**Question ID:** IDN.000_00.000

**Instrument Variable Name:**

**Final Documentation Name:** RECTYPE

**Record Type**

**Universe:**

**Description:**

**Sources:** None

**Recodes:** None

**Keywords:** None

**Notes:** None

**File type identifier**

- 10 Household
- 20 Person
- 25 Income Imputation
- 30 Sample Adult
- 40 Sample Child
- 60 Family
- 63 Disability Questions Tests 2008/2009
- 65 Paradata
- 70 Injury/Poisoning Episode
- 75 Injury/Poisoning Verbatim

**Question ID:** IDN.000_02.000

**Instrument Variable Name:**

**Final Documentation Name:** SRVY_YR

**Survey Year**

**Universe:**

**Description:**

**Sources:** None

**Recodes:** None

**Keywords:** None

**Notes:** None

Year of National Health Interview Survey

- Year
- Survey Year
### Household ID

**Question ID:** IDN.000_04.000  
**Instrument Variable Name:** HHX

<table>
<thead>
<tr>
<th>Description</th>
<th>Universe</th>
<th>Sources</th>
<th>Recodes</th>
<th>Keywords</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Household number</td>
<td>All households</td>
<td>None</td>
<td>None</td>
<td>Household number</td>
<td>Use this variable to identify individual households.</td>
</tr>
</tbody>
</table>

### Family Number

**Question ID:** IDN.000_35.000  
**RECODE**  
**Instrument Variable Name:** FMX

<table>
<thead>
<tr>
<th>Description</th>
<th>Universe</th>
<th>Sources</th>
<th>Recodes</th>
<th>Keywords</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Family number</td>
<td>All families</td>
<td>None</td>
<td>None</td>
<td>Family number</td>
<td>Use this variable in combination with HHX to identify individual families.</td>
</tr>
</tbody>
</table>

| Family # | 01-25 | Family number 1 - 25 |

### Person Number

**Question ID:** IDN.000_40.000  
**Instrument Variable Name:** FPX

<table>
<thead>
<tr>
<th>Description</th>
<th>Universe</th>
<th>Sources</th>
<th>Recodes</th>
<th>Keywords</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Person number</td>
<td>All persons</td>
<td>None</td>
<td>None</td>
<td>Person number</td>
<td>Use this variable in combination with HHX and FMX to identify individual persons or use this variable in combination with FCTRLNUM to identify individual persons.</td>
</tr>
</tbody>
</table>

<p>| Person Number (Within family) | 01-25 | Person number 1 thru 25 |</p>
<table>
<thead>
<tr>
<th>Question ID: IDN.000_55.000</th>
<th>Injury/Poisoning Episode Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Instrument Variable Name:</td>
<td>Universe: '01' &lt;= MTFINJ3M &lt;= '91' or '01' &lt;= MTFPOI3M &lt;= '91'</td>
</tr>
<tr>
<td>Final Documentation Name:</td>
<td>Description: All medically-consulted injury and poisoning episodes that occurred during the past 3 months</td>
</tr>
<tr>
<td>IPEPNO</td>
<td>Sources: None</td>
</tr>
<tr>
<td></td>
<td>Recodes: None</td>
</tr>
<tr>
<td></td>
<td>Keywords: injury; poisoning</td>
</tr>
<tr>
<td></td>
<td>Notes: Use this variable in combination with HHX, FMX, and FPX to identify injury and/or poisoning episodes for individual persons or use this variable in combination with FCTRLNUM and FPX to identify injury and/or poisoning episodes for individual persons.</td>
</tr>
</tbody>
</table>

| 01 | First injury or poisoning |
| 02 | Second injury or poisoning |
| 03 | Third injury or poisoning |
| 04 | Fourth injury or poisoning |
| 05 | Fifth injury or poisoning |
| 06 | Sixth injury or poisoning |
| 07 | Seventh injury or poisoning |
| 08 | Eighth injury or poisoning |
| 09 | Ninth injury or poisoning |
| 10 | Tenth injury or poisoning |

<table>
<thead>
<tr>
<th>Question ID: IDN.000_70.000</th>
<th>Weight - Final Annual</th>
</tr>
</thead>
<tbody>
<tr>
<td>Instrument Variable Name:</td>
<td>Weight Final Annual</td>
</tr>
<tr>
<td>Final Documentation Name:</td>
<td>Sources: None</td>
</tr>
<tr>
<td>WTFA</td>
<td>Recodes: None</td>
</tr>
<tr>
<td></td>
<td>Keywords: None</td>
</tr>
<tr>
<td></td>
<td>Notes: None</td>
</tr>
</tbody>
</table>

Weight - Final Annual
Question ID: FIJ.050_01.000

Instrument Variable Name: IPDATEM

Final Documentation Name: IPDATEM

[If ((MTFINJ3M eq <1>) OR (MTFPOI3M eq <1>))]
When did {person’s} [injury/poisoning] happen for which a medical professional was consulted?

[If ((MTFINJ3M eq <2-91> and the most recent injury episode is being asked about) OR (MTFPOI3M eq <2-91> and the most recent poisoning episode is being asked about))]
Now I’m going to ask a few questions about the [^MTFINJ3M/^MTFPOI3M] times {person} {were/was} [injured/poisoned] for which a medical professional was consulted. Starting with the most recent time, when did this [injury/poisoning] happen?

[If ((MTFINJ3M eq <2-91> and the other injury episodes are being asked about) OR (MTFPOI3M eq <2-91> and the other poisoning episodes are being asked about))]
You just told me about {person’s} [month, day of previous event/"most recent"/"second most recent"/"third most recent"/"fourth most recent"] [injury/poisoning]. What was the date of the [injury/poisoning] before that for which a medical professional was consulted?

Universe: ('01' <= MTFINJ3M <= '91') or ('01' <= MTFPOI3M <= '91')

Description: All medically-consulted injury/poisoning episodes that reportedly occurred during the past 3 months based on responses to family level questions FIJ.010_01.000 to FIJ.028_00.000

Sources: None

Recodes: None

Keywords: injury; poisoning; date

Notes: None
When did [person's] [injury/poisoning] happen for which a medical professional was consulted?

Now I'm going to ask a few questions about the [MTFINJ3M/MTFPOI3M] times [person] [were/was] [injured/poisoned] for which a medical professional was consulted. Starting with the most recent time, when did this [injury/poisoning] happen?

You just told me about [person's] [month, day of previous event] [injury/poisoning]. What was the date of the [injury/poisoning] before that for which a medical professional was consulted?

Universe: ('01' <= MTFINJ3M <= '91') or ('01' <= MTFPOI3M <= '91') and ('01' <= IPDATED <= '31') or IPDATED = '99'

Description: All medically-consulted injury/poisoning episodes that reportedly occurred during the past 3 months based on responses to family level questions FIJ.010_01.000 to FIJ.028_00.000, and a day was entered for the episode or "don't know" was entered for the day of the episode

Sources: None

Recodes: None

Keywords: injury; poisoning; date

Notes: None

<table>
<thead>
<tr>
<th>Year</th>
<th>Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>9997</td>
<td>Refused</td>
</tr>
<tr>
<td>9998</td>
<td>Not ascertained</td>
</tr>
<tr>
<td>9999</td>
<td>Don't know</td>
</tr>
</tbody>
</table>
### Question ID: FIJ.051_01.000

**Instrument Variable Name:** IPDATENO  
**Final Documentation Name:** IPDATENO

**Can you tell me approximately how long ago {person's} [injury/poisoning] happened?**

**Universe:** '01' <= MTFINJ3M <= '91' or '01' <= MTFPOI3M <= '91' and IPDATEM = '99'

**Description:** All medically-consulted injury/poisoning episodes that reportedly occurred during the past 3 months based on responses to family level questions FIJ.010_01.000 to FIJ.028_00.000, where "don't know" is entered for the month of the episode

**Sources:** None  
**Recodes:** None  
**Keywords:** injury; poisoning; time period  
**Notes:** None

**Approximate time since injury/poisoning episode: Number of units**

<table>
<thead>
<tr>
<th>No. of units</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>001-096</td>
<td>Refused</td>
</tr>
<tr>
<td>997</td>
<td>Refused</td>
</tr>
<tr>
<td>998</td>
<td>Not ascertained</td>
</tr>
<tr>
<td>999</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

### Question ID: FIJ.051_02.000

**Instrument Variable Name:** IPDATETP  
**Final Documentation Name:** IPDATETP

**Can you tell me approximately how long ago {person's} [injury/poisoning] happened?**

**Universe:** '01' <= MTFINJ3M <= '91' or '01' <= MTFPOI3M <= '91' and IPDATEM = '99'

**Description:** All medically-consulted injury/poisoning episodes that reportedly occurred during the past 3 months based on responses to family level questions FIJ.010_01.000 to FIJ.028_00.000, where "don't know" is entered for the month of the episode

**Sources:** None  
**Recodes:** None  
**Keywords:** injury; poisoning; time period  
**Notes:** None

**Approximate time since injury/poisoning episode: Time period**

<table>
<thead>
<tr>
<th>No.</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Days</td>
</tr>
<tr>
<td>2</td>
<td>Weeks</td>
</tr>
<tr>
<td>3</td>
<td>Months</td>
</tr>
<tr>
<td>7</td>
<td>Refused</td>
</tr>
<tr>
<td>8</td>
<td>Not ascertained</td>
</tr>
<tr>
<td>9</td>
<td>Don't know</td>
</tr>
</tbody>
</table>
Was this in the beginning of [\text{\^IPDATEM (text)}], the middle of [\text{\^IPDATEM (text)}], or the end of [\text{\^IPDATEM (text)}]?

**Universe:**  
\(\langle 01 \rangle \leq MTFINJ3M \leq \langle 91 \rangle \) or \(\langle 01 \rangle \leq MTFPOI3M \leq \langle 91 \rangle \) and \text{IPDATED} = '99'

**Description:** All medically-consulted injury/poisoning episodes that reportedly occurred during the past 3 months based on responses to family level questions FIJ.010_01.000 to FIJ.028_00.000, where "don't know" is entered for the day of the episode

**Question ID:** FIJ.052_00.000  
**Instrument Variable Name:** IPDATEMT  
**Final Documentation Name:** IPDATEMT

---

Time between the date of the injury/poisoning episode and the date the injury/poisoning questions were asked

<table>
<thead>
<tr>
<th>Time Interval</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>000-499</td>
<td>0-499 days</td>
</tr>
<tr>
<td>500</td>
<td>Same month as month the injury/poisoning questions were asked</td>
</tr>
<tr>
<td>501</td>
<td>Month before the month the injury/poisoning questions were asked</td>
</tr>
<tr>
<td>502-524</td>
<td>2-24 months before the month the injury/poisoning questions were asked</td>
</tr>
<tr>
<td>998</td>
<td>Not ascertained</td>
</tr>
</tbody>
</table>

**Question ID:** FIJ.052_00.000 R01 RECODE  
**Instrument Variable Name:** RPCKDMR  
**Final Documentation Name:** RPCKDMR
2009 NATIONAL HEALTH INTERVIEW SURVEY
Episode
injpoiep : Injuries & Poisoning
PUBLIC USE
Document Version Date: 10-Mar-11

**Question ID:** FIJ.052_02.000  **R02 RECODE**  Instrument Variable Name:
Final Documentation Name: RPD

**Recode**

*Universe:* ‘01’ <= MTFINJ3M <= '91' or ‘01’ <= MTFPOI3M <= '91'

*Description:* All medically-consulted injury/poisoning episodes that reportedly occurred during the past 3 months based on responses to family level questions FIJ.010_01.000 to FIJ.028_00.000

*Sources:* IPDATEM, IPDATED, IPDATEY, IPDATENO, IPDATETP, IPDATEMT, IJDATE

*Recodes:* None

*Keywords:* injury; poisoning; elapsed time

*Notes:* This variable provides the elapsed time in days between the injury/poisoning episode date and the date the injury/poisoning questions were asked, calculated from date information provided by the respondent and imputed when necessary. For more information about this variable see the Survey Description Document.

Days between the date of the injury/poisoning episode and the date the injury/poisoning questions were asked

| 000-999   | 0-999 days |

**Question ID:** FIJ.052_00.000  **R03 RECODE**  Instrument Variable Name:
Final Documentation Name: BIETD

**Recode**

*Universe:* ‘01’ <= MTFINJ3M <= '91' or ‘01’ <= MTFPOI3M <= '91'

*Description:* All medically-consulted injury/poisoning episodes that reportedly occurred during the past 3 months based on responses to family level questions FIJ.010_01 to FIJ.028_00.000

*Sources:* IPDATEM, IPDATED, IPDATEY, IPDATENO, IPDATETP, IPDATEMT, IJDATE

*Recodes:* None

*Keywords:* injury; poisoning; elapsed time

*Notes:* The lower boundary of the interval specifying the number of days possibly elapsed between the injury/poisoning episode and the date when the injury/poisoning questions were asked consistent with the date information provided by the respondent. In the case where complete information is given, RPD, BIETD, and EIETD will be equal. For more information about this variable see the Survey Description Document.

Lower boundary of elapsed time interval in days

| 000-999   | 0-999 days before the date the injury/poisoning questions were asked |
### Recode

**Question ID:** FIJ.052_00.000  
**R04 RECODE**  
**Instrument Variable Name:**  
**Final Documentation Name:** EIETD

**Universe:**  
\( '01' \leq MTFINJ3M \leq '91' \) or \( '01' \leq MTFPOI3M \leq '91' \)

**Description:** All medically-consulted injury/poisoning episodes that reportedly occurred during the past 3 months based on responses to family level questions FIJ.010_01 to FIJ.028_00.000

**Sources:** IPDATEM, IPDATED, IPDATEY, IPDATENO, IPDATETP, IPDATEMT, IJDATE

**Recodes:** None

**Keywords:** injury; poisoning; elapsed time

**Notes:** The upper boundary of the interval specifying the number of days possibly elapsed between the injury/poisoning episode and the date when the injury/poisoning questions were asked consistent with the date information provided by the respondent. In the case where complete information is given, RPD, BIETD, and EIETD will be equal. For more information about this variable see the Survey Description Document.

#### Upper boundary of elapsed time interval in days

<table>
<thead>
<tr>
<th>Value</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>000-999</td>
<td>0-999 days before the date the injury/poisoning questions were asked</td>
</tr>
</tbody>
</table>

### Recode

**Question ID:** FIJ.052_00.000  
**R05 RECODE**  
**Instrument Variable Name:**  
**Final Documentation Name:** EDIPBR

**Universe:**  
\( '01' \leq MTFINJ3M \leq '91' \) or \( '01' \leq MTFPOI3M \leq '91' \)

**Description:** All medically-consulted injury/poisoning episodes that reportedly occurred during the past 3 months based on responses to family level questions FIJ.010_01 to FIJ.028_00.000

**Sources:** IPDATEM, IPDATED, IPDATEY, IPDATENO, IPDATETP, IPDATEMT

**Recodes:** None

**Keywords:** injury; poisoning

**Notes:** None

**Episode date information reported by the respondent**

<table>
<thead>
<tr>
<th>Value</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Month, day, and year</td>
</tr>
<tr>
<td>2</td>
<td>Month, beginning of month, and year</td>
</tr>
<tr>
<td>3</td>
<td>Month, middle of month, and year</td>
</tr>
<tr>
<td>4</td>
<td>Month, end of month, and year</td>
</tr>
<tr>
<td>5</td>
<td>Month and year</td>
</tr>
<tr>
<td>6</td>
<td>Elapsed time in days</td>
</tr>
<tr>
<td>7</td>
<td>Elapsed time in weeks</td>
</tr>
<tr>
<td>8</td>
<td>Elapsed time in months</td>
</tr>
<tr>
<td>9</td>
<td>No information</td>
</tr>
</tbody>
</table>
**2009 NATIONAL HEALTH INTERVIEW SURVEY**  
**Episode**  
**injpoiep : Injuries & Poisoning**  
**PUBLIC USE**  
**Document Version Date: 10-Mar-11**

**Question ID:** FIJ.052_00.000  
**R06 RECODE**  
**Instrument Variable Name:**  
**Final Documentation Name:** IMPMETH

### Recode

**Universe:**  
'(01' <= MTFINJ3M <= '91') or '(01' <= MTFPOI3M <= '91')

**Description:** All medically-consulted injury/poisoning episodes that reportedly occurred during the past 3 months based on responses to family level questions FIJ.010_01 to FIJ.028_00.000

**Sources:** IPDATEM, IPDATED, IPDATEY, IPDATENO, IPDATEMT

**Recodes:** None

**Keywords:** injury; poisoning; elapsed time

**Notes:** This variable indicates the part of the injury/poisoning date or time interval used in the creation of variable RPD that was imputed. For more information about the imputation methods used see the Survey Description Document.

### Imputed part of I/P date or elapsed time interval

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td>No imputation necessary (month, day, and year reported; or elapsed time interval width = 0)</td>
</tr>
<tr>
<td>1</td>
<td>Imputed day based on reported beginning, middle, or end of month</td>
</tr>
<tr>
<td>2</td>
<td>Imputed day of the month (no day of month information reported)</td>
</tr>
<tr>
<td>3</td>
<td>No imputation necessary (elapsed time reported in days)</td>
</tr>
<tr>
<td>4</td>
<td>Imputed time interval based on elapsed time reported in weeks</td>
</tr>
<tr>
<td>5</td>
<td>Imputed time interval based on elapsed time reported in months</td>
</tr>
<tr>
<td>6</td>
<td>Imputed elapsed time &amp; elapsed time interval using hot deck imputation (no date information reported or no valid date information reported)</td>
</tr>
</tbody>
</table>
### Question ID: FIJ.052_00.000R08 RECODE

**Instrument Variable Name:**

**Final Documentation Name:** MUMON

#### Recode

**Universe:**

`'(01' <= MTFINJ3M <= '91') or ('01' <= MTFPOI3M <= '91')`

**Description:**

All medically-consulted injury/poisoning episodes that reportedly occurred during the past 3 months based on responses to family level questions FIJ.010_01 to FIJ.028_00.000

**Sources:** IPDATEM, IPDATED, IPDATEY, IPDATENO, IPDATETP, IPDATEMT

**Recodes:** None

**Keywords:** injury; poisoning

**Notes:** This variable contains the value of IPDATEM when no imputation was done, and it contains the imputed month when the month was imputed. For more information about this variable see the Survey Description Document.

<table>
<thead>
<tr>
<th>Imputed month</th>
<th>Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>01</td>
<td>January</td>
</tr>
<tr>
<td>02</td>
<td>February</td>
</tr>
<tr>
<td>03</td>
<td>March</td>
</tr>
<tr>
<td>04</td>
<td>April</td>
</tr>
<tr>
<td>05</td>
<td>May</td>
</tr>
<tr>
<td>06</td>
<td>June</td>
</tr>
<tr>
<td>07</td>
<td>July</td>
</tr>
<tr>
<td>08</td>
<td>August</td>
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<td>09</td>
<td>September</td>
</tr>
<tr>
<td>10</td>
<td>October</td>
</tr>
<tr>
<td>11</td>
<td>November</td>
</tr>
<tr>
<td>12</td>
<td>December</td>
</tr>
</tbody>
</table>

### Question ID: FIJ.052_00.000R10 RECODE

**Instrument Variable Name:**

**Final Documentation Name:** MUYEAR

#### Recode

**Universe:**

`'(01' <= MTFINJ3M <= '91') or ('01' <= MTFPOI3M <= '91')`

**Description:**

All medically-consulted injury/poisoning episodes that reportedly occurred during the past 3 months based on responses to family level questions FIJ.010_01 to FIJ.028_00.000

**Sources:** IPDATEM, IPDATED, IPDATEY, IPDATENO, IPDATETP, IPDATEMT

**Recodes:** None

**Keywords:** injury; poisoning

**Notes:** This variable contains the value of IPDATEY when no imputation was done, and it contains the imputed year when the year was imputed. For more information about this variable see the Survey Description Document.

<table>
<thead>
<tr>
<th>Imputed year</th>
</tr>
</thead>
<tbody>
<tr>
<td>Year</td>
</tr>
</tbody>
</table>
**Question ID:** FIJ.052_00.000  
**R11 RECODE**  
**Instrument Variable Name:** ETFLG  
**Final Documentation Name:** ETFLG

### Recode

**Universe:** 
\( ('01' \leq MTFINJ3M \leq '91') \) or \( ('01' \leq MTFPOI3M \leq '91') \)

**Description:** All medically-consulted injury/poisoning episodes that reportedly occurred during the past 3 months based on responses to family level questions FIJ.010_01 to FIJ.028_00.000

**Sources:** RPD

**Recodes:** None

**Keywords:** injury; poisoning; elapsed time

**Notes:** This variable indicates whether the elapsed time (RPD) between the date of the injury/poisoning episode and the date the injury/poisoning questions were asked is greater than the 3 month (91 days) reference period used in family level questions FIJ.010_01.000 and FIJ.020_00.000. A value greater than 91 days occurs if the injury/poisoning episode date information reported by the respondent subsequent to the family level questions is not consistent with the respondent's initial report that the injury/poisoning episode occurred during the past 3 months. For more information about this variable see the Survey Description Document.

**Elapsed time flag**

<table>
<thead>
<tr>
<th>Value</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Elapsed time is &gt; 91 days</td>
</tr>
<tr>
<td>2</td>
<td>Elapsed time is &lt;= 91 days</td>
</tr>
</tbody>
</table>

**Question ID:** FIJ.052_00.000  
**R12 RECODE**  
**Instrument Variable Name:** BEIFLG  
**Final Documentation Name:** BEIFLG

### Recode

**Universe:** 
\( ('01' \leq MTFINJ3M \leq '91') \) or \( ('01' \leq MTFPOI3M \leq '91') \)

**Description:** All medically-consulted injury/poisoning episodes that reportedly occurred during the past 3 months based on responses to family level questions FIJ.010_01 to FIJ.028_00.000

**Sources:** RPD; BIETD; EIETD

**Recodes:** None

**Keywords:** injury; poisoning; elapsed time

**Notes:** This variable indicates if any part of the elapsed time interval is greater than the 3 month (91 days) reference period used in family level questions FIJ.010_01.000 and FIJ.020_00.000. A value greater than 91 days occurs if the injury/poisoning episode date information reported by the respondent subsequent to the family level questions is not consistent with the respondent's initial report that the injury/poisoning episode occurred during the past 3 months. For more information about this variable see the Survey Description Document.

**Elapsed time interval boundary flag**

<table>
<thead>
<tr>
<th>Value</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Only the upper boundary of the interval for elapsed time is &gt; 91 days</td>
</tr>
<tr>
<td>2</td>
<td>Upper and lower boundary of the interval for elapsed time is &gt; 91 days</td>
</tr>
<tr>
<td>3</td>
<td>Upper and lower boundary of the interval for elapsed time is &lt;= 91 days</td>
</tr>
</tbody>
</table>
* Do not read. Enter the number which best describes the cause of the person's injury from the list below.

**Universe:** '(01' <= MTFINJ3M <= '91')

**Description:** All medically-consulted injury episodes that reportedly occurred during the past 3 months based on responses to family level questions FIJ.010_01.000 to FIJ.028_00.000

**Sources:** None

**Recodes:** None

**Keywords:** injury; motor vehicle; fall; burn

**Notes:** None

<table>
<thead>
<tr>
<th>Cause of injury episode</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>01</td>
<td>In a motor vehicle</td>
</tr>
<tr>
<td>02</td>
<td>On a bike, scooter, skateboard, skates, skis, horse, etc.</td>
</tr>
<tr>
<td>03</td>
<td>Pedestrian who was struck by a vehicle such as a car or bicycle</td>
</tr>
<tr>
<td>04</td>
<td>In a boat, train, or plane</td>
</tr>
<tr>
<td>05</td>
<td>Fall</td>
</tr>
<tr>
<td>06</td>
<td>Burned or scalded by substances such as hot objects or liquids, fire, or chemicals</td>
</tr>
<tr>
<td>07</td>
<td>Other</td>
</tr>
<tr>
<td>08</td>
<td>Refused</td>
</tr>
<tr>
<td>09</td>
<td>Not ascertained</td>
</tr>
<tr>
<td>99</td>
<td>Don't know</td>
</tr>
</tbody>
</table>
### Question ID: FIJ.065_00.000  
**R13 RECODE**  
**Instrument Variable Name:**  
**Final Documentation Name:** ECAUS

**Universe:**  
'01' <= MTFINJ3M <= '91' or '01' <= MTFPOI3M <= '91'

**Description:**  
All medically-consulted injury/poisoning episodes that reportedly occurred during the past 3 months based on responses to family level questions FIJ.010_01.000 to FIJ.028_00.000

**Sources:**  
ECODE_1

**Recodes:**  
None

**Keywords:**  
injury; transportation; fire; fall; poisoning; overexertion; struck by; animal; insect; cut; machinery

**Notes:**  
Transportation includes motor vehicle/bicycle/motorcycle/pedestrian/train/boat/airplane. This variable describes the cause of the injury/poisoning using categories based on ICD-9-CM external cause codes (E codes). See External Cause Codes included in the variable ECAUS Categories Appendix for a list of E codes found in each category.

**Cause of injury/poisoning based on E codes**

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>01</td>
<td>Transportation (see Notes above)</td>
</tr>
<tr>
<td>02</td>
<td>Fire/burn/scald related</td>
</tr>
<tr>
<td>03</td>
<td>Fall</td>
</tr>
<tr>
<td>04</td>
<td>Poisoning</td>
</tr>
<tr>
<td>05</td>
<td>Overexertion/strenuous movements</td>
</tr>
<tr>
<td>06</td>
<td>Struck by object or person</td>
</tr>
<tr>
<td>07</td>
<td>Animal or insect bite</td>
</tr>
<tr>
<td>08</td>
<td>Cut/pierce</td>
</tr>
<tr>
<td>09</td>
<td>Machinery</td>
</tr>
<tr>
<td>10</td>
<td>Other</td>
</tr>
<tr>
<td>97</td>
<td>Refused</td>
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<td>98</td>
<td>Not ascertained</td>
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<td>99</td>
<td>Don't know</td>
</tr>
</tbody>
</table>
### Question ID: FIJ.070_01.000  
### Instrument Variable Name: IJBODY1  
### Final Documentation Name: IJBODY1

**In this injury, what parts of {person's} body were hurt?**

**Universal:** \(01 \leq MTFINJ3M \leq 91\)

**Description:** All medically-consulted injury episodes that reportedly occurred during the past 3 months based on responses to family level questions FIJ.010_01.000 to FIJ.028_00.000

**Sources:** None

**Recodes:** None

**Keywords:** injury; body part

**Notes:** None

**Parts of body hurt: 1st body part**

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>01</td>
<td>Ankle</td>
</tr>
<tr>
<td>02</td>
<td>Back</td>
</tr>
<tr>
<td>03</td>
<td>Buttocks</td>
</tr>
<tr>
<td>04</td>
<td>Chest</td>
</tr>
<tr>
<td>05</td>
<td>Ear</td>
</tr>
<tr>
<td>06</td>
<td>Elbow</td>
</tr>
<tr>
<td>07</td>
<td>Eye</td>
</tr>
<tr>
<td>08</td>
<td>Face</td>
</tr>
<tr>
<td>09</td>
<td>Finger/thumb</td>
</tr>
<tr>
<td>10</td>
<td>Foot</td>
</tr>
<tr>
<td>11</td>
<td>Forearm</td>
</tr>
<tr>
<td>12</td>
<td>Groin</td>
</tr>
<tr>
<td>13</td>
<td>Hand</td>
</tr>
<tr>
<td>14</td>
<td>Head (not face)</td>
</tr>
<tr>
<td>15</td>
<td>Hip</td>
</tr>
<tr>
<td>16</td>
<td>Jaw</td>
</tr>
<tr>
<td>17</td>
<td>Knee</td>
</tr>
<tr>
<td>18</td>
<td>Lower leg</td>
</tr>
<tr>
<td>19</td>
<td>Mouth</td>
</tr>
<tr>
<td>20</td>
<td>Neck</td>
</tr>
<tr>
<td>21</td>
<td>Nose</td>
</tr>
<tr>
<td>22</td>
<td>Shoulder</td>
</tr>
<tr>
<td>23</td>
<td>Stomach</td>
</tr>
<tr>
<td>24</td>
<td>Teeth</td>
</tr>
<tr>
<td>25</td>
<td>Thigh</td>
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<tr>
<td>26</td>
<td>Toe</td>
</tr>
<tr>
<td>27</td>
<td>Upper arm</td>
</tr>
<tr>
<td>28</td>
<td>Wrist</td>
</tr>
<tr>
<td>29</td>
<td>Other</td>
</tr>
<tr>
<td>97</td>
<td>Refused</td>
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<tr>
<td>98</td>
<td>Not ascertained</td>
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<td>99</td>
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</tr>
</tbody>
</table>
**Question ID:** FIJ.070_02.000  
**Instrument Variable Name:** IJBODY2  
**Final Documentation Name:** IJBODY2

**In this injury, what parts of {person's} body were hurt?**

**Universe:**  
\( '01' <= \text{MTFINJ3M} <= '91' \)

**Description:** All medically-consulted injury episodes that reportedly occurred during the past 3 months based on responses to family level questions FIJ.010_01.000 to FIJ.028_00.000

**Sources:** None  
**Recodes:** None  
**Keywords:** injury; body part  
**Notes:** None

**Parts of body hurt: 2nd body part**

<table>
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<tr>
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<th>Description</th>
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</thead>
<tbody>
<tr>
<td>00</td>
<td>No second response</td>
</tr>
<tr>
<td>01</td>
<td>Ankle</td>
</tr>
<tr>
<td>02</td>
<td>Back</td>
</tr>
<tr>
<td>03</td>
<td>Buttocks</td>
</tr>
<tr>
<td>04</td>
<td>Chest</td>
</tr>
<tr>
<td>05</td>
<td>Ear</td>
</tr>
<tr>
<td>06</td>
<td>Elbow</td>
</tr>
<tr>
<td>07</td>
<td>Eye</td>
</tr>
<tr>
<td>08</td>
<td>Face</td>
</tr>
<tr>
<td>09</td>
<td>Finger/thumb</td>
</tr>
<tr>
<td>10</td>
<td>Foot</td>
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<tr>
<td>11</td>
<td>Forearm</td>
</tr>
<tr>
<td>12</td>
<td>Groin</td>
</tr>
<tr>
<td>13</td>
<td>Hand</td>
</tr>
<tr>
<td>14</td>
<td>Head (not face)</td>
</tr>
<tr>
<td>15</td>
<td>Hip</td>
</tr>
<tr>
<td>16</td>
<td>Jaw</td>
</tr>
<tr>
<td>17</td>
<td>Knee</td>
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<tr>
<td>18</td>
<td>Lower leg</td>
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<tr>
<td>19</td>
<td>Mouth</td>
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<td>Neck</td>
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<td>21</td>
<td>Nose</td>
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<td>22</td>
<td>Shoulder</td>
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<tr>
<td>23</td>
<td>Stomach</td>
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<td>24</td>
<td>Teeth</td>
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<td>25</td>
<td>Thigh</td>
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<tr>
<td>26</td>
<td>Toe</td>
</tr>
<tr>
<td>27</td>
<td>Upper arm</td>
</tr>
<tr>
<td>28</td>
<td>Wrist</td>
</tr>
<tr>
<td>29</td>
<td>Other</td>
</tr>
<tr>
<td>97</td>
<td>Refused</td>
</tr>
<tr>
<td>98</td>
<td>Not ascertained</td>
</tr>
</tbody>
</table>
99  Don't know
In this injury, what parts of {person's} body were hurt?

Universe: \( '01' \leq MTFINJ3M \leq '91' \)

Description: All medically-consulted injury episodes that reportedly occurred during the past 3 months based on responses to family level questions FIJ.010_01.000 to FIJ.028_00.000

Sources: None

Recodes: None

Keywords: injury; body part

Notes: None

Parts of body hurt: 3rd body part

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
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<tbody>
<tr>
<td>00</td>
<td>No third response</td>
</tr>
<tr>
<td>01</td>
<td>Ankle</td>
</tr>
<tr>
<td>02</td>
<td>Back</td>
</tr>
<tr>
<td>03</td>
<td>Buttocks</td>
</tr>
<tr>
<td>04</td>
<td>Chest</td>
</tr>
<tr>
<td>05</td>
<td>Ear</td>
</tr>
<tr>
<td>06</td>
<td>Elbow</td>
</tr>
<tr>
<td>07</td>
<td>Eye</td>
</tr>
<tr>
<td>08</td>
<td>Face</td>
</tr>
<tr>
<td>09</td>
<td>Finger/thumb</td>
</tr>
<tr>
<td>10</td>
<td>Foot</td>
</tr>
<tr>
<td>11</td>
<td>Forearm</td>
</tr>
<tr>
<td>12</td>
<td>Groin</td>
</tr>
<tr>
<td>13</td>
<td>Hand</td>
</tr>
<tr>
<td>14</td>
<td>Head (not face)</td>
</tr>
<tr>
<td>15</td>
<td>Hip</td>
</tr>
<tr>
<td>16</td>
<td>Jaw</td>
</tr>
<tr>
<td>17</td>
<td>Knee</td>
</tr>
<tr>
<td>18</td>
<td>Lower leg</td>
</tr>
<tr>
<td>19</td>
<td>Mouth</td>
</tr>
<tr>
<td>20</td>
<td>Neck</td>
</tr>
<tr>
<td>21</td>
<td>Nose</td>
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<tr>
<td>23</td>
<td>Stomach</td>
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<td>24</td>
<td>Teeth</td>
</tr>
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<td>25</td>
<td>Thigh</td>
</tr>
<tr>
<td>26</td>
<td>Toe</td>
</tr>
<tr>
<td>27</td>
<td>Upper arm</td>
</tr>
<tr>
<td>28</td>
<td>Wrist</td>
</tr>
<tr>
<td>29</td>
<td>Other</td>
</tr>
<tr>
<td>97</td>
<td>Refused</td>
</tr>
<tr>
<td>98</td>
<td>Not ascertained</td>
</tr>
<tr>
<td></td>
<td>Don't know</td>
</tr>
<tr>
<td>---</td>
<td>------------</td>
</tr>
<tr>
<td>99</td>
<td></td>
</tr>
</tbody>
</table>
**Question ID:** FIJ.070_04.000  
**Instrument Variable Name:** IJBODY4  
**Final Documentation Name:** IJBODY4

**In this injury, what parts of {person's} body were hurt?**

**Universe:** '01' <= MTFINJ3M <= '91'

**Description:** All medically-consulted injury episodes that reportedly occurred during the past 3 months based on responses to family level questions FIJ.010_01.000 to FIJ.028_00.000

**Sources:** None  
**Recodes:** None  
**Keywords:** injury; body part  
**Notes:** None

<table>
<thead>
<tr>
<th>Parts of body hurt: 4th body part</th>
</tr>
</thead>
</table>
| 00                               | No fourth response  
| 01                               | Ankle  
| 02                               | Back  
| 03                               | Buttocks  
| 04                               | Chest  
| 05                               | Ear  
| 06                               | Elbow  
| 07                               | Eye  
| 08                               | Face  
| 09                               | Finger/thumb  
| 10                               | Foot  
| 11                               | Forearm  
| 12                               | Groin  
| 13                               | Hand  
| 14                               | Head (not face)  
| 15                               | Hip  
| 16                               | Jaw  
| 17                               | Knee  
| 18                               | Lower leg  
| 19                               | Mouth  
| 20                               | Neck  
| 21                               | Nose  
| 22                               | Shoulder  
| 23                               | Stomach  
| 24                               | Teeth  
| 25                               | Thigh  
| 26                               | Toe  
| 27                               | Upper arm  
| 28                               | Wrist  
| 29                               | Other  
| 97                               | Refused  
| 98                               | Not ascertained
### Question ID: FIJ.072_01.000

#### In what way was {person's} [first entry--^IJBODY (text) or ^IJBODYOS] hurt? Was it a:

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>01</td>
<td>Broken bone or fracture</td>
</tr>
<tr>
<td>02</td>
<td>Sprain, strain, or twist</td>
</tr>
<tr>
<td>03</td>
<td>Cut</td>
</tr>
<tr>
<td>04</td>
<td>Scrape</td>
</tr>
<tr>
<td>05</td>
<td>Bruise</td>
</tr>
<tr>
<td>06</td>
<td>Burn</td>
</tr>
<tr>
<td>07</td>
<td>Insect bite</td>
</tr>
<tr>
<td>08</td>
<td>Animal bite</td>
</tr>
<tr>
<td>09</td>
<td>Other</td>
</tr>
<tr>
<td>97</td>
<td>Refused</td>
</tr>
<tr>
<td>98</td>
<td>Not ascertained</td>
</tr>
<tr>
<td>99</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

#### Universe:

\( ('01' \leq MTFINJ3M \leq '91') \) and \( ('01' \leq IJBODY1 \leq '29') \)

#### Description:

All medically-consulted injury episodes that reportedly occurred during the past 3 months based on responses to family level questions FIJ.010_01.000 to FIJ.028_00.000, where a first body part was reported to be hurt.

#### Sources:

None

#### Recodes:

None

#### Keywords:

injury; type of injury

#### Notes:

None
Question ID: FIJ.072_02.000  
Instrument Variable Name: IJTYPE12  
Final Documentation Name: IJTYPE1B

**In what way was [person's] [first entry--^IJBODY (text) or ^IJBODYOS] hurt? Was it a:**

| Universe: | '01' <= MTFINJ3M <= '91' and '01' <= IJBODY1 <= '29' |
| Sources: | None |
| Recodes: | None |
| Keywords: | injury; type of injury |
| Notes: | None |

**How body part 1 was hurt: Second response**

- 00 No second response
- 01 Broken bone or fracture
- 02 Sprain, strain, or twist
- 03 Cut
- 04 Scrape
- 05 Bruise
- 06 Burn
- 07 Insect bite
- 08 Animal bite
- 09 Other
- 97 Refused
- 98 Not ascertained
- 99 Don't know
Question ID: FIJ.074_01.000  
Instrument Variable Name: IJTYPE21  
Final Documentation Name: IJTYPE2A

In what way was {person's} [second entry--^IJBODY (text) or ^IJBODYOS] hurt? Was it a:

Universe:  (01 <= MTFINJ3M <= '91) and (01 <= IJBODY2 <= '29')

Description: All medically-consulted injury episodes that reportedly occurred during the past 3 months based on responses to family level questions FIJ.010_01.000 to FIJ.028_00.000, where a second body part was reported to be hurt

Sources: None  
Recodes: None  
Keywords: injury; type of injury  
Notes: None

How body part 2 was hurt: First response

01  Broken bone or fracture
02  Sprain, strain, or twist
03  Cut
04  Scrape
05  Bruise
06  Burn
07  Insect bite
08  Animal bite
09  Other
97  Refused
98  Not ascertained
99  Don't know
In what way was {person's} [second entry--^IJBODY (text) or ^IJBODYOS] hurt? Was it a:

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>00</td>
<td>No second response</td>
</tr>
<tr>
<td>01</td>
<td>Broken bone or fracture</td>
</tr>
<tr>
<td>02</td>
<td>Sprain, strain, or twist</td>
</tr>
<tr>
<td>03</td>
<td>Cut</td>
</tr>
<tr>
<td>04</td>
<td>Scrape</td>
</tr>
<tr>
<td>05</td>
<td>Bruise</td>
</tr>
<tr>
<td>06</td>
<td>Burn</td>
</tr>
<tr>
<td>07</td>
<td>Insect bite</td>
</tr>
<tr>
<td>08</td>
<td>Animal bite</td>
</tr>
<tr>
<td>09</td>
<td>Other</td>
</tr>
<tr>
<td>97</td>
<td>Refused</td>
</tr>
<tr>
<td>98</td>
<td>Not ascertained</td>
</tr>
<tr>
<td>99</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

Table notes:
- Question ID: FIJ.074_02.000
- Instrument Variable Name: IJTYPE22
- Final Documentation Name: IJTYPE2B
- Universe: ('01' <= MTFINJ3M <= '91') and ('01' <= IJBODY2 <= '29')
- Description: All medically-consulted injury episodes that reportedly occurred during the past 3 months based on responses to family level questions FIJ.010_01.000 to FIJ.028_00.000, where a second body part was reported to be hurt
- Sources: None
- Recodes: None
- Keywords: injury; type of injury
- Notes: None
Question ID: FIJ.076_01.000
Instrument Variable Name: IJTYPE31
Final Documentation Name: IJTYPE3A

In what way was {person's} [third entry--^IJBODY (text) or ^IJBODYOS] hurt? Was it a:

Universe:  
('01' <= MTFINJ3M <= '91') and ('01' <= IJBODY3 <= '29')

Description: All medically-consulted injury episodes that reportedly occurred during the past 3 months based on responses to family level questions FIJ.010_01.000 to FIJ.028_00.000, where a third body part was reported to be hurt

Sources: None
Recodes: None
Keywords: injury; type of injury
Notes: None

How body part 3 was hurt: First response

01 Broken bone or fracture
02 Sprain, strain, or twist
03 Cut
04 Scrape
05 Bruise
06 Burn
07 Insect bite
08 Animal bite
09 Other
97 Refused
98 Not ascertained
99 Don't know
**Question ID:** FIJ.076_02.000  
**Instrument Variable Name:** IJTYPE32  
**Final Documentation Name:** IJTYPE3B

**In what way was [person's] [third entry--^JBODY (text) or ^JBODYOS] hurt? Was it a:**

**Universe:**  
(‘01’ <= MTFINJ3M <= ‘91’) and (‘01’ <= IJBODY3 <= ’29’)

**Description:**  
All medically-consulted injury episodes that reportedly occurred during the past 3 months based on responses to family level questions FIJ.010_01.000 to FIJ.028_00.000, where a third body part was reported to be hurt.

**Sources:** None

**Recodes:** None

**Keywords:** injury; type of injury

**Notes:** None

**How body part 3 was hurt: Second response**

<table>
<thead>
<tr>
<th>00</th>
<th>No second response</th>
</tr>
</thead>
<tbody>
<tr>
<td>01</td>
<td>Broken bone or fracture</td>
</tr>
<tr>
<td>02</td>
<td>Sprain, strain, or twist</td>
</tr>
<tr>
<td>03</td>
<td>Cut</td>
</tr>
<tr>
<td>04</td>
<td>Scrape</td>
</tr>
<tr>
<td>05</td>
<td>Bruise</td>
</tr>
<tr>
<td>06</td>
<td>Burn</td>
</tr>
<tr>
<td>07</td>
<td>Insect bite</td>
</tr>
<tr>
<td>08</td>
<td>Animal bite</td>
</tr>
<tr>
<td>09</td>
<td>Other</td>
</tr>
<tr>
<td>97</td>
<td>Refused</td>
</tr>
<tr>
<td>98</td>
<td>Not ascertained</td>
</tr>
<tr>
<td>99</td>
<td>Don't know</td>
</tr>
</tbody>
</table>
In what way was [person's] [fourth entry] body part hurt?  Was it a:

- 01 Broken bone or fracture
- 02 Sprain, strain, or twist
- 03 Cut
- 04 Scrape
- 05 Bruise
- 06 Burn
- 07 Insect bite
- 08 Animal bite
- 09 Other
- 97 Refused
- 98 Not ascertained
- 99 Don't know
In what way was [person's] [fourth entry--^IJBODY (text) or ^IJBODYOS] hurt? Was it a:

- Universe: ('01' <= MTFINJ3M <= '91') and ('01' <= IJBODY4 <= '29')
- Description: All medically-consulted injury episodes that reportedly occurred during the past 3 months based on responses to family level questions FIJ.010_01.000 to FIJ.028_00.000, where a fourth body part was reported to be hurt

- How body part 4 was hurt: Second response
  - 00 No second response
  - 01 Broken bone or fracture
  - 02 Sprain, strain, or twist
  - 03 Cut
  - 04 Scrape
  - 05 Bruise
  - 06 Burn
  - 07 Insect bite
  - 08 Animal bite
  - 09 Other
  - 97 Refused
  - 98 Not ascertained
  - 99 Don't know
**Question ID:** FIJ.080_01.000  
**Instrument Variable Name:** PPCC  
**Final Documentation Name:** PPCC

**Did [person] get MEDICAL ADVICE, TREATMENT, or FOLLOW-UP CARE for this poisoning from...**

**A phone call to a poison control center?**

<table>
<thead>
<tr>
<th>Universe</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>('01' &lt;= MTFPOI3M &lt;= '91')</td>
<td>All medically-consulted poisoning episodes that reportedly occurred during the past 3 months based on responses to family level questions FIJ.010_01.000 to FIJ.028_00.000</td>
</tr>
</tbody>
</table>

| Sources | None |
| Recodes | None |
| Keywords | poisoning; poison control center |
| Notes | None |

Where received medical care: Call to PCC

1 Yes  
2 No  
7 Refused  
8 Not ascertained  
9 Don't know

**Question ID:** FIJ.080_02.000  
**Instrument Variable Name:** IPEV  
**Final Documentation Name:** IPEV

**Did [person] get MEDICAL ADVICE, TREATMENT, or FOLLOW-UP CARE for this [injury/poisoning] from...**

**An emergency vehicle, such as an ambulance or fire truck?**

<table>
<thead>
<tr>
<th>Universe</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>('01' &lt;= MTFINJ3M &lt;= '91') or ('01' &lt;= MTFPOI3M &lt;= '91')</td>
<td>All medically-consulted injury/poisoning episodes that reportedly occurred during the past 3 months based on responses to family level questions FIJ.010_01.000 to FIJ.028_00.000</td>
</tr>
</tbody>
</table>

| Sources | None |
| Recodes | None |
| Keywords | injury; poisoning; emergency vehicle |
| Notes | None |

Where received medical care: Emergency vehicle

1 Yes  
2 No  
7 Refused  
8 Not ascertained  
9 Don't know
2009 NATIONAL HEALTH INTERVIEW SURVEY
Episode
injpoep : Injuries & Poisoning
PUBLIC USE
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**Question ID:** FIJ.080_03.000
**Instrument Variable Name:** IPER
**Final Documentation Name:** IPER

Did [person] get MEDICAL ADVICE, TREATMENT, or FOLLOW-UP CARE for this [injury/poisoning] from...

**A visit to an emergency room?**

**Universe:**

\( '01' \leq MTFINJ3M \leq '91' \) or \( '01' \leq MTFPOI3M \leq '91' \)

**Description:**
All medically-consulted injury/poisoning episodes that reportedly occurred during the past 3 months based on responses to family level questions FIJ.010_01.000 to FIJ.028_00.000

**Sources:** None
**Recodes:** None
**Keywords:** injury; poisoning; emergency room
**Notes:** None

Where received medical care: Emergency room

1  Yes
2  No
7  Refused
8  Not ascertained
9  Don't know

---

**Question ID:** FIJ.080_04.000
**Instrument Variable Name:** IPDO
**Final Documentation Name:** IPDO

Did [person] get MEDICAL ADVICE, TREATMENT, or FOLLOW-UP CARE for this [injury/poisoning] from...

**A visit to a doctor's office or other health clinic?**

**Universe:**

\( '01' \leq MTFINJ3M \leq '91' \) or \( '01' \leq MTFPOI3M \leq '91' \)

**Description:**
All medically-consulted injury/poisoning episodes that reportedly occurred during the past 3 months based on responses to family level questions FIJ.010_01.000 to FIJ.028_00.000

**Sources:** None
**Recodes:** None
**Keywords:** injury; poisoning; doctor's office; clinic
**Notes:** None

Where received medical care: Doctor's office/clinic

1  Yes
2  No
7  Refused
8  Not ascertained
9  Don't know
Did [person] get MEDICAL ADVICE, TREATMENT, or FOLLOW-UP CARE for this [injury/poisoning] from...

### A phone call to a doctor, nurse, or other health care professional?

- **Universe:** \('01' <= MTFINJ3M <= '91') or ('01' <= MTFPOI3M <= '91')
- **Description:** All medically-consulted injury/poisoning episodes that reportedly occurred during the past 3 months based on responses to family level questions FIJ.010_01.000 to FIJ.028_00.000

### Where received medical care: Call to medical prof

<table>
<thead>
<tr>
<th>1</th>
<th>Yes</th>
</tr>
</thead>
<tbody>
<tr>
<td>2</td>
<td>No</td>
</tr>
<tr>
<td>7</td>
<td>Refused</td>
</tr>
<tr>
<td>8</td>
<td>Not ascertained</td>
</tr>
<tr>
<td>9</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

---

Did [person] get MEDICAL ADVICE, TREATMENT, or FOLLOW-UP CARE for this [injury/poisoning] from...

### Any place else?

- **Universe:** \('01' <= MTFINJ3M <= '91') or ('01' <= MTFPOI3M <= '91')
- **Description:** All medically-consulted injury/poisoning episodes that reportedly occurred during the past 3 months based on responses to family level questions FIJ.010_01.000 to FIJ.028_00.000

### Where received medical care: Any place else

<table>
<thead>
<tr>
<th>1</th>
<th>Yes</th>
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</thead>
<tbody>
<tr>
<td>2</td>
<td>No</td>
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<tr>
<td>7</td>
<td>Refused</td>
</tr>
<tr>
<td>8</td>
<td>Not ascertained</td>
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<tr>
<td>9</td>
<td>Don't know</td>
</tr>
</tbody>
</table>
2009 NATIONAL HEALTH INTERVIEW SURVEY
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**Question ID:** FIJ.090_00.000  
**Instrument Variable Name:** IPHOSP  
**Final Documentation Name:** IPHOSP

**[Were/Was] {person} hospitalized for at least one night as a result of this [injury/poisoning]?**

**Universe:** 

\((01' \leq MTFINJ3M \leq '91') \text{ or } (01' \leq MTFPOI3M \leq '91')) \text{ and IPVER ne '1'}

**Description:** All medically-consulted injury/poisoning episodes that reportedly occurred during the past 3 months based on responses to family level questions FIJ.010_01.000 to FIJ.028_00.000

**Sources:** None

**Recodes:** None

**Keywords:** injury; poisoning; hospitalized

**Notes:** None

Hospitalized overnight due to injury/poisoning episode

<p>| | |</p>
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<tbody>
<tr>
<td>1</td>
<td>Yes</td>
</tr>
<tr>
<td>2</td>
<td>No</td>
</tr>
<tr>
<td>7</td>
<td>Refused</td>
</tr>
<tr>
<td>8</td>
<td>Not ascertained</td>
</tr>
<tr>
<td>9</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

**Question ID:** FIJ.091_00.000  
**Instrument Variable Name:** IPIHNO  
**Final Documentation Name:** IPIHNO

**How many nights {were/was} {person} in the hospital?**

**Universe:** 

\(01' <= MTFINJ3M <= '91') \text{ or } (01' <= MTFPOI3M <= '91') \text{ and IPHOSP =}'1'

**Description:** All medically-consulted injury/poisoning episodes that reportedly occurred during the past 3 months based on responses to family level questions FIJ.010_01.000 to FIJ.028_00.000, resulting in hospitalization

**Sources:** None

**Recodes:** None

**Keywords:** injury; poisoning; hospital

**Notes:** None

Number of nights in the hospital

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
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</thead>
<tbody>
<tr>
<td>01-94</td>
<td>1-94 nights</td>
</tr>
<tr>
<td>95</td>
<td>95+ nights</td>
</tr>
<tr>
<td>97</td>
<td>Refused</td>
</tr>
<tr>
<td>98</td>
<td>Not ascertained</td>
</tr>
<tr>
<td>99</td>
<td>Don't know</td>
</tr>
</tbody>
</table>
Did this accident occur on a public highway, street, or road? Do not include non-traffic areas such as driveways or parking lots.

**Question ID:** FIJ.109_00.000
**Instrument Variable Name:** IMTRAF
**Final Documentation Name:** IMTRAF

**Universe:** "((01' <= MTFINJ3M <= '91') and ICAUS IN ('01','02','03')) and IPVER ne '1'"

**Description:** All medically-consulted injury episodes that reportedly occurred during the past 3 months based on responses to family level questions FIJ.010_01.000 to FIJ.028_00.000, that occurred while in a motor vehicle; while on a bike, scooter, skateboard, skis, horse, etc.; or as a pedestrian struck by a vehicle

**Sources:** None
**Recodes:** None
**Keywords:** injury; traffic related
**Notes:** None

### Traffic-related injury

- **1** Yes
- **2** No
- **7** Refused
- **8** Not ascertained
- **9** Don't know

---

**Question ID:** FIJ.110_00.000
**Instrument Variable Name:** IMVWHO
**Final Documentation Name:** IMVWHO

{Were/Was} {person} injured as:

**Universe:** "('01' <= MTFINJ3M <= '91') and ICAUS IN ('01','02','03') and IPVER ne '1'"

**Description:** All medically-consulted injury episodes that reportedly occurred during the past 3 months based on responses to family level questions FIJ.010_01.000 to FIJ.028_00.000, that occurred while in a motor vehicle; while on a bike, scooter, skateboard, skis, horse, etc.; or as a pedestrian struck by a vehicle

**Sources:** None
**Recodes:** None
**Keywords:** injury; driver; passenger; pedestrian; rider
**Notes:** None

### Injured as . . .

1. The driver of a motor vehicle
2. A passenger in a motor vehicle
3. A pedestrian
4. A bicycle rider or tricycle rider
5. The rider of a scooter, skateboard, skis, horse, etc.; or as a pedestrian struck by a vehicle
6. Refused
7. Not ascertained
8. Don't know
What type of vehicle {were/was} {person} in?

Type of vehicle injured person was in

01  Passenger car
02  Passenger truck, such as a pickup truck, van, or SUV
03  Bus
04  Large commercial truck, such as a semi-truck, big rig, or 18 wheeler
05  Motorcycle (including mopeds and minibikes)
06  All terrain vehicle or ski/snow-mobile
07  Farm equipment (such as a tractor)
08  Industrial or construction vehicle
09  Other
97  Refused
98  Not ascertained
99  Don't know
### 2009 NATIONAL HEALTH INTERVIEW SURVEY

**Episode**

**injpoep : Injuries & Poisoning**

**PUBLIC USE**

**Document Version Date: 10-Mar-11**

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**Question ID:** FIJ.112_00.000  
**Instrument Variable Name:** ISBELT  
**Final Documentation Name:** ISBELT

*Were/Was* {person} restrained at the time of the accident?

<p>| | |</p>
<table>
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<tbody>
<tr>
<td></td>
<td>Yes</td>
</tr>
<tr>
<td></td>
<td>No</td>
</tr>
<tr>
<td>7</td>
<td>Refused</td>
</tr>
<tr>
<td>8</td>
<td>Not ascertained</td>
</tr>
<tr>
<td>9</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

**Universe:**  
('01' <= MTFINJ3M <= '91') and ICAUS IN ('01','02','03') and IMVWHO IN ('1','2') and IMVTYP IN ('01','02','04')

**Description:**  
All medically-consulted injury episodes that reportedly occurred during the past 3 months based on responses to family level questions FIJ.010_01.000 to FIJ.028_00.000, that occurred while a driver or passenger of a car or truck.

**Sources:** None  
**Recodes:** None  
**Keywords:** injury

---

**Question ID:** FIJ.113_00.000  
**Instrument Variable Name:** IHELMT  
**Final Documentation Name:** IHELMT

*Were/Was* {person} wearing a helmet at the time of the accident?

<p>| | |</p>
<table>
<thead>
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<tbody>
<tr>
<td></td>
<td>Yes</td>
</tr>
<tr>
<td></td>
<td>No</td>
</tr>
<tr>
<td>7</td>
<td>Refused</td>
</tr>
<tr>
<td>8</td>
<td>Not ascertained</td>
</tr>
<tr>
<td>9</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

**Universe:**  
('01' <= MTFINJ3M <= '91') and ICAUS IN ('01','02','03') and (IMVWHO IN ('4','5') or IMVTYP IN ('05','06'))

**Description:**  
All medically-consulted injury episodes that reportedly occurred during the past 3 months based on responses to family level questions FIJ.010_01.000 to FIJ.028_00.000, that occurred while riding a bicycle or tricycle; a scooter, skateboard, skates, or other non-motorized vehicle; a motorcycle; or an all terrain vehicle or ski/snowmobile.

**Sources:** None  
**Recodes:** None  
**Keywords:** injury; helmet

---
Question ID: FIJ.130_01.000  
Instrument Variable Name: IFALL1  
Final Documentation Name: IFALL1

How did {person} fall? Anything else?

Universe:  
‘01’ <= MTFINJ3M <= ‘91’ and ICAUS = '05' and IPVER ne '1'

Description: All medically-consulted injury episodes that reportedly occurred during the past 3 months based on responses to family level questions FIJ.010_01.000 to FIJ.028_00.000, due to a fall

Sources: None  
Recodes: None  
Keywords: injury; fall  
Notes: None

How person fell: First response

01  Stairs, steps, or escalator  
02  Floor or level ground  
03  Curb (including sidewalk)  
04  Ladder or scaffolding  
05  Playground equipment  
06  Sports field, court, or rink  
07  Building or other structure  
08  Chair, bed, sofa, or other furniture  
09  Bathtub, shower, toilet, or commode  
10  Hole or other opening  
11  Other  
97  Refused  
98  Not ascertained  
99  Don’t know
How did {person} fall?  Anything else?

Universe:  ('01' <= MTFINJ3M <= '91') and ICAUS = '05' and IPVER ne '1'

Description:  All medically-consulted injury episodes that reportedly occurred during the past 3 months based on responses to family level questions FIJ.010_01.000 to FIJ.028_00.000, due to a fall

How person fell: Second response

00  No second response
01  Stairs, steps, or escalator
02  Floor or level ground
03  Curb (including sidewalk)
04  Ladder or scaffolding
05  Playground equipment
06  Sports field, court, or rink
07  Building or other structure
08  Chair, bed, sofa, or other furniture
09  Bathtub, shower, toilet, or commode
10  Hole or other opening
11  Other
97  Refused
98  Not ascertained
99  Don't know
What caused {person} to fall?

Universe: ('01' <= MTFINJ3M <= '91') and ICAUS = '05' and IPVER ne '1'

Description: All medically-consulted injury episodes that reportedly occurred during the past 3 months based on responses to family level questions FIJ.010_01.000 to FIJ.028_00.000, due to a fall

Sources: None

Recodes: None

Keywords: injury; fall

Notes: None

Cause of fall

1  Slipping or tripping
2  Jumping or diving
3  Bumping into an object or another person
4  Being shoved or pushed by another person
5  Losing balance or having dizziness (becoming faint or having a seizure)
6  Other
7  Refused
8  Not ascertained
9  Don't know
Question ID: FIJ.140_00.000

Instrument Variable Name: PPOIS

Final Documentation Name: PPOIS

What did {person's} poisoning result from?

<table>
<thead>
<tr>
<th>Cause of poisoning episode</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
</tr>
<tr>
<td>2</td>
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<tr>
<td>3</td>
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<tr>
<td>4</td>
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<tr>
<td>5</td>
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<tr>
<td>6</td>
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<tr>
<td>7</td>
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<tr>
<td>8</td>
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<tr>
<td>9</td>
</tr>
</tbody>
</table>

Universe: (‘01’ <= MTFPOI3M <= ‘91’) and IPVER ne ‘1’

Description: All medically-consulted poisoning episodes that reportedly occurred during the past 3 months based on responses to family level questions FIJ.010_01.000 to FIJ.028_00.000

Sources: None

Recodes: None

Keywords: poisoning

Notes: None
What activity {were/was} {person} involved in at the time of the [injury/poisoning]?

Universe: 

((‘01’ <= MTFINJ3M <= ‘91’) or (‘01’ <= MTFPOI3M <= ‘91’)) and IPVER ne ‘1’

Description: All medically-consulted injury/poisoning episodes that reportedly occurred during the past 3 months based on responses to family level questions FIJ.010_01.000 to FIJ.028_00.000

Activity at time of inj/pois episode: First response

01 Driving or riding in a motor vehicle
02 Working at a paid job
03 Working around the house or yard
04 Attending school
05 Unpaid work (such as volunteer work)
06 Sports and exercise
07 Leisure activity (excluding sports)
08 Sleeping, resting, eating, or drinking
09 Cooking
10 Being cared for (hands-on care from other person)
11 Other
97 Refused
98 Not ascertained
99 Don't know
What activity {were/was} {person} involved in at the time of the [injury/poisoning]?

**Question ID:** FIJ.150_02.000  
**Instrument Variable Name:** IPWHAT2  
**Final Documentation Name:** IPWHAT2

**Universe:** 
\((01' \leq MTFINJ3M \leq '91')\) or \((01' \leq MTFPOL3M \leq '91')\) and IPVER ne '1'

**Description:** All medically-consulted injury/poisoning episodes that reportedly occurred during the past 3 months based on responses to family level questions FIJ.010_01.000 to FIJ.028_00.000

**Sources:** None  
**Recodes:** None  
**Keywords:** injury; poisoning; activity  
**Notes:** None

**Activity at time of inj/pois episode: Second response**

<table>
<thead>
<tr>
<th>Code</th>
<th>Activity</th>
</tr>
</thead>
<tbody>
<tr>
<td>00</td>
<td>No second response</td>
</tr>
<tr>
<td>01</td>
<td>Driving or riding in a motor vehicle</td>
</tr>
<tr>
<td>02</td>
<td>Working at a paid job</td>
</tr>
<tr>
<td>03</td>
<td>Working around the house or yard</td>
</tr>
<tr>
<td>04</td>
<td>Attending school</td>
</tr>
<tr>
<td>05</td>
<td>Unpaid work (such as volunteer work)</td>
</tr>
<tr>
<td>06</td>
<td>Sports and exercise</td>
</tr>
<tr>
<td>07</td>
<td>Leisure activity</td>
</tr>
<tr>
<td>08</td>
<td>Sleeping, resting, eating, or drinking</td>
</tr>
<tr>
<td>09</td>
<td>Cooking</td>
</tr>
<tr>
<td>10</td>
<td>Being cared for (hands on care from other person)</td>
</tr>
<tr>
<td>11</td>
<td>Other</td>
</tr>
<tr>
<td>97</td>
<td>Refused</td>
</tr>
<tr>
<td>98</td>
<td>Not ascertained</td>
</tr>
<tr>
<td>99</td>
<td>Don't know</td>
</tr>
</tbody>
</table>
Where {were/was} {person} when the [injury/poisoning] happened?

**Question ID:** FIJ.160_01.000  
**Instrument Variable Name:** IPWHER1  
**Final Documentation Name:** IPWHER1

**Universe:** 
```
(('01' <= MTFINJ3M <= '91') or ('01' <= MTTFPOI3M <= '91')) and IPVER ne '1'
```

**Description:** All medically-consulted injury/poisoning episodes that reportedly occurred during the past 3 months based on responses to family level questions FIJ.010_01.000 to FIJ.028_00.000

**Sources:** None

**Recodes:** None

**Keywords:** injury; poisoning; location

**Notes:** None

**Location at time of inj/pois episode: First response**

- 01  Home (inside)
- 02  Home (outside)
- 03  School (not residential)
- 04  Child care center or preschool
- 05  Residential institution (exclude hospital)
- 06  Health care facility (include hospital)
- 07  Street or highway
- 08  Sidewalk
- 09  Parking lot
- 10  Sport facility, athletic field, or playground
- 11  Shopping center, restaurant, store, bank, gas station, or other place of business
- 12  Farm
- 13  Park or recreation area (include bike or jog path)
- 14  River, lake, stream, or ocean
- 15  Industrial or construction area
- 16  Other public building
- 17  Other
- 97  Refused
- 98  Not ascertained
- 99  Don't know
**2009 NATIONAL HEALTH INTERVIEW SURVEY**

**Episode**

**injpoiep : Injuries & Poisoning**

**PUBLIC USE**

**Document Version Date: 10-Mar-11**

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**Question ID:** FIJ.160_02.000  
**Instrument Variable Name:** IPWHER2  
**Final Documentation Name:** IPWHER2

**Where {were/was} {person} when the [injury/poisoning] happened?**

**Universe:**  
\((01 \leq MTFINJ3M \leq 91) \text{ or } (01 \leq MTFPOI3M \leq 91)\) and IPVER ne '1'

**Description:** All medically-consulted injury/poisoning episodes that reportedly occurred during the past 3 months based on responses to family level questions FIJ.010_01.000 to FIJ.028_00.000

**Sources:** None  
**Recodes:** None  
**Keywords:** injury; poisoning; location  
**Notes:** None

**Location at time of inj/ pois episode: Second response**

- 00 No second response  
- 01 Home (inside)  
- 02 Home (outside)  
- 03 School (not residential)  
- 04 Child care center or preschool  
- 05 Residential institution (exclude hospital)  
- 06 Health care facility (include hospital)  
- 07 Street or highway  
- 08 Sidewalk  
- 09 Parking lot  
- 10 Sport facility, athletic field, or playground  
- 11 Shopping center, restaurant, store, bank, gas station, or other place of business  
- 12 Farm  
- 13 Park or recreation area (include bike or jog path)  
- 14 River, lake, stream, or ocean  
- 15 Industrial or construction area  
- 16 Other public building  
- 17 Other  
- 97 Refused  
- 98 Not ascertained  
- 99 Don't know
**Question ID:** FIJ.170_00.000  
**Instrument Variable Name:** IPEMP  
**Final Documentation Name:** IPEMP

**At the time of this [injury/poisoning], {were/was} {person} employed full-time, part-time, or not employed?**

**Universe:** 
\( '01' \leq MTFINJ3M \leq '91' \) or \( '01' \leq MTFPOI3M \leq '91' \) and \( AGE \geq '013' \) and \( IPVER \neq '1' \)

**Description:** All medically-consulted injury/poisoning episodes that reportedly occurred during the past 3 months based on responses to family level questions FIJ.010_01.000 to FIJ.028_00.000 to persons 13 years of age or older

**Sources:** None

**Recodes:** None

**Keywords:** injury; poisoning; employed

**Notes:** None

Employed at the time of the injury/poisoning episode

1. Full-time
2. Part-time
3. Not employed
7. Refused
8. Not ascertained
9. Don't know

**Question ID:** FIJ.171_00.000  
**Instrument Variable Name:** IPWKLS  
**Final Documentation Name:** IPWKLS

**As a result of this [injury/poisoning], how many days of work did {person} miss?**

**Universe:** 
\( '01' \leq MTFINJ3M \leq '91' \) or \( '01' \leq MTFPOI3M \leq '91' \) and \( AGE \geq '013' \) and \( IPEMP \in ('1','2') \)

**Description:** All medically-consulted injury/poisoning episodes that reportedly occurred during the past 3 months based on responses to family level questions FIJ.010_01.000 to FIJ.028_00.000 to persons 13 years of age or older, where the person was employed at the time

**Sources:** None

**Recodes:** None

**Keywords:** injury; poisoning; work missed

**Notes:** None

Days of work missed

1. None
2. Less than one day
3. One to five days
4. Six or more days
7. Refused
8. Not ascertained
9. Don't know
### Question ID: FIJ.180_00.000

**Instrument Variable Name:** IPSTU  
**Final Documentation Name:** IPSTU

**At the time of this [injury/poisoning], {were/was} {person} a full-time student, part-time student or not a student?**

**Universe:**  
```
((01 <= MTFINJ3M <= '91') or (01 <= MTFPOI3M <= '91')) and AGE GE '005' and IPVER ne '1'
```

**Description:** All medically-consulted injury/poisoning episodes that reportedly occurred during the past 3 months based on responses to family level questions FIJ.010_01.000 to FIJ.028_00.000 to persons 5 years of age or older.

**Sources:** None  
**Recodes:** None  
**Keywords:** injury; poisoning; student  
**Notes:** None

<table>
<thead>
<tr>
<th>Student at the time of the injury/poisoning episode</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
</tr>
<tr>
<td>2</td>
</tr>
<tr>
<td>3</td>
</tr>
<tr>
<td>7</td>
</tr>
<tr>
<td>8</td>
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<td>9</td>
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</tbody>
</table>

### Question ID: FIJ.181_00.000

**Instrument Variable Name:** IPSCLS  
**Final Documentation Name:** IPSCLS

**As a result of this [injury/poisoning], how many days of school did {person} miss?**

**Universe:**  
```
((01 <= MTFINJ3M <= '91') or (01 <= MTFPOI3M <= '91')) and (AGE GE '005') and (IPSTU IN('1','2'))
```

**Description:** All medically-consulted injury/poisoning episodes that reportedly occurred during the past 3 months based on responses to family level questions FIJ.010_01.000 to FIJ.028_00.000 to persons 5 years of age or older, where the person was a student at the time.

**Sources:** None  
**Recodes:** None  
**Keywords:** injury; poisoning; school missed  
**Notes:** None

<table>
<thead>
<tr>
<th>Days of school missed</th>
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<tbody>
<tr>
<td>1</td>
</tr>
<tr>
<td>2</td>
</tr>
<tr>
<td>3</td>
</tr>
<tr>
<td>4</td>
</tr>
<tr>
<td>7</td>
</tr>
<tr>
<td>8</td>
</tr>
<tr>
<td>9</td>
</tr>
</tbody>
</table>
**Universe:**

('01' <= MTFINJ3M <= '91') or ('01' <= MTFPOI3M <= '91')

**Description:**
All medically-consulted injury/poisoning episodes that reportedly occurred during the past 3 months based on responses to family level questions FIJ.010_01.000 to FIJ.028_00.000

**Sources:** None

**Recodes:** None

**Keywords:** injury; poisoning; ICD-9-CM

**Notes:**
ICD-9-CM codes were assigned according to responses given to questions FIJ.060_00.000 to FIJ.079_00.000 and FIJ.109_00.000 to FIJ.160_02.000. See the ICD-9-CM Code Book for text descriptions of ICD-9-CM codes.

---

**Universe:**

(('01' <= MTFINJ3M <= '91') or ('01' <= MTFPOI3M <= '91')) and there was more than one injury or poisoning during the episode

**Description:**
All medically-consulted injury/poisoning episodes that reportedly occurred during the past 3 months based on responses to family level questions FIJ.010_01.000 to FIJ.028_00.000 that had more than one injury or poisoning during the episode

**Sources:** None

**Recodes:** None

**Keywords:** injury; poisoning; ICD-9-CM

**Notes:**
ICD-9-CM codes were assigned according to responses given to questions FIJ.060_00.000 to FIJ.079_00.000 and FIJ.109_00.000 to FIJ.160_02.000. See the ICD-9-CM Code Book for text descriptions of ICD-9-CM codes.
2009 NATIONAL HEALTH INTERVIEW SURVEY
Episode
injpoiep : Injuries & Poisoning
PUBLIC USE
Document Version Date: 10-Mar-11

<table>
<thead>
<tr>
<th>Question ID:</th>
<th>FIJ.181_03.000 R16</th>
<th>Instrument Variable Name:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Final Documentation Name: ICD9_3</td>
</tr>
</tbody>
</table>

Universe: 
((’01’ <= MTFINJ3M <= ’91’) or (’01’ <= MTFPOI3M <= ’91’)) and there were more than two injuries or poisonings during the episode

Description: All medically-consulted injury/poisoning episodes that reportedly occurred during the past 3 months based on responses to family level questions FIJ.010_01.000 to FIJ.028_00.000 that had more than two injuries or poisonings during the episode

Sources: None
Recodes: None
Keywords: injury; poisoning; ICD-9-CM
Notes: ICD-9-CM codes were assigned according to responses given to questions FIJ.060_00.000 to FIJ.079_00.000 and FIJ.109_00.000 to FIJ.160_02.000. See the ICD-9-CM Code Book for text descriptions of ICD-9-CM codes.

ICD-9-CM diagnosis code
ICD-9-CM codes

<table>
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<tr>
<th>Question ID:</th>
<th>FIJ.181_04.000 R17</th>
<th>Instrument Variable Name:</th>
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</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Final Documentation Name: ICD9_4</td>
</tr>
</tbody>
</table>

Universe: 
((’01’ <= MTFINJ3M <= ’91’) or (’01’ <= MTFPOI3M <= ’91’)) and there were more than three injuries or poisonings during the episode

Description: All medically-consulted injury/poisoning episodes that reportedly occurred during the past 3 months based on responses to family level questions FIJ.010_01.000 to FIJ.028_00.000 that had more than three injuries or poisonings during the episode

Sources: None
Recodes: None
Keywords: injury; poisoning; ICD-9-CM
Notes: ICD-9-CM codes were assigned according to responses given to questions FIJ.060_00.000 to FIJ.079_00.000 and FIJ.109_00.000 to FIJ.160_02.000. See the ICD-9-CM Code Book for text descriptions of ICD-9-CM codes.

ICD-9-CM diagnosis code
ICD-9-CM codes
**Question ID:** FIJ.181_05.000 R18  
**Instrument Variable Name:**  
**Final Documentation Name:** ICD9_5

**Universe:** 
\((01 \leq MTFINJ3M \leq 91) \text{ or } (01 \leq MTFPOI3M \leq 91)\) and there were more than four injuries or poisonings during the episode

**Description:** All medically-consulted injury/poisoning episodes that reportedly occurred during the past 3 months based on responses to family level questions FIJ.010_01.000 to FIJ.028_00.000 that had more than four injuries or poisonings during the episode

**Sources:** None

**Recodes:** None

**Keywords:** injury; poisoning; ICD-9-CM

**Notes:** ICD-9-CM codes were assigned according to responses given to questions FIJ.060_00.000 to FIJ.079_00.000 and FIJ.109_00.000 to FIJ.160_02.000. See the ICD-9-CM Code Book for text descriptions of ICD-9-CM codes.

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**Question ID:** FIJ.181_06.000 R19  
**Instrument Variable Name:**  
**Final Documentation Name:** ICD9_6

**Universe:** 
\((01 \leq MTFINJ3M \leq 91) \text{ or } (01 \leq MTFPOI3M \leq 91)\) and there were more than five injuries or poisonings during the episode

**Description:** All medically-consulted injury/poisoning episodes that reportedly occurred during the past 3 months based on responses to family level questions FIJ.010_01.000 to FIJ.028_00.000 that had more than five injuries or poisonings during the episode

**Sources:** None

**Recodes:** None

**Keywords:** injury; poisoning; ICD-9-CM

**Notes:** ICD-9-CM codes were assigned according to responses given to questions FIJ.060_00.000 to FIJ.079_00.000 and FIJ.109_00.000 to FIJ.160_02.000. See the ICD-9-CM Code Book for text descriptions of ICD-9-CM codes.
### Question ID: FIJ.181_07.000 R20

**Instrument Variable Name:**
Final Documentation Name: ICD9_7

**Universe:**
\[ (('01' \leq MTFINJ3M \leq '91') \text{ or } ('01' \leq MTFPOI3M \leq '91')) \text{ and there were more than six injuries or poisonings during the episode} \]

**Description:**
All medically-consulted injury/poisoning episodes that reportedly occurred during the past 3 months based on responses to family level questions FIJ.010_01.000 to FIJ.028_00.000 that had more than six injuries or poisonings during the episode.

**Sources:** None

**Recodes:** None

**Keywords:** injury; poisoning; ICD-9-CM

**Notes:**
ICD-9-CM codes were assigned according to responses given to questions FIJ.060_00.000 to FIJ.079_00.000 and FIJ.109_00.000 to FIJ.160_02.000. See the ICD-9-CM Code Book for text descriptions of ICD-9-CM codes.

### ICD-9-CM diagnosis code

ICD-9-CM codes

<table>
<thead>
<tr>
<th>Question ID: FIJ.181_08.000 R21</th>
<th>Instrument Variable Name:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Final Documentation Name: ICD9_8</td>
</tr>
</tbody>
</table>

**Universe:**
\[ (('01' \leq MTFINJ3M \leq '91') \text{ or } ('01' \leq MTFPOI3M \leq '91')) \text{ and there were more than seven injuries or poisonings during the episode} \]

**Description:**
All medically-consulted injury/poisoning episodes that reportedly occurred during the past 3 months based on responses to family level questions FIJ.010_01.000 to FIJ.028_00.000 that had more than seven injuries or poisonings during the episode.

**Sources:** None

**Recodes:** None

**Keywords:** injury; poisoning; ICD-9-CM

**Notes:**
ICD-9-CM codes were assigned according to responses given to questions FIJ.060_00.000 to FIJ.079_00.000 and FIJ.109_00.000 to FIJ.160_02.000. See the ICD-9-CM Code Book for text descriptions of ICD-9-CM codes.

**ICD-9-CM diagnosis code**

ICD-9-CM codes
### Question ID: FIJ.181_10.000 R25

**Instrument Variable Name:**
Final Documentation Name: ECODE_1T

**Universe:**
(‘01’ <= MTFINJ3M <= '91') or (‘01’ <= MTFPOI3M <= '91')

**Description:**
All medically-consulted injury/poisoning episodes that reportedly occurred during the past 3 months based on responses to family level questions FIJ.010_01.000 to FIJ.028_00.000

**Sources:** None

**Recodes:** ECAUS

**Keywords:** injury; poisoning; E code

**Notes:**
External cause codes were assigned according to responses given to questions FIJ.060_00.000 to FIJ.079_00.000 and FIJ.109_00.000 to FIJ.160_02.000. See the ICD-9-CM Code Book for text descriptions of E codes. This variable only includes selected 4-digit external cause of injury codes. All other 4-digit external cause of injury codes were truncated to three digits.

**ICD-9-CM external cause code**

| E800-E999 | E codes |

### Question ID: FIJ.181_20.000 R26

**Instrument Variable Name:**
Final Documentation Name: ECODE_2T

**Universe:**
(‘01’ <= MTFINJ3M <= '91') or (‘01’ <= MTFPOI3M <= '91') and there was more than one external cause for the episode

**Description:**
All medically-consulted injury/poisoning episodes that reportedly occurred during the past 3 months based on responses to family level questions FIJ.010_01.000 to FIJ.028_00.000 that had more than one external cause for the episode

**Sources:** None

**Recodes:** None

**Keywords:** injury; poisoning; E code

**Notes:**
External cause codes were assigned according to responses given to questions FIJ.060_00.000 to FIJ.079_00.000 and FIJ.109_00.000 to FIJ.160_02.000. See the ICD-9-CM Code Book for text descriptions of E codes. This variable only includes selected 4-digit external cause of injury codes. All other 4-digit external cause of injury codes were truncated to three digits.

**ICD-9-CM external cause code**

| E800-E999 | E codes |
Injuries & Poisoning

**Question ID:** FIJ.181_30.000  R27  
**Instrument Variable Name:**
**Final Documentation Name:** ECODE_3T

**Universe:**
((‘01’ <= MTFINJ3M <= ‘91’) or (‘01’ <= MTFPOI3M <= ‘91’)) and there were more than two external causes for the episode

**Description:** All medically-consulted injury/poisoning episodes that reportedly occurred during the past 3 months based on responses to family level questions FIJ.010_01.000 to FIJ.028_00.000 that had more than two external causes for the episode

**Sources:** None

**Recodes:** None

**Keywords:** injury; poisoning; E code

**Notes:**
External cause codes were assigned according to responses given to questions FIJ.060_00.000 to FIJ.079_00.000 and FIJ.109_00.000 to FIJ.160_02.000. See the ICD-9-CM Code Book for text descriptions of E codes. This variable only includes selected 4-digit external cause of injury codes. All other 4-digit external cause of injury codes were truncated to three digits.

**ICD-9-CM external cause code**

| E800-E999 | E codes |
### External Cause Codes Included in Variable ECAUS Categories Appendix – 1

#### 2009 National Health Interview Survey
Injury/Poisoning Episode File

<table>
<thead>
<tr>
<th>ECAUS Category</th>
<th>External Cause Codes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Transportation</td>
<td>E810.0 to E819.9, E958.5, E988.5, E800.3, E801.3, E802.3, E803.3, E804.3, E805.3, E806.3, E807.3, E820.6, E821.6, E822.6, E823.6, E824.6, E825.6, E826.1, E826.9, E827.1, E828.1, E829.1, E800.2, E801.2, E802.2, E803.2, E804.2, E805.2, E806.2, E807.2, E820.7, E821.7, E822.7, E823.7, E824.7, E825.7, E826.0, E827.0, E828.0, E829.0, E800.0, E801.0, E802.0, E803.0, E804.0, E805.0, E806.0, E807.0, E800.1, E801.1, E802.1, E803.1, E804.1, E805.1, E806.1, E807.1, E800.8, E801.8, E802.8, E803.8, E804.8, E805.8, E806.8, E807.8, E800.9, E801.9, E802.9, E803.9, E804.9, E805.9, E806.9, E807.9, E820.0, E821.0, E822.0, E823.0, E824.0, E825.0, E820.1, E821.1, E822.1, E823.1, E824.1, E825.1, E820.2, E821.2, E822.2, E823.2, E824.2, E825.2, E820.3, E821.3, E822.3, E823.3, E824.3, E825.3, E820.4, E821.4, E822.4, E823.4, E824.4, E825.4, E820.5, E821.5, E822.5, E823.5, E824.5, E825.5, E820.8, E821.8, E822.8, E823.8, E824.8, E825.8, E820.9, E821.9, E822.9, E823.9, E824.9, E825.9, E826.2, E826.3, E826.4, E826.5, E826.6, E826.7, E826.8, E827.2, E827.3, E827.4, E827.5, E827.6, E827.7, E827.8, E827.9, E828.2, E828.3, E828.4, E828.5, E828.6, E828.7, E828.8, E828.9, E829.2, E829.3, E829.4, E829.5, E829.6, E829.7, E829.8, E829.9, E831.0 to E831.9, E833.0 to E845.9, E958.6, E968.5, E988.6, E825, E826, E828</td>
</tr>
<tr>
<td>Fire/burn/scald related</td>
<td>E890.0 to E899, E924.0 to E924.9, E958.1, E958.2, E958.7, E961, E968.0, E968.3, E979.3, E988.1, E988.2, E988.7</td>
</tr>
</tbody>
</table>
### External Cause Codes Included in Variable ECAUS Categories Appendix – 1

2009 National Health Interview Survey  
Injury/Poisoning Episode File

<table>
<thead>
<tr>
<th>ECAUS Category</th>
<th>External Cause Codes</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Fall</strong></td>
<td>E880.0 to E886.9, E888, E888.0, E888.1, E888.8, E888.9, E957.0 to E957.9, E968.1, E987.0 to E987.9</td>
</tr>
<tr>
<td><strong>Poisoning</strong></td>
<td>E850.0 to E869.9, E950.0 to E952.9, E962.0 to E962.9, E980.0 to E982.9, E972</td>
</tr>
<tr>
<td><strong>Overexertion/strenuous movements</strong></td>
<td>E927.0, E927.1, E927.2, E927.3, E927.4, E927.8, E927.9</td>
</tr>
<tr>
<td><strong>Struck by object or person</strong></td>
<td>E916 to E917.9, E960.0, E968.2, E973, E975</td>
</tr>
<tr>
<td><strong>Animal or insect bite</strong></td>
<td>E905.0, E905.1, E905.2, E905.3, E905.4, E905.5, E905.6, E905.9, E906.0, E906.1, E906.2, E906.3, E906.4, E906.5, E906.9</td>
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<tr>
<td><strong>Cut/pierce</strong></td>
<td>E920.0 to E920.9, E956, E966, E986, E974</td>
</tr>
<tr>
<td><strong>Machinery</strong></td>
<td>E919.0 to E919.9</td>
</tr>
<tr>
<td><strong>Other</strong></td>
<td>All E codes not listed above</td>
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</table>