Read to respondent(s):

These next questions are about health care received during the 2 weeks outlined in red on that calendar.

<table>
<thead>
<tr>
<th>E1</th>
<th>Refer to age.</th>
<th>E1</th>
<th>Under 14 (Is)</th>
<th>4 and over (Is)</th>
</tr>
</thead>
</table>

1a. During these 2 weeks, how many times did --- see or talk to a medical doctor? (Include all types of doctors, such as dermatologists, psychiatrists, and ophthalmologists, as well as general practitioners and osteopaths.) (Do not count times while an overnight patient in a hospital.)

1b. During these 2 weeks, how many times did anyone see or talk to a medical doctor about ---? (Do not count times while an overnight patient in a hospital.)

---

2a. (Besides the time(s) you just told me about) During these 2 weeks, did anyone in the family receive health care at home or go to a doctor’s office, clinic, hospital or some other place? Include care from a nurse or anyone working with or for a medical doctor. Do not count times while an overnight patient in a hospital.

<table>
<thead>
<tr>
<th>2a</th>
<th>Who received this care? Mark “DR Visit” box in person’s column.</th>
</tr>
</thead>
</table>

2b. DR Visit

2c. Anyone else?

<table>
<thead>
<tr>
<th>2c</th>
<th>Yes (Reask 2b and c)</th>
<th>No</th>
</tr>
</thead>
</table>

Ask for each person with “DR Visit” in 2b:

2d. How many times did --- receive this care during that period?

---

3a. (Besides the time(s) you already told me about) During these 2 weeks, did anyone in the family get any medical advice, prescriptions or test results over the PHONE from a doctor, nurse, or anyone working with or for a medical doctor?

<table>
<thead>
<tr>
<th>3a</th>
<th>Yes</th>
<th>No (E2)</th>
</tr>
</thead>
</table>

3b. Phone call

3c. Was there any calls about anyone else?

<table>
<thead>
<tr>
<th>3c</th>
<th>Yes (Reask 3b and c)</th>
<th>No</th>
</tr>
</thead>
</table>

Ask for each person with “Phone call” in 3b:

3d. How many telephonic calls were made about ---?

---

E2 Add numbers in 1, 2d, and 3d for each person. Record total number of visits and calls in “2-WK, DV” box in item Cl.

FOOTNOTES
Refer to Cl. "2-WK. DV" box.

F1. Refer to age.

1a. On what (precise) date(s) during those 2 weeks did — see or talk to a medical doctor, nurse, or doctor's assistant?

1b. On what (other) date(s) during those 2 weeks did anyone else see or talk to a medical doctor, nurse, or doctor's assistant?

1c. Were there any other visits or calls for — during that period? Make necessary correction to 2-WK. DV box in Cl.

2. Where did — receive health care on (date in 1)? At a doctor's office, clinic, hospital, some other place, or was this a telephone call?

2a. If doctor's office: Was this office in a hospital?

2b. If clinic: Was it an outpatient clinic or the emergency room?

2c. If hospital: Was this hospital outpatient clinic, a company clinic, a public health clinic, or some other kind of clinic?

2d. If hospital: Was this lab in a hospital?

3. Did — actually talk to a medical doctor?

3a. Did anyone actually talk to a medical doctor about —?

3b. What type of medical person or assistant was talked to?

3c. Does the entry in 3b work with at least ONE doctor or MORE than one doctor?

3d. For this visit/call which kind of doctor was the entry in 3b working with at first — a general practitioner or a specialist?

3e. Is that doctor a general practitioner or a specialist?

3f. What kind of specialist?

4. What condition did — see or talk to the doctor about — during this visit?

4a. For what condition did — see or talk to the doctor about — during this visit?

4b. For what condition did anyone else see or talk to the doctor about — during this visit?

4c. Was a condition found as a result of the test/examination?

4d. Was this test/examination because of a specific condition — yes or no?

4e. During the past 2 weeks was — sick because of — pregnancy?

4f. What was the matter?

5. Did — have any kind of surgery or operation during this visit, including bone setting or stitches?

5a. During this visit/call was the doctor talking to anyone about any other condition?

5b. What was the name of the surgery or operation? If name of operation not known, describe what was done.

5c. Was there any other surgery or operation during this visit?