

ARTH-1  
 NHIS CALENDAR YEAR 1969  
 Public Use File  
 ARTHRITIS RECORD (Record Type 7)  
 Number of Records - 13,286

File Location	Var. Name Quest. No.	Title and Code
1	<b>SAMPLER</b> HH-4	<b>SAMPLE - RECODE OF CENSUS CODE</b> 1. B48 (weeks 3-13) and B52 (weeks 1 & 2) 2. B49 3. B50 4. B51
2	<b>YEARINT</b>	<b>YEAR OF COLLECTION OF DATA</b> 9. 1969 0. 1970
3-5	<b>PSURANDR</b> HH-1	<b>PSU - RANDOM RECODE</b>
6-7	<b>WEEKCEN</b> HH-2a	<b>WEEK - CENSUS CODE</b> 21, 41, 61. Week 01, 1969 or 1970 22, 42, 62. Week 02, 1969 or 1970 23, 43, 63. Week 03, 1969 24, 44, 64. Week 04, 1969 25, 45, 65. Week 05, 1969 26, 46, 66. Week 06, 1969 27, 47, 67. Week 07, 1969 28, 48, 68. Week 08, 1969 29, 49, 69. Week 09, 1969 30, 50, 70. Week 10, 1969 31, 51, 71. Week 11, 1969 32, 52, 72. Week 12, 1969 33, 53, 73. Week 13, 1969
8-9	<b>SEGMENT</b> HH-2a	<b>SEGMENT NUMBER</b> Week plus Segment Number identifies the segment
10-11	<b>HHID</b> HH-3	<b>HOUSEHOLD NUMBER</b> Numbered within PSU-Week-Segment
12-13	<b>PERNUM</b>	<b>PERSON NUMBER</b>
14	<b>RECTYPE</b>	<b>RECORD TYPE</b> 7. Arthritis Record
15	<b>ARTHREC</b> Recode	<b>ARTHRITIS SUPPLEMENT CONTROL</b> 1. Supplement completed 2. Arthritis supplement not completed 3. Rheumatism supplement not completed 4. Arthritis-like supplement not completed

ARTH-2

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16	<b>ARTHPER</b> Recode	<b>PERSON HAS ARTHRITIS</b> 1. Arthritis only - ICDA 710-715 2. Rheumatism only - 716-718 excludes 717.0 3. Other arthritis only - 274, 446.0, 696.0, 701.0, 734.blank,0,1 4. Arthritis and rheumatism 5. Rheumatism and other arthritis 6. Arthritis and other arthritis 7. Arthritis, rheumatism, and other arthritis
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17-18	<b>WEEKCENR</b> Recode	<b>CENSUS WEEK RECODE</b> 01. 21, 41, 61 02. 22, 42, 62 03. 23, 43, 63 04. 24, 44, 64 05. 25, 45, 65 06. 26, 46, 66 07. 27, 47, 67 08. 28, 48, 68 09. 29, 49, 69 10. 30, 50, 70 11. 31, 51, 71 12. 32, 52, 72 13. 33, 53, 73
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19	<b>QUARTER</b> Recode	<b>PROCESSING QUARTER CODE</b> 1. B48 (Weeks 3-13) & B49 (Weeks 1,2) 2. B49 (Weeks 3-13) & B50 (Weeks 1,2) 3. B50 (Weeks 3-13) & B51 (Weeks 1,2) 4. B51 (Weeks 3-13) & B52 (Weeks 1,2)
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20	<b>YEAR</b> Recode	<b>PROCESSING YEAR</b> 9. 1969
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21-22	<b>WEEKPROC</b> Recode	<b>PROCESSING WEEK CODE (Numbered within Processing Quarter)</b> <u>Census Week and Year Code</u> 01. 23, 43, 63 - 1969 02. 24, 44, 64 - 1969 03. 25, 45, 65 - 1969 04. 26, 46, 66 - 1969 05. 27, 47, 67 - 1969 06. 28, 48, 68 - 1969 07. 29, 49, 69 - 1969 08. 30, 50, 70 - 1969 09. 31, 51, 71 - 1969 10. 32, 52, 72 - 1969 11. 33, 53, 73 - 1969 12. 21, 41, 61 - 1969 - 1970 13. 22, 41, 62 - 1969 - 1970
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23-27	<b>BLANK</b>	<b>BLANK</b>
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28            **PSUTYPE**            **TYPE OF PSU**  
    0. The 22 Large Self-representing SMSA's  
    1. SMSA-Self-representing  
    3. SMSA-NonselF-representing  
    4. Non-SMSA-Self-representing  
    6. Non-SMSA-NonselF-representing

29            **REGION**            **REGION**  
                  RC Record            1. Northeast (includes Sections 1 and 2)  
    2. North Central (includes Sections 3, 4, and 5)  
    3. South (includes Sections 6, 7, 8, and 9)  
    4. West (includes Sections 10, 11)

30-31        **LSRSMSA**            **NHIS SECTION CODE - TABULATION AREA**  
                  RC Recode            00. Not in a large self-representing SMSA

Large Self-representing SMSA's

34. Boston	45. Buffalo
35. New York*	46. Cleveland
36. Philadelphia	47. Minneapolis-St Paul
37. Pittsburgh	48. Milwaukee
38. Detroit	49. Kansas City
39. Chicago**	50. St. Louis
40. Cincinnati	51. Houston
41. Los Angeles-Long Beach	52. Dallas
42. San Francisco-Oakland	53. Washington, DC
43. Baltimore	54. Seattle
44. Atlanta	55. San Diego

32            **BLANK**            **BLANK**

33            **SMSA**            **STANDARD METROPOLITAN STATISTICAL AREA**  
    1. In SMSA, in Central City of SMSA  
    2. In SMSA, not in Central City of SMSA  
    4. Not in SMSA

34-35        **BLANK**            **BLANK**

\* Northeastern New Jersey Consolidated Area  
 \*\* Northwestern Indiana Consolidated Area



ARTH-5

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50	<b>RACE</b> Q1	<b>RACE</b> 1. White 2. Negro 3. Other
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51	<b>RACER</b> Recode	<b>RACE RECODE</b> 1. White 2. Other race
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52	<b>SEX</b> Q1	<b>SEX</b> 1. Male 2. Female
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53-54	<b>AGE</b> Q1	<b>AGE</b> 00. Under 1 year 01-98. Single years 99. 99+ years
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55-56	<b>AGER1</b> Recode	<b>AGE RECODE #1</b> 01. 00-04 years 02. 05-14 03. 15-24 04. 25-34 05. 35-44 06. 45-54 07. 55-64 08. 65-74 09. 75+
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57-58	<b>AGER2</b> Recode	<b>AGE RECODE #2</b> 01. Under 6 years 02. 06-16 03. 17-24 04. 25-34 05. 35-44 06. 45-54 07. 55-64 08. 65-74 09. 75+
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59	<b>AGER3</b> Recode	<b>AGE RECODE #3</b> 1. Under 15 years 2. 15-44 3. 45-64 4. 65+
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60	<b>MARSTAT</b> Q4	<b>MARITAL STATUS</b> 0. Under 17 years 1. Married 2. Widowed 3. Never married 4. Divorced 5. Separated
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61-62	<b>EDUC</b> Q38	<b>EDUCATION OF INDIVIDUAL - COMPLETED YEARS</b> 01. Under 17 years of age 02. None 03. 1-4 years completed 04. 5-7 years completed 05. 8 years completed 06. 9-11 years completed 07. 12 years completed(high school graduate) 08. 13-14 years completed 09. 15 years completed 10. 16 years completed(college graduate) 11. 17+ years completed(graduate school) 12. Unknown
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63	<b>EDUCR</b> Q38 Recode	<b>EDUCATION OF INDIVIDUAL - RECODE</b> 1. Under 17 years of age 2. None 3. 01-08 (elementary) 4. 09-11 (high school) 5. 12 (high school graduate) 6. 13-15 (college) 7. 16+ (college graduate +) 8. Unknown
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64-65	<b>EDUCFH</b> Q38	<b>EDUCATION OF FAMILY HEAD OR UNRELATED INDIVIDUAL - DETAIL</b> 01. Under 17 years of age 02. None 03. 1-4 years completed 04. 5-7 years completed 05. 8 years completed 06. 9-11 years completed 07. 12 years completed (high school graduate) 08. 13-14 years completed 09. 15 years completed 10. 16 years completed (college graduate) 11. 17+ years completed (graduate school) 12. Unknown
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66	<b>EDUCFHR</b> Q38 Recode	<b>EDUCATION OF HEAD - RECODE</b> 1. Under 17 years of age 2. None 3. 01-08 (elementary) 4. 09-11 (high school) 5. 12 (high school graduate) 6. 13-15 (college) 7. 16+ (college graduate +) 8. Unknown
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67	<b>VETERAN</b> Q39	<b>VETERAN STATUS</b> 0. Female or under 17 years of age 1. Nonveteran 2. Peacetime only 3. Wartime veteran 4. Other Korean war veteran 5. Cold war veteran (1955-1964) 6. Vietnam veteran 7. DK if served in Armed Forces 8. DK if war veteran 9. DK if Korean, Viet Nam or Cold war veteran
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68-69	<b>INCOME</b> Q42	<b>FAMILY INCOME OR INCOME OF UNRELATED INDIVIDUAL</b> 01. Under \$1,000 02. \$1,000-1,999 03. \$2,000-2,999 04. \$3,000-3,999 05. \$4,000-4,999 06. \$5,000-5,999 07. \$6,000-6,999 08. \$7,000-9,999 09. 10,000-14,999 10. 15,000+ 11. Unknown
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70	<b>INCOMER</b> Q42 Recode	<b>FAMILY INCOME RECODE</b> 1. Under \$3,000 2. \$3,000-4,999 3. \$5,000-6,999 4. \$7,000-9,999 5. 10,000-14,999 6. 15,000+ 7. Unknown
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71-72	Q2	<b>FAMILY RELATIONSHIP</b>
71	<b>FAMTYPE</b>	<b>TYPE OF FAMILY</b> &. Primary individual -. Secondary individual 0. Primary family 1-9. Secondary families
72	<b>FAMREL</b>	<b>FAMILY RELATIONSHIP</b> &. Unrelated individual living alone 0. Head of family or unrelated individual not living alone 1. Wife (husband living at home and <u>not</u> in Armed Forces) 2. Wife (husband living at home <u>and is</u> in Armed Forces) 3. Child of head or spouse 4. Grandchild of head or spouse 5. Parent of head or spouse 6. Other relative

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73	<b>FAMREL</b> Q2 Recode	<b>FAMILY RELATIONSHIP RECODE</b> 1. Living alone 2. Living with nonrelatives 3. Living with relatives - married 4. Living with relatives - other
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74	<b>USUALACT</b> Q18,19 Recode	<b>USUAL ACTIVITY</b> 0. Under 6 years 1. Usually working 2. Keeping house (female) 3. Retired (45+ years) 4. Going to school 5. Something else 6. Unknown
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75	<b>CURACT2W</b> Q40	<b>CURRENT ACTIVITY DURING PAST TWO WEEKS</b> 0. Under 17 years <u>Currently Employed</u> 1. Worked in PAST TWO WEEKS 2. Did not work, has job, not on layoff and not looking for work 3. Did not work, has job, looking for work <u>Unemployed</u> 4. Did not work, has job, on layoff 5. Did not work, has job, on layoff and looking for work 6. Did not work, has job, unknown if looking or on layoff 7. Did not work, no job, looking for work or on layoff  8. Not in labor force (17+)
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76	<b>WKCLASS</b> Q41	<b>CLASS OF WORKER</b> 1. private paid 2. Federal Government 3. Other Government 4. Self employed 5. Nonpay 6. Other (new worker) 7. Unknown or not reported 8. Not in Labor Force
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77-79	<b>INDUSTRY</b> Q41	<b>INDUSTRY DETAIL CODE</b> 001-999. Code Number blblbl. Not applicable
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80-81	<b>INDUSR1</b> Recode	<b>INDUSTRY RECODE 1</b>
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82-83	<b>INDUSR2</b> Recode	<b>INDUSTRY RECODE 2</b>
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84-86	<b>OCCUP</b> Q41	<b>OCCUPATION DETAIL CODE</b> 000-995. Code number blblbl. Not applicable
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87-88	<b>OCCUPR1</b> Recode	<b>OCCUPATION RECODE 1</b>
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89-90	<b>OCCUPR2</b> Recode	<b>OCCUPATION RECODE 2</b>
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91	<b>RESPOND</b> R (Q5-37)	<b>RESPONDENT</b> 1. Self entirely 2. Self partly 3. Spouse 4. Mother 5. Father 6. Other female family member 7. Other male family member 8. Other
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92-93	<b>RESPAGE</b> Generated	<b>AGE OF RESPONDENT</b> 00. Under 1 year 01-98. Single years blbl,99. Unknown and not reported
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94	<b>RESPAGER</b> Recode	<b>AGE OF RESPONDENT RECODE</b> 1. Under 20 years 2. 20-54 years 3. 55-64 years 4. 65-74 years 5. 75+ years 6. Unknown or not reported
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95-96	<b>FAMSIZE</b> Generated	<b>ACTUAL FAMILY SIZE</b> 00. Unrelated individuals 01-19. Family size
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97	<b>FAMSIZER</b> Recode	<b>SIZE OF FAMILY RECODE</b> 0. Unrelated individuals 1. One member 2. 2 members 3. 3 members 4. 4 members 5. 5 members 6. 6 members 7. 7 members 8. 8+ members
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98	<b>ACTLIMIT</b> Q20-26	<b>LIMITATION OF ACTIVITY (PERSON WITH 1+ CHRONIC CONDITIONS)</b> 1. Can not perform Usual Activity 2. Can perform UA but limited in amount and kind 3. Can perform UA but limited in outside activities 4. Not limited (including unknown) 5. Not applicable (no chronic condition)
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ARTH-10

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99-101	Q27	<b>DURATION OF LIMITATION OF ACTIVITY</b>
99	<b>ACTLMUNT</b>	<b>UNIT *</b> 1. Months 2. Years 3. Unknown bl. Not applicable
100-101	<b>ACTLMNUM</b>	<b>NUMBER OF UNIT</b> 00. Less than 1 month 01-98. Number of months or years 99. Unknown blbl. Not applicable - Acute or no chronic with limitation

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102-105	<b>BLANK</b>	<b>BLANK</b>
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106-107	<b>RESACT2W</b> Q5g	<b>RESTRICTED ACTIVITY DAYS IN PAST TWO WEEKS</b> 00. None 01-14. Number of days
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108-109	<b>BDAY2W</b> Q5b	<b>BED DISABILITY DAYS IN PAST TWO WEEKS</b> 00. None 01-14. Number of days
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110	<b>WKSCHID</b> Q5c,d	<b>WORK/SCHOOL LOSS DAY IDENTIFIER</b> 1. Under 6 years of age 2. School-loss days 3. Work-loss days
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111-112	<b>WKSCH2W</b> Q5c,d	<b>WORK OR SCHOOL-LOSS DAYS IN PAST TWO WEEKS</b> 00. None or Under 6 01-14. Number of days
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\* Duration Unit in 1-3 if location 98 in 1-3.

ARTH-11

113-114	<b>HDAY2W</b> Generated	<b>NUMBER OF DAYS IN HOSPITAL IN PAST TWO WEEKS *</b> 00. None or Under 6 01-14. Number of days
115-116	<b>DENTL2W</b> Generated	<b>DENTAL VISITS IN 2 WEEKS</b> 00. None 01-98. Number of visits
117-119	Q9b	<b>DENTAL VISITS IN 12 MONTHS</b>
117	<b>DNTL12MC</b>	<b>KNOWN/UNKNOWN CODE</b> 1. Number of visits known 2. Number of visits unknown
118-119	<b>DNTL12MN</b>	<b>NUMBER OF VISITS</b> 00. None or Unknown 01-98. Number of visits
120-123	Q16	<b>DOCTOR VISITS IN 12 MONTHS</b>
120	<b>DV12MC</b>	<b>KNOWN/UNKNOWN CODE</b> 1. Number of visits known 2. Number of visits unknown
121-123	<b>DV12MN</b>	<b>NUMBER OF VISITS</b> 000. None or Unknown 001-998. Number of visits
124-126	<b>HDAY12M</b> Computer Generated	<b>NUMBER OF SHORT-STAY HOSPITAL DAYS IN PAST 12 MONTHS **</b> 000. None 001-365. Number of days
127	<b>DVINTVL</b> Q16	<b>INTERVAL SINCE LAST DOCTOR VISIT</b> 0. Never 1. Visit in 2 weeks 2. Visit as inpatient in 2 weeks 3. 2 weeks to less than 6 months 4. 6 months to less than 12 months 5. 1 year 6. 2-4 years 7. 5-9 years 8. 10+ years 9. Unknown

\* Excludes Nursing Homes and Hospitals not in index, service codes 93,94,95.

\*\* Short-stay Hospital: All hospital service types except mental (code 02), Tuberculosis (03), Orthopedic (08), Contagious Disease (09), Chronic Disease (10), All Other (12), Nursing Home (94,95), and Not In Index (93).

ARTH-12

128	DTINTVL Q9a	INTERVAL SINCE LAST DENTAL VISIT 0. Never 1. Visit in 2 weeks 2. 2 weeks to less than 6 months 3. 6 months to less than 12 months 4. 1 year 5. 2-4 years 6. 5-9 years 7. 10+ years 8. Unknown
129-130	HPTLEPI Generated	NUMBER OF SHORT-STAY HOSPITAL EPISODES **
131-132	CONDNUM Generated	TOTAL CONDITIONS
133-134	CHRONIC Generated	TOTAL CHRONIC CONDITIONS
135-136	CHRONCLA Generated	NUMBER OF CHRONIC CONDITIONS CAUSING LIMITATION OF ACTIVITY
137-138	CHRONCLM Generated	NUMBER OF CHRONIC CONDITIONS CAUSING LIMITATION OF MOBILITY
139-140	PASSIST Q43a-c	PUBLIC ASSISTANCE RECIPIENT (INCOME UNDER \$5000) 00. No aid in past 12 months 01. None now but did so in past 12 months 02. Family but not this person 03. Public assistance NOS 04. Relief 05. State and local welfare 06. Federal pensions and assistance 07. Other types 08. Receiving aid but type unknown 09. Unknown or not reported 10. Not applicable (income \$5000+)
141-149	WTFA	BASIC WEIGHT
150-158	WTRAD2W	ESTIMATED RESTRICTED ACTIVITY DAYS IN PAST TWO WEEKS
159-167	WTBDD2W	ESTIMATED PERSON BED DAYS IN PAST TWO WEEKS
168-176	WTWLD2W	ESTIMATED PERSON WORK/SCHOOL LOSS DAYS IN PAST TWO WEEKS
177-185	WTDTL2W	ESTIMATED DENTAL VISITS IN PAST TWO WEEKS

\*\* See Page ARTH-11.

186-194	DV12WPA	ESTIMATED PERSON DOCTOR VISITS IN PAST 12 MONTHS
195-203	HDA12WPA	ESTIMATED PERSON SHORT STAY HOSPITAL DAYS IN PAST 12 MONTHS
204-212	WTRAD2WC	ESTIMATED CONDITION RESTRICTED ACTIVITY DAYS IN PAST TWO WEEKS
213-221	WTBDD2WC	ESTIMATED CONDITION BED DAYS IN PAST TWO WEEKS
222-230	WTWLD2WC	ESTIMATED CONDITION WORK/SCHOOL LOSS DAYS IN PAST TWO WEEKS
231-239	DV12CWPA	ESTIMATED CONDITION DOCTOR VISITS IN PAST 12 MONTHS
240-248	BD12CWPA	ESTIMATED CONDITION BED DAYS IN PAST 12 MONTHS
249-253	WTAFAD	BASIC WEIGHT AFTER ASC ADJUSTMENT (Person Weight)
254-259	WT65	6.5 WEIGHT
260	RESPONDA (A1)-98	RESPONDENT FOR SUPPLEMENT 1. Self - Entirely or partly 2. Other respondent 3. Unknown 4. Dummy supplement (record coded) 5. Dummy supplement (record generated)
261	ACLIMART C	ARTHRITIS-LIKE CONDITION CAUSES ACTIVITY LIMITATION (in Priority sequence) 1. Arthritis 2. Rheumatism (excludes lumbago) 3. Other ARTHRITIS-LIKE condition (includes gout) 4. Limited, but cause is other than above 5. Not limited
262	MOLIMART C	ARTHRITIS-LIKE CONDITION CAUSES MOBILITY LIMITATION (in Priority sequence) 1. Arthritis is a cause 2. Rheumatism (excludes lumbago) 3. Other ARTHRITIS-LIKE condition 4. Limited, but cause is not an arthritis-like condition 5. Not limited
263	ICD710 C	PERSON HAS SELECTED ARTHRITIS-LIKE CONDITIONS REQUIRING ICDA 710 1. Yes, primary record for which condition data is transferred 2. Yes, condition data not transferred 3. No, person does not have arthritis-like condition record
264	ICD712 C	PERSON HAS SELECTED ARTHRITIS-LIKE CONDITIONS REQUIRING ICDA 712 1. Yes, primary record for which condition data is transferred 2. Yes, condition data not transferred 3. No, person does not have arthritis-like condition record

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265	ICD713 C	<b>PERSON HAS SELECTED ARTHRITIS-LIKE CONDITIONS REQUIRING ICDA 713</b> 1. Yes, primary record for which condition data is transferred 2. Yes, condition data not transferred 3. No, person does not have arthritis-like condition record
266	ICD714 C	<b>PERSON HAS SELECTED ARTHRITIS-LIKE CONDITIONS REQUIRING ICDA 714</b> 1. Yes, primary record for which condition data is transferred 2. Yes, condition data not transferred 3. No, person does not have arthritis-like condition record
267	ICD715 C	<b>PERSON HAS SELECTED ARTHRITIS-LIKE CONDITIONS REQUIRING ICDA 715.b1</b> 1. Yes, primary record for which condition data is transferred 2. Yes, condition data not transferred 3. No, person does not have arthritis-like condition record
268	ICD7150 C	<b>PERSON HAS SELECTED ARTHRITIS-LIKE CONDITIONS REQUIRING ICDA 715.0</b> 1. Yes, primary record for which condition data is transferred 2. Yes, condition data not transferred 3. No, person does not have arthritis-like condition record
269	ICD7151 C	<b>PERSON HAS SELECTED ARTHRITIS-LIKE CONDITIONS REQUIRING ICDA 715.1</b> 1. Yes, primary record for which condition data is transferred 2. Yes, condition data not transferred 3. No, person does not have arthritis-like condition record
270	ICD7152 C	<b>PERSON HAS SELECTED ARTHRITIS-LIKE CONDITIONS REQUIRING ICDA 715.2, 715.3</b> 1. Yes, primary record for which condition data is transferred 2. Yes, condition data not transferred 3. No, person does not have arthritis-like condition record
271	ICD716 C	<b>PERSON HAS SELECTED ARTHRITIS-LIKE CONDITIONS REQUIRING ICDA 716.b1</b> 1. Yes, primary record for which condition data is transferred 2. Yes, condition data not transferred 3. No, person does not have arthritis-like condition record
272	ICD7160 C	<b>PERSON HAS SELECTED ARTHRITIS-LIKE CONDITIONS REQUIRING ICDA 716.0</b> 1. Yes, primary record for which condition data is transferred 2. Yes, condition data not transferred 3. No, person does not have arthritis-like condition record
273	ICD7161 C	<b>PERSON HAS SELECTED ARTHRITIS-LIKE CONDITIONS REQUIRING ICDA 716.1</b> 1. Yes, primary record for which condition data is transferred 2. Yes, condition data not transferred 3. No, person does not have arthritis-like condition record
274	ICD717 C	<b>PERSON HAS SELECTED ARTHRITIS-LIKE CONDITIONS REQUIRING ICDA 717.b1, 717.1 - 717.9</b> 1. Yes, primary record for which condition data is transferred 2. Yes, condition data not transferred 3. No, person does not have arthritis-like condition record

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275	ICD718 C	<b>PERSON HAS SELECTED ARTHRITIS-LIKE CONDITIONS REQUIRING ICDA 718</b> 1. Yes, primary record for which condition data is transferred 2. Yes, condition data not transferred 3. No, person does not have arthritis-like condition record
276	ICD7341 C	<b>PERSON HAS SELECTED ARTHRITIS-LIKE CONDITIONS REQUIRING ICDA 734.1</b> 1. Yes, primary record for which condition data is transferred 2. Yes, condition data not transferred 3. No, person does not have arthritis-like condition record
277	ICD7010 C	<b>PERSON HAS SELECTED ARTHRITIS-LIKE CONDITIONS REQUIRING ICDA 701.0</b> 1. Yes, primary record for which condition data is transferred 2. Yes, condition data not transferred 3. No, person does not have arthritis-like condition record
278	ICD7340 C	<b>PERSON HAS SELECTED ARTHRITIS-LIKE CONDITIONS REQUIRING ICDA 734.0</b> 1. Yes, primary record for which condition data is transferred 2. Yes, condition data not transferred 3. No, person does not have arthritis-like condition record
279	ICD6960 C	<b>PERSON HAS SELECTED ARTHRITIS-LIKE CONDITIONS REQUIRING ICDA 696.0 PSORIATIC ANTHROPATHY</b> 1. Yes, primary record for which condition data is transferred 2. Yes, condition data not transferred 3. No, person does not have arthritis-like condition record
280	ICD4460 C	<b>PERSON HAS SELECTED ARTHRITIS-LIKE CONDITIONS REQUIRING ICDA 446.0 POLYARTERITIS AND PERIARTERITIS</b> 1. Yes, primary record for which condition data is transferred 2. Yes, condition data not transferred 3. No, person does not have arthritis-like condition record
281	ICD274 C	<b>PERSON HAS SELECTED ARTHRITIS-LIKE CONDITIONS REQUIRING ICDA 274 GOUT</b> 1. Yes, primary record for which condition data is transferred 2. Yes, condition data not transferred 3. No, person does not have arthritis-like condition record
282	ICD734 C	<b>PERSON HAS SELECTED ARTHRITIS-LIKE CONDITIONS REQUIRING ICDA 734.b1 LUPUS OR SCLERODERMA, NEC</b> 1. Yes, primary record for which condition data is transferred 2. Yes, condition data not transferred 3. No, person does not have arthritis-like condition record
283	ARTHLIKR Recode	<b>PRIMARY ARTHRITIS-LIKE CONDITION RECODE</b> 1. Rheumatoid Arthritis 2. Osteo Arthritis 3. Arthritis unspecified 4. Rheumatism 5. Gout 6. Other Arthritis
284-288	BLANK	BLANK

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289	<b>ONSET</b> C-104	<b>ONSET</b> 1. Last week 2. Week before 3. 2 weeks to 3 months 4. 3-12 months 5. 12+ months
290-323		<b>CONDITION DATA FOR PRIMARY CONDITION</b>
290-291	C-118-171 <b>RESAC2WC</b> C-118-119	<b>CONDITION RESTRICTED ACTIVITY DAYS IN PAST TWO WEEKS</b> 00. None 01-14. Number of days
292-293	<b>BDAY2WC</b> C-120-121	<b>CONDITION BED DAYS IN PAST TWO WEEKS</b> 00. None 01-14. Number of days
294-295	<b>WKSCH2WC</b> C-123-124	<b>CONDITION WORK/SCHOOL LOSS DAYS IN PAST TWO WEEKS</b> 00. None 01-14. Number of days
296	<b>DRSEEN</b> C-135	<b>DOCTOR SEEN FOR THIS CONDITION AT ANY TIME</b> 1. Yes 2. No
297-298	<b>TREAT12M</b> C-137-138	<b>TREATMENT DURING PAST 12 MONTHS (DOCTOR NOT SEEN)</b> 01. Does nothing 02. Medicine 03. Treatment 04. Restraint 05. Medicine and treatment 06. Medicine and restraint 07. treatment and restraint 08. Medicine, treatment and restraint 09. Other 10. DK and Not reported 11. Not applicable - Doctor seen
299-301	C-139-141	<b>INTERVAL BEFORE SEEING DOCTOR - DOCTOR SEEN</b>
299	<b>DRINUNIT</b>	<b>UNIT</b> 1. Discovered by doctor 2. Same day 3. Days 4. Weeks 5. Months 6. Years 7. DK or Not reported 8. Not applicable
300-301	<b>DRINNUM</b>	<b>NUMBER</b> 00. None, DK, NA 01-98. Unit number



290-323		<b>CONDITION DATA FOR PRIMARY CONDITION (continued)</b>
302-303	<b>TREATPRR</b> C-142-143	<b>TREATMENT PRIOR TO SEEING DOCTOR</b> 01. Does nothing 02. Medicine 03. Treatment 04. Restraint 05. Medicine and treatment 06. Medicine and restraint 07. treatment and restraint 08. Medicine, treatment and restraint 09. Other 10. DK and Not reported 11. Not applicable - Doctor seen
304	<b>TREATNOW</b> C-144	<b>TAKEN MEDICINE OR TREATMENT NOW</b> 1. Yes 2. No 3. DK or Not reported 4. Not applicable
305	<b>TREATBDR</b> C-145	<b>MEDICINE OR TREATMENT RECOMMENDED BY DOCTOR</b> 1. Yes 2. No 3. DK or Not reported 4. Not applicable
306	<b>TREATSGL</b> C-146	<b>SURGICAL TREATMENT</b> 1. Yes 2. No 3. DK or Not reported 4. Not applicable
307	<b>HPTLZN</b> C-147	<b>HOSPITALIZATIONS (DOCTOR SEEN)</b> 1. Yes 2. No 3. DK or Not reported 4. Not applicable
308-311		<b>CONDITION DOCTOR VISITS IN PAST 12 MONTHS</b>
308	C-148-151 <b>DV12MDK</b> C-148	<b>KNOWN - UNKNOWN CODE</b> 1. None and known number of visits 2. Unknown and not reported 3. Not applicable (doctor not seen)
309-311	<b>DV12MNUM</b> C-149-151	<b>DOCTOR VISITS - NUMBER</b> 001-998. Number of visits 000. NR, NA or DK
312-315		<b>CONDITION BED DAYS IN PAST 12 MONTHS</b>
312	C-152-155 <b>BD12MDK</b> C-152	<b>KNOWN - UNKNOWN CODE</b> 1. None and known number of visits 2. Unknown and not reported 3. Not applicable (doctor not seen)
313-315	<b>BD12MNUM</b> C-153-155	<b>BED DAYS - NUMBER</b> 000-365. Number

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290-323		CONDITION DATA FOR PRIMARY CONDITION (continued)
316	<b>BOTHER</b> C-156	<b>FREQUENCY OF BOTHER</b> 1. Never 2. All the time 3. Often 4. Once in a while 5. Other 6. DK, not reported
317	<b>BTHRHOW</b> C-157	<b>HOW BOTHERS</b> 1. Never 2. Great deal 3. Some 4. Very little 5. Other 6. DK, not reported
318	<b>BTHRSTIL</b> C-158	<b>STILL HAS CONDITION</b> 1. Yes 2. Cured 3. Under control 4. Other 5. DK, not reported
319	<b>BTHRENG</b> C-159	<b>LENGTH OF TIME WITH CONDITION, IF CURED</b> 1. Less than 1 month 2. 1-3 months 3. 3-6 months 4. 6-9 months 5. 9-12 months 6. 1 year 7. 2+ years 8. DK, not reported 9. Not applicable
320-323		<b>INJURIES</b>
320	<b>ACIWHERE</b> C-165	<b>WHERE DID ACCIDENT HAPPEN?</b> 1. At home - inside 2. At home - outside 3. Street and highway 4. Farm 5. Industrial place 6. School 7. Place of recreation 8. Other 9. DK, not reported bl. No injuries
321-323	<b>ACICLASS</b> C-169-171	<b>CLASS OF ACCIDENT FOR CONDITION WITH TRAUMATIC ORIGIN</b> See attachment
324	<b>STIFFAM</b> 1a	<b>MORNING STIFFNESS</b> 1. Yes 2. No 3. Unknown bl. NA

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325-328	STIFAWHR 1b	HOUR OF DAY STIFFNESS GOES AWAY 0000. Never 0001-1259. Hour and minute 9999. Unknown or not reported blblblbl. NA
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329	STIFAWAP 1b	HOUR STIFFNESS GOES AWAY 1. AM 2. PM 3. Unknown if AM or PM bl. NA
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330-331	STIFLENR 1b,21e	LENGTH OF TIME AFTER ARISING TO HOUR STIFFNESS GOES 01. Less than 15 minutes 02. 15-29 minutes 03. 30-44 minutes 04. 45-59 minutes 05. 1 hour to less than 2 hours 06. 2 hours to less than 3 hours 07. 3 hours to less than 4 hours 08. 4-6 hours 09. 7+ hours 10. Never 11. Unknown or not reported bl. NA
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332	STIFWRIS 1c	STIFFNESS IN WRISTS 1. Yes 2. No 3. Unknown bl. NA
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333	JOINPAIN 2a	PAIN IN JOINTS ON MOVEMENT 1. Yes 2. No 3. Unknown or not reported bl. NA
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334	WRISPAIN 2b	WRISTS PAINFUL ON MOVEMENT 1. Yes 2. No 3. Unknown or not reported bl. NA
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335	JOINSWEL 3a	JOINT SWELLING 1. Yes 2. No 3. Unknown or not reported bl. NA
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336	WRISWEL 3b	WRIST SWELLING 1. Yes 2. No 3. Unknown or not reported bl. NA
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337	<b>JOINTEND</b> 4a	<b>JOINT TENDERNESS</b> 1. Yes 2. No 3. Unknown or not reported bl. NA
338	<b>WRISTOUC</b> 4b	<b>WRISTS PAINFUL WHEN TOUCHED</b> 1. Yes 2. No 3. Unknown or not reported bl. NA
339	<b>WRISAFFE</b> 5	<b>WHICH WRIST AFFECTED</b> 0. Not affected 1. Right 2. Left 3. Both 4. DK which 5. Unknown if affected bl. NA
340-341	<b>JOINSYMR</b> Recode 1	<b>SUMMARY OF JOINT SYMPTOMS RECODE 1</b> 01. Morning stiffness only 02. Pain only 03. Swelling only 04. Tenderness only 05. Morning stiffness and pain 06. Morning stiffness and swelling 07. Morning stiffness and tenderness 08. Pain and swelling 09. Pain and tenderness 10. Swelling and tenderness 11. Morning stiffness, pain, swelling 12. Morning stiffness, swelling, tenderness 13. Morning stiffness, pain, tenderness 14. Pain, swelling, tenderness 15. Morning stiffness, pain, swelling, tenderness 16. None of above symptoms 17. DK in one or more of above symptoms 18. DK if any of above symptoms present 19. NA (Dummy records)

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342-343	<b>WRISYMR</b> Recode 2	<b>SUMMARY OF WRIST SYMPTOMS RECODE 2</b> 01. Stiffness 02. Pain on movement 03. Swelling only 04. Tenderness 05. Stiffness and pain on movement 06. Stiffness and swelling 07. Stiffness and tenderness 08. Pain and swelling 09. Pain and tenderness 10. Swelling and tenderness 11. Stiffness, pain, swelling 12. Stiffness, swelling, tenderness 13. Stiffness, pain, tenderness 14. Pain, swelling, tenderness 15. Stiffness, pain, swelling, tenderness 16. Wrists not affected 17. DK in one or more of above symptoms 18. DK if any of above symptoms present 19. NA (Dummy records)
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344	<b>FINGER</b> 6a	<b>FINGERS AFFECTED</b> 1. Yes 2. No 3. Unknown b1. NA
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**345-348 JOINTS AFFECTED IN RIGHT HAND**

345	6b <b>RFNGRTIP</b>	<b>FINGER TIP AND FINGER</b> 0. Not affected 1. Joint affected 2. Unknown if affected b1. NA
346	<b>RFNGRBEN</b>	<b>FINGER BEND</b> 0. Not affected 1. Joint affected 2. Unknown if affected b1. NA
347	<b>RKNUCKLE</b>	<b>KNUCKLE</b> 0. Not affected 1. Joint affected 2. Unknown if affected b1. NA
348	<b>THJTWRTIT</b>	<b>THUMB JOINT AND WRIST</b> 0. Not affected 1. Joint affected 2. Unknown if affected b1. NA

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**349-352 JOINTS AFFECTED IN LEFT HAND**

6c

- 349 LFNGRTIP FINGER TIP AND FINGER**  
0. Not affected  
1. Joint affected  
2. Unknown if affected  
bl. NA
- 350 LFNGRBEN FINGER BEND**  
0. Not affected  
1. Joint affected  
2. Unknown if affected  
bl. NA
- 351 LKNUCKLE KNUCKLE**  
0. Not affected  
1. Joint affected  
2. Unknown if affected  
bl. NA
- 352 THUMJWRT THUMB JOINT AND WRIST**  
0. Not affected  
1. Joint affected  
2. Unknown if affected  
bl. NA
- 

- 353 RGTHAND RIGHT HAND AFFECTED?**  
6d  
0. Fingers not affected  
1. Right  
2. Left  
3. Both  
4. Unknown  
bl. NA
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354-355

F3JOINTR

Recode 3

## SUMMARY OF THREE FINGER JOINTS AFFECTED RECODE 3

00. None affected
01. Right fingertip and finger
02. Right fingerbend
03. 02 and 01
04. Right knuckle
05. 04 and 01
06. 04 and 02
07. 04,02 and 01
08. Left fingertip and finger
09. 08 and 01
10. 08 and 02
11. 08,02 and 01
12. 08 and 04
13. 08,04 and 01
14. 08,04 and 02
15. 08,04,02 and 01
16. Left fingerbend
17. 16 and 01
18. 16 and 02
19. 16,02 and 01
20. 16 and 04
21. 16,04 and 01
22. 16,04 and 02
23. 16,04,02 and 01
24. 16 and 08
25. 16,08 and 01
26. 16,08 and 02
27. 16,08,02 and 01
28. 16,08 and 04
29. 16,08,04 and 01
30. 16,08,04 and 02
31. 16,08,04,02 and 01
32. Left knuckle
33. 32 and 01
34. 32 and 02
35. 32,02 and 01
36. 32 and 04
37. 32,04 and 01
38. 32,04 and 02
39. 32,04,02 and 01
40. 32 and 08
41. 32,08 and 01
42. 32,08 and 02
43. 32,08,02 and 01
44. 32,08 and 04
45. 32,08,04 and 01
46. 32,08,04 and 02
47. 32,08,04,02 and 01
48. 32 and 16
49. 32,16 and 01
50. 32,16 and 02
51. 32,16,02 and 01
52. 32,16 and 04
53. 32,16,04 and 01
54. 32,16,04 and 02
55. 32,16,04,02 and 01
56. 32,16 and 08
57. 32,16,08 and 01
58. 32,16,08 and 02

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354-355	F3JOINTR	<b>SUMMARY OF THREE FINGER JOINTS AFFECTED RECODE 3</b> (continued)
		59. 32,16,08,02 and 01
		60. 32,16,08 and 04
		61. 32,16,08,04 and 01
		62. 32,16,08,04 and 02
		63. 32,16,08,04,02 and 01
		99. NA

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356	<b>ELBOWS</b> 7a,b	<b>ELBOWS AFFECTED?</b>
		1. No
		2. Right
		3. Left
		4. Both
		5. Affected, DK which
		6. Unknown
		b1. NA

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357	<b>KNEES</b> 8a,b	<b>KNEES AFFECTED?</b>
		1. No
		2. Right
		3. Left
		4. Both
		5. Affected, DK which
		6. Unknown
		b1. NA

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358-359	<b>FWENAFFR</b> Recode 4	<b>SUMMARY OF AFFECTED JOINTS IN FINGERS, WRISTS, ELBOWS, AND KNEES RECODE 4</b>
		01. Wrists only
		02. Fingers only
		03. Elbows only
		04. Knees only
		05. Wrists and fingers
		06. Wrists and elbows
		07. Wrists and knees
		08. Fingers and elbows
		09. Fingers and knees
		10. Elbows and knees
		11. Wrists, fingers and elbows
		12. Wrists, elbows and knees
		13. Wrists, fingers and knees
		14. Fingers, elbows and knees
		15. Wrists, fingers, elbows, knees
		16. Not affected
		17. DK if affected for 1 or more of joints
		18. DK if any joints affected
		19. NA

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360	<b>OLDINJPB</b> 9a	<b>PRESENT JOINT PROBLEM FROM OLD INJURY</b>
		1. Yes
		2. No
		3. Unknown
		b1. NA

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361	<b>ACIWHENI</b> 9b	<b>WHEN ACCIDENT HAPPENED</b> 0. No old injury 1. During PAST 12 MONTHS 2. 12 months or more ago 3. Unknown bl. NA
362	<b>ACIJJOINT</b> 9c	<b>JOINTS HURT IN ACCIDENT</b> 0. No old injury 1. Yes, joint known 2. Yes, but joints unknown 3. Unknown bl. NA
363	<b>ACINECKJ</b> 9c	<b>NECK HURT IN ACCIDENT</b> 0. No old injury 1. Yes 2. Unknown bl. NA
364	<b>ACIBACKJ</b> 9c	<b>BACK HURT IN ACCIDENT</b> 0. No old injury 1. Only upper 2. Only middle 3. Only lower 4. Upper and middle 5. Upper and lower 6. Middle and lower 7. Upper, middle and lower 8. Back hurts, DK which part 9. Unknown if back hurt bl. NA
365	<b>ACIANKLE</b> 9c	<b>ANKLES HURT IN ACCIDENT</b> 0. No old injury 1. Right only 2. Left only 3. Both hurt 4. Ankle hurts, DK which one 5. DK if ankles hurt bl. NA
366	<b>ACIELBOW</b> 9c	<b>ELBOWS HURT IN ACCIDENT</b> 0. No old injury 1. Right only 2. Left only 3. Both hurt 4. Elbow hurts, DK which one 5. DK if elbows hurt bl. NA

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367	<b>ACIFEET</b> 9c	<b>FEET HURT IN ACCIDENT</b> 0. No old injury 1. Right only 2. Left only 3. Both hurt 4. Foot hurts, DK which one 5. DK if feet hurt bl. NA
368	<b>ACIHANDS</b> 9c	<b>HANDS HURT IN ACCIDENT</b> 0. No old injury 1. Right only 2. Left only 3. Both hurt 4. Hand hurts, DK which one 5. DK if hands hurt bl. NA
369	<b>ACIHIPS</b> 9c	<b>HIPS HURT IN ACCIDENT</b> 0. No old injury 1. Right only 2. Left only 3. Both hurt 4. Hip hurts, DK which one 5. DK if hips hurt bl. NA
370	<b>ACIKNEES</b> 9c	<b>KNEES HURT IN ACCIDENT</b> 0. No old injury 1. Right only 2. Left only 3. Both hurt 4. Knee hurts, DK which one 5. DK if knees hurt bl. NA
371	<b>ACISHDER</b> 9c	<b>SHOULDERS HURT IN ACCIDENT</b> 0. No old injury 1. Right only 2. Left only 3. Both hurt 4. Shoulder hurts, DK which one 5. DK if shoulders hurt bl. NA
372	<b>ACIWRIST</b> 9c	<b>WRISTS HURT IN ACCIDENT</b> 0. No old injury 1. Right only 2. Left only 3. Both hurt 4. Wrist hurts, DK which one 5. DK if wrists hurt bl. NA

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373	<b>ARTHDIAG</b> 9c	<b>FIRST TO DIAGNOSE ARTHRITIS</b> 1. Medical doctor 2. Chiropractor 3. Friend 4. Relative 5. Self diagnosis 6. Other 7. Unknown bl. NA
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374-375	<b>DIAGWHEN</b> 11	<b>WHEN A DOCTOR DIAGNOSED ARTHRITIS</b> 00. Less than 12 months ago 01. 1 year to less than 2 years ago 02. 2 year to less than 3 years ago 03. 3 year to less than 4 years ago 04. 4 year to less than 5 years ago 05. 5-9 years 06. 10+ years 07. DK when 08. Doctor never said it was arthritis 09. Doctor never seen 10. DK blbl. NA
<hr/>		
376	<b>BOTHRMOS</b> 12	<b>WHEN BOTHERED MOST</b> 1. During PAST 12 MONTHS 2. When first noticed it 3. Some other time 4. Unknown bl. NA
<hr/>		
377	<b>FOOTDR</b> 13a	<b>TREATED BY FOOT DOCTOR</b> 1. Yes 2. No 3. Unknown bl. NA
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378	<b>PHYTHERA</b> 13b	<b>TREATED BY PHYSICAL THERAPIST</b> 1. Yes 2. No 3. Unknown bl. NA
<hr/>		
379	<b>OCCTHERA</b> 13c	<b>TREATED BY OCCUPATIONAL THERAPIST</b> 1. Yes 2. No 3. Unknown bl. NA
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380	<b>SOCWRKER</b> 14	<b>SOCIAL WORKER SEEN</b> 1. No 2. Hospital social worker 3. Other social worker 4. Social worker, DK type 5. Unknown bl. NA

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381	<b>SPLCAST</b> 15a	<b>SPLINTS OR CASTS USED</b> 1. Never 2. Yes, now used 3. Used, but not now 4. Used, but DK if now used 5. Unknown if ever used bl. NA
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382-383	<b>SPCSWHER</b> 15a(2)	<b>WHERE SPLINTS OR CASTS NOW USED</b> 00. Hand 01. Wrist 02. Elbow 03. Combinations of 0-2 04. Knee 05. Ankle 06. Foot 07. Combinations of 4-6 08. Both upper and lower extremities 09. Other 10. Unknown blbl. NA
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384	<b>BRACES</b> 15b	<b>BRACES USED</b> 1. Never used 2. Yes, now used 3. Used, but not now 4. Used, but DK if now used 5. Unknown if ever used bl. NA
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385-386	<b>BRACWHER</b> 15b(2)	<b>WHERE BRACES USED</b> 00. Hand 01. Wrist 02. Elbow 03. Combinations of 0-2 04. Knee 05. Ankle 06. Foot 07. Combinations of 4-6 08. Both upper and lower extremities 09. Other 10. Unknown blbl. NA
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387	<b>DIATHERM</b> 15c	<b>DIATHERMY OR PARAFFIN USED</b> 1. Never used 2. Yes, now used 3. Used, but not now 4. Used, but DK if now used 5. Unknown if ever used bl. NA
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388	<b>HOTPBH</b> 15d	<b>HOT PACKS, HOT BATHS, HEATING PAD</b> 1. Never used 2. Yes, now used 3. Used, but not now 4. Used, but DK if now used 5. Unknown if ever used bl. NA
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389	<b>COLDPK</b> 15e	<b>COLD PACKS OR ICE TREATMENT</b> 1. Never used 2. Yes, now used 3. Used, but not now 4. Used, but DK if now used 5. Unknown if ever used bl. NA
390	<b>DRREST</b> 15f	<b>REST RECOMMENDED BY A DOCTOR</b> 1. Never used 2. Yes, now used 3. Used, but not now 4. Used, but DK if now used 5. Unknown if ever used bl. NA
391	<b>EXERCISE</b> 15g	<b>EXERCISES RECOMMENDED BY A DOCTOR OR PHYSICAL THERAPIST</b> 1. Never used 2. Yes, now used 3. Used, but not now 4. Used, but DK if now used 5. Unknown if ever used bl. NA
392	<b>ASPIRIN</b> 16a	<b>NOW TAKING ASPIRIN, ANACIN, OR BUFFERIN</b> 1. Yes 2. No 3. Unknown bl. NA
393	<b>ASPDAIL</b> 16b	<b>ASPIRIN, ANACIN, OR BUFFERIN TAKEN DAILY</b> 1. Yes 2. No 3. Unknown bl. NA
394-395	<b>ASPNUM</b> 16c	<b>NUMBER TAKEN DAILY</b> 01-08. 1-8 tablets 09. 9+ tablets 10. Unknown blbl. NA
396	<b>SAMEAMT</b> 16d	<b>SAME AMOUNT EACH DAY</b> 1. Yes 2. No 3. Unknown bl. NA

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397-398	<b>ASPTIME</b>	<b>LENGTH OF TIME TAKING ASPIRIN DAILY</b>
16e		00. Less than 1 month
		01. 1-3 months
		02. 4-6 months
		03. 7-12 months
		04. 1 year
		05. 2 years
		06. 3 years
		07. 4 years
		08. 5-9 years
		09. 10+ years
		10. Unknown
		blbl. NA

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399	<b>INJECTN</b>	<b>NOW TAKING ANY INJECTIONS</b>
17a		1. Yes
		2. No
		3. Unknown
		bl. NA

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400	<b>GOLDSHOT</b>	<b>TAKING 'GOLD' SHOTS</b>
17b		0. Not taking injections
		1. Yes
		2. No
		3. Unknown
		bl. NA

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401	<b>PRESBMED</b>	<b>TAKING PRESCRIBED MEDICINE NOW</b>
18a		1. Yes
		2. No
		3. Unknown
		bl. NA

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402-405		<b>TYPES OF PRESCRIBED MEDICINE TAKEN</b>
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18b		
402	<b>TAKETYP1</b>	<b>TYPE TAKEN 1</b>
		0. No medicine
		1. Phenylbutazones
		2. Steroids
		3. Indocin
		4. Other selected analgesics
		5. Aspirin and aspirin compounds not listed
		6. Tranquilizers, muscle relaxants
		7. Uricosuric drugs
		8. Other
		9. Unknown type
		Bl. Not reported

403	<b>TAKETYP2</b>	<b>TYPE TAKEN 2</b>
		0. No medicine
		1. Phenylbutazones
		2. Steroids
		3. Indocin
		4. Other selected analgesics
		5. Aspirin and aspirin compounds not listed
		6. Tranquilizers, muscle relaxants
		7. Uricosuric drugs
		8. Other
		9. Unknown type
		Bl. Not reported

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**402-405** **TYPES OF PRESCRIBED MEDICINE TAKEN (continued)**

- 404**      **TAKETYP3**      **TYPE TAKEN 3**  
0. No medicine  
1. Phenylbutazones  
2. Steroids  
3. Indocin  
4. Other selected analgesics  
5. Aspirin and aspirin compounds not listed  
6. Tranquilizers, muscle relaxants  
7. Uricosuric drugs  
8. Other  
9. Unknown type  
Bl. Not reported
- 405**      **TAKETYP4**      **TYPE TAKEN 4**  
0. No medicine  
1. Phenylbutazones  
2. Steroids  
3. Indocin  
4. Other selected analgesics  
5. Aspirin and aspirin compounds not listed  
6. Tranquilizers, muscle relaxants  
7. Uricosuric drugs  
8. Other  
9. Unknown type  
Bl. Not reported
- 

**406-415**      **SUMMARY OF ASPIRIN AND OTHER DRUGS RECOMMENDED BY DOCTOR**

- Recode 5
- 406**      **TKGASPIR**      **TAKING ASPIRIN**  
0. No  
1. Yes, 1-3 daily and unknown amount  
2. Yes, 4-5 daily  
3. Yes, 6-7 daily  
4. Yes, 6 or more daily  
5. DK  
bl. NA
- 407**      **TKGPHENY**      **TAKING PHENYLBUTAZONES AS REMEDY DURING PAST 12 MONTHS**  
0. No  
1. Yes  
2. DK  
3. DK whether taking medicine  
bl. NA
- 408**      **TKGSTERO**      **TAKING STEROIDS AS REMEDY DURING PAST 12 MONTHS**  
0. No  
1. Yes  
2. DK  
3. DK whether taking medicine  
bl. NA
- 409**      **TKGINDOC**      **TAKING INDOCIN AS REMEDY DURING PAST 12 MONTHS**  
0. No  
1. Yes  
2. DK  
3. DK whether taking medicine  
bl. NA

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406-415		<b>SUMMARY OF ASPIRIN AND OTHER DRUGS RECOMMENDED BY DOCTOR (continued)</b>
410	TKGANALG	<b>TAKING OTHER SELECTED ANALGESICS AS REMEDY DURING PAST 12 MONTHS</b> 0. No 1. Yes 2. DK 3. DK whether taking medicine bl. NA
411	ASPIRCPD	<b>TAKING ASPIRIN AND ASPIRIN COMPOUNDS NOT LISTED AS REMEDY DURING PAST 12 MONTHS</b> 0. No 1. Yes 2. DK 3. DK whether taking medicine bl. NA
412	TKGTRANQ	<b>TAKING TRANQUILIZERS, MUSCLE RELAXANTS AS REMEDY DURING PAST 12 MONTHS</b> 0. No 1. Yes 2. DK 3. DK whether taking medicine bl. NA
413	TKGURICO	<b>TAKING URICOSURIC DRUGS AS REMEDY DURING PAST 12 MONTHS</b> 0. No 1. Yes 2. DK 3. DK whether taking medicine bl. NA
414	TKGOTHER	<b>TAKING OTHER AS REMEDY DURING PAST 12 MONTHS</b> 0. No 1. Yes 2. DK 3. DK whether taking medicine bl. NA
415	TKGDKTYP	<b>TAKING UNKNOWN TYPE AS REMEDY DURING PAST 12 MONTHS</b> 0. No 1. Yes 2. DK 3. DK whether taking medicine bl. NA
<hr/>		
416-417	<b>SUMMEDIC</b> Recode 6	<b>SUM OF MEDICINES RECOMMENDED BY MEDICAL DOCTOR (EXCLUDING LISTED ASPIRIN)</b> 00. None 01-04. Medicines 05. DK if medicine taken now 14. 3 known 1 unknown 15. 2 known 1 unknown 16. 1 known 1 unknown 17. 1 unknown blbl. NA
<hr/>		
418	<b>NOTRECOM</b> 19a	<b>USED REMEDIES NOT RECOMMENDED BY DOCTOR</b> 1. Yes 2. No 3. Unknown bl. Nor reported

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419	<b>FIRSTYPE</b> 19b	<b>FIRST TYPE USED</b> 0. No remedies 1. Topicals 2. Internals - analgesics 3. Internals - vitamins 4. Physical agents 5. Honey remedies 6. Other exotic remedies 7. Others 8. DK if remedy used 9. Unknown bl. Not reported
420	<b>FRTYP12M</b> 19b	<b>FIRST TYPE USED IN PAST 12 MONTHS</b> 0. No remedies 1. Yes 2. No 3. DK if remedy used 4. Unknown bl. Not reported
421	<b>FRTYPMDT</b> 19b	<b>FIRST TYPE DOCTOR TALKED TO ABOUT</b> 0. No remedies 1. Yes 2. No 3. DK if remedy used 4. Unknown bl. Not reported
422	<b>SECONTYP</b> 19c	<b>SECOND TYPE USED</b> 0. No remedies 1. Topicals 2. Internals - analgesics 3. Internals - vitamins 4. Physical agents 5. Honey remedies 6. Other exotic remedies 7. Others 8. DK if remedy used 9. Unknown bl. Not reported
423	<b>SDTYP12M</b> 19c	<b>SECOND TYPE USED IN PAST 12 MONTHS</b> 0. No remedies 1. Yes 2. No 3. DK if remedy used 4. Unknown bl. Not reported
424	<b>SDTYPMDT</b> 19c	<b>SECOND TYPE DOCTOR TALKED TO ABOUT</b> 0. No remedies 1. Yes 2. No 3. DK if remedy used 4. Unknown bl. Not reported

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425	<b>THIRDTYP</b> 19c	<b>THIRD TYPE USED</b> 0. No remedies 1. Topicals 2. Internals - analgesics 3. Internals - vitamins 4. Physical agents 5. Honey remedies 6. Other exotic remedies 7. Others 8. DK if remedy used 9. Unknown bl. Not reported
426	<b>TDTYP12M</b> 19c	<b>THIRD TYPE USED IN PAST 12 MONTHS</b> 0. No remedies 1. Yes 2. No 3. DK if remedy used 4. Unknown bl. Not reported
427	<b>TDTYPMDT</b> 19c	<b>THIRD TYPE DOCTOR TALKED TO ABOUT</b> 0. No remedies 1. Yes 2. No 3. DK if remedy used 4. Unknown bl. Not reported
428	<b>FOURTTYP</b> 19c	<b>FOURTH TYPE USED</b> 0. No remedies 1. Topicals 2. Internals - analgesics 3. Internals - vitamins 4. Physical agents 5. Honey remedies 6. Other exotic remedies 7. Others 8. DK if remedy used 9. Unknown bl. Not reported
429	<b>FRTTP12M</b> 19c	<b>FOURTH TYPE USED IN PAST 12 MONTHS</b> 0. No remedies 1. Yes 2. No 3. DK if remedy used 4. Unknown bl. Not reported
430	<b>FRTTPMDT</b> 19c	<b>FOURTH TYPE DOCTOR TALKED TO ABOUT</b> 0. No remedies 1. Yes 2. No 3. DK if remedy used 4. Unknown bl. Not reported

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| 431 | <b>CARHELP</b><br>20a | <b>NEED HELP IN GETTING IN AND OUT OF AN AUTOMOBILE</b><br>1. No<br>2. Yes - a person<br>3. Yes - an aid<br>4. Yes - both<br>5. Yes - DK which<br>6. Unknown<br>bl. NA |
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- |     |                       |   |
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| 432 | <b>STRHELP</b><br>20b | <b>NEED HELP GOING UP OR DOWN STAIRS</b><br>1. No<br>2. Yes - a person<br>3. Yes - an aid<br>4. Yes - both<br>5. Yes - DK which<br>6. Unknown<br>bl. NA |
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| 433 | <b>TUBHELP</b><br>20c | <b>NEED HELP IN GETTING IN AND OUT OF A TUB OR SHOWER</b><br>1. No<br>2. Yes - a person<br>3. Yes - an aid<br>4. Yes - both<br>5. Yes - DK which<br>6. Unknown<br>bl. NA |
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- |     |                       |   |
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| 434 | <b>DRSHELP</b><br>20d | <b>NEED HELP TO COMPLETELY DRESS</b><br>1. No<br>2. Yes - a person<br>3. Yes - an aid<br>4. Yes - both<br>5. Yes - DK which<br>6. Unknown<br>bl. NA |
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| 435 | <b>EATHELP</b><br>20e | <b>NEED HELP TO FEED YOURSELF A COMPLETE MEAL</b><br>1. No<br>2. Yes - a person<br>3. Yes - an aid<br>4. Yes - both<br>5. Yes - DK which<br>6. Unknown<br>bl. NA |
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- |     |                       |  |
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| 436 | <b>BEDHELP</b><br>20f | <b>NEED HELP TO ROLL ONTO SIDE IN BED</b><br>1. No<br>2. Yes - a person<br>3. Yes - an aid<br>4. Yes - both<br>5. Yes - DK which<br>6. Unknown<br>bl. NA |
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437	<b>DAYREST</b> 21a	<b>REST DURING THE DAY</b> 1. yes 2. No 3. Unknown bl. NA
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438-441	<b>DAYHOUR</b> 21b	<b>HOUR OF DAY</b> 0000. Does not rest 0001-1259. Hour and minute 8888. DK if rest 9999. Unknown blblblbl. NA
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442	<b>AMPMREST</b> 21b	<b>AM OR PM</b> 0. Does not rest 1. AM 2. PM 3. DK if rest 4. DK which bl. NA
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443	<b>EVRYREST</b> 21c	<b>REST SOME EVERY DAY</b> 0. Does not rest 1. Yes 2. No 3. DK if rest 4. Unknown bl. NA
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444-445	<b>LENGREST</b> 21d	<b>LENGTH OF TIME REST EACH DAY</b> 00. Does not rest or rests but not every day 01. Less than 15 minutes 02. 15-29 minutes 03. 30-44 minutes 04. 45-59 minutes 05. 1 hour 06. 2 hours 07. 3 hours 08. 4 hours 09. 5 or more hours 10. Unknown 11. DK if rest, DK if rest daily blbl. NA
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446-449	<b>GETUPTIM</b> 21e	<b>HOUR OF DAY USUALLY GETS UP</b> 0001-2459. Hour and minute 3000. Confined to bed 9999. Unknown blblblbl. NA
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450	<b>CARENOW</b> 22a	<b>PRESENTLY UNDER CARE</b> 1. Yes 2. No 3. Unknown bl. NA
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451	<b>YNOCARE</b> 22b	<b>REASON NOT UNDER CARE</b> 0. Under care 1. Arthritis not severe enough 2. No one can do anything for it 3. Can't afford treatment 4. Don't go to doctors 5. Transportation difficulties 6. Other 7. Unknown bl. NA
452-461	22c	<b>PERSON 1 PROVIDING CARE</b>
452	<b>PX1CARE</b> (1)	<b>PERSON 1 PROVIDING CARE</b> 0. Not under care 1. Medical doctor - rheumatologist 2. Medical doctor - other 3. Chiropractor 4. Physical therapist 5. Other health worker 6. Non health worker 7. Unknown bl. NA
453	<b>PX1WHY</b> (2)	<b>REASON FOR GOING TO PERSON 1</b> 0. Not under care 1. Family doctor 2. Referred by doctor 3. Referred by someone else 4. Arthritis specialist 5. Office located nearby 6. Treatment is inexpensive 7. Other 8. Unknown bl. NA
454	<b>PX1MDWHO</b> (3)	<b>KIND OF MEDICAL DOCTOR - PERSON 1</b> 0. Not under care 1. General practitioner 2. Rheumatologist -- list 3. Arthritis specialist 4. Internist 5. Orthopedist 6. Surgeon 7. Other specialist 8. Specialist, DK kind 9. Unknown if specialist or GP bl. NA
455	<b>PX1INTVL</b> (4)	<b>INTERVAL SINCE LAST VISIT TO PERSON 1</b> 0. Not under care 1. PAST TWO WEEKS 2. 3 weeks 3. 1 month 4. 2 months 5. 3 months 6. 4-6 months 7. Over 6-12 months 8. 1+ years 9. Unknown bl. NA

452-461 PERSON 1 PROVIDING CARE (continued)

456 PX1PLACE (5) PLACE OF LAST VISIT  
 0. Not under care  
 1. Doctor's office  
 2. Home  
 3. Hospital out-patient clinic  
 4. Hospital emergency room  
 5. Other clinic  
 6. Clinic, DK kind  
 7. Other  
 8. Unknown  
 bl. NA

457-460 (6) LENGTH OF TIME TO GET TO PERSON 1

457-458 PX1HRLN HOUR  
 00-87. Hours  
 88. Not under care  
 99. Unknown  
 blbl. NA

459-460 PX1MMLN MINUTE  
 00-60. Minutes  
 88. Not under care  
 99. Unknown  
 blbl. NA

461 PX1TRANS 22c(7) TYPE OF TRANSPORTATION TO GET TO PERSON 1  
 0. Not under care  
 1. Bus or subway  
 2. Taxi  
 3. Private car  
 4. Walked  
 5. Train  
 6. Other  
 7. Combinations of 1,2,5,6 - public  
 8. Combination public and private  
 9. Unknown  
 bl. NA

462-471 PERSON 2 PROVIDING CARE

22  
 462 PX2CARE PERSON 2 PROVIDING CARE  
 0. Not under care  
 1. Medical doctor - rheumatologist  
 2. Medical doctor - other  
 3. Chiropractor  
 4. Physical therapist  
 5. Other health worker  
 6. Non health worker  
 7. Unknown  
 bl. NA

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462-471                    **PERSON 2 PROVIDING CARE** (continued)

463            **PX2WHY**                    **REASON FOR GOING TO PERSON 2**  
0. Not under care  
1. Family doctor  
2. Referred by doctor  
3. Referred by someone else  
4. Arthritis specialist  
5. Office located nearby  
6. Treatment is inexpensive  
7. Other  
8. Unknown  
bl. NA

464            **PX2MDWHO**                    **KIND OF MEDICAL DOCTOR - PERSON 2**  
0. Not under care  
1. General practitioner  
2. Rheumatologist -- list  
3. Arthritis specialist  
4. Internist  
5. Orthopedist  
6. Surgeon  
7. Other specialist  
8. Specialist, DK kind  
9. Unknown if specialist or GP  
bl. NA

465            **PX2INTVL**                    **INTERVAL SINCE LAST VISIT TO PERSON 2**  
0. Not under care  
1. PAST TWO WEEKS  
2. 3 weeks  
3. 1 month  
4. 2 months  
5. 3 months  
6. 4-6 months  
7. Over 6-12 months  
8. 1+ years  
9. Unknown  
bl. NA

466            **PX2PLACE**                    **PLACE OF LAST VISIT**  
0. Not under care  
1. Doctor's office  
2. Home  
3. Hospital out-patient clinic  
4. Hospital emergency room  
5. Other clinic  
6. Clinic, DK kind  
7. Other  
8. Unknown  
bl. NA

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462-471                    **PERSON 2 PROVIDING CARE** (continued)

467-470                    **LENGTH OF TIME TO GET TO PERSON 2**

467-468    **PX2HRLLEN**            **HOUR**  
00-87. Hours  
88. Not under care  
99. Unknown  
blbl. NA

469-470    **PX2MMLLEN**            **MINUTE**  
00-60. Minutes  
88. Not under care  
99. Unknown  
blbl. NA

471            **PX2TRANS**            **TYPE OF TRANSPORTATION TO GET TO PERSON 2**  
0. Not under care  
1. Bus or subway  
2. Taxi  
3. Private car  
4. Walked  
5. Train  
6. Other  
7. Combinations of 1,2,5,6 - public  
8. Combination public and private  
9. Unknown  
bl. NA

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472-481                    **PERSON 3 PROVIDING CARE**

22

472            **PX3CARE**            **PERSON 3 PROVIDING CARE**  
0. Not under care  
1. Medical doctor - rheumatologist  
2. Medical doctor - other  
3. Chiropractor  
4. Physical therapist  
5. Other health worker  
6. Non health worker  
7. Unknown  
bl. NA

473            **PX3WHY**            **REASON FOR GOING TO PERSON 3**  
0. Not under care  
1. Family doctor  
2. Referred by doctor  
3. Referred by someone else  
4. Arthritis specialist  
5. Office located nearby  
6. Treatment is inexpensive  
7. Other  
8. Unknown  
bl. NA



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472-481                    **PERSON 3 PROVIDING CARE (continued)**

474            **PX3MDWHO            KIND OF MEDICAL DOCTOR - PERSON 3**  
0. Not under care  
1. General practitioner  
2. Rheumatologist -- list  
3. Arthritis specialist  
4. Internist  
5. Orthopedist  
6. Surgeon  
7. Other specialist  
8. Specialist, DK kind  
9. Unknown if specialist or GP  
bl. NA

475            **PX3INTVL            INTERVAL SINCE LAST VISIT TO PERSON 3**  
0. Not under care  
1. PAST TWO WEEKS  
2. 3 weeks  
3. 1 month  
4. 2 months  
5. 3 months  
6. 4-6 months  
7. Over 6-12 months  
8. 1+ years  
9. Unknown  
bl. NA

476            **PX3PLACE            PLACE OF LAST VISIT**  
0. Not under care  
1. Doctor's office  
2. Home  
3. Hospital out-patient clinic  
4. Hospital emergency room  
5. Other clinic  
6. Clinic, DK kind  
7. Other  
8. Unknown  
bl. NA

477-480                    **LENGTH OF TIME TO GET TO PERSON 3**

477-478            **PX3HRLN            HOUR**  
00-87. Hours  
88. Not under care  
99. Unknown  
blbl. NA

479-480            **PX3MMLN            MINUTE**  
00-60. Minutes  
88. Not under care  
99. Unknown  
blbl. NA

472-481

PERSON 3 PROVIDING CARE (continued)

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481	PX3TRANS	<b>TYPE OF TRANSPORTATION TO GET TO PERSON 3</b>
		0. Not under care
		1. Bus or subway
		2. Taxi
		3. Private car
		4. Walked
		5. Train
		6. Other
		7. Combinations of 1,2,5,6 - public
		8. Combination public and private
		9. Unknown
		bl. NA

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482	JOBTRAIN 23	<b>SPECIAL JOB TRAINING BECAUSE OF ARTHRITIS</b>
		1. Yes
		2. No
		3. Unknown
		bl. NA

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483	JOBLEFT 24a	<b>CHANGED OR LEFT A JOB BECAUSE OF ARTHRITIS</b>
		1. Yes
		2. No
		3. Unknown
		bl. NA

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484	WORKEDON 24b	<b>HAVE YOU WORKED SINCE ONSET OF ARTHRITIS</b>
		1. Yes
		2. No
		3. Unknown
		bl. NA

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485	INCOMEDN 24c	<b>PERSONAL INCOME DECREASED BECAUSE OF ARTHRITIS</b>
		0. Never worked since onset
		1. Yes
		2. No
		3. Unknown
		bl. NA

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486	AFHEAR 25a	<b>HEARD OF ARTHRITIS FOUNDATION</b>
		1. Yes
		2. No
		3. Unknown
		bl. NA

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487	AFLEARN 25b	<b>HOW LEARNED ABOUT ARTHRITIS FOUNDATION</b>
		0. Never heard of AF
		1. Mass media
		2. Contacted by foundation
		3. Told about it by doctor
		4. Told about it by other health worker
		5. Told about it by non-health worker
		6. Other
		7. Unknown
		bl. NA

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488	<b>AFHELP</b> 25c	<b>RECEIVED HELP OR INFORMATION FROM FOUNDATION</b> 0. Never heard of AF 1. Yes 2. No 3. Unknown bl. NA
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489	<b>AFHKIND</b> 25d	<b>KIND OF HELP OR INFORMATION RECEIVED</b> 0. Never heard of AF 1. Literature about arthritis 2. Referral made about medical care 3. Referral made about vocational or rehabilitative 4. Financial assistance 5. Received treatment 6. Received equipment 7. Other 8. Never received help 9. Unknown or DK kind bl. NA
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490-492	<b>COMTIME</b>	<b>TOTAL TIME REQUIRED TO COMPLETE SUPPLEMENT</b> 001-998. Minutes 999. Unknown blblbl. Not reported
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493	<b>REMEDYR1</b> Recode	<b>REMEDY 1 USED DURING PAST 12 MONTHS</b> 0. No topicals past 12 months 1. 1 topical past 12 months & DR talked to 2. 1 topical past 12 months & DR not talked to 3. 2 topicals past 12 months & DR talked to once at least 4. 2 topicals past 12 months & DR not talked to on either 5. 3 topicals past 12 months & DR talked to once at least 6. 3 topicals past 12 months & DR not talked to on either 7. 4 topicals past 12 months & DR talked to once at least 8. 4 topicals past 12 months & DR not talked to on either 9. DK if topical bl. NA
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494	<b>REMEDYR2</b> Recode	<b>REMEDY 2 USED DURING PAST 12 MONTHS</b> 0. No topicals past 12 months 1. 1 topical past 12 months & DR talked to 2. 1 topical past 12 months & DR not talked to 3. 2 topicals past 12 months & DR talked to once at least 4. 2 topicals past 12 months & DR not talked to on either 5. 3 topicals past 12 months & DR talked to once at least 6. 3 topicals past 12 months & DR not talked to on either 7. 4 topicals past 12 months & DR talked to once at least 8. 4 topicals past 12 months & DR not talked to on either 9. DK if topical bl. NA
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495      **REMEDYR3**      **REMEDY 3 USED DURING PAST 12 MONTHS**  
Recode      0. No topicals past 12 months  
1. 1 topical past 12 months & DR talked to  
2. 1 topical past 12 months & DR not talked to  
3. 2 topicals past 12 months & DR talked to once at least  
4. 2 topicals past 12 months & DR not talked to on either  
5. 3 topicals past 12 months & DR talked to once at least  
6. 3 topicals past 12 months & DR not talked to on either  
7. 4 topicals past 12 months & DR talked to once at least  
8. 4 topicals past 12 months & DR not talked to on either  
9. DK if topical  
bl. NA

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496      **REMEDYR4**      **REMEDY 4 USED DURING PAST 12 MONTHS**  
Recode      0. No topicals past 12 months  
1. 1 topical past 12 months & DR talked to  
2. 1 topical past 12 months & DR not talked to  
3. 2 topicals past 12 months & DR talked to once at least  
4. 2 topicals past 12 months & DR not talked to on either  
5. 3 topicals past 12 months & DR talked to once at least  
6. 3 topicals past 12 months & DR not talked to on either  
7. 4 topicals past 12 months & DR talked to once at least  
8. 4 topicals past 12 months & DR not talked to on either  
9. DK if topical  
bl. NA

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497      **REMEDYR5**      **REMEDY 5 USED DURING PAST 12 MONTHS**  
Recode      0. No topicals past 12 months  
1. 1 topical past 12 months & DR talked to  
2. 1 topical past 12 months & DR not talked to  
3. 2 topicals past 12 months & DR talked to once at least  
4. 2 topicals past 12 months & DR not talked to on either  
5. 3 topicals past 12 months & DR talked to once at least  
6. 3 topicals past 12 months & DR not talked to on either  
7. 4 topicals past 12 months & DR talked to once at least  
8. 4 topicals past 12 months & DR not talked to on either  
9. DK if topical  
bl. NA

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498      **REMEDYR6**      **REMEDY 6 USED DURING PAST 12 MONTHS**  
Recode      0. No topicals past 12 months  
1. 1 topical past 12 months & DR talked to  
2. 1 topical past 12 months & DR not talked to  
3. 2 topicals past 12 months & DR talked to once at least  
4. 2 topicals past 12 months & DR not talked to on either  
5. 3 topicals past 12 months & DR talked to once at least  
6. 3 topicals past 12 months & DR not talked to on either  
7. 4 topicals past 12 months & DR talked to once at least  
8. 4 topicals past 12 months & DR not talked to on either  
9. DK if topical  
bl. NA

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499	<b>REMEDYR7</b> Recode	<b>REMEDY 7 USED DURING PAST 12 MONTHS</b> 0. No topicals past 12 months 1. 1 topical past 12 months & DR talked to 2. 1 topical past 12 months & DR not talked to 3. 2 topicals past 12 months & DR talked to once at least 4. 2 topicals past 12 months & DR not talked to on either 5. 3 topicals past 12 months & DR talked to once at least 6. 3 topicals past 12 months & DR not talked to on either 7. 4 topicals past 12 months & DR talked to once at least 8. 4 topicals past 12 months & DR not talked to on either 9. DK if topical bl. NA
500	<b>REMEDYR8</b> Recode	<b>REMEDY 8 USED DURING PAST 12 MONTHS</b> 0. No topicals past 12 months 1. 1 topical past 12 months & DR talked to 2. 1 topical past 12 months & DR not talked to 3. 2 topicals past 12 months & DR talked to once at least 4. 2 topicals past 12 months & DR not talked to on either 5. 3 topicals past 12 months & DR talked to once at least 6. 3 topicals past 12 months & DR not talked to on either 7. 4 topicals past 12 months & DR talked to once at least 8. 4 topicals past 12 months & DR not talked to on either 9. DK if topical bl. NA
501	<b>REMTOTR</b> Recode	<b>NUMBER OF REMEDIES USED DURING PAST 12 MONTHS</b> 0-4. Number of remedies 5. DK if remedies used bl. NA
502	<b>INVERTE</b>	<b>OTHER CONDITION - INTERVERTEBRAL DISK DISPLACEMENT</b> 1. No 2. Yes
503	<b>TOEFINGR</b>	<b>OTHER CONDITION - MAJOR EXTREMITIES, TOE, FINGERS ABSENCE</b> 1. No 2. Yes
504	<b>PARASTRK</b>	<b>PARALYSIS OF EXTREMITIES OR TRUNK DUE TO STROKE</b> 1. No 2. Yes
505	<b>PARAOTHR</b>	<b>OTHER CONDITION - PARALYSIS DUE TO OTHER CAUSE</b> 1. No 2. Yes
506	<b>BACKIMPR</b>	<b>OTHER CONDITION - IMPAIRMENTS OF BACK OR SPINE</b> 1. No 2. Yes
507	<b>ARMIMPR</b>	<b>OTHER CONDITION - IMPAIRMENTS OF ARMS AND SHOULDERS</b> 1. No 2. Yes

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508	LEGIMPR	OTHER CONDITION - IMPAIRMENTS OF LEGS AND HIPS 1. No 2. Yes
509	OTHRIMPR	OTHER CONDITION - IMPAIRMENTS OF MULTIPLE SITES 1. No 2. Yes
510	PSORIASS	PSORIASIS AND SIMILAR DISORDERS 1. No 2. Yes

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