Prescribed Medicine Summary (PN	•			
Variable Name	MR Screen Name	Question type	Question text/description	Code list
	BOX PMS1	routing	IF SP REPORTED PRESCRIPTION MEDICINE PURCHASES IN THE PREVIOUS ROUND, GO TO PMSINTRA -	
			PMSINTA.	
			ELSE GO TO BOX PMS12.	
PMSINTA	PMSINTRA	no entry	During the last interview, we recorded the names of medicines that [you/(SP)] had obtained between	
			(SUMMARY REFERENCE DATE) and (REFERENCE DATE).	
			You may want to refer to the medicine names to help you recall any medicines that [you/(SP)] may have	
			obtained since that time, including any refills of these medicines.	
			PRESS F12 AND SHOW THE PRESCRIPTION MEDICINE SUMMARY TO THE RESPONDENT ON YOUR SCREEN	
			THE STITE WAS SHOWN THE TRESONN HOW WESTERN SOMETHING TO THE REST ON SERVEN	
PMSUPDATE	PMSINTRB	code one	REFER TO SUMMARY PAGE FOR PRESCRIBED MEDICINES TO REVIEW PREVIOUS ROUND UTILIZATION.	(01) NO CHANGES APPEAR TO BE NECESSARY
TWISOT DATE	TWISHVIND	code one	CODE WITHOUT ASKING:	(02) NEED TO ADD A MEDICINE NAME
			CODE WITHOUT ASKING.	(03) NEED TO ADD A MEDICINE NAME
				'
NACDICINE DNACADD	DNACO	unata u	NAME to the group of the good is no that goods to be added?	(04) NEED TO DROP A MEDICINE
MEDICINE_PMSADD	PMS2	roster	What is the name of the medicine that needs to be added?	(01) continuous answer
			ADD ALL MEDICINES AT THIS ROSTER.	
			CHECK STATEMENT OR MEDICINE BOTTLE FOR SPELLING.	
MEDICINE_PMSEDIT	PMS3	roster	EDIT ALL MEDICINES AT THIS ROSTER.	(01) continuous answer
			What is the name of the medicine that needs to be edited?	
MEDICINE_PMSDELETE	PMS4	roster	What is the name of the medicine that needs to be deleted?	(01) continuous answer
			SELECT ALL MEDICINES FOR DELETION AT THIS ROSTER.	
GETNUM	PMS6A	grid	IF ALL MEDICINES ARE NOT LISTED, USE "PREVIOUS PAGE" AND ADD THE MEDICINE TO THE ROSTER. REFER	(01) continuous answer
			TO STATEMENTS OR RECEIPTS, IF AVAILABLE.	(-8) Don't Know
			How many times between (SUMMARY REFERENCE DATE) and (REFERENCE DATE) did [you/(SP)] obtain	(-9) Refused
			(READ MEDICINE NAME(S) BELOW)?	
			[COUNT A MEDICINE AS OBTAINED REGARDLESS OF WHO OBTAINED IT FOR THE RESPONDENT, WHEN IT	
			WAS OBTAINED, WHETHER OR NOT THE PRESCRIPTION COST ANYTHING, AND WHETHER OR NOT THE	
			RESPONDENT ACTUALLY TOOK THE MEDICINE.]	
	BOX PMS3	routing	IF AT LEAST ONE PRESCRIPTION MEDICINE DISPLAYED AT PMS6A HAS NUMBER OF PURCHASES > 0 OR	
	BexTiviss	Touching .	EQUAL TO DK OR RF IN THE PREVIOUS ROUND, GO TO PMS6A_IN - NAVIGATOR.	
			ELSE GO TO PMSINTRB - PMSUPDATE.	
NAVIGATOR	PMS6A IN	instance navigator	ELSE GO TO TWISHVIND - TWISOT BATE.	(01) ITEM SELECTED IN INSTANCE NAVIGATOR
NAVIGATOR	FWISOA_IN	instance navigator		(02) CONTINUE INTERVIEW SELECTED
	BOX PMS4	routing	IF SDIJSED V A FACILITIES IN THE DREVIOUS BOUND CO TO DIASSA1. DIASATVA	(02) CONTINUE INTERVIEW SELECTED
	BOX PIVIS4	routing	IF SP USED V.A. FACILITIES IN THE PREVIOUS ROUND, GO TO PMS6A1 - PMSATVA.	
DA 4C A TV/A	DNACCAA		ELSE GO TO BOX PMS6.	(04) VEC
PMSATVA	PMS6A1	yes/no	Did [you/(SP)] obtain (this purchase/any of these purchases) of (MEDICINE NAME) through the Department	(01) YES
			of Veterans Affairs or V.A.?	(02) NO
				(-8) Don't Know
				(-9) Refused
	BOX PMS6	routing	IF SP COVERED BY A MEDICARE MANAGED CARE PLAN OR PRIVATE MANAGED CARE PLAN ANYTIME	
			DURING THE PREVIOUS ROUND, GO TO PMS6B - PMSATHMO.	
			ELSE GO TO PMSINTB1 - PMSINTB.	
PMSATHMO	PMS6B	yes/no	Did [you/(SP)] obtain (this purchase/any of these purchases) of (MEDICINE NAME) at [READ MANAGED CARE	[(01) YES
			PLAN NAME(S) BELOW] or through a service or discount offered through [READ MANAGED CARE PLAN	(02) NO
			NAME(S) BELOW]?	(-8) Don't Know
				(-9) Refused
			[PROBE: This could include obtaining the purchases at a plan pharmacy; at a pharmacy that honors	
			[your/(SP's)] plan card; or through a mail order service that the managed care plan referred [you/(SP)] to.]	
PMSINTB	PMSINTB1	no entry	[ASK R TO GET BOTTLES AND/OR STATEMENTS IF YOU HAVE NOT ALREADY DONE SO.]	
		,	Now I need to ask you a few questions about the (MEDICINE NAME).	
	BOX PMS8	routing	GO TO PMS8 - PMBOTTLE.	
<u>, </u>	DOV LIAI20	pouting	100 TO THIDO TIEL.	

Prescribed Medicine Summary (P Variable Name	MR Screen Name	Question type	Question text/description	Code list
PMBOTTLE	PMS8	yes/no	CODE "YES" WITHOUT ASKING IF STATEMENT, RECEIPT, BOTTLE OR BAG IS PRESENT.	(01) YES
		,,	Do you have the medicine bottle, container, or bag available?	(02) NO
			IF R DOES NOT HAVE BOTTLE, PROBE TO DETERMINE IF R CAN ANSWER QUESTIONS ABOUT THE FORM,	(03) NO BUT R CAN ANSWER QUESTIONS
			STRENGTH, AND QUANTITY OF THE MEDICINE.	(-8) Don't Know
			STRENGTH, THE GETTIE MEDICINE.	(-9) Refused
PMSINTC	PMSINTRC	no entry	COMPLETE PMS9 PMS16 USING INFORMATION FROM STATEMENT, RECEIPT, MEDICINE BOTTLE OR	(5) Nerusea
	i wantike	no chary	CONTAINER. IF THERE IS MORE THAN ONE FOR THE SAME MEDICINE, USE THE MOST RECENT CONTAINER.	
			CONTAINER. IT THERE IS MORE THAN ONE FOR THE SAME MEDICINE, OSE THE MOST RECEIVE CONTAINER.	
PMFORM	PMS9	code one	IN WHAT FORM WAS THE MEDICINE?	(01) PILLS (TABLETS, CAPSULES)
				(02) LIQUID (TO BE TAKEN ORALLY)
			[IF THE CONTAINER INDICATES "PADS", SELECT THE CATEGORY FOR "PATCHES'.]	(03) DROPS (EYE/EAR/NOSE)
			[II THE CONTAINER INDICATES TADS , SEEECT THE CATEGORY FOR TATCHES.]	(04) OINTMENT, CREAM, LOTION (TOPICAL OR
				INTERNAL)
				(05) SUPPOSITORIES
				(06) AEROSOL/SPRAY, INHALANT, SOLUTIONS,
				DISKUS
				(07) SHAMPOO, SOAP
				(08) INJECTION
				(09) IV INJECTION
				(10) PATCHES
				(11) GEL OR JELLY (TOPICAL OR INTERNAL)
				(12) POWDER, GRANULES
				(91) OTHER
				(-8) Don't Know
PMFORMOS	PMS9	verbatim text	OTHER (SPECIFY)	(01) continuous answer
STRNUNIT	PMS10	code one	WHAT WAS THE STRENGTH OF [EACH PILL/EACH PATCH/EACH SUPPOSITORY/THE (MEDICINE FORM)]?	(01) MICROGRAMS (mcg, mc)
				(02) MILLIGRAMS (mg)
			IF COMPOUND MEDICINE: ENTER STRENGTH OF 1ST MEDICINE, THEN CHECK THE BOX BELOW.	(03) GRAINS (gr)
				(04) MILLIEQUIVALENTS (meq)
				(05) GRAMS (g, gm)
				(06) PERCENT (%)
				(07) INTERNATIONAL UNITS (IU)
				(08) UNITS (U)
				(91) OTHER
				(96) COMPOUND/MORE THAN ONE MEDICINE
				COMBINED
				(-8) Don't Know
STRNUNOS	PMS10	verbatim text	OTHER (SPECIFY)	(01) continuous answer
STRNNUM	PMS10	numeric		(01) continuous answer
				(-8) Don't Know
STRNPER	PMS10	verbatim text		(01) continuous answer
				(-8) Don't Know
STRNUNIT96	PMS10	verbatim text		(01) COMPOUND/MORE THAN ONE MEDICINE
				COMBINED
				(-7) Empty
	BOX PMS8A	routing	IF PMS10 - STRNUNIT96 = 1/Compound, GO TO PMS10B - STRNUNI2.	
		1 -	ELSE GO TO BOX PMS9.	1

Prescribed Medicine Summary Variable Name	MR Screen Name	Question type	Question text/description	Code list
STRNUNI2	PMS10B	code one	WHAT WAS THE STRENGTH OF THE 2ND MEDICINE IN THE COMPOUND?	(01) MICROGRAMS (mcg, mc)
STRINUINIZ	I WISTOD	code one	WHAT WAS THE STRENGTH OF THE ZND WEDICINE IN THE COMP COND.	(02) MILLIGRAMS (mg)
				(03) GRAINS (gr)
				(04) MILLIEQUIVALENTS (meg)
				(05) GRAMS (g, gm)
				(06) PERCENT (%)
				(07) INTERNATIONAL UNITS (IU)
				(08) UNITS (U)
				(91) OTHER
				(96) COMPOUND/MORE THAN ONE MEDICINE
				COMBINED
				(-8) Don't Know
STRNUNO2	PMS10B	verbatim text	OTHER (SPECIFY)	(01) continuous answer
STRNNUM2	PMS10B	numeric		(01) continuous answer
				(-8) Don't Know
STRNPER2	PMS10B	verbatim text		(01) continuous answer
				(-8) Don't Know
	BOX PMS9	routing	IF THE PRESCRIPTION MEDICINE FORM IS PILLS, SUPPOSITORIES OR PATCHES IN THE PREVIOUS ROUND, GO	
			TO PMS11 - TABNUM.	
			ELSE GO TO PMS16 - AMTUNIT.	
TABNUM	PMS11	numeric	HOW MANY (PILLS/SUPPOSITORIES/PATCHES) WERE IN THE CONTAINER WHEN IT WAS OBTAINED?	(01) continuous answer
				(-8) Don't Know
				(-9) Refused
	BOX PMS10	routing	IF PRESCRIPTION MEDICINE FORM IS PILLS OR SUPPOSITORIES IN THE PREVIOUS ROUND AND PMS11 -	
			TABNUM=DK, GO TO PMS12 - TABSADAY.	
			ELSE GO TO BOX PMS11.	
TABSADAY	PMS12	numeric	HOW MANY (PILLS/SUPPOSITORIES) WERE TO BE TAKEN IN A DAY?	(01) continuous answer
				(-7) Empty
				(-8) Don't Know
TABSADAY95	PMS12	code one		(01) LESS THAN WHOLE
7, 100, 100, 110, 100, 100, 100, 100, 10	1 11.512	code one		(02) TAKE AS NEEDED
				(-7) Empty
	BOX PMS10A	routing	IF PMS12 - TABSADAY = DK, GO TO BOX PMS11.	(// Linpty
	BOXTIVISTOA	Touting	ELSE IF PMS12 - TABSADAY95 = 2/TakeAsNeeded, GO TO PMS13 - TABTAKE.	
			ELSE GO TO PMS14 - TAKEUNIT.	
			LESE GO TO FINISTA - TAKEONIT.	
TABTAKE	PMS13	numeric	How many (pills/suppositories) did [you/(SP)] usually take in a day?	(01) continuous answer
INDIAIL	1, 141272	Hameric	Trow many (pina) suppositories) and tyou/(st)] askany take in a day:	(-8) Don't Know
				(-9) Refused
TABTAKE96	PMS13	code one		(01) DON'T TAKE EVERY DAY
TABTAKE90	PIVISTS	code one		
	BOX PMS10B	routing	IE DMS12 - TARTAKE06 - 1/DoptTakoEveryDay GO TO DOV DMS11	(-7) Empty
	ROY HAISTOR	routing	IF PMS13 - TABTAKE96 = 1/DontTakeEveryDay, GO TO BOX PMS11.	
TAKELIANE	DB 4C4 4	ands are	ELSE GO TO PMS14 - TAKEUNIT.	(01) DAVC
TAKEUNIT	PMS14	code one	HOW MANY DAYS OR WEEKS WAS THE MEDICINE TO BE TAKEN?	(01) DAYS
			DE THE BOTTLE CANCETO TAKE A CERTAIN BOOK OF THE ACCUSANCE AND ACCUSANCE	(02) WEEKS
			[IF THE BOTTLE SAYS TO TAKE A CERTAIN DOSE OF THE MEDICINE DAILY WITHOUT GIVING A TIME FRAME	(03) TAKE UNTIL GONE
			(E.G., "TAKE 2 PILLS DAILY"), SELECT "TAKE EVERY DAY".]	(04) TAKE AS NEEDED
				(05) TAKE EVERY DAY
				(-8) Don't Know
				(-9) Refused
TAKENUM	PMS14	numeric		(01) continuous answer

Variable Name	MR Screen Name	Question type	Question text/description	Code list
AMTUNIT	PMS16	code one	HOW MUCH MEDICINE WAS IN THE CONTAINER WHEN IT WAS OBTAINED?	(01) OUNCES (oz)
			[PLEASE ENTER THE AMOUNT IN THE CONTAINER, NOT THE STRENGTH OF THE MEDICINE.]	(02) GRAMS (g, gm)
				(03) MILLILITERS (ml, cc)
				(04) MILLIEQUIVALENTS (meq)
				(05) MILLIGRAMS (mg)
				(06) MICROGRAMS (mcg)
				(07) PUFFS, DOSES, BLISTERS
				(91) OTHER
				(-8) Don't Know
AMTUNOS	PMS16	verbatim text		(01) continuous answer
AMTNUM	PMS16	numeric		(01) continuous answer
				(-8) Don't Know
	BOX PMS11	routing	GO TO PMS6A_IN - NAVIGATOR.	
	BOX PMS12	routing	GO TO NEXT SECTION	