



## ARIC GUT MICROBIOME- CLINIC SURVEY

ID  
NUMBER:

FORM  
CODE: GMC

DATE: 1/31/2017  
Version 1.0

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### ADMINISTRATIVE INFORMATION

0a. Completion Date: / /   
Month Day Year

0b. Staff ID:

**Script: I am going to ask you about behaviors or medical treatments that may impact your gut microbiome.**

1. Have you taken oral or injected antibiotics in the past **12 months**? (DO NOT INCLUDE INHALERS OR TOPICAL CREAMS)

Yes

No- [Skip to Q3]

2. When did you last use oral or injected antibiotics? (DO NOT INCLUDE INHALERS OR TOPICAL CREAMS)

1 to 2 months ago

Between 3 and 6 months ago

Between 6 and 12 months ago

3. In the past **2 months**, have you undergone a colonoscopy or other procedure requiring bowel preparation?

Yes

No

4. In the past **2 months**, have you had diarrhea or loose stool?

Yes

No

5. How often do you usually have a bowel movement?

1  More than once per day

2  Once per day

3  Every other day

4  Every 3-4 days

5  Every 5-6 days

6  Once a week or less

6. What are your dietary preferences with respect to meat?

1  Standard diet (no restrictions)

2  Standard diet with poultry and/or fish (no or little red meat)

3  Vegetarian (no meat)

4  Vegan (no meat, dairy, or animal products)

7. In the past 2 weeks, how often have you used any probiotic supplements? Probiotic supplements are live bacteria that may be taken with the goal of improving digestive health. There are many probiotic supplements on the market. Many have "probiotic," "biotic," or "flora" in their name; some include: Culturelle, Renew Life Ultimate Flora Critical Care, NOW Foods Probiotic-10, Healthy Origins Probiotics, All-Flora, and Florastor.

1  Daily

2  Both weeks, but not every day

3  A couple of times (in the last 2 weeks)

4  Never

8. In the past 2 weeks, how often have you consumed yogurt or other foods containing active bacterial cultures, including sauerkraut, kefir, or kombucha?

1  Daily

2  Both weeks, but not every day

3  A couple of times (in the last 2 weeks)

4  Never

9. In the past 2 weeks, how often have you used a fiber substitute, such as Metamucil, Konsyl, or Citrucel?

1  Daily

2  Both weeks, but not every day

3  A couple of times (in the last 2 weeks)

4  Never

10. In the past 2 weeks, how often have you taken a laxative or stool softener, such as Ex-Lax, Dulcolax, MiraLax, Senna, Colace, or mineral oil?

1  Daily

2  Both weeks, but not every day

3  A couple of times (in the last 2 weeks)

4  Never