Has the participant indicated any of the following reasons for this outpatient procedure or event visit?

1. Suspected or confirmed problems with the heart, circulation, or a blood clot.
   - 1. No
   - 2. Yes
      - For which specific problem?
        - 1. No
        - 2. Yes
           - Blood clot in the lung (pulmonary embolism) FY288CBLP4
           - Heart cath (cardiac catheterization) or Angiogram FY288CAGO4
           - Procedure to unblock narrowed arteries, including to heart muscle, neck, leg, or abdomen (PTCA, coronary angioplasty, stent, or atherectomy) FY288CPRD4
           - Blood clot in the leg (deep vein thrombosis or DVT) FY288CBLV4

2. Kidney failure, start dialysis, or have kidney transplant FY288CKID4
   - 1. No
   - 2. Yes

3. Sleep test FY288CSLPT4
   - 1. No
   - 2. Yes

4. Weight loss/bariatric surgery FY288CWEL4
   - 1. No
   - 2. Yes

5. Other (specify) FY288COTH4
   - 1. No
   - 2. Yes

6. Were any of the responses “yes” for questions 1 - 4 or an answer to question 5 that could involve one of these conditions? FY288CRESP4
   - 1. No
     - DO NOT COLLECT MEDICAL RECORDS FOR PROCEDURE/EVENT
   - 2. Yes
     - COLLECT MEDICAL RECORDS FOR PROCEDURE/EVENT
Has the participant indicated any of the following reasons for this outpatient procedure or event visit?

1. Suspected or confirmed problems with the heart, circulation, or a blood clot. FY288CBLC5
   1. No
   2. Yes

   For which specific problem?
   1. No
   2. Yes
   1. Blood clot in the lung (pulmonary embolism) FY288CBLP5
   2. Heart cath (cardiac catheterization) or Angiogram FY288CAGO5
   2. Procedure to unblock narrowed arteries, including to heart muscle, neck, leg, or abdomen (PTCA, coronary angioplasty, stent, or atherectomy) FY288CPRD5
   2. Blood clot in the leg (deep vein thrombosis or DVT) FY288CBLV5

2. Kidney failure, start dialysis, or have kidney transplant FY288CKID5
   1. No
   2. Yes

3. Sleep test FY288CSLPT5
   1. No
   2. Yes

4. Weight loss/bariatric surgery FY288CWEL5
   1. No
   2. Yes

5. Other (specify) FY288COTH5
   1. No
   2. Yes

6. Were any of the responses “yes” for questions 1 - 4 or an answer to question 5 that could involve one of these conditions? FY288CRESP5
   1. No
   2. Yes

   DO NOT COLLECT MEDICAL RECORDS FOR PROCEDURE/EVENT
   COLLECT MEDICAL RECORDS FOR PROCEDURE/EVENT

Check here if more procedures/events are reported and use supplemental form FY288CSUPP2