BOX_01
======

```
---------------------------------------------------------
|   IF AT LEAST ONE CONDITION ON PERSON'S-MEDICAL-       |
|   CONDITIONS-ROSTER FLAGGED AS 'CREATED' DURING THE    |
|   CURRENT ROUND, CONTINUE WITH BOX_02                  |
---------------------------------------------------------


---------------------------------------------------------
|   OTHERWISE, GO TO BOX_07                              |
---------------------------------------------------------


---------------------------------------------------------
|   NOTE:  FOR THE PURPOSE OF HARD COPY SPECIFICATIONS,  |
|   CONDITIONS CAN ONLY BE FLAGGED AS 'CREATED' OR       |
|   'SELECTED' DURING A PARTICULAR ROUND.                |
---------------------------------------------------------
```

BOX_02
======

```
---------------------------------------------------------
|   IF 'PREGNANCY' ONLY CONDITION FLAGGED AS 'CREATED'   |
|   FOR THIS PERSON DURING THE CURRENT ROUND,            |
|   GO TO BOX_07                                         |
---------------------------------------------------------


---------------------------------------------------------
|   OTHERWISE, CONTINUE WITH CN01                        |
---------------------------------------------------------
```

CN01
====

{PERSON'S FIRST MIDDLE AND LAST NAME} {STR-DT}
{END-DT}

Now I would like to ask you some questions about the health
conditions we have listed for (PERSON).

PRESS ENTER TO CONTINUE.

CN02
====

{PERSON'S FIRST MIDDLE AND LAST NAME} {STR-DT}
{END-DT}

{Was the (CONDITION) due to an accident or injury?/INTERVIEWER: CHECK (CONDITION) AGAINST PRIORITY LIST JOB AID.}

IF OBVIOUS, CODE WITHOUT ASKING.
TO LEAVE, PRESS ESC.

                                         1 = YES   2 = NO

ROSTER. CONDITION	CN02_02. ACCIDENT/ INJURY?	CN02_03. ON LIST?
{PERSON'S CN MEDICAL CONDITION.}	( )	( )
{PERSON'S CN MEDICAL CONDITION.}	( )	( )
{PERSON'S CN MEDICAL CONDITION.}	( )	( )
{PERSON'S CN MEDICAL CONDITION.}	( )	( )

PRESS F1 FOR DEFINITION OF ACCIDENT/INJURY AND LIST OF PRIORITY CONDITIONS.

```
-------------------------------------------------
| ROSTER DEFINITION:  THIS ITEM DISPLAYS ALL MEDICAL|
| CONDITIONS IN THE PERSON'S-MEDICAL-CONDITIONS-    |
| ROSTER THAT MEET THE FOLLOWING CONDITION:         |
|                                                   |
| -  MEDICAL CONDITION IS FLAGGED AS 'CREATED' FOR  |
|    PERSON DURING THE CURRENT ROUND.               |
-------------------------------------------------
```

```
-------------------------------------------------------
| CN02 SCREEN BEHAVIOR AND FILL SPECIFICATIONS:       |
|                                                     |
| 1. DO NOT ALLOW CONDITIONS TO BE ADDED, EDITED, OR  |
|    DELETED.                                          |
| 2. ESC CANNOT BE USED ON THIS SCREEN UNTIL ALL      |
|    ANSWER FIELDS ARE ACCOUNTED FOR.  IF ESC IS      |
|    USED BEFORE ALL FIELDS ARE COMPLETED, DISPLAY    |
|    THE FOLLOWING MESSAGE: 'CANNOT LEAVE SCREEN      |
|    UNLESS ALL FIELDS COMPLETED.  CHECK FOR BLANK    |
|    FIELDS.  PRESS ENTER TO CONTINUE.'               |
| 3. THE CURSOR WILL MOVE FROM CN02_02 TO CN02_03     |
|    FOR THE SAME CONDITION AND THEN WILL MOVE TO     |
|    CN02_02 FOR THE NEXT CONDITION ON THE ROSTER,    |
|    ETC.  THE CURSOR MOVES IN THIS FASHION UNTIL     |
|    ALL FIELDS ARE COMPLETED.  IF 'PREGNANCY' IS     |
|    THE CONDITION, THE CURSOR SKIPS TO THE NEXT      |
|    CONDITION.  IF CONDITION WAS SELECTED AT DN02,   |
|    THUS CN02_02 IS ALREADY PRECODED, THE CURSOR     |
|    SKIPS TO CN02_03 FOR THAT CONDITION.             |
| 4. WHEN THE CURSOR IS IN COLUMN CN02_02 THE         |
|    FOLLOWING QUESTION SHOULD BE DISPLAYED: 'Was     |
|    the (CONDITION) due to an accident or injury?'.  |
|    WHEN THE CURSOR IS IN COLUMN CN02_03 THE         |
|    FOLLOWING TEXT SHOULD BE DISPLAYED:              |
|    'INTERVIEWER:  CHECK (CONDITION) AGAINST         |
|    PRIORITY LIST JOB AID.'                          |
-------------------------------------------------------


-------------------------------------------------------
| REFUSED ('-7') AND DON'T KNOW ('-8') DISALLOWED     |
| AT BOTH CN02_02 AND CN02_03.                        |
-------------------------------------------------------


-------------------------------------------------------
| NOTE:  CAPI WILL PRECODE PREGNANCY AS '2' (NO) IN   |
| BOTH CN02_02 AND CN02_03.  THESE PRECODED           |
| RESPONSES WILL ALREADY APPEAR AT CN02 BEFORE THE    |
| INTERVIEWER ENTERS ANY RESPONSES.                   |
|                                                     |
| CAPI WILL ALSO PRECODE ALL CONDITIONS SELECTED AT   |
| DN02 AS '1' (YES) IN CN02_02.  THIS PRECODED        |
| RESPONSE WILL ALREADY APPEAR AT CN02 BEFORE THE     |
| INTERVIEWER ENTERS ANY RESPONSES.                   |
-------------------------------------------------------


-------------------------------------------------------
| FLAG ALL CONDITIONS CODED '1' (YES) AT CN02_02      |
| AS 'DUE TO ACCIDENT/INJURY'.  FLAG ALL CONDITIONS   |
| CODED '1' (YES) AT CN02_03 AS 'ON PRIORITY LIST'.   |
-------------------------------------------------------
```

BOX_03
======

```
---------------------------------------------------
|   IF ANY CONDITIONS FLAGGED AS 'DUE TO ACCIDENT/  |
|   INJURY' OR FLAGGED AS 'ON PRIORITY LIST',       |
|   CONTINUE WITH LOOP_01                           |
---------------------------------------------------
```

```
---------------------------------------------------
|   OTHERWISE, GO TO BOX_07                         |
---------------------------------------------------
```

LOOP_01
=======

```
---------------------------------------------------
|   FOR EACH ELEMENT IN PERSON'S-MEDICAL-CONDITIONS-|
|   ROSTER, ASK BOX_04-END_LP01                     |
---------------------------------------------------
```

```
---------------------------------------------------
|   LOOP DEFINITION:  LOOP_01 COLLECTS INFORMATION  |
|   ABOUT MEDICAL CONDITIONS CREATED DURING THE     |
|   CURRENT ROUND THAT ARE DUE TO AN ACCIDENT OR    |
|   INJURY AND/OR ARE ON THE PRIORITY LIST.  THIS LOOP|
|   CYCLES ON MEDICAL CONDITIONS THAT MEET EITHER OR |
|   BOTH OF THE FOLLOWING CONDITIONS:               |
|                                                   |
|   -  MEDICAL CONDITION IS DUE TO AN ACCIDENT OR   |
|      INJURY (CN02_02 IS CODED '1' (YES))          |
|   -  MEDICAL CONDITION IS ON LIST OF PRIORITY     |
|      CONDITIONS (CN02_03 IS CODED '1' (YES))      |
|                                                   |
|   AND ALSO MEET THE FOLLOWING CONDITION:          |
|                                                   |
|   -  MEDICAL CONDITION IS FLAGGED AS 'CREATED'    |
|      DURING THE CURRENT ROUND                     |
---------------------------------------------------
```

BOX_04
======

```
--------------------------------------------------------
| CHECK CONDITION LINKS TO MEDICAL PROVIDER VISIT      |
| (MV) EVENTS, EMERGENCY ROOM (ER) EVENTS,             |
| OUTPATIENT DEPARTMENT (OP) EVENTS, HOSPITAL STAY     |
| (HS) EVENTS, AND DENTAL (DN) EVENTS TO DETERMINE     |
| WHETHER THE RU MEMBER HAS SEEN OR TALKED WITH A      |
| MEDICAL PERSON ABOUT THE CONDITION BETWEEN START     |
| DATE AND END DATE.                                   |
--------------------------------------------------------
```

```
--------------------------------------------------------
| NOTE:  CONDITION LINKS TO HOME HEALTH EVENTS WILL    |
| NOT BE CHECKED FOR HERE.  IN MANY HOME HEALTH        |
| EVENTS, THE SERVICES PROVIDED AND PROVIDER ARE NOT   |
| ALWAYS MEDICAL.  THERE IS NO CONTROL OR CHECKS       |
| DONE TO ASCERTAIN A STRAIGHT-FORWARD LINK TO A       |
| HOME HEALTH EVENT RELATED TO MEDICAL SERVICES OR A   |
| MEDICAL PROVIDER.  THUS ALL CONDITIONS **ONLY** LINKED|
| TO A HOME HEALTH EVENT WILL CONTINUE WITH CN03.      |
--------------------------------------------------------
```

```
--------------------------------------------------------
| IF CONDITION FLAGGED AS BOTH 'DUE TO ACCIDENT/       |
| INJURY' AND 'ON PRIORITY LIST' AND THERE IS AN       |
| EVENT-PROVIDER PAIR ASSOCIATED WITH THE CONDITION,   |
| AUTOMATICALLY CODE CN03 AS '1' (YES) BY CAPI AND     |
| GO TO CN06                                           |
--------------------------------------------------------
```

```
--------------------------------------------------------
| IF CONDITION FLAGGED ONLY AS 'DUE TO ACCIDENT/       |
| INJURY' AND THERE IS AN EVENT-PROVIDER PAIR          |
| ASSOCIATED WITH THE CONDITION, AUTOMATICALLY CODE    |
| CN03 AS '1' (YES) BY CAPI AND GO TO CN06             |
--------------------------------------------------------
```

```
--------------------------------------------------------
| IF CONDITION FLAGGED ONLY AS 'ON PRIORITY LIST'      |
| AND THERE IS AN EVENT-PROVIDER PAIR ASSOCIATED       |
| WITH THE CONDITION, AUTOMATICALLY CODE CN03 AS '1'   |
| (YES) BY CAPI AND GO TO CN05                         |
--------------------------------------------------------
```

```
--------------------------------------------------------
| OTHERWISE (I.E., NO EVENT-PROVIDER PAIR ASSOCIATED   |
| WITH THE CONDITION), CONTINUE WITH CN03              |
--------------------------------------------------------
```

CN03
====

{PERSON'S FIRST MIDDLE AND LAST NAME} {PERSON'S CN MEDICAL
CONDITION.} {STR-DT}
{END-DT}

Did (PERSON) ever see or talk to a doctor or other medical
person about the (CONDITION)?

```
YES .................................... 1
NO ..................................... 2
REF ................................... -7
DK .................................... -8
```

```
--------------------------------------------------
|  IF [CODED '2' (NO), '-7' (REFUSED), OR '-8' (DON'T|
|  KNOW) OR IF NOT ROUND 1 AND CN03 IS CODED '1'    |
|  (YES)] AND CONDITION FLAGGED AS BOTH 'DUE TO     |
|  ACCIDENT/INJURY' AND 'ON PRIORITY LIST',         |
|  GO TO CN06                                       |
--------------------------------------------------


--------------------------------------------------
|  IF [CODED '2' (NO), '-7' (REFUSED), OR '-8' (DON'T|
|  KNOW) OR IF NOT ROUND 1 AND CN03 IS CODED '1'    |
|  (YES)] AND CONDITION FLAGGED ONLY AS 'DUE TO     |
|  ACCIDENT/INJURY', GO TO CN06                     |
--------------------------------------------------


--------------------------------------------------
|  IF [CODED '2' (NO), '-7' (REFUSED), OR '-8' (DON'T|
|  KNOW) OR IF NOT ROUND 1 AND CN03 IS CODED '1'    |
|  (YES)] AND CONDITION FLAGGED ONLY AS 'ON PRIORITY |
|  LIST', GO TO CN05                                |
--------------------------------------------------


--------------------------------------------------
|  OTHERWISE (I.E., IF ROUND 1 AND CN03 IS CODED '1' |
|  (YES)), CONTINUE WITH CN04                       |
--------------------------------------------------


--------------------------------------------------
|  NOTE:  ROUND BASED CRITERIA IN SKIPS WERE NOT    |
|  ADDED UNTIL ROUND 4.                             |
--------------------------------------------------
```

CN04
====

{PERSON'S FIRST MIDDLE AND LAST NAME} {PERSON'S CN MEDICAL
CONDITION.} {STR-DT}
{END-DT}

Was the last time (PERSON) saw or talked with a doctor or
medical person about the (CONDITION) before or after
(START DATE)?

```
BEFORE START DATE ...................... 1
AFTER START DATE ....................... 2
REF .................................... -7
DK ..................................... -8
```

[Code One]

```
---------------------------------------------------
|  IF CONDITION FLAGGED AS BOTH 'DUE TO ACCIDENT/   |
|  INJURY' AND 'ON PRIORITY LIST', GO TO CN06       |
---------------------------------------------------


---------------------------------------------------
|  IF CONDITION FLAGGED ONLY AS 'DUE TO ACCIDENT/   |
|  INJURY', GO TO CN06                              |
---------------------------------------------------


---------------------------------------------------
|  IF CONDITION FLAGGED ONLY AS 'ON PRIORITY LIST', |
|  CONTINUE WITH CN05                               |
---------------------------------------------------


---------------------------------------------------
|  NOTE:  CN04 SHOULD ONLY BE ASKED IN ROUND 1.     |
|  HOWEVER, FOR PANEL 1, IT WAS ALSO ASKED IN ROUNDS |
|  2 AND 3, BUT NOT IN ROUNDS 4 AND 5.              |
---------------------------------------------------
```

CN05
====

          {PERSON'S FIRST MIDDLE AND LAST NAME} {PERSON'S CN MEDICAL
          CONDITION.} {STR-DT}
          {END-DT}

          When did (PERSON) first notice or find out that (PERSON) had
          (CONDITION)?

          {PROBE IF ANY EVENTS LISTED: The dates we have recorded for
          the medical care for (CONDITION) include (READ EVENT DATES
          BELOW).}

          TO SCROLL, USE ARROW KEYS.
          TO LEAVE BOX AND GO TO ENTRY FIELD, PRESS ESC.

CN05_01. PROVIDER	ROSTER. EVENT DATE	CN05_03. EVENT TYPE
1. Medical Provider-35	[Display Month Day Year-2]	[Display Event Code]
2. Medical Provider-35	[Display Month Day Year-2]	[Display Event Code]
3. Medical Provider-35	[Display Month Day Year-2]	[Display Event Code]

          [Enter Year-2] ....
          REF .... -7 {BOX_06}
          DK .... -8 {BOX_06}

          | ROSTER DEFINITION: THIS ITEM DISPLAYS EVENTS ON |
          | THE PERSON'S-MEDICAL-EVENTS-ROSTER THAT MEET THE |
          | FOLLOWING CONDITIONS: |
          | |
          | - EVENT IS LINKED TO THE CONDITION BEING ASKED |
          | ABOUT |
          | AND |
          | - EVENT OCCURRED DURING THE CURRENT ROUND |

```
---------------------------------------------------------
|  MATRIX BEHAVIOR SPECIFICATIONS:                      |
|                                                       |
|  1.  THE ROSTER DEFINED ABOVE WILL BE DISPLAYED       |
|      IN COLUMN 2.  THE ASSOCIATED MEDICAL PROVIDER    |
|      AND EVENT TYPE WILL BE DISPLAYED FOR EACH        |
|      EVENT IN COLUMN 1 (CN05_01) AND COLUMN 2         |
|      (CN05_03), RESPECTIVELY.                         |
|  2.  INFORMATION IN THE MATRIX IS FOR DISPLAY ONLY.|
---------------------------------------------------------
```

```
---------------------------------------------------------
|  IF THERE ARE NO EVENTS RELATED TO THE CONDITION    |
|  BEING ASKED ABOUT, DO NOT DISPLAY THE PROBE OR     |
|  EVENT GRID.                                        |
---------------------------------------------------------
```

```
---------------------------------------------------------
|  IF YEAR IS REFERENCE YEAR, CONTINUE WITH CN05OV1   |
---------------------------------------------------------
```

```
---------------------------------------------------------
|  IF YEAR IS REFERENCE YEAR MINUS 1, GO TO CN05OV2   |
---------------------------------------------------------
```

```
---------------------------------------------------------
|  OTHERWISE, GO TO BOX_06                            |
---------------------------------------------------------
```

CN05OV1
=======

        ENTER MONTH AND DAY:

            [Enter Month-2, Day-2] .... {BOX_06}
            REF .... -7 {BOX_06}
            DK .... -8 {BOX_06}

CN05OV2
=======

        ENTER MONTH:

            [Enter Month-2] .... {BOX_06}
            REF .... -7 {BOX_06}
            DK .... -8 {BOX_06}

```
-----------------------------------------------------
|  EDIT/RANGE CHECK:                                |
|                                                   |
|  ENTRIES FOR MONTH AND DAY FIELDS MUST CORRESPOND |
|  TO CALENDAR MONTHS AND DAYS.  THAT IS,           |
|  -  IF MONTH, ALLOWABLE VALUES = 01 - 12.         |
|  -  IF DAY:                                       |
|     -  ALLOWABLE VALUES = 01 - 31 IF MONTH CODED  |
|        '01', '03', '05', '07', '08', '10', '12';  |
|     -  ALLOWABLE VALUES = 01 - 30 IF MONTH CODED  |
|        '04', '06', '09', '11';                    |
|     -  ALLOWABLE VALUES = 01 - 29 IF MONTH CODED  |
|        '02' AND YEAR IS 1996 (LEAP YEAR);         |
|     -  ALLOWABLE VALUES = 01 - 28 IF MONTH CODED  |
|        '02' AND YEAR IS NOT 1996 (I.E., NOT LEAP  |
|        YEAR).                                      |
|                                                   |
|  MISSING VALUES = -7 AND -8 ALLOWED FOR MONTH AND |
|  DAY FIELDS.                                      |
-----------------------------------------------------


-----------------------------------------------------
|  EDIT: THE COMPLETE DATE CANNOT BE BEFORE THE     |
|  PERSON'S DATE OF BIRTH OR AFTER THE CURRENT      |
|  REFERENCE PERIOD END DATE FOR THIS PERSON.       |
-----------------------------------------------------
```

CN06
====

          {PERSON'S FIRST MIDDLE AND LAST NAME} {PERSON'S CN MEDICAL
          CONDITION.} {STR-DT}
          {END-DT}

          When did the accident or injury happen?

          {PROBE IF ANY EVENTS LISTED: The dates we have recorded for
          the medical care for (CONDITION) include (READ EVENT DATES
          BELOW).}

          TO SCROLL, USE ARROW KEYS.
          TO LEAVE BOX AND GO TO ENTRY FIELD, PRESS ESC.

CN06_01. PROVIDER	ROSTER. EVENT DATE	CN06_03. EVENT TYPE
1. Medical Provider-35	[Display Month Day Year-2]	[Display Event Code]
2. Medical Provider-35	[Display Month Day Year-2]	[Display Event Code]
3. Medical Provider-35	[Display Month Day Year-2]	[Display Event Code]

          [Enter Year-2] ....
          REF .... -7 {BOX_05}
          DK .... -8 {BOX_05}

          | ROSTER DEFINITION: THIS ITEM DISPLAYS EVENTS ON |
          | THE PERSON'S-MEDICAL-EVENTS-ROSTER THAT MEET THE |
          | FOLLOWING CONDITIONS: |
          | |
          | - EVENT IS LINKED TO THE CONDITION BEING ASKED |
          | ABOUT |
          | AND |
          | - EVENT OCCURRED DURING THE CURRENT ROUND |

          | **MATRIX BEHAVIOR SPECIFICATIONS:** |
          | |
          | SEE SPECIFICATIONS AT CN05. |

```
         -------------------------------------------------------
        |   IF THERE ARE NO EVENTS RELATED TO THE CONDITION    |
        |   BEING ASKED ABOUT, DO NOT DISPLAY THE PROBE OR     |
        |   EVENT GRID.                                        |
         -------------------------------------------------------


         -------------------------------------------------------
        |   IF YEAR IS REFERENCE YEAR, CONTINUE WITH CN06OV1   |
         -------------------------------------------------------


         -------------------------------------------------------
        |   IF YEAR IS REFERENCE YEAR MINUS 1, GO TO CN06OV2   |
         -------------------------------------------------------


         -------------------------------------------------------
        |   OTHERWISE, GO TO BOX_05                            |
         -------------------------------------------------------
```

CN06OV1
=======

        ENTER MONTH AND DAY:

            [Enter Month-2, Day-2] .... {BOX_05}
            REF .... -7 {BOX_05}
            DK .... -8 {BOX_05}

CN06OV2
=======

        ENTER MONTH:

            [Enter Month-2] ....
            REF .... -7
            DK .... -8

```
-------------------------------------------------------
| EDIT/RANGE CHECK:                                   |
|                                                     |
| ENTRIES FOR MONTH AND DAY FIELDS MUST CORRESPOND    |
| TO CALENDAR MONTHS AND DAYS.  THAT IS,              |
| -  IF MONTH, ALLOWABLE VALUES = 01 - 12.            |
| -  IF DAY:                                          |
|    -  ALLOWABLE VALUES = 01 - 31 IF MONTH CODED     |
|       '01', '03', '05', '07', '08', '10', '12';     |
|    -  ALLOWABLE VALUES = 01 - 30 IF MONTH CODED     |
|       '04', '06', '09', '11';                       |
|    -  ALLOWABLE VALUES = 01 - 29 IF MONTH CODED     |
|       '02' AND YEAR IS 1996 (LEAP YEAR);            |
|    -  ALLOWABLE VALUES = 01 - 28 IF MONTH CODED     |
|       '02' AND YEAR IS NOT 1996 (I.E., NOT LEAP     |
|       YEAR).                                        |
|                                                     |
| MISSING VALUES = -7 AND -8 ALLOWED FOR MONTH AND    |
| DAY FIELDS.                                         |
-------------------------------------------------------
```

```
-------------------------------------------------------
| EDIT: THE COMPLETE DATE CANNOT BE BEFORE THE        |
| PERSON'S DATE OF BIRTH OR AFTER THE CURRENT         |
| REFERENCE PERIOD END DATE FOR THIS PERSON.          |
-------------------------------------------------------
```

BOX_05
======

```
-------------------------------------------------------
| IF PERSON IS = OR > 16 YEARS OF AGE OR IN AGE       |
| CATEGORIES 4-9, CONTINUE WITH CN07                  |
-------------------------------------------------------
```

```
-------------------------------------------------------
| OTHERWISE, GO TO CN08                               |
-------------------------------------------------------
```

CN07
====

{PERSON'S FIRST MIDDLE AND LAST NAME} {PERSON'S CN MEDICAL
CONDITION.} {STR-DT}
{END-DT}

Did the accident or injury happen while (PERSON) (were/was) at
work?

         YES 1
         NO 2
         DOES NOT WORK 3
         REF .... -7
         DK .... -8

                      [Code One]

CN08
====

{PERSON'S FIRST MIDDLE AND LAST NAME} {PERSON'S CN MEDICAL
CONDITION.} {STR-DT}
{END-DT}

Where did the accident or injury happen?

LISTEN TO RESPONSE AND SELECT OPTION FROM CODE LIST.
VERIFY SELECTION WITH RESPONDENT.

         AT HOME (OWN OR SOMEONE ELSE'S) 1
         ON PUBLIC STREET, ROAD, HIGHWAY,
         SIDEWALK .... 2 {CN10}
         ON FARM (OWN OR SOMEONE ELSE'S) .... 3 {CN10}
         SCHOOL (IN BUILDING, ON GROUNDS,
         INCLUDING PLAYING FIELDS) .... 4 {CN10}
         STORE OR RESTAURANT (INCLUDING MALLS) .. 5 {CN10}
         OFFICE (ANY PART OF BUILDING) .... 6 {CN10}
         FACTORY, INDUSTRY SITE .... 7 {CN10}
         MILITARY FACILITY .... 8 {CN10}
         RECREATIONAL PLACE OR FACILITY .... 9 {CN10}
         OTHER .... 91 {CN10}
         REF .... -7 {CN10}
         DK .... -8 {CN10}

                      [Code One]

         PRESS F1 FOR DEFINITION OF ANSWER CATEGORIES.

CN09
====

{PERSON'S FIRST MIDDLE AND LAST NAME} {PERSON'S CN MEDICAL
CONDITION.} {STR-DT}
{END-DT}

Was it inside or outside the house?

        INSIDE 1
        OUTSIDE 2
        REF .... -7
        DK .... -8

                    [Code One]

CN10
====

{PERSON'S FIRST MIDDLE AND LAST NAME} {PERSON'S CN MEDICAL
CONDITION.} {STR-DT}
{END-DT}

SHOW CARD CN-1.

Did the accident or injury involve any of the things listed on
this card?

CODE ALL THAT APPLY.

        MOTOR VEHICLE 1
        GUN 2
        WEAPON OTHER THAN GUN 3
        POISON OR SOMETHING THAT CAN POISON
        (LIKE GASOLINE OR A CLEANING FLUID OR
        CHEMICAL) 4
        FIRE OR SOMETHING HOT THAT WOULD
        CAUSE A BURN 5
        DROWNING OR NEAR-DROWNING 6
        SPORTS INJURY 7
        FALL (EXCLUDE FALLS RELATED TO SPORTS) . 8
        SOMETHING ELSE/NOTHING 95
        REF .... -7
        DK .... -8

                [Code All That Apply]

        PRESS F1 FOR DEFINITIONS OF ANSWER CATEGORIES.

BOX_06
======

```
-----------------------------------------------------
|   IF CONDITION FLAGGED AS BOTH 'DUE TO ACCIDENT/    |
|   INJURY' AND 'ON PRIORITY LIST' AND CN03 IS CODED  |
|   '2' (NO-PERSON HAS NEVER SEEN A DOCTOR OR OTHER   |
|   MEDICAL PERSON ABOUT THE CONDITION), '-7'         |
|   (REFUSED), OR '-8' (DON'T KNOW), GO TO CN12       |
-----------------------------------------------------


-----------------------------------------------------
|   IF CONDITION FLAGGED ONLY AS 'DUE TO ACCIDENT/    |
|   INJURY' AND CN03 IS CODED '2' (NO-PERSON HAS NEVER|
|   SEEN A DOCTOR OR OTHER MEDICAL PERSON ABOUT THE   |
|   CONDITION), '-7' (REFUSED), OR '-8' (DON'T KNOW)  |
|   GO TO CN12                                        |
-----------------------------------------------------


-----------------------------------------------------
|   IF CONDITION FLAGGED ONLY AS 'ON PRIORITY LIST'   |
|   AND CN03 IS CODED '2' (NO-PERSON HAS NEVER SEEN A |
|   DOCTOR OR OTHER MEDICAL PERSON ABOUT THE          |
|   CONDITION), '-7' (REFUSED), OR '-8' (DON'T KNOW)  |
|   GO TO CN13                                        |
-----------------------------------------------------


-----------------------------------------------------
|   OTHERWISE, CONTINUE WITH CN11                     |
-----------------------------------------------------
```

CN11
====

{PERSON'S FIRST MIDDLE AND LAST NAME} {PERSON'S CN MEDICAL
CONDITION.} {STR-DT}
{END-DT}

{(Are/Is)/Was} (PERSON) still being treated for (CONDITION) {at
(END DATE)}? That is, {(are/is)/was} (PERSON) still receiving
care or taking medicine for (CONDITION)?

```
        YES .................................... 1 {CN13}
        NO ...................................... 2
        REF .................................... -7
        DK ..................................... -8
```

          PRESS F1 FOR DEFINITION OF STILL BEING TREATED.

          | DISPLAY '(Are/Is)' AND '(are/is)' IF PERSON BEING |
          | ASKED ABOUT IS CURRENTLY IN THE RU. DISPLAY 'Was',|
          | 'was' AND 'at (END DATE)' IF PERSON BEING ASKED |
          | ABOUT IS NO LONGER IN THE RU OR CURRENT ROUND IS |
          | ROUND 5. |

          | IF CODED '2' (NO), '-7' (REFUSED), OR '-8' (DON'T |
          | KNOW) AND CONDITION IS FLAGGED ONLY AS 'ON |
          | PRIORITY LIST', GO TO CN13 |

          | OTHERWISE, CONTINUE WITH CN12 |

CN12
====

{PERSON'S FIRST MIDDLE AND LAST NAME} {PERSON'S CN MEDICAL
CONDITION.} {STR-DT}
{END-DT}

ASK IF APPROPRIATE. IF INAPPROPRIATE TO ASK, CODE '3' TO SHOW
THAT THE CONDITION IS PERSISTENT OR PERMANENT.

{(Have/Has)/Had} (PERSON) fully recovered from (CONDITION), or
{(do/does)/did} (PERSON) still have it?

```
FULLY RECOVERED ........................ 1
STILL HAVE IT .......................... 2
DID NOT ASK: STILL HAS (CONDITION IS
PERSISTENT/PERMANENT) .................. 3
REF ................................... -7
DK .................................... -8
```

[Code One]

PRESS F1 FOR DEFINITION OF RECOVERED.

```
-------------------------------------------------
|  DISPLAY '(Have/Has)' AND '(do/does)' IF PERSON    |
|  BEING ASKED ABOUT IS CURRENTLY IN THE RU.  DISPLAY|
|  'Had' AND 'did' IF PERSON BEING ASKED ABOUT IS NO |
|  LONGER IN THE RU OR CURRENT ROUND IS ROUND 5.     |
-------------------------------------------------
```

CN13
====

{PERSON'S FIRST MIDDLE AND LAST NAME} {PERSON'S CN MEDICAL
CONDITION.} {STR-DT}
{END-DT}

How seriously did the (CONDITION) affect (PERSON)'s overall
health and well-being {since/between} {(START DATE){and (END
DATE)}/that accident or injury}? Would you say it affected
(PERSON)'s health ...

        very seriously, ... 1
        somewhat seriously, ... 2
        not very seriously, or 3
        not at all? 4
        REF .... -7
        DK .... -8

                    [Code One]

    | DISPLAY 'since' IF NOT ROUND 5. DISPLAY 'between'|
    | IF ROUND 5. |
    | |
    | DISPLAY '(START DATE){and (END DATE)}' IF NOT |
    | ACCIDENT OR INJURY. DISPLAY 'that accident or |
    | injury' IF ACCIDENT OR INJURY (CN02_02 CODED '1' |
    | (YES) FOR CONDITION). |
    | |
    | DISPLAY 'and (END DATE)' IF ROUND 5. OTHERWISE, |
    | USE A NULL DISPLAY. |

CN13OV
======

                INTERVIEWER: WHO ANSWERED THIS QUESTION?

                        (PERSON) 1
                        SOMEONE ELSE 2

                                [Code One]

                | FLAG RESPONSE TO CN13 AS SELF-REPORT IF CN13OV IS |
                | CODED '1' ((PERSON)) AND AS PROXY REPORT IF CN13OV|
                | IS CODED '2' (SOMEONE ELSE). |

                | IF CN03 IS CODED '1' (YES) AND CN04 IS CODED '1' |
                | (BEFORE START DATE) (THAT IS, PERSON HAS SEEN A |
                | DOCTOR OR MEDICAL PERSON BUT NOT SINCE START DATE)|
                | OR IF CN03 IS CODED '2' (NO), '-7' (REFUSED), OR |
                | '-8' (DON'T KNOW), GO TO END_LP01 |

                | OTHERWISE, CONTINUE WITH CN14 |

CN14
====

                {PERSON'S FIRST MIDDLE AND LAST NAME} {PERSON'S CN MEDICAL
                CONDITION.} {STR-DT}
                {END-DT}

                Earlier you told me about the health care (PERSON) received
                for the (CONDITION). Did the health care provider recommend
                further treatment or consultation?

                        YES 1
                        NO .... 2 {END_LP01}
                        REF .... -7 {END_LP01}
                        DK .... -8 {END_LP01}

                 PRESS F1 FOR DEFINITION OF FURTHER TREATMENT/CONSULTATION.

CN15
====

{PERSON'S FIRST MIDDLE AND LAST NAME} {PERSON'S CN MEDICAL
CONDITION.} {STR-DT}
{END-DT}

{How/As of December 31, 1997, how} much of the follow-up care
did (PERSON) receive for (CONDITION)? Did (PERSON) receive all
of the follow-up care, some of it, none of it, or is (PERSON)
still being treated?

         ALL FOLLOW-UP CARE RECEIVED 1
         SOME FOLLOW-UP CARE RECEIVED 2
         NO FOLLOW-UP CARE RECEIVED 3
         STILL BEING TREATED 4
         REF .... -7
         DK .... -8

                      [Code One]

     PRESS F1 FOR DEFINITIONS OF FOLLOW-UP CARE AND ANSWER CATEGORIES.

         | DISPLAY 'How' IF NOT ROUND 5. DISPLAY 'As of |
         | December 31, 1997, how' IF ROUND 5. |

END_LP01
========

         | CYCLE ON NEXT CONDITION IN PERSON'S-MEDICAL- |
         | CONDITIONS-ROSTER THAT MEETS THE CONDITIONS STATED|
         | IN THE LOOP DEFINITION. |

         | IF NO OTHER CONDITIONS MEET THE STATED CONDITIONS,|
         | END LOOP_01 AND CONTINUE WITH BOX_07 |

BOX_07
======

```
---------------------------------------------------
|   IF AT LEAST ONE CONDITION ON PERSON'S-MEDICAL-   |
| CONDITIONS-ROSTER FLAGGED AS 'SELECTED' DURING THE|
| CURRENT ROUND, CONTINUE WITH BOX_08               |
---------------------------------------------------


---------------------------------------------------
|   NOTE:  'SELECTED' HERE REFERS TO CONDITIONS PICKED|
| DURING A ROUND AFTER THE ROUND IN WHICH THEY WERE |
| CREATED.                                          |
---------------------------------------------------


---------------------------------------------------
| OTHERWISE, GO TO BOX_09                           |
---------------------------------------------------
```

BOX_08
======

```
---------------------------------------------------
| CHECK CONDITIONS FLAGGED AS 'SELECTED' DURING THE |
| CURRENT ROUND.  IF AT LEAST ONE CONDITION FLAGGED |
| AS 'SELECTED' AND FLAGGED AS 'ON PRIORITY LIST',  |
| CONTINUE WITH LOOP_02                             |
---------------------------------------------------

---------------------------------------------------
| OTHERWISE, GO TO BOX_09                           |
---------------------------------------------------
```

LOOP_02
=======

```
--------------------------------------------------------
|  FOR EACH ELEMENT IN PERSON'S-MEDICAL-CONDITIONS-    |
|  ROSTER, ASK CN16-END_LP02                           |
--------------------------------------------------------


--------------------------------------------------------
|  LOOP DEFINITION:  LOOP_02 COLLECTS 'FOLLOW-UP'      |
|  INFORMATION ABOUT MEDICAL CONDITIONS THAT WERE NOT  |
|  CREATED BUT WERE SELECTED DURING THE CURRENT ROUND, |
|  AND WERE FLAGGED AS 'ON PRIORITY LIST' DURING A     |
|  PREVIOUS ROUND.  THIS LOOP CYCLES ON MEDICAL        |
|  CONDITIONS THAT MEET THE FOLLOWING CONDITIONS:      |
|                                                      |
|  -  MEDICAL CONDITION IS FLAGGED AS 'SELECTED'       |
|     DURING THE CURRENT ROUND (NOTE THAT CONDITIONS   |
|     'CREATED' DURING THE CURRENT ROUND ARE EXCLUDED  |
|     FROM THIS LOOP BUT ARE ASKED ABOUT IN LOOP_01)   |
|  AND                                                 |
|  -  MEDICAL CONDITION WAS FLAGGED AS 'ON PRIORITY    |
|     LIST' (CN02_03 CODED '1' (YES)) DURING A         |
|     PREVIOUS ROUND                                   |
--------------------------------------------------------
```

CN16
====

{PERSON'S FIRST MIDDLE AND LAST NAME} {PERSON'S CN MEDICAL
CONDITION.} {STR-DT}
{END-DT}

Today, (PERSON)'s (CONDITION) was mentioned. We talked about
this condition {another/last} time I was here. I'd just like
to ask a few questions about it.

PRESS ENTER TO CONTINUE.

```
-----------------------------------------------------
|  DISPLAY 'another' IF CONDITION CREATED ANY ROUND  |
|  PRIOR TO PREVIOUS ROUND.  DISPLAY 'last' IF       |
|  CONDITION CREATED PREVIOUS ROUND.                 |
-----------------------------------------------------


-----------------------------------------------------
|  CHECK CONDITION LINKS TO MEDICAL PROVIDER VISIT   |
|  (MV) EVENTS, EMERGENCY ROOM (ER) EVENTS,          |
|  OUTPATIENT DEPARTMENT (OP) EVENTS, HOSPITAL STAY  |
|  (HS) EVENTS, AND DENTAL (DN) EVENTS TO DETERMINE  |
|  WHETHER THE RU MEMBER HAS SEEN OR TALKED WITH A   |
|  MEDICAL PERSON ABOUT THE CONDITION BETWEEN CURRENT|
|  START DATE AND END DATE.                          |
-----------------------------------------------------


-----------------------------------------------------
|  NOTE:  CONDITION LINKS TO HOME HEALTH EVENTS WILL |
|  NOT BE CHECKED FOR HERE.  IN MANY HOME HEALTH     |
|  EVENTS, THE SERVICES PROVIDED AND PROVIDER ARE NOT|
|  ALWAYS MEDICAL.  THERE IS NO CONTROL OR CHECKS    |
|  DONE TO ASCERTAIN A STRAIGHT-FORWARD LINK TO A    |
|  HOME HEALTH EVENT RELATED TO MEDICAL SERVICES OR A|
|  MEDICAL PROVIDER.  THUS ALL CONDITIONS ONLY LINKED|
|  TO A HOME HEALTH EVENT WILL CONTINUE WITH CN17.   |
-----------------------------------------------------


-----------------------------------------------------
|  IF THERE IS AN EVENT-PROVIDER PAIR FROM THE       |
|  CURRENT ROUND ASSOCIATED WITH THE CONDITION,      |
|  AUTOMATICALLY CODE CN17 AS '1' (YES) BY CAPI AND  |
|  GO TO CN18                                        |
-----------------------------------------------------


-----------------------------------------------------
|  OTHERWISE (I.E., NO EVENT-PROVIDER PAIR FROM THE  |
|  CURRENT ROUND ASSOCIATED WITH THE CONDITION),     |
|  CONTINUE WITH CN17                                |
-----------------------------------------------------
```

24-24

CN17
====

{PERSON'S FIRST MIDDLE AND LAST NAME} {PERSON'S CN MEDICAL
CONDITION.} {STR-DT}
{END-DT}

{Since (START DATE)/Between (START DATE) and (END DATE)},
(have/has) (PERSON) seen or talked with a doctor or other
medical person about the (CONDITION)?

```
     YES .................................... 1
     NO ..................................... 2
     REF ................................... -7
     DK .................................... -8
```

```
    -------------------------------------------------------
    |  DISPLAY 'Since (START DATE)' IF NOT ROUND 5.       |
    |  DISPLAY 'Between (START DATE) and (END DATE)' IF   |
    |  ROUND 5.                                           |
    -------------------------------------------------------
```

```
    -------------------------------------------------------
    |  IF CODED '2' (NO), '-7' (REFUSED), OR '-8' (DON'T  |
    |  KNOW), AND CN03 WAS CODED '2' (NO), '-7'           |
    |  (REFUSED), OR '-8' (DON'T KNOW) FOR THIS CONDITION |
    |  DURING THE ROUND IN WHICH THE CONDITION WAS        |
    |  CREATED, GO TO CN19                                |
    -------------------------------------------------------
```

```
    -------------------------------------------------------
    |  OTHERWISE, CONTINUE WITH CN18                      |
    -------------------------------------------------------
```

CN18
====

{PERSON'S FIRST MIDDLE AND LAST NAME} {PERSON'S CN MEDICAL
CONDITION.} {STR-DT}
{END-DT}

{(Are/Is)/Was} (PERSON) still being treated for (CONDITION) {at
(END DATE)}? That is, {(are/is)/was} (PERSON) still receiving
care or taking medicine for (CONDITION)?

```
        YES ................................... 1
        NO .................................... 2
        REF .................................. -7
        DK ................................... -8
```

          PRESS F1 FOR DEFINITION OF STILL BEING TREATED.

        | DISPLAY '(Are/Is)' AND '(are/is)' IF PERSON BEING |
        | ASKED ABOUT IS CURRENTLY IN THE RU. DISPLAY 'Was',|
        | 'was', AND 'at (END DATE)' IF PERSON BEING ASKED |
        | ABOUT IS NO LONGER IN THE RU OR CURRENT ROUND IS |
        | ROUND 5. |

CN19
====

{PERSON'S FIRST MIDDLE AND LAST NAME} {PERSON'S CN MEDICAL
CONDITION.} {STR-DT}
{END-DT}

How seriously did the (CONDITION) affect (PERSON)'s overall
health and well-being {since (START DATE)/between (START DATE)
and (END DATE)}? Would you say it affected (PERSON)'s health ...

```
very seriously, ....................... 1
somewhat seriously, ................... 2
not very seriously, ................... 3
or not at all? ........................ 4
REF ................................... -7
DK .................................... -8
```

                    [Code One]

         | DISPLAY 'since (START DATE)' IF NOT ROUND 5. |
         | DISPLAY 'between (START DATE) and (END DATE)' IF |
         | ROUND 5. |

CN19OV
======

INTERVIEWER: WHO ANSWERED THIS QUESTION?

```
(PERSON) .............................. 1
SOMEONE ELSE .......................... 2
```

                    [Code One]

         | FLAG RESPONSE TO CN19 AS SELF-REPORT IF CN19OV IS |
         | CODED '1' ((PERSON)) AND AS PROXY REPORT IF CN19OV|
         | IS CODED '2' (SOMEONE ELSE). |

END_LP02
========

```
--------------------------------------------------------
| CYCLE ON NEXT CONDITION IN PERSON'S-MEDICAL-          |
| CONDITIONS-ROSTER THAT MEETS THE CONDITIONS STATED|
| IN THE LOOP DEFINITION                               |
--------------------------------------------------------
```

```
--------------------------------------------------------
| IF NO OTHER CONDITIONS MEET THE STATED CONDITIONS,|
| END LOOP_02 AND CONTINUE WITH BOX_09                 |
--------------------------------------------------------
```

BOX_09
======

```
--------------------------------------------------------
| IF ROUND 5, CONTINUE WITH BOX_10                     |
--------------------------------------------------------
```

```
--------------------------------------------------------
| OTHERWISE, GO TO BOX_12                              |
--------------------------------------------------------
```

BOX_10
======

```
--------------------------------------------------------
| IF PERSON IS 18 YEARS OF AGE OR OLDER (OR AGE        |
| CATEGORIES 4-9), CONTINUE WITH BOX_11                |
--------------------------------------------------------
```

```
--------------------------------------------------------
| OTHERWISE, GO TO BOX_12                              |
--------------------------------------------------------
```

BOX_11
======

```
     -------------------------------------------------
    |  IF AT LEAST ONE CONDITION ON PERSON'S-MEDICAL-  |
    |  CONDITIONS-ROSTER, CONTINUE WITH CN20           |
     -------------------------------------------------


     -------------------------------------------------
    |  OTHERWISE, GO TO BOX_12                          |
     -------------------------------------------------
```

CN20
====

{PERSON'S FIRST MIDDLE AND LAST NAME} {STR-DT}
{END-DT}

Are any of the health conditions, accidents, and injuries we have
listed for (PERSON) [(READ CONDITION NAMES BELOW, IF NECESSARY)]
related to service in the Armed Forces of the United States?

   CODE '3' IF RESPONDENT VOLUNTEERS NEVER IN ARMED FORCES.

TO SCROLL, USE ARROW KEYS.
TO LEAVE BOX AND GO TO ENTRY FIELD, PRESS ESC.

   [1. Medical Condition]
   [2. Medical Condition]
   [3. Medical Condition]

```
     YES .................................... 1
     NO ..................................... 2 {BOX_12}
     NEVER IN ARMED FORCES .................. 3 {BOX_12}
     REF ................................... -7 {BOX_12}
     DK .................................... -8 {BOX_12}
```

                        [Code One]

```
     -------------------------------------------------
    |  ROSTER DEFINITION:  THIS ITEM DISPLAYS PERSON'S- |
    |  MEDICAL-CONDITIONS-ROSTER.                       |
     -------------------------------------------------
```

CN21
====

{PERSON'S FIRST MIDDLE AND LAST NAME} {STR-DT}
{END-DT}

Which of the health conditions, accidents, and injuries we have
listed for (PERSON) are related to service in the Armed Forces
of the United States?

PROBE: Any other health conditions related to service in the
Armed Forces?

TO TURN CHECK MARK ON/OFF, USE ARROW KEYS, PRESS ENTER.
TO LEAVE, PRESS ESC.

```
                        [1. Medical Condition] .................
                        [2. Medical Condition] .................
                        [3. Medical Condition] .................
```

```
        -------------------------------------------------------
        |   ROSTER DEFINITION:  THIS ITEM DISPLAYS PERSON'S-  |
        |   MEDICAL-CONDITIONS-ROSTER.                        |
        -------------------------------------------------------
```

```
        -------------------------------------------------------
        |   ROSTER BEHAVIOR SPECIFICATIONS:                   |
        |                                                     |
        |   1. AT LEAST ONE CONDITION SHOULD BE SELECTED.     |
        |   2. CONDITIONS MAY NOT BE ADDED OR DELETED.        |
        |   3. SELECTION OF CONDITIONS AT THIS QUESTION SHOULD|
        |      NOT FLAG THE CONDITION AS 'SELECTED' OR        |
        |      'CREATED' FOR THIS ROUND.                      |
        -------------------------------------------------------
```

BOX_12
======

```
        -------------------------------------------------------
        |   GO TO NEXT QUESTIONNAIRE SECTION                  |
        -------------------------------------------------------
```