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

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

Spanish Text:

Universe: This is the Sample Adult and (the Sample Adult section has not been started or completed).

Skip Instructions: <1> if Sample Adult = demographics.hhc.RELRESP_A
 goto beginning of adult.asd
 elseif Sample Adult = demographics.hhc.HHRESP
 goto beginning of adult.asd
 else
 goto AIDVERF_S
 endif
<2> goto callbk.ACALLBK1
<3> goto PROX1
<R> store '4' in ASTAT
 if recontact.RCIFLAG ne '1'
 goto recontact.RCL_BEGIN procedure
 else
 goto back.OUTCOMEB1 procedure
 endif

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

Spanish Text: * Proxy interviews can be done for sample adults that have a mental or physical condition that prevents them from responding for themselves.

Esta disponible algun miembro de familia o proveedor que se entiende sobre la salud de [fill: ALIAS of Sample Adult]?

1. Sí
2. No

Universe: The Sample Adult's physical or mental condition prohibits responding.

Skip Instructions: <1> goto PROX2
<2> goto PROX3

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

Spanish Text: * Ask if necessary.

¿Cuál es la relación de esta persona con [fill: ALIAS of Sample Adult]?

1. Pariente que vive en el hogar
2. Pariente que no vive en el hogar
3. Otro tipo de cuidador.
4. Otro

Universe: Knowledgeable proxy is available.

Skip Instructions: <1-4> goto AIDVERF_S

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

Question ID: AID.020_00.000 **Instrument Variable Name:** PROX3 **QuestionnaireFileName:** Sample Adult**Spanish Text:** *Ask if necessary.

¿Podemos disponer con alguien que conoce bien la salud de [fill: ALIAS of Sample Adult] para llamar de nuevo?

1. Sí
2. No

Universe: Knowledgeable proxy is not available.**Skip Instructions:**

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

Question ID: AID.030_00.000 **Instrument Variable Name:** AIDVERF_S **QuestionnaireFileName:** Sample Adult**Spanish Text:** * Please verify the following information about the sample adult before proceeding:

Tengo anotado que usted es de sexo [fill: Sex of Sample Adult]. ¿Es correcto?

*If respondent "refuses" or says "don't know", enter "1" for "yes".

1. Sí
2. No

Universe: Sample Adult is not the person entered in HHRESP or RELRESP_A. Or PROX1 = 'Yes'.**Skip Instructions:**

```
<1> goto AIDVERF_A
<2> goto AIDSEX
```

Question ID: AID.040_00.000 **Instrument Variable Name:** AIDSEX **QuestionnaireFileName:** Sample Adult**Spanish Text:** * Ask if appropriate; otherwise, enter your best guess of the person's sex.

¿Es usted de sexo masculino o femenino?

1. Masculino
2. Femenino

Universe: Respondent said his/her sex is not correct.**Skip Instructions:**

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

2018NHIS Spanish Questionnaire -Sample Adult

Adult Identification

Document Version Date: 12-Jun-19

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

Spanish Text:

1 of 3

¿Cuál es su fecha de nacimiento?

* Enter month of birth.

- 1. enero
- 2. febrero
- 3. marzo
- 4. abril
- 5. mayo
- 6. junio
- 7. julio
- 8. agosto
- 9. septiembre
- 10. octubre
- 11. noviembre
- 12. diciembre
- Refused
- Don't know

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

Skip Instructions: <01-12, Refused, Don't know> goto AIDDOB_D

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

Spanish Text:

2 of 3

¿Cuál es su fecha de nacimiento?

* Enter day of birth.

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

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

If days not valid, goto ERR_AIDDOB_D

2018NHIS Spanish Questionnaire -Sample Adult
Adult Identification
Document Version Date: 12-Jun-19

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

Spanish Text: 3 of 3

¿Cuál es su fecha de nacimiento?

* Enter year of birth.

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

Skip Instructions: <1880-2020, Refused, Don't know> if AIDVERF_A = '2' (No) then reset AIDVERF_A to empty
 goto AIDVERF_A
 elseif AIDVERF_D = '2' (No) then reset AIDVERF_D to empty
 goto AIDVERF_D
 endif

(if year GT current year) or (if year = current year and month GT current month) or (if year = current year and month = current month and day GT current day)

 goto ERR1_AIDDOB_Y
endif

(if birth month = '02' and birth day = '29' and this is not a leap year)

 goto ERR2_AIDDOB_Y
endif

(if AIDDOB_M = 'Ref' or 'DK') or (if AIDDOB_D = 'Re'f or 'DK') or (if AIDDOB_Y = 'Ref' or 'DK')

goto ERR3_AIDDOB_Y

else

store AIDDOB_M in DOBM

store AIDDOB_D in DOBD

store AIDDOB_Y in DOBY

if AIDVERF_A = '2' (No) then reset AIDVERF_A to empty

goto AIDVERF_A

elseif AIDVERF_D = '2' (No) then reset AIDVERF_D to empty

goto AIDVERF_D

endif

endif

Calculate age from AIDDOB_M, AIDDOB_D, and AIDDOB_Y.

if age from AIDDOB items is ne AGE and age from AIDDOB items is valid

reset AIDVERF_A or AIDVERF_D.

goto ERR4_AIDDOB_Y

endif

2018NHIS Spanish Questionnaire -Sample Adult

Adult Identification

Document Version Date: 12-Jun-19

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

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

Quiero confirmar con usted.

¿Vive [fill: ALIAS of Sample Child] dentro del campus de la escuela o la universidad o en algún lugar fuera del campus?

- 1. Dentro del campus
- 2. Fuera del campus
- Refused
- Don't know

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

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

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

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

Spanish Text:

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

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

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

Spanish Text: ¿Cuál es la razón principal por la que no trabajó la semana pasada?

1. Atendiendo al hogar o la familia
 2. Asistiendo a la escuela
 3. Retirado(a)
 4. Tomando vacaciones planeadas de antemano
 5. Ausente del trabajo por razón de maternidad o cuidado infantil
 6. Incapacitado(a) para trabajar por razones de salud
 7. En "layoff"
 8. Incapacitado(a) a largo plazo
 9. Desempeña su trabajo o contrato sólo durante ciertas temporadas
 10. Otra razón
- Refused
Don't know

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

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

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

Spanish Text: ¿Alguna vez a tenido un trabajo o manejado un negocio?

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+ who were NOT working at a job or business and not looking for work or looking for work last week or didn't know or refused to provide their employment status last week

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

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

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

Spanish Text: ? [F1]

[fill1: ¿Para quién trabajó en su empleo o negocio PRINCIPAL? (Nombre de la compañía, negocio, organización o empleador/patrón)]

[fill2: Pensando en el trabajo que usted tuvo por más tiempo, ¿para quién trabajó? (Nombre de la compañía, negocio, organización o empleador/patrón)]

[fill3: Pensando en el trabajo que usted tuvo más reciente, ¿para quién trabajó? (Nombre de la compañía, negocio, organización o empleador/patrón)]

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

Skip Instructions: <90 char long,D,R> [goto KINDIND]

Question ID: ASD.080_00.000 **Instrument Variable Name:** KINDIND **QuestionnaireFileName:** Sample Adult

Spanish Text: ? [F1]

¿Qué clase de negocio o industria es ésta? (Por ejemplo: gerencia de televisión y radio, zapatería, Departamento Estatal del Trabajo)

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

Skip Instructions: <90 char long,D,R> [goto KINDWRK]

Question ID: ASD.090_00.000 **Instrument Variable Name:** KINDWRK **QuestionnaireFileName:** Sample Adult

Spanish Text: ? [F1]

¿Qué clase de trabajo desempeñó? (Por ejemplo: trabajo agrícola, oficinista de correo, especialista de computadoras.)

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

Skip Instructions: <90 char long,D,R> [goto IMPACT]

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

Question ID: ASD.100_00.000 **Instrument Variable Name:** IMPACT **QuestionnaireFileName:** Sample Adult

Spanish Text: ? [F1]

¿Cuáles eran sus tareas más importantes en este trabajo o negocio? (Por ejemplo: vender automóviles, mantener la contabilidad al día, hacer funcionar una imprenta.)

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

Skip Instructions: <90 char long,D,R> [goto SUPERVIS]

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

Spanish Text: ¿Supervisaba usted a otros empleados como parte de su trabajo?

1. Sí
2. No
Refused
Don't know

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

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

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

Spanish Text: (book) A2 ? [F1]

[fill1: Leyendo la tarjeta, por favor dígame, ¿cuál de éstas frases describe mejor su empleo actual o su situación laboral?]

[fill2: Leyendo la tarjeta, por favor dígame, ¿cuál de éstas frases describe mejor el trabajo que usted tuvo por más tiempo?]

[fill3: Leyendo la tarjeta, por favor dígame, ¿cuál de éstas frases describe mejor el trabajo que usted tuvo más recientemente?]

* Read answer choices if necessary.

1. Empleado por hora, por salario, o por comisión de una compañía PRIVADA, un negocio o patrón
2. Empleado del gobierno FEDERAL
3. Empleado del gobierno ESTATAL
4. Empleado del gobierno LOCAL
5. Tiene SU PROPIO negocio, práctica profesional o finca/rancho
6. Trabaja SIN SUELDO en un negocio o finca/rancho familiar

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

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

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

Question ID: ASD.112_00.000 **Instrument Variable Name:** BUSINC **QuestionnaireFileName:** Sample Adult

Spanish Text: ¿Está la empresa registrada como corporación?

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+ who are self-employed

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

Question ID: ASD.120_00.000 **Instrument Variable Name:** LOCALNO **QuestionnaireFileName:** Sample Adult

Spanish Text: (book) A3

[fill1: Pensando en su empleo o negocio PRINCIPAL,]

[fill2: Pensando en la última semana del trabajo que mantuvo por más tiempo,]

[fill3: Pensando en la última semana de su trabajo más reciente ,]

¿cuántas personas [fill4: trabajan] [fill5: trabajaban] en este local? Por favor incluya a si mismo.

* "People" includes both FULL- and PART-time employees; "location" refers to the street address of the workplace.

1. 1 empleado
 2. 2-9 empleados
 3. 10-24 empleados
 4. 25-49 empleados
 5. 50-99 empleados
 6. 100-249 empleados
 7. 250-499 empleados
 8. 500-999 empleados
 9. 1000 empleados o más
- Refused
Don't know

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

Skip Instructions: <1-9, R,D> [goto WRKLONGN]

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

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

Spanish Text: ? [F1]

1 of 2

¿Alrededor de cuánto tiempo

[fill1: lleva empleado en su empleo o negocio PRINCIPAL?]

[fill2: estuvo empleado en el trabajo que tuvo por más tiempo?]

[fill3: estuvo empleado en el trabajo que tuvo más reciente?]

* Enter number.

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

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

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

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

Spanish Text: 2 of 2

* Enter time period.

1. Día(s)

2. Semanas(s)

3. Mes(es)

4. Año(s)

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

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

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

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

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

Spanish Text: ? [F1]

[fill1: ¿Es este el trabajo o negocio PRINCIPAL que usted ha sostenido por más tiempo?]

[fill2: ¿Fue su más reciente trabajo el que usted sostuvo por el más tiempo?]

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

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

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

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

Spanish Text: [fill1: ¿Se le paga por hora en su empleo o negocio PRINCIPAL?]
[fill2: ¿Le pagaban por hora en el trabajo que tuvo por más tiempo?]
[fill3: ¿Le pagaban por hora en el trabajo que tuvo más recientemente?]

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

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

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

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

Spanish Text: [fill1: ¿Le pagan días de ausencia por enfermedad en este empleo o negocio PRINCIPAL?]
[fill2: ¿Le pagaban días de ausencia por enfermedad en el trabajo que tuvo por más tiempo?]
[fill3: ¿Le pagaban días de ausencia por enfermedad en el trabajo que tuvo más recientemente?]

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

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

Skip Instructions: <1,2,D,R>
if DOINGLW2 = 1,2,4 then [goto ONEJOB];
else if DOINGLW2=3,5 then [goto WRKLYR2];
else if DOINGLW2=D, R then [goto next section]

2018NHIS Spanish Questionnaire -Sample Adult

Adult Socio-Demographic

Document Version Date: 12-Jun-19

Question ID: ASD.170_00.000 **Instrument Variable Name:** ONEJOB **QuestionnaireFileName:** Sample Adult

Spanish Text: ¿Tiene más de un empleo o negocio?

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

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

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

Question ID: ASD.210_00.000 **Instrument Variable Name:** WRKLYR2 **QuestionnaireFileName:** Sample Adult

Spanish Text: A pesar de que no trabajó la semana pasada en un empleo o negocio, durante los ULTIMOS 12 MESES, ¿hubo algún período en que estaba empleado o manejaba un negocio?

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

Universe: Sample adults 18+ who were looking for work or who were not working at a job or business AND who were not looking for work in the last week

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

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

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

Spanish Text: Ahora le voy a hacer preguntas sobre ciertas condiciones médicas.

¿Le ha dicho ALGUNA VEZ un médico o profesional de la salud que usted tenía ... Hipertensión, también conocida como presión arterial alta?

1. Sí
2. No

Refused
Don't Know

Universe: Sample adults 18+**Skip Instructions:** <1> [goto HYPDIFV]
<2,R,D> [goto CHLEV]

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

Spanish Text: ¿Le han dicho, en dos o más consultas DIFERENTES, que tenía hipertensión, también conocida como presión arterial alta?

1. Sí
2. No

Refused
Don't know

Universe: Sample adults 18+ who were told they had hypertension**Skip Instructions:** <1> [goto HYPYR]
<2,R,D> [goto HYPMDEV2]

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

Spanish Text: DURANTE LOS ÚLTIMOS 12 MESES, ¿ha tenido hipertensión, también conocida como presión arterial alta?

*Enter '1' if respondent is taking medication to control his/her high blood pressure.

1. Sí
2. No

Refused
Don't know

Universe: Sample adults 18+ who were ever told they had hypertension (2+ visits)**Skip Instructions:** <1,2,R,D> [goto HYPMDEV2]

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

Question ID: ACN.023_00.020 **Instrument Variable Name:** CHLYR **QuestionnaireFileName:** Sample Adult

Spanish Text: DURANTE LOS ÚLTIMOS 12 MESES, ha tenido colesterol elevado?

*Enter '1' if respondent is taking medication to control his/her high cholesterol.

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

Universe: Sample adults 18+ who were ever told they had high cholesterol

Skip Instructions: <1,2,R,D> [goto CHLMDEV2]

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

Spanish Text: ¿ALGUNA VEZ fue cualquier medicamento recetado por un médico para ayudar a bajar su colesterol?

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

Universe: Sample adults 18+ who have ever been told they had high cholesterol

Skip Instructions: <1> [goto CHLMDNW2]
<2,R,D> [goto CHDEV]

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

Spanish Text: ¿Está usted AHORA tomando cualquier medicamento recetado por un médico para ayudar bajar su colesterol?

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

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

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

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

Question ID: ACN.031_01.000 **Instrument Variable Name:** CHDEV **QuestionnaireFileName:** Sample Adult

Spanish Text: ¿ALGUNA VEZ le ha dicho un médico o profesional de la salud que usted tenía
 ...Enfermedad cardiaca/del corazón?

 1. Sí
 2. No
 Refused
 Don't Know

Universe: Sample adults 18+

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

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

Spanish Text: * Read if necessary:

 ¿Le ha dicho ALGUNA VEZ un médico o profesional de la salud que usted tenía
 ...Angina, también conocida como angina de pecho?

 1. Sí
 2. No
 Refused
 Don't Know

Universe: Sample adults 18+

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

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

Spanish Text: * Read if necessary:

 ¿Le ha dicho ALGUNA VEZ un médico o profesional de la salud que usted tenía
 ... Ataque al corazón (también conocido como infarto miocardio)?

 1. Sí
 2. No
 Refused
 Don't know

Universe: Sample adults 18+

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

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

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

Spanish Text: * Read if necessary:

¿Le ha dicho ALGUNA VEZ un médico o profesional de la salud que usted tenía

... Cualquier tipo de condición o enfermedad cardíaca (que no sea una de las que le acabo de mencionar)?

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+

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

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

Spanish Text: * Read if necessary:

¿Le ha dicho ALGUNA VEZ un médico o profesional de la salud que usted tenía

... Embolia, derrame cerebral, o apoplejía?

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+

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

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

Spanish Text: * Read if necessary:

¿Le ha dicho ALGUNA VEZ un médico o profesional de la salud que usted tenía

... Enfisema?

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+

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

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

Question ID: ACN.035_00.000 **Instrument Variable Name:** COPDEV **QuestionnaireFileName:** Sample Adult**Spanish Text:** ¿Le ha dicho ALGUNA VEZ un médico u otro profesional de la salud que usted tenía enfermedad pulmonar obstructiva crónica, también llamada EPOC?

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+**Skip Instructions:** <1,2,R,D> [if AGE GE 40, goto ASPMEDEV
else goto AASMEV]

Question ID: ACN.040_00.010 **Instrument Variable Name:** ASPMEDEV **QuestionnaireFileName:** Sample Adult**Spanish Text:** ¿Le ha aconsejado ALGUNA VEZ un médico que tome aspirina diariamente en dosis pequeñas para prevenir o controlar enfermedad cardiaca?

* If the respondent volunteers they have been told to take an aspirin every other day or “regularly” for these reasons, enter 1 for “yes.”

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 40+**Skip Instructions:** <1> [goto ASPMEDAD]
<2,R,D> [goto ASPONOWN]

Question ID: ACN.040_00.020 **Instrument Variable Name:** ASPMEDAD **QuestionnaireFileName:** Sample Adult**Spanish Text:** ¿ACTUALMENTE está siguiendo este consejo?

* If the respondent provides an answer such as “sometimes,” “occasionally,” or “from time to time,” enter 1 for “yes.”

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 40+ who have ever been advised to take a low-dose aspirin every day to prevent or control heart disease**Skip Instructions:** <1,R,D> [goto AASMEV]
<2> [goto ASPMDMED]

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

Question ID: ACN.040_00.030 **Instrument Variable Name:** ASPMDMED **QuestionnaireFileName:** Sample Adult**Spanish Text:** Le aconsejó un médico u otro profesional de la salud que deje de tomar aspirina diariamente en dosis pequeñas?

1. Sí
 2. No
- Refused
-
- Don't know

Universe: Sample adults 40+ who have ever been advised to take aspirin every day, but are not currently following that advice**Skip Instructions:** <1,2,R,D> [goto AASMEV]

Question ID: ACN.040_00.040 **Instrument Variable Name:** ASPONOWN **QuestionnaireFileName:** Sample Adult**Spanish Text:** ¿Por su propia cuenta, está actualmente tomando aspirina diariamente en dosis pequeñas para prevenir o controlar enfermedad cardiaca?

* If the respondent volunteers they are taking an aspirin every other day or “regularly” for these reasons, enter 1 for “yes.”

1. Sí
 2. No
- Refused
-
- Don't know

Universe: Sample adults 40+ who have not been advised to take aspirin every day or Ref/DK if they have been advised to take aspirin every day**Skip Instructions:** <1,2,R,D> [goto AASMEV]

Question ID: ACN.080_00.000 **Instrument Variable Name:** AASMEV **QuestionnaireFileName:** Sample Adult**Spanish Text:** ¿Le ha dicho ALGUNA VEZ un médico o profesional de la salud que usted tenía asma?

1. Sí
 2. No
- Refused
-
- Don't know

Universe: Sample adults 18+**Skip Instructions:** <1> [goto AASSTILL]
<2,R,D> [goto ULCEV]

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

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

Spanish Text: ¿Sigue teniendo asma?

1. Sí
 2. No
- Refused
Don't know

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

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

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

Spanish Text: ¿Qué edad tenía cuando le dijeron por primera vez que usted tenía asma?

- 001-120,
Refused
Don't know

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

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

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

Spanish Text: ¿Era menor de 16, o tenía 16 años o más cuando le dijeron por primera vez que tenía asma?

1. Menor de 16
 2. 16 o mayor
- Refused
Don't know

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

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

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

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

Spanish Text: ? [F1]

¿DURANTE LOS ÚLTIMOS 12 MESES, ha tenido un episodio de asma o un ataque asmático?

1. Sí
 2. No
- Refused
Don't know

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

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

Question ID: ACN.100_00.000 **Instrument Variable Name:** AASMERYR **QuestionnaireFileName:** Sample Adult

Spanish Text: ¿DURANTE LOS ÚLTIMOS 12 MESES, tuvo que ir a una sala de emergencia o algún otro centro de servicios médicos de urgencia debido al asma?

1. Sí
 2. No
- Refused
Don't Know

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

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

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

Spanish Text: DURANTE LOS ÚLTIMOS 12 MESES, ¿ha sido hospitalizado debido al asma?

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

1. Sí
 2. No
- Don't Know
Refused

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

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

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

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

Spanish Text: DURANTE LOS ÚLTIMOS 12 MESES, ¿POR CUÁNTOS DÍAS NO PUDO usted [fill1 trabajar/hacer sus diligencias en el hogar] debido a su asma?

*Enter '0' for none.

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

Allow 0-365,996,R,D

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

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

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

Spanish Text: Ahora voy a preguntarle acerca de dos diferentes tipos de medicamentos para el ASMA. Uno protege contra los síntomas a largo plazo. El otro es para el alivio inmediato de síntomas durante un ataque o episodio. Este medicamento para el alivio inmediato se respira por la boca con un inhalador en envase o inhalador en disco.

DURANTE LOS ÚLTIMOS 3 MESES, ¿ha usado el tipo de inhalador RECETADO para el asma que da alivio RÁPIDO a los síntomas del asma durante un ataque? Incluya solamente medicamentos recetados por un profesional de la salud.

1. Sí
2. No
- Don't Know
- Refused

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

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

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

Spanish Text: Cuando usted toma su medicamento de rescate recetado para el asma, ¿diría que usa más frecuentemente un inhalador y/o disco, o usa más un nebulizador?

*Read if necessary: Tanto los inhaladores como los inhaladores en disco son aparatos muy portátiles usados para respirar medicamentos en uno o dos suspiros. Un nebulizador es un aparato que convierte medicamentos líquidos en aerosol que se puede respirar dentro de los pulmones durante unos minutos.

1. Inhalador o disco
2. Nebulizador
- Refused
- Don't know

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

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

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

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

Spanish Text: DURANTE LOS ÚLTIMOS 3 MESES, ¿usó más de tres envases o discos de este tipo de inhalador para el alivio rápido?

1. Sí
2. No
- Don't Know
- Refused

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

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

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

Spanish Text: El segundo tipo de medicamento para el asma es diferente a los inhaladores usados para el alivio rápido. Este es el tipo preventivo usado para proteger sus pulmones y mantenerle libre de ataques. Puede ser una píldora o un inhalador.

Está usted AHORA tomando un medicamento para el asma preventivo todos o casi todos los días, con menos frecuencia, o nunca?

1. Todos o casi todos los días
2. Con menos frecuencia
3. Nunca
- Refused
- Don't know

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

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

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

Spanish Text: Un plan de acción para el asma es un formulario impreso con instrucciones específicas basadas en el asma, el cual indica en qué circunstancias se cambia el tipo de medicamento, cuando llamar al médico para consultarlo(a), y cuando se tiene que ir a la sala de emergencia.

¿ALGUNA VEZ un médico u otro profesional de la salud le ha dado un plan de acción para el asma?

*Read if necessary: Incluya a enfermeras(os) y educadores del asma.

1. Sí
2. No
- Don't Know
- Refused

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

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

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

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

Spanish Text: ¿Alguna vez se inscribió a un curso o clase en donde le enseñarón como mantener su asma solo(a)?

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

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

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

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

Spanish Text: ¿ALGUNA VEZ un médico u otro profesional de la salud le ha enseñado
...cómo reconocer los síntomas o las señales tempranas de un episodio asmático?

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

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

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

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

Spanish Text: *Read if necessary: ¿ALGUNA VEZ un médico u otro profesional de la salud le ha enseñado
...cómo responder a episodios de asma?

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

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

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

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

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

Spanish Text: *Read if necessary: ¿ALGUNA VEZ un médico u otro profesional de la salud le ha enseñado
...cómo seguir el flujo respiratorio máximo para la terapia diaria?

1. Sí
2. No
Don't Know
Refused

Universe: Sample adults 18+ who still have asthma or who had asthma episode/attack in past 12 months**Skip Instructions:** <1,2,R,D> [go to AAPENVLN]

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

Spanish Text: ¿ALGUNA VEZ un médico u otro profesional de la salud le ha aconsejado hacer cambios en el hogar, la escuela o
en el trabajo para mejorar su asma?

1. Sí
2. No
3. Me dijeron que no era necesario hacer cambios
Don't know
Refused

Universe: Sample adults 18+ who still have asthma or who had asthma episode/attack in past 12 months**Skip Instructions:** <1-3,R,D> [go to AAROUTIN]

Question ID: ACN.107_00.020 **Instrument Variable Name:** AAROUTIN **QuestionnaireFileName:** Sample Adult

Spanish Text: Durante los últimos 12 meses, ¿cuántas veces vió a un médico u otro profesional de la salud para un seguimiento
de rutina para su asma? Por favor no incluya visitas a la sala de emergencias, visitas a centros de atención médicas
urgentes, u otras visitas para cuidado crítico debido a un episodio o ataque de asma.

*Enter '0' for none.
Allow 0-365,R,D

Universe: Sample adults 18+ who still have asthma or who had asthma episode/attack in past 12 months**Skip Instructions:** <0-50,R,D> [go to AASYMPT]
<51-365> [goto ERR_AAROUTIN]

2018NHIS Spanish Questionnaire -Sample Adult

Adult Conditions

Document Version Date: 12-Jun-19

Question ID: ACN.107_00.030 **Instrument Variable Name:** AASYMPT **QuestionnaireFileName:** Sample Adult

Spanish Text: Las siguientes tres preguntas son acerca de la última vez que vió a un médico u otro profesional de la salud para un chequeo rutinario o por otra razón.

Durante su última visita, ¿su médico u otro profesional de la salud le preguntó CON QUE FRECUENCIA

...usted tuvo síntomas asmáticos?

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

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

Skip Instructions: <1,2,R,D> [go to AARESCUE];

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

Spanish Text: * Read if necessary:

Durante su última visita, ¿su médico u otro profesional de la salud le preguntó CON QUE FRECUENCIA

...usted usó su inhalador de alivio rápido?

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

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

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

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

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

Spanish Text: * Read if necessary:

Durante su última visita, ¿su médico u otro profesional de la salud pidió información sobre LA FRECUENCIA CON QUE

...los síntomas asmáticos limitaron sus actividades diarias?

1. Sí
2. No
- Don't Know
- Refused

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

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

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

Spanish Text: Comparado a cuando le dijeron por primera vez que tenía asma, ¿diría que su asma a mejorado, empeorado, o es más o menos igual ahora como adulto?

1. Ha mejorado
2. Ha empeorado
3. Sigue más o menos igual
- Don't know
- Refused

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

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

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

Spanish Text: ¿Tenía empleo cuando [fill 1: usted manifestó síntomas de asma por primera vez/su asma empeoró]?

1. Sí
2. No
- Refused
- Don't know

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

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

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

Question ID: ACN.107_00.080 **Instrument Variable Name:** AASWKREL **QuestionnaireFileName:** Sample Adult**Spanish Text:** ¿Le dijo un médico u otro profesional de la salud que su asma [fill 1: probablemente fue causada por su trabajo/probablemente empeoró por su trabajo/empeoró por cualquiera de los trabajos que tuvo]?

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+ who are currently employed or employed at some time in the past 12 months, still have asthma, were 16 years of age or older or less than 16 years of age and their asthma has gotten worse as an adult or age at time of diagnosis is unknown**Skip Instructions:** <1> [goto ULCEV]
<2,R,D> [goto AASDWKRL]

Question ID: ACN.107_00.090 **Instrument Variable Name:** AASDWKRL **QuestionnaireFileName:** Sample Adult**Spanish Text:** ¿Alguna vez habló USTED con un médico u otro profesional de la salud que su asma [fill1: probablemente fue causada por su trabajo/probablemente empeoró por su trabajo/empeoró por cualquiera de los trabajos que tuvo]?

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+ who are currently employed or employed at some time in the past 12 months, still have asthma, were 16 years of age or older or less than 16 years of age and their asthma has gotten worse as an adult or age at time of diagnosis is unknown**Skip Instructions:** <1,2,R,D> [goto ULCEV]

Question ID: ACN.110_00.000 **Instrument Variable Name:** ULCEV **QuestionnaireFileName:** Sample Adult**Spanish Text:** ¿Le ha dicho ALGUNA VEZ un médico o profesional de la salud que usted tenía

... úlceras?

Esto puede incluir úlceras estomacales, del duodeno, o pépticas.

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+**Skip Instructions:** <1> [goto ULCYR]
<2,R,D> [goto CANEV]

2018NHIS Spanish Questionnaire -Sample Adult

Adult Conditions

Document Version Date: 12-Jun-19

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

Spanish Text: ¿DURANTE LOS ÚLTIMOS 12 MESES, ha tenido úlceras?

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

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

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

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

Spanish Text: ¿Le ha dicho ALGUNA VEZ un médico u otro profesional de la salud que usted tenía

...Cáncer o enfermedad maligna de alguna clase?

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

Universe: Sample adults 18+

Skip Instructions: <1> [goto CANKIND_1]
<2,R,D> [goto DIBEV1]

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

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

Spanish Text: ¿Qué tipo de cáncer era?

* Enter code for the first kind of cancer.

1. Vejiga
 2. Sangre
 3. Huesos
 4. Cerebro
 5. Senos
 6. Cuello uterino
 7. Colon
 8. Esófago
 9. Vesícula biliar
 10. Riñón
 11. Laringe-tráquea
 12. Leucemia
 13. Hígado
 14. Pulmones
 15. Linfoma
 16. Melanoma
 17. Boca/lengua/labios
 18. Ovario
 19. Páncreas
 20. Próstata
 21. Recto
 22. Piel (no-melanoma)
 23. Piel (desconoce el tipo)
 24. Tejido blando (músculo o grasa)
 25. Estómago
 26. Testículos
 27. Garganta - faringe
 28. Glándula tiroidea
 29. Utero
 30. Otros
- Refused
Don't know

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

Skip Instructions: <1-30,R,D> [goto CANAGE_1]

IF SEX=1 (MALE) and No. <6,18,29> selected [goto ERR1_CANKIND_1]

IF SEX=2 (FEMALE) and No. <20,26> selected [goto ERR2_CANKIND_1]

2018NHIS Spanish Questionnaire -Sample Adult

Adult Conditions

Document Version Date: 12-Jun-19

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

Spanish Text:

* Enter code for the second kind of cancer.

* Enter '99' for no more.

1. Vejiga
 2. Sangre
 3. Huesos
 4. Cerebro
 5. Senos
 6. Cuello uterino
 7. Colon
 8. Esófago
 9. Vesícula biliar
 10. Riñón
 11. Laringe-tráquea
 12. Leucemia
 13. Hígado
 14. Pulmones
 15. Linfoma
 16. Melanoma
 17. Boca/lengua/labios
 18. Ovario
 19. Páncreas
 20. Próstata
 21. Recto
 22. Piel (no-melanoma)
 23. Piel (desconoce el tipo)
 24. Tejido blando (músculo o grasa)
 25. Estómago
 26. Testículos
 27. Garganta - faringe
 28. Glándula tiroidea
 29. Utero
 30. Otros
 99. No more
- Refused
Don't know

Universe: Sample adults 18+ who either provided an age for one kind of cancer or didn't know how old they were when first diagnosed with that kind of cancer or else refused to provide an age but had not refused to answer CANKIND_1.

Skip Instructions: <1-30,R,D>[goto CANAGE_2]
<96> [goto DIBEV1]
IF SEX=1 (MALE) and No. <6,18,29> selected [goto ERR1_CANKIND_2]

IF SEX=2 (FEMALE) and No. <20,26> selected [goto ERR2_CANKIND_2]

2018NHIS Spanish Questionnaire -Sample Adult

Adult Conditions

Document Version Date: 12-Jun-19

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

Spanish Text:

* Enter code for the third kind of cancer.

* Enter 99 for no more.

1. Vejiga
 2. Sangre
 3. Huesos
 4. Cerebro
 5. Senos
 6. Cuello uterino
 7. Colon
 8. Esófago
 9. Vesícula biliar
 10. Riñón
 11. Laringe-tráquea
 12. Leucemia
 13. Hígado
 14. Pulmones
 15. Linfoma
 16. Melanoma
 17. Boca/lengua/labios
 18. Ovario
 19. Páncreas
 20. Próstata
 21. Recto
 22. Piel (no-melanoma)
 23. Piel (desconoce el tipo)
 24. Tejido blando (músculo o grasa)
 25. Estómago
 26. Testículos
 27. Garganta - faringe
 28. Glándula tiroidea
 29. Utero
 30. Otros
 99. No more
- Refused
Don't know

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

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

IF SEX=1 (MALE) and No. <6,18,29> selected [goto ERR1_CANKIND_3]

IF SEX=2 (FEMALE) and No. <20,26> selected [goto ERR2_CANKIND_3]

2018NHIS Spanish Questionnaire -Sample Adult

Adult Conditions

Document Version Date: 12-Jun-19

Question ID: ACN.140_00.004 **Instrument Variable Name:** CANKIND_4 **QuestionnaireFileName:** Sample Adult

Spanish Text: * Enter 96 if respondent offers more than 3 kinds of cancer.

 * Enter 99 for no more.

1. Vejiga
2. Sangre
3. Huesos
4. Cerebro
5. Senos
6. Cuello uterino
7. Colon
8. Esófago
9. Vesícula biliar
10. Riñón
11. Laringe-tráquea
12. Leucemia
13. Hígado
14. Pulmones
15. Linfoma
16. Melanoma
17. Boca/lengua/labios
18. Ovario
19. Páncreas
20. Próstata
21. Recto
22. Piel (no-melanoma)
23. Piel (desconoce el tipo)
24. Tejido blando (músculo o grasa)
25. Estómago
26. Testículos
27. Garganta - faringe
28. Glándula tiroidea
29. Utero
30. Otros
96. More than 3 kinds of cancer
99. No more
- Refused
- Don't know

Universe: Sample adults 18+ who either provided an age for a third kind of cancer or didn't know how old they were when first diagnosed that kind of cancer or else refused to provide an age but had not refused to answer CANKIND_3

Skip Instructions: <95,96> [goto DIBEV1]

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

Question ID: ACN.150_00.001 **Instrument Variable Name:** CANAGE_1 **QuestionnaireFileName:** Sample Adult**Spanish Text:** ? [F1][fill1: ¿Qué edad tenía cuándo le diagnosticaron por primera vez el cáncer [fill: CANKIND_1]?/
[fill2: ¿Qué edad tenía cuándo le diagnosticaron por primera vez este cáncer?]**Universe:** Sample adults 18+ who were ever told they had cancer**Skip Instructions:** <1-100, D> goto CANKIND_2
<R> and <R> at CANKIND_1 [goto DIBEV1]
<R> and CANKIND_1 NE <R> [goto CANKIND_2]

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

Question ID: ACN.150_00.002 **Instrument Variable Name:** CANAGE_2 **QuestionnaireFileName:** Sample Adult**Spanish Text:** ? [F1][fill1: ¿Qué edad tenía cuándo le diagnosticaron por primera vez el cáncer de [fill: CANKIND_2]?/
[fill2: ¿Qué edad tenía cuándo le diagnosticaron por primera vez este cáncer?]**Universe:** Sample adults 18+ who were ever told they had cancer**Skip Instructions:** <1-100, D> [goto CANKIND_3]
<R> and <R> at CANKIND_2 [goto DIBEV1]
<R> and CANKIND_2 NE <R> [goto CANKIND_3]

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

Question ID: ACN.150_00.003 **Instrument Variable Name:** CANAGE_3 **QuestionnaireFileName:** Sample Adult**Spanish Text:** ? [F1][fill1: ¿Qué edad tenía cuándo le diagnosticaron por primera vez el cáncer de [fill: CANKIND_3]?/
[fill2: ¿Qué edad tenía cuándo le diagnosticaron por primera vez este cáncer?]**Universe:** Sample adults 18+ who were ever told they had cancer**Skip Instructions:** <1-100, D> [goto CANKIND_4]
<R> and <R> at CANKIND_3 [goto DIBEV1]
<R> and CANKIND_3 NE <R> [goto CANKIND_4]

If number in CANAGE_3 greater than person years old (AGE) [goto ERR_ CANAGE_3]

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

Question ID: ACN.160_00.000 **Instrument Variable Name:** DIBEV1 **QuestionnaireFileName:** Sample Adult

Spanish Text: ?[F1]
 [Fill1: Aparte de cuando estaba embarazada, ALGUNA VEZ le ha dicho un médico u otro profesional de la salud que usted tiene diabetes o diabetes de azúcar?]/
 [Fill2: ¿ALGUNA VEZ le ha dicho un médico u otro profesional de la salud que usted tiene diabetes o diabetes de azúcar?]

1. Sí
 2. No
 3. Límite de diabetes o prediabetes
- Refused
 Don't know

Universe: Sample adults 18+

Skip Instructions: <1> [goto DIBAGE]
 <2,R,D> [goto DIBPRE1]
 <3> [goto DIBPILL]

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

Spanish Text: ¿Ha habido algún medico u otro professional de la salud que le ha dicho ALGUNA VEZ que usted tiene: prediabetes, glucemia basal alterada (la alterción de la glucosa en ayunas), tolerancia anormal a la glucosa, al borde de desarrollar diabetes, o un nivel de azucar elevado?

1. Sí
 2. No
- Refused
 Don't know

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

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

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

Spanish Text: ? [F1]
 ¿A qué edad le dijo un médico o otro profesional de la salud por PRIMERA VEZ que usted tenía diabetes?

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

Skip Instructions: <1-100 R,D> [goto DIBPILL]
 If number in DIBAGE greater than person years old (AGE) goto ERR_ DIBAGE

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

Question ID: ACN.180_00.000 **Instrument Variable Name:** DIBPILL **QuestionnaireFileName:** Sample Adult**Spanish Text:** ¿Está AHORA tomando píldoras para la diabetes con el fin de bajar el nivel de azúcar en la sangre? A veces se les llama agentes orales o agentes orales hipoglucémicos.

1. Sí
 2. No
- Refused
-
- Don't know

Universe: Sample adults 18+ who were told they had diabetes or sugar diabetes (other than during pregnancy) or who were told they had pre-diabetes, impaired fasting glucose, impaired glucose tolerance, borderline diabetes, or high blood sugar**Skip Instructions:** <1,2,R,D> [goto INSLN1]

Question ID: ACN.190_00.000 **Instrument Variable Name:** INSLN1 **QuestionnaireFileName:** Sample Adult**Spanish Text:** ¿Está AHORA tomando insulina?

1. Sí
 2. No
- Refused
-
- Don't know

Universe: Sample adults 18+ who were told they had diabetes or sugar diabetes (other than during pregnancy) or who were told they had prediabetes, impaired fasting glucose, impaired glucose tolerance, borderline diabetes, or high blood sugar**Skip Instructions:** <1,2,R,D> [goto AHAYFYR]

Question ID: ACN.201_01.000 **Instrument Variable Name:** AHAYFYR **QuestionnaireFileName:** Sample Adult**Spanish Text:** ¿DURANTE LOS ÚLTIMOS 12 MESES, le ha dicho algún médico o profesional de la salud que usted tenía

...Fiebre del heno?

1. Sí
 2. No
- Refused
-
- Don't know

Universe: Sample adults 18+**Skip Instructions:** <1,2,R,D> [goto SINYR]

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

Question ID: ACN.201_02.000 **Instrument Variable Name:** SINYR **QuestionnaireFileName:** Sample Adult**Spanish Text:** * Read if necessary:

¿DURANTE LOS ÚLTIMOS 12 MESES, le ha dicho algún médico o profesional de la salud que usted tenía

... Sinusitis?

1. Sí
 2. No
- Refused
-
- Don't know

Universe: Sample adults 18+**Skip Instructions:** <1,2,R,D> [goto CBRCHYR]

Question ID: ACN.201_03.000 **Instrument Variable Name:** CBRCHYR **QuestionnaireFileName:** Sample Adult**Spanish Text:** * Read if necessary:

¿DURANTE LOS ÚLTIMOS 12 MESES, le ha dicho algún médico o profesional de la salud que usted tenía

... Bronquitis crónica?

1. Sí
 2. No
- Refused
-
- Don't know

Universe: Sample adults 18+**Skip Instructions:** <1,2,R,D> [goto KIDWKYR]

Question ID: ACN.201_04.000 **Instrument Variable Name:** KIDWKYR **QuestionnaireFileName:** Sample Adult**Spanish Text:** * Read if necessary:

¿DURANTE LOS ÚLTIMOS 12 MESES, le ha dicho algún médico o profesional de la salud que usted tenía

... Riñones débiles o deficientes? - No incluya piedras o cálculos renales, infecciones de la vejiga o incontinencia.

1. Sí
 2. No
- Refused
-
- Don't know

Universe: Sample adults 18+**Skip Instructions:** <1,2,R,D> [goto LIVYR]

2018NHIS Spanish Questionnaire -Sample Adult

Adult Conditions

Document Version Date: 12-Jun-19

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

Spanish Text: * Read if necessary:

¿DURANTE LOS ÚLTIMOS 12 MESES, le ha dicho algún médico o profesional de la salud que usted tenía

.. Cualquier tipo de condición del hígado?

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

Universe: Sample adults 18+

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

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

Spanish Text: Las proximas preguntas se refieren a sus coyunturas. Por favor NO incluya la espalda o el cuello. ¿DURANTE LOS ÚLTIMOS 30 DIAS, ha tenido algunos síntomas de dolores, malestares, o hinchazón en o alrededor de alguna coyuntura?

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

Universe: Sample adults 18+

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

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

Question ID: ACN.260_00.000 **Instrument Variable Name:** JMTHP **QuestionnaireFileName:** Sample Adult**Spanish Text:** (book) A4

¿Cuáles coyunturas están afectadas?

* Enter all that apply, separate with commas.

1. Hombro-derecho
 2. Hombro- izquierdo
 3. Codo- derecho
 4. Codo- izquierdo
 5. Cadera- derecha
 6. Cadera- izquierda
 7. Muñeca- derecha
 8. Muñeca- izquierda
 9. Rodilla- derecha
 10. Rodilla- izquierda
 11. Tobillo- derecho
 12. Tobillo- izquierdo
 13. Dedos del pie- derecho
 14. Dedos del pie- izquierdo
 15. Dedos, pulgar- derecho
 16. Dedos, pulgar- izquierdo
 17. Otra coyuntura no en la lista
- Don't know
Refused

Universe: Sample adults 18+ who had joint pain in the past 30 days**Skip Instructions:** <1-17,R,D> [goto JNTCHR]

Question ID: ACN.270_00.000 **Instrument Variable Name:** JNTCHR **QuestionnaireFileName:** Sample Adult**Spanish Text:** ¿Comenzaron INICIALMENTE estos síntomas en las coyunturas más de 3 meses atrás?

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+ who had joint pain in the past 30 days**Skip Instructions:** <1,2,R,D> [goto JNTHP]

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

Question ID: ACN.280_00.000 **Instrument Variable Name:** JNTHP **QuestionnaireFileName:** Sample Adult

Spanish Text: ¿Ha visto ALGUNA VEZ un médico u otro profesional de la salud para los síntomas de las coyunturas?

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

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

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

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

Spanish Text: ¿Le ha dicho ALGUNA VEZ un médico u otro profesional de la salud que padece alguna forma de artritis, artritis reumático, gota, lupus, o fibromialgia?

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

Universe: Sample adults 18+

Skip Instructions: <1> [goto ARTHLMT]
<2,R,D> if JNTSYMP = 1 [goto ARTHLMT];
 elseif JNTSYMP ne 1 [goto PAINECK]

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

Spanish Text: ¿Actualmente esta limitado(a) en alguna manera de sus actividades rutinarias por su artritis o síntomas de las coyunturas?

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

Universe: Sample adults 18+ with joint pain or arthritis

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

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

Question ID: ACN.300_00.000 **Instrument Variable Name:** PAINECK **QuestionnaireFileName:** Sample Adult**Spanish Text:** Las siguientes preguntas se refieren a dolores que tal vez haya tenido durante los ÚLTIMOS TRES MESES. Por favor, refiérase a dolores que DURARON UN DÍA O MÁS. No reporte dolencias y dolores que sean menores o pasajeros.

DURANTE LOS ÚLTIMOS TRES MESES, tuvo

... Dolor del cuello?

1. Sí
 2. No
- Refused
-
- Don't know

Universe: Sample adults 18+**Skip Instructions:** <1,2,R,D> [goto PAINLB]

Question ID: ACN.310_00.000 **Instrument Variable Name:** PAINLB **QuestionnaireFileName:** Sample Adult**Spanish Text:** * Read lead-in if necessary.

¿DURANTE LOS ÚLTIMOS TRES MESES, tuvo

... Dolor en la parte baja de la espalda?

1. Sí
 2. No
- Refused
-
- Don't know

Universe: Sample adults 18+**Skip Instructions:** <1> [goto PAINLEG]
<2,R,D> [goto PAINFACE]

Question ID: ACN.320_00.000 **Instrument Variable Name:** PAINLEG **QuestionnaireFileName:** Sample Adult**Spanish Text:** ¿Se extendió este dolor a alguna de sus piernas, a las áreas debajo de la rodilla?

1. Sí
 2. No
- Refused
-
- Don't know

Universe: Sample adults 18+ with low back pain in the past 3 months**Skip Instructions:** <1,2,R,D> [goto PAINFACE]

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

Question ID: ACN.331_01.000 **Instrument Variable Name:** PAINFACE **QuestionnaireFileName:** Sample Adult

Spanish Text: DURANTE LOS ÚLTIMOS TRES MESES, tuvo

... Dolores en la cara o en los músculos de la quijada o la coyuntura junto a la oreja?

1. Sí
2. No
Refused
Don't know

Universe: Sample adults 18+

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

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

Spanish Text: * Read lead-in if necessary:

DURANTE LOS ÚLTIMOS TRES MESES, tuvo

... Dolores severos de cabeza o migrañas?

1. Sí
2. No
Refused
Don't know

Universe: Sample adults 18+

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

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

Spanish Text: Las siguientes preguntas se refieren a su estado de salud DURANTE LAS DOS SEMANAS.

¿Tuvo un resfriado o catarro que comenzó DURANTE ESAS DOS SEMANAS?

1. Sí
2. No
Refused
Don't know

Universe: Sample adults 18+

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

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

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

Spanish Text: Las próximas preguntas son acerca de su audición, visión y dentadura.

¿Actualmente usa un audífono/aparato auditivo?

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+

Skip Instructions: <1> [goto AHEARST1]
<2,R,D> [goto HRAIDDEV]

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

Spanish Text: ¿Alguna vez usó audífono/aparato auditivo?

1. Sí
 2. No
- Refused
Don't Know

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

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

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

Spanish Text: SIN el uso de audífonos u otros aparatos auditivos, su audición es excelente, buena, un poco dificultosa, moderadamente dificultosa, muy dificultosa, o está sordo(a)?

1. Excelente
 2. Buena
 3. Un poco dificultosa
 4. Moderadamente dificultosa
 5. Muy dificultosa
 6. Sordo(a)
- Refused
Don't know

Universe: Sample adults 18+

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

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

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

Spanish Text: ¿Tiene dificultad con la vista, aún cuando usa lentes/espejuelos/anteojos o lentes de contacto?

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

Universe: Sample adults 18+

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

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

Spanish Text: ¿Está ciego o no puede ver por completo?

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

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

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

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

Spanish Text: ¿Ha perdido todos sus dientes naturales (permanentes) superiores e inferiores?

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

Universe: Sample adults 18+

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

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

Question ID: AHS.040_00.000 **Instrument Variable Name:** WKDAYR **QuestionnaireFileName:** Sample Adult**Spanish Text:** Durante los ULTIMOS 12 MESES, es decir, desde {12-month ref. Date} ¿Más o menos cuántos días faltó a su trabajo o negocio debido a una enfermedad o lesión (sin incluir ausencias por maternidad)?

* Enter '0' for None.

Universe: Sample adults 18+ who worked or had a job or business with or without pay in the last week or who had a job or business in the past 12 months**Skip Instructions:** <0-366,R,D> [goto BEDDAYR]
<120-366> [goto ERR_WKDAYR]

Question ID: AHS.050_00.000 **Instrument Variable Name:** BEDDAYR **QuestionnaireFileName:** Sample Adult**Spanish Text:** Durante los ULTIMOS 12 MESES, es decir, desde {12-month ref. date}, ¿ALREDEDOR de cuántos días estuvo en cama por más de medio día debido a una enfermedad o lesión (incluyendo los días en los cuales estuvo internado(a) en el hospital durante toda una noche completa)?

* Enter '0' for None.

Universe: Sample adults 18+**Skip Instructions:** <0-366,R,D> [goto AHSTATYR]
<120-366> [goto ERR_BEDDAYR]

Question ID: AHS.060_00.000 **Instrument Variable Name:** AHSTATYR **QuestionnaireFileName:** Sample Adult**Spanish Text:** ¿Comparado a HACE 12 MESES, diría que su salud ha mejorado, a empeorado o sigue más o menos igual?

1. Ha mejorado
 2. Ha empeorado
 3. Sigue más o menos igual
- Refused
-
- Don't know

Universe: Sample adults 18+**Skip Instructions:** <1-3,R,D> [goto SPECEQ]

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

Question ID: AHS.070_00.000 **Instrument Variable Name:** SPECEQ **QuestionnaireFileName:** Sample Adult**Spanish Text:** ¿Actualmente tiene algún problema de salud que requiera el uso de equipo especial, tal como: un bastón, una silla de ruedas, una cama especial o un teléfono especial?

1. Sí
2. No
- Refused
- Don't know

Universe: Sample adults 18+**Skip Instructions:** <1,2,R,D> [goto FLWALK]

Question ID: AHS.091_01.000 **Instrument Variable Name:** FLWALK **QuestionnaireFileName:** Sample Adult**Spanish Text:** (book) A6

A solas, y sin usar ningún tipo de equipo especial, ¿qué dificultad tiene para...

... Caminar un cuarto de milla - aproximadamente 3 cuadras?

0. Nada de difícil
1. Sólo un poco difícil
2. Algo difícil
3. Muy difícil
4. No puede hacerlo
6. No hace esta actividad
- Refused
- Don't know

Universe: Sample adults 18+**Skip Instructions:** <0-4,6,R,D> [goto FLCLIMB]

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

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

Spanish Text: (book) A6

* Read lead-in if necessary.

A solas, y sin usar ningún tipo de equipo especial, ¿qué dificultad tiene para..

... Subir 10 escalones sin descansar?

- 0. Nada de difícil
- 1. Sólo un poco difícil
- 2. Algo difícil
- 3. Muy difícil
- 4. No puede hacerlo
- 6. No hace esta actividad
- Refused
- Don't know

Universe: Sample adults 18+

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

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

Spanish Text: (book) A6

* Read lead-in if necessary.

A solas, y sin usar ningún tipo de equipo especial, ¿qué dificultad tiene para...

... Estar de pie aproximadamente por 2 horas?

- 0. Nada de difícil
- 1. Sólo un poco difícil
- 2. Algo difícil
- 3. Muy difícil
- 4. No puede hacerlo
- 6. No hace esta actividad
- Refused
- Don't know

Universe: Sample adults 18+

Skip Instructions: <0-4,6,R,D> [goto FLSIT]

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

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

Spanish Text: (book) A6

* Read lead-in if necessary.

A solas, y sin usar ningún tipo de equipo especial, ¿qué dificultad tiene para...

... Estar sentado aproximadamente por 2 horas?

- 0. Nada de difícil
- 1. Sólo un poco difícil
- 2. Algo difícil
- 3. Muy difícil
- 4. No puede hacerlo
- 6. No hace esta actividad
- Refused
- Don't know

Universe: Sample adults 18+

Skip Instructions: <0-4,6,R,D> [goto FLSTOOP]

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

Spanish Text: (book) A6

* Read lead-in if necessary.

A solas, y sin usar ningún tipo de equipo especial, ¿qué dificultad tiene para...

... Agacharse, doblarse, o arrodillarse?

- 0. Nada de difícil
- 1. Sólo un poco difícil
- 2. Algo difícil
- 3. Muy difícil
- 4. No puede hacerlo
- 6. No hace esta actividad
- Refused
- Don't know

Universe: Sample adults 18+

Skip Instructions: <0-4,6,R,D> [goto FLREACH]

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

Question ID: AHS.091_06.000 **Instrument Variable Name:** FLREACH **QuestionnaireFileName:** Sample Adult**Spanish Text:** (book) A6
* Read lead-in if necessary.

A solas, y sin usar ningún tipo de equipo especial, ¿qué dificultad tiene para...

... Alcanzar con las manos objetos que quedan por arriba de la cabeza?

- 0. Nada de difícil
 - 1. Sólo un poco difícil
 - 2. Algo difícil
 - 3. Muy difícil
 - 4. No puede hacerlo
 - 6. No hace esta actividad
- Refused
-
- Don't know

Universe: Sample adults 18+**Skip Instructions:** <0-4,6,R,D> [goto FLGRASP]

Question ID: AHS.141_01.000 **Instrument Variable Name:** FLGRASP **QuestionnaireFileName:** Sample Adult**Spanish Text:** (book) A6
* Read lead-in if necessary.

A solas, y sin usar ningún tipo de equipo especial, ¿qué dificultad tiene para...

... Usar los dedos para agarrar o manipular objetos pequeños?

- 0. Nada de difícil
 - 1. Sólo un poco difícil
 - 2. Algo difícil
 - 3. Muy difícil
 - 4. No puede hacerlo
 - 6. No hace esta actividad
- Refused
-
- Don't know

Universe: Sample adults 18+**Skip Instructions:** <0-4,6,R,D> [goto FLCARRY]

2018NHIS Spanish Questionnaire -Sample Adult

Adult Health Status & Limitations

Document Version Date: 12-Jun-19

Question ID: AHS.141_02.000 **Instrument Variable Name:** FLCARRY **QuestionnaireFileName:** Sample Adult

Spanish Text: (book) A6

* Read lead-in if necessary.

A solas, y sin usar ningún tipo de equipo especial, ¿qué dificultad tiene para...

... Levantar o llevar algo que pesa hasta 10 libras, como una bolsa llena de comestibles?

- 0. Nada de difícil
- 1. Sólo un poco difícil
- 2. Algo difícil
- 3. Muy difícil
- 4. No puede hacerlo
- 6. No hace esta actividad
- Refused
- Don't know

Universe: Sample adults 18+

Skip Instructions: <0-4,6,R,D> [goto FLPUSH]

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

Spanish Text: (book) A6

* Read lead-in if necessary.

A solas, y sin usar ningún tipo de equipo especial, ¿qué dificultad tiene para...

... Empujar o jalar objetos grandes como un sillón?

- 0. Nada de difícil
- 1. Sólo un poco difícil
- 2. Algo difícil
- 3. Muy difícil
- 4. No puede hacerlo
- 6. No hace esta actividad
- Refused
- Don't know

Universe: Sample adults 18+

Skip Instructions: <0-4,6,R,D> [goto FLSHOP]

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

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

Spanish Text: (book) A6

* Read lead-in if necessary.

A solas, y sin usar ningún tipo de equipo especial, ¿qué dificultad tiene para...

... Salir a actividades tales como ir de compras, ir al cine, o asistir a eventos deportivos?

- 0. Nada de difícil
- 1. Sólo un poco difícil
- 2. Algo difícil
- 3. Muy difícil
- 4. No puede hacerlo
- 6. No hace esta actividad
- Refused
- Don't know

Universe: Sample adults 18+

Skip Instructions: <0-4,6,R,D> [goto FLSOCL]

Question ID: AHS.171_02.000 **Instrument Variable Name:** FLSOCL **QuestionnaireFileName:** Sample Adult

Spanish Text: (book) A6

* Read lead-in if necessary.

A solas, y sin usar ningún tipo de equipo especial, ¿qué dificultad tiene para...

... Participar en actividades sociales tales como visitar amistades, asistir a clubs y reuniones, ir a fiestas?

- 0. Nada de difícil
- 1. Sólo un poco difícil
- 2. Algo difícil
- 3. Muy difícil
- 4. No puede hacerlo
- 6. No hace esta actividad
- Refused
- Don't know

Universe: Sample adults 18+

Skip Instructions: <0-4,6,R,D> [goto FLRELAX]

2018NHIS Spanish Questionnaire -Sample Adult

Adult Health Status & Limitations

Document Version Date: 12-Jun-19

Question ID: AHS.171_03.000 **Instrument Variable Name:** FLRELAX **QuestionnaireFileName:** Sample Adult

Spanish Text: (book) A6

* Read lead-in if necessary.

A solas, y sin usar ningún tipo de equipo especial, ¿qué dificultad tiene para...

... Hacer actividades en el hogar de relajamiento o de recreación (tales como la lectura, ver televisión, coser, oír música)?

- 0. Nada de difícil
- 1. Sólo un poco difícil
- 2. Algo difícil
- 3. Muy difícil
- 4. No puede hacerlo
- 6. No hace esta actividad
- Refused
- Don't know

Universe: Sample adults 18+

Skip Instructions: <1-4 or FLWALK= 1-4 or FLCLIMB= 1-4 or FLSTAND= 1-4 or FLSIT= 1-4 or FLSTOOP= 1-4 or FLREACH= 1-4 or FLGRASP= 1-4 or FLCARRY= 1-4 or FLPUSH= 1-4 or FLSHOP= 1-4 or FLSOCL= 1-4>[goto AFLHCA]

Else goto SMKEV (next section)

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

Question ID: AHS.200_00.000 **Instrument Variable Name:** AFLHCA **QuestionnaireFileName:** Sample Adult

Spanish Text: (book) A7

¿Qué condiciones o problemas de salud le impiden [fill1: condition 1, condition 2 or condition 3 (as specified in AHS.091_1 through AHS.171_3)][fill2: ¿Qué condiciones o problemas de salud le dificultan éstas actividades?

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

* Do not probe, except to clarify answer.

1. Visión/dificultad de la vista
 2. Dificultad auditiva
 3. Artritis/reumatismo
 4. Problema del cuello o espalda
 5. Fractura/lesión de huesos o coyunturas
 6. Otra lesión
 7. Problema cardíaco
 8. Derrame cerebral
 9. Hipertensión/presión alta
 10. Diabetes
 11. Problema pulmonar o respiratorio (e.j., asma y enfisema)
 12. Cáncer
 13. Defecto congénito
 14. Retraso mental
 15. Otro problema del desarrollo (e.j., parálisis cerebral)
 16. Senilidad
 17. Depresión/ansiedad/problema emocional
 18. Problema con su peso
- [*On bottom of Flashcard only: "Otro impedimento o problema" /*]
- [* / q4 or 2005 fix to add a divider line between 18 & 19 /*]
19. Pérdida de brazo/pierna/dedos
 20. Problemas de riñón/vejiga/renal
 21. Problemas circulatorios (incluyendo coágulos de sangre)
 22. Tumores benignos,quistes
 23. Fibromyalgia, lupus
 24. Osteoporosis, tendinitis
 25. Epilepsia, ataques
 26. Esclerosis múltiple,distrofia muscular
 27. Polio, myelitis
 28. Enfermedad Parkinson
 29. Otro daño nervioso
 30. Hernia
 31. Ulcera
 32. Varices/hemorroides
 33. Tiroides,enfermedad Graves o gota
 34. Problema de rodillas (no artritis(03)/no coyuntura lesionada (05))
 35. Migrañas (no dolor de cabeza común)
 90. Otro impedimento (Especifique una)
 91. Otro impedimento (Especifique una)
- Refused
Don't know/not sure
-

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

Universe: Sample adults 18+ who, without using special equipment, have at least a little difficulty walking a quarter mile; walking up 10 steps without resting; standing/being on feet for about 2 hours; sitting for about 2 hours; stooping/bending/kneeling; reaching up over head; using fingers to grasp/handle small objects; lifting/carrying 10 pounds; pushing/pulling large objects; going out for things (shopping/movies); participating in social activities; or relaxing at home (reading/sewing).

Skip Instructions: [1- 12, 14 - 35] goto the appropriate follow up question AHCL01N-AHCL12N, AHCL14N-AHCL35N], in numerical order
 <13> store "96" in AHCL13N and "6" IN AHCL13T[goto SMKEV]
 <90> [goto AFLHCA_S1]
 <91> [goto AFLHCA_S2]
 Roster through all AFLHCA entries. Once exhausted goto SMKEV (next section)
 <R,D> [goto SMKEV (next section)]

Question ID: AHS.201_90.000 **Instrument Variable Name:** AFLHCA_S1 **QuestionnaireFileName:** Sample Adult

Spanish Text:

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

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

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

Spanish Text:

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

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

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

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

Spanish Text: 1 of 2

¿Por cuánto tiempo ha tenido problemas de la vista?

* Enter number for time with your vision problem or problem seeing..

* Enter '95' for 95 or more.

* Enter '96' if since birth.

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

Skip Instructions: <1-95,D>[goto AHCL01T]
<R>[store "R" in AHCL01T] [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]
<96>[store "6" in AHCL01T] [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]

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

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

Skip Instructions: <1- 4, R,D>[goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]
<6> goto ERR2_AHCL01T
[if [AHCL01N = Number greater than person years old and AHCL01T= 4]] goto ERR1_AHCL01T

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

Spanish Text: 1 of 2

¿Por cuánto tiempo ha tenido problemas auditivos?

* Enter number for time with a hearing problem.

* Enter '95" for 95 or more.

* Enter "96" if since birth.

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

Skip Instructions: <1-95,D>[goto AHCL02T]
<R>[store "R" in AHCL02T] [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]
<96>[store "6" in AHCL02T] [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]

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

 Document Version Date: 12-Jun-19

Question ID: AHS.301_02.000 **Instrument Variable Name:** AHCL02T **QuestionnaireFileName:** Sample Adult

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

Skip Instructions: <1- 4, R,D>[goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]
 <6> goto ERR2_AHCL02T
 [if [AHCL02N = Number greater than person years old and AHCL02T= 4]] goto ERR1_AHCL02T

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

Spanish Text: 1 of 2

¿Por cuánto tiempo ha tenido artritis/reumatismo?

* Enter number for time with arthritis or rheumatism.

* Enter '95" for 95 or more.

* Enter "96" if since birth.

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

Skip Instructions: <1-95,D>[goto AHCL03T]
 <R>[store "R" in AHCL03T] [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]
 <96>[store "6" in AHCL03T] [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]

Question ID: AHS.302_02.000 **Instrument Variable Name:** AHCL03T **QuestionnaireFileName:** Sample Adult

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

Skip Instructions: <1- 4, R,D>[goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]
 <6> goto ERR2_AHCL03T
 [if [AHCL03N = Number greater than person years old and AHCL03T= 4]] goto ERR1_AHCL03T

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

 Document Version Date: 12-Jun-19

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

Spanish Text: 1 of 2

¿Por cuánto tiempo ha tenido problemas del cuello o espalda?

* Enter number for time with back or neck problem.

* Enter '95" for 95 or more.

* Enter "96" if since birth.

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

Skip Instructions: <1-95,D>[goto AHCL04T]
 <R>[store "R" in AHCL04T] [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]
 <96>[store "6" in AHCL04T] [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]

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

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

Skip Instructions: <1- 4, R,D>[goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]
 <6> goto ERR2_AHCL04T
 [if [AHCL04N = Number greater than person years old and AHCL04T= 4]] goto ERR1_AHCL04T

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

Spanish Text: 1 of 2

¿Por cuánto tiempo ha tenido lesiones de los huesos o las coyunturas?

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

* Enter '95" for 95 or more.

* Enter "96" if since birth.

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

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

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

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

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

Skip Instructions: <1- 4, R,D>[goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]
 <6> goto ERR2_AHCL05T
 [if [AHCL05N = Number greater than person years old and AHCL05T= 4]] goto ERR1_AHCL05T

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

Spanish Text: 1 of 2

¿Por cuánto tiempo ha estado lesionado(a) o herido(a)?

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

* Enter '95" for 95 or more.

* Enter "96" if since birth.

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

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

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

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

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

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

 Document Version Date: 12-Jun-19

Question ID: AHS.306_01.000 **Instrument Variable Name:** AHCL07N **QuestionnaireFileName:** Sample Adult

Spanish Text: 1 of 2

¿Por cuánto tiempo ha tenido problemas del corazón?

* Enter number for time with a heart problem.

* Enter '95" for 95 or more.

* Enter "96" if since birth.

Universe: Sample adults 18+ who had difficulty due to a heart problem

Skip Instructions: <1-95,D>[goto AHCL07T]
 <R>[store "R" in AHCL07T] [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]
 <96>[store "6" in AHCL07T] [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]

Question ID: AHS.306_02.000 **Instrument Variable Name:** AHCL07T **QuestionnaireFileName:** Sample Adult

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

Skip Instructions: <1- 4, R,D>[goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]
 <6> goto ERR2_AHCL07T
 [if [AHCL07N = Number greater than person years old and AHCL07T= 4]] goto ERR1_AHCL07T

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

Spanish Text: 1 of 2

¿Por cuánto tiempo ha tenido problemas debido a un derrame cerebral?

* Enter number for time with a stroke problem.

* Enter '95" for 95 or more.

* Enter "96" if since birth.

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

Skip Instructions: <1-95,D>[goto AHCL08T]
 <R>[store "R" in AHCL08T] [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]
 <96>[store "6" in AHCL08T] [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]

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

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

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

Skip Instructions: <1- 4, R,D>[goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]
 <6> goto ERR2_AHCL08T
 [if [AHCL08N = Number greater than person years old and AHCL08T= 4]] goto ERR1_AHCL08T

Question ID: AHS.308_01.000 **Instrument Variable Name:** AHCL09N **QuestionnaireFileName:** Sample Adult

Spanish Text: 1 of 2

¿Por cuánto tiempo ha tenido hipertensión/presión alta?

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

* Enter '95" for 95 or more.

* Enter "96" if since birth.

Universe: Sample adults 18+ who had difficulty due to hypertension or high blood pressure

Skip Instructions: <1-95,D>[goto AHCL09T]
 <R>[store "R" in AHCL09T] [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]
 <96>[store "6" in AHCL09T] [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]

Question ID: AHS.308_02.000 **Instrument Variable Name:** AHCL09T **QuestionnaireFileName:** Sample Adult

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

Skip Instructions: <1- 4, R,D>[goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]
 <6> goto ERR2_AHCL09T
 [if [AHCL09N = Number greater than person years old and AHCL09T= 4]] goto ERR1_AHCL09T

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

 Document Version Date: 12-Jun-19

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

Spanish Text: 1 of 2

¿Por cuánto tiempo ha tenido diabetes?

* Enter number for time with diabetes.

* Enter '95" for 95 or more.

* Enter "96" if since birth.

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

Skip Instructions: <1-95,D>[goto AHCL10T]
 <R>[store "R" in AHCL10T] [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]
 <96>[store "6" in AHCL10T] [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]

Question ID: AHS.309_02.000 **Instrument Variable Name:** AHCL10T **QuestionnaireFileName:** Sample Adult

Spanish Text:

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

Skip Instructions: <1- 4, R,D>[goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]
 <6> goto ERR2_AHCL10T
 [if [AHCL10N = Number greater than person years old and AHCL10T= 4]] goto ERR1_AHCL10T

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

Spanish Text: 1 of 2

¿Por cuánto tiempo ha tenido problemas respiratorios?

* Enter number for time with a lung or breathing problem.

* Enter '95" for 95 or more.

* Enter "96" if since birth.

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

Skip Instructions: <1-95,D>[goto AHCL11T]
 <R>[store "R" in AHCL11T] [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]
 <96>[store "6" in AHCL11T] [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]

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

Question ID: AHS.310_02.000 **Instrument Variable Name:** AHCL11T **QuestionnaireFileName:** Sample Adult
Spanish Text:
Universe: Sample adults 18+ who answered 1-95, D for the "number" part of this 2-part question

Skip Instructions: <1- 4, R,D>[goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]
 <6> goto ERR2_AHCL11T
 [if [AHCL11N = Number greater than person years old and AHCL11T= 4]] goto ERR1_AHCL11T

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

Spanish Text: 1 of 2

¿Por cuánto tiempo ha tenido cáncer?

* Enter number for time with cancer.

* Enter '95" for 95 or more.

* Enter "96" if since birth.

Universe: Sample adults 18+ who had difficulty due to cancer

Skip Instructions: <1-95,D>[goto AHCL12T]
 <R>[store "R" in AHCL12T] [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]
 <96>[store "6" in AHCL12T] [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]

Question ID: AHS.311_02.000 **Instrument Variable Name:** AHCL12T **QuestionnaireFileName:** Sample Adult
Spanish Text:
Universe: Sample adults 18+ who answered 1-95, D for the "number" part of this 2-part question

Skip Instructions: <1- 4, R,D>[goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]
 <6> goto ERR2_AHCL12T
 [if [AHCL12N = Number greater than person years old and AHCL12T= 4]] goto ERR1_AHCL12T

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

 Document Version Date: 12-Jun-19

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

Spanish Text: 1 of 2

¿Por cuánto tiempo ha tenido retraso mental?

* Enter number for time with mental retardation.

* Enter '95" for 95 or more.

* Enter "96" if since birth.

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

Skip Instructions: <1-95,D>[goto AHCL14T]
 <R>[store "R" in AHCL14T] [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]
 <96>[store "6" in AHCL14T] [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]

Question ID: AHS.313_02.000 **Instrument Variable Name:** AHCL14T **QuestionnaireFileName:** Sample Adult

Spanish Text:

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

Skip Instructions: <1- 4, R,D>[goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]
 <6> goto ERR2_AHCL14T
 [if [AHCL14N = Number greater than person years old and AHCL14T= 4]] goto ERR1_AHCL14T

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

Spanish Text: 1 of 2

¿Por cuánto tiempo ha tenido problemas del desarrollo?

* Enter number for time with a developmental problem.

* Enter '95" for 95 or more.

* Enter "96" if since birth.

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

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

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

 Document Version Date: 12-Jun-19

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

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

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

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

Spanish Text: 1 of 2

¿Por cuánto tiempo ha tenido senilidad?

* Enter number for time with senility.

* Enter '95" for 95 or more.

* Enter "96" if since birth.

Universe: Sample adults 18+ who had difficulty due to senility

Skip Instructions: <1-95,D>[goto AHCL16T]
 <R>[store "R" in AHCL16T] [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]
 <96>[store "6" in AHCL16T] [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]

Question ID: AHS.315_02.000 **Instrument Variable Name:** AHCL16T **QuestionnaireFileName:** Sample Adult

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

Skip Instructions: <1- 4, R,D>[goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]
 <6> goto ERR2_AHCL16T
 [if [AHCL16N = Number greater than person years old and AHCL16T= 4]] goto ERR1_AHCL16T

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

 Document Version Date: 12-Jun-19

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

Spanish Text: 1 of 2

¿Por cuánto tiempo ha tenido depresión/ansiedad/problemas emocionales?

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

* Enter '95" for 95 or more.

* Enter "96" if since birth.

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

Skip Instructions: <1-95,D>[goto AHCL17T]
 <R>[store "R" in AHCL17T] [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]
 <96>[store "6" in AHCL17T] [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]

Question ID: AHS.316_02.000 **Instrument Variable Name:** AHCL17T **QuestionnaireFileName:** Sample Adult

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

Skip Instructions: <1- 4, R,D>[goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]
 <6> goto ERR2_AHCL17T
 [if [AHCL17N = Number greater than person years old and AHCL17T= 4]] goto ERR1_AHCL17T

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

Spanish Text: 1 of 2

¿Por cuánto tiempo ha tenido problemas con su peso?

* Enter number for time with a weight problem.

* Enter '95" for 95 or more.

* Enter "96" if since birth.

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

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

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

 Document Version Date: 12-Jun-19

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

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

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

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

Spanish Text: 1 of 2

¿Por cuánto tiempo ha faltado un brazo/una pierna/dedos?

* Enter number for time with a missing limb.

* Enter '95" for 95 or more.

* Enter "96" if since birth.

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

Skip Instructions: <1-95,D>[goto AHCL19T]
 <R>[store "R" in AHCL19T] [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]
 <96>[store "6" in AHCL19T] [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]

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

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

Skip Instructions: <1- 4, R,D>[goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]
 <6> goto ERR2_AHCL19T
 [if [AHCL19N = Number greater than person years old and AHCL19T= 4]] goto ERR1_AHCL19T

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

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

Spanish Text: 1 of 2

¿Por cuánto tiempo ha tenido problemas de riñón/vejiga/renal?

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

* Enter '95" for 95 or more.

* Enter "96" if since birth.

Universe: Sample adults 18+ who had difficulty due to a kidney, bladder or renal problem

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

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

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

Skip Instructions: <1- 4, R,D>[goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]
<6> goto ERR2_AHCL20T
[if [AHCL20N = Number greater than person years old and AHCL20T= 4]] goto ERR1_AHCL20T

Question ID: AHS.320_01.000 **Instrument Variable Name:** AHCL21N **QuestionnaireFileName:** Sample Adult

Spanish Text: 1 of 2

¿Por cuánto tiempo ha tenido problemas circulatorios(incluyendo coágulos)?

* Enter number for time with a circulation problem.

* Enter '95" for 95 or more.

* Enter "96" if since birth.

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

Skip Instructions: <1-95,D>[goto AHCL21T]
<R>[store "R" in AHCL21T] [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]
<96>[store "6" in AHCL21T] [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]

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

Question ID: AHS.320_02.000 **Instrument Variable Name:** AHCL21T **QuestionnaireFileName:** Sample Adult
Spanish Text:
Universe: Sample adults 18+ who answered 1-95, D for the "number" part of this 2-part question

Skip Instructions: <1- 4, R,D>[goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]
 <6> goto ERR2_AHCL21T
 [if [AHCL21N = Number greater than person years old and AHCL21T= 4]] goto ERR1_AHCL21T

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

Spanish Text: 1 of 2

¿Por cuánto tiempo ha tenido tumores benignos/quistes?

* Enter number for time with benign tumors or cysts.

* Enter '95" for 95 or more.

* Enter "96" if since birth.

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

Skip Instructions: <1-95,D>[goto AHCL22T]
 <R>[store "R" in AHCL22T] [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]
 <96>[store "6" in AHCL22T] [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]

Question ID: AHS.321_02.000 **Instrument Variable Name:** AHCL22T **QuestionnaireFileName:** Sample Adult
Spanish Text:
Universe: Sample adults 18+ who answered 1-95, D for the "number" part of this 2-part question

Skip Instructions: <1- 4, R,D>[goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]
 <6> goto ERR2_AHCL22T
 [if [AHCL22N = Number greater than person years old and AHCL22T= 4]] goto ERR1_AHCL22T

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

 Document Version Date: 12-Jun-19

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

Spanish Text: 1 of 2

¿Por cuánto tiempo ha tenido fibromyalgia/lupus?

* Enter number for time with fibromyalgia or lupus.

* Enter '95" for 95 or more.

* Enter "96" if since birth.

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

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

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

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

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

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

Spanish Text: 1 of 2

¿Por cuánto tiempo ha tenido osteoporosis/tendinitis?

* Enter number for time with osteoporosis or tendinitis.

* Enter '95" for 95 or more.

* Enter "96" if since birth.

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

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

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

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

Spanish Text:

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

Skip Instructions: <1- 4, R,D>[goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]
<6> goto ERR2_AHCL24T
[if [AHCL24N = Number greater than person years old and AHCL24T= 4]] goto ERR1_AHCL24T

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

Spanish Text: 1 of 2

¿Por cuánto tiempo ha tenido epilepsia/ataques?

* Enter number for time with epilepsy or seizures.

* Enter '95" for 95 or more.

* Enter "96" if since birth.

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

Skip Instructions: <1-95,D>[goto AHCL25T]
<R>[store "R" in AHCL25T] [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]
<96>[store "6" in AHCL25T] [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]

Question ID: AHS.324_02.000 **Instrument Variable Name:** AHCL25T **QuestionnaireFileName:** Sample Adult

Spanish Text:

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

Skip Instructions: <1- 4, R,D>[goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]
<6> goto ERR2_AHCL25T
[if [AHCL25N = Number greater than person years old and AHCL25T= 4]] goto ERR1_AHCL25T

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

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

Spanish Text: 1 of 2

¿Por cuánto tiempo ha tenido esclerosis múltiple/distrofia muscular?

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

* Enter '95" for 95 or more.

* Enter "96" if since birth.

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

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

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

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

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

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

Spanish Text: 1 of 2

¿Por cuánto tiempo ha tenido polio(myelitis)/ parálisis/ paraplejía/apoplejía?

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

* Enter '95" for 95 or more.

* Enter "96" if since birth.

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

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

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

 Document Version Date: 12-Jun-19

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

Spanish Text:

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

Skip Instructions: <1- 4, R,D>[goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]
 <6> goto ERR2_AHCL27T
 [if [AHCL27N = Number greater than person years old and AHCL27T= 4]] goto ERR1_AHCL27T

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

Spanish Text: 1 of 2

¿Por cuánto tiempo ha tenido enfermedad de Parkinson's?

* Enter number for time with Parkinson's disease or tremors.

* Enter '95" for 95 or more.

* Enter "96" if since birth.

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

Skip Instructions: <1-95,D>[goto AHCL28T]
 <R>[store "R" in AHCL28T] [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]
 <96>[store "6" in AHCL28T] [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]

Question ID: AHS.327_02.000 **Instrument Variable Name:** AHCL28T **QuestionnaireFileName:** Sample Adult

Spanish Text:

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

Skip Instructions: <1- 4, R,D>[goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]
 <6> goto ERR2_AHCL28T
 [if [AHCL28N = Number greater than person years old and AHCL28T= 4]] goto ERR1_AHCL28T

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

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

Spanish Text: 1 of 2

¿Por cuánto tiempo ha tenido daño al sistema nervioso/ incluya el síndrome de túnel carpal?

* Enter number for time with nerver damage (including carpal tunnel syndrome).

* Enter '95" for 95 or more.

* Enter "96" if since birth.

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

Skip Instructions: <1-95,D>[goto AHCL29T]
<R>[store "R" in AHCL29T] [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]
<96>[store "6" in AHCL29T] [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]

Question ID: AHS.328_02.000 **Instrument Variable Name:** AHCL29T **QuestionnaireFileName:** Sample Adult

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

Skip Instructions: <1- 4, R,D>[goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]
<6> goto ERR2_AHCL29T
[if [AHCL29N = Number greater than person years old and AHCL29T= 4]] goto ERR1_AHCL29T

Question ID: AHS.329_01.000 **Instrument Variable Name:** AHCL30N **QuestionnaireFileName:** Sample Adult

Spanish Text: 1 of 2

¿Por cuánto tiempo ha tenido problemas debido a una hernia?

* Enter number for time with a hernia.

* Enter '95" for 95 or more.

* Enter "96" if since birth.

Universe: Sample adults 18+ who had difficulty due to a hernia

Skip Instructions: <1-95,D>[goto AHCL30T]
<R>[store "R" in AHCL30T] [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]
<96>[store "6" in AHCL30T] [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]

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

Question ID: AHS.329_02.000 **Instrument Variable Name:** AHCL30T **QuestionnaireFileName:** Sample Adult

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

Skip Instructions: <1- 4, R,D>[goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]
 <6> goto ERR2_AHCL30T
 [if [AHCL30N = Number greater than person years old and AHCL30T= 4]] goto ERR1_AHCL30T

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

Spanish Text: 1 of 2

¿Por cuánto tiempo ha tenido una úlcera(s)?

* Enter number for time with an ulcer.

* Enter '95" for 95 or more.

* Enter "96" if since birth.

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

Skip Instructions: <1-95,D>[goto AHCL31T]
 <R>[store "R" in AHCL31T] [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]
 <96>[store "6" in AHCL31T] [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]

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

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

Skip Instructions: <1- 4, R,D>[goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]
 <6> goto ERR2_AHCL31T
 [if [AHCL31N = Number greater than person years old and AHCL31T= 4]] goto ERR1_AHCL31T

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

 Document Version Date: 12-Jun-19

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

Spanish Text: 1 of 2

¿Por cuánto tiempo ha tenido varices/hemorroides?

* Enter number for time with varicose veins or hemorrhoids.

* Enter '95" for 95 or more.

* Enter "96" if since birth.

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

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

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

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

Skip Instructions: <1- 4, R,D>[goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]
 <6> goto ERR2_AHCL32T
 [if [AHCL32N = Number greater than person years old and AHCL32T= 4]] goto ERR1_AHCL32T

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

Spanish Text: 1 of 2

¿Por cuánto tiempo ha tenido problemas de la tiroides/enfermedad Graves/gota?

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

* Enter '95" for 95 or more.

* Enter "96" if since birth.

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

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

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

 Document Version Date: 12-Jun-19

Question ID: AHS.332_02.000 **Instrument Variable Name:** AHCL33T **QuestionnaireFileName:** Sample Adult
Spanish Text:
Universe: Sample adults 18+ who answered 1-95, D for the "number" part of this 2-part question

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

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

Spanish Text: 1 of 2

¿Por cuánto tiempo ha tenido un problema de rodillas?

* Enter number for time with a knee problem.

* Enter '95" for 95 or more.

* Enter "96" if since birth.

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

Skip Instructions: <1-95,D>[goto AHCL34T]
 <R>[store "R" in AHCL34T] [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]
 <96>[store "6" in AHCL34T] [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]

Question ID: AHS.333_02.000 **Instrument Variable Name:** AHCL34T **QuestionnaireFileName:** Sample Adult
Spanish Text:
Universe: Sample adults 18+ who answered 1-95, D for the "number" part of this 2-part question

Skip Instructions: <1- 4, R,D>[goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]
 <6> goto ERR2_AHCL34T
 [if [AHCL34N = Number greater than person years old and AHCL34T= 4]] goto ERR1_AHCL34T

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

 Document Version Date: 12-Jun-19

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

Spanish Text: 1 of 2

¿Por cuánto tiempo ha tenido migrañas?

* Enter number for time with migraine headaches.

* Enter '95' for 95 or more.

* Enter "96" if since birth.

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

Skip Instructions: <1-95,D>[goto AHCL35T]
 <R>[store "R" in AHCL35T] [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]
 <96>[store "6" in AHCL35T] [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]

Question ID: AHS.334_02.000 **Instrument Variable Name:** AHCL35T **QuestionnaireFileName:** Sample Adult

Spanish Text:

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

Skip Instructions: <1- 4, R,D>[goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]
 <6> goto ERR2_AHCL35T
 [if [AHCL35N = Number greater than person years old and AHCL35T= 4]] goto ERR1_AHCL35T

Question ID: AHS.335_01.000 **Instrument Variable Name:** AHCL90N **QuestionnaireFileName:** Sample Adult

Spanish Text: 1 of 2

¿Por cuánto tiempo ha tenido {problem in AFLHCA90}?

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

* Enter '95' for 95 or more.

* Enter "96" if since birth.

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

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

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

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

Spanish Text:

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

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

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

Spanish Text: 1 of 2

¿Por cuánto tiempo ha tenido {problem in AFLHCA91}?

* Enter number for time with {problem in AFLHCA91}.

* Enter '95" for 95 or more.

* Enter "96" if since birth.

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

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

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

Spanish Text:

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

Skip Instructions: <1- 4, R,D>[goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]
<6> goto ERR2_AHCL91T
[if [AHCL91N = Number greater than person years old and AHCL91T= 4]] goto ERR1_AHCL91T

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

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

Spanish Text: Las siguientes preguntas se refieren a fumar cigarrillos.

¿Ha fumado por lo menos 100 cigarrillos durante TODA SU VIDA?

1. Sí
2. No

Refused
Don't Know

Universe: Sample adults 18+

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

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

Spanish Text: ¿Qué edad tenía cuándo comenzó a fumar con regularidad POR PRIMERA VEZ?

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

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

* Enter '96' if never smoked regularly.

Universe: Sample adults 18+ who ever smoked 100 cigarettes

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

Question ID: AHB.030_00.000 **Instrument Variable Name:** SMKNOW **QuestionnaireFileName:** Sample Adult

Spanish Text: ¿ACTUALMENTE, fuma cigarrillos a diario, algunos de los días o ya no fuma?

1. A diario
2. Algunos de los días
3. Ya no fuma

Refused
Don't Know

Universe: Sample adults 18+ who ever smoked 100 cigarettes

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

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

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

Spanish Text: 1 of 2

¿Hace cuánto tiempo dejó de fumar cigarrillos?

* Enter number for time since quit smoking.

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

Universe: Sample adults 18+ who quit smoking

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

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

Spanish Text:

Universe: Sample adults 18+ who quit smoking

Skip Instructions: <1-4> [goto ECIGEV2]
<4> [if SMKQTNO gt (AGE - <15>), goto ERR1_SMKQTTP
if (SMKREG + SMKQTNO gt AGE), goto ERR2_SMKQTTP.

Question ID: AHB.050_00.000 **Instrument Variable Name:** CIGSDA1 **QuestionnaireFileName:** Sample Adult

Spanish Text: ¿Cuál es el promedio de cigarrillos que fuma al día?

* Enter '1' if less than 1 cigarette.

* Enter '95' if 95 or more cigarettes.

Universe: Sample adults 18+ who are current every day smokers

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

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

Spanish Text: Durante los ULTIMOS 30 DIAS, ¿cuántos días fumó cigarrillos?

*Enter '0' for None.

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

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

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

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

Spanish Text: Durante los ULTIMOS 30 DIAS, en esos días en que fumó, ¿alrededor de cuántos cigarrillos fumaba al día?

* Enter '1' if less than 1.

* Enter '95' if 95 or more cigarettes.

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

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

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

Spanish Text: Durante los ULTIMOS 12 MESES, ¿ha parado de fumar por más de un día PORQUE TRATABA DE DEJAR DE FUMAR?

1. Sí
 2. No
- Refused
Don't Know

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

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

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

Spanish Text:

Universe: Sample adults 18+

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

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

Spanish Text:

Universe: Sample adults 18+ who have ever used e-cigarettes

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

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

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

Spanish Text:

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

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

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

Spanish Text:

Universe: Sample adults 18+

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

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

Spanish Text:

Universe: Sample adults 18+ who have ever smoked a regular cigar, cigarillo, or filtered cigar

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

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

Spanish Text:

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

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

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

Spanish Text:

Universe: Sample adults 18+

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

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

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

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

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

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

Spanish Text:
Universe: Sample adults 18+

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

Question ID: AHB.085_00.100 **Instrument Variable Name:** SMKLSCR2 **QuestionnaireFileName:** Sample Adult

Spanish Text:
Universe: Sample adults 18+ who have ever used smokeless tobacco products

Skip Instructions: <1-3,R,D> [goto VIGNO]

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

Spanish Text: 1 of 2

Las siguientes preguntas son sobre actividades físicas (ejercicio, deportes, aficiones físicamente activas) que usted puede hacer en su TIEMPO LIBRE.

¿Con qué frecuencia hace actividades EXTENUANTES DE POR LO MENOS 10 MINUTOS que lo hacen sudar MUCHO, aumentando BASTANTE su respiración o ritmo cardíaco?

* Read if necessary: ¿Cuántas veces por día, por semana, por mes, o por año hace usted estas actividades?

* Enter number for vigorous leisure-time physical activities.

* Enter '0' for Never.

* Enter '996' if unable to do this type of activity.

Universe: Sample adults 18+

Skip Instructions: <0,996,R,D>[goto MODNO]
<1-995>[goto VIGTP]

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

Question ID: AHB.090_02.000 **Instrument Variable Name:** VIGTP **QuestionnaireFileName:** Sample Adult

Spanish Text: 2 of 2

* Enter time period for vigorous leisure-time physical activities.

1. Días
2. Semanas
3. Meses
4. Años

Universe: Sample adults 18+ who do vigorous activities

Skip Instructions: <1-4> goto VIGLNGNO
 [if (VIGNO gt <4> and VIGTP eq <1>) or
 (VIGNO gt <28> and VIGTP eq <2>) or
 (VIGNO gt <31> and VIGTP eq <3>) or
 (VIGNO gt <365> and VIGTP eq <4>) goto ERR1_VIGTP]

Question ID: AHB.100_01.000 **Instrument Variable Name:** VIGLNGNO **QuestionnaireFileName:** Sample Adult

Spanish Text: 1 of 2

¿Por cuánto tiempo hace estas actividades extenuantes de tiempo-libre a la vez?

* Enter number for length of vigorous leisure-time physical activities.

Universe: Sample adults 18+ who do vigorous activities

Skip Instructions: <1-995>[goto VIGLNGTP]
 <R,D>[goto MODNO]

Question ID: AHB.100_02.000 **Instrument Variable Name:** VIGLNGTP **QuestionnaireFileName:** Sample Adult

Spanish Text:
Universe: Sample adults 18+ who do vigorous activities

Skip Instructions: <1,2>goto MODNO
 if VIGLNGNO lt <10> and VIGLNGTP eq <1> goto ERR1_VIGLNGTP;
 if (VIGLNGNO gt <90> and VIGLNGTP eq <1>) or if VIGLNGNO gt <2> and VIGLNGTP eq <2> goto
 ERR2_VIGLNGTP

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

Question ID: AHB.110_01.000 **Instrument Variable Name:** MODNO **QuestionnaireFileName:** Sample Adult

Spanish Text: ¿Con qué frecuencia HACE actividades LIGERAS DE TIEMPO-LIBRE DE POR LO MENOS 10 MINUTOS que le hacen sudar UN POCO o que incrementan LEVEMENTE su respiración o ritmo cardíaco?

* If necessary, prompt with: ¿Cuántas veces por día, por semana, por mes, o por año hace usted estas actividades?

* Enter number of light or moderate leisure-time physical activities.

* Enter '0' for Never.

* Enter '996' if unable to do this type of activity.

Universe: Sample adults 18+

Skip Instructions: <1-995>[goto MODTP]
 <0, 996, R,D>[goto STRNGNO]

Question ID: AHB.110_02.000 **Instrument Variable Name:** MODTP **QuestionnaireFileName:** Sample Adult

Spanish Text: 2 of 2

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

1. Días
2. Semanas
3. Meses
4. Años

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

Skip Instructions: <1-4> goto MODLNGNO
 [if (MODNO gt <4> and MODTP eq <1>) or
 (MODNO gt <28> and MODTP eq <2>) or
 (MODNO gt <31> and MODTP eq <3>) or
 (MODNO gt <365> and MODTP eq <4>)] goto ERR_MODNO

Question ID: AHB.120_01.000 **Instrument Variable Name:** MODLNGNO **QuestionnaireFileName:** Sample Adult

Spanish Text: 1 of 2

¿Por cuánto tiempo hace estas actividades ligeras de tiempo-libre cada vez?

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

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

Skip Instructions: <1-995>[goto MODLNGTP]
 <R,D>[goto STRNGNO]

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

Question ID: AHB.120_02.000 **Instrument Variable Name:** MODLNGTP **QuestionnaireFileName:** Sample Adult
Spanish Text:
Universe: Sample adults 18+ who do light or moderate activities

Skip Instructions: <1,2> goto STRNGNO

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

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

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

Spanish Text: ¿Con qué frecuencia hace actividades físicas de TIEMPO-LIBRE específicamente para FORTALECER sus músculos, tal como levantar pesas o ejercicios calisténicos? (Incluya todas las actividades aunque las haya mencionado anteriormente.)

* Read if necessary: ¿Cuántas veces por día, por semana, por mes, o por año hace usted estas actividades?

* Enter number for strengthening activities.

* Enter '0' for Never.

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

Universe: Sample adults 18+

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

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

Spanish Text: 2 of 2

* Enter time period for strengthening activities

1. Días
2. Semanas
3. Meses
4. Años

Universe: Sample adults 18+ who do strengthening activities

Skip Instructions: <1-4> [goto ALC1YR]
[If (STRNGNO gt <4> & STRNGTP = <1>) or (STRNGNO gt <28> & STRNGTP = <2>) or
(STRNGNO gt <31> & STRNGTP = <3>) or (STRNGNO gt <365> & STRNGTP = <4>) goto
ERR_STRNGTP]

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

Question ID: AHB.140_00.000 **Instrument Variable Name:** ALC1YR **QuestionnaireFileName:** Sample Adult

Spanish Text: Las siguientes preguntas se refieren al consumo de bebidas alcohólicas, incluyendo licor como whiskey o ginebra, la cerveza, el vino, "wine coolers" y cualquier otro tipo de bebida alcohólica.

En CUALQUIER AÑO, ¿ha consumido por lo menos 12 tragos de cualquier tipo de bebida alcohólica?

1. Sí
 2. No
- Refused
-
- Don't Know

Universe: Sample adults 18+

Skip Instructions: <1> [goto ALC12MNO]
 <2,R,D> [goto ALCLIFE]

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

Spanish Text: Durante TODA SU VIDA, ¿ha consumido por lo menos 12 tragos de cualquier tipo de bebida alcohólica?

1. Sí
 2. No
- Refused
-
- Don't Know

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

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

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

Spanish Text: 1 of 2

¿Con qué frecuencia consumió cualquier tipo de bebida alcohólica DURANTE EL AÑO PASADO?

* Read if necessary: ¿Cuántos días por semana, por mes, o por año consumió bebida alcohólica?

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

*Enter '0' for Never.

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

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

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

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

Spanish Text: 2 of 2

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

1. Semanas
2. Meses
3. Años

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

Skip Instructions: <1-3> [goto ALCAMT]

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

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

Spanish Text: Durante el AÑO PASADO, en esos días que consumió bebidas alcohólicas, en promedio, ¿cuántos tragos tomó?

* Enter '1' if less than 1 drink.

* Enter '95' if 95 or more drinks.

Universe: Sample adults 18+ who have had at least 1 drink in the past year

Skip Instructions: <1-95,D,R>[goto ALC5UPNO]
<10-95>[goto ERR_ALCAMT]

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

Spanish Text: 1 of 2

Durante el AÑO PASADO, ¿cuántos DIAS consumió 5 tragos o más de cualquier tipo de bebida alcohólica?

* Read if necessary:

¿Cuántas veces por semana, por mes, o por año consumió 5 o más bebidas alcohólicas en un solo día?

* Enter number of days.

* Enter '0' for Never/None.

Universe: Sample adults 18+ who have had at least 1 drink in the past year

Skip Instructions: <1-365>[goto ALC5UPTP]
<0,R,D>[goto AHGT_FT]

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

Question ID: AHB.180_02.000 **Instrument Variable Name:** ALC5UPTP **QuestionnaireFileName:** Sample Adult

Spanish Text: 2 of 2

* Enter time period for days per week, per month or per year.

1. Semanas
2. Meses
3. Años

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

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

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

Spanish Text: ? [F1]

Teniendo en cuenta todos los tipos de bebidas alcohólicas, DURANTE LOS ÚLTIMOS 30 DÍAS, ¿cuántas veces tuvo [fill: 5 o más / 4 o más] bebidas en una sola ocasión?

* Enter '0' if none.

* Enter '60' if 60 or more times.

(Allow 0-60,R,D)

Universe: Sample adults 18+ who have had 5+ (males) or 4+ (females) drinks on an occasion in the past 30 days

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

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

Spanish Text: ¿Qué estatura tiene estando descalzo(a)?

* Enter "M" to record metric measurements

Universe: Sample adults 18+

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

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

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

Spanish Text: ¿Qué estatura tiene estando descalzo(a)?

* Enter '0' if exactly [fill1: AHGT_FT] feet tall.

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

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

Question ID: AHB.190_03.000 **Instrument Variable Name:** AHGT_M **QuestionnaireFileName:** Sample Adult

Spanish Text: ¿Qué estatura tiene estando descalzo(a)?

* Enter height in metric.

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

Skip Instructions: <empty> goto ERR_AHGT_M
 <0-2> goto AHGT_CM
 <R,D> goto AWGT_LB

Question ID: AHB.190_04.000 **Instrument Variable Name:** AHGT_CM **QuestionnaireFileName:** Sample Adult

Spanish Text:

Universe: Sample adults 18+ who answered their height in meters

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

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

Document Version Date: 12-Jun-19

Question ID: AAU.020_00.000 **Instrument Variable Name:** AUSUALPL **QuestionnaireFileName:** Sample Adult**Spanish Text:** Las preguntas siguientes se refieren a los servicios médicos.

¿Hay algún lugar al que va NORMALMENTE cuando está enfermo(a) o requiere consultar algo relacionado con su salud?

1. Sí
 2. NO hay ningún lugar
 3. Hay MAS DE UN lugar
- Refused
-
- Don't Know

Universe: Sample adults 18+**Skip Instructions:** <1,3> [goto APLKIND]
<2,R,D> [goto AHCPLKND]

Question ID: AAU.030_00.000 **Instrument Variable Name:** APLKIND **QuestionnaireFileName:** Sample Adult**Spanish Text:** [Fill1: ¿Qué tipo de lugar es - una clínica, consultorio de médico, sala de emergencia o algún otro lugar?]

[Fill2: ¿A qué tipo de lugar va con más frecuencia - a una clínica, consultorio de médico, sala de emergencia o a algún otro lugar?]

1. Clínica o centro de salud
 2. Consultorio de médico o HMO
 3. Sala de emergencia de un hospital
 4. Departamento de pacientes externos de un hospital
 5. Algún otro lugar
 6. No va a un solo lugar más seguido
- Refused
-
- Don't know

Universe: Sample adults 18+ with 1+ usual place(s) to go when sick/need health advice**Skip Instructions:** <1-5> [go to AHCPLROU]
<6,R,D> [go to AHCPLKND]

Question ID: AAU.035_00.000 **Instrument Variable Name:** AHCPLROU **QuestionnaireFileName:** Sample Adult**Spanish Text:** ¿Es ese(a) [fill1: APLKIND/AAU.030] el mismo lugar al que va NORMALMENTE cuando necesita tratamiento o cuidado preventivo rutinario, tal como examen físico o revisión general?

1. Sí
 2. No
- Refused
-
- Don't Know

Universe: Sample adults aged 18+ years having a clinic or health center, doctor's office or HMO, hospital emergency room, hospital outpatient department, or some other place that they usually go to when they are sick or need advice about their health**Skip Instructions:** <1> [goto AHCCHGYR]
<2,R,D> [go to AHCPLKND]

2018NHIS Spanish Questionnaire -Sample Adult**Adult Access to Health Care & Utilization**Document Version Date: 12-Jun-19

Question ID: AAU.037_00.000 **Instrument Variable Name:** AHCPLKND **QuestionnaireFileName:** Sample Adult**Spanish Text:** ¿A qué tipo de lugar va NORMALMENTE cuando necesita tratamiento o cuidado preventivo rutinario, tal como exámen físico o revisión general?

0. No recibe tratamiento o cuidado preventivo en ningún lugar
 1. Clínica o centro de salud
 2. Consultorio de médico o HMO
 3. Sala de emergencia de un hospital
 4. Departamento de pacientes externos de un hospital
 5. Algún otro lugar
 6. No va a un solo lugar más seguido
- Refused
Don't Know

Universe: Sample Adults 18+ who do not have a usual source of sick care; who Ref/DK if have a usual source of sick care; who have a usual source of sick care but do not go to one place most often or Ref/DK what kind of place; who have a usual source of sick care, but it is not same place as usual source of routine/preventive care; who have a usual source of sick care but Ref/DK if it is same place as usual source of routine/preventive care.**Skip Instructions:** <0-6,R,D>
if AUSUALPL=2,R,D [goto AHCDLY_1]
ELSE if AUSUALPL=1,3 [goto AHCCHGYR]

Question ID: AAU.040_00.000 **Instrument Variable Name:** AHCCHGYR **QuestionnaireFileName:** Sample Adult**Spanish Text:** Durante los ULTIMOS 12 MESES ¿ha CAMBIADO el lugar o los lugares a los que va NORMALMENTE para atención médica?

1. Sí
 2. No
- Refused
Don't Know

Universe: Sample adults 18+ with 1+ usual place(s) to go when sick/need health advice [or who reported same place as usual source of routine/preventive care]**Skip Instructions:** <1>[goto AHCCHGHI]
<2,R,D>[goto AHCDLY_1]

Question ID: AAU.050_00.000 **Instrument Variable Name:** AHCCHGHI **QuestionnaireFileName:** Sample Adult**Spanish Text:** ¿Está relacionado este cambio de lugar donde obtuvo atención médica por cuestión de seguro médico?

1. Sí
 2. No
- Refused
Don't Know

Universe: Sample adults 18+ with 1+ usual place(s) to go when sick/need health advice who CHANGED their USUAL place for health care in past 12 months**Skip Instructions:** <1,2,R,D> [goto AHCDLY_1]

2018NHIS Spanish Questionnaire -Sample Adult**Adult Access to Health Care & Utilization**Document Version Date: 12-Jun-19

Question ID: AAU.061_01.000 **Instrument Variable Name:** AHCDLY_1 **QuestionnaireFileName:** Sample Adult**Spanish Text:** Existen muchas razones por las cuales las personas aplazan la atención médica.

En los ULTIMOS 12 MESES, ¿ha demorado la atención médica debido a cualquiera de las siguientes razones?

... No pudo comunicarse por teléfono.

1. Sí
 2. No
- Refused
-
- Don't Know

Universe: Sample adults 18+**Skip Instructions:** <1,2,R,D>[goto AHCDLY_2]

Question ID: AAU.061_02.000 **Instrument Variable Name:** AHCDLY_2 **QuestionnaireFileName:** Sample Adult**Spanish Text:** * Read Lead-in if Necessary

Existen muchas razones por las cuales las personas aplazan la atención médica. En los ULTIMOS 12 MESES, ¿ha demorado la atención médica debido a cualquiera de las siguientes razones?

... No pudo conseguir una cita lo suficientemente pronto.

1. Sí
 2. No
- Refused
-
- Don't Know

Universe: Sample adults 18+**Skip Instructions:** <1,2,R,D>[goto AHCDLY_3]

Question ID: AAU.061_03.000 **Instrument Variable Name:** AHCDLY_3 **QuestionnaireFileName:** Sample Adult**Spanish Text:** * Read Lead-in if Necessary

Existen muchas razones por las cuales las personas aplazan la atención médica. En los ULTIMOS 12 MESES, ¿ha demorado la atención médica debido a cualquiera de las siguientes razones?

... Una vez que llega al lugar, tiene que esperar demasiado para ver al médico.

1. Sí
 2. No
- Refused
-
- Don't Know

Universe: Sample adults 18+**Skip Instructions:** <1,2,R,D>[goto AHCDLY_4]

2018NHIS Spanish Questionnaire -Sample Adult**Adult Access to Health Care & Utilization**Document Version Date: 12-Jun-19

Question ID: AAU.061_04.000 **Instrument Variable Name:** AHCDLY_4 **QuestionnaireFileName:** Sample Adult**Spanish Text:** * Read if Necessary

Existen muchas razones por las cuales las personas aplazan la atención médica. En los ULTIMOS 12 MESES, ¿ha demorado la atención médica debido a cualquiera de las siguientes razones?

... Cuando era posible ir, la clínica/consultorio del médico estaba cerrado(a).

1. Sí
 2. No
- Refused
Don't Know

Universe: Sample adults 18+**Skip Instructions:** <1,2,R,D>[goto AHCDLY_5]

Question ID: AAU.061_05.000 **Instrument Variable Name:** AHCDLY_5 **QuestionnaireFileName:** Sample Adult**Spanish Text:** * Read Lead-in if Necessary

Existen muchas razones por las cuales las personas aplazan la atención médica. En los ULTIMOS 12 MESES, ¿ha demorado la atención médica debido a cualquiera de las siguientes razones?

... No tenía transportación.

1. Sí
 2. No
- Refused
Don't Know

Universe: Sample adults 18+**Skip Instructions:** <1,2,R,D>[goto AHCAFY_1]

Question ID: AAU.111_01.000 **Instrument Variable Name:** AHCAFY_1 **QuestionnaireFileName:** Sample Adult**Spanish Text:** ¿Hubo alguna vez en los ULTIMOS 12 MESES, cuando necesitó algo de lo siguiente, pero no lo obtuvo porque no lo pudo pagar?

... Medicinas recetadas.

1. Sí
 2. No
- Refused
Don't Know

Universe: Sample adults 18+**Skip Instructions:** <1,2,R,D>[goto AHCAFY_2]

2018NHIS Spanish Questionnaire -Sample Adult

Adult Access to Health Care & Utilization

Document Version Date: 12-Jun-19

Question ID: AAU.111_02.000 **Instrument Variable Name:** AHCAFY_2 **QuestionnaireFileName:** Sample Adult

Spanish Text: * Read Lead-in if Necessary.

¿Hubo alguna vez en los ULTIMOS 12 MESES, cuando necesitó algo de lo siguiente, pero no lo obtuvo porque no lo pudo pagar?

... Tratamiento o consulta para la salud mental.

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

Universe: Sample adults 18+

Skip Instructions: <1,2,R,D>[goto AHCAFY_3]

Question ID: AAU.111_03.000 **Instrument Variable Name:** AHCAFY_3 **QuestionnaireFileName:** Sample Adult

Spanish Text: * Read Lead-in if Necessary.

¿Hubo alguna vez en los ULTIMOS 12 MESES, cuando necesitó algo de lo siguiente, pero no lo obtuvo porque no lo pudo pagar?

... Tratamiento dental (incluyendo revisión rutinaria).

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

Universe: Sample adults 18+

Skip Instructions: <1,2,R,D>[goto AHCAFY_4]

Question ID: AAU.111_04.000 **Instrument Variable Name:** AHCAFY_4 **QuestionnaireFileName:** Sample Adult

Spanish Text: * Read Lead-in if Necessary.

¿Hubo alguna vez en los ULTIMOS 12 MESES, cuando necesitó algo de lo siguiente, pero no lo obtuvo porque no lo pudo pagar?

... Lentes/espejuelos/anteojos.

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

Universe: Sample adults 18+

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

2018NHIS Spanish Questionnaire -Sample Adult**Adult Access to Health Care & Utilization**Document Version Date: 12-Jun-19

Question ID: AAU.113_00.010 **Instrument Variable Name:** AWORPAY **QuestionnaireFileName:** Sample Adult**Spanish Text:** ¿Si usted se enfermara o tuviera un accidente, qué tanto preocupado(a) estaría sobre su capacidad para pagar sus cuentas médicas? ¿Estaría muy preocupado(a), algo preocupado(a), o no preocupado(a) en absoluto?

1. Muy preocupado(a)
 2. Algo preocupado(a)
 3. No preocupado(a) en absoluto
- Refused
Don't know

Universe: Sample adults 18+**Skip Instructions:** <1-3,R,D>[goto ARX12MO]

Question ID: AAU.126_01.010 **Instrument Variable Name:** ARX12MO **QuestionnaireFileName:** Sample Adult**Spanish Text:** DURANTE LOS ÚLTIMOS 12 MESES, ¿un médico u otro profesional de la salud le recetó medicamentos?

1. Sí
 2. No
- Refused
Don't Know

Universe: Sample adults 18+**Skip Instructions:** <1> [goto ARX12_1]
<2,R,D> [goto ARX12_5]

Question ID: AAU.127_01.010 **Instrument Variable Name:** ARX12_1 **QuestionnaireFileName:** Sample Adult**Spanish Text:** DURANTE LOS ÚLTIMOS 12 MESES, ¿alguno de los siguientes fue verdad para usted?

...Se saltó dosis de un medicamento para ahorrar dinero.

1. Sí
 2. No
- Refused
Don't Know

Universe: Sample adults 18+ who had been prescribed medication in the past 12 months**Skip Instructions:** <1,2,R,D>[goto ARX12_2]

2018NHIS Spanish Questionnaire -Sample Adult

Adult Access to Health Care & Utilization

Document Version Date: 12-Jun-19

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

Spanish Text: *Read if necessary.

DURANTE LOS ÚLTIMOS 12 MESES, ¿alguno de los siguientes fue verdad para usted?

...Tomó menos medicina para ahorrar dinero.

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

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

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

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

Spanish Text: *Read if necessary.

DURANTE LOS ÚLTIMOS 12 MESES, ¿alguno de los siguientes fue verdad para usted?

...Pospuso llenar una receta para ahorrar dinero.

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

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

Skip Instructions: <1,2,R,D>[goto ARX12_4]

Question ID: AAU.127_04.010 **Instrument Variable Name:** ARX12_4 **QuestionnaireFileName:** Sample Adult

Spanish Text: *Read if necessary.

DURANTE LOS ÚLTIMOS 12 MESES, ¿alguno de los siguientes fue verdad para usted?

...Le pidió a su médico un medicamento más barato para ahorrar dinero.

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

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

Skip Instructions: <1,2,R,D>[goto ARX12_5]

2018NHIS Spanish Questionnaire -Sample Adult**Adult Access to Health Care & Utilization**Document Version Date: 12-Jun-19

Question ID: AAU.127_05.010 **Instrument Variable Name:** ARX12_5 **QuestionnaireFileName:** Sample Adult**Spanish Text:** *Read if necessary.

DURANTE LOS ÚLTIMOS 12 MESES, ¿alguno de los siguientes fue verdad para usted?

 Compró medicamentos recetados de otro país para ahorrar dinero.

1. Sí
 2. No
- Refused
-
- Don't know

Universe: Sample adults 18+**Skip Instructions:** <1,2,R,D>[goto ARX12_6]

Question ID: AAU.127_06.010 **Instrument Variable Name:** ARX12_6 **QuestionnaireFileName:** Sample Adult**Spanish Text:** *Read if necessary.

DURANTE LOS ÚLTIMOS 12 MESES, ¿alguno de los siguientes fue verdad para usted?

 Utilizó terapias alternativas para ahorrar dinero.

1. Sí
 2. No
- Refused
-
- Don't know

Universe: Sample adults 18+**Skip Instructions:** <1,2,R,D>[goto ADENLONG]

Question ID: AAU.135_00.000 **Instrument Variable Name:** ADENLONG **QuestionnaireFileName:** Sample Adult**Spanish Text:** (book) A8

¿Aproximadamente cuánto tiempo hace desde la última vez que consultó a un dentista? Incluya todo tipo de dentista, tal como odontólogos, cirujanos orales, y todo otro especialista incluyendo higienistas dentales.

0. Nunca
 1. 6 meses o menos
 2. Más de 6 meses hasta 1 año
 3. Más de 1 año, pero no más de 2 años
 4. Más de 2 años, pero no más de 5 años
 5. Más de 5 años
- Refused
-
- Don't Know

Universe: Sample adults 18+**Skip Instructions:** <0-5,R,D>[goto AHCSY1_1]

2018NHIS Spanish Questionnaire -Sample Adult**Adult Access to Health Care & Utilization**Document Version Date: 12-Jun-19

Question ID: AAU.141_01.000 **Instrument Variable Name:** AHCSY1_1 **QuestionnaireFileName:** Sample Adult**Spanish Text:** DURANTE LOS ULTIMOS 12 MESES, es decir desde {12 month ref.date}, ¿ha consultado o hablado con algunos de los siguientes proveedores de servicios de salud con respecto a su propia salud?

... Un profesional de la salud mental, tal como un(a) psiquiátra, psicólogo(a), enfermero(a) psiquiátrico(a), o trabajador social clínico.

1. Sí
 2. No
- Refused
-
- Don't Know

Universe: Sample adults 18+**Skip Instructions:** <1,2,R,D>[goto AHCSY1_2]

Question ID: AAU.141_02.000 **Instrument Variable Name:** AHCSY1_2 **QuestionnaireFileName:** Sample Adult**Spanish Text:** * Read if Necessary.

DURANTE LOS ULTIMOS 12 MESES, es decir desde {12 month ref.date}, ¿ha consultado o hablado con algunos de los siguientes proveedores de servicios de salud con respecto a su propia salud?

... Un optometrista, oftalmólogo(a), o médico de los ojos (alguien que receta lentes/espejelos/anteojos).

1. Sí
 2. No
- Refused
-
- Don't Know

Universe: Sample adults 18+**Skip Instructions:** <1,2,R,D>[goto AHCSY1_3]

Question ID: AAU.141_03.000 **Instrument Variable Name:** AHCSY1_3 **QuestionnaireFileName:** Sample Adult**Spanish Text:** * Read if Necessary.

DURANTE LOS ULTIMOS 12 MESES, es decir desde {12 month ref.date}, ¿ha consultado o hablado con algunos de los siguientes proveedores de servicios de salud con respecto a su propia salud?

... Un médico del los pies.

1. Sí
 2. No
- Refused
-
- Don't Know

Universe: Sample adults 18+**Skip Instructions:** <1,2,R,D>[goto AHCSY1_4]

2018NHIS Spanish Questionnaire -Sample Adult

Adult Access to Health Care & Utilization

Document Version Date: 12-Jun-19

Question ID: AAU.141_04.000 **Instrument Variable Name:** AHCSY1_4 **QuestionnaireFileName:** Sample Adult

Spanish Text: * Read if Necessary.

DURANTE LOS ULTIMOS 12 MESES, es decir desde {12 month ref.date}, ¿ha consultado o hablado con algunos de los siguientes proveedores de servicios de salud con respecto a su propia salud?

... Un(a) quiropráctico(a).

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

Universe: Sample adults 18+

Skip Instructions: <1,2,R,D>[goto AHCSY1_5]

Question ID: AAU.141_05.000 **Instrument Variable Name:** AHCSY1_5 **QuestionnaireFileName:** Sample Adult

Spanish Text: * Read if Necessary.

DURANTE LOS ULTIMOS 12 MESES, es decir desde {12 month ref.date}, ¿ha consultado o hablado con algunos de los siguientes proveedores de servicios de salud con respecto a su propia salud?

... Un terapeuta físico, del habla, respiratorio, audiólogo o terapeuta ocupacional.

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

Universe: Sample adults 18+

Skip Instructions: <1,2,R,D>[goto AHCSY1_6]

2018NHIS Spanish Questionnaire -Sample Adult**Adult Access to Health Care & Utilization**Document Version Date: 12-Jun-19

Question ID: AAU.141_06.000 **Instrument Variable Name:** AHCSY1_6 **QuestionnaireFileName:** Sample Adult

Spanish Text: * Read if Necessary.

DURANTE LOS ULTIMOS 12 MESES, es decir desde {12 month ref.date}, ¿ha consultado o hablado con algunos de los siguientes proveedores de servicios de salud con respecto a su propia salud?

Fill 1: ...Un practicante de enfermería, asistente médico, o comadrona/partera.

Fill 2: ...Un practicante de enfermería o asistente médico

1. Sí
 2. No
- Refused
Don't Know

Universe: Sample adults 18+

Skip Instructions: <1,2,R,D>[if SEX=1 goto AHCSY8_8;
 else if SEX=2 goto AHCSYR7]

Question ID: AAU.200_00.000 **Instrument Variable Name:** AHCSYR7 **QuestionnaireFileName:** Sample Adult

Spanish Text: * Read if Necessary.

DURANTE LOS ULTIMOS 12 MESES, es decir desde {12 month ref.date}, ¿ha consultado o hablado con algunos de los siguientes proveedores de servicios de salud con respecto a su propia salud?

... Un médico que se especialize en la salud de la mujer (obstetra/ginecólogo).

1. Sí
 2. No
- Refused
Don't Know

Universe: Sample female adults aged 18+ years

Skip Instructions: <1,2,R,D> [go to AHCSY8_ 8]

Question ID: AAU.211_01.000 **Instrument Variable Name:** AHCSY8_8 **QuestionnaireFileName:** Sample Adult

Spanish Text:

Universe: Sample adults 18+

Skip Instructions: <1,2,R,D> [go to AHCSY8_ 9]

2018NHIS Spanish Questionnaire -Sample Adult**Adult Access to Health Care & Utilization**Document Version Date: 12-Jun-19

Question ID: AAU.211_02.000 **Instrument Variable Name:** AHCSY8_9 **QuestionnaireFileName:** Sample Adult**Spanish Text:** * Read if Necessary.

DURANTE LOS ULTIMOS 12 MESES, es decir desde {12 month ref.date}, ¿ha consultado o hablado con algunos de los siguientes proveedores de servicios de salud con respecto a su propia salud?

... ¿Un médico general que trata una variedad de enfermedades (un médico en práctica general, medicina familiar o medicina interna).

1. Sí
 2. No
- Refused
Don't Know

Universe: Sample adults 18+**Skip Instructions:** <1> [goto AHCSYR10]
<2,R,D> [goto AHERNOYR]

Question ID: AAU.230_00.000 **Instrument Variable Name:** AHCSYR10 **QuestionnaireFileName:** Sample Adult**Spanish Text:** ¿Este médico provee tratamiento a niños y adultos (un médico en práctica general o de medicina familiar)?

1. Sí
 2. No
- Refused
Don't Know

Universe: Sample adults 18+ who have seen or talked to a general doctor during the past 12 months**Skip Instructions:** <1,2,R,D> [go to AHERNOYR]

Question ID: AAU.240_00.000 **Instrument Variable Name:** AHERNOYR **QuestionnaireFileName:** Sample Adult**Spanish Text:** (book) A9

EN LOS ULTIMOS 12 MESES, ¿CUANTAS VECES ha ido a la SALA DE EMERGENCIA DE UN HOSPITAL por motivo de su salud? (Esto incluye visitas a salas de emergencia resultando en admisión al hospital.)

0. Ninguno
 1. 1
 2. 2-3
 3. 4-5
 4. 6-7
 5. 8-9
 6. 10-12
 7. 13-15
 8. 16 o más
- Refused
Don't Know

Universe: Sample adults 18+**Skip Instructions:** <0,1-8,R,D> [go to AHCHYR]

2018NHIS Spanish Questionnaire -Sample Adult**Adult Access to Health Care & Utilization**Document Version Date: 12-Jun-19

Question ID: AAU.250_00.000 **Instrument Variable Name:** AHCHYR **QuestionnaireFileName:** Sample Adult**Spanish Text:** EN LOS ULTIMOS 12 MESES, ¿Le visitó en SU HOGAR un(a) enfermero(a) u otro profesional de la salud para darle alguna atención o terapia?

1. Sí
2. No
- Refused
- Don't Know

Universe: Sample adults 18+**Skip Instructions:** <1>[goto AHCHMOYR]
<2,R,D>[goto AHCNOYR]

Question ID: AAU.260_00.000 **Instrument Variable Name:** AHCHMOYR **QuestionnaireFileName:** Sample Adult**Spanish Text:** ¿En cuántos de los ULTIMOS 12 MESES le visitó EN SU HOGAR un profesional de la salud?**Universe:** Sample adults 18+ who received home care from a health professional during the past 12 months**Skip Instructions:** <1-12,R,D>[goto AHCHNOYR]

Question ID: AAU.270_00.000 **Instrument Variable Name:** AHCHNOYR **QuestionnaireFileName:** Sample Adult**Spanish Text:** (book) A10

¿Cuántas visitas en total le hicieron a su hogar durante {Fill1: ese mes/Fill2: esos meses}?

1. 1
2. 2-3
3. 4-5
4. 6-7
5. 8-9
6. 10-12
7. 13-15
8. 16 o más
- Refused
- Don't Know

Universe: Sample adults 18+ who received home care from a health professional during the past 12 months**Skip Instructions:** <1-8,R,D>[goto AHCNOYR]

2018NHIS Spanish Questionnaire -Sample Adult
Adult Access to Health Care & Utilization
Document Version Date: 12-Jun-19

Question ID: AAU.280_00.000 **Instrument Variable Name:** AHCNOYR **QuestionnaireFileName:** Sample Adult

Spanish Text: (book) A9

EN LOS ULTIMOS 12 MESES, ¿CUANTAS VECES ha consultado al médico o a algún otro profesional de la salud con respecto a su salud en la OFICINA DEL MEDICO, en UNA CLINICA, o en OTRO LUGAR? NO INCLUYA LAS VECES QUE HAYA SIDO HOSPITALIZADO AL MENOS UNA NOCHE, VIAJES A LA SALA DE EMERGENCIA DE UN HOSPITAL, VISITAS EN EL HOGAR, O LLAMADAS TELEFONICAS.

- 0. Ninguno
- 1. 1
- 2. 2-3
- 3. 4-5
- 4. 6-7
- 5. 8-9
- 6. 10-12
- 7. 13-15
- 8. 16 o más
- Refused
- Don't Know

Universe: Sample adults 18+

Skip Instructions: <0-8,R,D>[goto ASRGYR]

Question ID: AAU.290_00.000 **Instrument Variable Name:** ASRGYR **QuestionnaireFileName:** Sample Adult

Spanish Text: DURANTE LOS ULTIMOS 12 MESES, ¿ha sido sometido a alguna CIRUGIA o a algún otro procedimiento quirúrgico, ya sea internado en el hospital o como paciente ambulatorio?

* Read if necessary: Esto incluye cirugía mayor y procedimientos de menor riesgo tal como fracturas de huesos o el extirpar un tumor benigno.

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

Universe: Sample adults 18+

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

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

Spanish Text: Incluyendo las veces que me ha mencionado, ¿EN CUANTAS DIFERENTES OCASIONES ha tenido alguna operación durante los ULTIMOS 12 MESES?

* Enter "95" for 95 or more times.

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

Skip Instructions: <1-95,R,D> [goto AMDLONG]
<11-95>[goto ERR_ASGYR]

2018NHIS Spanish Questionnaire -Sample Adult**Adult Access to Health Care & Utilization**Document Version Date: 12-Jun-19

Question ID: AAU.305_00.000 **Instrument Variable Name:** AMDLONG **QuestionnaireFileName:** Sample Adult**Spanish Text:** (book) A8 ?[F1]

¿Aproximadamente cuánto tiempo hace desde la última vez que consultó a un médico o a algún otro profesional de la salud con respecto a su salud? Incluya médicos que haya consultado mientras estuvo internado en un hospital.

- 0. Nunca
- 1. 6 meses o menos
- 2. Más de 6 meses hasta 1 año
- 3. Más de 1 año, pero no más de 2 años
- 4. Más de 2 años, pero no más de 5 años
- 5. Más de 5 años
- Refused
- Don't Know

Universe: Sample adults 18+**Skip Instructions:** <0-5,R,D> [goto HIT1A]

Question ID: AAU.309_00.010 **Instrument Variable Name:** HIT1A **QuestionnaireFileName:** Sample Adult**Spanish Text:** DURANTE LOS ÚLTIMOS 12 MESES, ¿alguna vez ha utilizado computadoras para cualquiera de los siguientes?

...Buscar información sobre la salud por Internet

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

Universe: Sample adults 18+**Skip Instructions:** <1,2,R,D> [goto HIT2A]

Question ID: AAU.309_00.020 **Instrument Variable Name:** HIT2A **QuestionnaireFileName:** Sample Adult**Spanish Text:** *Read if necessary.

DURANTE LOS ÚLTIMOS 12 MESES, ¿alguna vez ha utilizado computadoras para cualquiera de los siguientes?

...Llenar una receta

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

Universe: Sample adults 18+**Skip Instructions:** <1,2,R,D> [goto HIT3A]

2018NHIS Spanish Questionnaire -Sample Adult**Adult Access to Health Care & Utilization**Document Version Date: 12-Jun-19

Question ID: AAU.309_00.030 **Instrument Variable Name:** HIT3A **QuestionnaireFileName:** Sample Adult**Spanish Text:** *Read if necessary.

DURANTE LOS ÚLTIMOS 12 MESES, ¿alguna vez ha utilizado computadoras para cualquiera de los siguientes?

...Hacer una cita con un proveedor de atención médica

1. Sí
 2. No
- Refused
-
- Don't Know

Universe: Sample adults 18+**Skip Instructions:** <1,2,R,D> [goto HIT4A]

Question ID: AAU.309_00.040 **Instrument Variable Name:** HIT4A **QuestionnaireFileName:** Sample Adult**Spanish Text:** *Read if necessary.

DURANTE LOS ÚLTIMOS 12 MESES, ¿alguna vez ha utilizado computadoras para cualquiera de los siguientes?

...Comunicarse con un proveedor de atención médica por email.

1. Sí
 2. No
- Refused
-
- Don't Know

Universe: Sample adults 18+**Skip Instructions:** <1,2,R,D> [goto FLUVACYR]

Question ID: AAU.310_00.000 **Instrument Variable Name:** FLUVACYR **QuestionnaireFileName:** Sample Adult**Spanish Text:** ?[F1]

DURANTE LOS ÚLTIMOS 12 MESES, ¿ha tenido una vacunación para la gripe/influenza? La vacuna contra la gripe/influenza se ofrece por lo general en el otoño y protégé durante la temporada de gripe.

1. Sí
 2. No
- Refused
-
- Don't Know

Universe: Sample adults 18+**Skip Instructions:** <1> [goto FLUVACTP]
<2,R,D> [goto SHTPNUYR]

2018NHIS Spanish Questionnaire -Sample Adult
Adult Access to Health Care & Utilization
Document Version Date: 12-Jun-19

Question ID: AAU.311_00.000 **Instrument Variable Name:** FLUVACTP **QuestionnaireFileName:** Sample Adult

Spanish Text: ¿Fue esta una vacunación por el brazo, o a través de un spray en la nariz?

* Read if necessary: Una vacuna es una inyección por el brazo.

*Read if necessary: El spray por la nariz para la gripe es conocido como FluMist(trademark).

Universe: Sample adults 18+ who have received a flu vaccination in the past year

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

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

Spanish Text: 1 of 2

¿Durante que mes y año recibio su vacuna más reciente?

- 1. enero
- 2. febrero
- 3. marzo
- 4. abril
- 5. mayo
- 6. junio
- 7. julio
- 8. agosto
- 9. septiembre
- 10. octubre
- 11. noviembre
- 12. diciembre
- Refused
- Don't know

Universe: Sample adults 18+ who have had a flu vaccination in the past 12 months, regardless of type

Skip Instructions: <1-12,D> [goto FLUVAC_Y]
<R> if FLUVACTP=1 and PREGNOW=1 and INTERVIEW_MONTH=1-3,8-12 [goto FLUSHPG1];
 else if FLUVACTP=1 and PREGNOW=1 and INTERVIEW_MONTH=4-7 or PREGFLYR=1 [goto
FLUSHPG2];
 else [goto SHTPNUYR]

Question ID: AAU.312_02.000 **Instrument Variable Name:** FLUVAC_Y **QuestionnaireFileName:** Sample Adult

Spanish Text:
Universe: Sample adults 18+ who gave a month for their last flu vaccination or who didn't know the month

Skip Instructions: <valid year,R,D> if FLUVACTP=1 and PREGNOW=1 and INTERVIEW_MONTH=1-3,8-12 [goto FLUSHPG1];
 else if FLUVACTP=1 and PREGNOW=1 and INTERVIEW_MONTH=4-7 or PREGFLYR=1 [goto FLUSHPG2];
 else [goto SHTPNUYR]

[If FLUVAC_M and FLUVAC_Y = a future date [goto ERR1_FLUVAC_Y]

[If FLUVAC_M and FLUVAC_Y = a date prior to birth [goto ERR2_FLUVAC_Y]

[If FLUVAC_M and FLUVAC_Y = a date before 12 months ago [goto ERR3_FLUVAC_Y]

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

Document Version Date: 12-Jun-19

Question ID: AAU.325_00.010 **Instrument Variable Name:** SHTPNEUN **QuestionnaireFileName:** Sample Adult

Spanish Text: ¿Cuántas inyecciones para la pulmonía/neumonía le han puesto?

Universe: Sample adults 18+ who have ever had a pneumonia shot

Skip Instructions: <1-50,R,D> [goto APOX]

Question ID: AAU.330_00.000 **Instrument Variable Name:** APOX **QuestionnaireFileName:** Sample Adult

Spanish Text: ¿ALGUNA VEZ ha contraído varicela (chickenpox)?

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

Universe: Sample adults 18+

Skip Instructions: <1> [goto APOX12MO]
<2,R,D> [goto AHEP]

Question ID: AAU.340_00.000 **Instrument Variable Name:** APOX12MO **QuestionnaireFileName:** Sample Adult

Spanish Text: ¿Ha tenido varicela durante los ULTIMOS 12 MESES?

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

Universe: Sample adults 18+ who have ever had chickenpox

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

Question ID: AAU.350_00.000 **Instrument Variable Name:** AHEP **QuestionnaireFileName:** Sample Adult

Spanish Text: ¿Ha contraído ALGUNA VEZ hepatitis?

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

Universe: Sample adults 18+

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

2018NHIS Spanish Questionnaire -Sample Adult**Adult Access to Health Care & Utilization**Document Version Date: 12-Jun-19

Question ID: AAU.360_00.000 **Instrument Variable Name:** AHEPLIV **QuestionnaireFileName:** Sample Adult**Spanish Text:** ¿Ha vivido alguna vez con alguien que tenía hepatitis?

1. Sí
 2. No
- Refused
-
- Don't Know

Universe: Sample adults 18+ who have never had hepatitis; Ref/DK if ever had hepatitis**Skip Instructions:** <1,2,R,D> [goto SHTHEPB]

Question ID: AAU.370_00.000 **Instrument Variable Name:** SHTHEPB **QuestionnaireFileName:** Sample Adult**Spanish Text:** ¿Ha recibido ALGUNA VEZ la vacuna contra la hepatitis B?

* Read if necessary: Esta se suministra en tres dosis y ha estado disponible desde 1991. Se recomienda para recién nacidos, adolescentes, y personas con alto riesgo de ser expuestos a la hepatitis B, tal como los trabajadores de salud.

1. Sí
 2. No
- Refused
-
- Don't Know

Universe: Sample adults 18+**Skip Instructions:** <1> [goto SHEPDOS]
<2,R,D> [goto SHTHEPA]

Question ID: AAU.380_00.000 **Instrument Variable Name:** SHEPDOS **QuestionnaireFileName:** Sample Adult**Spanish Text:** ¿Ha recibido por lo menos 3 dosis de la vacuna contra la hepatitis B, o recibió menos de 3 dosis?

1. Recibió por lo menos 3 dosis
 2. Recibió menos de 3 dosis
- Refused
-
- Don't Know

Universe: Sample adults 18+ who have ever received the Hepatitis B vaccine**Skip Instructions:** <1,2,R,D> [goto SHTHEPA]

2018NHIS Spanish Questionnaire -Sample Adult**Adult Access to Health Care & Utilization**Document Version Date: 12-Jun-19

Question ID: AAU.390_00.010 **Instrument Variable Name:** SHTHEPA **QuestionnaireFileName:** Sample Adult**Spanish Text:** La vacuna para hepatitis A se administra rutinariamente en una serie de dos dosis a algunos niños comenzando a la edad de un 1 año, y a algunos adultos y personas que viajan fuera de los Estados Unidos. A pesar de que puede ser administrada como una vacuna combinada con hepatitis B, es diferente a la vacuna de hepatitis B, y solamente ha estado disponible desde el 1995. ¿Ha recibido usted alguna vez la vacuna para hepatitis A?

1. Sí
 2. No
- Refused
-
- Don't Know

Universe: Sample adults 18+**Skip Instructions:** <1> goto SHEPANUM
<2,R,D> if AGE GE 50 [goto SHINGLE1];
else if AGE LT 50 [goto SHTTD]

Question ID: AAU.400_00.010 **Instrument Variable Name:** SHEPANUM **QuestionnaireFileName:** Sample Adult**Spanish Text:** ¿Cuántas vacunas de hepatitis A recibió usted?

*Enter '96' if all shots were received

Universe: Sample adults 18+ who have had a hepatitis A vaccine**Skip Instructions:** <1-95,96,R,D> if AGE GE 50 [goto SHINGLE1];
else if AGE LT 50 [goto SHTTD]

Question ID: AAU.410_00.010 **Instrument Variable Name:** SHINGLE1 **QuestionnaireFileName:** Sample Adult**Spanish Text:** La culebrilla o herpes zóster es una enfermedad que causa una erupción cutánea (rash) o ampolla en la piel y puede ser doloroso. Hay dos vacunas disponibles ahora para la culebrilla: Zostavax®, que requiere una inyección y Shingrix®, que requiere dos inyecciones. ¿Ha tenido una vacuna para la culebrilla o herpes zóster?

1. Sí
 2. No
- Refused
-
- Don't Know

Universe: Sample adults 50+**Skip Instructions:** <1> [goto ZOSTAVAX]
<2,R,D> [goto SHTTD]

2018NHIS Spanish Questionnaire -Sample Adult
Adult Access to Health Care & Utilization
Document Version Date: 12-Jun-19

Question ID: AAU.410_00.020 **Instrument Variable Name:** ZOSTAVAX **QuestionnaireFileName:** Sample Adult

Spanish Text: ¿Alguna vez ha tenido Zostavax®, la vacuna nueva para la culebrilla (herpes zóster) que requiere una inyeccion?

1. Sí
 2. No
- Refused
Don't Know

Universe: Sample adults 50+ who have had a shingles vaccine

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

Question ID: AAU.410_00.030 **Instrument Variable Name:** ZOSTAYR **QuestionnaireFileName:** Sample Adult

Spanish Text: ¿En qué año tuvo la inyección de Zostavax® más reciente?

(Allow 1900-current year,Refused,Don't know)

Universe: Sample adults 50+ who have had a Zostavax® vaccine

Skip Instructions: <1900-2030> if future date [goto ERR1_ZOSTAYR]
elseif date before birth [goto ERR2_ZOSTAYR]
else [goto SHINGRIX]
<R,D> [goto ZOSTAWHN]

Question ID: AAU.410_00.040 **Instrument Variable Name:** ZOSTAWHN **QuestionnaireFileName:** Sample Adult

Spanish Text: ¿Fue en 2018 o antes de 2018?

1. En 2018
 2. Antes de 2018
- Refused
Don't know

Universe: Sample Adults 50+ and older who don't know or refused the year they had a Zostavax® vaccination

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

Question ID: AAU.410_00.050 **Instrument Variable Name:** SHINGRIX **QuestionnaireFileName:** Sample Adult

Spanish Text: ¿Alguna vez ha tenido Shingrix®, la vacuna nueva para la culebrilla (herpes zóster) que requiere dos inyecciones?

1. Sí
 2. No
- Refused
Don't Know

Universe: Sample adults 50+ who have had a shingles vaccine

Skip Instructions: <1> [goto SHINGRNB]
<2,R,D> else [goto SHTTD]

2018NHIS Spanish Questionnaire -Sample Adult
Adult Access to Health Care & Utilization
Document Version Date: 12-Jun-19

Question ID: AAU.410_00.060 **Instrument Variable Name:** SHINGRNB **QuestionnaireFileName:** Sample Adult

Spanish Text: ¿Cuántas inyecciones de Shringrix® tuvo?

1. Una inyección de Shringrix
 2. Dos inyecciones de Shringrix
- Refused
Don't know

Universe: Sample adults 50+ who have had a Shingrix® vaccine

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

Question ID: AAU.410_00.070 **Instrument Variable Name:** SHINGRYR **QuestionnaireFileName:** Sample Adult

Spanish Text: ¿En qué año tuvo la inyección de Shringrix® más reciente?

(Allow 1900-current year,Refused,Don't know)

Universe: Sample adults 50+ who have had a Shingrix® vaccine

Skip Instructions: <1900-2030> if future date [goto ERR1_SHINGRYR]
 elseif date before birth [goto ERR2_SHINGRYR]
 else [goto SHTTD]
 <R,D> [goto SHINGWHN]

Question ID: AAU.410_00.080 **Instrument Variable Name:** SHINGWHN **QuestionnaireFileName:** Sample Adult

Spanish Text: ¿Fue en 2018 o antes de 2018?

1. En 2018
 2. Antes de 2018
- Refused
Don't know

Universe: Sample Adults 50+ and older who don't know or refused the year they had a Shingrix® vaccination

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

Question ID: AAU.420_00.010 **Instrument Variable Name:** SHTTD **QuestionnaireFileName:** Sample Adult

Spanish Text: ¿Ha recibido usted una inyección contra el tétano en los últimos 10 años?

1. Sí
 2. No
- Refused
Don't Know

Universe: Sample adults 18+

Skip Instructions: <1> [goto SHTTDAP]
 <2,R,D> and AGE >64 [goto LIVEV]
 Else if <2,R,D> and AGE<65 [goto SHTHPV2]

2018NHIS Spanish Questionnaire -Sample Adult**Adult Access to Health Care & Utilization**Document Version Date: 12-Jun-19

Question ID: AAU.440_00.010 **Instrument Variable Name:** SHTTDAP **QuestionnaireFileName:** Sample Adult**Spanish Text:** Actualmente hay dos tipos de inyecciones contra el tétano disponibles. Una es la vacuna Td o tétano-difteria y la otra es llamada Tdap o Adacel (trademark). Son similares excepto que la inyección de Tdap también incluye una vacuna contra pertusis o tosferina. Pensando en su más reciente inyección contra el tétano, ¿le dijo el doctor que su vacuna incluía la vacuna contra pertusis o tosferina? La inyección normalmente se llama Tdap o ADACEL (trademark).

1. Sí-incluía pertusis
 2. No-no incluía pertusis
 3. El doctor no dijo
- Refused
-
- Don't Know

Universe: Sample adults 18+ who have had a tetanus shot in the past 10 years**Skip Instructions:** <1-3,R,D> if age le 64 [goto SHTHPV2];
else [goto LIVEV]

Question ID: AAU.446_00.010 **Instrument Variable Name:** SHTHPV2 **QuestionnaireFileName:** Sample Adult**Spanish Text:** ¿Ha recibido usted una inyección contra el tétano en los últimos 10 años?

1. Sí
 2. No
- Refused
-
- Don't Know

Universe: Sample adults LE 64**Skip Instructions:** <1> [goto SHHPVDOS]
<2,3,R,D> [goto LIVEV]

Question ID: AAU.448_00.010 **Instrument Variable Name:** SHHPVDOS **QuestionnaireFileName:** Sample Adult**Spanish Text:** ¿Ha recibido usted una inyección contra el tétano en los últimos 10 años?

1. Sí
 2. No
- Refused
-
- Don't Know

Universe: Sample adults LE 64 who received an HPV shot**Skip Instructions:** <1-50,96,R,D> [goto AHPVAGE]
<51-95> [goto ERR_SHHPVDOS]

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

Document Version Date: 12-Jun-19

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

Spanish Text:

Universe: Sample adults LE 64 who received an HPV shot

Skip Instructions: <8-64,R,D> [goto LIVEV]

Question ID: AAU.450_00.010 **Instrument Variable Name:** LIVEV **QuestionnaireFileName:** Sample Adult

Spanish Text: ¿Le ha dicho a usted alguna vez un médico u otro profesional de la salud que usted tenía alguna condición del hígado, crónica o de largo plazo?

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+

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

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

Spanish Text: ¿Ha viajado usted alguna vez fuera de los Estados Unidos a países que no hayan sido Europa, Japón, Australia, Nueva Zelanda o Canadá, desde el 1995?

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+

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

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

Spanish Text: ¿Actualmente trabaja o sirve usted de voluntario en un hospital, una clínica de salud, el consultorio de un médico o dentista, un asilo de ancianos o algún otro centro de salud? Esto incluye trabajo de medio tiempo o sin pago en un centro de salud y también el trabajo de enfermería brindado en el hogar del paciente.

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+

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

2018NHIS Spanish Questionnaire -Sample Adult**Adult Access to Health Care & Utilization**Document Version Date: 12-Jun-19

Question ID: AAU.470_00.010 **Instrument Variable Name:** WRKDIR **QuestionnaireFileName:** Sample Adult

Spanish Text: ¿Proporciona cuidado directo a pacientes como parte de su rutina de trabajo? Cuidado directo a pacientes SIGNIFICA CONTACTO FÍSICO O INMEDIATO CON LOS PACIENTES.

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

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

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

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

Spanish Text: DURANTE LOS ÚLTIMOS 12 MESES, ¿ha tenido su presión sanguínea mirada por un médico, enfermero(a), u otro profesional de la salud?

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

Universe: Sample adults 18+

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

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

Spanish Text: DURANTE LOS ÚLTIMOS 12 MESES, ¿ha tenido su colesterol revisado por un médico, enfermero(a), u otro profesional de la salud?

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

Universe: Sample adults 18+

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

2018NHIS Spanish Questionnaire -Sample Adult

Adult Access to Health Care & Utilization

Document Version Date: 12-Jun-19

Question ID: AAU.520_00.010 **Instrument Variable Name:** APSBSCHK **QuestionnaireFileName:** Sample Adult

Spanish Text: ¿Ha tenido un examen para la detección de azúcar elevada en la sangre o diabetes donde lo hacen ayunar DURANTE LOS ÚLTIMOS 12 MESES?

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

Universe: Sample adults 18+

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

2018NHIS Spanish Questionnaire -Sample Adult

Adult Selected Items

Document Version Date: 12-Jun-19

Question ID: ASI.005_00.000 **Instrument Variable Name:** ASIINTRO **QuestionnaireFileName:** Sample Adult

Spanish Text:

Universe: Sample adults 18+

Skip Instructions: <1> goto ACICPUSE

Question ID: ASI.130_00.000 **Instrument Variable Name:** ACICPUSE **QuestionnaireFileName:** Sample Adult

Spanish Text: Estas preguntas son sobre usted y su comunidad.

¿Con qué frecuencia utiliza usted una computadora?

*Read answer categories.

1. Nunca o casi nunca
 2. Algunos días
 3. Casi todos los días
 4. Todos los días
- Refused
Don't know

Universe: Sample adults 18+

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

Question ID: ASI.140_00.000 **Instrument Variable Name:** ACISATHC **QuestionnaireFileName:** Sample Adult

Spanish Text: En general, ¿que tan satisfecho esta con los servicios de salud que ha recibido en los últimos 12 meses?

*Read answer categories.

1. Muy satisfecho
 2. Algo satisfecho
 3. Algo insatisfecho
 4. Muy insatisfecho
 5. No he tenido cuidados de salud en los últimos 12 meses
- Refused
Don't Know

Universe: Sample adults 18+

Skip Instructions: <1-5,R,D> [goto ACITENUR]

2018NHIS Spanish Questionnaire -Sample Adult

Adult Selected Items

Document Version Date: 12-Jun-19

Question ID: ASI.150_00.000 **Instrument Variable Name:** ACITENUR **QuestionnaireFileName:** Sample Adult

Spanish Text: Aproximadamente, ¿cuánto tiempo hace que vive en su comunidad actual?

- 1. Menos de 1 año
- 2. 1-3 años
- 3. 4-10 años
- 4. 11-20 años
- 5. Mas de 20 años
- Refused
- Don't know

Universe: Sample adults 18+

Skip Instructions: <1-5,R,D> [goto ACINHELP]

Question ID: ASI.160_00.000 **Instrument Variable Name:** ACINHELP **QuestionnaireFileName:** Sample Adult

Spanish Text: ¿Qué tan de acuerdo o en desacuerdo esta con los siguientes comentarios sobre su comunidad?

La gente en esta comunidad se ayudan mutuamente.

Diría usted...

*Read answer categories.

- 1. Estoy totalmente de acuerdo
- 2. Estoy de acuerdo
- 3. No estoy de acuerdo
- 4. Estoy totalmente en desacuerdo
- Refused
- Don't know

Universe: Sample adults 18+

Skip Instructions: <1-4,R,D> [goto ACINCNT0]

2018NHIS Spanish Questionnaire -Sample Adult

Adult Selected Items

Document Version Date: 12-Jun-19

Question ID: ASI.170_00.000 **Instrument Variable Name:** ACINCNT0 **QuestionnaireFileName:** Sample Adult

Spanish Text: *Read if necessary.

¿Qué tan de acuerdo o en desacuerdo esta con los siguientes comentarios sobre su comunidad?

En esta comunidad hay gente con quien puedo contar.

Diría usted...

*Read answer categories if necessary.

- 1. Estoy totalmente de acuerdo
- 2. Estoy de acuerdo
- 3. No estoy de acuerdo
- 4. Estoy totalmente en desacuerdo
- Refused
- Don't know

Universe: Sample adults 18+

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

Question ID: ASI.180_00.000 **Instrument Variable Name:** ACINTRU **QuestionnaireFileName:** Sample Adult

Spanish Text: *Read if necessary.

¿Qué tan de acuerdo o en desacuerdo esta con los siguientes comentarios sobre su comunidad?

En esta comunidad se puede confiar en la gente.

Diría usted...

*Read answer categories if necessary.

- 1. Estoy totalmente de acuerdo
- 2. Estoy de acuerdo
- 3. No estoy de acuerdo
- 4. Estoy totalmente en desacuerdo
- Refused
- Don't know

Universe: Sample adults 18+

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

2018NHIS Spanish Questionnaire -Sample Adult

Adult Selected Items

Document Version Date: 12-Jun-19

Question ID: ASI.190_00.000 **Instrument Variable Name:** ACINKNT **QuestionnaireFileName:** Sample Adult

Spanish Text: *Read if necessary.

¿Qué tan de acuerdo o en desacuerdo esta con los siguientes comentarios sobre su comunidad?

Esta es una comunidad muy unida.

Diría usted...

*Read answer categories if necessary.

1. Estoy totalmente de acuerdo
 2. Estoy de acuerdo
 3. No estoy de acuerdo
 4. Estoy totalmente en desacuerdo
- Refused
Don't know

Universe: Sample adults 18+

Skip Instructions: <1-4,R,D>
[if SEX=1, goto ACISIM; elseif SEX=2, goto ACISIF]

Question ID: ASI.220_00.000 **Instrument Variable Name:** ACISIM **QuestionnaireFileName:** Sample Adult

Spanish Text: (book) ASI1

¿Cuál de las siguientes mejor representa su manera de pensar en sí mismo?

1. Gay
 2. Heterosexual, o sea, no gay
 3. Bisexual
 4. Otra cosa
 5. No sé la respuesta
- Refused

Universe: Male sample adults 18+

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

2018NHIS Spanish Questionnaire -Sample Adult**Adult Selected Items**Document Version Date: 12-Jun-19

Question ID: ASI.240_00.000 **Instrument Variable Name:** ACISIF **QuestionnaireFileName:** Sample Adult

Spanish Text: (book) ASI2

¿Cuál de las siguientes mejor representa su manera de pensar en sí misma?

1. Lesbiana o gay
 2. Heterosexual, o sea, no gay o lesbiana
 3. Bisexual
 4. Otra cosa
 5. No sé la respuesta
- Refused

Universe: Female sample adults 18+

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

Question ID: ASI.260_00.000 **Instrument Variable Name:** ACIRETR **QuestionnaireFileName:** Sample Adult

Spanish Text: Las siguientes preguntas son sobre que tan preocupado está en este momento sobre temas económicos.

¿Cuál es su grado de preocupación por no tener suficiente dinero para la jubilación? Está...

*Read answer categories.

1. Muy preocupado
 2. Moderadamente preocupado
 3. No muy preocupado
 4. Para nada preocupado
- Refused
Don't know

Universe: Sample adults 18+

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

Question ID: ASI.270_00.000 **Instrument Variable Name:** ACIMEDC **QuestionnaireFileName:** Sample Adult

Spanish Text: ¿Cuál es su grado de preocupación por no poder pagar los costos médicos en caso de una enfermedad grave o un accidente? Está...

*Read answer categories if necessary.

1. Muy preocupado
 2. Moderadamente preocupado
 3. No muy preocupado
 4. Para nada preocupado
- Refused
Don't know

Universe: Sample adults 18+

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

2018NHIS Spanish Questionnaire -Sample Adult**Adult Selected Items**Document Version Date: 12-Jun-19

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

Spanish Text: ¿Cuál es su grado de preocupación por no poder mantener el nivel de vida del que disfruta ahora? Está...

*Read answer categories if necessary.

1. Muy preocupado
 2. Moderadamente preocupado
 3. No muy preocupado
 4. Para nada preocupado
- Refused
Don't know

Universe: Sample adults 18+

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

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

Spanish Text: ¿Cuál es su grado de preocupación por no poder pagar los costos médicos para la atención de la salud normal? Está...

*Read answer categories if necessary.

1. Muy preocupado
 2. Moderadamente preocupado
 3. No muy preocupado
 4. Para nada preocupado
- Refused
Don't know

Universe: Sample adults 18+

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

Question ID: ASI.300_00.000 **Instrument Variable Name:** ACICCOLL **QuestionnaireFileName:** Sample Adult

Spanish Text: ¿Cuál es su grado de preocupación por no tener suficiente dinero para pagar por la educación universitaria de sus hijos? Está...

*Read answer categories if necessary.

1. Muy preocupado
 2. Moderadamente preocupado
 3. No muy preocupado
 4. Para nada preocupado
 5. No aplica
- Refused
Don't know

Universe: Sample adults 18+

Skip Instructions: <1-5,R,D> [goto ACINBILL]

2018NHIS Spanish Questionnaire -Sample Adult**Adult Selected Items**Document Version Date: 12-Jun-19

Question ID: ASI.310_00.000 **Instrument Variable Name:** ACINBILL **QuestionnaireFileName:** Sample Adult

Spanish Text: ¿Cuál es su grado de preocupación por no tener suficiente dinero para pagar sus facturas mensuales? Está...

*Read answer categories if necessary.

1. Muy preocupado
 2. Moderadamente preocupado
 3. No muy preocupado
 4. Para nada preocupado
- Refused
Don't know

Universe: Sample adults 18+

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

Question ID: ASI.320_00.000 **Instrument Variable Name:** ACIHCST **QuestionnaireFileName:** Sample Adult

Spanish Text: ¿Cuál es su grado de preocupación por no poder pagar la renta, la hipoteca u otros costos de la vivienda? Está...

*Read answer categories if necessary.

1. Muy preocupado
 2. Moderadamente preocupado
 3. No muy preocupado
 4. Para nada preocupado
- Refused
Don't know

Universe: Sample adults 18+

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

Question ID: ASI.330_00.000 **Instrument Variable Name:** ACICCMP **QuestionnaireFileName:** Sample Adult

Spanish Text: ¿Cuál es su grado de preocupación por no poder hacer los pagos mínimos de sus tarjetas de crédito? Está...

*Read answer categories if necessary.

1. Muy preocupado
 2. Moderadamente preocupado
 3. No muy preocupado
 4. Para nada preocupado
 5. No tengo tarjetas de crédito
- Refused
Don't know

Universe: Sample adults 18+

Skip Instructions: <1-5,R,D> [goto ACISLEEP]

2018NHIS Spanish Questionnaire -Sample Adult**Adult Selected Items**Document Version Date: 12-Jun-19

Question ID: ASI.340_00.000 **Instrument Variable Name:** ACISLEEP **QuestionnaireFileName:** Sample Adult

Spanish Text: En general, ¿cuántas horas duerme durante un periodo de 24-horas?

*Enter hours of sleep in whole numbers, rounding 30 minutes (1/2 hour) or more UP to the next whole hour and dropping 29 or fewer minutes.

Allow 1-24, R, D

Universe: Sample adults 18+

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

Question ID: ASI.350_00.000 **Instrument Variable Name:** ACISLPFL **QuestionnaireFileName:** Sample Adult

Spanish Text: En la semana pasada, ¿cuántas veces tuvo problemas en dormirse?

*Enter '0' if respondent did not have trouble falling asleep in the past week.

*Enter '7' for 7 or more times.

Allow 0-7, R, D

Universe: Sample adults 18+

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

Question ID: ASI.360_00.000 **Instrument Variable Name:** ACISLPST **QuestionnaireFileName:** Sample Adult

Spanish Text: En la semana pasada, ¿cuántas veces tuvo dificultad para mantenerse dormido?

*Enter '0' if respondent did not have trouble staying asleep in the past week.

*Enter '7' for 7 or more times.

Allow 0-7, R, D

Universe: Sample adults 18+

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

2018NHIS Spanish Questionnaire -Sample Adult**Adult Selected Items**Document Version Date: 12-Jun-19

Question ID: ASI.370_00.000 **Instrument Variable Name:** ACISLPMD **QuestionnaireFileName:** Sample Adult

Spanish Text: En la semana pasada, ¿cuántas veces tomó un medicamento para ayudarle a dormirse o para mantenerse dormido?

*Enter '0' if respondent did not take medication to help sleep in the past week.

*Enter '7' for 7 or more times.

Allow 0-7, R, D

Universe: Sample adults 18+

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

Question ID: ASI.380_00.000 **Instrument Variable Name:** ACIREST **QuestionnaireFileName:** Sample Adult

Spanish Text: En la semana pasada, ¿cuántos días se despertó sintiéndose bien descansado?

*Enter '0' if respondent never felt well rested in the past week.

Allow 0-7, R, D

Universe: Sample adults 18+

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

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

Spanish Text: Las siguientes preguntas se refieren a su estado emocional durante los ÚLTIMOS 30 DÍAS.

1. Enter 1 to Continue

Universe: Sample adults 18+

Skip Instructions: <1> [goto ACISAD]

2018NHIS Spanish Questionnaire -Sample Adult**Adult Selected Items**Document Version Date: 12-Jun-19

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

Spanish Text: (book) ASI5

DURANTE LOS ÚLTIMOS 30 DÍAS, ¿con qué frecuencia se sintió

... Tan triste que nada le alegraba?

1. TODO el tiempo
 2. CASI TODO el tiempo
 3. PARTE del tiempo
 4. MUY POCAS veces
 5. NUNCA
- Refused
Don't know

Universe: Sample adults 18+

Skip Instructions: <1-5,R,D> [goto ACINERV]

Question ID: ASI.390_02.000 **Instrument Variable Name:** ACINERV **QuestionnaireFileName:** Sample Adult

Spanish Text: (book) ASI5

* Read if necessary:

DURANTE LOS ÚLTIMOS 30 DÍAS, ¿con qué frecuencia se sintió

... Nervioso(a)?

1. TODO el tiempo
 2. CASI TODO el tiempo
 3. PARTE del tiempo
 4. MUY POCAS veces
 5. NUNCA
- Refused
Don't know

Universe: Sample adults 18+

Skip Instructions: <1-5,R,D> [goto ACIRSTLS]

2018NHIS Spanish Questionnaire -Sample Adult**Adult Selected Items**Document Version Date: 12-Jun-19

Question ID: ASI.390_03.000 **Instrument Variable Name:** ACIRSTLS **QuestionnaireFileName:** Sample Adult

Spanish Text: (book) ASI5

* Read if necessary:

DURANTE LOS ÚLTIMOS 30 DÍAS, ¿con qué frecuencia se sintió

... Intranquilo(a) o inquieto(a)?

1. TODO el tiempo
 2. CASI TODO el tiempo
 3. PARTE del tiempo
 4. MUY POCAS veces
 5. NUNCA
- Refused
Don't know

Universe: Sample adults 18+

Skip Instructions: <1-5,R,D> [goto ACIHOPLS]

Question ID: ASI.390_04.000 **Instrument Variable Name:** ACIHOPLS **QuestionnaireFileName:** Sample Adult

Spanish Text: (book) ASI5

* Read if necessary:

DURANTE LOS ÚLTIMOS 30 DÍAS, ¿con qué frecuencia se sintió

... Desesperado(a)?

1. TODO el tiempo
 2. CASI TODO el tiempo
 3. PARTE del tiempo
 4. MUY POCAS veces
 5. NUNCA
- Refused
Don't know

Universe: Sample adults 18+

Skip Instructions: <1-5,R,D> [goto ACIEFFRT]

2018NHIS Spanish Questionnaire -Sample Adult**Adult Selected Items**Document Version Date: 12-Jun-19

Question ID: ASI.390_05.000 **Instrument Variable Name:** ACIEFFRT **QuestionnaireFileName:** Sample Adult

Spanish Text: (book) ASI5

* Read if necessary:

DURANTE LOS ÚLTIMOS 30 DÍAS, ¿con qué frecuencia se sintió

... Que todo era un gran esfuerzo?

1. TODO el tiempo
 2. CASI TODO el tiempo
 3. PARTE del tiempo
 4. MUY POCAS veces
 5. NUNCA
- Refused
Don't know

Universe: Sample adults 18+

Skip Instructions: <1-5,R,D> [goto ACIWTHLS]

Question ID: ASI.390_06.000 **Instrument Variable Name:** ACIWTHLS **QuestionnaireFileName:** Sample Adult

Spanish Text: (book) ASI5

* Read if necessary:

DURANTE LOS ÚLTIMOS 30 DÍAS, ¿con qué frecuencia se sintió

... Sin mérito alguno?

1. TODO el tiempo
 2. CASI TODO el tiempo
 3. PARTE del tiempo
 4. MUY POCAS veces
 5. NUNCA
- Refused
Don't know

Universe: Sample adults 18+

Skip Instructions: <1-5,R,D>
if ACISAD or ACINERV or ACIRSTLS or ACIHOPLS or ACIEFFRT or ACIWTHLS=1-3 [goto ACIMUCH];
else [goto ACIHIVT]

2018NHIS Spanish Questionnaire -Sample Adult**Adult Selected Items**Document Version Date: 12-Jun-19

Question ID: ASI.400_00.000 **Instrument Variable Name:** ACIMUCH **QuestionnaireFileName:** Sample Adult

Spanish Text: Hemos hablado de varias emociones que tuvo durante los ÚLTIMOS 30 DÍAS. Por lo regular, ¿CUÁNTO interfirieron estas emociones con su vida o en sus actividades: mucho, algo, poco o nada?

1. Mucho
 2. Algo
 3. Poco
 4. Nada
- Refused
Don't know

Universe: Sample adults 18+ who at least some of the time have felt sad, nervous, restless or fidgety, hopeless, that everything was an effort, or worthless, in the past 30 days

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

Question ID: ASI.410_00.000 **Instrument Variable Name:** ACIHIVT **QuestionnaireFileName:** Sample Adult

Spanish Text: La siguiente pregunta se refiere a la prueba del virus de la inmunodeficiencia humana (VIH), el virus que causa el SIDA. Con la excepción de las pruebas que puede haber tenido como parte de una donación de sangre, ¿se ha hecho alguna vez la prueba del VIH?

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+

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

2018NHIS Spanish Questionnaire -Sample Adult

Adult Selected Items

Document Version Date: 12-Jun-19

Question ID: ASI.420_00.000 **Instrument Variable Name:** ACIHIVWN **QuestionnaireFileName:** Sample Adult

Spanish Text: La siguiente pregunta se refiere a la prueba del virus de la inmunodeficiencia humana (VIH), el virus que causa el SIDA. Con la excepción de las pruebas que puede haber tenido como parte de una donación de sangre, ¿se ha hecho alguna vez la prueba del VIH?

1. Es poco probable que ha sido expuesto(a) al VIH.
2. Tenía miedo de enterarse que era VIH positivo (que tenía VIH)
3. No quería pensar sobre el VIH o sobre ser VIH positivo
4. Estaba preocupado(a) que su nombre sería reportado al gobierno si la prueba resultase VIH positivo
5. No sabía donde hacerse la prueba
6. No le gustan las agujas
7. Tenía miedo de perder su trabajo, seguro, vivienda, amistades, o familia si la gente sabiese que usted era positivo para infección de SIDA
8. Alguna otra razón
9. Ninguna razón en particular

Refused
Don't know

Universe: Sample adults 18+ who have never been tested for HIV

Skip Instructions: <1-9,R,D> [goto next section]

2018NHIS Spanish Questionnaire -Sample Adult**Cancer Screening**Document Version Date: 12-Jun-19

Question ID: NAF.130_00.000 **Instrument Variable Name:** PAPHAD1 **QuestionnaireFileName:** Sample Adult**Spanish Text:** ALGUNA VEZ, ¿se ha hecho la prueba de Papanicolaou?

*Read if necessary.

Una prueba de Papanicolaou es una prueba rutinaria para la mujer en la cual el médico examina el cervix/cuello del útero, toma una muestra del cervix con un palillo o brocha pequeña y la envía al laboratorio.

1. Sí
2. No
- Refused
- Don't know

Universe: Female sample adults 18+**Skip Instructions:**
<1> [goto RPAP1_M1]
<2> [goto PAPNOT2]
<R,D> [goto HYST]

Question ID: NAF.150_01.000 **Instrument Variable Name:** RPAP1_M1 **QuestionnaireFileName:** Sample Adult**Spanish Text:** 1 of 2

¿Cuándo le hicieron la MÁS RECIENTE prueba de Papanicolaou?

*Enter month of last Pap test.

*Enter '96' to go to number and time period format.

1. Enero
2. Febrero
3. Marzo
4. Abril
5. Mayo
6. Junio
7. Julio
8. Agosto
9. Septiembre
10. Octubre
11. Noviembre
12. Diciembre
96. Time period format
- Refused
- Don't know

Universe: Female sample adults 18+ who have ever had a Pap test**Skip Instructions:**
<1-12,D> [goto RPAP1_Y1]
<R> store "R" in RPAP1_Y1 [goto RPAP21]
<96> store "9996" in RPAP1_Y1 [goto RPAP1N1]

2018NHIS Spanish Questionnaire -Sample Adult

Cancer Screening

Document Version Date: 12-Jun-19

Question ID: NAF.150_02.000 **Instrument Variable Name:** RPAP1_Y1 **QuestionnaireFileName:** Sample Adult

Spanish Text:

Universe: Female sample adults age 18+ who answered month of last Pap test or didn't know month of last Pap test

Skip Instructions: <valid year> if RPAP1_Y1 gt current year or (RPAP1_Y1=current year and RPAP1_M1 gt current month)
[goto ERR1_RPAP1_Y1 (future date)]
elseif RPAP1_Y1 lt DOBY or (RPAP1_Y1=DOBY and RPAP1_M1 lt DOBM)
[goto ERR2_RPAP1_Y1 (prior to birth date)]
elseif RPAP1_M1=D
[goto RPAP21]
elseif RPAP1_M1=1-12 [goto HPVVPAP]
<R,D> [goto RPAP21]

Question ID: NAF.160_01.000 **Instrument Variable Name:** RPAP1N1 **QuestionnaireFileName:** Sample Adult

Spanish Text:

1 of 2

*Read if necessary: ¿Cuándo le hicieron la MÁS RECIENTE prueba de Papanicolaou?

*Enter number for time since last Pap test.

*Enter '95' for 95 or more.

Allow 1-95,R,D
Refused
Don't Know

Universe: Female sample adults 18+ who selected number and time period format for most recent Pap test from the initial month screen

Skip Instructions: <1-95> [goto RPAP1T1]
<R,D> store "R,D" in RPAP1T1 [goto RPAP21]

2018NHIS Spanish Questionnaire -Sample Adult**Cancer Screening**Document Version Date: 12-Jun-19

Question ID: NAF.160_02.000 **Instrument Variable Name:** RPAP1T1 **QuestionnaireFileName:** Sample Adult**Spanish Text:** 2 of 2

*Enter time period for time since most recent Pap test.

1. Día(s) atrás
 2. Semana(s) atrás
 3. Mes(es) atrás
 4. Año(s) atrás
- Refused
Don't know

Universe: Female sample adults 18+ who answered 1-95 for number part of this 2 part question**Skip Instructions:** <1-3> [goto HPVPPAP]
<4> (if RPAP1N1=4, set RPAP21=4 [goto HPVPPAP];
 elseif RPAP1N1 gt 5 and RPAP1N1 gt AGE, [goto ERR_RPAP1T1 (greater than persons age)]
 elseif RPAP1N1 gt 5 and RPAP1N1 le AGE, set RPAP21=5 and [goto HPVPPAP]
 elseif RPAP1N1=1,2,3,5, [goto RPAP21]
<R,D> [goto RPAP21]

Question ID: NAF.165_00.000 **Instrument Variable Name:** RPAP21 **QuestionnaireFileName:** Sample Adult**Spanish Text:** ¿Fue:

*Read answer categories.

1. Un año o menos
 2. Más de un año pero no más de 2 años
 3. Más de 2 años pero no más de 3 años
 4. Más de 3 años pero no más de 5 años
 5. Más de 5 años
- Refused
Don't know

Universe: Female sample adults 18+ who failed to give a complete date in either the month or year format or failed to give a complete date in the number and time period format, or entered years ago in the time period format (excluding those whose last Pap test was over 5 years ago)**Skip Instructions:** <1-5,R,D> if answer code is grayed out [goto ERR_RPAP21];
else [goto HPVPPAP]

2018NHIS Spanish Questionnaire -Sample Adult
Cancer Screening
Document Version Date: 12-Jun-19

Question ID: NAF.168_00.000 **Instrument Variable Name:** HPVVPAP **QuestionnaireFileName:** Sample Adult

Spanish Text: Una prueba de VPH a veces se da con la prueba de Papanicolaou para detectar el cáncer de cuello uterino/cervix.
 ¿Tuvo usted una prueba de VPH con su prueba de Papanicolaou más reciente?

1. Sí
2. No
- Refused
- Don't Know

Universe: Female sample adults 18+ who have ever had a Pap test

Skip Instructions: <1-2,R,D> if (RPAP21 = 1,2,3) or (RPAP1T1 = 1,2) or (RPAP1_Y1 = (current year - 3) and RPAP1_M1 ge
 current month) or (RPAP1_Y1 gt (current year - 3)) or (RPAP1T1 = 3 and RPAP1N1 le 36)
 [goto PAPABN3];

```
elseif (RPAP21 = 5) or (RPAP1_Y1 = (current year - 5) and RPAP1_M1 lt current month) or
(RPAP1_Y1 lt (current year - 5)) or (RPAP1T1 = 3 and RPAP1N1 gt 60)
[goto PAPNOT2]
```

```
elseif RPAP21 = R,D [goto HYST]
```

Question ID: NAF.180_00.000 **Instrument Variable Name:** PAPABN3 **QuestionnaireFileName:** Sample Adult

Spanish Text: ¿EN LOS ÚLTIMOS 3 AÑOS, ha tenido una prueba de [fill 1: Papanicolaou/Papanicolaou o de VPH] en la cual
 los resultados no FUERON normales?

1. Sí, prueba de Pap no fue normal
2. Sí, prueba de VPH no fue normal
3. Sí, las dos pruebas no fueron normales
4. No
- Refused
- Don't Know

Universe: Female sample adults 18+ who have had a Pap test in the past 3 years

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

2018NHIS Spanish Questionnaire -Sample Adult
Cancer Screening
Document Version Date: 12-Jun-19

Question ID: NAF.230_00.000 **Instrument Variable Name:** MAMHAD **QuestionnaireFileName:** Sample Adult

Spanish Text: ALGUNA VEZ, ¿se ha hecho una mamografía?

*Read if necessary.

Una mamografía es una radiografía tomada sólo a los senos por un aparato que presiona contra el seno.

1. Sí
2. No
- Refused
- Don't know

Universe: Female sample adults age 30+

Skip Instructions: <1> [goto RMAM1_MT]
 <2> [goto MAMNOT1]
 <R,D> if AGE GE 40 [goto COLHAD];
 else [goto next section]

Question ID: NAF.260_01.000 **Instrument Variable Name:** RMAM1_MT **QuestionnaireFileName:** Sample Adult

Spanish Text: 1 of 2

¿Cuándo fue su mamografía MÁS RECIENTE?

*Enter month of last mammogram.

*Enter '96' to go to number and time period format.

1. Enero
2. Febrero
3. Marzo
4. Abril
5. Mayo
6. Junio
7. Julio
8. Agosto
9. Septiembre
10. Octubre
11. Noviembre
12. Diciembre
96. Time period format
- Refused
- Don't Know

Universe: Female sample adults 30+ who have ever had a mammogram

Skip Instructions: <1-12,D> [goto RMAM1_YR]
 <R> store "R" in RMAM1_YR [goto RMAM2]
 <96> store "9996" in RMAM1_YR [goto RMAM1N]

2018NHIS Spanish Questionnaire -Sample Adult
Cancer Screening
Document Version Date: 12-Jun-19

Question ID: NAF.260_02.000 **Instrument Variable Name:** RMAM1_YR **QuestionnaireFileName:** Sample Adult

Spanish Text: 2 of 2

*Enter year of last mammogram.

Universe: Female sample adults age 30+ who answered month of last mammogram or didn't know month of last mammogram

Skip Instructions: <valid year> if RMAM1_YR gt current year or (RMAM1_YR=current year and RMAM1_MT gt current month)
 [goto ERR1_RMAM1_YR (future date)]
 elseif RMAM1_YR lt DOBY or (RMAM1_YR=DOBY and RMAM1_MT lt DOBM)
 [goto ERR2_RMAM1_YR (prior to birth date)]
 elseif RMAM1_MT=D
 [goto RMAM2]
 elseif RMAM1_MT=1-12
 [goto MAMPAY]
 <R,D> goto RMAM2

Question ID: NAF.270_01.000 **Instrument Variable Name:** RMAM1N **QuestionnaireFileName:** Sample Adult

Spanish Text: 1 of 2

*Read if necessary: ¿Cuándo fue su mamografía MÁS RECIENTE?

*Enter number for time since last mammogram.

*Enter '95' for 95 or more.

 1-95
 Refused
 Don't Know

Universe: Female sample adults 30+ who selected number and time period format for most recent mammogram from the initial month screen

Skip Instructions: <1-95> [goto RMAM1T]
 <R,D> store "R,D" in RMAM1T [goto RMAM2]

2018NHIS Spanish Questionnaire -Sample Adult
Cancer Screening
Document Version Date: 12-Jun-19

Question ID: NAF.270_02.000 **Instrument Variable Name:** RMAM1T **QuestionnaireFileName:** Sample Adult

Spanish Text: 2 of 2

*Enter time period for time since most recent mammogram.

1. Día(s) atrás
2. Semana(s) atrás
3. Mes(es) atrás
4. Año(s) atrás
- Refused
- Don't know

Universe: Female sample adults 30+ who answered 1-95 for number part of this 2 part question

Skip Instructions:

```

<1-3> goto MAMPAY
<4> if RMAM1N=4
    set RMAM2=4
    goto MAMPAY
elseif RMAM1N gt 5 and RMAM1N gt AGE
    goto ERR_RMAM1T (greater than persons age)
elseif RMAM1N gt 5 and RMAM1N le AGE
    set RMAM2=5
    goto MAMPAY
elseif RMAM1N=1,2,3,5
    goto RMAM2
<R,D> goto RMAM2

```

Question ID: NAF.275_00.000 **Instrument Variable Name:** RMAM2 **QuestionnaireFileName:** Sample Adult

Spanish Text: ¿Fue:

*Read answer categories.

1. Un año o menos
2. Más de un año pero no más de 2 años
3. Más de 2 años pero no más de 3 años
4. Más de 3 años pero no más de 5 años
5. Más de 5 años
- Refused
- Don't know

Universe: Female sample adults 30+ who failed to give a complete date in either the month or year format or failed to give a complete date in the number and time period format, or entered years ago in the time period format (excluding those whose last mammogram was over 5 years ago)

Skip Instructions:

```

<1-5,R,D> if answer code is grayed out [goto ERR_RMAM2]
else [goto MAMPAY]

```

2018NHIS Spanish Questionnaire -Sample Adult
Cancer Screening
Document Version Date: 12-Jun-19

Question ID: NAF.280_00.000 **Instrument Variable Name:** MAMPAY **QuestionnaireFileName:** Sample Adult

Spanish Text: ¿Cuánto pagó de su bolsillo para este mamografía -- NADA, PARTE o TODO el costo?

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

Universe: Female sample adults 30+ who have ever had a mammogram

Skip Instructions: <1-3,R,D> [goto MAMREAS]

Question ID: NAF.310_00.000 **Instrument Variable Name:** MAMREAS **QuestionnaireFileName:** Sample Adult

Spanish Text: ¿Cuál fue la razón PRINCIPAL por haberse hecho esta mamografía? -- era parte de un examen físico de rutina, debido a un problema u otra razón?

1. Parte de un examen físico de rutina
 2. Debido a un problema
 3. Otra razón
- Refused
Don't know

Universe: Female sample adults 30+ who have ever had a mammogram

Skip Instructions: <1-3,R,D> [goto MAMABN1]

Question ID: NAF.320_00.000 **Instrument Variable Name:** MAMABN1 **QuestionnaireFileName:** Sample Adult

Spanish Text: ¿Después de su mamografía MÁS RECIENTE, le aconsejaron hacerse más pruebas?

*Read if necessary: Más pruebas pueden incluir otra mamografía, una ecografía, una resonancia magnética (MRI), una biopsia, o algún otro para comprobar si hay problemas en su seno.

1. Sí
 2. No
- Refused
Don't know

Universe: Female sample adults 30+ who have ever had a mammogram

Skip Instructions: <1> [goto MFOLLOW1]

<2,R,D> if (RMAM2 = 3,4,5) or (RMAM1_YR = (current year - 2) and RMAM1_MT lt current month) or (RMAM1_YR lt (current year - 2)) or (RMAM1T = 3 and RMAM1N gt 24) [goto MAMNOT1];
 else if AGE GE 40 [goto COLHAD];
 else [goto next section]

2018NHIS Spanish Questionnaire -Sample Adult
Cancer Screening
Document Version Date: 12-Jun-19

Question ID: NAF.325_00.000 **Instrument Variable Name:** MFOLLOW1 **QuestionnaireFileName:** Sample Adult

Spanish Text: ¿Cuáles pruebas le hicieron?

*Enter all that apply, separate with commas.

- 0. Ninguna
- 1. Ultrasonido
- 2. MRI de seno
- 3. Mamografía(s) adicional(es)
- 4. Biopsia
- 5. Otra
- Refused
- Don't know

Universe: Female sample adults 30+ who have ever had a mammogram and was recommended to have more tests

Skip Instructions: <0-5,R,D> if (RMAM2 = 3,4,5) or (RMAM1_YR = (current year - 2) and RMAM1_MT lt current month) or (RMAM1_YR lt (current year - 2)) or (RMAM1T = 3 and RMAM1N gt 24) [goto MAMNOT1];
 else if AGE GE 40 [goto COLHAD];
 else [goto next section]

Question ID: NAF.330_00.000 **Instrument Variable Name:** MAMNOT1 **QuestionnaireFileName:** Sample Adult

Spanish Text: ¿Cuál es la razón principal por la cual [fill 1: NUNCA se ha hecho una mamografía/NO se ha hecho una mamografía en los ÚLTIMOS 2 AÑOS]?

*Put response into correct category below.

- 1. No hay razón/No lo había pensado
- 2. No la necesitaba/No sabía que necesitaba este tipo de prueba
- 3. El doctor no la ordenó/No mencionó que la necesitaba
- 4. No he tenido ningún problema
- 5. Lo retrasé/No encontré el tiempo
- 6. Muy caro/No tengo seguro/costo
- 7. Muy doloroso, desagradable o vergonzoso
- 8. Soy muy joven
- 9. No tengo un doctor
- 10. Otra
- Refused
- Don't know

Universe: Female sample adults 30+ who have never had a mammogram or not had a mammogram in the past 2 years

Skip Instructions: <1-10,R,D> if AGE GE 40 [goto COLHAD/NAF.540_00.000];
 elseif AGE LT 40 [goto next section]

2018NHIS Spanish Questionnaire -Sample Adult
Cancer Screening
Document Version Date: 12-Jun-19

Question ID: NAF.430_00.000 **Instrument Variable Name:** PSAHAD **QuestionnaireFileName:** Sample Adult

Spanish Text: ALGUNA VEZ, ¿se ha hecho una prueba de APE (PSA en inglés)?

*Read if necessary: Una prueba de PSA es una prueba de sangre para detectar cáncer en la próstata. También se conoce como la prueba de antígeno prostático específico.

1. Sí
2. No
- Refused
- Don't know

Universe: Male sample adults 40+

Skip Instructions: <1> [goto RPSA1_MT]
 <2,R,D> [goto PSAADV]

Question ID: NAF.440_00.000 **Instrument Variable Name:** RPSA1_MT **QuestionnaireFileName:** Sample Adult

Spanish Text: 1 of 2

¿Cuándo tuvo su prueba de APE (PSA) MÁS RECIENTE?

* Enter month of last PSA test.

* Enter '96' to go to number and time period format.

1. Enero
2. Febrero
3. Marzo
4. Abril
5. Mayo
6. Junio
7. Julio
8. Agosto
9. Septiembre
10. Octubre
11. Noviembre
12. Diciembre
96. Time period format
- Refused
- Don't know

Universe: Male sample adults 40+ who have had a PSA test

Skip Instructions: <1-12,D> [goto RPSA1_YR]
 <R> store "R" in RPSA1_YR [goto RPSA2]
 <96> store "9996" in RPSA1_YR [goto RPSA1N]

2018NHIS Spanish Questionnaire -Sample Adult
Cancer Screening
Document Version Date: 12-Jun-19

Question ID: NAF.440_01.000 **Instrument Variable Name:** RPSA1_YR **QuestionnaireFileName:** Sample Adult
Spanish Text:
Universe: Male sample adults 40+ who have had a PSA test

Skip Instructions: <valid year> if RPSA1_YR gt current year or (RPSA1_YR=current year and RPSA1_MT gt current month)
 goto ERR1_ RPSA1_YR (future date)
 elseif RPSA1_YR lt DOBY or (RPSA1_YR=DOBY and RPSA1_MT lt DOBM)
 goto ERR2_ RPSA1_YR (prior to birth date)
 elseif RPSA1_MT=D
 goto RPSA2
 elseif RPSA1_MT=1-12
 goto PSAREAS
 <R,D> goto RPSA2

Question ID: NAF.440_02.000 **Instrument Variable Name:** RPSA1N **QuestionnaireFileName:** Sample Adult
Spanish Text: 1 of 2

*Read if necessary: ¿Cuándo tuvo su prueba de APE (PSA) MÁS RECIENTE?

* Enter number for time since last PSA test.

* Enter '95' for 95 or more.

Allow 1-95, R, D

Universe: Male sample adults 40+ who have selected number and time period format for most recent PSA test from the initial month screen

Skip Instructions: <1-95> [goto RPSA1T]
 <R,D> store "R,D" in RPSA1T [goto RPSA2]

Question ID: NAF.440_03.000 **Instrument Variable Name:** RPSA1T **QuestionnaireFileName:** Sample Adult
Spanish Text: 2 of 2

* Enter time period for time since most recent PSA test.

1. Día(s) atrás
 2. Semana(s) atrás
 3. Mes(es) atrás
 4. Año(s) atrás
- Refused
-
- Don't know

Universe: Male sample adults 40+ who answered 1-95 for number part of this 2 part question

Skip Instructions: <1-3> goto PSAREAS
 <4> if RPSA1N=4, set RPSA2=4, [goto PSAREAS]
 elseif RPSA1N gt 5 and RPSA1N gt AGE, [goto ERR_RPSA1T] (greater than persons age)
 elseif RPSA1N gt 5 and RPSA1N le AGE, set RPSA2=5, [goto PSAREAS]
 elseif RPSA1N=1,2,3,5 [goto RPSA2]
 <R,D> goto RPSA2

2018NHIS Spanish Questionnaire -Sample Adult**Cancer Screening**Document Version Date: 12-Jun-19

Question ID: NAF.450_00.000 **Instrument Variable Name:** PSA5YR **QuestionnaireFileName:** Sample Adult

Spanish Text: En los ÚLTIMOS 5 años, ¿cuántas pruebas de APE (PSA) le han hecho?

*Enter '0' for none.

*Enter '95" for 95 or more PSA tests.

0-95

Refused

Don't Know

Universe: Male sample adults 40+ who have had a PSA test

Skip Instructions: <0-95,R,D> [goto PSAADV]

Question ID: NAF.455_00.000 **Instrument Variable Name:** PSAADV **QuestionnaireFileName:** Sample Adult

Spanish Text: [fill 1: Antes de hacerse la prueba de APE (PSA), ¿ALGUNA VEZ/¿ALGUNA VEZ] un médico le explicó sobre las ventajas de [fill 2: la prueba/la prueba de APE (PSA)]?

1. Sí

2. No

Refused

Don't Know

Universe: Male sample adults 40+

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

Question ID: NAF.460_00.000 **Instrument Variable Name:** PSADISAV **QuestionnaireFileName:** Sample Adult

Spanish Text: [fill 1: Antes de hacerse la prueba de APE (PSA), ¿ALGUNA VEZ/¿ALGUNA VEZ] un médico le explicó sobre las desventajas de [fill 2: la prueba/la prueba de APE (PSA)]?

1. Sí

2. No

Refused

Don't Know

Universe: Male sample adults 40+

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

2018NHIS Spanish Questionnaire -Sample Adult
Cancer Screening
Document Version Date: 12-Jun-19

Question ID: NAF.540_00.000 **Instrument Variable Name:** COLHAD **QuestionnaireFileName:** Sample Adult

Spanish Text: Hay diferentes exámenes para detectar el cáncer de colon. Colonoscopia y sigmoidoscopia son exámenes por los cuales un médico introduce un tubo en el recto para detectar pólipos o cáncer. En la colonoscopia, el médico revisa el colon en su totalidad, y le dan medicamento a través de una aguja en el brazo para que le de sueño, y le piden que tengan a alguien que pueda llevarlo(a) a casa. En la sigmoidoscopia, el médico inspecciona solo una porción del colon y usted se mantiene completamente despierto(a).

¿ALGUNA VEZ ha tenido una colonoscopia?

*Read if necessary:

Un pólipo es un tumor que se desarrolla dentro del colon o recto.

Antes de comenzar estos estudios, le piden tomar un medicamento que le causa diarrea.

1. Sí
2. No
- Refused
- Don't Know

Universe: Sample adults 40+

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

Question ID: NAF.560_01.000 **Instrument Variable Name:** COL_MT **QuestionnaireFileName:** Sample Adult

Spanish Text: 1 of 2

¿Cuándo le hicieron el examen de la colonoscopia MÁS RECIENTE?

*Enter month of last exam.

*Enter '96' to go to number and time period format.

1. Enero
2. Febrero
3. Marzo
4. Abril
5. Mayo
6. Junio
7. Julio
8. Agosto
9. Septiembre
10. Octubre
11. Noviembre
12. Diciembre
96. Time period format
- Refused
- Don't know

Universe: Sample adults 40+ who have ever had a colonoscopy

Skip Instructions: <1-12,D> [goto COL_YR]
<R> store "R" in COL_YR [goto COL2]
<96> store "9996" in COL_YR [goto COLN]

2018NHIS Spanish Questionnaire -Sample Adult**Cancer Screening**Document Version Date: 12-Jun-19

Question ID: NAF.560_02.000 **Instrument Variable Name:** COL_YR **QuestionnaireFileName:** Sample Adult

Spanish Text:

Universe: Sample adults age 40+ who answered month of last colonoscopy or didn't know month of last colonoscopy

Skip Instructions: <valid year> if COL_YR gt current year or (COL_YR=current year and COL_MT gt current month)
 goto ERR1_ COL_YR (future date)
elseif COL_YR lt DOBY or (COL_YR=DOBY and COL_MT lt DOBM)
 goto ERR2_ COL_YR (prior to birth date)
elseif COL_MT=D
 goto COL2
elseif COL_MT=1-12
 goto COLREAS
<R,D> goto COL2

Question ID: NAF.570_01.000 **Instrument Variable Name:** COLN **QuestionnaireFileName:** Sample Adult

Spanish Text: 1 of 2

*Read if necessary: ¿Cuándo le hicieron el examen de la colonoscopia MÁS RECIENTE?

*Enter number for time since last colonoscopy.

*Enter '95' for 95 or more.

Universe: Sample adults 40+ who selected number and time period format for most recent colonoscopy from the initial month screen

Skip Instructions: <1-95> [goto COLT]
<R,D> store "R,D" in COLT [goto COL2]

2018NHIS Spanish Questionnaire -Sample Adult
Cancer Screening
Document Version Date: 12-Jun-19

Question ID: NAF.570_02.000 **Instrument Variable Name:** COLT **QuestionnaireFileName:** Sample Adult

Spanish Text: 2 of 2

*Enter time period for time since most recent colonoscopy.

1. Día(s) atrás
2. Semana(s) atrás
3. Mes(es) atrás
4. Año(s) atrás
- Refused
- Don't know

Universe: Sample adults 40+ who answered 1-95 for number part of this 2 part question

Skip Instructions:

```

<1-3> goto COLREAS
<4> if COLN=4
    set COL2=4
    goto COLREAS
elseif COLN=6,7,8,9
    set COL2=5
    goto COLREAS
elseif COLN gt 10 and COLN gt AGE
    goto ERR_COLT (greater than persons age)
elseif COLN gt 10 and COLN le AGE
    set COL2=6
    goto COLREAS
elseif COLN=1,2,3,5,10
    goto COL2
<R,D> goto COL2
  
```

Question ID: NAF.575_00.000 **Instrument Variable Name:** COL2 **QuestionnaireFileName:** Sample Adult

Spanish Text: ¿Fue:

*Read answer categories.

1. Un año o menos
2. Más de un año pero no más de 2 años
3. Más de 2 años pero no más de 3 años
4. Más de 3 años pero no más de 5 años
5. Más de 5 años pero no más de 10 años
6. Más de 10 años
- Refused
- Don't know

Universe: Sample adults 40+ who failed to give a complete date in either the month or year format or failed to give a complete date in the number and time period format, or entered years ago in the time period format (excluding those whose last colonoscopy was 6-9 or over 10 years ago)

Skip Instructions:

```

<1-6,R,D> if answer code is grayed out [goto ERR_COL2]
    else [goto COLREAS]
  
```

2018NHIS Spanish Questionnaire -Sample Adult**Cancer Screening**Document Version Date: 12-Jun-19

Question ID: NAF.590_00.000 **Instrument Variable Name:** COLREAS **QuestionnaireFileName:** Sample Adult**Spanish Text:** ¿Cuál fue la razón PRINCIPAL por la cual se hizo la prueba de colonoscopia - fue parte de un examen físico rutinario, debido a un problema, como prueba de seguimiento de una prueba hecha anteriormente o examen de detección, u otra razón?

1. Parte de un examen físico de rutina
 2. Debido a un problema
 3. Prueba de seguimiento de una prueba hecha anteriormente o examen de detección
 4. Otra razón
- Refused
Don't Know

Universe: Sample adults 40+ who who have ever had a colonoscopy**Skip Instructions:** <1-4,R,D> [goto COLPAY]

Question ID: NAF.590_00.010 **Instrument Variable Name:** COLPAY **QuestionnaireFileName:** Sample Adult**Spanish Text:** ¿Cuánto pagó de su bolsillo para su prueba de colonoscopia más reciente - fue NADA, PARTE o TODO el costo?

1. Nada del costo
 2. Parte del costo
 3. Todo el costo
- Refused
Don't Know

Universe: Sample adults 40+ who who have ever had a colonoscopy**Skip Instructions:** <1-3,R,D> [goto SIGHAD]

Question ID: NAF.591_00.000 **Instrument Variable Name:** SIGHAD **QuestionnaireFileName:** Sample Adult**Spanish Text:** Recuerde que la sigmoidoscopia es parecida a la colonoscopia pero el médico revisa solo una porción del colon y usted se mantiene completamente despierto(a). ¿ALGUNA VEZ le han hecho una prueba de sigmoidoscopia?

1. Sí
 2. No
- Refused
Don't Know

Universe: Sample adults 40+**Skip Instructions:** <1> [goto SIG_MT]
<2,R,D> [goto CTHEARD]

2018NHIS Spanish Questionnaire -Sample Adult
Cancer Screening
Document Version Date: 12-Jun-19

Question ID: NAF.592_01.000 **Instrument Variable Name:** SIG_MT **QuestionnaireFileName:** Sample Adult

Spanish Text: 1 of 2

¿Cuándo le hicieron la prueba de sigmoidoscopia MÁS RECIENTE?

*Enter month of last exam.

*Enter '96' to go to number and time period format.

1. Enero
2. Febrero
3. Marzo
4. Abril
5. Mayo
6. Junio
7. Julio
8. Agosto
9. Septiembre
10. Octubre
11. Noviembre
12. Diciembre
96. Time period format
- Refused
- Don't know

Universe: Sample adults 40+ who have ever had a sigmoidoscopy

Skip Instructions:

```

<1-12,D> [goto SIG_YR]
<R> store "R" in SIG_YR [goto SIG2]
<96> store "9996" in SIG_YR [goto SIGN]

```

Question ID: NAF.593_02.000 **Instrument Variable Name:** SIG_YR **QuestionnaireFileName:** Sample Adult

Spanish Text:
Universe: Sample adults age 40+ who answered month of last sigmoidoscopy or didn't know month of last sigmoidoscopy

Skip Instructions:

```

<valid year> if SIG_YR gt current year or (SIG_YR=current year and SIG_MT gt current month)
  goto ERR1_ SIG_YR (future date)
elseif SIG_YR lt DOBY or (SIG_YR=DOBY and SIG_MT lt DOBM)
  goto ERR2_ SIG_YR (prior to birth date)
elseif SIG_MT=D
  goto SIG2
elseif SIG_MT=1-12
  goto CTHEARD
<R,D> goto SIG2

```

2018NHIS Spanish Questionnaire -Sample Adult
Cancer Screening
Document Version Date: 12-Jun-19

Question ID: NAF.594_01.000 **Instrument Variable Name:** SIGN **QuestionnaireFileName:** Sample Adult

Spanish Text: 1 of 2

*Read if necessary: ¿Cuándo le hicieron la prueba de sigmoidoscopia MÁS RECIENTE?

*Enter number for time since last sigmoidoscopy.

*Enter '95' for 95 or more.

Universe: Sample adults 40+ who selected number and time period format for most recent sigmoidoscopy from the initial month screen

Skip Instructions: <1-95> [goto SIGT]
 <R,D> store "R,D" in SIGT [goto SIG2]

Question ID: NAF.595_02.000 **Instrument Variable Name:** SIGT **QuestionnaireFileName:** Sample Adult

Spanish Text: 2 of 2

*Enter time period for time since most recent sigmoidoscopy.

1. Día(s) atrás
2. Semana(s) atrás
3. Mes(es) atrás
4. Año(s) atrás
- Refused
- Don't know

Universe: Sample adults 40+ who answered 1-95 for number part of this 2 part question

Skip Instructions: <1-3> goto CTHEARD
 <4> if SIGN=4
 set SIG2=4
 goto CTHEARD
 elseif SIGN=6,7,8,9
 set SIG2=5
 goto CTHEARD
 elseif SIGN gt 10 and SIGN gt AGE
 goto ERR_SIGT (greater than persons age)
 elseif SIGN gt 10 and SIGN le AGE
 set SIG2=6
 goto CTHEARD
 elseif SIGN=1,2,3,5,10
 goto SIG2
 <R,D> goto SIG2

2018NHIS Spanish Questionnaire -Sample Adult**Cancer Screening**Document Version Date: 12-Jun-19

Question ID: NAF.614_02.000 **Instrument Variable Name:** CT_YR **QuestionnaireFileName:** Sample Adult

Spanish Text:

Universe: Sample adults age 40+ who answered month of last CT colonography or virtual colonoscopy or didn't know month of last CT colonography or virtual colonoscopy

Skip Instructions: <valid year> if CT_YR gt current year or (CT_YR=current year and CT_MT gt current month)
 goto ERR1_ CT_YR (future date)
elseif CT_YR lt DOBY or (CT_YR=DOBY and CT_MT lt DOBM)
 goto ERR2_ CT_YR (prior to birth date)
elseif CT_MT=D
 goto CT2
elseif CT_MT=1-12
 goto COLTOLD
<R,D> goto CT2

Question ID: NAF.615_01.000 **Instrument Variable Name:** CTN **QuestionnaireFileName:** Sample Adult

Spanish Text: 1 of 2

*Read if necessary: ¿Cuándo tuvo su colonografía por TC o colonoscopia virtual MÁS RECIENTE?

*Enter month of last CT colonography or virtual colonoscopy.

*Enter '96' to go to number and time period format.

Universe: Sample adults 40+ who selected number and time period format for most recent CT colonography or virtual colonoscopy from the initial month screen

Skip Instructions: <1-95> [goto CTT]
<R,D> store "R,D" in CTT [goto CT2]

2018NHIS Spanish Questionnaire -Sample Adult
Cancer Screening
Document Version Date: 12-Jun-19

Question ID: NAF.616_02.000 **Instrument Variable Name:** CTT **QuestionnaireFileName:** Sample Adult

Spanish Text: 2 of 2

*Enter time period for time since most recent CT colonography or virtual colonoscopy.

1. Día(s) atrás
2. Semana(s) atrás
3. Mes(es) atrás
4. Año(s) atrás
- Refused
- Don't know

Universe: Sample adults 40+ who answered 1-95 for number part of this 2 part question

Skip Instructions:

```

<1-3> goto COLTOLD
<4> if CTN=4
    set CT2=4
    goto COLTOLD
elseif CTN=6,7,8,9
    set CT2=5
    goto COLTOLD
elseif CTN gt 10 and CTN gt AGE
    goto ERR_CTT (greater than persons age)
elseif CTN gt 10 and CTN le AGE
    set CT2=6
    goto COLTOLD
elseif CTN=1,2,3,5,10
    goto CT2
<R,D> goto CT2

```

Question ID: NAF.617_00.000 **Instrument Variable Name:** CT2 **QuestionnaireFileName:** Sample Adult

Spanish Text: ¿Fue:

*Read answer categories.

1. Un año o menos
2. Más de un año pero no más de 2 años
3. Más de 2 años pero no más de 3 años
4. Más de 3 años pero no más de 5 años
5. Más de 5 años pero no más de 10 años
6. Más de 10 años
- Refused
- Don't know

Universe: Sample adults 40+ who failed to give a complete date in either the month or year format or failed to give a complete date in the number and time period format, or entered years ago in the time period format (excluding those whose last CT colonography or virtual colonoscopy was 6-9 or over 10 years ago)

Skip Instructions:

```

<1-6,R,D> if answer code is grayed out [goto ERR_CT2]
else [goto COLTOLD]

```

2018NHIS Spanish Questionnaire -Sample Adult**Cancer Screening**Document Version Date: 12-Jun-19

Question ID: NAF.619_00.010 **Instrument Variable Name:** COLTOLD **QuestionnaireFileName:** Sample Adult

Spanish Text: Las siguientes preguntas se refieren a otro tipo de prueba para detectar el cáncer de colon – el examen de la sangre en las heces o de sangre oculta, o prueba inmunoquímica fecal o FIT, pruebas para determinar si tiene sangre en las heces o en el movimiento intestinal. Estas pruebas se pueden realizar en casa con una herramienta. Se usa un palillo o un cepillo para obtener una pequeña cantidad de heces en casa y después se envía al médico o al laboratorio.

¿ALGUNA VEZ su médico u otro profesional de la salud le dijo sobre estas pruebas de sangre en las heces que detectan cáncer de colon?

1. Sí
 2. No
- Refused
Don't Know

Universe: Sample adults 40+**Skip Instructions:** <1,2,R,D> [goto HFOBHAD1]

Question ID: NAF.620_00.000 **Instrument Variable Name:** HFOBHAD1 **QuestionnaireFileName:** Sample Adult

Spanish Text: ¿Alguna vez HA TENIDO una prueba de sangre en las heces o prueba FIT, usando un kit de prueba que se puede hacer en el HOGAR?

Read if necessary: No incluya las pruebas realizadas en el consultorio del médico.

1. Sí
 2. No
- Refused
Don't Know

Universe: Sample adults 40+**Skip Instructions:** <1> goto RHFO2_MT
<2,R,D> [goto COLGDHAD]

2018NHIS Spanish Questionnaire -Sample Adult
Cancer Screening
Document Version Date: 12-Jun-19

Question ID: NAF.640_01.000 **Instrument Variable Name:** RHFO2_MT **QuestionnaireFileName:** Sample Adult

Spanish Text: 1 of 2

¿Cuándo se hizo la prueba de sangre en las heces o prueba FIT MÁS RECIENTE usando un kit de pruebas caseras?

*Enter month of last home blood stool or FIT test.

*Enter '96' to go to number and time period format.

1. Enero
2. Febrero
3. Marzo
4. Abril
5. Mayo
6. Junio
7. Julio
8. Agosto
9. Septiembre
10. Octubre
11. Noviembre
12. Diciembre
96. Time period format
- Refused
- Don't Know

Universe: Sample adults 40+ who have ever had a home blood stool or FIT test

Skip Instructions:

```

<1-12,D> goto RHFO2_YR
<R> store "R" in RHFO2_YR and goto RHFO2
<96> store "9996" in RHFO2_YR and goto RHFO2N

```

Question ID: NAF.640_02.000 **Instrument Variable Name:** RHFO2_YR **QuestionnaireFileName:** Sample Adult

Spanish Text:
Universe: Sample adults age 40+ who answered month of last home blood stool or FIT test or didn't know month of last test

Skip Instructions:

```

<valid year> if RHFO2_YR gt current year or (RHFO2_YR=current year and RHFO1_MT gt current month)
    goto ERR1_RHFO2_YR (future date)
elseif RHFO2_YR lt DOBY or (RHFO2_YR=DOBY and RHFO2_MT lt DOBM)
    goto ERR2_RHFO2_YR (prior to birth date)
elseif RHFO2_MT=D
    goto RHFO2
elseif RHFO2_MT=1-12
    goto COLGDHAD
<R,D> goto RHFO2

```

2018NHIS Spanish Questionnaire -Sample Adult
Cancer Screening
Document Version Date: 12-Jun-19

Question ID: NAF.650_01.000 **Instrument Variable Name:** RHFO2N **QuestionnaireFileName:** Sample Adult

Spanish Text: 1 of 2

*Read if necessary: ¿Cuándo se hizo la prueba de sangre en las heces o prueba FIT MÁS RECIENTE usando un kit de pruebas caseras?

*Enter number for time since last home blood stool or FIT test.

*Enter '95' for 95 or more.

1-95
Refused
Don't Know

Universe: Sample adults 40+ who selected number and time period format for most recent home blood stool or FIT test from the initial month screen

Skip Instructions: <1-95> [goto RHFO2T]
<R,D> store "R,D" in RHFO2T [goto RHFO2]

Question ID: NAF.650_02.000 **Instrument Variable Name:** RHFO2T **QuestionnaireFileName:** Sample Adult

Spanish Text: 2 of 2

*Enter time period for time since most recent home blood stool or FIT test.

1. Día(s) atrás
2. Semana(s) atrás
3. Mes(es) atrás
4. Año(s) atrás
Refused
Don't know

Universe: Sample adults 40+ who answered 1-95 for number part of this 2 part question

Skip Instructions: <1-3> [goto COLGDHAD]
<4> if RHFO2N=4
 set RHFO2=4
 goto COLGDHAD
elseif RHFO2N=6,7,8,9
 set RHFO2=5
 goto COLGDHAD
elseif RHFO2N gt 10 and RHFO2N gt AGE
 goto ERR_RHFO2T (greater than persons age)
elseif RHFO2N gt 10 and RHFO2N le AGE
 set RHFO2=6
 [goto COLGDHAD]
elseif RHFO2N=1,2,3,5,10
 goto RHFO2
<R,D> goto RHFO2

2018NHIS Spanish Questionnaire -Sample Adult**Cancer Screening**Document Version Date: 12-Jun-19

Question ID: NAF.662_00.000 **Instrument Variable Name:** COLGDPRT **QuestionnaireFileName:** Sample Adult

Spanish Text: La prueba de heces o prueba FIT que nos ha reportado antes que se había hecho, ¿la hizo como parte de una prueba Cologuard?

1. Sí
2. No
- Refused
- Don't Know

Universe: Sample adults 40+ who have ever had a home blood stool or FIT test and a Cologuard test

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

Question ID: NAF.665_01.000 **Instrument Variable Name:** COLGD_MT **QuestionnaireFileName:** Sample Adult

Spanish Text: 1 of 2

¿Cuándo se hizo la prueba de Cologuard MÁS RECIENTE?

*Enter month of last Cologuard test.

*Enter '96' to go to number and time period format.

1. Enero
2. Febrero
3. Marzo
4. Abril
5. Mayo
6. Junio
7. Julio
8. Agosto
9. Septiembre
10. Octubre
11. Noviembre
12. Diciembre
96. Time period
- Refused
- Don't Know

Universe: Sample adults 40+ who have ever had a Cologuard test

Skip Instructions: <1-12,D> goto COLGD_YR
<R> store "R" in COLGD_YR and goto COLGD2
<96> store "9996" in COLGD_YR and goto COLGDN

2018NHIS Spanish Questionnaire -Sample Adult
Cancer Screening
Document Version Date: 12-Jun-19

Question ID: NAF.665_02.000 **Instrument Variable Name:** COLGD_YR **QuestionnaireFileName:** Sample Adult

Spanish Text: 2 of 2

*Enter year of last Cologuard test.

Universe: Sample adults age 40+ who answered month of last Cologuard test or didn't know month of last test

Skip Instructions: <valid year> if COLGD_YR gt current year or (COLGD_YR =current year and COLGD_MT gt current month
 [goto ERR1_ COLGD_YR (future date)]
 elseif COLGD_YR lt DOBY or (COLGD_YR =DOBY and COLGD_MT lt DOBM) [goto ERR2_ COLGD_YR
 (prior to birth date)]
 elseif COLGD_MT =D [goto COLGD2]

 elseif COLHAD=2 or COL2=6 or COL_YR=(current year - 10) and COL_MT lt current month
 or COL_YR lt (current year - 10) or COLT=4 and COLN ge 11 and COL2=R,D and
 SIGHAD=2 or SIG2=5,6 or SIG_YR=(current year - 5) and SIG_MT lt current month
 or SIG_YR lt (current year - 5) or SIGT=3 and SIGN gt 60 or SIGT=4 and SIGN ge 6
 and SIG2=R,D and CTHEARD=2 or CTHADEV=2 or CT2=5,6 or CT_YR=(current year - 5)
 and CT_MT lt current month or CT_YR lt (current year - 5) or CTT=3 and CTN gt 60 or CTT=4 and CTN ge 6
 and CT2=R,D and HFOBHAD=2 or RHFO2 =2,3,4,5,6 or RHFO2_YR=(current year - 1)
 and RHFO2_MT lt current month or RHFO2_YR lt (current year - 1) or RHFO2T=2 and RHFO2N gt 52 or
 RHFO2T=3
 and RHFO2N gt 12 or RHFO2T=4 and RHFO2N ge 2 and RHFO2=R,D and COLGD_MT lt current month
 or COLGD_YR lt (current year -1)[goto COLPROB1];

 else [goto next section]
 <R,D> [goto COLGD2]

Question ID: NAF.670_01.000 **Instrument Variable Name:** COLGDN **QuestionnaireFileName:** Sample Adult

Spanish Text: 1 of 2

Read if necessary: ¿Cuándo se hizo la prueba de Cologuard MÁS RECIENTE?

*Enter number for time since last Cologuard test.

*Enter '95' for 95 or more.

Allow 1-95, R, D

Universe: Sample adults 40+ who selected number and time period format for most recent home blood stool or FIT test from
 the initial month screen

Skip Instructions: <1-95> [goto COLGDT]
 <R,D> store "R,D" in COLGDT [goto COLGD2]

2018NHIS Spanish Questionnaire -Sample Adult

Cancer Screening

Document Version Date: 12-Jun-19

Question ID: NAF.670_02.000 **Instrument Variable Name:** COLGDT **QuestionnaireFileName:** Sample Adult

Spanish Text: 2 of 2

*Enter time period for time since most recent Cologuard test

1. Día(s) atrás
2. Semana(s) atrás
3. Mes(es) atrás
4. Año(s) atrás
- Refused
- Don't know

Universe: Sample adults 40+ who answered 1-95 for number part of this 2 part question

Skip Instructions:

```

<1-3> if COLGD_YR gt current year or (COLGD_YR =current year and COLGD_MT gt current month)
[goto ERR1_ COLGD_YR (future date)]
elseif COLGD_YR lt DOBY or (COLGD_YR =DOBY and COLGD_MT lt DOBM)[goto ERR2_ COLGD_YR
(prior to birth date)]
elseif COLGD_MT =D [goto COLGD2]
elseif COLHAD=2 or COL2=6 or COL_YR=(current year - 10) and COL_MT lt current month
or COL_YR lt (current year - 10) or COLT=4 and COLN ge 11 and COL2=R,D and
SIGHAD=2 or SIG2=5,6 or SIG_YR=(current year - 5) and SIG_MT lt current month
or SIG_YR lt (current year - 5) or SIGT=3 and SIGN gt 60 or SIGT=4 and SIGN ge 6
and SIG2=R,D and CTHEARD=2 or CTHADEV=2 or CT2=5,6 or CT_YR=(current year - 5)
and CT_MT lt current month or CT_YR lt (current year - 5) or CTT=3 and CTN gt 60 or CTT=4 and CTN ge 6
and CT2=R,D and HFOBHAD=2 or RHFO2 =2,3,4,5,6 or RHFO2_YR=(current year - 1)
and RHFO2_MT lt current month or RHFO2_YR lt (current year - 1) or RHFO2T=2 and RHFO2N gt 52 or
RHFO2T=3
and RHFO2N gt 12 or RHFO2T=4 and RHFO2N ge 2 and RHFO2=R,D and COLGDHAD=2 or COLGD_MT lt
current month or COLGD_YR lt (current year -1) or COLDGDT=3 and COLDGDN gt 12 [goto COLPROB1];
else [goto next section]
<R,D> [goto COLGD2]

<4> if COLGDN =4
    set COLGD2=4
    goto COLPROB1
elseif COLGDN =6,7,8,9
    set COLGD2=5
    goto COLPROB1
elseif COLGDN gt 10 and COLGDN gt AGE
    goto ERR_ COLGDT (greater than persons age)
elseif COLGDN gt 10 and COLGDN le AGE
    set COLGD2=6
    goto COLPROB1
elseif COLGDN =1,2,3,5,10
    goto COLGD2
<R,D> goto COLGD2
  
```

2018NHIS Spanish Questionnaire -Sample Adult

Cancer Screening

Document Version Date: 12-Jun-19

Question ID: NAF.770_00.000 **Instrument Variable Name:** COLKIND1 **QuestionnaireFileName:** Sample Adult

Spanish Text: ¿Cuáles pruebas le recomendó el médico u otro profesional de la salud para detectar el cáncer de colon?
Exámenes posibles incluyen la prueba de sangre en las heces, sangre oculta en las heces o prueba FIT; Cologuard o prueba de FIT DNA (por sus siglas en inglés); sigmoidoscopia; colonoscopia; colonografía por exploración de CT o colonoscopia virtual; u otro.

*Enter all that apply, separate with commas.

1. Prueba de sangre en las heces/prueba de sangre oculta/prueba FIT
 2. Cologuard o prueba de FIT DNA (por sus siglas en inglés)
 3. Sigmoidoscopia
 4. Colonoscopia
 5. Colonografía por CT/colonoscopia virtual
 6. Otra
- Refused
Don't know

Universe: Sample adults 40+ who have had particular tests recommended to look for problems in the colon and who have NOT had a colonoscopy in the past 10 years, sigmoidoscopy in the past 5 years, CT colonography in the past 5 years, or home blood stool/FIT test in the last year and who had another type of test recommended

Skip Instructions: <1-5,R,D> [goto next section]

2018NHIS Spanish Questionnaire -Sample Adult**Adult Functioning and Disability**Document Version Date: 12-Jun-19

Question ID: AFD.090_00.000 **Instrument Variable Name:** VIS_0 **QuestionnaireFileName:** Sample Adult**Spanish Text:** Ahora, voy a hacerle preguntas sobre su capacidad para realizar diferentes actividades, y también sobre su estado de ánimo. Aunque algunas de estas preguntas pueden sonarles parecidas a otras que ya contestó, es importante que se las preguntemos todas.

¿Usa espejuelos/anteojos?

1. Sí
 2. No
- Refused
-
- Don't know

Universe: Sample adults 18+**Skip Instructions:** <1,2,R,D> goto VIS_SS

Question ID: AFD.100_00.000 **Instrument Variable Name:** VIS_SS **QuestionnaireFileName:** Sample Adult**Spanish Text:** Las siguientes preguntas son nuevas y estamos probándolas. Algunas puede que le suenen parecidas a otras que ya ha contestado.

¿Tiene dificultad para ver, aún cuando tiene puestos espejuelos/anteojos? ¿Diría que no tiene ninguna dificultad, alguna dificultad, mucha dificultad, o usted no puede hacerlo?

- 1 Ninguna dificultad
 - 2 Alguna dificultad
 - 3 Mucha dificultad
 - 4 No puede hacerlo
- Refused
-
- Don't know

Universe: Sample adults 18+**Skip Instructions:** <1,2,R,D> [goto HEAR_1]

Question ID: AFD.140_00.000 **Instrument Variable Name:** HEAR_1 **QuestionnaireFileName:** Sample Adult**Spanish Text:** ¿Utiliza un aparato auditivo/audifono?

1. Sí
 2. No
- Refused
-
- Don't know

Universe: Sample adults 18+**Skip Instructions:** <1> [goto HEAR_2]
<2,R,D> [goto HEAR_SS]

2018NHIS Spanish Questionnaire -Sample Adult**Adult Functioning and Disability**Document Version Date: 12-Jun-19

Question ID: AFD.170_00.001 **Instrument Variable Name:** HEAR_4 **QuestionnaireFileName:** Sample Adult

Spanish Text: ¿Tiene dificultad para oír lo que se habla en una conversación con otra persona en una habitación con más ruido {fill:aún cuando usa su(s) aparato(s) auditivo(s)/audifono(s)}? ¿Diría que tiene ninguna dificultad, alguna dificultad, mucha dificultad, o no puede hacerlo?

1. Ninguna dificultad
 2. Alguna dificultad
 3. Mucha dificultad
 4. No puede hacerlo
- Refused
Don't know

Universe: Sample adults 18+ who have no difficulty, some difficulty, a lot of difficulty, or refuse or don't know if they have difficulty hearing what is said in a conversation with one other person in a quiet room (even when wearing their hearing aid(s))

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

Question ID: AFD.180_00.000 **Instrument Variable Name:** MOB_SS **QuestionnaireFileName:** Sample Adult

Spanish Text: ¿Tiene alguna dificultad para caminar o subir escalones? ¿Diría que tiene ninguna dificultad, alguna dificultad, mucha dificultad, o no puede hacerlo?

1. Ninguna dificultad
 2. Alguna dificultad
 3. Mucha dificultad
 4. No puede hacerlo
- Refused
Don't know

Universe: Sample adults 18+

Skip Instructions: <1-4,R,D> goto MOB_2

Question ID: AFD.200_00.000 **Instrument Variable Name:** MOB_2 **QuestionnaireFileName:** Sample Adult

Spanish Text: ¿Utiliza algún equipo o recibe ayuda para moverse de un lugar a otro?

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+

Skip Instructions: <1>[goto MOB_3A]
<2,R,D>[goto MOB_4]

2018NHIS Spanish Questionnaire -Sample Adult**Adult Functioning and Disability**Document Version Date: 12-Jun-19

Question ID: AFD.200_00.001 **Instrument Variable Name:** MOB_3A **QuestionnaireFileName:** Sample Adult

Spanish Text: ¿Utiliza cualquiera de los siguientes...

Bastón?

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+ who use equipment or receive help for getting around

Skip Instructions: <1,2,R,D> goto MOB_3B

Question ID: AFD.200_00.002 **Instrument Variable Name:** MOB_3B **QuestionnaireFileName:** Sample Adult

Spanish Text: *Read if necessary.

¿Utiliza cualquiera de los siguientes...

Andador?

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+ who use equipment or receive help for getting around

Skip Instructions: <1,2,R,D> goto MOB_3C

Question ID: AFD.200_00.003 **Instrument Variable Name:** MOB_3C **QuestionnaireFileName:** Sample Adult

Spanish Text: *Read if necessary.

¿Utiliza cualquiera de los siguientes...

Muletas?

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+ who use equipment or receive help for getting around

Skip Instructions: <1,2,R,D> goto MOB_3D

2018NHIS Spanish Questionnaire -Sample Adult**Adult Functioning and Disability**Document Version Date: 12-Jun-19

Question ID: AFD.200_00.004 **Instrument Variable Name:** MOB_3D **QuestionnaireFileName:** Sample Adult

Spanish Text: *Read if necessary.

¿Utiliza cualquiera de los siguientes...

Silla de ruedas o aparato de movilidad?

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+ who use equipment or receive help for getting around

Skip Instructions: <1,2,R,D> goto MOB_3E

Question ID: AFD.200_00.005 **Instrument Variable Name:** MOB_3E **QuestionnaireFileName:** Sample Adult

Spanish Text: *Read if necessary.

¿Utiliza cualquiera de los siguientes...

Prótesis (pierna/pie)?

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+ who use equipment or receive help for getting around

Skip Instructions: <1,2,R,D> goto MOB_3F

Question ID: AFD.200_00.006 **Instrument Variable Name:** MOB_3F **QuestionnaireFileName:** Sample Adult

Spanish Text: *Read if necessary.

¿Utiliza cualquiera de los siguientes...

La ayuda de otra persona?

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+ who use equipment or receive help for getting around

Skip Instructions: <1,2,R,D> goto MOB_3G

2018NHIS Spanish Questionnaire -Sample Adult
Adult Functioning and Disability

 Document Version Date: 12-Jun-19

Question ID: AFD.200_00.007 **Instrument Variable Name:** MOB_3G **QuestionnaireFileName:** Sample Adult

Spanish Text: *Read if necessary.

¿Utiliza cualquiera de los siguientes...

Algún otro tipo de equipo o de ayuda?

1. Sí
2. No
- Refused
- Don't know

Universe: Sample adults 18+ who use equipment or receive help for getting around

Skip Instructions: <1,2,R,D> if MOB_3D=1, [goto COM_SS];
 else if MOB_3D=2,R,D [goto MOB_4]

Question ID: AFD.210_00.000 **Instrument Variable Name:** MOB_4 **QuestionnaireFileName:** Sample Adult

Spanish Text: ¿Tiene dificultad para caminar 100 yardas sobre terreno plano, esa distancia equivale a un campo de fútbol norteamericano o una cuadra de ciudad {fill: sin usar su método de ayuda}? ¿Diría que tiene ninguna dificultad, alguna dificultad, mucha dificultad, o no puede hacerlo?

1. Ninguna dificultad
2. Alguna dificultad
3. Mucha dificultad
4. No puede hacerlo
- Refused
- Don't know

Universe: Sample adults 18+ who do not use a wheelchair or scooter

Skip Instructions: <1-3,R,D>[goto MOB_5]
 <4>[goto MOB_6]

Question ID: AFD.220_00.000 **Instrument Variable Name:** MOB_5 **QuestionnaireFileName:** Sample Adult

Spanish Text: ¿Tiene dificultad para caminar un tercio de milla sobre terreno plano, esa distancia equivale a cinco campos de fútbol norteamericanos o cinco cuerdas de ciudad {fill: sin usar su método de ayuda}? ¿Diría que tiene ninguna dificultad, alguna dificultad, mucha dificultad, o no puede hacerlo?

1. Ninguna dificultad
2. Alguna dificultad
3. Mucha dificultad
4. No puede hacerlo
- Refused
- Don't know

Universe: Sample adults 18+ who do not use a wheelchair or scooter, and have no difficulty, some difficulty, a lot of difficulty, or refused or don't know if they have difficulty walking 100 yards on level ground (without the use of their aid)

Skip Instructions: <1-4,R,D> [goto MOB_6]

2018NHIS Spanish Questionnaire -Sample Adult
Adult Functioning and Disability

 Document Version Date: 12-Jun-19

Question ID: AFD.230_00.000 **Instrument Variable Name:** MOB_6 **QuestionnaireFileName:** Sample Adult

Spanish Text: ¿Tiene dificultad para subir o bajar 12 escalones? ¿Diría que tiene ninguna dificultad, alguna dificultad, mucha dificultad, o no puede hacerlo?

1. Ninguna dificultad
 2. Alguna dificultad
 3. Mucha dificultad
 4. No puede hacerlo
- Refused
-
- Don't know

Universe: Sample adults 18+ who did not use any equipment or receive help with getting around or did not use a wheelchair or scooter

Skip Instructions: <1-4,R,D> if MOB_2 IN (2,R,D) [goto COM_SS];
 else if MOB_2=1 [goto MOB_7]

Question ID: AFD.240_00.000 **Instrument Variable Name:** MOB_7 **QuestionnaireFileName:** Sample Adult

Spanish Text: ¿Tiene dificultad para caminar 100 yardas sobre terreno plano, esa distancia equivale a un campo de fútbol norteamericano o una cuadra de ciudad cuando usa su ayuda para caminar? ¿Diría que tiene ninguna dificultad, alguna dificultad, mucha dificultad, o no puede hacerlo?

1. Ninguna dificultad
 2. Alguna dificultad
 3. Mucha dificultad
 4. No puede hacerlo
- Refused
-
- Don't know

Universe: Sample adults 18+ who use equipment or receive help for getting around but do not use a wheelchair or scooter

Skip Instructions: <1-3,R,D>[goto MOB_8]
 <4>[goto COM_SS]

Question ID: AFD.250_00.000 **Instrument Variable Name:** MOB_8 **QuestionnaireFileName:** Sample Adult

Spanish Text: ¿Tiene dificultad para caminar un tercio de milla, esa distancia equivale a cinco campos de fútbol norteamericanos, cuando usa su ayuda para caminar? ¿Diría que tiene ninguna dificultad, alguna dificultad, mucha dificultad, o no puede hacerlo?

1. Ninguna dificultad
 2. Alguna dificultad
 3. Mucha dificultad
 4. No puede hacerlo
- Refused
-
- Don't know

Universe: Sample adults 18+ who use equipment or receive help for getting around but do not use a wheelchair or scooter, and who have no difficulty, some difficulty, a lot of difficulty, or refused or don't know if they have difficulty walking 100 yards on level ground, when using their aid

Skip Instructions: <1-4,R,D> goto COM_SS

2018NHIS Spanish Questionnaire -Sample Adult**Adult Functioning and Disability**Document Version Date: 12-Jun-19

Question ID: AFD.310_00.000 **Instrument Variable Name:** COG_1 **QuestionnaireFileName:** Sample Adult

Spanish Text: ¿Tiene dificultad para recordar las cosas, para concentrarse, o ambos?

- 1 Dificultad solo para recordar
- 2 Dificultad solo para concentrarse
- 3 Dificultad para recordar y para concentrarse
- Refused
- Don't know

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

Skip Instructions: <1,3,R,D>[goto COG_2]
<2>[goto COGCAUSE]

Question ID: AFD.320_00.000 **Instrument Variable Name:** COG_2 **QuestionnaireFileName:** Sample Adult

Spanish Text: ¿Con qué frecuencia tiene dificultad para recordar las cosas? ¿Diría que algunas veces, frecuentemente, o siempre?

- 1. Algunas veces
- 2. Frecuentemente
- 3. Siempre
- Refused
- Don't know

Universe: Sample adults 18+ who had some difficulty, a lot of difficulty, or were unable to remember or concentrate, or refused to answer or didn't know if they had difficulty remembering or concentrating AND they had difficulty remembering only, difficulty both remembering and concentrating, or refused to answer or didn't know if they had difficulty remembering, concentrating, or both

Skip Instructions: <1-3,R,D> goto COG_3

Question ID: AFD.330_00.000 **Instrument Variable Name:** COG_3 **QuestionnaireFileName:** Sample Adult

Spanish Text: ¿Tiene dificultad para recordar algunas cosas, muchas cosas, o casi todo?

- 1. Algunas cosas
- 2. Muchas cosas
- 3. Casi todo
- Refused
- Don't know

Universe: Sample adults 18+ who had some difficulty, a lot of difficulty, or were unable to remember or concentrate, or refused to answer or didn't know if they had difficulty remembering or concentrating AND they had difficulty remembering only, difficulty both remembering and concentrating, or refused to answer or didn't know if they had difficulty remembering, concentrating, or both

Skip Instructions: <1-3,R,D> [goto COGCAUSE]

2018NHIS Spanish Questionnaire -Sample Adult
Adult Functioning and Disability
Document Version Date: 12-Jun-19

Question ID: AFD.340_00.000 **Instrument Variable Name:** COGCAUSE **QuestionnaireFileName:** Sample Adult

Spanish Text: ¿Cuál es la razón PRINCIPAL por la que usted tiene dificultad [fill1: recordando/concentrándose/ambas cosas recordando y concentrándose]?

1. Discapacidad intelectual (anteriormente conocida como retraso mental)
 2. Discapacidad de desarrollo (como parálisis cerebral o autismo)
 3. Demencia o enfermedad de Alzheimer
 4. Discapacidad de aprendizaje o Trastorno por Déficit de Atención e Hiperactividad (ADHD, por sus siglas en inglés)
 5. Nivel de educación
 6. Enfermedad mental (como depresión, ansiedad, trastorno de estrés postraumático, problema emocional)
 7. Lesión cerebral traumática o accidente cerebrovascular
 8. Cambios relacionados con la edad
 9. Condición de salud crónica (como diabetes, presión arterial alta, enfermedades del corazón, cáncer, esclerosis múltiple, enfermedad de Parkinson, epilepsia)
 10. Drogas o medicamentos
 11. Otros (especificar)
- Refused
Don't know

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

Skip Instructions: <1-10,R,D> [goto UB_SS];
 <11> [goto COGSPEC]

Question ID: AFD.350_00.000 **Instrument Variable Name:** COGSPEC **QuestionnaireFileName:** Sample Adult

Spanish Text:
Universe: Sample adults 18+ whose cause of difficulty with remembering, concentrating, or both was other

Skip Instructions: <allow 60,R,D> [goto UB_SS]

Question ID: AFD.360_00.000 **Instrument Variable Name:** UB_SS **QuestionnaireFileName:** Sample Adult

Spanish Text: ¿Tiene dificultad para el cuidado propio, tal como lavarse todo el cuerpo o vestirse? ¿Diría que tiene ninguna dificultad, alguna dificultad, mucha dificultad, o no puede hacerlo?

1. Ninguna dificultad
 2. Alguna dificultad
 3. Mucha dificultad
 4. No puede hacerlo
- Refused
Don't know

Universe: Sample adults 18+

Skip Instructions: <1-4,R,D> goto UB_1

2018NHIS Spanish Questionnaire -Sample Adult**Adult Functioning and Disability**Document Version Date: 12-Jun-19

Question ID: AFD.370_00.000 **Instrument Variable Name:** UB_1 **QuestionnaireFileName:** Sample Adult

Spanish Text: ¿Tiene dificultad para subir un pomo de agua o de soda de 2 litros desde el nivel de la cintura hasta el nivel de los ojos? Diría que tiene ninguna dificultad, alguna dificultad, mucha dificultad, o no puede hacerlo?

1. Ninguna dificultad
 2. Alguna dificultad
 3. Mucha dificultad
 4. No puede hacerlo
- Refused
Don't know

Universe: Sample adults 18+

Skip Instructions: <1-4,R,D> goto UB_2

Question ID: AFD.380_00.000 **Instrument Variable Name:** UB_2 **QuestionnaireFileName:** Sample Adult

Spanish Text: ¿Tiene dificultad para utilizar las manos o los dedos, tal como para recoger objetos pequeños, por ejemplo, un botón o lápiz, o para abrir o cerrar contenedores o botellas? ¿Diría que tiene ninguna dificultad, alguna dificultad, mucha dificultad, o no puede hacerlo?

1. Ninguna dificultad
 2. Alguna dificultad
 3. Mucha dificultad
 4. No puede hacerlo
- Refused
Don't know

Universe: Sample adults 18+

Skip Instructions: <1-4,R,D> goto ANX_1

Question ID: AFD.410_00.000 **Instrument Variable Name:** ANX_1 **QuestionnaireFileName:** Sample Adult

Spanish Text: ¿Con qué frecuencia se siente preocupado(a), nervioso(a) o ansioso(a)? ¿Diría que diariamente, semanalmente, mensualmente, unas cuantas veces al año, o nunca?

1. Diariamente
 2. Semanalmente
 3. Mensualmente
 4. Unas cuantas veces al año
 5. Nunca
- Refused
Don't know

Universe: Sample adults 18+

Skip Instructions: <1-5,R,D> goto ANX_2

2018NHIS Spanish Questionnaire -Sample Adult**Adult Functioning and Disability**Document Version Date: 12-Jun-19

Question ID: AFD.420_00.000 **Instrument Variable Name:** ANX_2 **QuestionnaireFileName:** Sample Adult

Spanish Text: ¿Toma medicamentos para estos sentimientos?

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+

Skip Instructions: <1,R,D> [goto ANX_3]
 <2> if ANX_1=5 [goto DEP_1];
 else [goto ANX_3]

Question ID: AFD.430_00.000 **Instrument Variable Name:** ANX_3 **QuestionnaireFileName:** Sample Adult

Spanish Text: Pensando en la última vez que sintió preocupado(a), nervioso(a) o ansioso(a), ¿cómo describiría el nivel de estos sentimientos? ¿Diría que un poco, mucho, o algo en el medio?

1. Un poco
 2. Mucho
 3. Algo entre un poco y mucho
- Refused
Don't know

Universe: Sample adults 18+ who feel worried, anxious, or nervous daily, weekly, monthly, a few times a year or don't know or refused how often OR who do take medication for these feelings or don't know or refused if they take medication for these feelings

Skip Instructions: <1-3,R,D> goto DEP_1

Question ID: AFD.450_00.000 **Instrument Variable Name:** DEP_1 **QuestionnaireFileName:** Sample Adult

Spanish Text: ¿Con qué frecuencia se siente deprimido(a)? ¿Diría que diariamente, semanalmente, mensualmente, unas cuantas veces al año, o nunca?

1. Diariamente
 2. Semanalmente
 3. Mensualmente
 4. Unas cuantas veces al año
 5. Nunca
- Refused

Universe: Sample adults 18+

Skip Instructions: <1-5,R,D> goto DEP_2

2018NHIS Spanish Questionnaire -Sample Adult**Adult Functioning and Disability**Document Version Date: 12-Jun-19

Question ID: AFD.460_00.000 **Instrument Variable Name:** DEP_2 **QuestionnaireFileName:** Sample Adult

Spanish Text: ¿Toma medicamentos para la depresión?

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+

Skip Instructions: <1,R,D> [goto DEP_3]
 <2> if DEP_1=5 [goto PAIN_2];
 else [goto DEP_3]

Question ID: AFD.470_00.000 **Instrument Variable Name:** DEP_3 **QuestionnaireFileName:** Sample Adult

Spanish Text: Pensando en la última vez que se sintió deprimido(a), ¿qué tanto deprimido(a) se sintió ¿Diría que un poco, mucho, o algo en el medio?

1. Un poco
 2. Mucho
 3. Algo entre un poco y mucho
- Refused
Don't know

Universe: Sample adults 18+ who feel depressed daily, weekly, monthly, a few times a year or refused or don't know how often they feel depressed OR who do take medication or refused or don't know if they take medication for depression.

Skip Instructions: <1-3,R,D> [goto PAIN_2];

Question ID: AFD.500_00.000 **Instrument Variable Name:** PAIN_2 **QuestionnaireFileName:** Sample Adult

Spanish Text: En los últimos 3 meses, ¿con qué frecuencia ha tenido dolor? ¿Diría que nunca, algunos días, la mayoría de los días, o todos los días?

1. Nunca
 2. Algunos días
 3. La mayoría de los días
 4. Todos los días
- Refused
Don't know

Universe: Sample adults 18+

Skip Instructions: <1> [goto TIRED_1]
 <2,3,4,R,D> [goto PAIN_4]

2018NHIS Spanish Questionnaire -Sample Adult**Adult Functioning and Disability**Document Version Date: 12-Jun-19

Question ID: AFD.520_00.000 **Instrument Variable Name:** PAIN_4 **QuestionnaireFileName:** Sample Adult**Spanish Text:** Pensando en la última vez que usted tuvo dolor, ¿cuánto tiempo duró el dolor? ¿Diría que parte del día, la mayoría del día, o todo el día.

1. Parte del día
 2. La mayoría del día
 3. Todo el día
- Refused
Don't know

Universe: Sample adults 18+ who have had pain some days, most days, every day, or refused or don't know how often they have had pain in the past 3 months**Skip Instructions:** <1-3,R,D> goto TIRED_1

Question ID: AFD.540_00.000 **Instrument Variable Name:** TIRED_1 **QuestionnaireFileName:** Sample Adult**Spanish Text:** En los últimos 3 meses, ¿con qué frecuencia se sintió muy cansado(a) o agotado(a)? ¿Diría que nunca, algunos días, la mayoría de los días, o todos los días?

1. Nunca
 2. Algunos días
 3. La mayoría de los días
 4. Todos los días
- Refused
Don't know

Universe: Sample adults 18+**Skip Instructions:** <1>[goto next section]
<2-4,R,D>[goto TIRED_2]

Question ID: AFD.550_00.000 **Instrument Variable Name:** TIRED_2 **QuestionnaireFileName:** Sample Adult**Spanish Text:** Pensando en la última vez que se sintió muy cansado(a) o agotado(a), ¿cuánto tiempo duró? ¿Diría que parte del día, la mayoría del día, o todo el día?

1. Parte del día
 2. La mayoría del día
 3. Todo el día
- Refused
Don't know

Universe: Sample adults 18+ who felt very tired or exhausted some days, most days, every day, or refused or don't know how often they felt very tired or exhausted in the past 3 months**Skip Instructions:** <1-3,R,D> goto TIRED_3

2018NHIS Spanish Questionnaire -Sample Adult

Adult Functioning and Disability

Document Version Date: 12-Jun-19

Question ID: AFD.560_00.000 **Instrument Variable Name:** TIRED_3 **QuestionnaireFileName:** Sample Adult

Spanish Text: Pensando de la última vez que se sintió así, ¿cómo describiría el nivel de cansancio? ¿Diría que un poco, mucho, o algo entre un poco y mucho?

- 1. Un poco
- 2. Mucho
- 3. Algo entre un poco y mucho
- Refused
- Don't know

Universe: Sample adults 18+ who felt very tired or exhausted some days, most days, every day, or refused or don't know how often they felt very tired or exhausted in the past 3 months

Skip Instructions: <1-3,R,D> goto next section

2018NHIS Spanish Questionnaire -Sample Adult**Adult Internet and Email Usage**Document Version Date: 12-Jun-19

Question ID: AWB.010_00.000 **Instrument Variable Name:** AWEBUSE **QuestionnaireFileName:** Sample Adult

Spanish Text: Las preguntas que siguen tratan del uso de Internet y email.

¿Utiliza usted el Internet?

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+

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

Question ID: AWB.020_01.000 **Instrument Variable Name:** AWEBOFNO **QuestionnaireFileName:** Sample Adult

Spanish Text: 1 of 2

¿Con qué frecuencia usa el Internet?

*Read if necessary: ¿Cuántas veces por día, por semana, por mes, o por año utiliza usted el Internet?

*Enter number.

Allow 1-995,R,D

Universe: Sample adults 18+ who use the Internet

Skip Instructions: <1-995> [goto AWEBOFTP]
<R,D> [goto AWEBEML]<1-995> [goto AWEBOFTP]
<R,D> [goto AWEBEML]

Question ID: AWB.020_02.000 **Instrument Variable Name:** AWEBOFTP **QuestionnaireFileName:** Sample Adult

Spanish Text: 2 of 2

*Enter time period for how often Internet is used.

1. Por día
 2. Por semana
 3. Por mes
 4. Por año
- Refused
Don't know

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

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

2018NHIS Spanish Questionnaire -Sample Adult**Adult Internet and Email Usage**Document Version Date: 12-Jun-19

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

Spanish Text: ¿Envía o recibe usted emails?

1. Sí
 2. No
- Refused
Don't know

Universe: Sample adults 18+

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

Question ID: AWB.040_00.000 **Instrument Variable Name:** AWEBEMAD **QuestionnaireFileName:** Sample Adult

Spanish Text: Es posible que queramos contactarle para obtener más informacion sobre la salud.

¿Nos permite tomar su dirección de email?

*Enter email address.

*Enter 'N' for none.

<allow 75,N,R,D>

Universe: Sample adults 18+ who send or receive email

Skip Instructions: <address> [goto AWBEMNO] <N,R,D> [goto next section]

Question ID: AWB.050_01.000 **Instrument Variable Name:** AWEBMNO **QuestionnaireFileName:** Sample Adult

Spanish Text: 1 of 2

¿Con qué frecuencia revisa usted esta cuenta de email?

*Read if necessary: ¿Cuántas veces por día, por semana, por mes, o por año revisa usted esta cuenta de email?

*Enter number.

Allow 1-995,R,D

Universe: Sample adults 18+ who gave an email address

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

2018NHIS Spanish Questionnaire -Sample Adult

Adult Internet and Email Usage

Document Version Date: 12-Jun-19

Question ID: AWB.050_02.000 **Instrument Variable Name:** AWEBMTP **QuestionnaireFileName:** Sample Adult

Spanish Text: 2 of 2

*Enter time period for how often email is checked.

- 1. Por día
- 2. Por semana
- 3. Por mes
- 4. Por año
- Refused
- Don't know

Universe: Sample adults 18+ who gave an email address and gave a valid value for the number portion of this question

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