**2015 NHIS Questionnaire - Sample Adult**

**Adult Identification**

**Document Version Date:** 10-May-16

---

<table>
<thead>
<tr>
<th>Question ID:</th>
<th>AID.005_00.000</th>
<th>Instrument Variable Name:</th>
<th>SADULT</th>
<th>QuestionnaireFileName:</th>
<th>Sample Adult</th>
</tr>
</thead>
</table>
| QuestionText: | * 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 | |
| UniverseText: | This is the Sample Adult and (the Sample Adult section has not been started or completed). | |
| SkipInstructions: | <1> if Sample Adult = demographics.hhc.RELRESP_A  

   goto beginning of adult.asd  

elseif Sample Adult = demographics.hhc.HHRESP  

   goto beginning of adult.asd  

else  

   goto AIDVERF_S  

endif  

<2> goto callbk.ACALLBK1  

<3> goto PROX1  

<R> store '4' in ASTAT  

if recontact.RCIFLAG ne '1'  

   goto recontact.RCI_BEGIN procedure  

else  

   goto back.OUTCOMEB1 procedure  

endif | |

---

<table>
<thead>
<tr>
<th>Question ID:</th>
<th>AID.010_00.000</th>
<th>Instrument Variable Name:</th>
<th>PROX1</th>
<th>QuestionnaireFileName:</th>
<th>Sample Adult</th>
</tr>
</thead>
</table>
| QuestionText: | * 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 | |
| UniverseText: | The Sample Adult's physical or mental condition prohibits responding. | |
| SkipInstructions: | <1> goto PROX2  

<2> goto PROX3 | |
**2015 NHIS Questionnaire - Sample Adult**

**Adult Identification**

**Document Version Date:** 10-May-16

---

**Question ID:** AID.015_00.000  **Instrument Variable Name:** PROX2  
**QuestionnaireFileName:** Sample Adult

<table>
<thead>
<tr>
<th>QuestionText</th>
</tr>
</thead>
<tbody>
<tr>
<td>* Ask if necessary.</td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>QuestionText</th>
</tr>
</thead>
<tbody>
<tr>
<td>*Ask if necessary.</td>
</tr>
</tbody>
</table>

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
* 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

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

Are you Male or Female?

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

1 Male
2 Female

Respondent said his/her sex is not correct.

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

goto AIDVERF_S (as the default goto)
2015 NHIS Questionnaire - Sample Adult
Adult Identification

Document Version Date: 10-May-16

Question ID: AID.045_00.000  Instrument Variable Name: AIDVERF_A  QuestionnaireFileName: Sample Adult

QuestionText: * 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

UniverseText: Sample Adult said his/her sex is correct.

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

Question ID: AID.050_00.000  Instrument Variable Name: AIDAGE  QuestionnaireFileName: Sample Adult

QuestionText: How old are you?

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

UniverseText: 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

Soft Edit: 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

UniverseText: Sample Adult said his/her age is correct.

SkipInstructions: <1> if AGE of Sample Adult le '17
    goto NO_MORE
else
    goto beginning of adult.asd
endif
<2> goto AIDDOB_M

---

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

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

SkipInstructions: <01-12, Refused, Don't know> goto AIDDOB_D
*Enter day of birth.

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

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

If days not valid, goto ERR_AIDDOB_D
<table>
<thead>
<tr>
<th>Question ID:</th>
<th>AID.060_03.000</th>
</tr>
</thead>
<tbody>
<tr>
<td>Instrument Variable Name:</td>
<td>AIDDOB_Y</td>
</tr>
<tr>
<td>QuestionnaireFileName:</td>
<td>Sample Adult</td>
</tr>
<tr>
<td>QuestionText:</td>
<td>3 of 3</td>
</tr>
</tbody>
</table>

*Enter year of birth.*

1880-2020 Year of birth
**UniverseText:**
Respondent said his/her date of birth is not correct or his/her age is not correct

**SkipInstructions:**

```
<1880-2020, 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
endif

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
```

**Hard Edit:**

```
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: <DOBM> <DOBD>, <DOBY>]*
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.
Question ID: ASD.050_00.000  Instrument Variable Name: WRKVER  QuestionnaireFileName: Sample Adult

QuestionText: 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

UniverseText: Sample adults 18+ who were working or not working last week

SkipInstructions: <1>if DOINGLW2 = 1,2,4 [goto WHOWRK]
else if DOINGLW2 = 3,5 [goto EVERWRK]
<2> [go to WRKCOR]
<R,D> [go to EVERWRK]

---

Question ID: ASD.060_00.000  Instrument Variable Name: WRKCOR  QuestionnaireFileName: Sample Adult

QuestionText: (book) A1 ? [F1]

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

UniverseText: 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.

SkipInstructions: <1,4> [goto WHOWRK]
<2,5> [goto WHYNOWK2]
<R,D> [go to EVERWRK]
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

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

if DOINGLW2 = Refused or Don't know then
  [goto EVERWRK]
endif

What is the main reason you did not work last week?

Taking care of house or family
Going to school
Retired
On a planned vacation from work
On family or maternity leave
Temporarily unable to work for health reasons
Have job or contract and off-season
On layoff
Disabled
Other
Refused
Don't know

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

<1-10,D,R> if WRKCOR = 2 then
  [goto HOWORK]
else [goto EVERWRK]
**2015 NHIS Questionnaire - Sample Adult**

**Adult Socio-Demographic**

Document Version Date: 10-May-16

---

**Question ID:** ASD.066_00.000  
**Instrument Variable Name:** EVERWRK  
**QuestionnaireFileName:** Sample Adult

**QuestionText:** Have you ever held a job or worked at a business?

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

**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]  
<2,D,R> [goto SCHOOLYR]

---

**Question ID:** ASD.070_00.000  
**Instrument Variable Name:** WHOWRK  
**QuestionnaireFileName:** Sample Adult

**QuestionText:** ? [F1]

(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**  
Verbatim response
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 KINDIND]
### 2015 NHIS Questionnaire - Sample Adult

#### Adult Socio-Demographic

**Document Version Date:** 10-May-16

<table>
<thead>
<tr>
<th>Question ID:</th>
<th>ASD.080_00.000</th>
<th>Instrument Variable Name:</th>
<th>KINDIND</th>
<th>QuestionnaireFileName:</th>
<th>Sample Adult</th>
</tr>
</thead>
<tbody>
<tr>
<td>QuestionText:</td>
<td>? [F1]</td>
<td>What kind of business or industry was this? (For example: TV and radio mgt., retail shoe store, State Department of Labor)</td>
<td>Verbatim</td>
<td>Verbatim response</td>
<td>7 Refused</td>
</tr>
<tr>
<td><strong>UniverseText:</strong></td>
<td>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</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>SkipInstructions:</strong></td>
<td>&lt;90 char long,D,R&gt; [goto KINDWRK]</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Question ID:</th>
<th>ASD.090_00.000</th>
<th>Instrument Variable Name:</th>
<th>KINDWRK</th>
<th>QuestionnaireFileName:</th>
<th>Sample Adult</th>
</tr>
</thead>
<tbody>
<tr>
<td>QuestionText:</td>
<td>? [F1]</td>
<td>What kind of work were you doing? (For example: farming, mail clerk, computer specialist.)</td>
<td>Verbatim</td>
<td>Verbatim response</td>
<td>7 Refused</td>
</tr>
<tr>
<td><strong>UniverseText:</strong></td>
<td>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</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>SkipInstructions:</strong></td>
<td>&lt;90 char long,D,R&gt; [goto IMPACT]</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Question ID:</th>
<th>ASD.100_00.000</th>
<th>Instrument Variable Name:</th>
<th>IMPACT</th>
<th>QuestionnaireFileName:</th>
<th>Sample Adult</th>
</tr>
</thead>
<tbody>
<tr>
<td>QuestionText:</td>
<td>? [F1]</td>
<td>What were your most important activities on this job or business? (For example: sells cars, keeps account books, operates printing press.)</td>
<td>Verbatim</td>
<td>Verbatim response</td>
<td>7 Refused</td>
</tr>
<tr>
<td><strong>UniverseText:</strong></td>
<td>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</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>SkipInstructions:</strong></td>
<td>&lt;90 char long,D,R&gt; [goto SUPERVIS]</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Did you supervise other employees as part of your job?

1 Yes
2 No
7 Refused
9 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

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

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

<1-4,6,D,R> [goto LOCALLNO]
<5> [goto BUSINC]
<table>
<thead>
<tr>
<th>Question ID:</th>
<th>ASD.112_00.000</th>
<th>Instrument Variable Name:</th>
<th>BUSINC</th>
<th>QuestionnaireFileName:</th>
<th>Sample Adult</th>
</tr>
</thead>
<tbody>
<tr>
<td>QuestionText:</td>
<td>Is this business incorporated?</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>
<tr>
<td>UniverseText:</td>
<td>Sample adults 18+ who are self-employed</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>SkipInstructions:</td>
<td>&lt;1,2,D,R&gt; [goto LOCALLNO]</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Question ID:</th>
<th>ASD.120_00.000</th>
<th>Instrument Variable Name:</th>
<th>LOCALLNO</th>
<th>QuestionnaireFileName:</th>
<th>Sample Adult</th>
</tr>
</thead>
<tbody>
<tr>
<td>QuestionText:</td>
<td>(book) A3</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Thinking about</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>(Fill1: this MAIN job or business)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>(Fill2: your last week at the job you held the longest)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>(Fill3: your last week at the job you held most recently)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>how many people (Fill4:work/Fill5: worked) at this location? Please include yourself.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>* &quot;People&quot; includes both FULL- and PART-time employees.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>* &quot;Location&quot; refers to the street address of the workplace.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>01</td>
<td>1 employee</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>02</td>
<td>2-9 employees</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>03</td>
<td>10-24 employees</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>04</td>
<td>25-49 employees</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>05</td>
<td>50-99 employees</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>06</td>
<td>100-249 employees</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>07</td>
<td>250-499 employees</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>08</td>
<td>500-999 employees</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>09</td>
<td>1000 employees or more</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>UniverseText:</td>
<td>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</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>SkipInstructions:</td>
<td>&lt;1-9, R,D&gt; [goto WRKLONGN]</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
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

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

* Enter time period.

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

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

* 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?

<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,) 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?

<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, or who have ever worked

**SkipInstructions:** <1,2,D,R> [goto PDSICK]
2015 NHIS Questionnaire - Sample Adult
Adult Socio-Demographic

Document Version Date: 10-May-16

**Question ID:** ASD.160_00.000
**Instrument Variable Name:** PDSICK
**QuestionnaireFileName:** Sample Adult

**QuestionText:**

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

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

**SkipInstructions:** <1,2,R,D> if WRKLONGH=2, then [goto WHOWRKHLH]; else [goto WRKARRNG / ASD.220_00.080]
2015 NHIS Questionnaire - Sample Adult
Adult Socio-Demographic
Document Version Date: 10-May-16

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

---

Question ID: ASD.220_00.010 Instrument Variable Name: WHOWRKLH QuestionnaireFileName: Sample Adult

QuestionText: ? [F1]

Thinking of ALL the jobs or businesses you have ever had, including work done in the Armed Forces, for whom did you work the longest? (Name of company, business, organization or employer)

Verbatim Verbatim response
7 Refused
9 Don't know

UniverseText: Sample adults 18+ whose current, MAIN job is NOT the job they held the longest

SkipInstructions: <allow 90,R,D> [goto KINDINLH]

---

Question ID: ASD.220_00.020 Instrument Variable Name: KINDINLH 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 Verbatim response
7 Refused
9 Don't know

UniverseText: Sample adults 18+ whose current, MAIN job is NOT the job they held the longest

SkipInstructions: <allow 90,R,D> [goto KINDWKLH]
**Question ID:** ASD.220_00.030  **Instrument Variable Name:** KINDWKHLH  **QuestionnaireFileName:** Sample Adult

**QuestionText:**

> ? [F1]

> What kind of work were you doing? (For example: farming, mail clerk, computer specialist)

**Verbatim**

- Refused
- Don't know

**UniverseText:**

Sample adults 18+ whose current, MAIN job is NOT the job they held the longest

**SkipInstructions:**

<allow 90,R,D> [goto IMPACTLH]

---

**Question ID:** ASD.220_00.040  **Instrument Variable Name:** IMPACTLH  **QuestionnaireFileName:** Sample Adult

**QuestionText:**

> ? [F1]

> What were your most important activities on this job or business? (For example: sell cars, keeps account books, operates printing press)

**Verbatim**

- Refused
- Don't know

**UniverseText:**

Sample adults 18+ whose current, MAIN job is NOT the job they held the longest

**SkipInstructions:**

<allow 90,R,D> [goto WRKCATLH]
### 2015 NHIS Questionnaire - Sample Adult

#### Adult Socio-Demographic

**Document Version Date:** 10-May-16

<table>
<thead>
<tr>
<th>Question ID:</th>
<th>ASD.220_00.050</th>
<th>Instrument Variable Name: WRKCATLH</th>
<th>QuestionnaireFileName: Sample Adult</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>QuestionText:</strong></td>
<td>(book) A2 ? [F1]</td>
<td>Looking at the card, which of these best describes the job or business you held for the longest time?</td>
<td></td>
</tr>
<tr>
<td>1</td>
<td>An employee of a PRIVATE company, business, or individual for wages, salary, or commission</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>A FEDERAL government employee</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>A STATE government employee</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>A LOCAL government employee</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>Self-employed in OWN business, professional practice or farm</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>Working WITHOUT PAY in family-owned business or farm</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>Refused</td>
<td></td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>Don't know</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**UniverseText:** Sample adults 18+ whose current, MAIN job is NOT the job they held the longest

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

<table>
<thead>
<tr>
<th>Question ID:</th>
<th>ASD.220_00.060</th>
<th>Instrument Variable Name: WRKLGLHN</th>
<th>QuestionnaireFileName: Sample Adult</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>QuestionText:</strong></td>
<td>1 of 2</td>
<td>About how long did you work at the job or business you held the longest?</td>
<td></td>
</tr>
<tr>
<td></td>
<td>* Enter number.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>001-365</td>
<td>1-365</td>
<td></td>
<td></td>
</tr>
<tr>
<td>997</td>
<td>Refused</td>
<td></td>
<td></td>
</tr>
<tr>
<td>999</td>
<td>Don't know</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**UniverseText:** Sample adults 18+ whose current, MAIN job is NOT the job they held the longest

**SkipInstructions:** <1-365> [goto WRKLGLHT] <R,D> [goto WRKARRNG]
Question ID: ASD.220_00.070  Instrument Variable Name: WRKLGLHT  QuestionnaireFileName: Sample Adult

QuestionText: 2 of 2

* Enter time period.
1 Day(s)
2 Week(s)
3 Month(s)
4 Year(s)
7 Refused
9 Don't know

UniverseText: Sample adults 18+ whose current, MAIN job is NOT the job they held the longest and who gave a number at WRKLGLHN

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

Question ID: ASD.220_00.080  Instrument Variable Name: WRKARRNG  QuestionnaireFileName: Sample Adult

QuestionText: ? [F1]

The next set of questions refers to your [fill: job as a (KINDWRK) with (WHOWRK)/current, MAIN job]. Which of the following best describes your work arrangement?

* Read categories below.
1 You work as an independent contractor, independent consultant, or freelance worker
2 You are paid by a temporary agency
3 You work for a contractor who provides workers and services to others under contract
4 You are a regular, permanent employee (standard work arrangement)
5 Some other work arrangement
7 Refused
9 Don't know

UniverseText: Sample adults 18+ who are currently employed

SkipInstructions: <1-5,R,D> [goto WRKSCHED]
Which of the following best describes the hours you usually work?

* Read categories below.

1. A regular daytime schedule
2. A regular evening shift
3. A regular night shift
4. A rotating shift
7. Refused
9. Don't know

During the past 30 days, did you work any amount of time between 1:00 AM and 5:00 AM?

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

Sample adults 18+ who are currently employed
**2015 NHIS Questionnaire - Sample Adult**

**Adult Socio-Demographic**

Document Version Date: 10-May-16

---

**Question ID:** ASD.220_00.105  
**Instrument Variable Name:** NIGHTFRQ  
**QuestionnaireFileName:** Sample Adult

**QuestionText:** ? [F1]

DURING THE PAST 30 DAYS, on how many days did you work ANY amount of time between 1:00 AM and 5:00 AM?

- **01-30**  
- **1-30**  
- **97** Refused  
- **99** Don't know

**UniverseText:** Sample adults 18+ who are currently employed and worked between the hours of 1:00 AM and 5:00 AM during the past 30 days

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

---

**Question ID:** ASD.220_00.110  
**Instrument Variable Name:** WORKWFAM  
**QuestionnaireFileName:** Sample Adult

**QuestionText:** ? [F1]

These next four questions ask about your [fill: job as a (KINDWRK) with (WHOWRK)/current, MAIN job]. Please tell me whether you strongly agree, agree, disagree, or strongly disagree with each of these statements.

"The demands of my job interfere with my personal or family life."

- **1** Strongly agree  
- **2** Agree  
- **3** Disagree  
- **4** Strongly disagree  
- **7** Refused  
- **9** Don't know

**UniverseText:** Sample adults 18+ who are currently employed

**SkipInstructions:** <1-4,R,D> [goto JOBDMAND]
**Question ID:** ASD.220_00.120  
**Instrument Variable Name:** JOBDMAND  
**QuestionnaireFileName:** Sample Adult

**QuestionText:** ? [F1]  
* Read if necessary: Please tell me whether you strongly agree, agree, disagree, or strongly disagree with this statement.  
"I have enough time to get the job done."

1. Strongly agree  
2. Agree  
3. Disagree  
4. Strongly disagree  
7. Refused  
9. Don't know

**UniverseText:** Sample adults 18+ who are currently employed

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

---

**Question ID:** ASD.220_00.130  
**Instrument Variable Name:** JOBCNTRL  
**QuestionnaireFileName:** Sample Adult

**QuestionText:** ? [F1]  
* Read if necessary: Please tell me whether you strongly agree, agree, disagree, or strongly disagree with this statement.  
"My job allows me to make a lot of decisions on my own."

1. Strongly agree  
2. Agree  
3. Disagree  
4. Strongly disagree  
7. Refused  
9. Don't know

**UniverseText:** Sample adults 18+ who are currently employed

**SkipInstructions:** <1-4,R,D> [if WRKCAT=5, then goto WORUNEMP; else goto JOBSPPRT]
Question ID: ASD.220_00.140  Instrument Variable Name: JOBSPPRT  QuestionnaireFileName: Sample Adult

QuestionText:  

* Read if necessary: Please tell me whether you strongly agree, agree, disagree, or strongly disagree with this statement.

"I can count on my supervisor or manager for support when I need it."

1. Strongly agree
2. Agree
3. Disagree
4. Strongly disagree
7. Refused
9. Don't know

UniverseText:  Sample adults 18+ who are currently employed but not self-employed

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

---

Question ID: ASD.220_00.150  Instrument Variable Name: WORUNEMP  QuestionnaireFileName: Sample Adult

QuestionText:  

Are you worried about losing your [fill: job as a (KINDWRK) with (WHOWRK)/current, MAIN job]?

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

UniverseText:  Sample adults 18+ who are currently employed

SkipInstructions:  <1,2,R,D> [goto SAFETY]
The next question is about workplace safety and health. Please answer for your job as a (KINDWRK) with (WHOWRK)/current, MAIN job.

Overall, how safe do you think your workplace is? Would you say…

* Read categories below.

1  Very safe
2  Safe
3  Unsafe
4  Very unsafe
7  Refused
9  Don't know

Sample adults 18+ who are currently employed

Please tell me whether you strongly agree, agree, disagree, or strongly disagree with this statement. "The health and safety of workers is a high priority with management where I work."

1  Strongly agree
2  Agree
3  Disagree
4  Strongly disagree
7  Refused
9  Don't know

Sample adults 18+ who are currently employed but not self-employed
Again, think about your [fill: job as a (KINDWRK) with (WHOWRK)/current, MAIN job].

DURING THE PAST 12 MONTHS, were you threatened, bullied, or harassed by anyone while you were on the job?

1   Yes  
2   No  
7   Refused  
9   Don't know

Sample adults 18+ who are currently employed

DURING THE PAST 12 MONTHS, how often were you threatened, bullied, or harassed by anyone while you were on the job? Would you say...

* Read categories below.

1   Once  
2   A few times  
3   Monthly  
4   Weekly  
5   Daily  
7   Refused  
9   Don't know

Sample adults 18+ who are currently employed and were threatened, bullied, or harassed while on the job in the past 12 months
Again, continue thinking about your [KINDWRK] with [WHOWRK]/current, MAIN job. How often does your job involve repeated lifting, pushing, pulling, or bending? Would you say...

* Read categories below.

0 Never
1 Seldom
2 Sometimes
3 Often
4 Always
7 Refused
9 Don't know

Sample adults 18+ who are currently employed

How often does your job involve standing or walking around? Would you say...

* Read categories below.

0 Never
1 Seldom
2 Sometimes
3 Often
4 Always
7 Refused
9 Don't know

Sample adults 18+ who are currently employed
Question ID: ASD.220_00.210  Instrument Variable Name: SMOKEXP  QuestionnaireFileName: Sample Adult

QuestionText: ? [F1]

DURING THE PAST 12 MONTHS, while at work, how often were you exposed to tobacco smoke from other people? Would you say...

* Read categories below.

0  Never
1  Less than twice a week
2  Twice a week or more, but not every day
3  Every day
7  Refused
9  Don't know

UniverseText: Sample adults 18+ who are currently employed

SkipInstructions: <0-3,R,D> [if WRKCAT=5, then goto ACN.HYPEV; else goto HLTHPROM]

Question ID: ASD.220_00.230  Instrument Variable Name: HLTHPROM  QuestionnaireFileName: Sample Adult

QuestionText: ? [F1]

In the past year, were health promotion programs made available to you by your employer? Examples of health promotion programs include education about weight management, smoking cessation, screening for high blood pressure, high cholesterol, or other health risks, and onsite fitness facilities or discounted gym memberships.

1  Yes
2  No
7  Refused
9  Don't know

UniverseText: Sample adults 18+ who are currently employed but not self-employed

SkipInstructions: <1> [goto HPROMPAR]  
<2,R,D> [goto ACN.HYPEV]
How often did you participate in any of these activities in the past year? Would you say...

* Read categories below.

0  Never
1  Once
2  A few times
3  Monthly
4  Weekly
5  Daily
7  Refused
9  Don't know

Sample adults 18+ who are currently employed but not self-employed and their employers offer health promotion programs

<0-5,R,D> [goto ACN.HYPEV]
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)
2015 NHIS Questionnaire - Sample Adult

Adult Conditions

Document Version Date: 12-May-16

Question ID: ACN.022_02.020  Instrument Variable Name: HYPMDEV2  QuestionnaireFileName: Sample Adult

QuestionText: Was any medicine EVER prescribed by a doctor for your high blood pressure?

1  Yes
2  No
7  Refused
9  Don't know

UniverseText: Sample adults 18+ who have ever been told they had high blood pressure

SkipInstructions: <1> [goto HYPMED2]  
<2,R,D> [goto CHLEV]

Question ID: ACN.022_03.030  Instrument Variable Name: HYPMED2  QuestionnaireFileName: Sample Adult

QuestionText: Are you NOW taking any medicine prescribed by a doctor for your high blood pressure?

1  Yes
2  No
7  Refused
9  Don't know

UniverseText: Sample adults 18+ who were ever prescribed medicine for high blood pressure

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

Question ID: ACN.023_00.010  Instrument Variable Name: CHLEV  QuestionnaireFileName: Sample Adult

QuestionText: Have you EVER been told by a doctor or other health professional that 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> [goto CHLYR]  
<2,R,D> [goto CHDEV]
2015 NHIS Questionnaire - Sample Adult
Adult Conditions

Question ID: ACN.023_00.020  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.*

<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 ever told they had high cholesterol

**SkipInstructions:** <1,2,R,D> [goto CHLMDEV2]

---

Question ID: ACN.023_03.030  Instrument Variable Name: CHLMDEV2  QuestionnaireFileName: Sample Adult

**QuestionText:** Was any medication EVER prescribed by a doctor to help lower your cholesterol?

<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 have ever been told they had high cholesterol

**SkipInstructions:** <1> [goto CHLMDNW2]  
<2,R,D> [goto CHDEV]

---

Question ID: ACN.023_04.040  Instrument Variable Name: CHLMDNW2  QuestionnaireFileName: Sample Adult

**QuestionText:** Are you NOW taking any medicine prescribed by a doctor to help lower your cholesterol?

<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 ever prescribed medicine for high cholesterol

**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]

---

**Question ID:** ACN.031_02.000  **Instrument Variable Name:** ANGEV  **QuestionnaireFileName:** Sample Adult

**QuestionText:**

* 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]
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

Sample adults 18+

Have you EVER been told by a doctor or other health professional that you had
...Any kind of heart condition or heart disease (other than the ones I just asked about)?

1 Yes
2 No
7 Refused
9 Don't know

Sample adults 18+
Have you EVER been told by a doctor or other health professional that you had...A stroke?

1 Yes
2 No
7 Refused
9 Don't know

UniverseText: Sample adults 18+

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

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

1 Yes
2 No
7 Refused
9 Don't know

UniverseText: Sample adults 18+

SkipInstructions: <1,2,R,D> [goto COPDEV]
Have you EVER been told by a doctor or other health professional that you had chronic obstructive pulmonary disease, also called COPD?

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

Sample adults 18+

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

Sample adults 40+
**2015 NHIS Questionnaire - Sample Adult**

**Adult Conditions**

**Document Version Date:** 12-May-16

**Question ID:** ACN.040_00.020  
**Instrument Variable Name:** ASPMEDAD  
**QuestionnaireFileName:** Sample Adult

**QuestionText:** 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

**UniverseText:** Sample adults 40+ who have ever been advised to take a low-dose aspirin every day to prevent or control heart disease

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

---

**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]
### 2015 NHIS Questionnaire - Sample Adult

**Adult Conditions**

Document Version Date: 12-May-16

<table>
<thead>
<tr>
<th>Question ID:</th>
<th>ACN.080_00.000</th>
<th>Instrument Variable Name:</th>
<th>AASMEV</th>
<th>QuestionnaireFileName:</th>
<th>Sample Adult</th>
</tr>
</thead>
<tbody>
<tr>
<td>QuestionText:</td>
<td>? [F1]</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Have you EVER been told by a doctor or other health professional that you had asthma?</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+

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

<table>
<thead>
<tr>
<th>Question ID:</th>
<th>ACN.085_00.000</th>
<th>Instrument Variable Name:</th>
<th>AASSTILL</th>
<th>QuestionnaireFileName:</th>
<th>Sample Adult</th>
</tr>
</thead>
<tbody>
<tr>
<td>QuestionText:</td>
<td>? [F1]</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Do you still have asthma?</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 ever told they have asthma

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

<table>
<thead>
<tr>
<th>Question ID:</th>
<th>ACN.090_00.000</th>
<th>Instrument Variable Name:</th>
<th>AASMYR</th>
<th>QuestionnaireFileName:</th>
<th>Sample Adult</th>
</tr>
</thead>
<tbody>
<tr>
<td>QuestionText:</td>
<td>? [F1]</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>DURING THE PAST 12 MONTHS, have you had an episode of asthma or an asthma attack?</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 ever told they had asthma

**SkipInstructions:** <1,2,R,D> [goto AASMERYR]
**Question ID:** ACN.100_00.000  **Instrument Variable Name:** AASMERYR  **QuestionnaireFileName:** Sample Adult

**QuestionText:**  
?

DURING THE PAST 12 MONTHS, have you had to visit an emergency room or urgent care center because of asthma?  

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

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

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

---

**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.

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

**UniverseText:** Sample adults 18+

**SkipInstructions:**  

<1> [goto ULCYR]  

<2,R,D> [goto ULCCOLEV]
**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 ULCCOLEV]

---

**Question ID:** ACN.120_00.010  **Instrument Variable Name:** ULCCOLEV  **QuestionnaireFileName:** Sample Adult

**QuestionText:** Have you EVER been told by a doctor or other health professional that you had Crohn’s disease or ulcerative colitis?

1  Yes
2  No
7  Refused
9  Don't know

**UniverseText:** Sample adults 18+

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

---

**Question ID:** ACN.130_00.000  **Instrument Variable Name:** CANEV  **QuestionnaireFileName:** Sample Adult

**QuestionText:** 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

**UniverseText:** Sample adults 18+

**SkipInstructions:** <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.
Question Text:

* 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
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]
### 2015 NHIS Questionnaire - Sample Adult

#### Adult Conditions

*Document Version Date: 12-May-16*

<table>
<thead>
<tr>
<th>Question ID:</th>
<th>ACN.150_00.001</th>
<th>Instrument Variable Name:</th>
<th>CANAGE_1</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>
<tr>
<td>How old were you when [Fill1: CANKIND_1 / Fill2: this cancer] was first diagnosed?</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>001-100</td>
<td>1-100 years</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>997</td>
<td>Refused</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>999</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 were ever told they had cancer</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>SkipInstructions:</strong></td>
<td>&lt;1-100, D&gt; goto CANKIND_2</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>&lt;R&gt; and &lt;R&gt; at CANKIND_1 [goto DIBEV]</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>&lt;R&gt; and CANKIND_1 NE &lt;R&gt; [goto CANKIND_2]</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>If number in CANAGE_1 greater than person years old (AGE) [goto ERR_CANAGE_1]</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Hard Edit:</strong></td>
<td>ERR_CANAGE_1</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>* [Fill2: CANAGE_1] years old is older than age[fill3: AGE].</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>* Please correct.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Question ID:</th>
<th>ACN.150_00.002</th>
<th>Instrument Variable Name:</th>
<th>CANAGE_2</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>
<tr>
<td>How old were you when [Fill1: CANKIND_2/Fill2: this cancer] was first diagnosed?</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>001-100</td>
<td>1-100 years</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>997</td>
<td>Refused</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>999</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 were ever told they had cancer</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>SkipInstructions:</strong></td>
<td>&lt;1-100, D&gt; [goto CANKIND_3]</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>&lt;R&gt; and &lt;R&gt; at CANKIND_2 [goto DIBEV]</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>&lt;R&gt; and CANKIND_2 NE &lt;R&gt; [goto CANKIND_3]</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>If number in CANAGE_2 greater than person years old (AGE) [goto ERR_CANAGE_2]</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Hard Edit:</strong></td>
<td>ERR_CANAGE_2</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>* [Fill2: CANAGE_2] years old is older than your age[fill3: AGE].</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>* Please correct.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
**2015 NHIS Questionnaire - Sample Adult**

**Adult Conditions**

**Document Version Date:** 12-May-16

---

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

**QuestionText:**

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

001-100 1-100 years
997 Refused
999 Don't know

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

**SkipInstructions:**
<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:**

ERR_CANAGE_3

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

---

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

**QuestionText:**

[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?]

1 Yes
2 No
3 Borderline
7 Refused
9 Don't know

**UniverseText:** Sample adults 18+

**SkipInstructions:**
<1> [goto DIBAGE]
<2,R,D> [goto DIBPRE1]
<3> [goto INSLN]
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

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

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

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

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

* [Fill1: DIBAGE] years old is older than your age[fill2: AGE].
* Please correct.
### Question ID: ACN.180_00.000  
**Instrument Variable Name:** INSLN  
**QuestionnaireFileName:** Sample Adult

**QuestionText:** Are you NOW taking insulin?

<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 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

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

---

### Question ID: ACN.190_00.000  
**Instrument Variable Name:** DIBPILL  
**QuestionnaireFileName:** Sample Adult

**QuestionText:** Are you NOW taking diabetic pills to lower your blood sugar? These are sometimes called oral agents or oral hypoglycemic agents.

<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 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

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

---

### Question ID: ACN.192_00.010  
**Instrument Variable Name:** EPILEP1  
**QuestionnaireFileName:** Sample Adult

**QuestionText:** Have you ever been told by a doctor or other health professional that you have a seizure disorder or epilepsy?

<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 EPILEP2]  
<2,R,D> [goto AHAYFYR]
Are you currently taking any medicine to control your seizure disorder or epilepsy?

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

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.

0. None
1. One
2. Two or three
3. Between four and ten
4. More than 10
7. Refused
9. Don't know

Sample adults 18+ who have ever been told they have epilepsy or a seizure disorder
2015 NHIS Questionnaire - Sample Adult

Adult Conditions

Document Version Date: 12-May-16

Question ID: ACN.192_00.040  Instrument Variable Name: EPILEP4  QuestionnaireFileName: Sample Adult

QuestionText: 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

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

SkipInstructions: <1,2,R,D> [goto EPILEP5]

---

Question ID: ACN.192_00.050  Instrument Variable Name: EPILEP5  QuestionnaireFileName: Sample Adult

QuestionText: 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

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

SkipInstructions: <1-5,R,D> [goto AHAYFYR]
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

Sample adults 18+

* 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

Sample adults 18+
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]
**2015 NHIS Questionnaire - Sample Adult**

**Adult Conditions**

**Document Version Date:** 12-May-16

---

**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) A5

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: JNTCHR  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 JNTHP]
**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?

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 ARTH]

---

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

**QuestionText:** ? [F1]

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)?

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

**UniverseText:** Sample adults 18+

**SkipInstructions:** <1> [goto ARTHLMT]  
<2,R,D> if  JNTSYMP = 1 [goto ARTHLMT];  
elseif JNTSYMP ne 1 [goto CTSEVER]
<table>
<thead>
<tr>
<th>Question ID:</th>
<th>ACN.295_00.000</th>
<th>Instrument Variable Name:</th>
<th>ARTHLMT</th>
<th>QuestionnaireFileName:</th>
<th>Sample Adult</th>
</tr>
</thead>
<tbody>
<tr>
<td>QuestionText:</td>
<td>? [F1] Are you now limited in any way in any of your usual activities because of arthritis or joint symptoms?</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>
<tr>
<td>UniverseText:</td>
<td>Sample adults 18+ with joint pain or arthritis</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>SkipInstructions:</td>
<td>&lt;1,2,R,D&gt; [goto CTSEVER]</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Question ID:</th>
<th>ACN.296_00.010</th>
<th>Instrument Variable Name:</th>
<th>CTSEVER</th>
<th>QuestionnaireFileName:</th>
<th>Sample Adult</th>
</tr>
</thead>
<tbody>
<tr>
<td>QuestionText:</td>
<td>Have you EVER been told by a doctor or other health professional that you have a condition affecting the wrist and hand called carpal tunnel syndrome?</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>
<tr>
<td>UniverseText:</td>
<td>Sample adults 18+</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>SkipInstructions:</td>
<td>&lt;1&gt; [goto CTSYR] &lt;2,R,D&gt; [goto PAINECK]</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Question ID:</th>
<th>ACN.296_00.020</th>
<th>Instrument Variable Name:</th>
<th>CTSYR</th>
<th>QuestionnaireFileName:</th>
<th>Sample Adult</th>
</tr>
</thead>
<tbody>
<tr>
<td>QuestionText:</td>
<td>DURING THE PAST 12 MONTHS, have you had carpal tunnel syndrome?</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>
<tr>
<td>UniverseText:</td>
<td>Sample adults 18+ who have ever been told by a doctor or other health professional that they have carpal tunnel syndrome</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>SkipInstructions:</td>
<td>&lt;1&gt; [if DOINGLW2 IN(1,2,4), then goto CTSWKREL; else goto PAINECK] &lt;2,R,D&gt; [goto PAINECK]</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
### 2015 NHIS Questionnaire - Sample Adult

#### Adult Conditions

**Document Version Date:** 12-May-16

<table>
<thead>
<tr>
<th>Question ID:</th>
<th>ACN.297_00.010</th>
<th>Instrument Variable Name:</th>
<th>CTSWKREL</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 your carpal tunnel syndrome was probably work-related?</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 are currently employed and had carpal tunnel syndrome in the past 12 months

**SkipInstructions:** <1,R,D> [goto PAINECK]  
<2> [goto CTSWKRL2]

---

<table>
<thead>
<tr>
<th>Question ID:</th>
<th>ACN.297_00.020</th>
<th>Instrument Variable Name:</th>
<th>CTSWKRL2</th>
<th>QuestionnaireFileName:</th>
<th>Sample Adult</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>QuestionText:</strong></td>
<td>Did YOU ever discuss with a doctor or other health professional whether your carpal tunnel syndrome was probably caused by your work?</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 are currently employed, had carpal tunnel syndrome in the past 12 months, and were not told by a doctor or other health professional that their carpal tunnel syndrome was probably work-related

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

Sample adults 18+

*D Read if necessary.*

DURING THE PAST THREE MONTHS, did you have... Low back pain?

1 Yes
2 No
7 Refused
9 Don't know

Sample adults 18+
Did this pain spread down either leg to areas below the knees?

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

Sample adults 18+ with low back pain in the past 3 months

DURING THE PAST THREE MONTHS, how often did you have low back pain? Would you say...

* Read categories below.

1. Some days
2. Most days
3. Every day
7. Refused
9. Don't know

Sample adults 18+ who had low back pain in the past 3 months
Thinking about the last time you had pain, how much pain did you have? Would you say...

* Read categories below.

1 A little
2 A lot
3 Somewhere in between a little and a lot
7 Refused
9 Don't know

Sample adults 18+ who had low back pain in the past 3 months

Have you ever been told by a doctor or other health professional that your low back pain was probably work-related?

1 Yes
2 No
7 Refused
9 Don't know

Sample adults 18+ who are currently employed and had low back pain in the past 3 months

Did YOU ever discuss with a doctor or other health professional whether your low back pain was probably caused by your work?

1 Yes
2 No
7 Refused
9 Don't know

Sample adults 18+ who are currently employed and had low back pain in the past 3 months and a doctor or other health did not say that the low back pain was probably work-related
Have you ever filed a workers’ compensation claim for your low back pain?

1. Yes
2. No
7. Refused
9. Don’t know

Sample adults 18+ who are currently employed and had low back pain in the past 3 months

Have you ever received workers’ compensation benefits for your low back pain?

1. Yes
2. No
7. Refused
9. Don’t know

Sample adults 18+ who are currently employed and had low back pain in the past 3 months and a workers’ compensation claim was filed for the low back pain

DURING THE PAST THREE MONTHS, how many full days did you miss from work because of your low back pain?

* Enter ’0’ for None.

00-92
97. Refused
99. Don’t know

Sample adults 18+ who are currently employed and had low back pain in the past 3 months
### Question ID: ACN.325_00.080  
**Instrument Variable Name:** LBPCHJOB  
**QuestionnaireFileName:** Sample Adult

**QuestionText:**
DURING THE PAST THREE MONTHS, did you stop working, change jobs, or make a major change in your work activities, such as taking on lighter duties, because of your low back pain?

<table>
<thead>
<tr>
<th>Number</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:** Sample adults 18+ who are currently employed and had low back pain in the past 3 months

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

---

### 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?

<table>
<thead>
<tr>
<th>Number</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:** 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?

<table>
<thead>
<tr>
<th>Number</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:** Sample adults 18+

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

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

Are you currently pregnant?

1. Yes
2. No
7. Refused
9. Don't know
Question ID: ACN.370_00.010  Instrument Variable Name: PREGFLYR  QuestionnaireFileName: Sample Adult

QuestionText: [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]?]

1  Yes
2  No
7  Refused
9  Don't know

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

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

Question ID: ACN.400_00.000  Instrument Variable Name: HRAIDNOW  QuestionnaireFileName: Sample Adult

QuestionText: These next questions are about your hearing, vision, and teeth.

Do you now use a hearing aid(s)?

1  Yes
2  No
7  Refused
9  Don't know

UniverseText: Sample adults 18+

SkipInstructions: <1> [goto AHEARST1]
<2,R,D> [goto HRAIDEV]

Question ID: ACN.410_00.000  Instrument Variable Name: HRAIDEV  QuestionnaireFileName: Sample Adult

QuestionText: Have you ever used a hearing aid(s) in the past?

1  Yes
2  No
7  Refused
9  Don't know

UniverseText: Sample adults 18+ who do not now use a hearing aid or REF/DK whether they now use a hearing aid

SkipInstructions: <1,2,R,D> [goto AHEARST1]
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]

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]
Are you blind or unable to see at all?

1 Yes
2 No
7 Refused
9 Don't know

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

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

1 Yes
2 No
7 Refused
9 Don't know

Sample adults 18+

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

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>000</td>
<td>None</td>
</tr>
<tr>
<td>001-366</td>
<td>1-366 days</td>
</tr>
<tr>
<td>997</td>
<td>Refused</td>
</tr>
<tr>
<td>999</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

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
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+
**2015 NHIS Questionnaire - Sample Adult**

**Adult Health Status & Limitations**

**Document Version Date:** 12-May-16

---

**Question ID:** AHS.091_03.000  
**Instrument Variable Name:** FLSTAND  
**QuestionnaireFileName:** Sample Adult

**QuestionText:**

*(book) A6*

* 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 FLSIT]

---

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

**QuestionText:**

*(book) A6*

* 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]
(book) A6

* 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]

---

(foot) A6

* 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) A6

* 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) A6

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

**Question Text:**

*(book) A6*

* 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

**UniverseText:** Sample adults 18+

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

---

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

**Question Text:**

*(book) A6*

* 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

**UniverseText:** Sample adults 18+

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

QuestionText: (book) A6

* 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) A6

* 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 FLGIT= 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.

<table>
<thead>
<tr>
<th>Condition</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>01</td>
<td>Vision/problem seeing</td>
</tr>
<tr>
<td>02</td>
<td>Hearing problem</td>
</tr>
<tr>
<td>03</td>
<td>Arthritis/rheumatism</td>
</tr>
<tr>
<td>04</td>
<td>Back or neck problem</td>
</tr>
<tr>
<td>05</td>
<td>Fracture, bone/joint injury</td>
</tr>
<tr>
<td>06</td>
<td>Other injury</td>
</tr>
<tr>
<td>07</td>
<td>Heart problem</td>
</tr>
<tr>
<td>08</td>
<td>Stroke problem</td>
</tr>
<tr>
<td>09</td>
<td>Hypertension/high blood pressure</td>
</tr>
<tr>
<td>10</td>
<td>Diabetes</td>
</tr>
<tr>
<td>11</td>
<td>Lung/breathing problem(for example, asthma and emphysema)</td>
</tr>
<tr>
<td>12</td>
<td>Cancer</td>
</tr>
<tr>
<td>13</td>
<td>Birth defect</td>
</tr>
<tr>
<td>14</td>
<td>Intellectual disability, also known as mental retardation</td>
</tr>
<tr>
<td>15</td>
<td>Other developmental problem (for example, cerebral palsy)</td>
</tr>
<tr>
<td>16</td>
<td>Senility</td>
</tr>
<tr>
<td>17</td>
<td>Depression/anxiety/emotional problem</td>
</tr>
<tr>
<td>18</td>
<td>Weight problem</td>
</tr>
<tr>
<td>19</td>
<td>Missing limbs (fingers, toes or digits), amputee</td>
</tr>
<tr>
<td>20</td>
<td>Kidney, bladder or renal problems</td>
</tr>
<tr>
<td>21</td>
<td>Circulation problems (including blood clots)</td>
</tr>
<tr>
<td>22</td>
<td>Benign Tumors, Cysts</td>
</tr>
<tr>
<td>23</td>
<td>Fibromyalgia, lupus</td>
</tr>
<tr>
<td>24</td>
<td>Osteoporosis, tendinitis</td>
</tr>
<tr>
<td>25</td>
<td>Epilepsy, seizures</td>
</tr>
<tr>
<td>26</td>
<td>Multiple Sclerosis (MS), Muscular Dystrophy (MD)</td>
</tr>
<tr>
<td>27</td>
<td>Polio(myelitis), paralysis, para/quadriplegia</td>
</tr>
<tr>
<td>28</td>
<td>Parkinson's disease, other tremors</td>
</tr>
<tr>
<td>29</td>
<td>Other nerve damage, including carpal tunnel syndrome</td>
</tr>
<tr>
<td>30</td>
<td>Hernia</td>
</tr>
<tr>
<td>31</td>
<td>Ulcer</td>
</tr>
<tr>
<td>32</td>
<td>Varicose veins, hemorrhoids</td>
</tr>
<tr>
<td>33</td>
<td>Thyroid problems, Grave's disease, gout</td>
</tr>
<tr>
<td>34</td>
<td>Knee problems (not arthritis (03), not joint injury(05))</td>
</tr>
<tr>
<td>35</td>
<td>Migraine headaches (not just headaches)</td>
</tr>
<tr>
<td>90</td>
<td>Other impairment/problem (Specify one)</td>
</tr>
<tr>
<td>91</td>
<td>Other impairment/problem (Specify one)</td>
</tr>
<tr>
<td>97</td>
<td>Refused</td>
</tr>
<tr>
<td>99</td>
<td>Don't know/Not sure</td>
</tr>
</tbody>
</table>
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

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

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]

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
95
96
97
99

Sample adults 18+ who had difficulty due to a vision problem or problem seeing

<R>[store "R" in AHCL01T] [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 AHCL01T] [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 vision problem or problem seeing.

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_AHCL01T
[if [AHCL01N = Number greater than person years old and AHCL01T= 4]] goto 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
2015 NHIS Questionnaire - Sample Adult
Adult Health Status & Limitations

Document Version Date: 12-May-16

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

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

<1-95,D>[goto AHCL04T]
<R>[store "R" in AHCL04T] [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 AHCL04T] [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 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.

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

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

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

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

Sample adults 18+ who answered 1-95, D for the ”number” part of this 2-part question
Question ID: AHS.306_01.000  Instrument Variable Name: AHCL07N  QuestionnaireFileName: Sample Adult

QuestionText: 1 of 2

How long have you had a heart problem?

* Enter number for time with a heart 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

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

QuestionText: 2 of 2

* Enter time period for time with heart 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_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
95
96
Since birth
97
Refused
99
Don't know

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

1-95,D>[goto AHCL08T]
<R>[store "R" in AHCL08T] [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 AHCL08T] [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]

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

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

* Time with condition cannot be greater than age.
* Please correct.
### Question ID: AHS.308_01.000
#### Instrument Variable Name: AHCL09N
#### QuestionnaireFileName: Sample Adult

**QuestionText:**

1 of 2

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.

<table>
<thead>
<tr>
<th>01-94</th>
<th>01-94</th>
</tr>
</thead>
<tbody>
<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:**

2 of 2

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

<table>
<thead>
<tr>
<th>1</th>
<th>Day(s)</th>
</tr>
</thead>
<tbody>
<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.
2015 NHIS Questionnaire - Sample Adult
Adult Health Status & Limitations

Document Version Date: 12-May-16

Question ID: AHS.309_01.000  Instrument Variable Name: AHCL10N  QuestionnaireFileName: Sample Adult

QuestionText: 1 of 2

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

UniverseText: Sample adults 18+ who had difficulty due to diabetes

SkipInstructions: <1-95,D>[goto AHCL10T]
<R>[store "R" in AHCL10T] [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 AHCL10T] [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.309_02.000  Instrument Variable Name: AHCL10T  QuestionnaireFileName: Sample Adult

QuestionText: 2 of 2

* 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

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_AHCL10T
[if [AHCL10N = Number greater than person years old and AHCL10T= 4]] goto ERR1_AHCL10T

Hard Edit: ERR_AHCL10T

* 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.
**Question ID:** AHS.311_01.000  
**Instrument Variable Name:** AHCL12N  
**QuestionnaireFileName:** Sample Adult

**QuestionText:**

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  
95  
96  
97  
99

**UniverseText:** Sample adults 18+ who had difficulty due to cancer

**SkipInstructions:**

<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)]

**Question ID:** AHS.311_02.000  
**Instrument Variable Name:** AHCL12T  
**QuestionnaireFileName:** Sample Adult

**QuestionText:**

2 of 2

* Enter time period for time with cancer.

1  
2  
3  
4  
6  
7  
9

**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_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.
# 2015 NHIS Questionnaire - Sample Adult
## Adult Health Status & Limitations
### Document Version Date: 12-May-16

<table>
<thead>
<tr>
<th>Question ID: AHS.314_01.000</th>
<th>Instrument Variable Name: AHCL15N</th>
<th>QuestionnaireFileName: Sample Adult</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>QuestionText:</strong> 1 of 2</td>
<td></td>
<td></td>
</tr>
<tr>
<td>How long have you had a developmental problem (e.g., cerebral palsy)?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>* Enter number for time with a developmental problem.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>* Enter &quot;95&quot; for 95 or more.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>* Enter &quot;96&quot; if since birth.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>UniverseText:</th>
<th>Sample adults 18+ who had difficulty due to a developmental problem</th>
</tr>
</thead>
</table>

| 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)] |

---

<table>
<thead>
<tr>
<th>Question ID: AHS.314_02.000</th>
<th>Instrument Variable Name: AHCL15T</th>
<th>QuestionnaireFileName: Sample Adult</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>QuestionText:</strong> 2 of 2</td>
<td></td>
<td></td>
</tr>
<tr>
<td>* Enter time period for time with developmental problem.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>UniverseText:</th>
<th>Sample adults 18+ who answered 1-95, D for the &quot;number&quot; part of this 2-part question</th>
</tr>
</thead>
</table>

| 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. |
**Question ID:** AHS.315_01.000  **Instrument Variable Name:** AHCL16N  **QuestionnaireFileName:** Sample Adult

**QuestionText:**
1 of 2

How long have you had senility?

* Enter number for time with senility.

* 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 senility

**SkipInstructions:**

<1-95,D>[goto AHCL16T]

<R>[store "R" in AHCL16T] [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 AHCL16T] [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.315_02.000  **Instrument Variable Name:** AHCL16T  **QuestionnaireFileName:** Sample Adult

**QuestionText:**
2 of 2

* Enter time period for time with senility.

<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 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_AHCL16T

[if [AHCL16N = Number greater than person years old and AHCL16T= 4]] goto ERR1_AHCL16T

**Hard Edit:**

ERR_AHCL16T

* Time with condition cannot be greater than age.

* Please correct.
### Question ID: AHS.316_01.000  
**Instrument Variable Name:** AHCL17N  
**QuestionnaireFileName:** Sample Adult

**QuestionText:**

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.  

<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>

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

**SkipInstructions:**

- `<1-95,D>[goto AHCL17T]`
- `<R>[store "R" in AHCL17T] [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 AHCL17T] [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.316_02.000  
**Instrument Variable Name:** AHCL17T  
**QuestionnaireFileName:** Sample Adult

**QuestionText:**

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

<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_AHCL17T`
- `ERR_AHCL17T`

**Hard Edit:**

- ERR_AHCL17T
  * Time with condition cannot be greater than age.  
  * Please correct.
How long have you had a weight problem?

* Enter number for time with a weight problem.

* 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 weight problem

* 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.

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

SkipInstructions:
<1-95,D>[goto AHCL19T]
<R>[store "R" in AHCL19T] [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 AHCL19T] [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 missing limb.

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_AHCL19T
[if [AHCL19N = Number greater than person years old and AHCL19T= 4]] goto ERR1_AHCL19T

Hard Edit:
ERR_AHCL19T

* Time with condition cannot be greater than age.
* Please correct.
How long have you had a kidney, bladder or renal problem?

* Enter number for time with a kidney, bladder or renal problem.

* 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 a kidney, bladder or renal problem

* Time with condition cannot be greater than age.
* Please correct.
Question ID: AHS.320_01.000  Instrument Variable Name: AHCL21N  QuestionnaireFileName: Sample Adult

QuestionText: 1 of 2

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

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

SkipInstructions: <1-95,D>[goto AHCL21T]
<R>[store "R" in AHCL21T] [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 AHCL21T] [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.320_02.000  Instrument Variable Name: AHCL21T  QuestionnaireFileName: Sample Adult

QuestionText: 2 of 2

* Enter time period for time with circulation 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_AHCL21T
[if [AHCL21IN = Number greater than person years old and AHCL21T= 4]] goto ERR1_AHCL21T

Hard Edit: ERR_AHCL21T
* Time with condition cannot be greater than age.
* Please correct.
**Question ID:** AHS.321_01.000  **Instrument Variable Name:** AHCL22N  **QuestionnaireFileName:** Sample Adult

**Question Text:**

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.

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

**Universe Text:** Sample adults 18+ who had difficulty due to benign tumors or cysts

**Skip Instructions:**

<1-95,D>[goto AHCL22T]

<R>[store "R" in AHCL22T] [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 AHCL22T] [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.321_02.000  **Instrument Variable Name:** AHCL22T  **QuestionnaireFileName:** Sample Adult

**Question Text:**

* Enter time period for time with benign tumors or cysts.

1  Day(s)
2  Week(s)
3  Month(s)
4  Year(s)
6  Since birth
7  Refused
9  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_AHCL22T

[if [AHCL22N = Number greater than person years old and AHCL22T= 4]] goto ERR1_AHCL22T

**Hard Edit:**

ERR_AHCL22T

* 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:

<1-4,R,D>[goto AHCL23T]
<6> goto ERR2_AHCL23T
[if [AHCL23N = Number greater than person years old and AHCL23T= 4]] goto ERR1_AHCL23T

Hard Edit:

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

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

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

* Time with condition cannot be greater than age.  
* Please correct.
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 1-94
95 95+
96 Since birth
97 Refused
99 Don't know

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

SkipInstructions:<1-4,R,D>[goto AHCL25T]
<4>[if [AHCL25N = Number greater than person years old and AHCL25T= 4]] goto ERR1_AHCL25T
<6> goto ERR2_AHCL25T
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_AHCL25T
[if [AHCL25N = Number greater than person years old and AHCL25T= 4]] goto ERR1_AHCL25T

Hard Edit:
* Time with condition cannot be greater than age.
* Please correct.
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
95
96
97
99

* 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

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

<1-4, 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)]
<6> goto ERR2_AHCL26T
[if [AHCL26T = 4]] goto ERR1_AHCL26T

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_AHCL26T
[if [AHCL26N = Number greater than person years old and AHCL26T= 4]] goto ERR1_AHCL26T

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

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

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

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

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 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 Since birth
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.
2015 NHIS Questionnaire - Sample Adult
Adult Health Status & Limitations

Document Version Date: 12-May-16

Question ID: AHS.328_01.000  Instrument Variable Name: AHCL29N  QuestionnaireFileName: Sample Adult

QuestionText: 1 of 2

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.

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

UniverseText: Sample adults 18+ who had difficulty due to nerve damage

SkipInstructions: <1-95,D>[goto AHCL29T]
<R>[store "R" in AHCL29T] [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 AHCL29T] [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.328_02.000  Instrument Variable Name: AHCL29T  QuestionnaireFileName: Sample Adult

QuestionText: 2 of 2

* Enter time period for time with nerve damage.

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_AHCL29T]
<96>[if [AHCL29N = Number greater than person years old and AHCL29T= 4]] goto ERR1_AHCL29T

Hard Edit: ERR_AHCL29T

* 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.
1 of 2

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
95
96 Since birth
97 Refused
99 Don't know

UniverseText: Sample adults 18+ who had difficulty due to an ulcer

SkipInstructions: 
<1-95,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)]

2 of 2

* Enter time period for time with ulcer.
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_AHCL31T
[if [AHCL31IN = Number greater than person years old and AHCL31IT= 4]] goto ERR1_AHCL31T

Hard Edit: ERR_AHCL31T

* 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.

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

Sample adults 18+ who had difficulty due to 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

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

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  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.
2015 NHIS Questionnaire - Sample Adult
Adult Health Status & Limitations
Document Version Date: 12-May-16

Question ID: AHS.334_01.000  Instrument Variable Name: AHCL35N  QuestionnaireFileName: Sample Adult

QuestionText: 1 of 2

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

UniverseText: Sample adults 18+ who had difficulty due to migraine headaches

SkipInstructions: <1-95,D>[goto AHCL35T]
<R>[store "R" in AHCL35T] [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 AHCL35T] [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.334_02.000  Instrument Variable Name: AHCL35T  QuestionnaireFileName: Sample Adult

QuestionText: 2 of 2

* 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

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_AHCL35T
<br>&lt;[AHCL35N = Number greater than person years old and AHCL35T= 4]] goto ERR1_AHCL35T

Hard Edit: ERR1_AHCL35T

* Time with condition cannot be greater than age.
* Please correct.
**2015 NHIS Questionnaire - Sample Adult**

**Adult Health Status & Limitations**

**Document Version Date:** 12-May-16

---

**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  
95  
96  
97  
99  

**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  
2  
3  
4  
6  
7  
9  

**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

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

SkipInstructions: <1-95,D>[goto AHCL91T] 
<R>[store "R" in AHCL91T] [goto SMKEV (next section)]
<96>[store "6" in AHCL91T] [goto SMKEV (next section)]

* 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

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_AHCL91T
[if [AHCL91IN = Number greater than person years old and AHCL91T= 4]] goto ERR1_AHCL91T

Hard Edit: ERR_AHCL91T

* Time with condition cannot be greater than age.
* Please correct.
These next questions are about cigarette smoking.

Have you smoked at least 100 cigarettes in your ENTIRE LIFE?

1 Yes
2 No
7 Refused
9 Don't know

How old were you when you FIRST started to smoke fairly regularly?

* Enter '6' if less than 6 years old.

* Enter '95' if 95 years old or older.

* Enter '96' if never smoked regularly.

06-84 6 - 84 years
85 85 years or older
96 Never smoked regularly
97 Refused
99 Don't know

Sample adults 18+ who ever smoked 100 cigarettes

<6-95,R,D> [goto SMKNOW]
If SMKREG gt AGE and SMKREG ne <96>, goto ERR_SMKREG

**Hard Edit:**

* Starting age exceeded current age.
* Please correct.
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

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

Hard Edit:

* 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]
### 2015 NHIS Questionnaire - Sample Adult

**Adult Health Behaviors**

**Document Version Date:** 12-May-16

<table>
<thead>
<tr>
<th>Question ID:</th>
<th>AHB.060_00.000</th>
<th>Instrument Variable Name:</th>
<th>CIGDAMO</th>
<th>QuestionnaireFileName:</th>
<th>Sample Adult</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>QuestionText:</strong></td>
<td>On how many of the PAST 30 DAYS did you smoke a cigarette?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>*Enter '0' for None.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>00</td>
<td>None</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>01-30</td>
<td>1-30 days</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 are current some day smokers</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>SkipInstructions:</strong></td>
<td>&lt;0&gt;[goto CIGQTYR]</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>&lt;1-30,R,D&gt; [goto CIGSDA2]</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Question ID:</th>
<th>AHB.070_00.000</th>
<th>Instrument Variable Name:</th>
<th>CIGSDA2</th>
<th>QuestionnaireFileName:</th>
<th>Sample Adult</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>QuestionText:</strong></td>
<td>On the average, when you smoked during the PAST 30 DAYS, about how many cigarettes did you smoke a day?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>* Enter '1' if less than 1.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>* Enter '95' if 95 or more cigarettes.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>01-94</td>
<td>1-94 cigarettes</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>95</td>
<td>95+ cigarettes</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 are current some day smokers</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>SkipInstructions:</strong></td>
<td>&lt;1-95,D,R&gt; [goto CIGQTYR]</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Question ID:</td>
<td>AHB.080_00.000</td>
<td>Instrument Variable Name:</td>
<td>CIGQTYR</td>
<td>QuestionnaireFileName:</td>
<td>Sample Adult</td>
</tr>
<tr>
<td>----------------------</td>
<td>----------------</td>
<td>---------------------------</td>
<td>---------</td>
<td>------------------------</td>
<td>--------------</td>
</tr>
<tr>
<td>QuestionText:</td>
<td>During the PAST 12 MONTHS, have you stopped smoking for more than one day BECAUSE YOU WERE TRYING TO QUIT SMOKING?</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 are every day or someday smokers

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

<table>
<thead>
<tr>
<th>Question ID:</th>
<th>AHB.081_00.000</th>
<th>Instrument Variable Name:</th>
<th>SMKANY</th>
<th>QuestionnaireFileName:</th>
<th>Sample Adult</th>
</tr>
</thead>
<tbody>
<tr>
<td>QuestionText:</td>
<td>Have you ever smoked a cigarette EVEN ONE TIME?</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 have not smoked or don’t know if smoked 100+ cigarettes in lifetime

**SkipInstructions:** <1> [goto SMKAGEX] <2,R,D> [goto VIGNO]
2015 NHIS Questionnaire - Sample Adult

Adult Health Behaviors

Document Version Date: 12-May-16

Question ID: AHB.082_00.000  Instrument Variable Name: SMKAGEX  QuestionnaireFileName: Sample Adult

QuestionText: How old were you the FIRST TIME you smoked a cigarette?

* Enter '6' if less than 6 years old.
* Enter '95' if 95 years old or older.

06-95  6-95
97  Refused
99  Don't know

UniverseText: Sample adults 18+ who have not smoked or don’t know if smoked 100+ cigarettes in lifetime but have smoked at least one cigarette

SkipInstructions: <6-95> if SMKAGEX GT AGE [goto ERR_SMKAGEX]; else [goto SMKNOWX]
<R,D> [goto VIGNO]

Hard Edit:
ERR_SMKAGEX

* [Fill1: SMKAGEX] years old is older than age[fill2: AGE].
* Please correct.

Question ID: AHB.083_00.000  Instrument Variable Name: SMKNOWX  QuestionnaireFileName: Sample Adult

QuestionText: 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

UniverseText: Sample adults 18+ who have not smoked or don’t know if smoked 100+ cigarettes in lifetime but have smoked at least one cigarette and gave an age in SMKAGEX question

SkipInstructions: <R,D> [goto VIGNO]
<1,2> [goto CIGDAMOX]
<3> [goto SMKNONOX]
**2015 NHIS Questionnaire - Sample Adult**

**Adult Health Behaviors**

**Document Version Date:** 12-May-16

<table>
<thead>
<tr>
<th>Question ID: AHB.084_01.000</th>
<th>Instrument Variable Name: SMKNONOX</th>
<th>QuestionnaireFileName: Sample Adult</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>QuestionText:</strong> 1 of 2</td>
<td><strong>How long has it been since you smoked a cigarette?</strong></td>
<td><strong>Enter number for time since smoked.</strong></td>
</tr>
<tr>
<td></td>
<td>* Enter number for time since smoked.</td>
<td>* Enter '95' for 95 or more.</td>
</tr>
<tr>
<td></td>
<td>01-95</td>
<td>1 - 95</td>
</tr>
<tr>
<td></td>
<td>97</td>
<td>Refused</td>
</tr>
<tr>
<td></td>
<td>99</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

**UniverseText:** Sample adults 18+ who have not smoked 100 cigarettes in lifetime but have smoked a cigarette at least once in lifetime and are currently not smoking at all.

**SkipInstructions:** <1-95> [goto SMKNOTPX] <R,D> [goto VIGNO]

<table>
<thead>
<tr>
<th>Question ID: AHB.084_02.000</th>
<th>Instrument Variable Name: SMKNOTPX</th>
<th>QuestionnaireFileName: Sample Adult</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>QuestionText:</strong> 2 of 2</td>
<td>* Enter time period for time since smoked a cigarette</td>
<td></td>
</tr>
<tr>
<td></td>
<td>1</td>
<td>Day(s)</td>
</tr>
<tr>
<td></td>
<td>2</td>
<td>Week(s)</td>
</tr>
<tr>
<td></td>
<td>3</td>
<td>Month(s)</td>
</tr>
<tr>
<td></td>
<td>4</td>
<td>Year(s)</td>
</tr>
<tr>
<td></td>
<td>7</td>
<td>Refused</td>
</tr>
<tr>
<td></td>
<td>9</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

**UniverseText:** Sample adults 18+ who have not smoked 100 cigarettes in lifetime but have smoked a cigarette at least once in lifetime and are currently not smoking at all and answered 1-95 to the number part of this question.

**SkipInstructions:** <1-4,R,D> [goto VIGNO] <4> [if SMKNONOX gt (AGE - <15>), goto ERR1_SMKNOTPX] if (SMKAGEX + SMKNONOX gt AGE), goto ERR2_SMKNOTPX

**Hard Edit:** ERR2_SMKNOTPX

* Age started ([Fill1: SMKAGEX]) + years since last cigarette ([Fill2: SMKNONOX]) exceeds current age ([Fill3: AGE]).

**Soft Edit:** ERR1_SMKNOTPX

* Respondent LAST SMOKED before age 15? * Please verify.
2015 NHIS Questionnaire - Sample Adult
Adult Health Behaviors
Document Version Date: 12-May-16

Question ID: AHB.085_00.000  Instrument Variable Name: CIGDAMOX  QuestionnaireFileName: Sample Adult

QuestionText: On how many of the PAST 30 DAYS did you smoke a cigarette?

*Enter '0' for None.

00-30  0-30
97  Refused
99  Don't know

UniverseText: Sample adults 18+ who have not smoked or don’t know if smoked 100+ cigarettes in lifetime and are current every day or some day smokers

SkipInstructions: <0-30,R,D> [goto VIGNO]

---

Question ID: AHB.090_01.000  Instrument Variable Name: VIGNO  QuestionnaireFileName: Sample Adult

QuestionText: 1 of 2

The next questions are about physical activities (exercise, sports, physically active hobbies...) that you may do in your LEISURE time.

How often do you do VIGOROUS leisure-time physical activities for AT LEAST 10 MINUTES that cause HEAVY sweating or LARGE increases in breathing or heart rate?

* Read if necessary: How many times per day, per week, per month, or per year do you do these activities?

* Enter number for vigorous 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: <0,996,R,D>[goto MODNO]
<1-995>[goto VIGTP]
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]
**2015 NHIS Questionnaire - Sample Adult**

*Adult Health Behaviors*

**Document Version Date:** 12-May-16

---

**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:**

ERR1_VIGLNGTP

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

ERR2_VIGLNGTP

**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

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 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: ERR_MODNO
* [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.

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

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

SkipInstructions: <1-995>[goto MODLNGTP]
<R,D>[goto STRNGNO]
**Question ID:** AHB.120_02.000  **Instrument Variable Name:** MODLNGTP  **QuestionnaireFileName:** Sample Adult

**QuestionText:**

* 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.

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]
* 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:  
* [Fill1: STRNGNO] times per [Fill2: STRNGTP] is unusually high.  
* Please verify.

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]
In your ENTIRE LIFE, have you had at least 12 drinks of any type of alcoholic beverage?

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

Sample adults 18+ who have not had 12 drinks in any one year or don't know if they did or refused to answer

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

Sample adults 18+ who have had at least 12 drinks in any one year or at least 12 drinks in their entire life
**2015 NHIS Questionnaire - Sample Adult**

**Adult Health Behaviors**

Document Version Date: 12-May-16

---

**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:**

ER_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 '1' 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,D,R>[goto ALC5UPNO]
<10-95>[goto ERR_ALCAMT]

**Soft Edit:**

ERR_ALCAMT

* [Fill: ALCAMT] drinks is an unusually high number.
* Please verify.
* Do not probe
### 2015 NHIS Questionnaire - Sample Adult

**Adult Health Behaviors**

*Document Version Date: 12-May-16*

<table>
<thead>
<tr>
<th>Question ID:</th>
<th>AHB.180_01.000</th>
<th>Instrument Variable Name:</th>
<th>ALC5UPNO</th>
<th>QuestionnaireFileName:</th>
<th>Sample Adult</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>QuestionText:</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

1 of 2

In the PAST YEAR, on how many DAYS did you have [fill: 5 or more/4 or more] drinks of any alcoholic beverage?

* Read if necessary:

How many days per week, per month or per year did you have [fill: 5 or more/4 or more] drinks in a single day?

* Enter number of days.

* Enter '0' for Never/None.

---

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>000</td>
<td>Never/None</td>
</tr>
<tr>
<td>001-365</td>
<td>1-365 days</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 had at least 1 drink in the past year

**SkipInstructions:**

<1-365>[goto ALC5UPTP]

<0,R,D>[goto AHGT_FT]
**2015 NHIS Questionnaire - Sample Adult**

Adult Health Behaviors

Document Version Date: 12-May-16

---

**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+ (males) or 4+ (females) drinks in one day at least once in the past year

**SkipInstructions:**  
<1-3> [goto BINGE1]  
[If (ALC5UPNO > 7 & ALC5UPTP = <1>) or  
(ALC5UPNO > 31 & ALC5UPTP = <2>) or  
(ALC5UPNO > 365 & ALC5UPTP = <3>) goto ERR1_ALC5UPTP  
If [number of days drank in the past year (calculated from ALC12MNO and ALC12MTP) > number of days per year with 5 or more (for males)/4+ (females) drinks (calculated from ALC5UPNO and ALC5UPTP)] goto  
ERR2_ALC5UPTP]

**Hard Edit:**  
* [Fill1: ALC5UPNO] days per [Fill2: ALC5UPTP] exceeds number possible in this time period.  
* Please correct  
ERR2_ALC5UPTP  
* Number of days had [fill: 5 or more/4 or more] drinks exceeds number of days drank.  
* Please correct.  
* Do not probe.

---

**Question ID:** AHB.181_00.000  
**Instrument Variable Name:** BINGE1  
**QuestionnaireFileName:** Sample Adult

**QuestionText:**

? [F1]  

Considering all types of alcoholic beverages, DURING THE PAST 30 DAYS, how many times did you have [fill: 5 or more/4 or more] drinks on an occasion?

* Enter '0' if none.  
* Enter '60' if 60 or more times.

00-60 0-60  
97 Refused  
99 Don't know

**UniverseText:** Sample adults 18+ who have had 5+ (males) or 4+ (females) drinks in one day at least once in the past year

**SkipInstructions:**  
<0-60,R,D> [goto AHGT_FT]
<table>
<thead>
<tr>
<th>Question ID</th>
<th>Instrument Variable Name</th>
<th>QuestionnaireFileName</th>
<th>QuestionText</th>
</tr>
</thead>
<tbody>
<tr>
<td>AHB.190_01.000</td>
<td>AHGT_FT</td>
<td>Sample Adult</td>
<td>How tall are you without shoes?</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>* Enter &quot;M&quot; to record metric measurements</td>
</tr>
<tr>
<td>02-07</td>
<td></td>
<td></td>
<td>2-7 feet</td>
</tr>
<tr>
<td>97</td>
<td></td>
<td></td>
<td>Refused</td>
</tr>
<tr>
<td>99</td>
<td></td>
<td></td>
<td>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;2-7&gt; [goto AHGT_IN]</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>&lt;R.D&gt; [goto AWGT_LB]</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>&lt;M&gt; [goto AHGT_M]</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>[if AHGT_FT NE&lt;2-7,R,D,M&gt; goto ERR1_AHGT_FT]</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>[if AHGT_FT = &lt;2,3&gt; goto ERR2_AHGT_FT]</td>
</tr>
<tr>
<td>Hard Edit:</td>
<td></td>
<td></td>
<td>ERR1_AHGT_FT</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>* Only 2-7, Don't Know/Refused or M allowed in this field.</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>* Please correct.</td>
</tr>
<tr>
<td>Soft Edit:</td>
<td></td>
<td></td>
<td>ERR2_AHGT_FT</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>* Respondent's height in feet is [fill: AHGT_FT]?</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>* Please verify.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Question ID</th>
<th>Instrument Variable Name</th>
<th>QuestionnaireFileName</th>
<th>QuestionText</th>
</tr>
</thead>
<tbody>
<tr>
<td>AHB.190_02.000</td>
<td>AHGT_IN</td>
<td>Sample Adult</td>
<td>How tall are you without shoes?</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>* Enter '0' if exactly [fill1: AHGT_FT] feet tall.</td>
</tr>
<tr>
<td>00-11</td>
<td></td>
<td></td>
<td>0-11 inches</td>
</tr>
<tr>
<td>97</td>
<td></td>
<td></td>
<td>Refused</td>
</tr>
<tr>
<td>99</td>
<td></td>
<td></td>
<td>Don't know</td>
</tr>
<tr>
<td>UniverseText:</td>
<td></td>
<td></td>
<td>Sample adults 18+ who answered their height in feet</td>
</tr>
<tr>
<td>SkipInstructions:</td>
<td></td>
<td></td>
<td>&lt;empty&gt; goto ERR_AHGT_IN</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>&lt;0-11,R,D&gt; if (SEX = '1' and (AHTINCH lt '61' or AHTINCH gt '75')) or</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>(SEX = '2' and (AHTINCH lt '56' or AHTINCH gt '69')) goto ERR2_AHGT_IN</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>else goto AWGT_LB</td>
</tr>
<tr>
<td>Hard Edit:</td>
<td></td>
<td></td>
<td>ERR1_AHGT_IN</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>* If [fill: AHGT_FT] feet exactly, enter &quot;0&quot;; otherwise enter number of inches.</td>
</tr>
<tr>
<td>Soft Edit:</td>
<td></td>
<td></td>
<td>ERR2_AHGT_IN</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>* Please verify that the height was entered correctly. Probe only if necessary.</td>
</tr>
</tbody>
</table>
**2015 NHIS Questionnaire - Sample Adult**

**Adult Health Behaviors**

**Document Version Date:** 12-May-16

---

**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** 0-2 meters
- **7** Refused
- **9** Don't know

**UniverseText:** Sample adults 18+ who choose to give their height in metric measurements

**SkipInstructions:**

```<empty> goto ERR_AHGT_M
<0-2> goto AHGT_CM
<R,D> goto AWGT_LB
```

**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:**

```<empty> goto ERR2_AHGT_CM
<0-241,R,D> if (AHGT_M eq '2' and AHGT_CM gt '41') or (AHGT_M eq '1' and AHGT_CM gt '141')
goto ERR1_AHGT_CM
elseif (SEX = '1' and (AHTCM lt '156' or AHTCM gt '192')) or
(SEX = '2' and (AHTCM lt '143' or AHTCM gt '176'))
goto ERR3_AHGT_CM
else
  goto AWGT_LB
```

**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.
```
<table>
<thead>
<tr>
<th>Question ID:</th>
<th>AHB.200_01.000</th>
<th>Instrument Variable Name:</th>
<th>AWGT_LB</th>
<th>QuestionnaireFileName:</th>
<th>Sample Adult</th>
</tr>
</thead>
<tbody>
<tr>
<td>QuestionText:</td>
<td>How much do you weigh without shoes?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>* Enter &quot;M&quot; to record metric measurements</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>* Enter '500' for 500 pounds or more</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>050-500</td>
<td>50-500 pounds</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>997</td>
<td>Refused</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>999</td>
<td>Don't know</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>M</td>
<td>Metric</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>
</tr>
</tbody>
</table>
| SkipInstructions: | `<50-500> if AWGT_LB lt ‘50’ or AWGT_LB gt ‘500’  
goto ERR1_AWGT_LB  
elseif ((SEX = ‘1’ and (AWGT_LB lt ‘113’ or AWGT_LB gt ‘316’)) or  
((SEX = ‘2’ and (AWGT_LB lt ‘96’ or AWGT_LB gt ‘293’)))  
goto ERR2_AWGT_LB  
elseif AHGT_FLG = ‘1’ and AWGT_FLG = ‘1’  
[goto next section]  
else  
calculate the BMI (Body Mass Index) - See BMI spec page  
<R,D> [goto next section] |
| 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. |
**Question ID:** AHB.200_02.000  **Instrument Variable Name:** AWGT_KG  **QuestionnaireFileName:** Sample Adult

**QuestionText:** How much do you weigh without shoes?

* Enter weight in kilograms

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>023</td>
<td>23-226 kilograms</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 choose to give their weight in metric measurements

**SkipInstructions:**

<23-226> if AWGT_KG lt '23' or AWGT_KG gt '226'

goto ERR1_AWGT_KG

elseif ((SEX = '1' and (AWGT_KG lt '51' or AWGT_KG gt '143')) or

((SEX = '2' and (AWGT_KG lt '43' or AWGT_KG gt '133')))

goto ERR2_AWGT_KG

elseif AHGT_FLG = '1' and AWGT_FLG = '1'

goto next section

else

calculate the BMI (Body Mass Index) - See BMI spec page

<R,D> goto next section

**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.
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

Sample adults 18+

[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

Sample adults 18+ with 1+ usual place(s) to go when sick/need health advice

<1-5> [go to AHCPLROU]  
<6,R,D> [go to AHCPLKND]
Question ID: AAU.035_00.000  Instrument Variable Name: AHCPLROU  QuestionnaireFileName: Sample Adult

QuestionText: 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

UniverseText: 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.

SkipInstructions: <1> [goto AHCCHGYR]
<2,R,D> [go to AHCPLKND]

---

Question ID: AAU.037_00.000  Instrument Variable Name: AHCPLKND  QuestionnaireFileName: Sample Adult

QuestionText: 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

UniverseText: 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.

SkipInstructions: <0-6,R,D> if AUSUALPL=2,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

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

Sample adults 18+
### Question ID: AAU.053_00.010  Instrument Variable Name: APRVTRFD  QuestionnaireFileName: Sample Adult

**QuestionText:** Were you able to find a general doctor or provider who could see you?

<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 trouble finding a provider

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

---

### Question ID: AAU.057_00.010  Instrument Variable Name: ADRNANP  QuestionnaireFileName: Sample Adult

**QuestionText:** 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?

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

---

### Question ID: AAU.059_00.010  Instrument Variable Name: ADRNAI  QuestionnaireFileName: Sample Adult

**QuestionText:** DURING THE PAST 12 MONTHS, were you told by a doctor’s office or clinic that they did not accept your health care coverage?

<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:** `<1,2,R,D>[goto AHCDLY_1]`
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.

1  Yes
2  No
7  Refused
9  Don't know

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?

...You couldn't get an appointment soon enough.

1  Yes
2  No
7  Refused
9  Don't know

Sample adults 18+

<1,2,R,D>[goto AHCDLY_3]
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

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?

...The (clinic/doctor's) office wasn't open when you could get there.

1 Yes
2 No
7 Refused
9 Don't know

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?

1. You didn't have transportation.
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?

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

Sample adults 18+

<1,2,R,D>[goto AHCAFY_1]

<1,2,R,D>[goto AHCAFY_2]
<table>
<thead>
<tr>
<th>Question ID:</th>
<th>AAU.111_02.000</th>
<th>Instrument Variable Name:</th>
<th>AHCAFY_2</th>
<th>QuestionnaireFileName:</th>
<th>Sample Adult</th>
</tr>
</thead>
<tbody>
<tr>
<td>QuestionText:</td>
<td>* Read Lead-in 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? ...Mental health care or counseling.</td>
<td>Yes</td>
<td>No</td>
<td>Refused</td>
<td>Don't know</td>
</tr>
<tr>
<td>UniverseText:</td>
<td>Sample adults 18+</td>
<td>&lt;1,2,R,D&gt;[goto AHCAFY_3]</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Question ID:</th>
<th>AAU.111_03.000</th>
<th>Instrument Variable Name:</th>
<th>AHCAFY_3</th>
<th>QuestionnaireFileName:</th>
<th>Sample Adult</th>
</tr>
</thead>
<tbody>
<tr>
<td>QuestionText:</td>
<td>* Read Lead-in 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? ...Dental care (including check ups).</td>
<td>Yes</td>
<td>No</td>
<td>Refused</td>
<td>Don't know</td>
</tr>
<tr>
<td>UniverseText:</td>
<td>Sample adults 18+</td>
<td>&lt;1,2,R,D&gt;[goto AHCAFY_4]</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
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

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
2015 NHIS Questionnaire -  Sample Adult
Adult Access to Health Care & Utilization

Document Version Date: 12-May-16

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]
2015 NHIS Questionnaire - Sample Adult
Adult Access to Health Care & Utilization

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]
Question ID: AAU.127_02.010  Instrument Variable Name: ARX12_2  QuestionnaireFileName: Sample Adult

QuestionText: *Read if necessary.

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

UniverseText: Sample adults 18+ who had been prescribed medication in the past 12 months

SkipInstructions: <1,2,R,D>[goto ARX12_3]

---

Question ID: AAU.127_03.010  Instrument Variable Name: ARX12_3  QuestionnaireFileName: Sample Adult

QuestionText: *Read if necessary.

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

UniverseText: Sample adults 18+ who had been prescribed medication in the past 12 months

SkipInstructions: <1,2,R,D>[goto ARX12_4]
**Question Text:**

*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 Text:**

*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  
**Questionnaire FileName:** 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.  

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

**UniverseText:** Sample adults 18+

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

### Question ID: AAU.135_00.000  
**Instrument Variable Name:** ADENLONG  
**Questionnaire FileName:** Sample Adult

**QuestionText:**  
( book) A8  
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.

<p>| | | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td>Never</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1</td>
<td>6 months or less</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>More than 6 mos, but not more than 1 yr ago</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>More than 1 yr, but not more than 2 yrs ago</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>More than 2 yrs, but not more than 5 yrs ago</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>More than 5 years ago</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>Refused</td>
<td></td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>Don't know</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**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

Sample adults 18+

* 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?

...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

Sample adults 18+
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

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
### 2015 NHIS Questionnaire - Sample Adult

**Adult Access to Health Care & Utilization**

**Document Version Date**: 12-May-16

<table>
<thead>
<tr>
<th>Question ID:</th>
<th>AAU.141_05.000</th>
<th>Instrument Variable Name:</th>
<th>AHCSY1_5</th>
<th>QuestionnaireFileName:</th>
<th>Sample Adult</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>QuestionText:</strong></td>
<td>* Read Lead-in if Necessary.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>DURING THE PAST 12 MONTHS, have you seen or talked to any of the following health care providers about your own health?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>...A physical therapist, speech therapist, respiratory therapist, audiologist, or occupational therapist.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>1 Yes</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>2 No</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>7 Refused</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>9 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;1,2,R,D&gt;[ goto AHCSY1_6]</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Question ID:</th>
<th>AAU.141_06.000</th>
<th>Instrument Variable Name:</th>
<th>AHCSY1_6</th>
<th>QuestionnaireFileName:</th>
<th>Sample Adult</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>QuestionText:</strong></td>
<td>* Read Lead-in if Necessary.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>DURING THE PAST 12 MONTHS, have you seen or talked to any of the following health care providers about your own health?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>...A nurse practitioner, physician assistant, or midwife.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>1 Yes</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>2 No</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>7 Refused</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>9 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;1,2,R,D&gt;[ if SEX=1 goto AHCSY8_8; else if SEX=2 goto AHCSYR7]</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
* 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

Sample female adults aged 18+ years

<1,2,R,D> [go to AHCSY8_8]

* 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

Sample adults 18+

<1,2,R,D> [go to AHCSY8_9]
### 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)?

<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 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)?

<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 have seen or talked to a general doctor during the past 12 months

**SkipInstructions:** <1,2,R,D> [go to AHERNOYR]
**Question ID:** AAU.240_00.000  
**Instrument Variable Name:** AHERNOYR  
**QuestionnaireFileName:** Sample Adult

**QuestionText:**

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  
97  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

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?

… The problem was too serious for the doctor’s office or clinic

1 Yes
2 No
7 Refused
9 Don't know

Sample adults 18+ who had at least one ER visit in the past year

<1,2,R,D> [goto AERREAS5]
<table>
<thead>
<tr>
<th>Question ID:</th>
<th>AAU.248_05.050</th>
<th>Instrument Variable Name:</th>
<th>AERREAS5</th>
<th>QuestionnaireFileName:</th>
<th>Sample Adult</th>
</tr>
</thead>
<tbody>
<tr>
<td>QuestionText:</td>
<td>*Read if necessary..</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Tell me which of these apply to your last emergency room visit?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>… Only a hospital could help you</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>1 Yes</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>2 No</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>7 Refused</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>9 Don't know</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>UniverseText:</td>
<td>Sample adults 18+ who had at least one ER visit in the past year</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>SkipInstructions:</td>
<td>&lt;1,2,R,D&gt; [goto AERREAS6]</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Question ID:</th>
<th>AAU.248_06.060</th>
<th>Instrument Variable Name:</th>
<th>AERREAS6</th>
<th>QuestionnaireFileName:</th>
<th>Sample Adult</th>
</tr>
</thead>
<tbody>
<tr>
<td>QuestionText:</td>
<td>*Read if necessary..</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Tell me which of these apply to your last emergency room visit?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>… the emergency room is your closest provider</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>1 Yes</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>2 No</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>7 Refused</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>9 Don't know</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>UniverseText:</td>
<td>Sample adults 18+ who had at least one ER visit in the past year</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>SkipInstructions:</td>
<td>&lt;1,2,R,D&gt; [goto AERREAS7]</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Question ID: AAU.248_07.070  Instrument Variable Name: AERREAS7  QuestionnaireFileName: Sample Adult

QuestionText: *Read if necessary..

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

UniverseText: Sample adults 18+ who had at least one ER visit in the past year

SkipInstructions: <1,2,R,D> [goto AERREAS8]

---

Question ID: AAU.248_08.080  Instrument Variable Name: AERREAS8  QuestionnaireFileName: Sample Adult

QuestionText: *Read if necessary..

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

UniverseText: Sample adults 18+ who had at least one ER visit in the past year

SkipInstructions: <1,2,R,D> [goto AHCHYR]
**Question ID:** AAU.250_00.000  **Instrument Variable Name:** AHCHYR  **QuestionnaireFileName:** Sample Adult

**QuestionText:** 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

**UniverseText:** Sample adults 18+

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

---

**Question ID:** AAU.260_00.000  **Instrument Variable Name:** AHCHMOYR  **QuestionnaireFileName:** Sample Adult

**QuestionText:** 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

**UniverseText:** Sample adults 18+ who received home care from a health professional during the past 12 months

**SkipInstructions:** <1-12,R,D>[goto AHCHNOYR]
**Question ID:** AAU.270_00.000  
**Instrument Variable Name:** AHCHNOYR  
**QuestionnaireFileName:** Sample Adult

**QuestionText:** (book) A10

What was the total number of home visits received during {Fill1: that month/Fill2: those months}?

- 01: 1
- 02: 2-3
- 03: 4-5
- 04: 6-7
- 05: 8-9
- 06: 10-12
- 07: 13-15
- 08: 16 or more
- 97: Refused
- 99: Don't know

**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) A9

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.

- 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
- 97: Refused
- 99: Don't know

**UniverseText:** Sample adults 18+

**SkipInstructions:** <0-8,R,D>[goto ASRGYR]
**Question ID:** AAU.290_00.000  
**Instrument Variable Name:** ASRGYR  
**QuestionnaireFileName:** Sample Adult

**QuestionText:**
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.

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

**UniverseText:** Sample adults 18+

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

---

**Question ID:** AAU.300_00.000  
**Instrument Variable Name:** ASRGNOYR  
**QuestionnaireFileName:** Sample Adult

**QuestionText:**
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 |

**UniverseText:** Sample adults 18+ who had surgery or surgical procedures during past 12 months

**SkipInstructions:**  
<1-95,R,D> [goto AMDLONG]  
<11-95> [goto ERR_ASGYR]

**Soft Edit:**  
* {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.

- Never
- 6 months or less
- More than 6 mos, but not more than 1 yr ago
- More than 1 yr, but not more than 2 yrs ago
- More than 2 yrs, but not more than 5 yrs ago
- More than 5 years ago
- Refused
- Don't know

Sample adults 18+

DURING THE PAST 12 MONTHS, have you ever used computers for any of the following

- Look up health information on the Internet.

- Yes
- No
- Refused
- Don’t know

Sample adults 18+

<1,2,R,D> [goto HIT2A]
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

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
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]

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 ]

---

**Question ID:** AAU.312_01.000  
**Instrument Variable Name:** ASHFLU_M  
**QuestionnaireFileName:** Sample Adult

**QuestionText:**  
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

**UniverseText:** Sample adults 18+ who have had a flu shot

**SkipInstructions:**  
<1-12,D> [ goto ASHFLU_Y] <R> [goto SPRFLUYR]
**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>Year</th>
<th>Refused</th>
</tr>
</thead>
<tbody>
<tr>
<td>9997</td>
<td></td>
<td></td>
</tr>
<tr>
<td>9999</td>
<td>Don't know</td>
<td></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>1</th>
<th>2</th>
<th>7</th>
<th>9</th>
</tr>
</thead>
<tbody>
<tr>
<td>Before this pregnancy</td>
<td>During this pregnancy</td>
<td>Refused</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, [last year]. Did you get a flu shot before, during or after this pregnancy?]

Earlier you said you were pregnant sometime between August [last year] and March [current year]. Did you get a flu shot before, during or after this pregnancy?

Earlier you said you were pregnant sometime between August [last year] and March [current year]. 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

SkipInstructions: <1-12,D> [ goto ASPFLU_Y]
<R> [goto SHTPNUYR]
**2015 NHIS Questionnaire - Sample Adult**

**Adult Access to Health Care & Utilization**

Document Version Date: 12-May-16

---

**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.

<table>
<thead>
<tr>
<th>Year</th>
<th>Year</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 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.

<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:** <1,2,R,D> [goto APOX]
**2015 NHIS Questionnaire - Sample Adult**

**Adult Access to Health Care & Utilization**

**Document Version Date:** 12-May-16

<table>
<thead>
<tr>
<th>Question ID:</th>
<th>AAU.330_00.000</th>
<th>Instrument Variable Name:</th>
<th>APOX</th>
<th>QuestionnaireFileName:</th>
<th>Sample Adult</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>QuestionText:</strong></td>
<td>Have you EVER had chickenpox?</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 APOX12MO]</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Question ID:</th>
<th>AAU.340_00.000</th>
<th>Instrument Variable Name:</th>
<th>APOX12MO</th>
<th>QuestionnaireFileName:</th>
<th>Sample Adult</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>QuestionText:</strong></td>
<td>Have you had chickenpox in the PAST 12 MONTHS?</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 have ever had chickenpox</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>SkipInstructions:</strong></td>
<td>&lt;1,2,R,D&gt; [goto AHEP]</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Question ID:</th>
<th>AAU.350_00.000</th>
<th>Instrument Variable Name:</th>
<th>AHEP</th>
<th>QuestionnaireFileName:</th>
<th>Sample Adult</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>QuestionText:</strong></td>
<td>Have you EVER had hepatitis?</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 AHEPBTST]</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
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]
2015 NHIS Questionnaire - Sample Adult
Adult Access to Health Care & Utilization

Document Version Date: 12-May-16

Question ID: AAU.380_00.000  Instrument Variable Name: SHEPDOS  QuestionnaireFileName: Sample Adult

QuestionText: 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

UniverseText: Sample adults 18+ who have ever received the Hepatitis B vaccine

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

Question ID: AAU.390_00.010  Instrument Variable Name: SHTHEPA  QuestionnaireFileName: Sample Adult

QuestionText: 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

UniverseText: Sample adults 18+

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

Question ID: AAU.400_00.010  Instrument Variable Name: SHEPANUM  QuestionnaireFileName: Sample Adult

QuestionText: How many hepatitis A shots did you receive?

*Enter '96' if all shots were received

01-95  01-95 shots
96     Received all shots
97     Refused
99     Don't know

UniverseText: Sample adults 18+ who have had a hepatitis A vaccine

SkipInstructions: <1-95,96,R,D> [goto AHEPCTST]
**Question ID:** AAU.405_00.010  **Instrument Variable Name:** AHEPCTST  **QuestionnaireFileName:** Sample Adult

**QuestionText:** Have you ever had a blood test for hepatitis C?

1  Yes
2  No
7  Refused
9  Don’t know

**UniverseText:** Sample adults 18+

**SkipInstructions:** <1> [goto AHEPCRES]
<2,R,D> if AGE GE 50 goto SHINGLES
elseif AGE LT 50 goto SHTTD

---

**Question ID:** AAU.405_00.020  **Instrument Variable Name:** AHEPCRES  **QuestionnaireFileName:** Sample Adult

**QuestionText:** 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

**UniverseText:** Sample adults 18+ who have had a blood test for hepatitis C

**SkipInstructions:** <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]

Have you received a tetanus shot in the past 10 years?

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

UniverseText: Sample adults 18+

SkipInstructions: <1> goto SHTTD05
<2,R,D> and AGE >64 [goto LIVEV]
Else if <2,R,D> and AGE<65 [goto SHTHPV2]

Was your most recent tetanus shot given in 2005 or later?

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

UniverseText: Sample adults 18+ who have had a tetanus shot in the past 10 years

SkipInstructions: <1,R> [goto SHTTDAP]
<2,D> if AGE le 64 [goto SHTHPV2]
elseif AGE gt 64 goto LIVEV
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
**2015 NHIS Questionnaire - Sample Adult**

**Adult Access to Health Care & Utilization**

**Document Version Date:** 12-May-16

**Question ID:** AAU.448_00.010  
**Instrument Variable Name:** SHHPVDOS  
**QuestionnaireFileName:** Sample Adult

- **Question Text:** How many HPV shots did you receive?  
  * Enter '50' if 50 or more shots  
  * Enter '96' for all shots

- **Universe Text:** Sample adults LE 64 who received an HPV shot

- **Skip Instructions:**  
  `<1-50,96,R,D> [goto AHPVAGE]`  
  `<51-95> [goto ERR_SHHPVDOS]`

- **Hard Edit:** ERR_SHHPVDOS
  - Shots should be in the range 1-50 or 96 for all shots.
  - Please correct.

---

**Question ID:** AAU.449_00.010  
**Instrument Variable Name:** AHPVAGE  
**QuestionnaireFileName:** Sample Adult

- **Question Text:** How old were you when you received your first HPV shot?

- **Universe Text:** Sample adults LE 64 who received an HPV shot

- **Skip Instructions:**  
  `<8-120,R,D> [goto LIVEV]`
Question ID: AAU.450_00.010  
Instrument Variable Name: LIVEV  
QuestionnaireFileName: Sample Adult

QuestionText: 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

UniverseText: Sample adults 18+

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

---

Question ID: AAU.460_00.010  
Instrument Variable Name: TRAVEL  
QuestionnaireFileName: Sample Adult

QuestionText: 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

UniverseText: Sample adults 18+

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

---

Question ID: AAU.465_00.010  
Instrument Variable Name: WRKHLTH  
QuestionnaireFileName: Sample Adult

QuestionText: 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

UniverseText: Sample adults 18+

SkipInstructions: <1> [goto WRKDIR] <2,R,D> [goto APSBPCHK]
Question ID: AAU.470_00.010  Instrument Variable Name: WRKDIR  QuestionnaireFileName: Sample Adult

QuestionText: 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

UniverseText: Sample adults 18+ who work or volunteer in a health-care setting

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

---

Question ID: AAU.500_00.010  Instrument Variable Name: APSBPCHK  QuestionnaireFileName: Sample Adult

QuestionText: 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

UniverseText: Sample adults 18+

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

---

Question ID: AAU.510_00.010  Instrument Variable Name: APSCHCHK  QuestionnaireFileName: Sample Adult

QuestionText: 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

UniverseText: Sample adults 18+

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

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
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 [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> [goto AINDINS]

---

Question ID: AAU.600_00.010  Instrument Variable Name: AINDINS  QuestionnaireFileName: Sample Adult

QuestionText: 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
7  Refused
9  Don’t know

UniverseText: Sample adults 18+

SkipInstructions: <1> [goto AINDPRCH]
   <2,R,D> if age LT 65 [goto AEXCHNG];
   else age GE 65 [goto next section]
### Question ID: AAU.600_00.020  Instrument Variable Name: AINDPRCH  QuestionnaireFile Name: Sample Adult

<table>
<thead>
<tr>
<th>QuestionText:</th>
<th>Was a plan purchased?</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 tried to purchase health insurance directly in the past 3 years

**SkipInstructions:**  
1. [goto AINDWHO]  
2. [goto AEXCHNG];  
   else [goto next section]

### Question ID: AAU.600_00.030  Instrument Variable Name: AINDWHO  QuestionnaireFile Name: Sample Adult

<table>
<thead>
<tr>
<th>QuestionText:</th>
<th>Was this plan for yourself, someone else in your family, or both?</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Self</td>
</tr>
<tr>
<td>2</td>
<td>Someone else in family</td>
</tr>
<tr>
<td>3</td>
<td>Both</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 purchased health insurance directly in the past 3 years

**SkipInstructions:**  
<1-3,R,D> [goto AINDDIF1]
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

Sample adults 18+ who purchased health insurance directly in the past 3 years

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

Sample adults 18+ who purchased health insurance directly in the past 3 years
Have you looked into purchasing health insurance coverage through Healthcare.gov or the [fill: Health Insurance Marketplace/Health Insurance Marketplace, such as (fill: state name)]?

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

Sample adults LT 65 years
*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

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

Sample adults 18+
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

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

Sample adults 18+
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

Sample adults 18+

*Read if necessary.

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

Sample adults 18+
2015 NHIS Questionnaire - Sample Adult
Adult Selected Items
Document Version Date: 12-May-16

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> [goto ACINKNT]

[if SEX=1, goto ACISIM; elseif SEX=2, goto ACISIF]
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
7  Refused

UniverseText: Male sample adults 18+

SkipInstructions: <1-5,R> [goto ACIRETR]

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: <1-5,R> [goto ACIRETR]
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.

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 of a serious illness or accident? 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+
2015 NHIS Questionnaire - Sample Adult
Adult Selected Items

Document Version Date: 12-May-16

**Question ID:** ASI.280_00.000  **Instrument Variable Name:** ACISTLV  **QuestionnaireFileName:** Sample Adult

**QuestionText:** 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

**UniverseText:** Sample adults 18+

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

---

**Question ID:** ASI.290_00.000  **Instrument Variable Name:** ACICNHC  **QuestionnaireFileName:** Sample Adult

**QuestionText:** 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

**UniverseText:** Sample adults 18+

**SkipInstructions:** <1-4,R,D> [goto ACICCOLL]
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]
2015 NHIS Questionnaire - Sample Adult
Adult Selected Items

Document Version Date: 12-May-16

---

**Question ID:** ASI.320_00.000  **Instrument Variable Name:** ACIHST  **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]
### Question ID: ASI.340_00.000  
#### Instrument Variable Name: ACISLEEP  
#### QuestionnaireFileName: Sample Adult  
#### QuestionText:  
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>Code</th>
<th>Response</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>

#### UniverseText:  
Sample adults 18+  

#### SkipInstructions:  
<1-5>[goto ERR_SLEEP];  
<1-24, R,D>[goto ACISLPFL]  

#### Soft Edit:  
*Average number of hours of sleep is [ACISLEEP].  
* Please verify.  

---

### Question ID: ASI.350_00.000  
#### Instrument Variable Name: ACISLPFL  
#### QuestionnaireFileName: Sample Adult  
#### QuestionText:  
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>Code</th>
<th>Response</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>

#### UniverseText:  
Sample adults 18+  

#### SkipInstructions:  
<0-7,R,D> [goto ACISLPST]
<table>
<thead>
<tr>
<th>Question ID:</th>
<th>ASI.360_00.000</th>
<th>Instrument Variable Name:</th>
<th>ACISLPST</th>
<th>QuestionnaireFileName:</th>
<th>Sample Adult</th>
</tr>
</thead>
<tbody>
<tr>
<td>QuestionText:</td>
<td>In the past week, how many times did you have trouble staying asleep?</td>
<td></td>
<td></td>
<td></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>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>*Enter '7' for 7 or more times.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>00</td>
<td>Did not have trouble staying asleep in the past week</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>01-06</td>
<td>1-6 times</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>07</td>
<td>7 or more times</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>UniverseText:</td>
<td>Sample adults 18+</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>SkipInstructions:</td>
<td>&lt;0-7,R,D&gt; [goto ACISLPMD]</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Question ID:</th>
<th>ASI.370_00.000</th>
<th>Instrument Variable Name:</th>
<th>ACISLPMD</th>
<th>QuestionnaireFileName:</th>
<th>Sample Adult</th>
</tr>
</thead>
<tbody>
<tr>
<td>QuestionText:</td>
<td>In the past week, how many times did you take medication to help you fall asleep or stay asleep?</td>
<td></td>
<td></td>
<td></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>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>*Enter '7' for 7 or more times.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>00</td>
<td>Did not take medication to help sleep in the past week</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>01-06</td>
<td>1-6 times</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>07</td>
<td>7 or more times</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>UniverseText:</td>
<td>Sample adults 18+</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>SkipInstructions:</td>
<td>&lt;0-7,R,D&gt; [goto ACIREST]</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Question ID: ASI.380_00.000  Instrument Variable Name: ACIREST  QuestionnaireFileName: Sample Adult

Question Text: 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

Universe Text: Sample adults 18+

Skip Instructions: <0-7,R,D> [goto MHSAD_CK]

Question ID: ASI.390_00.000  Instrument Variable Name: MHSAD_CK  QuestionnaireFileName: Sample Adult

Question Text: 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

Universe Text: Sample adults 18+

Skip Instructions: <1> [goto ACISAD]

Question ID: ASI.390_01.000  Instrument Variable Name: ACISAD  QuestionnaireFileName: Sample Adult

Question Text: (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

Universe Text: Sample adults 18+

Skip Instructions: <1-5,R,D> [goto ACINERV]
### 2015 NHIS Questionnaire - Sample Adult

**Adult Selected Items**

**Document Version Date:** 12-May-16

<table>
<thead>
<tr>
<th>Question ID:</th>
<th>ASI.390_02.000</th>
<th>Instrument Variable Name:</th>
<th>ACINERV</th>
<th>QuestionnaireFileName:</th>
<th>Sample Adult</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>QuestionText:</strong></td>
<td><em>(book) ASI5</em></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>* Read if necessary:</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>During the PAST 30 DAYS, how often did you feel</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>...Nervous?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1</td>
<td>ALL of the time</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>MOST of the time</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>SOME of the time</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>A LITTLE of the time</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>NONE of the time</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;1-5,R,D&gt; [goto ACIRSTLS]</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

---

<table>
<thead>
<tr>
<th>Question ID:</th>
<th>ASI.390_03.000</th>
<th>Instrument Variable Name:</th>
<th>ACIRSTLS</th>
<th>QuestionnaireFileName:</th>
<th>Sample Adult</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>QuestionText:</strong></td>
<td><em>(book) ASI5</em></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>* Read if necessary:</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>During the PAST 30 DAYS, how often did you feel</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>...Restless or fidgety?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1</td>
<td>ALL of the time</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>MOST of the time</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>SOME of the time</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>A LITTLE of the time</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>NONE of the time</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;1-5,R,D&gt; [goto ACIHOPLS]</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
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
6. Refused
7. Don't know

Sample adults 18+

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
6. Refused
7. Don't know

Sample adults 18+
Question ID: ASI.390_06.000   Instrument Variable Name: ACIWTHLS   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 ACIWTHLS=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
### Question ID: AWB.020_02.000  
**Instrument Variable Name:** AWEBOFTP  
**QuestionnaireFileName:** Sample Adult

**QuestionText:** Enter time period for how often Internet is used.

<table>
<thead>
<tr>
<th>Number</th>
<th>Time Period</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>7</td>
<td>Refused</td>
</tr>
<tr>
<td>9</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

**UniverseText:** Sample adults 18+ who use the Internet and gave a valid value for the number portion of this question

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

---

### Question ID: AWB.025_00.000  
**Instrument Variable Name:** AWEBORP  
**QuestionnaireFileName:** Sample Adult

**QuestionText:** Research companies invite people to become members of online research panels where they regularly respond to surveys online. Are you currently a member of an online research panel?

<table>
<thead>
<tr>
<th>Number</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:** Sample adults 18+ who use the Internet

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

---

### Question ID: AWB.030_00.000  
**Instrument Variable Name:** AWEBEML  
**QuestionnaireFileName:** Sample Adult

**QuestionText:** Do you send or receive emails?

<table>
<thead>
<tr>
<th>Number</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:** Sample adults 18+

**SkipInstructions:** <1> [goto AWEBEMAD] <2,R,D> [goto next section]
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
97 Refused
99 Don't Know

Sample adults 18+ who send or receive email

1 of 2
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.

001-995 1-995
97 Refused
99 Don't know

Sample adults 18+ who gave an email address

<1-995> [goto AWBEMTP] <R,D> [goto next section]
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]