’s reason for being unemployed?

*Write in response.*

## FITBIR Demographics Parent, Guardian, or Caregiver Info

51. What is the relationship between the person who acts as the primary caregiver for the subject and the subject?

*Select all that apply. If other is selected, please write in response:*

Adoptive father

Adoptive mother

Adoptive parents

Biological father

Biological father - not a primary caregiver

Biological mother

Biological mother - not a primary caregiver

Biological parents

Child

Grandfather

Grandmother

Home aide

Legal guardian

Long-term care staff

Parent

Relative

Self

Sibling

Spouse or partner

Stepfather

Stepmother

Stepparent

Unknown

Other, specify:

52. What are the living statuses of the subject's parents?

*Select all that apply:*

Father alive

Father deceased

Father unknown

Mother alive

Mother deceased

Mother unknown

53. What is the parent, guardian, or caregiver’s gender?

*Select one:*

Female

Male

Not reported

Unknown

Unspecified

54. What is the parent, guardian, or caregiver’s race, based on the OBM race standards?

*Select all that apply:*

American Indian or Alaska Native

Asian

Black or African-American

Native Hawaiian or Other Pacific Islander

White

Not Reported

Unknown

55. What is the parent, guardian, or caregiver’s race, using expanded race categories?

*Select all that apply:*

Alaskan Native

Black African

Black African American

Black Afro Caribbean

Far Eastern Asian

Hawaiian

Inuit

North American Indian

Pacific Islander

South/Central American Indian

South Asian

Western Asian

White African

White Australian

White European

White Middle Eastern

White North American

White South American

Other

Not Reported

56. What is the parent, guardian, or caregiver’s ethnicity?

*Select one. If other is selected, please write in response:*

Hispanic or Latino

Not Hispanic or Latino

Not reported

Unknown

Other, specify:

57. What is the parent, guardian, or caregiver’s birth country ISO code?

For full list of codes, see BirthCntryISOCode variable in the data dictionary

*Select one. If other is selected, please write in response:*

Australia (AU)

Canada (CA)

Mexico (MX)

United Kingdom (GB)

USA (US)

Other, specify:

58. What is the parent, guardian, or caregiver’s birth country name?

*Write in response*

59. What is the parent, guardian, or caregiver’s marital status?

*Select one. If other is selected, please write in response:*

Divorced

Domestic partnership

Married

Never married

Separated

Widowed

Other, specify:

60. What is the number of dependent children living in the parent, guardian, or caregiver’s household?

*Write in response*

61. What is the total number of dependent children the parent, guardian, or caregiver’s has?

*Write in response*

62. How would you describe the parent, guardian, or caregiver’s current location of residence?

*Select one:*

A big city (population greater than or equal to 250,000 including suburbs/outskirts)

A small town/small city (population 500 - 10,000)

Rural area (population less than 500)

Unknown

63. What type of residence does the parent, guardian, or caregiver’s currently live?

*Select one. If other is selected, please write in response:*

Home

Hospital

Nursing home

Rehabilitation center

Unknown

N/A - patient died

Other, specify:

64. Approximately, what is the current annual income of the parent, guardian, or caregiver’s household?

*Select one:*

$100,000 and over

$75,000 - $99,999

$50,000 - $74,999

$35,000 - $49,999

$25,000 - $34,999

$15,000 - $24,999

Under $15,000

Unknown

Refused

65. What is the value, in U.S. dollars, of annual pre-tax, pre-deduction total income, of the parent, guardian, or caregiver’s household?

*Free-form version of the above question. Researchers’ please select one version of asking this question.*

66. What is the number of people supported by the above income?

*Write in response*

67. What is the parent, guardian, or caregiver’s highest grade or level of school completed?

*Select one*

Never attended/Kindergarten only

1st Grade

2nd Grade

3rd Grade

4th Grade

5th Grade

6th Grade

7th Grade

8th Grade

9th Grade

10th Grade

11th Grade

12th Grade, no diploma

GED or equivalent

High school graduate

Some college, no degree

Associates degree

Bachelor's degree

Professional school degree

Master's degree

Doctoral degree

Unknown

68. How many years of education does the parent, guardian, or caregiver have?

*Write in response*

69. What is the parent, guardian, or caregiver’s current primary occupational status?

*Select one. If other is selected, please write in response:*

Homemaker

Paid work

Retired

Student

Unemployed

Unpaid work

Unknown

Other, specify:

70. What is the status of the parent, guardian, or caregiver’s current employment?

*Select one. If other is selected, please write in response:*

Not in paid workforce

Sick leave or maternity leave

Special employment

Temporary/odd jobs/less than minimum wage jobs

Working 20-34 hours/week, at least minimum wage

Working less than 20 hours/week, at least minimum wage

Working full time

Unemployed

Unknown

Other, specify:

71. What is the parent, guardian, or caregiver’s job classification?

*Select one:*

Administration

Craft worker

Laborer/Helper

Official/Manager

Operative

Professional

Sales Worker

Service Worker

Social Worker

Technician

Unknown

None

72. What is the parent, guardian, or caregiver’s reason for being unemployed?

*Write in response*

## FITBIR Demographics Military Info

*If the subject was not in the military, please disregard this section*

73. Is the subject active military?

*Select one:*

Yes

No

Unknown

74. What is the military occupational status of the subject?

*Select one. If other is selected, please write in response:*

Combat

Non-Combat

Other, specify:

75. Which branch of service in the U.S. Military is the subject involved?

*Select one. If other is selected, please write in response:*

Air Force

Army

Coast Guard

Marine Corps

Navy

Other, specify:

76. What is the subject's military rank?

*Select one. If other is selected, please write in response:*

Company grade officer

Field grade officer or above

Non-commissioned officer

Warrant officer

Other, specify:

77. Where was the subject deployed?

*Select one. If other is selected, please write in response:*

Afghanistan

Africa

Germany

Iraq

None

Other, specify:

**FITBIR Demographics Sports Info**

*If the subject did not participate in any sports in his or her lifetime, please disregard this section*

78. Was the subject's traumatic brain injury sports related?

*Select one:*

Yes

No

Unknown

79. Answer the following questions if the subject attended elementary school:

Did the subject participate in sports in elementary school?

*Select one:*

Yes

No

80. What was the primary sport the subject played in elementary school?

*Write in response*

81. How many years did the subject play the primary sport in elementary school?

*Select one:*

1

2

3

4

5

6

82. Which other sports did the subject play in elementary school?

*Write in response*

83. What are the total combined years the subject played the other sports in elementary school?

*Write in response*

84. Answer the following questions if the subject attended junior high school:

Did the subject participate in sports in junior high school?

*Select one:*

Yes

No

85. What was the primary sport the subject played in junior high school?

*Write in response*

86. How many years did the subject play the primary sport in junior high school?

*Select one:*

1

2

3

4

5

6

87. Which other sports did the subject play in junior high school?

*Write in response*

88. How many total combined years did the subject play other sports in junior high school?

*Write in response*

89. Answer the following questions if the subject attended high school:

Did the subject participate in sports in high school?

*Select one:*

Yes

No

90. What was the primary sport the subject played in high school?

*Write in response*

91. How many years did the subject play the primary sport in high school?

*Select one:*

1

2

3

4

5

6

92. Which other sports did the subject play in high school?

*Write in response*

93. How many total combined years did the subject play other sports in high school?

*Write in response*

Answer the following questions if the subject attended college:

94. Did the subject participate in sports in college?

*Select one:*

Yes

No

95. What was the primary sport the subject played in college?

*Select one. If other is selected, please write in response:*

Baseball

Basketball

Bowling

Boxing

Cross Country/Track

Diving

Equestrian

Fencing

Field Event

Field Hockey

Figure Skating

Football

Golf

Gymnastics

Ice Hockey

Ice Skating

Lacrosse

Rifle

Rowing

Skiing

Soccer

Softball

Swimming

Tennis

Volleyball

Water Polo

Wrestling

Other, specify:

96. How many years did the subject play the primary sport in college?

*Write in response*

97. Which other sports did the subject play in college?

*Write in response*

98. How many total combined years did the subject play other sports in college?

*Write in response*

99. Did the subject participate in recreational sports?

*Select one:*

Yes

No

100. What is the primary recreational sport played by the subject?

*Write in response*

101. How many years did the subject play the primary recreational sport?

*Write in response*

102. Which other recreational sports did the subject play?

*Write in response*

103. How many total combined years did the subject play other recreational sports?

*Write in response*

104. Did the subject participate in professional sports?

*Select one:*

Yes

No

105. What was the primary professional sport the subject played?

*Select one. If other is selected, please write in response:*

Baseball

Basketball

Bowling

Boxing

Cross Country/Track

Diving

Equestrian

Fencing

Field Event

Field Hockey

Figure Skating

Football

Golf

Gymnastics

Ice Hockey

Ice Skating

Lacrosse

Rifle

Rowing

Skiing

Soccer

Softball

Swimming

Tennis

Volleyball

Water Polo

Wrestling

Other, specify:

106. What is the total number of years the subject played the primary professional sports?

*Write in response*

107. Which other professional sports did the subject play?

*Write in response*

108. What is the total number of years the subject played other professional sports?

*Write in response*