		A dult Alto	2012 NHIS Qu			
		Auunt Ante		Version Date: 30-	7 And Alternative Medicine May-13	
Question ID:	ALT.00	_00.000 Instru	ment Variable Name:	PROV1	QuestionnaireFileName:	Adult CAM
QuestionText:	? [F1]				
	can b	e a general doct		a nurse practitione	nows you well and is familiar with y er, a physician's assistant, or another ealth care provider?	
1	Yes					
2	No					
7	Refu					
9	Don	t know				
UniverseTex	at:	Sample adults	18+ who have a usual	place for healthcar	re	
SkipInstruct	tions:	<1> [goto PRC <2,R,D> [goto				
Question ID:	ALT.002	2_00.000 Instru	ment Variable Name:	PROVTYP	QuestionnaireFileName:	Adult CAM
QuestionText:	? [F1]				
	What	type of provide	r(s) is it?			
	*Rea	d categories if n	ecessary.			

*Enter all that apply, separate with commas.

1 Medical doctor (M.D., D.O.) including specialists

2 Nurse, Nurse Practitioner, or Physician Assistant

3 Chiropractor, Acupuncturist, or Naturopath

4 Other

7 Refused

9 Don't know

UniverseText: Sample adults 18+ who have a personal health care provider

SkipInstructions: <1-4,R,D> [goto PROVUSPL]

Adult Alternative Health/Complementary And Alternative Medicine

Our offers ID:	ALT 002	00.000 I		DDOLUGDI	O	
Question ID:	_	00.000 Instrum	ent Variable Name:	PROVUSPL	QuestionnaireFileName:	Adult CAM
QuestionText:	? [F1]					
	Earlier	you said you ha	ve a place where you	u usually go when you	u are sick. What type of provider	(s) do you see there?
	*Read	categories if nec	essary.			
	*Enter	all that apply, se	parate with commas	l.		
1			D.O.) including spe			
2			ner, or Physician As			
3	-	oractor, Acupunc	turist, or Naturopath	1		
4	Other	1				
7 9	Refuse Don't l					
UniverseTex	at: 5	Sample adults 18	+ who have a usual	place for healthcare		
			1-5 [goto PROVRT KND =R,D,6,`` [go			
Question ID:	ALT.004_	00.000 Instrum	ent Variable Name:	PROVRTN	QuestionnaireFileName:	Adult CAM
QuestionText:	? [F1]					
	Earlier there?	you said you ha	ve a place where you	u usually go when you	u need routine care. What type of	provider(s) do you see
	*Read	categories if nec	essary.			
	*Enter	all that apply, se	parate with commas	i.		
1	Medic	al doctor (M.D.,	D.O.) including spe	cialists		
2	Nurse,	Nurse Practition	ner, or Physician As	sistant		
3	-	practor, Acupunc	turist, or Naturopath	1		
4	Other					
7	Refuse					
9	Don't	know				
UniverseTex	it: S	Sample adults 18	+ who have a routin	e place for healthcare	e that is different from a usual sou	irce for sick care
SkipInstruct	tions:	<1-4,R,D> [goto	COM_USE]			

			2012 NHIS Qu	estionnaire -	Adult CAM	
		Adult	Alternative Health/Co	mplementary	And Alternative Medicine	
			Document V	Version Date: 30-1	May-13	
Question ID:	ALT.010	_00.000	Instrument Variable Name:	COM_USE	QuestionnaireFileName:	Adult CAM
QuestionText:	? [F1]					
	Now]	am goin	g to ask you about some heal	th services you ma	y have used.	
	Have	you EVE	R used any of these therapies	for your health?		
	Chiro	practic (k	ye-row-PRAK-tik) or Osteop	athic Manipulation	1?	
1	Yes					
2	No					
7	Refu	sed				
9	Don'	t know				
UniverseTex	xt:	Sample	adults 18+			
SkipInstruct	tions:		to COM_EVER] [goto MAS_USE]			

Question ID:	ALT.011_00.0	00 Ins	strument Variable Name:	COM_EVER	QuestionnaireFileName:	Adult CAM
QuestionText:	? [F1]					
	Have you yourself?	VER s	een a provider or practit	ioner for chiropractic (k	xye-row-PRAK-tik) or osteopath	ic manipulation for
1	Yes					
2	No					
7	Refused					
9	Don't kno	V				
UniverseTex	at: Sam	ole adu	lts 18+ who have ever us	sed chiropractic (kye-ro	w-PRAK-tik) or osteopathic ma	nipulation
SkipInstruct			COM_USEM] pto COM_USM]			

		-	uestionnaire - A		
	Ad		Complementary An Version Date: 30-May	nd Alternative Medicine	
Question ID:	ALT 012 00 00)() Instrument Variable Name:	COM USEM	QuestionnaireFileName:	Adult CAM
	_		COM_OSEM	Questionnairer ner anner	Adult CAW
QuestionText:	?[F1]				
	DURING T	HE PAST 12 MONTHS, did yo	ou see a practitioner for	chiropractic or osteopathic man	nipulation?
1	Yes				
2	No				
7	Refused				
9	Don't know	7			
UniverseTex	xt: Samp	le adults 18+ who have ever se	en a practitioner for ch	iropractic or osteopathic manipu	ulation
SkipInstruct		goto COM_TYPE] D> [goto COM_USM]			
Question ID:	ALT.013_00.00)() Instrument Variable Name:	COM_USM	QuestionnaireFileName:	Adult CAM
QuestionText:	? [F1]				
	DURING T	HE PAST 12 MONTHS, did yo	ou use chiropractic or c	steopathic manipulation?	
1	Yes				
2	No				
7	Refused				
9	Don't know	7			
UniverseTex		le adults 18+ who have ever us not seen one in the past 12 mor		athic manipulation but have nev	er seen a practitioner or
SkipInstruc	tions: <1,2,	R,D> [goto MAS_USE]			

Adult Alternative Health/Complementary And Alternative Medicine

Question ID:	ALT.014_00.000	Instrument Variable Name:	COM_TYPE	QuestionnaireFileName:	Adult CAM
QuestionText:	Which did you s	see, a chiropractor or an oste	eopathic physician?		
1	Chiropractor				
2	Osteopathic phy	ysician			
3	Both				
7	Refused				
9	Don't know				
UniverseTex	xt: Sample a	dults 18+ who have seen a p	practitioner for chirop	ractic or osteopathic manipulatio	n in the past 12 months
SkipInstruc	else [g <2,R,D>	OVTYP=3 [goto COM_PH oto COM_PTIM] [goto COM_PTIM] o COM_PMST]	ICP];		
Question ID:	ALT.015_00.000	Instrument Variable Name:	COM_PMST	QuestionnaireFileName:	Adult CAM
QuestionText:	DURING THE	PAST 12 MONTHS, which	practitioner did you s	ee the most?	
1	Chiropractor				
2	Osteopathic phy	ysician			
7	Refused				
9	Don't know				
UniverseTex	xt: Sample a	dults 18+ who have seen bo	th a chiropractor and	osteopathic physician in the past	12 months
SkipInstruc	else [g	COVTYP=3 [goto COM_PH toto COM_PTIM] [goto COM_PTIM]	[CP];		

Adult Alternative Health/Complementary And Alternative Medicine

uestion ID:	ALT.016_00.000 Instrument Variable Name: COM_PHCP QuestionnaireFileName: Adult CAM
uestionText:	Was this the personal health care provider you mentioned earlier?
1	Yes
2	No
7	Refused
9	Don't know
UniverseTex	t: Sample adults 18+ who see a chiropractor for their personal health care provider and who have seen a chiropractor in the past 12 months
SkipInstruct	ions: <1,2,R,D> [goto COM_PTIM]
uestion ID:	ALT.017_00.000 Instrument Variable Name: COM_PTIM QuestionnaireFileName: Adult CAM
uestionText:	Do you know the exact number of times you saw a practitioner for [fill1: chiropractic/osteopathic] manipulation in the past 12 months?
1	Yes
2	No
7	Refused
9	Don't know
UniverseTex	t: Sample adults 18+ who have seen a practitioner for chiropractic or osteopathic manipulation in the past 12 months
SkipInstruct	ions: <1> [goto COM_TMNO] <2,R,D> [goto COM_TMCT]
uestion ID:	ALT.018_00.000 Instrument Variable Name: COM_TMNO QuestionnaireFileName: Adult CAM
uestionText:	DURING THE PAST 12 MONTHS, how many times did you see a practitioner for [fill1: chiropractic/osteopathic] manipulation?
	*Enter '52' for 52 or more times.
01-52	1-52
97	Refused
99	Don't know
UniverseTex	
SkipInstruct	ions: <1-52,R,D> [goto COM_HIC]

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2012 NHIS Questionnaire -	Adult CAM

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Document Version Date: 30-May-13

	ALT.019_00.000	Instrument Variable Name:	COM_TMCT	QuestionnaireFileName:	Adult CAM
QuestionText:		E PAST 12 MONTHS, ABOU steopathic] manipulation? Wo		d you see a practitioner for [fill1	:
	*Read categor	ies below.			
01	Only 1 time				
02	2-5 times				
03	6-10 times				
04	11-15 times				
05	16-20 times				
06	21-25 times				
07	More than 25	times			
97	Refused				
99	Don't know				
	05100pu	thic manipulation in the past 1	2 months of refuse the	e specifie number of times	
SkipInstruct	-	D> [goto COM_HIC]			
SkipInstruct	tions: <1-7,R,	D> [goto COM_HIC] Instrument Variable Name:	COM_HIC	QuestionnaireFileName:	Adult CAM
Question ID:	tions: <1-7,R, ALT.021_00.000 DURING THE	Instrument Variable Name:	—	QuestionnaireFileName: ng a practitioner for [fill1: chiro]	
Question ID:	tions: <1-7,R, ALT.021_00.000 DURING THE	Instrument Variable Name: E PAST 12 MONTHS, were a	—		
Question ID: QuestionText:	tions: <1-7,R, ALT.021_00.000 DURING THH manipulation o	Instrument Variable Name: E PAST 12 MONTHS, were a	—		
Question ID: QuestionText: 1	tions: <1-7,R, ALT.021_00.000 DURING THE manipulation of Yes	Instrument Variable Name: E PAST 12 MONTHS, were a	—		
Question ID: QuestionText: 1 2	tions: <1-7,R, ALT.021_00.000 DURING THI manipulation of Yes No	Instrument Variable Name: E PAST 12 MONTHS, were a	—		

<1> [goto COM_HICA] <2,R,D> [goto COM_HIT] SkipInstructions:

Adult Alternative Health/Complementary And Alternative Medicine

Question ID: A	LT.022_00.000 Instrument Variable Name: COM_HICA QuestionnaireFileName: Adult CAM
QuestionText:	DURING THE PAST 12 MONTHS, did your health insurance cover all of the cost or just some of the cost of seeing a practitioner for [fill1: chiropractic/osteopathic] manipulation?
1	All of the cost
2	Some of the cost
7	Refused
9	Don't know
UniverseText:	Sample adults 18+ whose visit(s) to a practitioner for chiropractic or osteopathic manipulation in the past 12 months were (at least partly) covered by health insurance
SkipInstruction	ns: <1> [goto COM_MAT] <2,R,D> [goto COM_HIT]
Question ID: A	LT.023_00.000 Instrument Variable Name: COM_HIT QuestionnaireFileName: Adult CAM
QuestionText:	Do you know the total amount you paid for seeing a practitioner for [fill1: chiropractic/osteopathic] manipulation in the past 12 months [fill2: not including the amount covered by insurance]?
1	Yes
2	No
7	Refused
9	Don't know
UniverseText:	Sample adults 18+ whose health insurance covered none or some of the cost for chiropractic or osteopathic manipulation in the past 12 months
SkipInstruction	ns: <1> [goto COM_HITS] <2,R,D> [goto COM_AVGC]
Question ID: A	LT.024_00.000 Instrument Variable Name: COM_HITS QuestionnaireFileName: Adult CAM
QuestionText:	What is the total amount you paid for seeing a practitioner for [fill1: chiropractic/osteopathic] manipulation in the past 12 months [fill2: not including the amount covered by insurance]?
	*Enter '0' for no cost or free.
00000 2000	
00000-26000	\$0-26000 B - 6 1
99997 99999	Refused Don't know
<u> </u>	Dontkhow
UniverseText:	Sample adults 18+ who know the amount they paid for chiropractic or osteopathic manipulation in the past 12 months
SkipInstruction	ns: <0-26000,R,D> [goto COM_MAT]
	Verify if over \$1000

Adult Alternative Health/Complementary And Alternative Medicine

	ALT.025_00.010 Instrument Variable Name: COM_AVGC QuestionnaireFileName: Adult CAM
QuestionText:	Do you know the average amount you paid for each visit for [fill1: chiropractic/osteopathic] manipulation {fill2: not including the amount covered by insurance} in the past 12 months?
1	Yes
2	No
7	Refused
9	Don't know
UniverseTex	t: Sample adults 18+ who don't know the total amount they paid for chiropractic or osteopathic manipulation in the past 12 months
SkipInstructi	ions: <1> [goto COM_AVGS] <2,R,D> [goto COM_MAT]
Question ID:	ALT.026 00.000 Instrument Variable Name: COM AVGS QuestionnaireFileName: Adult CAM
-	
QuestionText:	On average, how much did you pay out-of-pocket for each visit to a practitioner for [fill1: chiropractic/osteopathic] manipulation?
	Enter '0' if no cost or free
000-500	\$0-500
997	Refused
997 999	Refused Don't know
	Don't know
999 UniverseText	 Don't know Sample adults 18+ who know the average per visit they paid for chiropractic or osteopathic manipulation in the past 12 months
999	 Don't know Sample adults 18+ who know the average per visit they paid for chiropractic or osteopathic manipulation in the past 12 months
999 UniverseText SkipInstructi	Don't know t: Sample adults 18+ who know the average per visit they paid for chiropractic or osteopathic manipulation in the past 12 months tions: <0-500,R,D> [goto COM_MAT]
999 UniverseText SkipInstructi	 Don't know Sample adults 18+ who know the average per visit they paid for chiropractic or osteopathic manipulation in the past 12 months
999 UniverseText SkipInstructi Question ID:	Don't know t: Sample adults 18+ who know the average per visit they paid for chiropractic or osteopathic manipulation in the past 12 months tions: <0-500,R,D> [goto COM_MAT]
999 UniverseText SkipInstructi Question ID:	Don't know t: Sample adults 18+ who know the average per visit they paid for chiropractic or osteopathic manipulation in the past 12 months ions: <0-500,R,D> [goto COM_MAT] ALT.027_00.000 Instrument Variable Name: COM_MAT QuestionnaireFileName: Adult CAM DURING THE PAST 12 MONTHS, did you buy a self-help book or other materials such as a DVD, CD, or Video to learn about [fill1: chiropractic/osteopathic] manipulation? Yes
999 UniverseText SkipInstructi Question ID: QuestionText:	Don't know t: Sample adults 18+ who know the average per visit they paid for chiropractic or osteopathic manipulation in the past 12 months ions: <0-500,R,D> [goto COM_MAT] ALT.027_00.000 Instrument Variable Name: COM_MAT QuestionnaireFileName: Adult CAM DURING THE PAST 12 MONTHS, did you buy a self-help book or other materials such as a DVD, CD, or Video to learn about [fill1: chiropractic/osteopathic] manipulation? Yes No
999 UniverseText SkipInstructi Question ID: QuestionText: 1 2 7	Don't know t: Sample adults 18+ who know the average per visit they paid for chiropractic or osteopathic manipulation in the past 12 months ions: <0-500,R,D> [goto COM_MAT] ALT.027_00.000 Instrument Variable Name: COM_MAT QuestionnaireFileName: Adult CAM DURING THE PAST 12 MONTHS, did you buy a self-help book or other materials such as a DVD, CD, or Video to learn about [fill1: chiropractic/osteopathic] manipulation? Yes No Refused
999 UniverseText SkipInstructi Question ID: QuestionText: 1 2	Don't know t: Sample adults 18+ who know the average per visit they paid for chiropractic or osteopathic manipulation in the past 12 months ions: <0-500,R,D> [goto COM_MAT] ALT.027_00.000 Instrument Variable Name: COM_MAT QuestionnaireFileName: Adult CAM DURING THE PAST 12 MONTHS, did you buy a self-help book or other materials such as a DVD, CD, or Video to learn about [fill1: chiropractic/osteopathic] manipulation? Yes No
999 UniverseText SkipInstructi Question ID: QuestionText: 1 2 7	Don't know t: Sample adults 18+ who know the average per visit they paid for chiropractic or osteopathic manipulation in the past 12 months ions: <0-500,R,D> [goto COM_MAT] ALT.027_00.000 Instrument Variable Name: COM_MAT QuestionnaireFileName: Adult CAM DURING THE PAST 12 MONTHS, did you buy a self-help book or other materials such as a DVD, CD, or Video to learn about [fill1: chiropractic/osteopathic] manipulation? Yes No Refused Don't know

Adult Alternative Health/Complementary And Alternative Medicine

Question ID:	ALT.028_0	00.000	Instrument	Variable Name:	COM_MATC	QuestionnaireFileName:	Adult CAM
QuestionText:	About h	low mu	h did you p	bay for these man	terials in the past 12 mc	onths?	
	*Enter '	200' for	\$200 or mo	ore.			
000-200	\$0-200	1					
997	Refuse	d					
999	Don't k	now					
UniverseText		ample a nonths	dults 18+ v	who have bought	self-help materials for	chiropractic or osteopathic man	ipulation in the past 12
SkipInstructio	ons: <	0-200,F	,D>[goto]	MAS_USE]			
Question ID:	ALT.037_(? [F1]	00.000	Instrument	Variable Name:	MAS_USE	QuestionnaireFileName:	Adult CAM
	? [F1]				MAS_USE es for your health?	QuestionnaireFileName:	Adult CAM
	? [F1]	ou EVE			-	QuestionnaireFileName:	Adult CAM
	? [F1] Have yo	ou EVE			-	QuestionnaireFileName:	Adult CAM
QuestionText:	? [F1] Have yo Massag	ou EVE			-	QuestionnaireFileName:	Adult CAM
QuestionText: 1	? [F1] Have yo Massag Yes No Refuse	ou EVE e? d			-	QuestionnaireFileName:	Adult CAM
QuestionText: 1 2	? [F1] Have yo Massag Yes No	ou EVE e? d			-	QuestionnaireFileName:	Adult CAM
QuestionText: 1 2 7	? [F1] Have yo Massag Yes No Refuse Don't k	ou EVE e? d cnow			-	QuestionnaireFileName:	Adult CAM

Adult Alternative Health/Complementary And Alternative Medicine

Question ID:	ALT.038_	00.000	Instrument Var	Table Malle:	MAS_EVER	QuestionnaireFileName:	Adult CAM
QuestionText:	? [F1]						
	Have y	ou EVE	R seen a provid	ler or practitio	oner for massage for	yourself?	
1	Yes						
2	No						
7	Refuse	ed					
9	Don't	know					
UniverseTex	t:	Sample	dults 18+ who	have ever use	ed massage		
SkipInstruct			o MAS_USEM				
		~2, K ,D>	[goto MAS_U	SMJ			
		~2,K,D>	[goto MAS_U	SMJ			
		-2,K,D-	[goto MAS_U	SMJ			
Question ID:			[goto MAS_U Instrument Var	-	MAS_USEM	QuestionnaireFileName:	Adult CAM
Question ID: QuestionText:				-	MAS_USEM	QuestionnaireFileName:	Adult CAM
	ALT.039_ ?[F1]	00.000	Instrument Var	iable Name:	MAS_USEM u see a practitioner f		Adult CAM
	ALT.039_ ?[F1]	00.000	Instrument Var	iable Name:			Adult CAM
QuestionText:	ALT.039_ ?[F1] DURIN	00.000	Instrument Var	iable Name:			Adult CAM
QuestionText: 1	ALT.039_ ?[F1] DURIN Yes	00.000 IG THE	Instrument Var	iable Name:			Adult CAM
QuestionText: 1 2	ALT.039_ ?[F1] DURIN Yes No	00.000 IG THE	Instrument Var	iable Name:			Adult CAM
QuestionText: 1 2 7	ALT.039_ ?[F1] DURIN Yes No Refuse Don't	00.000 IG THE ed snow	Instrument Var	iable Name: NTHS, did yo		or massage?	Adult CAM

Adult Alternative Health/Complementary And Alternative Medicine

Question ID:	ALT.040_00).000 Instrumen	t Variable Name:	MAS_USM	QuestionnaireFileName:	Adult CAM
QuestionText:	? [F1]					
	DURING	G THE PAST 12	MONTHS, did you	u use massage?		
1	Yes					
2	No					
7	Refused					
9	Don't kr	low				
UniverseTex		mple adults 18+ months	who have ever use	ed massage but have	never seen a practitioner or have i	not seen one in the past
SkipInstruct	tions: <1	,2,R,D> [goto A	CU_USE]			
Question ID:	ALT.041_00).000 Instrumen	t Variable Name:	MAS_PTIM	QuestionnaireFileName:	Adult CAM
QuestionText:	Do you k	now the exact n	umber of times you	ı saw a practitioner f	or massage in the past 12 months?)
1	Yes					
2	No					
7	Refused					
9	Don't kr	low				
UniverseTex	at: Sa	mple adults 18+	who have seen a p	ractitioner for massa	ge in the past 12 months	
SkipInstruct		> [goto MAS_T 2,R,D> [goto MA				
Question ID:	ALT.042_00).000 Instrumen	t Variable Name:	MAS_TMNO	QuestionnaireFileName:	Adult CAM
QuestionText:	DURING	G THE PAST 12	MONTHS, how m	any times did you se	e a practitioner for massage?	
	*Enter '5	2' for 52 or more	times.			
01-52	1-52					
97	Refused					
99	Don't kr	low				
UniverseTex	at: Sa	mple adults 18+	who know the num	nber of times they ha	we seen a practitioner for massage	e in the past 12 months
SkipInstruct	tions: <1	-52,R,D> [goto]	MAS_HIC]			

	2012 NHIS Questionnaire - Adult CAM						
	Adult Alternative Health/Complementary And Alternative Medicine						
Document Version Date: 30-May-13							
Juestion ID:	ALT.043_00.000 Instrument Variable Name: MAS_TMCT QuestionnaireFileName: Adult CAM						
JuestionText:	DURING THE PAST 12 MONTHS, ABOUT how many times did you see a practitioner for massage? Would you say						
	*Read categories below.						
01	Only 1 time						
02	2-5 times						
03	6-10 times						
04	11-15 times						
05	16-20 times						
06	21-25 times						
07	More than 25 times						
97	Refused						
99	Don't know						
UniverseTex	t: Sample adults 18+ who don't know the specific number of times they have seen a practitioner for massage in the past 12 months or refuse the specific number of times						
SkipInstructi	ions: <1-7,R,D> [goto MAS_HIC]						

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Question ID:	ALT.044_00.00	() Instrument Variable Name:	MAS_HIC	QuestionnaireFileName:	Adult CAM
QuestionText:	DURING TH insurance?	HE PAST 12 MONTHS, were a	any of the costs of se	eing a practitioner for massage cov	vered by health
1	Yes				
2	No				
7	Refused				
9	Don't know				
UniverseText	t: Sampl	e adults 18+ who have seen a p	practitioner for massa	age in the past 12 months	
SkipInstructi		goto MAS_HICA] D> [goto MAS_HIT]			

Adult Alternative Health/Complementary And Alternative Medicine

Question ID:	ALT.045_00.000 Instrument Variable Name: MAS_HICA QuestionnaireFileName: Adult CAM
QuestionText:	DURING THE PAST 12 MONTHS, did your health insurance cover all of the cost or just some of the cost of seeing a practitioner for massage?
1	All of the cost
2	Some of the cost
7	Refused
9	Don't know
UniverseTex	Sample adults 18+ whose visit(s) to a practitioner for massage in the past 12 months were (at least partly) covered by health insurance
SkipInstructi	ons: <1> [goto MAS_MAT] <2,R,D> [goto MAS_HIT]
Question ID: QuestionText:	ALT.046_00.000 Instrument Variable Name: MAS_HIT QuestionnaireFileName: Adult CAM Do you know the total amount you paid for seeing a practitioner for massage in the past 12 months [fill1: not including
2	the amount covered by insurance]?
1	Yes
2	No
7	Refused
9	Don't know
UniverseTex	Sample adults 18+ whose health insurance covered none or some of the cost for massage in the past 12 months
SkipInstructi	ons: <1> [goto MAS_HITS] <2,R,D> [goto MAS_AVGC]
Question ID:	ALT.047_00.000 Instrument Variable Name: MAS_HITS QuestionnaireFileName: Adult CAM
QuestionText:	What is the total amount you paid for seeing a practitioner for massage in the past 12 months [fill1: not including the amount covered by insurance]?
	*Enter '0' for no cost or free.
00000-26000	\$0-26000
99997	Refused
99999	Don't know
UniverseTex	Sample adults 18+ who know the amount they paid for massage in the past 12 months
SkipInstruct	ons: <0-26000,R,D> [goto MAS_MAT]
Soft Edit:	Verify if over \$1000

Adult Alternative Health/Complementary And Alternative Medicine

	ALT.048_	00.000	Instrument Variable Nam	ne: MAS_AVGC	QuestionnaireFileName:	Adult CAM
uestionText:			he average amount you p he past 12 months?	baid for each visit for mass	age {fill1: not including the amo	ount covered by
1	Yes					
2	No					
7	Refus	ed				
9	Don't	know				
UniverseTe	xt:	Sample	adults 18+ who don't kno	ow the total amount they pa	aid for massage in the past 12 m	onths
SkipInstruc			to MAS_AVGS] ≻ [goto MAS_MAT]			
uestion ID:	ALT.049_	00.000	Instrument Variable Nam	ne: MAS_AVGS	QuestionnaireFileName:	Adult CAM
	On ave	erage, ho	ow much did you pay out	_	QuestionnaireFileName: a practitioner for massage?	Adult CAM
Question ID: QuestionText:	On ave Enter '	erage, ho 0' if no c		_		Adult CAM
QuestionText: 000-500	On ave Enter ' \$0-50	erage, ho 0' if no c 0	ow much did you pay out	_		Adult CAM
JuestionText:	On ave Enter '	erage, ho 0' if no c 0 ed	ow much did you pay out	_		Adult CAM
QuestionText: 000-500 997	On ave Enter ' \$0-50 Refus Don't	erage, ho 0' if no c 0 ed know	ow much did you pay out- cost or free	-of-pocket for each visit to		

QuestionText:	DURING THE PAST 12 MONTHS, did you buy a self-help book or other materials such as a DVD, CD, or Video to learn about massage?					
1	Yes					
2	No					
7	Refused					
9	Don't know					
UniverseText:	Sample adults 18+ who have seen a practitioner for massage in the past 12 months					
SkipInstruction	<pre>\$\$ <1> [goto MAS_MATC] <2,R,D> [goto ACU_USE]</pre>					

Adult Alternative Health/Complementary And Alternative Medicine

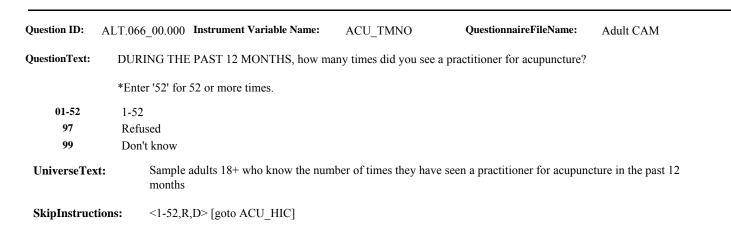
Question ID:	ALT.051	_00.000	Instrument Variable Name:	MAS_MATC	QuestionnaireFileName:	Adult CAM
QuestionText:	Abou	t how mu	ich did you pay for these mate	erials in the past 12 r	nonths?	
	*Ente	er '200' fo	r \$200 or more.			
000-200 997 999	\$0-2 Refu Don'					
UniverseTex	xt:	Sample	adults 18+ who have bought	self-help materials for	or massage in the past 12 months	
SkipInstruct	tions:	<0-200,	R,D> [goto ACU_USE]			
Question ID:	ALT.061	_00.000	Instrument Variable Name:	ACU_USE	QuestionnaireFileName:	Adult CAM
QuestionText:	? [F1]]				
	Have	you EVE	ER used any of these therapies	s for your health?		
	Acup	uncture (AK-you-punk-chur)?			
1	Yes					
2	No					
7	Refu					
9	Don'	t know				
UniverseTex	xt:	Sample	adults 18+			
SkipInstruct	tions:		to ACU_EVER] >[goto EHT_USE]			

2012 NHIS Questionnaire - Adult CAM Adult Alternative Health/Complementary And Alternative Medicine Document Version Date: 30-May-13								
Question ID: ALT.062_00.000 Instrument Variable Name: ACU_EVER QuestionnaireFileName: Adult CAM								
QuestionText:	? [F1]	0.000		ACO_LVER		Addit CAN		
	Have yo	u EVER seen a	a provider or practitic	oner for acupuncture	for yourself?			
1	Yes							
2	No							
7	Refused	l						
9	Don't k	now						
UniverseTex	xt: Sa	Sample adults 18+ who have ever used acupuncture						
SkipInstruc		> [goto ACU 2,R,D>[goto A						
Question ID:	ALT.063_0	0.000 Instrun	ent Variable Name:	ACU_USEM	QuestionnaireFileName:	Adult CAM		
QuestionText:	?[F1]							
	DURIN	G THE PAST	12 MONTHS, did yo	u see a practitioner f	for acupuncture?			
1	Yes							
2	No							
7	Refused	l						
9	Don't k	now						
UniverseTe	xt: Sa	-	8+ who have ever see	en a practitioner for a	acupuncture			

SkipInstructions: <1>[goto ACU_PTIM] <2,R,D> [goto ACU_USM]

			2012 NHIS Q	uestionnaire - A	Adult CAM		
Adult Alternative Health/Complementary And Alternative Medicine Document Version Date: 30-May-13							
			Document	version Date: 30-Mi	ay-13		
Question ID:	ALT.064	_00.000	Instrument Variable Name:	ACU_USM	QuestionnaireFileName:	Adult CAM	
QuestionText:	? [F1]	l					
	DUR	ING THE	E PAST 12 MONTHS, did yo	ou use acupuncture?			
1	Yes						
2	No						
7	Refu	sed					
9	Don'	t know					
UniverseTe	xt:	Sample past 12		ed acupuncture but h	ave never seen a practitioner or h	ave not seen one in the	
SkipInstruc	tions:	<1,2,R,1	D> [goto EHT_USE]				
Question ID:	A I T 065		Instrument Variable Name:		QuestionnaireFileName:	Adult CAM	
Question ID.	AL1.003	_00.000	mstrument variable Name.	ACU_PTIM	Questionnan er nervanie.	Adult CAM	
QuestionText:	Do yo	ou know	the exact number of times yo	u saw a practitioner f	for acupuncture in the past 12 mon	nths?	
1	Yes						
2	No						

2	No
7	Refused
9	Don't know
UniverseText:	Sample adults 18+ who have seen a practitioner for acupuncture in the past 12 months
SkipInstruction	s: <1> [goto ACU_TMNO] <2,R,D> [goto ACU_TMCT]



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	2012 NHIS Questionnaire - Adult CAM						
	Adult Alternative Health/Complementary And Alternative Medicine						
	Document Version Date: 30-May-13						
Question ID:	ALT.067_00.000 Instrument Variable Name: ACU_TMCT QuestionnaireFileName: Adult CAM						
QuestionText:	DURING THE PAST 12 MONTHS, ABOUT how many times did you see a practitioner for acupuncture? Would you say						
	*Read categories below.						
01	Only 1 time						
02	2-5 times						
03	6-10 times						
04	11-15 times						
05	16-20 times						
06	21-25 times						
07	More than 25 times						
97	Refused						
99	Don't know						
UniverseTex	xt: Sample adults 18+ who don't know the specific number of times they have seen a practitioner for acupuncture in the past 12 months or refuse the specific number of times						
SkipInstruct	tions: <1-7,R,D> [goto ACU_HIC]						
Question ID:	ALT.068_00.000 Instrument Variable Name: ACU_HIC QuestionnaireFileName: Adult CAM						

QuestionText:	DURING THE PAST 12 MONTHS, were any of the costs of seeing a practitioner for acupuncture covered by health insurance?
1	Yes
2	No
7	Refused
9	Don't know

UniverseText: Sample adults 18+ who have seen a practitioner for acupuncture in the past 12 months

SkipInstructions: <1> [goto ACU_HICA] <2,R,D> [goto ACU_HIT]

Adult Alternative Health/Complementary And Alternative Medicine

Question ID:	ALT.069_00.000 Instrument Variable Name: ACU_HICA QuestionnaireFileName: Adult CAM			
QuestionText:	DURING THE PAST 12 MONTHS, did your health insurance cover all of the cost or just some of the cost of seeing a practitioner for acupuncture?			
1	All of the cost			
2	Some of the cost			
7	Refused			
9	Don't know			
UniverseText: Sample adults 18+ whose visit(s) to a practitioner for acupuncture in the past 12 months were (at leas covered by health insurance				
SkipInstructi	ons: <1> [goto ACU_MAT] <2,R,D> [goto ACU_HIT]			
Question ID: QuestionText:	ALT.070_00.000 Instrument Variable Name: ACU_HIT QuestionnaireFileName: Adult CAM Do you know the total amount you paid for seeing a practitioner for acupuncture in the past 12 months [fill1: not			
Č	including the amount covered by insurance]?			
1	Yes			
2	No			
7	Refused			
9	Don't know			
UniverseText	: Sample adults 18+ whose health insurance covered none or some of the cost for acupuncture in the past 12 months			
SkipInstructi	ons: <1> [goto ACU_HITS] <2,R,D> [goto ACU_AVGC]			
Question ID:	ALT.071_00.000 Instrument Variable Name: ACU_HITS QuestionnaireFileName: Adult CAM			
QuestionText:	What is the total amount you paid for seeing a practitioner for acupuncture in the past 12 months [fill1: not including the amount covered by insurance]?			
	*Enter '0' for no cost or free.			
00000-26000	\$0-26000			
99997	Refused			
99999	Don't know			
UniverseText	: Sample adults 18+ who know the amount they paid for acupuncture in the past 12 months			
SkipInstructi	ons: <0-26000,R,D> [goto ACU_MAT]			
Soft Edit:	Verify if over \$1000			

Adult Alternative Health/Complementary And Alternative Medicine

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Question ID:	ALT.072_00.0	00 Instrument Variable Name	ACU_AVGC	QuestionnaireFileName:	Adult CAM
QuestionText:		w the average amount you pa in the past 12 months?	id for each visit for acup	uncture {fill1: not including the	amount covered by
1	Yes				
2	No				
7	Refused				
9	Don't know	V			
UniverseText	t: Samp	ole adults 18+ who don't know	the total amount they p	aid for acupuncture in the past 1	2 months
SkipInstructi		[goto ACU_AVGS] ,D> [goto ACU_MAT]			
Question ID:	ALT.073_00.0	00 Instrument Variable Name	: ACU_AVGS	QuestionnaireFileName:	Adult CAM
QuestionText:	0	h	f an allock for an all aviait to		
Question rext.	On average,	, now much and you pay out-o	n-pocket for each visit it	a practitioner for acupuncture?	
	Enter '0' if r	no cost or free			
000-500	\$0-500				
997	Refused				
999	Don't know	v			
UniverseText	t: Samp	ple adults 18+ who know the a	werage per visit they pai	d for acupuncture in the past 12	months
SkipInstructi	ions: <0-50	00,R,D>[goto ACU_MAT]			
Question ID:	AIT 074 00 0	00 Instrument Verichle Nor		Quantian a File Nor-	
Question ID:	AL1.0/4_00.0	00 Instrument Variable Name	: ACU_MAT	QuestionnaireFileName:	Adult CAM
QuestionText:		HE PAST 12 MONTHS, did acupuncture?	you buy a self-help book	or other materials such as a DV	D, CD, or Video to
1	Yes				
2	No				

2 No 7 Refu

Refused

9 Don't know

UniverseText: Sample adults 18+ who have seen a practitioner for acupuncture in the past 12 months

SkipInstructions: <1> [goto ACU_MATC] <2,R,D> [goto EHT_USE]

Adult Alternative Health/Complementary And Alternative Medicine

Question ID:	ALT.075_0	0.000 Instrum	ent Variable Name:	ACU_MATC	QuestionnaireFileName:	Adult CAM
QuestionText:	About he	ow much did y	ou pay for these mate	erials in the past 12	months?	
	*Enter '2	200' for \$200 or	more.			
000-200	\$0-200					
997	Refused					
999	Don't ki	now				
UniverseTex	at: Sa	ample adults 18	+ who have bought	self-help materials f	or acupuncture in the past 12 mon	ths
SkipInstruct	tions: <(0-200,R,D>[go	oto EHT_USE]			
Question ID: QuestionText:	ALT.085_0 ? [F1]	0.000 Instrum	ent Variable Name:	EHT_USE	QuestionnaireFileName:	Adult CAM
	Have yo	u EVER used a	my of these therapies	s for your health?		
	Energy I	Healing Therap	y?			
1	Yes					
2	No					
7	Refused	1				
9	Don't ki	now				
UniverseTex	at: Sa	ample adults 18	}+			
SkipInstructions:		l> [goto EHT_ 2,R,D>[goto N				

2012 NHIS Questionnaire - Adult CAM							
Adult Alternative Health/Complementary And Alternative Medicine							
			Document	Version Date: 30-Ma	ny-13		
Question ID:	ALT.086_	00.000	Instrument Variable Name:	EHT_EVER	QuestionnaireFileName:	Adult CAM	
QuestionText:	? [F1]						
	Have y	ou EVE	R seen a provider or practition	oner for energy healing	ng therapy for yourself?		
1	Yes						
2	No						
7	Refus	ed					
9	Don't	know					
UniverseTex	xt:	Sample	adults 18+ who have ever use	ed energy healing the	erapy		
SkipInstruct			to EHT_USEM] >[goto EHT_USM]				
Question ID:	_	00.000	Instrument Variable Name:	EHT_USEM	QuestionnaireFileName:	Adult CAM	
QuestionText:	?[F1]						
	DURI	NG THE	PAST 12 MONTHS, did you	u see a practitioner f	or energy healing therapy?		
1	Yes						
2	No						
7	Refus	ed					
9	Don't	know					
UniverseTex	xt:	Sample	adults 18+ who have ever see	en a practitioner for e	nergy healing therapy		
SkipInstruct			o EHT_PTIM] ▷ [goto EHT_USM]				

	2012 NHIS Questionnaire - Adult CAM	
	Adult Alternative Health/Complementary And Alternative Medicine	
	Document Version Date: 30-May-13	
Question ID:	ALT.088_00.000 Instrument Variable Name: EHT_USM QuestionnaireFileName: Adult CAM	
QuestionText:	? [F1]	
	DURING THE PAST 12 MONTHS, did you use energy healing therapy?	
1	Yes	
2	No	
7	Refused	
9	Don't know	
UniverseTe	t: Sample adults 18+ who have ever used energy healing therapy but have never seen a practitioner or have n one in the past 12 months	10t seen
SkipInstruc	ions: <1,2,R,D> [goto NAT_USE]	
Question ID:	ALT.089 00.000 Instrument Variable Name: EHT PTIM QuestionnaireFileName: Adult CAM	
QuestionText:	Do you know the exact number of times you saw a practitioner for energy healing therapy in the past 12 months?)
1	Yes	
2	No	
7	Refused	
9	Don't know	
UniverseTe	t: Sample adults 18+ who have seen a practitioner for energy healing therapy in the past 12 months	

SkipInstructions: <1> [goto EHT_TMNO] <2,R,D> [goto EHT_TMCT]

Question ID:	ALT.090	_00.000	Instrument Variable Name:	EHT_TMNO	QuestionnaireFileName:	Adult CAM
QuestionText:	DURI	NG THE	E PAST 12 MONTHS, how m	any times did you see	a practitioner for energy healing	g therapy?
	*Ente	r '52' for	52 or more times.			
01-52	1-52					
97	Refu	sed				
99	Don't	know				
UniverseTex	xt:	Sample past 12 i		nber of times they hav	e seen a practitioner for energy	healing therapy in the
SkipInstruct	tions:	<1-52,R	,D> [goto EHT_HIC]			

	2012 NHIS Questionnaire - Adult CAM						
	Adult Alternative Health/Complementary And Alternative Medicine						
	Document Version Date: 30-May-13						
Question ID:	ALT.091_00.000 Instrument Variable Name: EHT_TMCT QuestionnaireFileName: Adult CAM						
QuestionText:	t: DURING THE PAST 12 MONTHS, ABOUT how many times did you see a practitioner for energy healing therapy? Would you say						
	*Read categories below.						
01	Only 1 time						
02	2-5 times						
03	6-10 times						
04	11-15 times						
05	16-20 times						
06	21-25 times						
07	More than 25 times						
97	Refused						
99	Don't know						
UniverseTex	t: Sample adults 18+ who don't know the specific number of times they have seen a practitioner for energy healing therapy in the past 12 months or refuse the specific number of times						
SkipInstruct	ions: <1-7,R,D> [goto EHT_HIC]						

Question ID:	LT.092_00.000 Instrument Variable Name: EHT_HIC QuestionnaireFileName: Adult CAM
QuestionText:	DURING THE PAST 12 MONTHS, were any of the costs of seeing a practitioner for energy healing therapy covered by health insurance?
1	Yes
2	No
7	Refused
9	Don't know
UniverseTex	Sample adults 18+ who have seen a practitioner for energy healing therapy in the past 12 months
SkipInstruct	ns: <1> [goto EHT_HICA] <2,R,D> [goto EHT_HIT]

Adult Alternative Health/Complementary And Alternative Medicine

Document Version Date: 30-May-13

	ALT.093_00.000 Instrument Variable Name: EHT_HICA QuestionnaireFileName: Adult CAM
QuestionText:	DURING THE PAST 12 MONTHS, did your health insurance cover all of the cost or just some of the cost of seeing a practitioner for energy healing therapy?
1	All of the cost
2	Some of the cost
7	Refused
9	Don't know
UniverseText	Sample adults 18+ whose visit(s) to a practitioner for energy healing therapy in the past 12 months were (at least partly) covered by health insurance
SkipInstructi	ons: <1> [goto EHT_MAT] <2,R,D> [goto EHT_HIT]
	ALT.094_00.000 Instrument Variable Name: EHT_HIT QuestionnaireFileName: Adult CAM
QuestionText:	Do you know the total amount you paid for seeing a practitioner for energy healing therapy in the past 12 months [fill1: not including the amount covered by insurance]?
1	Yes
2	No
7	Refused
9	Don't know
UniverseText	Sample adults 18+ whose health insurance covered none or some of the cost for energy healing therapy in the past 12 months
SkipInstructi	ons: <1> [goto EHT_HITS] <2,R,D> [goto EHT_AVGC]
Question ID: QuestionText:	ALT.095_00.000 Instrument Variable Name: EHT_HITS QuestionnaireFileName: Adult CAM What is the total amount you paid for seeing a practitioner for energy healing therapy in the past 12 months [fill1: not
	including the amount covered by insurance]? *Enter '0' for no cost or free.
00000-26000	\$0-26000
99997	Refused
99999	Don't know
UniverseText	Sample adults 18+ who know the amount they paid for energy healing therapy in the past 12 months
SkipInstructi	ons: <0-26000,R,D> [goto EHT_MAT]
Soft Edit:	Verify if over \$1000

Adult Alternative Health/Complementary And Alternative Medicine

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Question ID:	ALT.096_0	0.000 Instrum	ent Variable Name:	EHT_AVGC	QuestionnaireFileName	Adult CAM
QuestionText:			ge amount you paid in the past 12 month		hergy healing therapy {fill1: not	including the amount
1	Yes					
2	No					
7	Refuse	d				
9	Don't k	now				
UniverseTex	t: S	ample adults 18	8+ who don't know t	he total amount they	y paid for energy healing therapy	y in the past 12 months
SkipInstruct		1> [goto EHT_ 2,R,D> [goto E				
Question ID:	ALT.097_0	0.000 Instrum	ent Variable Name:	EHT_AVGS	QuestionnaireFileName	Adult CAM
QuestionText:	On aver	age, how much	did vou pav out-of-	pocket for each visi	t to a practitioner for energy hea	ling therapy?
-		-		_	r i contra c	8
	Enter 0	if no cost or fr	ee			
000-500	\$0-500					
997	Refuse					
999	Don't k	now				
UniverseTex	at: S	ample adults 18	8+ who know the ave	erage per visit they	paid for energy healing therapy	in the past 12 months
SkipInstruct	tions: <	0-500,R,D>[go	oto EHT_MAT]			
Question ID:	ALT.098_0	0.000 Instrum	ent Variable Name:	EHT_MAT	QuestionnaireFileName	Adult CAM
QuestionText:		G THE PAST 1 out energy heal		ou buy a self-help bo	bok or other materials such as a	DVD, CD, or Video to
QuestionText: 1				ou buy a self-help bo	ook or other materials such as a	DVD, CD, or Video to
	learn ab			ou buy a self-help bo	ook or other materials such as a	DVD, CD, or Video to

9 Don't know

UniverseText: Sample adults 18+ who have seen a practitioner for energy healing therapy in the past 12 months

SkipInstructions: <1> [goto EHT_MATC] <2,R,D> [goto NAT_USE]

Adult Alternative Health/Complementary And Alternative Medicine

Question ID: ALT.099_00.00 Instrument Variable Name: EHT_MATC QuestionnaireFileName: Adult CAM Question Text: About how much did you pay for these materials in the past 12 months? *Enter '200' for \$200 or more. *Enter '200' for \$200 or for \$200 or fore. *Enter '200' for \$200 or for							
*Enter '200' for \$200 or more. *Enter '200' for \$200 or more.	Question ID:	ALT.099_	00.000	Instrument Variable Name:	EHT_MATC	QuestionnaireFileName:	Adult CAM
000-200 \$0-200 997 Refused 999 Don't know UniverseText: Sample adults 18+ who have bought self-help materials for energy healing therapy in the past 12 months SkipInstructions: <0-200,R,D> [goto NAT_USE] Question ID: ALT.109_00.000 Instrument Variable Name: NAT_USE QuestionnaireFileName: Adult CAM QuestionText: ? [F1] Have you EVER used any of these therapies for your health? Naturopathy (nay-chur-AH-puh-thee)? 1 Yes 2 No 7 Refused 9 Don't know UniverseText: Sample adults 18+ StepInstruction: <1>[goto NAT_EVER]	QuestionText:	About	now mu	ch did you pay for these mat	erials in the past 12	months?	
997 Refused 999 Don't know UniverseText: Sample adults 18+ who have bought self-help materials for energy healing therapy in the past 12 months SkipInstructions: <0-200,R,D> [goto NAT_USE] Question ID: ALT.109_00.000 Instrument Variable Name: NAT_USE QuestionnaireFileName: Adult CAM QuestionText: ? [F1] Have you EVER used any of these therapies for your health? Naturopathy (nay-chur-AH-puh-thee)? 1 Yes 1 Yes 2 No 7 Refused 9 Don't know UniverseText: Sample adults 18+ SkipInstructions: <1> [goto NAT_EVER] 1		*Enter	'200' fo	r \$200 or more.			
999 Don't know UniverseText: Sample adults 18+ who have bought self-help materials for energy healing therapy in the past 12 months SkipInstructions: <0-200,R,D> [goto NAT_USE] Question ID: ALT.109_00.000 Instrument Variable Name: NAT_USE QuestionnaireFileName: Adult CAM QuestionText: ? [F1] Have you EVER used any of these therapies for your health? Naturopathy (nay-chur-AH-puh-thee)? 1 Yes 2 No 7 Refused 9 Don't know UniverseText: Sample adults 18+ SkipInstructions: <1> [goto NAT_EVER]	000-200	\$0-200)				
UniverseText: Sample adults 18+ who have bought self-help materials for energy healing therapy in the past 12 months SkipInstructions: <0-200,R,D> [goto NAT_USE] Question ID: ALT.109_00.000 Instrument Variable Name: NAT_USE QuestionnaireFileName: Adult CAM QuestionText: ? [F1] Have you EVER used any of these therapies for your health? Naturopathy (nay-chur-AH-puh-thee)? 1 Yes 2 No 7 Refused 9 Don't know UniverseText: Sample adults 18+ SkipInstructions: <1> [goto NAT_EVER]	997	Refuse	ed				
SkipInstructions: <0-200,R,D> [goto NAT_USE] Question ID: ALT.109_00.000 Instrument Variable Name: NAT_USE QuestionnaireFileName: Adult CAM QuestionText: ? [F1] Have you EVER used any of these therapies for your health? Naturopathy (nay-chur-AH-puh-thee)? 1 Yes 2 No 7 Refused 9 Don't know UniverseText: Sample adults 18+ SkipInstructions: <1> [goto NAT_EVER]	999	Don't	know				
Question ID: ALT.109_00.000 Instrument Variable Name: NAT_USE QuestionnaireFileName: Adult CAM QuestionText: ? [F1] Have you EVER used any of these therapies for your health? Naturopathy (nay-chur-AH-puh-thee)? 1 Yes Yes No 7 Refused 9 Don't know UniverseText: Sample adults 18+ SkipInstructions: <1> [goto NAT_EVER]	UniverseTex	xt:	Sample	adults 18+ who have bought	self-help materials	for energy healing therapy in the pa	ast 12 months
QuestionText: ? [F1] Have you EVER used any of these therapies for your health? Naturopathy (nay-chur-AH-puh-thee)? 1 Yes 2 No 7 Refused 9 Don't know UniverseText: Sample adults 18+ SkipInstructions: <1> [goto NAT_EVER]	SkipInstruct	tions: <	<0-200,1	R,D> [goto NAT_USE]			
QuestionText: ? [F1] Have you EVER used any of these therapies for your health? Naturopathy (nay-chur-AH-puh-thee)? 1 Yes 2 No 7 Refused 9 Don't know UniverseText: Sample adults 18+ SkipInstructions: <1> [goto NAT_EVER]							
QuestionText: ? [F1] Have you EVER used any of these therapies for your health? Naturopathy (nay-chur-AH-puh-thee)? 1 Yes 2 No 7 Refused 9 Don't know UniverseText: Sample adults 18+ SkipInstructions: <1> [goto NAT_EVER]							
Have you EVER used any of these therapies for your health? Naturopathy (nay-chur-AH-puh-thee)? 1 Yes 2 No 7 Refused 9 Don't know UniverseText: Sample adults 18+ SkipInstructions: SkipInstructions:	Question ID:	ALT.109_	00.000	Instrument Variable Name:	NAT_USE	QuestionnaireFileName:	Adult CAM
Naturopathy (nay-chur-AH-puh-thee)? 1 Yes 2 No 7 Refused 9 Don't know UniverseText: Sample adults 18+ SkipInstructions: SkipInstructions:	QuestionText:	? [F1]					
1 Yes 2 No 7 Refused 9 Don't know UniverseText: Sample adults 18+ SkipInstructions: <1> [goto NAT_EVER]		Have y	ou EVE	R used any of these therapie	s for your health?		
2 No 7 Refused 9 Don't know Sample adults 18+ SkipInstructions: <1> [goto NAT_EVER]		Naturo	pathy (n	nay-chur-AH-puh-thee)?			
7 Refused 9 Don't know UniverseText: Sample adults 18+ SkipInstructions: <1> [goto NAT_EVER]	1	Yes					
9 Don't know UniverseText: Sample adults 18+ SkipInstructions: <1> [goto NAT_EVER]	2	No					
UniverseText:Sample adults 18+SkipInstructions:<1> [goto NAT_EVER]	7	Refuse	ed				
SkipInstructions: <1> [goto NAT_EVER]	9	Don't	know				
	UniverseTex	xt: S	Sample	adults 18+			
	SkipInstruct						

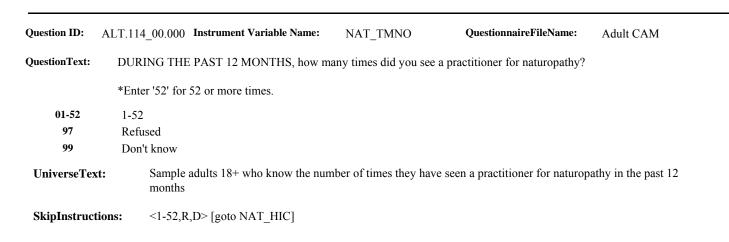
Adult Alternative Health/Complementary And Alternative Medicine

Question ID:	ALT.110_0	0.000	nstrument Variabl	e Name:	NAT_EVER	QuestionnaireFileName:	Adult CAM
QuestionText:	? [F1]						
	Have yo	u EVEF	seen a provider o	or practitior	ner for naturopathy f	for yourself?	
1	Yes						
2	No						
7	Refuse	1					
9	Don't k	now					
UniverseTex	xt: S	ample a	lults 18+ who hav	e ever used	l naturopathy		
SkipInstruct			NAT_USEM]				
		2,R,D>[goto NAT_USM]				
Question ID:			nstrument Variabl	e Name:	NAT_USEM	QuestionnaireFileName:	Adult CAM
Question ID: QuestionText:				e Name:	NAT_USEM	QuestionnaireFileName:	Adult CAM
	ALT.111_0 ?[F1]	0.000	nstrument Variabl		NAT_USEM		Adult CAM
	ALT.111_0 ?[F1]	0.000	nstrument Variabl				Adult CAM
QuestionText:	ALT.111_0 ?[F1] DURIN	0.000	nstrument Variabl				Adult CAM
QuestionText: 1	ALT.111_0 ?[F1] DURIN Yes	0.000 3 G THE 2	nstrument Variabl				Adult CAM
QuestionText: 1 2	ALT.111_0 ?[F1] DURIN Yes No	0.000 3 G THE 3	nstrument Variabl				Adult CAM
QuestionText: 1 2 7	ALT.111_0 ?[F1] DURIN Yes No Refuse Don't k	0.000 G THE I	nstrument Variabl PAST 12 MONTH	IS, did you		or naturopathy?	Adult CAM

			2012 NHIS Q	uestionnaire - A	Adult CAM			
		Adult Alt	ernative Health/C	Complementary A	And Alternative Medicine			
Document Version Date: 30-May-13								
Question ID:	ALT.112_)0.000 Inst i	rument Variable Name:	NAT_USM	QuestionnaireFileName:	Adult CAM		
QuestionText:	? [F1]							
	DURIN	G THE PAS	ST 12 MONTHS, did yo	ou use naturopathy?				
1	Yes							
2	No							
7	Refuse	d						
9	Don't l	now						
UniverseTe		ample adult ast 12 mont		sed naturopathy but h	ave never seen a practitioner or h	ave not seen one in the		
SkipInstruc	ctions: <	:1,2,R,D>[g	oto HYP_USE]					
Question ID:	ALT.113)0.000 Inst	rument Variable Name:	NAT PTIM	QuestionnaireFileName:	Adult CAM		
QuestionText:	_			_	for naturopathy in the past 12 more	nths?		
1	Yes							
2	No							
7	Refuse	d						
9	Don't l	now						

UniverseText: Sample adults 18+ who have seen a practitioner for naturopathy in the past 12 months

SkipInstructions: <1> [goto NAT_TMNO] <2,R,D> [goto NAT_TMCT]



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	2012 NHIS Questionnaire - Adult CAM							
Adult Alternative Health/Complementary And Alternative Medicine Document Version Date: 30-May-13								
Question ID:	ALT.115_00.000 Instrument Variable Name: NAT_TMCT QuestionnaireFileName: Adult CAM							
QuestionText:	DURING THE PAST 12 MONTHS, ABOUT how many times did you see a practitioner for naturopathy? Would you say							
	*Read categories below.							
01	Only 1 time							
02	2-5 times							
03	6-10 times							
04	11-15 times							
05	16-20 times							
06	21-25 times							
07	More than 25 times							
97	Refused							
99	Don't know							
UniverseTex	xt: Sample adults 18+ who don't know the specific number of times they have seen a practitioner for naturopathy in the past 12 months or refuse the specific number of times							
SkipInstruct	tions: <1-7,R,D> [goto NAT_HIC]							
Question ID:	ALT.116 00.000 Instrument Variable Name: NAT HIC QuestionnaireFileName: Adult CAM							

QuestionText:	DURING THE PAST 12 MONTHS, were any of the costs of seeing a practitioner for naturopathy covered by health insurance?
1	Yes
2	No
7	Refused
9	Don't know

UniverseText: Sample adults 18+ who have seen a practitioner for naturopathy in the past 12 months

SkipInstructions: <1> [goto NAT_HICA] <2,R,D> [goto NAT_HIT]

Adult Alternative Health/Complementary And Alternative Medicine

Question ID:	ALT.117_00.000 Instrument Variable Name: NAT_HICA QuestionnaireFileName: Adult CAM
QuestionText:	DURING THE PAST 12 MONTHS, did your health insurance cover all of the cost or just some of the cost of seeing a practitioner for naturopathy?
1	All of the cost
2	Some of the cost
7	Refused
9	Don't know
UniverseText	Sample adults 18+ whose visit(s) to a practitioner for naturopathy in the past 12 months were (at least partly) covered by health insurance
SkipInstructi	ons: <1> [goto NAT_MAT] <2,R,D> [goto NAT_HIT]
Question ID:	ALT.118_00.000 Instrument Variable Name: NAT_HIT QuestionnaireFileName: Adult CAM
QuestionText:	Do you know the total amount you paid for seeing a practitioner for naturopathy in the past 12 months [fill1: not including the amount covered by insurance]?
1	Yes
2	No
7	Refused
9	Don't know
UniverseText	: Sample adults 18+ whose health insurance covered none or some of the cost for naturopathy in the past 12 months
SkipInstructi	ons: <1> [goto NAT_HITS] <2,R,D> [goto NAT_AVGC]
Question ID:	ALT.119 00.000 Instrument Variable Name: NAT HITS QuestionnaireFileName: Adult CAM
QuestionText:	What is the total amount you paid for seeing a practitioner for naturopathy in the past 12 months?
	*Enter '0' for no cost or free.
00000-26000 99997 99999	\$0-26000 Refused Don't know
UniverseText	
SkipInstructi	

Adult Alternative Health/Complementary And Alternative Medicine

Document Version Date: 30-May-13

Question ID:	ALT.120_00.00	0) Instrument Variable Name	NAT_AVGC	QuestionnaireFileName:	Adult CAM
QuestionText:		w the average amount you pain the past 12 months?	id for each visit for natur	opathy {fill1: not including the	amount covered by
1	Yes				
2	No				
7	Refused				
9	Don't know				
UniverseText	: Samp	le adults 18+ who don't know	the total amount they pa	aid for naturopathy in the past 12	2 months
SkipInstructio		goto NAT_AVGS] D> [goto NAT_MAT]			
Question ID:	ALT.121_00.00)() Instrument Variable Name:	NAT_AVGS	QuestionnaireFileName:	Adult CAM
QuestionText:	On average	how much did you pay out-o	f-nocket for each visit to	a practitioner for naturopathy?	
2				a practitioner for naturopanty.	
	Enter '0' if n	o cost or free			
000-500	\$0-500				
997	Refused				
999	Don't know				
UniverseText	: Samp	le adults 18+ who know the a	werage per visit they pai	d for naturopathy in the past 12	months
SkipInstructi	ons: <0-50	0,R,D> [goto NAT_MAT]			
Question ID:	ALT.122_00.00	0) Instrument Variable Name	NAT_MAT	QuestionnaireFileName:	Adult CAM
QuestionText:	DURING TI learn about r		you buy a self-help book	or other materials such as a DV	D, CD, or Video to
1	Yes				
-	103				

2 No

7 Refused

9 Don't know

UniverseText: Sample adults 18+ who have seen a practitioner for naturopathy in the past 12 months

SkipInstructions: <1> [goto NAT_MATC] <2,R,D> [goto HYP_USE]

Adult Alternative Health/Complementary And Alternative Medicine

Question ID:	ALT.123_00.000	Instrument Variable Name:	NAT_MATC	QuestionnaireFileName:	Adult CAM
QuestionText:	About how m	uch did you pay for these mate	erials in the past 12 mc	onths?	
	*Enter '200' fo	or \$200 or more.			
000-200	\$0-200				
997	Refused				
999	Don't know				
UniverseText	: Sample	adults 18+ who have bought s	self-help materials for	naturopathy in the past 12 mont	hs
SkipInstructi	ons: <0-200	,R,D> [goto HYP_USE]			
Question ID:	ALT.133_00.000	Instrument Variable Name:	HYP_USE	QuestionnaireFileName:	Adult CAM
Question ID: QuestionText:	ALT.133_00.000 ? [F1]	Instrument Variable Name:	HYP_USE	QuestionnaireFileName:	Adult CAM
	? [F1]	Instrument Variable Name: ER used any of these therapies	-	QuestionnaireFileName:	Adult CAM
	? [F1]		-	QuestionnaireFileName:	Adult CAM
	? [F1] Have you EVI		-	QuestionnaireFileName:	Adult CAM
QuestionText:	? [F1] Have you EVI Hypnosis?		-	QuestionnaireFileName:	Adult CAM
QuestionText: 1	? [F1] Have you EV Hypnosis? Yes No Refused		-	QuestionnaireFileName:	Adult CAM
QuestionText: 1 2	P [F1] Have you EV Hypnosis? Yes No		-	QuestionnaireFileName:	Adult CAM
QuestionText: 1 2 7	? [F1] Have you EV Hypnosis? Yes No Refused Don't know		-	QuestionnaireFileName:	Adult CAM

Adult Alternative Health/Complementary And Alternative Medicine

Question ID:	ALT.134_	00.000 Instru	ument Variable Name:	HYP_EVER	QuestionnaireFileName:	Adult CAM
QuestionText:	? [F1]					
	Have y	ou EVER see	n a provider or practit	ioner for hypnosis for	yourself?	
1	Yes					
2	No					
7	Refuse	ed				
9	Don't	know				
UniverseTex	xt:	Sample adults	18+ who have ever us	sed hypnosis		
SkipInstruct		<1> [goto HY <2,R,D>[goto				
Question ID:	ALT.135_	00.000 Instru	iment Variable Name:	HYP_USEM	QuestionnaireFileName:	Adult CAM
QuestionText:	?[F1]					
	DURIN	G THE PAST	Г 12 MONTHS, did y	ou see a practitioner f	for hypnosis?	
1	Yes					
2	No					
7	Refuse	ed				
9	Don't	know				
UniverseTex	xt:	Sample adults	18+ who have ever se	een a practitioner for l	hypnosis	
SkipInstruct	tions.	<1>[goto HY]				

			2012 NHIS Qu	estionnaire -	Adult CAM				
Adult Alternative Health/Complementary And Alternative Medicine									
Document Version Date: 30-May-13									
Question ID:	ALT.136_0	0.000	Instrument Variable Name:	HYP_BRTH	QuestionnaireFileName:	Adult CAM			
QuestionText:	?[F1]								
			thing exercises as part of hy rate or depth of breathing.	pnosis? Breathing e	xercises may involve actively con	trolling the way air is			
1	Yes								
2	No								
7	Refused	1							
9	Don't k	now							
UniverseTe	ext: Sa	ample a	dults 18+ who have seen a p	practitioner for hypn	osis in the past 12 months				
SkipInstruc	ctions: <	1,2,R,D	>[goto HYP_PTIM]						
Question ID:	ALT.137_0	0.000	Instrument Variable Name:	HYP_USM	QuestionnaireFileName:	Adult CAM			
QuestionText:	? [F1]								
	DURIN	G THE	PAST 12 MONTHS, did yo	u use hypnosis?					
1	Yes								

- 2 No
- 7 Refused
- 9 Don't know

UniverseText: Sample adults 18+ who have seen a practitioner for hypnosis in the past 12 months or who have used hypnosis in the past 12 months

SkipInstructions: <1> [goto HYP_MAT] <2,R,D> [goto BIO_USE]

Adult Alternative Health/Complementary And Alternative Medicine

Question ID:	ALT.138_00.	000 Instrumen	t Variable Name:	HYP_PTIM	QuestionnaireFileName:	Adult CAM
QuestionText:	Do you kr	ow the exact nu	umber of times you	u saw a practitioner fo	r hypnosis in the past 12 months	\$?
1	Yes					
2	No					
7	Refused					
9	Don't kno	W				
UniverseTex	t: Sar	pple adults 18+	who have seen a p	practitioner for hypnos	is in the past 12 months	
SkipInstruct		[goto HYP_TM R,D> [goto HY]				
	,	x,D> [g0t0 111]	r_IMCI]			
	,	ζ,D> [g010 ΠΤ	r_IMCI]			
				HYP TMNO	OuestionnaireFileName:	Adult CAM
	ALT.139_00.	000 Instrumen	t Variable Name:	HYP_TMNO	QuestionnaireFileName:	Adult CAM
	ALT.139_00. DURING	000 Instrumen	t Variable Name: MONTHS, how n	—	QuestionnaireFileName: a practitioner for hypnosis?	Adult CAM
QuestionText:	ALT.139_00. DURING *Enter '52	000 Instrumen THE PAST 12	t Variable Name: MONTHS, how n	—		Adult CAM
QuestionText: 01-52	ALT.139_00. DURING *Enter '52 1-52	000 Instrumen THE PAST 12	t Variable Name: MONTHS, how n	—		Adult CAM
QuestionText:	ALT.139_00. DURING *Enter '52	000 Instrumen THE PAST 12	t Variable Name: MONTHS, how n	—		Adult CAM
97	ALT.139_00. DURING *Enter '52 1-52 Refused Don't kno	000 Instrumen THE PAST 12 1 for 52 or more	t Variable Name: MONTHS, how n times.	– nany times did you see		

2012 NHIS Questionnaire - Adult CAM Adult Alternative Health/Complementary And Alternative Medicine Document Version Date: 30-May-13				
Question ID:	ALT.140_00.000 Instrument Variable Name: HYP_TMCT QuestionnaireFileName: Adult CAM			
QuestionText:	DURING THE PAST 12 MONTHS, ABOUT how many times did you see a practitioner for hypnosis? Would you say			
	*Read categories below.			
01	Only 1 time			
02	2-5 times			
03	6-10 times			
04	11-15 times			
05	16-20 times			
06	21-25 times			
07	More than 25 times			
97	Refused			
99	Don't know			
UniverseTex	xt: Sample adults 18+ who don't know the specific number of times they have seen a practitioner for hypnosis in the past 12 months or refuse the specific number of times			
SkipInstruct	tions: <1-7,R,D> [goto HYP_HIC]			

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Question ID:	ALT.141_00.000	Instrument Variable Name:	HYP_HIC	QuestionnaireFileName:	Adult CAM
QuestionText:	DURING THI	E PAST 12 MONTHS, were a	ny of the costs of se	eing a practitioner for hypnosis co	vered by health
1	Yes				
2	No				
7	Refused				
9	Don't know				
UniverseTex	t: Sample	adults 18+ who have seen a p	practitioner for hypn	osis in the past 12 months	
SkipInstruct	10	oto HYP_HICA] > [goto HYP_HIT]			

Adult Alternative Health/Complementary And Alternative Medicine

Question ID:	ALT.142_00.000 Instrument Variable Name: HYP_HICA QuestionnaireFileName: Adult CAM
QuestionText:	DURING THE PAST 12 MONTHS, did your health insurance cover all of the cost or just some of the cost of seeing a practitioner for hypnosis?
1	All of the cost
2	Some of the cost
7	Refused
9	Don't know
UniverseTex	t: Sample adults 18+ whose visit(s) to a practitioner for hypnosis in the past 12 months were (at least partly) covered by health insurance
SkipInstruct	ions: <1> [goto HYP_MAT] <2,R,D> [goto HYP_HIT]
Question ID:	ALT.143_00.000 Instrument Variable Name: HYP_HIT QuestionnaireFileName: Adult CAM
QuestionText:	Do you know the total amount you paid for seeing a practitioner for hypnosis in the past 12 months [fill1: not including the amount covered by insurance]?
1	Yes
2	No
7	Refused
9	Don't know
UniverseTex	
SkipInstruct	ions: <1> [goto HYP_HITS] <2,R,D> [goto HYP_AVGC]
Question ID:	ALT.144 00.000 Instrument Variable Name: HYP HITS QuestionnaireFileName: Adult CAM
QuestionText:	What is the total amount you paid for seeing a practitioner for hypnosis in the past 12 months [fill1: not including the amount covered by insurance]?
	*Enter '0' for no cost or free.
00000-26000	\$0-26000
99997	Refused
99999	Don't know
UniverseTex	
SkipInstruct	ions: <0-26000,R,D> [goto HYP_MAT]
Soft Edit:	Verify if over \$1000

Adult Alternative Health/Complementary And Alternative Medicine

Document Version Date: 30-May-13

Question ID:	ALT.145_	_00.000	Instrument Variable Na	ame:	HYP_AVGC		QuestionnaireFile	Name:	Adult CAM
QuestionText:			he average amount you he past 12 months?	ı paid fo	or each visit for hy	ypnosis {f	ill1: not includin	g the amo	unt covered by
1	Yes								
2	No								
7	Refus	ed							
9	Don't	know							
UniverseTe	xt:	Sample	adults 18+ who don't k	now the	e total amount the	ey paid for	hypnosis in the p	oast 12 mo	onths
SkipInstruc			to HYP_AVGS] > [goto HYP_MAT]						
Question ID:	ATT 146	00.000	Instrument Variable Na	ame	HYP AVGS		QuestionnaireFile	Name	Adult CAM
QuestionText:	-	-	ow much did you pay o		_				Addit CANA
-		0	cost or free			· · · · F · · ·	J. J. J.		
	Enter		cost of free						
000-500	\$0-50								
997	Refus								
999	Don't	know							
UniverseTe	xt:	Sample	adults 18+ who know t	he avera	age per visit they	paid for h	ypnosis in the pa	st 12 mon	ths
SkipInstruc	tions:	<0-500,	R,D>[goto HYP_MA]	[]					
Question ID:	ALT.147_	_00.000	Instrument Variable Na	ame:	HYP_MAT		QuestionnaireFile	Name:	Adult CAM
QuestionText:		NG THE bout hyj	PAST 12 MONTHS, opposis?	did you	buy a self-help b	ook or oth	er materials such	as a DVI	D, CD, or Video to
1	Yes								
2	No								
7	Refus								
9	Don't	know							
UniverseTe			adults 18+ who have se 12 months	een a pra	actitioner for hyp	onosis in th	e past 12 months	or who h	ave used hypnosis in
SkipInstruc	tions:	<1> [go	to HYP MATC]						

_

SkipInstructions: <1> [goto HYP_MATC] <2,R,D> [goto BIO_USE]

Adult Alternative Health/Complementary And Alternative Medicine

Question ID:	ALT.148_00.0	0) Instrument Variable	Name:	HYP_MATC	QuestionnaireFileN	Name: Adult CAM
QuestionText:	About how	much did you pay for th	nese materia	als in the past 12 r	nonths?	
	*Enter '200'	for \$200 or more.				
000-200	\$0-200					
997	Refused					
999	Don't know	7				
UniverseText	: Samp	le adults 18+ who have	bought sel	f-help materials for	or hypnosis in the past 12	months
SkipInstructio	ons: <0-20	0,R,D>[goto BIO_US]	E]			
Question ID:	ALT.158_00.0)() Instrument Variable	Name:	BIO_USE	QuestionnaireFileN	ame: Adult CAM
Question ID:	ALT.158_00.04 ? [F1])() Instrument Variable	Name:	BIO_USE	QuestionnaireFileN	Name: Adult CAM
	? [F1]	00 Instrument Variable VER used any of these t		_	QuestionnaireFileN	Name: Adult CAM
	? [F1]	VER used any of these t		_	QuestionnaireFileN	Name: Adult CAM
	? [F1] Have you E	VER used any of these t		_	QuestionnaireFileN	Vame: Adult CAM
QuestionText:	? [F1] Have you E Biofeedbacl	VER used any of these t		_	QuestionnaireFileN	Vame: Adult CAM
QuestionText: 1	? [F1] Have you E Biofeedback Yes	VER used any of these t		_	QuestionnaireFileN	ame: Adult CAM
QuestionText: 1 2	? [F1] Have you E Biofeedbacl Yes No	VER used any of these t		_	QuestionnaireFileN	ame: Adult CAM
QuestionText: 1 2 7	? [F1] Have you E Biofeedback Yes No Refused Don't know	VER used any of these t		_	QuestionnaireFileN	ame: Adult CAM
QuestionText: 1 2 7 9	? [F1] Have you E Biofeedback Yes No Refused Don't know	VER used any of these t </td <td></td> <td>_</td> <td>QuestionnaireFileN</td> <td>ame: Adult CAM</td>		_	QuestionnaireFileN	ame: Adult CAM

Adult Alternative Health/Complementary And Alternative Medicine

Question ID:	ALT.159_0	0.000	Instrument Va	riable Name:	BIO_EVER	QuestionnaireFileName:	Adult CAM
QuestionText:	? [F1]						
	Have ye	ou EVE	R seen a provid	ler or practition	oner for biofeedback	for yourself?	
1	Yes						
2	No						
7	Refuse	d					
9	Don't k	now					
UniverseTex	t: S	ample	adults 18+ who	have ever us	ed biofeedback		
SkipInstruct			o BIO_USEM [goto BIO_US				
	ALT 160 (0.000	Instrument Va	riahla Name:	DIO USEM	QuestionnaireFileName	Adult CAM
Question ID:	ALT.160_0	0.000	Instrument Va	riable Name:	BIO_USEM	QuestionnaireFileName:	Adult CAM
Question ID: QuestionText:	ALT.160_(?[F1]	0.000	Instrument Va	riable Name:	BIO_USEM	QuestionnaireFileName:	Adult CAM
-	?[F1]				BIO_USEM		Adult CAM
-	?[F1]				-		Adult CAM
QuestionText:	?[F1] DURIN				-		Adult CAM
QuestionText:	?[F1] DURIN Yes	G THE			-		Adult CAM
QuestionText: 1 2	?[F1] DURIN Yes No	G THE đ			-		Adult CAM
QuestionText: 1 2 7	?[F1] DURIN Yes No Refuse Don't k	G THE d now	PAST 12 MO	NTHS, did yo	-	or biofeedback?	Adult CAM

	2012 NHIS Questionnaire - Adult CAM				
	Adult Alternative Health/Complementary And Alternative Medicine				
Document Version Date: 30-May-13					
Question ID:	ALT.161_00.000 Instrument Variable Name: BIO_BRTH QuestionnaireFileName: Adult CAM				
QuestionText:	?[F1]				
	Did you do breathing exercises as part of biofeedback? Breathing exercises may involve actively controlling the way air is drawn in, or the rate or depth of breathing.				
1	Yes				
2	No				
7	Refused				
9	Don't know				
UniverseTex	xt: Sample adults 18+ who have seen a practitioner for biofeedback in the past 12 months				
SkipInstruct	tions: <1,2,R,D>[goto BIO_PTIM]				
Question ID:	ALT.162_00.000 Instrument Variable Name: BIO_USM QuestionnaireFileName: Adult CAM				
QuestionText:	? [F1]				
	DURING THE PAST 12 MONTHS, did you use biofeedback?				
1	Yes				
2	No				
7	Refused				
9	Don't know				
UniverseTex	xt: Sample adults 18+ who have ever used biofeedback but have never seen a practitioner or have not seen one in the past 12 months				

SkipInstructions: <1> [goto BIO_MAT] <2,R,D> [goto AYU_USE]

Adult Alternative Health/Complementary And Alternative Medicine

	ALT.163_00.0	00 Instrument Variable Name:	BIO_PTIM	QuestionnaireFileName:	Adult CAM
QuestionText:	Do you kno	w the exact number of times yo	ou saw a practitioner f	or biofeedback in the past 12 mor	nths?
1	Yes				
2	No				
7	Refused				
9	Don't knov	V			
UniverseTex	t: Samp	ble adults 18+ who have seen a	practitioner for biofee	bdback in the past 12 months	
SkipInstruct		[goto BIO_TMNO] ,D> [goto BIO_TMCT]			
Question ID:	ALT.164_00.0	00 Instrument Variable Name:	BIO_TMNO	QuestionnaireFileName:	Adult CAM
-	_		—	QuestionnaireFileName: e a practitioner for biofeedback?	Adult CAM
-	– DURING T		—	-	Adult CAM
-	– DURING T	HE PAST 12 MONTHS, how a	—	-	Adult CAM
QuestionText:	– DURING T *Enter '52' :	HE PAST 12 MONTHS, how a	—	-	Adult CAM
QuestionText: 01-52	– DURING T *Enter '52' : 1-52	HE PAST 12 MONTHS, how the for 52 or more times.	—	-	Adult CAM
97	DURING T *Enter '52' : 1-52 Refused Don't know	HE PAST 12 MONTHS, how the for 52 or more times.	– many times did you se	-	

	2012 NHIS Questionnaire - Adult CAM					
	Adult Alternative Health/Complementary And Alternative Medicine					
Document Version Date: 30-May-13						
Document version Date: 30-May-13						
Question ID:	ALT.165_00.000 Instrument Variable Name: BIO_TMCT QuestionnaireFileName: Adult CAM					
QuestionText:	DURING THE PAST 12 MONTHS, ABOUT how many times did you see a practitioner for biofeedback? Would you say					
	*Read categories below.					
01	Only 1 time					
02	2-5 times					
03	6-10 times					
04	11-15 times					
05	16-20 times					
06	21-25 times					
07	More than 25 times					
97	Refused					
99	Don't know					
UniverseTex	xt: Sample adults 18+ who don't know the specific number of times they have seen a practitioner for biofeedback in the past 12 months or refuse the specific number of times					
SkipInstruct	tions: <1-7,R,D> [goto BIO_HIC]					

Question ID:	LT.166_00.000 Instrument Variable Name: BIO_HIC QuestionnaireFileName: Adul	t CAM
QuestionText:	DURING THE PAST 12 MONTHS, were any of the costs of seeing a practitioner for biofeedback covere insurance?	d by health
1	Yes	
2	No	
7	Refused	
9	Don't know	
UniverseTex	Sample adults 18+ who have seen a practitioner for biofeedback in the past 12 months	
SkipInstruct	ns: <1> [goto BIO_HICA] <2,R,D> [goto BIO_HIT]	

Adult Alternative Health/Complementary And Alternative Medicine

Question ID:	ALT.167_00.000 Instrument Variable Name: BIO_HICA QuestionnaireFileName: Adult CAM
QuestionText:	DURING THE PAST 12 MONTHS, did your health insurance cover all of the cost or just some of the cost of seeing a practitioner for biofeedback?
1	All of the cost
2	Some of the cost
7	Refused
9	Don't know
UniverseTex	t: Sample adults 18+ whose visit(s) to a practitioner for biofeedback in the past 12 months were (at least partly) covered by health insurance
SkipInstruct	ions: <1> [goto BIO_MAT] <2,R,D> [goto BIO_HIT]
Question ID:	ALT.168_00.000 Instrument Variable Name: BIO_HIT QuestionnaireFileName: Adult CAM
QuestionText:	Do you know the total amount you paid for seeing a practitioner for biofeedback in the past 12 months [fill1: not including the amount covered by insurance]?
1	Yes
2	No
7	Refused
9	Don't know
UniverseTex	t: Sample adults 18+ whose health insurance covered none or some of the cost for biofeedback in the past 12 months
SkipInstruct	ions: <1> [goto BIO_HITS] <2,R,D> [goto BIO_AVGC]
Question ID:	ALT.169 00.000 Instrument Variable Name: BIO HITS QuestionnaireFileName: Adult CAM
QuestionText:	What is the total amount you paid for seeing a practitioner for biofeedback in the past 12 months [fill1: not including the amount covered by insurance]?
	*Enter '0' for no cost or free.
00000-26000	\$0-26000
99997	Refused
99999	Don't know
UniverseTex	t: Sample adults 18+ who know the amount they paid for biofeedback in the past 12 months
SkipInstruct	ions: <0-26000,R,D> [goto BIO_MAT]

Adult Alternative Health/Complementary And Alternative Medicine

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	ALT.170_00.000 Instrument Variable Name: BIO_AVGC QuestionnaireFileName: Adult CAM
QuestionText:	Do you know the average amount you paid for each visit for biofeedback {fill1: not including the amount covered by insurance} in the past 12 months?
1	Yes
2	No
7	Refused
9	Don't know
UniverseText	Sample adults 18+ who don't know the total amount they paid for biofeedback in the past 12 months
SkipInstructio	ons: <1> [goto BIO_AVGS] <2,R,D> [goto BIO_MAT]
Question ID:	ALT.171_00.000 Instrument Variable Name: BIO_AVGS QuestionnaireFileName: Adult CAM
QuestionText:	On average, how much did you pay out-of-pocket for each visit to a practitioner for biofeedback?
	Enter '0' if no cost or free
000-500	\$0-500
997	Refused
999	Don't know
UniverseText	Sample adults 18+ who know the average per visit they paid for biofeedback in the past 12 months
UniverseText SkipInstructio	
SkipInstructio	ons: <0-500,R,D> [goto BIO_MAT]
SkipInstructio	
SkipInstructio	ons: <0-500,R,D> [goto BIO_MAT]
SkipInstructio	ons: <0-500,R,D> [goto BIO_MAT] ALT.172_00.000 Instrument Variable Name: BIO_MAT QuestionnaireFileName: AURING THE PAST 12 MONTHS, did you buy a self-help book or other materials such as a DVD, CD, or Video to
SkipInstructio	ons: <0-500,R,D> [goto BIO_MAT] ALT.172_00.000 Instrument Variable Name: BIO_MAT QuestionnaireFileName: Adult CAM DURING THE PAST 12 MONTHS, did you buy a self-help book or other materials such as a DVD, CD, or Video to learn about biofeedback?
SkipInstructio	ALT.172_00.000 Instrument Variable Name: BIO_MAT QuestionnaireFileName: Adult CAM DURING THE PAST 12 MONTHS, did you buy a self-help book or other materials such as a DVD, CD, or Video to learn about biofeedback? Yes No Refused
SkipInstructio	ALT.172_00.000 Instrument Variable Name: BIO_MAT QuestionnaireFileName: Adult CAM DURING THE PAST 12 MONTHS, did you buy a self-help book or other materials such as a DVD, CD, or Video to learn about biofeedback? Yes No
SkipInstructio	ALT.172_00.000 Instrument Variable Name: BIO_MAT QuestionnaireFileName: Adult CAM DURING THE PAST 12 MONTHS, did you buy a self-help book or other materials such as a DVD, CD, or Video to learn about biofeedback? Yes No Refused Don't know

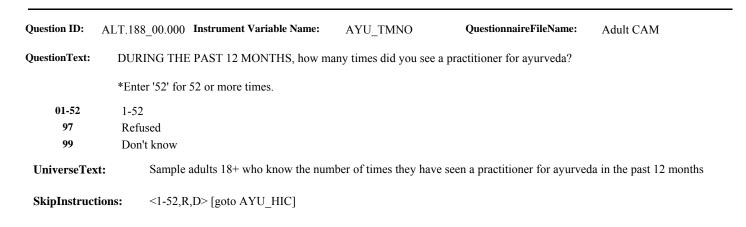
Adult Alternative Health/Complementary And Alternative Medicine

ALT.173_00.0	000 Instrument Variable Name	BIO_MATC	QuestionnaireFileName:	Adult CAM
About how	w much did you pay for these n	naterials in the past 12	months?	
*Enter '200	0' for \$200 or more.			
\$0-200				
Refused				
Don't kno	W			
at: Sam	pple adults 18+ who have boug	ht self-help materials f	for biofeedback in the past 12 mont	hs
tions: <0-2	200,R,D> [goto AYU_USE]			
ALT.183_00.0	000 Instrument Variable Name	* AYU_USE	QuestionnaireFileName:	Adult CAM
? [F1]				
Have you l	EVER used any of these therap	bies for your health?		
Ayurveda	(eye-yur-VAY-duh)?			
Yes				
No				
Refused				
Don't kno	W			
xt: Sam	pple adults 18+			
tions: <1>				
	About how *Enter '20 \$0-200 Refused Don't kno at: San tions: <0-2 ALT.183_00. ? [F1] Have you Ayurveda Yes No Refused Don't kno	About how much did you pay for these n *Enter '200' for \$200 or more. \$0-200 Refused Don't know ct: Sample adults 18+ who have boug tions: <0-200,R,D> [goto AYU_USE] ALT.183_00.000 Instrument Variable Name ? [F1] Have you EVER used any of these therap Ayurveda (eye-yur-VAY-duh)? Yes No Refused Don't know ct: Sample adults 18+	About how much did you pay for these materials in the past 12 *Enter '200' for \$200 or more. \$0-200 Refused Don't know ct: Sample adults 18+ who have bought self-help materials for tions: <0-200,R,D> [goto AYU_USE] ALT.183_00.000 Instrument Variable Name: AYU_USE ? [F1] Have you EVER used any of these therapies for your health? Ayurveda (eye-yur-VAY-duh)? Yes No Refused Don't know ct: Sample adults 18+	About how much did you pay for these materials in the past 12 months? *Enter '200' for \$200 or more. \$0-200 Refused Don't know ct: Sample adults 18+ who have bought self-help materials for biofeedback in the past 12 mont tions: <0-200,R,D> [goto AYU_USE] ALT.183_00.000 Instrument Variable Name: AYU_USE QuestionnaireFileName: ? [F1] Have you EVER used any of these therapies for your health? Ayurveda (eye-yur-VAY-duh)? Yes No Refused Don't know ct: Sample adults 18+

			2012 NHIS Qu	estionnaire - A	dult CAM		
		Adult		•	nd Alternative Medicine		
Document Version Date: 30-May-13							
Question ID:	ALT.184_	00.000	Instrument Variable Name:	AYU_EVER	QuestionnaireFileName:	Adult CAM	
QuestionText:	? [F1]						
	Have y	ou EVE	R seen a provider or practitio	ner for ayurveda for	yourself?		
1	Yes						
2	No						
7	Refuse	ed					
9	Don't l	know					
UniverseTex	xt: S	Sample	adults 18+ who have ever use	d ayurveda			
SkipInstruc			to AYU_USEM] [goto AYU_USM]				
Question ID:	ALT.185_	00.000	Instrument Variable Name:	AYU_USEM	QuestionnaireFileName:	Adult CAM	
QuestionText:	?[F1]						
	DURIN	IG THE	PAST 12 MONTHS, did you	see a practitioner fo	or ayurveda?		
1	Yes						
2	No						
7	Refuse	ed					
9	Don't l	know					
UniverseTex	xt: S	Sample	adults 18+ who have ever see	n a practitioner for a	yurveda		
SkipInstruc			o AYU_PTIM] > [goto AYU_USM]				

			2012 NHI	S Que	stionnaire -	Adult CAM		
		Adul	t Alternative Healt	th/Con	nplementary	And Alternative Medic	ine	
Document Version Date: 30-May-13								
Question ID:	ALT.186	5_00.000	Instrument Variable Na	ame:	AYU_USM	QuestionnaireFileNa	me:	Adult CAM
QuestionText:	? [F1]]						
	DUR	ING THI	E PAST 12 MONTHS, d	lid you u	ise ayurveda?			
1	Yes							
2	No							
7	Refu	sed						
9	Don	t know						
UniverseTe	xt:	Sample 12 mon		ver used	ayurveda but hav	ve never seen a practitioner or	have	not seen one in the past
SkipInstruc	tions:	<1,2,R,	D> [goto CHE_USE]					
Question ID:	ALT.187	7_00.000	Instrument Variable Na	me:	AYU_PTIM	QuestionnaireFileNa	me:	Adult CAM
QuestionText:	Do yo	ou know	the exact number of tim	es you s	aw a practitioner	for ayurveda in the past 12 m	ionths	?
1	Yes							
2	No							
_								

7	Refused
9	Don't know
UniverseText:	Sample adults 18+ who have seen a practitioner for ayurveda in the past 12 months
SkipInstruction	s: <1> [goto AYU_TMNO] <2,R,D> [goto AYU_TMCT]



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2012 NHIS Questionnaire - Adult CAM Adult Alternative Health/Complementary And Alternative Medicine Document Version Date: 30-May-13						
Question ID:	ALT.189_00.000 Instrument Variable Name: AYU_TMCT QuestionnaireFileName: Adult CAM					
QuestionText:	DURING THE PAST 12 MONTHS, ABOUT how many times did you see a practitioner for ayurveda? Would you say					
	*Read categories below.					
01	Only 1 time					
02	2-5 times					
03	6-10 times					
04	11-15 times					
05	16-20 times					
06	21-25 times					
07	More than 25 times					
97	Refused					
99	Don't know					
UniverseTex	Sample adults 18+ who don't know the specific number of times they have seen a practitioner for ayurveda in the past 12 months or refuse the specific number of times					
SkipInstruc	tions: <1-7,R,D> [goto AYU_HIC]					

Question ID:	ALT.190_00.0)() Instrument V	ariable Name:	AYU_HIC	QuestionnaireFileName:	Adult CAM
QuestionText:	DURING T insurance?	HE PAST 12 MO	ONTHS, were any	of the costs of seeing	a practitioner for ayurveda co	vered by health
1	Yes					
2	No					
7	Refused					
9	Don't knov					
UniverseTex	t: Samp	le adults 18+ wh	o have seen a pra	ctitioner for ayurveda	in the past 12 months	
SkipInstruct		goto AYU_HIC. D> [goto AYU_				

Adult Alternative Health/Complementary And Alternative Medicine

	Document version Date. 30-May-13
Question ID:	ALT.191_00.000 Instrument Variable Name: AYU_HICA QuestionnaireFileName: Adult CAM
QuestionText:	DURING THE PAST 12 MONTHS, did your health insurance cover all of the cost or just some of the cost of seeing a practitioner for ayurveda?
1	All of the cost
2	Some of the cost
7	Refused
9	Don't know
UniverseText	Sample adults 18+ whose visit(s) to a practitioner for ayurveda in the past 12 months were (at least partly) covered by health insurance
SkipInstructi	ons: <1> [goto AYU_MAT] <2,R,D> [goto AYU_HIT]
Question ID:	ALT.192_00.000 Instrument Variable Name: AYU_HIT QuestionnaireFileName: Adult CAM Do you know the total amount you paid for seeing a practitioner for ayurveda in the past 12 months [fill1: not including
	the amount covered by insurance]?
1	Yes
2	No
7	Refused
9	Don't know
UniverseText	: Sample adults 18+ whose health insurance covered none or some of the cost for ayurveda in the past 12 months
SkipInstructi	ons: <1> [goto AYU_HITS] <2,R,D> [goto AYU_AVGC]
Question ID:	ALT.193_00.000 Instrument Variable Name: AYU_HITS QuestionnaireFileName: Adult CAM
QuestionText:	What is the total amount you paid for seeing a practitioner for ayurveda in the past 12 months [fill1: not including the amount covered by insurance]?
	*Enter '0' for no cost or free.
00000-26000	\$0-26000
99997	Refused
99999	Don't know
UniverseText	Sample adults 18+ who know the amount they paid for ayurveda in the past 12 months
SkipInstructi	ons: <0-26000,R,D>[goto AYU_MAT]

Adult Alternative Health/Complementary And Alternative Medicine

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QuestionText:	ALT.194_00.000 Instrument Variable Name: AYU_AVGC QuestionnaireFileName: Adult	lt CAM
	Do you know the average amount you paid for each visit for ayurveda {fill1: not including the amount cov insurance} in the past 12 months?	
1	Yes	
2	No	
7	Refused	
9	Don't know	
UniverseText	t: Sample adults 18+ who don't know the total amount they paid for ayurveda in the past 12 months	
SkipInstructi	ions: <1> [goto AYU_AVGS] <2,R,D> [goto AYU_MAT]	
Juestion ID:	ALT.195_00.000 Instrument Variable Name: AYU_AVGS QuestionnaireFileName: Adult	lt CAM
	On average, how much did you pay out-of-pocket for each visit to a practitioner for ayurveda?	lt CAM
QuestionText:	On average, how much did you pay out-of-pocket for each visit to a practitioner for ayurveda? Enter '0' if no cost or free	lt CAM
QuestionText: 000-500	On average, how much did you pay out-of-pocket for each visit to a practitioner for ayurveda? Enter '0' if no cost or free \$0-500	lt CAM
QuestionText: 000-500 997	On average, how much did you pay out-of-pocket for each visit to a practitioner for ayurveda? Enter '0' if no cost or free \$0-500 Refused	lt CAM
QuestionText: 000-500	On average, how much did you pay out-of-pocket for each visit to a practitioner for ayurveda? Enter '0' if no cost or free \$0-500 Refused Don't know	lt CAM

 QuestionText:
 DURING THE PAST 12 MONTHS, did you buy a self-help book or other materials such as a DVD, CD, or Video to learn about ayurveda?

 1
 Yes

 2
 No

 7
 Refused

 9
 Don't know

 UniverseText:
 Sample adults 18+ who have seen a practitioner for ayurveda in the past 12 months

SkipInstructions: <1> [goto AYU_MATC] <2,R,D> [goto CHE_USE]

Adult Alternative Health/Complementary And Alternative Medicine

Question ID:	ALT.197_00.00	() Instrument Variable Name:	AYU_MATC	QuestionnaireFileName:	Adult CAM
QuestionText:	About how n	nuch did you pay for these mate	rials in the past 12 mo	onths?	
	*Enter '200' ±	for \$200 or more.			
000-200	\$0-200				
997	Refused				
999	Don't know				
UniverseTex	xt: Sampl	e adults 18+ who have bought s	self-help materials for	ayurveda in the past 12 months	
SkipInstruct	tions: <0-200),R,D> [goto CHE_USE]			
Question ID:	ALT.207_00.00	() Instrument Variable Name:	CHE_USE	QuestionnaireFileName:	Adult CAM
QuestionText:	? [F1]				
	Have you EV	ER used any of these therapies	for your health?		
	Chelation (ke	ey-LAY-shun) Therapy?			
1	Yes				
2	No				
7	Refused				
9	Don't know				
UniverseTex	xt: Sampl	e adults 18+			
SkipInstruct	tions: <1> [g				

			2012 NHIS Qu	estionnaire - A	dult CAM				
Adult Alternative Health/Complementary And Alternative Medicine Document Version Date: 30-May-13									
								Question ID:	ALT.208
QuestionText:	? [F1]								
Have you EVER seen a provider or practitioner for chelation therapy for yourself?									
1	Yes								
2	No								
7	Refus	ed							
9	Don't	know							
UniverseTex	xt:	Sample	adults 18+ who have ever use	d chelation therapy					
SkipInstruct			to CHE_USEM] [goto CHE_USM]						
Question ID:	ALT.209_	_00.000	Instrument Variable Name:	CHE_USEM	QuestionnaireFileName:	Adult CAM			
QuestionText:	?[F1]								
	DURI	NG THE	PAST 12 MONTHS, did you	i see a practitioner fo	or chelation therapy?				
1	Yes								
2	No								
7	Refus	ed							
9	Don't	know							
UniverseTex	xt:	Sample	adults 18+ who have ever see	n a practitioner for c	helation therapy				
SkipInstruct			o CHE_PTIM] > [goto CHE_USM]						

2012 NHIS Questionnaire - Adult CAM Adult Alternative Health/Complementary And Alternative Medicine Document Version Date: 30-May-13														
								Question ID:	ALT.210	_00.000	Instrument Variable Name:	CHE_USM	QuestionnaireFileName:	Adult CAM
								QuestionText:	? [F1]					
	DURI	NG THE	E PAST 12 MONTHS, did you	u use chelation thera	py?									
1	Yes													
2	No													
7	Refus	sed												
9	Don't	know												
UniverseTe	xt:		adults 18+ who have ever use 12 months	ed chelation therapy	but have never seen a practitioner	or have not seen one in								
		.1.0.D.1												
SkipInstruc	tions:	<1,2,R,1	D> [goto CST_USE]											
Question ID:	ALT.211	_00.000	Instrument Variable Name:	CHE_PTIM	QuestionnaireFileName:	Adult CAM								
QuestionText:	Do yo	u know 1	he exact number of times you	i saw a practitioner f	for chelation therapy in the past 12	2 months?								
1	Yes													
2	No													
7	Refus	sed												
9	Don't	know												
UniverseTex	xt:	Sample	adults 18+ who have seen a p	ractitioner for chela	tion therapy in the past 12 months									
SkipInstruc	tions:		to CHE_TMNO] > [goto CHE_TMCT]											

Question ID:	ALT.212	_00.000 Instrument Variable Name:	CHE_TMNO	QuestionnaireFileName:	Adult CAM
QuestionText:	DUR	NG THE PAST 12 MONTHS, how ma	any times did you se	e a practitioner for chelation thera	py?
	*Ente	r '52' for 52 or more times.			
01-52	1-52				
97	Refu	sed			
99	Don'	t know			
UniverseTex	xt:	Sample adults 18+ who know the num months	ber of times they ha	we seen a practitioner for chelation	n therapy in the past 12
SkipInstruct	tions:	<1-52,R,D> [goto CHE_HIC]			

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	2012 NHIS Questionnaire - Adult CAM							
	Adult Alternative Health/Complementary And Alternative Medicine							
	Document Version Date: 30-May-13							
Question ID:	ALT.213_00.000 Instrument Variable Name: CHE_TMCT QuestionnaireFileName: Adult CAM							
QuestionText:	DURING THE PAST 12 MONTHS, ABOUT how many times did you see a practitioner for chelation therapy? Would you say							
	*Read categories below.							
01	Only 1 time							
02	2-5 times							
03	6-10 times							
04	11-15 times							
05	16-20 times							
06	21-25 times							
07	More than 25 times							
97	Refused							
99	Don't know							
UniverseTex	Sample adults 18+ who don't know the specific number of times they have seen a practitioner for chelation therapy in the past 12 months or refuse the specific number of times							
SkipInstruc	ctions: <1-7,R,D> [goto CHE_HIC]							

Question ID:	ALT.214_00.000 Instrument Variable Name: CHE_HIC	QuestionnaireFileName: Adult CAM
QuestionText:	DURING THE PAST 12 MONTHS, were any of the costs of s insurance?	seeing a practitioner for chelation therapy covered by health
1	Yes	
2	No	
7	Refused	
9	Don't know	
UniverseTex	xt: Sample adults 18+ who have seen a practitioner for chell	ation therapy in the past 12 months
SkipInstruct	ctions: <1> [goto CHE_HICA] <2,R,D> [goto CHE_HIT]	

Adult Alternative Health/Complementary And Alternative Medicine

Question ID: A	LT.215_00.000 Instrument Variable Name: CHE_HICA QuestionnaireFileName: Adult CAM
QuestionText:	DURING THE PAST 12 MONTHS, did your health insurance cover all of the cost or just some of the cost of seeing a practitioner for chelation therapy?
1	All of the cost
2	Some of the cost
7	Refused
9	Don't know
UniverseText:	Sample adults 18+ whose visit(s) to a practitioner for chelation therapy in the past 12 months were (at least partly) covered by health insurance
SkipInstructio	ns: <1> [goto CHE_MAT] <2,R,D> [goto CHE_HIT]
Question ID: A	LT.216_00.000 Instrument Variable Name: CHE_HIT QuestionnaireFileName: Adult CAM
QuestionText:	Do you know the total amount you paid for seeing a practitioner for chelation therapy in the past 12 months [fill1: not including the amount covered by insurance]?
1	Yes
2	No
7	Refused
9	Don't know
UniverseText:	Sample adults 18+ whose health insurance covered none or some of the cost for chelation therapy in the past 12 months
SkipInstructio	ns: <1> [goto CHE_HITS] <2,R,D> [goto CHE_AVGC]
Question ID: A	LT.217_00.000 Instrument Variable Name: CHE_HITS QuestionnaireFileName: Adult CAM
QuestionText:	What is the total amount you paid for seeing a practitioner for chelation therapy in the past 12 months [fill1: not including the amount covered by insurance]?
	*Enter '0' for no cost or free.
00000-26000	\$0-26000
99997	Refused
99999	Don't know
UniverseText:	Sample adults 18+ who know the amount they paid for chelation therapy in the past 12 months
SkipInstructio	
Soft Edit:	Verify if over \$1000

Adult Alternative Health/Complementary And Alternative Medicine

Document Version Date: 30-May-13

Question ID:	ALT.218_00.000 Instrument Variable Name: CHE_AVGC QuestionnaireFileName: Adult CAM	
QuestionText:	Do you know the average amount you paid for each visit for chelation therapy {fill1: not including the amount covere insurance} in the past 12 months?	ed by
1	Yes	
2	No	
7	Refused	
9	Don't know	
UniverseTex	Sample adults 18+ who don't know the total amount they paid for chelation therapy in the past 12 months	
SkipInstruct	tions: <1> [goto CHE_AVGS] <2,R,D> [goto CHE_MAT]	
Question ID:	ALT.219_00.000 Instrument Variable Name: CHE_AVGS QuestionnaireFileName: Adult CAM	
QuestionText:	On average, how much did you pay out-of-pocket for each visit to a practitioner for chelation therapy?	
	Enter '0' if no cost or free	
000-500	\$0-500	
997	Refused	
999	Don't know	
UniverseTex	Sample adults 18+ who know the average per visit they paid for chelation therapy in the past 12 months	
SkipInstruct	tions: <0-500,R,D> [goto CHE_MAT]	
Question ID:	ALT.220_00.000 Instrument Variable Name: CHE_MAT QuestionnaireFileName: Adult CAM	
QuestionText:	DURING THE PAST 12 MONTHS, did you buy a self-help book or other materials such as a DVD, CD, or Video to learn about chelation therapy?	
1	Yes	
2	No	
7	Refused	
0		

9 Don't know

UniverseText: Sample adults 18+ who have seen a practitioner for chelation therapy in the past 12 months

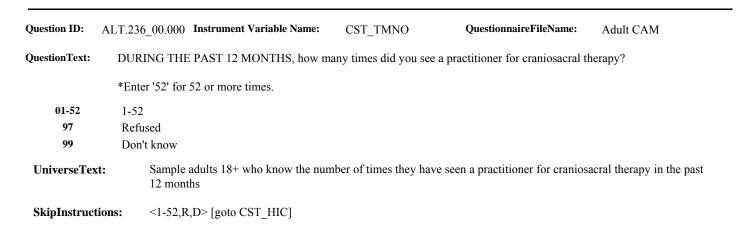
SkipInstructions: <1> [goto CHE_MATC] <2,R,D> [goto CST_USE]

Adult Alternative Health/Complementary And Alternative Medicine

Question ID:					
	ALT.221_00.000 Instr	rument Variable Name:	CHE_MATC	QuestionnaireFileName:	Adult CAM
QuestionText:	About how much di	d you pay for these mate	erials in the past 12 mo	onths?	
	*Enter '200' for \$20	0 or more.			
000-200	\$0-200				
997	Refused				
999	Don't know				
UniverseTex	t: Sample adult	s 18+ who have bought s	self-help materials for	chelation therapy in the past 12	months
SkipInstruct	ions: <0-200,R,D>	[goto CST_USE]			
Question ID:	ALT.231_00.000 Instr	rument Variable Name:	CST_USE	QuestionnaireFileName:	Adult CAM
QuestionText:	? [F1]				
	Have you EVER us	ed any of these therapies	for your health?		
	-	ed any of these therapies by (krey-nee-oh-SEY-kru	-		
1	-		-		
1 2	Craniosacral Therap		-		
	Craniosacral Therap Yes		-		
2	Craniosacral Therap Yes No		-		
2 7	Craniosacral Therap Yes No Refused Don't know	y (krey-nee-oh-SEY-kru	-		
2	Craniosacral Therap Yes No		-		

	2012 NHIS Questionnaire - Adult CAM Adult Alternative Health/Complementary And Alternative Medicine Document Version Date: 30-May-13					
Question ID:	ALT.232	_00.000	Instrument Variable Name:	CST_EVER	QuestionnaireFileName:	Adult CAM
QuestionText:	? [F1]	l				
	Have	you EVE	R seen a provider or practitio	ner for craniosacral	therapy for yourself?	
1	Yes					
2	No					
7	Refu	sed				
9	Don'	t know				
UniverseTex	xt:	Sample	adults 18+ who have ever use	d craniosacral thera	ру	
SkipInstruc	tions:		to CST_USEM] ·[goto CST_USM]			
Question ID:	ALT.233	_00.000	Instrument Variable Name:	CST_USEM	QuestionnaireFileName:	Adult CAM
QuestionText:	?[F1]					
	DURI	NG THE	PAST 12 MONTHS, did you	ı see a practitioner f	or craniosacral therapy?	
1	Yes					
2	No					
7	Refu	sed				
9	Don'	t know				
UniverseTex	xt:	Sample	adults 18+ who have ever see	n a practitioner for o	craniosacral therapy	
SkipInstruc	tions:		o CST_PTIM] > [goto CST_USM]			

			2012	NHI5 Qu	estionnaire -	Adult CAN	1	
	Adult Alternative Health/Complementary And Alternative Medicine Document Version Date: 30-May-13							
Question ID:	ALT.234	_00.000	Instrument Varia	able Name:	CST_USM	Ques	tionnaireFileName:	Adult CAM
QuestionText:	? [F1]							
	DURI	NG THE	PAST 12 MON	THS, did you	u use craniosacral t	herapy?		
1	Yes							
2	No							
7	Refu	sed						
9	Don't	know						
UniverseTex	t:		dults 18+ who h	ave ever use	ed craniosacral ther	apy but have n	ever seen a practit	tioner or have not seen one
		in the pa	st 12 months					
SkinInstruct	ions	-	st 12 months	VRI				
SkipInstruct	ions:	-		VR]				
SkipInstruct	ions:	-	st 12 months	VR]				
SkipInstruct	ions:	-	st 12 months	VR]				
		<1,2,R,E	st 12 months > [goto TRD_E					
		<1,2,R,E	st 12 months		CST_PTIM		tionnaireFileName:	Adult CAM
Question ID:	ALT.235	<1,2,R,E	st 12 months > [goto TRD_E Instrument Varia	able Name:		Ques		
Question ID:	ALT.235	<1,2,R,E	st 12 months > [goto TRD_E Instrument Varia	able Name:	CST_PTIM	Ques		
Question ID: QuestionText:	ALT.235 Do yo	<1,2,R,E	st 12 months > [goto TRD_E Instrument Varia	able Name:	CST_PTIM	Ques		
Question ID: QuestionText: 1	ALT.235 Do yo Yes	<1,2,R,E _00.000 u know t	st 12 months > [goto TRD_E Instrument Varia	able Name:	CST_PTIM	Ques		
Question ID: QuestionText: 1 2	ALT.235 Do yo Yes No Refu	<1,2,R,E _00.000 u know t	st 12 months > [goto TRD_E Instrument Varia	able Name:	CST_PTIM	Ques		
Question ID: QuestionText: 1 2 7	ALT.235 Do yo Yes No Refu Don't	<1,2,R,E _00.000 u know ti sed	st 12 months > [goto TRD_E Instrument Varia ne exact number	able Name: of times you	CST_PTIM	Ques for craniosacr	al therapy in the p	ast 12 months?
Question ID: QuestionText: 1 2 7 9	ALT.235 Do yo Yes No Refu Don't	<1,2,R,E _00.000 u know ti sed know Sample a	st 12 months > [goto TRD_E Instrument Varia ne exact number	able Name: of times you	CST_PTIM 1 saw a practitioner	Ques for craniosacr	al therapy in the p	ast 12 months?



	2012 NHIS Questionnaire - Adult CAM						
	Adult Alternative Health/Complementary And Alternative Medicine						
	Document Version Date: 30-May-13						
Question ID:	ALT.237_00.000 Instrument Variable Name: CST_TMCT QuestionnaireFileName: Adult CAM						
QuestionText:	DURING THE PAST 12 MONTHS, ABOUT how many times did you see a practitioner for craniosacral therapy? Would you say						
	*Read categories below.						
01	Only 1 time						
02	2-5 times						
03	6-10 times						
04	11-15 times						
05	16-20 times						
06	21-25 times						
07	More than 25 times						
97	Refused						
99	Don't know						
UniverseTex	At: Sample adults 18+ who don't know the specific number of times they have seen a practitioner for craniosacral therapy in the past 12 months or refuse the specific number of times						
SkipInstruct	tions: <1-7,R,D> [goto CST_HIC]						

Question ID:	ALT.238_0	0.000	Instrument Variable Nan	ne:	CST_HIC		QuestionnaireFile	eName:	Adult CAM
QuestionText:	DURING health in		E PAST 12 MONTHS, we	ere any	of the costs o	of seeing a	practitioner for cr	aniosacral	therapy covered by
1	Yes								
2	No								
7	Refused								
9	Don't kı	low							
UniverseTex	at: Sa	mple	adults 18+ who have see	n a prac	titioner for c	raniosacral	therapy in the pas	st 12 mont	hs
SkipInstruct		20	to CST_HICA] > [goto CST_HIT]						

Adult Alternative Health/Complementary And Alternative Medicine

Question ID: A	ALT.239_00.000 Instrument Variable Name: CST_HICA QuestionnaireFileName: Adult CAM
QuestionText:	DURING THE PAST 12 MONTHS, did your health insurance cover all of the cost or just some of the cost of seeing a
	practitioner for craniosacral therapy?
1	All of the cost
2	Some of the cost
7	Refused
9	Don't know
UniverseText:	
SkipInstructio	ns: <1> [goto CST_MAT] <2,R,D> [goto CST_HIT]
Question ID: A	ALT.240_00.000 Instrument Variable Name: CST_HIT QuestionnaireFileName: Adult CAM
QuestionText:	Do you know the total amount you paid for seeing a practitioner for craniosacral therapy in the past 12 months [fill1: not including the amount covered by insurance]?
1	Yes
2	No
7	Refused
9	Don't know
UniverseText:	Sample adults 18+ whose health insurance covered none or some of the cost for craniosacral therapy in the past 12 months
SkipInstructio	ns: <1> [goto CST_HITS] <2,R,D> [goto CST_AVGC]
Question ID: A	ALT.241_00.000 Instrument Variable Name: CST_HITS QuestionnaireFileName: Adult CAM What is the total amount you paid for seeing a practitioner for craniosacral therapy in the past 12 months [fill1: not
	including the amount covered by insurance]? *Enter '0' for no cost or free.
00000-26000	
99997 999999	\$0-26000 Refused Don't know
UniverseText:	Sample adults 18+ who know the amount they paid for craniosacral therapy in the past 12 months
SkipInstructio	ns: <0-26000,R,D> [goto CST_MAT]
Soft Edit:	Verify if over \$1000

Adult Alternative Health/Complementary And Alternative Medicine

Document Version Date: 30-May-13

Question ID:	ALT.242_00.000 Instrument Variable Name: CST_AVGC QuestionnaireFileName: Adult CAM
QuestionText:	Do you know the average amount you paid for each visit for craniosacral therapy {fill1: not including the amount covered by insurance} in the past 12 months?
1	Yes
2	No
7	Refused
9	Don't know
UniverseText :	Sample adults 18+ who don't know the total amount they paid for craniosacral therapy in the past 12 months
SkipInstructio	ons: <1> [goto CST_AVGS] <2,R,D> [goto CST_MAT]
Question ID:	ALT.243_00.000 Instrument Variable Name: CST_AVGS QuestionnaireFileName: Adult CAM On average, how much did you pay out-of-pocket for each visit to a practitioner for craniosacral therapy?
Question rext:	On average, now much did you pay out-of-pocket for each visit to a practitioner for craniosacral therapy?
	Enter '0' if no cost or free
000-500	\$0-500
997	Refused
999	Don't know
T	
UniverseText:	Sample adults 18+ who know the average per visit they paid for craniosacral therapy in the past 12 months
SkipInstructio	ons: <0-500,R,D> [goto CST_MAT]
	ALT 244 00 000 Jacteria Variable Nerrow CET MAT Oractions in FileNerrow Alt 1/ CAM
Question ID:	ALT.244_00.000 Instrument Variable Name: CST_MAT QuestionnaireFileName: Adult CAM
QuestionText:	DURING THE PAST 12 MONTHS, did you buy a self-help book or other materials such as a DVD, CD, or Video to learn about craniosacral therapy?
1	Yes
2	No
7	Refused
9	Don't know
UniverseText:	Sample adults 18+ who have seen a practitioner for craniosacral therapy in the past 12 months

 SkipInstructions:
 <1> [goto CST_MATC]

 <2,R,D> [goto TRD_EVR]

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Question ID:	ALT.245_00.000	Instrument Variable Name:	CST_MATC	QuestionnaireFileName:	Adult CAM
QuestionText:	About how m	uch did you pay for these mat	terials in the past 12 m	onths?	
	*Enter '200' fe	or \$200 or more.			
000-200	\$0-200				
997	Refused				
999	Don't know				
UniverseText:	Sample	e adults 18+ who have bought	self-help materials for	craniosacral therapy in the past	12 months
SkipInstructio	ons: <0-200	,R,D>[goto TRD EVR]			
Question ID:	ALT.255_00.000	Instrument Variable Name:	TRD_EVR	QuestionnaireFileName:	Adult CAM
Question ID: A	ALT.255_00.000 ? [F1] (book)		TRD_EVR	QuestionnaireFileName:	Adult CAM
	? [F1] (book)		-	QuestionnaireFileName:	Adult CAM
	? [F1] (book) Have you EV	CAM1 ER seen any of these traditior	-	QuestionnaireFileName:	Adult CAM
	? [F1] (book) Have you EV Native Ameri Shaman (SHA	CAM1 ER seen any of these traditior can Healer/Medicine Man \H-man)	nal healers?		Adult CAM
	? [F1] (book) Have you EV Native Americ Shaman (SHA Curandero (cc	CAM1 ER seen any of these traditior can Healer/Medicine Man AH-man) po-rahn-DEHR-oh), Machi (M	nal healers? 1AH-chee) or Parchero		Adult CAM
	? [F1] (book) Have you EV Native Ameri Shaman (SHA Curandero (co Yerbero (yehr	CAM1 ER seen any of these traditior can Healer/Medicine Man AH-man) po-rahn-DEHR-oh), Machi (M r-BEHR-oh) or Hierbista (yeh	nal healers? 1AH-chee) or Parchero		Adult CAM
	? [F1] (book) Have you EV Native Americ Shaman (SHA Curandero (cc	CAM1 ER seen any of these traditior can Healer/Medicine Man M-man) po-rahn-DEHR-oh), Machi (M -BEHR-oh) or Hierbista (yeh pah-DOHR)	nal healers? 1AH-chee) or Parchero		Adult CAM
	? [F1] (book) Have you EV Native Ameri Shaman (SHA Curandero (co Yerbero (yehr Sobador (so-b	CAM1 ER seen any of these traditior can Healer/Medicine Man M-man) po-rahn-DEHR-oh), Machi (M -BEHR-oh) or Hierbista (yeh pah-DOHR)	nal healers? 1AH-chee) or Parchero		Adult CAM
QuestionText:	? [F1] (book) Have you EV Native Ameri Shaman (SHA Curandero (cc Yerbero (yehr Sobador (so-b Huesero (weh	CAM1 ER seen any of these traditior can Healer/Medicine Man M-man) po-rahn-DEHR-oh), Machi (M -BEHR-oh) or Hierbista (yeh pah-DOHR)	nal healers? 1AH-chee) or Parchero		Adult CAM
QuestionText: 1	? [F1] (book) Have you EV Native Americ Shaman (SHA Curandero (cc Yerbero (yehr Sobador (so-b Huesero (weh Yes	CAM1 ER seen any of these traditior can Healer/Medicine Man M-man) po-rahn-DEHR-oh), Machi (M -BEHR-oh) or Hierbista (yeh pah-DOHR)	nal healers? 1AH-chee) or Parchero		Adult CAM
QuestionText: 1 2	? [F1] (book) Have you EV Native Ameri Shaman (SHA Curandero (cc Yerbero (yehr Sobador (so-b Huesero (weh Yes No	CAM1 ER seen any of these traditior can Healer/Medicine Man M-man) po-rahn-DEHR-oh), Machi (M -BEHR-oh) or Hierbista (yeh pah-DOHR)	nal healers? 1AH-chee) or Parchero		Adult CAM
QuestionText: 1 2 7	? [F1] (book) Have you EV Native Ameri Shaman (SHA Curandero (cc Yerbero (yehr Sobador (so-b Huesero (weh Yes No Refused Don't know	CAM1 ER seen any of these traditior can Healer/Medicine Man M-man) po-rahn-DEHR-oh), Machi (M -BEHR-oh) or Hierbista (yeh pah-DOHR)	nal healers? 1AH-chee) or Parchero		Adult CAM
QuestionText: 1 2 7 9	? [F1] (book) Have you EV Native Ameri Shaman (SHA Curandero (cc Yerbero (yehr Sobador (so-b Huesero (weh Yes No Refused Don't know Sample	CAM1 ER seen any of these traditior can Healer/Medicine Man AH-man) bo-rahn-DEHR-oh), Machi (M r-BEHR-oh) or Hierbista (yeh bah-DOHR) -SEHR-oh)	nal healers? 1AH-chee) or Parchero		Adult CAM

2012 NHIS Questionnaire - Adult CAM								
Adult Alternative Health/Complementary And Alternative Medicine Document Version Date: 30-May-13								
Question ID:	ALT.256_00.010 Instrument Variable Name:	TRD_EVR1	QuestionnaireFileName:	Adult CAM				
QuestionText:	? [F1] (book) CAM1							
	Which ones?							
	*Enter all that apply, separate with commas.							
	 2 Shaman (SHAH-man) 3 Curandero (coo-rahn-DEHR-oh), Machi (MAH-chee), or Parchero (pahr-CHEH-roh) 4 Yerbero (yehr-BEH-roh) or Hierbista (yehr-BEE-stah) 5 Sobador (so-bah-DOHR) 6 Huesero (weh-SEHR-oh) 7 Refused 							
SkipInstruc	tions: cycle through "TRDU" questions for all <1> [goto TRDU_NAH] <2> [goto TRDU_SHA] <3> [goto TRDU_CUR] <4> [goto TRDU_YER] <5> [goto TRDU_SOB] <6> [goto TRDU_HUE] <r,d> [goto AVT_USE] If TRD_EVR1 includes 1 goto TRDU_1 elseif TRD_EVR1 includes 2 goto TRD elseif TRD_EVR1 includes 3 goto TRD elseif TRD_EVR1 includes 4 goto TRD elseif TRD_EVR1 includes 5 goto TRD elseif TRD_EVR1 includes 5 goto TRD elseif TRD_EVR1 includes 6 goto TRD</r,d>	NAH U_SHA U_CUR U_YER U_YER U_SOB	ners:					

Adult Alternative Health/Complementary And Alternative Medicine

Question ID:	ALT.257_0	00.000	Instrument Varial	le Name:	TRDU_NAH	QuestionnaireFileName:	Adult CAM
QuestionText:	? [F1]						
	DURIN	G THE	PAST 12 MONT	HS, did you	ı see?		
	A Nativ	e Amei	rican Healer or Me	dicine Man			
1	Yes						
2	No						
7	Refuse	d					
9	Don't k	now					
UniverseTex	t: S	ample	adults 18+ who ha	ve ever see	n a Native American	Healer or Medicine Man	
SkipInstruct	<	1> If n	o more were selec	ted at TRD	re than one selected [{ _EVR1 [goto TRD_P t TRD_EVR1 [goto A		

Question ID:	ALT.258	8_00.000	Instrument Variable Name:	TRDU_SHA	QuestionnaireFileName:	Adult CAM
QuestionText:	? [F1]				
	DUR	ING THE	PAST 12 MONTHS, did y	vou see?		
	A Sh	aman (SH	AH-man)			
1	Yes					
2	No					
7	Refi	ised				
9	Don	't know				
UniverseTex	xt:	Sample a	adults 18+ who have ever s	een a Shaman		
SkipInstruct	tions:	<1> If n	D> if TRD_EVR1='1' and n o more were selected at TR • If If no more were selected	D_EVR1 [goto TRD_		

2012 NHIS Questionnaire - Adult CAM Adult Alternative Health/Complementary And Alternative Medicine Document Version Date: 30-May-13 **Question ID:** ALT.259 00.000 Instrument Variable Name: QuestionnaireFileName: TRDU CUR Adult CAM **QuestionText:** ? [F1] DURING THE PAST 12 MONTHS, did you see ...? A Curandero (coo-rahn-DEHR-oh), Machi (MAH-chee), or Parchero (pahr-CHEH-roh) Yes No Refused Don't know

Sample adults 18+ who have ever seen a Curandero, Machi, or Parchero UniverseText: <1,2,R,D> if TRD EVR1='1' and more than one selected [goto next TRDU question], **SkipInstructions:** <1> If no more were selected at TRD_EVR1 [goto TRD_PTIM] <2,R,D> If If no more were selected at TRD EVR1 [goto AVT USE]

1

2

7

9

Question ID: ALT.260 00.000 Instrument Variable Name: TRDU_YER QuestionnaireFileName: Adult CAM **QuestionText:** ? [F1] DURING THE PAST 12 MONTHS, did you see ...? A Yerbero (yehr-BEH-rho) or Hierbista (yehr-BEE-stah) 1 Yes 2 No 7 Refused 9 Don't know UniverseText: Sample adults 18+ who have ever seen a Yerbero or Hierbista **SkipInstructions:** <1,2,R,D> if TRD EVR1='1' and more than one selected [goto next TRDU question], <1> If no more were selected at TRD EVR1 [goto TRD PTIM] <2,R,D> If If no more were selected at TRD EVR1 [goto AVT USE]

Adult Alternative Health/Complementary And Alternative Medicine

Question ID:	ALT.261_	00.000	Instrument Variable Name:	TRDU_SOB	QuestionnaireFileName:	Adult CAM
QuestionText:	? [F1]					
	DURIN	NG THE	PAST 12 MONTHS, did you	u see?		
	A Soba	ador (so-	bah-DOHR)			
1	Yes					
2	No					
7	Refus	ed				
9	Don't	know				
UniverseTex	xt:	Sample	adults 18+ who have ever see	en a Sobador		
SkipInstruct		<1> If n	D> if TRD_EVR1='1' and mo o more were selected at TRD If If no more were selected at	_EVR1 [goto TRD		

Question ID:	ALT.262_	00.000	Instrument Variable Name:	TRDU_HUE	QuestionnaireFileName:	Adult CAM
QuestionText:	? [F1]					
	DURI	NG THE	PAST 12 MONTHS, did you	ı see?		
	A Hue	sero (we	h-SEHR-oh)			
1	Yes					
2	No					
7	Refus	ed				
9	Don't	know				
UniverseTex	at:	Sample a	adults 18+ who have ever see	n a Huesero		
SkipInstruct		<2,R,D>	to TRD_PTIM] if no to all applicable TRDU o TRD_PTIM]	, [goto AVT_USE];		

Adult Alternative Health/Complementary And Alternative Medicine

	ALT.263_00.000 Ins	strument Variable Name:	TRD_PTIM	QuestionnaireFileName:	Adult CAM
QuestionText:	Do you know the o	exact number of times you	a saw traditional heal	ers in the past 12 months?	
1	Yes				
2	No				
7	Refused				
9	Don't know				
UniverseTex	: Sample adu	lts 18+ who have seen tra	ditional healers in the	e past 12 months	
SkipInstruct		RD_TMNO] oto TRD_TMCT]			
Question ID:	ALT.264_00.000 Ins	strument Variable Name:	TRD_TMNO	QuestionnaireFileName:	Adult CAM
-	—	strument Variable Name: ST 12 MONTHS, how m			Adult CAM
-	—	ST 12 MONTHS, how m			Adult CAM
-	– DURING THE PA	ST 12 MONTHS, how m			Adult CAM
QuestionText:	DURING THE PA	ST 12 MONTHS, how m			Adult CAM
QuestionText: 01-52	DURING THE PA *Enter '52' for 52 of 1-52	ST 12 MONTHS, how m			Adult CAM
97	DURING THE PA *Enter '52' for 52 of 1-52 Refused Don't know	ST 12 MONTHS, how m	aany times did you se		

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2012 NHIS Questionnaire - Adult CAM								
	Adult Alternative Health/Complementary And Alternative Medicine							
	Document Version Date: 30-May-13							
Question ID:	ALT.265_00.000 Instrument Variable Name: TRD_TMCT QuestionnaireFileName: Adult CAM							
QuestionText:	DURING THE PAST 12 MONTHS, ABOUT how many times did you see traditional healers? Would you say							
	*Read categories below.							
01	Only 1 time							
02	2-5 times							
03	6-10 times							
04	11-15 times							
05	16-20 times							
06	21-25 times							
07	More than 25 times							
97	Refused							
99	Don't know							
UniverseTex	t: Sample adults 18+ who don't know the specific number of times they have seen traditional healers in the past 12 months or refuse the specific number of times							
SkipInstruct	tions: <1-7,R,D> [goto TRD_HIC]							

Question ID:	ALT.266_00.000 Instrument Variable Name:	TRD_HIC	QuestionnaireFileName:	Adult CAM
QuestionText:	DURING THE PAST 12 MONTHS, were	any of the costs of see	eing traditional healers covered by	v health insurance?
1	Yes			
2	No			
7	Refused			
9	Don't know			
UniverseTex	xt: Sample adults 18+ who have seen t	raditional healers in th	e past 12 months	
SkipInstruct	tions: <1> [goto TRD_HICA] <2,R,D> [goto TRD_HIT]			

Adult Alternative Health/Complementary And Alternative Medicine

	LT.267_00.000 Instrument Variable Name: TRD_HICA QuestionnaireFileName: Adult CAM
Question ID: A QuestionText:	DURING THE PAST 12 MONTHS, did your health insurance cover all of the cost or just some of the cost of seeing
2-Double Cat	traditional healers?
1	All of the cost
2	Some of the cost
7	Refused
9	Don't know
UniverseText:	Sample adults 18+ whose visit(s) to traditional healers in the past 12 months were (at least partly) covered by health insurance
SkipInstructio	ns: <1> [goto TRD_MAT] <2,R,D> [goto TRD_HIT]
Question ID: A	LT 268,00,000 Instrument Verichle Namer TBD IIIT OuestienneizeFileNamer Adult CAM
-	ALT.268_00.000 Instrument Variable Name: TRD_HIT QuestionnaireFileName: Adult CAM
QuestionText:	Do you know the total amount you paid for seeing traditional healers in the past 12 months [fill1: not including the amount covered by insurance]?
1	Yes
2	No
7	Refused
9	Don't know
UniverseText:	Sample adults 18+ whose health insurance covered none or some of the cost for traditional healers in the past 12 months
SkipInstructio	de la traditional de la companya de la compa
	ns: <1> [goto TRD_HITS] <2,R,D> [goto TRD_AVGC]
Question ID: A	
	<2,R,D> [goto TRD_AVGC]
Question ID: A	<2,R,D> [goto TRD_AVGC] ALT.269_00.000 Instrument Variable Name: TRD_HITS QuestionnaireFileName: Adult CAM What is the total amount you paid for seeing traditional healers in the past 12 months [fill1: not including the amount
	<2,R,D> [goto TRD_AVGC] ALT.269_00.000 Instrument Variable Name: TRD_HITS QuestionnaireFileName: Adult CAM What is the total amount you paid for seeing traditional healers in the past 12 months [fill1: not including the amount covered by insurance]?
QuestionText:	<2,R,D> [goto TRD_AVGC] ALT.269_00.000 Instrument Variable Name: TRD_HITS QuestionnaireFileName: Adult CAM What is the total amount you paid for seeing traditional healers in the past 12 months [fill1: not including the amount covered by insurance]? *Enter '0' for no cost or free.
QuestionText: 00000-26000 99997	<2,R,D> [goto TRD_AVGC] ALT.269_00.000 Instrument Variable Name: TRD_HITS QuestionnaireFileName: Adult CAM What is the total amount you paid for seeing traditional healers in the past 12 months [fill1: not including the amount covered by insurance]? *Enter '0' for no cost or free. \$0-26000 Refused Don't know
QuestionText: 00000-26000 99997 99999	<2,R,D> [goto TRD_AVGC] xLT.269_00.000 Instrument Variable Name: TRD_HITS QuestionnaireFileName: Adult CAM What is the total amount you paid for seeing traditional healers in the past 12 months [fill1: not including the amount covered by insurance]? *Enter '0' for no cost or free. \$0-26000 Refused Don't know Sample adults 18+ who know the amount they paid for traditional healers in the past 12 months

Adult Alternative Health/Complementary And Alternative Medicine

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Question ID:	ALT.270_00.000 Instrument Variable Name	TRD_AVGC	QuestionnaireFileName:	Adult CAM
QuestionText:	Do you know the average amount you pa insurance} in the past 12 months?	id for each visit to tradit	ional healers {fill1: not including	g the amount covered by
1	Yes			
2	No			
7	Refused			
9	Don't know			
UniverseTex	t: Sample adults 18+ who don't know	v the total amount they p	baid for traditional healers in the	past 12 months
SkipInstructi	tions: <1> [goto TRD_AVGS] <2,R,D> [goto TRD_MAT]			
	ALT 271 00 000 Instrument Veriable News		OuestionneinsEileNeme	
Question ID:	ALT.271_00.000 Instrument Variable Name	: TRD_AVGS	QuestionnaireFileName:	Adult CAM
QuestionText:	On average, how much did you pay out-o	of-pocket for each visit to	o traditional healers?	
	Enter '0' if no cost or free			
000 500				
000-500 997	\$0-500 Refused			
997 999	Don't know			
UniverseTex	t: Sample adults 18+ who know the a	average per visit they pa	id for traditional healers in the pa	st 12 months
SkipInstructi	ions: <0-500,R,D> [goto TRD_MAT]			
Question ID:	ALT.272_00.000 Instrument Variable Name	: TRD_MAT	QuestionnaireFileName:	Adult CAM
Question ID: QuestionText:	ALT.272_00.000 Instrument Variable Name DURING THE PAST 12 MONTHS, did learn about traditional healers?		-	
	DURING THE PAST 12 MONTHS, did		-	
QuestionText:	DURING THE PAST 12 MONTHS, did learn about traditional healers?		-	

9 Don't know

UniverseText: Sample adults 18+ who have seen traditional healers in the past 12 months

SkipInstructions: <1> [goto TRD_MATC] <2,R,D> [goto AVT_USE]

Adult Alternative Health/Complementary And Alternative Medicine

ALT.273_00.000 Instrument Variable Name: TRD_MATC QuestionnaireFileName: Adult CAM
About how much did you pay for these materials in the past 12 months?
*Enter '200' for \$200 or more.
\$0-200
Refused
Don't know
t: Sample adults 18+ who have bought self-help materials for traditional healers in the past 12 months
ions: <0-200,R,D> [goto AVT_USE]
ALT.283_00.000 Instrument Variable Name: AVT_USE QuestionnaireFileName: Adult CAM
? [F1]
Now I am going to ask you about some additional health practices. The first practice I'll ask about is vitamins and
minerals. These are pills, capsules, tablets, or liquids that have been labeled as a VITAMIN OR MINERAL
SUPPLEMENT. I'll ask about herbs or other non-vitamin supplements next.
Have you EVER taken multi-vitamins or multi-minerals?
Yes
No
Refused
Don't know
t: Sample adults 18+
ions: <1> [goto AVT_USM]
<2,R,D> [goto AVT_ABEV]

2012 NHIS Questionnaire - Adult CAM Adult Alternative Health/Complementary And Alternative Medicine Document Version Date: 30-May-13 **Question ID:** ALT.284 00.000 Instrument Variable Name: AVT USM QuestionnaireFileName: Adult CAM **QuestionText:** DURING THE PAST 12 MONTHS, did you take multi-vitamins or multi-minerals? 1 Yes 2 No 7 Refused 9 Don't know UniverseText: Sample adults 18+ who have ever taken multi-vitamins or multi-minerals SkipInstructions: <1,2,R,D> [goto AVT_ABEV] **Question ID:** ALT.285_00.000 Instrument Variable Name: QuestionnaireFileName: AVT ABEV Adult CAM

QuestionText: {fill1: Other than in a multi-vitamin or mineral have/Have} you EVER taken vitamins A,B,C,D,E,H, or K?

1	Yes
2	No
7	Refused
9	Don't know
UniverseText:	Sample adults 18+
SkipInstructions	s: <1> [goto AVT_ABUM] <2,R,D,> [goto AVT_CAEV]

Question ID:	ALT.286_00.000 Instru	ument Variable Name:	AVT_ABUM	QuestionnaireFileName:	Adult CAM
QuestionText:	DURING THE PAS	T 12 MONTHS, did you	take vitamins A,B,C,	D,E,H, or K?	
1	Yes				
2	No				
7	Refused				
9	Don't know				
UniverseTex	t: Sample adults	18+ who have ever take	en vitamins A,B,C,D,E	,H, or K	
SkipInstruct	ions: <1,2,R,D>[go	oto AVT_CAEV]			

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QuestionText:			AVT_CAEV	QuestionnaireFileName:	Adult CAM
	[fill1: Other th selenium, or p		eral] Have you EVER ta	aken calcium, magnesium, iron,	chromium, zinc,
1	Yes				
2	No				
7	Refused				
9	Don't know				
UniverseText	: Sample	adults 18+			
SkipInstructi		to AVT_CAUM] > [goto AHB_EVR]			
Question ID:	ALT.288_00.000	Instrument Variable Name:	AVT_CAUM	QuestionnaireFileName:	Adult CAM
	—		_	QuestionnaireFileName: sium, iron, chromium, zinc, sele	
	—		_		
QuestionText:	– DURING THE		_		
QuestionText: 1	– DURING THE Yes		_		

SkipInstructions: <1,2,R,D> [goto AHB_EVR]

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	2012 NHIS Questionnaire - Adult CAM
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	Document Version Date: 30-May-13
Question ID:	ALT.298_00.000 Instrument Variable Name: AHB_EVR QuestionnaireFileName: Adult CAM
QuestionText:	? [F1] (book) CAM2
	Herbs or other non-vitamin supplements are pills, capsules, tablets, or liquids that have been labeled as a DIETARY SUPPLEMENT. This does NOT include vitamin or mineral supplements, homeopathic treatments, or drinking herbal or green teas.
	Have you EVER taken any herbal or other non-vitamin supplements listed on this card for yourself?
	*Tinctures are included.
1 2 7 9 UniverseTex SkipInstruct	
Question ID: QuestionText:	ALT.299_00.000 Instrument Variable Name: AHB_USM QuestionnaireFileName: Adult CAM
guestion i ext.	? [F1] (book) CAM2 DURING THE PAST 12 MONTHS, have you taken any herbal or other non-vitamin supplements listed on this card for
	yourself?
1 2	Yes No
2 7	No Refused
9	Don't know
UniverseTex	st: Sample adults 18+ who have ever taken herbs or other non-vitamin supplements
SkipInstruct	tions: <1> [goto AHB_LSTY] <2,R,D> if VIT_USM=1 [goto AVT_BOFN]; else [goto HOM_USE]

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Document Version Date: 30-May-13

Question ID:	ALT.300_00.000	Instrument Variable Name:	AHB_LSTY	QuestionnaireFileName:	Adult CAM
QuestionText:	? [F1] (book) C	AM2			
		which of these supplements y ngle supplement, select "con		NG THE PAST 12 MONTHS?	If you took more than
	*Enter all that a	apply, separate with commas			
01	Combination h	erb pill			
02	Acai (pills, gel	caps)			
03	Bee Pollen and	l other Bee products			
04	Chondroitin				
05	Co-enzyme Q	10 (CoQ10)			
06	Cranberry (pil	ls or capsules)			
07	Digestive Enzy	ymes (lactaid)			
08	Echinacea				
09	Fish Oil or om	ega 3 or DHA fatty acid or H	EPA fatty acid suppler	ments	
10	Garlic supplen	nents (pills, gelcaps)			
11	Ginkgo Biloba	L			
12	Ginseng				
13	Glucosamine				
14	Green tea pills	(not brewed tea) or EGCG	(pills)		
15	Melatonin				
16	Milk Thistle (s	silymarin)			
17	MSM (Methyl	sulfonylmethane)			
18	Probiotics or F	rebiotics			
19	SAM-e				
20	Saw Palmetto				
21	Valerian				
22	Other herbs or	non-vitamin supplements			
97	Refused				
99	Don't know				
UniverseText	t: Sample a	adults 18+ who have taken h	erbs or other non-vita	min supplements in the past 12 r	nonths

SkipInstructions: <1-22> [goto AHB_MON] <R,D> [goto AHB_EVR1]

Adult Alternative Health/Complementary And Alternative Medicine

Question ID:	ALT.301	_00.000 Instrument Variable Name:	AHB_MON	QuestionnaireFileName:	Adult CAM
QuestionText:	(book	c) CAM2			
	Did y	ou take any of these DURING THE PA	AST 30 DAYS?		
1	Yes				
2	No				
7	Refu	sed			
9	Don	t know			
UniverseTex	t:	Sample adults 18+ who have taken sp	ecific herbs or other	non-vitamin supplements in the pa	ast 12 months
SkipInstruct	ions:	<1> [goto AHB_LSTM] <2,R,D> [goto AHB_EVR1]			

Adult Alternative Health/Complementary And Alternative Medicine

Question ID:	ALT.302_00.000 Instrument Variable Name: AHB_LSTM QuestionnaireFileName: Adult CAM
QuestionText:	(book) CAM2
	Which of these supplements have you taken DURING THE PAST 30 DAYS? If you took more than one herb in a single supplement, select "combination herb pill."
	*Enter all that apply, separate with commas.
01	Combination herb pill
02	Acai (pills, gelcaps)
03	Bee Pollen and other Bee products
04	Chondroitin
05	Co-enzyme Q10 (CoQ10)
06	Cranberry (pills or capsules)
07	Digestive Enzymes (lactaid)
08	Echinacea
09	Fish Oil or omega 3 or DHA fatty acid or EPA fatty acid supplements
10	Garlic supplements (pills, gelcaps)
11	Ginkgo Biloba
12	Ginseng
13	Glucosamine
14	Green tea pills (not brewed tea) or EGCG (pills)
15	Melatonin
16	Milk Thistle (silymarin)
17	MSM (Methylsulfonylmethane)
18	Probiotics or Prebiotics
19	SAM-e
20	Saw Palmetto
21	Valerian
22	Other herbs or non-vitamin supplements
97	Refused
99	Don't know
UniverseTex	Sample adults 18+ who have taken herbs or other non-vitamin supplements in the past 30 days
SkipInstruc	 ctions: <1> [goto AHB_CHPN] <1,2-21> if AHB_CNT>2 [goto AHB_CHPN] (then to AHB_CHP1 to AHB_TP2) <1,2-21,22> if AHB_CNT>2[goto AHB_CHPN] (then to AHB_CHP1 to AHB_MOTH to AHB_LU1 (if more than 1 to AHB_LU2) goo AHB_TP2 <2-21> if AHB_CNT>2 [goto AHB_TP2] <22> [goto AHB_MOTH]; <2-21,22> if AHB_CNT>2,[goto AHB_MOTH], to AHB_LU1 (if more than 1 to AHB_LU2) go to AHB_TP2 else if AHB_CNT<=2 <2-21> [goto AHB_MOTH].

Adult Alternative Health/Complementary And Alternative Medicine

Question ID:	ALT.303_00.000 Instrument Variable Name:	AHB_CHPN	QuestionnaireFileName:	Adult CAM
QuestionText:	How many different "combination herb pills"	" did you take?		
01-50	1-50			
97	Refused			
99	Don't know			
UniverseTex	t: Sample adults 18+ who have taken a c	combination herb pil	l in the past 30 days	
SkipInstruct	ions: <1-50,R,D> [goto AHB_CHP1]			

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Question ID:	ALT.304_00.000 Instrument Variable Name: AHB_CHP1 QuestionnaireFileName: Adult CAM							
QuestionText:	(book) CAM2							
	If AHB_CHPN=R,D, fill: {Which herbs or other non-vitamin supplements are included in the combination herb pill or pills?} If AHB_CHPN=1 fill:							
	{Which herbs or other non-vitamin supplements are included in the combination herb pill?} Else if AHB CHPN=2 fill:							
	{Which herbs or other non-vitamin supplements are included in the first combination herb pill?}							
	Else if AHB_CHPN=3-50, fill: {Thinking of the two combination herb pills you take most often, what herbs or other non-vitamin supplements a included in the first combination herb pill?}	re						
	*Enter all that apply, separate with commas.							
02	Acai (pills, gelcaps)							
03	Bee Pollen and other Bee products							
04	Chondroitin							
05	Co-enzyme Q10 (CoQ10)							
06	Cranberry (pills or capsules)							
07	Digestive Enzymes (lactaid)							
08	Echinacea							
09	Fish Oil or omega 3 or DHA fatty acid or EPA fatty acid supplements							
10	Garlic supplements (pills, gelcaps)							
11	Ginkgo Biloba							
12	Ginseng							
13	Glucosamine							
14	Green tea pills (not brewed tea) or EGCG (pills)							
15	Melatonin							
16	Milk Thistle (silymarin)							
17	MSM (Methylsulfonylmethane)							
18	Probiotics or Prebiotics							
19	SAM-e							
20	Saw Palmetto							
21	Valerian							
22	Other herbs or non-vitamin supplements							
97	Refused							
99	Don't know							
UniverseTex	xt: Sample adults 18+ who have taken a select number of combination herb pill(s) in the past 30 days							
SkipInstruc	etions: <2-22,R,D> if AHB_CHPN GE 2 [goto AHB_CHP2]; else if AHB_LSTM=2-21 and AHB_CNT>2 [goto AHB_TP2]; else if AHB_LSTM=22 [goto AHB_MOTH]; else IF AHB_CHPN=1 [goto AHB_EVR1]							

2012 NHIS Questionnaire - Adult CAM Adult Alternative Health/Complementary And Alternative Medicine Document Version Date: 30-May-13 **Question ID:** ALT.305 00.000 Instrument Variable Name: QuestionnaireFileName: AHB CHP2 Adult CAM **QuestionText:** (book) CAM2 If AHB CHPN=2, fill: {Which herbs or other non-vitamin supplements are included in the second combination herb pill?} Else if AHB CHPN=3-50, fill: {Thinking of the two combination herb pills you take most often, what herbs or other non-vitamin supplements are included in the second combination herb pill?} 02 Acai (pills, gelcaps) 03 Bee Pollen and other Bee products 04 Chondroitin 05 Co-enzyme Q10 (CoQ10) 06 Cranberry (pills or capsules) 07 Digestive Enzymes (lactaid) 08 Echinacea 09 Fish Oil or omega 3 or DHA fatty acid or EPA fatty acid supplements 10 Garlic supplements (pills, gelcaps) 11 Ginkgo Biloba 12 Ginseng 13 Glucosamine 14 Green tea pills (not brewed tea) or EGCG (pills) 15 Melatonin 16 Milk Thistle (silymarin) 17 MSM (Methylsulfonylmethane) 18 **Probiotics or Prebiotics** 19 SAM-e 20 Saw Palmetto 21 Valerian 22 Other herbs or non-vitamin supplements 97 Refused 99 Don't know UniverseText: Sample adults 18+ who have taken two or more combination herb pills **SkipInstructions:** <2-22,R,D> if AHB CNT>2 [goto AHB TP2]; else if AHB LSTM=22 [goto AHB MOTH];

else [goto AHB EVR1]

Adult Alternative Health/Complementary And Alternative Medicine

Question ID:	ALT.306_00.00)0 Instrument Variable Name:	AHB_MOTH	QuestionnaireFileName:	Adult CAM
QuestionText:	How many	of these other herbs or non-vita	min supplements have	you taken in the past 30 days?	
	*Enter '50' f	for 50 or more.			
01-50 97 99	1-50 Refused Don't know	,			
UniverseTex	xt: Samp	ole adults 18+ who have taken of	other type of herb or no	n-vitamin supplement	
SkipInstruct	<r,d< td=""><th><pre>D> [goto AHB_LU1]; > if AHB_CNT>2[goto AHB_ se if AHB_CNT=2 [goto AHB_</pre></th><td></td><td></td><td></td></r,d<>	<pre>D> [goto AHB_LU1]; > if AHB_CNT>2[goto AHB_ se if AHB_CNT=2 [goto AHB_</pre>			
Question ID:	ALT.307_00.00	00 Instrument Variable Name:	AHB_LU1	QuestionnaireFileName:	Adult CAM
uestionText:				min supplement you took in the itamin supplements you took in	
	*Enter the n	ame of the first herb/non-vitan	nin supplement to locat	e in the look-up table.	
	*Enter 'ZZ'	if herb/non-vitamin supplemen	t not found.		
< 09 97	50 characte Don't Know Refused	ers allowed in look-up table> v			
UniverseTex	xt: Samp	ele adults 18+ who have taken a	a specific number of oth	ner herbs or non-vitamin suppler	nents
SkipInstruct	if AH else i	>> IB_MOTH GE 2 [goto AHB_L f_AHB_MOTH=1 [goto AHB_			
	<r,d< td=""><th></th><td></td><td></td><td></td></r,d<>				

Adult Alternative Health/Complementary And Alternative Medicine

Document Version Date: 30-May-13

Question ID:	ALT.308_00.000 Instrument Variable Name:	AHB_LU2	QuestionnaireFileName:	Adult CAM			
QuestionText:	*Enter the second most important other herl	o/non-vitamin supple	ement as reported by the responde	nt			
	*Enter 'ZZ' if herb/non-vitamin supplement	not found.					
	50 characters allowed in look-up table						
09	Don't Know						
97	Refused	ofused					
UniverseTex	xt: Sample adults 18+ who have taken tw	vo or more other her	bs or non-vitamin supplements				
SkipInstruc	tions: <herb,r,d,zz> if AHB_CNT>2 [got</herb,r,d,zz>						

else if AHB_CNT<=2 [goto AHB_EVR1]

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Juestion ID:	ALT.309_00.000 Instrument Variable Name: AHB_TP2 QuestionnaireFileName: Adult CAM					
QuestionText:	Which TWO of these herbal supplements did you take the most in the PAST 30 DAYS?					
	*Enter two answers, separate with commas.					
	*If respondent cannot choose two herbs used most often, probe for the two most important for health.					
01	Combination herb pill					
02	Acai (pills, gelcaps)					
03	Bee Pollen and other Bee products					
04	Chondroitin					
05	Co-enzyme Q10 (CoQ10)					
06	Cranberry (pills or capsules)					
07	Digestive Enzymes (lactaid)					
08	Echinacea					
09	Fish Oil or omega 3 or DHA fatty acid or EPA fatty acid supplements					
10	Garlic supplements (pills, gelcaps)					
11	Ginkgo Biloba					
12	Ginseng					
13	Glucosamine					
14	Green tea pills (not brewed tea) or EGCG (pills)					
15	Melatonin					
16	Milk Thistle (silymarin)					
17	MSM (Methylsulfonylmethane)					
18	Probiotics or Prebiotics					
19	SAM-e					
20	Saw Palmetto					
21	Valerian					
22	Second combination herb pill					
23	{First herb from lookup table}					
24	{Second herb from lookup table}					
97	Refused					
99	Don't know					
UniverseTex	xt: Sample adults 18+ who have taken more than 2 herbal or non-vitamin supplements in the past 30 days					
SkipInstruct	tions: <1-24> fill values into AHB_TP21 and AHB_TP22 if applicable; [goto AHB_EVR1]; <r,d> [goto AHB_EVR1]</r,d>					

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Question ID:	ALT.312_0	0.000 Instru	ment Variable Name:	AHB_EVR1	QuestionnaireFileName:	Adult CAM
QuestionText:	? [F1]					
	Have yo	ou EVER seen	a practitioner for her	bs or other non-vita	min supplements?	
1	Yes					
2	No					
7	Refuse	d				
9	Don't k	now				
UniverseTex	xt: S	ample adults	8+ who have ever tal	ken herbs or other n	on-vitamin supplements in the past	12 months
SkipInstruct			B_USE1] T_USM=1 [goto AV] _USM ne 1 [goto AH]			
Question ID:	ALT.313_(0.000 Instru	ment Variable Name:	AHB_USE1	QuestionnaireFileName:	Adult CAM
QuestionText:	? [F1]					
	DURIN	G THE PAST	12 MONTHS, did yc	ou see a practitioner	for herbs or other non-vitamin sup	plements?
1	Yes					
2	No					
7	Refuse	d				
9	Don't k					
UniverseTex	xt: S	ample adults	8+ who have seen a j	practitioner for herb	s or other non-vitamin supplements	3
SkipInstruct			VT_USM=1 [goto A 1 ne 1 [goto AHB_BC			

Adult Alternative Health/Complementary And Alternative Medicine

	vill ask about vitamins	vitamins and minerals./vitamins s and minerals and then about her amins and minerals?			
supplements. First I w	vill ask about vitamins	s and minerals and then about her			
es per week, month, or	r year do you buy vita	amins and minerals?			
nt does not buy vitami	ins or minerals.				
Refused Don't know					
18+ who have taken v	vitamins or minerals in	n the past year			
	T_CST1] _USM=1 [goto AHB_		Γ_CST1] _USM=1 [goto AHB_BOFN];		

Question ID:	ALT.315_00.000 I	Instrument Variable Name:	AVT_BOFT	QuestionnaireFileName:	Adult CAM	
QuestionText:	2 of 2					
	*Enter time perio	od for how often vitamins an	d minerals are bought.			
0	Never/none					
1	Week					
2	Month					
3	Year					
7	Refused					
9	Don't know					
UniverseTex	t: Sample ad	dults 18+ who gave a number	for how many times vita	mins and minerals were pur	chased	
SkipInstruc	tions: <1-3,R,D>	> [goto AVT_CST1]				

Adult Alternative Health/Complementary And Alternative Medicine

Question ID: A	ALT.316_00.000	Instrument Variable Name:	AVT_CST1	QuestionnaireFileName:	Adult CAM
QuestionText:	About how m	uch did you spend the last tim	e you bought vitami	ns or minerals?	
	*Enter '0' for	none.			
0000-1000 9997	\$0-1000 Refused				
9999	Don't know				
UniverseText:	•	adults 18+ who have purchas of times	sed vitamins in the p	ast year a specific number of time.	s or who don't know the
SkipInstructio		0,R,D> if AHB_USM=1 [goto AHB_USM ne1 [goto HOM_			
Question ID: A	ALT.317_00.000	Instrument Variable Name:	AHB_BOFN	QuestionnaireFileName:	Adult CAM
QuestionText:	1 of 2				
	Now I am goi	ng to ask you about how mucl	h you spend on herb	s or other non-vitamin supplement	S.
	About how m	any times per week, month, or	r year do you buy he	rbs or other non-vitamin suppleme	ents?
	*Enter numbe	r.			
	*Enter '0' if re	espondent does not buy herbs of	or non-vitamin supp	lements.	
000-995	\$0-995				
997 999	Refused Don't know				
UniverseText:		adults 18+ who have taken h	erbs or other non-vit	amin supplements in the past year	
SkipInstructio	<d> [g <0,R></d>	> [goto AHB_BOFT] oto AHB_CST1] if AHB_USE1=1 [goto AHB_ AHB_USE1 ne 1 [goto AHB_			

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Question ID:	ALT.318_	00.000	Instrument Variable Name:	AHB_BOFT	QuestionnaireFileName:	Adult CAM	
QuestionText:	2 of 2						
	*Enter	time per	iod for how often herbs and	other non-vitamin su	upplements are bought.		
0	Never/	none					
1	Week						
2	Month						
3	Year	Year					
7	Refuse	Refused					
9	Don't l	Don't know					
UniverseTex	ext: Sample adults 18+ who gave a number purchased			er for how many tim	es herbs or other non-vitamin supp	elements were	
SkipInstruct	tions: <	<1 - 3,R,E	D> [goto AHB_CST1]				

Question ID:	ALT.319_00.00	0 Instrument Variable Name:	AHB_CST1	QuestionnaireFileName:	Adult CAM		
QuestionText:	About how n	nuch did you spend the last tin	ne you bought herbs or o	ther non-vitamin supplements?			
	*Enter '0' for	none.					
0000-1000	\$0-1000	\$0-1000					
9997	Refused						
9999	Don't know	Don't know					
UniverseTex		e adults 18+ who have purcha es or who don't know the num		itamin supplements in the past y	/ear a specific number		
SkipInstruct		00,R,D> if AHB_USE1=1 [go e if AHB_USE1 ne 1 [goto A					

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Question ID:	ALT.320_	00.000	nstrument Va	riable Name:	AHB_PTIM	QuestionnaireFileName:	Adult CAM
QuestionText:	Do you months		e exact numb	er of times yo	u saw a practitioner fo	or herbs or other non-vitamin su	upplements in the past 12
1	Yes						
2	No						
7	Refuse	ed					
9	Don't	know					
UniverseTex	at: 5	Sample a	lults 18+ who	o have seen a j	practitioner for herbs	or other non-vitamin supplement	nts in the past 12 months
SkipInstruct			AHB_TMN [goto AHB_7				
Question ID:	ALT.321_	00.000	nstrument Va	riable Name:	AHB_TMNO	QuestionnaireFileName:	Adult CAM
-	_	G THE			_	QuestionnaireFileName: e a practitioner for herbs or othe	
-	DURIN suppler	IG THE Inents?		NTHS, how n	_		
-	DURIN suppler	IG THE Inents?	PAST 12 MO	NTHS, how n	_		
QuestionText:	DURIN suppler *Enter	IG THE 1 nents? '52' for 5	PAST 12 MO	NTHS, how n	_		
QuestionText: 01-52	DURIN suppler *Enter 1-52	IG THE nents? '52' for 5 ed	PAST 12 MO	NTHS, how n	_		
97	DURIN suppler *Enter 1-52 Refuse Don't	IG THE nents? '52' for 5 ed know Sample a	PAST 12 MC	NTHS, how n nes.	nany times did you se		er non-vitamin

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	Adult Alternative Health/Complementary And Alternative Medicine					
Document Version Date: 30-May-13						
Question ID:	ALT.322_00.000 Instrument Variable Name: AHB_TMCT QuestionnaireFileName: Adult CAM					
QuestionText:	: DURING THE PAST 12 MONTHS, ABOUT how many times did you see a practitioner for herbs or other non-vitamin supplements? Would you say					
	*Read categories below.					
01	Only 1 time					
02	2-5 times					
03	6-10 times					
04	11-15 times					
05	16-20 times					
06	21-25 times					
07	More than 25 times					
97	Refused					
99	Don't know					
UniverseTex	t: Sample adults 18+ who don't know the specific number of times they have seen a practitioner for herbs or other non-vitamin supplements in the past 12 months or refuse the specific number of times					
SkipInstruct	ions: <1-7,R,D> [goto AHB_HIC]					

Question ID:	LT.323_00.000 Instrument Variable Name: AHB_HIC QuestionnaireFileName: Adult CAM	
QuestionText:	DURING THE PAST 12 MONTHS, were any of the costs of seeing a practitioner for herbs or other non-vitamin supplements covered by health insurance?	
1	Yes	
2	No	
7	Refused	
9	Don't know	
UniverseTex	Sample adults 18+ who have seen a practitioner for herbs or other non-vitamin supplements in the past 12 months	
SkipInstruct	s: <1> [goto AHB_HICA] <2,R,D> [goto AHB_HIT]	

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	ALT.324_00.000 Instrument Variable Name: AHB_HICA QuestionnaireFileName: Adult CAM
QuestionText:	DURING THE PAST 12 MONTHS, did your health insurance cover all of the cost or just some of the cost of seeing a practitioner for herbs or other non-vitamin supplements?
1	All of the cost
2	Some of the cost
7	Refused
9	Don't know
UniverseText:	Sample adults 18+ whose visit(s) to a practitioner for herbs or other non-vitamin supplements in the past 12 months were (at least partly) covered by health insurance
SkipInstruction	ons: <1> [goto AHB_MAT] <2,R,D> [goto AHB_HIT]
Question ID: A	ALT.325_00.000 Instrument Variable Name: AHB_HIT QuestionnaireFileName: Adult CAM
JuestionText:	Do you know the total amount you paid for seeing a practitioner for herbs or other non-vitamin supplements in the past 12 months [fill1: not including the amount covered by insurance]?
1	Yes
2	No
7	Refused
9	Don't know
UniverseText:	Sample adults 18+ whose health insurance covered none or some of the cost for herbs or other non-vitamin supplements in the past 12 months
SkipInstruction	ons: <1> [goto AHB_HITS] <2,R,D> [goto AHB_AVGC]
Juestion ID: A	JLT 326 00.000 Instrument Variable Name: AHB HITS OuestionnaireFileName: Adult CAM
	ALT.326_00.000 Instrument Variable Name: AHB_HITS QuestionnaireFileName: Adult CAM What is the total amount you paid for seeing a practitioner for herbs or other non-vitamin supplements in the past 12 months [fill1: not including the amount covered by insurance]?
	What is the total amount you paid for seeing a practitioner for herbs or other non-vitamin supplements in the past 12
	What is the total amount you paid for seeing a practitioner for herbs or other non-vitamin supplements in the past 12 months [fill1: not including the amount covered by insurance]?
uestionText:	What is the total amount you paid for seeing a practitioner for herbs or other non-vitamin supplements in the past 12 months [fill1: not including the amount covered by insurance]? *Enter '0' for no cost or free.
QuestionText: 00000-26000	What is the total amount you paid for seeing a practitioner for herbs or other non-vitamin supplements in the past 12 months [fill1: not including the amount covered by insurance]? *Enter '0' for no cost or free. \$0-26000
QuestionText: 00000-26000 99997 99999	What is the total amount you paid for seeing a practitioner for herbs or other non-vitamin supplements in the past 12 months [fill1: not including the amount covered by insurance]? *Enter '0' for no cost or free. \$0-26000 Refused Don't know
QuestionText: 00000-26000 99997	 What is the total amount you paid for seeing a practitioner for herbs or other non-vitamin supplements in the past 12 months [fill1: not including the amount covered by insurance]? *Enter '0' for no cost or free. \$0-26000 Refused Don't know Sample adults 18+ who know the amount they paid for herbs or other non-vitamin supplements in the past 12 months

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Question ID:	ALT.327_00.000 Instrument Variable Name: AHB_AVGC QuestionnaireFileName: Adult CAM
QuestionText:	Do you know the average amount you paid for each visit for herbs or other non-vitamin supplements {fill1: not including the amount covered by insurance} in the past 12 months?
1	Yes
2	No
7	Refused
9	Don't know
UniverseText	t: Sample adults 18+ who don't know the total amount they paid for herbs or other non-vitamin supplements in the past 12 months
SkipInstructi	ions: <1> [goto AHB_AVGS] <2,R,D> [goto AHB_MAT]
Question ID:	ALT.328_00.000 Instrument Variable Name: AHB_AVGS QuestionnaireFileName: Adult CAM
QuestionText:	On average, how much did you pay out-of-pocket for each visit to a practitioner for herbs or other non-vitamin supplements?
	Easter 101 : for a cost on from
	Enter '0' if no cost or free
000-500	
000-500 997	\$0-500
000-500 997 999	
997	\$0-500 Refused Don't know
997 999	 \$0-500 Refused Don't know t: Sample adults 18+ who know the average per visit they paid for herbs or other non-vitamin supplements in the past 12 months
997 999 UniverseText SkipInstructi	<pre>\$0-500 Refused Don't know t: Sample adults 18+ who know the average per visit they paid for herbs or other non-vitamin supplements in the past 12 months ions: <0-500,R,D> [goto AHB_MAT]</pre>
997 999 UniverseText SkipInstructi Question ID:	\$0-500 Refused Don't know t: Sample adults 18+ who know the average per visit they paid for herbs or other non-vitamin supplements in the past 12 months ions: <0-500,R,D> [goto AHB_MAT] ALT.329_00.000 Instrument Variable Name: AHB_MAT QuestionnaireFileName: Adult CAM
997 999 UniverseText SkipInstructi Question ID:	<pre>\$0-500 Refused Don't know t: Sample adults 18+ who know the average per visit they paid for herbs or other non-vitamin supplements in the past 12 months ions: <0-500,R,D> [goto AHB_MAT]</pre>
997 999 UniverseText SkipInstructi Question ID:	\$0-500 Refused Don't know t: Sample adults 18+ who know the average per visit they paid for herbs or other non-vitamin supplements in the past 12 months tions: <0-500,R,D> [goto AHB_MAT] ALT.329_00.000 Instrument Variable Name: AHB_MAT QuestionnaireFileName: Adult CAM DURING THE PAST 12 MONTHS, did you buy a self-help book or other materials such as a DVD, CD, or Video to learn about herbs or other non-vitamin supplements? Yes
997 999 UniverseText SkipInstructi Question ID: QuestionText: 1 2	\$0-500 Refused Don't know Sample adults 18+ who know the average per visit they paid for herbs or other non-vitamin supplements in the past 12 months ions: <0-500,R,D> [goto AHB_MAT] ALT.329_00.000 Instrument Variable Name: AHB_MAT QuestionnaireFileName: Adult CAM DURING THE PAST 12 MONTHS, did you buy a self-help book or other materials such as a DVD, CD, or Video to learn about herbs or other non-vitamin supplements? Yes No
997 999 UniverseText SkipInstructi Question ID: QuestionText: 1 2 7	\$0-500 Refused Don't know t: Sample adults 18+ who know the average per visit they paid for herbs or other non-vitamin supplements in the past 12 months ions: <0-500,R,D> [goto AHB_MAT] ALT.329_00.000 Instrument Variable Name: AHB_MAT QuestionnaireFileName: Adult CAM DURING THE PAST 12 MONTHS, did you buy a self-help book or other materials such as a DVD, CD, or Video to learn about herbs or other non-vitamin supplements? Yes No Refused
997 999 UniverseText SkipInstructi Question ID: QuestionText: 1 2	\$0-500 Refused Don't know Sample adults 18+ who know the average per visit they paid for herbs or other non-vitamin supplements in the past 12 months ions: <0-500,R,D> [goto AHB_MAT] ALT.329_00.000 Instrument Variable Name: AHB_MAT QuestionnaireFileName: Adult CAM DURING THE PAST 12 MONTHS, did you buy a self-help book or other materials such as a DVD, CD, or Video to learn about herbs or other non-vitamin supplements? Yes No
997 999 UniverseText SkipInstructi Question ID: QuestionText: 1 2 7	\$0-500 Refused Don't know t: Sample adults 18+ who know the average per visit they paid for herbs or other non-vitamin supplements in the past 12 months ions: <0-500,R,D> [goto AHB_MAT] ALT.329_00.000 Instrument Variable Name: AHB_MAT QuestionnaireFileName: Adult CAM DURING THE PAST 12 MONTHS, did you buy a self-help book or other materials such as a DVD, CD, or Video to learn about herbs or other non-vitamin supplements? Yes No Refused Don't know

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Question ID:	ALT.330_00.000) Instrument Variable Name:	AHB_MATC	QuestionnaireFileName:	Adult CAM
QuestionText:	About how m	such did you pay for these mat	erials in the past 12 mo	nths?	
	*Enter '200' f	for \$200 or more.			
000-200	\$0-200				
997	Refused				
999	Don't know				
UniverseTex	t: Sample months	-	self-help materials for	herbs or other non-vitamin supp	lements in the past 12
SkipInstruct	ions: <0-200),R,D>[goto HOM_USE]			
Question ID:	ALT 340 00 000) Instrument Variable Name:	HOM USE	QuestionnaireFileName:	Adult CAM
Q	1121.510_00.000	,	nom_obb	Q	
QuestionText:	? [F1]				
	People who u	se homeopathy (ho-mee-AH-r	ouh-thee) to treat health	problems take small pills or dr	ops that are often placed
	under the tong	gue. They may be labeled as h		r medicine and they may be pre	
	of homeopath	ıy.			
	Have you EV	ER used homeopathic treatme	ent for your health?		
1	Yes				
-	No				
2	INO				
2 7	Refused				
7	Refused Don't know	e adults 18+			

			2012 NHIS Qu	estionnaire - A	dult CAM	
		Adult		- •	nd Alternative Medicine	
	Document Version Date: 30-May-13					
Question ID:	ALT.341	_00.000	Instrument Variable Name:	HOM_USM	QuestionnaireFileName:	Adult CAM
QuestionText:	? [F1]					
	DURI	NG THE	E PAST 12 MONTHS, did you	use homeopathic tre	eatment for your health?	
1	Yes					
2	No					
7	Refu	sed				
9	Don't	know				
UniverseTex	:t:	Sample	adults 18+ who have ever use	d homeopathic treatm	nent	
			to HOM_OFTN] [goto MBO_USE]			
Question ID:	ALT 342	00.000	Instrument Variable Name:	HOM_OFTN	QuestionnaireFileName:	Adult CAM
		_00.000	instrument variable ivane.	HOM_OF IN	Questionnan er nervanie.	Adult CAM
QuestionText:	1 of 2					
	About	how ma	ny times per week, month, or	year do you buy hon	neopathic medicine?	
	* Ente	er numbe	r.			
000-995	0-995	5				
997	Refu	sed				
999	Don't	know				
UniverseTex	:t:	Sample	adults 18+ who have used how	meopathic treatment	in the past 12 months	
SkipInstruct	ions:	<d>[go</d>	<pre>[goto HOM_OFTT] to HOM_COST] goto HOM_EVER]</pre>			

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Question ID:	ALT.343_00.000 Instrument Variable Name: HOM_OFTT QuestionnaireFileName: Adult CAM					
QuestionText:	2 of 2					
	*Enter time period for how often homeopathic medicine purchased					
	* Read if necessary: About how many times per week, month, or year do you buy homeopathic medicine?					
	*Read categories if necessary					
0	Never/none					
1	Week					
2	Month					
3	Year					
7	Refused					
9	Don't know					
UniverseTex	Sample adults 18+ who have used homeopathic treatment in the past 12 months					
SkipInstruct	ctions: <1-3,R,D> [goto HOM_COST]					

Question ID:	ALT.344_(0.000	Instrumen	t Variable Name:	HOM_COST		QuestionnaireFileName:	Adult CAM
QuestionText:	About h	ow mu	uch did you	spend the last time	e you bought homeop	pathic	medicine?	
	*Enter '	' for r	none.					
0000-1000	\$0-100)						
9997	Refuse							
9999	Don't k	now						
UniverseTex				who have purchas nber of times	ed homeopathic med	licine	in the past year a specific nu	imber of times or who
SkipInstruct	tions: <	-100	0,R,D> [got	to HOM_EVER]				

	2012 NHIS Questionnaire - Adult CAM Adult Alternative Health/Complementary And Alternative Medicine Document Version Date: 30-May-13				
Question ID:	ALT.345	_00.000 Instrument Variable Name:	HOM_EVER	QuestionnaireFileName:	Adult CAM
QuestionText:	? [F1]				
	Have	you EVER seen a practitioner for hor	neopathic treatment?		
1	Yes				
2	No				
7	Refu	sed			
9	Don't	know			
UniverseTex	xt:	Sample adults 18+ who have used he	omeopathic treatment in	the past 12 months	
Question ID:	ALT.346	00.000 Instrument Variable Name:	HOM USEM	QuestionnaireFileName:	Adult CAM
	ALT.346	_	HOM_USEM	QuestionnaireFileName:	Adult CAM
	? [F1]	_	_	-	Adult CAM
	? [F1] DURI	-	_	-	Adult CAM
QuestionText:	? [F1]	-	_	-	Adult CAM
QuestionText: 1	? [F1] DURI Yes	- NG THE PAST 12 MONTHS, did yo	_	-	Adult CAM
QuestionText: 1 2	? [F1] DURI Yes No Refus	- NG THE PAST 12 MONTHS, did yo	_	-	Adult CAM
2 7	? [F1] DURI Yes No Refus Don't	– NG THE PAST 12 MONTHS, did yo sed	bu see a practitioner for	homeopathic treatment?	Adult CAM

Question ID:	ALT.347_00.000 Instrument Variable Name: HOM_PTIM QuestionnaireFileName: Adult CAM
QuestionText:	Do you know the exact number of times you saw a practitioner for homeopathic treatment in the past 12 months?
1	Yes
2	No
7	Refused
9	Don't know
UniverseTex	Sample adults 18+ who have seen a practitioner for homeopathic treatment in the past 12 months
SkipInstruct	ions: <1> [goto HOM_TMNO] <2,R,D> [goto HOM_TMCT]

Adult Alternative Health/Complementary And Alternative Medicine

Question ID:	ALT.348_00.00	0) Instrument Variable Name:	HOM_TMNO	QuestionnaireFileName:	Adult CAM
QuestionText:	DURING TI	HE PAST 12 MONTHS, how 1	nany times did you see	e a practitioner for homeopathic	treatment?
	*Enter '52' f	or 52 or more times.			
01-52	1-52				
97	Refused				
99	Don't know				
UniverseTex		le adults 18+ who know the nu 2 months	mber of times they have	ve seen a practitioner for homeop	pathic treatment in the
SkipInstruct	tions: <1-52	,R,D> [goto HOM_HIC]			
Question ID:	ALT.349_00.00	0) Instrument Variable Name:	HOM_TMCT	QuestionnaireFileName:	Adult CAM
QuestionText:	DURING TI Would you s		UT how many times di	d you see a practitioner for hom	eopathic treatment?
	*Read categ	ories below.			
01	Only 1 time	;			
02	2-5 times				
03	6-10 times				
04	11-15 times				
05	16-20 times				
06	21-25 times				
07	More than 2	25 times			
97	Refused				
99	Don't know				
UniverseTex		le adults 18+ who don't know the nent in the past 12 months or re		times they have seen a practition per of times	ner for homeopathic
SkipInstruct	tions: <1-7,]	R,D> [goto HOM_HIC]			

Adult Alternative Health/Complementary And Alternative Medicine

Question ID:	ALT.350_00.000 Instrument Variable Name: HOM_HIC QuestionnaireFileName: Adult CAM
QuestionText:	DURING THE PAST 12 MONTHS, were any of the costs of seeing a practitioner for homeopathic treatment covered by health insurance?
1	Yes
2	No
7	Refused
9	Don't know
UniverseText	: Sample adults 18+ who have seen a practitioner for homeopathic treatment in the past 12 months
SkipInstructi	ons: <1> [goto HOM_HICA] <2,R,D> [goto HOM_HIT]
Question ID: QuestionText:	ALT.351_00.000 Instrument Variable Name: HOM_HICA QuestionnaireFileName: Adult CAM DURING THE PAST 12 MONTHS, did your health insurance cover all of the cost or just some of the cost of seeing a
-	practitioner for homeopathic treatment?
1	All of the cost
2	Some of the cost
7	Refused
9	Don't know
UniverseText	: Sample adults 18+ whose visit(s) to a practitioner for homeopathic treatment in the past 12 months were (at least partly) covered by health insurance
SkipInstructi	ons: <1> [goto HOM_MAT] <2,R,D> [goto HOM_HIT]
Question ID:	ALT.352_00.000 Instrument Variable Name: HOM_HIT QuestionnaireFileName: Adult CAM
QuestionText:	Do you know the total amount you paid for seeing a practitioner for homeopathic treatment in the past 12 months [fill1: not including the amount covered by insurance]?
1	Yes
2	No
7	Refused
9	Don't know
UniverseText	Sample adults 18+ whose health insurance covered none or some of the cost for homeopathic treatment in the past 12 months

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Question ID:	T.353_00.000 Instrument Variable Name: HOM_HITS QuestionnaireFileName: Adult CAN	4
QuestionText:	What is the total amount you paid for seeing a practitioner for homeopathic treatment in the past 12 months [fill including the amount covered by insurance]?	1: not
	*Enter '0' for no cost or free.	
00000-26000 99997 99999	\$0-26000 Refused Don't know	
UniverseText	Sample adults 18+ who know the amount they paid for homeopathic treatment in the past 12 months	
SkipInstructio	s: <0-26000,R,D> [goto HOM_MAT]	
Soft Edit:	Verify if over \$1000	
Question ID:	T.354_00.000 Instrument Variable Name: HOM_AVGC QuestionnaireFileName: Adult CAN	1
QuestionText:	Do you know the average amount you paid for each visit for homeopathic treatment {fill1: not including the arr covered by insurance} in the past 12 months?	iount
1	Yes	
2	No	
7	Refused	
9	Don't know	
UniverseText	Sample adults 18+ who don't know the total amount they paid for homeopathic treatment in the past 12 n	nonths
SkipInstructio	s: <1> [goto HOM_AVGS] <2,R,D> [goto HOM_MAT]	
Question ID:	T.355_00.000 Instrument Variable Name: HOM_AVGS QuestionnaireFileName: Adult CAN	1

QuestionText: On average, how much did you pay out-of-pocket for each visit to a practitioner for homeopathic treatment?

 Enter '0' if no cost or free

 000-500
 \$0-500

 997
 Refused

 999
 Don't know

 UniverseText:
 Sample adults 18+ who know the average per visit they paid for homeopathic treatment in the past 12 months

SkipInstructions: <0-500,R,D> [goto HOM_MAT]

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learn about homeopathic treatment? 1 Yes 1 Yes 2 No 7 Refused 9 Don't know UniverseText: Sample adults 18+ who have used homeopathy in the past 12 months SkipInstructions: <1> [goto HOM_MATC] <2.R.D> [goto MBO_USE] Question ID: ALT.357_00.000 Instrument Variable Name: HOM_MATC QuestionnaireFileName: Adult CAM Question Text: About how much did you pay for these materials in the past 12 months? *Enter '200' for \$200 or more. 000-200 \$00-200 \$000-200 \$000-200 \$000-200 997 Refused \$999 Don't know UniverseText: Sample adults 18+ who have bought self-help materials for homeopathic treatment in the past 12 months SkipInstructions: <0-200, R,D> [goto MBO_USE] Question ID: ALT.367_00.000 Instrument Variable Name: MBO_USE QuestionnaireFileName: Adult CAM					
learn about homeopathic treatment? 1 Yes 1 Yes 2 No 7 Refused 9 Don't know UniverseText: Sample adults 18+ who have used homeopathy in the past 12 months SkipInstructions: <1>[goto HOM_MATC] <2,R,D> [goto MBO_USE] Question ID: ALT.357_00.000 Instrument Variable Name: HOM_MATC QuestionnaireFileName: Adult CAM Question Text: About how much did you pay for these materials in the past 12 months? *Enter '200' for \$200 or more. 600-200 600-200 \$0-200 997 Refused 99 Don't know UniverseText: Sample adults 18+ who have bought self-help materials for homeopathic treatment in the past 12 months SkipInstructions: <0-200, R,D> [goto MBO_USE] Question ID: ALT.367_00.000 Instrument Variable Name: MBO_USE QuestionnaireFileName: Adult CAM Question ID: ALT.367_00.000 Instrument Variable Name: MBO_USE QuestionText: ? (F1] Have you EVER used meditation, guided imagery, or progressive relaxation? 1 Yes ? 2 No ? Refused 9 <td< th=""><th>Question ID:</th><th>ALT.356_00.000 Instrument Variable Name:</th><th>HOM_MAT</th><th>QuestionnaireFileName:</th><th>Adult CAM</th></td<>	Question ID:	ALT.356_00.000 Instrument Variable Name:	HOM_MAT	QuestionnaireFileName:	Adult CAM
2 No 7 Refused 9 Don't know UniverseText: Sample adults 18+ who have used homeopathy in the past 12 months SkipInstructions: <1> [goto HOM_MATC] <2,R,D> [goto MBO_USE] Question ID: ALT.357_00.000 Instrument Variable Name: HOM_MATC QuestionText: About how much did you pay for these materials in the past 12 months? *Enter '200' for \$200 or more. 000-200 997 Refused 999 Don't know UniverseText: Sample adults 18+ who have bought self-help materials for homeopathic treatment in the past 12 months SkipInstructions: <0-200, R,D> [goto MBO_USE] Question ID: ALT.367_00.000 Instrument Variable Name: MBO_USE Question ID: ALT.367_00.000 Instrument Variable Name: MBO_USE QuestionmaireFileName: Adult CAM Question ID: ALT.367_00.000 Instrument Variable Name: MBO_USE QuestionmaireFileName: Adult CAM Question Text: ? [F1] Have you EVER used meditation, guided imagery, or progressive relaxation? 1 Yes 2 No 7 Refu	QuestionText:		buy a self-help book	s or other materials such as a DV	D, CD, or Video to
7 Refused 9 Don't know UniverseText: Sample adults 18+ who have used homeopathy in the past 12 months SkipInstructions: SkipInstructions: (1) [goto MBO_USE] Question ID: ALT.357_00.000 Instrument Variable Name: HOM_MATC QuestionnaireFileName: Adult CAM Question Text: About how much did you pay for these materials in the past 12 months? *Enter '200' for \$200 or more. 000-200 909 Don't know UniverseText: Sample adults 18+ who have bought self-help materials for homeopathic treatment in the past 12 months SkipInstructions: <0-200, R,D> [goto MBO_USE] Question ID: ALT.367_00.000 Instrument Variable Name: MBO_USE QuestionnaireFileName: Adult CAM Question ID: ALT.367_00.000 Instrument Variable Name: MBO_USE QuestionnaireFileName: Adult CAM Question ID: ALT.367_00.000 Instrument Variable Name: MBO_USE QuestionnaireFileName: Adult CAM Question ID: ALT.367_00.000 Instrument Variable Name: MBO_USE QuestionnaireFileName: Adult CAM Question Text: ? [F1] Have you EVER used meditation, guided imagery, or progressive relaxation? 1 Yes No No <t< td=""><td>1</td><td>Yes</td><td></td><td></td><td></td></t<>	1	Yes			
 9 Don't know UniverseText: Sample adults 18+ who have used homeopathy in the past 12 months SkipInstructions: 					

SkipInstructions: <1> [goto MBOE_MAN] <2,R,D> [goto YTQE_YOG]

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2012 NHIS Questionnaire - Adult CAM											
Adult Alternative Health/Complementary And Alternative Medicine Document Version Date: 30-May-13											
										Question ID:	uestion ID: ALT.368_00.000 Instrument Variable Name: MBOE_MAN QuestionnaireFileName: Adult CAM
QuestionText:	? [F1]										
	Have you EVER used any of the following for your own health or treatment?										
	Mantra Meditation, including Transcendental Meditation®, Relaxation Response, and Clinically Standardized Meditation?										
1	Yes										
2	No										
7	Refused										
9	Don't know										
Duraction ID.	ALT 270,00,000 Instrument Verichle Names ADOF, MND, OusstienweizsEiteNames Adult CAM										
Question ID: QuestionText:	ALT.369_00.000 Instrument Variable Name: MBOE_MND QuestionnaireFileName: Adult CAM ? [F1]										
	*Read if necessary.										
	Have you EVER used any of the following for your own health or treatment?										
	Mindfulness meditation, including Vipassana (vih-PAS-sah-nah), Zen Buddhist meditation, Mindfulness-based Stress Reduction, and Mindfulness-based Cognitive Therapy										
1	Yes										
2	No										
7 Refused											
9	Don't know										
UniverseTex	Sample adults 18+ who have ever used meditation, guided imagery, or progressive relaxation										
SkipInstruc	tions: <1,2,R,D> [goto MBOE_SPR]										

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Question ID:	ALT.370	0_00.000	Instrument Variable Name:	MBOE_SPR	QuestionnaireFileName:	Adult CAM
QuestionText:	? [F1]]				
	*Rea	d if neces	sary.			
	Have	you EVE	ER used any of the following	for your own health	or treatment?	
	Spirit	ual medit	ation including Centering Pra	ayer and Contempla	tive Meditation	
1	Yes					
2	No					
7	Refu	sed				
9	Don	t know				
UniverseTex	xt:	Sample	adults 18+ who have ever use	ed meditation, guide	ed imagery, or progressive relaxation	on
SkipInstructions:		<1,2,R,I	D> [goto MBOE_IMG]			

Question ID:	ALT.371	_00.000	Instrument Variable Name:	MBOE_IMG	QuestionnaireFileName:	Adult CAM			
QuestionText:	? [F1]]							
	*Read	d if neces	sary.						
	Have	you EVE	R used any of the following t	for your own health or trea	atment?				
	Guide	ed imager	у						
1	Yes								
2	No								
7	Refu	sed							
9	Don'	Don't know							
UniverseTex	xt:	Sample	adults 18+ who have ever use	ed meditation, guided imag	gery, or progressive relaxation	on			
SkipInstruc	tions:	<1,2,R,I	D> [goto MBOE_PRO]						

Adult Alternative Health/Complementary And Alternative Medicine

Question ID:	ALT.372	_00.000	Instrument Variable Name:	MBOE_PRO	QuestionnaireFileName:	Adult CAM
QuestionText:	? [F1]					
	*Read	if neces	sary.			
	Have	you EVE	ER used any of the following	for your own health or	treatment?	
	Progre	essive rel	axation			
1	Yes					
2	No					
7	Refus	sed				
9	Don't	know				
UniverseTe	xt:	Sample	adults 18+ who have ever use	ed meditation, guided i	magery, or progressive relaxation	on
SkipInstructions:		if MI else i else i else i else i		MAN]; OU_MND]; DU_SPR]; DU_IMG]; DU_PRO];	practitioners in MBOE_*: nd MBOE_IMG)=2,R,D [goto `	YTQE_YOG]

2012 NHIS Questionnaire - Adult CAM Adult Alternative Health/Complementary And Alternative Medicine Document Version Date: 30-May-13									
Question ID:	ALT.373_0	00.000	Instrument Variable Name:	MBOU_MAN	QuestionnaireFileName:	Adult CAM			
QuestionText:	? [F1]								
	DURIN	IG THE I	PAST 12 MONTHS, did yo	u use					
	Mantra	Meditati	ion, including Transcendenta	al Meditation®, Relax	ation Response, and Clinically	Standardized Meditation?			
1	Yes								
2	No								
7	Refuse	d							
9	Don't k	know							
UniverseTex	t: S	Sample a	dults 18+ who have ever use	ed a mantra meditatior	1				
SkipInstructions:		else if ME else if ME else if ME else if ME	> _MND=1 [goto MBOU_MN BOE_SPR=1 [goto MBOU_ BOE_IMG=1 [goto MBOU_ BOE_PRO=1 [goto MBOU_ BOE_MAN =1 and (MBOE_ MBOE_PRO)=2,R,D, fill va	SPR]; [IMG]; [PRO]; [MND and MBOE_S]					

If (MBOE_MND and MBOE_SPR and MBOE_IMG and MBOE_MBOE_PRO)=2,R,D [goto YTQE_YOG]

2012 NHIS Questionnaire - Adult CAM										
Adult Alternative Health/Complementary And Alternative Medicine										
Document Version Date: 30-May-13										
Question ID:	ALT.374	_00.000	Instrument Variable 1	Name:	MBOU_MND	Quest	ionnaireFileName:	Adult CAM		
QuestionText:	? [F1]									
	DURI	NG THE	PAST 12 MONTHS	, did yo	u use					
			editation, including V Mindfulness-based C			h), Zen Buddhi	ist meditation, Mir	ndfulness-based Stress		
1	Yes									
2	No									
7	Refu	sed								
9	Don't	know								
UniverseTex	xt:	Sample	adults 18+ who have	ever use	ed mindfulness med	litation				
SkipInstructions:		else if M else if M else if M MBOE_ else if tw <2,R,D> If (MBC	E_SPR=1 [goto MBO IBOE_IMG=1 [goto 1 IBOE_PRO=1 [goto 1 IBOE_MND =1 and (MBOE_PRO)=2,R,D vo or more of the other	MBOU_ MBOU_ MBOE_ , fill va er MBO _SPR at	IMG]; PRO]; MAN and MBOE lue in MBO_MST1 U 12 month series a nd MBOE_IMG and	I, [goto MBO_ answered 1 (ye d MBOE_MB0	_BRTH]; es), [goto MBO_M DE_PRO)=2,R,D	[goto YTQE_YOG]		

2012 NHIS Questionnaire - Adult CAM							
Adult Alternative Health/Complementary And Alternative Medicine Document Version Date: 30-May-13							
Question ID:	ALT.37	5_00.000	Instrument Variable Name:	MBOU_SPR	QuestionnaireFileName:	Adult CAM	
QuestionText:	? [F1]					
	DUR	ING THE	PAST 12 MONTHS, did yo	u use			
	Spiri	ual medit	ation including Centering Pra	ayer and Contemplat	tive Meditation?		
1	Yes						
2	No						
7	Refi	ised					
9	Don	't know					
UniverseTe	xt:	Sample	adults 18+ who have ever use	ed spiritual meditation	on		
SkipInstruc	tions:	else if M else if M MBOE_	D> if MBOE_IMG=1 [goto M IBOE_PRO=1 [goto MBOU] IBOE_SPR =1 and (MBOE_ MBOE_PRO)=2,R,D, fill va vo or more of the other MBC	_PRO]; MAN and MBOE_N alue in MBO_MST1	—	T1]	
			E_MAN and MBOE_MND		nd MBOE_MBOE_PRO)=2,R,D where ALL=2,R,D, [goto YTQE_		

Question ID:	ALT.376_00.000	Instrument Variable Name:	MBOU_IMG	QuestionnaireFileName:	Adult CAM
QuestionText:	? [F1]				
	DURING THI	E PAST 12 MONTHS, did you	u use		
	Guided image	ry?			
1	Yes				
2	No				
7	Refused				
9	Don't know				
UniverseTex	at: Sample	adults 18+ who have ever use	ed guided imagery		
SkipInstruct	if M else value ir [gote else <2,R,D If (N	BOE_PRO=1 [goto MBOU_F if MBOE_IMG =1 and (MBO n MBO_MST1, o MBO_BRTH]; if two or more of the other MI > MBOE_MAN and MBOE_MN	DE_MAN and MBC BOU 12 month seri ID and MBOE_SPI	E_MND and MBOE_SPR and MB es answered 1 (yes), [goto MBO_M R and MBOE_PRO)=2,R,D [goto Y les where ALL=2,R,D, [goto YTQ	IST1] YTQE_YOG]

Adult Alternative Health/Complementary And Alternative Medicine

Question ID:	ALT.377_00).000 Instrument Varia	ble Name:	MBOU_PRO	QuestionnaireFileName:	Adult CAM
QuestionText:	? [F1]					
	DURING	G THE PAST 12 MONT	HS, did you	use		
	Progressi	ve relaxation?				
1	Yes					
2	No					
7	Refused					
9	Don't kn	IOW				
UniverseTex	xt: Sa	mple adults 18+ who ha	ave ever use	d a progressive rela	axation	
SkipInstruct	M	BOU_PRO [goto MBO_MST1];	d from (MB	OU_PRO or MBO	J_MAN, MBOU_MND, MBOU_S U_MAN or MBOU_MND or MB(_
	<2	,R,D> If (MBOE_MAN and I	MBOE_MN	D and MBOE_SPF	R and MBOE_IMG)=2,R,D [goto]	YTQE_YOG];

Question ID:	ALT.378_00.000 Instrum	ent Variable Name:	MBO_MST1	QuestionnaireFileName:	Adult CAM		
QuestionText:	DURING THE PAST 12 MONTHS, which of these did you use the most?						
	*Read categories below	· .					
1	Mantra meditation						
2	Mindfulness meditatio	n					
3	Spiritual meditation						
4	Guided imagery						
5	Progressive relaxation						
7	Refused						
9	Don't know						
UniverseTex	Text: Sample adults 18+ who have used more than two types of a mind-body therapy in the past 12 months						
SkipInstruct		BRTH]	/IBO_MST1 and dor	't ask question [goto MBO_BRT	H];		

2012 NHIS Questionnaire - Adult CAM Adult Alternative Health/Complementary And Alternative Medicine Document Version Date: 30-May-13						
Question ID:	ALT.379_00.00) Instrument Variable Name:	MBO_BRTH	QuestionnaireFileName:	Adult CAM	
QuestionText:	?[F1]					
		reathing exercises as part of [fi or depth of breathing.	ll1]? Breathing exerci	ses may involve actively contro	lling the way air is drawn	
1	Yes					
2	No					
7	Refused					
9	Don't know					
UniverseText: Sample adults 18+ who have used a mind-body therapy in the past 12 months/used one the most in the past 12 months						
Question ID:	ALT.380_00.00) Instrument Variable Name:	MBO_USEM	QuestionnaireFileName:	Adult CAM	
QuestionText:	? [F1]					
	DURING TH	IE PAST 12 MONTHS, did yo	u see a practitioner or	take a class for [fill1]?		
1	Yes					
2	No					
7	Refused					
9	Don't know					
UniverseTex	xt: Sampl	e adults 18+ who have used a r	nind-body therapy in	the past 12 months		
SkipInstruc		ooto MBO_PTIM] D> [goto MBO_MAT]				

Adult Alternative Health/Complementary And Alternative Medicine

Question ID:	ALT.381_0)0.000 Instru	ment Variable Name:	MBO_PTIM	QuestionnaireFileName:	Adult CAM	
QuestionText:	Do you	know the exac	et number of times yo	u saw a practitioner	or took a class for [fill1] in the pas	t 12 months?	
1	Yes						
2	No						
7	Refused						
9	Don't l	now					
UniverseTex	st: S	ample adults	8+ who have seen a j	practitioner for a min	d-body therapy in the past 12 mor	nths	
SkipInstruct		<1> [goto MB0 2,R,D> [goto	D_TMNO] MBO_TMCT]				
Question ID:	ALT.382_0)0.000 Instru	ment Variable Name:	MBO_TMNO	QuestionnaireFileName:	Adult CAM	
QuestionText:	DURIN	G THE PAST	12 MONTHS, how n	nany times did you s	ee a practitioner or take a class for	[fill1]?	
	*Enter	52' for 52 or n	nore times."				
01-52	1-52						
97	Refuse	d					
99	Don't l	now					
UniverseTex		ample adults ast 12 months	8+ who know the nu	mber of times they h	ave seen a practitioner for a mind-	body therapy in the	
SkipInstruct	tions: <	<1-52,R,D>[g	oto MBO_HIC]				

2012 NHIS Questionnaire - Adult CAM								
	Adult Alternative Health/Complementary And Alternative Medicine							
Document Version Date: 30-May-13								
Question ID:	ALT.383_00.000 Instrument Variable Name: MBO_TMCT QuestionnaireFileName: Adult CAM							
QuestionText:	DURING THE PAST 12 MONTHS, ABOUT how many times did you see a practitioner or take a class for [fill1]? Would you say							
	*Read categories below.							
01	Only 1 time							
02	2-5 times							
03	6-10 times							
04	11-15 times							
05	16-20 times							
06	21-25 times							
07	More than 25 times							
97	Refused							
99	Don't know							
UniverseTex	xt: Sample adults 18+ who don't know the specific number of times they have seen a practitioner for a mind-body therapy in the past 12 months or refuse the specific number of times							
SkipInstruct	tions: <1-7,R,D> [goto MBO_HIC]							

Question ID:	ALT.384_00.0)() Instru	nent Variable Name:	MBO_HIC	QuestionnaireFileName:	Adult CAM
QuestionText:	DURING The balth insut		12 MONTHS, were a	any of the costs of se	eing a practitioner or taking a class	s for [fill1] covered by
1	Yes					
2	No					
7	Refused					
9	Don't know	/				
UniverseTex	t: Sam	ole adults 1	8+ who have seen a p	practitioner for a min	nd-body therapy in the past 12 mor	nths
SkipInstruct		goto MBC ,D> [goto	D_HICA] MBO_HIT]			

Adult Alternative Health/Complementary And Alternative Medicine

	LT.385_00.000 Instrument Variable Name: MBO_HICA QuestionnaireFileName: Adult CAM
QuestionText:	DURING THE PAST 12 MONTHS, did your health insurance cover all of the cost or just some of the cost of seeing a practitioner or taking a class for [fill1]?
1	All of the cost
2	Some of the cost
7	Refused
9	Don't know
UniverseText:	Sample adults 18+ whose visit(s) to a practitioner for a mind-body therapy in the past 12 months were (at least partly) covered by health insurance
SkipInstructior	AS: <1> [goto MBO_MAT] <2,R,D> [goto MBO_HIT]
Question ID: A	LT.386_00.000 Instrument Variable Name: MBO_HIT QuestionnaireFileName: Adult CAM
QuestionText:	Do you know the total amount you paid for seeing a practitioner or taking a class for [fill1] in the past 12 months [fill2: not including the amount covered by insurance]?
1	Yes
2	No
7	Refused
9	Don't know
UniverseText:	Sample adults 18+ whose health insurance covered none or some of the cost for a mind-body therapy in the past 12 months
SkipInstructior	AS: <1> [goto MBO_HITS] <2,R,D> [goto MBO_AVGC]
Question ID: A	LT.387_00.000 Instrument Variable Name: MBO_HITS QuestionnaireFileName: Adult CAM
	LT.387_00.000 Instrument Variable Name: MBO_HITS QuestionnaireFileName: Adult CAM What is the total amount you paid for seeing a practitioner or taking a class for [fill1] in the past 12 months [fill2: not including the amount covered by insurance]?
Question ID: A QuestionText:	What is the total amount you paid for seeing a practitioner or taking a class for [fill1] in the past 12 months [fill2: not
	What is the total amount you paid for seeing a practitioner or taking a class for [fill1] in the past 12 months [fill2: not including the amount covered by insurance]?
QuestionText:	What is the total amount you paid for seeing a practitioner or taking a class for [fill1] in the past 12 months [fill2: not including the amount covered by insurance]? *Enter '0' for no cost or free.
QuestionText: 00000-26000	What is the total amount you paid for seeing a practitioner or taking a class for [fill1] in the past 12 months [fill2: not including the amount covered by insurance]? *Enter '0' for no cost or free. \$0-26000
QuestionText: 00000-26000 99997	What is the total amount you paid for seeing a practitioner or taking a class for [fill1] in the past 12 months [fill2: not including the amount covered by insurance]? *Enter '0' for no cost or free. \$0-26000 Refused
QuestionText: 00000-26000 99997 99999	What is the total amount you paid for seeing a practitioner or taking a class for [fill1] in the past 12 months [fill2: not including the amount covered by insurance]? *Enter '0' for no cost or free. \$0-26000 Refused Don't know Sample adults 18+ who know the amount they paid for a mind-body therapy in the past 12 months

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Question ID:	ALT.388_00.0	00 Instrument Variable Name:	MBO_AVGC	QuestionnaireFileName:	Adult CAM	
QuestionText:		w the average amount you paid in the past 12 months?	for each visit or class for	or [fill1] {fill2: not including th	e amount covered by	
1	Yes					
2	No					
7	Refused					
9						
UniverseText	: Samj	ple adults 18+ who don't know t	he total amount they pa	id for a mind-body therapy in th	ne past 12 months	
SkipInstructio		[goto MBO_AVGS] ,D> [goto MBO_MAT]				
Question ID:	ATT 389 00 0	00 Instrument Variable Name:	MBO AVGS	OuestionnaireFileName	Adult CAM	
Question ID:	ALT.389_00.0	00 Instrument Variable Name:	MBO_AVGS	QuestionnaireFileName:	Adult CAM	
	—	00 Instrument Variable Name: , how much did you pay out-of-	_			
	– On average		_			
QuestionText:	– On average *Enter '0' if	, how much did you pay out-of-	_			
QuestionText: 000-500	– On average *Enter '0' if \$0-500	, how much did you pay out-of-	_			
QuestionText:	- On average *Enter '0' if \$0-500 Refused	, how much did you pay out-of-	_			
QuestionText: 000-500 997 999	On average *Enter '0' if \$0-500 Refused Don't know	, how much did you pay out-of- `no cost or free. v	pocket for each visit to	a practitioner or class for [fill1]	?	
QuestionText: 000-500 997	On average *Enter '0' if \$0-500 Refused Don't know	, how much did you pay out-of-	pocket for each visit to	a practitioner or class for [fill1]	?	
QuestionText: 000-500 997 999 UniverseText	- On average *Enter '0' if \$0-500 Refused Don't knov : Samj	, how much did you pay out-of- `no cost or free. v ple adults 18+ who know the ave	pocket for each visit to	a practitioner or class for [fill1]	?	
QuestionText: 000-500 997 999	- On average *Enter '0' if \$0-500 Refused Don't knov : Samj	, how much did you pay out-of- `no cost or free. v	pocket for each visit to	a practitioner or class for [fill1]	?	
QuestionText: 000-500 997 999 UniverseText	- On average *Enter '0' if \$0-500 Refused Don't knov : Samj	, how much did you pay out-of- `no cost or free. v ple adults 18+ who know the ave	pocket for each visit to	a practitioner or class for [fill1]	?	
QuestionText: 000-500 997 999 UniverseText	- On average *Enter '0' if \$0-500 Refused Don't knov : Samj	, how much did you pay out-of- `no cost or free. v ple adults 18+ who know the ave	pocket for each visit to	a practitioner or class for [fill1]	?	
QuestionText: 000-500 997 999 UniverseText	- On average *Enter '0' if \$0-500 Refused Don't knov : Samj	, how much did you pay out-of- `no cost or free. v ple adults 18+ who know the ave	pocket for each visit to	a practitioner or class for [fill1]	?	
QuestionText: 000-500 997 999 UniverseText SkipInstructio	- On average *Enter '0' if \$0-500 Refused Don't know : Samj ons: <0-5	, how much did you pay out-of- `no cost or free. v ple adults 18+ who know the ave	pocket for each visit to	a practitioner or class for [fill1]	?	
QuestionText: 000-500 997 999 UniverseText SkipInstructio	- On average *Enter '0' if \$0-500 Refused Don't knov : Samj ons: <0-5	, how much did you pay out-of- `no cost or free. v ple adults 18+ who know the ave 00,R,D> [goto MBO_MAT]	pocket for each visit to erage per visit they paid MBO_MAT	a practitioner or class for [fill1] l for a mind-body therapy in the QuestionnaireFileName:	? past 12 months Adult CAM	

1Yes2No7Refused9Don't know

SkipInstructions:

<1> [goto MBO_MATC] <2,R,D> [goto YTQE_YOG]

Adult Alternative Health/Complementary And Alternative Medicine

Question ID:								
Question ID.	ALT.391_00.000 Instrument Variable Name: MBO_MATC QuestionnaireFileName: Adult CAM							
QuestionText:	About how much did you pay for these materials in the past 12 months?							
	*Enter '200' for \$200 or more.							
000-200	\$0-200							
997	Refused							
999	Don't know							
UniverseText: Sample adults 18+ who have bought self-help materials for a mind-body therapy in the past 12 months								
SkipInstructi	ons: <0-200,R,D> [goto YTQE_YOG]							
Question ID:	ALT.401_00.000 Instrument Variable Name: YTQE_YOG QuestionnaireFileName: Adult CAM							
QuestionText:	?[F1]							
	Have you EVER practiced any of the following? Please say yes or no to each.							
	Yoga?							
1	Yoga? Yes							
1 2								
	Yes							
2	Yes No							
2 7	Yes No Refused Don't know							

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Question ID:	ALT.402_00.000 Instrument Variable Name:	YTQE_TAI	QuestionnaireFileName:	Adult CAM				
QuestionText:	? [F1]							
	*Read if necessary.							
	Have you EVER practiced any of the following?							
	Tai Chi (tie-CHEE)?							
1	Yes							
2	No							
7	Refused							
9	Don't know							
UniverseText	Sample adults 18+							
SkipInstructi	ons: <1,2,R,D> [goto YTQE_QIG]							

_

Question ID:	ALT.40	3_00.000	Instrument Variable Name:	YTQE_QIG	QuestionnaireFileName:	Adult CAM
QuestionText:	? [F1]				
	*Rea	d if neces	sary.			
	Have	e you EVE	R practiced any of the followi	ng?		
	Qi	Gong (ch	ee-GONG)?			
1	Yes					
2	No					
7	Refi	used				
9	Don	't know				
UniverseTex	xt:	Sample	adults 18+			
SkipInstruct	tions:	<1,2,R,I if YTQE if YTQE if YTQE	E_YOG or YTQE_TAI or YT >> E_YOG=1 [goto YTQU_YOG] E_TAI=1 [goto YTQU_TAI] or E_QIG=1 [goto YTQU_QIG] C2,R,D> (YTQE_YOG and YT	or r		

			2012 NHIS Q	uestionnaire - A	Adult CAM	
		Adult		Complementary A t Version Date: 30-M	And Alternative Medicine	
			Document	version bate. 50-141	ay-15	
Question ID:	ALT.404	_00.000	Instrument Variable Name:	YTQU_YOG	QuestionnaireFileName:	Adult CAM
QuestionText:	? [F1]					
	DUR	NG THE	PAST 12 MONTHS, did y	ou practice Yoga for	yourself?	
1	Yes					
2	No					
7	Refu	sed				
9	Don'	t know				
UniverseText	t :	Sample	adults 18+ who have ever us	sed Yoga		
SkipInstructi	ons:	else i <1> If (D> `QE_TAI=1 [goto YTQU_T f YTQE_TAI =2 and YTQE YTQE_TAI and YTQE_QIC R,D> and (YTQE_TAI and	E_QIG=1 [goto YTQU G)=2 [goto YTQ_BTH	-ΨΥ]	
Question ID:	ALT.405	_00.000	Instrument Variable Name:	YTQU_TAI	QuestionnaireFileName:	Adult CAM
QuestionText:	? [F1]					
	DUR	NG THE	PAST 12 MONTHS, did y	ou practice Tai Chi fo	or yourself?	
1	Yes					
2	No					
7	Refu	sed				
9	Don'	t know				
UniverseText	t :	Sample	adults 18+ who have ever us	sed Tai Chi		
SkipInstructi	ons:	else i else i	D> if YTQE_QIG=1 [goto Y f (YTQE_QIG=2 and YTQU f (YTQU_YOG and YTQU YTQE_QIG and YTQU_YC	U_YOG=1) [goto YT _TAI and YTQE_QIO	G) in (2,R,D) [goto DITE_VEG]	

	2012 NHIS Questionnaire - Adult CAM Adult Alternative Health/Complementary And Alternative Medicine Document Version Date: 30-May-13
Question ID:	ALT.406_00.000 Instrument Variable Name: YTQU_QIG QuestionnaireFileName: Adult CAM
QuestionText:	? [F1]
	DURING THE PAST 12 MONTHS, did you practice Qi Gong (chee-GONG) for yourself?
1	Yes
2	No
7	Refused
9	Don't know
UniverseTex	xt: Sample adults 18+ who have ever used Qi Gong
Question ID:	Else if YTQU_QIG=1 and (YTQU_YOG and YTQU_TAI) in (2,R,D) [goto YTQ_BTHQ] <2,R,D> (YTQU_YOG and YTQU_TAI) in (2,R,D) [goto DITE_VEG] ALT.407_00.010 Instrument Variable Name: YTQ_BTHY QuestionnaireFileName: Adult CAM
QuestionText:	?[F1]
	Did you do breathing exercises as part of Yoga? Breathing exercises may involve actively controlling the way air is drawn in, or the rate or depth of breathing.
1	Yes
2	No
7	Refused
9	Don't know
UniverseTex	xt: Sample adults 18+ who have used Yoga in the past 12 months
SkipInstruct	tions: <1,2,R,D> if YTQU_TAI =1 [goto YTQ_BTHT]; Else if YTQU_TAI in (2,R,D) and YTQU_QIG=1 [goto YTQ_BTHQ] Else if YTQU_YOG=1 and (YTQU_TAI and YTQU_QIG) in (2,R,D) [goto YTQ_MEDY]

			2012 NHIS Q	uestionnaire - A	dult CAM	
		Adul		omplementary A Version Date: 30-Ma	nd Alternative Medicine	
			Document	version Date. 50-Ma	y-13	
Question ID:	ALT.408	_00.020	Instrument Variable Name:	YTQ_BTHT	QuestionnaireFileName:	Adult CAM
QuestionText:	?[F1]					
			eathing exercises as part of T e rate or depth of breathing.	ai Chi? Breathing exe	rcises may involve actively contr	colling the way air is
1	Yes					
2	No					
7	Refu	sed				
9	Don'	t know				
UniverseTe	xt:	Sample	adults 18+ who have used Ta	ai Chi in the past 12 m	onths	
SkipInstruc	tions:	Else	D> if YTQU_QIG =1 [goto X if YTQU_YOG=1 and YTQ if (YTQU_YOG and YTQU_	U_QIG in (2,R,D) [go		
Question ID:	ALT 409	00 030	Instrument Variable Name:	YTQ BTHQ	QuestionnaireFileName:	Adult CAM
Zutonon ID.	1111.407	_00.050	inder annene variable i vanie.	ITQ_DIIIQ	Zuestionnairer ner anne.	
QuestionText:	?[F1]					
	Did v	ou do bre	eathing exercises as part of O	i Gong (chee-GONG)	? Breathing exercises may involve	ve actively controlling

Did you do breathing exercises as part of Qi Gong (chee-GONG)? Breathing exercises may involve actively controlling the way air is drawn in, or the rate or depth of breathing.

- 1 Yes
- 2 No
- 7 Refused
- 9 Don't know

UniverseText: Sample adults 18+ who have used Qi Gong in the past 12 months

SkipInstructions: <1,2,R,D> If YTQU_YOG =1 [goto YTQ_MEDY] Else If YTQU_TAI=1 [goto YTQ_MEDT] Else if YTQU_QIG=1 [goto YTQ_MEDQ]

Adult Alternative Health/Complementary And Alternative Medicine

Question ID:	ALT.410_00.010	Instrument Variable Name:	YTQ_MEDY	QuestionnaireFileName:	Adult CAM
QuestionText:	? [F1]				
	Did you do me	editation as part of Yoga?			
1	Yes				
2	No				
7	Refused				
9	Don't know				
UniverseTex	t: Sample	adults 18+ who have used Yo	oga in the past 12 months		
SkipInstruct	If Y Else Else fill a	D> FQU_TAI=1 [goto YTQ_ME if YTQU_QIG=1 & (YTQU_ if (YTQ_BTHY or YTQ_ME nswer in YTQ_MOST([goto > YTQ_BTHY in (2,R,D) and	TAI) in (2,R,D)) [goto Y] DY)=1 and (YTQ_BTHT YTQ_USEM]	& YTQ_BTHQ) in (2,R,D,'	

Question ID:	ALT.411_00.02	() Instrument Variable Name:	YTQ_MEDT	QuestionnaireFileName:	Adult CAM
QuestionText:	? [F1]				
	Did you do i	neditation as part of Tai Chi?			
1	Yes				
2	No				
7	Refused				
9	Don't know				
UniverseTex	t: Samp	le adults 18+ who have used Ta	ai Chi in the past 12 month	3	
SkipInstruct	If els els	R,D> YTQU_QIG=1 [goto YTQ_MI e If YTQ_CNT ge 2 [goto YT0 e if YTQ_CNT=1, fill answer D> (YTQ_BTHT and YTQ_B	Q_MOST]; in YTQ_MOST([goto YT() [goto DIT_VEG]

Adult Alternative Health/Complementary And Alternative Medicine

Document Version Date: 30-May-13

Question ID:	ALT.412_00.030	Instrument Variable Name:	YTQ_MEDQ	QuestionnaireFileName:	Adult CAM
QuestionText:	? [F1]				
	Did you do me	editation as part of Qi Gong (o	chee-GONG)?		
1	Yes				
2	No				
7	Refused				
9	Don't know				
UniverseTex	t: Sample	adults 18+ who have used Qi	Gong in the past 12	months	
SkipInstruct	If Y' else <2,R,D	TQ_CNT ge 2 [goto YTQ_M0 if YTQ_CNT=1, fill answer in	n YTQ_MOST([goto	o YTQ_USEM] Q and YTQ_MEDY and YTQ_M	IEDT) in (2,R,D,''))
Question ID:	ALT.413_00.000	Instrument Variable Name:	YTQ_MOST	QuestionnaireFileName:	Adult CAM
QuestionText:	DURING THI	E PAST 12 MONTHS, which	exercise did you prac	ctice the most?	
	*Read categor	ies below.			
1	Yoga				
2	Tai-Chi				
3	Qi Gong				
7	Refused				
9	Don't Know				
UniverseTex	1	adults 18+ who have used motion with exercise	ore than one type of e	exercise in the past 12 months and	have used breathing or

SkipInstructions: <1-3> [goto YTQ_USEM] <R,D> [goto DITE_VEG]

Adult Alternative Health/Complementary And Alternative Medicine

Document Version Date: 30-May-13

Question ID:	ALT.414_	0.000 Instrume	ent Variable Name:	YTQ_USEM	QuestionnaireFileName:	Adult CAM
QuestionText:			2 MONTHS, did yo y one session does n		Γai Chi/Qi Gong] class or in som	e way receive formal
1	Yes					
2	No					
7	Refuse					
9	Don't l	now				
UniverseTex	t: S	ample adults 18	+ who have used an	exercise in the past 1	2 months	
SkipInstruct		1> [goto YTQ_] 2,R,D> [goto Y				
Question ID:	ALT.415	0.000 Instrume	ent Variable Name:	YTQ PTIM	QuestionnaireFileName:	Adult CAM
QuestionText:	_			-	r [fill1: Yoga/Tai Chi/Qi Gong] i	n the past 12 months?
QuestionText	Do you	know the exact	number of times you	a saw an instructor to		in the past 12 months:
1	Yes					
2	No					
7	Refuse	d				
9	Don't l	now				
UniverseTex	t: S	ample adults 18	+ who have seen a p	practitioner for an exe	rcise in the past 12 months	
SkipInstruct		1> [goto YTQ_ 2,R,D> [goto Y				
Question ID:	ALT.416_	0.000 Instrume	ent Variable Name:	YTQ_TMNO	QuestionnaireFileName:	Adult CAM
QuestionText:	DURIN	G THE PAST 12	2 MONTHS, how n	nany times did you se	e an instructor for [fill1: Yoga/Ta	ii Chi/Qi Gong]?
	*Enter	52' for 52 or mo	re times.			
01-52	1-52					
97	Refuse	d				
99	Don't l					
TT			Landra lan an dia	-han aftime with a l		ing in the sect 10
UniverseTex	.u: 2	ample adults 18	+ who know the nul	nder of times they ha	ve seen a practitioner for an exer	cise in the past 12

months

SkipInstructions: <1-52,R,D> [goto YTQ_HIC]

	2012 NHIS Questionnaire - Adult CAM
	Adult Alternative Health/Complementary And Alternative Medicine Document Version Date: 30-May-13
Question ID:	ALT.417_00.000 Instrument Variable Name: YTQ_TMCT QuestionnaireFileName: Adult CAM
QuestionText:	DURING THE PAST 12 MONTHS, ABOUT how many times did you see an instructor for [fill1: Yoga/Tai Chi/Qi Gong]? Would you say
	*Read categories below.
01	Only 1 time
02	2-5 times
03	6-10 times
04	11-15 times
05	16-20 times
06	21-25 times
07	More than 25 times
97	Refused
99	Don't know
UniverseTex	xt: Sample adults 18+ who don't know the specific number of times they have seen a practitioner for an exercise in the past 12 months or refuse the specific number of times
SkipInstruc	tions: <1-7,R,D> [goto YTQ_HIC]

Question ID:	ALT.418_00.000	Instrument Variable Name:	YTQ_HIC	QuestionnaireFileName:	Adult CAM
QuestionText:		E PAST 12 MONTHS, were a alth insurance?	iny of the costs of se	eing an instructor for [fill1: Yoga/	Tai Chi/Qi Gong]
1	Yes				
2	No				
7	Refused				
9	Don't know				
UniverseTex	t: Sample	adults 18+ who have seen a p	practitioner for an ex	ercise therapy in the past 12 mont	hs
SkipInstruct	10	oto YTQ_HICA] > [goto YTQ_HIT]			

Adult Alternative Health/Complementary And Alternative Medicine

Question ID:	ALT.419_00.000 Instrument Variable Name: YTQ_HICA QuestionnaireFileName: Adult CAM
QuestionText:	DURING THE PAST 12 MONTHS, did your health insurance cover all of the cost or just some of the cost of seeing an instructor for [fill1: Yoga/Tai Chi/Qi Gong]?
1	All of the cost
2	Some of the cost
7	Refused
9	Don't know
UniverseTex	t: Sample adults 18+ whose visit(s) to a practitioner for an exercise in the past 12 months were (at least partly) covered by health insurance
SkipInstruct	ions: <1> [goto YTQ_MAT] <2,R,D> [goto YTQ_HIT]
Question ID: QuestionText:	ALT.420_00.000 Instrument Variable Name: YTQ_HIT QuestionnaireFileName: Adult CAM Do you know the total amount you paid for seeing an instructor for [fill1: Yoga/Tai Chi/Qi Gong] in the past 12 months
	[fill2: not including the amount covered by insurance]?
1	Yes
2	No
7	Refused
9	Don't know
UniverseTex	t: Sample adults 18+ whose health insurance covered none or some of the cost for an exercise in the past 12 months
SkipInstruct	ions: <1> [goto YTQ_HITS] <2,R,D> [goto YTQ_AVGC]
Question ID:	ALT.421_00.000 Instrument Variable Name: YTQ_HITS QuestionnaireFileName: Adult CAM
QuestionText:	What is the total amount you paid for seeing an instructor for [fill1: Yoga/Tai Chi/Qi Gong] in the past 12 months [fill2 not including the amount covered by insurance]?
	*Enter '0' for no cost or free.
00000-26000	\$0-26000
99997	Refused
99999	Don't know
UniverseTex	t: Sample adults 18+ who know the amount they paid for an exercise in the past 12 months
SkipInstruct	ions: <0-26000,R,D> [goto YTQ_MAT]
Soft Edit:	Verify if over \$1000

Adult Alternative Health/Complementary And Alternative Medicine

Question ID:	ALT.422_	00.000	Instrument	Variable Name	: YTQ_AVGC		QuestionnaireF	ileName:	Adult CAM
QuestionText:				mount you pa ce] in the past	id for each visit for 12 months?	[fill1: Yog	a/Tai Chi/Qi Go	ong] [fill2:	not including the
1	Yes								
2	No								
7	Refus	ed							
9	Don't	know							
UniverseTex	xt:	Sample a	dults 18+ w	ho don't know	the total amount the	ey paid for	r an exercise in	the past 12	months
SkipInstruc			YTQ_AV						
		~2, K ,D~	[goto YTQ	_MAT]					
Question ID: QuestionText:	ALT.423_ On ave	00.000 rage, ho	Instrument V	Variable Name	: YTQ_AVGS	sit to an in	QuestionnaireF structor for [fill		Adult CAM ai Chi/Qi Gong]?
	ALT.423_ On ave	00.000 rage, ho ' if no co	i nstrument \ 7 much did	Variable Name		sit to an in			
QuestionText:	ALT.423_ On ave Enter '	00.000 rage, ho ' if no co)	i nstrument \ 7 much did	Variable Name		sit to an in			
QuestionText: 000-500	ALT.423_ On ave Enter ' \$0-50	00.000 rage, ho)' if no co) ed	i nstrument \ 7 much did	Variable Name		sit to an in			
QuestionText: 000-500 997	ALT.423_ On ave Enter ' \$0-50 Refus Don't	00.000 rage, hov l' if no co) ed know	instrument V v much did st or free	Variable Name you pay out-o			structor for [fill	1: Yoga/Ta	ai Chi/Qi Gong]?

Question ID:	ALT.424_0	0.000	Instrument	Variable Name:	YTQ_MAT	QuestionnaireFileName:	Adult CAM
QuestionText:				MONTHS, did yo ai Chi/Qi Gong]?	2 1	ook or other materials such as a DV	D, CD, or Video to
1	Yes						
2	No						
7	Refused						
9	Don't ki	now					
UniverseTex	at: Sa	mple	adults 18+ v	who have used an	exercise in the past	t 12 months	
SkipInstruct		20	to YTQ_MA > [goto DIT]	-			

Adult Alternative Health/Complementary And Alternative Medicine

Question ID:	ALT.425_00.000 I	nstrument Variable Name:	YTQ_MATC	QuestionnaireFileName:	Adult CAM							
QuestionText:	onText: About how much did you pay for these materials in the past 12 months?											
	*Enter '200' for \$	S200 or more.										
000-200	\$0-200											
997	Refused											
999	Don't know											
UniverseTex	t: Sample ac	ults 18+ who have bought	self-help materials for	or an exercise in the past 12 month	IS							
SkipInstruct	tions: <0-200,R,	D> [goto DITE_VEG]										
Question ID:	ALT.435_00.000 I	nstrument Variable Name:	DITE_VEG	QuestionnaireFileName:	Adult CAM							
QuestionText:	? [F1]											
	Have you EVER	used any of the following	special diets for two	weeks or more for health reasons?	,							
	Vegetarian, inclu	ding Vegan										
1	Yes											
2	No											
7	Refused											
9	Don't know											
UniverseTex	t: Sample ac	ults 18+										
SkipInstruct	tions: <1,2,R,D>	[goto DITEVER2]										

Adult Alternative Health/Complementary And Alternative Medicine

Question ID:	ALT.436	5_00.000	Instrument Variable Name:	DITEVER2	QuestionnaireFileName:	Adult CAM
QuestionText:	? [F1]				
	*Rea	d if neces	sary.			
	Have	you EVE	ER used any of the following s	special diets for two	weeks or more for health reasons?	
	Macr	obiotic				
1	Yes					
2	No					
7	Refi	ised				
9	Don	't know				
UniverseTex	xt:	Sample	adults 18+			
SkipInstruct	tions:	<1,2,R,I	D> [goto DITEVER3]			

Question ID:	ALT.437_	00.000	Instrument V	ariable Name:	DITEVER3	QuestionnaireFileName:	Adult CAM				
QuestionText:	? [F1]										
	*Read	if necess	sary.								
	Have y	Have you EVER used any of the following special diets for two weeks or more for health reasons?									
	Atkins										
1	Yes										
2	No										
7	Refuse	ed									
9	Don't	know									
UniverseTex	at:	Sample	adults 18+								
SkipInstruct	tions:	<1,2,R,I	D> [goto DIT	EVER4]							

Adult Alternative Health/Complementary And Alternative Medicine

Question ID:	ALT.438_00	000 Instrument Variable Na	me: DITEVER4	QuestionnaireFileName:	Adult CAM
QuestionText:	? [F1]				
	*Read if r	necessary.			
	Have you	EVER used any of the follo	wing special diets for two	weeks or more for health reasons?	
	Pritikin				
1	Yes				
2	No				
7	Refused				
9	Don't kno)W			
UniverseTex	t: Sar	nple adults 18+			
SkipInstruct	ions: <1,	2,R,D> [goto DITEVER5]			
Question ID:	ALT.439_00	000 Instrument Variable Na	me: DITEVER5	QuestionnaireFileName:	Adult CAM

QuestionText:	? [F1]										
	*Read if necessary.										
	Have you EVER used any of the following special diets for two weeks or more for health reasons?										
	Ornish										
1	Yes										
2	No										
7	Refused										
9	Don't know										
UniverseText:	Sample adults 18+										
SkipInstructio	ns: <1,2,R,D> if DITE_VEG=1 or DITEVER2=1 or DITEVER3=1 or DITEVER4=1 or DITEVER5=1, cycle through applicable DIT_USM1, DIT_USM2, DIT_USM3, DIT_USM4, DIT_USM5;										
	else if (DITE_VEG and DITEVER1-DITEVER5) in (2,R,D [goto MOVE_FLD]										

	2012 NHIS Questionnaire - Adult CAM Adult Alternative Health/Complementary And Alternative Medicine Document Version Date: 30-May-13									
Question ID:	ALT.440	_00.000	Instrument Varia	ble Name:	DIT_USM1		QuestionnaireFileName:	Adult CAM		
QuestionText:	? [F1]									
	DUR reaso		E PAST 12 MON	ΓHS, did you	use a vegetariar	n, including	g Vegan diet for two wee	ks or more for health		
1	Yes									
2	No									
7	Refu									
9	Don	t know								
UniverseTex	xt:	Sample	adults 18+ who h	ave ever use	d special diets-ve	egetarian, i	ncluding vegan			
		else i else i <1> if (1		[goto DIT_U [goto DIT_U [goto DIT_U DITEVER4 a	JSM3; SM4] SM5] nd DITEVER5)		[goto DIT_WGT1]; 85) in (2,R,D) [goto MO	VE_FLD]		
Question ID:	ALT.441	_00.000	Instrument Varia	ble Name:	DIT_USM2		QuestionnaireFileName:	Adult CAM		
QuestionText:	? [F1]									
	DUR	NG THE	E PAST 12 MONT	ГНS, did you	use a macrobiot	tic diet for	two weeks or more for h	ealth reasons?		
1	Yes									
2	No									
7	Refu	sed								
9	Don	t know								
UniverseTex	xt:	Sample	adults 18+ who h	ave ever use	d special diets-m	acrobiotic				
SkipInstruc	tions:	else i else i <1> if (]	TEVER3 =1 [got if DITEVER4=1 if DITEVER5=1 DIT_USM1=1) an \$2,R,D,' '> if (DIT	[goto DIT_U [goto DIT_U nd (DITEVE	SM4] SM5] R3 and DITEVE		TEVER5) in (2,R,D) [gc R5) in (2,R,D) and ((DIT			

2012 NHIS Questionnaire - Adult CAM Adult Alternative Health/Complementary And Alternative Medicine Document Version Date: 30-May-13										
Question ID:	ALT.442_00.000 Instrument Variable Name: DIT_USM3 QuestionnaireFileName: Adult CAM									
QuestionText:	? [F1]									
	DURING THE PAST 12 MONTHS, did you use the Atkins diet for two weeks or more for health reasons?									
1	Yes									
2	No									
7	Refused									
9	Don't know									
UniverseTex	xt: Sample adults 18+ who have ever used special diets-Atkins									
SkipInstruct	etions: <1,2,R,D> If DITEVER4 =1 [goto DIT_USM4; else if DITEVER5=1 [goto DIT_USM5] <1> if (DIT_USM1=1 or DIT_USM2=1) and (DITEVER4 and DITEVER5) in (2,R,D) [goto DIT_WGT1]; Else if <2,R,D,''> if (DITEVER4 and DITEVER5) in (2,R,D) and (DIT_USM1 and DIT_USM2) ne 1) [goto MOVE_FLD]									
Question ID: QuestionText:	ALT.443_00.000 Instrument Variable Name: DIT_USM4 QuestionnaireFileName: Adult CAM ? [F1]									

DURING THE PAST 12 MONTHS, did you use the Pritikin diet for two weeks or more for health reasons?

- Yes
- 2 No

1

- 7 Refused
- 9 Don't know

UniverseText: Sample adults 18+ who have ever used special diets-Pritikin

SkipInstructions: <1,2,R,D>

If DITEVER5 =1 [goto DIT_USM5] Else if (DIT_USM1=1 or DIT_USM2=1 or DIT_USM3=1 or DIT_USM4=1) [goto DIT_WGT1]; Else <2,R,D, ' "> if (DITEVER5) in (2,R,D)) and ((DIT_USM1 and DIT_USM2 and DIT_USM3) ne 1) [goto MOVE_FLD]

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			2012	NHIS Que	estionnaire -	Adult C	CAM				
		Adult	t Alternative	Health/Co	mplementary	y And Alt	ternative Medicine				
Document Version Date: 30-May-13											
Question ID:	ALT.444	_00.000	Instrument Vari	able Name:	DIT_USM5	(QuestionnaireFileName:	Adult CAM			
QuestionText:	? [F1]]									
	DUR	ING THE	E PAST 12 MON	THS, did you	use the Ornish f	for two weel	ks or more for health rea	isons?			
1	Yes										
2	No										
7	Refu										
9	Don	t know									
UniverseTex	xt:	Sample	adults 18+ who l	have ever used	l special diets-Or	rnish					
SkipInstruc	tions:		IT_USM1 or DI		IT_USM3 or DI [goto MOVE_F		r DIT_USM5)=1 [goto]	DIT_WGT1];			
Question ID: QuestionText:		_	Instrument Vari		DIT_WGT1 or weight loss?	(QuestionnaireFileName:	Adult CAM			
1	Yes										
2	No										
7	Refu	sed									
9	Don'	t know									
UniverseTex	xt:	Sample	adults 18+ who l	have used spec	cial diets in the p	past 12 mon	ths				
SkipInstruc	tions:	<1,2,R,I	D> [goto DIT_PI	RE]							
Question ID:	ALT.446	5_00.000	Instrument Vari	able Name:	DIT_PRE	(QuestionnaireFileName:	Adult CAM			
QuestionText:	? [F1]]									
	Have	you EVE	R seen a practiti	oner for speci	al diets?						
1	Yes										
2	No										
7	Refu										
9 UniverseTe		t know Sample	adulte 18± who 1	have used one	aial diets in the m	nact 17 man	the				
		_		nave used spec	cial diets in the p	past 12 mon	uis				
SkipInstruc	tions:		to DIT_PRU] > [goto DIT_MA	T]							

2012 NHIS Questionnaire - Adult CAM Adult Alternative Health/Complementary And Alternative Medicine Document Version Date: 30-May-13										
Question ID:	ALT.447	_00.000	Instrument Variable Name:	DIT_PRU	QuestionnaireFileName:	Adult CAM				
QuestionText:	? [F1]								
	DUR	ING THE	PAST 12 MONTHS, did yo	u see a practitioner	for special diets?					
1	Yes									
2	No									
7 9	Refu Don	sed t know								
UniverseTe	xt:	Sample	adults 18+ who have ever see	n a practitioner for	special diets					
SkipInstruc	tions:		o DIT_PTIM] [goto DIT_MAT]							
Question ID: QuestionText:		_	Instrument Variable Name: he exact number of times you	DIT_PTIM 1 saw a practitioner	QuestionnaireFileName: for special diets in the past 12 mo	Adult CAM nths?				
1	Yes									
2	No									
7 9	Refu	sed t know								
UniverseTex			adults 18+ who have seen a p	ractitioner for speci	ial diets in the past 12 months					
SkipInstruc	tions:	<1> [got	to DIT_TMNO] [goto DIT_TMCT]	·	·					
Question ID:	ALT.449	0_00.000	Instrument Variable Name:	DIT_TMNO	QuestionnaireFileName:	Adult CAM				
QuestionText:	DUR	ING THE	PAST 12 MONTHS, how m	any times did you s	see a practitioner for special diets?					
	*Ente	er '52' for	52 or more times.							
01-52	1-52									
97	Refu									
99	Don	t know								
UniverseTe	xt:	Sample a months	adults 18+ who know the nur	nber of times they h	nave seen a practitioner for special	diets in the past 12				
SkipInstruc	tions:	<1-52,R	,D>[goto DIT_HIC]							

	2012 NHIS Questionnaire - Adult CAM												
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	Document Version Date: 30-May-13												
·													
Question ID:	ALT.450_00.000 Instrument Variable Name: DIT_TMCT QuestionnaireFileName: Adult CAM												
QuestionText:	DURING THE PAST 12 MONTHS, ABOUT how many times did you see a practitioner for special diets? Would you say												
	*Read categories below.												
01	Only 1 time												
02	2-5 times												
03	6-10 times												
04	11-15 times												
05	16-20 times												
06	21-25 times												
07	More than 25 times												
97	Refused												
99	Don't know												
UniverseTex	t: Sample adults 18+ who don't know the specific number of times they have seen a practitioner for special diets in the past 12 months or refuse the specific number of times												
SkipInstruct	ions: <1-7,R,D> [goto DIT_HIC]												

Question ID:	ALT.451_00	000	Instrument Variable Name:	DIT_HIC	QuestionnaireFileName:	Adult CAM
QuestionText:	DURING insurance		E PAST 12 MONTHS, were a	any of the costs of	f seeing a practitioner for special diets	covered by health
1	Yes					
2	No					
7	Refused					
9	Don't kn	w				
UniverseTex	t: Sa	nple	adults 18+ who have seen a p	practitioner for sp	ecial diets in the past 12 months	
SkipInstruct		20	to DIT_HICA] > [goto DIT_HIT]			

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Question ID:	ALT.452_00.000 Instrument Variable Name: DIT_HICA QuestionnaireFileName: Adult CAM
QuestionText:	DURING THE PAST 12 MONTHS, did your health insurance cover all of the cost or just some of the cost of seeing a practitioner for special diets?
1	All of the cost
2	Some of the cost
7	Refused
9	Don't know
UniverseTex	t: Sample adults 18+ whose visit(s) to a practitioner for special diets in the past 12 months were (at least partly) covered by health insurance
SkipInstructi	ions: <1> [goto DIT_MAT] <2,R,D> [goto DIT_HIT]
	ALT.453_00.000 Instrument Variable Name: DIT_HIT QuestionnaireFileName: Adult CAM
QuestionText:	Do you know the total amount you paid for seeing a practitioner for special diets in the past 12 months [fill1: not including the amount covered by insurance]?
1	Yes
2	No
7	Refused
9	Don't know
UniverseTex	Sample adults 18+ whose health insurance covered none or some of the cost for special diets in the past 12 months
SkipInstructi	ions: <1> [goto DIT_HITS] <2,R,D> [goto DIT_AVGC]
Question ID:	ALT.454_00.000 Instrument Variable Name: DIT_HITS QuestionnaireFileName: Adult CAM
-	ALT.454_00.000 Instrument Variable Name: DIT_HITS QuestionnaireFileName: Adult CAM What is the total amount you paid for seeing a practitioner for special diets in the past 12 months [fill1: not including the amount covered by insurance]?
-	What is the total amount you paid for seeing a practitioner for special diets in the past 12 months [fill1: not including the
-	What is the total amount you paid for seeing a practitioner for special diets in the past 12 months [fill1: not including the amount covered by insurance]?
QuestionText:	What is the total amount you paid for seeing a practitioner for special diets in the past 12 months [fill1: not including the amount covered by insurance]? *Enter '0' for no cost or free.
QuestionText: 00000-26000	 What is the total amount you paid for seeing a practitioner for special diets in the past 12 months [fill1: not including the amount covered by insurance]? *Enter '0' for no cost or free. \$0-26000
QuestionText: 00000-26000 99997	 What is the total amount you paid for seeing a practitioner for special diets in the past 12 months [fill1: not including the amount covered by insurance]? *Enter '0' for no cost or free. \$0-26000 Refused Don't know
99997 99999	 What is the total amount you paid for seeing a practitioner for special diets in the past 12 months [fill1: not including the amount covered by insurance]? *Enter '0' for no cost or free. \$0-26000 Refused Don't know t: Sample adults 18+ who know the amount they paid for special diets in the past 12 months

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Question ID: A	ALT.455_00.000 Instrument Variable Name: DIT_AVGC QuestionnaireFileName: Adult CAN	1
QuestionText:	Do you know the average amount you paid for each visit for special diets {fill1: not including the amount cover insurance} in the past 12 months?	red by
1	Yes	
2	No	
7	Refused	
9	Don't know	
UniverseText:	Sample adults 18+ who don't know the total amount they paid for special diets in the past 12 months	
SkipInstruction	ons: <1> [goto DIT_AVGS] <2,R,D> [goto DIT_MAT]	
Question ID: A	ALT.456 00.000 Instrument Variable Name: DIT AVGS QuestionnaireFileName: Adult CAN	4
QuestionText:	On average, how much did you pay out-of-pocket for each visit to a practitioner for special diets?	
	Enter '0' if no cost or free	
000 500	#0. Z00	
000-500 997	\$0-500 Refused	
997 999	Don't know	
UniverseText:	Sample adults 18+ who know the average per visit they paid for special diets in the past 12 months	
SkipInstruction	ons: <0-500,R,D> [goto DIT_MAT]	
Question ID: A	ALT.457_00.000 Instrument Variable Name: DIT_MAT QuestionnaireFileName: Adult CAM	1
QuestionText:	DURING THE PAST 12 MONTHS, did you buy a self-help book or other materials such as a DVD, CD, or Vie learn about special diets?	deo to
1	Yes	
- -	I CS	

2 No

7 Refused

9 Don't know

UniverseText: Sample adults 18+ who have used special diets in the past 12 months

SkipInstructions: <1> [goto DIT_MATC] <2,R,D> [goto MOVE_FLD]

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	ALT.458_00.000	Instrument Variable Name:	DIT_MATC	QuestionnaireFileName:	Adult CAM
QuestionText:	About how mu	ch did you pay for these mate	erials in the past 12 n	nonths?	
	*Enter '200' fo	r \$200 or more.			
000-200	\$0-200				
997	Refused				
999	Don't know				
UniverseText	: Sample	adults 18+ who have bought	self-help materials fo	r special diets in the past 12 mon	ths
SkipInstructi	ons: <0-200,	R,D> [goto MOVE_FLD]			
Question ID:	ALT.468_00.000	Instrument Variable Name:	MOVE_FLD	QuestionnaireFileName:	Adult CAM
Question ID: QuestionText:	ALT.468_00.000 ? [F1]	Instrument Variable Name:	MOVE_FLD	QuestionnaireFileName:	Adult CAM
	- ? [F1]	Instrument Variable Name: practiced any of the followin	_		Adult CAM
	- ? [F1] Have you ever		_		Adult CAM
	- ? [F1] Have you ever	practiced any of the followin	_		Adult CAM
QuestionText:	- ? [F1] Have you ever Feldenkrais (F)	practiced any of the followin	_		Adult CAM
QuestionText: 1	- ? [F1] Have you ever Feldenkrais (F Yes	practiced any of the followin	_		Adult CAM
QuestionText: 1 2	- ? [F1] Have you ever Feldenkrais (F Yes No	practiced any of the followin	_		Adult CAM
QuestionText: 1 2 7	? [F1] Have you ever Feldenkrais (F Yes No Refused Don't know	practiced any of the followin	_		Adult CAM

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Question ID:	ALT.469_00.000	Instrument Variable Name:	MOVE_ALX	QuestionnaireFileName:	Adult CAM
QuestionText:	? [F1]				
	Have you ever	practiced any of the following	g movement or exerci	se techniques?	
	Alexander Tec	chnique			
1	Yes				
2	No				
7	Refused				
9	Don't know				
UniverseTex	t: Sample	adults 18+			
		D>[goto MOVE PIL]			
SkipInstruct	JONS: $\leq 1/K$				
SkipInstruct	10 115: <1,2,K,				
SkipInstruct	1018: <1,2,K,				
SkipInstruct	1015: <1,2,K,				
SkipInstruct	10ns: <1,2,K,				
SkipInstruct		Instrument Variable Name:	MOVE_PIL	QuestionnaireFileName:	Adult CAM
			MOVE_PIL	QuestionnaireFileName:	Adult CAM
Question ID:	ALT.470_00.000 ? [F1]				Adult CAM
Question ID:	ALT.470_00.000 ? [F1]	Instrument Variable Name:			Adult CAM
Question ID:	ALT.470_00.000 ? [F1] Have you even Pilates (pih-L4	Instrument Variable Name:			Adult CAM
Question ID: QuestionText:	ALT.470_00.000 ? [F1] Have you ever Pilates (pih-LA Yes	Instrument Variable Name:			Adult CAM
Question ID: QuestionText:	ALT.470_00.000 ? [F1] Have you even Pilates (pih-L4	Instrument Variable Name:			Adult CAM
Question ID: QuestionText: 1 2	ALT.470_00.000 ? [F1] Have you even Pilates (pih-LA Yes No	Instrument Variable Name:			Adult CAM
Question ID: QuestionText: 1 2 7	ALT.470_00.000 ? [F1] Have you even Pilates (pih-LA Yes No Refused Don't know	Instrument Variable Name:			Adult CAM

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Question ID:	ALT.471	_00.000	Instrument Variable Name:	MOVE_TPI	QuestionnaireFileName:	Adult CAM				
QuestionText:	? [F1]]								
	Have	you ever	practiced any of the followin	g movement or exe	ercise techniques?					
	Trage	er Psycho	physical Integration							
1	Yes									
2	No									
7	Refu	sed								
9	Don	t know								
UniverseTex	xt:	Sample	adults 18+							
SkipInstructions:		MOVP <<2,R,D>	questions]; > if (All MOVE* ne 1) and (n	nore than 3 modalit	VE_PIL=1 or MOVE_TP1=1 [cyclines excluding chelation/ayurveda) [nosen excluding chelation/ayurveda	goto ALT_TOP3];				

Question ID:	ALT.472_00.0	00 Instrument Variable Name:	MOVP_FLD	QuestionnaireFileName:	Adult CAM
QuestionText:	? [F1]				
	Have you e	ver seen a practitioner or teach	ner for		
	Feldenkrais	(FELL-den-krice)?			
1	Yes				
2	No				
7	Refused				
9	Don't knov	V			
UniverseTex	at: Samj	ple adults 18+ who have used	Feldenkrais		
SkipInstruct	If <1>	R,D> any other MOVE_* ='1' [goto If (MOVE_ALX and MOVE_ ,D> if (MOVE_ALX and MO	PIL and MOVE_TPI) ne	-1') [goto MOV_FLD]	

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Question ID:	ALT.473_	00.000	Instrument Variable Name:	MOVP_ALX	QuestionnaireFileName:	Adult CAM
QuestionText:	? [F1]					
	Have ye	ou ever	seen a practitioner or teache	r for		
	Alexan	der Tec	hnique?			
1	Yes					
2	No					
7	Refuse	ed				
9	Don't l	know				
UniverseTex	t: S	Sample	adults 18+ who have used A	lexander technique		
SkipInstruct		Else	v other MOVE_* ='1' [goto r if (MOVE_PIL and MOVE_	TPI) ne '1' and any MOV	* question] P_* ='1' [goto next appropria /E_*=1 [goto appropriate MC	

Question ID:	ALT.47	4_00.000	Instrument Variable Name:	MOVP_PIL	QuestionnaireFileName:	Adult CAM
QuestionText:	? [F1]				
	Have	e you ever	seen a practitioner or teacher	for		
	Pilate	es (pih-LA	H-teez)?			
1	Yes					
2	No					
7	Refi	used				
9	Don	't know				
UniverseTex	xt:	Sample	adults 18+ who have used Pila	tes		
SkipInstruc	tions:		<pre>D> If MOVE_TPI ='1' [goto M ny MOVP_* ='1' [goto next ap</pre>		on]	
		<2,R,D>	Else if all of MOVP_* ne '1'	[goto appropriate MOVI	U_* question(s)]	

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ALT.475 00.000 Instrument Variable Name: **Question ID:** QuestionnaireFileName: MOVP TPI Adult CAM **QuestionText:** ? [F1] Have you ever seen a practitioner or teacher for ... Trager Psychophysical Integration? 1 Yes 2 No 7 Refused 9 Don't know Sample adults 18+ who have used Trager Psychophysical Integration UniverseText: **SkipInstructions:** <1,2,R,D> If any MOVP_* ='1' [goto next appropriate MOV_* question] <2,R,D> If all of MOVP_* ne '1' and where there's MOVE_*=1 [goto appropriate MOVU_* question(s)] **Question ID:** ALT.476_00.000 Instrument Variable Name: MOV_FLD QuestionnaireFileName: Adult CAM **QuestionText:** ? [F1] DURING THE PAST 12 MONTHS, did you see a practitioner or teacher for ...? Feldenkrais (FELL-den-krice) 1 Yes 2 No 7 Refused 9 Don't know UniverseText: Sample adults 18+ who have ever seen a practitioner for Feldenkrais

SkipInstructions:<1,2,R,D> Cycle through all MOVP_*=1 [goto MOV_*] in the appropriate sequence<2,R,D>IF all other MOVP_* ne1 [goto MOVU_FLD]<1>IF all others MOVP_* ne1 [goto MOV_PTIM]

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Question ID:	ALT.477	7_00.000	Instrument Variable Name:	MOV_ALX	QuestionnaireFileName:	Adult CAM
QuestionText:	? [F1]				
	DUR	ING THE	E PAST 12 MONTHS, did yo	u see a practitioner	or teacher for?	
	Alexa	ander Tec	hnique			
1	Yes					
2	No					
7	Refu	ised				
9	Don	't know				
UniverseTex	xt:	Sample	adults 18+ who have ever see	en a practitioner for	Alexander technique	
SkipInstruct	tions:	<2,R,D> Else	D> Cycle through all MOVP_ > IF all other MOVP_* ne1 if all other MOVP_* ne1 and all others MOVP_* ne1 [got	[goto MOVU_AL] MOVE_FLD=1 [g	X]	

Question ID:	ALT.478_00.00) Instrument Variable Name:	MOV_PIL	QuestionnaireFileName:	Adult CAM					
QuestionText:	? [F1]									
	DURING TH	DURING THE PAST 12 MONTHS, did you see a practitioner or teacher for?								
	Pilates (pih-l	LAH-teez)								
1	Yes									
2	No									
7	Refused									
9	Don't know									
UniverseTex	t: Samp	e adults 18+ who have ever see	en a practitioner for	Pilates						
SkipInstruct	ions: <1,2,F	,D> If MOVP_TPI=1 [goto M	OV_TPI]							
		· _ /	ALX and MOVP_T	R,D]) [goto MOVU_FLD] P) in [2,R,D]) [goto MOVU_FLD M]]					

			2012 NHIS Qu	estionnaire -	Adult CAM				
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Question ID:	ALT.47	9_00.000	Instrument Variable Name:	MOV_TPI	QuestionnaireFileName:	Adult CAM			
QuestionText:	? [F1]							
	DUR	ING THE	E PAST 12 MONTHS, did yo	u see a practitione	r or teacher for?				
	Trag	er Psycho	physical Integration						
1	Yes								
2	No								
7	Refi	used							
9	Don	't know							
UniverseTex	xt:	Sample	adults 18+ who have ever see	en a practitioner fo	r Trager Psychophysical Integration	1			
SkipInstructions:		<2,R,D>	to MOV_PTIM] ≥ if no to all MOV, go to MO to MOV_PTIM]	VU question for fi	rst relevant MOVE answer;				

Question ID:	ALT.48	0_00.000	Instrument Variable Name:	MOVU_FLD	QuestionnaireFileName:	Adult CAM
QuestionText:	? [F1]				
	DUR	ING THE	E PAST 12 MONTHS, did you	use?		
	Felde	enkrais (Fl	ELL-den-krice)			
1	Yes					
2	No					
7	Refi	ised				
9	Don	't know				
UniverseTe	xt:	Sample	adults 18+ who have used Fel	denkrais		
SkipInstruc	tions:	-	rough all MOVU_* questions ore skips to a MOVU_* questi		C or MOV_ALX) IN ('2','7','9'))
		<2,R,D> If (al	D> If (any MOVU_*=1 or any l MOVU_*ne1 or any MOV_ If (all MOVU_* and MOV_*)	*=1) [goto MOV_M	_ ,	
			ore than 3 modalities not incluin f <=3 modalities excluding ch			

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Question ID:	ALT.48	1_00.000	Instrument Variable Name:	MOVU_ALX	QuestionnaireFileName:	Adult CAM				
QuestionText:	? [F1	[]								
	DUF	URING THE PAST 12 MONTHS, did you use?								
	Alex	exander Technique								
1	Yes									
2	No									
7	Ref	fused								
9	Dor	n't know								
UniverseText:		Sample adults 18+ who have used Alexander technique								
SkipInstructions:		Cycle through all MOVU_* questions where (MOVP_ALX or MOV_ALX) IN ('2','7','9') If no more skips to a MOVU_* question(s) then!								
		<2,R,D> If (al Else if mo	D> If (any MOVU_*=1 or any 1 MOVU_*ne1 or any MOV_ If (all MOVU_* and MOV_*) ore than 3 modalities not inclu if <=3 modalities excluding ch	*=1) [goto MOV_MAT]) ne1 and ding chelation/ayurveda [goto ALT_TOP3];					

Question ID:	ALT.482	2_00.000	Instrument Variable Name:	MOVU_PIL	QuestionnaireFileName:	Adult CAM					
QuestionText:	? [F1]									
	DUR	DURING THE PAST 12 MONTHS, did you use?									
	Pilate	Pilates (pih-LAH-teez)									
1	Yes	Yes									
2	No	No									
7	Refi	Refused									
9	Don	Don't know									
UniverseText:		Sample adults 18+ who have used Pilates									
SkipInstructions:		Cycle through all MOVU_* questions where (MOVP_ALX or MOV_ALX) IN ('2','7','9') If no more skips to a MOVU_* question(s) then! <1,2,R,D> If (any MOVU_*=1 or any MOV_*=1) [goto MOV_PTIM] <2,R,D> If (all MOVU_*nel or any MOV_*=1) [goto MOV_MAT] Else If (all MOVU_* and MOV_*) nel and if more than 3 modalities not including chelation/ayurveda [goto ALT_TOP3]; else if <=3 modalities excluding chelation/ayurveda [goto TP1_REA1]									

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Question ID:	ALT.48	3_00.000	Instrument Variable Name:	MOVU_TPI	QuestionnaireFileName:	Adult CAM	
QuestionText:	? [F1]					
	DUR	RING THE	E PAST 12 MONTHS, did you	use?			
	Trag	er Psycho	physical Integration				
1	Yes						
2	No						
7	Ref	used					
9	Dor	't know					
UniverseTex	xt:	Sample	adults 18+ who have used Tra	ger Psychophysical Integ	ration		
SkipInstruc	tions:	Cycle through all MOVU_* questions where (MOVP_ALX or MOV_ALX) IN ('2','7','9') If no more skips to a MOVU_* question(s) then!					
		<2,R,D If (al Else if mo	D> If (any MOVU_*=1 or any ll MOVU_*ne1 or any MOV_* If (all MOVU_* and MOV_*) ore than 3 modalities not including ch	*=1) [goto MOV_MAT] nel and ding chelation/ayurveda [goto ALT_TOP3];		

Question ID:	ALT.484_00.000 Instrument Variable Name: MOV_PTIM QuestionnaireFileName: Adult CAM
QuestionText:	Do you know the exact number of times you saw a practitioner or teacher for movement and exercise techniques in the past 12 months?
1	Yes
2	No
7	Refused
9	Don't know
UniverseTex	Sample adults 18+ who have seen a practitioner for movement and exercise techniques in the past 12 months
SkipInstruct	ions: <1> [goto MOV_TMNO] <2,R,D> [goto MOV_TMCT]

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Question ID:	ALT.485_0	00.000 Instrument Variable Name	MOV_TMNO	QuestionnaireFileName:	Adult CAM
QuestionText:	DURIN techniq	G THE PAST 12 MONTHS, how ues?	many times did you see	a practitioner or teacher for mo	vement and exercise
	*Enter	52' for 52 or more times.			
01-52	1-52				
97	Refuse	d			
99	Don't k	now			
UniverseText:		Sample adults 18+ who know the rechniques in the past 12 months	number of times they have	e seen a practitioner for movem	ent and exercise
SkipInstructio	ons: <	<1-52,R,D>[goto MOV_HIC]			
Question ID:	ALT.486_0	00.000 Instrument Variable Name	MOV_TMCT	QuestionnaireFileName:	Adult CAM
Question ID:	– DURIN	00.000 Instrument Variable Name G THE PAST 12 MONTHS, ABG e techniques? Would you say			
	DURIN exercise	G THE PAST 12 MONTHS, ABO			
	DURIN exercise	G THE PAST 12 MONTHS, ABG e techniques? Would you say categories below.			
QuestionText:	DURIN exercise *Read o	G THE PAST 12 MONTHS, ABG e techniques? Would you say categories below. time			
QuestionText: 01	DURIN exercise *Read c Only 1	G THE PAST 12 MONTHS, ABG e techniques? Would you say categories below. time nes			
QuestionText: 01 02	DURIN exercise *Read of Only 1 2-5 tim	G THE PAST 12 MONTHS, ABG e techniques? Would you say categories below. time nes mes			
QuestionText: 01 02 03	DURIN exercise *Read of Only 1 2-5 tim 6-10 ti	G THE PAST 12 MONTHS, ABG e techniques? Would you say categories below. time nes mes times			
QuestionText: 01 02 03 04	DURIN exercise *Read of Only 1 2-5 tim 6-10 ti 11-15 t	G THE PAST 12 MONTHS, ABG e techniques? Would you say categories below. time nes mes times times			
QuestionText: 01 02 03 04 05	DURIN exercise *Read of Only 1 2-5 tim 6-10 ti 11-15 ti 16-20 ti 21-25 ti	G THE PAST 12 MONTHS, ABG e techniques? Would you say categories below. time nes mes times times			
QuestionText: 01 02 03 04 05 06	DURIN exercise *Read of Only 1 2-5 tim 6-10 ti 11-15 ti 16-20 ti 21-25 ti	G THE PAST 12 MONTHS, ABG e techniques? Would you say categories below. time nes mes times times times times han 25 times			
QuestionText: 01 02 03 04 05 06 07	DURIN exercise *Read of Only 1 2-5 tim 6-10 ti 11-15 ti 16-20 ti 21-25 ti More t	G THE PAST 12 MONTHS, ABG e techniques? Would you say categories below. time nes mes times times times times times han 25 times d			
QuestionText: 01 02 03 04 05 06 07 97	DURIN exercise *Read of Only 1 2-5 tim 6-10 ti 11-15 ti 16-20 ti 21-25 ti More t Refuse Don't k	G THE PAST 12 MONTHS, ABG e techniques? Would you say categories below. time nes mes times times times times times han 25 times d	DUT how many times did	l you see a practitioner or teach	er for movement and

Adult Alternative Health/Complementary And Alternative Medicine

Question ID:	ALT.487_00.000 Instrument Variable Name: MOV_HIC QuestionnaireFileName: Adult CAM
QuestionText:	DURING THE PAST 12 MONTHS, were any of the costs of seeing a practitioner or teacher for movement and exercise techniques covered by health insurance?
1	Yes
2	No
7	Refused
9	Don't know
UniverseText	: Sample adults 18+ who have seen a practitioner for movement and exercise techniques in the past 12 months
SkipInstructi	ons: <1> [goto MOV_HICA] <2,R,D> [goto MOV_HIT]
Question ID:	ALT.488_00.000 Instrument Variable Name: MOV_HICA QuestionnaireFileName: Adult CAM DURING THE PAST 12 MONTHS, did your health insurance cover all of the cost or just some of the cost of seeing a
	practitioner or teacher for movement and exercise techniques?
1	All of the cost
2	Some of the cost
7	Refused
9	Don't know
UniverseText	: Sample adults 18+ whose visit(s) to a practitioner for movement and exercise techniques in the past 12 months were (at least partly) covered by health insurance
SkipInstructi	ons: <1> [goto MOV_MAT] <2,R,D> [goto MOV_HIT]
Question ID:	ALT.489_00.000 Instrument Variable Name: MOV_HIT QuestionnaireFileName: Adult CAM
QuestionText:	Do you know the total amount you paid for seeing a practitioner or teacher for movement and exercise techniques in the past 12 months [fill1: not including the amount covered by insurance]?
1	Yes
2	No
7	Refused
9	Don't know
UniverseText	: Sample adults 18+ whose health insurance covered none or some of the cost for movement and exercise technique
Universerext	in the past 12 months

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Document Version Date: 30-May-13							
Question ID:	ALT.490_00.000 Instrument Variable Name: MOV_HITS	QuestionnaireFileName: Adult CAM					
QuestionText:	What is the total amount you paid for seeing a practitioner or teach months [fill1: not including the amount covered by insurance]?	er for movement and exercise techniques in the past 12					
	*Enter '0' for no cost or free.						
00000-26000	0 \$0-26000						
99997	Refused						
99999	Don't know						
UniverseText	Sample adults 18+ who know the amount they paid for move	ement and exercise techniques in the past 12 months					
SkipInstructi	ctions: <0-26000,R,D> [goto MOV_MAT]						
Soft Edit:	Verify if over \$1000						
Question ID:	ALT.491_00.000 Instrument Variable Name: MOV_AVGC	QuestionnaireFileName: Adult CAM					
QuestionText:	Do you know the average amount you paid for each visit for mover amount covered by insurance} in the past 12 months?	ment and exercise techniques {fill1: not including the					
1	Yes						
2	No						
7	Refused						
9	Don't know						
UniverseText	Sample adults 18+ who don't know the total amount they pair months	id for movement and exercise techniques in the past 12					
SkipInstructi	ctions: <1> [goto MOV_AVGS] <2,R,D> [goto MOV_MAT]						

Question ID:	ALT.492_	_00.000	Instrument Variable Name:	MOV_AVGS	QuestionnaireFileName:	Adult CAM
QuestionText:	On ave technic	-	ow much did you pay out-of-p	oocket for each visit t	o a practitioner or teacher for mov	vement and exercise
	*Enter	'0' if no	cost or free.			
000-500	\$0-50	0				
997	Refus	ed				
999	Don't	know				
UniverseTex		Sample months	adults 18+ who know the ave	erage per visit they pa	id for movement and exercise tec	hniques in the past 12
SkipInstruct	tions:	<0-500,1	R,D> [goto MOV_MAT]			

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	ALT.493_00.000	Instrument Variable Name:	MOV_MAT	QuestionnaireFileName:	Adult CAM
QuestionText:		E PAST 12 MONTHS, did y ovement and exercise technic		or other materials such as a DV	D, CD, or Video to
1	Yes				
2	No				
7	Refused				
9	Don't know				
UniverseTex	Sample : 12 mont		practitioner for or have	used a movement and exercise	techniques in the past
SkipInstruct	<2,R,D>	oto MOV_MATC] > if more than 3 modalities less than 4 chosen [goto TP			
Question ID:	ALT.494 00.000	Instrument Variable Name:	MOV_MATC	QuestionnaireFileName:	Adult CAM
	_			-	
QuestionText:	"About how m	nuch did you pay for these m	naterials in the past 12 m	nonths?	
QuestionText:			naterials in the past 12 m	nonths?	
QuestionText: 000-200	*Enter '200' for	nuch did you pay for these m	naterials in the past 12 m	nonths?	
-		nuch did you pay for these m	naterials in the past 12 m	nonths?	
000-200	*Enter '200' for \$0-200	nuch did you pay for these m	naterials in the past 12 m	nonths?	
997	*Enter '200' for \$0-200 Refused Don't know	nuch did you pay for these m or \$200 or more."	-	nonths? movement and exercise techniq	ues in the past 12

2012 NHIS Questionnaire - Adult CAM Adult Alternative Health/Complementary And Alternative Medicine Document Version Date: 30-May-13 ALT.504_00.000 Instrument Variable Name: **Question ID:** ALT TOP3 QuestionnaireFileName: Adult CAM **QuestionText:** DURING THE PAST 12 MONTHS, which THREE of these therapies were the most important for your health? *Read list below. 01 Chiropractic or Osteopathic Manipulation 02 Massage 03 Acupuncture 04 Energy Healing Therapy 05 Naturopathy 06 Hypnosis 07 Biofeedback Craniosacral therapy 08 09 Traditional Healers 10 [fill1: Herb 1 from CHB TP21] [fill2: Herb 2 from CHB_TP22] 11 12 Homeopathy 13 [fill3: Mantra meditation/ Mindfulness meditation/ Spiritual meditation/Guided imagery/ Progressive relaxation from CMB 14 [fill4: Yoga/Tai Chi/Qi Gong from CYG MOST] 15 Special diets 16 Movement or exercise techniques 97 Refused 99 Don't know UniverseText: Sample adults 18+ who have used/seen a practitioner for any of a number of therapies in the past 12 months **SkipInstructions:** <1-16> If less than three selected [goto ERR ALT TOP3] <1-16> [goto TP1_REA1]

<R,D> [goto end]

Question ID:	ALT.510	00.000	Instrument Variable	Name:	TP1_REA1	Que	estionnaireFileName:	Adult CAM
QuestionText:	Did y	ou {fill1:	see a practitioner fo	r/use} {fi	ll2: modality} for	any of these	reasons?	
	For g	eneral we	ellness or general dis	ease preve	ention?			
1	Yes							
2	No							
7	Refu	sed						
9	Don	t know						
UniverseTex	xt:	Sample	adults 18+ who have	e used firs	t of top three mod	alities		
SkipInstruc	tions:	<1,2,R,1	D> [goto TP1_REA2	2]				

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Question ID:	ALT.511_00.	000 Instrument Variable Name:	TP1_REA2	QuestionnaireFileName:	Adult CAM		
QuestionText:	*Read if n	ecessary.					
	Did you {	fill1: see a practitioner for/use} {	[fill2: modality} for a	ny of these reasons?			
	To improv	e your energy?					
1	-	e your energy.					
1 2	Yes No						
2 7	Refused						
9	Don't kno	W					
SkipInstruct	uons: ~1,.	2,R,D> [goto TP1_REA3]					
Question ID:	ALT.512_00.	000 Instrument Variable Name:	TP1_REA3	QuestionnaireFileName:	Adult CAM		
QuestionText:	*Read if n	ecessary.					
	Did you {	fill1: see a practitioner for/use} {	fill2: modality} for a	ny of these reasons?			
	To improv	e your immune function?					
1	Yes						
2	No						
7	Refused						
9	Don't kno	W					
UniverseTex	xt: San	nple adults 18+ who have used fi	rst of top three moda	lities			
SkipInstruct	tions: <1.2	2,R,D>[goto TP1 REA4]					

SkipInstructions: <1,2,R,D> [goto TP1_REA4]

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Question ID:	ALT.513_00.000	Instrument Variable Name:	TP1_REA4	QuestionnaireFileName:	Adult CAM		
QuestionText:	*Read if neces	ary.					
	Did you {fill1:	see a practitioner for/use} {	fill2: modality} for a	ny of these reasons?			
	To improve yo	ar athletic or sports performation	ance?				
1	Yes						
2	No						
7	Refused						
9	Don't know						
Question ID:	ALT.514_00.000	Instrument Variable Name:	TP1_REA5	QuestionnaireFileName:	Adult CAM		
QuestionText:	*Read if neces	sary.					
	Did you {fill1:	see a practitioner for/use} {	fill2: modality} for a	ny of these reasons?			
	To improve yo	ar memory or concentration	?				
1	Yes						
2	No						
7	Refused						
9	Don't know						
UniverseTex	t: Sample	adults 18+ who have used fin	rst of top three modal	ities			
SkipInstructi	ions: <1,2,R,I	⊳ [goto TP1_MOT1]					

SkipInstructions: <1,2,R,D> [goto TP1_MOT1]

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Question ID:	ALT.515_00.000	Instrument Variable Name:	TP1_MOT1	QuestionnaireFileName:	Adult CAM
QuestionText:	Did {fill1: see	ing a practitioner for/using}	{fill2: modality} motiva	ate you to	
	Eat healthier?				
1	Yes				
2	No				
7	Refused				
9	Don't know				
UniverseText	: Sample	adults 18+ who have used fi	irst of top three modaliti	es	
SkipInstructio	ons: <1,2,R,	D> [goto TP1_MOT2]			
Question ID:	ALT.516_00.000	Instrument Variable Name:	TP1_MOT2	QuestionnaireFileName:	Adult CAM
-	ALT.516_00.000 *Read if neces		TP1_MOT2	QuestionnaireFileName:	Adult CAM
-	- *Read if neces		_		Adult CAM
-	- *Read if neces	ssary. ing a practitioner for/using}	_		Adult CAM
-	- *Read if neces Did {fill1: see	ssary. ing a practitioner for/using}	_		Adult CAM
QuestionText:	- *Read if neces Did {fill1: see Eat more orga	ssary. ing a practitioner for/using}	_		Adult CAM
QuestionText:	- *Read if neces Did {fill1: see Eat more orga Yes	ssary. ing a practitioner for/using}	_		Adult CAM
QuestionText: 1 2	- *Read if neces Did {fill1: see Eat more orga Yes No	ssary. ing a practitioner for/using}	_		Adult CAM
QuestionText: 1 2 7	*Read if neces Did {fill1: see Eat more orga Yes No Refused Don't know	ssary. ing a practitioner for/using}	- {fill2: modality} motiva	ate you to	Adult CAM

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Question ID:	ALT.517_00.00) Instrument Variable Name:	TP1_MOT3	QuestionnaireFileName:	Adult CAM
QuestionText:	*Read if nece	essary.			
	Did {fill1: se	eing a practitioner for/using}	{fill2: modality} mot	ivate you to	
	Cut back or s	top drinking alcohol?			
1	Yes				
2	No				
7	Refused				
9	Don't know				
UniverseTex	t: Sampl month		est of top three modal	ities and who have consumed alco	bhol in the past 12
SkipInstruct		,D> if SMKNOW=1,2 [goto T SMKNOW ne (1,2) [goto TP			
Question ID:	ALT.518_00.000) Instrument Variable Name:	TP1_MOT4	QuestionnaireFileName:	Adult CAM
QuestionText:	*Read if nece	essary.			

Did {fill1: seeing a practitioner for/using} {fill2: modality} motivate you to

Cut back or stop smoking cigarettes?

1 Yes 2 No

7 Refused

9 Don't know

UniverseText: Sample adults 18+ who have used first of top three modalities and who currently smoke every day or some days

SkipInstructions: <1,2,R,D> [goto TP1_MOT5]

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Question ID:	ALT.519_00.000	Instrument Variable Name	e: TP1_MOT5	QuestionnaireFileName:	Adult CAM
QuestionText:	Did {fill1: see	ing a practitioner for/using	g} {fill2: modality} moti	vate you to	
	Exercise more	regularly?			
1	Yes				
2	No				
7	Refused				
9	Don't know				
UniverseText:	: Sample	adults 18+ who have used	l first of top three modali	ties	
SkipInstructio	ons: <1,2,R,	D> [goto TP1 OUT1]			
-					
Question ID:	ALT.520_00.000	Instrument Variable Name	e: TP1_OUT1	QuestionnaireFileName:	Adult CAM
Question ID:		Instrument Variable Name	e: TP1_OUT1	QuestionnaireFileName:	Adult CAM
Question ID:	ALT.520_00.000 *Read if neces	Instrument Variable Name	-	QuestionnaireFileName: to any of these outcomes?	Adult CAM
Question ID:	ALT.520_00.000 *Read if neces Did {fill1: see	Instrument Variable Name	g} {fill2: modality} lead		Adult CAM
Question ID:	ALT.520_00.000 *Read if neces Did {fill1: see	Instrument Variable Name ssary. ing a practitioner for/using	g} {fill2: modality} lead		Adult CAM
Question ID:	ALT.520_00.000 *Read if neces Did {fill1: see Give you a ser	Instrument Variable Name ssary. ing a practitioner for/using	g} {fill2: modality} lead		Adult CAM
Question ID: A QuestionText:	ALT.520_00.000 *Read if neces Did {fill1: see Give you a ser Yes	Instrument Variable Name ssary. ing a practitioner for/using	g} {fill2: modality} lead		Adult CAM
Question ID: 4 QuestionText: 1 2	ALT.520_00.000 *Read if neces Did {fill1: see Give you a ser Yes No	Instrument Variable Name ssary. ing a practitioner for/using	g} {fill2: modality} lead		Adult CAM
Question ID: A QuestionText: 1 2 7	ALT.520_00.000 *Read if neces Did {fill1: see Give you a ser Yes No Refused Don't know	Instrument Variable Name ssary. ing a practitioner for/using	g} {fill2: modality} lead	to any of these outcomes?	Adult CAM

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		Document V	Version Date: 30-Ma	ay-13	
Question ID:	ALT.521_00.000) Instrument Variable Name:	TP1_OUT2	QuestionnaireFileName:	Adult CAM
QuestionText:	*Read if nece	essary.			
	Did {fill1: se	eing a practitioner for/using} {	fill2: modality} lead	d to any of these outcomes?	
	Help to reduc	e your stress level or to relax?			
1	Yes				
2	No				
7	Refused				
9	Don't know				
UniverseTex	t: Sampl	e adults 18+ who have used fir	st of top three modal	ities	
SkipInstruct	ions: <1 2 P	,D> [goto TP1 OUT3]			
Skipinstruct	10115. \1,2,1	,D> [goto 111_0015]			
Question ID:	ALT.522_00.000) Instrument Variable Name:	TP1_OUT3	QuestionnaireFileName:	Adult CAM
QuestionText:	*Read if nece	essary.			
	Did {fill1: se	eing a practitioner for/using} {	fill2: modality} lead	d to any of these outcomes?	
	Help you to s	leep better?			
1	Yes				
2	No				
7	Refused				
9	Don't know				
UniverseTex	t: Sampl	e adults 18+ who have used fir	st of top three modal	ities	
SkipInstruct	ions• <1 2 R	.D> [goto TP1_OUT4]			

SkipInstructions: <1,2,R,D> [goto TP1_OUT4]

			0			
		2012 NHIS Qu	estionnaire - A	Adult CAM		
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		Document	Version Date: 30-M	ay-13		
Question ID:	ALT.523_00.000	Instrument Variable Name:	TP1_OUT4	QuestionnaireFileName:	Adult CAM	
QuestionText:	*Read if nece	ssary.				
	Did {fill1: see	eing a practitioner for/using} {	fill2: modality} lea	d to any of these outcomes?		
	Make you fee	l better emotionally?				
1	Yes					
2	No					
7	Refused					
9	Don't know					
UniverseTex	xt: Sample	adults 18+ who have used fir	st of top three moda	lities		
	(10 D	D. L. H. TD1 OUT51				
SkipInstruct	tions: <1,2,K	D>[goto TP1_OUT5]				
Question ID:	ALT.524_00.000	Instrument Variable Name:	TP1_OUT5	QuestionnaireFileName:	Adult CAM	
QuestionText:	*Read if nece	ssary.				
	Did {fill1: see	eing a practitioner for/using} {	fill2: modality} lea	d to any of these outcomes?		
	Make it easier	to cope with health problems	?			
1	Yes					
2	No					
7	Refused					
9	Don't know					
UniverseTex	xt: Sample	e adults 18+ who have used fir	st of top three moda	lities		
SkipInstruct	tions: <1,2,R	D> [goto TP1_OUT6]				

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Question ID:	ALT.525_00.000 Instrument Variable Name: TP1_OUT6 QuestionnaireFileName: Adult CAM
QuestionText:	*Read if necessary.
	Did {fill1: seeing a practitioner for/using} {fill2: modality} lead to any of these outcomes?
	Improve your overall health and make you feel better?
1	Yes
2	No
7	Refused
9	Don't know
UniverseTex	Ext: Sample adults 18+ who have used first of top three modalities
Question ID:	ALT.526_00.000 Instrument Variable Name: TP1_OUT7 QuestionnaireFileName: Adult CAM
QuestionText:	*Read if necessary.
	Did {fill1: seeing a practitioner for/using} {fill2: modality} lead to any of these outcomes?
	Improve your relationships with others?
1	Yes
2	No
7	Refused
9	Don't know
UniverseTex	Sample adults 18+ who have used first of top three modalities
SkipInstruc	ctions: <1,2,R,D> if DOINGLW2=1,2,4 or WRKLYR2=1 or SCHOOLYR=1 [goto TP1_OUT8]; else if TP1_CNT >1 [goto TP1_MOST]; else if TP1_CNT=1 [goto TP1_HELP]; else TP1_CNT=0 [goto TP1_TRET]

2012 NHIS Questionnaire - Adult CAM Adult Alternative Health/Complementary And Alternative Medicine Document Version Date: 30-May-13 **Question ID:** ALT.527 00.000 Instrument Variable Name: TP1 OUT8 QuestionnaireFileName: Adult CAM **QuestionText:** *Read if necessary. Did {fill1: seeing a practitioner for/using} {fill2: modality} lead to any of these outcomes? Improve your attendance at [fill3: a job/school/a job or school]? 1 Yes 2 No 7 Refused 9 Don't know Sample adults 18+ who have used first of top three modalities and who worked or attended school in the past year UniverseText:

SkipInstructions: <1,2,R,D> if TP1_CNT>1 [goto TP1_MOST]; else if TP1_CNT=1 [goto TP1_HELP]; else [goto TP1_TRET]

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Question ID:	ALT.528_00.000 Instrument Variable Name	: TP1_MOST	QuestionnaireFileName:	Adult CAM
QuestionText:	Of these reasons, which ONE was the mo	ost important for using	[fill1: modality]?	
	*Read list below.			
01	Your general wellness or general disease	e prevention		
02	To improve your energy			
03	To improve your immune function			
04	To improve your athletic or sports perfor	rmance		
05	To improve your memory or concentrati	on		
06	To eat healthier			
07	To eat more organic foods			
08	To cut back or stop drinking alcohol			
09	To cut back or stop smoking cigarettes			
10	To exercise more regularly			
11	To give you a sense of control over your	health		
12	To help to reduce your stress level or to	relax		
13	To help you to sleep better			
14	To make you feel better emotionally			
15	To make it easier to cope with health pro	oblems		
16	To improve your overall health and mak	e you feel better		
17	To improve your relationships with othe			
18	To improve your attendance at a job or s	school		
97	Refused			
99	Don't know			
UniverseTex	xt: Sample adults 18+ who have used practitioner/using modality chosen		ities and two or more reasons for	seeing a
SkipInstruct	tions: <1-18> [goto TP1_HELP] <r,d> [goto TP1_TRET]</r,d>			

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Question ID:	ALT.529_00.000 Instrument Variable Name: TP1_HELP QuestionnaireFileName: Adult CAM
QuestionText:	How much do you think [fill1: modality] helped {fill2: reason given in TP1_MOST question}? Would you say
	*Read categories below.
1	A great deal
2	Some
3	Only a little
4	Not at all
7	Refused
9	Don't know
UniverseTex	Sample adults 18+ who have used first of top three modalities and had a most important reason for using selected modality/seeing a practitioner for selected modality
SkipInstruct	ons: <1-4,R,D> [goto TP1_TRET]

Question ID:	T.530_00.000 Instrument Variable Name: TP1_TRET QuestionnaireFileName: Adult CAM
QuestionText:	DURING THE PAST 12 MONTHS, did you {fill1: see a practitioner for/use} {fill2: modality} for one or more specific health problems, symptoms, or conditions?
1	Yes
2	No
7	Refused
9	Don't know
UniverseTex	Sample adults 18+ who have used first of top three modalities
SkipInstructi	s: <1> [goto TP1_COND] <2,R,D> ALT_TP31 in (6,7,10-16) [goto TP1_RS5]; else ALT_TP31 ne (6,7,10-16) [goto TP1_RS6]

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Question ID:	ALT.531_00.000 Instrument Variable Name:	TP1_COND	QuestionnaireFileName:	Adult CAM
QuestionText:	For what health problems, symptoms, or con	ditions did you {fi	ll1: see a practitioner for/use} {fill	2: modality}?
	*Enter all that apply, separate with commas.			
01	Abdominal pain			
02	Acid reflux or heartburn			
03	Feeling anxious, nervous or worried			
04	Asthma			
05	Arthritis			
06	Attention Deficit Disorder/Hyperactivity			
07	Benign tumors, cysts			
08	Bipolar Disorder			
09	Birth defect			
10	Cancer			
11	High Cholesterol			
12	Chronic Bronchitis			
13	Circulation problems (other than in the legs)		
14	Coronary heart disease			
15	Dental pain			
16	Depression			
17	Diabetes			
18	Digestive allergy			
19	Excessive sleepiness during the day			
20	Excessive use of alcohol or tobacco			
21	Fatigue or lack of energy more than 3 days			
22	Fever more than 1 day			
23	Fibromyalgia			
24	Fracture, bone/joint injury			
25 26	Gout			
26 27	Gynecologic problem Hay fever			
27	Head or chest cold			
20 29	Hearing problem			
30	Heart condition or disease, other than coron	any heart disease		
31	Hernia	ary near uisease		
32	Hypertension			
33	Infectious diseases or problems of the immu	ine system		
34	Influenza or pneumonia	and system		
35	Insomnia or trouble sleeping			
36	Jaw pain			
37	Joint pain or stiffness/Other joint condition			
38	Knee problems (not arthritis, not joint injury	v)		
39	Liver problem			
40	Lung/breathing problem			
41	Lupus			
42	Memory loss or loss of other cognitive func	tion		
43	Menopause			
44	Menstrual problems			
45	Intellectual disability, also known as mental	l retardation		

Adult Alternative Health/Complementary And Alternative Medicine

- 46 Missing limbs (fingers, toes or digits), amputee47 Nausea and/or vomiting
- 48 Neurological problems
- 49 Osteoporosis, tendinitis
- 50 Allergies other than hay fever, respiratory, food, digestive, or skin allergies
- 51 Chronic pain
- 52 Other developmental problem
- 53 Injury other than fracture, bone/joint injury
- 54 Mental health disorders
- 55 Muscle or bone pain
- 56 Nerve damage, including carpal tunnel syndrome
- 57 Problems with being overweight
- 58 Phobia or fears
- 59 Polio (myelitis), paralysis, para/quadriplegia
- 60 Poor circulation in your legs
- 61 Prostate trouble or impotence
- 62 Recurring headache, other than migraine
- 63 Respiratory allergy
- 64 Rheumatoid arthritis
- 65 Senility
- 66 Sinusitis
- 67 Eczema or any kind of skin allergy
- 68 Skin problems, other than eczema or skin allergies
- 69 Sore throat other than strep or tonsillitis
- 70 Sprain or strain
- 71 Frequent stress
- 72 Strep throat or tonsillitis
- 73 Substance abuse, other than alcohol or tobacco
- 74 Filled problem from AFLHCA_S1
- 75 Filled problem from AFLHCA S2
- 76 Ulcer
- 77 Urinary problems
- 78 Varicose veins, hemorrhoids
- 79 Vision problem
- 80 Weak or failing kidneys
- 81 COPD
- 82 Back pain or problem
- 83 Neck pain or problem
- 84 Severe headache or migraine
- 85 Stomach or intestinal illness
- 86 Other specify
- 97 Refused
- 99 Don't know

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UniverseText: Sample adults 18+ who have used first of top three modalities and saw a practitioner or used moda specific health problem, symptom or condition		
SkipInstructions:	<1-86> If TP1_CNT>1 [goto TP1_CMST], else if TP1_CNT=1 [goto TP1_CHLP]; <86> [goto TP1_SPEC]; <r,d> if self-care modality (ALT_TP31 in (6,7,10-16)) [goto TP1_RS5]; else [goto TP1_RS6]</r,d>	
Question ID: ALT.	531_00.010 Instrument Variable Name: TP1_SPEC QuestionnaireFileName: Adult CAM	
	Enter condition for which [fill1: modality] was used. If respondent gives more than one condition, probe for condition hich is most important.	
97 R	efused	
99 E	Don't Know	
Verbatim V	erbatim response	
UniverseText:	Sample adults 18+ who have used first of top three modalities and used modality to treat other health problem or condition	
SkipInstructions:	<pre><allow 75,="" r,d=""> If TP1_CNT>1 [goto TP1_CMST], elseif TP1_CNT =1 [goto TP1_CHLP]; <r,d> If TP1_CNT=1 and if self-care modality (ALT_TP31 in (6,7,10-16)) [goto TP1_RS5]; else [goto TP1_RS6]</r,d></allow></pre>	

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Question ID:	ALT.532_00.000 Instrum	nent Variable Name:	TP1_CMST	QuestionnaireFileName:	Adult CAM
QuestionText:	For which ONE of the	se did you {fill1: see a	a practitioner for/us	e} {fill2: modality} the most?	
	*If respondent cannot	choose one condition,	probe for condition	n most important for using therapy	7.
01	Abdominal pain				
02	Acid reflux or hearth	ırn			
03	Feeling anxious, nerv	ous or worried			
04	Asthma				
05	Arthritis				
06	Attention Deficit Disc	order/Hyperactivity			
07	Benign tumors, cysts				
08	Bipolar Disorder				
09	Birth defect				
10	Cancer				
11	High Cholesterol				
12	Chronic Bronchitis				
13	Circulation problems	(other than in the legs)		
14	Coronary heart diseas				
15	Dental pain				
16	Depression				
17	Diabetes				
18	Digestive allergy				
19	Excessive sleepiness	during the day			
20	Excessive use of alcol				
21	Fatigue or lack of ene				
22	Fever more than 1 day				
23	Fibromyalgia				
24	Fracture, bone/joint ir	niurv			
25	Gout	5.5			
26	Gynecologic problem				
27	Hay fever				
28	Head or chest cold				
29	Hearing problem				
30	Heart condition or dis	ease, other than coron	ary heart disease		
31	Hernia		5		
32	Hypertension				
33	Infectious diseases or	problems of the immu	une system		
34	Influenza or pneumon		-		
35	Insomnia or trouble sl				
36	Jaw pain	1 8			
37	Joint pain or stiffness	Other joint condition			
38	Knee problems (not a	•			
39	Liver problem				
40	Lung/breathing proble	em			
41	Lupus				
42	Memory loss or loss o	of other cognitive func	tion		
43	Menopause	5			
44	Menstrual problems				
45	Intellectual disability,				

Adult Alternative Health/Complementary And Alternative Medicine

- 46 Missing limbs (fingers, toes or digits), amputee 47 Nausea and/or vomiting 48 Neurological problems 49 Osteoporosis, tendinitis
- 50
- Allergies other than hay fever, respiratory, food, digestive, or skin allergies
- 51 Chronic pain
- 52 Other developmental problem
- 53 Injury other than fracture, bone/joint injury
- 54 Mental health disorders
- 55 Muscle or bone pain
- 56 Nerve damage, including carpal tunnel syndrome
- 57 Problems with being overweight
- 58 Phobia or fears
- 59 Polio (myelitis), paralysis, para/quadriplegia
- 60 Poor circulation in your legs
- 61 Prostate trouble or impotence
- 62 Recurring headache, other than migraine
- 63 Respiratory allergy
- 64 Rheumatoid arthritis
- 65 Senility
- Sinusitis 66
- 67 Eczema or any kind of skin allergy
- 68 Skin problems, other than eczema or skin allergies
- 69 Sore throat other than strep or tonsillitis
- 70 Sprain or strain
- 71 Frequent stress
- 72 Strep throat or tonsillitis
- 73 Substance abuse, other than alcohol or tobacco
- 74 Filled problem from AFLHCA S1
- 75 Filled problem from AFLHCA S2
- 76 Ulcer
- 77 Urinary problems
- 78 Varicose veins, hemorrhoids
- 79 Vision problem
- Weak or failing kidneys 80
- COPD 81
- 82 Back pain or problem
- 83 Neck pain or problem
- 84 Severe headache or migraine
- 85 Stomach or intestinal illness
- 86 Other specify
- 97 Refused
- 99 Don't know

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Document Version Date: 30-May-13

UniverseText:	Sample adults 18+ who have used first of top three modalities and used modality to treat specific conditions and more than one condition selected
SkipInstructions:	<1-86> [goto TP1_CHLP] <p d=""> if self care modelity (ALT_TP31=6.7.10.16) [goto TP1_PS5];</p>

<R,D> if self-care modality (ALT_TP31=6,7,10-16) [goto TP1_RS5]; else [goto TP1_RS6]

Question ID:	ALT.533_00.000 Instrument Variable Name:	TP1_CHLP	QuestionnaireFileName:	Adult CAM
QuestionText:	How much do you think [fill1: modality] he	lped your [fill2: con	dition from TP1_CMST]? Would	you say
	*Read categories below.			
1	A great deal			
2	Some			
3	Only a little			
4	Not at all			
7	Refused			
9	Don't know			
UniverseTex	t: Sample adults 18+ who have used fir	st of top three modal	ities and used modality to treat spo	ecific condition(s)
SkipInstruct	ions: <1-4,R,D> [goto TP1_MTR1]			

Question ID:	ALT.534_00.000 Instrument Variable Name:	TP1_MTR1	QuestionnaireFileName:	Adult CAM
QuestionText:	Did you receive any of the following medic	al treatments for [fill	1: condition from TP1_CMST]?	
	Prescription medications?			
1	Yes			
2	No			
7	Refused			
9	Don't know			
UniverseTex	t: Sample adults 18+ who have used fir	st of top three modal	ities and used modality to treat spe	ecific condition(s)
SkipInstructi	ions: <1,2,R,D> [goto TP1_MTR2]			

2012 NHIS Questionnaire - Adult CAM Adult Alternative Health/Complementary And Alternative Medicine Document Version Date: 30-May-13						
Question ID:	ALT.535_00.	000 Ins	trument Variable Name:	TP1_MTR2	QuestionnaireFileName:	Adult CAM
QuestionText:	*Read if r	ecessary	<i>.</i>			
	Did you re	eceive ar	ny of the following medic	al treatments for [f	ill2: condition from TP1_CMST}?	
	Over-the-	counter 1	nedications?			
1	Yes					
2	No					
7	Refused					
9	Don't kno	W				
UniverseTex	t: Sar	nple adu	lts 18+ who have used fire	st of top three mod	alities and used modality to treat sp	pecific condition(s)
SkipInstructi			goto TP1_MTR3]			
Question ID:	ALT.536_00.	000 Ins	trument Variable Name:	TP1_MTR3	QuestionnaireFileName:	Adult CAM
QuestionText:	*Read if r	ecessary	<i>.</i>			
	Did you re	eceive ar	ny of the following medica	al treatments for [f	ill2: condition from TP1_CMST}?	
	Surgery?					
1	Yes					
2	No					
7	Refused					
9	Don't kno	W				
UniverseTex	t: Sar	nple adu	lts 18+ who have used fir	st of top three mod	alities and used modality to treat sp	pecific condition(s)

<1,2,R,D> [goto TP1_MTR4] SkipInstructions:

Adult Alternative Health/Complementary And Alternative Medicine

Question ID:	ALT.537_	00.000 Instrument Variable	e Name: TP1_MTR	4 QuestionnaireFi	leName: Adult CAM
QuestionText:	*Read	if necessary.			
	Did yo	u receive any of the followi	ng medical treatments	for [fill2: condition from TP1_	_CMST}?
	Physica	al therapy?			
1	Yes				
2	No				
7	Refuse	ed			
9	Don't				
UniverseTex	xt:	Sample adults 18+ who hav	e used first of top three	modalities and used modality	to treat specific condition(s)
SkipInstruct	tions:	<1,2,R,D> [goto TP1_MTR	.5]		
Question ID: QuestionText:	_	00.000 Instrument Variable	e Name: TP1_MTR	5 QuestionnaireFi	leName: Adult CAM
	Did yo	u receive any of the followi	ng medical treatments	for [fill2: condition from TP1_	CMST}?
	Mental	health counseling?			
1	Yes				
2	No				
7	Refuse	ed			
9	Don't	know			
UniverseTex	xt:	Sample adults 18+ who hav	e used first of top three	modalities and used modality	to treat specific condition(s)
SkipInstruct		<1,2,R,D> if TP1_MTR1=1 TP1_RS1]; else if self-care modality else [goto TP1_RS6]		P1_MTR3=1 or TP1_MTR4= 6) [goto TP1_RS5];	1 or TP1_MTR5=1 [goto

Adult Alternative Health/Complementary And Alternative Medicine

Question ID:	ALT 520	00.000 Inst	rument Variable Name:	TD1 DC1	QuestionnaireFileName:	Adult CAM
Question ID.	AL1.559_	_00.000 mst	rument variable Name.	TP1_RS1	Questionnan er nervanie.	Adult CAM
QuestionText:	DURI	NG THE PAS	ST 12 MONTHS, did yo	ou {fill1: see a prac	titioner for/use} {fill2: modality} fo	r any of these reasons?
	These	medical treat	ments were too expensi	ve?		
1	Yes					
2	No					
7	Refus	ed				
9	Don't	know				
UniverseTex		Sample adult	ts 18+ who have used fi	rst of top three mod	lalities and used some type of treatm	ent for specific
SkipInstruct	tions:	<1,2,R,D>[§	goto TP1_RS2]			
Question ID:	ALT.540	00.000 Inst	rument Variable Name:	TP1_RS2	QuestionnaireFileName:	Adult CAM
QuestionText:	*Read	if necessary.				
	DURI	NG THE PAS	ST 12 MONTHS, did yo	ou {fill1: see a prac	titioner for/use} {fill2: modality} fo	r any of these reasons?
	[fill3:	modality] co	mbined with these medi	cal treatments wou	ld help you?	
1	Yes					
2	No					
7	Refus	ed				
9	Don't	know				
UniverseTex		Sample adult	ts 18+ who have used fi	rst of top three mod	alities and used some type of treatm	ent for specific
SkipInstruct	tions:	<1,2,R,D>[§	goto TP1 RS3]			

			2012 NHIS Q	uestionnaire -	Adult CAM	
		Adult	t Alternative Health/C	omplementar	y And Alternative Medicine	
				-	-May-13	
Question ID:	ALT.541	_00.000	Instrument Variable Name:	TP1_RS3	QuestionnaireFileName:	Adult CAM
QuestionText:	*Read	d if neces	ssary.			
	DUR	ING THE	E PAST 12 MONTHS, did yo	ou {fill1: see a pra	ctitioner for/use} {fill2: modality} for	or any of these reasons?
	These	medical	treatments do not work for t	he health problem	you want to treat or prevent?	
1	Yes					
2	No					
7	Refu	sed				
9	Don'	t know				
UniverseTex	xt:	Sample conditio		rst of top three mo	dalities and used some type of treatm	nent for specific
SkipInstruc	tions:	else	D> if TP1_MTR1=1 or TP1_ if self-care modality (categor [goto TP1_RS6]		P1_RS4]; on ALT_TP31 variable, [goto TP1_F	RS5];

Question ID:	ALT.542_00.0	0 Instrument Variable Name:	TP1_RS4	QuestionnaireFileName:	Adult CAM
QuestionText:	*Read if ne	essary.			
	DURING T	HE PAST 12 MONTHS, did you	{fill1: see a practitioner	for/use} {fill2: modality} for	r any of these reasons?
	[fill3: Presc effects?	iption medications/Over the cou	nter medications/Prescrip	tion or over-the-counter med	lications] cause side
1	Yes				
2	No				
7	Refused				
9	Don't knov				
UniverseTex		le adults 18+ who have used firs ation to treat specific condition(1	nd used prescription or over	-the-counter
SkipInstruct		R,D> if self-care modality (categ e goto TP1_RS6]	ories 6,7 and 10-16 on A	LT_TP31 variable, [goto TP	1_RS5];

		2012 NHIS Qu	estionnaire -	Adult CAM	
	Adul	t Alternative Health/Co	omplementary	And Alternative Medicine	
		Document	Version Date: 30-N	1ay-13	
Question ID:	ALT.543_00.000	Instrument Variable Name:	TP1_RS5	QuestionnaireFileName:	Adult CAM
QuestionText:	DURING THE	E PAST 12 MONTHS, did yo	u {fill1: use modali	ty} for any of these reasons?	
	You can do it	on your own?			
1	Yes				
2	No				
7	Refused				
9	Don't know				
SkipInstruc	tions: <1,2,R,1	D> [goto TP1_RS6]			
Question ID:	ALT.544_00.000	Instrument Variable Name:	TP1_RS6	QuestionnaireFileName:	Adult CAM
QuestionText:		E PAST 12 MONTHS, did you	u {fill1: see a pract	itioner for/use} {fill2: modality} for	r any of these reasons?
	It is natural?				
1	Yes				
2	No				
7	Refused				
9	Don't know				
UniverseTex	xt: Sample	adults 18+ who have used first	st of top three mod	alities	
SkipInstruc	tions: <1,2,R,1	D> [goto TP1_RS7]			

	2012 NHIS Questionnaire - Adult CAM	A - N - 1
	Adult Alternative Health/Complementary And Alternative N Document Version Date: 30-May-13	ledicine
Question ID:	ALT.545_00.000 Instrument Variable Name: TP1_RS7 Questionnairel	FileName: Adult CAM
QuestionText:	xt: *Read if necessary.	
	DURING THE PAST 12 MONTHS, did you {fill1: see a practitioner for/use} fill2: m	odality} for any of these reasons?
	It focuses on the whole person, mind, body, and spirit?	
1	Yes	
2	No	
7	Refused	
9	Don't know	
UniverseTe	Text: Sample adults 18+ who have used first of top three modalities	
Question ID:	D: ALT.546 00.000 Instrument Variable Name: TP1 RS8 Questionnairel	FileName: Adult CAM
QuestionText:		Aduit CAW
	DURING THE PAST 12 MONTHS, did you {fill1: see a practitioner for/use} {fill2: r	nodality} for any of these reasons?
	It treats the cause and not just the symptoms?	
1	Yes	
2	No	
7	Refused	
9	Don't know	
UniverseTex	Text: Sample adults 18+ who have used first of top three modalities	
SkipInstruc	ructions: <1,2,R,D> [goto TP1_RS9]	

	2012 NHIS Questionnaire - Adult CAM					
Adult Alternative Health/Complementary And Alternative Medicine Document Version Date: 30-May-13						
Question ID:	ALT.547_00.000 Instrument Variable Name: TP1_RS9 QuestionnaireFileName: Adult CAM					
QuestionText:	*Read if necessary.					
	DURING THE PAST 12 MONTHS, did you {fill1: see a practitioner for/use} {fill2: modality} for any of these reason	ıs?				
	It was part of your upbringing?					
1	Yes					
2	No					
7	Refused					
9	Don't know					
SkipInstruc	ctions: <1,2,R,D> [goto TP1_REC1]					
uestion ID:	ALT.548_00.000 Instrument Variable Name: TP1_REC1 QuestionnaireFileName: Adult CAM					
uestionText:	Did you {fill1: see a practitioner for/use} {fill2: modality} because it was recommended by any of the following people	le?				
	A medical doctor?					
1	Yes					
2	No					
7	Refused					
9	Don't know					
UniverseTex	Sample adults 18+ who have used first of top three modalities					
ClimInstant	ational <1.2 B DN [asta TD1 BEC2]					

SkipInstructions: <1,2,R,D> [goto TP1_REC2]

2012 NHIS Questionnaire - Adult CAM Adult Alternative Health/Complementary And Alternative Medicine Document Version Date: 30-May-13					
Question ID:	ALT.549_00.000 Instrument Variable Nam	e: TP1_REC2	QuestionnaireFileName:	Adult CAM	
QuestionText:	*Read if necessary.				
	Did you {fill1: see a practitioner for/use	} {fill2: modality} becau	use it was recommended by any c	of the following people?	
	A family member?				
1	Yes				
2	No				
7	Refused				
9	Don't know				
Question ID:	ALT.550 00.000 Instrument Variable Nam	e: TP1_REC3	QuestionnaireFileName:	Adult CAM	
QuestionText:	*Read if necessary.		_		
	Did you {fill1: see a practitioner for/use	} {fill2: modality} becau	use it was recommended by any o	of the following people?	
	A friend?				
1	Yes				
2	No				
7	Refused				
9	Don't know				
UniverseTex	xt: Sample adults 18+ who have used	d first of top three modal	ities		
SkipInstruc	tions: <1,2,R,D> [goto TP1_REC4]				

	A dult	2012 NHIS Qu Alternative Health/Co		Adult CAM And Alternative Medicine	
	Auun		Version Date: 30-M		
Question ID:	ALT.551_00.000	Instrument Variable Name:	TP1_REC4	QuestionnaireFileName:	Adult CAM
QuestionText:	*Read if neces	sary.			
	Did you {fill1:	see a practitioner for/use} {f	ill2: modality} beca	use it was recommended by any o	f the following people?
	A co-worker?				
1	Yes				
2	No				
7	Refused				
9	Don't know				
UniverseTex	xt: Sample	adults 18+ who have used first	st of top three moda	lities	
a i i					
SkipInstruc	uons: <1,2,K,1	D> [goto TP1_IMP]			
Question ID:	ALT.552_00.000	Instrument Variable Name:	TP1_IMP	QuestionnaireFileName:	Adult CAM
QuestionText:	DURING THE being? Would		nportant was your u	se of [fill1: modality] in maintaini	ng your health and well-
	*Read categori	es below.			
1	Very importar	ıt			
2	Somewhat im				
3	Slightly impor	rtant			
4	Not at all imp	ortant			
7	Refused				
9	Don't know				
UniverseTe	xt: Sample	adults 18+ who have used first	st of top three moda	lities	
SkipInstruc		D> if PROVTYP=1-4 [goto 7 goto TP1_INF1]	ГР1_DS1];		

Adult Alternative Health/Complementary And Alternative Medicine

Question ID:					
C	ALT.553_00	0.000 Instrument Variable Na	me: TP1_DS1	QuestionnaireFileName:	Adult CAM
QuestionText:		t including the practitioner yo health care provider know ab		y] DURING THE PAST 12 MON dality]?	THS, did you let your
	*If practi	tioner for therapy is the same	person as personal health	n care provider, enter '1'.	
1	Yes				
2	No				
7	Refused				
9	Don't kn	IOW			
UniverseTex	at: Sa	mple adults 18+ who have us	ed first of top three moda	lities and has a personal health car	e provider
SkipInstruc		,R,D> [goto TP1_INF1] > [goto TP1_DS2]			
Question ID:	ALT.554_00).000 Instrument Variable Na	me: TP1_DS2	QuestionnaireFileName:	Adult CAM
	_).000 Instrument Variable Na n't you tell your personal heal	_	-	Adult CAM
	Why did		_	-	Adult CAM
	Why did	n't you tell your personal heal	_	-	Adult CAM
QuestionText:	Why didi You were	n't you tell your personal heal	_	-	Adult CAM
QuestionText: 1	Why didi You were Yes	n't you tell your personal heal e not using it at the time?	_	-	Adult CAM
QuestionText: 1 2	Why didn You were Yes No	n't you tell your personal heal e not using it at the time?	_	-	Adult CAM
2 7	Why didn You were Yes No Refused Don't kn	n't you tell your personal heal e not using it at the time?	th care provider about yo	-	

Adult Alternative Health/Complementary And Alternative Medicine

Question ID:	ALT.555_00	0.000 Instrument Variable Name:	TP1_DS3	QuestionnaireFileName:	Adult CAM				
QuestionText:	*Read if	necessary.							
	Why didn't you tell your personal health care provider about your use of {fill1: modality}?								
	They discouraged use of it in the past?								
1	Yes								
2	No								
7	Refused	Refused							
9	Don't kn	Don't know							
UniverseTex		mple adults 18+ who have used fi out using therapy	lalities and did not tell their personal	health care provider					
SkipInstruct	tions: <1	,2,R,D> [goto TP1 DS4]							
•									
Question ID:	ALT.556_00	0.000 Instrument Variable Name:	TP1_DS4	QuestionnaireFileName:	Adult CAM				
QuestionText:	*Read if	necessary.							
	Why didn't you tell your personal health care provider about your use of {fill1: modality}?								
	You were worried they would discourage it?								
1	Yes								
2	No								
7	Refused								
9	Don't kn	ow							
UniverseTex		Sample adults 18+ who have used first of top three modalities and did not tell their personal health care provider about using therapy							
SkipInstruc	tions: <1	<1,2,R,D> [goto TP1_DS5]							

Adult Alternative Health/Complementary And Alternative Medicine

Question ID:	ALT.557_00.000) Instrument Variable Name:	TP1_DS5	QuestionnaireFileName:	Adult CAM			
QuestionText:	*Read if nece	essary.						
	Why didn't ye	didn't you tell your personal health care provider about your use of {fill1: modality}?						
You were concerned about a negative reaction?								
1	Yes							
2	No							
7	Refused							
9	Don't know	Don't know						
UniverseText	t: Sample about u	alities and did not tell their persona	l health care provider					
SkipInstructi	ons: <1 2 R	,D> [goto TP1 DS6]						
Simpriseruou	1,2,10	,2 [800 11 _200]						
Question ID:	ALT.558_00.000) Instrument Variable Name:	TP1_DS6	QuestionnaireFileName:	Adult CAM			
	ALT.558_00.000 *Read if nece		TP1_DS6	QuestionnaireFileName:	Adult CAM			
	*Read if nece		-		Adult CAM			
	*Read if nece Why didn't ye	essary.	-		Adult CAM			
	*Read if nece Why didn't ye	essary. Du tell your personal health ca	-		Adult CAM			
QuestionText:	*Read if nece Why didn't yo You didn't th	essary. Du tell your personal health ca	-		Adult CAM			
QuestionText: 1	*Read if nece Why didn't yo You didn't th Yes	essary. Du tell your personal health ca	-		Adult CAM			
QuestionText: 1 2	*Read if nece Why didn't yo You didn't th Yes No	essary. Du tell your personal health ca	-		Adult CAM			
QuestionText: 1 2 7	*Read if nece Why didn't yo You didn't th Yes No Refused Don't know	essary. Ou tell your personal health ca ink they needed to know?	re provider about yo					

Adult Alternative Health/Complementary And Alternative Medicine

Question ID:	ALT.559_	00.000 I	nstrument Variable Name:	TP1_DS7	QuestionnaireFileName:	Adult CAM			
QuestionText:	*Read	if necessa	ry.						
	Why didn't you tell your personal health care provider about your use of {fill1: modality}?								
	They d	idn't ask?							
1	Yes								
2	No								
7	Refus	Refused							
9	Don't	Don't know							
UniverseTex		Sample adults 18+ who have used first of top three modalities and did not tell their personal health care provider about using therapy							
SkipInstruc	tions:	<1,2,R,D>	[goto TP1 DS8]						
Question ID:	ALT.560	00.000 I n	nstrument Variable Name:	TP1 DS8	QuestionnaireFileName:	Adult CAM			
QuestionText:		if necessa		_					
	Why didn't you tell your personal health care provider about your use of {fill1: modality}?								
	You don't think they know as much about it as you do?								
1	Yes								
2	No								
7	Refus	ed							
9	Don't know								
UniverseText:		Sample adults 18+ who have used first of top three modalities and did not tell their personal health care provider about using therapy							
SkipInstructions:		<1,2,R,D> [goto TP1_DS9]							

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Question ID:	ALT.561_	_00.000	Instrument Variable Name:	TP1_DS9	QuestionnaireFileName:	Adult CAM
QuestionText:	*Read	if neces	sary.			
	Why d	lidn't you	a tell your personal health car	e provider about	your use of {fill1: modality}?	
	They c	lidn't giv	e you enough time to tell the	m?		
1	Yes					
2	No					
7	Refus	sed				
9	Don't	know				
UniverseTex			adults 18+ who have used firsting therapy	st of top three mo	dalities and did not tell their personal	health care provider
SkipInstruct	tions:	<1,2,R,I	D> [goto TP1_INF1]			

Question ID:	ALT.580	_00.000	Instrument Variable N	ame:	TP1_INF1		QuestionnaireFileName	e: Ad	lult CAM
QuestionText:	DURI	ING THE	PAST 12 MONTHS,	did you	a get information a	about [fi	ll1: modality] from any	of the fol	llowing sources?
	The I	nternet?							
1	Yes								
2	No								
7	Refu	sed							
9	Don'	t know							
UniverseTex	xt:	Sample	adults 18+ who have u	sed firs	st of top three mod	lalities			
SkipInstruct	tions:	<1,2,R,I	D> [goto TP1_INF2]						

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Question ID:	ALT.581_00.000 Instrument Variable Name:	TP1_INF2	QuestionnaireFileName:	Adult CAM				
QuestionText:	*Read if necessary.							
	DURING THE PAST 12 MONTHS, did y	ou get information ab	out [fill1: modality] from any of t	he following sources?				
	Books, magazines, or newspapers?							
1	Yes							
2	No							
7	Refused							
9	Don't know							
UniverseTex	xt: Sample adults 18+ who have used f	irst of top three modal	ities					
Question ID:	ALT.582_00.000 Instrument Variable Name:	TP1 INF3	QuestionnaireFileName:	Adult CAM				
QuestionText:	*Read if necessary.							
	DURING THE PAST 12 MONTHS, did y	ou get information ab	out [fill1: modality] from any of t	he following sources?				
	DVDs, videos, or CDs?							
1	Yes							
2	No							
7	Refused							
9	Don't know							
UniverseTex	xt: Sample adults 18+ who have used f	irst of top three modal	ities					
SkipInstruc	tions: <1,2,R,D> [goto TP1_INF4]							

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	2012 NHIS Questionnaire - Adult CAM Adult Alternative Health/Complementary And Alternative Medicine Document Version Date: 30-May-13								
Question ID:	ALT.583	_00.000 1	instrument Variab	le Name:	TP1_INF4	-	QuestionnaireFi	leName:	Adult CAM
QuestionText:	*Read	l if necessa	ary.						
		ING THE I		HS, did you	u get information	1 about [fil	11: modality] fro	m any of th	e following sources?
1 2 7 9	Yes No Refu Don'	sed t know							
UniverseTex	xt:	Sample a	dults 18+ who ha	ve used firs	st of top three me	odalities			
SkipInstruct	tions:	<1,2,R,D	> [goto TP1_INF	5]					
Question ID:	ALT.584	_00.000 1	Instrument Variab	le Name:	TP1_INF5		QuestionnaireFi	leName:	Adult CAM
QuestionText:		l if necessa							
		ING THE I		HS, did you	u get information	1 about [fil	11: modality] fro	m any of th	e following sources?
1	Yes								
2	No								
7	Refu	sed							
9	Don'	t know							
UniverseTex	xt:	Sample a	dults 18+ who ha	ve used firs	st of top three me	odalities			
SkipInstruct	tions:	<1,2,R,D	> [goto TP1 INF	6]					

SkipInstructions: <1,2,R,D>[goto TP1_INF6]

	2012 NHIS Questionnaire - Adult CAM Adult Alternative Health/Complementary And Alternative Medicine Document Version Date: 30-May-13									
Question ID:	ALT.585_00.000 Instrument Variable Name: TP1_INF6 QuestionnaireFileName: Adult CAM									
QuestionText:	*Read if necessary.									
	DURING THE PAST 12 MONTHS, did you get information about [fill1: modality] from any of the following sources?									
	Health food stores?									
1	Yes									
2	No									
7	Refused									
9	Don't know									
UniverseTex	xt: Sample adults 18+ who have used first of top three modalities									
SkipInstruct	tions: <1,2,R,D> if ALT_TP32 ne '' [goto TP2_REA1]; else [goto next section]									

Question ID:	ALT.595	_00.000 Instrument Variable Name:	TP2_REA1	QuestionnaireFileName:	Adult CAM
QuestionText:	Did ye	ou {fill1: see a practitioner for/use} {fi	ill2: modality} for a	any of these reasons?	
	For ge	eneral wellness or general disease preve	ention?		
1	Yes				
2	No				
7	Refu	sed			
9	Don't	t know			
UniverseTex	at:	Sample adults 18+ who have used sec	ond of top three mo	odalities	
SkipInstruct	tions:	<1,2,R,D> [goto TP2_REA2]			

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Question ID:	ALT.596_00.000	Instrument Variable Name:	TP2_REA2	QuestionnaireFileName:	Adult CAM			
QuestionText:	*Read if neces	ssary.						
	Did vou {fill1	see a practitioner for/use} {f	ill2: modality} for a	ny of these reasons?				
	To improve yo	our energy?						
1	Yes							
2	No							
7	Refused							
9	Don't know							
Question ID:	ALT.597_00.000	Instrument Variable Name:	TP2_REA3	QuestionnaireFileName:	Adult CAM			
QuestionText:	*Read if neces	ssary.						
	Did you {fill1	see a practitioner for/use} {f	ill2: modality} for a	ny of these reasons?				
	To improve yo	our immune function?						
1	Yes							
2	No							
7	Refused							
9	Don't know							
UniverseTex	t: Sample	adults 18+ who have used sec	cond of top three mo	odalities				
SkipInstructi	ions: <1.2.R.	D> [goto TP2 REA4]						

SkipInstructions: <1,2,R,D> [goto TP2_REA4]

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·								
Question ID:	ALT.598_00.000 Instrument Variable Name: TP2_REA4 QuestionnaireFileName: Adult CAM	L						
QuestionText:	t: *Read if necessary.							
	Did you {fill1: see a practitioner for/use} {fill2: modality} for any of these reasons?							
	To improve your athletic or sports performance?							
1	Yes							
2	No							
7	Refused							
9	Don't know							
UniverseTex	Sext: Sample adults 18+ who have used second of top three modalities							
SkipInstruct	actions: $<1,2,R,D>$ [goto TP2_REA5]							
Question ID:	ALT.599_00.000 Instrument Variable Name: TP2_REA5 QuestionnaireFileName: Adult CAM	-						
QuestionText:	t: *Read if necessary.							
	Did you {fill1: see a practitioner for/use} {fill2: modality} for any of these reasons?							
	To improve your memory or concentration?							
1	Yes							
2	No							
7	Refused							
9	Don't know							
UniverseTex	Sext: Sample adults 18+ who have used second of top three modalities							
SkipInstruct	actions: <1,2,R,D> [goto TP2_MOT1]							

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Question ID:	ALT.600_00.000	Instrument Variable Name:	TP2_MOT1	QuestionnaireFileName:	Adult CAM
QuestionText:	Did {fill1: see	eing a practitioner for/using}	{fill2: modality} motiv	rate you to	
	Eat healthier?				
1	Yes				
2	No				
7	Refused				
9	Don't know				
UniverseText	: Sample	e adults 18+ who have used s	econd of top three moda	alities	
SkipInstructi	ons: <1,2,R,	D> [goto TP2 MOT2]			
Ducction ID.		Instrument Verichle Norme	TR2 MOT2	OperationnainsFileNemer	
	ALT.601_00.000 *Read if nece	Instrument Variable Name:	TP2_MOT2	QuestionnaireFileName:	Adult CAM
	- *Read if nece		_		Adult CAM
	- *Read if nece	ssary. sing a practitioner for/using}	_		Adult CAM
	- *Read if nece Did {fill1: see	ssary. sing a practitioner for/using}	_		Adult CAM
QuestionText:	- *Read if nece Did {fill1: see Eat more orga Yes No	ssary. sing a practitioner for/using}	_		Adult CAM
QuestionText: 1 2 7	- *Read if nece Did {fill1: see Eat more orga Yes No Refused	ssary. sing a practitioner for/using}	_		Adult CAM
QuestionText: 1 2	- *Read if nece Did {fill1: see Eat more orga Yes No	ssary. sing a practitioner for/using}	_		Adult CAM
QuestionText: 1 2 7	*Read if nece Did {fill1: see Eat more orga Yes No Refused Don't know	ssary. sing a practitioner for/using}	- {fill2: modality} motiv	rate you to	Adult CAM

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Question ID:	ALT.602_00.000	Instrument Variable Name:	TP2_MOT3	QuestionnaireFileName:	Adult CAM
QuestionText:	*Read if nece	ssary.			
	Did {fill1: see	eing a practitioner for/using} {	fill2: modality} mo	tivate you to	
	Cut back or st	op drinking alcohol?			
1	Yes				
2	No				
7	Refused				
9	Don't know				
UniverseTex	ct: Sample months		cond of top three me	odalities and who have consumed a	lcohol in the past 12
SkipInstruct		D> if SMKNOW=1,2 [goto T SMKNOW ne (1,2) [goto TP2			
Question ID:	ALT.603_00.000	Instrument Variable Name:	TP2_MOT4	QuestionnaireFileName:	Adult CAM
QuestionText:	*Read if nece	ssary.			
	Did {fill1: see	eing a practitioner for/using} {	fill2: modality} mo	tivate you to	

Cut back or stop smoking cigarettes?

1 Yes 2 No

7 Refused

9 Don't know

UniverseText: Sample adults 18+ who have used second of top three modalities and who currently smoke every day or some days

SkipInstructions: <1,2,R,D> [goto TP2_MOT5]

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Question ID:	ALT.604_00.000	Instrument Variable Name:	TP2_MOT5	QuestionnaireFileName:	Adult CAM
QuestionText:	Did {fill1: see	ing a practitioner for/using} {	fill2: modality} motiv	vate you to	
	Exercise more	regularly?			
1	Yes				
2	No				
7	Refused				
9	Don't know				
UniverseText:	Sample	adults 18+ who have used see	cond of top three mode	alities	
SkipInstructio	ons: <1.2.R.1	D> [goto TP2_OUT1]			
		Instrument Variable Name:	TP2_OUT1	QuestionnaireFileName:	Adult CAM
	ALT.605_00.000 *Read if neces		TP2_OUT1	QuestionnaireFileName:	Adult CAM
	*Read if neces		_		Adult CAM
	*Read if neces Did {fill1: see	sary.	fill2: modality} lead		Adult CAM
	*Read if neces Did {fill1: see	sary.	fill2: modality} lead		Adult CAM
QuestionText:	*Read if neces Did {fill1: see Give you a ser	sary.	fill2: modality} lead		Adult CAM
QuestionText: 1	*Read if neces Did {fill1: see Give you a ser Yes	sary.	fill2: modality} lead		Adult CAM
QuestionText: 1 2	*Read if neces Did {fill1: see Give you a ser Yes No	sary.	fill2: modality} lead		Adult CAM
QuestionText: 1 2 7	*Read if neces Did {fill1: see Give you a sen Yes No Refused Don't know	sary.	fill2: modality} lead	to any of these outcomes?	Adult CAM

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Adult Alternative Health/Complementary And Alternative Medicine									
Document Version Date: 30-May-13									
Question ID:	ALT.606_00.00) Instrument Variable Name:	TP2_OUT2	QuestionnaireFileName:	Adult CAM				
QuestionText:	*Read if nec	essary.							
	Did {fill1: se	eing a practitioner for/using} {	fill2: modality} lea	d to any of these outcomes?					
	Help to reduc	e your stress level or to relax?							
1	Yes								
2	No								
7	Refused								
9	Don't know								
UniverseTex SkipInstruct	-	e adults 18+ who have used sec ,D> [goto TP2_OUT3]							
Question ID:	ALT.607_00.00) Instrument Variable Name:	TP2_OUT3	QuestionnaireFileName:	Adult CAM				
QuestionText:	*Read if nec	essary.							
	Did {fill1: se	eing a practitioner for/using} {	fill2: modality} lea	d to any of these outcomes?					
	Help you to s	sleep better?							
1	Yes								
2	No								
7	Refused								
9	Don't know								
UniverseTex	t: Sampl	e adults 18+ who have used sec	cond of top three mo	dalities					
SkipInstruct	ions: <1,2,R	.,D> [goto TP2_OUT4]							

		2012 NHIS Qu	estionnaire - A	Adult CAM	
	Adu	lt Alternative Health/Co	omplementary A	And Alternative Medicine	
		Document	Version Date: 30-M	ay-13	
Question ID:	ALT.608_00.000) Instrument Variable Name:	TP2_OUT4	QuestionnaireFileName:	Adult CAM
QuestionText:	*Read if nece	ssary.			
	Did {fill1: se	eing a practitioner for/using} {	fill2: modality} lead	d to any of these outcomes?	
	Make you fee	l better emotionally?			
1	Yes				
2	No				
7	Refused				
9	Don't know				
UniverseTex	xt: Sample	e adults 18+ who have used see	cond of top three mo	dalities	
SkipInstruc	tions: <1.2 D	,D> [goto TP2 OUT5]			
Skipilistiue	1,2,K	,D> [g010 112_0015]			
Question ID:	ALT.609_00.000) Instrument Variable Name:	TP2_OUT5	QuestionnaireFileName:	Adult CAM
QuestionText:	*Read if nece	ssary.			
	Did {fill1: se	eing a practitioner for/using} {	fill2: modality} lead	d to any of these outcomes?	
	Make it easie	r to cope with health problems	?		
1	Yes				
2	No				
7	Refused				
9	Don't know				
UniverseTex	xt: Sample	e adults 18+ who have used see	cond of top three mo	dalities	
SkipInstruc	tions: <1,2,R	,D> [goto TP2_OUT6]			

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		2012 NHIS Qu	uestionnaire - A	Adult CAM	
	Ad	ult Alternative Health/C	omplementary A	And Alternative Medicine	
		Document	Version Date: 30-M	ay-13	
Question ID:	ALT.610_00.00)() Instrument Variable Name:	TP2_OUT6	QuestionnaireFileName:	Adult CAM
QuestionText:	*Read if neo	cessary.			
	Did {fill1: s	eeing a practitioner for/using}	{fill2: modality} lead	d to any of these outcomes?	
	Improve you	ar overall health and make you	feel better?		
1	Yes				
2	No				
7	Refused				
9	Don't know	,			
UniverseTex	t. Samn	le adults 18+ who have used se	cond of ton three mo	dalities	
Question ID:	ALT.611 00.00)() Instrument Variable Name:	TP2_OUT7	QuestionnaireFileName:	Adult CAM
QuestionText:	*Read if nec	cessary.	-		
	Did {fill1: s	eeing a practitioner for/using}	{fill2: modality} lead	d to any of these outcomes?	
	Improve you	ar relationships with others?			
1	Yes				
2	No				
7	Refused				
9	Don't know	,			
UniverseTex	t: Samp	le adults 18+ who have used se	cond of top three mo	dalities	
SkipInstruc	tions: <1,2,				

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Question ID:	ALT.612_00.000 Instrument Variable Name: TP2_OUT8	QuestionnaireFileName: Adult CAM
QuestionText:	*Read if necessary.	
	Did {fill1: seeing a practitioner for/using} {fill2: modality}	lead to any of these outcomes?
	Improve your attendance at a job or school?	
1	Yes	
2	No	
7	Refused	
9	Don't know	
UniverseTex	Ext: Sample adults 18+ who have used second of top thre year	e modalities and who worked or attended school in the past
SkipInstruct	ctions: <1,2,R,D> if TP2_CNT>1 [goto TP2_MOST]; else if TP2_CNT=1 [goto TP2_HELP]; else [goto TP2_TRET]	

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Question ID:	ALT.613_00.000 Instrument Variable Name:	TP2_MOST	QuestionnaireFileName:	Adult CAM
QuestionText:	Of these reasons, which ONE was the mos	st important for using	ng [fill1: modality]?	
	*Read list below.			
01	Your general wellness or general disease	prevention		
02	To improve your energy			
03	To improve your immune function			
04	To improve your athletic or sports perform	mance		
05	To improve your memory or concentratio	n		
06	To eat healthier			
07	To eat more organic foods			
08	To cut back or stop drinking alcohol			
09	To cut back or stop smoking cigarettes			
10	To exercise more regularly			
11	To give you a sense of control over your	health		
12	To help to reduce your stress level or to r	elax		
13	To help you to sleep better			
14	To make you feel better emotionally			
15	To make it easier to cope with health prol	blems		
16	To improve your overall health and make	you feel better		
17	To improve your relationships with other	s		
18	To improve your attendance at a job or sc	chool		
97	Refused			
99	Don't know			
UniverseTex	t: Sample adults 18+ who have used s practitioner/using modality chosen	econd of top three	modalities and two or more reasons f	for seeing a
SkipInstruct	tions: <1-18> [goto TP2_HELP] <r,d> [goto TP2_TRET]</r,d>			

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Question ID:	ALT.614_00.000 Instrument Variable Name: TP2_HELP QuestionnaireFileName: Adult CAM
QuestionText:	How much do you think [fill1: modality] helped {fill2: reason given in TP2_MOST question}? Would you say
	*Read categories below.
1	A great deal
2	Some
3	Only a little
4	Not at all
7	Refused
9	Don't know
UniverseTex	Sample adults 18+ who have used second of top three modalities and had a most important reason for using selected modality/seeing a practitioner for selected modality
SkipInstruct	ons: <1-4,R,D> [goto TP2_TRET]

Question ID:	ALT.615_00.00) Instrument Variable Name:	TP2_TRET	QuestionnaireFileName:	Adult CAM
QuestionText:		E PAST 12 MONTHS, did yo ms, symptoms, or conditions?	u {fill1: see a practit	ioner for/use} {fill2: modality} fo	r one or more specific
1	Yes				
2	No				
7	Refused				
9	Don't know				
UniverseText	: Sample	e adults 18+ who have used se	cond of top three mo	dalities	
SkipInstructi	<2,R,I	oto TP2_COND] >> ALT_TP32 in (6,7,10-16) = ALT_TP32 ne (6,7,10-16) [g			

Adult Alternative Health/Complementary And Alternative Medicine

Question ID:	ALT.616_00.000 Instrument Variable Name:	TP2_COND	QuestionnaireFileName:	Adult CAM
QuestionText:	For what health problems, symptoms, or co	nditions did you {f	ill1: see a practitioner for/use} {fill2	: modality}?
	*Enter all that apply, separate with commas	5.		
01	Abdominal pain			
02	Acid reflux or heartburn			
03	Feeling anxious, nervous or worried			
04	Asthma			
05	Arthritis			
06	Attention Deficit Disorder/Hyperactivity			
07	Benign tumors, cysts			
08	Bipolar Disorder			
09	Birth defect			
10	Cancer			
11	High Cholesterol			
12	Chronic Bronchitis			
13	Circulation problems (other than in the leg	(s)		
14	Coronary heart disease			
15	Dental pain			
16	Depression			
17	Diabetes			
18	Digestive allergy			
19	Excessive sleepiness during the day			
20	Excessive use of alcohol or tobacco			
21	Fatigue or lack of energy more than 3 days	5		
22	Fever more than 1 day			
23	Fibromyalgia			
24	Fracture, bone/joint injury			
25	Gout			
26	Gynecologic problem			
27	Hay fever			
28	Head or chest cold			
29	Hearing problem			
30	Heart condition or disease, other than coro	nary heart disease		
31	Hernia			
32	Hypertension			
33	Infectious diseases or problems of the imm	nune system		
34	Influenza or pneumonia			
35	Insomnia or trouble sleeping			
36	Jaw pain			
37	Joint pain or stiffness/Other joint condition			
38	Knee problems (not arthritis, not joint inju	ry)		
39	Liver problem			
40	Lung/breathing problem			
41	Lupus			
42	Memory loss or loss of other cognitive fun	iction		
43	Menopause			
44	Menstrual problems			
45	Intellectual disability, also known as menta	al retardation		

Adult Alternative Health/Complementary And Alternative Medicine

- 46 Missing limbs (fingers, toes or digits), amputee47 Nausea and/or vomiting
- 48 Neurological problems
- 49 Osteoporosis, tendinitis
- 50 Allergies other than hay fever, respiratory, food, digestive, or skin allergies
- 51 Chronic pain
- 52 Other developmental problem
- 53 Injury other than fracture, bone/joint injury
- 54 Mental health disorders
- 55 Muscle or bone pain
- 56 Nerve damage, including carpal tunnel syndrome
- 57 Problems with being overweight
- 58 Phobia or fears
- 59 Polio (myelitis), paralysis, para/quadriplegia
- 60 Poor circulation in your legs
- 61 Prostate trouble or impotence
- 62 Recurring headache, other than migraine
- 63 Respiratory allergy
- 64 Rheumatoid arthritis
- 65 Senility
- 66 Sinusitis
- 67 Eczema or any kind of skin allergy
- 68 Skin problems, other than eczema or skin allergies
- 69 Sore throat other than strep or tonsillitis
- 70 Sprain or strain
- 71 Frequent stress
- 72 Strep throat or tonsillitis
- 73 Substance abuse, other than alcohol or tobacco
- 74 Filled problem from AFLHCA_S1
- 75 Filled problem from AFLHCA S2
- 76 Ulcer
- 77 Urinary problems
- 78 Varicose veins, hemorrhoids
- 79 Vision problem
- 80 Weak or failing kidneys
- 81 COPD
- 82 Back pain or problem
- 83 Neck pain or problem
- 84 Severe headache or migraine
- 85 Stomach or intestinal illness
- 86 Other specify
- 97 Refused
- 99 Don't know

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UniverseText:	Sample adults 18+ who have used second of top three modalities and saw a practitioner or used modality for a specific health problem, symptom or condition
SkipInstruction	 s: <1-86> If TP2_CNT>1 [goto TP2_CMST], else if TP2_CNT=1 [goto TP2_CHLP]; <86> [goto TP2_SPEC]; <r,d> if self-care modality (ALT_TP32 in (6,7,10-16)) [goto TP2_RS5]; else (ALT_TP32 ne (6,7,10-16)) [goto TP2_RS6]</r,d>
Question ID: A	LT.616_00.010 Instrument Variable Name: TP2_SPEC QuestionnaireFileName: Adult CAM
QuestionText:	*Enter condition for which [fill1: modality] was used. If respondent gives more than one condition, probe for condition which is most important.
97	Refused
99	Don't Know
Verbatim	Verbatim response
UniverseText:	Sample adults 18+ who have used second of top three modalities and used modality to treat other health problem or condition
SkipInstruction	 <allow 75,="" r,d=""> If TP2_CNT>1 [goto TP2_CMST], elseif TP2_CNT =1 [goto TP2_CHLP];</allow> <r,d> If TP2_CNT=1 and if self-care modality (ALT_TP32 in (6,7,10-16)) [goto TP2_RS5]; else [goto TP2_RS6]</r,d>

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uestion ID:	ALT.617_00.000 Instrument Variable Name:	TP2_CMST	QuestionnaireFileName:	Adult CAM
uestionText:	For which ONE of these did you {fill1: see	a practitioner for/use}	{fill2: modality} the most?	
	*If respondent cannot choose one condition	, probe for condition 1	most important for using therapy	
01	Abdominal pain			
02	Acid reflux or heartburn			
03	Feeling anxious, nervous or worried			
04	Asthma			
05	Arthritis			
06	Attention Deficit Disorder/Hyperactivity			
07	Benign tumors, cysts			
08	Bipolar Disorder			
09	Birth defect			
10	Cancer			
11	High Cholesterol			
12	Chronic Bronchitis			
13	Circulation problems (other than in the legs	s)		
14	Coronary heart disease	-)		
15	Dental pain			
16	Depression			
17	Diabetes			
18	Digestive allergy			
10	Excessive sleepiness during the day			
20	Excessive seepiness during the day Excessive use of alcohol or tobacco			
20 21	Fatigue or lack of energy more than 3 days			
21	Fever more than 1 day)		
22	Fibromyalgia			
23 24				
24 25	Fracture, bone/joint injury			
	Gout			
26 27	Gynecologic problem			
27	Hay fever			
28 20	Head or chest cold			
29 20	Hearing problem			
30	Heart condition or disease, other than corol	nary heart disease		
31	Hernia			
32	Hypertension			
33	Infectious diseases or problems of the imm	iune system		
34	Influenza or pneumonia			
35	Insomnia or trouble sleeping			
36	Jaw pain			
37	Joint pain or stiffness/Other joint condition			
38	Knee problems (not arthritis, not joint inju	ry)		
39	Liver problem			
40	Lung/breathing problem			
41	Lupus			
42	Memory loss or loss of other cognitive fun-	ction		
43	Menopause			
44	Menstrual problems			
45	Intellectual disability, also known as menta	al retardation		

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- 46 Missing limbs (fingers, toes or digits), amputee47 Nausea and/or vomiting
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- 51 Chronic pain
- 52 Other developmental problem
- 53 Injury other than fracture, bone/joint injury
- 54 Mental health disorders
- 55 Muscle or bone pain
- 56 Nerve damage, including carpal tunnel syndrome
- 57 Problems with being overweight
- 58 Phobia or fears
- 59 Polio (myelitis), paralysis, para/quadriplegia
- 60 Poor circulation in your legs
- 61 Prostate trouble or impotence
- 62 Recurring headache, other than migraine
- 63 Respiratory allergy
- 64 Rheumatoid arthritis
- 65 Senility
- 66 Sinusitis
- 67 Eczema or any kind of skin allergy
- 68 Skin problems, other than eczema or skin allergies
- 69 Sore throat other than strep or tonsillitis
- 70 Sprain or strain
- 71 Frequent stress
- 72 Strep throat or tonsillitis
- 73 Substance abuse, other than alcohol or tobacco
- 74 Filled problem from AFLHCA_S1
- 75 Filled problem from AFLHCA S2
- 76 Ulcer
- 77 Urinary problems
- 78 Varicose veins, hemorrhoids
- 79 Vision problem
- 80 Weak or failing kidneys
- 81 COPD
- 82 Back pain or problem
- 83 Neck pain or problem
- 84 Severe headache or migraine
- 85 Stomach or intestinal illness
- 86 Other specify
- 97 Refused
- 99 Don't know

Adult Alternative Health/Complementary And Alternative Medicine

Document Version Date: 30-May-13

UniverseText:	Sample adults 18+ who have used second of top three modalities and used modality to treat specific conditions and more than one condition selected
SkipInstructions:	<1-86> [goto TP2_CHLP] <r,d> if self-care modality (ALT_TP32=6,7,10-16) [goto TP2_RS5];</r,d>

else [goto TP2_RS6]

Question ID:	ALT.618_00.000 Instrument Variable Nam	e: TP2_CHLP	QuestionnaireFileName:	Adult CAM
QuestionText:	How much do you think [fill1: modality] helped your [fill2: cond	lition from TP2_CMST]? Would	you say
	*Read categories below.			
1	A great deal			
2	Some			
3	Only a little			
4	Not at all			
7	Refused			
9	Don't know			
UniverseTex	xt: Sample adults 18+ who have used	l second of top three mod	dalities and used modality to treat	specific condition(s)
SkipInstruct	tions: <1-4,R,D> [goto TP2_MTR1]			

Question ID:	ALT.619_00.000 Instrument Variable Name:	TP2_MTR1	QuestionnaireFileName:	Adult CAM
QuestionText:	Did you receive any of the following medic	al treatments for [fi	ill1: condition from TP2_CMST]?	
	Prescription medications?			
1	Yes			
2	No			
7	Refused			
9	Don't know			
UniverseTex	t: Sample adults 18+ who have used se	cond of top three m	odalities and used modality to treat	specific condition(s)
SkipInstruct	tions: <1,2,R,D> [goto TP2_MTR2]			

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Question ID:	ALT.620_00.	000 Instrument Variable Name	TP2_MTR2	QuestionnaireFileName:	Adult CAM
QuestionText:	*Read if n	ecessary.			
	Did you re	ceive any of the following med	lical treatments for [fill2	: condition from TP2_CMST}?	
	Over-the-c	ounter medications?			
1	Yes				
2	No				
7	Refused				
9	Don't kno	W			
UniverseTex	at: Sam	pple adults 18+ who have used	second of top three mod	alities and used modality to treat	specific condition(s)
	• .1 .				
SkipInstruct	tions: $<1,2$	2,R,D> [goto TP2_MTR3]			
SkipInstruct	tions: $<1,2$	2,R,D> [goto TP2_MTR3]			
SkipInstruct	cions: <1,2	2,R,D> [goto TP2_MTR3]			
SkipInstruct	nons: <1,2	2,R,D> [goto TP2_MTR3]			
SkipInstruct	nons: <1,2	2,R,D> [goto TP2_MTR3]			
Question ID:		2,R,D> [goto TP2_MTR3]	: TP2_MTR3	QuestionnaireFileName:	Adult CAM
Question ID:		000 Instrument Variable Name	: TP2_MTR3	QuestionnaireFileName:	Adult CAM
Question ID:	ALT.621_00. *Read if n	000 Instrument Variable Name	-	QuestionnaireFileName: : condition from TP2_CMST}?	Adult CAM
Question ID:	ALT.621_00. *Read if n	000 Instrument Variable Name	-		Adult CAM
Question ID:	ALT.621_00. *Read if n Did you re	000 Instrument Variable Name	-		Adult CAM
Question ID: QuestionText:	ALT.621_00. *Read if n Did you re Surgery?	000 Instrument Variable Name	-		Adult CAM
Question ID: QuestionText:	ALT.621_00.4 *Read if n Did you re Surgery? Yes No	000 Instrument Variable Name	-		Adult CAM
Question ID: QuestionText: 1 2	ALT.621_00. *Read if n Did you re Surgery? Yes	000 Instrument Variable Name ecessary. ceive any of the following med	-		Adult CAM
Question ID: QuestionText: 1 2 7	ALT.621_00.4 *Read if n Did you re Surgery? Yes No Refused Don't kno	000 Instrument Variable Name ecessary. ceive any of the following med	– lical treatments for [fill2		

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Question ID:	ALT.622_	_00.000 Instrume	nt Variable Name:	TP2_MTR4	QuestionnaireFileName:	Adult CAM
QuestionText:	*Read	if necessary.				
	Did yo	ou receive any of the	ne following medic	al treatments for [fi	ll2: condition from TP2_CMST}?	
	Physic	al therapy?				
1	Yes					
2	No					
7	Refus	ed				
9	Don't					
UniverseTex	xt:	Sample adults 18+	who have used see	cond of top three m	odalities and used modality to treat	specific condition(s)
SkipInstruct	tions:	<1,2,R,D> [goto]	[P2_MTR5]			
Question ID: QuestionText:	*Read	_00.000 Instrume if necessary. ou receive any of the l health counseling	ne following medic	TP2_MTR5 al treatments for [fi	QuestionnaireFileName: ll2: condition from TP1_CMST}?	Adult CAM
1	Yes					
1 2	No					
2 7	Refus	ad				
9		know				
9	Don't	know				
UniverseTex	xt:	Sample adults 18+	who have used see	cond of top three m	odalities and used modality to treat	specific condition(s)
SkipInstruct		TP2_RS1];	modality (ALT_T	MTR2=1 or TP2_N P32=6,7,10-16) [gc	ITR3=1 or TP2_MTR4=1 or TP2_1 to TP2_RS5];	MTR5=1 [goto

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Question ID:	ALT.624	_00.000 In	nstrument Variable Name:	TP2_RS1	QuestionnaireFileName:	Adult CAM
QuestionText:	DURI	NG THE P	AST 12 MONTHS, did yo	ou {fill1: see a prac	titioner for/use} {fill2: modality} fo	r any of these reasons?
	These	medical tro	eatments were too expensi	ve?		
1	Yes					
2	No					
7	Refus	sed				
9	Don't	know				
UniverseTex	at:	Sample ad condition(econd of top three n	nodalities and used some type of trea	atment for specific
SkipInstruct	tions:	<1.2.R.D>	[goto TP2_RS2]			
Question ID:	ALT.625	_00.000 In	nstrument Variable Name:	TP2_RS2	QuestionnaireFileName:	Adult CAM
QuestionText:	*Read	if necessar	ry.			
	DURI	NG THE P	AST 12 MONTHS, did yo	ou {fill1: see a prac	titioner for/use} {fill2: modality} fo	r any of these reasons?
	[fill3:	modality]	combined with these medi-	cal treatments wou	ld help you?	
1	Yes					
2	No					
7	Refus	sed				
9	Don't	know				
UniverseTex	at:	Sample ad condition(cond of top three n	nodalities and used some type of trea	atment for specific
SkipInstruct	tions:	<1,2,R,D>	[goto TP2_RS3]			

			2012 N	NHIS Qu	estionnaire -	Adult CA	Μ	
		Adul	t Alternative H	ealth/Co	mplementary	y And Alter	native Medicir	ie
]	Document V	Version Date: 30	-May-13		
Question ID:	ALT.626	_00.000	Instrument Variab	le Name:	TP2_RS3	Que	stionnaireFileName	: Adult CAM
QuestionText:	*Read	d if neces	sary.					
	DUR	ING THE	E PAST 12 MONTI	HS, did you	ı {fill1: see a pra	ctitioner for/us	e} {fill2: modality	} for any of these reasons?
	These	medical	treatments do not	work for th	e health problem	you want to the	reat or prevent?	
1	Yes							
2	No							
7	Refu	sed						
9	Don'	t know						
UniverseTex	xt:	Sample condition		ve used sec	ond of top three	modalities and	used some type of	treatment for specific
SkipInstruc	tions:	else	D> if TP2_MTR1= if self-care modality [goto TP2_RS6]];	

Question ID:	ALT.627_00.00) Instrument Variable Name:	TP2_RS4	QuestionnaireFileName:	Adult CAM
QuestionText:	*Read if nec	essary.			
	DURING TH	IE PAST 12 MONTHS, did you	ı {fill1: see a prae	ctitioner for/use} {fill2: modality} fo	r any of these reasons?
	[fill3: Prescr effects?	ption medications/Over the cou	inter medications.	Prescription or over-the-counter med	lications] cause side
1	Yes				
2	No				
7	Refused				
9	Don't know				
UniverseTex	-	e adults 18+ who have used sec ations to treat specific conditior	~	nodalities and used prescription or o	ver-the-counter
SkipInstruct		,D> if self-care modality (ALT e [goto TP2_RS6]	_TP32=6,7,10-16	b) [goto TP2_RS5];	

	2012 NHIS Questionnaire - Adult CAM
	Adult Alternative Health/Complementary And Alternative Medicine
	Document Version Date: 30-May-13
Question ID:	ALT.628_00.000 Instrument Variable Name: TP2_RS5 QuestionnaireFileName: Adult CAM
QuestionText:	DURING THE PAST 12 MONTHS, did you [fill1: use modality] for any of these reasons?
	You can do it on your own?
1	Yes
2	No
7	Refused
9	Don't know
UniverseTex	xt: Sample adults 18+ who have used second of top three modalities and picked a self care modality
Question ID:	ALT.629_00.000 Instrument Variable Name: TP2_RS6 QuestionnaireFileName: Adult CAM
QuestionText:	DURING THE PAST 12 MONTHS, did you {fill1: see a practitioner for/use} {fill2: modality} for any of these reasons?
	It is natural?
1	Yes
2	No
7	Refused
9	Don't know
UniverseTe	xt: Sample adults 18+ who have used second of top three modalities
SkipInstruc	ctions: <1,2,R,D> [goto TP2_RS7]

	2012 NHIS Questionnaire - Adult CAM
	Adult Alternative Health/Complementary And Alternative Medicine Document Version Date: 30-May-13
Question ID:	ALT.630 00.000 Instrument Variable Name: TP2 RS7 QuestionnaireFileName: Adult CAM
QuestionText:	
	DURING THE PAST 12 MONTHS, did you {fill1: see a practitioner for/use} fill2: modality} for any of these reasons?
	It focuses on the whole person, mind, body, and spirit?
1 2 7 9	Yes No Refused Don't know
UniverseTex	
Question ID:	ALT 621,00,000 Instrument Variable Names TD2, D52 OuestionneizeFileNemes Adult CAM
Question ID: QuestionText:	ALT.631_00.000 Instrument Variable Name: TP2_RS8 QuestionnaireFileName: Adult CAM *Read if necessary.
	DURING THE PAST 12 MONTHS, did you {fill1: see a practitioner for/use} {fill2: modality} for any of these reasons?
	It treats the cause and not just the symptoms?
1 2 7	Yes No Refused
9 UniverseTex	Don't know xt: Sample adults 18+ who have used second of top three modalities
SkipInstruc	

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	2012 NHIS Questionnaire - Adult CAM						
Adult Alternative Health/Complementary And Alternative Medicine							
Document Version Date: 30-May-13							
uestion ID:	ALT.632_00.000 Instrument Variable Name: TP2_RS9 QuestionnaireFileName: Adult CAM						
uestionText:	*Read if necessary.						
	DURING THE PAST 12 MONTHS, did you {fill1: see a practitioner for/use} {fill2: modality} for any of these reasons?						
	It was part of your upbringing?						
1	Yes						
2	No						
7	Refused						
9	Don't know						
UniverseTex	t: Sample adults 18+ who have used second of top three modalities						
SkipInstruc	ions: <1,2,R,D> [goto TP2_REC1]						
uestion ID:	ALT.633_00.000 Instrument Variable Name: TP2_REC1 QuestionnaireFileName: Adult CAM						
uestionText:	Did you {fill1: see a practitioner for/use} {fill2: modality} because it was recommended by any of the following people?						
	A medical doctor?						
1	Yes						
2	No						
7	Refused						
9	Don't know						
UniverseTex	t: Sample adults 18+ who have used second of top three modalities						

SkipInstructions: <1,2,R,D> [goto TP2_REC2]

2012 NHIS Questionnaire - Adult CAM Adult Alternative Health/Complementary And Alternative Medicine Document Version Date: 30-May-13						
Question ID:	ALT.634_00.000 Instrument Variable Name:	TP2_REC2	QuestionnaireFileName:	Adult CAM		
QuestionText:	*Read if necessary.					
	Did you {fill1: see a practitioner for/use} {	fill2: modality} becau	use it was recommended by any c	of the following people?		
	A family member?					
1	Yes					
2	No					
7	Refused					
9	Don't know					
Question ID:	ALT.635 00.000 Instrument Variable Name:	TP2_REC3	QuestionnaireFileName:	Adult CAM		
Question Text:	*Read if necessary.	112_ALC5				
	Did you {fill1: see a practitioner for/use} {	fill2: modality} becau	use it was recommended by any c	of the following people?		
	A friend?					
1	Yes					
2	No					
7	Refused					
9	Don't know					
UniverseTex	t: Sample adults 18+ who have used se	econd of top three mo	dalities			
SkipInstruct	ions: <1,2,R,D> [goto TP2_REC4]					

	2012 NHIS Questionnaire - Adult CAM						
Adult Alternative Health/Complementary And Alternative Medicine Document Version Date: 30-May-13							
Question ID:	ALT.636_00.000 Instrument Variable Name: TP2_REC4 QuestionnaireFileName: Adult CAM						
QuestionText:	*Read if necessary.						
	Did you {fill1: see a practitioner for/use} {fill2: modality} because it was recommended by any of the following per	ople?					
	A co-worker?						
1	Yes						
2	No						
7	Refused						
9	Don't know						
UniverseTex	xt: Sample adults 18+ who have used second of top three modalities						
SkipInstruc	tions: $\langle 1,2,R,D \rangle$ [goto TP2_IMP]						
Question ID:	ALT.637_00.000 Instrument Variable Name: TP2_IMP QuestionnaireFileName: Adult CAM						
QuestionText:	DURING THE PAST 12 MONTHS, how important was your use of [fill1: modality] in maintaining your health and being? Would you say	well-					
	*Read categories below.						
1	Very important						
2	Somewhat important						
3	Slightly important						
4	Not at all important						
7	Refused						
9	Don't know						
UniverseTex	xt: Sample adults 18+ who have used second of top three modalities						
SkipInstruc	tions: <1-4,R,D> if PROVTYP=1-4 [goto TP2_DS1]; else [goto TP2_INF1]						

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Question ID:	ALT.638	00.000	Instrument Variable Name:	TP2_DS1	QuestionnaireFileName:	Adult CAM
QuestionText:			uding the practitioner you sav a care provider know about yo		y] DURING THE PAST 12 MON tality]?	THS, did you let your
	*If pra	ctitioner	for therapy is the same perso	on as personal health	a care provider, enter '1'.	
1	Yes					
2	No					
7	Refus	sed				
9	Don't	know				
UniverseTex	xt:	Sample	adults 18+ who have used sec	cond of top three mo	dalities and has a personal health	care provider
SkipInstruc	tions:	<1 R D>	[goto TP2 INF1]			
			to TP2_DS2]			
		<2> [go		TP2_DS2	QuestionnaireFileName:	Adult CAM
Question ID:	ALT.639	<2> [go _00.000	to TP2_DS2]	_	-	Adult CAM
Question ID:	ALT.639 Why c	<2> [go _00.000 lidn't you	Instrument Variable Name:	_	-	Adult CAM
Question ID:	ALT.639 Why c	<2> [go _00.000 lidn't you	Instrument Variable Name:	_	-	Adult CAM
Question ID: QuestionText:	ALT.639 Why c You w	<2> [go _00.000 lidn't you	Instrument Variable Name:	_	-	Adult CAM
Question ID: QuestionText: 1	ALT.639 Why c You w Yes	<2> [go _00.000 lidn't you yere not u	Instrument Variable Name:	_	-	Adult CAM
Question ID: QuestionText: 1 2	ALT.639 Why c You w Yes No Refus	<2> [go _00.000 lidn't you yere not u	Instrument Variable Name:	_	-	Adult CAM
Question ID: QuestionText: 1 2 7	ALT.639 Why o You w Yes No Refus Don't	<2> [go _00.000 lidn't you rere not u sed know Sample	Instrument Variable Name: a tell your personal health car using it at the time?	– re provider about yo	-	

Adult Alternative Health/Complementary And Alternative Medicine

Question ID:	ALT.640_00.000	Instrument Variable Name:	TP2_DS3	QuestionnaireFileName:	Adult CAM
QuestionText:	*Read if neces	ssary.			
	Why didn't yo	u tell your personal health car	re provider about yo	our use of {fill1: modality}?	
	They discoura	ged use of it in the past?			
1	Yes				
2	No				
7	Refused				
9	Don't know				
UniverseText:		adults 18+ who have used see r about using therapy	cond of top three m	odalities and did not tell their perso	onal health care
SkipInstructio	ons: <1.2.R.)	D> [goto TP2 DS4]			
-					
	ALT (11 00 000	·			
Question ID:	ALT.641_00.000	Instrument Variable Name:	TP2_DS4	QuestionnaireFileName:	Adult CAM
Question ID: A	ALT.641_00.000 *Read if neces		TP2_DS4	QuestionnaireFileName:	Adult CAM
	*Read if neces		_		Adult CAM
	*Read if neces Why didn't yo	sary.	re provider about yo		Adult CAM
	*Read if neces Why didn't yo You were wor	ssary. u tell your personal health car	re provider about yo		Adult CAM
QuestionText:	*Read if neces Why didn't yo You were wor Yes	ssary. u tell your personal health car	re provider about yo		Adult CAM
QuestionText: 1	- *Read if neces Why didn't yo You were wor Yes No	ssary. u tell your personal health car	re provider about yo		Adult CAM
QuestionText: 1 2	*Read if neces Why didn't yo You were wor Yes	ssary. u tell your personal health car	re provider about yo		Adult CAM
QuestionText: 1 2 7	*Read if neces Why didn't yo You were wor Yes No Refused Don't know : Sample	ssary. u tell your personal health car ried they would discourage it	re provider about yo		

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Question ID:	ALT.642_00.000	Instrument Variable Name:	TP2_DS5	QuestionnaireFileName:	Adult CAM		
QuestionText:	*Read if neces	ssary.					
	Why didn't yo	u tell your personal health car	e provider about yo	our use of {fill1: modality}?			
	You were con-	cerned about a negative reacti	on?				
1	Yes						
2	No						
7	Refused						
9	Don't know						
UniverseText		Sample adults 18+ who have used second of top three modalities and did not tell their personal health care provider about using therapy					
SkipInstructio	ons: <1,2,R,	D> [goto TP2_DS6]					
-		<u> </u>					
Question ID:	ALT.643_00.000	Instrument Variable Name:	TP2_DS6	QuestionnaireFileName:	Adult CAM		
Question ID:	ALT.643_00.000 *Read if neces		TP2_DS6	QuestionnaireFileName:	Adult CAM		
	*Read if neces		_		Adult CAM		
	*Read if neces Why didn't yo	sary.	_		Adult CAM		
	- *Read if neces Why didn't yo You didn't thi	ssary. u tell your personal health car	_		Adult CAM		
QuestionText:	- *Read if neces Why didn't yo You didn't thi Yes	ssary. u tell your personal health car	_		Adult CAM		
QuestionText: 1	- *Read if neces Why didn't yo You didn't thi Yes No	ssary. u tell your personal health car	_		Adult CAM		
QuestionText: 1 2	- *Read if neces Why didn't yo You didn't thi Yes	ssary. u tell your personal health car	_		Adult CAM		
QuestionText: 1 2 7	 Read if neces Why didn't yo You didn't thi Yes No Refused Don't know <li: li="" sample<=""> </li:>	ssary. u tell your personal health car nk they needed to know?	re provider about yc				

Adult Alternative Health/Complementary And Alternative Medicine

Question ID:	ALT.644_00	000 Instrument Variable Name:	TP2_DS7	QuestionnaireFileName:	Adult CAM			
QuestionText:	*Read if r	necessary.						
	Why didn't you tell your personal health care provider about your use of {fill1: modality}?							
	They didr	't ask?						
1	Yes							
2	No							
7	Refused							
9	Don't kno)W						
UniverseTex		Sample adults 18+ who have used second of top three modalities and did not tell their personal health care provider about using therapy						
SkipInstruct	tions: <1,	2,R,D> [goto TP2_DS8]						
Question ID:	ALT.645_00	000 Instrument Variable Name:	TP2_DS8	QuestionnaireFileName:	Adult CAM			
QuestionText:	*Read if r	necessary.						
	Why didn	't you tell your personal health ca	are provider about	your use of {fill1: modality}?				
	You don't	think they know as much about i	it as you do?					
1	Yes							
2	No							
7	Refused							
9	Don't kno)W						
UniverseTex		nple adults 18+ who have used so vider about using therapy	econd of top three 1	nodalities and did not tell their perso	nal health care			
SkipInstruc	tions: <1,	2,R,D> [goto TP2_DS9]						

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Question ID:	ALT.646_0	00.000	Instrument Variable Name:	TP2_DS9	QuestionnaireFileName:	Adult CAM
QuestionText:	*Read i	f neces	sary.			
	Why di	dn't yo	u tell your personal health car	e provider about	your use of {fill1: modality}?	
	They di	dn't giv	ve you enough time to tell the	m?		
1	Yes					
2	No					
7	Refuse	d				
9	Don't k	now				
UniverseTex		-	adults 18+ who have used sec r about using therapy	cond of top three	modalities and did not tell their perso	nal health care
SkipInstruct	tions: <	1,2,R,I	D> [goto TP2_INF1]			

Question ID:	ALT.675_00.000 Instrument Variable Nar	me: TP2_INF1	QuestionnaireFileName:	Adult CAM
QuestionText:	DURING THE PAST 12 MONTHS, di	id you get information abo	out [fill1: modality] from any of th	e following sources?
	The Internet?			
1	Yes			
2	No			
7	Refused			
9	Don't know			
UniverseTex	t: Sample adults 18+ who have use	ed second of top three mod	lalities	
SkipInstruct	ions: <1,2,R,D> [goto TP2_INF2]			

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Question ID:	ALT.676_00.000 Instrument Variable Name: TP2_INF2 QuestionnaireFileName: Adult CAM			
QuestionText:	*Read if necessary.			
	DURING THE PAST 12 MONTHS, did you get information about [fill1: modality] from any of the following sources?			
	Books, magazines, or newspapers?			
1	Yes			
2	No			
7	Refused			
9	Don't know			
UniverseTe	xt: Sample adults 18+ who have used second of top three modalities			
SkipInstruc	tions: <1,2,R,D> [goto TP2_INF3] ALT.677_00.000 Instrument Variable Name: TP2_INF3 QuestionnaireFileName: Adult CAM			
QuestionText:	*Read if necessary.			
	DURING THE PAST 12 MONTHS, did you get information about [fill1: modality] from any of the following sources?			
	DVDs, videos, or CDs?			
1	Yes			
2	No			
7	Refused			
9	Don't know			
UniverseTex	st: Sample adults 18+ who have used second of top three modalities			
SkipInstruc	tions: <1,2,R,D> [goto TP2_INF4]			

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Question ID:	ALT.678_00.000 Instrument Variable Name: TP2_INF4 QuestionnaireFileName: Adult CAM
QuestionText:	*Read if necessary.
	DURING THE PAST 12 MONTHS, did you get information about [fill1: modality] from any of the following sources?
	Television or radio?
1	Yes
2	No
7	Refused
9	Don't know
9 UniverseTex	
	Sample adults 18+ who have used second of top three modalities
UniverseTex	Sample adults 18+ who have used second of top three modalities
UniverseTex	Sample adults 18+ who have used second of top three modalities
UniverseTex	Sample adults 18+ who have used second of top three modalities
UniverseTex SkipInstruct	Sample adults 18+ who have used second of top three modalities
UniverseTex	At: Sample adults 18+ who have used second of top three modalities tions: <1,2,R,D> [goto TP2_INF5]
UniverseTex SkipInstruct Question ID:	ALT.679_00.000 Instrument Variable Name: TP2_INF5 QuestionnaireFileName: Adult CAM
UniverseTex SkipInstruct Question ID:	ALT.679_00.000 Instrument Variable Name: TP2_INF5 QuestionnaireFileName: Adult CAM *Read if necessary.
UniverseTex SkipInstruct Question ID:	At: Sample adults 18+ who have used second of top three modalities tions: <1,2,R,D> [goto TP2_INF5] ALT.679_00.000 Instrument Variable Name: TP2_INF5 QuestionnaireFileName: Adult CAM *Read if necessary. DURING THE PAST 12 MONTHS, did you get information about [fill1: modality] from any of the following sources?
UniverseTex SkipInstruct Question ID: QuestionText:	dt: Sample adults 18+ who have used second of top three modalities tions: <1,2,R,D> [goto TP2_INF5] ALT.679_00.000 Instrument Variable Name: TP2_INF5 QuestionnaireFileName: Adult CAM *Read if necessary. DURING THE PAST 12 MONTHS, did you get information about [fill1: modality] from any of the following sources? Scientific articles?
UniverseTex SkipInstruct Question ID: QuestionText:	dt: Sample adults 18+ who have used second of top three modalities tions: <1,2,R,D> [goto TP2_INF5] ALT.679_00.000 Instrument Variable Name: TP2_INF5 QuestionnaireFileName: Adult CAM *Read if necessary. DURING THE PAST 12 MONTHS, did you get information about [fill1: modality] from any of the following sources? Scientific articles? Yes
UniverseTex SkipInstruct Question ID: QuestionText: 1 2	t: Sample adults 18+ who have used second of top three modalities tions: <1,2,R,D> [goto TP2_INF5] ALT.679_00.000 Instrument Variable Name: TP2_INF5 QuestionnaireFileName: Adult CAM *Read if necessary. DURING THE PAST 12 MONTHS, did you get information about [fill1: modality] from any of the following sources? Scientific articles? Yes No No

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Question ID:	ALT.680_00.000 Instrument Variable Name: TP2_INF6 QuestionnaireFileName	Adult CAM				
QuestionText:	t: *Read if necessary.					
	DURING THE PAST 12 MONTHS, did you get information about [fill1: modality] from any	of the following sources?				
	Health food stores?					
1	Yes					
2	No					
7	Refused					
9	Don't know					
UniverseTex	UniverseText: Sample adults 18+ who have used second of top three modalities					
SkipInstruc	actions: <1,2,R,D> if ALT_TP33 ne '' [goto TP3_REA1]; else [goto next section]					

Question ID:	ALT.690_00.000 Instrument Variable Nam	ne: TP3_REA1	QuestionnaireFileName:	Adult CAM
QuestionText:	Did you {fill1: see a practitioner for/use	e} {fill2: modality} for a	any of these reasons?	
	For general wellness or general disease	prevention?		
1	Yes			
2	No			
7	Refused			
9	Don't know			
UniverseTex	t: Sample adults 18+ who have use	d third of top three mod	alities	
SkipInstruct	ions: <1,2,R,D> [goto TP3_REA2]			

			age 217 01 252		
		2012 NHIS Qu	iestionnaire -	Adult CAM	
	Adu	lt Alternative Health/Co	omplementary A	And Alternative Medicine	
		Document 7	Version Date: 30-M	lay-13	
Question ID:	ALT.691_00.00	() Instrument Variable Name:	TP3_REA2	QuestionnaireFileName:	Adult CAM
QuestionText:	*Read if nec	essary.			
	Did you {fill	1: see a practitioner for/use} {f	fill2: modality} for a	iny of these reasons?	
	To improve y	your energy?			
1	Yes				
2	No				
7	Refused				
9	Don't know				
UniverseTex	t: Sampl	e adults 18+ who have used thi	rd of top three mod	alities	
SkipInstruct	ions: <1.2.B	R,D> [goto TP3_REA3]			
1		, [0			
Question ID:	ALT.692_00.00	0 Instrument Variable Name:	TP3_REA3	QuestionnaireFileName:	Adult CAM
QuestionText:	*Read if nec	essary.			
	Did you {fill	1: see a practitioner for/use} {f	ill2: modality} for a	iny of these reasons?	
	To improve y	your immune function?			
1	Yes				
2	No				
7	Refused				
9	Don't know				
UniverseTex	t: Sampl	e adults 18+ who have used thi	rd of top three mod	alities	
SkipInstructi	ions: <1.2.R	R,D> [goto TP3 REA4]			

SkipInstructions:

<1,2,R,D> [goto TP3_REA4]

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		2012 NHIS Qu	estionnaire - A	dult CAM	
Adult Alternative Health/Complementary And Alternative Medicine					
Document Version Date: 30-May-13					
				•	
Question ID:	ALT.693_00.000) Instrument Variable Name:	TP3_REA4	QuestionnaireFileName:	Adult CAM
QuestionText:	*Read if nece	essary.			
	Did you {fill1	: see a practitioner for/use} {f	ill2: modality} for ar	ny of these reasons?	
	To improve y	our athletic or sports performa	nce?		
1	Yes				
2	No				
7	Refused				
9	Don't know				
UniverseTe	xt: Sample	e adults 18+ who have used thi	rd of top three modal	lities	
SkipInstruc	tions: <1,2,R	,D> [goto TP3_REA5]			
Question ID:	ALT.694_00.000) Instrument Variable Name:	TP3_REA5	QuestionnaireFileName:	Adult CAM
QuestionText:	*Read if nece	essary.			
	Did you {fill1	: see a practitioner for/use} {f	ill2: modality} for ar	ny of these reasons?	
	To improve y	our memory or concentration?			
1	Yes				
2	No				
7	Refused				
9	Don't know				
UniverseTex	xt: Sample	e adults 18+ who have used thi	rd of top three modal	lities	
SkipInstruc	tions: <1,2,R	,D> [goto TP3_MOT1]			

Adult Alternative Health/Complementary And Alternative Medicine

Question ID:	ALT.695_00.000	Instrument Variable Name:	TP3_MOT1	QuestionnaireFileName:	Adult CAM
QuestionText:	Did {fill1: see	eing a practitioner for/using}	{fill2: modality} motiv	rate you to	
	Eat healthier?				
1	Yes				
2	No				
7	Refused				
9	Don't know				
UniverseText	: Sample	adults 18+ who have used the	ird of top three modali	ties	
SkipInstructi	ons: <1,2,R,	D> [goto TP3 MOT2]			
				Occurring Fil Name	
	ALT.696_00.000 *Read if nece:	Instrument Variable Name:	TP3_MOT2	QuestionnaireFileName:	Adult CAM
	*Read if neces		-		Adult CAM
	*Read if neces	ssary.	-		Adult CAM
	*Read if neces Did {fill1: see	ssary.	-		Adult CAM
QuestionText:	*Read if neces Did {fill1: see Eat more orga	ssary.	-		Adult CAM
QuestionText: 1	*Read if nece: Did {fill1: see Eat more orga Yes	ssary.	-		Adult CAM
QuestionText: 1 2	*Read if nece: Did {fill1: see Eat more orga Yes No	ssary.	-		Adult CAM
QuestionText: 1 2 7	*Read if neces Did {fill1: see Eat more orga Yes No Refused Don't know	ssary.	- {fill2: modality} motiv	rate you to	Adult CAM

Adult Alternative Health/Complementary And Alternative Medicine

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Question ID:	ALT.697_	00.000	Instrument Variable Name:	TP3_MOT3	QuestionnaireFileName:	Adult CAM
QuestionText:	*Read	if neces	sary.			
	Did {f	ill1: seei	ng a practitioner for/using}	{fill2: modality} mot	ivate you to	
	Cut ba	ck or sto	p drinking alcohol?			
1	Yes					
2	No					
7	Refus	ed				
9	Don't	know				
UniverseTex		Sample months	adults 18+ who have used th	ird of top three moda	lities and who have consumed alc	ohol in the past 12
SkipInstruct	tions:		D> if SMKNOW=1,2 [goto 7 SMKNOW ne (1,2) [[goto 7]			
Question ID:	ALT.698_	_00.000	Instrument Variable Name:	TP3_MOT4	QuestionnaireFileName:	Adult CAM
QuestionText:	*Read	if neces	sary.			

Sample adults 18+ who have used third of top three modalities and who currently smoke every day or some days

Did {fill1: seeing a practitioner for/using} {fill2: modality} motivate you to

SkipInstructions: <1,2,R,D> [goto TP3_MOT5]

Yes

No

Refused

Don't know

1

2

7

9

UniverseText:

Cut back or stop smoking cigarettes?

Adult Alternative Health/Complementary And Alternative Medicine

Question ID:	ALT.699_00.000) Instrument Variable Name:	TP3_MOT5	QuestionnaireFileName:	Adult CAM
QuestionText:	Did {fill1: se	eing a practitioner for/using}	{fill2: modality} motiv	ate you to	
	Exercise mor	e regularly?			
1	Yes				
2	No				
7	Refused				
9	Don't know				
UniverseText:	: Sample	e adults 18+ who have used th	hird of top three modali	ies	
SkipInstructio	ons: <1.2 R				
	0115. (1,2,10)	,D> [goto TP3_OUT1]			
Question ID:) Instrument Variable Name:	TP3_OUT1	QuestionnaireFileName:	Adult CAM
Question ID:	ALT.700_00.000 *Read if nece) Instrument Variable Name:	_		Adult CAM
Question ID:	ALT.700_00.000 *Read if nece Did {fill1: se) Instrument Variable Name:	- {fill2: modality} lead t		Adult CAM
Question ID:	ALT.700_00.000 *Read if nece Did {fill1: se) Instrument Variable Name: essary. eing a practitioner for/using}	- {fill2: modality} lead t		Adult CAM
Question ID: A	ALT.700_00.000 *Read if nece Did {fill1: se Give you a se) Instrument Variable Name: essary. eing a practitioner for/using}	- {fill2: modality} lead t		Adult CAM
Question ID:	ALT.700_00.000 *Read if nece Did {fill1: se Give you a se Yes) Instrument Variable Name: essary. eing a practitioner for/using}	- {fill2: modality} lead t		Adult CAM
Question ID: QuestionText: 1 2	ALT.700_00.000 *Read if nece Did {fill1: se Give you a se Yes No) Instrument Variable Name: essary. eing a practitioner for/using}	- {fill2: modality} lead t		Adult CAM
Question ID: 4 QuestionText: 1 2 7	ALT.700_00.000 *Read if nece Did {fill1: se Give you a se Yes No Refused Don't know) Instrument Variable Name: essary. eing a practitioner for/using}	- {fill2: modality} lead t	o any of these outcomes?	Adult CAM

		1	age 22 01 252		
		2012 NHIS Qu	estionnaire - A	Adult CAM	
	Adu	lt Alternative Health/Co	omplementary A	And Alternative Medicine	
			Version Date: 30-M		
Question ID:	ALT.701_00.000) Instrument Variable Name:	TP3_OUT2	QuestionnaireFileName:	Adult CAM
QuestionText:	*Read if nece	essary.			
	Did {fill1: se	eing a practitioner for/using} {	fill2: modality} lea	d to any of these outcomes?	
	Help to reduc	e your stress level or to relax?			
1	Yes				
2	No				
7	Refused				
9	Don't know				
UniverseTex SkipInstruc	-	e adults 18+ who have used thi ,D> [goto TP3_OUT3]	rd of top three mode	lities	
Question ID:	ALT.702_00.000) Instrument Variable Name:	TP3_OUT3	QuestionnaireFileName:	Adult CAM
QuestionText:	*Read if nece	essary.			
	Did {fill1: se	eing a practitioner for/using} {	fill2: modality} lea	d to any of these outcomes?	
	Help you to s	leep better?			
1	Yes				
2	No				
7	Refused				
9	Don't know				
UniverseTex	xt: Sample	e adults 18+ who have used thi	rd of top three moda	alities	
SkipInstruc	tions: <1,2,R	,D> [goto TP3_OUT4]			

		1	age 225 01 252			
2012 NHIS Questionnaire - Adult CAM Adult Alternative Health/Complementary And Alternative Medicine						
Question ID:	ALT.703_00.000	Instrument Variable Name:	TP3_OUT4	QuestionnaireFileName:	Adult CAM	
QuestionText:	*Read if nece	ssary.				
	Did {fill1: see	ing a practitioner for/using} {	fill2: modality} lea	d to any of these outcomes?		
	Make you fee	better emotionally?				
1	Yes					
2	No					
7	Refused					
9	Don't know					
UniverseTex	zt. Sample	adults 18+ who have used thi	rd of top three mode	lities		
Universerez	a. Sample	adults 10+ who have used the	id of top three mode	intes		
SkipInstruc	tions: <1.2.R.	D> [goto TP3_OUT5]				
I IIII	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					
Question ID:	ALT.704_00.000	Instrument Variable Name:	TP3_OUT5	QuestionnaireFileName:	Adult CAM	
QuestionText:	*Read if nece	ssary.				
	Did {fill1: see	ing a practitioner for/using} {	fill2: modality} lea	d to any of these outcomes?		
	Make it easier	to cope with health problems	?			
1	Yes					
2	No					
7	Refused					
9	Don't know					
UniverseTex	xt: Sample	adults 18+ who have used thi	rd of top three moda	lities		
SkipInstruc	tions: <1,2,R	D> [goto TP3_OUT6]				

		2012 NHIS Qu	estionnaire - A	dult CAM	
	Adul	t Alternative Health/Co	omplementary A	nd Alternative Medicine	
		Document '	Version Date: 30-Ma	y-13	
Question ID:	ALT.705_00.000	Instrument Variable Name:	TP3_OUT6	QuestionnaireFileName:	Adult CAM
QuestionText:	*Read if neces	sary.			
	Did {fill1: see	ing a practitioner for/using} {	fill2: modality} lead	to any of these outcomes?	
	Improve your	overall health and make you f	feel better?		
1	Yes				
2	No				
7	Refused				
9	Don't know				
UniverseTex	zt• Sample	adults 18+ who have used thi	rd of ton three modal	ities	
Duestion ID:	ALT.706 00.000	Instrument Variable Name:	TP3 OUT7	OuestionnaireFileName:	Adult CAM
Question ID: QuestionText:	ALT.706_00.000 *Read if neces	Instrument Variable Name:	TP3_OUT7	QuestionnaireFileName:	Adult CAM
	*Read if neces		-	-	Adult CAM
	*Read if neces Did {fill1: see	sary.	-		Adult CAM
	*Read if neces Did {fill1: see Improve your	sary.	-		Adult CAM
QuestionText:	*Read if neces Did {fill1: see	sary.	-		Adult CAM
QuestionText: 1	*Read if neces Did {fill1: see Improve your Yes	sary.	-		Adult CAM
QuestionText: 1 2	*Read if neces Did {fill1: see Improve your Yes No	sary.	-		Adult CAM
QuestionText: 1 2 7	*Read if neces Did {fill1: see Improve your Yes No Refused Don't know	sary.	fill2: modality} lead	to any of these outcomes?	Adult CAM

Adult Alternative Health/Complementary And Alternative Medicine

Question ID:	ALT.707_00.000 Instrument Variable Name: TP3_OUT8 QuestionnaireFileName: Adult CAM
QuestionText:	*Read if necessary.
	Did {fill1: seeing a practitioner for/using} {fill2: modality} lead to any of these outcomes?
	Improve your attendance at a job or school?
1	Yes
2	No
7	Refused
9	Don't know
UniverseTex	st: Sample adults 18+ who have used third of top three modalities and who worked or attended school in the past year
SkipInstruct	tions: <1,2,R,D> if TP3_CNT>1 [goto TP3_MOST]; else if TP3_CNT=1 [goto TP3_HELP]; else [goto TP3_TRET]

Adult Alternative Health/Complementary And Alternative Medicine

Question ID:	ALT.708_00.000 Instrument Variable Name	: TP3_MOST	QuestionnaireFileName:	Adult CAM
QuestionText:	Of these reasons, which ONE was the mo	ost important for usin	g [fill1: modality]?	
	*Read list below.			
01	Your general wellness or general disease	e prevention		
02	To improve your energy			
03	To improve your immune function			
04	To improve your athletic or sports perfor	rmance		
05	To improve your memory or concentration	on		
06	To eat healthier			
07	To eat more organic foods			
08	To cut back or stop drinking alcohol			
09	To cut back or stop smoking cigarettes			
10	To exercise more regularly			
11	To give you a sense of control over your	health		
12	To help to reduce your stress level or to	relax		
13	To help you to sleep better			
14	To make you feel better emotionally			
15	To make it easier to cope with health pro	oblems		
16	To improve your overall health and make	e you feel better		
17	To improve your relationships with other	rs		
18	To improve your attendance at a job or s	chool		
97	Refused			
99	Don't know			
UniverseTex	t: Sample adults 18+ who have used practitioner/using modality chosen		dalities and had two or more reason	s for seeing a
SkipInstruct	tions: <1-18> [goto TP3_HELP] <r,d> [goto TP3_TRET]</r,d>			

Adult Alternative Health/Complementary And Alternative Medicine

Question ID:	ALT.709_00.000 Instrument Variable Name:	TP3_HELP	QuestionnaireFileName:	Adult CAM
QuestionText:	How much do you think [fill1: modality] he	lped {fill2: reason given in	n TP3_MOST question}? We	ould you say
	*Read categories below.			
1	A great deal			
2	Some			
3	Only a little			
4	Not at all			
7	Refused			
9	Don't know			
UniverseTex	xt: Sample adults 18+ who have used this modality/seeing a practitioner for sele		and had a most important rea	son for using selected
SkipInstruct	tions: <1-4,R,D> [goto TP3_TRET]			

Question ID:	ALT.710_00.000	Instrument Variable Name:	TP3_TRET	QuestionnaireFileName:	Adult CAM
QuestionText:		E PAST 12 MONTHS, did youns, symptoms, or conditions?	u {fill1: see a practit	ioner for/use} {fill2: modality} fo	r one or more specific
1	Yes				
2	No				
7	Refused				
9	Don't know				
UniverseTex	t: Sample	adults 18+ who have used thin	rd of top three moda	lities	
SkipInstruct	<2,R,D	oto TP3_COND] > ALT_TP33 in (6,7,10-16) [ALT_TP33 ne (6,7,10-16) [gc			

Adult Alternative Health/Complementary And Alternative Medicine

Question ID:	ALT.711_00.000 Instrument Variable Name:	TP3_COND	QuestionnaireFileName:	Adult CAM
QuestionText:	For what health problems, symptoms, or cond	ditions did you {fill1: see	a practitioner for/use} {fill2	2: modality}?
	*Enter all that apply, separate with commas.			
01	Abdominal pain			
02	Acid reflux or heartburn			
03	Feeling anxious, nervous or worried			
04	Asthma			
05	Arthritis			
06	Attention Deficit Disorder/Hyperactivity			
07	Benign tumors, cysts			
08	Bipolar Disorder			
09	Birth defect			
10	Cancer			
11	High Cholesterol			
12	Chronic Bronchitis			
13	Circulation problems (other than in the legs)			
14	Coronary heart disease			
15	Dental pain			
16	Depression			
17	Diabetes			
18	Digestive allergy			
19 20	Excessive sleepiness during the day			
20	Excessive use of alcohol or tobacco			
21 22	Fatigue or lack of energy more than 3 days			
22	Fever more than 1 day			
23 24	Fibromyalgia			
24 25	Fracture, bone/joint injury Gout			
25 26	Gynecologic problem			
20	Hay fever			
28	Head or chest cold			
20 29	Hearing problem			
30	Heart condition or disease, other than corona	arv heart disease		
31	Hernia	ary nourt ansouse		
32	Hypertension			
33	Infectious diseases or problems of the immu	ne system		
34	Influenza or pneumonia			
35	Insomnia or trouble sleeping			
36	Jaw pain			
37	Joint pain or stiffness/Other joint condition			
38	Knee problems (not arthritis, not joint injury	7)		
39	Liver problem			
40	Lung/breathing problem			
41	Lupus			
42	Memory loss or loss of other cognitive funct	tion		
43	Menopause			
44	Menstrual problems			
45	Intellectual disability, also known as mental	retardation		

Adult Alternative Health/Complementary And Alternative Medicine

- 46 Missing limbs (fingers, toes or digits), amputee 47 Nausea and/or vomiting
- 48 Neurological problems
- 49 Osteoporosis, tendinitis
- 50 Allergies other than hay fever, respiratory, food, digestive, or skin allergies
- 51 Chronic pain
- 52 Other developmental problem
- 53 Injury other than fracture, bone/joint injury
- 54 Mental health disorders
- 55 Muscle or bone pain
- 56 Nerve damage, including carpal tunnel syndrome
- 57 Problems with being overweight
- 58 Phobia or fears
- 59 Polio (myelitis), paralysis, para/quadriplegia
- 60 Poor circulation in your legs
- 61 Prostate trouble or impotence
- 62 Recurring headache, other than migraine
- 63 Respiratory allergy
- 64 Rheumatoid arthritis
- 65 Senility
- Sinusitis 66
- 67 Eczema or any kind of skin allergy
- 68 Skin problems, other than eczema or skin allergies
- 69 Sore throat other than strep or tonsillitis
- 70 Sprain or strain
- 71 Frequent stress
- 72 Strep throat or tonsillitis
- 73 Substance abuse, other than alcohol or tobacco
- 74 Filled problem from AFLHCA S1
- 75 Filled problem from AFLHCA S2
- 76 Ulcer
- 77 Urinary problems
- 78 Varicose veins, hemorrhoids
- 79 Vision problem
- Weak or failing kidneys 80
- COPD 81
- 82 Back pain or problem
- 83 Neck pain or problem
- 84 Severe headache or migraine
- 85 Stomach or intestinal illness
- 86 Other specify
- 97 Refused
- 99 Don't know

Adult Alternative Health/Complementary And Alternative Medicine

UniverseText:	Sample adults 18+ who have used third of top three modalities and saw a practitioner or used modality for a specific health problem, symptom or condition
SkipInstructions:	<1-86> If TP3_CNT>1 [goto TP3_CMST], else if TP3_CNT=1 [goto TP3_CHLP]; <86> [goto TP3_SPEC]; <r,d> if self-care modality (ALT_TP33 in (6,7,10-16)) [goto TP3_RS5]; else (ALT_TP33 ne (6,7,10-16)) [goto TP3_RS6]</r,d>
	711_00.010 Instrument Variable Name: TP3_SPEC QuestionnaireFileName: Adult CAM nter condition for which [fill1: modality] was used. If respondent gives more than one condition, probe for condition
wh	ich is most important.
97 Re	efused
99 De	on't Know
Verbatim Ve	erbatim response
UniverseText:	Sample adults 18+ who have used third of top three modalities and used modality to treat other health problem or condition
SkipInstructions:	<allow 75,="" r,d=""> If TP3_CNT>1 [goto TP3_CMST], elseif TP3_CNT =1 [goto TP3_CHLP]; <r,d> If TP3_CNT=1 and if self-care modality (ALT_TP33 in (6,7,10-16)) [goto TP3_RS5]; else [goto TP3_RS6]</r,d></allow>

Adult Alternative Health/Complementary And Alternative Medicine

Juestion ID:	ALT.712_00.000 Instrument Variable Name:	TP3_CMST	QuestionnaireFileName:	Adult CAM
JuestionText:	For which ONE of these did you {fill1: see	a practitioner for/us	e} {fill2: modality} the most?	
	*If respondent cannot choose one condition	, probe for condition	n most important for using therapy	
01	Abdominal pain			
02	Acid reflux or heartburn			
03	Feeling anxious, nervous or worried			
04	Asthma			
05	Arthritis			
06	Attention Deficit Disorder/Hyperactivity			
07	Benign tumors, cysts			
08	Bipolar Disorder			
09	Birth defect			
10	Cancer			
10	High Cholesterol			
12	Chronic Bronchitis			
12	Circulation problems (other than in the leg			
13	Coronary heart disease	(5)		
	-			
15	Dental pain			
16	Depression			
17	Diabetes			
18	Digestive allergy			
19	Excessive sleepiness during the day			
20	Excessive use of alcohol or tobacco			
21	Fatigue or lack of energy more than 3 days	5		
22	Fever more than 1 day			
23	Fibromyalgia			
24	Fracture, bone/joint injury			
25	Gout			
26	Gynecologic problem			
27	Hay fever			
28	Head or chest cold			
29	Hearing problem			
30	Heart condition or disease, other than coro	narv heart disease		
31	Hernia	5		
32	Hypertension			
33	Infectious diseases or problems of the imm	une system		
34	Influenza or pneumonia			
35	Insomnia or trouble sleeping			
36	Jaw pain			
37	Joint pain or stiffness/Other joint condition	h		
38	Knee problems (not arthritis, not joint inju			
38 39	Liver problem	1 y)		
39 40	Lung/breathing problem			
	e er			
41	Lupus			
42	Memory loss or loss of other cognitive fun	icuon		
43	Menopause			
44	Menstrual problems			
45	Intellectual disability, also known as menta	al retardation		

Adult Alternative Health/Complementary And Alternative Medicine

- 46 Missing limbs (fingers, toes or digits), amputee
- 47 Nausea and/or vomiting
- 48 Neurological problems
- 49 Osteoporosis, tendinitis
- 50 Allergies other than hay fever, respiratory, food, digestive, or skin allergies
- 51 Chronic pain
- 52 Other developmental problem
- 53 Injury other than fracture, bone/joint injury
- 54 Mental health disorders
- 55 Muscle or bone pain
- 56 Nerve damage, including carpal tunnel syndrome
- 57 Problems with being overweight
- 58 Phobia or fears
- 59 Polio (myelitis), paralysis, para/quadriplegia
- 60 Poor circulation in your legs
- 61 Prostate trouble or impotence
- 62 Recurring headache, other than migraine
- 63 Respiratory allergy
- 64 Rheumatoid arthritis
- 65 Senility
- 66 Sinusitis
- 67 Eczema or any kind of skin allergy
- 68 Skin problems, other than eczema or skin allergies
- 69 Sore throat other than strep or tonsillitis
- 70 Sprain or strain
- 71 Frequent stress
- 72 Strep throat or tonsillitis
- 73 Substance abuse, other than alcohol or tobacco
- 74 Filled problem from AFLHCA_S1
- 75 Filled problem from AFLHCA S2
- 76 Ulcer
- 77 Urinary problems
- 78 Varicose veins, hemorrhoids
- 79 Vision problem
- 80 Weak or failing kidneys
- 81 COPD
- 82 Back pain or problem
- 83 Neck pain or problem
- 84 Severe headache or migraine
- 85 Stomach or intestinal illness
- 86 Other specify
- 97 Refused
- 99 Don't know

Adult Alternative Health/Complementary And Alternative Medicine

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UniverseText:	Sample adults 18+ who have used third of top three modalities and used modality to treat specific conditions and more than one condition selected
SkipInstructions:	<1-86> [goto TP3_CHLP]

<R,D> if self-care modality (ALT_TP33=6,7,10-16) [goto TP3_RS5]; else [goto TP3_RS6]

Question ID:	ALT.713_00.000 Instrument Variable Name:	TP3_CHLP	QuestionnaireFileName:	Adult CAM
QuestionText:	How much do you think [fill1: modality] he	elped your [fill2: con	dition from TP3_CMST}? Would	you say
	*Read categories below.			
1	A great deal			
2	Some			
3	Only a little			
4	Not at all			
7	Refused			
9	Don't know			
UniverseTex	st: Sample adults 18+ who have used th	ird of top three moda	lities and used modality to treat sp	pecific condition(s)
SkipInstruc	tions: <1-4,R,D> [goto TP3_MTR1]			

Question ID:	ALT.714_00.000 Instrument Variable Name:	TP3_MTR1	QuestionnaireFileName:	Adult CAM
QuestionText:	Did you receive any of the following medic	al treatments for [fill	1: condition from TP3_CMST]?	
	Prescription medications?			
1	Yes			
2	No			
7	Refused			
9	Don't know			
UniverseTex	t: Sample adults 18+ who have used th	ird of top three moda	lities and used modality to treat sp	ecific condition(s)
SkipInstructi	ions: <1,2,R,D> [goto TP3_MTR2]			

Adult Alternative Health/Complementary And Alternative Medicine

Question ID:	ALT.715_00.0)() Instrument Variable Name:	TP3_MTR2	QuestionnaireFileName:	Adult CAM
QuestionText:	*Read if ne	cessary.			
	Did you rec	eive any of the following medic	eal treatments for [fill2	: condition from TP3_CMST}?	
	Over-the-co	unter medications?			
1	Yes				
2	No				
7	Refused				
9	Don't know	T			
UniverseText	t: Samp	ble adults 18+ who have used th	ird of top three modali	ties and used modality to treat sp	pecific condition(s)
	ions: <1.2				
SkipInstructi	1011 5. ~1,2,	R,D> [goto TP3_MTR3]			
Skipinstructi	10115. \1,2,	K,D> [goto IP3_MIR3]			
Skipinstructi	10115. \1,2,	K,D> [goto 1P3_M1K3]			
Skipinstrucu	ions. ~1,2,	K,D> [goto 1P3_M1K3]			
Skipinstructi	10115. \1,2,	K,D> [goto 1P3_M1K3]			
		K,D> [goto 1P3_M1K3]	TP3_MTR3	QuestionnaireFileName:	Adult CAM
		00 Instrument Variable Name:	TP3_MTR3	QuestionnaireFileName:	Adult CAM
Question ID:	ALT.716_00.0 *Read if new	00 Instrument Variable Name: cessary.	-	QuestionnaireFileName: : condition from TP3_CMST}?	Adult CAM
Question ID:	ALT.716_00.0 *Read if new	00 Instrument Variable Name: cessary.	-		Adult CAM
Question ID:	ALT.716_00.0 *Read if ne Did you rec	00 Instrument Variable Name: cessary.	-		Adult CAM
Question ID: QuestionText:	ALT.716_00.0 *Read if ne Did you rec Surgery?	00 Instrument Variable Name: cessary.	-		Adult CAM
Question ID: QuestionText:	ALT.716_00.00 *Read if new Did you rec Surgery? Yes	00 Instrument Variable Name: cessary.	-		Adult CAM
Question ID: QuestionText: 1 2	ALT.716_00.0 *Read if new Did you rec Surgery? Yes No	00 Instrument Variable Name: cessary. eive any of the following medic	-		Adult CAM
Question ID: QuestionText: 1 2 7	ALT.716_00.0 *Read if new Did you rec Surgery? Yes No Refused Don't know	200 Instrument Variable Name: cessary. eive any of the following medic	cal treatments for [fill2		

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Question ID:	ALT.717_	_00.000 Instrument Variable	Name: TP3_MTR4	QuestionnaireFileName	Adult CAM
QuestionText:	*Read	if necessary.			
	Did yo	u receive any of the followin	ng medical treatments fo	r [fill2: condition from TP3_CMST	·}?
	Physic	al therapy?			
1	Yes				
2	No				
7	Refus	ed			
9	Don't				
UniverseTex	t:	Sample adults 18+ who have	used third of top three	modalities and used modality to trea	at specific condition(s)
SkipInstruct	ions:	<1,2,R,D> [goto TP3_MTR5	5]		
Question ID: QuestionText:	*Read	00.000 Instrument Variable if necessary. u receive any of the followin	_	QuestionnaireFileName r [fill2: condition from TP3_CMST	
	Menta	l health counseling?			
1	Yes				
2	No				
- 7	Refus	ed			
9	Don't				
,	Doint	KIIOW			
UniverseTex	t:	Sample adults 18+ who have	used third of top three	modalities and used modality to trea	at specific condition(s)
SkipInstruct		<1,2,R,D> if TP3_MTR1=1 TP3_RS1]; else if self-care modality else [goto TP3_RS6]	—	3_MTR3=1 or TP3_MTR4=1 or TI [goto TP3_RS5];	P3_MTR5=1 [goto

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	Document Version Date: 30-May-13						
Question ID:	ALT.719_00.000 Instrument Variable Name: TP3_RS1 QuestionnaireFileName: Adult CAM						
QuestionText:	QuestionText: DURING THE PAST 12 MONTHS, did you {fill1: see a practitioner for/use} {fill2: modality} for any of these reasons?						
	These medical treatments were too expensive?						
1	Yes						
2	No						
7	Refused						
9	Don't know						
UniverseTex	xt: Sample adults 18+ who have used third of top three modalities and used treatments for specific condition(s)						
SkipInstruc	tions: <1,2,R,D> [goto TP3_RS2]						
Question ID:	ALT.720_00.000 Instrument Variable Name: TP3_RS2 QuestionnaireFileName: Adult CAM						
QuestionText:	*Read if necessary.						
	DURING THE PAST 12 MONTHS, did you {fill1: see a practitioner for/use} {fill2: modality} for any of these reasons?						
	[fill3: modality] combined with these medical treatments would help you?						
1	Yes						
2	No						
7	Refused						
9	Don't know						
UniverseTex	xt: Sample adults 18+ who have used third of top three modalities and used treatments for specific condition(s)						
SkipInstruc	tions: <1,2,R,D> [goto TP3_RS3]						

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	2012 NHIS Questionnaire - Adult CAM								
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Document Version Date: 30-May-13									
Question ID:	ALT.721_00.000 Instrument Variable Name: TP3_RS3 QuestionnaireFileName: Adult CAM								
QuestionText: *Read if necessary.									
	DURING THE PAST 12 MONTHS, did you {fill1: see a practitioner for/use} {fill2: modality} for any of these reasons?								
	These medical treatments do not work for the health problem you want to treat or prevent?								
1	Yes								
2	No								
7	Refused								
9	Don't know								
UniverseTex	xt: Sample adults 18+ who have used third of top three modalities and used treatments for specific condition(s)								
Question ID:	ALT.722_00.000Instrument Variable Name:TP3_RS4QuestionnaireFileName:Adult CAM								
QuestionText:	*Read if necessary.								
	DURING THE PAST 12 MONTHS, did you {fill1: see a practitioner for/use} {fill2: modality} for any of these reasons?								
	[fill3: Prescription medications/Over the counter medications/Prescription or over-the-counter medications] cause side effects?								
1	Yes								
2	No								
7	Refused								
9	NG1U5CU								
UniverseTex	Don't know								
	Don't know								

	2012 NHIS Questionnaire - Adult CAM							
	Adult Alternative Health/Complementary And Alternative Medicine							
	Document Version Date: 30-May-13							
Question ID:	ALT.723_00.000 Instrument Variable Name: TP3_RS5 QuestionnaireFileName: Adult CAM							
QuestionText: DURING THE PAST 12 MONTHS, did you {fill1: use modality} for any of these reasons?								
	You can do it on your own?							
1	Yes							
2	No							
7	Refused							
9	Don't know							
UniverseTex	xt: Sample adults 18+ who have used third of top three modalities and picked a self care modality							
Question ID:	ALT.724_00.000Instrument Variable Name:TP3_RS6QuestionnaireFileName:Adult CAM							
QuestionText:	DURING THE PAST 12 MONTHS, did you {fill1: see a practitioner for/use} {fill2: modality} for any of these reasons?							
	It is natural?							
1	Yes							
2	No							
7	Refused							
9	Don't know							
UniverseTex	xt: Sample adults 18+ who have used third of top three modalities							
SkipInstruc	etions: <1,2,R,D> [goto TP3_RS7]							

	2012 NHIS Questionnaire - Adult CAM Adult Alternative Health/Complementary And Alternative Medicine Document Version Date: 30-May-13								
Question ID: ALT.725_00.000 Instrument Variable Name: TP3_RS7 QuestionnaireFileName: Adult CAM									
QuestionText:	*Read if necessary.								
DURING THE PAST 12 MONTHS, did you {fill1: see a practitioner for/use} fill2: modality} for any of these reaso									
	It focuses on the whole person, mind, body, and spirit?								
1	Yes								
2	No								
7	Refused								
9	Don't know								
UniverseTex	xt: Sample adults 18+ who have used third of top three modalities								
Question ID:	ALT.726 00.000 Instrument Variable Name: TP3 RS8 QuestionnaireFileName: Adult CAM								
QuestionText:	ALT.726_00.000 Instrument Variable Name: TP3_RS8 QuestionnaireFileName: Adult CAM *Read if necessary.								
	DURING THE PAST 12 MONTHS, did you {fill1: see a practitioner for/use} {fill2: modality} for any of these reasons?								
	It treats the cause and not just the symptoms?								
1	Yes								
2	No								
7	Refused								
9	Don't know								
UniverseTex	xt: Sample adults 18+ who have used third of top three modalities								
SkipInstruc	etions: <1,2,R,D> [goto TP3_RS9]								

	2012 NHIS Questionnaire - Adult CAM							
	Adult Alternative Health/Complementary And Alternative Medicine							
	Document Version Date: 30-May-13							
Question ID:	ALT.727_00.000 Instrument Variable Name: TP3_RS9 QuestionnaireFileName: Adult CAM							
QuestionText:	stionText: *Read if necessary.							
	DURING THE PAST 12 MONTHS, did you {fill1: see a practitioner for/use} {fill2: modality} for any of these reasons?							
	It was part of your upbringing?							
1 2 7 9	Yes No Refused Don't know							
UniverseTex								
SkipInstruc	ctions: <1,2,R,D> [goto TP3_REC1]							
Question ID:	ALT.728_00.000 Instrument Variable Name: TP3_REC1 QuestionnaireFileName: Adult CAM							
QuestionText:	Did you {fill1: see a practitioner for/use} {fill2: modality} because it was recommended by any of the following people?							
	A medical doctor?							
1	Yes							
2	No							
7	Refused							
9	Don't know							

UniverseText: Sample adults 18+ who have used third of top three modalities

SkipInstructions: <1,2,R,D> [goto TP3_REC2]

	2012 NHIS Questionnaire - Adult CAM Adult Alternative Health/Complementary And Alternative Medicine						
	Document Version Date: 30-May-13						
Question ID:	ALT.729_00.000 Instrument Variable Name: TP3_REC2 QuestionnaireFileName: Adult CAM						
QuestionText: *Read if necessary.							
	Did you {fill1: see a practitioner for/use} {fill2: modality} because it was recommended by any of the following peop	ple?					
	A family member?						
1	Yes						
2	No						
7	Refused						
9	Don't know						
SkipInstruc	ons: <1,2,R,D> [goto TP3_REC3]						
Question ID:	ALT.730_00.000 Instrument Variable Name: TP3_REC3 QuestionnaireFileName: Adult CAM						
QuestionText:	*Read if necessary.						
	Did you {fill1: see a practitioner for/use} {fill2: modality} because it was recommended by any of the following peop	ple?					
	A friend?						
1	Yes						
2	No						
7	Refused						
9	Don't know						
UniverseTex	Sample adults 18+ who have used third of top three modalities						
SkipInstruc	ons: <1,2,R,D> [goto TP3_REC4]						

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Question ID:	ALT.731_00.000 Instrument Variable Name: TP3_REC4 QuestionnaireFileName: Adu	ılt CAM				
QuestionText:	*Read if necessary.					
	Did you {fill1: see a practitioner for/use} {fill2: modality} because it was recommended by any of the fo	ollowing people?				
	A co-worker?					
1	Yes					
2	No					
7	Refused					
9	Don't know					
SkipInstruc	ctions: <1,2,R,D> [goto TP3_IMP]					
Question ID:	ALT.732_00.000 Instrument Variable Name: TP3_IMP QuestionnaireFileName: Adu	ılt CAM				
QuestionText:	DURING THE PAST 12 MONTHS, how important was your use of [fill1: modality] in maintaining you being? Would you say	r health and well-				
	*Read categories below.					
1	Very important					
2	Somewhat important					
3	Slightly important					
4	Not at all important					
7	Refused					
9	Don't know					
UniverseTex	Ext: Sample adults 18+ who have used third of top three modalities					
SkipInstruc	ctions: <1-4,R,D> if PROVTYP=1-4 [goto TP3_DS1]; else [goto TP3_INF1]					

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Question ID:	ALT.733_	_00.000	Instrument Variable Name:	TP3_DS1	QuestionnaireFileName:	Adult CAM		
QuestionText:	ext: [fill1: Not including the practitioner you saw for] [fill2: modality] DURING THE PAST 12 MONTHS, did you let you personal health care provider know about your use of [fill3: modality]?							
	*If pra	ctitioner	for therapy is the same perso	on as personal hea	lth care provider, enter '1'.			
1	Yes							
2	No							
7	7 Refused							
9	Don't	know						
UniverseTex	xt:	Sample	adults 18+ who have used thi	rd of top three mo	odalities and has a personal health ca	re provider		
SkipInstruct			[goto TP3_INF1] o TP3_DS2]					
Question ID:	ALT.734_	_00.000	Instrument Variable Name:	TP3_DS2	QuestionnaireFileName:	Adult CAM		
QuestionText:	Why d	lidn't you	tell your personal health car	e provider about	your use of [fill1: modality]?			
	You w	ere not u	using it at the time?					
1	Yes							
2	No							
7	Refus	ed						
9	Don't	know						
UniverseTex			adults 18+ who have used thi ing therapy	rd of top three mo	odalities and did not tell their persona	l health care provider		
SkipInstructions:		<1,2,R,I	D> [goto TP3_DS3]					

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Question ID:	ALT.735_00	.000 Instrument Variable Name:	TP3_DS3	QuestionnaireFileName:	Adult CAM					
QuestionText:	*Read if 1	Read if necessary.								
	Why didn	't you tell your personal health c	are provider about y	our use of {fill1: modality}?						
	They disc	couraged use of it in the past?								
1	Yes									
2	No									
7	Refused									
9	Don't kn	ow								
UniverseTex		mple adults 18+ who have used to but using therapy	third of top three mo	dalities and did not tell their persona	al health care provider					
SkipInstruc	tions: <1.	,2,R,D> [goto TP3 DS4]								
•										
Question ID:	ALT.736 00	.000 Instrument Variable Name:	TP3 DS4	QuestionnaireFileName:	Adult CAM					
QuestionText:	*Read if I	necessary.								
	Why didn	't you tell your personal health c	are provider about y	our use of {fill1: modality}?						
	You were	worried they would discourage	it?							
1	Yes									
2	No									
7	Refused									
9	Don't kn									
	DOILT KIN	ow								
UniverseTex	xt: Sai		third of top three mod	dalities and did not tell their persona	al health care provider					

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Question ID:	ALT.737_00	000 Instrument Variable Name:	TP3_D85	QuestionnaireFileName:	Adult CAM					
QuestionText:	*Read if r	Read if necessary.								
	Why didn't you tell your personal health care provider about your use of {fill1: modality}?									
	You were	concerned about a negative reac	tion?							
1	Yes									
2	No									
7	Refused									
9	Don't kno	0W								
UniverseTex		nple adults 18+ who have used th out using therapy	hird of top three mo	dalities and did not tell their persona	al health care provider					
SkipInstruc	tions: <1,	2,R,D> [goto TP3 DS6]								
-										
Question ID:	ALT.738_00	000 Instrument Variable Name:	TP3_DS6	QuestionnaireFileName:	Adult CAM					
QuestionText:	*Read if r	necessary.								
	Why didn	't you tell your personal health ca	are provider about y	our use of {fill1: modality}?						
	You didn'	t think they needed to know?								
1	Yes									
2	No									
7	Refused									
9	Don't kno	OW								
UniverseTex		nple adults 18+ who have used the used the used the state of the state	hird of top three mo	dalities and did not tell their persona	al health care provider					
SkipInstruc	tions: <1,	2,R,D> [goto TP3_DS7]								

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Question ID:	ALT.739_	00.000 In	strument Variable Name:	TP3_DS7	QuestionnaireFileName:	Adult CAM				
QuestionText:	*Read i	Read if necessary.								
	Why di	dn't you te	ll your personal health car	re provider about	vour use of {fill1: modality}?					
	They di	dn't ask?								
1	Yes									
2	No									
7	Refuse	d								
9	Don't l	now								
UniverseTex		Sample adu bout using		ird of top three mo	dalities and did not tell their persona	l health care provider				
SkipInstruct	tions: <	<1,2,R,D>	[goto TP3 DS8]							
Question ID:	ALT.740_	00.000 In	strument Variable Name:	TP3_DS8	QuestionnaireFileName:	Adult CAM				
QuestionText:	*Read i	f necessar	у.							
	Why di	dn't you te	ll your personal health car	re provider about	your use of {fill1: modality}?					
	You do	n't think th	ey know as much about it	as you do?						
1	Yes									
2	No									
7	Refuse	d								
9	Don't l	now								
UniverseTex		ample adu bout using		ird of top three mo	dalities and did not tell their persona	l health care provider				
SkipInstruc	tions: <	<1,2,R,D>	[goto TP3_DS9]							

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Question ID:	ALT.741_	00.000	Instrument Variable Name:	TP3_D89	QuestionnaireFileName:	Adult CAM
QuestionText:	*Read	if neces				
	Why di	idn't you	a tell your personal health car	e provider about y	your use of {fill1: modality}?	
	They d	idn't giv	re you enough time to tell the	m?		
1	Yes					
2	No					
7	Refuse	ed				
9	Don't	know				
UniverseTex			adults 18+ who have used thi ing therapy	rd of top three mo	dalities and did not tell their persona	l health care provider
SkipInstruct	tions: «	<1,2,R,I	D> [goto TP3_INF1]			

Question ID:	ALT.760	_00.000	Instrument Va	riable Name:	TP3_INF1	QuestionnaireFileName:	Adult CAM
QuestionText:	DURI	NG THE	E PAST 12 MO	NTHS, did you	get information a	about [fill1: modality] from any of the	ne following sources?
	The In	ternet?					
1	Yes						
2	No						
7	Refus	ed					
9	Don't	know					
UniverseTex	xt:	Sample	adults 18+ who	have used thir	d of top three mo	dalities	
SkipInstruct	tions:	<1,2,R,1	D> [goto TP3_	INF2]			

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Question ID:	ALT.761_	00.000	Instrument Variable Name:	TP3_INF2	QuestionnaireFileName:	Adult CAM			
QuestionText:	*Read i	fneces	sary.						
DURING THE PAST 12 MONTHS, did you get information about [fill1: modality] from any of the fo									
	Books,	magazi	nes, or newspapers?						
1	Yes								
2	No								
7	Refuse	d							
9	Don't l	now							
UniverseTex	xt: S	ample	adults 18+ who have used the	rd of top three mod	dalities				
SkipInstruct		·1,2,1 (,1	D> [goto TP3_INF3]						
Question ID:	ALT.762_	00.000	Instrument Variable Name:	TP3_INF3	QuestionnaireFileName:	Adult CAM			
QuestionText:	*Read i	fneces	sary.						
	DURIN	G THE	PAST 12 MONTHS, did yo	u get information a	bout [fill1: modality] from any of t	he following sources?			
	DVDs,	videos,	or CDs?						
1	Yes								
2	No								
7	Refuse	d							
9									
UniverseTex	xt: S	ample	adults 18+ who have used this	rd of top three mod	dalities				
SkipInstructions:		(1,2,R,I	0> [goto TP3_INF4]						

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Question ID:	ALT.763_00.000 Instrument Variable Name: TP3_INF4 QuestionnaireFileName: Adult CAM								
QuestionText:	*Read if necessary.								
DURING THE PAST 12 MONTHS, did you get information about [fill1: modality] from any of the follow									
Television or radio?									
1	Yes								
2	No								
7	Refused								
9	Don't know								
UniverseTe	xt: Sample adults 18+ who have used third of top three modalities								
SkipInstruc	tions: <1,2,R,D> [goto TP3_INF5] ALT.764_00.000 Instrument Variable Name: TP3_INF5 QuestionnaireFileName: Adult CAM								
QuestionText:	*Read if necessary.								
	DURING THE PAST 12 MONTHS, did you get information about [fill1: modality] from any of the following sources?								
	Scientific articles?								
1	Yes								
2	No								
7	Refused								
9	Don't know								
UniverseTe	xt: Sample adults 18+ who have used third of top three modalities								
SkipInstruc	tions: <1,2,R,D> [goto TP3_INF6]								

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QuestionText:	*Read if necessary.									
	DURING THE PAST 12 MONTHS, did you get information about [fill1: modality] from any of the following sources?									
	Health food stores?									
1	Yes									
2	No									
7	Refused									
9	Don't know									
UniverseTex	Sample adults 18+ who have used th	ird of top three mod	alities							

SkipInstructions: <1,2,R,D> [goto next section]