2013 NHIS Questionnaire - Sample Adult

Adult Identification

Document Version Date: 29-May-14

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

1  Physical or mental condition prohibits responding
2  Sample adult is able to respond
3  Unknown

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
2013 NHIS Questionnaire - Sample Adult
Adult Identification

Document Version Date: 29-May-14

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
Question Text: * 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

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

Skip Instructions: <1> goto AIDVERF_A
<2> goto AIDSEX

---

Question ID: AID.040_00.000 Instrument Variable Name: AIDSEX QuestionnaireFileName: Sample Adult

Question Text: Are you Male or Female?

* If don't know or refused enter your best guess of the person's sex.

1 Male
2 Female

Universe Text: Respondent said his/her sex is not correct.

Skip Instructions: <1,2> store AIDSEX in SEX
goto ERR_AIDSEX
reset AIDVERF_S
goto AIDVERF_S

Hard Edit: ERR_AIDSEX

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

goto AIDVERF_S (as the default goto)
* 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

Sample Adult said his/her sex is correct.

Skip Instructions:  <1> goto AIDVERF_D
<2> goto AIDAGE

How old are you?

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

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 AIDDOB_M

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

UniverseText: Sample Adult said his/her age is correct.

SkipInstructions: <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

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

SkipInstructions: <01-12, Refused, Don't know> goto AIDDOB_D
**Question ID:** AID.060_02.000  **Instrument Variable Name:** AIDDOB_D  **QuestionnaireFileName:** Sample Adult

**QuestionText:** 2 of 3

>*Enter day of birth.*

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<tr>
<th>Value</th>
<th>Description</th>
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</thead>
<tbody>
<tr>
<td>01-31</td>
<td>Day of the month</td>
</tr>
<tr>
<td>97</td>
<td>Refused</td>
</tr>
<tr>
<td>99</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

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

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

**Hard Edit:**

ERR_AIDDOB_D

>*[fill1: AIDDOB_D] is not a valid day for [fill2: AIDDOB_M].
*Please correct.*
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<tr>
<td>AID.060_03.000</td>
<td>AIDDOB_Y</td>
<td>Sample Adult</td>
</tr>
</tbody>
</table>

**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
   goto AIDVERF_A
   elseif AIDVERF_D = '2' (No) then reset AIDVERF_D to empty
   goto AIDVERF_D
endif

(if year GT current year) or (if year = current year and month GT current month) or (if year = current year and month = current month and day GT current day)
   goto ERR1_AIDDOB_Y
endif

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

(if AIDDOB_M = 'Ref' or 'DK') or (if AIDDOB_D = 'Ref' or 'DK') or (if AIDDOB_Y = 'Ref' or 'DK')
   goto ERR3_AIDDOB_Y
else
   store AIDDOB_M in DOBM
   store AIDDOB_D in DOBD
   store AIDDOB_Y in DOBY
   if AIDVERF_A = '2' (No) then reset AIDVERF_A to empty
   goto AIDVERF_A
   elseif AIDVERF_D = '2' (No) then reset AIDVERF_D to empty
   goto AIDVERF_D
endif
endif

Calculate age from AIDDOB_M, AIDDOB_D, and AIDDOB_Y.

if age from AIDDOB items is ne AGE and age from AIDDOB items is valid
   reset AIDVERF_A or AIDVERF_D.
   goto ERR4_AIDDOB_Y
endif

Hard Edit: ERR1_AIDDOB_Y

*Future date invalid: [fill1: <AIDDOB_M> <AIDDOB_D>, <AIDDOB_Y>]
*Please correct.

goto AIDDOB_M (whether suppressed or not)

ERR2_AIDDOB_Y

*Not a valid day: [fill1: <AIDDOB_M> <AIDDOB_D>, <AIDDOB_Y>]
*Please correct.

goto AIDDOB_M (whether suppressed or not)

ERR3_AIDDOB_Y

*DOB of [fill2: ALIAS of Sample Adult] remains [fill3: <DOBM>, <DOBD>, <DOBY>]

goto 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?

* Read answer categories.

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.
**2013 NHIS Questionnaire - Sample Adult**

**Adult Socio-Demographic**

Document Version Date: 29-May-14

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**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:**

```plaintext
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:**

```plaintext
<1-10,D,R> if WRKCOR = 2 then
    [goto WHOWRK]
else [goto EVERWRK]
```
Have you ever held a job or worked at a business?

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

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

<1> [goto WHOWRK]
<2,D,R> [goto next section]

For whom did you work at your MAIN job or business? (Name of company, business, organization or employer)

For whom did you work about the job you held the longest, for whom did you work? (Name of company, business, organization or employer)

For whom did you work about the job you held most recently, for whom did you work? (Name of company, business, organization or employer)

Verbatim response
7. Refused
9. Don't know

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

<90 char long,D,R> [goto KINDIND]
2013 NHIS Questionnaire - Sample Adult
Adult Socio-Demographic
Document Version Date: 29-May-14

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

Verbatim response

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

Verbatim response

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

Verbatim response

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
8 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.

01 1-9 employees
02 10-24 employees
03 25-49 employees
04 50-99 employees
05 100-249 employees
06 250-499 employees
07 500-999 employees
08 1000 employees or more
97 Refused
99 Don't know

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

<1-8, R,D>[goto WRKLONGN]
Question ID: ASD.140_01.000  Instrument Variable Name: WRKLONGN  QuestionnaireFileName: Sample Adult

QuestionText:  

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

* 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]
2013 NHIS Questionnaire - Sample Adult
Adult Socio-Demographic
Document Version Date: 29-May-14

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

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

---

**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 next section]
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

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
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?

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

1 Yes
2 No
7 Refused
9 Don't know

Sample adults 18+ who were ever told they had hypertension (2+ visits)
2013 NHIS Questionnaire - Sample Adult
Adult Conditions
Document Version Date: 29-May-14

Question ID: ACN.025_00.010  Instrument Variable Name: CHLYR  QuestionnaireFileName: Sample Adult

QuestionText: DURING THE PAST 12 MONTHS, have you had high cholesterol?

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

1  Yes
2  No
7  Refused
9  Don't know

UniverseText: Sample adults 18+

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

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

QuestionText: Have you EVER been told by a doctor or other health professional that you had
... Coronary heart disease?

1  Yes
2  No
7  Refused
9  Don't know

UniverseText: Sample adults 18+

SkipInstructions: <1,2,R,D> [goto ANGEV]
### 2013 NHIS Questionnaire - Sample Adult

**Adult Conditions**

**Document Version Date:** 29-May-14

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<th>QuestionText</th>
</tr>
</thead>
</table>
| ACN.031_02.000       | ANGEV                     | Sample Adult          | * Read if necessary:  
  Have you EVER been told by a doctor or other health professional that you had  
  ...Angina, also called angina pectoris?  
  1 Yes  
  2 No  
  7 Refused  
  9 Don't know  
  **UniverseText:** Sample adults 18+  
  **SkipInstructions:** <1,2,R,D> [goto MIEV] |

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<th>QuestionText</th>
</tr>
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</table>
| ACN.031_03.000       | MIEV                      | Sample Adult          | * 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)?  
  1 Yes  
  2 No  
  7 Refused  
  9 Don't know  
  **UniverseText:** Sample adults 18+  
  **SkipInstructions:** <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

UniverseText: Sample adults 18+

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

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]
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

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.”

1 Yes
2 No
7 Refused
9 Don't know
Did a doctor or other health professional advise you to stop taking a low-dose aspirin every day?

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

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

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.”

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

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

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

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

Sample adults 18+

<1> [goto AASSTILL]  
<2,R,D> [goto ULCEV]
### Question ID: ACN.085_00.000  
#### Instrument Variable Name: AASSTILL  
#### QuestionnaireFileName: Sample Adult

**QuestionText:**  
? [F1]  
Do you still have asthma?  

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

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

**SkipInstructions:**  
<1,2,R,D> [go to AASMYR]

---

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

**QuestionText:**  
? [F1]  
DURING THE PAST 12 MONTHS, have you had an episode of asthma or an asthma attack?  

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

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

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

---

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

**QuestionText:**  
? [F1]  
DURING THE PAST 12 MONTHS, have you had to visit an emergency room or urgent care center because of asthma?  

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

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

**SkipInstructions:**  
<1,2,R,D> if AASSTILL=1 or AASMYR=1 [go to AASMHSP];  
else if AASSTILL=2,R,D and AASMYR=2,R,D [go to ULCEV]
2013 NHIS Questionnaire - Sample Adult

Adult Conditions

Document Version Date: 29-May-14

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

**QuestionText:**

**DURING THE PAST 12 MONTHS, have you stayed overnight in a hospital because of asthma?**

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

1 Yes
2 No
7 Refused
9 Don't know

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

**SkipInstructions:** <1,2,R,D> [go to AWZMSWK]

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

**QuestionText:**

**DURING THE PAST 12 MONTHS, HOW MANY DAYS were you UNABLE to [fill1: work/get work done around the house] because of your asthma?**

*Enter '0' for none.

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

000 None
001-365 1-365 days
996 Unable to do this activity
997 Refused
999 Don't know

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

**SkipInstructions:** <0-100,996,R,D> [go to AASMPMED]  
<101-365> [go to ERR1_AWZMSWK]  
<366-994> [go to ERR2_AWZMSWK]

**Hard Edit:** if AWZMSWK = 366-994 then display ERR2_AWZMSWK:

"366-994 days not allowed in this field.  *Please correct."

**Soft Edit:** if AWZMSWK >100 and ne 996 then display ERR1_AWZMSWK:

"AWZMSWK is an unusually large number;  *Please verify."
Now I’m going to ask you about two different kinds of ASTHMA medicine. One prevents symptoms over the long term. The other is for quick relief of symptoms during an attack or episode. This quick relief medicine is breathed in through your mouth using a canister inhaler or a disk inhaler.

DURING THE PAST 3 MONTHS, have you used the kind of PRESCRIPTION asthma inhaler that gives QUICK relief from asthma symptoms during an attack? Include only medications prescribed by a health care professional.

1. Yes
2. No
7. Refused
9. Don’t know

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

When you take your rescue prescription asthma medication, would you say that you most often use an inhaler and/or disk, or do you most often use a nebulizer?

*Read if necessary: Both an inhaler or a disk inhaler are very portable canisters or devices used to inhale medication in one or two breaths. A nebulizer is a machine that turns liquid medication into a mist that you inhale into the lungs over a few minutes

1. Inhaler or disk
2. Nebulizer
7. Refused
9. Don’t know

Sample adults 18+ who have used a quick relief prescription asthma inhaler in the past three months
2013 NHIS Questionnaire - Sample Adult
Adult Conditions
Document Version Date: 29-May-14

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

QuestionText: DURING THE PAST 3 MONTHS, did you use more than three canisters or disks of this type of quick relief inhaler?

1  Yes
2  No
7  Refused
9  Don't know

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

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

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

QuestionText: The second kind of asthma medication is different from inhalers used for quick relief. It is the preventive kind that is used to protect your lungs and keep you from having attacks. It can be either a pill or an inhaler.

Are you NOW taking a preventive asthma medication every day or almost every day, less often, or never?

1  Every day or almost every day
2  Less often
3  Never
7  Refused
9  Don't know

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

SkipInstructions: <1-3,R,D> [go to AASWMP]
Question ID: ACN.100_00.100  Instrument Variable Name: AASWMP  QuestionnaireFileName: Sample Adult

QuestionText: An asthma action plan is a printed form with specific instructions based on your asthma that tells when to change the amount or type of medicine, when to call the doctor for advice, and when to go to the emergency room. Has a doctor or other health professional EVER given you an asthma action plan?

*Read if necessary: Include nurses and asthma educators.

1 Yes  
2 No  
7 Refused  
9 Don't know

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

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

---

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

QuestionText: Have you ever taken a course or class on how to manage asthma yourself?

1 Yes  
2 No  
7 Refused  
9 Don't know

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

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

---

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

QuestionText: Has a doctor or other health professional EVER taught you how to recognize early signs or symptoms of an asthma episode?

1 Yes  
2 No  
7 Refused  
9 Don't know

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

SkipInstructions: <1,2,R,D> [go to AAS_RES]
<table>
<thead>
<tr>
<th>Question ID:</th>
<th>ACN.105_02.020</th>
<th>Instrument Variable Name:</th>
<th>AAS_RES</th>
<th>QuestionnaireFileName:</th>
<th>Sample Adult</th>
</tr>
</thead>
<tbody>
<tr>
<td>QuestionText:</td>
<td>*Read if necessary: Has a doctor or other health professional EVER taught you...how to respond to episodes of asthma?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>1</td>
<td>Yes</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>2</td>
<td>No</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>
<tr>
<td>UniverseText:</td>
<td>Sample adults 18+ who still have asthma or who had asthma episode/attack in past 12 months</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>SkipInstructions:</td>
<td>&lt;1,2,R,D&gt; [go to AAS_MON]</td>
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</table>

<table>
<thead>
<tr>
<th>Question ID:</th>
<th>ACN.105_03.030</th>
<th>Instrument Variable Name:</th>
<th>AAS_MON</th>
<th>QuestionnaireFileName:</th>
<th>Sample Adult</th>
</tr>
</thead>
<tbody>
<tr>
<td>QuestionText:</td>
<td>*Read if necessary: Has a doctor or other health professional EVER taught you...how to monitor peak flow for daily therapy?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>1</td>
<td>Yes</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>2</td>
<td>No</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>
<tr>
<td>UniverseText:</td>
<td>Sample adults 18+ who still have asthma or who had asthma episode/attack in past 12 months</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>SkipInstructions:</td>
<td>&lt;1,2,R,D&gt; [go to AAPENVLN]</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Question ID:</th>
<th>ACN.107_00.010</th>
<th>Instrument Variable Name:</th>
<th>AAPENVLN</th>
<th>QuestionnaireFileName:</th>
<th>Sample Adult</th>
</tr>
</thead>
<tbody>
<tr>
<td>QuestionText:</td>
<td>Has a doctor or other health professional EVER advised you to change things in your home, school, or work environment to improve your asthma?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>1</td>
<td>Yes</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>2</td>
<td>No</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>3</td>
<td>Was told no changes needed</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>
<tr>
<td>UniverseText:</td>
<td>Sample adults 18+ who still have asthma or who had asthma episode/attack in past 12 months</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>SkipInstructions:</td>
<td>&lt;1-3,R,D&gt; [go to AAROUTIN]</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
**2013 NHIS Questionnaire - Sample Adult**

**Adult Conditions**

**Document Version Date:** 29-May-14

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

**QuestionText:**

DURING THE PAST 12 MONTHS, how many times did you see a doctor or other health professional for a routine checkup for your asthma? Please do not include emergency room visits, visits to urgent care centers, or other visits for acute care for an asthma episode or attack.

*Enter '0' for none.

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>000</td>
<td>None</td>
</tr>
<tr>
<td>001-365</td>
<td>1-365 times</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 still have asthma or who had asthma episode/attack in past 12 months

**SkipInstructions:**

<0-50,R,D> [go to AASYMPT]

<51-365> [goto ERR_AAROUTIN]

**Soft Edit:**

[fill4: AAROUTIN] is an unusually large number.

* Please verify.

---

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

**QuestionText:** The next three questions are about the last time you saw a doctor or other health care professional for routine care or for any reason.

At your last visit, did your doctor or other health professional ask HOW OFTEN…you had asthma symptoms?

<table>
<thead>
<tr>
<th>Code</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 still have asthma or who had asthma episode/attack in past 12 months

**SkipInstructions:**

<1,2,R,D> [go to AARESCUE];
### Question ID: ACN.107_00.040  Instrument Variable Name: AARESCUE  QuestionnaireFileName: Sample Adult

**QuestionText:**

At your last visit, did your doctor or other health professional ask HOW OFTEN 

....you used a quick relief inhaler?

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

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

**SkipInstructions:** <1,2,R,D> [go to AAACTLIM]

---

### Question ID: ACN.107_00.050  Instrument Variable Name: AAACTLIM  QuestionnaireFileName: Sample Adult

**QuestionText:**

At your last visit, did your doctor or other health professional ask HOW OFTEN 

...asthma symptoms limited your daily activities?

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

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

**SkipInstructions:** <1,2,R,D> [goto ULCEV]
Have you EVER been told by a doctor or other health professional that you had an ulcer?
This could be a stomach, duodenal or peptic ulcer.

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

Sample adults 18+

DURING THE PAST 12 MONTHS have you had an ulcer?

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

Sample adults 18+ who were ever told they had an ulcer
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+
<table>
<thead>
<tr>
<th>Question ID:</th>
<th>ACN.140_00.001</th>
<th>Instrument Variable Name:</th>
<th>CANKIND_1</th>
<th>QuestionnaireFileName:</th>
<th>Sample Adult</th>
</tr>
</thead>
<tbody>
<tr>
<td>QuestionText:</td>
<td>What kind of cancer was it?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>* Enter code for the first kind of cancer.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>01</td>
<td>Bladder</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>02</td>
<td>Blood</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>03</td>
<td>Bone</td>
<td></td>
<td></td>
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<td></td>
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<tr>
<td>04</td>
<td>Brain</td>
<td></td>
<td></td>
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<tr>
<td>05</td>
<td>Breast</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>06</td>
<td>Cervix</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>07</td>
<td>Colon</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>08</td>
<td>Esophagus</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>09</td>
<td>Gallbladder</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10</td>
<td>Kidney</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>11</td>
<td>Larynx-windpipe</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>12</td>
<td>Leukemia</td>
<td></td>
<td></td>
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<td></td>
</tr>
<tr>
<td>13</td>
<td>Liver</td>
<td></td>
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</tr>
<tr>
<td>14</td>
<td>Lung</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>15</td>
<td>Lymphoma</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>16</td>
<td>Melanoma</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>17</td>
<td>Mouth/tongue/lip</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>18</td>
<td>Ovary</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>19</td>
<td>Pancreas</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>20</td>
<td>Prostate</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>21</td>
<td>Rectum</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>22</td>
<td>Skin (non-melanoma)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>23</td>
<td>Skin (DK what kind)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>24</td>
<td>Soft tissue (muscle or fat)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>25</td>
<td>Stomach</td>
<td></td>
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<td></td>
</tr>
<tr>
<td>26</td>
<td>Testis</td>
<td></td>
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<td></td>
</tr>
<tr>
<td>27</td>
<td>Throat - pharynx</td>
<td></td>
<td></td>
<td></td>
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</tr>
<tr>
<td>28</td>
<td>Thyroid</td>
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<td>Uterus</td>
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</tr>
<tr>
<td>30</td>
<td>Other</td>
<td></td>
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</tr>
<tr>
<td>97</td>
<td>Refused</td>
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</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 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.
* 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.

SkipInstructions:

<1-30,R,D,~[goto CANAGE_2]
<96> goto DIBEV

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

Hard Edit:

ERR1_CANKIND_2

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

ERR2_CANKIND_2

* 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
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.

SkipInstructions:
<1-30,R,D>-[goto CANAGE_3]
<96>-[goto DIBEV]

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

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

Hard Edit:
ERR1_CANKIND_3
* Code 6 or 18 or 29 is unavailable for males.

ERR2_CANKIND_3
* Code 20 or 26 is unavailable for females.

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

QuestionText:
* Enter '95' if respondent offers more than 3 kinds of cancer.

* Enter '96' for no more.

95  More than three kinds
96  No more

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

SkipInstructions:
<95,96>-[goto DIBEV]
### Question ID: ACN.150_00.001

<table>
<thead>
<tr>
<th>Instrument Variable Name: CANAGE_1</th>
<th>QuestionnaireFileName: Sample Adult</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>QuestionText:</strong></td>
<td>? [F1]</td>
</tr>
<tr>
<td>How old were you when [Fill1: CANKIND_1 / Fill2: this cancer] was first diagnosed?</td>
<td></td>
</tr>
<tr>
<td>001-100</td>
<td>1-100 years</td>
</tr>
<tr>
<td>997</td>
<td>Refused</td>
</tr>
<tr>
<td>999</td>
<td>Don't know</td>
</tr>
<tr>
<td><strong>UniverseText:</strong></td>
<td>Sample adults 18+ who were ever told they had cancer</td>
</tr>
<tr>
<td><strong>SkipInstructions:</strong></td>
<td>&lt;1-100, D&gt; goto CANKIND_2</td>
</tr>
<tr>
<td></td>
<td>&lt;R&gt; and &lt;R&gt; at CANKIND_1 goto DIBEV</td>
</tr>
<tr>
<td></td>
<td>&lt;R&gt; and CANKIND_1 NE &lt;R&gt; goto CANKIND_2</td>
</tr>
<tr>
<td>If number in CANAGE_1 greater than person years old (AGE) goto ERR_CANAGE_1</td>
<td></td>
</tr>
<tr>
<td><strong>Hard Edit:</strong></td>
<td>ERR_CANAGE_1</td>
</tr>
<tr>
<td></td>
<td>* [Fill2: CANAGE_1] years old is older than age [fill3: AGE].</td>
</tr>
<tr>
<td></td>
<td>* Please correct.</td>
</tr>
</tbody>
</table>

### Question ID: ACN.150_00.002

<table>
<thead>
<tr>
<th>Instrument Variable Name: CANAGE_2</th>
<th>QuestionnaireFileName: Sample Adult</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>QuestionText:</strong></td>
<td>? [F1]</td>
</tr>
<tr>
<td>How old were you when [Fill1: CANKIND_2/Fill2: this cancer] was first diagnosed?</td>
<td></td>
</tr>
<tr>
<td>001-100</td>
<td>1-100 years</td>
</tr>
<tr>
<td>997</td>
<td>Refused</td>
</tr>
<tr>
<td>999</td>
<td>Don't know</td>
</tr>
<tr>
<td><strong>UniverseText:</strong></td>
<td>Sample adults 18+ who were ever told they had cancer</td>
</tr>
<tr>
<td><strong>SkipInstructions:</strong></td>
<td>&lt;1-100, D&gt; goto CANKIND_3</td>
</tr>
<tr>
<td></td>
<td>&lt;R&gt; and &lt;R&gt; at CANKIND_2 goto DIBEV</td>
</tr>
<tr>
<td></td>
<td>&lt;R&gt; and CANKIND_2 NE &lt;R&gt; goto CANKIND_3</td>
</tr>
<tr>
<td>If number in CANAGE_2 greater than person years old (AGE) goto ERR_CANAGE_2</td>
<td></td>
</tr>
<tr>
<td><strong>Hard Edit:</strong></td>
<td>ERR_CANAGE_2</td>
</tr>
<tr>
<td></td>
<td>* [Fill2: CANAGE_2] years old is older than your age [fill3: AGE].</td>
</tr>
<tr>
<td></td>
<td>* Please correct.</td>
</tr>
</tbody>
</table>
**2013 NHIS Questionnaire - Sample Adult**

**Adult Conditions**

**Document Version Date:** 29-May-14

---

**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?

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>001-100</td>
<td>1-100 years</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 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?]

<table>
<thead>
<tr>
<th>Code</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>3</td>
<td>Borderline</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 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)
**2013 NHIS Questionnaire - Sample Adult**

**Adult Conditions**

Document Version Date: 29-May-14

---

**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 EPILEP1]

---

**Question ID:** ACN.192_00.010  **Instrument Variable Name:** EPILEP1  **QuestionnaireFileName:** Sample Adult

**QuestionText:** Have you ever been told by a doctor or other health professional that you have a seizure disorder or epilepsy?

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

**UniverseText:** Sample adults 18+

**SkipInstructions:** <1> [goto EPILEP2]  
<2,R,D> [goto AHAYFYR]
Are you currently taking any medicine to control your seizure disorder or epilepsy?

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

Sample adults 18+ who have ever been told they have epilepsy or a seizure disorder

Today is [fill: Current Date]. Think back to last year about the same time. About how many seizures of any type have you had in the past year?

*Read if necessary: Some people may call it “convulsion,” “fit,” “falling out spell,” “episode,” “attack,” “drop attack,” “staring spell,” or “out-of-touch.”.

*If the respondent mentions and counts “auras” as seizures accept the response. If a respondent indicates that he/she has had nothing more than an aura and is unsure about counting the aura(s), do NOT count auras as seizures.

0. None
1. One
2. Two or three
3. Between four and ten
4. More than 10
7. Refused
9. Don't know

Sample adults 18+ who have ever been told they have epilepsy or a seizure disorder

<0-4,R,D> [goto EPILEP4]
In the past year have you seen a neurologist or epilepsy specialist for your epilepsy or seizure disorder?

1 Yes
2 No
7 Refused
9 Don't know

Sample adults 18+ who have ever been told they have epilepsy or a seizure disorder

DURING THE PAST 30 DAYS, to what extent has epilepsy or its treatment interfered with your normal activities like working, school, or socializing with family or friends? Would you say…

*Read categories below.

1 Not at all
2 Slightly
3 Moderately
4 Quite a bit
5 Extremely
7 Refused
9 Don't know

Sample adults 18+ who have ever been told they have epilepsy or a seizure disorder

<1-5,R,D> [goto AHAYFYR]
2013 NHIS Questionnaire - Sample Adult
Adult Conditions
Document Version Date: 29-May-14

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]

Question ID: ACN.201_02.000 Instrument Variable Name: SINYR 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

...Sinusitis?

1 Yes
2 No
7 Refused
9 Don't know

UniverseText: Sample adults 18+

SkipInstructions: 〈1,2,R,D〉 [goto CBRCHYR]
### Adult Conditions

<table>
<thead>
<tr>
<th>Question ID</th>
<th>Instrument Variable Name</th>
<th>QuestionnaireFileName</th>
<th>QuestionText</th>
</tr>
</thead>
</table>
| ACN.201_03.000      | CBRCHYR                   | Sample Adult          | * Read if necessary:

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

...Chronic bronchitis?

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

<table>
<thead>
<tr>
<th>UniverseText</th>
<th>SkipInstructions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sample adults 18+</td>
<td>&lt;1,2,R,D&gt; [goto KIDWKYR]</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Question ID</th>
<th>Instrument Variable Name</th>
<th>QuestionnaireFileName</th>
<th>QuestionText</th>
</tr>
</thead>
</table>
| ACN.201_04.000      | KIDWKYR                   | Sample Adult          | * 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.

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

<table>
<thead>
<tr>
<th>UniverseText</th>
<th>SkipInstructions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sample adults 18+</td>
<td>&lt;1,2,R,D&gt; [goto LIVYR]</td>
</tr>
</tbody>
</table>
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]

---

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

QuestionText: The next questions refer to your joints. Please do NOT include the back or neck. DURING THE PAST 30 DAYS, have you had any symptoms of pain, aching, or stiffness in or around a joint?

1 Yes
2 No
7 Refused
9 Don't know

UniverseText: Sample adults 18+

SkipInstructions: <1> [goto JMTHP]
<2,R,D> [goto ARTH]
Question ID: ACN.260_00.000  Instrument Variable Name: JMTHP  QuestionnaireFileName: Sample Adult

QuestionText: (book) A4

Which joints are affected?

* Enter all that apply, separate with commas.

01 Shoulder-right
02 Shoulder-left
03 Elbow-right
04 Elbow-left
05 Hip-right
06 Hip-left
07 Wrist-right
08 Wrist-left
09 Knee-right
10 Knee-left
11 Ankle-right
12 Ankle-left
13 Toes-right
14 Toes-left
15 Fingers/thumb-right
16 Fingers/thumb-left
17 Other joint not listed
97 Refused
99 Don't know

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

SkipInstructions: <1-17,R,D> [goto JNTCHR]

Question ID: ACN.270_00.000  Instrument Variable Name: JNTCHR  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 JMTHP]
Have you EVER seen a doctor or other health professional for these joint symptoms?

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

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

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

Sample adults 18+

(<1> or JNTSYMP eq <1>) [goto ARTHLMT];
else (<2,R,D> and JNTSYMP ne 1) [goto PAINNECK]
Are you now limited in any way in any of your usual activities because of arthritis or joint symptoms?

1 Yes
2 No
7 Refused
9 Don't know

Sample adults 18+ with joint pain or arthritis

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+
DURING THE PAST THREE MONTHS, did you have...

...Low back pain?

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

Sample adults 18+

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

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

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

<1,2,R,D> [goto PAINFACE]
During the past three months, did you have facial ache or pain in the jaw muscles or the joint in front of the ear?

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

UniverseText: Sample adults 18+

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

During the past three months, did you have severe headache or migraine?

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

UniverseText: Sample adults 18+

SkipInstructions: <1,2,R,D>[goto ACOLD2W]
These next questions are about your recent health DURING THE LAST 2 WEEKS.

Did you have a head cold or chest cold that started DURING THE LAST 2 WEEKS?

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

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

Are you currently pregnant?

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

Female sample adults 18-49 years of age
Question ID: ACN.370_00.010  Instrument Variable Name: PREGFLYR  QuestionnaireFileName: Sample Adult

QuestionText: [fill1: Were you pregnant any time since August 1st, [fill: LAST YEAR]?/Were you pregnant any time from August [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

UniverseText: 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

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

---

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

QuestionText: 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

UniverseText: Sample adults 18+

SkipInstructions: <1> [goto AHEARST1]  
<2,R,D> [goto HRAIDEV]

---

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

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

1  Yes
2  No
7  Refused
9  Don't know

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

SkipInstructions: <1,2,R,D>[goto AHEARST1]
Question ID: ACN.420_00.000  Instrument Variable Name: AHEARST1  QuestionnaireFileName: Sample Adult

QuestionText: 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
8 Don't know

UniverseText: Sample adults 18+

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

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

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

1 Yes
2 No
7 Refused
9 Don't know

UniverseText: Sample adults 18+

SkipInstructions: <1> [goto ABLIND]
<2,R,D> [goto LUPRRT]
**Question ID:** ACN.440_00.000  **Instrument Variable Name:** ABLIND  **QuestionnaireFileName:** Sample Adult

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

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

**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?

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

**UniverseText:** Sample adults 18+

**SkipInstructions:** <1,2,R,D>[goto next section]
Have you EVER been told by a doctor or other health professional that your immune system is weakened?

*Read if necessary: A weakened immune system is also called immune compromised or immune suppressed. It means that you are not able to fight infections and is usually caused by an underlying illness or by various medical treatments or prescription medications.

1 Yes
2 No
7 Refused
9 Don't know

Sample adults 18+

Based on what a doctor or other health professional told you, do you still have a weakened immune system?

1 Yes
2 No
7 Refused
9 Don't know

Sample adults 18+ who have ever been told by a doctor/other health professional that they had a weakened immune system
The next questions are about reasons a doctor or other health professional may have told you that your immune system was weakened. Please say yes or no to each.

DURING THE PAST 6 MONTHS, have you taken prescription medication or had any medical treatments that a doctor or other health professional told you would weaken your immune system? Examples include steroid or corticosteroid pills, such as prednisone, or other oral or injected medications for treating many types of autoimmune conditions or certain cancers.

1 Yes
2 No
7 Refused
9 Don’t know

Sample adults 18+ who have ever been told by a doctor/other health professional that they had a weakened immune system

Do you currently have a health condition that a doctor or other health professional told you weakens the immune system, even without related medications or treatments? Examples include certain kinds of leukemia, lymphoma, or HIV infection.

1 Yes
2 No
7 Refused
9 Don’t know

Sample adults 18+ who have ever been told by a doctor/other health professional that they had a weakened immune system

<1,2,R,D> [goto AIMSPCHC]
2013 NHIS Questionnaire - Sample Adult
Adult Immunosuppression
Document Version Date: 29-May-14

Question ID: AIS.010_00.050  Instrument Variable Name: AIMSPSHC  QuestionnaireFileName: Sample Adult

QuestionText: Has a doctor or other health professional EVER told you that your immune system is weakened because you have kidney disease, lung disease, liver disease, diabetes, poor nutrition, or general frailty?

1  Yes
2  No
7  Refused
9  Don't know

UniverseText: Sample adults 18+ who have ever been told by a doctor/other health professional that they had a weakened immune system

SkipInstructions: <1,2,R,D> If CANKIND_1=1-30 or CANKIND_2=1-30 or CANKIND_3=1-30 or CANKIND_4=96 [goto AIMSPCAN]; else [goto AIMSPCLD]

Question ID: AIS.010_00.060  Instrument Variable Name: AIMSPCAN  QuestionnaireFileName: Sample Adult

QuestionText: Earlier you said you had {fill1: type of cancer from CANKIND_1, CANKIND_2, CANKIND_3, CANKIND_4 cancer}. Did a doctor or other health professional EVER tell you that your immune system is weakened because of {fill2: this cancer/these cancers}?

*Read if necessary: Please only respond yes if a doctor or health care professional told you the cancer weakens the immune system, even if you are not now having treatments or taking prescription medicines that weaken the immune system.

1  Yes
2  No
7  Refused
9  Don't know

UniverseText: Sample adults 18+ who have ever been told by a doctor/other health professional that they had a weakened immune system and have one or more kinds of cancer

SkipInstructions: <1,2,R,D> [goto AIMSPCLD]
Has a doctor or other health professional EVER told you that your immune system is weakened because you seem to get many infections and colds or that you can’t seem to get over them?

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

Sample adults 18+ who have ever been told by a doctor/other health professional that they had a weakened immune system
**Question ID:** AHS.040_00.000  
**Instrument Variable Name:** WKDAYR  
**QuestionnaireFileName:** Sample Adult

**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.

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</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>

**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.

---

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

**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.

<table>
<thead>
<tr>
<th>Code</th>
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</tr>
</thead>
<tbody>
<tr>
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<tr>
<td>001-366</td>
<td>1-366 days</td>
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<tr>
<td>997</td>
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</tr>
<tr>
<td>999</td>
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</table>

**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.
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

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

Sample adults 18+
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+

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

**QuestionText:** *(book) A5*

* 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></th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td>Not at all difficult</td>
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<tr>
<td>1</td>
<td>Only a little difficult</td>
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<tr>
<td>2</td>
<td>Somewhat difficult</td>
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<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>
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</tr>
</tbody>
</table>

**UniverseText:** Sample adults 18+

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

---

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

**QuestionText:** *(book) A5*

* 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></th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td>Not at all difficult</td>
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<td>1</td>
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<td>2</td>
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<td>3</td>
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<td>Can't do at all</td>
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<td>6</td>
<td>Do not do this activity</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 18+

**SkipInstructions:** <0-4,6,R,D> [goto FLSTOOP]
Question ID: AHS.091_05.000  Instrument Variable Name: FLSTOOP  QuestionnaireFileName: Sample Adult

QuestionText: (book) A5

* 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) A5

* 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]
### Question 1: Use your fingers to grasp or handle small objects

- **Question ID:** AHS.141_01.000
- **Instrument Variable Name:** FLGRASP
- **QuestionnaireFileName:** Sample Adult
- **QuestionText:**
  * 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

- **UniverseText:** Sample adults 18+
- **SkipInstructions:** <0-4,6,R,D> [goto FLCARRY]

### Question 2: Lift or carry something as heavy as 10 pounds such as a full bag of groceries

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

- **UniverseText:** Sample adults 18+
- **SkipInstructions:** <0-4,6,R,D> [goto FLPUSH]
**2013 NHIS Questionnaire - Sample Adult**

**Adult Health Status & Limitations**

Document Version Date: 29-May-14

---

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

**QuestionText:**

*(book) A5*

* 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) A5*

* 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 FLSOCL]
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<th>FLSOCL</th>
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<td>* Read lead-in if necessary.</td>
<td></td>
<td></td>
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</tr>
<tr>
<td></td>
<td>By yourself, and without using any special equipment, how difficult is it for you to...</td>
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<tr>
<td></td>
<td>...Participate in social activities such as visiting friends, attending clubs and meetings, going to parties?</td>
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<tr>
<td></td>
<td>0</td>
<td>Not at all difficult</td>
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<td>1</td>
<td>Only a little difficult</td>
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<td>Somewhat difficult</td>
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<td>* Read lead-in if necessary.</td>
<td></td>
<td></td>
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<tr>
<td></td>
<td>By yourself, and without using any special equipment, how difficult is it for you to...</td>
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<tr>
<td></td>
<td>...Do things to relax at home or for leisure (reading, watching TV, sewing, listening to music)?</td>
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<td></td>
<td>0</td>
<td>Not at all difficult</td>
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<td>1</td>
<td>Only a little difficult</td>
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<td>Refused</td>
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<tr>
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<td>9</td>
<td>Don't know</td>
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<td>UniverseText:</td>
<td>Sample adults 18+</td>
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<tr>
<td>SkipInstructions:</td>
<td>&lt;1-4 or FLWALK= 1-4 or FLCLIMB= 1-4 or FLSTAND= 1-4 or FLSTIT= 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&gt;[goto AFLHCA] Else goto SMKEV (next section)</td>
<td></td>
<td></td>
<td></td>
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</tr>
</tbody>
</table>
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
7 Verbatim response
9 Refused

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
7 Verbatim response
9 Refused

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.
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.

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

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

<1-95,D>[goto AHCL01T] [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]
<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)]
**2013 NHIS Questionnaire - Sample Adult**  
**Adult Health Status & Limitations**  
**Document Version Date:** 29-May-14

<table>
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<th>AHS.300_02.000</th>
<th>Instrument Variable Name:</th>
<th>AHCL01T</th>
<th>QuestionnaireFileName:</th>
<th>Sample Adult</th>
</tr>
</thead>
</table>

**QuestionText:**  
2 of 2  
* Enter time period for time with vision problem or problem seeing.  

<table>
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<tr>
<th></th>
<th>Day(s)</th>
<th>Week(s)</th>
<th>Month(s)</th>
<th>Year(s)</th>
<th>Since birth</th>
<th>Refused</th>
<th>Don't know</th>
</tr>
</thead>
<tbody>
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</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 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.
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>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>

Sample adults 18+ who had difficulty due to a hearing problem
* Enter time period for time with hearing 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_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 had difficulty due to arthritis or rheumatism

* Enter time period for time with arthritis or rheumatism.

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.303_01.000  Instrument Variable Name: AHCL04N  QuestionnaireFileName: Sample Adult

QuestionText: 1 of 2

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

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

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

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

QuestionText: 2 of 2

* 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

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_AHCL04T
[if [AHCL04N = Number greater than person years old and AHCL04T= 4]] goto ERR1_AHCL04T

Hard Edit: ERR_AHCL04T
* 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
1-94
95
95+
96
Since birth
97
Refused
99
Don't know

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

* Enter time period for time with fracture, bone, or joint 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.
How long have you had the (fill: other) injury that caused your limitation?

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

* Enter '96' for 95 or more.

* Enter "96" if since birth.

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

* 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.
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
97
99

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

* Enter time period for time with heart problem.

1
2
3
4
5
6
7
9

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

* 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.

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

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

* Time with condition cannot be greater than age.
* Please correct.
Question ID: AHS.308_01.000  Instrument Variable Name: AHCL09N  QuestionnaireFileName: Sample Adult

QuestionText: 1 of 2

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

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

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

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

QuestionText: 2 of 2

* 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

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_AHCL09T
[if [AHCL09N = Number greater than person years old and AHCL09T= 4]] goto ERR1_AHCL09T

Hard Edit: ERR_AHCL09T

* Time with condition cannot be greater than age.
* Please correct.
**Question ID:** AHS.309_01.000  **Instrument Variable Name:** AHCL10N  **QuestionnaireFileName:** Sample Adult

**QuestionText:** 1 of 2

How long have you had diabetes?

* Enter number for time with diabetes.

* 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 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)]`

---

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

**QuestionText:** 2 of 2

* Enter time period for time with diabetes.

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

QuestionText: 1 of 2

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

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

SkipInstructions:

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

Question ID: AHS.310_02.000  Instrument Variable Name: AHCL11T  QuestionnaireFileName: Sample Adult

QuestionText: 2 of 2

* 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

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_AHCL11T
[if [AHCL11IN = Number greater than person years old and AHCL11T= 4]] goto ERR1_AHCL11T

Hard Edit:

ERR_AHCL11T
* Time with condition cannot be greater than age.
* Please correct.
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  1-94
95     95+
96     Since birth
97     Refused
99     Don't know

Sample adults 18+ who had difficulty due to cancer

<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)]

* 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

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_AHCL12T
[if [AHCL12N = Number greater than person years old and AHCL12T= 4]] goto ERR1_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  1-94
95     95+
96     Since birth
97     Refused
99     Don't know

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

* Time with condition cannot be greater than age.

* Please correct.

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

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

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

<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)]

* Enter time period for time with developmental 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_AHCL15T
[if [AHCL15N = Number greater than person years old and AHCL15T= 4]] goto ERR1_AHCL15T

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

Sample adults 18+ who had difficulty due to senility

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 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.

1 of 2

01-94
95
96
97
99

Since birth
Refused
Don't know

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

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

1
2
3
4
6
7
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

* 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 01-94
95 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.
**Question ID:** AHS.318_01.000  **Instrument Variable Name:** AHCL19N  **QuestionnaireFileName:** Sample Adult

**QuestionText:**

1 of 2

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.

<p>| | |</p>
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<tr>
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</tr>
<tr>
<td>99</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

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

**SkipInstructions:**

<1-95,D>[goto AHCL19T]

<R>[store "R" in AHCL19T] [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]

<96>[store "6" in AHCL19T] [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]

---

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

**QuestionText:**

2 of 2

* Enter time period for time with missing limb.

<p>| | |</p>
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<td>Year(s)</td>
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<tr>
<td>6</td>
<td>Since birth</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 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_AHCL19T

[if [AHCL19N = Number greater than person years old and AHCL19T= 4]] goto ERR1_AHCL19T

**Hard Edit:**

ERR_AHCL19T

* Time with condition cannot be greater than age.

* Please correct.
How long have you had a kidney, bladder or renal problem?

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

* 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

* Time with condition cannot be greater than age.
* Please correct.
2013 NHIS Questionnaire - Sample Adult
Adult Health Status & Limitations

Document Version Date: 29-May-14

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 1-94
95 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.
**Question ID:** AHS.322_01.000  
**Instrument Variable Name:** AHCL23N  
**QuestionnaireFileName:** Sample Adult

**QuestionText:**

1 of 2

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.

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

**SkipInstructions:**

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

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

**QuestionText:**

2 of 2

* Enter time period for time with fibromyalgia or lupus.

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_AHCL23T  
[if [AHCL23N = Number greater than person years old and AHCL23T= 4]] goto ERR1_AHCL23T

**Hard Edit:**

ERR_AHCL23T  
* 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 01-94
   95 95+
   96 Since birth
   97 Refused
   99 Don't know

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

* Enter time period for time with osteoporosis or tendinitis.

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 epilepsy or seizures?

* Enter number for time with epilepsy or seizures.

* 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 epilepsy or seizures

* 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

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.
**2013 NHIS Questionnaire - Sample Adult**

**Adult Health Status & Limitations**

**Document Version Date:** 29-May-14

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**Question ID:** AHS.325_01.000  **Question Text:** 1 of 2

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.

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

**Skip Instructions:**

<1-95,D>[goto AHCL26T]

<R>[store "R" in AHCL26T] [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]

<96>[store "6" in AHCL26T] [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]

---

**Question ID:** AHS.325_02.000  **Question Text:** 2 of 2

* Enter time period for time with multiple sclerosis or muscular dystrophy.

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

**Skip Instructions:**

<1-4, R,D>[goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]

<6> goto ERR2_AHCL26T

[if [AHCL26N = Number greater than person years old and AHCL26T= 4]] goto ERR1_AHCL26T

**Hard Edit:** ERR_AHCL26T

* Time with condition cannot be greater than age.

* Please correct.
**2013 NHIS Questionnaire - Sample Adult**

**Adult Health Status & Limitations**

**Document Version Date:** 29-May-14

---

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

**QuestionText:**

1 of 2

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.

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

**UniverseText:**

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

**SkipInstructions:**

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

---

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

**QuestionText:**

2 of 2

* Enter time period for time with polio(myelitis), paralysis or para/quadriplegia.

- **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_AHCL27T`
- `[if [AHCL27T= Number greater than person years old and AHCL27T= 4]] goto ERR1_AHCL27T`

**Hard Edit:**

ERR_AHCL27T

* Time with condition cannot be greater than age.
* Please correct.
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 1-94
95 95+
96 Since birth
97 Refused
99 Don't know

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

* 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
97
99

Sample adults 18+ who had difficulty due to nerve damage

* Time with condition cannot be greater than age.
* Please correct.
### 2013 NHIS Questionnaire - Sample Adult

**Adult Health Status & Limitations**

**Document Version Date:** 29-May-14

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<td>1 of 2</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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.

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

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

**SkipInstructions:**

<1-95,D> [goto AHCL30T]

<R> [store "R" in AHCL30T] [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]

<96> [store "6" in AHCL30T] [goto the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]

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<td>2 of 2</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

* Enter 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

**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_AHCL30T

[if [AHCL30N = Number greater than person years old and AHCL30T= 4]] goto ERR1_AHCL30T

**Hard Edit:**

ERR_AHCL30T

* Time with condition cannot be greater than age.
* Please correct.
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  1-94
95    95+
96    Since birth
97    Refused
99    Don't know

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.
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
95
96 Since birth
97 Refused
99 Don't know

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

* Time with condition cannot be greater than age.
* Please correct.
### 2013 NHIS Questionnaire - Sample Adult

#### Adult Health Status & Limitations

**Document Version Date:** 29-May-14

<table>
<thead>
<tr>
<th>Question ID:</th>
<th>AHS.332_01.000</th>
<th>Instrument Variable Name:</th>
<th>AHCL33N</th>
</tr>
</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 a thyroid problem, Grave's disease or gout?</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>* Enter number for time with a thyroid problem, Grave's disease or gout.</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>* Enter '95' 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>1-94</td>
<td>95</td>
<td>95+</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 a thyroid problem, Grave's disease or gout

**SkipInstructions:**

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

---

<table>
<thead>
<tr>
<th>Question ID:</th>
<th>AHS.332_02.000</th>
<th>Instrument Variable Name:</th>
<th>AHCL33T</th>
</tr>
</thead>
<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 thyroid problem, Grave's disease or gout.</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 the next condition, in numerical order, selected at AFLHCA (AHS.200). If this is the last condition selected, goto SMKEV (next section)]`
- `<6> goto ERR2_AHCL33T`
- `[if [AHCL33N = Number greater than person years old and AHCL33T= 4]] goto ERR1_AHCL33T`

**Hard Edit:**

- ERR_AHCL33T
  - * Time with condition cannot be greater than age.
  - * Please correct.
2013 NHIS Questionnaire - Sample Adult
Adult Health Status & Limitations

Document Version Date: 29-May-14

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

QuestionText: 1 of 2

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  95
95+  Since birth
97  Refused
99  Don't know

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

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

---

Question ID: AHS.333_02.000  Instrument Variable Name: AHCL34T  QuestionnaireFileName: Sample Adult

QuestionText: 2 of 2

* 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

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_AHCL34T
[if [AHCL34N = Number greater than person years old and AHCL34T= 4]] goto ERR1_AHCL34T

Hard Edit: ERR1_AHCL34T

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

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

Sample adults 18+ who had difficulty due to migraine headaches

* 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

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 \{problem in AFLHCA90}\?

* Enter number for time with \{problem in AFLHCA90}\.
* 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>

Sample adults 18+ who had difficulty due to \{problem in AFLHCA90\}

* 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

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 \{problem in AFLHCA91\}?

* Enter number for time with \{problem in AFLHCA91\}.

* 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 \{problem in AFLHCA91\}

* Enter time period for time with \{problem in AFLHCA91\}.

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.
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

Sample adults 18+

<1>[goto SMKREG]
<2,R,D>[goto OTHCIGEV]

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

Sample adults 18+ who ever smoked 100 cigarettes

<6-95,96,R,D> [goto SMKNOW]

[If SMKREG gt AGE and SMKREG ne <96>, goto ERR_SMKREG]

ERR_SMKREG

* Starting age exceeded current age.
* Please correct.
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

Sample adults 18+ who ever smoked 100 cigarettes

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

Sample adults 18+ who quit smoking
2013 NHIS Questionnaire - Sample Adult

Adult Health Behaviors

Document Version Date: 29-May-14

Question ID: AHB.040_02.000  Instrument Variable Name: SMKQTTP  QuestionnaireFileName: Sample Adult

QuestionText: 2 of 2

* 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

UniverseText: Sample adults 18+ who quit smoking

SkipInstructions: <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

QuestionText: 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

UniverseText: Sample adults 18+ who are current every day smokers

SkipInstructions: <1-95,R,D> [goto CIGQTYR]
Actual Text:

**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.

<table>
<thead>
<tr>
<th>Option</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>00</td>
<td>None</td>
</tr>
<tr>
<td>01-30</td>
<td>1-30 days</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 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.

<table>
<thead>
<tr>
<th>Option</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>01-94</td>
<td>1-94 cigarettes</td>
</tr>
<tr>
<td>95</td>
<td>95+ cigarettes</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 are current some day smokers

**SkipInstructions:** <1-95,R,D> [goto CIGQTYR]
### Question ID: AHB.080_00.000
### Instrument Variable Name: CIGQTYR
### QuestionnaireFileName: Sample Adult

**QuestionText:**
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

**UniverseText:** Sample adults 18+ who are every day or someday smokers

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

---

### Question ID: AHB.085_00.010
### Instrument Variable Name: OTHCIGEV
### QuestionnaireFileName: Sample Adult

**QuestionText:**
> 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

**UniverseText:** Sample adults 18+

**SkipInstructions:** <1> [goto OTHCIGED]
<2,R,D> [goto SMKLESEV]
2013 NHIS Questionnaire - Sample Adult

Adult Health Behaviors

Document Version Date: 29-May-14

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]
2013 NHIS Questionnaire - Sample Adult

Adult Health Behaviors

Document Version Date: 29-May-14

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)

1 of 2

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+
<table>
<thead>
<tr>
<th>Question ID: AHB.090_02.000</th>
<th>Instrument Variable Name: VIGTP</th>
<th>QuestionnaireFileName: Sample Adult</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>QuestionText:</strong> 2 of 2</td>
<td></td>
<td></td>
</tr>
<tr>
<td>* Enter time period for vigorous leisure-time physical activities.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>0                          Never</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1                          Per day</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2                          Per week</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3                          Per month</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4                          Per year</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6                          Unable to do this activity</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><strong>UniverseText:</strong> Sample adults 18+ who do vigorous activities</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>SkipInstructions:</strong> &lt;1-4&gt; goto VIGLNGNO</td>
<td></td>
<td></td>
</tr>
<tr>
<td>[if (VIGNO gt &lt;4&gt; and VIGTP eq &lt;1&gt;) or</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(VIGNO gt &lt;28&gt; and VIGTP eq &lt;2&gt;) or</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(VIGNO gt &lt;31&gt; and VIGTP eq &lt;3&gt;) or</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(VIGNO gt &lt;365&gt; and VIGTP eq &lt;4&gt;) goto ERR1_VIGTP]</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Soft Edit:</strong> ERR1_VIGTP</td>
<td></td>
<td></td>
</tr>
<tr>
<td>* [Fill1: VIGNO] times per [Fill2: VIGTP] is unusually high.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>* Please verify.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Question ID: AHB.100_01.000</th>
<th>Instrument Variable Name: VIGLNGNO</th>
<th>QuestionnaireFileName: Sample Adult</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>QuestionText:</strong> 1 of 2</td>
<td></td>
<td></td>
</tr>
<tr>
<td>About how long do you do these vigorous leisure-time physical activities each time?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>* Enter number for length of vigorous leisure-time physical activities.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>001-995                    1-995</td>
<td></td>
<td></td>
</tr>
<tr>
<td>997                        Refused</td>
<td></td>
<td></td>
</tr>
<tr>
<td>999                        Don't know</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>UniverseText:</strong> Sample adults 18+ who do vigorous activities</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>SkipInstructions:</strong> &lt;1-995&gt;[goto VIGLNGTP]</td>
<td></td>
<td></td>
</tr>
<tr>
<td>&lt;R,D&gt;[goto MODNO]</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
### Question ID: AHB.100_02.000  
**Instrument Variable Name:** VIGLNGTP  
**QuestionnaireFileName:** Sample Adult

<table>
<thead>
<tr>
<th>Question Text</th>
</tr>
</thead>
<tbody>
<tr>
<td>* Enter time period for length of vigorous leisure-time physical activities.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>1</th>
<th>Minutes</th>
</tr>
</thead>
<tbody>
<tr>
<td>2</td>
<td>Hours</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 vigorous activities

**SkipInstructions:**

<1,2> goto MODNO

if VIGLNGNO lt <10> and VIGLNGTP eq <1> goto ERR1_VIGLNGTP;

if (VIGLNGNO gt <90> and VIGLNGTP eq <1>) or if VIGLNGNO gt <2> and VIGLNGTP eq <2> goto ERR2_VIGLNGTP

**Hard Edit:**

ERR1_VIGLNGTP

* Question asked for activities lasting at least 10 minutes.  
* Please correct.

ERR2_VIGLNGTP

**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

<table>
<thead>
<tr>
<th>Question Text</th>
</tr>
</thead>
</table>
| 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:**

<1-995>[goto MODTP]  
<0, 996, R,D>[goto STRNGNO]
**Question ID:** AHB.110_02.000  
**Instrument Variable Name:** MODTP  
**QuestionnaireFileName:** Sample Adult

**QuestionText:** 2 of 2

* Enter time period for light or moderate leisure-time physical activities

<table>
<thead>
<tr>
<th>Time Period</th>
<th>Value</th>
</tr>
</thead>
<tbody>
<tr>
<td>Never</td>
<td>0</td>
</tr>
<tr>
<td>Per day</td>
<td>1</td>
</tr>
<tr>
<td>Per week</td>
<td>2</td>
</tr>
<tr>
<td>Per month</td>
<td>3</td>
</tr>
<tr>
<td>Per year</td>
<td>4</td>
</tr>
<tr>
<td>Unable to do this activity</td>
<td>6</td>
</tr>
<tr>
<td>Refused</td>
<td>7</td>
</tr>
<tr>
<td>Don't know</td>
<td>9</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:**

* [Fill1: MODNO] times per [fill2: MODTP] is unusually high.
* Please verify.

---

**Question ID:** AHB.120_01.000  
**Instrument Variable Name:** MODLNGNO  
**QuestionnaireFileName:** Sample Adult

**QuestionText:** 1 of 2

About how long do you do these light or moderate leisure-time physical activities each time?

* Enter number for length of light or moderate leisure-time physical activities.

<table>
<thead>
<tr>
<th>Length</th>
<th>Value</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]  
<R,D>[goto STRNGNO]
2013 NHIS Questionnaire - Sample Adult
Adult Health Behaviors
Document Version Date: 29-May-14

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]
**2013 NHIS Questionnaire - Sample Adult**  
**Adult Health Behaviors**  
**Document Version Date:** 29-May-14

<table>
<thead>
<tr>
<th>Question ID:</th>
<th>AHB.130_02.000</th>
<th>Instrument Variable Name:</th>
<th>STRNGTP</th>
<th>QuestionnaireFileName:</th>
<th>Sample Adult</th>
</tr>
</thead>
<tbody>
<tr>
<td>QuestionText:</td>
<td>2 of 2</td>
<td>* Enter time period for strengthening activities</td>
<td>0 Never</td>
<td>1 Per day</td>
<td>2 Per week</td>
</tr>
</tbody>
</table>

**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:**

* [Fill1: STRNGNO] times per [Fill2: STRNGTP] is unusually high.  
* Please verify.

<table>
<thead>
<tr>
<th>Question ID:</th>
<th>AHB.140_00.000</th>
<th>Instrument Variable Name:</th>
<th>ALC1YR</th>
<th>QuestionnaireFileName:</th>
<th>Sample Adult</th>
</tr>
</thead>
</table>
| 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]
```
2013 NHIS Questionnaire - Sample Adult
Adult Health Behaviors

Document Version Date: 29-May-14

Question ID: AHB.150_00.000 Instrument Variable Name: ALCLIFE QuestionnaireFileName: Sample Adult

QuestionText: 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

UniverseText: Sample adults 18+ who have not had 12 drinks in any one year or don't know if they did or refused to answer

SkipInstructions: <1> [goto ALC12MNO]  
<2,R,D> [goto AHGT_FT]

Question ID: AHB.160_01.000 Instrument Variable Name: ALC12MNO QuestionnaireFileName: Sample Adult

QuestionText: 1 of 2

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

UniverseText: Sample adults 18+ who have had at least 12 drinks in any one year or at least 12 drinks in their entire life

SkipInstructions: <1-365>[goto ALC12MTP]  
<0,R,D>[goto AHGT_FT]
**2013 NHIS Questionnaire - Sample Adult**

**Adult Health Behaviors**

*Document Version Date: 29-May-14*

---

**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.

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></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> [goto ALCAMT]

[If (ALC12MNO gt <7> & ALC12MTP = <1>) or (ALC12MNO gt <31> & ALC12MTP = <2>) or (ALC12MNO gt <365> & ALC12MTP = <3>) goto ERR_ALC12MTP]

*Hard Edit:*

ERR_ALC12MTP

* [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.

| 01-94 | 1-94 drinks |
| 95    | 95+ drinks |
| 97    | Refused    |
| 99    | Don't know |

*UniverseText:*

Sample adults 18+ who have had at least 1 drink in the past year

*SkipInstructions:*

<1-95,R,D> [goto ALC5UPNO]  
<10-95>[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.

000 Never/None
001-365 1-365 days
997 Refused
999 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]
### 2013 NHIS Questionnaire - Sample Adult

**Adult Health Behaviors**

**Document Version Date:** 29-May-14

<table>
<thead>
<tr>
<th>Question ID:</th>
<th>AHB.180_02.000</th>
<th>Instrument Variable Name:</th>
<th>ALC5UPTP</th>
<th>QuestionnaireFileName:</th>
<th>Sample Adult</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>QuestionText:</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2 of 2</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

* Enter time period for days per week, per month or per year.

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td>Never/None</td>
</tr>
<tr>
<td>1</td>
<td>Per week</td>
</tr>
<tr>
<td>2</td>
<td>Per month</td>
</tr>
<tr>
<td>3</td>
<td>Per 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 have had 5+ drinks in one day at least once in the past year

**SkipInstructions:**

```
<1-3> goto AHGT_FT
[If (ALC5UPNO <7> & ALC5UPTP = <1>) or
 (ALC5UPNO <31> & ALC5UPTP = <2>) or
 (ALC5UPNO <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: ALC5UPNO] days per [Fill2: ALC5UPTP] 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.
```
How tall are you without shoes?

* Enter "M" to record metric measurements

02-07 2-7 feet
97    Refused
99    Don't know

How tall are you without shoes?

* Enter '0' if exactly [fill: AHGT_FT] feet tall.

00-11 0-11 inches
97    Refused
99    Don't know

Respondent's height in feet is [fill: AHGT_FT]?
* Please verify.
**2013 NHIS Questionnaire - Sample Adult**

**Adult Health Behaviors**

**Document Version Date:** 29-May-14

<table>
<thead>
<tr>
<th>Question ID</th>
<th>Instrument Variable Name</th>
<th>QuestionnaireFileName</th>
<th>QuestionText</th>
</tr>
</thead>
<tbody>
<tr>
<td>AHB.190_03.000</td>
<td>AHGT_M</td>
<td>Sample Adult</td>
<td>How tall are you without shoes?</td>
</tr>
<tr>
<td>0-2</td>
<td>0-2 meters</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 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.

<table>
<thead>
<tr>
<th>Question ID</th>
<th>Instrument Variable Name</th>
<th>QuestionnaireFileName</th>
<th>QuestionText</th>
</tr>
</thead>
<tbody>
<tr>
<td>AHB.190_04.000</td>
<td>AHGT_CM</td>
<td>Sample Adult</td>
<td>*Enter centimeters.</td>
</tr>
<tr>
<td>000-241</td>
<td>0-241 centimeters</td>
<td></td>
<td></td>
</tr>
<tr>
<td>997</td>
<td>Refused</td>
<td></td>
<td></td>
</tr>
<tr>
<td>999</td>
<td>Don't know</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**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:** 29-May-14

#### 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 next section]  
[if AWGT_LB lt <50> or gt <500> goto ERR_AWGT_LB  
<R,D> [goto next section]  
<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 next section]  
[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.
2013 NHIS Questionnaire - Sample Adult
Adult Access to Health Care & Utilization

Document Version Date: 29-May-14

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.035_00.000  Instrument Variable Name: AHCPLROU  QuestionnaireFileName: Sample Adult

QuestionText: Is that {fill: place from (APLKIND)} 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 AHCCCHGYR]
<2,R,D> [go to AHCPLKND]
<table>
<thead>
<tr>
<th>Question ID:</th>
<th>AAU.037_00.000</th>
<th>Instrument Variable Name:</th>
<th>AHCPLKND</th>
<th>QuestionnaireFileName:</th>
<th>Sample Adult</th>
</tr>
</thead>
<tbody>
<tr>
<td>QuestionText:</td>
<td>What kind of place do you USUALLY go to when you need routine or preventive care, such as a physical examination or check-up?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>0</td>
<td>Doesn't get preventive care anywhere</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1</td>
<td>Clinic or health center</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Doctor's office or HMO</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Hospital emergency room</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Hospital outpatient department</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>Some other place</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>Doesn't go to one place most often</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>UniverseText:</td>
<td>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.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>SkipInstructions:</td>
<td>&lt;0-6,R,D&gt; if AUSUALPL = 2 [goto ANOUSLPL]; else if AUSUALPL=R,D goto APRVTRYR ELSE goto AHCCHGYR</td>
<td></td>
<td></td>
<td></td>
<td></td>
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</table>

<table>
<thead>
<tr>
<th>Question ID:</th>
<th>AAU.040_00.000</th>
<th>Instrument Variable Name:</th>
<th>AHCCHGYR</th>
<th>QuestionnaireFileName:</th>
<th>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>
<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>
<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>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>SkipInstructions:</td>
<td>&lt;1&gt;[goto AHCCHGHJI] &lt;2,R,D&gt;[goto APRVTRYR]</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Question ID:</td>
<td>AAU.050_00.000</td>
<td>Instrument Variable Name:</td>
<td>AHCCHGHI</td>
<td>QuestionnaireFileName:</td>
<td>Sample Adult</td>
</tr>
<tr>
<td>-------------</td>
<td>----------------</td>
<td>--------------------------</td>
<td>---------</td>
<td>------------------------</td>
<td>--------------</td>
</tr>
<tr>
<td>QuestionText:</td>
<td>Was this change for a reason related to health insurance?</td>
<td></td>
<td></td>
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<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>
<td></td>
<td></td>
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<tr>
<td>9</td>
<td>Don't know</td>
<td></td>
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</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>
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<tr>
<td>SkipInstructions:</td>
<td>&lt;1,2,R,D&gt;[goto APRVTRYR]</td>
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<th>AAU.050_00.010</th>
<th>Instrument Variable Name:</th>
<th>ANOUSLPL</th>
<th>QuestionnaireFileName:</th>
<th>Sample Adult</th>
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<tbody>
<tr>
<td>QuestionText:</td>
<td>Why don’t you have a usual source of medical care?</td>
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<tr>
<td><em>Enter all that apply, separate with commas.</em></td>
<td></td>
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</tr>
<tr>
<td>01</td>
<td>Doesn't need a doctor/Haven't had any problems</td>
<td></td>
<td></td>
<td></td>
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</tr>
<tr>
<td>02</td>
<td>Doesn't like/trust/believe in doctors</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>03</td>
<td>Doesn't know where to go</td>
<td></td>
<td></td>
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<tr>
<td>04</td>
<td>Previous doctor is not available/moved</td>
<td></td>
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<tr>
<td>05</td>
<td>Too expensive/no insurance/cost</td>
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<tr>
<td>06</td>
<td>Speak a different language</td>
<td></td>
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<tr>
<td>07</td>
<td>No care available/Care too far away, not convenient</td>
<td></td>
<td></td>
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<tr>
<td>08</td>
<td>Put it off/Didn't get around to it</td>
<td></td>
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<tr>
<td>09</td>
<td>Other</td>
<td></td>
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<tr>
<td>97</td>
<td>Refused</td>
<td></td>
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<tr>
<td>99</td>
<td>Don’t know</td>
<td></td>
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<tr>
<td>UniverseText:</td>
<td>Sample adults 18+ without a usual place of care</td>
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<td>SkipInstructions:</td>
<td>&lt;1-9,R,D&gt;[goto APRVTRYR ]</td>
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<td>Question ID: AAU.051_00.010</td>
<td>Instrument Variable Name: APRVTRYR</td>
<td>QuestionnaireFileName: Sample Adult</td>
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</tr>
<tr>
<td>QuestionText: DURING THE PAST 12 MONTHS, did you have any trouble finding a general doctor or provider who would see you?</td>
<td>1 Yes 2 No 7 Refused 9 Don't know</td>
<td>UniverseText: Sample adults 18+</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>SkipInstructions: &lt;1,&gt;[goto APRVTRFD ] &lt;2,R,D&gt;[goto ADRNANP]</td>
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<tr>
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<th>Instrument Variable Name: APRVTRFD</th>
<th>QuestionnaireFileName: Sample Adult</th>
</tr>
</thead>
<tbody>
<tr>
<td>QuestionText: Were you able to find a general doctor or provider who could see you?</td>
<td>1 Yes 2 No 7 Refused 9 Don't know</td>
<td>UniverseText: Sample adults 18+ who had trouble finding a provider</td>
</tr>
<tr>
<td>SkipInstructions: &lt;1,2,R,D&gt;[goto ADRNANP]</td>
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<th>Instrument Variable Name: ADRNANP</th>
<th>QuestionnaireFileName: Sample Adult</th>
</tr>
</thead>
<tbody>
<tr>
<td>QuestionText: 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?</td>
<td>1 Yes 2 No 7 Refused 9 Don’t know</td>
<td>UniverseText: Sample adults 18+</td>
</tr>
<tr>
<td>SkipInstructions: &lt;1,2,R,D&gt;[goto ADRNAI]</td>
<td></td>
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</tr>
</tbody>
</table>
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+

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+
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 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?

...You didn't have transportation.

1  Yes
2  No
7  Refused
9  Don't know

Sample adults 18+
2013 NHIS Questionnaire - Sample Adult
Adult Access to Health Care & Utilization
Document Version Date: 29-May-14

Question ID: AAU.111_01.000  Instrument Variable Name: AHCAFY_1  QuestionnaireFileName: Sample Adult

QuestionText: 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?

...Prescription medicines.

1 Yes
2 No
7 Refused
9 Don't know

UniverseText: Sample adults 18+

SkipInstructions: <1,2,R,D>[goto AHCAFY_2]

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]
<table>
<thead>
<tr>
<th>Question ID:</th>
<th>AAU.111_03.000</th>
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<th>AHCAFY_3</th>
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<th>Sample Adult</th>
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<tr>
<td>QuestionText:</td>
<td>* Read Lead-in if Necessary.</td>
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<td></td>
<td>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?</td>
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<tr>
<td></td>
<td>...Dental care (including check ups).</td>
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<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>
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<td>9</td>
<td>Don't know</td>
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<tr>
<td>UniverseText:</td>
<td>Sample adults 18+</td>
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<tr>
<td>SkipInstructions:</td>
<td>&lt;1,2,R,D&gt;[goto AHCAFY_4]</td>
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<th>AAU.111_04.000</th>
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<th>QuestionnaireFileName:</th>
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<tr>
<td>QuestionText:</td>
<td>* Read Lead-in if Necessary.</td>
<td></td>
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<tr>
<td></td>
<td>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?</td>
<td></td>
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<tr>
<td></td>
<td>...Eyeglasses.</td>
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<tr>
<td>1</td>
<td>Yes</td>
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<tr>
<td>2</td>
<td>No</td>
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<td>7</td>
<td>Refused</td>
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<td>9</td>
<td>Don't know</td>
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<tr>
<td>UniverseText:</td>
<td>Sample adults 18+</td>
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<tr>
<td>SkipInstructions:</td>
<td>&lt;1,2,R,D&gt;[goto AHCAFY_5]</td>
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</tbody>
</table>
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

Universe Text: Sample adults 18+

Skip Instructions: <1,2,R,D>[goto AHCAFY_6]
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

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

DURING THE PAST 12 MONTHS, were you prescribed medication by a doctor or other health professional?

1  Yes
2  No
7  Refused
9  Don't know
**Question ID:** AAU.127_01.010  **Instrument Variable Name:** ARX12_1  **QuestionnaireFileName:** Sample Adult

**QuestionText:**

DURING THE PAST 12 MONTHS, were any of the following true for you?

…You skipped medication doses to save money.

<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>
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</tbody>
</table>

**UniverseText:**

Sample adults 18+ who had been prescribed medication in the past 12 months

**SkipInstructions:**

<1,2,R,D>[goto ARX12_2]

**Question ID:** AAU.127_02.010  **Instrument Variable Name:** ARX12_2  **QuestionnaireFileName:** Sample Adult

**QuestionText:**

*Read if necessary.*

DURING THE PAST 12 MONTHS, were any of the following true for you?

…You took less medicine to save money.

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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>
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</table>

**UniverseText:**

Sample adults 18+ who had been prescribed medication in the past 12 months

**SkipInstructions:**

<1,2,R,D>[goto ARX12_3]
**2013 NHIS Questionnaire - Sample Adult**

**Adult Access to Health Care & Utilization**

**Document Version Date**: 29-May-14

**Question ID**: AAU.127_03.010  
**Instrument Variable Name**: ARX12_3  
**QuestionnaireFileName**: Sample Adult

**QuestionText**: *Read if necessary.

DURING THE PAST 12 MONTHS, were 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+ who had been prescribed medication in the past 12 months

**SkipInstructions**: <1,2,R,D>[goto ARX12_4]

---

**Question ID**: AAU.127_04.010  
**Instrument Variable Name**: ARX12_4  
**QuestionnaireFileName**: Sample Adult

**QuestionText**: *Read if necessary.

DURING THE PAST 12 MONTHS, were 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

**UniverseText**: Sample adults 18+ who had been prescribed medication in the past 12 months

**SkipInstructions**: <1,2,R,D>[goto ARX12_5]
**2013 NHIS Questionnaire - Sample Adult**

**Adult Access to Health Care & Utilization**

**Document Version Date:** 29-May-14

---

**Question ID:** AAU.127_05.010  
**Instrument Variable Name:** ARX12_5  
**QuestionnaireFileName:** Sample Adult

**QuestionText:**

DURING THE PAST 12 MONTHS, were 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

**UniverseText:** Sample adults 18+

**SkipInstructions:** <1,2,R,D>[goto ARX12_6]

---

**Question ID:** AAU.127_06.010  
**Instrument Variable Name:** ARX12_6  
**QuestionnaireFileName:** Sample Adult

**QuestionText:**

*Read if necessary.*

DURING THE PAST 12 MONTHS, were any of the following true for you?

...You used alternative therapies to save money.

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

**UniverseText:** Sample adults 18+

**SkipInstructions:** <1,2,R,D>[goto ADENLONG]
**Question ID:** AAU.135_00.000  
**Instrument Variable Name:** ADENLONG  
**QuestionnaireFileName:** Sample Adult

**QuestionText:**  
(book) A7  

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

**UniverseText:** Sample adults 18+

**SkipInstructions:** &lt;0-5,R,D&gt;[ goto AHCSY1_1]  

---

**Question ID:** AAU.141_01.000  
**Instrument Variable Name:** AHCSY1_1  
**QuestionnaireFileName:** Sample Adult

**QuestionText:**  
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+

**SkipInstructions:** &lt;1,2,R,D&gt;[ 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

Universe Text: Sample adults 18+

Skip Instructions: <1,2,R,D>[ goto AHCSY1_3]

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

Universe Text: Sample adults 18+

Skip Instructions: <1,2,R,D>[ goto AHCSY1_4]
**Question ID:** AAU.141_04.000  **Instrument Variable Name:** AHCSY1_4  **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 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]
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

Sample adults 18+

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

Sample female adults aged 18+ years
* 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]
2013 NHIS Questionnaire - Sample Adult
Adult Access to Health Care & Utilization

Document Version Date: 29-May-14

Question ID: AAU.230_00.000  Instrument Variable Name: AHCSYR10  QuestionnaireFileName: Sample Adult

QuestionText: 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

UniverseText: Sample adults 18+ who have seen or talked to a general doctor during the past 12 months

SkipInstructions: <1,2,R,D> [go to AHERNOYR]

Question ID: AAU.240_00.000  Instrument Variable Name: AHERNOYR  QuestionnaireFileName: Sample Adult

QuestionText: (book) A8

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]
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

Sample adults 18+ who had at least one ER visit in the past year

Did this emergency room visit result in a hospital admission?

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

Sample adults 18+ who had at least one ER visit in the past year

Tell me which of these apply to your last emergency room visit?

… You didn't have another place to go

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

Sample adults 18+ who had at least one ER visit in the past year
Question ID: AAU.248_02.020  Instrument Variable Name: AERREAS2  QuestionnaireFileName: Sample Adult
QuestionText: *Read if necessary..

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: Sample adults 18+ who had at least one ER visit in the past year

SkipInstructions: <1,2,R,D> [goto AERREAS3]

---

Question ID: AAU.248_03.030  Instrument Variable Name: AERREAS3  QuestionnaireFileName: Sample Adult
QuestionText: *Read if necessary..

Tell me which of these apply to your last emergency room visit?

… Your health provider advised you to go

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> [goto AERREAS4]
**Question ID:** AAU.248_04.040  **Instrument Variable Name:** AERREAS4  **QuestionnaireFileName:** Sample Adult

**QuestionText:** *Read if necessary..

Tell me which of these apply to your last emergency room visit?

… The problem was too serious for the doctor’s office or clinic

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> [goto AERREAS5]

---

**Question ID:** AAU.248_05.050  **Instrument Variable Name:** AERREAS5  **QuestionnaireFileName:** Sample Adult

**QuestionText:** *Read if necessary..

Tell me which of these apply to your last emergency room visit?

… Only a hospital could help you

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> [goto AERREAS6]
**Tell me which of these apply to your last emergency room visit?**

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

**Universe**

Sample adults 18+ who had at least one ER visit in the past year

**Skip**

<1,2,R,D> [goto AERREAS7]
2013 NHIS Questionnaire - Sample Adult
Adult Access to Health Care & Utilization
Document Version Date: 29-May-14

Question ID: AAU.248_08.080 Instrument Variable Name: AERREAS8 QuestionnaireFileName: Sample Adult

QuestionText: *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

UniverseText: Sample adults 18+ who had at least one ER visit in the past year

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

Question ID: AAU.250_00.000 Instrument Variable Name: AHCHYR QuestionnaireFileName: Sample Adult

QuestionText: 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

UniverseText: Sample adults 18+

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

Question ID: AAU.260_00.000 Instrument Variable Name: AHCHMOYR QuestionnaireFileName: Sample Adult

QuestionText: 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

UniverseText: Sample adults 18+ who received home care from a health professional during the past 12 months

SkipInstructions: <1-12,R,D>[goto AHCHNOYR]
<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>AAU.270_00.000</td>
<td>AHCHNOYR</td>
<td>Sample Adult</td>
<td>(book) A9 What was the total number of home visits received during {Fill1: that month/Fill2: those months}?</td>
<td>Sample adults 18+ who received home care from a health professional during the past 12 months</td>
<td>&lt;1-8,R,D&gt;[goto AHCHNOYR]</td>
</tr>
<tr>
<td>AAU.280_00.000</td>
<td>AHCHNOYR</td>
<td>Sample Adult</td>
<td>(book) A8 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.</td>
<td>Sample adults 18+</td>
<td>&lt;0-8,R,D&gt;[goto ASRGYR]</td>
</tr>
</tbody>
</table>
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?

*Read categories if necessary.

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

Sample adults 18+ who have ever seen/talked to a doctor
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?

Sample adults 18+ who saw some other kind of provider on their last health care visit
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

Sample adults 18+ who visited a clinic, doctor’s office/HMO, hospital outpatient department or someplace else and gave a number or answered DK for length of time to make an appointment

<0,96,R> [goto AWAITRMN]
<1-95,D> [goto AVISAPTT]
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
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

Sample adults 18+

*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

Sample adults 18+
**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
Question ID: AAU.312_02.000  Instrument Variable Name: ASHFLU_Y  QuestionnaireFileName: Sample Adult

QuestionText: 2 of 2

*Enter year of most recent flu shot.

Year

9997 Refused
9999 Don't know

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

---

Question ID: AAU.313_00.000  Instrument Variable Name: FLUSHPG1  QuestionnaireFileName: Sample Adult

QuestionText: Did you get a flu shot before or during your current pregnancy?

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]
<table>
<thead>
<tr>
<th>Question ID: AAU.314_00.000</th>
<th>Instrument Variable Name: FLUSHPG2</th>
<th>QuestionnaireFileName: Sample Adult</th>
</tr>
</thead>
</table>
| **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] |

<table>
<thead>
<tr>
<th>Question ID: AAU.315_00.000</th>
<th>Instrument Variable Name: SPRFLUYR</th>
<th>QuestionnaireFileName: Sample Adult</th>
</tr>
</thead>
</table>
| **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

Skip Instructions: <1-12,D> [ goto ASPFLU_Y]
                 <R> [goto SHTPNUYR]
**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.*

<table>
<thead>
<tr>
<th>Year</th>
<th>Value</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 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.

<table>
<thead>
<tr>
<th>Code</th>
<th>Value</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+

**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+

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

Have you EVER had hepatitis?

1 Yes
2 No
7 Refused
9 Don't know

Sample adults 18+
### Question ID: AAU.360_00.000  
**Instrument Variable Name:** AHEPLIV  
**QuestionnaireFileName:** Sample Adult

**QuestionText:** Have you ever lived with someone who had hepatitis?

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

**UniverseText:** Sample adults 18+ who have never had hepatitis; Ref/DK if ever had hepatitis

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

---

### Question ID: AAU.365_00.010  
**Instrument Variable Name:** AHEPBTST  
**QuestionnaireFileName:** Sample Adult

**QuestionText:** Have you ever had a blood test for hepatitis B?

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

**UniverseText:** Sample adults 18+

**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.

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

**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?

<table>
<thead>
<tr>
<th>Option</th>
<th>Description</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]`

---

**Question ID:** AAU.390_00.010  **Instrument Variable Name:** SHTHEPA  **QuestionnaireFileName:** Sample Adult

**QuestionText:** 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?

<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+

**SkipInstructions:** `<1> goto SHEPANUM  
<2,R,D> [goto AHEPCTST]`

---

**Question ID:** AAU.400_00.010  **Instrument Variable Name:** SHEPANUM  **QuestionnaireFileName:** Sample Adult

**QuestionText:** How many hepatitis A shots did you receive?

*Enter ‘96’ if all shots were received

<table>
<thead>
<tr>
<th>Option</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>01-95</td>
<td>01-95 shots</td>
</tr>
<tr>
<td>96</td>
<td>Received all shots</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 a hepatitis A vaccine

**SkipInstructions:** `<1-95,96,R,D> [goto AHEPCTST]`
2013 NHIS Questionnaire - Sample Adult

Adult Access to Health Care & Utilization

Document Version Date: 29-May-14

Question ID: AAU.405_00.010  Instrument Variable Name: AHEPCTST  QuestionnaireFileName: Sample Adult

**QuestionText:** Have you ever had a blood test for hepatitis C?

1. Yes
2. No
7. Refused
9. Don’t know

**UniverseText:** Sample adults 18+

**SkipInstructions:**

<1> [goto AHEPCRES]
<2,R,D> if AGE GE 50 goto SHINGLES
    elseif AGE LT 50 goto SHTTD

---

Question ID: AAU.405_00.020  Instrument Variable Name: AHEPCRES  QuestionnaireFileName: Sample Adult

**QuestionText:** What is the MAIN reason you were tested for hepatitis C? Was it because...

*Read answer categories below.

1. You or your doctor thought you were at risk of having hepatitis C because a blood test or symptoms like fatigue, nausea, stomach pain, yellowing of the eyes or skin indicated you might have liver disease
2. You were born from 1945 through 1965
3. You were at risk of hepatitis C infection due to exposure to blood on your job, injection drug use or receipt of transfusion before 1992
4. Some other reason
7. Refused
9. Don’t know

**UniverseText:** Sample adults 18+ who have had a blood test for hepatitis C

**SkipInstructions:**

<1-4,R,D> if AGE GE 50 [goto SHINGLES];
    elseif AGE LT 50 goto SHTTD
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

UniverseText: Sample adults 50+

SkipInstructions: <1,2,R,D> [goto SHTTD]
**2013 NHIS Questionnaire - Sample Adult**

**Adult Access to Health Care & Utilization**

**Document Version Date:** 29-May-14

---

<table>
<thead>
<tr>
<th>Question ID:</th>
<th>AAU.440_00.010</th>
<th>Instrument Variable Name:</th>
<th>SHTTDAP</th>
<th>QuestionnaireFileName:</th>
<th>Sample Adult</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>QuestionText:</strong></td>
<td>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).</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1</td>
<td>Yes-included pertussis</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>No-did not include pertussis</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Doctor did not say</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+ 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 SHTHPV2]; else [goto LIVEV]

---

<table>
<thead>
<tr>
<th>Question ID:</th>
<th>AAU.446_00.010</th>
<th>Instrument Variable Name:</th>
<th>SHTHPV2</th>
<th>QuestionnaireFileName:</th>
<th>Sample Adult</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>QuestionText:</strong></td>
<td>Have you ever received an HPV shot or vaccine?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td><em>HPV stands for human papillomavirus (pap-uh-LOW-muh-vi-rus).</em></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td><em>The vaccines are sometimes called CERVARIX (trademark) or GARDASIL (trademark).</em></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>3</td>
<td>Doctor refused when asked</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 LE 64

**SkipInstructions:** <1> [goto SHHPVDOS] <2,3,R,D> [goto LIVEV]
## Adult Access to Health Care & Utilization

**2013 NHIS Questionnaire - Sample Adult**

### Questionnaire Version Date: 29-May-14

#### Question ID: AAU.448_00.010

**Question ID:** AAU.448_00.010  
**Instrument Variable Name:** SHHPVDOS  
**Questionnaire File Name:** Sample Adult

**QuestionText:** How many HPV shots did you receive?  
* Enter '50' if 50 or more shots  
* Enter '96' for all shots

<table>
<thead>
<tr>
<th>Number</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>01-49</td>
<td>1-49 shots</td>
</tr>
<tr>
<td>50</td>
<td>50+</td>
</tr>
<tr>
<td>96</td>
<td>All shots</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 LE 64 who received an HPV shot

**Skip Instructions:**  
<1-50,96,R,D> [goto AHPVAGE]  
<51-95> [goto ERR_SHHPVDOS]

**Hard Edit:** ERR_SHHPVDOS  
* Shots should be in the range 1-50 or 96 for all shots.  
* Please correct.

---

#### Question ID: AAU.449_00.010

**Question ID:** AAU.449_00.010  
**Instrument Variable Name:** AHPVAGE  
**Questionnaire File Name:** Sample Adult

**QuestionText:** How old were you when you received your first HPV shot?

<table>
<thead>
<tr>
<th>Number</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>008-064</td>
<td>8-64 years</td>
</tr>
<tr>
<td>997</td>
<td>Refused</td>
</tr>
<tr>
<td>999</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

**Universe Text:** Sample adults LE 64 who received an HPV shot

**Skip Instructions:**  
<8-120,R,D> [goto LIVEV]
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]
<table>
<thead>
<tr>
<th>Question ID: AAU.520_00.010</th>
<th>Instrument Variable Name: APSBSCHK</th>
<th>QuestionnaireFileName: Sample Adult</th>
</tr>
</thead>
<tbody>
<tr>
<td>QuestionText: Have you had a fasting test for high blood sugar or diabetes DURING THE PAST 12 MONTHS?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1 Yes</td>
<td>2 No</td>
<td>7 Refused</td>
</tr>
</tbody>
</table>

**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];

<table>
<thead>
<tr>
<th>Question ID: AAU.530_00.010</th>
<th>Instrument Variable Name: APSPAP</th>
<th>QuestionnaireFileName: Sample Adult</th>
</tr>
</thead>
<tbody>
<tr>
<td>QuestionText: Have you had a Pap smear or Pap test DURING THE PAST 12 MONTHS?</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
| *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 |

**UniverseText:** Female sample adults 18+

**SkipInstructions:** <1,2,R,D> if AGE GE 30 [goto APSMAM];
 else <1,2,R,D and AGE<30 [goto APSDIET]
### 2013 NHIS Questionnaire - Sample Adult

**Adult Access to Health Care & Utilization**

**Document Version Date:** 29-May-14

<table>
<thead>
<tr>
<th>Question ID</th>
<th>Instrument Variable Name</th>
<th>QuestionnaireFileName</th>
<th>QuestionText</th>
</tr>
</thead>
</table>
| AAU.540_00.010 | APSMAM | Sample Adult | 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. |

<table>
<thead>
<tr>
<th>UniverseText</th>
<th>SkipInstructions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Female sample adults 30+</td>
<td>&lt;1,2,R,D&gt; if AGE GE 40 [gotoAPSCOL]; else &lt;1,2,R,D and AGE&lt;40&gt; [goto APSDIET]</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Question ID</th>
<th>Instrument Variable Name</th>
<th>QuestionnaireFileName</th>
<th>QuestionText</th>
</tr>
</thead>
</table>
| AAU.550_00.010 | APSCOL | Sample Adult | 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. |

<table>
<thead>
<tr>
<th>UniverseText</th>
<th>SkipInstructions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sample adults 40+</td>
<td>&lt;1,2,R,D&gt; [goto APSDIET]</td>
</tr>
</tbody>
</table>
**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]

---

**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]
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

Sample adults 40-65

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
7  Refused
9  Don’t know

Sample adults 40-65
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

Sample adults 40-65

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
3. Refused
4. Don’t know

Sample adults 18+
**Question ID:** AAU.600_00.020  **Instrument Variable Name:** AINDPRCH  **QuestionnaireFileName:** Sample Adult

**QuestionText:** Was a plan purchased?

1. Yes
2. No
7. Refused
9. Don’t know

**UniverseText:** Sample adults 18+ who tried to purchase health insurance directly in the past 3 years

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

---

**Question ID:** AAU.600_00.030  **Instrument Variable Name:** AINDWHO  **QuestionnaireFileName:** Sample Adult

**QuestionText:** 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

**UniverseText:** Sample adults 18+ who purchased health insurance directly in the past 3 years

**SkipInstructions:** <1-3,R,D> [goto AINDDIF1]
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

UniverseText:  Sample adults 18+ who purchased health insurance directly in the past 3 years

SkipInstructions:  <1-3,R,D> [goto AINDDIF2]

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

UniverseText:  Sample adults 18+ who purchased health insurance directly in the past 3 years

SkipInstructions:  <1-3,R,D> [goto AINDENY1]

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

UniverseText:  Sample adults 18+ who purchased health insurance directly in the past 3 years

SkipInstructions:  <1,2,R,D> [goto AINDENY2]
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
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 next section]
                <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  Verbatim response

UniverseText: Sample adults 18+ who had other reason plan was not purchased

SkipInstructions: <allow 75,R,D> [goto next section]

Question ID: AAU.605_00.010  Instrument Variable Name: AEXCHNG  QuestionnaireFileName: Sample Adult

QuestionText: Have you looked into purchasing health insurance coverage through the [Fill: ]?

1  Yes
2  No
7  Refused
9  Don’t know

UniverseText: Sample adults LT 65 years

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

NOTE: This is a new question beginning in Q4 2013.
DURING THE PAST 12 MONTHS, have you used an indoor tanning device such as a sunlamp, sunbed, or tanning booth EVEN ONE TIME? Do NOT include times you have gotten a spray-on tan.

1  Yes
2  No
7  Refused
9  Don't know

DURING THE PAST 12 MONTHS, how many times have you used an indoor tanning device such as a sunlamp, sunbed or tanning booth? Do NOT include times you have gotten a spray-on tan.

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

Sample adults 18+ who have used indoor tanning device in past year

<1> [goto SNUM1]
<2,R,D> if SEX=2 and if APSPAP=1 [goto RPAP1_M1];
else if SEX=2 and APSPAP ne 1 [goto PAPHAD1];
else if SEX=1 and AGE GE 40 [goto PSAREC];
else if SEX =1 and AGE<40 [goto next section]
Have you EVER HAD a Pap smear or Pap test?

*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

Female sample adults 18+ who have not had a Pap test in the past 12 months
[Fill1: Earlier you said you had a Pap test.]

When did you have your MOST RECENT Pap test?

*Enter month of last Pap test.

*Enter ‘96’ to go to number and time period format.

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

UniverseText: Female sample adults 18+ who have ever had a Pap smear

SkipInstructions: <1-12,D> [goto RPAP1_Y1]
<R> store 'R' in RPAP1_Y1 [goto RPAP21]
<96> store '9996' in RPAP1_Y1 [goto RPAP1N1]
2013 NHIS Questionnaire - Sample Adult
Adult Cancer Screening

Document Version Date: 29-May-14

Question ID: NAF.150_02.000  Instrument Variable Name: RPAP1_Y1  QuestionnaireFileName: Sample Adult

QuestionText: 2 of 2

*Enter year of last Pap test.

1880-current year  1880-current year
9996  Time period format
9997  Refused
9999  Don't know

UniverseText: Female sample adults age 18+ who answered month of last Pap smear test or didn't know month of last Pap smear test

SkipInstructions: <valid year> if RPAP1_Y1 gt current year or (RPAP1_Y1=current year and RPAP1_M1 gt current month) goto ERR1_RPAP1_Y1 (future date)
elseif RPAP1_Y1 lt DOBY or (RPAP1_Y1=DOBY and RPAP1_M1 lt DOBM) goto ERR2_RPAP1_Y1 (prior to birth date)
elseif RPAP1_M1=D goto RPAP21
elseif RPAP1_M1=1-12 goto PAPREA1
<R,D> goto RPAP21

Hard Edit:

ERR1_RPAP1_Y1

* Future date invalid. Please correct.

ERR2_RPAP1_Y1

* Date before birth. Please correct.

---

Question ID: NAF.160_01.000  Instrument Variable Name: RPAP1N1  QuestionnaireFileName: Sample Adult

QuestionText: 1 of 2

When did you have your MOST RECENT Pap test?

*Enter number for time since last Pap test.

*Enter '95' for 95 or more.

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

UniverseText: Female sample adults 18+ who selected number and time period format for most recent Pap smear test from the initial month screen

SkipInstructions: <1-95> [goto RPAP1T1]
<R,D> store 'R,D' in RPAP1T1 [goto RPAP21]
Question ID: NAF.160_02.000  Instrument Variable Name: RPAP1T1  QuestionnaireFileName: Sample Adult

QuestionText: 2 of 2

*Enter time period for time since most recent Pap test.

1  Days ago
2  Weeks ago
3  Months ago
4  Years ago
7  Refused
9  Don't know

UniverseText: Female sample adults 18+ who answered 1-95 for number part of this 2 part question

SkipInstructions: <1-3> goto PAPREA1
<4> if RPAP1N1=4
  set RPAP21=4
  goto PAPREA1
elseif RPAP1N1 gt 5 and RPAP1N1 gt AGE
  goto ERR_RPAP1T1 (greater than persons age)
elseif RPAP1N1 gt 5 and RPAP1N1 le AGE
  set RPAP21=5
  goto PAPREA1
elseif RPAP1N1=1,2,3,5
  goto RPAP21
<R,D> goto RPAP21

Hard Edit: ERR_RPAP1T1

* Time since last exam cannot be greater than age.
* Please correct.
Was it:

*Read answer categories.

1 A year ago or less
2 More than 1 year but not more than 2 years
3 More than 2 years but not more than 3 years
4 More than 3 years but not more than 5 years
5 Over 5 years ago
7 Refused
9 Don't know

Female sample adults 18+ who failed to give a complete date in either the month or year format or failed to give a complete date in the number and time period format, or entered years ago in the time period format (excluding those whose last Pap smear test was over 5 years ago)

<1-5,R,D> if answer code is grayed out [goto ERR_RPAP21];
else [goto PAPREA1]

*That is not a valid response.
*Please correct.

What was the MAIN reason you had this Pap test - was it part of a routine exam, because of a problem, or some other reason?

1 Part of a routine exam
2 Because of a problem
3 Other reason
7 Refused
9 Don't know

Female sample adults 18+ who have ever had a Pap smear

<1-3,R,D> [goto MDRECP1]
Fill: (IF PAPHAD1=1 and most recent screening exam LE 3 years from system date) 
"Was your most recent Pap test recommended by a doctor or other health professional?"

Else (IF PAPHAD1=2, or PAPHAD1=1 and GT 3 years from system date or RPAP21=R,D)
"In the PAST 12 MONTHS, has a doctor or other health professional RECOMMENDED that you have a PAP test?"

1 Yes
2 No
3 Did not see a doctor in the past 12 months
7 Refused
9 Don't know

Female sample adults 18+ who did not answer refused or don't know to initial Pap test question

SkipInstructions: <1-3,R,D> 
if PAPHAD1=1 [goto PAPWHEN]; 
else PAPHAD ne 1 [goto HYST]

Question: When do you expect to have your next Pap smear or Pap test?

01 A year or less from now
02 More than 1 year to 3 years from now
03 More than 3 years to 5 years from now
04 More than 5 years from now
05 When doctor recommends it
06 Never, had HPV DNA test
07 Never, had HPV vaccine
08 Never, other reason
97 Refused
99 Don't know

Female sample adults 18+ who have ever had a Pap smear

SkipInstructions: <1-8,R,D> [goto HYST]
### Question ID: NAF.220_00.000  
**Instrument Variable Name:** HYST  
**QuestionnaireFileName:** Sample Adult

<table>
<thead>
<tr>
<th>QuestionText</th>
<th>1</th>
<th>2</th>
<th>7</th>
<th>9</th>
</tr>
</thead>
<tbody>
<tr>
<td>Have you had a hysterectomy?</td>
<td>Yes</td>
<td>No</td>
<td>Refused</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

**UniverseText:** Female sample adults 18+

**SkipInstructions:**  
<1,2,R,D>  
if AGE GE 30 [goto MAMHAD];  
else if AGE < 30 [goto next section]

---

### Question ID: NAF.230_00.000  
**Instrument Variable Name:** MAMHAD  
**QuestionnaireFileName:** Sample Adult

<table>
<thead>
<tr>
<th>QuestionText</th>
<th>1</th>
<th>2</th>
<th>7</th>
<th>9</th>
</tr>
</thead>
<tbody>
<tr>
<td>Have you EVER HAD a mammogram?</td>
<td>Yes</td>
<td>No</td>
<td>Refused</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

*Read if necessary.  
A mammogram is an x-ray taken only of the breast by a machine that presses against the breast.

**UniverseText:** Female sample adults 30+ who have not had a mammogram in the past 12 months

**SkipInstructions:**  
<1> [goto RMAM1_MT]  
<2> [goto MDRECMAM]  
<R,D> if AGE GE 40 [goto COLHAD];  
else [goto next section]
[Fill1: Earlier you said you had a mammogram.]

When did you have your MOST RECENT mammogram?

*Enter month of last mammogram.

*Enter ‘96’ to go to number and time period format.

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

UniverseText: Female sample adults 30+ who have ever had a mammogram

SkipInstructions: <1-12,D> [goto RMAM1_YR]
<R> store 'R' in RMAM1_YR [goto RMAM2]
<96> store '9996' in RMAM1_YR [goto RMAM1N]
2013 NHIS Questionnaire - Sample Adult

Adult Cancer Screening

Document Version Date: 29-May-14

Question ID: NAF.260_02.000  Instrument Variable Name: RMAM1_YR  QuestionnaireFileName: Sample Adult

QuestionText: 2 of 2

*Enter year of last mammogram.

1880-current year 1880-current year
9996 Time period format
9997 Refused
9999 Don't know

UniverseText: Female sample adults age 30+ who answered month of last mammogram or didn't know month of last mammogram

SkipInstructions: <valid year> if RMAM1_YR gt current year or (RMAM1_YR=current year and RMAM1_MT gt current month)
    goto ERR1_RMAM1_YR (future date)
elseif RMAM1_YR lt DOBY or (RMAM1_YR=DOBY and RMAM1_MT lt DOBM)
    goto ERR2_RMAM1_YR (prior to birth date)
elseif RMAM1_MT=D
    goto RMAM2
elseif RMAM1_MT=1-12
    goto MAMREAS
    <R,D> goto RMAM2

Hard Edit:

ERR1_RMAM1_YR

* Future date invalid. Please correct.

ERR2_RMAM1_YR

* Date before birth. Please correct.

Question ID: NAF.270_01.000  Instrument Variable Name: RMAM1N  QuestionnaireFileName: Sample Adult

QuestionText: 1 of 2

When did you have your MOST RECENT mammogram?

*Enter number for time since last mammogram.

*Enter '95' for 95 or more.

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

UniverseText: Female sample adults 30+ who selected number and time period format for most recent mammogram from the initial month screen

SkipInstructions: <1-95> [goto RMAM1T]
    <R,D> store 'R,D' in RMAM1T [goto RMAM2]
Question ID: NAF.270_02.000  Instrument Variable Name: RMAM1T  QuestionnaireFileName: Sample Adult

QuestionText:

2 of 2

*Enter time period for time since most recent mammogram.

1 Days ago
2 Weeks ago
3 Months ago
4 Years ago
7 Refused
9 Don't know

UniverseText: Female sample adults 30+ who answered 1-95 for number part of this 2 part question

SkipInstructions:

<1-3> goto MAMREAS
<4> if RMAM1N=4
  set RMAM2=4
  goto MAMREAS
elseif RMAM1N gt 5 and RMAM1N gt AGE
  goto ERR_RMAM1T (greater than persons age)
elseif RMAM1N gt 5 and RMAM1N le AGE
  set RMAM2=5
  goto MAMREAS
elseif RMAM1N=1,2,3,5
  goto RMAM2
<R,D> goto RMAM2

Hard Edit: ERR_RMAM1T

* Time since last exam cannot be greater than age.
* Please correct.
Question ID: NAF.275_00.000  Instrument Variable Name: RMAM2  QuestionnaireFileName: Sample Adult

QuestionText: Was it:

*Read answer categories.

1 A year ago or less
2 More than 1 year but not more than 2 years
3 More than 2 years but not more than 3 years
4 More than 3 years but not more than 5 years
5 Over 5 years ago
6 Refused
7 Don't know

UniverseText: Female sample adults 30+ who failed to give a complete date in either the month or year format or failed to give a complete date in the number and time period format, or entered years ago in the time period format (excluding those whose last mammogram was over 5 years ago)

SkipInstructions: <1-5,R,D> if answer code is grayed out [goto ERR_RMAM2]
else [goto MAMREAS]

Hard Edit: ERR_RMAM2

*That is not a valid response.
*Please correct.

Question ID: NAF.310_00.000  Instrument Variable Name: MAMREAS  QuestionnaireFileName: Sample Adult

QuestionText: What was the MAIN reason you had this mammogram -- was it part of a routine exam, because of a problem, or some other reason?

1 Part of a routine exam
2 Because of a problem
3 Other reason
4 Refused
5 Don't know

UniverseText: Female sample adults 30+ who have ever had a mammogram

SkipInstructions: <1-3,R,D> [goto MDRECMAM]
Question ID: NAF.370_00.000  Instrument Variable Name: MDRECMAM  QuestionnaireFileName: Sample Adult

QuestionText: Fill1: (IF MAMHAD=1 and most recent screening exam LE 2 years from system date)
[Was your most recent mammogram recommended by a doctor or other health professional?]
Else (IF MAMHAD=2, or MAMHAD GT 2 years from system date or RMAM2=R,D)
[In the PAST 12 MONTHS, has a doctor or other health professional RECOMMENDED that you have a mammogram?]

1  Yes
2  No
3  Did not see a doctor in the past 12 months
7  Refused
9  Don't know

UniverseText: Female sample adults 30+ who did not answer refused or don't know to initial mammogram question

SkipInstructions: <1-3,R,D> if AGE GE 40 [goto COLHAD]; else [goto next section]

Question ID: NAF.427_00.000  Instrument Variable Name: PSAREC  QuestionnaireFileName: Sample Adult

QuestionText: Has a doctor EVER recommended that you have a PSA test?
*Read if necessary. A PSA test is a blood test to detect prostate cancer. It is also called a prostate-specific antigen test.

1  Yes
2  No
7  Refused
9  Don't know

UniverseText: Male sample adults 40+

SkipInstructions: <1,2,R,D> [goto PSAHAD]
Question ID: NAF.430_00.000  Instrument Variable Name: PSAHAD  QuestionnaireFileName: Sample Adult

QuestionText: Have you EVER HAD a PSA test?

*Read if necessary. A PSA test is a blood test to detect prostate cancer. It is also called a prostate-specific antigen test.

1  Yes
2  No
7  Refused
9  Don't know

UniverseText: Male sample adults 40+

SkipInstructions: <1> [goto RPSA1_MT]
<2,R,D> [goto COLHAD]

Question ID: NAF.440_00.000  Instrument Variable Name: RPSA1_MT  QuestionnaireFileName: Sample Adult

QuestionText: 1 of 2

When did you have your MOST RECENT PSA test?

* Enter month of last PSA test.

* Enter '96' to go to number and time period format.

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

UniverseText: Male sample adults 40+ who have had a PSA test

SkipInstructions: <1-12,D> [goto RPSA1_YR]
<R> store 'R' in RPSA1_YR [goto RPSA2]
<96> store '9996' in RPSA1_YR [goto RPSA1N]
**Question ID:** NAF.440_01.000  
**Instrument Variable Name:** RPSA1_YR  
**QuestionnaireFileName:** Sample Adult

**QuestionText:**

2 of 2  

* Enter year of last PSA test.

- **1880-current year**: 1880-current year  
- **9996**: Time period format  
- **9997**: Refused  
- **9999**: Don't know

**UniverseText:** Male sample adults 40+ who answered month of last PSA test or didn't know month of last PSA test

**SkipInstructions:**

- `<valid year>` if RPSA1_YR gt current year or (RPSA1_YR=current year and RPSA1_MT gt current month) goto ERR1_RPSA1_YR (future date)  
- elseif RPSA1_YR lt DOBY or (RPSA1_YR=DOBY and RPSA1_MT lt DOBM) goto ERR2_RPSA1_YR (prior to birth date)  
- elseif RPSA1_MT=D goto RPSA2  
- elseif RPSA1_MT=1-12 goto PSAREAS  
- `<R,D>` goto RPSA2

**Hard Edit:**

- ERR1_RPSA1_YR  
  * Future date invalid. Please correct.

- ERR2_RPSA1_YR  
  * Date before birth. Please correct.

---

**Question ID:** NAF.440_02.000  
**Instrument Variable Name:** RPSA1N  
**QuestionnaireFileName:** Sample Adult

**QuestionText:**

1 of 2  

When did you have your MOST RECENT PSA test?  

* Enter number for time since last PSA test.

* Enter ‘95’ for 95 or more.

- **01-94**: 1-94  
- **95**: 95+  
- **97**: Refused  
- **99**: Don't know

**UniverseText:** Male sample adults 40+ who have selected number and time period format for most recent PSA test from the initial month screen

**SkipInstructions:**

- `<1-95>` [goto RPSA1T]  
- `<R,D>` store 'R,D' in RPSA1T [goto RPSA2]
* Enter time period for time since most recent PSA test.

1  Days ago
2  Weeks ago
3  Months ago
4  Years ago
7  Refused
9  Don't know

Male sample adults 40+ who answered 1-95 for number part of this 2 part question

* Time since last exam cannot be greater than age.
* Please correct.
**Question ID:** NAF.440_04.000  
**Instrument Variable Name:** RPSA2  
**QuestionnaireFileName:** Sample Adult

**QuestionText:** Was it:

*Read answer categories.*

1. A year ago or less
2. More than 1 year but not more than 2 years
3. More than 2 years but not more than 3 years
4. More than 3 years but not more than 5 years
5. Over 5 years ago
6. Refused
7. Don't know

**UniverseText:** Male sample adults 40+ who failed to give a complete date in either the month or year format or failed to give a complete date in the number and time period format, or entered years ago in the time period format (excluding those whose last PSA test was over 5 years ago)

**SkipInstructions:** <1-5,R,D> if answer code is grayed out [goto ERR_RPSA2]; else [goto PSAREAS]

**Hard Edit:**

*That is not a valid response.  
*Please correct.

---

**Question ID:** NAF.441_00.000  
**Instrument Variable Name:** PSAREAS  
**QuestionnaireFileName:** Sample Adult

**QuestionText:** What was the MAIN reason you had this PSA test - was it part of a routine exam, because of a problem, or some other reason?

1. Part of a routine exam
2. Because of a problem
3. Other reason
4. Refused
5. Don't know

**UniverseText:** Male sample adults 40+ who have had a PSA test

**SkipInstructions:** <1-3,R,D> [goto COLHAD]
Colonoscopy (colon-OS-copy) and sigmoidoscopy (sigmoid-OS-copy) are exams in which a doctor inserts a tube into the rectum to look for polyps or cancer. For a colonoscopy, the doctor checks the entire colon, and you are given medication through a needle in your arm to make you sleepy, and told to have someone drive you home. For a sigmoidoscopy, the doctor checks only part of the colon and you are fully awake.

Have you EVER HAD a colonoscopy?

*Read if necessary:

A polyp is a small growth that develops on the inside of the colon or rectum.

Before these tests, you are asked to take a medication that causes diarrhea.

1  Yes
2  No
7  Refused
9  Don't know

Sample adults 40+
When did you have your MOST RECENT colonoscopy?

*Enter month of last exam.

*Enter ‘96’ to go to number and time period format.

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

Sample adults 40+ who have ever had a colonoscopy

<1-12,D> [goto COL_YR]
<R> store 'R' in COL_YR [goto COL2]
<96> store '9996' in COL_YR [goto COLN]
2013 NHIS Questionnaire - Sample Adult
Adult Cancer Screening

Question ID: NAF.560_02.000  Instrument Variable Name: COL_YR
QuestionnaireFileName: Sample Adult

QuestionText:
2 of 2

*Enter year of last colonoscopy.

1880-current year 1880-current year
9996 Time period format
9997 Refused
9999 Don't know

UniverseText: Sample adults age 40+ who answered month of last colonoscopy or didn't know month of last colonoscopy

SkipInstructions:
<valid year> if COL_YR gt current year or (COL_YR=current year and COL_MT gt current month)
goto ERR1_COL_YR (future date)
elseif COL_YR lt DOBY or (COL_YR=DOBY and COL_MT lt DOBM)
goto ERR2_COL_YR (prior to birth date)
elif COL_MT=D
goto COL2
elseif COL_MT=1-12
goto COLREAS
<R,D> goto COL2
<valid year>

Hard Edit:
ERR1_COL_YR

* Future date invalid. Please correct.

ERR2_COL_YR

* Date before birth. Please correct.

---

Question ID: NAF.570_01.000  Instrument Variable Name: COLN
QuestionnaireFileName: Sample Adult

QuestionText:
1 of 2

When did you have your MOST RECENT colonoscopy?

*Enter number for time since last colonoscopy.

*Enter '95' for 95 or more.

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

UniverseText: Sample adults 40+ who selected number and time period format for most recent colonoscopy from the initial month screen

SkipInstructions:
<1-95> [goto COLT]
<R,D> store 'R,D' in COLT [goto COL2]
*Enter time period for time since most recent colonoscopy.

1  Days ago
2  Weeks ago
3  Months ago
4  Years ago
7  Refused
9  Don't know

Sample adults 40+ who answered 1-95 for number part of this 2 part question

* Time since last exam cannot be greater than age.
* Please correct.
### Question 1: Adult Cancer Screening - Adult Cancer Screening

**Question ID:** NAF.575_00.000  
**Instrument Variable Name:** COL2  
**QuestionnaireFileName:** Sample Adult

**QuestionText:**
Was it:

*Read answer categories.*

1. A year ago or less
2. More than 1 year but not more than 2 years
3. More than 2 years but not more than 3 years
4. More than 3 years but not more than 5 years
5. More than 5 years but not more than 10 years
6. Over 10 years ago
7. Refused
8. Don't know

**UniverseText:** Sample adults 40+ who failed to give a complete date in either the month or year format or failed to give a complete date in the number and time period format, or entered years ago in the time period format (excluding those whose last colonoscopy was 6-9 or over 10 years ago).

**SkipInstructions:** <1-6,R,D> if answer code is grayed out [goto ERR_COL2];  
else [goto COLREAS]

**Hard Edit:** ERR_COL2

*That is not a valid response.*  
*Please correct.*

---

### Question 2: Adult Cancer Screening - Adult Cancer Screening

**Question ID:** NAF.590_00.000  
**Instrument Variable Name:** COLREAS  
**QuestionnaireFileName:** Sample Adult

**QuestionText:**
What was the MAIN reason you had this colonoscopy - was it part of a routine exam, because of a problem, as a follow-up test of an earlier test or screening exam, or some other reason?

1. Part of a routine exam
2. Because of a problem
3. Follow-up test of an earlier test or screening exam
4. Other reason
5. Refused
6. Don't know

**UniverseText:** Sample adults 40+ who have had a colonoscopy

**SkipInstructions:** <1-4,R,D> [goto SIGHAD]
Recall that a sigmoidoscopy is similar to a colonoscopy but the doctor checks only part of the colon and you are fully awake. Have you EVER HAD a sigmoidoscopy?

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

Sample adults 40+

When did you have your MOST RECENT sigmoidoscopy?

*Enter month of last exam.
*Enter '96' to go to number and time period format.

1. January
2. February
3. March
4. April
5. May
6. June
7. July
8. August
9. September
10. October
11. November
12. December
96. Time period format
97. Refused
99. Don't know

Sample adults 40+ who have ever had a sigmoidoscopy
**2013 NHIS Questionnaire - Sample Adult**

**Adult Cancer Screening**

**Document Version Date:** 29-May-14

---

**Question ID:** NAF.593_02.000  **Instrument Variable Name:** SIG_YR  **QuestionnaireFileName:** Sample Adult

**QuestionText:**

2 of 2

*Enter year of last sigmoidoscopy.

1880-current year
1880-current year
1896  Time period format
1897  Refused
1899  Don't know

---

**UniverseText:** Sample adults age 40+ who answered month of last sigmoidoscopy or didn't know month of last sigmoidoscopy

**SkipInstructions:**

<valid year> if SIG_YR gt current year or (SIG_YR=current year and SIG_MT gt current month)

goto ERR1_SIG_YR (future date)

elseif SIG_YR lt DOBY or (SIG_YR=DOBY and SIG_MT lt DOBM)

goto ERR2_SIG_YR (prior to birth date)

elseif SIG_MT=D

goto SIG2

elseif SIG_MT=1-12

goto SIGREAS

<R,D> goto SIG2

**Hard Edit:**

ERR1_SIG_YR

* Future date invalid. Please correct.

ERR2_SIG_YR

* Date before birth. Please correct.

---

**Question ID:** NAF.594_01.000  **Instrument Variable Name:** SIGN  **QuestionnaireFileName:** Sample Adult

**QuestionText:**

1 of 2

When did you have your MOST RECENT sigmoidoscopy?

*Enter number for time since last sigmoidoscopy.

*Enter '95' for 95 or more.

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

---

**UniverseText:** Sample adults 40+ who selected number and time period format for most recent sigmoidoscopy from the initial month screen

**SkipInstructions:**

<1-95> [goto SIGT]

<R,D> store 'R,D' in SIGT [goto SIG2]
**Question ID:** NAF.595_02.000  **Instrument Variable Name:** SIGT  **QuestionnaireFileName:** Sample Adult

**QuestionText:**

2 of 2

*Enter time period for time since most recent sigmoidoscopy.

1 Days ago
2 Weeks ago
3 Months ago
4 Years ago
7 Refused
9 Don't know

**UniverseText:** Sample adults 40+ who answered 1-95 for number part of this 2 part question

**SkipInstructions:**

<1-3> goto SIGREAS
<4> if SIGN=4
    set SIG2=4
goto SIGREAS
elseif SIGN=6,7,8,9
    set SIG2=5
goto SIGREAS
elseif SIGN gt 10 and SIGN gt AGE
    goto ERR_SIGT (greater than persons age)
elseif SIGN gt 10 and SIGN le AGE
    set SIG2=6
goto SIGREAS
elseif SIGN=1,2,3,5,10
    goto SIG2
<R,D> goto SIG2

**Hard Edit:**

ERR_SIGT

* Time since last exam cannot be greater than age.
* Please correct.
Was it:

*Read answer categories.

1. A year ago or less
2. More than 1 year but not more than 2 years
3. More than 2 years but not more than 3 years
4. More than 3 years but not more than 5 years
5. More than 5 years but not more than 10 years
6. Over 10 years ago
7. Refused
8. Don't know

Sample adults 40+ who failed to give a complete date in either the month or year format or failed to give a complete date in the number and time period format, or entered years ago in the time period format (excluding those whose last sigmoidoscopy was 6-9 or over 10 years ago)

What was the MAIN reason you had this sigmoidoscopy - was it part of a routine exam, because of a problem, as a follow-up test of an earlier test or screening exam, or some other reason?

1. Part of a routine exam
2. Because of a problem
3. Follow-up test of an earlier test or screening exam
4. Other reason
5. Refused
6. Don't know

Sample adults 40+ who have had a sigmoidoscopy
The following questions are about the blood stool or occult blood test, a test to determine whether you have blood in your stool or bowel movement. The blood stool test can be done at home using a kit. You use a stick or brush to obtain a small amount of stool at home and send it back to the doctor or lab.

Have you EVER HAD a blood stool test, using a HOME test kit?

*Read if necessary:

Do not include tests done at the doctor's office.

1  Yes
2  No
7  Refused
9  Don't know

Sample adults 40+
When did you have your MOST RECENT blood stool test using a kit at home?

*Enter month of last home blood stool test.

*Enter ‘96’ to go to number and time period format.

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

UniverseText: Sample adults 40+ who have ever had a home blood stool test

SkipInstructions: <1-12,D> goto RHFO1_YR
<R> store "R" in RHFO1_YR and goto RHFO2
<96> store "9996" in RHFO1_YR and goto RHFO1N
**Question ID:** NAF.640_02.000  **Instrument Variable Name:** RHFO1_YR  **QuestionnaireFileName:** Sample Adult

**QuestionText:** 2 of 2

*Enter year of last home blood stool test.

**UniverseText:** Sample adults age 40+ who answered month of last home blood stool test or didn't know month of last test

**SkipInstructions:**

<valid year> if RHFO1_YR gt current year or (RHFO1_YR=current year and RHRO1_MT gt current month) goto ERR1_RHFO1_YR (future date)  
elseif RHFO1_YR lt DOBY or (RHFO1_YR=DOBY and RHFO1_MT lt DOBM) goto ERR2_RHFO1_YR (prior to birth date)  
elseif RHFO1_MT=D goto RHFO2  
elseif RHFO1_MT=1-12 goto HFOBREA1  
<R,D> goto RHFO2

**Hard Edit:**

ERR1_RHFO1_YR

* Future date invalid. Please correct.

ERR2_RHFO1_YR

* Date before birth. Please correct.

---

**Question ID:** NAF.650_01.000  **Instrument Variable Name:** RHFO1N  **QuestionnaireFileName:** Sample Adult

**QuestionText:** 1 of 2

When did you have your MOST RECENT blood stool test using a kit at home?

*Enter number for time since last home blood stool test.

*Enter '95' for 95 or more.

**UniverseText:** Sample adults 40+ who selected number and time period format for most recent home blood stool test from the initial month screen

**SkipInstructions:**

<1-95> [goto RHFO1T]  
<R,D> store 'R,D' in RHFO1T [goto RHFO2]
2 of 2

*Enter time period for time since most recent home blood stool test.

1  Days ago
2  Weeks ago
3  Months ago
4  Years ago
7  Refused
9  Don't know

Sample adults 40+ who answered 1-95 for number part of this 2 part question

<1-3> goto HFOBREA1
<4> if RHFO1N=4
    set RHFO2=4
    goto HFOBREA1
elseif RHFO1N=6,7,8,9
    set RHFO2=5
    goto HFOBREA1
elseif RHFO1N gt 10 and RHFO1N gt AGE
    goto ERR_RHFO1T (greater than persons age)
elseif RHFO1N gt 10 and RHFO1N le AGE
    set RHFO2=6
    goto HFOBREA1
elseif RHFO1N=1,2,3,5,10
    goto RHFO2
<R,D> goto RHFO2

* Time since last exam cannot be greater than age.
* Please correct.
**2013 NHIS Questionnaire - Sample Adult**

**Adult Cancer Screening**

Document Version Date: 29-May-14

---

**Question ID:** NAF.655_00.000  **Instrument Variable Name:** RHFO2  **QuestionnaireFileName:** Sample Adult

**QuestionText:**

Was it:

*Read answer categories.*

1. A year ago or less
2. More than 1 year but not more than 2 years
3. More than 2 years but not more than 3 years
4. More than 3 years but not more than 5 years
5. More than 5 years but not more than 10 years
6. Over 10 years ago
7. Refused
9. Don't know

**UniverseText:** Sample adults 40+ who failed to give a complete date in either the month or year format or failed to give a complete date in the number and time period format, or entered years ago in the time period format (excluding those whose last home blood stool test was 6-9 or over 10 years ago)

**SkipInstructions:**

<1-6,R,D> if answer code is grayed out [goto ERR_RHFO2]; else [goto HFOBREA1]

**Hard Edit:**

ERR_RHFO2

*That is not a valid response.
*Please correct.

---

**Question ID:** NAF.660_00.000  **Instrument Variable Name:** HFOBREA1  **QuestionnaireFileName:** Sample Adult

**QuestionText:**

What was the MAIN reason you had this home blood stool test - was it part of a routine exam, because of a problem, or some other reason?

1. Part of a routine exam
2. Because of a problem
3. Other reason
7. Refused
9. Don't know

**UniverseText:** Sample adults 40+ who have had a home blood stool test

**SkipInstructions:**

<1-3,R,D> [goto COLPROB]
In the PAST 12 MONTHS, did a doctor or other health professional RECOMMEND that you be tested to look for problems in your colon or rectum?

1  Yes
2  No
7  Refused
9  Don't know

Sample adults 40+
*You are about to enter the Sexual Identity and Lifestyle questions section. This section includes questions on computer use, the respondent’s neighborhood, sexual identity, financial worries, mental health, and HIV testing.

*Enter 1 to Continue.

1  Continue

These questions are about you and your neighborhood.

How often do you use a computer?

*Read answer categories.

1  Never or almost never
2  Some days
3  Most days
4  Every day
7  Refused
9  Don't know

Sample adults 18+
### Question 1
**Question ID:** ASI.140_00.000  
**Instrument Variable Name:** ACISATHC  
**QuestionnaireFileName:** Sample Adult  
**QuestionText:** In general, how satisfied are you with the health care you received in the past 12 months?  
*Read answer categories.*  
1. Very satisfied  
2. Somewhat satisfied  
3. Somewhat dissatisfied  
4. Very dissatisfied  
5. You haven't had health care in the past 12 months  
7. Refused  
9. Don't know  
**UniverseText:** Sample adults 18+  
**SkipInstructions:** <1-5,R,D> [goto ACITENUR]

### Question 2
**Question ID:** ASI.150_00.000  
**Instrument Variable Name:** ACITENUR  
**QuestionnaireFileName:** Sample Adult  
**QuestionText:** About how long have you lived in your present neighborhood?  
1. Less than 1 year  
2. 1-3 years  
3. 4-10 years  
4. 11-20 years  
5. More than 20 years  
7. Refused  
9. Don't know  
**UniverseText:** Sample adults 18+  
**SkipInstructions:** <1-5,R,D> [goto ACINHELP]
### Question 160

**Question ID:** ASI.160_00.000  
**Instrument Variable Name:** ACINHELP  
**QuestionnaireFileName:** Sample Adult

**Question Text:**

How much do you agree or disagree with the following statements about your neighborhood?

- People in this neighborhood help each other out.

Would you say…

*Read answer categories.

1. Definitely agree
2. Somewhat agree
3. Somewhat disagree
4. Definitely disagree
7. Refused
9. Don't know

**Universe Text:** Sample adults 18+

**Skip Instructions:** <1-4,R,D> [goto ACINCNTO]

### Question 170

**Question ID:** ASI.170_00.000  
**Instrument Variable Name:** ACINCNTO  
**QuestionnaireFileName:** Sample Adult

**Question Text:**

*Read if necessary.

How much do you agree or disagree with the following statements about your neighborhood?

- There are people I can count on in this neighborhood.

Would you say…

*Read answer categories if necessary.

1. Definitely agree
2. Somewhat agree
3. Somewhat disagree
4. Definitely disagree
7. Refused
9. Don't know

**Universe Text:** Sample adults 18+

**Skip Instructions:** <1-4,R,D> [goto ACINTRU]
How much do you agree or disagree with the following statements about your neighborhood?

People in this neighborhood can be trusted.

Would you say…

*Read answer categories if necessary.

1  Definitely agree
2  Somewhat agree
3  Somewhat disagree
4  Definitely disagree
7  Refused
9  Don't know

Sample adults 18+

How much do you agree or disagree with the following statements about your neighborhood?

This is a close-knit neighborhood.

Would you say…

*Read answer categories if necessary.

1  Definitely agree
2  Somewhat agree
3  Somewhat disagree
4  Definitely disagree
7  Refused
9  Don't know

Sample adults 18+

<1-4,R,D> [goto ACINKNT]
Which of the following best represents how you think of yourself?

1. Gay
2. Straight, that is, not gay
3. Bisexual
4. Something else
5. I don't know the answer
6. Refused

Male sample adults 18+

What do you mean by something else?

1. You are not straight, but identify with another label such as queer, trisexual, omnisexual or pansexual
2. You are transgender, transsexual or gender variant
3. You have not figured out or are in the process of figuring out your sexuality
4. You do not think of yourself as having sexuality
5. You do not use labels to identify yourself
6. You mean something else
7. Refused
8. Don't know

Male sample adults 18+ who think of themselves as something else
2013 NHIS Questionnaire - Sample Adult
Adult Selected Items
Document Version Date: 11-Jun-14

Question ID: ASI.234_00.000  Instrument Variable Name: ACISIMDK  QuestionnaireFileName: Sample Adult

QuestionText: (book) ASI4

What do you mean by don't know?

1 You don't understand the words
2 You understand the words, but you have not figured out or are in the process of figuring out your sexuality
3 You mean something else
7 Refused
9 Don't know

UniverseText: Male sample adults 18+ who answered don't know at ACISIM

SkipInstructions: <1,2,R,D> [goto ACIRETR]
<3> [goto ACIMSESP]

Question ID: ASI.238_00.000  Instrument Variable Name: ACIMSESP  QuestionnaireFileName: Sample Adult

QuestionText: What do you mean by something else?

Verbatim Verbatim response
97 Refused
99 Don't know

UniverseText: Male sample adults 18+ who answered something else at ACISMELS or ACISIMDK

SkipInstructions: <Allow 75,R,D> [goto ACIRETR]
Which of the following best represents how you think of yourself?

1. Lesbian or gay
2. Straight, that is, not lesbian or gay
3. Bisexual
4. Something else
5. I don't know the answer
6. Refused

Female sample adults 18+

What do you mean by something else?

1. You are not straight, but identify with another label such as queer, trisexual, omnisexual or pansexual
2. You are transgender, transsexual or gender variant
3. You have not figured out or are in the process of figuring out your sexuality
4. You do not think of yourself as having sexuality
5. You do not use labels to identify yourself
6. You mean something else
7. Refused
8. Don't know

Female sample adults 18+ who think of themselves as something else
### Question ID: ASI.254_00.000

**Instrument Variable Name:** ACISIFDK  
**QuestionnaireFileName:** Sample Adult

**QuestionText:**

What do you mean by don't know?

1. You don't understand the words
2. You understand the words, but you have not figured out or are in the process of figuring out your sexuality
3. You mean something else

7. Refused
9. Don't know

**UniverseText:** Female sample adults 18+ who answered don't know at ACISIF

**SkipInstructions:** <1,2,R,D> [goto ACIRETR]  
<3> [goto ACIFSESP]

---

### Question ID: ASI.258_00.000

**Instrument Variable Name:** ACIFSESP  
**QuestionnaireFileName:** Sample Adult

**QuestionText:**

What do you mean by something else?

**Verbatim:**

<table>
<thead>
<tr>
<th>Code</th>
<th>Verbatim Response</th>
</tr>
</thead>
<tbody>
<tr>
<td>97</td>
<td>Refused</td>
</tr>
<tr>
<td>99</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

**UniverseText:** Female sample adults 18+ who answered something else at ACISFELS or ACISIFDK

**SkipInstructions:** <Allow 75,R,D> [goto ACIRETR]
The next questions ask how worried you are right now about financial matters.

How worried are you right now about not having enough money for retirement? Are you...

*Read answer categories.

1  Very worried
2  Moderately worried
3  Not too worried
4  Not worried at all
7  Refused
9  Don't know

Sample adults 18+

How worried are you right now about not being able to pay medical costs of a serious illness or accident? Are you...

*Read answer categories if necessary.

1  Very worried
2  Moderately worried
3  Not too worried
4  Not worried at all
7  Refused
9  Don't know

Sample adults 18+
How worried are you right now about not being able to maintain the standard of living you enjoy? Are you…

*Read answer categories if necessary.

1 Very worried
2 Moderately worried
3 Not too worried
4 Not worried at all
7 Refused
9 Don't know

Sample adults 18+

How worried are you right now about not being able to pay medical costs for normal healthcare? Are you…

*Read answer categories if necessary.

1 Very worried
2 Moderately worried
3 Not too worried
4 Not worried at all
7 Refused
9 Don't know

Sample adults 18+
How worried are you right now about not having enough money to pay for your children's college? Are you…

*Read answer categories if necessary.

1 Very worried
2 Moderately worried
3 Not too worried
4 Not worried at all
5 This does not apply to me
7 Refused
9 Don't know

Sample adults 18+

How worried are you right now about not having enough to pay your normal monthly bills? Are you…

*Read answer categories if necessary.

1 Very worried
2 Moderately worried
3 Not too worried
4 Not worried at all
7 Refused
9 Don't know

Sample adults 18+
**2013 NHIS Questionnaire - Sample Adult**

**Adult Selected Items**

Document Version Date: 11-Jun-14

---

**Question ID:** ASI.320_00.000  **Instrument Variable Name:** ACIH CST  **QuestionnaireFileName:** Sample Adult

**QuestionText:** How worried are you right now about not being able to pay your rent, mortgage, or other housing costs? Are you…

*Read answer categories if necessary.

1  Very worried
2  Moderately worried
3  Not too worried
4  Not worried at all
7  Refused
9  Don't know

**UniverseText:** Sample adults 18+

**SkipInstructions:** <1-4,R,D> [goto ACICCMP]

---

**Question ID:** ASI.330_00.000  **Instrument Variable Name:** ACICCMP  **QuestionnaireFileName:** Sample Adult

**QuestionText:** How worried are you right now about not being able to make the minimum payments on your credit cards? Are you…

*Read answer categories if necessary.

1  Very worried
2  Moderately worried
3  Not too worried
4  Not worried at all
5  I don't have credit cards
7  Refused
9  Don't know

**UniverseText:** Sample adults 18+

**SkipInstructions:** <1-5,R,D> [goto ACISLEEP]
### Question 13

**Question ID:** ASI.340_00.000  
**Instrument Variable Name:** ACISLEEP  
**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.

<table>
<thead>
<tr>
<th>Code</th>
<th>Response</th>
</tr>
</thead>
<tbody>
<tr>
<td>01-24</td>
<td>1-24 hours</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+

**SkipInstructions:**

<1-5>[goto ERR_SLEEP]; 
<1-24, R,D>[goto ACISLPFL]

**Soft Edit:** ERR_SLEEP

*Average number of hours of sleep is [ACISLEEP].
*Please verify.

---

### Question 14

**Question ID:** ASI.350_00.000  
**Instrument Variable Name:** ACISLPFL  
**QuestionnaireFileName:** Sample Adult

**QuestionText:** In the past week, how many times did you have trouble falling asleep?

*Enter '0' if respondent did not have trouble falling asleep in the past week.
*Enter '7' for 7 or more times.

<table>
<thead>
<tr>
<th>Code</th>
<th>Response</th>
</tr>
</thead>
<tbody>
<tr>
<td>00</td>
<td>Did not have trouble falling asleep in the past week</td>
</tr>
<tr>
<td>01-06</td>
<td>1-6 times</td>
</tr>
<tr>
<td>07</td>
<td>7 or more times</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+

**SkipInstructions:**

<0-7,R,D> [goto ACISLPST]
### Question 360

**Question ID:** ASI.360_00.000  
**Instrument Variable Name:** ACISLPST  
**Questionnaire File Name:** Sample Adult

**Question Text:**
In the past week, how many times did you have trouble staying asleep?

*Enter '0' if respondent did not have trouble staying asleep in the past week.

*Enter '7' for 7 or more times.

- **00**: Did not have trouble staying asleep in the past week
- **01-06**: 1-6 times
- **07**: 7 or more times
- **97**: Refused
- **99**: Don't know

**Universe Text:** Sample adults 18+

**Skip Instructions:** `<0-7,R,D> [goto ACISLPMD]`

### Question 370

**Question ID:** ASI.370_00.000  
**Instrument Variable Name:** ACISLPMD  
**Questionnaire File Name:** Sample Adult

**Question Text:**
In the past week, how many times did you take medication to help you fall asleep or stay asleep?

*Enter '0' if respondent did not take medication to help sleep in the past week.

*Enter '7' for 7 or more times.

- **00**: Did not take medication to help sleep in the past week
- **01-06**: 1-6 times
- **07**: 7 or more times
- **97**: Refused
- **99**: Don't know

**Universe Text:** Sample adults 18+

**Skip Instructions:** `<0-7,R,D> [goto ACIREST]`
**Question ID:** ASI.380_00.000  
**Instrument Variable Name:** ACIREST  
**QuestionnaireFileName:** Sample Adult

**QuestionText:**
In the past week, on how many days did you wake up feeling well rested?

*Enter '0' if respondent never felt well rested in the past week.*

- 00  Never felt rested in the past week
- 01-07  1-7 days
- 97  Refused
- 99  Don't know

**UniverseText:** Sample adults 18+

**SkipInstructions:** <0-7,R,D> [goto MHSAD_CK]

---

**Question ID:** ASI.390_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.

- 1  Enter 1 to continue

**UniverseText:** Sample adults 18+

**SkipInstructions:** <1> [goto ACISAD]

---

**Question ID:** ASI.390_01.000  
**Instrument Variable Name:** ACISAD  
**QuestionnaireFileName:** Sample Adult

**QuestionText:**
(book) ASI5

DURING THE PAST 30 DAYS, how often did you feel

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

- 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 ACINERV]
### Question ID: ASI.390_02.000  
**Instrument Variable Name:** ACINERV  
**QuestionnaireFileName:** Sample Adult

| QuestionText | 
|---|---|
| *(book) ASI5*  

* Read if necessary:  

During the PAST 30 DAYS, how often did you feel  
...Nervous?  

| 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 ACIRSTLS]`

---

### Question ID: ASI.390_03.000  
**Instrument Variable Name:** ACIRSTLS  
**QuestionnaireFileName:** Sample Adult

| QuestionText | 
|---|---|
| *(book) ASI5*  

* Read 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 ACIHOPLS]`
### 2013 NHIS Questionnaire - Sample Adult
#### Adult Selected Items

**Document Version Date:** 11-Jun-14

<table>
<thead>
<tr>
<th>Question ID:</th>
<th>ASI.390_04.000</th>
<th>Instrument Variable Name:</th>
<th>ACIHOPLS</th>
<th>QuestionnaireFileName:</th>
<th>Sample Adult</th>
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<tbody>
<tr>
<td>QuestionText:</td>
<td>(book) ASI5</td>
<td></td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>* Read if necessary:</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>During the PAST 30 DAYS, how often did you feel...Hopeless?</td>
<td></td>
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<td></td>
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</tr>
<tr>
<td>1</td>
<td>ALL of the time</td>
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<td></td>
<td></td>
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</tr>
<tr>
<td>2</td>
<td>MOST of the time</td>
<td></td>
<td></td>
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<tr>
<td>3</td>
<td>SOME of the time</td>
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</tr>
<tr>
<td>4</td>
<td>A LITTLE of the time</td>
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<tr>
<td>5</td>
<td>NONE of the time</td>
<td></td>
<td></td>
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</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>
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<td><strong>UniverseText:</strong></td>
<td>Sample adults 18+</td>
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<td></td>
<td>&lt;1-5,R,D&gt; [goto ACIEFFRT]</td>
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<th>Instrument Variable Name:</th>
<th>ACIEFFRT</th>
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<th>Sample Adult</th>
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<td>(book) ASI5</td>
<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td>* Read if necessary:</td>
<td></td>
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<tr>
<td>During the PAST 30 DAYS, how often did you feel...That everything was an effort?</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>1</td>
<td>ALL of the time</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>MOST of the time</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>SOME of the time</td>
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<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>A LITTLE of the time</td>
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<td></td>
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<td></td>
</tr>
<tr>
<td>5</td>
<td>NONE of the time</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+</td>
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<tr>
<td><strong>SkipInstructions:</strong></td>
<td></td>
<td>&lt;1-5,R,D&gt; [goto ACIWTHLS]</td>
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</tbody>
</table>
**Question ID:** ASI.390_06.000  **Instrument Variable Name:** ACIWTHLS  **QuestionnaireFileName:** Sample Adult

**QuestionText:** (book) ASI5

* 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**
6. **Refused**
7. **Don't know**

**UniverseText:** Sample adults 18+

**SkipInstructions:** `<1-5,R,D> if  ACISAD or ACINERV or ACIRSTLS or ACIHOPLS or ACIEFFRT or ACIWTHLS=1-3 [goto ACIMUCH];
else [goto ACIHIVT]

---

**Question ID:** ASI.400_00.000  **Instrument Variable Name:** ACIMUCH  **QuestionnaireFileName:** Sample Adult

**QuestionText:** 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**
5. **Refused**
6. **Don't know**

**UniverseText:** 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

**SkipInstructions:** `<1-4,R,D> [goto ACIHIVT]`
### Question 410
**Question Text:**
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

**Universe Text:** Sample adults 18+

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

### Question 420
**Question Text:**
I am going to show you a list of reasons why some people have not been tested for HIV (the virus that causes AIDS). Which one of these would you say is the MAIN reason why you have not been tested?

01. It's unlikely you've been exposed to HIV
02. You were afraid to find out if you were HIV positive (that you had HIV)
03. You didn't want to think about HIV or about being HIV positive
04. You were worried your name would be reported to the government if you tested positive
05. You didn't know where to get tested
06. You don't like needles
07. You were afraid of losing job, insurance, housing, friends, family, if people knew you were positive for AIDS infection
08. Some other reason
09. No particular reason
97. Refused
99. Don't know

**Universe Text:** Sample adults 18+ who have never been tested for HIV

**Skip Instructions:** <1-9,R,D> [goto next section]
**2013 NHIS Questionnaire - Sample Adult**

**Adult Internet and Email Usage**

Document Version Date: 29-May-14

---

**Question ID:** AWB.010_00.000  
**Instrument Variable Name:** AWEBUSE  
**QuestionnaireFileName:** Sample Adult

**QuestionText:**  
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

**UniverseText:** Sample adults 18+

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

---

**Question ID:** AWB.020_01.000  
**Instrument Variable Name:** AWEBOFNO  
**QuestionnaireFileName:** Sample Adult

**QuestionText:**  
1 of 2

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

**UniverseText:** Sample adults 18+ who use the Internet

**SkipInstructions:** <1-995> [goto AWEBOFTP] <R,D> [goto AWEBEML]
**Question ID:** AWB.020_02.000  **Instrument Variable Name:** AWEBOFTP  **QuestionnaireFileName:** Sample Adult

**Question Text:**
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

**Universe Text:** Sample adults 18+ who use the Internet and gave a valid value for the number portion of this question

**Skip Instructions:** <1-4,R,D> [goto AWEBEML]

---

**Question ID:** AWB.030_00.000  **Instrument Variable Name:** AWEBEML  **QuestionnaireFileName:** Sample Adult

**Question Text:**
Do you send or receive emails?

1 Yes
2 No
7 Refused
9 Don't know

**Universe Text:** Sample adults 18+

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

Sample adults 18+ who send or receive email

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

Sample adults 18+ who gave an email address
2013 NHIS Questionnaire - Sample Adult
Adult Internet and Email Usage

Document Version Date: 29-May-14

Question ID: AWB.050_02.000 Instrument Variable Name: AWEBMTP QuestionnaireFileName: Sample Adult

QuestionText: 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

UniverseText: Sample adults 18+ who gave an email address and gave a valid value for the number portion of this question

SkipInstructions: <1-4,R,D> [goto next section]