IU1

Design Screen Type:	Yes/No	
Fields:	**Field 1:**	**IUPROBE**
Enable Functions:	**HELP**	No
	COMMENTS	Yes
	JUMPBACK	Yes
Roster Name:		
Roster Type:		
Roster Functions:	**Add Item**	No
	Edit Item	No
	Delete Item	No
	Search Item	No
Grid Functions:	**Add Line**	No
	Delete Line	No

DISPLAY INSTRUCTIONS:

Context header display:

Question display: If SP is Institutionalized, display "Other than the current institutional stay that started on (DATE OF INSTITUTIONALIZATION), between (REFERENCE DATE) and (DATE OF INSTITUTIONALIZATION) was (SP)"
Else if SP is Deceased, display "Between (REFERENCE DATE) and (DATE OF DEATH), was (SP)".
Else display "Since (REFERENCE DATE), [have you/has (SP)] been"

If SP is Institutionalized, display "another".
Else display "a".

Multi Field display:

Roster/Grid Instructions:

Roster/Grid display:

Report display:

TEXT:

Context Header:	REFERENCE DATE: (REFERENCE DATE)
Int. Instr I:	SHOW CARD IU
Question Text:	[Since (REFERENCE DATE), [have you/has (SP)] been/Between

(REFERENCE DATE) and (DATE OF DEATH), was (SP)/Other than the current institutional stay that started on (DATE OF INSTITUTIONALIZATION), between (REFERENCE DATE) and (DATE OF INSTITUTIONALIZATION) was (SP)] a patient in (a/another) nursing home or any similar place that provides long-term care -- such as the places shown on this card?

Int. Instr II: LONG-TERM CARE PLACES INCLUDE SKILLED NURSING HOMES, INTERMEDIATE CARE FACILITIES, BOARD AND CARE HOMES, NURSING HOME UNITS IN HOSPITALS, FACILITIES FOR THE MENTALLY RETARDED, PSYCHIATRIC FACILITIES AND GROUP HOMES.

INPUT FIELDS / ROUTING

Field1:	**IUPROBE**	(IUQ1020)

Cheshire Name: HRND.IUPROBE

Item Text display: Do not display option 3/IndicatedYesByDataprep.

Item Text:

Label:
Label Position:

Field Type:	Enumerated	**FieldSize:**	
Type Name:	TProbe	**Min Value:**	
Answers Allowed:	1	**Max Value:**	
Drop Down List:	No	**Mask:**	
Lookup File:	No		
Lookup File Name:			

Number	Label	Route
1	Yes	IU2 - PROVIDER_IU (IUQ1030)
	English text: YES	
2	No	BOX IU3 - (IUQ1155)
	English text: NO	
3	IndicatedYesByDataPrep	DO NOT DISPLAY. DATA EDITING ONLY.
	English text: INDICATED YES BY DATAPREP	

Attribute	Route
Don't know	BOX IU3 - (IUQ1155)
Refusal	BOX IU3 - (IUQ1155)

BACKGROUND VARIABLE ASSIGNMENTS

SOFT EDIT CHECKS

HARD EDIT CHECKS

TECHNICAL NOTES

40	SPInstitute	SP is institutionalized = MRES.SPALIVE=2/AliveAndInstitute on MRES where MRES.MRESRND = current round.

DESIGN NOTES

IU2

Page Order # : 30

Design Screen Type: Roster

Fields: **Field 1:** **PROVIDER_IU**

Enable Functions: **HELP** No
COMMENTS Yes
JUMPBACK Yes

Roster Name: Provider Roster

Roster Type: Single Item Select

Roster Functions: **Add Item** Yes Display as ' Add a Facility '
Edit Item Yes Display as ' Edit a Facility '
Delete Item No
Search Item No

Grid Functions: **Add Line** No
Delete Line No

DISPLAY INSTRUCTIONS:

Context header display:

Question display:

Multi Field display:

Roster/Grid Instructions: Display all Providers except for Providers where PROV.PROVNUM=01 and 02, which are reserved for PM and OM events.

Display in alphabetical order by PROV.PROVNAME.

Roster/Grid display:

COL #	HEADER	INSTRUCTIONS
1	Provider Name	Display PROV.PROVNAME.
2	Billing/Group Practice Name	Display PROV.PROVNAME.

Report display:

TEXT:

Context Header: REFERENCE PERIOD: (REFERENCE DATE) - (TODAY/DATE OF DEATH/DATE OF INSTITUTIONALIZATION)

Int. Instr I:

Question Text: Where [were you/was (SP)] a patient -- in which nursing home?

Int. Instr II:	SELECT OR ADD ONLY ONE FACILITY.	

INPUT FIELDS / ROUTING

Field1:	**PROVIDER_IU**	(IUQ1030)

Cheshire Name:	TEMP

Item Text display:

Item Text:

Label:
Label Position:

Field Type:	String	**FieldSize:**	4
Type Name:	TProvPick4	**Min Value:**	
Answers Allowed:	1	**Max Value:**	
Drop Down List:	No	**Mask:**	
Lookup File:	No		
Lookup File Name:			

Number	Label	Route
1	[Continuous answer.]	BOX IU1 - (IUQ1040)

BACKGROUND VARIABLE ASSIGNMENTS

PROVIDER INSTRUCTIONS:

Roster details will be collected on PROV:
PROV key = PROV.PROVBASE + PROV.PROVNUM
PROV.PROVNUM = Number of Provider selected at IU2.

If Provider added at Provider Roster, see PROVIDER ROSTER POP-UP specifications for
pop-up window programming instructions.

Variables populated in Provider Roster Pop-Up Window:

PROV.PROVNUM   Provider number
PROV.PROVRNDC   Round number
PROV.PROVNAME   Hospital name (Also known as Provider name)

If Provider added, set provider fields as instructed below.

EVENT INSTRUCTIONS:

Current round IU visits are stored on EVNT.   An EVNT is generated once the Provider is
selected at IU2:
EVNT key = EVNT.EVNTBASE + EVNT.EVNTNUM
EVNT.EVNTNUM = number of event generated at IU2.

BASE.LASTEVNT holds the highest EVNT.EVNTNUM prior to fielding cases. Not all
EVNT records are fielded. The first time an EVNT record is generated in the field,
BASE.LASTEVNT should be >= to the highest EVNT.EVNTNUM fielded. The new

EVNT.EVNTNUM should be calculated based on BASE.LASTEVNT + 001. Each time an EVNT record is generated in the field, BASE.LASTEVNT will be updated to match the highest EVNT.EVNTNUM in the field. Therefore, each time an EVNT record is generated in the field, the new EVNT.EVNTNUM should be calculated based on BASE.LASTEVNT + 001. See detailed instructions below.

Set Event Provider as the Provider selected at IU2. Set additional EVNT variables as instructed below.

LASTEVNT	Once new EVNT record is generated, set BASE.LASTEVNT = new EVNT.EVNTNUM.
EVNTNUM	Set new EVNT.EVNTNUM = BASE.LASTEVNT + 001. This assumes that BASE.LASTEVNT is incremented each time an EVNT record is generated in the field.
EVNTRNDC	EVNT.EVNTRNDC = current round.
EVNTTYPE	EVNT.EVNTTYPE = 'IU'.
STEVTYPE	EVNT.STEVTYPE = 7/IU.
EVNTPROV	EVNT.EVNTPROV = PROV.PROVNUM of provider selected at IU2.
PROVTYPE	If Provider added, set PROV.PROVTYPE=5/Institution.
PRVROSTR	If Provider added, set PROV.PRVROSTR = 5/IUProvider.

SOFT EDIT CHECKS

HARD EDIT CHECKS

TECHNICAL NOTES

DESIGN NOTES

Begin Loop 1: Probe for one provider (facility), collect event date for this provider.

BOX IU1

Page Order # :   40

BOX INSTRUCTIONS

(IUQ1040)   IF (SP REPORTED RECEIVING HEALTH CARE SERVICES THROUGH V.A.
IN THE CURRENT ROUND OR ANY PREVIOUS ROUND) AND (IF THIS
PROVIDER IS ASSOCIATED WITH V.A. IS UNKNOWN), GO TO IU3 -
VAPLACE (IUQ1050).

ELSE TO IU4 - EVBEGMM (IUQ1070).

ASSIGNMENTS

TECHNICAL NOTES

423	SPReceivedCaretThruVA	SP reported receiving health care services through V.A.in the current or any previous round = There is an HRND where HRND.HRNDRND = current round and HRND.VACOVER = 1/Yes. HRND.VACOVER is set at BOX HI20 or collected at HI36.
127	ProviderVAUnknown	If Provider is associated with V.A. is unknown = PROV.VAPLACE = empty.

DESIGN NOTES

IU3

Design Screen Type: Yes/No

Fields:	**Field 1:**	**VAPLACE**

Enable Functions:	**HELP**	No
	COMMENTS	Yes
	JUMPBACK	Yes

Roster Name:

Roster Type:

Roster Functions:	**Add Item**	No
	Edit Item	No
	Delete Item	No
	Search Item	No
Grid Functions:	**Add Line**	No
	Delete Line	No

DISPLAY INSTRUCTIONS:

Context header display:	Display name of facility, (PROVIDER NAME), currently being asked about.
Question display:	Display name of facility, (PROVIDER NAME), currently being asked about.
Multi Field display:	
Roster/Grid Instructions:	
Roster/Grid display:	
Report display:	

TEXT:

Context Header:	FACILITY NAME: (FACILITY NAME)
Int. Instr I:	
Question Text:	Is (FACILITY NAME) a Department of Veterans Affairs, or V.A., facility?
Int. Instr II:	

INPUT FIELDS / ROUTING

Field1:   **VAPLACE**   (IUQ1050)

Cheshire Name: PROV.VAPLACE

Item Text display:

Item Text:

Label:
Label Position:

Field Type:	Enumerated	**FieldSize:**	
Type Name:	TYesNoDKRF	**Min Value:**	
Answers Allowed:	1	**Max Value:**	
Drop Down List:	No	**Mask:**	
Lookup File:	No		
Lookup File Name:			

Number	Label	Route
1	Yes	IU4 - EVBEGMM (IUQ1070)
	English text: YES	
2	No	IU4 - EVBEGMM (IUQ1070)
	English text: NO	

Attribute	Route
Don't know	IU4 - EVBEGMM (IUQ1070)
Refusal	IU4 - EVBEGMM (IUQ1070)

BACKGROUND VARIABLE ASSIGNMENTS

SOFT EDIT CHECKS

HARD EDIT CHECKS

TECHNICAL NOTES

DESIGN NOTES

IU4

Page Order # :   70

Design Screen Type: Date

Fields:	**Field 1:**	**EVBEGMM**
	Field 2:	**EVBEGDD**
	Field 3:	**EVBEGYY**
	Field 4:	**EVENDMM**
	Field 5:	**EVENDDD**
	Field 6:	**EVENDYY**

Enable Functions:	**HELP**	No
	COMMENTS	Yes
	JUMPBACK	Yes

Roster Name:

Roster Type:

Roster Functions:	**Add Item**	No
	Edit Item	No
	Delete Item	No
	Search Item	No
Grid Functions:	**Add Line**	No
	Delete Line	No

DISPLAY INSTRUCTIONS:

Context header display:	Display name of facility, (PROVIDER NAME), currently being asked about.
Question display:	Display name of facility, (PROVIDER NAME), currently being asked about.
Multi Field display:	Vertical Alignment
	Display Admission date input fields, EVBEGMM, EVBEGDD, EVBEGYY, on 1st line.
	Display Discharge date input fields, EVENDMM, EVENDDD, EVENDYY, on 2nd line.

Roster/Grid Instructions:

Roster/Grid display:

Report display:

TEXT: _

Context Header:	REFERENCE PERIOD: (REFERENCE DATE) - (TODAY/DATE OF DEATH/DATE OF INSTITUTIONALIZATION) FACILITY NAME: (FACILITY NAME)
Int. Instr I:	
Question Text:	When [were you/was (SP)] admitted to and discharged from (FACILITY NAME)?
Int. Instr II:	

INPUT FIELDS / ROUTING

Field1:	**EVBEGMM**	(IUQ1070)
Cheshire Name:	EVNT.EVBEGMM	
Item Text display:		
Item Text:	ADMISSION DATE:	
Label:	MM	
Label Position:	Under	

Field Type:	Integer	**FieldSize:**	2	
Type Name:	TMonthInt	**Min Value:**	01	
Answers Allowed:	1	**Max Value:**	12	
Drop Down List:	No	**Mask:**		
Lookup File:	No			
Lookup File Name:				

Number	Label	Route
1	[Continuous answer.]	IU4 - EVBEGDD (IUQ1072)

Attribute	Route
Don't know	IU4 - EVBEGDD (IUQ1072)
Refusal	IU4 - EVBEGDD (IUQ1072)

Field2:   **EVBEGDD**   (IUQ1072)

Cheshire Name: EVNT.EVBEGDD

Item Text display:

Item Text:

Label: DD
Label Position: Under

Field Type:	Integer	**FieldSize:**	2
Type Name:	TDayDKRF	**Min Value:**	1
Answers Allowed:	1	**Max Value:**	31
Drop Down List:	No	**Mask:**	
Lookup File:	No		
Lookup File Name:			

Number	Label	Route
1	[Continuous answer.]	IU4 - EVBEGYY (IUQ1074)

Attribute	Route
Don't know	IU4 - EVBEGYY (IUQ1074)
Refusal	IU4 - EVBEGYY (IUQ1074)

Field3:   **EVBEGYY**   (IUQ1074)

Cheshire Name: EVNT.EVBEGYY

Item Text display:

Item Text:

Label: YY
Label Position: Under

Field Type:	Integer	**FieldSize:**	2
Type Name:	TYear2DKRF	**Min Value:**	00
Answers Allowed:	1	**Max Value:**	99
Drop Down List:	No	**Mask:**	
Lookup File:	No		
Lookup File Name:			

Number	Label	Route
1	[Continuous answer.]	IU4 - EVENDMM (IUQ1080)

Attribute	Route
Don't know	IU4 - EVENDMM (IUQ1080)
Refusal	IU4 - EVENDMM (IUQ1080)

Field4:   **EVENDMM**   (IUQ1080)

Cheshire Name: EVNT.EVENDMM

Item Text display:

Item Text: DISCHARGE DATE:

Label: MM
Label Position: Under

Field Type:	Integer	**FieldSize:**	2
Type Name:	TMonthInt	**Min Value:**	01
Answers Allowed:	1	**Max Value:**	12
Drop Down List:	No	**Mask:**	
Lookup File:	No		
Lookup File Name:			

Number	Label	Route
1	[Continuous answer.]	IU4 - EVENDDD (IUQ1100)

Attribute	Route
Don't know	IU4 - EVENDDD (IUQ1100)
Refusal	IU4 - EVENDDD (IUQ1100)

Field5:	**EVENDDD**	(IUQ1100)	

Cheshire Name: EVNT.EVENDDD

Item Text display:
Item Text:

Label: DD
Label Position: Under

Field Type:	Integer	**FieldSize:**	2
Type Name:	TDayDKRF	**Min Value:**	1
Answers Allowed:	1	**Max Value:**	31
Drop Down List:	No	**Mask:**	
Lookup File:	No		
Lookup File Name:			

Number	Label	Route
1	[Continuous answer.]	IU4 - EVENDYY (IUQ1120)

Attribute	Route
Don't know	IU4 - EVENDYY (IUQ1120)
Refusal	IU4 - EVENDYY (IUQ1120)

Field6:   **EVENDYY**   (IUQ1120)

Cheshire Name:	EVNT.EVENDYY

Item Text display:

Item Text:

Label:	YY
Label Position:	Under

Field Type:	Integer	**FieldSize:**	2
Type Name:	TYear2DKRF	**Min Value:**	00
Answers Allowed:	1	**Max Value:**	99
Drop Down List:	No	**Mask:**	
Lookup File:	No		
Lookup File Name:			

Number	Label	Route
1	[Continuous answer.]	IU7 - IUMORE (IUQ1150)

Attribute	Route
Don't know	IU7 - IUMORE (IUQ1150)
Refusal	IU7 - IUMORE (IUQ1150)

BACKGROUND VARIABLE ASSIGNMENTS

SOFT EDIT CHECKS

Edit #1
If dates entered at IU4 do not have missing data, EVBEGMM,
EVBEGDD, EVBEGYY, EVENDMM, EVENDDD, EVENDYY ^= DK
and EVBEGMM, EVBEGDD, EVBEGYY, EVENDMM, EVENDDD,
EVENDYY ^= RF, then Admission date,
EVBEGMM/EVBEGDD/EVBEGYY, and Discharge date,
EVENDMM/EVENDDD/EVENDYY, should not match.
If not true, display message "VERIFY THAT SP WAS ADMITTED
AND DISCHARGED ON THE SAME DATE."

Edit #2
If SPALIVE=2/AliveAndInstitute and date of institutionalization
colllected at INS2 does not have any missing data, SPINSTMM,
SPINSTDD, SPINSTYY ^= DK and SPINSTMM, SPINSTDD,
SPINSTYY ^= RF, then discharge date,
EVENDMM/EVENDDD/EVENDYY, should not match date of
institutionalization collected at INS2,
SPINSTMM/SPINSTDD/SPINSTYY.
If not true, display message "VERIFY THAT SP WAS DISCHARGED
FROM THIS FACILITY ON THE SAME DATE AS THE CURRENT
INSTITUTIONALIZATION DATE.".

HARD EDIT CHECKS

Edit #1:
Admission date, EVBEGMM/EVBEGDD/EVBEGYY, must be on or
between (REFERENCE DATE) and (TODAY/DATE OF
DEATH/DATE OF INSTITUTIONALIZATION).
If not true, display message "INVALID DATE. ADMISSION DATE
MUST BE ON OR BETWEEN (REFERENCE DATE) AND
(TODAY/DATE OF DEATH/DATE OF INSTITUTIONALIZATION)".
INVOLVES EVBEGMM, EVBEGDD, EVBEGYY.

Edit #2:
Discharge date, EVENDMM/EVENDDD/EVENDYY, must be on or
between (ADMISSION DATE) and (TODAY/DATE OF DEATH/DATE
OF INSTITUTIONALIZATION).
If not true, display message "INVALID DATE. DISCHARGE DATE
MUST BE ON OR BETWEEN (ADMISSION DATE) AND
(TODAY/DATE OF DEATH/DATE OF INSTITUTIONALIZATION)".
INVOLVES EVENDMM, EVENDDD, EVENDYY.

Edit #3
If SPALIVE=2/AliveAndInstitute and date of institutionalization
colllected at INS2 does not have any missing data, SPINSTMM,
SPINSTDD, SPINSTYY ^= DK and SPINSTMM, SPINSTDD,
SPINSTYY ^= RF, then admission date,
EVBEGMM/EVBEGDD/EVBEGYY, cannot match date of
institutionalization collected at INS2,
SPINSTMM/SPINSTDD/SPINSTYY.
If not true, display message "INVALID DATE. THIS DATE
MATCHES THE CURRENT INSTITUTIONALIZATION DATE".

Edit #4:

TECHNICAL NOTES

DESIGN NOTES

IU7

Page Order # : 100

Design Screen Type: Yes/No

Fields: | **Field 1:** | **IUMORE**

Enable Functions: | **HELP** | No
| **COMMENTS** | Yes
| **JUMPBACK** | Yes

Roster Name:

Roster Type:

Roster Functions: | **Add Item** | No
| **Edit Item** | No
| **Delete Item** | No
| **Search Item** | No

Grid Functions: | **Add Line** | No
| **Delete Line** | No

DISPLAY INSTRUCTIONS:

Context header display:

Question display: If SP is deceased or institutionalized, display "did (SP) have".
Else if proxy interview, display "has (SP) had".
Else display "have you had".

Multi Field display:

Roster/Grid Instructions:

Roster/Grid display:

Report display:

TEXT:

Context Header: REFERENCE DATE: (REFERENCE DATE)

Int. Instr I: IF RESPONDENT HAS ALREADY MENTIONED ANOTHER STAY AT A NURSING HOME, ENTER "YES" WITHOUT ASKING. OTHERWISE, ASK:

Question Text: [Since (REFERENCE DATE)/Between (REFERENCE DATE) and (DATE OF DEATH/DATE OF INSTITUTIONALIZATION)], [have you had/has (SP) had/did (SP) have] any other stays in this or any other nursing home or similar place that provides long-term care?

Int. Instr II:

INPUT FIELDS / ROUTING

Field1:	**IUMORE**	(IUQ1150)

Cheshire Name:

Item Text display:
Item Text:

Label:
Label Position:

Field Type:	Enumerated	**FieldSize:**	
Type Name:	TYesNoDKRF	**Min Value:**	
Answers Allowed:	1	**Max Value:**	
Drop Down List:	No	**Mask:**	
Lookup File:	No		
Lookup File Name:			

Number	Label	Route
1	Yes	IU2 - PROVIDER_IU (IUQ1030)
	English text: YES	
2	No	BOX IU3 - (IUQ1155)
	English text: NO	

Attribute	Route
Don't know	BOX IU3 - (IUQ1155)
Refusal	BOX IU3 - (IUQ1155)

BACKGROUND VARIABLE ASSIGNMENTS

SOFT EDIT CHECKS

HARD EDIT CHECKS

TECHNICAL NOTES

4	Respondent	On MRES where MRES.MRESRND = current round:
		A Proxy interview (respondent is a proxy) = MRES.SPPROXY=2/Proxy. MRES.RROSTNUM=ROST.ROSTNUM of respondent.
		An SP interview (respondent is the SP) = MRES.SPPROXY=1/SP.

MRES.RROSTNUM='01'.

DESIGN NOTES

BOX IU3

BOX INSTRUCTIONS

(IUQ1155)   GO TO NEXT SECTION .

ASSIGNMENTS

TECHNICAL NOTES

DESIGN NOTES