

37a. Does anyone in the family now use any of the following special aids -			Table SA			
			Person No. (a)	Type of aid (b)	If 1-6 in (b), ASK: Does he use one or two ____ (at a time)? (c)	If 3-9 in (b) ASK: For what condition does he need this ____? (item C) (d)
	Yes	No				
1. An artificial arm?					1 <input type="checkbox"/>	
2. An artificial leg?					2 <input type="checkbox"/>	
3. A brace of any kind?					Other _____	
4. Crutches?						
5. A cane or walking stick?						
6. Special shoes?						
7. A wheel chair?					1 <input type="checkbox"/>	
8. A walker?					2 <input type="checkbox"/>	
9. Any other kind of aid for getting around?					Other _____	
If "Yes," specify: ↗					1 <input type="checkbox"/>	
b. Who is this? Enter in Table SA _____					2 <input type="checkbox"/>	
c. Anyone else?					Other _____	
R	For persons 19 years old or over, show who responded for (or was present during the asking of) Q.'s 5-37. If persons responded for self, show whether entirely or partly. For persons under 19 show who responded for them. If eligible respondent is "at home" but did not respond for self, enter the reason in a footnote.					1 <input type="checkbox"/> Responded for self-entirely 2 <input type="checkbox"/> Responded for self-partly Person ____ was resp.
FOOTNOTES						

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