
2018 NHIS Questionnaire - Sample Adult

Adult Identification

Document Version Date: 12-Jun-19

Question ID: AID.005_00.000 **Instrument Variable Name:** SADULT **QuestionnaireFileName:** Sample Adult

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

Question ID: AID.010_00.000 **Instrument Variable Name:** PROX1 **QuestionnaireFileName:** Sample Adult

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

2018 NHIS Questionnaire - Sample Adult

Adult Identification

Document Version Date: 12-Jun-19

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

QuestionText: * Ask if necessary.

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

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

UniverseText: Knowledgeable proxy is available.

SkipInstructions: <1-4> goto AIDVERF_S

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

QuestionText: *Ask if necessary.

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

- 1 Yes
- 2 No

UniverseText: Knowledgeable proxy is not available.

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

2018 NHIS Questionnaire - Sample Adult

Adult Identification

Document Version Date: 12-Jun-19

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

QuestionText: * 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

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

SkipInstructions: <1> goto AIDVERF_A
<2> goto AIDSEX

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

QuestionText: Are you Male or Female?

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

1 Male

2 Female

UniverseText: Respondent said his/her sex is not correct.

SkipInstructions: <1,2> store AIDSEX in SEX
goto ERR_AIDSEX
reset AIDVERF_S
goto AIDVERF_S

Hard Edit: ERR_AIDSEX

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

goto AIDVERF_S (as the default goto)

2018 NHIS Questionnaire - Sample Adult

Adult Identification

Document Version Date: 12-Jun-19

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)

2018 NHIS Questionnaire - Sample Adult

Adult Identification

Document Version Date: 12-Jun-19

Question ID: AID.055_00.000 **Instrument Variable Name:** AIDVERF_D **QuestionnaireFileName:** Sample Adult

QuestionText: * 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

Question ID: AID.060_01.000 **Instrument Variable Name:** AIDDOB_M **QuestionnaireFileName:** Sample Adult

QuestionText: 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

2018 NHIS Questionnaire - Sample Adult

Adult Identification

Document Version Date: 12-Jun-19

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

QuestionText: 2 of 3

*Enter day of birth.

01-31 Day of the month

97 Refused

99 Don't know

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

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

If days not valid, goto ERR_AIDDOB_D

Hard Edit: ERR_AIDDOB_D

*[fill1: AIDDOB_D] is not a valid day for [fill2: AIDDOB_M].

*Please correct.

2018 NHIS Questionnaire - Sample Adult

Adult Identification

Document Version Date: 12-Jun-19

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

QuestionText: 3 of 3

*Enter year of birth.

1880-2020 Year of birth

2018 NHIS Questionnaire - Sample Adult

Adult Identification

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- * If still cannot reconcile, enter 'Don't know' for year of birth.
- * Please correct.

Question ID: AID.128_00.000 **Instrument Variable Name:** VFYOCA **QuestionnaireFileName:** Sample Adult

QuestionText: *Press Shift - F4 to access the Sample Adult Summary tab and read the Telephone Callback script to introduce the survey to the Sample Adult. If needed, press Shift - F2 to access the FAQs tab to address any respondent concerns.

I want to confirm some information.

Do you live in on-campus housing or off-campus housing?

- 1 On campus
- 2 Off campus
- 7 Refused
- 9 Don't know

UniverseText: The Sample Adult is living away in on-campus housing and the Sample Adult is available or proxy is available and the Sample Adult is not the Household Respondent

SkipInstructions: <1,RF,DK> If Sample Adult = demographics.hhc.RELRESP_A or Sample Adult = demographics.hhc.HHRESP
goto
beginning of adult.asd
Else [goto AIDVERF_S]
<2> [goto NO_MORE]

2018 NHIS Questionnaire - Sample Adult**Adult Socio-Demographic****Document Version Date: 12-Jun-19**

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 to WHOWRK]
<2,5> [goto WHYNOWK2]
<3,R,D> [goto EVERWRK]

2018 NHIS Questionnaire - Sample Adult**Adult Socio-Demographic****Document Version Date: 12-Jun-19**

Question ID: ASD.062_00.000 **Instrument Variable Name:** DOINGLW2 **QuestionnaireFileName:** Sample Adult

QuestionText: 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
- 7 Refused
- 9 Don't know

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

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

Question ID: ASD.065_00.000 **Instrument Variable Name:** WHYNOWK2 **QuestionnaireFileName:** Sample Adult

QuestionText: ? [F1]

(Fill1: What is the main reason you did not work last week?)

(Fill2: What is the main reason you did not have a job or business last week?)

- 01 Taking care of house or family
- 02 Going to school
- 03 Retired
- 04 On a planned vacation from work
- 05 On family or maternity leave
- 06 Temporarily unable to work for health reasons
- 07 Have job or contract and off-season
- 08 On layoff
- 09 Disabled
- 10 Other
- 97 Refused
- 99 Don't know

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

SkipInstructions: <1-10,D,R> if WRKCOR = 2 then
[goto WHOWRK]
else [goto EVERWRK]

2018 NHIS Questionnaire - Sample Adult

Adult Socio-Demographic

Document Version Date: 12-Jun-19

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]

2018 NHIS Questionnaire - Sample Adult**Adult Socio-Demographic****Document Version Date: 12-Jun-19**

Question ID: ASD.080_00.000 **Instrument Variable Name:** KINDIND **QuestionnaireFileName:** Sample Adult**QuestionText:** ? [F1]

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

Verbatim 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 KINDWRK]

Question ID: ASD.090_00.000 **Instrument Variable Name:** KINDWRK **QuestionnaireFileName:** Sample Adult**QuestionText:** ? [F1]

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

Verbatim 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 IMPACT]

Question ID: ASD.100_00.000 **Instrument Variable Name:** IMPACT **QuestionnaireFileName:** Sample Adult**QuestionText:** ? [F1]

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

Verbatim 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 SUPERVIS]

2018 NHIS Questionnaire - Sample Adult

Adult Socio-Demographic

Document Version Date: 12-Jun-19

Question ID: ASD.105_00.010 **Instrument Variable Name:** SUPERVIS **QuestionnaireFileName:** Sample Adult

QuestionText: Did you supervise other employees as part of your job?

- 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,R,D> [goto WRKCAT]

Question ID: ASD.110_00.000 **Instrument Variable Name:** WRKCAT **QuestionnaireFileName:** Sample Adult

QuestionText: (book) A2 ? [F1]

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

* Read answer choices if necessary.

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

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

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

2018 NHIS Questionnaire - Sample Adult**Adult Socio-Demographic****Document Version Date: 12-Jun-19**

Question ID: ASD.112_00.000 **Instrument Variable Name:** BUSINC **QuestionnaireFileName:** Sample Adult**QuestionText:** Is this business incorporated?

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

UniverseText: Sample adults 18+ who are self-employed**SkipInstructions:** <1,2,D,R> [goto LOCALNO]

Question ID: ASD.120_00.000 **Instrument Variable Name:** LOCALNO **QuestionnaireFileName:** Sample Adult**QuestionText:** (book) A3

Thinking about
(Fill1: this MAIN job or business)
(Fill2: your last week at the job you held the longest)
(Fill3: your last week at the job you held most recently)

how many people (Fill4:work/Fill5: worked) at this location? Please include yourself.

* "People" includes both FULL- and PART-time employees.

* "Location" refers to the street address of the workplace.

- 01 1 employee
- 02 2-9 employees
- 03 10-24 employees
- 04 25-49 employees
- 05 50-99 employees
- 06 100-249 employees
- 07 250-499 employees
- 08 500-999 employees
- 09 1000 employees or more
- 97 Refused
- 99 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:** <1-9, R,D> [goto WRKLONGN]

2018 NHIS Questionnaire - Sample Adult
Adult Socio-Demographic
Document Version Date: 12-Jun-19

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

QuestionText: ? [F1]

1 of 2

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

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

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

SkipInstructions: <1-365> [goto WRKLONGT]
 <D,R> if EVERWRK eq 1 and (WHYNOWK2 eq 03 or AGE GE 65)
 [goto HOURPD] ;

Else if (EVERWRK eq 1 and WHYNOWK2 = 1,2,4-10, D,R, " " and AGE lt 65) or (DOINGLW2 = 1,2,4)
 [goto WRKLONGH]

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

QuestionText: 2 of 2

* Enter time period.

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

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

SkipInstructions: <4> if WRKLONGN gt AGE then [goto ERR_WRKLONGT]

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

Hard Edit: ERR_WRKLONGT

* Number of years is greater than age.
 * Please correct.

2018 NHIS Questionnaire - Sample Adult

Adult Socio-Demographic

Document Version Date: 12-Jun-19

Question ID: ASD.146_00.000 **Instrument Variable Name:** WRKLONGH **QuestionnaireFileName:** Sample Adult

QuestionText: ? [F1]

[If DOINGLW2 eq 1,2,4] Is this MAIN job or business the job you have held for the longest? [Else if EVERWRK eq 1 and WHYNOWK2 ne 03 and AGE lt 65] Was your most recently held job also the job you held the longest?

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

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

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

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

QuestionText: [If DOINGLW2 eq <1,2,4>] Are you paid by the hour at this MAIN job or business? [Else if EVERWRK eq <1> and [WHYNOWK2 eq 03 or AGE ge 65] Were you paid by the hour on the job you held the longest? [Else if EVERWRK eq <1> and WHYNOWK2 ne 03 and AGE lt 65] Were you paid by the hour on the job you held most recently?

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

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

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

2018 NHIS Questionnaire - Sample Adult**Adult Socio-Demographic****Document Version Date: 12-Jun-19**

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> [goto next section]

2018 NHIS Questionnaire - Sample Adult

Adult Socio-Demographic

Document Version Date: 12-Jun-19

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]

2018 NHIS Questionnaire - Sample Adult

Adult Conditions

Document Version Date: 12-Jun-19

Question ID: ACN.010_00.000 **Instrument Variable Name:** HYPEV **QuestionnaireFileName:** Sample Adult

QuestionText: 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

UniverseText: Sample adults 18+

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

Question ID: ACN.020_00.000 **Instrument Variable Name:** HYPDIFV **QuestionnaireFileName:** Sample Adult

QuestionText: 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

UniverseText: Sample adults 18+ who were told they had hypertension

SkipInstructions: <1> [goto HYPYR]
<2,R,D> [goto HYPMDEV2]

Question ID: ACN.020_00.010 **Instrument Variable Name:** HYPYR **QuestionnaireFileName:** Sample Adult

QuestionText: 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

UniverseText: Sample adults 18+ who were ever told they had hypertension (2+ visits)

SkipInstructions: <1,2,R,D> [goto HYPMDEV2]

2018 NHIS Questionnaire - Sample Adult

Adult Conditions

Document Version Date: 12-Jun-19

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]

2018 NHIS Questionnaire - Sample Adult

Adult Conditions

Document Version Date: 12-Jun-19

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.

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

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?

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

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?

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

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

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

2018 NHIS Questionnaire - Sample Adult

Adult Conditions

Document Version Date: 12-Jun-19

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]

2018 NHIS Questionnaire - Sample Adult

Adult Conditions

Document Version Date: 12-Jun-19

Question ID: ACN.031_03.000 **Instrument Variable Name:** MIEV **QuestionnaireFileName:** Sample Adult

QuestionText: * Read if necessary:

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

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

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

UniverseText: Sample adults 18+

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

Question ID: ACN.031_04.000 **Instrument Variable Name:** HRTEV **QuestionnaireFileName:** Sample Adult

QuestionText: ? [F1]

* Read if necessary:

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

UniverseText: Sample adults 18+

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

2018 NHIS Questionnaire - Sample Adult

Adult Conditions

Document Version Date: 12-Jun-19

Question ID: ACN.031_05.000 **Instrument Variable Name:** STREV **QuestionnaireFileName:** Sample Adult

QuestionText: * Read if necessary:

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]

Question ID: ACN.031_06.000 **Instrument Variable Name:** EPHEV **QuestionnaireFileName:** Sample Adult

QuestionText: * Read if necessary:

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]

2018 NHIS Questionnaire - Sample Adult

Adult Conditions

Document Version Date: 12-Jun-19

Question ID: ACN.035_00.000 **Instrument Variable Name:** COPDEV **QuestionnaireFileName:** Sample Adult

QuestionText: 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

UniverseText: Sample adults 18+

SkipInstructions: <1,2,R,D> [if AGE GE 40, goto ASPMEDEV
else goto AASMEV]

Question ID: ACN.040_00.010 **Instrument Variable Name:** ASPMEDEV **QuestionnaireFileName:** Sample Adult

QuestionText: 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

UniverseText: Sample adults 40+

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

2018 NHIS Questionnaire - Sample Adult

Adult Conditions

Document Version Date: 12-Jun-19

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]

2018 NHIS Questionnaire - Sample Adult

Adult Conditions

Document Version Date: 12-Jun-19

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

QuestionText: ? [F1]

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

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

UniverseText: Sample adults 18+

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

Question ID: ACN.085_00.000 **Instrument Variable Name:** AASSTILL **QuestionnaireFileName:** Sample Adult

QuestionText: ? [F1]

Do you still have asthma?

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

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

SkipInstructions: <1> [if DOINGLW2=1,2,4 or WRKLYR2=1 [goto AASAGE]
Elseif DOINGLW2=3,5 [goto AASMYR]
<2,R,D> [goto AASMYR]

2018 NHIS Questionnaire - Sample Adult

Adult Conditions

Document Version Date: 12-Jun-19

Question ID: ACN.085_00.010 **Instrument Variable Name:** AASAGE **QuestionnaireFileName:** Sample Adult

QuestionText: How old were you when you were first told you had asthma?

- 001-084** Age
- 085** 85+ years
- 997** Refused
- 999** Don't know

UniverseText: Sample adults 18+ who are currently employed or employed at some time in the past 12 months and still have asthma

SkipInstructions: If AASAGE ge AGE, then [got ERR_AASAGE]
<001-120> [goto AASMYR]
<R,D> [goto AASAGE16]

Hard Edit: ERR_AASAGE

- * Number of years is greater than age.
- * Please correct.

Question ID: ACN.085_00.020 **Instrument Variable Name:** AASAGE16 **QuestionnaireFileName:** Sample Adult

QuestionText: Were you less than 16 or 16 or older when you were first told you had asthma?

- 1** Less than 16
- 2** 16 or older
- 7** Refused
- 9** Don't know

UniverseText: Sample adults 18+ who are currently employed or employed at some time in the past 12 months, still have asthma, and refused or said don't know to question on age they were first told they had asthma

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

2018 NHIS Questionnaire - Sample Adult

Adult Conditions

Document Version Date: 12-Jun-19

Question ID: ACN.090_00.000 **Instrument Variable Name:** AASMYR **QuestionnaireFileName:** Sample Adult

QuestionText: ? [F1]

DURING THE PAST 12 MONTHS, have you had an episode of asthma or an asthma attack?

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

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: ? [F1]

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

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

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

SkipInstructions: <1,2,R,D> if AASSTILL=1 or AASMYR=1 [go to AASMHSR];
else AASSTILL ne 1 and AASMYR ne 1 [goto ULCEV]

Question ID: ACN.100_00.010 **Instrument Variable Name:** AASMHSR **QuestionnaireFileName:** Sample Adult

QuestionText: DURING THE PAST 12 MONTHS, have you stayed overnight in a hospital because of asthma?

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

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

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

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

2018 NHIS Questionnaire - Sample Adult**Adult Conditions**

Document Version Date: 12-Jun-19

Question ID: ACN.100_00.030 **Instrument Variable Name:** AWZMSWK **QuestionnaireFileName:** Sample Adult

QuestionText: DURING THE PAST 12 MONTHS, HOW MANY DAYS were you UNABLE to [fill1: work/get work done around the house] because of your asthma?

*Enter '0' for none.

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

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

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

SkipInstructions: <0-100,996,R,D> [go to AASMPMED]
<101-365> [go to ERR1_AWZMSWK]
<366-995> [go to ERR2_AWZMSWK]

Hard Edit: ERR2_AWZMSWK
if AWZMSWK = 366-995 then display ERR2_AWZMSWK:

"366-995 days not allowed in this field.

*Please correct."

Soft Edit: ERR1_AWZMSWK
if AWZMSWK >100 and ne 996 then display ERR1_AWZMSWK:

"AWZMSWK is an unusually large number;

*Please verify.

Question ID: ACN.100_00.060 **Instrument Variable Name:** AASMPMED **QuestionnaireFileName:** Sample Adult

QuestionText: Now I'm going to ask you about two different kinds of ASTHMA medicine. One prevents symptoms over the long term. The other is for quick relief of symptoms during an attack or episode. This quick relief medicine is breathed in through your mouth using a canister inhaler or a disk inhaler.

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

1	Yes
2	No
7	Refused
9	Don't know

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

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

2018 NHIS Questionnaire - Sample Adult

Adult Conditions

Document Version Date: 12-Jun-19

Question ID: ACN.100_00.065 **Instrument Variable Name:** AASMTYP **QuestionnaireFileName:** Sample Adult

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

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

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

UniverseText: Sample adults 18+ who have used a quick relief prescription asthma inhaler in the past three months

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

Question ID: ACN.100_00.070 **Instrument Variable Name:** AASMCAN **QuestionnaireFileName:** Sample Adult

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

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

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

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

2018 NHIS Questionnaire - Sample Adult

Adult Conditions

Document Version Date: 12-Jun-19

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

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

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

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

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

SkipInstructions: <1-3,R,D> [go to AASWMP]

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

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

*Read if necessary: Include nurses and asthma educators.

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

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

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

2018 NHIS Questionnaire - Sample Adult

Adult Conditions

Document Version Date: 12-Jun-19

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

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

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

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

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

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

QuestionText: Has a doctor or other health professional EVER taught you
...how to recognize early signs or symptoms of an asthma episode?

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

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

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

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

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

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

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

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

2018 NHIS Questionnaire - Sample Adult

Adult Conditions

Document Version Date: 12-Jun-19

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

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

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

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

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

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

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

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

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

SkipInstructions: <1-3,R,D> [go to AAROUTIN]

2018 NHIS Questionnaire - Sample Adult**Adult Conditions****Document Version Date: 12-Jun-19**

Question ID: ACN.107_00.020 **Instrument Variable Name:** AAROUTIN **QuestionnaireFileName:** Sample Adult**QuestionText:** DURING THE PAST 12 MONTHS, how many times did you see a doctor or other health professional for a routine checkup for your asthma? Please do not include emergency room visits, visits to urgent care centers, or other visits for acute care for an asthma episode or attack.

*Enter '0' for none.

000	None
001-365	Times
997	Refused
999	Don't know

UniverseText: Sample adults 18+ who still have asthma or who had asthma episode/attack in past 12 months**SkipInstructions:** <0-50,R,D> [go to AASYMPT]
<51-365> [goto ERR_AAROUTIN]**Soft Edit:** ERR_AAROUTIN[fill4: AAROUTIN] is an unusually large number.
* Please verify.

Question ID: ACN.107_00.030 **Instrument Variable Name:** AASYMPT **QuestionnaireFileName:** Sample Adult**QuestionText:** The next three questions are about the last time you saw a doctor or other health care professional for routine care or for any reason.

At your last visit, did your doctor or other health professional ask HOW OFTEN

...you had asthma symptoms?

1	Yes
2	No
7	Refused
9	Don't know

UniverseText: Sample adults 18+ who still have asthma or who had asthma episode/attack in past 12 months and saw a doctor/health professional about their asthma in the past year**SkipInstructions:** <1,2,R,D> [go to AARESCUE];

2018 NHIS Questionnaire - Sample Adult

Adult Conditions

Document Version Date: 12-Jun-19

Question ID: ACN.107_00.040 **Instrument Variable Name:** AARESCUE **QuestionnaireFileName:** Sample Adult

QuestionText: * Read if necessary:

At your last visit, did your doctor or other health professional ask HOW OFTEN

...you used a quick relief inhaler?

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

UniverseText: Sample adults 18+ who still have asthma or who had asthma episode/attack in past 12 months and who use a quick relief inhaler and saw a doctor/health professional about their asthma in the past year

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

Question ID: ACN.107_00.050 **Instrument Variable Name:** AAACLIM **QuestionnaireFileName:** Sample Adult

QuestionText: * Read if necessary:

At your last visit, did your doctor or other health professional ask HOW OFTEN

...asthma symptoms limited your daily activities?

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

UniverseText: Sample adults 18+ who still have asthma or who had asthma episode/attack in past 12 months and saw a doctor/health professional about their asthma in the past year

SkipInstructions: <1,2,R,D> if (DOINGLW2=1,2,4 or WRKLYR2=1) and AASSTILL(e)=1' and (AASAGE le 15 or AASAGE16=1) [goto AASSTAT];
elseif (DOINGLW2=1,2,4 or WRKLYR2=1) and (AASAGE ge 16 or AASAGE16=2,R,D) [goto AASEMP];
else (DOINGLW2 ne 1,2,4 and WRKLYR2 ne 1) [goto ULCEV]

2018 NHIS Questionnaire - Sample Adult

Adult Conditions

Document Version Date: 12-Jun-19

Question ID: ACN.107_00.060 **Instrument Variable Name:** AASSTAT **QuestionnaireFileName:** Sample Adult

QuestionText: Compared to when you were first told you had asthma, would you say your asthma has been better, worse, or about the same as an adult?

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

UniverseText: Sample adults 18+ who are currently employed or employed at some time in the past 12 months, still have asthma, and were less than 16 years of age when they were told they had asthma

SkipInstructions: <1,3,R,D> [goto AASWKREL]
<2> [goto AASEMP]

Question ID: ACN.107_00.070 **Instrument Variable Name:** AASEMP **QuestionnaireFileName:** Sample Adult

QuestionText: Were you employed when [fill 1: you first developed symptoms of asthma/fill 2: your asthma got worse]?

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

UniverseText: Sample adults 18+ who are currently employed or employed at some time in the past 12 months, still have asthma, and were 16 years of age or older or less than 16 years of age and their asthma has gotten worse as an adult or age at time of diagnosis is unknown

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

2018 NHIS Questionnaire - Sample Adult

Adult Conditions

Document Version Date: 12-Jun-19

Question ID: ACN.107_00.080 **Instrument Variable Name:** AASWKREL **QuestionnaireFileName:** Sample Adult

QuestionText: Have you been told by a doctor or other health professional that your asthma [fill: was probably caused by your work/was probably made worse by your work/was ever made worse by any job you have ever had]?"

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

UniverseText: Sample adults 18+ who are currently employed or employed at some time in the past 12 months, still have asthma, were 16 years of age or older or less than 16 years of age and their asthma has gotten worse as an adult or age at time of diagnosis is unknown

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

Question ID: ACN.107_00.090 **Instrument Variable Name:** AASDWKRL **QuestionnaireFileName:** Sample Adult

QuestionText: Did YOU ever discuss with a doctor or other health professional whether your asthma [fill: was probably caused by your work/was probably made worse by your work/was ever made worse by any job you have ever had]?"

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

UniverseText: Sample adults 18+ who are currently employed or employed at some time in the past 12 months, still have asthma, were 16 years of age or older or less than 16 years of age and their asthma has gotten worse as an adult or age at time of diagnosis is unknown

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

2018 NHIS Questionnaire - Sample Adult

Adult Conditions

Document Version Date: 12-Jun-19

Question ID: ACN.110_00.000 **Instrument Variable Name:** ULCEV **QuestionnaireFileName:** Sample Adult

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

...An ulcer

This could be a stomach, duodenal or peptic ulcer.

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

UniverseText: Sample adults 18+

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

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

QuestionText: DURING THE PAST 12 MONTHS have you had

... An ulcer?

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

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

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

2018 NHIS Questionnaire - Sample Adult

Adult Conditions

Document Version Date: 12-Jun-19

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_1]
<2,R,D> [goto DIBEV1]

2018 NHIS Questionnaire - Sample Adult

Adult Conditions

Document Version Date: 12-Jun-19

Question ID: ACN.140_00.001 **Instrument Variable Name:** CANKIND_1 **QuestionnaireFileName:** Sample Adult

QuestionText: 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
-
-

2018 NHIS Questionnaire - Sample Adult

Adult Conditions

Document Version Date: 12-Jun-19

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.

2018 NHIS Questionnaire - Sample Adult

Adult Conditions

Document Version Date: 12-Jun-19

Question ID: ACN.140_00.002 **Instrument Variable Name:** CANKIND_2 **QuestionnaireFileName:** Sample Adult

QuestionText:

* 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
-
-

2018 NHIS Questionnaire - Sample Adult

Adult Conditions

Document Version Date: 12-Jun-19

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 DIBEV1]
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.

2018 NHIS Questionnaire - Sample Adult

Adult Conditions

Document Version Date: 12-Jun-19

Question ID: ACN.140_00.003 **Instrument Variable Name:** CANKIND_3 **QuestionnaireFileName:** Sample Adult

QuestionText:

* 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
-
-

2018 NHIS Questionnaire - Sample Adult

Adult Conditions

Document Version Date: 12-Jun-19

UniverseText: Sample adults 18+ who either provided an age for a second kind of cancer or didn't know how old they were when first diagnosed that kind of cancer or else refused to provide an age but had not refused to answer CANKIND_2.

SkipInstructions: <1-30,R,D>[goto CANAGE_3]
<96> [goto DIBEV1]

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 DIBEV1]

2018 NHIS Questionnaire - Sample Adult**Adult Conditions****Document Version Date: 12-Jun-19**

Question ID: ACN.150_00.001 **Instrument Variable Name:** CANAGE_1 **QuestionnaireFileName:** Sample Adult**QuestionText:** ? [F1]

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

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_2
<R> and <R> at CANKIND_1 [goto DIBEV1]
<R> and CANKIND_1 NE <R> [goto CANKIND_2]

If number in CANAGE_1 greater than person years old (AGE) [goto ERR_ CANAGE_1]

Hard Edit: ERR_ CANAGE_1

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

Question ID: ACN.150_00.002 **Instrument Variable Name:** CANAGE_2 **QuestionnaireFileName:** Sample Adult**QuestionText:** ? [F1]

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

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_3]
<R> and <R> at CANKIND_2 [goto DIBEV1]
<R> and CANKIND_2 NE <R> [goto CANKIND_3]

If number in CANAGE_2 greater than person years old (AGE) [goto ERR_ CANAGE_2]

Hard Edit: ERR_ CANAGE_2

* [Fill2: CANAGE_2] years old is older than your age[fill3: AGE].
* Please correct.

2018 NHIS Questionnaire - Sample Adult**Adult Conditions****Document Version Date: 12-Jun-19**

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 DIBEV1]
<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:** DIBEV1 **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 or prediabetes
7 Refused
9 Don't know

UniverseText: Sample adults 18+**SkipInstructions:** <1> [goto DIBAGE]
<2,R,D> [goto DIBPRE1]
<3> [goto DIBPILL]

2018 NHIS Questionnaire - Sample Adult

Adult Conditions

Document Version Date: 12-Jun-19

Question ID: ACN.165_00.000 **Instrument Variable Name:** DIBPRE1 **QuestionnaireFileName:** Sample Adult

QuestionText: ?[F1]

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

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

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

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

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

QuestionText: ?[F1]

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

- 000 thru 100 Age at which diagnosed
- 997 Refused
- 999 Don't know

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

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

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

Hard Edit: ERR_ DIBAGE

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

2018 NHIS Questionnaire - Sample Adult

Adult Conditions

Document Version Date: 12-Jun-19

Question ID: ACN.180_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.

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

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 INSLN1]

Question ID: ACN.190_00.000 **Instrument Variable Name:** INSLN1 **QuestionnaireFileName:** Sample Adult

QuestionText: Insulin can be taken by shot or pump. Are you NOW taking insulin?

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

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 AHAYFYR]

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

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

...Hay fever?

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

UniverseText: Sample adults 18+

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

2018 NHIS Questionnaire - Sample Adult

Adult Conditions

Document Version Date: 12-Jun-19

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

QuestionText: * Read if necessary:

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

...Sinusitis?

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

UniverseText: Sample adults 18+

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

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]

2018 NHIS Questionnaire - Sample Adult

Adult Conditions

Document Version Date: 12-Jun-19

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

QuestionText: * Read if necessary:

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

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

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

UniverseText: Sample adults 18+

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

Question ID: ACN.201_05.000 **Instrument Variable Name:** LIVYR **QuestionnaireFileName:** Sample Adult

QuestionText: * Read if necessary:

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

...Any kind of liver condition?

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

UniverseText: Sample adults 18+

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

2018 NHIS Questionnaire - Sample Adult

Adult Conditions

Document Version Date: 12-Jun-19

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

QuestionText: The next questions refer to your joints. Please do NOT include the back or neck.

DURING THE PAST 30 DAYS, have you had any symptoms of pain, aching, or stiffness in or around a joint?

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

UniverseText: Sample adults 18+

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

Question ID: ACN.260_00.000 **Instrument Variable Name:** JMTHP **QuestionnaireFileName:** Sample Adult

QuestionText: (book) A4

Which joints are affected?

* Enter all that apply, separate with commas.

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

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

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

2018 NHIS Questionnaire - Sample Adult

Adult Conditions

Document Version Date: 12-Jun-19

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]

2018 NHIS Questionnaire - Sample Adult

Adult Conditions

Document Version Date: 12-Jun-19

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 PAINECK]

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

QuestionText: ? [F1]

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

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

UniverseText: Sample adults 18+ with joint pain or arthritis

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

2018 NHIS Questionnaire - Sample Adult

Adult Conditions

Document Version Date: 12-Jun-19

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

QuestionText: ? [F1]

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

DURING THE PAST THREE MONTHS, did you have

... Neck pain?

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

UniverseText: Sample adults 18+

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

Question ID: ACN.310_00.000 **Instrument Variable Name:** PAINLB **QuestionnaireFileName:** Sample Adult

QuestionText: ? [F1]

* Read if necessary.

DURING THE PAST THREE MONTHS, did you have

... Low back pain?

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

UniverseText: Sample adults 18+

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

2018 NHIS Questionnaire - Sample Adult

Adult Conditions

Document Version Date: 12-Jun-19

Question ID: ACN.320_00.000 **Instrument Variable Name:** PAINLEG **QuestionnaireFileName:** Sample Adult

QuestionText: ? [F1]

Did this pain spread down either leg to areas below the knees?

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

UniverseText: Sample adults 18+ with 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?

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

UniverseText: Sample adults 18+

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

2018 NHIS Questionnaire - Sample Adult

Adult Conditions

Document Version Date: 12-Jun-19

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

QuestionText: * Read if necessary:

DURING THE PAST THREE MONTHS, did you have

...Severe headache or migraine?

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

UniverseText: Sample adults 18+

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

Question ID: ACN.350_00.000 **Instrument Variable Name:** ACOLD2W **QuestionnaireFileName:** Sample Adult

QuestionText: 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

UniverseText: Sample adults 18+

SkipInstructions: <1,2,R,D> [goto AINTIL2W]

2018 NHIS Questionnaire - Sample Adult**Adult Conditions****Document Version Date: 12-Jun-19**

Question ID: ACN.360_00.000 **Instrument Variable Name:** AINTIL2W **QuestionnaireFileName:** Sample Adult**QuestionText:** 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

UniverseText: Sample adults 18+**SkipInstructions:** <1,2,R,D> if SEX=2 and AGE 18-49 [goto PREGNOW];
else if SEX=1 or AGE >49 [goto HRAIDNOW]

Question ID: ACN.370_00.000 **Instrument Variable Name:** PREGNOW **QuestionnaireFileName:** Sample Adult**QuestionText:** Are you currently pregnant?

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

UniverseText: Female sample adults 18-49 years of age**SkipInstructions:** <1> if INTERVIEW_MONTH=4,5,6,7 (April-July) [goto PREGFLYR];
else INTERVIEW_MONTH=1-3,8-12 [goto HRAIDNOW]
<R> [goto HRAIDNOW]
<2,D> [goto PREGFLYR]

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]

2018 NHIS Questionnaire - Sample Adult

Adult Conditions

Document Version Date: 12-Jun-19

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 HRAIDDEV]

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]

2018 NHIS Questionnaire - Sample Adult

Adult Conditions

Document Version Date: 12-Jun-19

Question ID: ACN.420_00.000 **Instrument Variable Name:** AHEARST1 **QuestionnaireFileName:** Sample Adult

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

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

UniverseText: Sample adults 18+

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

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

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

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

UniverseText: Sample adults 18+

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

2018 NHIS Questionnaire - Sample Adult

Adult Conditions

Document Version Date: 12-Jun-19

Question ID: ACN.440_00.000 **Instrument Variable Name:** ABLIND **QuestionnaireFileName:** Sample Adult

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

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

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

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

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

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

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

UniverseText: Sample adults 18+

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

2018 NHIS Questionnaire - Sample Adult**Adult Health Status & Limitations****Document Version Date: 12-Jun-19**

Question ID: AHS.040_00.000 **Instrument Variable Name:** WKDAYR **QuestionnaireFileName:** Sample Adult**QuestionText:** During the PAST 12 MONTHS, that is, since {12-month ref. date}, ABOUT how many days did you miss work at a job or business because of illness or injury (do not include maternity leave)?

* Enter '0' for None.

000	None
001-366	1-366 days
997	Refused
999	Don't know

UniverseText: Sample adults 18+ who worked or had a job or business with or without pay in the last week or who had a job or business in the past 12 months**SkipInstructions:** <0-366,R,D> [goto BEDDAYR]
<120-366> [goto ERR_WKDAYR]**Soft Edit:** ERR_WKDAYR* [Fill: WKDAYR] is an unusually large number.
* Please verify.

Question ID: AHS.050_00.000 **Instrument Variable Name:** BEDDAYR **QuestionnaireFileName:** Sample Adult**QuestionText:** During the PAST 12 MONTHS, that is, since {12-month ref. date}, ABOUT how many days did illness or injury keep you in bed more than half of the day (include days while an overnight patient in a hospital)?

* Enter '0' for None.

000	None
001-366	1-366 days
997	Refused
999	Don't know

UniverseText: Sample adults 18+**SkipInstructions:** <0-366,R,D> [goto AHSTATYR]
<120-366> [goto ERR_BEDDAYR]**Soft Edit:** ERR_BEDDAYR* [Fill: BEDDAYR] is an unusually large number.
* Please verify.

2018 NHIS Questionnaire - Sample Adult

Adult Health Status & Limitations

Document Version Date: 12-Jun-19

Question ID: AHS.060_00.000 **Instrument Variable Name:** AHSTATYR **QuestionnaireFileName:** Sample Adult

QuestionText: 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

UniverseText: Sample adults 18+

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

Question ID: AHS.070_00.000 **Instrument Variable Name:** SPECEQ **QuestionnaireFileName:** Sample Adult

QuestionText: 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

UniverseText: Sample adults 18+

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

2018 NHIS Questionnaire - Sample Adult

Adult Health Status & Limitations

Document Version Date: 12-Jun-19

Question ID: AHS.091_01.000 **Instrument Variable Name:** FLWALK **QuestionnaireFileName:** Sample Adult

QuestionText: (book) A6

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

UniverseText: Sample adults 18+

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

Question ID: AHS.091_02.000 **Instrument Variable Name:** FLCLIMB **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...

...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

UniverseText: Sample adults 18+

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

2018 NHIS Questionnaire - Sample Adult

Adult Health Status & Limitations

Document Version Date: 12-Jun-19

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]

2018 NHIS Questionnaire - Sample Adult

Adult Health Status & Limitations

Document Version Date: 12-Jun-19

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

...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]

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

...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]

2018 NHIS Questionnaire - Sample Adult

Adult Health Status & Limitations

Document Version Date: 12-Jun-19

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]

2018 NHIS Questionnaire - Sample Adult

Adult Health Status & Limitations

Document Version Date: 12-Jun-19

Question ID: AHS.141_03.000 **Instrument Variable Name:** FLPUSH **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...

...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

QuestionText: (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]

2018 NHIS Questionnaire - Sample Adult

Adult Health Status & Limitations

Document Version Date: 12-Jun-19

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: <0-4,6,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 FLSIT= 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)

2018 NHIS Questionnaire - Sample Adult**Adult Health Status & Limitations****Document Version Date: 12-Jun-19**

Question ID: AHS.200_00.000 **Instrument Variable Name:** AFLHCA **QuestionnaireFileName:** Sample Adult**QuestionText:** (book) A7

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

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

* Do not probe, except to clarify answer.

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

2018 NHIS Questionnaire - Sample Adult**Adult Health Status & Limitations****Document Version Date: 12-Jun-19**

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 Verbatim response
 7 Refused
 9 Don't know

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

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

Hard Edit: \$ You should enter something specific.

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

QuestionText: * Enter other impairment/problem.

Verbatim Verbatim response
 7 Refused
 9 Don't know

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

SkipInstructions: <50 chars>[goto AHCL91N]
 >ENTER< only with no description [goto ERR1_AFLHCA_S1]

Hard Edit: \$ You should enter something specific.

2018 NHIS Questionnaire - Sample Adult

Adult Health Status & Limitations

Document Version Date: 12-Jun-19

Question ID: AHS.300_01.000 **Instrument Variable Name:** AHCL01N **QuestionnaireFileName:** Sample Adult

QuestionText: 1 of 2

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

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

SkipInstructions: <1-95,D>[goto AHCL01T]
<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)]

2018 NHIS Questionnaire - Sample Adult

Adult Health Status & Limitations

Document Version Date: 12-Jun-19

Question ID: AHS.300_02.000 **Instrument Variable Name:** AHCL01T **QuestionnaireFileName:** Sample Adult

QuestionText: 2 of 2

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

- 1 Day(s)
- 2 Week(s)
- 3 Month(s)
- 4 Year(s)
- 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_AHCL01T
[if [AHCL01N = Number greater than person years old and AHCL01T= 4]] goto ERR1_AHCL01T

Hard Edit: ERR1_AHCL01T

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

ERR2_AHCL01T

* "6" not selectable.

2018 NHIS Questionnaire - Sample Adult

Adult Health Status & Limitations

Document Version Date: 12-Jun-19

Question ID: AHS.301_01.000 **Instrument Variable Name:** AHCL02N **QuestionnaireFileName:** Sample Adult

QuestionText: 1 of 2

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

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

SkipInstructions: <1-95,D>[goto AHCL02T]
<R>[store "R" in AHCL02T] [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 AHCL02T] [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]

2018 NHIS Questionnaire - Sample Adult

Adult Health Status & Limitations

Document Version Date: 12-Jun-19

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.

2018 NHIS Questionnaire - Sample Adult
Adult Health Status & Limitations
Document Version Date: 12-Jun-19

Question ID: AHS.302_01.000 **Instrument Variable Name:** AHCL03N **QuestionnaireFileName:** Sample Adult

QuestionText: 1 of 2

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

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

SkipInstructions: <1-95,D>[goto AHCL03T]
 <R>[store "R" in AHCL03T] [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 AHCL03T] [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.302_02.000 **Instrument Variable Name:** AHCL03T **QuestionnaireFileName:** Sample Adult

QuestionText: 2 of 2

* 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

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_AHCL03T
 [if [AHCL03N = Number greater than person years old and AHCL03T= 4]] goto ERR1_AHCL03T

Hard Edit: ERR_AHCL03T

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

2018 NHIS Questionnaire - Sample Adult**Adult Health Status & Limitations**

Document Version Date: 12-Jun-19

Question ID: AHS.303_01.000 **Instrument Variable Name:** AHCL04N **QuestionnaireFileName:** Sample Adult

QuestionText: 1 of 2

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

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

SkipInstructions: <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)]

Question ID: AHS.303_02.000 **Instrument Variable Name:** AHCL04T **QuestionnaireFileName:** Sample Adult

QuestionText: 2 of 2

* Enter time period for time with back or neck 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_AHCL04T
 [if [AHCL04N = Number greater than person years old and AHCL04T= 4]] goto ERR1_AHCL04T

Hard Edit: ERR_AHCL04T
 * Time with condition cannot be greater than age.
 * Please correct.

2018 NHIS Questionnaire - Sample Adult**Adult Health Status & Limitations**

Document Version Date: 12-Jun-19

Question ID: AHS.304_01.000 **Instrument Variable Name:** AHCL05N **QuestionnaireFileName:** Sample Adult

QuestionText: 1 of 2

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

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

* Enter '95" for 95 or more.

* Enter "96" if since birth.

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 fracture, bone, or joint injury

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

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

QuestionText: 2 of 2

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

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_AHCL05T
 [if [AHCL05N = Number greater than person years old and AHCL05T= 4]] goto ERR1_AHCL05T

Hard Edit: ERR_AHCL05T
 * Time with condition cannot be greater than age.
 * Please correct.

2018 NHIS Questionnaire - Sample Adult**Adult Health Status & Limitations**

Document Version Date: 12-Jun-19

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

QuestionText: 1 of 2

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

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

* Enter '95' for 95 or more.

* Enter "96" if since birth.

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

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

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

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

QuestionText: 2 of 2

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

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

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

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

Hard Edit: ERR_AHCL06T
 * Time with condition cannot be greater than age.
 * Please correct.

2018 NHIS Questionnaire - Sample Adult
Adult Health Status & Limitations
Document Version Date: 12-Jun-19

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.

2018 NHIS Questionnaire - Sample Adult
Adult Health Status & Limitations
Document Version Date: 12-Jun-19

Question ID: AHS.307_01.000 **Instrument Variable Name:** AHCL08N **QuestionnaireFileName:** Sample Adult

QuestionText: 1 of 2

How long have you had a stroke problem?

* Enter number for time with a stroke problem.

* Enter '95' for 95 or more.

* Enter "96" if since birth.

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

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

SkipInstructions: <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)]

Question ID: AHS.307_02.000 **Instrument Variable Name:** AHCL08T **QuestionnaireFileName:** Sample Adult

QuestionText: 2 of 2

* Enter time period for time with stroke problem.

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

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_AHCL08T
 [if [AHCL08N = Number greater than person years old and AHCL08T= 4]] goto ERR1_AHCL08T

Hard Edit: ERR_AHCL08T
 * Time with condition cannot be greater than age.
 * Please correct.

2018 NHIS Questionnaire - Sample Adult**Adult Health Status & Limitations**

Document Version Date: 12-Jun-19

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.

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

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.

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_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.

2018 NHIS Questionnaire - Sample Adult
Adult Health Status & Limitations
Document Version Date: 12-Jun-19

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	1-94
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.

2018 NHIS Questionnaire - Sample Adult**Adult Health Status & Limitations**

Document Version Date: 12-Jun-19

Question ID: AHS.310_01.000 **Instrument Variable Name:** AHCL11N **QuestionnaireFileName:** Sample Adult

QuestionText: 1 of 2

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

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

SkipInstructions: <1-95,D>[goto AHCL11T]
 <R>[store "R" in AHCL11T] [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 AHCL11T] [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.310_02.000 **Instrument Variable Name:** AHCL11T **QuestionnaireFileName:** Sample Adult

QuestionText: 2 of 2

* 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

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_AHCL11T
 [if [AHCL11N = Number greater than person years old and AHCL11T= 4]] goto ERR1_AHCL11T

Hard Edit: ERR_AHCL11T
 * Time with condition cannot be greater than age.
 * Please correct.

2018 NHIS Questionnaire - Sample Adult**Adult Health Status & Limitations**

Document Version Date: 12-Jun-19

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

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	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_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.

2018 NHIS Questionnaire - Sample Adult**Adult Health Status & Limitations**

Document Version Date: 12-Jun-19

Question ID: AHS.313_01.000 **Instrument Variable Name:** AHCL14N **QuestionnaireFileName:** Sample Adult

QuestionText: 1 of 2

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

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

SkipInstructions: <1-95,D>[goto AHCL14T]
 <R>[store "R" in AHCL14T] [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 AHCL14T] [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.313_02.000 **Instrument Variable Name:** AHCL14T **QuestionnaireFileName:** Sample Adult

QuestionText: 2 of 2

* Enter time period for time with 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

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_AHCL14T
 [if [AHCL14N = Number greater than person years old and AHCL14T= 4]] goto ERR1_AHCL14T

Hard Edit: ERR_AHCL14T
 * Time with condition cannot be greater than age.
 * Please correct.

2018 NHIS Questionnaire - Sample Adult**Adult Health Status & Limitations**

Document Version Date: 12-Jun-19

Question ID: AHS.314_01.000 **Instrument Variable Name:** AHCL15N **QuestionnaireFileName:** Sample Adult

QuestionText: 1 of 2

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

* Enter number for time with a developmental problem.

* Enter '95" for 95 or more.

* Enter "96" if since birth.

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

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

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

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

QuestionText: 2 of 2

* Enter time period for time with developmental problem.

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

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

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

Hard Edit: ERR_AHCL15T
 * Time with condition cannot be greater than age.
 * Please correct.

2018 NHIS Questionnaire - Sample Adult**Adult Health Status & Limitations**

Document Version Date: 12-Jun-19

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.

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

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.

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_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.

2018 NHIS Questionnaire - Sample Adult**Adult Health Status & Limitations**

Document Version Date: 12-Jun-19

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

QuestionText: 1 of 2

How long have you had depression, anxiety, or an emotional problem?

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

* Enter '95' for 95 or more.

* Enter "96" if since birth.

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

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: 2 of 2

* Enter time period for time with depression, anxiety, or emotional 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_AHCL17T
 [if [AHCL17N = Number greater than person years old and AHCL17T= 4]] goto ERR1_AHCL17T

Hard Edit: ERR_AHCL17T

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

2018 NHIS Questionnaire - Sample Adult**Adult Health Status & Limitations**

Document Version Date: 12-Jun-19

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

QuestionText: 1 of 2

How long have you had a weight problem?

* Enter number for time with a weight problem.

* Enter '95' for 95 or more.

* Enter "96" if since birth.

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

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

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

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

QuestionText: 2 of 2

* Enter time period for time with weight problem.

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

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

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

Hard Edit: ERR_AHCL18T

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

2018 NHIS Questionnaire - Sample Adult**Adult Health Status & Limitations**

Document Version Date: 12-Jun-19

Question ID: AHS.318_01.000 **Instrument Variable Name:** AHCL19N **QuestionnaireFileName:** Sample Adult

QuestionText: 1 of 2

How long have you had a missing limb (finger, toe, or digit)?

* Enter number for time with a missing limb.

* Enter '95' for 95 or more.

* Enter "96" if since birth.

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

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)]

Question ID: AHS.318_02.000 **Instrument Variable Name:** AHCL19T **QuestionnaireFileName:** Sample Adult

QuestionText: 2 of 2

* Enter time period for time with missing limb.

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

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.

2018 NHIS Questionnaire - Sample Adult**Adult Health Status & Limitations**

Document Version Date: 12-Jun-19

Question ID: AHS.319_01.000 **Instrument Variable Name:** AHCL20N **QuestionnaireFileName:** Sample Adult

QuestionText: 1 of 2

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.

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 kidney, bladder or renal problem

SkipInstructions: <1-95,D>[goto AHCL20T]
 <R>[store "R" in AHCL20T] [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]
 <96>[store "6" in AHCL20T] [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]

Question ID: AHS.319_02.000 **Instrument Variable Name:** AHCL20T **QuestionnaireFileName:** Sample Adult

QuestionText: 2 of 2

* Enter time period for time with kidney, bladder or renal 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_AHCL20T
 [if [AHCL20N = Number greater than person years old and AHCL20T= 4]] goto ERR1_AHCL20T

Hard Edit: ERR_AHCL20T
 * Time with condition cannot be greater than age.
 * Please correct.

2018 NHIS Questionnaire - Sample Adult**Adult Health Status & Limitations**

Document Version Date: 12-Jun-19

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	1-94
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 [AHCL21N = 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.

2018 NHIS Questionnaire - Sample Adult**Adult Health Status & Limitations**

Document Version Date: 12-Jun-19

Question ID: AHS.321_01.000 **Instrument Variable Name:** AHCL22N **QuestionnaireFileName:** Sample Adult

QuestionText: 1 of 2

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

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

SkipInstructions: <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

QuestionText: 2 of 2

* 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

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_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.

2018 NHIS Questionnaire - Sample Adult**Adult Health Status & Limitations**

Document Version Date: 12-Jun-19

Question ID: AHS.322_01.000 **Instrument Variable Name:** AHCL23N **QuestionnaireFileName:** Sample Adult

QuestionText: 1 of 2

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.

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

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

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

Question ID: AHS.322_02.000 **Instrument Variable Name:** AHCL23T **QuestionnaireFileName:** Sample Adult

QuestionText: 2 of 2

* Enter time period for time with fibromyalgia or lupus.

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

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

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

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

2018 NHIS Questionnaire - Sample Adult**Adult Health Status & Limitations**

Document Version Date: 12-Jun-19

Question ID: AHS.323_01.000 **Instrument Variable Name:** AHCL24N **QuestionnaireFileName:** Sample Adult

QuestionText: 1 of 2

How long have you had osteoporosis or tendinitis?

* Enter number for time with osteoporosis or tendinitis.

* Enter '95" for 95 or more.

* Enter "96" if since birth.

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

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

SkipInstructions: <1-95,D>[goto AHCL24T]
 <R>[store "R" in AHCL24T] [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]
 <96>[store "6" in AHCL24T] [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]

Question ID: AHS.323_02.000 **Instrument Variable Name:** AHCL24T **QuestionnaireFileName:** Sample Adult

QuestionText: 2 of 2

* Enter time period for time with osteoporosis or tendinitis.

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_AHCL24T
 [if [AHCL24N = Number greater than person years old and AHCL24T= 4]] goto ERR1_AHCL24T

Hard Edit: ERR_AHCL24T
 * Time with condition cannot be greater than age.
 * Please correct.

2018 NHIS Questionnaire - Sample Adult**Adult Health Status & Limitations**

Document Version Date: 12-Jun-19

Question ID: AHS.324_01.000 **Instrument Variable Name:** AHCL25N **QuestionnaireFileName:** Sample Adult

QuestionText: 1 of 2

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

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

SkipInstructions: <1-95,D>[goto AHCL25T]
 <R>[store "R" in AHCL25T] [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 AHCL25T] [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.324_02.000 **Instrument Variable Name:** AHCL25T **QuestionnaireFileName:** Sample Adult

QuestionText: 2 of 2

* Enter time period for time with epilepsy or seizures.

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: ERR_AHCL25T

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

2018 NHIS Questionnaire - Sample Adult**Adult Health Status & Limitations**

Document Version Date: 12-Jun-19

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

QuestionText: 1 of 2

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

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

* Enter '95' for 95 or more.

* Enter "96" if since birth.

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

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

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

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

QuestionText: 2 of 2

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

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

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

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

Hard Edit: ERR_AHCL26T

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

2018 NHIS Questionnaire - Sample Adult**Adult Health Status & Limitations**

Document Version Date: 12-Jun-19

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

QuestionText: 1 of 2

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

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

* 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 polio(myelitis), paralysis or para/quadruplegia

SkipInstructions: <1-95,D>[goto AHCL27T]
 <R>[store "R" in AHCL27T] [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]
 <96>[store "6" in AHCL27T] [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]

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

QuestionText: 2 of 2

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

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_AHCL27T
 [if [AHCL27N = Number greater than person years old and AHCL27T= 4]] goto ERR1_AHCL27T

Hard Edit: ERR_AHCL27T
 * Time with condition cannot be greater than age.
 * Please correct.

2018 NHIS Questionnaire - Sample Adult**Adult Health Status & Limitations**

Document Version Date: 12-Jun-19

Question ID: AHS.327_01.000 **Instrument Variable Name:** AHCL28N **QuestionnaireFileName:** Sample Adult

QuestionText: 1 of 2

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.

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

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

SkipInstructions: <1-95,D>[goto AHCL28T]
 <R>[store "R" in AHCL28T] [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 AHCL28T] [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.327_02.000 **Instrument Variable Name:** AHCL28T **QuestionnaireFileName:** Sample Adult

QuestionText: 2 of 2

* 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

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_AHCL28T
 [if [AHCL28N = Number greater than person years old and AHCL28T= 4]] goto ERR1_AHCL28T

Hard Edit: ERR_AHCL28T

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

2018 NHIS Questionnaire - Sample Adult**Adult Health Status & Limitations**

Document Version Date: 12-Jun-19

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
 [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.

2018 NHIS Questionnaire - Sample Adult**Adult Health Status & Limitations**

Document Version Date: 12-Jun-19

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	1-94
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.

2018 NHIS Questionnaire - Sample Adult
Adult Health Status & Limitations
Document Version Date: 12-Jun-19

Question ID: AHS.330_01.000 **Instrument Variable Name:** AHCL31N **QuestionnaireFileName:** Sample Adult

QuestionText: 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	1-94
95	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)]

Question ID: AHS.330_02.000 **Instrument Variable Name:** AHCL31T **QuestionnaireFileName:** Sample Adult

QuestionText: 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 [AHCL31N = Number greater than person years old and AHCL31T= 4]] goto ERR1_AHCL31T

Hard Edit: ERR_AHCL31T

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

2018 NHIS Questionnaire - Sample Adult**Adult Health Status & Limitations**

Document Version Date: 12-Jun-19

Question ID: AHS.331_01.000 **Instrument Variable Name:** AHCL32N **QuestionnaireFileName:** Sample Adult

QuestionText: 1 of 2

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

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

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

Question ID: AHS.331_02.000 **Instrument Variable Name:** AHCL32T **QuestionnaireFileName:** Sample Adult

QuestionText: 2 of 2

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

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

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_AHCL32T
 [if [AHCL32N = Number greater than person years old and AHCL32T= 4]] goto ERR1_AHCL32T

Hard Edit: ERR_AHCL32T

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

2018 NHIS Questionnaire - Sample Adult**Adult Health Status & Limitations**

Document Version Date: 12-Jun-19

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

QuestionText: 1 of 2

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

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

* Enter '95' for 95 or more.

* Enter "96" if since birth.

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

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

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

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

QuestionText: 2 of 2

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

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

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

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

Hard Edit: ERR_AHCL33T
 * Time with condition cannot be greater than age.
 * Please correct.

2018 NHIS Questionnaire - Sample Adult**Adult Health Status & Limitations**

Document Version Date: 12-Jun-19

Question ID: AHS.333_01.000 **Instrument Variable Name:** AHCL34N **QuestionnaireFileName:** Sample Adult

QuestionText: 1 of 2

How long have you had a knee problem?

* Enter number for time with a knee problem.

* Enter '95' for 95 or more.

* Enter "96" if since birth.

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

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

SkipInstructions: <1-95,D>[goto AHCL34T]
 <R>[store "R" in AHCL34T] [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 AHCL34T] [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.333_02.000 **Instrument Variable Name:** AHCL34T **QuestionnaireFileName:** Sample Adult

QuestionText: 2 of 2

* 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

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_AHCL34T
 [if [AHCL34N = Number greater than person years old and AHCL34T= 4]] goto ERR1_AHCL34T

Hard Edit: ERR1_AHCL34T

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

2018 NHIS Questionnaire - Sample Adult**Adult Health Status & Limitations**

Document Version Date: 12-Jun-19

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
 [if [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.

2018 NHIS Questionnaire - Sample Adult**Adult Health Status & Limitations**

Document Version Date: 12-Jun-19

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

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

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

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

QuestionText: 2 of 2

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

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

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

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

Hard Edit: ERR_AHCL90T

* Time with condition cannot be greater than age.

* Please correct.

2018 NHIS Questionnaire - Sample Adult**Adult Health Status & Limitations**

Document Version Date: 12-Jun-19

Question ID: AHS.336_01.000 **Instrument Variable Name:** AHCL91N **QuestionnaireFileName:** Sample Adult

QuestionText: 1 of 2

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)]

Question ID: AHS.336_02.000 **Instrument Variable Name:** AHCL91T **QuestionnaireFileName:** Sample Adult

QuestionText: 2 of 2

* 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 [AHCL91N = 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.

2018 NHIS Questionnaire - Sample Adult

Adult Health Behaviors

Document Version Date: 12-Jun-19

Question ID: AHB.010_00.000 **Instrument Variable Name:** SMKEV **QuestionnaireFileName:** Sample Adult

QuestionText: 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

UniverseText: Sample adults 18+

SkipInstructions: <1>[goto SMKREG]
<2,R,D>[goto ECIGEV2]

Question ID: AHB.020_00.000 **Instrument Variable Name:** SMKREG **QuestionnaireFileName:** Sample Adult

QuestionText: 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

UniverseText: Sample adults 18+ who ever smoked 100 cigarettes

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

Hard Edit: ERR_SMKREG

- * Starting age exceeded current age.
 - * Please correct.
-
-

2018 NHIS Questionnaire - Sample Adult

Adult Health Behaviors

Document Version Date: 12-Jun-19

Question ID: AHB.030_00.000 **Instrument Variable Name:** SMKKNOW **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 ever smoked 100 cigarettes

SkipInstructions: <1>[goto CIGSDA1]
<2>[goto CIGDAMO]
<3>[goto SMKQTNO]
<D,R>[goto ECIGEV2]

Question ID: AHB.040_01.000 **Instrument Variable Name:** SMKQTNO **QuestionnaireFileName:** Sample Adult

QuestionText: 1 of 2

How long has it been since you quit smoking cigarettes?

* Enter number for time since quit smoking.

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

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

UniverseText: Sample adults 18+ who quit smoking

SkipInstructions: <1-95> [goto SMKQTTP]
<D,R> [goto ECIGEV2]

2018 NHIS Questionnaire - Sample Adult**Adult Health Behaviors****Document Version Date: 12-Jun-19**

Question ID: AHB.040_02.000 **Instrument Variable Name:** SMKQTTP **QuestionnaireFileName:** Sample Adult**QuestionText:** 2 of 2

* Enter time period for time since quit smoking.

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

UniverseText: Sample adults 18+ who quit smoking**SkipInstructions:** <1-4> [goto ECIGEV2]
<4> [if SMKQTNO gt (AGE - <15>), goto ERR1_SMKQTTP
if (SMKREG + SMKQTNO gt AGE), goto ERR2_SMKQTTP.**Hard Edit:** ERR2_SMKQTTP* Age started ([Fill1: SMKREG]) + years since quit ([Fill2: SMKQTNO]) exceeds current age ([Fill3: AGE]).
* Please correct.**Soft Edit:** ERR1_SMKQTTP* Respondent quit smoking before age 15?
* Please verify.

Question ID: AHB.050_00.000 **Instrument Variable Name:** CIGSDA1 **QuestionnaireFileName:** Sample Adult**QuestionText:** On the average, how many cigarettes do you now smoke a day?

* Enter '1' if less than 1 cigarette.

* Enter '95' if 95 or more cigarettes.

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

UniverseText: Sample adults 18+ who are current every day smokers**SkipInstructions:** <1-95,R,D> [goto CIGQTYR]

2018 NHIS Questionnaire - Sample Adult

Adult Health Behaviors

Document Version Date: 12-Jun-19

Question ID: AHB.060_00.000 **Instrument Variable Name:** CIGDAMO **QuestionnaireFileName:** Sample Adult

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

*Enter '0' for None.

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

UniverseText: Sample adults 18+ who are current some day smokers

SkipInstructions: <0>[goto CIGQTYR]
<1-30,R,D> [goto CIGSDA2]

Question ID: AHB.070_00.000 **Instrument Variable Name:** CIGSDA2 **QuestionnaireFileName:** Sample Adult

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

* Enter '1' if less than 1.

* Enter '95' if 95 or more cigarettes.

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

UniverseText: Sample adults 18+ who are current some day smokers

SkipInstructions: <1-95,D,R> [goto CIGQTYR]

2018 NHIS Questionnaire - Sample Adult

Adult Health Behaviors

Document Version Date: 12-Jun-19

Question ID: AHB.080_00.000 **Instrument Variable Name:** CIGQTYR **QuestionnaireFileName:** Sample Adult

QuestionText: During the PAST 12 MONTHS, have you stopped smoking for more than one day BECAUSE YOU WERE TRYING TO QUIT SMOKING?

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

UniverseText: Sample adults 18+ who are every day or someday smokers

SkipInstructions: <1,2,R,D> [goto ECIGEV2]

Question ID: AHB.085_00.010 **Instrument Variable Name:** ECIGEV2 **QuestionnaireFileName:** Sample Adult

QuestionText: The next question is about electronic cigarettes or e-cigarettes. You may also know them as vape-pens, hookah-pens, e-hookahs, or e-vaporizers. Some look like cigarettes, and others look like pens or small pipes. These are battery-powered, usually contain liquid nicotine, and produce vapor instead of smoke.

Have you EVER used an e-cigarette EVEN ONE TIME?

*Read if necessary: E-cigarettes and similar products can be bought as one-time, disposable products, as re-usable kits with a cartridge, or with refillable chambers. These usually contain a liquid, often called an "e-liquid" or "e-juice." Popular brands include NJOY, BLU, LOGIC, and VUSE.

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

UniverseText: Sample adults 18+

SkipInstructions: <1> [goto ECIGCUR2]
<2,R,D> [goto CIGAREV2]

2018 NHIS Questionnaire - Sample Adult

Adult Health Behaviors

Document Version Date: 12-Jun-19

Question ID: AHB.085_00.020 **Instrument Variable Name:** ECIGCUR2 **QuestionnaireFileName:** Sample Adult

QuestionText: Do you now use e-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 ever used e-cigarettes

SkipInstructions: <1,R,D> [go to CIGAREV2]
<2,3> [go to ECIG30D2]

Question ID: AHB.085_00.030 **Instrument Variable Name:** ECIG30D2 **QuestionnaireFileName:** Sample Adult

QuestionText: On how many of the PAST 30 DAYS have you used e-cigarettes?

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

UniverseText: Sample adults 18+ who now use e-cigarettes some days or not at all

SkipInstructions: <0-30,R,D> [goto CIGAREV2]

2018 NHIS Questionnaire - Sample Adult

Adult Health Behaviors

Document Version Date: 12-Jun-19

Question ID: AHB.085_00.040 **Instrument Variable Name:** CIGAREV2 **QuestionnaireFileName:** Sample Adult

QuestionText: Have you ever smoked a regular cigar, cigarillo, or a little filtered cigar EVEN ONE TIME?

*Read if necessary: "Cigarillos" are medium cigars that sometimes are sold with plastic or wooden tips. Some common brands are Black and Mild, Swisher Sweets, Dutch Masters and Phillies Blunts. Cigarillos are usually sold individually or in packs of 5 or fewer. Little filtered cigars look like cigarettes and are usually brown in color. Like cigarettes, little filtered cigars have a spongy filter and are sold in packs of 20. Some common brands are Prime Time and Winchester.

*Read if necessary: Do not include electronic cigars or e-cigars.

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

UniverseText: Sample adults 18+

SkipInstructions: <1> [goto CIGCUR2]
<2, R, D> [goto PIPEV2]

Question ID: AHB.085_00.050 **Instrument Variable Name:** CIGCUR2 **QuestionnaireFileName:** Sample Adult

QuestionText: Do you now smoke regular cigars, cigarillos, or little filtered cigars 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 ever smoked a regular cigar, cigarillo, or filtered cigar

SkipInstructions: <1 R,D> [goto PIPEV2]
<2,3> [go to CIG30D2]

2018 NHIS Questionnaire - Sample Adult

Adult Health Behaviors

Document Version Date: 12-Jun-19

Question ID: AHB.085_00.060 **Instrument Variable Name:** CIG30D2 **QuestionnaireFileName:** Sample Adult

QuestionText: On how many of the PAST 30 DAYS have you smoked a regular cigar, cigarillo, or little filtered cigar?

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

UniverseText: Sample adults 18+ who now smoke a regular cigar, cigarillo, or little filtered cigar some days or not at all

SkipInstructions: <0-30,R,D> [goto PIPEV2]

Question ID: AHB.085_00.070 **Instrument Variable Name:** PIPEV2 **QuestionnaireFileName:** Sample Adult

QuestionText: Have you EVER smoked a pipe filled with tobacco-either a regular pipe, water pipe, or hookah EVEN ONE TIME?

*Read if necessary: A hookah is a type of water pipe. It is sometimes called a "narghile" (NAR-ge-lee) pipe. Do not include electronic hookah or e-hookahs.

*Read if necessary: Do not include electronic pipes or e-pipes.

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

UniverseText: Sample adults 18+

SkipInstructions: <1> [goto PIPECUR2]
<2,R,D> [goto SMKLSTB1]

2018 NHIS Questionnaire - Sample Adult

Adult Health Behaviors

Document Version Date: 12-Jun-19

Question ID: AHB.085_00.080 **Instrument Variable Name:** PIPECUR2 **QuestionnaireFileName:** Sample Adult

QuestionText: Do you now smoke pipes filled with tobacco – either regular pipes, water pipes, or hookahs, every day, some days, or not at all?

*Read if necessary: Do not include pipes filled with substances other than tobacco.

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

UniverseText: Sample adults 18+ who have ever smoked a regular pipe, water pipe or hookah filled with tobacco

SkipInstructions: <1-3,R,D> [goto SMKLSTB1]

Question ID: AHB.085_00.090 **Instrument Variable Name:** SMKLSTB1 **QuestionnaireFileName:** Sample Adult

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

Have you ever used smokeless tobacco products EVEN ONE TIME?

*Read if necessary: Do not include nicotine replacement therapy products (such as patch, gum, lozenge, or spray, which are considered smoking cessation treatments.)

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

UniverseText: Sample adults 18+

SkipInstructions: <1> [goto SMKLSCR2]
<2,R,D> [goto VIGNO]

2018 NHIS Questionnaire - Sample Adult**Adult Health Behaviors****Document Version Date: 12-Jun-19**

Question ID: AHB.085_00.100 **Instrument Variable Name:** SMKLSR2 **QuestionnaireFileName:** Sample Adult**QuestionText:** Do you NOW use smokeless tobacco products 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 ever used smokeless tobacco products**SkipInstructions:** <1-3,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]

2018 NHIS Questionnaire - Sample Adult**Adult Health Behaviors****Document Version Date: 12-Jun-19**

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]

2018 NHIS Questionnaire - Sample Adult**Adult Health Behaviors**

Document Version Date: 12-Jun-19

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.

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]

2018 NHIS Questionnaire - Sample Adult**Adult Health Behaviors**Document Version Date: 12-Jun-19

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]

2018 NHIS Questionnaire - Sample Adult**Adult Health Behaviors**

Document Version Date: 12-Jun-19

Question ID: AHB.120_02.000 **Instrument Variable Name:** MODLNGTP **QuestionnaireFileName:** Sample Adult

QuestionText: 2 of 2

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

- 1 Minutes
- 2 Hours
- 7 Refused
- 9 Don't know

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

SkipInstructions: <1,2> goto STRNGNO

if MODLNGNO lt <10> and MODLNGTP eq <1> goto ERR1_MODLNGTP

if MODLNGNO gt <90> and MODLNGTP eq <1> or if MODLNGNO gt <2> and MODLNGTP eq <2> goto ERR2_MODLNGTP

Hard Edit: ERR1_MODLNGTP

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

Soft Edit: ERR2_MODLNGTP

- * [Fill1: MODLNGNO] [Fill2: MODLNGTP] is unusually high.
- * Please verify.

Question ID: AHB.130_01.000 **Instrument Variable Name:** STRNGNO **QuestionnaireFileName:** Sample Adult

QuestionText: How often do you do LEISURE-TIME physical activities specifically designed to STRENGTHEN your muscles such as lifting weights or doing calisthenics? (Include all such activities even if you have mentioned them before.)

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

* Enter number for strengthening activities.

* Enter '0' for Never.

* Enter '996' for Unable to do this type activity

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

UniverseText: Sample adults 18+

SkipInstructions: <1-995>[goto STRNGTP]
<0, 996,R,D>[goto ALC1YR]

2018 NHIS Questionnaire - Sample Adult**Adult Health Behaviors**Document Version Date: 12-Jun-19

Question ID: AHB.130_02.000 **Instrument Variable Name:** STRNGTP **QuestionnaireFileName:** Sample Adult**QuestionText:** 2 of 2

* Enter time period for strengthening activities

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

UniverseText: Sample adults 18+ who do strengthening activities**SkipInstructions:** <1-4> [goto ALC1YR]
[If (STRNGNO gt <4> & STRNGTP = <1>) or (STRNGNO gt <28> & STRNGTP = <2>) or
(STRNGNO gt <31> & STRNGTP = <3>) or (STRNGNO gt <365> & STRNGTP = <4>) goto ERR_STRNGTP]**Soft Edit:** ERR_STRNGTP* [Fill1: STRNGNO] times per [Fill2: STRNGTP] is unusually high.
* Please verify.

Question ID: AHB.140_00.000 **Instrument Variable Name:** ALC1YR **QuestionnaireFileName:** Sample Adult**QuestionText:** These next questions are about drinking alcoholic beverages. Included are liquor such as whiskey or gin, beer, wine, wine coolers, and any other type of alcoholic beverage.

In ANY ONE YEAR, have you had at least 12 drinks of any type of alcoholic beverage?

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

UniverseText: Sample adults 18+**SkipInstructions:** <1> [goto ALC12MNO]
<2,R,D> [goto ALCLIFE]

2018 NHIS Questionnaire - Sample Adult

Adult Health Behaviors

Document Version Date: 12-Jun-19

Question ID: AHB.150_00.000 **Instrument Variable Name:** ALCLIFE **QuestionnaireFileName:** Sample Adult

QuestionText: 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

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

SkipInstructions: <1> [goto ALC12MNO]
<2,R,D> [goto AHGT_FT]

Question ID: AHB.160_01.000 **Instrument Variable Name:** ALC12MNO **QuestionnaireFileName:** Sample Adult

QuestionText: 1 of 2

In the PAST YEAR, how often did you drink any type of alcoholic beverage?

* Read if necessary: "How many days per week, per month or per year did you drink?"

* Enter number for how often alcoholic beverages were consumed in the past year.

*Enter '0' for Never.

- 000 Never
- 001-365 1-365 days
- 997 Refused
- 999 Don't know

UniverseText: Sample adults 18+ who have had at least 12 drinks in any one year or at least 12 drinks in their entire life

SkipInstructions: <1-365>[goto ALC12MTP]
<0,D,R>[goto AHGT_FT]

2018 NHIS Questionnaire - Sample Adult**Adult Health Behaviors**

Document Version Date: 12-Jun-19

Question ID: AHB.160_02.000 **Instrument Variable Name:** ALC12MTP **QuestionnaireFileName:** Sample Adult

QuestionText: 2 of 2

* Enter time period for how often alcoholic beverages were consumed in the past year.

- 0 Never/None
- 1 Week
- 2 Month
- 3 Year
- 7 Refused
- 9 Don't know

UniverseText: Sample adults 18+ who drank at least once in the past year

SkipInstructions: <1-3> [goto ALCAMT]

[If (ALC12MNO gt <7> & ALC12MTP = <1>) or (ALC12MNO gt <31> & ALC12MTP = <2>) or (ALC12MNO gt <365> & ALC12MTP = <3>) goto ERR_ALC12MTP]

Hard Edit: ERR_ALC12MTP

* [Fill1: ALC12MNO] days per [Fill2: ALC12MTP] exceeds number possible in this time period.
* Please correct.

Question ID: AHB.170_00.000 **Instrument Variable Name:** ALCAMT **QuestionnaireFileName:** Sample Adult

QuestionText: In the PAST YEAR, on those days that you drank alcoholic beverages, on the average, how many drinks did you have?

* Enter '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

2018 NHIS Questionnaire - Sample Adult

Adult Health Behaviors

Document Version Date: 12-Jun-19

Question ID: AHB.180_01.000 **Instrument Variable Name:** ALC5UPNO **QuestionnaireFileName:** Sample Adult

QuestionText: ? [F1]

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.

000	Never/None
001-365	1-365 days
997	Refused
999	Don't know

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]

2018 NHIS Questionnaire - Sample Adult**Adult Health Behaviors**

Document Version Date: 12-Jun-19

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

Hard Edit: ERR1_ALC5UPTP
 * [Fill1: ALC5UPNO] days per [Fill2: ALC5UPTP] exceeds number possible in this time period.
 * Please correct
 ERR2_ALC5UPTP
 * Number of days had [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 on an occasion in the past 30 days

SkipInstructions: <0-60,R,D> [goto AHGT_FT]

2018 NHIS Questionnaire - Sample Adult**Adult Health Behaviors**

Document Version Date: 12-Jun-19

Question ID: AHB.190_01.000 **Instrument Variable Name:** AHGT_FT **QuestionnaireFileName:** Sample Adult

QuestionText: How tall are you without shoes?

* Enter "M" to record metric measurements

02-07 2-7 feet
97 Refused
99 Don't know

UniverseText: Sample adults 18+

SkipInstructions: <2-7> [goto AHGT_IN]
<R.D> [goto AWGT_LB]
<M> [goto AHGT_M]
[if AHGT_FT NE<2-7,R,D,M> goto ERR1_AHGT_FT]
[if AHGT_FT = <2,3> goto ERR2_AHGT_FT]

Hard Edit: ERR1_AHGT_FT

* Only 2-7, Don't Know/Refused or M allowed in this field.
* Please correct.

Soft Edit: ERR2_AHGT_FT

* Respondent's height in feet is [fill: AHGT_FT]?
* Please verify.

Question ID: AHB.190_02.000 **Instrument Variable Name:** AHGT_IN **QuestionnaireFileName:** Sample Adult

QuestionText: How tall are you without shoes?

* Enter '0' if exactly [fill: AHGT_FT] feet tall.

00-11 0-11 inches
97 Refused
99 Don't know

UniverseText: Sample adults 18+ who answered their height in feet

SkipInstructions: <empty> goto ERR_AHGT_IN
<0-11,R,D> if (SEX = '1' and (AHTINCH lt '61' or AHTINCH gt '75')) or
(SEX = '2' and (AHTINCH lt '56' or AHTINCH gt '69'))
goto ERR2_AHGT_IN
else
goto AWGT_LB

Hard Edit: ERR1_AHGT_IN

* If [fill: AHGT_FT] feet exactly, enter "0"; otherwise enter number of inches.

Soft Edit: ERR2_AHGT_IN

* Please verify that the height was entered correctly. Probe only if necessary.

2018 NHIS Questionnaire - Sample Adult**Adult Health Behaviors**

Document Version Date: 12-Jun-19

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.

2018 NHIS Questionnaire - Sample Adult**Adult Health Behaviors****Document Version Date: 12-Jun-19**

Question ID: AHB.200_01.000 **Instrument Variable Name:** AWGT_LB **QuestionnaireFileName:** Sample Adult**QuestionText:** How much do you weigh without shoes?

* Enter "M" to record metric measurements

* Enter '500' for 500 pounds or more

050-500 50-500 pounds**997** Refused**999** Don't know**M** Metric**UniverseText:** Sample adults 18+**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.

2018 NHIS Questionnaire - Sample Adult**Adult Health Behaviors****Document Version Date: 12-Jun-19**

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

023-226 23-226 kilograms**997** Refused**999** Don't know**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.

2018 NHIS Questionnaire - Sample Adult
Adult Access to Health Care & Utilization

Document Version Date: 12-Jun-19

Question ID: AAU.020_00.000 **Instrument Variable Name:** AUSUALPL **QuestionnaireFileName:** Sample Adult

QuestionText: Is there a place that you USUALLY go to when you are sick or need advice about your health?

- 1 Yes
- 2 There is NO place
- 3 There is MORE THAN ONE place
- 7 Refused
- 9 Don't know

UniverseText: Sample adults 18+

SkipInstructions: <1,3> [goto APLKIND]
<2,R,D> [goto AHCPLKND]

Question ID: AAU.030_00.000 **Instrument Variable Name:** APLKIND **QuestionnaireFileName:** Sample Adult

QuestionText: [Fill1: What kind of place is it - a clinic, doctor's office, emergency room, or some other place?

[Fill2: What kind of place do you go to most often - a clinic, doctor's office, emergency room, or some other place?]

- 1 Clinic or health center
- 2 Doctor's office or HMO
- 3 Hospital emergency room
- 4 Hospital outpatient department
- 5 Some other place
- 6 Doesn't go to one place most often
- 7 Refused
- 9 Don't know

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

SkipInstructions: <1-5> [go to AHCPLROU]
<6,R,D> [go to AHCPLKND]

2018 NHIS Questionnaire - Sample Adult
Adult Access to Health Care & Utilization

Document Version Date: 12-Jun-19

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 AHCDLY_1]
ELSE if AUSUALPL=1,3 [goto AHCCHGYR]

2018 NHIS Questionnaire - Sample Adult

Adult Access to Health Care & Utilization

Document Version Date: 12-Jun-19

Question ID: AAU.040_00.000 **Instrument Variable Name:** AHCCHGYR **QuestionnaireFileName:** Sample Adult

QuestionText: 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

UniverseText: 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]

SkipInstructions: <1>[goto AHCCHGHI]
<2,R,D>[goto AHCDLY_1]

Question ID: AAU.050_00.000 **Instrument Variable Name:** AHCCHGHI **QuestionnaireFileName:** Sample Adult

QuestionText: Was this change for a reason related to health insurance?

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

UniverseText: 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

SkipInstructions: <1,2,R,D> [goto AHCDLY_1]

2018 NHIS Questionnaire - Sample Adult
Adult Access to Health Care & Utilization

Document Version Date: 12-Jun-19

Question ID: AAU.061_01.000 **Instrument Variable Name:** AHCDLY_1 **QuestionnaireFileName:** Sample Adult

QuestionText:

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

UniverseText: Sample adults 18+

SkipInstructions: <1,2,R,D>[goto AHCDLY_2]

Question ID: AAU.061_02.000 **Instrument Variable Name:** AHCDLY_2 **QuestionnaireFileName:** Sample Adult

QuestionText: * Read Lead-in if Necessary

There are many reasons people delay getting medical care. Have you delayed getting care for any of the following reasons in the PAST 12 MONTHS?

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

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

UniverseText: Sample adults 18+

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

2018 NHIS Questionnaire - Sample Adult
Adult Access to Health Care & Utilization

Document Version Date: 12-Jun-19

Question ID: AAU.061_03.000 **Instrument Variable Name:** AHCDLY_3 **QuestionnaireFileName:** Sample Adult

QuestionText: * Read Lead-in if Necessary

There are many reasons people delay getting medical care. Have you delayed getting care for any of the following reasons in the PAST 12 MONTHS?

...Once you get there, you have to wait too long to see the doctor.

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

UniverseText: Sample adults 18+

SkipInstructions: <1,2,R,D>[goto AHCDLY_4]

Question ID: AAU.061_04.000 **Instrument Variable Name:** AHCDLY_4 **QuestionnaireFileName:** Sample Adult

QuestionText: * Read Lead-in if Necessary

There are many reasons people delay getting medical care. Have you delayed getting care for any of the following reasons in the PAST 12 MONTHS?

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

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

UniverseText: Sample adults 18+

SkipInstructions: <1,2,R,D>[goto AHCDLY_5]

2018 NHIS Questionnaire - Sample Adult
Adult Access to Health Care & Utilization

Document Version Date: 12-Jun-19

Question ID: AAU.061_05.000 **Instrument Variable Name:** AHCDLY_5 **QuestionnaireFileName:** Sample Adult

QuestionText: * Read Lead-in if Necessary

There are many reasons people delay getting medical care. Have you delayed getting care for any of the following reasons in the PAST 12 MONTHS?

...You didn't have transportation.

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

UniverseText: Sample adults 18+

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

Question ID: AAU.111_01.000 **Instrument Variable Name:** AHCAFY_1 **QuestionnaireFileName:** Sample Adult

QuestionText: DURING THE PAST 12 MONTHS, was there any time when you needed any of the following, but didn't get it because you couldn't afford it?

...Prescription medicines.

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

UniverseText: Sample adults 18+

SkipInstructions: <1,2,R,D>[goto AHCAFY_2]

2018 NHIS Questionnaire - Sample Adult
Adult Access to Health Care & Utilization

Document Version Date: 12-Jun-19

Question ID: AAU.111_02.000 **Instrument Variable Name:** AHCAFY_2 **QuestionnaireFileName:** Sample Adult

QuestionText: * 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.

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

UniverseText: Sample adults 18+

SkipInstructions: <1,2,R,D>[goto AHCAFY_3]

Question ID: AAU.111_03.000 **Instrument Variable Name:** AHCAFY_3 **QuestionnaireFileName:** Sample Adult

QuestionText: * 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).

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

UniverseText: Sample adults 18+

SkipInstructions: <1,2,R,D>[goto AHCAFY_4]

2018 NHIS Questionnaire - Sample Adult
Adult Access to Health Care & Utilization

Document Version Date: 12-Jun-19

Question ID: AAU.111_04.000 **Instrument Variable Name:** AHCAFY_4 **QuestionnaireFileName:** Sample Adult

QuestionText: * 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?

...Eyeglasses.

- 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 ARX12MO]

2018 NHIS Questionnaire - Sample Adult

Adult Access to Health Care & Utilization

Document Version Date: 12-Jun-19

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]

2018 NHIS Questionnaire - Sample Adult
Adult Access to Health Care & Utilization

Document Version Date: 12-Jun-19

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]

2018 NHIS Questionnaire - Sample Adult
Adult Access to Health Care & Utilization

Document Version Date: 12-Jun-19

Question ID: AAU.127_04.010 **Instrument Variable Name:** ARX12_4 **QuestionnaireFileName:** Sample Adult

QuestionText: *Read if necessary.

DURING THE PAST 12 MONTHS, were any of the following true for you?

... You asked your doctor for a lower cost medication to save money.

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

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

SkipInstructions: <1,2,R,D>[goto ARX12_5]

Question ID: AAU.127_05.010 **Instrument Variable Name:** ARX12_5 **QuestionnaireFileName:** Sample Adult

QuestionText: DURING THE PAST 12 MONTHS, were any of the following true for you?

... You bought prescription drugs from another country to save money.

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

UniverseText: Sample adults 18+

SkipInstructions: <1,2,R,D>[goto ARX12_6]

2018 NHIS Questionnaire - Sample Adult
Adult Access to Health Care & Utilization

Document Version Date: 12-Jun-19

Question ID: AAU.127_06.010 **Instrument Variable Name:** ARX12_6 **QuestionnaireFileName:** Sample Adult

QuestionText: *Read if necessary.

DURING THE PAST 12 MONTHS, were any of the following true for you?

... You used alternative therapies to save money.

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

UniverseText: Sample adults 18+

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

Question ID: AAU.135_00.000 **Instrument Variable Name:** ADENLONG **QuestionnaireFileName:** Sample Adult

QuestionText: (book) A7

About how long has it been since you last saw a dentist? Include all types of dentists, such as orthodontists, oral surgeons, and all other dental specialists, as well as dental hygienists.

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

UniverseText: Sample adults 18+

SkipInstructions: <0-5,R,D>[goto AHCSY1_1]

2018 NHIS Questionnaire - Sample Adult
Adult Access to Health Care & Utilization

Document Version Date: 12-Jun-19

Question ID: AAU.141_01.000 **Instrument Variable Name:** AHCSY1_1 **QuestionnaireFileName:** Sample Adult

QuestionText: DURING THE PAST 12 MONTHS, have you seen or talked to any of the following health care providers about your own health?

...A mental health professional such as a psychiatrist, psychologist, psychiatric nurse, or clinical social worker.

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

UniverseText: Sample adults 18+

SkipInstructions: <1,2,R,D>[goto AHCSY1_2]

Question ID: AAU.141_02.000 **Instrument Variable Name:** AHCSY1_2 **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?

...An optometrist, ophthalmologist (AHF-thal-MOL-oh-jist), or eye doctor (someone who prescribes eyeglasses).

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

UniverseText: Sample adults 18+

SkipInstructions: <1,2,R,D>[goto AHCSY1_3]

2018 NHIS Questionnaire - Sample Adult
Adult Access to Health Care & Utilization

Document Version Date: 12-Jun-19

Question ID: AAU.141_03.000 **Instrument Variable Name:** AHCSY1_3 **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 foot doctor.

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

UniverseText: Sample adults 18+

SkipInstructions: <1,2,R,D>[goto AHCSY1_4]

Question ID: AAU.141_04.000 **Instrument Variable Name:** AHCSY1_4 **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 chiropractor.

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

UniverseText: Sample adults 18+

SkipInstructions: <1,2,R,D>[goto AHCSY1_5]

2018 NHIS Questionnaire - Sample Adult
Adult Access to Health Care & Utilization

Document Version Date: 12-Jun-19

Question ID: AAU.141_05.000 **Instrument Variable Name:** AHCSY1_5 **QuestionnaireFileName:** Sample Adult

QuestionText: * Read Lead-in if Necessary.

DURING THE PAST 12 MONTHS, have you seen or talked to any of the following health care providers about your own health?

...A physical therapist, speech therapist, respiratory therapist, audiologist, or occupational therapist.

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

UniverseText: Sample adults 18+

SkipInstructions: <1,2,R,D>[goto AHCSY1_6]

Question ID: AAU.141_06.000 **Instrument Variable Name:** AHCSY1_6 **QuestionnaireFileName:** Sample Adult

QuestionText: * Read Lead-in if Necessary.

DURING THE PAST 12 MONTHS, have you seen or talked to any of the following health care providers about your own health?

...A nurse practitioner, physician assistant, or midwife.

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

UniverseText: Sample adults 18+

SkipInstructions: <1,2,R,D>[if SEX=1 goto AHCSY8_8;
else if SEX=2 goto AHCSYR7]

2018 NHIS Questionnaire - Sample Adult
Adult Access to Health Care & Utilization

Document Version Date: 12-Jun-19

Question ID: AAU.200_00.000 **Instrument Variable Name:** AHCSYR7 **QuestionnaireFileName:** Sample Adult

QuestionText: * Read lead-in if necessary.

DURING THE PAST 12 MONTHS, have you seen or talked to any of the following health care providers about your own health?

...A doctor who specializes in women's health (an obstetrician/gynecologist).

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

UniverseText: Sample female adults aged 18+ years

SkipInstructions: <1,2,R,D> [go to AHCSY8_ 8]

Question ID: AAU.211_01.000 **Instrument Variable Name:** AHCSY8_8 **QuestionnaireFileName:** Sample Adult

QuestionText: * Read Lead-in if Necessary.

DURING THE PAST 12 MONTHS, have you seen or talked to any of the following health care providers about your own health?

...A medical doctor who specializes in a particular medical disease or problem (other than obstetrician/gynecologist, psychiatrist, or ophthalmologist).

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

UniverseText: Sample adults 18+

SkipInstructions: <1,2,R,D> [go to AHCSY8_ 9]

2018 NHIS Questionnaire - Sample Adult
Adult Access to Health Care & Utilization

Document Version Date: 12-Jun-19

Question ID: AAU.211_02.000 **Instrument Variable Name:** AHCSY8_9 **QuestionnaireFileName:** Sample Adult

QuestionText: * Read Lead-in if Necessary.

DURING THE PAST 12 MONTHS, have you seen or talked to any of the following health care providers about your own health?

...A general doctor who treats a variety of illnesses (a doctor in general practice, family medicine, or internal medicine)?

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

UniverseText: Sample adults 18+

SkipInstructions: <1> [goto AHCSYR10]
<2,R,D> [goto AHERNOYR]

Question ID: AAU.230_00.000 **Instrument Variable Name:** AHCSYR10 **QuestionnaireFileName:** Sample Adult

QuestionText: Does that doctor treat children and adults (a doctor in general practice or family medicine)?

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

UniverseText: Sample adults 18+ who have seen or talked to a general doctor during the past 12 months

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

2018 NHIS Questionnaire - Sample Adult

Adult Access to Health Care & Utilization

Document Version Date: 12-Jun-19

Question ID: AAU.240_00.000 **Instrument Variable Name:** AHERNOYR **QuestionnaireFileName:** Sample Adult

QuestionText: (book) A9

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: <0,1-8,R,D> [go to 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]

2018 NHIS Questionnaire - Sample Adult
Adult Access to Health Care & Utilization

Document Version Date: 12-Jun-19

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) A9

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 AHCNOYR]

2018 NHIS Questionnaire - Sample Adult
Adult Access to Health Care & Utilization

Document Version Date: 12-Jun-19

Question ID: AAU.280_00.000 **Instrument Variable Name:** AHCNOYR **QuestionnaireFileName:** Sample Adult

QuestionText: (book) A8

DURING THE PAST 12 MONTHS, HOW MANY TIMES have you seen a doctor or other health care professional about your own health at a DOCTOR'S OFFICE, A CLINIC, OR SOME OTHER PLACE? Do not include times you were hospitalized overnight, visits to hospital emergency rooms, home visits, dental visits, or telephone calls.

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.

1	Yes
2	No
7	Refused
9	Don't know

UniverseText: Sample adults 18+

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

2018 NHIS Questionnaire - Sample Adult
Adult Access to Health Care & Utilization

Document Version Date: 12-Jun-19

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: ERR_ASGYR

* {ASRGNOYR} is an unusually large number.

* Please verify.

Question ID: AAU.305_00.000 **Instrument Variable Name:** AMDLONG **QuestionnaireFileName:** Sample Adult

QuestionText: (book) A7 ? [F1]

About how long has it been since you last saw or talked to a doctor or other health care professional about your own health? Include doctors seen while a patient in a hospital.

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

UniverseText: Sample adults 18+

SkipInstructions: <0-5,R,D> [goto HIT1A]

2018 NHIS Questionnaire - Sample Adult
Adult Access to Health Care & Utilization

Document Version Date: 12-Jun-19

Question ID: AAU.309_00.010 **Instrument Variable Name:** HIT1A **QuestionnaireFileName:** Sample Adult

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

...Look up health information on the Internet.

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

UniverseText: Sample adults 18+

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

Question ID: AAU.309_00.020 **Instrument Variable Name:** HIT2A **QuestionnaireFileName:** Sample Adult

QuestionText: *Read if necessary..

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

...Fill a prescription.

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

UniverseText: Sample adults 18+

SkipInstructions: <1,2,R,D> [goto HIT3A]

2018 NHIS Questionnaire - Sample Adult
Adult Access to Health Care & Utilization

Document Version Date: 12-Jun-19

Question ID: AAU.309_00.030 **Instrument Variable Name:** HIT3A **QuestionnaireFileName:** Sample Adult

QuestionText: *Read if necessary..

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

...Schedule an appointment with a health care provider.

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

UniverseText: Sample adults 18+

SkipInstructions: <1,2,R,D> [goto HIT4A]

Question ID: AAU.309_00.040 **Instrument Variable Name:** HIT4A **QuestionnaireFileName:** Sample Adult

QuestionText: *Read if necessary..

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

...Communicate with a health care provider by email.

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

UniverseText: Sample adults 18+

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

2018 NHIS Questionnaire - Sample Adult
Adult Access to Health Care & Utilization

Document Version Date: 12-Jun-19

Question ID: AAU.310_00.000 **Instrument Variable Name:** FLUVACYR **QuestionnaireFileName:** Sample Adult

QuestionText: ?[F1]

DURING THE PAST 12 MONTHS, have you had a flu vaccination? A flu vaccination is usually given in the fall and protects against influenza for the flu season.

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

UniverseText: Sample adults 18+

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

Question ID: AAU.311_00.000 **Instrument Variable Name:** FLUVACTP **QuestionnaireFileName:** Sample Adult

QuestionText: Was this a shot, or was it a vaccine sprayed in the nose?

* Read if necessary: A flu shot is injected in the arm.

*Read if necessary: The flu nasal spray is called FluMist™

- 1 Flu shot
- 2 Flu nasal spray (spray, mist or drop in nose)
- 7 Refused
- 9 Don't know

UniverseText: Sample adults 18+ who have received a flu vaccination in the past year

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

2018 NHIS Questionnaire - Sample Adult
Adult Access to Health Care & Utilization

Document Version Date: 12-Jun-19

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

QuestionText: 1 of 2

During what month and year did you receive your most recent flu vaccination?

- 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 vaccination in the past 12 months, regardless of type

SkipInstructions: <1-12,D> [goto FLUVAC_Y]
<R> if FLUVACTP=1 and PREGNOW=1 and INTERVIEW_MONTH=1-3,8-12 [goto FLUSHPG1];
 else if FLUVACTP=1 and PREGNOW=1 and INTERVIEW_MONTH=4-7 or PREGFLYR=1 [goto
FLUSHPG2];
 else [goto SHTPNUYR]

2018 NHIS Questionnaire - Sample Adult
Adult Access to Health Care & Utilization

Document Version Date: 12-Jun-19

Question ID: AAU.312_02.000 **Instrument Variable Name:** FLUVAC_Y **QuestionnaireFileName:** Sample Adult

QuestionText: 2 of 2

*Enter year of most recent flu vaccination.

Year	Year
9997	Refused
9999	Don't know

UniverseText: Sample adults 18+ who gave a month for their last flu vaccination or who didn't know the month

SkipInstructions: <valid year,R,D> if FLUVACTP=1 and PREGNOW=1 and INTERVIEW_MONTH=1-3,8-12 [goto FLUSHPG1];
 else if FLUVACTP=1 and PREGNOW=1 and INTERVIEW_MONTH=4-7 or PREGFLYR=1 [goto FLUSHPG2];
 else [goto SHTPNUYR]

[If FLUVAC_M and FLUVAC_Y = a future date [goto ERR1_FLUVAC_Y]
 [If FLUVAC_M and FLUVAC_Y = a date prior to birth [goto ERR2_FLUVAC_Y]
 [If FLUVAC_M and FLUVAC_Y = a date before 12 months ago [goto ERR3_FLUVAC_Y]

Hard Edit: ERR1_FLUVAC_Y

*Future date invalid

ERR2_FLUVAC_Y

*Date before birth

ERR3_FLUVAC_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?

1	Before this pregnancy
2	During this pregnancy
7	Refused
9	Don't know

UniverseText: Female sample adults 18-49 who are currently pregnant and are interviewed January-March or August-December and received a flu shot in the past 12 months

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

2018 NHIS Questionnaire - Sample Adult

Adult Access to Health Care & Utilization

Document Version Date: 12-Jun-19

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 and received a flu shot in the past 12 months

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

Question ID: AAU.320_00.000 **Instrument Variable Name:** SHTPNUYR **QuestionnaireFileName:** Sample Adult

QuestionText: Have you EVER had a pneumonia shot?

This shot is usually given only once or twice in a person's lifetime and is different from the flu shot. It is also called the pneumococcal vaccine.

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

UniverseText: Sample adults 18+

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

2018 NHIS Questionnaire - Sample Adult
Adult Access to Health Care & Utilization

Document Version Date: 12-Jun-19

Question ID: AAU.325_00.010 **Instrument Variable Name:** SHTPNEUN **QuestionnaireFileName:** Sample Adult

QuestionText: How many pneumonia shots have you ever had?

- 01-50 1-50 shots
- 97 Refused
- 99 Don't know

UniverseText: Sample adults 18+ who have ever had a pneumonia shot

SkipInstructions: <1-50,R,D> [goto APOX]

Question ID: AAU.330_00.000 **Instrument Variable Name:** APOX **QuestionnaireFileName:** Sample Adult

QuestionText: Have you EVER had chickenpox?

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

UniverseText: Sample adults 18+

SkipInstructions: <1> [goto APOX12MO]
<2,R,D> [goto AHEP]

Question ID: AAU.340_00.000 **Instrument Variable Name:** APOX12MO **QuestionnaireFileName:** Sample Adult

QuestionText: Have you had chickenpox in the PAST 12 MONTHS?

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

UniverseText: Sample adults 18+ who have ever had chickenpox

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

2018 NHIS Questionnaire - Sample Adult
Adult Access to Health Care & Utilization

Document Version Date: 12-Jun-19

Question ID: AAU.350_00.000 **Instrument Variable Name:** AHEP **QuestionnaireFileName:** Sample Adult

QuestionText: Have you EVER had hepatitis?

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

UniverseText: Sample adults 18+

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

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 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]

2018 NHIS Questionnaire - Sample Adult
Adult Access to Health Care & Utilization

Document Version Date: 12-Jun-19

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> if AGE GE 50 [goto SHINGLE1];
else if AGE LT 50 [goto SHTTD]

2018 NHIS Questionnaire - Sample Adult
Adult Access to Health Care & Utilization

Document Version Date: 12-Jun-19

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> if AGE GE 50 [goto SHINGLE1];
else if AGE LT 50 [goto SHTTD]

Question ID: AAU.410_00.010 **Instrument Variable Name:** SHINGLE1 **QuestionnaireFileName:** Sample Adult

QuestionText: Shingles is an illness that results in a rash or blisters on the skin, and is usually painful. There are two vaccines now available for shingles; Zostavax®, which requires 1 shot, and Shingrix®, a new vaccine which requires 2 shots. Have you had a vaccine for shingles?

1	Yes
2	No
7	Refused
9	Don't know

UniverseText: Sample adults 50+

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

Question ID: AAU.410_00.020 **Instrument Variable Name:** ZOSTAVAX **QuestionnaireFileName:** Sample Adult

QuestionText: Have you ever had Zostavax®, the shingles vaccine that requires one shot?

1	Yes
2	No
7	Refused
9	Don't know

UniverseText: Sample adults 50+ who have had a shingles vaccine

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

2018 NHIS Questionnaire - Sample Adult
Adult Access to Health Care & Utilization

Document Version Date: 12-Jun-19

Question ID: AAU.410_00.030 **Instrument Variable Name:** ZOSTAYR **QuestionnaireFileName:** Sample Adult

QuestionText: What year did you get your most recent Zostavax® shot?

Year	Year
9997	Refused
9999	Don't know

UniverseText: Sample adults 50+ who have had a Zostavax® vaccine

SkipInstructions: <1900-2030> if future date [goto ERR1_ZOSTAYR]
elseif date before birth [goto ERR2_ZOSTAYR]
else [goto SHINGRIX]
<R,D> [goto ZOSTAWHN]

Hard Edit: ERR1_ZOSTAYR

*Future date invalid

ERR2_ZOSTAYR

*Date before birth

Question ID: AAU.410_00.040 **Instrument Variable Name:** ZOSTAWHN **QuestionnaireFileName:** Sample Adult

QuestionText: Was it in 2018 or before 2018?

1	In 2018
2	Before 2018
7	Refused
9	Don't know

UniverseText: Sample Adults 50+ and older who don't know or refused the year they had a Zostavax® vaccination

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

2018 NHIS Questionnaire - Sample Adult
Adult Access to Health Care & Utilization

Document Version Date: 12-Jun-19

Question ID: AAU.410_00.050 **Instrument Variable Name:** SHINGRIX **QuestionnaireFileName:** Sample Adult

QuestionText: Have you ever had Shingrix®, the new shingles vaccine which requires 2 shots?

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

UniverseText: Sample adults 50+ who have had a shingles vaccine

SkipInstructions: <1> [goto SHINGRNB]
<2,R,D> else [goto SHTTD]

Question ID: AAU.410_00.060 **Instrument Variable Name:** SHINGRNB **QuestionnaireFileName:** Sample Adult

QuestionText: How many Shingrix® shots have you ever had?

- 1 One Shingrix® shot
- 2 Two Shingrix® shots
- 7 Refused
- 9 Don't know

UniverseText: Sample adults 50+ who have had a Shingrix® vaccine

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

2018 NHIS Questionnaire - Sample Adult
Adult Access to Health Care & Utilization

Document Version Date: 12-Jun-19

Question ID: AAU.410_00.070 **Instrument Variable Name:** SHINGRYR **QuestionnaireFileName:** Sample Adult

QuestionText: What year did you get your most recent Shingrix® shot?

Year	Year
9997	Refused
9999	Don't know

UniverseText: Sample adults 50+ who have had a Shingrix® vaccine

SkipInstructions: <1900-2030> if future date [goto ERR1_SHINGRYR]
elseif date before birth [goto ERR2_SHINGRYR]
else [goto SHTTD]
<R,D> [goto SHINGWHN]

Hard Edit: ERR1_SHINGRYR

*Future date invalid

ERR2_SHINGRYR

*Date before birth

Question ID: AAU.410_00.080 **Instrument Variable Name:** SHINGWHN **QuestionnaireFileName:** Sample Adult

QuestionText: Was it in 2018 or before 2018?

1	In 2018
2	Before 2018
7	Refused
9	Don't know

UniverseText: Sample Adults 50+ and older who don't know or refused the year they had a Shingrix® vaccination

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

2018 NHIS Questionnaire - Sample Adult
Adult Access to Health Care & Utilization

Document Version Date: 12-Jun-19

Question ID: AAU.420_00.010 **Instrument Variable Name:** SHTTD **QuestionnaireFileName:** Sample Adult

QuestionText: 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 SHTTDAP]
<2,R,D> and AGE >64 [goto LIVEV]
Else if <2,R,D> and AGE<65 [goto SHTHPV2]

Question ID: AAU.440_00.010 **Instrument Variable Name:** SHTTDAP **QuestionnaireFileName:** Sample Adult

QuestionText: 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

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

SkipInstructions: <1-3,R,D> if age le 64 [goto SHTHPV2];
else [goto LIVEV]

2018 NHIS Questionnaire - Sample Adult
Adult Access to Health Care & Utilization

Document Version Date: 12-Jun-19

Question ID: AAU.446_00.010 **Instrument Variable Name:** SHTHPV2 **QuestionnaireFileName:** Sample Adult

QuestionText: 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

UniverseText: Sample adults LE 64

SkipInstructions: <1> [goto SHHPVDOS]
<2,3,R,D> [goto LIVEV]

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

QuestionText: How many HPV shots did you receive?

* Enter '50' if 50 or more shots

* Enter '96' for all shots

- 01-49 1-49 shots
- 50 50+ shots
- 96 All shots
- 97 Refused
- 99 Don't know

UniverseText: Sample adults LE 64 who received an HPV shot

SkipInstructions: <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.

2018 NHIS Questionnaire - Sample Adult
Adult Access to Health Care & Utilization

Document Version Date: 12-Jun-19

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

QuestionText: How old were you when you received your first HPV shot?

- 008-064 8-64 years
- 997 Refused
- 999 Don't know

UniverseText: Sample adults LE 64 who received an HPV shot

SkipInstructions: <8-64,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]

2018 NHIS Questionnaire - Sample Adult
Adult Access to Health Care & Utilization

Document Version Date: 12-Jun-19

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]

2018 NHIS Questionnaire - Sample Adult
Adult Access to Health Care & Utilization

Document Version Date: 12-Jun-19

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> [goto next section]

2018 NHIS Questionnaire - Sample Adult

Adult Selected Items

Document Version Date: 12-Jun-19

Question ID: ASI.005_00.000 **Instrument Variable Name:** ASIINTRO **QuestionnaireFileName:** Sample Adult

QuestionText: *You are about to enter the Sexual Identity and Lifestyle questions section. This section includes questions on computer use, the respondent's neighborhood, sexual identity, financial worries, mental health, and HIV testing.

*Enter 1 to Continue.

1 Continue

UniverseText: Sample adults 18+

SkipInstructions: <1> goto ACICPUSE

Question ID: ASI.130_00.000 **Instrument Variable Name:** ACICPUSE **QuestionnaireFileName:** Sample Adult

QuestionText: These questions are about you and your neighborhood.

How often do you use a computer?

*Read answer categories.

1 Never or almost never

2 Some days

3 Most days

4 Every day

7 Refused

9 Don't know

UniverseText: Sample adults 18+

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

2018 NHIS Questionnaire - Sample Adult

Adult Selected Items

Document Version Date: 12-Jun-19

Question ID: ASI.140_00.000 **Instrument Variable Name:** ACISATHC **QuestionnaireFileName:** Sample Adult

QuestionText: In general, how satisfied are you with the health care you received in the past 12 months?

*Read answer categories.

- 1 Very satisfied
- 2 Somewhat satisfied
- 3 Somewhat dissatisfied
- 4 Very dissatisfied
- 5 You haven't had health care in the past 12 months
- 7 Refused
- 9 Don't know

UniverseText: Sample adults 18+

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

Question ID: ASI.150_00.000 **Instrument Variable Name:** ACITENUR **QuestionnaireFileName:** Sample Adult

QuestionText: About how long have you lived in your present neighborhood?

- 1 Less than 1 year
- 2 1-3 years
- 3 4-10 years
- 4 11-20 years
- 5 More than 20 years
- 7 Refused
- 9 Don't know

UniverseText: Sample adults 18+

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

2018 NHIS Questionnaire - Sample Adult

Adult Selected Items

Document Version Date: 12-Jun-19

Question ID: ASI.160_00.000 **Instrument Variable Name:** ACINHELP **QuestionnaireFileName:** Sample Adult

QuestionText: How much do you agree or disagree with the following statements about your neighborhood?

People in this neighborhood help each other out.

Would you say...

*Read answer categories.

- 1 Definitely agree
- 2 Somewhat agree
- 3 Somewhat disagree
- 4 Definitely disagree
- 7 Refused
- 9 Don't know

UniverseText: Sample adults 18+

SkipInstructions: <1-4,R,D> [goto ACINCNT0]

Question ID: ASI.170_00.000 **Instrument Variable Name:** ACINCNT0 **QuestionnaireFileName:** Sample Adult

QuestionText: *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

UniverseText: Sample adults 18+

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

2018 NHIS Questionnaire - Sample Adult

Adult Selected Items

Document Version Date: 12-Jun-19

Question ID: ASI.180_00.000 **Instrument Variable Name:** ACINTRU **QuestionnaireFileName:** Sample Adult

QuestionText: *Read if necessary.

How much do you agree or disagree with the following statements about your neighborhood?

People in this neighborhood can be trusted.

Would you say...

*Read answer categories if necessary.

- 1 Definitely agree
- 2 Somewhat agree
- 3 Somewhat disagree
- 4 Definitely disagree
- 7 Refused
- 9 Don't know

UniverseText: Sample adults 18+

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

Question ID: ASI.190_00.000 **Instrument Variable Name:** ACINKNT **QuestionnaireFileName:** Sample Adult

QuestionText: *Read if necessary.

How much do you agree or disagree with the following statements about your neighborhood?

This is a close-knit neighborhood.

Would you say...

*Read answer categories if necessary.

- 1 Definitely agree
- 2 Somewhat agree
- 3 Somewhat disagree
- 4 Definitely disagree
- 7 Refused
- 9 Don't know

UniverseText: Sample adults 18+

SkipInstructions: <1-4,R,D>
[if SEX=1, goto ACISIM; elseif SEX=2, goto ACISIF]

2018 NHIS Questionnaire - Sample Adult

Adult Selected Items

Document Version Date: 12-Jun-19

Question ID: ASI.220_00.000 **Instrument Variable Name:** ACISIM **QuestionnaireFileName:** Sample Adult

QuestionText: (book) ASI1

Which of the following best represents how you think of yourself?

- 1 Gay
- 2 Straight, that is, not gay
- 3 Bisexual
- 4 Something else
- 5 I don't know the answer
- 7 Refused

UniverseText: Male sample adults 18+

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

Question ID: ASI.240_00.000 **Instrument Variable Name:** ACISIF **QuestionnaireFileName:** Sample Adult

QuestionText: (book) ASI2

Which of the following best represents how you think of yourself?

- 1 Lesbian or gay
- 2 Straight, that is, not lesbian or gay
- 3 Bisexual
- 4 Something else
- 5 I don't know the answer
- 7 Refused

UniverseText: Female sample adults 18+

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

2018 NHIS Questionnaire - Sample Adult

Adult Selected Items

Document Version Date: 12-Jun-19

Question ID: ASI.260_00.000 **Instrument Variable Name:** ACIRETR **QuestionnaireFileName:** Sample Adult

QuestionText: 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

UniverseText: Sample adults 18+

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

Question ID: ASI.270_00.000 **Instrument Variable Name:** ACIMEDC **QuestionnaireFileName:** Sample Adult

QuestionText: 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

UniverseText: Sample adults 18+

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

2018 NHIS Questionnaire - Sample Adult

Adult Selected Items

Document Version Date: 12-Jun-19

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]

2018 NHIS Questionnaire - Sample Adult

Adult Selected Items

Document Version Date: 12-Jun-19

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]

2018 NHIS Questionnaire - Sample Adult

Adult Selected Items

Document Version Date: 12-Jun-19

Question ID: ASI.320_00.000 **Instrument Variable Name:** ACIHCST **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]

2018 NHIS Questionnaire - Sample Adult**Adult Selected Items****Document Version Date: 12-Jun-19**

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.

01-24 1-24 hours
97 Refused
99 Don't know

UniverseText: Sample adults 18+**SkipInstructions:** <1-5>[goto ERR_SLEEP];
<1-24, R,D>[goto ACISLPFL]**Soft Edit:** ERR_SLEEP

*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.

00 Did not have trouble falling asleep in the past week
01-06 1-6 times
07 7 or more times
97 Refused
99 Don't know

UniverseText: Sample adults 18+**SkipInstructions:** <0-7,R,D> [goto ACISLPST]

2018 NHIS Questionnaire - Sample Adult

Adult Selected Items

Document Version Date: 12-Jun-19

Question ID: ASI.360_00.000 **Instrument Variable Name:** ACISLPST **QuestionnaireFileName:** Sample Adult

QuestionText: In the past week, how many times did you have trouble staying asleep?

*Enter '0' if respondent did not have trouble staying asleep in the past week.

*Enter '7' for 7 or more times.

- 00** Did not have trouble staying asleep in the past week
- 01-06** 1-6 times
- 07** 7 or more times
- 97** Refused
- 99** Don't know

UniverseText: Sample adults 18+

SkipInstructions: <0-7,R,D> [goto ACISLPMD]

Question ID: ASI.370_00.000 **Instrument Variable Name:** ACISLPMD **QuestionnaireFileName:** Sample Adult

QuestionText: In the past week, how many times did you take medication to help you fall asleep or stay asleep?

*Enter '0' if respondent did not take medication to help sleep in the past week.

*Enter '7' for 7 or more times.

- 00** Did not take medication to help sleep in the past week
- 01-06** 1-6 times
- 07** 7 or more times
- 97** Refused
- 99** Don't know

UniverseText: Sample adults 18+

SkipInstructions: <0-7,R,D> [goto ACIREST]

2018 NHIS Questionnaire - Sample Adult

Adult Selected Items

Document Version Date: 12-Jun-19

Question ID: ASI.380_00.000 **Instrument Variable Name:** ACIREST **QuestionnaireFileName:** Sample Adult

QuestionText: In the past week, on how many days did you wake up feeling well rested?

*Enter '0' if respondent never felt well rested in the past week.

- 00 Never felt rested in the past week
- 01-07 1-7 days
- 97 Refused
- 99 Don't know

UniverseText: Sample adults 18+

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

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

QuestionText: Now I am going to ask you some questions about feelings you may have experienced over the PAST 30 DAYS.

- 1 Enter 1 to continue

UniverseText: Sample adults 18+

SkipInstructions: <1> [goto ACISAD]

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

QuestionText: (book) ASI5

DURING THE PAST 30 DAYS, how often did you feel

...So sad that nothing could cheer you up?

- 1 ALL of the time
- 2 MOST of the time
- 3 SOME of the time
- 4 A LITTLE of the time
- 5 NONE of the time
- 7 Refused
- 9 Don't know

UniverseText: Sample adults 18+

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

2018 NHIS Questionnaire - Sample Adult

Adult Selected Items

Document Version Date: 12-Jun-19

Question ID: ASI.390_02.000 **Instrument Variable Name:** ACINERV **QuestionnaireFileName:** Sample Adult

QuestionText: (book) ASI5

* Read if necessary:

During the PAST 30 DAYS, how often did you feel

...Nervous?

- 1 ALL of the time
- 2 MOST of the time
- 3 SOME of the time
- 4 A LITTLE of the time
- 5 NONE of the time
- 7 Refused
- 9 Don't know

UniverseText: Sample adults 18+

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

Question ID: ASI.390_03.000 **Instrument Variable Name:** ACIRSTLS **QuestionnaireFileName:** Sample Adult

QuestionText: (book) ASI5

* Read if necessary:

During the PAST 30 DAYS, how often did you feel

...Restless or fidgety?

- 1 ALL of the time
- 2 MOST of the time
- 3 SOME of the time
- 4 A LITTLE of the time
- 5 NONE of the time
- 7 Refused
- 9 Don't know

UniverseText: Sample adults 18+

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

2018 NHIS Questionnaire - Sample Adult

Adult Selected Items

Document Version Date: 12-Jun-19

Question ID: ASI.390_04.000 **Instrument Variable Name:** ACIHOPLS **QuestionnaireFileName:** Sample Adult

QuestionText: (book) ASI5

* Read if necessary:

During the PAST 30 DAYS, how often did you feel

...Hopeless?

- 1 ALL of the time
- 2 MOST of the time
- 3 SOME of the time
- 4 A LITTLE of the time
- 5 NONE of the time
- 7 Refused
- 9 Don't know

UniverseText: Sample adults 18+

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

Question ID: ASI.390_05.000 **Instrument Variable Name:** ACIEFFRT **QuestionnaireFileName:** Sample Adult

QuestionText: (book) ASI5

* Read if necessary:

During the PAST 30 DAYS, how often did you feel

...That everything was an effort?

- 1 ALL of the time
- 2 MOST of the time
- 3 SOME of the time
- 4 A LITTLE of the time
- 5 NONE of the time
- 7 Refused
- 9 Don't know

UniverseText: Sample adults 18+

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

2018 NHIS Questionnaire - Sample Adult**Adult Selected Items****Document Version Date: 12-Jun-19**

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]

2018 NHIS Questionnaire - Sample Adult**Adult Selected Items****Document Version Date: 12-Jun-19**

Question ID: ASI.410_00.000 **Instrument Variable Name:** ACIHIVT **QuestionnaireFileName:** Sample Adult**QuestionText:** 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

UniverseText: Sample adults 18+**SkipInstructions:** <1,R,D> [goto next section]
<2> [goto ACIHIVWN]

Question ID: ASI.420_00.000 **Instrument Variable Name:** ACIHIVWN **QuestionnaireFileName:** Sample Adult**QuestionText:** (book) ASI6

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

UniverseText: Sample adults 18+ who have never been tested for HIV**SkipInstructions:** <1-9,R,D> [goto next section]

2018 NHIS Questionnaire - Sample Adult

Cancer Screening

Document Version Date: 12-Jun-19

Question ID: NAF.130_00.000 **Instrument Variable Name:** PAPHAD1 **QuestionnaireFileName:** Sample Adult

QuestionText: Have you EVER HAD a Pap smear or Pap test?

*Read if necessary.

A Pap smear or Pap test is a routine test for women in which the doctor examines the cervix, takes a cell sample from the cervix with a small stick or brush, and sends it to the lab.

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

UniverseText: Female sample adults 18+

SkipInstructions: <1> [goto RPAP1_M1]
<2> [goto PAPNOT2]
<R,D> [goto HYST]

2018 NHIS Questionnaire - Sample Adult

Cancer Screening

Document Version Date: 12-Jun-19

Question ID: NAF.150_01.000 **Instrument Variable Name:** RPAP1_M1 **QuestionnaireFileName:** Sample Adult

QuestionText: 1 of 2

When did you have your MOST RECENT Pap test?

*Enter month of last Pap test.

*Enter '96' to go to number and time period format.

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

UniverseText: Female sample adults 18+ who have ever had a Pap test

SkipInstructions: <1-12,D> [goto RPAP1_Y1]
<R> store "R" in RPAP1_Y1 [goto RPAP21]
<96> store "9996" in RPAP1_Y1 [goto RPAP1N1]

2018 NHIS Questionnaire - Sample Adult

Cancer Screening

Document Version Date: 12-Jun-19

Question ID: NAF.150_02.000 **Instrument Variable Name:** RPAP1_Y1 **QuestionnaireFileName:** Sample Adult

QuestionText: 2 of 2

*Enter year of last Pap test.

Year	Year
9996	Time period format
9997	Refused
9999	Don't know

UniverseText: Female sample adults age 18+ who answered month of last Pap test or didn't know month of last Pap test

SkipInstructions: <valid year> if RPAP1_Y1 gt current year or (RPAP1_Y1=current year and RPAP1_M1 gt current month)
 [goto ERR1_RPAP1_Y1 (future date)]
 elseif RPAP1_Y1 lt DOBY or (RPAP1_Y1=DOBY and RPAP1_M1 lt DOBM)
 [goto ERR2_RPAP1_Y1 (prior to birth date)]
 elseif RPAP1_M1=D
 [goto RPAP21]
 elseif RPAP1_M1=1-12 [goto HPVVPAP]
 <R,D> [goto RPAP21]

Hard Edit: ERR1_RPAP1_Y1

* Future date invalid. Please correct.

ERR2_RPAP1_Y1

* Date before birth. Please correct.

Question ID: NAF.160_01.000 **Instrument Variable Name:** RPAP1N1 **QuestionnaireFileName:** Sample Adult

QuestionText: 1 of 2

*Read if necessary: When did you have your MOST RECENT Pap test?

*Enter number for time since last Pap test.

*Enter '95' for 95 or more.

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

UniverseText: Female sample adults 18+ who selected number and time period format for most recent Pap test from the initial month screen

SkipInstructions: <1-95> [goto RPAP1T1]
 <R,D> store "R,D" in RPAP1T1 [goto RPAP21]

2018 NHIS Questionnaire - Sample Adult**Cancer Screening**

Document Version Date: 12-Jun-19

Question ID: NAF.160_02.000 **Instrument Variable Name:** RPAP1T1 **QuestionnaireFileName:** Sample Adult

QuestionText: 2 of 2

*Enter time period for time since most recent Pap test.

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

UniverseText: Female sample adults 18+ who answered 1-95 for number part of this 2 part question

SkipInstructions: <1-3> [goto HPVPPAP]
 <4> (if RPAP1N1=4, set RPAP21=4 [goto HPVPPAP];
 elseif RPAP1N1 gt 5 and RPAP1N1 gt AGE, [goto ERR_RPAP1T1 (greater than persons age)]
 elseif RPAP1N1 gt 5 and RPAP1N1 le AGE, set RPAP21=5 and [goto HPVPPAP]
 elseif RPAP1N1=1,2,3,5, [goto RPAP21]
 <R,D> [goto RPAP21]

Hard Edit: ERR_RPAP1T1

* Time since last exam cannot be greater than age.
 * Please correct.

Question ID: NAF.165_00.000 **Instrument Variable Name:** RPAP21 **QuestionnaireFileName:** Sample Adult

QuestionText: Was it:

*Read answer categories.

- 1 A year ago or less
- 2 More than 1 year but not more than 2 years ago
- 3 More than 2 years but not more than 3 years ago
- 4 More than 3 years but not more than 5 years ago
- 5 Over 5 years ago
- 7 Refused
- 9 Don't know

UniverseText: Female sample adults 18+ who failed to give a complete date in either the month or year format or failed to give a complete date in the number and time period format, or entered years ago in the time period format (excluding those whose last Pap test was over 5 years ago)

SkipInstructions: <1-5,R,D> if answer code is grayed out [goto ERR_RPAP21];
 else [goto HPVPPAP]

Hard Edit: ERR_RPAP21

*That is not a valid response.
 *Please correct.

2018 NHIS Questionnaire - Sample Adult**Cancer Screening****Document Version Date: 12-Jun-19**

Question ID: NAF.168_00.000 **Instrument Variable Name:** HPV PAP **QuestionnaireFileName:** Sample Adult**QuestionText:** An HPV test is sometimes given with the Pap test for cervical cancer screening. Did you have an HPV test with your most recent Pap?

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

UniverseText: Female sample adults 18+ who have ever had a Pap test**SkipInstructions:** <1-2,R,D> if (RPAP21 = 1,2,3) or (RPAP1T1 = 1,2) or (RPAP1_Y1 = (current year - 3) and RPAP1_M1 ge current month) or (RPAP1_Y1 gt (current year - 3)) or (RPAP1T1 = 3 and RPAP1N1 le 36)
[goto PAPABN3];elseif (RPAP21 = 5) or (RPAP1_Y1 = (current year - 5) and RPAP1_M1 lt current month) or
(RPAP1_Y1 lt (current year - 5)) or (RPAP1T1 = 3 and RPAP1N1 gt 60)
[goto PAPNOT2]

elseif RPAP21 = R,D [goto HYST]

Question ID: NAF.180_00.000 **Instrument Variable Name:** PAPABN3 **QuestionnaireFileName:** Sample Adult**QuestionText:** Have you had a [fill1: Pap/Pap or HPV] test in the LAST 3 YEARS where the results were NOT normal?

- 1 Yes, Pap test not normal
- 2 Yes, HPV test not normal
- 3 Yes, both were not normal
- 4 No
- 7 Refused
- 9 Don't know

UniverseText: Female sample adults 18+ who have had a Pap test in the past 3 years**SkipInstructions:** <1-4,R,D> [goto HYST]

2018 NHIS Questionnaire - Sample Adult

Cancer Screening

Document Version Date: 12-Jun-19

Question ID: NAF.210_00.000 **Instrument Variable Name:** PAPNOT2 **QuestionnaireFileName:** Sample Adult

QuestionText: What is the most important reason you have [Fill1: NEVER had a Pap test/NEVER had a Pap or HPV test/
NOT had a Pap test in the LAST 5 YEARS/
NOT had a Pap or HPV test in the LAST 5 YEARS]?

*Put response into correct category below.

- 01 No reason/never thought about it
- 02 Didn't need it/didn't know I needed this type of test
- 03 Doctor didn't order it/didn't say I needed it
- 04 Haven't had any problems
- 05 Put it off/didn't get around to it
- 06 Too expensive/no insurance/cost
- 07 Too painful, unpleasant, or embarrassing
- 08 Had hysterectomy
- 09 Don't have doctor
- 10 Had HPV vaccine
- 11 Other
- 97 Refused
- 99 Don't know

UniverseText: Female sample adults 18+ who have never had a Pap test, or who have not had a Pap test in the last 5 years

SkipInstructions: <1-7,9-11,R,D> [goto HYST]
<8> if AGE GE 30 [goto MAMHAD1]
else [goto next section]

Question ID: NAF.220_00.000 **Instrument Variable Name:** HYST **QuestionnaireFileName:** Sample Adult

QuestionText: Have you had a hysterectomy?

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

UniverseText: Female sample adults 18+ who have not already indicated they have had a hysterectomy

SkipInstructions: <1,2,R,D> if AGE GE 30 [goto MAMHAD]
else [goto next section]

2018 NHIS Questionnaire - Sample Adult

Cancer Screening

Document Version Date: 12-Jun-19

Question ID: NAF.230_00.000 **Instrument Variable Name:** MAMHAD **QuestionnaireFileName:** Sample Adult

QuestionText: Have you EVER HAD a mammogram?

*Read if necessary.

A mammogram is an x-ray taken only of the breast by a machine that presses against the breast.

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

UniverseText: Female sample adults age 30+

SkipInstructions: <1> [goto RMAM1_MT]
<2> [goto MAMNOT1]
<R,D> if AGE GE 40 [goto COLHAD];
else [goto next section]

2018 NHIS Questionnaire - Sample Adult

Cancer Screening

Document Version Date: 12-Jun-19

Question ID: NAF.260_01.000 **Instrument Variable Name:** RMAM1_MT **QuestionnaireFileName:** Sample Adult

QuestionText: 1 of 2

When did you have your MOST RECENT mammogram?

*Enter month of last mammogram.

*Enter '96' to go to number and time period format.

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

UniverseText: Female sample adults 30+ who have ever had a mammogram

SkipInstructions: <1-12,D> [goto RMAM1_YR]
<R> store "R" in RMAM1_YR [goto RMAM2]
<96> store "9996" in RMAM1_YR [goto RMAM1N]

2018 NHIS Questionnaire - Sample Adult**Cancer Screening**

Document Version Date: 12-Jun-19

Question ID: NAF.260_02.000 **Instrument Variable Name:** RMAM1_YR **QuestionnaireFileName:** Sample Adult

QuestionText: 2 of 2

*Enter year of last mammogram.

Year	Year
9996	Time period format
9997	Refused
9999	Don't know

UniverseText: Female sample adults age 30+ who answered month of last mammogram or didn't know month of last mammogram

SkipInstructions: <valid year> if RMAM1_YR gt current year or (RMAM1_YR=current year and RMAM1_MT gt current month)
 [goto ERR1_RMAM1_YR (future date)]
 elseif RMAM1_YR lt DOBY or (RMAM1_YR=DOBY and RMAM1_MT lt DOBM)
 [goto ERR2_RMAM1_YR (prior to birth date)]
 elseif RMAM1_MT=D
 [goto RMAM2]
 elseif RMAM1_MT=1-12
 [goto MAMPAY]
 <R,D> goto RMAM2

Hard Edit: ERR1_RMAM1_YR

* Future date invalid. Please correct.

ERR2_RMAM1_YR

* Date before birth. Please correct.

Question ID: NAF.270_01.000 **Instrument Variable Name:** RMAM1N **QuestionnaireFileName:** Sample Adult

QuestionText: 1 of 2

*Read if necessary: When did you have your MOST RECENT mammogram?

*Enter number for time since last mammogram.

*Enter '95' for 95 or more.

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

UniverseText: Female sample adults 30+ who selected number and time period format for most recent mammogram from the initial month screen

SkipInstructions: <1-95> [goto RMAM1T]
 <R,D> store "R,D" in RMAM1T [goto RMAM2]

2018 NHIS Questionnaire - Sample Adult

Cancer Screening

Document Version Date: 12-Jun-19

Question ID: NAF.270_02.000 **Instrument Variable Name:** RMAM1T **QuestionnaireFileName:** Sample Adult

QuestionText: 2 of 2

*Enter time period for time since most recent mammogram.

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

UniverseText: Female sample adults 30+ who answered 1-95 for number part of this 2 part question

SkipInstructions: <1-3> goto MAMPAY
<4> if RMAM1N=4
 set RMAM2=4
 goto MAMPAY
 elseif RMAM1N gt 5 and RMAM1N gt AGE
 goto ERR_RMAM1T (greater than persons age)
 elseif RMAM1N gt 5 and RMAM1N le AGE
 set RMAM2=5
 goto MAMPAY
 elseif RMAM1N=1,2,3,5
 goto RMAM2
<R,D> goto RMAM2

Hard Edit: ERR_RMAM1T

- * Time since last exam cannot be greater than age.
 - * Please correct.
-
-

2018 NHIS Questionnaire - Sample Adult

Cancer Screening

Document Version Date: 12-Jun-19

Question ID: NAF.275_00.000 **Instrument Variable Name:** RMAM2 **QuestionnaireFileName:** Sample Adult

QuestionText: Was it:

*Read answer categories.

- 1 A year ago or less
- 2 More than 1 year but not more than 2 years
- 3 More than 2 years but not more than 3 years
- 4 More than 3 years but not more than 5 years
- 5 Over 5 years ago
- 7 Refused
- 9 Don't know

UniverseText: Female sample adults 30+ who failed to give a complete date in either the month or year format or failed to give a complete date in the number and time period format, or entered years ago in the time period format (excluding those whose last mammogram was over 5 years ago)

SkipInstructions: <1-5,R,D> if answer code is grayed out [goto ERR_RMAM2]
else [goto MAMPAY]

Hard Edit: ERR_RMAM2

*That is not a valid response.
*Please correct.

Question ID: NAF.280_00.000 **Instrument Variable Name:** MAMPAY **QuestionnaireFileName:** Sample Adult

QuestionText: How much did you pay out of pocket for this mammogram -- was it NONE, PART, or ALL of the cost?

- 1 None of the cost
- 2 Part of the cost
- 3 All of the cost
- 7 Refused
- 9 Don't know

UniverseText: Female sample adults 30+ who have ever had a mammogram

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

2018 NHIS Questionnaire - Sample Adult
Cancer Screening

Document Version Date: 12-Jun-19

Question ID: NAF.310_00.000 **Instrument Variable Name:** MAMREAS **QuestionnaireFileName:** Sample Adult

QuestionText: What was the MAIN reason you had this mammogram -- was it part of a routine exam, because of a problem, or some other reason?

- 1 Part of a routine exam
- 2 Because of a problem
- 3 Other reason
- 7 Refused
- 9 Don't know

UniverseText: Female sample adults 30+ who have ever had a mammogram

SkipInstructions: <1-3,R,D> [goto MAMABN1]

Question ID: NAF.320_00.000 **Instrument Variable Name:** MAMABN1 **QuestionnaireFileName:** Sample Adult

QuestionText: After your MOST RECENT mammogram, were you advised to have more tests?

*Read if necessary: More tests may include another mammogram, a sonogram, an MRI, a biopsy, or something else to check for problems in your breast.

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

UniverseText: Female sample adults 30+ who have ever had a mammogram

SkipInstructions: <1> [goto MFOLLOW1]

<2,R,D> if (RMAM2 = 3,4,5) or (RMAM1_YR = (current year - 2) and RMAM1_MT lt current month) or (RMAM1_YR lt (current year - 2)) or (RMAM1T = 3 and RMAM1N gt 24) [goto MAMNOT1];
else if AGE GE 40 [goto COLHAD];
else [goto next section]

2018 NHIS Questionnaire - Sample Adult**Cancer Screening****Document Version Date: 12-Jun-19**

Question ID: NAF.325_00.000 **Instrument Variable Name:** MFOLLOW1 **QuestionnaireFileName:** Sample Adult**QuestionText:** Which tests did you actually have?

*Enter all that apply, separate with commas.

- 0 None
- 1 Ultrasound
- 2 Breast MRI
- 3 Additional mammogram(s)
- 4 Biopsy
- 5 Other
- 7 Refused
- 9 Don't know

UniverseText: Female sample adults 30+ who have ever had a mammogram and was recommended to have more tests**SkipInstructions:** <0-5,R,D> if (RMAM2 = 3,4,5) or (RMAM1_YR = (current year - 2) and RMAM1_MT lt current month) or (RMAM1_YR lt (current year - 2)) or (RMAM1T = 3 and RMAM1N gt 24) [goto MAMNOT1];
else if AGE GE 40 [goto COLHAD];
else [goto next section]

Question ID: NAF.330_00.000 **Instrument Variable Name:** MAMNOT1 **QuestionnaireFileName:** Sample Adult**QuestionText:** What is the most important reason why you have [fill1: NEVER had a mammogram/NOT had a mammogram in the PAST 2 YEARS]?

*Put response into correct category below.

- 01 No reason/never thought about it
- 02 Didn't need it/didn't know I needed this type of test
- 03 Doctor didn't order it/didn't say I needed it
- 04 Haven't had any problems
- 05 Put it off/Didn't get around to it
- 06 Too expensive/no insurance/cost
- 07 Too painful, unpleasant or embarrassing
- 08 I'm too young
- 09 Don't have doctor
- 10 Other
- 97 Refused
- 99 Don't know

UniverseText: Female sample adults 30+ who have never had a mammogram or not had a mammogram in the past 2 years**SkipInstructions:** <1-10,R,D> if AGE GE 40 [goto COLHAD/NAF.540_00.000];
elseif AGE LT 40 [goto next section]

2018 NHIS Questionnaire - Sample Adult

Cancer Screening

Document Version Date: 12-Jun-19

Question ID: NAF.430_00.000 **Instrument Variable Name:** PSAHAD **QuestionnaireFileName:** Sample Adult

QuestionText: Have you EVER HAD a PSA test?

*Read if necessary. A PSA test is a blood test to detect prostate cancer. It is also called a prostate-specific antigen test.

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

UniverseText: Male sample adults 40+

SkipInstructions: <1> [goto RPSA1_MT]
<2,R,D> [goto PSAADV]

Question ID: NAF.440_00.000 **Instrument Variable Name:** RPSA1_MT **QuestionnaireFileName:** Sample Adult

QuestionText: 1 of 2

When did you have your MOST RECENT PSA test?

* Enter month of last PSA test.

* Enter '96' to go to number and time period format.

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

UniverseText: Male sample adults 40+ who have had a PSA test

SkipInstructions: <1-12,D> [goto RPSA1_YR]
<R> store "R" in RPSA1_YR [goto RPSA2]
<96> store "9996" in RPSA1_YR [goto RPSA1N]

2018 NHIS Questionnaire - Sample Adult
Cancer Screening

Document Version Date: 12-Jun-19

Question ID: NAF.440_01.000 **Instrument Variable Name:** RPSA1_YR **QuestionnaireFileName:** Sample Adult

QuestionText: 2 of 2

* Enter year of last PSA test.

Year	Year
9996	Time period format
9997	Refused
9999	Don't know

UniverseText: Male sample adults 40+ who have had a PSA test

SkipInstructions: <valid year> if RPSA1_YR gt current year or (RPSA1_YR=current year and RPSA1_MT gt current month)
 goto ERR1_ RPSA1_YR (future date)
 elseif RPSA1_YR lt DOBY or (RPSA1_YR=DOBY and RPSA1_MT lt DOBM)
 goto ERR2_ RPSA1_YR (prior to birth date)
 elseif RPSA1_MT=D
 goto RPSA2
 elseif RPSA1_MT=1-12
 goto PSAREAS
 <R,D> goto RPSA2

Hard Edit: ERR1_ RPSA1_YR

* Future date invalid. Please correct.

ERR2_ RPSA1_YR

* Date before birth. Please correct.

Question ID: NAF.440_02.000 **Instrument Variable Name:** RPSA1N **QuestionnaireFileName:** Sample Adult

QuestionText: 1 of 2

*Read if necessary: When did you have your MOST RECENT PSA test?

* Enter number for time since last PSA test.

* Enter '95' for 95 or more.

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

UniverseText: Male sample adults 40+ who have selected number and time period format for most recent PSA test from the initial month screen

SkipInstructions: <1-95> [goto RPSA1T]
 <R,D> store "R,D" in RPSA1T [goto RPSA2]

2018 NHIS Questionnaire - Sample Adult**Cancer Screening****Document Version Date: 12-Jun-19**

Question ID: NAF.440_03.000 **Instrument Variable Name:** RPSA1T **QuestionnaireFileName:** Sample Adult**QuestionText:** 2 of 2

* Enter time period for time since most recent PSA test.

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

UniverseText: Male sample adults 40+ who answered 1-95 for number part of this 2 part question**SkipInstructions:** <1-3> goto PSAREAS
<4> if RPSA1N=4, set RPSA2=4, [goto PSAREAS]
elseif RPSA1N gt 5 and RPSA1N gt AGE, [goto ERR_RPSA1T] (greater than persons age)
elseif RPSA1N gt 5 and RPSA1N le AGE, set RPSA2=5, [goto PSAREAS]
elseif RPSA1N=1,2,3,5 [goto RPSA2]
<R,D> goto RPSA2**Hard Edit:** ERR_RPSA1T* Time since last exam cannot be greater than age.
* Please correct.

Question ID: NAF.440_04.000 **Instrument Variable Name:** RPSA2 **QuestionnaireFileName:** Sample Adult**QuestionText:** Was it:

*Read answer categories.

- 1 A year ago or less
- 2 More than 1 year but not more than 2 years
- 3 More than 2 years but not more than 3 years
- 4 More than 3 years but not more than 5 years
- 5 Over 5 years ago
- 7 Refused
- 9 Don't know

UniverseText: Male sample adults 40+ who failed to give a complete date in either the month or year format or failed to give a complete date in the number and time period format, or entered years ago in the time period format (excluding those whose last PSA test was over 5 years ago)**SkipInstructions:** <1-5,R,D> if answer code is grayed out [goto ERR_RPSA2]
else [goto PSAREAS]**Hard Edit:** ERR_RPSA2*That is not a valid response.
*Please correct.

2018 NHIS Questionnaire - Sample Adult

Cancer Screening

Document Version Date: 12-Jun-19

Question ID: NAF.441_00.000 **Instrument Variable Name:** PSAREAS **QuestionnaireFileName:** Sample Adult

QuestionText: What was the MAIN reason you had this PSA test - was it part of a routine exam, because of a problem, or some other reason?

- 1 Part of a routine exam
- 2 Because of a problem
- 3 Other reason
- 7 Refused
- 9 Don't know

UniverseText: Male sample adults 40+ who have had a PSA test

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

Question ID: NAF.445_00.000 **Instrument Variable Name:** PSASUGG **QuestionnaireFileName:** Sample Adult

QuestionText: Who first suggested the PSA test: you, your doctor, or someone else?

- 1 Self
- 2 Doctor
- 3 Someone else
- 7 Refused
- 9 Don't know

UniverseText: Male sample adults 40+ who have had a PSA test

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

Question ID: NAF.450_00.000 **Instrument Variable Name:** PSA5YR **QuestionnaireFileName:** Sample Adult

QuestionText: How many PSA tests have you had in the LAST 5 years?

*Enter '0' for none.

*Enter '95" for 95 or more PSA tests.

- 00-95 0-95
- 97 Refused
- 99 Don't know

UniverseText: Male sample adults 40+ who have had a PSA test

SkipInstructions: <0-95,R,D> [goto PSAADV]

2018 NHIS Questionnaire - Sample Adult

Cancer Screening

Document Version Date: 12-Jun-19

Question ID: NAF.455_00.000 **Instrument Variable Name:** PSAADV **QuestionnaireFileName:** Sample Adult

QuestionText: [fill 1: Before you had the PSA test did/Did] a doctor EVER talk with you about the advantages of [fill 2: it/the PSA test]?

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

UniverseText: Male sample adults 40+

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

Question ID: NAF.460_00.000 **Instrument Variable Name:** PSADISAV **QuestionnaireFileName:** Sample Adult

QuestionText: [fill 1: Before you had the PSA test did/Did] a doctor EVER talk with you about the disadvantages of [fill 2: it/the PSA test]?

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

UniverseText: Male sample adults 40+

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

2018 NHIS Questionnaire - Sample Adult

Cancer Screening

Document Version Date: 12-Jun-19

Question ID: NAF.540_00.000 **Instrument Variable Name:** COLHAD **QuestionnaireFileName:** Sample Adult

QuestionText: There are several different kinds of tests to check for colon cancer. Colonoscopy (colon-OS-copy) and sigmoidoscopy (sigmoid-OS-copy) are exams in which a doctor inserts a tube into the rectum to look for polyps or cancer. For a colonoscopy, the doctor checks the entire colon, and you are given medication through a needle in your arm to make you sleepy, and told to have someone drive you home. For a Sigmoidoscopy, the doctor checks only part of the colon and you are fully awake.

Have you EVER HAD a colonoscopy?

*Read if necessary:

A polyp is a small growth that develops on the inside of the colon or rectum.

Before these tests, you are asked to take a medication that causes diarrhea.

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

UniverseText: Sample adults 40+

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

2018 NHIS Questionnaire - Sample Adult

Cancer Screening

Document Version Date: 12-Jun-19

Question ID: NAF.560_01.000 **Instrument Variable Name:** COL_MT **QuestionnaireFileName:** Sample Adult

QuestionText: 1 of 2

When did you have your MOST RECENT colonoscopy?

*Enter month of last exam.

*Enter '96' to go to number and time period format.

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

UniverseText: Sample adults 40+ who have ever had a colonoscopy

SkipInstructions: <1-12,D> [goto COL_YR]
<R> store "R" in COL_YR [goto COL2]
<96> store "9996" in COL_YR [goto COLN]

2018 NHIS Questionnaire - Sample Adult
Cancer Screening
Document Version Date: 12-Jun-19

Question ID: NAF.560_02.000 **Instrument Variable Name:** COL_YR **QuestionnaireFileName:** Sample Adult

QuestionText: 2 of 2

*Enter year of last colonoscopy.

Year	Year
9996	Time period format
9997	Refused
9999	Don't know

UniverseText: Sample adults age 40+ who answered month of last colonoscopy or didn't know month of last colonoscopy

SkipInstructions:

```

<valid year> if COL_YR gt current year or (COL_YR=current year and COL_MT gt current month)
  goto ERR1_ COL_YR (future date)
elseif COL_YR lt DOBY or (COL_YR=DOBY and COL_MT lt DOBM)
  goto ERR2_ COL_YR (prior to birth date)
elseif COL_MT=D
  goto COL2
elseif COL_MT=1-12
  goto COLREAS
<R,D> goto COL2

```

Hard Edit: ERR1_ COL_YR

* Future date invalid. Please correct.

 ERR2_ COL_YR

* Date before birth. Please correct.

Question ID: NAF.570_01.000 **Instrument Variable Name:** COLN **QuestionnaireFileName:** Sample Adult

QuestionText: 1 of 2

*Read if necessary: When did you have your MOST RECENT colonoscopy?

*Enter number for time since last colonoscopy.

*Enter '95' for 95 or more.

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

UniverseText: Sample adults 40+ who selected number and time period format for most recent colonoscopy from the initial month screen

SkipInstructions:

```

<1-95> [goto COLT]
<R,D> store "R,D" in COLT [goto COL2]

```

2018 NHIS Questionnaire - Sample Adult

Cancer Screening

Document Version Date: 12-Jun-19

Question ID: NAF.570_02.000 **Instrument Variable Name:** COLT **QuestionnaireFileName:** Sample Adult

QuestionText: 2 of 2

*Enter time period for time since most recent colonoscopy.

- 1 Days ago
- 2 Weeks ago
- 3 Months ago
- 4 Years ago
- 7 Refused
- 9 Don't know

UniverseText: Sample adults 40+ who answered 1-95 for number part of this 2 part question

SkipInstructions: <1-3> goto COLREAS
<4> if COLN=4
 set COL2=4
 goto COLREAS
elseif COLN=6,7,8,9
 set COL2=5
 goto COLREAS
elseif COLN gt 10 and COLN gt AGE
 goto ERR_COLT (greater than persons age)
elseif COLN gt 10 and COLN le AGE
 set COL2=6
 goto COLREAS
elseif COLN=1,2,3,5,10
 goto COL2
<R,D> goto COL2

Hard Edit: ERR_COLT

- * Time since last exam cannot be greater than age.
 - * Please correct.
-
-

2018 NHIS Questionnaire - Sample Adult

Cancer Screening

Document Version Date: 12-Jun-19

Question ID: NAF.575_00.000 **Instrument Variable Name:** COL2 **QuestionnaireFileName:** Sample Adult

QuestionText: Was it:

*Read answer categories.

- 1 A year ago or less
- 2 More than 1 year but not more than 2 years
- 3 More than 2 years but not more than 3 years
- 4 More than 3 years but not more than 5 years
- 5 More than 5 years but not more than 10 years
- 6 Over 10 years ago
- 7 Refused
- 9 Don't know

UniverseText: Sample adults 40+ who failed to give a complete date in either the month or year format or failed to give a complete date in the number and time period format, or entered years ago in the time period format (excluding those whose last colonoscopy was 6-9 or over 10 years ago)

SkipInstructions: <1-6,R,D> if answer code is grayed out [goto ERR_COL2]
else [goto COLREAS]

Hard Edit: ERR_COL2

*That is not a valid response.
*Please correct.

Question ID: NAF.590_00.000 **Instrument Variable Name:** COLREAS **QuestionnaireFileName:** Sample Adult

QuestionText: What was the MAIN reason you had this colonoscopy - was it part of a routine exam, because of a problem, as a follow-up test of an earlier test or screening exam, or some other reason?

- 1 Part of a routine exam
- 2 Because of a problem
- 3 Follow-up test of an earlier test or screening exam
- 4 Other reason
- 7 Refused
- 9 Don't know

UniverseText: Sample adults 40+ who have ever had a colonoscopy

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

2018 NHIS Questionnaire - Sample Adult

Cancer Screening

Document Version Date: 12-Jun-19

Question ID: NAF.590_00.010 **Instrument Variable Name:** COLPAY **QuestionnaireFileName:** Sample Adult

QuestionText: How much did you pay out of pocket for your most recent colonoscopy -- was it NONE, PART, or ALL of the cost?

- 1 None of the cost
- 2 Part of the cost
- 3 All of the cost
- 7 Refused
- 9 Don't know

UniverseText: Sample adults 40+ who who have ever had a colonoscopy

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

Question ID: NAF.591_00.000 **Instrument Variable Name:** SIGHAD **QuestionnaireFileName:** Sample Adult

QuestionText: Recall that a sigmoidoscopy is similar to a colonoscopy but the doctor checks only part of the colon and you are fully awake. Have you EVER HAD a sigmoidoscopy?

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

UniverseText: Sample adults 40+

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

2018 NHIS Questionnaire - Sample Adult

Cancer Screening

Document Version Date: 12-Jun-19

Question ID: NAF.592_01.000 **Instrument Variable Name:** SIG_MT **QuestionnaireFileName:** Sample Adult

QuestionText: 1 of 2

When did you have your MOST RECENT sigmoidoscopy?

*Enter month of last exam.

*Enter '96' to go to number and time period format.

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

UniverseText: Sample adults 40+ who have ever had a sigmoidoscopy

SkipInstructions: <1-12,D> [goto SIG_YR]
<R> store "R" in SIG_YR [goto SIG2]
<96> store "9996" in SIG_YR [goto SIGN]

2018 NHIS Questionnaire - Sample Adult

Cancer Screening

Document Version Date: 12-Jun-19

Question ID: NAF.593_02.000 **Instrument Variable Name:** SIG_YR **QuestionnaireFileName:** Sample Adult

QuestionText: 2 of 2

*Enter year of last sigmoidoscopy.

Year	Year
9996	Time period format
9997	Refused
9999	Don't know

UniverseText: Sample adults age 40+ who answered month of last sigmoidoscopy or didn't know month of last sigmoidoscopy

SkipInstructions: <valid year> if SIG_YR gt current year or (SIG_YR=current year and SIG_MT gt current month)
 goto ERR1_ SIG_YR (future date)
 elseif SIG_YR lt DOBY or (SIG_YR=DOBY and SIG_MT lt DOBM)
 goto ERR2_ SIG_YR (prior to birth date)
 elseif SIG_MT=D
 goto SIG2
 elseif SIG_MT=1-12
 goto CTHEARD
 <R,D> goto SIG2

Hard Edit: ERR1_ SIG_YR
 * Future date invalid. Please correct.
 ERR2_ SIG_YR
 * Date before birth. Please correct.

Question ID: NAF.594_01.000 **Instrument Variable Name:** SIGN **QuestionnaireFileName:** Sample Adult

QuestionText: 1 of 2

*Read if necessary: When did you have your MOST RECENT sigmoidoscopy?

*Enter number for time since last sigmoidoscopy.

*Enter '95' for 95 or more.

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

UniverseText: Sample adults 40+ who selected number and time period format for most recent sigmoidoscopy from the initial month screen

SkipInstructions: <1-95> [goto SIGT]
 <R,D> store "R,D" in SIGT [goto SIG2]

2018 NHIS Questionnaire - Sample Adult

Cancer Screening

Document Version Date: 12-Jun-19

Question ID: NAF.595_02.000 **Instrument Variable Name:** SIGT **QuestionnaireFileName:** Sample Adult

QuestionText: 2 of 2

*Enter time period for time since most recent sigmoidoscopy.

- 1 Days ago
- 2 Weeks ago
- 3 Months ago
- 4 Years ago
- 7 Refused
- 9 Don't know

UniverseText: Sample adults 40+ who answered 1-95 for number part of this 2 part question

SkipInstructions: <1-3> goto CTHEARD
<4> if SIGN=4
 set SIG2=4
 goto CTHEARD
elseif SIGN=6,7,8,9
 set SIG2=5
 goto CTHEARD
elseif SIGN gt 10 and SIGN gt AGE
 goto ERR_SIGT (greater than persons age)
elseif SIGN gt 10 and SIGN le AGE
 set SIG2=6
 goto CTHEARD
elseif SIGN=1,2,3,5,10
 goto SIG2
<R,D> goto SIG2

Hard Edit: ERR_SIGT

- * Time since last exam cannot be greater than age.
 - * Please correct.
-
-

2018 NHIS Questionnaire - Sample Adult**Cancer Screening****Document Version Date: 12-Jun-19**

Question ID: NAF.596_00.000 **Instrument Variable Name:** SIG2 **QuestionnaireFileName:** Sample Adult**QuestionText:** Was it:

*Read answer categories.

- 1 A year ago or less
- 2 More than 1 year but not more than 2 years
- 3 More than 2 years but not more than 3 years
- 4 More than 3 years but not more than 5 years
- 5 More than 5 years but not more than 10 years
- 6 Over 10 years ago
- 7 Refused
- 9 Don't know

UniverseText: Sample adults 40+ who failed to give a complete date in either the month or year format or failed to give a complete date in the number and time period format, or entered years ago in the time period format (excluding those whose last sigmoidoscopy was 6-9 or over 10 years ago)**SkipInstructions:** <1-6,R,D> if answer code is grayed out [goto ERR_SIG2]
else [goto CTHEARD]**Hard Edit:** ERR_SIG2*That is not a valid response.
*Please correct.

Question ID: NAF.611_00.000 **Instrument Variable Name:** CTHEARD **QuestionnaireFileName:** Sample Adult**QuestionText:** CT colonography, sometimes called virtual colonoscopy, is a new type of test that looks for cancer in the colon. Unlike regular colonoscopies, you do not need medication to make you sleepy during the test. In this new test, your colon is filled with air and you are moved through a donut-shaped X-ray machine as you lie on your back and then your stomach.

Before today, HAD YOU EVER HEARD of CT colonography or virtual colonoscopy?

*Read if necessary:

This is not the same as a colonoscopy or a sigmoidoscopy.

Unlike CT tests for other purposes, you DO take laxatives to clean out your colon for this test.

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

UniverseText: Sample adults 40+**SkipInstructions:** <1> [goto CTHADEV]
<2,R,D> [goto COLTOLD]

2018 NHIS Questionnaire - Sample Adult

Cancer Screening

Document Version Date: 12-Jun-19

Question ID: NAF.612_00.000 **Instrument Variable Name:** CTHADEV **QuestionnaireFileName:** Sample Adult

QuestionText: Have you EVER HAD a CT colonography or virtual colonoscopy?

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

UniverseText: Sample adults 40+ who have ever heard of a CT colonography or a virtual colonoscopy

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

Question ID: NAF.613_01.000 **Instrument Variable Name:** CT_MT **QuestionnaireFileName:** Sample Adult

QuestionText: 1 of 2

When did you have your MOST RECENT CT colonography or virtual colonoscopy?

*Enter month of last CT colonography or virtual colonoscopy.

*Enter '96' to go to number and time period format.

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

UniverseText: Sample adults 40+ who have ever had a CT colonography or virtual colonoscopy

SkipInstructions: <1-12,D> [goto CT_YR]
<R> store "R" in CT_YR [goto CT2]
<96> store "9996" in CT_YR [goto CTN]

2018 NHIS Questionnaire - Sample Adult

Cancer Screening

Document Version Date: 12-Jun-19

Question ID: NAF.614_02.000 **Instrument Variable Name:** CT_YR **QuestionnaireFileName:** Sample Adult

QuestionText: 2 of 2

*Enter year of last CT colonography or virtual colonoscopy.

Year	Year
9996	Time period format
9997	Refused
9999	Don't know

UniverseText: Sample adults age 40+ who answered month of last CT colonography or virtual colonoscopy or didn't know month of last CT colonography or virtual colonoscopy

SkipInstructions: <valid year> if CT_YR gt current year or (CT_YR=current year and CT_MT gt current month)
 goto ERR1_ CT_YR (future date)
 elseif CT_YR lt DOBY or (CT_YR=DOBY and CT_MT lt DOBM)
 goto ERR2_ CT_YR (prior to birth date)
 elseif CT_MT=D
 goto CT2
 elseif CT_MT=1-12
 goto COLTOLD
 <R,D> goto CT2

Hard Edit: ERR1_ CT_YR
 * Future date invalid. Please correct.
 ERR2_ CT_YR
 * Date before birth. Please correct.

Question ID: NAF.615_01.000 **Instrument Variable Name:** CTN **QuestionnaireFileName:** Sample Adult

QuestionText: 1 of 2

*Read if necessary: When did you have your MOST RECENT CT colonography or virtual colonoscopy?

*Enter number for time since last CT colonography or virtual colonoscopy.

*Enter '95' for 95 or more.

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

UniverseText: Sample adults 40+ who selected number and time period format for most recent CT colonography or virtual colonoscopy from the initial month screen

SkipInstructions: <1-95> [goto CTT]
 <R,D> store "R,D" in CTT [goto CT2]

2018 NHIS Questionnaire - Sample Adult

Cancer Screening

Document Version Date: 12-Jun-19

Question ID: NAF.616_02.000 **Instrument Variable Name:** CTT **QuestionnaireFileName:** Sample Adult

QuestionText: 2 of 2

*Enter time period for time since most recent CT colonography or virtual colonoscopy.

- 1 Days ago
- 2 Weeks ago
- 3 Months ago
- 4 Years ago
- 7 Refused
- 9 Don't know

UniverseText: Sample adults 40+ who answered 1-95 for number part of this 2 part question

SkipInstructions: <1-3> goto COLTOLD
<4> if CTN=4
 set CT2=4
 goto COLTOLD
elseif CTN=6,7,8,9
 set CT2=5
 goto COLTOLD
elseif CTN gt 10 and CTN gt AGE
 goto ERR_CTT (greater than persons age)
elseif CTN gt 10 and CTN le AGE
 set CT2=6
 goto COLTOLD
elseif CTN=1,2,3,5,10
 goto CT2
<R,D> goto CT2

Hard Edit: ERR_CTT

- * Time since last exam cannot be greater than age.
 - * Please correct.
-
-

2018 NHIS Questionnaire - Sample Adult**Cancer Screening****Document Version Date: 12-Jun-19**

Question ID: NAF.617_00.000 **Instrument Variable Name:** CT2 **QuestionnaireFileName:** Sample Adult**QuestionText:** Was it:

*Read answer categories.

- 1 A year ago or less
- 2 More than 1 year but not more than 2 years
- 3 More than 2 years but not more than 3 years
- 4 More than 3 years but not more than 5 years
- 5 More than 5 years but not more than 10 years
- 6 Over 10 years ago
- 7 Refused
- 9 Don't know

UniverseText: Sample adults 40+ who failed to give a complete date in either the month or year format or failed to give a complete date in the number and time period format, or entered years ago in the time period format (excluding those whose last CT colonography or virtual colonoscopy was 6-9 or over 10 years ago)**SkipInstructions:** <1-6,R,D> if answer code is grayed out [goto ERR_CT2]
else [goto COLTOLD]**Hard Edit:** ERR_CT2*That is not a valid response.
*Please correct.

Question ID: NAF.619_00.010 **Instrument Variable Name:** COLTOLD **QuestionnaireFileName:** Sample Adult**QuestionText:** The following questions are about another type of test to check for colon cancer - the blood stool or occult blood test, or fecal immunochemical or FIT test, tests to determine whether you have blood in your stool or bowel movement. These tests can be done at home using a kit. You use a stick or brush to obtain a small amount of stool at home and send it back to the doctor or lab.

Has your doctor or other health professional EVER told you about these tests for blood in the stool to check for colon cancer?

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

UniverseText: Sample adults 40+**SkipInstructions:** <1,2,R,D] [goto HFOBHAD1]

2018 NHIS Questionnaire - Sample Adult
Cancer Screening

Document Version Date: 12-Jun-19

Question ID: NAF.620_00.000 **Instrument Variable Name:** HFOBHAD1 **QuestionnaireFileName:** Sample Adult

QuestionText: Have you EVER HAD a blood stool or FIT test, using a HOME test kit?

*Read if necessary: Do not include tests done at the doctor's office.

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

UniverseText: Sample adults 40+

SkipInstructions: <1> goto RHFO2_MT
<2,R,D> [goto COLGDHAD]

Question ID: NAF.640_01.000 **Instrument Variable Name:** RHFO2_MT **QuestionnaireFileName:** Sample Adult

QuestionText: 1 of 2

When did you have your MOST RECENT blood stool or FIT test using a kit at home?

*Enter month of last home blood stool or FIT test.

*Enter '96' to go to number and time period format.

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

UniverseText: Sample adults 40+ who have ever had a home blood stool or FIT test

SkipInstructions: <1-12,D> goto RHFO2_YR
<R> store "R" in RHFO2_YR and goto RHFO2
<96> store "9996" in RHFO2_YR and goto RHFO2N

2018 NHIS Questionnaire - Sample Adult**Cancer Screening**

Document Version Date: 12-Jun-19

Question ID: NAF.640_02.000 **Instrument Variable Name:** RHFO2_YR **QuestionnaireFileName:** Sample Adult

QuestionText: 2 of 2

*Enter year of last home blood stool or FIT test.

Year	Year
9996	Time period format
9997	Refused
9999	Don't know

UniverseText: Sample adults age 40+ who answered month of last home blood stool or FIT test or didn't know month of last test

SkipInstructions: <valid year> if RHFO2_YR gt current year or (RHFO2_YR=current year and RHRO1_MT gt current month)
 goto ERR1_RHFO2_YR (future date)
 elseif RHFO2_YR lt DOBY or (RHFO2_YR=DOBY and RHFO2_MT lt DOBM)
 goto ERR2_RHFO2_YR (prior to birth date)
 elseif RHFO2_MT=D
 goto RHFO2
 elseif RHFO2_MT=1-12
 goto COLGDHAD
 <R,D> goto RHFO2

Hard Edit: ERR1_RHFO2_YR

* Future date invalid. Please correct.

ERR2_RHFO2_YR

* Date before birth. Please correct.

Question ID: NAF.650_01.000 **Instrument Variable Name:** RHFO2N **QuestionnaireFileName:** Sample Adult

QuestionText: 1 of 2

*Read if necessary: When did you have your MOST RECENT blood stool or FIT test using a kit at home?

*Enter number for time since last home blood stool or FIT test.

*Enter '95' for 95 or more.

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

UniverseText: Sample adults 40+ who selected number and time period format for most recent home blood stool or FIT test from the initial month screen

SkipInstructions: <1-95> [goto RHFO2T]
 <R,D> store "R,D" in RHFO2T [goto RHFO2]

2018 NHIS Questionnaire - Sample Adult**Cancer Screening****Document Version Date: 12-Jun-19**

Question ID: NAF.650_02.000 **Instrument Variable Name:** RHFO2T **QuestionnaireFileName:** Sample Adult**QuestionText:** 2 of 2

*Enter time period for time since most recent home blood stool or FIT test.

- 1 Days ago
- 2 Weeks ago
- 3 Months ago
- 4 Years ago
- 7 Refused
- 9 Don't know

UniverseText: Sample adults 40+ who answered 1-95 for number part of this 2 part question**SkipInstructions:**

```
<1-3> [goto COLGDHAD]
<4> if RHFO2N=4
    set RHFO2=4
    goto COLGDHAD
elseif RHFO2N=6,7,8,9
    set RHFO2=5
    goto COLGDHAD
elseif RHFO2N gt 10 and RHFO2N gt AGE
    goto ERR_RHFO2T (greater than persons age)
elseif RHFO2N gt 10 and RHFO2N le AGE
    set RHFO2=6
    [goto COLGDHAD]
elseif RHFO2N=1,2,3,5,10
    goto RHFO2
<R,D> goto RHFO2
```

Hard Edit: ERR_RHFO2T

- * Time since last exam cannot be greater than age.
 - * Please correct.
-
-

2018 NHIS Questionnaire - Sample Adult

Cancer Screening

Document Version Date: 12-Jun-19

Question ID: NAF.655_00.000 **Instrument Variable Name:** RHFO2 **QuestionnaireFileName:** Sample Adult

QuestionText: Was it:

*Read answer categories.

- 1 A year ago or less
- 2 More than 1 year but not more than 2 years
- 3 More than 2 years but not more than 3 years
- 4 More than 3 years but not more than 5 years
- 5 More than 5 years but not more than 10 years
- 6 Over 10 years ago
- 7 Refused
- 9 Don't know

UniverseText: Sample adults 40+ who failed to give a complete date in either the month or year format or failed to give a complete date in the number and time period format, or entered years ago in the time period format (excluding those whose last home blood stool or FIT test was 6-9 or over 10 years ago)

SkipInstructions: <1-6,R,D> if answer code is grayed out [goto ERR_RHFO2]
else [goto COLGDHAD]

Hard Edit: ERR_RHFO2

*That is not a valid response.
*Please correct.

2018 NHIS Questionnaire - Sample Adult**Cancer Screening****Document Version Date: 12-Jun-19**

Question ID: NAF.660_00.000 **Instrument Variable Name:** COLGDHAD **QuestionnaireFileName:** Sample Adult**QuestionText:** Cologuard is a new type of stool test to check for colon cancer. Unlike other stool tests, Cologuard looks for changes in DNA in addition to checking for blood in your stool. The Cologuard test is shipped to your home in a box that includes a container for your stool sample.

Have you ever had a Cologuard test?

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

UniverseText: Sample adults 40+**SkipInstructions:** <1> if HFOBHAD1=1 [goto COLGDPRT];
else [goto COLGD_MT]

<2,R,D>if COLHAD=2 or COL2=6 or COL_YR=(current year - 10) and COL_MT lt current month
or COL_YR lt (current year - 10) or COLT=4 and COLN ge 11 and COL2=R,D and
SIGHAD=2 or SIG2=5,6 or SIG_YR=(current year - 5) and SIG_MT lt current month
or SIG_YR lt (current year - 5) or SIGT=3 and SIGN gt 60 or SIGT=4 and SIGN ge 6
and SIG2=R,D and CTHEARD=2 or CTHADEV=2 or CT2=5,6 or CT_YR=(current year - 5)
and CT_MT lt current month or CT_YR lt (current year - 5) or CTT=3 and CTN gt 60 or CTT=4 and CTN ge 6
and CT2=R,D and HFOBHAD=2 or RHFO2 =2,3,4,5,6 or RHFO2_YR=(current year - 1)
and RHFO2_MT lt current month or RHFO2_YR lt (current year - 1) or RHFO2T=2 and RHFO2N gt 52 or
RHFO2T=3
and RHFO2N gt 12 or RHFO2T=4 and RHFO2N ge 2 and RHFO2=R,D [goto COLPROB1];
else [goto next section]

Question ID: NAF.662_00.000 **Instrument Variable Name:** COLGDPRT **QuestionnaireFileName:** Sample Adult**QuestionText:** Was the blood stool or FIT test you reported earlier conducted as part of a Cologuard test?

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

UniverseText: Sample adults 40+ who have ever had a home blood stool or FIT test and a Cologuard test**SkipInstructions:** <1,2,R,D> [goto COLGD_MT]

2018 NHIS Questionnaire - Sample Adult

Cancer Screening

Document Version Date: 12-Jun-19

Question ID: NAF.665_01.000 **Instrument Variable Name:** COLGD_MT **QuestionnaireFileName:** Sample Adult

QuestionText: 1 of 2

When did you have your MOST RECENT Cologuard test?

*Enter month of last Cologuard test.

*Enter '96' to go to number and time period format.

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

UniverseText: Sample adults 40+ who have ever had a Cologuard test

SkipInstructions: <1-12,D> goto COLGD_YR
<R> store "R" in COLGD_YR and goto COLGD2
<96> store "9996" in COLGD_YR and goto COLGDN

2018 NHIS Questionnaire - Sample Adult
Cancer Screening
Document Version Date: 12-Jun-19

Question ID: NAF.665_02.000 **Instrument Variable Name:** COLGD_YR **QuestionnaireFileName:** Sample Adult

QuestionText: 2 of 2

*Enter year of last Cologuard test.

Year	Year
9996	Time period format
9997	Refused
9999	Don't know

UniverseText: Sample adults age 40+ who answered month of last Cologuard test or didn't know month of last test

SkipInstructions: <valid year> if COLGD_YR gt current year or (COLGD_YR =current year and COLGD_MT gt current month)
 [goto ERR1_ COLGD_YR (future date)]
 elseif COLGD_YR lt DOBY or (COLGD_YR =DOBY and COLGD_MT lt DOBM) [goto ERR2_ COLGD_YR
 (prior to birth date)]
 elseif COLGD_MT =D [goto COLGD2]

elseif COLHAD=2 or COL2=6 or COL_YR=(current year - 10) and COL_MT lt current month
 or COL_YR lt (current year - 10) or COLT=4 and COLN ge 11 and COL2=R,D and
 SIGHAD=2 or SIG2=5,6 or SIG_YR=(current year - 5) and SIG_MT lt current month
 or SIG_YR lt (current year - 5) or SIGT=3 and SIGN gt 60 or SIGT=4 and SIGN ge 6
 and SIG2=R,D and CTHEARD=2 or CTHADEV=2 or CT2=5,6 or CT_YR=(current year - 5)
 and CT_MT lt current month or CT_YR lt (current year - 5) or CTT=3 and CTN gt 60 or CTT=4 and CTN ge 6
 and CT2=R,D and HFOBHAD=2 or RHFO2 =2,3,4,5,6 or RHFO2_YR=(current year - 1)
 and RHFO2_MT lt current month or RHFO2_YR lt (current year - 1) or RHFO2T=2 and RHFO2N gt 52 or
 RHFO2T=3
 and RHFO2N gt 12 or RHFO2T=4 and RHFO2N ge 2 and RHFO2=R,D and COLGD_MT lt current month
 or COLGD_YR lt (current year -1)[goto COLPROB1];

else [goto next section]
 <R,D> [goto COLGD2]

Hard Edit: ERR1_ COLDG_YR

* Future date invalid. Please correct.

ERR2_ COLDG_YR

 * Date before birth. Please correct.

2018 NHIS Questionnaire - Sample Adult

Cancer Screening

Document Version Date: 12-Jun-19

Question ID: NAF.670_01.000 **Instrument Variable Name:** COLGDN **QuestionnaireFileName:** Sample Adult

QuestionText: 1 of 2

*Read if necessary: When did you have your MOST RECENT Cologuard test?

*Enter number for time since last Cologuard test.

*Enter '95' for 95 or more.

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

UniverseText: Sample adults 40+ who selected number and time period format for most recent home blood stool or FIT test from the initial month screen

SkipInstructions: <1-95> [goto COLGDT]
<R,D> store "R,D" in COLGDT [goto COLGD2]

2018 NHIS Questionnaire - Sample Adult**Cancer Screening**

Document Version Date: 12-Jun-19

Question ID: NAF.670_02.000 Instrument Variable Name: COLGDT QuestionnaireFileName: Sample Adult

QuestionText: 2 of 2

*Enter time period for time since most recent Cologuard test

- 1 Days ago
- 2 Weeks ago
- 3 Months ago
- 4 Years ago
- 7 Refused
- 9 Don't know

UniverseText: Sample adults 40+ who answered 1-95 for number part of this 2 part question

SkipInstructions: <1-3> if COLGD_YR gt current year or (COLGD_YR =current year and COLGD_MT gt current month)
[goto ERR1_ COLGD_YR (future date)]
elseif COLGD_YR lt DOBY or (COLGD_YR =DOBY and COLGD_MT lt DOBM)[goto ERR2_ COLGD_YR
(prior to birth date)]
elseif COLGD_MT =D [goto COLGD2]
elseif COLHAD=2 or COL2=6 or COL_YR=(current year - 10) and COL_MT lt current month
or COL_YR lt (current year - 10) or COLT=4 and COLN ge 11 and COL2=R,D and
SIGHAD=2 or SIG2=5,6 or SIG_YR=(current year - 5) and SIG_MT lt current month
or SIG_YR lt (current year - 5) or SIGT=3 and SIGN gt 60 or SIGT=4 and SIGN ge 6
and SIG2=R,D and CTHEARD=2 or CTHADEV=2 or CT2=5,6 or CT_YR=(current year - 5)
and CT_MT lt current month or CT_YR lt (current year - 5) or CTT=3 and CTN gt 60 or CTT=4 and CTN ge 6
and CT2=R,D and HFOBHAD=2 or RHFO2 =2,3,4,5,6 or RHFO2_YR=(current year - 1)
and RHFO2_MT lt current month or RHFO2_YR lt (current year - 1) or RHFO2T=2 and RHFO2N gt 52 or
RHFO2T=3
and RHFO2N gt 12 or RHFO2T=4 and RHFO2N ge 2 and RHFO2=R,D and COLGDHAD=2 or COLGD_MT lt
current month or COLGD_YR lt (current year -1) or COLDGDT=3 and COLDGDN gt 12 [goto COLPROB1];
else [goto next section]
<R,D> [goto COLGD2]

<4> if COLGDN =4
set COLGD2=4
goto COLPROB1
elseif COLGDN =6,7,8,9
set COLGD2=5
goto COLPROB1
elseif COLGDN gt 10 and COLGDN gt AGE
goto ERR_ COLGDT (greater than persons age)
elseif COLGDN gt 10 and COLGDN le AGE
set COLGD2=6
goto COLPROB1
elseif COLGDN =1,2,3,5,10
goto COLGD2
<R,D> goto COLGD2

Hard Edit: ERR_COLGDT

- * Time since last exam cannot be greater than age.
- * Please correct.

2018 NHIS Questionnaire - Sample Adult**Cancer Screening**

Document Version Date: 12-Jun-19

Question ID: NAF.675_00.000 **Instrument Variable Name:** COLGD2 **QuestionnaireFileName:** Sample Adult

QuestionText: Was it:

*Read answer categories.

- 1 A year ago or less
- 2 More than 1 year but not more than 2 years
- 3 More than 2 years but not more than 3 years
- 4 More than 3 years but not more than 5 years
- 5 More than 5 years but not more than 10 years
- 6 Over 10 years ago
- 7 Refused
- 9 Don't know

UniverseText: Sample adults 40+ who failed to give a complete date in either the month or year format or failed to give a complete date in the number and time period format, or entered years ago in the time period format (excluding those whose last home blood stool or FIT test was 6-9 or over 10 years ago)

SkipInstructions: <1-6,R,D> if answer code is grayed out [goto ERR_ COLGD2]
 else f COLGD_YR gt current year or (COLGD_YR =current year and COLGD_MT gt current month)
 [goto ERR1_ COLGD_YR (future date)] elseif COLGD_YR lt DOBY or (COLGD_YR =DOBY and
 COLGD_MT lt DOBM)
 [goto ERR2_ COLGD_YR (prior to birth date)] elseif COLGD_MT =D [goto COLGD2]??GOING BACK TO
 SAME VARIABLE??
 elseif COLHAD=2 or COL2=6 or COL_YR=(current year - 10) and COL_MT lt current month
 or COL_YR lt (current year - 10) or COLT=4 and COLN ge 11 and COL2=R,D and
 SIGHAD=2 or SIG2=5,6 or SIG_YR=(current year - 5) and SIG_MT lt current month
 or SIG_YR lt (current year - 5) or SIGT=3 and SIGN gt 60 or SIGT=4 and SIGN ge 6
 and SIG2=R,D and CTHEARD=2 or CTHADEV=2 or CT2=5,6 or CT_YR=(current year - 5)
 and CT_MT lt current month or CT_YR lt (current year - 5) or CTT=3 and CTN gt 60 or CTT=4 and CTN ge 6
 and CT2=R,D and HFOBHAD=2 or RHFO2 =2,3,4,5,6 or RHFO2_YR=(current year - 1)
 and RHFO2_MT lt current month or RHFO2_YR lt (current year - 1) or RHFO2T=2 and RHFO2N gt 52 or
 RHFO2T=3
 and RHFO2N gt 12 or RHFO2T=4 and RHFO2N ge 2 and RHFO2=R,D and COLGDHAD=2 or COLGD
 =2,3,4,5,6 or COLGD_YR=(current year - 1) and COLGD_MT lt current month or COLGD_YR lt (current year -
 1) or COLGDT=2 and COLGDN gt 52 or COLGDT=3 and COLGDN gt 12 or COLGDT=4 and COLGDN ge 2
 and COLGD2=R,D [goto COLPROB1]
 else [goto next section]

Hard Edit: ERR_COLGD2

*That is not a valid response.

*Please correct.

2018 NHIS Questionnaire - Sample Adult

Cancer Screening

Document Version Date: 12-Jun-19

Question ID: NAF.750_00.000 **Instrument Variable Name:** COLPROB1 **QuestionnaireFileName:** Sample Adult

QuestionText: In the PAST 12 MONTHS, did a doctor or other health professional RECOMMEND that you be tested to look for problems in your colon or rectum?

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

UniverseText: Sample adults 40+ who have NOT had a colonoscopy in the past 10 years, sigmoidoscopy in the past 5 years, CT colonography in the past 5 years, home blood stool/FIT test in the last year and have not had a Cologuard test in the past three years

SkipInstructions: <1> [goto COLKIND1]
<2,R,D> [goto next section]

Question ID: NAF.770_00.000 **Instrument Variable Name:** COLKIND1 **QuestionnaireFileName:** Sample Adult

QuestionText: Which tests to check for colon cancer did the doctor or other health professional recommend to you? Possible tests include stool blood or fecal occult blood or FIT test; Cologuard or FIT DNA test; sigmoidoscopy; colonoscopy; CT colonography or virtual colonoscopy; or other.

*Enter all that apply, separate with commas.

- 1 Stool blood test/fecal occult blood/FIT test
- 2 Cologuard or FIT DNA test
- 3 Sigmoidoscopy
- 4 Colonoscopy
- 5 CT colonography/virtual colonoscopy
- 6 Other
- 7 Refused
- 9 Don't know

UniverseText: Sample adults 40+ who have had particular tests recommended to look for problems in the colon and who have NOT had a colonoscopy in the past 10 years, sigmoidoscopy in the past 5 years, CT colonography in the past 5 years, or home blood stool/FIT test in the last year and who had another type of test recommended

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

2018 NHIS Questionnaire - Sample Adult

Adult Functioning and Disability

Document Version Date: 12-Jun-19

Question ID: AFD.090_00.000 **Instrument Variable Name:** VIS_0 **QuestionnaireFileName:** Sample Adult

QuestionText: Now I am going to ask you some questions about your ability to do different activities, and how you have been feeling. Although some of these questions may seem similar to ones you have already answered, it is important that we ask them all.

Do you wear glasses?

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

UniverseText: Sample adults 18+

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

Question ID: AFD.100_00.000 **Instrument Variable Name:** VIS_SS **QuestionnaireFileName:** Sample Adult

QuestionText: Do you have difficulty seeing, even when wearing glasses? Would you say no difficulty, some difficulty, a lot of difficulty, or are you unable to do this?

- 1 No difficulty
- 2 Some difficulty
- 3 A lot of difficulty
- 4 Cannot do at all/unable to do
- 7 Refused
- 9 Don't know

UniverseText: Sample adults 18+

SkipInstructions: <1,2,R,D> [goto HEAR_1]

2018 NHIS Questionnaire - Sample Adult

Adult Functioning and Disability

Document Version Date: 12-Jun-19

Question ID: AFD.140_00.000 **Instrument Variable Name:** HEAR_1 **QuestionnaireFileName:** Sample Adult

QuestionText: Do you use a hearing aid?

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

UniverseText: Sample adults 18+

SkipInstructions: <1> [goto HEAR_2]
<2,R,D> [goto HEAR_SS]

Question ID: AFD.145_00.000 **Instrument Variable Name:** HEAR_2 **QuestionnaireFileName:** Sample Adult

QuestionText: How often do you use your hearing aid(s)? Would you say all of the time, some of the time, rarely, or never?

- 1 All of the time
- 2 Some of the time
- 3 Rarely
- 4 Never
- 7 Refused
- 9 Don't know

UniverseText: Sample adults 18+ who use a hearing aid

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

2018 NHIS Questionnaire - Sample Adult

Adult Functioning and Disability

Document Version Date: 12-Jun-19

Question ID: AFD.150_00.000 **Instrument Variable Name:** HEAR_SS **QuestionnaireFileName:** Sample Adult

QuestionText: Do you have difficulty hearing [fill: , even when using your hearing aid(s)]? Would you say no difficulty, some difficulty, a lot of difficulty, or are you unable to do this?

- 1 No difficulty
- 2 Some difficulty
- 3 A lot of difficulty
- 4 Cannot do at all/unable to do
- 7 Refused
- 9 Don't know

UniverseText: Sample adults 18+

SkipInstructions: <1-3,R,D>[goto HEAR_3]
<4> [goto MOB_SS]

Question ID: AFD.170_00.000 **Instrument Variable Name:** HEAR_3 **QuestionnaireFileName:** Sample Adult

QuestionText: Do you have difficulty hearing what is said in a conversation with one other person in a quiet room [fill: even when using your hearing aid(s)]? Would you say no difficulty, some difficulty, a lot of difficulty, or are you unable to do this?

- 1 No difficulty
- 2 Some difficulty
- 3 A lot of difficulty
- 4 Cannot do at all/unable to do
- 7 Refused
- 9 Don't know

UniverseText: Sample adults 18+ who have no difficulty, some difficulty, a lot of difficulty, or refused or don't know if they have difficulty hearing, even when using a hearing aid

SkipInstructions: <1-3,R,D>[goto HEAR_4]
<4>[goto MOB_SS]

2018 NHIS Questionnaire - Sample Adult

Adult Functioning and Disability

Document Version Date: 12-Jun-19

Question ID: AFD.170_00.001 **Instrument Variable Name:** HEAR_4 **QuestionnaireFileName:** Sample Adult

QuestionText: Do you have difficulty hearing what is said in a conversation with one other person in a noisier room [fill: even when using your hearing aid(s)]? Would you say no difficulty, some difficulty, a lot of difficulty, or are you unable to do this?

- 1 No difficulty
- 2 Some difficulty
- 3 A lot of difficulty
- 4 Cannot do at all/unable to do
- 7 Refused
- 9 Don't know

UniverseText: Sample adults 18+ who have no difficulty, some difficulty, a lot of difficulty, or refuse or don't know if they have difficulty hearing what is said in a conversation with one other person in a quiet room (even when wearing their hearing aid(s))

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

Question ID: AFD.180_00.000 **Instrument Variable Name:** MOB_SS **QuestionnaireFileName:** Sample Adult

QuestionText: Do you have difficulty walking or climbing steps? Would you say no difficulty, some difficulty, a lot of difficulty, or are you unable to do this?

- 1 No difficulty
- 2 Some difficulty
- 3 A lot of difficulty
- 4 Cannot do at all/unable to do
- 7 Refused
- 9 Don't know

UniverseText: Sample adults 18+

SkipInstructions: <1-4,R,D> goto MOB_2

2018 NHIS Questionnaire - Sample Adult

Adult Functioning and Disability

Document Version Date: 12-Jun-19

Question ID: AFD.200_00.000 **Instrument Variable Name:** MOB_2 **QuestionnaireFileName:** Sample Adult

QuestionText: Do you use any equipment or receive help for getting around?

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

UniverseText: Sample adults 18+

SkipInstructions: <1>[goto MOB_3A]
<2,R,D>[goto MOB_4]

Question ID: AFD.200_00.001 **Instrument Variable Name:** MOB_3A **QuestionnaireFileName:** Sample Adult

QuestionText: Do you use any of the following...

Cane or walking stick?

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

UniverseText: Sample adults 18+ who use equipment or receive help for getting around

SkipInstructions: <1,2,R,D> goto MOB_3B

2018 NHIS Questionnaire - Sample Adult

Adult Functioning and Disability

Document Version Date: 12-Jun-19

Question ID: AFD.200_00.002 **Instrument Variable Name:** MOB_3B **QuestionnaireFileName:** Sample Adult

QuestionText: *Read if necessary.

Do you use any of the following...

Walker or Zimmer frame?

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

UniverseText: Sample adults 18+ who use equipment or receive help for getting around

SkipInstructions: <1,2,R,D> goto MOB_3C

Question ID: AFD.200_00.003 **Instrument Variable Name:** MOB_3C **QuestionnaireFileName:** Sample Adult

QuestionText: *Read if necessary.

Do you use any of the following...

Crutches?

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

UniverseText: Sample adults 18+ who use equipment or receive help for getting around

SkipInstructions: <1,2,R,D> goto MOB_3D

2018 NHIS Questionnaire - Sample Adult

Adult Functioning and Disability

Document Version Date: 12-Jun-19

Question ID: AFD.200_00.004 **Instrument Variable Name:** MOB_3D **QuestionnaireFileName:** Sample Adult

QuestionText: *Read if necessary.

Do you use any of the following...

Wheelchair or scooter?

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

UniverseText: Sample adults 18+ who use equipment or receive help for getting around

SkipInstructions: <1,2,R,D> goto MOB_3E

Question ID: AFD.200_00.005 **Instrument Variable Name:** MOB_3E **QuestionnaireFileName:** Sample Adult

QuestionText: *Read if necessary.

Do you use any of the following...

Artificial limb (leg/foot)?

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

UniverseText: Sample adults 18+ who use equipment or receive help for getting around

SkipInstructions: <1,2,R,D> goto MOB_3F

2018 NHIS Questionnaire - Sample Adult

Adult Functioning and Disability

Document Version Date: 12-Jun-19

Question ID: AFD.200_00.006 **Instrument Variable Name:** MOB_3F **QuestionnaireFileName:** Sample Adult

QuestionText: *Read if necessary.

Do you use any of the following...

Someone's assistance?

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

UniverseText: Sample adults 18+ who use equipment or receive help for getting around

SkipInstructions: <1,2,R,D> goto MOB_3G

Question ID: AFD.200_00.007 **Instrument Variable Name:** MOB_3G **QuestionnaireFileName:** Sample Adult

QuestionText: *Read if necessary.

Do you use any of the following...

Other type of equipment or help?

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

UniverseText: Sample adults 18+ who use equipment or receive help for getting around

SkipInstructions: <1,2,R,D> if MOB_3D=1, [goto COM_SS];
else if MOB_3D=2,R,D [goto MOB_4]

2018 NHIS Questionnaire - Sample Adult

Adult Functioning and Disability

Document Version Date: 12-Jun-19

Question ID: AFD.210_00.000 **Instrument Variable Name:** MOB_4 **QuestionnaireFileName:** Sample Adult

QuestionText: Do you have difficulty walking 100 yards on level ground, that would be about the length of one football field or one city block [fill: without the use of your aid(s)]? Would you say no difficulty, some difficulty, a lot of difficulty, or are you unable to do this?

- 1 No difficulty
- 2 Some difficulty
- 3 A lot of difficulty
- 4 Cannot do at all/unable to do
- 7 Refused
- 9 Don't know

UniverseText: Sample adults 18+ who do not use a wheelchair or scooter

SkipInstructions: <1-3,R,D>[goto MOB_5]
<4>[goto MOB_6]

Question ID: AFD.220_00.000 **Instrument Variable Name:** MOB_5 **QuestionnaireFileName:** Sample Adult

QuestionText: Do you have difficulty walking a third of a mile on level ground, that would be the length of five football fields or five city blocks [fill: without the use of your aid(s)]? Would you say no difficulty, some difficulty, a lot of difficulty, or are you unable to do this?

- 1 No difficulty
- 2 Some difficulty
- 3 A lot of difficulty
- 4 Cannot do at all/unable to do
- 7 Refused
- 9 Don't know

UniverseText: Sample adults 18+ who do not use a wheelchair or scooter, and have no difficulty, some difficulty, a lot of difficulty, or refused or don't know if they have difficulty walking 100 yards on level ground (without the use of their aid)

SkipInstructions: <1-4,R,D> [goto MOB_6]

2018 NHIS Questionnaire - Sample Adult

Adult Functioning and Disability

Document Version Date: 12-Jun-19

Question ID: AFD.230_00.000 **Instrument Variable Name:** MOB_6 **QuestionnaireFileName:** Sample Adult

QuestionText: Do you have difficulty walking up or down 12 steps? Would you say no difficulty, some difficulty, a lot of difficulty, or are you unable to do this?

- 1 No difficulty
- 2 Some difficulty
- 3 A lot of difficulty
- 4 Cannot do at all/unable to do
- 7 Refused
- 9 Don't know

UniverseText: Sample adults 18+ who did not use any equipment or receive help with getting around or did not use a wheelchair or scooter

SkipInstructions: <1-4,R,D> if MOB_2 IN (2,R,D) [goto COM_SS];
else if MOB_2=1 [goto MOB_7]

Question ID: AFD.240_00.000 **Instrument Variable Name:** MOB_7 **QuestionnaireFileName:** Sample Adult

QuestionText: Do you have difficulty walking 100 yards on level ground, that would be about the length of one football field or one city block, when using your aid(s)? Would you say no difficulty, some difficulty, a lot of difficulty, or are you unable to do this?

- 1 No difficulty
- 2 Some difficulty
- 3 A lot of difficulty
- 4 Cannot do at all/unable to do
- 7 Refused
- 9 Don't know

UniverseText: Sample adults 18+ who use equipment or receive help for getting around but do not use a wheelchair or scooter

SkipInstructions: <1-3,R,D>[goto MOB_8]
<4>[goto COM_SS]

2018 NHIS Questionnaire - Sample Adult

Adult Functioning and Disability

Document Version Date: 12-Jun-19

Question ID: AFD.250_00.000 **Instrument Variable Name:** MOB_8 **QuestionnaireFileName:** Sample Adult

QuestionText: Do you have difficulty walking a third of a mile on level ground, that would be the length of five football fields or five city blocks, when using your aid(s)? Would you say no difficulty, some difficulty, a lot of difficulty, or are you unable to do this?

- 1 No difficulty
- 2 Some difficulty
- 3 A lot of difficulty
- 4 Cannot do at all/unable to do
- 7 Refused
- 9 Don't know

UniverseText: Sample adults 18+ who use equipment or receive help for getting around but do not use a wheelchair or scooter, and who have no difficulty, some difficulty, a lot of difficulty, or refused or don't know if they have difficulty walking 100 yards on level ground, when using their aid

SkipInstructions: <1-4,R,D> goto COM_SS

Question ID: AFD.270_00.000 **Instrument Variable Name:** COM_SS **QuestionnaireFileName:** Sample Adult

QuestionText: Using your usual language, do you have difficulty communicating, for example, understanding or being understood? Would you say no difficulty, some difficulty, a lot of difficulty, or are you unable to do this?

- 1 No difficulty
- 2 Some difficulty
- 3 A lot of difficulty
- 4 Cannot do at all/unable to do
- 7 Refused
- 9 Don't know

UniverseText: Sample adults 18+

SkipInstructions: <1-4,R,D> goto COM_2

2018 NHIS Questionnaire - Sample Adult

Adult Functioning and Disability

Document Version Date: 12-Jun-19

Question ID: AFD.290_00.000 **Instrument Variable Name:** COM_2 **QuestionnaireFileName:** Sample Adult

QuestionText: Do you use sign language?

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

UniverseText: Sample adults 18+

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

Question ID: AFD.300_00.000 **Instrument Variable Name:** COG_SS **QuestionnaireFileName:** Sample Adult

QuestionText: Do you have difficulty remembering or concentrating? Would you say no difficulty, some difficulty, a lot of difficulty, or are you unable to do this?

- 1 No difficulty
- 2 Some difficulty
- 3 A lot of difficulty
- 4 Cannot do at all/unable to do
- 7 Refused
- 9 Don't know

UniverseText: Sample adults 18+

SkipInstructions: <1>[goto UB_SS]
<2-4,R,D>[goto COG_1]

2018 NHIS Questionnaire - Sample Adult

Adult Functioning and Disability

Document Version Date: 12-Jun-19

Question ID: AFD.310_00.000 **Instrument Variable Name:** COG_1 **QuestionnaireFileName:** Sample Adult

QuestionText: Do you have difficulty remembering, concentrating, or both?

- 1 Difficulty remembering only
- 2 Difficulty concentrating only
- 3 Difficulty with both remembering and concentrating
- 7 Refused
- 9 Don't know

UniverseText: Sample adults 18+ who have some difficulty, a lot of difficulty, or are unable to remember or concentrate, or don't know or refused if they are able to remember or concentrate

SkipInstructions: <1,3,R,D>[goto COG_2]
<2>[goto COGCAUSE]

Question ID: AFD.320_00.000 **Instrument Variable Name:** COG_2 **QuestionnaireFileName:** Sample Adult

QuestionText: How often do you have difficulty remembering? Would you say sometimes, often or all of the time?

- 1 Sometimes
- 2 Often
- 3 All of the time
- 7 Refused
- 9 Don't know

UniverseText: Sample adults 18+ who had some difficulty, a lot of difficulty, or were unable to remember or concentrate, or refused to answer or didn't know if they had difficulty remembering or concentrating AND they had difficulty remembering only, difficulty both remembering and concentrating, or refused to answer or didn't know if they had difficulty remembering, concentrating, or both

SkipInstructions: <1-3,R,D> goto COG_3

2018 NHIS Questionnaire - Sample Adult

Adult Functioning and Disability

Document Version Date: 12-Jun-19

Question ID: AFD.330_00.000 **Instrument Variable Name:** COG_3 **QuestionnaireFileName:** Sample Adult

QuestionText: Do you have difficulty remembering a few things, a lot of things, or almost everything?

- 1 A few things
- 2 A lot of things
- 3 Almost everything
- 7 Refused
- 9 Don't know

UniverseText: Sample adults 18+ who had some difficulty, a lot of difficulty, or were unable to remember or concentrate, or refused to answer or didn't know if they had difficulty remembering or concentrating AND they had difficulty remembering only, difficulty both remembering and concentrating, or refused to answer or didn't know if they had difficulty remembering, concentrating, or both

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

Question ID: AFD.340_00.000 **Instrument Variable Name:** COGCAUSE **QuestionnaireFileName:** Sample Adult

QuestionText: What is the MAIN reason for your difficulty [fill1: remembering/concentrating/with both remembering and concentrating]?

- 01 Intellectual disability (formerly known as mental retardation)
- 02 Developmental disability (such as cerebral palsy or autism)
- 03 Dementia or Alzheimer's disease
- 04 Learning disability or ADHD
- 05 Education level
- 06 Mental illness (such as depression, anxiety, post-traumatic stress disorder, emotional problem)
- 07 Traumatic brain injury or stroke
- 08 Age-related changes
- 09 Chronic health condition (such as diabetes, high blood pressure, heart disease, cancer, multiple sclerosis, Parkinson's disease, epilepsy)
- 10 Drugs or medications
- 11 Other (specify)
- 97 Refused
- 99 Don't know

UniverseText: Sample adults 18+ who have some difficulty, a lot of difficulty, or are unable to remember or concentrate, or don't know or refused if they are able to remember or concentrate

SkipInstructions: <1-10,R,D> [goto UB_SS];
<11> [goto COGSPEC]

2018 NHIS Questionnaire - Sample Adult

Adult Functioning and Disability

Document Version Date: 12-Jun-19

Question ID: AFD.350_00.000 **Instrument Variable Name:** COGSPEC **QuestionnaireFileName:** Sample Adult

QuestionText: *Enter the other reason for difficulty with remembering, concentrating or with both remembering and concentrating.

Verbatim Verbatim response
7 Refused
9 Don't know

UniverseText: Sample adults 18+ whose cause of difficulty with remembering, concentrating, or both was other

SkipInstructions: <allow 60,R,D> [goto UB_SS]

Question ID: AFD.360_00.000 **Instrument Variable Name:** UB_SS **QuestionnaireFileName:** Sample Adult

QuestionText: Do you have difficulty with self care, such as washing all over or dressing? Would you say no difficulty, some difficulty, a lot of difficulty, or are you unable to do this?

1 No difficulty
2 Some difficulty
3 A lot of difficulty
4 Cannot do at all/unable to do
7 Refused
9 Don't know

UniverseText: Sample adults 18+

SkipInstructions: <1-4,R,D> goto UB_1

Question ID: AFD.370_00.000 **Instrument Variable Name:** UB_1 **QuestionnaireFileName:** Sample Adult

QuestionText: Do you have difficulty raising a 2 liter bottle of water or soda from waist to eye level? Would you say no difficulty, some difficulty, a lot of difficulty, or are you unable to do this?

1 No difficulty
2 Some difficulty
3 A lot of difficulty
4 Cannot do at all/unable to do
7 Refused
9 Don't know

UniverseText: Sample adults 18+

SkipInstructions: <1-4,R,D> goto UB_2

2018 NHIS Questionnaire - Sample Adult

Adult Functioning and Disability

Document Version Date: 12-Jun-19

Question ID: AFD.380_00.000 **Instrument Variable Name:** UB_2 **QuestionnaireFileName:** Sample Adult

QuestionText: Do you have difficulty using your hands and fingers, such as picking up small objects, for example, a button or pencil, or opening or closing containers or bottles? Would you say no difficulty, some difficulty, a lot of difficulty, or are you unable to do this?

- 1 No difficulty
- 2 Some difficulty
- 3 A lot of difficulty
- 4 Cannot do at all/unable to do
- 7 Refused
- 9 Don't know

UniverseText: Sample adults 18+

SkipInstructions: <1-4,R,D> goto ANX_1

Question ID: AFD.410_00.000 **Instrument Variable Name:** ANX_1 **QuestionnaireFileName:** Sample Adult

QuestionText: How often do you feel worried, nervous or anxious? Would you say daily, weekly, monthly, a few times a year, or never?

- 1 Daily
- 2 Weekly
- 3 Monthly
- 4 A few times a year
- 5 Never
- 7 Refused
- 9 Don't know

UniverseText: Sample adults 18+

SkipInstructions: <1-5,R,D> goto ANX_2

2018 NHIS Questionnaire - Sample Adult

Adult Functioning and Disability

Document Version Date: 12-Jun-19

Question ID: AFD.420_00.000 **Instrument Variable Name:** ANX_2 **QuestionnaireFileName:** Sample Adult

QuestionText: Do you take medication for these feelings?

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

UniverseText: Sample adults 18+

SkipInstructions: <1,R,D> [goto ANX_3]
<2> if ANX_1=5 [goto DEP_1];
else [goto ANX_3]

Question ID: AFD.430_00.000 **Instrument Variable Name:** ANX_3 **QuestionnaireFileName:** Sample Adult

QuestionText: Thinking about the last time you felt worried, nervous or anxious, how would you describe the level of these feelings?
Would you say a little, a lot, or somewhere in between?

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

UniverseText: Sample adults 18+ who feel worried, anxious, or nervous daily, weekly, monthly, a few times a year or don't know or refused how often OR who do take medication for these feelings or don't know or refused if they take medication for these feelings

SkipInstructions: <1-3,R,D> goto DEP_1

2018 NHIS Questionnaire - Sample Adult

Adult Functioning and Disability

Document Version Date: 12-Jun-19

Question ID: AFD.450_00.000 **Instrument Variable Name:** DEP_1 **QuestionnaireFileName:** Sample Adult

QuestionText: How often do you feel depressed? Would you say daily, weekly, monthly, a few times a year, or never?

- 1 Daily
- 2 Weekly
- 3 Monthly
- 4 A few times a year
- 5 Never
- 7 Refused
- 9 Don't know

UniverseText: Sample adults 18+

SkipInstructions: <1-5,R,D> goto DEP_2

Question ID: AFD.460_00.000 **Instrument Variable Name:** DEP_2 **QuestionnaireFileName:** Sample Adult

QuestionText: Do you take medication for depression?

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

UniverseText: Sample adults 18+

SkipInstructions: <1,R,D> [goto DEP_3]
<2> if DEP_1=5 [goto PAIN_2];
else [goto DEP_3]

2018 NHIS Questionnaire - Sample Adult

Adult Functioning and Disability

Document Version Date: 12-Jun-19

Question ID: AFD.470_00.000 **Instrument Variable Name:** DEP_3 **QuestionnaireFileName:** Sample Adult

QuestionText: Thinking about the last time you felt depressed, how depressed did you feel? Would you say a little, a lot, or somewhere in between?

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

UniverseText: Sample adults 18+ who feel depressed daily, weekly, monthly, a few times a year or refused or don't know how often they feel depressed OR who do take medication or refused or don't know if they take medication for depression.

SkipInstructions: <1-3,R,D> [goto PAIN_2];

Question ID: AFD.500_00.000 **Instrument Variable Name:** PAIN_2 **QuestionnaireFileName:** Sample Adult

QuestionText: In the past 3 months, how often did you have pain? Would you say never, some days, most days, or every day?

- 1 Never
- 2 Some days
- 3 Most days
- 4 Every day
- 7 Refused
- 9 Don't know

UniverseText: Sample adults 18+

SkipInstructions: <1> [goto TIRED_1]
<2,3,4,R,D> [goto PAIN_4]

2018 NHIS Questionnaire - Sample Adult

Adult Functioning and Disability

Document Version Date: 12-Jun-19

Question ID: AFD.520_00.000 **Instrument Variable Name:** PAIN_4 **QuestionnaireFileName:** Sample Adult

QuestionText: Thinking about the last time you had pain, how much pain did you have? Would you say a little, a lot, or somewhere in between?

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

UniverseText: Sample adults 18+ who have had pain some days, most days, every day, or refused or don't know how often they have had pain in the past 3 months

SkipInstructions: <1-3,R,D> goto TIRED_1

Question ID: AFD.540_00.000 **Instrument Variable Name:** TIRED_1 **QuestionnaireFileName:** Sample Adult

QuestionText: In the past 3 months, how often did you feel very tired or exhausted? Would you say never, some days, most days, or every day?

- 1 Never
- 2 Some days
- 3 Most days
- 4 Every day
- 7 Refused
- 9 Don't know

UniverseText: Sample adults 18+

SkipInstructions: <1>[goto next section]
<2-4,R,D>[goto TIRED_2]

2018 NHIS Questionnaire - Sample Adult

Adult Functioning and Disability

Document Version Date: 12-Jun-19

Question ID: AFD.550_00.000 **Instrument Variable Name:** TIRED_2 **QuestionnaireFileName:** Sample Adult

QuestionText: Thinking about the last time you felt very tired or exhausted, how long did it last? Would you say some of the day, most of the day, or all of the day?

- 1 Some of the day
- 2 Most of the day
- 3 All of the day
- 7 Refused
- 9 Don't know

UniverseText: Sample adults 18+ who felt very tired or exhausted some days, most days, every day, or refused or don't know how often they felt very tired or exhausted in the past 3 months

SkipInstructions: <1-3,R,D> goto TIRED_3

Question ID: AFD.560_00.000 **Instrument Variable Name:** TIRED_3 **QuestionnaireFileName:** Sample Adult

QuestionText: Thinking about the last time you felt this way, how would you describe the level of tiredness? Would you say a little, a lot, or somewhere in between?

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

UniverseText: Sample adults 18+ who felt very tired or exhausted some days, most days, every day, or refused or don't know how often they felt very tired or exhausted in the past 3 months

SkipInstructions: <1-3,R,D> goto next section

2018 NHIS Questionnaire - Sample Adult

Adult Internet and Email Usage

Document Version Date: 12-Jun-19

Question ID: AWB.010_00.000 **Instrument Variable Name:** AWEBUSE **QuestionnaireFileName:** Sample Adult

QuestionText: 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

UniverseText: Sample adults 18+

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

Question ID: AWB.020_01.000 **Instrument Variable Name:** AWEBOFNO **QuestionnaireFileName:** Sample Adult

QuestionText: 1 of 2

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

UniverseText: Sample adults 18+ who use the Internet

SkipInstructions: <1-995> [goto AWEBOFTP]
<R,D> [goto AWEBEML]<1-995> [goto AWEBOFTP]
<R,D> [goto AWEBEML]

2018 NHIS Questionnaire - Sample Adult

Adult Internet and Email Usage

Document Version Date: 12-Jun-19

Question ID: AWB.020_02.000 **Instrument Variable Name:** AWEBOFTP **QuestionnaireFileName:** Sample Adult

QuestionText: 2 of 2

*Enter time period for how often Internet is used.

- 1 Per day
- 2 Per week
- 3 Per month
- 4 Per year
- 7 Refused
- 9 Don't know

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 AWEBEML]

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

QuestionText: Do you send or receive emails?

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

UniverseText: Sample adults 18+

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

2018 NHIS Questionnaire - Sample Adult

Adult Internet and Email Usage

Document Version Date: 12-Jun-19

Question ID: AWB.040_00.000 **Instrument Variable Name:** AWEBEMAD **QuestionnaireFileName:** Sample Adult

QuestionText: 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

UniverseText: Sample adults 18+ who send or receive email

SkipInstructions: <address> [goto AWBEMNO] <N,R,D> [goto next section]

Question ID: AWB.050_01.000 **Instrument Variable Name:** AWEBMNO **QuestionnaireFileName:** Sample Adult

QuestionText: 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

997 Refused

999 Don't know

UniverseText: Sample adults 18+ who gave an email address

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

2018 NHIS Questionnaire - Sample Adult

Adult Internet and Email Usage

Document Version Date: 12-Jun-19

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]
