



## Data Collection Worksheet

**Please Note:** The Data Collection Worksheet (DCW) is a tool to aid integration of a PhenX protocol into a study. The PhenX DCW is not designed to be a data collection instrument. Investigators will need to decide the best way to collect data for the PhenX protocol in their study. Variables captured in the DCW, along with variable names and unique PhenX variable identifiers, are included in the PhenX Data Dictionary (DD) files.

1) When you got pregnant with your new baby, were you trying to get pregnant?

1  No

2  Yes

(IF NO, THEN SKIP ALL THE REMAINING QUESTIONS AND CODE THAT CONCEPTION WAS "SPONTANEOUS" OR "NATURAL")

2) Did you (*or your partner*) take any fertility drugs or receive any medical procedures from a doctor, nurse or other health care worker to help you get pregnant with (this pregnancy/your new baby/child's name)? This may include infertility treatments such as fertility-enhancing drugs or assisted reproductive technology. (*italics added by MK*)

1  No

2  Yes

(IF NO, THEN SKIP TO QUESTION 6 AND CODE THAT CONCEPTION WAS "SPONTANEOUS" OR "NATURAL")

3) Did you (*or your partner*) use any of the following fertility treatments during the month you got pregnant with (this pregnancy/your new baby/child's name)?

Check ALL that apply (*italics added by MK*)

Fertility enhancing drugs prescribed by a doctor (fertility drugs include Clomid®, Serophene®, Pergonal® or other drugs to stimulate ovulation)

Artificial insemination or intrauterine insemination (treatments in which sperm, but NOT eggs, were collected and medically placed inside the woman's body)

Assisted reproductive technology (treatments in which BOTH a woman's eggs and a man's sperm were handled in the laboratory, such as in vitro fertilization [IVF], gamete intrafallopian transfer [GIFT], zygote intrafallopian transfer [ZIFT], intracytoplasmic sperm injection [ICSI], frozen embryo transfer, or donor embryo transfer)

Other medical treatment (please tell us) \_\_\_\_\_

I wasn't using fertility treatments during the month that I got pregnant with (this pregnancy/my new baby/child's name)

4) How long had you been trying to get pregnant before you took any fertility drugs or used any medical procedures to help you get pregnant with (this pregnancy/your new baby/child's name)? Do not count long periods of time when you and your partner were apart or not having sex.

0  to 5 months

6  to 11 months

1  to 2 years

3  to 4 years

5  to 6 years

More than 6 years

5) How many cycles of fertility treatments (complete or incomplete) did you have before you got pregnant with your new baby?

1  cycle

2  to 3 cycles

4  to 6 cycles

7  or more cycles

ONLY ASK QUESTION 6 IF QUESTION 2 IS ANSWERED "NO"

6) How many months were you trying to get pregnant? Do not count long periods of time when you and your partner were apart or not having sex.

0  to 3 months

4  to 6 months

7  to 12 months

13  to 24 months

More than 24 months

Protocol source: <https://www.phenxtoolkit.org/protocols/view/241201>