* The sample adult person is [fill: ALIAS of Sample Adult]. The next questions must be answered by this person. Probe as necessary to determine the availability of [fill: ALIAS of Sample Adult].

* If refused enter CTRL-R

1 Physical or mental condition prohibits responding
2 Sample adult is able to respond
3 Unknown

This is the Sample Adult and (the Sample Adult section has not been started or completed).

* Proxy interviews can be done for sample adults that have a mental or physical condition that prevents them from responding for themselves.

Is a family member or caregiver that is knowledgeable about [fill: ALIAS of Sample Adult]'s health available?

1 Yes
2 No

The Sample Adult's physical or mental condition prohibits responding.
**Question ID:** AID.015_00.000  **Instrument Variable Name:** PROX2  **QuestionnaireFileName:** Sample Adult

**QuestionText:** *Ask if necessary.

What is this person's relationship to [fill: ALIAS of Sample Adult]?

1. Relative who lives in household
2. Relative who doesn't live in household
3. Other caregiver
4. Other
7. Refused
9. Don't know

**UniverseText:** Knowledgeable proxy is available.

**SkipInstructions:** <1-4> goto AIDVERF_S

---

**Question ID:** AID.020_00.000  **Instrument Variable Name:** PROX3  **QuestionnaireFileName:** Sample Adult

**QuestionText:** *Ask if necessary.

Can a callback with someone knowledgeable about [fill: ALIAS of Sample Adult]'s health be arranged?

1. Yes
2. No

**UniverseText:** Knowledgeable proxy is not available.

**SkipInstructions:** <1> goto callbk.ACALLBK1
<2> store '3' in ASTAT
   if recontact.RCIFLAG ne '1'
      goto recontact.RCI_BEGIN procedure
   else
      goto back.OUTCOMEB1 procedure
   endif
**Adult Identification**

**Document Version Date:** 29-May-14

---

**Question ID:** AID.030_00.000  **Instrument Variable Name:** AIDVERF_S  **QuestionnaireFileName:** Sample Adult

**Question Text:**

* Please verify the following information about the sample adult before proceeding:

I have recorded your sex as [fill: Sex of Sample Adult]. Is this correct?

* If respondent "refuses" or says "don't know", enter "1" for "yes".

1  Yes  
2  No

**Universe Text:** Sample Adult is not the person entered in HHRESP or RELRESP_A. Or PROX1 = 'Yes'.

**Skip Instructions:**<br> 1> goto AIDVERF_A  
  2> goto AIDSEX

---

**Question ID:** AID.040_00.000  **Instrument Variable Name:** AIDSEX  **QuestionnaireFileName:** Sample Adult

**Question Text:**

Are you Male or Female?

* If don’t know or refused enter your best guess of the person's sex.

1  Male  
2  Female

**Universe Text:** Respondent said his/her sex is not correct.

**Skip Instructions:**<br> 1,2> store AIDSEX in SEX  
  goto ERR_AIDSEX  
  reset AIDVERF_S  
  goto AIDVERF_S

**Hard Edit:**

ERR_AIDSEX

*The gender will now be changed to [fill: AIDSEX].

goto AIDVERF_S (as the default goto)
* Please verify the following information about the sample adult before proceeding:

I have recorded your age as [fill: Age of Sample Adult] old. Is this correct?

*If respondent "refuses" or says "don't know", enter "1" for "yes".

1  Yes
2  No

Sample Adult said his/her sex is correct.

SkipInstructions:  
<1> goto AIDVERF_D  
<2> goto AIDAGE

How old are you?

000-120  Age in years
997  Refused
999  Don't know

Respondent said his/her age is not correct

SkipInstructions:  
<0-120, Refused, Don't know>
  if AIDAGE = 'Refused' or AIDAGE = 'Don't know' or AIDAGE = AGE 
  reset AIDVERF_A  
  goto ERR_AIDAGE 
  else 
  store AIDAGE in AGE  
  goto AIDDOB_M

ERR_AIDAGE

*Age of [fill1: ALIAS of Sample Adult] remains [fill2: Age of Sample Adult] years old.

goto AIDVERF_A (whether suppressed or not)
* Please verify the following information about the sample adult before proceeding:

I have recorded your birthday as [fill: Birthday of Sample Adult]. Is this correct?

*If respondent "refuses" or says "don't know", enter "1" for "yes".

1  Yes
2  No

Sample Adult said his/her age is correct.

1 of 3 What is your birthday?

*Enter month of birth.

01 January
02 February
03 March
04 April
05 May
06 June
07 July
08 August
09 September
10 October
11 November
12 December
97 Refused
99 Don't know

Respondent said his/her date of birth is not correct or his/her age is not correct
2013 NHIS Questionnaire - Sample Adult
Adult Identification

Document Version Date: 29-May-14

Question ID: AID.060_02.000  Instrument Variable Name: AIDDDB_D
QuestionnaireFileName: Sample Adult

QuestionText: 2 of 3

*Enter day of birth.

01-31 Day of the month
97 Refused
99 Don't know

UniverseText: Respondent said his/her date of birth is not correct or his/her age is not correct

SkipInstructions: <01-31,Refused,Don't know> goto AIDDOB_Y

If days not valid, goto ERR_AIDDOB_D

HardEdit: ERR_AIDDOB_D

*[fill1: AIDDDB_D] is not a valid day for [fill2: AIDDOB_M].
*Please correct.
Adult Identification

Document Version Date: 29-May-14

Question ID: AID.060_03.000  Instrument Variable Name: AIDDOB_Y  QuestionnaireFileName: Sample Adult

QuestionText: 3 of 3

*Enter year of birth.

1880-2020 Year of birth

2013 NHIS Questionnaire - Sample Adult

Adult Identification

Page 7 of 9
Respondent said his/her date of birth is not correct or his/her age is not correct

01880-2020, Refused, Don't know> if AIDVERF_A = '2' (No) then reset AIDVERF_A to empty
goto AIDVERF_A
elseif AIDVERF_D = '2' (No) then reset AIDVERF_D to empty
goto AIDVERF_D
endif

(if year GT current year) or (if year = current year and month GT current month) or (if year = current year and
month = current month and day GT current day)
goto ERR1_AIDDOB_Y
endif

(if birth month = '02' and birth day = '29' and this is not a leap year)
goto ERR2_AIDDOB_Y
endif

(if AIDDOB_M = 'Ref' or 'DK') or (if AIDDOB_D = 'Ref' or 'DK') or (if AIDDOB_Y = 'Ref' or 'DK')
goto ERR3_AIDDOB_Y
else
store AIDDOB_M in DOBM
store AIDDOB_D in DOBD
store AIDDOB_Y in DOBY
if AIDVERF_A = '2' (No) then reset AIDVERF_A to empty
goto AIDVERF_A
elseif AIDVERF_D = '2' (No) then reset AIDVERF_D to empty
goto AIDVERF_D
endif
derend

Calculate age from AIDDOB_M, AIDDOB_D, and AIDDOB_Y.

if age from AIDDOB items is ne AGE and age from AIDDOB items is valid
reset AIDVERF_A or AIDVERF_D.
goto ERR4_AIDDOB_Y
endif

ERR1_AIDDOB_Y

*Future date invalid: [fill1: <AIDDOB_M> <AIDDOB_D>, <AIDDOB_Y>]
*Please correct.
goto AIDDOB_M (whether suppressed or not)

ERR2_AIDDOB_Y

*Not a valid day: [fill1: <AIDDOB_M> <AIDDOB_D>, <AIDDOB_Y>]
*Please correct.
goto AIDDOB_M (whether suppressed or not)

ERR3_AIDDOB_Y

*DOB of [fill2: ALIAS of Sample Adult] remains [fill3: <DOB_M>, <DOB_D>, <DOB_Y>]
goto AIDVERF_A (whether suppressed or not)

ERR4_AIDDOB_Y

* Data mismatched. Please fix Age or Birthday.
* If still cannot reconcile, enter 'Don't know' for year of birth.
* Please correct.
Earlier I recorded that in the last week you were
(Fill1: working for pay at a job or business.)
(Fill2: with a job or business but not at work.)
(Fill3: looking for work.)
(Fill4: working, but not for pay, at a family-owned job or business.)
(Fill5: not working at a job or business and not looking for work.)
Is that correct?
1 Yes
2 No
7 Refused
9 Don't know

What is your correct working status?
* Read answer categories.
1 Working for pay at a job or business
2 With a job or business but not at work
3 Looking for work
4 Working, but not for pay, at a family-owned job or business
5 Not working at a job or business and not looking for work
7 Refused
9 Don't know

Sample adults 18+ whose working status was incorrect or who were not the Family Respondent and with an answer of D or R to DOINGLW.
### Corrected Employment Status Last Week: (not displayed)

1. Working for pay at a job or business
2. With a job or business but not at work
3. Looking for work
4. Working, but not for pay, at a family-owned job or business
5. Not working at a job or business and not looking for work
6. Refused
7. Don't know

### Universetext:
Sample Adults 18+ and also the family section respondent and said Refused or Don't know to the working last week status question in the family section

### SkipInstructions:
```
if DOINGLW2 = Refused or Don't know then
    [goto EVERWRK]
endif
```

### Main Reason You Did Not Work Last Week:

1. Taking care of house or family
2. Going to school
3. Retired
4. On a planned vacation from work
5. On family or maternity leave
6. Temporarily unable to work for health reasons
7. Have job or contract and off-season
8. On layoff
9. Disabled
10. Other
11. Refused
12. Don't know

### Universetext:
Sample Adults 18+ whose corrected working status last week was not working at a job or business and not looking for work or with a job or business but not at work

### SkipInstructions:
```
<1-10,D,R> if WRKCOR = 2 then
    [goto WHOWRK]
else [goto EVERWRK]
```
### 2013 NHIS Questionnaire - Sample Adult

#### Adult Socio-Demographic

**Document Version Date:** 29-May-14

<table>
<thead>
<tr>
<th>Question ID:</th>
<th>ASD.066_00.000</th>
<th>Instrument Variable Name:</th>
<th>EVERWRK</th>
<th>QuestionnaireFileName:</th>
<th>Sample Adult</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>QuestionText:</strong></td>
<td>Have you ever held a job or worked at a business?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1</td>
<td>Yes</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>No</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>Refused</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>Don't know</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**UniverseText:** Sample adults 18+ who were NOT working at a job or business and not looking for work or looking for work last week or didn't know or refused to provide their employment status last week

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

---

<table>
<thead>
<tr>
<th>Question ID:</th>
<th>ASD.070_00.000</th>
<th>Instrument Variable Name:</th>
<th>WHOWRK</th>
<th>QuestionnaireFileName:</th>
<th>Sample Adult</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>QuestionText:</strong></td>
<td>? [F1]</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

(Fill1: For whom did you work at your MAIN job or business? (Name of company, business, organization or employer))

(Fill2: Thinking about the job you held the longest, for whom did you work? (Name of company, business, organization or employer))

(Fill3: Thinking about the job you held most recently, for whom did you work? (Name of company, business, organization or employer))

**Verbatim**

<table>
<thead>
<tr>
<th>Verbatim</th>
<th>Verbatim response</th>
</tr>
</thead>
<tbody>
<tr>
<td>7</td>
<td>Refused</td>
</tr>
<tr>
<td>9</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

**UniverseText:** Sample adults 18+ who were working last week, or who were with a job or business but not at work, or who were working but not for pay at a family-owned job or business, or who have ever worked

**SkipInstructions:** <90 char long,D,R> [goto KINDIND]
**2013 NHIS Questionnaire - Sample Adult**

**Adult Socio-Demographic**

**Document Version Date:** 29-May-14

---

**Question ID:** ASD.080_00.000  
**Instrument Variable Name:** KINDIND  
**QuestionnaireFileName:** Sample Adult

**QuestionText:** 
> ? [F1] 
> What kind of business or industry was this? (For example: TV and radio mgt., retail shoe store, State Department of Labor)

**Verbatim**  
- 7 Refused  
- 9 Don't know

**UniverseText:** 
Sample adults 18+ who were working last week, or who were with a job or business but not at work, or who were working but not for pay at a family-owned job or business, or who have ever worked

**SkipInstructions:** 
<90 char long,D,R> [goto KINDWRK]

---

**Question ID:** ASD.090_00.000  
**Instrument Variable Name:** KINDWRK  
**QuestionnaireFileName:** Sample Adult

**QuestionText:** 
> ? [F1] 
> What kind of work were you doing? (For example: farming, mail clerk, computer specialist.)

**Verbatim**  
- 7 Refused  
- 9 Don't know

**UniverseText:** 
Sample adults 18+ who were working last week, or who were with a job or business but not at work, or who were working but not for pay at a family-owned job or business, or who have ever worked

**SkipInstructions:** 
<90 char long,D,R> [goto IMPACT]

---

**Question ID:** ASD.100_00.000  
**Instrument Variable Name:** IMPACT  
**QuestionnaireFileName:** Sample Adult

**QuestionText:** 
> ? [F1] 
> What were your most important activities on this job or business? (For example: sells cars, keeps account books, operates printing press.)

**Verbatim**  
- 7 Refused  
- 9 Don't know

**UniverseText:** 
Sample adults 18+ who were working last week, or who were with a job or business but not at work, or who were working but not for pay at a family-owned job or business, or who have ever worked

**SkipInstructions:** 
<90 char long,D,R> [goto WRKCAT]
(book) A2  ? [F1]

[If DOINGLW2 eq <1,2,4>] Looking at the card, which of these best describes your current job or work situation? [Else if EVERWRK eq <1> and [WHYNOWK2 eq 03 or AGE ge 65] Looking at the card, which of these best describes the job you held for the longest time? [Else if EVERWRK eq <1> and WHYNOWK2 ne 03 and AGE lt 65] Looking at the card, which of these best describes the job you held most recently?

* Read answer choices if necessary.

1 Employee of a PRIVATE company for wages
2 A FEDERAL government employee
3 A STATE government employee
4 A LOCAL government employee
5 Self-employed in OWN business, professional practice or farm
6 Working WITHOUT PAY in a family-owned business or farm
7 Refused
9 Don't know

UniverseText: Sample adults 18+ who were working last week, or who were with a job or business but not at work, or who were working but not for pay at a family-owned job or business, or who have ever worked

SkipInstructions: <1-4,6,D,R> [goto LOCALLNO]
<5> [goto BUSINC]

Is this business incorporated?

1 Yes
2 No
7 Refused
9 Don't know

UniverseText: Sample adults 18+ who are self-employed

SkipInstructions: <1,2,D,R> [goto LOCALLNO]
Thinking about [If DOINGLW2 eq <1,2,4>] this MAIN job or business [Else if EVERWRK eq <1> and [WHYNOWK2 eq 03 or AGE ge 65] your last week at the job you held the longest [Else if EVERWRK eq <1> and WHYNOWK2 ne 03 and AGE lt 65] your last week at the job you held most recently how many people work(ed) at this location?

how many people (Fill4:work/Fill5: worked) at this location?

* "People" includes both FULL- and PART-time employees; "location" refers to the street address of the workplace.

01 1-9 employees
02 10-24 employees
03 25-49 employees
04 50-99 employees
05 100-249 employees
06 250-499 employees
07 500-999 employees
08 1000 employees or more
97 Refused
99 Don't know

Sample adults 18+ who were working last week, or who were with a job or business but not at work, or who were working but not for pay at a family-owned job or business, or who have ever worked
2013 NHIS Questionnaire - Sample Adult
Adult Socio-Demographic
Document Version Date: 29-May-14

Question ID: ASD.140_01.000 Instrument Variable Name: WRKLONGN QuestionnaireFileName: Sample Adult

QuestionText: 
1 of 2
About how long [If DOINGLW2 eq <1,2,4>] have you worked at this MAIN job or business? [Else if EVERWRK eq <1> and [WHYNOWK2 eq 03 or AGE ge 65] did you work at the job you held the longest? [Else if EVERWRK eq <1> and WHYNOWK2 ne 03 and AGE lt 65] did you work at the job you held most recently?

001-365 1-365
997 Refused
999 Don't know

UniverseText: Sample adults 18+ who were working last week, or who were with a job or business but not at work, or who were working but not for pay at a family-owned job or business, or who have ever worked

SkipInstructions: <1-365> [goto WRKLONGT] <D,R> if EVERWRK eq 1 and (WHYNOWK2 eq 03 or AGE GE 65) [goto HOURPD] ; Else if (EVERWRK eq 1 and WHYNOWK2 = 1,2,4-10, D,R," " and AGE lt 65) or (DOINGLW2 = 1,2,4) [goto WRKLONGH]

---

Question ID: ASD.140_02.000 Instrument Variable Name: WRKLONGT QuestionnaireFileName: Sample Adult

QuestionText: 2 of 2
* Enter time period.

1 Day(s)
2 Week(s)
3 Month(s)
4 Year(s)

UniverseText: Sample adults 18+ (who were working last week, or who were with a job or business but not at work, or who were working but not for pay at a family-owned job or business, or who have ever worked) and who gave a number entry in WRKLONGN

SkipInstructions: <4> if WRKLONGN gt AGE then [goto ERR_WRKLONGT] <1-4> if EVERWRK = 1 and (WHYNOWK2 = 3 or AGE ge 65) then [goto HOURPD] else if (EVERWRK eq 1 and WHYNOWK2 = 1,2,4-10, D,R," " and AGE lt 65) or (DOINGLW2 = 1,2,4) [goto WRKLONGH]

Hard Edit: ERR_WRKLONGT
* Number of years is greater than age.
* Please correct.
Question ID: ASD.146_00.000  Instrument Variable Name: WRKLONGH  QuestionnaireFileName: Sample Adult

QuestionText: ? [F1]  
[If DOINGLW2 eq 1,2,4] Is this MAIN job or business the job you have held for the longest? [Else if EVERWRK eq 1 and WHYNOWK2 ne 03 and AGE lt 65] Was your most recently held job also the job you held the longest?  
1  Yes  
2  No  
7  Refused  
9  Don't know

UniverseText: Sample adults 18+ (who were working last week, or who were with a job or business but not at work, or who were working but not for pay at a family-owned job or business,) or (who have ever worked and are not retired and are less than 65 years of age.)

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

Question ID: ASD.150_00.000  Instrument Variable Name: HOURPD  QuestionnaireFileName: Sample Adult

QuestionText:  
[If DOINGLW2 eq <1,2,4>] Are you paid by the hour at this MAIN job or business? [Else if EVERWRK eq <1> and [WHYNOWK2 eq 03 or AGE ge 65] Were you paid by the hour on the job you held the longest? [Else if EVERWRK eq <1> and WHYNOWK2 ne 03 and AGE lt 65] Were you paid by the hour on the job you held most recently?  
1  Yes  
2  No  
7  Refused  
9  Don't know

UniverseText: Sample adults 18+ who were working last week, or who were with a job or business but not at work, or who were working but not for pay at a family-owned job or business, or who have ever worked

SkipInstructions: <1,2,D,R> [goto PDSICK]
### Question ID: ASD.160_00.000  Instrument Variable Name: PDSICK  QuestionnaireFileName: Sample Adult

**QuestionText:**

\[\text{[If DOINGLW2 eq } <1,2,4>] \text{ Do you have paid sick leave on this MAIN job or business? [Else if EVERWRK eq } <1> \text{ and [WHYNOWK2 eq 03 or AGE ge 65]} \text{ Did you ever have paid sick leave on the job you held the longest?][Else if EVERWRK eq } <1> \text{ and WHYNOWK2 ne 03 and AGE lt 65]} \text{ Did you ever have paid sick leave on the job you held most recently?}\]

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

**UniverseText:** Sample adults 18+ who were working last week, or who were with a job or business but not at work, or who were working but not for pay at a family-owned job or business, or who have ever worked

**SkipInstructions:**

\(<1,2,D,R> \text{ if DOINGLW2 = 1,2,4 then [goto ONEJOB]; else if DOINGLW2=3,5 then [goto WRKLYR2]; else if DOINGLW2=D, R then [goto next section]}

### Question ID: ASD.170_00.000  Instrument Variable Name: ONEJOB  QuestionnaireFileName: Sample Adult

**QuestionText:**

Do you have more than one job or business?

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

**UniverseText:** Sample adults 18+ who were working last week, or who were with a job or business but not at work, or who were working but not for pay at a family-owned job or business

**SkipInstructions:**

\(<1,2,D,R> \text{ [goto next section]}

---
2013 NHIS Questionnaire - Sample Adult
Adult Socio-Demographic
Document Version Date: 29-May-14

Question ID: ASD.210_00.000  Instrument Variable Name: WRKLYR2  QuestionnaireFileName: Sample Adult

QuestionText: Although you did not work last week, did you have a job or business at any time in the PAST 12 MONTHS?

0 Had job last week
1 Yes
2 No
7 Refused
9 Don't know

UniverseText: Sample adults 18+ who were looking for work or who were not working at a job or business AND who were not looking for work in the last week

SkipInstructions: <0-2,D,R> [goto next section]
Now I am going to ask you about certain medical conditions. Have you EVER been told by a doctor or other health professional that you had... Hypertension, also called high blood pressure?

1 Yes
2 No
7 Refused
9 Don't know

Sample adults 18+

Were you told on two or more DIFFERENT visits that you had hypertension, also called high blood pressure?

1 Yes
2 No
7 Refused
9 Don't know

Sample adults 18+ who were told they had hypertension

DURING THE PAST 12 MONTHS, have you had hypertension, also called high blood pressure?

*Enter '1' if respondent is taking medication to control his/her high blood pressure.

1 Yes
2 No
7 Refused
9 Don't know

Sample adults 18+ who were ever told they had hypertension (2+ visits)
2013 NHIS Questionnaire - Sample Adult

Adult Conditions

Document Version Date: 29-May-14

Question ID: ACN.025_00.010  Instrument Variable Name: CHLYR  QuestionnaireFileName: Sample Adult

QuestionText: DURING THE PAST 12 MONTHS, have you had high cholesterol?

*Enter ‘1’ if respondent is taking medication to control his/her high cholesterol.

1 Yes
2 No
7 Refused
9 Don't know

UniverseText: Sample adults 18+

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

Question ID: ACN.031_01.000  Instrument Variable Name: CHDEV  QuestionnaireFileName: Sample Adult

QuestionText: Have you EVER been told by a doctor or other health professional that you had

... Coronary heart disease?

1 Yes
2 No
7 Refused
9 Don't know

UniverseText: Sample adults 18+

SkipInstructions: <1,2,R,D> [goto ANGEV]
* Read if necessary:

Have you EVER been told by a doctor or other health professional that you had

... Angina, also called angina pectoris?

1  Yes
2  No
7  Refused
9  Don't know

UniverseText: Sample adults 18+

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

* Read if necessary:

Have you EVER been told by a doctor or other health professional that you had

... A heart attack (also called myocardial infarction)?

1  Yes
2  No
7  Refused
9  Don't know

UniverseText: Sample adults 18+

SkipInstructions: <1,2,R,D> [goto HRTEV]
2013 NHIS Questionnaire - Sample Adult

Adult Conditions

Document Version Date: 29-May-14

<table>
<thead>
<tr>
<th>Question ID:</th>
<th>ACN.031_04.000</th>
<th>Instrument Variable Name:</th>
<th>HRTEV</th>
<th>QuestionnaireFileName:</th>
<th>Sample Adult</th>
</tr>
</thead>
<tbody>
<tr>
<td>QuestionText:</td>
<td>? [F1]</td>
<td>* Read if necessary:</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Have you EVER been told by a doctor or other health professional that you had</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>...Any kind of heart condition or heart disease (other than the ones I just asked about)?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1</td>
<td>Yes</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>No</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>Refused</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>Don't know</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>UniverseText:</td>
<td>Sample adults 18+</td>
<td></td>
<td></td>
<td></td>
<td></td>
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SkipInstructions: <1,2,R,D> [goto STREV]

<table>
<thead>
<tr>
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<th>ACN.031_05.000</th>
<th>Instrument Variable Name:</th>
<th>STREV</th>
<th>QuestionnaireFileName:</th>
<th>Sample Adult</th>
</tr>
</thead>
<tbody>
<tr>
<td>QuestionText:</td>
<td>* Read if necessary:</td>
<td>Have you EVER been told by a doctor or other health professional that you had</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>...A stroke?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1</td>
<td>Yes</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>No</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>Refused</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>Don't know</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>UniverseText:</td>
<td>Sample adults 18+</td>
<td></td>
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SkipInstructions: <1,2,R,D> [goto EPHEV]
### 2013 NHIS Questionnaire - Sample Adult

#### Adult Conditions

**Document Version Date:** 29-May-14

<table>
<thead>
<tr>
<th>Question ID: ACN.031_06.000</th>
<th>Instrument Variable Name: EPHEV</th>
<th>QuestionnaireFileName: Sample Adult</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>QuestionText:</strong></td>
<td>* Read if necessary:</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Have you EVER been told by a doctor or other health professional that you had</td>
<td></td>
</tr>
<tr>
<td></td>
<td>...Emphysema?</td>
<td></td>
</tr>
<tr>
<td>1</td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>Refused</td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>Don't know</td>
<td></td>
</tr>
</tbody>
</table>

**UniverseText:** Sample adults 18+

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

---

<table>
<thead>
<tr>
<th>Question ID: ACN.035_00.000</th>
<th>Instrument Variable Name: COPDEV</th>
<th>QuestionnaireFileName: Sample Adult</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>QuestionText:</strong></td>
<td>Have you EVER been told by a doctor or other health professional that you had chronic obstructive pulmonary disease, also called COPD?</td>
<td></td>
</tr>
<tr>
<td>1</td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>Refused</td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>Don't know</td>
<td></td>
</tr>
</tbody>
</table>

**UniverseText:** Sample adults 18+

**SkipInstructions:** <1,2,R,D> [if AGE GE 40, goto ASPMDMED; else goto AASMEV]
Has a doctor or other health professional EVER told you to take a low-dose aspirin each day to prevent or control heart disease?

* If the respondent volunteers they have been told to take an aspirin every other day or “regularly” for these reasons, enter 1 for “yes.”

1 Yes
2 No
7 Refused
9 Don’t know

Are you NOW following this advice?

* If the respondent provides an answer such as “sometimes,” “occasionally,” or “from time to time,” enter 1 for “yes.”

1 Yes
2 No
7 Refused
9 Don’t know
2013 NHIS Questionnaire - Sample Adult
Adult Conditions
Document Version Date: 29-May-14

Question ID: ACN.040_00.030  Instrument Variable Name: ASPMDMED  QuestionnaireFileName: Sample Adult

QuestionText: Did a doctor or other health professional advise you to stop taking a low-dose aspirin every day?

1  Yes
2  No
7  Refused
9  Don't know

UniverseText: Sample adults 40+ who have ever been advised to take aspirin every day, but are not currently following that advice

SkipInstructions: <1,2,R,D> goto AASMEV

---

Question ID: ACN.040_00.040  Instrument Variable Name: ASPONOWN  QuestionnaireFileName: Sample Adult

QuestionText: On your own, are you now taking a low-dose aspirin each day to prevent or control heart disease?

* If the respondent volunteers they are taking an aspirin every other day or “regularly” for these reasons, enter 1 for “yes.”

1  Yes
2  No
7  Refused
9  Don't know

UniverseText: Sample adults 40+ who have not been advised to take aspirin every day or Ref/DK if they have been advised to take aspirin every day

SkipInstructions: <1,2,R,D> goto AASMEV

---

Question ID: ACN.080_00.000  Instrument Variable Name: AASMEV  QuestionnaireFileName: Sample Adult

QuestionText: ? [F1]

Have you EVER been told by a doctor or other health professional that you had asthma?

1  Yes
2  No
7  Refused
9  Don't know

UniverseText: Sample adults 18+

SkipInstructions: <1> [goto AASSTILL]  
<2,R,D> [goto ULCEV]
**2013 NHIS Questionnaire - Sample Adult**

**Adult Conditions**

*Document Version Date: 29-May-14*

<table>
<thead>
<tr>
<th>Question ID: ACN.085_00.000</th>
<th>Instrument Variable Name: AASSTILL</th>
<th>QuestionnaireFileName: Sample Adult</th>
</tr>
</thead>
<tbody>
<tr>
<td>QuestionText: ? [F1]</td>
<td>Do you still have asthma?</td>
<td></td>
</tr>
<tr>
<td>1 Yes</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2 No</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7 Refused</td>
<td></td>
<td></td>
</tr>
<tr>
<td>9 Don't know</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>UniverseText:</strong></td>
<td>Sample adults 18+ who were ever told they have asthma</td>
<td></td>
</tr>
<tr>
<td><strong>SkipInstructions:</strong></td>
<td>&lt;1,2,R,D&gt; [go to AASMYR]</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Question ID: ACN.090_00.000</th>
<th>Instrument Variable Name: AASMYR</th>
<th>QuestionnaireFileName: Sample Adult</th>
</tr>
</thead>
<tbody>
<tr>
<td>QuestionText: ? [F1]</td>
<td>DURING THE PAST 12 MONTHS, have you had an episode of asthma or an asthma attack?</td>
<td></td>
</tr>
<tr>
<td>1 Yes</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2 No</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7 Refused</td>
<td></td>
<td></td>
</tr>
<tr>
<td>9 Don't know</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>UniverseText:</strong></td>
<td>Sample adults 18+ who were ever told they had asthma</td>
<td></td>
</tr>
<tr>
<td><strong>SkipInstructions:</strong></td>
<td>&lt;1,2,R,D&gt; [goto AASMERYR]</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Question ID: ACN.100_00.000</th>
<th>Instrument Variable Name: AASMERYR</th>
<th>QuestionnaireFileName: Sample Adult</th>
</tr>
</thead>
<tbody>
<tr>
<td>QuestionText: ? [F1]</td>
<td>DURING THE PAST 12 MONTHS, have you had to visit an emergency room or urgent care center because of asthma?</td>
<td></td>
</tr>
<tr>
<td>1 Yes</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2 No</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7 Refused</td>
<td></td>
<td></td>
</tr>
<tr>
<td>9 Don't know</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>UniverseText:</strong></td>
<td>Sample adults 18+ who were ever told they had asthma</td>
<td></td>
</tr>
<tr>
<td><strong>SkipInstructions:</strong></td>
<td>&lt;1,2,R,D&gt; if AASSTILL=1 or AASMYR=1 [go to AASMHSP]; else if AASSTILL=2,R,D and AASMYR=2,R,D [go to ULCEV]</td>
<td></td>
</tr>
</tbody>
</table>
DURING THE PAST 12 MONTHS, have you stayed overnight in a hospital because of asthma?

*If in hospital for asthma AND other reasons, enter '1'.

1 Yes
2 No
7 Refused
9 Don't know

Sample adults 18+ who still have asthma or who had asthma episode/attack in past 12 months

DURING THE PAST 12 MONTHS, HOW MANY DAYS were you UNABLE to work/get work done around the house] because of your asthma?

*Enter '0' for none.

*Enter ‘996’ if respondent is unable to do this activity.

000 None
001-365 1-365 days
996 Unable to do this activity
997 Refused
999 Don't know

Sample adults 18+ who still have asthma or who had asthma episode/attack in past 12 months

if AWZMSWK = 366-994 then display ERR2_AWZMSWK:
"366-994 days not allowed in this field.
*Please correct."

if AWZMSWK >100 and ne 996 then display ERR1_AWZMSWK:
"AWZMSWK is an unusually large number;
*Please verify."
Now I'm going to ask you about two different kinds of ASTHMA medicine. One prevents symptoms over the long term. The other is for quick relief of symptoms during an attack or episode. This quick relief medicine is breathed in through your mouth using a canister inhaler or a disk inhaler.

DURING THE PAST 3 MONTHS, have you used the kind of PRESCRIPTION asthma inhaler that gives QUICK relief from asthma symptoms during an attack? Include only medications prescribed by a health care professional.

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

Sample adults 18+ who still have asthma or who had asthma episode/attack in past 12 months

When you take your rescue prescription asthma medication, would you say that you most often use an inhaler and/or disk, or do you most often use a nebulizer?

*Read if necessary: Both an inhaler or a disk inhaler are very portable canisters or devices used to inhale medication in one or two breaths. A nebulizer is a machine that turns liquid medication into a mist that you inhale into the lungs over a few minutes

1. Inhaler or disk
2. Nebulizer
7. Refused
9. Don't know

Sample adults 18+ who have used a quick relief prescription asthma inhaler in the past three months
**Question ID:** ACN.100_00.070  **Instrument Variable Name:** AASMCAN  **QuestionnaireFileName:** Sample Adult

**QuestionText:** DURING THE PAST 3 MONTHS, did you use more than three canisters or disks of this type of quick relief inhaler?

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

**UniverseText:** Sample adults 18+ who have used a prescription asthma inhaler/disk most often in the past three months

**SkipInstructions:** <1,2,R,D> [go to AASMDTP2]

---

**Question ID:** ACN.100_00.090  **Instrument Variable Name:** AASMDTP2  **QuestionnaireFileName:** Sample Adult

**QuestionText:** The second kind of asthma medication is different from inhalers used for quick relief. It is the preventive kind that is used to protect your lungs and keep you from having attacks. It can be either a pill or an inhaler.

Are you NOW taking a preventive asthma medication every day or almost every day, less often, or never?

1. Every day or almost every day
2. Less often
3. Never
7. Refused
9. Don't know

**UniverseText:** Sample adults 18+ who still have asthma or who had asthma episode/attack in past 12 months

**SkipInstructions:** <1-3,R,D> [go to AASWMP]
Question ID: ACN.100_00.100  Instrument Variable Name: AASWMP  QuestionnaireFileName: Sample Adult

QuestionText: An asthma action plan is a printed form with specific instructions based on your asthma that tells when to change the amount or type of medicine, when to call the doctor for advice, and when to go to the emergency room. Has a doctor or other health professional EVER given you an asthma action plan?

*Read if necessary: Include nurses and asthma educators.

1 Yes
2 No
7 Refused
9 Don't know

UniverseText: Sample adults 18+ who still have asthma or who had asthma episode/attack in past 12 months

SkipInstructions: <1,2,R,D> [go to AASCLASS]

---

Question ID: ACN.100_00.110  Instrument Variable Name: AASCLASS  QuestionnaireFileName: Sample Adult

QuestionText: Have you ever taken a course or class on how to manage asthma yourself?

1 Yes
2 No
7 Refused
9 Don't know

UniverseText: Sample adults 18+ who still have asthma or who had asthma episode/attack in past 12 months

SkipInstructions: <1,2,R,D> [go to AAS_REC]

---

Question ID: ACN.105_01.010  Instrument Variable Name: AAS_REC  QuestionnaireFileName: Sample Adult

QuestionText: Has a doctor or other health professional EVER taught you ...

...how to recognize early signs or symptoms of an asthma episode?

1 Yes
2 No
7 Refused
9 Don't know

UniverseText: Sample adults 18+ who still have asthma or who had asthma episode/attack in past 12 months

SkipInstructions: <1,2,R,D> [go to AAS_RES]
2013 NHIS Questionnaire - Sample Adult
Adult Conditions
Document Version Date: 29-May-14

Question ID:  ACN.105_02.020  Instrument Variable Name:  AAS_RES  QuestionnaireFileName:  Sample Adult

QuestionText:  *Read if necessary: Has a doctor or other health professional EVER taught you
...how to respond to episodes of asthma?

1  Yes
2  No
7  Refused
9  Don't know

UniverseText:  Sample adults 18+ who still have asthma or who had asthma episode/attack in past 12 months

SkipInstructions:  <1,2,R,D> [go to AAS_MON]

Question ID:  ACN.105_03.030  Instrument Variable Name:  AAS_MON  QuestionnaireFileName:  Sample Adult

QuestionText:  *Read if necessary: Has a doctor or other health professional EVER taught you
...how to monitor peak flow for daily therapy?

1  Yes
2  No
7  Refused
9  Don't know

UniverseText:  Sample adults 18+ who still have asthma or who had asthma episode/attack in past 12 months

SkipInstructions:  <1,2,R,D> [go to AAPENVLN]

Question ID:  ACN.107_00.010  Instrument Variable Name:  AAPENVLN  QuestionnaireFileName:  Sample Adult

QuestionText:  Has a doctor or other health professional EVER advised you to change things in your home, school, or work environment
to improve your asthma?

1  Yes
2  No
3  Was told no changes needed
7  Refused
9  Don't know

UniverseText:  Sample adults 18+ who still have asthma or who had asthma episode/attack in past 12 months

SkipInstructions:  <1-3,R,D> [go to AAROUTIN]
**Question ID:** ACN.107_00.020  
**Instrument Variable Name:** AAROUTIN  
**QuestionnaireFileName:** Sample Adult

**QuestionText:**

DURING THE PAST 12 MONTHS, how many times did you see a doctor or other health professional for a routine checkup for your asthma? Please do not include emergency room visits, visits to urgent care centers, or other visits for acute care for an asthma episode or attack.

*Enter '0' for none.

000 None  
001-365 1-365 times  
997 Refused  
999 Don’t know

**UniverseText:** Sample adults 18+ who still have asthma or who had asthma episode/attack in past 12 months

**SkipInstructions:** 
<0-50,R,D> [go to AASYMPT]  
<51-365> [goto ERR_AAROUTIN]

**Soft Edit:**

[fill4: AAROUTIN] is an unusually large number.  
* Please verify.

---

**Question ID:** ACN.107_00.030  
**Instrument Variable Name:** AASYMPT  
**QuestionnaireFileName:** Sample Adult

**QuestionText:**

The next three questions are about the last time you saw a doctor or other health care professional for routine care or for any reason.

At your last visit, did your doctor or other health professional ask HOW OFTEN you had asthma symptoms?

....you had asthma symptoms?

1 Yes  
2 No  
7 Refused  
9 Don’t know

**UniverseText:** Sample adults 18+ who still have asthma or who had asthma episode/attack in past 12 months

**SkipInstructions:** <1,2,R,D> [go to AARESCUE];
<table>
<thead>
<tr>
<th>Question ID:</th>
<th>ACN.107_00.040</th>
<th>Instrument Variable Name:</th>
<th>AARESCUE</th>
<th>QuestionnaireFileName:</th>
<th>Sample Adult</th>
</tr>
</thead>
<tbody>
<tr>
<td>QuestionText:</td>
<td>At your last visit, did your doctor or other health professional ask HOW OFTEN</td>
<td>.....you used a quick relief inhaler?</td>
<td></td>
<td>1</td>
<td>Yes</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>2</td>
<td>No</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>7</td>
<td>Refused</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>9</td>
<td>Don’t know</td>
</tr>
<tr>
<td>UniverseText:</td>
<td>Sample adults 18+ who still have asthma or who had asthma episode/attack in past 12 months</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>SkipInstructions:</td>
<td>&lt;1,2,R,D&gt; [go to AAACTLIM]</td>
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<th>ACN.107_00.050</th>
<th>Instrument Variable Name:</th>
<th>AAACTLIM</th>
<th>QuestionnaireFileName:</th>
<th>Sample Adult</th>
</tr>
</thead>
<tbody>
<tr>
<td>QuestionText:</td>
<td>At your last visit, did your doctor or other health professional ask HOW OFTEN</td>
<td>asthma symptoms limited your daily activities?</td>
<td></td>
<td>1</td>
<td>Yes</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>2</td>
<td>No</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>7</td>
<td>Refused</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>9</td>
<td>Don’t know</td>
</tr>
<tr>
<td>UniverseText:</td>
<td>Sample adults 18+ who still have asthma or who had asthma episode/attack in past 12 months</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>SkipInstructions:</td>
<td>&lt;1,2,R,D&gt; [goto ULCEV]</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Question ID: ACN.110_00.000  Instrument Variable Name: ULCEV  QuestionnaireFileName: Sample Adult

QuestionText: Have you EVER been told by a doctor or other health professional that you had

...An ulcer

This could be a stomach, duodenal or peptic ulcer.

1  Yes
2  No
7  Refused
9  Don't know

UniverseText: Sample adults 18+

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

---

Question ID: ACN.120_00.000  Instrument Variable Name: ULCYR  QuestionnaireFileName: Sample Adult

QuestionText: DURING THE PAST 12 MONTHS have you had

... An ulcer?

1  Yes
2  No
7  Refused
9  Don't know

UniverseText: Sample adults 18+ who were ever told they had an ulcer

SkipInstructions: <1,2,R,D> [goto CANEV]
Have you EVER been told by a doctor or other health professional that you had
Cancer or a malignancy of any kind?

1  Yes
2  No
7  Refused
9  Don’t know

Sample adults 18+

<1> [goto CANKIND]
<2,R,D> [goto DIBEV]
What kind of cancer was it?

* Enter code for the first kind of cancer.

01 Bladder
02 Blood
03 Bone
04 Brain
05 Breast
06 Cervix
07 Colon
08 Esophagus
09 Gallbladder
10 Kidney
11 Larynx-windpipe
12 Leukemia
13 Liver
14 Lung
15 Lymphoma
16 Melanoma
17 Mouth/tongue/lip
18 Ovary
19 Pancreas
20 Prostate
21 Rectum
22 Skin (non-melanoma)
23 Skin (DK what kind)
24 Soft tissue (muscle or fat)
25 Stomach
26 Testis
27 Throat - pharynx
28 Thyroid
29 Uterus
30 Other
97 Refused
99 Don’t know
UniverseText: Sample adults 18+ who were ever told they had cancer

SkipInstructions: <1-30,R,D>[goto CANAGE_1]

  IF SEX=1 (MALE) and No. <6,18,29> selected goto ERR1_CANKIND_1

  IF SEX=2 (FEMALE) and No. <20,26> selected goto ERR2_CANKIND_1

Hard Edit: ERR1_CANKIND_1

  * Code 6 or 18 or 29 is unavailable for males.

ERR2_CANKIND_1

  * Code 20 or 26 is unavailable for females.
* Enter code for the second kind of cancer.

* Enter '96' for no more.

01  Bladder
02  Blood
03  Bone
04  Brain
05  Breast
06  Cervix
07  Colon
08  Esophagus
09  Gallbladder
10  Kidney
11  Larynx-windpipe
12  Leukemia
13  Liver
14  Lung
15  Lymphoma
16  Melanoma
17  Mouth/tongue/lip
18  Ovary
19  Pancreas
20  Prostate
21  Rectum
22  Skin (non-melanoma)
23  Skin (DK what kind)
24  Soft tissue (muscle or fat)
25  Stomach
26  Testis
27  Throat - pharynx
28  Thyroid
29  Uterus
30  Other
96  No more
97  Refused
99  Don't know
UniverseText: Sample adults 18+ who either provided an age for one kind of cancer or didn't know how old they were when first diagnosed with that kind of cancer or else refused to provide an age but had not refused to answer CANKIND_1.

SkipInstructions: <1-30,R,D~[goto CANAGE_2]
<96> goto DIBEV
IF SEX=1 (MALE) and No. <6,18,29> selected goto ERR1_CANKIND_2
IF SEX=2 (FEMALE) and No. <20,26> selected goto ERR2_CANKIND_2

Hard Edit: ERR1_CANKIND_2
* Code 6 or 18 or 29 is unavailable for males.

ERR2_CANKIND_2
* Code 20 or 26 is unavailable for females.
* Enter code for the third kind of cancer.

* Enter '96' for no more.

01 Bladder
02 Blood
03 Bone
04 Brain
05 Breast
06 Cervix
07 Colon
08 Esophagus
09 Gallbladder
10 Kidney
11 Larynx-windpipe
12 Leukemia
13 Liver
14 Lung
15 Lymphoma
16 Melanoma
17 Mouth/tongue/lip
18 Ovary
19 Pancreas
20 Prostate
21 Rectum
22 Skin (non-melanoma)
23 Skin (DK what kind)
24 Soft tissue (muscle or fat)
25 Stomach
26 Testis
27 Throat - pharynx
28 Thyroid
29 Uterus
30 Other
96 No more
97 Refused
99 Don't know
UniverseText: Sample adults 18+ who either provided an age for a second kind of cancer or didn't know how old they were when first diagnosed that kind of cancer or else refused to provide an age but had not refused to answer CANKIND_2.

SkipInstructions: <1-30,R,D>[goto CANAGE_3] <96> [goto DIBEV]

IF SEX=1 (MALE) and No. <6,18,29> selected goto ERR1_CANKIND_3
IF SEX=2 (FEMALE) and No. <20,26> selected goto ERR2_CANKIND_3

Hard Edit:

ERR1_CANKIND_3
* Code 6 or 18 or 29 is unavailable for males.

ERR2_CANKIND_3
* Code 20 or 26 is unavailable for females.

Question ID: ACN.140_00.004 Instrument Variable Name: CANKIND_4 QuestionnaireFileName: Sample Adult

QuestionText: * Enter '95' if respondent offers more than 3 kinds of cancer.
* Enter '96' for no more.

95 More than three kinds
96 No more

UniverseText: Sample adults 18+ who either provided an age for a third kind of cancer or didn't know how old they were when first diagnosed that kind of cancer or else refused to provide an age but had not refused to answer CANKIND_3

SkipInstructions: <95,96> [goto DIBEV]
**Question ID:** ACN.150_00.001  
**Instrument Variable Name:** CANAGE_1  
**QuestionnaireFileName:** Sample Adult

**QuestionText:**  
? [F1]  
How old were you when [Fill1: CANKIND_1 / Fill2: this cancer] was first diagnosed?

<table>
<thead>
<tr>
<th>Value</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>001-100</td>
<td>1-100 years</td>
</tr>
<tr>
<td>997</td>
<td>Refused</td>
</tr>
<tr>
<td>999</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

**UniverseText:**  
Sample adults 18+ who were ever told they had cancer

**SkipInstructions:**  
<1-100, D> goto CANKIND_2  
<R> and <R> at CANKIND_1 [goto DIBEV]  
<R> and CANKIND_1 NE <R> [goto CANKIND_2]  
If number in CANAGE_1 greater than person years old (AGE) goto ERR_CANAGE_1

**Hard Edit:**  
ERR_CANAGE_1  
* [Fill2: CANAGE_1] years old is older than age[fill3: AGE].  
* Please correct.

---

**Question ID:** ACN.150_00.002  
**Instrument Variable Name:** CANAGE_2  
**QuestionnaireFileName:** Sample Adult

**QuestionText:**  
? [F1]  
How old were you when [Fill1: CANKIND_2/Fill2: this cancer] was first diagnosed?

<table>
<thead>
<tr>
<th>Value</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>001-100</td>
<td>1-100 years</td>
</tr>
<tr>
<td>997</td>
<td>Refused</td>
</tr>
<tr>
<td>999</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

**UniverseText:**  
Sample adults 18+ who were ever told they had cancer

**SkipInstructions:**  
<1-100, D> goto CANKIND_3  
<R> and <R> at CANKIND_2 [goto DIBEV]  
<R> and CANKIND_2 NE <R> [goto CANKIND_3]  
If number in CANAGE_2 greater than person years old (AGE) goto ERR_CANAGE_2

**Hard Edit:**  
ERR_CANAGE_2  
* [Fill2: CANAGE_2] years old is older than your age[fill3: AGE].  
* Please correct.
### Question 1: CANAGE_3

**Question ID:** ACN.150_00.003  
**Instrument Variable Name:** CANAGE_3  
**QuestionnaireFileName:** Sample Adult

**Question Text:**
> ? [F1]  
> How old were you when [Fill1: CANKIND_3/Fill2: this cancer] was first diagnosed?

<table>
<thead>
<tr>
<th>Value</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>001-100</td>
<td>1-100 years</td>
</tr>
<tr>
<td>997</td>
<td>Refused</td>
</tr>
<tr>
<td>999</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

**UniverseText:** Sample adults 18+ who were ever told they had cancer

**Skip Instructions:**

- `<1-100, D>` goto CANKIND_4
- `<R>` and `<R>` at CANKIND_3 [goto DIBEV]
- `<R>` and CANKIND_3 NE `<R>` [goto CANKIND_4]

If number in CANAGE_3 greater than person years old (AGE) goto ERR_CANAGE_3

**Hard Edit:**

* [Fill2: CANAGE_3] years old is older than your age[fill3: AGE].  
* Please correct.

---

### Question 2: DIBEV

**Question ID:** ACN.160_00.000  
**Instrument Variable Name:** DIBEV  
**QuestionnaireFileName:** Sample Adult

**Question Text:**
> ? [F1]  
> [Fill1:Other than during pregnancy, have you EVER been told by a doctor or other health professional that you have diabetes or sugar diabetes?][Fill2:Have you EVER been told by a doctor or other health professional that you have diabetes or sugar diabetes?]

<table>
<thead>
<tr>
<th>Value</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Yes</td>
</tr>
<tr>
<td>2</td>
<td>No</td>
</tr>
<tr>
<td>3</td>
<td>Borderline</td>
</tr>
<tr>
<td>7</td>
<td>Refused</td>
</tr>
<tr>
<td>9</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

**UniverseText:** Sample adults 18+

**Skip Instructions:**

- `<1>` [goto DIBAGE]  
- `<2,R,D>` [goto DIBPRE1]  
- `<3>` [goto INSLN]
Question ID: ACN.165_00.000  Instrument Variable Name: DIBPRE1  QuestionnaireFileName: Sample Adult

QuestionText: Have you EVER been told by a doctor or other health professional that you have any of the following: prediabetes, impaired fasting glucose, impaired glucose tolerance, borderline diabetes, or high blood sugar?

1  Yes
2  No
7  Refused
9  Don't know

UniverseText: Sample adults 18+ who were never told they had diabetes, or who refused or said don’t know to having been told they had diabetes

SkipInstructions: <1> [goto INSLN]
<2,R,D> [goto EPILEP1]

---

Question ID: ACN.170_00.000  Instrument Variable Name: DIBAGE  QuestionnaireFileName: Sample Adult

QuestionText: How old were you when a doctor or other health professional FIRST told you that you had diabetes or sugar diabetes?

01-84  1-84 years
85  85+ years
97  Refused
99  Don't know

UniverseText: Sample adults 18+ who were told they had diabetes or sugar diabetes (other than during pregnancy)

SkipInstructions: <1-100 R,D> [goto INSLN]

If number in DIBAGE greater than person years old (AGE) goto ERR_DIBAGE

Hard Edit:

ERR_DIBAGE

* [Fill1: DIBAGE] years old is older than your age[fill2: AGE].
* Please correct.
### 2013 NHIS Questionnaire - Sample Adult

#### Adult Conditions

**Document Version Date:** 29-May-14

<table>
<thead>
<tr>
<th>Question ID:</th>
<th>ACN.180_00.000</th>
<th>Instrument Variable Name:</th>
<th>INSLN</th>
<th>QuestionnaireFileName:</th>
<th>Sample Adult</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>QuestionText:</strong></td>
<td>Are you NOW taking insulin?</td>
<td>1</td>
<td>Yes</td>
<td>2</td>
<td>No</td>
</tr>
<tr>
<td><strong>UniverseText:</strong></td>
<td>Sample adults 18+ who were told they had diabetes or sugar diabetes (other than during pregnancy) or who were told they had prediabetes, impaired fasting glucose, impaired glucose tolerance, borderline diabetes, or high blood sugar</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>SkipInstructions:</strong></td>
<td>&lt;1,2,R,D&gt; [goto DIBPILL]</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Question ID:</th>
<th>ACN.190_00.000</th>
<th>Instrument Variable Name:</th>
<th>DIBPILL</th>
<th>QuestionnaireFileName:</th>
<th>Sample Adult</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>QuestionText:</strong></td>
<td>Are you NOW taking diabetic pills to lower your blood sugar? These are sometimes called oral agents or oral hypoglycemic agents.</td>
<td>1</td>
<td>Yes</td>
<td>2</td>
<td>No</td>
</tr>
<tr>
<td><strong>UniverseText:</strong></td>
<td>Sample adults 18+ who were told they had diabetes or sugar diabetes (other than during pregnancy) or who were told they had pre-diabetes, impaired fasting glucose, impaired glucose tolerance, borderline diabetes, or high blood sugar</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>SkipInstructions:</strong></td>
<td>&lt;1,2,R,D&gt; [goto EPILEP1]</td>
<td></td>
<td></td>
<td></td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Question ID:</th>
<th>ACN.192_00.010</th>
<th>Instrument Variable Name:</th>
<th>EPILEP1</th>
<th>QuestionnaireFileName:</th>
<th>Sample Adult</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>QuestionText:</strong></td>
<td>Have you ever been told by a doctor or other health professional that you have a seizure disorder or epilepsy?</td>
<td>1</td>
<td>Yes</td>
<td>2</td>
<td>No</td>
</tr>
<tr>
<td><strong>UniverseText:</strong></td>
<td>Sample adults 18+</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>SkipInstructions:</strong></td>
<td>&lt;1&gt; [goto EPILEP2] &lt;2,R,D&gt; [goto AHAYFYR]</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Are you currently taking any medicine to control your seizure disorder or epilepsy?

1 Yes
2 No
7 Refused
9 Don't know

Today is [fill: Current Date]. Think back to last year about the same time. About how many seizures of any type have you had in the past year?

*Read if necessary: Some people may call it “convulsion,” “fit,” “falling out spell,” “episode,” “attack,” “drop attack,” “staring spell,” or “out-of-touch.”.

*If the respondent mentions and counts “auras” as seizures accept the response. If a respondent indicates that he/she has had nothing more than an aura and is unsure about counting the aura(s), do NOT count auras as seizures.
In the past year have you seen a neurologist or epilepsy specialist for your epilepsy or seizure disorder?

1  Yes
2  No
7  Refused
9  Don't know

Sample adults 18+ who have ever been told they have epilepsy or a seizure disorder

DURING THE PAST 30 DAYS, to what extent has epilepsy or its treatment interfered with your normal activities like working, school, or socializing with family or friends? Would you say…

*Read categories below.

1  Not at all
2  Slightly
3  Moderately
4  Quite a bit
5  Extremely
7  Refused
9  Don't know

Sample adults 18+ who have ever been told they have epilepsy or a seizure disorder
2013 NHIS Questionnaire - Sample Adult
Adult Conditions

Document Version Date: 29-May-14

Question ID: ACN.201_01.000  Instrument Variable Name: AHAYFYR  QuestionnaireFileName: Sample Adult

QuestionText: DURING THE PAST 12 MONTHS, have you been told by a doctor or other health professional that you had
...Hay fever?

1 Yes
2 No
7 Refused
9 Don't know

UniverseText: Sample adults 18+

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

---

Question ID: ACN.201_02.000  Instrument Variable Name: SINYR  QuestionnaireFileName: Sample Adult

QuestionText: * Read if necessary:

DURING THE PAST 12 MONTHS, have you been told by a doctor or other health professional that you had
...Sinusitis?

1 Yes
2 No
7 Refused
9 Don't know

UniverseText: Sample adults 18+

SkipInstructions: <1,2,R,D> [goto CBRCHYR]
2013 NHIS Questionnaire - Sample Adult
Adult Conditions
Document Version Date: 29-May-14

Question ID: ACN.201_03.000  Instrument Variable Name: CBRCHYR  QuestionnaireFileName: Sample Adult

QuestionText: * Read if necessary:

DURING THE PAST 12 MONTHS, have you been told by a doctor or other health professional that you had

...Chronic bronchitis?

1 Yes
2 No
7 Refused
9 Don't know

UniverseText: Sample adults 18+

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

Question ID: ACN.201_04.000  Instrument Variable Name: KIDWKYR  QuestionnaireFileName: Sample Adult

QuestionText: * Read if necessary:

DURING THE PAST 12 MONTHS, have you been told by a doctor or other health professional that you had

.....Weak or failing kidneys? - Do not include kidney stones, bladder infections or incontinence.

1 Yes
2 No
7 Refused
9 Don't know

UniverseText: Sample adults 18+

SkipInstructions: <1,2,R,D> [goto LIVYR]
Question ID: ACN.201_05.000  Instrument Variable Name: LIVYR  QuestionnaireFileName: Sample Adult

QuestionText: * Read if necessary:

DURING THE PAST 12 MONTHS, have you been told by a doctor or other health professional that you had

...Any kind of liver condition?

1 Yes
2 No
7 Refused
9 Don't know

UniverseText: Sample adults 18+

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

Question ID: ACN.250_00.000  Instrument Variable Name: JNTSYMP  QuestionnaireFileName: Sample Adult

QuestionText: The next questions refer to your joints. Please do NOT include the back or neck. DURING THE PAST 30 DAYS, have you had any symptoms of pain, aching, or stiffness in or around a joint?

1 Yes
2 No
7 Refused
9 Don't know

UniverseText: Sample adults 18+

SkipInstructions: <1> [goto JMTHP]
               <2,R,D> [goto ARTH]
Question ID: ACN.260_00.000  Instrument Variable Name: JMTHP  QuestionnaireFileName: Sample Adult

QuestionText: (book) A4

Which joints are affected?

* Enter all that apply, separate with commas.

01 Shoulder-right
02 Shoulder-left
03 Elbow-right
04 Elbow-left
05 Hip-right
06 Hip-left
07 Wrist-right
08 Wrist-left
09 Knee-right
10 Knee-left
11 Ankle-right
12 Ankle-left
13 Toes-right
14 Toes-left
15 Fingers/thumb-right
16 Fingers/thumb-left
17 Other joint not listed
97 Refused
99 Don't know

UniverseText: Sample adults 18+ who had joint pain in the past 30 days

SkipInstructions: <1-17,R,D> [goto JNTCHR]

---

Question ID: ACN.270_00.000  Instrument Variable Name: JNTHCHR  QuestionnaireFileName: Sample Adult

QuestionText: Did your joint symptoms FIRST begin more than 3 months ago?

1 Yes
2 No
7 Refused
9 Don't know

UniverseText: Sample adults 18+ who had joint pain in the past 30 days

SkipInstructions: <1,2,R,D> [goto JNTHCHR]
### Question ID: ACN.280_00.000  
**Instrument Variable Name:** JNTHP  
**QuestionnaireFileName:** Sample Adult

**QuestionText:** Have you EVER seen a doctor or other health professional for these joint symptoms?

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

**UniverseText:** Sample adults 18+ who had joint pain in the past 30 days

**SkipInstructions:** `<1,2,R,D> [goto ARTH]`

---

### Question ID: ACN.290_00.000  
**Instrument Variable Name:** ARTH  
**QuestionnaireFileName:** Sample Adult

**QuestionText:** Have you EVER been told by a doctor or other health professional that you have some form of arthritis, rheumatoid arthritis, gout, lupus, or fibromyalgia (fy-bro-my-AL-jee-uh)?

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

**UniverseText:** Sample adults 18+

**SkipInstructions:** `(<1> or JNTSYMP eq <1>) [goto ARTHLMT]; else (<2,R,D> and JNTSYMP ne 1) [goto PAINECK]`
2013 NHIS Questionnaire - Sample Adult

Adult Conditions

Document Version Date: 29-May-14

Question ID: ACN.295_00.000  Instrument Variable Name: ARTHLMT  QuestionnaireFileName: Sample Adult

QuestionText: ? [F1]

Are you now limited in any way in any of your usual activities because of arthritis or joint symptoms?

1   Yes
2   No
7   Refused
9   Don't know

UniverseText: Sample adults 18+ with joint pain or arthritis

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

---

Question ID: ACN.300_00.000  Instrument Variable Name: PAINECK  QuestionnaireFileName: Sample Adult

QuestionText: ? [F1]

The following questions are about pain you may have experienced in the PAST THREE MONTHS. Please refer to pain that LASTED A WHOLE DAY OR MORE. Do not report aches and pains that are fleeting or minor.

DURING THE PAST THREE MONTHS, did you have

... Neck pain?

1   Yes
2   No
7   Refused
9   Don't know

UniverseText: Sample adults 18+

SkipInstructions: <1,2,R,D> [goto PAINLB]
DURING THE PAST THREE MONTHS, did you have
... Low back pain?

1    Yes
2    No
7    Refused
9    Don't know

UniverseText: Sample adults 18+

SkipInstructions: <1> [goto PAINLEG]
<2,R,D> [goto PAINFACE]
**2013 NHIS Questionnaire - Sample Adult**

**Adult Conditions**

**Document Version Date:** 29-May-14

---

**Question ID:** ACN.331_01.000  
**Instrument Variable Name:** PAINFACE  
**QuestionnaireFileName:** Sample Adult

**QuestionText:**

DURING THE PAST THREE MONTHS, did you have

...Facial ache or pain in the jaw muscles or the joint in front of the ear?

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

**UniverseText:** Sample adults 18+

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

---

**Question ID:** ACN.331_02.000  
**Instrument Variable Name:** AMIGR  
**QuestionnaireFileName:** Sample Adult

**QuestionText:**  
* Read if necessary:

DURING THE PAST THREE MONTHS, did you have

...Severe headache or migraine?

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

**UniverseText:** Sample adults 18+

**SkipInstructions:** <1,2,R,D>[goto ACOLD2W]
Adult Conditions

These next questions are about your recent health DURING THE LAST 2 WEEKS.

Did you have a head cold or chest cold that started DURING THE LAST 2 WEEKS?

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

Sample adults 18+

If SEX=2 and AGE 18-49 [goto PREGNOW]; else if SEX=1 or AGE >49 [goto HRAIDNOW]

Did you have a stomach or intestinal illness with vomiting or diarrhea that started DURING THE LAST TWO WEEKS?

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

Sample adults 18+

Are you currently pregnant?

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

Female sample adults 18-49 years of age

If INTERVIEW_MONTH=4,5,6,7 (April-July) [goto PREGFLYR]; else [goto HRAIDNOW]

<1,D> [goto PREGFLYR]
### 2013 NHIS Questionnaire - Sample Adult
#### Adult Conditions

**Document Version Date:** 29-May-14

<table>
<thead>
<tr>
<th>Question ID: ACN.370_00.010</th>
<th>Instrument Variable Name: PREGFLYR</th>
<th>QuestionnaireFileName: Sample Adult</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>QuestionText:</strong> [fill1: Were you pregnant any time since August 1st, [fill: LAST YEAR]?/Were you pregnant any time from August [fill: LAST YEAR] through March [fill: CURYEAR]?/Were you pregnant any time since August 1st, [fill: CURYEAR]?]</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1  Yes</td>
<td>2  No</td>
<td>7  Refused</td>
</tr>
<tr>
<td>UniverseText: Female sample adults 18-49 years of age who are not currently pregnant or who don't know if they are currently pregnant and interviewed April - July</td>
<td></td>
<td></td>
</tr>
<tr>
<td>SkipInstructions: &lt;1,2,R,D&gt; [goto HRAIDNOW]</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Question ID: ACN.400_00.000</th>
<th>Instrument Variable Name: HRAIDNOW</th>
<th>QuestionnaireFileName: Sample Adult</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>QuestionText:</strong> These next questions are about your hearing, vision, and teeth. Do you now use a hearing aid(s)?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1  Yes</td>
<td>2  No</td>
<td>7  Refused</td>
</tr>
<tr>
<td>UniverseText: Sample adults 18+</td>
<td></td>
<td></td>
</tr>
<tr>
<td>SkipInstructions: &lt;1&gt; [goto AHEARST1] &lt;2,R,D&gt; [goto HRAIDEV]</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Question ID: ACN.410_00.000</th>
<th>Instrument Variable Name: HRAIDEV</th>
<th>QuestionnaireFileName: Sample Adult</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>QuestionText:</strong> Have you ever used a hearing aid(s) in the past?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1  Yes</td>
<td>2  No</td>
<td>7  Refused</td>
</tr>
<tr>
<td>UniverseText: Sample adults 18+ who do not now use a hearing aid or REF/DK whether they now use a hearing aid</td>
<td></td>
<td></td>
</tr>
<tr>
<td>SkipInstructions: &lt;1,2,R,D&gt;[goto AHEARST1]</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Question ID: ACN.420_00.000  Instrument Variable Name: AHEARST1  QuestionnaireFileName: Sample Adult

**QuestionText:** WITHOUT the use of hearing aids or other listening devices, is your hearing excellent, good, a little trouble hearing, moderate trouble, a lot of trouble, or are you deaf?

1. Excellent
2. Good
3. A little trouble hearing
4. Moderate trouble
5. A lot of trouble
6. Deaf
7. Refused
9. Don't know

**UniverseText:** Sample adults 18+

**SkipInstructions:** <1-6,R,D> [goto AVISION]

---

Question ID: ACN.430_00.000  Instrument Variable Name: AVISION  QuestionnaireFileName: Sample Adult

**QuestionText:** Do you have any trouble seeing, even when wearing glasses or contact lenses?

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

**UniverseText:** Sample adults 18+

**SkipInstructions:** <1> [goto ABLIND]
<2,R,D> [goto LUPPRT]
### Question ID: ACN.440_00.000  Instrument Variable Name: ABLIND  QuestionnaireFileName: Sample Adult

**QuestionText:** Are you blind or unable to see at all?

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

**UniverseText:** Sample adults 18+ who have trouble seeing even when wearing glasses/contact lenses

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

---

### Question ID: ACN.451_00.000  Instrument Variable Name: LUPPRT  QuestionnaireFileName: Sample Adult

**QuestionText:** Have you lost all of your upper and lower natural (permanent) teeth?

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

**UniverseText:** Sample adults 18+

**SkipInstructions:** <1,2,R,D>[goto next section]
## 2013 NHIS Questionnaire - Sample Adult

### Adult Immunosuppression

**Document Version Date:** 29-May-14

#### Question ID: AIS.010_00.010  Instrument Variable Name: AIMSUPEV  QuestionnaireFileName: Sample Adult

**QuestionText:** Have you EVER been told by a doctor or other health professional that your immune system is weakened?

*Read if necessary: A weakened immune system is also called immune compromised or immune suppressed. It means that you are not able to fight infections and is usually caused by an underlying illness or by various medical treatments or prescription medications.

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<tr>
<td>1</td>
<td>Yes</td>
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<tr>
<td>2</td>
<td>No</td>
</tr>
<tr>
<td>7</td>
<td>Refused</td>
</tr>
<tr>
<td>9</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

**UniverseText:** Sample adults 18+

**SkipInstructions:** <1> [goto AIMSPSTL]

#### Question ID: AIS.010_00.020  Instrument Variable Name: AIMSPSTL  QuestionnaireFileName: Sample Adult

**QuestionText:** Based on what a doctor or other health professional told you, do you still have a weakened immune system?

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<tbody>
<tr>
<td>1</td>
<td>Yes</td>
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<tr>
<td>7</td>
<td>Refused</td>
</tr>
<tr>
<td>9</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

**UniverseText:** Sample adults 18+ who have ever been told by a doctor/other health professional that they had a weakened immune system

**SkipInstructions:** <1,2,R,D> [goto AIMSPMED]
**Question ID:** AIS.010_00.030  
**Instrument Variable Name:** AIMSPMED  
**QuestionnaireFileName:** Sample Adult

**QuestionText:** The next questions are about reasons a doctor or other health professional may have told you that your immune system was weakened. Please say yes or no to each.

DURING THE PAST 6 MONTHS, have you taken prescription medication or had any medical treatments that a doctor or other health professional told you would weaken your immune system? Examples include steroid or corticosteroid pills, such as prednisone, or other oral or injected medications for treating many types of autoimmune conditions or certain cancers.

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

**UniverseText:** Sample adults 18+ who have ever been told by a doctor/other health professional that they had a weakened immune system

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

---

**Question ID:** AIS.010_00.040  
**Instrument Variable Name:** AIMSPCHC  
**QuestionnaireFileName:** Sample Adult

**QuestionText:** Do you currently have a health condition that a doctor or other health professional told you weakens the immune system, even without related medications or treatments? Examples include certain kinds of leukemia, lymphoma, or HIV infection.

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

**UniverseText:** Sample adults 18+ who have ever been told by a doctor/other health professional that they had a weakened immune system

**SkipInstructions:** <1,2,R,D> [goto AIMSPSHC]
### 2013 NHIS Questionnaire - Sample Adult

**Adult Immunosuppression**

**Document Version Date:** 29-May-14

<table>
<thead>
<tr>
<th>Question ID: AIS.010_00.050</th>
<th>Instrument Variable Name: AIMSPSHC</th>
<th>QuestionnaireFileName: Sample Adult</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>QuestionText:</strong> Has a doctor or other health professional EVER told you that your immune system is weakened because you have kidney disease, lung disease, liver disease, diabetes, poor nutrition, or general frailty?</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>1</strong></td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td><strong>2</strong></td>
<td>No</td>
<td></td>
</tr>
<tr>
<td><strong>7</strong></td>
<td>Refused</td>
<td></td>
</tr>
<tr>
<td><strong>9</strong></td>
<td>Don't know</td>
<td></td>
</tr>
</tbody>
</table>

**UniverseText:** Sample adults 18+ who have ever been told by a doctor/other health professional that they had a weakened immune system

**SkipInstructions:** `<1,2,R,D>`

If CANKIND_1=1-30 or CANKIND_2=1-30 or CANKIND_3=1-30 or CANKIND_4=96 [goto AIMSPCAN]; else [goto AIMSPCLD]

<table>
<thead>
<tr>
<th>Question ID: AIS.010_00.060</th>
<th>Instrument Variable Name: AIMSPCAN</th>
<th>QuestionnaireFileName: Sample Adult</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>QuestionText:</strong> Earlier you said you had {fill1: type of cancer from CANKIND_1, CANKIND_2, CANKIND_3, CANKIND_4 cancer}_. Did a doctor or other health professional EVER tell you that your immune system is weakened because of {fill2: this cancer/these cancers}?</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>1</strong></td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td><strong>2</strong></td>
<td>No</td>
<td></td>
</tr>
<tr>
<td><strong>7</strong></td>
<td>Refused</td>
<td></td>
</tr>
<tr>
<td><strong>9</strong></td>
<td>Don't know</td>
<td></td>
</tr>
</tbody>
</table>

**UniverseText:** Sample adults 18+ who have ever been told by a doctor/other health professional that they had a weakened immune system and have one or more kinds of cancer

**SkipInstructions:** `<1,2,R,D> [goto AIMSPCLD]`
Has a doctor or other health professional EVER told you that your immune system is weakened because you seem to get many infections and colds or that you can’t seem to get over them?

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

Sample adults 18+ who have ever been told by a doctor/other health professional that they had a weakened immune system
2013 NHIS Questionnaire - Sample Adult
Adult Health Status & Limitations

Document Version Date: 29-May-14

**Question ID:** AHS.040_00.000  
**Instrument Variable Name:** WKDAYR  
**QuestionnaireFileName:** Sample Adult

**QuestionText:** During the PAST 12 MONTHS, that is, since {12-month ref. date}, ABOUT how many days did you miss work at a job or business because of illness or injury (do not include maternity leave)?

- Enter '0' for None.
- 000: None
- 001-366: 1-366 days
- 997: Refused
- 999: Don't know

**UniverseText:** Sample adults 18+ who worked or had a job or business with or without pay in the last week or who had a job or business in the past 12 months

**Skip Instructions:**
- <0-366,R,D> [goto BEDDAYR]
- <120-366> [goto ERR_WKDAYR]

**Soft Edit:**
- ERR_WKDAYR
  - [Fill: WKDAYR] is an unusually large number.
  - Please verify.

---

**Question ID:** AHS.050_00.000  
**Instrument Variable Name:** BEDDAYR  
**QuestionnaireFileName:** Sample Adult

**QuestionText:** During the PAST 12 MONTHS, that is, since {12-month ref. date}, ABOUT how many days did illness or injury keep you in bed more than half of the day (include days while an overnight patient in a hospital)?

- Enter '0' for None.
- 000: None
- 001-366: 1-366 days
- 997: Refused
- 999: Don't know

**UniverseText:** Sample adults 18+

**Skip Instructions:**
- <0-366,R,D> [goto AHSTATYR]
- <120-366> [goto ERR_BEDDAYR]

**Soft Edit:**
- ERR_BEDDAYR
  - [Fill: BEDDAYR] is an unusually large number.
  - Please verify.
Compared with 12 MONTHS AGO, would you say your health is better, worse, or about the same?

1  Better  
2  Worse  
3  About the same  
7  Refused  
9  Don't know

Do you now have any health problem that requires you to use special equipment, such as a cane, a wheelchair, a special bed, or a special telephone?

1  Yes  
2  No  
7  Refused  
9  Don't know
The next questions ask about difficulties you may have doing certain activities because of a HEALTH PROBLEM. By "health problem" we mean any physical, mental, or emotional problem or illness (not including pregnancy).

By yourself, and without using any special equipment, how difficult is it for you to...

...Walk a quarter of a mile - about 3 city blocks?

- 0: Not at all difficult
- 1: Only a little difficult
- 2: Somewhat difficult
- 3: Very difficult
- 4: Can't do at all
- 6: Do not do this activity
- 7: Refused
- 9: Don't know

Sample adults 18+

* Read lead-in if necessary.

By yourself, and without using any special equipment, how difficult is it for you to...

...Walk up 10 steps without resting?

- 0: Not at all difficult
- 1: Only a little difficult
- 2: Somewhat difficult
- 3: Very difficult
- 4: Can't do at all
- 6: Do not do this activity
- 7: Refused
- 9: Don't know

Sample adults 18+
Question ID: AHS.091_03.000  Instrument Variable Name: FLSTAND  QuestionnaireFileName: Sample Adult

QuestionText: (book) A5

* Read lead-in if necessary.

By yourself, and without using any special equipment, how difficult is it for you to...

...Stand or be on your feet for about 2 hours?

0  Not at all difficult
1  Only a little difficult
2  Somewhat difficult
3  Very difficult
4  Can't do at all
6  Do not do this activity
7  Refused
9  Don't know

UniverseText: Sample adults 18+

SkipInstructions: <0-4,6,R,D> [goto FLSTOOP]

---

Question ID: AHS.091_04.000  Instrument Variable Name: FLSIT  QuestionnaireFileName: Sample Adult

QuestionText: (book) A5

* Read lead-in if necessary.

By yourself, and without using any special equipment, how difficult is it for you to...

...Sit for about 2 hours?

0  Not at all difficult
1  Only a little difficult
2  Somewhat difficult
3  Very difficult
4  Can't do at all
6  Do not do this activity
7  Refused
9  Don't know

UniverseText: Sample adults 18+

SkipInstructions: <0-4,6,R,D> [goto FLSTOOP]
### FLSTOOP

**Question ID:** AHS.091_05.000  
**Instrument Variable Name:** FLSTOOP  
**QuestionnaireFileName:** Sample Adult

**QuestionText:**

(book) A5

* Read lead-in if necessary.

By yourself, and without using any special equipment, how difficult is it for you to...

...Stoop, bend, or kneel?

- **0** Not at all difficult
- **1** Only a little difficult
- **2** Somewhat difficult
- **3** Very difficult
- **4** Can't do at all
- **6** Do not do this activity
- **7** Refused
- **9** Don't know

**UniverseText:** Sample adults 18+

**SkipInstructions:** <0-4,6,R,D> [goto FLREACH]

---

### FLREACH

**Question ID:** AHS.091_06.000  
**Instrument Variable Name:** FLREACH  
**QuestionnaireFileName:** Sample Adult

**QuestionText:**

(book) A5

* Read lead-in if necessary.

By yourself, and without using any special equipment, how difficult is it for you to...

...Reach up over your head?

- **0** Not at all difficult
- **1** Only a little difficult
- **2** Somewhat difficult
- **3** Very difficult
- **4** Can't do at all
- **6** Do not do this activity
- **7** Refused
- **9** Don't know

**UniverseText:** Sample adults 18+

**SkipInstructions:** <0-4,6,R,D> [goto FLGRASP]
**Question ID:** AHS.141_01.000  **Instrument Variable Name:** FLGRASP  **QuestionnaireFileName:** Sample Adult

**QuestionText:**

(book) A5

* Read lead-in if necessary.

By yourself, and without using any special equipment, how difficult is it for you to...

...Use your fingers to grasp or handle small objects?

0  Not at all difficult
1  Only a little difficult
2  Somewhat difficult
3  Very difficult
4  Can't do at all
6  Do not do this activity
7  Refused
9  Don't know

**UniverseText:** Sample adults 18+

**SkipInstructions:** <0-4,6,R,D> [goto FLCARRY]

---

**Question ID:** AHS.141_02.000  **Instrument Variable Name:** FLCARRY  **QuestionnaireFileName:** Sample Adult

**QuestionText:**

(book) A5

* Read lead-in if necessary.

By yourself, and without using any special equipment, how difficult is it for you to...

...Lift or carry something as heavy as 10 pounds such as a full bag of groceries?

0  Not at all difficult
1  Only a little difficult
2  Somewhat difficult
3  Very difficult
4  Can't do at all
6  Do not do this activity
7  Refused
9  Don't know

**UniverseText:** Sample adults 18+

**SkipInstructions:** <0-4,6,R,D> [goto FLPUSH]
2013 NHIS Questionnaire - Sample Adult
Adult Health Status & Limitations
Document Version Date: 29-May-14

Question ID: AHS.141_03.000
Instrument Variable Name: FLPUSH
QuestionnaireFileName: Sample Adult

Question Text:

(book) A5

* Read lead-in if necessary.

By yourself, and without using any special equipment, how difficult is it for you to...

...Push or pull large objects like a living room chair?

0 Not at all difficult
1 Only a little difficult
2 Somewhat difficult
3 Very difficult
4 Can't do at all
6 Do not do this activity
7 Refused
9 Don't know

Universe Text: Sample adults 18+

Skip Instructions: <0-4,6,R,D> [goto FLSHOP]

Question ID: AHS.171_01.000
Instrument Variable Name: FLSHOP
QuestionnaireFileName: Sample Adult

Question Text:

(book) A5

* Read lead-in if necessary.

By yourself, and without using any special equipment, how difficult is it for you to...

...Go out to things like shopping, movies, or sporting events?

0 Not at all difficult
1 Only a little difficult
2 Somewhat difficult
3 Very difficult
4 Can't do at all
6 Do not do this activity
7 Refused
9 Don't know

Universe Text: Sample adults 18+

Skip Instructions: <0-4,6,R,D> [goto FLSOCL]
**Question ID:** AHS.171_02.000  **Instrument Variable Name:** FLSOCL  **QuestionnaireFileName:** Sample Adult

**QuestionText:** (book) A5

* Read lead-in if necessary.

By yourself, and without using any special equipment, how difficult is it for you to...

...Participate in social activities such as visiting friends, attending clubs and meetings, going to parties?

0  Not at all difficult
1  Only a little difficult
2  Somewhat difficult
3  Very difficult
4  Can't do at all
6  Do not do this activity
7  Refused
9  Don't know

**UniverseText:** Sample adults 18+

**SkipInstructions:** <0-4,R,D> [goto FLRELAX]

---

**Question ID:** AHS.171_03.000  **Instrument Variable Name:** FLRELAX  **QuestionnaireFileName:** Sample Adult

**QuestionText:** (book) A5

* Read lead-in if necessary.

By yourself, and without using any special equipment, how difficult is it for you to...

...Do things to relax at home or for leisure (reading, watching TV, sewing, listening to music)?

0  Not at all difficult
1  Only a little difficult
2  Somewhat difficult
3  Very difficult
4  Can't do at all
6  Do not do this activity
7  Refused
9  Don't know

**UniverseText:** Sample adults 18+

**SkipInstructions:** <1-4 or FLWALK= 1-4 or FLCLIMB= 1-4 or FLSTAND= 1-4 or FLSTOOP= 1-4 or FLSTOOP= 1-4 or FLREACH= 1-4 or FLGRASP= 1-4 or FLCARRY= 1-4 or FLPUSH= 1-4 or FLSHOP= 1-4 or FLSOCL= 1-4>[goto AFLHCA]

Else goto SMKEV (next section)
What condition or health problem causes you to have difficulty with [fill1: condition 1, condition 2 or condition 3 (as specified in AHS.091_1 through AHS.171_3)][fill2: these activities]?

* Enter condition number for all that apply, separate with commas.

* Do not probe, except to clarify answer.

01 Vision/problem seeing
02 Hearing problem
03 Arthritis/rheumatism
04 Back or neck problem
05 Fracture, bone/joint injury
06 Other injury
07 Heart problem
08 Stroke problem
09 Hypertension/high blood pressure
10 Diabetes
11 Lung/breathing problem (for example, asthma and emphysema)
12 Cancer
13 Birth defect
14 Intellectual disability, also known as mental retardation
15 Other developmental problem (for example, cerebral palsy)
16 Senility
17 Depression/anxiety/emotional problem
18 Weight problem
19 Missing limbs (fingers, toes or digits), amputee
20 Kidney, bladder or renal problems
21 Circulation problems (including blood clots)
22 Benign Tumors, Cysts
23 Fibromyalgia, lupus
24 Osteoporosis, tendinitis
25 Epilepsy, seizures
26 Multiple Sclerosis (MS), Muscular Dystrophy (MD)
27 Polio(myelitis), paralysis, para/quadriplegia
28 Parkinson's disease, other tremors
29 Other nerve damage, including carpal tunnel syndrome
30 Hernia
31 Ulcer
32 Varicose veins, hemorrhoids
33 Thyroid problems, Grave's disease, gout
34 Knee problems (not arthritis (03), not joint injury (05))
35 Migraine headaches (not just headaches)
90 Other impairment/problem (Specify one)
91 Other impairment/problem (Specify one)
97 Refused
99 Don't know/Not sure
**UniverseText:** Sample adults 18+ who, without using special equipment, have at least a little difficulty walking a quarter mile; walking up 10 steps without resting; standing/being on feet for about 2 hours; sitting for about 2 hours; stooping/bending/kneeling; reaching up over head; using fingers to grasp/handle small objects; lifting/carrying 10 pounds; pushing/pulling large objects; going out for things (shopping/movies); participating in social activities; or relaxing at home (reading/sewing).

**SkipInstructions:** [1-12, 14 - 35] goto the appropriate follow up question AHCL01N-AHCL12N, AHCL14N-AHCL35N], in numerical order  
<13> store "96" in AHCL13N and "6" IN AHCL13T[goto SMKEV]  
<90> [goto AFLHCA_S1]  
<91> [goto AFLHCA_S2]  
Roster through all AFLHCA entries. Once exhausted goto SMKEV (next section)  
< R,D> [goto SMKEV (next section)]

---

**Question ID:** AHS.201_90.000  **Instrument Variable Name:** AFLHCA_S1  **QuestionnaireFileName:** Sample Adult

**QuestionText:** * Enter other impairment/problem.

**Verbatim**  
7 Verbatim response  
9 Refused  
9 Don't know

**UniverseText:** Sample adults 18+ whose difficulties performing activities listed in FLWALK through FLRELAX is due to at least one condition not listed in AFLHCA

**SkipInstructions:** <50 chars>[goto AHCL90N]  
>ENTER< only with no description [goto ERR1_AFLHCA_S1]  
Else goto the appropriate follow-up questions AHCL01N-AHCL12N, AHCL14N-AHCL35N], in numerical order, as specified in AFLHCA

**Hard Edit:** $ You should enter something specific.

---

**Question ID:** AHS.201_91.000  **Instrument Variable Name:** AFLHCA_S2  **QuestionnaireFileName:** Sample Adult

**QuestionText:** * Enter other impairment/problem.

**Verbatim**  
7 Verbatim response  
9 Refused  
9 Don't know

**UniverseText:** Sample adults 18+ whose difficulty performing activities listed in FLWALK through FLRELAX is due to more than one condition that is not listed in AFLHCA

**SkipInstructions:** <50 chars>[goto AHCL91N]  
>ENTER< only with no description [goto ERR1_AFLHCA_S1]  
Else goto the appropriate follow-up questions AHCL01N-AHCL12N, AHCL14N-AHCL35N], in numerical order, as specified in AFLHCA

**Hard Edit:** $ You should enter something specific.
How long have you had a vision problem or problem seeing?

* Enter number for time with your vision problem or problem seeing..

* Enter '95' for 95 or more.

* Enter '96' if since birth.

01-94  1-94
95     95+
96     Since birth
97     Refused
99     Don't know
### Question Text:

2 of 2

* Enter time period for time with vision problem or problem seeing.

1. Day(s)
2. Week(s)
3. Month(s)
4. Year(s)
5. Since birth
6. Refused
7. Don't know

### Universe Text:

Sample adults 18+ who answered 1-95, D for the "number" part of this 2-part question

### Skip Instructions:

<1- 4, R,D>=[goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]

<6> goto ERR2_AHCL01T

[if [AHCL01N = Number greater than person years old and AHCL01T= 4]] goto ERR1_AHCL01T

### Hard Edit:

ERR1_AHCL01T

*Time with condition cannot be greater than age.
* Please correct.

ERR2_AHCL01T

* "6" not selectable.
How long have you had a hearing problem?

* Enter number for time with a hearing problem.

* Enter '95" for 95 or more.

* Enter "96" if since birth.

01-94 01-94
95 95+
96 Since birth
97 Refused
99 Don't know

Sample adults 18+ who had difficulty due to a hearing problem
### Question ID: AHS.301_02.000  Instrument Variable Name: AHCL02T  QuestionnaireFileName: Sample Adult

#### QuestionText:

2 of 2

* Enter time period for time with hearing problem.

1. Day(s)
2. Week(s)
3. Month(s)
4. Year(s)
5. Since birth
6. Refused
7. Don't know

#### UniverseText:

Sample adults 18+ who answered 1-95, D for the "number" part of this 2-part question

#### SkipInstructions:

<1- 4, R,D>[goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]

<6> goto ERR2_AHCL02T

[if [AHCL02N = Number greater than person years old and AHCL02T= 4]] goto ERR1_AHCL02T

#### Hard Edit: ERR1_AHCL02T

* Time with condition cannot be greater than age.
* Please correct.

ERR2_AHCL02T

* "6" not selectable.
How long have you had arthritis or rheumatism?

* Enter number for time with arthritis or rheumatism.

* Enter '95' for 95 or more.

* Enter "96" if since birth.

01-94  01-94
95  95+
96  Since birth
97  Refused
99  Don't know

Sample adults 18+ who had difficulty due to arthritis or rheumatism

* Enter time period for time with arthritis or rheumatism.

1  Day(s)
2  Week(s)
3  Month(s)
4  Year(s)
6  Since Birth
7  Refused
9  Don't know

Sample adults 18+ who answered 1-95, D for the "number" part of this 2-part question

* Time with condition cannot be greater than age.
* Please correct.
How long have you had a back or neck problem?

* Enter number for time with back or neck problem.
* Enter "95" for 95 or more.
* Enter "96" if since birth.

01-94 1-94
95 95+
96 Since birth
97 Refused
99 Don't know

Sample adults 18+ who had difficulty due to a back or neck problem

* Time with condition cannot be greater than age.
* Please correct.
### Question ID: AHS.304_01.000  
**Instrument Variable Name:** AHCL05N  
**QuestionnaireFileName:** Sample Adult

**QuestionText:**
1 of 2

How long have you had a fracture, bone, or joint injury?

* Enter number for time with a fracture, bone, or joint injury.

* Enter '95" for 95 or more.

* Enter "96" if since birth.

<table>
<thead>
<tr>
<th>Option</th>
<th>Value</th>
</tr>
</thead>
<tbody>
<tr>
<td>01-94</td>
<td>1-94</td>
</tr>
<tr>
<td>95</td>
<td>95+</td>
</tr>
<tr>
<td>96</td>
<td>Since birth</td>
</tr>
<tr>
<td>97</td>
<td>Refused</td>
</tr>
<tr>
<td>99</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

**UniverseText:** Sample adults 18+ who had difficulty due to a fracture, bone, or joint injury

**SkipInstructions:**

- `<1-95,D>[goto AHCL05T]`
- `<R>[store "R" in AHCL05T] [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]`
- `<96>[store "6" in AHCL05T] [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]`

### Question ID: AHS.304_02.000  
**Instrument Variable Name:** AHCL05T  
**QuestionnaireFileName:** Sample Adult

**QuestionText:**
2 of 2

* Enter time period for time with fracture, bone, or joint injury.

<table>
<thead>
<tr>
<th>Option</th>
<th>Value</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Day(s)</td>
</tr>
<tr>
<td>2</td>
<td>Week(s)</td>
</tr>
<tr>
<td>3</td>
<td>Month(s)</td>
</tr>
<tr>
<td>4</td>
<td>Year(s)</td>
</tr>
<tr>
<td>6</td>
<td>Since birth</td>
</tr>
<tr>
<td>7</td>
<td>Refused</td>
</tr>
<tr>
<td>9</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

**UniverseText:** Sample adults 18+ who answered 1-95, D for the "number" part of this 2-part question

**SkipInstructions:**

- `<1- 4, R,D>[goto AHCL05T]`
- `<6> goto ERR2_AHCL05T [if [AHCL05N = Number greater than person years old and AHCL05T= 4]] goto ERR1_AHCL05T`

**Hard Edit:**

ERR_AHCL05T

* Time with condition cannot be greater than age.

* Please correct.
Question ID: AHS.305_01.000  Instrument Variable Name: AHCL06N  QuestionnaireFileName: Sample Adult

QuestionText: 1 of 2

How long have you had the (fill: other) injury that caused your limitation?

* Enter number for time with injury that caused your limitation.

* Enter '95" for 95 or more.

* Enter "96" if since birth.

01-94 01-94
95 95+
96 Since birth
97 Refused
99 Don't know

UniverseText: Sample adults 18+ who had difficulty due to an injury other than a fracture, bone, or joint injury

SkipInstructions: <1-95,D>[goto AHCL06T]
<R>[store "R" in AHCL06T] [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]
<96>[store "6" in AHCL06T] [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]

Question ID: AHS.305_02.000  Instrument Variable Name: AHCL06T  QuestionnaireFileName: Sample Adult

QuestionText: 2 of 2

* Enter time period for time with (fill: other) injury.

1 Day(s)
2 Week(s)
3 Month(s)
4 Year(s)
6 Since birth
7 Refused
9 Don't know

UniverseText: Sample adults 18+ who answered 1-95, D for the "number" part of this 2-part question

SkipInstructions: <1-4,R,D>[goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]
<6> goto ERR2_AHCL06T
[if [AHCL06N = Number greater than person years old and AHCL06T= 4]] goto ERR1_AHCL06T

Hard Edit: ERR_AHCL06T
* Time with condition cannot be greater than age.
* Please correct.
### Question ID: AHS.306_01.000
#### Instrument Variable Name: AHCL07N
#### QuestionnaireFileName: Sample Adult

<table>
<thead>
<tr>
<th>QuestionText:</th>
<th>1 of 2</th>
</tr>
</thead>
<tbody>
<tr>
<td>How long have you had a heart problem?</td>
<td></td>
</tr>
<tr>
<td>* Enter number for time with a heart problem.</td>
<td></td>
</tr>
<tr>
<td>* Enter '95&quot; for 95 or more.</td>
<td></td>
</tr>
<tr>
<td>* Enter &quot;96&quot; if since birth.</td>
<td></td>
</tr>
<tr>
<td>01-94</td>
<td>01-94</td>
</tr>
<tr>
<td>95</td>
<td>95+</td>
</tr>
<tr>
<td>96</td>
<td>Since birth</td>
</tr>
<tr>
<td>97</td>
<td>Refused</td>
</tr>
<tr>
<td>99</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

#### UniverseText: Sample adults 18+ who had difficulty due to a heart problem

#### SkipInstructions: 
- `<1-95,D> [goto AHCL07T]
- `<R> [store "R" in AHCL07T] [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]
- `<96> [store "6" in AHCL07T] [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]

---

### Question ID: AHS.306_02.000
#### Instrument Variable Name: AHCL07T
#### QuestionnaireFileName: Sample Adult

<table>
<thead>
<tr>
<th>QuestionText:</th>
<th>2 of 2</th>
</tr>
</thead>
<tbody>
<tr>
<td>* Enter time period for time with heart problem.</td>
<td></td>
</tr>
<tr>
<td>1</td>
<td>Day(s)</td>
</tr>
<tr>
<td>2</td>
<td>Week(s)</td>
</tr>
<tr>
<td>3</td>
<td>Month(s)</td>
</tr>
<tr>
<td>4</td>
<td>Year(s)</td>
</tr>
<tr>
<td>6</td>
<td>Since birth</td>
</tr>
<tr>
<td>7</td>
<td>Refused</td>
</tr>
<tr>
<td>9</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

#### UniverseText: Sample adults 18+ who answered 1-95, D for the "number" part of this 2-part question

#### SkipInstructions: 
- `<1-4, R,D> [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]
- `<6> goto ERR2_AHCL07T
- `[if [AHCL07N = Number greater than person years old and AHCL07T= 4]] goto ERR1_AHCL07T

#### Hard Edit: 
- ERR_AHCL07T
- * Time with condition cannot be greater than age.
- * Please correct.
How long have you had a stroke problem?

* Enter number for time with a stroke problem.

* Enter "95" for 95 or more.

* Enter "96" if since birth.

01-94 1-94
95 95+
96 Since birth
97 Refused
99 Don't know

Sample adults 18+ who had difficulty due to a stroke problem

* Enter time period for time with stroke problem.

1 Day(s)
2 Week(s)
3 Month(s)
4 Year(s)
6 Since birth
7 Refused
9 Don't know

Sample adults 18+ who answered 1-95, D for the "number" part of this 2-part question

* Time with condition cannot be greater than age.
* Please correct.
**2013 NHIS Questionnaire - Sample Adult**

**Adult Health Status & Limitations**

**Document Version Date:** 29-May-14

---

**Question ID:** AHS.308_01.000  
**Instrument Variable Name:** AHCL09N  
**QuestionnaireFileName:** Sample Adult

**QuestionText:**

How long have you had hypertension or high blood pressure?

* Enter number for time with hypertension or high blood pressure.

* Enter '95'' for 95 or more.

* Enter "96" if since birth.

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>01-94</td>
<td>1-94</td>
</tr>
<tr>
<td>95</td>
<td>95+</td>
</tr>
<tr>
<td>96</td>
<td>Since birth</td>
</tr>
<tr>
<td>97</td>
<td>Refused</td>
</tr>
<tr>
<td>99</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

**UniverseText:** Sample adults 18+ who had difficulty due to hypertension or high blood pressure

**SkipInstructions:**

<1-95,D>[goto AHCL09T]

<R>[store "R" in AHCL09T] [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]

<96>[store "6" in AHCL09T] [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]

---

**Question ID:** AHS.308_02.000  
**Instrument Variable Name:** AHCL09T  
**QuestionnaireFileName:** Sample Adult

**QuestionText:**

* Enter time period for time with hypertension or high blood pressure.

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Day(s)</td>
</tr>
<tr>
<td>2</td>
<td>Week(s)</td>
</tr>
<tr>
<td>3</td>
<td>Month(s)</td>
</tr>
<tr>
<td>4</td>
<td>Year(s)</td>
</tr>
<tr>
<td>6</td>
<td>Since birth</td>
</tr>
<tr>
<td>7</td>
<td>Refused</td>
</tr>
<tr>
<td>9</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

**UniverseText:** Sample adults 18+ who answered 1-95, D for the "number" part of this 2-part question

**SkipInstructions:**

<1-4,R,D>[goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]

<6> goto ERR2_AHCL09T

[if [AHCL09N = Number greater than person years old and AHCL09T= 4]] goto ERR1_AHCL09T

**Hard Edit:**

ERR_AHCL09T

* Time with condition cannot be greater than age.

* Please correct.
How long have you had diabetes?

* Enter number for time with diabetes.
* Enter ‘95’ for 95 or more.
* Enter "96" if since birth.

01-94
95
96
Since birth
97
Refused
99
Don't know

* Enter time period for time with diabetes.

1
Day(s)
2
Week(s)
3
Month(s)
4
Year(s)
6
Since Birth
7
Refused
9
Don't know

Sample adults 18+ who had difficulty due to diabetes

* Time with condition cannot be greater than age.
* Please correct.
How long have you had a lung or breathing problem (e.g. asthma and emphysema)?

* Enter number for time with a lung or breathing problem.

* Enter '95'' for 95 or more.

* Enter "96" if since birth.

01-94 1-94
95 95+
96 Since birth
97 Refused
99 Don't know

Sample adults 18+ who had difficulty due to a lung or breathing problem

* Enter time period for time with lung or breathing problem (e.g. asthma and emphysema).

1 Day(s)
2 Week(s)
3 Month(s)
4 Year(s)
6 Since birth
7 Refused
9 Don't know

Sample adults 18+ who answered 1-95, D for the "number" part of this 2-part question

* Time with condition cannot be greater than age.
* Please correct.
1 of 2

How long have you had cancer?

* Enter number for time with cancer.

* Enter '95'' for 95 or more.

* Enter "96" if since birth.

01-94 1-94
95 95+
96 Since birth
97 Refused
99 Don't know

Sample adults 18+ who had difficulty due to cancer

<1-95,D>[goto AHCL12T]
<R>[store "R" in AHCL12T] [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]
<96>[store "6" in AHCL12T] [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]

2 of 2

* Enter time period for time with cancer.

1 Day(s)
2 Week(s)
3 Month(s)
4 Year(s)
6 Since birth
7 Refused
9 Don't know

Sample adults 18+ who answered 1-95, D for the "number" part of this 2-part question

<1- 4, R,D>[goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]
<6> goto ERR2_AHCL12T
[if [AHCL12N = Number greater than person years old and AHCL12T= 4]] goto ERR1_AHCL12T

Hard Edit:

ERR_AHCL12T

* Time with condition cannot be greater than age.
* Please correct.
How long have you had intellectual disability, also known as mental retardation?

* Enter number for time with intellectual disability/mental retardation.

* Enter '95" for 95 or more.

* Enter "96" if since birth.

01-94 1-94
95 95+
96 Since birth
97 Refused
99 Don't know

Sample adults 18+ who had difficulty due to intellectual disability/mental retardation

1 Day(s)
2 Week(s)
3 Month(s)
4 Year(s)
6 Since birth
7 Refused
9 Don't know

Sample adults 18+ who answered 1-95, D for the "number" part of this 2-part question

* Time with condition cannot be greater than age.
* Please correct.
Question ID: AHS.314_01.000  Instrument Variable Name: AHCL15N  QuestionnaireFileName: Sample Adult

QuestionText: 1 of 2

How long have you had a developmental problem (e.g., cerebral palsy)?

* Enter number for time with a developmental problem.

* Enter "95" for 95 or more.

* Enter "96" if since birth.

01-94
95
96 Since birth
97 Refused
99 Don't know

UniverseText: Sample adults 18+ who had difficulty due to a developmental problem

SkipInstructions:

<1-95,D>[goto AHCL15T]
<R>[store "R" in AHCL15T] [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]
<96>[store "6" in AHCL15T] [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]

Question ID: AHS.314_02.000  Instrument Variable Name: AHCL15T  QuestionnaireFileName: Sample Adult

QuestionText: 2 of 2

* Enter time period for time with developmental problem.

1 Day(s)
2 Week(s)
3 Month(s)
4 Year(s)
6 Since birth
7 Refused
9 Don't know

UniverseText: Sample adults 18+ who answered 1-95, D for the "number" part of this 2-part question

SkipInstructions:

<1-4, R,D>[goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]
<6> goto ERR2_AHCL15T
[if [AHCL15N = Number greater than person years old and AHCL15T= 4]] goto ERR1_AHCL15T

Hard Edit:

ERR_AHCL15T
* Time with condition cannot be greater than age.
* Please correct.
How long have you had senility?

* Enter number for time with senility.

* Enter "95" for 95 or more.

* Enter "96" if since birth.

01-94
95
96
Since birth
97 Refused
99 Don't know

Sample adults 18+ who had difficulty due to senility

* Enter time period for time with senility.

1 Day(s)
2 Week(s)
3 Month(s)
4 Year(s)
6 Since birth
7 Refused
9 Don't know

Sample adults 18+ who answered 1-95, D for the "number" part of this 2-part question

* Time with condition cannot be greater than age.
* Please correct.
How long have you had depression, anxiety, or an emotional problem?

* Enter number for time with depression, anxiety, or an emotional problem.

* Enter '95" for 95 or more.

* Enter "96" if since birth.

01-94
01-94
95
95+
96
Since birth
97
Refused
99
Don't know

Sample adults 18+ who had difficulty due to depression, anxiety, or an emotional problem

* Time with condition cannot be greater than age.

* Please correct.
### Question ID: AHS.317_01.000
#### Instrument Variable Name: AHCL18N
#### QuestionnaireFileName: Sample Adult

**QuestionText:**

1 of 2

How long have you had a weight problem?

* Enter number for time with a weight problem.

* Enter '95" for 95 or more.

* Enter "96" if since birth.

| 01-94 | 01-94 |
| 95    | 95+   |
| 96    | Since birth |
| 97    | Refused |
| 99    | Don't know |

**UniverseText:** Sample adults 18+ who had difficulty due to a weight problem

**SkipInstructions:**

- `<1-95,D>[goto AHCL18T]
- `<R>[store "R" in AHCL18T] [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]
- `<96>[store "6" in AHCL18T] [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]

### Question ID: AHS.317_02.000
#### Instrument Variable Name: AHCL18T
#### QuestionnaireFileName: Sample Adult

**QuestionText:**

2 of 2

* Enter time period for time with weight problem.

1 Day(s)
2 Week(s)
3 Month(s)
4 Year(s)
6 Since birth
7 Refused
9 Don't know

**UniverseText:** Sample adults 18+ who answered 1-95, D for the "number" part of this 2-part question

**SkipInstructions:**

- `<1-4,R,D>[goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]
- `<6> goto ERR2_AHCL18T
- `[if [AHCL18N = Number greater than person years old and AHCL18T= 4]] goto ERR1_AHCL18T

**Hard Edit:** ERR_AHCL18T

* Time with condition cannot be greater than age.
* Please correct.
How long have you had a missing limb (finger, toe, or digit)?

* Enter number for time with a missing limb.

* Enter ’95’ for 95 or more.

* Enter ”96” if since birth.

01-94
95
96
97
99

Sample adults 18+ who had difficulty due to a missing limb

Enter time period for time with missing limb.

1 Day(s)
2 Week(s)
3 Month(s)
4 Year(s)
6 Since birth
7 Refused
9 Don't know

Sample adults 18+ who answered 1-95, D for the ”number” part of this 2-part question

Hard Edit:

* Time with condition cannot be greater than age.
* Please correct.
### 2013 NHIS Questionnaire - Sample Adult

**Adult Health Status & Limitations**

Document Version Date: 29-May-14

<table>
<thead>
<tr>
<th>Question ID:</th>
<th>AHS.319_01.000</th>
<th>Instrument Variable Name:</th>
<th>AHCL20N</th>
<th>QuestionnaireFileName:</th>
<th>Sample Adult</th>
</tr>
</thead>
<tbody>
<tr>
<td>QuestionText:</td>
<td>1 of 2</td>
<td>How long have you had a kidney, bladder or renal problem?</td>
<td>01-94</td>
<td>95</td>
<td>96</td>
</tr>
<tr>
<td></td>
<td></td>
<td>* Enter number for time with a kidney, bladder or renal problem.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>* Enter '95&quot; for 95 or more.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>* Enter &quot;96&quot; if since birth.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>UniverseText:</td>
<td>Sample adults 18+ who had difficulty due to a kidney, bladder or renal problem</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>SkipInstructions:</td>
<td>&lt;1-95,D&gt;[goto AHCL20T]</td>
<td>&lt;R&gt;[store &quot;R&quot; in AHCL20T] [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]</td>
<td>&lt;96&gt;[store &quot;6&quot; in AHCL20T] [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Question ID:</th>
<th>AHS.319_02.000</th>
<th>Instrument Variable Name:</th>
<th>AHCL20T</th>
<th>QuestionnaireFileName:</th>
<th>Sample Adult</th>
</tr>
</thead>
<tbody>
<tr>
<td>QuestionText:</td>
<td>2 of 2</td>
<td>* Enter time period for time with kidney, bladder or renal problem.</td>
<td>1</td>
<td>Day(s)</td>
<td>2</td>
</tr>
<tr>
<td></td>
<td></td>
<td>6</td>
<td>Since birth</td>
<td>7</td>
<td>Refused</td>
</tr>
<tr>
<td>UniverseText:</td>
<td>Sample adults 18+ who answered 1-95, D for the &quot;number&quot; part of this 2-part question</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>SkipInstructions:</td>
<td>&lt;1-4, R,D&gt;[goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]</td>
<td>&lt;6&gt;[goto ERR2_AHCL20T] [if [AHCL20N = Number greater than person years old and AHCL20T= 4]] goto ERR1_AHCL20T</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Hard Edit:</td>
<td>ERR_AHCL20T</td>
<td>* Time with condition cannot be greater than age.</td>
<td>* Please correct.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
How long have you had a circulation problem (including blood clots)?

* Enter number for time with a circulation problem.

* Enter "95" for 95 or more.

* Enter "96" if since birth.

01-94 1-94
95 95+
96 Since birth
97 Refused
99 Don't know

Sample adults 18+ who had difficulty due to a circulation problem

* Time with condition cannot be greater than age.
* Please correct.
How long have you had benign tumors or cysts?

* Enter number for time with benign tumors or cysts.

* Enter "95" for 95 or more.

* Enter "96" if since birth.

1-94
95
96 Since birth
97 Refused
99 Don't know

Sample adults 18+ who had difficulty due to benign tumors or cysts

* Time with condition cannot be greater than age.

* Please correct.
How long have you had fibromyalgia or lupus?

* Enter number for time with fibromyalgia or lupus.

* Enter "95" for 95 or more.

* Enter "96" if since birth.

UniverseText: Sample adults 18+ who had difficulty due to fibromyalgia or lupus

SkipInstructions: <1-95,D> [goto AHCL23T]
<R> [store "R" in AHCL23T] [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]
<96> [store "6" in AHCL23T] [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]

* Enter time period for time with fibromyalgia or lupus.

1 Day(s)
2 Week(s)
3 Month(s)
4 Year(s)
6 Since birth
7 Refused
9 Don't know

UniverseText: Sample adults 18+ who answered 1-95, D for the "number" part of this 2-part question

SkipInstructions: <1-4, R,D> [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]
<6> goto ERR2_AHCL23T
[if [AHCL23N = Number greater than person years old and AHCL23T= 4]] goto ERR1_AHCL23T

Hard Edit: ERR_AHCL23T
* Time with condition cannot be greater than age.
* Please correct.
**Question Text:**

1 of 2

How long have you had osteoporosis or tendinitis?

* Enter number for time with osteoporosis or tendinitis.

* Enter '95" for 95 or more.

* Enter "96" if since birth.

**Universe Text:**

Sample adults 18+ who had difficulty due to osteoporosis or tendinitis

**Skip Instructions:**

<1-95,D>[goto AHCL24T]

<R>[store "R" in AHCL24T] [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]

<96>[store "6" in AHCL24T] [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]
How long have you had epilepsy or seizures?

* Enter number for time with epilepsy or seizures.
* Enter '95'' for 95 or more.
* Enter "96" if since birth.

01-94
95
96
97
99

Sample adults 18+ who had difficulty due to epilepsy or seizures

* Time with condition cannot be greater than age.
* Please correct.
2013 NHIS Questionnaire - Sample Adult
Adult Health Status & Limitations

Document Version Date: 29-May-14

Question ID: AHS.325_01.000  Instrument Variable Name: AHCL26N  QuestionnaireFileName: Sample Adult

QuestionText: 1 of 2

How long have you had multiple sclerosis (MS) or muscular dystrophy (MD)?

* Enter number for time with multiple sclerosis (MS) or muscular dystrophy (MD).

* Enter '95'' for 95 or more.

* Enter "96" if since birth.

01-94 1-94
95 95+
96 Since birth
97 Refused
99 Don't know

UniverseText: Sample adults 18+ who had difficulty due to multiple sclerosis or muscular dystrophy

SkipInstructions: <1-95,D>[goto AHCL26T]
<R>[store "R" in AHCL26T] [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]
<96>[store "6" in AHCL26T] [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]

Question ID: AHS.325_02.000  Instrument Variable Name: AHCL26T  QuestionnaireFileName: Sample Adult

QuestionText: 2 of 2

* Enter time period for time with multiple sclerosis or muscular dystrophy.

1 Day(s)
2 Week(s)
3 Month(s)
4 Year(s)
6 Since birth
7 Refused
9 Don't know

UniverseText: Sample adults 18+ who answered 1-95, D for the "number" part of this 2-part question

SkipInstructions: <1-4,R,D>[goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]
<6> goto ERR2_AHCL26T
[if [AHCL26N = Number greater than person years old and AHCL26T= 4]] goto ERR1_AHCL26T

Hard Edit: ERR_AHCL26T

* Time with condition cannot be greater than age.
* Please correct.
2013 NHIS Questionnaire - Sample Adult
Adult Health Status & Limitations

Document Version Date: 29-May-14

Question ID: AHS.326_01.000  Instrument Variable Name: AHCL27N  QuestionnaireFileName: Sample Adult

QuestionText: 1 of 2

How long have you had polio(myelitis), paralysis or para/quadriplegia?

* Enter number for time with polio (myelitis), paralysis or para/quadriplegia.

* Enter '95" for 95 or more.

* Enter "96" if since birth.

<p>| | | | | | |</p>
<table>
<thead>
<tr>
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</tr>
</thead>
<tbody>
<tr>
<td>01-94</td>
<td>01-94</td>
<td>95</td>
<td>95+</td>
<td>Since birth</td>
<td>Refused</td>
</tr>
<tr>
<td>96</td>
<td>Don't know</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

UniverseText: Sample adults 18+ who had difficulty due to polio(myelitis), paralysis or para/quadriplegia

SkipInstructions:

<1-95,D>[goto AHCL27T]

<R>[store "R" in AHCL27T] [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]

<96>[store "6" in AHCL27T] [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]

Question ID: AHS.326_02.000  Instrument Variable Name: AHCL27T  QuestionnaireFileName: Sample Adult

QuestionText: 2 of 2

* Enter time period for time with polio(myelitis), paralysis or para/quadriplegia.

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<tbody>
<tr>
<td>1</td>
<td>Day(s)</td>
<td>2</td>
<td>Week(s)</td>
<td>3</td>
<td>Month(s)</td>
</tr>
<tr>
<td>4</td>
<td>Year(s)</td>
<td>6</td>
<td>Since birth</td>
<td>7</td>
<td>Refused</td>
</tr>
<tr>
<td>9</td>
<td>Don't know</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

UniverseText: Sample adults 18+ who answered 1-95, D for the "number" part of this 2-part question

SkipInstructions:

<1- 4, R,D>[goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]

<6> goto ERR2_AHCL27T

[if [AHCL27N = Number greater than person years old and AHCL27T= 4]] goto ERR1_AHCL27T

Hard Edit:

ERR_AHCL27T

* Time with condition cannot be greater than age.

* Please correct.
How long have you had Parkinson's disease or tremors?

* Enter number for time with Parkinson's disease or tremors.

* Enter '95" for 95 or more.

* Enter "96" if since birth.

1-94
95
96
97 Refused
99 Don't know

Sample adults 18+ who had difficulty due to Parkinson's disease or tremors

* Enter time period for time with Parkinson's disease or tremors.

1 Day(s)
2 Week(s)
3 Month(s)
4 Year(s)
6 Since Birth
7 Refused
9 Don't know

Sample adults 18+ who answered 1-95, D for the "number" part of this 2-part question

* Time with condition cannot be greater than age.
* Please correct.
How long have you had nerve damage (including carpal tunnel syndrome)?

* Enter number for time with nerve damage (including carpal tunnel syndrome).
* Enter "95" for 95 or more.

* Enter "96" if since birth.

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>01-94</td>
<td>01-94</td>
</tr>
<tr>
<td>95</td>
<td>95+</td>
</tr>
<tr>
<td>96</td>
<td>Since birth</td>
</tr>
<tr>
<td>97</td>
<td>Refused</td>
</tr>
<tr>
<td>99</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

Sample adults 18+ who had difficulty due to nerve damage

* Enter time period for time with nerve damage.

<p>| | |</p>
<table>
<thead>
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</thead>
<tbody>
<tr>
<td>1</td>
<td>Day(s)</td>
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<tr>
<td>2</td>
<td>Week(s)</td>
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<tr>
<td>3</td>
<td>Month(s)</td>
</tr>
<tr>
<td>4</td>
<td>Year(s)</td>
</tr>
<tr>
<td>6</td>
<td>Since birth</td>
</tr>
<tr>
<td>7</td>
<td>Refused</td>
</tr>
<tr>
<td>99</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

Sample adults 18+ who answered 1-95, D for the "number" part of this 2-part question

* Time with condition cannot be greater than age.
* Please correct.
Question ID: AHS.329_01.000  Instrument Variable Name: AHCL30N  QuestionnaireFileName: Sample Adult

QuestionText: 1 of 2

How long have you had a hernia?

* Enter number for time with a hernia.

* Enter "95" for 95 or more.

* Enter "96" if since birth.

01-94  01-94
95    95+
96    Since birth
97    Refused
99    Don't know

UniverseText: Sample adults 18+ who had difficulty due to a hernia

SkipInstructions: <1-95,D>[goto AHCL30T]  
<R>[store "R" in AHCL30T] [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]
<96>[store "6" in AHCL30T] [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]

Question ID: AHS.329_02.000  Instrument Variable Name: AHCL30T  QuestionnaireFileName: Sample Adult

QuestionText: 2 of 2

* Enter time period for time with hernia.

1    Day(s)
2    Week(s)
3    Month(s)
4    Year(s)
6    Since birth
7    Refused
9    Don't know

UniverseText: Sample adults 18+ who answered 1-95, D for the "number" part of this 2-part question

SkipInstructions: <1-4,R,D>[goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]
<6> goto ERR2_AHCL30T
[if [AHCL30N = Number greater than person years old and AHCL30T= 4]] goto ERR1_AHCL30T

Hard Edit: ERR_AHCL30T

* Time with condition cannot be greater than age.
* Please correct.
How long have you had an ulcer?

* Enter number for time with an ulcer.

* Enter "95" for 95 or more.

* Enter "96" if since birth.

01-94  1-94
95    95+
96  Since birth
97  Refused
99  Don't know

Sample adults 18+ who had difficulty due to an ulcer

<1- 4, R,D>[goto AHCL31T]
<R>[store "R" in AHCL31T] [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]
<96>[store "6" in AHCL31T] [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]

* Time with condition cannot be greater than age.
* Please correct.
How long have you had varicose veins or hemorrhoids?

* Enter number for time with varicose veins or hemorrhoids.

* Enter '95'' for 95 or more.

* Enter "96" if since birth.

1-94
95
96 Since birth
97 Refused
99 Don't know

Sample adults 18+ who had difficulty due to varicose veins or hemorrhoids

<1-95,D>[goto AHCL32T]
<R>[store "R" in AHCL32T] [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]
<96>[store "6" in AHCL32T] [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]

* Enter time period for time with varicose veins or hemorrhoids.

1 Day(s)
2 Week(s)
3 Month(s)
4 Year(s)
6 Since birth
7 Refused
9 Don't know

Sample adults 18+ who answered 1-95, D for the "number" part of this 2-part question

<1- 4, R,D>[goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]
<6> goto ERR2_AHCL32T
[if [AHCL32N = Number greater than person years old and AHCL32T= 4]] goto ERR1_AHCL32T

* Time with condition cannot be greater than age.
* Please correct.
2013 NHIS Questionnaire - Sample Adult
Adult Health Status & Limitations

Document Version Date: 29-May-14

Question ID: AHS.332_01.000
Instrument Variable Name: AHCL33N
QuestionnaireFileName: Sample Adult

QuestionText: 1 of 2

How long have you had a thyroid problem, Grave's disease or gout?

* Enter number for time with a thyroid problem, Grave's disease or gout.

* Enter '95" for 95 or more.

* Enter "96" if since birth.

01-94 1-94
95 95+
96 Since birth
97 Refused
99 Don't know

UniverseText: Sample adults 18+ who had difficulty due to a thyroid problem, Grave's disease or gout

SkipInstructions: <1-95,D>[goto AHCL33T]
<R>[store "R" in AHCL33T] [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]
<96>[store "6" in AHCL33T] [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]

Question ID: AHS.332_02.000
Instrument Variable Name: AHCL33T
QuestionnaireFileName: Sample Adult

QuestionText: 2 of 2

* Enter time period for time with thyroid problem, Grave's disease or gout.

1 Day(s)
2 Week(s)
3 Month(s)
4 Year(s)
6 Since birth
7 Refused
9 Don't know

UniverseText: Sample adults 18+ who answered 1-95, D for the "number" part of this 2-part question

SkipInstructions: <1-4, R,D>[goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]
<6> goto ERR2_AHCL33T
[if [AHCL33N = Number greater than person years old and AHCL33T= 4]] goto ERR1_AHCL33T

Hard Edit: ERR_AHCL33T
* Time with condition cannot be greater than age.
* Please correct.
How long have you had a knee problem?
* Enter number for time with a knee problem.
* Enter '95" for 95 or more.
* Enter "96" if since birth.

01-94  01-94
95    95+
96    Since birth
97    Refused
99    Don't know

Sample adults 18+ who had difficulty due to a knee problem

* Enter time period for time with knee problem.
1     Day(s)
2     Week(s)
3     Month(s)
4     Year(s)
6     Since birth
7     Refused
9     Don't know

Sample adults 18+ who answered 1-95, D for the "number" part of this 2-part question

* Time with condition cannot be greater than age.
* Please correct.
How long have you had migraine headaches?

* Enter number for time with migraine headaches.

* Enter '95' for 95 or more.

* Enter "96" if since birth.

01-94
95
96 Since birth
97 Refused
99 Don't know

Sample adults 18+ who had difficulty due to migraine headaches

* Enter time period for time with migraine headaches.

1 Day(s)
2 Week(s)
3 Month(s)
4 Year(s)
6 Since birth
7 Refused
9 Don't know

Sample adults 18+ who answered 1-95, D for the "number" part of this 2-part question

* Time with condition cannot be greater than age.
* Please correct.
Question ID: AHS.335_01.000  Instrument Variable Name: AHCL90N  QuestionnaireFileName: Sample Adult

QuestionText: 1 of 2

How long have you had {problem in AFLHCA90}?

* Enter number for time with {problem in AFLHCA90}.
* Enter "95" for 95 or more.
* Enter "96" if since birth.

01-94 01-94
95 95+
96 Since birth
97 Refused
99 Don't know

UniverseText: Sample adults 18+ who had difficulty due to {problem in AFLHCA90}

SkipInstructions: <1-95,D>[goto AHCL90T]
<R>[store "R" in AHCL90T] [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]
<96>[store "6" in AHCL90T] [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]

Question ID: AHS.335_02.000  Instrument Variable Name: AHCL90T  QuestionnaireFileName: Sample Adult

QuestionText: 2 of 2

* Enter time period for time with {problem in AFLHCA90}.

1 Day(s)
2 Week(s)
3 Month(s)
4 Year(s)
6 Since birth
7 Refused
9 Don't know

UniverseText: Sample adults 18+ who answered 1-95, D for the "number" part of this 2-part question

SkipInstructions: <1- 4, R,D>[[if 91 selected in AFLHCA goto AFLHCA_S2]
Else goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]
<6> goto ERR2_AHCL90T
[if [AHCL90N = Number greater than person years old and AHCL90T= 4]] goto ERR1_AHCL90T

Hard Edit: ERR_AHCL90T

* Time with condition cannot be greater than age.
* Please correct.
How long have you had {problem in AFLHCA91}? 
* Enter number for time with {problem in AFLHCA91}. 
* Enter '95' for 95 or more. 
* Enter "96" if since birth.

01-94 1-94 
95 95+ 
96 Since birth 
97 Refused 
99 Don't know

Sample adults 18+ who had difficulty due to {problem in AFLHCA91} 

* Enter time period for time with {problem in AFLHCA91}. 
1 Day(s) 
2 Week(s) 
3 Month(s) 
4 Year(s) 
6 Since birth 
7 Refused 
9 Don't know

Sample adults 18+ who answered 1-95, D for the "number" part of this 2-part question
### 2013 NHIS Questionnaire - Sample Adult

#### Adult Health Behaviors

**Document Version Date:** 29-May-14

<table>
<thead>
<tr>
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<th>AHB.010_00.000</th>
<th>Instrument Variable Name:</th>
<th>SMKEV</th>
<th>QuestionnaireFileName:</th>
<th>Sample Adult</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>QuestionText:</strong></td>
<td>These next questions are about cigarette smoking.</td>
<td></td>
<td></td>
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<tr>
<td></td>
<td>Have you smoked at least 100 cigarettes in your ENTIRE LIFE?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1</td>
<td>Yes</td>
<td></td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>2</td>
<td>No</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>Refused</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>Don't know</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>UniverseText:</strong></td>
<td>Sample adults 18+</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>SkipInstructions:</strong></td>
<td>&lt;1&gt;[goto SMKREG]</td>
<td></td>
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</tr>
<tr>
<td></td>
<td>&lt;2,R,D&gt;[goto OTHCIGEV]</td>
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<thead>
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<th>AHB.020_00.000</th>
<th>Instrument Variable Name:</th>
<th>SMKREG</th>
<th>QuestionnaireFileName:</th>
<th>Sample Adult</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>QuestionText:</strong></td>
<td>How old were you when you FIRST started to smoke fairly regularly?</td>
<td></td>
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<tr>
<td></td>
<td>* Enter '6' if less than 6 years old.</td>
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<tr>
<td></td>
<td>* Enter '95' if 95 years old or older.</td>
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<tr>
<td></td>
<td>* Enter '96' if never smoked regularly.</td>
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<tr>
<td>06-84</td>
<td>6 - 84 years</td>
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<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>85</td>
<td>85 years or older</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>96</td>
<td>Never smoked regularly</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>97</td>
<td>Refused</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>99</td>
<td>Don't know</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>UniverseText:</strong></td>
<td>Sample adults 18+ who ever smoked 100 cigarettes</td>
<td></td>
<td></td>
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<td></td>
</tr>
<tr>
<td><strong>SkipInstructions:</strong></td>
<td>&lt;6-95,96,R,D&gt; [goto SMKNOW]</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>[If SMKREG gt AGE and SMKREG ne &lt;96&gt;, goto ERR_SMKREG]</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Hard Edit:</strong></td>
<td>ERR_SMKREG</td>
<td></td>
<td></td>
<td></td>
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</tr>
<tr>
<td></td>
<td>* Starting age exceeded current age.</td>
<td></td>
<td></td>
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</tr>
<tr>
<td></td>
<td>* Please correct.</td>
<td></td>
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</tr>
</tbody>
</table>
Do you NOW smoke cigarettes every day, some days or not at all?

1. Every day
2. Some days
3. Not at all
7. Refused
9. Don't know

Sample adults 18+ who ever smoked 100 cigarettes

1 of 2

How long has it been since you quit smoking cigarettes?
* Enter number for time since quit smoking.
* Enter ‘95’ for 95 years old or older.

01-94 1 - 94
95 95+
97 Refused
99 Don't know

Sample adults 18+ who quit smoking
**2013 NHIS Questionnaire - Sample Adult**

**Adult Health Behaviors**

Document Version Date: 29-May-14

---

**Question ID:** AHB.040_02.000  **Instrument Variable Name:** SMKQTTP  **QuestionnaireFileName:** Sample Adult

**QuestionText:**

2 of 2

* Enter time period for time since quit smoking.

1 Day(s)
2 Week(s)
3 Month(s)
4 Year(s)
7 Refused
9 Don't know

**UniverseText:**

Sample adults 18+ who quit smoking

**SkipInstructions:**

<1-4> [goto OTHCIGEV]  
<4> [if SMKQTNO gt (AGE - <15>), goto ERR1_SMKQTTP  
if (SMKREG + SMKQTNO gt AGE), goto ERR2_SMKQTTP.

**Hard Edit:**

ERR2_SMKQTTP

* Age started ([Fill1: SMKREG]) + years since quit ([Fill2: SMKQTNO]) exceeds current age ([Fill3: AGE]).  
* Please correct.

**Soft Edit:**

ERR1_SMKQTTP

* Respondent quit smoking before age 15?  
* Please verify.

---

**Question ID:** AHB.050_00.000  **Instrument Variable Name:** CIGSDA1  **QuestionnaireFileName:** Sample Adult

**QuestionText:**

On the average, how many cigarettes do you now smoke a day?

* Enter '1' if less than 1 cigarette.

* Enter '95' if 95 or more cigarettes.

01-94 1 - 94 cigarettes
95 95+ cigarettes
97 Refused
99 Don't know

**UniverseText:**

Sample adults 18+ who are current every day smokers

**SkipInstructions:**

<1-95,R,D> [goto CIGQTYR]
On how many of the PAST 30 DAYS did you smoke a cigarette?

*Enter '0' for None.

00 None
01-30 1-30 days
97 Refused
99 Don't know

On the average, when you smoked during the PAST 30 DAYS, about how many cigarettes did you smoke a day?

* Enter '1' if less than 1.
* Enter '95' if 95 or more cigarettes.

01-94 1-94 cigarettes
95 95+ cigarettes
97 Refused
99 Don't know

Sample adults 18+ who are current some day smokers

<0>[goto CIGQTYR]
<1-30,R,D> [goto CIGSDA2]
During the PAST 12 MONTHS, have you stopped smoking for more than one day BECAUSE YOU WERE TRYING TO QUIT SMOKING?

1 Yes
2 No
7 Refused
9 Don't know

Sample adults 18+ who are every day or someday smokers

These next questions are about your use of tobacco products OTHER THAN CIGARETTES. Tobacco products OTHER THAN CIGARETTES that are smoked include cigars, pipes, water pipes or hookahs, very small cigars that look like cigarettes, bidis (bee-dees) or cigarillos (cig-a-ril-los).

Have you ever smoked tobacco products other than cigarettes EVEN ONE TIME?

* Do not include electronic cigarettes or e-cigarettes.

1 Yes
2 No
7 Refused
9 Don't know

Sample adults 18+
**Question ID:** AHB.085_00.020  
**Instrument Variable Name:** OTHCIGED  
**QuestionnaireFileName:** Sample Adult

**QuestionText:**
Do you NOW smoke tobacco products other than cigarettes every day, some days, rarely, or not at all?

1. Every day
2. Some days
3. Rarely
4. Not at all
5. Refused
6. Don't know

**UniverseText:** Sample adults 18+ who have ever smoked tobacco products other than cigarettes

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

---

**Question ID:** AHB.085_00.030  
**Instrument Variable Name:** SMKLESEV  
**QuestionnaireFileName:** Sample Adult

**QuestionText:**

? [F1]

Smokeless tobacco products are placed in the mouth or nose and can include chewing tobacco, snuff, dip, snus (snoose), or dissolvable tobacco.

Have you ever used smokeless tobacco products EVEN ONE TIME?

* Do not include nicotine replacement therapy products (patch, gum, lozenge, spray), which are considered smoking cessation treatments.

1. Yes
2. No
3. Refused
4. Don't know

**UniverseText:** Sample adults 18+

**SkipInstructions:** <1> [goto SMKLESEV]  
<2,R,D> [if SMKEV=1 or OTHCIGEV=1, goto TOBLASYR]; else goto VIGNO]
**2013 NHIS Questionnaire - Sample Adult**

**Adult Health Behaviors**

Document Version Date: 29-May-14

---

**Question ID:** AHB.085_00.040  **Instrument Variable Name:** SMKLESED  **QuestionnaireFileName:** Sample Adult

**QuestionText:** Do you NOW use smokeless tobacco products every day, some days, rarely, or not at all?

1. Every day  
2. Some days  
3. Rarely  
4. Not at all  
7. Refused  
9. Don't know

**UniverseText:** Sample adults 18+ who have ever used smokeless tobacco products

**SkipInstructions:** <1-4,R,D> goto TOBLASYR

---

**Question ID:** AHB.085_00.050  **Instrument Variable Name:** TOBLASYR  **QuestionnaireFileName:** Sample Adult

**QuestionText:** Around this time last year, were you using ANY KIND of tobacco product?

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

**UniverseText:** Sample adults 18+ who smoked at least 100 cigarettes in their entire life, ever smoked tobacco products other than cigarettes, or ever used smokeless tobacco products

**SkipInstructions:** <1,2,R,D> If (TOBLASYR='1' or SMKNOW in('1','2') or OTHCIGED in('1','2','3') or SMKLESED in('1','2','3')) and CIGQTYR ne '2' [goto TOBQTYR];   
Else If (TOBLASYR ne'1' & SMKNOW not in('1','2')& OTHCIGED not in('1','2','3') & SMKLESED not in('1','2','3'))  
   or CIGQTYR = '2' [goto VIGNO]
During the past 12 months, have you stopped using ALL KINDS of tobacco products for more than one day because you were trying to quit using tobacco?

* “All kinds” means trying to quit using tobacco completely, including smoking cigarettes, smoking products other than cigarettes, and using smokeless tobacco products.

1 Yes
2 No
7 Refused
9 Don't know

Sample adults 18+ who were using tobacco products around this time last year or were current users of any tobacco products (cigarettes, non-cigarette tobacco, or smokeless)
Question ID: AHB.090_02.000  Instrument Variable Name: VIGTP  QuestionnaireFileName: Sample Adult

QuestionText: 2 of 2

* Enter time period for vigorous leisure-time physical activities.

0  Never
1  Per day
2  Per week
3  Per month
4  Per year
6  Unable to do this activity
7  Refused
9  Don't know

UniverseText: Sample adults 18+ who do vigorous activities

SkipInstructions: <1-4> goto VIGLNGNO

[if (VIGNO gt <4> and VIGTP eq <1>) or
 (VIGNO gt <28> and VIGTP eq <2>) or
 (VIGNO gt <31> and VIGTP eq <3>) or
 (VIGNO gt <365> and VIGTP eq <4>) goto ERR1_VIGTP]

Soft Edit: ERR1_VIGTP

* [Fill1: VIGNO] times per [Fill2: VIGTP] is unusually high.
* Please verify.

Question ID: AHB.100_01.000  Instrument Variable Name: VIGLNGNO  QuestionnaireFileName: Sample Adult

QuestionText: 1 of 2

About how long do you do these vigorous leisure-time physical activities each time?

* Enter number for length of vigorous leisure-time physical activities.

001-995  1-995
997  Refused
999  Don't know

UniverseText: Sample adults 18+ who do vigorous activities

SkipInstructions: <1-995>[goto VIGLNGTP]
<R,D>[goto MODNO]
**2013 NHIS Questionnaire - Sample Adult**

**Adult Health Behaviors**

**Document Version Date: 29-May-14**

---

**Question ID:** AHB.100_02.000  **Instrument Variable Name:** VIGLNGTP  **QuestionnaireFileName:** Sample Adult

**QuestionText:**

2 of 2

* Enter time period for length of vigorous leisure-time physical activities.

1  Minutes
2  Hours
7  Refused
9  Don't know

**UniverseText:** Sample adults 18+ who do vigorous activities

**SkipInstructions:**

<1,2> goto MODNO

if VIGLNGNO lt <10> and VIGLNGTP eq <1> goto ERR1_VIGLNGTP;

if (VIGLNGNO gt <90> and VIGLNGTP eq <1>) or if VIGLNGNO gt <2> and VIGLNGTP eq <2> goto ERR2_VIGLNGTP

**Hard Edit:**

* Question asked for activities lasting at least 10 minutes.
* Please correct.

**Soft Edit:**

ERR2_VIGLNGTP

* [Fill1: VIGLNGNO] [fill2: VIGLNGTP] is unusually high.
* Please verify.

---

**Question ID:** AHB.110_01.000  **Instrument Variable Name:** MODNO  **QuestionnaireFileName:** Sample Adult

**QuestionText:**

How often do you do LIGHT OR MODERATE LEISURE-TIME physical activities for AT LEAST 10 MINUTES that cause ONLY LIGHT sweating or a SLIGHT to MODERATE increase in breathing or heart rate?

* If necessary, prompt with: How many times per day, per week, per month, or per year do you do these activities?

* Enter number of light or moderate leisure-time physical activities.

* Enter '0' for Never.

* Enter '996' if unable to do this type of activity.

000  Never
001-995  1-995 time(s)
996  Unable to do this type activity
997  Refused
999  Don't know

**UniverseText:** Sample adults 18+

**SkipInstructions:**

<1-995>[goto MODTP]

<0, 996, R,D>[goto STRNGNO]
**Question ID:** AHB.110_02.000  
**Instrument Variable Name:** MODTP  
**QuestionnaireFileName:** Sample Adult

**QuestionText:** 2 of 2  

* Enter time period for light or moderate leisure-time physical activities  

<table>
<thead>
<tr>
<th>0</th>
<th>Never</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Per day</td>
</tr>
<tr>
<td>2</td>
<td>Per week</td>
</tr>
<tr>
<td>3</td>
<td>Per month</td>
</tr>
<tr>
<td>4</td>
<td>Per year</td>
</tr>
<tr>
<td>6</td>
<td>Unable to do this activity</td>
</tr>
<tr>
<td>7</td>
<td>Refused</td>
</tr>
<tr>
<td>9</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

**UniverseText:** Sample adults 18+ who do light or moderate activities  

**SkipInstructions:**  
<1-4> goto MODLNGNO  

[if (MODNO gt <4> and MODTP eq <1>) or  
(MODNO gt <28> and MODTP eq <2>) or  
(MODNO gt <31> and MODTP eq <3>) or  
(MODNO gt <365> and MODTP eq <4>)] goto ERR_MODNO

**Soft Edit:**  
* [Fill1: MODNO] times per [fill2: MODTP] is unusually high.  
* Please verify.

---

**Question ID:** AHB.120_01.000  
**Instrument Variable Name:** MODLNGNO  
**QuestionnaireFileName:** Sample Adult

**QuestionText:** 1 of 2  

About how long do you do these light or moderate leisure-time physical activities each time?  

* Enter number for length of light or moderate leisure-time physical activities.  

<table>
<thead>
<tr>
<th>001-995</th>
<th>1-995</th>
</tr>
</thead>
<tbody>
<tr>
<td>997</td>
<td>Refused</td>
</tr>
<tr>
<td>999</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

**UniverseText:** Sample adults 18+ who do light or moderate activities  

**SkipInstructions:**  
<1-995>[goto MODLNGTP]  
<R,D>[goto STRNGNO]
* Enter time period for length of light or moderate leisure-time physical activities.

1 Minutes
2 Hours
7 Refused
9 Don't know

UniverseText: Sample adults 18+ who do light or moderate activities

SkipInstructions: <1,2> goto STRNGNO
if MODLNGNO lt <10> and MODLNGTP eq <1> goto ERR1_MODLNGTP
if MODLNGNO gt <90> and MODLNGTP eq <1> or if MODLNGNO gt <2> and MODLNGTP eq <2> goto ERR2_MODLNGTP

Hard Edit: ERR1_MODLNGTP
* Question asked for activities lasting at least 10 minutes.
* Please correct.

Soft Edit: ERR2_MODLNGTP
* [Fill1: MODLNGNO] [Fill2: MODLNGTP] is unusually high.
* Please verify.

* Question ID: AHB.130_01.000  Instrument Variable Name: STRNGNO  QuestionnaireFileName: Sample Adult

QuestionText: How often do you do LEISURE-TIME physical activities specifically designed to STRENGTHEN your muscles such as lifting weights or doing calisthenics? (Include all such activities even if you have mentioned them before.)

* Read if necessary: How many times per day, per week, per month, or per year do you do these activities?

* Enter number for strengthening activities.

* Enter '0' for Never.

* Enter '996' for Unable to do this type activity

000 Never
001-995 1-995 time(s)
996 Unable to do this type activity
997 Refused
999 Don't know

UniverseText: Sample adults 18+

SkipInstructions: <1-995>[goto STRNGTP]
<0, 996,R,D>[goto ALC1YR]
Question ID: AHB.130_02.000  Instrument Variable Name: STRNGTP  QuestionnaireFileName: Sample Adult

QuestionText: 2 of 2

* Enter time period for strengthening activities

0     Never
1     Per day
2     Per week
3     Per month
4     Per year
6     Unable to do this activity
7     Refused
9     Don't know

UniverseText: Sample adults 18+ who do strengthening activities

SkipInstructions: <1-4> goto ALC1YR
[If (STRNGNO gt <4> & STRNGTP = <1>) or (STRNGNO gt <28> & STRNGTP = <2>) or (STRNGNO gt <31> & STRNGTP = <3>) or (STRNGNO gt <365> & STRNGTP = <4>) goto ERR_STRNGTP]

Soft Edit: ERR_STRNGTP

* [Fill1: STRNGNO] times per [Fill2: STRNGTP] is unusually high.
* Please verify.

Question ID: AHB.140_00.000  Instrument Variable Name: ALC1YR  QuestionnaireFileName: Sample Adult

QuestionText: These next questions are about drinking alcoholic beverages. Included are liquor such as whiskey or gin, beer, wine, wine coolers, and any other type of alcoholic beverage.

In ANY ONE YEAR, have you had at least 12 drinks of any type of alcoholic beverage?

1     Yes
2     No
7     Refused
9     Don't know

UniverseText: Sample adults 18+

SkipInstructions: <1> [goto ALC12MNO]
<2,R,D> [goto ALCLIFE]
### Question ID: AHB.150_00.000  
**Instrument Variable Name:** ALCLIFE  
**QuestionnaireFileName:** Sample Adult

<table>
<thead>
<tr>
<th>QuestionText</th>
</tr>
</thead>
<tbody>
<tr>
<td>In your ENTIRE LIFE, have you had at least 12 drinks of any type of alcoholic beverage?</td>
</tr>
<tr>
<td>1</td>
</tr>
<tr>
<td>2</td>
</tr>
<tr>
<td>7</td>
</tr>
<tr>
<td>9</td>
</tr>
</tbody>
</table>

**UniverseText:** Sample adults 18+ who have not had 12 drinks in any one year or don't know if they did or refused to answer

**SkipInstructions:**  
<1> [goto ALC12MNO]  
<2,R,D> [goto AHGT_FT]

---

### Question ID: AHB.160_01.000  
**Instrument Variable Name:** ALC12MNO  
**QuestionnaireFileName:** Sample Adult

<table>
<thead>
<tr>
<th>QuestionText</th>
</tr>
</thead>
</table>
| In the PAST YEAR, how often did you drink any type of alcoholic beverage?  
* Read if necessary: "How many days per week, per month or per year did you drink?"  
* Enter number for how often alcoholic beverages were consumed in the past year.  
* Enter '0' for Never. |  
| 000 | Never |  
| 001-365 | 1-365 days |  
| 997 | Refused |  
| 999 | Don't know |  

**UniverseText:** Sample adults 18+ who have had at least 12 drinks in any one year or at least 12 drinks in their entire life

**SkipInstructions:**  
<1-365>[goto ALC12MTP]  
<0,R,D>[goto AHGT_FT]
**2013 NHIS Questionnaire - Sample Adult**

**Adult Health Behaviors**

Document Version Date: 29-May-14

---

**Question ID:** AHB.160_02.000  
**Instrument Variable Name:** ALC12MTP  
**QuestionnaireFileName:** Sample Adult

**QuestionText:**

2 of 2

* Enter time period for how often alcoholic beverages were consumed in the past year.

0  Never/None
1  Week
2  Month
3  Year
7  Refused
9  Don't know

**UniverseText:** Sample adults 18+ who drank at least once in the past year

**SkipInstructions:**

<1-3> [goto ALCAMT]

[If (ALC12MNO gt <7> & ALC12MTP = <1>) or (ALC12MNO gt <31> & ALC12MTP = <2>) or (ALC12MNO gt <365> & ALC12MTP = <3>) goto ERR_ALC12MTP]

**Hard Edit:**

ERR_ALC12MTP

* [Fill1: ALC12MNO] days per [Fill2: ALC12MTP] exceeds number possible in this time period.  
* Please correct.

---

**Question ID:** AHB.170_00.000  
**Instrument Variable Name:** ALCAMT  
**QuestionnaireFileName:** Sample Adult

**QuestionText:**

In the PAST YEAR, on those days that you drank alcoholic beverages, on the average, how many drinks did you have?

* Enter 'l' if less than 1 drink.

* Enter '95' if 95 or more drinks.

01-94  1-94 drinks
95   95+ drinks
97   Refused
99   Don't know

**UniverseText:** Sample adults 18+ who have had at least 1 drink in the past year

**SkipInstructions:**

<1-95,R,D> [goto ALC5UPNO]  
<10-95>[goto ERR_ALCAMT]

**Soft Edit:**

ERR_ALCAMT

* [Fill: ALCAMT] drinks is an unusually high number.  
* Please verify.  
* Do not probe
In the PAST YEAR, on how many DAYS did you have 5 or more drinks of any alcoholic beverage?

* Read if necessary:

How many days per week, per month or per year did you have 5 or more drinks in a single day?

* Enter number of days.

* Enter '0' for Never/None.

000  Never/None
001-365  1-365 days
997  Refused
999  Don't know

Sample adults 18+ who have had at least 1 drink in the past year

<1-365>[goto ALC5UPTP]
<0,R,D>[goto AHGT_FT]
2013 NHIS Questionnaire - Sample Adult

Adult Health Behaviors

Document Version Date: 29-May-14

Question ID: AHB.180_02.000  Instrument Variable Name: ALC5UPTP  QuestionnaireFileName: Sample Adult

QuestionText:

2 of 2

* Enter time period for days per week, per month or per year.

0  Never/None
1  Per week
2  Per month
3  Per year
7  Refused
9  Don't know

UniverseText: Sample adults 18+ who have had 5+ drinks in one day at least once in the past year

SkipInstructions:

<1-3> goto AHGT_FT
[If (ALC5UPNO gt <7> & ALC5UPTP = <1>) or
 (ALC5UPNO gt <31> & ALC5UPTP = <2>) or
 (ALC5UPNO gt <365> & ALC5UPTP = <3>) goto ERR1_ALC5UPTP
[if number of days drank in the past year (calculated from ALC12MNO and ALC12MTP) lt number of days per year with 5 or more drinks (calculated from ALC5UPNO and ALC5UPTP)] goto ERR2_ALC5UPTP]

Hard Edit:

ERR1_ALC5UPTP

* [Fill1: ALC5UPNO] days per [Fill2: ALC5UPTP] exceeds number possible in this time period.
* Please correct.

ERR2_ALC5UPTP

* Number of days had 5 or more drinks exceeds number of days drank.
* Please correct.
* Do not probe.
Question ID: AHB.190_01.000  Instrument Variable Name: AHGT_FT  QuestionnaireFileName: Sample Adult

QuestionText: How tall are you without shoes?

* Enter "M" to record metric measurements

| 02-07 | 2-7 feet |
| 97    | Refused  |
| 99    | Don't know |

UniverseText: Sample adults 18+

SkipInstructions: <2-7> [goto AHGT_IN]
<0> [goto AWGT_LB]
<empty> [goto ERR_AHGT_FT]

Hard Edit:

ERR1_AHGT_FT

* Only 2-7, Don't Know/Refused or M allowed in this field.
* Please correct.

Soft Edit:

ERR2_AHGT_FT

* Respondent's height in feet is [fill: AHGT_FT]?
* Please verify.

Question ID: AHB.190_02.000  Instrument Variable Name: AHGT_IN  QuestionnaireFileName: Sample Adult

QuestionText: How tall are you without shoes?

* Enter '0' if exactly [fill1: AHGT_FT] feet tall.

| 00-11 | 0-11 inches |
| 97    | Refused    |
| 99    | Don't know |

UniverseText: Sample adults 18+ who answered their height in feet

SkipInstructions: <0-11,R,D> [goto AWGT_LB]
<empty> [goto ERR_AHGT_IN]

Hard Edit:

ERR1_AHGT_IN

* If [fill: AHGT_FT] feet exactly, enter "0"; otherwise enter number of inches.

Soft Edit:

ERR2_AHGT_IN

* Please verify that the height was entered correctly. Probe only if necessary.
Question ID: AHB.190_03.000  Instrument Variable Name: AHGT_M  QuestionnaireFileName: Sample Adult

QuestionText: How tall are you without shoes?

* Enter height in metric.

- 0-2 meters
- 7 Refused
- 9 Don't know

UniverseText: Sample adults 18+ who choose to give their height in metric measurements

SkipInstructions: 

- <0-2> goto AHGT_CM
- <R,D> goto AWGT_LB
- <empty> goto ERR_AHGT_M

Hard Edit: ERR_AHGT_M

* If height is being given in centimeters only, enter "0"; otherwise enter number of meters.

---

Question ID: AHB.190_04.000  Instrument Variable Name: AHGT_CM  QuestionnaireFileName: Sample Adult

QuestionText: *Enter centimeters.

- 000-241 0-241 centimeters
- 997 Refused
- 999 Don't know

UniverseText: Sample adults 18+ who answered their height in meters

SkipInstructions: 

- <0-241,R,D> goto AWGT_LB

[If AHGT_M eq <2> and AHGT_CM gt <41> or AHGT_M eq <1> and AHGT_CM gt <141>] goto ERR_AHGT_CM
[< > goto ERR2_AHGT_CM
[If AHGT_M eq <1> and AHGT_CM lt <20> or AHGT_M eq <0> and AHGT_CM lt <120>] goto ERR3_AHGT_CM]

Hard Edit: ERR1_AHGT_CM

* Total height exceeds maximum allowed.
* Please correct.

ERR2_AHGT_CM

* If [fill: AHGT_M] meters exactly, enter "0"; otherwise enter number of centimeters.

Soft Edit: ERR3_AHGT_CM

* Please verify that the height was entered correctly. Probe only if necessary.
**2013 NHIS Questionnaire - Sample Adult**

**Adult Health Behaviors**

**Document Version Date:** 29-May-14

<table>
<thead>
<tr>
<th>Question ID:</th>
<th>Instrument Variable Name:</th>
<th>QuestionnaireFileName:</th>
<th>Sample Adult</th>
</tr>
</thead>
<tbody>
<tr>
<td>AHB.200_01.000</td>
<td>AWGT_LB</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**QuestionText:** How much do you weigh without shoes?

* Enter "M" to record metric measurements

* Enter '500' for 500 pounds or more

**UniverseText:** Sample adults 18+

**SkipInstructions:**

<50-500> [goto next section]

[if AWGT_LB lt <50> or gt <500> goto ERR_AWGT_LB]

<R,D> [goto next section]

<M> [goto AWGT_KG]

**Hard Edit:**

ERR1_AWGT_LB

* Weight is out of range (50-500).
* Please correct.

**Soft Edit:**

ERR2_AWGT_LB

* Please verify that the weight was entered correctly. Probe only if necessary.

<table>
<thead>
<tr>
<th>Question ID:</th>
<th>Instrument Variable Name:</th>
<th>QuestionnaireFileName:</th>
<th>Sample Adult</th>
</tr>
</thead>
<tbody>
<tr>
<td>AHB.200_02.000</td>
<td>AWGT_KG</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**QuestionText:** How much do you weigh without shoes?

* Enter weight in kilograms

**UniverseText:** Sample adults 18+ who choose to give their weight in metric measurements

**SkipInstructions:**

<23-226,R,D> [goto next section]

[If AWGT_KG lt <23> or K gt <226> goto ERR_AWGT_KG]

**Hard Edit:**

ERR1_AWGT_KG

*Weight is out of range (23-226).
* Please correct.

**Soft Edit:**

ERR2_AWGT_KG

* Please verify that the weight was entered correctly. Probe only if necessary.
**2013 NHIS Questionnaire - Sample Adult**

**Adult Access to Health Care & Utilization**

**Document Version Date:** 02-Oct-14

---

**Question ID:** AAU.020_00.000  
**Instrument Variable Name:** AUSUALPL  
**QuestionnaireFileName:** Sample Adult

**QuestionText:** Is there a place that you USUALLY go to when you are sick or need advice about your health?

1. Yes  
2. There is NO place  
3. There is MORE THAN ONE place  
7. Refused  
9. Don't know

**UniverseText:** Sample adults 18+

**SkipInstructions:**  
<1-3> [goto APLKIND]  
<2,R,D> [goto AHCPLKND]

---

**Question ID:** AAU.030_00.000  
**Instrument Variable Name:** APLKIND  
**QuestionnaireFileName:** Sample Adult

**QuestionText:** [Fill1: What kind of place is it - a clinic, doctor's office, emergency room, or some other place?]

[Fill2: What kind of place do you go to most often - a clinic, doctor's office, emergency room, or some other place?]

1. Clinic or health center  
2. Doctor's office or HMO  
3. Hospital emergency room  
4. Hospital outpatient department  
5. Some other place  
6. Doesn't go to one place most often  
7. Refused  
9. Don't know

**UniverseText:** Sample adults 18+ with 1+ usual place(s) to go when sick/need health advice

**SkipInstructions:**  
<1-5> [go to AHCPLROU]  
<6,R,D> [go to AHCPLKND]
Is that [fill: place from (APLKIND)] the same place you USUALLY go when you need routine or preventive care, such as a physical examination or check up?

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

Sample adults aged 18+ years having a clinic or health center, doctor's office or HMO, hospital emergency room, hospital outpatient department, or some other place that they usually go to when they are sick or need advice about their health.

What kind of place do you USUALLY go to when you need routine or preventive care, such as a physical examination or check-up?

0. Doesn't get preventive care anywhere
1. Clinic or health center
2. Doctor's office or HMO
3. Hospital emergency room
4. Hospital outpatient department
5. Some other place
6. Doesn't go to one place most often
7. Refused
9. Don't know

Sample Adults 18+ who do not have a usual source of sick care; who Ref/DK if have a usual source of sick care; who have a usual source of sick care but do not go to one place most often or Ref/DK what kind of place; who have a usual source of sick care, but it is not same place as usual source of routine/preventive care; who have a usual source of sick care but Ref/DK if it is same place as usual source of routine/preventive care.

<0-6,R,D> if AUSUALPL = 2 [goto ANOUSLPL]; else if AUSUALPL=R,D goto APRVTRYR
ELSE goto AHCCHGYR
At any time in the PAST 12 MONTHS did you CHANGE the place(s) to which you USUALLY go for health care?

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

Sample adults 18+ with 1+ usual place(s) to go when sick/need health advice [or who reported same place as usual source of routine/preventive care]

Was this change for a reason related to health insurance?

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

Sample adults 18+ with 1+ usual place(s) to go when sick/need health advice who CHANGED their USUAL place for health care in past 12 months
**Question ID:** AAU.050_00.010  **Instrument Variable Name:** ANOUSLPL  **QuestionnaireFileName:** Sample Adult

**QuestionText:**
Why don’t you have a usual source of medical care?

*Enter all that apply, separate with commas.

01 Doesn’t need a doctor/Haven’t had any problems
02 Doesn’t like/trust/believe in doctors
03 Doesn’t know where to go
04 Previous doctor is not available/moved
05 Too expensive/no insurance/cost
06 Speak a different language
07 No care available/Care too far away, not convenient
08 Put it off/Didn't get around to it
09 Other
97 Refused
99 Don’t know

**UniverseText:** Sample adults 18+ without a usual place of care

**SkipInstructions:** <1-9,R,D>[goto APRVTRYR ]

---

**Question ID:** AAU.051_00.010  **Instrument Variable Name:** APRVTRYR  **QuestionnaireFileName:** Sample Adult

**QuestionText:** DURING THE PAST 12 MONTHS, did you have any trouble finding a general doctor or provider who would see you?

1 Yes
2 No
7 Refused
9 Don’t know

**UniverseText:** Sample adults 18+

**SkipInstructions:** <1>[goto APRVTRFD ]
<2,R,D>[goto ADRNANP]
**2013 NHIS Questionnaire - Sample Adult**

**Adult Access to Health Care & Utilization**

**Document Version Date:** 02-Oct-14

<table>
<thead>
<tr>
<th>Question ID</th>
<th>Instrument Variable Name</th>
<th>QuestionnaireFileName</th>
</tr>
</thead>
<tbody>
<tr>
<td>AAU.053_00.010</td>
<td>APRVTRFD</td>
<td>Sample Adult</td>
</tr>
<tr>
<td><strong>QuestionText:</strong></td>
<td></td>
<td><strong>Were you able to find a general doctor or provider who could see you?</strong></td>
</tr>
<tr>
<td>1</td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>Refused</td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>Don’t know</td>
<td></td>
</tr>
<tr>
<td><strong>UniverseText:</strong></td>
<td></td>
<td>Sample adults 18+ who had trouble finding a provider</td>
</tr>
<tr>
<td><strong>SkipInstructions:</strong></td>
<td>&lt;1,2,R,D&gt;[goto ADRNANP]</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Question ID</th>
<th>Instrument Variable Name</th>
<th>QuestionnaireFileName</th>
</tr>
</thead>
<tbody>
<tr>
<td>AAU.057_00.010</td>
<td>ADRNANP</td>
<td>Sample Adult</td>
</tr>
<tr>
<td><strong>QuestionText:</strong></td>
<td></td>
<td><strong>DURING THE PAST 12 MONTHS, were you told by a doctor’s office or clinic that they would not accept you as a new patient?</strong></td>
</tr>
<tr>
<td>1</td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>Refused</td>
<td></td>
</tr>
<tr>
<td>9</td>
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<td></td>
<td>Sample adults 18+</td>
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<td><strong>SkipInstructions:</strong></td>
<td>&lt;1,2,R,D&gt;[goto ADRNAI]</td>
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<th>Instrument Variable Name</th>
<th>QuestionnaireFileName</th>
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<tr>
<td>AAU.059_00.010</td>
<td>ADRNAI</td>
<td>Sample Adult</td>
</tr>
<tr>
<td><strong>QuestionText:</strong></td>
<td></td>
<td><strong>DURING THE PAST 12 MONTHS, were you told by a doctor’s office or clinic that they did not accept your health care coverage?</strong></td>
</tr>
<tr>
<td>1</td>
<td>Yes</td>
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<td>2</td>
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<td>7</td>
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<tr>
<td>9</td>
<td>Don’t know</td>
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<tr>
<td><strong>UniverseText:</strong></td>
<td></td>
<td>Sample adults 18+</td>
</tr>
<tr>
<td><strong>SkipInstructions:</strong></td>
<td>&lt;1,2,R,D&gt;[goto AHCDLY_1]</td>
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</tbody>
</table>
There are many reasons people delay getting medical care. Have you delayed getting care for any of the following reasons in the PAST 12 MONTHS?

...You couldn't get through on the telephone.

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

Sample adults 18+

* Read Lead-in if Necessary

There are many reasons people delay getting medical care. Have you delayed getting care for any of the following reasons in the PAST 12 MONTHS?

...You couldn't get an appointment soon enough.

<p>| | |</p>
<table>
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<tbody>
<tr>
<td>1</td>
<td>Yes</td>
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<tr>
<td>7</td>
<td>Refused</td>
</tr>
<tr>
<td>9</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

Sample adults 18+
There are many reasons people delay getting medical care. Have you delayed getting care for any of the following reasons in the PAST 12 MONTHS?

...Once you get there, you have to wait too long to see the doctor.

1  Yes
2  No
7  Refused
9  Don't know

UniverseText: Sample adults 18+

SkipInstructions: <1,2,R,D>[goto AHCDLY_4]
**2013 NHIS Questionnaire - Sample Adult**

**Adult Access to Health Care & Utilization**

**Document Version Date:** 02-Oct-14

**Question ID:** AAU.061_05.000  **Instrument Variable Name:** AHCDLY_5  **QuestionnaireFileName:** Sample Adult

**QuestionText:**
* Read Lead-in if Necessary

There are many reasons people delay getting medical care. Have you delayed getting care for any of the following reasons in the PAST 12 MONTHS?

...You didn't have transportation.

1  Yes
2  No
7  Refused
9  Don't know

**UniverseText:** Sample adults 18+

**SkipInstructions:** <1,2,R,D>[goto AHCAFY_1]

---

**Question ID:** AAU.111_01.000  **Instrument Variable Name:** AHCAFY_1  **QuestionnaireFileName:** Sample Adult

**QuestionText:**
DURING THE PAST 12 MONTHS, was there any time when you needed any of the following, but didn't get it because you couldn't afford it?

...Prescription medicines.

1  Yes
2  No
7  Refused
9  Don't know

**UniverseText:** Sample adults 18+

**SkipInstructions:** <1,2,R,D>[goto AHCAFY_2]
DURING THE PAST 12 MONTHS, was there any time when you needed any of the following, but didn't get it because you couldn't afford it?

...Mental health care or counseling.

1  Yes
2  No
7  Refused
9  Don't know

DURING THE PAST 12 MONTHS, was there any time when you needed any of the following, but didn't get it because you couldn't afford it?

...Dental care (including check ups).

1  Yes
2  No
7  Refused
9  Don't know

Sample adults 18+
DURING THE PAST 12 MONTHS, was there any time when you needed any of the following, but didn't get it because you couldn't afford it?

...Eyeglasses.

1 Yes
2 No
7 Refused
9 Don't know

Sample adults 18+

<1,2,R,D>[goto AHCAFY_5]

DURING THE PAST 12 MONTHS, was there any time when you needed any of the following, but didn't get it because you couldn't afford it?

...To see a specialist.

1 Yes
2 No
7 Refused
9 Don’t know

Sample adults 18+

<1,2,R,D>[goto AHCAFY_6]
**2013 NHIS Questionnaire - Sample Adult**

**Adult Access to Health Care & Utilization**

Document Version Date: 02-Oct-14

---

**Question ID:** AAU.111_06.010  **Instrument Variable Name:** AHCAFY_6  **QuestionnaireFileName:** Sample Adult

**QuestionText:**

*Read if necessary..

DURING THE PAST 12 MONTHS, was there any time when you needed any of the following, but didn't get it because you couldn't afford it?

...Follow-up care.

1 Yes
2 No
7 Refused
9 Don't know

**UniverseText:** Sample adults 18+

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

---

**Question ID:** AAU.113_00.010  **Instrument Variable Name:** AWORPAY  **QuestionnaireFileName:** Sample Adult

**QuestionText:**

If you get sick or have an accident, how worried are you that you will be able to pay your medical bills? Are you very worried, somewhat worried, or not at all worried?

1 Very worried
2 Somewhat worried
3 Not at all worried
7 Refused
9 Don't know

**UniverseText:** Sample adults 18+

**SkipInstructions:** <1-3,R,D>[goto AHICOMP]
2013 NHIS Questionnaire - Sample Adult
Adult Access to Health Care & Utilization
Document Version Date: 02-Oct-14

Question ID: AAU.113_00.020 Instrument Variable Name: AHICOMP QuestionnaireFileName: Sample Adult

QuestionText: In regard to your health insurance or health care coverage, how does it compare to a year ago? Is it better, worse, or about the same?

1 Better
2 Worse
3 About the same
7 Refused
9 Don't know

UniverseText: Sample adults 18+

SkipInstructions: <1,2,3,R,D>[goto ARX12MO]

Question ID: AAU.126_01.010 Instrument Variable Name: ARX12MO QuestionnaireFileName: Sample Adult

QuestionText: DURING THE PAST 12 MONTHS, were you prescribed medication by a doctor or other health professional?

1 Yes
2 No
7 Refused
9 Don't know

UniverseText: Sample adults 18+

SkipInstructions: <1> [goto ARX12_1]
<2,R,D> [goto ARX12_5]

Question ID: AAU.127_01.010 Instrument Variable Name: ARX12_1 QuestionnaireFileName: Sample Adult

QuestionText: DURING THE PAST 12 MONTHS, were any of the following true for you?

...You skipped medication doses to save money.

1 Yes
2 No
7 Refused
9 Don't know

UniverseText: Sample adults 18+ who had been prescribed medication in the past 12 months

SkipInstructions: <1,2,R,D>[goto ARX12_2]
DURING THE PAST 12 MONTHS, were any of the following true for you?

…You took less medicine to save money.

1  Yes
2  No
7  Refused
9  Don’t know

Sample adults 18+ who had been prescribed medication in the past 12 months

DURING THE PAST 12 MONTHS, were any of the following true for you?

…You delayed filling a prescription to save money.

1  Yes
2  No
7  Refused
9  Don’t know

Sample adults 18+ who had been prescribed medication in the past 12 months
Question ID: AAU.127_04.010  Instrument Variable Name: ARX12_4
QuestionText: *Read if necessary.

DURING THE PAST 12 MONTHS, were any of the following true for you?

…You asked your doctor for a lower cost medication to save money.

1 Yes
2 No
7 Refused
9 Don't know

UniverseText: Sample adults 18+ who had been prescribed medication in the past 12 months

SkipInstructions: <1,2,R,D>[goto ARX12_5]

---

Question ID: AAU.127_05.010  Instrument Variable Name: ARX12_5
QuestionText: DURING THE PAST 12 MONTHS, were any of the following true for you?

…You bought prescription drugs from another country to save money.

1 Yes
2 No
7 Refused
9 Don't know

UniverseText: Sample adults 18+

SkipInstructions: <1,2,R,D>[goto ARX12_6]
**Question ID:** AAU.127_06.010  **Instrument Variable Name:** ARX12_6  **QuestionnaireFileName:** Sample Adult

**QuestionText:**

*Read if necessary.*

DURING THE PAST 12 MONTHS, were any of the following true for you?

…You used alternative therapies to save money.

1  Yes
2  No
7  Refused
9  Don't know

**UniverseText:** Sample adults 18+

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

---

**Question ID:** AAU.135_00.000  **Instrument Variable Name:** ADENLONG  **QuestionnaireFileName:** Sample Adult

**QuestionText:**

(book) A7

About how long has it been since you last saw a dentist? Include all types of dentists, such as orthodontists, oral surgeons, and all other dental specialists, as well as dental hygienists.

0  Never
1  6 months or less
2  More than 6 mos, but not more than 1 yr ago
3  More than 1 yr, but not more than 2 yrs ago
4  More than 2 yrs, but not more than 5 yrs ago
5  More than 5 years ago
7  Refused
9  Don't know

**UniverseText:** Sample adults 18+

**SkipInstructions:** <0-5,R,D>[ goto AHCSY1_1]
DURING THE PAST 12 MONTHS, have you seen or talked to any of the following health care providers about your own health?

...A mental health professional such as a psychiatrist, psychologist, psychiatric nurse, or clinical social worker.

1 Yes
2 No
7 Refused
9 Don't know

UniverseText: Sample adults 18+

SkipInstructions: <1,2,R,D>[ goto AHCSY1_2]

---

DURING THE PAST 12 MONTHS, have you seen or talked to any of the following health care providers about your own health?

...An optometrist, ophthalmologist (AHF-thal-MOL-oh-jist), or eye doctor (someone who prescribes eyeglasses).

1 Yes
2 No
7 Refused
9 Don't know

UniverseText: Sample adults 18+

SkipInstructions: <1,2,R,D>[ goto AHCSY1_3]
DURING THE PAST 12 MONTHS, have you seen or talked to any of the following health care providers about your own health?

...A foot doctor.

1  Yes  
2  No  
7  Refused  
9  Don't know

UniverseText: Sample adults 18+

SkipInstructions: <1,2,R,D>[ goto AHCSY1_4]

---

DURING THE PAST 12 MONTHS, have you seen or talked to any of the following health care providers about your own health?

...A chiropractor.

1  Yes  
2  No  
7  Refused  
9  Don't know

UniverseText: Sample adults 18+

SkipInstructions: <1,2,R,D>[ goto AHCSY1_5]
**2013 NHIS Questionnaire - Sample Adult**

**Adult Access to Health Care & Utilization**

*Document Version Date: 02-Oct-14*

---

**Question ID:** AAU.141_05.000  
**Instrument Variable Name:** AHCSY1_5  
**QuestionnaireFileName:** Sample Adult

**QuestionText:**  
*Read Lead-in if Necessary.*

DURING THE PAST 12 MONTHS, have you seen or talked to any of the following health care providers about your own health?

...A physical therapist, speech therapist, respiratory therapist, audiologist, or occupational therapist.

1. Yes
2. No
7. Refused
9. Don’t know

**UniverseText:** Sample adults 18+

**SkipInstructions:** <1,2,R,D> [ goto AHCSY1_6 ]

---

**Question ID:** AAU.141_06.000  
**Instrument Variable Name:** AHCSY1_6  
**QuestionnaireFileName:** Sample Adult

**QuestionText:**  
*Read Lead-in if Necessary.*

DURING THE PAST 12 MONTHS, have you seen or talked to any of the following health care providers about your own health?

...A nurse practitioner, physician assistant, or midwife.

1. Yes
2. No
7. Refused
9. Don’t know

**UniverseText:** Sample adults 18+

**SkipInstructions:** <1,2,R,D>[ if SEX=1 goto AHCSY8_8; else if SEX=2 goto AHCSYR7 ]
**Question ID:** AAU.200_00.000  **Instrument Variable Name:** AHCSYR7  **QuestionnaireFileName:** Sample Adult

**QuestionText:**  
* Read lead-in if necessary.

> DURING THE PAST 12 MONTHS, have you seen or talked to any of the following health care providers about your own health?

...A doctor who specializes in women's health (an obstetrician/gynecologist).

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

**UniverseText:** Sample female adults aged 18+ years

**SkipInstructions:** <1,2,R,D> [go to AHCSY8_8]

---

**Question ID:** AAU.211_01.000  **Instrument Variable Name:** AHCSY8_8  **QuestionnaireFileName:** Sample Adult

**QuestionText:**  
* Read Lead-in if Necessary.

> DURING THE PAST 12 MONTHS, have you seen or talked to any of the following health care providers about your own health?

...A medical doctor who specializes in a particular medical disease or problem (other than obstetrician/gynecologist, psychiatrist, or ophthalmologist).

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

**UniverseText:** Sample adults 18+

**SkipInstructions:** <1,2,R,D> [go to AHCSY8_9]
2013 NHIS Questionnaire - Sample Adult
Adult Access to Health Care & Utilization
Document Version Date: 02-Oct-14

Question ID: AAU.211_02.000  Instrument Variable Name: AHCSY8_9  QuestionnaireFileName: Sample Adult

QuestionText: * Read Lead-in if Necessary.

DURING THE PAST 12 MONTHS, have you seen or talked to any of the following health care providers about your own health?

...A general doctor who treats a variety of illnesses (a doctor in general practice, family medicine, or internal medicine)?

1  Yes
2  No
7  Refused
9  Don't know

UniverseText: Sample adults 18+

SkipInstructions: <1> [goto AHCSYR10]
<2,R,D> [goto AHERNOYR]

---

Question ID: AAU.230_00.000  Instrument Variable Name: AHCSYR10  QuestionnaireFileName: Sample Adult

QuestionText: Does that doctor treat children and adults (a doctor in general practice or family medicine)?

1  Yes
2  No
7  Refused
9  Don't know

UniverseText: Sample adults 18+ who have seen or talked to a general doctor during the past 12 months

SkipInstructions: <1,2,R,D> [go to AHERNOYR]
2013 NHIS Questionnaire - Sample Adult
Adult Access to Health Care & Utilization

Question ID: AAU.240_00.000  Instrument Variable Name: AHERNOYR  QuestionnaireFileName: Sample Adult

QuestionText: (book) A8

DURING THE PAST 12 MONTHS, HOW MANY TIMES have you gone to a HOSPITAL EMERGENCY ROOM about your own health (This includes emergency room visits that resulted in a hospital admission)?

00 None
01 1
02 2-3
03 4-5
04 6-7
05 8-9
06 10-12
07 13-15
08 16 or more
09 Refused
99 Don't know

UniverseText: Sample adults 18+

SkipInstructions: <0,R,D> [go to AHCHYR] <1-8> [goto AERVISND]

Question ID: AAU.243_00.010  Instrument Variable Name: AERVISND  QuestionnaireFileName: Sample Adult

QuestionText: Thinking about your most recent emergency room visit, did you go to the emergency room either at night or on the weekend?

1 Yes
2 No
7 Refused
9 Don't know

UniverseText: Sample adults 18+ who had at least one ER visit in the past year

SkipInstructions: <1,2,R,D> [go to AERHOS]
**Question ID:** AAU.245_00.010  **Instrument Variable Name:** AERHOS  **QuestionnaireFileName:** Sample Adult

**QuestionText:** Did this emergency room visit result in a hospital admission?

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

**UniverseText:** Sample adults 18+ who had at least one ER visit in the past year

**SkipInstructions:** <1,2,R,D> [go to AERREAS1]

---

**Question ID:** AAU.248_01.010  **Instrument Variable Name:** AERREAS1  **QuestionnaireFileName:** Sample Adult

**QuestionText:** Tell me which of these apply to your last emergency room visit?

... You didn't have another place to go

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

**UniverseText:** Sample adults 18+ who had at least one ER visit in the past year

**SkipInstructions:** <1,2,R,D> [goto AERREAS2]

---

**Question ID:** AAU.248_02.020  **Instrument Variable Name:** AERREAS2  **QuestionnaireFileName:** Sample Adult

**QuestionText:** *Read if necessary.*

Tell me which of these apply to your last emergency room visit?

... Your doctor’s office or clinic was not open

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

**UniverseText:** Sample adults 18+ who had at least one ER visit in the past year

**SkipInstructions:** <1,2,R,D> [goto AERREAS3]
Tell me which of these apply to your last emergency room visit?

… Your health provider advised you to go

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<tbody>
<tr>
<td>1</td>
<td>Yes</td>
<td>2</td>
<td>No</td>
<td>7</td>
</tr>
</tbody>
</table>

UniverseText: Sample adults 18+ who had at least one ER visit in the past year

SkipInstructions: <1,2,R,D> [goto AERREAS4]

Tell me which of these apply to your last emergency room visit?

… The problem was too serious for the doctor’s office or clinic

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<tbody>
<tr>
<td>1</td>
<td>Yes</td>
<td>2</td>
<td>No</td>
<td>7</td>
</tr>
</tbody>
</table>

UniverseText: Sample adults 18+ who had at least one ER visit in the past year

SkipInstructions: <1,2,R,D> [goto AERREAS5]
Question ID: AAU.248_05.050  
Instrument Variable Name: AERREAS5  
QuestionnaireFileName: Sample Adult

QuestionText: *Read if necessary..

Tell me which of these apply to your last emergency room visit?

… Only a hospital could help you

1 Yes
2 No
7 Refused
9 Don't know

UniverseText: Sample adults 18+ who had at least one ER visit in the past year

SkipInstructions: <1,2,R,D> [goto AERREAS6]

---

Question ID: AAU.248_06.060  
Instrument Variable Name: AERREAS6  
QuestionnaireFileName: Sample Adult

QuestionText: *Read if necessary..

Tell me which of these apply to your last emergency room visit?

… the emergency room is your closest provider

1 Yes
2 No
7 Refused
9 Don't know

UniverseText: Sample adults 18+ who had at least one ER visit in the past year

SkipInstructions: <1,2,R,D> [goto AERREAS7]
Tell me which of these apply to your last emergency room visit?

…you get most of your care at the emergency room

1 Yes
2 No
7 Refused
9 Don’t know

Sample adults 18+ who had at least one ER visit in the past year

Tell me which of these apply to your last emergency room visit?

…you arrived by ambulance or other emergency vehicle

1 Yes
2 No
7 Refused
9 Don’t know

Sample adults 18+ who had at least one ER visit in the past year
DURING THE PAST 12 MONTHS, did you receive care AT HOME from a nurse or other health care professional?

1  Yes
2  No
7  Refused
9  Don't know

During how many of the PAST 12 MONTHS did you receive care AT HOME from a health care professional?

01-12  01-12 months
97  Refused
99  Don't know

Sample adults 18+ who received home care from a health professional during the past 12 months

<1,R,D>[goto AHCHNOYR]
**2013 NHIS Questionnaire - Sample Adult**

**Adult Access to Health Care & Utilization**

*Document Version Date: 02-Oct-14*

**Question ID:** AAU.270_00.000  **Instrument Variable Name:** AHCHNOYR  **QuestionnaireFileName:** Sample Adult

**QuestionText:** (book) A9

What was the total number of home visits received during {Fill1: that month/Fill2: those months}?

<table>
<thead>
<tr>
<th>Number</th>
<th>Description</th>
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</thead>
<tbody>
<tr>
<td>01</td>
<td>1</td>
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<tr>
<td>02</td>
<td>2-3</td>
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<td>03</td>
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<td>07</td>
<td>13-15</td>
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<tr>
<td>08</td>
<td>16 or more</td>
</tr>
<tr>
<td>97</td>
<td>Refused</td>
</tr>
<tr>
<td>99</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

**UniverseText:** Sample adults 18+ who received home care from a health professional during the past 12 months

**SkipInstructions:** <1-8,R,D>[goto AHCHNOYR]

---

**Question ID:** AAU.280_00.000  **Instrument Variable Name:** AHCHNOYR  **QuestionnaireFileName:** Sample Adult

**QuestionText:** (book) A8

DURING THE PAST 12 MONTHS, HOW MANY TIMES have you seen a doctor or other health care professional about your own health at a DOCTOR’S OFFICE, A CLINIC, OR SOME OTHER PLACE? Do not include times you were hospitalized overnight, visits to hospital emergency rooms, home visits, dental visits, or telephone calls.

<table>
<thead>
<tr>
<th>Number</th>
<th>Description</th>
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<tbody>
<tr>
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<td>16 or more</td>
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<tr>
<td>97</td>
<td>Refused</td>
</tr>
<tr>
<td>99</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

**UniverseText:** Sample adults 18+

**SkipInstructions:** <0-8,R,D>[goto ASRGYR]
DURING THE PAST 12 MONTHS, have you had SURGERY or other surgical procedures either as an inpatient or outpatient?

* Read if necessary: This includes both major surgery and minor procedures such as setting bones or removing growths.

1 Yes
2 No
7 Refused
9 Don't know

Including any times you may have already told me about, HOW MANY DIFFERENT TIMES have you had surgery during the PAST 12 MONTHS?

* Enter "95" for 95 or more times.

01-94 1-94 times
95 95+ times
97 Refused
99 Don't know

* {ASRGYR} is an unusually large number.

* Please verify.
About how long has it been since you last saw or talked to a doctor or other health care professional about your own health? Include doctors seen while a patient in a hospital.

0 Never
1 6 months or less
2 More than 6 mos, but not more than 1 yr ago
3 More than 1 yr, but not more than 2 yrs ago
4 More than 2 yrs, but not more than 5 yrs ago
5 More than 5 years ago
7 Refused
9 Don't know

Thinking about your last visit for any type of medical care, where did you go?

*Read categories if necessary.

1 Clinic or health center
2 Doctor's office or HMO
3 Hospital emergency room
4 Hospital outpatient department
5 Urgent care center
6 Some other place
7 Refused
9 Don't know

Sample adults 18+ who have ever seen/talked to a doctor
<table>
<thead>
<tr>
<th>Question ID: AAU.306_00.020</th>
<th>Instrument Variable Name: ALASTTYP</th>
<th>QuestionnaireFileName: Sample Adult</th>
</tr>
</thead>
<tbody>
<tr>
<td>QuestionText: Did you see a general doctor, a specialist, a nurse practitioner or physician assistant, or someone else?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1 General doctor</td>
<td></td>
<td></td>
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<tr>
<td>2 Specialist</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3 Nurse practitioner/Physician assistant</td>
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<tr>
<td>4 Someone else</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7 Refused</td>
<td></td>
<td></td>
</tr>
<tr>
<td>9 Don’t know</td>
<td></td>
<td></td>
</tr>
<tr>
<td>UniverseText: Sample adults 18+ who visited a clinic, doctor’s office/HMO, hospital outpatient department or someplace else (not ER or urgent care center) on their last visit</td>
<td></td>
<td></td>
</tr>
<tr>
<td>SkipInstructions: &lt;1-3,R,D&gt; [goto AVISAPTN] &lt;4&gt; [goto ALASTSPC]</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Question ID: AAU.306_00.025</th>
<th>Instrument Variable Name: ALASTSPC</th>
<th>QuestionnaireFileName: Sample Adult</th>
</tr>
</thead>
<tbody>
<tr>
<td>QuestionText: What kind of health professional did you see at your last visit?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Verbatim Verbatim response</td>
<td></td>
<td></td>
</tr>
<tr>
<td>UniverseText: Sample adults 18+ who saw some other kind of provider on their last health care visit</td>
<td></td>
<td></td>
</tr>
<tr>
<td>SkipInstructions: &lt;Allow 75,R,D&gt; [goto AVISAPTN]</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
1 of 2

For this visit, how long did you have to wait between the time you made the appointment and the day you actually saw the doctor or other health professional?

*Enter ‘0’ for same day, walk-in appointment, or no appointment made.

*Enter number for appointment wait time.

*Enter ‘96’ for routine appointment, appointment arranged during a previous visit, or received a reminder card from provider.

- **00**: Same day/walk-in appt/no appt made
- **01-95**: 1-95
- **96**: Routine appt/appt arranged on previous visit/rec'd appt reminder card
- **97**: Refused
- **99**: Don't know

**UniverseText:**  Sample adults 18+ who visited a clinic, doctor’s office/HMO, hospital outpatient department or someplace else (not ER or urgent care center) on their last visit

**SkipInstructions:**  
- $<0,96,R>$ [goto AWAITRMN]
- $<1-95,D>$ [goto AVISAPTT]

---

2 of 2

*Enter time period for appointment wait time.

- **1**: Days
- **2**: Weeks
- **3**: Months
- **7**: Refused
- **9**: Don’t know

**UniverseText:**  Sample adults 18+ who visited a clinic, doctor’s office/HMO, hospital outpatient department or someplace else and gave a number or answered DK for length of time to make an appointment

**SkipInstructions:**  
- $<1-3,R,D>$ [goto AWAITRMN]
### Question ID: AAU.308_01.010  Instrument Variable Name: AWAITRMN  QuestionnaireFileName: Sample Adult

**QuestionText:**

1 of 2

How long did you have to wait in the waiting room before you saw a doctor or other health professional for this visit?

*Enter ‘0’ for no wait time.

*Enter number for time in waiting room.

<table>
<thead>
<tr>
<th>Code</th>
<th>Time Period</th>
</tr>
</thead>
<tbody>
<tr>
<td>00</td>
<td>No time</td>
</tr>
<tr>
<td>01-96</td>
<td>1-96</td>
</tr>
<tr>
<td>97</td>
<td>Refused</td>
</tr>
<tr>
<td>99</td>
<td>Don’t know</td>
</tr>
</tbody>
</table>

**UniverseText:** Sample adults 18+ who had a place of last medical visit

**SkipInstructions:**

<0,R> [goto HIT1A]  
<1-96,D> [goto AWAITRMT]

---

### Question ID: AAU.308_02.020  Instrument Variable Name: AWAITRMT  QuestionnaireFileName: Sample Adult

**QuestionText:**

2 of 2

*Enter time period for time in waiting room.

<table>
<thead>
<tr>
<th>Code</th>
<th>Time Period</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Minutes</td>
</tr>
<tr>
<td>2</td>
<td>Hours</td>
</tr>
<tr>
<td>7</td>
<td>Refused</td>
</tr>
<tr>
<td>9</td>
<td>Don’t know</td>
</tr>
</tbody>
</table>

**UniverseText:** Sample adults 18+ who had a place of last medical visit and did not refuse number portion of waiting room time

**SkipInstructions:**

<1,2,R,D> [goto HIT1A]
DURING THE PAST 12 MONTHS, have you ever used computers for any of the following:

…Look up health information on the Internet.

1. Yes
2. No
7. Refused
9. Don’t know

Sample adults 18+

*Read if necessary..

DURING THE PAST 12 MONTHS, have you ever used computers for any of the following:

…Fill a prescription.

1. Yes
2. No
7. Refused
9. Don’t know

Sample adults 18+
**2013 NHIS Questionnaire - Sample Adult**

**Adult Access to Health Care & Utilization**

Document Version Date: 02-Oct-14

---

**Question ID:** AAU.309_00.030  **Instrument Variable Name:** HIT3A  **QuestionnaireFileName:** Sample Adult

**QuestionText:** *Read if necessary..

DURING THE PAST 12 MONTHS, have you ever used computers for any of the following

…Schedule an appointment with a health care provider.

1  Yes
2  No
7  Refused
9  Don't know

**UniverseText:** Sample adults 18+

**SkipInstructions:** <1,2,R,D> [goto HIT4A]

---

**Question ID:** AAU.309_00.040  **Instrument Variable Name:** HIT4A  **QuestionnaireFileName:** Sample Adult

**QuestionText:** *Read if necessary..

DURING THE PAST 12 MONTHS, have you ever used computers for any of the following

…Communicate with a health care provider by email.

1  Yes
2  No
7  Refused
9  Don’t know

**UniverseText:** Sample adults 18+

**SkipInstructions:** <1,2,R,D> [goto HIT5A]
2013 NHIS Questionnaire - Sample Adult
Adult Access to Health Care & Utilization

Document Version Date: 02-Oct-14

Question ID: AAU.309_00.050  Instrument Variable Name: HIT5A  QuestionnaireFileName: Sample Adult

QuestionText: *Read if necessary..

DURING THE PAST 12 MONTHS, have you ever used computers for any of the following

…Use online chat groups to learn about health topics.

1 Yes
2 No
7 Refused
9 Don’t know

UniverseText: Sample adults 18+

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

Question ID: AAU.310_00.000  Instrument Variable Name: SHTFLUYR  QuestionnaireFileName: Sample Adult

QuestionText: *[F1]

DURING THE PAST 12 MONTHS, have you had a flu shot? A flu shot is usually given in the fall and protects against influenza for the flu season.

* Read if necessary: A flu shot is injected in the arm. Do not include an influenza vaccine sprayed in the nose.

1 Yes
2 No
7 Refused
9 Don’t know

UniverseText: Sample adults 18+

SkipInstructions: <1> [goto ASHFLU_M] <2,R,D> [ goto SPRFLUYR ]
1 of 2

During what month and year did you receive your most recent flu shot?

01  January
02  February
03  March
04  April
05  May
06  June
07  July
08  August
09  September
10  October
11  November
12  December
97  Refused
99  Don't know

Sample adults 18+ who have had a flu shot

<1-12,D> [ goto ASHFLU_Y] <R> [goto SPRFLUYR]
2013 NHIS Questionnaire - Sample Adult
Adult Access to Health Care & Utilization

Document Version Date: 02-Oct-14

Question ID: AAU.312_02.000  Instrument Variable Name: ASHFLU_Y  QuestionnaireFileName: Sample Adult

QuestionText: 2 of 2

*Enter year of most recent flu shot.

<table>
<thead>
<tr>
<th>Year</th>
<th>Value</th>
</tr>
</thead>
<tbody>
<tr>
<td>9997</td>
<td>Refused</td>
</tr>
<tr>
<td>9999</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

UniverseText: Sample adults 18+ who gave a month for their last flu shot or who didn’t know the month

SkipInstructions: <valid year,R,D> [goto SPRFLUYR]
[If ASHFLU_M and ASHFLU_Y = a future date [goto ERR1_ASHFLU_Y]
[If ASHFLU_M and ASHFLU_Y = a date prior to birth [goto ERR2_ASHFLU_Y ]
[If ASHFLU_M and ASHFLU_Y = a date before 12 months ago [goto ERR3_ASHFLU_Y ]

Hard Edit:

ERR1_ASHFLU_Y

*Future date invalid

ERR2_ASHFLU_Y

*Date before birth

ERR3_ASHFLU_Y

*Date more than 12 months ago

---

Question ID: AAU.313_00.000  Instrument Variable Name: FLUSHPG1  QuestionnaireFileName: Sample Adult

QuestionText: Did you get a flu shot before or during your current pregnancy?

<table>
<thead>
<tr>
<th>Value</th>
<th>Value</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Before this pregnancy</td>
</tr>
<tr>
<td>2</td>
<td>During this pregnancy</td>
</tr>
<tr>
<td>7</td>
<td>Refused</td>
</tr>
<tr>
<td>9</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

UniverseText: Female sample adults 18-49 who are currently pregnant and are interviewed January-March or August-December

SkipInstructions: <1,2,R,D> [goto SPRFLUYR]
**Question ID:** AAU.314_00.000  
**Instrument Variable Name:** FLUSHPG2  
**QuestionnaireFileName:** Sample Adult

**QuestionText:**

[Fill1: Earlier you said you were pregnant sometime since August 1st, 2011. Did you get a flu shot before, during or after this pregnancy?/]

Earlier you said you were pregnant sometime between August 2011 and March 2012. Did you get a flu shot before, during or after this pregnancy?/

1  Before this pregnancy  
2  During this pregnancy  
3  After this pregnancy  
7  Refused  
9  Don't know

**UniverseText:**
Female sample adults 18-49 who are currently pregnant and were interviewed April-July or who have been determined to be pregnant at a specific point in the past year

**SkipInstructions:**

<1-3,R,D> [goto SPRFLUYR]

---

**Question ID:** AAU.315_00.000  
**Instrument Variable Name:** SPRFLUYR  
**QuestionnaireFileName:** Sample Adult

**QuestionText:**

DURING THE PAST 12 MONTHS, have you had a flu vaccine sprayed in your nose by a doctor or other health professional? A health professional may have let you spray it. This vaccine is usually given in the fall and protects against influenza for the flu season.

* Read if necessary: This influenza vaccine is called FluMist (trademark).

1  Yes  
2  No  
7  Refused  
9  Don't know

**UniverseText:**
Sample adults 18+

**SkipInstructions:**

<1> [goto ASPFLU_M]  
[if SHTFLUYR =1 and SPRFLUYR=1] goto ERR1_SPRFLUYR  
[if AGE GE 50] goto ERR2_SPRFLUYR  
<2,D,R> [goto SHTPNUYR]

**Soft Edit:**

ERR1_SPRFLUYR

*Respondent says they have received both a flu shot and flu nasal vaccine.  
*Please verify.

ERR2_SPRFLUYR

*Respondent says they have received a nasal vaccine to PREVENT the flu, not to TREAT symptoms of the flu.  
*Please verify.
During what month and year did you receive your most recent flu nasal spray?

01 January
02 February
03 March
04 April
05 May
06 June
07 July
08 August
09 September
10 October
11 November
12 December
97 Refused
99 Don't know

Sample adults 18+ who have had a flu nasal vaccine

<1-12,D> [ goto ASPFLU_Y]
<R> [goto SHTPNUYR]
2013 NHIS Questionnaire - Sample Adult
Adult Access to Health Care & Utilization

Question ID: AAU.318_02.000  Instrument Variable Name: ASPFLU_Y  QuestionnaireFileName: Sample Adult

QuestionText: 2 of 2

*Enter year of most recent flu nasal spray.

Year

9997 Refused
9999 Don't know

UniverseText: Sample adults 18+ who gave a month for their flu nasal vaccine or who didn’t know the month

SkipInstructions: <valid year, R, D> [goto SHTPNUYR]
[If ASPFLU_M and ASPFLU_Y = a future date] goto ERR1_ASPFLU_Y
[If ASPFLU_M and ASPFLU_Y = a date prior to birth] goto ERR2_ASPFLU_Y
[If ASPFLU_M and ASPFLU_Y = a date before 12 months ago] goto ERR3_ASPFLU_Y

Hard Edit:

ERR1_ASPFLU_Y

*Future date invalid

ERR2_ASPFLU_Y

*Date before birth

ERR3_ASPFLU_Y

*Date more than 12 months ago

Question ID: AAU.320_00.000  Instrument Variable Name: SHTPNUYR  QuestionnaireFileName: Sample Adult

QuestionText: Have you EVER had a pneumonia shot?

This shot is usually given only once or twice in a person's lifetime and is different from the flu shot. It is also called the pneumococcal vaccine.

1 Yes
2 No
7 Refused
9 Don't know

UniverseText: Sample adults 18+

SkipInstructions: <1,2,R,D> [goto APOX]
<table>
<thead>
<tr>
<th>Question ID: AAU.330_00.000</th>
<th>Instrument Variable Name: APOX</th>
<th>QuestionnaireFileName: Sample Adult</th>
</tr>
</thead>
<tbody>
<tr>
<td>QuestionText: Have you EVER had chickenpox?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1 Yes</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2 No</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7 Refused</td>
<td></td>
<td></td>
</tr>
<tr>
<td>9 Don't know</td>
<td></td>
<td></td>
</tr>
<tr>
<td>UniverseText: Sample adults 18+</td>
<td></td>
<td></td>
</tr>
<tr>
<td>SkipInstructions: &lt;1&gt; [goto APOX12MO] &lt;2,R,D&gt; [goto AHEP]</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Question ID: AAU.340_00.000</th>
<th>Instrument Variable Name: APOX12MO</th>
<th>QuestionnaireFileName: Sample Adult</th>
</tr>
</thead>
<tbody>
<tr>
<td>QuestionText: Have you had chickenpox in the PAST 12 MONTHS?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1 Yes</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2 No</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7 Refused</td>
<td></td>
<td></td>
</tr>
<tr>
<td>9 Don't know</td>
<td></td>
<td></td>
</tr>
<tr>
<td>UniverseText: Sample adults 18+ who have ever had chickenpox</td>
<td></td>
<td></td>
</tr>
<tr>
<td>SkipInstructions: &lt;1,2,R,D&gt; [goto AHEP]</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Question ID: AAU.350_00.000</th>
<th>Instrument Variable Name: AHEP</th>
<th>QuestionnaireFileName: Sample Adult</th>
</tr>
</thead>
<tbody>
<tr>
<td>QuestionText: Have you EVER had hepatitis?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1 Yes</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2 No</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7 Refused</td>
<td></td>
<td></td>
</tr>
<tr>
<td>9 Don't know</td>
<td></td>
<td></td>
</tr>
<tr>
<td>UniverseText: Sample adults 18+</td>
<td></td>
<td></td>
</tr>
<tr>
<td>SkipInstructions: &lt;1&gt; [goto AHEPBTST] &lt;2,R,D&gt; [goto AHEPLIV]</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
2013 NHIS Questionnaire - Sample Adult
Adult Access to Health Care & Utilization
Document Version Date: 02-Oct-14

Question ID: AAU.360_00.000 Instrument Variable Name: AHEPLIV QuestionnaireFileName: Sample Adult

QuestionText: Have you ever lived with someone who had hepatitis?

1 Yes
2 No
7 Refused
9 Don't know

UniverseText: Sample adults 18+ who have never had hepatitis; Ref/DK if ever had hepatitis

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

Question ID: AAU.365_00.010 Instrument Variable Name: AHEPBTST QuestionnaireFileName: Sample Adult

QuestionText: Have you ever had a blood test for hepatitis B?

1 Yes
2 No
7 Refused
9 Don’t know

UniverseText: Sample adults 18+

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

Question ID: AAU.370_00.000 Instrument Variable Name: SHTHEPB QuestionnaireFileName: Sample Adult

QuestionText: Have you EVER received the hepatitis B vaccine?

* Read if necessary: This is given in three separate doses and has been available since 1991. It is recommended for newborn infants, adolescents, and people such as health care workers, who may be exposed to the hepatitis B virus.

1 Yes
2 No
7 Refused
9 Don't know

UniverseText: Sample adults 18+

SkipInstructions: <1> [goto SHEPDOS]
<2,R,D> [goto SHTHEPA]
Did you receive at least 3 doses of the hepatitis B vaccine, or less than 3 doses?

1. Received at least 3 doses
2. Received less than 3 doses
7. Refused
9. Don't know

Sample adults 18+ who have ever received the Hepatitis B vaccine

The hepatitis A vaccine is given as a two dose series routinely to some children starting at 1 year of age, and to some adults and people who travel outside the United States. Although it can be given as a combination vaccine with hepatitis B, it is different from the hepatitis B shot, and has only been available since 1995. Have you ever received the hepatitis A vaccine?

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

Sample adults 18+

How many hepatitis A shots did you receive?

*Enter ‘96' if all shots were received

01-95 shots
96. Received all shots
97. Refused
99. Don't know

Sample adults 18+ who have had a hepatitis A vaccine
Have you ever had a blood test for hepatitis C?

1 Yes
2 No
7 Refused
9 Don’t know

What is the MAIN reason you were tested for hepatitis C? Was it because...

*Read answer categories below.

1 You or your doctor thought you were at risk of having hepatitis C because a blood test or symptoms like fatigue, nausea, stomach pain, yellowing of the eyes or skin indicated you might have liver disease
2 You were born from 1945 through 1965
3 You were at risk of hepatitis C infection due to exposure to blood on your job, injection drug use or receipt of transfusion before 1992
4 Some other reason
7 Refused
9 Don’t know

Sample adults 18+ who have had a blood test for hepatitis C

Skip instructions:

<1-4,R,D> if AGE GE 50 [goto SHINGLES];
elseif AGE LT 50 goto SHTTD
Shingles is an outbreak of a rash or blisters on the skin that may be associated with severe pain. The pain is generally on one side of the body or face. Shingles is caused by the chicken pox virus. A vaccine for shingles has been available since May 2006. Have you ever had the Zoster (ZOSS-ter) or Shingles vaccine, also called Zostavax®?

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

UniverseText: Sample adults 50+

SkipInstructions: <1,2,R,D> [goto SHTTD]
There are currently two types of tetanus shots available today. One is the Td or tetanus-diphtheria vaccine and the other is called Tdap or Adacel (trademark) or Boostrix (trademark). They are similar except the Tdap shot also includes a pertussis (per-TUH-sis) or whooping cough vaccine. Thinking back to your most recent tetanus shot, did your health care provider tell you or did the vaccine information sheet say the vaccine included the pertussis or whooping cough vaccine? The shot is often called Tdap or ADACEL (trademark) or BOOSTRIX (trademark).

1. Yes-included pertussis
2. No-did not include pertussis
3. Doctor did not say
7. Refused
9. Don't know

Sample adults 18+ who have had a tetanus shot in 2005 or beyond or refused to say if they had a tetanus shot in 2005 or beyond

Have you ever received an HPV shot or vaccine?

*HPV stands for human papillomavirus (pap-uh-LOW-muh-vi-rus).

*The vaccines are sometimes called CERVARIX (trademark) or GARDASIL (trademark).

1. Yes
2. No
3. Doctor refused when asked
7. Refused
9. Don't know

Sample adults LE 64
How many HPV shots did you receive?
* Enter '50' if 50 or more shots
* Enter '96' for all shots

**Shots should be in the range 1-50 or 96 for all shots.**

* Please correct.
Has a doctor or other health professional ever told you that you had any kind of chronic, or long-term liver condition?

1  Yes
2  No
7  Refused
9  Don't know

Sample adults 18+

Have you ever traveled outside of the United States to countries other than Europe, Japan, Australia, New Zealand or Canada, since 1995?

1  Yes
2  No
7  Refused
9  Don't know

Sample adults 18+

Do you currently volunteer or work in a hospital, medical clinic, doctor’s office, dentist’s office, nursing home or some other health-care facility? This includes emergency responders and public safety personnel, part-time and unpaid work in a health care facility as well as professional nursing care provided in the home.

*Read if necessary: This includes non-health care professionals, such as administrative staff, who work in a health-care facility.

1  Yes
2  No
7  Refused
9  Don't know

Sample adults 18+

<1> [goto WRKDIR] <2,R,D> [goto APSBPCHK]
Do you provide direct patient care as part of your routine work? By direct patient care we MEAN PHYSICAL OR HANDS ON CONTACT WITH PATIENTS.

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

Sample adults 18+ who work or volunteer in a health-care setting

DURING THE PAST 12 MONTHS, have you had your blood pressure checked by a doctor, nurse, or other health professional?

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

Sample adults 18+

DURING THE PAST 12 MONTHS, have you had your blood cholesterol checked by a doctor, nurse, or other health professional?

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

Sample adults 18+
Question ID: AAU.520_00.010  Instrument Variable Name: APSBSCHK  QuestionnaireFileName: Sample Adult

**QuestionText:** Have you had a fasting test for high blood sugar or diabetes DURING THE PAST 12 MONTHS?

1  Yes
2  No
7  Refused
9  Don't know

**UniverseText:** Sample adults 18+

**SkipInstructions:** <1,2,R,D> and SEX=1 and AGE GE 40 [goto APSCOL]
If <1,2,R,D> and SEX=1 and AGE < 40 [goto APSDIET]
Else <1,2,R,D> and SEX=2 [goto APSPAP]

---

Question ID: AAU.530_00.010  Instrument Variable Name: APSPAP  QuestionnaireFileName: Sample Adult

**QuestionText:** Have you had a Pap smear or Pap test DURING THE PAST 12 MONTHS?

*Read if necessary.

A Pap smear or Pap test is a routine test for women in which the doctor examines the cervix, takes a cell sample from the cervix with a small stick or brush, and sends it to the lab.

1  Yes
2  No
7  Refused
9  Don't know

**UniverseText:** Female sample adults 18+

**SkipInstructions:** <1,2,R,D> if AGE GE 30 [goto APSMAM];
else <1,2,R,D and AGE<30 [goto APSDIET]
### 2013 NHIS Questionnaire - Sample Adult

**Adult Access to Health Care & Utilization**

**Document Version Date:** 02-Oct-14

<table>
<thead>
<tr>
<th>Question ID</th>
<th>Instrument Variable Name</th>
<th>QuestionnaireFileName</th>
</tr>
</thead>
<tbody>
<tr>
<td>AAU.540_00.010</td>
<td>APSMAM</td>
<td>Sample Adult</td>
</tr>
</tbody>
</table>

**QuestionText:** Have you had a Mammogram DURING THE PAST 12 MONTHS?

*Read if necessary.

A mammogram is an x-ray of each breast to look for breast cancer.

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

**UniverseText:** Female sample adults 30+

**SkipInstructions:** <1,2,R,D> if AGE GE 40 [gotoAPSCOL];
else <1,2,R,D and AGE<40> [goto APSDIET]

---

<table>
<thead>
<tr>
<th>Question ID</th>
<th>Instrument Variable Name</th>
<th>QuestionnaireFileName</th>
</tr>
</thead>
<tbody>
<tr>
<td>AAU.550_00.010</td>
<td>APSCOL</td>
<td>Sample Adult</td>
</tr>
</tbody>
</table>

**QuestionText:** DURING THE PAST 12 MONTHS, have you had any test done for colon cancer?

*Read if necessary.

Colon cancer tests include blood stool tests, colonoscopy and sigmoidoscopy.

A blood stool test is a test that may use a special kit at home to determine whether the stool contains blood.

A sigmoidoscopy and colonoscopy are exams in which a tube is inserted in the rectum to view the colon for signs of cancer or other health problems.

| 1 | Yes |
| 2 | No |
| 7 | Refused |
| 9 | Don’t know |

**UniverseText:** Sample adults 40+

**SkipInstructions:** <1,2,R,D> [goto APSDIET]
Question ID: AAU.560_00.010  Instrument Variable Name: APSDIET  QuestionnaireFileName: Sample Adult

QuestionText: DURING THE PAST 12 MONTHS, has a doctor or other health professional talked to you about your diet?

1 Yes
2 No
7 Refused
9 Don't know

UniverseText: Sample adults 18+

SkipInstructions: <1,2,R,D> if SMKNOW in ('1','2') [goto APSSMKC];
else if (40<=AGE<=65) [goto LTCFAM];
else [goto AINDINS]

Question ID: AAU.570_00.010  Instrument Variable Name: APSSMKC  QuestionnaireFileName: Sample Adult

QuestionText: DURING THE PAST 12 MONTHS, has a doctor or other health professional talked to you about your smoking?

1 Yes
2 No
7 Refused
9 Don’t know

UniverseText: Sample adults 18+ currently who smoke every day or some days

SkipInstructions: <1,2,R,D> if (40<=AGE<=65) [goto LTCFAM];
else [goto AINDINS]
Do you have a parent, spouse, sibling, or adult child who has needed help for at least a year with everyday needs like bathing, dressing or eating due to a long term condition?

*Read if necessary.

Due to a chronic illness or disability.

1  Yes
2  No
7  Refused
9  Don’t know

How likely is it that you may someday need help with daily activities like bathing, dressing, eating, or using the toilet due to a long term condition? Would you say…

*Read categories below.

1  Very likely
2  Somewhat likely
3  Somewhat unlikely
4  Very unlikely
7  Refused
9  Don’t know
If you needed such help, who would provide this help?

*Enter all that apply, separate with commas.

1. My family
2. Someone I hire
3. Home health care organization
4. Nursing home/assisted living
5. Other
6. Refused
7. Don’t know

Sample adults 40-65

During the past 3 years, did you try to purchase health insurance directly, that is, not through any employer, union, or government program?

1. Yes
2. No
3. Refused
4. Don’t know

Sample adults 18+
<table>
<thead>
<tr>
<th>Question ID: AAU.600_00.020</th>
<th>Instrument Variable Name: AINDPRCH</th>
<th>QuestionnaireFileName: Sample Adult</th>
</tr>
</thead>
<tbody>
<tr>
<td>QuestionText: Was a plan purchased?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1 Yes</td>
<td>2 No</td>
<td>7 Refused</td>
</tr>
</tbody>
</table>

**UniverseText:** Sample adults 18+ who tried to purchase health insurance directly in the past 3 years

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

<table>
<thead>
<tr>
<th>Question ID: AAU.600_00.030</th>
<th>Instrument Variable Name: AINDWHO</th>
<th>QuestionnaireFileName: Sample Adult</th>
</tr>
</thead>
<tbody>
<tr>
<td>QuestionText: Was this plan for yourself, someone else in your family, or both?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1 Self</td>
<td>2 Someone else in family</td>
<td>3 Both</td>
</tr>
</tbody>
</table>

**UniverseText:** Sample adults 18+ who purchased health insurance directly in the past 3 years

**SkipInstructions:** <1-3,R,D> [goto AINDDIF1]
**2013 NHIS Questionnaire - Sample Adult**  
**Adult Access to Health Care & Utilization**  
Document Version Date: 02-Oct-14

**Question ID:** AAU.600_00.040  
**Instrument Variable Name:** AINDDIF1  
**QuestionnaireFileName:** Sample Adult

**QuestionText:** How difficult was it to find a plan with the type of coverage you needed? Would you say…

*Read categories below.

1. Very difficult
2. Somewhat difficult
3. Not at all difficult
7. Refused
9. Don’t know

**UniverseText:** Sample adults 18+ who purchased health insurance directly in the past 3 years

**SkipInstructions:** <1-3,R,D> [goto AINDDIF2]

---

**Question ID:** AAU.600_00.050  
**Instrument Variable Name:** AINDDIF2  
**QuestionnaireFileName:** Sample Adult

**QuestionText:** How difficult was it to find a plan you could afford? Would you say…

*Read categories below.

1. Very difficult
2. Somewhat difficult
3. Not at all difficult
7. Refused
9. Don’t know

**UniverseText:** Sample adults 18+ who purchased health insurance directly in the past 3 years

**SkipInstructions:** <1-3,R,D> [goto AINDENY1]

---

**Question ID:** AAU.600_01.060  
**Instrument Variable Name:** AINDENY1  
**QuestionnaireFileName:** Sample Adult

**QuestionText:** Did any company turn you down when you tried to buy coverage on your own?

1. Yes
2. No
7. Refused
9. Don’t know

**UniverseText:** Sample adults 18+ who purchased health insurance directly in the past 3 years

**SkipInstructions:** <1,2,R,D> [goto AINDENY2]
Question ID: AAU.600_02.060  Instrument Variable Name: AINDENY2  QuestionnaireFileName: Sample Adult

QuestionText: Did any company charge a higher price because of {fill 1: your/your family’s/you or your family’s} health?

1  Yes
2  No
7  Refused
9  Don’t know

UniverseText: Sample adults 18+ who purchased health insurance directly in the past 3 years

SkipInstructions: <1,2,R,D> [goto AINDENY3]

---

Question ID: AAU.600_03.060  Instrument Variable Name: AINDENY3  QuestionnaireFileName: Sample Adult

QuestionText: Did any company exclude a specific health problem from the coverage?

1  Yes
2  No
7  Refused
9  Don’t know

UniverseText: Sample adults 18+ who purchased health insurance directly in the past 3 years

SkipInstructions: <1,2,R,D> [goto next section]
Question ID: AAU.601_00.070  Instrument Variable Name: AINDNOT  QuestionnaireFileName: Sample Adult

QuestionText: Why did you not buy the plan?

*Enter all that apply, separate with commas.

1. Turned down
2. Cost
3. Pre-existing condition
4. Got health insurance from other source
5. Other
7. Refused
9. Don’t know

UniverseText: Sample adults 18+ who tried but did not purchase health insurance directly in the past 3 years

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

Question ID: AAU.601_00.080  Instrument Variable Name: AINDNTSP  QuestionnaireFileName: Sample Adult

QuestionText: *Specify other reason plan was not obtained.

Verbatim Verbatim response

UniverseText: Sample adults 18+ who had other reason plan was not purchased

SkipInstructions: <allow 75,R,D> [goto next section]

Question ID: AAU.605_00.010  Instrument Variable Name: AEXCHNG  QuestionnaireFileName: Sample Adult

QuestionText: Have you looked into purchasing health insurance coverage through the [Fill: ]?

1. Yes
2. No
7. Refused
9. Don’t know

UniverseText: Sample adults LT 65 years

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

NOTE: This is a new question beginning in Q4 2013.
**2013 NHIS Questionnaire - Sample Adult**

**Adult Cancer Screening**

**Document Version Date:** 29-May-14

**Question ID:** NAF.032_00.000  **Instrument Variable Name:** SNONCE  **QuestionnaireFileName:** Sample Adult

**QuestionText:** DURING THE PAST 12 MONTHS, have you used an indoor tanning device such as a sunlamp, sunbed, or tanning booth EVEN ONE TIME? Do NOT include times you have gotten a spray-on tan.

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

**UniverseText:** Sample adults 18+

**SkipInstructions:**

<1> [goto SNUM1]  
<2,R,D> if SEX=2 and if APSPAP=1 [goto RPAP1_M1];  
else if SEX=2 and APSPAP ne 1 [goto PAPHAD1];  
else if SEX=1 and AGE GE 40 [goto PSAREC];  
else if SEX =1 and AGE<40 [goto next section]

**Question ID:** NAF.033_00.000  **Instrument Variable Name:** SNUM1  **QuestionnaireFileName:** Sample Adult

**QuestionText:** DURING THE PAST 12 MONTHS, how many times have you used an indoor tanning device such as a sunlamp, sunbed or tanning booth? Do NOT include times you have gotten a spray-on tan.

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>001-365</td>
<td>1-365 times</td>
</tr>
<tr>
<td>997</td>
<td>Refused</td>
</tr>
<tr>
<td>999</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

**UniverseText:** Sample adults 18+ who have used indoor tanning device in past year

**SkipInstructions:**

<1-365,R,D> if SEX=2 and if APSPAP=1 [goto RPAP1_M1];  
else if SEX=2 and APSPAP ne 1 [goto PAPHAD1];  
else if SEX=1 and AGE GE 40 [goto PSAREC];  
else if SEX =1 and AGE<40 [goto next section]
Have you EVER HAD a Pap smear or Pap test?

*Read if necessary.

A Pap smear or Pap test is a routine test for women in which the doctor examines the cervix, takes a cell sample from the cervix with a small stick or brush, and sends it to the lab.

1  Yes
2  No
7  Refused
9  Don't know

Female sample adults 18+ who have not had a Pap test in the past 12 months
[Fill1: Earlier you said you had a Pap test.]

When did you have your MOST RECENT Pap test?

*Enter month of last Pap test.

*Enter ‘96’ to go to number and time period format.

01 January
02 February
03 March
04 April
05 May
06 June
07 July
08 August
09 September
10 October
11 November
12 December
96 Time period format
97 Refused
99 Don't know

 UniverseText: Female sample adults 18+ who have ever had a Pap smear

SkipInstructions: <1-12>D> [goto RPAP1_Y1]
<R> store 'R' in RPAP1_Y1 [goto RPAP21]
<96> store '9996' in RPAP1_Y1 [goto RPAP1N1]
2013 NHIS Questionnaire - Sample Adult
Adult Cancer Screening

Document Version Date: 29-May-14

**Question ID:** NAF.150_02.000  **Instrument Variable Name:** RPAP1_Y1  **QuestionnaireFileName:** Sample Adult

**QuestionText:**
2 of 2

*Enter year of last Pap test.

1880-current year 1880-current year
9996 Time period format
9997 Refused
9999 Don't know

**UniverseText:** Female sample adults age 18+ who answered month of last Pap smear test or didn't know month of last Pap smear test

**SkipInstructions:**

<valid year> if RPAP1_Y1 gt current year or (RPAP1_Y1=current year and RPAP1_M1 gt current month) goto ERR1_RPAP1_Y1 (future date)
elif RPAP1_Y1 lt DOBY or (RPAP1_Y1=DOBY and RPAP1_M1 lt DOBM) goto ERR2_RPAP1_Y1 (prior to birth date)
elif RPAP1_M1=D goto RPAP21
elif RPAP1_M1=1-12 goto PAPREA1
<R,D> goto RPAP21

**Hard Edit:**

ERR1_RPAP1_Y1

* Future date invalid. Please correct.

ERR2_RPAP1_Y1

* Date before birth. Please correct.

---

**Question ID:** NAF.160_01.000  **Instrument Variable Name:** RPAP1N1  **QuestionnaireFileName:** Sample Adult

**QuestionText:**
1 of 2

When did you have your MOST RECENT Pap test?

*Enter number for time since last Pap test.

*Enter '95' for 95 or more.

01-94 1-94
95 95+
97 Refused
99 Don't know

**UniverseText:** Female sample adults 18+ who selected number and time period format for most recent Pap smear test from the initial month screen

**SkipInstructions:**

<1-95> [goto RPAP1T1]
<R,D> store 'R,D' in RPAP1T1 [goto RPAP21]
2 of 2

*Enter time period for time since most recent Pap test.

1  Days ago
2  Weeks ago
3  Months ago
4  Years ago
7  Refused
9  Don't know

UNIVERSEText: Female sample adults 18+ who answered 1-95 for number part of this 2 part question

SkipInstructions: <1-3> goto PAPREA1
               <4> if RPAP1N1=4
                       set RPAP21=4
                       goto PAPREA1
               elseif RPAP1N1 gt 5 and RPAP1N1 gt AGE
                       goto ERR_RPAP1T1 (greater than persons age)
               elseif RPAP1N1 gt 5 and RPAP1N1 le AGE
                       set RPAP21=5
                       goto PAPREA1
               elseif RPAP1N1=1,2,3,5
                       goto RPAP21
               <R,D> goto RPAP21

Hard Edit:  ERR_RPAP1T1

* Time since last exam cannot be greater than age.
* Please correct.
2013 NHIS Questionnaire - Sample Adult
Adult Cancer Screening
Document Version Date: 29-May-14

Question ID: NAF.165_00.000  Instrument Variable Name: RPAP21  QuestionnaireFileName: Sample Adult

QuestionText: Was it:

*Read answer categories.

1  A year ago or less
2  More than 1 year but not more than 2 years
3  More than 2 years but not more than 3 years
4  More than 3 years but not more than 5 years
5  Over 5 years ago
7  Refused
9  Don't know

UniverseText: Female sample adults 18+ who failed to give a complete date in either the month or year format or failed to give a complete date in the number and time period format, or entered years ago in the time period format (excluding those whose last Pap smear test was over 5 years ago)

SkipInstructions: <1-5,R,D> if answer code is grayed out [goto ERR_RPAP21];
else [goto PAPREA1]

Hard Edit: ERR_RPAP21

*That is not a valid response.
*Please correct.

Question ID: NAF.170_00.000  Instrument Variable Name: PAPREA1  QuestionnaireFileName: Sample Adult

QuestionText: What was the MAIN reason you had this Pap test - was it part of a routine exam, because of a problem, or some other reason?

1  Part of a routine exam
2  Because of a problem
3  Other reason
7  Refused
9  Don't know

UniverseText: Female sample adults 18+ who have ever had a Pap smear

SkipInstructions: <1-3,R,D> [goto MDRECP1]
2013 NHIS Questionnaire - Sample Adult

Adult Cancer Screening

Document Version Date: 29-May-14

---

**Question ID:** NAF.215_00.000  **Instrument Variable Name:** MDRECP1  **QuestionnaireFileName:** Sample Adult

**QuestionText:**

Fill1: (IF PAPHAD1=1 and most recent screening exam LE 3 years from system date)

"Was your most recent Pap test recommended by a doctor or other health professional?"

Else (IF PAPHAD1=2, or PAPHAD1=1 and GT 3 years from system date or RPAP21=R,D)

"In the PAST 12 MONTHS, has a doctor or other health professional RECOMMENDED that you have a PAP test?"

1  Yes
2  No
3  Did not see a doctor in the past 12 months
7  Refused
9  Don't know

**UniverseText:** Female sample adults 18+ who did not answer refused or don't know to initial Pap test question

**SkipInstructions:** <1-3,R,D> if PAPHAD1=1 [goto PAPWHEN];
else PAPHAD ne 1 [goto HYST]

---

**Question ID:** NAF.216_00.000  **Instrument Variable Name:** PAPWHEN  **QuestionnaireFileName:** Sample Adult

**QuestionText:**

"When do you expect to have your next Pap smear or Pap test?"

01  A year or less from now
02  More than 1 year to 3 years from now
03  More than 3 years to 5 years from now
04  More than 5 years from now
05  When doctor recommends it
06  Never, had HPV DNA test
07  Never, had HPV vaccine
08  Never, other reason
97  Refused
99  Don't know

**UniverseText:** Female sample adults 18+ who have ever had a Pap smear

**SkipInstructions:** <1-8,R,D> [goto HYST]
Have you had a hysterectomy?

1 Yes
2 No
7 Refused
9 Don't know

Female sample adults 18+

Have you EVER HAD a mammogram?

1 Yes
2 No
7 Refused
9 Don't know

Female sample adults 30+ who have not had a mammogram in the past 12 months
<table>
<thead>
<tr>
<th>Question ID:</th>
<th>NAF.260_01.000</th>
<th>Instrument Variable Name:</th>
<th>RMAM1_MT</th>
<th>QuestionnaireFileName:</th>
<th>Sample Adult</th>
</tr>
</thead>
</table>

**QuestionText:**

1 of 2

[Fill1: Earlier you said you had a mammogram.]

When did you have your MOST RECENT mammogram?

*Enter month of last mammogram.

*Enter ‘96’ to go to number and time period format.

| 01 | January |
| 02 | February |
| 03 | March |
| 04 | April |
| 05 | May |
| 06 | June |
| 07 | July |
| 08 | August |
| 09 | September |
| 10 | October |
| 11 | November |
| 12 | December |
| 96 | Time period format |
| 97 | Refused |
| 99 | Don't know |

**UniverseText:**

Female sample adults 30+ who have ever had a mammogram

**SkipInstructions:**

<1-12,D> [goto RMAM1_YR]

<R> store 'R' in RMAM1_YR [goto RMAM2]

<96> store '9996' in RMAM1_YR [goto RMAM1N]
**2013 NHIS Questionnaire - Sample Adult**

**Adult Cancer Screening**

**Document Version Date:** 29-May-14

---

**Question ID:** NAF.260_02.000  **Instrument Variable Name:** RMAM1_YR  **QuestionnaireFileName:** Sample Adult

**QuestionText:**
2 of 2

*Enter year of last mammogram.

- **1880-current year**
  - 1880-current year
- **9996**
  - Time period format
- **9997**
  - Refused
- **9999**
  - Don't know

**UniverseText:** Female sample adults age 30+ who answered month of last mammogram or didn't know month of last mammogram

**SkipInstructions:**
- `<valid year>` if RMAM1_YR gt current year or (RMAM1_YR=current year and RMAM1_MT gt current month) 
  - goto ERR1_ RMAM1_YR (future date)
- elseif RMAM1_YR lt DOBY or (RMAM1_YR=DOBY and RMAM1_MT lt DOBM) 
  - goto ERR2_ RMAM1_YR (prior to birth date)
- elseif RMAM1_MT=D 
  - goto RMAM2
- elseif RMAM1_MT=1-12 
  - goto MAMREAS
- `<R,D>` goto RMAM2

**Hard Edit:**
- ERR1_ RMAM1_YR
  - * Future date invalid. Please correct.
  - ERR2_ RMAM1_YR
  - * Date before birth. Please correct.

---

**Question ID:** NAF.270_01.000  **Instrument Variable Name:** RMAM1N  **QuestionnaireFileName:** Sample Adult

**QuestionText:**
1 of 2

When did you have your MOST RECENT mammogram?

*Enter number for time since last mammogram.

*Enter '95' for 95 or more.

- **01-94**
  - 1-94
- **95**
  - 95+
- **97**
  - Refused
- **99**
  - Don't know

**UniverseText:** Female sample adults 30+ who selected number and time period format for most recent mammogram from the initial month screen

**SkipInstructions:**
- `<1-95>` [goto RMAM1T]
- `<R,D>` store 'R,D' in RMAM1T [goto RMAM2]
*Enter time period for time since most recent mammogram.

1  Days ago
2  Weeks ago
3  Months ago
4  Years ago
7  Refused
9  Don't know

Female sample adults 30+ who answered 1-95 for number part of this 2 part question

(ERR_RMAM1T)

* Time since last exam cannot be greater than age.
* Please correct.
2013 NHIS Questionnaire - Sample Adult
Adult Cancer Screening
Document Version Date: 29-May-14

---

**Question ID:** NAF.275_00.000  **Instrument Variable Name:** RMAM2  **QuestionnaireFileName:** Sample Adult

**QuestionText:**
Was it:

*Read answer categories.*

- 1: A year ago or less
- 2: More than 1 year but not more than 2 years
- 3: More than 2 years but not more than 3 years
- 4: More than 3 years but not more than 5 years
- 5: Over 5 years ago
- 7: Refused
- 9: Don't know

**UniverseText:**
Female sample adults 30+ who failed to give a complete date in either the month or year format or failed to give a complete date in the number and time period format, or entered years ago in the time period format (excluding those whose last mammogram was over 5 years ago)

**SkipInstructions:**
<1-5,R,D> if answer code is grayed out [goto ERR_RMAM2]
else [goto MAMREAS]

**Hard Edit:**

*That is not a valid response.*
*Please correct.*

---

**Question ID:** NAF.310_00.000  **Instrument Variable Name:** MAMREAS  **QuestionnaireFileName:** Sample Adult

**QuestionText:**
What was the MAIN reason you had this mammogram -- was it part of a routine exam, because of a problem, or some other reason?

- 1: Part of a routine exam
- 2: Because of a problem
- 3: Other reason
- 7: Refused
- 9: Don't know

**UniverseText:**
Female sample adults 30+ who have ever had a mammogram

**SkipInstructions:**
<1-3,R,D> [goto MDRECMAM]
### Adult Cancer Screening

#### Question ID: NAF.370_00.000  
**Instrument Variable Name:** MDRECMAM  
**QuestionnaireFileName:** Sample Adult

**QuestionText:** Fill1: (IF MAMHAD=1 and most recent screening exam LE 2 years from system date)  
[Was your most recent mammogram recommended by a doctor or other health professional?]  
Else (IF MAMHAD=2, or MAMHAD GT 2 years from system date or RMAM2=R,D)  
[In the PAST 12 MONTHS, has a doctor or other health professional RECOMMENDED that you have a mammogram?]  

<table>
<thead>
<tr>
<th>Option</th>
<th>Response</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Yes</td>
</tr>
<tr>
<td>2</td>
<td>No</td>
</tr>
<tr>
<td>3</td>
<td>Did not see a doctor in the past 12 months</td>
</tr>
<tr>
<td>7</td>
<td>Refused</td>
</tr>
<tr>
<td>9</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

**UniverseText:** Female sample adults 30+ who did not answer refused or don't know to initial mammogram question

**SkipInstructions:**  
<1-3,R,D> if AGE GE 40 [goto COLHAD]; else [goto next section]

---

#### Question ID: NAF.427_00.000  
**Instrument Variable Name:** PSAREC  
**QuestionnaireFileName:** Sample Adult

**QuestionText:** Has a doctor EVER recommended that you have a PSA test?  
*Read if necessary. A PSA test is a blood test to detect prostate cancer. It is also called a prostate-specific antigen test.*  

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

**UniverseText:** Male sample adults 40+  

**SkipInstructions:**  
<1,2,R,D> [goto PSAHAD]
Have you EVER HAD a PSA test?

*Read if necessary. A PSA test is a blood test to detect prostate cancer. It is also called a prostate-specific antigen test.

1 Yes
2 No
7 Refused
9 Don't know

When did you have your MOST RECENT PSA test?

* Enter month of last PSA test.

* Enter '96' to go to number and time period format.

01 January
02 February
03 March
04 April
05 May
06 June
07 July
08 August
09 September
10 October
11 November
12 December
96 Time period format
97 Refused
99 Don't know

Male sample adults 40+ who have had a PSA test

<1-12,D> [goto RPSA1_YR]
<R> store 'R' in RPSA1_YR [goto RPSA2]
<96> store '9996' in RPSA1_YR [goto RPSA1N]
**2013 NHIS Questionnaire - Sample Adult**

**Adult Cancer Screening**

**Document Version Date:** 29-May-14

---

**Question ID:** NAF.440_01.000  **Instrument Variable Name:** RPSA1_YR  **QuestionnaireFileName:** Sample Adult

**QuestionText:**

2 of 2

* Enter year of last PSA test.

**UniverseText:** Male sample adults 40+ who answered month of last PSA test or didn't know month of last PSA test

**SkipInstructions:**

\[
<\text{valid year}> \text{ if } \text{RPSA1}_YR \gt \text{current year or } (\text{RPSA1}_YR=\text{current year and RPSA1}_MT \gt \text{current month}) \\
\text{goto ERR1}_\text{RPSA1}_YR \text{ (future date)} \\
\text{elseif } \text{RPSA1}_YR \lt \text{DOBY or } (\text{RPSA1}_YR=\text{DOBY and RPSA1}_MT \lt \text{DOB月末}) \\
\text{goto ERR2}_\text{RPSA1}_YR \text{ (prior to birth date)} \\
\text{elseif } \text{RPSA1}_MT=D \\
\text{goto RPSA2} \\
\text{elseif } \text{RPSA1}_MT=1-12 \\
\text{goto PSAREAS} \\
<\text{R,D}> \text{ goto RPSA2}
\]

**Hard Edit:**

\[
\text{ERR1}_\text{RPSA1}_YR \\
* \text{Future date invalid. Please correct.}
\]

\[
\text{ERR2}_\text{RPSA1}_YR \\
* \text{Date before birth. Please correct.}
\]

---

**Question ID:** NAF.440_02.000  **Instrument Variable Name:** RPSA1N  **QuestionnaireFileName:** Sample Adult

**QuestionText:**

1 of 2

When did you have your MOST RECENT PSA test?

* Enter number for time since last PSA test.

* Enter '95' for 95 or more.

**UniverseText:** Male sample adults 40+ who have selected number and time period format for most recent PSA test from the initial month screen

**SkipInstructions:**

\[
<1-95> \text{ goto RPSA1T} \\
<\text{R,D}> \text{ store } '\text{R,D}' \text{ in RPSA1T } \text{ goto RPSA2}
\]
Question ID: NAF.440_03.000  Instrument Variable Name: RPSA1T  QuestionnaireFileName: Sample Adult

QuestionText: 2 of 2

* Enter time period for time since most recent PSA test.

1 Days ago
2 Weeks ago
3 Months ago
4 Years ago
7 Refused
9 Don't know

UniverseText: Male sample adults 40+ who answered 1-95 for number part of this 2 part question

SkipInstructions: <1-3> goto PSAREAS
<4> if RPSA1N=4
    set RPSA2=4
    goto PSAREAS
elseif RPSA1N gt 5 and RPSA1N gt AGE
    goto ERR_RPSA1T (greater than persons age)
elseif RPSA1N gt 5 and RPSA1N le AGE
    set RPSA2=5
    goto PSAREAS
elseif RPSA1N=1,2,3,5
    goto RPSA2
<R,D> goto RPSA2

Hard Edit: ERR_RPSA1T

* Time since last exam cannot be greater than age.
* Please correct.
### 2013 NHIS Questionnaire - Sample Adult
**Adult Cancer Screening**

**Document Version Date:** 29-May-14

<table>
<thead>
<tr>
<th>Question ID</th>
<th>Instrument Variable Name</th>
<th>QuestionnaireFileName</th>
</tr>
</thead>
<tbody>
<tr>
<td>NAF.440_04.000</td>
<td>RPSA2</td>
<td>Sample Adult</td>
</tr>
</tbody>
</table>

**QuestionText:**

Was it:

*Read answer categories.

1. A year ago or less
2. More than 1 year but not more than 2 years
3. More than 2 years but not more than 3 years
4. More than 3 years but not more than 5 years
5. Over 5 years ago
6. Refused
7. Don't know

**UniverseText:** Male sample adults 40+ who failed to give a complete date in either the month or year format or failed to give a complete date in the number and time period format, or entered years ago in the time period format (excluding those whose last PSA test was over 5 years ago)

**SkipInstructions:** `<1-5,R,D> if answer code is grayed out [goto ERR_RPSA2]; else [goto PSAREAS]`

**Hard Edit:**

ERR_RPSA2

*That is not a valid response.

*Please correct.

<table>
<thead>
<tr>
<th>Question ID</th>
<th>Instrument Variable Name</th>
<th>QuestionnaireFileName</th>
</tr>
</thead>
<tbody>
<tr>
<td>NAF.441_00.000</td>
<td>PSAREAS</td>
<td>Sample Adult</td>
</tr>
</tbody>
</table>

**QuestionText:**

What was the MAIN reason you had this PSA test - was it part of a routine exam, because of a problem, or some other reason?

1. Part of a routine exam
2. Because of a problem
3. Other reason
5. Refused
9. Don't know

**UniverseText:** Male sample adults 40+ who have had a PSA test

**SkipInstructions:** `<1-3,R,D> [goto COLHAD]`
Colonoscopy (colon-OS-copy) and sigmoidoscopy (sigmoid-OS-copy) are exams in which a doctor inserts a tube into the rectum to look for polyps or cancer. For a colonoscopy, the doctor checks the entire colon, and you are given medication through a needle in your arm to make you sleepy, and told to have someone drive you home. For a sigmoidoscopy, the doctor checks only part of the colon and you are fully awake.

Have you EVER HAD a colonoscopy?

*Read if necessary:

A polyp is a small growth that develops on the inside of the colon or rectum.

Before these tests, you are asked to take a medication that causes diarrhea.

1  Yes
2  No
7  Refused
9  Don't know

Sample adults 40+
When did you have your MOST RECENT colonoscopy?

*Enter month of last exam.

*Enter ‘96’ to go to number and time period format.

01 January
02 February
03 March
04 April
05 May
06 June
07 July
08 August
09 September
10 October
11 November
12 December
96 Time period format
97 Refused
99 Don't know

UniverseText: Sample adults 40+ who have ever had a colonoscopy

SkipInstructions:
<1-12,D> [goto COL_YR]
<R> store 'R' in COL_YR [goto COL2]
<96> store '9996' in COL_YR [goto COLN]
### 2013 NHIS Questionnaire - Sample Adult

#### Adult Cancer Screening

**Document Version Date:** 29-May-14

<table>
<thead>
<tr>
<th>Question ID:</th>
<th>NAF.560_02.000</th>
<th>Instrument Variable Name:</th>
<th>COL_YR</th>
<th>QuestionnaireFileName:</th>
<th>Sample Adult</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>QuestionText:</strong></td>
<td>2 of 2</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>*Enter year of last colonoscopy.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>1880-current year</strong></td>
<td>1880-current year</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9996</td>
<td>Time period format</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9997</td>
<td>Refused</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9999</td>
<td>Don't know</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>UniverseText:</strong></td>
<td>Sample adults age 40+ who answered month of last colonoscopy or didn't know month of last colonoscopy</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>SkipInstructions:</strong></td>
<td>&lt;valid year&gt; if COL_YR gt current year or (COL_YR=current year and COL_MT gt current month)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>goto ERR1_COL_YR (future date)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>elseif COL_YR lt DOBY or (COL_YR=DOBY and COL_MT lt DOBM)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>goto ERR2_COL_YR (prior to birth date)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>elseif COL_MT=D</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>goto COL2</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>elseif COL_MT=1-12</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>goto COLREAS</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>&lt;R,D&gt; goto COL2</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Hard Edit:</strong></td>
<td>ERR1_COL_YR</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>* Future date invalid. Please correct.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>ERR2_COL_YR</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>* Date before birth. Please correct.</td>
<td></td>
<td></td>
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<td></td>
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<table>
<thead>
<tr>
<th>Question ID:</th>
<th>NAF.570_01.000</th>
<th>Instrument Variable Name:</th>
<th>COLN</th>
<th>QuestionnaireFileName:</th>
<th>Sample Adult</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>QuestionText:</strong></td>
<td>1 of 2</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>When did you have your MOST RECENT colonoscopy?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>*Enter number for time since last colonoscopy.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>*Enter '95' for 95 or more.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>01-94</td>
<td>1-94</td>
<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td>95</td>
<td>95+</td>
<td></td>
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<td></td>
</tr>
<tr>
<td>97</td>
<td>Refused</td>
<td></td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>99</td>
<td>Don't know</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>UniverseText:</strong></td>
<td>Sample adults 40+ who selected number and time period format for most recent colonoscopy from the initial month screen</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>SkipInstructions:</strong></td>
<td>&lt;1-95&gt; [goto COLT]</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>&lt;R,D&gt; store 'R,D' in COLT [goto COL2]</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
*Enter time period for time since most recent colonoscopy.

1  Days ago
2  Weeks ago
3  Months ago
4  Years ago
7  Refused
9  Don't know

Sample adults 40+ who answered 1-95 for number part of this 2 part question

* Time since last exam cannot be greater than age.
* Please correct.
### Question 1
**Question ID:** NAF.575_00.000  
**Instrument Variable Name:** COL2  
**QuestionnaireFileName:** Sample Adult

**Question Text:**
Was it:

- *Read answer categories.

1. A year ago or less
2. More than 1 year but not more than 2 years
3. More than 2 years but not more than 3 years
4. More than 3 years but not more than 5 years
5. More than 5 years but not more than 10 years
6. Over 10 years ago
7. Refused
8. Don't know

**Universe Text:**
Sample adults 40+ who failed to give a complete date in either the month or year format or failed to give a complete date in the number and time period format, or entered years ago in the time period format (excluding those whose last colonoscopy was 6-9 or over 10 years ago)

**Skip Instructions:**
<1-6,R,D> if answer code is grayed out [goto ERR_COL2]; else [goto COLREAS]

**Hard Edit:**
ERR_COL2

*That is not a valid response.  
*Please correct.

### Question 2
**Question ID:** NAF.590_00.000  
**Instrument Variable Name:** COLREAS  
**QuestionnaireFileName:** Sample Adult

**Question Text:**
What was the MAIN reason you had this colonoscopy - was it part of a routine exam, because of a problem, as a follow-up test of an earlier test or screening exam, or some other reason?

1. Part of a routine exam
2. Because of a problem
3. Follow-up test of an earlier test or screening exam
4. Other reason
5. Refused
6. Don't know

**Universe Text:**
Sample adults 40+ who have had a colonoscopy

**Skip Instructions:**
<1-4,R,D> [goto SIGHAD]
Recall that a sigmoidoscopy is similar to a colonoscopy but the doctor checks only part of the colon and you are fully awake. Have you EVER HAD a sigmoidoscopy?

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

Sample adults 40+

When did you have your MOST RECENT sigmoidoscopy?

*Enter month of last exam.
*Enter '96' to go to number and time period format.

01. January
02. February
03. March
04. April
05. May
06. June
07. July
08. August
09. September
10. October
11. November
12. December
96. Time period format
97. Refused
99. Don't know

Sample adults 40+ who have ever had a sigmoidoscopy
**Question ID:** NAF.593_02.000 | **Instrument Variable Name:** SIG_YR | **QuestionnaireFileName:** Sample Adult

**QuestionText:**

2 of 2

*Enter year of last sigmoidoscopy.

1880-current year | 1880-current year
9996          | Time period format
9997          | Refused
9999          | Don't know

**UniverseText:** Sample adults age 40+ who answered month of last sigmoidoscopy or didn't know month of last sigmoidoscopy

**SkipInstructions:**

<valid year> if SIG_YR gt current year or (SIG_YR=current year and SIG_MT gt current month)

goto ERR1_SIG_YR (future date)

elseif SIG_YR lt DOBY or (SIG_YR=DOBY and SIG_MT lt DOBM)

goto ERR2_SIG_YR (prior to birth date)

elseif SIG_MT=D

goto SIG2

elseif SIG_MT=1-12

goto SIGREAS

<R,D> goto SIG2

**Hard Edit:**

ERR1_SIG_YR

* Future date invalid. Please correct.

ERR2_SIG_YR

* Date before birth. Please correct.

---

**Question ID:** NAF.594_01.000 | **Instrument Variable Name:** SIGN | **QuestionnaireFileName:** Sample Adult

**QuestionText:**

1 of 2

When did you have your MOST RECENT sigmoidoscopy?

*Enter number for time since last sigmoidoscopy.

*Enter '95' for 95 or more.

01-94 | 1-94
95   | 95+
97   | Refused
99   | Don't know

**UniverseText:** Sample adults 40+ who selected number and time period format for most recent sigmoidoscopy from the initial month screen

**SkipInstructions:**

<1-95> [goto SIGT]

<R,D> store 'R,D' in SIGT [goto SIG2]
*Enter time period for time since most recent sigmoidoscopy.

1  Days ago  
2  Weeks ago  
3  Months ago  
4  Years ago  
7  Refused  
9  Don't know

Sample adults 40+ who answered 1-95 for number part of this 2 part question

<1-3> goto SIGREAS  
<4> if SIGN=4  
   set SIG2=4  
   goto SIGREAS  
elseif SIGN=6,7,8,9  
   set SIG2=5  
   goto SIGREAS  
elseif SIGN gt 10 and SIGN gt AGE  
   goto ERR.SIGT (greater than persons age)  
elseif SIGN gt 10 and SIGN le AGE  
   set SIG2=6  
   goto SIGREAS  
elseif SIGN=1,2,3,5,10  
   goto SIG2  
<R,D> goto SIG2

* Time since last exam cannot be greater than age.  
* Please correct.
Was it:

*Read answer categories.

1. A year ago or less
2. More than 1 year but not more than 2 years
3. More than 2 years but not more than 3 years
4. More than 3 years but not more than 5 years
5. More than 5 years but not more than 10 years
6. Over 10 years ago
7. Refused
8. Don't know

Sample adults 40+ who failed to give a complete date in either the month or year format or failed to give a complete date in the number and time period format, or entered years ago in the time period format (excluding those whose last sigmoidoscopy was 6-9 or over 10 years ago)

What was the MAIN reason you had this sigmoidoscopy - was it part of a routine exam, because of a problem, as a follow-up test of an earlier test or screening exam, or some other reason?

1. Part of a routine exam
2. Because of a problem
3. Follow-up test of an earlier test or screening exam
4. Other reason
5. Refused
6. Don't know

Sample adults 40+ who have had a sigmoidoscopy

<1-4,R,D> [goto HFOBHAD]
The following questions are about the blood stool or occult blood test, a test to determine whether you have blood in your stool or bowel movement. The blood stool test can be done at home using a kit. You use a stick or brush to obtain a small amount of stool at home and send it back to the doctor or lab.

Have you EVER HAD a blood stool test, using a HOME test kit?

*Read if necessary:

Do not include tests done at the doctor's office.

1 Yes
2 No
7 Refused
9 Don't know

Sample adults 40+
Question ID: NAF.640_01.000  Instrument Variable Name: RHFO1_MT  QuestionnaireFileName: Sample Adult

QuestionText: 1 of 2

When did you have your MOST RECENT blood stool test using a kit at home?

*Enter month of last home blood stool test.

*Enter '96' to go to number and time period format.

01 January
02 February
03 March
04 April
05 May
06 June
07 July
08 August
09 September
10 October
11 November
12 December
96 Time period format
97 Refused
99 Don't know

UniverseText: Sample adults 40+ who have ever had a home blood stool test

SkipInstructions: <1-12,D> goto RHFO1_YR
<R> store "R" in RHFO1_YR and goto RHFO2
<96> store "9996" in RHFO1_YR and goto RHFO1N
**2013 NHIS Questionnaire - Sample Adult**

**Adult Cancer Screening**

**Document Version Date: 29-May-14**

---

**Question ID:** NAF.640_02.000  
**Instrument Variable Name:** RHFO1_YR  
**QuestionnaireFileName:** Sample Adult

<table>
<thead>
<tr>
<th>QuestionText</th>
</tr>
</thead>
<tbody>
<tr>
<td>2 of 2</td>
</tr>
<tr>
<td>*Enter year of last home blood stool test.</td>
</tr>
</tbody>
</table>

**1880-current year**  
1880-current year  
9996 Time period format  
9997 Refused  
9999 Don't know

**UniverseText:** Sample adults age 40+ who answered month of last home blood stool test or didn't know month of last test

**SkipInstructions:**  
<valid year> if RHFO1_YR gt current year or (RHFO1_YR=current year and RHRO1_MT gt current month)  
goto ERR1_RHFO1_YR (future date)  
elseif RHFO1_YR lt DOBY or (RHFO1_YR=DOBY and RHFO1_MT lt DOBM)  
goto ERR2_RHFO1_YR (prior to birth date)  
elseif RHFO1_MT=D  
goto RHFO2  
elseif RHFO1_MT=1-12  
goto HFOBREA1  
<R,D> goto RHFO2

**Hard Edit:**  
ERR1_RHFO1_YR  
* Future date invalid. Please correct.  
ERR2_RHFO1_YR  
* Date before birth. Please correct.

---

**Question ID:** NAF.650_01.000  
**Instrument Variable Name:** RHFO1N  
**QuestionnaireFileName:** Sample Adult

<table>
<thead>
<tr>
<th>QuestionText</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 of 2</td>
</tr>
<tr>
<td>When did you have your MOST RECENT blood stool test using a kit at home?</td>
</tr>
<tr>
<td>*Enter number for time since last home blood stool test.</td>
</tr>
<tr>
<td>*Enter '95' for 95 or more.</td>
</tr>
</tbody>
</table>

| 01-94 | 1-94 |
| 95 | 95+ |
| 97 | Refused |
| 99 | Don't know |

**UniverseText:** Sample adults 40+ who selected number and time period format for most recent home blood stool test from the initial month screen

**SkipInstructions:**  
<1-95> [goto RHFO1T]  
<R,D> store 'R,D' in RHFO1T [goto RHFO2]
**Question Text:**

2 of 2

*Enter time period for time since most recent home blood stool test.

1 Days ago
2 Weeks ago
3 Months ago
4 Years ago
7 Refused
9 Don't know

**Universe Text:**

Sample adults 40+ who answered 1-95 for number part of this 2 part question

**Skip Instructions:**

<1-3> goto HFOBREA1
<4> if RHFO1N=4
    set RHFO2=4
    goto HFOBREA1
elseif RHFO1N=6,7,8,9
    set RHFO2=5
    goto HFOBREA1
elseif RHFO1N gt 10 and RHFO1N gt AGE
    goto ERR_RHFO1T (greater than persons age)
elseif RHFO1N gt 10 and RHFO1N le AGE
    set RHFO2=6
    goto HFOBREA1
elseif RHFO1N=1,2,3,5,10
    goto RHFO2
<R,D> goto RHFO2

**Hard Edit:**

ERR_RHFO1T

* Time since last exam cannot be greater than age.
* Please correct.
**2013 NHIS Questionnaire - Sample Adult**

**Adult Cancer Screening**

Document Version Date: 29-May-14

---

**Question ID:** NAF.655_00.000  
**Instrument Variable Name:** RHFO2  
**QuestionnaireFileName:** Sample Adult

**QuestionText:**

Was it:

*Read answer categories.*

1. A year ago or less
2. More than 1 year but not more than 2 years
3. More than 2 years but not more than 3 years
4. More than 3 years but not more than 5 years
5. More than 5 years but not more than 10 years
6. Over 10 years ago
7. Refused
9. Don't know

**UniverseText:**

Sample adults 40+ who failed to give a complete date in either the month or year format or failed to give a complete date in the number and time period format, or entered years ago in the time period format (excluding those whose last home blood stool test was 6-9 or over 10 years ago)

**SkipInstructions:**

<1-6,R,D> if answer code is grayed out [goto ERR_RHFO2]; else [goto HFOBREA1]

**Hard Edit:**

ERR_RHFO2

*That is not a valid response.
*Please correct.

---

**Question ID:** NAF.660_00.000  
**Instrument Variable Name:** HFOBREA1  
**QuestionnaireFileName:** Sample Adult

**QuestionText:**

What was the MAIN reason you had this home blood stool test - was it part of a routine exam, because of a problem, or some other reason?

1. Part of a routine exam
2. Because of a problem
3. Other reason
7. Refused
9. Don't know

**UniverseText:**

Sample adults 40+ who have had a home blood stool test

**SkipInstructions:**

<1-3,R,D> [goto COLPROB]
<table>
<thead>
<tr>
<th>Question ID:</th>
<th>NAF.750_00.000</th>
<th>Instrument Variable Name:</th>
<th>COLPROB</th>
<th>QuestionnaireFileName:</th>
<th>Sample Adult</th>
</tr>
</thead>
<tbody>
<tr>
<td>QuestionText:</td>
<td>In the PAST 12 MONTHS, did a doctor or other health professional RECOMMEND that you be tested to look for problems in your colon or rectum?</td>
<td>1</td>
<td>Yes</td>
<td>2</td>
<td>No</td>
</tr>
<tr>
<td>UniverseText:</td>
<td>Sample adults 40+</td>
<td>&lt;1,2,R,D&gt; [goto next section]</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
### Question ID: ASI.005_00.000  Instrument Variable Name: ASIINTRO  QuestionnaireFileName: Sample Adult

**QuestionText:**
*You are about to enter the Sexual Identity and Lifestyle questions section. This section includes questions on computer use, the respondent’s neighborhood, sexual identity, financial worries, mental health, and HIV testing.*

*Enter 1 to Continue.*

1  Continue

**UniverseText:**  Sample adults 18+

**SkipInstructions:**  <1> goto ACICPUSE

---

### Question ID: ASI.130_00.000  Instrument Variable Name: ACICPUSE  QuestionnaireFileName: Sample Adult

**QuestionText:**  These questions are about you and your neighborhood.

How often do you use a computer?

*Read answer categories.*

1  Never or almost never
2  Some days
3  Most days
4  Every day
7  Refused
9  Don't know

**UniverseText:**  Sample adults 18+

**SkipInstructions:**  <1-4,R,D> [goto ACISATHC]
Question ID: ASI.140_00.000  Instrument Variable Name: ACISATHC  QuestionnaireFileName: Sample Adult

QuestionText: In general, how satisfied are you with the health care you received in the past 12 months?

*Read answer categories.

1  Very satisfied
2  Somewhat satisfied
3  Somewhat dissatisfied
4  Very dissatisfied
5  You haven't had health care in the past 12 months
7  Refused
9  Don't know

UniverseText: Sample adults 18+

SkipInstructions: <1-5,R,D> [goto ACITENUR]

---

Question ID: ASI.150_00.000  Instrument Variable Name: ACITENUR  QuestionnaireFileName: Sample Adult

QuestionText: About how long have you lived in your present neighborhood?

1  Less than 1 year
2  1-3 years
3  4-10 years
4  11-20 years
5  More than 20 years
7  Refused
9  Don't know

UniverseText: Sample adults 18+

SkipInstructions: <1-5,R,D> [goto ACINHELP]
Question ID: ASI.160_00.000  Instrument Variable Name: ACINHELP  QuestionnaireFileName: Sample Adult

QuestionText: How much do you agree or disagree with the following statements about your neighborhood?

People in this neighborhood help each other out.

Would you say…

*Read answer categories.

1  Definitely agree
2  Somewhat agree
3  Somewhat disagree
4  Definitely disagree
7  Refused
9  Don't know

UniverseText: Sample adults 18+

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

Question ID: ASI.170_00.000  Instrument Variable Name: ACINCNTO  QuestionnaireFileName: Sample Adult

QuestionText: How much do you agree or disagree with the following statements about your neighborhood?

There are people I can count on in this neighborhood.

Would you say…

*Read answer categories if necessary.

1  Definitely agree
2  Somewhat agree
3  Somewhat disagree
4  Definitely disagree
7  Refused
9  Don't know

UniverseText: Sample adults 18+

SkipInstructions: <1-4,R,D> [goto ACINTRU]
Question ID: ASI.180_00.000  Instrument Variable Name: ACINTRU  QuestionnaireFileName: Sample Adult

QuestionText: *Read if necessary.

How much do you agree or disagree with the following statements about your neighborhood?

People in this neighborhood can be trusted.

Would you say…

*Read answer categories if necessary.

1  Definitely agree
2  Somewhat agree
3  Somewhat disagree
4  Definitely disagree
7  Refused
9  Don't know

UniverseText: Sample adults 18+

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

---

Question ID: ASI.190_00.000  Instrument Variable Name: ACINKNT  QuestionnaireFileName: Sample Adult

QuestionText: *Read if necessary.

How much do you agree or disagree with the following statements about your neighborhood?

This is a close-knit neighborhood.

Would you say…

*Read answer categories if necessary.

1  Definitely agree
2  Somewhat agree
3  Somewhat disagree
4  Definitely disagree
7  Refused
9  Don't know

UniverseText: Sample adults 18+

SkipInstructions: <1-4,R,D> [if SEX=1, goto ACISIM; elseif SEX=2, goto ACISIF]
**Question ID:** ASI.220_00.000  
**Instrument Variable Name:** ACISIM  
**QuestionnaireFileName:** Sample Adult

**QuestionText:** (book) ASI1

Which of the following best represents how you think of yourself?

1. Gay
2. Straight, that is, not gay
3. Bisexual
4. Something else
5. I don't know the answer
6. Refused

**UniverseText:** Male sample adults 18+

**SkipInstructions:** <1-3,R> [goto ACIRETR]  
<4> [goto ACISMELS]  
<5> [goto ACISIMDK]

---

**Question ID:** ASI.230_00.000  
**Instrument Variable Name:** ACISMELS  
**QuestionnaireFileName:** Sample Adult

**QuestionText:** (book) ASI3

What do you mean by something else?

1. You are not straight, but identify with another label such as queer, trisexual, omnisexual or pansexual
2. You are transgender, transsexual or gender variant
3. You have not figured out or are in the process of figuring out your sexuality
4. You do not think of yourself as having sexuality
5. You do not use labels to identify yourself
6. You mean something else
7. Refused
8. Don't know

**UniverseText:** Male sample adults 18+ who think of themselves as something else

**SkipInstructions:** <1-5,R,D> [goto ACIRETR]  
<6> [goto ACIMSESP]
### Question ID: ASI.234_00.000  
#### Instrument Variable Name: ACISIMDK  
#### QuestionnaireFileName: Sample Adult

**QuestionText:**

(book) ASI4

What do you mean by don't know?

1. You don't understand the words
2. You understand the words, but you have not figured out or are in the process of figuring out your sexuality
3. You mean something else
7. Refused
9. Don't know

**UniverseText:** Male sample adults 18+ who answered don't know at ACISIM

**SkipInstructions:**

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

<3> [goto ACIMSESP]

---

### Question ID: ASI.238_00.000  
#### Instrument Variable Name: ACIMSESP  
#### QuestionnaireFileName: Sample Adult

**QuestionText:**

What do you mean by something else?

**Verbatim**

Verbatim response
7. Refused
9. Don't know

**UniverseText:** Male sample adults 18+ who answered something else at ACISMELS or ACISIMDK

**SkipInstructions:**

<Allow 75,R,D> [goto ACIRETR]
Question ID: ASI.240_00.000  Instrument Variable Name: ACISIF  QuestionnaireFileName: Sample Adult

QuestionText: (book) ASI2

Which of the following best represents how you think of yourself?

1  Lesbian or gay
2  Straight, that is, not lesbian or gay
3  Bisexual
4  Something else
5  I don't know the answer
7  Refused

UniverseText: Female sample adults 18+

SkipInstructions: <1-3,R> [goto ACIRETR]  
<4> [goto ACISFELS]  
<5> [goto ACISIFDK]

---

Question ID: ASI.250_00.000  Instrument Variable Name: ACISFELS  QuestionnaireFileName: Sample Adult

QuestionText: (book) ASI3

What do you mean by something else?

1  You are not straight, but identify with another label such as queer, trisexual, omnisexual or pansexual
2  You are transgender, transsexual or gender variant
3  You have not figured out or are in the process of figuring out your sexuality
4  You do not think of yourself as having sexuality
5  You do not use labels to identify yourself
6  You mean something else
7  Refused
9  Don't know

UniverseText: Female sample adults 18+ who think of themselves as something else

SkipInstructions: <1-5,R,D> [goto ACIRETR]  
<6> [goto ACIFSESP]
### Question ID: ASI.254_00.000

**Instrument Variable Name:** ACISIFDK

**QuestionnaireFileName:** Sample Adult

**Question Text:**

(book) ASI4

What do you mean by don't know?

1. You don't understand the words
2. You understand the words, but you have not figured out or are in the process of figuring out your sexuality
3. You mean something else
7. Refused
9. Don't know

**Universe Text:** Female sample adults 18+ who answered don't know at ACISIF

**Skip Instructions:**

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

<3> [goto ACIFSESP]

---

### Question ID: ASI.258_00.000

**Instrument Variable Name:** ACIFSESP

**QuestionnaireFileName:** Sample Adult

**Question Text:**

What do you mean by something else?

**Verbatim:**

97 Refused
99 Don't know

**Universe Text:** Female sample adults 18+ who answered something else at ACISFELS or ACISIFDK

**Skip Instructions:**

<Allow 75,R,D> [goto ACIRETR]
<table>
<thead>
<tr>
<th>Question ID</th>
<th>Instrument Variable Name</th>
<th>QuestionnaireFileName</th>
<th>QuestionText</th>
</tr>
</thead>
<tbody>
<tr>
<td>ASI.260_00.000</td>
<td>ACIRETR</td>
<td>Sample Adult</td>
<td>The next questions ask how worried you are right now about financial matters. How worried are you right now about not having enough money for retirement? Are you…*Read answer categories.</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>1 Very worried</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>2 Moderately worried</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>3 Not too worried</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>4 Not worried at all</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>7 Refused</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>9 Don't know</td>
</tr>
<tr>
<td>UniverseText:</td>
<td></td>
<td></td>
<td>Sample adults 18+</td>
</tr>
<tr>
<td>SkipInstructions:</td>
<td></td>
<td></td>
<td>&lt;1-4,R,D&gt; [goto ACIMEDC]</td>
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</tbody>
</table>

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<thead>
<tr>
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<th>Instrument Variable Name</th>
<th>QuestionnaireFileName</th>
<th>QuestionText</th>
</tr>
</thead>
<tbody>
<tr>
<td>ASI.270_00.000</td>
<td>ACIMEDC</td>
<td>Sample Adult</td>
<td>How worried are you right now about not being able to pay medical costs of a serious illness or accident? Are you…*Read answer categories if necessary.</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>1 Very worried</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>2 Moderately worried</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>3 Not too worried</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>4 Not worried at all</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>7 Refused</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>9 Don't know</td>
</tr>
<tr>
<td>UniverseText:</td>
<td></td>
<td></td>
<td>Sample adults 18+</td>
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<tr>
<td>SkipInstructions:</td>
<td></td>
<td></td>
<td>&lt;1-4,R,D&gt; [goto ACISTLV]</td>
</tr>
</tbody>
</table>
How worried are you right now about not being able to maintain the standard of living you enjoy? Are you…

*Read answer categories if necessary.

1  Very worried
2  Moderately worried
3  Not too worried
4  Not worried at all
7  Refused
9  Don’t know

Sample adults 18+

How worried are you right now about not being able to pay medical costs for normal healthcare? Are you…

*Read answer categories if necessary.

1  Very worried
2  Moderately worried
3  Not too worried
4  Not worried at all
7  Refused
9  Don’t know

Sample adults 18+
Question ID: ASI.300_00.000  Instrument Variable Name: ACICCOLL  QuestionnaireFileName: Sample Adult

QuestionText: How worried are you right now about not having enough money to pay for your children's college? Are you…

*Read answer categories if necessary.

1 Very worried
2 Moderately worried
3 Not too worried
4 Not worried at all
5 This does not apply to me
7 Refused
9 Don't know

UniverseText: Sample adults 18+

SkipInstructions: <1-5,R,D> [goto ACINBILL]

Question ID: ASI.310_00.000  Instrument Variable Name: ACINBILL  QuestionnaireFileName: Sample Adult

QuestionText: How worried are you right now about not having enough to pay your normal monthly bills? Are you…

*Read answer categories if necessary.

1 Very worried
2 Moderately worried
3 Not too worried
4 Not worried at all
7 Refused
9 Don't know

UniverseText: Sample adults 18+

SkipInstructions: <1-4,R,D> [goto ACIHCST]
**Question ID:** ASI.320_00.000  
**Instrument Variable Name:** ACIH CST  
**QuestionnaireFileName:** Sample Adult

**QuestionText:** How worried are you right now about not being able to pay your rent, mortgage, or other housing costs? Are you…

*Read answer categories if necessary.

1. Very worried
2. Moderately worried
3. Not too worried
4. Not worried at all
7. Refused
9. Don't know

**UniverseText:** Sample adults 18+

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

---

**Question ID:** ASI.330_00.000  
**Instrument Variable Name:** ACICCMP  
**QuestionnaireFileName:** Sample Adult

**QuestionText:** How worried are you right now about not being able to make the minimum payments on your credit cards? Are you…

*Read answer categories if necessary.

1. Very worried
2. Moderately worried
3. Not too worried
4. Not worried at all
5. I don't have credit cards
7. Refused
9. Don't know

**UniverseText:** Sample adults 18+

**SkipInstructions:** <1-5,R,D> [goto ACISLEEP]
On average, how many hours of sleep do you get in a 24-hour period?

*Enter hours of sleep in whole numbers, rounding 30 minutes (1/2 hour) or more up to the next whole hour and dropping 29 or fewer minutes.

<table>
<thead>
<tr>
<th>Option</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>01-24</td>
<td>1-24 hours</td>
</tr>
<tr>
<td>97</td>
<td>Refused</td>
</tr>
<tr>
<td>99</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

Sample adults 18+

In the past week, how many times did you have trouble falling asleep?

*Enter '0' if respondent did not have trouble falling asleep in the past week.

*Enter '7' for 7 or more times.

<table>
<thead>
<tr>
<th>Option</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>00</td>
<td>Did not have trouble falling asleep in the past week</td>
</tr>
<tr>
<td>01-06</td>
<td>1-6 times</td>
</tr>
<tr>
<td>07</td>
<td>7 or more times</td>
</tr>
<tr>
<td>97</td>
<td>Refused</td>
</tr>
<tr>
<td>99</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

Sample adults 18+
<table>
<thead>
<tr>
<th>Question ID: ASI.360_00.000</th>
<th>Instrument Variable Name: ACISLPST</th>
<th>QuestionnaireFileName: Sample Adult</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>QuestionText:</strong></td>
<td>In the past week, how many times did you have trouble staying asleep?</td>
<td></td>
</tr>
<tr>
<td></td>
<td>*Enter '0' if respondent did not have trouble staying asleep in the past week.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>*Enter '7' for 7 or more times.</td>
<td></td>
</tr>
<tr>
<td>00</td>
<td>Did not have trouble staying asleep in the past week</td>
<td></td>
</tr>
<tr>
<td>01-06</td>
<td>1-6 times</td>
<td></td>
</tr>
<tr>
<td>07</td>
<td>7 or more times</td>
<td></td>
</tr>
<tr>
<td>97</td>
<td>Refused</td>
<td></td>
</tr>
<tr>
<td>99</td>
<td>Don't know</td>
<td></td>
</tr>
<tr>
<td><strong>UniverseText:</strong></td>
<td>Sample adults 18+</td>
<td></td>
</tr>
<tr>
<td><strong>SkipInstructions:</strong></td>
<td>&lt;0-7,R,D&gt; [goto ACISLPMD]</td>
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</table>

<table>
<thead>
<tr>
<th>Question ID: ASI.370_00.000</th>
<th>Instrument Variable Name: ACISLPMD</th>
<th>QuestionnaireFileName: Sample Adult</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>QuestionText:</strong></td>
<td>In the past week, how many times did you take medication to help you fall asleep or stay asleep?</td>
<td></td>
</tr>
<tr>
<td></td>
<td>*Enter '0' if respondent did not take medication to help sleep in the past week.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>*Enter '7' for 7 or more times.</td>
<td></td>
</tr>
<tr>
<td>00</td>
<td>Did not take medication to help sleep in the past week</td>
<td></td>
</tr>
<tr>
<td>01-06</td>
<td>1-6 times</td>
<td></td>
</tr>
<tr>
<td>07</td>
<td>7 or more times</td>
<td></td>
</tr>
<tr>
<td>97</td>
<td>Refused</td>
<td></td>
</tr>
<tr>
<td>99</td>
<td>Don't know</td>
<td></td>
</tr>
<tr>
<td><strong>UniverseText:</strong></td>
<td>Sample adults 18+</td>
<td></td>
</tr>
<tr>
<td><strong>SkipInstructions:</strong></td>
<td>&lt;0-7,R,D&gt; [goto ACIREST]</td>
<td></td>
</tr>
</tbody>
</table>
### Question ID: ASI.380_00.000  Instrument Variable Name: ACIREST  QuestionnaireFileName: Sample Adult

**QuestionText:** In the past week, on how many days did you wake up feeling well rested?

*Enter '0' if respondent never felt well rested in the past week.*

- **00** Never felt rested in the past week
- **01-07** 1-7 days
- **97** Refused
- **99** Don't know

**UniverseText:** Sample adults 18+

**SkipInstructions:** <0-7,R,D> [goto MHSAD_CK]

---

### Question ID: ASI.390_00.000  Instrument Variable Name: MHSAD_CK  QuestionnaireFileName: Sample Adult

**QuestionText:** Now I am going to ask you some questions about feelings you may have experienced over the PAST 30 DAYS.

- **1** Enter 1 to continue

**UniverseText:** Sample adults 18+

**SkipInstructions:** <1> [goto ACISAD]

---

### Question ID: ASI.390_01.000  Instrument Variable Name: ACISAD  QuestionnaireFileName: Sample Adult

**QuestionText:** (book) ASI5

DURING THE PAST 30 DAYS, how often did you feel

...So sad that nothing could cheer you up?

- **1** ALL of the time
- **2** MOST of the time
- **3** SOME of the time
- **4** A LITTLE of the time
- **5** NONE of the time
- **7** Refused
- **9** Don't know

**UniverseText:** Sample adults 18+

**SkipInstructions:** <1-5,R,D> [goto ACINERV]
<table>
<thead>
<tr>
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<th>Instrument Variable Name: ACINERV</th>
<th>QuestionnaireFileName: Sample Adult</th>
</tr>
</thead>
<tbody>
<tr>
<td>QuestionText: (book) ASI5</td>
<td></td>
<td></td>
</tr>
<tr>
<td>* Read if necessary:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>During the PAST 30 DAYS, how often did you feel</td>
<td></td>
<td></td>
</tr>
<tr>
<td>...Nervous?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1 ALL of the time</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2 MOST of the time</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3 SOME of the time</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4 A LITTLE of the time</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5 NONE of the time</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7 Refused</td>
<td></td>
<td></td>
</tr>
<tr>
<td>9 Don't know</td>
<td></td>
<td></td>
</tr>
<tr>
<td>UniverseText: Sample adults 18+</td>
<td></td>
<td></td>
</tr>
<tr>
<td>SkipInstructions: &lt;1-5,R,D&gt; [goto ACIRSTLS]</td>
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<table>
<thead>
<tr>
<th>Question ID: ASI.390_03.000</th>
<th>Instrument Variable Name: ACIRSTLS</th>
<th>QuestionnaireFileName: Sample Adult</th>
</tr>
</thead>
<tbody>
<tr>
<td>QuestionText: (book) ASI5</td>
<td></td>
<td></td>
</tr>
<tr>
<td>* Read if necessary:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>During the PAST 30 DAYS, how often did you feel</td>
<td></td>
<td></td>
</tr>
<tr>
<td>...Restless or fidgety?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1 ALL of the time</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2 MOST of the time</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3 SOME of the time</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4 A LITTLE of the time</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5 NONE of the time</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7 Refused</td>
<td></td>
<td></td>
</tr>
<tr>
<td>9 Don't know</td>
<td></td>
<td></td>
</tr>
<tr>
<td>UniverseText: Sample adults 18+</td>
<td></td>
<td></td>
</tr>
<tr>
<td>SkipInstructions: &lt;1-5,R,D&gt; [goto ACIHOPLS]</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
* Read if necessary:

During the PAST 30 DAYS, how often did you feel

...Hopeless?

1  ALL of the time
2  MOST of the time
3  SOME of the time
4  A LITTLE of the time
5  NONE of the time
7  Refused
9  Don't know

UniverseText:  Sample adults 18+

SkipInstructions:  <1-5,R,D> [goto ACIEFFRT]

* Read if necessary:

During the PAST 30 DAYS, how often did you feel

...That everything was an effort?

1  ALL of the time
2  MOST of the time
3  SOME of the time
4  A LITTLE of the time
5  NONE of the time
7  Refused
9  Don't know

UniverseText:  Sample adults 18+

SkipInstructions:  <1-5,R,D> [goto ACWTHLS]
Question ID: ASI.390_06.000  Instrument Variable Name: ACIWHTLS  QuestionnaireFileName: Sample Adult

QuestionText: (book) ASI5

* Read if necessary:

During the PAST 30 DAYS, how often did you feel

...Worthless?

1  ALL of the time
2  MOST of the time
3  SOME of the time
4  A LITTLE of the time
5  NONE of the time
7  Refused
9  Don't know

UniverseText: Sample adults 18+

SkipInstructions: <1-5,R,D> if ACISAD or ACINERV or ACIRSTLS or ACIHOPLS or ACIEFFRT or ACIWHTLS=1-3 [goto ACIMUCH];
else [goto ACIHIVT]

Question ID: ASI.400_00.000  Instrument Variable Name: ACIMUCH  QuestionnaireFileName: Sample Adult

QuestionText: We just talked about a number of feelings you had during the PAST 30 DAYS. Altogether, how MUCH did these feelings interfere with your life or activities: a lot, some, a little, or not at all?

1  A lot
2  Some
3  A little
4  Not at all
7  Refused
9  Don't know

UniverseText: Sample adults 18+ who at least some of the time have felt sad, nervous, restless or fidgety, hopeless, that everything was an effort, or worthless, in the past 30 days

SkipInstructions: <1-4,R,D> [goto ACIHIVT]
The next question is about the test for HIV, the virus that causes AIDS. Except for tests you may have had as part of blood donations, have you ever been tested for HIV?

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

Sample adults 18+

I am going to show you a list of reasons why some people have not been tested for HIV (the virus that causes AIDS). Which one of these would you say is the MAIN reason why you have not been tested?

01. It's unlikely you've been exposed to HIV
02. You were afraid to find out if you were HIV positive (that you had HIV)
03. You didn't want to think about HIV or about being HIV positive
04. You were worried your name would be reported to the government if you tested positive
05. You didn't know where to get tested
06. You don't like needles
07. You were afraid of losing job, insurance, housing, friends, family, if people knew you were positive for AIDS infection
08. Some other reason
09. No particular reason
97. Refused
99. Don't know

Sample adults 18+ who have never been tested for HIV
The next questions are about your Internet and email use.

Do you use the Internet?

1 Yes
2 No
7 Refused
9 Don't know

Sample adults 18+

How often do you use the Internet?

*Read if necessary: How many times per day, per week, per month, or per year do you use the Internet?

*Enter number.

001-995 1-995
997 Refused
999 Don't know

Sample adults 18+ who use the Internet

<1-995> [goto AWEBOFNO] <R,D> [goto AWEBEML]
<table>
<thead>
<tr>
<th>Question ID</th>
<th>Instrument Variable Name</th>
<th>QuestionnaireFileName</th>
</tr>
</thead>
<tbody>
<tr>
<td>AWB.020_02.000</td>
<td>AWEBOFTP</td>
<td>Sample Adult</td>
</tr>
<tr>
<td>QuestionText</td>
<td>2 of 2</td>
<td></td>
</tr>
<tr>
<td>*Enter time period for how often Internet is used.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1</td>
<td>Per day</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Per week</td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Per month</td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Per year</td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>Refused</td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>Don't know</td>
<td></td>
</tr>
<tr>
<td>UniverseText</td>
<td>Sample adults 18+ who use the Internet and gave a valid value for the number portion of this question</td>
<td></td>
</tr>
<tr>
<td>SkipInstructions</td>
<td>&lt;1-4,R,D&gt; [goto AWEBEML]</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Question ID</th>
<th>Instrument Variable Name</th>
<th>QuestionnaireFileName</th>
</tr>
</thead>
<tbody>
<tr>
<td>AWB.030_00.000</td>
<td>AWEBEML</td>
<td>Sample Adult</td>
</tr>
<tr>
<td>QuestionText</td>
<td>Do you send or receive emails?</td>
<td></td>
</tr>
<tr>
<td>1</td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>Refused</td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>Don't know</td>
<td></td>
</tr>
<tr>
<td>UniverseText</td>
<td>Sample adults 18+</td>
<td></td>
</tr>
<tr>
<td>SkipInstructions</td>
<td>&lt;1&gt; [goto AWEBEMAD] &lt;2,R,D&gt; [goto next section]</td>
<td></td>
</tr>
</tbody>
</table>
We may want to contact you to obtain additional health-related information. May I have your email address?

*Enter email address.

*Enter 'N' for none.

allow 75

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>97</td>
<td>Refused</td>
</tr>
<tr>
<td>99</td>
<td>Don't Know</td>
</tr>
</tbody>
</table>

Sample adults 18+ who send or receive email

How often do you check this email account?

*Read if necessary: How many times per day, per week, per month, or per year do you check this email account?

*Enter number.

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>001-995</td>
<td>1-995</td>
</tr>
<tr>
<td>97</td>
<td>Refused</td>
</tr>
<tr>
<td>99</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

Sample adults 18+ who gave an email address

<address> [goto AWBEMNO] <N,R,D> [goto next section]
2013 NHIS Questionnaire - Sample Adult
Adult Internet and Email Usage
Document Version Date: 29-May-14

Question ID: AWB.050_02.000 Instrument Variable Name: AWEBMTP QuestionnaireFileName: Sample Adult

QuestionText: 2 of 2

*Enter time period for how often email is checked.

1 Per day
2 Per week
3 Per month
4 Per year
7 Refused
9 Don't know

UniverseText: Sample adults 18+ who gave an email address and gave a valid value for the number portion of this question

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