Explaining variability among healthy human-associated microbial communities

WEEKLY QUESTIONNAIRE

You may decline to answer any question by leaving the space blank.

1.) Have you been sick since the last sampling day?
   a. Yes
   b. No
2.) If you answered yes to Question 1 above, please circle all symptoms that apply.
   a. Stomach ache
   b. Fever
   c. Vomiting
   d. Cold sweats
   e. Body aches
   f. Headache
   g. Runny nose
   h. Congestion
   i. Coughing
3.) Have you taken any antibiotics since the last sampling day?
   a. Yes**
   b. No
   **If yes, please indicate which antibiotic you took and what you were treating with the antibiotics in the space provided.

4.) Women, are you currently or have you menstruated since the last sampling day?
   a. Yes, I am currently menstruating
   b. Yes, I menstruated since the last sampling day but am not currently
   c. No, I am not and have not menstruated since the last sampling day
   d. No, I am taking birth control that does not permit me to menstruate
   e. No, I am pregnant

5.) Have there been any other changes in your routine activities (e.g. changed diet, quit smoking, moved residence, got flu vaccine etc.) that you think could influence the microbial communities associated with your various body habitats? Please use the space below and/or back of this sheet to answer.