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

QuestionText:  * The sample adult person is [fill: ALIAS of Sample Adult]. The next questions must be answered by this person. Probe as necessary to determine the availability of [fill: ALIAS of Sample Adult].

  * If refused enter CTRL-R

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

SkipInstructions:  <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.RCI_BEGIN procedure
else
goto back.OUTCOMEB1 procedure
endif

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

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

  Is a family member or caregiver that is knowledgeable about [fill: ALIAS of Sample Adult]'s health available?

  1  Yes
  2  No

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

SkipInstructions:  <1> goto PROX2
<2> goto PROX3
2012 NHIS Questionnaire - Sample Adult
Adult Identification

Document Version Date: 23-May-13

---

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

**QuestionText:**
* Ask if necessary.

What is this person's relationship to [fill: ALIAS of Sample Adult]?

1. Relative who lives in household
2. Relative who doesn't live in household
3. Other caregiver
4. Other
7. Refused
9. Don't know

**UniverseText:** Knowledgeable proxy is available.

**SkipInstructions:** <1-4> goto AIDVERF_S

---

**Question ID:** AID.020_00.000  **Instrument Variable Name:** PROX3  **QuestionnaireFileName:** Sample Adult

**QuestionText:**
* Ask if necessary.

Can a callback with someone knowledgeable about [fill: ALIAS of Sample Adult]'s health be arranged?

1. Yes
2. No

**UniverseText:** Knowledgeable proxy is not available.

**SkipInstructions:** <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
* Please verify the following information about the sample adult before proceeding:

I have recorded your sex as [fill: Sex of Sample Adult]. Is this correct?

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

1  Yes
2  No

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

**SkipInstructions:** <1> goto AIDVERF_A  
<2> goto AIDSEX

---

* Ask if appropriate; otherwise, enter your best guess of the person's sex.

Are you Male or Female?

1  Male
2  Female

**UniverseText:** Respondent said his/her sex is not correct.

**SkipInstructions:** <1,2> store AIDSEX in SEX  
goto ERR_AIDSEX  
reset AIDVERF_S  
goto AIDVERF_S

**Hard Edit:** ERR_AIDSEX

*The gender will now be changed to [fill: AIDSEX].

goto AIDVERF_S (as the default goto)
**2012 NHIS Questionnaire - Sample Adult**

**Adult Identification**

Document Version Date: 23-May-13

---

**Question ID:** AID.045_00.000  **Instrument Variable Name:** AIDVERF_A  **QuestionnaireFileName:** Sample Adult

**Question Text:**

* Please verify the following information about the sample adult before proceeding:

I have recorded your age as [fill: Age of Sample Adult] old. Is this correct?

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

1  Yes
2  No

**Universe Text:** Sample Adult said his/her sex is correct.

**Skip Instructions:**

<1> goto AIDVERF_D
<2> goto AIDAGE

---

**Question ID:** AID.050_00.000  **Instrument Variable Name:** AIDAGE  **QuestionnaireFileName:** Sample Adult

**Question Text:**

How old are you?

000-120  Age in years
997  Refused
999  Don't know

**Universe Text:** Respondent said his/her age is not correct

**Skip Instructions:**

<0-120, Refused, Don't know>
if AIDAGE = 'Refused' or AIDAGE = 'Don't know' or AIDAGE = AGE
reset AIDVERF_A
goto ERR_AIDAGE
else
store AIDAGE in AGE
goto AIDDODB_M

**Soft Edit:**

ERR_AIDAGE

*Age of [fill1: ALIAS of Sample Adult] remains [fill2: Age of Sample Adult] years old.

goto AIDVERF_A (whether suppressed or not)
* Please verify the following information about the sample adult before proceeding:

I have recorded your birthday as [fill: Birthday of Sample Adult]. Is this correct?

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

1 Yes
2 No

Sample Adult said his/her age is correct.

Skip Instructions:

<1> if AGE of Sample Adult le '17
goto NO_MORE
else
goto beginning of adult.asd
endif

<2> goto AIDDOB_M

What is your birthday?

*Enter month of birth.

01 January
02 February
03 March
04 April
05 May
06 June
07 July
08 August
09 September
10 October
11 November
12 December
97 Refused
99 Don't know

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
2 of 3

*Enter day of birth.

01-31 Day of the month
97 Refused
99 Don't know

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

<01-31,Refused,Don't know> goto AIDDOB_Y
If days not valid, goto ERR_AIDDOB_D

* [fill1: AIDDOB_D] is not a valid day for [fill2: AIDDOB_M].
* Please correct.
Adult Identification

Document Version Date: 23-May-13

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

QuestionText:

3 of 3

*Enter year of birth.

1880-2020 Year of birth
UniverseText: Respondent said his/her date of birth is not correct or his/her age is not correct

SkipInstructions: <1880-2020, Refused, Don't know> if AIDVERF_A = '2' (No) then reset AIDVERF_A to empty
go to AIDVERF_A
elseif AIDVERF_D = '2' (No) then reset AIDVERF_D to empty
go to 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)
go to ERR1_AIDDOB_Y
endif

(if birth month = '02' and birth day = '29' and this is not a leap year)
go to ERR2_AIDDOB_Y
endif

(if AIDDOB_M = 'Ref' or 'DK') or (if AIDDOB_D = 'Ref' or 'DK') or (if AIDDOB_Y = 'Ref' or 'DK')
go to 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
go to AIDVERF_A
elseif AIDVERF_D = '2' (No) then reset AIDVERF_D to empty
go to 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.
go to ERR4_AIDDOB_Y
endif

Hard Edit: ERR1_AIDDOB_Y
*Future date invalid: [fill1: <AIDDOB_M> <AIDDOB_D>, <AIDDOB_Y>]
*Please correct.
go to AIDDOB_M (whether suppressed or not)

ERR2_AIDDOB_Y
*Not a valid day: [fill1: <AIDDOB_M> <AIDDOB_D>, <AIDDOB_Y>]
*Please correct.
go to AIDDOB_M (whether suppressed or not)

ERR3_AIDDOB_Y
*DOB of [fill2: ALIAS of Sample Adult] remains [fill3: <DOBM>, <DOBD>, <DOBY>]
go to AIDVERF_A (whether suppressed or not)

ERR4_AIDDOB_Y
* Data mismatched. Please fix Age or Birthday.
* If still cannot reconcile, enter 'Don't know' for year of birth.
* Please correct.
Earlier I recorded that in the last week you were

(Fill1: working for pay at a job or business.)
(Fill2: with a job or business but not at work.)
(Fill3: looking for work.)
(Fill4: working, but not for pay, at a family-owned job or business.)
(Fill5: not working at a job or business and not looking for work.)

Is that correct?

1  Yes
2  No
7  Refused
9  Don't know

Sample adults 18+ who were working or not working last week

What is your correct working status?

1  Working for pay at a job or business
2  With a job or business but not at work
3  Looking for work
4  Working, but not for pay, at a family-owned job or business
5  Not working at a job or business and not looking for work
7  Refused
9  Don't know

Sample adults 18+ whose working status was incorrect or who were not the Family Respondent and with an answer of D or R to DOINGLW.
2012 NHIS Questionnaire - Sample Adult
Adult Socio-Demographic

Document Version Date: 23-May-13

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

QuestionText: Corrected Employment Status Last Week: (not displayed)

1. Working for pay at a job or business
2. With a job or business but not at work
3. Looking for work
4. Working, but not for pay, at a family-owned job or business
5. Not working at a job or business and not looking for work
6. Refused
7. Don't know

UniverseText: 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

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

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

QuestionText: ? [F1] (Fill1: What is the main reason you did not work last week?)

(Fill2: What is the main reason you did not have a job or business last week?)

01. Taking care of house or family
02. Going to school
03. Retired
04. On a planned vacation from work
05. On family or maternity leave
06. Temporarily unable to work for health reasons
07. Have job or contract and off-season
08. On layoff
09. Disabled
10. Other
97. Refused
99. Don't know

UniverseText: 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

SkipInstructions: <1-10,D,R> if WRKCOR = 2 then [goto WHOWRK] [goto EVERWRK] else [goto EVERWRK]
### Question ID: ASD.066_00.000
**Instrument Variable Name:** EVERWRK
**QuestionnaireFileName:** Sample Adult

**QuestionText:** Have you ever held a job or worked at a business?

<table>
<thead>
<tr>
<th>Option</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Yes</td>
</tr>
<tr>
<td>2</td>
<td>No</td>
</tr>
<tr>
<td>7</td>
<td>Refused</td>
</tr>
<tr>
<td>9</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

**UniverseText:** 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

**SkipInstructions:**
- <1> [goto WHOWRK]
- <2,D,R> [goto SCHOOLYR]

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

**QuestionText:**

- ? [F1]
  - Fill1: For whom did you work at your MAIN job or business? (Name of company, business, organization or employer)
  - Fill2: Thinking about the job you held the longest, for whom did you work? (Name of company, business, organization or employer)
  - Fill3: Thinking about the job you held most recently, for whom did you work? (Name of company, business, organization or employer)

**Verbatim**

Verbatim response

<table>
<thead>
<tr>
<th>Option</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>7</td>
<td>Refused</td>
</tr>
<tr>
<td>9</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

**UniverseText:** 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

**SkipInstructions:** <90 char long,D,R> [goto KINDIND]
2012 NHIS Questionnaire - Sample Adult
Adult Socio-Demographic
Document Version Date: 23-May-13

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

QuestionText: ? [F1]

What kind of business or industry was this? (For example: TV and radio mgt., retail shoe store, State Department of Labor)

Verbatim
7 Refused
9 Don't know

UniverseText: 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

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

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

QuestionText: ? [F1]

What kind of work were you doing? (For example: farming, mail clerk, computer specialist.)

Verbatim
7 Refused
9 Don't know

UniverseText: 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

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

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

QuestionText: ? [F1]

What were your most important activities on this job or business? (For example: sells cars, keeps account books, operates printing press.)

Verbatim
7 Refused
9 Don't know

UniverseText: 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

SkipInstructions: <90 char long,D,R> [goto WRKCAT]
Question ID: ASD.110_00.000  Instrument Variable Name: WRKCAT  QuestionnaireFileName: Sample Adult

QuestionText: (book) A2 ? [F1]

[If DOINGLW2 eq <1,2,4>] Looking at the card, which of these best describes your current job or work situation? [Else if EVERWRK eq <1> and [WHYNOWK2 eq 03 or AGE ge 65] Looking at the card, which of these best describes the job you held for the longest time? [Else if EVERWRK eq <1> and WHYNOWK2 ne 03 and AGE lt 65] Looking at the card, which of these best describes the job you held most recently?

* Read answer choices if necessary.

1 Employee of a PRIVATE company for wages
2 A FEDERAL government employee
3 A STATE government employee
4 A LOCAL government employee
5 Self-employed in OWN business, professional practice or farm
6 Working WITHOUT PAY in a family-owned business or farm
7 Refused
9 Don't know

UniverseText: 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

SkipInstructions: <1-4,6,D,R> [goto LOCALLNO]
<5> [goto BUSINC]

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

QuestionText: Is this business incorporated?

1 Yes
2 No
7 Refused
9 Don't know

UniverseText: Sample adults 18+ who are self-employed

SkipInstructions: <1,2,D,R> [goto LOCALLNO]
Thinking about [If DOINGLW2 eq <1,2,4>] this MAIN job or business [Else if EVERWRK eq <1> and [WHYNOWK2 eq 03 or AGE ge 65] your last week at the job you held the longest [Else if EVERWRK eq <1> and WHYNOWK2 ne 03 and AGE lt 65] your last week at the job you held most recently how many people work(ed) at this location?

how many people (Fill4:work/Fill5: worked) at this location?

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

<table>
<thead>
<tr>
<th>Value</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>01</td>
<td>1-9 employees</td>
</tr>
<tr>
<td>02</td>
<td>10-24 employees</td>
</tr>
<tr>
<td>03</td>
<td>25-49 employees</td>
</tr>
<tr>
<td>04</td>
<td>50-99 employees</td>
</tr>
<tr>
<td>05</td>
<td>100-249 employees</td>
</tr>
<tr>
<td>06</td>
<td>250-499 employees</td>
</tr>
<tr>
<td>07</td>
<td>500-999 employees</td>
</tr>
<tr>
<td>08</td>
<td>1000 employees or more</td>
</tr>
<tr>
<td>97</td>
<td>Refused</td>
</tr>
<tr>
<td>99</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

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.
2012 NHIS Questionnaire - Sample Adult
Adult Socio-Demographic
Document Version Date: 23-May-13

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

QuestionText: ? [F1]

1 of 2

About how long [If DOINGLW2 eq <1,2,4>] have you worked at this MAIN job or business? [Else if EVERWRK eq <1> and [WHYNOWK2 eq 03 or AGE ge 65] did you work at the job you held the longest? [Else if EVERWRK eq <1> and WHYNOWK2 ne 03 and AGE lt 65] did you work at the job you held most recently?

001-365  1-365
997  Refused
999  Don't know

UniverseText: 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

SkipInstructions:
<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]

ERR_WRKLONGT

Hard Edit: ERR_WRKLONGT

* Number of years is greater than age.
* Please correct.

---

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

QuestionText: 2 of 2

2

* Enter time period.

1  Day(s)
2  Week(s)
3  Month(s)
4  Year(s)

UniverseText: 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

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

**QuestionText:**  
? [F1]  

[If DOINGLW2 eq 1,2,4] Is this MAIN job or business the job you have held for the longest? [Else if EVERWRK eq 1 and WHYNOWK2 ne 03 and AGE lt 65] Was your most recently held job also the job you held the longest?  

1  Yes  
2  No  
7  Refused  
9  Don't know

**UniverseText:**  
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.)

**SkipInstructions:**  
<1,2,R,D> [goto HOURPD]

---

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

**QuestionText:**  
[If DOINGLW2 eq <1,2,4>] Are you paid by the hour at this MAIN job or business? [Else if EVERWRK eq <1> and [WHYNOWK2 eq 03 or AGE ge 65] Were you paid by the hour on the job you held the longest? [Else if EVERWRK eq <1> and WHYNOWK2 ne 03 and AGE lt 65] Were you paid by the hour on the job you held most recently?  

1  Yes  
2  No  
7  Refused  
9  Don't know

**UniverseText:**  
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

**SkipInstructions:**  
<1,2,D,R> [goto PDSICK]
2012 NHIS Questionnaire - Sample Adult
Adult Socio-Demographic

Document Version Date: 23-May-13

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

QuestionText: [If DOINGLW2 eq <1,2,4>] Do you have paid sick leave on this MAIN job or business? [Else if EVERWRK eq <1> and [WHYNOWK2 eq 03 or AGE ge 65] Did you ever have paid sick leave on the job you held the longest?[Else if EVERWRK eq <1> and WHYNOWK2 ne 03 and AGE lt 65] Did you ever have paid sick leave on the job you held most recently?

1 Yes
2 No
7 Refused
9 Don't know

UniverseText: 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

SkipInstructions: <1,2,D,R> [goto SCHOOLYR]

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

QuestionText: Do you have more than one job or business?

1 Yes
2 No
7 Refused
9 Don't know

UniverseText: 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

SkipInstructions: <1,2,D,R> [goto SCHOOLYR]
2012 NHIS Questionnaire - Sample Adult
Adult Socio-Demographic
Document Version Date: 23-May-13

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

QuestionText: Although you did not work last week, did you have a job or business at any time in the PAST 12 MONTHS?

0 Had job last week
1 Yes
2 No
7 Refused
9 Don't know

UniverseText: 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

SkipInstructions: <0-2,D,R> [goto SCHOOLYR]

Question ID: ASD.215_00.010  Instrument Variable Name: SCHOOLYR  QuestionnaireFileName: Sample Adult

QuestionText: DURING THE PAST 12 MONTHS, have you attended any kind of school?

1 Yes
2 No
7 Refused
9 Don't know

UniverseText: Sample adults 18+

SkipInstructions: <1,2,R,D> [goto next section]
Now I am going to ask you about certain medical conditions. Have you EVER been told by a doctor or other health professional that you had Hypertension, also called high blood pressure?

1 Yes
2 No
7 Refused
9 Don't know

Sample adults 18+

Were you told on two or more DIFFERENT visits that you had hypertension, also called high blood pressure?

1 Yes
2 No
7 Refused
9 Don't know

Sample adults 18+ who were told they had hypertension

DURING THE PAST 12 MONTHS, have you had hypertension, also called high blood pressure?

1 Yes
2 No
7 Refused
9 Don't know

Sample adults 18+ who were ever told they had hypertension on 2+ visits
<table>
<thead>
<tr>
<th>Question ID:</th>
<th>ACN.031_01.000</th>
<th>Instrument Variable Name:</th>
<th>CHDEV</th>
<th>QuestionnaireFileName:</th>
<th>Sample Adult</th>
</tr>
</thead>
<tbody>
<tr>
<td>QuestionText:</td>
<td><strong>Have you EVER been told by a doctor or other health professional that you had</strong>&lt;br&gt;... Coronary heart disease?&lt;br&gt;1 Yes&lt;br&gt;2 No&lt;br&gt;7 Refused&lt;br&gt;9 Don't know</td>
<td>UniverseText:</td>
<td>Sample adults 18+</td>
<td>SkipInstructions:</td>
<td>&lt;1&gt; [goto CHDYR] &lt;2,R,D&gt; [goto ANGEV]</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Question ID:</th>
<th>ACN.031_01.010</th>
<th>Instrument Variable Name:</th>
<th>CHDYR</th>
<th>QuestionnaireFileName:</th>
<th>Sample Adult</th>
</tr>
</thead>
<tbody>
<tr>
<td>QuestionText:</td>
<td><strong>DURING THE PAST 12 MONTHS have you had</strong>&lt;br&gt;... Coronary heart disease?&lt;br&gt;1 Yes&lt;br&gt;2 No&lt;br&gt;7 Refused&lt;br&gt;9 Don't know</td>
<td>UniverseText:</td>
<td>Sample adults 18+ who were ever told they had coronary heart disease</td>
<td>SkipInstructions:</td>
<td>&lt;1,2,R,D&gt; [goto ANGEV]</td>
</tr>
</tbody>
</table>
### Adult Conditions

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

**Question Text:**
* Read if necessary:

Have you EVER been told by a doctor or other health professional that you had

... Angina, also called angina pectoris?

<p>| | |</p>
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<tbody>
<tr>
<td>1</td>
<td>Yes</td>
</tr>
<tr>
<td>2</td>
<td>No</td>
</tr>
<tr>
<td>7</td>
<td>Refused</td>
</tr>
<tr>
<td>9</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

**Universe Text:** Sample adults 18+

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

---

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

**Question Text:**
* Read if necessary:

Have you EVER been told by a doctor or other health professional that you had

...A heart attack (also called myocardial infarction)?

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<tbody>
<tr>
<td>1</td>
<td>Yes</td>
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<tr>
<td>2</td>
<td>No</td>
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<tr>
<td>7</td>
<td>Refused</td>
</tr>
<tr>
<td>9</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

**Universe Text:** Sample adults 18+

**Skip Instructions:** <1,2,R,D> [goto HRTEV]
Have you EVER been told by a doctor or other health professional that you had...Any kind of heart condition or heart disease (other than the ones I just asked about)?

1  Yes
2  No
7  Refused
9  Don't know

Sample adults 18+

DURING THE PAST 12 MONTHS have you had...Any kind of heart condition or heart disease (other than the ones I just asked about)?

1  Yes
2  No
7  Refused
9  Don't know

Sample adults 18+ who were ever told they had any other kind of heart condition
Question ID: ACN.031_05.000  Instrument Variable Name: STREV  QuestionnaireFileName: Sample Adult

QuestionText: * Read if necessary:

Have you EVER been told by a doctor or other health professional that you had

...A stroke?

1  Yes
2  No
7  Refused
9  Don't know

UniverseText: Sample adults 18+

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

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

QuestionText: * Read if necessary:

Have you EVER been told by a doctor or other health professional that you had

...Emphysema?

1  Yes
2  No
7  Refused
9  Don't know

UniverseText: Sample adults 18+

SkipInstructions: <1,2,R,D> [goto COPDEV]
Question ID: ACN.035_00.000  Instrument Variable Name: COPDEV  QuestionnaireFileName: Sample Adult

QuestionText: Have you EVER been told by a doctor or other health professional that you had chronic obstructive pulmonary disease, also called COPD?

1 Yes
2 No
7 Refused
9 Don't know

UniverseText: Sample adults 18+

SkipInstructions: <1,2,R,D> [if AGE GE 40, goto ASPMDMED; else goto AASMEV]

---

Question ID: ACN.040_00.010  Instrument Variable Name: ASPMEDEV  QuestionnaireFileName: Sample Adult

QuestionText: Has a doctor or other health professional EVER told you to take a low-dose aspirin each day to prevent or control heart disease?

* 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 Yes
2 No
7 Refused
9 Don't know

UniverseText: Sample adults 40+

SkipInstructions: <1> [goto ASPMEDAD]
<2,R,D> [goto ASPONOWN]
### Question ID: ACN.040_00.020  
**Instrument Variable Name:** ASPMEDAD  
**QuestionnaireFileName:** Sample Adult

**QuestionText:** Are you NOW following this advice?  

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

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<tr>
<td>1</td>
<td>Yes</td>
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<td>2</td>
<td>No</td>
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<tr>
<td>7</td>
<td>Refused</td>
</tr>
<tr>
<td>9</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

**UniverseText:** Sample adults 40+ who have ever been advised to take a low-dose aspirin every day to prevent or control heart disease

**SkipInstructions:**  
<1,R,D> [goto AASMEV]  
<2> [goto ASPMDMED]

---

### Question ID: ACN.040_00.030  
**Instrument Variable Name:** ASPMDMED  
**QuestionnaireFileName:** Sample Adult

**QuestionText:** Did a doctor or other health professional advise you to stop taking a low-dose aspirin every day?  

<p>| | |</p>
<table>
<thead>
<tr>
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<tbody>
<tr>
<td>1</td>
<td>Yes</td>
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<tr>
<td>2</td>
<td>No</td>
</tr>
<tr>
<td>7</td>
<td>Refused</td>
</tr>
<tr>
<td>9</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

**UniverseText:** Sample adults 40+ who have ever been advised to take aspirin every day, but are not currently following that advice

**SkipInstructions:**  
<1,2,R,D> goto AASMEV

---

### Question ID: ACN.040_00.040  
**Instrument Variable Name:** ASPONOWN  
**QuestionnaireFileName:** Sample Adult

**QuestionText:** On your own, are you now taking a low-dose aspirin each day to prevent or control heart disease?  

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

<p>| | |</p>
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<tbody>
<tr>
<td>1</td>
<td>Yes</td>
</tr>
<tr>
<td>2</td>
<td>No</td>
</tr>
<tr>
<td>7</td>
<td>Refused</td>
</tr>
<tr>
<td>9</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

**UniverseText:** 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

**SkipInstructions:**  
<1,2,R,D> goto AASMEV
### Adult Conditions

**Document Version Date:** 23-May-13

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<tr>
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<th>ACN.080_00.000</th>
<th>Instrument Variable Name:</th>
<th>AASMEV</th>
<th>QuestionnaireFileName:</th>
<th>Sample Adult</th>
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<tbody>
<tr>
<td><strong>QuestionText:</strong></td>
<td>? [F1]</td>
<td>Have you EVER been told by a doctor or other health professional that you had asthma?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1</td>
<td>Yes</td>
<td></td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>2</td>
<td>No</td>
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<td>Refused</td>
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<tr>
<td>9</td>
<td>Don't know</td>
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</tr>
<tr>
<td><strong>UniverseText:</strong></td>
<td>Sample adults 18+</td>
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<td></td>
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<tr>
<td><strong>SkipInstructions:</strong></td>
<td>&lt;1&gt; [goto AASSTILL]</td>
<td>&lt;2,R,D&gt; [goto ULCEV]</td>
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<th>Sample Adult</th>
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<tr>
<td><strong>QuestionText:</strong></td>
<td>? [F1]</td>
<td>Do you still have asthma?</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>1</td>
<td>Yes</td>
<td></td>
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<td>2</td>
<td>No</td>
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<td>7</td>
<td>Refused</td>
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<tr>
<td>9</td>
<td>Don't know</td>
<td></td>
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<tr>
<td><strong>UniverseText:</strong></td>
<td>Sample adults 18+ who were ever told they have asthma</td>
<td></td>
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<td><strong>SkipInstructions:</strong></td>
<td>&lt;1,2,R,D&gt; [go to AASMYR]</td>
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<th>AASMYR</th>
<th>QuestionnaireFileName:</th>
<th>Sample Adult</th>
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<tbody>
<tr>
<td><strong>QuestionText:</strong></td>
<td>? [F1]</td>
<td>DURING THE PAST 12 MONTHS, have you had an episode of asthma or an asthma attack?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1</td>
<td>Yes</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>2</td>
<td>No</td>
<td></td>
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<tr>
<td>7</td>
<td>Refused</td>
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<tr>
<td>9</td>
<td>Don't know</td>
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<tr>
<td><strong>UniverseText:</strong></td>
<td>Sample adults 18+ who were ever told they had asthma</td>
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<td><strong>SkipInstructions:</strong></td>
<td>&lt;1,2,R,D&gt; [goto AASMERYR]</td>
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<td>Instrument Variable Name:</td>
<td>AASMERYR</td>
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</tr>
<tr>
<td>QuestionText:</td>
<td>? [F1]</td>
<td>DURING THE PAST 12 MONTHS, have you had to visit an emergency room or urgent care center because of asthma?</td>
<td>1</td>
<td>Yes</td>
<td>2</td>
</tr>
<tr>
<td>UniverseText:</td>
<td>Sample adults 18+ who were ever told they had asthma</td>
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</tr>
<tr>
<td>SkipInstructions:</td>
<td>&lt;1,2,R,D&gt; [ goto ULCEV]</td>
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<th>ACN.110_00.000</th>
<th>Instrument Variable Name:</th>
<th>ULCEV</th>
<th>QuestionnaireFileName:</th>
<th>Sample Adult</th>
</tr>
</thead>
<tbody>
<tr>
<td>QuestionText:</td>
<td>Have you EVER been told by a doctor or other health professional that you had ...An ulcer</td>
<td>This could be a stomach, duodenal or peptic ulcer.</td>
<td>1</td>
<td>Yes</td>
<td>2</td>
</tr>
<tr>
<td>UniverseText:</td>
<td>Sample adults 18+</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>SkipInstructions:</td>
<td>&lt;1&gt; [goto ULCYR]</td>
<td>&lt;2,R,D&gt; [goto CHLEV]</td>
<td></td>
<td></td>
<td></td>
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</tbody>
</table>
**Question ID:** ACN.120_00.000  **Instrument Variable Name:** ULCYR  **QuestionnaireFileName:** Sample Adult

**QuestionText:**
DURING THE PAST 12 MONTHS have you had...

...An ulcer?

1  Yes
2  No
7  Refused
9  Don't know

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

**SkipInstructions:** <1,2,R,D> [goto CHLEV]

---

**Question ID:** ACN.121_00.010  **Instrument Variable Name:** CHLEV  **QuestionnaireFileName:** Sample Adult

**QuestionText:** Have you EVER been told by a doctor or other health professional that you had...

...High cholesterol?

1  Yes
2  No
7  Refused
9  Don't know

**UniverseText:** Sample adults 18+

**SkipInstructions:** <1> [goto CHLYR]
<2,R,D> [goto AFLUPNEV]

---

**Question ID:** ACN.121_00.020  **Instrument Variable Name:** CHLYR  **QuestionnaireFileName:** Sample Adult

**QuestionText:** DURING THE PAST 12 MONTHS have you had...

...High cholesterol?

1  Yes
2  No
7  Refused
9  Don't know

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

**SkipInstructions:** <1,2,R,D> [goto AFLUPNEV]
Have you EVER been told by a doctor or other health professional that you had …Influenza or pneumonia?

1 Yes
2 No
7 Refused
9 Don't know

Sample adults 18+

DURING THE PAST 12 MONTHS have you had …Influenza or pneumonia?

1 Yes
2 No
7 Refused
9 Don't know

Sample adults 18+ who were ever told they had influenza or pneumonia
2012 NHIS Questionnaire - Sample Adult

Adult Conditions

Document Version Date: 23-May-13

Question ID: ACN.121_00.050  Instrument Variable Name: ASTREPEV  QuestionnaireFileName: Sample Adult

QuestionText: Have you EVER been told by a doctor or other health professional that you had

…Strep throat or tonsillitis?

1  Yes
2  No
7  Refused
9  Don't know

UniverseText: Sample adults 18+

SkipInstructions: <1> [goto ASTREPYR]  
<2,R,D>[goto PRCIREV]

Question ID: ACN.121_00.060  Instrument Variable Name: ASTREPYR  QuestionnaireFileName: Sample Adult

QuestionText: DURING THE PAST 12 MONTHS have you had

…Strep throat or tonsillitis?

1  Yes
2  No
7  Refused
9  Don't know

UniverseText: Sample adults 18+ who were ever told they had strep throat or tonsillitis

SkipInstructions: <1,2,R,D>[goto PRCIREV]
### Question ID: ACN.121_00.070
#### Instrument Variable Name: PRCIREV
#### QuestionnaireFileName: Sample Adult

**QuestionText:**
Have you EVER been told by a doctor or other health professional that you had

…Poor circulation in your legs?

*Include peripheral vascular disease, Intermittent Claudication or cramping.

** UniverseText:** Sample adults 18+

** SkipInstructions:** <1> [goto PRCIRYR] 
<2,R,D> [goto UREV]

### Question ID: ACN.121_00.080
#### Instrument Variable Name: PRCIRYR
#### QuestionnaireFileName: Sample Adult

**QuestionText:**
DURING THE PAST 12 MONTHS have you had

…Poor circulation in your legs?

** UniverseText:** Sample adults 18+ who were ever told they had poor circulation in their legs

** SkipInstructions:** <1,2,R,D> [goto UREV]
Question ID: ACN.121_00.090  Instrument Variable Name: UREV  QuestionnaireFileName: Sample Adult

QuestionText: Have you EVER been told by a doctor or other health professional that you had

...Urinary problems such as incontinence, frequent or slow urination or infections?

1  Yes
2  No
7  Refused
9  Don't know

UniverseText: Sample adults 18+

SkipInstructions: <1> [goto URYR]
<2,R,D>[goto PHOBIAEV]

---

Question ID: ACN.121_00.100  Instrument Variable Name: URYR  QuestionnaireFileName: Sample Adult

QuestionText: DURING THE PAST 12 MONTHS have you had

...Urinary problems such as incontinence, frequent or slow urination or infections?

1  Yes
2  No
7  Refused
9  Don't know

UniverseText: Sample adults 18+ who were ever told they had urinary problems

SkipInstructions: <1,2,R,D> [goto PHOBIAEV]
Have you EVER been told by a doctor or other health professional that you had Phobia or fears?

1 Yes
2 No
7 Refused
9 Don't know

Sample adults 18+

During the past 12 months have you had Phobia or fears?

1 Yes
2 No
7 Refused
9 Don't know

Sample adults 18+ who were ever told they had phobia or fears
Question ID: ACN.121_00.130  Instrument Variable Name: ADDHYP1  QuestionnaireFileName: Sample Adult

QuestionText: * Read if necessary.

Have you EVER been told by a doctor or other health professional that you had

...Attention Deficit Hyperactivity Disorder (ADHD) or Attention Deficit Disorder (ADD)?

1 Yes
2 No
7 Refused
9 Don't know

UniverseText: Sample adults 18+

SkipInstructions: <1,2,R,D> [goto BIPDIS]

Question ID: ACN.121_00.140  Instrument Variable Name: BIPDIS  QuestionnaireFileName: Sample Adult

QuestionText: * Read if necessary.

Have you EVER been told by a doctor or other health professional that you had

...Bipolar Disorder?

1 Yes
2 No
7 Refused
9 Don't know

UniverseText: Sample adults 18+

SkipInstructions: <1,2,R,D> [goto ADEPRSEV]
Have you EVER been told by a doctor or other health professional that you had …Depression?

1  Yes
2  No
7  Refused
9  Don't know

Sample adults 18+

DURING THE PAST 12 MONTHS have you had …Depression?

1  Yes
2  No
7  Refused
9  Don't know

Sample adults 18+ who were ever told they had depression
2012 NHIS Questionnaire - Sample Adult

Adult Conditions

Document Version Date: 23-May-13

Question ID: ACN.121_00.170  Instrument Variable Name: MHDOTHEV  QuestionnaireFileName: Sample Adult

QuestionText: Have you EVER been told by a doctor or other health professional that you had

…Other mental health disorders?

1 Yes
2 No
7 Refused
9 Don't know

UniverseText: Sample adults 18+

SkipInstructions: <1> [goto MHDOTHYR]  
<2,R,D> [goto RESPALYR]

---

Question ID: ACN.121_00.180  Instrument Variable Name: MHDOTHYR  QuestionnaireFileName: Sample Adult

QuestionText: DURING THE PAST 12 MONTHS have you had

…Other mental health disorders?

1 Yes
2 No
7 Refused
9 Don't know

UniverseText: Sample adults 18+ who were ever told they had other mental health disorders

SkipInstructions: <1,2,R,D> [goto RESPALYR]

---

Question ID: ACN.125_00.010  Instrument Variable Name: RESPALYR  QuestionnaireFileName: Sample Adult

QuestionText: DURING THE PAST 12 MONTHS, have you had

…Any kind of respiratory allergy?

1 Yes
2 No
7 Refused
9 Don't know

UniverseText: Sample adults 18+

SkipInstructions: <1,2,R,D> [goto DGSTALYR]
DURING THE PAST 12 MONTHS, have you had...

…Any kind of digestive allergy?

1  Yes
2  No
7  Refused
9  Don't know

Sample adults 18+

<1,2,R,D> [goto SKNALYR]
2012 NHIS Questionnaire - Sample Adult

Adult Conditions

Document Version Date: 23-May-13

Question ID: ACN.125_00.040  Instrument Variable Name: OTHALYR  QuestionnaireFileName: Sample Adult

QuestionText: *Read if necessary.

DURING THE PAST 12 MONTHS, have you had

…Allergies other than hay fever, respiratory, food, digestive, or skin allergies?

1 Yes
2 No
7 Refused
9 Don't know

UniverseText: Sample adults 18+

SkipInstructions: <1,2,R,D> [goto ACIDRYR]

---

Question ID: ACN.125_00.050  Instrument Variable Name: ACIDRYR  QuestionnaireFileName: Sample Adult

QuestionText: *Read if necessary.

DURING THE PAST 12 MONTHS, have you had

…Problems with acid reflux or heartburn?

1 Yes
2 No
7 Refused
9 Don't know

UniverseText: Sample adults 18+

SkipInstructions: <1,2,R,D> [goto AFEVRYR]
### Adult Conditions

**Question ID:** ACN.125_00.060  **Instrument Variable Name:** AFEVRYR  **QuestionnaireFileName:** Sample Adult

<table>
<thead>
<tr>
<th>QuestionText</th>
<th>UniverseText</th>
</tr>
</thead>
</table>
| *Read if necessary.*

DURING THE PAST 12 MONTHS, have you had

…Fever more than one day?

1  Yes
2  No
7  Refused
9  Don't know

Sample adults 18+

**SkipInstructions:** <1,2,R,D> [goto ACOLDYR]

---

**Question ID:** ACN.125_00.070  **Instrument Variable Name:** ACOLDYR  **QuestionnaireFileName:** Sample Adult

<table>
<thead>
<tr>
<th>QuestionText</th>
<th>UniverseText</th>
</tr>
</thead>
</table>
| *Read if necessary.*

DURING THE PAST 12 MONTHS, have you had

…A head or chest cold?

1  Yes
2  No
7  Refused
9  Don't know

Sample adults 18+

**SkipInstructions:** <1,2,R,D> [goto ANAUSYR]
DURING THE PAST 12 MONTHS, have you had nausea and/or vomiting?

1. Yes
2. No
7. Refused
9. Don't know

UniverseText: Sample adults 18+

SkipInstructions: <1,2,R,D> [goto ATHOTHYR]
**Question ID:** ACN.125_00.100  
**Instrument Variable Name:** IMMOTHYR  
**QuestionnaireFileName:** Sample Adult

**Question Text:**  
*Read if necessary.*  
DURING THE PAST 12 MONTHS, have you had  
…Infectious diseases or problems of the immune system?  

1  Yes  
2  No  
7  Refused  
9  Don't know

**UniverseText:** Sample adults 18+

**SkipInstructions:** <1,2,R,D> [goto AHEADYR]  

---

**Question ID:** ACN.125_00.110  
**Instrument Variable Name:** AHEADYR  
**QuestionnaireFileName:** Sample Adult

**Question Text:**  
*Read if necessary.*  
DURING THE PAST 12 MONTHS, have you had  
…Recurring headache, other than migraine?  

1  Yes  
2  No  
7  Refused  
9  Don't know

**UniverseText:** Sample adults 18+

**SkipInstructions:** <1,2,R,D> [goto MEMLOSYR]
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<th>QuestionnaireFileName: Sample Adult</th>
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<tbody>
<tr>
<td>QuestionText: <em>Read if necessary.</em></td>
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</tr>
<tr>
<td>DURING THE PAST 12 MONTHS, have you had</td>
<td></td>
<td></td>
</tr>
<tr>
<td>…Memory loss or loss of other cognitive functions?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1 Yes</td>
<td>2 No</td>
<td>7 Refused</td>
</tr>
<tr>
<td>UniverseText: Sample adults 18+</td>
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<td>SkipInstructions: &lt;1,2,R,D&gt; [goto NEUROYR]</td>
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<tbody>
<tr>
<td>QuestionText: <em>Read if necessary.</em></td>
<td></td>
<td></td>
</tr>
<tr>
<td>DURING THE PAST 12 MONTHS, have you had</td>
<td></td>
<td></td>
</tr>
<tr>
<td>…Neurological problems?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1 Yes</td>
<td>2 No</td>
<td>7 Refused</td>
</tr>
<tr>
<td>UniverseText: Sample adults 18+</td>
<td></td>
<td></td>
</tr>
<tr>
<td>SkipInstructions: &lt;1,2,R,D&gt; [goto AABDOMYR]</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Question ID</td>
<td>ACN.125_00.140</td>
<td>Instrument Variable Name</td>
</tr>
<tr>
<td>-------------</td>
<td>----------------</td>
<td>--------------------------</td>
</tr>
</tbody>
</table>
| QuestionText | *Read if necessary.  
DURING THE PAST 12 MONTHS, have you had  
…Abdominal pain?  
1 Yes  
2 No  
7 Refused  
9 Don't know | | | | |
| UniverseText | Sample adults 18+ | | | | |
| SkipInstructions | <1,2,R,D> [goto SPNYR] | | | | |

<table>
<thead>
<tr>
<th>Question ID</th>
<th>ACN.125_00.150</th>
<th>Instrument Variable Name</th>
<th>SPNYR</th>
<th>QuestionnaireFileName</th>
<th>Sample Adult</th>
</tr>
</thead>
</table>
| QuestionText | *Read if necessary.  
DURING THE PAST 12 MONTHS, have you had  
…Any severe sprains or strains?  
1 Yes  
2 No  
7 Refused  
9 Don't know | | | | | |
| UniverseText | Sample adults 18+ | | | | |
| SkipInstructions | <1,2,R,D> [goto DENYR] | | | | |
During the past 12 months, have you had dental pain?

1. Yes
2. No
7. Refused
9. Don't know

UniverseText: Sample adults 18+

SkipInstructions: <1,2,R,D> [goto AMUSCLYR]
**Question ID:** ACN.125_00.180  **Instrument Variable Name:** APNOTHYR  **QuestionnaireFileName:** Sample Adult

**QuestionText:**
*Read if necessary.

DURING THE PAST 12 MONTHS, have you had

…Other chronic pain?

1. Yes
2. No
7. Refused
9. Don't know

**UniverseText:** Sample adults 18+

**SkipInstructions:** <1,2,R,D> [goto ALCTOBYR]

---

**Question ID:** ACN.125_00.190  **Instrument Variable Name:** ALCTOBYR  **QuestionnaireFileName:** Sample Adult

**QuestionText:**  
*Read if necessary.

DURING THE PAST 12 MONTHS, have you had

…Excessive use of alcohol or tobacco?

1. Yes
2. No
7. Refused
9. Don't know

**UniverseText:** Sample adults 18+

**SkipInstructions:** <1,2,R,D> [goto SUBABYR]
<table>
<thead>
<tr>
<th>Question ID:</th>
<th>ACN.125_00.200</th>
<th>Instrument Variable Name:</th>
<th>SUBABYR</th>
<th>QuestionnaireFileName:</th>
<th>Sample Adult</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>QuestionText:</strong></td>
<td>*Read if necessary. DURING THE PAST 12 MONTHS, have you had …Substance abuse, other than alcohol or tobacco?</td>
<td>1</td>
<td>Yes</td>
<td>2</td>
<td>No</td>
</tr>
<tr>
<td><strong>UniverseText:</strong></td>
<td>Sample adults 18+</td>
<td>1</td>
<td>Yes</td>
<td>2</td>
<td>No</td>
</tr>
<tr>
<td><strong>SkipInstructions:</strong></td>
<td>&lt;1,2,R,D&gt; [goto AOVRWTYR]</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
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</table>

<table>
<thead>
<tr>
<th>Question ID:</th>
<th>ACN.125_00.210</th>
<th>Instrument Variable Name:</th>
<th>AOVRWTYR</th>
<th>QuestionnaireFileName:</th>
<th>Sample Adult</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>QuestionText:</strong></td>
<td>*Read if necessary. DURING THE PAST 12 MONTHS, have you had …Problems with being overweight?</td>
<td>1</td>
<td>Yes</td>
<td>2</td>
<td>No</td>
</tr>
<tr>
<td><strong>UniverseText:</strong></td>
<td>Sample adults 18+</td>
<td>1</td>
<td>Yes</td>
<td>2</td>
<td>No</td>
</tr>
<tr>
<td><strong>SkipInstructions:</strong></td>
<td>&lt;1,2,R,D&gt; [goto SKNYR1]</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
2012 NHIS Questionnaire - Sample Adult
Adult Conditions

Document Version Date: 23-May-13

Question ID: ACN.125_00.220 Instrument Variable Name: SKNYR1 QuestionnaireFileName: Sample Adult

QuestionText: *Read if necessary.

DURING THE PAST 12 MONTHS, have you had

…Skin problems, other than eczema or allergies?

1 Yes
2 No
7 Refused
9 Don't know

UniverseText: Sample adults 18+

SkipInstructions: <1,2,R,D> [goto FATIGYR]

Question ID: ACN.125_00.230 Instrument Variable Name: FATIGYR QuestionnaireFileName: Sample Adult

QuestionText: *Read if necessary.

DURING THE PAST 12 MONTHS, have you had

…Fatigue or lack of energy more than 3 days?

1 Yes
2 No
7 Refused
9 Don't know

UniverseText: Sample adults 18+

SkipInstructions: <1,2,R,D> [goto FATYR]
DURING THE PAST 12 MONTHS, have you...Regularly had excessive sleepiness during the day?

1 Yes
2 No
7 Refused
9 Don't know

UniverseText: Sample adults 18+

SkipInstructions: <1,2,R,D> [goto INSYR]

*Read if necessary.

DURING THE PAST 12 MONTHS, have you...Regularly had insomnia or trouble sleeping?

1 Yes
2 No
7 Refused
9 Don't know

UniverseText: Sample adults 18+

SkipInstructions: <1,2,R,D> [goto ANXNWYR]
### Question ID: ACN.125_00.260
#### Instrument Variable Name: ANXNWYR
#### QuestionnaireFileName: Sample Adult

**QuestionText:** *Read if necessary.

DURING THE PAST 12 MONTHS, have you

…Frequently felt anxious, nervous, or worried?

1. Yes
2. No
7. Refused
9. Don't know

**UniverseText:** Sample adults 18+

**SkipInstructions:** <1,2,R,D> [goto ASTRESYR]

---

### Question ID: ACN.125_00.270
#### Instrument Variable Name: ASTRESYR
#### QuestionnaireFileName: Sample Adult

**QuestionText:** *Read if necessary.

DURING THE PAST 12 MONTHS, have you

…Frequently felt stressed?

1. Yes
2. No
7. Refused
9. Don't know

**UniverseText:** Sample adults 18+

**SkipInstructions:** <1,2,R,D> [goto CANEV]
Have you EVER been told by a doctor or other health professional that you had...
Cancer or a malignancy of any kind?

1  Yes
2  No
7  Refused
9  Don't know

Sample adults 18+
What kind of cancer was it?

* Enter code for the first kind of cancer.

01  Bladder
02  Blood
03  Bone
04  Brain
05  Breast
06  Cervix
07  Colon
08  Esophagus
09  Gallbladder
10  Kidney
11  Larynx-windpipe
12  Leukemia
13  Liver
14  Lung
15  Lymphoma
16  Melanoma
17  Mouth/tongue/lip
18  Ovary
19  Pancreas
20  Prostate
21  Rectum
22  Skin (non-melanoma)
23  Skin (DK what kind)
24  Soft tissue (muscle or fat)
25  Stomach
26  Testis
27  Throat - pharynx
28  Thyroid
29  Uterus
30  Other
97  Refused
99  Don't know
UniverseText: Sample adults 18+ who were ever told they had cancer

SkipInstructions: <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

Hard Edit:

ERR1_CANKIND_1

* Code 6 or 18 or 29 is unavailable for males.

ERR2_CANKIND_1

* Code 20 or 26 is unavailable for females.
**Question Text:**

* Enter code for the second kind of cancer.

* Enter '96' for no more.

01 Bladder
02 Blood
03 Bone
04 Brain
05 Breast
06 Cervix
07 Colon
08 Esophagus
09 Gallbladder
10 Kidney
11 Larynx-windpipe
12 Leukemia
13 Liver
14 Lung
15 Lymphoma
16 Melanoma
17 Mouth/tongue/lip
18 Ovary
19 Pancreas
20 Prostate
21 Rectum
22 Skin (non-melanoma)
23 Skin (DK what kind)
24 Soft tissue (muscle or fat)
25 Stomach
26 Testis
27 Throat - pharynx
28 Thyroid
29 Uterus
30 Other
96 No more
97 Refused
99 Don't know
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.

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

* Code 6 or 18 or 29 is unavailable for males.

* Code 20 or 26 is unavailable for females.
* Enter code for the third kind of cancer.

* Enter '96' for no more.

01 Bladder
02 Blood
03 Bone
04 Brain
05 Breast
06 Cervix
07 Colon
08 Esophagus
09 Gallbladder
10 Kidney
11 Larynx-windpipe
12 Leukemia
13 Liver
14 Lung
15 Lymphoma
16 Melanoma
17 Mouth/tongue/lip
18 Ovary
19 Pancreas
20 Prostate
21 Rectum
22 Skin (non-melanoma)
23 Skin (DK what kind)
24 Soft tissue (muscle or fat)
25 Stomach
26 Testis
27 Throat - pharynx
28 Thyroid
29 Uterus
30 Other
96 No more
97 Refused
99 Don't know
Question Text: * Enter '95' if respondent offers more than 3 kinds of cancer.
   * Enter '96' for no more.

95  More than three kinds
96  No more

Universe Text: 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.
2012 NHIS Questionnaire - Sample Adult
Adult Conditions
Document Version Date: 23-May-13

Question ID: ACN.150_00.001
Instrument Variable Name: CANAGE_1
QuestionnaireFileName: Sample Adult

QuestionText: ? [F1]

How old were you when [Fill1: CANKIND_1 / Fill2: this cancer] was first diagnosed?

001-100 1-100 years
997 Refused
999 Don't know

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

SkipInstructions: <1-100, D> goto CANKIND_2
<R> and <R> at CANKIND_1 [goto DIBEV]
<R> and CANKIND_1 NE <R> [goto CANKIND_2]

If number in CANAGE_1 greater than person years old (AGE) goto ERR_CANAGE_1

Hard Edit: ERR_CANAGE_1

* [Fill2: CANAGE_1] years old is older than age[fill3: AGE].
* Please correct.

---

Question ID: ACN.150_00.002
Instrument Variable Name: CANAGE_2
QuestionnaireFileName: Sample Adult

QuestionText: ? [F1]

How old were you when [Fill1: CANKIND_2 / Fill2: this cancer] was first diagnosed?

001-100 1-100 years
997 Refused
999 Don't know

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

SkipInstructions: <1-100, D> goto CANKIND_3
<R> and <R> at CANKIND_2 [goto DIBEV]
<R> and CANKIND_2 NE <R> [goto CANKIND_3]

If number in CANAGE_2 greater than person years old (AGE) goto ERR_CANAGE_2

Hard Edit: ERR_CANAGE_2

* [Fill2: CANAGE_2] years old is older than your age[fill3: AGE].
* Please correct.
### Question ID: ACN.150_00.003
#### Instrument Variable Name: CANAGE_3
#### QuestionnaireFileName: Sample Adult

**QuestionText:**

? [F1]

How old were you when [Fill1: CANKIND_3/Fill2: this cancer ] was first diagnosed?

001-100 1-100 years
997 Refused
999 Don't know

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

**SkipInstructions:**

<1-100, D> goto CANKIND_4
<R> and <R> at CANKIND_3 goto DIBEV
<R> and CANKIND_3 NE <R> goto CANKIND_4

If number in CANAGE_3 greater than person years old (AGE) goto ERR_CANAGE_3

**Hard Edit:**

ERR_CANAGE_3

* [Fill2: CANAGE_3] years old is older than your age[fill3: AGE].
* Please correct.

### Question ID: ACN.160_00.000
#### Instrument Variable Name: DIBEV
#### QuestionnaireFileName: Sample Adult

**QuestionText:**

? [F1]

[Fill1:Other than during pregnancy, have you EVER been told by a doctor or other health professional that you have diabetes or sugar diabetes?][Fill2:Have you EVER been told by a doctor or other health professional that you have diabetes or sugar diabetes?]

1 Yes
2 No
3 Borderline
7 Refused
9 Don't know

**UniverseText:** Sample adults 18+

**SkipInstructions:**

<1> goto DIBAGE
<2,R,D> goto DIBPRE1
<3> goto INSLN
Have you EVER been told by a doctor or other health professional that you have any of the following: prediabetes, impaired fasting glucose, impaired glucose tolerance, borderline diabetes, or high blood sugar?

1. Yes
2. No
7. Refused
9. Don't know

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

How old were you when a doctor or other health professional FIRST told you that you had diabetes or sugar diabetes?

01-84 1-84 years
85 85+ years
97 Refused
99 Don't know

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

If number in DIBAGE greater than person years old (AGE) goto ERR_DIBAGE

* years old is older than your age. Please correct.
Question ID: ACN.180_00.000  Instrument Variable Name: INSLN  QuestionnaireFileName: Sample Adult

QuestionText: Are you NOW taking insulin?

1 Yes
2 No
7 Refused
9 Don't know

UniverseText: 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

SkipInstructions: <1,2,R,D> [goto DIBPILL]

Question ID: ACN.190_00.000  Instrument Variable Name: DIBPILL  QuestionnaireFileName: Sample Adult

QuestionText: Are you NOW taking diabetic pills to lower your blood sugar? These are sometimes called oral agents or oral hypoglycemic agents.

1 Yes
2 No
7 Refused
9 Don't know

UniverseText: 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

SkipInstructions: <1,2,R,D> [goto AHAYFYR]

Question ID: ACN.201_01.000  Instrument Variable Name: AHAYFYR  QuestionnaireFileName: Sample Adult

QuestionText: DURING THE PAST 12 MONTHS, have you been told by a doctor or other health professional that you had...Hay fever?

1 Yes
2 No
7 Refused
9 Don't know

UniverseText: Sample adults 18+

SkipInstructions: <1,2,R,D> [goto SINYR]
DURING THE PAST 12 MONTHS, have you been told by a doctor or other health professional that you had
...Sinusitis?

1  Yes
2  No
7  Refused
9  Don't know

UniverseText: Sample adults 18+

SkipInstructions: <1,2,R,D> [goto CBRCHYR]

DURING THE PAST 12 MONTHS, have you been told by a doctor or other health professional that you had
...Chronic bronchitis?

1  Yes
2  No
7  Refused
9  Don't know

UniverseText: Sample adults 18+

SkipInstructions: <1,2,R,D> [goto KIDWKYR]
**2012 NHIS Questionnaire - Sample Adult**

**Adult Conditions**

**Document Version Date:** 23-May-13

---

**Question ID:** ACN.201_04.000  **Instrument Variable Name:** KIDWKYR  **QuestionnaireFileName:** Sample Adult

**QuestionText:**

* Read if necessary:

**DURING THE PAST 12 MONTHS,** have you been told by a doctor or other health professional that you had

......Weak or failing kidneys? - Do not include kidney stones, bladder infections or incontinence.

1  Yes
2  No
7  Refused
9  Don't know

**UniverseText:** Sample adults 18+

**SkipInstructions:** <1,2,R,D> [goto LIVYR]

---

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

**QuestionText:**

* Read if necessary:

**DURING THE PAST 12 MONTHS,** have you been told by a doctor or other health professional that you had

...Any kind of liver condition?

1  Yes
2  No
7  Refused
9  Don't know

**UniverseText:** Sample adults 18+

**SkipInstructions:** <1,2,R,D> [goto JNTSYMP]
**2012 NHIS Questionnaire - Sample Adult**

**Adult Conditions**

Document Version Date: 23-May-13

<table>
<thead>
<tr>
<th>Question ID:</th>
<th>ACN.250_00.000</th>
<th>Instrument Variable Name:</th>
<th>JNTSYMP</th>
<th>QuestionnaireFileName:</th>
<th>Sample Adult</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>QuestionText:</strong></td>
<td>The next questions refer to your joints. Please do NOT include the back or neck. <strong>DURING THE PAST 30 DAYS</strong>, have you had any symptoms of pain, aching, or stiffness in or around a joint?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1</td>
<td>Yes</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>No</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>Refused</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>Don't know</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**UniverseText:** Sample adults 18+

**SkipInstructions:** <1> [goto JMTHP]  
<2,R,D> [goto ARTH]

<table>
<thead>
<tr>
<th>Question ID:</th>
<th>ACN.260_00.000</th>
<th>Instrument Variable Name:</th>
<th>JMTHP</th>
<th>QuestionnaireFileName:</th>
<th>Sample Adult</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>QuestionText:</strong></td>
<td>(book) A4</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Which joints are affected?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>* Enter all that apply, separate with commas.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>01</td>
<td>Shoulder-right</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>02</td>
<td>Shoulder-left</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>03</td>
<td>Elbow-right</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>04</td>
<td>Elbow-left</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>05</td>
<td>Hip-right</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>06</td>
<td>Hip-left</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>07</td>
<td>Wrist-right</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>08</td>
<td>Wrist-left</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>09</td>
<td>Knee-right</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10</td>
<td>Knee-left</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>11</td>
<td>Ankle-right</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>12</td>
<td>Ankle-left</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>13</td>
<td>Toes-right</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>14</td>
<td>Toes-left</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>15</td>
<td>Fingers/thumb-right</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>16</td>
<td>Fingers/thumb-left</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>17</td>
<td>Other joint not listed</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>97</td>
<td>Refused</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>99</td>
<td>Don't know</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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

**SkipInstructions:** <1-17,R,D> [goto JNTCHR]
**2012 NHIS Questionnaire - Sample Adult**

**Adult Conditions**

Document Version Date: 23-May-13

---

**Question ID:** ACN.270_00.000  **Instrument Variable Name:** JNTHCHR  **QuestionnaireFileName:** Sample Adult

**QuestionText:** Did your joint symptoms FIRST begin more than 3 months ago?

- 1 Yes
- 2 No
- 7 Refused
- 9 Don't know

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

**SkipInstructions:** <1,2,R,D> [goto JNTHP]

---

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

**QuestionText:** Have you EVER seen a doctor or other health professional for these joint symptoms?

- 1 Yes
- 2 No
- 7 Refused
- 9 Don't know

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

**SkipInstructions:** <1,2,R,D> [goto ARTH]

---

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

**QuestionText:** ? [F1]

Have you EVER been told by a doctor or other health professional that you have some form of arthritis, rheumatoid arthritis, gout, lupus, or fibromyalgia (fy-bro-my-AL-jee-uh)?

- 1 Yes
- 2 No
- 7 Refused
- 9 Don't know

**UniverseText:** Sample adults 18+

**SkipInstructions:** (<1> or JNTSYM eq <1>) [goto ARTHLM];
else (<2,R,D> and JNTSYM ne 1) [goto PAINECK]
### 2012 NHIS Questionnaire - Sample Adult

#### Adult Conditions

**Document Version Date:** 23-May-13

<table>
<thead>
<tr>
<th>Question ID:</th>
<th>Instrument Variable Name:</th>
<th>QuestionnaireFileName:</th>
<th>QuestionText:</th>
</tr>
</thead>
<tbody>
<tr>
<td>ACN.295_00.000</td>
<td>ARTHLMT</td>
<td>Sample Adult</td>
<td>Are you now limited in any way in any of your usual activities because of arthritis or joint symptoms? &lt;br&gt;1 Yes &lt;br&gt;2 No &lt;br&gt;7 Refused &lt;br&gt;9 Don't know</td>
</tr>
</tbody>
</table>

**UniverseText:** Sample adults 18+ with joint pain or arthritis

**SkipInstructions:** `<1,2,R,D> if ARTH=1 [goto ARTHTYP]; else [goto PAINECK]`

<table>
<thead>
<tr>
<th>Question ID:</th>
<th>Instrument Variable Name:</th>
<th>QuestionnaireFileName:</th>
<th>QuestionText:</th>
</tr>
</thead>
<tbody>
<tr>
<td>ACN.297_00.010</td>
<td>ARTHTYP</td>
<td>Sample Adult</td>
<td>You just mentioned that you were told by a doctor or other health professional that you had some form of arthritis, rheumatoid arthritis, gout, lupus, or fibromyalgia (fy-bro-my-AL-jee-uh). Which of these were you told you had? &lt;br&gt;*Enter all that apply, separate with commas. &lt;br&gt;1 Arthritis &lt;br&gt;2 Rheumatoid arthritis &lt;br&gt;3 Gout &lt;br&gt;4 Lupus &lt;br&gt;5 Fibromyalgia &lt;br&gt;6 Other joint condition &lt;br&gt;7 Refused &lt;br&gt;9 Don't know</td>
</tr>
</tbody>
</table>

**UniverseText:** Sample adults 18+ years who have ever been told they had arthritis, rheumatoid arthritis, gout, lupus, or fibromyalgia

**SkipInstructions:** `<1-6,R,D> [goto PAINECK]`
The following questions are about pain you may have experienced in the PAST THREE MONTHS. Please refer to pain that LASTED A WHOLE DAY OR MORE. Do not report aches and pains that are fleeting or minor.

DURING THE PAST THREE MONTHS, did you have

... Neck pain?

1 Yes
2 No
7 Refused
9 Don't know

Sample adults 18+

* Read if necessary.

DURING THE PAST THREE MONTHS, did you have

... Low back pain?

1 Yes
2 No
7 Refused
9 Don't know

Sample adults 18+
### Question ID: ACN.320_00.000  Instrument Variable Name: PAINLEG  QuestionnaireFileName: Sample Adult

**QuestionText:**

? [F1]

Did this pain spread down either leg to areas below the knees?

<p>| | |</p>
<table>
<thead>
<tr>
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<tbody>
<tr>
<td>1</td>
<td>Yes</td>
</tr>
<tr>
<td>2</td>
<td>No</td>
</tr>
<tr>
<td>7</td>
<td>Refused</td>
</tr>
<tr>
<td>9</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

**UniverseText:** Sample adults 18+ with low back pain in the past 3 months

**SkipInstructions:** <1,2,R,D> [goto PAINFACE]

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

**QuestionText:** DURING THE PAST THREE MONTHS, did you have

... Facial ache or pain in the jaw muscles or the joint in front of the ear?

<p>| | |</p>
<table>
<thead>
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<tbody>
<tr>
<td>1</td>
<td>Yes</td>
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<tr>
<td>2</td>
<td>No</td>
</tr>
<tr>
<td>7</td>
<td>Refused</td>
</tr>
<tr>
<td>9</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

**UniverseText:** Sample adults 18+

**SkipInstructions:** <1,2,R,D> [goto AMIGR]
<table>
<thead>
<tr>
<th>Question ID:</th>
<th>ACN.331_02.000</th>
<th>Instrument Variable Name:</th>
<th>AMIGR</th>
<th>QuestionnaireFileName:</th>
<th>Sample Adult</th>
</tr>
</thead>
<tbody>
<tr>
<td>QuestionText:</td>
<td>* Read if necessary:</td>
<td>DURING THE PAST THREE MONTHS, did you have</td>
<td>...Severe headache or migraine?</td>
<td>1</td>
<td>Yes</td>
</tr>
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<td></td>
<td>2</td>
<td>No</td>
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<td>7</td>
<td>Refused</td>
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<td></td>
<td>9</td>
<td>Don't know</td>
</tr>
<tr>
<td>UniverseText:</td>
<td>Sample adults 18+</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>SkipInstructions:</td>
<td>&lt;1,2,R,D&gt; [goto ACOLD2W]</td>
<td></td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Question ID:</th>
<th>ACN.350_00.000</th>
<th>Instrument Variable Name:</th>
<th>ACOLD2W</th>
<th>QuestionnaireFileName:</th>
<th>Sample Adult</th>
</tr>
</thead>
<tbody>
<tr>
<td>QuestionText:</td>
<td>These next questions are about your recent health DURING THE LAST 2 WEEKS.</td>
<td>Did you have a head cold or chest cold that started DURING THE LAST 2 WEEKS?</td>
<td></td>
<td>1</td>
<td>Yes</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>2</td>
<td>No</td>
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<td></td>
<td>7</td>
<td>Refused</td>
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<td></td>
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<td></td>
<td></td>
<td>9</td>
<td>Don't know</td>
</tr>
<tr>
<td>UniverseText:</td>
<td>Sample adults 18+</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>SkipInstructions:</td>
<td>&lt;1,2,R,D&gt; [goto AINTIL2W]</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
### Question ID: ACN.360_00.000  Instrument Variable Name: AINTIL2W  QuestionnaireFileName: Sample Adult

**Question Text:**
Did you have a stomach or intestinal illness with vomiting or diarrhea that started DURING THE LAST TWO WEEKS?

1. Yes
2. No
7. Refused
9. Don't know

**Universe Text:** Sample adults 18+

**Skip Instructions:**
- `<1,2,R,D>` if SEX=1 and age GE 40 [goto PROSTYR];
- else if SEX=2 and AGE 18-49 [goto PREGNOW];
- else if SEX=2 and AGE 50-55 [goto MENSYR];
- else if SEX=2 and AGE 56-57 [goto MENOYR];
- else if SEX=2 and AGE GE 58 [goto GYNYR];
- else [goto HRAIDNOW]

### Question ID: ACN.370_00.000  Instrument Variable Name: PREGNOW  QuestionnaireFileName: Sample Adult

**Question Text:**
Are you currently pregnant?

1. Yes
2. No
7. Refused
9. Don't know

**Universe Text:** Female sample adults 18-49 years of age

**Skip Instructions:**
- `<1>` if INTERVIEW_MONTH=4,5,6,7 (April-July) [goto PREGFLYR];
- else [goto MENSYR]
- `<R>` [goto MENSYR]
- `<2,D>` [goto PREGFLYR]

### Question ID: ACN.370_00.010  Instrument Variable Name: PREGFLYR  QuestionnaireFileName: Sample Adult

**Question Text:**
- [fill1: Were you pregnant any time since August 1st, [fill: LAST YEAR]?
- [fill: LAST YEAR] through March [fill: CURYEAR]?
- Were you pregnant any time since August 1st, [fill: CURYEAR]?

1. Yes
2. No
7. Refused
9. Don't know

**Universe Text:** Female sample adults 18-49 years of age who are not currently pregnant or who don't know if they are currently pregnant and interviewed April - July

**Skip Instructions:**
- `<1,2,R,D>` [goto MENSYR]
**Question ID:** ACN.372_00.010  **Instrument Variable Name:** MENSYR  **QuestionnaireFileName:** Sample Adult

**QuestionText:** DURING THE PAST 12 MONTHS, have you had any menstrual problems such as heavy bleeding, bothersome cramping, or pre-menstrual syndrome (also called PMS)?

1  Yes
2  No
7  Refused
9  Don't know

**UniverseText:** Female sample adults 18-55

**SkipInstructions:** <1,2,R,D> if AGE 45-55 [goto MENOYR]; else [goto GYNYR]

---

**Question ID:** ACN.372_00.020  **Instrument Variable Name:** MENOYR  **QuestionnaireFileName:** Sample Adult

**QuestionText:** DURING THE PAST 12 MONTHS, have you had any menopausal problems such as hot flashes, night sweats, or other menopausal symptoms?

1  Yes
2  No
7  Refused
9  Don't know

**UniverseText:** Female sample adults 45-57

**SkipInstructions:** <1,2,R,D> [goto GYNYR]

---

**Question ID:** ACN.372_00.030  **Instrument Variable Name:** GYNYR  **QuestionnaireFileName:** Sample Adult

**QuestionText:** DURING THE PAST 12 MONTHS, have you had any gynecologic problems such as a vaginal infection, uterine fibroids, or infertility?

1  Yes
2  No
7  Refused
9  Don't know

**UniverseText:** Female sample adults 18+

**SkipInstructions:** <1,2,R,D> [goto HRAIDNOW]
DURING THE PAST 12 MONTHS, have you had any men's health problems such as prostate trouble or impotence?

1. Yes
2. No
7. Refused
9. Don't know

Male sample adults 40+

These next questions are about your hearing, vision, and teeth.

Do you now use a hearing aid(s)?

1. Yes
2. No
7. Refused
9. Don't know

Sample adults 18+

Have you ever used a hearing aid(s) in the past?

1. Yes
2. No
7. Refused
9. Don't know

Sample adults 18+ who do not now use a hearing aid or REF/DK whether they now use a hearing aid
WITHOUT the use of hearing aids or other listening devices, is your hearing excellent, good, a little trouble hearing, moderate trouble, a lot of trouble, or are you deaf?

1  Excellent
2  Good
3  A little trouble hearing
4  Moderate trouble
5  A lot of trouble
6  Deaf
7  Refused
9  Don't know

Sample adults 18+

Do you have any trouble seeing, even when wearing glasses or contact lenses?

1  Yes
2  No
7  Refused
9  Don't know

Sample adults 18+
### Adult Conditions

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

**QuestionText:** Are you blind or unable to see at all?

<p>| | |</p>
<table>
<thead>
<tr>
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<tbody>
<tr>
<td>1</td>
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</tr>
<tr>
<td>7</td>
<td>Refused</td>
</tr>
<tr>
<td>9</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

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

**SkipInstructions:** <1,2,R,D> [goto LUPPRT]

---

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

**QuestionText:** Have you lost all of your upper and lower natural (permanent) teeth?

<p>| | |</p>
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<tbody>
<tr>
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<tr>
<td>7</td>
<td>Refused</td>
</tr>
<tr>
<td>9</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

**UniverseText:** Sample adults 18+

**SkipInstructions:** <1,2,R,D> [goto MHSAD_CK]

---

**Question ID:** ACN.470_00.000  **Instrument Variable Name:** MHSAD_CK  **QuestionnaireFileName:** Sample Adult

**QuestionText:** Now I am going to ask you some questions about feelings you may have experienced over the PAST 30 DAYS.

<p>| | |</p>
<table>
<thead>
<tr>
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<tbody>
<tr>
<td>1</td>
<td>Enter 1 to continue</td>
</tr>
</tbody>
</table>

**UniverseText:** Sample adults 18+

**SkipInstructions:** <1> [goto SAD]
### Question 471.01.000
**Instrument Variable Name:** SAD

**Question Text:**

> (book) A5

> DURING THE PAST 30 DAYS, how often did you feel

> ... So sad that nothing could cheer you up?

<table>
<thead>
<tr>
<th>Option</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>ALL of the time</td>
</tr>
<tr>
<td>2</td>
<td>MOST of the time</td>
</tr>
<tr>
<td>3</td>
<td>SOME of the time</td>
</tr>
<tr>
<td>4</td>
<td>A LITTLE of the time</td>
</tr>
<tr>
<td>5</td>
<td>NONE of the time</td>
</tr>
<tr>
<td>7</td>
<td>Refused</td>
</tr>
<tr>
<td>9</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

**Universe Text:** Sample adults 18+

**Skip Instructions:** 

<1-5,R,D> [goto NERVOUS]

---

### Question 471.02.000
**Instrument Variable Name:** NERVOUS

**Question Text:**

> (book) A5

* Read if necessary:

> During the PAST 30 DAYS, how often did you feel

> ... Nervous?

<table>
<thead>
<tr>
<th>Option</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
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<tr>
<td>5</td>
<td>NONE of the time</td>
</tr>
<tr>
<td>7</td>
<td>Refused</td>
</tr>
<tr>
<td>9</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

**Universe Text:** Sample adults 18+

**Skip Instructions:**

<1-5,R,D> [goto RESTLESS]
**2012 NHIS Questionnaire - Sample Adult**

**Adult Conditions**

Document Version Date: 23-May-13

---

**Question ID:** ACN.471_03.000  
**Instrument Variable Name:** RESTLESS  
**QuestionnaireFileName:** Sample Adult

**QuestionText:**

*(book) A5*

* Read lead-in if necessary:

During the PAST 30 DAYS, how often did you feel

... Restless or fidgety?

1. ALL of the time
2. MOST of the time
3. SOME of the time
4. A LITTLE of the time
5. NONE of the time
7. Refused
9. Don't know

**UniverseText:** Sample adults 18+

**SkipInstructions:** <1-5,R,D> [goto HOPELESS]

---

**Question ID:** ACN.471_04.000  
**Instrument Variable Name:** HOPELESS  
**QuestionnaireFileName:** Sample Adult

**QuestionText:**

*(book) A5*

* Read if necessary:

During the PAST 30 DAYS, how often did you feel

... Hopeless?

1. ALL of the time
2. MOST of the time
3. SOME of the time
4. A LITTLE of the time
5. NONE of the time
7. Refused
9. Don't know

**UniverseText:** Sample adults 18+

**SkipInstructions:** <1-5,R,D> [goto EFFORT]
**Question ID:** ACN.471_05.000  **Instrument Variable Name:** EFFORT  **QuestionnaireFileName:** Sample Adult

**QuestionText:** (book) A5

* Read if necessary:

During the PAST 30 DAYS, how often did you feel

...That everything was an effort?

1 ALL of the time
2 MOST of the time
3 SOME of the time
4 A LITTLE of the time
5 NONE of the time
7 Refused
9 Don't know

**UniverseText:** Sample adults 18+

**SkipInstructions:** <1-5,R,D> [goto WORTHLS]

---

**Question ID:** ACN.471_06.000  **Instrument Variable Name:** WORTHLS  **QuestionnaireFileName:** Sample Adult

**QuestionText:** (book) A5

* Read if necessary:

During the PAST 30 DAYS, how often did you feel

...Worthless?

1 ALL of the time
2 MOST of the time
3 SOME of the time
4 A LITTLE of the time
5 NONE of the time
7 Refused
9 Don't know

**UniverseText:** Sample adults 18+

**SkipInstructions:** If (SAD eq <1-3> or NERVOUS eq <1-3> or RESTLESS eq <1-3> or HOPELESS eq <1-3> or EFFORT eq<1-3> or WORTHLS eq <1-3>) [goto MHAMTMO]; else [goto Next Section]
We just talked about a number of feelings you had during the PAST 30 DAYS. Altogether, how MUCH did these feelings interfere with your life or activities: a lot, some, a little, or not at all?

1. A lot
2. Some
3. A little
4. Not at all
7. Refused
9. Don't know

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
These next questions are about problems with your voice, swallowing, speech, or language. Please do not tell us about problems that resulted from drinking alcohol or were caused by use of illicit drugs.

DURING THE PAST 12 MONTHS, have you had any problems or difficulties with your VOICE, such as having a hoarse, raspy, or strained voice, or with difficulty speaking loud enough to be heard?

1. Yes
2. No
7. Refused
9. Don't know

DURING THE PAST 12 MONTHS, have you had a SWALLOWING problem, such as difficulty eating solid food, taking pills, or drinking beverages?

1. Yes
2. No
7. Refused
9. Don't know
2012 NHIS Questionnaire - Sample Adult
Adult Communication Disorders

Document Version Date: 23-May-13

Question ID: ACD.020_00.000  Instrument Variable Name: VSLSPYR  QuestionnaireFileName: Sample Adult

QuestionText: DURING THE PAST 12 MONTHS, have you had a SPEECH problem, such as stuttering, repeating words, or not being able to pronounce words properly?

*Read if necessary: This refers to the language you are most comfortable with, not a foreign language.

1 Yes
2 No
7 Refused
9 Don't know

UniverseText: Sample adults 18+

SkipInstructions: <1,2,R,D> [goto VSLLGYR]

Question ID: ACD.025_00.000  Instrument Variable Name: VSLGYR  QuestionnaireFileName: Sample Adult

QuestionText: DURING THE PAST 12 MONTHS, have you had a LANGUAGE problem, such as problems using or understanding words or sentences?

*Read if necessary: This refers to the language you are most comfortable with, not a foreign language.

1 Yes
2 No
7 Refused
9 Don't know

UniverseText: Sample adults 18+

SkipInstructions: <1,2,R,D> [goto VSLSPEC]
2012 NHIS Questionnaire - Sample Adult
Adult Communication Disorders

Document Version Date: 23-May-13

Question ID: ACD.030_00.000  Instrument Variable Name: VSLSPEC  QuestionnaireFileName: Sample Adult

QuestionText: Before age 18, did you ever receive SPECIAL SERVICES or INSTRUCTION for a problem with your voice, speech, or language, for example, pronunciation, using or understanding words or sentences, or in reading?

1  Yes
2  No
7  Refused
9  Don't know

UniverseText: Sample adults 18+

SkipInstructions: <1,2,R,D> if VSLVYR=1 or VSLSWYR=1 or VSLSPYR=1 or VSLLGYR=1 [goto VSLHPD]; else [goto VSLEVER]

Question ID: ACD.035_00.000  Instrument Variable Name: VSLEVER  QuestionnaireFileName: Sample Adult

QuestionText: Have you EVER had a voice, swallowing, speech, or language problem that lasted a week or longer?

1  Yes
2  No
7  Refused
9  Don't know

UniverseText: Sample adults 18+ who haven't had any voice, swallowing, speech or language problems in the past 12 months

SkipInstructions: <1> [goto VSLHPD] <2,R,D> [goto VSLINTYR]

Question ID: ACD.040_00.000  Instrument Variable Name: VSLHPD  QuestionnaireFileName: Sample Adult

QuestionText: Did a doctor or other health professional EVER tell you a diagnosis or reason for a voice, swallowing, speech, or language problem?

1  Yes
2  No
7  Refused
9  Don't know

UniverseText: Sample adults 18+ who have had a voice, swallowing, speech or language problem in the past 12 months or who have ever had a voice, swallowing, speech or language problem

SkipInstructions: <1> [goto VSLDGTYP] <2,R,D> [if VSLVYR=1 or VSLSWYR=1 or VSLSPYR=1 or VSLLGYR=1 goto VSLVDYS, VSLSWDYS, VSLSPDYS, VSLLGDYS series; else goto VSLINTYR]
2012 NHIS Questionnaire - Sample Adult
Adult Communication Disorders
Document Version Date: 23-May-13

Question ID: ACD.045_00.000  Instrument Variable Name: VSLDGTYP  QuestionnaireFileName: Sample Adult

QuestionText: For which problem(s)?

*Read if necessary: Was this for problems with your voice, swallowing, speech, or language?

*Enter all that apply, separate with commas.

1 Voice problem
2 Swallowing problem
3 Speech problem
4 Language problem
7 Refused
9 Don't know

UniverseText: Sample adults 18+ who have ever had a diagnosis for a voice, swallowing, speech or language problem that lasted for a week or longer

SkipInstructions: <1> [goto VSLVDG] <2> [goto VSLSWDG] <3> [goto VSLSPDG] <4> [goto VSLLGDG] <R,D> [if VSLVYR=1 or VSLSWYR=1 or VSLSPYR=1 or VSLLGYR=1 goto VSLVDYS, VSLSWDYS, VSLSPDYS, VSLLGDYS series; else goto VSLINTYR]

Question ID: ACD.050_00.000  Instrument Variable Name: VSLVDG  QuestionnaireFileName: Sample Adult

QuestionText: What diagnoses or reasons were you told caused your voice problems?

*Enter all that apply, separate with commas.

01 Laryngitis caused by voice misuse, abuse, overuse
02 Laryngitis caused by colds/strep
03 Vocal nodules or polyps
04 Gastro-esophageal reflux disease (GERD)
05 Allergies
06 Airborne irritants or environmental pollutants
07 Head/neck injury
08 Cancer anywhere in the head, neck, or throat
09 Neurological cause (Alzheimer's, Parkinson's, dementia, etc.)
10 Prescription medication or drugs
11 Other
97 Refused
99 Don't know

UniverseText: Sample adults 18+ who have ever had a diagnosis for a voice problem that lasted a week or longer

SkipInstructions: <1-11,R,D> [cycle through VSLSWDG, VSLSPDG, VSLLGDG if applicable]; then if VSLVYR=1 or VSLSWYR=1 or VSLSPYR=1 or VSLLGYR=1 [goto VSLVDYS, VSLSWDYS, VSLSPDYS, VSLLGDYS series; else goto VSLINTYR]
Question ID: ACD.060_00.000  Instrument Variable Name: VSLSWDG  QuestionnaireFileName: Sample Adult

QuestionText: What diagnoses or reasons were you told caused your problems swallowing?

*Enter all that apply, separate with commas.

01 Stroke
02 Neurological cause (Alzheimer’s, Parkinson’s, post-polio syndrome, dementia, etc.)
03 Cancer anywhere in the head, neck, or throat
04 Chronic obstructive pulmonary disease (COPD)
05 Congestive heart failure (CHF)
06 Head/neck injury
07 Arthritic changes in the neck (arthritis, cervical osteophyte)
08 Advancing age (deterioration of muscle function with age…sarcopenia)
09 Prescription medication or drugs
10 Other
97 Refused
99 Don't Know

UniverseText: Sample adults 18+ who have ever had a diagnosis for a swallowing problem that lasted a week or longer

SkipInstructions: <1-10,R,D> [cycle through VSLSPDG, VSLLGDG if applicable]; then if VSLVYR=1 or VSLSWYR=1 or VSLSPYR=1 or VSLLGYR=1 [goto VSLVYR=1, VSLWYR=1, VSLSPYR=1, VSLLGYR=1]; else [goto VSLINTYR]

---

Question ID: ACD.065_00.000  Instrument Variable Name: VSLSPDG  QuestionnaireFileName: Sample Adult

QuestionText: What diagnoses or reasons were you told caused your speech problems?

*Enter all that apply, separate with commas.

01 Hearing loss or deafness
02 Developmental speech sound disorder (phonological, articulatory, dyspraxia)
03 Cerebral palsy
04 Cleft lip/palate, cranial-facial anomaly (structural cause)
05 Head/neck injury
06 Stuttering
07 Cancer anywhere in the head, neck, or throat
08 Neurological cause/dysarthria (Alzheimer’s, Parkinson’s, ALS, multiple sclerosis, dementia, etc.)
09 Prescription medication or drugs
10 Other
97 Refused

UniverseText: Sample adults 18+ who have ever had a diagnosis for a speech problem that lasted a week or longer

SkipInstructions: <1-10,R,D> [cycle through VSLLGDG if applicable]; then if VSLVYR=1 or VSLSWYR=1 or VSLSPYR=1 or VSLLGYR=1 [goto VSLVYR=1, VSLWYR=1, VSLSPYR=1, VSLLGYR=1]; else [goto VSLINTYR]
### Question ID: ACD.070_00.000
#### Instrument Variable Name: VSLLGDG
#### QuestionnaireFileName: Sample Adult
#### QuestionText: What diagnoses or reasons were you told caused your problems using or understanding words or sentences?
*Enter all that apply, separate with commas.*

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
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</tr>
</thead>
<tbody>
<tr>
<td>01</td>
<td>Hearing loss or deafness</td>
</tr>
<tr>
<td>02</td>
<td>Genetic syndrome: Down syndrome, Fragile X syndrome, etc.</td>
</tr>
<tr>
<td>03</td>
<td>Intellectual disability, also known as mental retardation</td>
</tr>
<tr>
<td>04</td>
<td>Autism spectrum disorder (ASD)</td>
</tr>
<tr>
<td>05</td>
<td>Developmental Language–Learning Disorder (e.g., Specific Language Impairment (SLI), learning disability, or dyslexia)</td>
</tr>
<tr>
<td>06</td>
<td>Other developmental delay</td>
</tr>
<tr>
<td>07</td>
<td>Head injury, traumatic brain injury (TBI)</td>
</tr>
<tr>
<td>08</td>
<td>Stroke/aphasia</td>
</tr>
<tr>
<td>09</td>
<td>Dementia or other neurological cause (Alzheimer’s, Parkinson’s, etc.)</td>
</tr>
<tr>
<td>10</td>
<td>Prescription medication or drugs</td>
</tr>
<tr>
<td>11</td>
<td>Other</td>
</tr>
<tr>
<td>97</td>
<td>Refused</td>
</tr>
<tr>
<td>99</td>
<td>Don't Know</td>
</tr>
</tbody>
</table>

#### UniverseText: Sample adults 18+ who have ever had a diagnosis for a language problem that lasted a week or longer

#### SkipInstructions: `<1-11,R,D> if VSLVYR=1 or VSLSWYR=1 or VSLSPYR=1 or VSLLGYR=1 [goto VSLVDYS, VSLSWDYS, VSLLGDYS series; else goto VSLINTYR]`

### Question ID: ACD.075_00.000
#### Instrument Variable Name: VSLVDYS
#### QuestionnaireFileName: Sample Adult
#### QuestionText: How many days in the past year did you have voice problems?
*Enter '7' for one week.  
*Enter '30' for one month.  
*Enter '365' for one year.*

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<table>
<thead>
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<tbody>
<tr>
<td>1-365</td>
<td></td>
</tr>
<tr>
<td>997</td>
<td>Refused</td>
</tr>
<tr>
<td>999</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

#### UniverseText: Sample adults 18+ who had a voice problem in the past 12 months

#### SkipInstructions: `<1-6,R,D> [cycle through VSLSWDYS, VSLSPDYS, VSLLGDYS if applicable. If not applicable, goto VSLINTYR]  
<D> [cycle through VSLSWDYS, VSLSPDYS, VSLLGDYS if applicable; else, goto VSLV1WK]  
<7-365> cycle through VSLSWDYS, VSLSPDYS, VSLLGDYS if applicable; then [goto VSLVAGE, VSLSWAGE, VSLSPAGE VSLLGAGE series]`
How many days in the past year did you have problems swallowing?

*Enter ‘7’ for one week.

*Enter ‘30’ for one month.

*Enter ‘365’ for one year.

001-365 1-365
997 Refused
999 Don't know

Sample adults 18+ who had a swallowing problem in the past 12 months

How many days in the past year did you have speech problems?

*Enter ‘7’ for one week.

*Enter ‘30’ for one month.

*Enter ‘365’ for one year.

001-365 1-365
997 Refused
999 Don't know

Sample adults 18+ who had a speech problem in the past 12 months
2012 NHIS Questionnaire - Sample Adult
Adult Communication Disorders
Document Version Date: 23-May-13

**Question ID:** ACD.085_00.000  **Instrument Variable Name:** VSLLGDYS  **QuestionnaireFileName:** Sample Adult

**QuestionText:** How many days in the past year did you have problems using or understanding words or sentences?

*Enter ‘7’ for one week.
*Enter ‘30’ for one month.
*Enter ‘365’ for one year.

<table>
<thead>
<tr>
<th>001-365</th>
<th>1-365</th>
</tr>
</thead>
<tbody>
<tr>
<td>997</td>
<td>Refused</td>
</tr>
<tr>
<td>999</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

**UniverseText:** Sample adults 18+ who had a language problem in the past 12 months

**SkipInstructions:** <1-6,R> [if 1-6,R to all applicable DYS variables, goto VSLINTYR; else any applicable DYS variables=D, goto VSLV1WK, VSLSW1WK, VSLSP1WK, VSLLG1WK series; else if VSLSW1WK, VSLSP1WK, VSLLG1WK not applicable and VSLSPDYS GE 7, goto VSLSTUTT; else if VSLLGDYS GE 7, goto VSLLGFAM; else goto VSLVAGE, VSLSWAGE, VSLSPAGE VSLLGAGE series]  
<2,R,D> [cycle through VSLSW1WK, VSLSP1WK, VSLLG1WK if applicable; else if VSLSW1WK, VSLSP1WK, VSLLG1WK not applicable and VSLLGDYS GE 7, goto VSLLGFAM; else goto applicable items in VSLVAGE, VSLSWAGE, VSLSPAGE, VSLLGAGE series]

---

**Question ID:** ACD.090_00.000  **Instrument Variable Name:** VSLV1WK  **QuestionnaireFileName:** Sample Adult

**QuestionText:** Altogether, did your voice problems last a week or longer?

| 1 | Yes |
| 2 | No |
| 7 | Refused |
| 9 | Don't know |

**UniverseText:** Sample adults 18+ who had a voice problem in the past 12 months who don't know how many days in the past year they have had this problem

**SkipInstructions:** <1> [cycle through VSLSW1WK, VSLSP1WK, VSLLG1WK if applicable; else if VSLSW1WK, VSLSP1WK, VSLLG1WK not applicable and VSLSPDYS GE 7, goto VSLSTUTT; else if VSLSW1WK, VSLSP1WK, VSLLG1WK not applicable and VSLLGDYS GE 7, goto VSLLGFAM; else goto applicable items in VSLVAGE, VSLSWAGE, VSLSPAGE, VSLLGAGE series]  
<2,R,D> [cycle through VSLSW1WK, VSLSP1WK, VSLLG1WK if applicable; else if VSLSW1WK, VSLSP1WK, VSLLG1WK not applicable and if all applicable DYS series < 7 goto VSLINTYR; else if VSLSW1WK, VSLSP1WK, VSLLG1WK not applicable and if all applicable DYS series < 7 goto VSLINTYR; else if VSLSW1WK, VSLSP1WK, VSLLG1WK not applicable and if all applicable DYS series < 7 goto VSLINTYR; else if VSLSW1WK, VSLSP1WK, VSLLG1WK not applicable and if all applicable DYS series < 7 goto VSLINTYR; else if VSLSW1WK, VSLSP1WK, VSLLG1WK not applicable and if all applicable DYS series < 7 goto VSLINTYR; else if VSLLG1WK not applicable and if all applicable DYS series < 7 goto VSLINTYR; else if VSLLGDYS GE 7, goto VSLSTUTT; else if VSLLGDYS GE 7, goto VSLSTUTT; else if VSLLGDYS GE 7, goto VSLSTUTT; else if VSLLGDYS GE 7, goto VSLSTUTT; else if VSLLGDYS GE 7, goto VSLSTUTT; else goto applicable items in VSLVAGE, VSLSWAGE, VSLSPAGE, VSLLGAGE series]
Question ID: ACD.095_00.000  Instrument Variable Name: VSLSW1WK  QuestionnaireFileName: Sample Adult

QuestionText: Altogether, did your problems swallowing last a week or longer?

1 Yes
2 No
7 Refused
9 Don't know

UniverseText: Sample adults 18+ who had a voice problem in the past 12 months who don't know how many days in the past year they have had this problem

SkipInstructions: <1> [cycle through VSLSP1WK, VSSLG1WK if applicable, else if VSLSP1WK, VSSLG1WK not applicable and VSLSPDYS GE 7, goto VSLSTUTT; else if VSLSP1WK, VSSLG1WK not applicable and VSSLGDYS GE 7, goto VSSLGFAM; else goto applicable items in VSLVAGE, VSLSWAGE, VSLSPAGE, VSSLGAGE series]
<2,R,D> [cycle through VSLSP1WK, VSSLG1WK if applicable; else if VSLSP1WK, VSSLG1WK not applicable and if all applicable DYS series < 7 and VSLV1WK NE 1 goto VSLINTYR; else if VSLSPDYS GE 7, goto VSLSTUTT; else if VSSLGDYS GE 7, goto VSSLGFAM; else goto applicable items in VSLVAGE, VSLSWAGE, VSLSPAGE, VSSLGAGE series]

---

Question ID: ACD.100_00.000  Instrument Variable Name: VSLSP1WK  QuestionnaireFileName: Sample Adult

QuestionText: Altogether, did your speech problems last for a week or longer?

1 Yes
2 No
7 Refused
9 Don't know

UniverseText: Sample adults 18+ who had a speech problem in the past 12 months who don't know how many days in the past year they have had this problem

SkipInstructions: <1> [cycle through VSSLG1WK if applicable, else if VSSLG1WK not applicable goto VSLSTUTT; else if VSSLG1WK not applicable and VSSLGDYS GE 7, goto VSSLGFAM; else then goto applicable items in VSLVAGE, VSLSWAGE, VSLSPAGE, VSSLGAGE series]
<2,R,D> [cycle through VSSLG1WK if applicable; else if VSSLG1WK not applicable and if all applicable DYS series < 7 and VSLV1WK NE 1 and VSLSW1WK NE 1 goto VSLINTYR; else if VSLSPDYS GE 7, goto VSLSTUTT; else if VSSLGDYS GE 7, goto VSSLGFAM; else goto VSLINTYR]
**2012 NHIS Questionnaire - Sample Adult**  
**Adult Communication Disorders**  
**Document Version Date: 23-May-13**

<table>
<thead>
<tr>
<th>Question ID:</th>
<th>ACD.105_00.000</th>
<th>Instrument Variable Name:</th>
<th>VSLLG1WK</th>
<th>QuestionnaireFileName:</th>
<th>Sample Adult</th>
</tr>
</thead>
<tbody>
<tr>
<td>QuestionText:</td>
<td>Altogether, did your problems using or understanding words or sentences last for a week or longer?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

1. Yes  
2. No  
7. Refused  
9. Don't know  

**UniverseText:** Sample adults 18+ who had a language problem in the past 12 months who don't know how many days in the past year they have had this problem  

**SkipInstructions:**  
<1> if VSLSPDYS GE 7 or VSLSPIWK=1 [goto VSLSTUTT]; else [goto VSLLGFAM];  
<2,R,D> if VSLSPDYS GE 7 or VSLSPIWK=1 [goto VSLSTUTT]; else if all applicable DYS series < 7 and VSLV1WK NE 1 and VSLSW1WK NE 1 and VSLSP1WK NE 1 goto VSLINTYR; else [goto applicable items in VSLVAGE, VSLSWAGE, VSLSPAGE, VSLLGAGE series]

<table>
<thead>
<tr>
<th>Question ID:</th>
<th>ACD.110_00.000</th>
<th>Instrument Variable Name:</th>
<th>VSLSTUTT</th>
<th>QuestionnaireFileName:</th>
<th>Sample Adult</th>
</tr>
</thead>
<tbody>
<tr>
<td>QuestionText:</td>
<td>DURING THE PAST 12 MONTHS, have you had a problem with stuttering or stammering?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

1. Yes  
2. No  
7. Refused  
9. Don't know  

**UniverseText:** Sample adults 18+ with a speech problem in the past 12 months for a week or longer  

**SkipInstructions:**  
<1> [goto VSLSTDEG]  
<2,R,D> if VSLLGDYS GE 7 or VSLLG1WK=1 [goto VSLLGFAM]; else [goto VSLVAGE, VSLSWAGE, VSLSPAGE, VSLLGAGE series]
<table>
<thead>
<tr>
<th>Question ID</th>
<th>Instrument Variable Name</th>
<th>QuestionnaireFileName</th>
<th>QuestionText</th>
<th>UniverseText</th>
<th>SkipInstructions</th>
</tr>
</thead>
<tbody>
<tr>
<td>ACD.115_00.000</td>
<td>VSLSTDEG</td>
<td>Sample Adult</td>
<td><strong>Would you describe your stuttering or stammering as mild, moderate, or severe?</strong></td>
<td>Sample adults 18+ with a stuttering or stammering problem in the past 12 months for a week or longer</td>
<td>&lt;1-3,R,D&gt; VSLLGDYSGE 7 or VSLLG1WK=1 [goto VSLLGFAM]; else [goto VSLVAGE, VSLSWAGE, VSLSPAGE, VSLLGAGE series]</td>
</tr>
<tr>
<td>ACD.120_00.000</td>
<td>VSLLGFAM</td>
<td>Sample Adult</td>
<td><strong>DURING THE PAST 12 MONTHS, have your family members, friends, or associates had trouble understanding what you say?</strong></td>
<td>Sample adults 18+ with a language problem in the past 12 months for a week or longer</td>
<td>&lt;1,2,R,D&gt; [goto VSLVAGE, VSLSWAGE, VSLSPAGE, VSLLGAGE series]</td>
</tr>
<tr>
<td>ACD.125_00.000</td>
<td>VSLVAGE</td>
<td>Sample Adult</td>
<td><strong>At what age did you FIRST begin to have any voice problems?</strong></td>
<td>Sample adults 18+ with a voice problem in the past 12 months for a week or longer</td>
<td>&lt;0-Current Age,R,D&gt; [cycle through VSLSWAGE, VSLSPAGE, VSLLGAGE if applicable, then goto VSLVPRB, VSLSWPRB, VSLSPPRB, VSLLGPRB series]</td>
</tr>
</tbody>
</table>
At what age did you FIRST begin to have any problems swallowing?

* Enter '0' if since birth.

000-120 Current Age
997 Refused
999 Don't know

Sample adults 18+ with a swallowing problem in the past 12 months for a week or longer

At what age did you FIRST begin to have any speech problems?

* Enter '0' if since birth.

000-120 Current Age
997 Refused
999 Don't know

Sample adults 18+ with a speech problem in the past 12 months for a week or longer

At what age did you FIRST begin to have any problems using or understanding words or sentences?

* Enter '0' if since birth.

000-120 Current Age
997 Refused
999 Don't know

Sample adults 18+ with a language problem in the past 12 months for a week or longer
<table>
<thead>
<tr>
<th>Question ID:</th>
<th>ACD.145_00.000</th>
<th>Instrument Variable Name:</th>
<th>VSLVPRB</th>
<th>QuestionnaireFileName:</th>
<th>Sample Adult</th>
</tr>
</thead>
<tbody>
<tr>
<td>QuestionText:</td>
<td>DURING THE PAST 12 MONTHS, how much of a problem did you have with your voice? Would you say it was...</td>
<td>*Read categories below</td>
<td>1</td>
<td>No problem</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>2</td>
<td>A small problem</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>3</td>
<td>A moderate problem</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>4</td>
<td>A big problem</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>5</td>
<td>A very big problem</td>
<td></td>
</tr>
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<td></td>
<td></td>
<td></td>
<td>7</td>
<td>Refused</td>
<td></td>
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<tr>
<td></td>
<td></td>
<td></td>
<td>9</td>
<td>Don't know</td>
<td></td>
</tr>
<tr>
<td>UniverseText:</td>
<td>Sample adults 18+ with a voice problem in the past 12 months for a week or longer</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>SkipInstructions:</td>
<td>&lt;1-5,R,D&gt; [cycle through VSLSWPRB, VSLSPPRB, VSLLGPRB if applicable, then goto VSLVSLP, VSLSWSLP VSLSPLP, VSLLGS LP series]</td>
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<thead>
<tr>
<th>Question ID:</th>
<th>ACD.150_00.000</th>
<th>Instrument Variable Name:</th>
<th>VSLSWPRB</th>
<th>QuestionnaireFileName:</th>
<th>Sample Adult</th>
</tr>
</thead>
<tbody>
<tr>
<td>QuestionText:</td>
<td>DURING THE PAST 12 MONTHS, how much of a swallowing problem did you have? Would you say it was...</td>
<td>*Read categories below</td>
<td>1</td>
<td>No problem</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>2</td>
<td>A small problem</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>3</td>
<td>A moderate problem</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>4</td>
<td>A big problem</td>
<td></td>
</tr>
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<td></td>
<td></td>
<td></td>
<td>5</td>
<td>A very big problem</td>
<td></td>
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<td></td>
<td></td>
<td></td>
<td>7</td>
<td>Refused</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>9</td>
<td>Don't know</td>
<td></td>
</tr>
<tr>
<td>UniverseText:</td>
<td>Sample adults 18+ with a swallowing problem in the past 12 months for a week or longer</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>SkipInstructions:</td>
<td>&lt;1-5,R,D&gt; [cycle through VSLSWPRB, VSLSPPRB, VSLLGPRB if applicable, then goto VSLVSLP, VSLSWSLP VSLSPLP, VSLLGS LP series]</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
DURING THE PAST 12 MONTHS, how much of a problem did you have with your speech? Would you say it was...

*Read categories below

1. No problem
2. A small problem
3. A moderate problem
4. A big problem
5. A very big problem
7. Refused
9. Don't know

Sample adults 18+ with a speech problem in the past 12 months for a week or longer

DURING THE PAST 12 MONTHS, how much of a problem did you have using or understanding words or sentences? Would you say it was...

*Read categories below

1. No problem
2. A small problem
3. A moderate problem
4. A big problem
5. A very big problem
7. Refused
9. Don't know

Sample adults 18+ with a language problem in the past 12 months for a week or longer
DURING THE PAST 12 MONTHS, have you seen a speech-language pathologist (SLP) or other health care professional about your voice problems?

1 Yes
2 No
7 Refused
9 Don't know

Sample adults 18+ with a voice problem in the past 12 months for a week or longer

Have you EVER seen a speech-language pathologist (SLP) or other health care professional about your voice problems?

1 Yes
2 No
7 Refused
9 Don't know

Sample adults 18+ who have not seen a speech-language pathologist or other health care professional about a voice problem in the past 12 months

DURING THE PAST 12 MONTHS, have you seen a speech-language pathologist (SLP) or other health care professional about your problems swallowing?

1 Yes
2 No
7 Refused
9 Don't know

Sample adults 18+ with a swallowing problem in the past 12 months for a week or longer
Question ID: ACD.180_00.000  Instrument Variable Name: VSLSWPEV  QuestionnaireFileName: Sample Adult

QuestionText: Have you EVER seen a speech-language pathologist (SLP) or other health care professional about your problems swallowing?

1 Yes
2 No
7 Refused
9 Don't know

UniverseText: Sample adults 18+ who have not seen a speech-language pathologist or other health care professional about a swallowing problem in the past 12 months

SkipInstructions: <1,2,R,D> [cycle through VSLSPSLP, VSLLGSLP if applicable, then goto VSLVTRT, VSLSWTRT, VSLSPTRT, VSLLGTRT series]

Question ID: ACD.185_00.000  Instrument Variable Name: VSLSPSLP  QuestionnaireFileName: Sample Adult

QuestionText: DURING THE PAST 12 MONTHS, have you seen a speech-language pathologist (SLP) or other health care professional about your speech problems?

1 Yes
2 No
7 Refused
9 Don't know

UniverseText: Sample adults 18+ with a speech problem in the past 12 months for a week or longer

SkipInstructions: <1,2,R,D> [cycle through VSLLGSLP if applicable; then goto VSLVTRT, VSLSWTRT, VSLSPTRT, VSLLGTRT series]
<2> [goto VSLSPPEV]
2012 NHIS Questionnaire - Sample Adult
Adult Communication Disorders
Document Version Date: 23-May-13

Question ID: ACD.190_00.000  Instrument Variable Name: VSLPPEV  QuestionnaireFileName: Sample Adult

QuestionText: Have you EVER seen a speech-language pathologist (SLP) or other health care professional about your speech problems?

1  Yes
2  No
7  Refused
9  Don't know

UniverseText: Sample adults 18+ who have not seen a speech-language pathologist or other health care professional about a speech problem in the past 12 months

SkipInstructions: <1,2,R,D> [cycle through VSLLGSLP if applicable]; else [goto VSLVTRT, VSLSWTRT, VSLSPTRT, VSLLGTRT series]

Question ID: ACD.195_00.000  Instrument Variable Name: VSLLGSLP  QuestionnaireFileName: Sample Adult

QuestionText: DURING THE PAST 12 MONTHS, have you seen a speech-language pathologist (SLP) or other health care professional about your problems using or understanding words or sentences?

1  Yes
2  No
7  Refused
9  Don't know

UniverseText: Sample adults 18+ with a language problem in the past 12 months for a week or longer

SkipInstructions: <1,R,D> [goto VSLVTRT, VSLSWTRT, VSLSPTRT, VSLLGTRT series] <2> [goto VSLLGPEV]

Question ID: ACD.200_00.000  Instrument Variable Name: VSLLGPEV  QuestionnaireFileName: Sample Adult

QuestionText: Have you EVER seen a speech-language pathologist (SLP) or other health care professional about your problems using or understanding words or sentences?

1  Yes
2  No
7  Refused
9  Don't know

UniverseText: Sample adults 18+ who have not seen a speech-language pathologist or other health care professional about a language problem in the past 12 months

SkipInstructions: <1,2,R,D> [goto VSLVTRT, VSLSWTRT, VSLSPTRT, VSLLGTRT series]
DURING THE PAST 12 MONTHS, have you received treatments, therapy, or other rehabilitation services for your voice problems?

1. Yes
2. No
7. Refused
9. Don't know

Who provided this (for your voice problems)?

*Enter all that apply, separate with commas.

01. Speech-Language Pathologist
02. Family Physician, General Practitioner, or Osteopath
03. Rehabilitation Specialist (Occupational or Physical Therapist)
04. Ear, Nose, and Throat Doctor (Otolaryngologist)
05. Audiologist, Hearing Specialist, or Hearing Aid Technician
06. Specialty doctor in Internal Medicine, Geriatrics, Neurology, etc.
07. Nutritionist or Dietician
08. Psychiatrist or Psychologist
09. Nurse or Nurse Practitioner
10. Dentist, Orthodontist, or Oral Surgeon
11. Other
97. Refused
99. Don't know
### Question 1: ACD.215_00.000 (Instrument Variable Name: VSLSWTRT) QuestionnaireFileName: Sample Adult

**QuestionText:** DURING THE PAST 12 MONTHS, have you received treatments, therapy, or other rehabilitation services for your problems swallowing?

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Yes</td>
</tr>
<tr>
<td>2</td>
<td>No</td>
</tr>
<tr>
<td>7</td>
<td>Refused</td>
</tr>
<tr>
<td>9</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

**UniverseText:** Sample adults 18+ with a swallowing problem in the past 12 months for a week or longer

**SkipInstructions:**

- `<1>` [goto VSLSWTRW]
- `<2,R,D>` [cycle through VSLSPTRT, VSLLGTRT if applicable; else if VSLSPTRT, VSLLGTRT not applicable and any TRT variables=1 goto VSLVSOC, VSLSWSOC, VSLSPSOC, VSLLGSOC series; else goto VSLVCOM, VSLSWCOM, VSLSPCOM, VSLLGCOM series]

### Question 2: ACD.220_00.000 (Instrument Variable Name: VSLSWTRW) QuestionnaireFileName: Sample Adult

**QuestionText:** Who provided this (for your problems swallowing)?

*Enter all that apply, separate with commas.

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>01</td>
<td>Speech-Language Pathologist</td>
</tr>
<tr>
<td>02</td>
<td>Family Physician, General Practitioner, or Osteopath</td>
</tr>
<tr>
<td>03</td>
<td>Rehabilitation Specialist (Occupational or Physical Therapist)</td>
</tr>
<tr>
<td>04</td>
<td>Ear, Nose, and Throat Doctor (Otolaryngologist)</td>
</tr>
<tr>
<td>05</td>
<td>Audiologist, Hearing Specialist, or Hearing Aid Technician</td>
</tr>
<tr>
<td>06</td>
<td>Specialty doctor in Internal Medicine, Geriatrics, Neurology, etc.</td>
</tr>
<tr>
<td>07</td>
<td>Nutritionist or Dietician</td>
</tr>
<tr>
<td>08</td>
<td>Psychiatrist or Psychologist</td>
</tr>
<tr>
<td>09</td>
<td>Nurse or Nurse Practitioner</td>
</tr>
<tr>
<td>10</td>
<td>Dentist, Orthodontist, or Oral Surgeon</td>
</tr>
<tr>
<td>11</td>
<td>Other</td>
</tr>
<tr>
<td>97</td>
<td>Refused</td>
</tr>
<tr>
<td>99</td>
<td>Don't Know</td>
</tr>
</tbody>
</table>

**UniverseText:** Sample adults 18+ who have received treatment/rehabilitative services for a swallowing problem in the past 12 months

**SkipInstructions:**

- `<1-11,R,D>` [cycle through VSLSPTRT, VSLLGTRT if applicable; else if VSLSPTRT, VSLLGTRT not applicable and any TRT variables=1 goto VSLVSOC, VSLSWSOC, VSLSPSOC, VSLLGSOC series; else go to VSLVCOM, VSLSWCOM, VSLSPCOM, VSLLGCOM series]
**Question ID:** ACD.225.00.000  **Instrument Variable Name:** VSLSPTRT  **QuestionnaireFileName:** Sample Adult

**Question Text:** DURING THE PAST 12 MONTHS, have you received treatments, therapy, or other rehabilitation services for your speech problems?

1. Yes  
2. No  
7. Refused  
9. Don't know

**Universe Text:** Sample adults 18+ with a speech problem in the past 12 months for a week or longer

**Skip Instructions:** <1> [goto VSLSPTRW]  
<2,R,D> [cycle through VSLLGTRT if applicable;  
else if VSLLGTRT not applicable and any TRT variables=1 [goto VSLVSOC, VSLWSOC, VSLSPSOC,  
VSLLGSOC series;  
else [goto VSLVCOM, VSLWSOC, VSLSPCOM, VSLLGCOM series]

---

**Question ID:** ACD.230.00.000  **Instrument Variable Name:** VSLSPTRW  **QuestionnaireFileName:** Sample Adult

**Question Text:** Who provided this (for your speech problems)?  

*Enter all that apply, separate with commas.

- Speech-Language Pathologist  
- Family Physician, General Practitioner, or Osteopath  
- Rehabilitation Specialist (Occupational or Physical Therapist)  
- Ear, Nose, and Throat Doctor (Otolaryngologist)  
- Audiologist, Hearing Specialist, or Hearing Aid Technician  
- Specialty doctor in Internal Medicine, Geriatrics, Neurology, etc.  
- Nutritionist or Dietician  
- Psychiatrist or Psychologist  
- Nurse or Nurse Practitioner  
- Dentist, Orthodontist, or Oral Surgeon  
- Other  
- Refused  
- Don't know

**Universe Text:** Sample adults 18+ who have received treatment/rehabilitative services for a speech problem in the past 12 months

**Skip Instructions:** <1-11,R,D> [cycle through VSLLGTRT if applicable;  
else if VSLLGTRT not applicable and any TRT variables=1 [goto VSLVSOC, VSLWSOC, VSLSPSOC,  
VSLLGSOC series;  
else go to VSLVCOM, VSLWSOC, VSLSPCOM, VSLLGCOM series]
<table>
<thead>
<tr>
<th>Question ID:</th>
<th>ACD.235_00.000</th>
<th>Instrument Variable Name:</th>
<th>VSLLGTRT</th>
<th>QuestionnaireFileName:</th>
<th>Sample Adult</th>
</tr>
</thead>
<tbody>
<tr>
<td>QuestionText:</td>
<td>DURING THE PAST 12 MONTHS, have you received treatments, therapy, or other rehabilitation services, for your problems using or understanding words or sentences?</td>
<td>1</td>
<td>Yes</td>
<td>2</td>
<td>No</td>
</tr>
<tr>
<td>UniverseText:</td>
<td>Sample adults 18+ with a language problem in the past 12 months for a week or longer</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>SkipInstructions:</td>
<td>&lt;1&gt; [goto VSLLGTRW]</td>
<td>&lt;2,R,D&gt; if any TRT variables=1 [goto VSLVSOC, VSLWSOC, VSLSPSOC, VSLLGSOC series]; else [goto VSLVCOM, VSLSWCOM, VSLSPCOM, VSLLGCOM series]</td>
<td></td>
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</table>

<table>
<thead>
<tr>
<th>Question ID:</th>
<th>ACD.240_00.000</th>
<th>Instrument Variable Name:</th>
<th>VSLLGTRW</th>
<th>QuestionnaireFileName:</th>
<th>Sample Adult</th>
</tr>
</thead>
<tbody>
<tr>
<td>QuestionText:</td>
<td>Who provided this (for your problems using or understanding words or sentences)?</td>
<td>01</td>
<td>Speech-Language Pathologist</td>
<td>02</td>
<td>Family Physician, General Practitioner, or Osteopath</td>
</tr>
<tr>
<td>UniverseText:</td>
<td>Sample adults 18+ who have received treatment/rehabilitative services for a language problem in the past 12 months</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>SkipInstructions:</td>
<td>&lt;1-11,R,D&gt; if any TRT variables=1 [goto VSLVSOC, VSLWSOC, VSLSPSOC, VSLLGSOC series]; else [goto VSLVCOM, VSLSWCOM, VSLSPCOM, VSLLGCOM series]</td>
<td></td>
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</tr>
</tbody>
</table>
### Question ACD.245_00.000: Did the treatments or other rehabilitation services for your voice problems make your personal or social life better?

<table>
<thead>
<tr>
<th>Option</th>
<th>Response</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Yes</td>
</tr>
<tr>
<td>2</td>
<td>No</td>
</tr>
<tr>
<td>7</td>
<td>Refused</td>
</tr>
<tr>
<td>9</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

**Universe Text:** Sample adults 18+ who have received treatment/rehabilitative services for a voice problem in the past 12 months

**Skip Instructions:** `<1,2,R,D> [cycle through VSLVTRT(e)='1' and (DOINGLW2 IN('1','2','4') or WRKLYR2(e)='1' or SCHOOLYR(e)='1') goto VSLVSW, VSLWSW, VSLSPSW, VSLGWSW series; else goto VSLVC, VSLWVC, VSLPC, VSLGCOM series]`

---

### Question ACD.250_00.000: Did the treatments or other rehabilitation services for your problems swallowing make your personal or social life better?

<table>
<thead>
<tr>
<th>Option</th>
<th>Response</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Yes</td>
</tr>
<tr>
<td>2</td>
<td>No</td>
</tr>
<tr>
<td>7</td>
<td>Refused</td>
</tr>
<tr>
<td>9</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

**Universe Text:** Sample adults 18+ who have received treatment/rehabilitative services for a swallowing problem in the past 12 months

**Skip Instructions:** `<1,2,R,D> [cycle through VSLVTRT(e)='1' and (DOINGLW2 IN('1','2','4') or WRKLYR2(e)='1' or SCHOOLYR(e)='1') goto VSLVSW, VSLWSW, VSLSPSW, VSLGWSW series; else goto VSLVC, VSLWVC, VSLPC, VSLGCOM series]`
Question ID: ACD.255_00.000  Instrument Variable Name: VSLSPSOC  QuestionnaireFileName: Sample Adult

QuestionText: Did the treatments or other rehabilitation services for your speech problems make your personal or social life better?

1  Yes
2  No
7  Refused
9  Don't know

UniverseText: Sample adults 18+ who have received treatment/rehabilitative services for a speech problem in the past 12 months

SkipInstructions: <1,2,R,D> [cycle through VSLLGSOC if applicable; else if VSLVTRT(e)='1' and (DOINGLW2 IN('1','2','4') or WRKLYR2(e)='1' or SCHOOLYR(e)='1') goto VSLVSW, VSLWSW, VSLSPSW, VSLLGSW series; else goto VSLVCOM, VSLSWCOM, VSLSPCOM, VSLLGCOM series]

---

Question ID: ACD.260_00.000  Instrument Variable Name: VSLLGSOC  QuestionnaireFileName: Sample Adult

QuestionText: Did the treatments or other rehabilitation services for your problems using or understanding words or sentences make your personal or social life better?

1  Yes
2  No
7  Refused
9  Don't know

UniverseText: Sample adults 18+ who have received treatment/rehabilitative services for a language problem in the past 12 months

SkipInstructions: <1,2,R,D>  [if VSLVTRT(e)='1' and (DOINGLW2 IN('1','2','4') or WRKLYR2(e)='1' or SCHOOLYR(e)='1') goto VSLVSW, VSLWSW, VSLSPSW, VSLLGSW series; else goto VSLVCOM, VSLSWCOM, VSLSPCOM, VSLLGCOM series]
<table>
<thead>
<tr>
<th>Question ID: ACD.265_00.000</th>
<th>Instrument Variable Name: VSLVSW</th>
<th>QuestionnaireFileName: Sample Adult</th>
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</thead>
<tbody>
<tr>
<td>QuestionText: Did the treatments or other rehabilitation services for your voice problems make your life at school or work better?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1 Yes</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2 No</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7 Refused</td>
<td></td>
<td></td>
</tr>
<tr>
<td>9 Don't know</td>
<td></td>
<td></td>
</tr>
<tr>
<td>UniverseText: Sample adults 18+ who have worked or attended school in the past 12 months and who received treatment/rehabilitative services for a voice problem in the past 12 months</td>
<td></td>
<td></td>
</tr>
<tr>
<td>SkipInstructions: &lt;1,2,R,D&gt; [cycle through VSLVSW, VSLSPSW, VSLLGSW if applicable, then goto VSLVCOM, VSLSWCOM, VSLSPCOM, VSLLGCOM series]</td>
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</tr>
</tbody>
</table>

<table>
<thead>
<tr>
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<th>Instrument Variable Name: VSLWSW</th>
<th>QuestionnaireFileName: Sample Adult</th>
</tr>
</thead>
<tbody>
<tr>
<td>QuestionText: Did the treatments or other rehabilitation services for your problems swallowing make your life at school or work better?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1 Yes</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2 No</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7 Refused</td>
<td></td>
<td></td>
</tr>
<tr>
<td>9 Don't know</td>
<td></td>
<td></td>
</tr>
<tr>
<td>UniverseText: Sample adults 18+ who have worked or attended school in the past 12 months and who have received treatment/rehabilitative services for a swallowing problem in the past 12 months</td>
<td></td>
<td></td>
</tr>
<tr>
<td>SkipInstructions: &lt;1,2,R,D&gt; [cycle through VSLVSW, VSLSPSW, VSLLGSW if applicable, then goto VSLVCOM, VSLSWCOM, VSLSPCOM, VSLLGCOM series]</td>
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</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Question ID: ACD.275_00.000</th>
<th>Instrument Variable Name: VSLSPSW</th>
<th>QuestionnaireFileName: Sample Adult</th>
</tr>
</thead>
<tbody>
<tr>
<td>QuestionText: Did the treatments or other rehabilitation services for your speech problems make your life at school or work better?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1 Yes</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2 No</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7 Refused</td>
<td></td>
<td></td>
</tr>
<tr>
<td>9 Don't know</td>
<td></td>
<td></td>
</tr>
<tr>
<td>UniverseText: Sample adults 18+ who have worked or attended school in the past 12 months and who have received treatment/rehabilitative services for a speech problem in the past 12 months</td>
<td></td>
<td></td>
</tr>
<tr>
<td>SkipInstructions: &lt;1,2,R,D&gt; [cycle through VSLLGSW if applicable, then goto VSLVCOM, VSLSWCOM, VSLSPCOM, VSLLGCOM series]</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
2012 NHIS Questionnaire - Sample Adult

Adult Communication Disorders

Document Version Date: 23-May-13

Question ID: ACD.280_00.000  Instrument Variable Name: VSLLGSW  QuestionnaireFileName: Sample Adult

**QuestionText:** Did the treatments or other rehabilitation services for your problems using or understanding words or sentences make your life at school or work better?

1. Yes
2. No
7. Refused
9. Don't know

**UniverseText:** Sample adults 18+ who have worked or attended school in the past 12 months and who have received treatment/rehabilitative services for a language problem in the past 12 months

**SkipInstructions:** <1,2,R,D> [goto VSLVCOM, VSLSWCOM, VSLSPCOM, VSLLGCOM series]

---

Question ID: ACD.285_00.000  Instrument Variable Name: VSLVCOM  QuestionnaireFileName: Sample Adult

**QuestionText:** Compared to 12 months ago, would you say your voice problems are now better, worse, or about the same?

1. Better
2. Worse
3. About the same
7. Refused
9. Don't know

**UniverseText:** Sample adults 18+ with a voice problem in the past 12 months

**SkipInstructions:** <1-3,R,D> [cycle through VSLSWCOM, VSLSPCOM, VSLLGCOM series, then goto VSLINTYR]

---

Question ID: ACD.290_00.000  Instrument Variable Name: VSLSWCOM  QuestionnaireFileName: Sample Adult

**QuestionText:** Compared to 12 months ago, would you say your problems swallowing are now better, worse, or about the same?

1. Better
2. Worse
3. About the same
7. Refused
9. Don't know

**UniverseText:** Sample adults 18+ with a swallowing problem in the past 12 months

**SkipInstructions:** <1-3,R,D> [cycle through VSLSPCOM, VSLLGCOM if applicable, then goto VSLINTYR]
Question ID: ACD.295_00.000  Instrument Variable Name: VSLSPCOM  QuestionnaireFileName: Sample Adult

QuestionText: Compared to 12 months ago, would you say your speech problems are now better, worse, or about the same?

1 Better
2 Worse
3 About the same
7 Refused
9 Don't know

UniverseText: Sample adults 18+ with a speech problem in the past 12 months

SkipInstructions: <1-3,R,D> [cycle through VSLLGCOM if applicable, then goto VSLINTYR]

Question ID: ACD.300_00.000  Instrument Variable Name: VSLLGCOM  QuestionnaireFileName: Sample Adult

QuestionText: Compared to 12 months ago, would you say your problems using or understanding words or sentences are now better, worse, or about the same?

1 Better
2 Worse
3 About the same
7 Refused
9 Don't know

UniverseText: Sample adults 18+ with a language problem in the past 12 months

SkipInstructions: <1-3,R,D> [goto VSLINTYR]

Question ID: ACD.305_00.000  Instrument Variable Name: VSLINTYR  QuestionnaireFileName: Sample Adult

QuestionText: DURING THE PAST 12 MONTHS, did you get information from the Internet about your health, medical treatments, or rehabilitation services?

1 Yes
2 No
7 Refused
9 Don’t know

UniverseText: Sample adults 18+

SkipInstructions: <1> if VSLVYR=1 or VSLSWYR=1 or VSLSPYR=1 or VSLLGYR=1 then [goto VSLINTCN]; else goto next section;
<2,R,D> goto next section
**Question ID:** ACD.310_00.000  **Instrument Variable Name:** VSLINTCN  **QuestionnaireFileName:** Sample Adult

**QuestionText:** DURING THE PAST 12 MONTHS, did you get information from the Internet on...

{fill1:
 Voice problems
 Problems swallowing
 Speech problems
 Problems using or understanding words or sentences}

1  Yes
2  No
7  Refused
9  Don’t know

**UniverseText:** Sample adults 18+ who have had a voice, swallowing, speech or language problem in the past 12 months and who have received health information from the Internet in the past 12 months

**SkipInstructions:** <1> [goto VSLINTPR] <2,R,D> [goto next section]

---

**Question ID:** ACD.315_00.000  **Instrument Variable Name:** VSLINTPR  **QuestionnaireFileName:** Sample Adult

**QuestionText:** Was any of this information written by a doctor, other health professionals, medical associations, or other health-related organizations?

1  Yes
2  No
7  Refused
9  Don’t know

**UniverseText:** Sample adults 18+ who have received information from the Internet in the past 12 months about a voice, swallowing, speech or language problem

**SkipInstructions:** <1,2,R,D> [goto VSLINTHP]
Overall, how helpful was the health information found on the Internet? Would you say...

*Read categories below.

1  Very helpful
2  Somewhat helpful
3  Not helpful
7  Refused
9  Don’t know

Sample adults 18+ who have received information from the Internet in the past 12 months about a voice, swallowing, speech or language problem
### AHS.040_00.000: WKDAYR

**Question ID:** AHS.040_00.000  
**Instrument Variable Name:** WKDAYR  
**QuestionnaireFileName:** Sample Adult

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<thead>
<tr>
<th>Code</th>
<th>Description</th>
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</thead>
<tbody>
<tr>
<td>000</td>
<td>None</td>
</tr>
<tr>
<td>001-366</td>
<td>1-366 days</td>
</tr>
<tr>
<td>997</td>
<td>Refused</td>
</tr>
<tr>
<td>999</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

**QuestionText:** During the PAST 12 MONTHS, that is, since {12-month ref. date}, ABOUT how many days did you miss work at a job or business because of illness or injury (do not include maternity leave)?

* Enter '0' for None.

**UniverseText:** 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

**SkipInstructions:**  
<0-366,R,D> [goto BEDDAYR]  
<120-366> [goto ERR_WKDAYR]

**Soft Edit:**  
* [Fill: WKDAYR] is an unusually large number.  
* Please verify.

---

### AHS.050_00.000: BEDDAYR

**Question ID:** AHS.050_00.000  
**Instrument Variable Name:** BEDDAYR  
**QuestionnaireFileName:** Sample Adult

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
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<tbody>
<tr>
<td>000</td>
<td>None</td>
</tr>
<tr>
<td>001-366</td>
<td>1-366 days</td>
</tr>
<tr>
<td>997</td>
<td>Refused</td>
</tr>
<tr>
<td>999</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

**QuestionText:** During the PAST 12 MONTHS, that is, since {12-month ref. date}, ABOUT how many days did illness or injury keep you in bed more than half of the day (include days while an overnight patient in a hospital)?

* Enter '0' for None.

**UniverseText:** Sample adults 18+

**SkipInstructions:**  
<0-366,R,D> [goto AHSTATYR]  
<120-366> [goto ERR_BEDDAYR]

**Soft Edit:**  
* [Fill: BEDDAYR] is an unusually large number.  
* Please verify.
Question ID:    AHS.060_00.000  Instrument Variable Name:    AHSTATYR  QuestionnaireFileName:    Sample Adult

QuestionText:   Compared with 12 MONTHS AGO, would you say your health is better, worse, or about the same?

   1   Better
   2   Worse
   3   About the same
   7   Refused
   9   Don't know

UniverseText:   Sample adults 18+

SkipInstructions:   <1-3,R,D> [goto SPECEQ]

Question ID:    AHS.070_00.000  Instrument Variable Name:    SPECEQ  QuestionnaireFileName:    Sample Adult

QuestionText:   Do you now have any health problem that requires you to use special equipment, such as a cane, a wheelchair, a special bed, or a special telephone?

   1   Yes
   2   No
   7   Refused
   9   Don't know

UniverseText:   Sample adults 18+

SkipInstructions:   <1,2,R,D> [goto FLWALK]
The next questions ask about difficulties you may have doing certain activities because of a HEALTH PROBLEM. By "health problem" we mean any physical, mental, or emotional problem or illness (not including pregnancy).

By yourself, and without using any special equipment, how difficult is it for you to...

...Walk a quarter of a mile - about 3 city blocks?

0  Not at all difficult
1  Only a little difficult
2  Somewhat difficult
3  Very difficult
4  Can't do at all
6  Do not do this activity
7  Refused
9  Don't know

Sample adults 18+

* Read lead-in if necessary.

By yourself, and without using any special equipment, how difficult is it for you to...

...Walk up 10 steps without resting?

0  Not at all difficult
1  Only a little difficult
2  Somewhat difficult
3  Very difficult
4  Can't do at all
6  Do not do this activity
7  Refused
9  Don't know

Sample adults 18+

<0-4,6,R,D> [goto FLCLIMB]
**2012 NHIS Questionnaire - Sample Adult**

**Adult Health Status & Limitations**

**Document Version Date: 23-May-13**

---

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

**QuestionText:**

*(book) A6*

* Read lead-in if necessary.

By yourself, and without using any special equipment, how difficult is it for you to...

...Stand or be on your feet for about 2 hours?

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td>Not at all difficult</td>
</tr>
<tr>
<td>1</td>
<td>Only a little difficult</td>
</tr>
<tr>
<td>2</td>
<td>Somewhat difficult</td>
</tr>
<tr>
<td>3</td>
<td>Very difficult</td>
</tr>
<tr>
<td>4</td>
<td>Can't do at all</td>
</tr>
<tr>
<td>6</td>
<td>Do not do this activity</td>
</tr>
<tr>
<td>7</td>
<td>Refused</td>
</tr>
<tr>
<td>9</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

**UniverseText:** Sample adults 18+

**SkipInstructions:** \(<0-4,6,R,D> \text{ [go to FLSIT]}\)

---

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

**QuestionText:**

*(book) A6*

* Read lead-in if necessary.

By yourself, and without using any special equipment, how difficult is it for you to...

...Sit for about 2 hours?

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td>Not at all difficult</td>
</tr>
<tr>
<td>1</td>
<td>Only a little difficult</td>
</tr>
<tr>
<td>2</td>
<td>Somewhat difficult</td>
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<tr>
<td>3</td>
<td>Very difficult</td>
</tr>
<tr>
<td>4</td>
<td>Can't do at all</td>
</tr>
<tr>
<td>6</td>
<td>Do not do this activity</td>
</tr>
<tr>
<td>7</td>
<td>Refused</td>
</tr>
<tr>
<td>9</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

**UniverseText:** Sample adults 18+

**SkipInstructions:** \(<0-4,6,R,D> \text{ [go to FLSTOOP]}\)
**2012 NHIS Questionnaire - Sample Adult**

**Adult Health Status & Limitations**

Document Version Date: 23-May-13

---

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

**QuestionText:**

*(book) A6*

*Read lead-in if necessary.*

By yourself, and without using any special equipment, how difficult is it for you to...  
...Stoop, bend, or kneel?

0 Not at all difficult  
1 Only a little difficult  
2 Somewhat difficult  
3 Very difficult  
4 Can't do at all  
6 Do not do this activity  
7 Refused  
9 Don't know

**UniverseText:** Sample adults 18+

**SkipInstructions:** <0-4,6,R,D> [goto FLREACH]

---

**Question ID:** AHS.091_06.000  **Instrument Variable Name:** FLREACH  **QuestionnaireFileName:** Sample Adult

**QuestionText:**

*(book) A6*

*Read lead-in if necessary.*

By yourself, and without using any special equipment, how difficult is it for you to...  
...Reach up over your head?

0 Not at all difficult  
1 Only a little difficult  
2 Somewhat difficult  
3 Very difficult  
4 Can't do at all  
6 Do not do this activity  
7 Refused  
9 Don't know

**UniverseText:** Sample adults 18+

**SkipInstructions:** <0-4,6,R,D> [goto FLGRASP]
A6

* Read lead-in if necessary.

By yourself, and without using any special equipment, how difficult is it for you to...

...Use your fingers to grasp or handle small objects?

0  Not at all difficult
1  Only a little difficult
2  Somewhat difficult
3  Very difficult
4  Can't do at all
6  Do not do this activity
7  Refused
9  Don't know

Sample adults 18+

FLGRASP

AHS.141_01.000

Question ID:  Instrument Variable Name:  QuestionnaireFileName:

Sample Adult

A6

* Read lead-in if necessary.

By yourself, and without using any special equipment, how difficult is it for you to...

...Lift or carry something as heavy as 10 pounds such as a full bag of groceries?

0  Not at all difficult
1  Only a little difficult
2  Somewhat difficult
3  Very difficult
4  Can't do at all
6  Do not do this activity
7  Refused
9  Don't know

Sample adults 18+

FLCARRY

AHS.141_02.000

Question ID:  Instrument Variable Name:  QuestionnaireFileName:

Sample Adult

FLPUSH

FlCARRY

<0-4,6,R,D> [goto FLPUSH]
2012 NHIS Questionnaire - Sample Adult
Adult Health Status & Limitations

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

QuestionText: (book) A6

* Read lead-in if necessary.

By yourself, and without using any special equipment, how difficult is it for you to...

...Push or pull large objects like a living room chair?

0  Not at all difficult
1  Only a little difficult
2  Somewhat difficult
3  Very difficult
4  Can't do at all
6  Do not do this activity
7  Refused
9  Don't know

UniverseText: Sample adults 18+

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

---

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

QuestionText: (book) A6

* Read lead-in if necessary.

By yourself, and without using any special equipment, how difficult is it for you to...

...Go out to things like shopping, movies, or sporting events?

0  Not at all difficult
1  Only a little difficult
2  Somewhat difficult
3  Very difficult
4  Can't do at all
6  Do not do this activity
7  Refused
9  Don't know

UniverseText: Sample adults 18+

SkipInstructions: <0-4,6,R,D> [goto FLSOCCL]
### 2012 NHIS Questionnaire - Sample Adult

#### Adult Health Status & Limitations

**Document Version Date: 23-May-13**

<table>
<thead>
<tr>
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<th>AHS.171_02.000</th>
<th>Instrument Variable Name:</th>
<th>FLSOCL</th>
<th>QuestionnaireFileName:</th>
<th>Sample Adult</th>
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<tbody>
<tr>
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<td><em>(book) A6</em></td>
<td></td>
<td></td>
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</tr>
<tr>
<td></td>
<td><em>Read lead-in if necessary.</em></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>By yourself, and without using any special equipment, how difficult is it for you to...</td>
<td></td>
<td></td>
<td></td>
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</tr>
<tr>
<td></td>
<td>...Participate in social activities such as visiting friends, attending clubs and meetings, going to parties?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>0</td>
<td>Not at all difficult</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>1</td>
<td>Only a little difficult</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>2</td>
<td>Somewhat difficult</td>
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<td></td>
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<tr>
<td></td>
<td>3</td>
<td>Very difficult</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>4</td>
<td>Can't do at all</td>
<td></td>
<td></td>
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</tr>
<tr>
<td></td>
<td>6</td>
<td>Do not do this activity</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>7</td>
<td>Refused</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>9</td>
<td>Don't know</td>
<td></td>
<td></td>
<td></td>
</tr>
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</table>

**UniverseText:** Sample adults 18+

**SkipInstructions:** `<0-4,R,D> [goto FLRELAX]`

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<th>AHS.171_03.000</th>
<th>Instrument Variable Name:</th>
<th>FLRELAX</th>
<th>QuestionnaireFileName:</th>
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<tbody>
<tr>
<td><strong>QuestionText:</strong></td>
<td><em>(book) A6</em></td>
<td></td>
<td></td>
<td></td>
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</tr>
<tr>
<td></td>
<td><em>Read lead-in if necessary.</em></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>By yourself, and without using any special equipment, how difficult is it for you to...</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>...Do things to relax at home or for leisure (reading, watching TV, sewing, listening to music)?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>0</td>
<td>Not at all difficult</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>1</td>
<td>Only a little difficult</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>2</td>
<td>Somewhat difficult</td>
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<td></td>
<td>3</td>
<td>Very difficult</td>
<td></td>
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</tr>
<tr>
<td></td>
<td>4</td>
<td>Can't do at all</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>6</td>
<td>Do not do this activity</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>7</td>
<td>Refused</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>9</td>
<td>Don't know</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**UniverseText:** Sample adults 18+

**SkipInstructions:** `<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)
What condition or health problem causes you to have difficulty with [fill1: condition 1, condition 2 or condition 3 (as specified in AHS.091_1 through AHS.171_3)][fill2: these activities]?

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

* Do not probe, except to clarify answer.

01 Vision/problem seeing
02 Hearing problem
03 Arthritis/rheumatism
04 Back or neck problem
05 Fracture, bone/joint injury
06 Other injury
07 Heart problem
08 Stroke problem
09 Hypertension/high blood pressure
10 Diabetes
11 Lung/breathing problem(for example, asthma and emphysema)
12 Cancer
13 Birth defect
14 Intellectual disability, also known as mental retardation
15 Other developmental problem (for example, cerebral palsy)
16 Senility
17 Depression/anxiety/emotional problem
18 Weight problem
19 Missing limbs (fingers, toes or digits), amputee
20 Kidney, bladder or renal problems
21 Circulation problems (including blood clots)
22 Benign Tumors, Cysts
23 Fibromyalgia, lupus
24 Osteoporosis, tendinitis
25 Epilepsy, seizures
26 Multiple Sclerosis (MS), Muscular Dystrophy (MD)
27 Polio(myelitis), paralysis, para/quadriplegia
28 Parkinson's disease, other tremors
29 Other nerve damage, including carpal tunnel syndrome
30 Hernia
31 Ulcer
32 Varicose veins, hemorrhoids
33 Thyroid problems, Grave's disease, gout
34 Knee problems (not arthritis (03), not joint injury(05))
35 Migraine headaches (not just headaches)
90 Other impairment/problem (Specify one)
91 Other impairment/problem (Specify one)
97 Refused
99 Don't know/Not sure
UniverseText: 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).

SkipInstructions: [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

QuestionText: * Enter other impairment/problem.

Verbatim

<table>
<thead>
<tr>
<th></th>
<th>Verbatim response</th>
</tr>
</thead>
<tbody>
<tr>
<td>7</td>
<td>Refused</td>
</tr>
<tr>
<td>9</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

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

SkipInstructions: <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

Hard Edit: $ You should enter something specific.

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

QuestionText: * Enter other impairment/problem.

Verbatim

<table>
<thead>
<tr>
<th></th>
<th>Verbatim response</th>
</tr>
</thead>
<tbody>
<tr>
<td>7</td>
<td>Refused</td>
</tr>
<tr>
<td>9</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

UniverseText: 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

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

Hard Edit: $ You should enter something specific.
**QuestionText:**

1 of 2

How long have you had a vision problem or problem seeing?

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

* Enter '95' for 95 or more.

* Enter '96' if since birth.

<table>
<thead>
<tr>
<th>01-94</th>
<th>01-94</th>
</tr>
</thead>
<tbody>
<tr>
<td>95</td>
<td>95+</td>
</tr>
<tr>
<td>96</td>
<td>Since birth</td>
</tr>
<tr>
<td>97</td>
<td>Refused</td>
</tr>
<tr>
<td>99</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

**UniverseText:**

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

**SkipInstructions:**

<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

QuestionText:

2 of 2

* Enter time period for time with vision problem or problem seeing.

1  Day(s)
2  Week(s)
3  Month(s)
4  Year(s)
6  Since birth
7  Refused
9  Don't know

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

SkipInstructions: <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

Hard Edit:

ERR1_AHCL01T

*Time with condition cannot be greater than age.
* Please correct.

ERR2_AHCL01T

* "6" not selectable.
### Question Text:

1 of 2

**How long have you had a hearing problem?**

* Enter number for time with a hearing problem.

* Enter '95'' for 95 or more.

* Enter "96" if since birth.

<table>
<thead>
<tr>
<th>Value</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>01-94</td>
<td>01-94</td>
</tr>
<tr>
<td>95</td>
<td>95+</td>
</tr>
<tr>
<td>96</td>
<td>Since birth</td>
</tr>
<tr>
<td>97</td>
<td>Refused</td>
</tr>
<tr>
<td>99</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

### Universe Text:

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

### Skip Instructions:

1. `<1-95,D>[goto AHCL02T]`
2. `<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)]`
3. `<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)]`
* Enter time period for time with hearing problem.

1  Day(s)
2  Week(s)
3  Month(s)
4  Year(s)
6  Since birth
7  Refused
9  Don't know

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

<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

**Hard Edit:**

ERR1_AHCL02T

* Time with condition cannot be greater than age.
* Please correct.

ERR2_AHCL02T

* "6" not selectable.
How long have you had arthritis or rheumatism?

* Enter number for time with arthritis or rheumatism.

* Enter '95" for 95 or more.

* Enter "96" if since birth.

01-94  01-94
95    95+
96    Since birth
97    Refused
99    Don't know

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

* Time with condition cannot be greater than age.
* Please correct.
How long have you had a back or neck problem?

* Enter number for time with back or neck problem.

* Enter '95" for 95 or more.

* Enter "96" if since birth.

01-94  
95  
96 Since birth  
97 Refused  
99 Don't know

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

* Enter time period for time with back or neck problem.

1 Day(s)  
2 Week(s)  
3 Month(s)  
4 Year(s)  
6 Since birth  
7 Refused  
9 Don't know

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

* Time with condition cannot be greater than age.
* Please correct.
How long have you had a fracture, bone, or joint injury?

* Enter number for time with a fracture, bone, or joint injury.
* Enter '95'' for 95 or more.
* Enter "96" if since birth.

01-94
95
96
Since birth
97
Refused
99
Don't know

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

1 2 3 4 6 7 Day(s) Week(s) Month(s) Year(s) Since birth Refused Don't know

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

Time with condition cannot be greater than age.
* Please correct.
How long have you had the (fill: other) injury that caused your limitation?

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

* Enter '95" for 95 or more.

* Enter "96" if since birth.

01-94 01-94
95 95+
96 Since birth
97 Refused
99 Don't know

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

* Enter time period for time with (fill: other) injury.

1 Day(s)
2 Week(s)
3 Month(s)
4 Year(s)
6 Since birth
7 Refused
9 Don't know

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

* Time with condition cannot be greater than age.
* Please correct.
Question ID: AHS.306_01.000  Instrument Variable Name: AHCL07N  QuestionnaireFileName: Sample Adult

QuestionText: 1 of 2

How long have you had a heart problem?

* Enter number for time with a heart problem.

* Enter '95" for 95 or more.

* Enter "96" if since birth.

01-94
95
96  Since birth
97  Refused
99  Don't know

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

SkipInstructions:
<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

QuestionText: 2 of 2

* Enter time period for time with heart problem.

1  Day(s)
2  Week(s)
3  Month(s)
4  Year(s)
6  Since birth
7  Refused
9  Don't know

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

SkipInstructions:
<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

Hard Edit:
ERR_AHCL07T
* Time with condition cannot be greater than age.
* Please correct.
How long have you had a stroke problem?

* Enter number for time with a stroke problem.

* Enter '95" for 95 or more.

* Enter "96" if since birth.

01-94
95
96 Since birth
97 Refused
99 Don't know

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

* Enter time period for time with stroke problem.

1 Day(s)
2 Week(s)
3 Month(s)
4 Year(s)
6 Since birth
7 Refused
9 Don't know

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

* Time with condition cannot be greater than age.
* Please correct.
How long have you had hypertension or high blood pressure?

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

* Enter '95'' for 95 or more.

* Enter "96" if since birth.

01-94
95
96
97
99

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

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

1 Day(s)
2 Week(s)
3 Month(s)
4 Year(s)
6 Since birth
7 Refused
9 Don't know

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

* Time with condition cannot be greater than age.
* Please correct.
### 2012 NHIS Questionnaire - Sample Adult

**Adult Health Status & Limitations**

**Document Version Date:** 23-May-13

---

<table>
<thead>
<tr>
<th>Question ID:</th>
<th>AHS.309_01.000</th>
<th>Instrument Variable Name: AHCL10N</th>
<th>QuestionnaireFileName: Sample Adult</th>
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</thead>
<tbody>
<tr>
<td><strong>QuestionText:</strong></td>
<td>1 of 2</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>How long have you had diabetes?</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>* Enter number for time with diabetes.</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>* Enter &quot;95&quot; for 95 or more.</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>* Enter &quot;96&quot; if since birth.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>01-94</td>
<td>01-94</td>
<td></td>
<td></td>
</tr>
<tr>
<td>95</td>
<td>95+</td>
<td></td>
<td></td>
</tr>
<tr>
<td>96</td>
<td>Since birth</td>
<td></td>
<td></td>
</tr>
<tr>
<td>97</td>
<td>Refused</td>
<td></td>
<td></td>
</tr>
<tr>
<td>99</td>
<td>Don't know</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**UniverseText:** Sample adults 18+ who had difficulty due to diabetes

**SkipInstructions:**
- `<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)]`

---

<table>
<thead>
<tr>
<th>Question ID:</th>
<th>AHS.309_02.000</th>
<th>Instrument Variable Name: AHCL10T</th>
<th>QuestionnaireFileName: Sample Adult</th>
</tr>
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<tbody>
<tr>
<td><strong>QuestionText:</strong></td>
<td>2 of 2</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>* Enter time period for time with diabetes.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1</td>
<td>Day(s)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Week(s)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Month(s)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Year(s)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>Since Birth</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>Refused</td>
<td></td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>Don't know</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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

**SkipInstructions:**
- `<1-4,R,D>[goto AHCL10T]`
- `<6> goto ERR2_AHCL10T [if [AHCL10N = Number greater than person years old and AHCL10T= 4]] goto ERR1_AHCL10T`

**Hard Edit:**
- ERR_AHCL10T

* Time with condition cannot be greater than age.
* Please correct.
How long have you had a lung or breathing problem (e.g. asthma and emphysema)?

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

* Enter '95" for 95 or more.

* Enter "96" if since birth.

01-94
01-94
95
95+
96
Since birth
97
Refused
99
Don't know

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

* Enter time period for time with lung or breathing problem (e.g. asthma and emphysema).

1
Day(s)
2
Week(s)
3
Month(s)
4
Year(s)
6
Since birth
7
Refused
9
Don't know

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

* Time with condition cannot be greater than age.

* Please correct.
**2012 NHIS Questionnaire - Sample Adult**

**Adult Health Status & Limitations**

**Document Version Date:** 23-May-13

---

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

**QuestionText:**
1 of 2

How long have you had cancer?

* Enter number for time with cancer.

* Enter "95" for 95 or more.

* Enter "96" if since birth.

01-94
95
96 Since birth
97 Refused
99 Don't know

**UniverseText:** Sample adults 18+ who had difficulty due to cancer

**SkipInstructions:**

<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

**QuestionText:**
2 of 2

* Enter time period for time with cancer.

1 Day(s)
2 Week(s)
3 Month(s)
4 Year(s)
6 Since birth
7 Refused
9 Don't know

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

**SkipInstructions:**

<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

**Hard Edit:**

ERR_AHCL12T

* Time with condition cannot be greater than age.

* Please correct.
How long have you had intellectual disability, also known as mental retardation?

* Enter number for time with intellectual disability/mental retardation.

* Enter "95" for 95 or more.

* Enter "96" if since birth.

01-94
95 95+ Since birth
97 Refused
99 Don't know

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

<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)]

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

<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

* Time with condition cannot be greater than age.
* Please correct.
### Question ID: AHS.314_01.000  
#### Instrument Variable Name: AHCL15N  
#### QuestionnaireFileName: Sample Adult  
#### QuestionText:  
1 of 2

How long have you had a developmental problem (e.g., cerebral palsy)?

* Enter number for time with a developmental problem.

* Enter '95'' for 95 or more.

* Enter "96" if since birth.

<table>
<thead>
<tr>
<th>Number</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>01-94</td>
<td>01-94</td>
</tr>
<tr>
<td>95</td>
<td>95+</td>
</tr>
<tr>
<td>96</td>
<td>Since birth</td>
</tr>
<tr>
<td>97</td>
<td>Refused</td>
</tr>
<tr>
<td>99</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

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

#### SkipInstructions:  
- `<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)]

### Question ID: AHS.314_02.000  
#### Instrument Variable Name: AHCL15T  
#### QuestionnaireFileName: Sample Adult  
#### QuestionText:  
2 of 2

* Enter time period for time with developmental problem.

1. Day(s)
2. Week(s)
3. Month(s)
4. Year(s)
5. Since birth
6. Refused
7. Don't know

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

#### SkipInstructions:  
- `<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

#### HardEdit:  
ERR_AHCL15T
* Time with condition cannot be greater than age.
* Please correct.
How long have you had senility?

* Enter number for time with senility.
* Enter "95" for 95 or more.
* Enter "96" if since birth.

01-94  1-94
95     95+
96     Since birth
97     Refused
99     Don't know

Sample adults 18+ who had difficulty due to senility

* Time with condition cannot be greater than age.
* Please correct.
2012 NHIS Questionnaire - Sample Adult
Adult Health Status & Limitations
Document Version Date: 23-May-13

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

QuestionText: 1 of 2

How long have you had depression, anxiety, or an emotional problem?

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

* Enter '95'' for 95 or more.

* Enter "96" if since birth.

01-94
95
96  Since birth
97  Refused
99  Don't know

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

SkipInstructions: <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

QuestionText: 2 of 2

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

1  Day(s)
2  Week(s)
3  Month(s)
4  Year(s)
6  Since birth
7  Refused
9  Don't know

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

SkipInstructions: <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

Hard Edit: ERR_AHCL17T

* Time with condition cannot be greater than age.
* Please correct.
How long have you had a weight problem?

* Enter number for time with a weight problem.
* Enter '95'' for 95 or more.
* Enter "96" if since birth.

01-94
95
96 Since birth
97 Refused
99 Don't know

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

* Time with condition cannot be greater than age.
* Please correct.
How long have you had a missing limb (finger, toe, or digit)?

* Enter number for time with a missing limb.

* Enter '95" for 95 or more.

* Enter "96" if since birth.

01-94
95
96 Since birth
97 Refused
99 Don't know

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

* Enter time period for time with missing limb.

1 Day(s)
2 Week(s)
3 Month(s)
4 Year(s)
6 Since birth
7 Refused
9 Don't know

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

* Time with condition cannot be greater than age.
* Please correct.
### 2012 NHIS Questionnaire - Sample Adult
#### Adult Health Status & Limitations

**Document Version Date:** 23-May-13

<table>
<thead>
<tr>
<th>Question ID:</th>
<th>AHS.319_01.000</th>
<th>Instrument Variable Name:</th>
<th>AHCL20N</th>
<th>QuestionnaireFileName:</th>
<th>Sample Adult</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>QuestionText:</strong></td>
<td>1 of 2</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>How long have you had a kidney, bladder or renal problem?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>* Enter number for time with a kidney, bladder or renal problem.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>* Enter &quot;95&quot; for 95 or more.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>* Enter &quot;96&quot; if since birth.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>01-94</td>
<td>1-94</td>
<td></td>
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<tr>
<td>96</td>
<td>Since birth</td>
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<td></td>
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<td></td>
</tr>
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<td>97</td>
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</tr>
<tr>
<td>99</td>
<td>Don't know</td>
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<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>UniverseText:</strong></td>
<td>Sample adults 18+ who had difficulty due to a kidney, bladder or renal problem</td>
<td></td>
<td></td>
<td></td>
<td></td>
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<tr>
<td><strong>SkipInstructions:</strong></td>
<td><code>&lt;1-95,D&gt;[goto AHCL20T]</code></td>
<td></td>
<td></td>
<td><code>&lt;R&gt;[store &quot;R&quot; 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)]</code></td>
<td><code>&lt;96&gt;[store &quot;6&quot; 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)]</code></td>
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<th>AHS.319_02.000</th>
<th>Instrument Variable Name:</th>
<th>AHCL20T</th>
<th>QuestionnaireFileName:</th>
<th>Sample Adult</th>
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<td>2 of 2</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>* Enter time period for time with kidney, bladder or renal problem.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1</td>
<td>Day(s)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Week(s)</td>
<td></td>
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</tr>
<tr>
<td>3</td>
<td>Month(s)</td>
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<tr>
<td>4</td>
<td>Year(s)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>Since birth</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>Refused</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>Don't know</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>UniverseText:</strong></td>
<td>Sample adults 18+ who answered 1-95, D for the &quot;number&quot; part of this 2-part question</td>
<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td><strong>SkipInstructions:</strong></td>
<td><code>&lt;1- 4, R,D&gt;[goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]</code></td>
<td></td>
<td></td>
<td><code>&lt;6&gt; goto ERR2_AHCL20T</code></td>
<td><code>[if [AHCL20N = Number greater than person years old and AHCL20T= 4]] goto ERR1_AHCL20T</code></td>
</tr>
</tbody>
</table>

**Hard Edit:**
* Time with condition cannot be greater than age.
* Please correct.
How long have you had a circulation problem (including blood clots)?

* Enter number for time with a circulation problem.

* Enter '95" for 95 or more.

* Enter "96" if since birth.

01-94
1-94
95
95+
96
Since birth
97
Refused
99
Don't know

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)]

* Enter time period for time with circulation problem.

1 Day(s)
2 Week(s)
3 Month(s)
4 Year(s)
6 Since birth
7 Refused
9 Don't know

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 [AHCL21IN = Number greater than person years old and AHCL21T= 4]] goto ERR1_AHCL21T

Hard Edit:

ERR_AHCL21T
* Time with condition cannot be greater than age.
* Please correct.
2012 NHIS Questionnaire - Sample Adult
Adult Health Status & Limitations

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

**QuestionText:** 1 of 2

How long have you had benign tumors or cysts?

* Enter number for time with benign tumors or cysts.

* Enter '95' for 95 or more.

* Enter "96" if since birth.

01-94  95  96  Since birth  97  Refused  99  Don't know

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

**SkipInstructions:**

<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

**QuestionText:** 2 of 2

* Enter time period for time with benign tumors or cysts.

1  Day(s)  2  Week(s)  3  Month(s)  4  Year(s)  6  Since birth  7  Refused  9  Don't know

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

**SkipInstructions:**

<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

**Hard Edit:**

ERR_AHCL22T

* Time with condition cannot be greater than age.

* Please correct.
How long have you had fibromyalgia or lupus?

* Enter number for time with fibromyalgia or lupus.

* Enter '95" for 95 or more.

* Enter "96" if since birth.

01-94  01-94
95    95+
96    Since birth
97    Refused
99    Don't know

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

* Time with condition cannot be greater than age.
* Please correct.
How long have you had osteoporosis or tendinitis?
* Enter number for time with osteoporosis or tendinitis.
* Enter "95" for 95 or more.
* Enter "96" if since birth.

01-94 1-94
95 95+
96 Since birth
97 Refused
99 Don't know

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

* Time with condition cannot be greater than age.
* Please correct.
Question ID: AHS.324_01.000  Instrument Variable Name: AHCL25N  QuestionnaireFileName: Sample Adult

QuestionText: 1 of 2

How long have you had epilepsy or seizures?

* Enter number for time with epilepsy or seizures.

* Enter '95' for 95 or more.

* Enter "96" if since birth.

01-94  1-94
95     95+
96     Since birth
97     Refused
99     Don't know

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

SkipInstructions: <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

QuestionText: 2 of 2

* Enter time period for time with epilepsy or seizures.

1   Day(s)
2   Week(s)
3   Month(s)
4   Year(s)
6   Since birth
7   Refused
9   Don't know

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

SkipInstructions: <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

Hard Edit: ERR_AHCL25T

* Time with condition cannot be greater than age.
* Please correct.
How long have you had multiple sclerosis (MS) or muscular dystrophy (MD)?

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

* Enter '95" for 95 or more.

* Enter "96" if since birth.

01-94 1-94
95 95+
96 Since birth
97 Refused
99 Don't know

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

* Enter time period for time with multiple sclerosis or muscular dystrophy.

1 Day(s)
2 Week(s)
3 Month(s)
4 Year(s)
6 Since birth
7 Refused
9 Don't know

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

* Time with condition cannot be greater than age.
* Please correct.
How long have you had polio(myelitis), paralysis or para/quadriplegia?

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

* Enter '95'' for 95 or more.

* Enter "96" if since birth.

1 of 2

01-94
95
96
97
99

01-94
95+
Since birth
Refused
Don't know

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

2 of 2

* Enter time period for time with polio(myelitis), paralysis or para/quadriplegia.

1
2
3
4
5
6
7
8
9

Day(s)
Week(s)
Month(s)
Year(s)
Since birth
Refused
Don't know

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

Hard Edit:

* Time with condition cannot be greater than age.

* Please correct.
1 of 2

How long have you had Parkinson's disease or tremors?

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

* Enter '95" for 95 or more.

* Enter "96" if since birth.

01-94
95
96 Since birth
97 Refused
99 Don't know

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

SkipInstructions:

<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)]

2 of 2

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

1 Day(s)
2 Week(s)
3 Month(s)
4 Year(s)
6 Since Birth
7 Refused
9 Don't know

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

SkipInstructions:

<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

Hard Edit: ERR_AHCL28T

* Time with condition cannot be greater than age.
* Please correct.
How long have you had nerve damage (including carpal tunnel syndrome)?

* Enter number for time with nerve damage (including carpal tunnel syndrome).
* Enter "95" for 95 or more.
* Enter "96" if since birth.

01-94
95
96
Since birth
97
Refused
99
Don't know

Sample adults 18+ who had difficulty due to nerve damage

* Enter time period for time with nerve damage.

1
Day(s)
2
Week(s)
3
Month(s)
4
Year(s)
6
Since birth
7
Refused
9
Don't know

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

* Time with condition cannot be greater than age.
* Please correct.
How long have you had a hernia?
* Enter number for time with a hernia.
* Enter "95" for 95 or more.
* Enter "96" if since birth.

01-94  01-94  
95   95+  
96  Since birth  
97    Refused  
99     Don't know

Sample adults 18+ who had difficulty due to a hernia

Time period for time with hernia.

1  Day(s)  
2  Week(s)  
3  Month(s)  
4  Year(s)  
6  Since birth  
7    Refused  
9      Don't know
How long have you had an ulcer?

* Enter number for time with an ulcer.

* Enter "95" for 95 or more.

* Enter "96" if since birth.

01-94
95
96
97
99

Sample adults 18+ who had difficulty due to an ulcer

* Enter time period for time with ulcer.

1 Day(s)
2 Week(s)
3 Month(s)
4 Year(s)
6 Since birth
7 Refused
9 Don't know

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

* Time with condition cannot be greater than age.
* Please correct.
**Question ID:** AHS.331_01.000  
**Instrument Variable Name:** AHCL32N  
**QuestionnaireFileName:** Sample Adult

**QuestionText:**

1 of 2

How long have you had varicose veins or hemorrhoids?

* Enter number for time with varicose veins or hemorrhoids.

* Enter '95'' for 95 or more.

* Enter "96" if since birth.

01-94  01-94
95   95+
96   Since birth
97   Refused
99   Don't know

**UniverseText:**

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

**SkipInstructions:**

<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

**QuestionText:**

2 of 2

* Enter time period for time with varicose veins or hemorrhoids.

1   Day(s)
2   Week(s)
3   Month(s)
4   Year(s)
6   Since birth
7   Refused
9   Don't know

**UniverseText:**

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

**SkipInstructions:**

<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

**Hard Edit:**

ERR_AHCL32T

* Time with condition cannot be greater than age.
* Please correct.
How long have you had a thyroid problem, Grave's disease or gout?

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

* Enter '95'' for 95 or more.

* Enter "96" if since birth.

01-94 01-94
95 95+
96 Since birth
97 Refused
99 Don't know

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

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

1 Day(s)
2 Week(s)
3 Month(s)
4 Year(s)
6 Since birth
7 Refused
9 Don't know

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

* Time with condition cannot be greater than age.
* Please correct.
How long have you had a knee problem?

* Enter number for time with a knee problem.

* Enter '95" for 95 or more.

* Enter "96" if since birth.

01-94 01-94
95 95+
96 Since birth
97 Refused
99 Don't know

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

<1-95,D> goto AHCL34T
<R> goto AHCL34T
<95> goto AHCL34T

* Enter time period for time with knee problem.

1 Day(s)
2 Week(s)
3 Month(s)
4 Year(s)
6 Since birth
7 Refused
9 Don't know

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

<1-4, R,D> goto AHCL34T
<6> goto ERR2_AHCL34T

* Time with condition cannot be greater than age.
* Please correct.
### Question ID: AHS.334_01.000  
**Instrument Variable Name:** AHCL35N  
**QuestionnaireFileName:** Sample Adult

**QuestionText:**

1 of 2

How long have you had migraine headaches?

* Enter number for time with migraine headaches.

* Enter '95" for 95 or more.

* Enter "96" if since birth.

<table>
<thead>
<tr>
<th>01-94</th>
<th>01-94</th>
</tr>
</thead>
<tbody>
<tr>
<td>95</td>
<td>95+</td>
</tr>
<tr>
<td>96</td>
<td>Since birth</td>
</tr>
<tr>
<td>97</td>
<td>Refused</td>
</tr>
<tr>
<td>99</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

**UniverseText:** Sample adults 18+ who had difficulty due to migraine headaches

**SkipInstructions:**

<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

**QuestionText:**

2 of 2

* Enter time period for time with migraine headaches.

| 1 | Day(s) |
| 2 | Week(s) |
| 3 | Month(s) |
| 4 | Year(s) |
| 6 | Since birth |
| 7 | Refused |
| 9 | Don't know |

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

**SkipInstructions:**

<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]  
<6> goto ERR2_AHCL35T  
<6> goto ERR2_AHCL35T  
<6> goto ERR2_AHCL35T  
<6>[if [AHCL35N = Number greater than person years old and AHCL35T= 4]] goto ERR1_AHCL35T

**Hard Edit:**

ERR1_AHCL35T

* Time with condition cannot be greater than age.  
* Please correct.
1 of 2

How long have you had {problem in AFLHCA90}?

* Enter number for time with {problem in AFLHCA90}.
* Enter "95" for 95 or more.
* Enter "96" if since birth.

01-94 01-94
95 95+
96 Since birth
97 Refused
99 Don't know

UniverseText: Sample adults 18+ who had difficulty due to {problem in AFLHCA90}

SkipInstructions: <1-95,D> [goto AHCL90T]
<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)]

2 of 2

* Enter time period for time with {problem in AFLHCA90}.

1 Day(s)
2 Week(s)
3 Month(s)
4 Year(s)
6 Since birth
7 Refused
9 Don't know

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

SkipInstructions: <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

Hard Edit: ERR_AHCL90T

* Time with condition cannot be greater than age.
* Please correct.
How long have you had {problem in AFLHCA91}?

* Enter number for time with {problem in AFLHCA91}.

* Enter '95" for 95 or more.

* Enter "96" if since birth.

01-94
95
96
97
99

Sample adults 18+ who had difficulty due to {problem in AFLHCA91}

* Enter time period for time with {problem in AFLHCA91}.

1
2
3
4
5
6
7
9

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

* Time with condition cannot be greater than age.
* Please correct.
### 2012 NHIS Questionnaire - Sample Adult

**Adult Health Behaviors**

*Document Version Date: 23-May-13*

<table>
<thead>
<tr>
<th>Question ID:</th>
<th>Instrument Variable Name:</th>
<th>QuestionnaireFileName:</th>
</tr>
</thead>
<tbody>
<tr>
<td>AHB.010_00.000</td>
<td>SMKEV</td>
<td>Sample Adult</td>
</tr>
</tbody>
</table>

**QuestionText:**

These next questions are about cigarette smoking.

Have you smoked at least 100 cigarettes in your ENTIRE LIFE?

- **1** Yes
- **2** No
- **7** Refused
- **9** Don't know

**UniverseText:**

Sample adults 18+

**SkipInstructions:**

<1>[goto SMKREG]
<2,R,D>[goto OTHCIGEV]

<table>
<thead>
<tr>
<th>Question ID:</th>
<th>Instrument Variable Name:</th>
<th>QuestionnaireFileName:</th>
</tr>
</thead>
<tbody>
<tr>
<td>AHB.020_00.000</td>
<td>SMKREG</td>
<td>Sample Adult</td>
</tr>
</tbody>
</table>

**QuestionText:**

How old were you when you FIRST started to smoke fairly regularly?

* Enter '6' if less than 6 years old.

* Enter '95' if 95 years old or older.

* Enter '96' if never smoked regularly.

- **06-84** 6 - 84 years
- **85** 85 years or older
- **96** Never smoked regularly
- **97** Refused
- **99** Don't know

**UniverseText:**

Sample adults 18+ who ever smoked 100 cigarettes

**SkipInstructions:**

<6-95,96,R,D> [goto SMKNOW]

[If SMKREG gt AGE and SMKREG ne <96>, goto ERR_SMKREG]

**Hard Edit:**

ERR_SMKREG

* Starting age exceeded current age.
* Please correct.
### Question ID: AHB.030_00.000  
**Instrument Variable Name:** SMKNOW  
**QuestionnaireFileName:** Sample Adult

**QuestionText:**  Do you NOW smoke cigarettes every day, some days or not at all?

- **1** Every day
- **2** Some days
- **3** Not at all
- **7** Refused
- **9** Don't know

**UniverseText:**  Sample adults 18+ who ever smoked 100 cigarettes

**SkipInstructions:**
- `<1>` [goto CIGSDA1]
- `<2>` [goto CIGDAMO]
- `<3>` [goto SMKQTNO]
- `<D,R>` [goto OTHCIGEV]

---

### Question ID: AHB.040_01.000  
**Instrument Variable Name:** SMKQTNO  
**QuestionnaireFileName:** Sample Adult

**QuestionText:**  1 of 2  
How long has it been since you quit smoking cigarettes?

* Enter number for time since quit smoking.

* Enter '95' for 95 years old or older.

- **01-94** 1 - 94
- **95** 95+
- **97** Refused
- **99** Don't know

**UniverseText:**  Sample adults 18+ who quit smoking

**SkipInstructions:**
- `<1-95>` [goto SMKQTTP]
- `<D,R>` [goto OTHCIGEV]
**2012 NHIS Questionnaire - Sample Adult**

**Adult Health Behaviors**

**Document Version Date:** 23-May-13

---

**Question ID:** AHB.040_02.000  
**Instrument Variable Name:** SMKQTTP  
**QuestionnaireFileName:** Sample Adult

**Question Text:**

* Enter time period for time since quit smoking.

1. Day(s)
2. Week(s)
3. Month(s)
4. Year(s)
7. Refused
9. Don't know

**Universe Text:** Sample adults 18+ who quit smoking

**Skip Instructions:**

<1-4> [goto OTHCIGEV]  
<4> [if SMKQTNO gt (AGE - <15>), goto ERR1_SMKQTTP]  
if (SMKREG + SMKQTNO gt AGE), goto ERR2_SMKQTTP.

**Hard Edit:**

ERR2_SMKQTTP

* Age started ([Fill1: SMKREG]) + years since quit ([Fill2: SMKQTNO]) exceeds current age ([Fill3: AGE]).  
* Please correct.

**Soft Edit:**

ERR1_SMKQTTP

* Respondent quit smoking before age 15?  
* Please verify.

---

**Question ID:** AHB.050_00.000  
**Instrument Variable Name:** CIGSDA1  
**QuestionnaireFileName:** Sample Adult

**Question Text:**

On the average, how many cigarettes do you now smoke a day?

* Enter '1' if less than 1 cigarette.

* Enter '95' if 95 or more cigarettes.

01-94  
1 - 94 cigarettes

95  
95+ cigarettes

97  
Refused

99  
Don't know

**Universe Text:** 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

**QuestionText:** On how many of the PAST 30 DAYS did you smoke a cigarette?

*Enter '0' for None.

- **00** None
- **01-30** 1-30 days
- **97** Refused
- **99** Don't know

**UniverseText:** Sample adults 18+ who are current some day smokers

**SkipInstructions:** <0>[goto CIGQTYR]
<1-30,R,D> [goto CIGSDA2]

---

**Question ID:** AHB.070_00.000  **Instrument Variable Name:** CIGSDA2  **QuestionnaireFileName:** Sample Adult

**QuestionText:** On the average, when you smoked during the PAST 30 DAYS, about how many cigarettes did you smoke a day?

* Enter '1' if less than 1.

* Enter '95' if 95 or more cigarettes.

- **01-94** 1-94 cigarettes
- **95** 95+ cigarettes
- **97** Refused
- **99** Don't know

**UniverseText:** Sample adults 18+ who are current some day smokers

**SkipInstructions:** <1-95,R,D> [goto CIGQTYR]
During the PAST 12 MONTHS, have you stopped smoking for more than one day BECAUSE YOU WERE TRYING TO QUIT SMOKING?

1  Yes
2  No
7  Refused
9  Don't know

Sample adults 18+ who are every day or someday smokers

These next questions are about your use of tobacco products OTHER THAN CIGARETTES.

Tobacco products OTHER THAN CIGARETTES that are smoked include cigars, pipes, water pipes or hookahs, very small cigars that look like cigarettes, bidis (bee-dees) or cigarillos (cig-a-ril-los).

Have you ever smoked tobacco products other than cigarettes EVEN ONE TIME?

* Do not include electronic cigarettes or e-cigarettes.

1  Yes
2  No
7  Refused
9  Don't know

Sample adults 18+
**2012 NHIS Questionnaire - Sample Adult**

**Adult Health Behaviors**

**Document Version Date:** 23-May-13

---

**Question ID:** AHB.085_00.020  **Instrument Variable Name:** OTHCIGED  **QuestionnaireFileName:** Sample Adult

**QuestionText:** Do you NOW smoke tobacco products other than cigarettes every day, some days, rarely, or not at all?

1. Every day
2. Some days
3. Rarely
4. Not at all
7. Refused
9. Don't know

**UniverseText:** Sample adults 18+ who have ever smoked tobacco products other than cigarettes

**SkipInstructions:** <1-4,R,D> [goto SMKLESEV]

---

**Question ID:** AHB.085_00.030  **Instrument Variable Name:** SMKLESEV  **QuestionnaireFileName:** Sample Adult

**QuestionText:** ? [F1]

Smokeless tobacco products are placed in the mouth or nose and can include chewing tobacco, snuff, dip, snus (snoose), or dissolvable tobacco.

Have you ever used smokeless tobacco products EVEN ONE TIME?

* Do not include nicotine replacement therapy products (patch, gum, lozenge, spray), which are considered smoking cessation treatments.

1. Yes
2. No
7. Refused
9. Don't know

**UniverseText:** Sample adults 18+

**SkipInstructions:** <1> [goto SMKLESED]
<2,R,D> [if SMKEV=1 or OTHCIGEV=1, [goto TOBLASYR]; else goto VIGNO]
2012 NHIS Questionnaire - Sample Adult

Adult Health Behaviors

Document Version Date: 23-May-13

Question ID: AHB.085_00.040  Instrument Variable Name: SMKLESED  QuestionnaireFileName: Sample Adult

QuestionText: Do you NOW use smokeless tobacco products every day, some days, rarely, or not at all?

1 Every day
2 Some days
3 Rarely
4 Not at all
7 Refused
9 Don't know

UniverseText: Sample adults 18+ who have ever used smokeless tobacco products

SkipInstructions: <1-4,R,D> goto TOBLASYR

---

Question ID: AHB.085_00.050  Instrument Variable Name: TOBLASYR  QuestionnaireFileName: Sample Adult

QuestionText: Around this time last year, were you using ANY KIND of tobacco product?

1 Yes
2 No
7 Refused
9 Don't know

UniverseText: Sample adults 18+ who smoked at least 100 cigarettes in their entire life, ever smoked tobacco products other than cigarettes, or ever used smokeless tobacco products

SkipInstructions: <1,2,R,D> If (TOBLASYR='1' or SMKNOW in('1','2') or OTHCIGED in('1','2','3') or SMKLESED in('1','2','3')) and CIGQTYR ne '2' [goto TOBQTYR];
Else If (TOBLASYR ne'1' & SMKNOW not in('1','2')& OTHCIGED not in('1','2','3') & SMKLESED not in('1','2','3'))
or CIGQTYR = '2' [goto VIGNO]
During the past 12 months, have you stopped using ALL KINDS of tobacco products for more than one day because you were trying to quit using tobacco?

* “All kinds” means trying to quit using tobacco completely, including smoking cigarettes, smoking products other than cigarettes, and using smokeless tobacco products.

1 Yes
2 No
7 Refused
9 Don’t know

Sample adults 18+ who were using tobacco products around this time last year or were current users of any tobacco products (cigarettes, non-cigarette tobacco, or smokeless)

The next questions are about physical activities (exercise, sports, physically active hobbies...) that you may do in your LEISURE time.

How often do you do VIGOROUS leisure-time physical activities for AT LEAST 10 MINUTES that cause HEAVY sweating or LARGE increases in breathing or heart rate?

* Read if necessary: How many times per day, per week, per month, or per year do you do these activities?
* Enter number for vigorous leisure-time physical activities.
* Enter ‘0’ for Never.
* Enter ‘996’ if unable to do this type of activity.

000 Never
001-995 1-995 time(s)
996 Unable to do this type activity
997 Refused
999 Don’t know

Sample adults 18+
### 2012 NHIS Questionnaire - Sample Adult

**Adult Health Behaviors**

**Document Version Date:** 23-May-13

<table>
<thead>
<tr>
<th>Question ID:</th>
<th>AHB.090_02.000</th>
<th>Instrument Variable Name:</th>
<th>VIGTP</th>
<th>QuestionnaireFileName:</th>
<th>Sample Adult</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>QuestionText:</strong></td>
<td>2 of 2</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
* Enter time period for vigorous leisure-time physical activities. | |
|  | 0 | Never | |
|  | 1 | Per day | |
|  | 2 | Per week | |
|  | 3 | Per month | |
|  | 4 | Per year | |
|  | 6 | Unable to do this activity | |
|  | 7 | Refused | |
|  | 9 | Don't know | |

**UniverseText:** Sample adults 18+ who do vigorous activities

**SkipInstructions:**  
<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

**Soft Edit:**  
ERR1_VIGTP  
* [Fill1: VIGNO] times per [Fill2: VIGTP] is unusually high.  
* Please verify.

<table>
<thead>
<tr>
<th>Question ID:</th>
<th>AHB.100_01.000</th>
<th>Instrument Variable Name:</th>
<th>VIGLNGNO</th>
<th>QuestionnaireFileName:</th>
<th>Sample Adult</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>QuestionText:</strong></td>
<td>1 of 2</td>
<td>About how long do you do these vigorous leisure-time physical activities each time?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>001-995</td>
<td>1-995</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>997</td>
<td>Refused</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>999</td>
<td>Don't know</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**UniverseText:** Sample adults 18+ who do vigorous activities

**SkipInstructions:**  
<1-995>[goto VIGLNGTP]  
<R,D>[goto MODNO]
2012 NHIS Questionnaire - Sample Adult

Adult Health Behaviors

Document Version Date: 23-May-13

---

**Question ID:** AHB.100_02.000  **Instrument Variable Name:** VIGLNGTP  **QuestionnaireFileName:** Sample Adult

**QuestionText:**

2 of 2

* Enter time period for length of vigorous leisure-time physical activities.

1  Minutes
2  Hours
7  Refused
9  Don't know

**UniverseText:** Sample adults 18+ who do vigorous activities

**SkipInstructions:**

&lt;1,2&gt;goto MODNO

if VIGLNGNO lt &lt;10&gt; and VIGLNGTP eq &lt;1&gt; goto ERR1_VIGLNGTP;

if (VIGLNGNO gt &lt;90&gt; and VIGLNGTP eq &lt;1&gt;) or if VIGLNGNO gt &lt;2&gt; and VIGLNGTP eq &lt;2&gt; goto ERR2_VIGLNGTP

**Hard Edit:**

ERR1_VIGLNGTP

* Question asked for activities lasting at least 10 minutes.
* Please correct.

**Soft Edit:**

ERR2_VIGLNGTP

* [Fill1: VIGLNGNO] [fill2: VIGLNGTP] is unusually high.
* Please verify.

---

**Question ID:** AHB.110_01.000  **Instrument Variable Name:** MODNO  **QuestionnaireFileName:** Sample Adult

**QuestionText:**

How often do you do LIGHT OR MODERATE LEISURE-TIME physical activities for AT LEAST 10 MINUTES that cause ONLY LIGHT sweating or a SLIGHT to MODERATE increase in breathing or heart rate?

* If necessary, prompt with: How many times per day, per week, per month, or per year do you do these activities?

* Enter number of light or moderate leisure-time physical activities.

* Enter '0' for Never.

* Enter '996' if unable to do this type of activity.

000  Never
001-995  1-995 time(s)
996  Unable to do this type activity
997  Refused
999  Don't know

**UniverseText:** Sample adults 18+

**SkipInstructions:**

&lt;1-995&gt;[goto MODTP]

&lt;0, 996, R,D&gt;[goto STRNGNO]
* Enter time period for light or moderate leisure-time physical activities

<table>
<thead>
<tr>
<th>Value</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td>Never</td>
</tr>
<tr>
<td>1</td>
<td>Per day</td>
</tr>
<tr>
<td>2</td>
<td>Per week</td>
</tr>
<tr>
<td>3</td>
<td>Per month</td>
</tr>
<tr>
<td>4</td>
<td>Per year</td>
</tr>
<tr>
<td>6</td>
<td>Unable to do this activity</td>
</tr>
<tr>
<td>7</td>
<td>Refused</td>
</tr>
<tr>
<td>9</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

UniverseText: Sample adults 18+ who do light or moderate activities

SkipInstructions: <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

Soft Edit: ERR_MODNO

* [Fill1: MODNO] times per [fill2: MODTP] is unusually high.
* Please verify.

---

* Enter number for length of light or moderate leisure-time physical activities.

<table>
<thead>
<tr>
<th>Value</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>001-995</td>
<td>1-995</td>
</tr>
<tr>
<td>997</td>
<td>Refused</td>
</tr>
<tr>
<td>999</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

UniverseText: Sample adults 18+ who do light or moderate activities

SkipInstructions: <1-995>[goto MODLNGTP]

<1-995>[goto STRNGNO]
Question ID: AHB.120_02.000  
Instrument Variable Name: MODLNGTP  
QuestionnaireFileName: Sample Adult

QuestionText: 2 of 2

* Enter time period for length of light or moderate leisure-time physical activities.

1 Minutes  
2 Hours  
7 Refused  
9 Don't know

UniverseText: Sample adults 18+ who do light or moderate activities

SkipInstructions: <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

Hard Edit: ERR1_MODLNGTP  
* Question asked for activities lasting at least 10 minutes.  
* Please correct.

Soft Edit: ERR2_MODLNGTP  
* [Fill1: MODLNGNO] [Fill2: MODLNGTP] is unusually high.  
* Please verify.

Question ID: AHB.130_01.000  
Instrument Variable Name: STRNGNO  
QuestionnaireFileName: Sample Adult

QuestionText: How often do you do LEISURE-TIME physical activities specifically designed to STRENGTHEN your muscles such as lifting weights or doing calisthenics? (Include all such activities even if you have mentioned them before.)

* Read if necessary: How many times per day, per week, per month, or per year do you do these activities?

* Enter number for strengthening activities.  
* Enter '0' for Never.  
* Enter '996' for Unable to do this type activity

000 Never  
001-995 1-995 time(s)  
996 Unable to do this type activity  
997 Refused  
999 Don't know

UniverseText: Sample adults 18+

SkipInstructions: <1-995>[goto STRNGTP]  
<0, 996,R,D>[goto ALC1YR]
2012 NHIS Questionnaire - Sample Adult
Adult Health Behaviors
Document Version Date: 23-May-13

Question ID: AHB.130_02.000  Instrument Variable Name: STRNGTP  QuestionnaireFileName: Sample Adult

QuestionText: 2 of 2
* Enter time period for strengthening activities

0  Never
1  Per day
2  Per week
3  Per month
4  Per year
6  Unable to do this activity
7  Refused
9  Don't know

UniverseText: Sample adults 18+ who do strengthening activities

SkipInstructions: <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]

Soft Edit: ERR_STRNGTP
* [Fill1: STRNGNO] times per [Fill2: STRNGTP] is unusually high.
* Please verify.

Question ID: AHB.140_00.000  Instrument Variable Name: ALC1YR  QuestionnaireFileName: Sample Adult

QuestionText: These next questions are about drinking alcoholic beverages. Included are liquor such as whiskey or gin, beer, wine, wine coolers, and any other type of alcoholic beverage.

In ANY ONE YEAR, have you had at least 12 drinks of any type of alcoholic beverage?

1  Yes
2  No
7  Refused
9  Don't know

UniverseText: Sample adults 18+

SkipInstructions: <1> [goto ALC12MNO]
<2,R,D> [goto ALCLIFE]
In your ENTIRE LIFE, have you had at least 12 drinks of any type of alcoholic beverage?

1. Yes
2. No
7. Refused
9. Don't know

Sample adults 18+ who have not had 12 drinks in any one year or don't know if they did or refused to answer

In the PAST YEAR, how often did you drink any type of alcoholic beverage?

* Read if necessary: "How many days per week, per month or per year did you drink?"

* Enter number for how often alcoholic beverages were consumed in the past year.

* Enter '0' for Never.

000 Never
001-365 1-365 days
997 Refused
999 Don't know

Sample adults 18+ who have had at least 12 drinks in any one year or at least 12 drinks in their entire life
### Question ID: AHB.160_02.000  **Instrument Variable Name:** ALC12MTP  **QuestionnaireFileName:** Sample Adult

**QuestionText:**

2 of 2

* Enter time period for how often alcoholic beverages were consumed in the past year.

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td>Never/None</td>
</tr>
<tr>
<td>1</td>
<td>Week</td>
</tr>
<tr>
<td>2</td>
<td>Month</td>
</tr>
<tr>
<td>3</td>
<td>Year</td>
</tr>
<tr>
<td>7</td>
<td>Refused</td>
</tr>
<tr>
<td>9</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

**UniverseText:** Sample adults 18+ who drank at least once in the past year

**SkipInstructions:**

\[
<1-3> \text{ [goto ALCAMT]}
\]

\[
\text{[If (ALC12MNO gt } <7> \text{ & ALC12MTP = } <1>) \text{ or (ALC12MNO gt } <31> \text{ & ALC12MTP = } <2>) \text{ or (ALC12MNO gt } <365> \text{ & ALC12MTP = } <3>) \text{ goto ERR_ALC12MTP]}
\]

**Hard Edit:**

* [Fill1: ALC12MNO] days per [Fill2: ALC12MTP] exceeds number possible in this time period.
* Please correct.

---

### Question ID: AHB.170_00.000  **Instrument Variable Name:** ALCAMT  **QuestionnaireFileName:** Sample Adult

**QuestionText:**

In the PAST YEAR, on those days that you drank alcoholic beverages, on the average, how many drinks did you have?

* Enter ‘1’ if less than 1 drink.

* Enter ‘95’ if 95 or more drinks.

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>01-94</td>
<td>1-94 drinks</td>
</tr>
<tr>
<td>95</td>
<td>95+ drinks</td>
</tr>
<tr>
<td>97</td>
<td>Refused</td>
</tr>
<tr>
<td>99</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

**UniverseText:** Sample adults 18+ who have had at least 1 drink in the past year

**SkipInstructions:**

\[
<1-95,R,D> \text{ [goto ALC5UPNO]}
\]

\[
<10-95>\text{[goto ERR_ALCAMT]}
\]

**Soft Edit:**

ERR_ALCAMT

* [Fill: ALCAMT] drinks is an unusually high number.
* Please verify.
* Do not probe
In the PAST YEAR, on how many DAYS did you have 5 or more drinks of any alcoholic beverage?

* Read if necessary:

How many days per week, per month or per year did you have 5 or more drinks in a single day?

* Enter number of days.

* Enter '0' for Never/None.

Never/None

1-365 days

Refused

Don't know

Sample adults 18+ who have had at least 1 drink in the past year

<1-365>[goto ALC5UPTP]

<0,R,D>[goto AHGT_FT]
2012 NHIS Questionnaire - Sample Adult
Adult Health Behaviors
Document Version Date: 23-May-13

Question ID: AHB.180_02.000  Instrument Variable Name: ALC5UPTP  QuestionnaireFileName: Sample Adult

QuestionText: 2 of 2

* Enter time period for days per week, per month or per year.

0  Never/None
1  Per week
2  Per month
3  Per year
7  Refused
9  Don't know

UniverseText: Sample adults 18+ who have had 5+ drinks in one day at least once in the past year

SkipInstructions: <1-3>goto AHGT_FT
[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) lt number of days per year with 5 or more drinks (calculated from ALC5UPNO and ALC5UPTP)] goto ERR2_ALC5UPTP]

Hard Edit: ERR1_ALC5UPTP

* [Fill1: ALC12MNO] days per [Fill2: ALC12MTP] exceeds number possible in this time period.
* Please correct.

ERR2_ALC5UPTP

* Number of days had 5 or more drinks exceeds number of days drank.
* Please correct.
* Do not probe.
### Question ID: AHB.190_01.000  Instrument Variable Name: AHGT_FT  QuestionnaireFileName: Sample Adult

**QuestionText:** How tall are you without shoes?

* Enter "M" to record metric measurements

| 02-07 | 2-7 feet |
| 97    | Refused  |
| 99    | Don't know |

**UniverseText:** Sample adults 18+

**SkipInstructions:**
- `<2-7> [goto AHGT_IN]`
- `<R,D> [goto AWGT_LB]`
- `<M> [goto AHGT_M]`
- `[if AHGT_FT NE<2-7,D,R,M> goto ERR1_AHGT_FT]`
- `[if AHGT_FT = <2,3> goto ERR2_AHGT_FT]`

**Hard Edit:**

```bash
ERR1_AHGT_FT
* Only 2-7, Don't Know/Refused or M allowed in this field.
* Please correct.
```

**Soft Edit:**

```bash
ERR2_AHGT_FT
* Respondent's height in feet is [fill: AHGT_FT]?
* Please verify.
```

### Question ID: AHB.190_02.000  Instrument Variable Name: AHGT_IN  QuestionnaireFileName: Sample Adult

**QuestionText:** How tall are you without shoes?

* Enter '0' if exactly [fill1: AHGT_FT] feet tall.

| 00-11 | 0-11 inches |
| 97    | Refused     |
| 99    | Don't know  |

**UniverseText:** Sample adults 18+ who answered their height in feet

**SkipInstructions:**
- `<0-11,R,D> [goto AWGT_LB]`
- `<empty> [goto ERR_AHGT_IN]`

**Hard Edit:**

```bash
ERR1_AHGT_IN
* If [fill: AHGT_FT] feet exactly, enter "0"; otherwise enter number of inches.
```

**Soft Edit:**

```bash
ERR2_AHGT_IN
* Please verify that the height was entered correctly. Probe only if necessary.
```
**Question ID:** AHB.190_03.000  **Instrument Variable Name:** AHGT_M  **QuestionnaireFileName:** Sample Adult

**QuestionText:** How tall are you without shoes?

* Enter height in metric.

0-2 0-2 meters
7 Refused
9 Don't know

**UniverseText:** Sample adults 18+ who choose to give their height in metric measurements

**SkipInstructions:**

<0-2> [goto AHGT_CM]
<R,D> [goto AWGT_LB]
<empty> [goto ERR_AHGT_M]

**Hard Edit:**

ERR_AHGT_M

* If height is being given in centimeters only, enter "0"; otherwise enter number of meters.

---

**Question ID:** AHB.190_04.000  **Instrument Variable Name:** AHGT_CM  **QuestionnaireFileName:** Sample Adult

**QuestionText:** *Enter centimeters.

000-241 0-241 centimeters
997 Refused
999 Don't know

**UniverseText:** Sample adults 18+ who answered their height in meters

**SkipInstructions:**

<0-241,R,D> goto AWGT_LB

[If AHGT_M eq <2> and AHGT_CM gt <41> or AHGT_M eq <1> and AHGT_CM gt <141>] goto ERR1_AHGT_CM
<> goto ERR2_AHGT_CM
[If AHGT_M eq <1> and AHGT_CM lt <20> or AHGT_M eq <0> and AHGT_CM lt <120>] goto ERR3_AHGT_CM

**Hard Edit:**

ERR1_AHGT_CM

* Total height exceeds maximum allowed.
* Please correct.

ERR2_AHGT_CM

* If [fill: AHGT_M] meters exactly, enter "0"; otherwise enter number of centimeters.

**Soft Edit:**

ERR3_AHGT_CM

* Please verify that the height was entered correctly. Probe only if necessary.
**Adult Health Behaviors**

**Document Version Date:** 23-May-13

---

**Question ID:** AHB.200_01.000  
**Instrument Variable Name:** AWGT_LB  
**QuestionnaireFileName:** Sample Adult

**QuestionText:** How much do you weigh without shoes?

* Enter "M" to record metric measurements
* Enter '500' for 500 pounds or more

<table>
<thead>
<tr>
<th>050-500</th>
<th>50-500 pounds</th>
</tr>
</thead>
<tbody>
<tr>
<td>997</td>
<td>Refused</td>
</tr>
<tr>
<td>999</td>
<td>Don't know</td>
</tr>
<tr>
<td>M</td>
<td>Metric</td>
</tr>
</tbody>
</table>

**UniverseText:** Sample adults 18+

**SkipInstructions:**

<50-500> [goto SLEEP]  
[if AWGT_LB lt <50> or gt <500> goto ERR_AWGT_LB]  
<R,D>[goto SLEEP]  
<M>[goto AWGT_KG]

**Hard Edit:**

ERR1_AWGT_LB

* Weight is out of range (50-500).  
* Please correct.

**Soft Edit:**

ERR2_AWGT_LB

* Please verify that the weight was entered correctly. Probe only if necessary.

---

**Question ID:** AHB.200_02.000  
**Instrument Variable Name:** AWGT_KG  
**QuestionnaireFileName:** Sample Adult

**QuestionText:** How much do you weigh without shoes?

* Enter weight in kilograms

<table>
<thead>
<tr>
<th>023-226</th>
<th>23-226 kilograms</th>
</tr>
</thead>
<tbody>
<tr>
<td>997</td>
<td>Refused</td>
</tr>
<tr>
<td>999</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

**UniverseText:** Sample adults 18+ who choose to give their weight in metric measurements

**SkipInstructions:**

<23-226,R,D>[goto SLEEP]  
[If AWGT_KG lt <23> or K gt <226> goto ERR_AWGT_KG]

**Hard Edit:**

ERR1_AWGT_KG

*Weight is out of range (23-226).  
* Please correct.

**Soft Edit:**

ERR2_AWGT_KG

* Please verify that the weight was entered correctly. Probe only if necessary.
2012 NHIS Questionnaire - Sample Adult
Adult Health Behaviors
Document Version Date: 23-May-13

Question ID: AHB.210_00.000  Instrument Variable Name: SLEEP  QuestionnaireFileName: Sample Adult

QuestionText: On average, how many hours of sleep do you get in a 24-hour period?

* 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.

01-24 1-24 hours
97 Refused
99 Don't know

UniverseText: Sample adults 18+

SkipInstructions: <1-24,R,D> [goto next section]
[If SLEEP eq <1-5> goto ERR_SLEEP]

Soft Edit: ERR_SLEEP

* Average number of hours of sleep is [SLEEP].
* Please verify.
2012 NHIS Questionnaire - Sample Adult

Adult Access to Health Care & Utilization

Document Version Date: 23-May-13

Question ID: AAU.020_00.000  Instrument Variable Name: AUSUALPL  QuestionnaireFileName: Sample Adult

QuestionText: Is there a place that you USUALLY go to when you are sick or need advice about your health?

1  Yes
2  There is NO place
3  There is MORE THAN ONE place
7  Refused
9  Don't know

UniverseText: Sample adults 18+

SkipInstructions: <1-3> [goto APLKIND]
                <2,R,D> [goto AHCPLKND]

Question ID: AAU.030_00.000  Instrument Variable Name: APLKIND  QuestionnaireFileName: Sample Adult

QuestionText: [Fill1: What kind of place is it - a clinic, doctor's office, emergency room, or some other place?]

[Fill2: What kind of place do you go to most often - a clinic, doctor's office, emergency room, or some other place?]

1  Clinic or health center
2  Doctor's office or HMO
3  Hospital emergency room
4  Hospital outpatient department
5  Some other place
6  Doesn't go to one place most often
7  Refused
9  Don't know

UniverseText: Sample adults 18+ with 1+ usual place(s) to go when sick/need health advice

SkipInstructions: <1-5> [go to AHCPLROU]
                  <6,R,D> [go to AHCPLKND]
**Question ID:** AAU.035_00.000  **Instrument Variable Name:** AHCPLROU  **QuestionnaireFileName:** Sample Adult

**QuestionText:** Is that {fill: place from (APLIKIND)} the same place you USUALLY go when you need routine or preventive care, such as a physical examination or check up?

1. Yes
2. No
7. Refused
9. Don't know

**UniverseText:** 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

**SkipInstructions:** <1> [goto AHCCHGYR]  
<2,R,D> [go to AHCPLKND]

---

**Question ID:** AAU.037_00.000  **Instrument Variable Name:** AHCPLKND  **QuestionnaireFileName:** Sample Adult

**QuestionText:** What kind of place do you USUALLY go to when you need routine or preventive care, such as a physical examination or check-up?

0. Doesn't get preventive care anywhere
1. Clinic or health center
2. Doctor's office or HMO
3. Hospital emergency room
4. Hospital outpatient department
5. Some other place
6. Doesn't go to one place most often
7. Refused
9. Don't know

**UniverseText:** 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.

**SkipInstructions:** <0-6,R,D> if AUSUALPL = 2 [goto ANOUSLPL]; else if AUSUALPL=R,D goto APRVTRYR ELSE goto AHCCHGYR
<table>
<thead>
<tr>
<th>Question ID: AAU.040_00.000</th>
<th>Instrument Variable Name: AHCCCHGYR</th>
<th>QuestionnaireFileName: Sample Adult</th>
</tr>
</thead>
<tbody>
<tr>
<td>QuestionText:</td>
<td>At any time in the PAST 12 MONTHS did you CHANGE the place(s) to which you USUALLY go for health care?</td>
<td></td>
</tr>
<tr>
<td></td>
<td>1 Yes</td>
<td></td>
</tr>
<tr>
<td></td>
<td>2 No</td>
<td></td>
</tr>
<tr>
<td></td>
<td>7 Refused</td>
<td></td>
</tr>
<tr>
<td></td>
<td>9 Don't know</td>
<td></td>
</tr>
<tr>
<td>UniverseText:</td>
<td>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]</td>
<td></td>
</tr>
<tr>
<td>SkipInstructions:</td>
<td>&lt;1&gt;[goto AHCCCHGHI]</td>
<td></td>
</tr>
<tr>
<td></td>
<td>&lt;2,R,D&gt;[goto APRVTRYR]</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Question ID: AAU.050_00.000</th>
<th>Instrument Variable Name: AHCCCHGHI</th>
<th>QuestionnaireFileName: Sample Adult</th>
</tr>
</thead>
<tbody>
<tr>
<td>QuestionText:</td>
<td>Was this change for a reason related to health insurance?</td>
<td></td>
</tr>
<tr>
<td></td>
<td>1 Yes</td>
<td></td>
</tr>
<tr>
<td></td>
<td>2 No</td>
<td></td>
</tr>
<tr>
<td></td>
<td>7 Refused</td>
<td></td>
</tr>
<tr>
<td></td>
<td>9 Don't know</td>
<td></td>
</tr>
<tr>
<td>UniverseText:</td>
<td>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</td>
<td></td>
</tr>
<tr>
<td>SkipInstructions:</td>
<td>&lt;1,2,R,D&gt;[goto APRVTRYR]</td>
<td></td>
</tr>
</tbody>
</table>
Why don’t you have a usual source of medical care?

*Enter all that apply, separate with commas.

01 Doesn't need a doctor/Haven't had any problems
02 Doesn't like/trust/believe in doctors
03 Doesn't know where to go
04 Previous doctor is not available/moved
05 Too expensive/no insurance/cost
06 Speak a different language
07 No care available/Care too far away, not convenient
08 Put it off/Didn't get around to it
09 Other
97 Refused
99 Don’t know

Sample adults 18+ without a usual place of care

DURING THE PAST 12 MONTHS, did you have any trouble finding a general doctor or provider who would see you?

1 Yes
2 No
7 Refused
9 Don't know

Sample adults 18+

<1,>[goto APRVTRYR ]
<2,R,D>[goto ADRNANP]
Were you able to find a general doctor or provider who could see you?

1 Yes
2 No
7 Refused
9 Don’t know

Sample adults 18+ who had trouble finding a provider

DURING THE PAST 12 MONTHS, were you told by a doctor’s office or clinic that they would not accept you as a new patient?

1 Yes
2 No
7 Refused
9 Don’t know

Sample adults 18+

DURING THE PAST 12 MONTHS, were you told by a doctor’s office or clinic that they did not accept your health care coverage?

1 Yes
2 No
7 Refused
9 Don’t know

Sample adults 18+

<1,2,R,D>[goto ADRNANP]

<1,2,R,D>[goto ADRNAI]
There are many reasons people delay getting medical care.

Have you delayed getting care for any of the following reasons in the PAST 12 MONTHS?

...You couldn't get through on the telephone.

1  Yes
2  No
7  Refused
9  Don't know

Sample adults 18+

* Read Lead-in if Necessary

...You couldn't get an appointment soon enough.

1  Yes
2  No
7  Refused
9  Don't know

Sample adults 18+
There are many reasons people delay getting medical care. Have you delayed getting care for any of the following reasons in the PAST 12 MONTHS?

...Once you get there, you have to wait too long to see the doctor.

1. Yes
2. No
7. Refused
9. Don't know

Sample adults 18+

There are many reasons people delay getting medical care. Have you delayed getting care for any of the following reasons in the PAST 12 MONTHS?

...The (clinic/doctor's) office wasn't open when you could get there.

1. Yes
2. No
7. Refused
9. Don't know

Sample adults 18+
There are many reasons people delay getting medical care. Have you delayed getting care for any of the following reasons in the PAST 12 MONTHS?

1. You didn't have transportation.
2. Yes
3. No
4. Refused
5. Don't know

During the past 12 months, was there any time when you needed any of the following, but didn't get it because you couldn't afford it?

1. Prescription medicines.
2. Yes
3. No
4. Refused
5. Don't know

Sample adults 18+

<1,2,R,D>[goto AHCAFY_1]
2012 NHIS Questionnaire - Sample Adult
Adult Access to Health Care & Utilization
Document Version Date: 23-May-13

Question ID: AAU.111_02.000  Instrument Variable Name: AHCAFY_2  QuestionnaireFileName: Sample Adult

QuestionText: * Read Lead-in if Necessary.

DURING THE PAST 12 MONTHS, was there any time when you needed any of the following, but didn't get it because you couldn't afford it?

...Mental health care or counseling.

1 Yes
2 No
7 Refused
9 Don't know

UniverseText: Sample adults 18+

SkipInstructions: <1,2,R,D>[goto AHCAFY_3]

---

Question ID: AAU.111_03.000  Instrument Variable Name: AHCAFY_3  QuestionnaireFileName: Sample Adult

QuestionText: * Read Lead-in if Necessary.

DURING THE PAST 12 MONTHS, was there any time when you needed any of the following, but didn't get it because you couldn't afford it?

...Dental care (including check ups).

1 Yes
2 No
7 Refused
9 Don't know

UniverseText: Sample adults 18+

SkipInstructions: <1,2,R,D>[goto AHCAFY_4]
**Question ID:** AAU.111_04.000  **Instrument Variable Name:** AHCAFY_4  **QuestionnaireFileName:** Sample Adult

**QuestionText:**

* Read Lead-in if Necessary.

DURING THE PAST 12 MONTHS, was there any time when you needed any of the following, but didn't get it because you couldn't afford it?

...Eyeglasses.

1  Yes
2  No
7  Refused
9  Don't know

**UniverseText:** Sample adults 18+

**SkipInstructions:** <1,2,R,D>[goto AHCAFY_5]

---

**Question ID:** AAU.111_05.010  **Instrument Variable Name:** AHCAFY_5  **QuestionnaireFileName:** Sample Adult

**QuestionText:**

*Read if necessary..

DURING THE PAST 12 MONTHS, was there any time when you needed any of the following, but didn't get it because you couldn't afford it?

...To see a specialist.

1  Yes
2  No
7  Refused
9  Don’t know

**UniverseText:** Sample adults 18+

**SkipInstructions:** <1,2,R,D>[goto AHCAFY_6]
**Question ID:** AAU.111_06.010  **Instrument Variable Name:** AHCAFY_6  **QuestionnaireFileName:** Sample Adult

**QuestionText:** *Read if necessary.*

DURING THE PAST 12 MONTHS, was there any time when you needed any of the following, but didn't get it because you couldn't afford it?

...Follow-up care.

1  Yes
2  No
7  Refused
9  Don't know

**UniverseText:** Sample adults 18+

**SkipInstructions:** <1,2,R,D>[goto AWORPAY]

---

**Question ID:** AAU.113_00.010  **Instrument Variable Name:** AWORPAY  **QuestionnaireFileName:** Sample Adult

**QuestionText:** If you get sick or have an accident, how worried are you that you will be able to pay your medical bills? Are you very worried, somewhat worried, or not at all worried?

1  Very worried
2  Somewhat worried
3  Not at all worried
7  Refused
9  Don't know

**UniverseText:** Sample adults 18+

**SkipInstructions:** <1-3,R,D>[goto AHICOMP]
In regard to your health insurance or health care coverage, how does it compare to a year ago? Is it better, worse, or about the same?

1. Better
2. Worse
3. About the same
7. Refused
9. Don't know

UniverseText: Sample adults 18+

The following questions concern the use of prescription medication DURING THE PAST 12 MONTHS, are any of the following true for you?

…You skipped medication doses to save money

1. Yes
2. No
7. Refused
9. Don't know

UniverseText: Sample adults 18+

SkipInstructions: <1,2,3,R,D>[goto ARXPR_1]
*Read if necessary.

The following questions concern the use of prescription medication DURING THE PAST 12 MONTHS, are any of the following true for you?

…you took less medicine to save money

1 Yes
2 No
7 Refused
9 Don’t know

UniverseText: Sample adults 18+

SkipInstructions: <1,2,R,D>[goto ARXPR_3]

*Read if necessary.

The following questions concern the use of prescription medication DURING THE PAST 12 MONTHS, are any of the following true for you?

…You delayed filling a prescription to save money

1 Yes
2 No
7 Refused
9 Don’t know

UniverseText: Sample adults 18+

SkipInstructions: <1,2,R,D>[goto ARXPR_4]
The following questions concern the use of prescription medication DURING THE PAST 12 MONTHS, are any of the following true for you?

…You asked your doctor for a lower cost medication to save money.

1 Yes
2 No
7 Refused
9 Don't know

Sample adults 18+

The following questions concern the use of prescription medication DURING THE PAST 12 MONTHS, are any of the following true for you?

…You bought prescription drugs from another country to save money.

1 Yes
2 No
7 Refused
9 Don't know

Sample adults 18+
*Read if necessary..

The following questions concern the use of prescription medication DURING THE PAST 12 MONTHS, are any of the following true for you?

…You used alternative therapies to save money.

1  Yes
2  No
7  Refused
9  Don't know

About how long has it been since you last saw a dentist? Include all types of dentists, such as orthodontists, oral surgeons, and all other dental specialists, as well as dental hygienists.

0  Never
1  6 months or less
2  More than 6 mos, but not more than 1 yr ago
3  More than 1 yr, but not more than 2 yrs ago
4  More than 2 yrs, but not more than 5 yrs ago
5  More than 5 years ago
7  Refused
9  Don't know
DURING THE PAST 12 MONTHS, have you seen or talked to any of the following health care providers about your own health?

...A mental health professional such as a psychiatrist, psychologist, psychiatric nurse, or clinical social worker.

1 Yes
2 No
7 Refused
9 Don't know

UniverseText: Sample adults 18+

<1,2,R,D>[ goto AHCSY1_2]

DURING THE PAST 12 MONTHS, have you seen or talked to any of the following health care providers about your own health?

...An optometrist, ophthalmologist (AHF-thal-MOL-oh-jist), or eye doctor (someone who prescribes eyeglasses).

1 Yes
2 No
7 Refused
9 Don't know

UniverseText: Sample adults 18+

<1,2,R,D>[ goto AHCSY1_3]
* Read Lead-in if Necessary.

DURING THE PAST 12 MONTHS, have you seen or talked to any of the following health care providers about your own health?

...A foot doctor.

1  Yes
2  No
7  Refused
9  Don't know

UniverseText: Sample adults 18+

SkipInstructions: <1,2,R,D>[ goto AHCSY1_4]

* Read Lead-in if Necessary.

DURING THE PAST 12 MONTHS, have you seen or talked to any of the following health care providers about your own health?

...A chiropractor.

1  Yes
2  No
7  Refused
9  Don't know

UniverseText: Sample adults 18+

SkipInstructions: <1,2,R,D>[ goto AHCSY1_5]
Question ID: AAU.141_05.000   Instrument Variable Name: AHCSY1_5   QuestionnaireFileName: Sample Adult

QuestionText:  

* Read Lead-in if Necessary.

DURING THE PAST 12 MONTHS, have you seen or talked to any of the following health care providers about your own health?

...A physical therapist, speech therapist, respiratory therapist, audiologist, or occupational therapist.

1  Yes
2  No
7  Refused
9  Don't know

UniverseText: Sample adults 18+

SkipInstructions: <1,2,R,D>[ goto AHCSY1_6]

Question ID: AAU.141_06.000   Instrument Variable Name: AHCSY1_6   QuestionnaireFileName: Sample Adult

QuestionText:  

* Read Lead-in if Necessary.

DURING THE PAST 12 MONTHS, have you seen or talked to any of the following health care providers about your own health?

...A nurse practitioner, physician assistant, or midwife.

1  Yes
2  No
7  Refused
9  Don't know

UniverseText: Sample adults 18+

SkipInstructions: <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

QuestionText: * Read lead-in if necessary.

DURING THE PAST 12 MONTHS, have you seen or talked to any of the following health care providers about your own health?

...A doctor who specializes in women's health (an obstetrician/gynecologist).

1  Yes
2  No
7  Refused
9  Don't know

UniverseText: Sample female adults aged 18+ years

SkipInstructions: <1,2,R,D> [go to AHCSY8_8]

Question ID: AAU.211_01.000  Instrument Variable Name: AHCSY8_8  QuestionnaireFileName: Sample Adult

QuestionText: * Read Lead-in if Necessary.

DURING THE PAST 12 MONTHS, have you seen or talked to any of the following health care providers about your own health?

...A medical doctor who specializes in a particular medical disease or problem (other than obstetrician/gynecologist, psychiatrist, or ophthalmologist).

1  Yes
2  No
7  Refused
9  Don't know

UniverseText: Sample adults 18+

SkipInstructions: <1,2,R,D> [go to AHCSY8_9]
DURING THE PAST 12 MONTHS, have you seen or talked to any of the following health care providers about your own health?

...A general doctor who treats a variety of illnesses (a doctor in general practice, family medicine, or internal medicine)?

1  Yes
2  No
7  Refused
9  Don't know

Sample adults 18+

Does that doctor treat children and adults (a doctor in general practice or family medicine)?

1  Yes
2  No
7  Refused
9  Don't know

Sample adults 18+ who have seen or talked to a general doctor during the past 12 months
Question ID: AAU.240_00.000  Instrument Variable Name: AHERNOYR  QuestionnaireFileName: Sample Adult

QuestionText: (book) A9

DURING THE PAST 12 MONTHS, HOW MANY TIMES have you gone to a HOSPITAL EMERGENCY ROOM about your own health (This includes emergency room visits that resulted in a hospital admission.)?

- 00 None
- 01 1
- 02 2-3
- 03 4-5
- 04 6-7
- 05 8-9
- 06 10-12
- 07 13-15
- 08 16 or more
- 97 Refused
- 99 Don't know

UniverseText: Sample adults 18+

SkipInstructions: <0,R,D> [go to AHCHYR] <1-8> [goto AERVISND]

Question ID: AAU.243_00.010  Instrument Variable Name: AERVISND  QuestionnaireFileName: Sample Adult

QuestionText: Thinking about your most recent emergency room visit, did you go to the emergency room either at night or on the weekend?

- 1 Yes
- 2 No
- 7 Refused
- 9 Don't know

UniverseText: Sample adults 18+ who had at least one ER visit in the past year

SkipInstructions: <1,2,R,D> [go to AERHOS]
### 2012 NHIS Questionnaire - Sample Adult

**Adult Access to Health Care & Utilization**

**Document Version Date:** 23-May-13

#### Question ID: AAU.245_00.010

**Instrument Variable Name:** AERHOS  
**QuestionnaireFileName:** Sample Adult

**QuestionText:** Did this emergency room visit result in a hospital admission?

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Yes</td>
</tr>
<tr>
<td>2</td>
<td>No</td>
</tr>
<tr>
<td>7</td>
<td>Refused</td>
</tr>
<tr>
<td>9</td>
<td>Don't know</td>
</tr>
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</table>

**UniverseText:** Sample adults 18+ who had at least one ER visit in the past year

**SkipInstructions:** Q1: <1,R,D> [goto AHCHYR] < 2> [go to AERREAS1]  
Q2-Q4: <1,2,R,D> [go to AERREAS1]

---

#### Question ID: AAU.248_01.010

**Instrument Variable Name:** AERREAS1  
**QuestionnaireFileName:** Sample Adult

**QuestionText:** Tell me which of these apply to your last emergency room visit?

… You didn't have another place to go

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<table>
<thead>
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<tbody>
<tr>
<td>1</td>
<td>Yes</td>
</tr>
<tr>
<td>2</td>
<td>No</td>
</tr>
<tr>
<td>7</td>
<td>Refused</td>
</tr>
<tr>
<td>9</td>
<td>Don't know</td>
</tr>
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**UniverseText:** Q1: Sample adults 18+ who had at least one ER visit in the past year which did not result in a hospital admission  
Q2-Q4: Sample adults 18+ who had at least one ER visit in the past year

**SkipInstructions:** <1,2,R,D> [goto AERREAS2]
Tell me which of these apply to your last emergency room visit?

... Your doctor’s office or clinic was not open

1  Yes
2  No
7  Refused
9  Don't know

UniverseText: Q1: Sample adults 18+ who had at least one ER visit in the past year which did not result in a hospital admission
Q2-Q4: Sample adults 18+ who had at least one ER visit in the past year

SkipInstructions: <1,2,R,D> [goto AERREAS3]
<table>
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<tr>
<th>Question ID:</th>
<th>AAU.248_04.040</th>
<th>Instrument Variable Name:</th>
<th>AERREAS4</th>
<th>QuestionnaireFileName:</th>
<th>Sample Adult</th>
</tr>
</thead>
<tbody>
<tr>
<td>QuestionText:</td>
<td>*Read if necessary..</td>
<td>Tell me which of these apply to your last emergency room visit?</td>
<td>… The problem was too serious for the doctor’s office or clinic</td>
<td>1</td>
<td>Yes</td>
</tr>
<tr>
<td></td>
<td></td>
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<td>2</td>
<td>No</td>
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<td>7</td>
<td>Refused</td>
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<tr>
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<td></td>
<td></td>
<td></td>
<td>9</td>
<td>Don't know</td>
</tr>
<tr>
<td>UniverseText:</td>
<td>Q1: Sample adults 18+ who had at least one ER visit in the past year which did not result in a hospital admission Q2-Q4: Sample adults 18+ who had at least one ER visit in the past year</td>
<td>SkipInstructions:</td>
<td>&lt;1,2,R,D&gt; [goto AERREAS5]</td>
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<th>Instrument Variable Name:</th>
<th>AERREAS5</th>
<th>QuestionnaireFileName:</th>
<th>Sample Adult</th>
</tr>
</thead>
<tbody>
<tr>
<td>QuestionText:</td>
<td>*Read if necessary..</td>
<td>Tell me which of these apply to your last emergency room visit?</td>
<td>… Only a hospital could help you</td>
<td>1</td>
<td>Yes</td>
</tr>
<tr>
<td></td>
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<td>2</td>
<td>No</td>
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<td>Refused</td>
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<td>9</td>
<td>Don't know</td>
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<tr>
<td>UniverseText:</td>
<td>Q1: Sample adults 18+ who had at least one ER visit in the past year which did not result in a hospital admission Q2-Q4: Sample adults 18+ who had at least one ER visit in the past year</td>
<td>SkipInstructions:</td>
<td>&lt;1,2,R,D&gt; [goto AERREAS6]</td>
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</table>
**Question ID:** AAU.248_06.060  **Instrument Variable Name:** AERREAS6  **QuestionnaireFileName:** Sample Adult

**QuestionText:** *Read if necessary.*

Tell me which of these apply to your last emergency room visit?

… the emergency room is your closest provider

1 Yes
2 No
7 Refused
9 Don’t know

**UniverseText:** Q1: Sample adults 18+ who had at least one ER visit in the past year which did not result in a hospital admission
Q2-Q4: Sample adults 18+ who had at least one ER visit in the past year

**SkipInstructions:** <1,2,R,D> [goto AERREAS7]

---

**Question ID:** AAU.248_07.070  **Instrument Variable Name:** AERREAS7  **QuestionnaireFileName:** Sample Adult

**QuestionText:** *Read if necessary.*

Tell me which of these apply to your last emergency room visit?

… you get most of your care at the emergency room

1 Yes
2 No
7 Refused
9 Don’t know

**UniverseText:** Q1: Sample adults 18+ who had at least one ER visit in the past year which did not result in a hospital admission
Q2-Q4: Sample adults 18+ who had at least one ER visit in the past year

**SkipInstructions:** <1,2,R,D> [goto AERREAS8]
**Question ID:** AAU.248_08.080  **Instrument Variable Name:** AERREAS8  **QuestionnaireFileName:** Sample Adult

**Question Text:**
*Read if necessary.*

Tell me which of these apply to your last emergency room visit?

…you arrived by ambulance or other emergency vehicle

- 1 Yes
- 2 No
- 7 Refused
- 9 Don’t know

**Universe Text:**
Q1: Sample adults 18+ who had at least one ER visit in the past year which did not result in a hospital admission
Q2-Q4: Sample adults 18+ who had at least one ER visit in the past year

**Skip Instructions:** `<1,2,R,D> [goto AHCHYR]`

---

**Question ID:** AAU.250_00.000  **Instrument Variable Name:** AHCHYR  **QuestionnaireFileName:** Sample Adult

**Question Text:**
DURING THE PAST 12 MONTHS, did you receive care AT HOME from a nurse or other health care professional?

- 1 Yes
- 2 No
- 7 Refused
- 9 Don’t know

**Universe Text:**
Sample adults 18+

**Skip Instructions:** `<1>[goto AHCHMOYR]`

---

**Question ID:** AAU.260_00.000  **Instrument Variable Name:** AHCHMOYR  **QuestionnaireFileName:** Sample Adult

**Question Text:**
During how many of the PAST 12 MONTHS did you receive care AT HOME from a health care professional?

- 01-12 01-12 months
- 97 Refused
- 99 Don't know

**Universe Text:**
Sample adults 18+ who received home care from a health professional during the past 12 months

**Skip Instructions:** `<1-12,R,D>[goto AHCHNOYR]`
<table>
<thead>
<tr>
<th>Question ID: AAU.270_00.000</th>
<th>Instrument Variable Name: AHCHNOYR</th>
<th>QuestionnaireFileName: Sample Adult</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>QuestionText:</strong> (book) A10</td>
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</table>

What was the total number of home visits received during {Fill1: that month/Fill2: those months}?

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<td>08</td>
<td>16 or more</td>
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<tr>
<td>97</td>
<td>Refused</td>
</tr>
<tr>
<td>99</td>
<td>Don't know</td>
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</table>

**UniverseText:** Sample adults 18+ who received home care from a health professional during the past 12 months

**SkipInstructions:** <1-8,R,D>[goto AHCHNOYR]

---

<table>
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<tr>
<th>Question ID: AAU.280_00.000</th>
<th>Instrument Variable Name: AHCHNOYR</th>
<th>QuestionnaireFileName: Sample Adult</th>
</tr>
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<tbody>
<tr>
<td><strong>QuestionText:</strong> (book) A9</td>
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</table>

DURING THE PAST 12 MONTHS, HOW MANY TIMES have you seen a doctor or other health care professional about your own health at a DOCTOR’S OFFICE, A CLINIC, OR SOME OTHER PLACE? Do not include times you were hospitalized overnight, visits to hospital emergency rooms, home visits, dental visits, or telephone calls.

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<td>01</td>
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<td>16 or more</td>
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<tr>
<td>97</td>
<td>Refused</td>
</tr>
<tr>
<td>99</td>
<td>Don't know</td>
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</tbody>
</table>

**UniverseText:** Sample adults 18+

**SkipInstructions:** <0-8,R,D>[goto ASRGYR]
DURING THE PAST 12 MONTHS, have you had SURGERY or other surgical procedures either as an inpatient or outpatient?

* Read if necessary: This includes both major surgery and minor procedures such as setting bones or removing growths.

1 Yes
2 No
7 Refused
9 Don't know

Including any times you may have already told me about, HOW MANY DIFFERENT TIMES have you had surgery during the PAST 12 MONTHS?

* Enter "95" for 95 or more times.

01-94 1-94 times
95 95+ times
97 Refused
99 Don't know

* {ASRGYR} is an unusually large number.

* Please verify.
About how long has it been since you last saw or talked to a doctor or other health care professional about your own health? Include doctors seen while a patient in a hospital.

0 Never
1 6 months or less
2 More than 6 mos, but not more than 1 yr ago
3 More than 1 yr, but not more than 2 yrs ago
4 More than 2 yrs, but not more than 5 yrs ago
5 More than 5 years ago
7 Refused
9 Don't know

Thinking about your last visit for any type of medical care, where did you go?

1 Clinic or health center
2 Doctor's office or HMO
3 Hospital emergency room
4 Hospital outpatient department
5 Urgent care center
6 Some other place
7 Refused
9 Don't know
Did you see a general doctor, a specialist, a nurse practitioner or physician assistant, or someone else?

1. General doctor
2. Specialist
3. Nurse practitioner/Physician assistant
4. Someone else
7. Refused
9. Don’t know

Sample adults 18+ who visited a clinic, doctor’s office/HMO, hospital outpatient department or someplace else (not ER or urgent care center) on their last visit

What kind of health professional did you see at your last visit?

Verbatim

Sample adults 18+ who saw some other kind of provider on their last health care visit

<1-3,R,D> [goto AVISAPTN] <4> [goto ALASTSPC]
For this visit, how long did you have to wait between the time you made the appointment and the day you actually saw the doctor or other health professional?

*Enter ‘0’ for same day, walk-in appointment, or no appointment made.

*Enter number for appointment wait time.

*Enter ‘96’ for routine appointment, appointment arranged during a previous visit, or received a reminder card from provider.

00 Same day/walk-in appt/no appt made
01-95 1-95
96 Routine appt/appt arranged on previous visit/rec'd appt reminder card
97 Refused
99 Don't know

Sample adults 18+ who visited a clinic, doctor’s office/HMO, hospital outpatient department or someplace else (not ER or urgent care center) on their last visit
How long did you have to wait in the waiting room before you saw a doctor or other health professional for this visit?

*Enter ‘0’ for no wait time.

*Enter number for time in waiting room.

00 No time
01-96 1-96
97 Refused
99 Don’t know

Sample adults 18+ who had a place of last medical visit

*Enter time period for time in waiting room.

1 Minutes
2 Hours
7 Refused
9 Don’t know

Sample adults 18+ who had a place of last medical visit and did not refuse number portion of waiting room time
2012 NHIS Questionnaire - Sample Adult
Adult Access to Health Care & Utilization
Document Version Date: 23-May-13

Question ID: AAU.309_00.010 Instrument Variable Name: HIT1A QuestionnaireFileName: Sample Adult

QuestionText: DURING THE PAST 12 MONTHS, have you ever used computers for any of the following

…Look up health information on the Internet.

1 Yes
2 No
7 Refused
9 Don’t know

UniverseText: Sample adults 18+

SkipInstructions: <1,2,R,D> [goto HIT2A]

---

Question ID: AAU.309_00.020 Instrument Variable Name: HIT2A QuestionnaireFileName: Sample Adult

QuestionText: *Read if necessary..

DURING THE PAST 12 MONTHS, have you ever used computers for any of the following

…Fill a prescription.

1 Yes
2 No
7 Refused
9 Don’t know

UniverseText: Sample adults 18+

SkipInstructions: <1,2,R,D> [goto HIT3A]
Question ID: AAU.309_00.030  Instrument Variable Name: HIT3A  QuestionnaireFileName: Sample Adult

QuestionText: *Read if necessary..

DURING THE PAST 12 MONTHS, have you ever used computers for any of the following

…Schedule an appointment with a health care provider.

1  Yes
2  No
7  Refused
9  Don't know

UniverseText: Sample adults 18+

SkipInstructions: <1,2,R,D> [goto HIT4A]

---

Question ID: AAU.309_00.040  Instrument Variable Name: HIT4A  QuestionnaireFileName: Sample Adult

QuestionText: *Read if necessary..

DURING THE PAST 12 MONTHS, have you ever used computers for any of the following

…Communicate with a health care provider by email.

1  Yes
2  No
7  Refused
9  Don’t know

UniverseText: Sample adults 18+

SkipInstructions: <1,2,R,D> [goto HIT5A]
Question ID: AAU.309_00.050  Instrument Variable Name: HIT5A  QuestionnaireFileName: Sample Adult

QuestionText: *Read if necessary..

DURING THE PAST 12 MONTHS, have you ever used computers for any of the following

…Use online chat groups to learn about health topics.

1 Yes
2 No
7 Refused
9 Don’t know

UniverseText: Sample adults 18+

SkipInstructions: <1,2,R,D> [goto SHTFLUYR]

---

Question ID: AAU.310_00.000  Instrument Variable Name: SHTFLUYR  QuestionnaireFileName: Sample Adult

QuestionText: *[F1]

DURING THE PAST 12 MONTHS, have you had a flu shot? A flu shot is usually given in the fall and protects against influenza for the flu season.

* Read if necessary: A flu shot is injected in the arm. Do not include an influenza vaccine sprayed in the nose.

1 Yes
2 No
7 Refused
9 Don’t know

UniverseText: Sample adults 18+

SkipInstructions: <1> [goto ASHFLU_M]  <2,R,D> [ goto SPRFLUYR ]
During what month and year did you receive your most recent flu shot?

01 January
02 February
03 March
04 April
05 May
06 June
07 July
08 August
09 September
10 October
11 November
12 December
97 Refused
99 Don't know

Sample adults 18+ who have had a flu shot

<1-12,D> [ goto ASHFLU_Y] <R> [goto SPRFLUYR]
**2012 NHIS Questionnaire - Sample Adult**

**Adult Access to Health Care & Utilization**

**Document Version Date:** 23-May-13

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<th>Instrument Variable Name:</th>
<th>ASHFLU_Y</th>
<th>QuestionnaireFileName:</th>
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<td>2 of 2</td>
<td></td>
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</tbody>
</table>

*Enter year of most recent flu shot.

<table>
<thead>
<tr>
<th>Year</th>
<th>Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>9997</td>
<td>Refused</td>
</tr>
<tr>
<td>9999</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

**UniverseText:** Sample adults 18+ who gave a month for their last flu shot or who didn’t know the month

**SkipInstructions:**

`<valid year,R,D> [goto SPRFLUYR]
[If ASHFLU_M and ASHFLU_Y = a future date [goto ERR1_ASHFLU_Y]
[If ASHFLU_M and ASHFLU_Y = a date prior to birth [goto ERR2_ASHFLU_Y ]
[If ASHFLU_M and ASHFLU_Y = a date before 12 months ago [goto ERR3_ASHFLU_Y ]

**Hard Edit:**

ERR1_ASHFLU_Y

*Future date invalid

ERR2_ASHFLU_Y

*Date before birth

ERR3_ASHFLU_Y

*Date more than 12 months ago

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<th>FLUSHPG1</th>
<th>QuestionnaireFileName:</th>
<th>Sample Adult</th>
</tr>
</thead>
<tbody>
<tr>
<td>QuestionText:</td>
<td>Did you get a flu shot before or during your current pregnancy?</td>
<td></td>
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<td></td>
</tr>
</tbody>
</table>

1  Before this pregnancy
2  During this pregnancy
7  Refused
9  Don't know

**UniverseText:** Female sample adults 18-49 who are currently pregnant and are interviewed January-March or August-December

**SkipInstructions:**

`<1,2,R,D> [goto SPRFLUYR]`
**Question ID:** AAU.314_00.000  **Instrument Variable Name:** FLUSHPG2  **QuestionnaireFileName:** Sample Adult

**QuestionText:**

[Fill1: Earlier you said you were pregnant sometime since August 1st, 2011. Did you get a flu shot before, during or after this pregnancy?/

Earlier you said you were pregnant sometime between August 2011 and March 2012. Did you get a flu shot before, during or after this pregnancy?/]

1  Before this pregnancy
2  During this pregnancy
3  After this pregnancy
7  Refused
9  Don't know

**UniverseText:** Female sample adults 18-49 who are currently pregnant and were interviewed April-July or who have been determined to be pregnant at a specific point in the past year

**SkipInstructions:** <1-3,R,D> [goto SPRFLUYR]

---

**Question ID:** AAU.315_00.000  **Instrument Variable Name:** SPRFLUYR  **QuestionnaireFileName:** Sample Adult

**QuestionText:** DURING THE PAST 12 MONTHS, have you had a flu vaccine sprayed in your nose by a doctor or other health professional? A health professional may have let you spray it. This vaccine is usually given in the fall and protects against influenza for the flu season.

* Read if necessary: This influenza vaccine is called FluMist (trademark).

1  Yes
2  No
7  Refused
9  Don't know

**UniverseText:** Sample adults 18+

**SkipInstructions:** <1> [goto ASPFLU_M]

[if SHTFLUYR =1 and SPRFLUYR=1] goto ERR1_SPRFLUYR
[if AGE GE 50] goto ERR2_SPRFLUYR
<2,D,R> [goto SHTPNUYR]

**Soft Edit:**

ERR1_SPRFLUYR

*Respondent says they have received both a flu shot and flu nasal vaccine.
*Please verify.

ERR2_SPRFLUYR

*Respondent says they have received a nasal vaccine to PREVENT the flu, not to TREAT symptoms of the flu.
*Please verify.
During what month and year did you receive your most recent flu nasal spray?

01 January
02 February
03 March
04 April
05 May
06 June
07 July
08 August
09 September
10 October
11 November
12 December
97 Refused
99 Don't know

Sample adults 18+ who have had a flu nasal vaccine
2012 NHIS Questionnaire - Sample Adult
Adult Access to Health Care & Utilization

Document Version Date: 23-May-13

Question ID: AAU.318_02.000  Instrument Variable Name: ASPFLU_Y  QuestionnaireFileName: Sample Adult

QuestionText: 2 of 2
*Enter year of most recent flu nasal spray.

   Year     Refused
9997      Don't know

UniverseText: Sample adults 18+ who gave a month for their flu nasal vaccine or who didn’t know the month

SkipInstructions: <valid year, R, D> [goto SHTPNUYR]
[If ASPFLU_M and ASPFLU_Y = a future date] goto ERR1_ASPFLU_Y
[If ASPFLU_M and ASPFLU_Y = a date prior to birth] goto ERR2_ASPFLU_Y
[If ASPFLU_M and ASPFLU_Y = a date before 12 months ago] goto ERR3_ASPFLU_Y

Hard Edit:
ERR1_ASPFLU_Y
*Future date invalid

ERR2_ASPFLU_Y
*Date before birth

ERR3_ASPFLU_Y
*Date more than 12 months ago

---

Question ID: AAU.320_00.000  Instrument Variable Name: SHTPNUYR  QuestionnaireFileName: Sample Adult

QuestionText: Have you EVER had a pneumonia shot?

   This shot is usually given only once or twice in a person's lifetime and is different from the flu shot. It is also called the pneumococcal vaccine.

   1       Yes
   2       No
   7       Refused
   9       Don't know

UniverseText: Sample adults 18+

SkipInstructions: <1,2,R,D> [goto APOX]
Have you EVER had chickenpox?

1 Yes
2 No
7 Refused
9 Don't know

Sample adults 18+

<1> [goto APOX12MO]
<2,R,D> [goto AHEP]

Have you had chickenpox in the PAST 12 MONTHS?

1 Yes
2 No
7 Refused
9 Don't know

Sample adults 18+ who have ever had chickenpox

<1,2,R,D> [goto AHEP]

Have you EVER had hepatitis?

1 Yes
2 No
7 Refused
9 Don't know

Sample adults 18+

<1> [goto SHTHEPB]
<2,R,D> [goto AHEPLIV]
### Question ID: AAU.360_00.000
**Instrument Variable Name:** AHEPLIV  
**QuestionnaireFileName:** Sample Adult

**QuestionText:** Have you ever lived with someone who had hepatitis?

<p>| | |</p>
<table>
<thead>
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<tbody>
<tr>
<td>1</td>
<td>Yes</td>
</tr>
<tr>
<td>2</td>
<td>No</td>
</tr>
<tr>
<td>7</td>
<td>Refused</td>
</tr>
<tr>
<td>9</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

**UniverseText:** Sample adults 18+ who have never had hepatitis; Ref/DK if ever had hepatitis

**SkipInstructions:** <1,2,R,D> [goto SHTHEPB]

### Question ID: AAU.370_00.000
**Instrument Variable Name:** SHTHEPB  
**QuestionnaireFileName:** Sample Adult

**QuestionText:** Have you EVER received the hepatitis B vaccine?

* Read if necessary: This is given in three separate doses and has been available since 1991. It is recommended for newborn infants, adolescents, and people such as health care workers, who may be exposed to the hepatitis B virus.

<p>| | |</p>
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<tbody>
<tr>
<td>1</td>
<td>Yes</td>
</tr>
<tr>
<td>2</td>
<td>No</td>
</tr>
<tr>
<td>7</td>
<td>Refused</td>
</tr>
<tr>
<td>9</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

**UniverseText:** Sample adults 18+

**SkipInstructions:** <1> [goto SHEPDOS]  
<2,R,D> [goto SHTHEPA]

### Question ID: AAU.380_00.000
**Instrument Variable Name:** SHEPDOS  
**QuestionnaireFileName:** Sample Adult

**QuestionText:** Did you receive at least 3 doses of the hepatitis B vaccine, or less than 3 doses?

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Received at least 3 doses</td>
</tr>
<tr>
<td>2</td>
<td>Received less than 3 doses</td>
</tr>
<tr>
<td>7</td>
<td>Refused</td>
</tr>
<tr>
<td>9</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

**UniverseText:** Sample adults 18+ who have ever received the Hepatitis B vaccine

**SkipInstructions:** <1,2,R,D> [goto SHTHEPA]
The hepatitis A vaccine is given as a two dose series routinely to some children starting at 1 year of age, and to some adults and people who travel outside the United States. Although it can be given as a combination vaccine with hepatitis B, it is different from the hepatitis B shot, and has only been available since 1995. Have you ever received the hepatitis A vaccine?

1. Yes
2. No
7. Refused
9. Don't know

Question ID: AAU.390_00.010  Instrument Variable Name: SHTHEPA  QuestionnaireFileName: Sample Adult

How many hepatitis A shots did you receive?

*Enter '96' if all shots were received

01-95 01-95 shots
96 Received all shots
97 Refused
99 Don't know

Question ID: AAU.400_00.010  Instrument Variable Name: SHEPANUM  QuestionnaireFileName: Sample Adult

Question ID: AAU.390_00.010  Instrument Variable Name: SHTHEPA  QuestionnaireFileName: Sample Adult

2012 NHIS Questionnaire - Sample Adult
Adult Access to Health Care & Utilization
Document Version Date: 23-May-13
Shingles is an outbreak of a rash or blisters on the skin that may be associated with severe pain. The pain is generally on one side of the body or face. Shingles is caused by the chicken pox virus. A vaccine for shingles has been available since May 2006. Have you ever had the Zoster (ZOSS-ter) or Shingles vaccine, also called Zostavax®?

1 Yes
2 No
7 Refused
9 Don't know

Have you received a tetanus shot in the past 10 years?

1 Yes
2 No
7 Refused
9 Don't know

Was your most recent tetanus shot given in 2005 or later?

1 Yes
2 No
7 Refused
9 Don't know
**Question ID:** AAU.440_00.010  **Instrument Variable Name:** SHTTDAP  **QuestionnaireFileName:** Sample Adult

**QuestionText:**
There are currently two types of tetanus shots available today. One is the Td or tetanus-diphtheria vaccine and the other is called Tdap or Adacel (trademark) or Boostrix (trademark). They are similar except the Tdap shot also includes a pertussis (per-TUH-sis) or whooping cough vaccine. Thinking back to your most recent tetanus shot, did your health care provider tell you or did the vaccine information sheet say the vaccine included the pertussis or whooping cough vaccine? The shot is often called Tdap or ADACEL (trademark) or BOOSTRIX (trademark).

1. Yes-included pertussis
2. No-did not include pertussis
3. Doctor did not say
7. Refused
9. Don't know

**UniverseText:** Sample adults 18+ who have had a tetanus shot in 2005 or beyond or refused to say if they had a tetanus shot in 2005 or beyond

**SkipInstructions:** <1-3,R,D> if age le 64 [goto HPVHRD]; else [goto LIVEV]

---

**Question ID:** AAU.442_00.010  **Instrument Variable Name:** HPVHRD  **QuestionnaireFileName:** Sample Adult

**QuestionText:**
Have you ever heard of HPV? HPV stands for human papillomavirus (pap-uh-LOW-muh-vi-rus).

1. Yes
2. No
7. Refused
9. Don't know

**UniverseText:** Sample adults LE 64

**SkipInstructions:** <1,2,R,D> [goto SHHPVHD1]
Two vaccines, or shots, to prevent HPV infection are available in the United States. Both vaccines prevent cervical cancer and one also prevents genital warts. The two HPV vaccines are sometimes called CERVARIX® or GARDASIL®. Before this survey, have you ever heard of HPV vaccines or shots?

1. Yes
2. No
7. Refused
9. Don't know

Have you ever received an HPV shot or vaccine?

1. Yes
2. No
3. Doctor refused when asked
7. Refused
9. Don't know
**2012 NHIS Questionnaire - Sample Adult**

**Adult Access to Health Care & Utilization**

**Document Version Date:** 23-May-13

---

**Question ID:** AAU.448_00.010  **Instrument Variable Name:** SHHPVDOS  **QuestionnaireFileName:** Sample Adult

**QuestionText:** How many HPV shots did you receive?
- Enter ‘50’ if 50 or more shots
- Enter ‘96’ for all shots

01-49  1-49 shots
50+  50+
96  All shots
97  Refused
99  Don't know

**UniverseText:** Sample adults LE 64 who received an HPV shot

**SkipInstructions:** <01-50,96,R,D> [goto LIVEV]

**Hard Edit:** ERR_SHHPVDOS

* Shots should be in the range 1-50 or 96 for all shots.
* Please correct.

---

**Question ID:** AAU.450_00.010  **Instrument Variable Name:** LIVEV  **QuestionnaireFileName:** Sample Adult

**QuestionText:** Has a doctor or other health professional ever told you that you had any kind of chronic, or long-term liver condition?

1  Yes
2  No
7  Refused
9  Don't know

**UniverseText:** Sample adults 18+

**SkipInstructions:** <1,2,R,D> [goto TRAVEL]
Question ID: AAU.460_00.010  Instrument Variable Name: TRAVEL  QuestionnaireFileName: Sample Adult

QuestionText: Have you ever traveled outside of the United States to countries other than Europe, Japan, Australia, New Zealand or Canada, since 1995?

1  Yes
2  No
7  Refused
9  Don't know

UniverseText: Sample adults 18+

SkipInstructions: <1,2,R,D> [goto WRKHLTH]

---

Question ID: AAU.465_00.010  Instrument Variable Name: WRKHLTH  QuestionnaireFileName: Sample Adult

QuestionText: Do you currently volunteer or work in a hospital, medical clinic, doctor’s office, dentist’s office, nursing home or some other health-care facility? This includes emergency responders and public safety personnel, part-time and unpaid work in a health care facility as well as professional nursing care provided in the home.

*Read if necessary: This includes non-health care professionals, such as administrative staff, who work in a health-care facility.

1  Yes
2  No
7  Refused
9  Don't know

UniverseText: Sample adults 18+

SkipInstructions: <1> [goto WRKDIR] <2,R,D> [goto APSBPCHK]

---

Question ID: AAU.470_00.010  Instrument Variable Name: WRKDIR  QuestionnaireFileName: Sample Adult

QuestionText: Do you provide direct patient care as part of your routine work? By direct patient care we MEAN PHYSICAL OR HANDS ON CONTACT WITH PATIENTS.

1  Yes
2  No
7  Refused
9  Don't know

UniverseText: Sample adults 18+ who work or volunteer in a health-care setting

SkipInstructions: <1,2,R,D> [goto APSBPCHK]
**Question ID:** AAU.500_00.010  **Instrument Variable Name:** APSBPCHK  **QuestionnaireFileName:** Sample Adult

**QuestionText:** DURING THE PAST 12 MONTHS, have you had your blood pressure checked by a doctor, nurse, or other health professional?

1. Yes
2. No
7. Refused
9. Don't know

**UniverseText:** Sample adults 18+

**SkipInstructions:** <1,2,R,D> [goto APSCHCHK]

---

**Question ID:** AAU.510_00.010  **Instrument Variable Name:** APSCHCHK  **QuestionnaireFileName:** Sample Adult

**QuestionText:** DURING THE PAST 12 MONTHS, have you had your blood cholesterol checked by a doctor, nurse, or other health professional?

1. Yes
2. No
7. Refused
9. Don't know

**UniverseText:** Sample adults 18+

**SkipInstructions:** <1,2,R,D> [goto APSBSCHK]

---

**Question ID:** AAU.520_00.010  **Instrument Variable Name:** APSBSCHK  **QuestionnaireFileName:** Sample Adult

**QuestionText:** Have you had a fasting test for high blood sugar or diabetes DURING THE PAST 12 MONTHS?

1. Yes
2. No
7. Refused
9. Don't know

**UniverseText:** Sample adults 18+

**SkipInstructions:** <1,2,R,D> and SEX=1 and AGE GE 40 [goto APSCOL]
If <1,2,R,D> and SEX=1 and AGE < 40 [goto APSDIET]
Else <1,2,R,D> and SEX=2 [goto APSPAP]
Have you had a Pap smear or Pap test DURING THE PAST 12 MONTHS?

*Read if necessary.

A Pap smear or Pap test is a routine test for women in which the doctor examines the cervix, takes a cell sample from the cervix with a small stick or brush, and sends it to the lab.

1. Yes
2. No
7. Refused
9. Don't know

Have you had a Mammogram DURING THE PAST 12 MONTHS?

*Read if necessary.

A mammogram is an x-ray of each breast to look for breast cancer.

1. Yes
2. No
7. Refused
9. Don't know

Female sample adults 18+

<1,2,R,D> if AGE GE 30 [goto APSMAM];
else <1,2,R,D and AGE<30 [goto APSDIET]
Question ID: AAU.550_00.010  Instrument Variable Name: APSCOL  QuestionnaireFileName: Sample Adult

QuestionText: DURING THE PAST 12 MONTHS, have you had any test done for colon cancer?

*Read if necessary.

Colon cancer tests include blood stool tests, colonoscopy and sigmoidoscopy.

A blood stool test is a test that may use a special kit at home to determine whether the stool contains blood.

A sigmoidoscopy and colonoscopy are exams in which a tube is inserted in the rectum to view the colon for signs of cancer or other health problems.

1 Yes
2 No
7 Refused
9 Don’t know

UniverseText: Sample adults 40+

SkipInstructions: <1,2,R,D> [goto APSDIET]

---

Question ID: AAU.560_00.010  Instrument Variable Name: APSDIET  QuestionnaireFileName: Sample Adult

QuestionText: DURING THE PAST 12 MONTHS, has a doctor or other health professional talked to you about your diet?

1 Yes
2 No
7 Refused
9 Don’t know

UniverseText: Sample adults 18+

SkipInstructions: <1,2,R,D> if SMKNOW in ('1','2') [goto APSSMKC];
else if (40<=AGE<=65) [goto LTCFAM];
else [goto AINDINS]
**2012 NHIS Questionnaire - Sample Adult**

**Adult Access to Health Care & Utilization**

**Document Version Date:** 23-May-13

**Question ID:** AAU.570_00.010  
**Instrument Variable Name:** APSSMKC  
**QuestionnaireFileName:** Sample Adult

**QuestionText:** DURING THE PAST 12 MONTHS, has a doctor or other health professional talked to you about your smoking?

1  Yes  
2  No  
7  Refused  
9  Don’t know

**UniverseText:** Sample adults 18+ currently who smoke every day or some days

**SkipInstructions:** <1,2,R,D> if (40<=AGE<=65) [goto LTCFAM]; else [goto AINDINS]

---

**Question ID:** AAU.580_00.010  
**Instrument Variable Name:** LTCFAM  
**QuestionnaireFileName:** Sample Adult

**QuestionText:** Do you have a parent, spouse, sibling, or adult child who has needed help for at least a year with everyday needs like bathing, dressing or eating due to a long term condition?  
*Read if necessary.*

Due to a chronic illness or disability.

1  Yes  
2  No  
7  Refused  
9  Don’t know

**UniverseText:** Sample adults 40-65

**SkipInstructions:** <1,2,R,D> [goto LTCHELP]
### Question ID: AAU.582_00.010
### Instrument Variable Name: LTCHELP
### QuestionnaireFileName: Sample Adult

**QuestionText:**
How likely is it that you may someday need help with daily activities like bathing, dressing, eating, or using the toilet due to a long term condition? Would you say…

*Read categories below.*

1. Very likely
2. Somewhat likely
3. Somewhat unlikely
4. Very unlikely
5. Refused
6. Don’t know

**UniverseText:** Sample adults 40-65

**SkipInstructions:** <1-4,R,D> [goto LTCWHO]

---

### Question ID: AAU.584_00.010
### Instrument Variable Name: LTCWHO
### QuestionnaireFileName: Sample Adult

**QuestionText:**
If you needed such help, who would provide this help?

*Enter all that apply, separate with commas.*

1. My family
2. Someone I hire
3. Home health care organization
4. Nursing home/assisted living
5. Other
6. Refused
7. Don’t know

**UniverseText:** Sample adults 40-65

**SkipInstructions:** <1-5,R,D> [goto AINDINS]
DURING THE PAST 3 YEARS, did you try to purchase health insurance directly, that is, not through any employer, union, or government program?

1 Yes
2 No
7 Refused
9 Don’t know

Sample adults 18+

Was a plan purchased?

1 Yes
2 No
7 Refused
9 Don’t know

Sample adults 18+ who tried to purchase health insurance directly in the past 3 years

Was this plan for yourself, someone else in your family, or both?

1 Self
2 Someone else in family
3 Both
7 Refused
9 Don’t know

Sample adults 18+ who purchased health insurance directly in the past 3 years
How difficult was it to find a plan with the type of coverage you needed? Would you say…

*Read categories below.

1 Very difficult
2 Somewhat difficult
3 Not at all difficult
7 Refused
9 Don’t know

Sample adults 18+ who purchased health insurance directly in the past 3 years

How difficult was it to find a plan you could afford? Would you say…

*Read categories below.

1 Very difficult
2 Somewhat difficult
3 Not at all difficult
7 Refused
9 Don’t know

Sample adults 18+ who purchased health insurance directly in the past 3 years

Did any company turn you down when you tried to buy coverage on your own?

1 Yes
2 No
7 Refused
9 Don’t know

Sample adults 18+ who purchased health insurance directly in the past 3 years
Did any company charge a higher price because of {fill 1: your/your family’s/you or your family’s} health?

1  Yes  
2  No  
7  Refused  
9  Don’t know

Sample adults 18+ who purchased health insurance directly in the past 3 years

Did any company exclude a specific health problem from the coverage?

1  Yes  
2  No  
7  Refused  
9  Don’t know

Sample adults 18+ who purchased health insurance directly in the past 3 years
Question ID: AAU.601_00.070  Instrument Variable Name: AINDNOT  QuestionnaireFileName: Sample Adult

QuestionText: Why did you not buy the plan?

*Enter all that apply, separate with commas.

1. Turned down
2. Cost
3. Pre-existing condition
4. Got health insurance from other source
5. Other
7. Refused
8. Other
9. Don’t know

UniverseText: Sample adults 18+ who tried but did not purchase health insurance directly in the past 3 years

SkipInstructions: <1-4,R,D> [goto HIVTST1]  
<5> [goto AINDNTSP]

Question ID: AAU.601_00.080  Instrument Variable Name: AINDNTSP  QuestionnaireFileName: Sample Adult

QuestionText: *Specify other reason plan was not obtained.

Verbatim

UniverseText: Sample adults 18+ who had other reason plan was not purchased

SkipInstructions: <allow 75,R,D> [goto HIVTST1]

Question ID: AAU.700_00.000  Instrument Variable Name: HIVTST1  QuestionnaireFileName: Sample Adult

QuestionText: The next question is about the test for HIV (the virus that causes AIDS).

Except for tests you may have had as part of blood donations, have you ever been tested for HIV?

1. Yes
2. No
7. Refused
9. Don’t know

UniverseText: Sample adults 18+

SkipInstructions: <1,2,R,D> [goto next section]
The next questions are about your Internet and email use.

Do you use the Internet?

1 Yes
2 No
7 Refused
9 Don't know

Sample adults 18+

How often do you use the Internet?

*Read if necessary: How many times per day, per week, per month, or per year do you use the Internet?

*Enter number.

001-995 1-995
997 Refused
999 Don't know

Sample adults 18+ who use the Internet
2012 NHIS Questionnaire - Sample Adult
Adult Internet and Email Usage
Document Version Date: 23-May-13

Question ID: AWB.020_02.000  Instrument Variable Name: AWEBOFTP  QuestionnaireFileName: Sample Adult

QuestionText: 2 of 2

*Enter time period for how often Internet is used.

1  Per day
2  Per week
3  Per month
4  Per year
7  Refused
9  Don't know

UniverseText: Sample adults 18+ who use the Internet and gave a valid value for the number portion of this question

SkipInstructions: <1-4,R,D> [goto AWEBEML]

---

Question ID: AWB.030_00.000  Instrument Variable Name: AWEBEML  QuestionnaireFileName: Sample Adult

QuestionText: Do you send or receive emails?

1  Yes
2  No
7  Refused
9  Don't know

UniverseText: Sample adults 18+

SkipInstructions: <1> [goto AWEBEMAD] <2,R,D> [goto next section]
**Question ID:** AWB.040_00.000  
**Instrument Variable Name:** AWEBEMAD  
**QuestionnaireFileName:** Sample Adult

**QuestionText:**

We may want to contact you to obtain additional health-related information.

May I have your email address?

*Enter email address.

*Enter 'N' for none.

allow 75

97 Refused

99 Don't Know

**UniverseText:** Sample adults 18+ who send or receive email

**SkipInstructions:** <address> [goto AWBEMNO] <N,R,D> [goto next section]

---

**Question ID:** AWB.050_01.000  
**Instrument Variable Name:** AWEBMNO  
**QuestionnaireFileName:** Sample Adult

**QuestionText:**

1 of 2

How often do you check this email account?

*Read if necessary: How many times per day, per week, per month, or per year do you check this email account?

*Enter number.

001-995 1-995

97 Refused

99 Don't know

**UniverseText:** Sample adults 18+ who gave an email address

**SkipInstructions:** <1-995> [goto AWBEMTP] <R,D> [goto next section]
2 of 2

*Enter time period for how often email is checked.

1  Per day
2  Per week
3  Per month
4  Per year
7  Refused
9  Don't know

Sample adults 18+ who gave an email address and gave a valid value for the number portion of this question

<1-4,R,D> [goto next section]