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**2010 NATIONAL HEALTH INTERVIEW SURVEY****Quality of Life****quallife : Identification Fields****PUBLIC USE****Document Version Date: 07-Jun-11**

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**Question ID:** IDN.000\_00.000

Instrument Variable Name:

Final Documentation Name: RECTYPE

**Record Type**

Universe:

Description:

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Sources: None

Recodes: None

Keywords: None

Notes: None

---

## File type identifier

10	Household
20	Person
25	Income Imputation
30	Sample Adult
31	Sample Adult Cancer
38	Quality of Life
40	Sample Child
60	Family
63	Disability Questions Tests 2010
65	Paradata
70	Injury/Poisoning Episode
75	Injury/Poisoning Verbatim

---

**Question ID:** IDN.000\_02.000

Instrument Variable Name:

Final Documentation Name: SRVY\_YR

**Survey Year**

Universe:

Description:

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Sources: None

Recodes: None

Keywords: None

Notes: None

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## Year of National Health Interview Survey

Year	Survey Year
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Quality of Life

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**Question ID:** IDN.000\_04.000

Instrument Variable Name:

Final Documentation Name: HHX

**Household Number**

Universe:

Description: All households

---

Sources: None

Recodes: None

Keywords: household number

Notes: Use this variable in combination with SRVY\_YR to identify individual households.

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Household Number

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**Question ID:** IDN.000\_25.000

Instrument Variable Name:

Final Documentation Name: INTV\_QRT

**Interview Quarter**

Universe:

Description: All households

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Sources: None

Recodes: None

Keywords: None

Notes: None

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Interview Quarter

- 1 Quarter 1
  - 2 Quarter 2
  - 3 Quarter 3
  - 4 Quarter 4
-

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**Question ID:** IDN.000\_30.000

Instrument Variable Name:

Final Documentation Name: ASSIGNWK

**Assignment Week**

Universe:

Description: All households

---

Sources: None

Recodes: None

Keywords: assignment week; interview week

Notes: None

---

## Assignment Week

01	Week 1
02	Week 2
03	Week 3
04	Week 4
05	Week 5
06	Week 6
07	Week 7
08	Week 8
09	Week 9
10	Week 10
11	Week 11
12	Week 12
13	Week 13

---

**Question ID:** IDN.000\_35.000

Instrument Variable Name:

Final Documentation Name: FMX

**Family Number**

Universe:

Description: All families

---

Sources: None

Recodes: None

Keywords: family number

Notes: Use this variable in combination with HHX and SRVY\_YR to identify individual families.

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## Family Number

01-25	Family number 1 - 25
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## 2010 NATIONAL HEALTH INTERVIEW SURVEY

## Quality of Life

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**Question ID:** IDN.000\_40.000

Instrument Variable Name: FPX

Final Documentation Name: FPX

**Person Number**

Universe:

Description: All persons

Sources: None

Recodes: None

Keywords: person number

Notes: Use this variable in combination with HHX, FMX, and SRVY\_YR to identify individual persons.

Person Number (Within family)

01-25 Person number 1 thru 25

**Question ID:** IDN.000\_70.000

Instrument Variable Name:

Final Documentation Name: WTFA\_QOL

Universe:

Description:

Sources: None

Recodes: None

Keywords: final weight; annual; Quality of Life weight

Notes: This weight should be used for analyses of the Quality of Life file. This weight includes post-stratification adjustments (age, race/ethnicity, sex) using Census Bureau population control totals. The sum of these weights is equal to the average of the civilian, noninstitutionalized U.S. population estimates for persons aged 18 and above for February, May, August, and November.

Weight - Final Quality of Life file

**Question ID:** UCF.000\_00.000

R15 RECODE

Instrument Variable Name:

Final Documentation Name: STRAT\_P

Universe: ALL

Description: All records

Sources: None

Recodes: None

Keywords: None

Notes: Pseudo-stratum variable for public use file variance estimation. Created by NCHS/ORM.

Pseudo-stratum for public use file variance estimation

001-300 001-300

## 2010 NATIONAL HEALTH INTERVIEW SURVEY

## Quality of Life

quallife : Unit Control File

PUBLIC USE

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**Question ID:** UCF.000\_00.000      R16 RECODE      Instrument Variable Name:  
Final Documentation Name: PSU\_P

Universe: ALL

Description: All records

Sources: None

Recodes: None

Keywords: None

Notes: Pseudo-PSU variable for public use file variance estimation. Created by NCHS/ORM.

Pseudo-PSU for public use file variance estimation

01-02      01-02

**Question ID:** QOL.100\_00.000      Instrument Variable Name: VIS\_SS  
Final Documentation Name: VIS\_SS

**These next questions are new and we are testing them. Some may sound similar to questions you already answered.**

**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?**

Universe: ASTATFLG='1' and (AGE GE '018' and AGE not IN ('997','999')) and FDRN\_FLG='1' and QOL\_FLG='1'

Description: Sample adults 18+ who were not asked the family disability questions (FDB) and were randomly selected to receive the Quality of Life (QOL) section

Sources: None

Recodes: None

Keywords: difficulty seeing; glasses

Notes: None

Amount of difficulty seeing

- |   |                               |
|---|-------------------------------|
| 1 | No difficulty                 |
| 2 | Some difficulty               |
| 3 | A lot of difficulty           |
| 4 | Cannot do at all/Unable to do |
| 7 | Refused                       |
| 8 | Not ascertained               |
| 9 | Don't know                    |

## 2010 NATIONAL HEALTH INTERVIEW SURVEY

## Quality of Life

quallife : Quality of Life

PUBLIC USE

Document Version Date: 07-Jun-11

Question ID: QOL.110\_00.000

Instrument Variable Name: VIS\_1

Final Documentation Name: VIS\_1

**Do you wear glasses to see far away?**

Universe: ASTATFLG='1' and (AGE GE '018' and AGE not IN ('997','999')) and VIS\_SS IN ('1','2','3','7','9')

Description: Sample adults 18+ who have no difficulty, some difficulty, a lot of difficulty, or refused or don't know if they have difficulty seeing, even when wearing glasses

Sources: None

Recodes: None

Keywords: glasses; see far away

Notes: None

Wear glasses to see far away

- |   |                 |
|---|-----------------|
| 1 | Yes             |
| 2 | No              |
| 7 | Refused         |
| 8 | Not ascertained |
| 9 | Don't know      |

Question ID: QOL.120\_00.000

Instrument Variable Name: VIS\_2

Final Documentation Name: VIS\_2

**Do you have difficulty clearly seeing someone's face across a room {fill: even when wearing these glasses}? Would you say no difficulty, some difficulty, a lot of difficulty, or are you unable to do this?**

Universe: ASTATFLG='1' and (AGE GE '018' and AGE not IN ('997','999')) and VIS\_SS IN ('1','2','3','7','9')

Description: Sample adults 18+ who have no difficulty, some difficulty, a lot of difficulty, or refused or don't know if they have difficulty seeing, even when wearing glasses

Sources: None

Recodes: None

Keywords: difficulty seeing

Notes: None

Amount of difficulty clearly seeing someone's face across a room

- |   |                               |
|---|-------------------------------|
| 1 | No difficulty                 |
| 2 | Some difficulty               |
| 3 | A lot of difficulty           |
| 4 | Cannot do at all/Unable to do |
| 7 | Refused                       |
| 8 | Not ascertained               |
| 9 | Don't know                    |

## 2010 NATIONAL HEALTH INTERVIEW SURVEY

## Quality of Life

quallife : Quality of Life

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Document Version Date: 07-Jun-11

Question ID: QOL.130\_00.000

Instrument Variable Name: VIS\_3

Final Documentation Name: VIS\_3

**Do you wear glasses for reading or to see up close?**

Universe: ASTATFLG='1' and (AGE GE '018' and AGE not IN ('997','999')) and VIS\_SS IN ('1','2','3','7','9')

Description: Sample adults 18+ who have no difficulty, some difficulty, a lot of difficulty, or refused or don't know if they have difficulty seeing, even when wearing glasses

Sources: None

Recodes: None

Keywords: glasses; reading; see up close

Notes: None

## Wear glasses for reading/seeing up close

- |   |                 |
|---|-----------------|
| 1 | Yes             |
| 2 | No              |
| 7 | Refused         |
| 8 | Not ascertained |
| 9 | Don't know      |

Question ID: QOL.140\_00.000

Instrument Variable Name: VIS\_4

Final Documentation Name: VIS\_4

**Do you have difficulty clearly seeing the picture on a coin {fill: even when wearing these glasses}? Would you say no difficulty, some difficulty, a lot of difficulty, or are you unable to do this?**

Universe: ASTATFLG='1' and (AGE GE '018' and AGE not IN ('997','999')) and VIS\_SS IN ('1','2','3','7','9')

Description: Sample adults 18+ who have no difficulty, some difficulty, a lot of difficulty, or refused or don't know if they have difficulty seeing, even when wearing glasses

Sources: None

Recodes: None

Keywords: difficulty seeing; coin

Notes: None

## Amount of difficulty seeing picture on coin

- |   |                               |
|---|-------------------------------|
| 1 | No difficulty                 |
| 2 | Some difficulty               |
| 3 | A lot of difficulty           |
| 4 | Cannot do at all/Unable to do |
| 7 | Refused                       |
| 8 | Not ascertained               |
| 9 | Don't know                    |

## 2010 NATIONAL HEALTH INTERVIEW SURVEY

## Quality of Life

quallife : Quality of Life

PUBLIC USE

Document Version Date: 07-Jun-11

Question ID: QOL.150\_00.000

Instrument Variable Name: HEAR\_SS

Final Documentation Name: HEAR\_SS

**Do you have difficulty hearing, even when using a hearing aid? Would you say no difficulty, some difficulty, a lot of difficulty, or are you unable to do this?**

Universe: ASTATFLG='1' and (AGE GE '018' and AGE not IN ('997','999')) and FDRN\_FLG='1' and QOL\_FLG='1'

Description: Sample adults 18+ who were not asked the family disability questions (FDB) and were randomly selected to receive the Quality of Life (QOL) section

Sources: None

Recodes: None

Keywords: difficulty hearing; hearing aid

Notes: None

Amount of difficulty hearing

- |   |                               |
|---|-------------------------------|
| 1 | No difficulty                 |
| 2 | Some difficulty               |
| 3 | A lot of difficulty           |
| 4 | Cannot do at all/Unable to do |
| 7 | Refused                       |
| 8 | Not ascertained               |
| 9 | Don't know                    |

Question ID: QOL.160\_00.000

Instrument Variable Name: HEAR\_1

Final Documentation Name: HEAR\_1

**Do you use a hearing aid?**

Universe: ASTATFLG='1' and (AGE GE '018' and AGE not IN ('997','999')) and HEAR\_SS IN ('1','2','3','7','9')

Description: 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

Sources: None

Recodes: None

Keywords: hearing aid

Notes: None

Use a hearing aid

- |   |                 |
|---|-----------------|
| 1 | Yes             |
| 2 | No              |
| 7 | Refused         |
| 8 | Not ascertained |
| 9 | Don't know      |



## 2010 NATIONAL HEALTH INTERVIEW SURVEY

## Quality of Life

quallife : Quality of Life

PUBLIC USE

Document Version Date: 07-Jun-11

Question ID: QOL160\_00.001

Instrument Variable Name: HEAR\_2

Final Documentation Name: HEAR\_2

**How often do you use your hearing aid(s)? Would you say all of the time, some of the time, rarely, or never?**

Universe: ASTATFLG='1' and (AGE GE '018' and AGE not IN ('997','999')) and HEAR\_1='1'

Description: Sample adults 18+ who use a hearing aid

Sources: None

Recodes: None

Keywords: hearing aid

Notes: None

How often use hearing aid

- |   |                  |
|---|------------------|
| 1 | All of the time  |
| 2 | Some of the time |
| 3 | Rarely           |
| 4 | Never            |
| 7 | Refused          |
| 8 | Not ascertained  |
| 9 | Don't know       |

Question ID: QOL170\_00.000

Instrument Variable Name: HEAR\_3

Final Documentation Name: HEAR\_3

**Do you have difficulty hearing what is said in a conversation with one other person in a quiet room {fill: even when wearing your hearing aid(s)}? Would you say no difficulty, some difficulty, a lot of difficulty, or are you unable to do this?**

Universe: ASTATFLG='1' and (AGE GE '018' and AGE not IN ('997','999')) and HEAR\_SS IN ('1','2','3','7','9')

Description: 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

Sources: None

Recodes: None

Keywords: difficulty hearing; conversation; quiet room

Notes: None

Amount of difficulty hearing conversation with one person in quiet room

- |   |                               |
|---|-------------------------------|
| 1 | No difficulty                 |
| 2 | Some difficulty               |
| 3 | A lot of difficulty           |
| 4 | Cannot do at all/Unable to do |
| 7 | Refused                       |
| 8 | Not ascertained               |
| 9 | Don't know                    |

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## Quality of Life

quallife : Quality of Life

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Document Version Date: 07-Jun-11

Question ID: QOL170\_00.001

Instrument Variable Name: HEAR\_4

Final Documentation Name: HEAR\_4

**Do you have difficulty hearing what is said in a conversation with one other person in a noisier room {fill: even when wearing your hearing aid(s)}? Would you say no difficulty, some difficulty, a lot of difficulty, or are you unable to do this?**

Universe: ASTATFLG='1' and (AGE GE '018' and AGE not IN ('997','999')) and HEAR\_3 IN ('1','2','3','7','9')

Description: 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))

Sources: None

Recodes: None

Keywords: difficulty hearing; conversation; noisier room

Notes: None

Amount of difficulty hearing conversation with one person in noisier room

- |   |                               |
|---|-------------------------------|
| 1 | No difficulty                 |
| 2 | Some difficulty               |
| 3 | A lot of difficulty           |
| 4 | Cannot do at all/Unable to do |
| 7 | Refused                       |
| 8 | Not ascertained               |
| 9 | Don't know                    |

Question ID: QOL180\_00.000

Instrument Variable Name: MOB\_SS

Final Documentation Name: MOB\_SS

**Do you have any difficulty walking or climbing steps? Would you say no difficulty, some difficulty, a lot of difficulty, or are you unable to do this?**

Universe: ASTATFLG='1' and (AGE GE '018' and AGE not IN ('997','999')) and FDRN\_FLG='1' and QOL\_FLG='1'

Description: Sample adults 18+ who were not asked the family disability questions (FDB) and were randomly selected to receive the Quality of Life (QOL) section

Sources: None

Recodes: None

Keywords: walking; climbing steps

Notes: None

Amount of difficulty walking or climbing steps

- |   |                               |
|---|-------------------------------|
| 1 | No difficulty                 |
| 2 | Some difficulty               |
| 3 | A lot of difficulty           |
| 4 | Cannot do at all/Unable to do |
| 7 | Refused                       |
| 8 | Not ascertained               |
| 9 | Don't know                    |

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## Quality of Life

quallife : Quality of Life

PUBLIC USE

Document Version Date: 07-Jun-11

Question ID: QOL.190\_00.000

Instrument Variable Name: MOB\_1

Final Documentation Name: MOB\_1

**Do you have difficulty moving around inside your home? Would you say no difficulty, some difficulty, a lot of difficulty, or are you unable to do this?**

Universe: ASTATFLG='1' and (AGE GE '018' and AGE not IN ('997','999')) and FDRN\_FLG='1' and QOL\_FLG='1'

Description: Sample adults 18+ who were not asked the family disability questions (FDB) and were randomly selected to receive the Quality of Life (QOL) section

Sources: None

Recodes: None

Keywords: difficulty moving; home

Notes: None

Amount of difficulty moving around inside home

- |   |                               |
|---|-------------------------------|
| 1 | No difficulty                 |
| 2 | Some difficulty               |
| 3 | A lot of difficulty           |
| 4 | Cannot do at all/Unable to do |
| 7 | Refused                       |
| 8 | Not ascertained               |
| 9 | Don't know                    |

Question ID: QOL.200\_00.000

Instrument Variable Name: MOB\_2

Final Documentation Name: MOB\_2

**Do you use any equipment or receive help with walking, climbing steps, or moving around?**

Universe: ASTATFLG='1' and (AGE GE '018' and AGE not IN ('997','999')) and FDRN\_FLG='1' and QOL\_FLG='1'

Description: Sample adults 18+ who were not asked the family disability questions (FDB) and were randomly selected to receive the Quality of Life (QOL) section

Sources: None

Recodes: None

Keywords: equipment; walking; climbing stairs; moving around

Notes: None

Use equipment or receive help walking/climbing steps/moving around

- |   |                 |
|---|-----------------|
| 1 | Yes             |
| 2 | No              |
| 7 | Refused         |
| 8 | Not ascertained |
| 9 | Don't know      |

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**Question ID:** QOL.200\_00.001

Instrument Variable Name: MOB\_3A

Final Documentation Name: MOB\_3A

**Do you use any of the following... Cane or walking stick?**

Universe: ASTATFLG='1' and (AGE GE '018' and AGE not IN ('997','999')) and MOB\_2='1'

Description: Sample adults 18+ who use equipment or receive help for walking, climbing steps, or moving around

---

Sources: None

Recodes: None

Keywords: cane; walking stick

Notes: None

---

Use cane/walking stick

- |   |                 |
|---|-----------------|
| 1 | Yes             |
| 2 | No              |
| 7 | Refused         |
| 8 | Not ascertained |
| 9 | Don't know      |
- 

**Question ID:** QOL.200\_00.002

Instrument Variable Name: MOB\_3B

Final Documentation Name: MOB\_3B

**Do you use any of the following... Walker?**

Universe: ASTATFLG='1' and (AGE GE '018' and AGE not IN ('997','999')) and MOB\_2='1'

Description: Sample adults 18+ who use equipment or receive help for walking, climbing steps, or moving around

---

Sources: None

Recodes: None

Keywords: walker

Notes: None

---

Use a walker

- |   |                 |
|---|-----------------|
| 1 | Yes             |
| 2 | No              |
| 7 | Refused         |
| 8 | Not ascertained |
| 9 | Don't know      |
-

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**Question ID:** QOL.200\_00.003

Instrument Variable Name: MOB\_3C

Final Documentation Name: MOB\_3C

**Do you use any of the following... Crutches?**

Universe: ASTATFLG='1' and (AGE GE '018' and AGE not IN ('997','999')) and MOB\_2='1'

Description: Sample adults 18+ who use equipment or receive help for walking, climbing steps, or moving around

---

Sources: None

Recodes: None

Keywords: crutches

Notes: None

---

## Use crutches

- |   |                 |
|---|-----------------|
| 1 | Yes             |
| 2 | No              |
| 7 | Refused         |
| 8 | Not ascertained |
| 9 | Don't know      |
- 

**Question ID:** QOL.200\_00.004

Instrument Variable Name: MOB\_3D

Final Documentation Name: MOB\_3D

**Do you use any of the following... Wheelchair?**

Universe: ASTATFLG='1' and (AGE GE '018' and AGE not IN ('997','999')) and MOB\_2='1'

Description: Sample adults 18+ who use equipment or receive help for walking, climbing steps, or moving around

---

Sources: None

Recodes: None

Keywords: wheelchair

Notes: None

---

## Use a wheelchair

- |   |                 |
|---|-----------------|
| 1 | Yes             |
| 2 | No              |
| 7 | Refused         |
| 8 | Not ascertained |
| 9 | Don't know      |
-

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**Question ID:** QOL.200\_00.005

Instrument Variable Name: MOB\_3E

Final Documentation Name: MOB\_3E

**Do you use any of the following... Prosthesis?**

Universe: ASTATFLG='1' and (AGE GE '018' and AGE not IN ('997','999')) and MOB\_2='1'

Description: Sample adults 18+ who use equipment or receive help for walking, climbing steps, or moving around

Sources: None

Recodes: None

Keywords: prosthesis

Notes: None

## Use prosthesis

- |   |                 |
|---|-----------------|
| 1 | Yes             |
| 2 | No              |
| 7 | Refused         |
| 8 | Not ascertained |
| 9 | Don't know      |

**Question ID:** QOL.200\_00.006

Instrument Variable Name: MOB\_3F

Final Documentation Name: MOB\_3F

**Do you use any of the following... Someone's assistance?**

Universe: ASTATFLG='1' and (AGE GE '018' and AGE not IN ('997','999')) and MOB\_2='1'

Description: Sample adults 18+ who use equipment or receive help for walking, climbing steps, or moving around

Sources: None

Recodes: None

Keywords: assistance

Notes: None

## Use someone's assistance

- |   |                 |
|---|-----------------|
| 1 | Yes             |
| 2 | No              |
| 7 | Refused         |
| 8 | Not ascertained |
| 9 | Don't know      |

---

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**Question ID:** QOL.200\_00.007

Instrument Variable Name: MOB\_3G

Final Documentation Name: MOB\_3G

**Do you use any of the following... Other type of equipment or help?**

Universe: ASTATFLG='1' and (AGE GE '018' and AGE not IN ('997','999')) and MOB\_2='1'

Description: Sample adults 18+ who use equipment or receive help for walking, climbing steps, or moving around

---

Sources: None

Recodes: None

Keywords: equipment

Notes: None

---

Use other type of equipment or help

- |   |                 |
|---|-----------------|
| 1 | Yes             |
| 2 | No              |
| 7 | Refused         |
| 8 | Not ascertained |
| 9 | Don't know      |
- 

**Question ID:** QOL.200\_00.008

Instrument Variable Name: MOBSPEC

Final Documentation Name: MOBSPEC

**Specify other type of equipment or help received for getting around.**

Universe: ASTATFLG='1' and (AGE GE '018' and AGE not IN ('997','999')) and MOB\_3G='1'

Description: Sample adults 18+ who use an other type of equipment or help for walking, climbing steps, or moving around

---

Sources: None

Recodes: None

Keywords: equipment

Notes: None

---

Specify other type of equipment or help

- |          |                   |
|----------|-------------------|
| 97       | Refused           |
| 98       | Not ascertained   |
| 99       | Don't know        |
| Verbatim | Verbatim response |
-

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Question ID: QOL.210\_00.000

Instrument Variable Name: MOB\_4

Final Documentation Name: MOB\_4

**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?**

Universe: ASTATFLG='1' and (AGE GE '018' and AGE not IN ('997','999')) and (MOB\_2 IN ('2','7','9') or MOB\_3D IN ('2','7','9'))

Description: Sample adults 18+ who do not use any equipment or receive help or refuse or don't know if they use any equipment or receive help with walking, climbing steps, or moving around or use equipment or receive help but do not use a wheelchair

---

Sources: None

Recodes: None

Keywords: difficulty walking

Notes: None

---

Amount of difficulty walking 100 yards on level ground

- 1 No difficulty
  - 2 Some difficulty
  - 3 A lot of difficulty
  - 4 Cannot do at all/Unable to do
  - 7 Refused
  - 8 Not ascertained
  - 9 Don't know
-



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Question ID: QOL.220\_00.000

Instrument Variable Name: MOB\_5

Final Documentation Name: MOB\_5

**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?**

Universe: ASTATFLG='1' and (AGE GE '018' and AGE not IN ('997','999')) and MOB\_3D NE '1' and MOB\_4 IN ('1','2','3','7','9')

Description: Sample adults 18+ who do not use any equipment or receive help or refuse or don't know if they use any equipment or receive help with walking, climbing steps, or moving around or use equipment or receive help but do not use a wheelchair 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

---

Sources: None

Recodes: None

Keywords: difficulty walking

Notes: None

---

Amount of difficulty walking a third of a mile on level ground

- |   |                               |
|---|-------------------------------|
| 1 | No difficulty                 |
| 2 | Some difficulty               |
| 3 | A lot of difficulty           |
| 4 | Cannot do at all/Unable to do |
| 7 | Refused                       |
| 8 | Not ascertained               |
| 9 | Don't know                    |
-

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2010 NATIONAL HEALTH INTERVIEW SURVEY

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Question ID: QOL.230\_00.000

Instrument Variable Name: MOB\_6

Final Documentation Name: MOB\_6

**Do you have difficulty walking up or down 12 steps {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?**

Universe: ASTATFLG='1' and (AGE GE '018' and AGE not IN ('997','999')) and (MOB\_2 IN ('2','7','9') or MOB\_3D IN ('2','7','9'))

Description: Sample adults 18+ who do not use any equipment or receive help or refuse or don't know if they use any equipment or receive help with walking, climbing steps, or moving around or use equipment or receive help but do not use a wheelchair

---

Sources: None

Recodes: None

Keywords: difficulty walking

Notes: None

---

Amount of difficulty walking up or down 12 steps

- |   |                               |
|---|-------------------------------|
| 1 | No difficulty                 |
| 2 | Some difficulty               |
| 3 | A lot of difficulty           |
| 4 | Cannot do at all/Unable to do |
| 7 | Refused                       |
| 8 | Not ascertained               |
| 9 | Don't know                    |
-

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2010 NATIONAL HEALTH INTERVIEW SURVEY

Quality of Life

quallife : Quality of Life

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Document Version Date: 07-Jun-11

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Question ID: QOL.240\_00.000

Instrument Variable Name: MOB\_7

Final Documentation Name: MOB\_7

**Do you have difficulty walking 100 yards on level ground, that would be about the length of one (1) 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?**

Universe: ASTATFLG='1' and (AGE GE '018' and AGE not IN ('997','999')) and MOB\_2='1' and MOB\_3D NE '1'

Description: Sample adults 18+ who use equipment or receive help with walking, climbing steps, or moving around but do not use a wheelchair

---

Sources: None

Recodes: None

Keywords: difficulty walking; aid

Notes: None

---

Amount of difficulty walking 100 yards on level ground using aid

- |   |                               |
|---|-------------------------------|
| 1 | No difficulty                 |
| 2 | Some difficulty               |
| 3 | A lot of difficulty           |
| 4 | Cannot do at all/Unable to do |
| 7 | Refused                       |
| 8 | Not ascertained               |
| 9 | Don't know                    |
-

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Quality of Life

quallife : Quality of Life

PUBLIC USE

Document Version Date: 07-Jun-11

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Question ID: QOL.250\_00.000

Instrument Variable Name: MOB\_8

Final Documentation Name: MOB\_8

**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?**

Universe: ASTATFLG='1' and (AGE GE '018' and AGE not IN ('997','999')) and MOB\_2='1' and MOB\_3D NE '1' and MOB\_7 IN ('1','2','3','7','9')

Description: Sample adults 18+ who use equipment or receive help with walking, climbing steps, or moving around but do not use a wheelchair 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

---

Sources: None

Recodes: None

Keywords: difficulty walking; aid

Notes: None

---

Amount of difficulty walking a third of a mile on level ground using aid

- 1 No difficulty
  - 2 Some difficulty
  - 3 A lot of difficulty
  - 4 Cannot do at all/Unable to do
  - 7 Refused
  - 8 Not ascertained
  - 9 Don't know
-

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## Quality of Life

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Document Version Date: 07-Jun-11

Question ID: QOL.260\_00.000

Instrument Variable Name: MOB\_9

Final Documentation Name: MOB\_9

**Do you have difficulty walking up or down 12 steps, even when using your aid(s)? Would you say no difficulty, some difficulty, a lot of difficulty, or are you unable to do this?**

Universe: ASTATFLG='1' and (AGE GE '018' and AGE not IN ('997','999')) and MOB\_2='1' and MOB\_3D NE '1'

Description: Sample adults 18+ who use equipment or receive help with walking, climbing steps, or moving around but do not use a wheelchair

Sources: None

Recodes: None

Keywords: difficulty walking; aid

Notes: None

Amount of difficulty walking up or down 12 steps using aid

- |   |                               |
|---|-------------------------------|
| 1 | No difficulty                 |
| 2 | Some difficulty               |
| 3 | A lot of difficulty           |
| 4 | Cannot do at all/Unable to do |
| 7 | Refused                       |
| 8 | Not ascertained               |
| 9 | Don't know                    |

Question ID: QOL.270\_00.000

Instrument Variable Name: COM\_SS

Final Documentation Name: COM\_SS

**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?**

Universe: ASTATFLG='1' and (AGE GE '018' and AGE not IN ('997','999')) and FDRN\_FLG='1' and QOL\_FLG='1'

Description: Sample adults 18+ who were not asked the family disability questions (FDB) and were randomly selected to receive the Quality of Life (QOL) section

Sources: None

Recodes: None

Keywords: language; difficulty; communicating

Notes: None

Amount of difficulty communicating using usual language

- |   |                               |
|---|-------------------------------|
| 1 | No difficulty                 |
| 2 | Some difficulty               |
| 3 | A lot of difficulty           |
| 4 | Cannot do at all/Unable to do |
| 7 | Refused                       |
| 8 | Not ascertained               |
| 9 | Don't know                    |

## 2010 NATIONAL HEALTH INTERVIEW SURVEY

## Quality of Life

quallife : Quality of Life

PUBLIC USE

Document Version Date: 07-Jun-11

Question ID: QOL.280\_00.000

Instrument Variable Name: COM\_1

Final Documentation Name: COM\_1

**Do people have difficulty understanding you when you speak? Would you say no difficulty, some difficulty, a lot of difficulty, or are they unable to understand you?**

Universe: ASTATFLG='1' and (AGE GE '018' and AGE not IN ('997','999')) and FDRN\_FLG='1' and QOL\_FLG='1'

Description: Sample adults 18+ who were not asked the family disability questions (FDB) and were randomly selected to receive the Quality of Life (QOL) section

Sources: None

Recodes: None

Keywords: difficulty; understanding; speak

Notes: None

Amount of difficulty people have understanding when you speak

- |   |                               |
|---|-------------------------------|
| 1 | No difficulty                 |
| 2 | Some difficulty               |
| 3 | A lot of difficulty           |
| 4 | Cannot do at all/Unable to do |
| 7 | Refused                       |
| 8 | Not ascertained               |
| 9 | Don't know                    |

Question ID: QOL.285\_01.000

Instrument Variable Name: P\_COM\_1A

Final Documentation Name: P\_COM\_1A

**Which of the following, if any, are reasons for your difficulty communicating or being understood... Because you sometimes talk too fast, feel shy, or have trouble expressing yourself?**

Universe: ASTATFLG='1' and (AGE GE '018' and AGE not IN ('997','999')) and (COM\_SS IN ('2','3','4') or COM\_1 IN ('2','3','4'))

Description: Sample adults 18+ who have some difficulty, a lot of difficulty, or cannot communicate, or have some difficulty, a lot of difficulty or cannot be understood when speaking

Sources: None

Recodes: None

Keywords: difficulty; communicating; being understood; talk too fast; feel shy

Notes: None

Talk too fast/feel shy/have trouble expressing yourself

- |   |                 |
|---|-----------------|
| 1 | Yes             |
| 2 | No              |
| 7 | Refused         |
| 8 | Not ascertained |
| 9 | Don't know      |

## 2010 NATIONAL HEALTH INTERVIEW SURVEY

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Document Version Date: 07-Jun-11

Question ID: QOL.285\_02.000

Instrument Variable Name: P\_COM\_1B

Final Documentation Name: P\_COM\_1B

**Which of the following, if any, are reasons for your difficulty communicating or being understood... Because of a physical problem with your mouth or tongue?**

Universe: ASTATFLG='1' and (AGE GE '018' and AGE not IN ('997','999')) and (COM\_SS IN ('2','3','4') or COM\_1 IN ('2','3','4'))

Description: Sample adults 18+ who have some difficulty, a lot of difficulty, or cannot communicate, or have some difficulty, a lot of difficulty or cannot be understood when speaking

Sources: None

Recodes: None

Keywords: difficulty; communicating; being understood; physical problem

Notes: None

Physical problem with mouth/tongue

- |   |                 |
|---|-----------------|
| 1 | Yes             |
| 2 | No              |
| 7 | Refused         |
| 8 | Not ascertained |
| 9 | Don't know      |

Question ID: QOL.285\_03.000

Instrument Variable Name: P\_COM\_1C

Final Documentation Name: P\_COM\_1C

**Which of the following, if any, are reasons for your difficulty communicating or being understood... Because you need to understand other languages or different ways of speaking?**

Universe: ASTATFLG='1' and (AGE GE '018' and AGE not IN ('997','999')) and (COM\_SS IN ('2','3','4') or COM\_1 IN ('2','3','4'))

Description: Sample adults 18+ who have some difficulty, a lot of difficulty, or cannot communicate, or have some difficulty, a lot of difficulty or cannot be understood when speaking

Sources: None

Recodes: None

Keywords: difficulty; communicating; being understood; language; speaking

Notes: None

Need to understand other languages/different ways of speaking

- |   |                 |
|---|-----------------|
| 1 | Yes             |
| 2 | No              |
| 7 | Refused         |
| 8 | Not ascertained |
| 9 | Don't know      |

## 2010 NATIONAL HEALTH INTERVIEW SURVEY

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Document Version Date: 07-Jun-11

Question ID: QOL285\_04.000

Instrument Variable Name: P\_COM\_1D

Final Documentation Name: P\_COM\_1D

**Which of the following, if any, are reasons for your difficulty communicating or being understood... Because you have trouble hearing?**

Universe: ASTATFLG='1' and (AGE GE '018' and AGE not IN ('997','999')) and (COM\_SS IN ('2','3','4') or COM\_1 IN ('2','3','4'))

Description: Sample adults 18+ who have some difficulty, a lot of difficulty, or cannot communicate, or have some difficulty, a lot of difficulty or cannot be understood when speaking

Sources: None

Recodes: None

Keywords: difficulty; communicating; being understood; trouble hearing

Notes: None

Have trouble hearing

- |   |                 |
|---|-----------------|
| 1 | Yes             |
| 2 | No              |
| 7 | Refused         |
| 8 | Not ascertained |
| 9 | Don't know      |

Question ID: QOL290\_00.000

Instrument Variable Name: COM\_2

Final Documentation Name: COM\_2

**Do you use sign language?**

Universe: ASTATFLG='1' and (AGE GE '018' and AGE not IN ('997','999')) and FDRN\_FLG='1' and QOL\_FLG='1'

Description: Sample adults 18+ who were not asked the family disability questions (FDB) and were randomly selected to receive the Quality of Life (QOL) section

Sources: None

Recodes: None

Keywords: sign language

Notes: None

Use sign language

- |   |                 |
|---|-----------------|
| 1 | Yes             |
| 2 | No              |
| 7 | Refused         |
| 8 | Not ascertained |
| 9 | Don't know      |



## 2010 NATIONAL HEALTH INTERVIEW SURVEY

## Quality of Life

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PUBLIC USE

Document Version Date: 07-Jun-11

Question ID: QOL300\_00.000

Instrument Variable Name: COG\_SS

Final Documentation Name: COG\_SS

**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?**

Universe: ASTATFLG='1' and (AGE GE '018' and AGE not IN ('997','999')) and FDRN\_FLG='1' and QOL\_FLG='1'

Description: Sample adults 18+ who were not asked the family disability questions (FDB) and were randomly selected to receive the Quality of Life (QOL) section

Sources: None

Recodes: None

Keywords: difficulty; remembering; concentrating

Notes: None

Amount of difficulty remembering or concentrating

- |   |                               |
|---|-------------------------------|
| 1 | No difficulty                 |
| 2 | Some difficulty               |
| 3 | A lot of difficulty           |
| 4 | Cannot do at all/Unable to do |
| 7 | Refused                       |
| 8 | Not ascertained               |
| 9 | Don't know                    |

Question ID: QOL310\_00.000

Instrument Variable Name: COG\_1

Final Documentation Name: COG\_1

**Do you have difficulty remembering, concentrating, or both?**

Universe: ASTATFLG='1' and (AGE GE '018' and AGE not IN ('997','999')) and COG\_SS IN ('2','3','4','7','9')

Description: Sample adults 18+ who have some difficulty, a lot of difficulty, or are unable to remember or concentrate, or refused or don't know if they have difficulty remembering or concentrating

Sources: None

Recodes: None

Keywords: difficulty; remembering; concentrating

Notes: None

Difficulty remembering, concentrating, or both

- |   |  |
|---|--|
| 1 | Difficulty remembering only                        |
| 2 | Difficulty concentrating only                      |
| 3 | Difficulty with both remembering and concentrating |
| 7 | Refused  |
| 8 | Not ascertained                                    |
| 9 | Don't know   |

## 2010 NATIONAL HEALTH INTERVIEW SURVEY

## Quality of Life

quallife : Quality of Life

PUBLIC USE

Document Version Date: 07-Jun-11

Question ID: QOL.320\_00.000

Instrument Variable Name: COG\_2

Final Documentation Name: COG\_2

**How often do you have difficulty remembering? Would you say sometimes, often or all of the time?**

Universe: ASTATFLG='1' and (AGE GE '018' and AGE not IN ('997','999')) and COG\_SS IN ('2','3','4','7','9') and COG\_1 IN ('1','3','7','9')

Description: Sample adults 18+ who have difficulty remembering only, difficulty both remembering and concentrating or refused or don't know if they have difficulty remembering, concentrating, or both

Sources: None

Recodes: None

Keywords: difficulty; remembering

Notes: None

How often have difficulty remembering

- |   |                 |
|---|-----------------|
| 1 | Sometimes       |
| 2 | Often           |
| 3 | All of the time |
| 7 | Refused         |
| 8 | Not ascertained |
| 9 | Don't know      |

Question ID: QOL.330\_00.000

Instrument Variable Name: COG\_3

Final Documentation Name: COG\_3

**Do you have difficulty remembering a few things, a lot of things, or almost everything?**

Universe: ASTATFLG='1' and (AGE GE '018' and AGE not IN ('997','999')) and COG\_SS IN ('2','3','4','7','9') and COG\_1 IN ('1','3','7','9')

Description: Sample adults 18+ who have difficulty remembering only, difficulty both remembering and concentrating or refused or don't know if they have difficulty remembering, concentrating, or both

Sources: None

Recodes: None

Keywords: difficulty; remembering

Notes: None

How much you have difficulty remembering

- |   |                   |
|---|-------------------|
| 1 | A few things      |
| 2 | A lot of things   |
| 3 | Almost everything |
| 7 | Refused           |
| 8 | Not ascertained   |
| 9 | Don't know        |

## 2010 NATIONAL HEALTH INTERVIEW SURVEY

## Quality of Life

quallife : Quality of Life

PUBLIC USE

Document Version Date: 07-Jun-11

Question ID: QOL335\_01.000

Instrument Variable Name: P\_COG\_3A

Final Documentation Name: P\_COG\_3A

**Which of the following statements, if any, describe your difficulty remembering... I forget things because I am busy and have too much to remember.**

Universe: ASTATFLG='1' and (AGE GE '018' and AGE not IN ('997','999')) and COG\_SS IN ('2','3','4','7','9') and COG\_1 IN ('1','3','7','9')

Description: Sample adults 18+ who have difficulty remembering only, difficulty both remembering and concentrating or refused or don't know if they have difficulty remembering, concentrating, or both

Sources: None

Recodes: None

Keywords: difficulty; remembering

Notes: None

Forget things because busy/too much to remember

- |   |                 |
|---|-----------------|
| 1 | Yes             |
| 2 | No              |
| 7 | Refused         |
| 8 | Not ascertained |
| 9 | Don't know      |

Question ID: QOL335\_02.000

Instrument Variable Name: P\_COG\_3B

Final Documentation Name: P\_COG\_3B

**Which of the following statements, if any, describe your difficulty remembering... My difficulty is getting worse.**

Universe: ASTATFLG='1' and (AGE GE '018' and AGE not IN ('997','999')) and COG\_SS IN ('2','3','4','7','9') and COG\_1 IN ('1','3','7','9')

Description: Sample adults 18+ who have difficulty remembering only, difficulty both remembering and concentrating or refused or don't know if they have difficulty remembering, concentrating, or both

Sources: None

Recodes: None

Keywords: difficulty; remembering

Notes: None

Difficulty is getting worse

- |   |                 |
|---|-----------------|
| 1 | Yes             |
| 2 | No              |
| 7 | Refused         |
| 8 | Not ascertained |
| 9 | Don't know      |

## 2010 NATIONAL HEALTH INTERVIEW SURVEY

## Quality of Life

quallife : Quality of Life

PUBLIC USE

Document Version Date: 07-Jun-11

Question ID: QOL.335\_03.000

Instrument Variable Name: P\_COG\_3C

Final Documentation Name: P\_COG\_3C

**Which of the following statements, if any, describe your difficulty remembering... My difficulty has put me or my family in danger.**

Universe: ASTATFLG='1' and (AGE GE '018' and AGE not IN ('997','999')) and COG\_SS IN ('2','3','4','7','9') and COG\_1 IN ('1','3','7','9')

Description: Sample adults 18+ who have difficulty remembering only, difficulty both remembering and concentrating or refused or don't know if they have difficulty remembering, concentrating, or both

Sources: None

Recodes: None

Keywords: difficulty; remembering

Notes: None

Difficulty has put me/my family in danger

- |   |                 |
|---|-----------------|
| 1 | Yes             |
| 2 | No              |
| 7 | Refused         |
| 8 | Not ascertained |
| 9 | Don't know      |

Question ID: QOL.335\_04.000

Instrument Variable Name: P\_COG\_3D

Final Documentation Name: P\_COG\_3D

**Which of the following statements, if any, describe your difficulty remembering... I only forget little or inconsequential things.**

Universe: ASTATFLG='1' and (AGE GE '018' and AGE not IN ('997','999')) and COG\_SS IN ('2','3','4','7','9') and COG\_1 IN ('1','3','7','9')

Description: Sample adults 18+ who have difficulty remembering only, difficulty both remembering and concentrating or refused or don't know if they have difficulty remembering, concentrating, or both

Sources: None

Recodes: None

Keywords: difficulty; remembering

Notes: None

Only forget little/inconsequential things

- |   |                 |
|---|-----------------|
| 1 | Yes             |
| 2 | No              |
| 7 | Refused         |
| 8 | Not ascertained |
| 9 | Don't know      |

## 2010 NATIONAL HEALTH INTERVIEW SURVEY

## Quality of Life

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Document Version Date: 07-Jun-11

Question ID: QOL.335\_05.000

Instrument Variable Name: P\_COG\_3E

Final Documentation Name: P\_COG\_3E

**Which of the following statements, if any, describe your difficulty remembering... I must write down important things, such as my address or when to take medicine, so that I do not forget.**

Universe: ASTATFLG='1' and (AGE GE '018' and AGE not IN ('997','999')) and COG\_SS IN ('2','3','4','7','9') and COG\_1 IN ('1','3','7','9')

Description: Sample adults 18+ who have difficulty remembering only, difficulty both remembering and concentrating or refused or don't know if they have difficulty remembering, concentrating, or both

Sources: None

Recodes: None

Keywords: difficulty; remembering

Notes: None

Must write down important things so I don't forget

- |   |                 |
|---|-----------------|
| 1 | Yes             |
| 2 | No              |
| 7 | Refused         |
| 8 | Not ascertained |
| 9 | Don't know      |

Question ID: QOL.335\_06.000

Instrument Variable Name: P\_COG\_3F

Final Documentation Name: P\_COG\_3F

**Which of the following statements, if any, describe your difficulty remembering... My family members or friends are worried about my difficulty remembering.**

Universe: ASTATFLG='1' and (AGE GE '018' and AGE not IN ('997','999')) and COG\_SS IN ('2','3','4','7','9') and COG\_1 IN ('1','3','7','9')

Description: Sample adults 18+ who have difficulty remembering only, difficulty both remembering and concentrating or refused or don't know if they have difficulty remembering, concentrating, or both

Sources: None

Recodes: None

Keywords: difficulty; remembering

Notes: None

Family members/friends are worried about my difficulty remembering

- |   |                 |
|---|-----------------|
| 1 | Yes             |
| 2 | No              |
| 7 | Refused         |
| 8 | Not ascertained |
| 9 | Don't know      |

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## Quality of Life

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Document Version Date: 07-Jun-11

Question ID: QOL.335\_07.000

Instrument Variable Name: P\_COG\_3G

Final Documentation Name: P\_COG\_3G

Which of the following statements, if any, describe your difficulty remembering... My difficulty is normal for someone my age.

Universe: ASTATFLG='1' and (AGE GE '018' and AGE not IN ('997','999')) and COG\_SS IN ('2','3','4','7','9') and COG\_1 IN ('1','3','7','9')

Description: Sample adults 18+ who have difficulty remembering only, difficulty both remembering and concentrating or refused or don't know if they have difficulty remembering, concentrating, or both

Sources: None

Recodes: None

Keywords: difficulty; remembering

Notes: None

Difficulty is normal for my age

- |   |                 |
|---|-----------------|
| 1 | Yes             |
| 2 | No              |
| 7 | Refused         |
| 8 | Not ascertained |
| 9 | Don't know      |

Question ID: QOL.340\_00.000

Instrument Variable Name: COG\_4

Final Documentation Name: COG\_4

How much difficulty do you have concentrating for ten minutes? Would you say a little, a lot, or somewhere in between?

Universe: ASTATFLG='1' and (AGE GE '018' and AGE not IN ('997','999')) and COG\_SS IN ('2','3','4','7','9') and COG\_1 IN ('2','3','7','9')

Description: Sample adults 18+ who have difficulty concentrating only, difficulty both remembering and concentrating or refused or don't know if they have difficulty remembering, concentrating, or both

Sources: None

Recodes: None

Keywords: difficulty; concentrating

Notes: None

Amount of difficulty concentrating for 10 minutes

- |   |   |
|---|---|
| 1 | A little                                |
| 2 | A lot                                   |
| 3 | Somewhere in between a little and a lot |
| 7 | Refused                                 |
| 8 | Not ascertained                         |
| 9 | Don't know                              |

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## Quality of Life

quallife : Quality of Life

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Document Version Date: 07-Jun-11

Question ID: QOL.350\_00.000

Instrument Variable Name: COG\_5

Final Documentation Name: COG\_5

**Would you say this is closer to a little, closer to a lot, or exactly in the middle?**

Universe: ASTATFLG='1' and (AGE GE '018' and AGE not IN ('997','999')) and COG\_SS IN ('2','3','4','7','9') and COG\_1 IN ('2','3','7','9') and COG\_4='3'

Description: Sample adults 18+ who have somewhere in between a little and a lot of difficulty concentrating for ten minutes

Sources: None

Recodes: None

Keywords: difficulty; concentrating

Notes: None

When difficulty concentrating is somewhere in between, is it closer to a little, closer to a lot, or exactly in the middle

- |   |                       |
|---|-----------------------|
| 1 | Closer to a little    |
| 2 | Closer to a lot       |
| 3 | Exactly in the middle |
| 7 | Refused               |
| 8 | Not ascertained       |
| 9 | Don't know            |

Question ID: QOL.360\_00.000

Instrument Variable Name: UB\_SS

Final Documentation Name: UB\_SS

**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?**

Universe: ASTATFLG='1' and (AGE GE '018' and AGE not IN ('997','999')) and FDRN\_FLG='1' and QOL\_FLG='1'

Description: Sample adults 18+ who were not asked the family disability questions (FDB) and were randomly selected to receive the Quality of Life (QOL) section

Sources: None

Recodes: None

Keywords: difficulty; self care; washing; dressing

Notes: None

Amount of difficulty with self care

- |   |                               |
|---|-------------------------------|
| 1 | No difficulty                 |
| 2 | Some difficulty               |
| 3 | A lot of difficulty           |
| 4 | Cannot do at all/Unable to do |
| 7 | Refused                       |
| 8 | Not ascertained               |
| 9 | Don't know                    |

## 2010 NATIONAL HEALTH INTERVIEW SURVEY

## Quality of Life

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PUBLIC USE

Document Version Date: 07-Jun-11

Question ID: QOL.370\_00.000

Instrument Variable Name: UB\_1

Final Documentation Name: UB\_1

**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?**

Universe: ASTATFLG='1' and (AGE GE '018' and AGE not IN ('997','999')) and FDRN\_FLG='1' and QOL\_FLG='1'

Description: Sample adults 18+ who were not asked the family disability questions (FDB) and were randomly selected to receive the Quality of Life (QOL) section

Sources: None

Recodes: None

Keywords: difficulty; raising

Notes: None

Amount of difficulty raising 2 liter bottle of water/soda from waist to eye level

- |   |                               |
|---|-------------------------------|
| 1 | No difficulty                 |
| 2 | Some difficulty               |
| 3 | A lot of difficulty           |
| 4 | Cannot do at all/Unable to do |
| 7 | Refused                       |
| 8 | Not ascertained               |
| 9 | Don't know                    |

Question ID: QOL.380\_00.000

Instrument Variable Name: UB\_2

Final Documentation Name: UB\_2

**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?**

Universe: ASTATFLG='1' and (AGE GE '018' and AGE not IN ('997','999')) and FDRN\_FLG='1' and QOL\_FLG='1'

Description: Sample adults 18+ who were not asked the family disability questions (FDB) and were randomly selected to receive the Quality of Life (QOL) section

Sources: None

Recodes: None

Keywords: difficulty; using hands; using fingers

Notes: None

Amount of difficulty using hands/fingers

- |   |                               |
|---|-------------------------------|
| 1 | No difficulty                 |
| 2 | Some difficulty               |
| 3 | A lot of difficulty           |
| 4 | Cannot do at all/Unable to do |
| 7 | Refused                       |
| 8 | Not ascertained               |
| 9 | Don't know                    |



## 2010 NATIONAL HEALTH INTERVIEW SURVEY

## Quality of Life

quallife : Quality of Life

PUBLIC USE

Document Version Date: 07-Jun-11

Question ID: QOL.390\_00.000

Instrument Variable Name: LEARN\_1

Final Documentation Name: LEARN\_1

**Do you have difficulty learning the rules for a new game? Would you say no difficulty, some difficulty, a lot of difficulty, or are you unable to do this?**

Universe: ASTATFLG='1' and (AGE GE '018' and AGE not IN ('997','999')) and FDRN\_FLG='1' and QOL\_FLG='1'

Description: Sample adults 18+ who were not asked the family disability questions (FDB) and were randomly selected to receive the Quality of Life (QOL) section

Sources: None

Recodes: None

Keywords: difficulty; learning rules

Notes: None

Amount of difficulty learning rules for new game

- |   |                               |
|---|-------------------------------|
| 1 | No difficulty                 |
| 2 | Some difficulty               |
| 3 | A lot of difficulty           |
| 4 | Cannot do at all/Unable to do |
| 7 | Refused                       |
| 8 | Not ascertained               |
| 9 | Don't know                    |

Question ID: QOL.400\_00.000

Instrument Variable Name: LEARN\_2

Final Documentation Name: LEARN\_2

**Do you have difficulty understanding and following instructions for example, to use a cell phone or to get to a new place? Would you say no difficulty, some difficulty, a lot of difficulty, or are you unable to do this?**

Universe: ASTATFLG='1' and (AGE GE '018' and AGE not IN ('997','999')) and FDRN\_FLG='1' and QOL\_FLG='1'

Description: Sample adults 18+ who were not asked the family disability questions (FDB) and were randomly selected to receive the Quality of Life (QOL) section

Sources: None

Recodes: None

Keywords: difficulty; understanding instructions; following instructions

Notes: None

Amount of difficulty understanding/following instructions

- |   |                               |
|---|-------------------------------|
| 1 | No difficulty                 |
| 2 | Some difficulty               |
| 3 | A lot of difficulty           |
| 4 | Cannot do at all/Unable to do |
| 7 | Refused                       |
| 8 | Not ascertained               |
| 9 | Don't know                    |

---

**2010 NATIONAL HEALTH INTERVIEW SURVEY****Quality of Life****quallife : Quality of Life****PUBLIC USE****Document Version Date: 07-Jun-11**

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**Question ID:** QOL.410\_00.000

Instrument Variable Name: ANX\_1

Final Documentation Name: ANX\_1

**How often do you feel worried, nervous or anxious? Would you say daily, weekly, monthly, a few times a year, or never?**

Universe: ASTATFLG='1' and (AGE GE '018' and AGE not IN ('997','999')) and FDRN\_FLG='1' and QOL\_FLG='1'

Description: Sample adults 18+ who were not asked the family disability questions (FDB) and were randomly selected to receive the Quality of Life (QOL) section

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Sources: None

Recodes: None

Keywords: worried; nervous; anxious

Notes: None

---

How often feel worried/nervous/anxious

- |   |                    |
|---|--------------------|
| 1 | Daily              |
| 2 | Weekly             |
| 3 | Monthly            |
| 4 | A few times a year |
| 5 | Never              |
| 7 | Refused            |
| 8 | Not ascertained    |
| 9 | Don't know         |
- 

**Question ID:** QOL.420\_00.000

Instrument Variable Name: ANX\_2

Final Documentation Name: ANX\_2

**Do you take medication for these feelings?**

Universe: ASTATFLG='1' and (AGE GE '018' and AGE not IN ('997','999')) and FDRN\_FLG='1' and QOL\_FLG='1'

Description: Sample adults 18+ who were not asked the family disability questions (FDB) and were randomly selected to receive the Quality of Life (QOL) section

---

Sources: None

Recodes: None

Keywords: medication

Notes: None

---

Take medication for worried/nervous/anxious feelings

- |   |                 |
|---|-----------------|
| 1 | Yes             |
| 2 | No              |
| 7 | Refused         |
| 8 | Not ascertained |
| 9 | Don't know      |
-

## 2010 NATIONAL HEALTH INTERVIEW SURVEY

## Quality of Life

quallife : Quality of Life

PUBLIC USE

Document Version Date: 07-Jun-11

Question ID: QOL.430\_00.000

Instrument Variable Name: ANX\_3

Final Documentation Name: ANX\_3

**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?**

Universe: ASTATFLG='1' and (AGE GE '018' and AGE not IN ('997','999')) and (ANX\_1 IN ('1','2','3','7','9') or ANX\_2 IN ('1','7','9'))

Description: Sample adults 18+ who feel worried, anxious, or nervous daily, weekly, or monthly or refused or don't know how often or who take medication for these feelings or refused or don't know if they take medication for these feelings

Sources: None

Recodes: None

Keywords: worried; nervous; anxious

Notes: None

Level of feelings last time felt worried/nervous/anxious

- |   |   |
|---|---|
| 1 | A little                                |
| 2 | A lot                                   |
| 3 | Somewhere in between a little and a lot |
| 7 | Refused                                 |
| 8 | Not ascertained                         |
| 9 | Don't know                              |

Question ID: QOL.440\_00.000

Instrument Variable Name: ANX\_4

Final Documentation Name: ANX\_4

**Would you say this was closer to a little, closer to a lot, or exactly in the middle?**

Universe: ASTATFLG='1' and (AGE GE '018' and AGE not IN ('997','999')) and (ANX\_1 IN ('1','2','3','7','9') or ANX\_2 IN ('1','7','9')) and ANX\_3='3'

Description: Sample adults 18+ who feel worried, anxious, or nervous daily, weekly, or monthly or refused or don't know how often or who take medication for these feelings or refused or don't know if they take medication for these feelings and the last time they felt worried, anxious, or nervous described the level of these feelings as somewhere in between a little and a lot

Sources: None

Recodes: None

Keywords: worried; nervous; anxious

Notes: None

Level of feelings somewhere in between, is it closer to a little, closer to a lot, or exactly in the middle

- |   |                       |
|---|-----------------------|
| 1 | Closer to a little    |
| 2 | Closer to a lot       |
| 3 | Exactly in the middle |
| 7 | Refused               |
| 8 | Not ascertained       |
| 9 | Don't know            |

## 2010 NATIONAL HEALTH INTERVIEW SURVEY

## Quality of Life

quallife : Quality of Life

PUBLIC USE

Document Version Date: 07-Jun-11

Question ID: QOL.445\_01.000

Instrument Variable Name: P\_ANX\_4A

Final Documentation Name: P\_ANX\_4A

**Which of the following statements, if any, describe your feelings of being worried, nervous, or anxious... My feelings are caused by the type and amount of work I do.**

Universe: ASTATFLG='1' and (AGE GE '018' and AGE not IN ('997','999')) and (ANX\_1 IN ('1','2','3','7','9') or ANX\_2 IN ('1','7','9'))

Description: Sample adults 18+ who feel worried, anxious, or nervous daily, weekly, or monthly or refused or don't know how often or who take medication for these feelings or refused or don't know if they take medication for these feelings

Sources: None

Recodes: None

Keywords: worried; nervous; anxious

Notes: None

Feelings caused by type/amount of work I do

- |   |                 |
|---|-----------------|
| 1 | Yes             |
| 2 | No              |
| 7 | Refused         |
| 8 | Not ascertained |
| 9 | Don't know      |

Question ID: QOL.445\_02.000

Instrument Variable Name: P\_ANX\_4B

Final Documentation Name: P\_ANX\_4B

**Which of the following statements, if any, describe your feelings of being worried, nervous, or anxious... Sometimes the feelings can be so intense that my chest hurts and I have trouble breathing.**

Universe: ASTATFLG='1' and (AGE GE '018' and AGE not IN ('997','999')) and (ANX\_1 IN ('1','2','3','7','9') or ANX\_2 IN ('1','7','9'))

Description: Sample adults 18+ who feel worried, anxious, or nervous daily, weekly, or monthly or refused or don't know how often or who take medication for these feelings or refused or don't know if they take medication for these feelings

Sources: None

Recodes: None

Keywords: worried; nervous; anxious

Notes: None

Feelings can be so intense that chest hurts/have trouble breathing

- |   |                 |
|---|-----------------|
| 1 | Yes             |
| 2 | No              |
| 7 | Refused         |
| 8 | Not ascertained |
| 9 | Don't know      |

## 2010 NATIONAL HEALTH INTERVIEW SURVEY

## Quality of Life

quallife : Quality of Life

PUBLIC USE

Document Version Date: 07-Jun-11

Question ID: QOL.445\_03.000

Instrument Variable Name: P\_ANX\_4C

Final Documentation Name: P\_ANX\_4C

Which of the following statements, if any, describe your feelings of being worried, nervous, or anxious... These are positive feelings that help me to accomplish goals and be productive.

Universe: ASTATFLG='1' and (AGE GE '018' and AGE not IN ('997','999')) and (ANX\_1 IN ('1','2','3','7','9') or ANX\_2 IN ('1','7','9'))

Description: Sample adults 18+ who feel worried, anxious, or nervous daily, weekly, or monthly or refused or don't know how often or who take medication for these feelings or refused or don't know if they take medication for these feelings

Sources: None

Recodes: None

Keywords: worried; nervous; anxious

Notes: None

Are positive feelings that help me to accomplish goals/be productive

- |   |                 |
|---|-----------------|
| 1 | Yes             |
| 2 | No              |
| 7 | Refused         |
| 8 | Not ascertained |
| 9 | Don't know      |

Question ID: QOL.445\_04.000

Instrument Variable Name: P\_ANX\_4D

Final Documentation Name: P\_ANX\_4D

Which of the following statements, if any, describe your feelings of being worried, nervous, or anxious... The feelings sometimes interfere with my life, and I wish that I did not have them.

Universe: ASTATFLG='1' and (AGE GE '018' and AGE not IN ('997','999')) and (ANX\_1 IN ('1','2','3','7','9') or ANX\_2 IN ('1','7','9'))

Description: Sample adults 18+ who feel worried, anxious, or nervous daily, weekly, or monthly or refused or don't know how often or who take medication for these feelings or refused or don't know if they take medication for these feelings

Sources: None

Recodes: None

Keywords: worried; nervous; anxious

Notes: None

Feelings sometimes interfere with my life/wish I did not have them

- |   |                 |
|---|-----------------|
| 1 | Yes             |
| 2 | No              |
| 7 | Refused         |
| 8 | Not ascertained |
| 9 | Don't know      |

## 2010 NATIONAL HEALTH INTERVIEW SURVEY

## Quality of Life

quallife : Quality of Life

PUBLIC USE

Document Version Date: 07-Jun-11

Question ID: QOL.445\_05.000

Instrument Variable Name: P\_ANX\_4E

Final Documentation Name: P\_ANX\_4E

**Which of the following statements, if any, describe your feelings of being worried, nervous, or anxious... If I had more money or a better job, I would not have these feelings.**

Universe: ASTATFLG='1' and (AGE GE '018' and AGE not IN ('997','999')) and (ANX\_1 IN ('1','2','3','7','9') or ANX\_2 IN ('1','7','9'))

Description: Sample adults 18+ who feel worried, anxious, or nervous daily, weekly, or monthly or refused or don't know how often or who take medication for these feelings or refused or don't know if they take medication for these feelings

Sources: None

Recodes: None

Keywords: worried; nervous; anxious

Notes: None

If I had more money or a better job, I would not have these feelings

- |   |                 |
|---|-----------------|
| 1 | Yes             |
| 2 | No              |
| 7 | Refused         |
| 8 | Not ascertained |
| 9 | Don't know      |

Question ID: QOL.445\_06.000

Instrument Variable Name: P\_ANX\_4F

Final Documentation Name: P\_ANX\_4F

**Which of the following statements, if any, describe your feelings of being worried, nervous, or anxious... Everybody has these feelings. They are part of life and are normal.**

Universe: ASTATFLG='1' and (AGE GE '018' and AGE not IN ('997','999')) and (ANX\_1 IN ('1','2','3','7','9') or ANX\_2 IN ('1','7','9'))

Description: Sample adults 18+ who feel worried, anxious, or nervous daily, weekly, or monthly or refused or don't know how often or who take medication for these feelings or refused or don't know if they take medication for these feelings

Sources: None

Recodes: None

Keywords: worried; nervous; anxious

Notes: None

Everybody has these feelings/are part of life/normal

- |   |                 |
|---|-----------------|
| 1 | Yes             |
| 2 | No              |
| 7 | Refused         |
| 8 | Not ascertained |
| 9 | Don't know      |

## 2010 NATIONAL HEALTH INTERVIEW SURVEY

## Quality of Life

quallife : Quality of Life

PUBLIC USE

Document Version Date: 07-Jun-11

Question ID: QOL.445\_07.000

Instrument Variable Name: P\_ANX\_4G

Final Documentation Name: P\_ANX\_4G

**Which of the following statements, if any, describe your feelings of being worried, nervous, or anxious... I have been told by a medical professional that I have anxiety.**

Universe: ASTATFLG='1' and (AGE GE '018' and AGE not IN ('997','999')) and (ANX\_1 IN ('1','2','3','7','9') or ANX\_2 IN ('1','7','9'))

Description: Sample adults 18+ who feel worried, anxious, or nervous daily, weekly, or monthly or refused or don't know how often or who take medication for these feelings or refused or don't know if they take medication for these feelings

Sources: None

Recodes: None

Keywords: worried; nervous; anxious

Notes: None

Have been told by a medical professional I have anxiety

- |   |                 |
|---|-----------------|
| 1 | Yes             |
| 2 | No              |
| 7 | Refused         |
| 8 | Not ascertained |
| 9 | Don't know      |

Question ID: QOL.450\_00.000

Instrument Variable Name: DEP\_1

Final Documentation Name: DEP\_1

**How often do you feel depressed? Would you say daily, weekly, monthly, a few times a year, or never?**

Universe: ASTATFLG='1' and (AGE GE '018' and AGE not IN ('997','999')) and FDRN\_FLG='1' and QOL\_FLG='1'

Description: Sample adults 18+ who were not asked the family disability questions (FDB) and were randomly selected to receive the Quality of Life (QOL) section

Sources: None

Recodes: None

Keywords: depressed

Notes: None

How often feel depressed

- |   |                    |
|---|--------------------|
| 1 | Daily              |
| 2 | Weekly             |
| 3 | Monthly            |
| 4 | A few times a year |
| 5 | Never              |
| 7 | Refused            |
| 8 | Not ascertained    |
| 9 | Don't know         |

## 2010 NATIONAL HEALTH INTERVIEW SURVEY

## Quality of Life

quallife : Quality of Life

PUBLIC USE

Document Version Date: 07-Jun-11

Question ID: QOL.460\_00.000

Instrument Variable Name: DEP\_2

Final Documentation Name: DEP\_2

**Do you take medication for depression?**

Universe: ASTATFLG='1' and (AGE GE '018' and AGE not IN ('997','999')) and FDRN\_FLG='1' and QOL\_FLG='1'

Description: Sample adults 18+ who were not asked the family disability questions (FDB) and were randomly selected to receive the Quality of Life (QOL) section

Sources: None

Recodes: None

Keywords: depression; medication

Notes: None

## Take medication for depression

- |   |                 |
|---|-----------------|
| 1 | Yes             |
| 2 | No              |
| 7 | Refused         |
| 8 | Not ascertained |
| 9 | Don't know      |

Question ID: QOL.470\_00.000

Instrument Variable Name: DEP\_3

Final Documentation Name: DEP\_3

**Thinking about the last time you felt depressed, how depressed did you feel? Would you say a little, a lot, or somewhere in between?**

Universe: ASTATFLG='1' and (AGE GE '018' and AGE not IN ('997','999')) and (DEP\_1 IN ('1','2','3','7','9') or (DEP\_1 IN ('4','5') and DEP\_2 IN ('1','7','9')))

Description: Sample adults 18+ who feel depressed daily, weekly, monthly, or refused or don't know how often they feel depressed or who feel depressed a few times a year or never and take medication or refused or don't know if they take medication for depression

Sources: None

Recodes: None

Keywords: depressed

Notes: None

## How depressed you felt last time you were depressed

- |   |   |
|---|---|
| 1 | A little                                |
| 2 | A lot                                   |
| 3 | Somewhere in between a little and a lot |
| 7 | Refused                                 |
| 8 | Not ascertained                         |
| 9 | Don't know                              |



## 2010 NATIONAL HEALTH INTERVIEW SURVEY

## Quality of Life

quallife : Quality of Life

PUBLIC USE

Document Version Date: 07-Jun-11

Question ID: QOL.480\_00.000

Instrument Variable Name: DEP\_4

Final Documentation Name: DEP\_4

**Would you say this was closer to a little, closer to a lot, or exactly in the middle?**

Universe: ASTATFLG='1' and (AGE GE '018' and AGE not IN ('997','999')) and (DEP\_1 IN ('1','2','3','7','9') or (DEP\_1 IN ('4','5') and DEP\_2 IN ('1','7','9')) and DEP\_3='3'

Description: Sample adults 18+ who feel depressed daily, weekly, monthly, or refused or don't know how often they feel depressed or who feel depressed a few times a year or never and take medication or refused or don't know if they take medication for depression and the last time they felt depressed described the level of this feeling as somewhere in between a little and a lot

Sources: None

Recodes: None

Keywords: depressed

Notes: None

Level of depression somewhere in between, is it closer to a little, closer to a lot, or exactly in the middle

- |   |                       |
|---|-----------------------|
| 1 | Closer to a little    |
| 2 | Closer to a lot       |
| 3 | Exactly in the middle |
| 7 | Refused               |
| 8 | Not ascertained       |
| 9 | Don't know            |

Question ID: QOL.485\_01.000

Instrument Variable Name: P\_DEP\_4A

Final Documentation Name: P\_DEP\_4A

**Which of the following statements, if any, describe your feelings of being depressed... My feelings are caused by the death of a loved one.**

Universe: ASTATFLG='1' and (AGE GE '018' and AGE not IN ('997','999')) and (DEP\_1 IN ('1','2','3','7','9') or (DEP\_1 IN ('4','5') and DEP\_2 IN ('1','7','9'))

Description: Sample adults 18+ who feel depressed daily, weekly, monthly, or refused or don't know how often they feel depressed or who feel depressed a few times a year or never and take medication or refused or don't know if they take medication for depression

Sources: None

Recodes: None

Keywords: depressed

Notes: None

Feelings caused by death of loved one

- |   |                 |
|---|-----------------|
| 1 | Yes             |
| 2 | No              |
| 7 | Refused         |
| 8 | Not ascertained |
| 9 | Don't know      |

## 2010 NATIONAL HEALTH INTERVIEW SURVEY

## Quality of Life

quallife : Quality of Life

PUBLIC USE

Document Version Date: 07-Jun-11

Question ID: QOL.485\_02.000

Instrument Variable Name: P\_DEP\_4B

Final Documentation Name: P\_DEP\_4B

**Which of the following statements, if any, describe your feelings of being depressed... Sometimes the feelings can be so intense that I cannot get out of bed.**

Universe: ASTATFLG='1' and (AGE GE '018' and AGE not IN ('997','999')) and (DEP\_1 IN ('1','2','3','7','9') or (DEP\_1 IN ('4','5') and DEP\_2 IN ('1','7','9')))

Description: Sample adults 18+ who feel depressed daily, weekly, monthly, or refused or don't know how often they feel depressed or who feel depressed a few times a year or never and take medication or refused or don't know if they take medication for depression

Sources: None

Recodes: None

Keywords: depressed

Notes: None

Sometimes feelings can be so intense I cannot get out of bed

- |   |                 |
|---|-----------------|
| 1 | Yes             |
| 2 | No              |
| 7 | Refused         |
| 8 | Not ascertained |
| 9 | Don't know      |

Question ID: QOL.485\_03.000

Instrument Variable Name: P\_DEP\_4C

Final Documentation Name: P\_DEP\_4C

**Which of the following statements, if any, describe your feelings of being depressed... The feelings sometimes interfere with my life, and I wish I did not have them.**

Universe: ASTATFLG='1' and (AGE GE '018' and AGE not IN ('997','999')) and (DEP\_1 IN ('1','2','3','7','9') or (DEP\_1 IN ('4','5') and DEP\_2 IN ('1','7','9')))

Description: Sample adults 18+ who feel depressed daily, weekly, monthly, or refused or don't know how often they feel depressed or who feel depressed a few times a year or never and take medication or refused or don't know if they take medication for depression

Sources: None

Recodes: None

Keywords: depressed

Notes: None

Feelings sometime interfere with my life/wish I did not have them

- |   |                 |
|---|-----------------|
| 1 | Yes             |
| 2 | No              |
| 7 | Refused         |
| 8 | Not ascertained |
| 9 | Don't know      |

## 2010 NATIONAL HEALTH INTERVIEW SURVEY

## Quality of Life

quallife : Quality of Life

PUBLIC USE

Document Version Date: 07-Jun-11

Question ID: QOL.485\_04.000

Instrument Variable Name: P\_DEP\_4D

Final Documentation Name: P\_DEP\_4D

**Which of the following statements, if any, describe your feelings of being depressed... If I had more money or a better job, I would not have these feelings.**

Universe: ASTATFLG='1' and (AGE GE '018' and AGE not IN ('997','999')) and (DEP\_1 IN ('1','2','3','7','9') or (DEP\_1 IN ('4','5') and DEP\_2 IN ('1','7','9')))

Description: Sample adults 18+ who feel depressed daily, weekly, monthly, or refused or don't know how often they feel depressed or who feel depressed a few times a year or never and take medication or refused or don't know if they take medication for depression

Sources: None

Recodes: None

Keywords: depressed

Notes: None

If I had more money or a better job, I would not have these feelings

- |   |                 |
|---|-----------------|
| 1 | Yes             |
| 2 | No              |
| 7 | Refused         |
| 8 | Not ascertained |
| 9 | Don't know      |

Question ID: QOL.485\_05.000

Instrument Variable Name: P\_DEP\_4E

Final Documentation Name: P\_DEP\_4E

**Which of the following statements, if any, describe your feelings of being depressed... Everybody has these feelings. They are part of life and are normal.**

Universe: ASTATFLG='1' and (AGE GE '018' and AGE not IN ('997','999')) and (DEP\_1 IN ('1','2','3','7','9') or (DEP\_1 IN ('4','5') and DEP\_2 IN ('1','7','9')))

Description: Sample adults 18+ who feel depressed daily, weekly, monthly, or refused or don't know how often they feel depressed or who feel depressed a few times a year or never and take medication or refused or don't know if they take medication for depression

Sources: None

Recodes: None

Keywords: depressed

Notes: None

Everybody has these feelings/they are part of life/normal

- |   |                 |
|---|-----------------|
| 1 | Yes             |
| 2 | No              |
| 7 | Refused         |
| 8 | Not ascertained |
| 9 | Don't know      |

## 2010 NATIONAL HEALTH INTERVIEW SURVEY

## Quality of Life

quallife : Quality of Life

PUBLIC USE

Document Version Date: 07-Jun-11

Question ID: QOL.485\_06.000

Instrument Variable Name: P\_DEP\_4F

Final Documentation Name: P\_DEP\_4F

**Which of the following statements, if any, describe your feelings of being depressed... I have been told by a medical professional that I have depression.**

Universe: ASTATFLG='1' and (AGE GE '018' and AGE not IN ('997','999')) and (DEP\_1 IN ('1','2','3','7','9') or (DEP\_1 IN ('4','5') and DEP\_2 IN ('1','7','9')))

Description: Sample adults 18+ who feel depressed daily, weekly, monthly, or refused or don't know how often they feel depressed or who feel depressed a few times a year or never and take medication or refused or don't know if they take medication for depression

Sources: None

Recodes: None

Keywords: depressed

Notes: None

Been told by medical professional I have depression

- |   |                 |
|---|-----------------|
| 1 | Yes             |
| 2 | No              |
| 7 | Refused         |
| 8 | Not ascertained |
| 9 | Don't know      |

Question ID: QOL.490\_00.000

Instrument Variable Name: PAIN\_1

Final Documentation Name: PAIN\_1

**Do you have frequent pain?**

Universe: ASTATFLG='1' and (AGE GE '018' and AGE not IN ('997','999')) and FDRN\_FLG='1' and QOL\_FLG='1'

Description: Sample adults 18+ who were not asked the family disability questions (FDB) and were randomly selected to receive the Quality of Life (QOL) section

Sources: None

Recodes: None

Keywords: pain

Notes: None

Have frequent pain

- |   |                 |
|---|-----------------|
| 1 | Yes             |
| 2 | No              |
| 7 | Refused         |
| 8 | Not ascertained |
| 9 | Don't know      |

## 2010 NATIONAL HEALTH INTERVIEW SURVEY

## Quality of Life

quallife : Quality of Life

PUBLIC USE

Document Version Date: 07-Jun-11

Question ID: QOL.500\_00.000

Instrument Variable Name: PAIN\_2

Final Documentation Name: PAIN\_2

**In the past 3 months, how often did you have pain? Would you say never, some days, most days, or every day?**

Universe: ASTATFLG='1' and (AGE GE '018' and AGE not IN ('997','999')) and FDRN\_FLG='1' and QOL\_FLG='1'

Description: Sample adults 18+ who were not asked the family disability questions (FDB) and were randomly selected to receive the Quality of Life (QOL) section

Sources: None

Recodes: None

Keywords: pain

Notes: None

Frequency of pain in past 3 months

- |   |                 |
|---|-----------------|
| 1 | Never           |
| 2 | Some days       |
| 3 | Most days       |
| 4 | Every day       |
| 7 | Refused         |
| 8 | Not ascertained |
| 9 | Don't know      |

Question ID: QOL.510\_00.000

Instrument Variable Name: PAIN\_3

Final Documentation Name: PAIN\_3

**Thinking about the last time you had pain, how long did the pain last? Would you say some of the day, most of the day, or all of the day?**

Universe: ASTATFLG='1' and (AGE GE '018' and AGE not IN ('997','999')) and (PAIN\_1 IN ('1','7','9') or PAIN\_2 IN ('2','3','4','7','9'))

Description: Sample adults 18+ who have frequent pain or refused or don't know whether they have frequent pain or 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

Sources: None

Recodes: None

Keywords: pain

Notes: None

Length of time pain lasted last time you had it

- |   |                 |
|---|-----------------|
| 1 | Some of the day |
| 2 | Most of the day |
| 3 | All of the day  |
| 7 | Refused         |
| 8 | Not ascertained |
| 9 | Don't know      |

## 2010 NATIONAL HEALTH INTERVIEW SURVEY

## Quality of Life

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PUBLIC USE

Document Version Date: 07-Jun-11

Question ID: QOL.520\_00.000

Instrument Variable Name: PAIN\_4

Final Documentation Name: PAIN\_4

**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?**

Universe: ASTATFLG='1' and (AGE GE '018' and AGE not IN ('997','999')) and (PAIN\_1 IN ('1','7','9') or PAIN\_2 IN ('2','3','4','7','9'))

Description: Sample adults 18+ who have frequent pain or refused or don't know whether they have frequent pain or 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

Sources: None

Recodes: None

Keywords: pain

Notes: None

How much pain you had last time had pain

- |   |   |
|---|---|
| 1 | A little                                |
| 2 | A lot                                   |
| 3 | Somewhere in between a little and a lot |
| 7 | Refused                                 |
| 8 | Not ascertained                         |
| 9 | Don't know                              |

Question ID: QOL.530\_00.000

Instrument Variable Name: PAIN\_5

Final Documentation Name: PAIN\_5

**Would you say the amount of pain was closer to a little, closer to a lot, or exactly in the middle?**

Universe: ASTATFLG='1' and (AGE GE '018' and AGE not IN ('997','999')) and (PAIN\_1 IN ('1','7','9') or PAIN\_2 IN ('2','3','4','7','9')) and PAIN\_4='3'

Description: Sample adults 18+ who have frequent pain or refused or don't know whether they have frequent pain or 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 and the last time they had pain it was somewhere between a little and a lot

Sources: None

Recodes: None

Keywords: pain

Notes: None

Amount of pain somewhere in between, is it closer to a little, closer to a lot, or exactly in the middle

- |   |                       |
|---|-----------------------|
| 1 | Closer to a little    |
| 2 | Closer to a lot       |
| 3 | Exactly in the middle |
| 7 | Refused               |
| 8 | Not ascertained       |
| 9 | Don't know            |

## 2010 NATIONAL HEALTH INTERVIEW SURVEY

## Quality of Life

quallife : Quality of Life

PUBLIC USE

Document Version Date: 07-Jun-11

Question ID: QOL.535\_01.000

Instrument Variable Name: P\_PAIN5A

Final Documentation Name: P\_PAIN5A

**Which of the following statements, if any, describe your pain... It is constantly present.**

Universe: ASTATFLG='1' and (AGE GE '018' and AGE not IN ('997','999')) and (PAIN\_1 IN ('1','7','9') or PAIN\_2 IN ('2','3','4','7','9'))

Description: Sample adults 18+ who have frequent pain or refused or don't know whether they have frequent pain or 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

Sources: None

Recodes: None

Keywords: pain

Notes: None

Pain is constantly present

- |   |                 |
|---|-----------------|
| 1 | Yes             |
| 2 | No              |
| 7 | Refused         |
| 8 | Not ascertained |
| 9 | Don't know      |

Question ID: QOL.535\_02.000

Instrument Variable Name: P\_PAIN5B

Final Documentation Name: P\_PAIN5B

**Which of the following statements, if any, describe your pain... Sometimes I'm in a lot of pain and sometimes it's not so bad.**

Universe: ASTATFLG='1' and (AGE GE '018' and AGE not IN ('997','999')) and (PAIN\_1 IN ('1','7','9') or PAIN\_2 IN ('2','3','4','7','9'))

Description: Sample adults 18+ who have frequent pain or refused or don't know whether they have frequent pain or 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

Sources: None

Recodes: None

Keywords: pain

Notes: None

Sometimes I'm in a lot of pain and sometimes it's not so bad

- |   |                 |
|---|-----------------|
| 1 | Yes             |
| 2 | No              |
| 7 | Refused         |
| 8 | Not ascertained |
| 9 | Don't know      |

## 2010 NATIONAL HEALTH INTERVIEW SURVEY

## Quality of Life

quallife : Quality of Life

PUBLIC USE

Document Version Date: 07-Jun-11

Question ID: QOL.535\_03.000

Instrument Variable Name: P\_PAIN5C

Final Documentation Name: P\_PAIN5C

**Which of the following statements, if any, describe your pain... Sometimes it is unbearable and excruciating.**

Universe: ASTATFLG='1' and (AGE GE '018' and AGE not IN ('997','999')) and (PAIN\_1 IN ('1','7','9') or PAIN\_2 IN ('2','3','4','7','9'))

Description: Sample adults 18+ who have frequent pain or refused or don't know whether they have frequent pain or 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

Sources: None

Recodes: None

Keywords: pain

Notes: None

Sometimes pain is unbearable/excruciating

- |   |                 |
|---|-----------------|
| 1 | Yes             |
| 2 | No              |
| 7 | Refused         |
| 8 | Not ascertained |
| 9 | Don't know      |

Question ID: QOL.535\_04.000

Instrument Variable Name: P\_PAIN5D

Final Documentation Name: P\_PAIN5D

**Which of the following statements, if any, describe your pain... When I get my mind on other things, I am not aware of the pain.**

Universe: ASTATFLG='1' and (AGE GE '018' and AGE not IN ('997','999')) and (PAIN\_1 IN ('1','7','9') or PAIN\_2 IN ('2','3','4','7','9'))

Description: Sample adults 18+ who have frequent pain or refused or don't know whether they have frequent pain or 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

Sources: None

Recodes: None

Keywords: pain

Notes: None

When I get my mind on other things, I am not aware of the pain

- |   |                 |
|---|-----------------|
| 1 | Yes             |
| 2 | No              |
| 7 | Refused         |
| 8 | Not ascertained |
| 9 | Don't know      |



## 2010 NATIONAL HEALTH INTERVIEW SURVEY

## Quality of Life

quallife : Quality of Life

PUBLIC USE

Document Version Date: 07-Jun-11

Question ID: QOL.535\_05.000

Instrument Variable Name: P\_PAIN5E

Final Documentation Name: P\_PAIN5E

**Which of the following statements, if any, describe your pain... Medication can take my pain away completely.**

Universe: ASTATFLG='1' and (AGE GE '018' and AGE not IN ('997','999')) and (PAIN\_1 IN ('1','7','9') or PAIN\_2 IN ('2','3','4','7','9'))

Description: Sample adults 18+ who have frequent pain or refused or don't know whether they have frequent pain or 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

Sources: None

Recodes: None

Keywords: pain; medication

Notes: None

Medication can take my pain away completely

- |   |                 |
|---|-----------------|
| 1 | Yes             |
| 2 | No              |
| 7 | Refused         |
| 8 | Not ascertained |
| 9 | Don't know      |

Question ID: QOL.535\_06.000

Instrument Variable Name: P\_PAIN5F

Final Documentation Name: P\_PAIN5F

**Which of the following statements, if any, describe your pain... My pain is because of work.**

Universe: ASTATFLG='1' and (AGE GE '018' and AGE not IN ('997','999')) and (PAIN\_1 IN ('1','7','9') or PAIN\_2 IN ('2','3','4','7','9'))

Description: Sample adults 18+ who have frequent pain or refused or don't know whether they have frequent pain or 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

Sources: None

Recodes: None

Keywords: pain; work

Notes: None

My pain is because of work

- |   |                 |
|---|-----------------|
| 1 | Yes             |
| 2 | No              |
| 7 | Refused         |
| 8 | Not ascertained |
| 9 | Don't know      |

## 2010 NATIONAL HEALTH INTERVIEW SURVEY

## Quality of Life

quallife : Quality of Life

PUBLIC USE

Document Version Date: 07-Jun-11

Question ID: QOL.535\_07.000

Instrument Variable Name: P\_PAIN5G

Final Documentation Name: P\_PAIN5G

**Which of the following statements, if any, describe your pain... My pain is because of exercise.**

Universe: ASTATFLG='1' and (AGE GE '018' and AGE not IN ('997','999')) and (PAIN\_1 IN ('1','7','9') or PAIN\_2 IN ('2','3','4','7','9'))

Description: Sample adults 18+ who have frequent pain or refused or don't know whether they have frequent pain or 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

Sources: None

Recodes: None

Keywords: pain; exercise

Notes: None

My pain is because of exercise

- |   |                 |
|---|-----------------|
| 1 | Yes             |
| 2 | No              |
| 7 | Refused         |
| 8 | Not ascertained |
| 9 | Don't know      |

Question ID: QOL.540\_00.000

Instrument Variable Name: TIRED\_1

Final Documentation Name: TIRED\_1

**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?**

Universe: ASTATFLG='1' and (AGE GE '018' and AGE not IN ('997','999')) and FDRN\_FLG='1' and QOL\_FLG='1'

Description: Sample adults 18+ who were not asked the family disability questions (FDB) and were randomly selected to receive the Quality of Life (QOL) section

Sources: None

Recodes: None

Keywords: tired; exhausted

Notes: None

How often felt very tired/exhausted in past 3 months

- |   |                 |
|---|-----------------|
| 1 | Never           |
| 2 | Some days       |
| 3 | Most days       |
| 4 | Every day       |
| 7 | Refused         |
| 8 | Not ascertained |
| 9 | Don't know      |

## 2010 NATIONAL HEALTH INTERVIEW SURVEY

## Quality of Life

quallife : Quality of Life

PUBLIC USE

Document Version Date: 07-Jun-11

Question ID: QOL.550\_00.000

Instrument Variable Name: TIREDD\_2

Final Documentation Name: TIREDD\_2

**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?**

Universe: ASTATFLG='1' and (AGE GE '018' and AGE not IN ('997','999')) and TIREDD\_1 IN ('2','3','4','7','9')

Description: 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

Sources: None

Recodes: None

Keywords: tired; exhausted

Notes: None

How long it lasted the last time you felt very tired/exhausted

- |   |                 |
|---|-----------------|
| 1 | Some of the day |
| 2 | Most of the day |
| 3 | All of the day  |
| 7 | Refused         |
| 8 | Not ascertained |
| 9 | Don't know      |

Question ID: QOL.560\_00.000

Instrument Variable Name: TIREDD\_3

Final Documentation Name: TIREDD\_3

**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?**

Universe: ASTATFLG='1' and (AGE GE '018' and AGE not IN ('997','999')) and TIREDD\_1 IN ('2','3','4','7','9')

Description: 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

Sources: None

Recodes: None

Keywords: tiredness

Notes: None

Level of tiredness last time felt very tired/exhausted

- |   |   |
|---|---|
| 1 | A little                                |
| 2 | A lot                                   |
| 3 | Somewhere in between a little and a lot |
| 7 | Refused                                 |
| 8 | Not ascertained                         |
| 9 | Don't know                              |

## 2010 NATIONAL HEALTH INTERVIEW SURVEY

## Quality of Life

quallife : Quality of Life

PUBLIC USE

Document Version Date: 07-Jun-11

Question ID: QOL.570\_00.000

Instrument Variable Name: TIRED\_4

Final Documentation Name: TIRED\_4

**Would you say it was closer to a little, closer to a lot, or exactly in the middle?**

Universe: ASTATFLG='1' and (AGE GE '018' and AGE not IN ('997','999')) and TIRED\_1 IN ('2','3','4','7','9') and TIRED\_3='3'

Description: 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 and the last time they felt this way the level of tiredness was somewhere between a little and a lot

Sources: None

Recodes: None

Keywords: tiredness

Notes: None

Level of tiredness somewhere in between, is it closer to a little, closer to a lot, or exactly in the middle

- |   |                       |
|---|-----------------------|
| 1 | Closer to a little    |
| 2 | Closer to a lot       |
| 3 | Exactly in the middle |
| 7 | Refused               |
| 8 | Not ascertained       |
| 9 | Don't know            |

Question ID: QOL.575\_01.000

Instrument Variable Name: PTIRED4A

Final Documentation Name: PTIRED4A

**Is your tiredness the result of any of the following... Too much work or exercise?**

Universe: ASTATFLG='1' and (AGE GE '018' and AGE not IN ('997','999')) and TIRED\_1 IN ('2','3','4','7','9')

Description: 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

Sources: None

Recodes: None

Keywords: tiredness

Notes: None

Too much work or exercise

- |   |                 |
|---|-----------------|
| 1 | Yes             |
| 2 | No              |
| 7 | Refused         |
| 8 | Not ascertained |
| 9 | Don't know      |

## 2010 NATIONAL HEALTH INTERVIEW SURVEY

## Quality of Life

quallife : Quality of Life

PUBLIC USE

Document Version Date: 07-Jun-11

Question ID: QOL.575\_02.000

Instrument Variable Name: PTIRED4B

Final Documentation Name: PTIRED4B

**Is your tiredness the result of any of the following... Not getting enough sleep?**

Universe: ASTATFLG='1' and (AGE GE '018' and AGE not IN ('997','999')) and TIRED\_1 IN ('2','3','4','7','9')

Description: 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

Sources: None

Recodes: None

Keywords: tiredness

Notes: None

## Not getting enough sleep

- |   |                 |
|---|-----------------|
| 1 | Yes             |
| 2 | No              |
| 7 | Refused         |
| 8 | Not ascertained |
| 9 | Don't know      |

Question ID: QOL.575\_03.000

Instrument Variable Name: PTIRED4C

Final Documentation Name: PTIRED4C

**Is your tiredness the result of any of the following... A physical or health-related problem?**

Universe: ASTATFLG='1' and (AGE GE '018' and AGE not IN ('997','999')) and TIRED\_1 IN ('2','3','4','7','9')

Description: 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

Sources: None

Recodes: None

Keywords: tiredness

Notes: None

## A physical or health-related problem

- |   |                 |
|---|-----------------|
| 1 | Yes             |
| 2 | No              |
| 7 | Refused         |
| 8 | Not ascertained |
| 9 | Don't know      |

## 2010 NATIONAL HEALTH INTERVIEW SURVEY

## Quality of Life

quallife : Quality of Life

PUBLIC USE

Document Version Date: 07-Jun-11

Question ID: QOL.575\_04.000

Instrument Variable Name: PTIRED4D

Final Documentation Name: PTIRED4D

**Is your tiredness the result of any of the following... Something else?**

Universe: ASTATFLG='1' and (AGE GE '018' and AGE not IN ('997','999')) and TIREDD\_1 IN ('2','3','4','7','9')

Description: 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

Sources: None

Recodes: None

Keywords: tiredness

Notes: None

Tiredness result of something else

- |   |                 |
|---|-----------------|
| 1 | Yes             |
| 2 | No              |
| 7 | Refused         |
| 8 | Not ascertained |
| 9 | Don't know      |

Question ID: QOL.575\_05.000

Instrument Variable Name: PTIRED4E

Final Documentation Name: PTIRED4E

**Specify other reason for tiredness.**

Universe: ASTATFLG='1' and (AGE GE '018' and AGE not IN ('997','999')) and TIREDD\_1 IN ('2','3','4','7','9') and PTIRED4D='1'

Description: 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 and whose tiredness is the result of something else

Sources: None

Recodes: None

Keywords: tiredness

Notes: None

Other reason for tiredness

- |          |                   |
|----------|-------------------|
| 97       | Refused           |
| 98       | Not ascertained   |
| 99       | Don't know        |
| Verbatim | Verbatim response |

## 2010 NATIONAL HEALTH INTERVIEW SURVEY

## Quality of Life

quallife : Quality of Life

PUBLIC USE

Document Version Date: 07-Jun-11

Question ID: QOL.580\_00.000

Instrument Variable Name: QOL\_1

Final Documentation Name: QOL\_1

**Are you limited in your ability to carry out daily activities? Would you say not at all, a little, a lot, or completely limited?**

Universe: ASTATFLG='1' and (AGE GE '018' and AGE not IN ('997','999')) and FDRN\_FLG='1' and QOL\_FLG='1'

Description: Sample adults 18+ who were not asked the family disability questions (FDB) and were randomly selected to receive the Quality of Life (QOL) section

Sources: None

Recodes: None

Keywords: limited; daily activities

Notes: None

Amount limited in carrying out daily activities

- |   |                 |
|---|-----------------|
| 1 | Not at all      |
| 2 | A little        |
| 3 | A lot           |
| 4 | Completely      |
| 7 | Refused         |
| 8 | Not ascertained |
| 9 | Don't know      |

Question ID: QOL.590\_00.002

Instrument Variable Name: QOL\_2B

Final Documentation Name: QOL\_2B

**For each of the following activities, please tell me if you do the activity, don't do the activity, or are unable to do the activity... Working outside the home to earn an income?**

Universe: ASTATFLG='1' and (AGE GE '018' and AGE not IN ('997','999')) and FDRN\_FLG='1' and QOL\_FLG='1'

Description: Sample adults 18+ who were not asked the family disability questions (FDB) and were randomly selected to receive the Quality of Life (QOL) section

Sources: None

Recodes: None

Keywords: working; outside home; income

Notes: None

Working outside the home to earn an income

- |   |                           |
|---|---------------------------|
| 1 | Do the activity           |
| 2 | Don't do the activity     |
| 3 | Unable to do the activity |
| 7 | Refused                   |
| 8 | Not ascertained           |
| 9 | Don't know                |

## 2010 NATIONAL HEALTH INTERVIEW SURVEY

## Quality of Life

quallife : Quality of Life

PUBLIC USE

Document Version Date: 07-Jun-11

Question ID: QOL.590\_00.003

Instrument Variable Name: QOL\_2C

Final Documentation Name: QOL\_2C

**For each of the following activities, please tell me if you do the activity, don't do the activity, or are unable to do the activity... Going to school or achieving your education goals?**

Universe: ASTATFLG='1' and (AGE GE '018' and AGE not IN ('997','999')) and FDRN\_FLG='1' and QOL\_FLG='1'

Description: Sample adults 18+ who were not asked the family disability questions (FDB) and were randomly selected to receive the Quality of Life (QOL) section

Sources: None

Recodes: None

Keywords: school; education goals

Notes: None

Going to school or achieving your education goals

- |   |                           |
|---|---------------------------|
| 1 | Do the activity           |
| 2 | Don't do the activity     |
| 3 | Unable to do the activity |
| 7 | Refused                   |
| 8 | Not ascertained           |
| 9 | Don't know                |

Question ID: QOL.590\_00.004

Instrument Variable Name: QOL\_2D

Final Documentation Name: QOL\_2D

**For each of the following activities, please tell me if you do the activity, don't do the activity, or are unable to do the activity... Participating in leisure or social activities?**

Universe: ASTATFLG='1' and (AGE GE '018' and AGE not IN ('997','999')) and FDRN\_FLG='1' and QOL\_FLG='1'

Description: Sample adults 18+ who were not asked the family disability questions (FDB) and were randomly selected to receive the Quality of Life (QOL) section

Sources: None

Recodes: None

Keywords: leisure activities; social activities

Notes: None

Participating in leisure or social activities

- |   |                           |
|---|---------------------------|
| 1 | Do the activity           |
| 2 | Don't do the activity     |
| 3 | Unable to do the activity |
| 7 | Refused                   |
| 8 | Not ascertained           |
| 9 | Don't know                |



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## Quality of Life

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Question ID: QOL.590\_00.005

Instrument Variable Name: QOL\_2E

Final Documentation Name: QOL\_2E

For each of the following activities, please tell me if you do the activity, don't do the activity, or are unable to do the activity... Getting out with friends or family?

Universe: ASTATFLG='1' and (AGE GE '018' and AGE not IN ('997','999')) and FDRN\_FLG='1' and QOL\_FLG='1'

Description: Sample adults 18+ who were not asked the family disability questions (FDB) and were randomly selected to receive the Quality of Life (QOL) section

Sources: None

Recodes: None

Keywords: friends; family

Notes: None

Getting out with friends or family

- |   |                           |
|---|---------------------------|
| 1 | Do the activity           |
| 2 | Don't do the activity     |
| 3 | Unable to do the activity |
| 7 | Refused                   |
| 8 | Not ascertained           |
| 9 | Don't know                |

Question ID: QOL.590\_00.006

Instrument Variable Name: QOL\_2F

Final Documentation Name: QOL\_2F

For each of the following activities, please tell me if you do the activity, don't do the activity, or are unable to do the activity... Doing household chores such as cooking and cleaning?

Universe: ASTATFLG='1' and (AGE GE '018' and AGE not IN ('997','999')) and FDRN\_FLG='1' and QOL\_FLG='1'

Description: Sample adults 18+ who were not asked the family disability questions (FDB) and were randomly selected to receive the Quality of Life (QOL) section

Sources: None

Recodes: None

Keywords: household chores; cooking; cleaning

Notes: None

Doing household chores

- |   |                           |
|---|---------------------------|
| 1 | Do the activity           |
| 2 | Don't do the activity     |
| 3 | Unable to do the activity |
| 7 | Refused                   |
| 8 | Not ascertained           |
| 9 | Don't know                |

## 2010 NATIONAL HEALTH INTERVIEW SURVEY

## Quality of Life

quallife : Quality of Life

PUBLIC USE

Document Version Date: 07-Jun-11

Question ID: QOL.590\_00.007

Instrument Variable Name: QOL\_2G

Final Documentation Name: QOL\_2G

**For each of the following activities, please tell me if you do the activity, don't do the activity, or are unable to do the activity... Using transportation to get to places you want to go?**

Universe: ASTATFLG='1' and (AGE GE '018' and AGE not IN ('997','999')) and FDRN\_FLG='1' and QOL\_FLG='1'

Description: Sample adults 18+ who were not asked the family disability questions (FDB) and were randomly selected to receive the Quality of Life (QOL) section

Sources: None

Recodes: None

Keywords: transportation

Notes: None

Using transportation to get to places you want to go

- |   |                           |
|---|---------------------------|
| 1 | Do the activity           |
| 2 | Don't do the activity     |
| 3 | Unable to do the activity |
| 7 | Refused                   |
| 8 | Not ascertained           |
| 9 | Don't know                |

Question ID: QOL.590\_00.008

Instrument Variable Name: QOL\_2H

Final Documentation Name: QOL\_2H

**For each of the following activities, please tell me if you do the activity, don't do the activity, or are unable to do the activity... Participating in religious activities?**

Universe: ASTATFLG='1' and (AGE GE '018' and AGE not IN ('997','999')) and FDRN\_FLG='1' and QOL\_FLG='1'

Description: Sample adults 18+ who were not asked the family disability questions (FDB) and were randomly selected to receive the Quality of Life (QOL) section

Sources: None

Recodes: None

Keywords: religious activities

Notes: None

Participating in religious activities

- |   |                           |
|---|---------------------------|
| 1 | Do the activity           |
| 2 | Don't do the activity     |
| 3 | Unable to do the activity |
| 7 | Refused                   |
| 8 | Not ascertained           |
| 9 | Don't know                |

## 2010 NATIONAL HEALTH INTERVIEW SURVEY

## Quality of Life

quallife : Quality of Life

PUBLIC USE

Document Version Date: 07-Jun-11

Question ID: QOL.590\_00.009

Instrument Variable Name: QOL\_2I

Final Documentation Name: QOL\_2I

**For each of the following activities, please tell me if you do the activity, don't do the activity, or are unable to do the activity... Participating in community gatherings?**

Universe: ASTATFLG='1' and (AGE GE '018' and AGE not IN ('997','999')) and FDRN\_FLG='1' and QOL\_FLG='1'

Description: Sample adults 18+ who were not asked the family disability questions (FDB) and were randomly selected to receive the Quality of Life (QOL) section

Sources: None

Recodes: None

Keywords: community gatherings

Notes: None

Participating in community gatherings

- |   |                           |
|---|---------------------------|
| 1 | Do the activity           |
| 2 | Don't do the activity     |
| 3 | Unable to do the activity |
| 7 | Refused                   |
| 8 | Not ascertained           |
| 9 | Don't know                |

Question ID: QOL.000\_00.000

R01 RECODE

Instrument Variable Name:

Final Documentation Name: RCS\_QOL

**Generated variable**

Universe: ASTATFLG='1' and (AGE GE '018' and AGE not IN ('997','999')) and FDRN\_FLG = '1' and QOL\_FLG = '1'

Description: Sample adults 18+ who were not asked the family disability questions (FDB) and were randomly selected to receive the Quality of Life (QOL) section

Sources: None

Recodes: None

Keywords: record completion status

Notes: See the Survey Description Document for more information about this variable.

Record completion status

- |   |   |
|---|---|
| 1 | Not ascertained answers only                  |
| 2 | Refused and don't know answers only           |
| 3 | Refused, DK, and not ascertained answers only |
| 4 | At least one valid answer                     |