



1) How many full sisters and brothers (share both parents) do you have? _____

2) How many half sisters and brothers (share 1 of 2 parents) do you have? _____

These questions are only about your biological family.

Do not include people living with you who are not directly related to you.

3) Do any of the following members of your family have diabetes?

Mother Yes No Father Yes No

- a. How many full sisters and brothers have diabetes? None 1 2 3+
- b. How many half sisters and brothers have diabetes? None 1 2 3+
- c. How many grandparents have diabetes? None 1 2 3+

4) Do any members of your family have high blood pressure (hypertension)?

Mother Yes No Father Yes No

- a. How many full sisters and brothers have high blood pressure? None 1 2 3+
- b. How many half sisters and brothers have high blood pressure? None 1 2 3+
- c. How many grandparents have high blood pressure? None 1 2 3+

5) Do any members of your family have high cholesterol (hyperlipidemia)?

Mother Yes No Father Yes No

- a. How many full sisters and brothers have high cholesterol? None 1 2 3+
- b. How many half sisters and brothers have high cholesterol? None 1 2 3+
- c. How many grandparents have high cholesterol? None 1 2 3+

6) Have any members of your family ever had a stroke?

Mother Yes No Father Yes No

- a. How many full sisters and brothers have had a stroke? None 1 2 3+
- b. How many half sisters and brothers have had a stroke? None 1 2 3+
- c. How many grandparents have had a stroke? None 1 2 3+

7) Have any members of your family ever had angina (chest pain) or a heart attack?

Mother Yes No Father Yes No

- a. How many full sisters and brothers have had either? None 1 2 3+
- b. How many half sisters and brothers have had either? None 1 2 3+
- c. How many grandparents have had either? None 1 2 3+

8) Have any members of your family ever had heart/bypass surgery?

Mother Yes No Father Yes No

- a. How many full sisters and brothers have had heart/bypass surgery? None 1 2 3+
- b. How many half sisters and brothers have had heart/bypass surgery? None 1 2 3+
- c. How many grandparents have had heart/bypass surgery? None 1 2 3+

9) **Before the age of 65,**
Have any female members of your family had angina, heart attack,
heart/bypass surgery or a stroke ?

Mother Yes No Grandmothers Yes No

10) **Before the age of 55,**
Have any male members of your family had angina, heart attack,
heart/bypass surgery or a stroke ?

Father Yes No Grandfathers Yes No

Reviewed by
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