RXQ.033   In the **past 30 days**, {have you/has SP} used or taken medication for which a **prescription** is needed? Include only those products prescribed by a health professional such as a doctor or dentist. {Please remember to include any prescription birth control products that you are taking or using such as pills or patches.} Do not include prescription vitamins or minerals.

YES.. 1
NO.. 2 (RXQ.630)
REFUSED.. 7 (RXQ.630)
DON'T KNOW.. 9 (RXQ.630)

CAPI INSTRUCTION:
IF SP (FEMALE OR DMQ.510 = 7 OR 9) AND AGE 16-49 YEARS, DISPLAY 'Please remember to include prescription birth control products that you are taking or using such as pills or patches.'

CAPI HARD EDIT CHECK #1
IF 'NO' (CODE 2) IN RXQ.033 AND 'YES' (CODE 1) IN DIQ.050 OR DIQ.070, DISPLAY THE FOLLOWING MESSAGE:
Earlier in the interview you reported currently taking insulin or a diabetic pill. If this is correct, we should count that as prescription medication you have taken in the last 30 days.
{CAPI DISPLAYS THREE QUESTIONS FOR CORRECTION}
DIQ.050 = Taking Insulin
DIQ.070 = Taking Diabetic Pills
RXQ.033 = Prescription Medication in Last 30 Days

CAPI HARD EDIT CHECK #2
IF 'NO' (CODE 2) IN RXQ.033 AND 'YES' (CODE 1) IN BPQ.150, DISPLAY THE FOLLOWING MESSAGE:
Earlier in the interview you reported currently taking prescription medication for high blood pressure. If this is correct, we should count that as prescription medication you have taken in the last 30 days.
{CAPI DISPLAYS TWO QUESTIONS FOR CORRECTION}
BPQ.150 = Taking Blood Pressure Medication
RXQ.033 = Prescription Medication in Last 30 Days

CAPI HARD EDIT CHECK #3
IF 'NO' (CODE 2) IN RXQ.033 AND 'YES' (CODE 1) IN BPQ.101d, DISPLAY THE FOLLOWING MESSAGE:
Earlier in the interview you reported currently taking prescription medication for high cholesterol. If this is correct, we should count that as prescription medication you have taken in the last 30 days.
{CAPI DISPLAYS TWO QUESTIONS FOR CORRECTION}
BPQ.101d = Taking High Cholesterol Medicine
RXQ.033 = Prescription Medication in Last 30 Days

RXQ.050   How many **prescription medications {**have you/has SP} taken in the **past 30 days**?

Would you say {you have/SP has} taken…

1,...	1
2,...	2
3,...	3
4, or...	4
5 or more?...	5
REFUSED..	7
DON'T KNOW..	9

RXQ.630   **Since March 2020,** {have you/has SP} ever taken or received any medication that was prescribed or ordered by a doctor or other health care professional to treat or prevent COVID-19?

YES..	1	
NO..	2	(BOX 17A)
REFUSED...	7	(BOX 17A)
DON'T KNOW..	9	(BOX 17A)

HELP SCREEN:

Doctor: The term refers to both doctors of medicine (M.D.s) and doctors of osteopathic medicine (D.O.s). It includes general practitioners as well as specialists. It does not include persons who do not have an M.D. or D.O. degree, but other doctoral degrees such as dentists, oral surgeons, chiropractors, podiatrists, Christian Science healers, opticians, optometrists, psychologists, etc.

Health Care Professionals (Health Professional): A person entitled by training and experience and possibly licensure to assist a doctor and who works with one or more medical doctors. Examples include: doctor's assistants, nurse practitioners, nurses, pharmacists, lab technicians, and technicians who administer shots (e.g., allergy shots). Also include paramedics, medics and physical therapists working with or in a doctor's office. Do not include: dentists, oral surgeons, chiropractors, chiropodists, podiatrists, naturopaths, Christian Science healers, opticians, optometrists, and psychologists or social workers.

RXQ.640   Please look at card RXQ1. Which medications on this card {have you/has SP} taken or received to treat or prevent COVID-19? Please select one or more.

HAND CARD RXQ1

CODE ALL THAT APPLY

ORAL MEDICATION:

PAXLOVID (NIRMATRELVIR/RITONAVIR) 1
LEGAVRIO (MOLNUPIRAVIR) 2
STEROIDS (E.G., DEXAMETHASONE)...3
IMMUNOMODULATORS (E.G., OLUMIANT, XELJANZ, JAKAVI).......................4
OTHER ANTI-INFECTIVES (E.G., AZITHROMYCIN, IVERMECTIN, CHLOROQUINE,
    HYDROXYCHLOROQUINE, KALETRA) 5

IV- INFUSION/INJECTION:

VEKLURY (REMDESIVIR)...6
MONOCLONAL ANTIBODIES (E.G., BEBTELOVIMAB, EVUSHELD, SOTROVIMAB,
    BAMLANIVIMAB/ETESEVIMAB, REGEN-COV)..7
STEROIDS (E.G., DEXAMETHASONE, METHYLPREDNISOLONE)...................8
IMMUNOMODULATORS (E.G., ACTEMRA, KEVZARA)....................................9
COVID-19 CONVALESCENT PLASMA 10

OTHER MEDICATIONS..66

REFUSED...77
DON'T KNOW...99

+--+
| **BOX 17A** |
| |
| **CHECK ITEM RXQ.500:** |
| IF SP >= 40 YEARS OLD OR MCQ.160C, MCQ.160D, MCQ.160E OR |
| MCQ.160F = 1/YES, CONTINUE WITH RXQ.510. |
| OTHERWISE, GO TO END OF SECTION. |
+--+

RXQ.510   Doctors and other health care providers sometimes recommend that {you take/SP takes) a low-dose aspirin each day to prevent heart attacks, strokes, or cancer. {Have you/Has SP} ever been told to do this?

YES... 1
NO.. 2 (RXQ.520)
REFUSED.. 7 (RXQ.520)
DON'T KNOW.. 9 (RXQ.520)

INTERVIEWER INSTRUCTION:
IF THE RESPONDENT VOLUNTEERS THEY HAVE BEEN TOLD TO TAKE AN ASPIRIN EVERY OTHER DAY OR 'REGULARLY' FOR THESE REASONS, CODE "YES".

RXQ.515   {Are you/Is SP} now following this advice?

YES...	1	(END OF SECTION)
NO..	2	(END OF SECTION)
SOMETIMES....................................	3	(END OF SECTION)
STOPPED ASPIRIN USE DUE TO SIDE		
EFFECTS....................................	4	(END OF SECTION)
REFUSED.......................................	7	(END OF SECTION)
DON'T KNOW.................................	9	(END OF SECTION)

HELP SCREEN:
Side Effect: Is an unexpected health problem that is caused by a medicine. Some side effects of aspirin are stomach problems, easy bruising or bleeding, runny nose, wheezing and skin rashes.

RXQ.520   **On {your/SP's} own,** {are you/is SP} now taking a low-dose aspirin each day to prevent heart attacks, strokes, or cancer?

YES...	1
NO..	2
REFUSED.......................................	7
DON'T KNOW.................................	9

INTERVIEWER INSTRUCTION:
IF THE RESPONDENT VOLUNTEERS THEY ARE TAKING AN ASPIRIN EVERY OTHER DAY OR 'REGULARLY' FOR THESE REASONS, CODE "YES".

HELP SCREEN FOR RXQ.033:

Prescription Medication: Prescription medications are those ordered by a physician or other authorized medical professional through a written or verbal or electronic prescription for a pharmacist to fill. Prescription medications may also be given by a medical professional directly to a patient to take home, such as free samples.

Prescription medications do <u>not</u> include:

- Medication administered to the patient <u>during the event</u> in the office as part of the treatment (such as an antibiotic shot for an infection, a flu shot, or an oral medication) <u>unless</u> a separate bill for the medication is received;

- Diaphragms and IUD's (Intra-Uterine Devices); or

- Some state laws require prescriptions for over the counter medications. Sometimes physicians write prescriptions for over the counter medications, such as aspirin. Consider any medication a prescription medication if the respondent reports it as prescribed. If it is an over the counter medication, however, the prescription must be a written prescription to be filled by a pharmacist, not just a written or oral instruction. If in doubt, probe whether the patient got a <u>written</u> prescription to fill at a pharmacy.

Doctor: The term refers to both doctors of medicine (M.D.s) and doctors of osteopathic medicine (D.O.s). It includes general practitioners as well as specialists. It does not include persons who do not have an M.D. or D.O. degree, but other doctoral degrees such as dentists, oral surgeons, chiropractors, podiatrists, Christian Science healers, opticians, optometrists, psychologists, etc.

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Past 30 days: From yesterday, 30 days back.

RXQ1

Treatment Prescribed/Ordered to Treat or Prevent COVID-19:

Oral medication:

1) **Paxlovid** (Nirmatrelvir/Ritonavir tablets co-packaged, COVID-19 anti-viral)

2) **Legavrio** (Molnupiravir, COVID-19 anti-viral)

3) **Steroids** (e.g., Dexamethasone)

4) **Immunomodulators** (e.g., Olumiant [Baricitinib], Xeljanz [Tofacitinib], Jakavi [Ruxolitinib])

5) **Other Anti-Infectives** (e.g., Azithromycin, Chloroquine, Hydroxychloroquine, Ivermectin, Kaletra [Lopinavir/Ritonavir])

IV- Infusion/Injection:

6) **Veklury** (Remdesivir, COVID-19 anti-viral)

7) **Monoclonal Antibodies** (e.g., Bebtelovimab, Evusheld [Tixagevimab/Cilgavimab], Sotrovimab, Bamlanivimab/Etesevimab, REGEN-COV [Casirivimab/Imdevimab])

8) **Steroids** (e.g., Dexamethasone, Methylprednisolone)

9) **Immunomodulators** (e.g., Actemra [Tocilizumab], Kevzara [Sarilumab])

10) **COVID-19 Convalescent Plasma**

Other medications