

FOLLOW-UP EMPLOYMENT HISTORY FORM

ID NUMBER: FORM CODE: EHF VERSION: 1.0 02/24/2023 Event:
0a) Date of Collection:
<u>Instructions:</u> This form should be interviewer administered and completed during the participant's 18-month follow-up phone call and 3-year follow-up clinic visit. Carefully answer each question regarding employment. For check box questions, please select "Yes" or "No" on all items. Please answer all questions.
 Notes: For the 18-month follow-up phone call, all questions should be answered thinking back to the baseline visit as the last SOURCE contact. For the 3-year follow-up clinic visit, all questions should be answered thinking back to the 18-month follow-up phone call as the last SOURCE contact.
The following questions ask about your employment history. Please provide information about your current job, including military service, paid, self-paid, or unpaid (i.e., volunteer) positions involving at least 20 hours of work per week. For these questions, please do not consider taking care of your house or family as employment. If your current work includes multiple jobs at the same time, please provide information about the main job where you spend the most hours working per week.
 1) Has your employment status changed since your last SOURCE (clinic visit or telephone contact)? ☐ No₀ → Go to End ☐ Yes₁ ☐ Declines to answer₂ → Go to End
2) Which of the following best describes how your employment status has changed since your last SOURCE (clinic visit or telephone contact)?
(Please read all options before recording an answer)
☐ Started a new job ₁ → Go to 3
☐ On leave but still employed ₂ → Go to End
☐ Temporarily laid off ₃ → Go to End
Unemployed and looking for work₄ → Go to 31
☐ Unable to work due to health reasons₅ → Go to 31
☐ Going to school ₆ → Go to 31
☐ Taking care of house or family ₇ → Go to 31
☐ Retired ₈ → Go to 31
☐ Others
☐ Declines to answer ₀ → Go to 31
2a) If Other, please specify: → Go to 31

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ŕ	NOTE: Ente	er al	I new	jobs į	previ	ious	sly hel	d froi	our last SOURCE (clinic vision the most recent job started none contact).	it or telephone contact)? ed to the EARLIEST job started
Nev	<u>w Job #1 (m</u>	ost	recen	<u>it)</u>						
4) V	Artist or Building Construct Farming Firefight Food pre Medical Forestry Military9 Mining of Police of Professi Sales, of Transpo Transpo Other tra Vehicle, Welder19 Hairdres Nail salo Custodia Pesticide Other24 4a) If	art-I and ctior is an erf-I and ctior is an erf-I and ref-I and re	related ground and and artion denta artion denta article are the content on: true on: but or bar or	d ₁ nds o buildi and ag and s al hea o onal ₁₁ d (ma uding il, adr uck di us, ca on-re or airc rber ₂₀ sekee or ₂₃	r ma ng tra gricul servir althca chine busin ninis river lated raft r	interaction of the second of t	enance es ₃ e ₄ relate perato ss, fina ive ₁₄ n drive	e and	recent new job? (choose only lenvironmental services2) Inufacturing, assembling, or l, engineering, computer, so	r processing) ₁₂ sience, media, education) ₁₃
	4b) Do [[] No			ecent	t ne	w job	expo	se you to vapors, gas, dust, o	or fumes?
5) V	What is your	· job	title o	r role	in yo	our	most	recer	nt new job?	

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6)	only one) Sitting a Driving a Manual Standing Other5	t a d a veh work g (e.	lesk (e. nicle ₂ k (e.g., g., at a	.g., a cons	any jo struc	ob i tion cou	nvolvii n, mec inter, s	ng m hanid	ostly computer of cal work, agricult , salon, in a class	or phone	work) ₁	ot recent new job? (o	:hoose
	6a) If	Othe	er, plea	se s	peci	fy: _							
7)) Approximate	ly w	hat dat	e did	d you	u be	egin w	orkin	g in this job?	MM	/ [
8)) Are you curro ☐ No₀ ☐ Yes₁→ [6]			ng in	this	job	?				5.	- 1111	
	_			ly wh	hat d	late	did yo	ou ste	op working in this	s job?			
										MM] / DE	/	
9)) On average,	how	/ many	hou	ırs pe	er w	/eek d	o(dic	d) you work?				hours
Vã	apors, gas, d	ust,	or fun	nes)	you	ı ma	ay hav	e ha	ns about the typ ad at your most ve happened.				
D	ust												
1(0) In your mos of dust?	st red	cent ne	w jo	b, do	o yc	ou com	ne in	to regular contac	t with ar	ny of the f	following specific ex	amples
	10a) Coal d 10b) Silica d 10c) Wheat 10d) Anima 10e) Cotton 10f) Wood 10g) Weldir 10h) Other 10i) Asbes 10j) Other?	or satisfication of the second	and, or or oth ds or fo st or co t or sav r flame al dusts	condered oddered odder	crete grain er? proc st? ing?	dus	sts? sing?	or r	ock dust?		Yes ₁	How many years?	
	10i1	a) If	Other.	plea	ase s	spe	cifv:						

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	st re	cent ne	ew jo	ob, d	do y	ou c	om	e in	to regular contac	t with a	iny of the	following specific examples
of fumes? 11a) Incine 11b) Indoo 11c) Diese 11d) Cadn 11e) Other 11f) Weld 11g) Fiber 11h) Explo 11i) Hair b 11j) Kerat 11k) Nail p 11l) Paint	or fuel en ium me ing of glas of sive	el powe gine ex fumes tal fum or flame s or oth es or bla ch? Brazili	ered chaus s or I es? e cur ner r astir ian I il po	mot st? catte tting nan- ng fu nair lish	eries ? -mae imes strai	Noo 	Yes ₁	How many years?				
11n Gases or Vap	•	If Othe	er, p	leas	e sp	ecif	y: _					
2) In your mo			ew jo	ob, d	do y	ou c	om	e in	to regular contac	t with a	iny of the	following specific examples
12a) Irritan 12b) Fire, s 12c) Pestic 12d) Clean 12e) Other	mok ides ing p	ke, or o	ther							No ₀	Yes ₁	How many years?
12e	1a)	If Othe	r, pl	ease	sp	ecify	":					
New Job #2												
Artist or	art- and ction g: and epar and	related I groun I and b I mal ar	ods obuild and a	or maing tigging the service of the	ainte rade ultur ing ₆	enan es ₃ e ₄	ice	anc	i job? <i>(choose on</i> l environmental s	,	S 2	

[O NUMBER:								FORM CODE: EHF VERSION: 1.0 02/24/2023	Event:			
		r co ion-li ona ffice ortati ortati ansp eng sser on w an o	rrectic related Il (incluse, reta ion: trusion: bu portati gine, co or ba vorker, or hous	onal ₁₁ d (ma uding il, adr uck d us, ca on-re or airc rber ₂₀	bus minis river are o lated craft	ines strat or va d ₁₇ med	ss, finai tive ₁₄ in drive	ncial r ₁₆	nufacturing, assembling, o	or processing) ₁₂ cience, media, education) ₁₃			
	13a) If Other, please specify:												
14)	13b) Does(Did) your new job expose you to vapors, gas, dust, or fumes? No ₀ Yes ₁ Don't know ₂ 14) What is(was) your job title or role in your new job?												
15) \ 	15) Which category best describes the type of physical activity involved in your new job? <i>(choose only one)</i> Sitting at a desk (e.g., any job involving mostly computer or phone work) Driving a vehicle2 Manual work (e.g., construction, mechanical work, agriculture, cleaning, food preparation) Standing (e.g., at a service counter, store, salon, in a classroom) Other ₅ 15a) If Other, please specify:												
·	6) Approximately what date did you begin working in this job?												
l	_			ately v	what	t dat	te did y	ou s	stop working in this job?				
									MM /	/ /			

ID NUMBER:						FORM CODE: E VERSION: 1.0 02/24		Eve	ent:
	to ask y	you a s	series) you	s of qu may h	uestioi nave h	ns about the type			posures (e.g., nt temporary one-
<u>Dust</u>									
19) In your new dust?	/ job, do((did) yo	ou cor	ne into	regul	ar contact with ar	ny of the	followin	g specific examples of
19a) Coal of 19b) Silica 19c) Wheat 19d) Anima 19e) Cottor 19f) Wood 19g) Weldir 19h) Other 19i) Asbes 19j) Other?	or sand, and the same of same of same or same	or con other of or fodd cotton saw du me cutt	crete, grain o er? proce ist?	dusts?	·	rock dust?	No ₀	Yes ₁	How many years?
19j1	a) If Oth	er, ple	ase s	pecify:					
<u>Fumes</u>									
20) In your new fumes?	/ job, do((did) yo	ou cor	ne into	regul	ar contact with ar	ny of the	followin	g specific examples of
20c) Diese 20d) Cadm 20e) Other 20f) Weldi 20g) Fiberg 20h) Explo 20i) Hair b	r fuel por I engine nium fum fum gor fla glass or sives or oleach? In or Bracolish or us, glues,	wered exhau es or busines? me cut other rublastin zilian hall po	motor st? patteri tting? man-m ng fum nair str lish re	es or s nade m nes? raighte	npress silver s nineral ening to		No ₀	Yes ₁	How many years?

20m1a) If Other, please specify:

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Gases or Vapors
21) In your new job, do(did) you come into regular contact with any of the following specific examples of gas or vapors?
21a) Irritant gases, such as chlorine or ammonia? 21b) Fire, smoke, or other combustion products? 21c) Pesticides? 21d) Cleaning products? 21e) Other?
21e1a) If Other, please specify:
New Job #3
Which of the following best describes your new job? (choose only one) Artist or art-related₁ Building and grounds or maintenance and environmental services₂ Construction and building trades₃ Farming: animal and agriculture₄ Firefighter₅ Food preparation and serving₅ Medical and dental healthcare-related₁ Forestry₅ Military₅ Mining or drilling₁₀ Police or correctional₁₁ Production-related (machine operator, manufacturing, assembling, or processing)₁₂ Professional (including business, financial, engineering, computer, science, media, education)₁₃ Sales, office, retail, administrative₁₄ Transportation: truck driver₁₅ Transportation: truck driver₁₅ Other transportation-related₁γ Vehicle, engine, or aircraft mechanic₁ѕ Welder₁ゥ Hairdresser or barber₂₀ Nail salon worker₂₁ Custodian or housekeeper₂₂ Pesticide applicator₂₃ Other₂₄ 22a) If Other, please specify:

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	22b) [<u> </u>	No ₀	our	new	job	expose	e you	ı to vapors, gas, dust	, or fumes	?	'
		_	∕es₁ Don't kı	กดพร)							
					_							
23)) What is(wa	s) y	our job	title	or r	ole	in youı	new	ı job?			
24)	Sitting a Driving a Manual	it a d a ve worl	desk (e hicle ₂ k (e.g.,	e.g., a	any stru	job ctior	involvii n, mec	ng m hani	nysical activity involvostly computer or phocal work, agriculture, salon, in a classroo	none work , cleaning	•	one)
	24a) I	f Ot	her, ple	ease	spe	ecify	:					
								worki	ing in this job? MI	/ [M	DD / TYYYY	
26)) Are you cu ☐ No ₀ ☐ Yes ₁ →			king	in th	nis jo	ob?					
	_			tely v	what	t dat	te did y	ou s	stop working in this jo	ob?		
	,	•					·		MI		DD / TYYYY	
27)) On average	e, ho	ow mar	ny ho	ours	per	week	do(d	id) you work?			hours
va		lust	, or fur	nes)	yo.	u m	ay hav	e ha	ns about the type of ad at your new job.		exposures (e.g., ount temporary one-	
<u>Du</u>	<u>ıst</u>											
28)) In your new dust?	v job	o, do(di	d) yo	ou c	ome	into re	egula	ar contact with any o	f the follo	wing specific examples o	of
	28a) Coal of 28b) Silica 28c) Wheat 28d) Anima 28e) Cottor 28f) Wood	or satisfied	and, or ur or ot eds or t st or co	con her (fodd otton	cret grair er? pro	n du	sts?	, or r	ock dust?	oo Yes	How many years?	

	ID NUMBER:									FORM CODE: E VERSION: 1.0 02/24		Eve	ent:			
	28g) Weldir 28h) Other 28i) Asbes	met	al dust		ing?	?					No ₀	Yes ₁	How many years?			
	28j) Other?	?		, ple	ase	spe	cify:									
F	umes 9) In your new job, do(did) you come into regular contact with any of the following specific examples of															
29	9) In your new fumes?	No ₀ Yes ₁ How many years?														
	29c) Diese 29d) Cadm 29e) Other 29f) Weldi 29g) Fiberg 29h) Explo 29i) Hair b 29j) Kerati 29k) Nail p 29l) Paints 29m) Other	r fuel length le	el powe gine ex fumes tal fum or flames or otl s or otl ch? Brazil	ered khau s or b es? e cut ner n astin ian h il pol	mot st? patte ting nan- g fu nair s lish ts, c	ors, eries ? -mac mes strai rem	com s or s de m s? ighte over cids?	ilve ine nine	esso er so eral t	fibers?		Yes ₁	How many years?			
G	ases or Vapo	<u>ors</u>														
3(0) In your new or vapors?	/ job	, do(di	d) yo	ou c	ome	into	re	gula	ar contact with an	y of the	e followin	g specific examples of gas			
	30a) Irritant 30b) Fire, s 30c) Pestici 30d) Cleani 30e) Other?	mok ides ing p	ce, or c	ther	con	nbus	stion	pr	odu		No _o	Yes ₁	How many years?			

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	now going ephone coi			you	u a f	ew	que	estic	ons ab	out the job you had at yo	our last SOURCE (clinic visit or
31)	Did you lead breathing of Noo Yes1	or Iur	ng p				ned	at y	our las	t SOURCE (clinic visit or t	elephone contact) because of
32)	Did your job dust, or fum No ₀ Yes ₁	nes?		ned	at y	our	last	SO	URCE	(clinic visit or telephone co	ontact) expose you to vapors, gas,
33)		t to a	avoic n?								elinic visit or telephone contact) at a sair quality, temperature, or
34)		orkin	g th							uring your last SOURCE <i>(cli</i> se of missed time due to illno	inic visit or telephone contact), did ess?

END OF FORM