
2012 NHIS Spanish Questionnaire - Adult CAM
Adult Alternative Health/Complementary And Alternative Medicine
Document Version Date: 30-May-13

Question ID: ALT.001_00.000 **Instrument Variable Name:** PROV1 **QuestionnaireFileName:** Adult CAM

Spanish Text: ? [F1]

Un proveedor personal de servicios de salud es un profesional de la salud que le conoce bien y que tiene familiaridad con su historial de salud. Este puede ser un médico de cabecera o general, un médico especialista, enfermero(a) practicante, asistente de médico, u otro tipo de proveedor. ¿Tiene usted una persona o personas que usted considera su proveedor personal de servicios de salud?

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+ who have a usual place for healthcare

Skip Instructions: <1> [goto PROV1TYP]
<2,R,D> [goto PROVUSPL]

Question ID: ALT.002_00.000 **Instrument Variable Name:** PROV1TYP **QuestionnaireFileName:** Adult CAM

Spanish Text: ? [F1]

¿Qué tipo de proveedor(es) es?

*Read categories if necessary.

*Enter all that apply, separate with commas.

1. Doctor de Medicina (M.D., D.O.) incluyendo especialistas
 2. Enfermero(a), Enfermero(a) Practicante, o Asistente de Médico
 3. Quiropráctico, Acupuntor, or Naturópata
 4. Otro
- Refused
Don't know

Universe: Sample adults 18+ who have a personal health care provider

Skip Instructions: <1-4,R,D> [goto PROVUSPL]

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Question ID: ALT.003_00.000 **Instrument Variable Name:** PROVUSPL **QuestionnaireFileName:** Adult CAM

Spanish Text: ? [F1]

Anteriormente usted dijo que hay un lugar al que usted va habitualmente cuando está enfermo(a). ¿Qué tipo de proveedor(es) ve ahí?

*Read categories if necessary.

*Enter all that apply, separate with commas.

1. Doctor de Medicina (M.D., D.O.) incluyendo especialistas
 2. Enfermero(a), Enfermero(a) Practicante, o Asistente de Médico
 3. Quiropráctico, Acupuntor, or Naturópata
 4. Otro
- Refused
Don't know

Universe: Sample adults 18+ who have a usual place for healthcare

Skip Instructions: <1-4,R,D>
if AHCPLKND=1-5 [goto PROVVRTN];
else if If AHCPLKND =R,D,6,'' [goto COM_USE]

Question ID: ALT.004_00.000 **Instrument Variable Name:** PROVVRTN **QuestionnaireFileName:** Adult CAM

Spanish Text: ? [F1]

Anteriormente usted dijo que hay un lugar al que usted va habitualmente cuando necesita atención médica de rutina. ¿Qué tipo de proveedor(es) ve ahí?

*Read categories if necessary.

*Enter all that apply, separate with commas.

1. Doctor de Medicina (M.D., D.O.) incluyendo especialistas
 2. Enfermero(a), Enfermero(a) Practicante, o Asistente de Médico
 3. Quiropráctico, Acupuntor, or Naturópata
 4. Otro
- Refused
Don't know

Universe: Sample adults 18+ who have a routine place for healthcare that is different from a usual source for sick care

Skip Instructions: <1-4,R,D> [goto COM_USE]

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Question ID: ALT.010_00.000 **Instrument Variable Name:** COM_USE **QuestionnaireFileName:** Adult CAM

Spanish Text: ? [F1]

Ahora, voy a hacerle preguntas respecto a servicios de salud que puedo haber usado.

¿Ha usado ALGUNA VEZ una de estas terapias para su salud?

Manipulación Quiropráctico o Osteopática?

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+

Skip Instructions: <1> [goto COM_EVER]
<2,R,D>[goto MAS_USE]

Question ID: ALT.011_00.000 **Instrument Variable Name:** COM_EVER **QuestionnaireFileName:** Adult CAM

Spanish Text: ? [F1]

¿Ha visto ALGUNA VEZ a un proveedor o practicante de manipulación quiropráctica o osteopática para usted mismo(a)?

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+ who have ever used chiropractic (kye-row-PRAK-tik) or osteopathic manipulation

Skip Instructions: <1> [goto COM_USEM]
<2,R,D>[goto COM_USM]

Question ID: ALT.012_00.000 **Instrument Variable Name:** COM_USEM **QuestionnaireFileName:** Adult CAM

Spanish Text: ?[F1]

DURANTE LOS ÚLTIMOS 12 MESES, ¿vio a un practicante para manipulación quiropráctica o osteopática?

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+ who have ever seen a practitioner for chiropractic or osteopathic manipulation

Skip Instructions: <1> [goto COM_TYPE]
<2,R,D> [goto COM_USM]

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Question ID: ALT.013_00.000 **Instrument Variable Name:** COM_USM **QuestionnaireFileName:** Adult CAM

Spanish Text: ? [F1]

DURANTE LOS ÚLTIMOS 12 MESES, ¿utilizó usted manipulación quiropráctica o osteopática?

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+ who have ever used chiropractic/osteopathic manipulation but have never seen a practitioner or have not seen one in the past 12 months

Skip Instructions: <1,2,R,D> [goto MAS_USE]

Question ID: ALT.014_00.000 **Instrument Variable Name:** COM_TYPE **QuestionnaireFileName:** Adult CAM

Spanish Text: ¿Cual vio, un quiropráctico o un médico osteopático?

1. Quiropráctico
 2. Médico osteopático
 3. Ambos
- Refused
Don't know

Universe: Sample adults 18+ who have seen a practitioner for chiropractic or osteopathic manipulation in the past 12 months

Skip Instructions: <1> if PROVTYPE=3 [goto COM_PHCP];
 else [goto COM_PTIM]
<2,R,D> [goto COM_PTIM]
<3> [goto COM_PMST]

Question ID: ALT.015_00.000 **Instrument Variable Name:** COM_PMST **QuestionnaireFileName:** Adult CAM

Spanish Text: DURANTE LOS ÚLTIMOS 12 MESES, ¿con cuál practicante consultó más veces?

1. Quiropráctico
 2. Médico osteopático
- Refused
Don't know

Universe: Sample adults 18+ who have seen both a chiropractor and osteopathic physician in the past 12 months

Skip Instructions: <1> if PROVTYPE=3 [goto COM_PHCP];
 else [goto COM_PTIM]
<2,R,D> [goto COM_PTIM]

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Question ID: ALT.016_00.000 **Instrument Variable Name:** COM_PHCP **QuestionnaireFileName:** Adult CAM

Spanish Text: ¿Es este el proveedor personal de servicios de salud que usted mencionó anteriormente?

- 1. Sí
- 2. No
- Refused
- Don't know

Universe: Sample adults 18+ who see a chiropractor for their personal health care provider and who have seen a chiropractor in the past 12 months

Skip Instructions: <1,2,R,D> [goto COM_PTIM]

Question ID: ALT.017_00.000 **Instrument Variable Name:** COM_PTIM **QuestionnaireFileName:** Adult CAM

Spanish Text: ¿Sabe con exactitud el número de veces durante los últimos 12 meses que vio a un practicante para la manipulación [fill 1: quiropráctica/osteopática]?

- 1. Sí
- 2. No
- Refused
- Don't know

Universe: Sample adults 18+ who have seen a practitioner for chiropractic or osteopathic manipulation in the past 12 months

Skip Instructions: <1> [goto COM_TMNO]
<2,R,D> [goto COM_TMCT]

Question ID: ALT.018_00.000 **Instrument Variable Name:** COM_TMNO **QuestionnaireFileName:** Adult CAM

Spanish Text: DURANTE LOS ÚLTIMOS 12 MESES, ¿cuántas veces vio a un practicante para manipulación [fill 1: quiropráctica/osteopática]?

*Enter '52' for 52 or more times.
Allow 1-52,R,D

Universe: Sample adults 18+ who know the number of times they have seen a practitioner for chiropractic or osteopathic manipulation in the past 12 months

Skip Instructions: <1-52,R,D> [goto COM_HIC]

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Question ID: ALT.019_00.000 **Instrument Variable Name:** COM_TMCT **QuestionnaireFileName:** Adult CAM

Spanish Text: DURANTE LOS ÚLTIMOS 12 MESES, ¿APROXIMADAMENTE cuántas veces vio a un practicante para manipulación [fill 1: quiropráctica/osteopática]? Diría...

*Read categories below.

1. Solo 1 vez
2. 2-5 veces
3. 6-10 veces
4. 11-15 veces
5. 16-20 veces
6. 21-25 veces
7. Más de 25 veces
- Refused
- Don't know

Universe: Sample adults 18+ who don't know the specific number of times they have seen a practitioner for chiropractic or osteopathic manipulation in the past 12 months or refuse the specific number of times

Skip Instructions: <1-7,R,D> [goto COM_HIC]

Question ID: ALT.021_00.000 **Instrument Variable Name:** COM_HIC **QuestionnaireFileName:** Adult CAM

Spanish Text: DURANTE LOS ÚLTIMOS 12 MESES, ¿estaba alguno de los costos de ver a un practicante para la manipulación [fill 1: quiropráctica/osteopática] cubierto por seguro de salud?

1. Sí
2. No
- Refused
- Don't know

Universe: Sample adults 18+ who have seen a practitioner for chiropractic or osteopathic manipulation in the past 12 months

Skip Instructions: <1> [goto COM_HICA]
<2,R,D> [goto COM_HIT]

Question ID: ALT.022_00.000 **Instrument Variable Name:** COM_HICA **QuestionnaireFileName:** Adult CAM

Spanish Text: DURANTE LOS ÚLTIMOS 12 MESES, ¿cubrió su seguro de salud todo el costo o solo parte del costo de ver a un practicante para manipulación [fill 1: quiropráctica/osteopática]?

1. Todo el costo
2. Parte del costo
- Refused
- Don't know

Universe: Sample adults 18+ whose visit(s) to a practitioner for chiropractic or osteopathic manipulation in the past 12 months were (at least partly) covered by health insurance

Skip Instructions: <1> [goto COM_MAT]
<2,R,D> [goto COM_HIT]

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Question ID: ALT.023_00.000 **Instrument Variable Name:** COM_HIT **QuestionnaireFileName:** Adult CAM

Spanish Text: ¿Sabe la cantidad total que usted pagó en los últimos 12 meses para ver a un practicante de manipulación [fill 1: quiropráctica/osteopática] [fill 2: sin incluir la parte pagada por el seguro]?

- 1. Sí
- 2. No
- Refused
- Don't know

Universe: Sample adults 18+ whose health insurance covered none or some of the cost for chiropractic or osteopathic manipulation in the past 12 months

Skip Instructions: <1> [goto COM_HITS]
<2,R,D> [goto COM_AVGC]

Question ID: ALT.024_00.000 **Instrument Variable Name:** COM_HITS **QuestionnaireFileName:** Adult CAM

Spanish Text: ¿Cuánto en total pagó usted en los últimos 12 meses para ver a un practicante de manipulación [fill1: quiropráctica/osteopática] [fill2: sin incluir la parte pagada por el seguro]?

*Enter '0' for no cost or free.

Allow \$0-26000,R,D

Universe: Sample adults 18+ who know the amount they paid for chiropractic or osteopathic manipulation in the past 12 months

Skip Instructions: <0-26000,R,D> [goto COM_MAT]

Question ID: ALT.025_00.010 **Instrument Variable Name:** COM_AVGC **QuestionnaireFileName:** Adult CAM

Spanish Text: ¿Sabe la cantidad en promedio que usted pagó en los últimos 12 meses por cada visita para manipulación [fill1: quiropráctica/osteopática] [fill2: sin incluir la parte pagada por el seguro]?

- 1. Sí
- 2. No
- Refused
- Don't know

Universe: Sample adults 18+ who don't know the total amount they paid for chiropractic or osteopathic manipulation in the past 12 months

Skip Instructions: <1> [goto COM_AVGS]
<2,R,D> [goto COM_MAT]

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Question ID: ALT.026_00.000 **Instrument Variable Name:** COM_AVGS **QuestionnaireFileName:** Adult CAM

Spanish Text: ¿Cuánto pagó en promedio de su propio bolsillo por cada visita a un practicante para manipulación [fill 1: quiropráctica/osteopática]?

Enter '0' if no cost or free.

Allow \$0-500,R,D

Universe: Sample adults 18+ who know the average per visit they paid for chiropractic or osteopathic manipulation in the past 12 months

Skip Instructions: <0-500,R,D> [goto COM_MAT]

Question ID: ALT.027_00.000 **Instrument Variable Name:** COM_MAT **QuestionnaireFileName:** Adult CAM

Spanish Text: DURANTE LOS ÚLTIMOS 12 MESES, ¿compró un libro de auto-ayuda u otros materiales como un DVD, CD o Video para aprender algo sobre la manipulación [fill 1: quiropráctica/osteopática]?

- 1. Sí
- 2. No
- Refused
- Don't know

Universe: Sample adults 18+ who have seen a practitioner for chiropractic or osteopathic manipulation in the past 12 months

Skip Instructions: <1> [goto COM_MATC]
<2,R,D> [goto MAS_USE]

Question ID: ALT.028_00.000 **Instrument Variable Name:** COM_MATC **QuestionnaireFileName:** Adult CAM

Spanish Text: ¿Aproximadamente cuánto pagó por estos materiales durante los últimos 12 meses?

*Enter '200' for \$200 or more.

Allow \$0-200,R,D

Universe: Sample adults 18+ who have bought self-help materials for chiropractic or osteopathic manipulation in the past 12 months

Skip Instructions: <0-200,R,D> [goto MAS_USE]

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Question ID: ALT.037_00.000 **Instrument Variable Name:** MAS_USE **QuestionnaireFileName:** Adult CAM

Spanish Text: ? [F1]

Ha usado ALGUNA VEZ una de esta terapias para su salud?

Masaje?

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+

Skip Instructions: <1> [goto MAS_EVER]
<2,R,D>[goto ACU_USE]

Question ID: ALT.038_00.000 **Instrument Variable Name:** MAS_EVER **QuestionnaireFileName:** Adult CAM

Spanish Text: ? [F1]

¿Ha visto ALGUNA VEZ a un proveedor o practicante de masaje para used mismo(a)?

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+ who have ever used massage

Skip Instructions: <1> [goto MAS_USEM]
<2,R,D> [goto MAS_USM]

Question ID: ALT.039_00.000 **Instrument Variable Name:** MAS_USEM **QuestionnaireFileName:** Adult CAM

Spanish Text: ?[F1]

DURANTE LOS ÚLTIMOS 12 MESES, ¿fué a un practicante para masaje?

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+ who have ever seen a practitioner for massage

Skip Instructions: <1>[goto MAS_PTIM]
<2,R,D> [goto MAS_USM]

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Question ID: ALT.040_00.000 **Instrument Variable Name:** MAS_USM **QuestionnaireFileName:** Adult CAM

Spanish Text: DURANTE LOS ÚLTIMOS 12 MESES, ¿utilizó el masaje?

- 1. Sí
- 2. No
- Refused
- Don't know

Universe: Sample adults 18+ who have ever used massage but have never seen a practitioner or have not seen one in the past 12 months

Skip Instructions: <1,2,R,D> [goto ACU_USE]

Question ID: ALT.041_00.000 **Instrument Variable Name:** MAS_PTIM **QuestionnaireFileName:** Adult CAM

Spanish Text: ¿Sabe con exactitud el número de veces durante los últimos 12 meses que vio a un practicante para el masaje?

- 1. Sí
- 2. No
- Refused
- Don't know

Universe: Sample adults 18+ who have seen a practitioner for massage in the past 12 months

Skip Instructions: <1> [goto MAS_TMNO]
<2,R,D> [goto MAS_TMCT]

Question ID: ALT.042_00.000 **Instrument Variable Name:** MAS_TMNO **QuestionnaireFileName:** Adult CAM

Spanish Text: DURANTE LOS ÚLTIMOS 12 MESES, ¿cuántas veces vio a un practicante para masaje?

*Enter '52' for 52 or more times.
Allow 1-52,R,D

Universe: Sample adults 18+ who know the number of times they have seen a practitioner for massage in the past 12 months

Skip Instructions: <1-52,R,D> [goto MAS_HIC]

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Question ID: ALT.043_00.000 **Instrument Variable Name:** MAS_TMCT **QuestionnaireFileName:** Adult CAM

Spanish Text: DURANTE LOS ÚLTIMOS 12 MESES, ¿APROXIMADAMENTE cuántas veces vio a un practicante para masaje? Diría...

1. Solo 1 vez
 2. 2-5 veces
 3. 6-10 veces
 4. 11-15 veces
 5. 16-20 veces
 6. 21-25 veces
 7. Más de 25 veces
- Refused
Don't know

Universe: Sample adults 18+ who don't know the specific number of times they have seen a practitioner for massage in the past 12 months or refuse the specific number of times

Skip Instructions: <1-7,R,D> [goto MAS_HIC]

Question ID: ALT.044_00.000 **Instrument Variable Name:** MAS_HIC **QuestionnaireFileName:** Adult CAM

Spanish Text: DURANTE LOS ÚLTIMOS 12 MESES, ¿estaba alguno de los costos de ver a un practicante para el masaje cubierto por seguro de salud?

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+ who have seen a practitioner for massage in the past 12 months

Skip Instructions: <1> [goto MAS_HICA]
<2,R,D> [goto MAS_HIT]

Question ID: ALT.045_00.000 **Instrument Variable Name:** MAS_HICA **QuestionnaireFileName:** Adult CAM

Spanish Text: DURANTE LOS ÚLTIMOS 12 MESES, ¿cubrió su seguro de salud todo el costo o solo parte del costo de ver a un practicante para el masaje?

1. Todo el costo
 2. Parte del costo
- Refused
Don't know

Universe: Sample adults 18+ whose visit(s) to a practitioner for massage in the past 12 months were (at least partly) covered by health insurance

Skip Instructions: <1> [goto MAS_MAT]
<2,R,D> [goto MAS_HIT]

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Question ID: ALT.046_00.000 **Instrument Variable Name:** MAS_HIT **QuestionnaireFileName:** Adult CAM

Spanish Text: ¿Sabe la cantidad total que usted pagó en los últimos 12 meses para ver a un practicante de masaje [fill 1: sin incluir la parte pagada por el seguro]?

- 1. Sí
- 2. No
- Refused
- Don't know

Universe: Sample adults 18+ whose health insurance covered none or some of the cost for massage in the past 12 months

Skip Instructions: <1> [goto MAS_HITS]
<2,R,D> [goto MAS_AVGC]

Question ID: ALT.047_00.000 **Instrument Variable Name:** MAS_HITS **QuestionnaireFileName:** Adult CAM

Spanish Text: ¿Cuánto en total pagó usted en los últimos 12 meses para ver a un practicante de masaje [fill 1: sin incluir la parte pagada por el seguro]?

*Enter '0' for no cost or free.
Allow \$0-26000,R,D

Universe: Sample adults 18+ who know the amount they paid for massage in the past 12 months

Skip Instructions: <0-26000,R,D> [goto MAS_MAT]

Question ID: ALT.048_00.000 **Instrument Variable Name:** MAS_AVGC **QuestionnaireFileName:** Adult CAM

Spanish Text: ¿Sabe la cantidad promedio que usted pagó en los últimos 12 meses por cada visita para el masaje [fill 1: sin incluir la parte pagada por el seguro]?

- 1. Sí
- 2. No
- Refused
- Don't know

Universe: Sample adults 18+ who don't know the total amount they paid for massage in the past 12 months

Skip Instructions: <1> [goto MAS_AVGS]
<2,R,D> [goto MAS_MAT]

Question ID: ALT.049_00.000 **Instrument Variable Name:** MAS_AVGS **QuestionnaireFileName:** Adult CAM

Spanish Text: ¿Cuánto pagó en promedio de su propio bolsillo por cada visita a un practicante para el masaje?

Enter '0' if no cost or free
Allow \$0-500,R,D

Universe: Sample adults 18+ who know the average per visit they paid for massage in the past 12 months

Skip Instructions: <0-500,R,D> [goto MAS_MAT]

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Question ID: ALT.050_00.000 **Instrument Variable Name:** MAS_MAT **QuestionnaireFileName:** Adult CAM

Spanish Text: DURANTE LOS ÚLTIMOS 12 MESES, ¿compró un libro de auto-ayuda u otros materiales como un DVD, CD, o Video para aprender algo sobre el masaje?

- 1. Sí
- 2. No
- Refused
- Don't know

Universe: Sample adults 18+ who have seen a practitioner for massage in the past 12 months

Skip Instructions: <1> [goto MAS_MATC]
<2,R,D> [goto ACU_USE]

Question ID: ALT.051_00.000 **Instrument Variable Name:** MAS_MATC **QuestionnaireFileName:** Adult CAM

Spanish Text: Aproximadamente cuánto pagó por estos materiales durante los últimos 12 meses?

*Enter '200' for \$200 or more.

Allow \$0-200,R,D

Universe: Sample adults 18+ who have bought self-help materials for massage in the past 12 months

Skip Instructions: <0-200,R,D> [goto ACU_USE]

Question ID: ALT.061_00.000 **Instrument Variable Name:** ACU_USE **QuestionnaireFileName:** Adult CAM

Spanish Text: ? [F1]

¿Ha usado ALGUNA VEZ una de estas terapias para su salud?

Acupuntura?

- 1. Sí
- 2. No
- Refused
- Don't know

Universe: Sample adults 18+

Skip Instructions: <1> [goto ACU_EVER]
<2,R,D>[goto EHT_USE]

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Question ID: ALT.062_00.000 **Instrument Variable Name:** ACU_EVER **QuestionnaireFileName:** Adult CAM

Spanish Text: ? [F1]

¿Ha usado ALGUNA VEZ a un proveedor o practicante de acupuntura para usted mismo(a)?

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+ who have ever used acupuncture

Skip Instructions: <1> [goto ACU_USEM]
<2,R,D> [goto ACU_USM]

Question ID: ALT.063_00.000 **Instrument Variable Name:** ACU_USEM **QuestionnaireFileName:** Adult CAM

Spanish Text: ?[F1]

DURANTE LOS ÚLTIMOS 12 MESES, ¿vio a un practicante para acupuntura?

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+ who have ever seen a practitioner for acupuncture

Skip Instructions: <1> [goto ACU_PTIM]
<2,R,D> [goto ACU_USM]

Question ID: ALT.064_00.000 **Instrument Variable Name:** ACU_USM **QuestionnaireFileName:** Adult CAM

Spanish Text: ? [F1]

DURANTE LOS ÚLTIMOS 12 MESES, ¿utilizó acupuntura?

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+ who have ever used acupuncture but have never seen a practitioner or have not seen one in the past 12 months

Skip Instructions: <1,2,R,D> [goto EHT_USE]

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Question ID: ALT.065_00.000 **Instrument Variable Name:** ACU_PTIM **QuestionnaireFileName:** Adult CAM

Spanish Text: ¿Sabe con exactitud el número de veces durante los últimos 12 meses que vio a un practicante para acupuntura?

1. Sí
 2. No
 Refused
 Don't know

Universe: Sample adults 18+ who have seen a practitioner for acupuncture in the past 12 months

Skip Instructions: <1> [goto ACU_TMNO]
 <2,R,D> [goto ACU_TMCT]

Question ID: ALT.066_00.000 **Instrument Variable Name:** ACU_TMNO **QuestionnaireFileName:** Adult CAM

Spanish Text: DURANTE LOS ÚLTIMOS 12 MESES, ¿cuántas veces vio a un practicante para acupuntura?

*Enter '52' for 52 or more times.
 Allow 1-52,R,D

Universe: Sample adults 18+ who know the number of times they have seen a practitioner for acupuncture in the past 12 months

Skip Instructions: <1-52,R,D> [goto ACU_HIC]

Question ID: ALT.067_00.000 **Instrument Variable Name:** ACU_TMCT **QuestionnaireFileName:** Adult CAM

Spanish Text: DURANTE LOS ÚLTIMOS 12 MESES, APROXIMADAMENTE cuántas veces vio a un practicante para acupuntura? Diría...

*Read categories below.

1. Solo 1 vez
 2. 2-5 veces
 3. 6-10 veces
 4. 11-15 veces
 5. 16-20 veces
 6. 21-25 veces
 7. Más de 25 veces
 Refused
 Don't know

Universe: Sample adults 18+ who don't know the specific number of times they have seen a practitioner for acupuncture in the past 12 months or refuse the specific number of times

Skip Instructions: <1-7,R,D> [goto ACU_HIC]

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Question ID: ALT.068_00.000 **Instrument Variable Name:** ACU_HIC **QuestionnaireFileName:** Adult CAM

Spanish Text: DURANTE LOS ÚLTIMOS 12 MESES, ¿estaba alguno de los costos de ver a un practicante para la acupuntura cubierto por seguro de salud?

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+ who have seen a practitioner for acupuncture in the past 12 months

Skip Instructions: <1> [goto ACU_HICA]
<2,R,D> [goto ACU_HIT]

Question ID: ALT.069_00.000 **Instrument Variable Name:** ACU_HICA **QuestionnaireFileName:** Adult CAM

Spanish Text: DURANTE LOS ÚLTIMOS 12 MESES, ¿cubrió su seguro de salud todo el costo o solo parte del costo de ver a un practicante para acupuntura?

1. Todo el costo
 2. Parte del costo
- Refused
Don't know

Universe: Sample adults 18+ whose visit(s) to a practitioner for acupuncture in the past 12 months were (at least partly) covered by health insurance

Skip Instructions: <1> [goto ACU_MAT]
<2,R,D> [goto ACU_HIT]

Question ID: ALT.070_00.000 **Instrument Variable Name:** ACU_HIT **QuestionnaireFileName:** Adult CAM

Spanish Text: ¿Sabe la cantidad total que usted pagó en los últimos 12 meses para ver a un practicante de acupuntura [fill1: sin incluir la parte pagada por el seguro]?

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+ whose health insurance covered none or some of the cost for acupuncture in the past 12 months

Skip Instructions: <1> [goto ACU_HITS]
<2,R,D> [goto ACU_AVGC]

2012 NHIS Spanish Questionnaire - Adult CAM
Adult Alternative Health/Complementary And Alternative Medicine
Document Version Date: 30-May-13

Question ID: ALT.071_00.000 **Instrument Variable Name:** ACU_HITS **QuestionnaireFileName:** Adult CAM

Spanish Text: ¿Cuánto en total pagó usted en los últimos 12 meses para ver a un practicante de acupuntura [fill1: sin incluir la parte pagada por el seguro]?

*Enter '0' for no cost or free.

Allow \$0-26000,R,D

Universe: Sample adults 18+ who know the amount they paid for acupuncture in the past 12 months

Skip Instructions: <0-26000,R,D> [goto ACU_MAT]

Question ID: ALT.072_00.000 **Instrument Variable Name:** ACU_AVGC **QuestionnaireFileName:** Adult CAM

Spanish Text: ¿Sabe la cantidad en promedio que usted pagó en los últimos 12 meses por cada visita para acupuntura [fill1: sin incluir la parte pagada por el seguro]?

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+ who don't know the total amount they paid for acupuncture in the past 12 months

Skip Instructions: <1> [goto ACU_AVGS]
<2,R,D> [goto ACU_MAT]

Question ID: ALT.073_00.000 **Instrument Variable Name:** ACU_AVGS **QuestionnaireFileName:** Adult CAM

Spanish Text: ¿Cuánto pagó en promedio de su propio bolsillo por cada visita a un practicante para acupuntura?

Enter '0' if no cost or free

Allow \$0-500,R,D

Universe: Sample adults 18+ who know the average per visit they paid for acupuncture in the past 12 months

Skip Instructions: <0-500,R,D> [goto ACU_MAT]

Question ID: ALT.074_00.000 **Instrument Variable Name:** ACU_MAT **QuestionnaireFileName:** Adult CAM

Spanish Text: DURANTE LOS ÚLTIMOS 12 MESES, ¿compró un libro de auto-ayuda u otros materiales como un DVD, CD, o Video para aprender algo sobre la acupuntura?

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+ who have seen a practitioner for acupuncture in the past 12 months

Skip Instructions: <1> [goto ACU_MATC]
<2,R,D> [goto EHT_USE]

2012 NHIS Spanish Questionnaire - Adult CAM
Adult Alternative Health/Complementary And Alternative Medicine
Document Version Date: 30-May-13

Question ID: ALT.090_00.000 **Instrument Variable Name:** EHT_TMNO **QuestionnaireFileName:** Adult CAM

Spanish Text: DURANTE LOS ÚLTIMOS 12 MESES, cuántas veces vio a un practicante para la terapia de sanación energética?
 *Enter '52' for 52 or more times.
 Allow 1-52,R,D

Universe: Sample adults 18+ who know the number of times they have seen a practitioner for energy healing therapy in the past 12 months

Skip Instructions: <1-52,R,D> [goto EHT_HIC]

Question ID: ALT.091_00.000 **Instrument Variable Name:** EHT_TMCT **QuestionnaireFileName:** Adult CAM

Spanish Text: DURANTE LOS ÚLTIMOS 12 MESES, APROXIMADAMENTE cuántas veces vio a un practicante para terapia de sanación energética? Diría...
 *Read categories below.

1. Solo 1 vez
 2. 2-5 veces
 3. 6-10 veces
 4. 11-15 veces
 5. 16-20 veces
 6. 21-25 veces
 7. Más de 25 veces
- Refused
 Don't know

Universe: Sample adults 18+ who don't know the specific number of times they have seen a practitioner for energy healing therapy in the past 12 months or refuse the specific number of times

Skip Instructions: <1-7,R,D> [goto EHT_HIC]

Question ID: ALT.092_00.000 **Instrument Variable Name:** EHT_HIC **QuestionnaireFileName:** Adult CAM

Spanish Text: DURANTE LOS ÚLTIMOS 12 MESES, ¿estaba alguno de los costos de ver a un practicante para la terapia de sanación energética cubierto por seguro de salud?
 1. Sí
 2. No
 Refused
 Don't know

Universe: Sample adults 18+ who have seen a practitioner for energy healing therapy in the past 12 months

Skip Instructions: <1> [goto EHT_HICA]
 <2,R,D> [goto EHT_HIT]

2012 NHIS Spanish Questionnaire - Adult CAM
Adult Alternative Health/Complementary And Alternative Medicine
Document Version Date: 30-May-13

Question ID: ALT.093_00.000 **Instrument Variable Name:** EHT_HICA **QuestionnaireFileName:** Adult CAM

Spanish Text: DURANTE LOS ÚLTIMOS 12 MESES, ¿cubrió su seguro de salud todo el costo o solo parte del costo de ver a un practicante para la terapia de sanación energética?

- 1. Todo el costo
- 2. Parte del costo
- Refused
- Don't know

Universe: Sample adults 18+ whose visit(s) to a practitioner for energy healing therapy in the past 12 months were (at least partly) covered by health insurance

Skip Instructions: <1> [goto EHT_MAT]
<2,R,D> [goto EHT_HIT]

Question ID: ALT.094_00.000 **Instrument Variable Name:** EHT_HIT **QuestionnaireFileName:** Adult CAM

Spanish Text: ¿Sabe la cantidad total que usted pagó en los últimos 12 meses para ver a un practicante para la terapia de sanación energética [fill1: sin incluir la parte pagada por el seguro]?

- 1. Sí
- 2. No
- Refused
- Don't know

Universe: Sample adults 18+ whose health insurance covered none or some of the cost for energy healing therapy in the past 12 months

Skip Instructions: <1> [goto EHT_HITS]
<2,R,D> [goto EHT_AVGC]

Question ID: ALT.095_00.000 **Instrument Variable Name:** EHT_HITS **QuestionnaireFileName:** Adult CAM

Spanish Text: ¿Cuánto en total pagó usted en los últimos 12 meses para ver a un practicante para la terapia de sanación energética [fill1: sin incluir la parte pagada por el seguro]?

*Enter '0' for no cost or free.

Allow \$0-26000,R,D

Universe: Sample adults 18+ who know the amount they paid for energy healing therapy in the past 12 months

Skip Instructions: <0-26000,R,D> [goto EHT_MAT]

2012 NHIS Spanish Questionnaire - Adult CAM
Adult Alternative Health/Complementary And Alternative Medicine

 Document Version Date: 30-May-13

Question ID: ALT.096_00.000 **Instrument Variable Name:** EHT_AVGC **QuestionnaireFileName:** Adult CAM

Spanish Text: ¿Sabe la cantidad promedio que usted pagó en los últimos 12 meses por cada visita para terapia de sanación energética [fill1: sin incluir la parte pagada por el seguro]?

- 1. Sí
- 2. No
- Refused
- Don't know

Universe: Sample adults 18+ who don't know the total amount they paid for energy healing therapy in the past 12 months

Skip Instructions: <1> [goto EHT_AVGS]
<2,R,D> [goto EHT_MAT]

Question ID: ALT.097_00.000 **Instrument Variable Name:** EHT_AVGS **QuestionnaireFileName:** Adult CAM

Spanish Text: ¿Cuánto pagó en promedio de su propio bolsillo por cada visita a un practicante para terapia de sanación energética?

Enter '0' if no cost or free
Allow \$0-500,R,D

Universe: Sample adults 18+ who know the average per visit they paid for energy healing therapy in the past 12 months

Skip Instructions: <0-500,R,D> [goto EHT_MAT]

Question ID: ALT.098_00.000 **Instrument Variable Name:** EHT_MAT **QuestionnaireFileName:** Adult CAM

Spanish Text: DURANTE LOS ÚLTIMOS 12 MESES, ¿compró un libro de auto-ayuda u otros materiales como un DVD, CD, o Video para aprender algo sobre la terapia de sanación energética?

- 1. Sí
- 2. No
- Refused
- Don't know

Universe: Sample adults 18+ who have seen a practitioner for energy healing therapy in the past 12 months

Skip Instructions: <1> [goto EHT_MATC]
<2,R,D> [goto NAT_USE]

Question ID: ALT.099_00.000 **Instrument Variable Name:** EHT_MATC **QuestionnaireFileName:** Adult CAM

Spanish Text: ¿Aproximadamente cuánto pagó por estos materiales durante los últimos 12 meses?

*Enter '200' for \$200 or more.
Allow \$0-200,R,D

Universe: Sample adults 18+ who have bought self-help materials for energy healing therapy in the past 12 months

Skip Instructions: <0-200,R,D> [goto NAT_USE]

2012 NHIS Spanish Questionnaire - Adult CAM
Adult Alternative Health/Complementary And Alternative Medicine
Document Version Date: 30-May-13

Question ID: ALT.109_00.000 **Instrument Variable Name:** NAT_USE **QuestionnaireFileName:** Adult CAM

Spanish Text: ? [F1]

¿Ha usado ALGUNA VEZ una de estas terapias para su salud?

Naturopatía?

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+

Skip Instructions: <1> [goto NAT_EVER]
<2,R,D>[goto HYP_USE]

Question ID: ALT.110_00.000 **Instrument Variable Name:** NAT_EVER **QuestionnaireFileName:** Adult CAM

Spanish Text: ? [F1]

¿Ha visto ALGUNA VEZ a un proveedor o practicante de naturopatía para usted mismo(a)?

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+ who have ever used naturopathy

Skip Instructions: <1> [goto NAT_USEM]
<2,R,D>[goto NAT_USM]

Question ID: ALT.111_00.000 **Instrument Variable Name:** NAT_USEM **QuestionnaireFileName:** Adult CAM

Spanish Text: ? [F1]

DURANTE LOS ÚLTIMOS 12 MESES, ¿vio a un practicante de naturopatía?

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+ who have ever seen a practitioner for naturopathy

Skip Instructions: <1>[goto NAT_PTIM]
<2,R,D> [goto NAT_USM]

2012 NHIS Spanish Questionnaire - Adult CAM
Adult Alternative Health/Complementary And Alternative Medicine
Document Version Date: 30-May-13

Question ID: ALT.112_00.000 **Instrument Variable Name:** NAT_USM **QuestionnaireFileName:** Adult CAM

Spanish Text: ? [F1]

DURANTE LOS ÚLTIMOS 12 MESES, ¿utilizó la naturopatía?

- 1. Sí
- 2. No
- Refused
- Don't know

Universe: Sample adults 18+ who have ever used naturopathy but have never seen a practitioner or have not seen one in the past 12 months

Skip Instructions: <1,2,R,D> [goto HYP_USE]

Question ID: ALT.113_00.000 **Instrument Variable Name:** NAT_PTIM **QuestionnaireFileName:** Adult CAM

Spanish Text: ¿Sabe con exactitud el número de veces durante los últimos 12 meses que vio a un practicante para la naturopatía?

- 1. Sí
- 2. No
- Refused
- Don't know

Universe: Sample adults 18+ who have seen a practitioner for naturopathy in the past 12 months

Skip Instructions: <1> [goto NAT_TMNO]
<2,R,D> [goto NAT_TMCT]

Question ID: ALT.114_00.000 **Instrument Variable Name:** NAT_TMNO **QuestionnaireFileName:** Adult CAM

Spanish Text: DURANTE LOS ÚLTIMOS 12 MESES, ¿cuántas veces vio a un practicante para la naturopatía?

*Enter '52' for 52 or more times.

Allow 1-52,R,D

Universe: Sample adults 18+ who know the number of times they have seen a practitioner for naturopathy in the past 12 months

Skip Instructions: <1-52,R,D> [goto NAT_HIC]

2012 NHIS Spanish Questionnaire - Adult CAM
Adult Alternative Health/Complementary And Alternative Medicine
Document Version Date: 30-May-13

Question ID: ALT.115_00.000 **Instrument Variable Name:** NAT_TMCT **QuestionnaireFileName:** Adult CAM

Spanish Text: DURANTE LOS ÚLTIMOS 12 MESES, ¿APROXIMADAMENTE cuántas veces vio a un practicante para la naturopatía? Diría...

*Read categories below.

1. Solo 1 vez
 2. 2-5 veces
 3. 6-10 veces
 4. 11-15 veces
 5. 16-20 veces
 6. 21-25 veces
 7. Más de 25 veces
- Refused
Don't know

Universe: Sample adults 18+ who don't know the specific number of times they have seen a practitioner for naturopathy in the past 12 months or refuse the specific number of times

Skip Instructions: <1-7,R,D> [goto NAT_HIC]

Question ID: ALT.116_00.000 **Instrument Variable Name:** NAT_HIC **QuestionnaireFileName:** Adult CAM

Spanish Text: DURANTE LOS ÚLTIMOS 12 MESES, ¿estaba alguno de los costos de ver a un practicante para la naturopatía cubierto por seguro de salud?

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+ who have seen a practitioner for naturopathy in the past 12 months

Skip Instructions: <1> [goto NAT_HICA]
<2,R,D> [goto NAT_HIT]

Question ID: ALT.117_00.000 **Instrument Variable Name:** NAT_HICA **QuestionnaireFileName:** Adult CAM

Spanish Text: DURANTE LOS ÚLTIMOS 12 MESES, ¿su seguro de salud cubrió todo el costo o solo parte del costo de ver a un practicante para la naturopatía?

1. Todo el costo
 2. Parte del costo
- Refused
Don't know

Universe: Sample adults 18+ whose visit(s) to a practitioner for naturopathy in the past 12 months were (at least partly) covered by health insurance

Skip Instructions: <1> [goto NAT_MAT]
<2,R,D> [goto NAT_HIT]

2012 NHIS Spanish Questionnaire - Adult CAM
Adult Alternative Health/Complementary And Alternative Medicine
Document Version Date: 30-May-13

Question ID: ALT.118_00.000 **Instrument Variable Name:** NAT_HIT **QuestionnaireFileName:** Adult CAM

Spanish Text: ¿Sabe la cantidad total que usted pagó en los últimos 12 meses para ver a un practicante de naturopatía [fill1: sin incluir la parte pagada por el seguro]?

- 1. Sí
- 2. No
- Refused
- Don't know

Universe: Sample adults 18+ whose health insurance covered none or some of the cost for naturopathy in the past 12 months

Skip Instructions: <1> [goto NAT_HITS]
<2,R,D> [goto NAT_AVGC]

Question ID: ALT.119_00.000 **Instrument Variable Name:** NAT_HITS **QuestionnaireFileName:** Adult CAM

Spanish Text: ¿Cuánto en total pagó durante los últimos 12 meses para ver a un practicante de naturopatía [fill1: sin incluir la parte pagada por el seguro]?

Allow \$0-26000,R,D

Universe: Sample adults 18+ who know the amount they paid for naturopathy in the past 12 months

Skip Instructions: <0-26000,R,D> [goto NAT_MAT]

Question ID: ALT.120_00.000 **Instrument Variable Name:** NAT_AVGC **QuestionnaireFileName:** Adult CAM

Spanish Text: ¿Sabe la cantidad en promedio que usted pagó en los últimos 12 meses por cada visita para naturopatía [fill1: sin incluir la parte pagada por el seguro]?

- 1. Sí
- 2. No
- Refused
- Don't know

Universe: Sample adults 18+ who don't know the total amount they paid for naturopathy in the past 12 months

Skip Instructions: <1> [goto NAT_AVGS]
<2,R,D> [goto NAT_MAT]

Question ID: ALT.121_00.000 **Instrument Variable Name:** NAT_AVGS **QuestionnaireFileName:** Adult CAM

Spanish Text: ¿Cuánto pagó en promedio de su propio bolsillo por cada visita a un practicante para naturopatía?

*Enter '0' if no cost or free.

Allow \$0-500,R,D

Universe: Sample adults 18+ who know the average per visit they paid for naturopathy in the past 12 months

Skip Instructions: <0-500,R,D> [goto NAT_MAT]

2012 NHIS Spanish Questionnaire - Adult CAM
Adult Alternative Health/Complementary And Alternative Medicine
Document Version Date: 30-May-13

Question ID: ALT.122_00.000 **Instrument Variable Name:** NAT_MAT **QuestionnaireFileName:** Adult CAM

Spanish Text: DURANTE LOS ÚLTIMOS 12 MESES, ¿compró un libro de auto-ayuda u otros materiales como un DVD, CD, o Video para aprender algo sobre la naturopatía?

- 1. Sí
- 2. No
- Refused
- Don't know

Universe: Sample adults 18+ who have seen a practitioner for naturopathy in the past 12 months

Skip Instructions: <1> [goto NAT_MATC]
<2,R,D> [goto HYP_USE]

Question ID: ALT.123_00.000 **Instrument Variable Name:** NAT_MATC **QuestionnaireFileName:** Adult CAM

Spanish Text: ¿Alrededor de cuánto pagó por estos materiales durante los últimos 12 meses?

*Enter '200' for \$200 or more.
Allow \$0-200,R,D

Universe: Sample adults 18+ who have bought self-help materials for naturopathy in the past 12 months

Skip Instructions: <0-200,R,D> [goto HYP_USE]

Question ID: ALT.133_00.000 **Instrument Variable Name:** HYP_USE **QuestionnaireFileName:** Adult CAM

Spanish Text: ? [F1]

¿Ha usado ALGUNA VEZ una de estas terapias para su salud?

Hipnosis?

- 1. Sí
- 2. No
- Refused
- Don't know

Universe: Sample adults 18+

Skip Instructions: <1> [goto HYP_EVER]
<2,R,D>[goto BIO_USE]

2012 NHIS Spanish Questionnaire - Adult CAM
Adult Alternative Health/Complementary And Alternative Medicine
Document Version Date: 30-May-13

Question ID: ALT.134_00.000 **Instrument Variable Name:** HYP_EVER **QuestionnaireFileName:** Adult CAM

Spanish Text: ? [F1]

¿Ha visto ALGUNA VEZ a un proveedor o practicante de hipnosis para usted mismo(a)?

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+ who have ever used hypnosis

Skip Instructions: <1> [goto HYP_USEM]
<2,R,D> [goto HYP_USM]

Question ID: ALT.135_00.000 **Instrument Variable Name:** HYP_USEM **QuestionnaireFileName:** Adult CAM

Spanish Text: ? [F1]

DURANTE LOS ÚLTIMOS 12 MESES, ¿vio a un practicante para hipnosis?

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+ who have ever seen a practitioner for hypnosis

Skip Instructions: <1> [goto HYP_BRTH]
<2,R,D> [goto HYP_USM]

Question ID: ALT.136_00.000 **Instrument Variable Name:** HYP_BRTH **QuestionnaireFileName:** Adult CAM

Spanish Text: ? [F1]

¿Hace usted ejercicios de respiración como parte de la hipnosis? Ejercicios de respiración pueden implicar el control activo de la forma en que el aire se respira, o la rapidéz o profundidad de la respiración.

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+ who have seen a practitioner for hypnosis in the past 12 months

Skip Instructions: <1,2,R,D> [goto HYP_PTIM]

2012 NHIS Spanish Questionnaire - Adult CAM
Adult Alternative Health/Complementary And Alternative Medicine
Document Version Date: 30-May-13

Question ID: ALT.137_00.000 **Instrument Variable Name:** HYP_USM **QuestionnaireFileName:** Adult CAM

Spanish Text: ? [F1]

DURANTE LOS ÚLTIMOS 12 MESES, ¿utilizó la hipnosis?

- 1. Sí
- 2. No
- Refused
- Don't know

Universe: Sample adults 18+ who have seen a practitioner for hypnosis in the past 12 months or who have used hypnosis in the past 12 months

Skip Instructions: <1> [goto HYP_MAT]
<2,R,D> [goto BIO_USE]

Question ID: ALT.138_00.000 **Instrument Variable Name:** HYP_PTIM **QuestionnaireFileName:** Adult CAM

Spanish Text: ¿Sabe con exactitud el número de veces durante los últimos 12 meses que vio a un practicante para la hipnosis?

- 1. Sí
- 2. No
- Refused
- Don't know

Universe: Sample adults 18+ who have seen a practitioner for hypnosis in the past 12 months

Skip Instructions: <1> [goto HYP_TMNO]
<2,R,D> [goto HYP_TMCT]

Question ID: ALT.139_00.000 **Instrument Variable Name:** HYP_TMNO **QuestionnaireFileName:** Adult CAM

Spanish Text: DURANTE LOS ÚLTIMOS 12 MESES, ¿cuántas veces vio a un practicante para la hipnosis?

*Enter '52' for 52 or more times.

Allow 1-52,R,D

Universe: Sample adults 18+ who know the number of times they have seen a practitioner for hypnosis in the past 12 months

Skip Instructions: <1-52,R,D> [goto HYP_HIC]

2012 NHIS Spanish Questionnaire - Adult CAM
Adult Alternative Health/Complementary And Alternative Medicine
Document Version Date: 30-May-13

Question ID: ALT.140_00.000 **Instrument Variable Name:** HYP_TMCT **QuestionnaireFileName:** Adult CAM

Spanish Text: DURANTE LOS ÚLTIMOS 12 MESES, ¿APROXIMADAMENTE cuántas veces vio a un practicante para la hipnosis? Diría...

*Read categories below.

1. Solo 1 vez
2. 2-5 veces
3. 6-10 veces
4. 11-15 veces
5. 16-20 veces
6. 21-25 veces
7. Más de 25 veces
- Refused
- Don't know

Universe: Sample adults 18+ who don't know the specific number of times they have seen a practitioner for hypnosis in the past 12 months or refuse the specific number of times

Skip Instructions: <1-7,R,D> [goto HYP_HIC]

Question ID: ALT.141_00.000 **Instrument Variable Name:** HYP_HIC **QuestionnaireFileName:** Adult CAM

Spanish Text: DURANTE LOS ÚLTIMOS 12 MESES, ¿estaba alguno de los costos de ver a un practicante para la hipnosis cubierto por seguro de salud?

1. Sí
2. No
- Refused
- Don't know

Universe: Sample adults 18+ who have seen a practitioner for hypnosis in the past 12 months

Skip Instructions: <1> [goto HYP_HICA]
<2,R,D> [goto HYP_HIT]

Question ID: ALT.142_00.000 **Instrument Variable Name:** HYP_HICA **QuestionnaireFileName:** Adult CAM

Spanish Text: DURANTE LOS ÚLTIMOS 12 MESES, ¿cubrió el seguro de salud todo el costo o solo parte del costo de ver a un practicante para la hipnosis?

1. Todo el costo
2. Parte del costo
- Refused
- Don't know

Universe: Sample adults 18+ whose visit(s) to a practitioner for hypnosis in the past 12 months were (at least partly) covered by health insurance

Skip Instructions: <1> [goto HYP_MAT] <2,R,D> [goto HYP_HIT]

2012 NHIS Spanish Questionnaire - Adult CAM
Adult Alternative Health/Complementary And Alternative Medicine
Document Version Date: 30-May-13

Question ID: ALT.143_00.000 **Instrument Variable Name:** HYP_HIT **QuestionnaireFileName:** Adult CAM

Spanish Text: ¿Sabe la cantidad total que usted pagó en los últimos 12 meses para ver a un practicante para la hipnosis [fill1: sin incluir la parte pagada por el seguro]?

- 1. Sí
- 2. No
- Refused
- Don't know

Universe: Sample adults 18+ whose health insurance covered none or some of the cost for hypnosis in the past 12 months

Skip Instructions: <1> [goto HYP_HITS]
<2,R,D> [goto HYP_AVGC]

Question ID: ALT.144_00.000 **Instrument Variable Name:** HYP_HITS **QuestionnaireFileName:** Adult CAM

Spanish Text: ¿Cuánto en total pagó usted durante los últimos 12 meses para ver a un practicante para la hipnosis [fill1: sin incluir la parte pagada por el seguro]?

*Enter '0' for no cost or free.
Allow \$0-26000,R,D

Universe: Sample adults 18+ who know the amount they paid for hypnosis in the past 12 months

Skip Instructions: <0-26000,R,D> [goto HYP_MAT]

Question ID: ALT.145_00.000 **Instrument Variable Name:** HYP_AVGC **QuestionnaireFileName:** Adult CAM

Spanish Text: ¿Sabe la cantidad promedio que usted pagó en los últimos 12 meses por cada visita para la hipnosis [fill1: sin incluir la parte pagada por el seguro]?

- 1. Sí
- 2. No
- Refused
- Don't know

Universe: Sample adults 18+ who don't know the total amount they paid for hypnosis in the past 12 months

Skip Instructions: <1> [goto HYP_AVGS]
<2,R,D> [goto HYP_MAT]

Question ID: ALT.146_00.000 **Instrument Variable Name:** HYP_AVGS **QuestionnaireFileName:** Adult CAM

Spanish Text: ¿Cuánto pagó en promedio de su propio bolsillo por cada visita a un practicante para la hipnosis?

*Enter '0' if no cost or free.
Allow \$0-500,R,D

Universe: Sample adults 18+ who know the average per visit they paid for hypnosis in the past 12 months

Skip Instructions: <0-500,R,D> [goto HYP_MAT]

2012 NHIS Spanish Questionnaire - Adult CAM
Adult Alternative Health/Complementary And Alternative Medicine
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Question ID: ALT.147_00.000 **Instrument Variable Name:** HYP_MAT **QuestionnaireFileName:** Adult CAM

Spanish Text: DURANTE LOS ÚLTIMOS 12 MESES, ¿compró un libro de auto-ayuda u otros materiales como un DVD, CD, o Video para aprender algo sobre la hipnosis?

- 1. Sí
- 2. No
- Refused
- Don't know

Universe: Sample adults 18+ who have seen a practitioner for hypnosis in the past 12 months or who have used hypnosis in the past 12 months

Skip Instructions: <1> [goto HYP_MATC]
<2,R,D> [goto BIO_USE]

Question ID: ALT.148_00.000 **Instrument Variable Name:** HYP_MATC **QuestionnaireFileName:** Adult CAM

Spanish Text: ¿Aproximadamente cuánto pagó por estos materiales durante los últimos 12 meses?

*Enter '200' for \$200 or more.
Allow \$0-200,R,D

Universe: Sample adults 18+ who have bought self-help materials for hypnosis in the past 12 months

Skip Instructions: <0-200,R,D> [goto BIO_USE]

Question ID: ALT.158_00.000 **Instrument Variable Name:** BIO_USE **QuestionnaireFileName:** Adult CAM

Spanish Text: ? [F1]

¿Ha usado ALGUNA VEZ una de estas terapias para su salud?

Biorretroalimentación?

- 1. Sí
- 2. No
- Refused
- Don't know

Universe: Sample adults 18+

Skip Instructions: <1> [goto BIO_EVER]
<2,R,D>[goto AYU_USE]

2012 NHIS Spanish Questionnaire - Adult CAM
Adult Alternative Health/Complementary And Alternative Medicine
Document Version Date: 30-May-13

Question ID: ALT.159_00.000 **Instrument Variable Name:** BIO_EVER **QuestionnaireFileName:** Adult CAM

Spanish Text: ? [F1]

¿Ha visto ALGUNA VEZ a un proveedor o practicante de biorretroalimentación para usted mismo(a)?

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+ who have ever used biofeedback

Skip Instructions: <1> [goto BIO_USEM]
<2,R,D> [goto BIO_USM]

Question ID: ALT.160_00.000 **Instrument Variable Name:** BIO_USEM **QuestionnaireFileName:** Adult CAM

Spanish Text: ? [F1]

DURANTE LOS ÚLTIMOS 12 MESES, ¿vio a un practicante para la biorretroalimentación?

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+ who have ever seen a practitioner for biofeedback

Skip Instructions: <1> [goto BIO_BRTH]
<2,R,D> [goto BIO_USM]

Question ID: ALT.161_00.000 **Instrument Variable Name:** BIO_BRTH **QuestionnaireFileName:** Adult CAM

Spanish Text: ? [F1]

¿Hizo ejercicios de respiración como parte de la biorretroalimentación? Ejercicios de respiración pueden implicar el control activo de la forma en que el aire se respira, o la rapidéz o profundidad de la respiración.

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+ who have seen a practitioner for biofeedback in the past 12 months

Skip Instructions: <1,2,R,D> [goto BIO_PTIM]

2012 NHIS Spanish Questionnaire - Adult CAM
Adult Alternative Health/Complementary And Alternative Medicine
Document Version Date: 30-May-13

Question ID: ALT.162_00.000 **Instrument Variable Name:** BIO_USM **QuestionnaireFileName:** Adult CAM

Spanish Text: ? [F1]

DURANTE LOS ÚLTIMOS 12 MESES, ¿utilizó la biorretroalimentación?

- 1. Sí
- 2. No
- Refused
- Don't know

Universe: Sample adults 18+ who have ever used biofeedback but have never seen a practitioner or have not seen one in the past 12 months

Skip Instructions: <1> [goto BIO_MAT]
<2,R,D> [goto AYU_USE]

Question ID: ALT.163_00.000 **Instrument Variable Name:** BIO_PTIM **QuestionnaireFileName:** Adult CAM

Spanish Text: ¿Sabe con exactitud el número de veces durante los últimos 12 meses que vio a un practicante para la biorretroalimentación?

- 1. Sí
- 2. No
- Refused
- Don't know

Universe: Sample adults 18+ who have seen a practitioner for biofeedback in the past 12 months

Skip Instructions: <1> [goto BIO_TMNO]
<2,R,D> [goto BIO_TMCT]

Question ID: ALT.164_00.000 **Instrument Variable Name:** BIO_TMNO **QuestionnaireFileName:** Adult CAM

Spanish Text: DURANTE LOS ÚLTIMOS 12 MESES, ¿cuántas veces vio a un practicante para la biorretroalimentación?

*Enter '52' for 52 or more times.

Allow 1-52,R,D

Universe: Sample adults 18+ who know the number of times they have seen a practitioner for biofeedback in the past 12 months

Skip Instructions: <1-52,R,D> [goto BIO_HIC]

2012 NHIS Spanish Questionnaire - Adult CAM
Adult Alternative Health/Complementary And Alternative Medicine
Document Version Date: 30-May-13

Question ID: ALT.165_00.000 **Instrument Variable Name:** BIO_TMCT **QuestionnaireFileName:** Adult CAM

Spanish Text: DURANTE LOS ÚLTIMOS 12 MESES, ¿APROXIMADAMENTE cuántas veces vio [fill S.C. name] a un practicante para la biorretroalimentación? Diría...

*Read categories below.

1. Solo 1 vez
 2. 2-5 veces
 3. 6-10 veces
 4. 11-15 veces
 5. 16-20 veces
 6. 21-25 veces
 7. Más de 25 veces
- Refused
Don't know

Universe: Sample adults 18+ who don't know the specific number of times they have seen a practitioner for biofeedback in the past 12 months or refuse the specific number of times

Skip Instructions: <1-7,R,D> [goto BIO_HIC]

Question ID: ALT.166_00.000 **Instrument Variable Name:** BIO_HIC **QuestionnaireFileName:** Adult CAM

Spanish Text: DURANTE LOS ÚLTIMOS 12 MESES, ¿estaba alguno de los costos de ver a un practicante de biorretroalimentación cubierto por seguro de salud?

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+ who have seen a practitioner for biofeedback in the past 12 months

Skip Instructions: <1> [goto BIO_HICA]
<2,R,D> [goto BIO_HIT]

Question ID: ALT.167_00.000 **Instrument Variable Name:** BIO_HICA **QuestionnaireFileName:** Adult CAM

Spanish Text: DURANTE LOS ÚLTIMOS 12 MESES, ¿cubrió el seguro de salud todo el costo o solo parte del costo de ver a un practicante de biorretroalimentación?

1. Todo el costo
 2. Parte del costo
- Refused
Don't know

Universe: Sample adults 18+ whose visit(s) to a practitioner for biofeedback in the past 12 months were (at least partly) covered by health insurance

Skip Instructions: <1> [goto BIO_MAT]
<2,R,D> [goto BIO_HIT]

2012 NHIS Spanish Questionnaire - Adult CAM
Adult Alternative Health/Complementary And Alternative Medicine
Document Version Date: 30-May-13

Question ID: ALT.168_00.000 **Instrument Variable Name:** BIO_HIT **QuestionnaireFileName:** Adult CAM

Spanish Text: ¿Sabe la cantidad total que pagó en los últimos 12 meses para ver a un practicante para la biorretroalimentación [fill1: sin incluir la parte pagada por el seguro]?

- 1. Sí
- 2. No
- Refused
- Don't know

Universe: Sample adults 18+ whose health insurance covered none or some of the cost for biofeedback in the past 12 months

Skip Instructions: <1> [goto BIO_HITS]
<2,R,D> [goto BIO_AVGC]

Question ID: ALT.169_00.000 **Instrument Variable Name:** BIO_HITS **QuestionnaireFileName:** Adult CAM

Spanish Text: ¿Cuánto en total pagó usted en los últimos 12 meses para ver a un practicante para la biorretroalimentación [fill1: sin incluir la parte pagada por el seguro]?

*Enter '0' for no cost or free.
Allow \$0-26000,R,D

Universe: Sample adults 18+ who know the amount they paid for biofeedback in the past 12 months

Skip Instructions: <0-26000,R,D> [goto BIO_MAT]

Question ID: ALT.170_00.000 **Instrument Variable Name:** BIO_AVGC **QuestionnaireFileName:** Adult CAM

Spanish Text: ¿Sabe la cantidad promedio que se pagó en los últimos 12 meses por cada visita para la biorretroalimentación [fill1: sin incluir la parte pagada por el seguro]?

- 1. Sí
- 2. No
- Refused
- Don't know

Universe: Sample adults 18+ who don't know the total amount they paid for biofeedback in the past 12 months

Skip Instructions: <1> [goto BIO_AVGS]
<2,R,D> [goto BIO_MAT]

Question ID: ALT.171_00.000 **Instrument Variable Name:** BIO_AVGS **QuestionnaireFileName:** Adult CAM

Spanish Text: ¿Cuánto pagó en promedio de su propio bolsillo por cada visita a un practicante de biorretroalimentación?

*Enter '0' if no cost or free.
Allow \$0-500,R,D

Universe: Sample adults 18+ who know the average per visit they paid for biofeedback in the past 12 months

Skip Instructions: <0-500,R,D> [goto BIO_MAT]

2012 NHIS Spanish Questionnaire - Adult CAM
Adult Alternative Health/Complementary And Alternative Medicine
Document Version Date: 30-May-13

Question ID: ALT.172_00.000 **Instrument Variable Name:** BIO_MAT **QuestionnaireFileName:** Adult CAM

Spanish Text: DURANTE LOS ÚLTIMOS 12 MESES, ¿compró un libro de auto-ayuda u otros materiales como un DVD, CD, o Video para aprender algo sobre la biorretroalimentación?

- 1. Sí
- 2. No
- Refused
- Don't know

Universe: Sample adults 18+ who have seen a practitioner for biofeedback in the past 12 months or who have used biofeedback in the past 12 months

Skip Instructions: <1> [goto BIO_MATC]
<2,R,D> [goto AYU_USE]

Question ID: ALT.173_00.000 **Instrument Variable Name:** BIO_MATC **QuestionnaireFileName:** Adult CAM

Spanish Text: ¿Aproximadamente cuánto pagó por estos materiales durante los últimos 12 meses?

*Enter '200' for \$200 or more.
Allow \$0-200,R,D

Universe: Sample adults 18+ who have bought self-help materials for biofeedback in the past 12 months

Skip Instructions: <0-200,R,D> [goto AYU_USE]

Question ID: ALT.183_00.000 **Instrument Variable Name:** AYU_USE **QuestionnaireFileName:** Adult CAM

Spanish Text: ? [F1]

¿Ha usado ALGUNA VEZ una de estas terapias para su salud?

Ayurveda?

- 1. Sí
- 2. No
- Refused
- Don't know

Universe: Sample adults 18+

Skip Instructions: <1> [goto AYU_EVER]
<2,R,D>[goto CHE_USE]

2012 NHIS Spanish Questionnaire - Adult CAM
Adult Alternative Health/Complementary And Alternative Medicine
Document Version Date: 30-May-13

Question ID: ALT.184_00.000 **Instrument Variable Name:** AYU_EVER **QuestionnaireFileName:** Adult CAM

Spanish Text: ? [F1]

¿Ha visto ALGUNA VEZ a un proveedor o practicante de ayurveda para usted mismo(a)?

- 1. Sí
- 2. No
- Refused
- Don't know

Universe: Sample adults 18+ who have ever used ayurveda

Skip Instructions: <1> [goto AYU_USEM]
<2,R,D> [goto AYU_USM]

Question ID: ALT.185_00.000 **Instrument Variable Name:** AYU_USEM **QuestionnaireFileName:** Adult CAM

Spanish Text: DURANTE LOS ÚLTIMOS 12 MESES, ¿vio a un practicante de ayurveda?

- 1. Sí
- 2. No
- Refused
- Don't know

Universe: Sample adults 18+ who have ever seen a practitioner for ayurveda

Skip Instructions: <1> [goto AYU_PTIM]
<2,R,D> [goto AYU_USM]

Question ID: ALT.186_00.000 **Instrument Variable Name:** AYU_USM **QuestionnaireFileName:** Adult CAM

Spanish Text: ? [F1]

DURANTE LOS ÚLTIMOS 12 MESES, ¿utilizó la ayurveda?

- 1. Sí
- 2. No
- Refused
- Don't know

Universe: Sample adults 18+ who have ever used ayurveda but have never seen a practitioner or have not seen one in the past 12 months

Skip Instructions: <1,2,R,D> [goto CHE_USE]

2012 NHIS Spanish Questionnaire - Adult CAM
Adult Alternative Health/Complementary And Alternative Medicine
Document Version Date: 30-May-13

Question ID: ALT.187_00.000 **Instrument Variable Name:** AYU_PTIM **QuestionnaireFileName:** Adult CAM

Spanish Text: ¿Sabe con exactitud el número de veces durante los últimos 12 meses que usted vio a un practicante para la ayurveda?

- 1. Sí
- 2. No
- Refused
- Don't know

Universe: Sample adults 18+ who have seen a practitioner for ayurveda in the past 12 months

Skip Instructions: <1> [goto AYU_TMNO]
<2,R,D> [goto AYU_TMCT]

Question ID: ALT.188_00.000 **Instrument Variable Name:** AYU_TMNO **QuestionnaireFileName:** Adult CAM

Spanish Text: DURANTE LOS ÚLTIMOS 12 MESES, ¿cuántas veces vio usted a un practicante para la ayurveda?

*Enter '52' for 52 or more times.
Allow 1-52,R,D

Universe: Sample adults 18+ who know the number of times they have seen a practitioner for ayurveda in the past 12 months

Skip Instructions: <1-52,R,D> [goto AYU_HIC]

Question ID: ALT.189_00.000 **Instrument Variable Name:** AYU_TMCT **QuestionnaireFileName:** Adult CAM

Spanish Text: DURANTE LOS ÚLTIMOS 12 MESES, ¿APROXIMADAMENTE cuántas veces vio a un practicante para ayurveda? Diría...

*Read categories below.

- 1. Solo 1 vez
- 2. 2-5 veces
- 3. 6-10 veces
- 4. 11-15 veces
- 5. 16-20 veces
- 6. 21-25 veces
- 7. Más de 25 veces
- Refused
- Don't know

Universe: Sample adults 18+ who don't know the specific number of times they have seen a practitioner for ayurveda in the past 12 months or refuse the specific number of times

Skip Instructions: <1-7,R,D> [goto AYU_HIC]

2012 NHIS Spanish Questionnaire - Adult CAM
Adult Alternative Health/Complementary And Alternative Medicine
Document Version Date: 30-May-13

Question ID: ALT.190_00.000 **Instrument Variable Name:** AYU_HIC **QuestionnaireFileName:** Adult CAM

Spanish Text: DURANTE LOS ÚLTIMOS 12 MESES, ¿estaba alguno de los costos de ver a un practicante para la ayurveda cubierto por seguro para salud?

- 1. Sí
- 2. No
- Refused
- Don't know

Universe: Sample adults 18+ who have seen a practitioner for ayurveda in the past 12 months

Skip Instructions: <1> [goto AYU_HICA]
<2,R,D> [goto AYU_HIT]

Question ID: ALT.191_00.000 **Instrument Variable Name:** AYU_HICA **QuestionnaireFileName:** Adult CAM

Spanish Text: DURANTE LOS ÚLTIMOS 12 MESES, ¿cubrió el seguro de salud todo el costo o solo parte del costo para la ver a un practicante de ayurveda?

- 1. Todo el costo
- 2. Parte del costo
- Refused
- Don't know

Universe: Sample adults 18+ whose visit(s) to a practitioner for ayurveda in the past 12 months were (at least partly) covered by health insurance

Skip Instructions: <1> [goto AYU_MAT]
<2,R,D> [goto AYU_HIT]

Question ID: ALT.192_00.000 **Instrument Variable Name:** AYU_HIT **QuestionnaireFileName:** Adult CAM

Spanish Text: ¿Sabe la cantidad total que usted pagó en los últimos 12 meses para ver a un practicante para la ayurveda [fill1: sin incluir la parte pagada por el seguro]?

- 1. Sí
- 2. No
- Refused
- Don't know

Universe: Sample adults 18+ whose health insurance covered none or some of the cost for ayurveda in the past 12 months

Skip Instructions: <1> [goto AYU_HITS]
<2,R,D> [goto AYU_AVGC]

2012 NHIS Spanish Questionnaire - Adult CAM
Adult Alternative Health/Complementary And Alternative Medicine
Document Version Date: 30-May-13

Question ID: ALT.193_00.000 **Instrument Variable Name:** AYU_HITS **QuestionnaireFileName:** Adult CAM

Spanish Text: ¿Cuánto en total pagó usted durante los últimos 12 meses para ver a un practicante para la ayurveda [fill1: sin incluir la parte pagada por el seguro]?

*Enter '0' for no cost or free.

Allow \$0-26000,R,D

Universe: Sample adults 18+ who know the amount they paid for ayurveda in the past 12 months

Skip Instructions: <0-26000,R,D> [goto AYU_MAT]

Question ID: ALT.194_00.000 **Instrument Variable Name:** AYU_AVGC **QuestionnaireFileName:** Adult CAM

Spanish Text: ¿Sabe la cantidad promedio que usted pagó en los últimos 12 meses por cada visita para la ayurveda [fill1: sin incluir la parte pagada por el seguro]?

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+ who don't know the total amount they paid for ayurveda in the past 12 months

Skip Instructions: <1> [goto AYU_AVGS]
<2,R,D> [goto AYU_MAT]

Question ID: ALT.195_00.000 **Instrument Variable Name:** AYU_AVGS **QuestionnaireFileName:** Adult CAM

Spanish Text: ¿Cuánto pagó en promedio de su propio bolsillo por cada visita a un practicante para la ayurveda?

Enter '0' if no cost or free

Allow \$0-500,R,D

Universe: Sample adults 18+ who know the average per visit they paid for ayurveda in the past 12 months

Skip Instructions: <0-500,R,D> [goto AYU_MAT]

Question ID: ALT.196_00.000 **Instrument Variable Name:** AYU_MAT **QuestionnaireFileName:** Adult CAM

Spanish Text: DURANTE LOS ÚLTIMOS 12 MESES, ¿compró un libro de auto-ayuda u otros materiales como un DVD, CD, o Video para aprender algo sobre la ayurveda?

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+ who have seen a practitioner for ayurveda in the past 12 months

Skip Instructions: <1> [goto AYU_MATC]
<2,R,D> [goto CHE_USE]

2012 NHIS Spanish Questionnaire - Adult CAM
Adult Alternative Health/Complementary And Alternative Medicine
Document Version Date: 30-May-13

Question ID: ALT.209_00.000 **Instrument Variable Name:** CHE_USEM **QuestionnaireFileName:** Adult CAM

Spanish Text: ? [F1]

DURANTE LOS ÚLTIMOS 12 MESES, ¿vio a un practicante para terapia de quelación?

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+ who have ever seen a practitioner for chelation therapy

Skip Instructions: <1>[goto CHE_PTIM]
<2,R,D> [goto CHE_USM]

Question ID: ALT.210_00.000 **Instrument Variable Name:** CHE_USM **QuestionnaireFileName:** Adult CAM

Spanish Text: ? [F1]

DURANTE LOS ÚLTIMOS 12 MESES, ¿utilizó usted la terapia de quelación?

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+ who have ever used chelation therapy but have never seen a practitioner or have not seen one in the past 12 months

Skip Instructions: <1,2,R,D> [goto CST_USE]

Question ID: ALT.211_00.000 **Instrument Variable Name:** CHE_PTIM **QuestionnaireFileName:** Adult CAM

Spanish Text: ¿Sabe con exactitud el número de veces durante los últimos 12 meses que vio a un practicante para la terapia de quelación?

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+ who have seen a practitioner for chelation therapy in the past 12 months

Skip Instructions: <1> [goto CHE_TMNO]
<2,R,D> [goto CHE_TMCT]

2012 NHIS Spanish Questionnaire - Adult CAM
Adult Alternative Health/Complementary And Alternative Medicine
Document Version Date: 30-May-13

Question ID: ALT.212_00.000 **Instrument Variable Name:** CHE_TMNO **QuestionnaireFileName:** Adult CAM

Spanish Text: DURANTE LOS ÚLTIMOS 12 MESES, ¿cuántas veces vio a un practicante para terapia para la quelación?
 *Enter '52' for 52 or more times.
 Allow 1-52,R,D

Universe: Sample adults 18+ who know the number of times they have seen a practitioner for chelation therapy in the past 12 months

Skip Instructions: <1-52,R,D> [goto CHE_HIC]

Question ID: ALT.213_00.000 **Instrument Variable Name:** CHE_TMCT **QuestionnaireFileName:** Adult CAM

Spanish Text: DURANTE LOS ÚLTIMOS 12 MESES, ¿APROXIMADAMENTE cuántas veces vio a un practicante para la terapia de quelación? Diría...
 *Read categories below.
 1. Solo 1 vez
 2. 2-5 veces
 3. 6-10 veces
 4. 11-15 veces
 5. 16-20 veces
 6. 21-25 veces
 7. Más de 25 veces
 Refused
 Don't know

Universe: Sample adults 18+ who don't know the specific number of times they have seen a practitioner for chelation therapy in the past 12 months or refuse the specific number of times

Skip Instructions: <1-7,R,D> [goto CHE_HIC]

Question ID: ALT.214_00.000 **Instrument Variable Name:** CHE_HIC **QuestionnaireFileName:** Adult CAM

Spanish Text: DURANTE LOS ÚLTIMOS 12 MESES, ¿estaba alguno de los costos de ver a un practicante para la terapia de quelación cubierto por seguro de salud?
 1. Sí
 2. No
 Refused
 Don't know

Universe: Sample adults 18+ who have seen a practitioner for chelation therapy in the past 12 months

Skip Instructions: <1> [goto CHE_HICA]
 <2,R,D> [goto CHE_HIT]

2012 NHIS Spanish Questionnaire - Adult CAM
Adult Alternative Health/Complementary And Alternative Medicine
Document Version Date: 30-May-13

Question ID: ALT.215_00.000 **Instrument Variable Name:** CHE_HICA **QuestionnaireFileName:** Adult CAM

Spanish Text: DURANTE LOS ÚLTIMOS 12 MESES, ¿cubrió el seguro de salud todo el costo o solo parte del costo para ver a un practicante de terapia para la quelación?

- 1. Todo el costo
- 2. Parte del costo
- Refused
- Don't know

Universe: Sample adults 18+ whose visit(s) to a practitioner for chelation therapy in the past 12 months were (at least partly) covered by health insurance

Skip Instructions: <1> [goto CHE_MAT]
<2,R,D> [goto CHE_HIT]

Question ID: ALT.216_00.000 **Instrument Variable Name:** CHE_HIT **QuestionnaireFileName:** Adult CAM

Spanish Text: ¿Sabe la cantidad total que usted pagó en los últimos 12 meses para ver a un practicante para la terapia de quelación [fill1: sin incluir la parte pagada por el seguro]?

- 1. Sí
- 2. No
- Refused
- Don't know

Universe: Sample adults 18+ whose health insurance covered none or some of the cost for chelation therapy in the past 12 months

Skip Instructions: <1> [goto CHE_HITS]
<2,R,D> [goto CHE_AVGC]

Question ID: ALT.217_00.000 **Instrument Variable Name:** CHE_HITS **QuestionnaireFileName:** Adult CAM

Spanish Text: ¿Cuánto en total pagó usted en los últimos 12 meses para ver a un practicante para la terapia de quelación [fill1: sin incluir la parte pagada por el seguro]?

*Enter '0' for no cost or free.

Allow \$0-26000,R,D

Universe: Sample adults 18+ who know the amount they paid for chelation therapy in the past 12 months

Skip Instructions: <0-26000,R,D> [goto CHE_MAT]

2012 NHIS Spanish Questionnaire - Adult CAM
Adult Alternative Health/Complementary And Alternative Medicine
Document Version Date: 30-May-13

Question ID: ALT.218_00.000 **Instrument Variable Name:** CHE_AVGC **QuestionnaireFileName:** Adult CAM

Spanish Text: ¿Sabe la cantidad promedio que usted pagó en los últimos 12 meses por cada visita para la terapia de quelación [fill1: sin incluir la parte pagada por el seguro]?

- 1. Sí
- 2. No
- Refused
- Don't know

Universe: Sample adults 18+ who don't know the total amount they paid for chelation therapy in the past 12 months

Skip Instructions: <1> [goto CHE_AVGS]
<2,R,D> [goto CHE_MAT]

Question ID: ALT.219_00.000 **Instrument Variable Name:** CHE_AVGS **QuestionnaireFileName:** Adult CAM

Spanish Text: ¿Cuánto pagó en promedio de su propio bolsillo por cada visita a un practicante para la terapia de quelación?

Enter '0' if no cost or free
Allow \$0-500,R,D

Universe: Sample adults 18+ who know the average per visit they paid for chelation therapy in the past 12 months

Skip Instructions: <0-500,R,D> [goto CHE_MAT]

Question ID: ALT.220_00.000 **Instrument Variable Name:** CHE_MAT **QuestionnaireFileName:** Adult CAM

Spanish Text: DURANTE LOS ÚLTIMOS 12 MESES, ¿compró un libro de auto-ayuda u otros materiales como un DVD, CD, o Video para aprender algo sobre la terapia de quelación?

- 1. Sí
- 2. No
- Refused
- Don't know

Universe: Sample adults 18+ who have seen a practitioner for chelation therapy in the past 12 months

Skip Instructions: <1> [goto CHE_MATC]
<2,R,D> [goto CST_USE]

Question ID: ALT.221_00.000 **Instrument Variable Name:** CHE_MATC **QuestionnaireFileName:** Adult CAM

Spanish Text: ¿Aproximadamente cuánto pagó por estos materiales durante los últimos 12 meses?

*Enter '200' for \$200 or more.
Allow \$0-200,R,D

Universe: Sample adults 18+ who have bought self-help materials for chelation therapy in the past 12 months

Skip Instructions: <0-200,R,D> [goto CST_USE]

2012 NHIS Spanish Questionnaire - Adult CAM
Adult Alternative Health/Complementary And Alternative Medicine
Document Version Date: 30-May-13

Question ID: ALT.231_00.000 **Instrument Variable Name:** CST_USE **QuestionnaireFileName:** Adult CAM

Spanish Text: ? [F1]

¿Ha usado ALGUNA VEZ una de estas terapias para su salud?

Terapia craneosacral?

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+

Skip Instructions: <1> [goto CST_EVER]
<2,R,D>[goto TRD_EVR]

Question ID: ALT.232_00.000 **Instrument Variable Name:** CST_EVER **QuestionnaireFileName:** Adult CAM

Spanish Text: ? [F1]

¿Ha visto ALGUNA VEZ a un proveedor o practicante de terapia craneosacral para usted mismo(a)?

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+ who have ever used craneosacral therapy

Skip Instructions: <1> [goto CST_USEM]
<2,R,D>[goto CST_USM]

Question ID: ALT.233_00.000 **Instrument Variable Name:** CST_USEM **QuestionnaireFileName:** Adult CAM

Spanish Text: ?[F1]

DURANTE LOS ÚLTIMOS 12 MESES, ¿vio a un practicante para la terapia craneosacral?

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+ who have ever seen a practitioner for craneosacral therapy

Skip Instructions: <1>[goto CST_PTIM]
<2,R,D> [goto CST_USM]

2012 NHIS Spanish Questionnaire - Adult CAM
Adult Alternative Health/Complementary And Alternative Medicine
Document Version Date: 30-May-13

Question ID: ALT.234_00.000 **Instrument Variable Name:** CST_USM **QuestionnaireFileName:** Adult CAM

Spanish Text: ?[F1]

DURANTE LOS ÚLTIMOS 12 MESES, ¿utilizó la terapia craneosacral?

- 1. Sí
- 2. No
- Refused
- Don't know

Universe: Sample adults 18+ who have ever used craniosacral therapy but have never seen a practitioner or have not seen one in the past 12 months

Skip Instructions: <1,2,R,D> [goto TRD_EVR]

Question ID: ALT.235_00.000 **Instrument Variable Name:** CST_PTIM **QuestionnaireFileName:** Adult CAM

Spanish Text: ¿Sabe con exactitud el número de veces durante los últimos 12 meses que usted vio a un practicante para la terapia craneosacral?

- 1. Sí
- 2. No
- Refused
- Don't know

Universe: Sample adults 18+ who have seen a practitioner for craniosacral therapy in the past 12 months

Skip Instructions: <1> [goto CST_TMNO]
<2,R,D> [goto CST_TMCT]

Question ID: ALT.236_00.000 **Instrument Variable Name:** CST_TMNO **QuestionnaireFileName:** Adult CAM

Spanish Text: DURANTE LOS ÚLTIMOS 12 MESES, ¿cuántas veces vio a un practicante para la terapia craneosacral?

*Enter '52' for 52 or more times.

Allow 1-52,R,D

Universe: Sample adults 18+ who know the number of times they have seen a practitioner for craniosacral therapy in the past 12 months

Skip Instructions: <1-52,R,D> [goto CST_HIC]

2012 NHIS Spanish Questionnaire - Adult CAM
Adult Alternative Health/Complementary And Alternative Medicine
Document Version Date: 30-May-13

Question ID: ALT.237_00.000 **Instrument Variable Name:** CST_TMCT **QuestionnaireFileName:** Adult CAM

Spanish Text: DURANTE LOS ÚLTIMOS 12 MESES, ¿APROXIMADAMENTE cuántas veces vio a un practicante para la terapia craneosacral? Diría...

1. Solo 1 vez
 2. 2-5 veces
 3. 6-10 veces
 4. 11-15 veces
 5. 16-20 veces
 6. 21-25 veces
 7. Más de 25 veces
- Refused
Don't know

Universe: Sample adults 18+ who don't know the specific number of times they have seen a practitioner for craniosacral therapy in the past 12 months or refuse the specific number of times

Skip Instructions: <1-7,R,D> [goto CST_HIC]

Question ID: ALT.238_00.000 **Instrument Variable Name:** CST_HIC **QuestionnaireFileName:** Adult CAM

Spanish Text: DURANTE LOS ÚLTIMOS 12 MESES, ¿estaba alguno de los costos de ver a un practicante para la terapia craneosacral cubierto por seguro de salud?

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+ who have seen a practitioner for craniosacral therapy in the past 12 months

Skip Instructions: <1> [goto CST_HICA]
<2,R,D> [goto CST_HIT]

Question ID: ALT.239_00.000 **Instrument Variable Name:** CST_HICA **QuestionnaireFileName:** Adult CAM

Spanish Text: DURANTE LOS ÚLTIMOS 12 MESES, ¿cubrió el seguro de salud todo el costo o solo parte del costo para ver a un practicante para la terapia craneosacral?

1. Todo el costo
 2. Parte del costo
- Refused
Don't know

Universe: Sample adults 18+ whose visit(s) to a practitioner for craniosacral therapy in the past 12 months were (at least partly) covered by health insurance

Skip Instructions: <1> [goto CST_MAT]
<2,R,D> [goto CST_HIT]

2012 NHIS Spanish Questionnaire - Adult CAM
Adult Alternative Health/Complementary And Alternative Medicine
Document Version Date: 30-May-13

Question ID: ALT.240_00.000 **Instrument Variable Name:** CST_HIT **QuestionnaireFileName:** Adult CAM

Spanish Text: ¿Sabe la cantidad total que usted pagó en los últimos 12 meses para ver a un practicante para la terapia craneosacral [fill1: sin incluir la parte pagada por el seguro]?

- 1. Sí
- 2. No
- Refused
- Don't know

Universe: Sample adults 18+ whose health insurance covered none or some of the cost for craneosacral therapy in the past 12 months

Skip Instructions: <1> [goto CST_HITS]
<2,R,D> [goto CST_AVGC]

Question ID: ALT.241_00.000 **Instrument Variable Name:** CST_HITS **QuestionnaireFileName:** Adult CAM

Spanish Text: ¿Cuánto en total usted pagó durante los últimos 12 meses para ver a un practicante de terapia craneosacral [fill1: sin incluir la parte pagada por el seguro]?

*Enter '0' for no cost or free.
Allow \$0-26000,R,D

Universe: Sample adults 18+ who know the amount they paid for craneosacral therapy in the past 12 months

Skip Instructions: <0-26000,R,D> [goto CST_MAT]

Question ID: ALT.242_00.000 **Instrument Variable Name:** CST_AVGC **QuestionnaireFileName:** Adult CAM

Spanish Text: ¿Sabe la cantidad promedio que usted pagó en los últimos 12 meses por cada visita para la terapia craneosacral [fill1: sin incluir la parte pagada por el seguro]?

- 1. Sí
- 2. No
- Refused
- Don't know

Universe: Sample adults 18+ who don't know the total amount they paid for craneosacral therapy in the past 12 months

Skip Instructions: <1> [goto CST_AVGS]
<2,R,D> [goto CST_MAT]

2012 NHIS Spanish Questionnaire - Adult CAM
Adult Alternative Health/Complementary And Alternative Medicine
Document Version Date: 30-May-13

Question ID: ALT.243_00.000 **Instrument Variable Name:** CST_AVGS **QuestionnaireFileName:** Adult CAM

Spanish Text: ¿Cuánto pagó en promedio de su propio bolsillo por cada visita a un practicante para la terapia craneosacral?

*Enter '0' if no cost or free.

Allow \$0-500,R,D

Universe: Sample adults 18+ who know the average per visit they paid for craniosacral therapy in the past 12 months

Skip Instructions: <0-500,R,D> [goto CST_MAT]

Question ID: ALT.244_00.000 **Instrument Variable Name:** CST_MAT **QuestionnaireFileName:** Adult CAM

Spanish Text: DURANTE LOS ÚLTIMOS 12 MESES, ¿compró un libro de auto-ayuda u otros materiales como un DVD, CD, o Video para aprender algo sobre la terapia craneosacral?

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+ who have seen a practitioner for craniosacral therapy in the past 12 months

Skip Instructions: <1> [goto CST_MATC]
 <2,R,D> [goto TRD_EVR]

Question ID: ALT.245_00.000 **Instrument Variable Name:** CST_MATC **QuestionnaireFileName:** Adult CAM

Spanish Text: ¿Aproximadamente cuánto pagó por estos materiales durante los últimos 12 meses?

*Enter '200' for \$200 or more.

Allow \$0-200,R,D

Universe: Sample adults 18+ who have bought self-help materials for craniosacral therapy in the past 12 months

Skip Instructions: <0-200,R,D> [goto TRD_EVR]

2012 NHIS Spanish Questionnaire - Adult CAM
Adult Alternative Health/Complementary And Alternative Medicine
Document Version Date: 30-May-13

Question ID: ALT.255_00.000 **Instrument Variable Name:** TRD_EVR **QuestionnaireFileName:** Adult CAM

Spanish Text: ? [F1]

(book) CAM1

¿Ha visto ALGUNA VEZ alguno de estos sanadores tradicionales?

Curandero o Hechizero Nativo Americano

Chamán

Curandero, Machi o Parchero

Yerberero o Hierbista

Sobador

Huesero

1. Sí

2. No

Refused

Don't know

Universe: Sample adults 18+

Skip Instructions: <1> [goto TRD_EVR1]
<2,R,D> [goto AVT_USE]

2012 NHIS Spanish Questionnaire - Adult CAM
Adult Alternative Health/Complementary And Alternative Medicine
 Document Version Date: 30-May-13

Question ID: ALT.256_00.010 **Instrument Variable Name:** TRD_EVR1 **QuestionnaireFileName:** Adult CAM

Spanish Text: ? [F1]

(book) CAM1

¿Cuáles?

*Enter all that apply, separate with commas.

1. Curandero o Hechizero Nativo Americano
2. Chamán
3. Curandero, Machi or Parchero
4. Yerbero o Hierbista
5. Sobador
6. Huesero
- Refused
- Don't know

Universe: Sample adults 18+ who have ever seen one of the traditional healers from card ALT1

Skip Instructions: cycle through "TRDU" questions for all selected practitioners:

<1> [goto TRDU_NAH]
 <2> [goto TRDU_SHA]
 <3> [goto TRDU_CUR]
 <4> [goto TRDU_YER]
 <5> [goto TRDU_SOB]
 <6> [goto TRDU_HUE]
 <R,D> [goto AVT_USE]

If TRD_EVR1 includes 1 goto TRDU_NAH
 elseif TRD_EVR1 includes 2 goto TRDU_SHA
 elseif TRD_EVR1 includes 3 goto TRDU_CUR
 elseif TRD_EVR1 includes 4 goto TRDU_YER
 elseif TRD_EVR1 includes 5 goto TRDU_SOB
 elseif TRD_EVR1 includes 6 goto TRDU_HUE

Question ID: ALT.257_00.000 **Instrument Variable Name:** TRDU_NAH **QuestionnaireFileName:** Adult CAM

Spanish Text: ? [F1]

DURANTE LOS ÚLTIMOS 12 MESES, ¿vio...?

Un Curandero o Hechizero Nativo Americano

1. Sí
2. No
- Refused
- Don't know

Universe: Sample adults 18+ who have ever seen a Native American Healer or Medicine Man

Skip Instructions: <1,2,R,D> if TRD_EVR1='1' and more than one selected [goto next TRDU question],
 <1> If no more were selected at TRD_EVR1 [goto TRD_PTIM]
 <2,R,D> If If no more were selected at TRD_EVR1 [goto AVT_USE]

2012 NHIS Spanish Questionnaire - Adult CAM
Adult Alternative Health/Complementary And Alternative Medicine
Document Version Date: 30-May-13

Question ID: ALT.258_00.000 **Instrument Variable Name:** TRDU_SHA **QuestionnaireFileName:** Adult CAM

Spanish Text: ? [F1]

DURANTE LOS ÚLTIMOS 12 MESES, ¿vio...?

Un Chamán

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+ who have ever seen a Shaman

Skip Instructions: <1,2,R,D> if TRD_EVR1='1' and more than one selected [goto next TRDU question],
 <1> If no more were selected at TRD_EVR1 [goto TRD_PTIM]
 <2,R,D> If If no more were selected at TRD_EVR1 [goto AVT_USE]

Question ID: ALT.259_00.000 **Instrument Variable Name:** TRDU_CUR **QuestionnaireFileName:** Adult CAM

Spanish Text: ? [F1]

DURANTE LOS ÚLTIMOS 12 MESES, ¿vio...?

Un Curandero, Machi, o Parchero

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+ who have ever seen a Curandero, Machi, or Parchero

Skip Instructions: <1,2,R,D> if TRD_EVR1='1' and more than one selected [goto next TRDU question],
 <1> If no more were selected at TRD_EVR1 [goto TRD_PTIM]
 <2,R,D> If If no more were selected at TRD_EVR1 [goto AVT_USE]

Question ID: ALT.260_00.000 **Instrument Variable Name:** TRDU_YER **QuestionnaireFileName:** Adult CAM

Spanish Text: ? [F1]

DURANTE LOS ÚLTIMOS 12 MESES, ¿vio...?

Un Yerbero o Hierbista

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+ who have ever seen a Yerbero or Hierbista

Skip Instructions: <1,2,R,D> if TRD_EVR1='1' and more than one selected [goto next TRDU question],
 <1> If no more were selected at TRD_EVR1 [goto TRD_PTIM]
 <2,R,D> If If no more were selected at TRD_EVR1 [goto AVT_USE]

2012 NHIS Spanish Questionnaire - Adult CAM
Adult Alternative Health/Complementary And Alternative Medicine
 Document Version Date: 30-May-13

Question ID: ALT.261_00.000 **Instrument Variable Name:** TRDU_SOB **QuestionnaireFileName:** Adult CAM

Spanish Text: ? [F1]

DURANTE LOS ÚLTIMOS 12 MESES, ¿vio...?

Un Sobador

- 1. Sí
- 2. No
- Refused
- Don't know

Universe: Sample adults 18+ who have ever seen a Sobador

Skip Instructions: <1,2,R,D> if TRD_EVR1='1' and more than one selected [goto next TRDU question],
 <1> If no more were selected at TRD_EVR1 [goto TRD_PTIM]
 <2,R,D> If If no more were selected at TRD_EVR1 [goto AVT_USE]

Question ID: ALT.262_00.000 **Instrument Variable Name:** TRDU_HUE **QuestionnaireFileName:** Adult CAM

Spanish Text: ? [F1]

DURANTE LOS ÚLTIMOS 12 MESES, ¿vio...?

Un Huesero

- 1. Sí
- 2. No
- Refused
- Don't know

Universe: Sample adults 18+ who have ever seen a Huesero

Skip Instructions: <1> [goto TRD_PTIM]
 <2,R,D> if no to all applicable TRDU, [goto AVT_USE];
 else [goto TRD_PTIM]

Question ID: ALT.263_00.000 **Instrument Variable Name:** TRD_PTIM **QuestionnaireFileName:** Adult CAM

Spanish Text: ¿Sabe con exactitud el número de veces durante los últimos 12 meses que vio a sanadores tradicionales?

- 1. Sí
- 2. No
- Refused
- Don't know

Universe: Sample adults 18+ who have seen traditional healers in the past 12 months

Skip Instructions: <1> [goto TRD_TMNO]
 <2,R,D> [goto TRD_TMCT]

2012 NHIS Spanish Questionnaire - Adult CAM
Adult Alternative Health/Complementary And Alternative Medicine
Document Version Date: 30-May-13

Question ID: ALT.264_00.000 **Instrument Variable Name:** TRD_TMNO **QuestionnaireFileName:** Adult CAM

Spanish Text: DURANTE LOS ÚLTIMOS 12 MESES, ¿cuántas veces vio a sanadores tradicionales?

*Enter '52' for 52 or more times.

Allow 1-52,R,D

Universe: Sample adults 18+ who know the number of times they have seen traditional healers in the past 12 months

Skip Instructions: <1-52,R,D> [goto TRD_HIC]

Question ID: ALT.265_00.000 **Instrument Variable Name:** TRD_TMCT **QuestionnaireFileName:** Adult CAM

Spanish Text: DURANTE LOS ÚLTIMOS 12 MESES, ¿APROXIMADAMENTE cuántas veces vio a sanadores tradicionales? Diría...

*Read categories below.

1. Solo 1 vez
 2. 2-5 veces
 3. 6-10 veces
 4. 11-15 veces
 5. 16-20 veces
 6. 21-25 veces
 7. Más de 25 veces
- Refused
Don't know

Universe: Sample adults 18+ who don't know the specific number of times they have seen traditional healers in the past 12 months or refuse the specific number of times

Skip Instructions: <1-7,R,D> [goto TRD_HIC]

Question ID: ALT.266_00.000 **Instrument Variable Name:** TRD_HIC **QuestionnaireFileName:** Adult CAM

Spanish Text: DURANTE LOS ÚLTIMOS 12 MESES, ¿estaba alguno de los costos de ver a sanadores tradicionales cubierto por seguro de salud?

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+ who have seen traditional healers in the past 12 months

Skip Instructions: <1> [goto TRD_HICA]
<2,R,D> [goto TRD_HIT]

2012 NHIS Spanish Questionnaire - Adult CAM
Adult Alternative Health/Complementary And Alternative Medicine
Document Version Date: 30-May-13

Question ID: ALT.267_00.000 **Instrument Variable Name:** TRD_HICA **QuestionnaireFileName:** Adult CAM

Spanish Text: DURANTE LOS ÚLTIMOS 12 MESES, ¿cubrió el seguro de salud todo el costo o solo parte del costo para ver a sanadores tradicionales?

- 1. Todo el costo
- 2. Parte del costo
- Refused
- Don't know

Universe: Sample adults 18+ whose visit(s) to traditional healers in the past 12 months were (at least partly) covered by health insurance

Skip Instructions: <1> [goto TRD_MAT]
<2,R,D> [goto TRD_HIT]

Question ID: ALT.268_00.000 **Instrument Variable Name:** TRD_HIT **QuestionnaireFileName:** Adult CAM

Spanish Text: ¿Sabe la cantidad total que usted pagó en los últimos 12 meses para ver a sanadores tradicionales [fill1: sin incluir la parte pagada por el seguro]?

- 1. Sí
- 2. No
- Refused
- Don't know

Universe: Sample adults 18+ whose health insurance covered none or some of the cost for traditional healers in the past 12 months

Skip Instructions: <1> [goto TRD_HITS]
<2,R,D> [goto TRD_AVGC]

Question ID: ALT.269_00.000 **Instrument Variable Name:** TRD_HITS **QuestionnaireFileName:** Adult CAM

Spanish Text: ¿Cuánto en total pagó durante los últimos 12 meses para ver a sanadores tradicionales [fill1: sin incluir la parte pagada por el seguro]?

Allow \$0-26000,R,D

Universe: Sample adults 18+ who know the amount they paid for traditional healers in the past 12 months

Skip Instructions: <0-26000,R,D> [goto TRD_MAT]

2012 NHIS Spanish Questionnaire - Adult CAM
Adult Alternative Health/Complementary And Alternative Medicine
 Document Version Date: 30-May-13

Question ID: ALT.270_00.000 **Instrument Variable Name:** TRD_AVGC **QuestionnaireFileName:** Adult CAM

Spanish Text: ¿Sabe la cantidad promedio que usted pagó en los últimos 12 meses por cada visita a sanadores tradicionales [fill1: sin incluir la parte pagada por el seguro]?

- 1. Sí
- 2. No
- Refused
- Don't know

Universe: Sample adults 18+ who don't know the total amount they paid for traditional healers in the past 12 months

Skip Instructions: <1> [goto TRD_AVGS]
<2,R,D> [goto TRD_MAT]

Question ID: ALT.271_00.000 **Instrument Variable Name:** TRD_AVGS **QuestionnaireFileName:** Adult CAM

Spanish Text: ¿Cuánto pagó en promedio de su propio bolsillo por cada visita a sanadores tradicionales?

*Enter '0' if no cost or free.
Allow \$0-500,R,D

Universe: Sample adults 18+ who know the average per visit they paid for traditional healers in the past 12 months

Skip Instructions: <0-500,R,D> [goto TRD_MAT]

Question ID: ALT.272_00.000 **Instrument Variable Name:** TRD_MAT **QuestionnaireFileName:** Adult CAM

Spanish Text: DURANTE LOS ÚLTIMOS 12 MESES, ¿compró un libro de auto-ayuda u otros materiales como un DVD, CD, o Video para aprender algo sobre sanadores tradicionales?

- 1. Sí
- 2. No
- Refused
- Don't know

Universe: Sample adults 18+ who have seen traditional healers in the past 12 months

Skip Instructions: <1> [goto TRD_MATC]
<2,R,D> [goto AVT_USE]

Question ID: ALT.273_00.000 **Instrument Variable Name:** TRD_MATC **QuestionnaireFileName:** Adult CAM

Spanish Text: ¿Aproximadamente cuánto pagó por estos materiales durante los últimos 12 meses?

*Enter '200' for \$200 or more.
Allow \$0-200,R,D

Universe: Sample adults 18+ who have bought self-help materials for traditional healers in the past 12 months

Skip Instructions: <0-200,R,D> [goto AVT_USE]

2012 NHIS Spanish Questionnaire - Adult CAM
Adult Alternative Health/Complementary And Alternative Medicine
Document Version Date: 30-May-13

Question ID: ALT.283_00.000 **Instrument Variable Name:** AVT_USE **QuestionnaireFileName:** Adult CAM

Spanish Text: ? [F1]

Ahora voy a hacerle preguntas sobre otras prácticas de la salud. La primera práctica sobre la cual le preguntaré es del consumo de vitaminas y minerales. Estas son píldoras, cápsulas, tabletas, o líquidos que están marcados como SUPLEMENTO VITAMÍNICO O DE MINERALES. Más adelante le haré preguntas sobre hierbas y suplementos no-vitamínicos.

¿Ha tomado ALGUNA VEZ multivitaminas o multiminerales?

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+

Skip Instructions: <1> [goto AVT_USM]
<2,R,D> [goto AVT_ABEV]

Question ID: ALT.284_00.000 **Instrument Variable Name:** AVT_USM **QuestionnaireFileName:** Adult CAM

Spanish Text: DURANTE LOS ÚLTIMOS 12 MESES, ¿tomó multivitaminas o multiminerales?

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+ who have ever taken multi-vitamins or multi-minerals

Skip Instructions: <1,2,R,D> [goto AVT_ABEV]

Question ID: ALT.285_00.000 **Instrument Variable Name:** AVT_ABEV **QuestionnaireFileName:** Adult CAM

Spanish Text: {fill1: Aparte de una multivitamina o multimineral, ¿Ha tomado/¿Ha tomado} ALGUNA VEZ las vitaminas A,B,C,D,E,H, o K?

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+

Skip Instructions: <1> [goto AVT_ABUM]
<2,R,D,> [goto AVT_CAEV]

2012 NHIS Spanish Questionnaire - Adult CAM
Adult Alternative Health/Complementary And Alternative Medicine
Document Version Date: 30-May-13

Question ID: ALT.286_00.000 **Instrument Variable Name:** AVT_ABUM **QuestionnaireFileName:** Adult CAM

Spanish Text: DURANTE LOS ÚLTIMOS 12 MESES, ¿tomó las vitaminas A,B,C,D,E,H, o K?

- 1. Sí
- 2. No
- Refused
- Don't know

Universe: Sample adults 18+ who have ever taken vitamins A,B,C,D,E,H, or K

Skip Instructions: <1,2,R,D> [goto AVT_CAEV]

Question ID: ALT.287_00.000 **Instrument Variable Name:** AVT_CAEV **QuestionnaireFileName:** Adult CAM

Spanish Text: {fill1: Aparte de una multivitamina o multimineral, ¿ha tomado/¿Ha tomado} ALGUNA VEZ calcio, magnesio, hierro, cromo, cinc, selenio, o potasio?

- 1. Sí
- 2. No
- Refused
- Don't know

Universe: Sample adults 18+

Skip Instructions: <1> [goto AVT_CAUM]
<2,R,D> [goto AHB_EVR]

Question ID: ALT.288_00.000 **Instrument Variable Name:** AVT_CAUM **QuestionnaireFileName:** Adult CAM

Spanish Text: DURANTE LOS ÚLTIMOS 12 MESES, ¿tomó calcio, magnesio, hierro, cromo, cinc, selenio, o potasio?

- 1. Sí
- 2. No
- Refused
- Don't know

Universe: Sample adults 18+ who have taken calcium, magnesium, iron, chromium, zinc, selenium, or potassium

Skip Instructions: <1,2,R,D> [goto AHB_EVR]

2012 NHIS Spanish Questionnaire - Adult CAM
Adult Alternative Health/Complementary And Alternative Medicine
Document Version Date: 30-May-13

Question ID: ALT.298_00.000 **Instrument Variable Name:** AHB_EVR **QuestionnaireFileName:** Adult CAM

Spanish Text: ? [F1]

(book) CAM2

Hierbas y otros suplementos no-vitamínicos son píldoras, cápsulas, tabletas, o líquidos que llevan una etiqueta como SUPLEMENTO DIETÉTICO. Esto NO incluye suplementos vitamínicos o de minerales, tratamientos homeopáticos, o el consumo de tés herbales o verdes.

¿Ha tomado ALGUNA VEZ alguno de los suplementos herbales alistados en esta tarjeta para usted mismo(a)?

*Tinctures are included.

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+

Skip Instructions: <1> [goto AHB_USM]
<2,R,D> if VIT_USM=1 [goto AVT_BOFN];
else [goto HOM_USE]

Question ID: ALT.299_00.000 **Instrument Variable Name:** AHB_USM **QuestionnaireFileName:** Adult CAM

Spanish Text: ? [F1]

(book) CAM2

DURANTE LOS ÚLTIMOS 12 MESES, ¿ha tomado alguno de los suplementos herbales u otros suplementos no-vitamínicos alistados en esta tarjeta para usted mismo(a)?

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+ who have ever taken herbs or other non-vitamin supplements

Skip Instructions: <1> [goto AHB_LSTY]
<2,R,D> if VIT_USM=1 [goto AVT_BOFN];
else [goto HOM_USE]

2012 NHIS Spanish Questionnaire - Adult CAM
Adult Alternative Health/Complementary And Alternative Medicine
Document Version Date: 30-May-13

Question ID: ALT.300_00.000 **Instrument Variable Name:** AHB_LSTY **QuestionnaireFileName:** Adult CAM

Spanish Text: ? [F1]

(book) CAM2

Por favor dígame cuáles de estos suplementos ha tomado usted DURANTE LOS ÚLTIMOS 12 MESES? Si usted tomó más de una hierba como parte de un suplemento individual, seleccione "píldora con combinación de hierbas."

*Enter all that apply, separate with commas.

1. Píldora con combinación de hierbas
 2. Acai (píldoras, cápsulas de gel)
 3. Pólen de abejas u otros productos de abejas
 4. Condroitina
 5. Coenzima Q10 (CoQ10)
 6. Arándano/Cranberry (píldoras o cápsulas)
 7. Enzimas Digestivas (lactaid)
 8. Equinácea
 9. Aceite de Pescado o omega 3 o suplementos de ácidos grasos DHA o EPA
 10. Suplementos de ajo (píldoras, cápsulas)
 11. Ginkgo Biloba
 12. Ginseng
 13. Glucosamina
 14. Píldoras de té verde (no té preparado) o EGCG (píldoras)
 15. Melatonina
 16. Cardo Lechosos (silimarina)
 17. MSM (Metano Slufaril Metílico)
 18. Probióticos o Prebióticos
 19. SAM-e (S-Adenosilmetionina)
 20. Palma Sabal (Saw Palmetto)
 21. Valeriana
 22. Otra(s) hierba(s) o suplemento(s) no-vitamínico(s)
- Refused
Don't know

Universe: Sample adults 18+ who have taken herbs or other non-vitamin supplements in the past 12 months

Skip Instructions: <1-22> [goto AHB_MON]
<R,D> [goto AHB_EVR1]

Question ID: ALT.301_00.000 **Instrument Variable Name:** AHB_MON **QuestionnaireFileName:** Adult CAM

Spanish Text: (book) CAM2

¿Tomó alguno de estos DURANTE LOS ÚLTIMOS 30 DÍAS?

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+ who have taken specific herbs or other non-vitamin supplements in the past 12 months

Skip Instructions: <1> [goto AHB_LSTM]
<2,R,D> [goto AHB_EVR1]

2012 NHIS Spanish Questionnaire - Adult CAM
Adult Alternative Health/Complementary And Alternative Medicine

 Document Version Date: 30-May-13

Question ID: ALT.302_00.000 **Instrument Variable Name:** AHB_LSTM **QuestionnaireFileName:** Adult CAM

Spanish Text: (book) CAM2

¿Cuáles de estos suplementos tomó DURANTE LOS ÚLTIMOS 30 DÍAS? Si tomó más de una hierba o suplemento, seleccione "píldora con combinación de hierbas."

*Enter all that apply, separate with commas.

1. Píldora con combinación de hierbas
 2. Acai (píldoras, cápsulas de gel)
 3. Pólen de abejas u otros productos de abejas
 4. Condroitina
 5. Coenzima Q10 (CoQ10)
 6. Arándano/Cranberry (píldoras o cápsulas)
 7. Enzimas Digestivas (lactaid)
 8. Equinácea
 9. Aceite de Pescado o omega 3 o suplementos de ácidos grasos DHA o EPA
 10. Suplementos de ajo (píldoras, cápsulas)
 11. Ginkgo Biloba
 12. Ginseng
 13. Glucosamina
 14. Píldoras de té verde (no té preparado) o EGCG (píldoras)
 15. Melatonina
 16. Cardo Lechosos (silimarina)
 17. MSM (Metano Slufaril Metílico)
 18. Probióticos o Prebióticos
 19. SAM-e (S-Adenosilmetionina)
 20. Palma Sabal (Saw Palmetto)
 21. Valeriana
 22. Otra(s) hierba(s) o suplemento(s) no-vitaminico(s)
- Refused
Don't know

Universe: Sample adults 18+ who have taken herbs or other non-vitamin supplements in the past 30 days

Skip Instructions:

```

<1> [goto AHB_CHPN]
<1,2-21> if AHB_CNT>2 [goto AHB_CHPN] (then to AHB_CHP1 to AHB_TP2)
<1,2-21,22> if AHB_CNT>2 [goto AHB_CHPN] (then to AHB_CHP1 to AHB_MOTH to AHB_LU1 (if more
than 1 to AHB_LU2) go to AHB_TP2)
<2-21> if AHB_CNT>2 [goto AHB_TP2]
<22> [goto AHB_MOTH];
<2-21,22> if AHB_CNT>2, [goto AHB_MOTH], to AHB_LU1 (if more than 1 to AHB_LU2) go to AHB_TP2
else if AHB_CNT<=2 <2-21> [goto AHB_EVR1]

```

Question ID: ALT.303_00.000 **Instrument Variable Name:** AHB_CHPN **QuestionnaireFileName:** Adult CAM

Spanish Text: ¿Cuántas diferentes "píldoras con combinación de hierbas" tomó?

Allow 01-50,R,D

Universe: Sample adults 18+ who have taken a combination herb pill in the past 30 days

Skip Instructions: <1-50,R,D> [goto AHB_CHP1]

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Question ID: ALT.304_00.000 **Instrument Variable Name:** AHB_CHP1 **QuestionnaireFileName:** Adult CAM

Spanish Text: book) CAM2

If AHB_CHPN=R,D, fill:

{¿Cuáles hierbas u otro suplementos no-vitamínicos están incluidos en la píldora o píldoras con combinación de hierbas?}

If AHB_CHPN=1 fill:

{¿Cuáles hierbas u otro suplementos no-vitamínicos están incluidos en la píldora con combinación de hierbas?}

Else if AHB_CHPN=2 fill:

{¿Cuáles hierbas u otro suplementos no-vitamínicos están incluidos en la primera píldora con combinación de hierbas?}

Else if AHB_CHPN=3-50, fill:

{Pensando en las dos píldoras con combinación de hierbas que toma más frecuentemente, ¿cuáles hierbas u otros suplementos no-vitamínicos están incluidos en la primera píldora con combinación de hierbas?}

*Enter all that apply, separate with commas.

2. Acai (píldoras, cápsulas de gel)
 3. Pólen de abejas u otros productos de abejas
 4. Condroitina
 5. Coenzima Q10 (CoQ10)
 6. Arándano/Cranberry (píldoras o cápsulas)
 7. Enzimas Digestivas (lactaid)
 8. Equinácea
 9. Aceite de Pescado o omega 3 o suplementos de ácidos grasos DHA o EPA
 10. Suplementos de ajo (píldoras, cápsulas)
 11. Ginkgo Biloba
 12. Ginseng
 13. Glucosamina
 14. Píldoras de té verde (no té preparado) o EGCG (píldoras)
 15. Melatonina
 16. Cardo Lechosos (silimarina)
 17. MSM (Metano Slufaril Metílico)
 18. Probióticos o Prebióticos
 19. SAM-e (S-Adenosilmetionina)
 20. Palma Sabal (Saw Palmetto)
 21. Valeriana
 22. Otra(s) hierba(s) o suplemento(s) no-vitamínico(s)
- Refused
Don't know

Universe: Sample adults 18+ who have taken a select number of combination herb pill(s) in the past 30 days

Skip Instructions: <2-22,R,D> if AHB_CHPN GE 2 [goto AHB_CHP2];
 else if AHB_LSTM=2-21 and AHB_CNT>2 [goto AHB_TP2];
 else if AHB_LSTM=22 [goto AHB_MOTH];
 else IF AHB_CHPN=1 [goto AHB_EVR1]

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Question ID: ALT.305_00.000 **Instrument Variable Name:** AHB_CHP2 **QuestionnaireFileName:** Adult CAM

Spanish Text: (book) CAM2

If AHB_CHPN=2, fill:

{¿Cuáles hierbas u otro suplementos no-vitamínicos están incluidos en la segunda píldora con combinación de hierbas?}

Else if AHB_CHPN=3-50, fill:

{Pensando en las dos píldoras con combinación de hierbas que toma más frecuentemente, ¿cuáles hierbas u otros suplementos no-vitamínicos están incluidos en la segunda píldora con combinación de hierbas?}

2. Acai (píldoras, cápsulas de gel)
 3. Pólen de abejas u otros productos de abejas
 4. Condroitina
 5. Coenzima Q10 (CoQ10)
 6. Arándano/Cranberry (píldoras o cápsulas)
 7. Enzimas Digestivas (lactaid)
 8. Equinácea
 9. Aceite de Pescado o omega 3 o suplementos de ácidos grasos DHA o EPA
 10. Suplementos de ajo (píldoras, cápsulas)
 11. Ginkgo Biloba
 12. Ginseng
 13. Glucosamina
 14. Píldoras de té verde (no té preparado) o EGCG (píldoras)
 15. Melatonina
 16. Cardo Lechosos (silimarina)
 17. MSM (Metano Slufaril Metílico)
 18. Probióticos o Prebióticos
 19. SAM-e (S-Adenosilmetionina)
 20. Palma Sabal (Saw Palmetto)
 21. Valeriana
 22. Otra(s) hierba(s) o suplemento(s) no-vitamínico(s)
- Refused
Don't know

Universe: Sample adults 18+ who have taken two or more combination herb pills

Skip Instructions: <2-22,R,D> if AHB_CNT>2 [goto AHB_TP2];
else if AHB_LSTM=22 [goto AHB_MOTH];
else [goto AHB_EVR1]

Question ID: ALT.306_00.000 **Instrument Variable Name:** AHB_MOTH **QuestionnaireFileName:** Adult CAM

Spanish Text: ¿Cuántas otras hierbas u otros suplementos no-vitamínicos ha tomado durante los últimos 30 días?

*Enter '50' for 50 or more.

<allow 01-50,R,D>

Universe: Sample adults 18+ who have taken other type of herb or non-vitamin supplement

Skip Instructions: <1-50> [goto AHB_LU1];
<R,D> if AHB_CNT>2 [goto AHB_TP2];
else if AHB_CNT=2 [goto AHB_EVR1]

2012 NHIS Spanish Questionnaire - Adult CAM
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Question ID: ALT.307_00.000 **Instrument Variable Name:** AHB_LU1 **QuestionnaireFileName:** Adult CAM

Spanish Text: {fill1: Por favor dígame el nombre de la otra hierba o suplemento no-vitamínico que tomó durante los últimos 30 días./ Por favor dígame el nombre de las dos hierbas o suplementos no-vitamínicos más importantes que tomó durante los últimos 30 días.}

*Enter the name of the first herb/non-vitamin supplement to locate in the look-up table.

*Enter 'ZZ' if herb/non-vitamin supplement not found.

<50 characters allowed in look-up table>

Universe: Sample adults 18+ who have taken a specific number of other herbs or non-vitamin supplements

Skip Instructions: <herb>
if AHB_MOTH GE 2 [goto AHB_LU2]
else if AHB_MOTH=1 [goto AHB_EVR1]

<R,D,ZZ>
if AHB_CNT>2[goto AHB_TP2];
Else AHB_CNT<=2 [goto AHB_EVR1]

Question ID: ALT.308_00.000 **Instrument Variable Name:** AHB_LU2 **QuestionnaireFileName:** Adult CAM

Spanish Text: *Enter the second most important other herb/non-vitamin supplement as reported by the respondent

*Enter 'ZZ' if herb/non-vitamin supplement not found.

<50 characters allowed in look-up table>

Universe: Sample adults 18+ who have taken two or more other herbs or non-vitamin supplements

Skip Instructions: <herb,R,D,ZZ> if AHB_CNT>2 [goto AHB_TP2];
else if AHB_CNT<=2 [goto AHB_EVR1]

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Question ID: ALT.309_00.000 **Instrument Variable Name:** AHB_TP2 **QuestionnaireFileName:** Adult CAM

Spanish Text: ¿Cuáles DOS de estos suplementos herbales tomó con mas frecuencia DURANTE LOS ÚLTIMOS 30 DÍAS?

*Enter two answers, separate with commas.

*If respondent cannot choose two herbs used most often, probe for the two most important for health.

1. Primer píldora con combinación de hierbas
 2. Acai (píldoras, cápsulas de gel)
 3. Pólen de abejas u otros productos de abejas
 4. Condroitina
 5. Coenzima Q10 (CoQ10)
 6. Arándano/Cranberry (píldoras o cápsulas)
 7. Enzimas Digestivas (lactaid)
 8. Equinácea
 9. Aceite de Pescado o omega 3 o suplementos de ácidos grasos DHA o EPA
 10. Suplementos de ajo (píldoras, cápsulas)
 11. Ginkgo Biloba
 12. Ginseng
 13. Glucosamina
 14. Píldoras de té verde (no té preparado) o EGCG (píldoras)
 15. Melatonina
 16. Cardo Lechosos (silimarina)
 17. MSM (Metano Slufaril Metílico)
 18. Probióticos o Prebióticos
 19. SAM-e (S-Adenosilmetionina)
 20. Palma Sabal (Saw Palmetto)
 21. Valeriana
 22. Segunda píldora con combinación de hierbas
 23. {First herb from lookup table}
 24. {Second herb from lookup table}
- Refused
Don't know

Universe: Sample adults 18+ who have taken more than 2 herbal or non-vitamin supplements in the past 30 days

Skip Instructions: <1-24> fill values into AHB_TP21 and AHB_TP22 if applicable; [goto AHB_EVR1];
<R,D> [goto AHB_EVR1]

Question ID: ALT.312_00.000 **Instrument Variable Name:** AHB_EVR1 **QuestionnaireFileName:** Adult CAM

Spanish Text: ? [F1]

¿Ha visto ALGUNA VEZ a un practicante para hierbas u otros suplementos no-vitamínicos?

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+ who have ever taken herbs or other non-vitamin supplements in the past 12 months

Skip Instructions: <1> [goto AHB_USE1]
<2,R,D> if AVT_USM=1 [goto AVT_BOFN];
else if AVT_USM ne 1 [goto AHB_BOFN]

2012 NHIS Spanish Questionnaire - Adult CAM
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Question ID: ALT.313_00.000 **Instrument Variable Name:** AHB_USE1 **QuestionnaireFileName:** Adult CAM

Spanish Text: ? [F1]

DURANTE LOS ÚLTIMOS 12 MESES, ¿Ha visto ALGUNA VEZ a un practicante para hierbas u otros suplementos no-vitamínicos?

1. Sí
2. No
- Refused
- Don't know

Universe: Sample adults 18+ who have seen a practitioner for herbs or other non-vitamin supplements

Skip Instructions: <1,2,R,D> if AVT_USM=1 [goto AVT_BOFN];
else AVT_USM ne 1 [goto AHB_BOFN]

Question ID: ALT.314_00.000 **Instrument Variable Name:** AVT_BOFN **QuestionnaireFileName:** Adult CAM

Spanish Text: 1 of 2

Ahora voy a hacerle preguntas sobre cuanto gasta usted para comprar {fill1: vitaminas y minerales. / vitaminas, minerales y hierbas u otros suplementos no-vitamínicos. Le preguntare sobre vitaminas y minerales y después le haré preguntas sobre suplementos no-vitamínicos.}

¿Aproximadamente cuántas veces por semana, mes, o año compra vitaminas y minerales?

*Enter number.

*Enter '0' if respondent does not buy vitamins or minerals.

Allow 0-995,R,D

Universe: Sample adults 18+ who have taken vitamins or minerals in the past year

Skip Instructions: <1-995> [goto AVT_BOFT]
<D> [goto AVT_CST1]
<0,R> if AHB_USM=1 [goto AHB_BOFN];
else AHB_USM ne 1 [goto HOM_USE]

Question ID: ALT.315_00.000 **Instrument Variable Name:** AVT_BOFT **QuestionnaireFileName:** Adult CAM

Spanish Text: 2 of 2

*Enter time period for how often vitamins and minerals are bought.

1. Semana
2. Mes
3. Año
- Refused
- Don't know

Universe: Sample adults 18+ who gave a number for how many times vitamins and minerals were purchased

Skip Instructions: <1-3,R,D> [goto AVT_CST1]

2012 NHIS Spanish Questionnaire - Adult CAM
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Question ID: ALT.322_00.000 **Instrument Variable Name:** AHB_TMCT **QuestionnaireFileName:** Adult CAM

Spanish Text: DURANTE LOS ÚLTIMOS 12 MESES, ¿APROXIMADAMENTE cuántas veces vio a un practicante para hierbas u otros suplementos no-vitamínicos? Diría...

*Read categories below.

1. Solo 1 vez
2. 2-5 veces
3. 6-10 veces
4. 11-15 veces
5. 16-20 veces
6. 21-25 veces
7. Más de 25 veces
- Refused
- Don't know

Universe: Sample adults 18+ who don't know the specific number of times they have seen a practitioner for herbs or other non-vitamin supplements in the past 12 months or refuse the specific number of times

Skip Instructions: <1-7,R,D> [goto AHB_HIC]

Question ID: ALT.323_00.000 **Instrument Variable Name:** AHB_HIC **QuestionnaireFileName:** Adult CAM

Spanish Text: DURANTE LOS ÚLTIMOS 12 MESES, ¿estaba alguno de los costos de ver a un practicante para hierbas u otros suplementos no-vitamínicos cubierto por seguro de salud?

1. Sí
2. No
- Refused
- Don't know

Universe: Sample adults 18+ who have seen a practitioner for herbs or other non-vitamin supplements in the past 12 months

Skip Instructions: <1> [goto AHB_HICA]
<2,R,D> [goto AHB_HIT]

Question ID: ALT.324_00.000 **Instrument Variable Name:** AHB_HICA **QuestionnaireFileName:** Adult CAM

Spanish Text: DURANTE LOS ÚLTIMOS 12 MESES, ¿cubrió el seguro de salud todo el costo o solo parte del costo para ver a un practicante de hierbas u otros suplementos no-vitamínicos?

1. Todo el costo
2. Parte del costo
- Refused
- Don't know

Universe: Sample adults 18+ whose visit(s) to a practitioner for herbs or other non-vitamin supplements in the past 12 months were (at least partly) covered by health insurance

Skip Instructions: <1> [goto AHB_MAT]
<2,R,D> [goto AHB_HIT]

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Question ID: ALT.328_00.000 **Instrument Variable Name:** AHB_AVGS **QuestionnaireFileName:** Adult CAM

Spanish Text: ¿Cuánto pagó en promedio de su propio bolsillo por cada visita a un practicante para hierbas u otros suplementos no-vitaminicos?

*Enter '0' if no cost or free.

Allow \$0-500,R,D

Universe: Sample adults 18+ who know the average per visit they paid for herbs or other non-vitamin supplements in the past 12 months

Skip Instructions: <0-500,R,D> [goto AHB_MAT]

Question ID: ALT.329_00.000 **Instrument Variable Name:** AHB_MAT **QuestionnaireFileName:** Adult CAM

Spanish Text: DURANTE LOS ÚLTIMOS 12 MESES, ¿compró un libro de auto-ayuda u otros materiales como un DVD, CD, o Video para aprender algo sobre hierbas u otros suplementos no-vitaminicos?

- 1. Sí
- 2. No
- Refused
- Don't know

Universe: Sample adults 18+ who have used herbs or other non-vitamin supplements in the past 12 months

Skip Instructions: <1> [goto AHB_MATC]
<2,R,D> [goto HOM_USE]

Question ID: ALT.330_00.000 **Instrument Variable Name:** AHB_MATC **QuestionnaireFileName:** Adult CAM

Spanish Text: ¿Aproximadamente cuánto pagó por estos materiales durante los últimos 12 meses?

*Enter '200' for \$200 or more.

Allow \$0-200,R,D

Universe: Sample adults 18+ who have bought self-help materials for herbs or other non-vitamin supplements in the past 12 months

Skip Instructions: <0-200,R,D> [goto HOM_USE]

2012 NHIS Spanish Questionnaire - Adult CAM
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Question ID: ALT.340_00.000 **Instrument Variable Name:** HOM_USE **QuestionnaireFileName:** Adult CAM

Spanish Text: ? [F1]

Las personas que usan homeopatía para tratar problemas de la salud toman píldoras o gotas pequeñas puestas frecuentemente bajo la lengua. Pueden que lleven etiquetas como remedios o medicinas homeopáticas y pueden ser recetas por practicantes de la homeopatía.

¿Ha usado ALGUNA VEZ tratamientos homeopáticos para su salud?

- 1. Sí
- 2. No
- Refused
- Don't know

Universe: Sample adults 18+

Skip Instructions: <1> [goto HOM_USM]
<2,R,D> [goto MBO_USE]

Question ID: ALT.341_00.000 **Instrument Variable Name:** HOM_USM **QuestionnaireFileName:** Adult CAM

Spanish Text: ? [F1]

DURANTE LOS ÚLTIMOS 12 MESES, ¿utilizó tratamientos homeopáticos para su salud?

- 1. Sí
- 2. No
- Refused
- Don't know

Universe: Sample adults 18+ who have ever used homeopathic treatment

Skip Instructions: <1> [goto HOM_OFSTN]
<2,R,D> [goto MBO_USE]

Question ID: ALT.342_00.000 **Instrument Variable Name:** HOM_OFSTN **QuestionnaireFileName:** Adult CAM

Spanish Text: 1 of 2

¿Aproximadamente cuántas veces por semana, mes, o año compra medicina homeopática?

* Enter number.
Allow 0-995,R,D

Universe: Sample adults 18+ who have used homeopathic treatment in the past 12 months

Skip Instructions: <1-995> [goto HOM_OFSTT]
<D> [goto HOM_COST]
<0,R> [goto HOM_EVER]

2012 NHIS Spanish Questionnaire - Adult CAM
Adult Alternative Health/Complementary And Alternative Medicine
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Question ID: ALT.343_00.000 **Instrument Variable Name:** HOM_OFTT **QuestionnaireFileName:** Adult CAM

Spanish Text: 2 of 2

*Enter time period for how often homeopathic medicine purchased

* Read if necessary:

¿Aproximadamente cuántas veces por semana, por mes, o por año compra usted medicamentos homeopáticos?

*Read categories if necessary.

1. Semana
 2. Mes
 3. Año
- Refused
Don't know

Universe: Sample adults 18+ who have used homeopathic treatment in the past 12 months

Skip Instructions: <1-3,R,D> [goto HOM_COST]

Question ID: ALT.344_00.000 **Instrument Variable Name:** HOM_COST **QuestionnaireFileName:** Adult CAM

Spanish Text: ¿En promedio, cuánto gasta cada vez que compra medicina homeopática?

*Enter '0' for none.

Allow \$0-1000,R,D

Universe: Sample adults 18+ who have purchased homeopathic medicine in the past year a specific number of times or who don't know the number of times

Skip Instructions: <0-1000,R,D> [goto HOM_EVER]

Question ID: ALT.345_00.000 **Instrument Variable Name:** HOM_EVER **QuestionnaireFileName:** Adult CAM

Spanish Text: ? [F1]

¿Ha visto ALGUNA VEZ un practicante para tratamientos homeopáticos?

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+ who have used homeopathic treatment in the past 12 months

Skip Instructions: <1> [goto HOM_USEM]

<2,R,D> [goto HOM_MAT]

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Question ID: ALT.346_00.000 **Instrument Variable Name:** HOM_USEM **QuestionnaireFileName:** Adult CAM

Spanish Text: ? [F1]

DURANTE LOS ÚLTIMOS 12 MESES, ¿vio a un practicante para tratamientos homeopáticos?

- 1. Sí
- 2. No
- Refused
- Don't know

Universe: Sample adults 18+ who have ever seen a practitioner for homeopathic treatment

Skip Instructions: <1> [goto HOM_PTIM]
<2,R,D,> [goto HOM_MAT]

Question ID: ALT.347_00.000 **Instrument Variable Name:** HOM_PTIM **QuestionnaireFileName:** Adult CAM

Spanish Text: ¿Sabe con exactitud el número de veces durante los últimos 12 meses que vio a un practicante para tratamientos homeopáticos?

- 1. Sí
- 2. No
- Refused
- Don't know

Universe: Sample adults 18+ who have seen a practitioner for homeopathic treatment in the past 12 months

Skip Instructions: <1> [goto HOM_TMNO]
<2,R,D,> [goto HOM_TMCT]

Question ID: ALT.348_00.000 **Instrument Variable Name:** HOM_TMNO **QuestionnaireFileName:** Adult CAM

Spanish Text: DURANTE LOS ÚLTIMOS 12 MESES, ¿cuántas veces vió a un practicante para tratamientos homeopáticos?

*Enter '52' for 52 or more times.

Allow 1-52,R,D

Universe: Sample adults 18+ who know the number of times they have seen a practitioner for homeopathic treatment in the past 12 months

Skip Instructions: <1-52,R,D,> [goto HOM_HIC]

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Question ID: ALT.349_00.000 **Instrument Variable Name:** HOM_TMCT **QuestionnaireFileName:** Adult CAM

Spanish Text: DURANTE LOS ÚLTIMOS 12 MESES, ¿APROXIMADAMENTE cuántas veces vio a un practicante para tratamientos homeopáticos? Diría...

*Read categories below.

1. Solo 1 vez
2. 2-5 veces
3. 6-10 veces
4. 11-15 veces
5. 16-20 veces
6. 21-25 veces
7. Más de 25 veces
- Refused
- Don't know

Universe: Sample adults 18+ who don't know the specific number of times they have seen a practitioner for homeopathic treatment in the past 12 months or refuse the specific number of times

Skip Instructions: <1-7,R,D> [goto HOM_HIC]

Question ID: ALT.350_00.000 **Instrument Variable Name:** HOM_HIC **QuestionnaireFileName:** Adult CAM

Spanish Text: DURANTE LOS ÚLTIMOS 12 MESES, ¿estaba alguno de los costos de ver a un practicante para tratamientos homeopáticos cubierto por seguro de salud?

1. Sí
2. No
- Refused
- Don't know

Universe: Sample adults 18+ who have seen a practitioner for homeopathic treatment in the past 12 months

Skip Instructions: <1> [goto HOM_HICA]
<2,R,D> [goto HOM_HIT]

Question ID: ALT.351_00.000 **Instrument Variable Name:** HOM_HICA **QuestionnaireFileName:** Adult CAM

Spanish Text: DURANTE LOS ÚLTIMOS 12 MESES, ¿cubrió el seguro de salud todo el costo o solo parte del costo para ver a un practicante para tratamientos homeopáticos?

1. Todo el costo
2. Parte del costo
- Refused
- Don't know

Universe: Sample adults 18+ whose visit(s) to a practitioner for homeopathic treatment in the past 12 months were (at least partly) covered by health insurance

Skip Instructions: <1> [goto HOM_MAT]
<2,R,D> [goto HOM_HIT]

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Question ID: ALT.352_00.000 **Instrument Variable Name:** HOM_HIT **QuestionnaireFileName:** Adult CAM

Spanish Text: ¿Sabe la cantidad total que usted pagó en los últimos 12 meses para ver a un practicante para tratamientos homeopáticos [fill1: sin incluir la parte pagada por el seguro]?

- 1. Sí
- 2. No
- Refused
- Don't know

Universe: Sample adults 18+ whose health insurance covered none or some of the cost for homeopathic treatment in the past 12 months

Skip Instructions: <1> [goto HOM_HITS]
<2,R,D> [goto HOM_AVGC]

Question ID: ALT.353_00.000 **Instrument Variable Name:** HOM_HITS **QuestionnaireFileName:** Adult CAM

Spanish Text: ¿Cuánto en total pagó usted en los últimos 12 meses para ver a un practicante para tratamientos homeopáticos [fill1: sin incluir la parte pagada por el seguro]?

Allow \$0-26000,R,D

Universe: Sample adults 18+ who know the amount they paid for homeopathic treatment in the past 12 months

Skip Instructions: <0-26000,R,D> [goto HOM_MAT]

Question ID: ALT.354_00.000 **Instrument Variable Name:** HOM_AVGC **QuestionnaireFileName:** Adult CAM

Spanish Text: ¿Sabe la cantidad promedio que usted pagó en los últimos 12 meses por cada visita para tratamientos homeopáticos [fill 1: sin incluir la parte pagada por el seguro]?

- 1. Sí
- 2. No
- Refused
- Don't know

Universe: Sample adults 18+ who don't know the total amount they paid for homeopathic treatment in the past 12 months

Skip Instructions: <1> [goto HOM_AVGS]
<2,R,D> [goto HOM_MAT]

Question ID: ALT.355_00.000 **Instrument Variable Name:** HOM_AVGS **QuestionnaireFileName:** Adult CAM

Spanish Text: ¿Cuánto pagó en promedio de su propio bolsillo por cada visita a un practicante para tratamientos homeopáticos?

*Enter '0' if no cost or free.

Allow \$0-500,R,D

Universe: Sample adults 18+ who know the average per visit they paid for homeopathic treatment in the past 12 months

Skip Instructions: <0-500,R,D> [goto HOM_MAT]

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Question ID: ALT.356_00.000 **Instrument Variable Name:** HOM_MAT **QuestionnaireFileName:** Adult CAM

Spanish Text: DURANTE LOS ÚLTIMOS 12 MESES, ¿compró un libro de auto-ayuda u otros materiales como un DVD, CD, o Video para aprender algo sobre tratamientos homeopáticos?

- 1. Sí
- 2. No
- Refused
- Don't know

Universe: Sample adults 18+ who have used homeopathy in the past 12 months

Skip Instructions: <1> [goto HOM_MATC]
<2,R,D> [goto MBO_USE]

Question ID: ALT.357_00.000 **Instrument Variable Name:** HOM_MATC **QuestionnaireFileName:** Adult CAM

Spanish Text: ¿Aproximadamente cuánto pagó por estos materiales durante los últimos 12 meses?

*Enter '200' for \$200 or more.

Allow \$0-200,R,D

Universe: Sample adults 18+ who have bought self-help materials for homeopathic treatment in the past 12 months

Skip Instructions: <0-200,R,D> [goto MBO_USE]

Question ID: ALT.367_00.000 **Instrument Variable Name:** MBO_USE **QuestionnaireFileName:** Adult CAM

Spanish Text: ? [F1]

¿Ha utilizado ALGUNA VEZ meditación, ensoñación dirigida, o relajación progresiva?

- 1. Sí
- 2. No
- Refused
- Don't know

Universe: Sample adults 18+

Skip Instructions: <1> [goto MBOE_MAN]
<2,R,D> [goto YTQE_YOG]

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Question ID: ALT.368_00.000 **Instrument Variable Name:** MBOE_MAN **QuestionnaireFileName:** Adult CAM

Spanish Text: ? [F1]

¿Ha utilizado ALGUNA VEZ cualquiera de las siguientes para su propia salud o tratamiento?

Meditación con Mantras, incluyendo Meditación Transcendental®, Respuesta de Relajación, y Meditación Clínica Estandarizada?

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+ who have ever used meditation, guided imagery, or progressive relaxation

Skip Instructions: <1,2,R,D> [goto MBOE_MND]

Question ID: ALT.369_00.000 **Instrument Variable Name:** MBOE_MND **QuestionnaireFileName:** Adult CAM

Spanish Text: ? [F1]

*Read if necessary.

¿Ha utilizado ALGUNA VEZ cualquiera de las siguientes para su propia salud o tratamiento?

Meditación de atención plena, incluyendo Vipásana (vih-PAS-sah-nah), meditación de Budismo Zen, Reducción del Estrés Basado en la Atención Plena, y Terapia Cognitiva Basada en la Atención Plena.

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+ who have ever used meditation, guided imagery, or progressive relaxation

Skip Instructions: <1,2,R,D> [goto MBOE_SPR]

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Question ID: ALT.370_00.000 **Instrument Variable Name:** MBOE_SPR **QuestionnaireFileName:** Adult CAM

Spanish Text: ? [F1]

*Read if necessary.

¿Ha utilizado ALGUNA VEZ cualquiera de las siguientes para su propia salud o tratamiento?

Meditación Espiritual incluyendo Oración Centrante y Meditación Contemplativa

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+ who have ever used meditation, guided imagery, or progressive relaxation

Skip Instructions: <1,2,R,D> [goto MBOE_IMG]

Question ID: ALT.371_00.000 **Instrument Variable Name:** MBOE_IMG **QuestionnaireFileName:** Adult CAM

Spanish Text: ? [F1]

*Read if necessary.

¿Ha utilizado ALGUNA VEZ cualquiera de las siguientes para su propia salud o tratamiento?

Ensoñación dirigida

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+ who have ever used meditation, guided imagery, or progressive relaxation

Skip Instructions: <1,2,R,D> [goto MBOE_PRO]

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Question ID: ALT.372_00.000 **Instrument Variable Name:** MBOE_PRO **QuestionnaireFileName:** Adult CAM

Spanish Text: ? [F1]

*Read if necessary.

¿Ha utilizado ALGUNA VEZ cualquiera de las siguientes para su propia salud o tratamiento?

Relajación progresiva

1. Sí
 2. No
- Refused
-
- Don't know

Universe: Sample adults 18+ who have ever used meditation, guided imagery, or progressive relaxation

Skip Instructions: <1,2,R,D> cycle through MBOU questions for all selected practitioners in MBOE_*:
 if MBOE_MAN=1 [goto MBOU_MAN];
 else if MBOE_MND=1 [goto MBOU_MND];
 else if MBOE_SPR=1 [goto MBOU_SPR];
 else if MBOE_IMG=1 [goto MBOU_IMG];
 else if MBOE_PRO=1 [goto MBOU_PRO];
 <2,R,D>
 If (MBOE_MAN and MBOE_MND and MBOE_SPR and MBOE_IMG)=2,R,D [goto YTQE_YOG]

Question ID: ALT.373_00.000 **Instrument Variable Name:** MBOU_MAN **QuestionnaireFileName:** Adult CAM

Spanish Text: ? [F1]

DURANTE LOS ÚLTIMOS 12 MESES, ¿utilizó...

Meditación con Mantras, incluyendo Meditación Transcendental®, Respuesta de Relajación, y Meditación Clínica Estandarizada?

1. Sí
 2. No
- Refused
-
- Don't know

Universe: Sample adults 18+ who have ever used a mantra meditation

Skip Instructions: <1,2,R,D>
 if MBOE_MND=1 [goto MBOU_MND];
 else if MBOE_SPR=1 [goto MBOU_SPR];
 else if MBOE_IMG=1 [goto MBOU_IMG];
 else if MBOE_PRO=1 [goto MBOU_PRO];
 else if MBOE_MAN =1 and (MBOE_MND and MBOE_SPR and MBOE_IMG and MBOE_MBOE_PRO)=2,R,D, fill value in MBO_MST1, [goto MBO_BRTH];
 <2,R,D>
 If (MBOE_MND and MBOE_SPR and MBOE_IMG and MBOE_MBOE_PRO)=2,R,D [goto YTQE_YOG]

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Question ID: ALT.374_00.000 **Instrument Variable Name:** MBOU_MND **QuestionnaireFileName:** Adult CAM

Spanish Text: ? [F1]

DURANTE LOS ÚLTIMOS 12 MESES, ¿utilizó ...

Meditación de atención plena, incluyendo Vipassana (vih-PAS-sah-nah), meditación de Budismo Zen, Reducción del Estrés Basado en la Atención Plena, y Terapia Cognitiva Basada en la Atención Plena?

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+ who have ever used mindfulness meditation

Skip Instructions: <1,2,R,D>
if MBOE_SPR=1 [goto MBOU_SPR];
else if MBOE_IMG=1 [goto MBOU_IMG];
else if MBOE_PRO=1 [goto MBOU_PRO];
else if MBOE_MND =1 and (MBOE_MAN and MBOE_SPR and MBOE_IMG and MBOE_MBOE_PRO)=2,R,D, fill value in MBO_MST1, [goto MBO_BRTH];
else if two or more of the other MBOU 12 month series answered 1 (yes), [goto MBO_MST1]
<2,R,D>
If (MBOE_MAN and MBOE_SPR and MBOE_IMG and MBOE_MBOE_PRO)=2,R,D [goto YTQE_YOG]
else if at the last cycle though of the MBOU_* variables where ALL=2,R,D, [goto YTQE_YOG]

Question ID: ALT.375_00.000 **Instrument Variable Name:** MBOU_SPR **QuestionnaireFileName:** Adult CAM

Spanish Text: ? [F1]

DURANTE LOS ÚLTIMOS 12 MESES, ¿utilizó ...

Meditación Espiritual incluyendo Oración Centrante y Meditación Contemplativa?

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+ who have ever used spiritual meditation

Skip Instructions: <1,2,R,D> if MBOE_IMG=1 [goto MBOU_IMG];
else if MBOE_PRO=1 [goto MBOU_PRO];
else if MBOE_SPR =1 and (MBOE_MAN and MBOE_MND and MBOE_IMG and MBOE_MBOE_PRO)=2,R,D, fill value in MBO_MST1, [goto MBO_BRTH];
else if two or more of the other MBOU 12 month series answered 1 (yes), [goto MBO_MST1]
<2,R,D>
If (MBOE_MAN and MBOE_MND and MBOE_IMG and MBOE_MBOE_PRO)=2,R,D [goto YTQE_YOG]
else if at the last cycle though of the MBOU_* variables where ALL=2,R,D, [goto YTQE_YOG]

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Question ID: ALT.376_00.000 **Instrument Variable Name:** MBOU_IMG **QuestionnaireFileName:** Adult CAM

Spanish Text: ? [F1]

DURANTE LOS ÚLTIMOS 12 MESES, ¿utilizó ...

Ensoñación dirigida?

- 1. Sí
- 2. No
- Refused
- Don't know

Universe: Sample adults 18+ who have ever used guided imagery

Skip Instructions: <1,2,R,D>
 if MBOE_PRO=1 [goto MBOU_PRO];
 else if MBOE_IMG =1 and (MBOE_MAN and MBOE_MND and MBOE_SPR and MBOE_PRO)=2,R,D, fill
 value in MBO_MST1,
 [goto MBO_BRTH];
 else if two or more of the other MBOU 12 month series answered 1 (yes), [goto MBO_MST1]
 <2,R,D>
 If (MBOE_MAN and MBOE_MND and MBOE_SPR and MBOE_PRO)=2,R,D [goto YTQE_YOG]
 else if at the last cycle though of the MBOU_* variables where ALL=2,R,D, [goto YTQE_YOG]

Question ID: ALT.377_00.000 **Instrument Variable Name:** MBOU_PRO **QuestionnaireFileName:** Adult CAM

Spanish Text: ? [F1]

DURANTE LOS ÚLTIMOS 12 MESES, ¿utilizó ...

Relajación progresiva?

- 1. Sí
- 2. No
- Refused
- Don't know

Universe: Sample adults 18+ who have ever used a progressive relaxation

Skip Instructions: <1,2,R,D> if more than two types selected from: MBOU_MAN, MBOU_MND, MBOU_SPR, MBOU_IMG, and
 MBOU_PRO [goto
 MBO_MST1];
 else if only one selected from (MBOU_PRO or MBOU_MAN or MBOU_MND or MBOU_SPR or
 MBOU_IMG)=1, fill value in
 MBO_MST1, [goto MBO_BRTH];
 <2,R,D>
 If (MBOE_MAN and MBOE_MND and MBOE_SPR and MBOE_IMG)=2,R,D [goto YTQE_YOG];

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Question ID: ALT.378_00.000 **Instrument Variable Name:** MBO_MST1 **QuestionnaireFileName:** Adult CAM

Spanish Text: DURANTE LOS ÚLTIMOS 12 MESES, ¿cuál de los siguientes utilizó con más frecuencia?

*Read categories below.

1. Meditación de mantras
 2. Meditación de atención plena
 3. Meditación espiritual
 4. Enseñación dirigida
 5. Relajación progresiva
- Refused
Don't know

Universe: Sample adults 18+ who have used more than two types of a mind-body therapy in the past 12 months

Skip Instructions: <1-5>
 If only one MBOU_*=1 fill value in MBO_MST1 and don't ask question [goto MBO_BRTH];
 else [goto MBO_BRTH]
 <R,D> [goto YTQE_YOG];

Question ID: ALT.379_00.000 **Instrument Variable Name:** MBO_BRTH **QuestionnaireFileName:** Adult CAM

Spanish Text: ?[F1]

¿Hizo ejercicios de respiración como parte de la [fill1]? Ejercicios de respiración pueden implicar el control activo de la forma en que el aire se respira, o la rapidéz o profundidad de la respiración.

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+ who have used a mind-body therapy in the past 12 months/used one the most in the past 12 months

Skip Instructions: <1,2,R,D> [goto MBO_USEM]

Question ID: ALT.380_00.000 **Instrument Variable Name:** MBO_USEM **QuestionnaireFileName:** Adult CAM

Spanish Text: ? [F1]

DURANTE LOS ÚLTIMOS 12 MESES, ¿vio a un practicante o asistió a una clase para [fill1]?

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+ who have used a mind-body therapy in the past 12 months

Skip Instructions: <1> [goto MBO_PTIM]
 <2,R,D> [goto MBO_MAT]

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Question ID: ALT.381_00.000 **Instrument Variable Name:** MBO_PTIM **QuestionnaireFileName:** Adult CAM

Spanish Text: ¿Sabe con exactitud el número de veces durante los últimos 12 meses que vio a un practicante o asistió a una clase para [fill 1]?

- 1. Sí
- 2. No
- Refused
- Don't know

Universe: Sample adults 18+ who have seen a practitioner for a mind-body therapy in the past 12 months

Skip Instructions: <1> [goto MBO_TMNO]
<2,R,D> [goto MBO_TMCT]

Question ID: ALT.382_00.000 **Instrument Variable Name:** MBO_TMNO **QuestionnaireFileName:** Adult CAM

Spanish Text: DURANTE LOS ÚLTIMOS 12 MESES, ¿cuántas veces vio a un practicante o asistió a una clase para [fill1]? Diría...

*Enter '52' for 52 or more times.

Allow 1-52,R,D

Universe: Sample adults 18+ who know the number of times they have seen a practitioner for a mind-body therapy in the past 12 months

Skip Instructions: <1-52,R,D> [goto MBO_HIC]

Question ID: ALT.383_00.000 **Instrument Variable Name:** MBO_TMCT **QuestionnaireFileName:** Adult CAM

Spanish Text: DURANTE LOS ÚLTIMOS 12 MESES, ¿APROXIMADAMENTE cuántas veces vio a practicantes o asistió a una clase para [fill1]? Diría...

*Read categories below.

- 1. Solo 1 vez
- 2. 2-5 veces
- 3. 6-10 veces
- 4. 11-15 veces
- 5. 16-20 veces
- 6. 21-25 veces
- 7. Más de 25 veces
- Refused
- Don't know

Universe: Sample adults 18+ who don't know the specific number of times they have seen a practitioner for a mind-body therapy in the past 12 months or refuse the specific number of times

Skip Instructions: <1-7,R,D> [goto MBO_HIC]

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Question ID: ALT.384_00.000 **Instrument Variable Name:** MBO_HIC **QuestionnaireFileName:** Adult CAM

Spanish Text: DURANTE LOS ÚLTIMOS 12 MESES, ¿estaba alguno de los costos de ver a un practicante o asistir a clases para [fill1] cubierto por seguro de salud?

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+ who have seen a practitioner for a mind-body therapy in the past 12 months

Skip Instructions: <1> [goto MBO_HICA]
<2,R,D> [goto MBO_HIT]

Question ID: ALT.385_00.000 **Instrument Variable Name:** MBO_HICA **QuestionnaireFileName:** Adult CAM

Spanish Text: DURANTE LOS ÚLTIMOS 12 MESES, ¿cubrió el seguro de salud todo el costo o solo parte del costo para ver a un practicante o asistir a una clase para [fill1]?

1. Todo el costo
 2. Parte del costo
- Refused
Don't know

Universe: Sample adults 18+ whose visit(s) to a practitioner for a mind-body therapy in the past 12 months were (at least partly) covered by health insurance

Skip Instructions: <1> [goto MBO_MAT]
<2,R,D> [goto MBO_HIT]

Question ID: ALT.386_00.000 **Instrument Variable Name:** MBO_HIT **QuestionnaireFileName:** Adult CAM

Spanish Text: ¿Sabe la cantidad total que pagó en los últimos 12 meses para ver a un practicante o asistir a una clase de [fill1] [fill2: sin incluir la parte pagada por el seguro]?

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+ whose health insurance covered none or some of the cost for a mind-body therapy in the past 12 months

Skip Instructions: <1> [goto MBO_HITS]
<2,R,D> [goto MBO_AVGC]

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Question ID: ALT.387_00.000 **Instrument Variable Name:** MBO_HITS **QuestionnaireFileName:** Adult CAM

Spanish Text: ¿Cuánto en total pagó durante los últimos 12 meses para ver a un practicante o asistir a una clase para [fill1][fill1: sin incluir la parte pagada por el seguro]?

*Enter '0' for no cost or free.

Allow \$0-26000,R,D

Universe: Sample adults 18+ who know the amount they paid for a mind-body therapy in the past 12 months

Skip Instructions: <0-26000,R,D> [goto MBO_MAT]

Question ID: ALT.388_00.000 **Instrument Variable Name:** MBO_AVGC **QuestionnaireFileName:** Adult CAM

Spanish Text: ¿Sabe la cantidad en promedio que usted pagó en los últimos 12 meses por cada visita o clase para [fill1] [fill2: sin incluir la parte pagada por el seguro]?

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+ who don't know the total amount they paid for a mind-body therapy in the past 12 months

Skip Instructions: <1> [goto MBO_AVGS]
<2,R,D> [goto MBO_MAT]

Question ID: ALT.389_00.000 **Instrument Variable Name:** MBO_AVGS **QuestionnaireFileName:** Adult CAM

Spanish Text: ¿Cuánto pagó en promedio de su propio bolsillo por cada visita a un practicante o clase para [fill 1]?

*Enter '0' if no cost or free.

Allow \$0-500,R,D

Universe: Sample adults 18+ who know the average per visit they paid for a mind-body therapy in the past 12 months

Skip Instructions: <0-500,R,D> [goto MBO_MAT]

Question ID: ALT.390_00.000 **Instrument Variable Name:** MBO_MAT **QuestionnaireFileName:** Adult CAM

Spanish Text: DURANTE LOS ÚLTIMOS 12 MESES, ¿compró un libro de auto-ayuda u otros materiales como un DVD, CD, o Video para aprender algo sobre la [fill 1]?

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+ who have used a mind-body therapy in the past 12 months

Skip Instructions: <1> [goto MBO_MATC]
<2,R,D> [goto YTQE_YOG]

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Question ID: ALT.391_00.000 **Instrument Variable Name:** MBO_MATC **QuestionnaireFileName:** Adult CAM

Spanish Text: ¿Aproximadamente cuánto pagó por estos materiales durante los últimos 12 meses?

 *Enter '200' for \$200 or more.

 Allow \$0-200,R,D

Universe: Sample adults 18+ who have bought self-help materials for a mind-body therapy in the past 12 months

Skip Instructions: <0-200,R,D> [goto YTQE_YOG]

Question ID: ALT.401_00.000 **Instrument Variable Name:** YTQE_YOG **QuestionnaireFileName:** Adult CAM

Spanish Text: ? [F1]

 ¿Ha practicado usted ALGUNA VEZ cualquiera de los siguientes? Por favor responde si o no a cada uno.

 ...Yoga?

1. Si
 2. No
- Refused
Don't know

Universe: Sample adults 18+

Skip Instructions: <1,2,R,D> [goto YTQE_TAI]

Question ID: ALT.402_00.000 **Instrument Variable Name:** YTQE_TAI **QuestionnaireFileName:** Adult CAM

Spanish Text: ? [F1]

 *Read if necessary.

 ¿Ha practicado ALGUNA VEZ cualquiera de los siguientes?

 ...Tai Chi?

1. Si
 2. No
- Refused
Don't know

Universe: Sample adults 18+

Skip Instructions: <1,2,R,D> [goto YTQE_QIG]

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Question ID: ALT.403_00.000 **Instrument Variable Name:** YTQE_QIG **QuestionnaireFileName:** Adult CAM

Spanish Text: ? [F1]

*Read if necessary.

¿Ha practicado ALGUNA VEZ cualquiera de los siguientes?

...Qi Gong?

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+

Skip Instructions: if (YTQE_YOG or YTQE_TAI or YTQE_QIG)=1 cycle through applicable YTQU questions;
<1,2,R,D>
if YTQE_YOG=1 [goto YTQU_YOG] or
if YTQE_TAI=1 [goto YTQU_TAI] or
if YTQE_QIG=1 [goto YTQU_QIG]
Else if <2,R,D> (YTQE_YOG and YTQE_TAI and YTQE_QIG) in (2,R,D) [goto DITE_VEG]

Question ID: ALT.404_00.000 **Instrument Variable Name:** YTQU_YOG **QuestionnaireFileName:** Adult CAM

Spanish Text: ? [F1]

¿DURANTE LOS ÚLTIMOS 12 MESES, practicó Yoga para usted mismo(a)?

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+ who have ever used Yoga

Skip Instructions: <1,2,R,D>
If YTQE_TAI=1 [goto YTQU_TAI]
else if YTQE_TAI =2 and YTQE_QIG=1 [goto YTQU_QIG]
<1> If (YTQE_TAI and YTQE_QIG)=2 [goto YTQ_BTHY]
Else <2,R,D> and (YTQE_TAI and YTQE_QIG) in (2,R,D) [goto DITE_VEG]

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Question ID: ALT.405_00.000 **Instrument Variable Name:** YTQU_TAI **QuestionnaireFileName:** Adult CAM

Spanish Text: ? [F1]

¿DURANTE LOS ÚLTIMOS 12 MESES, practicó Tai Chi para usted mismo(a)?

- 1. Sí
- 2. No
- Refused
- Don't know

Universe: Sample adults 18+ who have ever used Tai Chi

Skip Instructions: <1,2,R,D> if YTQE_QIG=1 [goto YTQU_QIG];
 else if (YTQE_QIG=2 and YTQU_YOG=1) [goto YTD_BTHY];
 else if (YTQU_YOG and YTQU_TAI and YTQE_QIG) in (2,R,D) [goto DITE_VEG]
 <1> if (YTQE_QIG and YTQU_YOG)=2 [goto YTD_BTHT]

Question ID: ALT.406_00.000 **Instrument Variable Name:** YTQU_QIG **QuestionnaireFileName:** Adult CAM

Spanish Text: ? [F1]

¿DURANTE LOS ÚLTIMOS 12 MESES, practicó Qi Gong para usted mismo(a)?

- 1. Sí
- 2. No
- Refused
- Don't know

Universe: Sample adults 18+ who have ever used Qi Gong

Skip Instructions: <1,2,R,D>
 if YTQU_YOG=1 [goto YTD_BTHY]
 Else if YTQU_TAI=1 and YTQU_YOG in (2,R,D) [goto YTD_BTHT]
 Else if YTQU_QIG=1 and (YTQU_YOG and YTQU_TAI) in (2,R,D) [goto YTD_BTHQ]
 <2,R,D> (YTQU_YOG and YTQU_TAI) in (2,R,D) [goto DITE_VEG]

Question ID: ALT.407_00.010 **Instrument Variable Name:** YTD_BTHY **QuestionnaireFileName:** Adult CAM

Spanish Text: ? [F1]

¿Hizo ejercicios de respiración como parte de Yoga? Ejercicios de respiración pueden implicar el control activo de la forma en que el aire se respira, o la rapidéz o profundidad de la respiración.

- 1. Sí
- 2. No
- Refused
- Don't know

Universe: Sample adults 18+ who have used Yoga in the past 12 months

Skip Instructions: <1,2,R,D> if YTQU_TAI =1 [goto YTD_BTHT];
 Else if YTQU_TAI in (2,R,D) and YTQU_QIG=1 [goto YTD_BTHQ]
 Else if YTQU_YOG=1 and (YTQU_TAI and YTQU_QIG) in (2,R,D) [goto YTD_MEDY]

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Question ID: ALT.408_00.020 **Instrument Variable Name:** YTQ_BTHT **QuestionnaireFileName:** Adult CAM

Spanish Text: ? [F1]

¿Hizo ejercicios de respiración como parte de Tai Chi? Ejercicios de respiración pueden implicar el control activo de la forma en que el aire se respira, o la rapidéz o profundidad de la respiración.

1. Sí
2. No
- Refused
- Don't know

Universe: Sample adults 18+ who have used Tai Chi in the past 12 months

Skip Instructions: <1,2,R,D> if YTQU_QIG =1 [goto YTQ_BTHQ];
 Else if YTQU_YOG=1 and YTQU_QIG in (2,R,D) [goto YTQ_MEDY]
 Else if (YTQU_YOG and YTQU_QIG) in (2,R,D) [goto YTQ_MEDT]

Question ID: ALT.409_00.030 **Instrument Variable Name:** YTQ_BTHQ **QuestionnaireFileName:** Adult CAM

Spanish Text: ? [F1]

¿Hizo ejercicios de respiración como parte de Qi Gong? Ejercicios de respiración pueden implicar el control activo de la forma en que el aire se respira, o la rapidéz o profundidad de la respiración.

1. Sí
2. No
- Refused
- Don't know

Universe: Sample adults 18+ who have used Qi Gong in the past 12 months

Skip Instructions: <1,2,R,D>
 If YTQU_YOG =1 [goto YTQ_MEDY]
 Else If YTQU_TAI=1 [goto YTQ_MEDT]
 Else if YTQU_QIG=1 [goto YTQ_MEDQ]

Question ID: ALT.410_00.010 **Instrument Variable Name:** YTQ_MEDY **QuestionnaireFileName:** Adult CAM

Spanish Text: ? [F1]

¿Hizo meditación como parte del Yoga?

1. Sí
2. No
- Refused
- Don't know

Universe: Sample adults 18+ who have used Yoga in the past 12 months

Skip Instructions: <1,2,R,D>
 If YTQU_TAI=1 [goto YTQ_MEDT]
 Else if YTQU_QIG=1 & (YTQU_TAI) in (2,R,D) [goto YTQ_MEDQ]
 Else if (YTQ_BTHY or YTQ_MEDY)=1 and (YTQ_BTHT & YTQ_BTHQ) in (2,R,D,''))
 fill answer in YTQ_MOST([goto YTQ_USEM]
 <2,R,D> YTQ_BTHY in (2,R,D) and (YTQ_BTHT & YTQ_BTHQ) in (2,R,D,'')) [goto DIT_VEG]

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Question ID: ALT.411_00.020 **Instrument Variable Name:** YTQ_MEDT **QuestionnaireFileName:** Adult CAM

Spanish Text: ? [F1]

¿Hizo meditación como parte de Tai Chi?

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+ who have used Tai Chi in the past 12 months

Skip Instructions: <1,2,R,D>
 If YTQU_QIG=1 [goto YTQ_MEDQ]
 else If YTQ_CNT ge 2 [goto YTQ_MOST];
 else if YTQ_CNT=1, fill answer in YTQ_MOST([goto YTQ_USEM]
 <2,R,D> (YTQ_BTHT and YTQ_BTHY and YTQ_BTHQ and YTQ_MEDY) in (2,R,D,'')) [goto DIT_VEG]

Question ID: ALT.412_00.030 **Instrument Variable Name:** YTQ_MEDQ **QuestionnaireFileName:** Adult CAM

Spanish Text: ? [F1]

¿Hizo meditación como parte de Qi Gong?

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+ who have used Qi Gong in the past 12 months

Skip Instructions: <1,2,R,D>
 If YTQ_CNT ge 2 [goto YTQ_MOST];
 else if YTQ_CNT=1, fill answer in YTQ_MOST([goto YTQ_USEM]
 <2,R,D> (YTQ_BTHY and YTQ_BTHT and YTQ_BTHQ and YTQ_MEDY and YTQ_MEDT) in (2,R,D,''))
 [goto DIT_VEG]

Question ID: ALT.413_00.000 **Instrument Variable Name:** YTQ_MOST **QuestionnaireFileName:** Adult CAM

Spanish Text: DURANTE LOS ÚLTIMOS 12 MESES, ¿cuál ejercicio practicó usted más frecuentemente?

*Read categories below.

1. Yoga
 2. Tai-Chi
 3. Qi Gong
- Refused
Don't know

Universe: Sample adults 18+ who have used more than one type of exercise in the past 12 months and have used breathing or meditation with exercise

Skip Instructions: <1-3> [goto YTQ_USEM]
 <R,D> [goto DITE_VEG]

2012 NHIS Spanish Questionnaire - Adult CAM
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Question ID: ALT.414_00.000 **Instrument Variable Name:** YTQ_USEM **QuestionnaireFileName:** Adult CAM

Spanish Text: DURANTE LOS ÚLTIMOS 12 MESES, ¿asistió a una clase de [fill1: Yoga/Tai Chi/Qi Gong] o recibió entrenamiento formal de algún tipo? Asistir solo una sesión no cuenta.

- 1. Sí
- 2. No
- Refused
- Don't know

Universe: Sample adults 18+ who have used an exercise in the past 12 months

Skip Instructions: <1> [goto YTQ_PTIM]
<2,R,D> [goto YTQ_MAT]

Question ID: ALT.415_00.000 **Instrument Variable Name:** YTQ_PTIM **QuestionnaireFileName:** Adult CAM

Spanish Text: ¿Sabe con exactitud el número de veces durante los últimos 12 meses que usted vio a un instructor de [fill1: Yoga/Tai Chi/Qi Gong]?

- 1. Sí
- 2. No
- Refused
- Don't know

Universe: Sample adults 18+ who have seen a practitioner for an exercise in the past 12 months

Skip Instructions: <1> [goto YTQ_TMNO]
<2,R,D> [goto YTQ_TMCT]

Question ID: ALT.416_00.000 **Instrument Variable Name:** YTQ_TMNO **QuestionnaireFileName:** Adult CAM

Spanish Text: DURANTE LOS ÚLTIMOS 12 MESES, ¿cuántas veces vio a un instructor para [fill1: Yoga/Tai Chi/Qi Gong]?

*Enter '52' for 52 or more times.

Allow 1-52,R,D

Universe: Sample adults 18+ who know the number of times they have seen a practitioner for an exercise in the past 12 months

Skip Instructions: <1-52,R,D> [goto YTQ_HIC]

2012 NHIS Spanish Questionnaire - Adult CAM
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Question ID: ALT.417_00.000 **Instrument Variable Name:** YTQ_TMCT **QuestionnaireFileName:** Adult CAM

Spanish Text: DURANTE LOS ÚLTIMOS 12 MESES, ¿APROXIMADAMENTE cuántas veces vio a un instructor para [fill1: Yoga/Tai Chi/Qi Gong]? Diría...

*Read categories below.

1. Solo 1 vez
2. 2-5 veces
3. 6-10 veces
4. 11-15 veces
5. 16-20 veces
6. 21-25 veces
7. Más de 25 veces
- Refused
- Don't know

Universe: Sample adults 18+ who don't know the specific number of times they have seen a practitioner for an exercise in the past 12 months or refuse the specific number of times

Skip Instructions: <1-7,R,D> [goto YTQ_HIC]

Question ID: ALT.418_00.000 **Instrument Variable Name:** YTQ_HIC **QuestionnaireFileName:** Adult CAM

Spanish Text: DURANTE LOS ÚLTIMOS 12 MESES, ¿estaba alguno de los costos de ver a un instructor para [fill1: Yoga/Tai Chi/Qi Gong] cubierto por seguro de salud?

1. Sí
2. No
- Refused
- Don't know

Universe: Sample adults 18+ who have seen a practitioner for an exercise therapy in the past 12 months

Skip Instructions: <1> [goto YTQ_HICA]
<2,R,D> [goto YTQ_HIT]

Question ID: ALT.419_00.000 **Instrument Variable Name:** YTQ_HICA **QuestionnaireFileName:** Adult CAM

Spanish Text: DURANTE LOS ÚLTIMOS 12 MESES, ¿cubrió el seguro de salud todo el costo o solo parte del costo para que usted viera a un instructor para [fill1: Yoga/Tai Chi/Qi Gong] ?

1. Todo el costo
2. Parte del costo
- Refused
- Don't know

Universe: Sample adults 18+ whose visit(s) to a practitioner for an exercise in the past 12 months were (at least partly) covered by health insurance

Skip Instructions: <1> [goto YTQ_MAT]
<2,R,D> [goto YTQ_HIT]

2012 NHIS Spanish Questionnaire - Adult CAM
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Question ID: ALT.420_00.000 **Instrument Variable Name:** YTQ_HIT **QuestionnaireFileName:** Adult CAM

Spanish Text: ¿Sabe la cantidad total que usted pagó en los últimos 12 meses para ver a un instructor para [fill1: Yoga/Tai Chi/Qi Gong] [fill2: sin incluir la parte pagada por el seguro]?

- 1. Sí
- 2. No
- Refused
- Don't know

Universe: Sample adults 18+ whose health insurance covered none or some of the cost for an exercise in the past 12 months

Skip Instructions: <1> [goto YTQ_HITS]
<2,R,D> [goto YTQ_AVGC]

Question ID: ALT.421_00.000 **Instrument Variable Name:** YTQ_HITS **QuestionnaireFileName:** Adult CAM

Spanish Text: ¿Cuánto en total pagó usted en los últimos 12 meses para ver a un instructor de [fill1: Yoga/Tai Chi/Qi Gong] [fill 2: sin incluir la parte pagada por el seguro]?

*Enter '0' for no cost or free.

Allow \$0-26000,R,D

Universe: Sample adults 18+ who know the amount they paid for an exercise in the past 12 months

Skip Instructions: <0-26000,R,D> [goto YTQ_MAT]

Question ID: ALT.422_00.000 **Instrument Variable Name:** YTQ_AVGC **QuestionnaireFileName:** Adult CAM

Spanish Text: ¿Sabe la cantidad en promedio que usted pagó en los últimos 12 meses por cada visita para la/el [fill1: Yoga/Tai Chi/Qi Gong] [fill2: sin incluir la parte pagada por el seguro]?

- 1. Sí
- 2. No
- Refused
- Don't know

Universe: Sample adults 18+ who don't know the total amount they paid for an exercise in the past 12 months

Skip Instructions: <1> [goto YTQ_AVGS]
<2,R,D> [goto YTQ_MAT]

Question ID: ALT.423_00.000 **Instrument Variable Name:** YTQ_AVGS **QuestionnaireFileName:** Adult CAM

Spanish Text: ¿Cuánto pagó en promedio de su propio bolsillo por cada visita a un instructor de [fill1: Yoga/Tai Chi/Qi Gong]?

Enter '0' if no cost or free

Allow \$0-500,R,D

Universe: Sample adults 18+ who know the average per visit they paid for an exercise in the past 12 months

Skip Instructions: <0-500,R,D> [goto YTQ_MAT]

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Question ID: ALT.424_00.000 **Instrument Variable Name:** YTQ_MAT **QuestionnaireFileName:** Adult CAM

Spanish Text: DURANTE LOS ÚLTIMOS 12 MESES, ¿compró un libro de auto-ayuda u otros materiales como un DVD, CD, o Video para aprender algo sobre el [fill1: Yoga/Tai Chi/Qi Gong]?

- 1. Sí
- 2. No
- Refused
- Don't know

Universe: Sample adults 18+ who have used an exercise in the past 12 months

Skip Instructions: <1> [goto YTQ_MATC]
<2,R,D> [goto DITE_VEG]

Question ID: ALT.425_00.000 **Instrument Variable Name:** YTQ_MATC **QuestionnaireFileName:** Adult CAM

Spanish Text: ¿Aproximadamente cuánto pagó por estos materiales durante los últimos 12 meses?

*Enter '200' for \$200 or more.
Allow \$0-200,R,D

Universe: Sample adults 18+ who have bought self-help materials for an exercise in the past 12 months

Skip Instructions: <0-200,R,D> [goto DITE_VEG]

Question ID: ALT.435_00.000 **Instrument Variable Name:** DITE_VEG **QuestionnaireFileName:** Adult CAM

Spanish Text: ? [F1]

¿Ha utilizado ALGUNA VEZ cualquiera de las siguientes dietas especiales por dos semanas o más por razones de salud?

Vegetariana, incluyendo Vegana

- 1. Sí
- 2. No
- Refused
- Don't know

Universe: Sample adults 18+

Skip Instructions: <1,2,R,D> [goto DITEVER2]

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Question ID: ALT.436_00.000 **Instrument Variable Name:** DITEVER2 **QuestionnaireFileName:** Adult CAM

Spanish Text: ? [F1]

¿Ha utilizado ALGUNA VEZ cualquiera de las siguientes dietas especiales por dos semanas o más por razones de salud?

Macrobiótica

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+

Skip Instructions: <1,2,R,D> [goto DITEVER3]

Question ID: ALT.437_00.000 **Instrument Variable Name:** DITEVER3 **QuestionnaireFileName:** Adult CAM

Spanish Text: ? [F1]

¿Ha utilizado ALGUNA VEZ cualquiera de las siguientes dietas especiales por dos semanas o más por razones de salud?

Atkins

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+

Skip Instructions: <1,2,R,D> [goto DITEVER4]

Question ID: ALT.438_00.000 **Instrument Variable Name:** DITEVER4 **QuestionnaireFileName:** Adult CAM

Spanish Text: ? [F1]

¿Ha utilizado ALGUNA VEZ cualquiera de las siguientes dietas especiales por dos semanas o más por razones de salud?

Pritikin

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+

Skip Instructions: <1,2,R,D> [goto DITEVER5]

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Question ID: ALT.439_00.000 **Instrument Variable Name:** DITEVER5 **QuestionnaireFileName:** Adult CAM

Spanish Text: ? [F1]

¿Ha utilizado ALGUNA VEZ cualquiera de las siguientes dietas especiales por dos semanas o más por razones de salud?

Ornish

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+

Skip Instructions: <1,2,R,D> if DITE_VEG=1 or DITEVER2=1 or DITEVER3=1 or DITEVER4=1 or DITEVER5=1, cycle through applicable DIT_USM1, DIT_USM2, DIT_USM3, DIT_USM4, DIT_USM5;

else if (DITE_VEG and DITEVER1-DITEVER5) in (2,R,D) [goto MOVE_FLD]

Question ID: ALT.440_00.000 **Instrument Variable Name:** DIT_USM1 **QuestionnaireFileName:** Adult CAM

Spanish Text: ? [F1]

DURANTE LOS ÚLTIMOS 12 MESES, ¿utilizó una dieta vegetariana, incluyendo la dieta Vegana por dos semanas o más por razones de salud?

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+ who have ever used special diets-vegetarian, including vegan

Skip Instructions: <1,2,R,D>
 If DITEVER2 =1 [goto DIT_USM2]
 else If DITEVER3 =1 [goto DIT_USM3];
 else if DITEVER4=1 [goto DIT_USM4]
 else if DITEVER5=1 [goto DIT_USM5]
 <1> if (DITEVER3 and DITEVER4 and DITEVER5) in (2,R,D) [goto DIT_WGT1];
 Else if <2,R,D,' '> if (DITEVER3 and DITEVER4 and DITEVER5) in (2,R,D) [goto MOVE_FLD]

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Question ID: ALT.441_00.000 **Instrument Variable Name:** DIT_USM2 **QuestionnaireFileName:** Adult CAM

Spanish Text: ? [F1]

DURANTE LOS ÚLTIMOS 12 MESES, ¿utilizó una dieta macrobiótica por dos semanas o más por razones de salud?

1. Sí
 2. No
- Refused
-
- Don't know

Universe: Sample adults 18+ who have ever used special diets-macrobiotic

Skip Instructions: <1,2,R,D>
 If DITEVER3 =1 [goto DIT_USM3];
 else if DITEVER4=1 [goto DIT_USM4]
 else if DITEVER5=1 [goto DIT_USM5]
 <1> if (DIT_USM1=1) and (DITEVER3 and DITEVER4 and DITEVER5) in (2,R,D) [goto DIT_WGT1];
 Else if <2,R,D,' '> if (DITEVER3 and DITEVER4 and DITEVER5) in (2,R,D) and ((DIT_USM1) ne 1) [goto MOVE_FLD]

Question ID: ALT.442_00.000 **Instrument Variable Name:** DIT_USM3 **QuestionnaireFileName:** Adult CAM

Spanish Text: ? [F1]

DURANTE LOS ÚLTIMOS 12 MESES, ¿utilizó una dieta Atkins por dos semanas o más por razones de salud?

1. Sí
 2. No
- Refused
-
- Don't know

Universe: Sample adults 18+ who have ever used special diets-Atkins

Skip Instructions: <1,2,R,D>
 If DITEVER4 =1 [goto DIT_USM4];
 else if DITEVER5=1 [goto DIT_USM5]
 <1> if (DIT_USM1=1 or DIT_USM2=1) and (DITEVER4 and DITEVER5) in (2,R,D) [goto DIT_WGT1];
 Else if <2,R,D,' '> if (DITEVER4 and DITEVER5) in (2,R,D) and (DIT_USM1 and DIT_USM2) ne 1) [goto MOVE_FLD]

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Question ID: ALT.443_00.000 **Instrument Variable Name:** DIT_USM4 **QuestionnaireFileName:** Adult CAM

Spanish Text: ? [F1]

DURANTE LOS ÚLTIMOS 12 MESES, ¿utilizó una dieta Pritikin por dos semanas o más por razones de salud?

- 1. Sí
- 2. No
- Refused
- Don't know

Universe: Sample adults 18+ who have ever used special diets-Pritikin

Skip Instructions: <1,2,R,D>
 If DITEVER5 =1 [goto DIT_USM5]
 Else if (DIT_USM1=1 or DIT_USM2=1 or DIT_USM3=1 or DIT_USM4=1) [goto DIT_WGT1];
 Else <2,R,D, ' '> if (DITEVER5) in (2,R,D)) and ((DIT_USM1 and DIT_USM2 and DIT_USM3) ne 1) [goto MOVE_FLD]

Question ID: ALT.444_00.000 **Instrument Variable Name:** DIT_USM5 **QuestionnaireFileName:** Adult CAM

Spanish Text: ? [F1]

DURANTE LOS ÚLTIMOS 12 MESES, ¿utilizó una dieta Ornish por dos semanas o más por razones de salud?

- 1. Sí
- 2. No
- Refused
- Don't know

Universe: Sample adults 18+ who have ever used special diets-Ornish

Skip Instructions: <1,2,R,D>
 if (DIT_USM1 or DIT_USM2 or DIT_USM3 or DIT_USM4 or DIT_USM5)=1 [goto DIT_WGT1];
 Else if <2,R,D, ' '> to all DIT_USM_* [goto MOVE_FLD]

Question ID: ALT.445_00.000 **Instrument Variable Name:** DIT_WGT1 **QuestionnaireFileName:** Adult CAM

Spanish Text: ¿Utilizó dietas especiales para el control o pérdida de peso?

- 1. Sí
- 2. No
- Refused
- Don't know

Universe: Sample adults 18+ who have used special diets in the past 12 months

Skip Instructions: <1,2,R,D> [goto DIT_PRE]

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Question ID: ALT.446_00.000 **Instrument Variable Name:** DIT_PRE **QuestionnaireFileName:** Adult CAM

Spanish Text: ? [F1]

¿Ha visto ALGUNA VEZ a un practicante para dietas especiales?

- 1. Sí
- 2. No
- Refused
- Don't know

Universe: Sample adults 18+ who have used special diets in the past 12 months

Skip Instructions: <1> [goto DIT_PRU]
<2,R,D> [goto DIT_MAT]

Question ID: ALT.447_00.000 **Instrument Variable Name:** DIT_PRU **QuestionnaireFileName:** Adult CAM

Spanish Text: ? [F1]

DURANTE LOS ÚLTIMOS 12 MESES, ¿vio a un practicante para dietas especiales?

- 1. Sí
- 2. No
- Refused
- Don't know

Universe: Sample adults 18+ who have ever seen a practitioner for special diets

Skip Instructions: <1> [goto DIT_PTIM]
<2,R,D> [goto DIT_MAT]

Question ID: ALT.448_00.000 **Instrument Variable Name:** DIT_PTIM **QuestionnaireFileName:** Adult CAM

Spanish Text: ¿Sabe con exactitud el número de veces durante los últimos 12 meses que vio a un practicante para dietas especiales?

- 1. Sí
- 2. No
- Refused
- Don't know

Universe: Sample adults 18+ who have seen a practitioner for special diets in the past 12 months

Skip Instructions: <1> [goto DIT_TMNO]
<2,R,D> [goto DIT_TMCT]

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Question ID: ALT.449_00.000 **Instrument Variable Name:** DIT_TMNO **QuestionnaireFileName:** Adult CAM

Spanish Text: DURANTE LOS ÚLTIMOS 12 MESES, ¿cuántas veces vio a un practicante para dietas especiales?

*Enter '52' for 52 or more times.

Allow 1-52,R,D

Universe: Sample adults 18+ who know the number of times they have seen a practitioner for special diets in the past 12 months

Skip Instructions: <1-52,R,D> [goto DIT_HIC]

Question ID: ALT.450_00.000 **Instrument Variable Name:** DIT_TMCT **QuestionnaireFileName:** Adult CAM

Spanish Text: DURANTE LOS ÚLTIMOS 12 MESES, ¿APROXIMADAMENTE cuántas veces vio a un practicante para dietas especiales? Diría...

*Read categories below.

1. Solo 1 vez
 2. 2-5 veces
 3. 6-10 veces
 4. 11-15 veces
 5. 16-20 veces
 6. 21-25 veces
 7. Más de 25 veces
- Refused
Don't know

Universe: Sample adults 18+ who don't know the specific number of times they have seen a practitioner for special diets in the past 12 months or refuse the specific number of times

Skip Instructions: <1-7,R,D> [goto DIT_HIC]

Question ID: ALT.451_00.000 **Instrument Variable Name:** DIT_HIC **QuestionnaireFileName:** Adult CAM

Spanish Text: DURANTE LOS ÚLTIMOS 12 MESES, ¿estaba alguno de los costos de ver a un practicante para dietas especiales cubierto por seguro de salud?

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+ who have seen a practitioner for special diets in the past 12 months

Skip Instructions: <1> [goto DIT_HICA]
<2,R,D> [goto DIT_HIT]

2012 NHIS Spanish Questionnaire - Adult CAM
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Question ID: ALT.452_00.000 **Instrument Variable Name:** DIT_HICA **QuestionnaireFileName:** Adult CAM

Spanish Text: DURANTE LOS ÚLTIMOS 12 MESES, ¿cubrió el seguro de salud todo el costo o solo parte del costo para ver a un practicante para dietas especiales?

- 1. Todo el costo
- 2. Parte del costo
- Refused
- Don't know

Universe: Sample adults 18+ whose visit(s) to a practitioner for special diets in the past 12 months were (at least partly) covered by health insurance

Skip Instructions: <1> [goto DIT_MAT]
<2,R,D> [goto DIT_HIT]

Question ID: ALT.453_00.000 **Instrument Variable Name:** DIT_HIT **QuestionnaireFileName:** Adult CAM

Spanish Text: ¿Sabe la cantidad total que usted pagó en los últimos 12 meses por ver a un practicante para dietas especiales [fill1: sin incluir la parte pagada por el seguro]?

- 1. Sí
- 2. No
- Refused
- Don't know

Universe: Sample adults 18+ whose health insurance covered none or some of the cost for special diets in the past 12 months

Skip Instructions: <1> [goto DIT_HITS]
<2,R,D> [goto DIT_AVGC]

Question ID: ALT.454_00.000 **Instrument Variable Name:** DIT_HITS **QuestionnaireFileName:** Adult CAM

Spanish Text: ¿Cuánto en total pagó usted en los últimos 12 meses por ver a un practicante para dietas especiales [fill 1: sin incluir la parte pagada por el seguro]?

*Enter '0' for no cost or free.

Allow \$0-26000,R,D

Universe: Sample adults 18+ who know the amount they paid for special diets in the past 12 months

Skip Instructions: <0-26000,R,D> [goto DIT_MAT]

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Question ID: ALT.455_00.000 **Instrument Variable Name:** DIT_AVGC **QuestionnaireFileName:** Adult CAM

Spanish Text: ¿Sabe la cantidad promedio que usted pagó en los últimos 12 meses por cada visita para dietas especiales [fill 1: sin incluir la parte pagada por el seguro]?

- 1. Sí
- 2. No
- Refused
- Don't know

Universe: Sample adults 18+ who don't know the total amount they paid for special diets in the past 12 months

Skip Instructions: <1> [goto DIT_AVGS]
 <2,R,D> [goto DIT_MAT]

Question ID: ALT.456_00.000 **Instrument Variable Name:** DIT_AVGS **QuestionnaireFileName:** Adult CAM

Spanish Text: ¿Cuánto pagó en promedio de su propio bolsillo por cada visita a un practicante para dietas especiales?

*Enter '0' if no cost or free.

Allow \$0-500,R,D

Universe: Sample adults 18+ who know the average per visit they paid for special diets in the past 12 months

Skip Instructions: <0-500,R,D> [goto DIT_MAT]

Question ID: ALT.457_00.000 **Instrument Variable Name:** DIT_MAT **QuestionnaireFileName:** Adult CAM

Spanish Text: DURANTE LOS ÚLTIMOS 12 MESES, ¿compró un libro de auto-ayuda u otros materiales como un DVD, CD, o Video para aprender algo sobre el masaje?

- 1. Sí
- 2. No
- Refused
- Don't know

Universe: Sample adults 18+ who have used special diets in the past 12 months

Skip Instructions: <1> [goto DIT_MATC]
 <2,R,D> [goto MOVE_FLD]

Question ID: ALT.458_00.000 **Instrument Variable Name:** DIT_MATC **QuestionnaireFileName:** Adult CAM

Spanish Text: Aproximadamente cuánto pagó por estos materiales durante los últimos 12 meses?

*Enter '200' for \$200 or more.

Allow \$0-200,R,D

Universe: Sample adults 18+ who have bought self-help materials for special diets in the past 12 months

Skip Instructions: <0-200,R,D> [goto MOVE_FLD]

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Question ID: ALT.468_00.000 **Instrument Variable Name:** MOVE_FLD **QuestionnaireFileName:** Adult CAM

Spanish Text: ? [F1]

¿Ha practicado ALGUNA VEZ cualquiera de las siguientes técnicas de movimiento o ejercicio?

Feldenkrais

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+

Skip Instructions: <1,2,R,D> [goto MOVE_ALX]

Question ID: ALT.469_00.000 **Instrument Variable Name:** MOVE_ALX **QuestionnaireFileName:** Adult CAM

Spanish Text: ? [F1]

¿Ha practicado ALGUNA VEZ cualquiera de las siguientes técnicas de movimiento o ejercicio?

Técnica Alexander

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+

Skip Instructions: <1,2,R,D> [goto MOVE_PIL]

Question ID: ALT.470_00.000 **Instrument Variable Name:** MOVE_PIL **QuestionnaireFileName:** Adult CAM

Spanish Text: ? [F1]

¿Ha practicado ALGUNA VEZ cualquiera de las siguientes técnicas de movimiento o ejercicio?

Pilates

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+

Skip Instructions: <1,2,R,D> [goto MOVE_TPI]

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Question ID: ALT.471_00.000 **Instrument Variable Name:** MOVE_TPI **QuestionnaireFileName:** Adult CAM

Spanish Text: ? [F1]

¿Ha practicado ALGUNA VEZ cualquiera de las siguientes técnicas de movimiento o ejercicio?

Integración Psicofísica Trager

1. Sí
2. No
- Refused
- Don't know

Universe: Sample adults 18+

Skip Instructions: <1,2,R,D> if MOVE_FLD=1 or MOVE_ALX=1 or MOVE_PIL=1 or MOVE_TP1=1 [cycle through applicable MOVP questions];
 <2,R,D> if (All MOVE* ne 1) and (more than 3 modalities excluding chelation/ayurveda) [goto ALT_TOP3];
 else If (All MOVE* ne 1) and (3 or less modalities chosen excluding chelation/ayurveda) [goto TP1_REA1]

Question ID: ALT.472_00.000 **Instrument Variable Name:** MOVP_FLD **QuestionnaireFileName:** Adult CAM

Spanish Text: ? [F1]

¿Ha visto ALGUNA VEZ a un practicante o maestro(a) para...

Feldenkrais?

1. Sí
2. No
- Refused
- Don't know

Universe: Sample adults 18+ who have used Feldenkrais

Skip Instructions: <1,2,R,D>
 If any other MOVE_*='1' [goto next appropriate MOVP_* question]
 <1> If (MOVE_ALX and MOVE_PIL and MOVE_TPI) ne '1') [goto MOV_FLD]
 <2,R,D> if (MOVE_ALX and MOVE_PIL and MOVE_TPI) ne '1') [goto MOVU_FLD]

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Question ID: ALT.473_00.000 **Instrument Variable Name:** MOVP_ALX **QuestionnaireFileName:** Adult CAM

Spanish Text: ? [F1]

¿Ha visto ALGUNA VEZ a un practicante o maestro(a) para...

Técnica Alexander?

- 1. Sí
- 2. No
- Refused
- Don't know

Universe: Sample adults 18+ who have used Alexander technique

Skip Instructions: <1,2,R,D>
If any other MOVE_* = '1' [goto next appropriate MOVP_* question]
Else if (MOVE_PIL and MOVE_TPI) ne '1' and any MOVP_* = '1' [goto next appropriate MOV_* question]
<2,R,D> Else if all of MOVP_* ne '1' and where there's MOVE_*=1 [goto appropriate MOVU_* question(s)]

Question ID: ALT.474_00.000 **Instrument Variable Name:** MOVP_PIL **QuestionnaireFileName:** Adult CAM

Spanish Text: ? [F1]

¿Ha visto ALGUNA VEZ a un practicante o maestro(a) para...

Pilates?

- 1. Sí
- 2. No
- Refused
- Don't know

Universe: Sample adults 18+ who have used Pilates

Skip Instructions: <1,2,R,D> If MOVE_TPI = '1' [goto MOVP_TPI]
<1> If any MOVP_* = '1' [goto next appropriate MOV_* question]
<2,R,D> Else if all of MOVP_* ne '1' [goto appropriate MOVU_* question(s)]

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Question ID: ALT.475_00.000 **Instrument Variable Name:** MOVP_TPI **QuestionnaireFileName:** Adult CAM

Spanish Text: ? [F1]

¿Ha visto ALGUNA VEZ a un practicante o maestro(a) para...

Integración Psicofísica Trager?

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+ who have used Trager Psychophysical Integration

Skip Instructions: <1,2,R,D>
If any MOVP_* = '1' [goto next appropriate MOV_* question]
<2,R,D> If all of MOVP_* ne '1' and where there's MOVE_* = 1 [goto appropriate MOVU_* question(s)]

Question ID: ALT.476_00.000 **Instrument Variable Name:** MOV_FLD **QuestionnaireFileName:** Adult CAM

Spanish Text: ? [F1]

DURANTE LOS ÚLTIMOS 12 MESES, ¿vio a un practicante o maestro(a) para...

Feldenkrais?

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+ who have ever seen a practitioner for Feldenkrais

Skip Instructions: <1,2,R,D> Cycle through all MOVP_* = 1 [goto MOV_*] in the appropriate sequence
<2,R,D> IF all other MOVP_* ne 1 [goto MOVU_FLD]
<1> IF all others MOVP_* ne 1 [goto MOV_PTIM]

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Question ID: ALT.477_00.000 **Instrument Variable Name:** MOV_ALX **QuestionnaireFileName:** Adult CAM

Spanish Text: ? [F1]

DURANTE LOS ÚLTIMOS 12 MESES, ¿vio a un practicante o maestro(a) para...

Técnica Alexander?

- 1. Sí
- 2. No
- Refused
- Don't know

Universe: Sample adults 18+ who have ever seen a practitioner for Alexander technique

Skip Instructions: <1,2,R,D> Cycle through all MOVP_*=1 [goto MOV_*] in the appropriate sequence
 <2,R,D> IF all other MOVP_* ne1 [goto MOVU_ALX]
 Else if all other MOVP_* ne1 and MOVE_FLD=1 [goto MOVU_FLD]
 <1> IF all others MOVP_* ne1 [goto MOV_PTIM]

Question ID: ALT.478_00.000 **Instrument Variable Name:** MOV_PIL **QuestionnaireFileName:** Adult CAM

Spanish Text: ? [F1]

DURANTE LOS ÚLTIMOS 12 MESES, ¿vio a un practicante o maestro(a) para...

Pilates?

- 1. Sí
- 2. No
- Refused
- Don't know

Universe: Sample adults 18+ who have ever seen a practitioner for Pilates

Skip Instructions: <1,2,R,D> If MOVP_TPI=1 [goto MOV_TPI]
 <2,R,D> IF (MOVP_TPI ne1) and (MOV_FLD in [2,R,D]) [goto MOVU_FLD]
 Else if (MOVP_FLD and MOVP_ALX and MOVP_TP) in [2,R,D]) [goto MOVU_FLD]
 <1> IF all others MOVP_* in [2,R,D] [goto MOV_PTIM]

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Question ID: ALT.479_00.000 **Instrument Variable Name:** MOV_TPI **QuestionnaireFileName:** Adult CAM

Spanish Text: ? [F1]

DURANTE LOS ÚLTIMOS 12 MESES, ¿vio a un practicante o maestro(a) para...

Integración Psicofísica Trager?

1. Sí
2. No
- Refused
- Don't know

Universe: Sample adults 18+ who have ever seen a practitioner for Trager Psychophysical Integration

Skip Instructions: <1> [goto MOV_PTIM]
 <2,R,D> if no to all MOV, go to MOVU question for first relevant MOVE answer;
 else [goto MOV_PTIM]

Question ID: ALT.480_00.000 **Instrument Variable Name:** MOVU_FLD **QuestionnaireFileName:** Adult CAM

Spanish Text: ? [F1]

DURANTE LOS ÚLTIMOS 12 MESES, ¿utilizó ...

Feldenkrais?

1. Sí
2. No
- Refused
- Don't know

Universe: Sample adults 18+ who have used Feldenkrais

Skip Instructions: Cycle through all MOVU_* questions where (MOVP_ALX or MOV_ALX) IN ('2','7','9')
 If no more skips to a MOVU_* question(s) then!

<1,2,R,D> If (any MOVU_*=1 or any MOV_*=1) [goto MOV_PTIM]

<2,R,D>

If (all MOVU_*ne1 or any MOV_*=1) [goto MOV_MAT]

Else If (all MOVU_* and MOV_*) ne1 and

if more than 3 modalities not including chelation/ayurveda [goto ALT_TOP3];

else if <=3 modalities excluding chelation/ayurveda [goto TP1_REA1]

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Question ID: ALT.481_00.000 **Instrument Variable Name:** MOVU_ALX **QuestionnaireFileName:** Adult CAM

Spanish Text: ? [F1]

DURANTE LOS ÚLTIMOS 12 MESES, ¿utilizó ...

Técnica Alexander?

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+ who have used Alexander technique

Skip Instructions: Cycle through all MOVU_* questions where (MOVP_ALX or MOV_ALX) IN ('2','7','9')
If no more skips to a MOVU_* question(s) then!

<1,2,R,D> If (any MOVU_*=1 or any MOV_*=1) [goto MOV_PTIM]
 <2,R,D>
 If (all MOVU_*ne1 or any MOV_*=1) [goto MOV_MAT]
 Else If (all MOVU_* and MOV_*) ne1 and
 if more than 3 modalities not including chelation/ayurveda [goto ALT_TOP3];
 else if <=3 modalities excluding chelation/ayurveda [goto TP1_REA1]

Question ID: ALT.482_00.000 **Instrument Variable Name:** MOVU_PIL **QuestionnaireFileName:** Adult CAM

Spanish Text: ? [F1]

DURANTE LOS ÚLTIMOS 12 MESES, ¿utilizó ...

Pilates?

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+ who have used Pilates

Skip Instructions: Cycle through all MOVU_* questions where (MOVP_ALX or MOV_ALX) IN ('2','7','9')
If no more skips to a MOVU_* question(s) then!

<1,2,R,D> If (any MOVU_*=1 or any MOV_*=1) [goto MOV_PTIM]
 <2,R,D>
 If (all MOVU_*ne1 or any MOV_*=1) [goto MOV_MAT]
 Else If (all MOVU_* and MOV_*) ne1 and
 if more than 3 modalities not including chelation/ayurveda [goto ALT_TOP3];
 else if <=3 modalities excluding chelation/ayurveda [goto TP1_REA1]

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Question ID: ALT.483_00.000 **Instrument Variable Name:** MOVU_TPI **QuestionnaireFileName:** Adult CAM

Spanish Text: ? [F1]

DURANTE LOS ÚLTIMOS 12 MESES, ¿utilizó ...

Integración Psicofísica Trager?

1. Sí
2. No
- Refused
- Don't know

Universe: Sample adults 18+ who have used Trager Psychophysical Integration

Skip Instructions: Cycle through all MOVU_* questions where (MOVP_ALX or MOV_ALX) IN ('2','7','9')
If no more skips to a MOVU_* question(s) then!

<1,2,R,D> If (any MOVU_*=1 or any MOV_*=1) [goto MOV_PTIM]

<2,R,D>

If (all MOVU_*ne1 or any MOV_*=1) [goto MOV_MAT]

Else If (all MOVU_* and MOV_*) ne1 and

if more than 3 modalities not including chelation/ayurveda [goto ALT_TOP3];

else if <=3 modalities excluding chelation/ayurveda [goto TP1_REA1]

Question ID: ALT.484_00.000 **Instrument Variable Name:** MOV_PTIM **QuestionnaireFileName:** Adult CAM

Spanish Text: ¿Sabe con exactitud el número de veces durante los últimos 12 meses que usted vio a un practicante o maestro(a) para técnicas de movimiento y ejercicio?

1. Sí
2. No
- Refused
- Don't know

Universe: Sample adults 18+ who have seen a practitioner for movement and exercise techniques in the past 12 months

Skip Instructions: <1> [goto MOV_TMNO]

<2,R,D> [goto MOV_TMCT]

Question ID: ALT.485_00.000 **Instrument Variable Name:** MOV_TMNO **QuestionnaireFileName:** Adult CAM

Spanish Text: DURANTE LOS ÚLTIMOS 12 MESES, ¿cuántas veces vio a un practicante o maestro(a) para técnicas de movimiento y ejercicio?

*Enter '52' for 52 or more times.

Allow 1-52,R,D

Universe: Sample adults 18+ who know the number of times they have seen a practitioner for movement and exercise techniques in the past 12 months

Skip Instructions: <1-52,R,D> [goto MOV_HIC]

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Question ID: ALT.486_00.000 **Instrument Variable Name:** MOV_TMCT **QuestionnaireFileName:** Adult CAM

Spanish Text: DURANTE LOS ÚLTIMOS 12 MESES, ¿APROXIMADAMENTE cuántas veces vio a un practicante o maestro para técnicas de movimiento y ejercicio? Diría...

*Read categories below.

1. Solo 1 vez
2. 2-5 veces
3. 6-10 veces
4. 11-15 veces
5. 16-20 veces
6. 21-25 veces
7. Más de 25 veces
- Refused
- Don't know

Universe: Sample adults 18+ who don't know the specific number of times they have seen a practitioner for movement and exercise techniques in the past 12 months or refuse the specific number of times

Skip Instructions: <1-7,R,D> [goto MOV_HIC]

Question ID: ALT.487_00.000 **Instrument Variable Name:** MOV_HIC **QuestionnaireFileName:** Adult CAM

Spanish Text: DURANTE LOS ÚLTIMOS 12 MESES, ¿estaba alguno de los costos de ver a un practicante o maestro de técnicas de movimiento y ejercicio cubierto por seguro de salud?

1. Sí
2. No
- Refused
- Don't know

Universe: Sample adults 18+ who have seen a practitioner for movement and exercise techniques in the past 12 months

Skip Instructions: <1> [goto MOV_HICA]
<2,R,D> [goto MOV_HIT]

Question ID: ALT.488_00.000 **Instrument Variable Name:** MOV_HICA **QuestionnaireFileName:** Adult CAM

Spanish Text: DURANTE LOS ÚLTIMOS 12 MESES, ¿cubrió el seguro de salud todo el costo o solo parte del costo por ver a un practicante de técnicas de movimiento y ejercicio?

1. Todo el costo
2. Parte del costo
- Refused
- Don't know

Universe: Sample adults 18+ whose visit(s) to a practitioner for movement and exercise techniques in the past 12 months were (at least partly) covered by health insurance

Skip Instructions: <1> [goto MOV_MAT]
<2,R,D> [goto MOV_HIT]

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Question ID: ALT.489_00.000 **Instrument Variable Name:** MOV_HIT **QuestionnaireFileName:** Adult CAM

Spanish Text: ¿Sabe la cantidad total que se pagó en los últimos 12 meses por ver a un practicante o maestro de técnicas de movimiento y ejercicio [fill1: sin incluir la parte pagada por el seguro]?

- 1. Sí
- 2. No
- Refused
- Don't know

Universe: Sample adults 18+ whose health insurance covered none or some of the cost for movement and exercise techniques in the past 12 months

Skip Instructions: <1> [goto MOV_HITS]
<2,R,D> [goto MOV_AVGC]

Question ID: ALT.490_00.000 **Instrument Variable Name:** MOV_HITS **QuestionnaireFileName:** Adult CAM

Spanish Text: ¿Cuánto en total se pagó durante los últimos 12 meses por ver a un practicante para técnicas de movimiento y ejercicio [fill 2: sin incluir la parte pagada por el seguro]?

*Enter '0' for no cost or free.

Allow \$0-26000,R,D

Universe: Sample adults 18+ who know the amount they paid for movement and exercise techniques in the past 12 months

Skip Instructions: <0-26000,R,D> [goto MOV_MAT]

Question ID: ALT.491_00.000 **Instrument Variable Name:** MOV_AVGC **QuestionnaireFileName:** Adult CAM

Spanish Text: ¿Sabe la cantidad promedio que usted pagó en los últimos 12 meses por cada visita para técnicas de movimiento y ejercicio [fill 1: sin incluir la parte pagada por el seguro]?

- 1. Sí
- 2. No
- Refused
- Don't know

Universe: Sample adults 18+ who don't know the total amount they paid for movement and exercise techniques in the past 12 months

Skip Instructions: <1> [goto MOV_AVGS]
<2,R,D> [goto MOV_MAT]

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Question ID: ALT.492_00.000 **Instrument Variable Name:** MOV_AVGS **QuestionnaireFileName:** Adult CAM

Spanish Text: ¿Cuánto pagó en promedio de su propio bolsillo por cada visita a un practicante o maestro(a) para técnicas de movimiento y ejercicio?

*Enter '0' if no cost or free.

Allow \$0-500,R,D

Universe: Sample adults 18+ who know the average per visit they paid for movement and exercise techniques in the past 12 months

Skip Instructions: <0-500,R,D> [goto MOV_MAT]

Question ID: ALT.493_00.000 **Instrument Variable Name:** MOV_MAT **QuestionnaireFileName:** Adult CAM

Spanish Text: DURANTE LOS ÚLTIMOS 12 MESES, ¿compró un libro de auto-ayuda u otros materiales como un DVD, CD, o Video para aprender algo sobre técnicas de movimiento y ejercicio?

- 1. Sí
- 2. No
- Refused
- Don't know

Universe: Sample adults 18+ who have seen a practitioner for or have used a movement and exercise techniques in the past 12 months

Skip Instructions: <1> [goto MOV_MATC]
<2,R,D> if more than 3 modalities [goto ALT_TOP3];
else less than 4 chosen [goto TP1_REA1]

Question ID: ALT.494_00.000 **Instrument Variable Name:** MOV_MATC **QuestionnaireFileName:** Adult CAM

Spanish Text: Aproximadamente cuánto pagó por estos materiales durante los últimos 12 meses?

*Enter '200' for \$200 or more.

Allow \$0-200,R,D

Universe: Sample adults 18+ who have bought self-help materials for movement and exercise techniques in the past 12 months

Skip Instructions: <0-200,R,D>
if more than 3 modalities [goto ALT_TOP3];
else less than 4 chosen [goto TP1_REA1]

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Question ID: ALT.504_00.000 **Instrument Variable Name:** ALT_TOP3 **QuestionnaireFileName:** Adult CAM

Spanish Text: DURANTE LOS ÚLTIMOS 12 MESES, cuál de estas TRES terapias eran los más importantes para su salud?

*Read list below.

1. Manipulación Quiropráctico u Osteopática
 2. Masaje
 3. Acupuntura
 4. Terapia de Sanación Energética
 5. Naturopatía
 6. Hipnosis
 7. Biorretroalimentación
 8. Terapia craneosacral
 9. Sanadores tradicionales
 10. [fill1: Herb 1 from AHB_TP21]
 11. [fill2: Herb 2 from AHB_TP22]
 12. Homeopatía
 13. [fill3: Meditación de mantras/ Meditación de atención plena/Meditación Espiritual/Ensoñación dirigida/Relajación progresiva from MBO_MST1]
 14. [fill4: Yoga/Tai Chi/Qi Gong from YTQ_MOST]
 15. Dietas especiales
 16. Técnicas de movimiento o ejercicio
- Refused
Don't know

Universe: Sample adults 18+ who have used/seen a practitioner for any of a number of therapies in the past 12 months

Skip Instructions: <1-16> If less than three selected [goto ERR_ALT_TOP3]

<1-16> [goto TP1_REA1]

<R,D> [goto end]

Question ID: ALT.510_00.000 **Instrument Variable Name:** TP1_REA1 **QuestionnaireFileName:** Adult CAM

Spanish Text: ¿{fill1: Vio a un practicante /Utilizó} {fill2: modality} para cualquiera de esta razones?

¿Para el bienestar en general o la prevención de enfermedades?

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+ who have used first of top three modalities

Skip Instructions: <1,2,R,D> [goto TP1_REA2]

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Question ID: ALT.511_00.000 **Instrument Variable Name:** TP1_REA2 **QuestionnaireFileName:** Adult CAM

Spanish Text: *Read if necessary.

¿{fill1: Vio a un practicante /Utilizó} {fill2: modality} para cualquiera de esta razones?

Para mejorar su nivel de energía?

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+ who have used first of top three modalities

Skip Instructions: <1,2,R,D> [goto TP1_REA3]

Question ID: ALT.512_00.000 **Instrument Variable Name:** TP1_REA3 **QuestionnaireFileName:** Adult CAM

Spanish Text: *Read if necessary.

¿{fill1: Vio a un practicante /Utilizó} {fill2: modality} para cualquiera de esta razones?

Para mejorar su función inmune?

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+ who have used first of top three modalities

Skip Instructions: <1,2,R,D> [goto TP1_REA4]

Question ID: ALT.513_00.000 **Instrument Variable Name:** TP1_REA4 **QuestionnaireFileName:** Adult CAM

Spanish Text: *Read if necessary.

¿{fill1: Vio a un practicante /Utilizó} {fill2: modality} para cualquiera de esta razones?

Para mejorar su rendimiento atlético o deportivo?

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+ who have used first of top three modalities

Skip Instructions: <1,2,R,D> [goto TP1_REA5]

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Question ID: ALT.514_00.000 **Instrument Variable Name:** TP1_REA5 **QuestionnaireFileName:** Adult CAM

Spanish Text: *Read if necessary.

¿{fill1: Vio a un practicante /Utilizó} {fill2: modality} para cualquiera de esta razones?

Para mejorar su memoria o concentración?

- 1. Sí
- 2. No
- Refused
- Don't know

Universe: Sample adults 18+ who have used first of top three modalities

Skip Instructions: <1,2,R,D> [goto TP1_MOT1]

Question ID: ALT.515_00.000 **Instrument Variable Name:** TP1_MOT1 **QuestionnaireFileName:** Adult CAM

Spanish Text: ¿{fill1: Ver un practicante para/Utilizar} {fill2: modality} lo motivó para

Comer saludable?

- 1. Sí
- 2. No
- Refused
- Don't know

Universe: Sample adults 18+ who have used first of top three modalities

Skip Instructions: <1,2,R,D> [goto TP1_MOT2]

Question ID: ALT.516_00.000 **Instrument Variable Name:** TP1_MOT2 **QuestionnaireFileName:** Adult CAM

Spanish Text: *Read if necessary.

¿{fill1: Ver un practicante para/Utilizar} {fill2: modality} lo motivó para

Comer más alimentos orgánicos?

- 1. Sí
- 2. No
- Refused
- Don't know

Universe: Sample adults 18+ who have used first of top three modalities

Skip Instructions: <1,2,R,D> if ALC1YR=1 [goto TP1_MOT3];
 else if SMKNOW=1,2 [goto TP1_MOT4];
 else (ALC1YR ne 1 and SMKNOW ne (1,2)) [goto TP1_MOT5]

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Question ID: ALT.517_00.000 **Instrument Variable Name:** TP1_MOT3 **QuestionnaireFileName:** Adult CAM

Spanish Text: *Read if necessary.

¿ {fill1:Ver un practicante para/Utilizar} {fill2: modality} lo motivó para

Reducir o dejar de beber alcohol?

- 1. Sí
- 2. No
- Refused
- Don't know

Universe: Sample adults 18+ who have used first of top three modalities and who have consumed alcohol in the past 12 months

Skip Instructions: <1,2,R,D> if SMKNOW=1,2 [goto TP1_MOT4];
 else SMKNOW ne (1,2) [goto TP1_MOT5]

Question ID: ALT.518_00.000 **Instrument Variable Name:** TP1_MOT4 **QuestionnaireFileName:** Adult CAM

Spanish Text: *Read if necessary.

¿ {fill1:Ver un practicante para/Utilizar} {fill2: modality} lo motivó para

Reducir o dejar de fumar cigarrillos?

- 1. Sí
- 2. No
- Refused
- Don't know

Universe: Sample adults 18+ who have used first of top three modalities and who currently smoke every day or some days

Skip Instructions: <1,2,R,D> [goto TP1_MOT5]

Question ID: ALT.519_00.000 **Instrument Variable Name:** TP1_MOT5 **QuestionnaireFileName:** Adult CAM

Spanish Text: *Read if necessary.

¿ {fill1:Ver un practicante para/Utilizar} {fill2: modality} lo motivó para

Hacer ejercicios con más regularidad?

- 1. Sí
- 2. No
- Refused
- Don't know

Universe: Sample adults 18+ who have used first of top three modalities

Skip Instructions: <1,2,R,D> [goto TP1_OUT1]

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Question ID: ALT.520_00.000 **Instrument Variable Name:** TP1_OUT1 **QuestionnaireFileName:** Adult CAM

Spanish Text: *Read if necessary.

¿{fill1:Ver un practicante para/Utilizar} {fill2: modality} le produjo alguno de estos resultados?

¿Darle un sentido de control sobre su salud?

- 1. Sí
- 2. No
- Refused
- Don't know

Universe: Sample adults 18+ who have used first of top three modalities

Skip Instructions: <1,2,R,D> [goto TP1_OUT2]

Question ID: ALT.521_00.000 **Instrument Variable Name:** TP1_OUT2 **QuestionnaireFileName:** Adult CAM

Spanish Text: *Read if necessary.

¿{fill1:Ver un practicante para/Utilizar} {fill2: modality} le produjo alguno de estos resultados?

¿Ayudarle a reducir su nivel de estrés o relajarse?

- 1. Sí
- 2. No
- Refused
- Don't know

Universe: Sample adults 18+ who have used first of top three modalities

Skip Instructions: <1,2,R,D> [goto TP1_OUT3]

Question ID: ALT.522_00.000 **Instrument Variable Name:** TP1_OUT3 **QuestionnaireFileName:** Adult CAM

Spanish Text: *Read if necessary.

¿{fill1:Ver un practicante para/Utilizar} {fill2: modality} le produjo alguno de estos resultados?

¿Ayudarle a dormir mejor?

- 1. Sí
- 2. No
- Refused
- Don't know

Universe: Sample adults 18+ who have used first of top three modalities

Skip Instructions: <1,2,R,D> [goto TP1_OUT4]

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Question ID: ALT.523_00.000 **Instrument Variable Name:** TP1_OUT4 **QuestionnaireFileName:** Adult CAM

Spanish Text: *Read if necessary.

¿{fill1:Ver un practicante para/Utilizar} {fill2: modality} le produjo alguno de estos resultados?

¿Hacerle sentir mejor emocionalmente?

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+ who have used first of top three modalities

Skip Instructions: <1,2,R,D> [goto TP1_OUT5]

Question ID: ALT.524_00.000 **Instrument Variable Name:** TP1_OUT5 **QuestionnaireFileName:** Adult CAM

Spanish Text: *Read if necessary.

¿{fill1:Ver un practicante para/Utilizar} {fill2: modality} le produjo alguno de estos resultados?

¿Hacerle más fácil lidiar con problemas de la salud?

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+ who have used first of top three modalities

Skip Instructions: <1,2,R,D> [goto TP1_OUT6]

Question ID: ALT.525_00.000 **Instrument Variable Name:** TP1_OUT6 **QuestionnaireFileName:** Adult CAM

Spanish Text: *Read if necessary.

¿{fill1:Ver un practicante para/Utilizar} {fill2: modality} le produjo alguno de estos resultados?

¿Mejorar la salud en general y hacerle sentir mejor?

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+ who have used first of top three modalities

Skip Instructions: <1,2,R,D> [goto TP1_OUT7]

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Question ID: ALT.526_00.000 **Instrument Variable Name:** TP1_OUT7 **QuestionnaireFileName:** Adult CAM

Spanish Text: *Read if necessary.

¿{fill1:Ver un practicante para/Utilizar} {fill2: modality} le produjo alguno de estos resultados?

¿Mejorar la relaciones sociales con otras personas?

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+ who have used first of top three modalities

Skip Instructions: <1,2,R,D> if DOINGLW2=1,2,4 or WRKLYR2=1 or SCHOOLYR=1 [goto TP1_OUT8];
 else if TP1_CNT >1 [goto TP1_MOST];
 else if TP1_CNT=1 [goto TP1_HELP];
 else TP1_CNT=0 [goto TP1_TRET]

Question ID: ALT.527_00.000 **Instrument Variable Name:** TP1_OUT8 **QuestionnaireFileName:** Adult CAM

Spanish Text: *Read if necessary.

¿{fill1:Ver un practicante para/Utilizar} {fill2: modality} le produjo alguno de estos resultados?

¿Mejorar la asistencia en la escuela?

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+ who have used first of top three modalities and who worked or attended school in the past year

Skip Instructions: <1,2,R,D> if TP1_CNT>1 [goto TP1_MOST];
 else if TP1_CNT=1 [goto TP1_HELP];
 else [goto TP1_TRET]

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Question ID: ALT.528_00.000 **Instrument Variable Name:** TP1_MOST **QuestionnaireFileName:** Adult CAM

Spanish Text: ¿De estas razones, cuál SOLA era la más importante para [fill1: usar/ver [fill2:modality]]?

*Read list below.

1. Su bienestar en general o la prevención de enfermedades
 2. Mejorar su energía
 3. Mejorar su función inmune
 4. Mejorar su rendimiento atlético o en deportes
 5. Mejorar su memoria o concentración
 6. Comer más saludable
 7. Comer más alimentos orgánicos
 8. Reducir o dejar el consumo de alcohol
 9. Reducir o dejar el uso de cigarrillos
 10. Hacer ejercicios con más regularidad
 11. Darle a [fill4: el/ella] un sentido de control sobre su salud
 12. Ayudarle a [fill4: el/ella] reducir su nivel de estrés o a relajarse
 13. Ayudarle a [fill4: el/ella] dormir mejor
 14. Ayudarle a [fill4: el/ella] sentirse mejor emocionalmente
 15. Hacer más fácil lidiar con problemas de la salud
 16. Mejorar su salud en general y hacerle sentir mejor
 17. Mejorar sus relaciones sociales con otras personas
 18. Mejorar su puntualidad/asistencia en la escuela
- Refused
Don't know

Universe: Sample adults 18+ who have used first of top three modalities and two or more reasons for seeing a practitioner/using modality chosen

Skip Instructions: <1-18> [goto TP1_HELP]
<R,D> [goto TP1_TRET]

Question ID: ALT.529_00.000 **Instrument Variable Name:** TP1_HELP **QuestionnaireFileName:** Adult CAM

Spanish Text: ¿Cuánto piensa usted que [fill1: modality] ayudó {fill2: reason given in TP1_MOST question}? Diría...

*Read categories below.

1. Muchísimo
 2. Algo
 3. Solo un poco
 4. Nada
- Refused
Don't know

Universe: Sample adults 18+ who have used first of top three modalities and had a most important reason for using selected modality/seeing a practitioner for selected modality

Skip Instructions: <1-4,R,D> [goto TP1_TRET]

2012 NHIS Spanish Questionnaire - Adult CAM
Adult Alternative Health/Complementary And Alternative Medicine
Document Version Date: 30-May-13

Question ID: ALT.530_00.000 **Instrument Variable Name:** TP1_TRET **QuestionnaireFileName:** Adult CAM

Spanish Text: DURANTE LOS ÚLTIMOS 12 MESES, ¿{fill1: Vio a un practicante/Utilizó} {fill2:modality} para uno o más problemas, síntomas, o condiciones de salud específicos?

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+ who have used first of top three modalities

Skip Instructions: <1> [goto TP1_COND]
<2,R,D> ALT_TP31 in (6,7,10-16) [goto TP1_RS5];
else ALT_TP31 ne (6,7,10-16) [goto TP1_RS6]

Question ID: ALT.531_00.000 **Instrument Variable Name:** TP1_COND **QuestionnaireFileName:** Adult CAM

Spanish Text: ¿Para cuáles problemas, síntomas, o condiciones de salud específicos {fill1: vio a un practicante para/utilizó} {fill2: modality}?

*Enter all that apply, separate with commas.

Fill applicable conditions from ACAMCND1

Universe: Sample adults 18+ who have used first of top three modalities and saw a practitioner or used modality for a specific health problem, symptom or condition

Skip Instructions: <1-86> If TP1_CNT>1 [goto TP1_CMST],
else if TP1_CNT=1 [goto TP1_CHLP];
<86> [goto TP1_SPEC];
<R,D> if self-care modality (ALT_TP31 in (6,7,10-16)) [goto TP1_RS5];
else [goto TP1_RS6]

Question ID: ALT.531_00.010 **Instrument Variable Name:** TP1_SPEC **QuestionnaireFileName:** Adult CAM

Spanish Text:
Universe: Sample adults 18+ who have used first of top three modalities and used modality to treat other health problem or condition

Skip Instructions: <Allow 75, R,D> If TP1_CNT>1 [goto TP1_CMST],
elseif TP1_CNT =1 [goto TP1_CHLP];
<R,D> If TP1_CNT=1 and if self-care modality (ALT_TP31 in (6,7,10-16)) [goto TP1_RS5];
else [goto TP1_RS6]

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Question ID: ALT.532_00.000 **Instrument Variable Name:** TP1_CMST **QuestionnaireFileName:** Adult CAM

Spanish Text: ¿Para CUÁL de estas {fill1: vio a un practicante para/utilizó} {fill2: modality} más frecuentemente?

*If respondent cannot choose one condition, probe for condition most important for using therapy.

Fill applicable conditions from TP1_COND or TP1_SPEC

Universe: Sample adults 18+ who have used first of top three modalities and used modality to treat specific conditions and more than one condition selected

Skip Instructions: <1-86> [goto TP1_CHLP]
 <R,D> if self-care modality (ALT_TP31=6,7,10-16) [goto TP1_RS5];
 else [goto TP1_RS6]

Question ID: ALT.533_00.000 **Instrument Variable Name:** TP1_CHLP **QuestionnaireFileName:** Adult CAM

Spanish Text: ¿Cuánto piensa usted que [fill1: modality] ayudó con su [fill2: condition from TP1_CMST]? Diría...

*Read categories below.

1. Muchísimo
 2. Algo
 3. Solo un poco
 4. Nada
- Refused
 Don't know

Universe: Sample adults 18+ who have used first of top three modalities and used modality to treat specific condition(s)

Skip Instructions: <1-4,R,D> [goto TP1_MTR1]

Question ID: ALT.534_00.000 **Instrument Variable Name:** TP1_MTR1 **QuestionnaireFileName:** Adult CAM

Spanish Text: ¿Recibió alguno de estos tratamientos médicos para [fill1: condition from TP1_CMST]?

¿Medicamentos recetados?

1. Sí
 2. No
- Refused
 Don't know

Universe: Sample adults 18+ who have used first of top three modalities and used modality to treat specific condition(s)

Skip Instructions: <1,2,R,D> [goto TP1_MTR2]

2012 NHIS Spanish Questionnaire - Adult CAM
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Question ID: ALT.535_00.000 **Instrument Variable Name:** TP1_MTR2 **QuestionnaireFileName:** Adult CAM

Spanish Text: *Read if necessary.

¿Recibió alguno de estos tratamientos médicos para [fill1: condition from TP1_CMST]?

¿Medicamentos sin receta?

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+ who have used first of top three modalities and used modality to treat specific condition(s)

Skip Instructions: <1,2,R,D> [goto TP1_MTR3]

Question ID: ALT.536_00.000 **Instrument Variable Name:** TP1_MTR3 **QuestionnaireFileName:** Adult CAM

Spanish Text: *Read if necessary.

¿Recibió alguno de estos tratamientos médicos para [fill1: condition from TP1_CMST]?

¿Cirujía?

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+ who have used first of top three modalities and used modality to treat specific condition(s)

Skip Instructions: <1,2,R,D> [goto TP1_MTR4]

Question ID: ALT.537_00.000 **Instrument Variable Name:** TP1_MTR4 **QuestionnaireFileName:** Adult CAM

Spanish Text: *Read if necessary.

¿Recibió alguno de estos tratamientos médicos para [fill1: condition from TP1_CMST]?

¿Terapia física?

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+ who have used first of top three modalities and used modality to treat specific condition(s)

Skip Instructions: <1,2,R,D> [goto TP1_MTR5]

2012 NHIS Spanish Questionnaire - Adult CAM
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Document Version Date: 30-May-13

Question ID: ALT.538_00.000 **Instrument Variable Name:** TP1_MTR5 **QuestionnaireFileName:** Adult CAM

Spanish Text: *Read if necessary.

¿Recibió alguno de estos tratamientos médicos para [fill1: condition from TP1_CMST]?

¿Consejo de salud mental?

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+ who have used first of top three modalities and used modality to treat specific condition(s)

Skip Instructions: <1,2,R,D> if TP1_MTR1=1 or TP1_MTR2=1 or TP1_MTR3=1 or TP1_MTR4=1 or TP1_MTR5=1 [goto TP1_RS1];
 else if self-care modality (ALT_TP31=6,7,10-16) [goto TP1_RS5];
 else [goto TP1_RS6]

Question ID: ALT.539_00.000 **Instrument Variable Name:** TP1_RS1 **QuestionnaireFileName:** Adult CAM

Spanish Text: DURANTE LOS ÚLTIMOS 12 MESES, ¿ [fill1: Vio a un practicante para/Utilizó} {fill2:modality} por alguna de estas razones?

¿Estos tratamientos médicos eran muy caros?

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+ who have used first of top three modalities and used some type of treatment for specific condition(s)

Skip Instructions: <1,2,R,D> [goto TP1_RS2]

Question ID: ALT.540_00.000 **Instrument Variable Name:** TP1_RS2 **QuestionnaireFileName:** Adult CAM

Spanish Text: *Read if necessary.

DURANTE LOS ÚLTIMOS 12 MESES, ¿ [fill1: Vio a un practicante para/Utilizó} {fill2:modality} por alguna de estas razones?

¿ [fill3: modality] en combinación con estos tratamientos médicos ayudarían?

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+ who have used first of top three modalities and used some type of treatment for specific condition(s)

Skip Instructions: <1,2,R,D> [goto TP1_RS3]

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Question ID: ALT.541_00.000 **Instrument Variable Name:** TP1_RS3 **QuestionnaireFileName:** Adult CAM

Spanish Text: *Read if necessary.

DURANTE LOS ÚLTIMOS 12 MESES, ¿{fill1: Vio a un practicante para/Utilizó} {fill2:modality} por alguna de estas razones?

¿Estos tratamientos no fucionana para el problema de salud que usted desea tratar o prevenir?

1. Sí
2. No
- Refused
- Don't know

Universe: Sample adults 18+ who have used first of top three modalities and used some type of treatment for specific condition(s)

Skip Instructions: <1,2,R,D> if TP1_MTR1=1 or TP1_MTR2=1 [goto TP1_RS4];
 else if self-care modality (categories 6,7 and 10-16 on ALT_TP31 variable, [goto TP1_RS5];
 else [goto TP1_RS6]

Question ID: ALT.542_00.000 **Instrument Variable Name:** TP1_RS4 **QuestionnaireFileName:** Adult CAM

Spanish Text: *Read if necessary.

DURANTE LOS ÚLTIMOS 12 MESES, ¿{fill1: Vio a un practicante para/Utilizó} {fill2:modality} por alguna de estas razones?

Fill3: ¿Los medicamentos recetados/¿Los medicamentos sin receta/¿Los medicamentos recetados o sin receta] causan efectos secundarios?

1. Sí
2. No
- Refused
- Don't know

Universe: Sample adults 18+ who have used first of top three modalities and used prescription or over-the-counter medication to treat specific condition(s)

Skip Instructions: <1,2,R,D> if self-care modality (categories 6,7 and 10-16 on ALT_TP31 variable, [goto TP1_RS5];
 else goto TP1_RS6]

Question ID: ALT.543_00.000 **Instrument Variable Name:** TP1_RS5 **QuestionnaireFileName:** Adult CAM

Spanish Text: DURANTE LOS ÚLTIMOS 12 MESES, ¿Utilizó {fill1:modality } por alguna de estas razones?

¿Porque se puede hacer sin la ayuda de un especialista?

1. Sí
2. No
- Refused
- Don't know

Universe: Sample adults 18+ who have used first of top three modalities and picked a self care modality

Skip Instructions: <1,2,R,D> [goto TP1_RS6]

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Question ID: ALT.544_00.000 **Instrument Variable Name:** TP1_RS6 **QuestionnaireFileName:** Adult CAM

Spanish Text: DURANTE LOS ÚLTIMOS 12 MESES, ¿[fill1: Vio a un practicante para/Utilizó] [fill2: modality} por alguna de estas razones?

¿Es natural?

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+ who have used first of top three modalities

Skip Instructions: <1,2,R,D> [goto TP1_RS7]

Question ID: ALT.545_00.000 **Instrument Variable Name:** TP1_RS7 **QuestionnaireFileName:** Adult CAM

Spanish Text: *Read if necessary.

DURANTE LOS ÚLTIMOS 12 MESES, ¿[fill1: Vio a un practicante para/Utilizó] [fill2: modality} por alguna de estas razones?

¿ Enfoca en el la persona en su totalidad, mente, cuerpo, y espíritu?

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+ who have used first of top three modalities

Skip Instructions: <1,2,R,D> [goto TP1_RS8]

Question ID: ALT.546_00.000 **Instrument Variable Name:** TP1_RS8 **QuestionnaireFileName:** Adult CAM

Spanish Text: *Read if necessary.

DURANTE LOS ÚLTIMOS 12 MESES, ¿[fill1: Vio a un practicante para/Utilizó] [fill2: modality} por alguna de estas razones?

¿Trata la causa y no solo los síntomas?

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+ who have used first of top three modalities

Skip Instructions: <1,2,R,D> [goto TP1_RS9]

2012 NHIS Spanish Questionnaire - Adult CAM
Adult Alternative Health/Complementary And Alternative Medicine
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Question ID: ALT.547_00.000 **Instrument Variable Name:** TP1_RS9 **QuestionnaireFileName:** Adult CAM

Spanish Text: *Read if necessary.

DURANTE LOS ÚLTIMOS 12 MESES, ¿[fill1: Vio a un practicante para/Utilizó] [fill2: modality} por alguna de estas razones?

¿Era parte de su crianza?

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+ who have used first of top three modalities

Skip Instructions: <1,2,R,D> [goto TP1_REC1]

Question ID: ALT.548_00.000 **Instrument Variable Name:** TP1_REC1 **QuestionnaireFileName:** Adult CAM

Spanish Text: ¿[fill1: Vio a un practicante para/Utilizó} {fill2: modality} porque fue recomendado por alguna de las siguientes personas?

¿Un doctor de medicina?

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+ who have used first of top three modalities

Skip Instructions: <1,2,R,D> [goto TP1_REC2]

Question ID: ALT.549_00.000 **Instrument Variable Name:** TP1_REC2 **QuestionnaireFileName:** Adult CAM

Spanish Text: *Read if necessary.

¿[fill1: Vio a un practicante para/Utilizó} {fill2: modality} porque fue recomendado por alguna de las siguientes personas?

¿Un familiar?

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+ who have used first of top three modalities

Skip Instructions: <1,2,R,D> [goto TP1_REC3]

2012 NHIS Spanish Questionnaire - Adult CAM
Adult Alternative Health/Complementary And Alternative Medicine
Document Version Date: 30-May-13

Question ID: ALT.553_00.000 **Instrument Variable Name:** TP1_DS1 **QuestionnaireFileName:** Adult CAM

Spanish Text: [fill1: Sin incluir el practicante que usted vio para] [fill2: modality] DURING THE PAST 12 MONTHS, avisó a su proveedor personal de servicios de salud sobre su uso de [fill3: modality]?

*If practitioner for therapy is the same person as personal health care provider, enter '1'.

- 1. Sí
- 2. No
- Refused
- Don't know

Universe: Sample adults 18+ who have used first of top three modalities and has a personal health care provider

Skip Instructions: <1,R,D> [goto TP1_INF1]
<2> [goto TP1_DS2]

Question ID: ALT.554_00.000 **Instrument Variable Name:** TP1_DS2 **QuestionnaireFileName:** Adult CAM

Spanish Text: ¿Porqué no avisó a su proveedor personal de servicios de salud sobre su uso de [fill1: modality]?

No estaba usándolo durante ese tiempo?

- 1. Sí
- 2. No
- Refused
- Don't know

Universe: Sample adults 18+ who have used first of top three modalities and did not tell their personal health care provider about using therapy

Skip Instructions: <1,2,R,D> [goto TP1_DS3]

Question ID: ALT.555_00.000 **Instrument Variable Name:** TP1_DS3 **QuestionnaireFileName:** Adult CAM

Spanish Text: *Read if necessary.

¿Porqué no avisó a su proveedor personal de servicios de salud sobre su uso de [fill1: modality]?

¿Ellos disuadieron su uso en el pasado?

- 1. Sí
- 2. No
- Refused
- Don't know

Universe: Sample adults 18+ who have used first of top three modalities and did not tell their personal health care provider about using therapy

Skip Instructions: <1,2,R,D> [goto TP1_DS4]

2012 NHIS Spanish Questionnaire - Adult CAM
Adult Alternative Health/Complementary And Alternative Medicine
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Question ID: ALT.556_00.000 **Instrument Variable Name:** TP1_DS4 **QuestionnaireFileName:** Adult CAM

Spanish Text: *Read if necessary.

¿Porqué no avisó a su proveedor personal de servicios de salud sobre su uso de [fill1: modality]?

¿Estaba preocupado(a) que ellos lo disuadirían?

- 1. Sí
- 2. No
- Refused
- Don't know

Universe: Sample adults 18+ who have used first of top three modalities and did not tell their personal health care provider about using therapy

Skip Instructions: <1,2,R,D> [goto TP1_DS5]

Question ID: ALT.557_00.000 **Instrument Variable Name:** TP1_DS5 **QuestionnaireFileName:** Adult CAM

Spanish Text: *Read if necessary.

¿Porqué no avisó a su proveedor personal de servicios de salud sobre su uso de [fill1: modality]?

¿Estaba preocupado(a) sobre una reacción negativa?

- 1. Sí
- 2. No
- Refused
- Don't know

Universe: Sample adults 18+ who have used first of top three modalities and did not tell their personal health care provider about using therapy

Skip Instructions: <1,2,R,D> [goto TP1_DS6]

Question ID: ALT.558_00.000 **Instrument Variable Name:** TP1_DS6 **QuestionnaireFileName:** Adult CAM

Spanish Text: *Read if necessary.

¿Porqué no avisó a su proveedor personal de servicios de salud sobre su uso de [fill1: modality]?

¿No pensaba que ellos necesitaban saberlo?

- 1. Sí
- 2. No
- Refused
- Don't know

Universe: Sample adults 18+ who have used first of top three modalities and did not tell their personal health care provider about using therapy

Skip Instructions: <1,2,R,D> [goto TP1_DS7]

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Question ID: ALT.559_00.000 **Instrument Variable Name:** TP1_DS7 **QuestionnaireFileName:** Adult CAM

Spanish Text: *Read if necessary.

¿Porqué no avisó a su proveedor personal de servicios de salud sobre su uso de [fill1: modality]?

¿Ellos no le preguntaron?

- 1. Sí
- 2. No
- Refused
- Don't know

Universe: Sample adults 18+ who have used first of top three modalities and did not tell their personal health care provider about using therapy

Skip Instructions: <1,2,R,D> [goto TP1_DS8]

Question ID: ALT.560_00.000 **Instrument Variable Name:** TP1_DS8 **QuestionnaireFileName:** Adult CAM

Spanish Text: *Read if necessary.

¿Porqué no avisó a su proveedor personal de servicios de salud sobre su uso de [fill1: modality]?

¿No piensa que ellos conocen el tema tan bien como usted?

- 1. Sí
- 2. No
- Refused
- Don't know

Universe: Sample adults 18+ who have used first of top three modalities and did not tell their personal health care provider about using therapy

Skip Instructions: <1,2,R,D> [goto TP1_DS9]

Question ID: ALT.561_00.000 **Instrument Variable Name:** TP1_DS9 **QuestionnaireFileName:** Adult CAM

Spanish Text: *Read if necessary.

¿Porqué no avisó a su proveedor personal de servicios de salud sobre su uso de [fill1: modality]?

¿No le dieron suficiente tiempo para decírselos?

- 1. Sí
- 2. No
- Refused
- Don't know

Universe: Sample adults 18+ who have used first of top three modalities and did not tell their personal health care provider about using therapy

Skip Instructions: <1,2,R,D> [goto TP1_INF1]

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Question ID: ALT.580_00.000 **Instrument Variable Name:** TP1_INF1 **QuestionnaireFileName:** Adult CAM

Spanish Text: DURANTE LOS ÚLTIMOS 12 MESES, ¿obtuvo informacion sobre [fill1: modality] de alguna de las siguientes fuentes?

¿El Internet?

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+ who have used first of top three modalities

Skip Instructions: <1,2,R,D> [goto TP1_INF2]

Question ID: ALT.581_00.000 **Instrument Variable Name:** TP1_INF2 **QuestionnaireFileName:** Adult CAM

Spanish Text: *Read if necessary.

DURANTE LOS ÚLTIMOS 12 MESES, ¿obtuvo informacion sobre [fill1: modality] de alguna de las siguientes fuentes?

¿Libros, revistas, o periódicos?

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+ who have used first of top three modalities

Skip Instructions: <1,2,R,D> [goto TP1_INF3]

Question ID: ALT.582_00.000 **Instrument Variable Name:** TP1_INF3 **QuestionnaireFileName:** Adult CAM

Spanish Text: *Read if necessary.

DURANTE LOS ÚLTIMOS 12 MESES, ¿obtuvo informacion sobre [fill1: modality] de alguna de las siguientes fuentes?

¿DVDs, videos, o CDs?

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+ who have used first of top three modalities

Skip Instructions: <1,2,R,D> [goto TP1_INF4]

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Question ID: ALT.595_00.000 **Instrument Variable Name:** TP2_REA1 **QuestionnaireFileName:** Adult CAM

Spanish Text: ¿{fill1: Vio a un practicante /Utilizó} {fill2: modality} para cualquiera de esta razones?

¿Para el bienestar en general o la prevención de enfermedades?

1. Sí
2. No
Refused
Don't know

Universe: Sample adults 18+ who have used second of top three modalities

Skip Instructions: <1,2,R,D> [goto TP2_REA2]

Question ID: ALT.596_00.000 **Instrument Variable Name:** TP2_REA2 **QuestionnaireFileName:** Adult CAM

Spanish Text: *Read if necessary.

¿{fill1: Vio a un practicante /Utilizó} {fill2: modality} para cualquiera de esta razones?

¿Para mejorar su nivel de energía?

1. Sí
2. No
Refused
Don't know

Universe: Sample adults 18+ who have used second of top three modalities

Skip Instructions: <1,2,R,D> [goto TP2_REA3]

Question ID: ALT.597_00.000 **Instrument Variable Name:** TP2_REA3 **QuestionnaireFileName:** Adult CAM

Spanish Text: *Read if necessary.

¿{fill1: Vio a un practicante /Utilizó} {fill2: modality} para cualquiera de esta razones?

¿Para mejorar su función inmune?

1. Sí
2. No
Refused
Don't know

Universe: Sample adults 18+ who have used second of top three modalities

Skip Instructions: <1,2,R,D> [goto TP2_REA4]

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Question ID: ALT.598_00.000 **Instrument Variable Name:** TP2_REA4 **QuestionnaireFileName:** Adult CAM

Spanish Text: *Read if necessary.

¿{fill1: Vio a un practicante /Utilizó} {fill2: modality} para cualquiera de esta razones?

¿Para mejorar su rendimiento atlético o deportivo?

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+ who have used second of top three modalities

Skip Instructions: <1,2,R,D> [goto TP2_REA5]

Question ID: ALT.599_00.000 **Instrument Variable Name:** TP2_REA5 **QuestionnaireFileName:** Adult CAM

Spanish Text: *Read if necessary.

¿{fill1: Vio a un practicante /Utilizó} {fill2: modality} para cualquiera de esta razones?

¿Para mejorar su memoria o concentración?

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+ who have used second of top three modalities

Skip Instructions: <1,2,R,D> [goto TP2_MOT1]

Question ID: ALT.600_00.000 **Instrument Variable Name:** TP2_MOT1 **QuestionnaireFileName:** Adult CAM

Spanish Text: ¿{fill1:Ver un practicante para/Utilizar} {fill2: modality} lo motivó para

Comer saludable?

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+ who have used second of top three modalities

Skip Instructions: <1,2,R,D> [goto TP2_MOT2]

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Question ID: ALT.601_00.000 **Instrument Variable Name:** TP2_MOT2 **QuestionnaireFileName:** Adult CAM

Spanish Text: *Read if necessary.

¿{fill1: Ver a un practicante para/Utilizar} {fill2: modality} lo motivó a

Comer más alimentos orgánicos?

- 1. Sí
- 2. No
- Refused
- Don't know

Universe: Sample adults 18+ who have used second of top three modalities

Skip Instructions: <1,2,R,D> if ALC1YR=1 [goto TP2_MOT3];
 else if SMKNOW=1,2 [goto TP2_MOT4];
 else (ALC1YR ne1 and SMKNOW ne (1,2)) [goto TP2_MOT5]

Question ID: ALT.602_00.000 **Instrument Variable Name:** TP2_MOT3 **QuestionnaireFileName:** Adult CAM

Spanish Text: *Read if necessary.

¿{fill1:Ver un practicante para/Utilizar} {fill2: modality} lo motivó para

Reducir o dejar de beber alcohol?

- 1. Sí
- 2. No
- Refused
- Don't know

Universe: Sample adults 18+ who have used second of top three modalities and who have consumed alcohol in the past 12 months

Skip Instructions: <1,2,R,D> if SMKNOW=1,2 [goto TP2_MOT4];
 else SMKNOW ne (1,2) [goto TP2_MOT5]

Question ID: ALT.603_00.000 **Instrument Variable Name:** TP2_MOT4 **QuestionnaireFileName:** Adult CAM

Spanish Text: *Read if necessary.

¿{fill1:Ver un practicante para/Utilizar} {fill2: modality} lo motivó para

Reducir o dejar de fumar cigarrillos?

- 1. Sí
- 2. No
- Refused
- Don't know

Universe: Sample adults 18+ who have used second of top three modalities and who currently smoke every day or some days

Skip Instructions: <1,2,R,D> [goto TP2_MOT5]

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Question ID: ALT.604_00.000 **Instrument Variable Name:** TP2_MOT5 **QuestionnaireFileName:** Adult CAM

Spanish Text: *Read if necessary.

¿{fill1:Ver un practicante para/Utilizar} {fill2: modality} lo motivó para

Hacer ejercicios con más regularidad?

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+ who have used second of top three modalities

Skip Instructions: <1,2,R,D> [goto TP2_OUT1]

Question ID: ALT.605_00.000 **Instrument Variable Name:** TP2_OUT1 **QuestionnaireFileName:** Adult CAM

Spanish Text: *Read if necessary.

¿{fill1:Ver un practicante para/Utilizar} {fill2: modality} le produjo alguno de estos resultados?

¿Darle un sentido de control sobre su salud?

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+ who have used second of top three modalities

Skip Instructions: <1,2,R,D> [goto TP2_OUT2]

Question ID: ALT.606_00.000 **Instrument Variable Name:** TP2_OUT2 **QuestionnaireFileName:** Adult CAM

Spanish Text: *Read if necessary.

¿{fill1:Ver un practicante para/Utilizar} {fill2: modality} le produjo alguno de estos resultados?

¿Ayudarle a reducir su nivel de estrés o relajarse?

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+ who have used second of top three modalities

Skip Instructions: <1,2,R,D> [goto TP2_OUT3]

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Question ID: ALT.607_00.000 **Instrument Variable Name:** TP2_OUT3 **QuestionnaireFileName:** Adult CAM

Spanish Text: *Read if necessary.

¿{fill1:Ver un practicante para/Utilizar} {fill2: modality} le produjo alguno de estos resultados?

¿Ayudarle a dormir mejor?

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+ who have used second of top three modalities

Skip Instructions: <1,2,R,D> [goto TP2_OUT4]

Question ID: ALT.608_00.000 **Instrument Variable Name:** TP2_OUT4 **QuestionnaireFileName:** Adult CAM

Spanish Text: *Read if necessary.

¿{fill1:Ver un practicante para/Utilizar} {fill2: modality} le produjo alguno de estos resultados?

¿Hacerle sentir mejor emocionalmente?

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+ who have used second of top three modalities

Skip Instructions: <1,2,R,D> [goto TP2_OUT5]

Question ID: ALT.609_00.000 **Instrument Variable Name:** TP2_OUT5 **QuestionnaireFileName:** Adult CAM

Spanish Text: *Read if necessary.

¿{fill1:Ver un practicante para/Utilizar} {fill2: modality} le produjo alguno de estos resultados?

¿Hacerle más fácil lidiar con problemas de la salud?

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+ who have used second of top three modalities

Skip Instructions: <1,2,R,D> [goto TP2_OUT6]

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Question ID: ALT.613_00.000 **Instrument Variable Name:** TP2_MOST **QuestionnaireFileName:** Adult CAM

Spanish Text: ¿De estas razones, cuál SOLA era la más importante para usar [fill2:modality]?

*Read list below.

1. Su bienestar en general o la prevención de enfermedades
 2. Mejorar su energía
 3. Mejorar su función inmune
 4. Mejorar su rendimiento atlético o en deportes
 5. Mejorar su memoria o concentración
 6. Comer más saludable
 7. Comer más alimentos orgánicos
 8. Reducir o dejar el consumo de alcohol
 9. Reducir o dejar el uso de cigarrillos
 10. Hacer ejercicios con más regularidad
 11. Darle a [fill4: el/ella] un sentido de control sobre su salud
 12. Ayudarle a [fill4: el/ella] reducir su nivel de estrés o a relajarse
 13. Ayudarle a [fill4: el/ella] dormir mejor
 14. Ayudarle a [fill4: el/ella] sentirse mejor emocionalmente
 15. Hacer más fácil lidiar con problemas de la salud
 16. Mejorar su salud en general y hacerle sentir mejor
 17. Mejorar sus relaciones sociales con otras personas
 18. Mejorar su puntualidad/asistencia en la escuela
- Refused
Don't know

Universe: Sample adults 18+ who have used second of top three modalities and two or more reasons for seeing a practitioner/using modality chosen

Skip Instructions: <1-18> [goto TP2_HELP]
<R,D> [goto TP2_TRET]

Question ID: ALT.614_00.000 **Instrument Variable Name:** TP2_HELP **QuestionnaireFileName:** Adult CAM

Spanish Text: ¿Cuánto piensa usted que [fill1: modality] ayudó {fill2: reason given in TP2_MOST question}? Diría...

*Read categories below.

1. Muchísimo
 2. Algo
 3. Solo un poco
 4. Nada
- Refused
Don't know

Universe: Sample adults 18+ who have used second of top three modalities and had a most important reason for using selected modality/seeing a practitioner for selected modality

Skip Instructions: <1-4,R,D> [goto TP2_TRET]

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Question ID: ALT.615_00.000 **Instrument Variable Name:** TP2_TRET **QuestionnaireFileName:** Adult CAM

Spanish Text: DURANTE LOS ÚLTIMOS 12 MESES, ¿{fill1: Vio a un practicante/Utilizó} {fill2:modality} para uno o más problemas, síntomas, o condiciones de salud específicos?

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+ who have used second of top three modalities

Skip Instructions: <1> [goto TP2_COND]
<2,R,D> ALT_TP32 in (6,7,10-16) [goto TP2_RS5];
else ALT_TP32 ne (6,7,10-16) [goto TP2_RS6]

Question ID: ALT.616_00.000 **Instrument Variable Name:** TP2_COND **QuestionnaireFileName:** Adult CAM

Spanish Text: ¿Para cuáles problemas, síntomas, o condiciones de salud específicos {fill1: vio a un practicante para/utilizó} {fill2: modality}?

*Enter all that apply, separate with commas.

Fill applicable conditions from ACAMCND1

Universe: Sample adults 18+ who have used second of top three modalities and saw a practitioner or used modality for a specific health problem, symptom or condition

Skip Instructions: <1-86> If TP2_CNT>1 [goto TP2_CMST],
else if TP2_CNT=1 [goto TP2_CHLP];
<86> [goto TP2_SPEC];
<R,D> if self-care modality (ALT_TP32 in (6,7,10-16)) [goto TP2_RS5];
else (ALT_TP32 ne (6,7,10-16)) [goto TP2_RS6]

Question ID: ALT.616_00.010 **Instrument Variable Name:** TP2_SPEC **QuestionnaireFileName:** Adult CAM

Spanish Text:
Universe: Sample adults 18+ who have used second of top three modalities and used modality to treat other health problem or condition

Skip Instructions: <Allow 75, R,D> If TP2_CNT>1 [goto TP2_CMST],
elseif TP2_CNT =1 [goto TP2_CHLP];
<R,D> If TP2_CNT=1 and if self-care modality (ALT_TP32 in (6,7,10-16)) [goto TP2_RS5];
else [goto TP2_RS6]

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Question ID: ALT.620_00.000 **Instrument Variable Name:** TP2_MTR2 **QuestionnaireFileName:** Adult CAM

Spanish Text: *Read if necessary.

¿Recibió alguno de estos tratamientos médicos para [fill1: condition from TP2_CMST]?

¿Medicamentos sin receta?

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+ who have used second of top three modalities and used modality to treat specific condition(s)

Skip Instructions: <1,2,R,D> [goto TP2_MTR3]

Question ID: ALT.621_00.000 **Instrument Variable Name:** TP2_MTR3 **QuestionnaireFileName:** Adult CAM

Spanish Text: *Read if necessary.

¿Recibió alguno de estos tratamientos médicos para [fill1: condition from TP2_CMST]?

¿Cirujía?

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+ who have used second of top three modalities and used modality to treat specific condition(s)

Skip Instructions: <1,2,R,D> [goto TP2_MTR4]

Question ID: ALT.622_00.000 **Instrument Variable Name:** TP2_MTR4 **QuestionnaireFileName:** Adult CAM

Spanish Text: *Read if necessary.

¿Recibió alguno de estos tratamientos médicos para [fill1: condition from TP2_CMST]?

¿Terapia física?

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+ who have used second of top three modalities and used modality to treat specific condition(s)

Skip Instructions: <1,2,R,D> [goto TP2_MTR5]

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Question ID: ALT.623_00.000 **Instrument Variable Name:** TP2_MTR5 **QuestionnaireFileName:** Adult CAM

Spanish Text: *Read if necessary.

¿Recibió alguno de estos tratamientos médicos para [fill1: condition from TP2_CMST]?

¿Consejo de salud mental?

1. Sí
2. No
- Refused
- Don't know

Universe: Sample adults 18+ who have used second of top three modalities and used modality to treat specific condition(s)

Skip Instructions: <1,2,R,D> if TP2_MTR1=1 or TP2_MTR2=1 or TP2_MTR3=1 or TP2_MTR4=1 or TP2_MTR5=1 [goto TP2_RS1];
 else if self-care modality (ALT_TP32=6,7,10-16) [goto TP2_RS5];
 else [goto TP2_RS6]

Question ID: ALT.624_00.000 **Instrument Variable Name:** TP2_RS1 **QuestionnaireFileName:** Adult CAM

Spanish Text: DURANTE LOS ÚLTIMOS 12 MESES, ¿[fill1: Vio a un practicante para/Utilizó} {fill2:modality} por alguna de estas razones?

¿Estos tratamientos médicos eran muy caros?

1. Sí
2. No
- Refused
- Don't know

Universe: Sample adults 18+ who have used second of top three modalities and used some type of treatment for specific condition(s)

Skip Instructions: <1,2,R,D> [goto TP2_RS2]

Question ID: ALT.625_00.000 **Instrument Variable Name:** TP2_RS2 **QuestionnaireFileName:** Adult CAM

Spanish Text: *Read if necessary.

DURANTE LOS ÚLTIMOS 12 MESES, ¿[fill1: Vio a un practicante para/Utilizó} {fill2:modality} por alguna de estas razones?

¿[fill3: modality] en combinación con estos tratamientos médicos ayudarían?

1. Sí
2. No
- Refused
- Don't know

Universe: Sample adults 18+ who have used second of top three modalities and used some type of treatment for specific condition(s)

Skip Instructions: <1,2,R,D> [goto TP2_RS3]

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Question ID: ALT.626_00.000 **Instrument Variable Name:** TP2_RS3 **QuestionnaireFileName:** Adult CAM

Spanish Text: *Read if necessary.

DURANTE LOS ÚLTIMOS 12 MESES, ¿{fill1: vio a un practicante para/utilizó } {fill2:modality} por alguna de estas razones?

¿Estos tratamientos no fucionana para el problema de salud que usted desea tratar o prevenir?

1. Si
2. No
- Refused
- Don't know

Universe: Sample adults 18+ who have used second of top three modalities and used some type of treatment for specific condition(s)

Skip Instructions: <1,2,R,D> if TP2_MTR1=1 or TP2_MTR2=1 [goto TP2_RS4];
 else if self-care modality (ALT_TP32=6,7,10-16) [goto TP2_RS5];
 else [goto TP2_RS6]

Question ID: ALT.627_00.000 **Instrument Variable Name:** TP2_RS4 **QuestionnaireFileName:** Adult CAM

Spanish Text: *Read if necessary.

DURANTE LOS ÚLTIMOS 12 MESES, ¿{fill1: Vio a un practicante para/Utilizó } {fill2:modality} por alguna de estas razones?

Fill3: ¿Los medicamentos recetados/¿Los medicamentos sin receta/¿Los medicamentos recetados o sin receta] causan efectos secundarios?

1. Si
2. No
- Refused
- Don't know

Universe: Sample adults 18+ who have used second of top three modalities and used prescription or over-the-counter medications to treat specific condition(s)

Skip Instructions: <1,2,R,D> if self-care modality (ALT_TP32=6,7,10-16) [goto TP2_RS5];
 else [goto TP2_RS6]

Question ID: ALT.628_00.000 **Instrument Variable Name:** TP2_RS5 **QuestionnaireFileName:** Adult CAM

Spanish Text: DURANTE LOS ÚLTIMOS 12 MESES, ¿Utilizó {fill1:modality } por alguna de estas razones?

¿Porque se puede hacer sin la ayuda de un especialista?

1. Si
2. No
- Refused
- Don't know

Universe: Sample adults 18+ who have used second of top three modalities and picked a self care modality

Skip Instructions: <1,2,R,D> [goto TP2_RS6]

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Question ID: ALT.629_00.000 **Instrument Variable Name:** TP2_RS6 **QuestionnaireFileName:** Adult CAM

Spanish Text: DURANTE LOS ÚLTIMOS 12 MESES, ¿[fill1: Vio a un practicante para/Utilizó] [fill2: modality} por alguna de estas razones?

¿Es natural?

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+ who have used second of top three modalities

Skip Instructions: <1,2,R,D> [goto TP2_RS7]

Question ID: ALT.630_00.000 **Instrument Variable Name:** TP2_RS7 **QuestionnaireFileName:** Adult CAM

Spanish Text: *Read if necessary.

DURANTE LOS ÚLTIMOS 12 MESES, ¿[fill1: Vio a un practicante para/Utilizó] [fill2: modality} por alguna de estas razones?

¿ Enfoca en el la persona en su totalidad, mente, cuerpo, y espíritu?

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+ who have used second of top three modalities

Skip Instructions: <1,2,R,D> [goto TP2_RS8]

Question ID: ALT.631_00.000 **Instrument Variable Name:** TP2_RS8 **QuestionnaireFileName:** Adult CAM

Spanish Text: *Read if necessary.

DURANTE LOS ÚLTIMOS 12 MESES, ¿[fill1: Vio a un practicante para/Utilizó] [fill2: modality} por alguna de estas razones?

¿Trata la causa y no solo los síntomas?

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+ who have used second of top three modalities

Skip Instructions: <1,2,R,D> [goto TP2_RS9]

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Question ID: ALT.632_00.000 **Instrument Variable Name:** TP2_RS9 **QuestionnaireFileName:** Adult CAM

Spanish Text: *Read if necessary.

DURANTE LOS ÚLTIMOS 12 MESES, ¿[fill1: Vio a un practicante para/Utilizó] [fill2: modality} por alguna de estas razones?

¿Era parte de su crianza?

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+ who have used second of top three modalities

Skip Instructions: <1,2,R,D> [goto TP2_REC1]

Question ID: ALT.633_00.000 **Instrument Variable Name:** TP2_REC1 **QuestionnaireFileName:** Adult CAM

Spanish Text: ¿{fill1: Vio a un practicante para/Utilizó} {fill2: modality} porque fue recomendado por alguna de las siguientes personas?

¿Un doctor de medicina?

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+ who have used second of top three modalities

Skip Instructions: <1,2,R,D> [goto TP2_REC2]

Question ID: ALT.634_00.000 **Instrument Variable Name:** TP2_REC2 **QuestionnaireFileName:** Adult CAM

Spanish Text: *Read if necessary.

¿{fill1: Vio a un practicante para/Utilizó} {fill2: modality} porque fue recomendado por alguna de las siguientes personas?

¿Un familiar?

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+ who have used second of top three modalities

Skip Instructions: <1,2,R,D> [goto TP2_REC3]

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Question ID: ALT.638_00.000 **Instrument Variable Name:** TP2_DS1 **QuestionnaireFileName:** Adult CAM

Spanish Text: [fill1: Sin incluir el practicante que usted vio para] [fill2: modality] DURANTE LOS ÚLTIMOS 12 MESES, avisó a su proveedor personal de servicios de salud sobre su uso de [fill3: modality]?

*If practitioner for therapy is the same person as personal health care provider, enter '1'.

- 1. Sí
- 2. No
- Refused
- Don't know

Universe: Sample adults 18+ who have used second of top three modalities and has a personal health care provider

Skip Instructions: <1,R,D> [goto TP2_INF1]
<2> [goto TP2_DS2]

Question ID: ALT.639_00.000 **Instrument Variable Name:** TP2_DS2 **QuestionnaireFileName:** Adult CAM

Spanish Text: ¿Porqué no avisó a su proveedor personal de servicios de salud sobre su uso de [fill1: modality]?

No estaba usándolo durante ese tiempo?

- 1. Sí
- 2. No
- Refused
- Don't know

Universe: Sample adults 18+ who have used second of top three modalities and did not tell their personal health care provider about using therapy

Skip Instructions: <1,2,R,D> [goto TP2_DS3]

Question ID: ALT.640_00.000 **Instrument Variable Name:** TP2_DS3 **QuestionnaireFileName:** Adult CAM

Spanish Text: *Read if necessary.

¿Porqué no avisó a su proveedor personal de servicios de salud sobre su uso de [fill1: modality]?

¿Ellos disuadieron su uso en el pasado?

- 1. Sí
- 2. No
- Refused
- Don't know

Universe: Sample adults 18+ who have used second of top three modalities and did not tell their personal health care provider about using therapy

Skip Instructions: <1,2,R,D> [goto TP2_DS4]

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Question ID: ALT.641_00.000 **Instrument Variable Name:** TP2_DS4 **QuestionnaireFileName:** Adult CAM

Spanish Text: *Read if necessary.

¿Porqué no avisó a su proveedor personal de servicios de salud sobre su uso de [fill1: modality]?

¿Estaba preocupado(a) que ellos lo disuadirían?

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+ who have used second of top three modalities and did not tell their personal health care provider about using therapy

Skip Instructions: <1,2,R,D> [goto TP2_DS5]

Question ID: ALT.642_00.000 **Instrument Variable Name:** TP2_DS5 **QuestionnaireFileName:** Adult CAM

Spanish Text: *Read if necessary.

¿Porqué no avisó a su proveedor personal de servicios de salud sobre su uso de [fill1: modality]?

¿Estaba preocupado(a) sobre una reacción negativa?

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+ who have used second of top three modalities and did not tell their personal health care provider about using therapy

Skip Instructions: <1,2,R,D> [goto TP2_DS6]

Question ID: ALT.643_00.000 **Instrument Variable Name:** TP2_DS6 **QuestionnaireFileName:** Adult CAM

Spanish Text: *Read if necessary.

¿Porqué no avisó a su proveedor personal de servicios de salud sobre su uso de [fill1: modality]?

¿No pensaba que ellos necesitaban saberlo?

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+ who have used second of top three modalities and did not tell their personal health care provider about using therapy

Skip Instructions: <1,2,R,D> [goto TP2_DS7]

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Question ID: ALT.644_00.000 **Instrument Variable Name:** TP2_DS7 **QuestionnaireFileName:** Adult CAM

Spanish Text: *Read if necessary.

¿Porqué no avisó a su proveedor personal de servicios de salud sobre su uso de [fill1: modality]?

¿Ellos no le preguntaron?

- 1. Sí
- 2. No
- Refused
- Don't know

Universe: Sample adults 18+ who have used second of top three modalities and did not tell their personal health care provider about using therapy

Skip Instructions: <1,2,R,D> [goto TP2_DS8]

Question ID: ALT.645_00.000 **Instrument Variable Name:** TP2_DS8 **QuestionnaireFileName:** Adult CAM

Spanish Text: *Read if necessary.

¿Porqué no avisó a su proveedor personal de servicios de salud sobre su uso de [fill1: modality]?

¿No piensa que ellos conocen el tema tan bien como usted?

- 1. Sí
- 2. No
- Refused
- Don't know

Universe: Sample adults 18+ who have used second of top three modalities and did not tell their personal health care provider about using therapy

Skip Instructions: <1,2,R,D> [goto TP2_DS9]

Question ID: ALT.646_00.000 **Instrument Variable Name:** TP2_DS9 **QuestionnaireFileName:** Adult CAM

Spanish Text: *Read if necessary.

¿Porqué no avisó a su proveedor personal de servicios de salud sobre su uso de [fill1: modality]?

¿No le dieron suficiente tiempo para decírselos?

- 1. Sí
- 2. No
- Refused
- Don't know

Universe: Sample adults 18+ who have used second of top three modalities and did not tell their personal health care provider about using therapy

Skip Instructions: <1,2,R,D> [goto TP2_INF1]

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Question ID: ALT.675_00.000 **Instrument Variable Name:** TP2_INF1 **QuestionnaireFileName:** Adult CAM

Spanish Text: DURANTE LOS ÚLTIMOS 12 MESES, ¿obtuvo informacion sobre [fill1: modality] de alguna de las siguientes fuentes?

¿El Internet?

- 1. Sí
- 2. No
- Refused
- Don't know

Universe: Sample adults 18+ who have used second of top three modalities

Skip Instructions: <1,2,R,D> [goto TP2_INF2]

Question ID: ALT.676_00.000 **Instrument Variable Name:** TP2_INF2 **QuestionnaireFileName:** Adult CAM

Spanish Text: *Read if necessary.

DURANTE LOS ÚLTIMOS 12 MESES, ¿obtuvo informacion sobre [fill1: modality] de alguna de las siguientes fuentes?

¿Libros, revistas, o periódicos?

- 1. Sí
- 2. No
- Refused
- Don't know

Universe: Sample adults 18+ who have used second of top three modalities

Skip Instructions: <1,2,R,D> [goto TP2_INF3]

Question ID: ALT.677_00.000 **Instrument Variable Name:** TP2_INF3 **QuestionnaireFileName:** Adult CAM

Spanish Text: *Read if necessary.

DURANTE LOS ÚLTIMOS 12 MESES, ¿obtuvo informacion sobre [fill1: modality] de alguna de las siguientes fuentes?

¿DVDs, videos, o CDs?

- 1. Sí
- 2. No
- Refused
- Don't know

Universe: Sample adults 18+ who have used second of top three modalities

Skip Instructions: <1,2,R,D> [goto TP2_INF4]

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Question ID: ALT.690_00.000 **Instrument Variable Name:** TP3_REA1 **QuestionnaireFileName:** Adult CAM

Spanish Text: ¿{fill1: Vio a un practicante /Utilizó} {fill2: modality} para cualquiera de esta razones?

¿Para el bienestar en general o la prevención de enfermedades?

- 1. Sí
- 2. No
- Refused
- Don't know

Universe: Sample adults 18+ who have used third of top three modalities

Skip Instructions: <1,2,R,D> [goto TP3_REA2]

Question ID: ALT.691_00.000 **Instrument Variable Name:** TP3_REA2 **QuestionnaireFileName:** Adult CAM

Spanish Text: *Read if necessary.

¿{fill1: Vio a un practicante /Utilizó} {fill2: modality} para cualquiera de esta razones?

¿Para mejorar su nivel de energía?

- 1. Sí
- 2. No
- Refused
- Don't know

Universe: Sample adults 18+ who have used third of top three modalities

Skip Instructions: <1,2,R,D> [goto TP3_REA3]

Question ID: ALT.692_00.000 **Instrument Variable Name:** TP3_REA3 **QuestionnaireFileName:** Adult CAM

Spanish Text: *Read if necessary.

¿{fill1: Vio a un practicante /Utilizó} {fill2: modality} para cualquiera de esta razones?

¿Para mejorar su función inmune?

- 1. Sí
- 2. No
- Refused
- Don't know

Universe: Sample adults 18+ who have used third of top three modalities

Skip Instructions: <1,2,R,D> [goto TP3_REA4]

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Question ID: ALT.693_00.000 **Instrument Variable Name:** TP3_REA4 **QuestionnaireFileName:** Adult CAM

Spanish Text: *Read if necessary.

¿{fill1: Vio a un practicante /Utilizó} {fill2: modality} para cualquiera de esta razones?

¿Para mejorar su rendimiento atlético o deportivo?

- 1. Sí
- 2. No
- Refused
- Don't know

Universe: Sample adults 18+ who have used third of top three modalities

Skip Instructions: <1,2,R,D> [goto TP3_REA5]

Question ID: ALT.694_00.000 **Instrument Variable Name:** TP3_REA5 **QuestionnaireFileName:** Adult CAM

Spanish Text: *Read if necessary.

¿{fill1: Vio a un practicante /Utilizó} {fill2: modality} para cualquiera de esta razones?

¿Para mejorar su memoria o concentración?

- 1. Sí
- 2. No
- Refused
- Don't know

Universe: Sample adults 18+ who have used third of top three modalities

Skip Instructions: <1,2,R,D> [goto TP3_MOT1]

Question ID: ALT.695_00.000 **Instrument Variable Name:** TP3_MOT1 **QuestionnaireFileName:** Adult CAM

Spanish Text: ¿{fill1: Ver un practicante para/Utilizar} {fill2: modality} lo motivó para

Comer saludable?

- 1. Sí
- 2. No
- Refused
- Don't know

Universe: Sample adults 18+ who have used third of top three modalities

Skip Instructions: <1,2,R,D> [goto TP3_MOT2]

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Question ID: ALT.696_00.000 **Instrument Variable Name:** TP3_MOT2 **QuestionnaireFileName:** Adult CAM

Spanish Text: *Read if necessary.

¿{fill1: Ver a un practicante para/Utilizar} {fill2: modality} lo motivó a

Comer más alimentos orgánicos?

1. Sí
2. No
- Refused
- Don't know

Universe: Sample adults 18+ who have used third of top three modalities

Skip Instructions: <1,2,R,D> if ALC1YR=1 [goto TP3_MOT3];
 else if SMKNOW=1,2 [goto TP3_MOT4];
 else (ALC1YR ne1 and SMKNOW ne (1,2)) [goto TP3_MOT5]

Question ID: ALT.697_00.000 **Instrument Variable Name:** TP3_MOT3 **QuestionnaireFileName:** Adult CAM

Spanish Text: *Read if necessary.

¿{fill1:Ver un practicante para/Utilizar} {fill2: modality} lo motivó para

Reducir o dejar de beber alcohol?

1. Sí
2. No
- Refused
- Don't know

Universe: Sample adults 18+ who have used third of top three modalities and who have consumed alcohol in the past 12 months

Skip Instructions: <1,2,R,D> if SMKNOW=1,2 [goto TP3_MOT4];
 else SMKNOW ne (1,2) [[goto TP3_MOT5]

Question ID: ALT.698_00.000 **Instrument Variable Name:** TP3_MOT4 **QuestionnaireFileName:** Adult CAM

Spanish Text: *Read if necessary.

¿{fill1:Ver un practicante para/Utilizar} {fill2: modality} lo motivó para

Reducir o dejar de beber alcohol?

1. Sí
2. No
- Refused
- Don't know

Universe: Sample adults 18+ who have used third of top three modalities and who currently smoke every day or some days

Skip Instructions: <1,2,R,D> [goto TP3_MOT5]

2012 NHIS Spanish Questionnaire - Adult CAM
Adult Alternative Health/Complementary And Alternative Medicine
Document Version Date: 30-May-13

Question ID: ALT.699_00.000 **Instrument Variable Name:** TP3_MOT5 **QuestionnaireFileName:** Adult CAM

Spanish Text: ¿{fill1:Ver un practicante para/Utilizar} {fill2: modality} lo motivó para
Hacer ejercicios con más regularidad?
1. Sí
2. No
Refused
Don't know

Universe: Sample adults 18+ who have used third of top three modalities

Skip Instructions: <1,2,R,D> [goto TP3_OUT1]

Question ID: ALT.700_00.000 **Instrument Variable Name:** TP3_OUT1 **QuestionnaireFileName:** Adult CAM

Spanish Text: *Read if necessary.
¿{fill1:Ver un practicante para/Utilizar} {fill2: modality} le produjo alguno de estos resultados?
¿Darle un sentido de control sobre su salud?
1. Sí
2. No
Refused
Don't know

Universe: Sample adults 18+ who have used third of top three modalities

Skip Instructions: <1,2,R,D> [goto TP3_OUT2]

Question ID: ALT.701_00.000 **Instrument Variable Name:** TP3_OUT2 **QuestionnaireFileName:** Adult CAM

Spanish Text: *Read if necessary.
¿{fill1:Ver un practicante para/Utilizar} {fill2: modality} le produjo alguno de estos resultados?
¿Ayudarle a reducir su nivel de estrés o relajarse?
1. Sí
2. No
Refused
Don't know

Universe: Sample adults 18+ who have used third of top three modalities

Skip Instructions: <1,2,R,D> [goto TP3_OUT3]

2012 NHIS Spanish Questionnaire - Adult CAM
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Question ID: ALT.702_00.000 **Instrument Variable Name:** TP3_OUT3 **QuestionnaireFileName:** Adult CAM

Spanish Text: *Read if necessary.

¿{fill1:Ver un practicante para/Utilizar} {fill2: modality} le produjo alguno de estos resultados?

¿Ayudarle a dormir mejor?

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+ who have used third of top three modalities

Skip Instructions: <1,2,R,D> [goto TP3_OUT4]

Question ID: ALT.703_00.000 **Instrument Variable Name:** TP3_OUT4 **QuestionnaireFileName:** Adult CAM

Spanish Text: *Read if necessary.

¿{fill1:Ver un practicante para/Utilizar} {fill2: modality} le produjo alguno de estos resultados?

¿Hacerle sentir mejor emocionalmente?

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+ who have used third of top three modalities

Skip Instructions: <1,2,R,D> [goto TP3_OUT5]

Question ID: ALT.704_00.000 **Instrument Variable Name:** TP3_OUT5 **QuestionnaireFileName:** Adult CAM

Spanish Text: *Read if necessary.

¿{fill1:Ver un practicante para/Utilizar} {fill2: modality} le produjo alguno de estos resultados?

¿Hacerle más fácil lidiar con problemas de la salud?

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+ who have used third of top three modalities

Skip Instructions: <1,2,R,D> [goto TP3_OUT6]

2012 NHIS Spanish Questionnaire - Adult CAM
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Document Version Date: 30-May-13

Question ID: ALT.708_00.000 **Instrument Variable Name:** TP3_MOST **QuestionnaireFileName:** Adult CAM

Spanish Text: ¿De estas razones, cuál SOLA era la más importante para usar [fill2:modality]?

*Read list below.

1. Su bienestar en general o la prevención de enfermedades
 2. Mejorar su energía
 3. Mejorar su función inmune
 4. Mejorar su rendimiento atlético o en deportes
 5. Mejorar su memoria o concentración
 6. Comer más saludable
 7. Comer más alimentos orgánicos
 8. Reducir o dejar el consumo de alcohol
 9. Reducir o dejar el uso de cigarrillos
 10. Hacer ejercicios con más regularidad
 11. Darle a [fill4: el/ella] un sentido de control sobre su salud
 12. Ayudarle a [fill4: el/ella] reducir su nivel de estrés o a relajarse
 13. Ayudarle a [fill4: el/ella] dormir mejor
 14. Ayudarle a [fill4: el/ella] sentirse mejor emocionalmente
 15. Hacer más fácil lidiar con problemas de la salud
 16. Mejorar su salud en general y hacerle sentir mejor
 17. Mejorar sus relaciones sociales con otras personas
 18. Mejorar su puntualidad/asistencia en la escuela
- Refused
Don't know

Universe: Sample adults 18+ who have used third of top three modalities and had two or more reasons for seeing a practitioner/using modality chosen

Skip Instructions: <1-18> [goto TP3_HELP]
<R,D> [goto TP3_TRET]

Question ID: ALT.709_00.000 **Instrument Variable Name:** TP3_HELP **QuestionnaireFileName:** Adult CAM

Spanish Text: ¿Cuánto piensa usted que [fill1: modality] ayudó {fill2: reason given in TP3_MOST question}? Diría...

*Read categories below.

1. Muchísimo
 2. Algo
 3. Solo un poco
 4. Nada
- Refused
Don't know

Universe: Sample adults 18+ who have used third of top three modalities and had a most important reason for using selected modality/seeing a practitioner for selected modality

Skip Instructions: <1-4,R,D> [goto TP3_TRET]

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Question ID: ALT.710_00.000 **Instrument Variable Name:** TP3_TRET **QuestionnaireFileName:** Adult CAM

Spanish Text: DURANTE LOS ÚLTIMOS 12 MESES, ¿{fill1: Vio a un practicante/Utilizó} {fill2:modality} para uno o más problemas, síntomas, o condiciones de salud específicos?

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+ who have used third of top three modalities

Skip Instructions: <1> [goto TP3_COND]
<2,R,D> ALT_TP33 in (6,7,10-16) [goto TP3_RS5];
else ALT_TP33 ne (6,7,10-16) [goto TP3_RS6]

Question ID: ALT.711_00.000 **Instrument Variable Name:** TP3_COND **QuestionnaireFileName:** Adult CAM

Spanish Text: ¿Para cuáles problemas, síntomas, o condiciones de salud específicos {fill1: vio a un practicante para/utilizó} {fill2: modality}?

*Enter all that apply, separate with commas.

Fill answers from ACAMCND1

Universe: Sample adults 18+ who have used third of top three modalities and saw a practitioner or used modality for a specific health problem, symptom or condition

Skip Instructions: <1-86> If TP3_CNT>1 [goto TP3_CMST],
else if TP3_CNT=1 [goto TP3_CHLP];
<86> [goto TP3_SPEC];
<R,D> if self-care modality (ALT_TP33 in (6,7,10-16)) [goto TP3_RS5];
else (ALT_TP33 ne (6,7,10-16)) [goto TP3_RS6]

Question ID: ALT.711_00.010 **Instrument Variable Name:** TP3_SPEC **QuestionnaireFileName:** Adult CAM

Spanish Text:
Universe: Sample adults 18+ who have used third of top three modalities and used modality to treat other health problem or condition

Skip Instructions: <Allow 75, R,D> If TP3_CNT>1 [goto TP3_CMST],
elseif TP3_CNT =1 [goto TP3_CHLP];
<R,D> If TP3_CNT=1 and if self-care modality (ALT_TP33 in (6,7,10-16)) [goto TP3_RS5];
else [goto TP3_RS6]

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Question ID: ALT.712_00.000 **Instrument Variable Name:** TP3_CMST **QuestionnaireFileName:** Adult CAM

Spanish Text: ¿Para CUÁL de estas {fill1: vio a un practicante para/utilizó} {fill2: modality} más frecuentemente?

*If respondent cannot choose one condition, probe for condition most important for using therapy.

Fill answers from TP3_COND or TP3_SPEC

Universe: Sample adults 18+ who have used third of top three modalities and used modality to treat specific conditions and more than one condition selected

Skip Instructions: <1-86> [goto TP3_CHLP]
 <R,D> if self-care modality (ALT_TP33=6,7,10-16) [goto TP3_RS5];
 else [goto TP3_RS6]

Question ID: ALT.713_00.000 **Instrument Variable Name:** TP3_CHLP **QuestionnaireFileName:** Adult CAM

Spanish Text: ¿Cuánto piensa usted que [fill1: modality] ayudó con su [fill2: condition from TP3_CMST]? Diría...

*Read categories below.

1. Muchísimo
 2. Algo
 3. Solo un poco
 4. Nada
- Refused
Don't know

Universe: Sample adults 18+ who have used third of top three modalities and used modality to treat specific condition(s)

Skip Instructions: <1-4,R,D> [goto TP3_MTR1]

Question ID: ALT.714_00.000 **Instrument Variable Name:** TP3_MTR1 **QuestionnaireFileName:** Adult CAM

Spanish Text: ¿Recibió alguno de estos tratamientos médicos para [fill1: condition from TP3_CMST]?

¿Medicamentos recetados?

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+ who have used third of top three modalities and used modality to treat specific condition(s)

Skip Instructions: <1,2,R,D> [goto TP3_MTR2]

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Question ID: ALT.715_00.000 **Instrument Variable Name:** TP3_MTR2 **QuestionnaireFileName:** Adult CAM

Spanish Text: *Read if necessary.

¿Recibió alguno de estos tratamientos médicos para [fill1: condition from TP3_CMST]?

¿Medicamentos sin receta?

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+ who have used third of top three modalities and used modality to treat specific condition(s)

Skip Instructions: <1,2,R,D> [goto TP3_MTR3]

Question ID: ALT.716_00.000 **Instrument Variable Name:** TP3_MTR3 **QuestionnaireFileName:** Adult CAM

Spanish Text: *Read if necessary.

¿Recibió alguno de estos tratamientos médicos para [fill1: condition from TP3_CMST]?

¿Cirujía?

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+ who have used third of top three modalities and used modality to treat specific condition(s)

Skip Instructions: <1,2,R,D> [goto TP3_MTR4]

Question ID: ALT.717_00.000 **Instrument Variable Name:** TP3_MTR4 **QuestionnaireFileName:** Adult CAM

Spanish Text: *Read if necessary.

¿Recibió alguno de estos tratamientos médicos para [fill1: condition from TP3_CMST]?

¿Terapia física?

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+ who have used third of top three modalities and used modality to treat specific condition(s)

Skip Instructions: <1,2,R,D> [goto TP3_MTR5]

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Question ID: ALT.718_00.000 **Instrument Variable Name:** TP3_MTR5 **QuestionnaireFileName:** Adult CAM

Spanish Text: *Read if necessary.

¿Recibió alguno de estos tratamientos médicos para [fill1: condition from TP3_CMST]?

¿Consejo de salud mental?

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+ who have used third of top three modalities and used modality to treat specific condition(s)

Skip Instructions: <1,2,R,D> if TP3_MTR1=1 or TP3_MTR2=1 or TP3_MTR3=1 or TP3_MTR4=1 or TP3_MTR5=1 [goto TP3_RS1];
 else if self-care modality (ALT_TP33=6,7,10-16) [goto TP3_RS5];
 else [goto TP3_RS6]

Question ID: ALT.719_00.000 **Instrument Variable Name:** TP3_RS1 **QuestionnaireFileName:** Adult CAM

Spanish Text: DURANTE LOS ÚLTIMOS 12 MESES, ¿[fill1: Vio a un practicante para/Utilizó} {fill2:modality} por alguna de estas razones?

¿Estos tratamientos médicos eran muy caros?

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+ who have used third of top three modalities and used treatments for specific condition(s)

Skip Instructions: <1,2,R,D> [goto TP3_RS2]

Question ID: ALT.720_00.000 **Instrument Variable Name:** TP3_RS2 **QuestionnaireFileName:** Adult CAM

Spanish Text: *Read if necessary.

DURANTE LOS ÚLTIMOS 12 MESES, ¿[fill1: Vio a un practicante para/Utilizó} {fill2:modality} por alguna de estas razones?

¿[fill3: modality] en combinación con estos tratamientos médicos ayudarían?

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+ who have used third of top three modalities and used treatments for specific condition(s)

Skip Instructions: <1,2,R,D> [goto TP3_RS3]

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Question ID: ALT.721_00.000 **Instrument Variable Name:** TP3_RS3 **QuestionnaireFileName:** Adult CAM

Spanish Text: *Read if necessary.

DURANTE LOS ÚLTIMOS 12 MESES, ¿{fill1: Vio a un practicante para/Utilizó} {fill2:modality} por alguna de estas razones?

¿Estos tratamientos no fucionana para el problema de salud que usted desea tratar o prevenir?

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+ who have used third of top three modalities and used treatments for specific condition(s)

Skip Instructions: <1,2,R,D> if TP3_MTR1=1 or TP3_MTR2=1 [goto TP3_RS4];
 else if self-care modality (ALT_TP33=6,7,10-16) [goto TP3_RS5];
 else [goto TP3_RS6]

Question ID: ALT.722_00.000 **Instrument Variable Name:** TP3_RS4 **QuestionnaireFileName:** Adult CAM

Spanish Text: *Read if necessary.

DURANTE LOS ÚLTIMOS 12 MESES, ¿{fill1: Vio a un practicante para/Utilizó} {fill2:modality} por alguna de estas razones?

Fill3: ¿Los medicamentos recetados/¿Los medicamentos sin receta/¿Los medicamentos recetados o sin receta] causan efectos secundarios?

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+ who have used third of top three modalities and used prescription or over-the-counter medication to treat specific condition(s)

Skip Instructions: <1,2,R,D> if self-care modality (ALT_TP33=6,7,10-16) [goto TP3_RS5];
 else [goto TP3_RS6]

Question ID: ALT.723_00.000 **Instrument Variable Name:** TP3_RS5 **QuestionnaireFileName:** Adult CAM

Spanish Text: DURANTE LOS ÚLTIMOS 12 MESES, ¿Utilizó {fill1:modality } por alguna de estas razones?

¿Porque se puede hacer sin la ayuda de un especialista?

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+ who have used third of top three modalities and picked a self care modality

Skip Instructions: <1,2,R,D> [goto TP3_RS6]

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Question ID: ALT.724_00.000 **Instrument Variable Name:** TP3_RS6 **QuestionnaireFileName:** Adult CAM

Spanish Text: DURANTE LOS ÚLTIMOS 12 MESES, ¿[fill1: Vio a un practicante para/Utilizó] [fill2: modality} por alguna de estas razones?

¿Es natural?

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+ who have used third of top three modalities

Skip Instructions: <1,2,R,D> [goto TP3_RS7]

Question ID: ALT.725_00.000 **Instrument Variable Name:** TP3_RS7 **QuestionnaireFileName:** Adult CAM

Spanish Text: *Read if necessary.

DURANTE LOS ÚLTIMOS 12 MESES, ¿[fill1: Vio a un practicante para/Utilizó] [fill2: modality} por alguna de estas razones?

¿ Enfoca en el la persona en su totalidad, mente, cuerpo, y espíritu?

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+ who have used third of top three modalities

Skip Instructions: <1,2,R,D> [goto TP3_RS8]

Question ID: ALT.726_00.000 **Instrument Variable Name:** TP3_RS8 **QuestionnaireFileName:** Adult CAM

Spanish Text: *Read if necessary.

DURANTE LOS ÚLTIMOS 12 MESES, ¿[fill1: Vio a un practicante para/Utilizó] [fill2: modality} por alguna de estas razones?

¿Trata la causa y no solo los síntomas?

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+ who have used third of top three modalities

Skip Instructions: <1,2,R,D> [goto TP3_RS9]

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Question ID: ALT.727_00.000 **Instrument Variable Name:** TP3_RS9 **QuestionnaireFileName:** Adult CAM

Spanish Text: *Read if necessary.

DURANTE LOS ÚLTIMOS 12 MESES, ¿[fill1: Vio a un practicante para/Utilizó] [fill2: modality} por alguna de estas razones?

¿Era parte de su crianza?

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+ who have used third of top three modalities

Skip Instructions: <1,2,R,D> [goto TP3_REC1]

Question ID: ALT.728_00.000 **Instrument Variable Name:** TP3_REC1 **QuestionnaireFileName:** Adult CAM

Spanish Text: ¿{fill1: Vio a un practicante para/Utilizó} {fill2: modality} porque fue recomendado por alguna de las siguientes personas?

¿Un doctor de medicina?

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+ who have used third of top three modalities

Skip Instructions: <1,2,R,D> [goto TP3_REC2]

Question ID: ALT.729_00.000 **Instrument Variable Name:** TP3_REC2 **QuestionnaireFileName:** Adult CAM

Spanish Text: *Read if necessary.

¿{fill1: Vio a un practicante para/Utilizó} {fill2: modality} porque fue recomendado por alguna de las siguientes personas?

¿Un familiar?

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+ who have used third of top three modalities

Skip Instructions: <1,2,R,D> [goto TP3_REC3]

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Question ID: ALT.733_00.000 **Instrument Variable Name:** TP3_DS1 **QuestionnaireFileName:** Adult CAM

Spanish Text: [fill1: Sin incluir el practicante que usted vio para] [fill2: modality] DURANTE LOS ÚLTIMOS 12 MESES, avisó a su proveedor personal de servicios de salud sobre su uso de [fill3: modality]?

*If practitioner for therapy is the same person as personal health care provider, enter '1'.

- 1. Sí
- 2. No
- Refused
- Don't know

Universe: Sample adults 18+ who have used third of top three modalities and has a personal health care provider

Skip Instructions: <1,R,D> [goto TP3_INF1]
<2> [goto TP3_DS2]

Question ID: ALT.734_00.000 **Instrument Variable Name:** TP3_DS2 **QuestionnaireFileName:** Adult CAM

Spanish Text: ¿Porqué no avisó a su proveedor personal de servicios de salud sobre su uso de [fill1: modality]?

No estaba usándolo durante ese tiempo?

- 1. Sí
- 2. No
- Refused
- Don't know

Universe: Sample adults 18+ who have used third of top three modalities and did not tell their personal health care provider about using therapy

Skip Instructions: <1,2,R,D> [goto TP3_DS3]

Question ID: ALT.735_00.000 **Instrument Variable Name:** TP3_DS3 **QuestionnaireFileName:** Adult CAM

Spanish Text: *Read if necessary.

¿Porqué no avisó a su proveedor personal de servicios de salud sobre su uso de [fill1: modality]?

¿Ellos disuadieron su uso en el pasado?

- 1. Sí
- 2. No
- Refused
- Don't know

Universe: Sample adults 18+ who have used third of top three modalities and did not tell their personal health care provider about using therapy

Skip Instructions: <1,2,R,D> [goto TP3_DS4]

2012 NHIS Spanish Questionnaire - Adult CAM
Adult Alternative Health/Complementary And Alternative Medicine
Document Version Date: 30-May-13

Question ID: ALT.736_00.000 **Instrument Variable Name:** TP3_DS4 **QuestionnaireFileName:** Adult CAM

Spanish Text: *Read if necessary.

¿Porqué no avisó a su proveedor personal de servicios de salud sobre su uso de [fill1: modality]?

¿Estaba preocupado(a) que ellos lo disuadirían?

- 1. Sí
- 2. No
- Refused
- Don't know

Universe: Sample adults 18+ who have used third of top three modalities and did not tell their personal health care provider about using therapy

Skip Instructions: <1,2,R,D> [goto TP3_DS5]

Question ID: ALT.737_00.000 **Instrument Variable Name:** TP3_DS5 **QuestionnaireFileName:** Adult CAM

Spanish Text: *Read if necessary.

¿Porqué no avisó a su proveedor personal de servicios de salud sobre su uso de [fill1: modality]?

¿Estaba preocupado(a) sobre una reacción negativa?

- 1. Sí
- 2. No
- Refused
- Don't know

Universe: Sample adults 18+ who have used third of top three modalities and did not tell their personal health care provider about using therapy

Skip Instructions: <1,2,R,D> [goto TP3_DS6]

Question ID: ALT.738_00.000 **Instrument Variable Name:** TP3_DS6 **QuestionnaireFileName:** Adult CAM

Spanish Text: *Read if necessary.

¿Porqué no avisó a su proveedor personal de servicios de salud sobre su uso de [fill1: modality]?

¿No pensaba que ellos necesitaban saberlo?

- 1. Sí
- 2. No
- Refused
- Don't know

Universe: Sample adults 18+ who have used third of top three modalities and did not tell their personal health care provider about using therapy

Skip Instructions: <1,2,R,D> [goto TP3_DS7]

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Question ID: ALT.739_00.000 **Instrument Variable Name:** TP3_DS7 **QuestionnaireFileName:** Adult CAM

Spanish Text: *Read if necessary.

¿Porqué no avisó a su proveedor personal de servicios de salud sobre su uso de [fill1: modality]?

¿Ellos no le preguntaron?

- 1. Sí
- 2. No
- Refused
- Don't know

Universe: Sample adults 18+ who have used third of top three modalities and did not tell their personal health care provider about using therapy

Skip Instructions: <1,2,R,D> [goto TP3_DS8]

Question ID: ALT.740_00.000 **Instrument Variable Name:** TP3_DS8 **QuestionnaireFileName:** Adult CAM

Spanish Text: *Read if necessary.

¿Porqué no avisó a su proveedor personal de servicios de salud sobre su uso de [fill1: modality]?

¿No piensa que ellos conocen el tema tan bien como usted?

- 1. Sí
- 2. No
- Refused
- Don't know

Universe: Sample adults 18+ who have used third of top three modalities and did not tell their personal health care provider about using therapy

Skip Instructions: <1,2,R,D> [goto TP3_DS9]

Question ID: ALT.741_00.000 **Instrument Variable Name:** TP3_DS9 **QuestionnaireFileName:** Adult CAM

Spanish Text: *Read if necessary.

¿Porqué no avisó a su proveedor personal de servicios de salud sobre su uso de [fill1: modality]?

¿No le dieron suficiente tiempo para decírselos?

- 1. Sí
- 2. No
- Refused
- Don't know

Universe: Sample adults 18+ who have used third of top three modalities and did not tell their personal health care provider about using therapy

Skip Instructions: <1,2,R,D> [goto TP3_INF1]

2012 NHIS Spanish Questionnaire - Adult CAM
Adult Alternative Health/Complementary And Alternative Medicine
Document Version Date: 30-May-13

Question ID: ALT.760_00.000 **Instrument Variable Name:** TP3_INF1 **QuestionnaireFileName:** Adult CAM

Spanish Text: DURANTE LOS ÚLTIMOS 12 MESES, ¿obtuvo informacion sobre [fill1: modality] de alguna de las siguientes fuentes?

¿El Internet?

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+ who have used third of top three modalities

Skip Instructions: <1,2,R,D> [goto TP3_INF2]

Question ID: ALT.761_00.000 **Instrument Variable Name:** TP3_INF2 **QuestionnaireFileName:** Adult CAM

Spanish Text: *Read if necessary.

DURANTE LOS ÚLTIMOS 12 MESES, ¿obtuvo informacion sobre [fill1: modality] de alguna de las siguientes fuentes?

¿Libros, revistas, o periódicos?

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+ who have used third of top three modalities

Skip Instructions: <1,2,R,D> [goto TP3_INF3]

Question ID: ALT.762_00.000 **Instrument Variable Name:** TP3_INF3 **QuestionnaireFileName:** Adult CAM

Spanish Text: *Read if necessary.

DURANTE LOS ÚLTIMOS 12 MESES, ¿obtuvo informacion sobre [fill1: modality] de alguna de las siguientes fuentes?

¿DVDs, videos, o CDs?

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+ who have used third of top three modalities

Skip Instructions: <1,2,R,D> [goto TP3_INF4]

2012 NHIS Spanish Questionnaire - Adult CAM
Adult Alternative Health/Complementary And Alternative Medicine
Document Version Date: 30-May-13

Question ID: ALT.763_00.000 **Instrument Variable Name:** TP3_INF4 **QuestionnaireFileName:** Adult CAM

Spanish Text: *Read if necessary.

DURANTE LOS ÚLTIMOS 12 MESES, ¿obtuvo informacion sobre [fill1: modality] de alguna de las siguientes fuentes?

¿Televisión o radio?

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+ who have used third of top three modalities

Skip Instructions: <1,2,R,D> [goto TP3_INF5]

Question ID: ALT.764_00.000 **Instrument Variable Name:** TP3_INF5 **QuestionnaireFileName:** Adult CAM

Spanish Text: *Read if necessary.

DURANTE LOS ÚLTIMOS 12 MESES, ¿obtuvo informacion sobre [fill1: modality] de alguna de las siguientes fuentes?

¿Artículos científicos?

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+ who have used third of top three modalities

Skip Instructions: <1,2,R,D> [goto TP3_INF6]

Question ID: ALT.765_00.000 **Instrument Variable Name:** TP3_INF6 **QuestionnaireFileName:** Adult CAM

Spanish Text: *Read if necessary.

DURANTE LOS ÚLTIMOS 12 MESES, ¿obtuvo informacion sobre [fill1: modality] de alguna de las siguientes fuentes?

¿Tiendas de alimentos para la salud?

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+ who have used third of top three modalities

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