# 2015 Q1 NHIS Instrument Spec Report

| Section name: Adult Identification and Verification |  |  |
|---|--|--|
| Module  | 14   |  |
| Section Name  | Adult Identification and Verification  |  |
| Part  |  |  |
| Question ID   | AID.005  |  |
| Variable Name                                       | SADULT   |  |
| Universe  | HHSTAT4 = 'S' and (ASTAT = empty or ASTAT = '2')   |  |
| Universe-text                                       | This is the Sample Adult and (the Sample Adult section has not been started or completed).   |  |
| Question Text                                       | * The sample adult person is [fill: ALIAS of Sample Adult]. The next questions must be answered by this person. Probe as necessary to determine the availability of [fill: ALIAS of Sample Adult].   |  |
|   | * If refused enter CTRL-R  |  |
| Answer Codes  | Available     Not Available     Physical or Mental condition prohibits responding Refused  |  |
| Question Type                                       | Pick One - answer list pane  |  |
| Field Pane Description Sample Adult Available       |  |  |
| Fill Instructions                                   |  |  |
| Special Instructions                                | Do not allow "Don't Know" as an answer.  |  |
|   | Display the description of the answer code entered in this question to the right of the answer box in the field pane, e.g., if '1' is entered, display 'Available'; if 'Refused' is entered, display 'Refused'.  |  |
| Skip Instructions                                   | <1> if Sample Adult = demographics.hhc.RELRESP_A         [goto beginning of adult.asd]         elseif Sample Adult = demographics.hhc.HHRESP         [goto beginning of adult.asd]         else         [goto AIDVERF_S]         endif <2> [goto callbk.ACALLBK1] <3> [goto PROX1] <r>        store '4' in ASTAT         if recontact.RCIFLAG ne '1'         [goto recontact.RCI_BEGIN procedure]         else         [goto back.OUTCOMEB1 procedure]         endif</r> |  |
| Hard Edits  |  |  |
| Soft Edits  |  |  |

| AssocHelp            |   |
|----------------------|---|
| Module               | 14  |
| Section Name         | Adult Identification and Verification   |
| Part                 |   |
| Question ID          | AID.010   |
| Variable Name        | PROX1   |
| Universe             | =1  |
| Universe-text        | The Sample Adult's physical or mental condition prohibits responding.   |
| Question Text        | * Proxy interviews can be done for sample adults that have a mental or physical condition that prevents them from responding for themselves.  Is a family member or caregiver that is knowledgeable about [fill: ALIAS of Sample Adult]'s health available? |
|                      | -   |
| Answer Codes         | 1. Yes<br>2. No   |
| Question Type        | Yes/No  |
| Field Pane Descripti | on Proxy Available  |
| Fill Instructions    |   |
| Special Instructions | Do not allow "Don't Know" or "Refused" as an answer.  |
|                      | Display the description of the answer code entered in this question to the right of the answer box in the field pane, e.g., if '2' is entered, display 'No'.  |
| Skip Instructions    | <1> [goto PROX2]<br><2> [goto PROX3]  |
| Hard Edits           |   |
| Soft Edits           |   |
| AssocHelp            |   |

| Module  | 14   |  |
|---|--|--|
| Section Name  | Adult Identification and Verification  |  |
| Part  |  |  |
| Question ID   | AID.015  |  |
| Variable Name   | PROX2  |  |
| Universe  | PROX1 = '1'  |  |
| Universe-text   | Knowledgeable proxy is available.  |  |
| Question Text   | * Ask if necessary.  |  |
|   | What is this person's relationship to [fill: ALIAS of Sample Adult]?                                     |  |
| Answer Codes  | 1. Relative who lives in household 2. Relative who doesn't live in household 3. Other caregiver 4. Other |  |
| Question Type   | Pick One - answer list pane  |  |
| Field Pane Description Proxy's Relationship to Sample Adult |  |  |
| Fill Instructions   |  |  |
| Special Instructions  | Do not allow "Don't Know" or "Refused" as an answer.   |  |
| Skip Instructions   | <1-4> [goto AIDVERF_S]   |  |
| Hard Edits  |  |  |
| Soft Edits  |  |  |
| AssocHelp   |  |  |

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|----------------------|---|---|
| Section Name         | Adult Identification and Verification   | ation   |
| Part                 |   |   |
| Question ID          | AID.020   |   |
| Variable Name        | PROX3   |   |
| Universe             | PROX1 = '2'   |   |
| Universe-text        | Knowledgeable proxy is not ava  | ailable.  |
| Question Text        | *Ask if necessary.  |   |
|                      | Can a callback with someone k health be arranged?   | nowledgeable about [fill: ALIAS of Sample Adult]'s  |
| Answer Codes         | 1. Yes<br>2. No   |   |
| Question Type        | Yes/No  |   |
| Field Pane Descripti | on Arrange Proxy Callback   |   |
| Fill Instructions    |   |   |
| Special Instructions | Do not allow "Don't Know" or "F   | efused" as an answer.   |
|                      |   | nswer code entered in this question to the right of the g., if '1' is entered, display 'Yes'. |
| Skip Instructions    | <1> [goto callbk.ACALLBK1] <2> store '3' in ASTAT     if recontact.RCIFLAG ne '1'        [goto recontact.RCI_BEGIN procedure]     else        [goto back.OUTCOMEB1 procedure]     endif |   |
| Hard Edits           |   |   |
| Soft Edits           |   |   |
| AssocHelp            |   |   |

| Module               | 14   |
|----------------------|--|
| Section Name         | Adult Identification and Verification  |
| Part                 |  |
| Question ID          | AID.025  |
| Variable Name        | SADATE   |
| Universe             | (SADULT = '1' (available)) or (SADULT = '3' (condition prohibits responding) and PROX1 = '1' (yes) and PROX2 = response)   |
| Universe-text        | Sample Adult section has been started with either the Sample Adult or a proxy.   |
| Question Text        |  |
| Answer Codes         |  |
| Question Type        | Output Storage Variable  |
| Field Pane Descripti | on   |
| Fill Instructions    |  |
| Special Instructions | Set only if SADATE = empty   |
|                      | If SADULT = '1' (available) set SADATE = CDATE (current date) (now called ComputationDate) elseif SADULT = '3' (condition prohibits responding) and PROX1 = '1' (yes) and PROX2 = response set SADATE = CDATE (current date) (now called ComputationDate) endif  This is an output variable that should be in the format 'MMDDYYYY'. |
| Skip Instructions    |  |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module               | 14  |
|----------------------|---|
| Section Name         | Adult Identification and Verification   |
| Part                 |   |
| Question ID          | AID.026   |
| Variable Name        | SATIME  |
| Universe             | (SADULT = '1' (available)) or (SADULT = '3' (condition prohibits responding) and PROX1 = '1' (yes) and PROX2 = response)  |
| Universe-text        | Sample Adult section has been started with either the Sample Adult or a proxy.  |
| Question Text        |   |
| Answer Codes         |   |
| Question Type        | Output Storage Variable   |
| Field Pane Descripti | on  |
| Fill Instructions    |   |
| Special Instructions | Set only if SATIME = empty  |
|                      | If SADULT = '1' (available) set SATIME = current time elseif SADULT = '3' (condition prohibits responding) and PROX1 = '1' (yes) and PROX2 = response set SATIME = current time endif  This is an output variable that should be in the format 'HH:MM [ fill:a.m./p.m.]'. |
| ~.                   | This is an output variable that should be in the format HH.iviivi [ IIII.a.iii./p.iii.] .   |
| Skip Instructions    |   |
| Hard Edits           |   |
| Soft Edits           |   |
| AssocHelp            |   |

| Module               | 14  |                             |                          |
|----------------------|---|-----------------------------|--------------------------|
| Section Name         | Adult Identification and Verifica                                       | tion                        |                          |
| Part                 |   |                             |                          |
| Question ID          | AID.030   |                             |                          |
| Variable Name        | AIDVERF_S   |                             |                          |
| Universe             | (RELRESP_A ne Sample Adult  | and HHRESP ne Sample        | Adult) or PROX1 = '1'    |
| Universe-text        | Sample Adult is not the person or 'Yes'.                                | entered in HHRESP or RE     | LRESP_A. Or PROX1 =      |
| Question Text        | * Please verify the following info                                      | rmation about the sample    | adult before proceeding: |
|                      | I have recorded your sex as [fill:                                      | Sex of Sample Adult]. Is    | this correct?            |
|                      | *If respondent "refuses" or says  | "don't know", enter "1" for | "yes".                   |
| Answer Codes         | 1. Yes<br>2. No   |                             |                          |
| Question Type        | Yes/No  |                             |                          |
| Field Pane Descripti | on Verified Adult's Sex   |                             |                          |
| Fill Instructions    |   |                             |                          |
| Special Instructions | Do not allow "Don't Know" or "Refused" as an answer.                    |                             |                          |
|                      | Display the description of the moin the field pane, e.g., if '1' is the |                             |                          |
| Skip Instructions    | <1> [goto AIDVERF_A]<br><2> [goto AIDSEX]                               |                             |                          |
| Hard Edits           |   |                             |                          |
| Soft Edits           |   |                             |                          |
| AssocHelp            |   |                             |                          |

| Module               | 14  |
|----------------------|---|
| Section Name         | Adult Identification and Verification   |
| Part                 |   |
| Question ID          | AID.040   |
| Variable Name        | AIDSEX  |
| Universe             | AIDVERF_S = '2' (No)  |
| Universe-text        | Respondent said his/her sex is not correct.   |
| Question Text        | Are you Male or Female?   |
|                      | *If don't know or refused enter your best guess.  |
| Answer Codes         | 1. Male<br>2. Female  |
| Question Type        | Pick One - answer list pane   |
| Field Pane Descripti | Adult's Revised Sex   |
| Fill Instructions    |   |
| Special Instructions | Do not allow "Don't Know" or "Refused" as an answer.  |
|                      | Display the description of the sex for the answer entered in this question to the right of the answer box in the field pane, e.g., if '2' is entered, display 'Female'. |
| Skip Instructions    | <1,2> store AIDSEX in SEX [goto ERR_AIDSEX] reset AIDVERF_S [goto AIDVERF_S]  |
| Hard Edits           | ERR_AIDSEX  |
|                      | *The gender will now be changed to [fill: AIDSEX].  |
|                      | goto AIDVERF_S (as the default goto)  |
| Soft Edits           |   |
| AssocHelp            |   |

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|---|---|------------------------------|---------------------------|
| Section Name                                | Adult Identification and Verification   | ation                        |                           |
| Part  |   |                              |                           |
| Question ID                                 | AID.045   |                              |                           |
| Variable Name                               | AIDVERF_A   |                              |                           |
| Universe                                    | AIDVERF_S = '1'   |                              |                           |
| Universe-text                               | Sample Adult said his/her sex i   | s correct.                   |                           |
| Question Text                               | * Please verify the following info  | ormation about the sample    | adult before proceeding:  |
|   | I have recorded your age as [fil  | : Age of Sample Adult] old.  | Is this correct?          |
|   | *If respondent "refuses" or says  | "don't know", enter "1" for  | "yes".                    |
| Answer Codes                                | 1. Yes<br>2. No   |                              |                           |
| Question Type                               | Yes/No  | 1                            |                           |
| Field Pane Description Verified Adult's Age |   |                              |                           |
| Fill Instructions                           | If Sample Adult's age in AGE is [fill: <age> years] else [fill: less than a year] endif</age>                                     | > "0"                        |                           |
| Special Instructions                        | Do not allow "Don't Know" or "F   | Refused" as an answer.       |                           |
|   | Display the most recently update pane, e.g., if the age is '32' display years, display 'less than a year it is here just in case. | olay '32 years old'. For the | case where the age is '0' |
| Skip Instructions                           | <1> [goto AIDVERF_D]<br><2> [goto AIDAGE]   |                              |                           |
| Hard Edits                                  |   |                              |                           |
| Soft Edits                                  |   |                              |                           |
| AssocHelp                                   |   |                              |                           |

| Module               | 14   |
|----------------------|--|
| Section Name         | Adult Identification and Verification  |
| Part                 |  |
| Question ID          | AID.050  |
| Variable Name        | AIDAGE   |
| Universe             | AIDVERF_A = '2' (No)   |
| Universe-text        | Respondent said his/her age is not correct   |
| Question Text        | How old are you?   |
| Answer Codes         |  |
| Question Type        | Integer  |
| Field Pane Descripti | on Adult's Revised Age   |
| Fill Instructions    |  |
| Special Instructions | Hard code the phrase 'year(s) old' to the right of the answer box in the field pane.   |
| Skip Instructions    | <0-120, Refused, Don't know> if AIDAGE = 'Refused' or AIDAGE = 'Don't know' or AIDAGE = AGE reset AIDVERF_A [goto ERR_AIDAGE] else store AIDAGE in AGE [goto AIDDOB_M] |
| Hard Edits           |  |
| Soft Edits           | ERR_AIDAGE   |
|                      | *Age of [fill1: ALIAS of Sample Adult] remains [fill2: Age of Sample Adult] years old.   |
|                      | goto AIDVERF_A (whether suppressed or not)   |
| AssocHelp            |  |

| Module               | 14   |
|----------------------|--|
| Section Name         | Adult Identification and Verification  |
| Part                 |  |
| Question ID          | AID.055  |
| Variable Name        | AIDVERF_D  |
| Universe             | AIDVERF_A = '1'  |
| Universe-text        | Sample Adult said his/her age is correct.  |
| Question Text        | * Please verify the following information about the sample adult before proceeding:  |
|                      | I have recorded your birthday as [fill: Birthday of Sample Adult]. Is this correct?  |
|                      | *If respondent "refuses" or says "don't know", enter "1" for "yes".  |
| Answer Codes         | 1. Yes<br>2. No  |
| Question Type        | Yes/No   |
| Field Pane Descripti | Verified Adult's Date of Birth   |
| Fill Instructions    | [fill: <dobm> <dobd>, <doby>] = date of birth, where <dobm> should be filled with the name of the month, not the number. For any part of the birth date that is "refused", "don't know", or otherwise "blank", put a "?" for that field.</dobm></doby></dobd></dobm> |
| Special Instructions | Do not allow "Don't Know" or "Refused" as an answer.   |
|                      | Display the Sample Adult's date of birth to the right of the answer box in the field pane. For any part of the birth date that is "refused", "don't know", or otherwise "blank", put a "?" for that field.   |
| Skip Instructions    | <1> if AGE of Sample Adult le '17'     [goto NO_MORE]     else     [goto beginning of adult.asd]     endif <2> [goto AIDDOB_M]   |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module               | 14  |
|----------------------|---|
| Section Name         | Adult Identification and Verification   |
| Part                 |   |
| Question ID          | AID.060_1   |
| Variable Name        | AIDDOB_M  |
| Universe             | AIDVERF_D = '2' (No) or AIDVERF_A = '2' (No)  |
| Universe-text        | Respondent said his/her date of birth is not correct or his/her age is not correct  |
| Question Text        | 1 of 3  |
|                      | What is your birthday?  |
|                      | *Enter month of birth.  |
| Answer Codes         | <ol> <li>January</li> <li>February</li> <li>March</li> <li>April</li> <li>May</li> <li>June</li> <li>July</li> <li>August</li> <li>September</li> <li>October</li> <li>November</li> <li>December</li> <li>Refused</li> <li>Don't know</li> </ol>                     |
| Question Type        | Pick One - answer list pane   |
| Field Pane Descripti | Adult's Revised Month of Birth  |
| Fill Instructions    |   |
| Special Instructions | Display the name of the month for the answer entered in this question to the right of the answer box in the field pane, e.g., if '10' is entered, display 'October'. If 'Refused' or 'Don't know' is entered, do not display anything to the right of the answer box. |
| Skip Instructions    | <01-12,R, D> [goto AIDDOB_D]  |
| Hard Edits           |   |
| Soft Edits           |   |
| AssocHelp            |   |

| Module               | 14   |  |
|----------------------|--|--|
| Section Name         | Adult Identification and Verification  |  |
| Part                 |  |  |
| Question ID          | AID.060_2  |  |
| Variable Name        | AIDDOB_D   |  |
| Universe             | AIDVERF_D = '2' (No) or AIDVERF_A = '2' (No)   |  |
| Universe-text        | Respondent said his/her date of birth is not correct or his/her age is not correct   |  |
| Question Text        | 2 of 3   |  |
|                      | *Enter day of birth.   |  |
| Answer Codes         |  |  |
| Question Type        | Integer  |  |
| Field Pane Descripti | Adult's Revised Day of Birth   |  |
| Fill Instructions    | [fill2: AIDDOB_M] = month of birth, where <aiddob_m> should be filled with the name of the month, not the number.</aiddob_m> |  |
| Special Instructions | Only allow valid days for month entered.   |  |
| Skip Instructions    | <01-31,R,D> [goto AIDDOB_Y]  |  |
|                      | If days not valid, [goto ERR_AIDDOB_D]   |  |
| Hard Edits           | ERR_AIDDOB_D   |  |
|                      | *[fill1: AIDDOB_D] is not a valid day for [fill2: AIDDOB_M]. *Please correct.  |  |
| Soft Edits           |  |  |
| AssocHelp            |  |  |

14 **Module** Adult Identification and Verification Section Name Part Question ID AID.060 3 Variable Name AIDDOB Y AIDVERF D = '2' (No) or AIDVERF A = '2' (No) Universe Universe-text Respondent said his/her date of birth is not correct or his/her age is not correct 3 of 3 Question Text \*Enter year of birth. **Answer Codes Question** Type Integer Field Pane Description Adult's Revised Year of Birth [fill1: <AIDDOB M> <AIDDOB D>, <AIDDOB Y>] = date of birth, where <AIDDOB M> Fill Instructions should be filled with the name of the month, not the number. For any part of the birth date that is "refused", "don't know", or otherwise "blank", put a "?" for that field. [fill3: <DOBM> <DOBD>, <DOBY>] = date of birth, where <DOBM> should be filled with the name of the month, not the number. For any part of the birth date that is "refused", "don't know", or otherwise "blank", put a "?" for that field. **Special Instructions** <1880-2020, R, D> if AIDVERF A = '2' (No) then reset AIDVERF A to empty Skip Instructions [goto AIDVERF A] elseif AIDVERF D = '2' (No) then reset AIDVERF\_D to empty [goto AIDVERF\_D] endif (if year GT current year) or (if year = current year and month GT current month) or (if year = current year and month = current month and day GT current day) [goto ERR1\_AIDDOB\_Y] endif (if birth month = '02' and birth day = '29' and this is not a leap year) [goto ERR2 AIDDOB Y] endif (if AIDDOB M = 'Ref' or 'DK') or (if AIDDOB D = 'Ref or 'DK') or (if AIDDOB Y = 'Ref' or 'DK') goto ERR3 AIDDOB Y else store AIDDOB M in DOBM store AIDDOB\_D in DOBD store AIDDOB Y in DOBY if AIDVERF\_A = '2' (No) then reset AIDVERF\_A to empty goto AIDVERF\_A elseif AIDVERF\_D = '2' (No) then reset AIDVERF\_D to empty

goto AIDVERF\_D endif endif Calculate age from AIDDOB\_M, AIDDOB\_D, and AIDDOB\_Y. if age from AIDDOB items is ne AGE and age from AIDDOB items is valid reset AIDVERF\_A or AIDVERF\_D. goto ERR4\_AIDDOB Y endif ERR1 AIDDOB Y \*Future date invalid: [fill1: <AIDDOB M> <AIDDOB D>, <AIDDOB Y>] \*Please correct. goto AIDDOB\_M (whether suppressed or not) ERR2\_AIDDOB\_Y \*Not a valid day: [fill1: <AIDDOB\_M> <AIDDOB\_D>, <AIDDOB\_Y>] \*Please correct. goto AIDDOB\_M (whether suppressed or not) ERR3 AIDDOB Y

\*DOB of [fill2: ALIAS of Sample Adult] remains [fill3: <DOBM> <DOBD>, <DOBY>]

goto AIDVERF\_A (whether suppressed or not)

ERR4\_AIDDOB\_Y

- \* Data mismatched. Please fix Age or Birthday.
- \* If still cannot reconcile, enter 'Don't know' for year of birth.
- \* Please correct.

### Soft Edits

Hard Edits

#### **AssocHelp**

| Module               | 14   |  |
|----------------------|--|--|
| Section Name         | Adult Identification and Verification  |  |
| Part                 |  |  |
| Question ID          | AID.070  |  |
| Variable Name        | NO_MORE  |  |
| Universe             | [(ASTAT = empty or ASTAT = '2') and HHSTAT4 = 'S' and AGE le '17']   |  |
| Universe-text        | Sample adult whose age is now less than or equal to 17   |  |
| Question Text        | * [fill: ALIAS of Sample Adult] is no longer the sample adult for this family.   |  |
|                      | * You may need to ask additional questions before continuing with the rest of the interview.   |  |
| Answer Codes         | 1. Enter 1 to Continue   |  |
| Question Type        | Enter 1 to Continue  |  |
| Field Pane Descript  | This Person No Longer Sample Adult   |  |
| Fill Instructions    |  |  |
| Special Instructions |  |  |
| Skip Instructions    | Do not allow "Don't Know" or "Refused" as an answer. <1> (Search and count the number of persons in the family 18+ years old.)  [if (age is now 14-17 inclusive) and (person is married or living with a partner or there is no one over 17 years old in the family)]  store 'E' in HHSTAT4  store '0' in ASTAT  if recontact.RCIFLAG ne '1'  [goto recontact.RCI_BEGIN procedure]  else  [goto back.OUTCOMEB1 procedure]  endif  else  store empty in HHSTAT4  store '0' in ASTAT  if recontact.RCIFLAG ne '1'  goto recontact.RCI_BEGIN procedure  else  goto back.OUTCOMEB1 procedure  else  goto back.OUTCOMEB1 procedure  else  goto back.OUTCOMEB1 procedure  endif  endif |  |
| Hard Edits           |  |  |
| Soft Edits           |  |  |
| AssocHelp            |  |  |

| Module                 | 14  |
|------------------------|---|
| Section Name           | Adult Identification and Verification   |
| Part                   |   |
| Question ID            | AID.075   |
| Variable Name          | AAGECHG   |
| Universe               | HHSTAT4 = 'S' and ((AIDAGE ne empty and AIDAGE ne original age) OR (AIDSEX ne empty and AIDSEX ne original sex))                                      |
| Universe-text          | Person is SA and (there is a sex change or an age change)   |
| Question Text          | * Because you changed the Sample Adult's sex and / or sex, you may need to ask additional questions before continuing with the rest of the interview. |
| Answer Codes           | 1. Enter 1 to Continue  |
| Question Type          | Enter 1 to Continue   |
| Field Pane Description | on  |
| Fill Instructions      |   |
| Special Instructions   |   |
| Skip Instructions      |   |
| Hard Edits             |   |
| Soft Edits             |   |
| AssocHelp              |   |

| Module               | 14   |  |
|----------------------|--|--|
| Section Name         | Adult Identification and Verification  |  |
| Part                 |  |  |
| Question ID          | AID.082  |  |
| Variable Name        | LNKINTRO   |  |
| Universe             | HHSTAT4 = 'S'  |  |
| Universe-text        | Sample Adults 18+  |  |
| Question Text        | ?[F1]  |  |
|                      | We would like the last four digits of your Social Security Number [Fill:]. This information will help us link your survey data with health-related records of other government agencies, and allow us to conduct additional research without taking up your time with more questions. The National Center for Health Statistics uses this information for research purposes only. Providing this information is voluntary. Federal laws authorize us to ask for this information and require us to keep it strictly private. There will be no effect on your benefits if you do not provide this information.  * Read if necessary: The specific federal laws are the Public Health Service Act (Title 42, United States Code, Section 242K) and the Confidential Information Protection and Statistical Efficiency Act (Title V of Public Law 107-347).  * Enter '1' to continue. |  |
| Answer Codes         | Enter 1 to continue.   |  |
|                      |  |  |
| Question Type        | Enter 1 to Continue  |  |
| Field Pane Descripti | on Linkage intro   |  |
| Fill Instructions    | Fill: If sample adult has Medicare (HIKIND=2 or HIKIND=3 or MCAREPRB=1), then fill ", and the last four numbers and any letters of your Medicare number" else fill nothing   |  |
| Special Instructions | QUESTION SHOULD APPEAR AT THE END OF THE SAMPLE ADULT CORE AND SUPPLEMENT QUESTIONS.   |  |
| Skip Instructions    | <1,D> [goto SASSN4]<br><r> [goto SARLINK]</r>  |  |
| Hard Edits           |  |  |
| Soft Edits           |  |  |
| AssocHelp            | H_LNKINTRO   |  |

| Module                 | 14  |
|------------------------|---|
| Section Name           | Adult Identification and Verification   |
| [                      |   |
| Part                   |   |
| Question ID            | AID.082_H   |
| Variable Name          | H_LNKINTRO  |
| Universe               |   |
| Universe-text          |   |
| Question Text          | NHIS data have been linked with health-related records of government agencies such as the Centers for Medicare and Medicaid Services and the Social Security Administration. NHIS data have also been linked with death certificate data stored in the National Death Index (NDI). The NDI is a database of death certificate information provided to NCHS by State offices.  All personal identifying information is removed from the linked data files.  These are some examples of possible research studies using NHIS data together with other health-related records or the NDI:  [blt] Predicting the number of disabled persons in the U.S. based on health conditions reported in the NHIS. [blt] Predicting the costs of Medicare based on health conditions reported in the NHIS. [blt] Studying the risk of certain diseases for persons with and without health insurance. [blt] Studying the health characteristics of people who retire early. [blt] Calculating how long a person in the U.S. might live, based on his or her education, income, or race and ethnicity. |
| Answer Codes           | •   |
| Question Type          | Help Screen   |
| Field Pane Description |   |
| Fill Instructions      |   |
| Special Instructions   | Associated screens:   |
|                        | LNKINTRO SARLINK SASSN4 SCSSN4 SCRLINK  |
| Skip Instructions      |   |
| Hard Edits             |   |
| Soft Edits             |   |
| AssocHelp              |   |

14 **Module** Adult Identification and Verification Section Name Part Question ID AID.085 Variable Name SASSN4 HHSTAT4 = S and (LNKINTRO= '1' or LNKINTRO = 'don't know') Universe Sample adults 18+ who answered "Enter 1 to continue" or "don't know" at LNKINTRO Universe-text ?[F1] Question Text What are the last four digits of your Social Security Number? \* Read if necessary: Providing this information is voluntary. Federal laws authorize us to ask for this information and require us to keep it strictly private (Public Health Service Act, which is Title 42, United States Code, Section 242K; and the Confidential Information Protection and Statistical Efficiency Act, which is Title V of Public Law 107-347). \* Enter 'N' if no Social Security Number. Answer Codes Question Type Integer Field Pane Description SSN Fill Instructions Allow 4 digits. QUESTION SHOULD APPEAR AT THE END OF THE SAMPLE Special Instructions ADULT CORE AND SUPPLEMENT QUESTIONS. NOTE: THIS QUESTION ACTUALLY APPEARS AT THE END OF THE SAMPLE ADULT QUESTIONS INCLUDING ANY SUPPLEMENT QUESTIONS IN THE INSTRUMENT. THIS IS LOCATED HERE BECAUSE NCHS WANTED THE OUTPUT DATA TO CONTAIN THIS INFORMATION HERE.---T.M. Skip Instructions <0001-9999> if SCSSN4=SASSN4 goto ERR2 SASSN4]; else [goto SASSNRP4] <0-999> [goto ERR\_SASSN4] <0000> [goto ERR3\_SASSN4] <N,R,D> if HIKIND=2 or HIKIND = 3 or MCAREPRB=1 [goto SAMCNO4] else [goto SARLINK] Hard Edits **ERR SASSN4** \* You must enter all four of the last four digits of the Social Security Number. \*Please correct. ERR3 SASSN4

\* The last 4 digits of a SSN may be between 0001-9999.

- \* Please correct.
- \* For a respondent who does not want to provide the SSN, enter 'Ctrl D' or 'Ctrl R' for 'Don't Know' or 'Refused.'

#### Soft Edits

## ERR2\_SASSN4

- \*The last four digits of [fill: ALIAS of Sample Adult]'s Social Security Number are the same as the last four digits of [SC name]'s Social Security Number. Please verify.
- \*First goto change Sample Adult's SSN at SASSN4
  \*Second goto change Sample Child's SSN at SCSSN4

| H_LNKINTRO  |   |
|---|---|
| 14  |   |
| Adult Identification and Verification   |   |
|   |   |
| AID.090   |   |
| SASSNRP4  |   |
| HHSTAT4 = S and ('0000' <= SASSN4 <='9999')                                   |   |
| Sample adult reported the last four digits of the SSN at SASSN4               |   |
| * Enter how the last four digits of the Social Security Number were reported. |   |
| From memory     From records  |   |
| Pick One - answer list pane   |   |
| Field Pane Description SSN memory or records                                  |   |
|   |   |
| Do not allow Refused or Don't know  |   |
| QUESTION SHOULD APPEAR AT THE END OF THE SAMPLE ADUL SUPPLEMENT QUESTIONS.    | T CORE AND  |
| <1,2> [goto SASSNTL4]   |   |
|   |   |
|   |   |
|   |   |
|   | Adult Identification and Verification  AID.090  SASSNRP4  HHSTAT4 = S and ('0000' <= SASSN4 <='9999')  Sample adult reported the last four digits of the SSN at SASSN4  * Enter how the last four digits of the Social Security Number were repo  1. From memory 2. From records  Pick One - answer list pane  on SSN memory or records  Do not allow Refused or Don't know  QUESTION SHOULD APPEAR AT THE END OF THE SAMPLE ADUL |

**AssocHelp** 

| Module               | 14   |  |
|----------------------|--|--|
| Section Name         | Adult Identification and Verification  |  |
| Part                 |  |  |
| Question ID          | AID.095  |  |
| Variable Name        | SASSNTL4   |  |
| Universe             | HHSTAT4 = S and (SASSNRP4 = 1 or 2)  |  |
| Universe-text        | Recorded how last four digits of the sample adult's SSN were reported                                    |  |
| Question Text        | * Select one category below to indicate reporting of the last four digits of the Social Security Number. |  |
| Answer Codes         | 1. In person 2. Telephone  |  |
| Question Type        | Pick One - answer list pane  |  |
| Field Pane Descripti | on SSN in person or phone  |  |
| Fill Instructions    |  |  |
| Special Instructions | Do not allow Refused or Don't know   |  |
|                      | QUESTION SHOULD APPEAR AT THE END OF THE SAMPLE ADULT CORE AND SUPPLEMENT QUESTIONS.                     |  |
|                      | NOTE: THIS IS LOCATED HERE BECAUSE NCHS WANTED THE OUTPUT DATA TO CONTAIN THIS INFORMATION HERET.M.      |  |
| Skip Instructions    | <1,2> if HIKIND= 2 or HIKIND = 3 or MCAREPRB=1 [goto SAMCNO4] else [goto AWB.AWEBUSE (AWB.010_00.000)]   |  |
| Hard Edits           |  |  |
| Soft Edits           |  |  |
| AssocHelp            |  |  |

14 **Module** Adult Identification and Verification Section Name Part Question ID AID.100 1 Variable Name SAMCNO4 HHSTAT4 = S and (LNKINTRO = 1 or LNKINTRO = don't kow) and (HIKIND = 2 or Universe HIKIND = 3 or MCAREPRB = 1)Sample adult has Medicare Universe-text ? [F1] **Ouestion Text** 1 of 2 May I please see your Medicare card to record the last four numbers and any letters of the Health Insurance Claim Number? \* Read if necessary: Providing this information is voluntary. Federal laws authorize us to ask for this information and require us to keep it strictly private (Public Health Service Act, which is Title 42, United States Code, Section 242K; and the Confidential Information Protection and Statistical Efficiency Act, which is Title V of Public Law 107-347). \* Reports from memory are acceptable if the Medicare card (or some other form of documentation) is not available. \* Enter the last four numbers. **Answer Codes** Question Type Integer Field Pane Description Medicare number Fill Instructions Allow 4 digits. QUESTION SHOULD APPEAR AT THE END OF THE SAMPLE **Special Instructions** ADULT CORE AND SUPPLEMENT QUESTIONS. If SAMCNO4 = 'Refused' set SAMCNO4 FLG = 'R' elseif SAMCNO4 = 'Don't know' set SAMCNO4 FLG = 'D' else set SAMCNO4\_FLG = empty endif <0000-9999> [goto SAMCLET] Skip Instructions <0-999> [goto ERR SAMCNO4] <R,D> [goto SARLINK] **ERR SAMCNO4** Hard Edits \* You must enter all four of the last four numbers of the Medicare number. \* Please correct.

| Soft Edits           |   |  |  |
|----------------------|---|--|--|
| AssocHelp            | H_SAMCNO4   |  |  |
| Module               | 14  |  |  |
| Section Name         | Adult Identification and Verification   |  |  |
| Part                 |   |  |  |
| Question ID          | AID.100_2   |  |  |
| Variable Name        | SAMCLET   |  |  |
| Universe             | HHSTAT4 = S and SAMCNO4 = 0000 - 9999   |  |  |
| Universe-text        | Sample adult has Medicare and reported the last four numbers of the Medicare number   |  |  |
| Question Text        | 2 of 2  |  |  |
|                      | *Enter the letters that appear after the claim number.  |  |  |
| Answer Codes         | empty, A - Z, AA - ZZ   |  |  |
| Question Type        | Text  |  |  |
| Field Pane Descripti | on Letters  |  |  |
| Fill Instructions    |   |  |  |
| Special Instructions | Allow up to 2 letters and allow 'empty'. QUESTION SHOULD APPEAR AT THE END OF THE SAMPLE ADULT CORE AND SUPPLEMENT QUESTIONS. |  |  |
| Skip Instructions    | <pre><allow 'don't="" 'refused',="" 2,="" know'=""> if SASSN4 = 0000-9999</allow></pre>                                       |  |  |
| Hard Edits           |   |  |  |
| Soft Edits           |   |  |  |
| AssocHelp            |   |  |  |

| Module               | 14  |
|----------------------|---|
| Section Name         | Adult Identification and Verification   |
| Part                 |   |
| Question ID          | AID.100_3   |
| Variable Name        | SAMCNO4_FLG   |
| Universe             |   |
| Universe-text        |   |
| Question Text        |   |
| Answer Codes         |   |
| Question Type        | **Instrument variable**   |
| Field Pane Descripti | on  |
| Fill Instructions    |   |
| Special Instructions | If SAMCNO4 = 'Refused' set SAMCNO4_FLG = 'R' elseif SAMCNO4 = 'Don't know' set SAMCNO4_FLG = 'D' else set SAMCNO4_FLG = empty endif |
| Skip Instructions    |   |
| Hard Edits           |   |
| Soft Edits           |   |
| AssocHelp            |   |

| Module               | 14   |  |
|----------------------|--|--|
| Section Name         | Adult Identification and Verification  |  |
| Part                 |  |  |
| Question ID          | AID.100_H  |  |
| Variable Name        | H_SAMCNO4  |  |
| Universe             |  |  |
| Universe-text        |  |  |
| Question Text        | Medicare refers to the Federal health insurance coverage for persons 65+ years of age and certain disabled persons under 65.  NHIS data have been linked with health-related records of government agencies such as the Centers for Medicare and Medicaid Services and the Social Security Administration. NHIS data have also been linked with death certificate data stored in the National Death Index (NDI). The NDI is a database of death certificate information provided to NCHS by State offices.  All personal identifying information is removed from the linked data files.  These are some examples of possible research studies using NHIS data together with other health-related records or the NDI:  [blt] Predicting the number of disabled persons in the U.S. based on health conditions reported in the NHIS. |  |
|                      | <ul> <li>[blt] Predicting the costs of Medicare based on health conditions reported in the NHIS.</li> <li>[blt] Studying the risk of certain diseases for persons with and without health insurance.</li> <li>[blt] Studying the health characteristics of people who retire early.</li> <li>[blt] Calculating how long a person in the U.S. might live, based on his or her education, income, or race and ethnicity.</li> </ul>  |  |
| Answer Codes         |  |  |
| Question Type        | Help Screen  |  |
| Field Pane Descripti |  |  |
| Fill Instructions    |  |  |
| Special Instructions | Associated screens: SAMCNO4  |  |
| Skip Instructions    |  |  |
| Hard Edits           |  |  |
| Soft Edits           |  |  |
| AssocHelp            |  |  |

| Module                 | 14   |  |  |
|------------------------|--|--|--|
| Section Name           | Adult Identification and Verification  |  |  |
| Part                   |  |  |  |
| Question ID            | AID.105  |  |  |
| Variable Name          | SARLINK  |  |  |
| Universe               | HHSTAT4 = S and (LNKINTRO=refused or SAMCNO4=refused or SAMCNO4=don't know or SASSN4=no SSN or SASSN4=refused or SASSN4=don't know)  |  |  |
| Universe-text          | Version 2 and Sample Adult answered refused at LNKINTRO, or answered refused or don't know at SAMCNO4 or answered no SSN or refused or don't know at SASSN4  |  |  |
| Question Text          | ?[F1]  |  |  |
|                        | May we try to link your survey data without [Fill:]?   |  |  |
|                        | * Read if necessary:   |  |  |
|                        | Any data obtained will be kept strictly private as required by law (Public Health Service Act, which is Title 42, United States Code, Section 242K; and the Confidential Information Protection y Statistical Efficiency Act, which is Title V of Public Law 107-347). |  |  |
| Answer Codes           | 1. Yes 2. No Refused Don't know  |  |  |
| Question Type          | Yes/No   |  |  |
| Field Pane Description | on Permission to link  |  |  |
| Fill Instructions      | IF LNKINTRO = RF OR ((SASSN4 = 'N' OR SASSN4 = RF OR SASSN4 = DK) AND (SAMCNO4 = RF OR SAMCNO4 = DK)) THEN   |  |  |
|                        | If ((Medicare IN FHI.ITYPE.ITYPE[SASEL].HIKIND) OR (Medigap IN   |  |  |
|                        | FHI.ITYPE.ITYPE[SASEL].HIKIND) OR (FHI.ITYPE.ITYPE[SASEL].MCAREPRB=Yes)) THEN  |  |  |
|                        | Fill := 'Medicare and Social Security numbers' else  |  |  |
|                        | Fill := 'a Social Security Number' Endif   |  |  |
|                        | ELSEIF (SAMCNO4 = RF OR SAMCNO4 = DK) THEN Fill := 'a Medicare number'   |  |  |
|                        | ELSEIF (SASSN4 = RF OR SASSN4 = DK or SASSN4 = 'N') THEN   |  |  |
|                        | Fill := 'a Social Security Number' ENDIF   |  |  |
| Special Instructions   | QUESTION SHOULD APPEAR AT THE END OF THE SAMPLE ADULT CORE AND SUPPLEMENT QUESTIONS.   |  |  |
| Skip Instructions      | [goto AWB.AWEBUSE (AWB.010_00.000)]  |  |  |
| Hard Edits             |  |  |  |
| Soft Edits             |  |  |  |

| AssocHelp | H LNKINTRO |  |
|-----------|------------|--|
| Accorhoin |            |  |
|           |            |  |

# 2015 Q1 NHIS Instrument Spec Report

| Section name: Adult Socio-Demographic Background |  |  |
|--|--|--|
| Module   | 15   |  |
| Section Name                                     | Adult Socio-Demographic Background   |  |
| Part   |  |  |
| Question ID                                      | ASD.050  |  |
| Variable Name                                    | WRKVER   |  |
| Universe   | HHSTAT4 = S and DOINGLW = 1-5  |  |
| Universe-text                                    | Sample adults 18+ who were working or not working last week  |  |
| Question Text                                    | Earlier I recorded that in the last week you were  |  |
|  | (Fill1: working for pay at a job or business.) (Fill2: with a job or business but not at work.) (Fill3: looking for work.) (Fill4: working, but not for pay, at a family-owned job or business.) (Fill5: not working at a job or business and not looking for work.) |  |
|  | Is that correct?   |  |
| Answer Codes                                     | 1. Yes 2. No Refused Don't know  |  |
| Question Type                                    | Yes/No   |  |
| Field Pane Descripti                             | Verify last week's work activity   |  |
| Fill Instructions                                | Fill1: If DOINGLW = 1 Fill2: If DOINGLW = 2 Fill3: If DOINGLW = 3 Fill4: If DOINGLW = 4 Fill5: If DOINGLW = 5  |  |
| Special Instructions                             | Storage instructions: If WRKVER = 1 then set DOINGLW2 = DOINGLW and WHYNOWK2 = WHYNOWR elseif WRKVER = Refused or Don't know then set DOINGLW2 = WRKVER endif  |  |
| Skip Instructions                                | <1>if DOINGLW2 = 1,2,4 [goto WHOWRK]<br>else if DOINGLW2 = 3,5 [goto EVERWRK]<br><2> [go to WRKCOR]<br><r,d> [go to EVERWRK]</r,d>   |  |
| Hard Edits                                       |  |  |
| Soft Edits                                       |  |  |

**AssocHelp** 

| Module               | 15   |   |
|----------------------|--|---|
| Section Name         | Adult Socio-Demographic Bac  | kground   |
| Part                 |  |   |
| Question ID          | ASD.060  |   |
| Variable Name        | WRKCOR   |   |
| Universe             | HHSTAT4 = S and [(WRKVER<br>Refused or Don't know))]   | = 2) or (SASEL ne FAMRESP and (DOINGLW =                                  |
| Universe-text        | Sample adults 18+ whose work Respondent and with an answer   | ing status was incorrect or who were not the Family or D or R to DOINGLW. |
| Question Text        | (book) A1 ? [F1]   |   |
|                      | What is your correct working st  | atus?   |
|                      | * Read answer categories.  |   |
| Answer Codes         | <ol> <li>Working for pay at a job or b</li> <li>With a job or business but no</li> <li>Looking for work</li> <li>Working, but not for pay, at a</li> <li>Not working at a job or busin</li> <li>Refused</li> <li>Don't know</li> </ol> | ot at work<br>a family-owned job or business                              |
| Question Type        | Pick One - answer list pane  |   |
| Field Pane Descripti | Correct working status   |   |
| Fill Instructions    |  |   |
| Special Instructions | Display the answer codes in the  | e answer pane in bold black.  |
|                      | Storage instructions: set DOIN   | GLW2 = WRKCOR   |
| Skip Instructions    | <1,4> [goto to WHOWRK]<br><2,5> [goto WHYNOWK2]<br><3,R,D> [goto EVERWRK]  |   |
| Hard Edits           |  |   |
| Soft Edits           |  |   |
| AssocHelp            | H_WRKCOR   |   |

| Module               | 15   |
|----------------------|--|
| Section Name         | Adult Socio-Demographic Background   |
| Part                 |  |
| Question ID          | ASD.060_H  |
| Variable Name        | H_WRKCOR   |
| Universe             |  |
| Universe-text        |  |
| Question Text        | A job exists when there is a definite arrangement for regular work on a continuing basis, and the person holding the job receives pay or other compensation for his/her work. The schedule of hours or days can be irregular as long as there is a definite arrangement to work on a continuing basis.  A business exists when machinery or equipment of substantial value is used in conducting the business; an office, store, or other place of business is maintained; or the business is advertised to the public.  An individual is working for pay if he or worked for wages, salary, commission, tips, piece-rates, or pay-in-kind (e.g., room-and-board); worked for profit in his/her own business, practice or farm; worked as a civilian for the National Guard or Dept. of Defense; or performed exchange or share work on a farm.  Have a job or business but not at work includes individuals on annual leave or vacation (paid or unpaid); on maternity or family leave (paid or unpaid); at jury duty; involved in a labor dispute that is taking place at his/her place of employment; on sick leave (paid or unpaid); on a temporary lay-off (lasting less than 30 days), and the person expects to be called back within that time period.  An individual is looking for work if he or she is conducting an active job search, which includes filling out applications or sending out resumes; placing or answering classified ads; checking union/professional registers; bidding on a contract or auditioning for a part in a play; contacting friends or relatives about possible jobs; contacting school/college university employment offices; contacting prospective employers directly; contacting public or private employment offices.  Include as working, but not for pay at least 15 hours of work per week without pay or compensation in a business or farm operated by a related household member. Volunteer efforts should not be considered as working. Likewise, unpaid internships are not considered as working. |
| Answer Codes         |  |
| Question Type        | Help Screen  |
| Field Pane Descripti | on   |
| Fill Instructions    |  |
| Special Instructions | Associated screens: WRKCOR   |
| Skip Instructions    |  |
| Hard Edits           |  |

| Soft Edits           |  |
|----------------------|--|
| AssocHelp            |  |
| Module               | 15   |
| Section Name         | Adult Socio-Demographic Background   |
| Part                 |  |
| Question ID          | ASD.062  |
| Variable Name        | DOINGLW2   |
| Universe             | HHSTAT4 = S and Sample Adult (L_NO) = FAMRESP and (DOINGLW = Refused or Don't know)  |
| Universe-text        | Sample Adults 18+ and also the family section respondent and said Refused or Don't know to the working last week status question in the family section   |
| Question Text        | Corrected Employment Status Last Week: (not displayed)   |
| Answer Codes         | 1. Working for pay at a job or business 2. With a job or business but not at work 3. Looking for work 4. Working, but not for pay, at a family-owned job or business 5. Not working at a job or business and not looking for work Refused Don't know |
| Question Type        | Procedure  |
| Field Pane Descripti | on   |
| Fill Instructions    |  |
| Special Instructions | Storage Instructions:  If (DOINGLW = Refused or Don't know) and Sample Adult (L_NO) = FAMRESP then set DOINGLW2 = DOINGLW endif  |
| Skip Instructions    | if DOINGLW2 = Refused or Don't know then [goto EVERWRK] endif  |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module               | 15  |
|----------------------|---|
| Section Name         | Adult Socio-Demographic Background  |
| Part                 |   |
| Question ID          | ASD.065   |
| Variable Name        | WHYNOWK2  |
| Universe             | HHSTAT4 = S and WRKCOR = 2,5  |
| Universe-text        | Sample Adults 18+ whose corrected working status last week was not working at a job or business and not looking for work or with a job or business but not at work  |
| Question Text        | ? [F1]  |
|                      | (Fill1: What is the main reason you did not work last week?)  |
|                      | (Fill2: What is the main reason you did not have a job or business last week?)  |
| Answer Codes         | <ol> <li>Taking care of house or family</li> <li>Going to school</li> <li>Retired</li> <li>On a planned vacation from work</li> <li>On family or maternity leave</li> <li>Temporarily unable to work for health reasons</li> <li>Have job/contract and off-season</li> <li>On layoff</li> <li>Disabled</li> <li>Other</li> <li>Refused</li> <li>Don't know</li> </ol> |
| Question Type        | Other   |
| Field Pane Descript  |   |
| Fill Instructions    | Fill1: if WRKCOR = 2 Fill2: if WRKCOR = 5   |
| Special Instructions |   |
| Skip Instructions    | <1-10,D,R> if WRKCOR = 2 then [goto WHOWRK] else [goto EVERWRK]   |
| Hard Edits           |   |
| Soft Edits           |   |
| AssocHelp            | H_WHYNOWK2  |

| Module               | 15  |
|----------------------|---|
| Section Name         | Adult Socio-Demographic Background  |
| Part                 |   |
| Question ID          | ASD.065_H   |
| Variable Name        | H_WHYNOWK2  |
| Universe             |   |
| Universe-text        |   |
| Question Text        | Taking care of house or family is any type of work around the house such as cleaning, cooking, maintaining the yard, caring for children or family, etc.  Going to school means attending any type of public or private educational establishment both in and out of the regular school system.  Retired, Temporarily unable to work for health reasons, and Disabled are respondent defined.  On Layoff means that the person is waiting to be called back to a job from which they have been temporarily laid-off or furloughed. Layoffs can be due to slack work, plant retooling or remodeling, inventory taking, and the like. Do not consider a person who was not working because of a labor dispute at his/her own place of employment as being on layoff.  Have job/contract and off-season includes school personnel (teachers, administrators, custodians, etc.) on summer vacation who have a definite arrangement, either written or oral, to return to work in the fall, are not considered to be on layoff during the summer. They may, however, be laid off from a summer job or looking for work for the summer months (but this would NOT be considered their main job or employment activity). |
| Answer Codes         |   |
| Question Type        | Help Screen   |
| Field Pane Descripti | on  |
| Fill Instructions    |   |
| Special Instructions | Associated screens:WRKCOR   |
| Skip Instructions    |   |
| Hard Edits           |   |
| Soft Edits           |   |
| AssocHeln            |   |

| Module                 | 15  |
|------------------------|---|
| Section Name           | Adult Socio-Demographic Background  |
| Part                   |   |
| Question ID            | ASD.066   |
| Variable Name          | EVERWRK   |
| Universe               | HHSTAT4 = S and DOINGLW2 = 3,5,Refused,or Don't know  |
| Universe-text          | Sample adults 18+ who were NOT working at a job or business and not looking for work or looking for work last week or didn't know or refused to provide their employment status last week |
| Question Text          | Have you ever held a job or worked at a business?   |
| Answer Codes           | 1. Yes 2. No Refused Don't know   |
| Question Type          | Yes/No  |
| Field Pane Description | on Ever worked  |
| Fill Instructions      |   |
| Special Instructions   |   |
| Skip Instructions      | <1> [goto WHOWRK]<br><2,D,R> [goto SCHOOLYR]  |
| Hard Edits             |   |
| Soft Edits             |   |
| AssocHelp              |   |

| Module               | 15   |
|----------------------|--|
| Section Name         | Adult Socio-Demographic Background   |
| Part                 |  |
| Question ID          | ASD.070  |
| Variable Name        | WHOWRK   |
| Universe             | HHSTAT4 = S and (DOINGLW2 = 1,2,4 or EVERWRK = 1)  |
| Universe-text        | Sample adults 18+ who were working last week, or who were with a job or business but not at work, or who were working but not for pay at a family-owned job or business, or who have ever worked |
| Question Text        | ? [F1]   |
|                      | (Fill1:For whom did you work at your MAIN job or business? (Name of company, business, organization or employer))  |
|                      | (Fill2: Thinking about the job you held the longest, for whom did you work? (Name of company, business, organization or employer))   |
|                      | (Fill3: Thinking about the job you held most recently, for whom did you work? (Name of company, business, organization or employer))   |
| Answer Codes         |  |
| Question Type        | Text   |
| Field Pane Descript  | tion Whom did you work for   |
| Fill Instructions    | Fill1: if DOINGLW2 = <1,2,4> Fill2: if EVERWRK = 1 and (WHYNOWK2 = 3 or AGE ge 65) Fill3: if EVERWRK = 1 and WHYNOWK2 ne 3 and AGE lt 65   |
| Special Instructions |  |
| Skip Instructions    | <90 char long,D,R> [goto KINDIND]  |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            | H_WHOWRK   |

| Module               | 15   |
|----------------------|--|
| Section Name         | Adult Socio-Demographic Background   |
| Part                 |  |
| Question ID          | ASD.070_H  |
| Variable Name        | H_WHOWRK   |
| Universe             |  |
| Universe-text        |  |
| Question Text        | Enter the sample adult's verbatim response for the name of his/her employer, business, company, or organization. |
| Answer Codes         |  |
| Question Type        | Help Screen  |
| Field Pane Descripti | on [   |
| Fill Instructions    |  |
| Special Instructions | Associated screens: WHOWRK, WHOWRKPY, WHOWRKLH   |
| Skip Instructions    |  |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module               | 15   |
|----------------------|--|
| Section Name         | Adult Socio-Demographic Background   |
| Part                 |  |
| Question ID          | ASD.080  |
| Variable Name        | KINDIND  |
| Universe             | HHSTAT4 = S and (DOINGLW2 = 1,2,4 or EVERWRK = 1)  |
| Universe-text        | Sample adults 18+ who were working last week, or who were with a job or business but not at work, or who were working but not for pay at a family-owned job or business, or who have ever worked |
| Question Text        | ? [F1] What kind of business or industry was this? (For example: TV and radio mgt., retail shoe store, State Department of Labor)  |
| Answer Codes         |  |
| Question Type        | Text   |
| Field Pane Descripti | What kind of business/industry   |
| Fill Instructions    |  |
| Special Instructions |  |
| Skip Instructions    | <90 char long,D,R> [goto KINDWRK]  |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            | H_KINDIND  |

| Module                 | 15   |
|------------------------|--|
| Section Name           | Adult Socio-Demographic Background   |
| Part                   |  |
| Question ID            | ASD.080_H  |
| Variable Name          | H_KINDIND  |
| Universe               |  |
| Universe-text          |  |
| Question Text          | Indicate both a general and specific function for employers and businesses. For example, in "copper mine" the word "mine" is general and the word "copper" is specific.  |
|                        | For Government Agencies: If the title clearly designates the main function of the agency, enter the name of the agency (e.g., the U.S. Census Bureau.) If the main function is not clear from the title, ask for and report the division or branch for which the person works. |
|                        | For Firms with more than one business: If activities are carried on in separate places, describe the business in which the person actually worked. If activities are carried on in the same place, describe the main activity.   |
|                        | For household or domestic workers: Determine if the person works for a business or private home. If it is a business, enter the name of the business. If it is a private home, enter "private home".   |
|                        | Manufacturing: Makes and sells its products in large lots to other manufacturers, wholesalers, or retailers.   |
|                        | Wholesale trade: Buys products in large quantities for resale to retailers, industrial users, or to other wholesalers.   |
|                        | Retail trade: Sells primarily to individual consumers and seldom makes products.   |
|                        | Some other kinds of business: Any other type of establishment that renders a service to individuals and/or organizations. Examples are hotels, dry cleaners, advertising agencies, restaurants, and automobile repair shops.   |
| Answer Codes           |  |
| Question Type          | Help Screen  |
| Field Pane Description | on   |
| Fill Instructions      |  |
| Special Instructions   | Associated screens: KINDIND, KINDINPY, KINDINLH  |
| Skip Instructions      |  |
| Hard Edits             |  |
| Soft Edits             |  |
| AssocHelp              |  |

| Module               | 15   |
|----------------------|--|
| Section Name         | Adult Socio-Demographic Background   |
| Part                 |  |
| Question ID          | ASD.090  |
| Variable Name        | KINDWRK  |
| Universe             | HHSTAT4 = S and (DOINGLW2 = 1,2,4 or EVERWRK = 1)  |
| Universe-text        | Sample adults 18+ who were working last week, or who were with a job or business but not at work, or who were working but not for pay at a family-owned job or business, or who have ever worked |
| Question Text        | ? [F1] What kind of work were you doing? (For example: farming, mail clerk, computer specialist.)  |
| Answer Codes         |  |
| Question Type        | Text   |
| Field Pane Descripti | on What kind of work   |
| Fill Instructions    |  |
| Special Instructions |  |
| Skip Instructions    | <90 char long,D,R> [goto IMPACT]   |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            | H_KINDWRK  |

| Module                 | 15                                |  |
|------------------------|-----------------------------------|--|
| Section Name           | Adult Socio-Demogra               | phic Background  |
| Part                   |                                   |  |
| Question ID            | ASD.090_H                         |  |
| Variable Name          | H_KINDWRK                         |  |
| Universe               |                                   |  |
| Universe-text          |                                   |  |
| Question Text          |                                   | rly state the kind of work or nature of duties performed by the on entry should describe what the person does (e.g., shipping r, inventory clerk). |
|                        |                                   | al descriptions are usually not adequate. For example, we need nurse, engineer, clerk, or teacher a person is.                                     |
|                        | For Example:<br>Inadequate        | Adequate   |
|                        | Adjuster<br>adjuster,             | Claims adjuster, brake adjuster, machine adjuster, merchandise   |
|                        |                                   | complaint adjuster, insurance adjuster   |
|                        | Engineer aerospace engineer       | Civil engineer, locomotive engineer, mechanical engineer,  |
|                        | Scientist economist               | Political scientist, physicist, sociologist, oceanographer, home   |
|                        | Teacher<br>teacher, College profe | Kindergarten teacher, High school teacher, Special education essor   |
| Answer Codes           |                                   |  |
| Question Type          | Help Screen                       |  |
| Field Pane Description | on                                |  |
| Fill Instructions      |                                   |  |
| Special Instructions   | Associated screens: I             | KINDIND, KINDWKPY, KINDWKLH  |
| Skip Instructions      |                                   |  |
| Hard Edits             |                                   |  |
| Soft Edits             |                                   |  |
| AssocHelp              |                                   |  |

| Module               | 15   |
|----------------------|--|
| Section Name         | Adult Socio-Demographic Background   |
| Part                 |  |
| Question ID          | ASD.100  |
| Variable Name        | IMPACT   |
| Universe             | HHSTAT4 = S and (DOINGLW2 = 1,2,4 or EVERWRK = 1)  |
| Universe-text        | Sample adults 18+ who were working last week, or who were with a job or business but not at work, or who were working but not for pay at a family-owned job or business, or who have ever worked |
| Question Text        | ? [F1] What were your most important activities on this job or business? (For example: sells cars, keeps account books, operates printing press.)  |
| Answer Codes         |  |
| Question Type        | Text   |
| Field Pane Descripti | Important activities   |
| Fill Instructions    |  |
| Special Instructions |  |
| Skip Instructions    | <90 char long,D,R> [goto SUPERVIS]   |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            | H_IMPACT   |

| Module                             | 15  |
|------------------------------------|---|
| Section Name                       | Adult Socio-Demographic Background  |
| Part                               |   |
| Question ID                        | ASD.100_H   |
| Variable Name                      | H_IMPACT  |
| Universe                           |   |
| Universe-text                      |   |
| Question Text                      | Detail the kind of work or duties the person performs.  |
|                                    | The entry to this item must include enough additional information for a precise occupational classification. Usually a few words telling what the person actually does or the tools he/she uses will suffice.  For example, two people with the same job title, "Telephone Co. serviceman", may have different activities such as installing phones in homes or repairing telephone transmission lines. |
| Answer Codes                       |   |
| Question Type Field Pane Descripti | Help Screen   |
| •                                  |   |
| Fill Instructions                  |   |
| Special Instructions               | Associated screens: IMPACT, IMPACTPY, IMPACTLH  |
| Skip Instructions                  |   |
| Hard Edits                         |   |
| Soft Edits                         |   |
| AssocHelp                          |   |

| Module               | 15   |
|----------------------|--|
| Section Name         | Adult Socio-Demographic Background   |
| Part                 |  |
| Question ID          | ASD.105_00.010   |
| Variable Name        | SUPERVIS   |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and (DOINGLW2 IN ('1','2','4') or EVERWRK='1')   |
| Universe-text        | Sample adults 18+ who were working last week, or who were with a job or business but not at work, or who were working but not for pay at a family-owned job or business, or who have ever worked |
| Question Text        | * Ask if necessary.  Did you supervise other employees as part of your job?  |
| Answer Codes         | 1. Yes 2. No Refused Don't know  |
| Question Type        | Yes/No   |
| Field Pane Descripti | on Supervise   |
| Fill Instructions    |  |
| Special Instructions |  |
| Skip Instructions    | <1,2,R,D> [goto WRKCAT]  |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module               | 15  |
|----------------------|---|
| Section Name         | Adult Socio-Demographic Background  |
| Part                 |   |
| Question ID          | ASD.110   |
| Variable Name        | WRKCAT  |
| Universe             | HHSTAT4 = S and (DOINGLW2 = 1,2,4 or EVERWRK = 1)   |
| Universe-text        | Sample adults 18+ who were working last week, or who were with a job or business but not at work, or who were working but not for pay at a family-owned job or business, or who have ever worked  |
| Question Text        | (book) A2 ? [F1]  |
|                      | (Fill1: Looking at the card, which of these best describes your current job or work situation?)   |
|                      | (Fill2: Looking at the card, which of these best describes the job you held for the longest time?)  |
|                      | (Fill3: Looking at the card, which of these best describes the job you held most recently?)   |
|                      | * Read answer choices if necessary.   |
| Answer Codes         | An employee of a PRIVATE company, business, or individual for wages, salary, or commission     A FEDERAL government employee     A STATE government employee     A LOCAL government employee     Self-employed in OWN business, professional practice or farm     Working WITHOUT PAY in family-owned business or farm     Refused     Don't know |
| Question Type        | Pick One - answer list pane   |
| Field Pane Descript  | Class of worker   |
| Fill Instructions    | Fill1: if DOINGLW2 = <1,2,4> Fill2: if EVERWRK = 1 and (WHYNOWK2 = 3 or AGE ge 65) Fill3: if EVERWRK = 1 and WHYNOWK2 ne 3 and AGE lt 65  |
| Special Instructions |   |
| Skip Instructions    | <1-4,6,D,R>[goto LOCALLNO]<br><5> [goto BUSINC]   |
| Hard Edits           |   |
| Soft Edits           |   |
| AssocHelp            | H_WRKCAT  |

| Module                 | 15   |
|------------------------|--|
| Section Name           | Adult Socio-Demographic Background   |
| Part                   |  |
| Question ID            | ASD.110_H  |
| Variable Name          | H_WRKCAT   |
| Universe               |  |
| Universe-text          |  |
| Question Text          | Private company or business: This employer may be a large corporation or a single individual, but must not be part of any government organization. This category also includes work for private organizations doing contract work for government agencies.  Federal government: Include persons working for any branch of the federal government including persons who were elected to paid federal offices and civilian employees of the Armed Forces and some members of the National Guard. Include employees of international organizations like the United Nations and employees of foreign governments such as a person employed by the French embassy.  State government: Report this category for employees of State governments, which include paid state officials, state police, employees of state universities and colleges, and statewide JTPP administrators.  Local government: Report for employees of counties, cities, towns, and other local areas. Included here would be city-owned bus lines, electrical power companies, water and sewage services, etc. Employees of public elementary and secondary schools who worked for local governments should also be here.  Self employed: Person working for profit or fees in their own business, shop, office, farm, etc. Include persons who have their own tools or equipment and provide services |
|                        | on a contract, subcontract, or job basis, such as carpenters, plumbers, independent taxicab operators, or independent truckers.  |
|                        | Working without pay: Working on a farm on in a business operated by a related member of the household, without receiving wages or salary for work performed.   |
| Answer Codes           |  |
| Question Type          | Help Screen  |
| Field Pane Description | on   |
| Fill Instructions      |  |
| Special Instructions   | Associated screens: WRKCAT, WRKCATPY, WRKCATLH   |
| Skip Instructions      |  |
| Hard Edits             |  |
| Soft Edits             |  |
| AssocHelp              |  |

| Module                                       | 15                                      |
|--|---|
| Section Name                                 | Adult Socio-Demographic Background      |
| Part   |   |
| Question ID                                  | ASD.112                                 |
| Variable Name                                | BUSINC                                  |
| Universe                                     | HHSTAT4 = S and WRKCAT = 5              |
| Universe-text                                | Sample adults 18+ who are self-employed |
| Question Text                                | Is this business incorporated?          |
| Answer Codes                                 | 1. Yes 2. No Refused Don't know         |
| Question Type                                | Yes/No                                  |
| Field Pane Description Incorporated business |   |
| Fill Instructions                            |   |
| Special Instructions                         |   |
| Skip Instructions                            | <1,2,D,R> [goto LOCALLNO]               |
| Hard Edits                                   |   |
| Soft Edits                                   |   |
| AssocHelp                                    |   |

| Module                 | 15   |
|------------------------|--|
| Section Name           | Adult Socio-Demographic Background   |
| Part                   |  |
| Question ID            | ASD.120  |
| Variable Name          | LOCALLNO   |
| Universe               | HHSTAT4 = S and (DOINGLW2 = 1,2,4 or EVERWRK = 1)  |
| Universe-text          | Sample adults 18+ who were working last week, or who were with a job or business but not at work, or who were working but not for pay at a family-owned job or business, or who have ever worked   |
| Question Text          | (book) A3  |
| Answer Codes           | Thinking about (Fill1: this MAIN job or business) (Fill2: your last week at the job you held the longest) (Fill3: your last week at the job you held most recently) how many people (Fill4:work/Fill5: worked) at this location? Please include yourself  * "People" includes both FULL- and PART-time employees; "location" refers to the street address of the workplace.  1. 1 employee 2. 2-9 employees 3. 10-24 employees 4. 25-49 employees 5. 50-99 employees 6. 100-249 employees 7. 250-499 employees 8. 500-999 employees 9. 1000 employees or more Refused Don't know |
| Question Type          | Pick One - answer list pane  |
| Field Pane Description | ·  |
| Fill Instructions      | Fill1: If [DOINGLW2 eq <1,2,4>] Fill2: if [EVERWRK eq <1> and (WHYNOWK2 eq 03 or AGE ge 65)] Fill3: if [EVERWRK eq <1> and WHYNOWK2 ne 03 and AGE lt 65] Fill4: if [DOINGLW2 eq <1,2,4> Fill5: if [EVERWRK eq 1]   |
| Special Instructions   |  |
| Skip Instructions      | <1-8, R,D> [goto WRKLONGN]   |
| Hard Edits             |  |
| Soft Edits             |  |
| AssocHelp              |  |

| Module               | 15   |
|----------------------|--|
| Section Name         | Adult Socio-Demographic Background   |
| Part                 |  |
| Question ID          | ASD.140_01   |
| Variable Name        | WRKLONGN   |
| Universe             | HHSTAT4 = S and (DOINGLW2 = 1,2,4 or EVERWRK = 1)  |
| Universe-text        | Sample adults 18+ who were working last week, or who were with a job or business but not at work, or who were working but not for pay at a family-owned job or business, or who have ever worked |
| Question Text        | ? [F1]   |
|                      | 1 of 2   |
|                      | About how long (Fill1: have you worked at this MAIN job or business?) (Fill2: did you work at the job you held the longest?) (Fill3: did you work at the job you held most recently?)            |
|                      | * Enter number.  |
| Answer Codes         | 1-365<br>Refused<br>Don't know   |
| Question Type        | Integer  |
| Field Pane Descript  | ion Duration at this job: Number of units  |
| Fill Instructions    | Fill1: If DOINGLW2 = <1,2,4> Fill2: if EVERWRK = <1> and (WHYNOWK2 = 3 or AGE ge 65) Fill3: if EVERWRK = <1> and WHYNOWK2 ne 3 and AGE lt 65   |
| Special Instructions | Store D,R in WRKLONGT  |
| Skip Instructions    | <1-365> [goto WRKLONGT] <d,r> if EVERWRK eq 1 and (WHYNOWK2 eq 03 or AGE GE 65)  [goto HOURPD];</d,r>  |
|                      | Else if (EVERWRK eq 1 and WHYNOWK2 = 1,2,4-10, D,R," " and AGE lt 65) or (DOINGLW2 = 1,2,4)  [goto WRKLONGH]   |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            | H_WRKLONGN   |

| Module                 | 15   |
|------------------------|--|
| Section Name           | Adult Socio-Demographic Background   |
| Part                   |  |
| Question ID            | ASD.140_01_H   |
| Variable Name          | H_WRKLONGN   |
| Universe               |  |
| Universe-text          |  |
| Question Text          | Main job or business refers to the job or business which is the primary source of a person's income. |
| Answer Codes           |  |
| Question Type          | Help Screen  |
| Field Pane Description | on   |
| Fill Instructions      |  |
| Special Instructions   | Associated screens: WRKLONGN   |
| Skip Instructions      |  |
| Hard Edits             |  |
| Soft Edits             |  |
| AssocHelp              |  |

| Module               | 15   |
|----------------------|--|
| Section Name         | Adult Socio-Demographic Background   |
| Part                 |  |
| Question ID          | ASD.140_02   |
| Variable Name        | WRKLONGT   |
| Universe             | HHSTAT4 = S and (DOINGLW2 = 1,2,4 or EVERWRK = 1) and WRKLONGN ne Refused or Don't know  |
| Universe-text        | Sample adults 18+ (who were working last week, or who were with a job or business but not at work, or who were working but not for pay at a family-owned job or business, or who have ever worked) and who gave a number entry in WRKLONGN |
| Question Text        | 2 of 2   |
|                      | * Enter time period.   |
| Answer Codes         | 1. Days(s) 2. Week(s) 3. Month(s) 4. Year(s)   |
| Question Type        | Pick One - answer list pane  |
| Field Pane Descript  | Duration at this job: Time units   |
| Fill Instructions    |  |
| Special Instructions | r  |
| Skip Instructions    | <4> if WRKLONGN gt AGE then [goto ERR_WRKLONGT]  |
|                      | <1-4> if EVERWRK = 1 and (WHYNOWK2 = 3 or AGE ge 65) then [goto HOURPD] else if (EVERWRK eq 1 and WHYNOWK2 = 1,2,4-10, D,R," " and AGE lt 65) or (DOINGLW2 = 1,2,4) [goto WRKLONGH]  |
| Hard Edits           | ERR_WRKLONGT   |
|                      | * Number of years is greater than age.  * Please correct.  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module               | 15  |                                |                               |
|----------------------|---|--------------------------------|-------------------------------|
| Section Name         | Adult Socio-Demographic Bac   | kground                        |                               |
| Part                 |   |                                |                               |
| Question ID          | ASD.146   |                                |                               |
| Variable Name        | WRKLONGH  |                                |                               |
| Universe             | HHSTAT4 = S and (DOINGLW and AGE It 65))  | 2 = 1,2,4 or (EVERWRK = 1      | 1 and WHYNOWK2 ne 3           |
| Universe-text        | Sample adults 18+ (who were work not at work, or who were wor (who have ever worked and | orking but not for pay at a fa | amily-owned job or business,) |
| Question Text        | ? [F1]  |                                |                               |
|                      | (Fill1: Is this MAIN job or busine  | ess the job you have held fo   | or the longest?)              |
|                      | (Fill2: Was your most recently h  | neld job also the job you hel  | d the longest?)               |
| Answer Codes         | 1. Yes<br>2. No<br>Refused<br>Don't know  |                                |                               |
| Question Type        | Yes/No  |                                |                               |
| Field Pane Descripti | on Longest job  |                                |                               |
| Fill Instructions    | [Fill1: If DOINGLW2 eq 1,2,4, ]<br>[Fill2: if EVERWRK eq 1 and W                        | HYNOWK2 ne 03 and AGE          | ≣ It 65 ]                     |
| Special Instructions |   |                                |                               |
| Skip Instructions    | <1,2,R,D> [goto HOURPD]   |                                |                               |
| Hard Edits           |   |                                |                               |
| Soft Edits           |   |                                |                               |
| AssocHelp            | H_WRKLONG   |                                |                               |

| Module               | 15  |
|----------------------|---|
| Section Name         | Adult Socio-Demographic Background  |
| Part                 |   |
| Question ID          | ASD.150   |
| Variable Name        | HOURPD  |
| Universe             | HHSTAT4 = S and (DOINGLW2 = 1,2,4 or EVERWRK = 1)   |
| Universe-text        | Sample adults 18+ who were working last week, or who were with a job or business but not at work, or who were working but not for pay at a family-owned job or business, or who have ever worked          |
| Question Text        | (Fill1: Are you paid by the hour at this MAIN job or business?) (Fill2: Were you paid by the hour on the job you held the longest?) (Fill3: Were you paid by the hour on the job you held most recently?) |
| Answer Codes         | 1. Yes 2. No Refused Don't know   |
| Question Type        | Yes/No  |
| Field Pane Descript  | ion Paid by the hour  |
| Fill Instructions    | Fill1: if DOINGLW2 = <1,2,4> Fill2: if EVERWRK = 1 and (WHYNOWK2 = 3 or AGE ge 65) Fill3: if EVERWRK = 1 and WHYNOWK2 ne 3 and AGE lt 65  |
| Special Instructions |   |
| Skip Instructions    | <1,2,D,R> [goto PDSICK]   |
| Hard Edits           |   |
| Soft Edits           |   |
| AssocHelp            |   |

| Module               | 15  |
|----------------------|---|
| Section Name         | Adult Socio-Demographic Background  |
| Part                 |   |
| Question ID          | ASD.160   |
| Variable Name        | PDSICK  |
| Universe             | HHSTAT4 = S and (DOINGLW2 = 1,2,4 or EVERWRK = 1)   |
| Universe-text        | Sample adults 18+ who were working last week, or who were with a job or business but not at work, or who were working but not for pay at a family-owned job or business, or who have ever worked                          |
| Question Text        | (Fill1: Do you have paid sick leave on this MAIN job or business? (Fill2: Did you ever have paid sick leave on the job you held the longest? (Fill3: Did you ever have paid sick leave on the job you held most recently? |
| Answer Codes         | 1. Yes 2. No Refused Don't know   |
| Question Type        | Yes/No  |
| Field Pane Descript  | ion Paid sick leave   |
| Fill Instructions    | Fill1: if DOINGLW2 = <1,2,4> Fill2: if EVERWRK = 1 and (WHYNOWK2 = 3 or AGE ge 65) Fill3: if EVERWRK = 1 and WHYNOWK2 ne 3 and AGE lt 65  |
| Special Instructions |   |
| Skip Instructions    | <1,2,D,R> if DOINGLW2 = 1,2,4 then [goto ONEJOB]; else if DOINGLW2=3,5 then [goto WRKLYR2]; else if DOINGLW2=D, R then [goto next section]  |
| Hard Edits           |   |
| Soft Edits           |   |
| AssocHelp            |   |

| Module                 | 15  |
|------------------------|---|
| Section Name           | Adult Socio-Demographic Background  |
| Part                   |   |
| Question ID            | ASD.170   |
| Variable Name          | ONEJOB  |
| Universe               | HHSTAT4 = S and DOINGLW2 = 1,2,4  |
| Universe-text          | Sample adults 18+ who were working last week, or who were with a job or business but not at work, or who were working but not for pay at a family-owned job or business |
| Question Text          | Do you have more than one job or business?  |
| Answer Codes           | 1. Yes 2. No Refused Don't know   |
| Question Type          | Yes/No  |
| Field Pane Description | on More than one job  |
| Fill Instructions      |   |
| Special Instructions   |   |
| Skip Instructions      | <1,2,R,D> if WRKLONGH=2, then [goto WHOWRKLH];<br>else [goto WRKARRNG]  |
| Hard Edits             |   |
| Soft Edits             |   |
| AssocHelp              |   |

| Module                                       | 15  |  |
|--|---|--|
| Section Name                                 | Adult Socio-Demographic Background  |  |
| Part   |   |  |
| Question ID                                  | ASD.210_00.000  |  |
| Variable Name                                | WRKLYR2   |  |
| Universe                                     | HHSTAT4 ='S' and AGE ge '18' and (DOINGLW2 IN ('3', '5'))   |  |
| Universe-text                                | Sample adults 18+ who were looking for work or who were not working at a job or business AND who were not looking for work in the last week |  |
| Question Text                                | ? [F1]  |  |
|  | Although you did not work last week, did you have a job or business at any time in the PAST 12 MONTHS?                                      |  |
| Answer Codes                                 | 1. Yes 2. No Refused Don't know   |  |
| Question Type                                | Yes/No  |  |
| Field Pane Description Worked past 12 months |   |  |
| Fill Instructions                            |   |  |
| Special Instructions                         |   |  |
| Skip Instructions                            | <1,2,D,R> [goto next section]   |  |
| Hard Edits                                   |   |  |
| Soft Edits                                   |   |  |
| AssocHelp                                    | H_WRKLYR2   |  |

| Module               | 15   |
|----------------------|--|
| Section Name         | Adult Socio-Demographic Background   |
| Part                 |  |
| Question ID          | ASD.210_00.000_H   |
| Variable Name        | H_WRKLYR2  |
| Universe             |  |
| Universe-text        |  |
| Question Text        | A job exists when there is a definite arrangement for regular work on a continuing basis, and the person holding the job receives pay or other compensation for his/her work. The schedule of hours or days can be irregular as long as there is a definite arrangement to work on a continuing basis.  Include:  Persons who worked for wages, salary, commission, tips, piece-rates, or pay-in-kind. Unpaid workers in a family business or farm, persons who worked without pay on a farm or unincorporated business operated by a related member of the household  A business exists when machinery or equipment of substantial value is used in conducting the business; an office, store, or other place of business is maintained; or the business is advertised to the public. |
| Answer Codes         |  |
| Question Type        | Help Screen  |
| Field Pane Descripti | on   |
| Fill Instructions    |  |
| Special Instructions | Associated screens: WRKLYR2  |
| Skip Instructions    |  |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module               | 15  |
|----------------------|---|
| Section Name         | Adult Socio-Demographic Background  |
| Part                 |   |
| Question ID          | ASD.220_00.010  |
| Variable Name        | WHOWRKLH  |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and DOINGLW2 IN ('1','2','4') and WRKLONGH='2'  |
| Universe-text        | Sample adults 18+ whose current, MAIN job is NOT the job they held the longest  |
| Question Text        | ? [F1]  |
|                      | Thinking of ALL the jobs or businesses you have ever had, including work done in the Armed Forces, for whom did you work the longest? (Name of company, business, organization or employer) |
| Answer Codes         | Verbatim,R,D  |
| Question Type        | Verbatim  |
| Field Pane Descripti | on Whom did you work for  |
| Fill Instructions    |   |
| Special Instructions | Use Help Screen H_WHOWRK  |
| Skip Instructions    | <allow 90,r,d=""> [goto KINDINLH]</allow>   |
| Hard Edits           |   |
| Soft Edits           |   |
| AssocHelp            |   |

| Module  | 15   |  |
|---|--|--|
| Section Name  | Adult Socio-Demographic Background   |  |
| Part  |  |  |
| Question ID   | ASD.220_00.020   |  |
| Variable Name   | KINDINLH   |  |
| Universe  | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and DOINGLW2 IN ('1','2','4') and WRKLONGH='2'                 |  |
| Universe-text   | Sample adults 18+ whose current, MAIN job is NOT the job they held the longest   |  |
| Question Text   | ? [F1]   |  |
|   | What kind of business or industry was this? (For example: TV and radio mgt., retail shoe store, State Department of Labor) |  |
| Answer Codes  | Verbatim,R,D   |  |
| Question Type   | Verbatim   |  |
| Field Pane Description What kind of business/industry |  |  |
| Fill Instructions                                     |  |  |
| Special Instructions                                  | Use Help Screen H_KINDIND  |  |
| Skip Instructions                                     | <allow 90,r,d=""> [goto KINDWKLH]</allow>  |  |
| Hard Edits  |  |  |
| Soft Edits  |  |  |
| AssocHelp   |  |  |

| Module                 | 15   |
|------------------------|--|
| Section Name           | Adult Socio-Demographic Background   |
| Part                   |  |
| Question ID            | ASD.220_00.030   |
| Variable Name          | KINDWKLH   |
| Universe               | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and DOINGLW2 IN ('1','2','4') and WRKLONGH='2' |
| Universe-text          | Sample adults 18+ whose current, MAIN job is NOT the job they held the longest                             |
| Question Text          | ? [F1]   |
|                        | What kind of work were you doing? (For example: farming, mail clerk, computer specialist                   |
| Answer Codes           | Verbatim,R,D   |
| Question Type          | Verbatim   |
| Field Pane Description | on What kind of work   |
| Fill Instructions      |  |
| Special Instructions   | Use Help Screen H_KINDWRK  |
| Skip Instructions      | <allow 90,r,d=""> [goto IMPACTLH]</allow>  |
| Hard Edits             |  |
| Soft Edits             |  |
| AssocHelp              |  |

| Module                                      | 15   |  |
|---|--|--|
| Section Name                                | Adult Socio-Demographic Background   |  |
| Part  |  |  |
| Question ID                                 | ASD.220_00.040   |  |
| Variable Name                               | IMPACTLH   |  |
| Universe                                    | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and DOINGLW2 IN ('1','2','4') and WRKLONGH='2'                               |  |
| Universe-text                               | Sample adults 18+ whose current, MAIN job is NOT the job they held the longest   |  |
| Question Text                               | ? [F1]   |  |
|   | What were your most important activities on this job or business? (For example: sell cars, keeps account books, operates printing press) |  |
| Answer Codes                                | Verbatim,R,D   |  |
| Question Type                               | Verbatim   |  |
| Field Pane Description Important activities |  |  |
| Fill Instructions                           |  |  |
| Special Instructions                        | Use Help Screen H_IMPACT   |  |
| Skip Instructions                           | <allow 90,r,d=""> [goto WRKCATLH]</allow>  |  |
| Hard Edits                                  |  |  |
| Soft Edits                                  |  |  |
| AssocHelp                                   |  |  |

| Module                 | 15  |                            |                             |
|------------------------|---|----------------------------|-----------------------------|
| Section Name           | Adult Socio-Demographic Backg   | round                      |                             |
| Part                   |   |                            |                             |
| Question ID            | ASD.220_00.050  |                            |                             |
| Variable Name          | WRKCATLH  |                            |                             |
| Universe               | HHSTAT4='S' and (AGE GE '018' ('1','2','4') and WRKLONGH='2'  | and AGE not IN ('997','99  | 9')) and DOINGLW2 IN        |
| Universe-text          | Sample adults 18+ whose current   | , MAIN job is NOT the job  | they held the longest       |
| Question Text          | (book) A2 ? [F1]  |                            |                             |
|                        | Looking at the card, which of thes longest time?  | e best describes the job o | r business you held for the |
| Answer Codes           | An employee of a PRIVATE company, business, or individual for wages, salary, or commission     A FEDERAL government employee     A STATE government employee     A LOCAL government employee     Self-employed in OWN business, professional practice or farm     Working WITHOUT PAY in family-owned business or farm     Refused     Don't know |                            |                             |
| Question Type          | Pick One - answer list pane   |                            |                             |
| Field Pane Description | on Class of worker  |                            |                             |
| Fill Instructions      |   |                            |                             |
| Special Instructions   | Use Help Screen H_WRKCAT  |                            |                             |
| Skip Instructions      | <1-6,R,D> [goto WRKLGLHN]   |                            |                             |
| Hard Edits             |   |                            |                             |
| Soft Edits             |   |                            |                             |
| AssocHelp              |   |                            |                             |

| Module               | 15   |  |
|----------------------|--|--|
| Section Name         | Adult Socio-Demographic Background   |  |
| Part                 |  |  |
| Question ID          | ASD.220_00.060   |  |
| Variable Name        | WRKLGLHN   |  |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and DOINGLW2 IN ('1','2','4') and WRKLONGH='2' |  |
| Universe-text        | Sample adults 18+ whose current, MAIN job is NOT the job they held the longest                             |  |
| Question Text        | 1 of 2   |  |
| Answer Codes         | About how long did you work at the job or business you held the longest?  * Enter number.  1-365           |  |
|                      | Refused<br>Don't know  |  |
| Question Type        | Integer  |  |
| Field Pane Descripti | On Duration at this job: Number of units   |  |
| Fill Instructions    |  |  |
| Special Instructions | Store R,D in WRKLGLHT  |  |
| Skip Instructions    | <1-365> [goto WRKLGLHT]<br><r,d> [if DOINGLW2 IN (1,2,4), goto WRKARRNG; else goto ACN.HYPEV]</r,d>        |  |
| Hard Edits           |  |  |
| Soft Edits           |  |  |
| AssocHelp            |  |  |

| Module  | 15   |  |
|---|--|--|
| Section Name  | Adult Socio-Demographic Background   |  |
| Part  |  |  |
| Question ID   | ASD.220_00.070   |  |
| Variable Name   | WRKLGLHT   |  |
| Universe  | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and DOINGLW2 IN ('1','2','4') and WRKLONGH='2' and WRKLONGN not IN ('R','D') |  |
| Universe-text   | Sample adults 18+ whose current, MAIN job is NOT the job they held the longest and who gave a number at WRKLGLHN                         |  |
| Question Text   | 2 of 2   |  |
|   | * Enter time period.   |  |
| Answer Codes  | 1. Days(s) 2. Week(s) 3. Month(s) 4. Year(s) Refused Don't know  |  |
| Question Type   | Pick One - answer list pane  |  |
| Field Pane Description Duration at this job: Time units |  |  |
| Fill Instructions                                       |  |  |
| Special Instructions                                    |  |  |
| Skip Instructions                                       | <1-4,R,D> [if DOINGLW2 IN(1,2,4) then goto WRKARRNG; else goto ACN.HYPEV]  |  |
| Hard Edits  |  |  |
| Soft Edits  |  |  |
| AssocHelp   |  |  |

| Module               | 15   |  |
|----------------------|--|--|
| Section Name         | Adult Socio-Demographic Background   |  |
| Part                 |  |  |
| Question ID          | ASD.220_00.080   |  |
| Variable Name        | WRKARRNG   |  |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and DOINGLW2 IN ('1','2','4')  |  |
| Universe-text        | Sample adults 18+ who are currently employed   |  |
| Question Text        | ? [F1]   |  |
|                      | The next set of questions refers to your [fill: job as a (KINDWRK) with (WHOWRK)/current, MAIN job]. Which of the following best describes your work arrangement?  * Read categories below.  |  |
| Answer Codes         | 1. You work as an independent contractor, independent consultant, or freelance worker 2. You are paid by a temporary agency 3. You work for a contractor who provides workers and services to others under contract 4. You are a regular, permanent employee (standard work arrangement) 5. Some other work arrangement Refused Don't know |  |
| Question Type        | Pick One - answer list pane  |  |
| Field Pane Descripti |  |  |
| Fill Instructions    | if KINDWRK not IN (R,D) and WHOWRK not IN (R,D) then fill: "job as a (KINDWRK) with (WHOWRK)"; else fill "current, MAIN job"   |  |
| Special Instructions |  |  |
| Skip Instructions    | <1-5,R,D> [goto WRKSCHED]  |  |
| Hard Edits           |  |  |
| Soft Edits           |  |  |
| AssocHeln            |  |  |

| Module               | 15   |
|----------------------|--|
| Section Name         | Adult Socio-Demographic Background   |
| Part                 |  |
| Question ID          | ASD.220_00.080_H   |
| Variable Name        | H_WRKARRNG   |
| Universe             |  |
| Universe-text        |  |
| Question Text        | If the phrase "your current, MAIN job" is included in the question text, we are referring to the MAIN job the respondent held last week (and reported on earlier).  If the respondent started a new job the week of the interview, we still want him/her to answer about the MAIN job or business he/she held last week (and reported on earlier).  Also, if the respondent is no longer working the MAIN job or business he/she held last week (and reported on earlier), we still want him/her to answer about that job. |
| Answer Codes         |  |
| Question Type        | Help screen  |
| Field Pane Descripti | ion  |
| Fill Instructions    |  |
| Special Instructions | Associated screens: WORUNEMP, HARASSED, SAFETY, WORKWFAM, EXERTION   |
| Skip Instructions    |  |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module                               | 15   |  |
|--------------------------------------|--|--|
| Section Name                         | Adult Socio-Demographic Background   |  |
| Part                                 |  |  |
| Question ID                          | ASD.220_00.090   |  |
| Variable Name                        | WRKSCHED   |  |
| Universe                             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and DOINGLW2 IN ('1','2','4')  |  |
| Universe-text                        | Sample adults 18+ who are currently employed   |  |
| Question Text                        | ? [F1]   |  |
|                                      | Which of the following best describes the hours you usually work?  * Read categories below.  |  |
| Answer Codes                         | 1. A regular daytime schedule 2. A regular evening shift 3. A regular night shift 4. An irregular schedule such as rotating shifts, split shifts, or some other schedule where the hours change from day to day or week to week Refused Don't know |  |
| Question Type                        | Pick One - answer list pane  |  |
| Field Pane Description Work schedule |  |  |
| Fill Instructions                    |  |  |
| Special Instructions                 |  |  |
| Skip Instructions                    | <1-4,R,D> [goto NIGHTWK]   |  |
| Hard Edits                           |  |  |
| Soft Edits                           |  |  |
| AssocHelp                            |  |  |

| Module                 | 15   |  |
|------------------------|--|--|
| Section Name           | Adult Socio-Demographic Background   |  |
| Part                   |  |  |
| Question ID            | ASD.220_00.090_H   |  |
| Variable Name          | H_WRKSCHED   |  |
| Universe               |  |  |
| Universe-text          |  |  |
| Question Text          | A regular daytime schedule: this is when most of your shift is between the hours of 6 AM and 6 PM.   |  |
|                        | A regular evening shift: this is when most of your shift is between the hours of 2 PM and midnight.  |  |
|                        | A regular night shift: this is when most of your shift is between the hours of 9 PM and 8 AM.  |  |
|                        | Irregular schedules include:   |  |
|                        | A rotating shift: a work shift that changes periodically from days to evenings or nights.  A split shift: consisting of two distinct work periods each day.  Any other schedule.  If the respondent started a new job the week of the interview, we still want him/her to answer about the MAIN job or business he/she held last week (and reported on earlier).  Also, if the respondent is no longer working the MAIN job or business he/she held last week (and reported on earlier), we still want him/her to answer about that job. |  |
|                        |  |  |
|                        |  |  |
|                        |  |  |
|                        |  |  |
| Answer Codes           |  |  |
| Question Type          | Help screen  |  |
| Field Pane Description | on   |  |
| Fill Instructions      |  |  |
| Special Instructions   |  |  |
| Skip Instructions      |  |  |
| Hard Edits             |  |  |
| Soft Edits             |  |  |
| AssocHelp              |  |  |

| Module               | 15   |
|----------------------|--|
| Section Name         | Adult Socio-Demographic Background   |
| Part                 |  |
| Question ID          | ASD.220_00.100   |
| Variable Name        | NIGHTWK  |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and DOINGLW2 IN ('1','2','4')                              |
| Universe-text        | Sample adults 18+ who are currently employed   |
| Question Text        | ? [F1]   |
| Answer Codes         | DURING THE PAST 30 DAYS, did you work ANY amount of time between 1:00 AM and 5:00 AM?  1. Yes 2. No Refused Don't know |
| Question Type        | Yes/No   |
| Field Pane Descripti | on Night work  |
| Fill Instructions    |  |
| Special Instructions |  |
| Skip Instructions    | <1> [goto NIGHTFRQ]<br><2,R,D> [goto WORKWFAM]   |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module                             | 15   |
|------------------------------------|--|
| Section Name                       | Adult Socio-Demographic Background   |
| Part                               |  |
| Question ID                        | ASD.220_00.100_H   |
| Variable Name                      | H_NIGHTWK  |
| Universe                           |  |
| Universe-text                      |  |
| Question Text                      | If the respondent started a new job the week of the interview, we still want him/her to answer about the MAIN job or business he/she held last week (and reported on earlier).  Also, if the respondent is no longer working the MAIN job or business he/she held last week (and reported on earlier), we still want him/her to answer about that job. |
| Answer Codes                       |  |
| Question Type Field Pane Descripti | Help screen  |
| Fill Instructions                  |  |
| Special Instructions               | Associated screens: NIGHTFRQ, HARASFRQ, SAFCLIMT, JOBDMAND, JOBCNTRL, JOBSPPRT, STAND, SMOKEXP, HLTHPROM, HPROMPAR   |
| Skip Instructions                  |  |
| Hard Edits                         |  |
| Soft Edits                         |  |
| AssocHelp                          |  |

| Module               | 15   |
|----------------------|--|
| Section Name         | Adult Socio-Demographic Background   |
| Part                 |  |
| Question ID          | ASD.220_00.105   |
| Variable Name        | NIGHTFRQ   |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and DOINGLW2 IN ('1','2','4') and NIGHTWK='1'                |
| Universe-text        | Sample adults 18+ who are currently employed and worked between the hours of 1:00 AM and 5:00 AM during the past 30 days |
| Question Text        | ? [F1]   |
|                      | DURING THE PAST 30 DAYS, on how many days did you work ANY amount of time between 1:00 AM and 5:00 AM?                   |
| Answer Codes         | 1-30<br>Refused<br>Don't know  |
| Question Type        | Integer  |
| Field Pane Descripti | on Night work - days   |
| Fill Instructions    |  |
| Special Instructions | Use Help Screen H_NIGHTWK  |
| Skip Instructions    | <1-30,R,D> [goto WORKWFAM]   |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module                                     | 15   |   |  |
|--|--|---|--|
| Section Name                               | Adult Socio-Demographic Bac  | kground   |  |
| Part                                       |  |   |  |
| Question ID                                | ASD.220_00.110   |   |  |
| Variable Name                              | WORKWFAM   |   |  |
| Universe                                   | HHSTAT4='S' and (AGE GE '0 ('1','2','4')   | 18' and AGE not IN ('997','999')) and DOINGLW2 IN   |  |
| Universe-text                              | Sample adults 18+ who are cur  | rently employed   |  |
| Question Text                              | ? [F1]   |   |  |
|  | (WHOWRK)/current, MAIN job disagree, or strongly disagree v  | about your [fill: job as a (KINDWRK) with   . Please tell me whether you strongly agree, agree, with each of these statements.    Pre with my personal or family life." |  |
| Answer Codes                               | Strongly agree     Agree     Disagree     Strongly disagree     Refused     Don't know                                       |   |  |
| Question Type Pick One - answer list pane  |  |   |  |
| Field Pane Description Work-family balance |  |   |  |
| Fill Instructions                          | if KINDWRK not IN (R,D) and WHOWRK not IN (R,D) then fill: "job as a (KINDWRK) with (WHOWRK)"; else fill "current, MAIN job" |   |  |
| Special Instructions                       | uctions Use Help Screen H_WRKARRNG   |   |  |
| Skip Instructions                          | <1-4,R,D> [goto JOBDMAND]  |   |  |
| Hard Edits                                 |  |   |  |
| Soft Edits                                 |  |   |  |
| AssocHelp                                  |  |   |  |

| Module               | 15  |   |
|----------------------|---|---|
| Section Name         | Adult Socio-Demographic Bac   | kground   |
| Part                 |   |   |
| Question ID          | ASD.220_00.120  |   |
| Variable Name        | JOBDMAND  |   |
| Universe             | HHSTAT4='S' and (AGE GE '0 ('1','2','4')  | 18' and AGE not IN ('997','999')) and DOINGLW2 IN |
| Universe-text        | Sample adults 18+ who are cur   | rently employed                                   |
| Question Text        | ? [F1]  |   |
| Answer Codes         | * Read if necessary: Please tell me whether you strongly agree, agree, disagree, or strongly disagree with this statement.  "I have enough time to get the job done."  1. Strongly agree 2. Agree 3. Disagree 4. Strongly disagree Refused Don't know |   |
| Question Type        | Pick One - answer list pane   |   |
| Field Pane Descripti | Job demands   |   |
| Fill Instructions    |   |   |
| Special Instructions | Use Help Screen H_NIGHTWK   |   |
| Skip Instructions    | <1-4,R,D> [goto JOBCNTRL]   |   |
| Hard Edits           |   |   |
| Soft Edits           |   |   |
| AssocHelp            |   |   |

| Module               | 15   |   |
|----------------------|--|---|
| Section Name         | Adult Socio-Demographic Bac  | kground   |
| Part                 |  |   |
| Question ID          | ASD.220_00.130   |   |
| Variable Name        | JOBCNTRL   |   |
| Universe             | HHSTAT4='S' and (AGE GE '0 ('1','2','4')   | 18' and AGE not IN ('997','999')) and DOINGLW2 IN |
| Universe-text        | Sample adults 18+ who are cur  | rently employed                                   |
| Question Text        | ? [F1]   |   |
| Answer Codes         | * Read if necessary: Please tell me whether you strongly agree, agree, disagree, or strongly disagree with this statement.  "My job allows me to make a lot of decisions on my own."  1. Strongly agree 2. Agree 3. Disagree 4. Strongly disagree Refused Don't know |   |
| Question Type        | Pick One - answer list pane  |   |
| Field Pane Descripti | on Job control   |   |
| Fill Instructions    |  |   |
| Special Instructions | Use Help Screen H_NIGHTWK  |   |
| Skip Instructions    | <1-4,R,D> [if WRKCAT=5, ther   | goto WORUNEMP; else goto JOBSPPRT]                |
| Hard Edits           |  |   |
| Soft Edits           |  |   |
| AssocHelp            |  |   |

| Module               | 15  |   |
|----------------------|---|---|
| Section Name         | Adult Socio-Demographic Bac   | kground   |
| Part                 |   |   |
| Question ID          | ASD.220_00.140  |   |
| Variable Name        | JOBSPPRT  |   |
| Universe             | HHSTAT4='S' and (AGE GE '0 ('1','2','4') and WRKCAT ne '5'  | 18' and AGE not IN ('997','999')) and DOINGLW2 IN |
| Universe-text        | Sample adults 18+ who are cur   | rently employed but not self-employed             |
| Question Text        | ? [F1]  |   |
| Answer Codes         | * Read if necessary: Please tell me whether you strongly agree, agree, disagree, or strongly disagree with this statement.  "I can count on my supervisor or manager for support when I need it."  1. Strongly agree 2. Agree 3. Disagree 4. Strongly disagree Refused Don't know |   |
| Question Type        | Pick One - answer list pane   |   |
| Field Pane Descripti | on Job support  |   |
| Fill Instructions    |   |   |
| Special Instructions | Use Help Screen H_NIGHTWK   |   |
| Skip Instructions    | <1-4,R,D> [goto WORUNEMP]   |   |
| Hard Edits           |   |   |
| Soft Edits           |   |   |
| AssocHelp            |   |   |

| Module               | 15   |  |
|----------------------|--|--|
| Section Name         | Adult Socio-Demographic Background   |  |
| Part                 |  |  |
| Question ID          | ASD.220_00.150   |  |
| Variable Name        | WORUNEMP   |  |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and DOINGLW2 IN ('1','2','4')                                      |  |
| Universe-text        | Sample adults 18+ who are currently employed   |  |
| Question Text        | ? [F1]   |  |
| Answer Codes         | Are you worried about losing your [fill: job as a (KINDWRK) with (WHOWRK)/current, MAIN job]?  1. Yes 2. No Refused Don't know |  |
| Question Type        | Yes/No   |  |
| Field Pane Descripti | Worries over losing job  |  |
| Fill Instructions    | if KINDWRK not IN (R,D) and WHOWRK not IN (R,D) then fill: "job as a (KINDWRK) with (WHOWRK)"; else fill "current, MAIN job"   |  |
| Special Instructions | Use Help Screen H_WRKARRNG   |  |
| Skip Instructions    | <1,2,R,D> [goto SAFETY]  |  |
| Hard Edits           |  |  |
| Soft Edits           |  |  |
| AssocHelp            |  |  |

| Module                                   | 15   |  |
|--|--|--|
| Section Name                             | Adult Socio-Demographic Background   |  |
| Part                                     |  |  |
| Question ID                              | ASD.220_00.160   |  |
| Variable Name                            | SAFETY   |  |
| Universe                                 | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and DOINGLW2 IN ('1','2','4')  |  |
| Universe-text                            | Sample adults 18+ who are currently employed   |  |
| Question Text                            | ? [F1]   |  |
|  | The next two questions are about workplace safety and health. Please answer for your [fill: job as a (KINDWRK) with (WHOWRK)/current, MAIN job]. |  |
|  | Overall, how safe do you think your workplace is? Would you say  |  |
|  | * Read categories below.   |  |
| Answer Codes                             | 1. Very safe 2. Safe 3. Unsafe 4. Very unsafe Refused Don't know   |  |
| Question Type                            | Pick One - answer list pane  |  |
| Field Pane Description Is workplace safe |  |  |
| Fill Instructions                        | if KINDWRK not IN (R,D) and WHOWRK not IN (R,D) then fill: "job as a (KINDWRK) with (WHOWRK)"; else fill "current, MAIN job"                     |  |
| Special Instructions                     | Use Help Screen H_WRKARRNG   |  |
| Skip Instructions                        | <1-4,R,D> [if WRKCAT=5 goto HARASSED; else goto SAFCLIMT]  |  |
| Hard Edits                               |  |  |
| Soft Edits                               |  |  |
| AssocHelp                                |  |  |

| Module                                | 15  |  |
|---------------------------------------|---|--|
| Section Name                          | Adult Socio-Demographic Background  |  |
| Part                                  |   |  |
| Question ID                           | ASD.220_00.170  |  |
| Variable Name                         | SAFCLIMT  |  |
| Universe                              | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and DOINGLW2 IN ('1','2','4') and WRKCAT ne '5'   |  |
| Universe-text                         | Sample adults 18+ who are currently employed but not self-employed  |  |
| Question Text                         | ? [F1]  |  |
|                                       | Please tell me whether you strongly agree, agree, disagree, or strongly disagree with this statement. "The health and safety of workers is a high priority with management where I work." |  |
| Answer Codes                          | 1. Strongly agree 2. Agree 3. Disagree 4. Strongly disagree Refused Don't know  |  |
| Question Type                         | Pick One - answer list pane   |  |
| Field Pane Description Safety climate |   |  |
| Fill Instructions                     |   |  |
| Special Instructions                  | Use Help Screen H_NIGHTWK   |  |
| Skip Instructions                     | <1-4,R,D> [goto HARASSED]   |  |
| Hard Edits                            |   |  |
| Soft Edits                            |   |  |
| AssocHelp                             |   |  |

| Module               | 15   |
|----------------------|--|
| Section Name         | Adult Socio-Demographic Background   |
| Part                 |  |
| Question ID          | ASD.220_00.180   |
| Variable Name        | HARASSED   |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and DOINGLW2 IN ('1','2','4')                                    |
| Universe-text        | Sample adults 18+ who are currently employed   |
| Question Text        | ? [F1]   |
|                      | Again, think about your [fill: job as a (KINDWRK) with (WHOWRK)/current, MAIN job].  |
|                      | DURING THE PAST 12 MONTHS, were you threatened, bullied, or harassed by anyone while you were on the job?                    |
| Answer Codes         | 1. Yes 2. No Refused Don't know  |
| Question Type        | Yes/No   |
| Field Pane Descripti | ion Harassment   |
| Fill Instructions    | if KINDWRK not IN (R,D) and WHOWRK not IN (R,D) then fill: "job as a (KINDWRK) with (WHOWRK)"; else fill "current, MAIN job" |
| Special Instructions | Use Help Screen H_WRKARRNG   |
| Skip Instructions    | <1> [goto HARASFRQ]<br><2,R,D> [goto EXERTION]   |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module               | 15   |  |
|----------------------|--|--|
| Section Name         | Adult Socio-Demographic Bac  | kground  |
| Part                 |  |  |
| Question ID          | ASD.220_00.185   |  |
| Variable Name        | HARASFRQ   |  |
| Universe             | HHSTAT4='S' and (AGE GE '0 ('1','2','4') and HARASSED='1'                        | 18' and AGE not IN ('997','999')) and DOINGLW2 IN                              |
| Universe-text        | Sample adults 18+ who are cur harassed while on the job in the                   | rently employed and were threatened, bullied, or e past 12 months              |
| Question Text        | ? [F1]   |  |
|                      | DURING THE PAST 12 MONT by anyone while you were on the * Read categories below. | HS, how often were you threatened, bullied, or harassed the job? Would you say |
| Answer Codes         | 1. Once 2. A few times 3. Monthly 4. Weekly 5. Daily Refused Don't know          |  |
| Question Type        | Pick One - answer list pane  |  |
| Field Pane Descripti | Harassment - frequency   |  |
| Fill Instructions    |  |  |
| Special Instructions | Use Help Screen H_NIGHTWk  |  |
| Skip Instructions    | <1-4,R,D> [goto EXERTION]  |  |
| Hard Edits           |  |  |
| Soft Edits           |  |  |
| AssocHelp            |  |  |

| Module               | 15  |
|----------------------|---|
| Section Name         | Adult Socio-Demographic Background  |
| Part                 |   |
| Question ID          | ASD.220_00.190  |
| Variable Name        | EXERTION  |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and DOINGLW2 IN ('1','2','4')   |
| Universe-text        | Sample adults 18+ who are currently employed  |
| Question Text        | ? [F1]  |
|                      | Again, continue thinking about your [fill: job as a (KINDWRK) with (WHOWRK)/current, MAIN job]. How often does your job involve repeated lifting, pushing, pulling, or bending? Would you say  * Read categories below. |
| Answer Codes         | 0. Never 1. Seldom 2. Sometimes 3. Often 4. Always Refused Don't know   |
| Question Type        | Pick One - answer list pane   |
| Field Pane Descripti | Repeated activities   |
| Fill Instructions    | if KINDWRK not IN (R,D) and WHOWRK not IN (R,D) then fill: "job as a (KINDWRK) with (WHOWRK)"; else fill "current, MAIN job"  |
| Special Instructions | Use Help Screen H_WRKARRNG  |
| Skip Instructions    | <0-4,R,D> [goto STAND]  |
| Hard Edits           |   |
| Soft Edits           |   |
| AssocHelp            |   |

| Module               | 15  |                                     |
|----------------------|---|-------------------------------------|
| Section Name         | Adult Socio-Demographic Background  |                                     |
| Part                 |   |                                     |
| Question ID          | ASD.220_00.200  |                                     |
| Variable Name        | STAND   |                                     |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE no ('1','2','4')                      | t IN ('997','999')) and DOINGLW2 IN |
| Universe-text        | Sample adults 18+ who are currently employed                                |                                     |
| Question Text        | ? [F1]  |                                     |
|                      | How often does your job involve standing or wat * Read categories below.    | alking around? Would you say        |
| Answer Codes         | O. Never  1. Seldom  2. Sometimes  3. Often  4. Always  Refused  Don't know |                                     |
| Question Type        | Pick One - answer list pane   |                                     |
| Field Pane Descripti | ion Standing or walking   |                                     |
| Fill Instructions    |   |                                     |
| Special Instructions | Use Help Screen H_NIGHTWK   |                                     |
| Skip Instructions    | <0-4,R,D> [goto SMOKEXP]  |                                     |
| Hard Edits           |   |                                     |
| Soft Edits           |   |                                     |
| AssocHelp            |   |                                     |

| Module                                    | 15   |   |
|---|--|---|
| Section Name                              | Adult Socio-Demographic Background   |   |
| Part                                      |  |   |
| Question ID                               | ASD.220_00.210   |   |
| Variable Name                             | SMOKEXP  |   |
| Universe                                  | HHSTAT4='S' and (AGE GE '0 ('1','2','4')   | 18' and AGE not IN ('997','999')) and DOINGLW2 IN |
| Universe-text                             | Sample adults 18+ who are cur  | rently employed                                   |
| Question Text                             | ? [F1]   |   |
| Answer Codes                              | DURING THE PAST 12 MONTHS, while at work, how often were you exposed to tobacco smoke from other people? Would you say  * Read categories below.  0. Never 1. Less than twice a week |   |
|   | 2. Twice a week or more, but n<br>3. Every day<br>Refused<br>Don't know  | ot every day                                      |
| Question Type Pick One - answer list pane |  |   |
| Field Pane Description Smoke exposure     |  |   |
| Fill Instructions                         |  |   |
| Special Instructions                      | Use Help Screen H_NIGHTWK  |   |
| Skip Instructions                         | <0-3,R,D> [if WRKCAT=5, ther   | goto ACN.HYPEV; else goto HLTHPROM]               |
| Hard Edits                                |  |   |
| Soft Edits                                |  |   |
| AssocHelp                                 |  |   |

| Module               | 15  |
|----------------------|---|
| Section Name         | Adult Socio-Demographic Background  |
| Part                 |   |
| Question ID          | ASD.220_00.230  |
| Variable Name        | HLTHPROM  |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and DOINGLW2 IN ('1','2','4') and WRKCAT ne '5'   |
| Universe-text        | Sample adults 18+ who are currently employed but not self-employed  |
| Question Text        | ? [F1]  |
| Answer Codes         | In the past year, were health promotion programs made available to you by your employer? Examples of health promotion programs include education about weight management, smoking cessation, screening for high blood pressure, high cholesterol, or other health risks, and onsite fitness facilities or discounted gym memberships.  1. Yes 2. No |
|                      | Refused Don't know  |
| Question Type        | Yes/No  |
| Field Pane Descripti | on Health promotion   |
| Fill Instructions    |   |
| Special Instructions | Use Help Screen H_NIGHTWK   |
| Skip Instructions    | <1> [goto HPROMPAR]<br><2,R,D> [goto ACN.HYPEV]   |
| Hard Edits           |   |
| Soft Edits           |   |
| AssocHelp            |   |

| Module               | 15   |
|----------------------|--|
| Section Name         | Adult Socio-Demographic Background   |
| Part                 |  |
| Question ID          | ASD.220_00.240   |
| Variable Name        | HPROMPAR   |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and DOINGLW2 IN ('1','2','4') and WRKCAT ne '5' and HLTHPROM='1' |
| Universe-text        | Sample adults 18+ who are currently employed but not self-employed and their employers offer health promotion programs       |
| Question Text        | ? [F1]   |
|                      | How often did you participate in any of these activities in the past year? Would you say                                     |
|                      | * Read categories below.   |
| Answer Codes         | 0. Never 1. Once 2. A few times 3. Monthly 4. Weekly 5. Daily Refused Don't know   |
| Question Type        | Pick One - answer list pane  |
| Field Pane Descripti | on Participation   |
| Fill Instructions    |  |
| Special Instructions | Use Help Screen H_NIGHTWK  |
| Skip Instructions    | <0-5,R,D> [goto ACN.HYPEV]   |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

## 2015 Q1 NHIS Instrument Spec Report

| Section nan                                | ne: Adult Conditions   |
|--|--|
| Module                                     | 16   |
| Section Name                               | Adult Conditions   |
| Part                                       |  |
| Question ID                                | ACN.010_00.000   |
| Variable Name                              | HYPEV  |
| Universe                                   | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999'))  |
| Universe-text                              | Sample adults 18+  |
| Question Text                              | Now I am going to ask you about certain medical conditions.  Have you EVER been told by a doctor or other health professional that you had |
|  | Hypertension, also called high blood pressure?   |
| Answer Codes                               | 1. Yes 2. No Refused Don't know  |
| Question Type                              | Yes/No   |
| Field Pane Description Hypertension - ever |  |
| Fill Instructions                          |  |
| Special Instructions                       |  |
| Skip Instructions                          | <1> [goto HYPDIFV]<br><2,R,D> [goto HYBPCKNO]  |
| Hard Edits                                 |  |
| Soft Edits                                 |  |
| AssocHeln                                  |  |

| Module               | 16  |
|----------------------|---|
| Section Name         | Adult Conditions  |
| Part                 |   |
| Question ID          | ACN.010_H   |
| Variable Name        | H_HYPEV   |
| Universe             |   |
| Universe-text        |   |
| Question Text        | Include only reports of hypertension/high blood pressure by a doctor or other health care professional. Do not include home blood pressure testing and testing by a machine in a mall, store or other commercial area. Do not include reports of potential hypertension or borderline hypertension. |
| Answer Codes         |   |
| Question Type        | Help Screen   |
| Field Pane Descripti | on  |
| Fill Instructions    |   |
| Special Instructions | Associated Screens  |
|                      | HYPEV   |
| Skip Instructions    |   |
| Hard Edits           |   |
| Soft Edits           |   |
| AssocHelp            |   |

| Module               | 16  |
|----------------------|---|
| Section Name         | Adult Conditions  |
| Part                 |   |
| Question ID          | ACN.020_00.000  |
| Variable Name        | HYPDIFV   |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and HYPEV(e)='1'                              |
| Universe-text        | Sample adults 18+ who were told they had hypertension   |
| Question Text        | Were you told on two or more DIFFERENT visits that you had hypertension, also called high blood pressure? |
| Answer Codes         | 1. Yes 2. No Refused Don't know   |
| Question Type        | Yes/No  |
| Field Pane Descripti | On Hypertension - 2+ visits   |
| Fill Instructions    |   |
| Special Instructions | Indent this description to indicate that it is a "follow up" to the previous question.                    |
| Skip Instructions    | <1> [goto HYPYR]<br><2,R,D> [goto HYPMDEV2]   |
| Hard Edits           |   |
| Soft Edits           |   |
| AssocHelp            |   |

| Module               | 16   |
|----------------------|--|
| Section Name         | Adult Conditions   |
| Part                 |  |
| Question ID          | ACN.020_00.010   |
| Variable Name        | HYPYR  |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and HYPEV(e) = '1' and HYPDIFV='1' |
| Universe-text        | Sample adults 18+ who were ever told they had hypertention (2+ visits)                         |
| Question Text        | DURING THE PAST 12 MONTHS, have you had hypertension, also called high blood pressure?         |
| Answer Codes         | *Enter '1' if respondent is taking medication to control his/her high blood pressure.          |
|                      | 1. Yes 2. No Refused Don't know  |
| Question Type        | Yes/No   |
| Field Pane Descripti | on Past 12 months hypertension   |
| Fill Instructions    |  |
| Special Instructions |  |
| Skip Instructions    | <1,2,R,D> [goto HYPMDEV2]  |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module               | 16   |
|----------------------|--|
| Section Name         | Adult Conditions   |
| Part                 |  |
| Question ID          | ACN.022_02.020   |
| Variable Name        | HYPMDEV2   |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999'))and HYPEV(e)='1' |
| Universe-text        | Sample adults 18+ who have ever been told they had high blood pressure       |
| Question Text        | Was any medicine EVER prescribed by a doctor for your high blood pressure?   |
| Answer Codes         | 1. Yes 2. No Refused Don't know  |
| Question Type        | Yes/No   |
| Field Pane Descripti | on   |
| Fill Instructions    |  |
| Special Instructions |  |
| Skip Instructions    | <1> [goto HYPMED2]<br><2,R,D> [goto CHLEV]                                   |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module                 | 16   |  |
|------------------------|--|--|
| Section Name           | Adult Conditions   |  |
| Part                   |  |  |
| Question ID            | ACN.022_03.030   |  |
| Variable Name          | HYPMED2  |  |
| Universe               | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999'))and HYPMDEV2(e)='1'      |  |
| Universe-text          | Sample adults 18+ who were ever prescribed medicine for high blood pressure          |  |
| Question Text          | Are you NOW taking any medicine prescribed by a doctor for your high blood pressure? |  |
| Answer Codes           | 1. Yes 2. No Refused Don't know  |  |
| Question Type          | Yes/No   |  |
| Field Pane Description |  |  |
| Fill Instructions      |  |  |
| Special Instructions   |  |  |
| Skip Instructions      | <1,2,R,D> [goto CHLEV]   |  |
| Hard Edits             |  |  |
| Soft Edits             |  |  |
| AssocHelp              |  |  |

| Module                                       | 16  |
|--|---|
| Section Name                                 | Adult Conditions  |
| Part   |   |
| Question ID                                  | ACN.023_00.010  |
| Variable Name                                | CHLEV   |
| Universe                                     | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999'))                                    |
| Universe-text                                | Sample adults 18+   |
| Question Text                                | Have you EVER been told by a doctor or other health professional that you had high cholesterol? |
|  | *Enter '1' if respondent is taking medication to control his/her high cholesterol.              |
| Answer Codes                                 | 1. Yes 2. No Refused Don't know   |
| Question Type                                | Yes/No  |
| Field Pane Description High cholesterol-ever |   |
| Fill Instructions                            |   |
| Special Instructions                         |   |
| Skip Instructions                            | <1> [goto CHLYR]<br><2,R,D> [goto CHDEV]  |
| Hard Edits                                   |   |
| Soft Edits                                   |   |
| AssocHelp                                    |   |

| Module                 | 16  |  |  |
|------------------------|---|--|--|
| Section Name           | Adult Conditions  |  |  |
| Part                   |   |  |  |
| Question ID            | ACN.023_00.020  |  |  |
| Variable Name          | CHLYR   |  |  |
| Universe               | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999')) and CHLEV(e)='1'                                       |  |  |
| Universe-text          | Sample adults 18+ who were ever told they had high cholesterol  |  |  |
| Question Text          | DURING THE PAST 12 MONTHS, have you had high cholesterol?   |  |  |
| Answer Codes           | *Enter '1' if respondent is taking medication to control his/her high cholesterol.  1. Yes 2. No Refused Don't know |  |  |
| Question Type          | Yes/No  |  |  |
| Field Pane Description | Field Pane Description High cholesterol   |  |  |
| Fill Instructions      |   |  |  |
| Special Instructions   |   |  |  |
| Skip Instructions      | <1,2,R,D> [goto CHLMDEV2]   |  |  |
| Hard Edits             |   |  |  |
| Soft Edits             |   |  |  |
| AssocHelp              |   |  |  |

| Module               | 16   |
|----------------------|--|
| Section Name         | Adult Conditions   |
| Part                 |  |
| Question ID          | ACN.023_03.030   |
| Variable Name        | CHLMDEV2   |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999'))and CHLEV(e)='1'   |
| Universe-text        | Sample adults 18+ who have ever been told they had high cholesterol            |
| Question Text        | Was any medication EVER prescribed by a doctor to help lower your cholesterol? |
| Answer Codes         | 1. Yes 2. No Refused Don't know  |
| Question Type        | Yes/No   |
| Field Pane Descripti | on   |
| Fill Instructions    |  |
| Special Instructions |  |
| Skip Instructions    | <1> [goto CHLMDNW2]<br><2,R,D> [goto CHDEV]                                    |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module                 | 16   |  |
|------------------------|--|--|
| Section Name           | Adult Conditions   |  |
| Part                   |  |  |
| Question ID            | ACN.023_04.040   |  |
| Variable Name          | CHLMDNW2   |  |
| Universe               | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999'))and CHLMDEV2(e)='1'         |  |
| Universe-text          | Sample adults 18+ who were ever prescribed medicine for high cholestrol                |  |
| Question Text          | Are you NOW taking any medicine prescribed by a doctor to help lower your cholesterol? |  |
| Answer Codes           | 1. Yes 2. No Refused Don't know  |  |
| Question Type          | Yes/No   |  |
| Field Pane Description |  |  |
| Fill Instructions      |  |  |
| Special Instructions   |  |  |
| Skip Instructions      | <1,2,R,D> [goto CHDEV]   |  |
| Hard Edits             |  |  |
| Soft Edits             |  |  |
| AssocHelp              |  |  |

| Module               | 16  |
|----------------------|---|
| Section Name         | Adult Conditions  |
| Part                 |   |
| Question ID          | ACN.031_01.000  |
| Variable Name        | CHDEV   |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999'))  |
| Universe-text        | Sample adults 18+   |
| Question Text        | Have you EVER been told by a doctor or other health professional that you had Coronary heart disease? |
| Answer Codes         | 1. Yes 2. No Refused Don't know   |
| Question Type        | Yes/No  |
| Field Pane Descripti | Coronary heart disease -ever  |
| Fill Instructions    |   |
| Special Instructions |   |
| Skip Instructions    | <1,2,R,D> [goto ANGEV]  |
| Hard Edits           |   |
| Soft Edits           |   |
| AssocHelp            |   |

| Module                              | 16  |  |
|-------------------------------------|---|--|
| Section Name                        | Adult Conditions  |  |
| Part                                |   |  |
| Question ID                         | ACN.031_02.000  |  |
| Variable Name                       | ANGEV   |  |
| Universe                            | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999'))  |  |
| Universe-text                       | Sample adults 18+   |  |
| Question Text                       | * Read if necessary:  |  |
| Answer Codes                        | Have you EVER been told by a doctor or other health professional that you had Angina, also called angina pectoris?  1. Yes 2. No Refused Don't know |  |
| Question Type                       | Yes/No  |  |
| Field Pane Description Angina -ever |   |  |
| Fill Instructions                   |   |  |
| Special Instructions                |   |  |
| Skip Instructions                   | <1,2,R,D> [goto MIEV]   |  |
| Hard Edits                          |   |  |
| Soft Edits                          |   |  |
| AssocHelp                           |   |  |

| Module                                     | 16   |  |
|--|--|--|
| Section Name                               | Adult Conditions   |  |
| Part                                       |  |  |
| Question ID                                | ACN.031_03.000   |  |
| Variable Name                              | MIEV   |  |
| Universe                                   | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999'))  |  |
| Universe-text                              | Sample adults 18+  |  |
| Question Text                              | * Read if necessary:   |  |
| Answer Codes                               | Have you EVER been told by a doctor or other health professional that you had A heart attack (also called myocardial infarction)?  1. Yes 2. No Refused Don't know |  |
| Question Type                              | Yes/No   |  |
| Field Pane Description Heart attack - ever |  |  |
| Fill Instructions                          |  |  |
| Special Instructions                       |  |  |
| Skip Instructions                          | <1,2,R,D> [goto HRTEV]   |  |
| Hard Edits                                 |  |  |
| Soft Edits                                 |  |  |
| AssocHelp                                  |  |  |

| Module               | 16  |
|----------------------|---|
| Section Name         | Adult Conditions  |
| Part                 |   |
| Question ID          | ACN.031_04.000  |
| Variable Name        | HRTEV   |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999'))   |
| Universe-text        | Sample adults 18+   |
| Question Text        | ? [F1]  |
|                      | * Read if necessary:  |
| Answer Codes         | Have you EVER been told by a doctor or other health professional that you hadAny kind of heart condition or heart disease (other than the ones I just asked about)?  1. Yes |
| Answer Coues         | 2. No Refused Don't know  |
| Question Type        | Yes/No  |
| Field Pane Descripti | Heart condition/disease - ever  |
| Fill Instructions    |   |
| Special Instructions |   |
| Skip Instructions    | <1,2,R,D> [goto STREV]  |
| Hard Edits           |   |
| Soft Edits           |   |
| AssocHelp            | H_HRTEV   |

| Module               | 16   |
|----------------------|--|
| Section Name         | Adult Conditions   |
| Part                 |  |
| Question ID          | ACN.031_04_H   |
| Variable Name        | H_HRTEV  |
| Universe             |  |
| Universe-text        |  |
| Question Text        | Include as heart disease or heart condition any of the following: heart failure, chronic heart condition, rheumatic heart disease, atrial or mitral valve disease/damage, etc. |
| Answer Codes         |  |
| Question Type        | Help Screen  |
| Field Pane Descripti | on   |
| Fill Instructions    |  |
| Special Instructions | Associated Screens   |
|                      | HRTEV  |
| Skip Instructions    |  |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module                               | 16  |  |
|--------------------------------------|---|--|
| Section Name                         | Adult Conditions  |  |
| Part                                 |   |  |
| Question ID                          | ACN.031_05.000  |  |
| Variable Name                        | STREV   |  |
| Universe                             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999'))  |  |
| Universe-text                        | Sample adults 18+   |  |
| Question Text                        | * Read if necessary:  |  |
| Answer Codes                         | Have you EVER been told by a doctor or other health professional that you hadA stroke?  1. Yes 2. No Refused Don't know |  |
| Question Type                        | Yes/No  |  |
| Field Pane Description Stroke - ever |   |  |
| Fill Instructions                    |   |  |
| Special Instructions                 |   |  |
| Skip Instructions                    | <1,2,R,D> [goto EPHEV]  |  |
| Hard Edits                           |   |  |
| Soft Edits                           |   |  |
| AssocHelp                            |   |  |

| Module                                  | 16   |  |
|---|--|--|
| Section Name                            | Adult Conditions   |  |
| Part                                    |  |  |
| Question ID                             | ACN.031_06.000   |  |
| Variable Name                           | EPHEV  |  |
| Universe                                | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999'))   |  |
| Universe-text                           | Sample adults 18+  |  |
| Question Text                           | * Read if necessary:   |  |
| Answer Codes                            | Have you EVER been told by a doctor or other health professional that you hadEmphysema?  1. Yes 2. No Refused Don't know |  |
| Question Type                           | Yes/No   |  |
| Field Pane Description Emphysema - ever |  |  |
| Fill Instructions                       |  |  |
| Special Instructions                    |  |  |
| Skip Instructions                       | <1,2,R,D> [goto COPDEV]  |  |
| Hard Edits                              |  |  |
| Soft Edits                              |  |  |
| AssocHelp                               |  |  |

| Module               | 16   |
|----------------------|--|
| Section Name         | Adult Conditions   |
| Part                 |  |
| Question ID          | ACN.035_00.000   |
| Variable Name        | COPDEV   |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999'))   |
| Universe-text        | Sample adults 18+  |
| Question Text        | Have you EVER been told by a doctor or other health professional that you had chronic obstructive pulmonary disease, also called COPD? |
| Answer Codes         | 1. Yes 2. No Refused Don't know  |
| Question Type        | Yes/No   |
| Field Pane Descripti | on COPD - ever   |
| Fill Instructions    |  |
| Special Instructions |  |
| Skip Instructions    | <1,2,R,D> [if AGE GE 40, goto ASPMDMED;<br>else goto AASMEV]   |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module               | 16   |
|----------------------|--|
| Section Name         | Adult Conditions   |
| Part                 |  |
| Question ID          | ACN.040_00.010   |
| Variable Name        | ASPMEDEV   |
| Universe             | HHSTAT4 = 'S' and (AGE GE '040' and AGE not IN('997','999'))   |
| Universe-text        | Sample adults 40+  |
| Question Text        | Has a doctor or other health professional EVER told you to take a low-dose aspirin each day to prevent or control heart disease?           |
|                      | * If the respondent volunteers they have been told to take an aspirin every other day or "regularly" for these reasons, enter 1 for "yes." |
| Answer Codes         | 1. Yes 2. No Refused Don't know  |
| Question Type        | Yes/No   |
| Field Pane Descripti | Low-dose aspirin   |
| Fill Instructions    |  |
| Special Instructions |  |
| Skip Instructions    | <1> [goto ASPMEDAD]<br><2,R,D> [goto ASPONOWN]   |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module               | 16   |
|----------------------|--|
| Section Name         | Adult Conditions   |
| Part                 |  |
| Question ID          | ACN.040_00.020   |
| Variable Name        | ASPMEDAD   |
| Universe             | HHSTAT4 = 'S' and (AGE GE '040' and AGE not IN('997','999')) and ASPMEDEV(e)='1'                                       |
| Universe-text        | Sample adults 40+ who have ever been advised to take a low-dose aspirin every day to prevent or control heart disease  |
| Question Text        | Are you NOW following this advice?   |
|                      | * If the respondent provides an answer such as "sometimes," "occasionally," or "from time to time," enter 1 for "yes." |
| Answer Codes         | 1. Yes 2. No Refused Don't know  |
| Question Type        | Yes/No   |
| Field Pane Descripti | on Following advice  |
| Fill Instructions    |  |
| Special Instructions |  |
| Skip Instructions    | <1,R,D> [goto AASMEV]<br><2> [goto ASPMDMED]   |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module                 | 16  |
|------------------------|---|
| Section Name           | Adult Conditions  |
| Part                   |   |
| Question ID            | ACN.040_00.030  |
| Variable Name          | ASPMDMED  |
| Universe               | HHSTAT4 = 'S' and (AGE GE '040' and AGE not IN('997','999')) and ASPMEDEV(e)='1' and ASPMEDAD='2'                   |
| Universe-text          | Sample adults 40+ who have ever been advised to take aspirin every day, but are not currently following that advice |
| Question Text          | Did a doctor or other health professional advise you to stop taking a low-dose aspirin every day?                   |
| Answer Codes           | 1. Yes 2. No Refused Don't know   |
| Question Type          | Yes/No  |
| Field Pane Description | on Stop taking low-dose aspirin   |
| Fill Instructions      |   |
| Special Instructions   |   |
| Skip Instructions      | <1,2,R,D> [goto AASMEV]   |
| Hard Edits             |   |
| Soft Edits             |   |
| AssocHelp              |   |

| Module               | 16  |
|----------------------|---|
| Section Name         | Adult Conditions  |
| Part                 |   |
| Question ID          | ACN.040_00.040  |
| Variable Name        | ASPONOWN  |
| Universe             | HHSTAT4 = 'S' and (AGE GE '040' and AGE not IN('997','999') and ASPMEDEV(e) IN('2','7','9')   |
| Universe-text        | Sample adults 40+ who have not been advised to take aspirin every day or Ref/DK if they have been advised to take aspirin every day |
| Question Text        | On your own, are you now taking a low-dose aspirin each day to prevent or control heart disease?                                    |
|                      | * If the respondent volunteers they are taking an aspirin every other day or "regularly" for these reasons, enter 1 for "yes."      |
| Answer Codes         | 1. Yes 2. No Refused Don't know   |
| Question Type        | Yes/No  |
| Field Pane Descripti | Taking low-dose aspirin   |
| Fill Instructions    |   |
| Special Instructions |   |
| Skip Instructions    | <1,2,R,D> [goto AASMEV]   |
| Hard Edits           |   |
| Soft Edits           |   |
| AssocHelp            |   |

| Module               | 16  |
|----------------------|---|
| Section Name         | Adult Conditions  |
| Part                 |   |
| Question ID          | ACN.080_00.000  |
| Variable Name        | AASMEV  |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999'))                           |
| Universe-text        | Sample adults 18+   |
| Question Text        | ? [F1]  |
|                      | Have you EVER been told by a doctor or other health professional that you had asthma? |
| Answer Codes         | 1. Yes 2. No Refused Don't know   |
| Question Type        | Yes/No  |
| Field Pane Descripti | Asthma - ever   |
| Fill Instructions    |   |
| Special Instructions |   |
| Skip Instructions    | <1> [goto AASSTILL]<br><2,R,D> [goto ULCEV]   |
| Hard Edits           |   |
| Soft Edits           |   |
| AssocHelp            | H_AASMEV  |

| Module               | 16  |
|----------------------|---|
| Section Name         | Adult Conditions  |
| Part                 |   |
| Question ID          | ACN.080_H   |
| Variable Name        | H_AASMEV  |
| Universe             |   |
| Universe-text        |   |
| Question Text        | Accept asthma of any kind such as smoker's asthma, bronchial asthma, allergic asthma, and the like. Do not accept self-diagnosed lung problems or conditions reported by a person who is not a doctor and not working with or for a doctor. |
| Answer Codes         |   |
| Question Type        | Help Screen   |
| Field Pane Descripti | on  |
| Fill Instructions    |   |
| Special Instructions | Associated Screens:   |
|                      | AASMEV, AASMYR, AASMERYR, AASSTILL  |
| Skip Instructions    |   |
| Hard Edits           |   |
| Soft Edits           |   |
| AssocHelp            |   |

| Module               | 16   |
|----------------------|--|
| Section Name         | Adult Conditions   |
| Part                 |  |
| Question ID          | ACN.085_00.000   |
| Variable Name        | AASSTILL   |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and AASMEV(e)='1'          |
| Universe-text        | Sample adults 18+ who were ever told they have asthma                                  |
| Question Text        | ? [F1]   |
|                      | Do you still have asthma?  |
| Answer Codes         | 1. Yes 2. No Refused Don't know  |
| Question Type        | Yes/No   |
| Field Pane Descripti | on Asthma - still  |
| Fill Instructions    |  |
| Special Instructions | Indent this description to indicate that it is a "follow up" to the previous question. |
| Skip Instructions    | <1,2,R,D> [go to AASMYR]   |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module               | 16  |
|----------------------|---|
| Section Name         | Adult Conditions  |
| Part                 |   |
| Question ID          | ACN.090_00.000  |
| Variable Name        | AASMYR  |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and AASMEV(e)='1'     |
| Universe-text        | Sample adults 18+ who were ever told they had asthma                              |
| Question Text        | ? [F1]  |
|                      | DURING THE PAST 12 MONTHS, have you had an episode of asthma or an asthma attack? |
| Answer Codes         | 1. Yes 2. No Refused Don't know   |
| Question Type        | Yes/No  |
| Field Pane Descripti | Asthma - past 12 months   |
| Fill Instructions    |   |
| Special Instructions | Indent this description to indicate that it is a "follow up" to AASMEV.           |
| Skip Instructions    | <1,2,R,D> [goto AASMERYR]   |
| Hard Edits           |   |
| Soft Edits           |   |
| AssocHelp            | H_AASMEV  |

| Module               | 16  |
|----------------------|---|
| Section Name         | Adult Conditions  |
| Part                 |   |
| Question ID          | ACN.100_00.000  |
| Variable Name        | AASMERYR  |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999')) and AASMEV(e)='1'                              |
| Universe-text        | Sample adults 18+ who were ever told they had asthma  |
| Question Text        | ? [F1]  |
|                      | DURING THE PAST 12 MONTHS, have you had to visit an emergency room or urgent care center because of asthma? |
| Answer Codes         | 1. Yes 2. No Refused Don't know   |
| Question Type        | Yes/No  |
| Field Pane Descripti | Asthma - ER past 12 months  |
| Fill Instructions    |   |
| Special Instructions | Indent this description to indicate that it is a "follow up" to the previous question.                      |
| Skip Instructions    | <1,2,R,D> [go to ULCEV]   |
| Hard Edits           |   |
| Soft Edits           |   |
| AssocHelp            | H_AASMEV  |

| Module                 | 16   |
|------------------------|--|
| Section Name           | Adult Conditions   |
| Part                   |  |
| Question ID            | ACN.110_00.000   |
| Variable Name          | ULCEV  |
| Universe               | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999'))                                  |
| Universe-text          | Sample adults 18+  |
| Question Text          | Have you EVER been told by a doctor or other health professional that you had                |
| Answer Codes           | An ulcer This could be a stomach, duodenal or peptic ulcer.  1. Yes 2. No Refused Don't know |
| Question Type          | Yes/No   |
| Field Pane Description | on Ulcer - ever  |
| Fill Instructions      |  |
| Special Instructions   |  |
| Skip Instructions      | <1> [goto ULCYR]<br><2,R,D> [goto ULCCOLEV]  |
| Hard Edits             |  |
| Soft Edits             |  |
| AssocHelp              |  |

| Module               | 16   |
|----------------------|--|
| Section Name         | Adult Conditions   |
| Part                 |  |
| Question ID          | ACN.120_00.000   |
| Variable Name        | ULCYR  |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999')) and ULCEV(e)='1'          |
| Universe-text        | Sample adults 18+ who were ever told they had an ulcer                                 |
| Question Text        | DURING THE PAST 12 MONTHS have you had   |
|                      | An ulcer?  |
| Answer Codes         | 1. Yes   |
|                      | 2. No<br>Refused   |
|                      | Don't know   |
| Question Type        | Yes/No   |
| Field Pane Descripti | On Ulcer - past 12 months  |
| Fill Instructions    |  |
| Special Instructions | Indent this description to indicate that it is a "follow up" to the previous question. |
| Skip Instructions    | <1,2,R,D> [goto ULCCOLEV]  |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module               | 16   |
|----------------------|--|
| Section Name         | Adult Conditions   |
| Part                 |  |
| Question ID          | ACN.120_00.010   |
| Variable Name        | ULCCOLEV   |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999'))   |
| Universe-text        | Sample adults 18+  |
| Question Text        | Have you EVER been told by a doctor or other health professional that you had Crohn's disease or ulcerative colitis? |
| Answer Codes         | 1. Yes 2. No Refused Don't know  |
| Question Type        | Yes/No   |
| Field Pane Descripti | on Crohn's/Colitis - ever  |
| Fill Instructions    |  |
| Special Instructions |  |
| Skip Instructions    | <1,2,R,D> [goto CANEV]   |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module                 | 16  |
|------------------------|---|
| Section Name           | Adult Conditions  |
| Part                   |   |
| Question ID            | ACN.130_00.000  |
| Variable Name          | CANEV   |
| Universe               | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999'))                  |
| Universe-text          | Sample adults 18+   |
| Question Text          | Have you EVER been told by a doctor or other health professional that you had |
|                        | Cancer or a malignancy of any kind?   |
| Answer Codes           | 1. Yes 2. No Refused Don't know   |
| Question Type          | Yes/No  |
| Field Pane Description | on Cancer - ever  |
| Fill Instructions      |   |
| Special Instructions   |   |
| Skip Instructions      | <1> [goto CANKIND]<br><2,R,D> [goto DIBEV]                                    |
| Hard Edits             |   |
| Soft Edits             |   |
| AssocHelp              |   |

| Module                                | 16  |
|---------------------------------------|---|
| Section Name                          | Adult Conditions  |
| Part                                  |   |
| Question ID                           | ACN.140_00.001  |
| Variable Name                         | CANKIND_1   |
| Universe                              | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and CANEV(e)='1'  |
| Universe-text                         | Sample adults 18+ who were ever told they had cancer  |
| Question Text                         | What kind of cancer was it?   |
|                                       | * Enter code for the first kind of cancer.  |
| Ouestion Type                         | 1. Bladder 2. Blood 3. Bone 4. Brain 5. Breast 6. Cervix 7. Colon 8. Esophagus 9. Gallbladder 10. Kidney 11. Larynx-windpipe 12. Leukemia 13. Liver 14. Lung 15. Lymphoma 16. Melanoma 17. Mouth/tongue/lip 18. Ovary 19. Pancreas 20. Prostate 21. Rectum 22. Skin (non-melanoma) 23. Skin (don't know what kind) 24. Soft tissue (muscle or fat) 25. Stomach 26. Testis 27. Throat - pharynx 28. Thyroid 29. Uterus 30. Other  Refused Don't know |
| Question Type  Field Pane Description | Pick One - answer list pane   |
| Field Pane Description                | Kind of cancer_1  |
| Fill Instructions                     |   |
| Special Instructions                  | Indent this description to indicate that it is a "follow up" to the previous question.  |

| Skip Instructions | <1-30,R,D> [goto CANAGE_1]                                       |
|-------------------|--|
|                   | IF SEX=1 (MALE) and No. <6,18,29> selected [goto ERR1_CANKIND_1] |
|                   | IF SEX=2 (FEMALE) and No. <20,26> selected [goto ERR2_CANKIND_1] |
| Hard Edits        | ERR1_CANKIND_1   |
|                   | * Code 6 or 18 or 29 is unavailable for males.                   |
|                   | ERR2_CANKIND_1   |
|                   | * Code 20 or 26 is unavailable for females.                      |
| Soft Edits        |  |
| Soft Lans         |  |
| AssocHelp         |  |
|                   |  |

16 Module **Adult Conditions** Section Name **Part** Question ID ACN.140\_00.002 Variable Name **CANKIND 2** HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999')) and (CANAGE 1=1-Universe 100, D or (CANAGE\_1=R but CANKIND\_1 ne R)) Sample adults 18+ who either provided an age for one kind of cancer or didn't know Universe-text how old they were when first diagnosed with that kind of cancer or else refused to provide an age but had not refused to answer CANKIND 1. **Question Text** \* Enter code for the second kind of cancer. \* Enter '96' for no more. Answer Codes 1. Bladder 2. Blood 3. Bone 4. Brain 5. Breast 6. Cervix 7. Colon 8. Esophagus 9. Gallbladder 10. Kidney 11. Larynx-windpipe 12. Leukemia 13. Liver 14. Lung 15. Lymphoma 16. Melanoma 17. Mouth/tongue/lip 18. Ovary 19. Pancreas 20. Prostate 21. Rectum 22. Skin (non-melanoma) 23. Skin (don't know what kind) 24. Soft tissue (muscle or fat ) 25. Stomach 26. Testis 27. Throat - pharynx 28. Thyroid 29. Uterus 30. Other 96. No more Refused Don't know

Question Type

Pick One - answer list pane

Field Pane Description

Kind of cancer 2

## Fill Instructions **Special Instructions** "Gray out" whatever option was selected in CANKIND\_1 to indicate that that option is now not available. Make sure that if this option is selected it triggers the error message that this is an invalid option. Indent this description to indicate that it is a "follow up" to CANEV. <1-30,R,D>[goto CANAGE\_2] Skip Instructions <96> [goto DIBEV] IF SEX=1 (MALE) and No. <6,18,29> selected [goto ERR1\_CANKIND\_2] IF SEX=2 (FEMALE) and No. <20,26> selected [goto ERR2 CANKIND 2] ERR1\_CANKIND\_2 Hard Edits \* Code 6 or 18 or 29 is unavailable for males. ERR2\_CANKIND\_2 \* Code 20 or 26 is unavailable for females.

Soft Edits

**AssocHelp** 

16 Module **Adult Conditions** Section Name **Part Question ID** ACN.140\_00.003 Variable Name **CANKIND 3** HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999')) and (CANAGE 2=1-Universe 100, D or (CANAGE\_2=R but CANKIND\_2 ne R)) Sample adults 18+ who either provided an age for a second kind of cancer or didn't Universe-text know how old they were when first diagnosed that kind of cancer or else refused to provide an age but had not refused to answer CANKIND 2. **Question Text** \* Enter code for the third kind of cancer. \* Enter '96' for no more. Answer Codes 1. Bladder 2. Blood 3. Bone 4. Brain 5. Breast 6. Cervix 7. Colon 8. Esophagus 9. Gallbladder 10. Kidney 11. Larynx-windpipe 12. Leukemia 13. Liver 14. Lung 15. Lymphoma 16. Melanoma 17. Mouth/tongue/lip 18. Ovary 19. Pancreas 20. Prostate 21. Rectum 22. Skin (non-melanoma) 23. Skin (don't know what kind) 24. Soft tissue (muscle or fat ) 25. Stomach 26. Testis 27. Throat - pharynx 28. Thyroid 29. Uterus 30. Other 96. No more Refused Don't know

Question Type

Pick One - answer list pane

Field Pane Description

Kind of cancer 3

## Fill Instructions **Special Instructions** "Gray out" whatever options were selected in CANKIND\_1 and CANKIND\_2 to indicate that those options are now not available. Make sure that if either of these options are selected it triggers the error message that this is an invalid option. Indent this description to indicate that it is a "follow up" to CANEV. <1-30,R,D>[goto CANAGE\_3] Skip Instructions <96> [goto DIBEV] IF SEX=1 (MALE) and No. <6,18,29> selected [goto ERR1\_CANKIND\_3] IF SEX=2 (FEMALE) and No. <20,26> selected [goto ERR2 CANKIND 3] ERR1\_CANKIND\_3 Hard Edits \* Code 6 or 18 or 29 is unavailable for males. ERR2\_CANKIND\_3 \* Code 20 or 26 is unavailable for females.

Soft Edits

**AssocHelp** 

16 Module **Adult Conditions** Section Name **Part Question ID** ACN.140\_00.004 Variable Name **CANKIND 4** HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999')) and (CANAGE 3=1-Universe 100, D or (CANAGE\_3=R but CANKIND\_3 ne R)) Sample adults 18+ who either provided an age for a third kind of cancer or didn't know Universe-text how old they were when first diagnosed that kind of cancer or else refused to provide an age but had not refused to answer CANKIND 3 \* Enter '95' if respondent offers more than 3 kinds of cancer. **Question Text** \* Enter '96' for no more. **Answer Codes** 1. Bladder 2. Blood 3. Bone 4. Brain 5. Breast 6. Cervix 7. Colon 8. Esophagus 9. Gallbladder 10. Kidnev 11. Larynx-windpipe 12. Leukemia 13. Liver 14. Lung 15. Lymphoma 16. Melanoma 17. Mouth/tongue/lip 18. Ovary 19. Pancreas 20. Prostate 21. Rectum 22. Skin (non-melanoma) 23. Skin (don't know what kind) 24. Soft tissue (muscle or fat ) 25. Stomach 26. Testis 27. Throat - pharynx 28. Thyroid 29. Uterus 30. Other 95. More than 3 kinds of cancer 96. No more Question Type Pick One - answer list pane Field Pane Description More than 3 kinds of cancer

Fill Instructions

| Special Instructions | "Gray out" whatever options were selected in CANKIND_1, CANKIND_2 and CANKIND_3 to indicate that those options were already chosen. The only valid options for this question are 96 and 99. |
|----------------------|---|
|                      | Indent this description to indicate that it is a "follow up" to CANEV.  |
|                      | 05 00 (mate DIDE)//   |
| Skip Instructions    | <95,96> [goto DIBEV]  |
| Hard Edits           |   |
| Soft Edits           |   |
| _                    |   |
| AssocHelp            |   |

```
16
Module
                     Adult Conditions
Section Name
Part
Question ID
                     ACN.150 0.001
Variable Name
                     CANAGE 1
                     HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and CANKIND 1=1-30,
Universe
                     D,R
Universe-text
                     Sample adults 18+ who were ever told they had cancer
                     ? [F1]
Ouestion Text
                     How old were you when [Fill1: CANKIND 1 / Fill2: this cancer] was first diagnosed?
Answer Codes
Question Type
                     Integer
Field Pane Description
                         Age_1
                     Fill2: if (CANKIND 1 = D,R)
Fill Instructions
                     Fill1: if (CANKIND 1 NE D.R)
                     Fills to be used for CANKIND 1:
                     bladder cancer if CANKIND 1 = 1
                     blood cancer if CANKIND 1 = 2
                     bone cancer if CANKIND 1 = 3
                     brain cancer if CANKIND 1 = 4
                     breast cancer if CANKIND 1 = 5
                     cervical cancer if CANKIND 1 = 6
                     colon cancer if CANKIND_1 = 7
                     esophageal cancer if CANKIND 1 = 8
                     gallbladder cancer if CANKIND_1 = 9
                     kidney cancer if CANKIND_1 = 10
                     larynx-windpipe cancer if CANKIND 1 = 11
                     leukemia if CANKIND 1 = 12
                     liver cancer if CANKIND 1 = 13
                     lung cancer if CANKIND 1 = 14
                     lymphoma if CANKIND 1 = 15
                     melanoma if CANKIND 1 = 16
                     mouth/tongue/lip cancer if CANKIND 1 = 17
                     ovarian cancer if CANKIND 1 = 18
                     pancreatic cancer if CANKIND 1 = 19
                     prostate cancer if CANKIND 1 = 20
                     rectal cancer if CANKIND 1 = 21
                     skin (non-melanoma) cancer if CANKIND_1 = 22
                     skin (don't know what kind) cancer if CANKIND 1 = 23
                     soft tissue (muscle or fat) cancer if CANKIND_1 = 24
                     stomach cancer if CANKIND 1 = 25
                     testicular cancer if CANKIND 1 = 26
                     throat/pharynx cancer if CANKIND 1 = 27
                     thyroid cancer if CANKIND 1 = 28
                     uterine cancer if CANKIND 1 = 29other cancer if CANKIND 1 = 30
```

<1-100, D> goto CANKIND\_2 Skip Instructions <R> and <R> at CANKIND 1 [goto DIBEV] <R> and CANKIND\_1 NE <R> [goto CANKIND\_2] If number in CANAGE 1 greater than person years old (AGE) [goto ERR CANAGE 1] **Hard Edits** ERR\_CANAGE\_1 \* [Fill2: CANAGE 1] years old is older than age[fill3: AGE]. \* Please correct. Soft Edits H CANAGE 1 **AssocHelp** 16 **Module Adult Conditions** Section Name Part ACN.150 00.002 **Question ID CANAGE 2** Variable Name HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999')) and CANKIND\_2 = 1-Universe 30,D,R Sample adults 18+ who were ever told they had cancer Universe-text ? [F1] **Ouestion Text** How old were you when [Fill1: CANKIND 2/Fill2: this cancer] was first diagnosed? **Answer Codes** Question Type Integer Field Pane Description Age\_2 Fill1: if (CANKIND\_2 NE D,R) Fill Instructions Fill2: if  $(CANKIND_2 = D,R)$ **Special Instructions** <1-100, D> [goto CANKIND 3] Skip Instructions <R> and <R> at CANKIND 2 [goto DIBEV] <R> and CANKIND\_2 NE <R> [goto CANKIND\_3] If number in CANAGE 2 greater than person years old (AGE) [goto ERR CANAGE 2] ERR\_ CANAGE\_2 Hard Edits \* [Fill2: CANAGE\_2] years old is older than your age[fill3: AGE]. \* Please correct. Soft Edits H\_CANAGE\_1 **AssocHelp** 

| Module               | 16  |
|----------------------|---|
| Section Name         | Adult Conditions  |
| Part                 |   |
| Question ID          | ACN.150_00.003  |
| Variable Name        | CANAGE_3  |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and CANKIND_3=1-30, D,R   |
| Universe-text        | Sample adults 18+ who were ever told they had cancer  |
| Question Text        | ? [F1]  |
|                      | How old were you when [Fill1: CANKIND_3/Fill2: this cancer ] was first diagnosed?   |
| Answer Codes         |   |
| Question Type        | Integer   |
| Field Pane Descript  | ion Age_3   |
| Fill Instructions    | Fill1: if (CANKIND_3 NE D,R) Fill2: if (CANKIND_3 = D,R)  |
| Special Instructions |   |
| Skip Instructions    | <1-100, D> [goto CANKIND_4] <r> and <r> at CANKIND_3 [goto DIBEV] <r> and CANKIND_3 NE <r> [goto CANKIND_4]</r></r></r></r> |
|                      | If number in CANAGE_3 greater than person years old (AGE) [goto ERR_ CANAGE_3]  |
| Hard Edits           | ERR_ CANAGE_3   |
|                      | * [Fill2: CANAGE_3] years old is older than your age[fill3: AGE]. * Please correct.   |
| Soft Edits           |   |
| AssocHelp            | H_CANAGE_1  |

| Module               | 16   |
|----------------------|--|
| Section Name         | Adult Conditions   |
| Part                 |  |
| Question ID          | ACN.150_1_H  |
| Variable Name        | H_CANAGE_1   |
| Universe             |  |
| Universe-text        |  |
| Question Text        | Probe for a specific age. Record a best estimate if that is what the sample adult gives you. |
| Answer Codes         |  |
| Question Type        | Help Screen  |
| Field Pane Descripti | on   |
| Fill Instructions    |  |
| Special Instructions | Associated screens:  |
|                      | CANAGE_1, CANAGE_2, CANAGE_3   |
| Skip Instructions    |  |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module                                 | 16   |
|--|--|
| Section Name                           | Adult Conditions   |
| Part                                   |  |
| Question ID                            | ACN.160_00.000   |
| Variable Name                          | DIBEV  |
| Universe                               | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999'))   |
| Universe-text                          | Sample adults 18+  |
| Question Text                          | ? [F1]   |
|  | [Fill1:Other than during pregnancy, have you EVER been told by a doctor or other health professional that you have diabetes or sugar diabetes?]/[Fill2:Have you EVER been told by a doctor or other health professional that you have diabetes or sugar diabetes?] |
| Answer Codes                           | 1. Yes 2. No 3. Borderline Refused Don't know  |
| Question Type                          | Pick One - answer list pane  |
| Field Pane Description Diabetes - ever |  |
| Fill Instructions                      | Fill1: [If SEX=2 (female)] Fill2: [if SEX ne 2]  |
| Special Instructions                   | ANSWER categories should appear vertically. If DIBEV=3 fill "1" in DIBPRE1   |
| Skip Instructions                      | <1> [goto DIBAGE]<br><2,R,D> [goto DIBPRE1]<br><3> [goto INSLN]  |
| Hard Edits                             |  |
| Soft Edits                             |  |
| AssocHelp                              | H_DIBEV  |

| Module               | 16   |
|----------------------|--|
| Section Name         | Adult Conditions   |
| Part                 |  |
| Question ID          | ACN.160_H  |
| Variable Name        | H_DIBEV  |
| Universe             |  |
| Universe-text        |  |
| Question Text        | Do not include a doctor's diagnosis of gestational diabetes or diabetes present only when a woman is pregnant. |
| Answer Codes         |  |
| Question Type        | Help Screen  |
| Field Pane Descripti | on   |
| Fill Instructions    |  |
| Special Instructions | Associated screens:  |
|                      | DIBEV<br>DIBAGE  |
| Skip Instructions    |  |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            | Sample Adult   |

| Module               | 16  |
|----------------------|---|
| Section Name         | Adult Conditions  |
| Part                 |   |
| Question ID          | ACN.165_00.000  |
| Variable Name        | DIBPRE1   |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and DIBEV(e)IN('2','7','9')   |
| Universe-text        | Sample adults 18+ who were never told they had diabetes, or who refused or said don't know to having been told they had diabetes  |
| Question Text        | Have you EVER been told by a doctor or other health professional that you have any of the following: prediabetes, impaired fasting glucose, impaired glucose tolerance, borderline diabetes, or high blood sugar? |
| Answer Codes         | 1. Yes 2. No Refused Don't know   |
| Question Type        | Yes/No  |
| Field Pane Descripti | Pre-diabetic symptoms   |
| Fill Instructions    | Fill1: [If SEX=2 (female)] Fill2: [if SEX ne 2]   |
| Special Instructions | If DIBEV=3 fill 1 in DIBPRE1  |
| Skip Instructions    | <1> [goto INSLN]<br><2,R,D> [goto EPILEP1]  |
| Hard Edits           |   |
| Soft Edits           |   |
| AssocHelp            | H_DIBEV   |

| Module               | 16  |  |
|----------------------|---|--|
| Section Name         | Adult Conditions  |  |
| Part                 |   |  |
| Question ID          | ACN.170_00.000  |  |
| Variable Name        | DIBAGE  |  |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and DIBEV(e)='1'  |  |
| Universe-text        | Sample adults 18+ who were told they had diabetes or sugar diabetes (other than during pregnancy)                   |  |
| Question Text        | ? [F1]  |  |
|                      | How old were you when a doctor or other health professional FIRST told you that you had diabetes or sugar diabetes? |  |
| Answer Codes         |   |  |
| Question Type        | Integer   |  |
| Field Pane Descript  | Field Pane Description Diabetes - age   |  |
| Fill Instructions    |   |  |
| Special Instructions | Indent this description to indicate that it is a "follow up" to the previous question.                              |  |
| Skip Instructions    | <1-100 R,D> [goto INSLN]  |  |
|                      | If number in DIBAGE greater than person years old (AGE) [goto ERR_ DIBAGE]  |  |
| Hard Edits           | ERR_ DIBAGE   |  |
|                      | * [Fill1: DIBAGE] years old is older than your age[fill2: AGE]. * Please correct.                                   |  |
| Soft Edits           |   |  |
| AssocHelp            | H DIBEV   |  |

| Module                 | 16  |
|------------------------|---|
| Section Name           | Adult Conditions  |
| Part                   |   |
| Question ID            | ACN.180_00.000  |
| Variable Name          | INSLN   |
| Universe               | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and DIBEV(e)='1' or DIBPRE1(e)='1'  |
| Universe-text          | Sample adults 18+ who were told they had diabetes or sugar diabetes (other than during pregnancy) or who were told they had prediabetes, impaired fasting glucose, impaired glucose tolerance, borderline diabetes, or high blood sugar |
| Question Text          | Are you NOW taking insulin?   |
| Answer Codes           | 1. Yes 2. No Refused Don't know   |
| Question Type          | Yes/No  |
| Field Pane Description | on Insulin - now  |
| Fill Instructions      |   |
| Special Instructions   | Indent this description to indicate that it is a "follow up" to DIBEV (ACN.160).  |
| Skip Instructions      | <1,2,R,D> [goto DIBPILL]  |
| Hard Edits             |   |
| Soft Edits             |   |
| AssocHelp              | Sample Adult  |

| Module               | 16  |                                |                             |
|----------------------|---|--------------------------------|-----------------------------|
| Section Name         | Adult Conditions  |                                |                             |
| Part                 |   |                                |                             |
| Question ID          | ACN.190_00.000  |                                |                             |
| Variable Name        | DIBPILL   |                                |                             |
| Universe             | HHSTAT4='S' and (AGE GE '0' DIBPRE1(e)='1'  | 18' and AGE not IN ('997','    | 999')) and DIBEV(e)='1' or  |
| Universe-text        | Sample adults 18+ who were to during pregnancy) or who were impaired glucose tolderance, both | told they had pre-diabetes     | , impaired fasting glucose, |
| Question Text        | Are you NOW taking diabetic pi called oral agents or oral hypog                               |                                | ar? These are sometimes     |
| Answer Codes         | 1. Yes<br>2. No<br>Refused<br>Don't know  |                                |                             |
| Question Type        | Yes/No  |                                |                             |
| Field Pane Descripti | on Diabetic pill  |                                |                             |
| Fill Instructions    |   |                                |                             |
| Special Instructions | Indent this description to indicat  | te that it is a "follow up" to | DIBEV (ACN.160).            |
| Skip Instructions    | <1,2,R,D> [goto EPILEP1]  |                                |                             |
| Hard Edits           |   |                                |                             |
| Soft Edits           |   |                                |                             |
| AssocHelp            | Sample Adult  |                                |                             |

| Module                 | 16   |
|------------------------|--|
| Section Name           | Adult Conditions   |
| Part                   |  |
| Question ID            | ACN.192_00.010   |
| Variable Name          | EPILEP1  |
| Universe               | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999'))  |
| Universe-text          | Sample adults 18+  |
| Question Text          | Have you ever been told by a doctor or other health professional that you have a seizure disorder or epilepsy? |
| Answer Codes           | 1. Yes 2. No Refused Don't know  |
| Question Type          | Yes/No   |
| Field Pane Description | on Epilepsy  |
| Fill Instructions      |  |
| Special Instructions   |  |
| Skip Instructions      | <1> [goto EPILEP2]<br><2,R,D> [goto AHAYFYR]   |
| Hard Edits             |  |
| Soft Edits             |  |
| AssocHelp              |  |

| Module               | 16  |
|----------------------|---|
| Section Name         | Adult Conditions  |
| Part                 |   |
| Question ID          | ACN.192_00.020  |
| Variable Name        | EPILEP2   |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and EPILEP1(e)='1'      |
| Universe-text        | Sample adults 18+ who have ever been told they have epilepsy or a seizure disorder  |
| Question Text        | Are you currently taking any medicine to control your seizure disorder or epilepsy? |
| Answer Codes         | 1. Yes 2. No Refused Don't know   |
| Question Type        | Yes/No  |
| Field Pane Descripti | on Medicine   |
| Fill Instructions    |   |
| Special Instructions |   |
| Skip Instructions    | <1,2,R,D> [goto EPILEP3]  |
| Hard Edits           |   |
| Soft Edits           |   |
| AssocHelp            |   |

| Module               | 16  |
|----------------------|---|
| Section Name         | Adult Conditions  |
| Part                 |   |
| Question ID          | ACN.192_00.030  |
| Variable Name        | EPILEP3   |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and EPILEP1(e)='1'  |
| Universe-text        | Sample adults 18+ who have ever been told they have epilepsy or a seizure disorder  |
| Question Text        | Today is [fill: Current Date]. Think back to last year about the same time. About how many seizures of any type have you had in the past year?  |
|                      | *Read if necessary: Some people may call it "convulsion," "fit," "falling out spell," "episode," "attack," "drop attack," "staring spell," or "out-of-touch.".  |
|                      | *If the respondent mentions and counts "auras" as seizures accept the response. If a respondent indicates that he/she has had nothing more than an aura and is unsure about counting the aura(s), do NOT count auras as seizures. |
| Answer Codes         | 0. None 1. One 2. Two or three 3. Between four and ten 4. More than 10 Refused Don't know   |
| Question Type        | Pick one - answer list pane   |
| Field Pane Descripti | on Seizures   |
| Fill Instructions    | [fill: Current Date] Comes from the Long date format: CDATE_C / FRT.380   |
| Special Instructions | [fill: Current Date Long date format CDATE_C / FRT.380  |
| Skip Instructions    | <0-4,R,D> [goto EPILEP4]  |
| Hard Edits           |   |
| Soft Edits           |   |
| AssocHelp            |   |

| Module                                 | 16   |
|--|--|
| Section Name                           | Adult Conditions   |
| Part                                   |  |
| Question ID                            | ACN.192_00.040   |
| Variable Name                          | EPILEP4  |
| Universe                               | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and EPILEP1(e)='1'                             |
| Universe-text                          | Sample adults 18+ who have ever been told they have epilepsy or a seizure disorder                         |
| Question Text                          | In the past year have you seen a neurologist or epilepsy specialist for your epilepsy or seizure disorder? |
| Answer Codes                           | 1. Yes 2. No Refused Don't know  |
| Question Type                          | Yes/No   |
| Field Pane Description Seen specialist |  |
| Fill Instructions                      |  |
| Special Instructions                   |  |
| Skip Instructions                      | <1,2,R,D> [goto EPILEP5]   |
| Hard Edits                             |  |
| Soft Edits                             |  |
| AssocHelp                              |  |

| Module                         | 16   |
|--------------------------------|--|
| Section Name                   | Adult Conditions   |
| Part                           |  |
| Question ID                    | ACN.192_00.050   |
| Variable Name                  | EPILEP5  |
| Universe                       | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and EPILEP1(e)='1'   |
| Universe-text                  | Sample adults 18+ who have ever been told they have epilepsy or a seizure disorder   |
| Question Text                  | DURING THE PAST 30 DAYS, to what extent has epilepsy or its treatment interfered with your normal activities like working, school, or socializing with family or friends? Would you say  *Read categories below. |
| Answer Codes                   | 1. Not at all 2. Slightly 3. Moderately 4. Quite a bit 5. Extremely Refused Don't know   |
| Question Type                  | Pick one - answer list pane  |
| Field Pane Description Effects |  |
| Fill Instructions              |  |
| Special Instructions           |  |
| Skip Instructions              | <1-5,R,D> [goto AHAYFYR]   |
| Hard Edits                     |  |
| Soft Edits                     |  |
| AssocHelp                      |  |

| Module                           | 16  |
|----------------------------------|---|
| Section Name                     | Adult Conditions  |
| Part                             |   |
| Question ID                      | ACN.201_01.000  |
| Variable Name                    | AHAYFYR   |
| Universe                         | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999'))   |
| Universe-text                    | Sample adults 18+   |
| Question Text                    | DURING THE PAST 12 MONTHS, have you been told by a doctor or other health professional that you had |
|                                  | Hay fever?  |
| Answer Codes                     | 1. Yes 2. No Refused Don't know   |
| Question Type                    | Yes/No  |
| Field Pane Description Hay fever |   |
| Fill Instructions                |   |
| Special Instructions             | "Past 12 mo." as a heading for this question as well as ACN.201_02 - ACN.201_05.                    |
|                                  | Indent all descriptions beneath the heading.  |
| Skip Instructions                | <1,2,R,D> [goto SINYR]  |
| Hard Edits                       |   |
| Soft Edits                       |   |
| AssocHelp                        |   |

| Module                           | 16   |  |
|----------------------------------|--|--|
| Section Name                     | Adult Conditions   |  |
| Part                             |  |  |
| Question ID                      | ACN.201_02.000   |  |
| Variable Name                    | SINYR  |  |
| Universe                         | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999'))   |  |
| Universe-text                    | Sample adults 18+  |  |
| Question Text                    | * Read if necessary:   |  |
| Answer Codes                     | DURING THE PAST 12 MONTHS, have you been told by a doctor or other health professional that you hadSinusitis?  1. Yes 2. No Refused Don't know |  |
| Question Type                    | Yes/No   |  |
| Field Pane Description Sinusitis |  |  |
| Fill Instructions                |  |  |
| Special Instructions             |  |  |
| Skip Instructions                | <1,2,R,D> [goto CBRCHYR]   |  |
| Hard Edits                       |  |  |
| Soft Edits                       |  |  |
| AssocHelp                        |  |  |

| Module               | 16   |
|----------------------|--|
| Section Name         | Adult Conditions   |
| Part                 |  |
| Question ID          | ACN.201_03.000   |
| Variable Name        | CBRCHYR  |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999'))   |
| Universe-text        | Sample adults 18+  |
| Question Text        | * Read if necessary:   |
|                      | DURING THE PAST 12 MONTHS, have you been told by a doctor or other health professional that you hadChronic bronchitis? |
| Answer Codes         | 1. Yes 2. No Refused Don't know  |
| Question Type        | Yes/No   |
| Field Pane Descripti | on Chronic bronchitis  |
| Fill Instructions    |  |
| Special Instructions |  |
| Skip Instructions    | <1,2,R,D> [goto KIDWKYR]   |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module                 | 16  |
|------------------------|---|
| Section Name           | Adult Conditions  |
| Part                   |   |
| Question ID            | ACN.201_04.000  |
| Variable Name          | KIDWKYR   |
| Universe               | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999'))  |
| Universe-text          | Sample adults 18+   |
| Question Text          | * Read if necessary:  |
|                        | DURING THE PAST 12 MONTHS, have you been told by a doctor or other health professional that you hadWeak or failing kidneys? - Do not include kidney stones, bladder infections or incontinence. |
| Answer Codes           | 1. Yes 2. No Refused Don't know   |
| Question Type          | Yes/No  |
| Field Pane Description | on Weak/failing kidneys   |
| Fill Instructions      |   |
| Special Instructions   |   |
| Skip Instructions      | <1,2,R,D> [goto LIVYR]  |
| Hard Edits             |   |
| Soft Edits             |   |
| AssocHelp              |   |

| Module                                 | 16  |  |
|--|---|--|
| Section Name                           | Adult Conditions  |  |
| Part                                   |   |  |
| Question ID                            | ACN.201_05.000  |  |
| Variable Name                          | LIVYR   |  |
| Universe                               | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999'))  |  |
| Universe-text                          | Sample adults 18+   |  |
| Question Text                          | * Read if necessary:  |  |
| Answer Codes                           | DURING THE PAST 12 MONTHS, have you been told by a doctor or other health professional that you had Any kind of liver condition?  1. Yes 2. No Refused Don't know |  |
| Question Type                          | Yes/No  |  |
| Field Pane Description Liver condition |   |  |
| Fill Instructions                      |   |  |
| Special Instructions                   |   |  |
| Skip Instructions                      | <1,2,R,D> [goto JNTSYMP]  |  |
| Hard Edits                             |   |  |
| Soft Edits                             |   |  |
| AssocHelp                              |   |  |

| Module                 | 16  |
|------------------------|---|
| Section Name           | Adult Conditions  |
| Part                   |   |
| Question ID            | ACN.250_00.000  |
| Variable Name          | JNTSYMP   |
| Universe               | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999'))  |
| Universe-text          | Sample adults 18+   |
| Question Text          | The next questions refer to your joints. Please do NOT include the back or neck. DURING THE PAST 30 DAYS, have you had any symptoms of pain, aching, or stiffness in or around a joint? |
| Answer Codes           | 1. Yes 2. No Refused Don't know   |
| Question Type          | Yes/No  |
| Field Pane Description | On Joint pain - past 30 days  |
| Fill Instructions      |   |
| Special Instructions   |   |
| Skip Instructions      | <1> [goto JMTHP]<br><2,R,D> [goto ARTH]   |
| Hard Edits             |   |
| Soft Edits             |   |
| AssocHelp              |   |

| Module               | 16   |
|----------------------|--|
| Section Name         | Adult Conditions   |
| Part                 |  |
| Question ID          | ACN.260_00.000   |
| Variable Name        | JMTHP  |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999')) and JNTSYMP(e)='1'  |
| Universe-text        | Sample adults 18+ who had joint pain in the past 30 days   |
| Question Text        | (book) A5  |
|                      | Which joints are affected?   |
|                      | * Enter all that apply, separate with commas.  |
| Answer Codes         | 1. Shoulder-right 2. Shoulder-left 3. Elbow-right 4. Elbow-left 5. Hip-right 6. Hip-left 7. Wrist-right 8. Wrist-left 9. Knee-right 10. Knee-left 11. Ankle-right 12. Ankle-left 13. Toes-right 14. Toes-left 15. Fingers/thumb-right 16. Fingers/thumb-left 17. Other joint not listed Don't know Refused |
| Question Type        | Enter All That Apply   |
| Field Pane Descripti | on Joints affected   |
| Fill Instructions    |  |
| Special Instructions | Indent this description to indicate that it is a "follow up" to the previous question.   |
| Skip Instructions    | <1-17,R,D> [goto JNTCHR]   |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module               | 16   |
|----------------------|--|
| Section Name         | Adult Conditions   |
| Part                 |  |
| Question ID          | ACN.270_00.000   |
| Variable Name        | JNTCHR   |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and JNTSYMP(e)='1'     |
| Universe-text        | Sample adults 18+ who had joint pain in the past 30 days                           |
| Question Text        | Did your joint symptoms FIRST begin more than 3 months ago?                        |
| Answer Codes         | 1. Yes 2. No Refused Don't know  |
| Question Type        | Yes/No   |
| Field Pane Descripti | Symptoms appear 3+ months  |
| Fill Instructions    |  |
| Special Instructions | Indent this description to indicate that it is a "follow up" to JNTSYMP (ACN.250). |
| Skip Instructions    | <1,2,R,D> [goto JNTHP]   |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module               | 16   |  |
|----------------------|--|--|
| Section Name         | Adult Conditions   |  |
| Part                 |  |  |
| Question ID          | ACN.280_00.000   |  |
| Variable Name        | JNTHP  |  |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999')) and JNTSYMP(e)='1'    |  |
| Universe-text        | Sample adults 18+ who had joint pain in the past 30 days                           |  |
| Question Text        | Have you EVER seen a doctor or other health professional for these joint symptoms? |  |
| Answer Codes         | 1. Yes 2. No Refused Don't know  |  |
| Question Type        | Yes/No   |  |
| Field Pane Descripti | Field Pane Description Ever seen doctor/health professional                        |  |
| Fill Instructions    |  |  |
| Special Instructions | Indent this description to indicate that it is a "follow up" to JNTSYMP (ACN.250). |  |
| Skip Instructions    | <1,2,R,D> [goto ARTH]  |  |
| Hard Edits           |  |  |
| Soft Edits           |  |  |
| AssocHelp            |  |  |

| Module               | 16   |
|----------------------|--|
| Section Name         | Adult Conditions   |
| Part                 |  |
| Question ID          | ACN.290_00.000   |
| Variable Name        | ARTH   |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999'))   |
| Universe-text        | Sample adults 18+  |
| Question Text        | ? [F1]   |
|                      | Have you EVER been told by a doctor or other health professional that you have some form of arthritis, rheumatoid arthritis, gout, lupus, or fibromyalgia (fy-bro-my-AL-jee-uh)? |
| Answer Codes         | 1. Yes 2. No Refused Don't know  |
| Question Type        | Yes/No   |
| Field Pane Descripti | Arthritis - ever   |
| Fill Instructions    |  |
| Special Instructions |  |
| Skip Instructions    | <1> or JNTSYMP = 1 [goto ARTHLMT]<br><2,R,D> and JNTSYMP ne 1 [goto CTSEVER]   |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            | H_ARTH   |

| Module               | 16  |
|----------------------|---|
| Section Name         | Adult Conditions  |
| Part                 |   |
| Question ID          | ACN.290_H   |
| Variable Name        | H_ARTH  |
| Universe             |   |
| Universe-text        |   |
| Question Text        | Include the following as arthritis-related conditions:  - rheumatism, polymyalgia rheumatica  |
|                      | <ul> <li>osteoarthritis (not osteoporosis)</li> <li>tendonitis, bursitis, bunion, tennis elbow</li> <li>carpal tunnel syndrome, tarsal tunnel syndrome</li> <li>joint infection, Reiter's syndrome</li> <li>ankylosing spondylitis; spondylosis</li> <li>rotator cuff syndrome</li> <li>connective tissue disease, scleroderma, polymyositis, Raynaud's syndrome</li> <li>vasculitis</li> </ul> |
| Answer Codes         |   |
| Question Type        | Help Screen   |
| Field Pane Descripti | on  |
| Fill Instructions    |   |
| Special Instructions | Associated screens:   |
|                      | ARTH  |
| Skip Instructions    |   |
| Hard Edits           |   |
| Soft Edits           |   |
| AssocHelp            |   |

| Module               | 16   |
|----------------------|--|
| Section Name         | Adult Conditions   |
| Part                 |  |
| Question ID          | ACN.295_00.000   |
| Variable Name        | ARTHLMT  |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and (JNTSYMP(e)='1' or ARTH(e)='1')        |
| Universe-text        | Sample adults 18+ with joint pain or arthritis   |
| Question Text        | ? [F1]   |
| Annua Cala           | Are you now limited in any way in any of your usual activities because of arthritis or joint symptoms? |
| Answer Codes         | 1. Yes 2. No Refused Don't know  |
| Question Type        | Yes/No   |
| Field Pane Descript  | Arthritis/joint symptoms - limitations   |
| Fill Instructions    |  |
| Special Instructions | Indent this description to indicate that it is a "follow up" to ARTH (ACN.290).                        |
| Skip Instructions    | <1,2,R,D> [goto CTSEVER]   |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            | H_ARTHLMT  |

| Module               | 16   |
|----------------------|--|
| Moante               |  |
| Section Name         | Adult Conditions   |
| Part                 |  |
| Question ID          | ACN.295_H  |
| Variable Name        | H_ARTHLMT  |
| Universe             |  |
| Universe-text        |  |
| Question Text        | We want to know the sample adult's limitation of activities based on his/her condition while taking any medications or treatments, if any, to counteract or relieve the arthritis or joint symptoms. |
| Answer Codes         |  |
| Question Type        | Help Screen  |
| Field Pane Descripti | on   |
| Fill Instructions    |  |
| Special Instructions | Associated screens:  |
|                      | ARTHLMT  |
| Skip Instructions    |  |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module               | 16   |
|----------------------|--|
| Section Name         | Adult Socio-Demographic Background   |
| Part                 |  |
| Question ID          | ACN.296_00.010   |
| Variable Name        | CTSEVER  |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999'))   |
| Universe-text        | Sample adults 18+  |
| Question Text        | Have you EVER been told by a doctor or other health professional that you have a condition affecting the wrist and hand called carpal tunnel syndrome? |
| Answer Codes         | 1. Yes 2. No Refused Don't know  |
| Question Type        | Yes/No   |
| Field Pane Descripti | on CTS ever  |
| Fill Instructions    |  |
| Special Instructions |  |
| Skip Instructions    | <1> [goto CTSYR]<br><2,R,D> [goto PAINECK]   |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module                 | 16   |
|------------------------|--|
| Section Name           | Adult Socio-Demographic Background   |
| Part                   |  |
| Question ID            | ACN.296_00.020   |
| Variable Name          | CTSYR  |
| Universe               | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999')) and CTSEVER='1'   |
| Universe-text          | Sample adults 18+ who have ever been told by a doctor or other health professional that they have carpal tunnel syndrome |
| Question Text          | DURING THE PAST 12 MONTHS, have you had carpal tunnel syndrome?  |
| Answer Codes           | 1. Yes 2. No Refused Don't know  |
| Question Type          | Yes/No   |
| Field Pane Description | CTS past 12 months   |
| Fill Instructions      |  |
| Special Instructions   |  |
| Skip Instructions      | <1> [if DOINGLW2 IN(1,2,4), then goto CTSWKREL; else goto PAINECK] <2,R,D> [goto PAINECK]                                |
| Hard Edits             |  |
| Soft Edits             |  |
| AssocHelp              |  |

| Module                 | 16   |
|------------------------|--|
| Section Name           | Adult Socio-Demographic Background   |
| Part                   |  |
| Question ID            | ACN.297_00.010   |
| Variable Name          | CTSWKREL   |
| Universe               | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and DOINGLW2 IN('1','2','4') and CTSYR='1'                       |
| Universe-text          | Sample adults 18+ who are currently employed and had carpal tunnel syndrome in the past 12 months                            |
| Question Text          | Have you ever been told by a doctor or other health professional that your carpal tunnel syndrome was probably work-related? |
| Answer Codes           | 1. Yes 2. No Refused Don't know  |
| Question Type          | Yes/No   |
| Field Pane Description | on CTS work related  |
| Fill Instructions      |  |
| Special Instructions   |  |
| Skip Instructions      | <1,R,D> [goto PAINECK]<br><2> [goto CTSWKRL2]  |
| Hard Edits             |  |
| Soft Edits             |  |
| AssocHelp              |  |

| Module                 | 16   |
|------------------------|--|
| Section Name           | Adult Socio-Demographic Background   |
| Part                   |  |
| Question ID            | ACN.297_00.020   |
| Variable Name          | CTSWKRL2   |
| Universe               | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and DOINGLW2 IN('1','2','4') and CTSYR='1' and CTSWKREL='2'  |
| Universe-text          | Sample adults 18+ who are currently employed, had carpal tunnel syndrome in the past 12 months, and were not told by a doctor or other health professional that their carpal tunnel syndrome was probably work-related |
| Question Text          | Did YOU ever discuss with a doctor or other health professional whether your carpal tunnel syndrome was probably caused by your work?  |
| Answer Codes           | 1. Yes 2. No Refused Don't know  |
| Question Type          | Yes/No   |
| Field Pane Description | on Discuss CTS   |
| Fill Instructions      |  |
| Special Instructions   |  |
| Skip Instructions      | <1,2,R,D> [goto PAINECK]   |
| Hard Edits             |  |
| Soft Edits             |  |
| AssocHelp              |  |

| Module               | 16  |
|----------------------|---|
| Section Name         | Adult Conditions  |
| Part                 |   |
| Question ID          | ACN.300_00.000  |
| Variable Name        | PAINECK   |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999'))   |
| Universe-text        | Sample adults 18+   |
| Question Text        | ? [F1]  |
|                      | The following questions are about pain you may have experienced in the PAST THREE MONTHS. Please refer to pain that LASTED A WHOLE DAY OR MORE. Do not report aches and pains that are fleeting or minor.  DURING THE PAST THREE MONTHS, did you have |
| Answer Codes         | Neck pain?  |
| Answer Codes         | 1. Yes 2. No Refused Don't know   |
| Question Type        | Yes/No  |
| Field Pane Descripti | Neck pain   |
| Fill Instructions    |   |
| Special Instructions | "Past 3 months" as a heading for this question as well as ACN.310 - ACN.331_02  |
|                      | Indent all of the Field Pane Descriptions beneath the heading.  |
| Skip Instructions    | <1,2,R,D> [goto PAINLB]   |
| Hard Edits           |   |
| Soft Edits           |   |
| AssocHelp            |   |

| Module               | 16  |
|----------------------|---|
| Section Name         | Adult Conditions  |
| Part                 |   |
| Question ID          | ACN.300_H   |
| Variable Name        | H_PAINECK   |
| Universe             |   |
| Universe-text        |   |
| Question Text        | Pain is sample adult defined, but must have lasted a whole day or more or have occurred several (more than 3) times during the past 3 months. |
| Answer Codes         |   |
| Question Type        | Help Screen   |
| Field Pane Descripti | on  |
| Fill Instructions    |   |
| Special Instructions | Associated screens:   |
|                      | PAINECK, PAINLB, PAINLEG  |
| Skip Instructions    |   |
| Hard Edits           |   |
| Soft Edits           |   |
| AssocHelp            |   |

| Module               | 16   |
|----------------------|--|
| Section Name         | Adult Conditions   |
| Part                 |  |
| Question ID          | ACN.310_00.000   |
| Variable Name        | PAINLB   |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999')) |
| Universe-text        | Sample adults 18+  |
| Question Text        | ? [F1]   |
|                      | * Read if necessary.   |
|                      | DURING THE PAST THREE MONTHS, did you have                   |
|                      | Low back pain?   |
| Answer Codes         | 1. Yes   |
|                      | 2. No<br>Refused   |
|                      | Don't know   |
| Question Type        | Yes/No   |
| Field Pane Descripti | on Low back pain   |
| Fill Instructions    |  |
| Special Instructions |  |
| Skip Instructions    | <1> [goto PAINLEG]   |
|                      | <2,R,D> [goto PAINFACE]                                      |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            | H_PAINECK  |

| Module                 | 16   |
|------------------------|--|
| Section Name           | Adult Conditions   |
| Part                   |  |
| Question ID            | ACN.320_00.000   |
| Variable Name          | PAINLEG  |
| Universe               | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999')) and PAINLB(e)=1           |
| Universe-text          | Sample adults 18+ with low back pain in the past 3 months                              |
| Question Text          | ? [F1]   |
|                        | Did this pain spread down either leg to areas below the knees?                         |
| Answer Codes           | 1. Yes   |
|                        | 2. No<br>Refused   |
|                        | Don't know   |
| 0 4 7                  |  |
| Question Type          | Yes/No   |
| Field Pane Description | on Pain down leg   |
| Fill Instructions      |  |
| Special Instructions   | Indent this description to indicate that it is a "follow up" to the previous question. |
| Skip Instructions      | <1,2,R,D> [goto LBPFREQ]   |
| Hard Edits             |  |
| Soft Edits             |  |
| AssocHelp              | H_PAINECK  |

| Module               | 16  |
|----------------------|---|
| Section Name         | Adult Socio-Demographic Background  |
| Part                 |   |
| Question ID          | ACN.325_00.010  |
| Variable Name        | LBPFREQ   |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999')) and PAINLB='1'       |
| Universe-text        | Sample adults 18+ who had low back pain in the past 3 months                      |
| Question Text        | DURING THE PAST THREE MONTHS, how often did you have low back pain? Would you say |
|                      | * Read categories below.  |
| Answer Codes         | 1. Some days 2. Most days 3. Every day Refused Don't know                         |
| Question Type        | Pick One - answer list pane   |
| Field Pane Descripti | on LBP frequency  |
| Fill Instructions    |   |
| Special Instructions |   |
| Skip Instructions    | <1-3,R,D> [goto LBPSEV]   |
| Hard Edits           |   |
| Soft Edits           |   |
| AssocHelp            |   |

| Module               | 16   |
|----------------------|--|
| Section Name         | Adult Socio-Demographic Background   |
| Part                 |  |
| Question ID          | ACN.325_00.020   |
| Variable Name        | LBPSEV   |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999')) and PAINLB='1'          |
| Universe-text        | Sample adults 18+ who had low back pain in the past 3 months                         |
| Question Text        | Thinking about the last time you had pain, how much pain did you have? Would you say |
|                      | * Read categories below.   |
| Answer Codes         | 1. A little 2. A lot 3. Somewhere in between a little and a lot Refused Don't know   |
| Question Type        | Pick One - answer list pane  |
| Field Pane Descripti | on LBP severity  |
| Fill Instructions    |  |
| Special Instructions |  |
| Skip Instructions    | <1-3,R,D> [if DOINGLW IN(1,2,4), then goto LBPWKREL; else goto PAINFACE]             |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module                 | 16  |
|------------------------|---|
| Section Name           | Adult Socio-Demographic Background  |
| Part                   |   |
| Question ID            | ACN.325_00.030  |
| Variable Name          | LBPWKREL  |
| Universe               | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and DOINGLW2 IN('1','2','4') and PAINLB='1'             |
| Universe-text          | Sample adults 18+ who are currently employed and had low back pain in the past 3 months                             |
| Question Text          | Have you ever been told by a doctor or other health professional that your low back pain was probably work-related? |
| Answer Codes           | 1. Yes 2. No Refused Don't know   |
| Question Type          | Yes/No  |
| Field Pane Description | on LBP work related   |
| Fill Instructions      |   |
| Special Instructions   |   |
| Skip Instructions      | <1,R,D> [goto LBPWCCLM]<br><2> [goto LBPWKRL2]  |
| Hard Edits             |   |
| Soft Edits             |   |
| AssocHelp              |   |

| Module                 | 16  |
|------------------------|---|
| Section Name           | Adult Socio-Demographic Background  |
| Part                   |   |
| Question ID            | ACN.325_00.040  |
| Variable Name          | LBPWKRL2  |
| Universe               | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and DOINGLW2 IN('1','2','4') and PAINLB='1' and LBPWKREL='2'  |
| Universe-text          | Sample adults 18+ who are currently employed and had low back pain in the past 3 months and a doctor or other health did not say that the low back pain was probably work-related |
| Question Text          | Did YOU ever discuss with a doctor or other health professional whether your low back pain was probably caused by your work?  |
| Answer Codes           | 1. Yes 2. No Refused Don't know   |
| Question Type          | Yes/No  |
| Field Pane Description | on Discuss LBP  |
| Fill Instructions      |   |
| Special Instructions   |   |
| Skip Instructions      | <1,2,R,D> [goto LBPWCCLM]   |
| Hard Edits             |   |
| Soft Edits             |   |
| AssocHelp              |   |

| Module               | 16  |
|----------------------|---|
| Section Name         | Adult Socio-Demographic Background  |
| Part                 |   |
| Question ID          | ACN.325_00.050  |
| Variable Name        | LBPWCCLM  |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and DOINGLW2 IN('1','2','4') and PAINLB='1' |
| Universe-text        | Sample adults 18+ who are currently employed and had low back pain in the past 3 months                 |
| Question Text        | ? [F1]  |
|                      | Have you ever filed a workers' compensation claim for your low back pain?                               |
| Answer Codes         | 1. Yes 2. No Refused Don't know   |
| Question Type        | Yes/No  |
| Field Pane Descripti | on LBP workers' comp  |
| Fill Instructions    |   |
| Special Instructions |   |
| Skip Instructions    | <1> [goto LBPWCBEN]<br><2,R,D> [goto LBPWKDAY]  |
| Hard Edits           |   |
| Soft Edits           |   |
| AssocHelp            |   |

| Module               | 16   |
|----------------------|--|
| Section Name         | Adult Socio-Demographic Background   |
| Part                 |  |
| Question ID          | ACN.325_00.050_H   |
| Variable Name        | H_LBPWCCLM   |
| Universe             |  |
| Universe-text        |  |
| Question Text        | Workers' compensation is also known as "workers' comp" or "workmans' comp". It is a form of insurance, paid for by employers, that provides payment for medical care and disability for employees who are injured or become ill in the course of their employment. Filing a workers' compensation claim means that you reported the condition to your employer and paperwork was submitted for you to receive insurance payments for your medical expenses and/or lost wages due to your work-related condition. |
| Answer Codes         |  |
| Question Type        | Help screen  |
| Field Pane Descripti | on [   |
| Fill Instructions    |  |
| Special Instructions |  |
| Skip Instructions    |  |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module  | 16  |                           |                        |
|---|---|---------------------------|------------------------|
| Section Name                                  | Adult Socio-Demographic Back                                    | ground                    |                        |
| Part  |   |                           |                        |
| Question ID                                   | ACN.325_00.060  |                           |                        |
| Variable Name                                 | LBPWCBEN  |                           |                        |
| Universe                                      | HHSTAT4='S' and (AGE GE '018 IN('1','2','4') and PAINLB='1' and |                           | 999')) and DOINGLW2    |
| Universe-text                                 | Sample adults 18+ who are curre months and a workers' compens   |                           |                        |
| Question Text                                 | ? [F1]  |                           |                        |
|   | Have you ever received workers'                                 | compensation benefits for | or your low back pain? |
| Answer Codes                                  | 1. Yes<br>2. No<br>Refused<br>Don't know                        |                           |                        |
| Question Type                                 | Yes/No  |                           |                        |
| Field Pane Description Workers' comp benefits |   |                           |                        |
| Fill Instructions                             |   |                           |                        |
| Special Instructions                          |   |                           |                        |
| Skip Instructions                             | <1,2,R,D> [goto LBPWKDAY]                                       |                           |                        |
| Hard Edits                                    |   |                           |                        |
| Soft Edits                                    |   |                           |                        |
| AssocHelp                                     |   |                           |                        |

| Module                 | 16   |  |
|------------------------|--|--|
| Section Name           | Adult Socio-Demographic Background   |  |
| Part                   |  |  |
| Question ID            | ACN.325_00.060_H   |  |
| Variable Name          | H_LBPWKDAY   |  |
| Universe               |  |  |
| Universe-text          |  |  |
| Question Text          | Workers' compensation is also known as "workers' comp" or "workmans' comp". When a workers' compensation claim is filed and accepted, then the worker receives insurance payments to cover medical expenses and/or lost wages due to injuries or illnesses caused by your job. |  |
| Answer Codes           |  |  |
| Question Type          | Help screen  |  |
| Field Pane Description |  |  |
| Fill Instructions      |  |  |
| Special Instructions   |  |  |
| Skip Instructions      |  |  |
| Hard Edits             |  |  |
| Soft Edits             |  |  |
| AssocHelp              |  |  |

| Module                 | 16  |
|------------------------|---|
| Section Name           | Adult Socio-Demographic Background  |
| Part                   |   |
| Question ID            | ACN.325_00.070  |
| Variable Name          | LBPWKDAY  |
| Universe               | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and DOINGLW2 IN('1','2','4') and PAINLB='1' |
| Universe-text          | Sample adults 18+ who are currently employed and had low back pain in the past 3 months                 |
| Question Text          | DURING THE PAST 12 MONTHS, how many full days did you miss from work because of your low back pain?     |
|                        | * Enter '0' for None.   |
| Answer Codes           | 0-365<br>Refused<br>Don't know  |
| Question Type          | Integer   |
| Field Pane Description | on Missed work days   |
| Fill Instructions      |   |
| Special Instructions   |   |
| Skip Instructions      | <0-365,R,D> [goto LBPCHJOB]   |
| Hard Edits             |   |
| Soft Edits             |   |
| AssocHelp              |   |

| Module               | 16   |
|----------------------|--|
| Section Name         | Adult Socio-Demographic Background   |
| Part                 |  |
| Question ID          | ACN.325_00.080   |
| Variable Name        | LBPCHJOB   |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and DOINGLW2 IN('1','2','4') and PAINLB='1'  |
| Universe-text        | Sample adults 18+ who are currently employed and had low back pain in the past 3 months  |
| Question Text        | DURING THE PAST 12 MONTHS, did you stop working, change jobs, or make a major change in your work activities, such as taking on lighter duties, because of your low back pain? |
| Answer Codes         | 1. Yes 2. No Refused Don't know  |
| Question Type        | Yes/No   |
| Field Pane Descripti | Change in work   |
| Fill Instructions    |  |
| Special Instructions |  |
| Skip Instructions    | <1,2,R,D> [goto PAINFACE]  |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module                          | 16   |  |
|---------------------------------|--|--|
| Section Name                    | Adult Conditions   |  |
| Part                            |  |  |
| Question ID                     | ACN.331_01.000   |  |
| Variable Name                   | PAINFACE   |  |
| Universe                        | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999'))             |  |
| Universe-text                   | Sample adults 18+  |  |
| Question Text                   | DURING THE PAST THREE MONTHS, did you have                               |  |
|                                 | Facial ache or pain in the jaw muscles or the joint in front of the ear? |  |
| Answer Codes                    | 1. Yes   |  |
|                                 | 2. No<br>Refused   |  |
|                                 | Don't know   |  |
| Question Type                   | Yes/No   |  |
| Field Pane Description Jaw pain |  |  |
| Fill Instructions               |  |  |
| Special Instructions            |  |  |
| Skip Instructions               | <1,2,R,D> [goto AMIGR]   |  |
| Hard Edits                      |  |  |
| Soft Edits                      |  |  |
| AssocHelp                       |  |  |

| Module  | 16  |  |
|---|---|--|
| Section Name                                    | Adult Conditions  |  |
| Part  |   |  |
| Question ID                                     | ACN.331_02.000  |  |
| Variable Name                                   | AMIGR   |  |
| Universe  | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999'))  |  |
| Universe-text                                   | Sample adults 18+   |  |
| Question Text                                   | * Read if neccesary:  |  |
| Answer Codes                                    | DURING THE PAST THREE MONTHS, did you haveSevere headache or migraine?  1. Yes 2. No Refused Don't know |  |
| Question Type                                   | Yes/No  |  |
| Field Pane Description Severe headache/migraine |   |  |
| Fill Instructions                               |   |  |
| Special Instructions                            |   |  |
| Skip Instructions                               | <1,2,R,D>[goto ACOLD2W]   |  |
| Hard Edits                                      |   |  |
| Soft Edits                                      |   |  |
| AssocHelp                                       |   |  |

| Module                 | 16   |
|------------------------|--|
| Section Name           | Adult Conditions   |
| Part                   |  |
| Question ID            | ACN.350_00.000   |
| Variable Name          | ACOLD2W  |
| Universe               | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999'))                 |
| Universe-text          | Sample adults 18+  |
| Question Text          | These next questions are about your recent health DURING THE LAST 2 WEEKS.   |
|                        | Did you have a head cold or chest cold that started DURING THE LAST 2 WEEKS? |
| Answer Codes           | 1. Yes 2. No Refused Don't know  |
| Question Type          | Yes/No   |
| Field Pane Description | On Head/chest cold past 2 weeks  |
| Fill Instructions      |  |
| Special Instructions   |  |
| Skip Instructions      | <1,2,R,D> [goto AINTIL2W]  |
| Hard Edits             |  |
| Soft Edits             |  |
| AssocHelp              |  |

| Module               | 16   |
|----------------------|--|
| Section Name         | Adult Conditions   |
| Part                 |  |
| Question ID          | ACN.360_00.000   |
| Variable Name        | AINTIL2W   |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999'))   |
| Universe-text        | Sample adults 18+  |
| Question Text        | Did you have a stomach or intestinal illness with vomiting or diarrhea that started DURING THE LAST TWO WEEKS? |
| Answer Codes         | 1. Yes 2. No Refused Don't know  |
| Question Type        | Yes/No   |
| Field Pane Descripti | on Stomach problem - 2 weeks   |
| Fill Instructions    |  |
| Special Instructions |  |
| Skip Instructions    | <1,2,R,D> if SEX=2 and AGE 18-49 [goto PREGNOW];<br>else if SEX=1 or AGE >49 [goto HRAIDNOW]                   |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module               | 16  |
|----------------------|---|
| Section Name         | Adult Conditions  |
| Part                 |   |
| Question ID          | ACN.370_00.000  |
| Variable Name        | PREGNOW   |
| Universe             | HHSTAT4='S' and ('018' <= AGE <= '049') and SEX = '2'   |
| Universe-text        | Female sample adults 18-49 years of age   |
| Question Text        | Are you currently pregnant?   |
| Answer Codes         | 1. Yes 2. No Refused Don't know   |
| Question Type        | Yes/No  |
| Field Pane Descripti | on Currently pregnant   |
| Fill Instructions    |   |
| Special Instructions |   |
| Skip Instructions    | <1> if INTERVIEW_MONTH=4,5,6,7 (April-July) [goto PREGFLYR];<br>else [goto HRAIDNOW]<br><r> [goto HRAIDNOW]<br/>&lt;2,D&gt; [goto PREGFLYR]</r> |
| Hard Edits           |   |
| Soft Edits           |   |
| AssocHelp            |   |

| Module               | 16   |
|----------------------|--|
| Section Name         | Adult Conditions   |
| Part                 |  |
| Question ID          | ACN.370_00.010   |
| Variable Name        | PREGFLYR   |
| Universe             | HHSTAT4='S' and ('018' <= AGE <= '049') and SEX = '2' and PREGNOW(e) IN('2','9') or (PREGNOW(e)='1' and INTERVIEW_MONTH(e) IN ('04','05','06','07'))   |
| Universe-text        | Female sample adults 18-49 years of age who are not currently pregnant or who don't know if they are currently pregnant and interviewed April - July   |
| Question Text        | [fill1: Were you pregnant any time since August 1st, [fill: LAST YEAR]?/Were you pregnant any time from August [fill: LAST YEAR] through March [fill: CURYEAR]?/Were you pregnant any time since August 1st, [fill: CURYEAR]?]   |
| Answer Codes         | 1. Yes 2. No Refused Don't know  |
| Question Type        | Yes/No   |
| Field Pane Descripti | ion  |
| Fill Instructions    | IF INTERVIEW_MONTH=1,2,3 (January-March) THEN fill: "Were you pregnant any time since August 1st, [fill: LAST YEAR]?" ELSE IF INTERVIEW_MONTH=4,5,6,7 (April-July) THEN fill: "Were you pregnant any time from August [fill: LAST YEAR] through March [fill: CURYEAR]?" ELSE fill: "Were you pregnant any time since August 1st, [fill: CURYEAR]?" |
| Special Instructions |  |
| Skip Instructions    | <1,2,R,D> [goto HRAIDNOW]  |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module                                   | 16  |  |
|--|---|--|
| Section Name                             | Adult Conditions  |  |
| Part                                     |   |  |
| Question ID                              | ACN.400_00.000  |  |
| Variable Name                            | HRAIDNOW  |  |
| Universe                                 | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999'))    |  |
| Universe-text                            | Sample adults 18+   |  |
| Question Text                            | These next questions are about your hearing, vision, and teeth. |  |
|  | Do you now use a hearing aid(s)?                                |  |
| Answer Codes                             | 1. Yes 2. No Refused Don't know                                 |  |
| Question Type                            | Yes/No  |  |
| Field Pane Description Hearing aid - now |   |  |
| Fill Instructions                        |   |  |
| Special Instructions                     |   |  |
| Skip Instructions                        | <1> [goto AHEARST1]<br><2,R,D> [goto HRAIDEV]                   |  |
| Hard Edits                               |   |  |
| Soft Edits                               |   |  |
| AssocHelp                                |   |  |

| Module               | 16  |  |  |
|----------------------|---|--|--|
| Section Name         | Adult Conditions  |  |  |
| Part                 |   |  |  |
| Question ID          | ACN.410_00.000  |  |  |
| Variable Name        | HRAIDEV   |  |  |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and HRAIDNOW(e) IN('2','7','9')     |  |  |
| Universe-text        | Sample adults 18+ who do not now use a hearing aid or REF/DK whether they now use a hearing aid |  |  |
| Question Text        | Have you ever used a hearing aid(s) in the past?  |  |  |
| Answer Codes         | 1. Yes 2. No Refused Don't know   |  |  |
| Question Type        | Yes/No  |  |  |
| Field Pane Descripti | Field Pane Description Hearing aid - ever   |  |  |
| Fill Instructions    |   |  |  |
| Special Instructions |   |  |  |
| Skip Instructions    | <1,2,R,D> [goto AHEARST1]   |  |  |
| Hard Edits           |   |  |  |
| Soft Edits           |   |  |  |
| AssocHelp            |   |  |  |

| Module               | 16  |
|----------------------|---|
| Section Name         | Adult Conditions  |
| Part                 |   |
| Question ID          | ACN.420_00.000  |
| Variable Name        | AHEARST1  |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999'))  |
| Universe-text        | Sample adults 18+   |
| Question Text        | WITHOUT the use of hearing aids or other listening devices, is your hearing excellent, good, a little trouble hearing, moderate trouble, a lot of trouble, or are you deaf? |
| Answer Codes         | 1. Excellent 2. Good 3. A little trouble hearing 4. Moderate trouble 5. A lot of trouble 6. Deaf Refused Don't know   |
| Question Type        | Pick One - answer list pane   |
| Field Pane Descripti | on Hearing status   |
| Fill Instructions    |   |
| Special Instructions |   |
| Skip Instructions    | <1-6,R,D> [goto AVISION]  |
| Hard Edits           |   |
| Soft Edits           |   |
| AssocHelp            |   |

| Module               | 16   |
|----------------------|--|
| Section Name         | Adult Conditions   |
| Part                 |  |
| Question ID          | ACN.430_00.000   |
| Variable Name        | AVISION  |
| Universe             | HHSTAT4='S' and (AGE GE '018'  |
| Universe-text        | Sample adults 18+  |
| Question Text        | Do you have any trouble seeing, even when wearing glasses or contact lenses? |
| Answer Codes         | 1. Yes 2. No Refused Don't know  |
| Question Type        | Yes/No   |
| Field Pane Descripti | on Trouble seeing  |
| Fill Instructions    |  |
| Special Instructions |  |
| Skip Instructions    | <1> [goto ABLIND]<br><2,R,D> [goto LUPPRT]                                   |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module               | 16   |
|----------------------|--|
| Section Name         | Adult Conditions   |
| Part                 |  |
| Question ID          | ACN.440_00.000   |
| Variable Name        | ABLIND   |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999')) and AVISION(e)='1'        |
| Universe-text        | Sample adults 18+ who have trouble seeing even when wearing glasses/contact lenses     |
| Question Text        | Are you blind or unable to see at all?   |
| Answer Codes         | 1. Yes 2. No Refused Don't know  |
| Question Type        | Yes/No   |
| Field Pane Descripti | on Blind   |
| Fill Instructions    |  |
| Special Instructions | Indent this description to indicate that it is a "follow up" to the previous question. |
| Skip Instructions    | <1,2,R,D> [goto LUPPRT]  |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module               | 16   |
|----------------------|--|
| Section Name         | Adult Conditions   |
| Part                 |  |
| Question ID          | ACN.451_00.000   |
| Variable Name        | LUPPRT   |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999'))          |
| Universe-text        | Sample adults 18+  |
| Question Text        | Have you lost all of your upper and lower natural (permanent) teeth? |
| Answer Codes         | 1. Yes 2. No Refused Don't know                                      |
| Question Type        | Yes/No   |
| Field Pane Descripti | on Lost all teeth  |
| Fill Instructions    |  |
| Special Instructions |  |
| Skip Instructions    | <1,2,R,D>[goto next section]   |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

# 2015 Q1 NHIS Instrument Spec Report

Section name: Adult Health Status and Limitation of Activities

| Module               | 17  |
|----------------------|---|
| Section Name         | Adult Health Status and Limitation of Activities  |
| Part                 |   |
| Question ID          | AHS.040   |
| Variable Name        | WKDAYR  |
| Universe             | HHSTAT4='S' and AGE ge '18' and (DOINGLW2 = '1' ,'2', '4' or WRKLYR2 = '1') and (EVERWRK ne 'No', 'Refused', or 'Don't know')                       |
| Universe-text        | Sample adults 18+ who worked or had a job or business with or without pay in the last week or who had a job or business in the past 12 months       |
| Question Text        | During the PAST 12 MONTHS ABOUT how many days did you miss work at a job or business because of illness or injury (do not include maternity leave)? |
|                      | * Enter '0' for None.   |
| Answer Codes         |   |
| Question Type        | Integer   |
| Field Pane Descript  | ion Work days missed  |
| Fill Instructions    |   |
| Special Instructions |   |
| Skip Instructions    | <0-366,R,D> [goto BEDDAYR]<br><120-366> [goto ERR_WKDAYR]   |
| Hard Edits           |   |
| Soft Edits           | ERR_WKDAYR  |
|                      | * [Fill: WKDAYR] is an unusually large number. * Please verify.   |
| AssocHelp            | H_WKDAYR  |

| Module               | 17   |
|----------------------|--|
| Section Name         | Adult Health Status and Limitation of Activities   |
| Part                 |  |
| Question ID          | AHS.040_H  |
| Variable Name        | H_WKDAYR   |
| Universe             |  |
| Universe-text        |  |
| Question Text        | Always probe for an exact number. If the sample adult reports a range or interval, assist the sample adult in making an estimate by probing. For example, you might ask "Could you give me a more exact number?" |
| Answer Codes         |  |
| Question Type        | Help Screen  |
| Field Pane Descripti | on   |
| Fill Instructions    |  |
| Special Instructions | Associated Screens: WKDAYR   |
| Skip Instructions    |  |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module               | 17   |
|----------------------|--|
| Section Name         | Adult Health Status and Limitation of Activities   |
| Part                 |  |
| Question ID          | AHS.050  |
| Variable Name        | BEDDAYR  |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN('997','999'))   |
| Universe-text        | Sample adults 18+  |
| Question Text        | During the PAST 12 MONTHS ABOUT how many days did illness or injury keep you in bed more than half of the day (include days while an overnight patient in a hospital)? |
|                      | * Enter '0' for None.  |
| Answer Codes         |  |
| Question Type        | Integer  |
| Field Pane Descripti | on Days in bed   |
| Fill Instructions    |  |
| Special Instructions |  |
| Skip Instructions    | <0-366,R,D> [goto AHSTATYR]<br><120-366> [goto ERR_BEDDAYR]  |
| Hard Edits           |  |
| Soft Edits           | ERR_BEDDAYR  |
|                      | * [Fill: BEDDAYR] is an unusually large number. * Please verify.   |
| AssocHelp            | H_BEDDAYR  |

| Module               | 17  |
|----------------------|---|
| Section Name         | Adult Health Status and Limitation of Activities  |
| Part                 |   |
| Question ID          | AHS.050_H   |
| Variable Name        | H_BEDDAYR   |
| Universe             |   |
| Universe-text        |   |
| Question Text        | Days in bed are any days during which the sample adult stayed in bed MORE than half of the day because of illness or injury. "More than half of the day" is defined as more than half of the hours that the sample adult is usually awake. Count as days in bed all days a sample adult spent as an overnight patient in a hospital, sanitarium, nursing home, etc., whether or not the patient was actually lying in bed, even if there was no illness or injury.  A bed is anything used for lying down or sleeping, including a sofa, cot or mattress.  Always probe for an exact number. If the sample adult reports a range or interval, assist the sample adult in making an estimate by probing. For example, you might ask "Could you give me a more exact number?" |
| Answer Codes         |   |
| Question Type        | Help Screen   |
| Field Pane Descripti | on  |
| Fill Instructions    |   |
| Special Instructions | Associated Screens:<br>BEDDAYR  |
| Skip Instructions    |   |
| Hard Edits           |   |
| Soft Edits           |   |
| AssocHelp            |   |

| Module                 | 17  |
|------------------------|---|
| Section Name           | Adult Health Status and Limitation of Activities  |
| Part                   |   |
| Question ID            | AHS.060   |
| Variable Name          | AHSTATYR  |
| Universe               | HHSTAT4 = 'S' and AGE GE 18   |
| Universe-text          | Sample adults 18+   |
| Question Text          | Compared with 12 MONTHS AGO, would you say your health is better, worse, or about the same? |
| Answer Codes           | 1. Better 2. Worse 3. About the same Refused Don't know                                     |
| Question Type          | Pick One - answer list pane   |
| Field Pane Description | on Health status  |
| Fill Instructions      |   |
| Special Instructions   | Answer name to the right.   |
| Skip Instructions      | <1-3,R,D> [goto SPECEQ (AHS.070)]   |
| Hard Edits             |   |
| Soft Edits             |   |
| AssocHelp              |   |

| Module                                   | 17  |
|--|---|
| Section Name                             | Adult Health Status and Limitation of Activities  |
| Part                                     |   |
| Question ID                              | AHS.070   |
| Variable Name                            | SPECEQ  |
| Universe                                 | HHSTAT4 = 'S' and AGE GE 18   |
| Universe-text                            | Sample adults 18+   |
| Question Text                            | Do you now have any health problem that requires you to use special equipment, such as a cane, a wheelchair, a special bed, or a special telephone? |
| Answer Codes                             | 1. Yes 2. No Refused Don't know   |
| Question Type                            | Yes/No  |
| Field Pane Description Special equipment |   |
| Fill Instructions                        |   |
| Special Instructions                     | Answer name to the right.   |
| Skip Instructions                        | <1,2,R,D> [goto FLWALK_1]   |
| Hard Edits                               |   |
| Soft Edits                               |   |
| AssocHelp                                | H_SPECEQ  |

| Module               | 17   |
|----------------------|--|
| Section Name         | Adult Health Status and Limitation of Activities   |
| Part                 |  |
| Question ID          | AHS.070_H  |
| Variable Name        | H_SPECEQ   |
| Universe             |  |
| Universe-text        |  |
| Question Text        | "Problem" is the sample adult's perception of a departure from physical, mental or emotional well-being. This incudes specific health problems, such as a disease or condition, a missing extremity or organ, or any type of impairment. It also includes more vague disorders not always thought of as health related problems or illnesses such as alcoholism, drug dependency or reaction, senility, depression, retardation, etc.  "Special Equipment" is any device, tool, utensil, instrument, implement, etc., used as an aid in performing an activity because of a physical, mental or emotional problem. This incudes the use of adult "diapers" for incontinence. For example: a spoon is not normally considered as "special equipment"; however, a uniquely designed or functioning one used for eating by a person because of physical, mental, or emotional problems is considered "special equipment." |
| Answer Codes         |  |
| Question Type        | Help Screen  |
| Field Pane Descripti | on   |
| Fill Instructions    |  |
| Special Instructions | Associated Screens:<br>SPECEQ  |
| Skip Instructions    |  |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module               | 17  |
|----------------------|---|
| Section Name         | Adult Health Status and Limitation of Activities  |
| Part                 |   |
| Question ID          | AHS.080   |
| Variable Name        | FLWALK_1  |
| Universe             | HHSTAT4 = 'S' and AGE GE 18   |
| Universe-text        | Sample adults 18+   |
| Question Text        | The next questions ask about difficulties you may have doing certain activities because of a HEALTH PROBLEM. By "health problem" we mean any physical, mental, or emotional problem or illness [Fill1:(not including pregnancy)]. |
| Answer Codes         | 1. Enter 1 to continue  |
| Question Type        | Enter 1 to Continue   |
| Field Pane Descripti | on Continue   |
| Fill Instructions    | Fill1: If SEX=2 (female), then display the following text: (not including pregnancy)  |
| Special Instructions |   |
| Skip Instructions    | <1> [goto FLWALK]   |
| Hard Edits           |   |
| Soft Edits           |   |
| AssocHelp            |   |

| Module                 | 17  |
|------------------------|---|
| Section Name           | Adult Health Status and Limitation of Activities  |
| Part                   |   |
| Question ID            | AHS.091_1   |
| Variable Name          | FLWALK  |
| Universe               | HHSTAT4 = 'S' and AGE GE 18   |
| Universe-text          | Sample adults 18+   |
| Question Text          | (book) A6   |
|                        | By yourself, and without using any special equipment, how difficult is it for you to              |
|                        | Walk a quarter of a mile - about 3 city blocks?   |
| Answer Codes           | O. Not at all difficult Only a little difficult Somewhat difficult Very difficult Can't do at all |
|                        | 6. Do not do this activity Refused  |
|                        | Don't know  |
| Question Type          | Repeating Series – Other  |
| Field Pane Description | walk a quarter of a mile  |
| Fill Instructions      |   |
| Special Instructions   | Answer name to the right. Blank line between Answer code 4 and Answer code 6.                     |
| Skip Instructions      | <0-4,6,R,D> [goto FLCLIMB]  |
| Hard Edits             |   |
| Soft Edits             |   |
| AssocHelp              | H_FLWALK  |

| Module               | 17   |
|----------------------|--|
| Section Name         | Adult Health Status and Limitation of Activities   |
| Part                 |  |
| Question ID          | AHS.091_1_H  |
| Variable Name        | H_FLWALK   |
| Universe             |  |
| Universe-text        |  |
| Question Text        | "Problem" is the sample adult's perception of a departure from physical, mental or emotional well-being. This includes specific health problems, such as a disease or condition, a missing extremity or organ, or any type of impairment. It also includes more vague disorders not always thought of as health related problems or illnesses such as alcoholism, drug dependency or reaction, senility, depression, retardation, etc.  "Special Equipment" is any device, tool, utensil, instrument, implement, etc., used as an aid in performing an activity because of a physical, mental or emotional problem. This includes the use of adult "diapers" for incontinence. For example: a spoon is not normally considered as "special equipment"; however, a uniquely designed or functioning one used for eating by a person because of physical, mental, or emotional problems is considered "special equipment." |
| Answer Codes         | "Difficult" is respondent defined.  If the sample adult gives an answer which does not match the categories on the flashcard, reread the question emphasizing the wording of the answer categories.  |
| Question Type        | Liela Cara an  |
| Field Pane Descripti | Help Screen  on  |
| Fill Instructions    |  |
| Special Instructions | Associated screens: FLWALK FLCLIMB FLSTAND FLSIT FLSTOOP FLREACH FLGRASP FLCARRY FLPUSH FLSHOP FLSOCL FLRELAX  |
| Skip Instructions    |  |

| Hard Edits             |   |
|------------------------|---|
| Soft Edits             |   |
| AssocHelp              |   |
| Module                 | 17  |
| Section Name           | Adult Health Status and Limitation of Activities  |
| Part                   |   |
| Question ID            | AHS.091_2   |
| Variable Name          | FLCLIMB   |
| Universe               | HHSTAT4 = 'S' and AGE GE 18   |
| Universe-text          | Sample adults 18+   |
| Question Text          | (book) A6   |
|                        | * Read lead-in if necessary.  |
|                        | By yourself, and without using any special equipment, how difficult is it for you to              |
|                        | Walk up 10 steps without resting?   |
| Answer Codes           | O. Not at all difficult Only a little difficult Somewhat difficult Very difficult Can't do at all |
|                        | 6. Do not do this activity Refused Don't know   |
| Question Type          | Repeating Series – Other  |
| Field Pane Description | Walk up 10 steps  |
| Fill Instructions      |   |
| Special Instructions   | Answer name to the right. Blank line between Answer code 4 and Answer code 6.                     |
| Skip Instructions      | <0-4,6,R,D> [goto FLSTAND]  |
| Hard Edits             |   |
| Soft Edits             |   |
| AssocHelp              | H FLWALK  |

| Module               | 17  |
|----------------------|---|
| Section Name         | Adult Health Status and Limitation of Activities  |
| Part                 |   |
| Question ID          | AHS.091_3   |
| Variable Name        | FLSTAND   |
| Universe             | HHSTAT4 = 'S' and AGE GE 18   |
| Universe-text        | Sample adults 18+   |
| Question Text        | (book) A6   |
|                      | * Read lead-in if necessary.  |
|                      | By yourself, and without using any special equipment, how difficult is it for you to              |
|                      | Stand or be on your feet for about 2 hours?   |
| Answer Codes         | O. Not at all difficult Only a little difficult Somewhat difficult Wery difficult Can't do at all |
|                      | 6. Do not do this activity Refused Don't know   |
| Question Type        | Repeating Series – Other  |
| Field Pane Descripti | on Stand for 2 hours  |
| Fill Instructions    |   |
| Special Instructions | Answer name to the right. Blank line between Answer code 4 and Answer code 6.                     |
| Skip Instructions    | <0-4,6,R,D> [goto FLSIT]  |
| Hard Edits           |   |
| Soft Edits           |   |
| AssocHelp            | H_FLWALK  |

| Module               | 17  |
|----------------------|---|
| Section Name         | Adult Health Status and Limitation of Activities  |
| Part                 |   |
| Question ID          | AHS.091_4   |
| Variable Name        | FLSIT   |
| Universe             | HHSTAT4 = 'S' and AGE GE 18   |
| Universe-text        | Sample adults 18+   |
| Question Text        | (book) A6   |
|                      | * Read lead-in if necessary.  |
|                      | By yourself, and without using any special equipment, how difficult is it for you to              |
|                      | Sit for about 2 hours?  |
| Answer Codes         | O. Not at all difficult Only a little difficult Somewhat difficult Very difficult Can't do at all |
|                      | 6. Do not do this activity Refused Don't know   |
| Question Type        | Repeating Series – Other  |
| Field Pane Descripti | on Sit for 2 hours  |
| Fill Instructions    |   |
| Special Instructions | Answer name to the right. Blank line between Answer code 4 and Answer code 6.                     |
| Skip Instructions    | <0-4,6,R,D> [goto FLSTOOP]  |
| Hard Edits           |   |
| Soft Edits           |   |
| AssocHelp            | H_FLWALK  |

| Module               | 17  |
|----------------------|---|
| Section Name         | Adult Health Status and Limitation of Activities  |
| Part                 |   |
| Question ID          | AHS.091_5   |
| Variable Name        | FLSTOOP   |
| Universe             | HHSTAT4 = 'S' and AGE GE 18   |
| Universe-text        | Sample adults 18+   |
| Question Text        | (book) A6   |
|                      | * Read lead-in if necessary.  |
|                      | By yourself, and without using any special equipment, how difficult is it for you to              |
|                      | Stoop, bend, or kneel?  |
| Answer Codes         | O. Not at all difficult Only a little difficult Somewhat difficult Very difficult Can't do at all |
|                      | 6. Do not do this activity Refused Don't know   |
| Question Type        | Repeating Series – Other  |
| Field Pane Descripti | Stoop, bend or kneel  |
| Fill Instructions    |   |
| Special Instructions | Answer name to the right. Blank line between Answer code 4 and Answer code 6.                     |
| Skip Instructions    | <0-4,6,R,D> [goto FLREACH]  |
| Hard Edits           |   |
| Soft Edits           |   |
| AssocHelp            | H_FLWALK  |

| Module               | 17  |
|----------------------|---|
| Section Name         | Adult Health Status and Limitation of Activities  |
| Part                 |   |
| Question ID          | AHS.091_6   |
| Variable Name        | FLREACH   |
| Universe             | HHSTAT4 = 'S' and AGE GE 18   |
| Universe-text        | Sample adults 18+   |
| Question Text        | (book) A6   |
|                      | * Read lead-in if necessary.  |
|                      | By yourself, and without using any special equipment, how difficult is it for you to              |
|                      | Reach up over your head?  |
| Answer Codes         | O. Not at all difficult Only a little difficult Somewhat difficult Wery difficult Can't do at all |
|                      | 6. Do not do this activity Refused Don't know   |
| Question Type        | Repeating Series – Other  |
| Field Pane Descripti | Reach up overhead   |
| Fill Instructions    |   |
| Special Instructions | Answer name to the right. Blank line between Answer code 4 and Answer code 6.                     |
| Skip Instructions    | <0-4,6,R,D> [goto FLGRASP]  |
| Hard Edits           |   |
| Soft Edits           |   |
| AssocHelp            | H_FLWALK  |

| Module               | 17   |
|----------------------|--|
| Section Name         | Adult Health Status and Limitation of Activities   |
| Part                 |  |
| Question ID          | AHS.141_1  |
| Variable Name        | FLGRASP  |
| Universe             | HHSTAT4 = 'S' and AGE GE 18  |
| Universe-text        | Sample adults 18+  |
| Question Text        | (book) A6  |
|                      | * Read lead-in if necessary.   |
|                      | By yourself, and without using any special equipment, how difficult is it for you to             |
|                      | Use your fingers to grasp or handle small objects?   |
| Answer Codes         | O. Not at all difficult Only a little difficult Somewhat difficult Ury difficult Can't do at all |
|                      | 6. Do not do this activity Refused Don't know  |
| Question Type        | Repeating Series – Other   |
| Field Pane Descripti |  |
| Fill Instructions    |  |
| Special Instructions | Answer name to the right. Blank line between Answer code 4 and Answer code 6.                    |
| Skip Instructions    | <0-4,6,R,D> [goto FLCARRY]   |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            | H_FLWALK   |

| Module               | 17  |
|----------------------|---|
| Section Name         | Adult Health Status and Limitation of Activities  |
| Part                 |   |
| Question ID          | AHS.141_2   |
| Variable Name        | FLCARRY   |
| Universe             | HHSTAT4 = 'S'and AGE GE 18  |
| Universe-text        | Sample adults 18+   |
| Question Text        | (book) A6   |
|                      | * Read lead-in if necessary.  |
|                      | By yourself, and without using any special equipment, how difficult is it for you to              |
|                      | Lift or carry something as heavy as 10 pounds such as a full bag of groceries?                    |
| Answer Codes         | O. Not at all difficult Only a little difficult Somewhat difficult Very difficult Can't do at all |
|                      | 6. Do not do this activity Refused Don't know   |
| Question Type        | Repeating Series – Other  |
| Field Pane Descripti | ion Lift or carry 10 pounds   |
| Fill Instructions    |   |
| Special Instructions | Answer name to the right. Blank line between Answer code 4 and Answer code 6.                     |
| Skip Instructions    | <0-4,6,R,D> [goto FLPUSH]   |
| Hard Edits           |   |
| Soft Edits           |   |
| AssocHelp            | H_FLWALK  |

| Module  | 17  |  |
|---|---|--|
| Section Name                                      | Adult Health Status and Limitation of Activities  |  |
| Part  |   |  |
| Question ID                                       | AHS.141_3   |  |
| Variable Name                                     | FLPUSH  |  |
| Universe  | HHSTAT4 = 'S' and AGE GE 18   |  |
| Universe-text                                     | Sample adults 18+   |  |
| Question Text                                     | (book) A6   |  |
|   | * Read lead-in if necessary.  |  |
|   | By yourself, and without using any special equipment, how difficult is it for you to              |  |
|   | Push or pull large objects like a living room chair?  |  |
| Answer Codes                                      | O. Not at all difficult Only a little difficult Somewhat difficult Very difficult Can't do at all |  |
|   | 6. Do not do this activity Refused Don't know   |  |
| Question Type                                     | Repeating Series – Other  |  |
| Field Pane Description Push or pull large objects |   |  |
| Fill Instructions                                 |   |  |
| Special Instructions                              | Answer name to the right. Blank line between Answer code 4 and Answer code 6.                     |  |
| Skip Instructions                                 | <0-4,6,R,D> [goto FLSHOP]   |  |
| Hard Edits  |   |  |
| Soft Edits  |   |  |
| AssocHelp   | H FLWALK  |  |

| Module               | 17  |
|----------------------|---|
| Section Name         | Adult Health Status and Limitation of Activities  |
| Part                 |   |
| Question ID          | AHS.171_1   |
| Variable Name        | FLSHOP  |
| Universe             | HHSTAT4 = 'S' and AGE GE 18   |
| Universe-text        | Sample adults 18+   |
| Question Text        | (book) A6   |
| Answer Codes         | * Read lead-in if necessary.  By yourself, and without using any special equipment, how difficult is it for you toGo out to things like shopping, movies, or sporting events?  O. Not at all difficult 1. Only a little difficult 2. Somewhat difficult 3. Very difficult 4. Can't do at all  6. Do not do this activity Refused Don't know |
| Question Type        | Repeating Series – Other  |
| Field Pane Descripti | On Go out to things   |
| Fill Instructions    |   |
| Special Instructions | Answer name to the right. Blank line between Answer code 4 and Answer code 6.   |
| Skip Instructions    | <0-4,6,R,D> [goto FLSOCL]   |
| Hard Edits           |   |
| Soft Edits           |   |
| AssocHelp            | H_FLWALK  |

| Module               | 17   |
|----------------------|--|
| Section Name         | Adult Health Status and Limitation of Activities   |
| Part                 |  |
| Question ID          | AHS.171_2  |
| Variable Name        | FLSOCL   |
| Universe             | HHSTAT4 = 'S' and AGE GE 18  |
| Universe-text        | Sample adults 18+  |
| Question Text        | (book) A6  |
|                      | * Read lead-in if necessary.   |
|                      | By yourself, and without using any special equipment, how difficult is it for you to                       |
|                      | Participate in social activities such as visiting friends, attending clubs and meetings, going to parties? |
| Answer Codes         | O. Not at all difficult Only a little difficult Somewhat difficult Very difficult Can't do at all          |
|                      | 6. Do not do this activity Refused Don't know  |
| Question Type        | Repeating Series – Other   |
| Field Pane Descripti |  |
| Fill Instructions    |  |
| Special Instructions | Answer name to the right. Blank line between Answer code 4 and Answer code 6.                              |
| Skip Instructions    | <0-4,6,R,D> [goto FLRELAX]   |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            | H_FLWALK   |

| -                    |  |
|----------------------|--|
| Module               | 17   |
| Section Name         | Adult Health Status and Limitation of Activities   |
| Part                 |  |
| Question ID          | AHS.171_3  |
| Variable Name        | FLRELAX  |
| Universe             | HHSTAT4 = 'S' and AGE GE 18  |
| Universe-text        | Sample adults 18+  |
| Question Text        | (book) A6  |
| Answer Codes         | * Read lead-in if necessary.  By yourself, and without using any special equipment, how difficult is it for you toDo things to relax at home or for leisure (reading, watching TV, sewing, listening to music)?  0. Not at all difficult 1. Only a little difficult 2. Somewhat difficult 3. Very difficult 4. Can't do at all 6. Do not do this activity Refused Don't know |
| Question Type        | Repeating Series – Other   |
| Field Pane Descripti | Relax at home  |
| Fill Instructions    |  |
| Special Instructions | Answer name to the right. Blank line between Answer code 4 and Answer code 6.  |
| Skip Instructions    | <1-4 or FLWALK= 1-4 or FLCLIMB= 1-4 or FLSTAND= 1-4 or FLSIT= 1-4 or FLSTOOP= 1-4 or FLREACH= 1-4 or FLGRASP= 1-4 or FLCARRY= 1-4 or FLPUSH= 1-4 or FLSHOP= 1-4 or FLSOCL= 1-4> [goto AFLHCA]  Else [goto SMKEV] (next section)  |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            | H_FLWALK   |

Module

Section Name
Adult Health Status and Limitation of Activities

Part
Question ID
AHS.200

Variable Name
AFLHCA

Universe

HHSTAT4 = 'S' and AGE GE 18 and (FLWALK= 1-4 or FLCLIMB= 1-4 or FLSTAND= 1-4 or FLSIT= 1-4 or FLSTOOP= 1-4 or FLREACH= 1-4 or FLGRASP= 1-4 or FLCARRY= 1-4 or FLPUSH= 1-4 or FLSHOP= 1-4 or FLSOCL= 1-4 or FLRELAX = 1-4)

#### Universe-text

Sample adults 18+ who, without using special equipment, have at least a little difficulty walking a quarter mile; walking up 10 steps without resting; standing/being on feet for about 2 hours; sitting for about 2 hours; stooping/bending/kneeling; reaching up over head; using fingers to grasp/handle small objects; lifting/carrying 10 pounds; pushing/pulling large objects;going out for things (shopping/movies); participating in social activities; or relaxing at home (reading/sewing).

## Question Text

#### (book) A7

What condition or health problem causes you to have difficulty with [fill1: condition 1, condition 2 or condition 3 (as specified in AHS.091\_1 through AHS.171\_3)][fill2: these activities]?

- \* Enter condition number for all that apply, separate with commas.
- \* Do not probe, except to clarify answer.

## Answer Codes

- 1. Vision/problem seeing
- 2. Hearing problem
- 3. Arthritis/rheumatism
- 4. Back or neck problem
- 5. Fracture, bone/joint injury
- 6. Other injury
- 7. Heart problem
- 8. Stroke problem
- 9. Hypertension/high blood pressure
- 10. Diabetes
- 11. Lung/breathing problem (for example, asthma and emphysema)
- 12. Cancer
- 13. Birth defect
- 14. Intellectual disability also known as mental retardation
- 15. Other developmental problem (for example cerebral palsy)
- 16. Senility
- 17. Depression/anxiety/emotional problem
- 18. Weight problem

-----[\*/On bottom of Flashcard only:

"Other impairment/problem" /\*]

------[\*/ q4 or

2005 fix to add a divider line between 18 & 19 /\*]

- 19. Missing limbs (fingers, toes or digits), amputee
- 20. Kidney, bladder or renal problems
- 21. Circulation problems (including blood clots)
- 22. Benign Tumors, cysts
- 23. Fibromyalgia, lupus
- 24. Osteoporosis, tendinitis
- 25. Epilepsy, seizures

- 26. Multiple Sclerosis (MS), Muscular Dystrophy (MD)
- 27. Polio(myelitis), paralysis, para/quadriplegia
- 28. Parkinson's disease, other tremors
- 29. Other nerve damage, including carpal tunnel syndrome
- 30. Hernia
- 31. Ulcer
- 32. Varicose veins, hemorrhoids
- 33. Thyroid problems, Grave's disease, gout
- 34. Knee problems (not arthritis (03), not joint injury(05))
- 35. Migraine headaches (not just headaches)
- 90. Other impairment/problem (Specify one)
- 91. Other impairment/problem (Specify one)

Refused

Don't know/not sure

## **Question** Type

**Enter All That Apply** 

# Field Pane Description

Condition numbers

## Fill Instructions

Fill1 = [if the number of conditions indicated in questions AHS.091\_1 - AHS.171\_3 as having at least a little bit of difficulty (i.e. answers are 1-4) is less than or equal to 3]

Fill2 = [if the number of conditions indicated in questions AHS.091\_1 - AHS.171\_3 as having at least a little bit of difficulty (i.e. answers are 1-4) is greater than 3]

## **Special Instructions**

The fill to be applied in the question text for Fill 1 is conditional on how many of the responses to questions AHS.091\_1 through AHS.171\_3 were either 1,2,3 or 4 (I.e. the respondent had a least a little difficulty carrying out the particular activity/action). If only one of these questions has an answer that meets the criteria (I.e. 1-4), then the question text is "What condition or health problem causes you to have difficulty with [condition 1]?". If only 2 questions had answers in the 1-4 range, the question text is "What condition or health problem causes you to have difficulty with [condition 1] or [condition 2]?". If 3 questions had such answers, use the question text provided.

Use the following phrases to fill in the question text when the conditions for Fill 1 apply:

FLWALK: walking a quarter of a mile FLCLIMB: walking up 10 steps FLSTAND: standing for 2 hours FLSIT: sitting for 2 hours

FLSTOOP: stooping, bending or kneeling

FLREACH: reaching up overhead

FLGRASP: grasping or handling small objects FLCARRY: lifting or carrying 10 pounds FLPUSH: pushing or pulling large objects

FLSHOP: going out for things

FLSOCL: participating in social activities

FLRELAX: relaxing at home

## Skip Instructions

[1- 12, 14 - 35] goto the appropriate follow up question AHCL01N-AHCL12N, AHCL14N-AHCL35N], in numerical order

<13> store "96" in AHCL13N and "6" IN AHCL13T[goto SMKEV]

<90> [goto AFLHCA\_S1] <91> [goto AFLHCA\_S2]

Roster through all AFLHCA entries. Once exhausted goto SMKEV (next section)

<D, R> [goto SMKEV (next section)]

## Hard Edits

| Soft Edits           |  |
|----------------------|--|
| AssocHelp            | H_FLWALK   |
| Module               | 17   |
| Section Name         |  |
| Part                 |  |
| Question ID          | AHS.200_H  |
| Variable Name        | H_AFLHCA   |
| Universe             |  |
| Universe-text        |  |
| Question Text        | The terms "conditions" and "health problems" are respondent defined.   |
|                      | Do not read the precoded categories to the respondent.   |
|                      | Enter "90" or "91" if the respondent mentions a condition or health problem not listed and then specify the condition exactly as the respondent states it. |
| Answer Codes         |  |
| Question Type        | Help Screen  |
| Field Pane Descripti | on   |
| Fill Instructions    |  |
| Special Instructions | Associated screens:<br>AFLHCA  |
| Skip Instructions    |  |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module                 | 17  |
|------------------------|---|
| Section Name           | Adult Health Status and Limitation of Activities  |
| Part                   |   |
| Question ID            | AHS.201_90  |
| Variable Name          | AFLHCA_S1   |
| Universe               | HHSTAT4 = 'S' and AGE GE 18 and 90 selected in AFLHCA   |
| Universe-text          | Sample adults 18+ whose difficulties performing activities listed in FLWALK through FLRELAX is due to at least one condition not listed in AFLHCA |
| Question Text          | * Enter other impairment/problem.   |
| Answer Codes           |   |
| Question Type          | Text  |
| Field Pane Description | on Specify  |
| Fill Instructions      |   |
| Special Instructions   | */ need to add Descriptor name to Form Pane in front of the answer box of:<br>Specify one (1) [ ] /* for either Q4 or 2005 fix                    |
| Skip Instructions      | <50 chars> [goto AHCL90N] >ENTER< only with no description [goto ERR1_AFLHCA_S1]  |
|                        | Else goto the appropriate follow-up questions AHCL01N-AHCL12N, AHCL14N-AHCL35N], in numerical order, as specified in AFLHCA                       |
| Hard Edits             | \$ You should enter something specific.   |
| Soft Edits             |   |
| AssocHelp              |   |

| Module               | 17   |
|----------------------|--|
| Section Name         | Adult Health Status and Limitation of Activities   |
| Part                 |  |
| Question ID          | AHS.201_91   |
| Variable Name        | AFLHCA_S2  |
| Universe             | HHSTAT4 = 'S' and AGE GE 18 and 91 selected in AFLHCA  |
| Universe-text        | Sample adults 18+ whose difficulty performing activities listed in FLWALK through FLRELAX is due to more than one condition that is not listed in AFLHCA |
| Question Text        | * Enter other impairment/problem.  |
| Answer Codes         |  |
| Question Type        | Text   |
| Field Pane Descripti | on Specify   |
| Fill Instructions    |  |
| Special Instructions | */ need to add Descriptor name to Form Pane in front of the answer box of:<br>Specify one (2) [ ] /* for either Q4 or 2005 fix                           |
| Skip Instructions    | <50 chars> [goto AHCL91N]  |
|                      | >ENTER< only with no description [goto ERR1_AFLHCA_S1]   |
|                      | */ need to add Descriptor name to Form Pane in front of the answer box of:<br>Specify one (2) [ ] /* for either Q4 or 2005 fix                           |
| Hard Edits           | \$ You should enter something specific.  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module               | 17   |
|----------------------|--|
| Section Name         | Adult Health Status and Limitation of Activities   |
| Part                 |  |
| Question ID          | AHS.300_1  |
| Variable Name        | AHCL01N  |
| Universe             | HHSTAT4 = 'S' and AGE GE 18 and AFLHCA = 1   |
| Universe-text        | Sample adults 18+ who had difficulty due to a vision problem or problem seeing   |
| Question Text        | 1 of 2   |
|                      | How long have you had a vision problem or problem seeing?  |
|                      | * Enter number for time with your vision problem or problem seeing   |
|                      | * Enter '95' for 95 or more.   |
|                      | * Enter '96' if since birth.   |
| Answer Codes         |  |
| Question Type        | Integer  |
| Field Pane Descripti | on Number  |
| Fill Instructions    |  |
| Special Instructions |  |
| Skip Instructions    | <1-95,D> [goto AHCL01T] <r> [store "R" in AHCL01T] [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)] &lt;96&gt; [store "6" in AHCL01T] [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]</r> |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module               | 17   |            |
|----------------------|--|------------|
| Section Name         | Adult Health Status and Limitation of Activities   |            |
| Part                 |  |            |
| Question ID          | AHS.300_2  |            |
| Variable Name        | AHCL01T  |            |
| Universe             | HHSTAT4 = 'S' and AGE GE 18 and AHCL01N = 1-95, D  |            |
| Universe-text        | Sample adults 18+ who answered 1-95, D for the "number" part of this 2-part  | t question |
| Question Text        | 2 of 2   |            |
|                      | * Enter time period for time with vision problem or problem seeing.  |            |
| Answer Codes         | 1. Days 2. Weeks 3. Months 4. Years  |            |
|                      | Since birth Refused Don't know   |            |
| Question Type        | Pick One - answer list pane  |            |
| Field Pane Descripti | ion Time period  |            |
| Fill Instructions    |  |            |
| Special Instructions | Answer name to the right.  |            |
| Skip Instructions    | <1- 4, R,D> [goto the next condition, in numerical order, selected at AFLHC/ (AHS.200). If this is the last condition selected, goto SMKEV (next section)] <6> [ goto ERR2_AHCL01T] [if [AHCL01N = Number greater than person years old and AHCL01T= 4]] goto ERR1_AHCL01T |            |
| Hard Edits           | ERR1_AHCL01T   |            |
|                      | *Time with condition cannot be greater than age.  * Please correct.  |            |
|                      | ERR2_AHCL01T   |            |
|                      | * "6" not selectable.  |            |
| Soft Edits           |  |            |
| AssocHelp            |  |            |

| Module                 | 17   |
|------------------------|--|
| Section Name           | Adult Health Status and Limitation of Activities   |
| Part                   |  |
| Question ID            | AHS.301_1  |
| Variable Name          | AHCL02N  |
| Universe               | HHSTAT4 = 'S' and AGE GE 18 and AFLHCA = 2   |
| Universe-text          | Sample adults 18+ who had difficulty due to a hearing problem  |
| Question Text          | 1 of 2   |
|                        | How long have you had a hearing problem?   |
|                        | * Enter number for time with a hearing problem.  |
|                        | * Enter '95" for 95 or more.   |
|                        | * Enter "96" if since birth.   |
| Answer Codes           |  |
| Question Type          | Integer  |
| Field Pane Description | on Number  |
| Fill Instructions      |  |
| Special Instructions   |  |
| Skip Instructions      | <1-95,D> [goto AHCL02T] <r> [store "R" in AHCL02T] [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)] &lt;96&gt; [store "6" in AHCL02T] [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]</r> |
| Hard Edits             |  |
| Soft Edits             |  |
| AssocHelp              |  |

| Module               | 17  |
|----------------------|---|
| Section Name         | Adult Health Status and Limitation of Activities  |
| Part                 |   |
| Question ID          | AHS.301_2   |
| Variable Name        | AHCL02T   |
| Universe             | HHSTAT4 = 'S' and AGE GE 18 and AHCL02N = 1-95, D   |
| Universe-text        | Sample adults 18+ who answered 1-95, D for the "number" part of this 2-part question  |
| Question Text        | 2 of 2  |
|                      | * Enter time period for time with hearing problem.  |
| Answer Codes         | 1. Days 2. Weeks 3. Months 4. Years   |
|                      | Since birth Refused Don't know  |
| Question Type        | Pick One - answer list pane   |
| Field Pane Descripti | on Time period  |
| Fill Instructions    |   |
| Special Instructions | Answer name to the right.   |
| Skip Instructions    | <1- 4, R,D> [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)] <6> [goto ERR2_AHCL02T] [if [AHCL02N = Number greater than person years old and AHCL02T= 4]] goto ERR1_AHCL02T |
| Hard Edits           | ERR1_AHCL02T  |
|                      | * Time with condition cannot be greater than age.  * Please correct.  |
|                      | ERR2_AHCL02T  |
|                      | * "6" not selectable.   |
| Soft Edits           |   |
| AssocHeln            |   |

| Module               | 17   |
|----------------------|--|
| Section Name         | Adult Health Status and Limitation of Activities   |
| Part                 |  |
| Question ID          | AHS.302_1  |
| Variable Name        | AHCL03N  |
| Universe             | HHSTAT4 = 'S' and AGE GE 18 and AFLHCA = 3   |
| Universe-text        | Sample adults 18+ who had difficulty due to arthritis or rheumatism  |
| Question Text        | 1 of 2   |
|                      | How long have you had arthritis or rheumatism?   |
|                      | * Enter number for time with arthritis or rheumatism.  |
|                      | * Enter '95" for 95 or more.   |
|                      | * Enter "96" if since birth.   |
| Answer Codes         |  |
| Question Type        | Integer  |
| Field Pane Descripti | on Number  |
| Fill Instructions    |  |
| Special Instructions |  |
| Skip Instructions    | <1-95,D> [goto AHCL03T] <r> [store "R" in AHCL03T] [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)] &lt;96&gt; [store "6" in AHCL03T] [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]</r> |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module               | 17  |
|----------------------|---|
| Section Name         | Adult Health Status and Limitation of Activities  |
| Part                 |   |
| Question ID          | AHS.302_2   |
| Variable Name        | AHCL03T   |
| Universe             | HHSTAT4 = 'S' and AGE GE 18 and AHCL03N = 1-95, D   |
| Universe-text        | Sample adults 18+ who answered 1-95, D for the "number" part of this 2-part question  |
| Question Text        | 2 of 2  |
|                      | * Enter time period for time with arthritis or rheumatism.  |
| Answer Codes         | 1. Days 2. Weeks 3. Months 4. Years Since birth   |
|                      | Refused Don't know  |
| Question Type        | Pick One - answer list pane   |
| Field Pane Descripti | Time period   |
| Fill Instructions    |   |
| Special Instructions | Answer name to the right.   |
| Skip Instructions    | <1- 4, R,D> [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)] <6> [goto ERR2_AHCL03T] [if [AHCL03N = Number greater than person years old and AHCL03T= 4]] goto ERR1_AHCL03T |
| Hard Edits           | ERR_AHCL03T   |
|                      | * Time with condition cannot be greater than age. * Please correct.   |
| Soft Edits           |   |
| AssocHelp            |   |

| Module               | 17   |
|----------------------|--|
| Section Name         | Adult Health Status and Limitation of Activities   |
| Part                 |  |
| Question ID          | AHS.303_1  |
| Variable Name        | AHCL04N  |
| Universe             | HHSTAT4 = 'S' and AGE GE 18 and AFLHCA = 4   |
| Universe-text        | Sample adults 18+ who had difficulty due to a back or neck problem   |
| Question Text        | 1 of 2   |
|                      | How long have you had a back or neck problem?  |
|                      | * Enter number for time with back or neck problem.   |
|                      | * Enter '95" for 95 or more.   |
|                      | * Enter "96" if since birth.   |
| Answer Codes         |  |
| Question Type        | Integer  |
| Field Pane Descripti | on Number  |
| Fill Instructions    |  |
| Special Instructions |  |
| Skip Instructions    | <1-95,D> [goto AHCL04T] <r> [store "R" in AHCL04T] [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)] &lt;96&gt; [store "6" in AHCL04T] [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]</r> |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module               | 17  |
|----------------------|---|
| Section Name         | Adult Health Status and Limitation of Activities  |
| Part                 |   |
| Question ID          | AHS.303_2   |
| Variable Name        | AHCL04T   |
| Universe             | HHSTAT4 = 'S' and AGE GE 18 and AHCL04N= 1-95, D  |
| Universe-text        | Sample adults 18+ who answered 1-95, D for the "number" part of this 2-part question  |
| Question Text        | 2 of 2  |
|                      | * Enter time period for time with back or neck problem.   |
| Answer Codes         | 1. Days 2. Weeks 3. Months 4. Years Since birth Refused Don't know  |
| Question Type        | Pick One - answer list pane   |
| Field Pane Descript  | ·   |
| Fill Instructions    |   |
| Special Instructions | Answer name to the right.   |
| Skip Instructions    | <1- 4, R,D> [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)] <6> [goto ERR2_AHCL04T] [if [AHCL04N = Number greater than person years old and AHCL04T= 4]] goto ERR1_AHCL04T |
| Hard Edits           | ERR_AHCL04T  * Time with condition cannot be greater than age.  * Please correct.   |
| Soft Edits           |   |
| AssocHelp            |   |

| Module                 | 17   |
|------------------------|--|
| Section Name           | Adult Health Status and Limitation of Activities   |
| Part                   |  |
| Question ID            | AHS.304_1  |
| Variable Name          | AHCL05N  |
| Universe               | HHSTAT4 = 'S' and AGE GE 18 and AFLHCA = 5   |
| Universe-text          | Sample adults 18+ who had difficulty due to a fracture, bone, or joint injury  |
| Question Text          | 1 of 2   |
|                        | How long have you had a fracture, bone, or joint injury?   |
|                        | * Enter number for time with a fracture, bone, or joint injury.  |
|                        | * Enter '95" for 95 or more.   |
|                        | * Enter "96" if since birth.   |
| Answer Codes           |  |
| Question Type          | Integer  |
| Field Pane Description | on Number  |
| Fill Instructions      |  |
| Special Instructions   |  |
| Skip Instructions      | <1-95,D> [goto AHCL05T] <r> [store "R" in AHCL05T] [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)] &lt;96&gt; [store "6" in AHCL05T] [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]</r> |
| Hard Edits             |  |
| Soft Edits             |  |
| AssocHelp              |  |

| Module               | 17  |
|----------------------|---|
| Section Name         | Adult Health Status and Limitation of Activities  |
| Part                 |   |
| Question ID          | AHS.304_2   |
| Variable Name        | AHCL05T   |
| Universe             | HHSTAT4 = 'S' and AGE GE 18 and AHCL05N = 1-95, D   |
| Universe-text        | Sample adults 18+ who answered 1-95, D for the "number" part of this 2-part question  |
| Question Text        | 2 of 2  |
|                      | * Enter time period for time with fracture, bone, or joint injury.  |
| Answer Codes         | 1. Days 2. Weeks 3. Months 4. Years   |
|                      | Since birth Refused Don't know  |
| Question Type        | Pick One - answer list pane   |
| Field Pane Descript  | Time period   |
| Fill Instructions    |   |
| Special Instructions | Answer name to the right.   |
| Skip Instructions    | <1- 4, R,D> [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)] <6> [goto ERR2_AHCL05T] [if [AHCL05N = Number greater than person years old and AHCL05T= 4]] goto ERR1_AHCL05T |
| Hard Edits           | ERR_AHCL05T  * Time with condition cannot be greater than age.  * Please correct.   |
| Soft Edits           |   |
| AssocHelp            |   |

| Module               | 17   |
|----------------------|--|
| Section Name         | Adult Health Status and Limitation of Activities   |
| Part                 |  |
| Question ID          | AHS.305_1  |
| Variable Name        | AHCL06N  |
| Universe             | HHSTAT4 = 'S' and AGE GE 18 and AFLHCA = 6   |
| Universe-text        | Sample adults 18+ who had difficulty due to an injury other than a fracture, bone, or joint injury   |
| Question Text        | 1 of 2   |
|                      | How long have you had the (fill: other) injury that caused your limitation?  |
|                      | * Enter number for time with injury that caused your limitation.   |
|                      | * Enter '95" for 95 or more.   |
|                      | * Enter "96" if since birth.   |
| Answer Codes         |  |
| Question Type        | Integer  |
| Field Pane Descripti | on Number  |
| Fill Instructions    | Fill: [if condition 5 is selected at AFLHCA]   |
| Special Instructions |  |
| Skip Instructions    | <1-95,D> [goto AHCL06T] <r> [store "R" in AHCL06T] [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)] &lt;96&gt; [store "6" in AHCL06T] [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]</r> |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module               | 17  |
|----------------------|---|
| Section Name         | Adult Health Status and Limitation of Activities  |
| Part                 |   |
| Question ID          | AHS.305_2   |
| Variable Name        | AHCL06T   |
| Universe             | HHSTAT4 = 'S' and AGE GE 18 and AHCL06N = 1-95, D   |
| Universe-text        | Sample adults 18+ who answered 1-95, D for the "number" part of this 2-part question  |
| Question Text        | 2 of 2  |
|                      | * Enter time period for time with (fill: other) injury.   |
| Answer Codes         | 1. Days 2. Weeks 3. Months 4. Years Since birth Refused Don't know  |
| Question Type        | Integer   |
| Field Pane Descript  |   |
| Fill Instructions    | Fill: [if condition 5 is selected at AFLHCA]  |
| Special Instructions | Answer name to the right.   |
| Skip Instructions    | <1- 4, R,D> [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)] <6> [goto ERR2_AHCL06T] [if [AHCL06N = Number greater than person years old and AHCL06T= 4]] goto ERR1_AHCL06T |
| Hard Edits           | ERR_AHCL06T  * Time with condition cannot be greater than age.  * Please correct.   |
| Soft Edits           |   |
| AssocHelp            |   |

| Module                 | 17   |
|------------------------|--|
| Section Name           | Adult Health Status and Limitation of Activities   |
| Part                   |  |
| Question ID            | AHS.306_1  |
| Variable Name          | AHCL07N  |
| Universe               | HHSTAT4 = 'S' and AGE GE 18 and AFLHCA = 7   |
| Universe-text          | Sample adults 18+ who had difficulty due to a heart problem  |
| Question Text          | 1 of 2   |
|                        | How long have you had a heart problem?   |
|                        | * Enter number for time with a heart problem.  |
|                        | * Enter '95" for 95 or more.   |
|                        | * Enter "96" if since birth.   |
| Answer Codes           |  |
| Question Type          | Integer  |
| Field Pane Description | on Number  |
| Fill Instructions      |  |
| Special Instructions   |  |
| Skip Instructions      | <1-95,D> [goto AHCL07T] <r> [store "R" in AHCL07T] [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)] &lt;96&gt; [store "6" in AHCL07T] [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]</r> |
| Hard Edits             |  |
| Soft Edits             |  |
| AssocHelp              |  |

| Module               | 17  |
|----------------------|---|
| Section Name         | Adult Health Status and Limitation of Activities  |
| Part                 |   |
| Question ID          | AHS.306_2   |
| Variable Name        | AHCL07T   |
| Universe             | HHSTAT4 = 'S' and AGE GE 18 and AHCL07N = 1-95, D   |
| Universe-text        | Sample adults 18+ who answered 1-95, D for the "number" part of this 2-part question  |
| Question Text        | 2 of 2  |
|                      | * Enter time period for time with heart problem.  |
| Answer Codes         | 1. Days 2. Weeks 3. Months 4. Years   |
|                      | Since birth Refused Don't know  |
| Question Type        | Integer   |
| Field Pane Descripti | Time period   |
| Fill Instructions    |   |
| Special Instructions | Answer name to the right.   |
| Skip Instructions    | <1- 4, R,D> [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)] <6> [goto ERR2_AHCL07T] [if [AHCL07N = Number greater than person years old and AHCL07T= 4]] goto ERR1_AHCL07T |
| Hard Edits           | ERR_AHCL07T  * Time with condition cannot be greater than age.  * Please correct.   |
| Soft Edits           |   |
| AssocHelp            |   |

| Module               | 17   |
|----------------------|--|
| Section Name         | Adult Health Status and Limitation of Activities   |
| Part                 |  |
| Question ID          | AHS.307_1  |
| Variable Name        | AHCL08N  |
| Universe             | HHSTAT4 = 'S' and AGE GE 18 and AFLHCA = 8   |
| Universe-text        | Sample adults 18+ who had difficulty due to a stroke problem   |
| Question Text        | 1 of 2   |
|                      | How long have you had a stroke problem?  |
|                      | * Enter number for time with a stroke problem.   |
|                      | * Enter '95" for 95 or more.   |
|                      | * Enter "96" if since birth.   |
| Answer Codes         |  |
| Question Type        | Integer  |
| Field Pane Descripti | on Number  |
| Fill Instructions    |  |
| Special Instructions |  |
| Skip Instructions    | <1-95,D> [goto AHCL08T] <r> [store "R" in AHCL08T] [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)] &lt;96&gt; [store "6" in AHCL08T] [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]</r> |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module               | 17  |
|----------------------|---|
| Section Name         | Adult Health Status and Limitation of Activities  |
| Part                 |   |
| Question ID          | AHS.307_2   |
| Variable Name        | AHCL08T   |
| Universe             | HHSTAT4 = 'S' and AGE GE 18 and AHCL08N = 1-95, D   |
| Universe-text        | Sample adults 18+ who answered 1-95, D for the "number" part of this 2-part question  |
| Question Text        | 2 of 2  |
|                      | * Enter time period for time with stroke problem.   |
| Answer Codes         | 1. Days 2. Weeks 3. Months 4. Years Since birth Refused Don't know  |
| Question Type        | Pick One - answer list pane   |
| Field Pane Descript  | ·   |
| Fill Instructions    |   |
| Special Instructions | Answer name to the right.   |
| Skip Instructions    | <1- 4, R,D> [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)] <6> [goto ERR2_AHCL08T] [if [AHCL08N = Number greater than person years old and AHCL08T= 4]] goto ERR1_AHCL08T |
| Hard Edits           | ERR_AHCL08T  * Time with condition cannot be greater than age.  * Please correct.   |
| Soft Edits           |   |
| AssocHelp            |   |

| Module               | 17   |
|----------------------|--|
| Section Name         | Adult Health Status and Limitation of Activities   |
| Part                 |  |
| Question ID          | AHS.308_1  |
| Variable Name        | AHCL09N  |
| Universe             | HHSTAT4 = 'S' and AGE GE 18 and AFLHCA = 9   |
| Universe-text        | Sample adults 18+ who had difficulty due to hypertension or high blood pressure  |
| Question Text        | 1 of 2   |
|                      | How long have you had hypertension or high blood pressure?   |
|                      | * Enter number for time with hypertension or high blood pressure.  |
|                      | * Enter '95" for 95 or more.   |
|                      | * Enter "96" if since birth.   |
| Answer Codes         |  |
| Question Type        | Integer  |
| Field Pane Descripti | on Number  |
| Fill Instructions    |  |
| Special Instructions |  |
| Skip Instructions    | <1-95,D> [goto AHCL09T] <r> [store "R" in AHCL09T] [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)] &lt;96&gt; [store "6" in AHCL09T] [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]</r> |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module               | 17  |
|----------------------|---|
| Section Name         | Adult Health Status and Limitation of Activities  |
| Part                 |   |
| Question ID          | AHS.308_2   |
| Variable Name        | AHCL09T   |
| Universe             | HHSTAT4 = 'S' and AGE GE 18 and AHCL09N = 1-95, D   |
| Universe-text        | Sample adults 18+ who answered 1-95, D for the "number" part of this 2-part question  |
| Question Text        | 2 of 2  |
|                      | * Enter time period for time with hypertension or high blood pressure.  |
| Answer Codes         | 1. Days 2. Weeks 3. Months 4. Years Since birth Refused Don't know  |
| Question Type        | Pick One - answer list pane   |
| Field Pane Descripti | ·   |
| Fill Instructions    |   |
| Special Instructions | Answer name to the right.   |
| Skip Instructions    | <1- 4, R,D> [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)] <6> [goto ERR2_AHCL09T] [if [AHCL09N = Number greater than person years old and AHCL09T= 4]] goto ERR1_AHCL09T |
| Hard Edits           | ERR_AHCL09T   |
|                      | * Time with condition cannot be greater than age. * Please correct.   |
| Soft Edits           |   |
| AssocHelp            |   |

| Module               | 17   |
|----------------------|--|
| Section Name         | Adult Health Status and Limitation of Activities   |
| Part                 |  |
| Question ID          | AHS.309_1  |
| Variable Name        | AHCL10N  |
| Universe             | HHSTAT4 = 'S'and AGE GE 18 and AFLHCA = 10   |
| Universe-text        | Sample adults 18+ who had difficulty due to diabetes   |
| Question Text        | 1 of 2   |
|                      | How long have you had diabetes?  |
|                      | * Enter number for time with diabetes.   |
|                      | * Enter '95" for 95 or more.   |
|                      | * Enter "96" if since birth.   |
| Answer Codes         |  |
| Question Type        | Integer  |
| Field Pane Descripti | on Number  |
| Fill Instructions    |  |
| Special Instructions |  |
| Skip Instructions    | <1-95,D> [goto AHCL10T] <r> [store "R" in AHCL10T] [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)] &lt;96&gt; [store "6" in AHCL10T] [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]</r> |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module               | 17   |
|----------------------|--|
| Section Name         | Adult Health Status and Limitation of Activities   |
| Part                 |  |
| Question ID          | AHS.309_2  |
| Variable Name        | AHCL10T  |
| Universe             | HHSTAT4 = 'S' and AGE GE 18 and AHCL10N = 1-95, D  |
| Universe-text        | Sample adults 18+ who answered 1-95, D for the "number" part of this 2-part question   |
| Question Text        | 2 of 2   |
|                      | * Enter time period for time with diabetes.  |
| Answer Codes         | 1. Days 2. Weeks 3. Months 4. Years Since birth  |
|                      | Refused Don't know   |
| Question Type        | Pick One - answer list pane  |
| Field Pane Descript  | ion Time period  |
| Fill Instructions    |  |
| Special Instructions | Answer name to the right.  |
| Skip Instructions    | <1- 4, R,D>[goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)] <6> goto ERR2_AHCL10T [if [AHCL10N = Number greater than person years old and AHCL10T= 4]] goto ERR1_AHCL10T |
| Hard Edits           | ERR_AHCL10T  |
|                      | * Time with condition cannot be greater than age. * Please correct.  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module               | 17   |
|----------------------|--|
| Section Name         | Adult Health Status and Limitation of Activities   |
| Part                 |  |
| Question ID          | AHS.310_1  |
| Variable Name        | AHCL11N  |
| Universe             | HHSTAT4 = 'S' and AGE GE 18 and AFLHCA = 11  |
| Universe-text        | Sample adults 18+ who had difficulty due to a lung or breathing problem  |
| Question Text        | 1 of 2   |
|                      | How long have you had a lung or breathing problem (e.g. asthma and emphysema)?   |
|                      | * Enter number for time with a lung or breathing problem.  |
|                      | * Enter '95" for 95 or more.   |
|                      | * Enter "96" if since birth.   |
| Answer Codes         |  |
| Question Type        | Integer  |
| Field Pane Descripti | on Number  |
| Fill Instructions    |  |
| Special Instructions |  |
| Skip Instructions    | <1-95,D> [goto AHCL11T] <r> [store "R" in AHCL11T] [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)] &lt;96&gt; [store "6" in AHCL11T] [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]</r> |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module               | 17  |
|----------------------|---|
| Section Name         | Adult Health Status and Limitation of Activities  |
| Part                 |   |
| Question ID          | AHS.310_2   |
| Variable Name        | AHCL11T   |
| Universe             | HHSTAT4 = 'S' and AGE GE 18 and AHCL11N = 1-95, D   |
| Universe-text        | Sample adults 18+ who answered 1-95, D for the "number" part of this 2-part question  |
| Question Text        | 2 of 2  |
|                      | * Enter time period for time with lung or breathing problem (e.g. asthma and emphysema).  |
| Answer Codes         | 1. Days 2. Weeks 3. Months 4. Years   |
|                      | Since birth Refused Don't know  |
| Question Type        | Pick One - answer list pane   |
| Field Pane Descript  | tion Time period  |
| Fill Instructions    |   |
| Special Instructions | Answer name to the right.   |
| Skip Instructions    | <1- 4, R,D> [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)] <6> [goto ERR2_AHCL11T] [if [AHCL11N = Number greater than person years old and AHCL11T= 4]] goto ERR1_AHCL11T |
| Hard Edits           | ERR_AHCL11T  * Time with condition cannot be greater than age.  * Please correct.   |
| Soft Edits           |   |
| AssocHelp            |   |

| Module               | 17   |
|----------------------|--|
| Section Name         | Adult Health Status and Limitation of Activities   |
| Part                 |  |
| Question ID          | AHS.311_1  |
| Variable Name        | AHCL12N  |
| Universe             | HHSTAT4 = 'S' and AGE GE 18 and AFLHCA = 12  |
| Universe-text        | Sample adults 18+ who had difficulty due to cancer   |
| Question Text        | 1 of 2   |
|                      | How long have you had cancer?  |
|                      | * Enter number for time with cancer.   |
|                      | * Enter '95" for 95 or more.   |
|                      | * Enter "96" if since birth.   |
| Answer Codes         |  |
| Question Type        | Integer  |
| Field Pane Descripti | on Number  |
| Fill Instructions    |  |
| Special Instructions |  |
| Skip Instructions    | <1-95,D> [goto AHCL12T] <r> [store "R" in AHCL12T] [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)] &lt;96&gt; [store "6" in AHCL12T] [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]</r> |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module               | 17  |
|----------------------|---|
| Section Name         | Adult Health Status and Limitation of Activities  |
| Part                 |   |
| Question ID          | AHS.311_2   |
| Variable Name        | AHCL12T   |
| Universe             | HHSTAT4 = 'S' and AGE GE 18 and AHCL12N = 1-95, D   |
| Universe-text        | Sample adults 18+ who answered 1-95, D for the "number" part of this 2-part question  |
| Question Text        | 2 of 2  |
|                      | * Enter time period for time with cancer.   |
| Answer Codes         | 1. Days 2. Weeks 3. Months 4. Years   |
|                      | Since birth Refused Don't know  |
| Question Type        | Pick One - answer list pane   |
| Field Pane Descript  | tion Time period  |
| Fill Instructions    |   |
| Special Instructions | Answer name to the right.   |
| Skip Instructions    | <1- 4, R,D> [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)] <6> [goto ERR2_AHCL12T] [if [AHCL12N = Number greater than person years old and AHCL12T= 4]] goto ERR1_AHCL12T |
| Hard Edits           | ERR_AHCL12T   |
|                      | * Time with condition cannot be greater than age. * Please correct.   |
| Soft Edits           |   |
| AssocHelp            |   |

| Module               | 17   |
|----------------------|--|
| Section Name         | Adult Health Status and Limitation of Activities                       |
| Part                 |  |
| Question ID          | AHS.312_1  |
| Variable Name        | AHCL13N  |
| Universe             |  |
| Universe-text        |  |
| Question Text        |  |
| Answer Codes         |  |
| Question Type        | Other  |
| Field Pane Descripti | on   |
| Fill Instructions    |  |
| Special Instructions | Storage variable for follow up to choice # 13 (birth defect) in AFLHCA |
| Skip Instructions    |  |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module                 | 17   |
|------------------------|--|
| Section Name           | Adult Health Status and Limitation of Activities                       |
| Part                   |  |
| Question ID            | AHS.312_2  |
| Variable Name          | AHCL13T  |
| Universe               |  |
| Universe-text          |  |
| Question Text          |  |
| Answer Codes           |  |
| Question Type          | Other  |
| Field Pane Description | on Time period   |
| Fill Instructions      |  |
| Special Instructions   | Storage variable for follow up to choice # 13 (birth defect) in AFLHCA |
| Skip Instructions      |  |
| Hard Edits             |  |
| Soft Edits             |  |
| AssocHelp              |  |

| Module               | 17   |
|----------------------|--|
| Section Name         | Adult Health Status and Limitation of Activities   |
| Part                 |  |
| Question ID          | AHS.313_1  |
| Variable Name        | AHCL14N  |
| Universe             | HHSTAT4 = 'S' and AGE GE 18 and AFLHCA = 14  |
| Universe-text        | Sample adults 18+ who had difficulty due to mental retardation   |
| Question Text        | 1 of 2   |
|                      | How long have you had intellectual disability, also known as mental retardation?   |
|                      | * Enter number for time with intellectual disability/mental retardation.   |
|                      | * Enter '95" for 95 or more.   |
|                      | * Enter "96" if since birth.   |
| Answer Codes         |  |
| Question Type        | Integer  |
| Field Pane Descripti | on Number  |
| Fill Instructions    |  |
| Special Instructions |  |
| Skip Instructions    | <1-95,D> [goto AHCL14T] <r> [store "R" in AHCL14T] [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)] &lt;96&gt; [store "6" in AHCL14T] [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]</r> |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module               | 17  |
|----------------------|---|
| Section Name         | Adult Health Status and Limitation of Activities  |
| Part                 |   |
| Question ID          | AHS.313_2   |
| Variable Name        | AHCL14T   |
| Universe             | HHSTAT4 = 'S' and AGE GE 18 and AHCL14N = 1-95, D   |
| Universe-text        | Sample adults 18+ who answered 1-95, D for the "number" part of this 2-part question  |
| Question Text        | 2 of 2  |
|                      | * Enter time period for time with intellectual disability/mental retardation.   |
| Answer Codes         | 1. Days 2. Weeks 3. Months 4. Years Since birth   |
|                      | Refused Don't know  |
| Question Type        | Pick One - answer list pane   |
| Field Pane Descripti | ·   |
| Fill Instructions    |   |
| Special Instructions | Answer name to the right.   |
| Skip Instructions    | <1- 4, R,D> [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)] <6> [goto ERR2_AHCL14T] [if [AHCL14N = Number greater than person years old and AHCL14T= 4]] goto ERR1_AHCL14T |
| Hard Edits           | ERR_AHCL14T  * Time with condition cannot be greater than age.  * Please correct.   |
| Soft Edits           |   |
| AssocHelp            |   |

| Module               | 17   |
|----------------------|--|
| Section Name         | Adult Health Status and Limitation of Activities   |
| Part                 |  |
| Question ID          | AHS.314_1  |
| Variable Name        | AHCL15N  |
| Universe             | HHSTAT4 = 'S' and AGE GE 18 and AFLHCA = 15  |
| Universe-text        | Sample adults 18+ who had difficulty due to a developmental problem  |
| Question Text        | 1 of 2   |
|                      | How long have you had a developmental problem (e.g., cerebral palsy)?  |
|                      | * Enter number for time with a developmental problem.  |
|                      | * Enter '95" for 95 or more.   |
|                      | * Enter "96" if since birth.   |
| Answer Codes         |  |
| Question Type        | Integer  |
| Field Pane Descripti | on Number  |
| Fill Instructions    |  |
| Special Instructions |  |
| Skip Instructions    | <1-95,D> [goto AHCL15T] <r> [store "R" in AHCL15T] [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)] &lt;96&gt; [store "6" in AHCL15T] [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]</r> |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module               | 17  |
|----------------------|---|
| Section Name         | Adult Health Status and Limitation of Activities  |
| Part                 |   |
| Question ID          | AHS.314_2   |
| Variable Name        | AHCL15T   |
| Universe             | HHSTAT4 = 'S' and AGE GE 18 and AHCL15N = 1-95, D   |
| Universe-text        | Sample adults 18+ who answered 1-95, D for the "number" part of this 2-part question  |
| Question Text        | 2 of 2  |
|                      | * Enter time period for time with developmental problem.  |
| Answer Codes         | 1. Days 2. Weeks 3. Months 4. Years Since birth Refused Don't know  |
| Question Type        | Pick One - answer list pane   |
| Field Pane Descript  | ·   |
| Fill Instructions    |   |
| Special Instructions | Answer name to the right.   |
| Skip Instructions    | <1- 4, R,D> [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)] <6> [goto ERR2_AHCL15T] [if [AHCL15N = Number greater than person years old and AHCL15T= 4]] goto ERR1_AHCL15T |
| Hard Edits           | ERR_AHCL15T  * Time with condition cannot be greater than age.  * Please correct.   |
| Soft Edits           |   |
| AssocHelp            |   |

| Module               | 17   |
|----------------------|--|
| Section Name         | Adult Health Status and Limitation of Activities   |
| Part                 |  |
| Question ID          | AHS.315_1  |
| Variable Name        | AHCL16N  |
| Universe             | HHSTAT4 = 'S' and AGE GE 18 and AFLHCA = 16  |
| Universe-text        | Sample adults 18+ who had difficulty due to senility   |
| Question Text        | 1 of 2   |
|                      | How long have you had senility?  |
|                      | * Enter number for time with senility.   |
|                      | * Enter '95" for 95 or more.   |
|                      | * Enter "96" if since birth.   |
| Answer Codes         |  |
| Question Type        | Integer  |
| Field Pane Descripti | on Number  |
| Fill Instructions    |  |
| Special Instructions |  |
| Skip Instructions    | <1-95,D> [goto AHCL16T] <r> [store "R" in AHCL16T] [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)] &lt;96&gt; [store "6" in AHCL16T] [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]</r> |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module               | 17  |
|----------------------|---|
| Section Name         | Adult Health Status and Limitation of Activities  |
| Part                 |   |
| Question ID          | AHS.315_2   |
| Variable Name        | AHCL16T   |
| Universe             | HHSTAT4 = 'S' and AGE GE 18 and AHCL16N = 1-95, D   |
| Universe-text        | Sample adults 18+ who answered 1-95, D for the "number" part of this 2-part question  |
| Question Text        | 2 of 2  |
|                      | * Enter time period for time with senility.   |
| Answer Codes         | 1. Days 2. Weeks 3. Months 4. Years Since birth Refused Don't know  |
| Question Type        | Pick One - answer list pane   |
| Field Pane Descript  | ·   |
| Fill Instructions    |   |
| Special Instructions | Answer name to the right.   |
| Skip Instructions    | <1- 4, R,D> [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)] <6> [goto ERR2_AHCL16T] [if [AHCL16N = Number greater than person years old and AHCL16T= 4]] goto ERR1_AHCL16T |
| Hard Edits           | ERR_AHCL16T  * Time with condition cannot be greater than age.  * Please correct.   |
| Soft Edits           |   |
| AssocHelp            |   |

| Module               | 17   |
|----------------------|--|
| Section Name         | Adult Health Status and Limitation of Activities   |
| Part                 |  |
| Question ID          | AHS.316_1  |
| Variable Name        | AHCL17N  |
| Universe             | HHSTAT4 = 'S' and AGE GE 18 and AFLHCA = 17  |
| Universe-text        | Sample adults 18+ who had difficulty due to depression, anxiety, or an emotional problem   |
| Question Text        | 1 of 2   |
|                      | How long have you had depression, anxiety, or an emotional problem?  |
|                      | * Enter number for time with depression, anxiety, or an emotional problem.   |
|                      | * Enter '95" for 95 or more.   |
|                      | * Enter "96" if since birth.   |
| Answer Codes         |  |
| Question Type        | Integer  |
| Field Pane Descripti | Number   |
| Fill Instructions    |  |
| Special Instructions |  |
| Skip Instructions    | <1-95,D> [goto AHCL17T] <r> [store "R" in AHCL17T] [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)] &lt;96&gt; [store "6" in AHCL17T] [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]</r> |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module               | 17  |
|----------------------|---|
| Section Name         | Adult Health Status and Limitation of Activities  |
| Part                 |   |
| Question ID          | AHS.316_2   |
| Variable Name        | AHCL17T   |
| Universe             | HHSTAT4 = 'S' and AGE GE 18 and AHCL17N = 1-95, D   |
| Universe-text        | Sample adults 18+ who answered 1-95, D for the "number" part of this 2-part question  |
| Question Text        | 2 of 2  |
|                      | * Enter time period for time with depression, anxiety, or emotional problem.  |
| Answer Codes         | 1. Days 2. Weeks 3. Months 4. Years Since birth   |
|                      | Refused Don't know  |
| Question Type        | Pick One - answer list pane   |
| Field Pane Descript  | ion Time period   |
| Fill Instructions    |   |
| Special Instructions | Answer name to the right.   |
| Skip Instructions    | <1- 4, R,D> [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)] <6> [goto ERR2_AHCL17T] [if [AHCL17N = Number greater than person years old and AHCL17T= 4]] goto ERR1_AHCL17T |
| Hard Edits           | ERR_AHCL17T   |
|                      | * Time with condition cannot be greater than age. * Please correct.   |
| Soft Edits           |   |
| AssocHelp            |   |

| Module               | 17   |
|----------------------|--|
| Section Name         | Adult Health Status and Limitation of Activities   |
| Part                 |  |
| Question ID          | AHS.317_1  |
| Variable Name        | AHCL18N  |
| Universe             | HHSTAT4 = 'S' and AGE GE 18 and AFLHCA = 18  |
| Universe-text        | Sample adults 18+ who had difficulty due to a weight problem   |
| Question Text        | 1 of 2   |
|                      | How long have you had a weight problem?  |
|                      | * Enter number for time with a weight problem.   |
|                      | * Enter '95" for 95 or more.   |
|                      | * Enter "96" if since birth.   |
| Answer Codes         |  |
| Question Type        | Integer  |
| Field Pane Descripti | on Number  |
| Fill Instructions    |  |
| Special Instructions |  |
| Skip Instructions    | <1-95,D> [goto AHCL18T] <r> [store "R" in AHCL18T] [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)] &lt;96&gt; [store "6" in AHCL18T] [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]</r> |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module               | 17  |
|----------------------|---|
| Section Name         | Adult Health Status and Limitation of Activities  |
| Part                 |   |
| Question ID          | AHS.317_2   |
| Variable Name        | AHCL18T   |
| Universe             | HHSTAT4 = 'S' and AGE GE 18 and AHCL18N = 1-95, D   |
| Universe-text        | Sample adults 18+ who answered 1-95, D for the "number" part of this 2-part question  |
| Question Text        | 2 of 2  |
|                      | * Enter time period for time with weight problem.   |
| Answer Codes         | 1. Days 2. Weeks 3. Months 4. Years Since birth Refused   |
|                      | Don't know  |
| Question Type        | Pick One - answer list pane   |
| Field Pane Descripti | Time period   |
| Fill Instructions    |   |
| Special Instructions | Answer name to the right.   |
| Skip Instructions    | <1- 4, R,D> [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)] <6> [goto ERR2_AHCL18T] [if [AHCL18N = Number greater than person years old and AHCL18T= 4]] goto ERR1_AHCL18T |
| Hard Edits           | ERR_AHCL18T   |
|                      | * Time with condition cannot be greater than age. * Please correct.   |
| Soft Edits           |   |
| AssocHelp            |   |

| Module                 | 17   |
|------------------------|--|
| Section Name           | Adult Health Status and Limitation of Activities   |
| Part                   |  |
| Question ID            | AHS.318_1  |
| Variable Name          | AHCL19N  |
| Universe               | HHSTAT4 = 'S' and AGE GE 18 and AFLHCA = 19  |
| Universe-text          | Sample adults 18+ who had difficulty due to a missing limb   |
| Question Text          | 1 of 2   |
|                        | How long have you had a missing limb (finger, toe, or digit)?  |
|                        | * Enter number for time with a missing limb.   |
|                        | * Enter '95" for 95 or more.   |
|                        | * Enter "96" if since birth.   |
| Answer Codes           |  |
| Question Type          | Integer  |
| Field Pane Description | on Number  |
| Fill Instructions      |  |
| Special Instructions   |  |
| Skip Instructions      | <1-95,D> [goto AHCL19T] <r> [store "R" in AHCL19T] [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)] &lt;96&gt; [store "6" in AHCL19T] [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]</r> |
| Hard Edits             |  |
| Soft Edits             |  |
| AssocHelp              |  |

| Module               | 17  |
|----------------------|---|
| Section Name         | Adult Health Status and Limitation of Activities  |
| Part                 |   |
| Question ID          | AHS.318_2   |
| Variable Name        | AHCL19T   |
| Universe             | HHSTAT4 = 'S' and AGE GE 18 and AHCL19N = 1-95, D   |
| Universe-text        | Sample adults 18+ who answered 1-95, D for the "number" part of this 2-part question  |
| Question Text        | 2 of 2  |
|                      | * Enter time period for time with missing limb.   |
| Answer Codes         | 1. Days 2. Weeks 3. Months 4. Years   |
|                      | Since birth Refused Don't know  |
| Question Type        | Pick One - answer list pane   |
| Field Pane Descripti | on Time period  |
| Fill Instructions    |   |
| Special Instructions | Answer name to the right.   |
| Skip Instructions    | <1- 4, R,D> [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)] <6> [goto ERR2_AHCL19T] [if [AHCL19N = Number greater than person years old and AHCL19T= 4]] goto ERR1_AHCL19T |
| Hard Edits           | ERR_AHCL19T   |
|                      | * Time with condition cannot be greater than age. * Please correct.   |
| Soft Edits           |   |
| AssocHelp            |   |

| Module               | 17   |
|----------------------|--|
| Section Name         | Adult Health Status and Limitation of Activities   |
| Part                 |  |
| Question ID          | AHS.319_1  |
| Variable Name        | AHCL20N  |
| Universe             | HHSTAT4 = 'S' and AGE GE 18 and AFLHCA = 20  |
| Universe-text        | Sample adults 18+ who had difficulty due to a kidney, bladder or renal problem   |
| Question Text        | 1 of 2   |
|                      | How long have you had a kidney, bladder or renal problem?  |
|                      | * Enter number for time with a kidney, bladder or renal problem.   |
|                      | * Enter '95" for 95 or more.   |
|                      | * Enter "96" if since birth.   |
| Answer Codes         |  |
| Question Type        | Integer  |
| Field Pane Descripti | on Number  |
| Fill Instructions    |  |
| Special Instructions |  |
| Skip Instructions    | <1-95,D> [goto AHCL20T] <r> [store "R" in AHCL20T] [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)] &lt;96&gt; [store "6" in AHCL20T] [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]</r> |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module               | 17  |
|----------------------|---|
| Section Name         | Adult Health Status and Limitation of Activities  |
| Part                 |   |
| Question ID          | AHS.319_2   |
| Variable Name        | AHCL20T   |
| Universe             | HHSTAT4 = 'S' and AGE GE 18 and AHCL20N = 1-95, D   |
| Universe-text        | Sample adults 18+ who answered 1-95, D for the "number" part of this 2-part question  |
| Question Text        | 2 of 2  |
|                      | * Enter time period for time with kidney, bladder or renal problem.   |
| Answer Codes         | 1. Days 2. Weeks 3. Months 4. Years Since birth Refused Don't know  |
| Question Type        | Pick One - answer list pane   |
| Field Pane Descript  | ion Time period   |
| Fill Instructions    |   |
| Special Instructions | Answer name to the right.   |
| Skip Instructions    | <1- 4, R,D> [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)] <6> [goto ERR2_AHCL20T] [if [AHCL20N = Number greater than person years old and AHCL20T= 4]] goto ERR1_AHCL20T |
| Hard Edits           | ERR_AHCL20T  * Time with condition cannot be greater than age.  * Please correct.   |
| Soft Edits           |   |
| AssocHelp            |   |

| Module                 | 17   |
|------------------------|--|
| Section Name           | Adult Health Status and Limitation of Activities   |
| Part                   |  |
| Question ID            | AHS.320_1  |
| Variable Name          | AHCL21N  |
| Universe               | HHSTAT4 = 'S' and AGE GE 18 and AFLHCA = 21  |
| Universe-text          | Sample adults 18+ who had difficulty due to a circulation problem  |
| Question Text          | 1 of 2   |
|                        | How long have you had a circulation problem (including blood clots)?   |
|                        | * Enter number for time with a circulation problem.  |
|                        | * Enter '95" for 95 or more.   |
|                        | * Enter "96" if since birth.   |
| Answer Codes           |  |
| Question Type          | Integer  |
| Field Pane Description | on Number  |
| Fill Instructions      |  |
| Special Instructions   |  |
| Skip Instructions      | <1-95,D> [goto AHCL21T] <r> [store "R" in AHCL21T] [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)] &lt;96&gt; [store "6" in AHCL21T] [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]</r> |
| Hard Edits             |  |
| Soft Edits             |  |
| AssocHelp              |  |

| Module               | 17  |
|----------------------|---|
| Section Name         | Adult Health Status and Limitation of Activities  |
| Part                 |   |
| Question ID          | AHS.320_2   |
| Variable Name        | AHCL21T   |
| Universe             | HHSTAT4 = 'S' and AGE GE 18 and AHCL21N = 1-95, D   |
| Universe-text        | Sample adults 18+ who answered 1-95, D for the "number" part of this 2-part question  |
| Question Text        | 2 of 2  |
|                      | * Enter time period for time with circulation problem.  |
| Answer Codes         | 1. Days 2. Weeks 3. Months 4. Years Since birth Refused Don't know  |
| Question Type        | Pick One - answer list pane   |
| Field Pane Descript  | Time period   |
| Fill Instructions    |   |
| Special Instructions | Answer name to the right.   |
| Skip Instructions    | <1- 4, R,D> [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)] <6> [goto ERR2_AHCL21T] [if [AHCL21N = Number greater than person years old and AHCL21T= 4]] goto ERR1_AHCL21T |
| Hard Edits           | ERR_AHCL21T  * Time with condition cannot be greater than age.  * Please correct.   |
| Soft Edits           |   |
| AssocHelp            |   |

| Module                 | 17   |
|------------------------|--|
| Section Name           | Adult Health Status and Limitation of Activities   |
| Part                   |  |
| Question ID            | AHS.321_1  |
| Variable Name          | AHCL22N  |
| Universe               | HHSTAT4 = 'S' and AGE GE 18 and AFLHCA = 22  |
| Universe-text          | Sample adults 18+ who had difficulty due to benign tumors or cysts   |
| Question Text          | 1 of 2   |
|                        | How long have you had benign tumors or cysts?  |
|                        | * Enter number for time with benign tumors or cysts.   |
|                        | * Enter '95" for 95 or more.   |
|                        | * Enter "96" if since birth.   |
| Answer Codes           |  |
| Question Type          | Integer  |
| Field Pane Description | on Number  |
| Fill Instructions      |  |
| Special Instructions   |  |
| Skip Instructions      | <1-95,D> [goto AHCL22T] <r> [store "R" in AHCL22T] [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)] &lt;96&gt; [store "6" in AHCL22T] [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]</r> |
| Hard Edits             |  |
| Soft Edits             |  |
| AssocHelp              |  |

| Module               | 17  |
|----------------------|---|
| Section Name         | Adult Health Status and Limitation of Activities  |
| Part                 |   |
| Question ID          | AHS.321_2   |
| Variable Name        | AHCL22T   |
| Universe             | HHSTAT4 = 'S' and AGE GE 18 and AHCL22N = 1-95, D   |
| Universe-text        | Sample adults 18+ who answered 1-95, D for the "number" part of this 2-part question  |
| Question Text        | 2 of 2  |
|                      | * Enter time period for time with benign tumors or cysts.   |
| Answer Codes         | 1. Days 2. Weeks 3. Months 4. Years   |
|                      | Since birth Refused Don't know  |
| Question Type        | Pick One - answer list pane   |
| Field Pane Descript  | tion Time period  |
| Fill Instructions    |   |
| Special Instructions | Answer name to the right.   |
| Skip Instructions    | <1- 4, R,D> [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)] <6> [goto ERR2_AHCL22T] [if [AHCL22N = Number greater than person years old and AHCL22T= 4]] goto ERR1_AHCL22T |
| Hard Edits           | ERR_AHCL22T   |
|                      | * Time with condition cannot be greater than age. * Please correct.   |
| Soft Edits           |   |
| AssocHelp            |   |

| Module                 | 17   |
|------------------------|--|
| Section Name           | Adult Health Status and Limitation of Activities   |
| Part                   |  |
| Question ID            | AHS.322_1  |
| Variable Name          | AHCL23N  |
| Universe               | HHSTAT4 = 'S' and AGE GE 18 and AFLHCA = 23  |
| Universe-text          | Sample adults 18+ who had difficulty due to fibromyalgia or lupus  |
| Question Text          | 1 of 2   |
|                        | How long have you had fibromyalgia or lupus?   |
|                        | * Enter number for time with fibromyalgia or lupus.  |
|                        | * Enter '95" for 95 or more.   |
|                        | * Enter "96" if since birth.   |
| Answer Codes           |  |
| Question Type          | Integer  |
| Field Pane Description | on Number  |
| Fill Instructions      |  |
| Special Instructions   |  |
| Skip Instructions      | <1-95,D> [goto AHCL23T] <r> [store "R" in AHCL23T] [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)] &lt;96&gt; [store "6" in AHCL23T] [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]</r> |
| Hard Edits             |  |
| Soft Edits             |  |
| AssocHelp              |  |

| Module               | 17   |
|----------------------|--|
| Section Name         | Adult Health Status and Limitation of Activities   |
| Part                 |  |
| Question ID          | AHS.322_2  |
| Variable Name        | AHCL23T  |
| Universe             | HHSTAT4 = 'S' and AGE GE 18 and AHCL23N = 1-95, D  |
| Universe-text        | Sample adults 18+ who answered 1-95, D for the "number" part of this 2-part question   |
| Question Text        | 2 of 2   |
|                      | * Enter time period for time with fibromyalgia or lupus.   |
| Answer Codes         | 1. Days 2. Weeks 3. Months 4. Years Since birth  |
|                      | Refused Don't know   |
| Question Type        | Pick One - answer list pane  |
| Field Pane Descripti |  |
| Fill Instructions    |  |
| Special Instructions | Answer name to the right.  |
| Skip Instructions    | <1- 4, R,D>[goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)] <6> goto ERR2_AHCL23T [if [AHCL23N = Number greater than person years old and AHCL23T= 4]] goto ERR1_AHCL23T |
| Hard Edits           | ERR_AHCL23T  * Time with condition cannot be greater than age.  * Please correct.  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module               | 17  |
|----------------------|---|
| Section Name         | Adult Health Status and Limitation of Activities  |
| Part                 |   |
| Question ID          | AHS.323_1   |
| Variable Name        | AHCL24N   |
| Universe             | HHSTAT4 = 'S' and AGE GE 18 and AFLHCA = 24   |
| Universe-text        | Sample adults 18+ who had difficulty due to osteoporosis or tendinitis  |
| Question Text        | 1 of 2  |
|                      | How long have you had osteoporosis or tendinitis?   |
|                      | * Enter number for time with osteoporosis or tendinitis.  |
|                      | * Enter '95" for 95 or more.  |
|                      | * Enter "96" if since birth.  |
| Answer Codes         |   |
| Question Type        | Integer   |
| Field Pane Descripti | on Number   |
| Fill Instructions    |   |
| Special Instructions |   |
| Skip Instructions    | <1-95,D>[goto AHCL24T] <r>[store "R" in AHCL24T] [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)] &lt;96&gt;[store "6" in AHCL24T] [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]</r> |
| Hard Edits           |   |
| Soft Edits           |   |
| AssocHelp            |   |

| Module               | 17   |
|----------------------|--|
| Section Name         | Adult Health Status and Limitation of Activities   |
| Part                 |  |
| Question ID          | AHS.323_2  |
| Variable Name        | AHCL24T  |
| Universe             | HHSTAT4 = 'S' and AGE GE 18 and AHCL24N = 1-95, D  |
| Universe-text        | Sample adults 18+ who answered 1-95, D for the "number" part of this 2-part question   |
| Question Text        | 2 of 2   |
|                      | * Enter time period for time with osteoporosis or tendinitis.  |
| Answer Codes         | 1. Days 2. Weeks 3. Months 4. Years Since birth Refused Don't know   |
| Question Type        | Pick One - answer list pane  |
| Field Pane Descript  | •  |
| Fill Instructions    |  |
| Special Instructions | Answer name to the right.  |
| Skip Instructions    | <1- 4, R,D>[goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)] <6> goto ERR2_AHCL24T [if [AHCL24N = Number greater than person years old and AHCL24T= 4]] goto ERR1_AHCL24T |
| Hard Edits           | ERR_AHCL24T  * Time with condition cannot be greater than age.  * Please correct.  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module               | 17  |
|----------------------|---|
| Section Name         | Adult Health Status and Limitation of Activities  |
| Part                 |   |
| Question ID          | AHS.324_1   |
| Variable Name        | AHCL25N   |
| Universe             | HHSTAT4 = 'S' and AGE GE 18 and AFLHCA = 25   |
| Universe-text        | Sample adults 18+ who had difficulty due to epilepsy or seizures  |
| Question Text        | 1 of 2  |
|                      | How long have you had epilepsy or seizures?   |
|                      | * Enter number for time with epilepsy or seizures.  |
|                      | * Enter '95" for 95 or more.  |
|                      | * Enter "96" if since birth.  |
| Answer Codes         |   |
| Question Type        | Integer   |
| Field Pane Descripti | on Number   |
| Fill Instructions    |   |
| Special Instructions |   |
| Skip Instructions    | <1-95,D>[goto AHCL25T] <r>[store "R" in AHCL25T] [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)] &lt;96&gt;[store "6" in AHCL25T] [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]</r> |
| Hard Edits           |   |
| Soft Edits           |   |
| AssocHelp            |   |

| Module               | 17   |
|----------------------|--|
| Section Name         | Adult Health Status and Limitation of Activities   |
| Part                 |  |
| Question ID          | AHS.324_2  |
| Variable Name        | AHCL25T  |
| Universe             | HHSTAT4 = 'S' and AGE GE 18 and AHCL25N = 1-95, D  |
| Universe-text        | Sample adults 18+ who answered 1-95, D for the "number" part of this 2-part question   |
| Question Text        | 2 of 2   |
|                      | * Enter time period for time with epilepsy or seizures.  |
| Answer Codes         | 1. Days 2. Weeks 3. Months 4. Years  |
|                      | Since birth Refused Don't know   |
| Question Type        | Pick One - answer list pane  |
| Field Pane Descript  | Time period  |
| Fill Instructions    |  |
| Special Instructions | Answer name to the right.  |
| Skip Instructions    | <1- 4, R,D>[goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)] <6> goto ERR2_AHCL25T [if [AHCL25N = Number greater than person years old and AHCL25T= 4]] goto ERR1_AHCL25T |
| Hard Edits           | ERR_AHCL25T  |
|                      | * Time with condition cannot be greater than age. * Please correct.  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module               | 17  |
|----------------------|---|
| Section Name         | Adult Health Status and Limitation of Activities  |
| Part                 |   |
| Question ID          | AHS.325_1   |
| Variable Name        | AHCL26N   |
| Universe             | HHSTAT4 = 'S' and AGE GE 18 and AFLHCA = 26   |
| Universe-text        | Sample adults 18+ who had difficulty due to multiple sclerosis or muscular dystrophy  |
| Question Text        | 1 of 2  |
|                      | How long have you had multiple sclerosis (MS) or muscular dystrophy (MD)?   |
|                      | * Enter number for fime with multiple sclerosis (MS) or muscular dystrophy (MD).  |
|                      | * Enter '95" for 95 or more.  |
|                      | * Enter "96" if since birth.  |
| Answer Codes         |   |
| Question Type        | Integer   |
| Field Pane Descripti | on Number   |
| Fill Instructions    |   |
| Special Instructions |   |
| Skip Instructions    | <1-95,D>[goto AHCL26T] <r>[store "R" in AHCL26T] [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)] &lt;96&gt;[store "6" in AHCL26T] [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]</r> |
| Hard Edits           |   |
| Soft Edits           |   |
| AssocHelp            |   |

| Module               | 17   |
|----------------------|--|
| Section Name         | Adult Health Status and Limitation of Activities   |
| Part                 |  |
| Question ID          | AHS.325_2  |
| Variable Name        | AHCL26T  |
| Universe             | HHSTAT4 = 'S' and AGE GE 18 and AHCL26N = 1-95, D  |
| Universe-text        | Sample adults 18+ who answered 1-95, D for the "number" part of this 2-part question   |
| Question Text        | 2 of 2   |
|                      | * Enter time period for time with multiple sclerosis or muscular dystrophy.  |
| Answer Codes         | 1. Days 2. Weeks 3. Months 4. Years  |
|                      | Since birth Refused Don't know   |
| Question Type        | Pick One - answer list pane  |
| Field Pane Descript  | ion Time period  |
| Fill Instructions    |  |
| Special Instructions | Answer name to the right.  |
| Skip Instructions    | <1- 4, R,D>[goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)] <6> goto ERR2_AHCL26T [if [AHCL26N = Number greater than person years old and AHCL26T= 4]] goto ERR1_AHCL26T |
| Hard Edits           | ERR_AHCL26T  |
|                      | * Time with condition cannot be greater than age. * Please correct.  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module               | 17  |
|----------------------|---|
| Section Name         | Adult Health Status and Limitation of Activities  |
| Part                 |   |
| Question ID          | AHS.326_1   |
| Variable Name        | AHCL27N   |
| Universe             | HHSTAT4 = 'S' and AGE GE 18 and AFLHCA = 27   |
| Universe-text        | Sample adults 18+ who had difficulty due to polio(myelitis), paralysis or para/quadriplegia   |
| Question Text        | 1 of 2  |
|                      | How long have you had polio(myelitis), paralysis or para/quadriplegia?  |
|                      | * Enter number for time with polio (myelitis), paralysis or para/quadriplegia.  |
|                      | * Enter '95" for 95 or more.  |
|                      | * Enter "96" if since birth.  |
| Answer Codes         |   |
| Question Type        | Integer   |
| Field Pane Descripti | on Number   |
| Fill Instructions    |   |
| Special Instructions |   |
| Skip Instructions    | <1-95,D>[goto AHCL27T] <r>[store "R" in AHCL27T] [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)] &lt;96&gt;[store "6" in AHCL27T] [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]</r> |
| Hard Edits           |   |
| Soft Edits           |   |
| AssocHelp            |   |

| Module               | 17   |
|----------------------|--|
| Section Name         | Adult Health Status and Limitation of Activities   |
| Part                 |  |
| Question ID          | AHS.326_2  |
| Variable Name        | AHCL27T  |
| Universe             | HHSTAT4 = 'S' and AGE GE 18 and AHCL27N = 1-95, D  |
| Universe-text        | Sample adults 18+ who answered 1-95, D for the "number" part of this 2-part question   |
| Question Text        | 2 of 2   |
|                      | * Enter time period for time with polio(myelitis), paralysis or para/quadriplegia.   |
| Answer Codes         | 1. Days 2. Weeks 3. Months 4. Years Since birth  |
|                      | Refused Don't know   |
| Question Type        | Pick One - answer list pane  |
| Field Pane Descripti | ion Time period  |
| Fill Instructions    |  |
| Special Instructions | Answer name to the right.  |
| Skip Instructions    | <1- 4, R,D>[goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)] <6> goto ERR2_AHCL27T [if [AHCL27N = Number greater than person years old and AHCL27T= 4]] goto ERR1_AHCL27T |
| Hard Edits           | ERR_AHCL27T  * Time with condition cannot be greater than age.  * Please correct.  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module               | 17  |
|----------------------|---|
| Section Name         | Adult Health Status and Limitation of Activities  |
| Part                 |   |
| Question ID          | AHS.327_1   |
| Variable Name        | AHCL28N   |
| Universe             | HHSTAT4 = 'S' and AGE GE 18 and AFLHCA = 28   |
| Universe-text        | Sample adults 18+ who had difficulty due to Parkinson's disease or tremors  |
| Question Text        | 1 of 2  |
|                      | How long have you had Parkinson's disease or tremors?   |
|                      | * Enter number for time with Parkinson's disease or tremors.  |
|                      | * Enter '95" for 95 or more.  |
|                      | * Enter "96" if since birth.  |
| Answer Codes         |   |
| Question Type        | Integer   |
| Field Pane Descripti | on Number   |
| Fill Instructions    |   |
| Special Instructions |   |
| Skip Instructions    | <1-95,D>[goto AHCL28T] <r>[store "R" in AHCL28T] [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)] &lt;96&gt;[store "6" in AHCL28T] [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]</r> |
| Hard Edits           |   |
| Soft Edits           |   |
| AssocHelp            |   |

| Module               | 17   |
|----------------------|--|
| Section Name         | Adult Health Status and Limitation of Activities   |
| Part                 |  |
| Question ID          | AHS.327_2  |
| Variable Name        | AHCL28T  |
| Universe             | HHSTAT4 = 'S' and AGE GE 18 and AHCL28N = 1-95, D  |
| Universe-text        | Sample adults 18+ who answered 1-95, D for the "number" part of this 2-part question   |
| Question Text        | 2 of 2   |
|                      | * Enter time period for time with Parkinson's disease or tremors.  |
| Answer Codes         | 1. Days 2. Weeks 3. Months 4. Years  |
|                      | Since birth Refused Don't know   |
| Question Type        | Pick One - answer list pane  |
| Field Pane Descripti | on Time period   |
| Fill Instructions    |  |
| Special Instructions | Answer name to the right.  |
| Skip Instructions    | <1- 4, R,D>[goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)] <6> goto ERR2_AHCL28T [if [AHCL28N = Number greater than person years old and AHCL28T= 4]] goto ERR1_AHCL28T |
| Hard Edits           | ERR_AHCL28T  |
|                      | * Time with condition cannot be greater than age. * Please correct.  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module               | 17  |                                    |
|----------------------|---|------------------------------------|
| Section Name         | Adult Health Status and Limitation of Activities  |                                    |
| Part                 |   |                                    |
| Question ID          | AHS.328_1   |                                    |
| Variable Name        | AHCL29N   |                                    |
| Universe             | HHSTAT4 = 'S' and AGE GE 18 and AFLHCA = 29   |                                    |
| Universe-text        | Sample adults 18+ who had difficulty due to nerve damage  |                                    |
| Question Text        | 1 of 2  |                                    |
|                      | How long have you had nerve damage (including carpal tunnel syndro  | me)?                               |
|                      | * Enter number for time with nerver damage (including carpal tunnel sy * Enter '95" for 95 or more.   | yndrome).                          |
|                      | * Enter "96" if since birth.  |                                    |
| Answer Codes         |   |                                    |
| Question Type        | Integer   |                                    |
| Field Pane Descripti | tion Number   |                                    |
| Fill Instructions    |   |                                    |
| Special Instructions |   |                                    |
| Skip Instructions    | <1-95,D>[goto AHCL29T] <r>[store "R" in AHCL29T] [goto the next condition, in numerical orde AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV &lt;96&gt;[store "6" in AHCL29T] [goto the next condition, in numerical orde AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV</r> | (next section)]<br>er, selected at |
| Hard Edits           |   |                                    |
| Soft Edits           |   |                                    |
| AssocHelp            |   |                                    |

| Module               | 17   |
|----------------------|--|
| Section Name         | Adult Health Status and Limitation of Activities   |
| Part                 |  |
| Question ID          | AHS.328_2  |
| Variable Name        | AHCL29T  |
| Universe             | HHSTAT4 = 'S' and AGE GE 18 and AHCL29N = 1-95, D  |
| Universe-text        | Sample adults 18+ who answered 1-95, D for the "number" part of this 2-part question   |
| Question Text        | 2 of 2   |
|                      | * Enter time period for time with nerve damage.  |
| Answer Codes         | 1. Days 2. Weeks 3. Months 4. Years Since birth  |
|                      | Refused Don't know   |
| Question Type        | Pick One - answer list pane  |
| Field Pane Descripti | ion Time period  |
| Fill Instructions    |  |
| Special Instructions | Answer name to the right.  |
| Skip Instructions    | <1- 4, R,D>[goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)] <6> goto ERR2_AHCL29T [if [AHCL29N = Number greater than person years old and AHCL29T= 4]] goto ERR1_AHCL29T |
| Hard Edits           | ERR_AHCL29T  |
|                      | * Time with condition cannot be greater than age. * Please correct.  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module               | 17  |
|----------------------|---|
| Section Name         | Adult Health Status and Limitation of Activities  |
| Part                 |   |
| Question ID          | AHS.329_1   |
| Variable Name        | AHCL30N   |
| Universe             | HHSTAT4 = 'S' and AGE GE 18 and AFLHCA = 30   |
| Universe-text        | Sample adults 18+ who had difficulty due to a hernia  |
| Question Text        | 1 of 2  |
|                      | How long have you had a hernia?   |
|                      | * Enter number for time with a hernia.  |
|                      | * Enter '95" for 95 or more.  |
|                      | * Enter "96" if since birth.  |
| Answer Codes         |   |
| Question Type        | Integer   |
| Field Pane Descripti | on Number   |
| Fill Instructions    |   |
| Special Instructions |   |
| Skip Instructions    | <1-95,D>[goto AHCL30T] <r>[store "R" in AHCL30T] [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)] &lt;96&gt;[store "6" in AHCL30T] [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]</r> |
| Hard Edits           |   |
| Soft Edits           |   |
| AssocHelp            |   |

| Module               | 17   |
|----------------------|--|
| Section Name         | Adult Health Status and Limitation of Activities   |
| Part                 |  |
| Question ID          | AHS.329_2  |
| Variable Name        | AHCL30T  |
| Universe             | HHSTAT4 = 'S' and AGE GE 18 and AHCL30N = 1-95, D  |
| Universe-text        | Sample adults 18+ who answered 1-95, D for the "number" part of this 2-part question   |
| Question Text        | 2 of 2   |
|                      | * Enter time period for time with hernia.  |
| Answer Codes         | 1. Days 2. Weeks 3. Months 4. Years  |
|                      | Since birth Refused Don't know   |
| Question Type        | Pick One - answer list pane  |
| Field Pane Descript  | ion Time period  |
| Fill Instructions    |  |
| Special Instructions | Answer name to the right.  |
| Skip Instructions    | <1- 4, R,D>[goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)] <6> goto ERR2_AHCL30T [if [AHCL30N = Number greater than person years old and AHCL30T= 4]] goto ERR1_AHCL30T |
| Hard Edits           | ERR_AHCL30T  |
|                      | * Time with condition cannot be greater than age. * Please correct.  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module               | 17  |
|----------------------|---|
| Section Name         | Adult Health Status and Limitation of Activities  |
| Part                 |   |
| Question ID          | AHS.330_1   |
| Variable Name        | AHCL31N   |
| Universe             | HHSTAT4 = 'S' and AGE GE 18 and AFLHCA = 31   |
| Universe-text        | Sample adults 18+ who had difficulty due to an ulcer  |
| Question Text        | 1 of 2  |
|                      | How long have you had an ulcer?   |
|                      | * Enter number for time with an ulcer.  |
|                      | * Enter '95" for 95 or more.  |
|                      | * Enter "96" if since birth.  |
| Answer Codes         |   |
| Question Type        | Integer   |
| Field Pane Descripti | on Number   |
| Fill Instructions    |   |
| Special Instructions |   |
| Skip Instructions    | <1-95,D>[goto AHCL31T] <r>[store "R" in AHCL31T] [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)] &lt;96&gt;[store "6" in AHCL31T] [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]</r> |
| Hard Edits           |   |
| Soft Edits           |   |
| AssocHelp            |   |

| Module               | 17   |
|----------------------|--|
| Section Name         | Adult Health Status and Limitation of Activities   |
| Part                 |  |
| Question ID          | AHS.330_2  |
| Variable Name        | AHCL31T  |
| Universe             | HHSTAT4 = 'S' and AGE GE 18 and AHCL31N = 1-95, D  |
| Universe-text        | Sample adults 18+ who answered 1-95, D for the "number" part of this 2-part question   |
| Question Text        | 2 of 2   |
|                      | * Enter time period for time with ulcer.   |
| Answer Codes         | 1. Days 2. Weeks 3. Months 4. Years  |
|                      | Since birth Refused Don't know   |
| Question Type        | Pick One - answer list pane  |
| Field Pane Descripti | on Time period   |
| Fill Instructions    |  |
| Special Instructions | Answer name to the right.  |
| Skip Instructions    | <1- 4, R,D>[goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)] <6> goto ERR2_AHCL31T [if [AHCL31N = Number greater than person years old and AHCL31T= 4]] goto ERR1_AHCL31T |
| Hard Edits           | ERR_AHCL31T  |
|                      | * Time with condition cannot be greater than age. * Please correct.  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module               | 17  |
|----------------------|---|
| Section Name         | Adult Health Status and Limitation of Activities  |
| Part                 |   |
| Question ID          | AHS.331_1   |
| Variable Name        | AHCL32N   |
| Universe             | HHSTAT4 = 'S' and AGE GE 18 and AFLHCA = 32   |
| Universe-text        | Sample adults 18+ who had difficulty due to varicose veins or hemorrhoids   |
| Question Text        | 1 of 2  |
|                      | How long have you had varicose veins or hemorrhoids?  |
|                      | * Enter number for time with varicose veins or hemorrhoids.   |
|                      | * Enter '95" for 95 or more.  |
|                      | * Enter "96" if since birth.  |
| Answer Codes         |   |
| Question Type        | Integer   |
| Field Pane Descripti | on Number   |
| Fill Instructions    |   |
| Special Instructions |   |
| Skip Instructions    | <1-95,D>[goto AHCL32T] <r>[store "R" in AHCL32T] [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)] &lt;96&gt;[store "6" in AHCL32T] [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]</r> |
| Hard Edits           |   |
| Soft Edits           |   |
| AssocHelp            |   |

| Module               | 17   |
|----------------------|--|
| Section Name         | Adult Health Status and Limitation of Activities   |
| Part                 |  |
| Question ID          | AHS.331_2  |
| Variable Name        | AHCL32T  |
| Universe             | HHSTAT4 = 'S' and AGE GE 18 and AHCL32N = 1-95, D  |
| Universe-text        | Sample adults 18+ who answered 1-95, D for the "number" part of this 2-part question   |
| Question Text        | 2 of 2   |
|                      | * Enter time period for time with varicose veins or hemorrhoids.   |
| Answer Codes         | 1. Days 2. Weeks 3. Months 4. Years Since birth Refused Don't know   |
| Question Type        | Pick One - answer list pane  |
| Field Pane Descripti | ·  |
| Fill Instructions    |  |
| Special Instructions |  |
| Skip Instructions    | <1- 4, R,D>[goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)] <6> goto ERR2_AHCL32T [if [AHCL32N = Number greater than person years old and AHCL32T= 4]] goto ERR1_AHCL32T |
| Hard Edits           | ERR_AHCL32T  |
|                      | * Time with condition cannot be greater than age. * Please correct.  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module               | 17  |
|----------------------|---|
| Section Name         | Adult Health Status and Limitation of Activities  |
| Part                 |   |
| Question ID          | AHS.332_1   |
| Variable Name        | AHCL33N   |
| Universe             | HHSTAT4 = 'S' and AGE GE 18 and AFLHCA = 33   |
| Universe-text        | Sample adults 18+ who had difficulty due to a thyroid problem, Grave's disease or gout  |
| Question Text        | 1 of 2  |
|                      | How long have you had a thyroid problem, Grave's disease or gout?   |
|                      | * Enter number for time with a thyroid problem, Grave's disease or gout.  |
|                      | * Enter '95" for 95 or more.  |
|                      | * Enter "96" if since birth.  |
| Answer Codes         |   |
| Question Type        | Integer   |
| Field Pane Descripti | on Number   |
| Fill Instructions    |   |
| Special Instructions |   |
| Skip Instructions    | <1-95,D>[goto AHCL33T] <r>[store "R" in AHCL33T] [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)] &lt;96&gt;[store "6" in AHCL33T] [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]</r> |
| Hard Edits           |   |
| Soft Edits           |   |
| AssocHelp            |   |

| Module               | 17   |
|----------------------|--|
| Section Name         | Adult Health Status and Limitation of Activities   |
| Part                 |  |
| Question ID          | AHS.332_2  |
| Variable Name        | AHCL33T  |
| Universe             | HHSTAT4 = 'S' and AGE GE 18 and AHCL33N = 1-95, D  |
| Universe-text        | Sample adults 18+ who answered 1-95, D for the "number" part of this 2-part question   |
| Question Text        | 2 of 2   |
|                      | * Enter time period for time with thyroid problem, Grave's disease or gout.  |
| Answer Codes         | 1. Days 2. Weeks 3. Months 4. Years Since birth Refused Don't know   |
| Question Type        | Pick One - answer list pane  |
| Field Pane Descript  | ·  |
| Fill Instructions    |  |
| Special Instructions |  |
| Skip Instructions    | <1- 4, R,D>[goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)] <6> goto ERR2_AHCL33T [if [AHCL33N = Number greater than person years old and AHCL33T= 4]] goto ERR1_AHCL33T |
| Hard Edits           | ERR_AHCL33T  * Time with condition cannot be greater than age.  * Please correct.  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module               | 17  |
|----------------------|---|
| Section Name         | Adult Health Status and Limitation of Activities  |
| Part                 |   |
| Question ID          | AHS.333_1   |
| Variable Name        | AHCL34N   |
| Universe             | HHSTAT4 = 'S' and AGE GE 18 and AFLHCA = 34   |
| Universe-text        | Sample adults 18+ who had difficulty due to a knee problem  |
| Question Text        | 1 of 2  |
|                      | How long have you had a knee problem?   |
|                      | * Enter number for time with a knee problem.  |
|                      | * Enter '95" for 95 or more.  |
|                      | * Enter "96" if since birth.  |
| Answer Codes         |   |
| Question Type        | Integer   |
| Field Pane Descripti | on Number   |
| Fill Instructions    |   |
| Special Instructions |   |
| Skip Instructions    | <1-95,D>[goto AHCL34T] <r>[store "R" in AHCL34T] [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)] &lt;96&gt;[store "6" in AHCL34T] [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]</r> |
| Hard Edits           |   |
| Soft Edits           |   |
| AssocHelp            |   |

| Module               | 17   |
|----------------------|--|
| Section Name         | Adult Health Status and Limitation of Activities   |
| Part                 |  |
| Question ID          | AHS.333_2  |
| Variable Name        | AHCL34T  |
| Universe             | HHSTAT4 = 'S' and AGE GE 18 and AHCL34N = 1-95, D  |
| Universe-text        | Sample adults 18+ who answered 1-95, D for the "number" part of this 2-part question   |
| Question Text        | 2 of 2   |
|                      | * Enter time period for time with knee problem.  |
| Answer Codes         | 1. Days 2. Weeks 3. Months 4. Years Since birth  |
|                      | Refused Don't know   |
| Question Type        | Pick One - answer list pane  |
| Field Pane Descripti | Time period  |
| Fill Instructions    |  |
| Special Instructions |  |
| Skip Instructions    | <1- 4, R,D>[goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)] <6> goto ERR2_AHCL34T [if [AHCL34N = Number greater than person years old and AHCL34T= 4]] goto ERR1_AHCL34T |
| Hard Edits           | ERR1_AHCL34T   |
|                      | * Time with condition cannot be greater than age. * Please correct.  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module                 | 17  |
|------------------------|---|
| Section Name           | Adult Health Status and Limitation of Activities  |
| Part                   |   |
| Question ID            | AHS.334_1   |
| Variable Name          | AHCL35N   |
| Universe               | HHSTAT4 = 'S' and AGE GE 18 and AFLHCA = 35   |
| Universe-text          | Sample adults 18+ who had difficulty due to migraine headaches  |
| Question Text          | 1 of 2  |
|                        | How long have you had migraine headaches?   |
|                        | * Enter number for time with migraine headaches.  |
|                        | * Enter '95" for 95 or more.  |
|                        | * Enter "96" if since birth.  |
| Answer Codes           |   |
| Question Type          | Integer   |
| Field Pane Description | on Number   |
| Fill Instructions      |   |
| Special Instructions   |   |
| Skip Instructions      | <1-95,D>[goto AHCL35T] <r>[store "R" in AHCL35T] [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)] &lt;96&gt;[store "6" in AHCL35T] [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]</r> |
| Hard Edits             |   |
| Soft Edits             |   |
| AssocHelp              |   |

| Module               | 17   |
|----------------------|--|
| Section Name         | Adult Health Status and Limitation of Activities   |
| Part                 |  |
| Question ID          | AHS.334_2  |
| Variable Name        | AHCL35T  |
| Universe             | HHSTAT4 = 'S' and AGE GE 18 and AHCL35N = 1-95, D  |
| Universe-text        | Sample adults 18+ who answered 1-95, D for the "number" part of this 2-part question   |
| Question Text        | 2 of 2   |
|                      | * Enter time period for time with migraine headaches.  |
| Answer Codes         | 1. Days 2. Weeks 3. Months 4. Years Since birth Refused  |
|                      | Don't know   |
| Question Type        | Pick One - answer list pane  |
| Field Pane Descripti | Time period  |
| Fill Instructions    |  |
| Special Instructions |  |
| Skip Instructions    | <1- 4, R,D>[goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)] <6> goto ERR2_AHCL35T [if [AHCL35N = Number greater than person years old and AHCL35T= 4]] goto ERR1_AHCL35T |
| Hard Edits           | ERR1_AHCL35T   |
|                      | * Time with condition cannot be greater than age. * Please correct.  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module               | 17   |  |
|----------------------|--|--|
| Section Name         | Adult Health Status and Limita   | tion of Activities   |
| Part                 |  |  |
| Question ID          | AHS.335_1  |  |
| Variable Name        | AHCL90N  |  |
| Universe             | HHSTAT4 = 'S' and AGE GE 1   | 8 and AFLHCA = 90  |
| Universe-text        | Sample adults 18+ who had dif  | ficulty due to {problem in AFLHCA90}   |
| Question Text        | 1 of 2   |  |
|                      | How long have you had {proble  | m in AFLHCA80}?  |
|                      | * Enter number for time with {p<br>* Enter '95" for 95 or more.  | roblem in AFLHCA80}.   |
|                      | * Enter "96" if since birth.   |  |
| Answer Codes         |  |  |
| Question Type        | Integer  |  |
| Field Pane Descripti | on Number  |  |
| Fill Instructions    |  |  |
| Special Instructions |  |  |
| Skip Instructions    | AFLHCA (AHS.200). If this is the compact of the com | to the next condition, in numerical order, selected at ne last condition selected, goto SMKEV (next section)] oto the next condition, in numerical order, selected at ne last condition selected, goto SMKEV (next section)] |
| Hard Edits           |  |  |
| Soft Edits           |  |  |
| AssocHelp            |  |  |

| Module               | 17  |  |
|----------------------|---|--|
| Section Name         | Adult Health Status and Limitation of Activities  |  |
| Part                 |   |  |
| Question ID          | AHS.335_2   |  |
| Variable Name        | AHCL90T   |  |
| Universe             | HHSTAT4 = 'S' and AGE GE 18 and AHCL36N = 1-95, D   |  |
| Universe-text        | Sample adults 18+ who answered 1-95, D for the "number" part of this 2-part question  |  |
| Question Text        | 2 of 2  |  |
|                      | * Enter time period for time with {problem in AFLHCA80}.  |  |
| Answer Codes         | 1. Days 2. Weeks 3. Months 4. Years   |  |
|                      | Since birth Refused Don't know  |  |
| Question Type        | Pick One - answer list pane   |  |
| Field Pane Descripti | Time period   |  |
| Fill Instructions    |   |  |
| Special Instructions |   |  |
| Skip Instructions    | <1- 4, R,D>[[if 91 selected in AFLHCA goto AFLHCA_S2] Else goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)] <6> goto ERR2_AHCL90T [if [AHCL90N = Number greater than person years old and AHCL90T= 4]] goto ERR1_AHCL90T |  |
| Hard Edits           | ERR_AHCL90T   |  |
|                      | * Time with condition cannot be greater than age. * Please correct.   |  |
| Soft Edits           |   |  |
| AssocHelp            |   |  |

| Module                 | 17   |
|------------------------|--|
| Section Name           | Adult Health Status and Limitation of Activities   |
| Part                   |  |
| Question ID            | AHS.336_1  |
| Variable Name          | AHCL91N  |
| Universe               | HHSTAT4 = 'S' and AGE GE 18 and AFLHCA = 91  |
| Universe-text          | Sample adults 18+ who had difficulty due to {problem in AFLHCA91}  |
| Question Text          | 1 of 2   |
|                        | How long have you had {problem in AFLHCA81}?   |
|                        | * Enter number for time with {problem in AFLHCA81}.  |
|                        | * Enter '95" for 95 or more.   |
|                        | * Enter "96" if since birth.   |
| Answer Codes           |  |
| Question Type          | Integer  |
| Field Pane Description | on Number  |
| Fill Instructions      |  |
| Special Instructions   |  |
| Skip Instructions      | <1-95,D>[goto AHCL36T]<br><r>[store "R" in AHCL36T] [goto SMKEV (next section)]<br/>&lt;96&gt;[store "6" in AHCL36T] [goto SMKEV (next section)]</r> |
| Hard Edits             |  |
| Soft Edits             |  |
| AssocHelp              |  |

| Module               | 17   |
|----------------------|--|
| Section Name         | Adult Health Status and Limitation of Activities   |
| Part                 |  |
| Question ID          | AHS.336_2  |
| Variable Name        | AHCL91T  |
| Universe             | HHSTAT4 = 'S' and AGE GE 18 and AHCL37N = 1-95, D  |
| Universe-text        | Sample adults 18+ who answered 1-95, D for the "number" part of this 2-part question   |
| Question Text        | 2 of 2   |
|                      | * Enter time period for time with {problem in AFLHCA81}.   |
| Answer Codes         | 1. Days 2. Weeks 3. Months 4. Years Since birth Refused  |
|                      | Don't know   |
| Question Type        | Pick One - answer list pane  |
| Field Pane Descripti | Time period  |
| Fill Instructions    |  |
| Special Instructions |  |
| Skip Instructions    | <1- 4, R,D>[goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)] <6> goto ERR2_AHCL37T [if [AHCL91N = Number greater than person years old and AHCL91T= 4]] goto ERR1_AHCL91T |
| Hard Edits           | ERR_AHCL91T  |
|                      | * Time with condition cannot be greater than age. * Please correct.  |
| Soft Edits           |  |
| AssocHelp            |  |

## 2015 Q1 NHIS Instrument Spec Report

| Section nan            | ne: Adult Health Behavior  |
|------------------------|--|
| Module                 | 18   |
| Section Name           | Adult Health Behavior  |
| Part                   | A  |
| Question ID            | AHB.010  |
| Variable Name          | SMKEV  |
| Universe               | HHSTAT4='S' and AGE GE '018' and AGE not IN ('997','999'))   |
| Universe-text          | Sample adults 18+  |
| Question Text          | ? [F1]   |
| Answer Codes           | These next questions are about cigarette smoking.  Have you smoked at least 100 cigarettes in your ENTIRE LIFE?  1. Yes 2. No Refused Don't know |
| Question Type          | Yes/No   |
| Field Pane Description | on Ever smoked 100 cigarettes  |
| Fill Instructions      |  |
| Special Instructions   |  |
| Skip Instructions      | <1> [goto SMKREG]<br><2> [goto SMKANY]<br><r> [goto VIGNO]<br/><d> [goto SMKANY]</d></r>   |
| Hard Edits             |  |
| Soft Edits             |  |
| AssocHelp              | H_SMKEV  |

| Module                 | 18   |
|------------------------|--|
| Section Name           | Adult Health Behavior  |
| Part                   | A  |
| Question ID            | AHB.010_H  |
| Variable Name          | H_SMKEV  |
| Universe               |  |
| Universe-text          |  |
| Question Text          | A cigarette is anything the sample adult reports except cigars of any kind or marijuana. |
| Answer Codes           |  |
| Question Type          | Help Screen  |
| Field Pane Description | on   |
| Fill Instructions      |  |
| Special Instructions   | Associated screens:  |
|                        | SMKEV  |
| Skip Instructions      |  |
| Hard Edits             |  |
| Soft Edits             |  |
| AssocHelp              |  |

| Module                                     | 18   |
|--|--|
| Section Name                               | Adult Health Behavior  |
| Part                                       | A  |
| Question ID                                | AHB.020  |
| Variable Name                              | SMKREG   |
| Universe                                   | HHSTAT4='S' and AGE GE '018' and AGE not IN ('997','999')) and SMKEV = 1 |
| Universe-text                              | Sample adults 18+ who ever smoked 100 cigarettes                         |
| Question Text                              | ? [F1]   |
|  | How old were you when you FIRST started to smoke fairly regularly?       |
|  | * Enter '6' if less than 6 years old.                                    |
|  | * Enter '95' if 95 years old or older.                                   |
|  | * Enter '96' if never smoked regularly.                                  |
| Answer Codes                               |  |
| Question Type                              | Integer  |
| Field Pane Description Age started smoking |  |
| Fill Instructions                          |  |
| Special Instructions                       |  |
| Skip Instructions                          | <6-95,96,R,D> [goto SMKNOW]  |
|  | [If SMKREG gt AGE and SMKREG ne <96>, goto ERR_SMKREG                    |
| Hard Edits                                 | ERR_SMKREG   |
|  | * Starting age exceeded current age. * Please correct.                   |
| Soft Edits                                 |  |
| AssocHelp                                  | H_SMKREG   |

| Module               | 18   |
|----------------------|--|
| Section Name         | Adult Health Behavior  |
| Part                 |  |
| Question ID          | AHB.020_H  |
| Variable Name        | H_SMKREG   |
| Universe             |  |
| Universe-text        |  |
| Question Text        | Always probe for an exact age. If the sample adult reports a range or interval, assist the sample adult in making an estimate by probing. For example, you might ask "Could you give me a more exact age?" |
| Answer Codes         |  |
| Question Type        | Help Screen  |
| Field Pane Descripti | on   |
| Fill Instructions    |  |
| Special Instructions | Associated screens:  |
|                      | SMKREG   |
| Skip Instructions    |  |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module               | 18   |
|----------------------|--|
| Section Name         | Adult Health Behavior  |
| Part                 | A  |
| Question ID          | AHB.030  |
| Variable Name        | SMKNOW   |
| Universe             | HHSTAT4='S' and AGE GE '018' and AGE not IN ('997', '999')) and SMKEV = 1              |
| Universe-text        | Sample adults 18+ who ever smoked 100 cigarettes                                       |
| Question Text        | ? [F1]   |
|                      | Do you NOW smoke cigarettes every day, some days or not at all?                        |
| Answer Codes         | 1. Every day 2. Some days 3. Not at all Refused Don't know                             |
| Question Type        | Pick One - answer list pane  |
| Field Pane Descripti | ion Now Smoke  |
| Fill Instructions    |  |
| Special Instructions | Add answer name to the right of input.   |
| Skip Instructions    | <1>[goto CIGSDA1]<br><2>[goto CIGDAMO]<br><3>[goto SMKQTNO]<br><r,d>[goto VIGNO]</r,d> |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            | H_SMKNOW   |

| Module                 | 18  |
|------------------------|---|
| Section Name           | Adult Health Behavior   |
| Part                   |   |
| Question ID            | AHB.030_H   |
| Variable Name          | H_SMKNOW  |
| Universe               |   |
| Universe-text          |   |
| Question Text          | If the sample adult gives an answer which does not match the categories read in the question, reread the question emphasizing the wording of the answer categories. |
| Answer Codes           |   |
| Question Type          | Help Screen   |
| Field Pane Description | on  |
| Fill Instructions      |   |
| Special Instructions   | Associated screens:   |
|                        | SMKNOW  |
| Skip Instructions      |   |
| Hard Edits             |   |
| Soft Edits             |   |
| AssocHelp              |   |

| Module               | 18   |
|----------------------|--|
| Section Name         | Adult Health Behavior  |
| Part                 | A  |
| Question ID          | AHB.040_1  |
| Variable Name        | SMKQTNO  |
| Universe             | HHSTAT4='S' and AGE GE '018' and AGE not IN ('997','999')) and SMKNOW= 3         |
| Universe-text        | Sample adults 18+ who quit smoking   |
| Question Text        | ? [F1]   |
|                      | 1 of 2   |
|                      | How long has it been since you quit smoking cigarettes?                          |
|                      | * Enter number for time since quit smoking.                                      |
|                      | * Enter '95' for 95 or more.   |
| Answer Codes         |  |
| Question Type        | Multi Part   |
| Field Pane Descripti | on Number  |
| Fill Instructions    |  |
| Special Instructions | "Time since quit smoking" as a header for this question and AHB.040_2 (SMKQTTP). |
| Skip Instructions    | <1-95> [goto SMKQTTP]<br><r,d> [goto VIGNO]</r,d>                                |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            | H_SMKQT  |

| Module               | 18   |
|----------------------|--|
| Section Name         | Adult Health Behavior  |
| Part                 |  |
| Question ID          | AHB.040_1_H  |
| Variable Name        | H_SMKQT  |
| Universe             |  |
| Universe-text        |  |
| Question Text        | Always probe for an exact number. If the sample adult reports a range or interval, assist the sample adult in making an estimate by probing. For example, you might ask "Could you give me a more exact number?" |
| Answer Codes         |  |
| Question Type        | Help Screen  |
| Field Pane Descripti | on   |
| Fill Instructions    |  |
| Special Instructions | Associated screens:  |
|                      | SMKQTNO  |
| Skip Instructions    |  |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module               | 18   |
|----------------------|--|
| Section Name         | Adult Health Behavior  |
| Part                 | A  |
| Question ID          | AHB.040_2  |
| Variable Name        | SMKQTTP  |
| Universe             | HHSTAT4='S' and AGE GE '018' and AGE not IN ('997','999')) and SMKQTNO = 1-95  |
| Universe-text        | Sample adults 18+ who quit smoking   |
| Question Text        | 2 of 2   |
|                      | * Enter time period for time since quit smoking.   |
| Answer Codes         | 1. Days 2. Weeks 3. Months 4. Years Refused Don't know   |
| Question Type        | Multi Part   |
| Field Pane Descripti | on Time period   |
| Fill Instructions    |  |
| Special Instructions | Flag when ERR2_SMKQTTP is triggered. Place answer box to the right of that for AHB.040_1 (SMKQTNO). Show answer name on the right.   |
| Skip Instructions    | <1-4> [goto VIGNO]<br><4> [if SMKQTNO gt (AGE - <15>), goto ERR1_SMKQTTP<br>if (SMKREG + SMKQTNO gt AGE), goto ERR2_SMKQTTP.   |
| Hard Edits           | ERR2_SMKQTTP   |
| Soft Edits           | * Age started ([Fill1: SMKREG]) + years since quit ([Fill2: SMKQTNO]) exceeds current age ([Fill3: AGE]).  * Please correct.  ERR1_SMKQTTP  * Respondent quit smoking before age 15? |
|                      | * Please verify.   |
| AssocHelp            |  |

| Module                 | 18  |
|------------------------|---|
| Section Name           | Adult Health Behavior   |
| Part                   | A   |
| Question ID            | AHB.050   |
| Variable Name          | CIGSDA1   |
| Universe               | HHSTAT4='S' and AGE GE '018' and AGE not IN ('997','999')) and SMKNOW = 1 |
| Universe-text          | Sample adults 18+ who are current every day smokers                       |
| Question Text          | ? [F1]  |
|                        | On the average, how many cigarettes do you now smoke a day?               |
|                        | * Enter '1' if less than 1 cigarette.                                     |
|                        | * Enter '95' if 95 or more cigarettes.                                    |
| Answer Codes           |   |
| Question Type          | Integer   |
| Field Pane Description | Average number of cigarettes daily  |
| Fill Instructions      |   |
| Special Instructions   | "Every day smokers" as a header.  |
| Skip Instructions      | <1-95,D,R> [goto CIGQTYR]   |
| Hard Edits             |   |
| Soft Edits             |   |
| AssocHelp              | H_CIGSDA1   |

| Module               | 18   |
|----------------------|--|
| Section Name         | Adult Health Behavior  |
| Part                 |  |
| Question ID          | AHB.050_H  |
| Variable Name        | H_CIGSDA1  |
| Universe             |  |
| Universe-text        |  |
| Question Text        | Always probe for an exact number. If the sample adult reports a range or interval, assist the sample adult in making an estimate by probing. For example, you might ask "Could you give me a more exact number?"  If the response is given in packs rather than as a number of cigarettes, multiply the number of packs by 20, verify the result with the sample adult and enter the number of cigarettes per day. |
| Answer Codes         |  |
| Question Type        | Help Screen  |
| Field Pane Descripti | on   |
| Fill Instructions    |  |
| Special Instructions | Associated screens:  |
|                      | CIGSDA1  |
| Skip Instructions    |  |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module                 | 18  |
|------------------------|---|
| Section Name           | Adult Health Behavior   |
| Part                   | A   |
| Question ID            | AHB.060   |
| Variable Name          | CIGDAMO   |
| Universe               | HHSTAT4='S' and AGE GE '018' and AGE not IN ('997','999')) and SMKNOW = 2   |
| Universe-text          | Sample adults 18+ who are current some day smokers                          |
| Question Text          | ? [F1]  |
|                        | On how many of the PAST 30 DAYS did you smoke a cigarette?                  |
|                        | *Enter '0' for None.  |
| Answer Codes           |   |
| Question Type          | Integer   |
| Field Pane Description | on Number of days smoked  |
| Fill Instructions      |   |
| Special Instructions   | "Some day smokers - past 30 days" as a header for this question and AHB.070 |
| Skip Instructions      | <0>[goto CIGQTYR]<br><1-30,R,D> [goto CIGSDA2]                              |
| Hard Edits             |   |
| Soft Edits             |   |
| AssocHelp              | H_CIGDAMO   |

| Module                 | 18   |
|------------------------|--|
| Section Name           | Adult Health Behavior  |
| Part                   |  |
| Question ID            | AHB.060_H  |
| Variable Name          | H_CIGDAMO  |
| Universe               |  |
| Universe-text          |  |
| Question Text          | Always probe for an exact number. If the sample adult reports a range or interval, assist the sample adult in making an estimate by probing. For example, you might ask "Could you give me a more exact number?" |
| Answer Codes           |  |
| Question Type          | Help Screen  |
| Field Pane Description | on   |
| Fill Instructions      |  |
| Special Instructions   | Asociated Screens:   |
|                        | CIGDAMO  |
| Skip Instructions      |  |
| Hard Edits             |  |
| Soft Edits             |  |
| AssocHelp              |  |

| Module               | 18   |
|----------------------|--|
| Section Name         | Adult Health Behavior  |
| Part                 | Α  |
| Question ID          | AHB.070  |
| Variable Name        | CIGSDA2  |
| Universe             | HHSTAT4='S' and AGE GE '018' and AGE not IN ('997','999')) and [ CIGDAMO=1-30,D,R) ]   |
| Universe-text        | Sample adults 18+ who are current some day smokers   |
| Question Text        | ? [F1]   |
|                      | On the average, when you smoked during the PAST 30 DAYS, about how many cigarettes did you smoke a day?  * Enter '1' if less than 1.  * Enter '95' if 95 or more cigarettes. |
| Answer Codes         |  |
| Question Type        | Integer  |
| Field Pane Descripti | Average number of cigarettes on days smoked  |
| Fill Instructions    |  |
| Special Instructions | Locate the Variable Description and answer box to the right of that for AHB.060 (CIGDAMO).   |
| Skip Instructions    | <1-95,D,R> [goto CIGQTYR]  |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            | H CIGSDA2  |

| Module               | 18   |
|----------------------|--|
| Section Name         | Adult Health Behavior  |
| Part                 |  |
| Question ID          | AHB.070_H  |
| Variable Name        | H_CIGSDA2  |
| Universe             |  |
| Universe-text        |  |
| Question Text        | Always probe for an exact number. If the sample adult reports a range or interval, assist the sample adult in making an estimate by probing. For example, you might ask "Could you give me a more exact number?"  If the response is given in packs rather than as a number of cigarettes, multiply the number of packs by 20, verify the result with the sample adult and enter the number of cigarettes per day. |
| Answer Codes         |  |
| Question Type        | Help Screen  |
| Field Pane Descripti | on   |
| Fill Instructions    |  |
| Special Instructions | Associated screens:  |
|                      | CIGSDA2  |
| Skip Instructions    |  |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module               | 18   |
|----------------------|--|
| Section Name         | Adult Health Behavior  |
| Part                 | A  |
| Question ID          | AHB.080  |
| Variable Name        | CIGQTYR  |
| Universe             | HHSTAT4='S' and AGE GE '018' and AGE not IN ('997','999')) and SMKNOW = 1,2  |
| Universe-text        | Sample adults 18+ who are every day or someday smokers   |
| Question Text        | ? [F1]   |
| Answer Codes         | During the PAST 12 MONTHS, have you stopped smoking for more than one day BECAUSE YOU WERE TRYING TO QUIT SMOKING?  1. Yes |
|                      | 2. No<br>Refused<br>Don't know   |
| Question Type        | Yes/No   |
| Field Pane Descripti | on Tried to quit   |
| Fill Instructions    |  |
| Special Instructions |  |
| Skip Instructions    | <1,2,D,R> [goto VIGNO]   |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            | H_CIGQTYR  |

| Module               | 18  |
|----------------------|---|
| Section Name         | Adult Health Behavior   |
| Part                 |   |
| Question ID          | AHB.080_H   |
| Variable Name        | H_CIGQTYR   |
| Universe             |   |
| Universe-text        |   |
| Question Text        | "Trying" means making an effort, not simply thinking about it or desiring it. |
| Answer Codes         |   |
| Question Type        | Help Screen   |
| Field Pane Descripti | on  |
| Fill Instructions    |   |
| Special Instructions | Associated screens:   |
|                      | CIGQTYR   |
| Skip Instructions    |   |
| Hard Edits           |   |
| Soft Edits           |   |
| AssocHelp            |   |

| Module                 | 18  |
|------------------------|---|
| Section Name           | Adult Health Behavior   |
| Part                   |   |
| Question ID            | AHB.081_00.000  |
| Variable Name          | SMKANY  |
| Universe               | HHSTAT4='S' and AGE GE '018' and AGE not IN ('997','999')) and (SMKEV(e) IN('2','9'))     |
| Universe-text          | Sample adults 18+ who have not smoked or don't know if smoked 100+ cigarettes in lifetime |
| Question Text          | Have you ever smoked a cigarette EVEN ONE TIME?   |
| Answer Codes           | 1. Yes 2. No Refused Don't know   |
| Question Type          | Yes/No  |
| Field Pane Description | on Smoked even one cigarette  |
| Fill Instructions      |   |
| Special Instructions   |   |
| Skip Instructions      | <1> [goto SMKAGEX]<br><2,R,D>[goto VIGNO]   |
| Hard Edits             |   |
| Soft Edits             |   |
| AssocHelp              |   |

| Module                 | 18   |
|------------------------|--|
| Section Name           | Adult Health Behavior  |
| Part                   |  |
| Question ID            | AHB.082_00.000   |
| Variable Name          | SMKAGEX  |
| Universe               | HHSTAT4='S' and AGE GE '018' and AGE not IN ('997','999')) and SMKANY(e)='1'   |
| Universe-text          | Sample adults 18+ who have not smoked or don't know if smoked 100+ cigarettes in lifetime but have smoked at least one cigarette |
| Question Text          | How old were you the FIRST TIME you smoked a cigarette?  |
|                        | * Enter '6' if less than 6 years old.  |
|                        | * Enter '95' if 95 years old or older.   |
| Answer Codes           | Allow 6-95,R,D   |
| Question Type          | Integer  |
| Field Pane Description | on Age first smoked  |
| Fill Instructions      |  |
| Special Instructions   |  |
| Skip Instructions      | <6-95> [goto SMKNOWX]<br><r,d> [goto VIGNO]</r,d>  |
| Hard Edits             |  |
| Soft Edits             |  |
| AssocHelp              |  |

| Module               | 18   |
|----------------------|--|
| Section Name         | Adult Health Behavior  |
| Part                 |  |
| Question ID          | AHB.083_00.000   |
| Variable Name        | SMKNOWX  |
| Universe             | HHSTAT4='S' and AGE GE '018' and AGE not IN ('997','999')) and ('06'<=SMKAGEX(e)<='95')  |
| Universe-text        | Sample adults 18+ who have not smoked or don't know if smoked 100+ cigarettes in lifetime but have smoked at least one cigarette and gave an age in SMKAGEX question |
| Question Text        | Do you NOW smoke cigarettes every day, some days or not at all?  |
| Answer Codes         | 1. Every day 2. Some days 3. Not at all Refused Don't know   |
| Question Type        | Pick One-answer list pane  |
| Field Pane Descripti | Now smoke  |
| Fill Instructions    |  |
| Special Instructions |  |
| Skip Instructions    | <r,d> [goto VIGNO] &lt;1,2&gt; [goto CIGDAMOX] &lt;3&gt; [goto SMKNONOX]</r,d>   |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module               | 18  |
|----------------------|---|
| Section Name         | Adult Health Behavior   |
| Part                 |   |
| Question ID          | AHB.084_01.000  |
| Variable Name        | SMKNONOX  |
| Universe             | HHSTAT4='S' and AGE GE '018' and AGE not IN ('997','999')) and SMKNOWX(e)='3'   |
| Universe-text        | Sample adults 18+ who have not smoked 100 cigarettes in lifetime but have smoked a cigarette at least once in lifetime and are currently not smoking at all |
| Question Text        | 1 of 2  |
|                      | How long has it been since you smoked a cigarette?  |
|                      | * Enter number for time since smoked.   |
|                      | * Enter '95' for 95 or more.  |
| Answer Codes         | Allow 01-95,R,D   |
| Question Type        | Integer   |
| Field Pane Descripti | On How long since smoked-number   |
| Fill Instructions    |   |
| Special Instructions |   |
| Skip Instructions    | <1-95> [goto SMKNOTPX]<br><r,d> [goto VIGNO</r,d>   |
| Hard Edits           |   |
| Soft Edits           |   |
| AssocHelp            |   |

18 Module **Adult Health Behavior** Section Name **Part Question ID** AHB.084\_02.000 Variable Name **SMKNOTPX** HHSTAT4='S' and AGE GE '018' and AGE not IN ('997', '999')) and Universe ('01<=SMKNONOX(e)<='95') Sample adults 18+ who have not smoked 100 cigarettes in lifetime but have smoked a Universe-text cigarette at least once in lifetime and are currently not smoking at all and answered 1-95 to the number part of this question 2 of 2 **Question Text** \* Enter time period for time since smoked a cigarette **Answer Codes** 1. Day(s) 2. Week(s) 3. Month(s) 4. Year(s) Refused Don't know Question Type Pick one-answer list pane Field Pane Description How long since smoked-time period Fill Instructions **Special Instructions** <1-4> [goto VIGNO] Skip Instructions <4> [if SMKNONOX gt (AGE - <15>), goto ERR1\_SMKNOTPX if (SMKAGEX + SMKNONOX gt AGE), goto ERR2\_SMKNOTPX ERR2\_SMKNOTPX Hard Edits \* Age started ([Fill1: SMKAGEX]) + years since last cigarette ([Fill2: SMKNONOX]) exceeds current age ([Fill3: AGE]). **ERR1 SMKNOTPX** Soft Edits \* Respondent LAST SMOKED before age 15? \* Please verify. **AssocHelp** 

| Module                 | 18  |
|------------------------|---|
| Section Name           | Adult Health Behavior   |
| Part                   |   |
| Question ID            | AHB.085_00.000  |
| Variable Name          | CIGDAMOX  |
| Universe               | HHSTAT4='S' and AGE GE '018' and AGE not IN ('997','999')) and (SMKNOWX(e) IN('1','2'))   |
| Universe-text          | Sample adults 18+ who have not smoked or don't know if smoked 100+ cigarettes in lifetime and are current every day or some day smokers |
| Question Text          | On how many of the PAST 30 DAYS did you smoke a cigarette?  |
|                        | *Enter '0' for None.  |
| Answer Codes           | Allow 0-30,R,D  |
| Question Type          | Integer   |
| Field Pane Description | on How many days smoked   |
| Fill Instructions      |   |
| Special Instructions   |   |
| Skip Instructions      | <0-30,R,D> [goto VIGNO]   |
| Hard Edits             |   |
| Soft Edits             |   |
| AssocHelp              |   |

| Module               | 18   |
|----------------------|--|
| Section Name         | Adult Health Behavior  |
| Part                 | В  |
| Question ID          | AHB.090_1  |
| Variable Name        | VIGNO  |
| Universe             | HHSTAT4='S' and AGE GE '018' and AGE not IN ('997','999'))   |
| Universe-text        | Sample adults 18+  |
| Question Text        | ? [F1]   |
|                      | 1 of 2   |
|                      | The next questions are about physical activities (exercise, sports, physically active hobbies) that you may do in your LEISURE time.                           |
|                      | How often do you do VIGOROUS leisure-time physical activities for AT LEAST 10 MINUTES that cause HEAVY sweating or LARGE increases in breathing or heart rate? |
|                      | * Read if necessary: How many times per day, per week, per month, or per year do you do these activities?  |
|                      | * Enter number for vigorous leisure-time physical activities.  |
|                      | * Enter '0' for Never.   |
|                      | * Enter '996' if unable to do this type of activity.   |
| Answer Codes         |  |
| Question Type        | Multi Part   |
| Field Pane Descripti | on How often - number  |
| Fill Instructions    |  |
| Special Instructions | "Vigorous activities for at least 10 minutes" as a header for this question, AHB.090_2, AHB.100_1 and AHB.100_2.   |
| Skip Instructions    | <0,996,R,D>[goto MODNO]<br><1-995>[goto VIGTP]   |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            | H_VIGNO  |

| Module               | 18   |
|----------------------|--|
| Section Name         | Adult Health Behavior  |
| Part                 |  |
| Question ID          | AHB.090_1_H  |
| Variable Name        | H_VIGNO  |
| Universe             |  |
| Universe-text        |  |
| Question Text        | Exercise, sports, or physically active hobbies are respondent defined.   |
|                      | Vigorous activities might include fast walking, fast bicycling, jogging,strenuous swimming or sports play, vigorous aerobic dance, and strenuous gardening.  |
|                      | Always probe for an exact number. If the sample adult reports a range or interval, assist the sample adult in making an estimate by probing. For example, you might ask "Could you give me a more exact number?" |
| Answer Codes         |  |
| Question Type        | Help Screen  |
| Field Pane Descripti | on   |
| Fill Instructions    |  |
| Special Instructions | Associated screens:  |
|                      | VIGNO  |
| Skip Instructions    |  |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module               | 18   |
|----------------------|--|
| Section Name         | Adult Health Behavior  |
| Part                 | В  |
| Question ID          | AHB.090_2  |
| Variable Name        | VIGTP  |
| Universe             | HHSTAT4='S' and AGE GE '018' and AGE not IN ('997','999')) and VIGNO = 1-995   |
| Universe-text        | Sample adults 18+ who do vigorous activities   |
| Question Text        | 2 of 2   |
|                      | * Enter time period for vigorous leisure-time physical activities.   |
| Answer Codes         | 1. Day 2. Week 3. Month 4. Year  |
| Question Type        | Multi Part   |
| Field Pane Descript  | ion How often - time period  |
| Fill Instructions    |  |
| Special Instructions | Show answer name on the right. Do not allow "Refused" or "Don't know" answers.   |
| Skip Instructions    | <1-4> goto VIGLNGNO  |
|                      | [if (VIGNO gt <4> and VIGTP eq <1>) or<br>(VIGNO gt <28> and VIGTP eq <2>) or<br>(VIGNO gt <31> and VIGTP eq <3>) or<br>(VIGNO gt <365> and VIGTP eq <4>) goto ERR1_VIGTP] |
| Hard Edits           |  |
| Soft Edits           | ERR1_VIGTP   |
|                      |  |
|                      | * [Fill1: VIGNO] times per [Fill2: VIGTP] is unusually high.  * Please verify.   |

| Module               | 18  |
|----------------------|---|
| Section Name         | Adult Health Behavior   |
| Part                 | В   |
| Question ID          | AHB.100_1   |
| Variable Name        | VIGLNGNO  |
| Universe             | HHSTAT4='S' and AGE GE '018' and AGE not IN ('997','999')) AND VIGTP = 1 - 4        |
| Universe-text        | Sample adults 18+ who do vigorous activities  |
| Question Text        | ? [F1]  |
|                      | 1 of 2  |
|                      | About how long do you do these vigorous leisure-time physical activities each time? |
|                      | * Enter number for length of vigorous leisure-time physical activities.             |
| Answer Codes         |   |
| Question Type        | Multi Part  |
| Field Pane Descripti | on How long - number  |
| Fill Instructions    |   |
| Special Instructions |   |
| Skip Instructions    | <1-995>[goto VIGLNGTP]<br><d,r>[goto MODNO]</d,r>                                   |
| Hard Edits           |   |
| Soft Edits           |   |
| AssocHelp            | H_VIGLNGNO  |

| Module               | 18   |
|----------------------|--|
| Section Name         | Adult Health Behavior  |
| Part                 |  |
| Question ID          | AHB.100_1_H  |
| Variable Name        | H_VIGLNGNO   |
| Universe             |  |
| Universe-text        |  |
| Question Text        | Always probe for an exact number. If the sample adult reports a range or interval, assist the sample adult in making an estimate by probing. For example, you might ask "Could you give me a more exact number?" |
| Answer Codes         |  |
| Question Type        | Help Screen  |
| Field Pane Descripti | on   |
| Fill Instructions    |  |
| Special Instructions | Associated screens:  |
|                      | VIGLNGNO   |
| Skip Instructions    |  |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

18 **Module Adult Health Behavior** Section Name Part **Question ID** AHB.100 2 Variable Name **VIGLNGTP** HHSTAT4='S' and AGE GE '018' and AGE not IN ('997', '999')) and VIGLNGNO = 1-995 Universe Universe-text Sample adults 18+ who do vigorous activities 2 of 2 Question Text \* Enter time period for length of vigorous leisure-time physical activities. **Answer Codes** 1. Minutes 2. Hours Question Type Multi Part Field Pane Description How long-time period Fill1: [if VIGLNGTP = 1] Fill Instructions Fill2: [if VIGLNGTP = 2] Locate the Variable Description and answer box to the right of that for AHB.100 1 **Special Instructions** (VIGLNGNO). Show answer name on the right. Do not allow "Refused" or "Don't know" answers. Skip Instructions <1,2>goto MODNO if VIGLNGNO It <10> and VIGLNGTP eq <1> goto ERR1 VIGLNGTP; if (VIGLNGNO gt <90> and VIGLNGTP eq <1>) or if VIGLNGNO gt <2> and VIGLNGTP eq <2> goto ERR2\_VIGLNGTP Hard Edits ERR1\_VIGLNGTP \* Question asked for activities lasting at least 10 minutes. \* Please correct. **ERR2 VIGLNGTP** Soft Edits \* [Fill1: VIGLNGNO] [fill2: VIGLNGTP] is unusually high. \* Please verify. **AssocHelp** 

| Module               | 18   |
|----------------------|--|
| Section Name         | Adult Health Behavior  |
| Part                 | В  |
| Question ID          | AHB.110_1  |
| Variable Name        | MODNO  |
| Universe             | HHSTAT4='S' and AGE GE '018' and AGE not IN ('997','999'))   |
| Universe-text        | Sample adults 18+  |
| Question Text        | ? [F1]   |
|                      | How often do you do LIGHT OR MODERATE LEISURE-TIME physical activities for AT LEAST 10 MINUTES that cause ONLY LIGHT sweating or a SLIGHT to MODERATE increase in breathing or heart rate? |
|                      | * If necessary, prompt with: How many times per day, per week, per month, or per year do you do these activities?  |
|                      | * Enter number of light or moderate leisure-time physical activities.  |
|                      | * Enter '0' for Never.   |
|                      | * Enter '996' if unable to do this type of activity.   |
| Answer Codes         |  |
| Question Type        | Multi Part   |
| Field Pane Descripti | on How often - number  |
| Fill Instructions    |  |
| Special Instructions | "Light or moderate activities for at least 10 minutes" as a header for this question, AHB.110_2, AHB.120_1 and AHB.120_2.  |
| Skip Instructions    | <1-995>[goto MODTP]<br><0, 996, R,D>[goto STRNGNO]   |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            | H_MODNO  |

| Module               | 18   |
|----------------------|--|
| Section Name         | Adult Health Behavior  |
| Part                 |  |
| Question ID          | AHB.110_1_H  |
| Variable Name        | H_MODNO  |
| Universe             |  |
| Universe-text        |  |
| Question Text        | This question is asking about physical activities (exercise, sports, physically active hobbies) that the sample adult may do in his/her LEISURE time.  |
|                      | Light or moderate activities include such activities as leisurely walking or bicycling, slow swimming or dancing, and simple gardening.  |
|                      | Always probe for an exact number. If the sample adult reports a range or interval, assist the sample adult in making an estimate by probing. For example, you might ask "Could you give me a more exact number?" |
| Answer Codes         |  |
| Question Type        | Help Screen  |
| Field Pane Descripti | on   |
| Fill Instructions    |  |
| Special Instructions | Associated screens:  |
|                      | MODNO  |
| Skip Instructions    |  |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module               | 18  |
|----------------------|---|
| Section Name         | Adult Health Behavior   |
| Part                 | В   |
| Question ID          | AHB.110_2   |
| Variable Name        | MODTP   |
| Universe             | HHSTAT4='S' and AGE GE '018' and AGE not IN ('997','999')) and MODNO = 1-995  |
| Universe-text        | Sample adults 18+ who do light or moderate activities   |
| Question Text        | 2 of 2  |
|                      | * Enter time period for light or moderate leisure-time physical activities  |
| Answer Codes         | 1. Day 2. Week 3. Month 4. Year   |
| Question Type        | Multi Part  |
| Field Pane Descripti | On How often - time period  |
| Fill Instructions    |   |
| Special Instructions | Locate the Variable Description and answer box to the right of that for AHB.110_1 (MODNO). Show answer name on the right. Do not allow "Refused" or "Don't know" answers. |
| Skip Instructions    | <1-4> goto MODLNGNO   |
|                      | [if (MODNO gt <4> and MODTP eq <1>) or<br>(MODNO gt <28> and MODTP eq <2>) or<br>(MODNO gt <31> and MODTP eq <3>) or<br>(MODNO gt <365> and MODTP eq <4>)] goto ERR_MODNO |
| Hard Edits           |   |
| Soft Edits           | ERR_MODNO   |
|                      | * [Fill1: MODNO] times per [fill2: MODTP] is unusually high. * Please verify.   |
| AssocHelp            |   |

| Module               | 18   |
|----------------------|--|
| Section Name         | Adult Health Behavior  |
| Part                 | В  |
| Question ID          | AHB.120_1  |
| Variable Name        | MODLNGNO   |
| Universe             | HHSTAT4='S' and AGE GE '018' and AGE not IN ('997','999')) and MODTP = 1 - 4                 |
| Universe-text        | Sample adults 18+ who do light or moderate activities  |
| Question Text        | ? [F1]   |
|                      | 1 of 2   |
|                      | About how long do you do these light or moderate leisure-time physical activities each time? |
|                      | * Enter number for length of light or moderate leisure-time physical activities.             |
| Answer Codes         |  |
| Question Type        | Multi Part   |
| Field Pane Descripti | On How long - number   |
| Fill Instructions    |  |
| Special Instructions |  |
| Skip Instructions    | <1-995>[goto MODLNGTP]<br><d,r>[goto STRNGNO]</d,r>  |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            | H_MODLNGNO   |

| Module               | 18   |
|----------------------|--|
| Section Name         | Adult Health Behavior  |
| Part                 |  |
| Question ID          | AHB.120_1_H  |
| Variable Name        | H_MODLNGNO   |
| Universe             |  |
| Universe-text        |  |
| Question Text        | Always probe for an exact number. If the sample adult reports a range or interval, assist the sample adult in making an estimate by probing. For example, you might ask "Could you give me a more exact number?" |
| Answer Codes         |  |
| Question Type        | Help Screen  |
| Field Pane Descripti | on   |
| Fill Instructions    |  |
| Special Instructions | Associated screens:  |
|                      | MODLNGNO   |
| Skip Instructions    |  |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

18 **Module Adult Health Behavior** Section Name Part **Question ID** AHB.120\_2 Variable Name **MODLNGTP** HHSTAT4='S' and AGE GE '018' and AGE not IN ('997', '999')) and MODLNGNO = 1 -Universe 995 Sample adults 18+ who do light or moderate activities Universe-text 2 of 2 **Ouestion Text** \* Enter time period for length of light or moderate leisure-time physical activities. **Answer Codes** 1. Minutes 2. Hours Question Type Multi Part Field Pane Description How long - time period Fill Instructions Locate the Variable Description and answer box to the right of that for AHB.120 1 **Special Instructions** (MODLNGNO). Show answer name on the right. Do not allow "Refused" or "Don't know" answers. Skip Instructions <1,2> goto STRNGNO if MODLNGNO It <10> and MODLNGTP eq <1> goto ERR1 MODLNGTP if MODLNGNO gt <90> and MODLNGTP eq <1> or if MODLNGNO gt <2> and MODLNGTP eq <2>goto ERR2 MODLNGTP **Hard Edits** ERR1\_MODLNGTP \* Question asked for activities lasting at least 10 minutes. \* Please correct. ERR2\_MODLNGTP Soft Edits \* [Fill1: MODLNGNO] [Fill2: MODLNGTP] is unusually high. \* Please verify. **AssocHelp** 

| Module                 | 18   |
|------------------------|--|
| Section Name           | Adult Health Behavior  |
| Part                   | В  |
| Question ID            | AHB.130_1  |
| Variable Name          | STRNGNO  |
| Universe               | HHSTAT4='S' and AGE GE '018' and AGE not IN ('997','999'))   |
| Universe-text          | Sample adults 18+  |
| Question Text          | ? [F1]   |
|                        | How often do you do LEISURE-TIME physical activities specifically designed to STRENGTHEN your muscles such as lifting weights or doing calisthenics? (Include all such activities even if you have mentioned them before.) |
|                        | * Read if necessary: How many times per day, per week, per month, or per year do you do these activities?  |
|                        | * Enter number for strengthening acativities.  |
|                        | * Enter '0' for Never.   |
|                        | * Enter '996' for Unable to do this type activity  |
| Answer Codes           |  |
| Question Type          | Multi Part   |
| Field Pane Description | Strengthening - number   |
| Fill Instructions      |  |
| Special Instructions   | "Strengthening activities" as a header for this question, and AHB.130_2.   |
| Skip Instructions      | <1-995>[goto STRNGTP]<br><0, 996,R,D>[goto ALC1YR]   |
| Hard Edits             |  |
| Soft Edits             |  |
| AssocHelp              | H_STRNGNO  |

| Module                             | 18   |
|------------------------------------|--|
| Section Name                       | Adult Health Behavior  |
| Part                               |  |
| Question ID                        | AHB.130_1_H  |
| Variable Name                      | H_STRNGNO  |
| Universe                           |  |
| Universe-text                      |  |
| Question Text                      | This question is asking about physical activities (exercise, sports, physically active hobbies) that the sample adult may do in his/her LEISURE time.  |
|                                    | Exercises to strengthen muscles are activities that require strenuous muscular contractions such as weight lifting, resistance training, push-ups, sit-ups, etc.  Always probe for an exact number. If the sample adult reports a range or interval, assist the sample adult in making an estimate by probing. For example, you might ask "Could you give me a more exact number?" |
| Answer Codes                       |  |
| Question Type Field Pane Descripti | Help Screen  on  |
| Fill Instructions                  |  |
| Special Instructions               | Associated screens:  |
|                                    | STRNGNO  |
| Skip Instructions                  |  |
| Hard Edits                         |  |
| Soft Edits                         |  |
| AssocHelp                          |  |

| Module               | 18   |
|----------------------|--|
| Section Name         | Adult Health Behavior  |
| Part                 | В  |
| Question ID          | AHB.130_2  |
| Variable Name        | STRNGTP  |
| Universe             | HHSTAT4='S' and AGE GE '018' and AGE not IN ('997','999')) and STRNGNO = 1-995   |
| Universe-text        | Sample adults 18+ who do strengthening activities  |
| Question Text        | 2 of 2   |
|                      | * Enter time period for strengthening activities   |
| Answer Codes         | 1. Day 2. Week 3. Month 4. Year  |
| Question Type        | Multi Part   |
| Field Pane Descripti | on Time period   |
| Fill Instructions    |  |
| Special Instructions | Locate the Variable Description and answer box to the right of that for AHB.130_1 (STRNGNO). Show answer name on the right. Do not allow "Refused" or "Don't know" answers                 |
| Skip Instructions    | <1-4> [goto ALC1YR] [If (STRNGNO gt <4> & STRNGTP = <1>) or (STRNGNO gt <28> & STRNGTP = <2>) or (STRNGNO gt <31> & STRNGTP = <3>) or (STRNGNO gt <365> & STRNGTP = <4>) goto ERR_STRNGTP] |
| Hard Edits           |  |
| Soft Edits           | ERR_STRNGTP  |
|                      | * [Fill1: STRNGNO] times per [Fill2: STRNGTP] is unusually high. * Please verify.  |
| AssocHelp            |  |

| Module               | 18  |
|----------------------|---|
| Section Name         | Adult Health Behavior   |
| Part                 | С   |
| Question ID          | AHB.140   |
| Variable Name        | ALC1YR  |
| Universe             | HHSTAT4 = 'S'and AGE GE 18  |
| Universe-text        | Sample adults 18+   |
| Question Text        | ? [F1]  |
| Answer Codes         | These next questions are about drinking alcoholic beverages. Included are liquor such as whiskey or gin, beer, wine, wine coolers, and any other type of alcoholic beverage.  In ANY ONE YEAR, have you had at least 12 drinks of any type of alcoholic beverage?  1. Yes 2. No Refused |
|                      | Don't know  |
| Question Type        | Yes/No  |
| Field Pane Descripti | Any ONE year 12 drinks  |
| Fill Instructions    |   |
| Special Instructions |   |
| Skip Instructions    | <1> [goto ALC12MNO]<br><2,R,D> [goto ALCLIFE]   |
| Hard Edits           |   |
| Soft Edits           |   |
| AssocHelp            | H_ALC1YR  |

| Module                             | 18  |
|------------------------------------|---|
| Section Name                       | Adult Health Behavior   |
| Part                               |   |
| Question ID                        | AHB.140_H   |
| Variable Name                      | H_ALC1YR  |
| Universe                           |   |
| Universe-text                      |   |
| Question Text                      | Include as alcohol all types of beer (including stout, ale, malt liquor, or light beer, but does not include alcohol-free beer), wine (including port, sherry, sangria wine coolers, and champagne), and liquor (including brandy, liqueurs, scotch, whiskeys, tequila and gin.)  One drink is equivalent to a 12-ounce beer, a 5-ounce glass of wine, or one and one-half ounces of liquor |
| Answer Codes                       | Trail ourices of liquoi   |
| Question Type Field Pane Descripti | Help Screen   |
| Fill Instructions                  |   |
| Special Instructions               | Associated screens:   |
|                                    | ALC1YR  |
| Skip Instructions                  |   |
| Hard Edits                         |   |
| Soft Edits                         |   |
| AssocHelp                          |   |

| Module               | 18  |
|----------------------|---|
| Section Name         | Adult Health Behavior   |
| Part                 | С   |
| Question ID          | AHB.150   |
| Variable Name        | ALCLIFE   |
| Universe             | ASTATFLG=1 and AGE GE 18 and ALC1YR = 2, D, R   |
| Universe-text        | Sample adults 18+ who have not had 12 drinks in any one year or don't know if they did or refused to answer |
| Question Text        | ? [F1]  |
|                      | In your ENTIRE LIFE, have you had at least 12 drinks of any type of alcoholic beverage?                     |
| Answer Codes         | 1. Yes 2. No Refused Don't know   |
| Question Type        | Yes/No  |
| Field Pane Descripti | entire life 12 drinks   |
| Fill Instructions    |   |
| Special Instructions |   |
| Skip Instructions    | <1> [goto ALC12MNO]<br><2,R,D> [goto AHGT_FT]   |
| Hard Edits           |   |
| Soft Edits           |   |
| AssocHelp            | H_ALCLIFE   |

| Module               | 18  |
|----------------------|---|
| Section Name         | Adult Health Behavior   |
| Part                 |   |
| Question ID          | AHB.150_H   |
| Variable Name        | H_ALCLIFE   |
| Universe             |   |
| Universe-text        |   |
| Question Text        | Include as alcohol all types of beer (including stout, ale, malt liquor, or light beer, but does not include alcohol-free beer), wine (including port, sherry, sangria wine coolers, and champagne), and liquor (including brandy, liqueurs, scotch, whiskeys, tequila and gin.)  One drink is equivalent to a 12-ounce beer, a 5-ounce glass of wine, or one and one-half ounces of liquor |
| Answer Codes         | Tiali ourices of liquoi   |
|                      |   |
| Question Type        | Help Screen   |
| Field Pane Descripti | on  |
| Fill Instructions    |   |
| Special Instructions | Associated screens:   |
|                      | ALCLIFE   |
| Skip Instructions    |   |
| Hard Edits           |   |
| Soft Edits           |   |
| AssocHelp            |   |

| Module                 | 18   |
|------------------------|--|
| Section Name           | Adult Health Behavior  |
| Part                   | С  |
| Question ID            | AHB.160_1  |
| Variable Name          | ALC12MNO   |
| Universe               | HHSTAT4='S' and AGE GE '018' and AGE not IN ('997','999')) and (ALC1YR = 1 or ALCLIFE = 1)                   |
| Universe-text          | Sample adults 18+ who have had at least 12 drinks in any one year or at least 12 drinks in their entire life |
| Question Text          | ? [F1]   |
|                        | 1 of 2   |
|                        | In the PAST YEAR, how often did you drink any type of alcoholic beverage?                                    |
|                        | * Read if necessary: "How many days per week, per month or per year did you drink?"                          |
|                        | * Enter number for how often alcohoilic berveages were consumed in the past year.                            |
|                        |  |
| A                      | *Enter '0' for Never.  |
| Answer Codes           |  |
| Question Type          | Multi Part   |
| Field Pane Description | on How often - number  |
| Fill Instructions      |  |
| Special Instructions   | "Past year" as a header or this question, AHB.160_2, AHB.170, AHB.180_1 and AHB.180_2.                       |
| Skip Instructions      | <1-365>[goto ALC12MTP]<br><0,D,R>[goto AHGT_FT]  |
| Hard Edits             |  |
| Soft Edits             |  |
| AssocHelp              | H_ALC12MNO   |

| Module               | 18  |
|----------------------|---|
| Section Name         | Adult Health Behavior   |
| Part                 |   |
| Question ID          | AHB.160_1_H   |
| Variable Name        | H_ALC12MNO  |
| Universe             |   |
| Universe-text        |   |
| Question Text        | Always probe for an exact number. If the sample adult reports a range or interval, assist the sample adult in making an estimate by probing. For example, you might ask "Could you give me a more exact number?"  Include as alcohol all types of beer (including stout, ale, malt liquor, or light beer, but does not include alcohol-free beer), wine (including port, sherry, sangria wine coolers, and champagne), and liquor (including brandy, liqueurs, scotch, whiskeys, tequila and gin.)  One drink is equivalent to a 12-ounce beer, a 5-ounce glass of wine, or one and one-half ounces of liquor |
| Answer Codes         |   |
| Question Type        | Help Screen   |
| Field Pane Descripti | on  |
| Fill Instructions    |   |
| Special Instructions | Associated screens:   |
|                      | ALC12M  |
| Skip Instructions    |   |
| Hard Edits           |   |
| Soft Edits           |   |
| AssocHelp            |   |

| Module               | 18   |
|----------------------|--|
| Section Name         | Adult Health Behavior  |
| Part                 | С  |
| Question ID          | AHB.160_2  |
| Variable Name        | ALC12MTP   |
| Universe             | HHSTAT4='S' and AGE GE '018' and AGE not IN ('997','999')) and ALC12MNO = 1 - 365  |
| Universe-text        | Sample adults 18+ who drank at least once in the past year   |
| Question Text        | 2 of 2   |
|                      | * Enter time period for how often alcoholic beverages were consumed in the past year.  |
| Answer Codes         | 1. Week 2. Month 3. Year   |
| Question Type        | Multi Part   |
| Field Pane Descripti |  |
| Fill Instructions    | <u> </u>   |
| Special Instructions | Locate the Variable Description and answer box to the right of that for AHB.160_1 (ALC12MNO). Show answer name on the right.             |
| Skip Instructions    | <1-3> [goto ALCAMT]  |
|                      | [If (ALC12MNO gt <7> & ALC12MTP = <1>) or (ALC12MNO gt <31> & ALC12MTP = <2>) or (ALC12MNO gt <365> & ALC12MTP = <3>) goto ERR_ALC12MTP] |
| Hard Edits           | ERR_ALC12MTP   |
|                      | * [Fill1: ALC12MNO] days per [Fill2: ALC12MTP] exceeds number possible in this time period. * Please correct.                            |
| Soft Edits           |  |
| AssocHelp            |  |

| Module               | 18  |
|----------------------|---|
| Section Name         | Adult Health Behavior   |
| Part                 | С   |
| Question ID          | AHB.170   |
| Variable Name        | ALCAMT  |
| Universe             | HHSTAT4='S' and AGE GE '018' and AGE not IN ('997','999')) and ALC12MTP = 1-3                                     |
| Universe-text        | Sample adults 18+ who have had at least 1 drink in the past year  |
| Question Text        | ? [F1]  |
|                      | In the PAST YEAR, on those days that you drank alcoholic beverages, on the average, how many drinks did you have? |
|                      | * Enter '1' if less than 1 drink.   |
|                      | * Enter '95' if 95 or more drinks.  |
| Answer Codes         |   |
| Question Type        | Integer   |
| Field Pane Descript  | ion Average # of drinks/day   |
| Fill Instructions    |   |
| Special Instructions |   |
| Skip Instructions    | <1-95,D,R>[goto ALC5UPNO]<br><10-95>[goto ERR_ALCAMT]   |
| Hard Edits           |   |
| Soft Edits           | ERR_ALCAMT  |
|                      | * [Fill: ALCAMT] drinks is an unusually high number.  * Please verify.  * Do not probe                            |
| AssocHelp            | H_ALCAMT  |

| Module                             | 18  |
|------------------------------------|---|
| Section Name                       | Adult Health Behavior   |
| Part                               | С   |
| Question ID                        | AHB.170_H   |
| Variable Name                      | H_ALCAMT  |
| Universe                           |   |
| Universe-text                      |   |
| Question Text                      | Always probe for an exact number. If the sample adult reports a range or interval, assist the sample adult in making an estimate by probing. For example, you might ask "Could you give me a more exact number?"  Include as alcohol all types of beer (including stout, ale, malt liquor, or light beer, but does not include alcohol-free beer), wine (including port, sherry, sangria wine coolers, and champagne), and liquor (including brandy, liqueurs, scotch, whiskeys, tequila and gin.)  One drink is equivalent to a 12-ounce beer, a 5-ounce glass of wine, or one and one-half ounces of liquor |
| Answer Codes                       |   |
| Question Type Field Pane Descripti | Help Screen   |
| Fill Instructions                  |   |
| Special Instructions               | Associated screens:   |
|                                    | ALCAMT  |
| Skip Instructions                  |   |
| Hard Edits                         |   |
| Soft Edits                         |   |
| AssocHelp                          |   |

| Module               | 18   |
|----------------------|--|
| Section Name         | Adult Health Behavior  |
| Part                 | С  |
| Question ID          | AHB.180_1  |
| Variable Name        | ALC5UPNO   |
| Universe             | HHSTAT4='S' and AGE GE '018' and AGE not IN ('997','999')) and ALC12MNO = 1-365                                |
| Universe-text        | Sample adults 18+ who have had at least 1 drink in the past year   |
| Question Text        | ? [F1]   |
|                      | 1 of 2   |
|                      | In the PAST YEAR, on how many DAYS did you have [fill: 5 or more/4 or more] drinks of any alcoholic beverage?  |
|                      | * Read if necessary:   |
|                      | How many days per week, per month or per year did you have [fill: 5 or more/4 or more] drinks in a single day? |
|                      | * Enter number of days.  |
|                      | * Enter '0' for Never/None.  |
| Answer Codes         |  |
| Question Type        | Multi Part   |
| Field Pane Descripti | Number   |
| Fill Instructions    | If SEX=1 fill "5 or more"; else if SEX=2 fill "4 or more"  |
| Special Instructions | "Days with 5 or more drinks " as a header for this question and AHB.180_2.                                     |
| Skip Instructions    | <1-365>[goto ALC5UPTP]<br><0,R,D>[goto AHGT_FT]  |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHeln            | H ALC5UP   |

| Module                             | 18  |
|------------------------------------|---|
| Section Name                       | Adult Health Behavior   |
| Part                               | С   |
| Question ID                        | AHB.180_1_H   |
| Variable Name                      | H_ALC5UP  |
| Universe                           |   |
| Universe-text                      |   |
| Question Text                      | Always probe for an exact number. If the sample adult reports a range or interval, assist the sample adult in making an estimate by probing. For example, you might ask "Could you give me a more exact number?"  Include as alcohol all types of beer (including stout, ale, malt liquor, or light beer, but does not include alcohol-free beer), wine (including port, sherry, sangria wine coolers, and champagne), and liquor (including brandy, liqueurs, scotch, whiskeys, tequila and gin.)  One drink is equivalent to a 12-ounce beer, a 5-ounce glass of wine, or one and one-half ounces of liquor |
| Answer Codes                       |   |
| Question Type Field Pane Descripti | Help Screen   |
| Fill Instructions                  |   |
| Special Instructions               | Associated screens:   |
|                                    | ALC5UP  |
| Skip Instructions                  |   |
| Hard Edits                         |   |
| Soft Edits                         |   |
| AssocHelp                          |   |

| Module               | 18  |
|----------------------|---|
| Section Name         | Adult Health Behavior   |
| Part                 | С   |
| Question ID          | AHB.180_2   |
| Variable Name        | ALC5UPTP  |
| Universe             | HHSTAT4='S' and AGE GE '018' and AGE not IN ('997','999')) and ALC5UPNO = 1-365.  |
| Universe-text        | Sample adults 18+ who have had 5+ (males) or 4+ (females) drinks in one day at least once in the past year  |
| Question Text        | 2 of 2  |
|                      | * Enter time period for days per week, per month or per year.   |
| Answer Codes         | 1. Week 2. Month 3. Year  |
| Question Type        | Multi Part  |
| Field Pane Descripti | on Time period  |
| Fill Instructions    | (For Hard Edit): If SEX=1 fill "5 or more"; else if SEX=2 fill "4 or more"  |
| Special Instructions | Locate the Variable Description and answer box to the right of that for AHB.180_1 (ALC5UPNO). Show answer name on the right.  |
| Skip Instructions    | <1-3> [goto BINGE1] [If (ALC5UPNO gt <7> & ALC5UPTP = <1>) or     (ALC5UPNO gt <31> & ALC5UPTP = <2>) or     (ALC5UPNO gt <365> & ALC5UPTP = <3>) goto ERR1_ALC5UPTP [if number of days drank in the past year (calculated from ALC12MNO and ALC12MTP) It number of days per year with 5 or more (for males)/4+ (females) drinks (calculated from ALC5UPNO and ALC5UPTP)] goto ERR2_ALC5UPTP] |
| Hard Edits           | ERR1_ALC5UPTP  * [Fill1: ALC5UPNO] days per [Fill2: ALC5UPTP] exceeds number possible in this time period.  * Please correct ERR2_ALC5UPTP  * Number of days had [fill: 5 or more/4 or more] drinks exceeds number of days drank.  * Please correct.  * Do not probe.   |
| Soft Edits           |   |
| AssocHelp            |   |

| Module               | 18  |  |
|----------------------|---|--|
| Section Name         | Adult Health Behavior   |  |
| Part                 | С   |  |
| Question ID          | AHB.181   |  |
| Variable Name        | BINGE1  |  |
| Universe             | HHSTAT4='S' and AGE GE '018' and AGE not IN ('997','999')) and ALC5UPNO = 1-365   |  |
| Universe-text        | Sample adults 18+ who have had 5+ (males) or 4+ (females) drinks in one day at least once in the past year  |  |
| Question Text        | ? [F1]  |  |
|                      | Considering all types of alcoholic beverages, DURING THE PAST 30 DAYS, how many times did you have [fill: 5 or more/4 or more] drinks on an occasion?  * Enter '0' if none. |  |
|                      | * Enter '60' if 60 or more times.   |  |
| Answer Codes         | (Allow 0-60,R,D)  |  |
| Question Type        | Integer   |  |
| Field Pane Descripti | Field Pane Description Number   |  |
| Fill Instructions    | If SEX=1 fill "5 or more"; else if SEX=2 fill "4 or more"   |  |
| Special Instructions | "Days with 5 or more drinks " as a header for this question and AHB.180_2.  |  |
| Skip Instructions    | <0-60,R,D> [goto AHGT_FT]   |  |
| Hard Edits           |   |  |
| Soft Edits           |   |  |
| AssocHelp            | H_BINGE   |  |

| Module               | 18   |
|----------------------|--|
| Section Name         | Adult Health Behavior  |
| Part                 | С  |
| Question ID          | AHB.181_H  |
| Variable Name        | H_BINGE  |
| Universe             |  |
| Universe-text        |  |
| Question Text        | Include as alcohol all types of beer (including stout, ale, malt liquor, or light beer, but does not include alcohol-free beer), wine (including port, sherry, sangria wine coolers, and champagne), and liquor (including brandy, liqueurs, scotch, whiskeys, tequila and gin.  One drink is equivalent to a 12-ounce beer, a 5-ounce glass of wine, or one and one-half ounces of liquor |
| Answer Codes         |  |
| Question Type        | Help Screen  |
| Field Pane Descripti | on   |
| Fill Instructions    |  |
| Special Instructions | Associated screens: BINGE  |
| Skip Instructions    |  |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            | H_BINGE  |

| Module               | 18   |
|----------------------|--|
| Section Name         | Adult Health Behavior  |
| Part                 | С  |
| Question ID          | AHB.190_01   |
| Variable Name        | AHGT_FT  |
| Universe             | HHSTAT4='S' and AGE GE '018' and AGE not IN ('997','999'))   |
| Universe-text        | Sample adults 18+  |
| Question Text        | How tall are you without shoes?  |
|                      | * Enter "M" to record metric measurements  |
| Answer Codes         |  |
| Question Type        | Integer  |
| Field Pane Descripti | Current height   |
| Fill Instructions    |  |
| Special Instructions | "Current height" to the left. "feet" to the right.   |
|                      | Don't allow a '.' (a period) after a number. This is a 2 character field and will be picked up in output |
| Skip Instructions    | <2-7> [goto AHGT_IN]   |
|                      | <r.d> [goto AWGT_LB]<br/><m> [goto AHGT_M]</m></r.d>   |
|                      | [if AHGT_FT NE<2-7,R,D,M> goto ERR1_AHGT_FT] [if AHGT_FT = <2,3> goto ERR2_AHGT_FT]                      |
| Hard Edits           | ERR1_AHGT_FT   |
|                      | * Only 2-7, Don't Know/Refused or M allowed in this field. * Please correct.                             |
| Soft Edits           | ERR2_AHGT_FT   |
|                      | * Respondent's height in feet is [fill: AHGT_FT]? * Please verify.                                       |
| AssocHelp            |  |

18 **Module Adult Health Behavior** Section Name Part Question ID AHB.190 02 Variable Name AHGT\_IN HHSTAT4='S' and AGE GE '018' and AGE not IN ('997','999')) and AHGT\_FT = 2-7 Universe Universe-text Sample adults 18+ who answered their height in feet How tall are you without shoes? Question Text \* Enter '0' if exactly [fill1: AHGT FT] feet tall. **Answer Codes Question** Type Integer Field Pane Description Inches Fill Instructions Locate the Variable Description and answer box to the right of that for AHB.190 01 **Special Instructions** (AHGT\_FT). Show "inches" on the right. If AHGT FT = M, Refused, or Don't know, do not calculate a value for AHTINCH Create variable AHTINCH as follows: (AHGT FT \* 12) + AHGT IN = AHTINCH If AHGT IN = Refused or Don't know use '0' for AHGT IN when calculating AHTINCH If ERR2 AHGT IN is displayed, set AHGT FLG = '1' If ERR2 AHGT IN is closed or you goto another screen from it, leave AHGT FLG = '1' If ERR2 AHGT IN is suppressed, reset AHGT FLG = '2' <empty> goto ERR AHGT IN Skip Instructions <0-11,R,D> if (SEX = '1' and (AHTINCH It '61' or AHTINCH gt '75')) or (SEX = '2' and (AHTINCH It '56' or AHTINCH gt '69')) goto ERR2\_AHGT\_IN else goto AWGT\_LB ERR1 AHGT IN Hard Edits \* If [fill: AHGT\_FT] feet exactly, enter "0"; otherwise enter number of inches. ERR2 AHGT IN Soft Edits \* Please verify that the height was entered correctly. Probe only if necessary. **AssocHelp** 

| Module                 | 18   |
|------------------------|--|
| Section Name           | Adult Health Behavior  |
| Part                   | С  |
| Question ID            | AHB.190_03   |
| Variable Name          | AHGT_M   |
| Universe               | HHSTAT4='S' and AGE GE '018' and AGE not IN ('997','999')) and AHGT_FT = M                   |
| Universe-text          | Sample adults 18+ who choose to give their height in metric measurements                     |
| Question Text          | How tall are you without shoes?  |
|                        | * Enter height in metric.  |
| Answer Codes           |  |
| Question Type          | Integer  |
| Field Pane Description | on Current height  |
| Fill Instructions      |  |
| Special Instructions   | "meters" to the right.   |
| Skip Instructions      | <empty> goto ERR_AHGT_M<br/>&lt;0-2&gt; goto AHGT_CM<br/><r,d> goto AWGT_LB</r,d></empty>    |
| Hard Edits             | ERR_AHGT_M   |
|                        | * If height is being given in centimeters only, enter "0"; otherwise enter number of meters. |
| Soft Edits             |  |
| AssocHelp              |  |

18 **Module** Section Name **Adult Health Behavior** Part Question ID AHB.190 04 Variable Name AHGT\_CM HHSTAT4='S' and AGE GE '018' and AGE not IN ('997','999')) and AHGT M = 0-2 Universe Universe-text Sample adults 18+ who answered their height in meters \*Enter centimeters. Question Text Answer Codes **Question** Type Integer Field Pane Description Centimeters Fill Instructions "centimeters" to the right. **Special Instructions** If AHGT M = Refused or Don't know, do not calculate a value for AHTCM Create variable AHTCM as follows: (AHGT M \* 100) + AHGT CM = AHTCM If AHGT CM = Refused or Don't know use '0' for AHGT CM when checking if height exceeds maximum allowed, when checking if height is very small, or when calculating **AHTCM** If ERR3\_AHGT\_CM is displayed, set AHGT FLG = '1' If ERR3 AHGT CM is closed or you goto another screen from it, leave AHGT FLG = If ERR3 AHGT CM is suppressed, reset AHGT FLG = '2' <empty> goto ERR2 AHGT CM Skip Instructions <0-241,R,D> if (AHGT M eq '2' and AHGT CM gt '41') or (AHGT M eq '1' and AHGT CM at '141') goto ERR1 AHGT CM elseif (SEX = '1' and (AHTCM It '156' or AHTCM gt '192')) or (SEX = '2' and (AHTCM It '143' or AHTCM gt '176')) goto ERR3\_AHGT\_CM else goto AWGT LB ERR1 AHGT CM Hard Edits \* Total height exceeds maximum allowed. \* Please correct. ERR2 AHGT CM \* If [fill: AHGT\_M] meters exactly, enter "0"; otherwise enter number of centimeters. ERR3\_AHGT\_CM Soft Edits \* Please verify that the height was entered correctly. Probe only if necessary. **AssocHelp** 

| Module               | 18  |
|----------------------|---|
| Section Name         | Adult Health Behavior   |
| Part                 | С   |
| Question ID          | AHB.190_05  |
| Variable Name        | AHTINCH   |
| Universe             |   |
| Universe-text        |   |
| Question Text        | **OUT VARIABLE**  |
| Answer Codes         |   |
| Question Type        | Instrument Out Variable   |
| Field Pane Descripti | on  |
| Fill Instructions    |   |
| Special Instructions | If AHGT_FT = M, Refused or Don't know, do not calculate a value for AHTINCH Create variable AHTINCH as follows: (AHGT_FT * 12) + AHGT_IN = AHTINCH If AHGT_IN = Refused or Don't know, use '0' for AHGT_IN when calculating AHTINCH |
| Skip Instructions    |   |
| Hard Edits           |   |
| Soft Edits           |   |
| AssocHelp            |   |

| Module               | 18   |
|----------------------|--|
| Section Name         | Adult Health Behavior  |
| Part                 | С  |
| Question ID          | AHB.190_06   |
| Variable Name        | AHTCM  |
| Universe             |  |
| Universe-text        |  |
| Question Text        | **OUT VARIABLE**   |
| Answer Codes         |  |
| Question Type        | Instrument Out Variable  |
| Field Pane Descripti | on   |
| Fill Instructions    |  |
| Special Instructions | If AHGT_M = Refused or Don't know, do not calculate a value for AHTCM Create variable AHTCM as follows: (AHGT_M * 100) + AHGT_CM = AHTCM If AHGT_CM = Refused or Don't know use '0' for AHGT_CM when calculating AHTCM |
| Skip Instructions    |  |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module               | 18  |
|----------------------|---|
| Section Name         | Adult Health Behavior   |
| Part                 | С   |
| Question ID          | AHB.190_07  |
| Variable Name        | AHGT_FLG  |
| Universe             |   |
| Universe-text        |   |
| Question Text        | **OUT VARIABLE**  |
| Answer Codes         | blank,1,2   |
| Question Type        | Instrument Out Variable   |
| Field Pane Descripti | on  |
| Fill Instructions    |   |
| Special Instructions | If ERR2_AHGT_IN or ERR3_AHGT_CM is displayed, set AHGT_FLG = '1' If ERR2_AHGT_IN or ERR3_AHGT_CM is closed or you goto another screen from it, leave AHGT_FLG = '1' If ERR2_AHGT_IN or ERR3_AHGT_CM is suppressed, reset AHGT_FLG = '2' |
| Skip Instructions    |   |
| Hard Edits           |   |
| Soft Edits           |   |
| AssocHelp            |   |

| Module                 | 18   |
|------------------------|--|
| Section Name           | Adult Health Behavior  |
| Part                   | С  |
| Question ID            | AHB.190_08   |
| Variable Name          | AMETERS  |
| Universe               |  |
| Universe-text          |  |
| Question Text          | **OUT VARIABLE**   |
| Answer Codes           |  |
| Question Type          | Instrument Out Variable  |
| Field Pane Description | on   |
| Fill Instructions      |  |
| Special Instructions   | Create variable AMETERS as follows: if AHTINCH ne 'empty' set AMETERS = AHTINCH/39.37008 elseif AHTCM ne 'empty' set AMETERS = AHTCM/100 |
| Skip Instructions      |  |
| Hard Edits             |  |
| Soft Edits             |  |
| AssocHelp              |  |

| Module               | 18  |
|----------------------|---|
| Section Name         | Adult Health Behavior   |
| Part                 | С   |
| Question ID          | AHB.200_01  |
| Variable Name        | AWGT_LB   |
| Universe             | HHSTAT4='S' and AGE GE '018' and AGE not IN ('997','999'))  |
| Universe-text        | Sample adults 18+   |
| Question Text        | How much do you weigh without shoes?  |
|                      | * Enter "M" to record metric measurements   |
|                      | * Enter '500' for 500 pounds or more  |
| Answer Codes         |   |
| Question Type        | Integer   |
| Field Pane Descripti | Current weight  |
| Fill Instructions    |   |
| Special Instructions | "pounds" on the right.  |
|                      | If ERR2_AWGT_LB is displayed, set AWGT_FLG = '1' If ERR2_AWGT_LB is closed or you goto another screen from it, leave AWGT_FLG = '1' If ERR2_AWGT_LB is suppressed, reset AWGT_FLG = '2' |
| Skip Instructions    | <pre>&lt;50-500&gt; if AWGT_LB It '50' or AWGT_LB gt '500'</pre>  |
| Hard Edits           | ERR1_AWGT_LB  |
|                      | * Weight is out of range (50-500). * Please correct.  |
| Soft Edits           | ERR2_AWGT_LB  |
|                      | * Please verify that the weight was entered correctly. Probe only if necessary.   |
| AssocHelp            |   |

| Module               | 18  |
|----------------------|---|
| Section Name         | Adult Health Behavior   |
| Part                 | С   |
| Question ID          | AHB.200_02  |
| Variable Name        | AWGT_KG   |
| Universe             | HHSTAT4='S' and AGE GE '018' and AGE not IN ('997', '999')) and AWGT_LB = M   |
| Universe-text        | Sample adults 18+ who choose to give their weight in metric measurements  |
| Question Text        | How much do you weigh without shoes?  |
|                      | * Enter weight in kilograms   |
| Answer Codes         | <23-226> Refused Don't know   |
| Question Type        | Integer   |
| Field Pane Descripti | Current weight  |
| Fill Instructions    |   |
| Special Instructions | "kilograms" to the right.   |
|                      | If ERR2_AWGT_KG is displayed, set AWGT_FLG = '1' If ERR2_AWGT_KG is closed or you goto another screen from it, leave AWGT_FLG = '1' If ERR2_AWGT_KG is suppressed, reset AWGT_FLG = '2'   |
| Skip Instructions    | <23-226> if AWGT_KG It '23' or AWGT_KG gt '226' goto ERR1_AWGT_KG elseif ((SEX = '1' and (AWGT_KG It '51' or AWGT_KG gt '143')) or ((SEX = '2' and (AWGT_KG It '43' or AWGT_KG gt '133')) goto ERR2_AWGT_KG elseif AHGT_FLG = '1' and AWGT_FLG = '1' goto next section else calculate the BMI (Body Mass Index) - See BMI spec page <r,d> goto next section</r,d> |
| Hard Edits           | ERR1_AWGT_KG  |
|                      | *Weight is out of range (23-226).  * Please correct.  |
| Soft Edits           | ERR2_AWGT_KG  |
|                      | * Please verify that the weight was entered correctly. Probe only if necessary.   |
| AssocHelp            |   |

| Module                 | 18  |
|------------------------|---|
| Section Name           | Adult Health Behavior   |
| Part                   | С   |
| Question ID            | AHB.200_03  |
| Variable Name          | AWGT_FLG  |
| Universe               |   |
| Universe-text          |   |
| Question Text          | **OUT VARIABLE**  |
| Answer Codes           | blank,1,2   |
| Question Type          | Instrument Out Variable   |
| Field Pane Description | on  |
| Fill Instructions      |   |
| Special Instructions   | If ERR2_AWGT_LB or ERR2_AWGT_KG is displayed, set AWGT_FLG = '1' If ERR2_AWGT_LB or ERR2_AWGT_KG is closed or you goto another screen from it, leave AWGT_FLG = '1' If ERR2_AWGT_LB or ERR2_AWGT_KG is suppressed, reset AWGT_FLG = '2' |
| Skip Instructions      |   |
| Hard Edits             |   |
| Soft Edits             |   |
| AssocHelp              |   |

| Module               | 18   |
|----------------------|--|
| Section Name         | Adult Health Behavior  |
| Part                 | С  |
| Question ID          | AHB.200_04   |
| Variable Name        | AKG  |
| Universe             |  |
| Universe-text        |  |
| Question Text        | **OUT VARIABLE**   |
| Answer Codes         |  |
| Question Type        | Instrument Out Variable  |
| Field Pane Descripti | on   |
| Fill Instructions    |  |
| Special Instructions | Create variable AKG as follows:  If AWGT_LB ne 'M', 'Refused', 'Don't know', or 'empty' set AKG = AWGT_LB/2.20462  elseif AWGT_KG ne 'Refused', 'Don't know', or 'empty' set AKG = AWGT_KG |
| Skip Instructions    |  |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module               | 18   |
|----------------------|--|
| Section Name         | Adult Health Behavior  |
| Part                 | С  |
| Question ID          | AHB.200_05   |
| Variable Name        | ABMI   |
| Universe             |  |
| Universe-text        |  |
| Question Text        | **OUT VARIABLE**   |
| Answer Codes         |  |
| Question Type        | Instrument Out Variable  |
| Field Pane Descripti | on   |
| Fill Instructions    |  |
| Special Instructions | Create variable ABMI as follows: (AKG/(AMETERS * AMETERS)) = ABMI  |
|                      | If ERR_ABMI is displayed, set ABMI_FLG = '1' f ERR_ABMI is closed or you goto another screen from it, leave ABMI_FLG = '1' If ERR_ABMI is suppressed, reset ABMI_FLG = '2' |
| Skip Instructions    | if (SEX = '1' and (ABMI It '18' or ABMI gt '44')) or (SEX = '2' and (ABMI It '17' or ABMI gt '49')) goto ERR_ABMI else [goto next section]                                 |
| Hard Edits           |  |
| Soft Edits           | ERR_ABMI   |
|                      | * Please verify that the entries for height and weight were entered correctly. Probe only if necessary.  |
| AssocHelp            |  |

| Module                 | 18  |
|------------------------|---|
| Section Name           | Adult Health Behavior   |
| Part                   | С   |
| Question ID            | AHB.200_06  |
| Variable Name          | ABMI_FLG  |
| Universe               |   |
| Universe-text          |   |
| Question Text          | **OUT VARIABLE**  |
| Answer Codes           | blank,1,2   |
| Question Type          | Instrument Out Variable   |
| Field Pane Description | on  |
| Fill Instructions      |   |
| Special Instructions   | If ERR_ABMI is displayed, set ABMI_FLG = '1' If ERR_ABMI is closed or you goto another screen from it, leave ABMI_FLG = '1' If ERR_ABMI is suppressed, reset ABMI_FLG = '2' |
| Skip Instructions      |   |
| Hard Edits             |   |
| Soft Edits             |   |
| AssocHelp              |   |

## 2015 Q1 NHIS Instrument Spec Report

Section name: **Health Care Access and Utilization** 19 Module Section Name **Health Care Access and Utilization** Part **AAU.020** Question ID **AUSUALPL** Variable Name HHSTAT4 = 'S' and (AGE GE '018' and AGE not IN ('997','999')) Universe Sample adults 18+ Universe-text ? [F1] Question Text The next questions are about health care. Is there a place that you USUALLY go to when you are sick or need advice about your health? **Answer Codes** 1. Yes 2. There is NO place 3. There is MORE THAN ONE place Refused Don't Know Question Type Pick One - answer list pane Field Pane Description Usually go when sick Fill Instructions Special Instructions | Answer on the right. <1,3> [go to APLKIND] Skip Instructions <2,R,D> [go to AHCPLKND] **Hard Edits** Soft Edits

**AssocHelp** 

H AUSUALPL

| Module               | 19  |
|----------------------|---|
| Section Name         | Health Care Access and Utilization  |
| Part                 |   |
| Question ID          | AAU.020_H   |
| Variable Name        | H_AUSUALPL  |
| Universe             |   |
| Universe-text        |   |
| Question Text        | A place to USUALLY go when sick or in need of advice about one's health includes:  Walk-in clinic Doctor's office Clinic Health Center Health Maintenance Organization Hospital - Emergency room or outpatient clinic Military or VA health care facility |
| Answer Codes         |   |
| Question Type        | Help Screen   |
| Field Pane Descripti | on  |
| Fill Instructions    |   |
| Special Instructions | Associated screens:   |
|                      | AUSUALPL  |
| Skip Instructions    |   |
| Hard Edits           |   |
| Soft Edits           |   |
| AssocHelp            |   |

| Module               | 19  |
|----------------------|---|
| Section Name         | Health Care Access and Utilization  |
| Part                 |   |
| Question ID          | AAU.030   |
| Variable Name        | APLKIND   |
| Universe             | HHSTAT4 = 'S' and (AGE GE '018' and AGE not IN ('997', '999')) and AUSUALPL(e) IN('1', '3')   |
| Universe-text        | Sample adults 18+ with 1+ usual place(s) to go when sick/need health advice   |
| Question Text        | ? [F1]  |
|                      | [Fill1: What kind of place is it - a clinic, doctor's office, emergency room, or some other place?  [Fill2: What kind of place do you go to most often - a clinic, doctor's office, emergency room, or some other place?] |
| Answer Codes         | 1. Clinic or health center 2. Doctor's office or HMO 3. Hospital emergency room 4. Hospital outpatient department 5. Some other place 6. Doesn't go to one place most often Refused Don't know                            |
| Question Type        | Pick One - answer list pane   |
| Field Pane Descripti | Go to most often  |
| Fill Instructions    | Fill 1 = [If AUSUALPL (AAU.020) = 1]<br>Fill2 = [If AUSUALPL (AAU.020) = 3]   |
| Special Instructions |   |
| Skip Instructions    | <1-5> [go to AHCPLROU]<br><6,R,D> [go to AHCPLKND]  |
| Hard Edits           |   |
| Soft Edits           |   |
| AssocHelp            | H_APLKIND   |

| Module               | 19   |
|----------------------|--|
| Section Name         | Health Care Access and Utilization   |
| Part                 |  |
| Question ID          | AAU.030_H  |
| Variable Name        | H_APLKIND  |
| Universe             |  |
| Universe-text        |  |
| Question Text        | "Doctor" includes medical doctors, as well as other health care professionals, such as general practitioners, psychologists, nurses, chiropractors, etc. |
| Answer Codes         |  |
| Question Type        | Help Screen  |
| Field Pane Descripti | on   |
| Fill Instructions    |  |
| Special Instructions | Associated screens:  |
|                      | APLKIND  |
| Skip Instructions    |  |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            | H_APLKIND  |

| Module               | 19  |
|----------------------|---|
| Section Name         | Health Care Access and Utilization  |
| Part                 |   |
| Question ID          | AAU.035   |
| Variable Name        | AHCPLROU  |
| Universe             | HHSTAT4 = 'S' and (AGE GE '018' and AGE not IN ('997','999')) and ('1' <=APLKIND(e) <='5')  |
| Universe-text        | Sample adults 18+ with 1+ usual place(s) to go when sick/need health advice who reported place goes most often as a clinic or health center, doctor's office or HMO, hospital emergency room, hospital outpatient department, or some other place |
| Question Text        | ? [F1]  |
|                      | Is that {fill: place from (APLKIND)} the same place you USUALLY go when you need routine or preventive care, such as a physical examination or check up?  |
| Answer Codes         | 1. Yes 2. No Refused Don't Know   |
| Question Type        | Yes/No  |
| Field Pane Descripti | Routine/prev. care place  |
| Fill Instructions    |   |
| Special Instructions |   |
| Skip Instructions    | <1> [goto AHCCHGYR]<br><2,R,D> [go to AHCPLKND]   |
| Hard Edits           |   |
| Soft Edits           |   |
| AssocHelp            | H_AHCPLROU  |

| Module               | 19  |
|----------------------|---|
| Section Name         | Health Care Access and Utilization  |
| Part                 |   |
| Question ID          | AAU.035_H   |
| Variable Name        | H_AHCPLROU  |
| Universe             |   |
| Universe-text        |   |
| Question Text        | Routine or preventive care is a health procedure or series of health procedures done to help a person avoid illness or to detect problems early.  |
|                      | A general physical exam or check-up is an examination not for a specific condition or problem. This may include the following: a periodic health examination, a complete medical examination, an annual health check-up or a comprehensive physical examination. It does NOT include dental exams and vision tests. |
| Answer Codes         |   |
| Question Type        | Help Screen   |
| Field Pane Descripti | on  |
| Fill Instructions    |   |
| Special Instructions | Associated screens:   |
|                      | AHCPLROU  |
| Skip Instructions    |   |
| Hard Edits           |   |
| Soft Edits           |   |
| AssocHelp            |   |

| Module               | 19   |
|----------------------|--|
| Moune                |  |
| Section Name         | Health Care Access and Utilization   |
| Part                 |  |
| Question ID          | AAU.037  |
| Variable Name        | AHCPLKND   |
| Universe             | HHSTAT4 = 'S' and (AGE GE '018' and AGE not IN ('997','999')) and (AUSUALPL(e) IN('2','7','9') or APLKIND(e) IN('6','7','9') or AHCPLROU(e) IN('2','7','9'))   |
| Universe-text        | Sample Adults 18+ who do not have a usual source of sick care; who Ref/DK if have a usual source of sick care; who have a usual source of sick care but do not go to one place most often or Ref/DK what kind of place; who have a usual source of sick care, but it is not same place as usual source of routine/preventive care; who have a usual source of sick care but Ref/DK if it is same place as usual source of routine/preventive care. |
| Question Text        | What kind of place do you USUALLY go to when you need routine or preventive care, such as a physical examination or check-up?  |
| Answer Codes         | O. Doesn't get preventive care anywhere  Clinic or health center  Doctor's office or HMO  Hospital emergency room  Hospital outpatient department  Some other place  Doesn't go to one place most often  Refused  Don't Know   |
| Question Type        | Pick One - answer list pane  |
| Field Pane Descripti | On Usually go for routine/prev. care   |
| Fill Instructions    |  |
| Special Instructions |  |
| Skip Instructions    | <0-6,R,D> if AUSUALPL=2,R,D [goto APRVTRYR] ELSE goto AHCCHGYR   |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            | H_AHCPLROU   |

| Module               | 19  |
|----------------------|---|
| Section Name         | Health Care Access and Utilization  |
| Part                 |   |
| Question ID          | AAU.040   |
| Variable Name        | AHCCHGYR  |
| Universe             | HHSTAT4 = 'S' and (AGE GE '018' and AGE not IN ('997','999')) and (AUSUALPL(e) IN('1','3') OR AHCPLROU(e)='1')                                      |
| Universe-text        | Sample adults 18+ with 1+ usual place(s) to go when sick/need health advice [or who reported same place as usual source of routine/preventive care] |
| Question Text        | ? [F1]  |
| Answer Codes         | At any time in the PAST 12 MONTHS did you CHANGE the place(s) to which you USUALLY go for health care?  |
|                      | 1. Yes 2. No Refused Don't Know   |
| Question Type        | Yes/No  |
| Field Pane Descripti | On Changed health care place  |
| Fill Instructions    |   |
| Special Instructions |   |
| Skip Instructions    | <1>[goto AHCCHGHI]<br><2,R,D>[goto APRVTRYR]  |
| Hard Edits           |   |
| Soft Edits           |   |
| AssocHelp            | H AHCCHGYR  |

| Module                 | 19  |
|------------------------|---|
| Section Name           | Health Care Access and Utilization  |
| Part                   |   |
| Question ID            | AAU.040_H   |
| Variable Name          | H_AHCCHGYR  |
| Universe               |   |
| Universe-text          |   |
| Question Text          | "Change the place" refers to a change in health care providers, not a change of address for a current provider. |
| Answer Codes           |   |
| Question Type          | Help Screen   |
| Field Pane Description | on  |
| Fill Instructions      |   |
| Special Instructions   | Associated screens: AHCCHGYR  |
| Skip Instructions      |   |
| Hard Edits             |   |
| Soft Edits             |   |
| AssocHelp              |   |

| Module               | 19  |
|----------------------|---|
| Section Name         | Health Care Access and Utilization  |
| Part                 |   |
| Question ID          | AAU.050   |
| Variable Name        | AHCCHGHI  |
| Universe             | HHSTAT4 = 'S' and (AGE GE '018' and AGE not IN ('997', '999')) and AHCCHGYR(e) = '1'  |
| Universe-text        | Sample adults 18+ with 1+ usual place(s) to go when sick/need health advice who CHANGED their USUAL place for health care in past 12 months |
| Question Text        | Was this change for a reason related to health insurance?   |
| Answer Codes         | 1. Yes<br>2. No<br>Refused<br>Don't Know  |
| Question Type        | Yes/No  |
| Field Pane Descripti | on Change due to health ins.  |
| Fill Instructions    |   |
| Special Instructions |   |
| Skip Instructions    | <1,2,R,D> [goto APRVTRYR]   |
| Hard Edits           |   |
| Soft Edits           |   |
| AssocHelp            |   |

| Module                 | 19  |
|------------------------|---|
| Section Name           | Adult Access to Health Care & Utilization   |
| Part                   |   |
| Question ID            | AAU.051_00.010  |
| Variable Name          | APRVTRYR  |
| Universe               | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999'))  |
| Universe-text          | Sample adults 18+   |
| Question Text          | DURING THE PAST 12 MONTHS, did you have any trouble finding a general doctor or provider who would see you? |
| Answer Codes           | 1 Yes<br>2 No<br>Refused<br>Don't know  |
| Question Type          | Yes/No  |
| Field Pane Description | on Trouble finding doctor   |
| Fill Instructions      |   |
| Special Instructions   |   |
| Skip Instructions      | <1,>[goto APRVTRFD ] <2,R,D>[goto ADRNANP]  |
| Hard Edits             |   |
| Soft Edits             |   |
| AssocHelp              |   |

| Module               | 19  |
|----------------------|---|
| Section Name         | Adult Access to Health Care & Utilization   |
| Part                 |   |
| Question ID          | AAU.053_00.010  |
| Variable Name        | APRVTRFD  |
| Universe             | HHSTAT4 = 'S' and (AGE GE '018' and AGE not IN ('997','999')) and APRVTRYR(e)='1' |
| Universe-text        | Sample adults 18+ who had trouble finding a provider                              |
| Question Text        | Were you able to find a general doctor or provider who could see you?             |
| Answer Codes         | 1 Yes<br>2 No<br>Refused<br>Don't know  |
| Question Type        | Yes/No  |
| Field Pane Descripti | on Able to find a doctor  |
| Fill Instructions    |   |
| Special Instructions |   |
| Skip Instructions    | <1,2,R,D>[goto ADRNANP]   |
| Hard Edits           |   |
| Soft Edits           |   |
| AssocHelp            |   |

| Module                                       | 19   |
|--|--|
| Section Name                                 | Adult Access to Health Care & Utilization  |
| Part   |  |
| Question ID                                  | AAU.057_00.010   |
| Variable Name                                | ADRNANP  |
| Universe                                     | HHSTAT4 = 'S' and (AGE GE '018' and AGE not IN ('997', '999'))   |
| Universe-text                                | Sample adults 18+  |
| Question Text                                | DURING THE PAST 12 MONTHS, were you told by a doctor's office or clinic that they would not accept you as a new patient? |
| Answer Codes                                 | 1. Yes 2. No Refused Don't know  |
| Question Type                                | Yes/No   |
| Field Pane Description Not accept as patient |  |
| Fill Instructions                            |  |
| Special Instructions                         |  |
| Skip Instructions                            | <1,2,R,D>[goto ADRNAI]   |
| Hard Edits                                   |  |
| Soft Edits                                   |  |
| AssocHelp                                    |  |

| Module                 | 19  |
|------------------------|---|
| Section Name           | Adult Access to Health Care & Utilization   |
| Part                   |   |
| Question ID            | AAU.059_00.010  |
| Variable Name          | ADRNAI  |
| Universe               | HHSTAT4 = 'S' and (AGE GE '018' and AGE not IN ('997', '999'))  |
| Universe-text          | Sample adults 18+   |
| Question Text          | DURING THE PAST 12 MONTHS, were you told by a doctor's office or clinic that they did not accept your health care coverage? |
| Answer Codes           | 1. Yes 2. No Refused Don't know   |
| Question Type          | Yes/No  |
| Field Pane Description | on Not accept coverage  |
| Fill Instructions      |   |
| Special Instructions   |   |
| Skip Instructions      | <1,2,R,D>[goto AHCDLY_1]  |
| Hard Edits             |   |
| Soft Edits             |   |
| AssocHelp              |   |

| Module               | 19   |
|----------------------|--|
| Section Name         | Health Care Access and Utilization   |
| Part                 |  |
| Question ID          | AAU.061_1  |
| Variable Name        | AHCDLY_1   |
| Universe             | HHSTAT4 = 'S' and (AGE GE '018' and AGE not IN ('997','999'))  |
| Universe-text        | Sample adults 18+  |
| Question Text        | ? [F1]   |
|                      | There are many reasons people delay getting medical care.  |
|                      | Have you delayed getting care for any of the following reasons in the PAST 12 MONTHS? You couldn't get through on the telephone. |
| Answer Codes         | 1. Yes 2. No Refused Don't Know  |
| Question Type        | Yes/No   |
| Field Pane Descripti | On Couldn't get through on phone   |
| Fill Instructions    |  |
| Special Instructions | "Past 12 months" as a header for this question as well as AAU061_2 - AAU.061_5.  |
| Skip Instructions    | <1,2,R,D>[goto AHCDLY_2]   |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            | H_AHCDLY_1   |

| Module                 | 19   |  |
|------------------------|--|--|
| Section Name           | Health Care Access and Utilization   |  |
| Part                   |  |  |
| Question ID            | AAU.061_1_H  |  |
| Variable Name          | H_AHCDLY_1   |  |
| Universe               |  |  |
| Universe-text          |  |  |
| Question Text          | "Delayed" assumes that medical care has been or will eventually be received. |  |
| Answer Codes           |  |  |
| Question Type          | Help Screen  |  |
| Field Pane Description |  |  |
| Fill Instructions      |  |  |
| Special Instructions   | Associated screens: AHCDLY_1, AHCDLY_2, AHCDLY_4 and AHCDLY_5                |  |
| Skip Instructions      |  |  |
| Hard Edits             |  |  |
| Soft Edits             |  |  |
| AssocHelp              |  |  |

| Module               | 19   |
|----------------------|--|
| Section Name         | Health Care Access and Utilization   |
| Part                 |  |
| Question ID          | AAU.061_2  |
| Variable Name        | AHCDLY_2   |
| Universe             | HHSTAT4 = 'S' and (AGE GE '018' and AGE not IN ('997','999'))  |
| Universe-text        | Sample adults 18+  |
| Question Text        | ? [F1]   |
|                      | * Read if Necessary.   |
|                      | There are many reasons people delay getting medical care. Have you delayed getting care for any of the following reasons in the PAST 12 MONTHS? You couldn't get an appointment soon enough. |
| Answer Codes         | 1. Yes 2. No Refused Don't Know  |
| Question Type        | Yes/No   |
| Field Pane Descripti | on No appt. soon enough  |
| Fill Instructions    |  |
| Special Instructions |  |
| Skip Instructions    | <1,2,R,D>[goto AHCDLY_3]   |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            | H_AHCDLY_1   |

| Module               | 19   |
|----------------------|--|
| Section Name         | Health Care Access and Utilization   |
| Part                 |  |
| Question ID          | AAU.061_3  |
| Variable Name        | AHCDLY_3   |
| Universe             | HHSTAT4 = 'S' and (AGE GE '018' and AGE not IN ('997','999'))  |
| Universe-text        | Sample adults 18+  |
| Question Text        | ? [F1]   |
|                      | * Read if Necessary.   |
|                      | There are many reasons people delay getting medical care. Have you delayed getting care for any of the following reasons in the PAST 12 MONTHS? Once you get there, you have to wait too long to see the doctor. |
| Answer Codes         | 1. Yes 2. No Refused Don't Know  |
| Question Type        | Yes/No   |
| Field Pane Descripti | on Wait too long to see Dr.  |
| Fill Instructions    |  |
| Special Instructions |  |
| Skip Instructions    | <1,2,R,D>[goto AHCDLY_4]   |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHeln            | H AHCDLY 3   |

| Module               | 19   |
|----------------------|--|
| Section Name         | Health Care Access and Utilization   |
| Part                 |  |
| Question ID          | AAU.061_3_H  |
| Variable Name        | H_AHCDLY_3   |
| Universe             |  |
| Universe-text        |  |
| Question Text        | "Delayed" assumes that medical care has been or will eventually be received.                           |
|                      | Waiting time to see the doctor includes only time from arrival until the health care provider is seen. |
| Answer Codes         |  |
| Question Type        | Help Screen  |
| Field Pane Descripti | on   |
| Fill Instructions    |  |
| Special Instructions | Associated screens: AHCDLY_3   |
| Skip Instructions    |  |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module               | 19   |
|----------------------|--|
| Section Name         | Health Care Access and Utilization   |
| Part                 |  |
| Question ID          | AAU.061_4  |
| Variable Name        | AHCDLY_4   |
| Universe             | HHSTAT4 = 'S' and (AGE GE '018' and AGE not IN ('997','999'))  |
| Universe-text        | Sample adults 18+  |
| Question Text        | ? [F1]   |
|                      | * Read if Necessary.   |
|                      | There are many reasons people delay getting medical care. Have you delayed getting care for any of the following reasons in the PAST 12 MONTHS? The (clinic/doctor's) office wasn't open when you could get there. |
| Answer Codes         | 1. Yes 2. No Refused Don't Know  |
| Question Type        | Yes/No   |
| Field Pane Descripti | On Clinic/office not open  |
| Fill Instructions    |  |
| Special Instructions |  |
| Skip Instructions    | <1,2,R,D>[goto AHCDLY_5]   |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            | H_AHCDLY_1   |

| Module               | 19  |
|----------------------|---|
| Section Name         | Health Care Access and Utilization  |
| Part                 |   |
| Question ID          | AAU.061_5   |
| Variable Name        | AHCDLY_5  |
| Universe             | HHSTAT4 = 'S' and (AGE GE '018' and AGE not IN ('997','999'))   |
| Universe-text        | Sample adults 18+   |
| Question Text        | ? [F1]  |
|                      | * Read if Necessary.  |
|                      | There are many reasons people delay getting medical care. Have you delayed getting care for any of the following reasons in the PAST 12 MONTHS? You didn't have transportation. |
| Answer Codes         | 1. Yes 2. No Refused Don't Know   |
| Question Type        | Yes/No  |
| Field Pane Descripti | on No transportation  |
| Fill Instructions    |   |
| Special Instructions |   |
| Skip Instructions    | <1,2,R,D>[goto AHCAFY_1]  |
| Hard Edits           |   |
| Soft Edits           |   |
| AssocHelp            | H_AHCDLY_1  |

| Module               | 19  |
|----------------------|---|
| Section Name         | Health Care Access and Utilization  |
| Part                 |   |
| Question ID          | AAU.111_1   |
| Variable Name        | AHCAFY_1  |
| Universe             | HHSTAT4 = 'S' and (AGE GE '018' and AGE not IN ('997','999'))   |
| Universe-text        | Sample adults 18+   |
| Question Text        | ? [F1]  |
| Answer Codes         | DURING THE PAST 12 MONTHS, was there any time when you needed any of the following, but didn't get it because you couldn't afford it?Prescription medicines.  1. Yes 2. No Refused Don't Know |
| Question Type        | Yes/No  |
| Field Pane Descripti | Prescription medicines  |
| Fill Instructions    |   |
| Special Instructions | "Past 12 mo. (needed but can't aford)" as a header for this question as well as AAU.111_2 - AAU.111_4.  |
|                      | Indent all related Field Pane Descriptions under the heading.   |
| Skip Instructions    | <1,2,R,D>[goto AHCAFY_2]  |
| Hard Edits           |   |
| Soft Edits           |   |
| AssocHelp            | H_AHCAFY_1  |

| Module               | 19  |
|----------------------|---|
| Section Name         | Health Care Access and Utilization  |
| Part                 |   |
| Question ID          | AAU.111_1_H   |
| Variable Name        | H_AHCAFY_1  |
| Universe             |   |
| Universe-text        |   |
| Question Text        | Include all types of financial limitations that prevented the person from getting medical services.   |
|                      | Prescription Medicines are medication which can only be obtained with the approval of a licensed health care professional. The medication is usually obtained through a pharmacy using a written note or telephoned instructions from the health care professional to the pharmacy. |
| Answer Codes         |   |
| Question Type        | Help Screen   |
| Field Pane Descripti | on [  |
| Fill Instructions    |   |
| Special Instructions | Associated screens: AHCAFY_1  |
| Skip Instructions    |   |
| Hard Edits           |   |
| Soft Edits           |   |
| AssocHelp            |   |

| Module               | 19  |
|----------------------|---|
| Section Name         | Health Care Access and Utilization  |
| Part                 |   |
| Question ID          | AAU.111_2   |
| Variable Name        | AHCAFY_2  |
| Universe             | HHSTAT4 = 'S' and (AGE GE '018' and AGE not IN ('997','999'))   |
| Universe-text        | Sample adults 18+   |
| Question Text        | ? [F1]  |
|                      | * Read if Necessary.  |
|                      | DURING THE PAST 12 MONTHS, was there any time when you needed any of the following, but didn't get it because you couldn't afford it? Mental health care or counseling. |
| Answer Codes         | 1. Yes<br>2. No<br>Refused<br>Don't Know  |
| Question Type        | Yes/No  |
| Field Pane Descripti | on Mental health care/counselling   |
| Fill Instructions    |   |
| Special Instructions |   |
| Skip Instructions    | <1,2,R,D>[goto AHCAFY_3]  |
| Hard Edits           |   |
| Soft Edits           |   |
| AssocHeln            | H AHCAFY 2  |

| Module               | 19  |
|----------------------|---|
| Section Name         | Health Care Access and Utilization  |
| Part                 |   |
| Question ID          | AAU.111_2_H   |
| Variable Name        | H_AHCAFY_2  |
| Universe             |   |
| Universe-text        |   |
| Question Text        | Include all types of financial limitations that prevented the person from getting medical services. |
|                      | Mental Health Care is respondent defined.   |
| Answer Codes         |   |
| Question Type        | Help Screen   |
| Field Pane Descripti | on  |
| Fill Instructions    |   |
| Special Instructions | Associated screens: AHCAFY_2  |
| Skip Instructions    |   |
| Hard Edits           |   |
| Soft Edits           |   |
| AssocHelp            |   |

| Module               | 19   |
|----------------------|--|
| Section Name         | Health Care Access and Utilization   |
| Part                 |  |
| Question ID          | AAU.111_3  |
| Variable Name        | AHCAFY_3   |
| Universe             | HHSTAT4 = 'S' and (AGE GE '018' and AGE not IN ('997','999'))  |
| Universe-text        | Sample adults 18+  |
| Question Text        | ? [F1]   |
|                      | * Read if Necessary.   |
|                      | DURING THE PAST 12 MONTHS, was there any time when you needed any of the following, but didn't get it because you couldn't afford it? Dental care (including check ups). |
| Answer Codes         | 1. Yes 2. No Refused Don't Know  |
| Question Type        | Yes/No   |
| Field Pane Descripti | on Dental care   |
| Fill Instructions    |  |
| Special Instructions |  |
| Skip Instructions    | <1,2,R,D>[goto AHCAFY_4]   |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            | H_AHCAFY_3   |

| Module               | 19  |
|----------------------|---|
| Section Name         | Health Care Access and Utilization  |
| Part                 |   |
| Question ID          | AAU.111_3_H   |
| Variable Name        | H_AHCAFY_3  |
| Universe             |   |
| Universe-text        |   |
| Question Text        | Include all types of financial limitations that prevented the person from getting medical services. |
| Answer Codes         |   |
| Question Type        | Help Screen   |
| Field Pane Descripti | on  |
| Fill Instructions    |   |
| Special Instructions | Associated screens: AHCAFY_3, AHCAFY_4  |
| Skip Instructions    |   |
| Hard Edits           |   |
| Soft Edits           |   |
| AssocHelp            |   |

| Module               | 19  |
|----------------------|---|
| Section Name         | Health Care Access and Utilization  |
| Part                 |   |
| Question ID          | AAU.111_4   |
| Variable Name        | AHCAFY_4  |
| Universe             | HHSTAT4 = 'S' and (AGE GE '018' and AGE not IN ('997','999'))   |
| Universe-text        | Sample adults 18+   |
| Question Text        | ? [F1]  |
|                      | * Read if Necessary.  DURING THE PAST 12 MONTHS, was there any time when you needed any of the following, but didn't get it because you couldn't afford it? |
| Answer Codes         | Eyeglasses.  1. Yes 2. No Refused Don't Know  |
| Question Type        | Yes/No  |
| Field Pane Descripti | on Eyeglasses   |
| Fill Instructions    |   |
| Special Instructions |   |
| Skip Instructions    | <1,2,R,D>[goto AHCAFY_5]]   |
| Hard Edits           |   |
| Soft Edits           |   |
| AssocHelp            | H_AHCAFY_3  |

| Module               | 19  |
|----------------------|---|
| Section Name         | Adult Access to Health Care & Utilization   |
| Part                 |   |
| Question ID          | AAU.111_5.010   |
| Variable Name        | AHCAFY_5  |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999'))  |
| Universe-text        | Sample adults 18+   |
| Question Text        | *Read if necessary  |
| Answer Codes         | DURING THE PAST 12 MONTHS, was there any time when you needed any of the following, but didn't get it because you couldn't afford it?To see a specialist.  1.Yes 2. No Refused Don't know |
| Question Type        | Yes/No  |
| Field Pane Descripti | on  |
| Fill Instructions    |   |
| Special Instructions |   |
| Skip Instructions    | <1,2,R,D>[goto AHCAFY_6]  |
| Hard Edits           |   |
| Soft Edits           |   |
| AssocHelp            |   |

| Module                 | 19  |
|------------------------|---|
| Section Name           | Adult Access to Health Care & Utilization   |
| Part                   |   |
| Question ID            | AAU.111_6.010   |
| Variable Name          | AHCAFY_6  |
| Universe               | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999'))  |
| Universe-text          | Sample adults 18+   |
| Question Text          | *Read if necessary  |
| Answer Codes           | DURING THE PAST 12 MONTHS, was there any time when you needed any of the following, but didn't get it because you couldn't afford it? Follow-up care.  1.Yes 2. No Refused Don't know |
| Question Type          | Yes/No  |
| Field Pane Description | on  |
| Fill Instructions      |   |
| Special Instructions   |   |
| Skip Instructions      | <1,2,R,D>[goto AWORPAY]   |
| Hard Edits             |   |
| Soft Edits             |   |
| AssocHelp              |   |

| Module                 | 19   |  |
|------------------------|--|--|
| Section Name           | Adult Access to Health Care & Utilization  |  |
| Part                   |  |  |
| Question ID            | AAU.113_00.010   |  |
| Variable Name          | AWORPAY  |  |
| Universe               | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999'))   |  |
| Universe-text          | Sample adults 18+  |  |
| Question Text          | If you get sick or have an accident, how worried are you that you will be able to pay your medical bills? Are you very worried, somewhat worried, or not at all worried? |  |
| Answer Codes           | 1. Very worried 2. Somewhat worried 3. Not at all worried Refused Don't know   |  |
| Question Type          | Pick One - answer list pane  |  |
| Field Pane Description |  |  |
| Fill Instructions      |  |  |
| Special Instructions   |  |  |
| Skip Instructions      | <1-3,R,D>[goto AHICOMP]  |  |
| Hard Edits             |  |  |
| Soft Edits             |  |  |
| AssocHelp              |  |  |

| Module                 | 19   |
|------------------------|--|
| Section Name           | Adult Access to Health Care & Utilization  |
| Part                   |  |
| Question ID            | AAU.113_00.020   |
| Variable Name          | AHICOMP  |
| Universe               | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999'))   |
| Universe-text          | Sample adults 18+  |
| Question Text          | In regard to your health insurance or health care coverage, how does it compare to a year ago? Is it better, worse, or about the same? |
| Answer Codes           | 1. Better 2. Worse 3. About the same Refused Don't know  |
| Question Type          | Pick One - answer list pane  |
| Field Pane Description | on   |
| Fill Instructions      |  |
| Special Instructions   |  |
| Skip Instructions      | <1,2,3,R,D>[goto ARX12MO]  |
| Hard Edits             |  |
| Soft Edits             |  |
| AssocHelp              |  |

| Module                 | 19  |
|------------------------|---|
| Section Name           | Adult Access to Health Care & Utilization   |
| Part                   |   |
| Question ID            | AAU.126_01.010  |
| Variable Name          | ARX12MO   |
| Universe               | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999'))  |
| Universe-text          | Sample adults 18+   |
| Question Text          | DURING THE PAST 12 MONTHS, were you prescribed medication by a doctor or other health professional? |
| Answer Codes           | 1.Yes 2. No Refused Don't know  |
| Question Type          | Yes/No  |
| Field Pane Description | on Past 12 months prescriptions   |
| Fill Instructions      |   |
| Special Instructions   |   |
| Skip Instructions      | <1> [goto ARX12_1]<br><2,R,D> [goto ARX12_5]  |
| Hard Edits             |   |
| Soft Edits             |   |
| AssocHelp              |   |

| Module               | 19   |
|----------------------|--|
| Section Name         | Adult Access to Health Care & Utilization  |
| Part                 |  |
| Question ID          | AAU.127_01.010   |
| Variable Name        | ARX12_1  |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999')) and ARX12MO (e)='1' |
| Universe-text        | Sample adults 18+ who had been prescribed medication in the past 12 months       |
| Question Text        | DURING THE PAST 12 MONTHS, were any of the following true for you?               |
|                      | You skipped medication doses to save money.                                      |
| Answer Codes         | 1.Yes  |
|                      | 2. No<br>Refused   |
|                      | Don't know   |
| Question Type        | Yes/No   |
| Field Pane Descripti | on Past 12 months skipped medication   |
| Fill Instructions    |  |
| Special Instructions |  |
| Skip Instructions    | <1,2,R,D>[goto ARX12_2]  |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module               | 19   |
|----------------------|--|
| Section Name         | Adult Access to Health Care & Utilization  |
| Part                 |  |
| Question ID          | AAU.127_02.010   |
| Variable Name        | ARX12_2  |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999')) and ARX12MO (e)='1'   |
| Universe-text        | Sample adults 18+ who had been prescribed medication in the past 12 months   |
| Question Text        | *Read if necessary.  |
| Answer Codes         | DURING THE PAST 12 MONTHS, were any of the following true for you? You took less medicine to save money.  1.Yes 2. No Refused Don't know |
| Question Type        | Yes/No   |
| Field Pane Descripti | on Took less medicine  |
| Fill Instructions    |  |
| Special Instructions |  |
| Skip Instructions    | <1,2,R,D>[goto ARX12_3]  |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module               | 19   |
|----------------------|--|
| Section Name         | Adult Access to Health Care & Utilization  |
| Part                 |  |
| Question ID          | AAU.127_03.010   |
| Variable Name        | ARX12_3  |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999')) and ARX12MO (e)='1'   |
| Universe-text        | Sample adults 18+ who had been prescribed medication in the past 12 months   |
| Question Text        | *Read if necessary.  |
| Answer Codes         | DURING THE PAST 12 MONTHS, were any of the following true for you? You delayed filling a prescription to save money.  1.Yes 2. No Refused Don't know |
| Question Type        | Yes/No   |
| Field Pane Descripti | On Delayed filling prescription  |
| Fill Instructions    |  |
| Special Instructions |  |
| Skip Instructions    | <1,2,R,D>[goto ARX12_4]  |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module                 | 19  |
|------------------------|---|
| Section Name           | Adult Access to Health Care & Utilization   |
| Part                   |   |
| Question ID            | AAU.127_04.010  |
| Variable Name          | ARX12_4   |
| Universe               | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999')) and ARX12MO (e)='1'  |
| Universe-text          | Sample adults 18+ who had been prescribed medication in the past 12 months  |
| Question Text          | *Read if necessary.   |
| Answer Codes           | DURING THE PAST 12 MONTHS, were any of the following true for you? You asked your doctor for a lower cost medication to save money.  1.Yes 2. No Refused Don't know |
| Question Type          | Yes/No  |
| Field Pane Description | on Lower cost medication  |
| Fill Instructions      |   |
| Special Instructions   |   |
| Skip Instructions      | <1,2,R,D>[goto ARX12_5]   |
| Hard Edits             |   |
| Soft Edits             |   |
| AssocHelp              |   |

| Module  | 19   |  |
|---|--|--|
| Section Name                                      | Adult Access to Health Care & Utilization                          |  |
| Part  |  |  |
| Question ID                                       | AAU.127_05.010   |  |
| Variable Name                                     | ARX12_5  |  |
| Universe  | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999'))       |  |
| Universe-text                                     | Sample adults 18+  |  |
| Question Text                                     | DURING THE PAST 12 MONTHS, were any of the following true for you? |  |
|   | You bought prescription drugs from another country to save money.  |  |
| Answer Codes                                      | 1.Yes 2. No Refused Don't know                                     |  |
| Question Type                                     | Yes/No   |  |
| Field Pane Description Drugs from another country |  |  |
| Fill Instructions                                 |  |  |
| Special Instructions                              |  |  |
| Skip Instructions                                 | <1,2,R,D>[goto ARX12_6]  |  |
| Hard Edits  |  |  |
| Soft Edits  |  |  |
| AssocHelp   |  |  |

| Module  | 19   |  |
|---|--|--|
| Section Name                                      | Adult Access to Health Care & Utilization  |  |
| Part  |  |  |
| Question ID                                       | AAU.127_06.010   |  |
| Variable Name                                     | ARX12_6  |  |
| Universe  | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999'))  |  |
| Universe-text                                     | Sample adults 18+  |  |
| Question Text                                     | *Read if necessary.  |  |
| Answer Codes                                      | DURING THE PAST 12 MONTHS, were any of the following true for you? You used alternative therapies to save money.  1.Yes 2. No Refused Don't know |  |
| Question Type                                     | Yes/No   |  |
| Field Pane Description Used alternative therapies |  |  |
| Fill Instructions                                 |  |  |
| Special Instructions                              |  |  |
| Skip Instructions                                 | <1,2,R,D>[goto ADENLONG]   |  |
| Hard Edits  |  |  |
| Soft Edits  |  |  |
| AssocHelp   |  |  |

| Module               | 19   |
|----------------------|--|
| Section Name         | Health Care Access and Utilization   |
| Part                 |  |
| Question ID          | AAU.135  |
| Variable Name        | ADENLONG   |
| Universe             | HHSTAT4 = 'S' and (AGE GE '018' and AGE not IN ('997', '999'))   |
| Universe-text        | Sample adults 18+  |
| Question Text        | (book) A8  |
| Answer Codes         | About how long has it been since you last saw a dentist? Include all types of dentists, such as orthodontists, oral surgeons, and all other dental specialists, as well as dental hygienists.  |
|                      | <ol> <li>Never</li> <li>6 months or less</li> <li>More than 6 months, but not more than 1 year ago</li> <li>More than 1 year, but not more than 2 years ago</li> <li>More than 2 years, but not more than 5 years ago</li> <li>More than 5 years ago</li> <li>Refused         Don't Know     </li> </ol> |
| Question Type        | Pick One - answer list pane  |
| Field Pane Descripti | on Last saw dentist  |
| Fill Instructions    |  |
| Special Instructions | Answer on the right.   |
| Skip Instructions    | <0-5,R,D>[ goto AHCSY1_1]  |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module               | 19   |
|----------------------|--|
| Section Name         | Health Care Access and Utilization   |
| Part                 | С  |
| Question ID          | AAU.141_1  |
| Variable Name        | AHCSY1_1   |
| Universe             | HHSTAT4 = 'S' and (AGE GE '018' and AGE not IN ('997','999'))  |
| Universe-text        | Sample adults 18+  |
| Question Text        | DURING THE PAST 12 MONTHS have you seen or talked to any of the following health care providers about your own health? |
|                      | A mental health professional such as a psychiatrist, psychologist, psychiatric nurse, or clinical social worker.       |
| Answer Codes         | 1. Yes 2. No Refused Don't Know  |
| Question Type        | Yes/No   |
| Field Pane Descripti | Mental heallth professional  |
| Fill Instructions    |  |
| Special Instructions | "Past 12 mo. (seen/talked to)" as a header for this question as well as AAU.141_2 - AAU.230.                           |
|                      | Indent all related Field Pane Descriptions under the heading.  |
| Skip Instructions    | <1,2,R,D>[ goto AHCSY1_2]  |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module               | 19  |
|----------------------|---|
| Section Name         | Health Care Access and Utilization  |
| Part                 | С   |
| Question ID          | AAU.141_2   |
| Variable Name        | AHCSY1_2  |
| Universe             | HHSTAT4 = 'S' and (AGE GE '018' and AGE not IN ('997', '999'))  |
| Universe-text        | Sample adults 18+   |
| Question Text        | * Read if Necessary.  |
|                      | DURING THE PAST 12 MONTHS have you seen or talked to any of the following health care providers about your own health? An optometrist, ophthalmologist (AHF-thal-MOL-oh-jist), or eye doctor (someone who prescribes eyeglasses). |
| Answer Codes         | 1. Yes 2. No Refused Don't Know   |
| Question Type        | Yes/No  |
| Field Pane Descripti | en Eye doctor   |
| Fill Instructions    |   |
| Special Instructions |   |
| Skip Instructions    | <1,2,R,D>[ goto AHCSY1_3]   |
| Hard Edits           |   |
| Soft Edits           |   |
| AssocHelp            |   |

| Module               | 19  |
|----------------------|---|
| Section Name         | Health Care Access and Utilization  |
| Part                 | С   |
| Question ID          | AAU.141_3   |
| Variable Name        | AHCSY1_3  |
| Universe             | HHSTAT4 = 'S' and (AGE GE '018' and AGE not IN ('997', '999'))  |
| Universe-text        | Sample adults 18+   |
| Question Text        | * Read if Necessary.  |
|                      | DURING THE PAST 12 MONTHS have you seen or talked to any of the following health care providers about your own health? A foot doctor. |
| Answer Codes         | 1. Yes 2. No Refused Don't Know   |
| Question Type        | Yes/No  |
| Field Pane Descripti | on Foot doctor  |
| Fill Instructions    |   |
| Special Instructions |   |
| Skip Instructions    | <1,2,R,D>[ goto AHCSY1_4]   |
| Hard Edits           |   |
| Soft Edits           |   |
| AssocHelp            |   |

| Module               | 19   |
|----------------------|--|
| Section Name         | Health Care Access and Utilization   |
| Part                 | С  |
| Question ID          | AAU.141_4  |
| Variable Name        | AHCSY1_4   |
| Universe             | HHSTAT4 = 'S' and (AGE GE '018' and AGE not IN ('997', '999'))   |
| Universe-text        | Sample adults 18+  |
| Question Text        | * Read if Necessary.   |
|                      | DURING THE PAST 12 MONTHS have you seen or talked to any of the following health care providers about your own health? A chiropractor. |
| Answer Codes         | 1. Yes 2. No Refused Don't Know  |
| Question Type        | Yes/No   |
| Field Pane Descripti | on Chiropractor  |
| Fill Instructions    |  |
| Special Instructions |  |
| Skip Instructions    | <1,2,R,D>[ goto AHCSY1_5]  |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module               | 19   |
|----------------------|--|
| Section Name         | Health Care Access and Utilization   |
| Part                 | С  |
| Question ID          | AAU.141_5  |
| Variable Name        | AHCSY1_5   |
| Universe             | HHSTAT4 = 'S' and (AGE GE '018' and AGE not IN ('997','999'))  |
| Universe-text        | Sample adults 18+  |
| Question Text        | ? [F1}   |
|                      | * Read if Necessary.   |
|                      | DURING THE PAST 12 MONTHS have you seen or talked to any of the following health care providers about your own health? |
|                      | A physical therapist, speech therapist, respiratory therapist, audiologist, or occupational therapist.                 |
| Answer Codes         | 1. Yes 2. No Refused Don't Know  |
| Question Type        | Yes/No   |
| Field Pane Descripti | Physical/speech/resp. therapist  |
| Fill Instructions    |  |
| Special Instructions |  |
| Skip Instructions    | <1,2,R,D>[ goto AHCSY1_6]  |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            | H_AHCSY1_5   |

| Module                 | 19   |
|------------------------|--|
| Section Name           | Health Care Access and Utilization   |
| Part                   | С  |
| Question ID            | AAU.141_5_H  |
| Variable Name          | H_AHCSY1_5   |
| Universe               |  |
| Universe-text          |  |
| Question Text          | A "physical therapist" is a health care professional skilled in working with persons with health problems resulting from injury, disease, or developmental problems. A physical therapist diagnoses muscle and joint problems and provides exercises and treatments.   |
|                        | A "speech therapist" is a health care professional skilled in working with communication and language disorders. Speech pathologists diagnose speech and language problems and provide therapy including treatment for stuttering, impaired articulation, or language or voice impairment.   |
|                        | A "respiratory therapist" is a health care professional skilled in working with persons with respiratory difficulties. Respiratory therapists treat and manage the care of persons with respiratory diseases. This may include administration of breathing treatments, oxygen, and education of patients in regards to respiratory treatment procedures. |
|                        | An "audiologist" is a health care professional skilled in working with hearing problems. An audiologist diagnoses hearing problems and their nature, and determines if a person can benefit from using hearing aids.   |
|                        | An "occupational therapist" is a health care professional skilled in working with health problems resulting from injury, disease, or developmental problems. Occupational therapy involves working on functional activities such as dressing, feeding, and writing.  |
| Answer Codes           |  |
| Question Type          | Help Screen  |
| Field Pane Description | on   |
| Fill Instructions      |  |
| Special Instructions   | Associated screens: AHCSY1_5   |
| Skip Instructions      |  |
| Hard Edits             |  |
| Soft Edits             |  |
| AssocHelp              |  |

| Module               | 19  |
|----------------------|---|
| Section Name         | Health Care Access and Utilization  |
| Part                 | С   |
| Question ID          | AAU.141_6   |
| Variable Name        | AHCSY1_6  |
| Universe             | HHSTAT4 = 'S' and (AGE GE '018' and AGE not IN ('997','999'))   |
| Universe-text        | Sample adults 18+   |
| Question Text        | ? [F1}  |
|                      | * Read if Necessary.  |
|                      | DURING THE PAST 12 MONTHS have you seen or talked to any of the following health care providers about your own health?                        |
|                      | {Fill1:A nurse practitioner, physician assistant, or midwife. Or Filll2:A nurse practitioner or physician assistant.}                         |
| Answer Codes         | 1. Yes<br>2. No<br>Refused<br>Don't Know  |
| Question Type        | Yes/No  |
| Field Pane Descripti | On Nurse prac./phys. asst./midwife  |
| Fill Instructions    | fill1: If SEX=2 Fill1:A nurse practitioner, physician assistant, or midwife" Else if SEX=1 Fill2:A nurse practitioner or physician assistant. |
| Special Instructions |   |
| Skip Instructions    | <1,2,R,D>[if SEX=1goto AHCSY8_8;<br>else if SEX=2 goto AHCSYR7]   |
| Hard Edits           |   |
| Soft Edits           |   |
| AssocHelp            | H_AHCSY1_6  |

| Module               | 19   |
|----------------------|--|
| Section Name         | Health Care Access and Utilization   |
| Part                 | С  |
| Question ID          | AAU.141_6_H  |
| Variable Name        | H_AHCSY1_6   |
| Universe             |  |
| Universe-text        |  |
| Question Text        | A nurse practitioner is a registered nurse who has completed an advanced program of study leading to an expanded role in health care. Nurse practitioners are able to take health histories, perform physical examinations, order tests, and prescribe treatments including medications. Nurse practitioners work under the supervision of a doctor, but not necessarily in the presence of the doctor.  A nurse midwife is a registered nurse who has completed an advanced program of study leading to an expanded role in health care for women. Nurse midwives provide gynecological, pregnancy and delivery care to women. Nurse midwives work under the supervision of a doctor, but not necessarily in the presence of the doctor.  A physician assistant works under the supervision of a physician to provide diagnostic, preventative, and therapeutic health care services. Duties may include examining patients, interpreting and ordering x-rays and lab tests, and the diagnosis and treatment of minor injuries. |
| Answer Codes         |  |
| Question Type        | Help Screen  |
| Field Pane Descripti | on   |
| Fill Instructions    |  |
| Special Instructions | Associated screens: AHCSY1_6   |
| Skip Instructions    |  |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module               | 19   |
|----------------------|--|
| Section Name         | Health Care Access and Utilization   |
| Part                 | С  |
| Question ID          | AAU.200  |
| Variable Name        | AHCSYR7  |
| Universe             | HHSTAT4 = 'S' and (AGE GE '018' and AGE not IN ('997', '999')) and SEX = '2'   |
| Universe-text        | Sample adults 18+ who are female   |
| Question Text        | ? [F1}   |
|                      | * Read if Necessary.  DURING THE PAST 12 MONTHS have you seen or talked to any of the following health care providers about your own health? |
|                      | A doctor who specializes in women's health (an obstetrician/gynecologist).   |
| Answer Codes         | 1. Yes 2. No Refused Don't Know  |
| Question Type        | Yes/No   |
| Field Pane Descripti |  |
| Fill Instructions    |  |
| Special Instructions |  |
| Skip Instructions    | <1,2,R,D> [go to AHCSY8_8]   |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            | H_AHCSYR7  |

| Module               | 19  |
|----------------------|---|
| Section Name         | Health Care Access and Utilization  |
| Part                 | С   |
| Question ID          | AAU.200_H   |
| Variable Name        | H_AHCSYR7   |
| Universe             |   |
| Universe-text        |   |
| Question Text        | An Obstetrician/Gynecologist is a medical doctor who treats women, pregnancy, and diseases of he female reproductive system, including the breasts. |
| Answer Codes         |   |
| Question Type        | Help Screen   |
| Field Pane Descripti | on  |
| Fill Instructions    |   |
| Special Instructions | Associated screens: AHCSYR7   |
| Skip Instructions    |   |
| Hard Edits           |   |
| Soft Edits           |   |
| AssocHelp            |   |

| Module               | 19  |
|----------------------|---|
| Section Name         | Health Care Access and Utilization  |
| Part                 | С   |
| Question ID          | AAU.211_1   |
| Variable Name        | AHCSY8_8  |
| Universe             | HHSTAT4 = 'S' and (AGE GE '018' and AGE not IN ('997', '999'))  |
| Universe-text        | Sample adults 18+   |
| Question Text        | * Read if Necessary.  |
|                      | DURING THE PAST 12 MONTHS have you seen or talked to any of the following health care providers about your own health? A medical doctor who specializes in a particular medical disease or problem (other than obstetrician/gynecologist, psychiatrist, or ophthalmologist (AHF-thal-MOL-oh-jist)). |
| Answer Codes         | 1. Yes<br>2. No<br>Refused<br>Don't Know  |
| Question Type        | Yes/No  |
| Field Pane Descripti | on Specialist doctor  |
| Fill Instructions    |   |
| Special Instructions |   |
| Skip Instructions    | <1,2,R,D> [go to AHCSY8_ 9]   |
| Hard Edits           |   |
| Soft Edits           |   |
| AssocHelp            |   |

| Module               | 19   |
|----------------------|--|
| Section Name         | Health Care Access and Utilization   |
| Part                 | С  |
| Question ID          | AAU.211_2  |
| Variable Name        | AHCSY8_9   |
| Universe             | HHSTAT4 = 'S' and (AGE GE '018' and AGE not IN ('997','999'))  |
| Universe-text        | Sample adults 18+  |
| Question Text        | * Read if Necessary.   |
|                      | DURING THE PAST 12 MONTHS have you seen or talked to any of the following health care providers about your own health? A general doctor who treats a variety of illnesses (a doctor in general practice, family medicine, or internal medicine)? |
| Answer Codes         | 1. Yes 2. No Refused Don't Know  |
| Question Type        | Yes/No   |
| Field Pane Descripti | on General doctor  |
| Fill Instructions    |  |
| Special Instructions |  |
| Skip Instructions    | <1> [goto AHCSYR10]<br><2,R,D> [goto AHERNOYR]   |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module               | 19  |
|----------------------|---|
| Section Name         | Health Care Access and Utilization  |
| Part                 | С   |
| Question ID          | AAU.230   |
| Variable Name        | AHCSYR10  |
| Universe             | HHSTAT4 = 'S' and (AGE GE '018' and AGE not IN ('997','999')) and AHCSY8_9(e)='1'             |
| Universe-text        | Sample adults 18+ who have seen or talked to a general doctor during the past 12 months       |
| Question Text        | Does that doctor treat children and adults (a doctor in general practice or family medicine)? |
| Answer Codes         | 1. Yes 2. No Refused Don't Know   |
| Question Type        | Yes/No  |
| Field Pane Descripti | on Doctor treats children and adults  |
| Fill Instructions    |   |
| Special Instructions | Indent to indicate that this is a follow on from the previous question.                       |
| Skip Instructions    | <1,2,R,D> [go to AHERNOYR]  |
| Hard Edits           |   |
| Soft Edits           |   |
| AssocHelp            |   |

| Module               | 19   |
|----------------------|--|
| Section Name         | Health Care Access and Utilization   |
| Part                 | С  |
| Question ID          | AAU.240  |
| Variable Name        | AHERNOYR   |
| Universe             | HHSTAT4 = 'S' and (AGE GE '018' and AGE not IN ('997','999'))  |
| Universe-text        | Sample adults 18+  |
| Question Text        | (book) A9 ? [F1]   |
|                      | DURING THE PAST 12 MONTHS, HOW MANY TIMES have you gone to a HOSPITAL EMERGENCY ROOM about your own health (This includes emergency room visits that resulted in a hospital admission.)? |
| Answer Codes         | 0. None 1. 1 2. 2-3 3. 4-5 4. 6-7 5. 8-9 6. 10-12 7. 13-15 8. 16 or more Refused Don't Know  |
| Question Type        | Pick One - answer list pane  |
| Field Pane Descripti | Number of times in ER  |
| Fill Instructions    |  |
| Special Instructions | "Past 12 months as a header for this question as well as AAU.250 - AAU.280.  |
|                      | Indent all related Field Pane Descriptions under the heading.  |
| Skip Instructions    | <0,R,D> [go to AHCHYR]<br><1-8> [goto AERVISND]  |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            | H_AHERNOYR   |

| Module               | 19   |
|----------------------|--|
| Section Name         | Health Care Access and Utilization   |
| Part                 | С  |
| Question ID          | AAU.240_H  |
| Variable Name        | H_AHERNOYR   |
| Universe             |  |
| Universe-text        |  |
| Question Text        | Hospital Emergency Room is an emergency care facility at a hospital.   |
|                      | Do NOT include emergency care received at a clinic or HMO. Include emergency room visits which resulted in admission for inpatient care. |
|                      | Do not include visits to outpatient clinics, urgent care facilities and the like.  |
| Answer Codes         |  |
| Question Type        | Help Screen  |
| Field Pane Descripti | on   |
| Fill Instructions    |  |
| Special Instructions | Associated screens: AHERNOYR   |
| Skip Instructions    |  |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module                 | 19  |  |  |
|------------------------|---|--|--|
| Section Name           | Adult Access to Health Care & Utilization   |  |  |
| Part                   |   |  |  |
| Question ID            | AAU.243_00.010  |  |  |
| Variable Name          | AERVISND  |  |  |
| Universe               | HHSTAT4 = 'S' and (AGE GE '018' and AGE not IN ('997','999')) and ('01' <=AHERNOYR<='08')                                 |  |  |
| Universe-text          | Sample adults 18+ who had at least one ER visit in the past year  |  |  |
| Question Text          | Thinking about your most recent emergency room visit, did you go to the emergency room either at night or on the weekend? |  |  |
| Answer Codes           | 1.Yes 2. No Refused Don't know  |  |  |
| Question Type          | Yes/No  |  |  |
| Field Pane Description | Field Pane Description  |  |  |
| Fill Instructions      |   |  |  |
| Special Instructions   |   |  |  |
| Skip Instructions      | <1,2,R,D> [go to AERHOS]  |  |  |
| Hard Edits             |   |  |  |
| Soft Edits             |   |  |  |
| AssocHelp              |   |  |  |

| Module                 | 19  |  |
|------------------------|---|--|
| Section Name           | Adult Access to Health Care & Utilization   |  |
| Part                   |   |  |
| Question ID            | AAU.245_00.010  |  |
| Variable Name          | AERHOS  |  |
| Universe               | HHSTAT4 = 'S' and (AGE GE '018' and AGE not IN ('997','999')) and ('01' <=AHERNOYR<='08') |  |
| Universe-text          | Sample adults 18+ who had at least one ER visit in the past year                          |  |
| Question Text          | Did this emergency room visit result in a hospital admission?                             |  |
| Answer Codes           | 1.Yes 2. No Refused Don't know  |  |
| Question Type          | Yes/No  |  |
| Field Pane Description |   |  |
| Fill Instructions      |   |  |
| Special Instructions   |   |  |
| Skip Instructions      | <1,2,R,D> [go to AERREAS1]  |  |
| Hard Edits             |   |  |
| Soft Edits             |   |  |
| AssocHelp              |   |  |

| Module               | 19   |
|----------------------|--|
| Section Name         | Adult Access to Health Care & Utilization  |
| Part                 |  |
| Question ID          | AAU.248_01.010   |
| Variable Name        | AERREAS1   |
| Universe             | HHSTAT4 = 'S' and (AGE GE '018' and AGE not IN ('997','999')) and ('01' <=AHERNOY2 (e) <='08') |
| Universe-text        | Sample adults 18+ who had at least one ER visit in the past year                               |
| Question Text        | Tell me which of these apply to your last emergency room visit?                                |
|                      | You didn't have another place to go  |
| Answer Codes         | 1.Yes 2. No Refused Don't know   |
| Question Type        | Yes/No   |
| Field Pane Descripti | on   |
| Fill Instructions    |  |
| Special Instructions |  |
| Skip Instructions    | <1,2,R,D> [goto AERREAS2]  |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module                 | 19  |  |
|------------------------|---|--|
| Section Name           | Adult Access to Health Care & Utilization   |  |
| Part                   |   |  |
| Question ID            | AAU.248_02.020  |  |
| Variable Name          | AERREAS2  |  |
| Universe               | HHSTAT4 = 'S' and (AGE GE '018' and AGE not IN ('997','999')) and ('01' <=AHERNOY2 (e) <='08')  |  |
| Universe-text          | Sample adults 18+ who had at least one ER visit in the past year  |  |
| Question Text          | *Read if necessary  |  |
| Answer Codes           | Tell me which of these apply to your last emergency room visit? Your doctor's office or clinic was not open  1.Yes 2. No Refused Don't know |  |
| Question Type          | Yes/No  |  |
| Field Pane Description |   |  |
| Fill Instructions      |   |  |
| Special Instructions   |   |  |
| Skip Instructions      | <1,2,R,D> [goto AERREAS3]   |  |
| Hard Edits             |   |  |
| Soft Edits             |   |  |
| AssocHelp              |   |  |

| Module                 | 19   |
|------------------------|--|
| Section Name           | Adult Access to Health Care & Utilization  |
| Part                   |  |
| Question ID            | AAU.248_03.030   |
| Variable Name          | AERREAS3   |
| Universe               | HHSTAT4 = 'S' and (AGE GE '018' and AGE not IN ('997','999')) and ('01' <=AHERNOY2 (e) <='08')   |
| Universe-text          | Sample adults 18+ who had at least one ER visit in the past year   |
| Question Text          | *Read if necessary   |
| Answer Codes           | Tell me which of these apply to your last emergency room visit? Your health provider advised you to go  1.Yes 2. No Refused Don't know |
| Question Type          | Yes/No   |
| Field Pane Description | on   |
| Fill Instructions      |  |
| Special Instructions   |  |
| Skip Instructions      | <1,2,R,D> [goto AERREAS4]  |
| Hard Edits             |  |
| Soft Edits             |  |
| AssocHelp              |  |

| Module                 | 19  |
|------------------------|---|
| Section Name           | Adult Access to Health Care & Utilization   |
| Part                   |   |
| Question ID            | AAU.248_04.040  |
| Variable Name          | AERREAS4  |
| Universe               | HHSTAT4 = 'S' and (AGE GE '018' and AGE not IN ('997','999')) and ('01' <=AHERNOY2 (e) <='08')  |
| Universe-text          | Sample adults 18+ who had at least one ER visit in the past year  |
| Question Text          | *Read if necessary  |
| Answer Codes           | Tell me which of these apply to your last emergency room visit? The problem was too serious for the doctor's office or clinic  1.Yes 2. No Refused Don't know |
| Question Type          | Yes/No  |
| Field Pane Description |   |
| Fill Instructions      |   |
| Special Instructions   |   |
| Skip Instructions      | <1,2,R,D> [goto AERREAS5]   |
| Hard Edits             |   |
| Soft Edits             |   |
| AssocHelp              |   |

| Module                 | 19   |  |
|------------------------|--|--|
| Section Name           | Adult Access to Health Care & Utilization  |  |
| Part                   |  |  |
| Question ID            | AAU.248_05.050   |  |
| Variable Name          | AERREAS5   |  |
| Universe               | HHSTAT4 = 'S' and (AGE GE '018' and AGE not IN ('997','999')) and ('01' <=AHERNOY2 (e) <='08')                                 |  |
| Universe-text          | Sample adults 18+ who had at least one ER visit in the past year   |  |
| Question Text          | *Read if necessary   |  |
| Answer Codes           | Tell me which of these apply to your last emergency room visit? Only a hospital could help you  1.Yes 2. No Refused Don't know |  |
| Question Type          | Yes/No   |  |
| Field Pane Description |  |  |
| Fill Instructions      |  |  |
| Special Instructions   |  |  |
| Skip Instructions      | <1,2,R,D> [goto AERREAS6]  |  |
| Hard Edits             |  |  |
| Soft Edits             |  |  |
| AssocHelp              |  |  |

| Module                 | 19  |  |
|------------------------|---|--|
| Section Name           | Adult Access to Health Care & Utilization   |  |
| Part                   |   |  |
| Question ID            | AAU.248_06.060  |  |
| Variable Name          | AERREAS6  |  |
| Universe               | HHSTAT4 = 'S' and (AGE GE '018' and AGE not IN ('997','999')) and ('01' <=AHERNOY2 (e) <='08')  |  |
| Universe-text          | Sample adults 18+ who had at least one ER visit in the past year  |  |
| Question Text          | *Read if necessary  |  |
| Answer Codes           | Tell me which of these apply to your last emergency room visit? the emergency room is your closest provider  1.Yes 2. No Refused Don't know |  |
| Question Type          | Yes/No  |  |
| Field Pane Description |   |  |
| Fill Instructions      |   |  |
| Special Instructions   |   |  |
| Skip Instructions      | <1,2,R,D> [goto AERREAS7]   |  |
| Hard Edits             |   |  |
| Soft Edits             |   |  |
| AssocHelp              |   |  |

| Module                 | 19   |
|------------------------|--|
| Section Name           | Adult Access to Health Care & Utilization  |
| Part                   |  |
| Question ID            | AAU.248_07.070   |
| Variable Name          | AERREAS7   |
| Universe               | HHSTAT4 = 'S' and (AGE GE '018' and AGE not IN ('997','999')) and ('01' <=AHERNOY2 (e) <='08')   |
| Universe-text          | Sample adults 18+ who had at least one ER visit in the past year   |
| Question Text          | *Read if necessary   |
| Answer Codes           | Tell me which of these apply to your last emergency room visit?you get most of your care at the emergency room  1.Yes 2. No Refused Don't know |
| Question Type          | Yes/No   |
| Field Pane Description | on   |
| Fill Instructions      |  |
| Special Instructions   |  |
| Skip Instructions      | <1,2,R,D> [goto AERREAS8]  |
| Hard Edits             |  |
| Soft Edits             |  |
| AssocHelp              |  |

| Module                 | 19   |
|------------------------|--|
| Section Name           | Adult Access to Health Care & Utilization  |
| Part                   |  |
| Question ID            | AAU.248_08.080   |
| Variable Name          | AERREAS8   |
| Universe               | HHSTAT4 = 'S' and (AGE GE '018' and AGE not IN ('997','999')) and ('01' <=AHERNOY2 (e) <='08')   |
| Universe-text          | Sample adults 18+ who had at least one ER visit in the past year   |
| Question Text          | *Read if necessary   |
| Answer Codes           | Tell me which of these apply to your last emergency room visit?you arrived by ambulance or other emergency vehicle  1.Yes 2. No Refused Don't know |
| Question Type          | Yes/No   |
| Field Pane Description |  |
| Fill Instructions      |  |
| Special Instructions   |  |
| Skip Instructions      | <1,2,R,D> [goto AHCHYR]  |
| Hard Edits             |  |
| Soft Edits             |  |
| AssocHelp              |  |

| Module   | 19   |  |
|--|--|--|
| Section Name   | Health Care Access and Utilization   |  |
| Part   | С  |  |
| Question ID  | AAU.250  |  |
| Variable Name  | AHCHYR   |  |
| Universe   | HHSTAT4 = 'S' and (AGE GE '018' and AGE not IN ('997','999'))  |  |
| Universe-text  | Sample adults 18+  |  |
| Question Text  | ? [F1]   |  |
| Answer Codes   | DURING THE PAST 12 MONTHS, did you receive care AT HOME from a nurse or other health care professional?  1. Yes 2. No Refused Don't Know |  |
| Question Type  | Yes/No   |  |
| Field Pane Description Home care - nurse/hlth. prof. |  |  |
| Fill Instructions                                    |  |  |
| Special Instructions                                 |  |  |
| Skip Instructions                                    | <1>[goto AHCHMOYR]<br><2,R,D>[goto AHCNOYR]  |  |
| Hard Edits   |  |  |
| Soft Edits   |  |  |
| AssocHelp  | H_AHCHYR   |  |

| Module               | 19   |
|----------------------|--|
| Section Name         | Health Care Access and Utilization   |
| Part                 | С  |
| Question ID          | AAU.250_H  |
| Variable Name        | H_AHCHYR   |
| Universe             |  |
| Universe-text        |  |
| Question Text        | At HOME refers to the sample adult's own home and everyone else's home in which the sample adult was staying at the time. This could be a house, apartment, motor home, houseboat, trailer, or other dwelling. Do not include visits by a doctor while the sample person was in a hospital or institutionalized. |
| Answer Codes         |  |
| Question Type        | Help Screen  |
| Field Pane Descripti | on   |
| Fill Instructions    |  |
| Special Instructions | Associated screens: AHCHYR   |
| Skip Instructions    |  |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module               | 19  |
|----------------------|---|
| Section Name         | Health Care Access and Utilization  |
| Part                 | С   |
| Question ID          | AAU.260   |
| Variable Name        | AHCHMOYR  |
| Universe             | HHSTAT4 = 'S' and (AGE GE '018' and AGE not IN ('997', '999')) and AHCHYR(e) = '1'                  |
| Universe-text        | Sample adults 18+ who received home care from a health professional during the past 12 months       |
| Question Text        | ? [F1]  |
|                      | During how many of the PAST 12 MONTHS did you receive care AT HOME from a health care professional? |
| Answer Codes         |   |
| Question Type        | Integer   |
| Field Pane Descripti | Number of months  |
| Fill Instructions    |   |
| Special Instructions | Indent to indicate that this is a follow up from the previous question.                             |
| Skip Instructions    | <1-12,R,D>[goto AHCHNOYR]   |
| Hard Edits           |   |
| Soft Edits           |   |
| AssocHelp            | H_AHCHMOYR  |

| Module                 | 19   |
|------------------------|--|
| Section Name           | Health Care Access and Utilization   |
| Part                   | С  |
| Question ID            | AAU.260_H  |
| Variable Name          | H_AHCHMOYR   |
| Universe               |  |
| Universe-text          |  |
| Question Text          | At HOME refers to the sample adult's own home and everyone else's home in which the sample adult was staying at the time. This could be a house, apartment, motor home, houseboat, trailer, or other dwelling. Do not include visits by a doctor while the sample person was in a hospital or institutionalized. |
| Answer Codes           |  |
| Question Type          | Help Screen  |
| Field Pane Description | on   |
| Fill Instructions      |  |
| Special Instructions   | Associated screens: AHCHMOYR   |
| Skip Instructions      |  |
| Hard Edits             |  |
| Soft Edits             |  |
| AssocHelp              |  |

| Module               | 19   |
|----------------------|--|
| Section Name         | Health Care Access and Utilization   |
| Part                 | С  |
| Question ID          | AAU.270  |
| Variable Name        | AHCHNOYR   |
| Universe             | HHSTAT4 = 'S' and (AGE GE '018' and AGE not IN ('997', '999')) and AHCHYR(e) = '1'                             |
| Universe-text        | Sample adults 18+ who received home care from a health professional during the past 12 months                  |
| Question Text        | (book) A10   |
|                      | What was the total number of home visits received during {Fill1: that month/Fill2: those months}?              |
| Answer Codes         | 1. 1<br>2. 2-3<br>3. 4-5<br>4. 6-7<br>5. 8-9<br>6. 10-12<br>7. 13-15<br>8. 16 or more<br>Refused<br>Don't Know |
| Question Type        | Pick One - answer list pane  |
| Field Pane Descripti | Number of visits   |
| Fill Instructions    | Fill1: if [AHCHMOYR = 1] Fill2: if [AHCHMOYR NE 1]   |
| Special Instructions | Indent to indicate that this is a follow up from AAU.270.  |
| Skip Instructions    | <1-8,R,D>[goto AHCNOYR]  |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module               | 19  |
|----------------------|---|
| Section Name         | Health Care Access and Utilization  |
| Part                 | С   |
| Question ID          | AAU.280   |
| Variable Name        | AHCNOYR   |
| Universe             | HHSTAT4 = 'S' and (AGE GE '018' and AGE not IN ('997','999'))   |
| Universe-text        | Sample adults 18+   |
| Question Text        | (book) A9 ? [F1]  |
|                      | DURING THE PAST 12 MONTHS, HOW MANY TIMES have you seen a doctor or other health care professional about your own health at a DOCTOR'S OFFICE, A CLINIC, OR SOME OTHER PLACE? Do not include times you were hospitalized overnight, visits to hospital emergency rooms, home visits, dental visits, or telephone calls. |
| Answer Codes         | 0. None 1. 1 2. 2-3 3. 4-5 4. 6-7 5. 8-9 6. 10-12 7. 13-15 8. 16 or more Refused Don't Know   |
| Question Type        | Pick One - answer list pane   |
| Field Pane Descripti | on Number of office visits  |
| Fill Instructions    |   |
| Special Instructions |   |
| Skip Instructions    | <0-8,R,D>[goto ASRGYR]  |
| Hard Edits           |   |
| Soft Edits           |   |
| AssocHelp            | H_AHCNOYR   |

| Module               | 19   |
|----------------------|--|
| Section Name         | Health Care Access and Utilization   |
| Part                 | С  |
| Question ID          | AAU.280_H  |
| Variable Name        | H_AHCNOYR  |
| Universe             |  |
| Universe-text        |  |
| Question Text        | "Doctor" includes medical doctors as well as other health care professionals, such as general practitioners, psychologist, nurses, chiropractors, etc. |
| Answer Codes         |  |
| Question Type        | Help Screen  |
| Field Pane Descripti | on   |
| Fill Instructions    |  |
| Special Instructions | Associated screens: AHCNOYR  |
| Skip Instructions    |  |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module               | 19  |
|----------------------|---|
| Section Name         | Health Care Access and Utilization  |
| Part                 | С   |
| Question ID          | AAU.290   |
| Variable Name        | ASRGYR  |
| Universe             | HHSTAT4 = 'S' and (AGE GE '018' and AGE not IN ('997', '999'))  |
| Universe-text        | Sample adults 18+   |
| Question Text        | DURING THE PAST 12 MONTHS, have you had SURGERY or other surgical procedures either as an inpatient or outpatient?    |
|                      | * Read if necessary: This includes both major surgery and minor procedures such as setting bones or removing growths. |
| Answer Codes         | 1. Yes 2. No Refused Don't Know   |
| Question Type        | Yes/No  |
| Field Pane Descripti | Surgery/surgical procedures   |
| Fill Instructions    |   |
| Special Instructions | "Past 12 months as a header for this question as well as AAU.300 and AAU.305.   |
|                      | Indent all related Field Pane Descriptions under the heading.   |
| Skip Instructions    | <1>[goto ASRGNOYR]<br><2,R,D> [goto AMDLONG].   |
| Hard Edits           |   |
| Soft Edits           |   |
| AssocHelp            |   |

| Module               | 19   |
|----------------------|--|
| Section Name         | Health Care Access and Utilization   |
| Part                 | С  |
| Question ID          | AAU.300  |
| Variable Name        | ASRGNOYR   |
| Universe             | HHSTAT4 = 'S' and (AGE GE '018' and AGE not IN ('997','999')) and ASRGYR(e) = '1'  |
| Universe-text        | Sample adults 18+ who had surgery or surgical procedures during past 12 months   |
| Question Text        | Including any times you may have already told me about, HOW MANY DIFFERENT TIMES have you had surgery during the PAST 12 MONTHS? |
|                      | * Enter "95" for 95 or more times.   |
| Answer Codes         |  |
| Question Type        | Integer  |
| Field Pane Descripti | on Number of surgeries   |
| Fill Instructions    |  |
| Special Instructions | Indent to indicate that this is a follow up to the previous question.  |
| Skip Instructions    | <1-95,R,D> [goto AMDLONG].<br><11-95>[goto ERR_ASGYR]  |
| Hard Edits           |  |
| Soft Edits           | * {ASRGYR} is an unusually large number.   |
|                      | * Please verify.   |
| AssocHelp            |  |

| Module               | 19  |
|----------------------|---|
| Section Name         | Health Care Access and Utilization  |
| Part                 | С   |
| Question ID          | AAU.305   |
| Variable Name        | AMDLONG   |
| Universe             | HHSTAT4 = 'S' and (AGE GE '018' and AGE not IN ('997','999'))   |
| Universe-text        | Sample adults 18+   |
| Question Text        | (book) A8 ? [F1]  |
|                      | About how long has it been since you last saw or talked to a doctor or other health care professional about your own health? Include doctors seen while a patient in a hospital.  |
| Answer Codes         | <ol> <li>Never</li> <li>6 months or less</li> <li>More than 6 months but not more than 1 year ago</li> <li>More than 1 year, but not more than 2 years ago</li> <li>More than 2 years, but not more than 5 years ago</li> <li>More than 5 years ago</li> <li>Refused         Don't Know     </li> </ol> |
| Question Type        | Pick One - answer list pane   |
| Field Pane Descripti | Last saw/talked with doctor/hlth. prof.   |
| Fill Instructions    |   |
| Special Instructions | Answer name on the right.   |
| Skip Instructions    | <0-5,R,D> [goto HIT1A]  |
| Hard Edits           |   |
| Soft Edits           |   |
| AssocHelp            | H_AMDLONG   |

| Module               | 19  |
|----------------------|---|
| Section Name         | Health Care Access and Utilization  |
| Part                 | С   |
| Question ID          | AAU.305_H   |
| Variable Name        | H_AMDLONG   |
| Universe             |   |
| Universe-text        |   |
| Question Text        | "Medical doctor" refers to both medical doctors (M.D.s) and osteopathic physicians (D.O.s), including general practitioners and all types of specialists; and their assistants. Do not include person who do not have an M.D. or D.O. degree, such as dentists, oral surgeons, chiropractors, chiropodists, podiatrists, naturopaths, Christian Science healers, opticians, optometrists, psychologists, etc., unless they assist an M.D. or D.O. |
| Answer Codes         |   |
| Question Type        | Help Screen   |
| Field Pane Descripti | on  |
| Fill Instructions    |   |
| Special Instructions | Associated screens: AMDLONG   |
| Skip Instructions    |   |
| Hard Edits           |   |
| Soft Edits           |   |
| AssocHelp            |   |

| Module               | 19   |
|----------------------|--|
| Section Name         | Adult Access to Health Care & Utilization  |
| Part                 |  |
| Question ID          | AAU.309_00.010   |
| Variable Name        | HIT1A  |
| Universe             | HHSTAT4 = 'S' and (AGE GE '018' and AGE not IN ('997', '999'))                   |
| Universe-text        | Sample adults 18+  |
| Question Text        | DURING THE PAST 12 MONTHS, have you ever used computers for any of the following |
|                      | Look up health information on the Internet.                                      |
| Answer Codes         | 1.Yes 2. No Refused Don't know   |
| Question Type        | Yes/No   |
| Field Pane Descripti | on   |
| Fill Instructions    |  |
| Special Instructions |  |
| Skip Instructions    | <1,2,R,D> [goto HIT2A]   |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module                 | 19  |
|------------------------|---|
| Section Name           | Adult Access to Health Care & Utilization   |
| Part                   |   |
| Question ID            | AAU.309_00.020  |
| Variable Name          | HIT2A   |
| Universe               | HHSTAT4 = 'S' and (AGE GE '018' and AGE not IN ('997', '999'))  |
| Universe-text          | Sample adults 18+   |
| Question Text          | *Read if necessary  |
| Answer Codes           | DURING THE PAST 12 MONTHS, have you ever used computers for any of the followingFill a prescription.  1.Yes 2. No Refused |
|                        | Don't know  |
| Question Type          | Yes/No  |
| Field Pane Description | on  |
| Fill Instructions      |   |
| Special Instructions   |   |
| Skip Instructions      | <1,2,R,D> [goto HIT3A]  |
| Hard Edits             |   |
| Soft Edits             |   |
| AssocHelp              |   |

| Module               | 19   |
|----------------------|--|
| Section Name         | Adult Access to Health Care & Utilization  |
| Part                 |  |
| Question ID          | AAU.309_00.030   |
| Variable Name        | HIT3A  |
| Universe             | HHSTAT4 = 'S' and (AGE GE '018' and AGE not IN ('997', '999'))   |
| Universe-text        | Sample adults 18+  |
| Question Text        | *Read if necessary   |
| Answer Codes         | DURING THE PAST 12 MONTHS, have you ever used computers for any of the followingSchedule an appointment with a health care provider.  1.Yes 2. No Refused Don't know |
| Question Type        | Yes/No   |
| Field Pane Descripti | on   |
| Fill Instructions    |  |
| Special Instructions |  |
| Skip Instructions    | <1,2,R,D> [goto HIT4A]   |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module                 | 19   |
|------------------------|--|
| Section Name           | Adult Access to Health Care & Utilization  |
| Part                   |  |
| Question ID            | AAU.309_00.040   |
| Variable Name          | HIT4A  |
| Universe               | HHSTAT4 = 'S' and (AGE GE '018' and AGE not IN ('997', '999'))   |
| Universe-text          | Sample adults 18+  |
| Question Text          | *Read if necessary   |
| Answer Codes           | DURING THE PAST 12 MONTHS, have you ever used computers for any of the followingCommunicate with a health care provider by email.  1.Yes 2. No Refused |
|                        | Don't know   |
| Question Type          | Yes/No   |
| Field Pane Description | on   |
| Fill Instructions      |  |
| Special Instructions   |  |
| Skip Instructions      | <1,2,R,D> [goto HIT5A]   |
| Hard Edits             |  |
| Soft Edits             |  |
| AssocHelp              |  |

| Module                 | 19   |
|------------------------|--|
| Section Name           | Adult Access to Health Care & Utilization  |
| Part                   |  |
| Question ID            | AAU.309_00.050   |
| Variable Name          | HIT5A  |
| Universe               | HHSTAT4 = 'S' and (AGE GE '018' and AGE not IN ('997', '999'))   |
| Universe-text          | Sample adults 18+  |
| Question Text          | *Read if necessary   |
| Answer Codes           | DURING THE PAST 12 MONTHS, have you ever used computers for any of the followingUse online chat groups to learn about health topics.  1.Yes 2. No Refused Don't know |
| Question Type          | Yes/No   |
| Field Pane Description | on   |
| Fill Instructions      |  |
| Special Instructions   |  |
| Skip Instructions      | <1,2,R,D> [goto SHTFLUYR]  |
| Hard Edits             |  |
| Soft Edits             |  |
| AssocHelp              |  |

| Module                 | 19  |
|------------------------|---|
| Section Name           | Health Care Access and Utilization  |
| Part                   | D   |
| Question ID            | AAU.310   |
| Variable Name          | SHTFLUYR  |
| Universe               | HHSTAT4 = 'S' and (AGE GE '018' and AGE not IN ('997', '999'))  |
| Universe-text          | Sample adults 18+   |
| Question Text          | ?[F1]   |
|                        | DURING THE PAST 12 MONTHS, have you had a flu shot? A flu shot is usually given in the fall and protects against influenza for the flu season.  * Read if necessary: A flu shot is injected in the arm. Do not include an influenza |
|                        | vaccine sprayed in the nose.  |
| Answer Codes           | 1. Yes 2. No Refused Don't Know   |
| Question Type          | Yes/No  |
| Field Pane Description | on Flu shot - past 12 mo.   |
| Fill Instructions      |   |
| Special Instructions   |   |
| Skip Instructions      | <1> [goto ASHFLU_M]<br><2,R,D> [ goto SPRFLUYR ]  |
| Hard Edits             |   |
| Soft Edits             |   |
| AssocHelp              | H_SHTFLUYR  |

| Module                 | 19   |
|------------------------|--|
| Section Name           | Adult Access to Health Care & Utilization  |
| Part                   |  |
| Question ID            | AAU.310_H  |
| Variable Name          | H_SHTFLUYR   |
| Universe               | SHTFLUYR   |
| Universe-text          |  |
| Question Text          | This includes a new type of flu shot called the Fluzone Intradermal vaccine that features an ultra-fine needle that is 90 percent shorter than the typical needle used for flu injections. |
| Answer Codes           |  |
| Question Type          | Help Screen  |
| Field Pane Description | on   |
| Fill Instructions      |  |
| Special Instructions   | Associated Screen:<br>SHTFLUYR   |
| Skip Instructions      |  |
| Hard Edits             |  |
| Soft Edits             |  |
| AssocHelp              |  |

| Module               | 19   |
|----------------------|--|
| Section Name         | Health Care Access and Utilization   |
| Part                 | D  |
| Question ID          | AAU.312_1  |
| Variable Name        | ASHFLU_M   |
| Universe             | HHSTAT4 = 'S' and (AGE GE '018' and AGE not IN ('997','999')) and SHTFLUYR(e)='1'  |
| Universe-text        | Sample adults 18+ who have had a flu shot  |
| Question Text        | 1 of 2   |
|                      | During what month and year did you receive your most recent flu shot?  |
| Answer Codes         | 1. January 2. February 3. March 4. April 5. May 6. June 7. July 8. August 9. September 10. October 11. November 12. December Refused Don't Know  |
| Question Type        | Pick One - answer list pane  |
| Field Pane Descripti | Flu shot-month   |
| Fill Instructions    |  |
| Special Instructions |  |
| Skip Instructions    | <1-12,D> [ goto ASHFLU_Y] <r> if PREGNOW=1 and INTERVIEW_MONTH=1-3,8-12 [goto FLUSHPG1]; else if PREGNOW=1 and INTERVIEW_MONTH=4-7 or PREGFLYR=1 [goto FLUSHPG2]; else [goto SPRFLUYR]</r> |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module                 | 19   |
|------------------------|--|
| Section Name           | Health Care Access and Utilization   |
| Part                   | D  |
| Question ID            | AAU.312_2  |
| Variable Name          | ASHFLU_Y   |
| Universe               | HHSTAT4 = 'S' and AGE GE 18 and ('01' <= ASHFLU_M <= '12','99')  |
| Universe-text          | Sample adults 18+ who gave a month for their last flu shot or who didn't know the month  |
| Question Text          | 2 of 2   |
|                        | *Enter year of most recent flu shot.   |
| Answer Codes           |  |
| Question Type          | Integer  |
| Field Pane Description | Flu shot-year  |
| Fill Instructions      |  |
| Special Instructions   |  |
| Skip Instructions      | <pre><valid year,r,d=""> if PREGNOW=1 andINTERVIEW_MONTH=1-3,8-12 [goto FLUSHPG1]; else if PREGNOW=1 and INTERVIEW_MONTH=4-7 or PREGFLYR=1 [goto FLUSHPG2]; else [goto SPRFLUYR]  [If ASHFLU_M and ASHFLU_Y = a future date [goto ERR1_ASHFLU_Y] [If ASHFLU_M and ASHFLU_Y = a date prior to birth [goto ERR2_ASHFLU_Y ] [If ASHFLU_M and ASHFLU_Y = a date before 12 months ago [goto ERR3_ASHFLU_Y ]</valid></pre> |
| Hard Edits             | ERR1_ASHFLU_Y  |
|                        | *Future date invalid   |
|                        | ERR2_ASHFLU_Y  |
|                        | *Date before birth   |
|                        | ERR3_ASHFLU_Y  |
|                        | *Date more than 12 months ago  |
| Soft Edits             |  |
| AssocHelp              |  |

| Module               | 19   |
|----------------------|--|
| Section Name         | Health Care Access and Utilization   |
| Part                 |  |
| Question ID          | AAU.313_00.000   |
| Variable Name        | FLUSHPG1   |
| Universe             | HHSTAT4='S' and ('018' <= AGE <= '049') and SEX = '2' and SHTFLUYR(e)='1' and PREGNOW(e)='1' and INTERVIEW_MONTH(e) IN ('01','02','03','08','09','10','11','12') |
| Universe-text        | Female sample adults 18-49 who are currently pregnant and are interviewed January-March or August-December   |
| Question Text        | Did you get a flu shot before or during your current pregnancy?  |
| Answer Codes         | Before this pregnancy     During this pregnancy     Refused     Don't Know   |
| Question Type        | Pick One - answer list pane  |
| Field Pane Descripti | On Current pregnancy flu shot  |
| Fill Instructions    |  |
| Special Instructions |  |
| Skip Instructions    | <1-3,R,D> [goto SPRFLUYR]  |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module               | 19  |
|----------------------|---|
| Section Name         | Health Care Access and Utilization  |
| Part                 |   |
| Question ID          | AAU.314_00.000  |
| Variable Name        | FLUSHPG2  |
| Universe             | HHSTAT4='S' and ('018' <= AGE <= '049') and SEX = '2' and SHTFLUYR(e)='1' and PREGFLYR(e)='1'   |
| Universe-text        | Female sample adults 18-49 who are currently pregnant and were interviewed April-<br>July or who have been determined to be pregnant at a specific point in the past year   |
| Question Text        | [Fill1: Earlier you said you were pregnant sometime since August 1st, [last year]. Did you get a flu shot before, during or after this pregnancy?/  Earlier you said you were pregnant sometime between August [last year] and March [current year].  Did you get a flu shot before, during or after this pregnancy?/ |
|                      | Earlier you said you were pregnant sometime between August [last year] and March [current year].  Did you get a flu shot before, during or after this pregnancy?/   |
| Answer Codes         | 1. Before this pregnancy 2. During this pregnancy 3. After this pregnancy Refused Don't Know  |
| Question Type        | Pick One - answer list pane   |
| Field Pane Descripti | Recent pregnancy flu shot   |
| Fill Instructions    | IF INTERVIEW_MONTH = 1,2,3 THEN   |
|                      | fill: Earlier you said you were pregnant sometime since August 1st, [fill: LASTYEAR]. Did you get a flu shot before, during or after this pregnancy?  |
|                      | ELSE IF INTERVIEW_MONTH = 4,5,6,7 THEN  |
|                      | fill: Earlier you said you were pregnant sometime between August [fill: LASTYEAR] and March [fill: CURYEAR]. Did you get a flu shot before, during or after this pregnancy?   |
|                      | ELSE  |
|                      | fill: Earlier you said you were pregnant sometime since August 1st, [fill: CURYEAR]. Did you get a flu shot before, during or after this pregnancy?   |
| Special Instructions |   |
| Skip Instructions    | <1-3,R,D> [goto SPRFLUYR]   |
| Hard Edits           |   |
| Soft Edits           |   |

| AssocHelp            |  |
|----------------------|--|
| Module               | 19   |
| Section Name         | Health Care Access and Utilization   |
| Part                 | D  |
| Question ID          | AAU.315  |
| Variable Name        | SPRFLUYR   |
| Universe             | HHSTAT4 = 'S' and (AGE GE '018' and AGE not IN ('997', '999'))   |
| Universe-text        | Sample adults 18+  |
| Question Text        | DURING THE PAST 12 MONTHS, have you had a flu vaccine sprayed in your nose by a doctor or other health professional? A health professional may have let you spray it. This vaccine is usually given in the fall and protects against influenza for the flu season. |
| Answer Codes         | * Read if necessary: This influenza vaccine is called FluMist (trademark).  1. Yes 2. No Refused Don't Know  |
| Question Type        | Yes/No   |
| Field Pane Descripti | Flu spray - past 12 mo.  |
| Fill Instructions    |  |
| Special Instructions |  |
| Skip Instructions    | <1> [goto ASPFLU_M]   [if SHTFLUYR =1 and SPRFLUYR=1] goto ERR1_SPRFLUYR   [if AGE GE 50] goto ERR2_SPRFLUYR   <2,D,R> [goto SHTPNUYR]   |
| Hard Edits           |  |
| Soft Edits           | ERR1_SPRFLUYR  |
|                      | *Respondent says they have received both a flu shot and flu nasal vaccine. *Please verify.   |
|                      | ERR2_SPRFLUYR  |
|                      | *Respondent says they have received a nasal vaccine to PREVENT the flu, not to TREAT symptoms of the flu.  |
|                      | *Please verify.  |
| AssocHelp            |  |

| Module               | 19  |
|----------------------|---|
| Section Name         | Health Care Access and Utilization  |
| Part                 | D   |
| Question ID          | AAU.318_1   |
| Variable Name        | ASPFLU_M  |
| Universe             | HHSTAT4 = 'S' and (AGE GE '018' and AGE not IN ('997', '999')) and SPRFLUYR(e)='1'  |
| Universe-text        | Sample adults 18+ who have had a flu nasal vaccine  |
| Question Text        | 1 of 2  |
|                      | During what month and year did you receive your most recent flu nasal spray?  |
| Answer Codes         | 1. January 2. February 3. March 4. April 5. May 6. June 7. July 8. August 9. September 10. October 11. November 12. December Refused Don't Know |
| Question Type        | Pick One - answer list pane   |
| Field Pane Descripti | Flu spray - past 12 mo.   |
| Fill Instructions    |   |
| Special Instructions |   |
| Skip Instructions    | <1-12,D> [ goto ASPFLU_Y]<br><r> [goto SHTPNUYR]</r>  |
| Hard Edits           |   |
| Soft Edits           |   |
| AssocHelp            |   |

| Module                 | 19   |   |
|------------------------|--|---|
| Section Name           | Health Care Access and Utilization                       | n   |
| Part                   | D  |   |
| Question ID            | AAU.318_2  |   |
| Variable Name          | ASPFLU_Y   |   |
| Universe               | HHSTAT4 = 'S' and (AGE GE '018<br>ASPFLU_M <= '12','99') | ' and AGE not IN ('997','999')) and ('01' <=  |
| Universe-text          | Sample adults 18+ who gave a momenth                     | onth for their flu nasal vaccine or who didn't know the   |
| Question Text          | 2 of 2   |   |
|                        | *Enter year of most recent flu nasa                      | al spray.   |
| Answer Codes           |  |   |
| Question Type          | Integer  |   |
| Field Pane Description | on Flu spray-year  |   |
| Fill Instructions      |  |   |
| Special Instructions   |  |   |
| Skip Instructions      | If ASPFLU_M and ASPFLU_Y = a                             | 'R] I future date] goto ERR1_ASPFLU_Y I date prior to birth] goto ERR2_ASPFLU_Y I date before 12 months ago] goto ERR3_ASPFLU_Y |
| Hard Edits             | ERR1_ASPFLU_Y  |   |
|                        | *Future date invalid                                     |   |
|                        | ERR2_ASPFLU_Y  |   |
|                        | *Date before birth                                       |   |
|                        | ERR3_ASPFLU_Y  |   |
|                        | *Date more than 12 months ago                            |   |
| Soft Edits             |  |   |
| AssocHelp              |  |   |

| Module               | 19   |
|----------------------|--|
| Section Name         | Health Care Access and Utilization   |
| Part                 | D  |
| Question ID          | AAU.320  |
| Variable Name        | SHTPNUYR   |
| Universe             | HHSTAT4 = 'S' and (AGE GE '018' and AGE not IN ('997','999'))  |
| Universe-text        | Sample adults 18+  |
| Question Text        | Have you EVER had a pneumonia shot?  |
| Answer Codes         | This shot is usually given only once or twice in a person's lifetime and is different from the flu shot. It is also called the pneumococcal vaccine.  1. Yes 2. No |
|                      | Refused<br>Don't Know  |
| Question Type        | Yes/No   |
| Field Pane Descripti | on Pneumonia shot - ever   |
| Fill Instructions    |  |
| Special Instructions |  |
| Skip Instructions    | <1,2,R,D> [goto APOX]  |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module               | 19  |
|----------------------|---|
| Section Name         | Health Care Access and Utilization                            |
| Part                 | D   |
| Question ID          | AAU.330   |
| Variable Name        | APOX  |
| Universe             | HHSTAT4 = 'S' and (AGE GE '018' and AGE not IN ('997','999')) |
| Universe-text        | Sample adults 18+   |
| Question Text        | Have you EVER had chickenpox?                                 |
| Answer Codes         | 1. Yes<br>2. No<br>Refused<br>Don't Know                      |
| Question Type        | Yes/No  |
| Field Pane Descripti | on Chickenpox - ever  |
| Fill Instructions    |   |
| Special Instructions |   |
| Skip Instructions    | <1> [goto APOX12MO]<br><2,R,D> [goto AHEP]                    |
| Hard Edits           |   |
| Soft Edits           |   |
| AssocHelp            |   |

| Module               | 19  |
|----------------------|---|
| Section Name         | Health Care Access and Utilization  |
| Part                 | D   |
| Question ID          | AAU.340   |
| Variable Name        | APOX12MO  |
| Universe             | HHSTAT4 = 'S' and (AGE GE '018' and AGE not IN ('997','999')) and APOX(e)='1' |
| Universe-text        | Sample adults 18+ who have ever had chickenpox                                |
| Question Text        | Have you had chickenpox in the PAST 12 MONTHS?                                |
| Answer Codes         | 1. Yes<br>2. No<br>Refused<br>Don't Know                                      |
| Question Type        | Yes/No  |
| Field Pane Descripti | on Chickenpox - past 12 mo.   |
| Fill Instructions    |   |
| Special Instructions | Indent to indicate that this is a follow up to the previous question.         |
| Skip Instructions    | <1,2,R,D> [goto AHEP]   |
| Hard Edits           |   |
| Soft Edits           |   |
| AssocHelp            |   |

| Module                 | 19  |
|------------------------|---|
| Section Name           | Health Care Access and Utilization                            |
| Part                   | D   |
| Question ID            | AAU.350   |
| Variable Name          | AHEP  |
| Universe               | HHSTAT4 = 'S' and (AGE GE '018' and AGE not IN ('997','999')) |
| Universe-text          | Sample adults 18+   |
| Question Text          | Have you EVER had hepatitis?                                  |
| Answer Codes           | 1. Yes 2. No Refused Don't Know                               |
| Question Type          | Yes/No  |
| Field Pane Description | on Hepatitis - ever   |
| Fill Instructions      |   |
| Special Instructions   |   |
| Skip Instructions      | <1> [goto AHEPBTST]<br><2,R,D> [goto AHEPLIV]                 |
| Hard Edits             |   |
| Soft Edits             |   |
| AssocHelp              |   |

| Module   | 19  |
|--|---|
| Section Name   | Health Care Access and Utilization  |
| Part   | D   |
| Question ID  | AAU.360   |
| Variable Name  | AHEPLIV   |
| Universe   | HHSTAT4 = 'S' and (AGE GE '018' and AGE not IN ('997','999')) and AHEP(e) IN('2','7','9') |
| Universe-text  | Sample adults 18+ who have never had hepatitis; Ref/DK if ever had hepatitis              |
| Question Text  | Have you ever lived with someone who had hepatitis?                                       |
| Answer Codes   | 1. Yes 2. No Refused Don't Know   |
| Question Type  | Yes/No  |
| Field Pane Description Lived w/ someone w/ hepatitis |   |
| Fill Instructions                                    |   |
| Special Instructions                                 | Indent to indicate that this is a follow up to the previous question.                     |
| Skip Instructions                                    | <1,2,R,D> [goto AHEPBTST]   |
| Hard Edits   |   |
| Soft Edits   |   |
| AssocHelp  |   |

| Module                 | 19  |
|------------------------|---|
| Section Name           | Health Care Access and Utilization                            |
| Part                   | D   |
| Question ID            | AAU.365_00.010  |
| Variable Name          | AHEPBTST  |
| Universe               | HHSTAT4 = 'S' and (AGE GE '018' and AGE not IN ('997','999')) |
| Universe-text          | Sample adults 18+   |
| Question Text          | Have you ever had a blood test for hepatitis B?               |
| Answer Codes           | 1. Yes<br>2. No<br>Refused<br>Don't Know                      |
| Question Type          | Yes/No  |
| Field Pane Description | on Tested for hepatitis B                                     |
| Fill Instructions      |   |
| Special Instructions   |   |
| Skip Instructions      | <1,2,R,D> [goto SHTHEPB]                                      |
| Hard Edits             |   |
| Soft Edits             |   |
| AssocHelp              |   |

| Module               | 19  |
|----------------------|---|
| Section Name         | Health Care Access and Utilization  |
| Part                 | D   |
| Question ID          | AAU.370   |
| Variable Name        | SHTHEPB   |
| Universe             | HHSTAT4 = 'S' and (AGE GE '018' and AGE not IN ('997','999'))   |
| Universe-text        | Sample adults 18+   |
| Question Text        | Have you EVER received the hepatitis B vaccine?   |
| Answer Codes         | * Read if necessary: This is given in three separate doses and has been available since 1991. It is recommended for newborn infants, adolescents, and people such as health care workers, who may be exposed to the hepatitis B virus.  1. Yes 2. No Refused Don't Know |
| Question Type        | Yes/No  |
| Field Pane Descripti | On Hepatitis B vaccine - ever   |
| Fill Instructions    |   |
| Special Instructions |   |
| Skip Instructions    | <1> [goto SHEPDOS]<br><2,R,D> [goto SHTHEPA]  |
| Hard Edits           |   |
| Soft Edits           |   |
| AssocHelp            |   |

| Module               | 19  |  |  |
|----------------------|---|--|--|
| Section Name         | Health Care Access and Utilization  |  |  |
| Part                 | D   |  |  |
| Question ID          | AAU.380   |  |  |
| Variable Name        | SHEPDOS   |  |  |
| Universe             | HHSTAT4 = 'S' and (AGE GE '018' and AGE not IN ('997', '999')) and SHTHEPB(e) = '1' |  |  |
| Universe-text        | Sample adults 18+ who have ever received the Hepatitis B vaccine                    |  |  |
| Question Text        | Did you receive at least 3 doses of the hepatitis B vaccine, or less than 3 doses?  |  |  |
| Answer Codes         | Received at least 3 doses     Received less than 3 doses     Refused     Don't Know |  |  |
| Question Type        | Pick One - answer list pane   |  |  |
| Field Pane Descripti | On Hepatitis B vaccine - # of doses   |  |  |
| Fill Instructions    |   |  |  |
| Special Instructions | Indent to indicate that this is a follow up to the previous question.               |  |  |
|                      | Answer name on the right.   |  |  |
| Skip Instructions    | <1,2,R,D> [goto SHTHEPA]  |  |  |
| Hard Edits           |   |  |  |
| Soft Edits           |   |  |  |
| AssocHelp            |   |  |  |

| Module                 | 19   |
|------------------------|--|
| Section Name           | Health Care Access and Utilization   |
| Part                   | D  |
| Question ID            | AAU.390.010  |
| Variable Name          | SHTHEPA  |
| Universe               | HHSTAT4 = 'S' and (AGE GE '018' and AGE not IN ('997', '999'))   |
| Universe-text          | Sample adults 18+  |
| Question Text          | The hepatitis A vaccine is given as a two dose series routinely to some children starting at 1 year of age, and to some adults and people who travel outside the United States. Although it can be given as a combination vaccine with hepatitis B, it is different from the hepatitis B shot, and has only been available since 1995. Have you ever received the hepatitis A vaccine? |
| Answer Codes           | 1. Yes 2. No Refused Don't Know  |
| Question Type          | Yes/No   |
| Field Pane Description | on Had Hep A vaccine   |
| Fill Instructions      |  |
| Special Instructions   |  |
| Skip Instructions      | <1> goto SHEPANUM<br><2,R,D> [goto AHEPCTST]   |
| Hard Edits             |  |
| Soft Edits             |  |
| AssocHelp              |  |

| Module                 | 19   |
|------------------------|--|
| Section Name           | Health Care Access and Utilization   |
| Part                   | D  |
| Question ID            | AAU.400.010  |
| Variable Name          | SHEPANUM   |
| Universe               | HHSTAT4 = 'S' and (AGE GE '018' and AGE not IN ('997','999')) and SHTHEPA(e)='1' |
| Universe-text          | Sample adults 18+ who have had a hepatitis A vaccine                             |
| Question Text          | How many hepatitis A shots did you receive?                                      |
|                        | *Enter '96' if all shots were received   |
| Answer Codes           |  |
| Question Type          | Integer  |
| Field Pane Description | Number of Hep A shots  |
| Fill Instructions      |  |
| Special Instructions   |  |
| Skip Instructions      | <1-95,96,R,D> [goto AHEPCTST]  |
| Hard Edits             |  |
| Soft Edits             |  |
| AssocHelp              |  |

| Module  | 19   |  |  |
|---|--|--|--|
| Section Name                                  | Health Care Access and Utilization   |  |  |
| Part  | D  |  |  |
| Question ID                                   | AAU.405_00.010   |  |  |
| Variable Name                                 | AHEPCTST   |  |  |
| Universe                                      | HHSTAT4 = 'S' and (AGE GE '018' and AGE not IN ('997','999'))                            |  |  |
| Universe-text                                 | Sample adults 18+  |  |  |
| Question Text                                 | Have you ever had a blood test for hepatitis C?  |  |  |
| Answer Codes                                  | 1. Yes 2. No Don't know Refused  |  |  |
| Question Type                                 | Yes/No   |  |  |
| Field Pane Description Tested for hepatitis C |  |  |  |
| Fill Instructions                             |  |  |  |
| Special Instructions                          |  |  |  |
| Skip Instructions                             | <1> [goto AHEPCRES]<br><2,R,D> if AGE GE 50 goto SHINGLES<br>elseif AGE LT 50 goto SHTTD |  |  |
| Hard Edits                                    |  |  |  |
| Soft Edits                                    |  |  |  |
| AssocHelp                                     |  |  |  |

| Module                 | 19  |  |  |  |
|------------------------|---|--|--|--|
| Section Name           | Health Care Access and Utilization  |  |  |  |
| Part                   | D   |  |  |  |
| Question ID            | AAU.405_00.020  |  |  |  |
| Variable Name          | AHEPCRES  |  |  |  |
| Universe               | HHSTAT4 = 'S' and (AGE GE '018' and AGE not IN ('997','999')) and AHEPCTST(e)='1'   |  |  |  |
| Universe-text          | Sample adults 18+ who have had a blood test for hepatitis C   |  |  |  |
| Question Text          | What is the MAIN reason you were tested for hepatitis C? Was it because   |  |  |  |
|                        | *Read answer categories below.  |  |  |  |
| Answer Codes           | <ol> <li>You or your doctor thought you were at risk of having hepatitis C because a blood tests or symptoms like fatigue, nausea, stomach pain, yellowing of the eyes or skin indicated you might have liver disease?</li> <li>You were born from 1945 through 1965</li> <li>You were at risk of hepatitis C infection due to exposure of blood on your job, injection drug use or receipt of transfusion before 1992</li> <li>Some other reason Refused Don't know</li> </ol> |  |  |  |
| Question Type          | Pick One - answer list pane   |  |  |  |
| Field Pane Description | n Reason for test   |  |  |  |
| Fill Instructions      |   |  |  |  |
| Special Instructions   |   |  |  |  |
| Skip Instructions      | <1-4,R,D> if AGE GE 50 [goto SHINGLES];<br>elseif AGE LT 50 goto SHTTD  |  |  |  |
| Hard Edits             |   |  |  |  |
| Soft Edits             |   |  |  |  |
| AssocHelp              |   |  |  |  |

| Module               | 19   |
|----------------------|--|
| Section Name         | Health Care Access and Utilization   |
| Part                 | D  |
| Question ID          | AAU.410.010  |
| Variable Name        | SHINGLES   |
| Universe             | HHSTAT4 = 'S' and (AGE GE '050' and AGE not IN ('997','999'))  |
| Universe-text        | Sample adults 50+  |
| Question Text        | Shingles is an outbreak of a rash or blisters on the skin that may be associated with severe pain. The pain is generally on one side of the body or face. Shingles is caused by the chicken pox virus. A vaccine for shingles has been available since May 2006. Have you ever had the Zoster (ZOSS-ter) or Shingles vaccine, also called Zostavax®? |
| Answer Codes         | 1. Yes 2. No Refused Don't know  |
| Question Type        | Yes/No   |
| Field Pane Descripti | On Had shingles vaccine  |
| Fill Instructions    |  |
| Special Instructions |  |
| Skip Instructions    | <1,2,R,D> goto SHTTD   |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module   | 19  |  |  |
|--|---|--|--|
| Section Name   | Health Care Access and Utilization  |  |  |
| Part   | D   |  |  |
| Question ID  | AAU.420.010   |  |  |
| Variable Name  | SHTTD   |  |  |
| Universe   | HHSTAT4 = 'S' and (AGE GE '018' and AGE not IN ('997','999'))                                     |  |  |
| Universe-text  | Sample adults 18+   |  |  |
| Question Text  | Have you received a tetanus shot in the past 10 years?  |  |  |
| Answer Codes   | 1. Yes 2. No Refused Don't Know   |  |  |
| Question Type  | Yes/No  |  |  |
| Field Pane Description Had tetanus shot, past 10 years |   |  |  |
| Fill Instructions                                      |   |  |  |
| Special Instructions                                   |   |  |  |
| Skip Instructions                                      | <1> goto SHTTD05<br><2,R,D> and AGE >64 [goto LIVEV]<br>Else if <2,R,D> and AGE<65 [goto SHTHPV2] |  |  |
| Hard Edits   |   |  |  |
| Soft Edits   |   |  |  |
| AssocHelp  |   |  |  |

| Module                                       | 19   |  |  |
|--|--|--|--|
| Section Name                                 | Health Care Access and Utilization   |  |  |
| Part   | D  |  |  |
| Question ID                                  | AAU.430.010  |  |  |
| Variable Name                                | SHTTD05  |  |  |
| Universe                                     | HHSTAT4 = 'S' and (AGE GE '018' and AGE not IN ('997','999')) and SHTTD(e)='1'     |  |  |
| Universe-text                                | Sample adults 18+ who have had a tetanus shot in the past 10 years                 |  |  |
| Question Text                                | Was your most recent tetanus shot given in 2005 or later?                          |  |  |
| Answer Codes                                 | 1. Yes 2. No Refused Don't Know  |  |  |
| Question Type                                | Yes/No   |  |  |
| Field Pane Description Tetanus shot in 2005+ |  |  |  |
| Fill Instructions                            |  |  |  |
| Special Instructions                         |  |  |  |
| Skip Instructions                            | <1,R> [goto SHTTDAP] <2,D> if AGE le 64 [goto SHTHPV2] elseif AGE gt 64 goto LIVEV |  |  |
| Hard Edits                                   |  |  |  |
| Soft Edits                                   |  |  |  |
| AssocHelp                                    |  |  |  |

| Module               | 19  |   |  |
|----------------------|---|---|--|
| Section Name         | Health Care Access and Utilization  |   |  |
| Part                 | D   |   |  |
| Question ID          | AAU.440.010   |   |  |
| Variable Name        | SHTTDAP   |   |  |
| Universe             | HHSTAT4 = 'S' and (AGE GE '(IN('1','7')   | 018' and AGE not IN ('997','999')) and SHTTD05(e) |  |
| Universe-text        | Sample adults who have had a tetanus shot in 2005 or beyond or refused to say if they had a tetanus shot in 2005 or beyond  |   |  |
| Question Text        | There are currently two types of tetanus shots available today. One is the Td or tetanus-diphtheria vaccine and the other is called Tdap or Adacel (trademark) or Boostrix (trademark). They are similar except the Tdap shot also includes a pertussis (per-TUH-sis) or whooping cough vaccine. Thinking back to your most recent tetanus shot, did your health care provider tell you or did the vaccine information sheet say the vaccine included the pertussis or whooping cough vaccine? The shot is often called Tdap or ADACEL (trademark) or BOOSTRIX (trademark). |   |  |
| Answer Codes         | 1. Yes-included pertussis 2. No-did not include pertussis 3. Doctor did not say Refused Don't Know  |   |  |
| Question Type        | Pick One - answer list pane   |   |  |
| Field Pane Descripti | Combo tetanus/pertussis   | shot  |  |
| Fill Instructions    |   |   |  |
| Special Instructions |   |   |  |
| Skip Instructions    | <1-3,R,D> if age le 64 [goto SH else [goto LIVEV]   | THPV2];   |  |
| Hard Edits           |   |   |  |
| Soft Edits           |   |   |  |
| AssocHeln            |   |   |  |

| Module               | 19   |  |  |
|----------------------|--|--|--|
| Section Name         | Health Care Access and Utilization   |  |  |
| Part                 | D  |  |  |
| Question ID          | AAU.446.010  |  |  |
| Variable Name        | SHTHPV2  |  |  |
| Universe             | HHSTAT4 = 'S' and (AGE LE '064' and AGE not IN ('997','999'))                    |  |  |
| Universe-text        | Sample adults age LE 64  |  |  |
| Question Text        | Have you ever received an HPV shot or vaccine?                                   |  |  |
|                      | *HPV stands for human papillomavirus (pap-uh-LOW-muh-vi-rus).                    |  |  |
|                      | *The vaccines are sometimes called CERVARIX (trademark) or GARDASIL (trademark). |  |  |
| Answer Codes         | 1. Yes 2. No 3. Doctor refused when asked Refused Don't know                     |  |  |
| Question Type        | Pick One - answer list pane  |  |  |
| Field Pane Descripti | Had HPV shot   |  |  |
| Fill Instructions    |  |  |  |
| Special Instructions |  |  |  |
| Skip Instructions    | <1> [goto SHHPVDOS]<br><2,3,R,D> [goto LIVEV]                                    |  |  |
| Hard Edits           |  |  |  |
| Soft Edits           |  |  |  |
| AssocHelp            |  |  |  |

| Module               | 19  |                              |                           |
|----------------------|---|------------------------------|---------------------------|
| Section Name         | Health Care Access and Utilization                          |                              |                           |
| Part                 | D   |                              |                           |
| Question ID          | AAU.448.010   |                              |                           |
| Variable Name        | SHHPVDOS  |                              |                           |
| Universe             | HHSTAT4 = 'S' and (AGE LE 'C                                | 064' and AGE not IN ('997',' | 999')) and SHTHPV2(e)='1' |
| Universe-text        | Sample adults age LE 64 who I                               | have had an HPV shot         |                           |
| Question Text        | How many HPV shots did you receive?                         |                              |                           |
|                      | * Enter '50' if 50 or more shots                            |                              |                           |
|                      | * Enter '96' for all shots                                  |                              |                           |
| Answer Codes         |   |                              |                           |
| Question Type        | Integer   |                              |                           |
| Field Pane Descripti | Number of shots   |                              |                           |
| Fill Instructions    |   |                              |                           |
| Special Instructions | Allow 1-50,96, Refused, Don't k                             | know                         |                           |
| Skip Instructions    | <1-50,96,R,D> [goto AHPVAGE]<br><51-95> [goto ERR_SHHPVDOS] |                              |                           |
| Hard Edits           | ERR_SHHPVDOS  |                              |                           |
|                      | * Shots should be in the range                              | 1-50 or 96 for all shots.    |                           |
|                      | * Please correct.   |                              |                           |
| Soft Edits           |   |                              |                           |
| AssocHelp            |   |                              |                           |

| Module                 | 19   |
|------------------------|--|
| Section Name           | Health Care Access and Utilization   |
| Part                   | D  |
| Question ID            | AAU.449.010  |
| Variable Name          | AHPVAGE  |
| Universe               | HHSTAT4 = 'S' and (AGE LE '064' and AGE not IN ('997','999')) and SHTHPV2(e)='1' |
| Universe-text          | Sample adults age LE 64 who have had an HPV shot                                 |
| Question Text          | How old were you when you received your first HPV shot?                          |
| Answer Codes           | (Allow 8-current age, Refused, Don't know)                                       |
| Question Type          | Integer  |
| Field Pane Description | Age at first shot/vaccine  |
| Fill Instructions      |  |
| Special Instructions   |  |
| Skip Instructions      | <8-120,R,D> [goto LIVEV]   |
| Hard Edits             |  |
| Soft Edits             |  |
| AssocHelp              |  |

| Module                 | 19  |  |  |
|------------------------|---|--|--|
| Section Name           | Health Care Access and Utilization  |  |  |
| Part                   | D   |  |  |
| Question ID            | AAU.450.010   |  |  |
| Variable Name          | LIVEV   |  |  |
| Universe               | HHSTAT4 = 'S' and (AGE GE '018' and AGE not IN ('997','999'))   |  |  |
| Universe-text          | Sample adults 18+   |  |  |
| Question Text          | Has a doctor or other health professional ever told you that you had any kind of chronic, or long-term liver condition? |  |  |
| Answer Codes           | 1. Yes 2. No Refused Don't know   |  |  |
| Question Type          | Yes/No  |  |  |
| Field Pane Description | Field Pane Description Ever had liver problems  |  |  |
| Fill Instructions      |   |  |  |
| Special Instructions   |   |  |  |
| Skip Instructions      | <1,2,R,D> goto TRAVEL   |  |  |
| Hard Edits             |   |  |  |
| Soft Edits             |   |  |  |
| AssocHelp              |   |  |  |

| Module  | 19   |  |
|---|--|--|
| Section Name  | Health Care Access and Utilization   |  |
| Part  | D  |  |
| Question ID   | AAU.460.010  |  |
| Variable Name   | TRAVEL   |  |
| Universe  | HHSTAT4 = 'S' and (AGE GE '018' and AGE not IN ('997','999'))  |  |
| Universe-text   | Sample adults 18+  |  |
| Question Text   | Have you ever traveled outside of the United States to countries other than Europe, Japan, Australia, New Zealand or Canada, since 1995? |  |
| Answer Codes  | 1. Yes 2. No Refused Don't know  |  |
| Question Type   | Yes/No   |  |
| Field Pane Description Traveled since 1995-selected countries |  |  |
| Fill Instructions   |  |  |
| Special Instructions  |  |  |
| Skip Instructions   | <1,2,R,D> [goto WRKHLTH]   |  |
| Hard Edits  |  |  |
| Soft Edits  |  |  |
| AssocHelp   |  |  |

| Module               | 19   |
|----------------------|--|
| Section Name         | Health Care Access and Utilization   |
| Part                 | D  |
| Question ID          | AAU.465.010  |
| Variable Name        | WRKHLTH  |
| Universe             | HHSTAT4 = 'S' and (AGE GE '018' and AGE not IN ('997', '999'))   |
| Universe-text        | Sample adults 18+  |
| Question Text        | Do you currently volunteer or work in a hospital, medical clinic, doctor's office, dentist's office, nursing home or some other health-care facility? This includes emergency responders and public safety personnel, part-time and unpaid work in a health care facility as well as professional nursing care provided in the home.  *Read if necessary: This includes non-health care professionals, such as administrative staff, who work in a health-care facility. |
| Answer Codes         | 1. Yes 2. No Refused Don't know  |
| Question Type        | Yes/No   |
| Field Pane Descripti | on Work  |
| Fill Instructions    |  |
| Special Instructions |  |
| Skip Instructions    | <1> [goto WRKDIR]<br><2> [goto APSBPCHK]   |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module                 | 19  |
|------------------------|---|
| Section Name           | Health Care Access and Utilization  |
| Part                   | D   |
| Question ID            | AAU.470.010   |
| Variable Name          | WRKDIR  |
| Universe               | HHSTAT4 = 'S' and (AGE GE '018' and AGE not IN ('997','999')) and WRKHLTH(e)='1'  |
| Universe-text          | Sample adults 18+ who work or volunteer in a health-care setting  |
| Question Text          | Do you provide direct patient care as part of your routine work? By direct patient care we MEAN PHYSICAL OR HANDS ON CONTACT WITH PATIENTS. |
| Answer Codes           | 1. Yes 2. No Refused Don't know   |
| Question Type          | Yes/No  |
| Field Pane Description | on Direct care  |
| Fill Instructions      |   |
| Special Instructions   |   |
| Skip Instructions      | <1,2,R,D> [goto APSBPCHK]   |
| Hard Edits             |   |
| Soft Edits             |   |
| AssocHelp              |   |

| Module               | 19  |
|----------------------|---|
| Section Name         | Adult Access to Health Care & Utilization   |
| Part                 |   |
| Question ID          | AAU.500_00.010  |
| Variable Name        | APSBPCHK  |
| Universe             | HHSTAT4 = 'S' and (AGE GE '018' and AGE not IN ('997','999'))   |
| Universe-text        | Sample adults 18+ who refused or said don't know (in ACN) to having their blood pressure checked in the past year     |
| Question Text        | DURING THE PAST 12 MONTHS, have you had your blood pressure checked by a doctor, nurse, or other health professional? |
| Answer Codes         | 1.Yes 2. No Refused Don't know  |
| Question Type        | Yes/No  |
| Field Pane Descripti | on  |
| Fill Instructions    |   |
| Special Instructions |   |
| Skip Instructions    | <1,2,R,D> [goto APSCHCHK]   |
| Hard Edits           |   |
| Soft Edits           |   |
| AssocHelp            |   |

| Module                 | 19   |
|------------------------|--|
| Section Name           | Adult Access to Health Care & Utilization  |
| Part                   |  |
| Question ID            | AAU.510_00.010   |
| Variable Name          | APSCHCHK   |
| Universe               | HHSTAT4 = 'S' and (AGE GE '018' and AGE not IN ('997','999'))  |
| Universe-text          | Sample adults 18+ who refused or said don't know (in ACN) to having their blood cholesterol checked in the past year     |
| Question Text          | DURING THE PAST 12 MONTHS, have you had your blood cholesterol checked by a doctor, nurse, or other health professional? |
| Answer Codes           | 1.Yes 2. No Refused Don't know   |
| Question Type          | Yes/No   |
| Field Pane Description | on   |
| Fill Instructions      |  |
| Special Instructions   |  |
| Skip Instructions      | <1,2,R,D> [goto APSBSCHK]  |
| Hard Edits             |  |
| Soft Edits             |  |
| AssocHelp              |  |

| Module               | 19  |
|----------------------|---|
| Section Name         | Adult Access to Health Care & Utilization   |
| Part                 |   |
| Question ID          | AAU.520_00.010  |
| Variable Name        | APSBSCHK  |
| Universe             | HHSTAT4 = 'S' and (AGE GE '018' and AGE not IN ('997','999'))   |
| Universe-text        | Sample adults 18+   |
| Question Text        | Have you had a fasting test for high blood sugar or diabetes DURING THE PAST 12 MONTHS?   |
| Answer Codes         | 1.Yes 2. No Refused Don't know  |
| Question Type        | Yes/No  |
| Field Pane Descripti | on  |
| Fill Instructions    |   |
| Special Instructions |   |
| Skip Instructions    | <1,2,R,D> and SEX=1 and AGE GE 40 [goto APSCOL] If <1,2,R,D> and SEX=1 and AGE < 40 [goto APSDIET] Else <1,2,R,D> and SEX=2 [goto APSPAP] |
| Hard Edits           |   |
| Soft Edits           |   |
| AssocHelp            |   |

| Module               | 19   |
|----------------------|--|
| Section Name         | Adult Access to Health Care & Utilization  |
| Part                 |  |
| Question ID          | AAU.530_00.010   |
| Variable Name        | APSPAP   |
| Universe             | HHSTAT4 = 'S' and (AGE GE '018' and AGE not IN ('997','999')) and SEX='2'  |
| Universe-text        | Female sample adults 18+   |
| Question Text        | Have you had a Pap smear or Pap test DURING THE PAST 12 MONTHS?  |
|                      | *Read if necessary.  |
|                      | A Pap smear or Pap test is a routine test for women in which the doctor examines the cervix, takes a cell sample from the cervix with a small stick or brush, and sends it to the lab. |
| Answer Codes         | 1.Yes 2. No Refused Don't know   |
| Question Type        | Yes/No   |
| Field Pane Descripti | on   |
| Fill Instructions    |  |
| Special Instructions |  |
| Skip Instructions    | <1,2,R,D> if AGE GE 30 [goto APSMAM];<br>else <1,2,R,D and AGE<30 [goto APSDIET]   |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module                 | 19   |
|------------------------|--|
| Section Name           | Adult Access to Health Care & Utilization  |
| Part                   |  |
| Question ID            | AAU.540_00.010   |
| Variable Name          | APSMAM   |
| Universe               | HHSTAT4 = 'S' and (AGE GE '030' and AGE not IN ('997', '999')) and SEX='2'   |
| Universe-text          | Female sample adults 30+   |
| Question Text          | Have you had a Mammogram DURING THE PAST 12 MONTHS?  |
| Answer Codes           | *Read if necessary.  A mammogram is an x-ray of each breast to look for breast cancer.  1.Yes 2. No Refused Don't know |
| Question Type          | Yes/No   |
| Field Pane Description | on   |
| Fill Instructions      |  |
| Special Instructions   |  |
| Skip Instructions      | <1,2,R,D> if AGE GE 40 [gotoAPSCOL];<br>else <1,2,R,D and AGE<40> [goto APSDIET]                                       |
| Hard Edits             |  |
| Soft Edits             |  |
| AssocHelp              |  |

| Module               | 19  |
|----------------------|---|
| Section Name         | Adult Access to Health Care & Utilization   |
| Part                 |   |
| Question ID          | AAU.550_00.010  |
| Variable Name        | APSCOL  |
| Universe             | HHSTAT4 = 'S' and (AGE GE '040' and AGE not IN ('997','999'))   |
| Universe-text        | Sample adults 40+   |
| Question Text        | DURING THE PAST 12 MONTHS, have you had any test done for colon cancer?   |
|                      | *Read if necessary.   |
|                      | Colon cancer tests include blood stool tests, colonoscopy and sigmoidoscopy.  |
|                      | A blood stool test is a test that may use a special kit at home to determine whether the stool contains blood.                                      |
|                      | A sigmoidoscopy and colonoscopy are exams in which a tube is inserted in the rectum to view the colon for signs of cancer or other health problems. |
| Answer Codes         | 1.Yes 2. No Refused Don't know  |
| Question Type        | Yes/No  |
| Field Pane Descripti | on  |
| Fill Instructions    |   |
| Special Instructions |   |
| Skip Instructions    | <1,2,R,D> [goto APSDIET]  |
| Hard Edits           |   |
| Soft Edits           |   |
| AssocHelp            |   |

| Module               | 19  |
|----------------------|---|
| Section Name         | Adult Access to Health Care & Utilization   |
| Part                 |   |
| Question ID          | AAU.560_00.010  |
| Variable Name        | APSDIET   |
| Universe             | HHSTAT4 = 'S' and (AGE GE '018' and AGE not IN ('997','999'))                                       |
| Universe-text        | Sample adults 18+   |
| Question Text        | DURING THE PAST 12 MONTHS, has a doctor or other health professional talked to you about your diet? |
| Answer Codes         | 1.Yes 2. No Refused Don't know  |
| Question Type        | Yes/No  |
| Field Pane Descripti | on  |
| Fill Instructions    |   |
| Special Instructions |   |
| Skip Instructions    | <1,2,R,D> if SMKNOW in ('1','2') [goto APSSMKC]; else [goto AINDINS]                                |
| Hard Edits           |   |
| Soft Edits           |   |
| AssocHelp            |   |

| Module                 | 19   |  |
|------------------------|--|--|
| Section Name           | Adult Access to Health Care & Utilization  |  |
| Part                   |  |  |
| Question ID            | AAU.570_00.010   |  |
| Variable Name          | APSSMKC  |  |
| Universe               | HHSTAT4 = 'S' and (AGE GE '018' and AGE not IN ('997', '999')) and SMKNOW(e) IN('1','2')               |  |
| Universe-text          | Sample adults 18+ currently who smoke every day or some days   |  |
| Question Text          | DURING THE PAST 12 MONTHS, has a doctor or other health professional talked to you about your smoking? |  |
| Answer Codes           | 1.Yes 2. No Refused Don't know   |  |
| Question Type          | Yes/No   |  |
| Field Pane Description |  |  |
| Fill Instructions      |  |  |
| Special Instructions   |  |  |
| Skip Instructions      | <1,2,R,D> [goto AINDINS]   |  |
| Hard Edits             |  |  |
| Soft Edits             |  |  |
| AssocHelp              |  |  |

| Module               | 19   |
|----------------------|--|
| Section Name         | Adult Access to Health Care & Utilization  |
| Part                 |  |
| Question ID          | AAU.600_00.010   |
| Variable Name        | AINDINS  |
| Universe             | HHSTAT4 = 'S' and (AGE GE '018' and AGE not IN ('997','999'))  |
| Universe-text        | Sample adults 18+  |
| Question Text        | DURING THE PAST 3 YEARS, did you try to purchase health insurance directly, that is, not through any employer, union, or government program? |
| Answer Codes         | 1. Yes 2. No Refused Don't know  |
| Question Type        | Yes/No   |
| Field Pane Descripti | on   |
| Fill Instructions    |  |
| Special Instructions |  |
| Skip Instructions    | <1> [goto AINDPRCH] <2,R,D> if age LT 65 [goto AEXCHNG]; else age GE 65 [goto next section]  |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module               | 19  |
|----------------------|---|
| Section Name         | Adult Access to Health Care & Utilization   |
| Part                 |   |
| Question ID          | AAU.600_00.020  |
| Variable Name        | AINDPRCH  |
| Universe             | HHSTAT4 = 'S' and (AGE GE '018' and AGE not IN ('997','999')) and AINDINS(e)='1'      |
| Universe-text        | Sample adults 18+ who tried to purchase health insurance directly in the past 3 years |
| Question Text        | Was a plan purchased?   |
| Answer Codes         | 1. Yes 2. No Refused Don't know   |
| Question Type        | Yes/No  |
| Field Pane Descripti | on  |
| Fill Instructions    |   |
| Special Instructions |   |
| Skip Instructions    | <1> [goto AINDWHO]<br><2,R,D> if age LT 65 [goto AEXCHNG]; else [goto next section]   |
| Hard Edits           |   |
| Soft Edits           |   |
| AssocHelp            |   |

| Module               | 19  |
|----------------------|---|
| Section Name         | Adult Access to Health Care & Utilization   |
| Part                 |   |
| Question ID          | AAU.600_00.030  |
| Variable Name        | AINDWHO   |
| Universe             | HHSTAT4 = 'S' and (AGE GE '018' and AGE not IN ('997','999')) and AINDPRCH(e)='1' |
| Universe-text        | Sample adults 18+ who purchased health insurance directly in the past 3 years     |
| Question Text        | Was this plan for yourself, someone else in your family, or both?                 |
| Answer Codes         | 1. Self 2. Someone else in family 3. Both Refused Don't know                      |
| Question Type        | Pick One - answer list pane   |
| Field Pane Descripti | on  |
| Fill Instructions    |   |
| Special Instructions |   |
| Skip Instructions    | <1-3,R,D> [goto AINDDIF1]   |
| Hard Edits           |   |
| Soft Edits           |   |
| AssocHelp            |   |

| Module                 | 19  |  |
|------------------------|---|--|
| Section Name           | Adult Access to Health Care & Utilization   |  |
| Part                   |   |  |
| Question ID            | AAU.600_00.040  |  |
| Variable Name          | AINDDIF1  |  |
| Universe               | HHSTAT4 = 'S' and (AGE GE '018' and AGE not IN ('997','999')) and AINDPRCH(e)='1'       |  |
| Universe-text          | Sample adults 18+ who purchased health insurance directly in the past 3 years           |  |
| Question Text          | How difficult was it to find a plan with the type of coverage you needed? Would you say |  |
|                        | *Read categories below.   |  |
| Answer Codes           | 1. Very difficult 2. Somewhat difficult 3. Not at all difficult Refused Don't know      |  |
| Question Type          | Pick One - answer list pane   |  |
| Field Pane Description |   |  |
| Fill Instructions      |   |  |
| Special Instructions   |   |  |
| Skip Instructions      | <1-3,R,D> [goto AINDDIF2]   |  |
| Hard Edits             |   |  |
| Soft Edits             |   |  |
| AssocHelp              |   |  |

| Module                 | 19   |  |
|------------------------|--|--|
| Section Name           | Adult Access to Health Care & Utilization  |  |
| Part                   |  |  |
| Question ID            | AAU.600_00.050   |  |
| Variable Name          | AINDDIF2   |  |
| Universe               | HHSTAT4 = 'S' and (AGE GE '018' and AGE not IN ('997', '999')) and AINDPRCH(e)='1' |  |
| Universe-text          | Sample adults 18+ who purchased health insurance directly in the past 3 years      |  |
| Question Text          | How difficult was it to find a plan you could afford? Would you say                |  |
|                        | *Read categories below.  |  |
| Answer Codes           | 1. Very difficult 2. Somewhat difficult 3. Not at all difficult Refused Don't know |  |
| Question Type          | Pick One - answer list pane  |  |
| Field Pane Description |  |  |
| Fill Instructions      |  |  |
| Special Instructions   |  |  |
| Skip Instructions      | <1-3,R,D> if age LT 65 [goto AEXCHNG];<br>else [goto next section]                 |  |
| Hard Edits             |  |  |
| Soft Edits             |  |  |
| AssocHelp              |  |  |

| Module                 | 19   |
|------------------------|--|
| Section Name           | Adult Access to Health Care & Utilization  |
| Part                   |  |
| Question ID            | AAU.605_00.010   |
| Variable Name          | AEXCHNG  |
| Universe               | HHSTAT4 = 'S' and (AGE LT '065' and AGE not IN ('997','999'))  |
| Universe-text          | Sample adults LT 65 years  |
| Question Text          | Have you looked into purchasing health insurance coverage through Healthcare.gov or the [Fill: ]?  |
| Answer Codes           | 1. Yes 2. No Refused Don't know  |
| Question Type          | Yes/No   |
| Field Pane Description | Insurance exchange   |
| Fill Instructions      | Fill:  If no state specified below, fill Health Insurance Marketplace  If state specified below fill:  If CA then fill Health Insurance Marketplace, such as Covered California  If CO then fill Health Insurance Marketplace, such as Connect for Health Colorado  If CT then fill Health Insurance Marketplace, such as Access Health CT  If DC then fill Health Insurance Marketplace, such as DC Health Link  If HI then fill Health Insurance Marketplace, such as Hawaii Health Connector  If ID then fill Health Insurance Marketplace, such as Your Health Idaho  If KY then fill Health Insurance Marketplace, such as KYnect  If MA then fill Health Insurance Marketplace, such as Health Connector  If MD then fill Health Insurance Marketplace, such as Maryland Health Connection  If MN then fill Health Insurance Marketplace, such as New Mexico Health  Connections  If MS then fill Health Insurance Marketplace, such as One, Mississippi  If NV then fill Health Insurance Marketplace, such as New York State of Health  If OR then fill Health Insurance Marketplace, such as Cover Oregon  If RI then fill Health Insurance Marketplace, such as HealthSource RI  If VT then fill Health Insurance Marketplace, such as Vermont Health Connect  If WA then fill Health Insurance Marketplace, such as Washington Healthplanfinder  If U T then fill Health Insurance Marketplace, or through Avenue H |
| Special Instructions   |  |
| Skip Instructions      | <1,2,R,D> [goto next section]  |
| Hard Edits             |  |
| Soft Edits             |  |
| AssocHelp              |  |

## 2015 Q1 NHIS Instrument Spec Report

Section name: Adult Sexual Identity and Lifestyle Questions

| Module                 | 52   |  |
|------------------------|--|--|
| Section Name           | Adult Sexual Identity and Lifestyle Questions  |  |
| Part                   |  |  |
| Question ID            | ASI.005_00.000   |  |
| Variable Name          | ASIINTRO   |  |
| Universe               | HHSTAT4 = 'S' and (AGE GE '018' and AGE not IN ('997','999'))  |  |
| Universe-text          | Sample adults 18+  |  |
| Question Text          | *You are about to enter the Sexual Identity and Lifestyle questions section. This section includes questions on computer use, the respondent's neighborhood, sexual identity, financial worries, mental health, and HIV testing. |  |
|                        | *Enter 1 to Continue.  |  |
| Answer Codes           | 1. Enter 1 to Continue   |  |
| Question Type          | Enter 1 to Continue  |  |
| Field Pane Description |  |  |
| Fill Instructions      |  |  |
| Special Instructions   | Do not allow don't know or refused for this screen.  |  |
| Skip Instructions      | <1> goto ACICPUSE  |  |
| Hard Edits             |  |  |
| Soft Edits             |  |  |
| AssocHelp              |  |  |

| Module                 | 52   |  |
|------------------------|--|--|
| Section Name           | Adult Sexual Identity and Lifestyle Questions                                      |  |
| Part                   |  |  |
| Question ID            | ASI.130_00.000   |  |
| Variable Name          | ACICPUSE   |  |
| Universe               | HHSTAT4 = 'S' and (AGE GE '018' and AGE not IN ('997','999'))                      |  |
| Universe-text          | Sample adults 18+  |  |
| Question Text          | These questions are about you and your neighborhood.                               |  |
|                        | How often do you use a computer?   |  |
|                        | *Read answer categories.   |  |
| Answer Codes           | 1. Never or almost never 2. Some days 3. Most days 4. Every day Refused Don't know |  |
| Question Type          | Pick One - answer list pane  |  |
| Field Pane Description |  |  |
| Fill Instructions      |  |  |
| Special Instructions   | Display the answer codes in the answer pane in bold black.                         |  |
| Skip Instructions      | <1-4,R,D> [goto ACISATHC]  |  |
| Hard Edits             |  |  |
| Soft Edits             |  |  |
| AssocHelp              |  |  |

| Module                 | 52  |
|------------------------|---|
| Section Name           | Adult Sexual Identity and Lifestyle Questions   |
| Part                   |   |
| Question ID            | ASI.140_00.000  |
| Variable Name          | ACISATHC  |
| Universe               | HHSTAT4 = 'S' and (AGE GE '018' and AGE not IN ('997','999'))   |
| Universe-text          | Sample adults 18+   |
| Question Text          | In general, how satisfied are you with the health care you received in the past 12 months?  |
|                        | *Read answer categories.  |
| Answer Codes           | 1. Very satisfied 2. Somewhat satisfied 3. Somewhat dissatisfied 4. Very dissatisfied 5. You haven't had health care in the past 12 months Refused Don't know |
| Question Type          | Pick One - answer list pane   |
| Field Pane Description |   |
| Fill Instructions      |   |
| Special Instructions   | Display the answer codes in the answer pane in bold black.  |
| Skip Instructions      | <1-5,R,D> [goto ACITENUR]   |
| Hard Edits             |   |
| Soft Edits             |   |
| AssocHelp              |   |

| Module               | <b>52</b>  |
|----------------------|--|
| Section Name         | Adult Sexual Identity and Lifestyle Questions  |
| Part                 |  |
| Question ID          | ASI.150_00.000   |
| Variable Name        | ACITENUR   |
| Universe             | HHSTAT4 = 'S' and (AGE GE '018' and AGE not IN ('997', '999'))   |
| Universe-text        | Sample adults 18+  |
| Question Text        | About how long have you lived in your present neighborhood?  |
| Answer Codes         | 1. Less than 1 year 2. 1-3 years 3. 4-10 years 4. 11-20 years 5. More than 20 years Refused Don't know |
| Question Type        | Pick One - answer list pane  |
| Field Pane Descripti | on   |
| Fill Instructions    |  |
| Special Instructions |  |
| Skip Instructions    | <1-5,R,D> [goto ACINHELP]  |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module               | 52   |
|----------------------|--|
| Section Name         | Adult Sexual Identity and Lifestyle Questions  |
| Part                 |  |
| Question ID          | ASI.160_00.000   |
| Variable Name        | ACINHELP   |
| Universe             | HHSTAT4 = 'S' and (AGE GE '018' and AGE not IN ('997','999'))  |
| Universe-text        | Sample adults 18+  |
| Question Text        | How much do you agree or disagree with the following statements about your neighborhood?             |
|                      | People in this neighborhood help each other out.   |
|                      | Would you say  |
|                      | *Read answer categories.   |
| Answer Codes         | 1. Definitely agree 2. Somewhat agree 3. Somewhat disagree 4. Definitely disagree Refused Don't know |
| Question Type        | Pick One - answer list pane  |
| Field Pane Descripti | on   |
| Fill Instructions    |  |
| Special Instructions | Display the answer codes in the answer pane in bold black.   |
| Skip Instructions    | <1-4,R,D> [goto ACINCNTO]  |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module                 | 52   |  |
|------------------------|--|--|
| Section Name           | Adult Sexual Identity and Lifestyle Questions  |  |
| Part                   |  |  |
| Question ID            | ASI.170_00.000   |  |
| Variable Name          | ACINCNTO   |  |
| Universe               | HHSTAT4 = 'S' and (AGE GE '018' and AGE not IN ('997','999'))  |  |
| Universe-text          | Sample adults 18+  |  |
| Question Text          | *Read if necessary.  |  |
|                        | How much do you agree or disagree with the following statements about your neighborhood?             |  |
|                        | There are people I can count on in this neighborhood.  |  |
|                        | Would you say  |  |
|                        | *Read answer categories if necessary.  |  |
| Answer Codes           | 1. Definitely agree 2. Somewhat agree 3. Somewhat disagree 4. Definitely disagree Refused Don't know |  |
| Question Type          | Pick One - answer list pane  |  |
| Field Pane Description |  |  |
| Fill Instructions      |  |  |
| Special Instructions   |  |  |
| Skip Instructions      | <1-4,R,D> [goto ACINTRU]   |  |
| Hard Edits             |  |  |
| Soft Edits             |  |  |
| AssocHelp              |  |  |

| Module               | 52   |
|----------------------|--|
| Section Name         | Adult Sexual Identity and Lifestyle Questions  |
| Part                 |  |
| Question ID          | ASI.180_00.000   |
| Variable Name        | ACINTRU  |
| Universe             | HHSTAT4 = 'S' and (AGE GE '018' and AGE not IN ('997','999'))  |
| Universe-text        | Sample adults 18+  |
| Question Text        | *Read if necessary.  |
|                      | How much do you agree or disagree with the following statements about your neighborhood?             |
|                      | People in this neighborhood can be trusted.  |
|                      | Would you say  |
|                      | *Read answer categories if necessary.  |
| Answer Codes         | 1. Definitely agree 2. Somewhat agree 3. Somewhat disagree 4. Definitely disagree Refused Don't know |
| Question Type        | Pick One - answer list pane  |
| Field Pane Descripti | on   |
| Fill Instructions    |  |
| Special Instructions |  |
| Skip Instructions    | <1-4,R,D> [goto ACINKNT]   |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module               | 52   |
|----------------------|--|
| Section Name         | Adult Sexual Identity and Lifestyle Questions  |
| Part                 |  |
| Question ID          | ASI.190_00.000   |
| Variable Name        | ACINKNT  |
| Universe             | HHSTAT4 = 'S' and (AGE GE '018' and AGE not IN ('997','999'))  |
| Universe-text        | Sample adults 18+  |
| Question Text        | *Read if necessary.  |
|                      | How much do you agree or disagree with the following statements about your neighborhood?             |
|                      | This is a close-knit neighborhood.   |
|                      | Would you say  |
|                      | *Read answer categories if necessary.  |
| Answer Codes         | 1. Definitely agree 2. Somewhat agree 3. Somewhat disagree 4. Definitely disagree Refused Don't know |
| Question Type        | Pick One - answer list pane  |
| Field Pane Descripti | on   |
| Fill Instructions    |  |
| Special Instructions |  |
| Skip Instructions    | <1-4,R,D><br>[if SEX=1, goto ACISIM; elseif SEX=2, goto ACISIF]                                      |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module                 | 52  |
|------------------------|---|
| Section Name           | Adult Sexual Identity and Lifestyle Questions   |
| Part                   |   |
| Question ID            | ASI.220_00.000  |
| Variable Name          | ACISIM  |
| Universe               | HHSTAT4 = 'S' and (AGE GE '018' and AGE not IN ('997','999')) and SEX=1                               |
| Universe-text          | Male sample adults 18+  |
| Question Text          | (book) ASI1   |
|                        | Which of the following best represents how you think of yourself?                                     |
| Answer Codes           | 1. Gay 2. Straight, that is, not gay 3. Bisexual 4. Something else 5. I don't know the answer Refused |
| Question Type          | Pick One - answer list pane   |
| Field Pane Description |   |
| Fill Instructions      |   |
| Special Instructions   |   |
| Skip Instructions      | <1-3,R> [goto ACIRETR] <4> [goto ACISMELS] <5> [goto ACISIMDK]  |
| Hard Edits             |   |
| Soft Edits             |   |
| AssocHelp              |   |

| Module                 | 52   |  |
|------------------------|--|--|
| Section Name           | Adult Sexual Identity and Lifes  | tyle Questions                                   |
| Part                   |  |  |
| Question ID            | ASI.230_00.000   |  |
| Variable Name          | ACISMELS   |  |
| Universe               | HHSTAT4 = 'S' and (AGE GE 'ACISIM(e)='4'   | 018' and AGE not IN ('997','999')) and SEX=1 and |
| Universe-text          | Male sample adults 18+ who the   | ink of themselves as something else              |
| Question Text          | (book) ASI3  |  |
|                        | What do you mean by something  | ng else?   |
| Answer Codes           | <ol> <li>You are not straight, but identify with another label such as queer, trisexual, omnisexual or pansexual</li> <li>You are transgender, transsexual or gender variant</li> <li>You have not figured out or are in the process of figuring out your sexuality</li> <li>You do not think of yourself as having sexuality</li> <li>You do not use labels to identify yourself</li> <li>You mean something else</li> <li>Refused</li> <li>Don't know</li> </ol> |  |
| Question Type          | Pick One - answer list pane  |  |
| Field Pane Description |  |  |
| Fill Instructions      |  |  |
| Special Instructions   |  |  |
| Skip Instructions      | <1-5,R,D> [goto ACIRETR]<br><6> [goto ACIMSESP]  |  |
| Hard Edits             |  |  |
| Soft Edits             |  |  |
| AssocHelp              |  |  |

| Module                 | 52  |
|------------------------|---|
| Section Name           | Adult Sexual Identity and Lifestyle Questions   |
| Part                   |   |
| Question ID            | ASI.234_00.000  |
| Variable Name          | ACISIMDK  |
| Universe               | HHSTAT4 = 'S' and (AGE GE '018' and AGE not IN ('997','999')) ' and SEX=1 and ACISIM(e)='5'   |
| Universe-text          | Male sample adults 18+ who answered don't know at ACISIM  |
| Question Text          | (book) ASI4   |
|                        | What do you mean by don't know?   |
| Answer Codes           | You don't understand the words     You understand the words, but you have not figured out or are in the process of figuring out your sexuality     You mean something else     Refused     Don't know |
| Question Type          | Pick One - answer list pane   |
| Field Pane Description |   |
| Fill Instructions      |   |
| Special Instructions   |   |
| Skip Instructions      | <1,2,R,D> [goto ACIRETR] <3> [goto ACIMSESP]  |
| Hard Edits             |   |
| Soft Edits             |   |
| AssocHelp              |   |

| Module                 | 52   |
|------------------------|--|
| Section Name           | Adult Sexual Identity and Lifestyle Questions  |
| Part                   |  |
| Question ID            | ASI.238_00.000   |
| Variable Name          | ACIMSESP   |
| Universe               | HHSTAT4 = 'S' and (AGE GE '018' and AGE not IN ('997','999')) ' and SEX=1 and (ACISMELS(e)='6' or ACISIMDK(e)='3') |
| Universe-text          | Male sample adults 18+ who answered something else at ACISMELS or ACISIMDK   |
| Question Text          | What do you mean by something else?  |
| Answer Codes           | Allow 75<br>Refused<br>Don't know  |
| Question Type          | Text   |
| Field Pane Description |  |
| Fill Instructions      |  |
| Special Instructions   |  |
| Skip Instructions      | <allow 75,r,d=""> [goto ACIRETR]</allow>   |
| Hard Edits             |  |
| Soft Edits             |  |
| AssocHelp              |  |

| Module                 | 52  |
|------------------------|---|
| Section Name           | Adult Sexual Identity and Lifestyle Questions   |
| Part                   |   |
| Question ID            | ASI.240_00.000  |
| Variable Name          | ACISIF  |
| Universe               | HHSTAT4 = 'S' and (AGE GE '018' and AGE not IN ('997', '999')) and SEX=2  |
| Universe-text          | Female sample adults 18+  |
| Question Text          | (book) ASI2   |
|                        | Which of the following best represents how you think of yourself?   |
| Answer Codes           | 1. Lesbian or gay 2. Straight, that is, not lesbian or gay 3. Bisexual 4. Something else 5. I don't know the answer Refused |
| Question Type          | Pick One - answer list pane   |
| Field Pane Description |   |
| Fill Instructions      |   |
| Special Instructions   |   |
| Skip Instructions      | <1-3,R> [goto ACIRETR] <4> [goto ACISFELS] <5> [goto ACISIFDK]  |
| Hard Edits             |   |
| Soft Edits             |   |
| AssocHelp              |   |

| Module                 | 52   |  |
|------------------------|--|--|
| Section Name           | Adult Sexual Identity and Lifes  | tyle Questions                                   |
| Part                   |  |  |
| Question ID            | ASI.250_00.000   |  |
| Variable Name          | ACISFELS   |  |
| Universe               | HHSTAT4 = 'S' and (AGE GE 'ACISIF(e)='4'   | 018' and AGE not IN ('997','999')) and SEX=2 and |
| Universe-text          | Female sample adults 18+ who   | think of themselves as as something else         |
| Question Text          | (book) ASI3  |  |
|                        | What do you mean by somethi  | ng else?   |
| Answer Codes           | <ol> <li>You are not straight, but identify with another label such as queer, trisexual, omnisexual or pansexual</li> <li>You are transgender, transsexual or gender variant</li> <li>You have not figured out or are in the process of figuring out your sexuality</li> <li>You do not think of yourself as having sexuality</li> <li>You do not use labels to identify yourself</li> <li>You mean something else</li> <li>Refused</li> <li>Don't know</li> </ol> |  |
| Question Type          | Pick One - answer list pane  |  |
| Field Pane Description |  |  |
| Fill Instructions      |  |  |
| Special Instructions   |  |  |
| Skip Instructions      | <1-5,R,D> [goto ACIRETR]<br><6> [goto ACIFSESP]  |  |
| Hard Edits             |  |  |
| Soft Edits             |  |  |
| AssocHelp              |  |  |

| Module                 | 52  |
|------------------------|---|
| Section Name           | Adult Sexual Identity and Lifestyle Questions   |
| Part                   |   |
| Question ID            | ASI.254_00.000  |
| Variable Name          | ACISIFDK  |
| Universe               | HHSTAT4 = 'S' and (AGE GE '018' and AGE not IN ('997','999')) and QTYPE='1' and SEX=2 and ACISIF(e)='5'   |
| Universe-text          | Female sample adults 18+ who answered don't know at ACISIF  |
| Question Text          | (book) ASI4   |
|                        | What do you mean by don't know?   |
| Answer Codes           | You don't understand the words     You understand the words, but you have not figured out or are in the process of figuring out your sexuality     You mean something else     Refused     Don't know |
| Question Type          | Pick One - answer list pane   |
| Field Pane Description |   |
| Fill Instructions      |   |
| Special Instructions   |   |
| Skip Instructions      | <1,2,R,D> [goto ACIRETR] <3> [goto ACIFSESP]  |
| Hard Edits             |   |
| Soft Edits             |   |
| AssocHelp              |   |

| Module                 | 52   |
|------------------------|--|
| Section Name           | Adult Sexual Identity and Lifestyle Questions  |
| Part                   |  |
| Question ID            | ASI.258_00.000   |
| Variable Name          | ACIFSESP   |
| Universe               | HHSTAT4 = 'S' and (AGE GE '018' and AGE not IN ('997','999')) and SEX=2 and (ACISFELS(e)='6' or ACISIFDK(e)='3') |
| Universe-text          | Female sample adults 18+ who answered something else at ACISFELS or ACISIFDK                                     |
| Question Text          | What do you mean by something else?  |
| Answer Codes           | Allow 75<br>Refused<br>Don't know  |
| Question Type          | Text   |
| Field Pane Description |  |
| Fill Instructions      |  |
| Special Instructions   |  |
| Skip Instructions      | <allow 75,r,d=""> [goto ACIRETR]</allow>   |
| Hard Edits             |  |
| Soft Edits             |  |
| AssocHelp              |  |

| Module                 | 52   |
|------------------------|--|
| Section Name           | Adult Sexual Identity and Lifestyle Questions  |
| Part                   |  |
| Question ID            | ASI.260_00.000   |
| Variable Name          | ACIRETR  |
| Universe               | HHSTAT4 = 'S' and (AGE GE '018' and AGE not IN ('997','999'))  |
| Universe-text          | Sample adults 18+  |
| Question Text          | The next questions ask how worried you are right now about financial matters.  |
| Answer Codes           | How worried are you right now about not having enough money for retirement? Are you  *Read answer categories.  1. Very worried 2. Moderately worried 3. Not too worried 4. Not worried at all Refused Don't know |
| Question Type          | Pick One - answer list pane  |
| Field Pane Description |  |
| Fill Instructions      |  |
| Special Instructions   | Display the answer codes in the answer pane in bold black.   |
| Skip Instructions      | <1-4,R,D> [goto ACIMEDC]   |
| Hard Edits             |  |
| Soft Edits             |  |
| AssocHelp              |  |

| Module               | 52  |
|----------------------|---|
| Section Name         | Adult Sexual Identity and Lifestyle Questions   |
| Part                 |   |
| Question ID          | ASI.270_00.000  |
| Variable Name        | ACIMEDC   |
| Universe             | HHSTAT4 = 'S' and (AGE GE '018' and AGE not IN ('997', '999'))  |
| Universe-text        | Sample adults 18+   |
| Question Text        | How worried are you right now about not being able to pay medical costs of a serious illness or accident? Are you |
|                      | *Read answer categories if necessary.   |
| Answer Codes         | 1. Very worried 2. Moderately worried 3. Not too worried 4. Not worried at all Refused Don't know                 |
| Question Type        | Pick One - answer list pane   |
| Field Pane Descripti | on  |
| Fill Instructions    |   |
| Special Instructions |   |
| Skip Instructions    | <1-4,R,D> [goto ACISTLV]  |
| Hard Edits           |   |
| Soft Edits           |   |
| AssocHelp            |   |

| Module               | 52   |
|----------------------|--|
| Section Name         | Adult Sexual Identity and Lifestyle Questions  |
| Part                 |  |
| Question ID          | ASI.280_00.000   |
| Variable Name        | ACISTLV  |
| Universe             | HHSTAT4 = 'S' and (AGE GE '018' and AGE not IN ('997', '999'))   |
| Universe-text        | Sample adults 18+  |
| Question Text        | How worried are you right now about not being able to maintain the standard of living you enjoy? Are you                                 |
| Answer Codes         | *Read answer categories if necessary.  1. Very worried 2. Moderately worried 3. Not too worried 4. Not worried at all Refused Don't know |
| Question Type        | Pick One - answer list pane  |
| Field Pane Descripti | · · · · · · · · · · · · · · · · · · ·  |
| Fill Instructions    |  |
| Special Instructions |  |
| Skip Instructions    | <1-4,R,D> [goto ACICNHC]   |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module                             | 52   |
|------------------------------------|--|
| Section Name                       | Adult Sexual Identity and Lifestyle Questions  |
| Part                               |  |
| Question ID                        | ASI.290_00.000   |
| Variable Name                      | ACICNHC  |
| Universe                           | HHSTAT4 = 'S' and (AGE GE '018' and AGE not IN ('997', '999'))   |
| Universe-text                      | Sample adults 18+  |
| Question Text                      | How worried are you right now about not being able to pay medical costs for normal healthcare? Are you |
|                                    | *Read answer categories if necessary.  |
| Answer Codes                       | 1. Very worried 2. Moderately worried 3. Not too worried 4. Not worried at all Refused Don't know      |
| Overtion Turns                     |  |
| Question Type Field Pane Descripti | Pick One - answer list pane  |
| Fill Instructions                  |  |
| Special Instructions               |  |
| Skip Instructions                  | <1-4,R,D> [goto ACICCOLL]  |
| Hard Edits                         |  |
| Soft Edits                         |  |
| AssocHelp                          |  |

| Module                 | 52   |
|------------------------|--|
| Section Name           | Adult Sexual Identity and Lifestyle Questions  |
| Part                   |  |
| Question ID            | ASI.300_00.000   |
| Variable Name          | ACICCOLL   |
| Universe               | HHSTAT4 = 'S' and (AGE GE '018' and AGE not IN ('997','999'))  |
| Universe-text          | Sample adults 18+  |
| Question Text          | How worried are you right now about not having enough money to pay for your children's college? Are you                        |
|                        | *Read answer categories if necessary.  |
| Answer Codes           | 1. Very worried 2. Moderately worried 3. Not too worried 4. Not worried at all 5. This does not apply to me Refused Don't know |
| Question Type          | Pick One - answer list pane  |
| Field Pane Description |  |
| Fill Instructions      |  |
| Special Instructions   |  |
| Skip Instructions      | <1-5,R,D> [goto ACINBILL]  |
| Hard Edits             |  |
| Soft Edits             |  |
| AssocHelp              |  |

| Module                 | <b>52</b>   |
|------------------------|---|
| Section Name           | Adult Sexual Identity and Lifestyle Questions   |
| Part                   |   |
| Question ID            | ASI.310_00.000  |
| Variable Name          | ACINBILL  |
| Universe               | HHSTAT4 = 'S' and (AGE GE '018' and AGE not IN ('997', '999'))                                  |
| Universe-text          | Sample adults 18+   |
| Question Text          | How worried are you right now about not having enough to pay your normal monthly bills? Are you |
| Answer Codes           | *Read answer categories if necessary.  1. Very worried 2. Moderately worried 3. Not too worried |
|                        | 4. Not worried at all Refused Don't know  |
| Question Type          | Pick One - answer list pane   |
| Field Pane Description |   |
| Fill Instructions      |   |
| Special Instructions   |   |
| Skip Instructions      | <1-4,R,D> [goto ACIHCST]  |
| Hard Edits             |   |
| Soft Edits             |   |
| AssocHelp              |   |

| Module                 | 52   |
|------------------------|--|
| Section Name           | Adult Sexual Identity and Lifestyle Questions  |
| Part                   |  |
| Question ID            | ASI.320_00.000   |
| Variable Name          | ACIHCST  |
| Universe               | HHSTAT4 = 'S' and (AGE GE '018' and AGE not IN ('997', '999'))   |
| Universe-text          | Sample adults 18+  |
| Question Text          | How worried are you right now about not being able to pay your rent, mortgage, or other housing costs? Are you |
|                        | *Read answer categories if necessary.  |
| Answer Codes           | 1. Very worried 2. Moderately worried 3. Not too worried 4. Not worried at all Refused Don't know              |
| Question Type          | Pick One - answer list pane  |
| Field Pane Description |  |
| Fill Instructions      |  |
| Special Instructions   |  |
| Skip Instructions      | <1-4,R,D> [goto ACICCMP]   |
| Hard Edits             |  |
| Soft Edits             |  |
| AssocHelp              |  |

| Module                 | 52   |
|------------------------|--|
| Section Name           | Adult Sexual Identity and Lifestyle Questions  |
| Part                   |  |
| Question ID            | ASI.330_00.000   |
| Variable Name          | ACICCMP  |
| Universe               | HHSTAT4 = 'S' and (AGE GE '018' and AGE not IN ('997','999'))  |
| Universe-text          | Sample adults 18+  |
| Question Text          | How worried are you right now about not being able to make the minimum payments on your credit cards? Are you                  |
|                        | *Read answer categories if necessary.  |
| Answer Codes           | 1. Very worried 2. Moderately worried 3. Not too worried 4. Not worried at all 5. I don't have credit cards Refused Don't know |
| Question Type          | Pick One - answer list pane  |
| Field Pane Description |  |
| Fill Instructions      |  |
| Special Instructions   |  |
| Skip Instructions      | <1-5,R,D> [goto ACISLEEP]  |
| Hard Edits             |  |
| Soft Edits             |  |
| AssocHelp              |  |

| Module                 | 52   |
|------------------------|--|
| Section Name           | Adult Sexual Identity and Lifestyle Questions  |
| Part                   |  |
| Question ID            | ASI.340_00.000   |
| Variable Name          | ACISLEEP   |
| Universe               | HHSTAT4 = 'S' and (AGE GE '018' and AGE not IN ('997','999'))  |
| Universe-text          | Sample adults 18+  |
| Question Text          | On average, how many hours of sleep do you get in a 24-hour period?  |
|                        | *Enter hours of sleep in whole numbers, rounding 30 minutes (1/2 hour) or more UP to the next whole hour and dropping 29 or fewer minutes. |
| Answer Codes           | Allow 1-24, R, D   |
| Question Type          | Integer  |
| Field Pane Description |  |
| Fill Instructions      |  |
| Special Instructions   |  |
| Skip Instructions      | <1-5>[goto ERR_SLEEP];<br><1-24, R,D>[goto ACISLPFL]   |
| Hard Edits             |  |
| Soft Edits             | ERR_SLEEP  |
|                        | *Average number of hours of sleep is [ACISLEEP]. * Please verify.  |
| AssocHelp              |  |

| Module                 | 52   |
|------------------------|--|
| Section Name           | Adult Sexual Identity and Lifestyle Questions                                  |
| Part                   |  |
| Question ID            | ASI.350_00.000   |
| Variable Name          | ACISLPFL   |
| Universe               | HHSTAT4 = 'S' and (AGE GE '018' and AGE not IN ('997','999'))                  |
| Universe-text          | Sample adults 18+  |
| Question Text          | In the past week, how many times did you have trouble falling asleep?          |
|                        | *Enter '0' if respondent did not have trouble falling asleep in the past week. |
|                        | *Enter '7' for 7 or more times.  |
| Answer Codes           | Allow 0-7, R, D  |
| Question Type          | Integer  |
| Field Pane Description |  |
| Fill Instructions      |  |
| Special Instructions   |  |
| Skip Instructions      | <0-7,R,D> [goto ACISLPST]  |
| Hard Edits             |  |
| Soft Edits             |  |
| AssocHelp              |  |

| Module                 | 52   |
|------------------------|--|
| Section Name           | Adult Sexual Identity and Lifestyle Questions                                  |
| Part                   |  |
| Question ID            | ASI.360_00.000   |
| Variable Name          | ACISLPST   |
| Universe               | HHSTAT4 = 'S' and (AGE GE '018' and AGE not IN ('997','999'))                  |
| Universe-text          | Sample adults 18+  |
| Question Text          | In the past week, how many times did you have trouble staying asleep?          |
|                        | *Enter '0' if respondent did not have trouble staying asleep in the past week. |
|                        | *Enter '7' for 7 or more times.  |
| Answer Codes           | Allow 0-7, R, D  |
| Question Type          | Integer  |
| Field Pane Description |  |
| Fill Instructions      |  |
| Special Instructions   |  |
| Skip Instructions      | <0-7,R,D> [goto ACISLPMD]  |
| Hard Edits             |  |
| Soft Edits             |  |
| AssocHelp              |  |

| Module                 | 52   |
|------------------------|--|
| Section Name           | Adult Sexual Identity and Lifestyle Questions  |
| Part                   |  |
| Question ID            | ASI.370_00.000   |
| Variable Name          | ACISLPMD   |
| Universe               | HHSTAT4 = 'S' and (AGE GE '018' and AGE not IN ('997', '999'))   |
| Universe-text          | Sample adults 18+  |
| Question Text          | In the past week, how many times did you take medication to help you fall asleep or stay asleep?  *Enter '0' if respondent did not take medication to help sleep in the past week. |
|                        |  |
|                        | *Enter '7' for 7 or more times.  |
| Answer Codes           | Allow 0-7, R, D  |
| Question Type          | Integer  |
| Field Pane Description |  |
| Fill Instructions      |  |
| Special Instructions   |  |
| Skip Instructions      | <0-7,R,D> [goto ACIREST]   |
| Hard Edits             |  |
| Soft Edits             |  |
| AssocHelp              |  |

| Module               | 52  |
|----------------------|---|
| Section Name         | Adult Sexual Identity and Lifestyle Questions                           |
| Part                 |   |
| Question ID          | ASI.380_00.000  |
| Variable Name        | ACIREST   |
| Universe             | HHSTAT4 = 'S' and (AGE GE '018' and AGE not IN ('997','999'))           |
| Universe-text        | Sample adults 18+   |
| Question Text        | In the past week, on how many days did you wake up feeling well rested? |
|                      | *Enter '0' if respondent never felt well rested in the past week.       |
| Answer Codes         | Allow 0-7, R, D   |
| Question Type        | Integer   |
| Field Pane Descripti | on  |
| Fill Instructions    |   |
| Special Instructions |   |
| Skip Instructions    | <0-7,R,D> [goto MHSAD_CK]   |
| Hard Edits           |   |
| Soft Edits           |   |
| AssocHelp            |   |

| Module               | 52  |
|----------------------|---|
| Section Name         | Adult Sexual Identity and Lifestyle Questions   |
| Part                 |   |
| Question ID          | ASI.390_00.000  |
| Variable Name        | MHSAD_CK  |
| Universe             | HHSTAT4 = 'S' and (AGE GE '018' and AGE not IN ('997','999'))   |
| Universe-text        | Sample adults 18+   |
| Question Text        | Now I am going to ask you some questions about feelings you may have experienced over the PAST 30 DAYS. |
| Answer Codes         | 1. Enter 1 to Continue  |
| Question Type        | Enter 1 to Continue   |
| Field Pane Descripti | on Continue   |
| Fill Instructions    |   |
| Special Instructions | Do not allow Don't know or Refused.   |
| Skip Instructions    | <1> [goto ACISAD]   |
| Hard Edits           |   |
| Soft Edits           |   |
| AssocHelp            |   |

| Module               | 52  |
|----------------------|---|
| Section Name         | Adult Sexual Identity and Lifestyle Questions   |
| Part                 |   |
| Question ID          | ASI.390_01.000  |
| Variable Name        | ACISAD  |
| Universe             | HHSTAT4 = 'S' and (AGE GE '018' and AGE not IN ('997','999'))   |
| Universe-text        | Sample adults 18+   |
| Question Text        | (book) ASI5   |
|                      | DURING THE PAST 30 DAYS, how often did you feel   |
|                      | So sad that nothing could cheer you up?   |
| Answer Codes         | 1. ALL of the time 2. MOST of the time 3. SOME of the time 4. A LITTLE of the time 5. NONE of the time Refused Don't know |
| Question Type        | Pick One - answer list pane   |
| Field Pane Descripti | on  |
| Fill Instructions    |   |
| Special Instructions |   |
| Skip Instructions    | <1-5,R,D> [goto ACINERV]  |
| Hard Edits           |   |
| Soft Edits           |   |
| AssocHelp            |   |

| Module               | 52   |
|----------------------|--|
| Section Name         | Adult Sexual Identity and Lifestyle Questions  |
| Part                 |  |
| Question ID          | ASI.390_02.000   |
| Variable Name        | ACINERV  |
| Universe             | HHSTAT4 = 'S' and (AGE GE '018' and AGE not IN ('997', '999'))   |
| Universe-text        | Sample adults 18+  |
| Question Text        | (book) ASI5  |
| Answer Codes         | * Read if necessary:  During the PAST 30 DAYS, how often did you feelNervous?  1. ALL of the time 2. MOST of the time 3. SOME of the time 4. A LITTLE of the time 5. NONE of the time Refused Don't know |
| Question Type        | Pick One - answer list pane  |
| Field Pane Descripti | on   |
| Fill Instructions    |  |
| Special Instructions |  |
| Skip Instructions    | <1-5,R,D> [goto ACIRSTLS]  |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module               | 52   |
|----------------------|--|
| Section Name         | Adult Sexual Identity and Lifestyle Questions  |
| Part                 |  |
| Question ID          | ASI.390_03.000   |
| Variable Name        | ACIRSTLS   |
| Universe             | HHSTAT4 = 'S' and (AGE GE '018' and AGE not IN ('997','999'))  |
| Universe-text        | Sample adults 18+  |
| Question Text        | (book) ASI5  |
| Answer Codes         | * Read if necessary:  During the PAST 30 DAYS, how often did you feel Restless or fidgety?  1. ALL of the time |
|                      | 2. MOST of the time 3. SOME of the time 4. A LITTLE of the time 5. NONE of the time Refused Don't know         |
| Question Type        | Pick One - answer list pane  |
| Field Pane Descripti | on   |
| Fill Instructions    |  |
| Special Instructions |  |
| Skip Instructions    | <1-5,R,D> [goto ACIHOPLS]  |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module               | 52  |
|----------------------|---|
| Section Name         | Adult Sexual Identity and Lifestyle Questions   |
| Part                 |   |
| Question ID          | ASI.390_04.000  |
| Variable Name        | ACIHOPLS  |
| Universe             | HHSTAT4 = 'S' and (AGE GE '018' and AGE not IN ('997', '999'))  |
| Universe-text        | Sample adults 18+   |
| Question Text        | (book) ASI5   |
| Answer Codes         | * Read if necessary:  During the PAST 30 DAYS, how often did you feelHopeless?  1. ALL of the time 2. MOST of the time 3. SOME of the time 4. A LITTLE of the time 5. NONE of the time Refused Don't know |
| Question Type        | Pick One - answer list pane   |
| Field Pane Descripti | on  |
| Fill Instructions    |   |
| Special Instructions |   |
| Skip Instructions    | <1-5,R,D> [goto ACIEFFRT]   |
| Hard Edits           |   |
| Soft Edits           |   |
| AssocHelp            |   |

| Module               | 52  |
|----------------------|---|
| Section Name         | Adult Sexual Identity and Lifestyle Questions   |
| Part                 |   |
| Question ID          | ASI.390_05.000  |
| Variable Name        | ACIEFFRT  |
| Universe             | HHSTAT4 = 'S' and (AGE GE '018' and AGE not IN ('997','999'))   |
| Universe-text        | Sample adults 18+   |
| Question Text        | (book) ASI5   |
|                      | * Read if necessary:  |
|                      | During the PAST 30 DAYS, how often did you feel   |
|                      | That everything was an effort?  |
| Answer Codes         | 1. ALL of the time 2. MOST of the time 3. SOME of the time 4. A LITTLE of the time 5. NONE of the time Refused Don't know |
| Question Type        | Pick One - answer list pane   |
| Field Pane Descripti | on  |
| Fill Instructions    |   |
| Special Instructions |   |
| Skip Instructions    | <1-5,R,D> [goto ACIWTHLS]   |
| Hard Edits           |   |
| Soft Edits           |   |
| AssocHelp            |   |

| Module               | 52   |
|----------------------|--|
| Section Name         | Adult Sexual Identity and Lifestyle Questions  |
| Part                 |  |
| Question ID          | ASI.390_06.000   |
| Variable Name        | ACIWTHLS   |
| Universe             | HHSTAT4 = 'S' and (AGE GE '018' and AGE not IN ('997','999'))  |
| Universe-text        | Sample adults 18+  |
| Question Text        | (book) ASI5  |
| Answer Codes         | * Read if necessary:  During the PAST 30 DAYS, how often did you feelWorthless?  1. ALL of the time 2. MOST of the time 3. SOME of the time 4. A LITTLE of the time 5. NONE of the time Refused Don't know |
| Question Type        | Pick One - answer list pane  |
| Field Pane Descripti | on   |
| Fill Instructions    |  |
| Special Instructions |  |
| Skip Instructions    | <1-5,R,D> if ACISAD or ACINERV or ACIRSTLS or ACIHOPLS or ACIEFFRT or ACIWTHLS=1-3 [goto ACIMUCH]; else [goto ACIHIVT]   |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module               | 52   |
|----------------------|--|
| Section Name         | Adult Sexual Identity and Lifestyle Questions  |
| Part                 |  |
| Question ID          | ASI.400_00.000   |
| Variable Name        | ACIMUCH  |
| Universe             | HHSTAT4 = 'S' and (AGE GE '018' and AGE not IN ('997','999')) and (ACISAD(e) IN('1','2','3') or ACINERV(e) IN('1','2','3') or ACIRSTLS(e) IN('1','2','3') or ACIHOPLS(e) IN('1','2','3') or ACIEFFRT (e) IN('1','2','3') or ACIWTHLS(e) IN('1','2','3')) |
| Universe-text        | Sample adults 18+ who at least some of the time have felt sad, nervous, restless or fidgety, hopeless, that everything was an effort, or worthless, in the past 30 days  |
| Question Text        | We just talked about a number of feelings you had during the PAST 30 DAYS. Altogether, how MUCH did these feelings interfere with your life or activities: a lot, some, a little, or not at all?   |
| Answer Codes         | 1. A lot 2. Some 3. A little 4. Not at all Refused Don't Know  |
| Question Type        | Pick One - answer list pane  |
| Field Pane Descripti | ion  |
| Fill Instructions    |  |
| Special Instructions |  |
| Skip Instructions    | <1-4,R,D> [goto ACIHIVT]   |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module                 | 52  |
|------------------------|---|
| Section Name           | Adult Sexual Identity and Lifestyle Questions   |
| Part                   |   |
| Question ID            | ASI.410_00.000  |
| Variable Name          | ACIHIVT   |
| Universe               | HHSTAT4 = 'S' and (AGE GE '018' and AGE not IN ('997','999'))   |
| Universe-text          | Sample adults 18+   |
| Question Text          | The next question is about the test for HIV, the virus that causes AIDS. Except for tests you may have had as part of blood donations, have you ever been tested for HIV? |
| Answer Codes           | 1. Yes 2. No Refused Don't know   |
| Question Type          | Yes/No  |
| Field Pane Description | on  |
| Fill Instructions      |   |
| Special Instructions   |   |
| Skip Instructions      | <1,R,D> [goto next section] <2> [goto ACIHIVWN]   |
| Hard Edits             |   |
| Soft Edits             |   |
| AssocHelp              |   |

| Module               | 52  |
|----------------------|---|
| Section Name         | Adult Sexual Identity and Lifestyle Questions   |
| Part                 |   |
| Question ID          | ASI.420_00.000  |
| Variable Name        | ACIHIVWN  |
| Universe             | HHSTAT4 = 'S' and (AGE GE '018' and AGE not IN ('997','999')) and ACIHIVT='2'   |
| Universe-text        | Sample adults 18+ who have never been tested for HIV  |
| Question Text        | (book) ASI6 I am going to show you a list of reasons why some people have not been tested for HIV (the virus that causes AIDS). Which one of these would you say is the MAIN reason why you have not been tested?   |
| Answer Codes         | 1. It's unlikely you've been exposed to HIV 2. You were afraid to find out if you were HIV positive (that you had HIV) 3. You didn't want to think about HIV or about being HIV positive 4. You were worried your name would be reported to the government if you tested positive 5. You didn't know where to get tested 6. You don't like needles 7. You were afraid of losing job, insurance, housing, friends, family, if people knew you were positive for AIDS infection 8. Some other reason 9. No particular reason Refused Don't know |
| Question Type        | Pick One - answer list pane   |
| Field Pane Descripti | Why not tested for HIV/AIDS   |
| Fill Instructions    |   |
| Special Instructions |   |
| Skip Instructions    | <1-9,R,D> [goto next section]   |
| Hard Edits           |   |
| Soft Edits           |   |
| AssocHelp            |   |

## 2015 Q1 NHIS Instrument Spec Report Section name: Diet and Nutrition

| Section nan          | me: Diet and Nutrition  |
|----------------------|---|
| Module               | 27  |
| Section Name         | Diet and Nutrition  |
| Part                 |   |
| Question ID          | NAC.005_00.000  |
| Variable Name        | SPSPEAK   |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999'))   |
| Universe-text        | Sample adults 18+   |
| Question Text        | (book) CAN1   |
|                      | First, I would like to ask about the language you use most often. In general, what language do you speak?                             |
| Answer Codes         | 1. Only Spanish 2. Mostly Spanish 3. Spanish and English about the same 4. Mostly English 5. Only English 6. Other Refused Don't know |
| Question Type        | Pick One- answer pane list  |
| Field Pane Descripti | on Language   |
| Fill Instructions    |   |
| Special Instructions |   |
| Skip Instructions    | <1-5,R,D> [goto CEREALNO];<br><6> [goto OTHLANG]  |
| Hard Edits           |   |
| Soft Edits           |   |
| AssocHelp            |   |

| Module               | 27  |
|----------------------|---|
| Section Name         | Diet and Nutrition  |
| Part                 |   |
| Question ID          | NAC.006_00.000  |
| Variable Name        | OTHLANG   |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999')) and SPSPEAK(e)='6' |
| Universe-text        | Sample adults 18+ who gave other language used most often                       |
| Question Text        | *Specify the language used most often.  |
| Answer Codes         |   |
| Question Type        | Verbatim  |
| Field Pane Descripti | on Most often   |
| Fill Instructions    |   |
| Special Instructions |   |
| Skip Instructions    | <allow 20,r,d=""> [goto CEREALNO]</allow>                                       |
| Hard Edits           |   |
| Soft Edits           |   |
| AssocHelp            |   |

| Module               | 27   |
|----------------------|--|
| Section Name         | Diet and Nutrition   |
| Part                 |  |
| Question ID          | NAC.010_01.000   |
| Variable Name        | CEREALNO   |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999'))  |
| Universe-text        | Sample adults 18+  |
| Question Text        | 1 of 2   |
|                      | These questions are about the different kinds of foods you ate or drank during the past month, that is, the past 30 days. When answering, please include meals and snacks eaten at home, at work or school, in restaurants, and anyplace else.  During the past month, how often did you eat HOT OR COLD CEREALS? You can tell me per day, per week, or per month.  *Read if necessary: Include cereals eaten at any time of the day.  * Enter number.  * Enter '0' for Never. |
| Answer Codes         | 0-995,<br>Refused,<br>Don't Know   |
| Question Type        | Integer  |
| Field Pane Descripti | on Number  |
| Fill Instructions    |  |
| Special Instructions | Display the text in BOLD GRAY for the FR instruction: Include cereals eaten at any time of the day.  |
| Skip Instructions    | <0,R,D> [goto MILKNO];<br><1-995>[ [goto CEREALTP]   |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHeln            |  |

| Module               | 27   |
|----------------------|--|
| Section Name         | Diet and Nutrition   |
| Part                 |  |
| Question ID          | NAC.010_02.000   |
| Variable Name        | CEREALTP   |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and ('001' <= CEREALNO(e) <='995')   |
| Universe-text        | Sample adults 18+ who ate cereal in the past month   |
| Question Text        | 2 of 2   |
|                      | *Enter time period.  |
| Answer Codes         | 1. Day 2. Week 3. Month Refused Don't know   |
| Question Type        | Pick One- answer pane list   |
| Field Pane Descript  | Time period  |
| Fill Instructions    |  |
| Special Instructions |  |
| Skip Instructions    | [if (CEREALNO gt <10> and CEREALTP eq <1>) or<br>( CEREALNO gt <70> and CEREALTP eq <2>) or<br>( CEREALNO gt <310> and CEREALTP eq <3>) [goto ERR1_CEREALTP] ) |
|                      | Else <1-3,R,D> [goto CERTYP]   |
| Hard Edits           |  |
| Soft Edits           | * [Fill1:CEREALNO] times per [Fill2: CEREALTP] is unusually high. * Please verify.   |
| AssocHelp            |  |

| 3.6. 7. 7            | 27   |   |
|----------------------|--|---|
| Module               | 27   |   |
| Section Name         | Diet and Nutrition   |   |
| Part                 |  |   |
| Question ID          | NAC.015_00.000   |   |
| Variable Name        | CERTYP   |   |
| Universe             | HHSTAT4='S' and (AGE GE '0' CEREALNO(e) <='995')   | 18' and AGE not IN ('997','999')) and ('001' <=   |
| Universe-text        | Sample adults 18+ who ate cer  | eal in the past month   |
| Question Text        | During the past month, what kir up to two.   | nds of cereal did you USUALLY eat? You may choose                                       |
|                      | * Enter the name of the cereal t<br>* If second cereal is mentioned<br>following screen. | o locate in the lookup table. , enter 'Yes' at next screen and enter cereal name at the |
|                      | * If cereal is not found, type ZZ  |   |
| Answer Codes         |  |   |
| Question Type        | Pick one or two from look-up table   |   |
| Field Pane Descripti | on Cereal type   | -   |
| Fill Instructions    |  |   |
| Special Instructions | Question will use look-up table hundred cereals.   | - need to combine hot and cold lists, totaling several                                  |
| Skip Instructions    | <zz> [goto CERTPSP];<br/>else goto CERTYP2</zz>  |   |
|                      | All goto CERTYP2   |   |
| Hard Edits           |  |   |
| Soft Edits           |  |   |
| AssocHelp            |  |   |

| Module               | 27   |
|----------------------|--|
| Section Name         | Diet and Nutrition   |
| Part                 |  |
| Question ID          | NAC.015_00.010   |
| Variable Name        | CERTPSP  |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999')) and CERTYP='ZZ' |
| Universe-text        | Selection in data base not found, go here to input actual response           |
| Question Text        | * Enter the other cereal as reported by the respondent.                      |
| Answer Codes         | allow up to 30 characters<br>Don't allow 'don't know' or 'refused'           |
| Question Type        | Text   |
| Field Pane Descripti | on First other cereal  |
| Fill Instructions    |  |
| Special Instructions | Don't allow 'don't know' or 'refused'  |
| Skip Instructions    | <allow 30=""> [goto CERTYP2]</allow>   |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module               | 27  |
|----------------------|---|
| Section Name         | Diet and Nutrition  |
| Part                 |   |
| Question ID          | NAC.015_01.000  |
| Variable Name        | CERTYP2   |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and ('001' <= CEREALNO(e) <='995')          |
| Universe-text        | Sample adults 18+ who ate cereal in the past month  |
| Question Text        | During the past month, was there another cereal that you usually ate?                                   |
| Answer Codes         | 1. Yes 2. No Refused Don't know   |
| Question Type        | Yes/No  |
| Field Pane Descripti | on Cereal type  |
| Fill Instructions    |   |
| Special Instructions | Question will use look-up table - need to combine hot and cold lists, totaling several hundred cereals. |
| Skip Instructions    | <1> [goto CERTYP3]<br><2, D, R> [goto MILKNO]   |
| Hard Edits           |   |
| Soft Edits           |   |
| AssocHelp            |   |

| Module               | 27  |
|----------------------|---|
| Section Name         | Diet and Nutrition  |
| Part                 |   |
| Question ID          | NAC.015_02.000  |
| Variable Name        | CERTYP3   |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and ('001' <= CEREALNO(e) <='995') CERTYP2(e)='1' |
| Universe-text        | Sample adults 18+ who ate another cereal in the past month  |
| Question Text        | * Enter the name of the cereal to locate in the lookup table.   |
|                      | * If cereal is not found, type ZZ   |
| Answer Codes         |   |
| Question Type        | Pick one or two from look-up table  |
| Field Pane Descripti | on Cereal type2   |
| Fill Instructions    |   |
| Special Instructions | Question will use look-up table - need to combine hot and cold lists, totaling several hundred cereals.       |
| Skip Instructions    | <zz> [goto CERTP3SP];<br/>else goto MILKNO</zz>   |
| Hard Edits           |   |
| Soft Edits           |   |
| AssocHelp            |   |

| Module               | 27  |
|----------------------|---|
| Section Name         | Diet and Nutrition  |
| Part                 |   |
| Question ID          | NAC.015_02.010  |
| Variable Name        | CERTP3SP  |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999')) and CERTYP3='ZZ' |
| Universe-text        | Selection in data base not found, go here to input actual response            |
| Question Text        | * Enter the other cereal as reported by the respondent.                       |
| Answer Codes         | allow up to 30 characters Don't allow 'don't know' or 'refused'               |
| Question Type        | Text  |
| Field Pane Descripti | on Second other cereal  |
| Fill Instructions    |   |
| Special Instructions | Don't allow 'don't know' or 'refused'   |
| Skip Instructions    | <allow 30=""> [goto MILKNO]</allow>   |
| Hard Edits           |   |
| Soft Edits           |   |
| AssocHelp            |   |

| Module                 | 27  |
|------------------------|---|
|                        |   |
| Section Name           | Diet and Nutrition  |
| Part                   |   |
| Question ID            | NAC.020_01.000  |
| Variable Name          | MILKNO  |
| Universe               | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999'))  |
| Universe-text          | Sample adults 18+   |
| Question Text          | 1 of 2  |
|                        | *Read if necessary: During the past month   |
|                        | How often did you have MILK, either to drink or on cereal? Do NOT include soy milk or small amounts of milk in coffee or tea. |
|                        | *Read if necessary: You can tell me per day, per week, or per month.  |
|                        | * Enter '0' for Never.  |
| Answer Codes           |   |
| Question Type          | Integer   |
| Field Pane Description | on Number   |
| Fill Instructions      |   |
| Special Instructions   | Display the text in BOLD GRAY for the FR instruction: During the past month   |
|                        | Display the text in BOLD GRAY for the FR instruction: You can tell me per day, per week, or per month.                        |
| Skip Instructions      | <0,R,D> [goto SODANO];<br><1-995> [goto MILKTP]   |
| Hard Edits             |   |
| Soft Edits             |   |
| AssocHelp              |   |

| Module               | 27   |
|----------------------|--|
| Section Name         | Diet and Nutrition   |
| Part                 |  |
| Question ID          | NAC.020_02.000   |
| Variable Name        | MILKTP   |
| Universe             | (HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and ('001' <= MILKNO(e) <='995')  |
| Universe-text        | Sample adults 18+ who drank milk in past month   |
| Question Text        | 2 of 2   |
|                      | *Enter time period.  |
| Answer Codes         | 1. Day 2. Week 3. Month Refused Don't know   |
| Question Type        | Pick one - answer list pane  |
| Field Pane Descript  | tion Time period   |
| Fill Instructions    |  |
| Special Instructions |  |
| Skip Instructions    | [if (MILKNO gt <10> and MILKTP eq <1>) or<br>(MILKNO gt <70> and MILKTP eq <2>) or<br>( MILKNO gt <310> and MILKTP eq <3>) [goto ERR1_MILKTP] )<br>Else <1-3,R,D> [goto MILKTYP] |
| Hard Edits           |  |
| Soft Edits           | * [Fill1:MILKNO] times per [Fill2: MILKTP] is unusually high. * Please verify.   |
| AssocHelp            |  |

| Module               | 27  |
|----------------------|---|
| Section Name         | Diet and Nutrition  |
| Part                 |   |
| Question ID          | NAC.025_00.000  |
| Variable Name        | MILKTYP   |
| Universe             | (HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and ('001' <= MILKNO(e) <='995')   |
| Universe-text        | Sample adults 18+ who drank milk in past month  |
| Question Text        | What type of milk was it? Was it usually  |
|                      | * Read categories below.  |
|                      | * If respondent drinks soy milk only, go back and change MILKNO to '0'.   |
| Answer Codes         | 1. Whole or regular milk 2. 2% fat or reduced-fat milk 3. 1% fat or low-fat milk (includes 0.5% fat milk or "low-fat" milk no further specified) 4. Fat-free, skim or nonfat milk 5. Other Refused Don't know |
| Question Type        | Pick one - answer list pane   |
| Field Pane Descripti | on Milk type  |
| Fill Instructions    |   |
| Special Instructions | Bold Black Answer Codes to be read.   |
| Skip Instructions    | <1-6,R,D> [goto SODANO]   |
| Hard Edits           |   |
| Soft Edits           |   |
| AssocHeln            |   |

| Module                 | 27   |
|------------------------|--|
| Section Name           | Diet and Nutrition   |
| Part                   |  |
| Question ID            | NAC.030_01.000   |
| Variable Name          | SODANO   |
| Universe               | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999'))   |
| Universe-text          | Sample adults 18+  |
| Question Text          | 1 of 2   |
|                        | During the past month, how often did you drink REGULAR SODA or pop that contains sugar? Do NOT include diet soda. You can tell me per day, per week, or per month.  * Enter '0' for Never. |
| Answer Codes           |  |
| Question Type          | Integer  |
| Field Pane Description | on Number  |
| Fill Instructions      |  |
| Special Instructions   |  |
| Skip Instructions      | <0,R,D> [goto FRJUICNO];<br><1-995>[goto SODATP]   |
| Hard Edits             |  |
| Soft Edits             |  |
| AssocHelp              |  |

| Module               | 27   |
|----------------------|--|
| Section Name         | Diet and Nutrition   |
| Part                 |  |
| Question ID          | NAC.030_02.000   |
| Variable Name        | SODATP   |
| Universe             | (HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and ('001' <= SODANO(e) <='995')  |
| Universe-text        | Sample adults 18+ who drank soda in past month   |
| Question Text        | 2 of 2   |
|                      | *Enter time period.  |
| Answer Codes         | 1. Day 2. Week 3. Month Refused Don't know   |
| Question Type        | Pick One- answer pane list   |
| Field Pane Descript  | ion Time period  |
| Fill Instructions    |  |
| Special Instructions |  |
| Skip Instructions    | [if (SODANO gt <10> and SODATP eq <1>) or<br>(SODANO gt <70> and SODATP eq <2>) or<br>( SODANO gt <310> and SODATP eq <3>) [goto ERR1_SODATP] )<br>Else <1-3,R,D> [goto FRTJUICNO] |
| Hard Edits           |  |
| Soft Edits           | * [Fill1:SODANO] times per [Fill2: SODATP] is unusually high. * Please verify.   |
| AssocHelp            |  |

| Module                             | 27  |
|------------------------------------|---|
| Section Name                       | Diet and Nutrition  |
| Part                               |   |
| Question ID                        | NAC.040_01.000  |
| Variable Name                      | FRJUICNO  |
| Universe                           | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999'))  |
| Universe-text                      | Sample adults 18+   |
| Question Text                      | 1 of 2  |
|                                    | *Read if necessary: During the past month   |
|                                    | How often did you drink 100% PURE fruit juice such as orange, mango, apple, grape and pineapple juices? Do NOT include fruit flavored drinks with added sugar or fruit juice you made at home and added sugar to.  *Read if necessary: You can tell me per day, per week, or per month. |
|                                    | * Enter '0' for Never.  |
| Answer Codes                       | Likel 6 for Novel.  |
| Question Type Field Pane Descripti | Integer  on Number  |
| Fill Instructions                  | Number  |
| Special Instructions               | Display the text in BOLD GRAY for the FR instruction: During the past month   |
|                                    | Display the text in BOLD GRAY for the FR instruction: You can tell me per day, per week, or per month.  |
| Skip Instructions                  | <0,R,D> [goto COFFEEN1];<br><1-995>[goto FRJUICTP]  |
| Hard Edits                         |   |
| Soft Edits                         |   |
| AssocHelp                          |   |

| Module               | 27   |
|----------------------|--|
| Section Name         | Diet and Nutrition   |
| Part                 |  |
| Question ID          | NAC.040_02.000   |
| Variable Name        | FRJUICTP   |
| Universe             | (HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and ('001' <= FRJUICNO(e) <='995')  |
| Universe-text        | Sample adults 18+ who drank fruit juice in past month  |
| Question Text        | 2 of 2   |
|                      | *Enter time period.  |
| Answer Codes         | 1. Day 2. Week 3. Month Refused Don't know   |
| Question Type        | Pick One- answer pane list   |
| Field Pane Descript  | tion Time period   |
| Fill Instructions    |  |
| Special Instructions | S  |
| Skip Instructions    | [if (FRJUICNO gt <10> and FRJUICTP eq <1>) or<br>(FRJUICNO gt <70> and FRJUICTP eq <2>) or<br>(FRJUICNO gt <310> and FRJUICTP eq <3>) [goto ERR1_FRJUICTP])<br>Else <1-3,R,D>[goto COFFEEN1] |
| Hard Edits           |  |
| Soft Edits           | * [Fill1:FRJUICNO] times per [Fill2: FRJUICTP] is unusually high. * Please verify.   |
| AssocHelp            |  |

| Module               | 27   |
|----------------------|--|
| Section Name         | Diet and Nutrition   |
| Part                 |  |
| Question ID          | NAC.042_01.000   |
| Variable Name        | COFFEEN1   |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999'))  |
| Universe-text        | Sample adults 18+  |
| Question Text        | 1 of 2 *Read if necessary: During the past month  How often did you drink COFFEE or tea that had sugar or honey added to it? Include coffee and tea you sweetened yourself and presweetened tea and coffee drinks such |
|                      | as Arizona Iced Tea and Frappuccino. Do not include artificially sweetened coffee or diet tea.   |
|                      | *Read if necessary: You can tell me per day, per week, or per month.   |
|                      | * Enter '0' for Never.   |
| Answer Codes         |  |
| Question Type        | Integer  |
| Field Pane Descripti | on Number  |
| Fill Instructions    |  |
| Special Instructions | Display the text in BOLD GRAY for the FR instruction: During the past month  |
|                      | Display the text in BOLD GRAY for the FR instruction: You can tell me per day, per week, or per month.   |
| Skip Instructions    | <0,R,D> [goto SPORDRNO];<br><1-995> [goto COFFEET1]  |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module               | 27  |
|----------------------|---|
| Section Name         | Diet and Nutrition  |
| Part                 |   |
| Question ID          | NAC.042_02.000  |
| Variable Name        | COFFEET1  |
| Universe             | (HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and ('001' <= COFFEEN1(e) <='995')   |
| Universe-text        | Sample adults 18+ who drank coffee in past month  |
| Question Text        | 2 of 2  |
|                      | *Enter time period.   |
| Answer Codes         | 1. Day 2. Week 3. Month Refused Don't know  |
| Question Type        | Pick One- answer pane list  |
| Field Pane Descript  | tion Time period  |
| Fill Instructions    |   |
| Special Instructions |   |
| Skip Instructions    | [if (COFFEEN1 gt <10> and COFFEET1 eq <1>) or<br>(COFFEEN1 gt <70> and COFFEET1 eq <2>) or<br>( COFFEEN1 gt <310> and COFFEET1 eq <3>) [goto ERR1_COFFEET1] )<br>Else <1-3,R,D> [goto SPORDRNO] |
| Hard Edits           |   |
| Soft Edits           | * [Fill1:COFFEEN1] times per [Fill2: COFFEET1] is unusually high. * Please verify.  |
| AssocHelp            |   |

| Module               | 27   |
|----------------------|--|
| Section Name         | Diet and Nutrition   |
| Part                 |  |
| Question ID          | NAC.045_01.000   |
| Variable Name        | SPORDRNO   |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999'))   |
| Universe-text        | Sample adults 18+  |
| Question Text        | 1 of 2   |
|                      | *Read if necessary: During the past month  |
|                      | How often did you drink SPORTS and ENERGY drinks such as Gatorade, Red Bull, and Vitamin water?        |
|                      | *Read if necessary: You can tell me per day, per week, or per month.                                   |
|                      | * Enter '0' for Never.   |
| Answer Codes         |  |
| Question Type        | Integer  |
| Field Pane Descripti | on Number  |
| Fill Instructions    |  |
| Special Instructions | Display the text in BOLD GRAY for the FR instruction: During the past month                            |
|                      | Display the text in BOLD GRAY for the FR instruction: You can tell me per day, per week, or per month. |
| Skip Instructions    | <0,R,D> [goto FRTDRNO];<br><1-995> [goto SPORDRTP]   |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module               | 27   |
|----------------------|--|
| Section Name         | Diet and Nutrition   |
| Part                 |  |
| Question ID          | NAC.045_02.000   |
| Variable Name        | SPORDRTP   |
| Universe             | (HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and ('001' <= SPORDRNO(e) <='995')  |
| Universe-text        | Sample adults 18+ who drank sports drink in past month   |
| Question Text        | 2 of 2   |
|                      | *Enter time period.  |
| Answer Codes         | 1. Day 2. Week 3. Month Refused Don't know   |
| Question Type        | Pick One- answer pane list   |
| Field Pane Descript  | tion Time period   |
| Fill Instructions    |  |
| Special Instructions |  |
| Skip Instructions    | [if (SPORDRNO gt <10> and SPORDRTP eq <1>) or<br>(SPORDRNO gt <70> and SPORDRTP eq <2>) or<br>(SPORDRNO gt <310> and SPORDRTP eq <3>) [goto ERR1_SPORDRTP])<br>Else <1-3,R,D> [goto FRTDRNO] |
| Hard Edits           |  |
| Soft Edits           | * [Fill1:SPORDRNO] times per [Fill2: SPORDRTP] is unusually high. * Please verify.   |
| AssocHelp            |  |

| Module               | 27  |
|----------------------|---|
| Section Name         | Diet and Nutrition  |
| Part                 |   |
| Question ID          | NAC.060_01.000  |
| Variable Name        | FRTDRNO   |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999'))  |
| Universe-text        | Sample adults 18+   |
| Question Text        | 1 of 2  |
|                      | *Read if necessary: During the past month   |
|                      | How often did you drink sweetened fruit drinks, such as Kool-aid, cranberry and lemonade? Include fruit drinks you made at home and added sugar to. |
|                      | *Read if necessary: You can tell me per day, per week, or per month.  |
|                      | * Enter '0' for Never.  |
| Answer Codes         |   |
| Question Type        | Integer   |
| Field Pane Descripti | on Number   |
| Fill Instructions    |   |
| Special Instructions | Display the text in BOLD GRAY for the FR instruction: During the past month   |
|                      | Display the text in BOLD GRAY for the FR instruction: You can tell me per day, per week, or per month.  |
| Skip Instructions    | <0,R,D> [goto FRUITNO];<br><1-995> [goto FRTDRTP]   |
| Hard Edits           |   |
| Soft Edits           |   |
| AssocHelp            |   |

| Module               | 27  |
|----------------------|---|
| Section Name         | Diet and Nutrition  |
| Part                 |   |
| Question ID          | NAC.060_02.000  |
| Variable Name        | FRTDRTP   |
| Universe             | (HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and ('001' <= FRTDRNO(e) <='995')  |
| Universe-text        | Sample adults 18+ who drank fruit drinks in past month  |
| Question Text        | 2 of 2  |
|                      | *Enter time period.   |
| Answer Codes         | 1. Day 2. Week 3. Month Refused Don't know  |
| Question Type        | Pick One- answer pane list  |
| Field Pane Descrip   | tion Time period  |
| Fill Instructions    |   |
| Special Instructions | s   |
| Skip Instructions    | [if (FRTDRNO gt <10> and FRTDRTP eq <1>) or<br>(FRTDRNO gt <70> and FRTDRTP eq <2>) or<br>(FRTDRNO gt <310> and FRTDRTP eq <3>) [goto ERR1_FRTDRTP])<br>Else <1-3,R,D> [goto FRUITNO] |
| Hard Edits           |   |
| Soft Edits           | * [Fill1:FRTDRNO] times per [Fill2: FRTDRTP] is unusually high. * Please verify.  |
| AssocHelp            |   |

| Module               | 27   |
|----------------------|--|
| Section Name         | Diet and Nutrition   |
| Part                 |  |
| Question ID          | NAC.070_01.000   |
| Variable Name        | FRUITNO  |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999'))   |
| Universe-text        | Sample adults 18+  |
| Question Text        | 1 of 2   |
|                      | *Read if necessary: During the past month  |
|                      | How often did you eat FRUIT? Include fresh, frozen, or canned fruit. Do NOT include juices.            |
|                      | *Read if necessary: You can tell me per day, per week, or per month.                                   |
|                      | .* Enter '0' for Never.  |
| Answer Codes         |  |
| Question Type        | Integer  |
| Field Pane Descripti | on Number  |
| Fill Instructions    |  |
| Special Instructions | Display the text in BOLD GRAY for the FR instruction: During the past month                            |
|                      | Display the text in BOLD GRAY for the FR instruction: You can tell me per day, per week, or per month. |
| Skip Instructions    | <0,R,D> [goto SALADNO];<br><1-995> [goto FRUITTP]  |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module               | 27  |
|----------------------|---|
| Section Name         | Diet and Nutrition  |
| Part                 |   |
| Question ID          | NAC.070_02.000  |
| Variable Name        | FRUITTP   |
| Universe             | (HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and ('001' <= FRUITNO(e) <='995')  |
| Universe-text        | Sample adults 18+ who ate fruit in past month   |
| Question Text        | 2 of 2  |
|                      | *Enter time period.   |
| Answer Codes         | 1. Day 2. Week 3. Month Refused Don't know  |
| Question Type        | Pick One- answer pane list  |
| Field Pane Descript  | ion Time period   |
| Fill Instructions    |   |
| Special Instructions |   |
| Skip Instructions    | [if (FRUITNO gt <10> and FRUITTP eq <1>) or<br>(FRUITNO gt <70> and FRUITTP eq <2>) or<br>(FRUITNO gt <310> and FRUITTP eq <3>) [goto ERR1_FRUITTP])<br>Else <1-3,R,D> [goto SALADNO] |
| Hard Edits           |   |
| Soft Edits           | * [Fill1:FRUITNO] times per [Fill2: FRUITTP] is unusually high. * Please verify.  |
| AssocHelp            |   |

| Module               | 27   |
|----------------------|--|
| Section Name         | Diet and Nutrition   |
| Part                 |  |
| Question ID          | NAC.090_01.000   |
| Variable Name        | SALADNO  |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999'))   |
| Universe-text        | Sample adults 18+  |
| Question Text        | 1 of 2   |
|                      | *Read if necessary: During the past month  |
|                      | How often did you eat a green leafy or lettuce SALAD, with or without other vegetables?                |
|                      | *Read if necessary: You can tell me per day, per week, or per month.                                   |
|                      | * Enter '0' for Never.   |
| Answer Codes         |  |
| Question Type        | Integer  |
| Field Pane Descripti | on Number  |
| Fill Instructions    |  |
| Special Instructions | Display the text in BOLD GRAY for the FR instruction: During the past month                            |
|                      | Display the text in BOLD GRAY for the FR instruction: You can tell me per day, per week, or per month. |
| Skip Instructions    | <0,R,D> [goto FRIESNO];<br><1-995> [goto SALADTP]  |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module               | 27  |
|----------------------|---|
| Section Name         | Diet and Nutrition  |
| Part                 |   |
| Question ID          | NAC.090_02.000  |
| Variable Name        | SALADTP   |
| Universe             | (HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and ('001' <= SALADNO(e) <='995')  |
| Universe-text        | Sample adults 18+ who ate salad in past month   |
| Question Text        | 2 of 2  |
|                      | *Enter time period.   |
| Answer Codes         | 1. Day 2. Week 3. Month Refused Don't know  |
| Question Type        | Pick One- answer pane list  |
| Field Pane Descript  | tion Time period  |
| Fill Instructions    |   |
| Special Instructions |   |
| Skip Instructions    | [if (SALADNO gt <10> and SALADTP eq <1>) or<br>(SALADNO gt <70> and SALADTP eq <2>) or<br>(SALADNO gt <310> and SALADTP eq <3>) [goto ERR1_SALADTP])<br>Else <1-3,R,D> [goto FRIESNO] |
| Hard Edits           |   |
| Soft Edits           | * [Fill1:SALADNO] times per [Fill2: SALADTP] is unusually high. * Please verify.  |
| AssocHelp            |   |

| Module               | 27  |
|----------------------|---|
| Section Name         | Diet and Nutrition  |
| Part                 |   |
| Question ID          | NAC.100_01.000  |
| Variable Name        | FRIESNO   |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999'))   |
| Universe-text        | Sample adults 18+   |
| Question Text        | 1 of 2  |
|                      | *Read if necessary: During the past month   |
|                      | How often did you eat any kind of FRIED POTATOES, including French fries, home fries, or hash brown potatoes? |
|                      | *Read if necessary: You can tell me per day, per week, or per month.  |
|                      | * Enter '0' for Never.  |
| Answer Codes         |   |
| Question Type        | Integer   |
| Field Pane Descripti | on Number   |
| Fill Instructions    |   |
| Special Instructions | Display the text in BOLD GRAY for the FR instruction: During the past month                                   |
|                      | Display the text in BOLD GRAY for the FR instruction: You can tell me per day, per week, or per month.        |
| Skip Instructions    | <0,R,D> [goto POTATONO];<br><1-995> [goto FRIESTP]  |
| Hard Edits           |   |
| Soft Edits           |   |
| AssocHelp            |   |

| Module               | 27  |
|----------------------|---|
| Section Name         | Diet and Nutrition  |
| Part                 |   |
| Question ID          | NAC.100_02.000  |
| Variable Name        | FRIESTP   |
| Universe             | (HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and ('001' <= FRIESNO(e) <='995')  |
| Universe-text        | Sample adults 18+ who ate fried potatoes in past month  |
| Question Text        | 2 of 2  |
|                      | *Enter time period.   |
| Answer Codes         | 1. Day 2. Week 3. Month Refused Don't know  |
| Question Type        | Pick One- answer pane list  |
| Field Pane Descript  | ion Time period   |
| Fill Instructions    |   |
| Special Instructions |   |
| Skip Instructions    | [if (FRIESNO gt <10> and FRIESTP eq <1>) or<br>(FRIESNO gt <70> and FRIESTP eq <2>) or<br>(FRIESNO gt <310> and FRIESTP eq <3>) [goto ERR1_FRIESTP] )<br>Else <1-3,R,D> [goto POTATONO] |
| Hard Edits           |   |
| Soft Edits           | * [Fill1:FRIESNO] times per [Fill2: FRIESTP] is unusually high. * Please verify.  |
| AssocHelp            |   |

| Module               | 27   |
|----------------------|--|
| Section Name         | Diet and Nutrition   |
| Part                 |  |
| Question ID          | NAC.110_01.000   |
| Variable Name        | POTATONO   |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999'))  |
| Universe-text        | Sample adults 18+  |
| Question Text        | 1 of 2   |
|                      | *Read if necessary: During the past month  |
|                      | How often did you eat any OTHER KIND OF POTATOES, such as baked, boiled, mashed potatoes, sweet potatoes, or potato salad? |
|                      | *Read if necessary: You can tell me per day, per week, or per month.   |
|                      | *Read if necessary: INCLUDE red-skinned and Yukon Gold potatoes.   |
|                      | * Enter '0' for Never.   |
| Answer Codes         |  |
| Question Type        | Integer  |
| Field Pane Descripti | on Number  |
| Fill Instructions    |  |
| Special Instructions | Display the text in BOLD GRAY for the FR instruction: During the past month  |
|                      | Display the text in BOLD GRAY for the FR instruction: You can tell me per day, per week, or per month.                     |
| Skip Instructions    | <0,R,D> [goto BEANSNO];<br><1-995> [goto POTATOTP]   |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module              | 27  |
|---------------------|---|
| Section Name        | Diet and Nutrition  |
| Part                |   |
| Question ID         | NAC.110_02.000  |
| Variable Name       | POTATOTP  |
| Universe            | (HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and ('001' <= POTATONO(e) <='995')   |
| Universe-text       | Sample adults 18+ who ate other potatoes in the past month  |
| Question Text       | 2 of 2  |
|                     | *Enter time period.   |
| Answer Codes        | 1. Day 2. Week 3. Month Refused Don't know  |
| Question Type       | Pick One- answer pane list  |
| Field Pane Descrip  | otion Time period   |
| Fill Instructions   |   |
| Special Instruction |   |
| Skip Instructions   | [if (POTATONO gt <10> and POTATOTP eq <1>) or (POTATONO gt <70> and POTATOTP eq <2>) or (POTATONO gt <310> and POTATOTP eq <3>) [goto ERR1_POTATOTP]) Else <1-3,R,D> [goto BEANSNO] |
| Hard Edits          |   |
| Soft Edits          | * [Fill1:POTATONO] times per [Fill2: POTATOTP] is unusually high. * Please verify.  |
| AssocHelp           |   |

| Module               | 27   |
|----------------------|--|
| Section Name         | Diet and Nutrition   |
| Part                 |  |
| Question ID          | NAC.120_01.000   |
| Variable Name        | BEANSNO  |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999'))   |
| Universe-text        | Sample adults 18+  |
| Question Text        | 1 of 2   |
|                      | *Read if necessary: During the past month  |
|                      | How often did you eat refried beans, baked beans, beans in soup, pork and beans or any other type of cooked dried beans? Do NOT include green beans. |
|                      | *Read if necessary: You can tell me per day, per week, or per month.   |
|                      | * Enter '0' for Never.   |
| Answer Codes         |  |
| Question Type        | Integer  |
| Field Pane Descripti | on Number  |
| Fill Instructions    |  |
| Special Instructions | Display the text in BOLD GRAY for the FR instruction: During the past month  |
|                      | Display the text in BOLD GRAY for the FR instruction: You can tell me per day, per week, or per month.   |
| Skip Instructions    | <0,R,D> [goto BRRICENO];<br><1-995> [goto BEANSTP]   |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module               | 27   |
|----------------------|--|
| Section Name         | Diet and Nutrition   |
| Part                 |  |
| Question ID          | NAC.120_02.000   |
| Variable Name        | BEANSTP  |
| Universe             | (HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and ('001' <= BEANSNO(e) <='995')   |
| Universe-text        | Sample adults 18+ who ate beans in past month  |
| Question Text        | 2 of 2   |
|                      | *Enter time period.  |
| Answer Codes         | 1. Day 2. Week 3. Month Refused Don't know   |
| Question Type        | Pick One- answer pane list   |
| Field Pane Descript  | ion Time period  |
| Fill Instructions    |  |
| Special Instructions |  |
| Skip Instructions    | [if (BEANSNO gt <10> and BEANSTP eq <1>) or<br>(BEANSNO gt <70> and BEANSTP eq <2>) or<br>(BEANSNO gt <310> and BEANSTP eq <3>) [goto ERR1_BEANSTP])<br>Else <1-3,R,D> [goto BRRICENO] |
| Hard Edits           |  |
| Soft Edits           | * [Fill1:BEANSNO] times per [Fill2: BEANSNO] is unusually high. * Please verify.   |
| AssocHelp            |  |

| Module               | 27  |
|----------------------|---|
| Section Name         | Diet and Nutrition  |
| Part                 |   |
| Question ID          | NAC.125_01.000  |
| Variable Name        | BRRICENO  |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999'))  |
| Universe-text        | Sample adults 18+   |
| Question Text        | 1 of 2  |
|                      | *Read if necessary: During the past month   |
|                      | How often did you eat BROWN RICE or other cooked whole grains, such as bulgur, cracked wheat, or millet? Do NOT include white rice. |
|                      | *Read if necessary: You can tell me per day, per week, or per month.  |
|                      | * Enter '0' for Never.  |
| Answer Codes         |   |
| Question Type        | Integer   |
| Field Pane Descripti | on Number   |
| Fill Instructions    |   |
| Special Instructions | Display the text in BOLD GRAY for the FR instruction: During the past month   |
|                      | Display the text in BOLD GRAY for the FR instruction: You can tell me per day, per week, or per month.                              |
| Skip Instructions    | <0,R,D> [goto OVEGNO];<br><1-995> [goto BRRICETP]   |
| Hard Edits           |   |
| Soft Edits           |   |
| AssocHelp            |   |

| Module               | 27  |
|----------------------|---|
| Section Name         | Diet and Nutrition  |
| Part                 |   |
| Question ID          | NAC.125_02.000  |
| Variable Name        | BRRICETP  |
| Universe             | (HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and ('001' <= BRRICENO(e) <='995')   |
| Universe-text        | Sample adults 18+ who ate brown rice in past month  |
| Question Text        | 2 of 2  |
|                      | *Enter time period.   |
| Answer Codes         | 1. Day 2. Week 3. Month Refused Don't know  |
| Question Type        | Pick One- answer pane list  |
| Field Pane Descripti | Time period   |
| Fill Instructions    |   |
| Special Instructions |   |
| Skip Instructions    | [if (BRRICENO gt <10> and BRRICETP eq <1>) or<br>(BRRICENO gt <70> and BRRICETP eq <2>) or<br>(BRRICENO gt <310> and BRRICETP eq <3>) [goto ERR1_BRRICETP])<br>Else <1-3,R,D> [goto OVEGNO] |
| Hard Edits           |   |
| Soft Edits           | * [Fill1:BRRICENO] times per [Fill2: BRRICETP] is unusually high. * Please verify.  |
| AssocHelp            |   |

| Module               | 27  |
|----------------------|---|
| Section Name         | Diet and Nutrition  |
| Part                 |   |
| Question ID          | NAC.130_01.000  |
| Variable Name        | OVEGNO  |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999'))  |
| Universe-text        | Sample adults 18+   |
| Question Text        | 1 of 2  |
|                      | *Read if necessary: During the past month   |
|                      | Not including what you just told me about (lettuce salads, potatoes, cooked dried beans), how often did you eat OTHER VEGETABLES? |
|                      | *Read if necessary: You can tell me per day, per week, or per month.  |
|                      | * Enter '0' for Never.  |
| Answer Codes         |   |
| Question Type        | Integer   |
| Field Pane Descripti | on Number   |
| Fill Instructions    |   |
| Special Instructions | Display the text in BOLD GRAY for the FR instruction: During the past month   |
|                      | Display the text in BOLD GRAY for the FR instruction: You can tell me per day, per week, or per month.                            |
| Skip Instructions    | <0,R,D> [goto SALSANO];<br><1-995> [goto OVEGTP]  |
| Hard Edits           |   |
| Soft Edits           |   |
| AssocHelp            | H_OVEGNO  |

| Module                 | 27  |
|------------------------|---|
| Section Name           | Diet and Nutrition  |
| Part                   |   |
| Question ID            | NAC.130_01.000_H  |
| Variable Name          | H_OVEGNO  |
| Universe               |   |
| Universe-text          |   |
| Question Text          | COUNT any form of the vegetable (raw, cooked, canned, or frozen). |
| Answer Codes           |   |
| Question Type          | Help Screen   |
| Field Pane Description | on  |
| Fill Instructions      |   |
| Special Instructions   | Associated screens: OVEGNO  |
| Skip Instructions      | <0,R,D> [goto SALSANO];<br><1-995> [goto OVEGTP]                  |
| Hard Edits             |   |
| Soft Edits             |   |
| AssocHelp              |   |

| Module               | 27  |
|----------------------|---|
| Section Name         | Diet and Nutrition  |
| Part                 |   |
| Question ID          | NAC.130_02.000  |
| Variable Name        | OVEGTP  |
| Universe             | (HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and ('001' <= OVEGNO(e) <='995')   |
| Universe-text        | Sample adults 18+ who ate other vegetables in past month  |
| Question Text        | 2 of 2  |
|                      | *Enter time period.   |
| Answer Codes         | 1. Day 2. Week 3. Month Refused Don't know  |
| Question Type        | Pick One- answer pane list  |
| Field Pane Descript  | ion Time period   |
| Fill Instructions    |   |
| Special Instructions |   |
| Skip Instructions    | [if (OVEGNO gt <10> and OVEGTP eq <1>) or<br>(OVEGNO gt <70> and OVEGTP eq <2>) or<br>(OVEGNO gt <310> and OVEGTP eq <3>) [goto ERR1_OVEGTP] )<br>Else <1-3,R,D> [goto SALSANO] |
| Hard Edits           |   |
| Soft Edits           | * [Fill1:OVEGNO] times per [Fill2: OVEGTP] is unusually high. * Please verify.  |
| AssocHelp            |   |

| Module               | 27   |
|----------------------|--|
| Section Name         | Diet and Nutrition   |
| Part                 |  |
| Question ID          | NAC.131_01.000   |
| Variable Name        | SALSANO  |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999'))   |
| Universe-text        | Sample adults 18+  |
| Question Text        | 1 of 2   |
|                      | *Read if necessary: During the past month  |
|                      | How often did you have Mexican-type SALSA made with tomato?  |
|                      | *Read if necessary: You can tell me per day, per week, or per month.                                   |
|                      | * Enter '0' for Never.   |
| Answer Codes         |  |
| Question Type        | Integer  |
| Field Pane Descripti | on Number  |
| Fill Instructions    |  |
| Special Instructions | Display the text in BOLD GRAY for the FR instruction: During the past month                            |
|                      | Display the text in BOLD GRAY for the FR instruction: You can tell me per day, per week, or per month. |
| Skip Instructions    | <0,R,D> [goto PIZZANO];<br><1-995> [goto SALSATP]  |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module               | 27  |
|----------------------|---|
| Section Name         | Diet and Nutrition  |
| Part                 |   |
| Question ID          | NAC.131_02.000  |
| Variable Name        | SALSATP   |
| Universe             | (HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and ('001' <= SALSANO(e) <='995')  |
| Universe-text        | Sample adults 18+ who ate salsa in past month   |
| Question Text        | 2 of 2  |
|                      | *Enter time period.   |
| Answer Codes         | 1. Day 2. Week 3. Month Refused Don't know  |
| Question Type        | Pick One- answer pane list  |
| Field Pane Descripe  | tion Time period  |
| Fill Instructions    |   |
| Special Instructions | S   |
| Skip Instructions    | [if (SALSANO gt <10> and SALSATP eq <1>) or<br>(SALSANO gt <70> and SALSATP eq <2>) or<br>(SALSANO gt <310> and SALSATP eq <3>) [goto ERR1_SALSATP])<br>Else <1-3,R,D> [goto PIZZANO] |
| Hard Edits           |   |
| Soft Edits           | * [Fill1:SALSANO] times per [Fill2: SALSATP] is unusually high. * Please verify.  |
| AssocHelp            |   |

| Module               | 27   |
|----------------------|--|
| Section Name         | Diet and Nutrition   |
| Part                 |  |
| Question ID          | NAC.132_01.000   |
| Variable Name        | PIZZANO  |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999'))   |
| Universe-text        | Sample adults 18+  |
| Question Text        | 1 of 2   |
|                      | *Read if necessary: During the past month  |
|                      | How often did you eat PIZZA? Include frozen pizza, fast food pizza, and homemade pizza. You can tell me per day, per week, or per month. |
|                      | * Enter '0' for Never.   |
| Answer Codes         |  |
| Question Type        | Integer  |
| Field Pane Descripti | on Number  |
| Fill Instructions    |  |
| Special Instructions | Display the text in BOLD GRAY for the FR instruction: During the past month  |
| Skip Instructions    | <0,R,D> [goto TOMSAUNO];<br><1-995> [goto PIZZATP]   |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module               | 27   |
|----------------------|--|
| Section Name         | Diet and Nutrition   |
| Part                 |  |
| Question ID          | NAC.132_02.000   |
| Variable Name        | PIZZATP  |
| Universe             | (HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and ('001' <= PIZZANO(e) <='995')   |
| Universe-text        | Sample adults 18+ who ate pizza in past month  |
| Question Text        | 2 of 2   |
|                      | *Enter time period.  |
| Answer Codes         | 1. Day 2. Week 3. Month Refused Don't know   |
| Question Type        | Pick One- answer pane list   |
| Field Pane Descript  | tion Time period   |
| Fill Instructions    |  |
| Special Instructions |  |
| Skip Instructions    | [if (PIZZANO gt <10> and PIZZATP eq <1>) or<br>(PIZZANO gt <70> and PIZZATP eq <2>) or<br>(PIZZANO gt <310> and PIZZATP eq <3>) [goto ERR1_PIZZATP])<br>Else <1-3,R,D> [goto TOMSAUNO] |
| Hard Edits           |  |
| Soft Edits           | * [Fill1:PIZZANO] times per [Fill2: PIZZATP] is unusually high. * Please verify.   |
| AssocHelp            |  |

| Module               | 27  |
|----------------------|---|
| Section Name         | Diet and Nutrition  |
| Part                 |   |
| Question ID          | NAC.133_01.000  |
| Variable Name        | TOMSAUNO  |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999'))  |
| Universe-text        | Sample adults 18+   |
| Question Text        | 1 of 2  |
|                      | *Read if necessary: During the past month   |
|                      | How often did you have TOMATO SAUCES such as with spaghetti or noodles or mixed into foods such as lasagna? Do not include tomato sauce on pizza. |
|                      | *Read if necessary: You can tell me per day, per week, or per month.  |
|                      | * Enter '0' for Never.  |
| Answer Codes         |   |
| Question Type        | Integer   |
| Field Pane Descripti | on Number   |
| Fill Instructions    |   |
| Special Instructions | Display the text in BOLD GRAY for the FR instruction: During the past month   |
|                      | Display the text in BOLD GRAY for the FR instruction: You can tell me per day, per week, or per month.  |
| Skip Instructions    | <0,R,D> [goto CHEESENO];<br><1-995> [goto TOMSAUTP]   |
| Hard Edits           |   |
| Soft Edits           |   |
| AssocHelp            |   |

| Module               | 27  |
|----------------------|---|
| Section Name         | Diet and Nutrition  |
| Part                 |   |
| Question ID          | NAC.133_02.000  |
| Variable Name        | TOMSAUTP  |
| Universe             | (HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and ('001' <= TOMSAUNO(e) <='995')   |
| Universe-text        | Sample adults 18+ who ate tomoto sauces in past month   |
| Question Text        | 2 of 2  |
|                      | *Enter time period.   |
| Answer Codes         | 1. Day 2. Week 3. Month Refused Don't know  |
| Question Type        | Pick One- answer pane list  |
| Field Pane Descrip   | tion Time period  |
| Fill Instructions    |   |
| Special Instructions | s   |
| Skip Instructions    | [if (TOMSAUNO gt <10> and TOMSAUTP eq <1>) or<br>(TOMSAUNO gt <70> and TOMSAUTP eq <2>) or<br>(TOMSAUNO gt <310> and TOMSAUTP eq <3>) [goto ERR1_TOMSAUTP])<br>Else <1-3,R,D> [goto CHEESENO] |
| Hard Edits           |   |
| Soft Edits           | * [Fill1:TOMSAUNO] times per [Fill2: TOMSAUTP] is unusually high. * Please verify.  |
| AssocHelp            |   |

| Module               | 27   |
|----------------------|--|
| Section Name         | Diet and Nutrition   |
| Part                 |  |
| Question ID          | NAC.134_01.000   |
| Variable Name        | CHEESENO   |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999'))  |
| Universe-text        | Sample adults 18+  |
| Question Text        | 1 of 2   |
|                      | *Read if necessary: During the past month  |
|                      | How often did you eat any kind of CHEESE? Include cheese as a snack, cheese on burgers, sandwiches, and cheese in foods such as lasagna, quesadillas, or casseroles. Do not include cheese on pizza. |
|                      | *Read if necessary: You can tell me per day, per week, or per month.   |
|                      | * Enter '0' for Never.   |
| Answer Codes         |  |
| Question Type        | Integer  |
| Field Pane Descripti | on Number  |
| Fill Instructions    |  |
| Special Instructions | Display the text in BOLD GRAY for the FR instruction: During the past month  |
|                      | Display the text in BOLD GRAY for the FR instruction: You can tell me per day, per week, or per month.   |
| Skip Instructions    | <0,R,D> [goto REDMETNO];<br><1-995> [goto CHEESETP]  |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module               | 27  |
|----------------------|---|
| Section Name         | Diet and Nutrition  |
| Part                 |   |
| Question ID          | NAC.134_02.000  |
| Variable Name        | CHEESETP  |
| Universe             | (HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and ('001' <= CHEESENO(e) <='995')   |
| Universe-text        | Sample adults 18+ who ate cheese in past month  |
| Question Text        | 2 of 2  |
|                      | *Enter time period.   |
| Answer Codes         | 1. Day 2. Week 3. Month Refused Don't know  |
| Question Type        | Pick One- answer pane list  |
| Field Pane Descript  | tion Time period  |
| Fill Instructions    |   |
| Special Instructions |   |
| Skip Instructions    | [if (CHEESENO gt <10> and CHEESETP eq <1>) or<br>(CHEESENO gt <70> and CHEESETP eq <2>) or<br>(CHEESENO gt <310> and CHEESETP eq <3>) [goto ERR1_CHEESETP])<br>Else <1-3,R,D> [goto REDMETNO] |
| Hard Edits           |   |
| Soft Edits           | * [Fill1:CHEESENO] times per [Fill2: CHEESETP] is unusually high. * Please verify.  |
| AssocHelp            |   |

27 **Module Diet and Nutrition** Section Name **Part** Question ID NAC.136\_01.000 Variable Name **REDMETNO** HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999')) Universe Universe-text Sample adults 18+ Question Text (book) CAN2 1 of 2 \*Read if necessary: During the past month . . . Looking at this card, how often did you eat RED MEAT, such as beef, pork, ham, or sausage? Do NOT include chicken, turkey, or seafood. \*Read if necessary: You can tell me per day, per week, or per month. \* Enter '0' for Never. **Answer Codes** Question Type Integer Field Pane Description Number Fill Instructions Display the text in BOLD GRAY for the FR instruction: During the past month . . . **Special Instructions** Display the text in BOLD GRAY for the FR instruction: You can tell me per day, per week, or per month. INFORMATIONAL PURPOSE ONLY ABOUT THE FLASHCARD: **EXAMPLES OF RED MEAT** Beef Veal Pork Bacon Ham Lamb Hotdogs and cold cuts made with red meats Include: Sandwiches Lasagna Stew } made with red meats Pizza Hamburgers Skip Instructions <0,R,D> [goto PROMETNO];

<1-995> [goto REDMETTP]

| Hard Edits           |   |
|----------------------|---|
| Soft Edits           |   |
| AssocHelp            |   |
| Module               | 27  |
| Section Name         | Diet and Nutrition  |
| Part                 |   |
| Question ID          | NAC.136_02.000  |
| Variable Name        | REDMETTP  |
| Universe             | (HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and ('001' <= REDMETNO(e) <='995')   |
| Universe-text        | Sample adults 18+ who ate red meat in past month  |
| Question Text        | 2 of 2  |
|                      | *Enter time period.   |
| Answer Codes         | 1. Day 2. Week 3. Month Refused Don't know  |
| Question Type        | Pick One- answer pane list  |
| Field Pane Descripti | on Time period  |
| Fill Instructions    |   |
| Special Instructions |   |
| Skip Instructions    | [if (REDMETNO gt <10> and REDMETTP eq <1>) or<br>(REDMETNO gt <70> and REDMETTP eq <2>) or<br>(REDMETNO gt <310> and REDMETTP eq <3>) [goto ERR1_REDMETTP])<br>Else <1-3,R,D> [goto PROMETNO] |
| Hard Edits           |   |
| Soft Edits           | * [Fill1:REDMETNO] times per [Fill2: REDMETTP] is unusually high. * Please verify.  |
| AssocHelp            |   |

27 Module **Diet and Nutrition** Section Name **Part** Question ID NAC.137\_01.000 Variable Name **PROMETNO** HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999')) Universe Universe-text Sample adults 18+ Question Text 1 of 2 (book) CAN3 \*Read if necessary: During the past month . . . Looking at this card, how often did you eat PROCESSED MEAT, such as bacon, lunch meats, or hot dogs? \*Read if necessary: You can tell me per day, per week, or per month. \* Enter '0' for Never. Answer Codes Question Type Integer Field Pane Description Number Fill Instructions Display the text in BOLD GRAY for the FR instruction: During the past month . . . **Special Instructions** Display the text in BOLD GRAY for the FR instruction: You can tell me per day, per week, or per month. INFORMATIONAL PURPOSE ONLY ABOUT THE FLASHCARD: CARD CAN3 **EXAMPLES OF PROCESSED MEAT** Cold cuts Luncheon meats Hotdogs Bacon Ham Pastrami Salami Sausages **Bratwursts** Corned beef Include: Sandwiches Soups } made with those meats Pizza

|                      | Casseroles   |
|----------------------|--|
| Skip Instructions    | <0,R,D> [goto BREADNO];<br><1-995> [goto PROMETTP]   |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |
| Module               | 27   |
| Section Name         | Diet and Nutrition   |
| Part                 |  |
| Question ID          | NAC.137_02.000   |
| Variable Name        | PROMETTP   |
| Universe             | (HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and ('001' <= PROMETNO(e) <='995')  |
| Universe-text        | Sample adults 18+ who ate processed meat in past month   |
| Question Text        | 2 of 2   |
|                      | *Enter time period.  |
| Answer Codes         | 1. Day 2. Week 3. Month Refused Don't know   |
| Question Type        | Pick One- answer pane list   |
| Field Pane Descript  | ion Time period  |
| Fill Instructions    |  |
| Special Instructions |  |
| Skip Instructions    | [if (PROMETNO gt <10> and PROMETTP eq <1>) or<br>(PROMETNO gt <70> and PROMETTP eq <2>) or<br>(PROMETNO gt <310> and PROMETTP eq <3>) [goto ERR1_PROMETTP])<br>Else <1-3,R,D> [goto BREADNO] |
| Hard Edits           |  |
| Soft Edits           | * [Fill1:PROMETNO] times per [Fill2: PROMETTP] is unusually high. * Please verify.   |
| AssocHelp            |  |

| Module               | 27   |
|----------------------|--|
| Section Name         | Diet and Nutrition   |
| Part                 |  |
| Question ID          | NAC.138_01.000   |
| Variable Name        | BREADNO  |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999'))  |
| Universe-text        | Sample adults 18+  |
| Question Text        | 1 of 2   |
|                      | *Read if necessary: During the past month  |
|                      | How often did you eat WHOLE GRAIN BREAD including toast, rolls and in sandwiches? Whole grain breads include whole wheat, rye, oatmeal and pumpernickel. Do NOT include white bread. |
|                      | *Read if necessary: You can tell me per day, per week, or per month.   |
|                      | *Read if necessary: INCLUDE cracked wheat, multi-grain and bran breads.  |
|                      | * Enter '0' for Never.   |
| Answer Codes         |  |
| Question Type        | Integer  |
| Field Pane Descripti |  |
| Fill Instructions    |  |
| Special Instructions | Display the text in BOLD GRAY for the FR instruction: During the past month  |
|                      | Display the text in BOLD GRAY for the FR instruction: You can tell me per day, per week, or per month.   |
| Skip Instructions    | <0,R,D> [goto CANDYNO];<br><1-995> [goto BREADTP]  |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module               | 27  |
|----------------------|---|
| Section Name         | Diet and Nutrition  |
| Part                 |   |
| Question ID          | NAC.138_02.000  |
| Variable Name        | BREADTP   |
| Universe             | (HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and ('001' <= BREADNO(e) <='995')  |
| Universe-text        | Sample adults 18+ who ate whole grain bread in past month   |
| Question Text        | 2 of 2  |
|                      | *Enter time period.   |
| Answer Codes         | 1. Day 2. Week 3. Month Refused Don't know  |
| Question Type        | Pick One- answer pane list  |
| Field Pane Descript  | tion Time period  |
| Fill Instructions    |   |
| Special Instructions |   |
| Skip Instructions    | [if (BREADNO gt <10> and BREADTP eq <1>) or<br>(BREADNO gt <70> and BREADTP eq <2>) or<br>(BREADNO gt <310> and BREADTP eq <3>) [goto ERR1_BREADTP])<br>Else <1-3,R,D> [goto CANDYNO] |
| Hard Edits           |   |
| Soft Edits           | * [Fill1:BREADNO] times per [Fill2: BREADTP] is unusually high. * Please verify.  |
| AssocHelp            |   |

| Module               | 27   |
|----------------------|--|
| Section Name         | Diet and Nutrition   |
| Part                 |  |
| Question ID          | NAC.139_01.000   |
| Variable Name        | CANDYNO  |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999'))   |
| Universe-text        | Sample adults 18+  |
| Question Text        | 1 of 2   |
|                      | *Read if necessary: During the past month  |
|                      | How often did you eat CHOCOLATE, or any other types of CANDY? Do NOT include SUGAR-FREE CANDY. You can tell me per day, per week or per month. |
|                      | * Enter '0' for Never.   |
| Answer Codes         |  |
| Question Type        | Integer  |
| Field Pane Descripti | on Number  |
| Fill Instructions    |  |
| Special Instructions | Display the text in BOLD GRAY for the FR instruction: During the past month  |
| Skip Instructions    | <0,R,D> [goto DONUTNO];<br><1-995> [goto CANDYTP]  |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module               | 27   |
|----------------------|--|
|                      |  |
| Section Name         | Diet and Nutrition   |
| Part                 |  |
| Question ID          | NAC.139_02.000   |
| Variable Name        | CANDYTP  |
| Universe             | (HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and ('001' <= CANDYNO(e) <='995')     |
| Universe-text        | Sample adults 18+ who ate candy in past month  |
| Question Text        | 2 of 2   |
|                      | *Enter time period.  |
| Answer Codes         | 1. Day   |
|                      | 2. Week 3. Month   |
|                      | Refused  |
|                      | Don't know   |
| Question Type        | Pick One- answer pane list   |
| Field Pane Descript  | ion Time period  |
| Fill Instructions    |  |
| Special Instructions |  |
| Skip Instructions    | [if (CANDYNO gt <10> and CANDYTP eq <1>) or  |
|                      | (CANDYNO gt <70> and CANDYTP eq <2>) or (CANDYNO gt <310> and CANDYTP eq <3>) [goto ERR1_CANDYTP]) |
|                      | Else <1-3,R,D> [goto DONUTNO]  |
| Hard Edits           |  |
| Soft Edits           | * [Fill1:CANDYNO] times per [Fill2: CANDYTP] is unusually high. * Please verify.                   |
| AssocHelp            |  |

| Module               | 27   |
|----------------------|--|
| Section Name         | Diet and Nutrition   |
| Part                 |  |
| Question ID          | NAC.140_01.000   |
| Variable Name        | DONUTNO  |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999'))  |
| Universe-text        | Sample adults 18+  |
| Question Text        | 1 of 2   |
|                      | *Read if necessary: During the past month  |
|                      | How often did you eat DOUGHNUTS, sweet rolls, Danish, muffins, (pan dulce) or poptarts? Do NOT include sugar-free items. |
|                      | *Read if necessary: You can tell me per day, per week, or per month.   |
|                      | * Enter '0' for Never.   |
| Answer Codes         |  |
| Question Type        | Integer  |
| Field Pane Descripti | Number   |
| Fill Instructions    |  |
| Special Instructions | Display the text in BOLD GRAY for the FR instruction: During the past month  |
|                      | Display the text in BOLD GRAY for the FR instruction: You can tell me per day, per week, or per month.                   |
| Skip Instructions    | <0,R,D> [goto COOKIENO];<br><1-995> [goto DONUTTP]   |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module               | 27   |
|----------------------|--|
| Section Name         | Diet and Nutrition   |
| Part                 |  |
| Question ID          | NAC.140_02.000   |
| Variable Name        | DONUTTP  |
| Universe             | (HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and ('001' <= DONUTNO(e) <='995')   |
| Universe-text        | Sample adults 18+ who ate donuts in past month   |
| Question Text        | 2 of 2   |
|                      | *Enter time period.  |
| Answer Codes         | 1. Day 2. Week 3. Month Refused Don't know   |
| Question Type        | Pick One- answer pane list   |
| Field Pane Descript  | Time period  |
| Fill Instructions    |  |
| Special Instructions |  |
| Skip Instructions    | [if (DONUTNO gt <10> and DONUTTP eq <1>) or<br>(DONUTNO gt <70> and DONUTTP eq <2>) or<br>(DONUTNO gt <310> and DONUTTP eq <3>) [goto ERR1_DONUTTP])<br>Else <1-3,R,D> [goto COOKIENO] |
| Hard Edits           |  |
| Soft Edits           | * [Fill1:DONUTNO] times per [Fill2: DONUTTP] is unusually high. * Please verify.   |
| AssocHelp            |  |

| Module               | 27   |
|----------------------|--|
| Section Name         | Diet and Nutrition   |
| Part                 |  |
| Question ID          | NAC.141_01.000   |
| Variable Name        | COOKIENO   |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999'))   |
| Universe-text        | Sample adults 18+  |
| Question Text        | 1 of 2   |
|                      | *Read if necessary: During the past month  |
|                      | How often did you eat COOKIES, CAKE, PIE, or BROWNIES? Do NOT include sugar-free kinds.                |
|                      | *Read if necessary: You can tell me per day, per week, or per month.                                   |
|                      | * Enter '0' for Never.   |
| Answer Codes         |  |
| Question Type        | Integer  |
| Field Pane Descripti | on Number  |
| Fill Instructions    |  |
| Special Instructions | Display the text in BOLD GRAY for the FR instruction: During the past month                            |
|                      | Display the text in BOLD GRAY for the FR instruction: You can tell me per day, per week, or per month. |
| Skip Instructions    | <0,R,D> [goto ICECRNO];<br><1-995> [goto COOKIETP]   |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module               | 27   |
|----------------------|--|
| Section Name         | Diet and Nutrition   |
| Part                 |  |
| Question ID          | NAC.141_02.000   |
| Variable Name        | COOKIETP   |
| Universe             | (HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and ('001' <= COOKIENO(e) <='995')  |
| Universe-text        | Sample adults 18+ who ate cookies in past month  |
| Question Text        | 2 of 2   |
|                      | *Enter time period.  |
| Answer Codes         | 1. Day 2. Week 3. Month Refused Don't know   |
| Question Type        | Pick One- answer pane list   |
| Field Pane Descripti | Time period  |
| Fill Instructions    |  |
| Special Instructions |  |
| Skip Instructions    | [if (COOKIENO gt <10> and COOKIETP eq <1>) or<br>(COOKIENO gt <70> and COOKIETP eq <2>) or<br>(COOKIENO gt <310> and COOKIETP eq <3>) [goto ERR1_COOKIETP])<br>Else <1-3,R,D> [goto ICECRNO] |
| Hard Edits           |  |
| Soft Edits           | * [Fill1:COOKIENO] times per [Fill2: COOKIETP] is unusually high. * Please verify.   |
| AssocHelp            |  |

| Module                 | 27   |
|------------------------|--|
| Section Name           | Diet and Nutrition   |
| Part                   |  |
| Question ID            | NAC.145_01.000   |
| Variable Name          | ICECRNO  |
| Universe               | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999'))   |
| Universe-text          | Sample adults 18+  |
| Question Text          | 1 of 2   |
|                        | *Read if necessary: During the past month  |
|                        | How often did you eat ICE CREAM OR OTHER FROZEN DESSERTS? Do NOT include sugar-free kinds.             |
|                        | *Read if necessary: You can tell me per day, per week, or per month.                                   |
|                        | * Enter '0' for Never.   |
| Answer Codes           |  |
| Question Type          | Integer  |
| Field Pane Description | on Number  |
| Fill Instructions      |  |
| Special Instructions   | Display the text in BOLD GRAY for the FR instruction: During the past month                            |
|                        | Display the text in BOLD GRAY for the FR instruction: You can tell me per day, per week, or per month. |
| Skip Instructions      | <0,R,D> [goto POPCNNO];<br><1-995> [goto ICECRTP]  |
| Hard Edits             |  |
| Soft Edits             |  |
| AssocHelp              |  |

| Module               | 27   |
|----------------------|--|
| Section Name         | Diet and Nutrition   |
| Part                 |  |
| Question ID          | NAC.145_02.000   |
| Variable Name        | ICECRTP  |
| Universe             | (HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and ('001' <= ICECRNO(e) <='995')   |
| Universe-text        | Sample adults 18+ who ate ice cream in past month  |
| Question Text        | 2 of 2   |
|                      | *Enter time period.  |
| Answer Codes         | 1. Day 2. Week 3. Month Refused Don't know   |
| Question Type        | Pick One- answer pane list   |
| Field Pane Descript  | ion Time period  |
| Fill Instructions    |  |
| Special Instructions |  |
| Skip Instructions    | [if (ICECRNO gt <10> and ICECRTP eq <1>) or<br>(ICECRNO gt <70> and ICECRTP eq <2>) or<br>(ICECRNO gt <310> and ICECRTP eq <3>) [goto ERR1_ICECRTP] )<br>Else <1-3,R,D> [goto POPCNNO] |
| Hard Edits           |  |
| Soft Edits           | * [Fill1:ICECRNO] times per [Fill2: ICECRTP] is unusually high. * Please verify.   |
| AssocHelp            |  |

| Module               | 27   |
|----------------------|--|
| Section Name         | Diet and Nutrition   |
| Part                 |  |
| Question ID          | NAC.150_01.000   |
| Variable Name        | POPCNNO  |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999'))   |
| Universe-text        | Sample adults 18+  |
| Question Text        | 1 of 2   |
|                      | *Read if necessary: During the past month  |
|                      | How often did you eat POPCORN?   |
|                      | *Read if necessary: You can tell me per day, per week, or per month.                                   |
|                      | * Enter '0' for Never.   |
| Answer Codes         |  |
| Question Type        | Integer  |
| Field Pane Descripti | on Number  |
| Fill Instructions    |  |
| Special Instructions | Display the text in BOLD GRAY for the FR instruction: During the past month                            |
|                      | Display the text in BOLD GRAY for the FR instruction: You can tell me per day, per week, or per month. |
| Skip Instructions    | <0,R,D> [goto VITMIN];<br><1-995> [goto POPCNTP]   |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module               | 27  |
|----------------------|---|
| Section Name         | Diet and Nutrition  |
| Part                 |   |
| Question ID          | NAC.150_02.000  |
| Variable Name        | POPCNTP   |
| Universe             | (HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and ('001' <= POPCNNO(e) <='995')  |
| Universe-text        | Sample adults 18+ who ate popcorn in past month   |
| Question Text        | 2 of 2  |
|                      | *Enter time period.   |
| Answer Codes         | 1. Day 2. Week 3. Month Refused Don't know  |
| Question Type        | Pick One- answer pane list  |
| Field Pane Descript  | tion Time period  |
| Fill Instructions    |   |
| Special Instructions |   |
| Skip Instructions    | [if (POPCNNO gt <10> and POPCNTP eq <1>) or<br>(POPCNNO gt <70> and POPCNTP eq <2>) or<br>(POPCNNOO gt <310> and POPCNTP eq <3>) [goto ERR1_POPCNTP])<br>Else <1-3,R,D> [goto VITMIN] |
| Hard Edits           |   |
| Soft Edits           | * [Fill1:POPCNNO] times per [Fill2: POPCNTP] is unusually high. * Please verify.  |
| AssocHelp            |   |

| Module               | 27   |
|----------------------|--|
| Section Name         | Diet and Nutrition   |
| Part                 |  |
| Question ID          | NAC.170_00.000   |
| Variable Name        | VITMIN   |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999'))  |
| Universe-text        | Sample adults 18+  |
| Question Text        | These next questions are about vitamins and minerals you may have taken during the past month, that is, the past 30 days.                  |
|                      | DURING THE PAST MONTH, did you take any vitamin or mineral pills or supplements of ANY kind?   |
|                      | *Read if necessary: INCLUDE vitamin or mineral pills or liquids. Do NOT include vitamin-fortified foods.                                   |
| Answer Codes         | 1. Yes<br>2. No<br>Refused<br>Don't know   |
| Question Type        | Yes/No   |
| Field Pane Descripti | on Vitamins  |
| Fill Instructions    |  |
| Special Instructions | Display the text in BOLD GRAY for the FR instruction: INCLUDE vitamin or mineral pills or liquids. Do NOT include vitamin-fortified foods. |
| Skip Instructions    | <1> [goto VITMULT]<br><2,R,D> [goto next section]  |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module               | 27   |
|----------------------|--|
| Section Name         | Diet and Nutrition   |
| Part                 |  |
| Question ID          | NAC.180_00.000   |
| Variable Name        | VITMULT  |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999')) and VITMIN(e)='1'   |
| Universe-text        | Sample adults 18+ who have taken vitamins or mineral supplements in the past month   |
| Question Text        | DURING THE PAST MONTH, did you take any MULTI-vitamins such as One-A-Day, Theragran, or Centrum?   |
|                      | *Read if necessary: Include combinations of three or more vitamins and minerals, such as those labeled "stress" or "anti-oxidant". Do not include combinations of herbal or plant substances, or combinations of just two, like calcium and vitamin D.                                   |
| Answer Codes         | 1. Yes 2. No Refused Don't know  |
| Question Type        | Yes/No   |
| Field Pane Descripti | on Multi-vitamins  |
| Fill Instructions    |  |
| Special Instructions | Display the text in BOLD GRAY for the FR instruction: Include combinations of three or more vitamins and minerals, such as those labeled "stress" or "anti-oxidant". Do not include combinations of herbal or plant substances, or combinations of just two, like calcium and vitamin D. |
| Skip Instructions    | <1> [goto VITMULD]<br><2,R,D> [goto CALCA]   |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module                 | 27   |  |  |
|------------------------|--|--|--|
| Section Name           | Diet and Nutrition   |  |  |
| Part                   |  |  |  |
| Question ID            | NAC.200_01.000   |  |  |
| Variable Name          | VITMULD  |  |  |
| Universe               | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and VITMULT(e)='1' |  |  |
| Universe-text          | Sample adults 18+ who have taken a multi-vitamin in the past month             |  |  |
| Question Text          | On how many DAYS during the past month did you take a MULTI-vitamin?           |  |  |
|                        | *Enter number of days taking multi-vitamins.                                   |  |  |
|                        | *Enter '30' for all days in the month.   |  |  |
| Answer Codes           | Ernor do lor air dayo in the month.  |  |  |
| Question Type          | Integer  |  |  |
| Field Pane Description | Field Pane Description Number  |  |  |
| Fill Instructions      |  |  |  |
| Special Instructions   |  |  |  |
| Skip Instructions      | <1-30, R, D> [goto CALCA]  |  |  |
| Hard Edits             |  |  |  |
| Soft Edits             |  |  |  |
| AssocHelp              |  |  |  |

| Module               | 27   |
|----------------------|--|
| Section Name         | Diet and Nutrition   |
| Part                 |  |
| Question ID          | NAC.210_00.000   |
| Variable Name        | CALCA  |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and VITMIN(e)='1'  |
| Universe-text        | Sample adults 18+ who have taken vitamins or mineral supplements in the past month   |
| Question Text        | DURING THE PAST MONTH, did you take any CALCIUM SUPPLEMENTS, including Tums or calcium chews? [Fill1: Do NOT include any calcium in the MULTI-vitamins you told me about.]  *Read if necessary: Do NOT include milk or calcium-fortified orange juice. |
| Answer Codes         | 1. Yes 2. No Refused Don't know  |
| Question Type        | Yes/No   |
| Field Pane Descripti | on Calcium   |
| Fill Instructions    | Fill1: {If VITMULT=1}, fill "Do NOT include any calcium in the MULTI-vitamins you told me about."  |
| Special Instructions | Display the text in BOLD GRAY for the FR instruction: Do NOT include milk or calcium-fortified orange juice.   |
| Skip Instructions    | <1> [goto CALCD]<br><2,R,D> [goto VITD]  |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module                 | 27   |
|------------------------|--|
| Section Name           | Diet and Nutrition   |
| Part                   |  |
| Question ID            | NAC.215_01.000   |
| Variable Name          | CALCD  |
| Universe               | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999')) and CALC(e)='1' |
| Universe-text          | Sample adults 18+ who have taken calcium in the past month                   |
| Question Text          | 1 of 2   |
|                        | On how many DAYS during the past month did you take calcium supplements?     |
|                        | *Enter number of days taking calcium.  |
|                        | *Enter '30' for all days in the month.                                       |
| Answer Codes           |  |
| Question Type          | Integer  |
| Field Pane Description | Number   |
| Fill Instructions      |  |
| Special Instructions   |  |
| Skip Instructions      | <1-30, R, D> [goto VITD]   |
| Hard Edits             |  |
| Soft Edits             |  |
| AssocHelp              |  |

| Module               | 27   |
|----------------------|--|
| Section Name         | Diet and Nutrition   |
| Part                 |  |
| Question ID          | NAC.270_00.000   |
| Variable Name        | VITD   |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and VITMIN(e)='1'  |
| Universe-text        | Sample adults 18+ who have taken vitamin or mineral supplements in the past month  |
| Question Text        | DURING THE PAST MONTH, did you take any VITAMIN D PILLS OR SUPPLEMENTS?  Fill1: [Do NOT include any vitamin D in the MULTI-vitamins you told me about.]  |
|                      | Fill2: [Do NOT include calcium supplements that contain vitamin D.] Fill3: [Do not include calcium supplements that contain vitamin D or MULTI-vitamins you told me about.]  |
|                      | *Read if necessary: Do NOT include vitamin D fortified milk or other foods such as cereals and bread.  |
| Answer Codes         | 1. Yes 2. No Refused Don't know  |
| Question Type        | Yes/No   |
| Field Pane Descripti | on Vitamin D   |
| Fill Instructions    | Fill1: If VITMULT=1 and CALCA=2,R,D fill [Do NOT include any vitamin D in the MULTI-vitamins you told me about.] Fill2: If CALCA=1 and VITMULT=2,R,D fill [Do NOT include calcium supplements that contain vitamin D.] Fill3: If VITMULT=1 and CALCA=1 fill [Do not include calcium supplements that contain vitamin D or MULTI-vitamins you told me about.] |
| Special Instructions | Display the text in BOLD GRAY for the FR instruction: Do NOT include vitamin D fortified milk or other foods such as cereals and bread.  |
| Skip Instructions    | <1> [goto VITDM]<br><2,R,D> [goto next section]  |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module               | 27   |
|----------------------|--|
| Section Name         | Diet and Nutrition   |
| Part                 |  |
| Question ID          | NAC.280_00.000   |
| Variable Name        | VITDM  |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999')) and VITD(e)='1' |
| Universe-text        | Sample adults 18+ who have taken vitamin D in the past month                 |
| Question Text        | On how many DAYS during the past month did you take vitamin D?               |
|                      | *Enter '30' for all days in the month.                                       |
| Answer Codes         |  |
| Question Type        | Integer  |
| Field Pane Descripti | on Number  |
| Fill Instructions    |  |
| Special Instructions |  |
| Skip Instructions    | <1-30, R, D> [goto VITDWHY]  |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module                        | 27  |  |
|-------------------------------|---|--|
| Section Name                  | Diet and Nutrition  |  |
| Part                          |   |  |
| Question ID                   | NAC.290_01.000  |  |
| Variable Name                 | VITDWHY   |  |
| Universe                      | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and VITD(e)='1'                               |  |
| Universe-text                 | Sample adults 18+ who have taken vitamin D in the past month  |  |
| Question Text                 | Which of these is the MAIN reason you took vitamin D?   |  |
|                               | *Read categories below.   |  |
| Answer Codes                  | 1. For OVERALL health 2. For BONE health 3. To prevent CANCER 4. For some other reason Refused Don't know |  |
| Question Type                 | Pick One- answer pane list  |  |
| Field Pane Description Reason |   |  |
| Fill Instructions             |   |  |
| Special Instructions          | Display answer categories 1-4 in BOLD BLACK text.   |  |
| Skip Instructions             | <1-3, R,D>[goto next section]<br><4> [goto VITDSPEC]  |  |
| Hard Edits                    |   |  |
| Soft Edits                    |   |  |
| AssocHelp                     |   |  |

| Module               | 27  |
|----------------------|---|
| Section Name         | Diet and Nutrition  |
| Part                 |   |
| Question ID          | NAC.300_00.000  |
| Variable Name        | VITDSPEC  |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999')) and VITDWHY(e)='4' |
| Universe-text        | Sample adults 18+ who gave other reason for taking vitamin D                    |
| Question Text        | *Specify the reason took vitamin D.   |
| Answer Codes         |   |
| Question Type        | Verbatim  |
| Field Pane Descripti | on Reason   |
| Fill Instructions    |   |
| Special Instructions |   |
| Skip Instructions    | <allow 20,r,d=""> [goto next section]</allow>                                   |
| Hard Edits           |   |
| Soft Edits           |   |
| AssocHelp            |   |

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| Section nan          | ne: Physical Activity   |
|----------------------|---|
| Module               | 28  |
| Section Name         | Physical Activity   |
| Part                 |   |
| Question ID          | NAD.010_00.000  |
| Variable Name        | AD11A   |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999'))   |
| Universe-text        | Sample adults 18+   |
| Question Text        | The next questions are about walking for transportation. I will ask you separately about walking for other reasons like relaxation or exercise. |
|                      | During the past 7 days, did you walk to get some place that took you at least 10 minutes?   |
| Answer Codes         | 1. Yes 2. No 3. Unable to walk Refused Don't know   |
| Question Type        | Pick One - answer list pane   |
| Field Pane Descripti | on Walk-transportation  |
| Fill Instructions    |   |
| Special Instructions |   |
| Skip Instructions    | <1> [goto AD12A]<br><2,R,D> [goto AD14A]<br><3> [goto PAHOME]   |
| Hard Edits           |   |
| Soft Edits           |   |
| AssocHelp            |   |

| Module               | 28  |
|----------------------|---|
| Section Name         | Physical Activity   |
| Part                 |   |
| Question ID          | NAD.011_00.000  |
| Variable Name        | AD12A   |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999')) and AD11A(e)='1' |
| Universe-text        | Sample adults 18+ who have walked for transportation in the past 7 days       |
| Question Text        | In the past 7 days, how many times did you do that?                           |
|                      | *Read if necessary: Walk for at least 10 minutes to get some place.           |
| Answer Codes         | Allow 1-94,R,D  |
| Question Type        | Integer   |
| Field Pane Descripti | on Frequency  |
| Fill Instructions    |   |
| Special Instructions |   |
| Skip Instructions    | <1-94> [goto AD13ANO]<br><r,d> [goto AD14A]</r,d>                             |
| Hard Edits           |   |
| Soft Edits           |   |
| AssocHelp            |   |

| Module               | 28   |
|----------------------|--|
| Section Name         | Physical Activity  |
| Part                 |  |
| Question ID          | NAD.012_01.000   |
| Variable Name        | AD13ANO  |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and ('01' <= AD12A(e)<= '94')                                  |
| Universe-text        | Sample adults 18+ who have walked for transportation at least once in the past week  |
| Question Text        | 1 of 2   |
|                      | [Fill1: How long did that walk take?/ Fill2: On average, how long did those walks take?]                                   |
|                      | * Enter number for length of walk for transportation.  |
| Answer Codes         | Allow 1-995,R,D  |
| Question Type        | Integer  |
| Field Pane Descripti | on Number  |
| Fill Instructions    | if AD12A=1, Fill1: "How long did that walk take?"; else if AD12A gt 1, Fill2: "On average, how long did those walks take?" |
| Special Instructions |  |
| Skip Instructions    | <1-995>[goto AD13ATP]<br>[If AD13ANO= 'R', 'D' store 'R', 'D' in AD13ATP]<br><r,d>[goto AD14A]</r,d>                       |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module               | 28   |
|----------------------|--|
| Section Name         | Physical Activity  |
| Part                 |  |
| Question ID          | NAD.012_02.000   |
| Variable Name        | AD13ATP  |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and ('01' <= AD12A(e)<= '94')  |
| Universe-text        | Sample adults 18+ who have walked for transportation at least once in the past week and gave a number for the first part of this two-part question |
| Question Text        | 2 of 2   |
|                      | * Enter time period for length of walking for transportation.  |
| Answer Codes         | 1. Minutes 2. Hours Refused Don't know   |
| Question Type        | Pick One - answer list pane  |
| Field Pane Descripti | on Time period   |
| Fill Instructions    |  |
| Special Instructions |  |
| Skip Instructions    | If AD13ANO gt <24> and AD13ATP eq <2> [goto ERR1_ AD13ATP]   |
|                      | (IF AD13ANO gt <90> and AD13ATP eq <1> ) or ( if AD13ANO gt <2> and AD13ATP eq <2> ) [goto ERR2_ AD13ATP]  |
|                      | <1,2,R,D> [goto AD14A] and<br>If AD13ANO= 'R', 'D' store 'R', 'D' in AD13ATP   |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module                 | 28   |
|------------------------|--|
| Section Name           | Physical Activity  |
| Part                   |  |
| Question ID            | NAD.013_00.000   |
| Variable Name          | AD14A  |
| Universe               | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999')) and AD11A(e) NE '3'   |
| Universe-text          | Sample adults 18+ who are able to walk   |
| Question Text          | Sometimes you may walk for fun, relaxation, exercise, or to walk the dog. During the past 7 days, did you walk for at least 10 minutes for any of these reasons? Please do not include walking for transportation. |
| Answer Codes           | 1. Yes 2. No Refused Don't know  |
| Question Type          | Yes/No   |
| Field Pane Description | on Walk-leisure  |
| Fill Instructions      |  |
| Special Instructions   |  |
| Skip Instructions      | <1> [goto AD15A]<br><2,R,D> [goto PAHOME]  |
| Hard Edits             |  |
| Soft Edits             |  |
| AssocHelp              |  |

| Module                 | 28   |
|------------------------|--|
| Section Name           | Physical Activity  |
| Part                   |  |
| Question ID            | NAD.014_00.000   |
| Variable Name          | AD15A  |
| Universe               | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and AD14A(e)='1' |
| Universe-text          | Sample adults 18+ who have walked for leisure in the past 7 days             |
| Question Text          | In the past 7 days, how many times did you do that?                          |
| Answer Codes           | Allow 1-94,R,D   |
| Question Type          | Integer  |
| Field Pane Description | on Frequency   |
| Fill Instructions      |  |
| Special Instructions   |  |
| Skip Instructions      | <1-94> [goto AD16ANO]<br><r,d> [goto PAHOME]</r,d>                           |
| Hard Edits             |  |
| Soft Edits             |  |
| AssocHelp              |  |

| Module                 | 28  |
|------------------------|---|
| Section Name           | Physical Activity   |
| Part                   |   |
| Question ID            | NAD.015_01.000  |
| Variable Name          | AD16ANO   |
| Universe               | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and ('01' $\leq$ AD15A(e) $\leq$ '94')  |
| Universe-text          | Sample Adults 18+ who have walked for leisure at least once in the past week.   |
| Question Text          | 1 of 2  [Fill1: How long did that walk take?/ Fill2: On average, how long did those walks take?]  * Enter number for length of walk for fun, relaxation, or exercise. |
| Answer Codes           | Allow 1-995,R,D   |
| Question Type          | Integer   |
| Field Pane Description | on Number   |
| Fill Instructions      | if AD15A=1, Fill1: "How long did that walk take?" else if AD15A gt 1, Fill2: "On average, how long did those walks take?"   |
| Special Instructions   |   |
| Skip Instructions      | <1-995>[goto AD16ATP]<br><r,d>[goto PAHOME] and [If AD16ANO= 'R', 'D' store 'R', 'D' in AD16ATP]</r,d>  |
| Hard Edits             |   |
| Soft Edits             |   |
| AssocHelp              |   |

| Module               | 28  |
|----------------------|---|
| Section Name         | Physical Activity   |
| Part                 |   |
| Question ID          | NAD.015_02.000  |
| Variable Name        | AD16ATP   |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and ('01' <= AD15A(e)<= '94')   |
| Universe-text        | Sample adults 18+ who have walked for leisure at least once in the past week and gave a number for the first part of this two-part question |
| Question Text        | 2 of 2  |
|                      | * Enter time period for length of walking for fun, relaxation, or exercise.   |
| Answer Codes         | 1. Minutes 2. Hours Refused Don't know  |
| Question Type        | Pick One - answer list pane   |
| Field Pane Descripti | on Time period  |
| Fill Instructions    |   |
| Special Instructions |   |
| Skip Instructions    | If AD16ANO gt <24> and AD16ATP eq <2> [goto ERR1_ AD16ATP]  |
|                      | (IF AD16ANO gt <90> and AD16ATP eq <1> ) or ( if AD16ANO gt <2> and AD16ATP eq <2> ) [goto ERR2_ AD16ATP]                                   |
|                      | <1,2,R,D>[goto PAHOME]; [If AD16ANO= 'R', 'D' store 'R', 'D' in AD16ATP]  |
| Hard Edits           |   |
| Soft Edits           |   |
| AssocHelp            |   |

| Module               | 28  |
|----------------------|---|
| Section Name         | Physical Activity   |
| Part                 |   |
| Question ID          | NAD.020_00.000  |
| Variable Name        | PAHOME  |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999'))                                    |
| Universe-text        | Sample adults 18+   |
| Question Text        | How often are there people walking within sight of your home? Would you say                     |
|                      | *Read categories below.   |
| Answer Codes         | 1. Every day 2. Every 2-3 days 3. About once a week 4. Less than once a week Refused Don't know |
| Question Type        | Pick One - answer list pane   |
| Field Pane Descripti | on Walking near home  |
| Fill Instructions    |   |
| Special Instructions |   |
| Skip Instructions    | <1-4,R,D> [goto PAWTHR]   |
| Hard Edits           |   |
| Soft Edits           |   |
| AssocHelp            |   |

| Module                 | 28  |
|------------------------|---|
| Section Name           | Physical Activity   |
| Part                   |   |
| Question ID            | NAD.025_00.000  |
| Variable Name          | PAWTHR  |
| Universe               | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999'))  |
| Universe-text          | Sample adults 18+   |
| Question Text          | How often does the weather make you less likely to walk? Would you say  |
|                        | *Read if necessary: We mean any kind of bad weather that makes you less likely to walk, such as hot, cold, rainy, snowy, and windy. |
| Answer Codes           | 1. Almost always 2. Most of the time 3. Some of the time 4. A little of the time Refused Don't know                                 |
| Question Type          | Pick One - answer list pane   |
| Field Pane Description | on Weather  |
| Fill Instructions      |   |
| Special Instructions   |   |
| Skip Instructions      | <1-4,R,D> [goto PAROAD]   |
| Hard Edits             |   |
| Soft Edits             |   |
| AssocHelp              |   |

| Module               | 28   |
|----------------------|--|
| Section Name         | Physical Activity  |
| Part                 |  |
| Question ID          | NAD.030_00.000   |
| Variable Name        | PAROAD   |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999'))   |
| Universe-text        | Sample adults 18+  |
| Question Text        | The next questions are about where you live.   |
| Answer Codes         | *Read if necessary: These questions are about your walking or places you can walk, not walking by other people.  Where you live, are there roads, sidewalks, paths or trails where you can walk?  1. Yes |
| inswer coucs         | 2. No Refused Don't know   |
| Question Type        | Yes/No   |
| Field Pane Descripti | on Roads   |
| Fill Instructions    |  |
| Special Instructions |  |
| Skip Instructions    | <1,2,R,D> [goto PASHOPS]   |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module                       | 28   |  |
|------------------------------|--|--|
| Section Name                 | Physical Activity  |  |
| Part                         |  |  |
| Question ID                  | NAD.035_00.000   |  |
| Variable Name                | PASHOPS  |  |
| Universe                     | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999')) |  |
| Universe-text                | Sample adults 18+  |  |
| Question Text                | *Read if necessary: Where you live                           |  |
|                              | Are there shops, stores, or markets that you can walk to?    |  |
| Answer Codes                 | 1. Yes 2. No Refused Don't know                              |  |
| Question Type                | Yes/No   |  |
| Field Pane Description Shops |  |  |
| Fill Instructions            |  |  |
| Special Instructions         |  |  |
| Skip Instructions            | <1,2,R,D> [goto PATRANS]                                     |  |
| Hard Edits                   |  |  |
| Soft Edits                   |  |  |
| AssocHelp                    |  |  |

| Module               | 28   |
|----------------------|--|
| Section Name         | Physical Activity  |
| Part                 |  |
| Question ID          | NAD.040_00.000   |
| Variable Name        | PATRANS  |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999')) |
| Universe-text        | Sample adults 18+  |
| Question Text        | *Read if necessary: Where you live                           |
|                      | Are there bus or transit stops that you can walk to?         |
| Answer Codes         | 1. Yes 2. No Refused Don't know                              |
| Question Type        | Yes/No   |
| Field Pane Descripti | on Public transportation                                     |
| Fill Instructions    |  |
| Special Instructions |  |
| Skip Instructions    | <1,2,R,D> [goto PAMOVIE]                                     |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module               | 28   |
|----------------------|--|
| Section Name         | Physical Activity  |
| Part                 |  |
| Question ID          | NAD.045_00.000   |
| Variable Name        | PAMOVIE  |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999'))               |
| Universe-text        | Sample adults 18+  |
| Question Text        | *Read if necessary: Where you live   |
|                      | Are there places like movies, libraries, or churches that you can walk to? |
| Answer Codes         | 1. Yes 2. No Refused Don't know  |
| Question Type        | Yes/No   |
| Field Pane Descripti | on Movies  |
| Fill Instructions    |  |
| Special Instructions |  |
| Skip Instructions    | <1,2,R,D> [goto PARELAX]   |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module               | 28   |
|----------------------|--|
| Section Name         | Physical Activity  |
| Part                 |  |
| Question ID          | NAD.050_00.000   |
| Variable Name        | PARELAX  |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999'))                                   |
| Universe-text        | Sample adults 18+  |
| Question Text        | *Read if necessary: Where you live   |
|                      | Are there places that you can walk to that help you relax, clear your mind, and reduce stress? |
| Answer Codes         | 1. Yes 2. No Refused Don't know  |
| Question Type        | Yes/No   |
| Field Pane Descripti | on Relax   |
| Fill Instructions    |  |
| Special Instructions |  |
| Skip Instructions    | <1,2,R,D> [goto PASIDEW]   |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module                           | 28   |  |
|----------------------------------|--|--|
| Section Name                     | Physical Activity  |  |
| Part                             |  |  |
| Question ID                      | NAD.055_00.000   |  |
| Variable Name                    | PASIDEW  |  |
| Universe                         | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999')) |  |
| Universe-text                    | Sample adults 18+  |  |
| Question Text                    | *Read if necessary: Where you live                           |  |
|                                  | Do most streets have sidewalks?                              |  |
| Answer Codes                     | 1. Yes<br>2. No  |  |
|                                  | Refused  |  |
|                                  | Don't know   |  |
| Question Type                    | Yes/No   |  |
| Field Pane Description Sidewalks |  |  |
| Fill Instructions                |  |  |
| Special Instructions             |  |  |
| Skip Instructions                | <1,2,R,D> [goto PATRAFF]                                     |  |
| Hard Edits                       |  |  |
| Soft Edits                       |  |  |
| AssocHelp                        |  |  |

| Module               | 28   |
|----------------------|--|
| Section Name         | Physical Activity  |
| Part                 |  |
| Question ID          | NAD.060_00.000   |
| Variable Name        | PATRAFF  |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999')) |
| Universe-text        | Sample adults 18+  |
| Question Text        | *Read if necessary: Where you live                           |
|                      | Does traffic makes it unsafe for you to walk?                |
| Answer Codes         | 1. Yes 2. No Refused Don't know                              |
| Question Type        | Yes/No   |
| Field Pane Descripti | on Traffic   |
| Fill Instructions    |  |
| Special Instructions |  |
| Skip Instructions    | <1,2,R,D> [goto PACRIME]                                     |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module                 | 28   |
|------------------------|--|
| Section Name           | Physical Activity  |
| Part                   |  |
| Question ID            | NAD.065_00.000   |
| Variable Name          | PACRIME  |
| Universe               | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999')) |
| Universe-text          | Sample adults 18+  |
| Question Text          | *Read if necessary: Where you live                           |
|                        | Does crime make it unsafe for you to walk?                   |
| Answer Codes           | 1. Yes 2. No Refused Don't know                              |
| Question Type          | Yes/No   |
| Field Pane Description | on Crime   |
| Fill Instructions      |  |
| Special Instructions   |  |
| Skip Instructions      | <1,2,R,D> [goto PAANIMAL]                                    |
| Hard Edits             |  |
| Soft Edits             |  |
| AssocHelp              |  |

| Module               | 28   |
|----------------------|--|
| Section Name         | Physical Activity  |
| Part                 |  |
| Question ID          | NAD.070_00.000   |
| Variable Name        | PAANIMAL   |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999')) |
| Universe-text        | Sample adults 18+  |
| Question Text        | *Read if necessary: Where you live                           |
|                      | Do dogs or other animals make it unsafe for you to walk?     |
| Answer Codes         | 1. Yes 2. No Refused Don't know                              |
| Question Type        | Yes/No   |
| Field Pane Descripti | on Animals   |
| Fill Instructions    |  |
| Special Instructions |  |
| Skip Instructions    | <1,2,R,D> [goto next section]                                |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

## 2015 Q1 NHIS Instrument Spec Report Section name: Tobacco

| Section nai          | me: Tobacco   |
|----------------------|---|
| Module               | 29  |
| Section Name         | Tobacco   |
| Part                 |   |
| Question ID          | NAE.010_00.000  |
| Variable Name        | MENTHOLF  |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and SMKEV(e)='1' and SMKNOW(e)='3'  |
| Universe-text        | Sample adults 18+ who are former smokers  |
| Question Text        | Earlier you said you used to smoke cigarettes. Think back to the 12 months BEFORE you quit smoking. During that time, was your usual cigarette brand menthol or non-menthol?  |
| Answer Codes         | 1. Menthol 2. Non-menthol 3. No usual type Refused Don't know   |
| Question Type        | Pick One - answer list pane   |
| Field Pane Descript  | ion   |
| Fill Instructions    |   |
| Special Instructions |   |
| Skip Instructions    | <1-3,R,D> if SMKREG ne '96' [goto NUMCIGA];<br>else if ((SMKQTNO(e) LE '95' and SMKQTTP(e)='1') or<br>(SMKQTNO(e) LE '95' and SMKQTTP(e)='2') or<br>(SMKQTNO(e) LE '24' and SMKQTTP(e)='3') or<br>(SMKQTNO(e) LE '02' and SMKQTTP(e)='4')) [goto FQUITA_1];<br>else [goto CIGEV1] |
| Hard Edits           |   |
| Soft Edits           |   |
| AssocHelp            |   |

| Module                 | 29  |
|------------------------|---|
| Section Name           | Tobacco   |
| Part                   |   |
| Question ID            | NAE.015_00.000  |
| Variable Name          | NUMCIGA   |
| Universe               | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and SMKEV(e)='1' and SMKNOW(e)='3' and SMKREG(e) ne '96'  |
| Universe-text          | Sample adults 18+ who are former smokers and had smoked regularly in the past   |
| Question Text          | When you last smoked FAIRLY REGULARLY, how many cigarettes did you usually smoke per day?   |
|                        | *Enter '95' if varied.  |
|                        | *Enter '96' if never smoked cigarettes regularly.   |
| Answer Codes           |   |
| Question Type          | Integer   |
| Field Pane Description | on  |
| Fill Instructions      |   |
| Special Instructions   |   |
| Skip Instructions      | <1-94,96,R,D> if ((SMKQTNO(e) LE '95' and SMKQTTP(e)='1') or (SMKQTNO(e) LE '95' and SMKQTTP(e)='2') or (SMKQTNO(e) LE '24' and SMKQTTP(e)='3') or (SMKQTNO(e) LE '02' and SMKQTTP(e)='4')) [goto FQUITA_1]; else [goto CIGEV1] |
|                        | <95> [goto NUMCVAR]   |
| Hard Edits             |   |
| Soft Edits             |   |
| AssocHelp              |   |

| Module                 | 29   |  |
|------------------------|--|--|
| Section Name           | Tobacco  |  |
| Part                   |  |  |
| Question ID            | NAE.017_00.000   |  |
| Variable Name          | NUMCVAR  |  |
| Universe               | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999')) and NUMCIGA(e)='95'   |  |
| Universe-text          | Sample adults 18+ who said number of cigarettes smoked daily varied  |  |
| Question Text          | What is the average number of cigarettes that you smoked daily during the longest period that you smoked?  |  |
|                        | *Read if necessary: 1 pack equals 20 cigarettes.   |  |
|                        | *Enter '95' if 95 or more.   |  |
| Answer Codes           |  |  |
| Question Type          | Integer  |  |
| Field Pane Description |  |  |
| Fill Instructions      |  |  |
| Special Instructions   |  |  |
| Skip Instructions      | <1-95,R,D> if ((SMKQTNO(e) LE '95' and SMKQTTP(e)='1') or<br>(SMKQTNO(e) LE '95' and SMKQTTP(e)='2') or<br>(SMKQTNO(e) LE '24' and SMKQTTP(e)='3') or<br>(SMKQTNO(e) LE '02' and SMKQTTP(e)='4')) [goto FQUITA_1];<br>else [goto CIGEV1] |  |
| Hard Edits             |  |  |
| Soft Edits             |  |  |
| AssocHelp              |  |  |

| Module               | 29   |  |  |
|----------------------|--|--|--|
| Section Name         | Tobacco  |  |  |
| Part                 |  |  |  |
| Question ID          | NAE.020_01.000   |  |  |
| Variable Name        | FQUITA_1   |  |  |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and SMKNOW(e)='3' and ((SMKQTNO(e) LE '95' and SMKQTTP(e)='1') or (SMKQTNO(e) LE '95' and SMKQTTP(e)='2') or (SMKQTNO(e) LE '24' and SMKQTTP(e)='3') or (SMKQTNO(e) LE '02' and SMKQTTP(e)='4')) |  |  |
| Universe-text        | Sample adults 18+ who are former smokers and quit in the last 2 years  |  |  |
| Question Text        | Thinking back to when you stopped smoking completely, did you use ANY of the following PRODUCTS:   |  |  |
| Answer Codes         | A nicotine patch?  |  |  |
| Answer Coues         | 1. Yes 2. No Refused Don't know  |  |  |
| Question Type        | Yes/No   |  |  |
| Field Pane Descripti | Field Pane Description   |  |  |
| Fill Instructions    |  |  |  |
| Special Instructions |  |  |  |
| Skip Instructions    | <1,2,R,D> [goto FQUITA_2]  |  |  |
| Hard Edits           |  |  |  |
| Soft Edits           |  |  |  |
| AssocHelp            |  |  |  |

| Module                 | 29   |  |
|------------------------|--|--|
| Section Name           | Tobacco  |  |
| Part                   |  |  |
| Question ID            | NAE.020_02.000   |  |
| Variable Name          | FQUITA_2   |  |
| Universe               | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and SMKNOW(e)='3' and ((SMKQTNO(e) LE '95' and SMKQTTP(e)='1') or (SMKQTNO(e) LE '95' and SMKQTTP(e)='2') or (SMKQTNO(e) LE '24' and SMKQTTP(e)='3') or (SMKQTNO(e) LE '02' and SMKQTTP(e)='4')) |  |
| Universe-text          | Sample adults 18+ who are former smokers and quit in the last 2 years  |  |
| Question Text          | *Read if necessary.  |  |
| Answer Codes           | Thinking back to when you stopped smoking completely, did you use ANY of the following PRODUCTS:  A nicotine gum or lozenge (LA-zenj)?  1. Yes 2. No Refused Don't know  |  |
| Question Type          | Yes/No   |  |
| Field Pane Description | on   |  |
| Fill Instructions      |  |  |
| Special Instructions   |  |  |
| Skip Instructions      | <1,2,R,D> [goto FQUITA_3]  |  |
| Hard Edits             |  |  |
| Soft Edits             |  |  |
| AssocHelp              |  |  |

| Module                 | 29   |  |
|------------------------|--|--|
| Section Name           | Tobacco  |  |
| Part                   |  |  |
| Question ID            | NAE.020_03.000   |  |
| Variable Name          | FQUITA_3   |  |
| Universe               | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and SMKNOW(e)='3' and ((SMKQTNO(e) LE '95' and SMKQTTP(e)='1') or (SMKQTNO(e) LE '95' and SMKQTTP(e)='2') or (SMKQTNO(e) LE '24' and SMKQTTP(e)='3') or (SMKQTNO(e) LE '02' and SMKQTTP(e)='4')) |  |
| Universe-text          | Sample adults 18+ who are former smokers and quit in the last 2 years  |  |
| Question Text          | *Read if necessary.  |  |
| Answer Codes           | Thinking back to when you stopped smoking completely, did you use ANY of the following PRODUCTS:  A nicotine containing nasal spray or inhaler?  1. Yes 2. No Refused Don't know   |  |
| Question Type          | Yes/No   |  |
| Field Pane Description | on   |  |
| Fill Instructions      |  |  |
| Special Instructions   |  |  |
| Skip Instructions      | <1,2,R,D> [goto FQUITA_4]  |  |
| Hard Edits             |  |  |
| Soft Edits             |  |  |
| AssocHelp              |  |  |

| Module                 | 29   |                             |                      |
|------------------------|--|-----------------------------|----------------------|
| Section Name           | Tobacco  |                             |                      |
| Part                   |  |                             |                      |
| Question ID            | NAE.020_04.000   |                             |                      |
| Variable Name          | FQUITA_4   |                             |                      |
| Universe               | HHSTAT4='S' and (AGE GE '0' and ((SMKQTNO(e) LE '95' and SMKQTTP(e)='2') or (SMKQTN LE '02' and SMKQTTP(e)='4'))   | d SMKQTTP(e)='1') or (SMI   | KQTNO(e) LE '95' and |
| Universe-text          | Sample adults 18+ who are form   | mer smokers and quit in the | e last 2 years       |
| Question Text          | *Read if necessary.  |                             |                      |
| Answer Codes           | Thinking back to when you stopped smoking completely, did you use ANY of the following PRODUCTS:  A prescription pill called Chantix (CHAN-tix) or Varenicline (vuh-REN-ih-klin)?  1. Yes 2. No Refused Don't know |                             |                      |
| Question Type          | Yes/No   |                             |                      |
| Field Pane Description |  |                             |                      |
| Fill Instructions      |  |                             |                      |
| Special Instructions   |  |                             |                      |
| Skip Instructions      | <1,2,R,D> [goto FQUITA_5]  |                             |                      |
| Hard Edits             |  |                             |                      |
| Soft Edits             |  |                             |                      |
| AssocHelp              |  |                             |                      |

| Module                 | 29   |
|------------------------|--|
| Section Name           | Tobacco  |
| Part                   |  |
| Question ID            | NAE.025_01.000   |
| Variable Name          | FQUITB_1   |
| Universe               | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and SMKNOW(e)='3' and ((SMKQTNO(e) LE '95' and SMKQTTP(e)='1') or (SMKQTNO(e) LE '95' and SMKQTTP(e)='2') or (SMKQTNO(e) LE '24' and SMKQTTP(e)='3') or (SMKQTNO(e) LE '02' and SMKQTTP(e)='4')) |
| Universe-text          | Sample adults 18+ who are former smokers and quit in the last 2 years  |
| Question Text          | Thinking back to when you stopped smoking completely, did you use ANY of the following:  |
| Answer Codes           | A telephone help line or quit line?  1. Yes 2. No Refused  |
|                        | Don't know   |
| Question Type          | Yes/No   |
| Field Pane Description | on   |
| Fill Instructions      |  |
| Special Instructions   |  |
| Skip Instructions      | <1,2,R,D> [goto FQUITB_2]  |
| Hard Edits             |  |
| Soft Edits             |  |
| AssocHelp              |  |

| Module               | 29   |
|----------------------|--|
| Section Name         | Tobacco  |
| Part                 |  |
| Question ID          | NAE.025_02.000   |
| Variable Name        | FQUITB_2   |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and SMKNOW(e)='3' and ((SMKQTNO(e) LE '95' and SMKQTTP(e)='1') or (SMKQTNO(e) LE '95' and SMKQTTP(e)='2') or (SMKQTNO(e) LE '24' and SMKQTTP(e)='3') or (SMKQTNO(e) LE '02' and SMKQTTP(e)='4')) |
| Universe-text        | Sample adults 18+ who are former smokers and quit in the last 2 years  |
| Question Text        | *Read if necessary.  |
| Answer Codes         | Thinking back to when you stopped smoking completely, did you use ANY of the following:  One-on-one counseling?  1. Yes 2. No Refused Don't know   |
| Question Type        | Yes/No   |
| Field Pane Descripti | on   |
| Fill Instructions    |  |
| Special Instructions |  |
| Skip Instructions    | <1,2,R,D> [goto FQUITB_3]  |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module                 | 29   |  |
|------------------------|--|--|
| Section Name           | Tobacco  |  |
| Part                   |  |  |
| Question ID            | NAE.025_03.000   |  |
| Variable Name          | FQUITB_3   |  |
| Universe               | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and SMKNOW(e)='3' and ((SMKQTNO(e) LE '95' and SMKQTTP(e)='1') or (SMKQTNO(e) LE '95' and SMKQTTP(e)='2') or (SMKQTNO(e) LE '24' and SMKQTTP(e)='3') or (SMKQTNO(e) LE '02' and SMKQTTP(e)='4')) |  |
| Universe-text          | Sample adults 18+ who are former smokers and quit in the last 2 years  |  |
| Question Text          | *Read if necessary.  |  |
| Answer Codes           | Thinking back to when you stopped smoking completely, did you use ANY of the following:  A stop smoking clinic, class or support group?  1. Yes 2. No Refused Don't know   |  |
| Question Type          | Yes/No   |  |
| Field Pane Description |  |  |
| Fill Instructions      |  |  |
| Special Instructions   |  |  |
| Skip Instructions      | <1,2,R,D> [goto CIGEV1]  |  |
| Hard Edits             |  |  |
| Soft Edits             |  |  |
| AssocHelp              |  |  |

| Module                 | 29  |
|------------------------|---|
| Section Name           | Tobacco   |
| Part                   |   |
| Question ID            | NAE.060_00.000  |
| Variable Name          | MENTHOL   |
| Universe               | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and SMKEV(e)='1' and SMKNOW(e) IN ('1','2') |
| Universe-text          | Sample adults 18+ who are current smokers   |
| Question Text          | Earlier you said you smoke cigarettes. Is your usual cigarette brand menthol or non-menthol?            |
| Answer Codes           | 1. Menthol 2. Non-menthol 3. No usual type Refused Don't know   |
| Question Type          | Pick One - answer list pane   |
| Field Pane Description |   |
| Fill Instructions      |   |
| Special Instructions   | If CIGQTYR=1 store '1' in CSQEV   |
| Skip Instructions      | <1-3,R,D> if CIGQTYR=1 [store '1' in CSQEV] and [goto CQUITA_1]; else [goto CSQEV]                      |
| Hard Edits             |   |
| Soft Edits             |   |
| AssocHelp              |   |

| Module                 | 29  |  |
|------------------------|---|--|
| Section Name           | Tobacco   |  |
| Part                   |   |  |
| Question ID            | NAE.075_00.000  |  |
| Variable Name          | CSQEV   |  |
| Universe               | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and SMKEV(e)='1' and SMKNOW(e) IN ('1','2') and CIGQTYR(e) IN ('1','2','7','8','9') |  |
| Universe-text          | Sample adults 18+ who are current smokers   |  |
| Question Text          | Have you EVER stopped smoking for one day or longer BECAUSE YOU WERE TRYING TO QUIT SMOKING?  |  |
| Answer Codes           | 1. Yes 2. No Refused Don't know   |  |
| Question Type          | Yes/No  |  |
| Field Pane Description |   |  |
| Fill Instructions      |   |  |
| Special Instructions   |   |  |
| Skip Instructions      | <1,2,R,D> [goto QWANT]  |  |
| Hard Edits             |   |  |
| Soft Edits             |   |  |
| AssocHelp              |   |  |

| Module                 | 29   |
|------------------------|--|
| Section Name           | Tobacco  |
| Part                   |  |
| Question ID            | NAE.080_01.000   |
| Variable Name          | CQUITA_1   |
| Universe               | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and SMKEV(e)='1' and SMKNOW(e) IN ('1','2') and CIGQTYR(e)='1' |
| Universe-text          | Sample adults 18+ who are current smokers and tried to quit in the last year   |
| Question Text          | Thinking back to when you tried to QUIT smoking in the PAST 12 MONTHS, did you use ANY of the following PRODUCTS:          |
|                        | A nicotine patch?  |
| Answer Codes           | 1. Yes 2. No Refused Don't know  |
| Question Type          | Yes/No   |
| Field Pane Description | on   |
| Fill Instructions      |  |
| Special Instructions   |  |
| Skip Instructions      | <1,2,R,D> [goto CQUITA_2]  |
| Hard Edits             |  |
| Soft Edits             |  |
| AssocHelp              |  |

| Module                 | 29   |  |
|------------------------|--|--|
| Section Name           | Tobacco  |  |
| Part                   |  |  |
| Question ID            | NAE.080_02.000   |  |
| Variable Name          | CQUITA_2   |  |
| Universe               | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and SMKEV(e)='1' and SMKNOW(e) IN ('1','2') and CIGQTYR(e)='1'   |  |
| Universe-text          | Sample adults 18+ who are current smokers and tried to quit in the last year   |  |
| Question Text          | *Read if necessary.  |  |
| Answer Codes           | Thinking back to when you tried to QUIT smoking in the PAST 12 MONTHS, did you use ANY of the following PRODUCTS:  A nicotine gum or lozenge (LA-zenj)?  1. Yes 2. No Refused Don't know |  |
| Question Type          | Yes/No   |  |
| Field Pane Description | Field Pane Description   |  |
| Fill Instructions      |  |  |
| Special Instructions   |  |  |
| Skip Instructions      | <1,2,R,D> [goto CQUITA_3]  |  |
| Hard Edits             |  |  |
| Soft Edits             |  |  |
| AssocHelp              |  |  |

| Module                 | 29  |  |
|------------------------|---|--|
| Section Name           | Tobacco   |  |
| Part                   |   |  |
| Question ID            | NAE.080_03.000  |  |
| Variable Name          | CQUITA_3  |  |
| Universe               | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and SMKEV(e)='1' and SMKNOW(e) IN ('1','2') and CIGQTYR(e)='1'  |  |
| Universe-text          | Sample adults 18+ who are current smokers and tried to quit in the last year  |  |
| Question Text          | *Read if necessary.   |  |
| Answer Codes           | Thinking back to when you tried to QUIT smoking in the PAST 12 MONTHS, did you use ANY of the following PRODUCTS:  A nicotine containing nasal spray or inhaler?  1. Yes 2. No Refused Don't know |  |
| Question Type          | Yes/No  |  |
| Field Pane Description | Field Pane Description  |  |
| Fill Instructions      |   |  |
| Special Instructions   |   |  |
| Skip Instructions      | <1,2,R,D> [goto CQUITA_4]   |  |
| Hard Edits             |   |  |
| Soft Edits             |   |  |
| AssocHelp              |   |  |

| Module                 | 29  |
|------------------------|---|
| Section Name           | Tobacco   |
| Part                   |   |
| Question ID            | NAE.080_04.000  |
| Variable Name          | CQUITA_4  |
| Universe               | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and SMKEV(e)='1' and SMKNOW(e) IN ('1','2') and CIGQTYR(e)='1'  |
| Universe-text          | Sample adults 18+ who are current smokers and tried to quit in the last year  |
| Question Text          | *Read if necessary.   |
| Answer Codes           | Thinking back to when you tried to QUIT smoking in the PAST 12 MONTHS, did you use ANY of the following PRODUCTS:  A prescription pill called Chantix (CHAN-tix) or Varenicline (vuh-REN-ih-klin)?  1. Yes 2. No Refused Don't know |
| Question Type          | Yes/No  |
| Field Pane Description |   |
| Fill Instructions      |   |
| Special Instructions   |   |
| Skip Instructions      | <1,2,R,D> [goto CQUITA_5]   |
| Hard Edits             |   |
| Soft Edits             |   |
| AssocHelp              |   |

| Module                 | 29   |  |
|------------------------|--|--|
| Section Name           | Tobacco  |  |
| Part                   |  |  |
| Question ID            | NAE.080_05.000   |  |
| Variable Name          | CQUITA_5   |  |
| Universe               | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and SMKEV(e)='1' and SMKNOW(e) IN ('1','2') and CIGQTYR(e)='1'   |  |
| Universe-text          | Sample adults 18+ who are current smokers and tried to quit in the last year   |  |
| Question Text          | *Read if necessary.  |  |
|                        | Thinking back to when you tried to QUIT smoking in the PAST 12 MONTHS, did you use ANY of the following PRODUCTS:  A prescription pill called Zyban (ZI-ban), Bupropion (byoo-PRO-pee-on), or Wellbutrin (well-BYOO-trin)? |  |
| Answer Codes           | 1. Yes 2. No Refused Don't know  |  |
| Question Type          | Yes/No   |  |
| Field Pane Description |  |  |
| Fill Instructions      |  |  |
| Special Instructions   |  |  |
| Skip Instructions      | <1,2,R,D> [goto CQUITB_1]  |  |
| Hard Edits             |  |  |
| Soft Edits             |  |  |
| AssocHelp              |  |  |

| Module                 | 29   |
|------------------------|--|
| Section Name           | Tobacco  |
| Part                   |  |
| Question ID            | NAE.085_01.000   |
| Variable Name          | CQUITB_1   |
| Universe               | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and SMKEV(e)='1' and SMKNOW(e) IN ('1','2') and CIGQTYR(e)='1' |
| Universe-text          | Sample adults 18+ who are current smokers and tried to quit in the last year   |
| Question Text          | Thinking back to when you tried to QUIT smoking in the PAST 12 MONTHS, did you use ANY of the following:                   |
|                        | A telephone help line or quit line?  |
| Answer Codes           | 1. Yes 2. No Refused Don't know  |
| Question Type          | Yes/No   |
| Field Pane Description | on   |
| Fill Instructions      |  |
| Special Instructions   |  |
| Skip Instructions      | <1,2,R,D> [goto CQUITB_2]  |
| Hard Edits             |  |
| Soft Edits             |  |
| AssocHelp              |  |

| Module                 | 29  |  |
|------------------------|---|--|
| Section Name           | Tobacco   |  |
| Part                   |   |  |
| Question ID            | NAE.085_02.000  |  |
| Variable Name          | CQUITB_2  |  |
| Universe               | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and SMKEV(e)='1' and SMKNOW(e) IN ('1','2') and CIGQTYR(e)='1'  |  |
| Universe-text          | Sample adults 18+ who are current smokers and tried to quit in the last year  |  |
| Question Text          | *Read if necessary.   |  |
| Answer Codes           | Thinking back to when you tried to QUIT smoking in the PAST 12 MONTHS, did you use ANY of the following:  One-on-one counseling?  1. Yes 2. No Refused Don't know |  |
| Question Type          | Yes/No  |  |
| Field Pane Description | Field Pane Description  |  |
| Fill Instructions      |   |  |
| Special Instructions   |   |  |
| Skip Instructions      | <1,2,R,D> [goto CQUITB_3]   |  |
| Hard Edits             |   |  |
| Soft Edits             |   |  |
| AssocHelp              |   |  |

| Module                 | 29  |  |  |
|------------------------|---|--|--|
| Section Name           | Tobacco   |  |  |
| Part                   |   |  |  |
| Question ID            | NAE.085_03.000  |  |  |
| Variable Name          | CQUITB_3  |  |  |
| Universe               | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and SMKEV(e)='1' and SMKNOW(e) IN ('1','2') and CIGQTYR(e)='1'  |  |  |
| Universe-text          | Sample adults 18+ who are current smokers and tried to quit in the last year  |  |  |
| Question Text          | *Read if necessary.   |  |  |
| Answer Codes           | Thinking back to when you tried to QUIT smoking in the PAST 12 MONTHS, did you use ANY of the following:  A stop smoking clinic, class or support group?  1. Yes 2. No Refused Don't know |  |  |
| Question Type          | Yes/No  |  |  |
| Field Pane Description | Field Pane Description  |  |  |
| Fill Instructions      |   |  |  |
| Special Instructions   |   |  |  |
| Skip Instructions      | <1,2,R,D> [goto QWANT]  |  |  |
| Hard Edits             |   |  |  |
| Soft Edits             |   |  |  |
| AssocHelp              |   |  |  |

| Module                 | 29  |  |
|------------------------|---|--|
| Section Name           | Tobacco   |  |
| Part                   |   |  |
| Question ID            | NAE.100_00.000  |  |
| Variable Name          | QWANT   |  |
| Universe               | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and SMKEV(e)='1' and SMKNOW(e) IN ('1','2') |  |
| Universe-text          | Sample adults 18+ who are current smokers   |  |
| Question Text          | Would you like to completely quit smoking cigarettes?   |  |
| Answer Codes           | 1. Yes 2. No Refused Don't know   |  |
| Question Type          | Yes/No  |  |
| Field Pane Description |   |  |
| Fill Instructions      |   |  |
| Special Instructions   |   |  |
| Skip Instructions      | <1,2,R,D> [goto ECIGEV1]  |  |
| Hard Edits             |   |  |
| Soft Edits             |   |  |
| AssocHelp              |   |  |

| Module               | 29   |
|----------------------|--|
| Section Name         | Tobacco  |
| Part                 |  |
| Question ID          | NAE.105_00.000   |
| Variable Name        | ECIGEV1  |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999'))   |
| Universe-text        | Sample adults 18+  |
| Question Text        | The next question is about electronic cigarettes or e-cigarettes. You may also know them as vape-pens, hookah-pens, e-hookahs, or e-vaporizers. Some look like cigarettes, and others look like pens or small pipes. These are battery-powered, usually contain liquid nicotine, and produce vapor instead of smoke.  Have you EVER used an e-cigarette EVEN ONE TIME?  *Read if necessary: E-cigarettes and similar products can be bought as one-time, disposable products, as re-usable kits with a cartridge, or with refillable chambers. These usually contain a liquid, often called an "e-liquid" or "e-juice." Popular brands include NJOY, BLU, LOGIC, and VUSE. |
| Answer Codes         | 1. Yes 2. No Refused Don't know  |
| Question Type        | Yes/No   |
| Field Pane Descripti | on   |
| Fill Instructions    |  |
| Special Instructions |  |
| Skip Instructions    | <1> [goto ECIGCUR1]<br><2,R,D> [goto CIGAREV]  |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module                 | 29  |  |
|------------------------|---|--|
| Section Name           | Tobacco   |  |
| Part                   |   |  |
| Question ID            | NAE.110_00.000  |  |
| Variable Name          | ECIGCUR1  |  |
| Universe               | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999')) and ECIGEV1(e)='1' |  |
| Universe-text          | Sample adults 18+ who have ever used e-cigarettes                               |  |
| Question Text          | Do you now use e-cigarettes every day, some days, or not at all?                |  |
| Answer Codes           | 1. Every day 2. Some days 3. Not at all Refused Don't know                      |  |
| Question Type          | Pick One - answer list pane   |  |
| Field Pane Description |   |  |
| Fill Instructions      |   |  |
| Special Instructions   |   |  |
| Skip Instructions      | <1> [goto CIGAREV]<br><2,3,R,D> [goto ECIG30D]                                  |  |
| Hard Edits             |   |  |
| Soft Edits             |   |  |
| AssocHelp              |   |  |

| Module               | 29   |
|----------------------|--|
| Section Name         | Tobacco  |
| Part                 |  |
| Question ID          | NAE.115_00.000   |
| Variable Name        | ECIG30D  |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and ECIGCUR1(e) IN ('2','3',7','9')                        |
| Universe-text        | Sample adults 18+ who now use e-cigarettes some days, not at all, or refused, or don't know current e-cigarette status |
| Question Text        | On how many of the PAST 30 DAYS have you used e-cigarettes?  |
| Answer Codes         | Allow 0-30,R,D   |
| Question Type        | Integer  |
| Field Pane Descripti | on   |
| Fill Instructions    |  |
| Special Instructions |  |
| Skip Instructions    | <0-30,R,D> [goto CIGAREV]  |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module               | 29   |
|----------------------|--|
| Section Name         | Tobacco  |
| Part                 |  |
| Question ID          | NAE.145_00.000   |
| Variable Name        | CIGAREV  |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999'))   |
| Universe-text        | Sample adults 18+  |
| Question Text        | Have you ever smoked a regular cigar, cigarillo, or a little filtered cigar EVEN ONE TIME?   |
|                      | *Read if necessary: "Cigarillos" are medium cigars that sometimes are sold with plastic or wooden tips. Some common brands are Black and Mild, Swisher Sweets, Dutch Masters and Phillies Blunts. Cigarillos are usually sold individually or in packs of 5 or fewer. Little filtered cigars look like cigarettes and are usually brown in color. Like cigarettes, little filtered cigars have a spongy filter and are sold in packs of 20. Some common brands are Prime Time and Winchester.  *Read if necessary: Do not include electronic cigars or e-cigars. |
| Answer Codes         | 1. Yes 2. No Refused Don't know  |
| Question Type        | Yes/No   |
| Field Pane Descripti | on   |
| Fill Instructions    |  |
| Special Instructions |  |
| Skip Instructions    | <1> [goto CIGEV501]<br><2,R,D> [goto PIPEV1]   |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module               | 29   |
|----------------------|--|
| Section Name         | Tobacco  |
| Part                 |  |
| Question ID          | NAE.148_00.000   |
| Variable Name        | CIGEV501   |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999')) and CIGAREV(e)='1'                |
| Universe-text        | Sample adults 18+ who have ever smoked a regular cigar, cigarillow, or filtered cigar          |
| Question Text        | Have you smoked at least 50 cigars, cigarillos, or little filtered cigars in your entire life? |
| Answer Codes         | 1. Yes 2. No Refused Don't know  |
| Question Type        | Yes/No   |
| Field Pane Descripti | on   |
| Fill Instructions    |  |
| Special Instructions |  |
| Skip Instructions    | <1,2,R,D> [goto CIGCUR1]   |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module                 | 29  |
|------------------------|---|
| Section Name           | Tobacco   |
| Part                   |   |
| Question ID            | NAE.150_00.000  |
| Variable Name          | CIGCUR1   |
| Universe               | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999')) and CIGAREV(e)='1'                             |
| Universe-text          | Sample adults 18+ who have ever smoked a regular cigar, cigarillow, or filtered cigar                       |
| Question Text          | Do you now smoke regular cigars, cigarillos, or little filtered cigars every day, some days, or not at all? |
| Answer Codes           | 1. Every day 2. Some days 3. Not at all Refused Don't know  |
| Question Type          | Pick One - answer list pane   |
| Field Pane Description | on  |
| Fill Instructions      |   |
| Special Instructions   |   |
| Skip Instructions      | <1> [goto PIPEV1]<br><2,3,R,D> [goto CIG30D1]   |
| Hard Edits             |   |
| Soft Edits             |   |
| AssocHelp              |   |

| Module               | 29   |
|----------------------|--|
| Section Name         | Tobacco  |
| Part                 |  |
| Question ID          | NAE.151_00.000   |
| Variable Name        | CIG30D1  |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and CIGCUR1 (e) IN ('2','3','7','9')   |
| Universe-text        | Sample adults 18+ who now smoke a regular cigar, cigarillo, or little filtered cigar some days, not at all, or refused, or don't know current cigar smoking status |
| Question Text        | On how many of the PAST 30 DAYS have you smoked a regular cigar, cigarillo, or little filtered cigar?  |
| Answer Codes         | Allow 0-30,R,D   |
| Question Type        | Integer  |
| Field Pane Descripti | on   |
| Fill Instructions    |  |
| Special Instructions |  |
| Skip Instructions    | <0-30,R,D> [goto PIPEV1]   |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module                 | 29   |
|------------------------|--|
| Section Name           | Tobacco  |
| Part                   |  |
| Question ID            | NAE.152_00.000   |
| Variable Name          | PIPEV1   |
| Universe               | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999'))   |
| Universe-text          | Sample adults 18+  |
| Question Text          | Have you EVER smoked a pipe filled with tobacco-either a regular pipe, water pipe, or hookah EVEN ONE TIME?  |
|                        | *Read if necessary: A hookah is a type of water pipe. It is sometimes called a "narghile" (NAR-ge-lee) pipe. Do not include electronic hookah or e-hookahs.  *Read if necessary: Do not include electronic pipes or e-pipes. |
| Answer Codes           | 1. Yes 2. No Refused Don't know  |
| Question Type          | Yes/No   |
| Field Pane Description | on   |
| Fill Instructions      |  |
| Special Instructions   |  |
| Skip Instructions      | <1> [goto PIPECUR1]<br><2,R,D> [goto SMKLSTOB]   |
| Hard Edits             |  |
| Soft Edits             |  |
| AssocHelp              |  |

| Module               | 29   |
|----------------------|--|
| Section Name         | Tobacco  |
| Part                 |  |
| Question ID          | NAE.153_00.000   |
| Variable Name        | PIPECUR1   |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999')) and PIPEV1(e)='1'   |
| Universe-text        | Sample adults 18+ who have ever smoked a regular pipe, water pipe or hookah filled with tobacco                                  |
| Question Text        | Do you now smoke pipes filled with tobacco – either regular pipes, water pipes, or hookahs, every day, some days, or not at all? |
|                      | *Read if necessary: Do not include pipes filled with substances other than tobacco.  |
| Answer Codes         | 1. Every day 2. Some days 3. Not at all Refused Don't know   |
| Question Type        | Pick One - answer list pane  |
| Field Pane Descripti | on   |
| Fill Instructions    |  |
| Special Instructions |  |
| Skip Instructions    | <1-3,R,D> [goto SMKLSTOB]  |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module               | 29  |
|----------------------|---|
| Section Name         | Tobacco   |
| Part                 |   |
| Question ID          | NAE.155_00.000  |
| Variable Name        | SMKLSTOB  |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999'))   |
| Universe-text        | Sample adults 18+   |
| Question Text        | Smokeless tobacco products are placed in the mouth or nose and can include chewing tobacco, snuff, dip, snus (SNOOSE), or dissolvable tobacco.  |
| American Codes       | Have you ever used smokeless tobacco products EVEN ONE TIME?  *Read if necessary: Do not include nicotine replacement therapy products (such as patch, gum, lozenge, or spray, which are considered smoking cessation treatments.)  |
| Answer Codes         | 1. Yes 2. No Refused Don't know   |
| Question Type        | Yes/No  |
| Field Pane Descripti | ion   |
| Fill Instructions    |   |
| Special Instructions |   |
| Skip Instructions    | <1> [goto SMKLS20] <2,R,D> if (AAU.AMDLONG=1,2,R,D or AAI.ADENLONG=1,2,R,D) and ((CIGCUR1=1,2 or PIPECUR1=1,2 or ECIGCUR1=1,2) or (SMKEV=1 and (SMKNOW=1,2 or (SMKNOW=3 and ((SMKQTNO LE 95 and SMKQTTP=1) or (SMKQTNO LE 52 and SMKQTTP=2) or (SMKQTNO LE 12 and SMKQTTP=3) or (SMKQTNO LE 1 and SMKQTTP=4)))))) [goto MDTOB3]; else if SEX=2 and AGE=18-49 [goto LIVEBTH]; else [goto next section] |
| Hard Edits           |   |
| Soft Edits           |   |
| AssocHelp            |   |

| Module               | 29   |
|----------------------|--|
| Section Name         | Tobacco  |
| Part                 |  |
| Question ID          | NAE.157_00.000   |
| Variable Name        | SMKLS20  |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999')) and SMKLSTOB(e)='1' |
| Universe-text        | Sample adults 18+ who have ever used smokeless tobacco products                  |
| Question Text        | Have you used smokeless tobacco products at least 20 times in your entire life?  |
| Answer Codes         | 1. Yes 2. No Refused Don't know  |
| Question Type        | Yes/No   |
| Field Pane Descripti | on   |
| Fill Instructions    |  |
| Special Instructions |  |
| Skip Instructions    | <1,2,R,D> [goto SMKLSCUR]  |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module                 | 29   |
|------------------------|--|
| Section Name           | Tobacco  |
| Part                   |  |
| Question ID            | NAE.159_00.000   |
| Variable Name          | SMKLSCUR   |
| Universe               | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999')) and SMKLSTOB(e)='1' |
| Universe-text          | Sample adults 18+ who have ever used smokeless tobacco products                  |
| Question Text          | Do you NOW use smokeless tobacco products every day, some days, or not at all?   |
| Answer Codes           | 1. Every day 2. Some days 3. Not at all Refused Don't know                       |
| Question Type          | Pick One - answer list pane  |
| Field Pane Description | on   |
| Fill Instructions      |  |
| Special Instructions   |  |
| Skip Instructions      | <1> [goto SMKLBRND]<br><2,3,R,D> [goto SMKLS30D]                                 |
| Hard Edits             |  |
| Soft Edits             |  |
| AssocHelp              |  |

| Module               | 29  |  |
|----------------------|---|--|
| Section Name         | Tobacco   |  |
| Part                 |   |  |
| Question ID          | NAE.161_00.000  |  |
| Variable Name        | SMKLS30D  |  |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and SMKLSCUR(e) IN ('2','3',"7','9')  |  |
| Universe-text        | Sample adults 18+ who use smokeless tobacco products some days, not at all, or refused or don't know current smokeless using status   |  |
| Question Text        | On how many of the PAST 30 DAYS have you used chewing tobacco, snuff, dip, snus, or dissolvable tobacco?  |  |
| Answer Codes         | Allow 0-30,R,D  |  |
| Question Type        | Integer   |  |
| Field Pane Descript  | ion   |  |
| Fill Instructions    |   |  |
| Special Instructions |   |  |
| Skip Instructions    | <0,R,D>     if AAU.AMDLONG=1,2,R,D or AAU.ADENLONG=1,2,R,D and     ((CIGCUR1=1,2 or PIPECUR1=1,2 or ECIGCUR1=1,2 or SMKLSCUR=1,2) or     (SMKEV=1 and     (SMKNOW=1,2 or (SMKNOW=3 and     ((SMKQTNO LE 95 and SMKQTTP=1) or     (SMKQTNO LE 52 and SMKQTTP=2) or     (SMKQTNO LE 12 and SMKQTTP=3) or     (SMKQTNO LE 1 and SMKQTTP=4)))))) [goto MDTOB3];     else if SEX=2 and AGE=18-49 [goto LIVEBTH];     else [goto next section] <1-30> [goto SMKLBRND] |  |
| Hard Edits           |   |  |
| Soft Edits           |   |  |
| AssocHelp            |   |  |

| Module               | 29   |
|----------------------|--|
| Section Name         | Tobacco  |
| Part                 |  |
| Question ID          | NAE.163_00.000   |
| Variable Name        | SMKLBRND   |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and ('01' <= SMKLS30D(e) <='30') or (SMLKSCUR = '1')   |
| Universe-text        | Sample adults 18+ who use smokeless tobacco products at least once in the past 30 days.  |
| Question Text        | During the past 30 days, what brand of smokeless tobacco product did you use MOST OFTEN?   |
|                      | *Do not read categories  |
| Answer Codes         | 1. BEECH-NUT 2. CAMEL SNUS 3. COPE 4. COPENHAGEN 5. GENERAL SNUS 6. GRIZZLY 7. HUSKY 8. KAYAK 9. KODIAK 10. LEVI GARRETT 11. LONGHORN 12. MARLBORO SNUS 13. RED MAN 14. RED MAN GOLDEN BLEND 15. RED SEAL 16. SKOAL 17. SKOAL SNUS 18. SKOAL X-TRA 19. STOKER'S 20. TIMBER WOLF 21. Other (Specify) Refused Don't know |
| Question Type        | Integer  |
| Field Pane Descript  |  |
| Fill Instructions    |  |
| Special Instructions |  |
| Skip Instructions    | <1-20,R,D><br>if AAU.AMDLONG=1,2,R,D or AAU.ADENLONG=1,2,R,D and<br>((CIGCUR1=1,2 or PIPECUR1=1,2 or ECIGCUR1=1,2 or SMKLSCUR=1,2)<br>or<br>(SMKEV=1 and<br>(SMKNOW=1,2 or (SMKNOW=3 and<br>((SMKQTNO LE 95 and SMKQTTP=1) or<br>(SMKQTNO LE 52 and SMKQTTP=2) or  |

|                        | (SMKQTNO LE 12 and SMKQTTP=3) or<br>(SMKQTNO LE 1 and SMKQTTP=4)))))) [goto MDTOB3];<br>else if SEX=2 and AGE=18-49 [goto LIVEBTH];<br>else [goto next section]<br><21> [goto SMKLBRSP]  |  |
|------------------------|--|--|
| Hard Edits             |  |  |
| Soft Edits             |  |  |
| AssocHelp              |  |  |
| Module                 | 29   |  |
| Section Name           | Tobacco  |  |
| Part                   |  |  |
| Question ID            | NAE.165_00.000   |  |
| Variable Name          | SMKLBRSP   |  |
| Universe               | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and SMKLBRND(e)='21'   |  |
| Universe-text          | Sample adults 18+ who use other brand of smokeless tobacco most often  |  |
| Question Text          | *Specify the other brand of smokeless tobacco product used most often.   |  |
| Answer Codes           | Allow verbatim,R,D   |  |
| Question Type          | Verbatim   |  |
| Field Pane Description |  |  |
| Fill Instructions      |  |  |
| Special Instructions   |  |  |
| Skip Instructions      | <allow 30,r,d=""><br/>if AAU.AMDLONG=1,2,R,D or AAU.ADENLONG=1,2,R,D and<br/>((CIGCUR1=1,2 or PIPECUR1=1,2 or ECIGCUR1=1,2 or SMKLSCUR=1,2)<br/>or<br/>(SMKEV=1 and<br/>(SMKNOW=1,2 or (SMKNOW=3 and<br/>((SMKQTNO LE 95 and SMKQTTP=1) or<br/>(SMKQTNO LE 52 and SMKQTTP=2) or<br/>(SMKQTNO LE 12 and SMKQTTP=3) or<br/>(SMKQTNO LE 1 and SMKQTTP=4)))))) [goto MDTOB3];<br/>else if SEX=2 and AGE=18-49 [goto LIVEBTH];<br/>else [goto next section]</allow> |  |
| Hard Edits             |  |  |
| Soft Edits             |  |  |
| AssocHelp              |  |  |

| Module               | 29   |  |
|----------------------|--|--|
| Section Name         | Tobacco  |  |
| Part                 |  |  |
| Question ID          | NAE.170_00.000   |  |
| Variable Name        | MDTOB3   |  |
| Universe             | (AMDLONGR IN ('1','2','7','9') or  | OW='3' and<br>KQTTP(e)='1') or<br>(QTTP(e)='2') or<br>(QTTP(e)='3') or   |
| Universe-text        | and are current cigarette smoke  | een a doctor or other health professional in the past year ers or former cigarette smokers who have quit in the y smoke cigars, or pipes, or use smokeless tobacco |
| Question Text        |  | a medical doctor, dentist, or other health professional or to quit using other kinds of tobacco?   |
| Answer Codes         | 1. Yes<br>2. No<br>Refused<br>Don't know                                     |  |
| Question Type        | Yes/No   |  |
| Field Pane Descripti |  |  |
| Fill Instructions    |  |  |
| Special Instructions |  |  |
| Skip Instructions    | <1> [goto HPTOB3]<br><2,R,D> if SEX=2 and AGE=18<br>else [goto next section] | -49 [goto LIVEBTH];  |
| Hard Edits           |  |  |
| Soft Edits           |  |  |
| AssocHelp            |  |  |

| Module                 | 29   |
|------------------------|--|
| Section Name           | Tobacco  |
| Part                   |  |
| Question ID            | NAE.171_00.000   |
| Variable Name          | HPTOB3   |
| Universe               | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and MDTOB3(e)='1'  |
| Universe-text          | Sample adults 18+ whose doctor or other health professional advised them to quit smoking or using other kinds of tobacco in the past 12 months   |
| Question Text          | In the PAST 12 MONTHS, which of the following health professionals advised you to quit smoking or quit using other kinds of tobacco?  *Read answer categories below.  *Enter all that apply, separate with commas. |
| Answer Codes           | 1. Medical doctor 2. Dentist 3. Nurse 4. Dental Hygienist 5. Other health professional Refused Don't know  |
| Question Type          | Enter all that apply   |
| Field Pane Description |  |
| Fill Instructions      |  |
| Special Instructions   |  |
| Skip Instructions      | <1-4,R,D> if SEX=2 and AGE=18-49 [goto LIVEBTH]; else [goto next section] <5> [goto HPTOTH1]   |
| Hard Edits             |  |
| Soft Edits             |  |
| AssocHelp              |  |

| Module               | 29   |
|----------------------|--|
| Section Name         | Tobacco  |
| Part                 |  |
| Question ID          | NAE.172_00.000   |
| Variable Name        | HPTOTH1  |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and HPTOB3(e)='5'            |
| Universe-text        | Sample adults 18+ who were advised to quit using tobacco by other health professional    |
| Question Text        | *Enter other health professional.  |
| Answer Codes         | Allow verbatim, R,D  |
| Question Type        | Verbatim   |
| Field Pane Descripti | on   |
| Fill Instructions    |  |
| Special Instructions |  |
| Skip Instructions    | <allow 30,r,d=""> if SEX=2 and AGE=18-49[goto LIVEBTH]; else [goto next section]</allow> |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module               | 29  |
|----------------------|---|
| Section Name         | Tobacco   |
| Part                 |   |
| Question ID          | NAE.190_00.000  |
| Variable Name        | LIVEBTH   |
| Universe             | HHSTAT4='S' and ('018' <= AGE <= '049') and SEX='2'                                       |
| Universe-text        | Female sample adults age 18-49  |
| Question Text        | Have you given birth to a live born infant within the past 5 years?                       |
| Answer Codes         | 1. Yes 2. No Refused Don't know   |
| Question Type        | Yes/No  |
| Field Pane Descripti | on  |
| Fill Instructions    |   |
| Special Instructions |   |
| Skip Instructions    | <1> if SMKEV=1 [goto SMKPREG];<br>else [goto next section]<br><2,R,D> [goto next section] |
| Hard Edits           |   |
| Soft Edits           |   |
| AssocHelp            |   |

| Module                 | 29  |  |
|------------------------|---|--|
| Section Name           | Tobacco   |  |
| Part                   |   |  |
| Question ID            | NAE.200_00.000  |  |
| Variable Name          | SMKPREG   |  |
| Universe               | HHSTAT4='S' and ('018' <= AGE <= '049') and SEX='2' and SMKEV(e)='1' and LIVEBTH(e)='1'   |  |
| Universe-text          | Female sample adults age 18-49 who have smoked at least 100 cigarettes in their entire life and have had a live birth in the past 5 years |  |
| Question Text          | Were you smoking cigarettes when you became pregnant with your last child?  |  |
| Answer Codes           | 1. Yes<br>2. No<br>Refused<br>Don't know  |  |
| Question Type          | Yes/No  |  |
| Field Pane Description |   |  |
| Fill Instructions      |   |  |
| Special Instructions   |   |  |
| Skip Instructions      | <1,2,R,D> [goto SMKLST]   |  |
| Hard Edits             |   |  |
| Soft Edits             |   |  |
| AssocHelp              |   |  |

| Module                 | 29  |  |
|------------------------|---|--|
| Section Name           | Tobacco   |  |
| Part                   |   |  |
| Question ID            | NAE.210_00.000  |  |
| Variable Name          | SMKLST  |  |
| Universe               | HHSTAT4='S' and ('018' <= AGE <= '049') and SEX='2' and SMKEV(e)='1' and LIVEBTH(e)='1'   |  |
| Universe-text          | Female sample adults age 18-49 who have smoked at least 100 cigarettes in their entire life and have had a live birth in the past 5 years |  |
| Question Text          | Did you smoke cigarettes at any time during your pregnancy with your last child?  |  |
| Answer Codes           | 1. Yes 2. No Refused Don't know   |  |
| Question Type          | Yes/No  |  |
| Field Pane Description |   |  |
| Fill Instructions      |   |  |
| Special Instructions   |   |  |
| Skip Instructions      | <1> [goto QUTWK]<br><2,R,D> [goto next section]   |  |
| Hard Edits             |   |  |
| Soft Edits             |   |  |
| AssocHelp              |   |  |

| Module                 | 29   |
|------------------------|--|
| Section Name           | Tobacco  |
| Part                   |  |
| Question ID            | NAE.220_00.000   |
| Variable Name          | QUTWK  |
| Universe               | HHSTAT4='S' and ('018' <= AGE <= '049') and SEX='2' and SMKLST(e)='1'  |
| Universe-text          | Female sample adults age 18-49 who have smoked at least 100 cigarettes in their entire life and smoked during last pregnancy |
| Question Text          | Did you quit smoking for 7 days or longer during your pregnancy with your last child?  |
| Answer Codes           | 1. Yes 2. No Refused Don't know  |
| Question Type          | Yes/No   |
| Field Pane Description |  |
| Fill Instructions      |  |
| Special Instructions   |  |
| Skip Instructions      | <1> [goto MTHQUIT]<br><2,R,D> [goto next section]  |
| Hard Edits             |  |
| Soft Edits             |  |
| AssocHelp              |  |

| Module               | 29  |
|----------------------|---|
| Section Name         | Tobacco   |
| Part                 |   |
| Question ID          | NAE.230_00.000  |
| Variable Name        | MTHQUIT   |
| Universe             | HHSTAT4='S' and ('018' <= AGE <= '049') and SEX='2' and QUTWK(e)='1'  |
| Universe-text        | Female sample adults age 18-49 who have smoked at least 100 cigarettes in their entire life and smoked during last pregnancy, but quit for 7 days or longer |
| Question Text        | In what month of your pregnancy did you quit for 7 days or longer?  |
| Answer Codes         | 1. First 2. Second 3. Third 4. Fourth 5. Fifth 6. Sixth 7. Seventh 8. Eighth 9. Ninth Refused Don't know  |
| Question Type        | Pick One - answer list pane   |
| Field Pane Descripti | on  |
| Fill Instructions    |   |
| Special Instructions |   |
| Skip Instructions    | <1-9,R,D> [goto STSMOK]   |
| Hard Edits           |   |
| Soft Edits           |   |
| AssocHelp            |   |

| Module                 | 29  |
|------------------------|---|
| Section Name           | Tobacco   |
| Part                   |   |
| Question ID            | NAE.240_00.000  |
| Variable Name          | STSMOK  |
| Universe               | HHSTAT4='S' and ('018' <= AGE <= '049') and SEX='2' and QUTWK(e)='1'  |
| Universe-text          | Female sample adults age 18-49 who have smoked at least 100 cigarettes in their entire life and smoked during last pregnancy, but quit for 7 days or longer |
| Question Text          | Did you start smoking again during the pregnancy or did you stay off cigarettes for the rest of the pregnancy?  |
| Answer Codes           | 1. Stayed off rest of pregnancy 2. Started again 3. Never started again Refused Don't know  |
| Question Type          | Pick One - answer list pane   |
| Field Pane Description | on  |
| Fill Instructions      |   |
| Special Instructions   |   |
| Skip Instructions      | <1-3,R,D> [goto next section]   |
| Hard Edits             |   |
| Soft Edits             |   |
| AssocHelp              |   |

| 2015 Q1 NHIS Instrument Spec Report |  |  |
|-------------------------------------|--|--|
| Section nai                         | me: Cancer Screening   |  |
| Module                              | 30   |  |
| Section Name                        | Cancer Screening   |  |
| Part                                |  |  |
| Question ID                         | NAF.010_00.000   |  |
| Variable Name                       | SUN1HR   |  |
| Universe                            | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999'))  |  |
| Universe-text                       | Sample adults 18+  |  |
| Question Text                       | ? [F1]   |  |
|                                     | Now, we are going to ask you about your skin's reaction to the sun. After several months of not being in the sun very much, if you went out in the sun for an hour without sunscreen, a hat, or protective clothing, which one of these best describes what would happen to your skin? (*Read choices 1-5 only)  *Read if necessary: Even if you did not go out in the sun, what would happen if you did? Use the most recent experience. If none, then think about the past.  *By "sunburn" we mean even a small part of your skin turns red or hurts for 12 hours or more. |  |
| Answer Codes                        | 1. Get a severe sunburn with blisters 2. Have a moderate sunburn with peeling 3. Burn mildly with some or no darkening/tanning 4. Turn darker without sunburn 5. Nothing would happen to my skin 6. Do not go out in the sun 7. Other Refused Don't know   |  |
| Question Type                       | Pick One - answer list pane  |  |
| Field Pane Description              |  |  |

## Fill Instructions

## **Special Instructions**

Display answer categories 1-5 in BOLD BLACK text.

Display the text "Even if you did not go out in the sun, what would happen if you did? Use the most recent experience. If none, then think about the past." in BOLD GRAY

Display the text "By "sunburn" we mean even a small part of your skin turns red or hurts for 12 hours or more." In BOLD GRAY text.

Add a "visible" line after answer category #5 and before answer category #6 on this screen. This would probably be similar to the separation on the AFLHCA screen answer pane in the AHS section of Sample Adult.

| Skip Instructions | <1-7,R,D> [goto SUNTAN] |
|-------------------|-------------------------|
| Hard Edits        |                         |
| Soft Edits        |                         |
| AssocHelp         |                         |

| Module               | 30  |  |
|----------------------|---|--|
| Section Name         | Cancer Screening  |  |
| Part                 |   |  |
| Question ID          | NAF.015_00.000  |  |
| Variable Name        | SUNTAN  |  |
| Universe             | HHSTAT4='S' and (AGE GE '01   | 8' and AGE not IN ('997','999'))   |
| Universe-text        | Sample adults 18+   |  |
| Question Text        | ? [F1]  |  |
| Answer Codes         | weeks, without sunscreen, a ha<br>describes what your skin would<br>*Read if necessary: Even if you<br>did? Use the most recent expen | t in the sun repeatedly, such as every day for two t, or protective clothing. Which one of these best LOOK like? (*Read choices 1-5 only)  I did not go out in the sun, what would happen if you rience. If none, then think about the past.  Small part of your skin turns red or hurts for 12 hours or |
|                      | A little dark/Mildly tanned     Freckled but still light skinned  | d<br>or no darkening or tanningstill light skinned   |
| Question Type        | Pick One - answer list pane   |  |
| Field Pane Descripti | on  |  |
| Fill Instructions    |   |  |
| Special Instructions | Display answer categories 1-5 in  | n BOLD BLACK text.   |
|                      |   | d not go out in the sun, what would happen if you did?  If none, then think about the past." in BOLD GRAY  |
|                      | Display the text "By "sunburn" w for 12 hours or more." In BOLD   | re mean even a small part of your skin turns red or hurts GRAY text.   |
|                      |   | category #5 and before answer category #6 on this similar to the separation on the AFLHCA screen of Sample Adult.  |
| Skip Instructions    | <1-7,R,D> [goto SUN1_SHA]   |  |
| Hard Edits           |   |  |
| Soft Edits           |   |  |

| AssocHelp              |  |
|------------------------|--|
| Module                 | 30   |
| Section Name           | Cancer Screening   |
| Part                   |  |
| Question ID            | NAF.020_00.000   |
| Variable Name          | SUN1_SHA   |
| Universe               | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999'))   |
| Universe-text          | Sample adults 18+  |
| Question Text          | When you go outside on a warm sunny day for MORE than one hour, how often do you.  Stay in the shade? Would you say (Read categories 1-5)  |
| Answer Codes           | 1. Always 2.Most of the time 3. Sometimes 4. Rarely 5. Never 6. Don't go out in the sun Refused Don't know   |
| Question Type          | Pick One - answer list pane  |
| Field Pane Description | on   |
| Fill Instructions      |  |
| Special Instructions   | Display answer categories 1-5 in BOLD BLACK text.  Add a "visible" line after answer category #5 and before answer category #6 on this screen. This would probably be similar to the separation on the AFLHCA screen answer pane in the AHS section of Sample Adult. |
| Skip Instructions      | <1-6,R,D> [goto SUN1_CAP]  |
| Hard Edits             |  |
| Soft Edits             |  |
| AssocHelp              |  |

| Module                 | 30  |
|------------------------|---|
| Section Name           | Cancer Screening  |
| Part                   |   |
| Question ID            | NAF.022_00.000  |
| Variable Name          | SUN1_CAP  |
| Universe               | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999'))  |
| Universe-text          | Sample adults 18+   |
| Question Text          | *Read if necessary.   |
|                        | When you go outside on a warm sunny day for MORE than one hour, how often do you Wear a baseball cap or sun visor? Would you say (Read categories 1-5)  |
| Answer Codes           | 1. Always 2.Most of the time 3. Sometimes 4. Rarely 5. Never 6. Don't go out in the sun Refused Don't know  |
| Question Type          | Pick One - answer list pane   |
| Field Pane Description |   |
| Fill Instructions      |   |
| Special Instructions   | Display answer categories 1-5 in BOLD BLACK text.   |
|                        | Display the text "When you go outside on a warm sunny day for MORE than one hour, how often do you" in BOLD GRAY text.  |
|                        | Add a "visible" line after answer category #5 and before answer category #6 on this screen. This would probably be similar to the separation on the AFLHCA screen answer pane in the AHS section of Sample Adult. |
| Skip Instructions      | <1-6,R,D> [goto SUN_HAT1]   |
| Hard Edits             |   |
| Soft Edits             |   |
| AssocHelp              |   |

| Module                 | 30   |   |
|------------------------|--|---|
| Section Name           | Cancer Screening   |   |
| Part                   |  |   |
| Question ID            | NAF.023_00.000   |   |
| Variable Name          | SUN_HAT1   |   |
| Universe               | HHSTAT4='S' and (AGE GE '0   | 18' and AGE not IN ('997','999'))   |
| Universe-text          | Sample adults 18+  |   |
| Question Text          | (book) CAN4  |   |
|                        | *Read if necessary.  |   |
|                        | When you go outside on a war   | m sunny day for MORE than one hour, how often do you.   |
|                        | Wear a hat that shades your fa around? Would you say (Read   | ce, ears AND neck such as a hat with a wide brim all categories 1-5)  |
|                        | *Read if necessary: Do not include le  | lude visors, baseball caps, or hats that do not shade the egionnaire hats.  |
| Answer Codes           | 1. Always 2.Most of the time 3. Sometimes 4. Rarely 5. Never 6. Don't go out in the sun Refused Don't know |   |
| Question Type          | Pick One - answer list pane  |   |
| Field Pane Description | on   |   |
| Fill Instructions      |  |   |
| Special Instructions   | Display answer categories 1-5  | in BOLD BLACK text.   |
|                        | Display the text "When you go how often do you" in BOLD G  | outside on a warm sunny day for MORE than one hour, RAY text.   |
|                        |  | e visors, baseball caps, or hats that do not shade The egionnaire hats." In BOLD GRAY text.                             |
|                        |  | r category #5 and before answer category #6 on this e similar to the separation on the AFLHCA screen n of Sample Adult. |
| Skip Instructions      | <1-6,R,D> [goto SUN2_LGS]  |   |
| Hard Edits             |  |   |
| Soft Edits             |  |   |
| AssocHelp              |  |   |

| Module               | 30  |
|----------------------|---|
| Section Name         | Cancer Screening  |
| Part                 |   |
| Question ID          | NAF.024_00.000  |
| Variable Name        | SUN2_LGS  |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999'))   |
| Universe-text        | Sample adults 18+   |
| Question Text        | *Read if necessary.   |
|                      | When you go outside on a warm sunny day for MORE than one hour, how often do you.   Wear a long sleeved shirt? Would you say (Read categories 1-5)  |
| Answer Codes         | 1. Always 2.Most of the time 3. Sometimes 4. Rarely 5. Never 6. Don't go out in the sun Refused Don't know  |
| Question Type        | Pick One - answer list pane   |
| Field Pane Descripti | on  |
| Fill Instructions    |   |
| Special Instructions | Display answer categories 1-5 in BOLD BLACK text.   |
|                      | Display the text "When you go outside on a warm sunny day for MORE than one hour, how often do you" in BOLD GRAY text.  |
|                      | Add a "visible" line after answer category #5 and before answer category #6 on this screen. This would probably be similar to the separation on the AFLHCA screen answer pane in the AHS section of Sample Adult. |
| Skip Instructions    | <1-6,R,D> [goto SUN2_LGP]   |
| Hard Edits           |   |
| Soft Edits           |   |
| AssocHelp            |   |

| Module               | 30  |
|----------------------|---|
| Section Name         | Cancer Screening  |
| Part                 |   |
| Question ID          | NAF.025_00.000  |
| Variable Name        | SUN2_LGP  |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999'))  |
| Universe-text        | Sample adults 18+   |
| Question Text        | *Read if necessary.   |
|                      | When you go outside on a warm sunny day for MORE than one hour, how often do you Wear long pants or other clothing that reaches your ankles? Would you say (Read categories 1-5)                                  |
| Answer Codes         | 1. Always 2.Most of the time 3. Sometimes 4. Rarely 5. Never 6. Don't go out in the sun Refused Don't know  |
| Question Type        | Pick One - answer list pane   |
| Field Pane Descripti | on [  |
| Fill Instructions    |   |
| Special Instructions | Display answer categories 1-5 in BOLD BLACK text.   |
|                      | Display the text "When you go outside on a warm sunny day for MORE than one hour, how often do you" in BOLD GRAY text.  |
|                      | Add a "visible" line after answer category #5 and before answer category #6 on this screen. This would probably be similar to the separation on the AFLHCA screen answer pane in the AHS section of Sample Adult. |
| Skip Instructions    | <1-6,R,D> [goto SUN2_SCR]   |
| Hard Edits           |   |
| Soft Edits           |   |
| AssocHelp            |   |

| Module               | 30  |
|----------------------|---|
| Section Name         | Cancer Screening  |
| Part                 |   |
| Question ID          | NAF.026_00.000  |
| Variable Name        | SUN2_SCR  |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999'))  |
| Universe-text        | Sample adults 18+   |
| Question Text        | *Read if necessary.   |
|                      | When you go outside on a warm sunny day for MORE than one hour, how often do you.  Use sunscreen? Would you say (Read categories 1-5)   |
| Answer Codes         | 1. Always 2.Most of the time 3. Sometimes 4. Rarely 5. Never 6. Don't go out in the sun Refused Don't know  |
| Question Type        | Pick One - answer list pane   |
| Field Pane Descripti | on  |
| Fill Instructions    |   |
| Special Instructions | Display answer categories 1-5 in BOLD BLACK text.   |
|                      | Display the text "When you go outside on a warm sunny day for MORE than one hour, how often do you" in BOLD GRAY text.  |
|                      | Add a "visible" line after answer category #5 and before answer category #6 on this screen. This would probably be similar to the separation on the AFLHCA screen answer pane in the AHS section of Sample Adult. |
| Skip Instructions    | <1-4> [goto SPF]<br><5,6,R,D> [goto NBURN]  |
| Hard Edits           |   |
| Soft Edits           |   |
| AssocHelp            |   |

| Module               | 30  |  |
|----------------------|---|--|
| Section Name         | Cancer Screening  |  |
| Part                 |   |  |
| Question ID          | NAF.027_00.000  |  |
| Variable Name        | SPF   |  |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and SUN2_SCR(e) IN ('1','2','3','4')                |  |
| Universe-text        | Sample adults 18+ who use sunscreen at least rarely   |  |
| Question Text        | ? [F1]  |  |
|                      | What is the SPF number of the sunscreen you use MOST often?   |  |
|                      | *Read if necessary: If you use more than one or different ones, pick the one used most often.                   |  |
|                      | *Enter '96' if unable to pick the one used most often.  |  |
|                      | *Enter '50' if 50 or higher SPF.  |  |
| Answer Codes         | Allow 1-50,96, R,D<br>Refused<br>Don't Know   |  |
| Question Type        | Integer   |  |
| Field Pane Descripti | ion [   |  |
| Fill Instructions    |   |  |
| Special Instructions | Display the text "If you use more than one or different ones, pick the one used most often." in BOLD GRAY text. |  |
| Skip Instructions    | <1-50> [goto NBURN]<br><96,R,D> [goto SPFSCALE]<br><51-95> [goto ERR_SPF]                                       |  |
| Hard Edits           | ERR_SPF   |  |
|                      | *51-95 not allowed in this field. *Please correct.  |  |
| Soft Edits           |   |  |
| AssocHelp            |   |  |

| Module                 | 30  |
|------------------------|---|
| Section Name           | Cancer Screening  |
| Part                   |   |
| Question ID            | NAF.028_00.000  |
| Variable Name          | SPFSCALE  |
| Universe               | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and SPF(e) IN ('96','97','99')                                      |
| Universe-text          | Sample adults 18+ who answered more than one, different ones, or other to SPF number, or did not know or refused to say the SPF |
| Question Text          | Is the SPF usually 1-14 or 15-50?   |
|                        | *Enter '2' if 50 or higher SPF.   |
| Answer Codes           | 1. 1-14<br>2. 15-50<br>Refused<br>Don't know  |
| Question Type          | Pick One - answer list pane   |
| Field Pane Description | on  |
| Fill Instructions      |   |
| Special Instructions   |   |
| Skip Instructions      | <1,2,R,D> [goto NBURN]  |
| Hard Edits             |   |
| Soft Edits             |   |
| AssocHelp              |   |

| Module               | 30  |
|----------------------|---|
| Section Name         | Cancer Screening  |
| Part                 |   |
| Question ID          | NAF.030_00.000  |
| Variable Name        | NBURN   |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999'))   |
| Universe-text        | Sample adults 18+   |
| Question Text        | DURING THE PAST 12 MONTHS, how many times have you had a sunburn?   |
|                      | *Read if necessary: By "sunburn" we mean even a small part of your skin turns red or hurts for 12 hours or more. Also include burns from sunlamps and other indoor tanning devices.                   |
|                      | *Enter '0' for none.  |
| Answer Codes         | Allow 0-365,R,D<br>Refused<br>Don't Know  |
| Question Type        | Integer   |
| Field Pane Descripti | on  |
| Fill Instructions    |   |
| Special Instructions | Display the text "By "sunburn" we mean even a small part of your skin turns red or hurts for 12 hours or more. Also include burns from sunlamps and other indoor tanning devices." in BOLD GRAY text. |
| Skip Instructions    | <0-365,R,D> [goto SNEVER]   |
| Hard Edits           |   |
| Soft Edits           |   |
| AssocHelp            |   |

| Module                 | 30  |
|------------------------|---|
| Section Name           | Cancer Screening  |
| Part                   |   |
| Question ID            | NAF.031_00.000  |
| Variable Name          | SNEVER  |
| Universe               | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999'))  |
| Universe-text          | Sample adults 18+   |
| Question Text          | Have you EVER used an indoor tanning device such as a sunlamp, sunbed, or tanning booth? Do NOT include times you have gotten a spray-on tan. |
| Answer Codes           | 1. Yes 2. No Refused Don't Know   |
| Question Type          | Yes/No  |
| Field Pane Description | on  |
| Fill Instructions      |   |
| Special Instructions   |   |
| Skip Instructions      | <1> [goto SNONCE]<br><2,R,D> [goto STP12M]  |
| Hard Edits             |   |
| Soft Edits             |   |
| AssocHelp              |   |

| Module                 | 30  |
|------------------------|---|
| Section Name           | Cancer Screening  |
| Part                   |   |
| Question ID            | NAF.032_00.000  |
| Variable Name          | SNONCE  |
| Universe               | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999')) and SNEVER(e)='1'  |
| Universe-text          | Sample adults 18+ who have ever used an indoor tanning device   |
| Question Text          | DURING THE PAST 12 MONTHS, have you used an indoor tanning device such as a sunlamp, sunbed, or tanning booth EVEN ONE TIME? Do NOT include times you have gotten a spray-on tan. |
| Answer Codes           | 1. Yes 2. No Refused Don't Know   |
| Question Type          | Yes/No  |
| Field Pane Description | on  |
| Fill Instructions      |   |
| Special Instructions   |   |
| Skip Instructions      | <1> [goto SNNUM1]<br><2,R,D> [goto STP12M]  |
| Hard Edits             |   |
| Soft Edits             |   |
| AssocHelp              |   |

| Module                 | 30  |
|------------------------|---|
| Section Name           | Cancer Screening  |
| Part                   |   |
| Question ID            | NAF.033_00.000  |
| Variable Name          | SNNUM1  |
| Universe               | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and SNONCE(e)='1'   |
| Universe-text          | Sample adults 18+ who have used indoor tanning device in the past year  |
| Question Text          | DURING THE PAST 12 MONTHS, how many times have you used an indoor tanning device such as a sunlamp, sunbed or tanning booth? Do NOT include times you have gotten a spray-on tan. |
| Answer Codes           | Allow 1-365,<br>Refused<br>Don't Know   |
| Question Type          | Integer   |
| Field Pane Description | on  |
| Fill Instructions      |   |
| Special Instructions   |   |
| Skip Instructions      | <1-365,R,D> [goto SNPROB]   |
| Hard Edits             |   |
| Soft Edits             |   |
| AssocHelp              |   |

| Module               | 30  |
|----------------------|---|
| Section Name         | Cancer Screening  |
| Part                 |   |
| Question ID          | NAF.035_00.000  |
| Variable Name        | SNPROB  |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999')) and SNONCE(e)='1'  |
| Universe-text        | Sample adults 18+ who have used indoor tanning device in the past year  |
| Question Text        | DURING THE PAST 12 MONTHS, have you had a problem such as a burn, rash, or skin infection caused by using an indoor tanning device such as a sunlamp, sunbed, or tanning booth? |
|                      | *Read if necessary: Do NOT include problems you have experienced from getting a spray-on tan.   |
| Answer Codes         | 1. Yes<br>2. No<br>Refused<br>Don't Know  |
| Question Type        | Yes/No  |
| Field Pane Descripti | on  |
| Fill Instructions    |   |
| Special Instructions |   |
| Skip Instructions    | <1> [goto SNPRTYP]<br><2,R,D> [goto STP12M]   |
| Hard Edits           |   |
| Soft Edits           |   |
| AssocHelp            |   |

| Module                 | 30   |
|------------------------|--|
| Section Name           | Cancer Screening   |
| Part                   |  |
| Question ID            | NAF.037_00.000   |
| Variable Name          | SNPRTYP  |
| Universe               | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and (SNONCE(e)='1') and (SNPROB(e)='1')  |
| Universe-text          | Sample adults 18+ who have had a problem using an indoor tanning device in past year   |
| Question Text          | Which of the following problem or problems did you have?   |
| Answer Codes           | *Read categories below.  *Read if necessary: By "sunburn" we mean even a small part of your skin turns red or hurts for 12 hours or more.  * Enter all that apply, separate with commas.  1. Got a sunburn 2. Got a rash 3. Got a skin infection 4. Experienced another problem Refused Don't know |
| Question Type          | Enter all that apply   |
| Field Pane Description | on   |
| Fill Instructions      |  |
| Special Instructions   |  |
| Skip Instructions      | <1-4,R,D> [goto STP12M]  |
| Hard Edits             |  |
| Soft Edits             |  |
| AssocHelp              |  |

| Module                 | 30  |
|------------------------|---|
| Section Name           | Cancer Screening  |
| Part                   |   |
| Question ID            | NAF.038_00.000  |
| Variable Name          | STP12M  |
| Universe               | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999'))  |
| Universe-text          | Sample adults 18+   |
| Question Text          | DURING THE PAST 12 MONTHS, have you used self-applied sunless tanning products, also known as self-tanning or fake tanning? |
| Answer Codes           | 1. Yes<br>2. No<br>Refused<br>Don't Know  |
| Question Type          | Yes/No  |
| Field Pane Description | on  |
| Fill Instructions      |   |
| Special Instructions   |   |
| Skip Instructions      | <1,2,R,D> [goto SPR12M]   |
| Hard Edits             |   |
| Soft Edits             |   |
| AssocHelp              |   |

| Module                 | 30  |
|------------------------|---|
| Section Name           | Cancer Screening  |
| Part                   |   |
| Question ID            | NAF.039_00.000  |
| Variable Name          | SPR12M  |
| Universe               | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999'))  |
| Universe-text          | Sample adults 18+   |
| Question Text          | DURING THE PAST 12 MONTHS, have you gotten a spray-on or mist tan AT A TANNING SALON or other business? |
| Answer Codes           | 1. Yes 2. No Refused Don't Know   |
| Question Type          | Yes/No  |
| Field Pane Description | on  |
| Fill Instructions      |   |
| Special Instructions   |   |
| Skip Instructions      | <1,2,R,D> [goto SKNX]   |
| Hard Edits             |   |
| Soft Edits             |   |
| AssocHelp              |   |

| Module               | 30  |
|----------------------|---|
| Section Name         | Cancer Screening  |
| Part                 |   |
| Question ID          | NAF.040_00.000  |
| Variable Name        | SKNX  |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999'))  |
| Universe-text        | Sample adults 18+   |
| Question Text        | Now we are going to ask you about medical tests and exams that check for cancer. Have you EVER had all of your skin from head to toe checked for cancer either by a dermatologist or some other kind of doctor? |
| Answer Codes         | 1. Yes 2. No Refused Don't Know   |
| Question Type        | Yes/No  |
| Field Pane Descripti | on  |
| Fill Instructions    |   |
| Special Instructions |   |
| Skip Instructions    | <1> [goto RSKX1_MT] <2,R,D> if SEX=2 [goto MENSTAGE]; else if SEX=1 and AGE le 64 [goto HPVHRD] else if SEX=1 and AGE ge 65 [goto CHESTX]   |
| Hard Edits           |   |
| Soft Edits           |   |
| AssocHelp            |   |

| Module                 | 30   |
|------------------------|--|
|                        |  |
| Section Name           | Cancer Screening   |
| Part                   |  |
| Question ID            | NAF.050_01.000   |
| Variable Name          | RSKX1_MT   |
| Universe               | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and SKNX(e)='1'  |
| Universe-text          | Sample adults 18+ who have had a skin exam   |
| Question Text          | 1 of 2   |
|                        | When did you have your MOST RECENT skin exam to check for cancer?  |
|                        | *Enter month of last skin exam.  |
|                        | * Enter '96' to go to the number and time period format.   |
| Answer Codes           | 1. January 2. February 3. March 4. April 5. May 6. June 7. July 8. August 9. September 10. October 11. November 12. December 96. Time period format Refused Don't know |
| Question Type          | Pick One - answer list pane  |
| Field Pane Description | on   |
| Fill Instructions      |  |
| Special Instructions   | if RSKX1_MT = <r> store 'R' in RSKX1_YR if RSKX1_MT = &lt;96&gt; store '9996' in RSKX1_YR</r>  |
| Skip Instructions      | <1-12,D> [goto RSKX1_YR] <r> store "R' in RSKX1_YR [goto RSKX2] &lt;96&gt; store "9996" in RSKX1_YR [goto RSKX1N]</r>  |
| Hard Edits             |  |
| Soft Edits             |  |
| AssocHelp              |  |

| Module               | 30   |
|----------------------|--|
| Section Name         | Cancer Screening   |
| Part                 |  |
| Question ID          | NAF.050_02.000   |
| Variable Name        | RSKX1_YR   |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and SKNX(e)='1' and ('01' <= RSKX1_MT <= '12' or RSKX1_MT='99')  |
| Universe-text        | Sample adults age 18+ who answered month of last skin exam or didn't know month of last skin exam  |
| Question Text        | 2 of 2   |
|                      | *Enter year of last skin exam.   |
| Answer Codes         |  |
| Question Type        | Integer  |
| Field Pane Descripti | on   |
| Fill Instructions    |  |
| Special Instructions | Allow 4 character numeric field – must enter 4 numbers   |
| Skip Instructions    | <pre><valid year=""> if RSKX1_YR gt current year or (RSKX1_YR=current year and RSKX1_MT gt current month)   goto ERR1_ RSKX1_YR (future date) elseif RSKX1_YR It DOBY or (RSKX1_YR=DOBY and RSKX1_MT It DOBM)   goto ERR2_ RSKX1_YR (prior to birth date) elseif RSKX1_MT=D and RSKX1_YR &lt; current year-5   set RSKX2=5   goto SKINREAS elseif RSKX1_MT=D and RSKX1_YR = current year-4   set RSKX2=4   goto SKINREAS elseif RSKX1_MT=D and RSKX1_YR = current year   set RSKX2=1   goto SKINREAS elseif RSKX1_MT=D and (RSKX1_YR = current year-1 or RSKX1_YR = current year-2   or RSKX1_YR = current year-3 or RSKX1_YR = current year-5)   goto RSKX2 elseif RSKX1_MT=1-12   goto SKINREAS </valid></pre> |
| Hard Edits           | ERR1_RSKX1_YR  * Future date invalid. Please correct.  ERR2_RSKX1_YR  * Date before birth. Please correct.   |
| Soft Edits           |  |

| AssocHelp            |  |
|----------------------|--|
| Module               | 30   |
| Section Name         | Cancer Screening   |
| Part                 |  |
| Question ID          | NAF.055_01.000   |
| Variable Name        | RSKX1N   |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and SKNX(e)='1' and RSKX1_MT(e)='96' |
| Universe-text        | Sample adults 18+ who selected number and time period format for most recent skin exam           |
| Question Text        | 1 of 2   |
|                      | When did you have your MOST RECENT skin exam?  |
|                      | *Enter number for time since last skin exam.   |
|                      | *Enter '95' for 95 or more.  |
| Answer Codes         | All 1-95,R,D<br>Refused<br>Don't Know  |
| Question Type        | Integer  |
| Field Pane Descripti | don  |
| Fill Instructions    |  |
| Special Instructions | if RSKX1N = <r> store 'R' in RSKX1T<br/>if RSKX1N = <d> store 'D' in RSKX1T</d></r>              |
| Skip Instructions    | <1-95> [goto RSKX1T]<br><r,d> store "R,D" in RSKX1T [goto RSKX2]</r,d>                           |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module                 | 30  |
|------------------------|---|
| Section Name           | Cancer Screening  |
| Part                   |   |
| Question ID            | NAF.055_02.000  |
| Variable Name          | RSKX1T  |
| Universe               | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and SKNX(e)='1' and RSKX1_MT(e)='96' and ('01' <= RSKX1N <= '95')   |
| Universe-text          | Sample adults 18+ who answered 1-95 for number part of this 2 part question   |
| Question Text          | 2 of 2  |
|                        | *Enter time period for time since most recent skin exam.  |
| Answer Codes           | 1. Days ago 2. Weeks ago 3. Months ago 4. Years ago Refused Don't know  |
| Question Type          | Pick One - answer list pane   |
| Field Pane Description |   |
| Fill Instructions      |   |
| Special Instructions   | If RSKX1N gt 5 and RSKX1T=4, store '5' in RSKX2.  |
|                        | If RSKX1N=4 and RSKX1T=4, store '4' in RSKX2.   |
| Skip Instructions      | <1-3> goto SKINREAS <4> if RSKX1N=4, set RSKX2=4, [goto SKINREAS]     elseif RSKX1N gt 5 and RSKX1N gt AGE, [goto ERR_RSKX1T (greater than persons age)]     elseif RSKX1N gt 5 and RSKX1N le AGE, set RSKX2=5, [goto SKINREA]     elseif RSKX1N=1,2,3,5, goto RSKX2 <r,d> goto RSKX2</r,d> |
| Hard Edits             |   |
| Soft Edits             |   |
| AssocHelp              |   |

30 **Module Cancer Screening** Section Name Part Question ID NAF.060 00.000 Variable Name RSKX2 HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and SKNX(e)='1' and Universe (RSKX1\_MT(e) IN ('97', '98', '99') or RSKX1\_YR(e) IN ('9997', '9998', '9999') or RSKX1N(e) IN ('97', '98', '99') or RSKX1T(e) IN ('7', '8', '9') or (RSKX1T(e) = '4' and RSKX1N IN ('1','2','3','5'))) Sample adults 18+ who failed to give a complete date in either the month or year format Universe-text or failed to give a complete date in the number and time period format, or entered years ago in the time period format (excluding those whose last skin exam was over 5 years ago) Was it: **Ouestion Text** \*Read answer categories. **Answer Codes** 1. A year ago or less 2. More than 1 year but not more than 2 years 3. More than 2 years but not more than 3 years 4. More than 3 years but not more than 5 years 5. Over 5 years ago Refused Don't know **Question** Type Pick One - answer list pane Field Pane Description Fill Instructions Display answer categories 1-5 in BOLD BLACK text. **Special Instructions** If RSKX1N gt 5 and RSKX1T=4, store '5' in RSKX2 and don't ask question. If RSKX1N=4 and RSKX1T=4, store '4' in RSKX2 and don't ask question. Based upon prior answers: if RSKX1N = 1 and RSKX1T = '4', gray out answer codes 3,4,5 if RSKX1N = 2 and RSKX1T = '4', gray out answer codes 1,4,5 if RSKX1N = 3 and RSKX1T = '4', gray out answer codes 1,2,5 if RSKX1N = 5 and RSKX1T = '4', gray out answer codes 1,2,3 <1-5,R,D> Skip Instructions if answer code is grayed out [goto ERR RSKX2] else [goto SKINREAS] ERR RSKX2 Hard Edits \*That is not a valid response. \*Please correct.

Soft Edits

| AssocHelp              |  |  |
|------------------------|--|--|
| Module                 | 30   |  |
| Section Name           | Cancer Screening   |  |
| Part                   |  |  |
| Question ID            | NAF.070_00.000   |  |
| Variable Name          | SKINREAS   |  |
| Universe               | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999')) and SKNX(e)='1'   |  |
| Universe-text          | Sample adults 18+ who have had a skin exam   |  |
| Question Text          | What was the MAIN reason you had this skin exam was it part of a routine exam, because of a problem, or some other reason? |  |
| Answer Codes           | 1. Part of a routine exam 2. Because of a problem 3. Other reason Refused Don't know                                       |  |
| Question Type          | Pick One - answer list pane  |  |
| Field Pane Description |  |  |
| Fill Instructions      |  |  |
| Special Instructions   |  |  |
| Skip Instructions      | <1-3,R,D> if SEX=2 [goto MENSTAGE] else if SEX=1 and AGE le 64 [goto HPVHRD] else if SEX=1 and AGE ge 65 [goto CHESTX]     |  |
| Hard Edits             |  |  |
| Soft Edits             |  |  |
| AssocHelp              |  |  |

| Module               | 30  |
|----------------------|---|
| Section Name         | Cancer Screening  |
| Part                 |   |
| Question ID          | NAF.080_00.000  |
| Variable Name        | MENSTAGE  |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999')) and SEX='2'  |
| Universe-text        | Female sample adults 18+  |
| Question Text        | The following questions are about women's health. How old were you when your periods or menstrual cycles started?   |
|                      | *Enter '0' for haven't started.   |
| Answer Codes         | Allow 0, 6-60,R,D<br>Refused<br>Don't Know  |
| Question Type        | Integer   |
| Field Pane Descripti | on  |
| Fill Instructions    |   |
| Special Instructions | if nae.LIVEBTH (NAE.190_00.000) = '1' (in Tobacco section) store '1' in BIRTHEV (NAF.110_00.000)  |
| Skip Instructions    | <6-60,R,D>     if MENSTAGE gt AGE [goto ERR1_MENSTAGE]     elseif AGE ge 39 [goto MENSTILL]     else if AGE le 38 and nae.LIVEBTH ne '1' [goto BIRTHEV]     elseif AGE le 38 and nae.LIVEBTH = '1' [goto BIRTHNUM] <0> if nae.LIVEBTH ne '1' goto BIRTHEV     else goto BIRTHNUM <1-5> [goto ERR2_MENSTAGE] |
| Hard Edits           | ERR1_MENSTAGE   |
|                      | * Entry cannot be greater than age. * Please correct.   |
|                      | ERR2_MENSTAGE   |
|                      | * Not a valid code. * Please correct.   |
| Soft Edits           |   |
| AssocHelp            |   |

| Module               | 30   |
|----------------------|--|
| Section Name         | Cancer Screening   |
| Part                 |  |
| Question ID          | NAF.090_00.000   |
| Variable Name        | MENSTILL   |
| Universe             | HHSTAT4='S' and (AGE GE '039' and AGE not IN ('997','999')) and SEX='2' and MENSTAGE ne '00'                   |
| Universe-text        | Female sample adults 39+ who have started menstrual cycles   |
| Question Text        | Do you still have periods or menstrual cycles?   |
| Answer Codes         | 1. Yes<br>2. No<br>Refused<br>Don't Know   |
| Question Type        | Yes/No   |
| Field Pane Descripti | on   |
| Fill Instructions    |  |
| Special Instructions | if nae.LIVEBTH (NAE.190_00.000) = '1' (in Tobacco section) store '1' in BIRTHEV (NAF.110_00.000)               |
| Skip Instructions    | <1,R,D> if nae.LIVEBTH ne '1' [goto BIRTHEV]<br>elseif nae.LIVEBTH = '1' [goto BIRTHNUM]<br><2> [goto MENLAST] |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module               | 30  |
|----------------------|---|
| Section Name         | Cancer Screening  |
| Part                 |   |
| Question ID          | NAF.100_00.000  |
| Variable Name        | MENLAST   |
| Universe             | HHSTAT4='S' and (AGE GE '039' and AGE not IN ('997','999')) and SEX='2' and MENSTILL='2'                          |
| Universe-text        | Female sample adults 39+ who do not have periods any more   |
| Question Text        | When did you have your last period or menstrual cycle? Was it   |
|                      | * Read categories below.  |
| Answer Codes         | 1. 1 year ago or less 2. More than 1 year ago but less than 2 years ago 3. 2 years ago or more Refused Don't know |
| Question Type        | Pick One - answer list pane   |
| Field Pane Descripti | on  |
| Fill Instructions    |   |
| Special Instructions | if nae.LIVEBTH (NAE.190_00.000) = '1' (in Tobacco section) store '1' in BIRTHEV (NAF.110_00.000)                  |
|                      | Display answer categories 1-3 in BOLD BLACK text.   |
| Skip Instructions    | <1-3,R,D> if nae.LIVEBTH ne '1' [goto BIRTHEV] elseif nae.LIVEBTH = '1' [goto BIRTHNUM]                           |
| Hard Edits           |   |
| Soft Edits           |   |
| AssocHelp            |   |

| Module               | 30   |                             |                            |
|----------------------|--|-----------------------------|----------------------------|
| Section Name         | Cancer Screening   |                             |                            |
| Part                 |  |                             |                            |
| Question ID          | NAF.110_00.000   |                             |                            |
| Variable Name        | BIRTHEV  |                             |                            |
| Universe             | HHSTAT4='S' and (AGE GE '018'  | and AGE not IN ('997','S    | 999')) and SEX='2'         |
| Universe-text        | Female sample adults 18+ who di  | d not already answer the    | ey had a live birth        |
| Question Text        | *If you remember that the respond verify the information and enter '1' |                             |                            |
|                      | Have you EVER given birth to a liv                                     | ve born infant?             |                            |
|                      | *Read if necessary.  |                             |                            |
|                      | A live born infant is an infant born                                   | alive.                      |                            |
| Answer Codes         | 1. Yes<br>2. No<br>Refused<br>Don't Know                               |                             |                            |
| Question Type        | Yes/No   |                             |                            |
| Field Pane Descripti | ion  |                             |                            |
| Fill Instructions    |  |                             |                            |
| Special Instructions | nae.LIVEBTH (NAE.190_00.000)   | is in the Tobacco (NAE)     | Cancer Supplement section. |
|                      | Display the text " A live born infant                                  | t is an infant born alive." | in BOLD GRAY text.         |
| Skip Instructions    | <1> [goto BIRTHNUM]<br><2,R,D> [goto PAPHAD1]                          |                             |                            |
| Hard Edits           |  |                             |                            |
| Soft Edits           |  |                             |                            |
| AssocHelp            |  |                             |                            |

| Module                 | 30   |  |
|------------------------|--|--|
| Section Name           | Cancer Screening   |  |
| Part                   |  |  |
| Question ID            | NAF.111_00.000   |  |
| Variable Name          | BIRTHNUM   |  |
| Universe               | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and SEX='2' and BIRTHEV(e)='1' |  |
| Universe-text          | Female sample adults 18+ who have ever had a live born infant                              |  |
| Question Text          | What is the total number of live births (live born children) you have had?                 |  |
|                        | *Enter '25' for 25 or more.  |  |
| Answer Codes           | Allow 1-25,R,D<br>Refused<br>Don't Know  |  |
| Question Type          | Integer  |  |
| Field Pane Description |  |  |
| Fill Instructions      |  |  |
| Special Instructions   |  |  |
| Skip Instructions      | <1-25,R,D> [goto BIRTHAGE]   |  |
| Hard Edits             |  |  |
| Soft Edits             |  |  |
| AssocHelp              |  |  |

| Module               | 30  |
|----------------------|---|
| Section Name         | Cancer Screening  |
| Part                 |   |
| Question ID          | NAF.120_00.000  |
| Variable Name        | BIRTHAGE  |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and SEX='2' and BIRTHEV(e)='1'  |
| Universe-text        | Female sample adults 18+ who have ever had a live born infant                               |
| Question Text        | How old were you when your [fill1: child/first child] was born?                             |
| Answer Codes         | Allow 6-60,R,D<br>Refused<br>Don't Know   |
| Question Type        | Integer   |
| Field Pane Descript  | ion   |
| Fill Instructions    | [fill 1] if BIRTHNUM = '1' fill 'child' else fill 'first child'                             |
| Special Instructions |   |
| Skip Instructions    | <6-60,R> if BIRTHAGE GT AGE [goto ERR_BIRTHAGE] else [goto PAPHAD1] <d> [goto BIRTHAG2]</d> |
| Hard Edits           | * Entry cannot be greater than age.  * Please correct.                                      |
| Soft Edits           |   |
| AssocHelp            |   |

| Module                 | 30  |  |
|------------------------|---|--|
| Section Name           | Cancer Screening  |  |
| Part                   |   |  |
| Question ID            | NAF.121_00.000  |  |
| Variable Name          | BIRTHAG2  |  |
| Universe               | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and SEX='2' and BIRTHEV(e)='1' and BIRTHAGE(e)='99'                                   |  |
| Universe-text          | Female sample adults 18+ who didn't know their age at first's child's birth   |  |
| Question Text          | What year was your [fill1: child/first child] born?   |  |
| Answer Codes           | Allow 1880-2016,R,D<br>Refused<br>Don't Know  |  |
| Question Type          | Integer   |  |
| Field Pane Description |   |  |
| Fill Instructions      | [fill 1] if BIRTHNUM = '1' fill 'child' else fill 'first child'   |  |
| Special Instructions   |   |  |
| Skip Instructions      | <1880-2016,R,D> if BIRTHAG2 gt current year [goto ERR1_BIRTHAG2] elseif BIRTHAG2 gt year of birth (DOBY) [goto ERR2_BIRTHAG2] else [goto PAPHAD1] |  |
| Hard Edits             | ERR1_BIRTHAG2   |  |
|                        | * Entry must be current year or earlier. * Please correct.  |  |
|                        | ERR2_BIRTHAG2   |  |
|                        | * Entry cannot be earlier than sample adult's year of birth. * Please correct.  |  |
| Soft Edits             |   |  |
| AssocHelp              |   |  |

| Module               | 30   |
|----------------------|--|
| Section Name         | Cancer Screening   |
| Part                 |  |
| Question ID          | NAF.130_00.000   |
| Variable Name        | PAPHAD1  |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999')) and SEX='2'   |
| Universe-text        | Female sample adults 18+   |
| Question Text        | Have you EVER HAD a Pap smear or Pap test?   |
|                      | *Read if necessary.  |
|                      | A Pap smear or Pap test is a routine test for women in which the doctor examines the cervix, takes a cell sample from the cervix with a small stick or brush, and sends it to the lab.                                       |
| Answer Codes         | 1. Yes 2. No Refused Don't Know  |
| Question Type        | Yes/No   |
| Field Pane Descripti | on   |
| Fill Instructions    |  |
| Special Instructions | Display the text "A Pap smear or Pap test is a routine test for women in which the doctor examines the cervix, takes a cell sample from the cervix with a small stick or brush, and sends it to the lab." in BOLD GRAY text. |
| Skip Instructions    | <1> if AGE 18-30 [goto PAPFRST1] else [goto PAP6YR1] <2> if AGE LE 64 [goto HPVHRD]; else [goto PAPNOT2] <r,d> if AGE le 64 [goto HPVHRD]; else [goto HYST]</r,d>  |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module               | 30   |
|----------------------|--|
| Section Name         | Cancer Screening   |
| Part                 |  |
| Question ID          | NAF.135_00.000   |
| Variable Name        | PAPFRST1   |
| Universe             | HHSTAT4='S' and (AGE LE '030' and AGE not IN ('997','999')) and SEX='2' and PAPHAD1(e)='1' |
| Universe-text        | Female sample adults 18-30 who have ever had a Pap test                                    |
| Question Text        | At what age did you have your first Pap test?  |
| Answer Codes         | Allow 6-30,R,D<br>Refused<br>Don't Know  |
| Question Type        | Integer  |
| Field Pane Descripti | on   |
| Fill Instructions    |  |
| Special Instructions |  |
| Skip Instructions    | <6-30,R,D> if PAPFRST1 gt AGE(HHSTAT4='S') [goto ERR_PAPFRST1] else [goto PAP6YR1]         |
| Hard Edits           | ERR_PAPFRST1   |
|                      | * Age at first Pap test cannon be greater than age.  |
|                      | * Please correct.  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module                 | 30   |
|------------------------|--|
| Section Name           | Cancer Screening   |
| Part                   |  |
| Question ID            | NAF.140_00.000   |
| Variable Name          | PAP6YR1  |
| Universe               | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and SEX='2' and PAPHAD1(e)='1' |
| Universe-text          | Female sample adults 18+ who have ever had a Pap test                                      |
| Question Text          | How many Pap tests have you had in the LAST 6 YEARS?                                       |
| Answer Codes           | *Enter '0' for none.  *Enter '95' for 95 or more exams.  Allow 0-95,R,D Refused Don't Know |
| Question Type          | Integer  |
| Field Pane Description | on   |
| Fill Instructions      |  |
| Special Instructions   |  |
| Skip Instructions      | <0-95,R,D> [goto RPAP1_M1]   |
| Hard Edits             |  |
| Soft Edits             |  |
| AssocHelp              |  |

| Module                      | 30   |
|-----------------------------|--|
| Section Name                | Cancer Screening   |
| Part                        |  |
| Question ID                 | NAF.150_01.000   |
| Variable Name               | RPAP1_M1   |
| Universe                    | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and SEX='2' and PAPHAD1(e)='1'   |
| Universe-text               | Female sample adults 18+ who have ever had a Pap test  |
| Question Text               | 1 of 2   |
|                             | When did you have your MOST RECENT Pap test?   |
|                             | *Enter month of last Pap test.   |
|                             | *Enter '96' to go to number and time period format.  |
| Answer Codes  Question Type | 1. January 2. February 3. March 4. April 5. May 6. June 7. July 8. August 9. September 10. October 11. November 12. December 96. Time period format Refused Don't know |
| Field Pane Description      |  |
| Fill Instructions           |  |
| Special Instructions        | if RPAP1_M1 = <r> store 'R' in RPAP1_Y1 if RPAP1_M1 = &lt;96&gt; store '9996' in RPAP1_Y1</r>  |
| Skip Instructions           | <1-12,D> [goto RPAP1_Y1]<br><r> store "R' in RPAP1_Y1 [goto RPAP21]<br/>&lt;96&gt; store "9996" in RPAP1_Y1 [goto RPAP1N1]</r>   |
| Hard Edits                  |  |
| Soft Edits                  |  |
| AssocHelp                   |  |

| Module               | 30   |
|----------------------|--|
| Section Name         | Cancer Screening   |
| Part                 |  |
| Question ID          | NAF.150_02.000   |
| Variable Name        | RPAP1_Y1   |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and SEX='2' and PAPHAD1(e)='1' and ('01' <= RPAP1_M1 <= '12' or RPAP1_M1='99')   |
| Universe-text        | Female sample adults age 18+ who answered month of last Pap test test or didn't know month of last Pap test test   |
| Question Text        | 2 of 2   |
|                      | *Enter year of last Pap test.  |
| Answer Codes         |  |
| Question Type        | Integer  |
| Field Pane Descripti | don  |
| Fill Instructions    |  |
| Special Instructions | Allow 4 character numeric field – must enter 4 numbers   |
| Skip Instructions    | <pre><valid year=""> if RPAP1_Y1 gt current year or (RPAP1_Y1=current year and RPAP1_M1 gt current month)   [goto ERR1_ RPAP1_Y1 (future date)] elseif RPAP1_Y1 It DOBY or (RPAP1_Y1=DOBY and RPAP1_M1 It DOBM)   [goto ERR2_ RPAP1_Y1 (prior to birth date)] elseif RPAP1_M1=D   [goto RPAP21] elseif RPAP1_M1=1-12 and AGE LT 65 [goto HPVHRD]; else [goto PAPREA2] </valid></pre> <r,d> [goto RPAP21]</r,d> |
| Hard Edits           | ERR1_RPAP1_Y1  |
|                      | * Future date invalid. Please correct.   |
|                      | ERR2_ RPAP1_Y1   |
|                      | * Date before birth. Please correct.   |
| Soft Edits           |  |
| AssocHelp            |  |

| Module               | 30  |
|----------------------|---|
| Section Name         | Cancer Screening  |
| Part                 |   |
| Question ID          | NAF.160_01.000  |
| Variable Name        | RPAP1N1   |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and SEX='2' and PAPHAD1(e)='1' and RPAP1_M1(e)='96'                 |
| Universe-text        | Female sample adults 18+ who selected number and time period format for most recent Pap test test from the initial month screen |
| Question Text        | 1 of 2  |
|                      | When did you have your MOST RECENT Pap test?  |
|                      | *Enter number for time since last Pap test.   |
|                      | *Enter '95' for 95 or more.   |
| Answer Codes         | Allow 1-95,R,D<br>Refused<br>Don't Know   |
| Question Type        | Integer   |
| Field Pane Descripti |   |
| Fill Instructions    |   |
| Special Instructions | if RPAP1N1 = <r> store 'R' in RPAP1T1<br/>if RPAP1N1 = <d> store 'D' in RPAP1T1</d></r>   |
| Skip Instructions    | <1-95> [goto RPAP1T1]<br><r,d> store "R,D" in RPAP1T1 [goto RPAP21]</r,d>   |
| Hard Edits           |   |
| Soft Edits           |   |
| AssocHelp            |   |

| Module               | 30   |
|----------------------|--|
| Section Name         | Cancer Screening   |
| Part                 |  |
| Question ID          | NAF.160_02.000   |
| Variable Name        | RPAP1T1  |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and SEX='2' and PAPHAD1(e)='1' and RPAP1_M1(e)='96' and ('01' <= RPAP1N1 <= '95')  |
| Universe-text        | Female sample adults 18+ who answered 1-95 for number part of this 2 part question   |
| Question Text        | 2 of 2   |
|                      | *Enter time period for time since most recent Pap test.  |
| Answer Codes         | 1. Day(s) ago 2. Week(s) ago 3. Month(s) ago 4. Year(s) ago Refused Don't know   |
| Question Type        | Pick One - answer list pane  |
| Field Pane Descripti | ion  |
| Fill Instructions    |  |
| Special Instructions | If RPAP1N1 gt 5 and RPAP1T1=4, store '5' in RPAP21.  |
|                      | If RPAP1N1=4 and RPAP1T1=4, store '4' in RPAP21.   |
| Skip Instructions    | <1-3> if AGE LT 65 [goto HPVHRD];<br>else [goto PAPREA2] <4> if RPAP1N1=4, set RPAP21=4<br>if AGE LT 65 [goto HPVHRD];<br>else [goto PAPREA2]<br>elseif RPAP1N1 gt 5 and RPAP1N1 gt AGE, [goto ERR_RPAP1T1 (greater than persons age)]<br>elseif RPAP1N1 gt 5 and RPAP1N1 le AGE, set RPAP21=5<br>if AGE LT 65 [goto HPVHRD]; else [goto PAPREA2]<br>elseif RPAP1N1=1,2,3,5, [goto RPAP21] <r,d> [goto RPAP21]</r,d> |
| Hard Edits           | ERR_RPAP1T1  |
|                      | * Time since last exam cannot be greater than age. * Please correct.   |
| Soft Edits           |  |
| AssocHelp            |  |

30 **Module Cancer Screening** Section Name Part **Question ID** NAF.165 00.000 Variable Name RPAP21 HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and SEX='2' and Universe PAPHAD1(e)='1' and (RPAP1\_M1(e) IN ('97','98','99') or RPAP1\_Y1(e) IN ('9997','9998','9999') or RPAP1N1(e) IN ('97','98','99') or RPAP1T1(e) IN ('7','8','9') or (RPAP1T1(e) = '4' and RPAP1N1 IN ('1','2','3','5')))Female sample adults 18+ who failed to give a complete date in either the month or Universe-text year format or failed to give a complete date in the number and time period format, or entered years ago in the time period format (excluding those whose last Pap test test was over 5 years ago) Was it: **Ouestion Text** \*Read answer categories. **Answer Codes** 1. A year ago or less 2. More than 1 year but not more than 2 years 3. More than 2 years but not more than 3 years 4. More than 3 years but not more than 5 years 5. Over 5 years ago Refused Don't know **Question** Type Pick One - answer list pane Field Pane Description Fill Instructions Display answer categories 1-5 in BOLD BLACK text. **Special Instructions** If RPAP1N1 gt 5 and RPAP1T1=4, store '5' in RPAP21 and don't ask question. If RPAP1N1=4 and RPAP1T1=4, store '4' in RPAP21 and don't ask question. Based upon prior answers: if RPAP1N1 = 1 and RPAP1T1 = '4', gray out answer codes 3,4,5 if RPAP1N1 = 2 and RPAP1T1 = '4', gray out answer codes 1,4,5 if RPAP1N1 = 3 and RPAP1T1 = '4', gray out answer codes 1,2,5 if RPAP1N1 = 5 and RPAP1T1 = '4', gray out answer codes 1,2,3 <1-5,R,D> if answer code is grayed out [goto ERR\_RPAP21] Skip Instructions else if AGE LT 65 [goto HPVHRD]; else [goto PAPREA2] ERR RPAP21 Hard Edits \*That is not a valid response. \*Please correct.

Soft Edits

| AssocHelp              |  |
|------------------------|--|
| Module                 | 30   |
| Section Name           | Cancer Screening   |
| Part                   |  |
| Question ID            | NAF.167_00.000   |
| Variable Name          | HPVHRD   |
| Universe               | HHSTAT4 = 'S' and (AGE LE '064' and AGE not IN ('997','999'))  |
| Universe-text          | Sample adults LE 64  |
| Question Text          | Have you ever heard of HPV? HPV stands for human papillomavirus (pap-uh-LOW-muh-vi-rus).   |
| Answer Codes           | 1. Yes 2. No Refused Don't Know  |
| Question Type          | Yes/No   |
| Field Pane Description | on   |
| Fill Instructions      |  |
| Special Instructions   |  |
| Skip Instructions      | <1,2,R,D> If SEX=1 and AGE GE 40 [goto CHESTX];<br>else if SEX=1 and AGE LT 40 [goto ASPIRIN];<br>else if SEX=2 and PAPHAD1=2 [goto PAPNOT2]; else [goto HPVPAP] |
| Hard Edits             |  |
| Soft Edits             |  |
| AssocHelp              |  |

| Module                 | 30  |
|------------------------|---|
| Section Name           | Cancer Screening  |
| Part                   |   |
| Question ID            | NAF.168_00.000  |
| Variable Name          | HPVPAP  |
| Universe               | HHSTAT4 = 'S' and (AGE LE '064' and AGE not IN ('997','999')) and PAPHAD1(e)='1'  |
| Universe-text          | Female sample adult who have ever had a Pap test  |
| Question Text          | An HPV test is sometimes given with the Pap test for cervical cancer screening. Did you have an HPV test with your most recent Pap? |
| Answer Codes           | 1. Yes<br>2. No<br>Refused<br>Don't Know  |
| Question Type          | Yes/No  |
| Field Pane Description | on  |
| Fill Instructions      |   |
| Special Instructions   |   |
| Skip Instructions      | <1,2,R,D> [goto PAPREA2]  |
| Hard Edits             |   |
| Soft Edits             |   |
| AssocHelp              |   |

| Module               | 30   |
|----------------------|--|
| Section Name         | Cancer Screening   |
| Part                 |  |
| Question ID          | NAF.170_00.000   |
| Variable Name        | PAPREA2  |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and SEX='2' and (PAPHAD1(e)='1') or (HPVPAP(e)='1')  |
| Universe-text        | Female sample adults 18+ who have ever had a Pap or HPV test   |
| Question Text        | What was the MAIN reason you had this [fill1: Pap/Pap or HPV] test - was it part of a routine exam, because of a problem, or some other reason?  |
| Answer Codes         | 1. Part of a routine exam 2. Because of a problem 3. Other reason Refused Don't know   |
| Question Type        | Pick One - answer list pane  |
| Field Pane Descripti | ion  |
| Fill Instructions    | Fill1: if HPVPAP=1 fill "Pap or HPV"; else fill "Pap"  |
| Special Instructions |  |
| Skip Instructions    | <1-3,R,D> if (RPAP21 = 1,2,3) or (RPAP1T1 = 1,2) or (RPAP1_Y1 = (current year – 3) and RPAP1_M1 ge current month) or (RPAP1_Y1 gt (current year – 3)) or (RPAP1T1 = 3 and RPAP1N1 le 36) [goto PAPABN3] elseif (RPAP21 = 5) or (RPAP1_Y1 = (current year – 5) and RPAP1_M1 lt current month) or (RPAP1_Y1 lt (current year – 5)) or (RPAP1T1 = 3 and RPAP1N1 gt 60) [goto PAPNOT2] |
|                      | elseif RPAP21 = R,D [goto MDRECP1]   |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module                 | 30  |  |
|------------------------|---|--|
| Section Name           | Cancer Screening  |  |
| Part                   |   |  |
| Question ID            | NAF.180_00.000  |  |
| Variable Name          | PAPABN3   |  |
| Universe               | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and SEX='2' and PAPHAD1(e)='1' and ((RPAP21 IN ('1','2','3') or (RPAP1T1 IN ('1','2') or (RPAP1_Y1 = (current year - 3) and RPAP1_M1 ge current month) or (RPAP1_Y1 gt (current year - 3) and RPAP1_Y1 not IN ('9996','9997','9999')) or (RPAP1T1 = '3' and RPAP1N1 Ie '36') or (RPAP1T1 = '4' and RPAP1N1 IN ('1','2','3') and RPAP21 IN ('7','9'))) |  |
| Universe-text          | Female sample adults 18+ who have had a Pap test in the past 3 years  |  |
| Question Text          | Have you had a [fill1: Pap/Pap or HPV] test in the LAST 3 YEARS where the results were NOT normal?  |  |
| Answer Codes           | 1. Yes 2. No Refused Don't Know   |  |
| Question Type          | Yes/No  |  |
| Field Pane Description |   |  |
| Fill Instructions      | Fill1: if HPVPAP=1 fill "Pap or HPV"; else fill "Pap"   |  |
| Special Instructions   |   |  |
| Skip Instructions      | <1,2,R,D> [goto MDRECP1]  |  |
| Hard Edits             |   |  |
| Soft Edits             |   |  |
| AssocHelp              |   |  |

| Module                 | 30  |  |
|------------------------|---|--|
| Section Name           | Cancer Screening  |  |
| Part                   |   |  |
| Question ID            | NAF.210_00.000  |  |
| Variable Name          | PAPNOT2   |  |
| Universe               | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and SEX='2' and ((PAPHAD1 = '2') or (RPAP21 IN ('5')) or (RPAP1_Y1 = (current year - 5) and RPAP1_M1 It current month) or (RPAP1_Y1 It (current year - 5)) or (RPAP1T1 = '3' and RPAP1N1 gt '60') or (RPAP1T1 = '4' and RPAP1N1 gt '5' and RPAP21 IN ('7','9')))  |  |
| Universe-text          | Female sample adults 18+ who have never had a Pap test, or who have not had a Pap test in the last 5 years  |  |
| Question Text          | What is the most important reason you have [Fill1: NEVER had a Pap test/NEVER had a Pap or HPV test/ NOT had a Pap test in the LAST 5 YEARS/ NOT had a Pap or HPV test in the LAST 5 YEARS]?  *Put response into correct category below.  |  |
| Answer Codes           | <ol> <li>No reason/never thought about it</li> <li>Didn't need it/didn't know I needed this type of test</li> <li>Doctor didn't order it/didn't say I needed it</li> <li>Haven't had any problems</li> <li>Put it off/didn't get around to it</li> <li>Too expensive/no insurance/cost</li> <li>Too painful, unpleasant, or embarrassing</li> <li>Had hysterectomy</li> <li>Don't have doctor</li> <li>Had HPV vaccine</li> <li>Other</li> <li>Refused</li> <li>Don't know</li> </ol> |  |
| Question Type          | Pick One - answer list pane   |  |
| Field Pane Description |   |  |
| Fill Instructions      | [fill 1] if PAPHAD1 = '2' and HPVPAP ne 1, fill 'NEVER had a Pap test'; else if PAPHAD1=1 and HPVPAP=1 fill "NEVER had a Pap or HPV test"; else fill "NOT had a Pap test in the LAST 5 YEARS" if HPVPAP is ne '1'; else fill "NOT had a Pap or HPV test in the LAST 5 YEARS"  |  |
| Special Instructions   | if PAPNOT2 = <8> store '1' in HYST and do not ask HYST question   |  |
| Skip Instructions      | <1,2,4-7,10-11,R,D> [goto MDRECP1]<br><3,8,9> [goto PAPHPVPY]   |  |
| Hard Edits             |   |  |
| Soft Edits             |   |  |

**AssocHelp** 

| Module               | 30  |
|----------------------|---|
| Section Name         | Cancer Screening  |
| Part                 |   |
| Question ID          | NAF.215_00.000  |
| Variable Name        | MDRECP1   |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and SEX='2' and PAPNOT2(e) not IN ('03','08','09') and PAPHAD1(e) not IN ('7','9')  |
| Universe-text        | Female sample adults 18+ who had a doctor, who didn't answer that her doctor didn't recommend a Pap test, who haven't had a hysterectomy, and gave a reason for not having Pap test ever/in the last 5 years  |
| Question Text        | [fill1: Was your most recent Pap test recommended by a doctor or other health professional?/Was your most recent Pap or HPV test recommended by a doctor or other health professional?"   |
|                      | [fill2: In the PAST 12 MONTHS, has a doctor or other health professional RECOMMENDED that you have a PAP test?/In the PAST 12 MONTHS, has a doctor or other health professional RECOMMENDED that you have a PAP or HPV test?]   |
| Answer Codes         | 1. Yes 2. No 3. Did not see a doctor in the last 12 months Refused Don't Know   |
| Question Type        | Yes/No  |
| Field Pane Descripti | on  |
| Fill Instructions    | Fill1: if PAPHAD1 = '1' and ((RPAP21 = 5) or (RPAP1T1 = 1,2) or (RPAP1_Y1 = (current year – 5) and RPAP1_M1 ge current month) or (RPAP1_Y1 gt (current year – 5)) or (RPAP1T1 = 3 and RPAP1N1 le 60)) and HPVPAP ne '1' fill: "Was your most recent Pap test recommended by a doctor or other health professional?"; else if HPVPAP = '1' fill "Was your most recent Pap or HPV test recommended by a doctor or other health professional?" |
|                      | Fill2: if PAPHAD1=2, or PAPHAD1=1 and GT 5 years from system date or RPAP21=R,D and HPVPAP ne '1' fill "In the PAST 12 MONTHS, has a doctor or other health professional RECOMMENDED that you have a PAP test?"; else if HPVPAP='1' fill " In the PAST 12 MONTHS, has a doctor or other health professional RECOMMENDED that you have a PAP or HPV test?"   |
| Special Instructions |   |
| Skip Instructions    | <1,2,3,R,D> [goto PAPHPVPY]   |
| Hard Edits           |   |
| Soft Edits           |   |

**AssocHelp** 

| Module               | 30  |
|----------------------|---|
| Section Name         | Cancer Screening  |
| Part                 |   |
| Question ID          | NAF.217_00.000  |
| Variable Name        | PAPHPVPY  |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and SEX='2' and (PAPHAD(e)='1') or (HPVPAP(e)='1')  |
| Universe-text        | Female sample adults 18+ who have ever had a Pap or HPV test  |
| Question Text        | How much did you pay out of pocket for this [fill1: Pap/Pap or HPV] test-Was it NONE, PART, or ALL of the cost? |
| Answer Codes         | 1. None of the cost 2. Part of the cost 3. All of the cost Refused Don't know                                   |
| Question Type        | Pick One - answer list pane   |
| Field Pane Descripti | on  |
| Fill Instructions    | Fill1: if HPVPAP=1 fill "Pap or HPV"; else fill "Pap"   |
| Special Instructions |   |
| Skip Instructions    | <1-3,R,D> if PAPNOT2=8 [goto RHYS1_MT];<br>else [goto HYST]   |
| Hard Edits           |   |
| Soft Edits           |   |
| AssocHelp            |   |

| Module                 | 30   |  |
|------------------------|--|--|
| Section Name           | Cancer Screening   |  |
| Part                   |  |  |
| Question ID            | NAF.220_00.000   |  |
| Variable Name          | HYST   |  |
| Universe               | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and SEX='2' and PAPNOT2(e) ne '08' |  |
| Universe-text          | Female sample adults 18+ who have not already indicated they have had a hysterectomy           |  |
| Question Text          | Have you had a hysterectomy?   |  |
| Answer Codes           | 1. Yes<br>2. No<br>Refused<br>Don't Know   |  |
| Question Type          | Yes/No   |  |
| Field Pane Description |  |  |
| Fill Instructions      |  |  |
| Special Instructions   |  |  |
| Skip Instructions      | <1> [goto RHYS1_MT]<br><2,R,D> [goto OVARIES]  |  |
| Hard Edits             |  |  |
| Soft Edits             |  |  |
| AssocHelp              |  |  |

| Module                      | 30   |  |
|-----------------------------|--|--|
| Section Name                | Cancer Screening   |  |
| Part                        |  |  |
| Question ID                 | NAF.221_01.000   |  |
| Variable Name               | RHYS1_MT   |  |
| Universe                    | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and SEX='2' and HYST(e)='1'  |  |
| Universe-text               | Female sample adults 18+ who have ever had a hysterectomy  |  |
| Question Text               | 1 of 2   |  |
|                             | When was your hysterectomy?  |  |
|                             | *Enter month of hysterectomy.  |  |
|                             | *Enter '96' to go to number and time period format.  |  |
| Answer Codes  Question Type | 1. January 2. February 3. March 4. April 5. May 6. June 7. July 8. August 9. September 10. October 11. November 12. December 96. Time period format Refused Don't know |  |
| Field Pane Description      |  |  |
| Fill Instructions           |  |  |
| Special Instructions        | if RHYS1_MT = <r> store 'R' in RHYS1_YR If RHYS1_MT = &lt;96&gt; store '9996' in RHYS1_YR</r>  |  |
| Skip Instructions           | <1-12,D> [goto RHYS1_YR]<br><r> store "R' in RHYS1_YR [goto RHYS2]<br/>&lt;96&gt; store "9996" in RHYS1_YR [goto RHYS1N]</r>   |  |
| Hard Edits                  |  |  |
| Soft Edits                  |  |  |
| AssocHelp                   |  |  |

| Module               | 30  |  |  |
|----------------------|---|--|--|
| Section Name         | Cancer Screening  |  |  |
| Part                 |   |  |  |
| Question ID          | NAF.221_02.000  |  |  |
| Variable Name        | RHYS1_YR  |  |  |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and SEX='2' and HYST(e)='1' and ('01' <= RHYS1_MT <= '12' or RHYS1_MT='99')   |  |  |
| Universe-text        | Female sample adults age 18+ who answered month of hysterectomy or didn't know month of hysterectomy  |  |  |
| Question Text        | 2 of 2  |  |  |
|                      | *Enter year of hysterectomy.  |  |  |
| Answer Codes         |   |  |  |
| Question Type        | Integer   |  |  |
| Field Pane Descript  | ion [   |  |  |
| Fill Instructions    |   |  |  |
| Special Instructions | Allow 4 character numeric field – must enter 4 numbers  |  |  |
| Skip Instructions    | <pre><valid year=""> if RHYS1_YR gt current year or (RHYS1_YR=current year and RHYS1_MT gt current month)   goto ERR1_ RHYS1_YR (future date) elseif RHYS1_YR It DOBY or (RHYS1_YR=DOBY and RHYS1_MT It DOBM)   goto ERR2_ RHYS1_YR (prior to birth date) elseif RHYS1_MT=D   goto RHYS2 elseif RHYS1_MT=1-12   goto OVARIES <r,d> goto RHYS2</r,d></valid></pre> |  |  |
| Hard Edits           | ERR1_RHYS1_YR   |  |  |
|                      | * Future date invalid. Please correct.  |  |  |
|                      | ERR2_RHYS1_YR   |  |  |
|                      | * Date before birth. Please correct   |  |  |
| Soft Edits           |   |  |  |
| AssocHelp            |   |  |  |

| Module               | 30   | _ |  |
|----------------------|--|---|--|
| Section Name         | Cancer Screening   |   |  |
| Part                 |  |   |  |
| Question ID          | NAF.222_01.000   |   |  |
| Variable Name        | RHYS1N   |   |  |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and SEX='2' and HYST(e)='1' and RHYS1_MT(e)='96'       |   |  |
| Universe-text        | Female sample adults 18+ who selected number and time period format for hysterectomy from the initial month screen |   |  |
| Question Text        | 1 of 2   |   |  |
|                      | When was your hysterectomy?  |   |  |
|                      | *Enter number for time since hysterectomy.   |   |  |
|                      | *Enter '95' for 95 or more.  |   |  |
| Answer Codes         | Allow 1-95,R,D<br>Refused<br>Don't Know  |   |  |
| Question Type        | Integer  |   |  |
| Field Pane Descripti | on   |   |  |
| Fill Instructions    |  |   |  |
| Special Instructions | if RHYS1N = <r> store 'R' in RHYS1T<br/>if RHYS1N = <d> store 'D' in RHYS1</d></r>                                 |   |  |
| Skip Instructions    | <1-95> [goto RHYS1T]<br><r,d> store "R,D" in RHYS1T [goto RHYS2]</r,d>   |   |  |
| Hard Edits           |  |   |  |
| Soft Edits           |  |   |  |
| AssocHelp            |  |   |  |

| Module                 | 30  |  |  |
|------------------------|---|--|--|
| Section Name           | Cancer Screening  |  |  |
| Part                   |   |  |  |
| Question ID            | NAF.222_02.000  |  |  |
| Variable Name          | RHYS1T  |  |  |
| Universe               | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and SEX='2' and HYST='1' and RHYS1_MT(e)='96' and ('01' <= RHYS1N <= '95')  |  |  |
| Universe-text          | Female sample adults 18+ who answered 1-95 for number part of this 2 part question  |  |  |
| Question Text          | 2 of 2  |  |  |
|                        | *Enter time period for time since hysterectomy.   |  |  |
| Answer Codes           | 1. Days ago 2. Weeks ago 3. Months ago 4. Years ago Refused Don't know  |  |  |
| Question Type          | Pick One - answer list pane   |  |  |
| Field Pane Description |   |  |  |
| Fill Instructions      |   |  |  |
| Special Instructions   | If RHYS1N gt 5 and RHYS1T=4, store '5' in RHYS2 and don't ask question.   |  |  |
|                        | If RHYS1N=4 and RHYS1T=4, store '4' in RHYS2 and don't ask question   |  |  |
| Skip Instructions      | <1-3> [goto OVARIES] <4> if RHYS1N=4     set RHYS2=4     [goto OVARIES]     elseif RHYS1N gt 5 and RHYS1N gt AGE     [goto ERR_RHYS1T (greater than persons age)]     elseif RHYS1N gt 5 and RHYS1N le AGE     set RHYS2=5     [goto OVARIES]     elseif RHYS1N=1,2,3,5     [goto RHYS2] <r,d> [goto RHYS2]</r,d> |  |  |
| Hard Edits             | ERR_RHYS1T  |  |  |
|                        | * Time since last exam cannot be greater than age.  * Please correct  |  |  |
| Soft Edits             |   |  |  |
| AssocHelp              |   |  |  |

| Module               | 30   |  |  |
|----------------------|--|--|--|
| Section Name         | Cancer Screening   |  |  |
| Part                 |  |  |  |
| Question ID          | NAF.225_00.000   |  |  |
| Variable Name        | RHYS2  |  |  |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and SEX='2' and HYST(e)='1' and (RHYS1_MT(e) IN ('97','98','99') or RHYS1_YR(e) IN ('9997','9998','9999') or RHYS1N(e) IN ('97','98','99') or RHYS1T(e) IN ('7','8','9') or (RHYS1T(e) = '4' and RHYS1N IN ('1','2','3','5'))) |  |  |
| Universe-text        | Female sample adults 18+ who failed to give a complete date in either the month or year format or failed to give a complete date in the number and time period format, or entered years ago in the time period format (excluding those whose hysterectomy was over 5 years ago)            |  |  |
| Question Text        | Was it:  |  |  |
|                      | *Read answer categories.   |  |  |
| Answer Codes         | 1. A year ago or less 2. More than 1 year but not more than 2 years 3. More than 2 years but not more than 3 years 4. More than 3 years but not more than 5 years 5. Over 5 years ago Refused Don't know   |  |  |
| Question Type        | Pick One - answer list pane  |  |  |
| Field Pane Descripti | on [   |  |  |
| Fill Instructions    |  |  |  |
| Special Instructions | Display answer categories 1-5 in BOLD BLACK text.  |  |  |
|                      | If RHYS1N gt 5 and RHYS1T=4, store '5' in RHYS2 and don't ask question.  |  |  |
|                      | If RHYS1N=4 and RHYS1T=4, store '4' in RHYS2 and don't ask question.   |  |  |
|                      | Based upon prior answers: if RHYS1N = 1 and RHYS1T = '4', gray out answer codes 3,4,5 if RHYS1N = 2 and RHYS1T = '4', gray out answer codes 1,4,5 if RHYS1N = 3 and RHYS1T = '4', gray out answer codes 1,2,5 if RHYS1N = 5 and RHYS1T = '4', gray out answer codes 1,2,3                  |  |  |
| Skip Instructions    | <1-5,R,D> if answer code is grayed out [goto ERR_RHYS2] else [goto OVARIES]  |  |  |
| Hard Edits           | ERR_RHYS2  |  |  |
|                      | *That is not a valid response. *Please correct.  |  |  |
| Soft Edits           |  |  |  |
| AssocHelp            |  |  |  |

| Module                 | 30   |  |  |
|------------------------|--|--|--|
| Section Name           | Cancer Screening   |  |  |
| Part                   |  |  |  |
| Question ID            | NAF.226_00.000   |  |  |
| Variable Name          | OVARIES  |  |  |
| Universe               | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and SEX='2'  |  |  |
| Universe-text          | Female sample adults age 18+   |  |  |
| Question Text          | Have you EVER had BOTH ovaries removed, either as part of a hysterectomy or as one or more separate surgeries? |  |  |
| Answer Codes           | 1. Yes<br>2. No<br>Refused<br>Don't Know   |  |  |
| Question Type          | Yes/No   |  |  |
| Field Pane Description |  |  |  |
| Fill Instructions      |  |  |  |
| Special Instructions   |  |  |  |
| Skip Instructions      | <1> [goto OVARAGE]<br><2,R,D> if age GE 30 [goto CBEHAD];<br>else [goto ASPIRIN]                               |  |  |
| Hard Edits             |  |  |  |
| Soft Edits             |  |  |  |
| AssocHelp              |  |  |  |

| Module               | 30   |  |
|----------------------|--|--|
| Section Name         | Cancer Screening   |  |
| Part                 |  |  |
| Question ID          | NAF.227_00.000   |  |
| Variable Name        | OVARAGE  |  |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and SEX='2' and OVARIES='1'                                |  |
| Universe-text        | Female sample adults age 18+ who have had BOTH ovaries removed   |  |
| Question Text        | How old were you when you had BOTH of your ovaries removed?  |  |
| Answer Codes         | Allow 1-120,R,D<br>Refused<br>Don't Know   |  |
| Question Type        | Integer  |  |
| Field Pane Descripti | on   |  |
| Fill Instructions    |  |  |
| Special Instructions |  |  |
| Skip Instructions    | <1-120,R,D> if OVARAGE GT AGE [goto ERR_OVARAGE]<br>elseif age GE 30 [goto CBEHAD];<br>elseIF age lt 30 [goto ASPIRIN] |  |
| Hard Edits           | ERR_OVARAGE  |  |
|                      | * Entry is greater than sample adult's age.  |  |
|                      | * Please correct.  |  |
| Soft Edits           |  |  |
| AssocHelp            |  |  |

| Module   | 30  |  |
|--|---|--|
| Section Name   | Cancer Screening  |  |
| Part   |   |  |
| Question ID  | NAF.228_00.000  |  |
| Variable Name  | CBEHAD  |  |
| Universe   | HHSTAT4='S' and (AGE GE '030' and AGE not IN ('997', '999')) and SEX='2'  |  |
| Universe-text  | Female sample adults 30+  |  |
| Question Text  | Have you EVER HAD a breast exam done by a doctor or other health professional to check for lumps or other signs of breast cancer? |  |
| *Read if necessary. A breast exam is when the breasts are felt by a doct health professional to check for lumps or other signs of breast cancer. |   |  |
| Answer Codes   | 1. Yes 2. No Refused Don't Know   |  |
| Question Type  | Yes/No  |  |
| Field Pane Descripti   | on  |  |
| Fill Instructions  |   |  |
| Special Instructions   |   |  |
| Skip Instructions  | <1> [goto RCBE1_MT]<br><2,R,D> [goto MAMHAD]  |  |
| Hard Edits   |   |  |
| Soft Edits   |   |  |
| AssocHelp  |   |  |

| Module                 | 30   |  |  |
|------------------------|--|--|--|
| Section Name           | Cancer Screening   |  |  |
| Part                   |  |  |  |
| Question ID            | NAF.229_01.000   |  |  |
| Variable Name          | RCBE1_MT   |  |  |
| Universe               | HHSTAT4='S' and (AGE GE '030' and AGE not IN ('997', '999')) and SEX='2' and CBEHAD(e)='1'   |  |  |
| Universe-text          | Female sample adults 30+ who have ever had a breast exam   |  |  |
| Question Text          | 1 of 2   |  |  |
|                        | When did you have your MOST RECENT breast exam?  |  |  |
|                        | *Enter month of last breast exam.  |  |  |
|                        | *Enter '96' to go to number and time period format.  |  |  |
| Answer Codes           | 1. January 2. February 3. March 4. April 5. May 6. June 7. July 8. August 9. September 10. October 11. November 12. December 96. Time period format Refused Don't know |  |  |
| Question Type          | Pick One - answer list pane  |  |  |
| Field Pane Description | on   |  |  |
| Fill Instructions      |  |  |  |
| Special Instructions   | if RCBE1_MT = <r> store 'R' in RCBE1_YR If RCBE1_MT = &lt;96&gt; store '9996' in RCBE1_YR</r>  |  |  |
| Skip Instructions      | <1-12,D> [goto RCBE1_YR] <r> store "R' in RCBE1_YR [goto RCBE2] &lt;96&gt; store "9996" in RCBE1_YR [goto RCBE1N]</r>  |  |  |
| Hard Edits             |  |  |  |
| Soft Edits             |  |  |  |
| AssocHelp              |  |  |  |

| Module               | 30   |  |
|----------------------|--|--|
| Section Name         | Cancer Screening   |  |
| Part                 |  |  |
| Question ID          | NAF.229_02.000   |  |
| Variable Name        | RCBE1_YR   |  |
| Universe             | HHSTAT4='S' and (AGE GE '030' and AGE not IN ('997','999')) and SEX='2' and CBEHAD(e)='1' and ('01' <= RCBE1_MT <= '12' or RCBE1_MT='99')  |  |
| Universe-text        | Female sample adults age 30+ who answered month of breast exam didn't know month of breast exam  |  |
| Question Text        | 2 of 2   |  |
|                      | *Enter year of most recent breast exam.  |  |
| Answer Codes         |  |  |
| Question Type        | Integer  |  |
| Field Pane Descripti | ion  |  |
| Fill Instructions    |  |  |
| Special Instructions | Allow 4 character numeric field – must enter 4 numbers   |  |
| Skip Instructions    | <pre><valid year=""> if RCBE1_YR gt current year or (RCBE1_YR=current year and RCBE1_MT gt current month)   goto ERR1_ RCBE1_YR (future date) elseif RCBE1_YR lt DOBY or (RCBE1_YR=DOBY and RCBE1_MT lt DOBM)   goto ERR2_ RCBE1_YR (prior to birth date) elseif RCBE1_MT=D   goto RCBE2 elseif RCBE1_MT=1-12   [goto MAMHAD] <r,d> [goto RCBE2]</r,d></valid></pre> |  |
| Hard Edits           |  |  |
| Soft Edits           |  |  |
| AssocHelp            |  |  |

| Module               | 30  |   |  |
|----------------------|---|---|--|
| Section Name         | Cancer Screening  |   |  |
| Part                 |   |   |  |
| Question ID          | NAF.229_03.000  |   |  |
| Variable Name        | RCBE1N  |   |  |
| Universe             | HHSTAT4='S' and (AGE GE '03<br>CBEHAD(e)='1' and RCBE1_M  | 0' and AGE not IN ('997','999')) and SEX='2' and<br>Γ(e)='96' |  |
| Universe-text        | Female sample adults 30+ who selected number and time period format for breast exam from the initial month screen |   |  |
| Question Text        | 1 of 2  |   |  |
|                      | When did you have your MOST   | When did you have your MOST RECENT breast exam?               |  |
|                      | *Enter number for time since last breast exam.  *Enter '95' for 95 or more.  Allow 1-95,R,D Refused Don't Know    |   |  |
|                      |   |   |  |
| Answer Codes         |   |   |  |
| Question Type        | Integer   |   |  |
| Field Pane Descripti |   |   |  |
| Fill Instructions    |   |   |  |
| Special Instructions | if RCBE1N = <r> store 'R' in RCBE1T<br/>if RCBE1N = <d> store 'D' in RCBE1</d></r>                                |   |  |
| Skip Instructions    | <1-95> [goto RCBE1T]<br><r,d> store "R,D" in RCBE1T [goto RCBE2]</r,d>  |   |  |
| Hard Edits           |   |   |  |
| Soft Edits           |   |   |  |
| AssocHelp            |   |   |  |

| Module               | 30   |
|----------------------|--|
| Section Name         | Cancer Screening   |
| Part                 |  |
| Question ID          | NAF.229_04.000   |
| Variable Name        | RCBE1T   |
| Universe             | HHSTAT4='S' and (AGE GE '030' and AGE not IN ('997','999')) and SEX='2' and CBEHAD(e)='1' and RCBE1_MT(e)='96' and ('01' <= RCBE1N <= '95')  |
| Universe-text        | Female sample adults 30+ who answered 1-95 for number part of this 2 part question   |
| Question Text        | 2 of 2   |
|                      | *Enter time period for time since most recent breast exam.   |
| Answer Codes         | 1. Day(s) ago 2. Week(s) ago 3. Month(s) ago 4. Year(s) ago Refused Don't know   |
| Question Type        | Pick One - answer list pane  |
| Field Pane Descripti | on   |
| Fill Instructions    |  |
| Special Instructions | If RCBE1N gt 5 and RCBE1T=4, store '5' in RCBE2 and don't ask question.  |
|                      | If RCBE1N=4 and RCBE1T=4, store '4' in RCBE2 and don't ask question  |
| Skip Instructions    | <1-3> [goto MAMHAD] <4> if RCBE1N=4     set RCBE2=4     [goto MAMHAD]     elseif RCBE1N gt 5 and RCBE1N gt AGE     [goto ERR_RCBE1T (greater than persons age)]     elseif RCBE1N gt 5 and RCBE1N le AGE     set RCBE2=5     [goto MAMHAD]     elseif RCBE1N=1,2,3,5     [goto RCBE2] <r,d> goto RCBE2</r,d> |
| Hard Edits           | ERR_RCBE1T  * Time since last exam cannot be greater than age.  * Please correct.  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module               | 30   |
|----------------------|--|
| Section Name         | Cancer Screening   |
| Part                 |  |
| Question ID          | NAF.229_05.000   |
| Variable Name        | RCBE2  |
| Universe             | HHSTAT4='S' and (AGE GE '030' and AGE not IN ('997','999')) and SEX='2' and CBEHAD(e)='1' and (RCBE1_MT(e) IN ('97','98','99') or RCBE1_YR(e) IN ('9997','9998','9999') or RCBE1N(e) IN ('97','98','99') or RCBE1T(e) IN ('7','8','9') or (RCBE1T(e) = '4' and RCBE1N IN ('1','2','3','5'))) |
| Universe-text        | Female sample adults 30+ who failed to give a complete date in either the month or year format or failed to give a complete date in the number and time period format, or entered years ago in the time period format (excluding those whose breast exam was over 5 years ago)               |
| Question Text        | Was it:  |
|                      | *Read answer categories.   |
| Answer Codes         | <ol> <li>A year ago or less</li> <li>More than 1 year but not more than 2 years</li> <li>More than 2 years but not more than 3 years</li> <li>More than 3 years but not more than 5 years</li> <li>Over 5 years ago</li> <li>Refused</li> <li>Don't know</li> </ol>                          |
| Question Type        | Pick One - answer list pane  |
| Field Pane Descripti |  |
| Fill Instructions    |  |
| Special Instructions | Display answer categories 1-5 in BOLD BLACK text.  |
|                      | If RCBE1N gt 5 and RCBE1T=4, store '5' in RCBE2 and don't ask question.  |
|                      | If RCBE1N=4 and RCBE1T=4, store '4' in RCBE2 and don't ask question.   |
|                      | Based upon prior answers: if RCBE1N = 1 and RCBE1T = '4', gray out answer codes 3,4,5 if RCBE1N = 2 and RCBE1T = '4', gray out answer codes 1,4,5 if RCBE1N = 3 and RCBE1T = '4', gray out answer codes 1,2,5 if RCBE1N = 5 and RCBE1T = '4', gray out answer codes 1,2,3                    |
| Skip Instructions    | <1-5,R,D> if answer code is grayed out [goto ERR_RCBE2] else [goto MAMHAD]   |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module               | 30  |
|----------------------|---|
| Section Name         | Cancer Screening  |
| Part                 |   |
| Question ID          | NAF.230_00.000  |
| Variable Name        | MAMHAD  |
| Universe             | HHSTAT4='S' and (AGE GE '030' and AGE not IN ('997','999')) and SEX='2'   |
| Universe-text        | Female sample adults age 30+  |
| Question Text        | Have you EVER HAD a mammogram?  |
|                      | *Read if necessary.   |
|                      | A mammogram is an x-ray taken only of the breast by a machine that presses against the breast.  |
| Answer Codes         | 1. Yes<br>2. No<br>Refused<br>Don't Know  |
| Question Type        | Yes/No  |
| Field Pane Descripti | on  |
| Fill Instructions    |   |
| Special Instructions | Display the text " A mammogram is an x-ray taken only of the breast by a machine that presses against the breast." in BOLD GRAY text. |
| Skip Instructions    | <1> [goto MAM6YR] <2> [goto MDRECMAM] <r,d> if AGE GE 40 [goto CHESTX]; else [goto ASPIRIN]</r,d>                                     |
| Hard Edits           |   |
| Soft Edits           |   |
| AssocHelp            |   |

| Module                 | 30  |
|------------------------|---|
| Section Name           | Cancer Screening  |
| Part                   |   |
| Question ID            | NAF.250_00.000  |
| Variable Name          | MAM6YR  |
| Universe               | HHSTAT4='S' and (AGE GE '030' and AGE not IN ('997','999')) and SEX='2' and MAMHAD(e)='1' |
| Universe-text          | Female sample adults 30+ who have ever had a mammogram                                    |
| Question Text          | How many mammograms have you had in the LAST 6 YEARS?                                     |
| Answer Codes           | *Enter '0' for none.  *Enter '95' for 95 or more mammograms.  0-95 Refused Don't Know     |
| Question Type          | Interger  |
| Field Pane Description |   |
| Fill Instructions      |   |
| Special Instructions   |   |
| Skip Instructions      | <0-95,R,D> [goto RMAM1_MT]  |
| Hard Edits             |   |
| Soft Edits             |   |
| AssocHelp              |   |

| Module               | 30   |
|----------------------|--|
| Section Name         | Cancer Screening   |
| Part                 |  |
| Question ID          | NAF.260_01.000   |
| Variable Name        | RMAM1_MT   |
| Universe             | HHSTAT4='S' and (AGE GE '030' and AGE not IN ('997','999')) and SEX='2' and MAMHAD(e)='1'  |
| Universe-text        | Female sample adults 30+ who have ever had a mammogram   |
| Question Text        | 1 of 2   |
|                      | When did you have your MOST RECENT mammogram?  |
|                      | *Enter month of last mammogram.  |
|                      | *Enter '96' to go to number and time period format.  |
| Answer Codes         | 1. January 2. February 3. March 4. April 5. May 6. June 7. July 8. August 9. September 10. October 11. November 12. December 96. Time period format Refused Don't know |
| Question Type        | Pick One - answer pane list  |
| Field Pane Descripti | on   |
| Fill Instructions    |  |
| Special Instructions | if RMAM1_MT = <r> store 'R' in RMAM1_YR if RMAM1_MT = &lt;96&gt; store '9996' in RMAM1_YR</r>  |
| Skip Instructions    | <1-12,D> [goto RMAM1_YR] <r> store "R' in RMAM1_YR [goto RMAM2] &lt;96&gt; store "9996" in RMAM1_YR [goto RMAM1N]</r>  |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module               | 30   |
|----------------------|--|
| Section Name         | Cancer Screening   |
| Part                 |  |
| Question ID          | NAF.260_02.000   |
| Variable Name        | RMAM1_YR   |
| Universe             | HHSTAT4='S' and (AGE GE '030' and AGE not IN ('997','999')) and SEX='2' and MAMHAD(e)='1' and ('01' <= RMAM1_MT <= '12' or RMAM1_MT='99')  |
| Universe-text        | Female sample adults age 30+ who answered month of last mammogram or didn't know month of last mammogram   |
| Question Text        | 2 of 2   |
|                      | *Enter year of last mammogram.   |
| Answer Codes         |  |
| Question Type        | Integer  |
| Field Pane Descript  | ion  |
| Fill Instructions    |  |
| Special Instructions | Allow 4 character numeric field – must enter 4 numbers   |
| Skip Instructions    | <pre><valid year=""> if RMAM1_YR gt current year or (RMAM1_YR=current year and RMAM1_MT gt current month)   goto ERR1_ RMAM1_YR (future date) elseif RMAM1_YR It DOBY or (RMAM1_YR=DOBY and RMAM1_MT It DOBM)   goto ERR2_ RMAM1_YR (prior to birth date) elseif RMAM1_MT=D   goto RMAM2 elseif RMAM1_MT=1-12   goto MAMPAY <r,d> goto RMAM2</r,d></valid></pre> |
| Hard Edits           | ERR1_RMAM1_YR  |
|                      | * Future date invalid. Please correct.   |
|                      | ERR2_RMAM1_YR  |
|                      | * Date before birth. Please correct.   |
| Soft Edits           |  |
| AssocHelp            |  |

| Module                 | 30  |
|------------------------|---|
| Section Name           | Cancer Screening  |
| Part                   |   |
| Question ID            | NAF.270_01.000  |
| Variable Name          | RMAM1N  |
| Universe               | HHSTAT4='S' and (AGE GE '030' and AGE not IN ('997','999')) and SEX='2' and MAMHAD(e)='1' and RMAM1_MT(e)='96'              |
| Universe-text          | Female sample adults 30+ who selected number and time period format for most recent mammogram from the initial month screen |
| Question Text          | 1 of 2  |
|                        | When did you have your MOST RECENT mammogram?   |
|                        | *Enter number for time since last mammogram.  |
|                        | *Enter '95' for 95 or more.   |
| Answer Codes           | Allow 1-95, R, D  |
| Question Type          | Integer   |
| Field Pane Description |   |
| Fill Instructions      |   |
| Special Instructions   | if RMAM1N = <r> store 'R' in RMAM1T<br/>if RMAM1N = <d> store 'D' in RMAM1T</d></r>   |
| Skip Instructions      | <1-95> [goto RMAM1T] <r,d> store "R,D" in RMAM1T [goto RMAM2]</r,d>   |
| Hard Edits             |   |
| Soft Edits             |   |
| AssocHelp              |   |

| Module               | 30   |
|----------------------|--|
| Section Name         | Cancer Screening   |
| Part                 |  |
| Question ID          | NAF.270_02.000   |
| Variable Name        | RMAM1T   |
| Universe             | HHSTAT4='S' and (AGE GE '030' and AGE not IN ('997','999')) and SEX='2' and MAMHAD(e)='1' and RMAM1_MT(e)='96' and ('01' <= RMAM1N <= '95')  |
| Universe-text        | Female sample adults 30+ who answered 1-95 for number part of this 2 part question   |
| Question Text        | 2 of 2   |
|                      | *Enter time period for time since most recent mammogram.   |
| Answer Codes         | 1. Days ago 2. Weeks ago 3. Months ago 4. Years ago Refused Don't know   |
| Question Type        | Pick One - answer pane list  |
| Field Pane Descripti | ion  |
| Fill Instructions    |  |
| Special Instructions | if RMAM1N gt 5 and RMAM1T=4, store '5' in RMAM2.   |
|                      | if RMAM1N=4 and RMAM1T=4, store '4' in RMAM2.  |
| Skip Instructions    | <1-3> goto MAMPAY <4> if RMAM1N=4     set RMAM2=4     goto MAMPAY     elseif RMAM1N gt 5 and RMAM1N gt AGE     goto ERR_RMAM1T (greater than persons age)     elseif RMAM1N gt 5 and RMAM1N le AGE     set RMAM2=5     goto MAMPAY     elseif RMAM1N=1,2,3,5     goto RMAM2 < <r,d> goto RMAM2</r,d> |
| Hard Edits           | ERR_RMAM1T   |
|                      | * Time since last exam cannot be greater than age. * Please correct.   |
| Soft Edits           |  |
| AssocHelp            |  |

| Module               | 30   |
|----------------------|--|
| Section Name         | Cancer Screening   |
| Part                 |  |
| Question ID          | NAF.275_00.000   |
| ~<br>Variable Name   | RMAM2  |
| Universe             | HHSTAT4='S' and (AGE GE '030' and AGE not IN ('997','999')) and SEX='2' and MAMHAD(e)='1' and (RMAM1_MT(e) IN ('97','98','99') or RMAM1_YR(e) IN ('9997','9998','9999') or RMAM1N(e) IN ('97','98','99') or RMAM1T(e) IN ('7','8','9') or (RMAM1T(e) = '4' and RMAM1N IN ('1','2','3','5'))) |
| Universe-text        | Female sample adults 30+ who failed to give a complete date in either the month or year format or failed to give a complete date in the number and time period format, or entered years ago in the time period format (excluding those whose last mammogram was over 5 years ago)            |
| Question Text        | Was it:  *Read answer categories.  |
| Answer Codes         | 1. A year ago or less 2. More than 1 year but not more than 2 years 3. More than 2 years but not more than 3 years 4. More than 3 years but not more than 5 years 5. Over 5 years ago Refused Don't know   |
| Question Type        | Pick One - answer pane list  |
| Field Pane Descripti |  |
| Fill Instructions    |  |
| Special Instructions | Display answer categories 1-5 in BOLD BLACK text.  |
|                      | If RMAM1N gt 5 and RMAM1T=4, store '5' in RMAM2 and don't ask question.  |
|                      | If RMAM1N=4 and RMAM1T=4, store '4' in RMAM2 and don't ask question.   |
|                      | Based upon prior answers: if RMAM1N = 1 and RMAM1T = '4', gray out answer codes 3,4,5 if RMAM1N = 2 and RMAM1T = '4', gray out answer codes 1,4,5 if RMAM1N = 3 and RMAM1T = '4', gray out answer codes 1,2,5 if RMAM1N = 5 and RMAM1T = '4', gray out answer codes 1,2,3                    |
| Skip Instructions    | <1-5,R,D> if answer code is grayed out [goto ERR_RMAM2] else [goto MAMPAY]   |
| Hard Edits           | ERR_RMAM2  |
|                      | *That is not a valid response. *Please correct.  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module                 | 30   |
|------------------------|--|
| Section Name           | Cancer Screening   |
| Part                   |  |
| Question ID            | NAF.280_00.000   |
| Variable Name          | MAMPAY   |
| Universe               | HHSTAT4='S' and (AGE GE '030' and AGE not IN ('997','999')) and SEX='2' and MAMHAD(e)='1'    |
| Universe-text          | Female sample adults 30+ who who have ever had a mammogram                                   |
| Question Text          | How much did you pay out of pocket for this mammogram was it NONE, PART, or ALL of the cost? |
| Answer Codes           | 1. None of the cost 2. Part of the cost 3. All of the cost Refused Don't Know                |
| Question Type          | Pick one-answer list pane  |
| Field Pane Description | on Pay for mammogram   |
| Fill Instructions      |  |
| Special Instructions   |  |
| Skip Instructions      | <1-3,R,D> [goto MAMREAS]   |
| Hard Edits             |  |
| Soft Edits             |  |
| AssocHelp              |  |

| Module                 | 30   |
|------------------------|--|
| Section Name           | Cancer Screening   |
| Part                   |  |
| Question ID            | NAF.310_00.000   |
| Variable Name          | MAMREAS  |
| Universe               | HHSTAT4='S' and (AGE GE '030' and AGE not IN ('997','999')) and SEX='2' and MAMHAD(e)='1'                                  |
| Universe-text          | Female sample adults 30+ who have ever had a mammogram   |
| Question Text          | What was the MAIN reason you had this mammogram was it part of a routine exam, because of a problem, or some other reason? |
| Answer Codes           | 1. Part of a routine exam 2. Because of a problem 3. Other reason Refused Don't know                                       |
| Question Type          | Pick One - answer pane list  |
| Field Pane Description |  |
| Fill Instructions      |  |
| Special Instructions   |  |
| Skip Instructions      | <1-3,R,D> [goto MDRECMAM]  |
| Hard Edits             |  |
| Soft Edits             |  |
| AssocHelp              |  |

| Module               | 30   |
|----------------------|--|
| Section Name         | Cancer Screening   |
| Part                 |  |
| Question ID          | NAF.315_00.000   |
| Variable Name        | MDRECMAM   |
| Universe             | HHSTAT4='S' and (AGE GE '030' and AGE not IN ('997','999')) and SEX='2' and MAMHAD(e) not IN ('7','9')   |
| Universe-text        | Female sample adults 30+ who have not answered Refused or Don't know to ever having a mammogram  |
| Question Text        | Fill1 (IF MAMHAD=1 and most recent screening exam LE 2 years from system date) [Was your most recent mammogram recommended by a doctor or other health professional?]  |
|                      | Else (IF MAMHAD=2, or MAMHAD GT 2 years from system date or RMAM2=R,D) [In the PAST 12 MONTHS, has a doctor or other health professional RECOMMENDED that you have a mammogram?]   |
| Answer Codes         | 1. Yes 2. No 3. Did not see a doctor in the last 12 months Refused Don't Know  |
| Question Type        | Yes/No   |
| Field Pane Descripti | ion  |
| Fill Instructions    | [fill 1] if MAMHAD = '1' and ((RMAM2 = 1,2) or (RMAM1T = 1,2) or (RMAM1_YR = (current year - 2) and RMAM1_MT ge current month) or (RMAM1_YR gt (current year - 2)) or (RMAM1T = 3 and RMAM1N le 24)) fill "Was your most recent mammogram recommended by a doctor or other health professional?" else fill "In the PAST 12 MONTHS, has a doctor or other health professional RECOMMENDED that you have a mammogram?" |
| Special Instructions |  |
| Skip Instructions    | <1-3,R,D> if MAMHAD=1 [goto MAMDNBR]; else if AGE GE 40 [goto CHESTX]; else [goto ASPIRIN]   |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module                 | 30  |
|------------------------|---|
| Section Name           | Cancer Screening  |
| Part                   |   |
| Question ID            | NAF.317_00.000  |
| Variable Name          | MAMDNBR   |
| Universe               | HHSTAT4='S' and (AGE GE '030' and AGE not IN ('997','999')) and SEX='2' and MAMHAD(e)='1' |
| Universe-text          | Female sample adults 30+ who who have ever had a mammogram                                |
| Question Text          | Were you informed that your mammogram showed that you have dense breast tissue?           |
| Answer Codes           | 1. Yes 2. No 3. Did not see a doctor in the last 12 months Refused Don't Know             |
| Question Type          | Yes/No  |
| Field Pane Description | on Dense breasts  |
| Fill Instructions      |   |
| Special Instructions   |   |
| Skip Instructions      | <1,2,R,D> [goto MAMABN1]  |
| Hard Edits             |   |
| Soft Edits             |   |
| AssocHelp              |   |

| Module                 | 30  |  |
|------------------------|---|--|
| Section Name           | Cancer Screening  |  |
| Part                   |   |  |
| Question ID            | NAF.320_00.000  |  |
| Variable Name          | MAMABN1   |  |
| Universe               | HHSTAT4='S' and (AGE GE '030' and AGE not IN ('997','999')) and SEX='2' and MAMHAD(e)='1'   |  |
| Universe-text          | Female sample adults 30+ who have ever had a mammogram  |  |
| Question Text          | After your MOST RECENT mammogram, were you advised to have more tests?  |  |
| Answer Codes           | *Read if necessary: More tests may include another mammogram, a sonogram, an MRI, a biopsy, or something else to check for problems in your breast.  1. Yes 2. No     |  |
|                        | Refused Don't Know  |  |
| Question Type          | Yes/No  |  |
| Field Pane Description |   |  |
| Fill Instructions      |   |  |
| Special Instructions   | Display the text "More tests may include another mammogram, a sonogram, an MRI, a biopsy, or something else to check for problems in your breast." in BOLD GRAY text. |  |
| Skip Instructions      | <1> [goto MFOLLOW1] <2,R,D> [goto LUMPEV2]  |  |
| Hard Edits             |   |  |
| Soft Edits             |   |  |
| AssocHelp              |   |  |

| Module                 | 30   |
|------------------------|--|
| Section Name           | Cancer Screening   |
| Part                   |  |
| Question ID            | NAF.325_00.000   |
| Variable Name          | MFOLLOW1   |
| Universe               | HHSTAT4='S' and (AGE GE '030' and AGE not IN ('997','999')) and SEX='2' and MAMHAD(e)='1' and MAMABN1(e)='1' |
| Universe-text          | Female sample adults 30+ who have ever had a mammogram and was recommended to have more tests                |
| Question Text          | Which tests did you actually have?   |
|                        | *Enter all that apply, separate with commas.   |
| Answer Codes           | O. None  1. Ultrasound 2. Breast MRI 3. Additional mammogram(s) 4. Biopsy 5. Other Refused Don't know        |
| Question Type          | Enter all that apply   |
| Field Pane Description |  |
| Fill Instructions      |  |
| Special Instructions   | Do not allow '0' with other answer categories.   |
| Skip Instructions      | <0> [goto MNOTFOL1]<br><1-5,R,D> [goto MAMCAN]   |
| Hard Edits             |  |
| Soft Edits             |  |
| AssocHelp              |  |

| Module               | 30   |   |
|----------------------|--|---|
| Section Name         | Cancer Screening   |   |
| Part                 |  |   |
| Question ID          | NAF.330_00.000   |   |
| Variable Name        | MNOTFOL1   |   |
| Universe             | HHSTAT4='S' and (AGE GE '0' MAMHAD(e)='1' and MFOLLO   | 30' and AGE not IN ('997','999')) and SEX='2' and N1(e)='0' |
| Universe-text        | Female sample adults 30+ who recommendation to have more   | have ever had a mammogram and did not follow tests          |
| Question Text        | What is the most important rea have more tests?  | son why you DID NOT follow the recommendation to            |
|                      | *Put response into correct cate  | gory below.   |
| Answer Codes         | 1. No reason/never thought about 2. Put it off/didn't get around to 3. Too expensive/no insurance, 4. Too painful, unpleasant, or e 5. I'm too young 6. Don't have doctor 7. Fear 8. Other reason Refused Don't know | it<br>/cost   |
| Question Type        | Pick One - answer pane list  |   |
| Field Pane Descripti | on   |   |
| Fill Instructions    |  |   |
| Special Instructions |  |   |
| Skip Instructions    | <1-8,R,D> [goto MAMMODE]   |   |
| Hard Edits           |  |   |
| Soft Edits           |  |   |
| Assoc Heln           |  |   |

| Module               | 30   |
|----------------------|--|
| Section Name         | Cancer Screening   |
| Part                 |  |
| Question ID          | NAF.335_00.000   |
| Variable Name        | MAMMODE  |
| Universe             | HHSTAT4='S' and (AGE GE '030' and AGE not IN ('997','999')) and SEX='2' and MAMHAD(e)='1' and MFOLLOW(e)='2' |
| Universe-text        | Female sample adults 30+ who have ever had a mammogram and did not follow recommendation to have more tests  |
| Question Text        | *Record mode of previous question.   |
| Answer Codes         | In person     Over the telephone   |
| Question Type        | Pick One - answer pane list  |
| Field Pane Descripti | on   |
| Fill Instructions    |  |
| Special Instructions | Do not allow Refused or Don't know   |
| Skip Instructions    | <1,2> [goto LUMPEV2]   |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module                 | 30   |
|------------------------|--|
| Section Name           | Cancer Screening   |
| Part                   |  |
| Question ID            | NAF.340_00.000   |
| Variable Name          | MAMCAN   |
| Universe               | HHSTAT4='S' and (AGE GE '030' and AGE not IN ('997','999')) and SEX='2' and MAMABN1(e)='1' and MFOLLOW1(e) IN('1','2','3','4','5') |
| Universe-text          | Female sample adults 30+ who followed recommendation for follow-up after a mammogram   |
| Question Text          | As a result of these additional tests after your mammogram(s), were you diagnosed with cancer?                                     |
| Answer Codes           | 1. Yes 2. No Refused Don't Know  |
| Question Type          | Yes/No   |
| Field Pane Description |  |
| Fill Instructions      |  |
| Special Instructions   |  |
| Skip Instructions      | <1,2,R,D> [goto LUMPEV2]   |
| Hard Edits             |  |
| Soft Edits             |  |
| AssocHelp              |  |

| Module                 | 30  |  |
|------------------------|---|--|
| Section Name           | Cancer Screening  |  |
| Part                   |   |  |
| Question ID            | NAF.350_00.000  |  |
| Variable Name          | LUMPEV2   |  |
| Universe               | HHSTAT4='S' and (AGE GE '03<br>MAMHAD(e)='1'                      | 30' and AGE not IN ('997','999')) and SEX='2' and              |
| Universe-text          | Female sample adults 30+ who                                      | have ever had a mammogram                                      |
| Question Text          | Have you EVER HAD a biopsy found NOT to be cancer?                | to test or remove a lump from your breast that was             |
|                        | *Read if necessary: A biopsy is cancer cells are present.         | the removal of a sample of tissue to see whether               |
| Answer Codes           | 1. Yes 2. No 3. Lump removed was cancero Refused Don't know       | us   |
| Question Type          | Pick One - answer list pane                                       |  |
| Field Pane Description |   |  |
| Fill Instructions      |   |  |
| Special Instructions   | Display the text " A biopsy is the cells are present." in BOLD GR | e removal of a sample of tissue to see whether cancer AY text. |
| Skip Instructions      | <1> [goto LUMPNUM2]<br><2,3,R,D> if age ge 40 [goto Ch            | HESTX]; else [goto ASPIRIN]                                    |
| Hard Edits             |   |  |
| Soft Edits             |   |  |
| AssocHelp              |   |  |

| Module                 | 30   |
|------------------------|--|
| Section Name           | Cancer Screening   |
| Part                   |  |
| Question ID            | NAF.351_00.000   |
| Variable Name          | LUMPNUM2   |
| Universe               | HHSTAT4='S' and (AGE GE '030' and AGE not IN ('997','999')) and SEX='2' and LUMPEV2(e)='1'                                   |
| Universe-text          | Female sample adults 30+ who have had a lump removed that was not cancerous  |
| Question Text          | How many of these biopsies have you had?   |
|                        | *Enter '95' if 95 or more biopsies   |
|                        | *Read if necessary: A biopsy is the removal of a sample of tissue to see whether cancer cells are present                    |
| Answer Codes           | Allow 1-95, R, D   |
| Question Type          | Integer  |
| Field Pane Description |  |
| Fill Instructions      |  |
| Special Instructions   | Display the text "A biopsy is the removal of a sample of tissue to see whether cancer cells are present." in BOLD GRAY text. |
| Skip Instructions      | <1-95,R,D> if age ge 40 [goto CHESTX]; else [goto ASPIRIN]   |
| Hard Edits             |  |
| Soft Edits             |  |
| AssocHelp              |  |

| Module                 | 30  |  |
|------------------------|---|--|
| Section Name           | Cancer Screening  |  |
| Part                   |   |  |
| Question ID            | NAF.423_01.000  |  |
| Variable Name          | CHESTX  |  |
| Universe               | HHSTAT4='S' and (AGE GE '040' and AGE not IN ('997','999'))   |  |
| Universe-text          | Sample adults 40+   |  |
| Question Text          | The next set of questions is about tests of your chest area. These questions ask about chest x-rays and CT scans, but not mammograms. |  |
|                        | In the last 12 months, did you have a chest x-ray?  |  |
| Answer Codes           | 1. Yes<br>2. No<br>Refused<br>Don't Know  |  |
| Question Type          | Yes/No  |  |
| Field Pane Description |   |  |
| Fill Instructions      |   |  |
| Special Instructions   |   |  |
| Skip Instructions      | <1> [goto CHESTREA]<br><2,D,R> [goto CATEVER]   |  |
| Hard Edits             |   |  |
| Soft Edits             |   |  |
| AssocHelp              |   |  |

| Module                 | 30   |
|------------------------|--|
| Section Name           | Cancer Screening   |
| Part                   |  |
| Question ID            | NAF.423_02.000   |
| Variable Name          | CHESTREA   |
| Universe               | HHSTAT4='S' and (AGE GE '040' and AGE not IN ('997','999')) and CHESTX(e)='1'  |
| Universe-text          | Sample adults 40+ who have had a chest xray in the past 12 months  |
| Question Text          | Were any of the chest x-rays you had in the last 12 months done to check for lung cancer, rather than for some other reason? |
| Answer Codes           | Yes, to check for lung cancer     No, for some other reason     Refused     Don't know                                       |
| Question Type          | Pick One - answer pane list  |
| Field Pane Description |  |
| Fill Instructions      |  |
| Special Instructions   |  |
| Skip Instructions      | <1,2,D,R> [goto CATEVER]   |
| Hard Edits             |  |
| Soft Edits             |  |
| AssocHelp              |  |

| Module                 | 30   |  |
|------------------------|--|--|
| Section Name           | Cancer Screening   |  |
| Part                   |  |  |
| Question ID            | NAF.423_03.000   |  |
| Variable Name          | CATEVER  |  |
| Universe               | HHSTAT4='S' and (AGE GE '040' and AGE not IN ('997', '999'))   |  |
| Universe-text          | Sample adults 40+  |  |
| Question Text          | The following questions are about CT scans, also called CAT scans. During this test, you are lying down and moved through a donut shaped x-ray machine while holding your breath.  Have you EVER HAD a CT or CAT scan? |  |
| Answer Codes           | 1. Yes 2. No Refused Don't Know  |  |
| Question Type          | Yes/No   |  |
| Field Pane Description |  |  |
| Fill Instructions      |  |  |
| Special Instructions   |  |  |
| Skip Instructions      | <1> [goto CATCHST1]<br><2,D,R> [goto ASPIRIN]  |  |
| Hard Edits             |  |  |
| Soft Edits             |  |  |
| AssocHelp              |  |  |

| Module                 | 30  |  |
|------------------------|---|--|
| Section Name           | Cancer Screening  |  |
| Part                   |   |  |
| Question ID            | NAF.423_04.000  |  |
| Variable Name          | CATCHST1  |  |
| Universe               | HHSTAT4='S' and (AGE GE '040' and AGE not IN ('997', '999')) and CATEVER(e)='1' |  |
| Universe-text          | Sample adults 40+ who have ever had a CAT scan or CT scan                       |  |
| Question Text          | Were any of the CT or CAT scans you had done of your chest area?                |  |
| Answer Codes           | 1. Yes 2. No 3. Several areas of upper body region Refused Don't know           |  |
| Question Type          | Pick One - answer pane list   |  |
| Field Pane Description |   |  |
| Fill Instructions      |   |  |
| Special Instructions   |   |  |
| Skip Instructions      | <1,3> [goto CATLUNG1]<br><2,D,R> [goto ASPIRIN]                                 |  |
| Hard Edits             |   |  |
| Soft Edits             |   |  |
| AssocHelp              |   |  |

| Module               | 30  |
|----------------------|---|
| Section Name         | Cancer Screening  |
| Part                 |   |
| Question ID          | NAF.423_05.000  |
| Variable Name        | CATLUNG1  |
| Universe             | HHSTAT4='S' and (AGE GE '040' and AGE not IN ('997','999')) and CATCHST1(e) IN ('1',3)  |
| Universe-text        | Sample adults 40+ who have had a CAT scan or CT scan of the chest area in the past 12 months  |
| Question Text        | The next questions are only about CT or CAT scans to check or screen for lung cancer. Do not include any CT or CAT scans of your chest area that were done for other reasons. |
|                      | Were any of the CAT scans of your chest area done to check for lung cancer, rather than for some other reason?  |
| Answer Codes         | Yes, to check for lung cancer     No, for some other reason     Refused     Don't know  |
| Question Type        | Pick One - answer pane list   |
| Field Pane Descripti | on  |
| Fill Instructions    |   |
| Special Instructions |   |
| Skip Instructions    | <1> [goto CATWHEN] <2,R,D> [goto ASPIRIN]   |
| Hard Edits           |   |
| Soft Edits           |   |
| AssocHelp            |   |

| Module                 | 30  |
|------------------------|---|
| Section Name           | Cancer Screening  |
| Part                   |   |
| Question ID            | NAF.423_06.000  |
| Variable Name          | CATWHEN   |
| Universe               | HHSTAT4='S' and (AGE GE '040' and AGE not IN ('997', '999')) and CATLUNG1(e)='1'  |
| Universe-text          | Sample adults 40+ who have had a CAT scan or CT scan of the chest area to screen for lung cancer  |
| Question Text          | When did you have your MOST RECENT CT or CAT scan of your chest area to check or screen for lung cancer?  |
| Answer Codes           | <ol> <li>A year ago or less</li> <li>More than 1 year but not more than 2 years</li> <li>More than 2 years but not more than 3 years</li> <li>More than 3 years but not more than 5 years</li> <li>Over 5 years ago</li> <li>Refused</li> <li>Don't know</li> </ol> |
| Question Type          | Pick One - answer pane list   |
| Field Pane Description | Most recent CT/CAT scan   |
| Fill Instructions      |   |
| Special Instructions   |   |
| Skip Instructions      | <1-5,R,D> [goto CATNUM]   |
| Hard Edits             |   |
| Soft Edits             |   |
| AssocHelp              |   |

| Module                 | 30   |
|------------------------|--|
| Section Name           | Cancer Screening   |
| Part                   |  |
| Question ID            | NAF.423_07.000   |
| Variable Name          | CATNUM   |
| Universe               | HHSTAT4='S' and (AGE GE '040' and AGE not IN ('997', '999')) and CATLUNG1(e)='1'                 |
| Universe-text          | Sample adults 40+ who have had a CAT scan or CT scan of the chest area to screen for lung cancer |
| Question Text          | How many CT or CAT scans to check or screen for lung cancer have you had in the LAST 3 YEARS?    |
|                        | *Enter '0' for none.   |
|                        | *Enter '95' for 95 or more CT scans  |
| Answer Codes           | Allow 0-95,R,D   |
| Question Type          | Integer  |
| Field Pane Description | on Number of scans   |
| Fill Instructions      |  |
| Special Instructions   |  |
| Skip Instructions      | <0-95,R,D> [goto CATNEXT]  |
| Hard Edits             |  |
| Soft Edits             |  |
| AssocHelp              |  |

| Module                 | 30  |
|------------------------|---|
| Section Name           | Cancer Screening  |
| Part                   |   |
| Question ID            | NAF.423_08.000  |
| Variable Name          | CATNEXT   |
| Universe               | HHSTAT4='S' and (AGE GE '040' and AGE not IN ('997', '999')) and CATLUNG1(e)='1'  |
| Universe-text          | Sample adults 40+ who have had a CAT scan or CT scan of the chest area to screen for lung cancer  |
| Question Text          | When do you expect to have your next CT scan of your chest area to check or screen for lung cancer?                                       |
| Answer Codes           | 1. Less than a year from now 2. One year from now 3. More than one year from now 4. When doctor recommends it 5. Never Refused Don't know |
| Question Type          | Pick One - answer pane list   |
| Field Pane Description | on Next scan  |
| Fill Instructions      |   |
| Special Instructions   |   |
| Skip Instructions      | <1-5,R,D> [goto ASPIRIN]  |
| Hard Edits             |   |
| Soft Edits             |   |
| AssocHelp              |   |

| Module                 | 30  |
|------------------------|---|
| Section Name           | Cancer Screening  |
| Part                   |   |
| Question ID            | NAF.424_02.000  |
| Variable Name          | ASPIRIN   |
| Universe               | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999'))                                  |
| Universe-text          | Sample adults 18+   |
| Question Text          | ? [F1]  |
|                        | Do you now take any of the following medications regularly, that is, at least 3 times a week? |
|                        | Aspirin, Bayer, Bufferin, or Excedrin?  |
|                        | *Read if necessary: Do NOT include Tylenol.   |
| Answer Codes           | 1. Yes<br>2. No<br>Refused<br>Don't Know  |
| Question Type          | Yes/No  |
| Field Pane Description |   |
| Fill Instructions      |   |
| Special Instructions   | Display the text "Do NOT include Tylenol." in BOLD GRAY text.                                 |
| Skip Instructions      | <1> [goto ASPIR3M] <2,D,R> [goto ADVIL]   |
| Hard Edits             |   |
| Soft Edits             |   |
| AssocHelp              | H_ASPIRIN   |

| Module                 | 30  |
|------------------------|---|
| Section Name           | Cancer Screening  |
| Part                   |   |
| Question ID            | NAF.424_02.000_H  |
| Variable Name          | H_ASPIRIN   |
| Universe               |   |
| Universe-text          |   |
| Question Text          | Include any medications that contain aspirin. Do not include steroid medications, such as prednisone. |
| Answer Codes           |   |
| Question Type          | Help Screen   |
| Field Pane Description | on  |
| Fill Instructions      |   |
| Special Instructions   | Associated screens: ASPIRIN   |
| Skip Instructions      |   |
| Hard Edits             |   |
| Soft Edits             |   |
| AssocHelp              |   |

| Module                 | 30  |
|------------------------|---|
| Section Name           | Cancer Screening  |
| Part                   |   |
| Question ID            | NAF.424_03.000  |
| Variable Name          | ASPIR3M   |
| Universe               | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and ASPIRIN(e)='1'    |
| Universe-text          | Sample adults 18+ who now take Aspirin etc.                                       |
| Question Text          | Have you taken any of these kinds of medications regularly for the last 3 months? |
| Answer Codes           | 1. Yes 2. No Refused Don't Know   |
| Question Type          | Yes/No  |
| Field Pane Description |   |
| Fill Instructions      |   |
| Special Instructions   |   |
| Skip Instructions      | <1,2,R,D> [goto ADVIL]  |
| Hard Edits             |   |
| Soft Edits             |   |
| AssocHelp              |   |

| Module                 | 30  |  |
|------------------------|---|--|
| Section Name           | Cancer Screening  |  |
| Part                   |   |  |
| Question ID            | NAF.424_04.000  |  |
| Variable Name          | ADVIL   |  |
| Universe               | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999'))                                  |  |
| Universe-text          | Sample adults 18+   |  |
| Question Text          | Do you now take any of the following medications regularly, that is, at least 3 times a week? |  |
|                        | Advil, Ibuprofen, Motrin, Nuprin, Aleve, Naprosyn, Naproxen, or Celebrex?                     |  |
| Answer Codes           | 1. Yes 2. No Refused Don't Know   |  |
| Question Type          | Yes/No  |  |
| Field Pane Description |   |  |
| Fill Instructions      |   |  |
| Special Instructions   |   |  |
| Skip Instructions      | <1> [goto ADVIL3M]<br><2,R,D> [goto ACETOCT]  |  |
| Hard Edits             |   |  |
| Soft Edits             |   |  |
| AssocHelp              |   |  |

| Module                 | 30  |  |
|------------------------|---|--|
| Section Name           | Cancer Screening  |  |
| Part                   |   |  |
| Question ID            | NAF.424_05.000  |  |
| Variable Name          | ADVIL3M   |  |
| Universe               | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and ADVIL(e)='1'      |  |
| Universe-text          | Sample adults 18+ who now take Advil etc.   |  |
| Question Text          | Have you taken any of these kinds of medications regularly for the last 3 months? |  |
| Answer Codes           | 1. Yes 2. No Refused Don't Know   |  |
| Question Type          | Yes/No  |  |
| Field Pane Description |   |  |
| Fill Instructions      |   |  |
| Special Instructions   |   |  |
| Skip Instructions      | <1,2,R,D> [goto ACETOCT]  |  |
| Hard Edits             |   |  |
| Soft Edits             |   |  |
| AssocHelp              |   |  |

| Module                 | 30  |  |
|------------------------|---|--|
| Section Name           | Cancer Screening  |  |
| Part                   |   |  |
| Question ID            | NAF.424_05.010  |  |
| Variable Name          | ACETOCT   |  |
| Universe               | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999'))   |  |
| Universe-text          | Sample adults 18+   |  |
| Question Text          | Do you now take any OVER-THE-COUNTER MEDICATIONS that contain acetaminophen regularly, that is, at least 3 times a week? Acetaminophen is contained in many products such as Tylenol, Tylenol PM, Nyquil, Theraflu, Excedrin, Alka Seltzer Plus, and Midol. |  |
| Answer Codes           | 1. Yes<br>2. No<br>Refused<br>Don't Know  |  |
| Question Type          | Yes/No  |  |
| Field Pane Description |   |  |
| Fill Instructions      |   |  |
| Special Instructions   |   |  |
| Skip Instructions      | <1> [goto ACETOC3M] <2,R,D> [goto ACETPR]   |  |
| Hard Edits             |   |  |
| Soft Edits             |   |  |
| AssocHelp              |   |  |

| Module                 | 30  |  |
|------------------------|---|--|
| Section Name           | Cancer Screening  |  |
| Part                   |   |  |
| Question ID            | NAF.424_05.020  |  |
| Variable Name          | ACETOC3M  |  |
| Universe               | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and ACETOCT(e)='1'    |  |
| Universe-text          | Sample adults 18+ who take over the counter acetaminophen                         |  |
| Question Text          | Have you taken any of these kinds of medications regularly for the last 3 months? |  |
| Answer Codes           | 1. Yes 2. No Refused Don't Know   |  |
| Question Type          | Yes/No  |  |
| Field Pane Description |   |  |
| Fill Instructions      |   |  |
| Special Instructions   |   |  |
| Skip Instructions      | <1,2,R,D> [goto ACETPR]   |  |
| Hard Edits             |   |  |
| Soft Edits             |   |  |
| AssocHelp              |   |  |

| Module               | 30   |  |                          |
|----------------------|--|--|--------------------------|
| Section Name         | Cancer Screening   |  |                          |
| Part                 |  |  |                          |
| Question ID          | NAF.424_05.030   |  |                          |
| Variable Name        | ACETPR   |  |                          |
| Universe             | HHSTAT4='S' and (AGE GE '01  | 8' and AGE not IN ('997','                                 | 999'))                   |
| Universe-text        | Sample adults 18+  |  |                          |
| Question Text        | Do you now take any of the follo contain acetaminophen regularl contained in many prescription prescription with Codeine, and Fioric | y, that is, at least 3 times<br>pain products such as Vico | a week? Acetaminophen is |
| Answer Codes         | 1. Yes<br>2. No<br>Refused<br>Don't Know   |  |                          |
| Question Type        | Yes/No   |  |                          |
| Field Pane Descripti | ion  |  |                          |
| Fill Instructions    |  |  |                          |
| Special Instructions |  |  |                          |
| Skip Instructions    | <1> [goto ACETPR3M] <2,R,D><br>elseif AGE GE 30 [goto MEDHR<br>elseif AGE = 18-29 [goto MEDB   | T]   | IA]                      |
| Hard Edits           |  |  |                          |
| Soft Edits           |  |  |                          |
| AssocHelp            |  |  |                          |

| Module                 | 30  |  |
|------------------------|---|--|
| Section Name           | Cancer Screening  |  |
| Part                   |   |  |
| Question ID            | NAF.424_05.040  |  |
| Variable Name          | ACETPR3M  |  |
| Universe               | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999')) and ACETPR(e)='1'                          |  |
| Universe-text          | Sample adults 18+ who take prescription acetaminophen   |  |
| Question Text          | Have you taken any of these kinds of medications regularly for the last 3 months?                       |  |
| Answer Codes           | 1. Yes 2. No Refused Don't Know   |  |
| Question Type          | Yes/No  |  |
| Field Pane Description |   |  |
| Fill Instructions      |   |  |
| Special Instructions   |   |  |
| Skip Instructions      | <1,2,R,D> if SEX=1 [goto PROPECIA]<br>elseif AGE GE 30 [goto MEDHRT]<br>elseif AGE = 18-29 [goto MEDBC] |  |
| Hard Edits             |   |  |
| Soft Edits             |   |  |
| AssocHelp              |   |  |

| Module                 | 30   |  |
|------------------------|--|--|
| Section Name           | Cancer Screening   |  |
| Part                   |  |  |
| Question ID            | NAF.424_06.000   |  |
| Variable Name          | PROPECIA   |  |
| Universe               | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999')) and SEX='1'   |  |
| Universe-text          | Male sample adults 18+   |  |
| Question Text          | Some men take medications such as Propecia (pro-PEE-she-ah), Proscar (PRAHS-car) or Finasteride (fin-AS-tur-eyed) for hair loss or for problems with their prostate gland. Do you now take any of these medications regularly, that is, at least 3 times a week? |  |
| Answer Codes           | 1. Yes 2. No Refused Don't Know  |  |
| Question Type          | Yes/No   |  |
| Field Pane Description |  |  |
| Fill Instructions      |  |  |
| Special Instructions   |  |  |
| Skip Instructions      | <1> [goto PROPMTHS]<br><2,R,D> if AGE ge 40 [goto PSAHAD]<br>elseif AGE = 18-39 [goto genetic testing]   |  |
| Hard Edits             |  |  |
| Soft Edits             |  |  |
| AssocHelp              |  |  |

| Module                 | 30   |  |
|------------------------|--|--|
| Section Name           | Cancer Screening   |  |
| Part                   |  |  |
| Question ID            | NAF.424_07.000   |  |
| Variable Name          | PROPMTHS   |  |
| Universe               | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and SEX='1' and PROPECIA(e)='1'            |  |
| Universe-text          | Male sample adults 18+ who take Propecia regularly   |  |
| Question Text          | Have you taken Propecia, Proscar or Finasteride regularly for the last 3 months?                       |  |
| Answer Codes           | 1. Yes 2. No Refused Don't Know  |  |
| Question Type          | Yes/No   |  |
| Field Pane Description |  |  |
| Fill Instructions      |  |  |
| Special Instructions   |  |  |
| Skip Instructions      | <1> [goto PROPREAS]<br><2,R,D> if AGE ge 40 [goto PSAHAD]<br>elseif AGE = 18-39 [goto genetic testing] |  |
| Hard Edits             |  |  |
| Soft Edits             |  |  |
| AssocHelp              |  |  |

| Module               | 30  |  |
|----------------------|---|--|
| Section Name         | Cancer Screening  |  |
| Part                 |   |  |
| Question ID          | NAF.424_08.000  |  |
| Variable Name        | PROPREAS  |  |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and SEX='1' and PROPMTHS(e)='1'   |  |
| Universe-text        | Male sample adults 18+ who have taken Propecia regularly for last 3 months  |  |
| Question Text        | What is the main reason you are taking Propecia, Proscar or Finasteride?  |  |
|                      | *Read categories below.   |  |
| Answer Codes         | 1. For problems related to your prostate 2. For male pattern baldness 3. To reduce the chance that you may develop prostate cancer 4. Other reason Refused Don't know |  |
| Question Type        | Pick One - answer pane list   |  |
| Field Pane Descripti | ion   |  |
| Fill Instructions    |   |  |
| Special Instructions | Display answer categories 1-4 in BOLD BLACK text.   |  |
| Skip Instructions    | <1-4,R,D> if AGE ge 40 [goto PSAHAD]<br>elseif AGE = 18-39 [goto genetic testing]   |  |
| Hard Edits           |   |  |
| Soft Edits           |   |  |
| AssocHelp            |   |  |

| Module               | 30  |
|----------------------|---|
| Section Name         | Cancer Screening  |
| Part                 |   |
| Question ID          | NAF.425_01.000  |
| Variable Name        | MEDHRT  |
| Universe             | HHSTAT4='S' and (AGE GE '030' and AGE not IN ('997','999')) and SEX='2' |
| Universe-text        | Female sample adults 30+  |
| Question Text        | Are you currently taking Hormone Replacement Therapy?                   |
| Answer Codes         | 1. Yes 2. No Refused Don't Know   |
| Question Type        | Yes/No  |
| Field Pane Descripti | on  |
| Fill Instructions    |   |
| Special Instructions |   |
| Skip Instructions    | <1> [goto MEDTAMX]<br><2,R,D> [goto HRTEVER]                            |
| Hard Edits           |   |
| Soft Edits           |   |
| AssocHelp            |   |

| Module                 | 30   |  |
|------------------------|--|--|
| Section Name           | Cancer Screening   |  |
| Part                   |  |  |
| Question ID            | NAF.425_02.000   |  |
| Variable Name          | HRTEVER  |  |
| Universe               | HHSTAT4='S' and (AGE GE '030' and AGE not IN ('997','999')) and SEX='2' and MEDHRT(e) IN ('2','7','9') |  |
| Universe-text          | Female sample adults 30+ who are not currently taking HRT  |  |
| Question Text          | Have you ever taken Hormone Replacement Therapy?   |  |
| Answer Codes           | 1. Yes 2. No Refused Don't Know  |  |
| Question Type          | Yes/No   |  |
| Field Pane Description |  |  |
| Fill Instructions      |  |  |
| Special Instructions   |  |  |
| Skip Instructions      | <1> [goto HRTSTOP]<br><2,R,D> [goto MEDTAMX]   |  |
| Hard Edits             |  |  |
| Soft Edits             |  |  |
| AssocHelp              |  |  |

| Module                 | 30   |
|------------------------|--|
| Section Name           | Cancer Screening   |
| Part                   |  |
| Question ID            | NAF.425_03.000   |
| Variable Name          | HRTSTOP  |
| Universe               | HHSTAT4='S' and (AGE GE '030' and AGE not IN ('997','999')) and SEX='2' and HRTEVER(e)='1'   |
| Universe-text          | Female sample adults 30+ who have ever taken HRT but not currently   |
| Question Text          | About how long ago did you stop using Hormone Replacement Therapy was it 2 years ago or less, more than 2 years ago but not more than 5 years, or more than 5 years ago? |
| Answer Codes           | 1. 2 years ago or less 2. more than 2 years ago but not more than 5 years 3. more than 5 years ago Refused Don't know  |
| Question Type          | Pick One - answer pane list  |
| Field Pane Description |  |
| Fill Instructions      |  |
| Special Instructions   |  |
| Skip Instructions      | <1-3,R,D> goto MEDTAMX   |
| Hard Edits             |  |
| Soft Edits             |  |
| AssocHelp              |  |

| Module                 | 30   |
|------------------------|--|
| Section Name           | Cancer Screening   |
| Part                   |  |
| Question ID            | NAF.425_04.000   |
| Variable Name          | MEDTAMX  |
| Universe               | HHSTAT4='S' and (AGE GE '030' and AGE not IN ('997', '999')) and SEX='2' |
| Universe-text          | Female sample adults 30+   |
| Question Text          | Are you currently taking Tamoxifen, also known as Nolvadex?              |
| Answer Codes           | 1. Yes<br>2. No<br>Refused<br>Don't Know                                 |
| Question Type          | Yes/No   |
| Field Pane Description | on   |
| Fill Instructions      |  |
| Special Instructions   |  |
| Skip Instructions      | <1> [goto TAMMAIN]<br><2,R,D> [goto MEDRALX]                             |
| Hard Edits             |  |
| Soft Edits             |  |
| AssocHelp              |  |

| Module                 | 30   |
|------------------------|--|
| Section Name           | Cancer Screening   |
| Part                   |  |
| Question ID            | NAF.425_05.000   |
| Variable Name          | TAMMAIN  |
| Universe               | HHSTAT4='S' and (AGE GE '030' and AGE not IN ('997', '999')) and SEX='2' and MEDTAMX(e)='1'  |
| Universe-text          | Female sample adults 30+ who are currently taking tamoxifen  |
| Question Text          | What is the main reason you are taking tamoxifen?  |
|                        | *Put response into correct category below.   |
| Answer Codes           | 1. As part of your treatment for breast cancer 2. To reduce the chance that you may develop breast cancer 3. Both 4. Other reason Refused Don't know |
| Question Type          | Pick One - answer pane list  |
| Field Pane Description |  |
| Fill Instructions      |  |
| Special Instructions   |  |
| Skip Instructions      | <1-3,R,D> [goto MEDRALX] <4> [goto TAMOXSP]  |
| Hard Edits             |  |
| Soft Edits             |  |
| AssocHelp              |  |

| Module                 | 30   |  |
|------------------------|--|--|
| Section Name           | Cancer Screening   |  |
| Part                   |  |  |
| Question ID            | NAF.425_05.010   |  |
| Variable Name          | TAMOXSP  |  |
| Universe               | HHSTAT4='S' and (AGE GE '030' and AGE not IN ('997','999')) and SEX='2' and TAMMAIN(e)='4' |  |
| Universe-text          | Female sample adults 30+ who are currently taking tamoxifen for other reason               |  |
| Question Text          | *Enter other reason for taking tamoxifen.  |  |
| Answer Codes           | Allow verbatim, R,D  |  |
| Question Type          | Verbatim   |  |
| Field Pane Description |  |  |
| Fill Instructions      |  |  |
| Special Instructions   |  |  |
| Skip Instructions      | <allow 30,r,d=""> [goto MEDRALX]</allow>   |  |
| Hard Edits             |  |  |
| Soft Edits             |  |  |
| AssocHelp              |  |  |

| Module                 | 30  |
|------------------------|---|
| Section Name           | Cancer Screening  |
| Part                   |   |
| Question ID            | NAF.425_06.000  |
| Variable Name          | MEDRALX   |
| Universe               | HHSTAT4='S' and (AGE GE '030' and AGE not IN ('997','999')) and SEX='2'     |
| Universe-text          | Female sample adults 30+  |
| Question Text          | Are you currently taking Raloxifene (rah-LOX-ih-fen), also known as Evista? |
| Answer Codes           | 1. Yes 2. No Refused Don't Know   |
| Question Type          | Yes/No  |
| Field Pane Description | on  |
| Fill Instructions      |   |
| Special Instructions   |   |
| Skip Instructions      | <1> [goto RALXREAS]<br><2,R,D> [goto MEDBC]                                 |
| Hard Edits             |   |
| Soft Edits             |   |
| AssocHelp              |   |

| Module                 | 30  |
|------------------------|---|
| Section Name           | Cancer Screening  |
| Part                   |   |
| Question ID            | NAF.425_07.000  |
| Variable Name          | RALXREAS  |
| Universe               | HHSTAT4='S' and (AGE GE '030' and AGE not IN ('997', '999')) and SEX='2' and MEDRALX(e)='1'   |
| Universe-text          | Female sample adults 30+ who are currently taking raloxifene  |
| Question Text          | What is the main reason you are taking raloxifene?  |
|                        | *Put response into correct category below.  |
| Answer Codes           | 1. As part of my treatment for osteoporosis 2. To reduce the chance that I may develop breast cancer 3. Both 4. Other reason Refused Don't know |
| Question Type          | Pick One - answer pane list   |
| Field Pane Description |   |
| Fill Instructions      |   |
| Special Instructions   |   |
| Skip Instructions      | <1-3,R,D> [goto MEDBC] <4> [goto RALOXSP]   |
| Hard Edits             |   |
| Soft Edits             |   |
| AssocHelp              |   |

| Module                 | 30  |  |
|------------------------|---|--|
| Section Name           | Cancer Screening  |  |
| Part                   |   |  |
| Question ID            | NAF.425_07.010  |  |
| Variable Name          | RALOXSP   |  |
| Universe               | HHSTAT4='S' and (AGE GE '030' and AGE not IN ('997','999')) and SEX='2' and RALXREAS(e)='4' |  |
| Universe-text          | Female sample adults 30+ who are currently taking raloxifen for other reason                |  |
| Question Text          | *Enter other reason for taking raloxifen.   |  |
| Answer Codes           | Allow verbatim, R,D   |  |
| Question Type          | Verbatim  |  |
| Field Pane Description |   |  |
| Fill Instructions      |   |  |
| Special Instructions   |   |  |
| Skip Instructions      | <allow 30,r,d=""> [goto MEDBC]</allow>  |  |
| Hard Edits             |   |  |
| Soft Edits             |   |  |
| AssocHelp              |   |  |

| Module                 | 30  |  |
|------------------------|---|--|
| Section Name           | Cancer Screening  |  |
| Part                   |   |  |
| Question ID            | NAF.425_08.000  |  |
| Variable Name          | MEDBC   |  |
| Universe               | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and SEX='2'                       |  |
| Universe-text          | Female sample adults 18+  |  |
| Question Text          | Are you currently taking birth control pills, birth control implants, or birth control shots? |  |
| Answer Codes           | 1. Yes 2. No Refused Don't Know   |  |
| Question Type          | Yes/No  |  |
| Field Pane Description |   |  |
| Fill Instructions      |   |  |
| Special Instructions   |   |  |
| Skip Instructions      | <1,2,R,D> if AGE ge 40 [goto COLDIS]; elseif AGE=18-39 [goto genetic testing]                 |  |
| Hard Edits             |   |  |
| Soft Edits             |   |  |
| AssocHelp              |   |  |

| Module               | 30   |
|----------------------|--|
| Section Name         | Cancer Screening   |
| Part                 |  |
| Question ID          | NAF.430_00.000   |
| Variable Name        | PSAHAD   |
| Universe             | HHSTAT4='S' and (AGE GE '040' and AGE not IN ('997','999') and SEX='1')  |
| Universe-text        | Male sample adults 40+   |
| Question Text        | Have you EVER HAD a PSA test?  |
|                      | *Read if necessary. A PSA test is a blood test to detect prostate cancer. It is also called a prostate-specific antigen test.                    |
| Answer Codes         | 1. Yes 2. No Refused Don't Know  |
| Question Type        | Yes/No   |
| Field Pane Descripti | on   |
| Fill Instructions    |  |
| Special Instructions | Display the text "A PSA test is a blood test to detect prostate cancer. It is also called a prostate-specific antigen test. " in BOLD GRAY text. |
| Skip Instructions    | <1> [goto RPSA1_MT] <2,R,D> [goto PSAADV]  |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module               | 30   |
|----------------------|--|
| Section Name         | Cancer Screening   |
| Part                 |  |
| Question ID          | NAF.440_00.000   |
| Variable Name        | RPSA1_MT   |
| Universe             | HHSTAT4='S' and (AGE GE '040' and AGE not IN ('997','999')) and SEX='1' and PSAHAD(e)='1'  |
| Universe-text        | Male sample adults 40+ who have had a PSA test   |
| Question Text        | 1 of 2   |
|                      | When did you have your MOST RECENT PSA test?   |
|                      | * Enter month of last PSA test.  |
|                      | * Enter '96' to go to number and time period format.   |
| Answer Codes         | 1. January 2. February 3. March 4. April 5. May 6. June 7. July 8. August 9. September 10. October 11. November 12. December 96. Time period format Refused Don't know |
| Question Type        | Pick One - answer pane list  |
| Field Pane Descripti | on   |
| Fill Instructions    |  |
| Special Instructions | if RPSA1_MT = <r> store 'R' in RPSA1_YR if RPSA1_MT = &lt;96&gt; store '9996' in RPSA1_YR</r>  |
| Skip Instructions    | <1-12,D> [goto RPSA1_YR] <r> store "R' in RPSA1_YR [goto RPSA2] &lt;96&gt; store "9996" in RPSA1_YR [goto RPSA1N]</r>  |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module               | 30  |
|----------------------|---|
| Section Name         | Cancer Screening  |
| Part                 |   |
| Question ID          | NAF.440_01.000  |
| Variable Name        | RPSA1_YR  |
| Universe             | HHSTAT4='S' and (AGE GE '040' and AGE not IN ('997','999')) and SEX='1' and PSAHAD(e)='1' and ('01' <= RPSA1_MT <= '12' or RSPA1_MT='99')   |
| Universe-text        | Male sample adults 40+ who have had a PSA test  |
| Question Text        | 2 of 2  |
|                      | * Enter year of last PSA test.  |
| Answer Codes         |   |
| Question Type        | Integer   |
| Field Pane Descript  | ion   |
| Fill Instructions    |   |
| Special Instructions | Allow 4 character numeric field – must enter 4 numbers  |
| Skip Instructions    | <pre><valid year=""> if RPSA1_YR gt current year or (RPSA1_YR=current year and RPSA1_MT gt current month)   goto ERR1_ RPSA1_YR (future date) elseif RPSA1_YR It DOBY or (RPSA1_YR=DOBY and RPSA1_MT It DOBM)   goto ERR2_ RPSA1_YR (prior to birth date) elseif RPSA1_MT=D   goto RPSA2 elseif RPSA1_MT=1-12   goto PSAREAS <r,d> goto RPSA2</r,d></valid></pre> |
| Hard Edits           | ERR1_ RPSA1_YR  |
|                      | * Future date invalid. Please correct.  |
|                      | ERR2_RPSA1_YR   |
|                      | * Date before birth. Please correct.  |
| Soft Edits           |   |
| AssocHelp            |   |

| Module                 | 30  |  |
|------------------------|---|--|
| Section Name           | Cancer Screening  |  |
| Part                   |   |  |
| Question ID            | NAF.440_02.000  |  |
| Variable Name          | RPSA1N  |  |
| Universe               | HHSTAT4='S' and (AGE GE '040' and AGE not IN ('997','999')) and SEX='1' and PSAHAD(e)='1' and RPSA1_MT(e)='96'                |  |
| Universe-text          | Male sample adults 40+ who have selected number and time period format for most recent PSA test from the initial month screen |  |
| Question Text          | 1 of 2  |  |
|                        | When did you have your MOST RECENT PSA test?  |  |
|                        | * Enter number for time since last PSA test.  |  |
|                        | * Enter '95' for 95 or more.  |  |
| Answer Codes           | Allow 1-95, R, D  |  |
| Question Type          | Integer   |  |
| Field Pane Description |   |  |
| Fill Instructions      |   |  |
| Special Instructions   | if RPSA1N = <r> store 'R' in RPSA1T<br/>if RPSA1N = <d> store 'D' in RPSA1T</d></r>   |  |
| Skip Instructions      | <1-95> [goto RPSA1T] <r,d> store "R,D" in RPSA1T [goto RPSA2]</r,d>   |  |
| Hard Edits             |   |  |
| Soft Edits             |   |  |
| AssocHelp              |   |  |

| Module               | 30  |
|----------------------|---|
| Section Name         | Cancer Screening  |
| Part                 |   |
| Question ID          | NAF.440_03.000  |
| Variable Name        | RPSA1T  |
| Universe             | HHSTAT4='S' and (AGE GE '040' and AGE not IN ('997','999')) and SEX='1' and PSAHAD(e)='1' and RPSA1_MT(e)='96' and ('01' <= RPSA1N <= '95')   |
| Universe-text        | Male sample adults 40+ who answered 1-95 for number part of this 2 part question  |
| Question Text        | 2 of 2  |
|                      | * Enter time period for time since most recent PSA test.  |
| Answer Codes         | 1. Days ago 2. Weeks ago 3. Months ago 4. Years ago Refused Don't know  |
| Question Type        | Pick One - answer pane list   |
| Field Pane Descripti | on  |
| Fill Instructions    |   |
| Special Instructions | If RPSA1N gt 5 and RPSA1T=4, store '5' in RPSA2.  |
|                      | If RPSA1N=4 and RPSA1T=4, store '4' in RPSA2.   |
| Skip Instructions    | <1-3> goto PSAREAS <4> if RPSA1N=4 set RPSA2=4 goto PSAREAS elseif RPSA1N gt 5 and RPSA1N gt AGE goto ERR_RPSA1T (greater than persons age) elseif RPSA1N gt 5 and RPSA1N le AGE set RPSA2=5 goto PSAREAS elseif RPSA1N=1,2,3,5 goto RPSA2 <r,d> goto RPSA2</r,d> |
| Hard Edits           | ERR_RPSA1T  |
|                      | * Time since last exam cannot be greater than age. * Please correct.  |
| Soft Edits           |   |
| AssocHelp            |   |

| Module               | 30   |
|----------------------|--|
| Section Name         | Cancer Screening   |
| Part                 |  |
| Question ID          | NAF.440_04.000   |
| Variable Name        | RPSA2  |
| Universe             | HHSTAT4='S' and (AGE GE '040' and AGE not IN ('997','999')) and SEX='1' and PSAHAD(e)='1' and (RPSA1_MT(e) IN ('97','98','99') or RPSA1_YR(e) IN ('9997','9998','9999') or RPSA1N(e) IN ('97','98','99') or RPSA1T(e) IN ('7','8','9') or (RPSA1T(e) = '4' and RPSA1N IN ('1','2','3','5'))) |
| Universe-text        | Male sample adults 40+ who failed to give a complete date in either the month or year format or failed to give a complete date in the number and time period format, or entered years ago in the time period format (excluding those whose last PSA test was over 5 years ago)               |
| Question Text        | Was it:  |
|                      | *Read answer categories.   |
| Answer Codes         | 1. A year ago or less 2. More than 1 year but not more than 2 years 3. More than 2 years but not more than 3 years 4. More than 3 years but not more than 5 years 5. Over 5 years ago Refused Don't know   |
| Question Type        | Pick One - answer pane list  |
| Field Pane Descripti | on   |
| Fill Instructions    |  |
| Special Instructions | Display answer categories 1-5 in BOLD BLACK text.  |
|                      | If RPSA1N gt 5 and RPSA1T=4, store '5' in RPSA2 and don't ask question.  |
|                      | If RPSA1N=4 and RPSA1T=4, store '4' in RPSA2 and don't ask question.   |
|                      | Based upon prior answers: if RPSA1N = 1 and RPSA1T = '4', gray out answer codes 3,4,5 if RPSA1N = 2 and RPSA1T = '4', gray out answer codes 1,4,5 if RPSA1N = 3 and RPSA1T = '4', gray out answer codes 1,2,5 if RPSA1N = 5 and RPSA1T = '4', gray out answer codes 1,2,3                    |
| Skip Instructions    | <1-5,R,D> if answer code is grayed out [goto ERR_RPSA2] else [goto PSAREAS]  |
| Hard Edits           | ERR_RPSA2  |
|                      | *That is not a valid response. *Please correct.  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module                 | 30   |  |
|------------------------|--|--|
| Section Name           | Cancer Screening   |  |
| Part                   |  |  |
| Question ID            | NAF.441_00.000   |  |
| Variable Name          | PSAREAS  |  |
| Universe               | HHSTAT4='S' and (AGE GE '040' and AGE not IN ('997','999')) and SEX='1' and PSAHAD(e)='1'                                  |  |
| Universe-text          | Male sample adults 40+ who have had a PSA test   |  |
| Question Text          | What was the MAIN reaso you had this PSA test - was it part of a routine exam, because of a problem, or some other reason? |  |
| Answer Codes           | 1. Part of a routine exam 2. Because of a problem 3. Other reason Refused Don't know                                       |  |
| Question Type          | Pick One - answer pane list  |  |
| Field Pane Description |  |  |
| Fill Instructions      |  |  |
| Special Instructions   |  |  |
| Skip Instructions      | <1-3,R,D> [goto PSASUGG]   |  |
| Hard Edits             |  |  |
| Soft Edits             |  |  |
| AssocHelp              |  |  |

| Module                 | 30  |
|------------------------|---|
| Section Name           | Cancer Screening  |
| Part                   |   |
| Question ID            | NAF.445_00.000  |
| Variable Name          | PSASUGG   |
| Universe               | HHSTAT4='S' and (AGE GE '040' and AGE not IN ('997','999')) and SEX='1' and PSAHAD(e)='1' |
| Universe-text          | Male sample adults 40+ who have had a PSA test  |
| Question Text          | Who first suggested the PSA test: you, your doctor, or someone else?                      |
| Answer Codes           | 1. Self 2. Doctor 3. Someone else Refused Don't know                                      |
| Question Type          | Pick One - answer pane list   |
| Field Pane Description | on  |
| Fill Instructions      |   |
| Special Instructions   |   |
| Skip Instructions      | <1-3,R,D> [goto PSA5YR]   |
| Hard Edits             |   |
| Soft Edits             |   |
| AssocHelp              |   |

| Module                 | 30  |
|------------------------|---|
| Section Name           | Cancer Screening  |
| Part                   |   |
| Question ID            | NAF.450_00.000  |
| Variable Name          | PSA5YR  |
| Universe               | HHSTAT4='S' and (AGE GE '040' and AGE not IN ('997','999')) and SEX='1' and PSAHAD(e)='1' |
| Universe-text          | Male sample adults 40+ who have had a PSA test  |
| Question Text          | How many PSA tests have you had in the LAST 5 years?                                      |
|                        | *Enter '0' for none.  |
|                        | *Enter '95" for 95 or more PSA tests.   |
| Answer Codes           | Allow 0-95, R,D   |
| Question Type          | Integer   |
| Field Pane Description | on  |
| Fill Instructions      |   |
| Special Instructions   |   |
| Skip Instructions      | <0-95,R,D> [goto PSAADV]  |
| Hard Edits             |   |
| Soft Edits             |   |
| AssocHelp              |   |

| Module                 | 30  |  |
|------------------------|---|--|
| Section Name           | Cancer Screening  |  |
| Part                   |   |  |
| Question ID            | NAF.455_00.000  |  |
| Variable Name          | PSAADV  |  |
| Universe               | HHSTAT4='S' and (AGE GE '040' and AGE not IN ('997','999')) and SEX='1'   |  |
| Universe-text          | Male sample adults 40+  |  |
| Question Text          | [fill 1: Before you had the PSA test did/Did] a doctor EVER talk with you about the advantages of [fill 2: it/the PSA test]?        |  |
| Answer Codes           | 1. Yes 2. No Refused Don't Know   |  |
| Question Type          | Yes/No  |  |
| Field Pane Description |   |  |
| Fill Instructions      | [fill 1] If PSAHAD=1 fill "Before you had the PSA test did" else fill "Did" [fill 2] if PSAHAD=1 fill "it" else fill "the PSA test" |  |
| Special Instructions   |   |  |
| Skip Instructions      | <1,2,R,D> [goto PSADISAV]   |  |
| Hard Edits             |   |  |
| Soft Edits             |   |  |
| AssocHelp              |   |  |

| Module                 | 30  |  |
|------------------------|---|--|
| Section Name           | Cancer Screening  |  |
| Part                   |   |  |
| Question ID            | NAF.460_00.000  |  |
| Variable Name          | PSADISAV  |  |
| Universe               | HHSTAT4='S' and (AGE GE '040' and AGE not IN ('997','999')) and SEX='1'   |  |
| Universe-text          | Male sample adults 40+  |  |
| Question Text          | [fill 1: Before you had the PSA test did/Did] a doctor EVER talk with you about the disadvantages of [fill 2: it/the PSA test]?     |  |
| Answer Codes           | 1. Yes 2. No Refused Don't Know   |  |
| Question Type          | Yes/No  |  |
| Field Pane Description |   |  |
| Fill Instructions      | [fill 1] If PSAHAD=1 fill "Before you had the PSA test did" else fill "Did" [fill 2] if PSAHAD=1 fill "it" else fill "the PSA test" |  |
| Special Instructions   |   |  |
| Skip Instructions      | <1,2,R,D> [goto PSAEXP]   |  |
| Hard Edits             |   |  |
| Soft Edits             |   |  |
| AssocHelp              |   |  |

| Module               | 30   |
|----------------------|--|
| Section Name         | Cancer Screening   |
| Part                 |  |
| Question ID          | NAF.470_00.000   |
| Variable Name        | PSAEXP   |
| Universe             | HHSTAT4='S' and (AGE GE '040' and AGE not IN ('997', '999')) and SEX='1'   |
| Universe-text        | Male sample adults 40+   |
| Question Text        | [fill 1: Before you had the PSA test did/Did] a doctor EVER tell you that some experts disagree about whether men should have PSA tests? |
| Answer Codes         | 1. Yes 2. No Refused Don't Know  |
| Question Type        | Yes/No   |
| Field Pane Descripti | on   |
| Fill Instructions    | [fill 1] If PSAHAD=1 fill "Before you had the PSA test did" else fill "Did"  |
| Special Instructions |  |
| Skip Instructions    | <1,2,R,D> [goto COLDIS]  |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module                 | 30   |  |
|------------------------|--|--|
| Section Name           | Cancer Screening   |  |
| Part                   |  |  |
| Question ID            | NAF.500_00.000   |  |
| Variable Name          | COLDIS   |  |
| Universe               | HHSTAT4='S' and (AGE GE '040' and AGE not IN ('997', '999'))   |  |
| Universe-text          | Sample adults 40+  |  |
| Question Text          | Have you and your doctor or other health professional ever DISCUSSED getting a test to check for colon cancer? |  |
| Answer Codes           | 1. Yes 2. No Refused Don't Know  |  |
| Question Type          | Yes/No   |  |
| Field Pane Description |  |  |
| Fill Instructions      |  |  |
| Special Instructions   |  |  |
| Skip Instructions      | <1,2,R,D> [goto COLHAD]  |  |
| Hard Edits             |  |  |
| Soft Edits             |  |  |
| AssocHelp              |  |  |

| Module               | 30  |  |
|----------------------|---|--|
| Section Name         | Cancer Screening  |  |
| Part                 |   |  |
| Question ID          | NAF.540_00.000  |  |
| Variable Name        | COLHAD  |  |
| Universe             | HHSTAT4='S' and (AGE GE '040' and AGE not IN ('997','999'))   |  |
| Universe-text        | Sample adults 40+   |  |
| Question Text        | There are several different kinds of tests to check for colon cancer. Colonoscopy (colon-OS-copy) and sigmoidoscopy (sigmoid-OS-copy) are exams in which a doctor inserts a tube into the rectum to look for polyps or cancer. For a colonoscopy, the doctor checks the entire colon, and you are given medication through a needle in your arm to make you sleepy, and told to have someone drive you home. For a Sigmoidoscopy, the doctor checks only part of the colon and you are fully awake.  Have you EVER HAD a colonoscopy?  *Read if necessary:  A polyp is a small growth that develops on the inside of the colon or rectum. |  |
|                      | Before these tests, you are asked to take a medication that causes diarrhea.  |  |
| Answer Codes         | 1. Yes 2. No Refused Don't Know   |  |
| Question Type        | Yes/No  |  |
| Field Pane Descripti | on  |  |
| Fill Instructions    |   |  |
| Special Instructions | Display the text "A polyp is a small growth that develops on the inside of the colon or rectum." in BOLD GRAY text.   |  |
|                      | Display the text "Before these tests, you are asked to take a medication that causes diarrhea." in BOLD GRAY text.  |  |
| Skip Instructions    | <1> [goto COL_MT] <2,R,D> [goto SIGHAD]   |  |
| Hard Edits           |   |  |
| Soft Edits           |   |  |
| AssocHelp            |   |  |

| Module               | 30   |
|----------------------|--|
| Section Name         | Cancer Screening   |
| Part                 |  |
| Question ID          | NAF.560_01.000   |
| Variable Name        | COL_MT   |
| Universe             | HHSTAT4='S' and (AGE GE '040' and AGE not IN ('997','999')) and COLHAD(e)='1'  |
| Universe-text        | Sample adults 40+ who have ever had a colonoscopy  |
| Question Text        | 1 of 2   |
|                      | When did you have your MOST RECENT colonoscopy?  |
|                      | *Enter month of last exam.   |
|                      | *Enter '96' to go to number and time period format.  |
| Answer Codes         | 1. January 2. February 3. March 4. April 5. May 6. June 7. July 8. August 9. September 10. October 11. November 12. December 96. Time period format Refused Don't know |
| Question Type        | Pick One - answer pane list  |
| Field Pane Descripti | on   |
| Fill Instructions    |  |
| Special Instructions | if COL_MT = <r> store 'R' in COL_YR<br/>if COL_MT = &lt;96&gt; store '9996' in COL_YR</r>  |
| Skip Instructions    | <1-12,D> [goto COL_YR] <r> store "R' in COL_YR [goto COL2] &lt;96&gt; store "9996" in COL_YR [goto COLN]</r>   |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module               | 30  |  |
|----------------------|---|--|
| Section Name         | Cancer Screening  |  |
| Part                 |   |  |
| Question ID          | NAF.560_02.000  |  |
| Variable Name        | COL_YR  |  |
| Universe             | HHSTAT4='S' and (AGE GE '040' and AGE not IN ('997','999')) and COLHAD(e)='1' and ('01' <= COL_MT <= '12' or COL_MT='99')   |  |
| Universe-text        | Sample adults age 40+ who answered month of last colonoscopy or didn't know month of last colonoscopy   |  |
| Question Text        | 2 of 2  |  |
|                      | *Enter year of last colonoscopy.  |  |
| Answer Codes         |   |  |
| Question Type        | Integer   |  |
| Field Pane Descripti | ion [   |  |
| Fill Instructions    |   |  |
| Special Instructions | Allow 4 character numeric field – must enter 4 numbers  |  |
| Skip Instructions    | <pre><valid year=""> if COL_YR gt current year or (COL_YR=current year and COL_MT gt current month)   goto ERR1_ COL_YR (future date) elseif COL_YR It DOBY or (COL_YR=DOBY and COL_MT It DOBM)   goto ERR2_ COL_YR (prior to birth date) elseif COL_MT=D   goto COL2 elseif COL_MT=1-12   goto COLREAS <r,d> goto COL2</r,d></valid></pre> |  |
| Hard Edits           | ERR1_COL_YR   |  |
|                      | * Future date invalid. Please correct.  |  |
|                      | ERR2_COL_YR   |  |
|                      | * Date before birth. Please correct.  |  |
| Soft Edits           |   |  |
| AssocHelp            |   |  |

| Module                 | 30   |
|------------------------|--|
| Section Name           | Cancer Screening   |
| Part                   |  |
| Question ID            | NAF.570_01.000   |
| Variable Name          | COLN   |
| Universe               | HHSTAT4='S' and (AGE GE '040' and AGE not IN ('997','999')) and COLHAD(e)='1' and COL_MT(e)='96'                       |
| Universe-text          | Sample adults 40+ who selected number and time period format for most recent colonoscopy from the initial month screen |
| Question Text          | 1 of 2   |
|                        | When did you have your MOST RECENT colonoscopy?  |
|                        | *Enter number for time since last colonoscopy.   |
|                        | *Enter '95' for 95 or more.  |
| Answer Codes           | Allow 1-95, R, D   |
| Question Type          | Integer  |
| Field Pane Description |  |
| Fill Instructions      |  |
| Special Instructions   | if COLN = <r> store 'R' in COLT  If COLN = <d> store 'D' in COLT</d></r>   |
| Skip Instructions      | <1-95> [goto COLT] <r,d> store "R,D" in COLT [goto COL2]</r,d>   |
| Hard Edits             |  |
| Soft Edits             |  |
| AssocHelp              |  |

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30
Module
                     Cancer Screening
Section Name
Part
Question ID
                     NAF.570_02.000
Variable Name
                     COLT
                     HHSTAT4='S' and (AGE GE '040' and AGE not IN ('997', '999')) and COLHAD(e)='1'
Universe
                     and COL_MT(e)='96' and ('01' <= COLN <= '95')
                     Sample adults 40+ who answered 1-95 for number part of this 2 part question
Universe-text
                     2 of 2
Question Text
                     *Enter time period for time since most recent colonoscopy.
Answer Codes
                     1. Days ago
                     2. Weeks ago
                     3. Months ago
                     4. Years ago
                     Refused
                     Don't know
Question Type
                     Pick One - answer pane list
Field Pane Description
Fill Instructions
                    If COLN gt 10 and COLT=4, store '6' in COL2.
Special Instructions
                     If COLN=6,7,8,9 and COLT=4, store '5' in COL2.
                     If COLN=4 and COLT=4, store '4' in COL2.
                     <1-3> goto COLREAS
Skip Instructions
                     <4> if COLN=4
                          set COL2=4
                          goto COLREAS
                         elseif COLN=6,7,8,9
                          set COL2=5
                           goto COLREAS
                         elseif COLN gt 10 and COLN gt AGE
                           goto ERR COLT (greater than persons age)
                         elseif COLN gt 10 and COLN le AGE
                          set COL2=6
                           goto COLREAS
                         elseif COLN=1,2,3,5,10
                          goto COL2
                     <R,D> goto COL2
                     ERR_COLT
Hard Edits
                     * Time since last exam cannot be greater than age.
                     * Please correct.
Soft Edits
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| AssocHelp |  |  |
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30 **Module Cancer Screening** Section Name Part Question ID NAF.575 00.000 Variable Name COL<sub>2</sub> HHSTAT4='S' and (AGE GE '040' and AGE not IN ('997', '999')) and COLHAD(e)='1' Universe and (COL\_MT(e) IN ('97','98','99') or COL\_YR(e) IN ('9997','9998','9999') or COLN(e) IN ('97', '98', '99') or COLT(e) IN ('7', '8', '9') or (COLT(e)='4' and COLN IN ('1','2','3','5','10'))) Sample adults 40+ who failed to give a complete date in either the month or year format Universe-text or failed to give a complete date in the number and time period format, or entered years ago in the time period format (excluding those whose last colonoscopy was 6-9 or over 10 years ago) Was it: **Ouestion Text** \*Read answer categories. **Answer Codes** 1. A year ago or less 2. More than 1 year but not more than 2 years 3. More than 2 years but not more than 3 years 4. More than 3 years but not more than 5 years 5. More than 5 years but not more than 10 years 6. Over 10 years ago Refused Don't know **Ouestion Type** Pick One - answer pane list Field Pane Description Fill Instructions Display answer categories 1-6 in BOLD BLACK text. **Special Instructions** If COLN gt 10 and COLT=4, store '6' in COL2 and don't ask question. If COLN=6,7,8,9 and COLT=4, store '5' in COL2 and don't ask question. If COLN=4 and COLT=4, store '4' in COL2 and don't ask question. Based upon prior answers: if COLN = 1 and COLT = '4', gray out answer codes 3,4,5,6 if COLN = 2 and COLT = '4', gray out answer codes 1,4,5,6 if COLN = 3 and COLT = '4', gray out answer codes 1,2,5,6 if COLN = 5 and COLT = '4', gray out answer codes 1,2,3,6 if COLN = 10 and COLT = '4', gray out answer codes 1,2,3,4 <1-6,R,D> if answer code is grayed out [goto ERR\_COL2] else [goto COLREAS] Skip Instructions ERR COL2 Hard Edits \*That is not a valid response.

\*Please correct.

| Soft Edits             |  |
|------------------------|--|
| AssocHelp              |  |
| Module                 | 30   |
| Section Name           | Cancer Screening   |
| Part                   |  |
| Question ID            | NAF.590_00.000   |
| Variable Name          | COLREAS  |
| Universe               | HHSTAT4='S' and (AGE GE '040' and AGE not IN ('997', '999')) and COLHAD(e)='1'   |
| Universe-text          | Sample adults 40+ who have had a colonoscopy   |
| Question Text          | What was the MAIN reason you had this colonoscopy - was it part of a routine exam, because of a problem, as a follow-up test of an earlier test or screening exam, or some other reason? |
| Answer Codes           | 1. Part of a routine exam 2. Because of a problem 3. Follow-up test of an earlier test or screening exam 4. Other reason Refused Don't know  |
| Question Type          | Pick One - answer pane list  |
| Field Pane Description |  |
| Fill Instructions      |  |
| Special Instructions   |  |
| Skip Instructions      | <1-4,R,D> [goto COLPAY]  |
| Hard Edits             |  |
| Soft Edits             |  |
| AssocHelp              |  |

| Module                 | 30   |  |
|------------------------|--|--|
| Section Name           | Cancer Screening   |  |
| Part                   |  |  |
| Question ID            | NAF.590_00.010   |  |
| Variable Name          | COLPAY   |  |
| Universe               | HHSTAT4='S' and (AGE GE '040' and AGE not IN ('997', '999')) and COLHAD(e)='1'                 |  |
| Universe-text          | Sample adults 40+ who who have ever had a colonoscopy  |  |
| Question Text          | How much did you pay out of pocket for this colonoscopy was it NONE, PART, or ALL of the cost? |  |
| Answer Codes           | 1. None of the cost 2. Part of the cost 3. All of the cost Refused Don't Know                  |  |
| Question Type          | Pick one-answer list pane  |  |
| Field Pane Description |  |  |
| Fill Instructions      |  |  |
| Special Instructions   |  |  |
| Skip Instructions      | <1-3,R,D> [goto SIGHAD]  |  |
| Hard Edits             |  |  |
| Soft Edits             |  |  |
| AssocHelp              |  |  |

| Module                 | 30   |  |
|------------------------|--|--|
| Section Name           | Cancer Screening   |  |
| Part                   |  |  |
| Question ID            | NAF.591_00.000   |  |
| Variable Name          | SIGHAD   |  |
| Universe               | HHSTAT4='S' and (AGE GE '040' and AGE not IN ('997', '999'))   |  |
| Universe-text          | Sample adults 40+  |  |
| Question Text          | Recall that a sigmoidoscopy is similar to a colonoscopy but the doctor checks only part of the colon and you are fully awake. Have you EVER HAD a sigmoidoscopy? |  |
| Answer Codes           | 1. Yes 2. No Refused Don't Know  |  |
| Question Type          | Yes/No   |  |
| Field Pane Description |  |  |
| Fill Instructions      |  |  |
| Special Instructions   |  |  |
| Skip Instructions      | <1> [goto SIG_MT] <2,R,D> [goto CTHEARD]   |  |
| Hard Edits             |  |  |
| Soft Edits             |  |  |
| AssocHelp              |  |  |

| Module                 | 30   |
|------------------------|--|
| Section Name           | Cancer Screening   |
| Part                   |  |
| Question ID            | NAF.592_01.000   |
| Variable Name          | SIG_MT   |
| Universe               | HHSTAT4='S' and (AGE GE '040' and AGE not IN ('997', '999')) and SIGHAD(e)='1'   |
| Universe-text          | Sample adults 40+ who have ever had a sigmoidoscopy  |
| Question Text          | 1 of 2   |
|                        | When did you have your MOST RECENT sigmoidoscopy?  |
|                        | *Enter month of last exam.   |
|                        | *Enter '96' to go to number and time period format.  |
| Answer Codes           | 1. January 2. February 3. March 4. April 5. May 6. June 7. July 8. August 9. September 10. October 11. November 12. December 96. Time period format Refused Don't know |
| Question Type          | Pick One - answer pane list  |
| Field Pane Description | on   |
| Fill Instructions      |  |
| Special Instructions   | if SIG_MT = <r> store 'R' in SIG_YR if SIG_MT = &lt;96&gt; store '9996' in SIG_YR</r>  |
| Skip Instructions      | <1-12,D> [goto SIG_YR] <r> store "R' in SIG_YR [goto SIG2] &lt;96&gt; store "9996" in SIG_YR [goto SIGN]</r>   |
| Hard Edits             |  |
| Soft Edits             |  |
| AssocHelp              |  |

| Module               | 30  |
|----------------------|---|
| Section Name         | Cancer Screening  |
| Part                 |   |
| Question ID          | NAF.593_02.000  |
| Variable Name        | SIG_YR  |
| Universe             | HHSTAT4='S' and (AGE GE '040' and AGE not IN ('997','999')) and SIGHAD(e)='1' and ('01' <= SIG_MT <= '12' or SIG_MT='99')   |
| Universe-text        | Sample adults age 40+ who answered month of last sigmoidoscopy or didn't know month of last sigmoidoscopy   |
| Question Text        | 2 of 2  |
|                      | *Enter year of last sigmoidoscopy.  |
| Answer Codes         |   |
| Question Type        | Integer   |
| Field Pane Descripti | ion   |
| Fill Instructions    |   |
| Special Instructions | Allow 4 character numeric field – must enter 4 numbers  |
| Skip Instructions    | <pre><valid year=""> if SIG_YR gt current year or (SIG_YR=current year and SIG_MT gt current month)    goto ERR1_ SIG_YR (future date) elseif SIG_YR It DOBY or (SIG_YR=DOBY and SIG_MT It DOBM)    goto ERR2_ SIG_YR (prior to birth date) elseif SIG_MT=D    goto SIG2 elseif SIG_MT=1-12    goto SIGREAS <r,d> goto SIG2</r,d></valid></pre> |
| Hard Edits           | ERR1_SIG_YR   |
|                      | * Future date invalid. Please correct.  |
|                      | ERR2_SIG_YR   |
|                      | * Date before birth. Please correct.  |
| Soft Edits           |   |
| AssocHelp            |   |

| Module               | 30   |
|----------------------|--|
| Section Name         | Cancer Screening   |
| Part                 |  |
| Question ID          | NAF.594_01.000   |
| Variable Name        | SIGN   |
| Universe             | <code>HHSTAT4='S'</code> and (AGE GE '040' and AGE not IN ('997','999')) and SIGHAD(e)='1' and SIG_MT(e)='96'            |
| Universe-text        | Sample adults 40+ who selected number and time period format for most recent sigmoidoscopy from the initial month screen |
| Question Text        | 1 of 2   |
|                      | When did you have your MOST RECENT sigmoidoscopy?  |
|                      | *Enter number for time since last sigmoidoscopy.   |
|                      | *Enter '95' for 95 or more.  |
| Answer Codes         | Allow 1-95, R, D   |
| Question Type        | Integer  |
| Field Pane Descripti | on   |
| Fill Instructions    |  |
| Special Instructions | if SIGN = <r> store 'R' in SIGT If SIGN = <d> store 'D' in SIGT</d></r>  |
| Skip Instructions    | <1-95> [goto SIGT] <r,d> store "R,D" in SIGT [goto SIG2]</r,d>   |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

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30
Module
                     Cancer Screening
Section Name
Part
Question ID
                     NAF.595_02.000
Variable Name
                     SIGT
                     HHSTAT4='S' and (AGE GE '040' and AGE not IN ('997', '999')) and SIGHAD(e)='1' and
Universe
                     SIG_MT(e)='96' and ('01' <= SIGN <= '95')
                     Sample adults 40+ who answered 1-95 for number part of this 2 part question
Universe-text
                     2 of 2
Question Text
                     *Enter time period for time since most recent sigmoidoscopy.
Answer Codes
                     1. Days ago
                     2. Weeks ago
                     3. Months ago
                     4. Years ago
                     Refused
                     Don't know
Question Type
                     Pick One - answer pane list
Field Pane Description
Fill Instructions
                    If SIGN gt 10 and SIGT=4, store '6' in SIG2.
Special Instructions
                     If SIGN=6,7,8,9 and SIGT=4, store '5' in SIG2.
                     If SIGN=4 and SIGT=4, store '4' in SIG2.
                     <1-3> goto SIGREAS
Skip Instructions
                     <4> if SIGN=4
                           set SIG2=4
                           goto SIGREAS
                         elseif SIGN=6,7,8,9
                           set SIG2=5
                           goto SIGREAS
                         elseif SIGN gt 10 and SIGN gt AGE
                           goto ERR SIGT (greater than persons age)
                         elseif SIGN gt 10 and SIGN le AGE
                           set SIG2=6
                           goto SIGREAS
                         elseif SIGN=1,2,3,5,10
                           goto SIG2
                     <R,D> goto SIG2
                     ERR_SIGT
Hard Edits
                     * Time since last exam cannot be greater than age.
                     * Please correct.
Soft Edits
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30 **Module Cancer Screening** Section Name Part Question ID NAF.596 00.000 Variable Name SIG2 HHSTAT4='S' and (AGE GE '040' and AGE not IN ('997','999')) and SIGHAD(e)='1' and Universe (SIG\_MT(e) IN ('97','98','99') or SIG\_YR(e) IN ('9997','9998','9999') or SIGN(e) IN ('97', '98', '99') or SIGT(e) IN ('7', '8', '9') or (SIGT(e)='4' and SIGN IN ('1', '2', '3', '5', '10'))) Sample adults 40+ who failed to give a complete date in either the month or year format Universe-text or failed to give a complete date in the number and time period format, or entered years ago in the time period format (excluding those whose last sigmoidoscopy was 6-9 or over 10 years ago) Was it: Question Text \*Read answer categories. Answer Codes 1. A year ago or less 2. More than 1 year but not more than 2 years 3. More than 2 years but not more than 3 years 4. More than 3 years but not more than 5 years 5. More than 5 years but not more than 10 years 6. Over 10 years ago Refused Don't know **Question** Type Pick One - answer pane list Field Pane Description Fill Instructions Display answer categories 1-6 in BOLD BLACK text. **Special Instructions** If SIGN gt 10 and SIGT=4, store '6' in SIG2 and don't ask question. If SIGN=6,7,8,9 and SIGT=4, store '5' in SIG2 and don't ask question. If SIGN=4 and SIGT=4, store '4' in SIG2 and don't ask question. Based upon prior answers: if SIGN = 1 and SIGT = '4', gray out answer codes 3,4,5,6 if SIGN = 2 and SIGT = '4', gray out answer codes 1,4,5,6 if SIGN = 3 and SIGT = '4', gray out answer codes 1,2,5,6 if SIGN = 5 and SIGT = '4', gray out answer codes 1,2,3,6 if SIGN = 10 and SIGT = '4', gray out answer codes 1,2,3,4 <1-6,R,D> if answer code is grayed out {goto ERR\_SIG2} else [goto SIGREAS] Skip Instructions ERR\_SIG2 Hard Edits \*That is not a valid response. \*Please correct.

Soft Edits

| AssocHelp              |  |
|------------------------|--|
| Module                 | 30   |
| Section Name           | Cancer Screening   |
| Part                   |  |
| Question ID            | NAF.597_00.000   |
| Variable Name          | SIGREAS  |
| Universe               | HHSTAT4='S' and (AGE GE '040' and AGE not IN ('997', '999')) and SIGHAD(e)='1'   |
| Universe-text          | Sample adults 40+ who have had a sigmoidoscopy   |
| Question Text          | What was the MAIN reason you had this sigmoidoscopy - was it part of a routine exam, because of a problem, as a follow-up test of an earlier test or screening exam, or some other reason? |
| Answer Codes           | 1. Part of a routine exam 2. Because of a problem 3. Follow-up test of an earlier test or screening exam 4. Other reason Refused Don't know  |
| Question Type          | Pick One - answer pane list  |
| Field Pane Description |  |
| Fill Instructions      |  |
| Special Instructions   |  |
| Skip Instructions      | <1-4,R,D> [goto CTHEARD]   |
| Hard Edits             |  |
| Soft Edits             |  |
| AssocHelp              |  |

| Module               | 30  |
|----------------------|---|
| Section Name         | Cancer Screening  |
| Part                 |   |
| Question ID          | NAF.611_00.000  |
| Variable Name        | CTHEARD   |
| Universe             | HHSTAT4='S' and (AGE GE '040' and AGE not IN ('997', '999'))  |
| Universe-text        | Sample adults 40+   |
| Question Text        | CT colonography, sometimes called virtual colonoscopy, is a new type of test that looks for cancer in the colon. Unlike regular colonoscopies, you do not need medication to make you sleepy during the test. In this new test, your colon is filled with air and you are moved through a donut-shaped X-ray machine as you lie on your back and then your stomach.  Before today, HAD YOU EVER HEARD of CT colonography or virtual colonoscopy?  *Read if necessary: |
|                      | This is not the same as a colonoscopy or a sigmoidoscopy.   |
|                      | Unlike CT tests for other purposes, you DO take laxatives to clean out your colon for this test.  |
| Answer Codes         | 1. Yes 2. No Refused Don't Know   |
| Question Type        | Yes/No  |
| Field Pane Descripti | on  |
| Fill Instructions    |   |
| Special Instructions | Display the text "This is not the same as a colonoscopy or a sigmoidoscopy. " in BOLD GRAY text.  |
|                      | Display the text " Unlike CT tests for other purposes, you DO take laxatives to clean out your colon for this test." in BOLD GRAY text.   |
| Skip Instructions    | <1> [goto CTHADEV]<br><2,R,D> [goto POLYP]  |
| Hard Edits           |   |
| Soft Edits           |   |
| AssocHelp            |   |

| Module                 | 30  |
|------------------------|---|
| Section Name           | Cancer Screening  |
| Part                   |   |
| Question ID            | NAF.612_00.000  |
| Variable Name          | CTHADEV   |
| Universe               | HHSTAT4='S' and (AGE GE '040' and AGE not IN ('997','999')) and CTHEARD(e)='1'      |
| Universe-text          | Sample adults 40+ who have ever heard of a CT colonography or a virtual colonoscopy |
| Question Text          | Have you EVER HAD a CT colonography or virtual colonoscopy?                         |
| Answer Codes           | 1. Yes 2. No Refused Don't Know   |
| Question Type          | Yes/No  |
| Field Pane Description |   |
| Fill Instructions      |   |
| Special Instructions   |   |
| Skip Instructions      | <1> [goto CT_MT] <2,R,D> [goto POLYP]   |
| Hard Edits             |   |
| Soft Edits             |   |
| AssocHelp              |   |

| Module                 | 30   |
|------------------------|--|
| Section Name           | Cancer Screening   |
| Part                   |  |
| Question ID            | NAF.613_01.000   |
| Variable Name          | CT_MT  |
| Universe               | HHSTAT4='S' and (AGE GE '040' and AGE not IN ('997', '999')) and CTHADEV(e)='1'  |
| Universe-text          | Sample adults 40+ who have ever had a CT colonography or virtual colonoscopy   |
| Question Text          | 1 of 2   |
|                        | When did you have your MOST RECENT CT colonography or virtual colonoscopy?   |
|                        | *Enter month of last CT colonography or virtual colonoscopy.   |
|                        | *Enter '96' to go to number and time period format.  |
| Answer Codes           | 1. January 2. February 3. March 4. April 5. May 6. June 7. July 8. August 9. September 10. October 11. November 12. December 96. Time period format Refused Don't know |
| Question Type          | Pick One - answer pane list  |
| Field Pane Description | on   |
| Fill Instructions      |  |
| Special Instructions   | if CT_MT = <r> store 'R' in CT_YR<br/>if CT_MT = &lt;96&gt; store '9996' in CT_YR</r>  |
| Skip Instructions      | <1-12,D> [goto CT_YR] <r> store "R' in CT_YR [goto CT2] &lt;96&gt; store "9996" in CT_YR [goto CTN]</r>  |
| Hard Edits             |  |
| Soft Edits             |  |
| AssocHelp              |  |

| Module               | 30   |
|----------------------|--|
| Section Name         | Cancer Screening   |
| Part                 |  |
| Question ID          | NAF.614_02.000   |
| Variable Name        | CT_YR  |
| Universe             | HHSTAT4='S' and (AGE GE '040' and AGE not IN ('997','999')) and CTHADEV(e)='1' and ('01' <= CT_MT <= '12' or CT_MT='99')   |
| Universe-text        | Sample adults age 40+ who answered month of last CT colonography or virtual colonoscopy or didn't know month of last CT colonography or virtual colonoscopy  |
| Question Text        | 2 of 2   |
|                      | *Enter year of last CT colonography or virtual colonoscopy.  |
| Answer Codes         |  |
| Question Type        | Integer  |
| Field Pane Descripti | ion  |
| Fill Instructions    |  |
| Special Instructions | Allow 4 character numeric field – must enter 4 numbers   |
| Skip Instructions    | <pre><valid year=""> if CT_YR gt current year or (CT_YR=current year and CT_MT gt current month)    goto ERR1_ CT_YR (future date) elseif CT_YR It DOBY or (CT_YR=DOBY and CT_MT It DOBM)    goto ERR2_ CT_YR (prior to birth date) elseif CT_MT=D    goto CT2 elseif CT_MT=1-12    goto CTREAS <r,d> goto CT2</r,d></valid></pre> |
| Hard Edits           | ERR1_ CT_YR  |
|                      | * Future date invalid. Please correct.   |
|                      | ERR2_CT_YR   |
|                      | * Date before birth. Please correct.   |
| Soft Edits           |  |
| AssocHelp            |  |

| Module               | 30  |
|----------------------|---|
| Section Name         | Cancer Screening  |
| Part                 |   |
| Question ID          | NAF.615_01.000  |
| Variable Name        | CTN   |
| Universe             | HHSTAT4='S' and (AGE GE '040' and AGE not IN ('997','999')) and CTHADEV(e)='1' and CT_MT(e)='96'  |
| Universe-text        | Sample adults 40+ who selected number and time period format for most recent CT colonography or virtual colonoscopy from the initial month screen |
| Question Text        | 1 of 2  |
|                      | When did you have your MOST RECENT CT colonography or virtual colonoscopy?  |
|                      | *Enter number for time since last CT colonography or virtual colonoscopy.   |
|                      | *Enter '95' for 95 or more.   |
| Answer Codes         | Allow 1-95, R, D  |
| Question Type        | Integer   |
| Field Pane Descripti | on  |
| Fill Instructions    |   |
| Special Instructions | if CTN = <r> store 'R' in CTT If CTN = <d> store 'D' in CTT</d></r>   |
| Skip Instructions    | <1-95> [goto CTT] <r,d> store "R,D" in CTT [goto CT2]</r,d>   |
| Hard Edits           |   |
| Soft Edits           |   |
| AssocHelp            |   |

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30
Module
                     Cancer Screening
Section Name
Part
Question ID
                     NAF.616_02.000
Variable Name
                     CTT
                     HHSTAT4='S' and (AGE GE '040' and AGE not IN ('997','999')) and CTHADEV(e)='1'
Universe
                     and CT_MT(e)='96' and ('01' <= CTN <= '95')
                     Sample adults 40+ who answered 1-95 for number part of this 2 part question
Universe-text
                     2 of 2
Question Text
                     *Enter time period for time since most recent CT colonography or virtual colonoscopy.
Answer Codes
                     1. Days ago
                     2. Weeks ago
                     3. Months ago
                     4. Years ago
                     Refused
                     Don't know
Question Type
                     Pick One - answer pane list
Field Pane Description
Fill Instructions
                    If CTN gt 10 and CTT=4, store '6' in CT2.
Special Instructions
                     If CTN=6,7,8,9 and CTT=4, store '5' in CT2.
                     If CTN=4 and CTT=4, store '4' in CT2.
                     <1-3> goto CTREAS
Skip Instructions
                     <4> if ČTN=4
                           set CT2=4
                           goto CTREAS
                         elseif CTN=6,7,8,9
                           set CT2=5
                           goto CTREAS
                         elseif CTN gt 10 and CTN gt AGE
                           goto ERR CTT (greater than persons age)
                         elseif CTN gt 10 and CTN le AGE
                           set CT2=6
                           goto CTREAS
                         elseif CTN=1,2,3,5,10
                           goto CT2
                     <R,D> goto CT2
                     ERR_CTT
Hard Edits
                     * Time since last exam cannot be greater than age.
                     * Please correct.
Soft Edits
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| AssocHelp  |  |  |
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30 **Module Cancer Screening** Section Name Part **Question ID** NAF.617 00.000 Variable Name CT2 HHSTAT4='S' and (AGE GE '040' and AGE not IN ('997','999')) and CTHADEV(e)='1' Universe and (CT\_MT(e) IN ('97','98','99') or CT\_YR(e) IN ('9997','9998','9999') or CTN(e) IN ('97', '98', '99') or CTT(e) IN ('7', '8', '9') or (CTT(e) = '4' and CTN IN ('1', '2', '3', '5', '10'))) Sample adults 40+ who failed to give a complete date in either the month or year format Universe-text or failed to give a complete date in the number and time period format, or entered years ago in the time period format (excluding those whose last CT colonography or virtual colonoscopy was 6-9 or over 10 years ago) Was it: Question Text \*Read answer categories. Answer Codes 1. A year ago or less 2. More than 1 year but not more than 2 years 3. More than 2 years but not more than 3 years 4. More than 3 years but not more than 5 years 5. More than 5 years but not more than 10 years 6. Over 10 years ago Refused Don't know **Question** Type Pick One - answer pane list Field Pane Description Fill Instructions Display answer categories 1-6 in BOLD BLACK text. **Special Instructions** If CTN gt 10 and CTT=4, store '6' in CT2 and don't ask question. If CTN=6,7,8,9 and CTT=4, store '5' in CT2 and don't ask question. If CTN=4 and CTT=4, store '4' in CT2 and don't ask question. Based upon prior answers: if CTN = 1 and CTT = '4', gray out answer codes 3,4,5,6 if CTN = 2 and CTT = '4', gray out answer codes 1,4,5,6 if CTN = 3 and CTT = '4', gray out answer codes 1,2,5,6 if CTN = 5 and CTT = '4', gray out answer codes 1,2,3,6 if CTN = 10 and CTT = '4', gray out answer codes 1,2,3,4 <1-6,R,D> if answer code is grayed out [goto ERR\_CT2] else [goto CTREAS] Skip Instructions ERR\_CT2 Hard Edits \*That is not a valid response. \*Please correct. Soft Edits

| AssocHelp              |   |
|------------------------|---|
| Module                 | 30  |
| Section Name           | Cancer Screening  |
| Part                   |   |
| Question ID            | NAF.618_00.000  |
| Variable Name          | CTREAS  |
| Universe               | HHSTAT4='S' and (AGE GE '040' and AGE not IN ('997', '999')) and CTHADEV(e)='1'   |
| Universe-text          | Sample adults 40+ who have had a CT colonography or virtual colonoscopy   |
| Question Text          | What was the MAIN reason you had this CT colonography or virtual colonoscopy - was it part of a routine exam, because of a problem, as a follow-up test of an earlier test or screening exam, or some other reason? |
| Answer Codes           | 1. Part of a routine exam 2. Because of a problem 3. Follow-up test of an earlier test or screening exam 4. Other reason Refused Don't know   |
| Question Type          | Pick One - answer pane list   |
| Field Pane Description | on  |
| Fill Instructions      |   |
| Special Instructions   |   |
| Skip Instructions      | <1-4,R,D> [goto POLYP]  |
| Hard Edits             |   |
| Soft Edits             |   |
| AssocHelp              |   |

| Module                 | 30   |
|------------------------|--|
| Section Name           | Cancer Screening   |
| Part                   |  |
| Question ID            | NAF.619_00.000   |
| Variable Name          | POLYP  |
| Universe               | HHSTAT4='S' and (AGE GE '040' and AGE not IN ('997', '999'))   |
| Universe-text          | Sample adults 40+  |
| Question Text          | A polyp is a small growth that develops on the inside of the colon or rectum. During the past 10 years did a doctor tell you that you had a polyp in your colon or rectum? |
| Answer Codes           | 1. Yes<br>2. No<br>Refused<br>Don't Know   |
| Question Type          | Yes/No   |
| Field Pane Description | on   |
| Fill Instructions      |  |
| Special Instructions   |  |
| Skip Instructions      | <1,2,R,D> [goto COLTOLD]   |
| Hard Edits             |  |
| Soft Edits             |  |
| AssocHelp              |  |

| Module               | 30  |
|----------------------|---|
| Section Name         | Cancer Screening  |
| Part                 |   |
| Question ID          | NAF.619_00.010  |
| Variable Name        | COLTOLD   |
| Universe             | HHSTAT4='S' and (AGE GE '040' and AGE not IN ('997','999'))   |
| Universe-text        | Sample adults 40+   |
| Question Text        | The following questions are about another type of test to check for colon cancer - the blood stool or occult blood test, or fecal immunochemical or FIT test, tests to determine whether you have blood in your stool or bowel movement. These tests can be done at home using a kit. You use a stick or brush to obtain a small amount of stool at home and send it back to the doctor or lab.  Has your doctor or other health professional EVER told you about these tests for blood in the stool to check for colon cancer? |
| Answer Codes         | 1. Yes<br>2. No<br>Refused<br>Don't Know  |
| Question Type        | Yes/No  |
| Field Pane Descripti | on  |
| Fill Instructions    |   |
| Special Instructions |   |
| Skip Instructions    | <1,2,R,D> [goto COLGOOD]  |
| Hard Edits           |   |
| Soft Edits           |   |
| AssocHelp            |   |

| Module                 | 30   |
|------------------------|--|
| Section Name           | Cancer Screening   |
| Part                   |  |
| Question ID            | NAF.619_00.020   |
| Variable Name          | COLGOOD  |
| Universe               | HHSTAT4='S' and (AGE GE '040' and AGE not IN ('997','999'))  |
| Universe-text          | Sample adults 40+  |
| Question Text          | Did your doctor or other health professional say that these tests for blood in the stool are a GOOD way to check for colon cancer? |
| Answer Codes           | 1. Yes<br>2. No<br>Refused<br>Don't Know   |
| Question Type          | Yes/No   |
| Field Pane Description | on   |
| Fill Instructions      |  |
| Special Instructions   |  |
| Skip Instructions      | <1,2,R,D> [goto HFOBHAD1]  |
| Hard Edits             |  |
| Soft Edits             |  |
| AssocHelp              |  |

| Module               | 30  |
|----------------------|---|
| Section Name         | Cancer Screening  |
| Part                 |   |
| Question ID          | NAF.620_00.000  |
| Variable Name        | HFOBHAD1  |
| Universe             | HHSTAT4='S' and (AGE GE '040' and AGE not IN ('997', '999'))                            |
| Universe-text        | Sample adults 40+   |
| Question Text        | Have you EVER HAD a blood stool or FIT test, using a HOME test kit?                     |
|                      | *Read if necessary: Do not include tests done at the doctor's office.                   |
| Answer Codes         | 1. Yes 2. No Refused Don't Know   |
| Question Type        | Yes/No  |
| Field Pane Descripti | on  |
| Fill Instructions    |   |
| Special Instructions | Display the text "Do not include tests done at the doctor's office." In BOLD GRAY text. |
| Skip Instructions    | <1> goto RHFO2_MT<br><2,R,D> goto FOBHAD1   |
| Hard Edits           |   |
| Soft Edits           |   |
| AssocHelp            |   |

| Module                 | 30   |
|------------------------|--|
| Section Name           | Cancer Screening   |
| Part                   |  |
| Question ID            | NAF.640_01.000   |
| Variable Name          | RHFO2_MT   |
| Universe               | HHSTAT4='S' and (AGE GE '040' and AGE not IN ('997', '999')) and HFOBHAD1='1'  |
| Universe-text          | Sample adults 40+ who have ever had a home blood stool or FIT test   |
| Question Text          | 1 of 2   |
|                        | When did you have your MOST RECENT blood stool or FIT test using a kit at home?  |
|                        | *Enter month of last home blood stool or FIT test.   |
|                        | *Enter '96' to go to number and time period format.  |
| Answer Codes           | 1. January 2. February 3. March 4. April 5. May 6. June 7. July 8. August 9. September 10. October 11. November 12. December 96. Time period format Refused Don't know |
| Question Type          | Pick One - answer pane list  |
| Field Pane Description | on   |
| Fill Instructions      |  |
| Special Instructions   | if RHFO2_MT = <r> store 'R' in RHFO2_YR if RHFO2_MT = &lt;96&gt; store '9996' in RHFO2_YR</r>  |
| Skip Instructions      | <1-12,D> goto RHFO2_YR<br><r> store "R" in RHFO2_YR and goto RHFO2<br/>&lt;96&gt; store "9996" in RHFO2_YR and goto RHFO2N</r>   |
| Hard Edits             |  |
| Soft Edits             |  |
| AssocHelp              |  |

| Module                        | 30  |  |
|-------------------------------|---|--|
| Section Name                  | Cancer Screening  |  |
| Part                          |   |  |
| Question ID                   | NAF.640_02.000  |  |
| Variable Name                 | RHFO2_YR  |  |
| Universe                      | HHSTAT4='S' and (AGE GE '040' and AGE not IN ('997','999')) and HFOBHAD1(e)='1' and ('01' <= RHFO2_MT <= '12' or RHFO2_MT='99') |  |
| Universe-text                 | Sample adults age 40+ who answered month of last home blood stool or FIT test or didn't know month of last test                 |  |
| Question Text                 | 2 of 2  |  |
|                               | *Enter year of last home blood stool or FIT test.   |  |
| Answer Codes                  |   |  |
| Question Type                 | Integer   |  |
| Field Pane Descripti          | ion   |  |
| Fill Instructions             |   |  |
| Special Instructions          | Allow 4 character numeric field – must enter 4 numbers  |  |
| Skip Instructions  Hard Edits | <pre><valid year=""> if RHFO2_YR gt current year or (RHFO2_YR=current year and RHRO1_MT gt current month)</valid></pre>         |  |
|                               | * Future date invalid. Please correct.  ERR2_ RHFO2_YR  |  |
|                               | * Date before birth. Please correct.  |  |
| Soft Edits                    |   |  |
| AssocHelp                     |   |  |

| Module               | 30  |
|----------------------|---|
| Section Name         | Cancer Screening  |
| Part                 |   |
| Question ID          | NAF.650_01.000  |
| Variable Name        | RHFO2N  |
| Universe             | HHSTAT4='S' and (AGE GE '040' and AGE not IN ('997','999')) and HFOBHAD1(e)='1' and RHFO2_MT(e)='96'                                    |
| Universe-text        | Sample adults 40+ who selected number and time period format for most recent home blood stool or FIT test from the initial month screen |
| Question Text        | 1 of 2  |
|                      | When did you have your MOST RECENT blood stool or FIT test using a kit at home?   |
|                      | *Enter number for time since last home blood stool or FIT test.   |
|                      | *Enter '95' for 95 or more.   |
| Answer Codes         | Allow 1-95, R, D  |
| Question Type        | Integer   |
| Field Pane Descripti | on  |
| Fill Instructions    |   |
| Special Instructions | if RHFO2N = <r> store 'R' in RHFO2T<br/>If RHFO2N = <d> store 'D' in RHFO2T</d></r>   |
| Skip Instructions    | <1-95> [goto RHFO2T] <r,d> store "R,D" in RHFO2T [goto RHFO2]</r,d>   |
| Hard Edits           |   |
| Soft Edits           |   |
| AssocHelp            |   |

| Module               | 30  |
|----------------------|---|
| Section Name         | Cancer Screening  |
| Part                 |   |
| Question ID          | NAF.650_02.000  |
| Variable Name        | RHFO2T  |
| Universe             | HHSTAT4='S' and (AGE GE '040' and AGE not IN ('997','999')) and HFOBHAD1(e)='1' and RHFO2_MT(e)='96' and ('01' <= RHFO2N <= '95')   |
| Universe-text        | Sample adults 40+ who answered 1-95 for number part of this 2 part question   |
| Question Text        | 2 of 2  |
|                      | *Enter time period for time since most recent home blood stool or FIT test.   |
| Answer Codes         | 1. Days ago 2. Weeks ago 3. Months ago 4. Years ago Refused Don't know  |
| Question Type        | Pick One - answer pane list   |
| Field Pane Descripti | on  |
| Fill Instructions    |   |
| Special Instructions | If RHFO2N gt 10 and RHFO2T=4, store '6' in RHFO2.   |
|                      | If RHFO2N=6,7,8,9 and RHFO2T=4, store '5' in RHFO2.   |
|                      | If RHFO2N=4 and RHFO2T=4, store '4' in RHFO2.   |
| Skip Instructions    | <1-3> goto HFOBREA2 <4> if RHFO2N=4   set RHFO2=4   goto HFOBREA2 elseif RHFO2N=6,7,8,9   set RHFO2=5   goto HFOBREA2 elseif RHFO2N gt 10 and RHFO2N gt AGE   goto ERR_RHFO2T (greater than persons age) elseif RHFO2N gt 10 and RHFO2N le AGE   set RHFO2=6   goto HFOBREA2 elseif RHFO2N=1,2,3,5,10   goto RHFO2 <r,d> goto RHFO2</r,d> |
| Hard Edits           | ERR_RHFO2T  |
|                      | * Time since last exam cannot be greater than age. * Please correct.  |
| Soft Edits           |   |

| AssocHelp  |  |  |
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30 **Module Cancer Screening** Section Name Part **Question ID** NAF.655 00.000 Variable Name RHF<sub>02</sub> HHSTAT4='S' and (AGE GE '040' and AGE not IN ('997','999')) and HFOBHAD1(e)='1' Universe and (RHFO2\_MT(e) IN ('97','98','99') or RHFO2\_YR(e) IN ('9997','9998','9999') or RHFO2N(e) IN ('97', '98', '99') or RHFO2T(e) IN ('7', '8', '9') or (RHFO2T(e) = '4' and RHFO2N IN ('1','2','3','5','10'))) Sample adults 40+ who failed to give a complete date in either the month or year format Universe-text or failed to give a complete date in the number and time period format, or entered years ago in the time period format (excluding those whose last home blood stool or FIT test was 6-9 or over 10 years ago) Was it: **Ouestion Text** \*Read answer categories. **Answer Codes** 1. A year ago or less 2. More than 1 year but not more than 2 years 3. More than 2 years but not more than 3 years 4. More than 3 years but not more than 5 years 5. More than 5 years but not more than 10 years 6. Over 10 years ago Refused Don't know **Ouestion Type** Pick One - answer pane list Field Pane Description Fill Instructions Display answer categories 1-6 in BOLD BLACK text. **Special Instructions** If RHFO2N gt 10 and RHFO2T=4, store '6' in RHFO2 and don't ask question. If RHFO2N=6,7,8,9 and RHFO2T=4, store '5' in RHFO2 and don't ask question. If RHFO2N=4 and RHFO2T=4, store '4' in RHFO2 and don't ask question. Based upon prior answers: if RHFO2N = 1 and RHFO2T = '4', gray out answer codes 3,4,5,6 if RHFO2N = 2 and RHFO2T = '4', gray out answer codes 1,4,5,6 if RHFO2N = 3 and RHFO2T = '4', gray out answer codes 1,2,5,6 if RHFO2N = 5 and RHFO2T = '4', gray out answer codes 1,2,3,6 if RHFO2N = 10 and RHFO2T = '4', gray out answer codes 1,2,3,4 Skip Instructions <1-6,R,D> if answer code is grayed out [goto ERR\_RHFO2] else [goto HFOBREA2] **ERR RHF02** Hard Edits

\*That is not a valid response.

\*Please correct.

| Soft Edits             |   |
|------------------------|---|
| AssocHelp              |   |
| Module                 | 30  |
| Section Name           | Cancer Screening  |
| Part                   |   |
| Question ID            | NAF.660_00.000  |
| Variable Name          | HFOBREA2  |
| Universe               | HHSTAT4='S' and (AGE GE '040' and AGE not IN ('997','999')) and HFOBHAD1(e)='1'   |
| Universe-text          | Sample adults 40+ who have had a home blood stool or FIT test   |
| Question Text          | What was the MAIN reason you had this home blood stool or FIT test - was it part of a routine exam, because of a problem, or some other reason? |
| Answer Codes           | 1. Part of a routine exam 2. Because of a problem 3. Other reason Refused Don't know  |
| Question Type          | Pick One - answer pane list   |
| Field Pane Description | on  |
| Fill Instructions      |   |
| Special Instructions   |   |
| Skip Instructions      | <1-3,R,D> [goto FOBHAD1]  |
| Hard Edits             |   |
| Soft Edits             |   |
| AssocHelp              |   |

| Module               | 30   |
|----------------------|--|
| Section Name         | Cancer Screening   |
| Part                 |  |
| Question ID          | NAF.710_00.000   |
| Variable Name        | FOBHAD1  |
| Universe             | HHSTAT4='S' and (AGE GE '040' and AGE not IN ('997','999'))  |
| Universe-text        | Sample adults 40+  |
| Question Text        | Have you EVER HAD a blood stool or FIT test in which your doctor or other health care professional collected a stool sample during an office visit?  |
| Answer Codes         | 1. Yes<br>2. No<br>Refused<br>Don't Know   |
| Question Type        | Yes/No   |
| Field Pane Descripti | ion  |
| Fill Instructions    |  |
| Special Instructions |  |
| Skip Instructions    | <1> [goto RFOB2_MT] <2, R, D> if ((COLHAD = 2,R,D) or (COL2 = 6) or (COL_YR = (current year - 10) and COL_MT It current month) or (COL_YR It (current year - 10))) and ((SIGHAD = 2,R,D) or (SIG2 = 5,6) or (SIG_YR = (current year - 5) and SIG_MT It current month) or (SIG_YR It (current year - 5))) and ((CTHEARD = 2,R,D) or (CTHADEV = 2,R,D) or (CT2 = 5,6) or (CT_YR = (current year - 5) and CT_MT It current month) or (CT_YR It (current year - 5))) and ((HFOBHAD = 2,R,D) or (RHFO2 = 2-6) or (RHFO2_YR = (current year - 1) and RHFO2_MT It current month) or (RHFO2_YR It (current year - 1)) or (RHFO2T = 2 and RHFO2N gt 52) or (RHFO2T = 3 and RHFO2N gt 12)) [goto COLPROB1] else [goto genetic testing] |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module                 | 30   |
|------------------------|--|
| Section Name           | Cancer Screening   |
| Part                   |  |
| Question ID            | NAF.720_01.000   |
| Variable Name          | RFOB2_MT   |
| Universe               | HHSTAT4='S' and (AGE GE '040' and AGE not IN ('997', '999')) and FOBHAD1(e)='1'  |
| Universe-text          | Sample adults 40+ who have ever had a office blood stool/FIT test  |
| Question Text          | 1 of 2   |
|                        | When did you have your MOST recent OFFICE blood stool or FIT test?   |
|                        | *Enter month of last office blood stool/FIT test.  |
|                        | *Enter '96' to go to number and time period format.  |
| Answer Codes           | 1. January 2. February 3. March 4. April 5. May 6. June 7. July 8. August 9. September 10. October 11. November 12. December 96. Time period format Refused Don't know |
| Question Type          | Pick One - answer pane list  |
| Field Pane Description | on   |
| Fill Instructions      |  |
| Special Instructions   | if RFOB2_MT = <r> store 'R' in RFOB2_YR if RFOB2_MT = &lt;96&gt; store '9996' in RFOB2_YR</r>  |
| Skip Instructions      | <1-12,D> [goto RFOB2_YR] <r> store "R' in RFOB2_YR [goto RFOB2] &lt;96&gt; store "9996" in RFOB2_YR [goto RFOB2N]</r>  |
| Hard Edits             |  |
| Soft Edits             |  |
| AssocHelp              |  |

| Module               | 30   |
|----------------------|--|
| Section Name         | Cancer Screening   |
| Part                 |  |
| Question ID          | NAF.720_02.000   |
| Variable Name        | RFOB2_YR   |
| Universe             | HHSTAT4='S' and (AGE GE '040' and AGE not IN ('997','999')) and FOBHAD1(e)='1' and ('01' <= RFOB2_MT <= '12' or RFOB2_MT='99')   |
| Universe-text        | Sample adults 40+ who answered month of last office blood stool/FIT test or didn't know month of last office blood stool test  |
| Question Text        | 2 of 2   |
|                      | *Enter year of last office blood stool/FIT test.   |
| Answer Codes         |  |
| Question Type        | Integer  |
| Field Pane Descript  | ion  |
| Fill Instructions    |  |
| Special Instructions | Allow 4 character numeric field – must enter 4 numbers   |
| Skip Instructions    | <pre><valid year=""> if RFOB2_YR gt current year or (RFOB2_YR=current year and RFOB2_MT gt current month)   goto ERR1_ RFOB2_YR (future date) elseif RFOB2_YR It DOBY or (RFOB2_YR=DOBY and RFOB2_MT It DOBM)   goto ERR2_ RFOB2_YR (prior to birth date) elseif RFOB2_MT=D   goto RFOB2 elseif RFOB2_MT=1-12   goto RFOBRES1 <r,d> goto RFOB2</r,d></valid></pre> |
| Hard Edits           | ERR1_ RFOB2_YR   |
|                      | * Future date invalid. Please correct.   |
|                      | ERR2_RFOB2_YR  |
|                      | * Date before birth. Please correct.   |
| Soft Edits           |  |
| AssocHelp            |  |

| Module               | 30   |
|----------------------|--|
| Section Name         | Cancer Screening   |
| Part                 |  |
| Question ID          | NAF.730_01.000   |
| Variable Name        | RFOB2N   |
| Universe             | HHSTAT4='S' and (AGE GE '040' and AGE not IN ('997', '999')) and FOBHAD1(e)='1' and RFOB2_MT(e)='96'                                   |
| Universe-text        | Sample adults 40+ who selected number and time period format for most recent office blood stool/FIT test from the initial month screen |
| Question Text        | 1 of 2   |
|                      | When did you have your MOST recent OFFICE blood stool or FIT test?   |
|                      | *Enter number for time since last office blood stool/FIT test.   |
|                      | *Enter '95' for 95 or more.  |
| Answer Codes         | Allow 1-95, R, D   |
| Question Type        | Integer  |
| Field Pane Descripti | on   |
| Fill Instructions    |  |
| Special Instructions | if RFOB2N = <r> store 'R' in RFOB2T If RFOB2N = <d> store 'D' in RFOB2T</d></r>  |
| Skip Instructions    | <1-95> [goto RFOB2T] <r,d> store "R,D" in RFOB2T [goto RFOB2]</r,d>  |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module               | 30   |
|----------------------|--|
| Section Name         | Cancer Screening   |
| Part                 |  |
| Question ID          | NAF.730_02.000   |
| Variable Name        | RFOB2T   |
| Universe             | HHSTAT4='S' and (AGE GE '040' and AGE not IN ('997','999')) and FOBHAD1(e)='1' and RFOB2_MT(e)='96' and ('01' <= RFOB2N <= '95')   |
| Universe-text        | Sample adults 40+ who answered 1-95 for number part of this 2 part question  |
| Question Text        | 2 of 2  *Enter time period for time since most recent office blood stool/FIT test.   |
| Answer Codes         | 1. Days ago 2. Weeks ago 3. Months ago 4. Years ago Refused Don't know   |
| Question Type        | Pick One - answer pane list  |
| Field Pane Descripti | on   |
| Fill Instructions    |  |
| Special Instructions | If RFOB2N gt 10 and RFOB2T=4, store '6' in RFOB2.  |
|                      | If RFOB2N=6,7,8,9 and RFOB2T=4, store '5' in RFOB2.  |
|                      | If RFOB2N=4 and RFOB2T=4, store '4' in RFOB2.  |
| Skip Instructions    | <1-3> goto RFOBRES1 <4> if RFOB2N=4     set RFOB2=4     goto RFOBRES1     elseif RFOB2N=6,7,8,9     set RFOB2=5     goto RFOBRES1     elseif RFOB2N gt 10 and RFOB2N gt AGE     goto ERR_RFOB2T (greater than persons age)     elseif RFOB2N gt 10 and RFOB2N le AGE     set RFOB2=6     goto RFOBRES1     elseif RFOB2N=1,2,3,5,10     goto RFOB2 |
| Hard Edits           | * Time since last exam cannot be greater than age.  * Please correct.  |
| Soft Edits           | 1 10430 0011601.   |
| •                    |  |

| A TT -1   |  |  |  |
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| AssocHelp |  |  |  |
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30 **Module Cancer Screening** Section Name Part **Question ID** NAF.735 00.000 Variable Name RFOB2 HHSTAT4='S' and (AGE GE '040' and AGE not IN ('997','999')) and FOBHAD1(e)='1' Universe and (RFOB2\_MT(e) IN ('97','98','99') or RFOB2\_YR(e) IN ('9997','9998','9999') or RFOB2N(e) IN ('97','98','99') or RFOB2T(e) IN ('7','8','9') or (RFOB2T(e)='4' and RFOB2N IN ('1','2','3','5','10'))) Sample adults 40+ who failed to give a complete date in either the month or year format Universe-text or failed to give a complete date in the number and time period format, or entered years ago in the time period format (excluding those whose last office blood stool test/FIT was 6-9 or over 10 years ago) Was it: **Ouestion Text** \*Read answer categories. **Answer Codes** 1. A year ago or less 2. More than 1 year but not more than 2 years 3. More than 2 years but not more than 3 years 4. More than 3 years but not more than 5 years 5. More than 5 years but not more than 10 years 6. Over 10 years ago Refused Don't know **Ouestion Type** Pick One - answer pane list Field Pane Description Fill Instructions Display answer categories 1-6 in BOLD BLACK text. **Special Instructions** If RFOB2N gt 10 and RFOB2T=4, store '6' in RFOB2 and don't ask question. If RFOB2N=6,7,8,9 and RFOB2T=4, store '5' in RFOB2 and don't ask question. If RFOB2N=4 and RFOB2T=4, store '4' in RFOB2 and don't ask question. Based upon prior answers: if RFOB2N = 1 and RFOB2T = '4', gray out answer codes 3,4,5,6 if RFOB2N = 2 and RFOB2T = '4', gray out answer codes 1,4,5,6 if RFOB2N = 3 and RFOB2T = '4', gray out answer codes 1,2,5,6 if RFOB2N = 5 and RFOB2T = '4', gray out answer codes 1,2,3,6 if RFOB2N = 10 and RFOB2T = '4', gray out answer codes 1,2,3,4 Skip Instructions

<1-6,R,D> if answer code is grayed out [goto ERR\_RFOB2] else [goto RFOBRES1]

## Hard Edits

## ERR RFOB2

\*That is not a valid response.

\*Please correct.

| Soft Edits             |  |
|------------------------|--|
| AssocHelp              |  |
| Module                 | 30   |
| Section Name           | Cancer Screening   |
| Part                   |  |
| Question ID            | NAF.740_00.000   |
| Variable Name          | RFOBRES1   |
| Universe               | HHSTAT4='S' and (AGE GE '040' and AGE not IN ('997','999')) and FOBHAD1(e)='1'   |
| Universe-text          | Sample adults 40+ who have had an office blood stool/FIT test  |
| Question Text          | What was the MAIN reason you had this office blood stool or FIT test - was it part of a routine exam, because of a problem, or some other reason?  |
| Answer Codes           | 1. Part of a routine exam 2. Because of a problem 3. Other reason Refused Don't know   |
| Question Type          | Pick One - answer pane list  |
| Field Pane Description | on   |
| Fill Instructions      |  |
| Special Instructions   |  |
| Skip Instructions      | <1-3,R,D> if ((COLHAD = 2) or (COL2 = 6) or (COL_YR = (current year – 10) and COL_MT It current month) or (COL_YR It (current year – 10))) and ((SIGHAD = 2) or (SIG2 = 5,6) or (SIG_YR = (current year – 5) and SIG_MT It current month) or (SIG_YR It (current year – 5))) and ((CTHEARD = 2) or (CTHADEV = 2) or (CT2 = 5,6) or (CT_YR = (current year – 5) and CT_MT It current month) or (CT_YR It (current year – 5))) and ((HFOBHAD = 2) or (RHFO2 = 2-6) or (RHFO2_YR = (current year – 1) and RHFO2_MT It current month) or (RHFO2_YR It (current year – 1)) or (RHFO2T = 2 and RHFO2N gt 52) or (RHFO2T = 3 and RHFO2N gt 12)) [goto COLPROB1] else [goto genetic testing] |
| Hard Edits             |  |
| Soft Edits             |  |
| AssocHelp              |  |

| Module               | 30   |
|----------------------|--|
| Section Name         | Cancer Screening   |
| Part                 |  |
| Question ID          | NAF.750_00.000   |
| Variable Name        | COLPROB1   |
| Universe             | HHSTAT4='S' and (AGE GE '040' and AGE not IN ('997','999') and ((COLHAD = '2') or (COL2 = '6') or (COL_YR = (current year - 10) and COL_MT It current month) or (COL_YR It (current year - 10)) or (COLT = '4' and COLN ge '11' and COL2 IN ('7','9'))) and ((SIGHAD = '2') or (SIG2 IN ('5','6')) or (SIG_YR = (current year - 5) and SIG_MT It current month) or (SIG_YR It (current year - 5)) or (SIGT = '3' and SIGN gt '60') or (SIGT = '4' and SIGN ge '6' and SIG2 IN ('7','9'))) and ((CTHEARD = 2) or (CTHADEV = 2) or (CT2 IN ('5','6')) or (CT_YR = (current year - 5) and CT_MT It current month) or (CT_YR It (current year - 5)) or (CTT = '3' and CTN gt '60') or (CTT = '4' and CTN ge '6' and CT2 IN ('7','9'))) and ((HFOBHAD = '2') or (RHFO2 IN ('2','3','4','5','6')) or (RHFO2_YR = (current year - 1) and RHFO2_MT It current month) or (RHFO2_YR It (current year - 1)) or (RHFO2T = '2' and RHFO2N gt '52') or (RHFO2T = '3' and RHFO2N gt '12') or (RHFO2T = '4' and RHFO2N ge '2' and RHFO2 IN ('7','9'))) |
| Universe-text        | Sample adults 40+ who have NOT had a colonoscopy in the past 10 years, sigmoidoscopy in the past 5 years, CT colonography in the past 5 years, or home blood stool/FIT test in the last year   |
| Question Text        | In the PAST 12 MONTHS, did a doctor or other health professional RECOMMEND that you be tested to look for problems in your colon or rectum?  |
| Answer Codes         | 1. Yes 2. No Refused Don't Know  |
| Question Type        | Yes/No   |
| Field Pane Descripti | on   |
| Fill Instructions    |  |
| Special Instructions |  |
| Skip Instructions    | <1> [goto COLKIND1]<br><2,R,D> [goto genetic testing]  |
| Hard Edits           |  |
| Soft Edits           |  |
| AssacHoln            |  |

| Module               | 30  |
|----------------------|---|
| Section Name         | Cancer Screening  |
| Part                 |   |
| Question ID          | NAF.770_00.000  |
| Variable Name        | COLKIND1  |
| Universe             | HHSTAT4='S' and (AGE GE '040' and AGE not IN ('997','999')) and COLPROB1(e)='1'   |
| Universe-text        | Sample adults 40+ who have had particular tests recommended to look for problems in the colon and who have NOT had a colonoscopy in the past 10 years, sigmoidoscopy in the past 5 years, CT colonography in the past 5 years, or home blood stool/FIT test in the last year and who had another type of test recommended |
| Question Text        | Which tests to check for colon cancer did the doctor or other health professional recommend to you? Possible tests include stool blood or fecal occult blood or FIT test; Sigmoidoscopy; colonoscopy; CT colonography or virtual colonoscopy; or other.   |
|                      | *Enter all that apply, separate with commas.  |
| Answer Codes         | 1. Stool blood test/fecal occult blood/FIT test 2. Sigmoidoscopy 3. Colonoscopy 4. CT colonography/virtual colonoscopy 5. Other Refused Don't know  |
| Question Type        | Enter all that apply  |
| Field Pane Descripti | on  |
| Fill Instructions    |   |
| Special Instructions |   |
| Skip Instructions    | <1-5,R,D> [goto genetic testing]  |
| Hard Edits           |   |
| Soft Edits           |   |
| AssocHelp            |   |

## 2015 Q1 NHIS Instrument Spec Report

| Section nan            | ne: Genetic Testing   |
|------------------------|---|
| Module                 | 31  |
| Section Name           | Genetic Testing   |
| Part                   |   |
| Question ID            | NAG.001_00.000  |
| Variable Name          | GCEVER  |
| Universe               | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999'))  |
| Universe-text          | Sample adults 18+   |
| Question Text          | These next questions refer to genetic COUNSELING for cancer risk. We will ask about genetic TESTING for cancer risk in a few minutes. Genetic counseling involves a discussion with a specially trained health care provider about your family history of cancer and how likely you are to develop cancer. It may also include a discussion about whether genetic testing is right for you. |
|                        | Have you ever received genetic counseling for cancer risk?  |
| Answer Codes           | 1. Yes 2. No Refused Don't know   |
| Question Type          | Yes/No  |
| Field Pane Description | On Genetic counseling-ever  |
| Fill Instructions      |   |
| Special Instructions   |   |
| Skip Instructions      | <1> [goto GCMREAS]<br><2,R,D> [goto GTPOSS1]  |
| Hard Edits             |   |
| Soft Edits             |   |
| AssocHeln              |   |

| Module                 | 31  |
|------------------------|---|
| Section Name           | Genetic Testing   |
| Part                   |   |
| Question ID            | NAG.002_00.000  |
| Variable Name          | GCMREAS   |
| Universe               | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999')) and GCEVER(e)='1'  |
| Universe-text          | Sample adults 18+ who have ever received genetic counseling   |
| Question Text          | What was the MAIN reason you had genetic counseling?  |
| Answer Codes           | 1. Your doctor recommended it 2. You requested it 3. Family member suggested it 4. You heard or read about it in the news 5. Other Refused Don't know |
| Question Type          | Pick One - answer list pane   |
| Field Pane Description | on Main reason  |
| Fill Instructions      |   |
| Special Instructions   |   |
| Skip Instructions      | <1-5,R,D> [goto GCBREAST]   |
| Hard Edits             |   |
| Soft Edits             |   |
| AssocHelp              |   |

| Module  | 31  |
|---|---|
| Section Name                                    | Genetic Testing   |
| Part  |   |
| Question ID                                     | NAG.003_00.000  |
| Variable Name                                   | GCBREAST  |
| Universe  | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999')) and GCEVER(e)='1'                            |
| Universe-text                                   | Sample adults 18+ who have ever received genetic counseling   |
| Question Text                                   | Please think about your MOST RECENT genetic counseling session for cancer risk. Was it for breast cancer? |
| Answer Codes                                    | 1. Yes 2. No Refused Don't know   |
| Question Type                                   | Yes/No  |
| Field Pane Description Counseling-breast cancer |   |
| Fill Instructions                               |   |
| Special Instructions                            |   |
| Skip Instructions                               | <1,2,R,D> [goto GCOVRN]   |
| Hard Edits                                      |   |
| Soft Edits                                      |   |
| AssocHelp                                       |   |

| Module   | 31   |
|--|--|
| Section Name                                     | Genetic Testing  |
| Part   |  |
| Question ID                                      | NAG.004_00.000   |
| Variable Name                                    | GCOVRN   |
| Universe   | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and GCEVER(e)='1' and SEX='2'  |
| Universe-text                                    | Female Sample adults 18+ who have ever received genetic counseling   |
| Question Text                                    | *Read if necessary.  |
| Answer Codes                                     | Please think about your MOST RECENT genetic counseling session for cancer risk.  Was it for ovarian cancer?  1. Yes 2. No Refused Don't know |
| Question Type                                    | Yes/No   |
| Field Pane Description Counseling-ovarian cancer |  |
| Fill Instructions                                |  |
| Special Instructions                             |  |
| Skip Instructions                                | <1,2,R,D> [goto GCCOLON]   |
| Hard Edits                                       |  |
| Soft Edits                                       |  |
| AssocHelp  |  |

| Module  | 31   |
|---|--|
| Section Name  | Genetic Testing  |
| Part  |  |
| Question ID   | NAG.005_00.000   |
| Variable Name                                       | GCCOLON  |
| Universe  | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999')) and GCEVER(e)='1'   |
| Universe-text                                       | Sample adults 18+ who have ever received genetic counseling  |
| Question Text                                       | *Read if necessary.  |
| Answer Codes  | Please think about your MOST RECENT genetic counseling session for cancer risk.  Was it for colon or rectal cancer?  1. Yes 2. No Refused Don't know |
| Question Type                                       | Yes/No   |
| Field Pane Description Counseling-colorectal cancer |  |
| Fill Instructions                                   |  |
| Special Instructions                                |  |
| Skip Instructions                                   | <1,2,R,D> [goto GCANOTH]   |
| Hard Edits  |  |
| Soft Edits  |  |
| AssocHelp   |  |

| Module               | 31   |
|----------------------|--|
| Section Name         | Genetic Testing  |
| Part                 |  |
| Question ID          | NAG.006_00.000   |
| Variable Name        | GCANOTH  |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999')) and GCEVER(e)='1'   |
| Universe-text        | Sample adults 18+ who have ever received genetic counseling  |
| Question Text        | *Read if necessary.  |
| Answer Codes         | Please think about your MOST RECENT genetic counseling session for cancer risk.  Was it for another type of cancer?  1. Yes 2. No Refused Don't know |
| Question Type        | Yes/No   |
| Field Pane Descripti | On Counseling-another type   |
| Fill Instructions    |  |
| Special Instructions |  |
| Skip Instructions    | <1> [goto GCSPEC]<br><2,R,D> [goto GTPOSS1]  |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module               | 31   |
|----------------------|--|
| Section Name         | Genetic Testing  |
| Part                 |  |
| Question ID          | NAG.007_00.000   |
| Variable Name        | GCSPEC   |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and (GCEVER(e)='1' and GCANOTH(e)='1') |
| Universe-text        | Sample adults 18+ who have ever received genetic counseling for another type of cancer             |
| Question Text        | *Specify other cancer for which genetic counseling was received.                                   |
| Answer Codes         | Verbatim,R,D   |
| Question Type        | Verbatim   |
| Field Pane Descripti | Counseling-specify   |
| Fill Instructions    |  |
| Special Instructions |  |
| Skip Instructions    | <allow 30,r,d=""> [goto GTPOSS1]</allow>   |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module               | 31   |
|----------------------|--|
| Section Name         | Genetic Testing  |
| Part                 |  |
| Question ID          | NAG.015_00.000   |
| Variable Name        | GTPOSS1  |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999'))   |
| Universe-text        | Sample adults 18+  |
| Question Text        | The following questions refer to genetic testing for cancer risk. That is, testing your blood to see if you carry genes which may predict a greater chance of developing cancer at some point in your life. This does NOT include tests to determine if you have cancer now. Do NOT include self-testing kits administered at home.  Have you EVER DISCUSSED the possibility of getting a genetic test for cancer risk with a doctor or other health professional? |
| Answer Codes         | 1. Yes 2. No Refused Don't know  |
| Question Type        | Yes/No   |
| Field Pane Descripti | on Testing discuss   |
| Fill Instructions    |  |
| Special Instructions |  |
| Skip Instructions    | <1> [goto GTADVIS1]<br><2,R,D> [goto GTGRISK]  |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module                                      | 31  |
|---|---|
| Section Name                                | Genetic Testing   |
| Part  |   |
| Question ID                                 | NAG.025_00.000  |
| Variable Name                               | GTADVIS1  |
| Universe                                    | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999')) and GTPOSS1(e)='1'   |
| Universe-text                               | Sample adults 18+ who have discussed the possibility of getting a genetic test with a doctor or other health professional |
| Question Text                               | Did a doctor or other health professional ADVISE you to have such a test?   |
| Answer Codes                                | 1. Yes 2. No Refused Don't know   |
| Question Type                               | Yes/No  |
| Field Pane Description Advised to have test |   |
| Fill Instructions                           |   |
| Special Instructions                        |   |
| Skip Instructions                           | <1,2,R,D> [goto GTGRISK]  |
| Hard Edits                                  |   |
| Soft Edits                                  |   |
| AssocHelp                                   |   |

| Module                 | 31   |
|------------------------|--|
| Section Name           | Genetic Testing  |
| Part                   |  |
| Question ID            | NAG.030_00.000   |
| Variable Name          | GTGRISK  |
| Universe               | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999'))   |
| Universe-text          | Sample adults 18+  |
| Question Text          | Have you EVER HAD a genetic test to determine if you are at greater risk of developing cancer in the FUTURE?     |
|                        | *Read if necessary: This does not include any test to see whether you had cancer in the PAST or have cancer NOW. |
| Answer Codes           | 1. Yes 2. No Refused Don't know  |
| Question Type          | Yes/No   |
| Field Pane Description | On Genetic test ever   |
| Fill Instructions      |  |
| Special Instructions   |  |
| Skip Instructions      | <1> if SEX=2 [goto GTBRE];<br>else [goto GTCOL]<br><2,R,D> [goto GTCCLOM]  |
| Hard Edits             |  |
| Soft Edits             |  |
| AssocHelp              |  |

| Module                 | 31  |
|------------------------|---|
| Section Name           | Genetic Testing   |
| Part                   |   |
| Question ID            | NAG.040_01.000  |
| Variable Name          | GTBRE   |
| Universe               | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999')) and (SEX='2' and GTGRISK(e)='1') |
| Universe-text          | Female sample adults 18+ who have ever had a genetic test                                     |
| Question Text          | Please think about your MOST RECENT genetic test for cancer risk. Was it for breast cancer?   |
| Answer Codes           | 1. Yes 2. No Refused Don't know   |
| Question Type          | Yes/No  |
| Field Pane Description | Genetic test-breast cancer  |
| Fill Instructions      |   |
| Special Instructions   |   |
| Skip Instructions      | <1,2,R,D> [goto GTOVA]  |
| Hard Edits             |   |
| Soft Edits             |   |
| AssocHelp              |   |

| Module               | 31   |
|----------------------|--|
| Section Name         | Genetic Testing  |
| Part                 |  |
| Question ID          | NAG.040_02.000   |
| Variable Name        | GTOVA  |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and (SEX='2' and GTGRISK(e)='1')                                   |
| Universe-text        | Female sample adults 18+ who have ever had a genetic test  |
| Question Text        | *Read if necessary.  |
| Answer Codes         | Please think about your MOST RECENT genetic test for cancer risk.  Was it for ovarian cancer?  1. Yes 2. No Refused Don't know |
| Question Type        | Yes/No   |
| Field Pane Descripti | On Genetic test-ovarian cancer   |
| Fill Instructions    |  |
| Special Instructions |  |
| Skip Instructions    | <1,2,R,D> [goto GTCOL]   |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module               | 31   |
|----------------------|--|
| Section Name         | Genetic Testing  |
| Part                 |  |
| Question ID          | NAG.040_03.000   |
| Variable Name        | GTCOL  |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and GTGRISK(e)='1'   |
| Universe-text        | Sample adults 18+ who have ever had a genetic test   |
| Question Text        | *Read if necessary.  |
| Answer Codes         | Please think about your MOST RECENT genetic test for cancer risk.  Was it for colon or rectal cancer?  1. Yes 2. No Refused Don't know |
| Question Type        | Yes/No   |
| Field Pane Descripti | On Genetic test-colorectal cancer  |
| Fill Instructions    |  |
| Special Instructions |  |
| Skip Instructions    | <1,2,R,D> [goto GTOTH]   |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module               | 31   |
|----------------------|--|
| Section Name         | Genetic Testing  |
| Part                 |  |
| Question ID          | NAG.040_04.000   |
| Variable Name        | GTOTH  |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999')) and GTGRISK(e)='1'  |
| Universe-text        | Sample adults 18+ who have ever had a genetic test   |
| Question Text        | *Read if necessary.  |
| Answer Codes         | Please think about your MOST RECENT genetic test for cancer risk.  Was it for another type of cancer?  1. Yes 2. No Refused Don't know |
| Question Type        | Yes/No   |
| Field Pane Descripti | On Genetic test-another cancer   |
| Fill Instructions    |  |
| Special Instructions |  |
| Skip Instructions    | <1> goto [GTRSKOTH]<br><2,R,D> goto [GTRSK_MT]   |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module                 | 31  |
|------------------------|---|
| Section Name           | Genetic Testing   |
| Part                   |   |
| Question ID            | NAG.044_00.000  |
| Variable Name          | GTRSKOTH  |
| Universe               | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and (GTGRISK(e)='1' and GTOTH(e)='1') |
| Universe-text          | Sample adults 18+ who have had a genetic test for another type of cancer                          |
| Question Text          | *Specify other test for genetic risk of cancer.   |
| Answer Codes           | Verbatim,R,D  |
| Question Type          | Verbatim  |
| Field Pane Description | On Genetic test-specify   |
| Fill Instructions      |   |
| Special Instructions   |   |
| Skip Instructions      | <allow 30,r,d=""> goto [GTRSK_MT]</allow>   |
| Hard Edits             |   |
| Soft Edits             |   |
| AssocHelp              |   |

| Module               | 31  |
|----------------------|---|
| Section Name         | Genetic Testing   |
| Part                 |   |
| Question ID          | NAG.050_01.000  |
| Variable Name        | GTRSK_MT  |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999')) and GTGRISK(e)='1'   |
| Universe-text        | Sample adults 18+ who have had a genetic test for cancer  |
| Question Text        | 1 of 2  |
|                      | When did you have this genetic test done?   |
|                      | *Enter month of genetic test.   |
|                      | *Enter '96' to go to number and time period format.   |
| Answer Codes         | 1. January 2. February 3. March 4. April 5. May 6. June 7. July 8. August 9. September 10. October 11. November 12. December Refused Don't know |
| Question Type        | Pick One - answer list pane   |
| Field Pane Descripti | on Genetic test-month   |
| Fill Instructions    |   |
| Special Instructions | If GTRSK_MT=R store "R" in GTRSK_YR; If GTRSK_MT=96 store "96" in GTRSK_YR  |
| Skip Instructions    | <1-12,D> goto GTRSK_YR <r> store "R' in GTRSK_YR then [goto GTCCLOM] &lt;96&gt; store "9996" in GTRSK_YR then [goto GTRSKN]</r>                 |
| Hard Edits           |   |
| Soft Edits           |   |
| AssocHelp            |   |

| Module               | 31  |
|----------------------|---|
| Section Name         | Genetic Testing   |
| Part                 |   |
| Question ID          | NAG.050_02.000  |
| Variable Name        | GTRSK_YR  |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and (GTGRISK(e)='1' and (01<=GTRSK_MT(e)<='12' or GTRSK_MT='99')) |
| Universe-text        | Sample adults 18+ who gave a month for their genetic test date or who didn't know the month                                   |
| Question Text        | 2 of 2  |
|                      | *Enter year of genetic test.  |
| Answer Codes         | Allow 1880-2016,9996,R,D  |
| Question Type        | Integer   |
| Field Pane Descripti | Genetic test-year   |
| Fill Instructions    |   |
| Special Instructions | If GTRSK_MT=R store "R" in GTRSK_YR; If GTRSK_MT=96 store "96" in GTRSK_YR  |
| Skip Instructions    | <pre><valid year,r,d=""> [goto GTCCLOM]</valid></pre>   |
| Hard Edits           |   |
| Soft Edits           |   |
| AssocHelp            |   |

| Module                 | 31  |
|------------------------|---|
| Section Name           | Genetic Testing   |
| Part                   |   |
| Question ID            | NAG.055_01.000  |
| Variable Name          | GTRSKN  |
| Universe               | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and (GTGRISK(e)='1' and GTRSK_MT(e)='96') |
| Universe-text          | Sample adults 18+ who requested the time period format at GTRSK_MT                                    |
| Question Text          | 1 of 2  |
|                        | When did you have this genetic test done?   |
|                        | *Enter number for time since genetic test.  |
|                        | *Enter '95' for 95 or more.   |
| Answer Codes           | Allow 1-94,95,R,D   |
| Question Type          | Integer   |
| Field Pane Description | Genetic test-number   |
| Fill Instructions      |   |
| Special Instructions   | If GTRSKN =R,D store 'R,D" in GTRSKT  |
| Skip Instructions      | <1-95> [goto GTRSKT]<br><r,d> store 'R,D" in GTRSKT then [goto GTCCLOM]</r,d>                         |
| Hard Edits             |   |
| Soft Edits             |   |
| AssocHelp              |   |

| Module                 | 31   |
|------------------------|--|
| Section Name           | Genetic Testing  |
| Part                   |  |
| Question ID            | NAG.055_02.000   |
| Variable Name          | GTRSKT   |
| Universe               | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and (GTGRISK(e)='1' and ('01'<=GTRSKN(e)<='95'))     |
| Universe-text          | Sample adults 18+ who answered 1-95 for the number part of this 2-part question                                  |
| Question Text          | 2 of 2   |
|                        | *Enter time period for time since genetic test.  |
| Answer Codes           | 1. Day(s) 2. Week(s) 3. Month(s) 4. Year(s) Refused Don't know   |
| Question Type          | Pick One - answer list pane  |
| Field Pane Description | Genetic test-time period   |
| Fill Instructions      |  |
| Special Instructions   | If GTRSKN =R,D store 'R,D" in GTRSKT   |
| Skip Instructions      | <1-4,R,D> [goto GTCCLOM] if (GTRSKN = number greater than person years old and GTRSKT=4) then [goto ERR1_GTRSKT] |
| Hard Edits             |  |
| Soft Edits             |  |
| AssocHelp              |  |

| Module               | 31  |
|----------------------|---|
| Section Name         | Genetic Testing   |
| Part                 |   |
| Question ID          | NAG.080_00.000  |
| Variable Name        | GTCCLOM   |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999'))  |
| Universe-text        | Sample adults 18+ who have had a genetic test for another type of cancer  |
| Question Text        | Compared to the average {fill1: man/woman} your age, would you say that you are more likely to get colon or rectal cancer, less likely, or about as likely?   |
| Answer Codes         | *Read if necessary.  For a colon or rectal cancer survivor, this means getting colon or rectal cancer again in the future.  1. More likely to get colon or rectal cancer 2. Less likely 3. About as likely Refused Don't know |
| Question Type        | Pick One - answer list pane   |
| Field Pane Descripti | on Risk of cancer   |
| Fill Instructions    | Fill1: If SEX=1 fill "man"; else fill "woman"   |
| Special Instructions |   |
| Skip Instructions    | <1-3,R,D> [if SEX = 1, goto next section; else if SEX = 2, goto GTCBOM]   |
| Hard Edits           |   |
| Soft Edits           |   |
| AssocHelp            |   |

| Module                 | 31  |
|------------------------|---|
| Section Name           | Genetic Testing   |
| Part                   |   |
| Question ID            | NAG.090_00.000  |
| Variable Name          | GTCBOM  |
| Universe               | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999')) and SEX='2'  |
| Universe-text          | Female sample adults age 18+  |
| Question Text          | Compared to the average woman your age, would you say that you are more likely to get breast cancer, less likely, or about as likely? |
|                        | *Read if necessary.   |
|                        | For a breast cancer survivor, this means getting breast cancer again in the future.   |
| Answer Codes           | More likely to get breast cancer     Less likely     About as likely     Refused     Don't know                                       |
| Question Type          | Pick One - answer list pane   |
| Field Pane Description | n Risk of breast cancer   |
| Fill Instructions      |   |
| Special Instructions   |   |
| Skip Instructions      | <1-3,R,D> [goto next section]   |
| Hard Edits             |   |
| Soft Edits             |   |
| AssocHelp              |   |

# 2015 Q1 NHIS Instrument Spec Report

| Section nan            | ne: Family History   |
|------------------------|--|
| Module                 | 32   |
| Section Name           | Family History   |
| Part                   |  |
| Question ID            | NAH.010_00.000   |
| Variable Name          | FHFCAN   |
| Universe               | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999'))   |
| Universe-text          | Sample adults 18+  |
| Question Text          | We would like to ask you a few questions about your family history of cancer. Did your BIOLOGICAL FATHER EVER have cancer of any kind? |
| Answer Codes           | 1. Yes 2. No 3. Adopted or don't know biological father Refused Don't know   |
| Question Type          | Pick One - answer list pane  |
| Field Pane Description | on Father had cancer   |
| Fill Instructions      |  |
| Special Instructions   |  |
| Skip Instructions      | <1> [goto FHFTYP_1]<br><2,3,RF,DK> [goto FHMCAN]   |
| Hard Edits             |  |
| Soft Edits             |  |
| AssocHelp              |  |

| M. J.J.                                   | 32   |
|---|--|
| Module                                    |  |
| Section Name                              | Family History   |
| Part                                      |  |
| Question ID                               | NAH.020_01.000   |
| Variable Name                             | FHFTYP_1   |
| Universe                                  | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999')) and FHFCAN=1  |
| Universe-text                             | Sample adults 18+ whose father ever had cancer   |
| Question Text                             | What kind of cancer did your father have?  |
|   | * Enter code for the first kind of cancer.   |
| Answer Codes                              | 1. Bladder 2. Blood 3. Bone 4. Brain 5. Breast 6. Cervix 7. Colon 8. Esophagus 9. Gallbladder 10. Kidney 11. Larynx-windpipe 12. Leukemia 13. Liver 14. Lung 15. Lymphoma 16. Melanoma 17. Mouth/tongue/lip 18. Ovary 19. Pancreas 20. Prostate 21. Rectum 22. Skin (non-melanoma) 23. Skin (don't know what kind) 24. Soft tissue (muscle or fat) 25. Stomach 26. Testis 27. Throat - pharynx 28. Thyroid 29. Uterus 30. Other Refused Don't know |
| Question Type Pick One - answer list pane |  |
| Field Pane Descripti                      | Kind of cancer_1   |
| Fill Instructions                         |  |
| Special Instructions                      |  |
| Skip Instructions                         | <1-5,7-17,19-28,30,RF,DK> goto FHFAGE1<br><6,18,29> goto ERR_FHFTYP_1  |

| Hard Edits | ERR_FHFTYP_1                                   |
|------------|--|
|            | * Code 6 or 18 or 29 is unavailable for males. |
| Soft Edits |  |
| AssocHelp  |  |

| 36.1.1                 | 00   |
|------------------------|--|
| Module                 | 32   |
| Section Name           | Family History   |
| Part                   |  |
| Question ID            | NAH.020_02.000   |
| Variable Name          | FHFTYP_2   |
| Universe               | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and (FHFAGE1=1,2, DK or (FHFAGE1=RF and FHFTYP_1 ne RF))   |
| Universe-text          | Sample adults 18+ who either provided an age range for a first kind of cancer or didn't know how old father was when first diagnosed with that kind of cancer or else refused to provide an age range and had not refused to give first kind of cancer   |
| Question Text          | * Enter code for the second kind of cancer.  |
|                        | * Enter '96' for no more.  |
| Answer Codes           | 1. Bladder 2. Blood 3. Bone 4. Brain 5. Breast 6. Cervix 7. Colon 8. Esophagus 9. Gallbladder 10. Kidney 11. Larynx-windpipe 12. Leukemia 13. Liver 14. Lung 15. Lymphoma 16. Melanoma 17. Mouth/tongue/lip 18. Ovary 19. Pancreas 20. Prostate 21. Rectum 22. Skin (non-melanoma) 23. Skin (don't know what kind) 24. Soft tissue (muscle or fat) 25. Stomach 26. Testis 27. Throat - pharynx 28. Thyroid 29. Uterus 30. Other 96. No more Refused Don't know |
|                        | Don't know   |
| Question Type          | Pick One - answer list pane  |
| Field Pane Description | Nind of cancer_2   |

Fill Instructions

### **Special Instructions**

Gray out answer categories 6, 18, and 29. Gray out whatever option was selected in FHFTYP\_1 to indicate that that option is now not available. Make sure that if this option is selected it triggers the error message that this is an invalid option.

#### Skip Instructions

<1-5,7-17,19-28,30,RF,DK> if FHFTYP\_2 = FHFTYP\_1 goto ERR2\_FHFTYP\_2 else goto FHFAGE2 <96> goto FHMCAN <6,18,29> goto ERR1\_FHFTYP\_2

#### Hard Edits

ERR1\_FHFTYP\_2

\* Code 6 or 18 or 29 is unavailable for males.

ERR2 FHFTYP 2

\* Cannot select pre-selected answer.

Default should go to FHFTYP\_2

# Soft Edits

32 Module **Family History** Section Name **Part** Question ID NAH.020\_03.000 Variable Name FHFTYP\_3 HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999')) and (FHFAGE2=1,2, Universe DK or (FHFAGE2=RF and FHFTYP\_2 ne RF)) Sample adults 18+ who either provided an age range for a second kind of cancer or Universe-text didn't know how old father was when first diagnosed with that kind of cancer or else refused to provide an age range and had not refused to give a second type of cancer \* Enter code for the third kind of cancer. **Question Text** \* Enter '96' for no more. **Answer Codes** 1. Bladder 2. Blood 3. Bone 4. Brain 5. Breast 6. Cervix 7. Colon 8. Esophagus 9. Gallbladder 10. Kidnev 11. Larynx-windpipe 12. Leukemia 13. Liver 14. Lung 15. Lymphoma 16. Melanoma 17. Mouth/tongue/lip 18. Ovary 19. Pancreas 20. Prostate 21. Rectum 22. Skin (non-melanoma) 23. Skin (don't know what kind) 24. Soft tissue (muscle or fat) 25. Stomach 26. Testis 27. Throat - pharynx 28. Thyroid 29. Uterus 30. Other 96. No more Refused Don't know Question Type Pick One - answer list pane Field Pane Description Kind of cancer 3

Fill Instructions

### **Special Instructions**

Gray out answer categories 6, 18, and 29. Gray out whatever option was selected in FHFTYP\_1 and FHFTYP\_2 to indicate that those options were already chosen. Make sure that if this option is selected it triggers the error message that this is an invalid option.

#### Skip Instructions

<1-5,7-17,19-28,30,RF,DK> if FHFTYP\_3 = FHFTYP\_1 or FHFTYP\_2 goto ERR2\_FHFTYP\_3

else goto FHFAGE3 <96> goto FHMCAN <6,18,29> goto ERR1\_FHFTYP\_3

#### **Hard Edits**

ERR1\_FHFTYP\_3

\* Code 6 or 18 or 29 is unavailable for males.

ERR2 FHFTYP 3

\* Cannot select pre-selected answer.

Default should go to FHFTYP\_3

#### Soft Edits

32 Module **Family History** Section Name **Part** Question ID NAH.020\_04.000 Variable Name FHFTYP\_4 HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999')) and (FHFAGE3=1,2, Universe DK or (FHFAGE3=RF and FHFTYP\_3 ne RF)) Sample adults 18+ who either provided an age range for a third kind of cancer or didn't Universe-text know how old father was when first diagnosed that kind of cancer or else refused to provide an age range but had not refused to give a third kind of cancer \* Enter '95' if respondent offers more than 3 kinds of cancer. **Question Text** \* Enter '96' for no more. **Answer Codes** 1. Bladder 2. Blood 3. Bone 4. Brain 5. Breast 6. Cervix 7. Colon 8. Esophagus 9. Gallbladder 10. Kidnev 11. Larynx-windpipe 12. Leukemia 13. Liver 14. Lung 15. Lymphoma 16. Melanoma 17. Mouth/tongue/lip 18. Ovary 19. Pancreas 20. Prostate 21. Rectum 22. Skin (non-melanoma) 23. Skin (don't know what kind) 24. Soft tissue (muscle or fat) 25. Stomach 26. Testis 27. Throat - pharynx 28. Thyroid 29. Uterus 30. Other 95. More than 3 kinds of cancer 96. No more Refused Don't know

Question Type

Pick One - answer list pane

Field Pane Description

More than 3 kinds of cancer

| Fill Instructions     |  |
|-----------------------|--|
| Special Instructions  | Do not allow an answer of "Don't know" or "Refused".   |
|                       | Gray out answer categories 6, 18, and 29. Gray out whatever options were selected in FHFTYP_1, FHFTYP_2 and FHFTYP_3 to indicate that those options were already chosen. The only valid options for this question are 95 and 96. |
| Chin In street of one | <95,96> goto FHMCAN  |
| Skip Instructions     | <1-30> goto ERR_FHFTYP_4   |
| Hard Edits            | ERR_FHFTYP_4   |
|                       | * The only valid answers are '95' and '96' for this screen.  |
| Soft Edits            |  |
| AssocHelp             |  |

32 **Module Family History** Section Name Part Question ID NAH.030 01.000 Variable Name FHFAGE1 HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999')) and FHFTYP\_1=1-5,7-Universe 17,19-28,30,RF,DK Sample adults 18+ who selected a first kind of cancer for father or refused to answer or Universe-text didn't know kind of cancer Was your biological father under 50 years of age when [Fill: FHFTYP 1] was first **Ouestion Text** diagnosed? **Answer Codes** 1. Yes 2. No Refused Don't know Question Type Yes/No Field Pane Description Father's age 1 Fill: bladder cancer if FHFTYP 1 = 1 Fill Instructions blood cancer if FHFTYP 1 = 2 bone cancer if FHFTYP\_1 = 3 brain cancer if FHFTYP 1 = 4 breast cancer if FHFTYP 1 = 5 cervical cancer if FHFTYP 1 = 6 colon cancer if FHFTYP\_1 = 7 esophageal cancer if FHFTYP 1 = 8 gallbladder cancer if FHFTYP\_1 = 9 kidney cancer if FHFTYP\_1 = 10 larynx-windpipe cancer if FHFTYP 1 = 11 leukemia if FHFTYP 1 = 12 liver cancer if FHFTYP 1 = 13 lung cancer if FHFTYP\_1 = 14 lymphoma if  $FHFTYP_1 = 15$ melanoma if FHFTYP 1 = 16 mouth/tongue/lip cancer if FHFTYP 1 = 17 ovarian cancer if FHFTYP 1 = 18 pancreatic cancer if FHFTYP\_1 = 19 prostate cancer if FHFTYP 1 = 20 rectal cancer if FHFTYP 1 = 21 skin (non-melanoma) cancer if FHFTYP\_1 = 22 skin (don't know what kind) cancer if FHFTYP\_1 = 23 soft tissue (muscle or fat) cancer if FHFTYP 1 = 24 stomach cancer if FHFTYP\_1 = 25 testicular cancer if FHFTYP 1 = 26 throat/pharynx cancer if FHFTYP 1 = 27 thyroid cancer if FHFTYP 1 = 28 uterine cancer if FHFTYP 1 = 29 other cancer if FHFTYP 1 = 30

this cancer if FHTYP\_1 = Refused or Don't know

| Special Instructions |   |
|----------------------|---|
| Skip Instructions    | <1,2,DK> goto FHFTYP_2<br><rf> IF FHFTYP_1=RF [goto FHMCAN]<br/>else if FHFTYP_1 NE RF [goto FHFTYP_2]</rf> |
| Hard Edits           |   |
| Soft Edits           |   |
| AssocHelp            |   |

32 **Module Family History** Section Name Part Question ID NAH.030 02.000 Variable Name FHFAGE2 HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999')) and FHFTYP\_2=1-5,7-Universe 17,19-28,30,RF,DK Sample adults 18+ who selected a second kind of cancer for father or refused to Universe-text answer or didn't know kind of cancer Was your biological father under 50 years of age when [Fill: FHFTYP 2] was first **Ouestion Text** diagnosed? Answer Codes 1. Yes 2. No Refused Don't know Question Type Yes/No Field Pane Description Father's age 2 Fill: bladder cancer if FHFTYP 2 = 1 Fill Instructions blood cancer if FHFTYP 2 = 2 bone cancer if FHFTYP\_2 = 3 brain cancer if FHFTYP 2 = 4 breast cancer if FHFTYP 2 = 5 cervical cancer if FHFTYP 2 = 6 colon cancer if FHFTYP\_2 = 7 esophageal cancer if FHFTYP 2 = 8 gallbladder cancer if FHFTYP 2 = 9 kidney cancer if FHFTYP 2 = 10 larynx-windpipe cancer if FHFTYP 2 = 11 leukemia if FHFTYP 2 = 12 liver cancer if FHFTYP 2 = 13 lung cancer if FHFTYP\_2 = 14 lymphoma if FHFTYP $_{2}$  = 15 melanoma if FHFTYP 2 = 16 mouth/tongue/lip cancer if FHFTYP 2 = 17 ovarian cancer if FHFTYP 2 = 18 pancreatic cancer if FHFTYP\_2 = 19 prostate cancer if FHFTYP 2 = 20 rectal cancer if FHFTYP 2 = 21 skin (non-melanoma) cancer if FHFTYP\_2 = 22 skin (don't know what kind) cancer if FHFTYP\_2 = 23 soft tissue (muscle or fat) cancer if FHFTYP 2 = 24 stomach cancer if FHFTYP\_2 = 25 testicular cancer if FHFTYP 2 = 26 throat/pharynx cancer if FHFTYP 2 = 27 thyroid cancer if FHFTYP 2 = 28 uterine cancer if FHFTYP\_2 = 29 other cancer if FHFTYP 2 = 30

this cancer if FHFTYP\_2 = Refused or Don't know

| Special Instructions |   |
|----------------------|---|
| Skip Instructions    | <1,2,DK> goto FHFTYP_3<br><rf> IF FHFTYP_2=RF [goto FHMCAN]<br/>else if FHFTYP NE RF [goto FHFTYP_3]</rf> |
| Hard Edits           |   |
| Soft Edits           |   |
| AssocHelp            |   |

32 **Module Family History** Section Name Part Question ID NAH.030 03.000 Variable Name FHFAGE3 HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999')) and FHFTYP\_3=1-5,7-Universe 17,19-28,30,RF,DK Sample adults 18+ who selected a third kind of cancer for father or refused to answer Universe-text or didn't know kind of cancer Was your biological father under 50 years of age when [Fill: FHFTYP 3] was first **Ouestion Text** diagnosed? Answer Codes 1. Yes 2. No Refused Don't know Question Type Yes/No Field Pane Description Father's age 3 Fill: bladder cancer if FHFTYP 3 = 1 Fill Instructions blood cancer if FHFTYP 3 = 2 bone cancer if FHFTYP\_3 = 3 brain cancer if FHFTYP 3 = 4 breast cancer if FHFTYP 3 = 5 cervical cancer if FHFTYP 3 = 6 colon cancer if FHFTYP\_3 = 7 esophageal cancer if FHFTYP 3 = 8 gallbladder cancer if FHFTYP 3 = 9 kidney cancer if FHFTYP 3 = 10 larynx-windpipe cancer if FHFTYP 3 = 11 leukemia if FHFTYP 3 = 12 liver cancer if FHFTYP 3 = 13 lung cancer if FHFTYP\_3 = 14 lymphoma if FHFTYP\_3 = 15 melanoma if FHFTYP 3 = 16 mouth/tongue/lip cancer if FHFTYP 3 = 17 ovarian cancer if FHFTYP 3 = 18 pancreatic cancer if FHFTYP\_3 = 19 prostate cancer if FHFTYP 3 = 20 rectal cancer if FHFTYP 3 = 21 skin (non-melanoma) cancer if FHFTYP\_3 = 22 skin (don't know what kind) cancer if FHFTYP\_3 = 23 soft tissue (muscle or fat) cancer if FHFTYP 3 = 24 stomach cancer if FHFTYP\_3 = 25 testicular cancer if FHFTYP 3 = 26 throat/pharynx cancer if FHFTYP 3 = 27 thyroid cancer if FHFTYP\_3 = 28 uterine cancer if FHFTYP\_3 = 29 other cancer if FHFTYP 3 = 30this cancer if FHFTYP\_3 = Refused or Don't know

| Special Instructions   |   |
|------------------------|---|
| Skip Instructions      | <1,2,DK> goto FHFTYP_4<br><rf> IF FHFTYP_3=RF [goto FHMCAN]<br/>else if FHFTYP_3 NE RF [goto FHFTYP_4]</rf> |
| Hard Edits             |   |
| Soft Edits             |   |
| AssocHelp              |   |
| Module                 | 32  |
| Section Name           | Family History  |
| Part                   |   |
| Question ID            | NAH.040_00.000  |
| Variable Name          | FHMCAN  |
| Universe               | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999'))   |
| Universe-text          | Sample adults 18+   |
| Question Text          | Did your BIOLOGICAL MOTHER EVER have cancer of any kind?  |
| Answer Codes           | 1. Yes 2. No 3. Adopted or don't know biological mother Refused Don't know                                  |
| Question Type          | Pick One - answer list pane   |
| Field Pane Description | on Mother had cancer  |
| Fill Instructions      |   |
| Special Instructions   |   |
| Skip Instructions      | <1> [goto FHMTYP_1]<br><2,3,RF,DK> [goto FHBNUM]  |
| Hard Edits             |   |
| Soft Edits             |   |
| AssocHelp              |   |

32 Module **Family History** Section Name **Part Question ID** NAH.050\_01.000 Variable Name FHMTYP\_1 HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999')) and FHMCAN=1 Universe Universe-text Sample adults 18+ whose mother ever had cancer Question Text What kind of cancer did your mother have? \* Enter code for the first kind of cancer. **Answer Codes** 1. Bladder 2. Blood 3. Bone 4. Brain 5. Breast 6. Cervix 7. Colon 8. Esophagus 9. Gallbladder 10. Kidney 11. Larynx-windpipe 12. Leukemia 13. Liver 14. Lung 15. Lymphoma 16. Melanoma 17. Mouth/tongue/lip 18. Ovarv 19. Pancreas 20. Prostate 21. Rectum 22. Skin (non-melanoma) 23. Skin (don't know what kind) 24. Soft tissue (muscle or fat) 25. Stomach 26. Testis 27. Throat - pharynx 28. Thyroid 29. Uterus 30. Other Refused Don't know Question Type Pick One - answer list pane Field Pane Description Kind of cancer\_1 Fill Instructions Special Instructions | Gray out answer categories 20 and 26. <1-19,21-25,27-30,RF,DK> goto FHMAGE1 Skip Instructions

<20,26> goto ERR\_FHMTYP\_1

| Hard Edits | ERR_FHMTYP_1                                |
|------------|---|
|            | * Code 20 or 26 is unavailable for females. |
| Soft Edits |   |
| AssocHelp  |   |

| Module                              | 32   |
|-------------------------------------|--|
| Section Name                        | Family History   |
| Part                                |  |
| Question ID                         | NAH.050_02.000   |
| Variable Name                       | FHMTYP_2   |
| Universe                            | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and (FHMAGE1=1,2,DK or (FHMAGE1=RF and FHMTYP_1 ne RF))  |
| Universe-text                       | Sample adults 18+ who either provided an age range for a first kind of cancer or didn't know how old mother was when first diagnosed with that kind of cancer or else refused to provide an age range and had not refused to answer a first kind of cancer   |
| Question Text                       | * Enter code for the second kind of cancer.  |
|                                     | * Enter '96' for no more.  |
| Answer Codes                        | 1. Bladder 2. Blood 3. Bone 4. Brain 5. Breast 6. Cervix 7. Colon 8. Esophagus 9. Gallbladder 10. Kidney 11. Larynx-windpipe 12. Leukemia 13. Liver 14. Lung 15. Lymphoma 16. Melanoma 17. Mouth/tongue/lip 18. Ovary 19. Pancreas 20. Prostate 21. Rectum 22. Skin (non-melanoma) 23. Skin (don't know what kind) 24. Soft tissue (muscle or fat) 25. Stomach 26. Testis 27. Throat - pharynx 28. Thyroid 29. Uterus 30. Other 96. No more Refused Don't know |
| Quarties Tons                       |  |
| Question Type  Field Pane Descripti | Pick One - answer list pane  |
| Field Pane Descripti                | on Kind of cancer_2  |

Fill Instructions

Default should go to FHMTYP\_2

Soft Edits

32 **Module Family History** Section Name **Part Question ID** NAH.050\_03.000 Variable Name FHMTYP\_3 HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and Universe (FHMAGE2=1,2,DK or (FHMAGE2=RF and FHMTYP\_2 ne RF)) Sample adults 18+ who either provided an age range for a second kind of cancer or Universe-text didn't know how old mother was when first diagnosed with that kind of cancer or else refused to provide an age range and had not refused to answer a second kind of cancer \* Enter code for the third kind of cancer. **Question Text** \* Enter '96' for no more. Answer Codes 1. Bladder 2. Blood 3. Bone 4. Brain 5. Breast 6. Cervix 7. Colon 8. Esophagus 9. Gallbladder 10. Kidney 11. Larynx-windpipe 12. Leukemia 13. Liver 14. Lung 15. Lymphoma 16. Melanoma 17. Mouth/tongue/lip 18. Ovary 19. Pancreas 20. Prostate 21. Rectum 22. Skin (non-melanoma) 23. Skin (don't know what kind) 24. Soft tissue (muscle or fat) 25. Stomach 26. Testis 27. Throat - pharynx 28. Thyroid 29. Uterus 30. Other 96. No more Refused Don't know

Question Type

Pick One - answer list pane

Field Pane Description

Kind of cancer 3

# Fill Instructions **Special Instructions** Gray out answer categories 20 and 26. Gray out whatever option was selected in FHMTYP\_1 and FHMTYP\_2 to indicate that those options were already chosen. Make sure that if this option is selected it triggers the error message that this is an invalid option. <1-19,21-25,27-30,RF,DK> if FHMTYP\_3 = FHMTYP\_1 or FHMTYP\_2 goto Skip Instructions ERR2\_FHMTYP\_3 else goto FHMAGE3 <96> goto FHBNUM <20,26> goto ERR1\_FHMTYP\_3 ERR\_FHMTYP\_3 **Hard Edits** \* Code 20 or 26 is unavailable for females. ERR2\_FHMTYP\_3 \* Cannot select pre-selected answer. Default should go to FHMTYP 3 Soft Edits

32 Module **Family History** Section Name **Part Question ID** NAH.050\_04.000 Variable Name FHMTYP\_4 HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999')) and Universe (FHMAGE3=1,2,DK or (FHMAGE3=RF and FHMTYP\_3 ne RF)) Sample adults 18+ who either provided an age range for a third kind of cancer or didn't Universe-text know how old mother was when first diagnosed with that kind of cancer or else refused to provide an age range but had not refused to answer a third kind of cancer \* Enter '95' if respondent offers more than 3 kinds of cancer. **Question Text** \* Enter '96' for no more. **Answer Codes** 1. Bladder 2. Blood 3. Bone 4. Brain 5. Breast 6. Cervix 7. Colon 8. Esophagus 9. Gallbladder 10. Kidnev 11. Larynx-windpipe 12. Leukemia 13. Liver 14. Lung 15. Lymphoma 16. Melanoma 17. Mouth/tongue/lip 18. Ovary 19. Pancreas 20. Prostate 21. Rectum 22. Skin (non-melanoma) 23. Skin (don't know what kind) 24. Soft tissue (muscle or fat ) 25. Stomach 26. Testis 27. Throat - pharynx 28. Thyroid 29. Uterus 30. Other 95. More than 3 kinds of cancer 96. No more Refused Don't know

Question Type

Pick One - answer list pane

Field Pane Description

More than 3 kinds of cancer

| Fill Instructions    |  |
|----------------------|--|
| Special Instructions | Do not allow an answer of "Don't know" or "Refused".   |
|                      | Gray out answer categories 20 and 26. Gray out whatever options were selected in FHMTYP_1, FHMTYP_2 and FHMTYP_3 to indicate that those options were already chosen. The only valid options for this question are 95 and 96. |
| Chin Instructions    | <95,96> goto FHBNUM  |
| Skip Instructions    | <1-30> ERR_FHMTYP_4  |
| Hard Edits           | ERR_FHMTYP_4   |
|                      | * The only valid answers are '95' and '96' for this screen.  |
| Soft Edits           |  |
| AssocHelp            |  |

32 **Module Family History** Section Name Part **Question ID** NAH.060 01.000 Variable Name FHMAGE1 HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and FHMTYP\_1=1-Universe 19,21-25,27-30,RF,DK Sample adults 18+ who selected a first kind of cancer for mother or refused to answer Universe-text or didn't know kind of cancer Was your biological mother under 50 years of age when [Fill: FHMTYP 1] was first **Ouestion Text** diagnosed? Answer Codes 1. Yes 2. No Refused Don't know Question Type Yes/No Field Pane Description Mother's age 1 Fill: bladder cancer if FHMTYP 1 = 1 Fill Instructions blood cancer if FHMTYP 1 = 2 bone cancer if  $FHMTYP_1 = 3$ brain cancer if FHMTYP 1 = 4 breast cancer if FHMTYP 1 = 5 cervical cancer if FHMTYP 1 = 6 colon cancer ifFHMTYP\_1 = 7 esophageal cancer if FHMTYP 1 = 8 gallbladder cancer if FHMTYP 1 = 9 kidney cancer if FHMTYP 1 = 10 larynx-windpipe cancer if FHMTYP 1 = 11 leukemia if FHMTYP 1 = 12 liver cancer if FHMTYP 1 = 13 lung cancer if FHMTYP 1 = 14 lymphoma if FHMTYP\_1 = 15 melanoma if FHMTYP 1 = 16 mouth/tongue/lip cancer if FHMTYP 1 = 17 ovarian cancer if FHMTYP 1 = 18 pancreatic cancer if FHMTYP\_1 = 19 prostate cancer if FHMTYP\_1 = 20 rectal cancer if FHMTYP\_1 = 21 skin (non-melanoma) cancer if FHMTYP\_1 = 22 skin (don't know what kind) cancer if FHMTYP\_1 = 23 soft tissue (muscle or fat) cancer if FHMTYP 1 = 24 stomach cancer if FHMTYP\_1 = 25 testicular cancer if FHMTYP\_1 = 26 throat/pharynx cancer if FHMTYP\_1 = 27 thyroid cancer if FHMTYP 1 = 28 uterine cancer if FHMTYP 1 = 29 other cancer if FHMTYP 1 = 30

this cancer if FHMTYP\_1 = Refused or Don't know

| Special Instructions |   |
|----------------------|---|
| Skip Instructions    | <1,2,DK> goto FHMTYP_2<br><rf> IF FHMTYP_1=RF goto FHBNUM<br/>else if FHMTYP_1 NE RF goto FHMTYP_2</rf> |
| Hard Edits           |   |
| Soft Edits           |   |
| AssocHelp            |   |

32 **Module Family History** Section Name Part Question ID NAH.060 02.000 Variable Name FHMAGE2 HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and FHMTYP\_2 = 1-Universe 19,21-25,27-30,RF,DK Sample adults 18+ who selected a second kind of cancer for mother or refused to Universe-text answer or didn't know kind of cancer Was your biological mother under 50 years of age when [Fill: FHMTYP 2] was first **Ouestion Text** diagnosed? Answer Codes 1. Yes 2. No Refused Don't know Question Type Yes/No Field Pane Description Mother's age 2 Fill: bladder cancer if FHMTYP 2 = 1 Fill Instructions blood cancer if FHMTYP 2 = 2 bone cancer if FHMTYP\_2 = 3 brain cancer if FHMTYP 2 = 4 breast cancer if FHMTYP 2 = 5 cervical cancer if FHMTYP 2 = 6 colon cancer if FHMTYP\_2 = 7 esophageal cancer if FHMTYP 2 = 8 gallbladder cancer if FHMTYP 2 = 9 kidney cancer if FHMTYP 2 = 10 larynx-windpipe cancer if FHMTYP 2 = 11 leukemia if FHMTYP 2 = 12 liver cancer if FHMTYP 2 = 13 lung cancer if FHMTYP 2 = 14 lymphoma if FHMTYP\_2 = 15 melanoma if FHMTYP 2 = 16 mouth/tongue/lip cancer if FHMTYP 2 = 17 ovarian cancer if FHMTYP 2 = 18 pancreatic cancer if FHMTYP\_2 = 19 prostate cancer if FHMTYP 2 = 20 rectal cancer if FHMTYP 2 = 21 skin (non-melanoma) cancer if FHMTYP\_2 = 22 skin (don't know what kind) cancer if FHMTYP\_2 = 23 soft tissue (muscle or fat) cancer if FHMTYP 2 = 24 stomach cancer if FHMTYP\_2 = 25 testicular cancer if FHMTYP 2 = 26 throat/pharynx cancer if FHMTYP 2 = 27 thyroid cancer if FHMTYP 2 = 28 uterine cancer if FHMTYP 2 = 29 other cancer if FHMTYP 2 = 30

this cancer if FHMTYP\_2 = Refused or Don't know

| Special Instructions |   |
|----------------------|---|
| Skip Instructions    | <1,2,DK> goto FHMTYP_3<br><rf> IF FHMTYP_2=RF goto FHBCAN<br/>else if FHMTYP_2 NE RF goto FHMTYP_3</rf> |
| Hard Edits           |   |
| Soft Edits           |   |
| AssocHelp            |   |

32 **Module Family History** Section Name Part Question ID NAH.060 03.000 Variable Name FHMAGE3 HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and FHMTYP\_3 = 1-Universe 19,21-25,27-30,RF,DK Sample adults 18+ who selected a third kind of cancer for mother or refused to answer Universe-text or didn't know kind of cancer Was your biological mother under 50 years of age when [Fill: FHMTYP 3] was first **Ouestion Text** diagnosed? Answer Codes 1. Yes 2. No Refused Don't know Question Type Yes/No Field Pane Description Mother's age 3 Fill: bladder cancer if FHMTYP 3 = 1 Fill Instructions blood cancer if FHMTYP 3 = 2 bone cancer if FHMTYP\_3 = 3 brain cancer if FHMTYP 3 = 4 breast cancer if FHMTYP 3 = 5 cervical cancer if FHMTYP 3 = 6 colon cancer if FHMTYP\_3 = 7 esophageal cancer if FHMTYP 3 = 8 gallbladder cancer if FHMTYP 3 = 9 kidney cancer if FHMTYP 3 = 10 larynx-windpipe cancer if FHMTYP 3 = 11 leukemia if FHMTYP 3 = 12 liver cancer if FHMTYP 3 = 13 lung cancer if FHMTYP 3 = 14 lymphoma if FHMTYP\_3 = 15 melanoma if FHMTYP 3 = 16 mouth/tongue/lip cancer if FHMTYP 3 = 17 ovarian cancer if FHMTYP 3 = 18 pancreatic cancer if FHMTYP\_3 = 19 prostate cancer if FHMTYP 3 = 20 rectal cancer if FHMTYP\_3 = 21 skin (non-melanoma) cancer if FHMTYP\_3 = 22 skin (don't know what kind) cancer if FHMTYP\_3 = 23 soft tissue (muscle or fat) cancer if FHMTYP 3 = 24 stomach cancer if FHMTYP\_3 = 25 testicular cancer if FHMTYP 3 = 26 throat/pharynx cancer if FHMTYP 3 = 27 thyroid cancer if FHMTYP 3 = 28 uterine cancer if FHMTYP 3 = 29 other cancer if FHMTYP 3 = 30this cancer if FHMTYP 3 = Refused or Don't know

| Special Instructions   |  |
|------------------------|--|
| Skip Instructions      | <1,2,DK> goto FHMTYP_4 <rf> IF FHMTYP_3=RF goto FHBNUM else if FHMTYP_3 NE RF goto FHMTYP_4</rf>   |
| Hard Edits             |  |
| Soft Edits             |  |
| AssocHelp              |  |
| Module                 | 32   |
| Section Name           | Family History   |
| Part                   |  |
| Question ID            | NAH.070_00.000   |
| Variable Name          | FHBNUM   |
| Universe               | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999'))  |
| Universe-text          | Sample adults 18+  |
| Question Text          | FULL BROTHERS have the same biological mother and father as you. How many FULL BROTHERS do you have? Please include any who are alive and those who may have died. |
|                        | *Enter '0' for none.   |
|                        | *Enter '21' for 21 or more brothers.   |
| Answer Codes           |  |
| Question Type          | Integer  |
| Field Pane Description | on Number of brothers  |
| Fill Instructions      |  |
| Special Instructions   |  |
| Skip Instructions      | <0,RF,DK> [goto FHSNUM]<br><1-21>[goto FHBCAN]   |
| Hard Edits             |  |
| Soft Edits             |  |
| AssocHelp              |  |

|                      | 32  |
|----------------------|---|
| Section Name         | Family History  |
| Part                 |   |
| Question ID          | NAH.080_00.000  |
| Variable Name        | FHBCAN  |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999')) and FHBNUM=1-21        |
| Universe-text        | Sample adults 18+ who have at least one full brother                                |
| Question Text        | [Fill1: Did your BROTHER EVER have cancer of any kind?                              |
|                      | *Enter '0' if brother has not had any kind of cancer.                               |
|                      | *Enter '1' if brother has had cancer.]  |
|                      | [Fill2: How many of your BROTHERS have EVER had cancer of any kind?                 |
|                      | *Enter '0' for none.  |
|                      | *Enter '21' for 21 or more brothers.]   |
| Answer Codes         |   |
| Question Type        | Integer   |
| Field Pane Descript  | ion Brother(s) with cancer  |
| Fill Instructions    | Fill1: if FHBNUM=1<br>Fill2: if FHBNUM 2-21   |
| Special Instructions |   |
| Skip Instructions    | <0,RF,DK> goto FHSNUM <1-21> if FHBCAN GT FHBNUM goto ERR_FHBCAN else goto FHBTYP_1 |
| Hard Edits           | ERR_FHBCAN  |
|                      | * Number is greater than number of brothers. * Please correct.                      |
|                      | Default should go to FHBCAN   |
| Soft Edits           |   |
| AssocHelp            |   |

32 Module **Family History** Section Name **Part** Question ID NAH.090\_01.000 Variable Name FHBTYP\_1 HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and FHBCAN 1-21 Universe Sample adults 18+ whose brother(s) ever had cancer Universe-text What kinds of cancer did your [Fill1: brother/Fill2: brothers] have? Question Text \* Enter code for the first kind of cancer. **Answer Codes** 1. Bladder 2. Blood 3. Bone 4. Brain 5. Breast 6. Cervix 7. Colon 8. Esophagus 9. Gallbladder 10. Kidney 11. Larynx-windpipe 12. Leukemia 13. Liver 14. Lung 15. Lymphoma 16. Melanoma 17. Mouth/tongue/lip 18. Ovarv 19. Pancreas 20. Prostate 21. Rectum 22. Skin (non-melanoma) 23. Skin (don't know what kind) 24. Soft tissue (muscle or fat) 25. Stomach 26. Testis 27. Throat - pharynx 28. Thyroid 29. Uterus 30. Other Refused Don't know Question Type Pick One - answer list pane Field Pane Description Kind of cancer\_1 Fill1: if FHBCAN=1 Fill Instructions Fill2: if FHBCAN=2-21 *Special Instructions* | if FHBCAN = '1' store '1' in FHBMAN1

|                   | Gray out answer categories 6, 18, 29.  |
|-------------------|--|
| Skip Instructions | <1-5,7-17,19-28,30,RF,DK> if FHBCAN = '1' goto FHBAGE1<br>else goto FHBMAN1<br><6,18,29> goto ERR_FHBTYP_1 |
|                   |  |
| Hard Edits        | ERR_FHBTYP_1   |
|                   | * Code 6 or 18 or 29 is unavailable for males.   |
| Soft Edits        |  |
| AssocHelp         |  |

32 **Module Family History** Section Name **Part** Question ID NAH.090\_02.000 Variable Name FHBTYP\_2 HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and (FHBAGE1=0-Universe 21,DK or (FHBAGE1=RF and FHBTYP\_1 ne RF)) Sample adults 18+ who provided age range for brother(s) diagnosed with the first kind Universe-text of cancer or didn't know how old brother(s) was/were when first diagnosed with that kind of cancer or else refused to provide an age range and had not refused to answer the first kind of cancer \* Enter code for the second kind of cancer. **Question Text** \* Enter '96' for no more. Answer Codes 1. Bladder 2. Blood 3. Bone 4. Brain 5. Breast 6. Cervix 7. Colon 8. Esophagus 9. Gallbladder 10. Kidney 11. Larynx-windpipe 12. Leukemia 13. Liver 14. Lung 15. Lymphoma 16. Melanoma 17. Mouth/tongue/lip 18. Ovary 19. Pancreas 20. Prostate 21. Rectum 22. Skin (non-melanoma) 23. Skin (don't know what kind) 24. Soft tissue (muscle or fat) 25. Stomach 26. Testis 27. Throat - pharynx 28. Thyroid 29. Uterus 30. Other 96. No more Refused Don't know

Question Type

Pick One - answer list pane

Field Pane Description

Kind of cancer 2

# Fill Instructions if FHBCAN = '1' **Special Instructions** store '1' in FHBMAN2 Gray out answer categories 6, 18, 29. Gray out whatever option was selected in FHBTYP\_1 to indicate that that option is now not available. Make sure that if this option is selected it triggers the error message that this is an invalid option. <1-5,7-17,19-28,30,RF,DK> if FHBTYP\_2 = FHBTYP\_1 goto ERR2\_FHBTYP\_2 Skip Instructions elseif FHBCAN = '1' goto FHBAGE2 else goto FHBMAN2 <96> goto FHSNUM <6,18,29> goto ERR1\_FHBTYP\_2 ERR1\_FHBTYP\_2 Hard Edits \* Code 6 or 18 or 29 is unavailable for males.

Default should go to FHBTYP\_2

ERR2 FHBTYP 2

\* Cannot select pre-selected answer.

**AssocHelp** 

Soft Edits

32 **Module Family History** Section Name **Part** Question ID NAH.090\_03.000 Variable Name FHBTYP\_3 HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999')) and (FHBAGE2=0-Universe 21,DK or (FHBAGE2=RF and FHBTYP\_2 ne RF)) Sample adults 18+ who provided age range for brother(s) diagnosed with the second Universe-text kind of cancer or didn't know how old brother(s) was/were when first diagnosed with that kind of cancer or else refused to provide an age range and had not refused to answer the second kind of cancer \* Enter code for the third kind of cancer. **Question Text** \* Enter '96' for no more. Answer Codes 1. Bladder 2. Blood 3. Bone 4. Brain 5. Breast 6. Cervix 7. Colon 8. Esophagus 9. Gallbladder 10. Kidney 11. Larynx-windpipe 12. Leukemia 13. Liver 14. Lung 15. Lymphoma 16. Melanoma 17. Mouth/tongue/lip 18. Ovary 19. Pancreas 20. Prostate 21. Rectum 22. Skin (non-melanoma) 23. Skin (don't know what kind) 24. Soft tissue (muscle or fat) 25. Stomach 26. Testis 27. Throat - pharynx 28. Thyroid 29. Uterus 30. Other 96. No more Refused Don't know

Question Type

Pick One - answer list pane

Field Pane Description

Kind of cancer 3

## Fill Instructions

# **Special Instructions**

if FHBCAN = '1'

store '1' in FHBMAN3

Gray out answer categories 6, 18, 29. Gray out whatever option was selected in FHBTYP\_1 and FHBTYP\_2 to indicate that those options were already chosen. Make sure that if this option is selected it triggers the error message that this is an invalid option.

## Skip Instructions

<1-5,7-17,19-28,30,RF,DK> if FHBTYP\_3 = FHBTYP\_1 or FHBTYP\_2 goto

ERR2\_FHBTYP\_3

elseif FHBCAN = '1' goto FHBAGE3

else goto FHBMAN3 <96> goto FHSNUM

<6,18,29> goto ERR1\_FHBTYP\_3

## **Hard Edits**

ERR1\_FHBTYP\_3

\* Code 6 or 18 or 29 is unavailable for males.

ERR2 FHBTYP 3

\* Cannot select pre-selected answer.

Default should go to FHBTYP\_3

## Soft Edits

32 **Module Family History** Section Name **Part** Question ID NAH.090 04.000 Variable Name FHBTYP\_4 HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999')) and (FHBAGE3=0-Universe 21,DK or (FHBAGE3=RF and FHBTYP\_3 ne RF)) Sample adults 18+ who provided age range for brother(s) diagnosed with the third kind Universe-text of cancer or didn't know how old brother(s) was/were when first diagnosed with that kind of cancer or else refused to provide an age range and had not refused to answer the third kind of cancer \* Enter '95' if respondent offers more than 3 kinds of cancer. **Question Text** \* Enter '96' for no more. Answer Codes 1. Bladder 2. Blood 3. Bone 4. Brain 5. Breast 6. Cervix 7. Colon 8. Esophagus 9. Gallbladder 10. Kidney 11. Larynx-windpipe 12. Leukemia 13. Liver 14. Lung 15. Lymphoma 16. Melanoma 17. Mouth/tongue/lip 18. Ovary 19. Pancreas 20. Prostate 21. Rectum 22. Skin (non-melanoma) 23. Skin (don't know what kind) 24. Soft tissue (muscle or fat) 25. Stomach 26. Testis 27. Throat - pharynx 28. Thyroid 29. Uterus 30. Other 95. More than 3 kinds of cancer 96. No more Refused Don't know

## Question Type

Pick One - answer list pane

## Field Pane Description

More than 3 kinds of cancer

| Fill Instructions    |  |
|----------------------|--|
| Special Instructions | Do not allow an answer of "Don't know" or "Refused".   |
|                      | Gray out answer categories 6, 18, and 29. Gray out whatever options were selected in FHBTYP_1, FHBTYP_2 and FHBTYP_3 to indicate that those options were already chosen. The only valid options for this question are 95 and 96. |
|                      | OF OC. and FURNIUM   |
| Skip Instructions    | <95,96> goto FHSNUM<br><1-30> goto ERR_FHBTYP_4  |
| Hard Edits           | ERR_FHBTYP_4   |
| Hara Eaus            |  |
|                      | * The only valid answers are '95' and '96' for this screen.  |
| C C TI               |  |
| Soft Edits           |  |
| AssocHelp            |  |

32 **Module Family History** Section Name Part Question ID NAH.091 00.000 Variable Name FHBMAN1 HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999')) and FHBTYP 1=1-5,7-Universe 17,19-28,30,RF,DK and FHBCAN=2-21 Sample adults 18+ who have brothers with a first kind of cancer Universe-text How many brothers have had [Fill: FHBTYP 1]? **Ouestion Text** \*Enter '21' for 21 or more brothers. **Answer Codes Question** Type Integer Field Pane Description Brother(s)\_cancer type 1 Fill: bladder cancer if FHBTYP\_1 = 1 Fill Instructions blood cancer if FHBTYP 1 = 2 bone cancer if FHBTYP 1 = 3brain cancer if FHBTYP 1 = 4 breast cancer if FHBTYP 1 = 5 cervical cancer if FHBTYP 1 = 6 colon cancer if FHBTYP 1 = 7 esophageal cancer if FHBTYP\_1 = 8 gallbladder cancer if FHBTYP 1 = 9 kidney cancer if FHBTYP 1 = 10 larynx-windpipe cancer if FHBTYP 1 = 11 leukemia if FHBTYP\_1 = 12 liver cancer if FHBTYP\_1 = 13 lung cancer if FHBTYP\_1 = 14 lymphoma if FHBTYP 1 = 15melanoma if FHBTYP 1 = 16 mouth/tongue/lip cancer if FHBTYP 1 = 17 ovarian cancer if FHBTYP 1 = 18 pancreatic cancer if FHBTYP\_1 = 19 prostate cancer if FHBTYP 1 = 20 rectal cancer if FHBTYP 1 = 21 skin (non-melanoma) cancer if FHBTYP 1 = 22 skin (don't know what kind) cancer if FHBTYP 1 = 23 soft tissue (muscle or fat) cancer if FHBTYP 1 = 24 stomach cancer if FHBTYP\_1 = 25 testicular cancer if FHBTYP 1 = 26 throat/pharynx cancer if FHBTYP 1 = 27 thyroid cancer if FHBTYP\_1 = 28 uterine cancer if FHBTYP 1 = 29 other cancer if FHBTYP 1 = 30 this cancer if FHBTYP\_1 = Refused or Don't know **Special Instructions** 

<1-21> if FHBMAN1 GT FHBCAN goto ERR\_FHBMAN1

else goto FHBAGE1

Skip Instructions

|            | <rf,dk> goto FHBAGE1</rf,dk>   |
|------------|--|
| Hard Edits | ERR_FHBMAN1  |
|            | * Number is greater than number of brothers with cancer. * Please correct. |
|            | Default should go to FHBMAN1   |
| Soft Edits |  |
| AssocHeln  |  |

32 **Module Family History** Section Name Part Question ID NAH.092 00.000 Variable Name FHBAGE1 HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999')) and FHBTYP\_1=1-5,7-Universe 17,19-28,30,RF,DK Universe-text Sample adults 18+ whose brother(s) had a first kind of cancer or refused or didn't know name of first kind of cancer [Fill1: Was your brother under 50 years of age when [Fill3: FHBTYP 1] was first **Ouestion Text** diagnosed? \*Enter '0' if brother was 50 or over. \*Enter '1' if brother was under 50.] [Fill2: How many of these brothers were under 50 years of age when [Fill3: FHBTYP 1] was first diagnosed? \*Enter '0' for none. \*Enter '21' for 21 or more brothers.] **Answer Codes Ouestion Type** Integer Field Pane Description Age first cancer\_brother(s) Fill Instructions Fill1: if FHBMAN1=1 Fill2: if FHBMAN1 GE 2 or FHBMAN1 = Refused or FHBMAN1 = Don't know Fill3: bladder cancer if FHBTYP 1 = 1 blood cancer if FHBTYP 1 = 2 bone cancer if FHBTYP 1 = 3 brain cancer if FHBTYP\_1 = 4 cervical cancer if FHBTYP\_1 = 6 colon cancer if FHBTYP 1 = 7 esophageal cancer if FHBTYP 1 = 8 gallbladder cancer if FHBTYP 1 = 9 kidney cancer if FHBTYP 1 = 10 larynx-windpipe cancer if FHBTYP 1 = 11 leukemia if FHBTYP\_1 = 12 liver cancer if FHBTYP\_1 = 13 lung cancer if FHBTYP 1 = 14 lymphoma if FHBTYP 1 = 15melanoma if FHBTYP\_1 = 16 mouth/tongue/lip cancer if FHBTYP 1 = 17 pancreatic cancer if FHBTYP\_1 = 19 prostate cancer if FHBTYP 1 = 20 rectal cancer if FHBTYP 1 = 21 skin (non-melanoma) cancer if FHBTYP 1 = 22 skin (don't know what kind) cancer if FHBTYP 1 = 23 soft tissue (muscle or fat) cancer if FHBTYP 1 = 24 stomach cancer if FHBTYP\_1 = 25

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testicular cancer if FHBTYP_1 = 26
throat/pharynx cancer if FHBTYP_1 = 27
thyroid cancer if FHBTYP_1 = 28
uterine cancer if FHBTYP_1 = 29
other cancer if FHBTYP_1 = 30
this cancer if FHBTYP_1 = Refused or Don't know
```

## **Special Instructions**

## Skip Instructions

#### **Hard Edits**

#### ERR1\_FHBAGE1

- \* Number is greater than number of brothers with this kind of cancer.
- \* Please correct.

Default should go to FHBAGE1

ERR2\_FHBAGE1

- \* Number is greater than number of brothers with cancer.
- \* Please correct.

Default should go to FHBAGE1

## Soft Edits

32 **Module Family History** Section Name Part Question ID NAH.093 00.000 Variable Name FHBMAN2 HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and FHBTYP 2 = 1-5,7-Universe 17,19-28,30,RF,DK and FHBCAN=2-21 Sample adults 18+ who have brothers with a second kind of cancer Universe-text How many brothers have had [Fill: FHBTYP 2]? **Ouestion Text** \*Enter '21' for 21 or more brothers. **Answer Codes Question** Type Integer Field Pane Description Brother(s)\_cancer type 2 Fill: bladder cancer if FHBTYP 2 = 1 Fill Instructions blood cancer if FHBTYP 2 = 2 bone cancer if FHBTYP 2 = 3brain cancer if FHBTYP 2 = 4 breast cancer if FHBTYP 2 = 5 cervical cancer if FHBTYP 2 = 6 colon cancer if FHBTYP 2 = 7 esophageal cancer if FHBTYP\_2 = 8 gallbladder cancer if FHBTYP 2 = 9 kidney cancer if FHBTYP 2 = 10 larynx-windpipe cancer if FHBTYP 2 = 11 leukemia if FHBTYP\_2 = 12 liver cancer if FHBTYP\_2 = 13 lung cancer if FHBTYP\_2 = 14 lymphoma if FHBTYP 2 = 15 melanoma if FHBTYP 2 = 16 mouth/tongue/lip cancer if FHBTYP 2 = 17 ovarian cancer if FHBTYP 2 = 18 pancreatic cancer if FHBTYP 2 = 19 prostate cancer if FHBTYP 2 = 20 rectal cancer if FHBTYP 2 = 21 skin (non-melanoma) cancer if FHBTYP 2 = 22 skin (don't know what kind) cancer if FHBTYP 2 = 23 soft tissue (muscle or fat) cancer if FHBTYP 2 = 24 stomach cancer if FHBTYP\_2 = 25 testicular cancer if FHBTYP 2 = 26 throat/pharynx cancer if FHBTYP 2 = 27 thyroid cancer if FHBTYP\_2 = 28 uterine cancer if FHBTYP 2 = 29 other cancer if FHBTYP 2 = 30this cancer if FHBTYP 2 = Refused or Don't know **Special Instructions** 

<1-21> if FHBMAN2 GT FHBCAN goto ERR\_FHBMAN2

Skip Instructions

|            | else<br>goto FHBAGE2<br><rf,dk> goto FHBAGE2</rf,dk>                     |
|------------|--|
| Hard Edits | ERR_FHBMAN2  |
|            | *Number is greater than number of brothers with cancer. *Please correct. |
|            | Default should go to FHBMAN2   |
| Soft Edits |  |
| AssocHelp  |  |

32 **Module Family History** Section Name Part Question ID NAH.094 00.000 Variable Name FHBAGE2 HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and FHBTYP\_2 = 1-5,7-Universe 17,19-28,30,RF,DK Sample adults 18+ whose brother(s) had a second kind of cancer or refused or didn't Universe-text know name of second kind of cancer [Fill1: Was your brother under 50 years of age when [Fill3: FHBTYP 2] was first **Ouestion Text** diagnosed? \*Enter '0' if brother was 50 or over. \*Enter '1' if brother was under 50.] [Fill2: How many of these brothers were under 50 years of age when [Fill3: FHBTYP 2] was first diagnosed? \*Enter '0' for none. \*Enter '21' for 21 or more brothers.] **Answer Codes Ouestion Type** Integer Field Pane Description Age second cancer\_brother(s) Fill Instructions Fill1: if FHBMAN2=1 Fill2: if FHBMAN2 GE 2 or FHBMAN2 = Refused or FHBMAN2 = Don't konw Fill3: bladder cancer if FHBTYP 2 = 1 blood cancer if FHBTYP 2 = 2 bone cancer if FHBTYP 2 = 3 brain cancer if FHBTYP 2 = 4 breast cancer if FHBTYP 2 = 5 cervical cancer if FHBTYP 2 = 6 colon cancer if FHBTYP 2 = 7 esophageal cancer if FHBTYP 2 = 8 gallbladder cancer if FHBTYP 2 = 9 kidney cancer if FHBTYP 2 = 10 larynx-windpipe cancer if FHBTYP 2 = 11 leukemia if FHBTYP\_2 = 12 liver cancer if FHBTYP 2 = 13 lung cancer if FHBTYP 2 = 14 lymphoma if FHBTYP\_2 = 15 melanoma if FHBTYP 2 = 16 mouth/tongue/lip cancer if FHBTYP 2 = 17 ovarian cancer if FHBTYP 2 = 18 pancreatic cancer if FHBTYP 2 = 19 prostate cancer if FHBTYP 2 = 20 rectal cancer if FHBTYP 2 = 21 skin (non-melanoma) cancer if FHBTYP 2 = 22 skin (don't know what kind) cancer if FHBTYP\_2 = 23

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soft tissue (muscle or fat) cancer if FHBTYP_2 = 24
stomach cancer if FHBTYP_2 = 25
testicular cancer if FHBTYP_2 = 26
throat/pharynx cancer if FHBTYP_2 = 27
thyroid cancer if FHBTYP_2 = 28
uterine cancer if FHBTYP_2 = 29
other cancer if FHBTYP_2 = 30
this cancer if FHBTYP_2 = Refused or Don't know
```

## **Special Instructions**

## Skip Instructions

#### Hard Edits

## ERR1\_FHBAGE2

- \* Number is greater than number of brothers with this kind of cancer.
- \* Please correct.

Default should go to FHBAGE2

ERR2\_FHBAGE2

- \* Number is greater than number of brothers with cancer.
- \* Please correct.

Default should go to FHBAGE2

## Soft Edits

32 **Module Family History** Section Name Part Question ID NAH.095 00.000 Variable Name FHBMAN3 HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999')) and and FHBTYP 3 = Universe 1-5,7-17,19-28,30,RF,DK and FHBCAN=2-21 Sample adults 18+ who have brothers with a third kind of cancer Universe-text How many brothers have had [Fill: FHBTYP 3]? **Ouestion Text** \*Enter '21' for 21 or more brothers. **Answer Codes Question** Type Integer Field Pane Description Brother(s)\_cancer type 3 Fill: bladder cancer if FHBTYP 3 = 1 Fill Instructions blood cancer if FHBTYP 3 = 2 bone cancer if FHBTYP 3 = 3brain cancer if FHBTYP 3 = 4 breast cancer if FHBTYP 3 = 5 cervical cancer if FHBTYP 3 = 6 colon cancer if FHBTYP 3 = 7 esophageal cancer if FHBTYP\_3 = 8 gallbladder cancer if FHBTYP 3 = 9 kidney cancer if FHBTYP 3 = 10 larynx-windpipe cancer if FHBTYP 3 = 11 leukemia if FHBTYP\_3 = 12 liver cancer if FHBTYP\_3 = 13 lung cancer if FHBTYP\_3 = 14 lymphoma if FHBTYP 3 = 15melanoma if FHBTYP 3 = 16 mouth/tongue/lip cancer if FHBTYP 3 = 17 ovarian cancer if FHBTYP 3 = 18 pancreatic cancer if FHBTYP 3 = 19 prostate cancer if FHBTYP 3 = 20 rectal cancer if FHBTYP 3 = 21 skin (non-melanoma) cancer if FHBTYP 3 = 22 skin (don't know what kind) cancer if FHBTYP 3 = 23 soft tissue (muscle or fat) cancer if FHBTYP 3 = 24 stomach cancer if FHBTYP\_3 = 25 testicular cancer if FHBTYP 3 = 26 throat/pharynx cancer if FHBTYP 3 = 27 thyroid cancer if FHBTYP\_3 = 28 uterine cancer if FHBTYP 3 = 29 other cancer if FHBTYP 3 = 30this cancer if FHBTYP\_3 = Refused or Don't know **Special Instructions** 

<1-21> if FHBMAN3 GT FHBCAN goto ERR\_FHBMAN3

Skip Instructions

|            | else<br>goto FHBAGE3<br><rf,dk> goto FHBAGE3</rf,dk>                       |
|------------|--|
| Hard Edits | ERR_FHBMAN3  |
|            | * Number is greater than number of brothers with cancer. * Please correct. |
|            | Default should go to FHBMAN3   |
| Soft Edits |  |
| AssocHelp  |  |

32 **Module Family History** Section Name Part Question ID NAH.096 00.000 Variable Name FHBAGE3 HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and FHBTYP\_3 = 1-5,7-Universe 17,19-28,30,RF,DK Universe-text Sample adults 18+ whose brother(s) had a third kind of cancer or refused or didn't know name of third kind of cancer [Fill1: Was your brother under 50 years of age when [Fill3: FHBTYP 3] was first **Ouestion Text** diagnosed? \*Enter '0' if brother was 50 or over. \*Enter '1' if brother was under 50.] [Fill2: How many of these brothers were under 50 years of age when [Fill3: FHBTYP\_3] was first diagnosed? \*Enter '0' for none. \*Enter '21' for 21 or more brothers.] **Answer Codes Ouestion Type** Integer Field Pane Description Age third cancer\_brother(s) Fill Instructions Fill1: if FHBMAN3=1 Fill2: if FHBMAN3 GE 2 or FHBMAN3 = Refused or FHBMAN3 = Don't know Fill3: bladder cancer if FHBTYP 3 = 1 blood cancer if FHBTYP 3 = 2 bone cancer if FHBTYP 3 = 3 brain cancer if FHBTYP\_3 = 4 breast cancer if FHBTYP 3 = 5 cervical cancer if FHBTYP 3 = 6 colon cancer if FHBTYP 3 = 7 esophageal cancer if FHBTYP 3 = 8 gallbladder cancer if FHBTYP 3 = 9 kidney cancer if FHBTYP 3 = 10 larynx-windpipe cancer if FHBTYP 3 = 11 leukemia if FHBTYP\_3 = 12 liver cancer if FHBTYP 3 = 13 lung cancer if FHBTYP 3 = 14 lymphoma if FHBTYP\_3 = 15 melanoma if FHBTYP 3 = 16 mouth/tongue/lip cancer if FHBTYP 3 = 17 ovarian cancer if FHBTYP 3 = 18 pancreatic cancer if FHBTYP 3 = 19 prostate cancer if FHBTYP 3 = 20 rectal cancer if FHBTYP 3 = 21 skin (non-melanoma) cancer if FHBTYP 3 = 22 skin (don't know what kind) cancer if FHBTYP\_3 = 23

soft tissue (muscle or fat) cancer if FHBTYP\_3 = 24
stomach cancer if FHBTYP\_3 = 25
testicular cancer if FHBTYP\_3 = 26
throat/pharynx cancer if FHBTYP\_3 = 27
thyroid cancer if FHBTYP\_3 = 28
uterine cancer if FHBTYP\_3 = 29
other cancer if FHBTYP\_3 = 30
this cancer if FHBTYP 3 = Refused or Don't know

## **Special Instructions**

## Skip Instructions

#### Hard Edits

## ERR1\_FHBAGE3

- \* Number is greater than number of brothers with this kind of cancer.
- \* Please correct.

Default should go to FHBAGE3

ERR2\_FHBAGE3

- \* Number is greater than number of brothers with cancer.
- \* Please correct.

Default should go to FHBAGE3

## Soft Edits

| Module               | 32   |
|----------------------|--|
| Section Name         | Family History   |
| Part                 |  |
| Question ID          | NAH.100_00.000   |
| Variable Name        | FHSNUM   |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999'))  |
| Universe-text        | Sample adults 18+  |
| Question Text        | FULL SISTERS have the same biological mother and father as you. How many FULL SISTERS do you have? Please include any who are alive and those who may have died.  *Enter '0' for none. |
|                      | *Enter '21' for 21 or more sisters.  |
| Answer Codes         |  |
| Question Type        | Integer  |
| Field Pane Descripti | Number of sisters  |
| Fill Instructions    |  |
| Special Instructions |  |
| Skip Instructions    | <0,RF,DK> goto FHNNUM<br><1-21> goto FHSCAN  |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module               | 32  |
|----------------------|---|
| Section Name         | Family History  |
| Part                 |   |
| Question ID          | NAH.110_00.000  |
| Variable Name        | FHSCAN  |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999')) and FHSNUM=1-21        |
| Universe-text        | Sample adults 18+ who have at least one full sister                                 |
| Question Text        | [Fill1: Did your SISTER EVER have cancer of any kind?                               |
|                      | *Enter '0' if sister has not had any kind of cancer.                                |
|                      | *Enter '1' if sister has had cancer.]   |
|                      | [Fill2: How many of your SISTERS have EVER had cancer of any kind?                  |
|                      | *Enter '0' for none.  |
|                      | *Enter '21' for 21 or more sisters.]  |
| Answer Codes         |   |
| Question Type        | Integer   |
| Field Pane Descript  | ion Sister(s) with cancer   |
| Fill Instructions    | Fill1: if FHSNUM=1<br>Fill2: if FHSNUM 2-21   |
| Special Instructions |   |
| Skip Instructions    | <0,RF,DK> goto FHNNUM <1-21> if FHSCAN gt FHSNUM goto ERR_FHSCAN else goto FHSTYP_1 |
| Hard Edits           | ERR_FHSCAN  |
|                      | * Number is greater than number of sisters. * Please correct.                       |
|                      | Default should go to FHSCAN   |
| Soft Edits           |   |
| AssocHelp            |   |

32 Module **Family History** Section Name **Part** Question ID NAH.120\_01.000 Variable Name FHSTYP\_1 HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and FHSCAN=1-21 Universe Sample adults 18+ whose sister(s) ever had cancer Universe-text What kind of cancer did your [Fill1: sister/Fill2: sisters] have? Question Text \* Enter code for the first kind of cancer. **Answer Codes** 1. Bladder 2. Blood 3. Bone 4. Brain 5. Breast 6. Cervix 7. Colon 8. Esophagus 9. Gallbladder 10. Kidney 11. Larynx-windpipe 12. Leukemia 13. Liver 14. Lung 15. Lymphoma 16. Melanoma 17. Mouth/tongue/lip 18. Ovarv 19. Pancreas 20. Prostate 21. Rectum 22. Skin (non-melanoma) 23. Skin (don't know what kind) 24. Soft tissue (muscle or fat) 25. Stomach 26. Testis 27. Throat - pharynx 28. Thyroid 29. Uterus 30. Other Refused Don't know Question Type Pick One - answer list pane Field Pane Description Kind of cancer\_1 Fill1: if FHSCAN=1 Fill Instructions Fill2: if FHSCAN=2-21 **Special Instructions** | if FHSCAN = 1 store '1' in FHSMAN1

|                      | Gray out answer categories 20 and 26  |
|----------------------|---|
| Skip Instructions    | <1-19,21-25,27-30,RF,DK> if FHSCAN = '1' goto FHSAGE1 else goto FHSMAN1 <20,26> goto ERR_FHSTYP_1 |
| Hard Edits           | ERR_FHSTYP_1  *Code 20 or 26 is unavailable for females.  |
| Soft Edits AssocHelp |   |

32 **Module Family History** Section Name **Part** Question ID NAH.120\_02.000 Variable Name FHSTYP\_2 HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and (FHSAGE1=0-Universe 21,DK or (FHSAGE1=RF and FHSTYP\_1 ne RF)) Sample adults 18+ who provided age range for sister(s) diagnosed with the first kind of Universe-text cancer or didn't know how old sister(s) was/were when first diagnosed with that kind of cancer or else refused to provide an age range and had not refused to answer the first kind of cancer \* Enter code for the second kind of cancer. **Question Text** \* Enter '96' for no more. Answer Codes 1. Bladder 2. Blood 3. Bone 4. Brain 5. Breast 6. Cervix 7. Colon 8. Esophagus 9. Gallbladder 10. Kidney 11. Larynx-windpipe 12. Leukemia 13. Liver 14. Lung 15. Lymphoma 16. Melanoma 17. Mouth/tongue/lip 18. Ovary 19. Pancreas 20. Prostate 21. Rectum 22. Skin (non-melanoma) 23. Skin (don't know what kind) 24. Soft tissue (muscle or fat) 25. Stomach 26. Testis 27. Throat - pharynx 28. Thyroid 29. Uterus 30. Other 96. No more Refused Don't know

Question Type

Pick One - answer list pane

Field Pane Description

Kind of cancer 2

## Fill Instructions

# **Special Instructions**

if FHSCAN = 1

store '1' in FHSMAN2

Gray out answer categories 20 and 26. Gray out whatever option was selected in FHSTYP\_1 to indicate that that option is now not available. Make sure that if this option is selected it triggers the error message that this is an invalid option.

## Skip Instructions

<1-19,21-25,27-30,RF,DK> if FHSTYP\_2 = FHSTYP\_1

goto ERR2\_FHSTYP\_2 elseif FHSCAN = '1' goto FHSAGE2

else

goto FHSMAN2

<96> goto FHNNUM

<20,26> goto ERR1\_FHSTYP\_2

## **Hard Edits**

ERR1 FHSTYP 2

\*Code 20 or 26 is unavailable for females.

ERR2\_FHSTYP\_2

\* Cannot select pre-selected answer.

Default should go to FHSTYP\_2

## Soft Edits

32 **Module Family History** Section Name **Part** Question ID NAH.120\_03.000 Variable Name FHSTYP\_3 HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999')) and (FHSAGE2=0-Universe 21,DK or (FHSAGE2=RF and FHSTYP\_2 ne RF)) Sample adults 18+ who provided age range for sister(s) diagnosed with the second Universe-text kind of cancer or didn't know how old sister(s) was/were when first diagnosed with that kind of cancer or else refused to provide an age range and had not refused to answer the second kind of cancer \* Enter code for the third kind of cancer. **Question Text** \* Enter '96' for no more. Answer Codes 1. Bladder 2. Blood 3. Bone 4. Brain 5. Breast 6. Cervix 7. Colon 8. Esophagus 9. Gallbladder 10. Kidney 11. Larynx-windpipe 12. Leukemia 13. Liver 14. Lung 15. Lymphoma 16. Melanoma 17. Mouth/tongue/lip 18. Ovary 19. Pancreas 20. Prostate 21. Rectum 22. Skin (non-melanoma) 23. Skin (don't know what kind) 24. Soft tissue (muscle or fat) 25. Stomach 26. Testis 27. Throat - pharynx 28. Thyroid 29. Uterus 30. Other 96. No more Refused Don't know

Question Type

Pick One - answer list pane

Field Pane Description

Kind of cancer 3

## Fill Instructions

# **Special Instructions**

if FHSCAN = 1

store '1' in FHSMAN3

Gray out answer categories 20 and 26. Gray out whatever option was selected in FHSTYP\_1 and FHSTYP\_2 to indicate that those option were already chosen. Make sure that if this option is selected it triggers the error message that this is an invalid option.

## Skip Instructions

<1-19,21-25,27-30,RF,DK> if FHSTYP\_2 = FHSTYP\_1 or FHSTYP\_2

goto ERR2\_FHSTYP\_3 elseif FHSCAN = '1' goto FHSAGE3 else

goto FHSMAN3

<96> goto FHNNUM

<20,26> goto ERR1\_FHSTYP\_3

# **Hard Edits**

ERR1\_FHSTYP\_3

\*Code 20 or 26 is unavailable for females.

ERR2\_FHSTYP\_3

\* Cannot select pre-selected answer.

Default should be FHSTYP\_3

## Soft Edits

32 **Module Family History** Section Name **Part** Question ID NAH.120\_04.000 Variable Name FHSTYP\_4 HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999')) and (FHSAGE3=0-Universe 21,DK or (FHSAGE3=RF and FHSTYP\_3 ne RF)) Sample adults 18+ who provided age range for sister(s) diagnosed with the third kind of Universe-text cancer or didn't know how old sister(s) was/were when first diagnosed with that kind of cancer or else refused to provide an age range and had not refused to answer the third kind of cancer \* Enter '95' if respondent offers more than 3 kinds of cancer. **Question Text** \* Enter '96' for no more. Answer Codes 1. Bladder 2. Blood 3. Bone 4. Brain 5. Breast 6. Cervix 7. Colon 8. Esophagus 9. Gallbladder 10. Kidney 11. Larynx-windpipe 12. Leukemia 13. Liver 14. Lung 15. Lymphoma 16. Melanoma 17. Mouth/tongue/lip 18. Ovary 19. Pancreas 20. Prostate 21. Rectum 22. Skin (non-melanoma) 23. Skin (don't know what kind) 24. Soft tissue (muscle or fat) 25. Stomach 26. Testis 27. Throat - pharynx 28. Thyroid 29. Uterus 30. Other 95. More than 3 kinds of cancer 96. No more Refused Don't know

Question Type

Pick One - answer list pane

Field Pane Description

More than 3 kinds of cancer

| Fill Instructions     |  |
|-----------------------|--|
| Special Instructions  | Do not allow an answer of "Refused" or "Don't know".   |
|                       | Gray out answer categories 20 and 26. Gray out whatever options were selected in FHSTYP_1, FHSTYP_2 and FHSTYP_3 to indicate that those options were already chosen. The only valid options for this question are 95 and 96. |
| Chin In stance of our | <95,96> goto FHNNUM  |
| Skip Instructions     | <1-30> goto ERR_FHSTYP_4   |
| Hard Edits            | ERR_FHSTYP_4   |
|                       | * The only valid answers are '95' and '96' for this screen.  |
| Soft Edits            |  |
| AssocHelp             |  |

32 **Module Family History** Section Name Part **Question ID** NAH.121\_00.000 Variable Name FHSMAN1 HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999')) and FHSTYP 1=1-Universe 19,21-25,27-30,RF,DK and FHSCAN=2-21 Sample adults 18+ who have sisters with a first kind of cancer Universe-text How many sisters have had [Fill: FHSTYP 1]? **Ouestion Text** \* Enter '21' for 21 or more sisters. **Answer Codes Question** Type Integer Field Pane Description Sister(s)\_cancer type 1 Fill: bladder cancer if FHSTYP 1 = 1 Fill Instructions blood cancer if FHSTYP 1 = 2 bone cancer if FHSTYP 1 = 3brain cancer if FHSTYP 1 = 4 breast cancer if FHSTYP 1 = 5 cervical cancer if FHSTYP 1 = 6 colon cancer if FHSTYP 1 = 7 esophageal cancer if FHSTYP\_1 = 8 gallbladder cancer if FHSTYP 1 = 9 kidney cancer if FHSTYP 1 = 10 larynx-windpipe cancer if FHSTYP 1 = 11 leukemia if FHSTYP\_1 = 12 liver cancer if FHSTYP\_1 = 13 lung cancer if FHSTYP\_1 = 14 lymphoma if FHSTYP 1 = 15melanoma if FHSTYP\_1 = 16 mouth/tongue/lip cancer if FHSTYP 1 = 17 ovarian cancer if FHSTYP 1 = 18 pancreatic cancer if FHSTYP\_1 = 19 prostate cancer if FHSTYP 1 = 20 rectal cancer if FHSTYP 1 = 21 skin (non-melanoma) cancer if FHSTYP 1 = 22 skin (don't know what kind) cancer if FHSTYP 1 = 23 soft tissue (muscle or fat) cancer if FHSTYP 1 = 24 stomach cancer if FHSTYP\_1 = 25 testicular cancer if FHSTYP 1 = 26 throat/pharynx cancer if FHSTYP 1 = 27 thyroid cancer if FHSTYP\_1 = 28 uterine cancer if FHSTYP 1 = 29 other cancer if FHSTYP 1 = 30 this cancer if FHSTYP\_1 = Refused or Don't know Special Instructions | If FHSCAN eq <1> store '1' in FHSMAN1

<1-21> if FHSMAN1 GT FHSCAN goto ERR\_FHSMAN1

Skip Instructions

|            | else<br>goto FHSAGE1<br><rf,dk> goto FHSAGE1</rf,dk>                      |
|------------|---|
| Hard Edits | ERR_FHSMAN1   |
|            | * Number is greater than number of sisters with cancer. * Please correct. |
|            | Default should be FHSMAN1   |
| Soft Edits |   |
| AssocHelp  |   |

32 **Module Family History** Section Name Part **Question ID** NAH.122 00.000 Variable Name FHSAGE1 HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999')) and FHSTYP\_1 = 1-Universe 19,21-25,27-30,RF,DK> Sample adults 18+ whose sister(s) had a first kind of cancer or refused or didn't know Universe-text name of first kind of cancer [Fill1: Was your sister under 50 years of age when [Fill3: FHSTYP 1] was first **Ouestion Text** diagnosed? \* Enter '0' if sister was 50 or over. \* Enter '1' if sister was under 50.1 [Fill2: How many of these sisters were under 50 years of age when [Fill3: FHSTYP 1] was first diagnosed? \*Enter '0' for none. \*Enter '21' for 21 or more sisters.] **Answer Codes Ouestion Type** Integer Field Pane Description Age first cancer\_sister(s) Fill Instructions Fill1: if FHSMAN1=1 Fill2: if FHSMAN1 GE 2 or FHSMAN1 = Refused or FHSMAN1 = Don't know Fill3: bladder cancer if FHSTYP 1 = 1 blood cancer if FHSTYP 1 = 2 bone cancer if FHSTYP 1 = 3 brain cancer if FHSTYP\_1 = 4 breast cancer if FHSTYP 1 = 5 cervical cancer if FHSTYP\_1 = 6 colon cancer if FHSTYP 1 = 7 esophageal cancer if FHSTYP 1 = 8 gallbladder cancer if FHSTYP 1 = 9 kidney cancer if FHSTYP\_1 = 10 larynx-windpipe cancer if FHSTYP\_1 = 11 leukemia if FHSTYP\_1 = 12 liver cancer if FHSTYP 1 = 13 lung cancer if FHSTYP 1 = 14 lymphoma if FHSTYP\_1 = 15 melanoma if FHSTYP\_1 = 16 mouth/tongue/lip cancer if FHSTYP 1 = 17 ovarian cancer if FHSTYP 1 = 18 pancreatic cancer if FHSTYP 1 = 19 prostate cancer if FHSTYP 1 = 20 rectal cancer if FHSTYP 1 = 21 skin (non-melanoma) cancer if FHSTYP 1 = 22 skin (don't know what kind) cancer if FHSTYP\_1 = 23

```
soft tissue (muscle or fat) cancer if FHSTYP_1 = 24
stomach cancer if FHSTYP_1 = 25
testicular cancer if FHSTYP_1 = 26
throat/pharynx cancer if FHSTYP_1 = 27
thyroid cancer if FHSTYP_1 = 28
uterine cancer if FHSTYP_1 = 29
other cancer if FHSTYP_1 = 30
this cancer if FHSTYP_1 = Refused or Don't know
```

### **Special Instructions**

### Skip Instructions

#### Hard Edits

#### ERR1\_FHSAGE1

- \* Number is greater than number of sisters with this kind of cancer.
- \* Please correct.

Default should go to FHSAGE1

ERR2\_FHSAGE1

- \* Number is greater than number of sisters with cancer.
- \* Please correct.

Default should go to FHSAGE1

#### Soft Edits

32 **Module Family History** Section Name Part **Question ID** NAH.123 00.000 Variable Name FHSMAN2 HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999')) and FHSTYP 2 = 1-Universe 19,21-25,27-30,RF,DK and FHSCAN=2-21 Sample adults 18+ who have sisters with a second kind of cancer Universe-text How many sisters have had [Fill: FHSTYP 2]? **Ouestion Text** \* Enter '21' for 21 or more sisters. **Answer Codes Question** Type Integer Field Pane Description Sister(s)\_cancer type 2 Fill1: bladder cancer if FHSTYP\_2 = 1 Fill Instructions blood cancer if FHSTYP 2 = 2 bone cancer if FHSTYP 2 = 3brain cancer if FHSTYP 2 = 4 breast cancer if FHSTYP 2 = 5 cervical cancer if FHSTYP 2 = 6 colon cancer if FHSTYP 2 = 7 esophageal cancer if FHSTYP\_2 = 8 gallbladder cancer if FHSTYP 2 = 9 kidney cancer if FHSTYP 2 = 10 larynx-windpipe cancer if FHSTYP 2 = 11 leukemia if FHSTYP\_2 = 12 liver cancer if FHSTYP\_2 = 13 lung cancer if FHSTYP\_2 = 14 lymphoma if FHSTYP 2 = 15 melanoma if FHSTYP\_2 = 16 mouth/tongue/lip cancer if FHSTYP 2 = 17 ovarian cancer if FHSTYP 2 = 18 pancreatic cancer if FHSTYP 2 = 19 prostate cancer if FHSTYP 2 = 20 rectal cancer if FHSTYP 2 = 21 skin (non-melanoma) cancer if FHSTYP 2 = 22 skin (don't know what kind) cancer if FHSTYP\_2 = 23 soft tissue (muscle or fat) cancer if FHSTYP 2 = 24 stomach cancer if FHSTYP\_2 = 25 testicular cancer if FHSTYP 2 = 26 throat/pharynx cancer if FHSTYP 2 = 27 thyroid cancer if FHSTYP\_2 = 28 uterine cancer if FHSTYP 2 = 29 other cancer if FHSTYP 2 = 30this cancer if FHSTYP\_2 = Refused or Don't kow **Special Instructions** 

<1-21> if FHSMAN2 GT FHSCAN goto ERR\_FHSMAN2

Skip Instructions

|            | else<br>goto FHSAGE2<br><rf,dk> goto FHSAGE2</rf,dk>                      |
|------------|---|
| Hard Edits | ERR_FHSMAN2   |
|            | * Number is greater than number of sisters with cancer. * Please correct. |
|            | Default should be FHSMAN2   |
| Soft Edits |   |
| AssocHelp  |   |

32 **Module Family History** Section Name Part **Question ID** NAH.124 00.000 Variable Name FHSAGE2 HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999')) and FHSTYP\_2 = 1-Universe 19,21-25,27-30,RF,DK Sample adults 18+ whose sister(s) had a second kind of cancer or refused or didn't Universe-text know name of second kind of cancer [Fill1: Was your sister under 50 years of age when [Fill3: FHSTYP 2] was first **Ouestion Text** diagnosed? \* Enter '0' if sister was 50 or over. \* Enter '1' if sister was under 50.1 [Fill2: How many of these sisters were under 50 years of age when [Fill3: FHSTYP 2] was first diagnosed? \*Enter '0' for none. \*Enter '21' for 21 or more sisters.] **Answer Codes Ouestion Type** Integer Field Pane Description Age second cancer\_sister(s) Fill Instructions Fill1: if FHSMAN2=1 Fill2: if FHSMAN2 GE 2 or FHSMAN2 = Refused or FHSMAN2 = Don't know Fill3: bladder cancer if FHSTYP 2 = 1 blood cancer if FHSTYP 2 = 2 bone cancer if FHSTYP 2 = 3 brain cancer if FHSTYP 2 = 4 breast cancer if FHSTYP 2 = 5 cervical cancer if FHSTYP 2 = 6 colon cancer if FHSTYP 2 = 7 esophageal cancer if FHSTYP 2 = 8 gallbladder cancer if FHSTYP 2 = 9 kidney cancer if FHSTYP 2 = 10 larynx-windpipe cancer if FHSTYP\_2 = 11 leukemia if FHSTYP\_2 = 12 liver cancer if FHSTYP 2 = 13 lung cancer if FHSTYP 2 = 14 lymphoma if FHSTYP\_2 = 15 melanoma if FHSTYP 2 = 16 mouth/tongue/lip cancer if FHSTYP 2 = 17 ovarian cancer if FHSTYP 2 = 18 pancreatic cancer if FHSTYP 2 = 19 prostate cancer if FHSTYP 2 = 20 rectal cancer if FHSTYP 2 = 21 skin (non-melanoma) cancer if FHSTYP 2 = 22 skin (don't know what kind) cancer if FHSTYP\_2 = 23

```
soft tissue (muscle or fat) cancer if FHSTYP_2 = 24
stomach cancer if FHSTYP_2 = 25
testicular cancer if FHSTYP_2 = 26
throat/pharynx cancer if FHSTYP_2 = 27
thyroid cancer if FHSTYP_2 = 28
uterine cancer if FHSTYP_2 = 29
other cancer if FHSTYP_2 = 30
this cancer if FHSTYP 2 = Refused or Don't know
```

#### **Special Instructions**

### Skip Instructions

#### Hard Edits

#### ERR1\_FHSAGE2

- \* Number is greater than number of sisters with this kind of cancer.
- \* Please correct.

Default should go to FHSAGE2

ERR2\_FHSAGE2

- \* Number is greater than number of sisters with cancer.
- \* Please correct.

Default should go to FHSAGE2

#### Soft Edits

32 **Module Family History** Section Name Part Question ID NAH.125\_00.000 Variable Name FHSMAN3 HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999')) and FHSTYP 3 = 1-Universe 19,21-25,27-30,RF,DK and FHSCAN=2-21 Universe-text Sample adults 18+ who have sisters with a third kind of cancer How many sisters have had [Fill1: FHSTYP 3]? **Ouestion Text** \* Enter '21' for 21 or more sisters. **Answer Codes Question** Type Integer Field Pane Description Sister(s)\_cancer type 3 Fill1: if FHSTYP 3 NE R,D Fill Instructions Fill2: bladder cancer if FHSTYP 3 = 1 blood cancer if FHSTYP 3 = 2bone cancer if FHSTYP\_3 = 3 brain cancer if FHSTYP 3 = 4 breast cancer if FHSTYP 3 = 5 cervical cancer if FHSTYP\_3 = 6 colon cancer if FHSTYP\_3 = 7 esophageal cancer if FHSTYP 3 = 8 gallbladder cancer if FHSTYP 3 = 9 kidney cancer if FHSTYP\_3 = 10 larynx-windpipe cancer if FHSTYP 3 = 11 leukemia if FHSTYP\_3 = 12 liver cancer if FHSTYP 3 = 13 lung cancer if FHSTYP 3 = 14 lymphoma if FHSTYP\_3 = 15 melanoma if FHSTYP 3 = 16 mouth/tongue/lip cancer if FHSTYP 3 = 17 ovarian cancer if FHSTYP\_3 = 18 pancreatic cancer if FHSTYP 3 = 19 prostate cancer if FHSTYP 3 = 20 rectal cancer if FHSTYP 3 = 21 skin (non-melanoma) cancer if FHSTYP\_3 = 22 skin (don't know what kind) cancer if FHSTYP\_3 = 23 soft tissue (muscle or fat) cancer if FHSTYP 3 = 24 stomach cancer if FHSTYP 3 = 25 testicular cancer if FHSTYP 3 = 26 throat/pharynx cancer if FHSTYP\_3 = 27 thyroid cancer if FHSTYP 3 = 28 uterine cancer if FHSTYP 3 = 29 other cancer if FHSTYP\_3 = 30 this cancer if FHSTYP 3 = Refused or Don't know

| Skip Instructions | <1-21> if FHSMAN3 GT FHSCAN goto ERR_FHSMAN3 else goto FHSAGE3 <rf,dk> goto FHSAGE3</rf,dk> |
|-------------------|---|
| Hard Edits        | * Number is greater than number of sisters with cancer.  * Please correct.                  |
|                   | Default should be FHSMAN3   |
| Soft Edits        |   |
|                   |   |
| AssocHelp         |   |

32 **Module Family History** Section Name Part Question ID NAH.126 00.000 Variable Name FHSAGE3 HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999')) and FHSTYP\_3 =1-Universe 19,21-25,27-30,RF,DK Sample adults 18+ whose sister(s) had a third kind of cancer or refused or didn't know Universe-text name of third kind of cancer [Fill1: Was your sister under 50 years of age when [Fill3: FHBTYP 3] was first **Ouestion Text** diagnosed? \*Enter '0' if sister was 50 or over. \*Enter '1' if sister was under 50.] [Fill2: How many of these sisters were under 50 years of age when [Fill3: FHBTYP 3] was first diagnosed? \* Enter '0' for none. \* Enter '21' for 21 or more sisters.] **Answer Codes Ouestion Type** Integer Field Pane Description Age third cancer\_sister(s) Fill Instructions Fill1: if FHSMAN3=1 Fill2: if FHSMAN3 GE 2 or FHSMAN3 = Refused or FHSMAN3 = Don't know Fill3: bladder cancer if FHSTYP 3 = 1 blood cancer if FHSTYP 3 = 2 bone cancer if FHSTYP 3 = 3 brain cancer if FHSTYP\_3 = 4 breast cancer if FHSTYP 3 = 5 cervical cancer if FHSTYP 3 = 6 colon cancer if FHSTYP 3 = 7 esophageal cancer if FHSTYP 3 = 8 gallbladder cancer if FHSTYP 3 = 9 kidney cancer if FHSTYP 3 = 10 larynx-windpipe cancer if FHSTYP\_3 = 11 leukemia if FHSTYP\_3 = 12 liver cancer if FHSTYP 3 = 13 lung cancer if FHSTYP 3 = 14 lymphoma if FHSTYP\_3 = 15 melanoma if FHSTYP\_3 = 16 mouth/tongue/lip cancer if FHSTYP 3 = 17 ovarian cancer if FHSTYP 3 = 18 pancreatic cancer if FHSTYP 3 = 19 prostate cancer if FHSTYP 3 = 20 rectal cancer if FHSTYP 3 = 21 skin (non-melanoma) cancer if FHSTYP 3 = 22 skin (don't know what kind) cancer if FHSTYP\_3 = 23

soft tissue (muscle or fat) cancer if FHSTYP\_3 = 24
stomach cancer if FHSTYP\_3 = 25
testicular cancer if FHSTYP\_3 = 26
throat/pharynx cancer if FHSTYP\_3 = 27
thyroid cancer if FHSTYP\_3 = 28
uterine cancer if FHSTYP\_3 = 29
other cancer if FHSTYP\_3 = 30
this cancer if FHSTYP 3 = Refused or Don't know

#### **Special Instructions**

#### Skip Instructions

#### Hard Edits

#### **ERR1 FHSAGE3**

- \* Number is greater than number of sisters with this kind of cancer.
- \* Please correct.

Default should go to FHSAGE3

ERR2\_FHSAGE3

- \* Number is greater than number of sisters with cancer.
- \* Please correct.

Default should go to FHSAGE3

# Soft Edits

| Module                 | 32  |
|------------------------|---|
| Section Name           | Family History  |
| Part                   |   |
| Question ID            | NAH.130_00.000  |
| Variable Name          | FHNNUM  |
| Universe               | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999'))  |
| Universe-text          | Sample adults 18+   |
| Question Text          | How many BIOLOGICAL SONS do you have? Please include any who are alive and those who may have died. |
|                        | *Enter '0' for none.  |
|                        | *Enter '21' for 21 or more biological sons.   |
|                        | *Enter '96' for no biological children.   |
| Answer Codes           |   |
| Question Type          | Integer   |
| Field Pane Description | on Number of sons   |
| Fill Instructions      |   |
| Special Instructions   |   |
| Skip Instructions      | <0,RF,DK> [goto FHDNUM] <1-21>[goto FHNCAN] <22-95> goto ERR_FHNNUM <96> goto SASSN4                |
| Hard Edits             | * Value not allowed as possible answer.   |
| Soft Edits             |   |
| AssocHelp              |   |

| Module                                    | 32  |  |
|---|---|--|
| Section Name                              | Family History  |  |
| Part                                      |   |  |
| Question ID                               | NAH.140_00.000  |  |
| Variable Name                             | FHNCAN  |  |
| Universe                                  | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999')) and FHNNUM=1-21                    |  |
| Universe-text                             | Sample adults 18+ who have at least one biological son  |  |
| Question Text                             | [Fill1: Did your SON EVER have cancer of any kind?  |  |
|   | *Enter '0' if son has not had any kind of cancer.   |  |
|   | *Enter '1' if son has had cancer.]  |  |
|   | [Fill2: How many of your SONS have EVER had cancer of any kind?                                 |  |
|   | *Enter '0' for none.  |  |
|   | *Enter '21' for 21 or more sons.]   |  |
| Answer Codes                              |   |  |
| Question Type                             | Integer   |  |
| Field Pane Description Son(s) with cancer |   |  |
| Fill Instructions                         | Fill1: if FHNNUM=1<br>Fill2: if FHNNUM 2-21   |  |
| Special Instructions                      |   |  |
| Skip Instructions                         | <0,RF,DK> goto FHDNUM <1-21> if FHNCAN gt FHNNUM     goto ERR_FHNCAN     else     goto FHNTYP_1 |  |
| Hard Edits                                | ERR_FHNCAN  |  |
|   | * Number is greater than number of sons. * Please correct.                                      |  |
|   | Default should be FHNCAN  |  |
| Soft Edits                                |   |  |
| AssocHelp                                 |   |  |

32 Module **Family History** Section Name Part Question ID NAH.150\_01.000 Variable Name FHNTYP\_1 HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999')) and FHNCAN 1-21 Universe Sample adults 18+ whose sons(s) ever had cancer Universe-text What kinds of cancer did your [Fill1: son/Fill2: sons] have? Question Text \* Enter code for the first kind of cancer. **Answer Codes** 1. Bladder 2. Blood 3. Bone 4. Brain 5. Breast 6. Cervix 7. Colon 8. Esophagus 9. Gallbladder 10. Kidney 11. Larynx-windpipe 12. Leukemia 13. Liver 14. Lung 15. Lymphoma 16. Melanoma 17. Mouth/tongue/lip 18. Ovarv 19. Pancreas 20. Prostate 21. Rectum 22. Skin (non-melanoma) 23. Skin (don't know what kind) 24. Soft tissue (muscle or fat) 25. Stomach 26. Testis 27. Throat - pharynx 28. Thyroid 29. Uterus 30. Other Refused Don't know Question Type Pick One - answer list pane Field Pane Description Kind of cancer\_1 Fill1: if FHNCAN=1 Fill Instructions Fill2: if FHNCAN=2-21 *Special Instructions* | if FHNCAN = '1' store '1' in FHNMAN1

|                   | Gray out answer categories 6, 18, 29.                  |
|-------------------|--|
| Skip Instructions | <1-5,7-17,19-28,30,RF,DK> if FHNCAN = '1' goto FHNAGE1 |
|                   | else   |
|                   | goto FHNMAN1<br><6,18,29> goto ERR_FHNTYP_1            |
|                   | <0,10,292 goto ERK_FIINTTF_1                           |
| Hard Edits        | ERR FHNTYP 1   |
|                   |  |
|                   | * Code 6 or 18 or 29 is unavailable for males.         |
|                   |  |
| Soft Edits        |  |
| AssocHelp         |  |

32 Module **Family History** Section Name **Part** Question ID NAH.150\_02.000 Variable Name FHNTYP\_2 HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999')) and (FHNAGE1=0-Universe 21,DK or (FHNAGE1=RF and FHNTYP\_1 ne RF)) Sample adults 18+ who provided age range for son(s) diagnosed with the first kind of Universe-text cancer or didn't know how old sons(s) was/were when first diagnosed with that kind of cancer or else refused to provide an age range and had not refused to answer the first kind of cancer \* Enter code for the second kind of cancer. **Question Text** \* Enter '96' for no more. Answer Codes 1. Bladder 2. Blood 3. Bone 4. Brain 5. Breast 6. Cervix 7. Colon 8. Esophagus 9. Gallbladder 10. Kidney 11. Larynx-windpipe 12. Leukemia 13. Liver 14. Lung 15. Lymphoma 16. Melanoma 17. Mouth/tongue/lip 18. Ovary 19. Pancreas 20. Prostate 21. Rectum 22. Skin (non-melanoma) 23. Skin (don't know what kind) 24. Soft tissue (muscle or fat) 25. Stomach 26. Testis 27. Throat - pharynx 28. Thyroid 29. Uterus 30. Other 96. No more Refused Don't know

Question Type

Pick One - answer list pane

Field Pane Description

Kind of cancer 2

### Fill Instructions

# **Special Instructions**

if FHNCAN = 1

store '1' in FHNMAN2

Gray out answer categories 6, 18, 29. Gray out whatever option was selected in FHNTYP\_1 to indicate that that option is now not available. Make sure that if this option is selected it triggers the error message that this is an invalid option.

### Skip Instructions

<1-5,7-17,19-28,30,RF,DK> if  $FHNTYP_2 = FHNTYP_1$ 

goto ERR2\_FHNTYP\_2

elseif FHNCAN = '1'

goto FHNAGE2

else

goto FHNMAN2

<96> goto FHDNUM

<6,18,29> goto ERR1\_FHNTYP\_2

#### Hard Edits

ERR1 FHNTYP 2

\* Code 6 or 18 or 29 is unavailable for males.

ERR2\_FHNTYP\_2

\* Cannot select pre-selected answer.

Default should be FHNTYP\_2

### Soft Edits

32 **Module Family History** Section Name **Part** Question ID NAH.150\_03.000 Variable Name FHNTYP\_3 HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and (FHNAGE2=0-Universe 21,DK or (FHNAGE2=RF and FHNTYP\_2 ne RF)) Sample adults 18+ who provided age range for son(s) diagnosed with the second kind Universe-text of cancer or didn't know how old son(s) was/were when first diagnosed with that kind of cancer or else refused to provide an age range and had not refused to answer the second kind of cancer \* Enter '95' if respondent offers more than 2 kinds of cancer. **Question Text** \* Enter '96' for no more. Answer Codes 1. Bladder 2. Blood 3. Bone 4. Brain 5. Breast 6. Cervix 7. Colon 8. Esophagus 9. Gallbladder 10. Kidney 11. Larynx-windpipe 12. Leukemia 13. Liver 14. Lung 15. Lymphoma 16. Melanoma 17. Mouth/tongue/lip 18. Ovary 19. Pancreas 20. Prostate 21. Rectum 22. Skin (non-melanoma) 23. Skin (don't know what kind) 24. Soft tissue (muscle or fat) 25. Stomach 26. Testis 27. Throat - pharynx 28. Thyroid 29. Uterus 30. Other 95. More than 2 kinds of cancer 96. No more Refused Don't know

#### Question Type

Pick One - answer list pane

# Field Pane Description

More than 2 kinds of cancer

| Do not allow an answer of "Refused" or "Don't know".   |
|--|
| Gray out answer categories 6, 18, and 29. Gray out whatever options were selected in FHNTYP_1 and FHNTYP_2 to indicate that those options were already chosen. The only valid options for this question are 95 and 96. |
| <95,96> goto FHDNUM  |
| <1-30> goto ERR_FHNTYP_3   |
| ERR_FHNTYP_3   |
| * The only valid answers are '95' and '96' for this screen.  |
|  |
|  |
|  |

32 **Module Family History** Section Name Part Question ID NAH.151\_00.000 Variable Name FHNMAN1 HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999')) and FHNTYP 1=1-5,7-Universe 17,19-28,30,RF,DK and FHNCAN=2-21 Universe-text Sample adults 18+ who have sons with a first kind of cancer How many sons have had [Fill1: FHNTYP 1]? **Ouestion Text** \*Enter '21' for 21 or more sons. **Answer Codes Question** Type Integer Field Pane Description Son(s)\_cancer type 1 Fill Instructions bladder cancer if FHNTYP 1 = 1 blood cancer if FHNTYP 1 = 2bone cancer if FHNTYP 1 = 3 brain cancer if FHNTYP 1 = 4 breast cancer if FHNTYP 1 = 5 cervical cancer if FHNTYP\_1 = 6 colon cancer if FHNTYP\_1 = 7 esophageal cancer if FHNTYP 1 = 8 gallbladder cancer if FHNTYP 1 = 9 kidney cancer if FHNTYP\_1 = 10 larynx-windpipe cancer if FHNTYP 1 = 11 leukemia if FHNTYP\_1 = 12 liver cancer if FHNTYP 1 = 13 lung cancer if FHNTYP 1 = 14 lymphoma if FHNTYP\_1 = 15 melanoma if FHNTYP 1 = 16 mouth/tongue/lip cancer if FHNTYP 1 = 17 ovarian cancer if FHNTYP\_1 = 18 pancreatic cancer if FHNTYP 1 = 19 prostate cancer if FHNTYP 1 = 20 rectal cancer if FHNTYP 1 = 21 skin (non-melanoma) cancer if FHNTYP\_1 = 22 skin (don't know what kind) cancer if FHNTYP\_1 = 23 soft tissue (muscle or fat) cancer if FHNTYP 1 = 24 stomach cancer if FHNTYP 1 = 25 testicular cancer if FHNTYP 1 = 26 throat/pharynx cancer if FHNTYP\_1 = 27 thyroid cancer if FHNTYP 1 = 28 uterine cancer if FHNTYP 1 = 29 other cancer if FHNTYP\_1 = 30 this cancer if FHNTYP 1 = RF or DK

**Special Instructions** 

| Skip Instructions | <1-21> if FHNMAN1 GT FHNCAN goto ERR_FHNMAN1 else goto FHNAGE1 <rf,dk> goto FHNAGE1</rf,dk> |
|-------------------|---|
| H 1 E 124         | EDD FLIMMANIA   |
| Hard Edits        | ERR_FHNMAN1   |
|                   | * Number is greater than number of sons with cancer. * Please correct.                      |
|                   | Default should be FHNMAN1   |
| Coft Edita        |   |
| Soft Edits        |   |
| AssocHelp         |   |

32 **Module Family History** Section Name Part Question ID NAH.152 00.000 Variable Name FHNAGE1 HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and FHNTYP\_1=1-5,7-Universe 17,19-28,30,RF,DK> Universe-text Sample adults 18+ whose son(s) had a first kind of cancer or refused or didn't know name of first kind of cancer [Fill1: Was your son under 50 years of age when [Fill3: FHNTYP 1] was first **Ouestion Text** diagnosed? \*Enter '0' if son was 50 or over. \*Enter '1' if son was under 50.] [Fill2: How many of these sons were under 50 years of age when [Fill3: FHNTYP 1] was first diagnosed? \*Enter '0' for none. \*Enter '21' for 21 or more sons.] **Answer Codes Ouestion Type** Integer Field Pane Description Age first cancer\_son(s) Fill Instructions Fill1: if FHNMAN1=1 Fill2: if FHNMAN1 GE 2 or FHNMAN1 = Refused or FHNMAN1 = Don't know Fill3: bladder cancer if FHNTYP 1 = 1 blood cancer if FHNTYP 1 = 2 bone cancer if FHNTYP 1 = 3 brain cancer if FHNTYP\_1 = 4 breast cancer if FHNTYP 1 = 5 cervical cancer if FHNTYP 1 = 6 colon cancer if FHNTYP 1 = 7 esophageal cancer if FHNTYP 1 = 8 gallbladder cancer if FHNTYP 1 = 9 kidney cancer if FHNTYP\_1 = 10 larynx-windpipe cancer if FHNTYP 1 = 11 leukemia if FHNTYP\_1 = 12 liver cancer if FHNTYP 1 = 13 lung cancer if FHNTYP 1 = 14 lymphoma if FHNTYP\_1 = 15 melanoma if FHNTYP 1 = 16 mouth/tongue/lip cancer if FHNTYP\_1 = 17 ovarian cancer if FHNTYP\_1 = 18 pancreatic cancer if FHNTYP 1 = 19 prostate cancer if FHNTYP 1 = 20 rectal cancer if FHNTYP 1 = 21 skin (non-melanoma) cancer if FHNTYP 1 = 22 skin (don't know what kind) cancer if FHNTYP\_1 = 23

```
soft tissue (muscle or fat) cancer if FHNTYP_1 = 24
stomach cancer if FHNTYP_1 = 25
testicular cancer if FHNTYP_1 = 26
throat/pharynx cancer if FHNTYP_1 = 27
thyroid cancer if FHNTYP_1 = 28
uterine cancer if FHNTYP_1 = 29
other cancer if FHNTYP_1 = 30
this cancer if FHNTYP_1 = Refused or Don't know
```

### **Special Instructions**

#### Skip Instructions

```
<0-21> if FHNMAN1 NE 'Refused' and FHNMAN1 NE 'Don't know' and FHNAGE1 GT
FHNMAN1
       goto ERR2 FHNAGE1
      elseif (FHNMAN1 = 'Refused' or FHNMAN1 = 'Don't know') and FHNAGE1 GT
FHNCAN
       goto ERR3 FHNAGE1
      elseif AGE LE '55' and FHNMAN1 NE 'Refused' and FHNMAN1 NE 'Don't
know' and FHNAGE1 LT FHNMAN1
       goto ERR1 FHNAGE1
      elseif AGE LE '55' and (FHNMAN1 = 'Refused' or FHNMAN1 = 'Don't know')
and FHNAGE1 = '0'
       goto ERR1 FHNAGE1
      else
       goto FHNTYP_2
<DK> goto FHNTYP_2
<RF> IF FHNTYP_1=RF goto FHDNUM
     else if FHNTYP_1 NE <RF> goto FHNTYP_2
```

#### Hard Edits

### ERR1\_FHNAGE1

- \* At least one son is less than six years younger or is older than the respondent.
- \* Please correct.

Default should go to FHNAGE1

### ERR2\_FHNAGE1

- \* Number is greater than number of sons with this kind of cancer.
- \* Please correct.

Default should go to FHNAGE1

### ERR3\_FHNAGE1

- \* Number is greater than number of sons with cancer.
- \* Please correct.

Default should go to FHNAGE1

#### Soft Edits

32 **Module Family History** Section Name Part Question ID NAH.153 00.000 Variable Name FHNMAN2 HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and FHNTYP 2 = 1-5,7-Universe 17,19-28,30,RF,DK and FHNCAN=2-21 Sample adults 18+ who have sons with a second kind of cancer Universe-text How many sons have had [Fill: FHNTYP 2]? **Ouestion Text** \*Enter '21' for 21 or more sons. **Answer Codes Question** Type Integer Field Pane Description Son(s)\_cancer type 2 Fill: bladder cancer if FHNTYP 2 = 1 Fill Instructions blood cancer if FHNTYP 2 = 2 bone cancer if FHNTYP 2 = 3brain cancer if FHNTYP 2 = 4 breast cancer if FHNTYP 2 = 5 cervical cancer if FHNTYP 2 = 6 colon cancer if FHNTYP 2 = 7 esophageal cancer if FHNTYP\_2 = 8 gallbladder cancer if FHNTYP 2 = 9 kidney cancer if FHNTYP 2 = 10 larynx-windpipe cancer if FHNTYP 2 = 11 leukemia if FHNTYP\_2 = 12 liver cancer if FHNTYP\_2 = 13 lung cancer if FHNTYP\_2 = 14 lymphoma if FHNTYP 2 = 15 melanoma if FHNTYP 2 = 16 mouth/tongue/lip cancer if FHNTYP 2 = 17 ovarian cancer if FHNTYP 2 = 18 pancreatic cancer if FHNTYP 2 = 19 prostate cancer if FHNTYP 2 = 20 rectal cancer if FHNTYP 2 = 21 skin (non-melanoma) cancer if FHNTYP 2 = 22 skin (don't know what kind) cancer if FHNTYP 2 = 23 soft tissue (muscle or fat) cancer if FHNTYP 2 = 24 stomach cancer if FHNTYP\_2 = 25 testicular cancer if FHNTYP 2 = 26 throat/pharynx cancer if FHNTYP 2 = 27 thyroid cancer if FHNTYP\_2 = 28 uterine cancer if FHNTYP 2 = 29 other cancer if FHNTYP 2 = 30 this cancer if FHNTYP\_2 = Refused or Don't know **Special Instructions** 

<1-21> if FHNMAN2 GT FHNCAN goto ERR\_FHNMAN2

Skip Instructions

|            | else<br>goto FHNAGE2<br><rf,dk> goto FHNAGE2</rf,dk>                   |
|------------|--|
| Hard Edits | ERR_FHNMAN2  |
|            | * Number is greater than number of sons with cancer. * Please correct. |
|            | Default should be FHNMAN2  |
| Soft Edits |  |
| AssocHelp  |  |

32 **Module Family History** Section Name Part Question ID NAH.154 00.000 Variable Name FHNAGE2 HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and FHNTYP\_2 = 1-5,7-Universe 17,19-28,30,RF,DK Sample adults 18+ whose sons(s) had a second kind of cancer or refused or didn't Universe-text know name of second kind of cancer [Fill1: Was your son under 50 years of age when [Fill3: FHNTYP 2] was first **Ouestion Text** diagnosed? \*Enter '0' if son was 50 or over. \*Enter '1' if son was under 50.] [Fill2: How many of these sons were under 50 years of age when [Fill3: FHNTYP 2] was first diagnosed? \*Enter '0' for none. \*Enter '21' for 21 or more sons.] **Answer Codes Ouestion Type** Integer Field Pane Description Age second cancer\_son(s) Fill Instructions Fill1: if FHNMAN2=1 Fill2: if FHNMAN2 GE 2 or FHNMAN2 = Refused or FHNMAN2 = Don't know Fill3: bladder cancer if FHNTYP 2 = 1 blood cancer if FHNTYP 2 = 2 bone cancer if FHNTYP 2 = 3 brain cancer if FHNTYP 2 = 4 breast cancer if FHNTYP 2 = 5 cervical cancer if FHNTYP 2 = 6 colon cancer if FHNTYP 2 = 7 esophageal cancer if FHNTYP 2 = 8 gallbladder cancer if FHNTYP 2 = 9 kidney cancer if FHNTYP 2 = 10 larynx-windpipe cancer if FHNTYP 2 = 11 leukemia if FHNTYP\_2 = 12 liver cancer if FHNTYP 2 = 13 lung cancer if FHNTYP 2 = 14 lymphoma if FHNTYP\_2 = 15 melanoma if FHNTYP 2 = 16 mouth/tongue/lip cancer if FHNTYP 2 = 17 ovarian cancer if FHNTYP 2 = 18 pancreatic cancer if FHNTYP 2 = 19 prostate cancer if FHNTYP 2 = 20 rectal cancer if FHNTYP 2 = 21 skin (non-melanoma) cancer if FHNTYP 2 = 22 skin (don't know what kind) cancer if FHNTYP\_2 = 23

```
soft tissue (muscle or fat) cancer if FHNTYP_2 = 24
stomach cancer if FHNTYP_2 = 25
testicular cancer if FHNTYP_2 = 26
throat/pharynx cancer if FHNTYP_2 = 27
thyroid cancer if FHNTYP_2 = 28
uterine cancer if FHNTYP_2 = 29
other cancer if FHNTYP_2 = 30
this cancer if FHNTYP_2 = Refused or Don't know
```

#### **Special Instructions**

#### Skip Instructions

```
<0-21> if FHNMAN2 NE 'Refused' and FHNMAN2 NE 'Don't know' and FHNAGE2 GT
FHNMAN2
       goto ERR2 FHNAGE2
      elseif (FHNMAN2 = 'Refused' or FHNMAN2 = 'Don't know') and FHNAGE2 GT
FHNCAN
       goto ERR3 FHNAGE2
      elseif AGE LE '55' and FHNMAN2 NE 'Refused' and FHNMAN2 NE 'Don't
know' and FHNAGE2 LT FHNMAN1
       goto ERR1_FHNAGE2
      elseif AGE LE '55' and (FHNMAN2 = 'Refused' or FHNMAN2 = 'Don't know')
and FHNAGE2 = '0'
       goto ERR1 FHNAGE2
      else
       goto FHNTYP_3
<DK> goto FHNTYP_3
<RF> and <RF> at FHNTYP_2 goto FHDNUM
<RF> and FHNTYP_2 NE <RF> goto FHNTYP_3
```

#### Hard Edits

#### ERR1 FHNAGE2

- \* At least one son is less than six years younger or is older than the respondent.
- \* Please correct.

Default should go to FHNAGE2

**ERR2 FHNAGE2** 

- \* Number is greater than number of sons with this kind of cancer.
- \* Please correct.

Default should go to FHNAGE2

ERR3\_FHNAGE2

- \* Number is greater than number of sons with cancer.
- \* Please correct.

Default should go to FHNAGE2

#### Soft Edits

| Module                 | 32  |  |  |
|------------------------|---|--|--|
| Section Name           | Family History  |  |  |
| Part                   |   |  |  |
| Question ID            | NAH.160_00.000  |  |  |
| Variable Name          | FHDNUM  |  |  |
| Universe               | HHSTAT4='S' and AGE GE '018' and AGE not IN ('997','999') and FHNNUM NE '96'  |  |  |
| Universe-text          | Sample adults 18+ who did not say they did not have any biological children at the 'number of biological sons' question |  |  |
| Question Text          | How many BIOLOGICAL DAUGHTERS do you have? Please include any who are alive and those who may have died.                |  |  |
|                        | *Enter '0' for none.  |  |  |
|                        | *Enter '21' for 21 or more biological daughters.  |  |  |
| Answer Codes           |   |  |  |
| Question Type          | Integer   |  |  |
| Field Pane Description | Field Pane Description Number of daughters  |  |  |
| Fill Instructions      |   |  |  |
| Special Instructions   |   |  |  |
| Skip Instructions      | <0,RF,DK> goto FHSDBR<br><1-21> goto FHDCAN   |  |  |
| Hard Edits             |   |  |  |
| Soft Edits             |   |  |  |
| AssocHelp              |   |  |  |

| Module   | 32  |  |
|--|---|--|
| Section Name                                   | Family History  |  |
| Part   |   |  |
| Question ID                                    | NAH.170_00.000  |  |
| Variable Name                                  | FHDCAN  |  |
| Universe                                       | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999')) and FHDNUM=1-21                    |  |
| Universe-text                                  | Sample adults 18+ who have at least one biological daughter                                     |  |
| Question Text                                  | [Fill1: Did your DAUGHTER EVER have cancer of any kind?   |  |
|  | *Enter '0' if daughter has not had any kind of cancer.  |  |
|  | *Enter '1' if daughter has had cancer.]   |  |
|  | [Fill2: How many of your DAUGHTERS have EVER had cancer of any kind?                            |  |
|  | *Enter '0' for none.  |  |
|  | *Enter '21' for 21 or more daughters.]  |  |
| Answer Codes                                   |   |  |
| Question Type                                  | Integer   |  |
| Field Pane Description Daughter(s) with cancer |   |  |
| Fill Instructions                              | Fill1: if FHDNUM=1 Fill2: if FHDNUM 2-21  |  |
| Special Instructions                           |   |  |
| Skip Instructions                              | <0,RF,DK> goto FHSDBR <1-21> if FHDCAN gt FHDNUM     goto ERR_FHDCAN     else     goto FHDTYP_1 |  |
| Hard Edits                                     | ERR_FHDCAN  |  |
|  | * Number is greater than number of daughters. * Please correct.                                 |  |
|  | Default should be FHDCAN  |  |
| Soft Edits                                     |   |  |
| AssocHelp                                      |   |  |

32 Module **Family History** Section Name Part Question ID NAH.180\_01.000 Variable Name FHDTYP\_1 HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999')) and FHDCAN 1-21 Universe Sample adults 18+ whose daughter(s) ever had cancer Universe-text What kinds of cancer did your [Fill1: daughter/Fill2: daughters] have? Question Text \* Enter code for the first kind of cancer. **Answer Codes** 1. Bladder 2. Blood 3. Bone 4. Brain 5. Breast 6. Cervix 7. Colon 8. Esophagus 9. Gallbladder 10. Kidney 11. Larynx-windpipe 12. Leukemia 13. Liver 14. Lung 15. Lymphoma 16. Melanoma 17. Mouth/tongue/lip 18. Ovarv 19. Pancreas 20. Prostate 21. Rectum 22. Skin (non-melanoma) 23. Skin (don't know what kind) 24. Soft tissue (muscle or fat) 25. Stomach 26. Testis 27. Throat - pharynx 28. Thyroid 29. Uterus 30. Other Refused Don't know Question Type Pick One - answer list pane Field Pane Description Kind of cancer\_1 Fill1: if FHDCAN=1 Fill Instructions Fill2: if FHDCAN=2-21 if FHDCAN = 1 Special Instructions store '1' in FHDMAN1

|                   | Gray out answer categories 20, 26.                               |
|-------------------|--|
| Skip Instructions | <1-19,21-25,27-30,RF,DK> if FHDCAN = '1'<br>goto FHDAGE1<br>else |
|                   | goto FHDMAN1   |
|                   | <20,26> goto ERR_FHDTYP_1  |
| Hard Edits        | ERR_FHDTYP_1   |
|                   | * Code 20 or 26 is unavailable for females.                      |
| Soft Edits        |  |
| AssocHelp         |  |

32 **Module Family History** Section Name **Part** Question ID NAH.180\_02.000 Variable Name FHDTYP\_2 HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999')) and (FHDAGE1=0-Universe 21,DK or (FHDAGE1=RF and FHDTYP\_1 ne RF)) Sample adults 18+ who provided age range for daughter(s) diagnosed with the first Universe-text kind of cancer or didn't know how old daughter(s) was/were when first diagnosed with that kind of cancer or else refused to provide an age range and had not refused to answer the first kind of cancer \* Enter code for the second kind of cancer. **Question Text** \* Enter '96' for no more. Answer Codes 1. Bladder 2. Blood 3. Bone 4. Brain 5. Breast 6. Cervix 7. Colon 8. Esophagus 9. Gallbladder 10. Kidney 11. Larynx-windpipe 12. Leukemia 13. Liver 14. Lung 15. Lymphoma 16. Melanoma 17. Mouth/tongue/lip 18. Ovary 19. Pancreas 20. Prostate 21. Rectum 22. Skin (non-melanoma) 23. Skin (don't know what kind) 24. Soft tissue (muscle or fat) 25. Stomach 26. Testis 27. Throat - pharynx 28. Thyroid 29. Uterus 30. Other 96. No more Refused Don't know

Question Type

Pick One - answer list pane

Field Pane Description

Kind of cancer 2

#### Fill Instructions

# **Special Instructions**

if FHDCAN = 1

store '1' in FHDMAN2

Gray out answer categories 20, 26. Gray out whatever option was selected in FHDTYP\_1 to indicate that that option is now not available. Make sure that if this option is selected it triggers the error message that this is an invalid option.

### Skip Instructions

<1-19,21-25,27-30,RF,DK> if  $FHDTYP_2 = FHDTYP_1$ 

goto ERR2\_FHDTYP\_2 elseif FHDCAN = '1' goto FHDAGE2

else

goto FHDMAN2

<96> [goto FHSDBR]

<20,26> goto ERR\_FHDTYP\_2

#### **Hard Edits**

ERR1 FHDTYP 2

\* Code 20 or 26 unavailable for females.

ERR2\_FHDTYP\_2

\* Cannot select pre-selected answer.

Default should be FHDTYP\_2

### Soft Edits

32 **Module Family History** Section Name **Part** Question ID NAH.180\_03.000 Variable Name FHDTYP\_3 HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and (FHDAGE2=0-Universe 21,DK or (FHDAGE2=RF and FHDTYP\_2 ne RF)) Sample adults 18+ who provided age range for daughter(s) diagnosed with the second Universe-text kind of cancer or didn't know how old daughter(s) was/were when first diagnosed with that kind of cancer or else refused to provide an age range and had not refused to answer the second kind of cancer \* Enter '95' if respondent offers more than 2 kinds of cancer. **Question Text** \* Enter '96' for no more. Answer Codes 1. Bladder 2. Blood 3. Bone 4. Brain 5. Breast 6. Cervix 7. Colon 8. Esophagus 9. Gallbladder 10. Kidney 11. Larynx-windpipe 12. Leukemia 13. Liver 14. Lung 15. Lymphoma 16. Melanoma 17. Mouth/tongue/lip 18. Ovary 19. Pancreas 20. Prostate 21. Rectum 22. Skin (non-melanoma) 23. Skin (don't know what kind) 24. Soft tissue (muscle or fat) 25. Stomach 26. Testis 27. Throat - pharynx 28. Thyroid 29. Uterus 30. Other 95. More than 2 kinds of cancer 96. No more Refused Don't know

#### Question Type

Pick One - answer list pane

#### Field Pane Description

More than 2 kinds of cancer

| Fill Instructions     |   |
|-----------------------|---|
| Special Instructions  | Do not allow an answer of "Refused" or "Don't know".  |
|                       | Gray out answer categories 20, 26. Gray out whatever options were selected in FHDTYP_1 and FHDTYP_2 to indicate that those options were already chosen. The only valid options for this question are 95 and 96. |
| Chin In stance of our | <95,96> [goto FHSDBR]   |
| Skip Instructions     | <1-30> goto ERR_FHDTYP_3  |
| Hard Edits            | ERR_FHDTYP_3  |
|                       | * The only valid answers are '95' and '96' for this screen.   |
| Soft Edits            |   |
| AssocHelp             |   |

32 **Module Family History** Section Name Part Question ID NAH.190 00.000 Variable Name FHDMAN1 HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999')) and FHDTYP 1=1-Universe 19,21-25,27-30,RF,DK and FHDCAN=2-21 Sample adults 18+ who have daughters with a first kind of cancer Universe-text How many daughters have had [Fill: FHDTYP 1]? **Ouestion Text** \*Enter '21' for 21 or more daughters. **Answer Codes Question** Type Integer Field Pane Description Daughter(s)\_cancer type 1 Fill: bladder cancer if FHDTYP 1 = 1 Fill Instructions blood cancer if FHDTYP 1 = 2 bone cancer if FHDTYP 1 = 3brain cancer if FHDTYP 1 = 4 breast cancer if FHDTYP 1 = 5 cervical cancer if FHDTYP 1 = 6 colon cancer if FHDTYP 1 = 7 esophageal cancer if FHDTYP\_1 = 8 gallbladder cancer if FHDTYP 1 = 9 kidney cancer if FHDTYP 1 = 10larynx-windpipe cancer if FHDTYP 1 = 11 leukemia if FHDTYP\_1 = 12 liver cancer if FHDTYP\_1 = 13 lung cancer if FHDTYP\_1 = 14 lymphoma if FHDTYP 1 = 15melanoma if FHDTYP 1 = 16 mouth/tongue/lip cancer if FHDTYP 1 = 17 ovarian cancer if FHDTYP\_1 = 18 pancreatic cancer if FHDTYP 1 = 19 prostate cancer if FHDTYP 1 = 20 rectal cancer if FHDTYP 1 = 21 skin (non-melanoma) cancer if FHDTYP 1 = 22 skin (don't know what kind) cancer if FHDTYP 1 = 23 soft tissue (muscle or fat) cancer if FHDTYP 1 = 24 stomach cancer if FHDTYP\_1 = 25 testicular cancer if FHDTYP 1 = 26 throat/pharynx cancer if FHDTYP 1 = 27 thyroid cancer if FHDTYP\_1 = 28 uterine cancer if FHDTYP 1 = 29 other cancer if FHDTYP 1 = 30this cancer if FHDTYP\_1 = Refused or Don't know **Special Instructions** 

<1-21> if FHDMAN1 GT FHDCAN goto ERR\_FHDMAN1

Skip Instructions

|            | else goto FHDAGE1 <rf,dk> goto FHDAGE1</rf,dk>                              |
|------------|---|
| Hard Edits | ERR_FHDMAN1   |
|            | * Number is greater than number of daughters with cancer. * Please correct. |
|            | Default should be FHDMAN1   |
| Soft Edits |   |
| AssocHelp  |   |

32 **Module Family History** Section Name Part Question ID NAH.191 00.000 Variable Name FHDAGE1 HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and FHDTYP\_1=1-Universe 19,21-25,27-30,RF,DK> Sample adults 18+ whose daughter(s) had a first kind of cancer or refused or didn't Universe-text know name of first kind of cancer [Fill1: Was your daughter under 50 years of age when [Fill3: FHDTYP 1] was first **Ouestion Text** diagnosed? \*Enter '0' if daughter was 50 or over. \*Enter '1' if daughter was under 50.1 [Fill2: How many of these daughters were under 50 years of age when [Fill3: FHDTYP 1] was first diagnosed? \*Enter '0' for none. \*Enter '21' for 21 or more daughters.] **Answer Codes Ouestion Type** Integer Field Pane Description Age first cancer\_daughter(s) Fill Instructions Fill1: if FHDMAN1=1 Fill2: if FHDMAN1 GE 2 or FHDMAN1 = Refused or FHDMAN1 = Don't know Fill3: bladder cancer if FHDTYP 1 = 1 blood cancer if FHDTYP 1 = 2 bone cancer if FHDTYP 1 = 3 brain cancer if FHDTYP\_1 = 4 breast cancer if FHDTYP 1 = 5 cervical cancer if FHDTYP 1 = 6 colon cancer if FHDTYP 1 = 7esophageal cancer if FHDTYP 1 = 8 gallbladder cancer if FHDTYP 1 = 9 kidney cancer if FHDTYP\_1 = 10 larynx-windpipe cancer if FHDTYP 1 = 11 leukemia if FHDTYP\_1 = 12 liver cancer if FHDTYP 1 = 13 lung cancer if FHDTYP 1 = 14 lymphoma if FHDTYP\_1 = 15 melanoma if FHDTYP 1 = 16 mouth/tongue/lip cancer if FHDTYP 1 = 17 ovarian cancer if FHDTYP\_1 = 18 pancreatic cancer if FHDTYP 1 = 19 prostate cancer if FHDTYP 1 = 20rectal cancer if FHDTYP 1 = 21 skin (non-melanoma) cancer if FHDTYP 1 = 22 skin (don't know what kind) cancer if FHDTYP\_1 = 23

```
soft tissue (muscle or fat) cancer if FHDTYP_1 = 24
stomach cancer if FHDTYP_1 = 25
testicular cancer if FHDTYP_1 = 26
throat/pharynx cancer if FHDTYP_1 = 27
thyroid cancer if FHDTYP_1 = 28
uterine cancer if FHDTYP_1 = 29
other cancer if FHDTYP_1 = 30
this cancer if FHDTYP_1 = Refused or Don't know
```

## **Special Instructions**

## Skip Instructions

```
<0-21> if FHDMAN1 NE 'Refused' and FHDMAN1 NE 'Don't know' and FHDAGE1 GT
FHDMAN1
        goto ERR2 FHDAGE1
      elseif (FHDMAN1 = 'Refused' or FHDMAN1 = 'Don't know') and FHDAGE1 GT
FHDCAN
        goto ERR3 FHDAGE1
      elseif AGE LE '55' and FHDMAN1 NE 'Refused' and FHDMAN1 NE 'Don't
know' and FHDAGE1 LT FHDMAN1
        goto ERR1 FHDAGE1
      elseif AGE LE '55' and (FHDMAN1 = 'Refused' or FHDMAN1 = 'Don't know')
and FHDAGE1 = '0'
       goto ERR1 FHDAGE1
      else
        goto FHDTYP_2
<DK> goto FHDTYP_2
<RF> IF FHDTYP_1=RF [goto FHSDBR]
     else if FHDTYP_1 NE RF goto FHDTYP_2
```

## Hard Edits

## ERR1\_FHDAGE1

- \* At least one daughter is less than six years younger or is older than the respondent.
- \* Please correct.

Default should go to FHDAGE1

**ERR2 FHDAGE1** 

- \* Number is greater than number of daughters with this kind of cancer.
- \* Please correct.

Default should go to FHDAGE1

ERR3\_FHDAGE1

- \* Number is greater than number of daughters with cancer.
- \* Please correct.

Default should go to FHDAGE1

### Soft Edits

### **AssocHelp**

32 **Module Family History** Section Name Part Question ID NAH.192\_00.000 Variable Name FHDMAN2 HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999')) and FHDTYP 2 = 1-Universe 19,21-25,27-30,RF,DK and FHDCAN=2-21 Sample adults 18+ who have daughters with a second kind of cancer Universe-text How many daughters have had [Fill: FHDTYP 2]? **Ouestion Text** \*Enter '21' for 21 or more daughters. **Answer Codes Question** Type Integer Field Pane Description Daughter(s)\_cancer type 2 Fill: bladder cancer if FHDTYP 2 = 1 Fill Instructions blood cancer if FHDTYP 2 = 2 bone cancer if FHDTYP 2 = 3brain cancer if FHDTYP 2 = 4 breast cancer if FHDTYP 2 = 5 cervical cancer if FHDTYP 2 = 6 colon cancer if FHDTYP 2 = 7 esophageal cancer if FHDTYP\_2 = 8 gallbladder cancer if FHDTYP 2 = 9 kidney cancer if FHDTYP 2 = 10 larynx-windpipe cancer if FHDTYP 2 = 11 leukemia if FHDTYP\_2 = 12 liver cancer if FHDTYP\_2 = 13 lung cancer if FHDTYP\_2 = 14 lymphoma if FHDTYP 2 = 15 melanoma if FHDTYP 2 = 16 mouth/tongue/lip cancer if FHDTYP 2 = 17 ovarian cancer if FHDTYP 2 = 18 pancreatic cancer if FHDTYP 2 = 19 prostate cancer if FHDTYP 2 = 20 rectal cancer if FHDTYP 2 = 21 skin (non-melanoma) cancer if FHDTYP 2 = 22 skin (don't know what kind) cancer if FHDTYP\_2 = 23 soft tissue (muscle or fat) cancer if FHDTYP 2 = 24 stomach cancer if FHDTYP\_2 = 25 testicular cancer if FHDTYP 2 = 26 throat/pharynx cancer if FHDTYP 2 = 27 thyroid cancer if FHDTYP\_2 = 28 uterine cancer if FHDTYP 2 = 29 other cancer if FHDTYP 2 = 30 this cancer if FHDTYP 2 = Refused or Don't know **Special Instructions** Skip Instructions <1-21> if FHDMAN2 GT FHDCAN

goto ERR\_FHDMAN2

|            | else<br>goto FHDAGE2<br><rf,dk> goto FHDAGE2</rf,dk>                        |
|------------|---|
| Hard Edits | ERR_FHDMAN2   |
|            | * Number is greater than number of daughters with cancer. * Please correct. |
|            | Default should be FHDMAN2   |
| Soft Edits |   |
| AssocHelp  |   |

32 **Module Family History** Section Name Part Question ID NAH.193 00.000 Variable Name FHDAGE2 HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and FHDTYP\_2 = 1-Universe 30,RF,DK Sample adults 18+ whose daughter(s) had a second kind of cancer or refused or didn't Universe-text know name of second kind of cancer [Fill1: Was your daughter under 50 years of age when [Fill3: FHDTYP 2] was first **Ouestion Text** diagnosed? \*Enter '0' if daughter was 50 or over. \*Enter '1' if daughter was under 50.1 [Fill2: How many of these daughters were under 50 years of age when [Fill3: FHDTYP 2] was first diagnosed? \*Enter '0' for none. \*Enter '21' for 21 or more daughters.] **Answer Codes Ouestion Type** Integer Field Pane Description Age second cancer\_daughter(s) Fill Instructions Fill1: if FHDMAN2=1 Fill2: if FHDMAN2 GE 2 or FHDMAN2 = Refused or FHDMAN2 = Don't know Fill3: bladder cancer if FHDTYP 2 = 1 blood cancer if FHDTYP 2 = 2 bone cancer if FHDTYP 2 = 3 brain cancer if FHDTYP\_2 = 4 breast cancer if FHDTYP 2 = 5 cervical cancer if FHDTYP 2 = 6 colon cancer if FHDTYP 2 = 7 esophageal cancer if FHDTYP 2 = 8 gallbladder cancer if FHDTYP 2 = 9 kidney cancer if FHDTYP 2 = 10 larynx-windpipe cancer if FHDTYP 2 = 11 leukemia if FHDTYP\_2 = 12 liver cancer if FHDTYP 2 = 13 lung cancer if FHDTYP 2 = 14 lymphoma if FHDTYP\_2 = 15 melanoma if FHDTYP 2 = 16 mouth/tongue/lip cancer if FHDTYP 2 = 17 ovarian cancer if FHDTYP 2 = 18 pancreatic cancer if FHDTYP 2 = 19 prostate cancer if FHDTYP 2 = 20 rectal cancer if FHDTYP 2 = 21 skin (non-melanoma) cancer if FHDTYP 2 = 22 skin (don't know what kind) cancer if FHDTYP\_2 = 23

```
soft tissue (muscle or fat) cancer if FHDTYP_2 = 24
stomach cancer if FHDTYP_2 = 25
testicular cancer if FHDTYP_2 = 26
throat/pharynx cancer if FHDTYP_2 = 27
thyroid cancer if FHDTYP_2 = 28
uterine cancer if FHDTYP_2 = 29
other cancer if FHDTYP_2 = 30
this cancer if FHDTYP_2 = Refused or Don't know
```

## **Special Instructions**

## Skip Instructions

```
<0-21>if FHDMAN2 NE 'Refused' and FHDMAN2 NE 'Don't know' and FHDAGE2 GT
FHDMAN2
       goto ERR2 FHDAGE2
      elseif (FHDMAN2 = 'Refused' or FHDMAN2 = 'Don't know') and FHDAGE2 GT
FHDCAN
       goto ERR3 FHDAGE2
      elseif AGE LE '55' and FHDMAN2 NE 'Refused' and FHDMAN2 NE 'Don't
know' and FHDAGE2 LT FHDMAN2
       goto ERR1_FHDAGE2
      elseif AGE LE '55' and (FHDMAN2 = 'Refused' or FHDMAN2 = 'Don't know')
and FHDAGE2 = '0'
       goto ERR1 FHDAGE2
      else
       goto FHDTYP_3
<DK> goto FHDTYP 3
<RF> IF FHDTYP_2=RF goto FHSDBR
     else if FHDTYP_2 NE RF goto FHDTYP_3
```

### Hard Edits

### **ERR1 FHDAGE2**

- \* At least one daughter is less than six years younger or is older than the respondent.
- \* Please correct.

Default should go to FHDAGE2

ERR2 FHDAGE2

- \* Number is greater than number of daughters with this kind of cancer.
- \* Please correct.

Default should go to FHDAGE2

ERR3\_FHDAGE2

- \* Number is greater than number of daughters with cancer.
- \* Please correct.

Default should go to FHDAGE2

### Soft Edits

### **AssocHelp**

| Module                 | 32   |
|------------------------|--|
| Section Name           | Family History   |
| Part                   |  |
| Question ID            | NAH.200_00.000   |
| Variable Name          | FHSDBR   |
| Universe               | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999'))   |
| Universe-text          | Sample adults 18+  |
| Question Text          | The next few questions are about the number of your second-degree relatives who have been diagnosed with breast or ovarian cancer.  How many of your grandparents, aunts, uncles, nieces, nephews, or grandchildren have ever been diagnosed with breast cancer?  *Do not include great grandparents, great aunts or uncles, cousins, or step-relatives. |
| Answer Codes           | Allow 0-96,R,D   |
| Question Type          | Integer  |
| Field Pane Description | on 2nd-degree breast cancer  |
| Fill Instructions      |  |
| Special Instructions   |  |
| Skip Instructions      | <0,R,D> [goto FHSDOV] <1-96> [goto FHSDBN]   |
| Hard Edits             |  |
| Soft Edits             |  |
| AssocHelp              |  |

| Module               | 32   |
|----------------------|--|
| Section Name         | Family History   |
| Part                 |  |
| Question ID          | NAH.205_00.000   |
| Variable Name        | FHSDBN   |
| Universe             | HHSTAT4='S' and AGE GE '018' and AGE not IN ('997','999') and ('01' <=FHSDBR <='96')       |
| Universe-text        | Sample adults 18+ who had at least one second-degree relative diagnosed with breast cancer |
| Question Text        | How many of them were diagnosed with breast cancer before the age of 50?                   |
| Answer Codes         | Allow 1-96,R,D   |
| Question Type        | Integer  |
| Field Pane Descripti | on 2nd-degree under 50 years   |
| Fill Instructions    |  |
| Special Instructions |  |
| Skip Instructions    | <1-96,R,D> [goto FHSDOV ]  |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module                             | 32   |
|------------------------------------|--|
| Section Name                       | Family History   |
| Part                               |  |
| Question ID                        | NAH.210_00.000   |
| Variable Name                      | FHSDOV   |
| Universe                           | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999'))  |
| Universe-text                      | Sample adults 18+  |
| Question Text                      | How many of your grandparents, aunts, nieces, or grandchildren have ever been diagnosed with ovarian cancer?  *Do not include great grandparents, great aunts, cousins, or step-relatives. |
| Answer Codes                       | Allow 0-96,R,D   |
| Question Type Field Pane Descripti | Integer On the decree exercises consists   |
| -                                  | on 2nd-degree ovarian cancer   |
| Fill Instructions                  |  |
| Special Instructions               |  |
| Skip Instructions                  | <0-96,R,D> [goto next section ]  |
| Hard Edits                         |  |
| Soft Edits                         |  |
| AssocHelp                          |  |

# 2015 Q1 NHIS Instrument Spec Report

Section name: **Adult Functioning and Disability** 41 Module Section Name **Adult Functioning and Disability** Part AFD.090 00.000 Question ID VIS\_0 Variable Name HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and FDRN\_FLG='1' Universe Sample adults 18+ who were asked the family disability questions (FDB) and were Universe-text randomly selected to receive the Functioning and Disability (AFD) section Now I am going to ask you some questions about your ability to do different activities, **Question Text** and how you have been feeling. Although some of these questions may seem similar to ones you have already answered, it is important that we ask them all. Do you wear glasses? Answer Codes 1. Yes 2. No Refused Don't know Question Type Yes/No Field Pane Description Glasses Fill Instructions **Special Instructions** <1,2,R,D> goto VIS\_SS Skip Instructions Hard Edits Soft Edits

**AssocHelp** 

| Module               | 41   |                             |                         |
|----------------------|--|-----------------------------|-------------------------|
| Section Name         | Adult Functioning and Disability   | ,                           |                         |
| Part                 |  |                             |                         |
| Question ID          | AFD.100_00.000   |                             |                         |
| Variable Name        | VIS_SS   |                             |                         |
| Universe             | HHSTAT4='S' and (AGE GE '018   | 8' and AGE not IN ('997','9 | 999')) and FDRN_FLG='1' |
| Universe-text        | Sample adults 18+ who were ask randomly selected to receive the  | , , ,                       | ` ,                     |
| Question Text        | Do you have difficulty seeing [fill: no difficulty, some difficulty, a lot   |                             |                         |
| Answer Codes         | No difficulty     Some difficulty     A lot of difficulty     Cannot do at all / Unable to do Refused     Don't know | )                           |                         |
| Question Type        | Pick One - answer list pane  |                             |                         |
| Field Pane Descripti | ion Seeing   |                             |                         |
| Fill Instructions    | if VIS_0=1, then fill ", even when   | wearing your glasses"; el   | lse leave blank.        |
| Special Instructions |  |                             |                         |
| Skip Instructions    | <1,2,R,D> goto HEAR_1  |                             |                         |
| Hard Edits           |  |                             |                         |
| Soft Edits           |  |                             |                         |
| AssocHelp            |  |                             |                         |

| Module                 | 41  |
|------------------------|---|
| Section Name           | Adult Functioning and Disability  |
| Part                   |   |
| Question ID            | AFD.140_00.000  |
| Variable Name          | HEAR_1  |
| Universe               | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999')) and FDRN_FLG='1'   |
| Universe-text          | Sample adults 18+ who were asked the family disability questions (FDB) and were randomly selected to receive the Functioning and Disability (AFD) section |
| Question Text          | Do you use a hearing aid?   |
| Answer Codes           | 1. Yes 2. No Refused Don't know   |
| Question Type          | Yes/No  |
| Field Pane Description | on Hearing aid  |
| Fill Instructions      |   |
| Special Instructions   |   |
| Skip Instructions      | <1> [goto HEAR_2]<br><2,R,D> [goto HEAR_SS]   |
| Hard Edits             |   |
| Soft Edits             |   |
| AssocHelp              |   |

| Module                       | 41  |
|------------------------------|---|
| Section Name                 | Adult Functioning and Disability  |
| Part                         |   |
| Question ID                  | AFD.145_00.000  |
| Variable Name                | HEAR_2  |
| Universe                     | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and FDRN_FLG='1' and HEAR_1(e)='1'  |
| Universe-text                | Sample adults 18+ who were asked the family disability questions (FDB), were randomly selected to receive the Functioning and Disability (AFD) section, and use a hearing aid |
| Question Text                | How often do you use your hearing aid(s)? Would you say all of the time, some of the time, rarely, or never?  |
| Answer Codes                 | 1. All of the time 2. Some of the time 3. Rarely 4. Never Refused Don't know  |
| Question Type                | Pick One - answer list pane   |
| Field Pane Description Often |   |
| Fill Instructions            |   |
| Special Instructions         |   |
| Skip Instructions            | <1,2,R,D> goto HEAR_SS  |
| Hard Edits                   |   |
| Soft Edits                   |   |
| AssocHelp                    |   |

| Module               | 41   |
|----------------------|--|
| Section Name         | Adult Functioning and Disability   |
| Part                 |  |
| Question ID          | AFD.150_00.000   |
| Variable Name        | HEAR_SS  |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and FDRN_FLG='1'   |
| Universe-text        | Sample adults 18+ who were asked the family disability questions (FDB) and were randomly selected to receive the Functioning and Disability (AFD) section                      |
| Question Text        | Do you have difficulty hearing [fill: , even when using your hearing aid(s)]? Would you say no difficulty, some difficulty, a lot of difficulty, or are you unable to do this? |
| Answer Codes         | 1. No difficulty 2. Some difficulty 3. A lot of difficulty 4. Cannot do at all / Unable to do Refused Don't know   |
| Question Type        | Pick One - answer list pane  |
| Field Pane Descripti | ion Hearing  |
| Fill Instructions    | if HEAR_1=1, fill ", even when using your hearing aid(s)"; else leave blank.   |
| Special Instructions |  |
| Skip Instructions    | <1-3,R,D>[goto HEAR_3]<br><4> [goto MOB_SS]  |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module               | 41  |   |
|----------------------|---|---|
| Section Name         | Adult Functioning and Disabilit   | у   |
| Part                 |   |   |
| Question ID          | AFD.170_00.000  |   |
| Variable Name        | HEAR_3  |   |
| Universe             | HHSTAT4='S' and (AGE GE '0 and HEAR_SS(e) IN ('1','2','3','   | 18' and AGE not IN ('997','999')) and FDRN_FLG='1'<br>7','9')   |
| Universe-text        | randomly selected to receive th   | sked the family disability questions (FDB), were e Functioning and Disability (AFD) section, and have no f difficulty, or refused or don't know if they have difficulty aring aid |
| Question Text        |   | what is said in a conversation with one other person in a neg your hearing aid(s)]? Would you say no difficulty, or are you unable to do this?                                    |
| Answer Codes         | 1. No difficulty 2. Some difficulty 3. A lot of difficulty 4. Cannot do at all / Unable to a Refused Don't know | do  |
| Question Type        | Pick One - answer list pane   |   |
| Field Pane Descripti | Quiet room  |   |
| Fill Instructions    | if HEAR_1=1, fill "even when us   | sing your hearing aid(s)"; else fill blank.   |
| Special Instructions | Please grey out the text "Would are you unable to do this?" so t  | I you say no difficulty, some difficulty, a lot of difficulty, or hat it appears as optional text.  |
| Skip Instructions    | <1-3,R,D>[goto HEAR_4]<br><4>[goto MOB_SS]  |   |
| Hard Edits           |   |   |
| Soft Edits           |   |   |
| AssocHelp            |   |   |

| Module                 | 41  |
|------------------------|---|
| Section Name           | Adult Functioning and Disability  |
| Part                   |   |
| Question ID            | AFD.170_00.001  |
| Variable Name          | HEAR_4  |
| Universe               | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and FDRN_FLG='1' and HEAR_3(e) IN ('1','2','3','7','9')   |
| Universe-text          | Sample adults 18+ who were asked the family disability questions (FDB), were randomly selected to receive the Functioning and Disability (AFD) section, and have no difficulty, some difficulty, a lot of difficulty, or refuse or don't know if they have difficulty hearing what is said in a conversation with one other person in a quiet room (even when wearing their hearing aid(s)) |
| Question Text          | Do you have difficulty hearing what is said in a conversation with one other person in a noisier room [fill: even when using your hearing aid(s)]? Would you say no difficulty, some difficulty, a lot of difficulty, or are you unable to do this?   |
| Answer Codes           | 1. No difficulty 2. Some difficulty 3. A lot of difficulty 4. Cannot do at all / Unable to do Refused Don't know  |
| Question Type          | Pick One - answer list pane   |
| Field Pane Description | on Noisier room   |
| Fill Instructions      | if HEAR_1=1, fill "even when using your hearing aid(s)"; else fill blank.   |
| Special Instructions   | Please grey out the text "Would you say no difficulty, some difficulty, a lot of difficulty, or are you unable to do this?" so that it appears as optional text.  |
| Skip Instructions      | <1-4,R,D>[goto MOB_SS]  |
| Hard Edits             |   |
| Soft Edits             |   |
| AssocHelp              |   |

| Module                 | 41  |
|------------------------|---|
| Section Name           | Adult Functioning and Disability  |
| Part                   |   |
| Question ID            | AFD.180_00.000  |
| Variable Name          | MOB_SS  |
| Universe               | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and FDRN_FLG='1'  |
| Universe-text          | Sample adults 18+ who were asked the family disability questions (FDB) and were randomly selected to receive the Functioning and Disability (AFD) section |
| Question Text          | Do you have difficulty walking or climbing steps? Would you say no difficulty, some difficulty, a lot of difficulty, or are you unable to do this?        |
| Answer Codes           | 1. No difficulty 2. Some difficulty 3. A lot of difficulty 4. Cannot do at all / Unable to do Refused Don't know  |
| Question Type          | Pick One - answer list pane   |
| Field Pane Description | on Mobility   |
| Fill Instructions      |   |
| Special Instructions   |   |
| Skip Instructions      | <1-4,R,D> goto MOB_2  |
| Hard Edits             |   |
| Soft Edits             |   |
| AssocHelp              |   |

| Module                           | 41  |  |  |
|----------------------------------|---|--|--|
| Section Name                     | Adult Functioning and Disability  |  |  |
| Part                             |   |  |  |
| Question ID                      | AFD.200_00.000  |  |  |
| Variable Name                    | MOB_2   |  |  |
| Universe                         | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and FDRN_FLG='1'  |  |  |
| Universe-text                    | Sample adults 18+ who were asked the family disability questions (FDB) and were randomly selected to receive the Functioning and Disability (AFD) section |  |  |
| Question Text                    | Do you use any equipment or receive help for getting around?  |  |  |
| Answer Codes                     | 1. Yes 2. No Refused Don't know   |  |  |
| Question Type                    | Yes/No  |  |  |
| Field Pane Description Equipment |   |  |  |
| Fill Instructions                |   |  |  |
| Special Instructions             |   |  |  |
| Skip Instructions                | <1>[goto MOB_3A]<br><2,R,D>[goto MOB_4]   |  |  |
| Hard Edits                       |   |  |  |
| Soft Edits                       |   |  |  |
| AssocHelp                        |   |  |  |

| Module               | 41   |
|----------------------|--|
| Section Name         | Adult Functioning and Disability   |
| Part                 |  |
| Question ID          | AFD.200_00.001   |
| Variable Name        | MOB_3A   |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and FDRN_FLG='1' and MOB_2(e)='1'  |
| Universe-text        | Sample adults 18+ who were asked the family disability questions (FDB), were randomly selected to receive the Functioning and Disability (AFD) section, and use equipment or receive help for getting around |
| Question Text        | Do you use any of the following  Cane or walking stick?  |
| Answer Codes         | 1. Yes 2. No Refused Don't know  |
| Question Type        | Yes/No   |
| Field Pane Descripti | on Cane  |
| Fill Instructions    |  |
| Special Instructions |  |
| Skip Instructions    | <1,2,R,D> goto MOB_3B  |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module               | 41   |  |  |  |  |
|----------------------|--|--|--|--|--|
| Section Name         | Adult Functioning and Disability   |  |  |  |  |
| Part                 |  |  |  |  |  |
| Question ID          | AFD.200_00.002   |  |  |  |  |
| Variable Name        | MOB_3B   |  |  |  |  |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and FDRN_FLG='1' and MOB_2(e)='1'  |  |  |  |  |
| Universe-text        | Sample adults 18+ who were asked the family disability questions (FDB), were randomly selected to receive the Functioning and Disability (AFD) section, and use equipment or receive help for getting around |  |  |  |  |
| Question Text        | *Read if necessary.  |  |  |  |  |
|                      | Do you use any of the following  Walker or Zimmer frame?   |  |  |  |  |
| Answer Codes         | 1. Yes 2. No Refused Don't know  |  |  |  |  |
| Question Type        | Yes/No   |  |  |  |  |
| Field Pane Descripti | on Walker  |  |  |  |  |
| Fill Instructions    |  |  |  |  |  |
| Special Instructions | Display the text "Do you use any of the following" in GRAY text.   |  |  |  |  |
| Skip Instructions    | <1,2,R,D> goto MOB_3C  |  |  |  |  |
| Hard Edits           |  |  |  |  |  |
| Soft Edits           |  |  |  |  |  |
| AssocHelp            |  |  |  |  |  |

| Module                 | 41   |  |  |  |
|------------------------|--|--|--|--|
| Section Name           | Adult Functioning and Disability   |  |  |  |
| Part                   |  |  |  |  |
| Question ID            | AFD.200_00.003   |  |  |  |
| Variable Name          | MOB_3C   |  |  |  |
| Universe               | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and FDRN_FLG='1' and MOB_2(e)='1'  |  |  |  |
| Universe-text          | Sample adults 18+ who were asked the family disability questions (FDB), were randomly selected to receive the Functioning and Disability (AFD) section, and use equipment or receive help for getting around |  |  |  |
| Question Text          | *Read if necessary.  |  |  |  |
| Answer Codes           | Do you use any of the following  Crutches?  1. Yes 2. No Refused   |  |  |  |
|                        | Don't know   |  |  |  |
| Question Type          | Yes/No   |  |  |  |
| Field Pane Description | on Crutches  |  |  |  |
| Fill Instructions      |  |  |  |  |
| Special Instructions   | Display the text "Do you use any of the following" in GRAY text.   |  |  |  |
| Skip Instructions      | <1,2,R,D> goto MOB_3D  |  |  |  |
| Hard Edits             |  |  |  |  |
| Soft Edits             |  |  |  |  |
| AssocHelp              |  |  |  |  |

| Module                 | 41   |  |  |  |
|------------------------|--|--|--|--|
| Section Name           | Adult Functioning and Disability   |  |  |  |
| Part                   |  |  |  |  |
| Question ID            | AFD.200_00.004   |  |  |  |
| Variable Name          | MOB_3D   |  |  |  |
| Universe               | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and FDRN_FLG='1' and MOB_2(e)='1'  |  |  |  |
| Universe-text          | Sample adults 18+ who were asked the family disability questions (FDB), were randomly selected to receive the Functioning and Disability (AFD) section, and use equipment or receive help for getting around |  |  |  |
| Question Text          | *Read if necessary.  |  |  |  |
| Answer Codes           | Do you use any of the following  Wheelchair or scooter?  1. Yes 2. No Refused Don't know   |  |  |  |
| 0 4 70                 |  |  |  |  |
| Question Type          | Yes/No   |  |  |  |
| Field Pane Description | on Wheelchair  |  |  |  |
| Fill Instructions      |  |  |  |  |
| Special Instructions   | Display the text "Do you use any of the following" in GRAY text.   |  |  |  |
| Skip Instructions      | <1,2,R,D> goto MOB_3E  |  |  |  |
| Hard Edits             |  |  |  |  |
| Soft Edits             |  |  |  |  |
| AssocHelp              |  |  |  |  |

| Module                 | 41   |  |  |
|------------------------|--|--|--|
| Section Name           | Adult Functioning and Disability   |  |  |
| Part                   |  |  |  |
| Question ID            | AFD.200_00.005   |  |  |
| Variable Name          | MOB_3E   |  |  |
| Universe               | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and FDRN_FLG='1' and MOB_2(e)='1'  |  |  |
| Universe-text          | Sample adults 18+ who were asked the family disability questions (FDB), were randomly selected to receive the Functioning and Disability (AFD) section, and use equipment or receive help for getting around |  |  |
| Question Text          | *Read if necessary.  |  |  |
| Answer Codes           | Do you use any of the following  Artificial limb (leg/foot)?  1. Yes 2. No   |  |  |
|                        | Refused<br>Don't know  |  |  |
| Question Type          | Yes/No   |  |  |
| Field Pane Description | on Artificial limb   |  |  |
| Fill Instructions      |  |  |  |
| Special Instructions   | Display the text "Do you use any of the following" in GRAY text.   |  |  |
| Skip Instructions      | <1,2,R,D> goto MOB_3F  |  |  |
| Hard Edits             |  |  |  |
| Soft Edits             |  |  |  |
| AssocHelp              |  |  |  |

| Module                 | 41   |  |  |  |
|------------------------|--|--|--|--|
| Section Name           | Adult Functioning and Disability   |  |  |  |
| Part                   |  |  |  |  |
| Question ID            | AFD.200_00.006   |  |  |  |
| Variable Name          | MOB_3F   |  |  |  |
| Universe               | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and FDRN_FLG='1' and MOB_2(e)='1'  |  |  |  |
| Universe-text          | Sample adults 18+ who were asked the family disability questions (FDB), were randomly selected to receive the Functioning and Disability (AFD) section, and use equipment or receive help for getting around |  |  |  |
| Question Text          | *Read if necessary.  |  |  |  |
| Answer Codes           | Do you use any of the following  Someone's assistance?  1. Yes 2. No Refused Don't know  |  |  |  |
| Question Type          |  |  |  |  |
| Field Pane Description | Yes/No  Assistance   |  |  |  |
| Fill Instructions      | 7 toolotarioo  |  |  |  |
| Special Instructions   | Display the text "Do you use any of the following" in GRAY text.   |  |  |  |
| Skip Instructions      | <1,2,R,D> goto MOB_3G  |  |  |  |
| Hard Edits             |  |  |  |  |
| Soft Edits             |  |  |  |  |
| AssocHelp              |  |  |  |  |

| Module               | 41   |  |  |  |
|----------------------|--|--|--|--|
| Section Name         | Adult Functioning and Disability   |  |  |  |
| Part                 |  |  |  |  |
| Question ID          | AFD.200_00.007   |  |  |  |
| Variable Name        | MOB_3G   |  |  |  |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and FDRN_FLG='1' and MOB_2(e)='1'  |  |  |  |
| Universe-text        | Sample adults 18+ who were asked the family disability questions (FDB), were randomly selected to receive the Functioning and Disability (AFD) section, and use equipment or receive help for getting around |  |  |  |
| Question Text        | *Read if necessary.  |  |  |  |
| Answer Codes         | 1. 103   |  |  |  |
|                      | 2. No Refused Don't know   |  |  |  |
| Question Type        | Yes/No   |  |  |  |
| Field Pane Descripti | Other equipment  |  |  |  |
| Fill Instructions    |  |  |  |  |
| Special Instructions | ctions Display the text "Do you use any of the following" in GRAY text.  |  |  |  |
| Skip Instructions    | <1,2,R,D> if MOB_3D=1, [goto COM_SS];<br>else if MOB_3D=2,R,D [goto MOB_4]   |  |  |  |
| Hard Edits           |  |  |  |  |
| Soft Edits           |  |  |  |  |
| AssocHelp            |  |  |  |  |

| Module               | 41  |  |  |  |
|----------------------|---|--|--|--|
| Section Name         | Adult Functioning and Disability  |  |  |  |
| Part                 |   |  |  |  |
| Question ID          | AFD.210_00.000  |  |  |  |
| Variable Name        | MOB_4   |  |  |  |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and FDRN_FLG='1' and (MOB_2(e) IN ('2','7','9') or MOB_3D(e) IN ('2','7','9'))  |  |  |  |
| Universe-text        | Sample adults 18+ who were asked the family disability questions (FDB), were randomly selected to receive the Functioning and Disability (AFD) section, and do not use a wheelchair or scooter  |  |  |  |
| Question Text        | Do you have difficulty walking 100 yards on level ground, that would be about the length of one football field or one city block [fill: without the use of your aid(s)]? Would you say no difficulty, some difficulty, a lot of difficulty, or are you unable to do this? |  |  |  |
| Answer Codes         | 1. No difficulty 2. Some difficulty 3. A lot of difficulty 4. Cannot do at all / Unable to do Refused Don't know  |  |  |  |
| Question Type        | Pick One - answer list pane   |  |  |  |
| Field Pane Descripti | Walking 100 yards   |  |  |  |
| Fill Instructions    | if MOB_2=1, fill "without the use of your aid(s)"; else fill blank.   |  |  |  |
| Special Instructions |   |  |  |  |
| Skip Instructions    | <1-3,R,D>[goto MOB_5]<br><4>[goto MOB_6]  |  |  |  |
| Hard Edits           |   |  |  |  |
| Soft Edits           |   |  |  |  |
| AssocHelp            |   |  |  |  |

| Module               | 41  |  |  |  |
|----------------------|---|--|--|--|
| Section Name         | Adult Functioning and Disability  |  |  |  |
| Part                 |   |  |  |  |
| Question ID          | AFD.220_00.000  |  |  |  |
| Variable Name        | MOB_5   |  |  |  |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and FDRN_FLG='1' and MOB_3D(e) NE '1' and MOB_4(e) IN ('1','2','3','7','9')   |  |  |  |
| Universe-text        | Sample adults 18+ who were asked the family disability questions (FDB), were randomly selected to receive the Functioning and Disability (AFD) section, do not use a wheelchair or scooter, and have no difficulty, some difficulty, a lot of difficulty, or refused or don't know if they have difficulty walking 100 yards on level ground (without the use of their aid) |  |  |  |
| Question Text        | Do you have difficulty walking a third of a mile on level ground, that would be the length of five football fields or five city blocks [fill: without the use of your aid(s)]? Would you say no difficulty, some difficulty, a lot of difficulty, or are you unable to do this?   |  |  |  |
| Answer Codes         | 1. No difficulty 2. Some difficulty 3. A lot of difficulty 4. Cannot do at all / Unable to do Refused Don't know  |  |  |  |
| Question Type        | Pick One - answer list pane   |  |  |  |
| Field Pane Descripti | Walking 1/3 mile  |  |  |  |
| Fill Instructions    | if MOB_2=1, fill "without the use of your aid(s)"; else fill blank.   |  |  |  |
| Special Instructions | Please grey out the text "Would you say no difficulty, some difficulty, a lot of difficulty, or are you unable to do this?" so that it appears as optional text.  |  |  |  |
| Skip Instructions    | <1-4,R,D> goto MOB_6  |  |  |  |
| Hard Edits           |   |  |  |  |
| Soft Edits           |   |  |  |  |
| AssocHelp            |   |  |  |  |

| Module               | 41  |   |                         |
|----------------------|---|---|-------------------------|
| Section Name         | Adult Functioning and Disability  | / |                         |
| Part                 |   |   |                         |
| Question ID          | AFD.230_00.000  |   |                         |
| Variable Name        | MOB_6   |   |                         |
| Universe             | HHSTAT4='S' and (AGE GE '0' and (MOB_2(e) IN ('2','7','9') or   |   | 999')) and FDRN_FLG='1' |
| Universe-text        | Sample adults 18+ who were asked the family disability questions (FDB), were randomly selected to receive the Functioning and Disability (AFD) section, and do not use a wheelchair or scooter  |   |                         |
| Question Text        | Do you have difficulty walking up or down 12 steps? Would you say no difficulty, some difficulty, a lot of difficulty, or are you unable to do this?  |   |                         |
| Answer Codes         | No difficulty     Some difficulty     A lot of difficulty     Cannot do at all / Unable to call the call of t | 0 |                         |
| Question Type        | Pick One - answer list pane   |   |                         |
| Field Pane Descripti | Walking 12 steps  |   |                         |
| Fill Instructions    |   |   |                         |
| Special Instructions | Please grey out the text "Would you say no difficulty, some difficulty, a lot of difficulty, or are you unable to do this?" so that it appears as optional text.  |   |                         |
| Skip Instructions    | <1-4,R,D> if MOB_2 IN (2,R,D) [goto COM_SS];<br>else if MOB_2=1 [goto MOB_7]  |   |                         |
| Hard Edits           |   |   |                         |
| Soft Edits           |   |   |                         |
| AssocHelp            |   |   |                         |

| Module               | 41  |   |                        |  |
|----------------------|---|---|------------------------|--|
| Section Name         | Adult Functioning and Disability  | y |                        |  |
| Part                 |   |   |                        |  |
| Question ID          | AFD.240_00.000  |   |                        |  |
| Variable Name        | MOB_7   |   |                        |  |
| Universe             | HHSTAT4='S' and (AGE GE '01 and MOB_2(e)='1' and MOB_3I   |   | 99')) and FDRN_FLG='1' |  |
| Universe-text        | Sample adults 18+ who were asked the family disability questions (FDB), were randomly selected to receive the Functioning and Disability (AFD) section, and use equipment or receive help for getting around but do not use a wheelchair or scooter   |   |                        |  |
| Question Text        | Do you have difficulty walking 100 yards on level ground, that would be about the length of one football field or one city block, when using your aid(s)? Would you say no difficulty, some difficulty, a lot of difficulty, or are you unable to do this?  |   |                        |  |
| Answer Codes         | No difficulty     Some difficulty     A lot of difficulty     Cannot do at all / Unable to define the definition of the control of the c | Ю |                        |  |
| Question Type        | Pick One - answer list pane   |   |                        |  |
| Field Pane Descripti | 100 yards with aid  |   |                        |  |
| Fill Instructions    |   |   |                        |  |
| Special Instructions | Please grey out the text "Would you say no difficulty, some difficulty, a lot of difficulty, or are you unable to do this?" so that it appears as optional text.  |   |                        |  |
| Skip Instructions    | <1-3,R,D>[goto MOB_8]<br><4>[goto COM_SS]   |   |                        |  |
| Hard Edits           |   |   |                        |  |
| Soft Edits           |   |   |                        |  |
| AssocHelp            |   |   |                        |  |

| Module                 | 41  |
|------------------------|---|
| Section Name           | Adult Functioning and Disability  |
| Part                   |   |
| Question ID            | AFD.250_00.000  |
| Variable Name          | MOB_8   |
| Universe               | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and FDRN_FLG='1' and MOB_2(e)='1' and MOB_3D(e) NE '1' and MOB_7(e) IN ('1','2','3','7','9')  |
| Universe-text          | Sample adults 18+ who were asked the family disability questions (FDB), were randomly selected to receive the Functioning and Disability (AFD) section, use equipment or receive help for getting around but do not use a wheelchair or scooter, and who have no difficulty, some difficulty, a lot of difficulty, or refused or don't know if they have difficulty walking 100 yards on level ground, when using their aid |
| Question Text          | Do you have difficulty walking a third of a mile on level ground, that would be the length of five football fields or five city blocks, when using your aid(s)? Would you say no difficulty, some difficulty, a lot of difficulty, or are you unable to do this?  |
| Answer Codes           | 1. No difficulty 2. Some difficulty 3. A lot of difficulty 4. Cannot do at all / Unable to do Refused Don't know  |
| Question Type          | Pick One - answer list pane   |
| Field Pane Description | on 1/3 mile with aid  |
| Fill Instructions      |   |
| Special Instructions   | Please grey out the text "Would you say no difficulty, some difficulty, a lot of difficulty, or are you unable to do this?" so that it appears as optional text.  |
| Skip Instructions      | <1-4,R,D> goto COM_SS   |
| Hard Edits             |   |
| Soft Edits             |   |
| AssocHelp              |   |

| Module               | 41  |
|----------------------|---|
| Section Name         | Adult Functioning and Disability  |
| Part                 |   |
| Question ID          | AFD.270_00.000  |
| Variable Name        | COM_SS  |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and FDRN_FLG='1'  |
| Universe-text        | Sample adults 18+ who were asked the family disability questions (FDB) and were randomly selected to receive the Functioning and Disability (AFD) section   |
| Question Text        | Using your usual language, do you have difficulty communicating, for example, understanding or being understood? Would you say no difficulty, some difficulty, a lot of difficulty, or are you unable to do this? |
| Answer Codes         | 1. No difficulty 2. Some difficulty 3. A lot of difficulty 4. Cannot do at all / Unable to do Refused Don't know  |
| Question Type        | Pick One - answer list pane   |
| Field Pane Descripti | Communication   |
| Fill Instructions    |   |
| Special Instructions |   |
| Skip Instructions    | <1-4,R,D> goto COM_2  |
| Hard Edits           |   |
| Soft Edits           |   |
| AssocHelp            |   |

| Module                         | 41  |  |
|--------------------------------|---|--|
| Section Name                   | Adult Functioning and Disability  |  |
| Part                           |   |  |
| Question ID                    | AFD.290_00.000  |  |
| Variable Name                  | COM_2   |  |
| Universe                       | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999')) and FDRN_FLG='1'   |  |
| Universe-text                  | Sample adults 18+ who were asked the family disability questions (FDB) and were randomly selected to receive the Functioning and Disability (AFD) section |  |
| Question Text                  | Do you use sign language?   |  |
| Answer Codes                   | 1. Yes 2. No Refused Don't know   |  |
| Question Type                  | Yes/No  |  |
| Field Pane Description Signing |   |  |
| Fill Instructions              |   |  |
| Special Instructions           |   |  |
| Skip Instructions              | <1,2,R,D> goto COG_SS   |  |
| Hard Edits                     |   |  |
| Soft Edits                     |   |  |
| AssocHelp                      |   |  |

| Module                           | 41  |  |
|----------------------------------|---|--|
| Section Name                     | Adult Functioning and Disability  |  |
| Part                             |   |  |
| Question ID                      | AFD.300_00.000  |  |
| Variable Name                    | COG_SS  |  |
| Universe                         | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999')) and FDRN_FLG='1'   |  |
| Universe-text                    | Sample adults 18+ who were asked the family disability questions (FDB) and were randomly selected to receive the Functioning and Disability (AFD) section |  |
| Question Text                    | Do you have difficulty remembering or concentrating? Would you say no difficulty, some difficulty, a lot of difficulty, or are you unable to do this?     |  |
| Answer Codes                     | 1. No difficulty 2. Some difficulty 3. A lot of difficulty 4. Cannot do at all / Unable to do Refused Don't know  |  |
| Question Type                    | Pick One - answer list pane   |  |
| Field Pane Description Cognitive |   |  |
| Fill Instructions                |   |  |
| Special Instructions             |   |  |
| Skip Instructions                | <1>[goto UB_SS]<br><2-4,R,D>[goto COG_1]  |  |
| Hard Edits                       |   |  |
| Soft Edits                       |   |  |
| AssocHelp                        |   |  |

| Module               | 41  |
|----------------------|---|
| Section Name         | Adult Functioning and Disability  |
| Part                 |   |
| Question ID          | AFD.310_00.000  |
| Variable Name        | COG_1   |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and FDRN_FLG='1' and COG_SS(e) IN ('2','3','4','7','9')   |
| Universe-text        | Sample adults 18+ who were asked the family disability questions (FDB), were randomly selected to receive the Functioning and Disability (AFD) section, and have some difficulty, a lot of difficulty, or are unable to remember or concentrate, or don't know or refused if they are able to remember or concentrate |
| Question Text        | Do you have difficulty remembering, concentrating, or both?   |
| Answer Codes         | Difficulty remembering only     Difficulty concentrating only     Difficulty with both remembering and concentrating     Refused     Don't know   |
| Question Type        | Pick One - answer list pane   |
| Field Pane Descripti | Remembering   |
| Fill Instructions    |   |
| Special Instructions |   |
| Skip Instructions    | <1,3,R,D>[goto COG_2]<br><2>[goto UB_SS]  |
| Hard Edits           |   |
| Soft Edits           |   |
| AssocHeln            |   |

| Module               | 41   |
|----------------------|--|
| Section Name         | Adult Functioning and Disability   |
| Part                 |  |
| Question ID          | AFD.320_00.000   |
| Variable Name        | COG_2  |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and FDRN_FLG='1' and COG_SS(e) IN ('2','3','4','7','9') and COG_1(e) IN ('1','3','7','9')  |
| Universe-text        | Sample adults 18+ who were asked the family disability questions (FDB), were randomly selected to receive the Functioning and Disability (AFD) section, and have difficulty remembering or don't know or refused if they have difficulty remembering |
| Question Text        | How often do you have difficulty remembering? Would you say sometimes, often or all of the time?   |
| Answer Codes         | 1. Sometimes 2. Often 3. All of the time Refused Don't know  |
| Question Type        | Pick One - answer list pane  |
| Field Pane Descripti | Often  |
| Fill Instructions    |  |
| Special Instructions |  |
| Skip Instructions    | <1-3,R,D> goto COG_3   |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module                 | 41   |
|------------------------|--|
| Section Name           | Adult Functioning and Disability   |
| Part                   |  |
| Question ID            | AFD.330_00.000   |
| Variable Name          | COG_3  |
| Universe               | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and FDRN_FLG='1' and COG_SS(e) IN ('2','3','4','7','9') and COG_1(e) IN ('1','3','7','9')  |
| Universe-text          | Sample adults 18+ who were asked the family disability questions (FDB), were randomly selected to receive the Functioning and Disability (AFD) section, and have difficulty remembering or don't know or refused if they have difficulty remembering |
| Question Text          | Do you have difficulty remembering a few things, a lot of things, or almost everything?  |
| Answer Codes           | 1. A few things 2. A lot of things 3. Almost everything Refused Don't know   |
| Question Type          | Pick One - answer list pane  |
| Field Pane Description | on Difficulty  |
| Fill Instructions      |  |
| Special Instructions   |  |
| Skip Instructions      | <1-3,R,D> goto UB_SS   |
| Hard Edits             |  |
| Soft Edits             |  |
| AssocHelp              |  |

| Module                 | 41  |
|------------------------|---|
| Section Name           | Adult Functioning and Disability  |
| Part                   |   |
| Question ID            | AFD.360_00.000  |
| Variable Name          | UB_SS   |
| Universe               | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999')) and FDRN_FLG='1'   |
| Universe-text          | Sample adults 18+ who were asked the family disability questions (FDB) and were randomly selected to receive the Functioning and Disability (AFD) section                     |
| Question Text          | Do you have difficulty with self care, such as washing all over or dressing? Would you say no difficulty, some difficulty, a lot of difficulty, or are you unable to do this? |
| Answer Codes           | 1. No difficulty 2. Some difficulty 3. A lot of difficulty 4. Cannot do at all / Unable to do Refused Don't know  |
| Question Type          | Pick One - answer list pane   |
| Field Pane Description | on Self care  |
| Fill Instructions      |   |
| Special Instructions   |   |
| Skip Instructions      | <1-4,R,D> goto UB_1   |
| Hard Edits             |   |
| Soft Edits             |   |
| AssocHelp              |   |

| Module               | 41   |
|----------------------|--|
| Section Name         | Adult Functioning and Disability   |
| Part                 |  |
| Question ID          | AFD.370_00.000   |
| Variable Name        | UB_1   |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999')) and FDRN_FLG='1'  |
| Universe-text        | Sample adults 18+ who were asked the family disability questions (FDB) and were randomly selected to receive the Functioning and Disability (AFD) section                                  |
| Question Text        | Do you have difficulty raising a 2 liter bottle of water or soda from waist to eye level? Would you say no difficulty, some difficulty, a lot of difficulty, or are you unable to do this? |
| Answer Codes         | 1. No difficulty 2. Some difficulty 3. A lot of difficulty 4. Cannot do at all / Unable to do Refused Don't know   |
| Question Type        | Pick One - answer list pane  |
| Field Pane Descripti | on Lifting   |
| Fill Instructions    |  |
| Special Instructions | Please grey out the text "Would you say no difficulty, some difficulty, a lot of difficulty, or are you unable to do this?" so that it appears as optional text.                           |
| Skip Instructions    | <1-4,R,D> goto UB_2  |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module               | 41  |
|----------------------|---|
| Section Name         | Adult Functioning and Disability  |
| Part                 |   |
| Question ID          | AFD.380_00.000  |
| Variable Name        | UB_2  |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and FDRN_FLG='1'  |
| Universe-text        | Sample adults 18+ who were asked the family disability questions (FDB) and were randomly selected to receive the Functioning and Disability (AFD) section   |
| Question Text        | Do you have difficulty using your hands and fingers, such as picking up small objects, for example, a button or pencil, or opening or closing containers or bottles? Would you say no difficulty, some difficulty, a lot of difficulty, or are you unable to do this? |
| Answer Codes         | 1. No difficulty 2. Some difficulty 3. A lot of difficulty 4. Cannot do at all / Unable to do Refused Don't know  |
| Question Type        | Pick One - answer list pane   |
| Field Pane Descripti | on Grasping   |
| Fill Instructions    |   |
| Special Instructions | Please grey out the text "Would you say no difficulty, some difficulty, a lot of difficulty, or are you unable to do this?" so that it appears as optional text.  |
| Skip Instructions    | <1-4,R,D> goto ANX_1  |
| Hard Edits           |   |
| Soft Edits           |   |
| AssocHeln            |   |

| Module                 | 41  |
|------------------------|---|
| Section Name           | Adult Functioning and Disability  |
| Part                   |   |
| Question ID            | AFD.410_00.000  |
| Variable Name          | ANX_1   |
| Universe               | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999')) and FDRN_FLG='1'   |
| Universe-text          | Sample adults 18+ who were asked the family disability questions (FDB) and were randomly selected to receive the Functioning and Disability (AFD) section |
| Question Text          | How often do you feel worried, nervous or anxious? Would you say daily, weekly, monthly, a few times a year, or never?                                    |
| Answer Codes           | 1 Daily 2 Weekly 3 Monthly 4 A few times a year 5 Never Refused Don't know  |
| Question Type          | Pick One - answer list pane   |
| Field Pane Description | on Anxiety  |
| Fill Instructions      |   |
| Special Instructions   |   |
| Skip Instructions      | <1-5,R,D> goto ANX_2  |
| Hard Edits             |   |
| Soft Edits             |   |
| AssocHelp              |   |

| Module               | 41  |
|----------------------|---|
| Section Name         | Adult Functioning and Disability  |
| Part                 |   |
| Question ID          | AFD.420_00.000  |
| Variable Name        | ANX_2   |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999')) and FDRN_FLG='1'   |
| Universe-text        | Sample adults 18+ who were asked the family disability questions (FDB) and were randomly selected to receive the Functioning and Disability (AFD) section |
| Question Text        | Do you take medication for these feelings?  |
| Answer Codes         | 1. Yes 2. No Refused Don't know   |
| Question Type        | Yes/No  |
| Field Pane Descripti | on Medication   |
| Fill Instructions    |   |
| Special Instructions |   |
| Skip Instructions    | <1,R,D> [goto ANX_3]<br><2> if ANX_1=5 [goto DEP_1];<br>else [goto ANX_3]   |
| Hard Edits           |   |
| Soft Edits           |   |
| AssocHelp            |   |

| Module               | 41   |
|----------------------|--|
| Section Name         | Adult Functioning and Disability   |
| Part                 |  |
| Question ID          | AFD.430_00.000   |
| Variable Name        | ANX_3  |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and FDRN_FLG='1' and (ANX_1(e) IN ('1','2','3','4','7','9') or ANX_2(e) IN ('1','7','9'))  |
| Universe-text        | Sample adults 18+ who were asked the family disability questions (FDB), were randomly selected to receive the Functioning and Disability (AFD) section, and feel worried, anxious, or nervous daily, weekly, monthly, a few times a year or don't know or refused how often OR who do take medication for these feelings or don't know or refused if they take medication for these feelings |
| Question Text        | Thinking about the last time you felt worried, nervous or anxious, how would you describe the level of these feelings? Would you say a little, a lot, or somewhere in between?   |
| Answer Codes         | 1. A little 2. A lot 3. Somewhere in between a little and a lot Refused Don't know   |
| Question Type        | Pick One - answer list pane  |
| Field Pane Descripti | Feelings   |
| Fill Instructions    |  |
| Special Instructions |  |
| Skip Instructions    | <1-3,R,D> goto DEP_1   |
| Hard Edits           |  |
| Soft Edits           |  |
| AssocHelp            |  |

| Module                            | 41  |  |
|-----------------------------------|---|--|
| Section Name                      | Adult Functioning and Disability  |  |
| Part                              |   |  |
| Question ID                       | AFD.450_00.000  |  |
| Variable Name                     | DEP_1   |  |
| Universe                          | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999')) and FDRN_FLG='1'   |  |
| Universe-text                     | Sample adults 18+ who were asked the family disability questions (FDB) and were randomly selected to receive the Functioning and Disability (AFD) section |  |
| Question Text                     | How often do you feel depressed? Would you say daily, weekly, monthly, a few times a year, or never?  |  |
| Answer Codes                      | 1. Daily 2. Weekly 3. Monthly 4. A few times a year 5. Never Refused Don't know   |  |
| Question Type                     | Pick One - answer list pane   |  |
| Field Pane Description Depression |   |  |
| Fill Instructions                 |   |  |
| Special Instructions              |   |  |
| Skip Instructions                 | <1-5,R,D> goto DEP_2  |  |
| Hard Edits                        |   |  |
| Soft Edits                        |   |  |
| AssocHelp                         |   |  |

| Module               | 41  |
|----------------------|---|
| Section Name         | Adult Functioning and Disability  |
| Part                 |   |
| Question ID          | AFD.460_00.000  |
| Variable Name        | DEP_2   |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999')) and FDRN_FLG='1'   |
| Universe-text        | Sample adults 18+ who were asked the family disability questions (FDB) and were randomly selected to receive the Functioning and Disability (AFD) section |
| Question Text        | Do you take medication for depression?  |
| Answer Codes         | 1. Yes 2. No Refused Don't know   |
| Question Type        | Yes/No  |
| Field Pane Descripti | on Medication   |
| Fill Instructions    |   |
| Special Instructions |   |
| Skip Instructions    | <1,R,D> [goto DEP_3] <2> if DEP_1=5 [goto PAIN_2]; else [goto DEP_3]  |
| Hard Edits           |   |
| Soft Edits           |   |
| AssocHelp            |   |

| Module                          | 41  |
|---------------------------------|---|
| Section Name                    | Adult Functioning and Disability  |
| Part                            |   |
| Question ID                     | AFD.470_00.000  |
| Variable Name                   | DEP_3   |
| Universe                        | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and FDRN_FLG='1' and (DEP_1(e) IN ('1','2','3','4','7','9') or (DEP_2(e) IN ('1','7','9')))   |
| Universe-text                   | Sample adults 18+ who were asked the family disability questions (FDB), were randomly selected to receive the Functioning and Disability (AFD) section, and feel depressed daily, weekly, monthly, a few times a year or refused or don't know how often they feel depressed OR who do take medication or refused or don't know if they take medication for depression. |
| Question Text                   | Thinking about the last time you felt depressed, how depressed did you feel? Would you say a little, a lot, or somewhere in between?  |
| Answer Codes                    | 1. A little 2. A lot 3. Somewhere in between a little and a lot Refused Don't know  |
| Question Type                   | Pick One - answer list pane   |
| Field Pane Description How much |   |
| Fill Instructions               |   |
| Special Instructions            |   |
| Skip Instructions               | <1-3,R,D> goto PAIN_2   |
| Hard Edits                      |   |
| Soft Edits                      |   |
| AssocHelp                       |   |

| Module                 | 41  |
|------------------------|---|
| Section Name           | Adult Functioning and Disability  |
| Part                   |   |
| Question ID            | AFD.500_00.000  |
| Variable Name          | PAIN_2  |
| Universe               | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999')) and FDRN_FLG='1'   |
| Universe-text          | Sample adults 18+ who were asked the family disability questions (FDB) and were randomly selected to receive the Functioning and Disability (AFD) section |
| Question Text          | In the past 3 months, how often did you have pain? Would you say never, some days, most days, or every day?   |
| Answer Codes           | 1. Never 2. Some days 3. Most days 4. Every day Refused Don't know  |
| Question Type          | Pick One - answer list pane   |
| Field Pane Description | on Often  |
| Fill Instructions      |   |
| Special Instructions   |   |
| Skip Instructions      | <1> [goto TIRED_1]<br><2,3,4,R,D> [goto PAIN_4]   |
| Hard Edits             |   |
| Soft Edits             |   |
| AssocHelp              |   |

| Module                      | 41  |
|-----------------------------|---|
| Section Name                | Adult Functioning and Disability  |
| Part                        |   |
| Question ID                 | AFD.520_00.000  |
| Variable Name               | PAIN_4  |
| Universe                    | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and FDRN_FLG='1' and PAIN_2(e) IN ('2','3','4','7','9')   |
| Universe-text               | Sample adults 18+ who were asked the family disability questions (FDB), were randomly selected to receive the Functioning and Disability (AFD) section, and have had pain some days, most days, every day, or refused or don't know how often they have had pain in the past 3 months |
| Question Text               | Thinking about the last time you had pain, how much pain did you have? Would you say a little, a lot, or somewhere in between?  |
| Answer Codes                | 1 A little 2 A lot 3 Somewhere in between a little and a lot Refused Don't know   |
| Question Type               | Pick One - answer list pane   |
| Field Pane Description Last |   |
| Fill Instructions           |   |
| Special Instructions        |   |
| Skip Instructions           | <1-3,R,D> goto TIRED_1  |
| Hard Edits                  |   |
| Soft Edits                  |   |
| AssocHelp                   |   |

| Module                       | 41  |  |
|------------------------------|---|--|
| Section Name                 | Adult Functioning and Disability  |  |
| Part                         |   |  |
| Question ID                  | AFD.540_00.000  |  |
| Variable Name                | TIRED_1   |  |
| Universe                     | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999')) and FDRN_FLG='1'   |  |
| Universe-text                | Sample adults 18+ who were asked the family disability questions (FDB) and were randomly selected to receive the Functioning and Disability (AFD) section |  |
| Question Text                | In the past 3 months, how often did you feel very tired or exhausted? Would you say never, some days, most days, or every day?                            |  |
| Answer Codes                 | 1. Never 2. Some days 3. Most days 4. Every day Refused Don't know  |  |
| Question Type                | Pick One - answer list pane   |  |
| Field Pane Description Tired |   |  |
| Fill Instructions            |   |  |
| Special Instructions         |   |  |
| Skip Instructions            | <1>[goto next section]<br><2-4,R,D>[goto TIRED_2]   |  |
| Hard Edits                   |   |  |
| Soft Edits                   |   |  |
| AssocHelp                    |   |  |

| Module                          | 41  |  |
|---------------------------------|---|--|
| Section Name                    | Adult Functioning and Disability  |  |
| Part                            |   |  |
| Question ID                     | AFD.550_00.000  |  |
| Variable Name                   | TIRED_2   |  |
| Universe                        | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and FDRN_FLG='1' and TIRED_1(e) IN ('2','3','4','7','9')  |  |
| Universe-text                   | Sample adults 18+ who were asked the family disability questions (FDB), were randomly selected to receive the Functioning and Disability (AFD) section, and felt very tired or exhausted some days, most days, every day, or refused or don't know how often they felt very tired or exhausted in the past 3 months |  |
| Question Text                   | Thinking about the last time you felt very tired or exhausted, how long did it last? Would you say some of the day, most of the day, or all of the day?   |  |
| Answer Codes                    | 1. Some of the day 2. Most of the day 3. All of the day Refused Don't know  |  |
| Question Type                   | Pick One - answer list pane   |  |
| Field Pane Description How long |   |  |
| Fill Instructions               |   |  |
| Special Instructions            |   |  |
| Skip Instructions               | <1-3,R,D> goto TIRED_3  |  |
| Hard Edits                      |   |  |
| Soft Edits                      |   |  |
| AssocHelp                       |   |  |

| Module                       | 41  |   |   |
|------------------------------|---|---|---|
| Section Name                 | Adult Functioning and Disability  |   |   |
| Part                         |   |   |   |
| Question ID                  | AFD.560_00.000  |   |   |
| Variable Name                | TIRED_3   |   |   |
| Universe                     | HHSTAT4='S' and (AGE GE '018 and TIRED_1(e) IN ('2','3','4','7','9  |   | 999')) and FDRN_FLG='1'                                 |
| Universe-text                | Sample adults 18+ who were ask randomly selected to receive the tired or exhausted some days, moften they felt very tired or exhausted some days. | Functioning and Disability<br>cost days, every day, or re | y (AFD) section, and felt very stused or don't know how |
| Question Text                | Thinking about the last time you tiredness? Would you say a little  |   |   |
| Answer Codes                 | A little     A lot     Somewhere in between a little     Refused     Don't know   | and a lot   |   |
| Question Type                | Pick One - answer list pane   |   |   |
| Field Pane Description Level |   |   |   |
| Fill Instructions            |   |   |   |
| Special Instructions         |   |   |   |
| Skip Instructions            | <1-3,R,D> goto next section   |   |   |
| Hard Edits                   |   |   |   |
| Soft Edits                   |   |   |   |
| AssocHelp                    |   |   |   |

## 2015 Q1 NHIS Instrument Spec Report

Section name: **Adult Internet and Email Usage** 44 Module Section Name **Adult Internet and Email Usage Part** AWB.010 00.000 Question ID Variable Name **AWEBUSE** HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) Universe Sample adults 18+ Universe-text The next questions are about your Internet and email use. Question Text Do you use the Internet? **Answer Codes** 1. Yes 2. No Refused Don't know Question Type Yes/No Field Pane Description Internet Fill Instructions **Special Instructions** <1> [goto AWEBOFNO] Skip Instructions <2,R,D> [goto AWEBEML] Hard Edits Soft Edits **AssocHelp** 

| Module               | 44  |
|----------------------|---|
| Section Name         | Adult Internet and Email Usage  |
| Part                 |   |
| Question ID          | AWB.020_01.000  |
| Variable Name        | AWEBOFNO  |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999')) and AWEBUSE(e)='1'                       |
| Universe-text        | Sample adults 18+ who use the Internet  |
| Question Text        | 1 of 2  |
|                      | How often do you use the Internet?  |
|                      | *Read if necessary: How many times per day, per week, per month, or per year do you use the Internet? |
|                      | *Enter number.  |
| Answer Codes         | Allow 1-995,R,D   |
| Question Type        | Integer   |
| Field Pane Descripti | on Often - Number   |
| Fill Instructions    |   |
| Special Instructions |   |
| Skip Instructions    | <1-995> [goto AWEBOFTP]<br><r,d> [goto AWEBORP]</r,d>   |
| Hard Edits           |   |
| Soft Edits           |   |
| AssocHelp            |   |

| Module                                     | 44  |  |
|--|---|--|
| Section Name                               | Adult Internet and Email Usage  |  |
| Part                                       |   |  |
| Question ID                                | AWB.020_02.000  |  |
| Variable Name                              | AWEBOFTP  |  |
| Universe                                   | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and ('001'<=AWEBOFNO(e)<='995')           |  |
| Universe-text                              | Sample adults 18+ who use the Internet and gave a valid value for the number portion of this question |  |
| Question Text                              | 2 of 2  |  |
|  | *Enter time period for how often Internet is used.  |  |
| Answer Codes                               | 1. Per day 2. Per week 3. Per month 4. Per year Refused Don't know                                    |  |
| Question Type                              | Pick One - answer list pane   |  |
| Field Pane Description Often - Time period |   |  |
| Fill Instructions                          |   |  |
| Special Instructions                       |   |  |
| Skip Instructions                          | <1-4,R,D> [goto AWEBORP]  |  |
| Hard Edits                                 |   |  |
| Soft Edits                                 |   |  |
| AssocHelp                                  |   |  |

| Module                 | 44   |
|------------------------|--|
| Section Name           | Adult Internet and Email Usage   |
| Part                   |  |
| Question ID            | AWB.025_00.000   |
| Variable Name          | AWEBORP  |
| Universe               | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and AWEBUSE(e)='1'   |
| Universe-text          | Sample adults 18+ who use the Internet   |
| Question Text          | Research companies invite people to become members of online research panels where they regularly respond to surveys online. Are you currently a member of an online research panel? |
| Answer Codes           | 1. Yes 2. No Refused Don't know  |
| Question Type          | Yes/No   |
| Field Pane Description | Online research panel  |
| Fill Instructions      |  |
| Special Instructions   |  |
| Skip Instructions      | <1,2,R,D> [goto AWEBEML]   |
| Hard Edits             |  |
| Soft Edits             |  |
| AssocHelp              |  |

| Module               | 44  |
|----------------------|---|
| Section Name         | Adult Internet and Email Usage                                  |
| Part                 |   |
| Question ID          | AWB.030_00.000  |
| Variable Name        | AWEBEML   |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999'))    |
| Universe-text        | Sample adults 18+   |
| Question Text        | Do you send or receive emails?                                  |
| Answer Codes         | 1. Yes 2. No Refused Don't know                                 |
| Question Type        | Yes/No  |
| Field Pane Descripti | on Email - Use  |
| Fill Instructions    |   |
| Special Instructions |   |
| Skip Instructions    | <1> [goto AWEBEMAD]<br><2,R,D> [goto Back or Recontact section] |
| Hard Edits           |   |
| Soft Edits           |   |
| AssocHelp            |   |

| Module               | 44  |
|----------------------|---|
| Section Name         | Adult Internet and Email Usage  |
| Part                 |   |
| Question ID          | AWB.040_00.000  |
| Variable Name        | AWEBEMAD  |
| Universe             | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997', '999')) and AWEBEML(e)='1'     |
| Universe-text        | Sample adults 18+ who send or receive email   |
| Question Text        | We may want to contact you to obtain additional health-related information.         |
|                      | May I have your email address?  |
|                      | *Enter email address.   |
|                      | *Enter 'N' for none.  |
| Answer Codes         | <allow 75,n,r,d=""></allow>   |
| Question Type        | Verbatim  |
| Field Pane Descripti | Email - Address   |
| Fill Instructions    |   |
| Special Instructions |   |
| Skip Instructions    | <address> [goto AWBEMNO] <n,r,d> [goto Back or Recontact section]</n,r,d></address> |
| Hard Edits           |   |
| Soft Edits           |   |
| AssocHelp            |   |

| Module                 | 44  |
|------------------------|---|
| Section Name           | Adult Internet and Email Usage  |
| Part                   |   |
| Question ID            | AWB.050_01.000  |
| Variable Name          | AWEBMNO   |
| Universe               | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and AWEBEMAD(e) not IN('N','7','9')                               |
| Universe-text          | Sample adults 18+ who gave an email address   |
| Question Text          | 1 of 2  |
|                        | How often do you check this email account?  |
|                        | *Read if necessary: How many times per day, per week, per month, or per year do you check this email account?  *Enter number. |
| Answer Codes           |   |
| Answer Codes           | Allow 1-995,R,D   |
| Question Type          | Integer   |
| Field Pane Description | on Email - Number   |
| Fill Instructions      |   |
| Special Instructions   |   |
| Skip Instructions      | <1-995> [goto AWBEMTP]<br><r,d> [goto Back or Recontact section]</r,d>  |
| Hard Edits             |   |
| Soft Edits             |   |
| AssocHelp              |   |

| Module                                     | 44   |  |
|--|--|--|
| Section Name                               | Adult Internet and Email Usage   |  |
| Part                                       |  |  |
| Question ID                                | AWB.050_02.000   |  |
| Variable Name                              | AWEBMTP  |  |
| Universe                                   | HHSTAT4='S' and (AGE GE '018' and AGE not IN ('997','999')) and ('001'<=AWBEMNO(e)<='995')                 |  |
| Universe-text                              | Sample adults 18+ who gave an email address and gave a valid value for the number portion of this question |  |
| Question Text                              | 2 of 2   |  |
|  | *Enter time period for how often email is checked.   |  |
| Answer Codes                               | 1. Per day 2. Per week 3. Per month 4. Per year Refused Don't know   |  |
| Question Type                              | Pick One - answer list pane  |  |
| Field Pane Description Email - Time Period |  |  |
| Fill Instructions                          |  |  |
| Special Instructions                       |  |  |
| Skip Instructions                          | <1-4,R,D> [goto Back or Recontact section]   |  |
| Hard Edits                                 |  |  |
| Soft Edits                                 |  |  |
| AssocHelp                                  |  |  |