1. Refer to C1, "HOSP." box.

2. You said earlier that you were a patient in the hospital since [3-month hospital date] a year ago. On what date did you enter the hospital (the last time before that)?
   Record each entry date in a separate Hospital Stay column.

3. How many nights were you in the hospital?

4. For what condition did you enter the hospital?
   - [ ] Normal delivery
   - [ ] Normal at birth
   - [ ] No condition
   - [ ] Condition

5a. Did you have any kind of surgery or operation during this stay in the hospital, including bone settings and stitches?
   If name of operation not known, describe what was done.

5b. What was the name of the surgery or operation?

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

6. What is the name and address of this hospital?

FOOTNOTES

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HOSPITAL STAY 1

1. PERSON NUMBER

2. Month

3. Date

4. Year

5. Night

6. Notes

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