
Vital and Health Statistics

Plan and Operation of the NHANES I Epidemiologic Followup Study, 1986

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No. 25

This report describes the plan and operation for the 1986 data collection wave of the Epidemiologic Followup to the first National Health and Nutrition Examination Survey (NHANES I). Tracing and data collection were conducted on 3,980 persons 55–74 years of age at NHANES I who were not known to be deceased in the 1982–84 data collection wave of the NHANES I Epidemiologic Followup Study.

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- National Institute of Mental Health
- National Institute of Diabetes and Digestive and Kidney Diseases
- National Institute of Arthritis and Musculoskeletal and Skin Diseases
- National Institute of Allergy and Infectious Diseases
- National Institute of Neurological and Communicative Disorders and Stroke
- Centers for Disease Control
- U.S. Department of Agriculture

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Symbols

- - - Data not available
 - . . . Category not applicable
 - Quantity zero
 - 0.0 Quantity more than zero but less than 0.05
 - Z Quantity more than zero but less than 500 where numbers are rounded to thousands
 - * Figure does not meet standard of reliability or precision
 - # Figure suppressed to comply with confidentiality requirements
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Plan and Operation of the NHANES I Epidemiologic Followup Study, 1986

by Fanchon F. Finucane, M.H.S., Virginia M. Freid, M.S., Jennifer H. Madans, Ph.D., Christine S. Cox, M.A., Joel C. Kleinman, Ph.D., Sandra T. Rothwell, M.P.H., Helen E. Barbano, M.S.P.H., Jacob J. Feldman, Ph.D., Office of Analysis and Epidemiology

Background

The NHANES I Epidemiologic Followup Study (NHEFS) is a longitudinal study that uses as its baseline those adult persons 25–74 years of age who were examined in the first National Health and Nutrition Examination Survey (NHANES I) (1–3). As shown in figure 1, NHEFS comprises a series of followup surveys, three of which have been conducted. The first wave of data collection, the 1982–84 NHEFS, included all persons who were 25–74 years of age at their NHANES I examination ($n = 14,407$). This series report focuses on the tracing and data collection of the second wave, the 1986 Followup. This second data collection wave was conducted for the members of the cohort who were 55–74 years at their baseline examination and not known to be deceased at the 1982–84 NHEFS ($n = 3,980$). The third wave of data collection took place in 1987. An attempt was made to recontact the entire nondeceased NHEFS cohort ($n = 11,750$) at that time. A plan to recontact the entire nondeceased NHEFS cohort in 1991 is currently under review.

NHANES I collected data from a national probability sample of the U.S. civilian non-institutionalized population

1–74 years of age (1–3). The survey, which included a standardized medical examination and questionnaires that covered various health-related topics, took place from 1971 through 1974 and was augmented by an additional national sample in 1974–75. NHANES I included 20,729 adult persons 25–74 years of age, of whom 14,407 (70 percent) completed a medical examination.

Although NHANES I provided a wealth of information on the prevalence of health conditions and risk factors, the cross-sectional nature of the original survey limits its usefulness for studying the effects of clinical, environmental, and behavioral factors and in tracing the natural history of disease. Therefore, NHEFS was designed to investigate the association between factors measured at baseline and the development of specific health conditions. Specifically, the three major objectives of NHEFS are to study the following:

- Morbidity and mortality associated with suspected risk factors
- Changes over time in participants' characteristics, such as blood pressure and weight

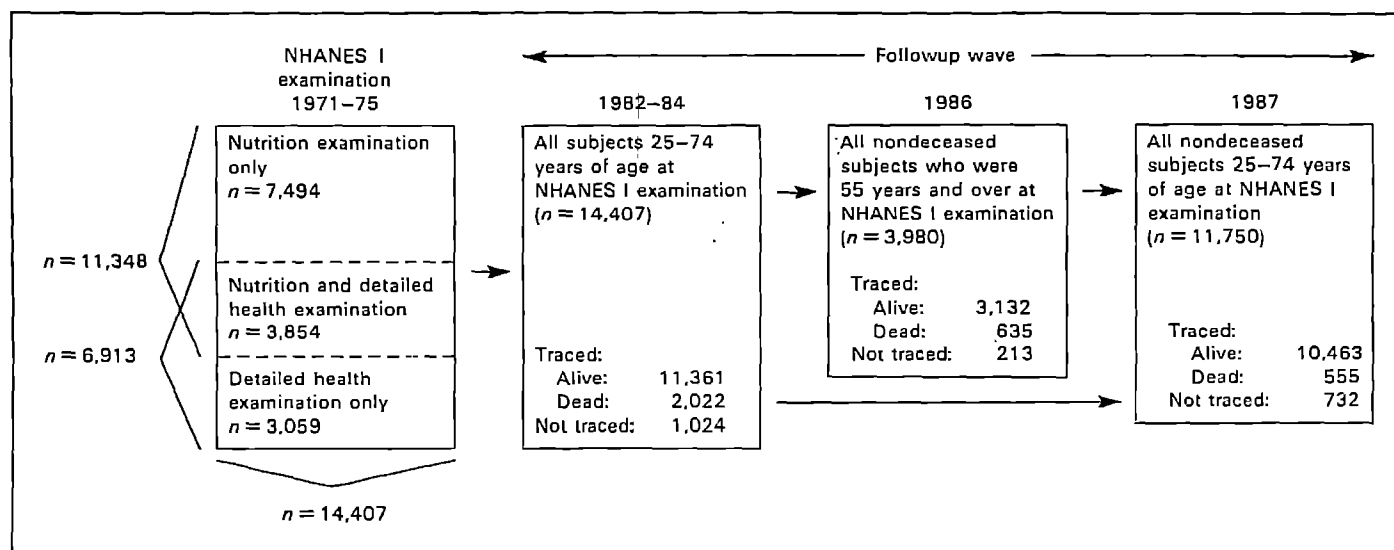


Figure 1. Followups of the NHANES I Epidemiologic Followup Study cohort: 14,407 subjects 25–74 years of age at NHANES I

- The natural history of chronic disease and functional impairments

While NHANES I obtained information gathered from physical exams, laboratory tests, and interviews, NHEFS is primarily a series of interview surveys that rely on self-reporting of medical conditions. Attempts were made, however, to supplement the followup interview information in the NHEFS with health care facility medical records and death certificates.

NHEFS originated as a joint project between the National Center for Health Statistics and the National Institute on Aging. It has been funded primarily by the National Institute on Aging, with additional financial support from the following components of the National Institutes of Health and other Public Health Service agencies: the National Cancer Institute; the National Institute of Child Health and Human Development; the National Heart, Lung, and Blood Institute; the National Institute on Alcohol Abuse and Alcoholism; the National Institute of Mental Health; the National Institute of Diabetes and Digestive and Kidney Diseases; the National Institute of Arthritis and Musculoskeletal and Skin Diseases; the National Institute of Allergy and Infectious Diseases; and the National Institute of Neurological and Communicative Disorders and Stroke. All of these agencies were involved in both developing topics important to their specialty areas and designing procedures to collect data that would address these issues.

This series report is devoted to the plan and operation of the 1986 Followup, which collected information on changes in health and functional status since the study's last contact with the older members of the NHEFS cohort. It was restricted to those subjects (individuals examined in NHANES I) who were at least 55 years of age at their NHANES I examination ($n = 5,677$). They represent almost 40 percent of the entire NHEFS cohort. As shown in figure 2, this portion of the NHEFS cohort included 1,697 subjects who were deceased at the time of the 1982-84 NHEFS* and 3,980 subjects who were not known to be deceased at the time of the 1982-84 NHEFS. Tracing and data collection in the 1986 Followup were undertaken only for the 3,980 subjects in the latter group, regardless of their tracing or interview status in 1982-84. Hereinafter, they will be referred to as the "1986 Followup cohort." The remaining 1,697 subjects who were deceased at the time of the 1982-84 NHEFS were excluded from additional data collection in the 1986 NHEFS and were not included as part of the 1986 Followup cohort. For analytic purposes, though, information collected for this group in the 1982-84 NHEFS may be used in conjunction with the information collected in the 1982-84 NHEFS and 1986 NHEFS on subjects who were part of the 1986 Followup cohort.

*Throughout this report, the term "1982-84 NHEFS" is synonymous with "1982-84 Followup," and the term "1986 NHEFS" is synonymous with "1986 Followup."

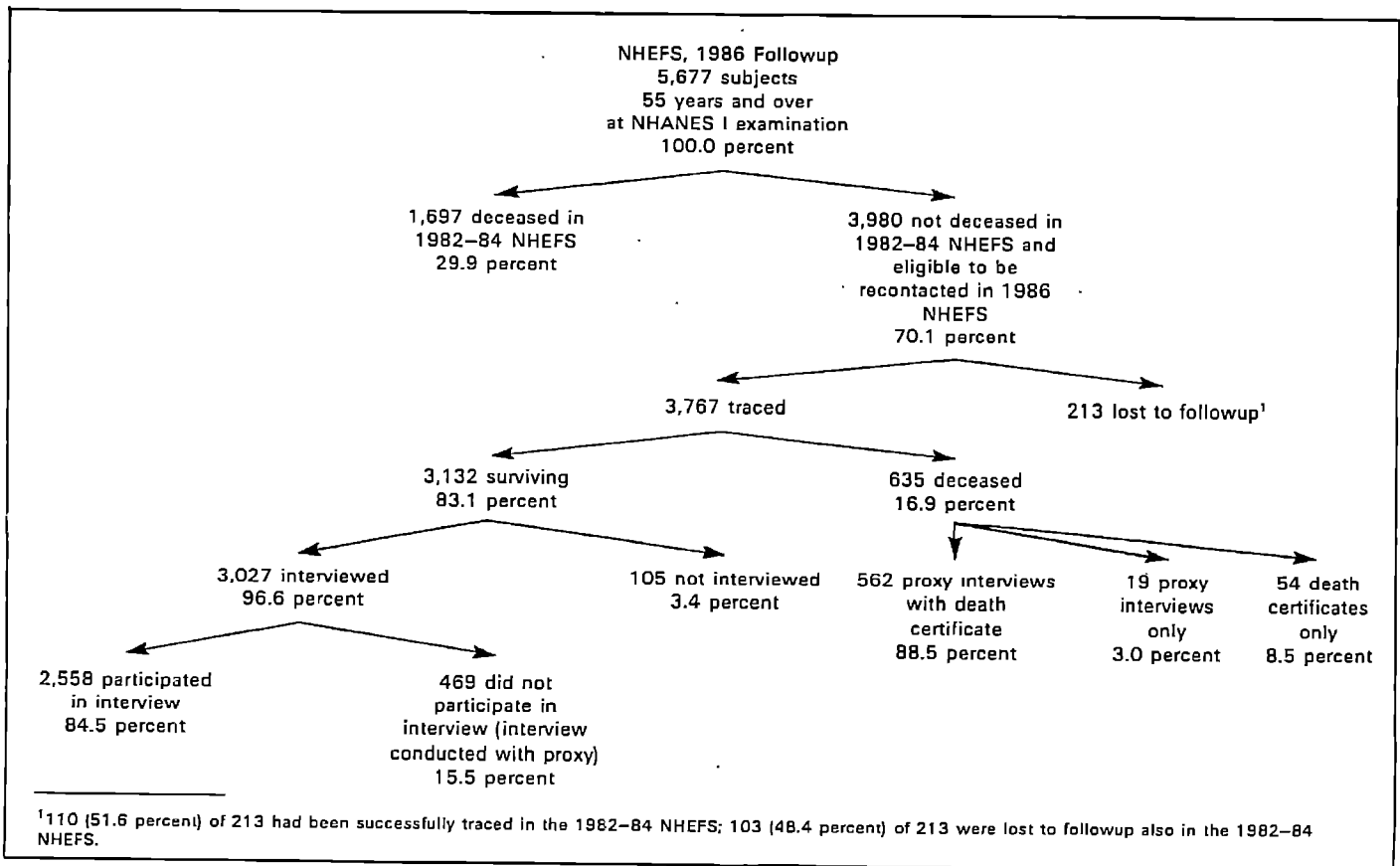


Figure 2. Summary of data collection in the NHANES I Epidemiologic Followup Study (NHEFS), 1986

Tracing of subjects in the 1986 Followup began in late 1984. Interview data were collected during three pretests in 1985 followed by a main survey period in 1986. As of July 28, 1986, the end of the 1986 NHEFS survey, 3,767 (94.6 percent) of the 3,980 members of the 1986 Followup cohort had been successfully traced. Interviews were conducted for 3,608 subjects (95.8 percent of those successfully traced). In addition, 5,405 facility stay records were collected for 2,021 subjects using information obtained from the interview, death certificate, or some other source. Death certificates were obtained for 616 (97.0 percent) of the 635 subjects who were known to have died since last contact.

To use the 1986 Followup study data most effectively, it is necessary to understand the study design and procedures of NHANES I and the 1982–84 Followup of the NHEFS. A brief overview of these two surveys is provided below. More detailed information on these surveys is presented in other publications (1–4).

NHANES I (1971–75)

NHANES I was designed to collect extensive demographic, medical history, nutritional, clinical, and laboratory data on a probability sample of the civilian noninstitutionalized population of the United States (1–3). The survey was a multistage, stratified probability sample of clusters of persons 1–74 years of age. It was conducted in 1971–74 and was extended in 1974–75 by an additional sample of adult persons, called the “Augmentation Survey” (3). The NHANES I survey design included oversampling of certain population subgroups, including persons living in poverty areas, women of childbearing age (25–44 years of age), and elderly persons (65 years of age and over). A subsample of 6,913 adult NHANES I participants 25–74 years old, called the “detailed sample,” consisted of a random subsample of subjects examined in 1971–74 and all subjects in the Augmentation Survey. Persons included in the detailed sample were examined in greater depth and provided with additional questionnaire items. More information on the sampling frame and survey instruments used for the detailed sample may be found in the plan and operation series reports for the NHANES I survey (1–3).

As a result of these varied design features of NHANES I, not all of the members of the NHEFS cohort received the same questions or examinations at baseline. For example, while all 14,407 adults in the NHEFS cohort received the general medical examination, only those 11,348 adults who were not in the Augmentation Survey were administered nutrition questionnaires at NHANES I. Similarly, the 6,913 participants included in the detailed sample may have been administered supplementary questionnaires (for example, arthritis, cardiovascular, or respiratory questionnaires), depending on their responses to screening questions.

1982–84 Followup

The 1982–84 Followup was the first data collection wave of the NHEFS series (4). It included 14,407 persons 25–74 years of age when they were examined in NHANES I (1971–75). Tracing of subjects began in 1981 and data collection was conducted from 1982 to 1984. At the close of data collection in August 1984, 93 percent ($n = 13,383$) of the study population had been successfully traced.

The basic design of the 1982–84 NHEFS consisted of the following components:

- Tracing subjects or their proxies to a current address
- Acquiring death certificates for deceased subjects
- Performing in-depth interviews with subjects or with their proxies including, for surviving subjects, taking pulse, blood pressure, and weight measurements
- Obtaining hospital and nursing home records, including pathology reports and electrocardiograms

No attempt had been made to recontact any of the NHANES I examinees until the inception of the 1982–84 Followup. Thus, the first step of the Followup was to trace and locate all subjects in the NHEFS cohort and determine their vital status. Tracing sources included criss-cross and city directories, telephone contacts, direct mail, U.S. Post Office address information requests, National Death Index (5) checks, State department of motor vehicle listings, State vital statistics files, and field visits to neighbors at last known address. A subject in the NHEFS cohort was considered successfully traced if he or she (or another informant, if the subject was deceased or was incapacitated and thus unable to be contacted) responded correctly to a set of verification questions establishing the subject’s identity. All subjects whose vital status could not be determined were considered lost to followup. A subject’s death *had* to be confirmed by means of either a death certificate or proxy interview.

The information collected during tracing relating to the death of a subject was used to request a copy of the death certificate from the appropriate State vital statistics office. Death certificates were obtained for 1,935 of the 2,022 decedents by the end of the 1982–84 survey period. (An additional 33 death certificates for 1982–84 NHEFS decedents were received after the closeout of the 1982–84 data collection period. These death certificates are included on the Mortality Data Public Use Tapes for followup waves subsequent to the 1982–84 NHEFS. For more information, see the 1986 NHEFS Mortality Data Public Use Tape Documentation.) Efforts continue to locate all missing death certificates.

During tracing, efforts were made to obtain a current address for surviving subjects and to identify a knowledgeable proxy respondent for deceased subjects and for surviving subjects who were incapacitated and unable to participate in the 1982–84 NHEFS. Respondents (that is, subjects or proxies who provided followup information) who were identified and located through the tracing

procedure were then contacted and asked to participate in an interview. In a few cases ($n = 65$), subjects who had been traced successfully could not be relocated for the interview. Only their vital status and the date when they were last traced in the 1982–84 survey period are available.

An attempt was made to interview all subjects (or their proxies) identified during tracing. Interviews were conducted wherever the subject resided, including at nursing homes, prisons, and mental health facilities. Occasionally interviews were conducted at some other convenient location (for example, a parent's home). In most instances, however, the proxy interviews for deceased subjects were conducted over the telephone.

The interview was designed to gather information on selected aspects of the subject's health history since the time of the NHANES I examination. This information included a history of the occurrence or recurrence of selected medical conditions; an assessment of behavioral, social, nutritional, and medical risk factors believed to be associated with these conditions; and an assessment of various aspects of functional status. Whenever possible, the questionnaire was designed to retain item comparability between NHANES I and the 1982–84 NHEFS in order to measure changes over time. However, questionnaire items were modified, added, or deleted when necessary to take advantage of current improvements in questionnaire methodology. Physical measurements (blood pressure, pulse rate, and weight) were obtained from surviving subjects near the end of the interview.

Interviews with the subject or a proxy were collected for 84.8 percent ($n = 12,220$) of the original NHEFS

cohort, or 91.3 percent of those successfully traced. Interviews were conducted for 10,523 (92.6 percent) of the 11,361 surviving subjects, of which 256 were administered to a proxy respondent because the subject was incapacitated. Proxy interviews were obtained for 1,697 (83.9 percent) of the 2,022 deceased subjects.

Information on overnight stays in hospitals and nursing homes was elicited during the interview for the period from 1970 to the time of the 1982–84 NHEFS. Interviewers recorded the full name and address of the health care facility and the approximate date of the stay. At the conclusion of the interview, respondents were asked to sign a medical authorization form that would be used to request the release of information from the subject's medical records. These authorization forms were retained on file, and a photocopy was sent to each health care facility that the respondent had identified during the interview.

The health care facility data collection took place from April 1983 through August 1984. Hospitals and nursing homes in which stays had been reported (through interviews, death certificates, and other sources) were contacted and asked to abstract information from their records for all stays occurring between January 1 of the year of the person's NHANES I examination up to the date of the followup interview. The major items requested were the dates of admission and discharge, the discharge diagnoses (if requesting from a hospital) or admitting diagnoses (if requesting from a nursing home), and information on any procedures that may have been performed.

Study design and tracing activities

The 1986 Followup was conducted to extend the followup period for the older NHEFS population. The main objectives of the 1986 Followup were as follows:

- To continue monitoring changes over time in health, functional status, and utilization of hospitals and nursing homes
- To track the incidence of various medical conditions

Because the recontact for this Followup occurred on the average of only 3 years after the 1982–84 Followup, the ability to successfully retrace subjects and to have respondents accurately recall the subject's overnight health care facility stays since last contact was improved.

The 1986 Followup was restricted to 5,677 NHEFS subjects who were 55 years and over at the time of their NHANES I examination (almost 40 percent of the entire NHEFS cohort). Tracing and data collection in the 1986 Followup were undertaken for only a portion of these subjects, who are referred to as the 1986 Followup cohort. The 1986 Followup cohort consisted of the 3,980 subjects ages 55 years and over at NHANES I who were not known to be deceased in the 1982–84 NHEFS, regardless of whether they had been successfully traced or interviewed in 1982–84. No additional interview or health care facility stay information was collected in the 1986 NHEFS for the 1,697 subjects who were 55 years and over at NHANES I and known to be deceased at the time of the 1982–84 NHEFS even if, in 1982–84, a proxy interview had not been conducted or collection of health care facility records had not been undertaken for the decedent.

Study design

The design and data collection procedures adopted in the 1986 Followup were very similar to the ones developed in the 1982–84 study: Subjects (or their proxies) were traced, subject and proxy interviews were conducted, and health care facility abstracts and death certificates were collected. A major difference between the 1982–84 and 1986 NHEFS waves, however, was the manner in which the interviews were conducted. In the 1982–84 NHEFS, the 2-hour subject interview usually was conducted in person; in the 1986 NHEFS, each interview averaged 30 minutes and was conducted primarily by telephone. In addition, because the questionnaire was not administered in person, no physical measurements were made in the 1986 NHEFS. Copies of all pertinent study materials (tracing materials, a brochure, letters, questionnaires, authorization forms, and

health facility data collection forms) can be found in appendix I.

Each survey component (tracing, interviewing, collecting hospital and nursing home records, and obtaining death certificates) conducted in the 1986 NHEFS represents a separate survey activity with its own set of procedures for data collection, processing, and reporting. However, the information gathered for any one survey component was used to direct activities in other components. Thus, data from different survey components were intended to be used together when appropriate. Figure 2 summarizes the results from the data collection procedures for the 1986 NHEFS. The flow chart shows the relationship between each of the data collection activities (except for the health care facility record collection) and provides information on the number of subjects in each component.

Tracing

Tracing began in November 1984 and was conducted on all 3,980 subjects 55 years and over at their NHANES I examination who were not known to be deceased in the 1982–84 NHEFS. Because the validity of longitudinal studies depends on the completeness of followup, a large variety of tracing sources was used to trace subjects in the 1986 Followup. For example, throughout the tracing process, periodic matches were made of all nondeceased NHEFS participants to the National Death Index (5) and to the enrollee file of the Health Care Financing Administration.

The majority of the tracing in the 1986 NHEFS was conducted by dividing the 1986 Followup subjects into two groups based on their vital status in the 1982–84 NHEFS. Subjects who had been successfully traced alive in the 1982–84 NHEFS underwent one set of tracing procedures while subjects who had not been successfully traced in the 1982–84 NHEFS underwent another. The tracing procedures used for each group are discussed in the following paragraphs. Subjects and proxy respondents who were identified and located through the tracing procedure were then contacted by telephone or mail (if a telephone number was not available) and asked to participate in an interview.

Retracing subjects traced successfully in the 1982–84 NHEFS

Of the 3,980 subjects not known to be deceased in 1982–84 NHEFS, 3,766 had been successfully traced and found to be alive in 1982–84. They include all subjects in

the 1982–84 NHEFS who were coded as “1” (“Alive”) on the 1982–84 NHEFS Vital and Tracing Status Public Use Data Tape. Of these 3,766 subjects, 3,659 (97.2 percent) were successfully traced again in the 1986 Followup.

The first step in retracing each subject was to contact directory assistance in the area in which the subject had been living during the 1982–84 Followup. Subjects were considered successfully retraced if their first and last names and either the address or telephone number recorded in their 1982–84 NHEFS tracing records matched the information provided by directory assistance. Subjects with matching information on first and last name but who had a different address and a different telephone number were designated as “possible matches.” Information on the verification of possible matches is found later in this section.

When efforts using directory assistance failed to produce a conclusive match, other tracing sources were used. They included post office address inquiries, submission of the person’s Social Security Number to the Social Security Administration, and calls to the tracing reference provided in the 1982–84 NHEFS (typically, a person not living in the subject’s household at the time of the 1982–84 NHEFS). In addition, persons included in the baseline or 1982–84 NHEFS household composition lists were contacted, if available, to locate the subject. All subjects identified through these additional tracing sources were considered “possible matches.”

Tracing subjects not traced successfully in the 1982–84 NHEFS

A different set of tracing sources was used to trace the remaining 214 subjects in the 1986 Followup cohort who had not been successfully traced in the 1982–84 NHEFS. This group includes all subjects who had a problematic vital status in the 1982–84 NHEFS. It consists of 202 subjects who were never successfully traced during the 1982–84 NHEFS (coded as “4” (“Unknown”) on the 1982–84 NHEFS Vital and Tracing Status Public Use Data Tape) and 12 subjects who were initially traced in the 1982–84 NHEFS but subsequently lost prior to the 1982–84 interviewing period (coded as “5” (“Traced alive but lost prior to interview period”) on the 1982–84 NHEFS Vital and Tracing Status Public Use Data Tape). For analytic purposes, the latter 12 subjects are considered successfully traced in the 1982–84 NHEFS because they were contacted during the survey period. Because of their problematic vital status in the 1982–84 NHEFS, however, they were not grouped for tracing purposes in the 1986 Followup with the other 3,766 subjects who were considered successfully traced alive in the 1982–84 NHEFS.

Of the 214 subjects, half ($n = 108$) were successfully traced in the 1986 Followup using the following prescribed tracing procedure. The first step was to contact directory assistance in the area where the subject had last been known to live to determine whether he or she had returned to that area. Other tracing sources used after the directory assistance inquiries included motor vehicle office and credit bureau checks for male relatives and spouses of

female subjects who were included on the household composition listings obtained in NHANES I. Furthermore, criss-cross directory searching was undertaken to locate residents living on the block where the subject was last known to have resided. When found, these persons were contacted to determine whether they were familiar with the subject and, if so, whether they knew the whereabouts of the subject. A subject identified through any of these tracing sources was considered a possible match.

Verification of possible matches

Respondents for possible-matched subjects were contacted and administered a tracing questionnaire to verify the subject’s identity. A subject who was a possible match was considered successfully traced if he or she or a proxy respondent (in the case the subject was deceased or incapacitated and unable to be interviewed) correctly responded to a set of verification questions used to establish the subject’s identity. (If the respondent did not have a telephone, he or she was sent a mail update form to complete.) Once the name of the subject was verified, the respondent had to correctly supply at least two of the following three items:

- *Subject’s date of birth.* Date of birth was considered verified if the subject’s month, day, and year of birth matched exactly the information obtained at last contact (that is, either baseline or the 1982–84 NHEFS, depending on whether the subject had been successfully traced in the 1982–84 NHEFS). However, if only the month and day matched, the birth year had to be within 2 years of the year listed in the tracing records for the date of birth to be considered verified. In some cases, a proxy respondent was administered the questions and did not know the subject’s date of birth. This item, however, was considered verified if the age provided by the proxy for the subject was within 2 years of the deceased subject’s age at death or of the surviving subject’s current age, as determined from the subject’s tracing file. If the proxy did not know the subject’s age, the interviewer requested the name of another proxy respondent.
- *Subject’s address at time of 1982–84 NHEFS.* The address at the time of the 1982–84 NHEFS was considered verified if the street name, city, and state reported at last contact matched the information on record. Street number did not need to match.
- *Household composition at last contact.* Questions on household composition were asked only if the subject’s date of birth or address at the time of last contact did not match information listed in the subject’s tracing records. The household composition at the time of last contact (either NHANES I or the 1982–84 NHEFS) was considered verified if the respondent recalled the name and relationship of at least one household member. If the respondent reported that the subject lived alone and this agreed with the information in the tracing records, this also was considered a match.

Lost to followup

All subjects who could not be located through the tracing procedures were considered lost to followup in the 1986 NHEFS. In 53 cases, even though information about the death of a subject was obtained from a former neighbor, a relative, or another tracing source, that subject was considered lost to followup because the information was not verified by means of a proxy interview or a death certificate. *A subject's death had to be confirmed by either a death certificate or proxy interview.*

There were two groups of subjects who were considered alive for analytic purposes in the 1986 Followup but who are assigned a special 1986 Followup vital status code. The first group consists of 12 subjects who were initially traced alive in the 1986 NHEFS but were subsequently lost prior to the 1986 interviewing period. Only their vital status and the date when they were last traced in the 1986 survey period are available. The second group includes six subjects for whom a direct confirmation of vital status was not obtained, due to a failure to follow tracing procedures properly. They are identified by a 1986 NHEFS vital status

code of "7." The date when they were last known alive is the date that tracing was conducted. Analysts may want to consider these six subjects lost to followup. However, the authors feel that the available data indicate that there is a high probability that these subjects were alive at the time of tracing in the 1986 NHEFS.

As of July 28, 1986, the end of the 1986 survey, 94.6 percent ($n = 3,767$) of the 3,980 subjects in the 1986 Followup cohort had been successfully traced (see figure 2). Only 107 (2.8 percent) of the 3,766 subjects who had been traced alive in the 1982-84 NHEFS were not successfully traced in the 1986 NHEFS, and 106 (49.5 percent) of the 214 not successfully traced in the 1982-84 NHEFS again were not successfully traced in the 1986 NHEFS.

The success of the tracing efforts in the 1986 Followup according to age at baseline examination, race, and sex are given in table A (see appendix II for discussion of age, race, and sex variables). To summarize how these demographic factors were related to tracing success, a multiple logistic model was fitted to the cross-classification of age at baseline examination, race, and sex, with the proportion of

Table A. Number of subjects and percent distribution of respondents by status at followup in the NHANES I Epidemiologic Followup Study, 1986 Followup cohort, according to race, sex, and age at NHANES I

Race, sex, and age ¹	Status at followup							
	All subjects	Surviving	Deceased	Lost to followup	All subjects	Surviving	Deceased	Lost to followup
	Number				Percent distribution			
All races ²	3,980	3,132	635	213	100.0	78.7	16.0	5.4
Male:								
55-64 years	677	573	74	30	100.0	84.6	10.9	4.4
65-74 years	1,001	674	261	66	100.0	67.3	26.1	6.6
Female:								
55-64 years	864	769	56	39	100.0	89.0	6.5	4.5
65-74 years	1,438	1,116	244	78	100.0	77.6	17.0	5.4
White								
Both sexes	3,364	2,697	524	143	100.0	80.2	15.6	4.3
Male:								
55-64 years	592	508	63	21	100.0	85.8	10.6	3.5
65-74 years	826	570	215	41	100.0	69.0	26.0	5.0
Female:								
55-64 years	734	659	48	27	100.0	89.8	6.5	3.7
65-74 years	1,212	960	198	54	100.0	79.2	16.3	4.5
Black								
Both sexes	590	414	108	68	100.0	70.2	18.3	11.5
Male:								
55-64 years	73	57	9	7	100.0	78.1	12.3	9.6
65-74 years	168	98	45	25	100.0	58.3	26.8	14.9
Female:								
55-64 years	127	107	8	12	100.0	84.3	6.3	9.4
65-74 years	222	152	46	24	100.0	68.5	20.7	10.8
Other								
Both sexes	26	21	3	2	100.0	80.8	11.5	7.7
Male:								
55-64 years	12	8	2	2	100.0	66.7	16.7	16.7
65-74 years	7	6	1	-	100.0	85.7	14.3	-
Female:								
55-64 years	3	3	-	-	100.0	100.0	-	-
65-74 years	4	4	-	-	100.0	100.0	-	-

¹See appendix II for a discussion of revised race, corrected sex, and recalculated age at NHANES I.

²Includes races other than white or black.

NOTE: The 1986 Followup cohort consists of 3,980 subjects, 55 years and over at NHANES I, who were not known to be deceased in the 1982-84 NHEFS.

subjects who were lost to followup representing the dependent variable. The analysis was limited to black and white respondents, because there were few subjects of other races ($n = 26$). Age at baseline examination was categorized into two groups (55–64 and 65–74 years). Interaction terms were deleted from the saturated model to develop the simplest model that would fit the data. The smallest p value (probability) for a deleted term was .48. The final model included main effects for race ($p < .0001$), sex ($p = .3811$), and age at baseline examination ($p = .0676$). The results from the multiple logistic regression indicated that black persons in the 1986 Followup cohort were 2.9 times more likely to be lost to followup compared with their white counterparts. Because the proportion lost to followup in the 1986 Followup cohort is relatively small compared with the proportion deceased (0.05 versus 0.16, respectively), there should, however, be relatively little bias in mortality findings as a result of loss to followup.

Analysis using a multiple logistic regression was conducted to determine whether those persons lost to followup were at relatively high risk of death. The regression model included six health characteristics measured during NHANES I (in addition to age at baseline examination, race, and sex) that have been established as risk factors for mortality: high blood pressure (systolic blood pressure of 140 millimeters of mercury or higher), high cholesterol (260 milligrams per 100 milliliters or higher), overweight (for men, a body mass index greater than or equal to 27.8 kilograms per meter squared; for women, a body mass index greater than or equal to 27.3 kilograms per meter squared),^b history of heart attack, history of diabetes, and

smoking status (current smoker, current nonsmoker, or unknown).

The results of the multiple logistic regression are presented in table B. The baseline risk factors of high cholesterol, elevated blood pressure, overweight, and history of heart attack did not have a statistically significant effect on loss to followup. Of the six baseline risk factors, diabetes and smoking had the strongest effect on loss to followup: diabetics and current smokers were more than twice as likely to be lost to followup compared with nondiabetics and current nonsmokers ($p = .0165$ and $p = .0055$, respectively). Because both of these characteristics are associated with mortality, the results from this analysis suggest that those subjects who were lost to followup in the 1986 NHEFS may be more likely to have died compared with those who were successfully traced.

Table B. Odds ratios, confidence intervals, and statistical significance for selected health characteristics on loss to followup for the NHANES I Epidemiologic Followup Study (NHEFS), 1986 Followup cohort

Baseline characteristics	95-percent confidence interval			p value
	Odds ratio	Lower bound	Upper bound	
High blood pressure	1.10	0.80	1.50	0.5616
High cholesterol	0.89	0.64	1.23	0.4661
Overweight	1.13	0.84	1.53	0.4257
History of heart attack	1.07	0.60	1.89	0.8220
Diabetes	1.79	1.11	2.88	0.0165
Smoking	1.90	1.21	3.00	0.0055

NOTES: The 1986 Followup cohort consists of 3,980 subjects, ages 55 years and over at NHANES I examination, who were not known to be deceased in the 1982–84 NHEFS. Data based on multiple logistic regression with race, sex, and age at NHANES I examination included.

^bThe thresholds for overweight represent the sex-specific 85th percentiles for persons 20–29 years of age (excluding pregnant women) in the 1976–80 National Health and Nutrition Examination Survey (6).

Interview data collection

Interview procedures

An attempt was made to obtain an interview for all subjects who were successfully traced in the 1986 NHEFS. The procedure used to obtain interviews in the 1986 NHEFS was similar to the one adopted in the 1982–84 NHEFS:

- An advance letter describing the Followup Study was sent to a surviving subject or a knowledgeable proxy respondent (for a deceased subject or for a subject who was incapacitated and unable to participate in the interview), once that person was traced and located.
- The interviewer then called the subject or proxy to schedule an appointment for the interview.
- In contrast to the 1982–84 interview procedures, the 1986 interview was administered by telephone (in 1982–84, the majority of the interviews were conducted in person). When a telephone number was not available, the respondent was sent a mail questionnaire to complete. Any overnight health care facility stays reported during the interview were recorded on a hospital and health care facility chart.
- At the end of the interview, the respondent's address was reconfirmed. This was done for tracing purposes as well as to ensure that a medical authorization form would be sent to the proper address to be signed and returned. This form was used to request health care facilities to release information from the subject's medical records to the study. It was mailed out to the respondent for his or her signature (or to a blood relative if the proxy respondent was not related to the subject) when at least one health care facility stay was reported during the interview and was listed on the subject's hospital and health care facility chart.

The 1986 NHEFS interviews were conducted over the telephone using a computer-assisted telephone interviewing (CATI) system. CATI allows the telephone interviewer to enter the answers supplied by the respondent directly into the computer. Thus, editing and coding time is reduced, and keypunching from a hard-copy questionnaire is eliminated. A computer program drives the questionnaire so that the correct skip patterns are followed and the appropriate questions are displayed on the computer monitor. The skip patterns are based on information gathered either from previous data collection waves or from responses

provided during the interview. For example, the questions on pregnancy and menstrual history in the 1986 interview were programmed to be skipped automatically if the subject was male or if the female subject had had an interview in 1982–84. Edit and logic checks are incorporated into the data collection system itself, thus improving the quality of the data.

Interview data were collected during three pretests in 1985 followed by a main survey period in 1986. There were 167 interviews conducted during the pretests and 3,441 interviews during the main survey. All interview data collected from the pretests and main survey are included on the 1986 Followup Interview Public Use Data Tape. Figure 3 summarizes selected characteristics of the pretests and main survey. The appendixes in the Interview Public Use Data Tape documentation provide a comprehensive outline of the differences between questionnaire items in the pretest and main survey questionnaires.

Each pretest consisted of a nonrandom sample of subjects from a preselected area in Pennsylvania who had been successfully traced by the time of the pretest. The main purpose of Pretests I and II was to evaluate and "fine tune" the questionnaire prior to programming the CATI system in Pretest III. The interviews in Pretests I and II were conducted over the telephone using a paper version of the respective pretest questionnaire for traced, surviving subjects only. Pretest I was conducted from late February 1985 to mid-March 1985. Interviews were obtained for 50 of the 73 subjects selected from the Pretest I area. After Pretest I, several small modifications were made to the survey instrument. It was then retested in Pretest II during the second week of May 1985. Interviews were conducted for 19 of the 27 subjects selected from the Pretest II area.

The CATI system was tested and implemented in Pretest III. This last pretest was conducted in two parts. Interviews in the first part were conducted from mid-August to mid-September 1985 for 77 of the 128 subjects selected from the Pretest III area who had been traced alive. In the second part, proxy interviews were conducted for 21 of the 26 subjects from Pretest I, II, or III who had been identified as deceased since last contact. These interviews were conducted from mid-September to early October 1985.

The main data collection for the 1986 Followup began in mid-January 1986, 3½ months after the completion of the Pretest III interviews, and ended late-July 1986. Field

1986 NHEFS component	Interview period	Respondent characteristics	Number of interviews conducted	Method of data collection	Use of CATI ¹	Comments
Pretest I	February 22– March 19, 1985	Surviving subjects from 3 NHANES I sample areas in Pennsylvania	50	Telephone	No	Interview conducted using paper version of questionnaire
Pretest II	May 7–14, 1985	Surviving subjects from 3 NHANES I sample areas in Pennsylvania	19	Telephone	No	Interview conducted using paper version of questionnaire
Pretest III Part 1	August 16– September 18, 1985	Surviving subjects from 2 NHANES I sample areas in Pennsylvania	77	Telephone	Yes	CATI system implemented
Part 2	September 20– October 4, 1985	Proxies for subjects known to be deceased as of the 1986 NHEFS and located in either Pretest I, II, or III	21			
Main survey	January 13–July 28, 1986	Subjects (or their proxies) not interviewed during Pretests I, II, or III	3,441	Telephone or mail	Yes	Mail questionnaire sent when telephone number not available—14 mail questionnaires were received and stored on interview tape; 25 of 3,427 telephone interviews not fully completed but stored on interview tape

¹ Computer-assisted telephone interviewing (CATI) system.

Figure 3. Interview schedule for the NHANES I Epidemiologic Followup Study (NHEFS), 1986

work was conducted regionally by dividing the sample into three regions, with the first region having the largest and the third region having the smallest sample size. Each region contained States from each time zone. Interviews were collected for 3,441 subjects during the main survey period, of which 3,427 (99.6 percent) were conducted by telephone and 14 (0.4 percent) were conducted by mail.

Questionnaire types

The 1986 NHEFS questionnaire was designed to gather information on events that occurred since last contact regarding the subject's living arrangement, occurrence and recurrence of selected chronic diseases, functional limitations, hospital and nursing home experience, and utilization of community services. To retain item comparability between NHANES I, the 1982–84 NHEFS, and the 1986 NHEFS, a majority of the questions included on the 1986 NHEFS questionnaire were the same as those used in the 1982–84 NHEFS. Questions on coronary bypass surgery, pacemaker procedures, and the utilization of community service were new to the 1986 NHEFS.

As in the 1982–84 NHEFS, two versions of the questionnaire were used in the 1986 NHEFS: the subject questionnaire and the proxy questionnaire (see appendix I). Surviving subjects were always administered the subject questionnaire. If the subject was alive but incapacitated, a slightly modified version of the subject questionnaire was administered to a proxy respondent. A separate proxy questionnaire was used only when the subject was

deceased. It consisted of a subset of the questions from the subject questionnaire, with the addition of several questions related to the subject's death.

Note the distinction between a *proxy respondent* and the *proxy questionnaire*. A proxy respondent was the informant who answered questions when the subject was not able to participate in an interview, either because the subject was alive and incapacitated or because the subject was deceased. The proxy questionnaire, however, was the type of questionnaire administered only to the person who responded for a deceased subject. A total of 1,050 proxy respondents were interviewed in the 1986 NHEFS. Of these, 469 responded for an incapacitated subject and were administered a modified version of the subject questionnaire and 581 responded for a deceased subject and, thus, were administered the proxy questionnaire.

Nearly all 3,608 interviews collected in the 1986 NHEFS were conducted by telephone. However, during the main survey, when a subject or proxy could not be contacted by telephone, the respondent was mailed an abbreviated questionnaire (see appendix I). The mail questionnaire for surviving subjects was designed to collect information on (a) tracing for future recontacts; (b) subject's current living arrangements and medical history since last contact; (c) name and address of hospitals and nursing homes in which the subject had stayed since last contact and the admission date for each stay; and, (d) if an interview had not been obtained for the subject in 1982–84, the subject's cigarette smoking and alcohol habits, and, if the subject was female, reproductive and hormone use history.

The mail questionnaire sent to the proxy respondent when the subject was deceased was designed to obtain the necessary information on (a) the subject's identity, (b) the name and address of hospitals and nursing homes in which the subject had stayed since last contact and the admission date for each stay, and (c) the locality of the subject's death.

Of the 65 questionnaires mailed to respondents in the 1986 Followup, 14 (21.5 percent) were returned. Twelve were collected from surviving subjects and two were collected from proxies for deceased subjects. Unlike the 1982-84 NHEFS, a returned mail questionnaire in the 1986 NHEFS constitutes an interview, and data from the mail questionnaires are included on the 1986 NHEFS Interview Tape.

Questionnaire content

Both the subject and the proxy telephone questionnaires were divided into sections according to topic area. The major topics are summarized in figure 4. Where appropriate, entire sections or specific questions in some sections were omitted from the proxy questionnaire. In addition, certain sections in the questionnaire were included or omitted depending on whether an interview had been collected for the subject in the 1982-84 NHEFS.

Part A of the subject and proxy questionnaires included questions on the subject's household composition and marital status. The subject's race was ascertained only if the subject had not had an interview in the 1982-84 NHEFS.

Part B of the subject and proxy questionnaires contained a self-reported history of selected medical conditions. Specific questions were asked on arthritis, gout, heart attack, coronary bypass surgery, pacemaker procedures, small stroke, stroke, cancer, hypertension, diabetes, hip and other bone fractures, pneumonia, flu, and other types of surgeries. The proxy questionnaire also included several questions in part B that pertain to the subject's place of death.

The wording of the medical condition questions in part B generally depended on whether the subject had had

an interview in the 1982-84 NHEFS and, if so, whether a specific medical condition had been reported for the subject during that interview. If a certain medical condition had been reported in the 1982-84 NHEFS, the respondent in the 1986 interview was asked to recall any recurrences of that medical condition since the date of the 1982-84 interview. The respondent was asked to recall whether a doctor had ever told the subject that he or she had the medical condition in question if (a) the condition had not been reported in the 1982-84 NHEFS interview, (b) the condition was never asked about in the 1982-84 NHEFS interview, (c) the subject denied that he or she had reported that condition in the 1982-84 NHEFS interview, or (d) an interview had not been conducted for the subject in 1982-84.

Respondents also were asked to provide information on any overnight health care facility stays for any of the medical conditions reported in the interview. If the subject had had an interview in the 1982-84 NHEFS, the respondent in the 1986 NHEFS was asked to recall any overnight hospitalizations for the medical conditions of interest since 1980. If the subject had not had an interview in the 1982-84 NHEFS, then the interviewer asked the respondent to recall any overnight stays since 1970. In the case where the respondent reported that the subject was first told about having the medical condition of interest before 1980 and that information contradicted information stored in the CATI system obtained from the 1982-84 NHEFS interview, he or she was asked to provide information on all overnight stays since 1970 for that condition.

The beginning of the respondent recall period was defined as either 1970 or 1980 rather than the date of the subject's most recent interview (that is, baseline examination or 1982-84 NHEFS) for two reasons. First, the beginning of a decade may be an easier reference point for recalling events rather than the date of the subject's most recent interview. Second, given that respondents might have difficulty recalling exact dates of facility stays, increasing the length of the recall period maximizes the probability of collecting information on health care facility stays that occurred since the date of the subject's most recent interview.

Demographic	Living arrangement, household composition, marital status
Medical history	Arthritis, heart attack, stroke, diabetes, hypertension, cancer, other chronic conditions; bone fractures
Health care facility stays	History of overnight hospital and nursing home stays since last contact
Functional status ¹	Activities of daily living
Cigarette smoking ²	History of use
Alcoholic beverages ²	Use in past year
Weight ¹	History; ² current weight
Vision and hearing ¹	Cataracts, corrective lenses; hearing acuity
Female medical history ²	Hormone use, pregnancies, births
Community services ¹	Use of community programs for the elderly in past year
Death information	Locality of subject's death
Other ¹	Activity level, urinary incontinence, changes in memory

¹Information collected only if the subject was alive at the time of the 1986 NHEFS.
²Information collected only if the subject had not had an interview in the 1982-84 NHEFS survey period.

Figure 4. Questionnaire topics in the NHANES I Epidemiologic Followup Study (NHEFS), 1986

All overnight stays in health care facilities reported during the interview were recorded onto the hospital and health care facility chart. The full name and address of the health care facility, date of admission, and reason(s) for the admission were obtained from the respondent for each stay and transcribed onto the chart.

Part C of the subject questionnaire concerned functional impairment. Several questions were first asked on paralysis, amputation, and severe arthritis of the limbs. The battery of functional limitation questions consisted of a modified subset of items from the Fries Functional Disability Scale for arthritis (7), the Rosow-Breslau Scale (8), and the Katz Activities of Daily Living Scale (9). The questions were designed to measure the subject's level of difficulty in doing a set of everyday activities without the help of another person or mechanical device. Information was also collected on whether help had been received and how this help affected the subject's ability to perform the activity. Thus, this information could be used to measure the impact of disease on functional ability as well as the actual functional level as affected by the receipt of help or use of devices. The items could thus be grouped in different ways to investigate different aspects of functional status. Part C was omitted from the proxy questionnaire.

Part D consisted of questions pertaining to the subject's smoking and drinking habits. The questions were designed to obtain a brief history of the subject's lifetime cigarette smoking behavior and an overview of the subject's alcohol consumption in the past year. These questions were asked of the respondent only when a subject interview had not been conducted in the 1982–84 NHEFS.

Part E contained questions for surviving subjects on physical activity, memory loss, urinary incontinence, and current body weight. A series of questions regarding the subject's weight history also was included in part E for those subjects missing a 1982–84 NHEFS interview. Part E was not included in the proxy questionnaire.

Part F consisted of questions designed to measure the subject's visual and auditory abilities. Questions on cataract surgery were also included. Part F was omitted from the proxy questionnaire.

Part G contained questions on female medical history, including pregnancy and menstrual history and use of birth control pills and postmenopausal hormones. The questions in part G were asked only of female subjects (or their proxies) who had not had an interview in the 1982–84 NHEFS.

Part H contained questions designed to measure the subject's utilization of community services, such as senior citizen centers, visiting nurse services, and adult day care centers. This section was omitted from the proxy questionnaire.

Part I in the proxy questionnaire included questions designed to facilitate the receipt of the subject's death certificate in each case where the death certificate had not yet been received. It was also designed to obtain information on another person who could act as a proxy if the current proxy was not able to answer all the questions

during the interview. Part I in the subject questionnaire contained a question to obtain the subject's Social Security Number, if it had not been obtained previously in 1982–84.

Part J was used to confirm the name and address for future tracing purposes of all persons who participated in the interview (for example, subject, proxy, or assistant). Confirmation of name and address was also done so that a medical authorization form could be sent to the proper address to be signed and returned. The form was used to request health care facilities to release information from the subject's medical records to the study. It was sent to the subject or proxy (if the proxy was related to the subject and the subject was either deceased or too ill to sign the form) to obtain his or her signature when at least one health care facility stay was reported and listed on the subject's hospital and health care facility chart. When the proxy respondent was not related to the deceased subject or to the incapacitated subject who was unable to sign the medical authorization form, an attempt was made in part J to identify a relative who could sign the form. The section of this report entitled "Health care facilities data collection process" provides more detail on the medical authorization forms and their effects on receipt of information from health care facilities.

Part K was used by the interviewer to give his or her impressions regarding the quality of the interview and responses provided by the informant.

Interview nonresponse

By the end of the 1986 NHEFS survey (July 28, 1986), interviews had been conducted for 90.7 percent ($n = 3,608$) of the 3,980 subjects aged 55 years and over at NHANES I and not deceased in the 1982–84 NHEFS (95.8 percent of those successfully traced). A total of 167 interviews were conducted during the pretest periods and 3,441 during the main survey period.

As shown in figure 2, an interview was conducted for 3,027 (96.6 percent) of the 3,132 surviving subjects, of which 469 were administered to a proxy respondent because the subject was incapacitated. A proxy interview was conducted for 581 (91.5 percent) of the 635 decedents identified in the 1986 NHEFS. In the 1986 NHEFS, only 3.4 percent ($n = 105$) of the traced, surviving subjects were not interviewed. This nonresponse rate is one-half the rate of 6.9 percent found among the survivors in the 1982–84 NHEFS who were 55 years and over at their NHANES I examination. Proxy interviews were not conducted for 8.5 percent of decedents in the 1986 NHEFS, almost a 50-percent reduction from the 15.6 percent nonresponse rate for decedents in the 1982–84 NHEFS who were 55 years and over at their baseline examination. The shorter followup period probably contributed to the increase in response rate because there was a greater likelihood of locating an appropriate proxy.

Table C shows the interview nonresponse rates for the 1986 Followup by age at baseline examination, race, sex, and vital status. The lower interview success rate in the

Table C. Number and percent of traced members of the NHANES I Epidemiologic Followup Study (NHEFS), 1986 Followup cohort without a completed interview, by vital status at 1986 NHEFS, and by race, sex, and age at NHANES I

Race, sex, and age ²	Subjects without complete interview ¹			
	Surviving		Deceased	
	Number	Percent	Number	Percent
All races³				
Both sexes.	105	3.4	54	8.5
Male:				
55-64 years	17	3.0	6	8.1
65-74 years	26	3.9	20	7.7
Female:				
55-64 years	23	3.0	5	8.9
65-74 years	39	3.5	23	9.4
White				
Both sexes.	86	3.2	45	8.6
Male:				
55-64 years	15	3.0	6	9.5
65-74 years	20	3.5	14	6.5
Female:				
55-64 years	19	2.9	5	10.4
65-74 years	32	3.3	20	10.1
Black				
Both sexes.	17	4.1	8	7.4
Male:				
55-64 years	2	3.5	-	-
65-74 years	4	4.1	5	11.1
Female:				
55-64 years	4	3.7	-	-
65-74 years	7	4.6	3	6.5

¹The 1986 Followup cohort consists of 3,980 subjects, 55 years and over at NHANES I examination, who were not known to be deceased in the 1982-84 NHEFS. Percents are based on 3,132 surviving subjects and 635 deceased subjects at the time of 1986 NHEFS.
²See appendix II for a discussion of revised race, corrected sex, and recalculated age at NHANES I.
³Includes races other than white or black.

1986 Followup for decedents compared with surviving subjects is apparent across the age-sex-race groups. This difference occurs partly because many of the decedents were located from vital statistics files, and no proxy could be identified.

To summarize how demographic factors relate to interview status, multiple logistic models were fitted to the cross-classification of age at baseline examination, race, and sex, with the proportion of 1986 Followup subjects without an interview as the dependent variable. The analysis was limited to only black and white respondents, because there were few subjects of other races ($n = 26$). Age at baseline examination was categorized into two groups (55-64 years and 65-74 years). The final model for surviving subjects includes only the main effect terms for race ($p < .0001$), sex ($p = .1877$), and age at baseline examination ($p = .0045$). Thus, among survivors, black persons were 2.4 times more likely than white persons and subjects 65-74 years at baseline were 1.4 times more likely than those 55-64 years not to have an interview in the 1986 Followup. Among decedents, there were no significant differences by race, sex, or age at baseline examination in interview response rates, although the numbers were quite small.

Health care facilities data collection process

A major objective of the 1986 NHEFS is the collection of information on all overnight stays in health care facilities for members of the 1986 Followup cohort. The 1986 Followup cohort consisted of the 3,980 subjects who were at least 55 years of age at their NHANES I examination and were not known to be deceased at the time of the 1982–84 NHEFS. Followup cohort members who have either an interview or a death certificate on the 1986 NHEFS data files were eligible for the health care facility records component. The aim of this component was to develop a complete set of health care facility (that is, hospital and nursing home) records for each 1986 Followup cohort member. This was accomplished by identifying all overnight stays in health care facilities through a series of reporting mechanisms. Facilities were then contacted to obtain copies of medical records. Reports and medical records were then linked, and the 1986 NHEFS Health Care Facility Stay file was constructed. Critical time periods for the collection of facility records in the 1986 NHEFS are illustrated in figure 5. The first panel of the figure pertains to subjects with an interview in the 1982–84 NHEFS, the second panel pertains to those without an interview since NHANES I examination. The time line, the first line in each panel of the figure, identifies the events or dates used to define reference periods. Each line below the time line defines the reference period for an individual aspect of the facility data collection.

The 1986 NHEFS Health Care Facility Stay file contains all information on overnight stays that are in scope for the 1986 NHEFS period. The scope of the 1986 Followup period is illustrated in the first line below the time line in both panels of figure 5. For subjects with an interview during the 1982–84 NHEFS, the 1986 in-scope survey period is from the date of the 1982–84 interview to the date of the 1986 interview for surviving subjects and from the date of the 1982–84 interview to the date of death for deceased subjects. The 1986 in-scope survey period for subjects without an interview in the 1982–84 NHEFS is from the date of NHANES I examination to the date of the 1986 interview for surviving subjects and from the date of NHANES I examination to the date of death for deceased subjects. Stays occurring prior to the in-scope period were defined as out of scope for the 1986 survey, and attempts were made to place them on the revised 1982–84 NHEFS Health Care Facility Stay file if they were not already on that file.

Identification of stay reports

Reports of overnight hospital or nursing home facility stays were obtained from various sources. Most reports were elicited through a series of detailed questions in parts B and F of the interview. Generally, respondents were asked to report all overnight facility stays since 1980 if the subject was last interviewed in the 1982–84 NHEFS or since 1970 if the subject was last interviewed at NHANES I examination. (See figure 5 for an example of the respondent recall period.) For respondents who provided inconsistent information during the 1986 interview (that is, information which contradicted the 1982–84 interview), the respondent recall period was extended back to 1970. A detailed discussion of inconsistent medical reports is provided in the previous section of this report.

The respondent recall period was defined to include reports of facility stays that were technically out of scope for the 1986 NHEFS (that is, facility stays that occurred prior to the date of last NHEFS interview). This was done for two reasons. First, the beginning of the decade may be a more meaningful reference point for respondents than the date of the last interview. Second, to the extent that subjects misreport the dates of hospital or nursing home stays, increasing the period of reporting will maximize the probability of collecting information on all in-scope 1986 facility stays. The relationship between in-scope and respondent recall periods is illustrated in figure 5. In addition to interview information, data on facility stays were gathered from other reporting sources: death certificate, tracing sources, and other facility abstracts. At the conclusion of the interview, authorization was obtained for permission to contact facilities.

Facility data collection

For each stay reported during the interview, the name and address of the facility, the reported dates of the stay, and the reason for the stay were recorded on the hospital and health care facility chart. (See appendix I.) A separate log book was kept containing similar data for reports gathered from the death certificates, tracing sources, and other facility abstracts. All reports of facility stays were compiled and entered into a computerized tracking system. For each subject, the list of reported stays was checked against the list of facilities that were contacted for the

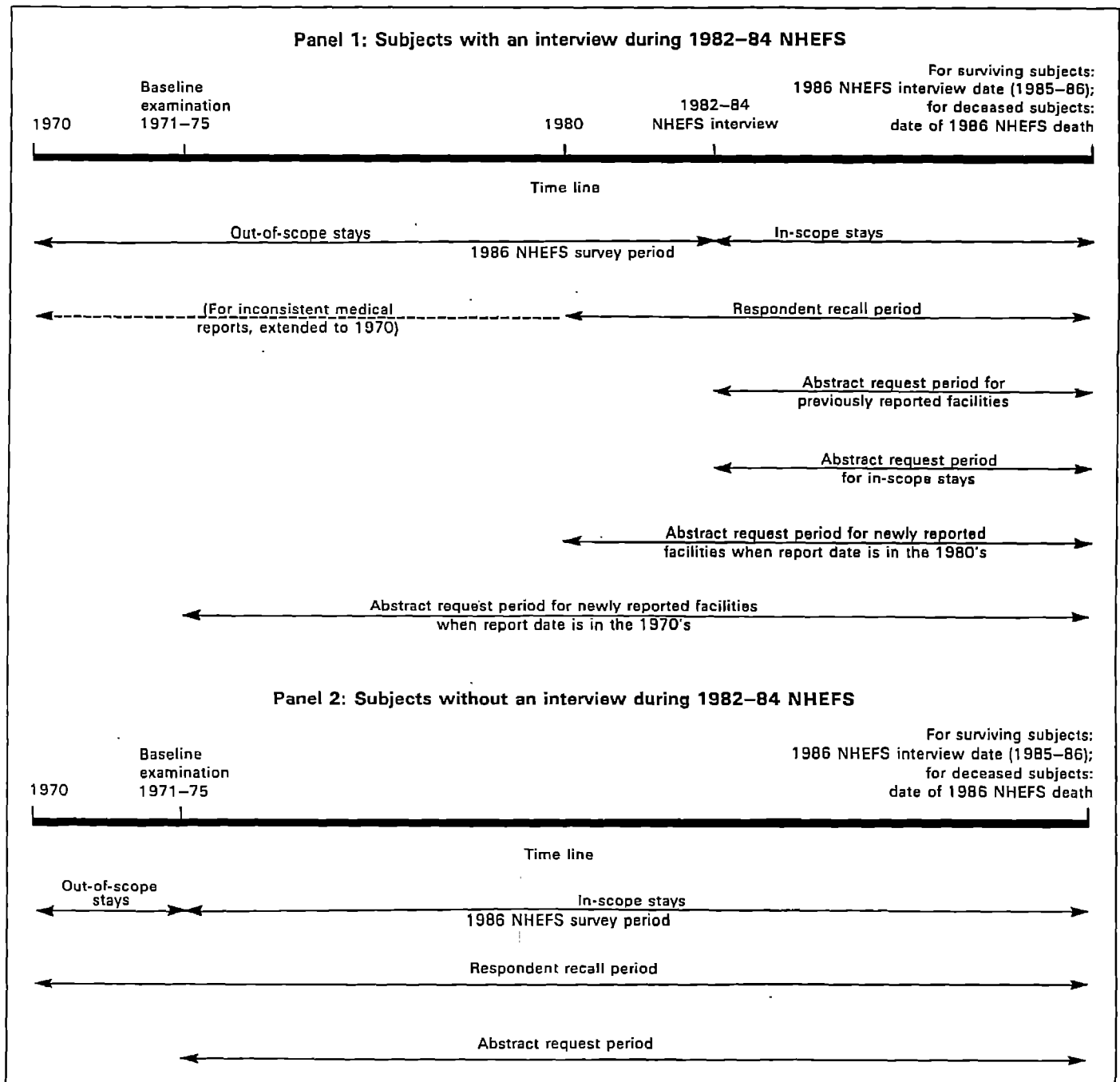


Figure 5. Survey period, respondent recall period, and facility abstract request period, by previous interview status: NHANES I Epidemiologic Followup Study (NHEFS), 1986

subject in the 1982–84 NHEFS. To avoid duplication with the 1982–84 NHEFS Health Care Facility Stay file, reports were deleted from the tracking system if the reported dates of admission on the 1986 NHEFS were more than 1 year prior to the 1982–84 NHEFS interview (that is, out of scope for the 1986 NHEFS) and if that specific facility had been contacted previously. This occurred when a respondent reported being hospitalized since 1980 for a given condition but when the reported date of admission is at least 1 year prior to the 1982–84 interview. However, if the facility was not contacted in 1982–84, it was contacted in 1986.

All facilities in which stays were reported were contacted by mail between September 1985 and June 1987 and asked to review the subject's medical records, to abstract information on exact dates of admission, discharge, and diagnoses, and to place the information on standard forms. (See appendix I for copies of the facility contact letters and the abstract forms.) Because many respondents may not have remembered correctly the dates of hospitalizations, the requests to the facilities did not specify the reported dates of admission. Rather, facilities were asked to complete abstract forms for all stays since the date of last

NHEFS contact. In some cases, an out-of-scope report was obtained for a facility that had not been contacted in the 1982–84 NHEFS. When this occurred, the facility was directed to either send all abstracts since 1980 if the reported dates were in the 1980's or since NHANES I examination if the reports were in the 1970's. The different facility abstract request periods are illustrated in figure 5. These procedures resulted in the receipt of previously unobtained abstracts that were out of scope for the 1986 survey but in scope for the 1982–84 NHEFS. The revised 1982–84 NHEFS Health Care Facility Stay file will include these records. In addition to completing abstract forms, health care facilities were requested to submit photocopies of selected sections of the subject's inpatient record; for example, the "facesheet," the discharge summary, the third-day electrocardiogram (for myocardial infarction diagnoses, code 410 in the *International Classification of Diseases, 9th Revision, Clinical Modification (ICD-9-CM) (10)*), and pathology reports (for any admission where a new malignancy was diagnosed).

Matching records

As the abstracts were received, they were checked against report information in the tracking system to determine whether the abstract "matched" any of the reported stays. Date of admission and diagnosis were used as matching criteria but exact matches on date or diagnosis were not required for a stay to be considered matched. Abstracts were matched to reports if the reported date of admission was within a year before or after the actual date of admission and if one reported reason for admission involved the same body system as the diagnoses present on the abstract. Because the matching rules allowed for an admission date of up to 1 year before or after the reported date of admission, some abstracts are present on the file with a match record status and an out-of-scope report date. These records are identified by a type C flag in position 199 of the file. Cases that did not meet the matching criteria were reviewed by National Center for Health Statistics staff and matched when appropriate.

Each record on the file represents an overnight facility stay. Therefore, one record or more will exist for some 1986 Followup cohort subjects, while other subjects will

have no records on the file. The structure of the data file reflects the system used to obtain and process stay information. The record is divided into four major sections: (a) the report section, (b) the record status section, (c) the abstract section, and (d) the related stay section. An example of the record layout is provided in figure 6.

The first section of the record is the report section, which contains information from the reporting source as well as stay identification numbers assigned by the National Center for Health Statistics. The record status section contains a code for the result of the abstract request—that is, match or nonmatch status. The abstract section contains the information obtained from the facility records including actual dates of admission, discharge, and diagnoses. The diagnoses on the abstracts were coded using the *International Classification of Diseases, 9th Revision, Clinical Modification (10)* according to the medical coding specifications detailed in the 1986 NHEFS Health Care Facility Stay file documentation. Discharge diagnoses were coded for hospitals, while admitting diagnoses were coded for nursing homes. The abstract section is similar to the original 1982–84 NHEFS Health Care Facility Record file released in August 1987 while the other three sections are new additions to the 1986 NHEFS facility tape format. (A revised file that restructures the 1982–84 Health Care Facility data into the current format has also been released.) The final section of the record, the related stay section, is used to identify stays that are contained within other stays. This occurred most often when nursing home residents had a brief hospital stay but then returned to the nursing home. A detailed example of the related stay section is contained in the introduction to the Health Care Facility Stay file documentation.

Information will be present in one section or more of the record depending on whether a report was obtained, whether an abstract was received, or how the stay relates to other stays on the file. The presence or absence of information in the first three sections results in three different record profiles. Figure 7 illustrates these three profiles. The first is the successfully matched stay record; that is, where an abstract was received which matched a report. Abstract information was added to the record for that report and the code of MAT (match) was entered into the

<i>Report section</i>	<i>Record status section</i>	<i>Abstract section</i>	<i>Related stay section</i>
<ul style="list-style-type: none"> ● Facility identifiers ● Reported date of admission ● Reported cause of admission ● Source of report 	<ul style="list-style-type: none"> ● Match or reason for nonmatch 	<ul style="list-style-type: none"> ● Actual dates of admission and discharge ● Diagnoses (<i>International Classification of Diseases, 9th Revision, Clinical Modification</i>) ● Discharge status from hospitals and nursing homes 	<ul style="list-style-type: none"> ● Codes assigned by the National Center for Health Statistics to identify stays contained within other stays

Figure 6. Health care facility record layout: NHANES I Epidemiologic Followup Study, 1986

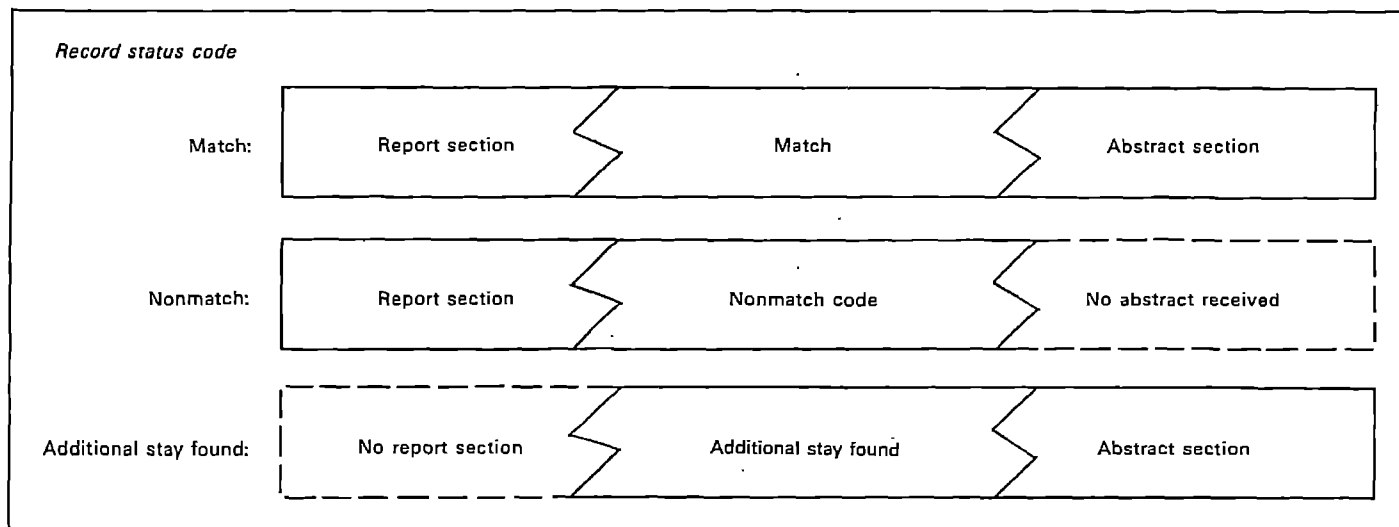


Figure 7. Examples of matching process and record status codes: NHANES I Epidemiologic Followup Study, 1986

record status section. Complete information is available for these stays. The second type occurs when an abstract was not matched to a report, and, therefore, no data are contained in the abstract section. The appropriate non-match code was entered in the record status section. The third type of record is one that was generated solely by the receipt of a facility abstract. This type of record resulted when the facility returned an in-scope abstract that did not match any report on the tracking system. When this occurred, the abstract was entered on the file, stay identifiers were assigned in the report section of the record, but no other information is given in the report section. An ASF (additional stay found) code was entered in the record status section.

Because of the procedures instituted for maximizing the collection of reports of hospital or nursing home stays (that is, deliberately requesting out-of-scope report information), it was necessary to devise rules for removing the "correctly reported" out-of-scope reports from the final version of the file. This was only possible after the facilities submitted the abstract information. As was previously mentioned, reports of stays with a reported date of admission more than 1 year prior to the last interview were eliminated from the tracking system prior to contacting the facilities by mail if the facility had been contacted in the previous interview period. However, if the facility had not been contacted previously, the report was kept on the tracking system and flagged with a "D" in position 199. If an in-scope abstract was received from the facility, it was added onto the file with a record status code of ASF and the type D report was deleted from the final version of the file. If no in-scope abstracts were received from the facility, the type D report was deleted from the file based on the presumption that the date was correctly reported and the stay was out of scope. In 20 cases, the type D reports remain on the final version of the file. This occurred when it was impossible to contact the facility or the facility submitted no information. These records for unconfirmed reports of out-of-scope stays can be eliminated from analysis at the

analysts' discretion. A type C flag was assigned in position 199 when a reported date of admission was within 1 year of the previous interview. If an in-scope abstract was returned that matched the type C report, it was assigned a record status code of MAT ($n = 73$). (The matching rules permitted an admission date of up to 1 year before or after the reported date of admission.) If no in-scope abstracts were received from the facility, the type C reports were removed from the file, the assumption being that the correct date was reported and that the stay was truly out of scope. In 10 cases it was not possible to contact the facility, and the type C reports remain on the file. These unconfirmed reports of out-of-scope stays are identified by a nonmatch status in positions 60-62 and a type C flag in position 199.

Results of the health care facility data collection

The file contains a total of 5,405 records; 4,784 (88.5 percent) records are for hospital stays, 528 (9.8 percent) for nursing home stays, and 93 (1.7 percent) for stays in facilities of unknown types. The distribution of stays is given in table D: 2,021 NHEFS subjects, 53.7 percent of the traced Followup cohort, have at least one stay on the file; 1,915 subjects have hospital stays, 422 subjects have nursing home stays, and 81 subjects have stays in facilities of unknown type.

The completeness of the data file can be assessed by examining the codes in the record status section of the file. Of the 5,405 records on the file, 2,846 (52.7 percent) are matches, 1,063 (19.7 percent) are additional stays found, and 1,496 (27.7 percent) are nonmatch codes (table E). The match rate decreases slightly with age from 56.3 percent for subjects under 65 years at the time of the examination to 51.2 percent for subjects 65 years and over at the time of NHANES I examination. Of the 1,496 records potentially missing from the file (that is, no abstract was received from the facility which matches a report on the tracking system), 1.9 percent ($n = 28$) resulted from

Table D. Number of facility stays, distribution of subjects by number of stays, mean number of stays, and percent of traced cohort with at least one stay in the NHANES I Epidemiologic Followup Study (NHEFS), 1986 Followup cohort, by race, sex, and age at NHANES I

Race, sex, and age ¹	Total stays	Number of subjects by number of stays				Percent of traced cohort with at least 1 stay	Mean number of stays
		Total stays	1 stay	2 stays	3 stays or more		
All races²							
Both sexes	5,405	2,021	785	470	766	53.7	2.7
Male:							
55-64 years	740	312	143	72	97	48.2	2.4
65-74 years	1,699	595	194	143	258	63.6	2.9
Female:							
55-64 years	828	345	170	76	99	41.8	2.4
65-74 years	2,138	769	278	179	312	56.5	2.8
White							
Both sexes	4,633	1,721	674	404	643	53.4	2.7
Male:							
55-64 years	651	272	124	65	83	47.6	2.4
65-74 years	1,432	505	167	120	218	64.3	2.8
Female:							
55-64 years	712	293	146	67	80	41.4	2.4
65-74 years	1,838	651	237	152	262	56.2	2.8
Black							
Both sexes	748	290	108	63	119	55.6	2.6
Male:							
55-64 years	75	33	16	6	11	50.0	2.3
65-74 years	263	88	27	21	40	61.5	3.0
Female:							
55-64 years	110	51	24	9	18	44.3	2.2
65-74 years	300	118	41	27	50	59.6	2.5

¹See appendix II for a discussion of revised race, corrected sex, and recalculated age at NHANES I examination.

²Includes races other than white or black.

NOTE: The 1986 Followup cohort consists of 3,980 subjects, 55 years and over at NHANES I examination, who were not known to be deceased in the 1982-84 NHEFS. The traced cohort consists of 3,767 subjects who were not lost to followup at the time of the 1986 NHEFS interview.

Table E. Number and percent of record status codes for the NHANES I Epidemiologic Followup Study (NHEFS), 1986 Followup cohort, by race, sex, and age at NHANES I

Race, sex, and age ¹	Total number	Percent	Record status code					
			Match		Additional stay found		Nonmatch	
			Number	Percent	Number	Percent	Number	Percent
All races²								
Both sexes	5,405	100.0	2,846	52.7	1,063	19.7	1,496	27.7
Male:								
55-64 years	740	100.0	413	55.8	134	18.1	193	26.1
65-74 years	1,699	100.0	870	51.2	328	19.3	501	29.5
Female:								
55-64 years	828	100.0	469	56.6	158	19.1	201	24.3
65-74 years	2,138	100.0	1,094	51.2	443	20.7	601	28.1
White								
Both sexes	4,633	100.0	2,509	54.2	892	19.3	1,232	26.6
Male:								
55-64 years	651	100.0	376	57.8	114	17.5	161	24.7
65-74 years	1,432	100.0	762	53.2	276	19.3	394	27.5
Female:								
55-64 years	712	100.0	422	59.3	123	17.3	167	23.5
65-74 years	1,838	100.0	949	51.6	379	20.6	510	27.7
Black								
Both sexes	748	100.0	329	44.0	165	22.1	254	34.0
Male:								
55-64 years	75	100.0	31	41.3	17	22.7	27	36.0
65-74 years	263	100.0	106	40.3	52	19.8	105	39.9
Female:								
55-64 years	110	100.0	47	42.7	32	29.1	31	28.2
65-74 years	300	100.0	145	48.3	64	21.3	91	30.3

¹See appendix II for a discussion of revised race, corrected sex, and recalculated age at NHANES I.

²Includes races other than white or black.

NOTE: The 1986 Followup cohort consists of 3,980 subjects, 55 years and over at NHANES I examination, who were not known to be deceased in the 1982-84 NHEFS.

participants' refusal to authorize data collection (designated by a record status code of ANO in positions 60–62) and 12.6 percent ($n = 189$) resulted from the facility's refusal to send abstracts (REF). Six percent ($n = 90$) resulted from an inability to contact the facility because of administrative reasons (hospital closed, subject could not remember name of facility, facility could not be located, and so forth) (FNC), and 18.4 percent ($n = 276$) resulted from the facility's failure to respond in any way to the requests for abstracts (ONR). For seven stays the facility

reported that the records were lost or destroyed (XRD), and for eight stays an administrative code of CRX was assigned to represent a missing in-scope continuing stay. The largest cause of failure to obtain an abstract (60.0 percent, $n = 898$) occurred because the facility did not return an abstract that matched the report. In these cases, the facility may have responded that the subject was never in that facility (XNH), or other abstracts may have been returned, but no abstract matching that particular report was obtained (XNS).

Death certificate collection

Deaths identified by the National Death Index (5), Health Care Financing Administration, or other tracing sources were verified by obtaining the death certificate from the vital statistics office of the State of death. These death certificates were coded by the National Center for Health Statistics using the *International Classification of Diseases, Ninth Revision* (ICD-9) multiple cause-of-death codes (11).

A member of the 1986 Followup cohort was considered deceased only if a death certificate was received or a proxy interview was completed to verify the death. Both a death certificate and a proxy interview are available for 562 (88.5 percent) of the 635 subjects identified as having died between the last contact and the 1986 NHEFS. Nineteen (3.0 percent) of the decedents have only a proxy interview and 54 (8.5 percent) have only a death certificate. Overall, death certificates were obtained for 616 (97 percent) of the decedents in the 1986 Followup cohort. Efforts continue to locate all missing death certificates.

The percent of decedents for whom a death certificate was not available is shown in table F, according to age at baseline examination, sex, and race. Death certificates were obtained for a high percent of decedents among the age-sex-race groups (from 93.3 to 100.0 percent among cells with more than 10 deaths). Black decedents were more than three times more likely than white decedents and men were 54 percent more likely than women to be missing a death certificate.

Table F. Number of deaths and percent of decedents without an available death certificate among the NHANES I Epidemiologic Followup Study (NHEFS), 1986 Followup cohort, by race, sex, and age at NHANES I

<i>Race, sex, and age</i> ¹	<i>Number of deaths</i>	<i>Percent without a death certificate</i>
All races ²		
Both sexes	635	3.0
Male:		
55-64 years	74	5.4
65-74 years	261	3.1
Female:		
55-64 years	56	1.8
65-74 years	244	2.5
White		
Both sexes	524	2.1
Male:		
55-64 years	63	3.2
65-74 years	215	2.3
Female:		
55-64 years	48	-
65-74 years	198	2.0
Black		
Both sexes	108	7.4
Male:		
55-64 years	9	22.2
65-74 years	45	6.7
Female:		
55-64 years	8	12.5
65-74 years	46	4.3

¹See appendix II for a discussion of revised race, corrected sex, and recalculated age at NHANES I.

²Includes races other than white or black.

NOTE: The 1986 Followup cohort consists of 3,980 subjects, 55 years and over at NHANES I, who were not known to be deceased in the 1982-84 NHEFS. Percents are based on the 635 deceased subjects in the 1986 NHEFS.

1986 analytic cohort

This document has focused on the tracing and data collection results for those subjects 55 years and over at baseline who were not known to be deceased in 1982–84. In this section the discussion is expanded to examine the “1986 analytic cohort,” the *entire* cohort of subjects who were 55 years and over at their NHANES I examination ($n = 5,677$), regardless of their vital status or interview status at the 1982–84 NHEFS.

As shown in table G, definitive information on vital status at followup, obtained from either the 1982–84 NHEFS or the 1986 NHEFS, is available for virtually all 5,677 subjects in the 1986 analytic cohort. Only 1.8 percent ($n = 103$) of the members in the 1986 analytic cohort were lost to followup in both the 1982–84 and 1986 Followups. Approximately 41 percent ($n = 2,332$) of the 1986 analytic cohort was deceased. A total of 1,697 subjects were identified as deceased in the 1982–84 NHEFS, and an additional 635 subjects were identified as deceased in the 1986 NHEFS. A death certificate is available for 2,266 (97.2 percent) of the decedents. Fifty-seven percent ($n = 3,242$) of the members of the 1986 analytic cohort have a vital status of “Alive.” This group includes 3,206 subjects in the 1982–84 NHEFS who had been successfully traced and then were either traced alive or were lost to followup in the 1986 NHEFS and 36 subjects who were lost to followup in the 1982–84 NHEFS but were subsequently traced alive in the 1986 NHEFS.

The success of the tracing efforts for the 1986 analytic cohort is shown in table H according to age at baseline examination, race, and sex. To summarize how these demographic factors were related to tracing success, a multiple logistic model was fitted to the cross-classification of age, race, and sex, with the proportion of subjects who were lost to followup as the dependent variable. The analysis was limited to black and white subjects, because there were few subjects of other races ($n = 45$). Additional analytic

definitions and parameters used for this lost to followup analysis have been described previously in the section of this report entitled “Study design and tracing activities.” The final model included a main effect for age at baseline examination ($p = .5756$) and interaction between race and sex ($p = .0153$). Among white respondents, more women were lost to followup, but among black respondents, men had the higher rates in this category. The smallest p value (probability) for a deleted term was .31. Odds ratios relative to white men are 1.6 for white women, 6.5 for black men, and 3.8 for black women. Because the proportion lost to followup is relatively small compared with the proportion deceased in the 1986 analytic cohort (0.02 versus 0.41, respectively), there should, however, be relatively little bias in mortality findings as a result of loss to followup.

Analysis using a multiple logistic regression was conducted for black and white subjects to determine whether those subjects lost to followup in the 1986 analytic cohort were at relatively high risk of death. The regression model included six health characteristics measured at NHANES I (in addition to age, race, sex, and the interaction term for race and sex) that have been established as risk factors for mortality: high blood pressure, high cholesterol, overweight, history of heart attack, history of diabetes, and smoking status. Definitions of these risk factors are described in the section of this report entitled “Study design and tracing activities.”

The results of this multiple logistic regression are presented in table J. The baseline risk factors of high cholesterol, elevated blood pressure, overweight, and history of heart attack did not have a statistically significant effect on loss to followup. Of the six baseline risk factors, diabetes and smoking had the strongest effect on loss to followup: Diabetics and current smokers were twice as likely as their respective nondiabetic and current nonsmoking counterparts to be lost to followup ($p = .0223$ and

Table G. Subject status at the NHANES I Epidemiologic Followup Study, 1986, compared with subject status at the NHANES I Epidemiologic Followup Study, 1982–84, for all subjects 55 years of age and over at NHANES I

Status at 1982–84 followup	Status at 1986 Followup							
	Total		Alive		Deceased		Lost to followup	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent
Total	5,677	100.0	3,132	55.2	2,332	41.1	213	3.8
Alive	3,778	66.5	3,096	54.5	572	10.1	110	1.9
Deceased	1,697	29.9	—	—	1,697	29.9	—	—
Lost to followup	202	3.6	36	0.6	63	1.1	103	1.8

Table H. Number and percent distribution of subjects by status at followup in the NHANES I Epidemiologic Followup Study, 1986 analytic cohort, by race, sex, and age at NHANES I

Race, sex, and age ¹	Status at followup							
	All subjects	Surviving	Deceased	Lost to followup	All subjects	Surviving	Deceased	Lost to followup
	Number				Percent distribution			
All races ²	5,677	3,242	2,332	103	100.0	57.1	41.1	1.8
Male:								
55-64 years	860	588	257	15	100.0	68.4	29.9	1.7
65-74 years	1,836	708	1,096	32	100.0	38.6	59.7	1.7
Female:								
55-64 years	964	789	156	19	100.0	81.8	16.2	2.0
65-74 years	2,017	1,157	823	37	100.0	57.4	40.8	1.8
White								
Both sexes	4,739	2,779	1,899	61	100.0	58.6	40.1	1.3
Male:								
55-64 years	741	519	212	10	100.0	70.0	28.6	1.3
65-74 years	1,501	599	890	12	100.0	39.9	59.3	0.8
Female:								
55-64 years	819	672	133	14	100.0	82.1	16.2	1.7
65-74 years	1,678	989	664	25	100.0	58.9	39.6	1.5
Black								
Both sexes	893	440	411	42	100.0	49.3	46.0	4.7
Male:								
55-64 years	105	59	41	5	100.0	56.2	39.0	4.8
65-74 years	313	103	190	20	100.0	32.9	60.7	6.4
Female:								
55-64 years	142	114	23	5	100.0	80.3	16.2	3.5
65-74 years	333	164	157	12	100.0	49.2	47.1	3.6
Other								
Both sexes	45	23	22	-	100.0	51.1	48.9	-
Male:								
55-64 years	14	10	4	-	100.0	71.4	28.6	-
65-74 years	22	6	16	-	100.0	27.3	72.7	-
Female:								
55-64 years	3	3	-	-	100.0	100.0	-	-
65-74 years	6	4	2	-	100.0	66.7	33.3	-

¹See appendix II for a discussion of revised race, corrected sex, and recalculated age at NHANES I examination.

²Includes races other than white or black.

NOTE: The 1986 analytic cohort consists of all 5,677 subjects, 55 years and over at NHANES I examination.

Table J. Odds ratios, confidence intervals, and statistical significance for selected health characteristics on loss to followup for the NHANES I Epidemiologic Followup Study, 1986 analytic cohort

Baseline characteristic	Odds ratio	95-percent confidence interval		p value
		Lower bound	Upper bound	
High blood pressure	1.09	0.71	1.67	0.7093
High cholesterol	0.88	0.56	1.40	0.6013
Overweight	1.34	0.88	2.05	0.1701
History of heart attack	0.91	0.43	1.91	0.7952
Diabetes	1.95	1.10	3.45	0.0223
Smoking	1.96	1.06	3.63	0.0315

NOTE: The 1986 analytic cohort consists of all 5,677 subjects 55 years and over at NHANES I. Data based on multiple logistic regression with race, sex, race-sex interaction, and age at NHANES I examination included.

$p = .0315$, respectively). Because both of these characteristics are associated with mortality, the results from this analysis suggest that those subjects in the 1986 analytic cohort who were lost to followup may be more likely to have died compared with those who were successfully traced.

Table K gives the results for death certificate data collection for the analytic cohort by age at their NHANES I examination, race, and sex. Death certificates were obtained for a high percent of decedents among the age-sex-race groups (from 87.0 to 98.6 percent). Black decedents were twice as likely to be missing a death certificate compared with white decedents and women were slightly more likely to be missing a death certificate compared with men.

Table K. Number of deaths and percent of decedents without an available death certificate among the NHANES I Epidemiologic Followup Study, 1986 analytic cohort, by race, sex, and age at NHANES I

<i>Race, sex, and age¹</i>	<i>Number of deaths</i>	<i>Percent without a death certificate</i>
All races²		
Both sexes	2,332	2.8
Male:		
55-64 years	257	2.3
65-74 years	1,096	2.6
Female:		
55-64 years	156	3.2
65-74 years	823	3.2
White		
Both sexes	1,899	2.3
Male:		
55-64 years	212	1.4
65-74 years	890	2.0
Female:		
55-64 years	133	1.5
65-74 years	664	3.2
Black		
Both sexes	411	5.4
Male:		
55-64 years	41	7.3
65-74 years	190	5.8
Female:		
55-64 years	23	13.0
65-74 years	157	3.2

¹See appendix II for a discussion of revised race, corrected sex, and recalculated age at NHANES I examination.

²Includes races other than white or black.

NOTE: The 1986 analytic cohort consists of all 5,677 subjects 55 years and over at NHANES I examination. Percents are based on the 2,332 deceased subjects in the 1986 analytic cohort.

Ongoing activities

Four public use data tapes containing vital and tracing status, interview, health care facility stay, and mortality data from the 1986 NHEFS are available from the National Technical Information Service. The Vital and Tracing Status Data Tape contains summary information on *all* 5,677 members of the NHEFS cohort who were 55 years and over at their NHANES I examination, regardless of vital status or interview status in the 1982–84 or 1986 Followups. The Interview Data Tape contains information from 3,608 interviews (3,027 subject and 581 proxy interviews) collected during the 1986 NHEFS pretest and main survey interviewing periods. The Health Care Facility Stay Data Tape contains 5,405 stay records. It has the same format as the 1982–84 NHEFS *Revised* Health Care Facility Stay Data Tape. The Mortality Data Tape includes information abstracted from the death certificates from both the 1982–84 NHEFS and the 1986 NHEFS for subjects 55 years and over at the time of NHANES I who had died since NHANES I and for whom a death certificate is available.

Of the 2,266 subjects on the Mortality Data File, 1,622 were deceased at the 1982–84 NHEFS and their death certificates were obtained during the 1982–84 survey period; 28 were deceased at the 1982–84 NHEFS, but their death certificates were obtained after the 1982–84 NHEFS ended; and 616 were not known to be deceased until the 1986 NHEFS when their death certificates were obtained.

The 1986 Data Tapes may be used in conjunction with the Data Tapes from the NHANES I survey and the 1982–84 NHEFS tapes to investigate the effects of baseline measures on subsequent health status. All these data tapes are available through the National Technical Information Service. The study identification number, the Sample Sequence Number, can be used to link the files from any of the Followup surveys to all NHANES I files.

Additional information on the NHEFS cohort will be available in future years. Plans are to recontact and reinterview cohort members or their proxies, to collect health care facility data, and to collect death certificate information.

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Appendixes

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5. At what address were you living in (MONTH AND YEAR OF INTERVIEW)?

ADDRESS: _____

STREET APT. #

CITY STATE

BOX A

INTERVIEWER REVIEW Q.2 AND Q.4 AND CHOOSE ONE:

Q.2 AND Q.4 VERIFY 1 (SET UP INTERVIEW)

Q.2 AND Q.4 DO NOT VERIFY 2 (Thank you very much, I don't believe you are
the person we are looking for.) (TERMINATE)

OTHER 3 (Q.6)

6. Can you give me the names of the people you were living with in (MONTH AND YEAR OF INTERVIEW)?
[And how was (NAME) related to you?] (PROBE FOR FULL NAME AND RELATIONSHIP.)

	NAME	RELATIONSHIP
1.	_____	_____
2.	_____	_____
3.	_____	_____
4.	_____	_____

OR

LIVED ALONE 0

Thank you very much but I am not sure whether you are the person we are looking for. I will check the information you have given me against our records and will call you back if you are the correct person. (TERMINATE)

NOTICE: - Information contained on this form which would permit identification of any individual or establishment has been collected with a guarantee that it will be held in strict confidence, will be used only for purposes stated for this study, and will not be disclosed or released to others without the consent of the individual or establishment in accordance with Section 308(d) of the Public Health Service Act (42 USC 242m).

5. At what address were you living in (MONTH AND YEAR OF LAST CONTACT)?

ADDRESS: _____
STREET APT. #

CITY STATE

BOX A

INTERVIEWER REVIEW Q.2 AND Q.4 AND CIRCLE ONE:

Q.2 AND Q.4 VERIFY 1 (SET UP INTERVIEW)
Q.2 AND Q.4 DO NOT VERIFY 2 (Thank you very much, I don't believe you are
the person we are looking for.) (TERMINATE)
OTHER 3 (Q.6)

6. Can you give me the names of the people you were living with in (MONTH AND YEAR OF EXAM)?
[And how was (NAME) related to you?] (PROBE FOR FULL NAME AND RELATIONSHIP.)

	NAME	RELATIONSHIP
1.	_____	_____
2.	_____	_____
3.	_____	_____
4.	_____	_____

OR

LIVED ALONE 0

Thank you very much but I am not sure whether you are the person we are looking for. I will check the information you have given me against our records and will call you back if your are the correct person. (TERMINATE)

NOTICE: - Information contained on this form which would permit identification of any individual or establishment has been collected with a guarantee that it will be held in strict confidence, will be used only for purposes stated for this study, and will not be disclosed or released to others without the consent of the individual or establishment in accordance with Section 108(d) of the Public Health Service Act (42 USC 242e).

ID #: - -

PROXY NAME: _____

Date _____

U.S. Department of Health and Human Services
National Center for Health Statistics
National Institute on Aging
NHANES I Epidemiologic Followup Survey

VERIFICATION QUESTIONS (TO BE ASKED OF PROXIES)

1. I would like to ask a few questions to verify that I have the correct person. I want to mention that the information you give me will be kept confidential and will be used for statistical purposes only. The interview is completely voluntary and is authorized by the Public Health Service Act.

What (is/was) (SUBJECT'S) full name including middle name? (IF S CHANGED NAME, EXPLAIN)

NAME: _____

2. And (his/her) date of birth (is/was) (REPEAT BIRTHDATE). Is that correct?

- YES. 1 (Q.4)
- NO 2 (Q.3)
- DON'T KNOW 8 (Q.3)

3. (IF INCAPACITATED) What is (his/her) (date of birth/age)?

BIRTHDATE: _____ / _____ / _____ OR AGE: _____
 MONTH DAY YEAR

(IF DECEASED) What was (his/her) (date of birth/age at death)? [What year did (he/she) die?]

BIRTHDATE: _____ / _____ / _____ OR AGE AT DEATH: _____
 MONTH DAY YEAR YEAR OF DEATH: _____

4. Was (SUBJECT) living at (LABEL ADDRESS) in [MONTH AND YEAR OF LAST CONTACT]?

- YES. 1 (BOX A)
- NO 2 (Q.5)
- DON'T KNOW 8 (BOX A)

5. At what address was (he/she) living in (MONTH AND YEAR OF LAST CONTACT)?

ADDRESS: _____

STREET APT. #

CITY STATE ZIP CODE

BOX A

INTERVIEWER REVIEW Q.2 AND Q.4 AND CIRCLE ONE:

Q.2 AND Q.4 VERIFY. 1 (SET UP INTERVIEW; COMPLETE SUF IF APPROPRIATE)

Q.2 AND Q.4 DO NOT VERIFY 2 (Thank you very much, I don't believe we are
talking about the same person.) (TERMINATE)

OTHER 3 (Q#6)

6. Can you remember the names of the people (he/she) was living with in (MONTH AND YEAR OF INTERVIEW/EXAM)? [And how was (NAME) related to (him/her)?] (PROBE FOR FULL NAME AND RELATIONSHIP.)

	NAME	RELATIONSHIP
1.	_____	_____
2.	_____	_____
3.	_____	_____
4.	_____	_____

OR

LIVED ALONE 0

Thank you very much but I am not sure whether (he/she) is the person we are looking for. I will check the information you have given me against our records and will call you back if (he/she) is the correct person. (TERMINATE)

NOTICE: - Information contained on this form which would permit identification of any individual or establishment has been collected with a guarantee that it will be held in strict confidence, will be used only for purposes stated for this study, and will not be disclosed or released to others without the consent of the individual or establishment in accordance with Section 308(d) of the Public Health Service Act (42 USC 242a).

Study Schedule

- Original Survey:
National Health and Nutrition Examination Survey (1971-75)
- Initial Followup:
Lengthy personal interviews. Blood pressure and weight measures (1982-84).
- Continued Followup:
Short telephone contacts of the elderly (1985-88) and of the total population (1986 and 1988).

Participating Agencies

National Institute on Aging
National Center for Health Statistics
National Cancer Institute
National Institute of Mental Health
National Institute on Alcohol Abuse and Alcoholism
National Institute of Arthritis, Diabetes, Digestive and Kidney Diseases
National Heart, Lung, and Blood Institute
National Institute of Neurological and Communicative Disorders and Stroke
National Institute of Allergy and Infectious Diseases



Interview

Epidemiologic Followup Study

National Health
& Nutrition
Examination
Survey

U S Department of Health and Human Services
Public Health Service
National Center for Health Statistics
National Institute on Aging

Epidemiologic Followup Study

What Is the NHANES I Epidemiologic Followup Study?

The National Health and Nutrition Examination Survey Epidemiologic Followup Study is designed to collect information about an aging population which includes:

- Illnesses that have occurred.
- Habits and personal characteristics that may affect health, such as eating patterns and blood pressure.
- The ability to carry on routine activities of daily living such as dressing oneself or climbing stairs.

The information will allow scientists to study many of the factors that cause disease and disability. Data from this study will be used by health planners, educators, and medical experts to improve present programs and to initiate future programs for prevention and treatment of disease.

Why Is the Study Important?

Because the Followup Study provides data on a large national sample, it presents a unique opportunity for health researchers to study changes in health status and the factors that contribute to good health as well as illness.

It is the first U.S. investigation of its size and scope to follow the respondents over a period of years, and the first to have interviewers measure blood pressure on a national basis.

Who Is Being Contacted?

Persons who participated in the NHANES survey are being interviewed about their health status and hospital care since the earlier study. If the original participant cannot be interviewed because of illness or death, relatives or close friends will be contacted.

A very short interview will be conducted by telephone by specially trained interviewers who will ask questions about illness and any disability the respondent may be experiencing.

Hospitals will be contacted to obtain technical information from the hospital record. It is essential that data be collected about all participants. No other data can be substituted for the information desired.

Why Is Participation Important?

The persons who took part in the first survey made up a group that represented all types of people in all areas of the United States. The Followup Study is the first nationwide survey that will provide information on the changes in health for people from different backgrounds and regions.

Each participant represents thousands of others with similar characteristics. Although voluntary, participation is important so that the results will continue to represent a true scientific sample of the U.S. population.

Confidentiality Is Guaranteed

All information obtained in the survey will be protected by the confidentiality requirements of the U.S. Public Health Service Act and the Privacy Act of 1974.

Answers will be used only by research staff working on the survey. Each of them must sign a statement pledging to keep confidential all information provided by respondents. No information that would permit identification of an individual will be released or published. Survey results will be published only as statistical summaries.

A Cooperative Effort

The survey is a joint effort of the National Center for Health Statistics and the National Institute on Aging, agencies of the Public Health Service, U.S. Department of Health and Human Services.

All queries or correspondence should be directed to

Helen E. Barbano
NHANES I Epidemiologic Followup Study
National Center for Health Statistics
3700 East-West Highway, Room 2-27
Hyattsville, Maryland 20782
(301) 436-5975



National Center for Health Statistics
3700 East-West Highway
Hyattsville, MD 20782

Dear Participant:

As you may recall, we have been in touch with you in recent years concerning a national study that the National Center for Health Statistics is conducting. You participated in the first National Health and Nutrition Examination Survey in 1971-1975, and its Initial Followup in 1982-84. The results of that survey have provided much needed information about the health needs and characteristics of the American people. We would like to express our appreciation to you for your part in making that survey a success, and we would like to have your help again.

To further use the findings from the original survey, the National Center for Health Statistics is planning another brief interview of all the adults who took part in that study. We have contracted with Westat, a national research firm, to conduct the survey for us. Within the next two weeks, a Westat interviewer will call you on the telephone to conduct a very short interview. It should take approximately 30 minutes.

The interview will include questions about your health status and any hospital care you may have received since our last contact. We would appreciate it if you have this information available when the interviewer calls.

This survey is authorized by Title 42, United States Code 242k. Your participation in the survey is completely voluntary. There are no penalties for refusing to answer any question.

As in the previous survey, any information you give will be kept confidential. No information that could be used to identify you or any individual will be released or published. Results of this study will be published only as statistical summaries.

Your participation is vital to the success of this survey, and your cooperation will be greatly appreciated.

Sincerely yours,

A handwritten signature in cursive script, reading "M Feinleib".

Manning Feinleib, M.D., Dr.P.H.
Director

Enclosure



National Center for Health Statistics
3700 East-West Highway
Hyattsville, MD 20782

Dear Participant:

As you may recall, we have been in touch with you in recent years concerning a national study that the National Center for Health Statistics is conducting. You participated in the first National Health and Nutrition Examination Survey in 1971-1975. The results of that survey has provided much needed information about the health needs and characteristics of the American people. We would like to express our appreciation to you for your part in making that survey a success, and we would like to have your help again. Although you were not available to participate in the Initial Followup in 1982-84, we hope you will be able to assist us at this time.

To further use the findings from the original survey, the National Center for Health Statistics is planning another brief interview of all the adults who took part in that study. We have contracted with Westat, a national research firm, to conduct the survey for us. Within the next two weeks, a Westat interviewer will call you on the telephone to conduct a very short interview. It should take approximately 30 minutes.

The interview will include questions about your health status and any hospital care you may have received since our last contact. We would appreciate it if you have this information available when the interviewer calls.

This survey is authorized by Title 42, United States Code 242k. Your participation in the survey is completely voluntary. There are no penalties for refusing to answer any question.

As in the previous survey, any information you give will be kept confidential. No information that could be used to identify you or any individual will be released or published. Results of this study will be published only as statistical summaries.

Your participation is vital to the success of this survey, and your cooperation will be greatly appreciated.

Sincerely yours,

Manning Feinleib, M.D., Dr.P.H.
Director

Enclosure



National Center for Health Statistics
3700 East-West Highway
Hyattsville, MD 20782

Dear Participant:

The National Center for Health Statistics (NCHS) is conducting a national health study, the National Health and Nutrition Examination Survey (NHANES). _____ participated in the first National Health and Nutrition Examination Survey in 1971-1975, and in the first followup for NHANES in 1982-84. The results of that survey have provided much needed information about the health needs and characteristics of the American people. We would like to have your help in the NHANES I Continued Followup Survey being conducted at this time.

To further use the findings from the original survey, the National Center for Health Statistics is planning another brief interview of all the adults who took part in that study. We have contracted with Westat, a national research firm, to conduct the survey for us. Within the next two weeks, a Westat interviewer will call you on the telephone to conduct a very short interview. It should take approximately 30 minutes.

The interview will include questions about _____'s health status and any hospitalizations and nursing home stays he/she may have had since 1980. We would appreciate it if you have this information available when the interviewer calls.

This survey is authorized by Title 42, United States Code 242k. Your participation in the survey is completely voluntary. There are no penalties for refusing to answer any question.

As in the previous survey, any information you give will be kept confidential. No information that could be used to identify you or any individual will be released or published. Results of this study will be published only as statistical summaries.

Your cooperation is vital to the success of this study.

Sincerely yours,

Manning Feinleib, M.D., Dr.P.H.
Director

Enclosure



National Center for Health Statistics
3700 East-West Highway
Hyattsville, MD 20782

Dear Participant:

The National Center for Health Statistics (NCHS) is conducting a national health study, the National Health and Examination Survey (NHANES).

_____ participated in the first National Health and Nutrition Examination Survey in 1971-1975. The results of that survey have provided much needed information about the health needs and characteristics of the American people. We hope you will be able to assist us at this time in the NHANES I Continued Followup Survey.

To further use the findings from the original survey, the National Center for Health Statistics is planning another brief interview of all the adults who took part in that study. We have contracted with Westat, a national research firm, to conduct the survey for us. Within the next two weeks, a Westat interviewer will call you on the telephone to conduct a very short interview. It should take approximately 30 minutes.

The interview will include questions about _____'s health status and any hospitalizations and nursing home stays he/she may have had since 1980. We would appreciate it if you have this information available when the interviewer calls.

This survey is authorized by Title 42, United States Code 242k. Your participation in the survey is completely voluntary. There are no penalties for refusing to answer any question.

As in the previous survey, any information you give will be kept confidential. No information that could be used to identify you or any individual will be released or published. Results of this study will be published only as statistical summaries.

Your cooperation is vital to the success of this study.

Sincerely yours,

Manning Feinleib, M.D., Dr.P.H.
Director

Enclosure



National Center for Health Statistics
3700 East-West Highway
Hyattsville, MD 20782

Dear Administrator:

The National Center for Health Statistics has joined with the National Institute on Aging to conduct the National Health and Nutrition Examination Followup Survey, to study the etiology of a number of chronic diseases.

A selected sample of the United States population participated in the first National Health and Nutrition Examination Survey (NHANES I) in 1971-75 and in its Initial Followup in 1982-84. The results of that survey have provided much needed information about the health needs and characteristics of the American people.

To further use the findings from the original survey, the National Center for Health Statistics is planning another brief interview of all the adults who took part in the study. We have contracted with Westat, a national research firm, to conduct the survey for us.

Recently, we learned _____, one of the participants in the survey, is living in your facility. We will need to interview Mr./Mrs. _____ in order to obtain the followup information. Within the next two weeks, a Westat interviewer will be contacting him/her by telephone to conduct a short interview. An initial letter has already been mailed to him/her as well.

This survey is authorized by Title 42, United States Code 242k. All information given will be kept confidential. No information that could be used to identify the individual or your institution will be released or published. Results of this study will be published only as statistical summaries.

If you have any questions concerning this survey, please feel free to contact Ms. Kathleen Parkes, toll free at (800) 638-8985.

Thank you in advance for your cooperation.

Sincerely yours,

Manning Feinleib, M.D., Dr.P.H.
Director



National Center for Health Statistics
3700 East-West Highway
Hyattsville, MD 20782

Dear Administrator:

The National Center for Health Statistics has joined with the National Institute on Aging to conduct the National Health and Nutrition Examination Followup Survey, to study the etiology of a number of chronic diseases.

A selected sample of the United States population participated in the first National Health and Nutrition Examination Survey (NHANES I) in 1971-75 and in its Initial Followup in 1982-84. The results of that survey have provided much needed information about the health needs and characteristics of the American people.

To further use the findings from the original survey, the National Center for Health Statistics is planning another brief interview of all the adults who took part in the study. We have contracted with Westat, a national research firm, to conduct the survey for us.

Recently, we learned _____, one of the participants in the survey, is living in your facility. We have already interviewed _____ in order to obtain the followup information. However, there were some questions which he/she could not answer concerning _____ health and functioning ability.

We would sincerely appreciate it if a member of your staff would be willing to answer a few questions concerning this resident so that complete information can be obtained. A Westat interviewer will be calling you within the next two weeks to arrange an appointment to collect the information.

This survey is authorized by Title 42, United States Code 242k. All information given will be kept confidential. No information that could be used to identify the individual or your institution will be released or published. Results of this study will be published only as statistical summaries.

If you have any questions concerning this survey, please feel free to contact Ms. Kathleen Parkes, toll free at (800) 638-8985.

Thank you in advance for your cooperation.

Sincerely yours,

Manning Feinleib, M.D., Dr.P.H.
Director

NHANES I EPIDEMIOLOGIC FOLLOWUP STUDY
CONTINUED FOLLOWUP OF THE ELDERLY
SUBJECT/PROXY - INCAPACITATED QUESTIONNAIRE

WESTAT ID: |__|__|_|_|_|_|_|_|_|_|_|

Hello, may I please speak to (RESPONDENT)?

- IF RESPONDENT NOT AVAILABLE, ASK: Can you suggest a convenient time when I could reach (him/her)? TERMINATE CONTACT AND RECORD RESULTS ON CALL RECORD.
- IF RESPONDENT NOT AT THIS TELEPHONE NUMBER, VERIFY NUMBER AND REDIAL.
- IF RESPONDENT AVAILABLE, CONTINUE.

My name is (YOUR NAME) and I am calling from Washington, D.C. on behalf of the United States Public Health Service with regard to the National Health and Nutrition Examination Survey. Recently you were sent a letter from the Public Health Service explaining that someone would contact you. Did you receive our letter?

YES 1
NO 2 (BOX 1)

I would like to conduct the interview now if it is convenient.

(It will take approximately 30 minutes. In order to evaluate my performance, my supervisor may monitor this interview.)

BOX 1

(IF RESPONDENT DID NOT RECEIVE LETTER, READ:)

Let me tell you what it says. Persons who participated in the National Health and Nutrition Examination Survey are being recontacted at this time. A very short interview will be conducted by telephone. Questions will be asked about illnesses, disabilities and hospitalizations. This study is authorized by the Public Health Service Act. The information you give me will be kept strictly confidential and will be used for statistical purposes only. The interview is completely voluntary and there are no penalties for refusing to answer any questions. (CHECK BOX:)

I would like to conduct the interview now if it is convenient.

(It will take approximately 30 minutes. In order to evaluate my performance, my supervisor may monitor this interview.)

PART A: BACKGROUND INFORMATION

TIME BEGAN: _____ AM
PM

First, I would like to ask you a few questions about (your/SUBJECT'S) household.

A-1 AND A-2 NOT ASKED THIS VERSION.

A-3. (Do you/Does SUBJECT) currently live in a private home or apartment, a nursing home or rest home, or (do you/does he/she) have some other arrangement?

PRIVATE HOUSE OR APARTMENT	1
NURSING OR CONVALESCENT OR REST HOME	2 (Q.A-6)
RETIREMENT HOME	3
BOARDING HOUSE, ROOMING HOUSE OR RENTED ROOM	4
FAMILY OR FOSTER CARE HOME	5
ANOTHER HEALTH FACILITY	6 (Q.A-6)
OTHER ARRANGEMENT (SPECIFY)	91 (Q.A-4)
<hr/>	
OTHER INSTITUTIUN (SPECIFY)	92 (Q.A-6)
.....	

A-4. How many people live in (your/his/her) household including (yourself/SUBJECT)?

ONE 01 (Q.A-5)

NUMBER OF PEOPLE: |__|__|

A-4a. What relationship to (you/SUBJECT) (is/are) the other person(s) who live(s) in (your/his/her) household?
[PROBE FOR SEX IF NOT OBVIOUS: Is (PERSON) male or female?]

PERSON #	SEX	RELATIONSHIP
1	__	__
2	__	__
3	__	__
4	__	__
5	__	__
6	__	__
7	__	__
8	__	__
9	__	__
10	__	__

SEX: 1 = MALE
2 = FEMALE

RELATIONSHIP: 1 = HUSBAND/WIFE
2 = FATHER/MOTHER
(INCLUDING IN-LAWS)
3 = GRANDPARENT
4 = SON/DAUGHTER
(INCLUDING IN-LAWS)
5 = GRANDCHILD
6 = BROTHER/SISTER
(INCLUDING IN-LAWS)
7 = AUNT/UNCLE/COUSIN
8 = OTHER RELATIVE
9 = FRIEND
10 = OTHER NON-RELATIVE

GO TO Q.A-8

A-5. How long (have you/has he/she) lived alone?

NUMBER OF YEARS: |__|__| (Q.A-8)

OR

NUMBER OF MONTHS: |__|__| (Q.A-8)

LESS THAN ONE MONTH 95 (Q.A-8)

A-6. These next questions are about the last household in which (you/he/she) lived. How many people lived in (your/his/her) household including (yourself/SUBJECT)?

ONE 01 (Q.A-7)

NUMBER OF PEOPLE: |__|__|

A-6a. What relationship to (you/SUBJECT) (was/were) the other person(s) who lived in (your/his/her) household? [PROBE FOR SEX IF NOT OBVIOUS: Is (PERSON) male or female?]

PERSON #	SEX	RELATIONSHIP
1	__	__
2	__	__
3	__	__
4	__	__
5	__	__
6	__	__
7	__	__
8	__	__
9	__	__
10	__	__

SEX: 1 = MALE
2 = FEMALE

RELATIONSHIP: 1 = HUSBAND/WIFE
2 = FATHER/MOTHER
(INCLUDING IN-LAWS)
3 = GRANDPARENT
4 = SON/DAUGHTER
(INCLUDING IN-LAWS)
5 = GRANDCHILD
6 = BROTHER/SISTER
(INCLUDING IN-LAWS)
7 = AUNT/UNCLE/COUSIN
8 = OTHER RELATIVE
9 = FRIEND
10 = OTHER NON-RELATIVE

GO TO Q.A-8

A-7. How long had (you/he/she) lived alone?

NUMBER OF YEARS: |__|__|

OR

NUMBER OF MONTHS: |__|__|

LESS THAN ONE MONTH 95

A-8. [VERIFY IF ALREADY KNOWN:]
 (Are you/Is he/she) currently married, widowed, divorced, separated, or (have you/has he/she) never been married?

- MARRIED 1
- WIDOWED 2
- DIVORCED 3
- SEPARATED 4
- NEVER MARRIED 5

A-9. [READ ONLY IF CHECKED ():]
 Which of these categories best describes (you/SUBJECT) – Alaskan Native, American Indian, Asian, Pacific Islander, Black or White? Are you of Hispanic origin or descent?

- ALASKAN NATIVE OR AMERICAN INDIAN - NOT HISPANIC 1
- ASIAN/PACIFIC ISLANDER - NOT HISPANIC 2
- BLACK - NOT HISPANIC 3
- WHITE - NOT HISPANIC 4
- ALASKAN NATIVE OR AMERICAN INDIAN - HISPANIC 5
- ASIAN/PACIFIC ISLANDER - HISPANIC 6
- BLAKC - HISPANIC 7
- WHITE - HISPANIC 8
- OTHER (SPECIFY) 91

TIME ENDED: _____ AM
 PM

PART B: MEDICAL CONDITIONS

TIME BEGAN: _____ AM
 _____ PM

B-1. [IF SPEAKING TO SUBJECT, ASK:] Would you say that your health in general is excellent, very good, good, fair or poor?

- EXCELLENT 1
- VERY GOOD 2
- GOOD 3
- FAIR 4
- POOR 5

B-2. Did a doctor ever tell (you/SUBJECT) that (you have/he/she has) arthritis?

- YES 1
- NO 2 (Q.B-8)
- DK 8 (Q.B-8)

B-3. There are different kinds of arthritis. Did a doctor ever tell (you/him/her) which kind (you have/he/she has)?

- YES 1
- NO 2 (Q.B-5)
- DK 8 (Q.B-5)

B-4. What type of arthritis (do you/does he/she) have? (READ CATEGORIES IF NECESSARY.)

	<u>YES</u>	<u>NO</u>	<u>DK</u>
RHEUMATOID	1	2	8
OSTEOARTHRITIS	1	2	8
LUPUS	1	2	8
GOUT	1	2	8
DEGENERATIVE	1	2	8
SOME OTHER TYPE (SPECIFY)	1	2	8

B-5. (Have you/Has he/she) ever had an x-ray for (your/his/her) arthritis, that is, an x-ray of (your/his/her) joints?

- YES 1
- NO 2 (Q.B-8)

B-6. How long ago did (you/he/she) first have an x-ray for arthritis? [PROBE WITH CATEGORIES IF NECESSARY.]

LESS THAN ONE YEAR AGO 1
1 TO 5 YEARS AGO 2
5 TO 10 YEARS AGO 3
MORE THAN 10 YEARS AGO 4
DK 8

B-7. How long ago did (you/he/she) last have an x-ray for arthritis? [PROBE WITH CATEGORIES IF NECESSARY.]

LESS THAN ONE YEAR AGO 1
1 TO 5 YEARS AGO 2
5 TO 10 YEARS AGO 3
MORE THAN 10 YEARS AGO 4
DK 8

B-8. Did a doctor ever tell (you/him/her) that (you have/he/she has) gout?

YES 1
NO 2 (Q.B-13a)
DK 8 (Q.B-13a)

B-9. What year (were you/was he/she) first told that (you/he/she) had gout? [DO NOT PROBE A "DON'T KNOW" RESPONSE.]

YEAR: 19 |__|__| (Q.B-11)
DK 98

B-10. Can you remember if it was less than a year ago, between 1 and 5 years ago, between 5 and 10 years ago, or 10 or more years ago?

LESS THAN ONE YEAR AGO 1
1 TO 5 YEARS AGO 2
5 TO 10 YEARS AGO 3
MORE THAN 10 YEARS AGO 4
DK 8

B-11. What year did (you/he/she) have (your/his/her) last episode of gout? [DO NOT PROBE A "DON'T KNOW" RESPONSE.]

YEAR: 19 |__|__| (Q.B-13)
§ HAD ONLY ONE EPISODE OF GOUT 95 (Q.B-13)
DK 98

B-12. Can you remember if it was less than a year ago, between 1 and 5 years ago, between 5 and 10 years ago, or 10 or more years ago?

LESS THAN ONE YEAR AGO 1
 1 TO 5 YEARS AGO 2
 5 TO 10 YEARS AGO 3
 MORE THAN 10 YEARS AGO 4
 DK 8

B-13. (Have you/Has he/she) ever had an attack of arthritis that the doctor says was caused by gout?

YES 1
 NO 2
 DK 8

B-13a. [IF YES CODED IN Q.B-2 AND/OR Q.B-8, ASK:]

Since (1980/1970), (were you/was he/she) hospitalized for (your/his/her) (arthritis/gout/arthritis or gout)?
 [PROBE: (Were you/Was he/she) there for more than a day?]

YES 1 (CHART)
 NO 2

INTERVIEWER INSTRUCTIONS: FOR EACH CONDITION IN Q.B-14 THROUGH Q.B-57, WITHIN EACH SECTION READ FIRST CHECKED () ITEM. THEN, FOLLOW APPROPRIATE SKIPS.

 B-14.

[IF SUBJECT, ASK:] In (MONTH/YEAR), you told us that (you/he/she) previously had a heart attack, (sometimes called coronary thrombosis or myocardial infarction). Have you had another heart attack since then?

YES 1 (Q.B-18)
 NO 2 (Q.B-19b)
 DISCREPANCY 96 (Q.B-15)
 DK 8 (Q.B-19b)

[IF PROXY, ASK:] Since (MONTH/YEAR) has (SUBJECT) had a heart attack, (sometimes called coronary thrombosis or myocardial infarction)?

YES 1 (Q.B-18)
 NO 2 (Q.B-19b)
 DK 8 (Q.B-19b)

 B-15.

Did a doctor ever tell (you/him/her) that (you/he/she) had a heart attack, (sometimes called coronary thrombosis or myocardial infarction)?

YES 1
 NO 2 (Q.B-19b)
 DK 8 (Q.B-19b)

B-16. In what year (were you/was he/she) first told that (you/he/she) had a heart attack, (coronary thrombosis or myocardial infarction)?

YEAR: 19 |__|__|
DK 98

B-17. (Have you/Has he/she) had an additional heart attack since then?

YES 1
NO 2 (Q.B-19a)
DK 8 (Q.B-19a)

B-18. In what year was that heart attack? [PROBE: Did (you/SUBJECT) have any others since then? PROBE FOR ALL YEARS.]

YEAR: 19 |__|__|
YEAR: 19 |__|__|
YEAR: 19 |__|__|
YEAR: 19 |__|__|
DK 98

B-19a. Since (1980/1970), (were you/was he/she) hospitalized for (your/his/her) heart attack? [PROBE: (Were you/Was he/she) there for more than a day?]

YES 1 (CHART)
NO 2

B-19b. Since (1980/1970), (were you/was he/she) hospitalized for any type of heart condition (other than a heart attack)? [PROBE: (Were you/Was he/she) there for more than a day?]

YES 1 (CHART)
NO 2

[IF CHECKED () OR IF Q.B-15 OR Q.B-19b = YES, ASK:]

|__|

B-20a. (Have you/Has he/she) ever had coronary by-pass surgery?

YES 1
NO 2 (Q.B-20c)

B-20b. Since (1980/1970), (were you/was he/she) hospitalized for coronary by-pass surgery? (PROBE: Were you/Was he/she) there for more than a day?]

YES 1 (CHART)
NO 2

B-20c. (Have you/Has he/she) ever had a pacemaker replacement, insertion or repair?

YES 1
NO 2 (Q.B-21)

B-20d. Since (1980/1970), (were you/was he/she) hospitalized for pacemaker replacement, insertion or repair?
[PROBE: (Were you/Was he/she) there for more than a day?]

YES 1 (CHART)
NO 2

|__|
B-21.

[IF SUBJECT, ASK:] In (MONTH/YEAR), you told us that you previously had a small stroke, sometimes known as TIA (transient ischemic attack). Have you had an additional small stroke since then?

YES 1 (Q.B-25)
NO 2 (Q.B-27)
DISCREPANCY 96 (Q.B-22)
DK 8 (Q.B-27)

[IF PROXY, ASK:] Since (MONTH/YEAR) has (SUBJECT) had a small stroke, sometimes known as TIA (transient ischemic attack)?

YES 1 (Q.B-25)
NO 2 (Q.B-27)
DK 8 (Q.B-27)

|__|
B-22.

Did a doctor ever tell (you/him/her) that (you/he/she) had a small stroke sometimes known as a TIA (transient ischemic attack)?

YES 1
NO 2 (Q.B-27)
DK 8 (Q.B-27)

B-23. In what year (were you/was he/she) first told that (you/he/she) had a small stroke?

YEAR: 19 |__|__|
DK 98

B-24. (Have you/Has he/she) had an additional small stroke since then?

YES 1
NO 2 (Q.B-26)
DK 8 (Q.B-26)

B-25. In what year was that small stroke? [PROBE: Did (you/SUBJECT) have any others since then? PROBE FOR ALL YEARS.]

YEAR: 19 |__|__|
YEAR: 19 |__|__|
YEAR: 19 |__|__|
YEAR: 19 |__|__|
DK 98

B-26. Since (1980/1970), (were you/was he/she) hospitalized for a small stroke? [PROBE: (Were you/Was he/she) there for more than a day?]

YES 1 (CHART)
NO 2

|__|
B-27. [IF SUBJECT, ASK:] In (MONTH/YEAR), you told us that you previously had a stroke. Have you had an additional stroke since then?

YES 1 (Q.B-31)
NO 2 (Q.B-33)
DISCREPANCY 96 (Q.B-28)
DK 8 (Q.B-33)

[IF PROXY, ASK:] Since (MONTH/YEAR) has (SUBJECT) had a stroke (sometimes called a CVA)?

YES 1 (Q.B-31)
NO 2 (Q.B-31)
DK 8 (Q.B-34)

|__|
B-28. Did a doctor ever tell (you/him/her) that (you/he/she) had a stroke (sometimes called a CVA)?

YES 1
NO 2 (Q.B-34)
DK 8 (Q.B-34)

B-29. In what year (were you/was he/she) first told that (you/he/she) had a stroke?

YEAR: 19 |__|__|
DK 98

B-30. (Have you/Has he/she) had an additional stroke since then?

YES 1
NO 2 (Q.B-32)
DK 8 (Q.B-32)

B-31. In what year was that stroke? [PROBE: Did (you/SUBJECT) have any others since then? PROBE FOR ALL YEARS.]

YEAR: 19 |__|__|
 YEAR: 19 |__|__|
 DK 98

B-32. Since (1980/1970), (were you/was he/she) hospitalized for a stroke? [PROBE: (Were you/Was he/she) there for more than a day?]

YES 1 (CHART)
 NO 2

B-33. (Do you/Does SUBJECT) now have any problems as a result of (your/his/her) stroke? That is, (do you/does he/she) have ...

	<u>YES</u>	<u>NO</u>
Trouble with (your/his/her) arm and leg being weak or hard to use?	1	2
Trouble walking due to (your/his/her) stroke?	1	2
Trouble with speech?	1	2
Some other trouble as a result of (your/his/her) stroke? (SPECIFY)	1	2

|__|
 B-34. [IF SUBJECT, ASK:] In (MONTH/YEAR), you told us that you previously had diabetes or sugar diabetes. Are you now taking medication for your diabetes?

YES 1 (Q.B-37)
 NO 2 (Q.B-39)
 DISCREPANCY 96 (Q.B-35)
 DK 8 (Q.B-39)

[IF PROXY, ASK:] Is (SUBJECT) now taking medication for diabetes?

YES 1 (Q.B-37)
 NO 2 (Q.B-39)
 DK 8 (Q.B-39)

|__|
 B-35. Did a doctor ever tell (you/him/her) that (you/he/she) had diabetes or sugar diabetes?

YES 1
 NO 2 (Q.B-40)
 DK 8 (Q.B-40)

B-36. In what year (were you/was he/she) first told that (you/he/she) had diabetes or sugar diabetes?

YEAR: 19 |__|__|
 DK 98

B-37. (Are you/Is he/she) now taking insulin injections for (your/his/her) diabetes?

YES 1 (Q.B-39)
NO 2
DK 8

B-38. (Are you/Is he/she) now taking oral medication for (your/his/her) diabetes?

YES 1
NO 2

B-39. Since (1980/1970), (were you/was he/she) hospitalized for (your/his/her) diabetes? [PROBE: (Were you/Was he/she) there for more than a day?]

YES 1 (CHART)
NO 2

|__|
B-40. [IF SUBJECT, ASK:] In (MONTH/YEAR), you told us that you had high blood pressure. Has the doctor ever prescribed medicine for your high blood pressure?

YES 1 (Q.B-44)
NO 2 (Q.B-45)
DISCREPANCY 96 (Q.B-41)
DK 8 (Q.B-45)

[IF PROXY, ASK:] Has the doctor ever prescribed medicine for (SUBJECT) for high blood pressure?

YES 1 (Q.B-44)
NO 2 (Q.B-45)
DK 8 (Q.B-45)

|__|
B-41. (Have you/Has SUBJECT) ever been told by the doctor that (you/he/she) had high blood pressure or hypertension?

YES 1
NO 2 (Q.B-46)
DK 8 (Q.B-46)

B-42. In what year (were you/was he/she) first told that (you/he/she) had high blood pressure or hypertension?

YEAR: 19 |__|__|
DK 98

B-43. Has the doctor ever prescribed medicine for (your/his/hër) high blood pressure?

YES 1
NO 2 (Q.B-45)
DK 8 (Q.B-45)

B-44. (Do you/Does he/she) currently take this medicine regularly?

YES 1
NO 2
DK 8

B45. Since (1980/1970), (were you/was he/she) hospitalized for high blood pressure? [PROBE: (Were you/Was he/she) there for more than a day?]

YES 1 (CHART)
NO 2

|__|
B-46. [IF SUBJECT, ASK:] In (MONTH/YEAR), you told us that you had cancer. Have you had any other type of cancer diagnosed since then?

YES 1 (Q.B-49)
NO 2 (Q.B-48)
DISCREPANCY 96 (Q.B-47)
DK 8 (Q.B-48)

[IF PROXY, ASK:] Since (MONTH/YEAR) has (SUBJECT) had any type of cancer diagnosed?

YES 1 (Q.B-49)
NO 2 (Q.B-48)
DK 8 (Q.B-48)

|__|
B-47. Did a doctor ever tell (you/him/her) that (you/he/she) had cancer of any sort?

YES 1 (Q.B-49)
NO 2 (Q.B-52)
DK 8 (Q.B-52)

B-48. Since 1980, (have you/has he/she) been hospitalized for any cancer condition? [PROBE: (Were you/Was he/she) there for more than a day?]

YES 1 (CHART. THEN
GO TO Q.B-52)
NO 2 (Q.B-52)

	1ST DIAGNOSIS	2ND DIAGNOSIS	3RD DIAGNOSIS
B-49. Where was the cancer or what type of cancer was it? [PROBE: (Have you/ Has he/she) had any other cancer diagnosed?]	LUNG 1 COLON 2 BREAST 3 SKIN (MELANOMA) 4 SKIN (NON-MELANOMA) 5 UTERUS 6 PROSTATE 7 STOMACH 8 LEUKEMIA 9 OTHER (SPECIFY) 91 SITE: _____ <u>OR</u> TYPE: _____	LUNG 1 COLON 2 BREAST 3 SKIN (MELANOMA) 4 SKIN (NON-MELANOMA) 5 UTERUS 6 PROSTATE 7 STOMACH 8 LEUKEMIA 9 OTHER (SPECIFY) 91 SITE: _____ <u>OR</u> TYPE: _____	LUNG 1 COLON 2 BREAST 3 SKIN (MELANOMA) 4 SKIN (NON-MELANOMA) 5 UTERUS 6 PROSTATE 7 STOMACH 8 LEUKEMIA 9 OTHER (SPECIFY) 91 SITE: _____ <u>OR</u> TYPE: _____
B-50. In what year (were you/ was he/she) first told that (you/ he/she) had (CANCER)?	YEAR: 19 __ __ DK 98	YEAR: 19 __ __ DK 98	YEAR: 19 __ __ DK 98
B-51. Since (1980/ 1970), (were you/was he/ she) hospitalized for (CANCER)? [PROBE: (Were you/ Was he/she) there for more than a day?]	YES 1 (CHART) NO 2	YES 1 (CHART) NO 2	YES 1 (CHART) NO 2

|__|

B-52. [IF SUBJECT, ASK:] In (MONTH/YEAR), you told us that you previously had a broken or fractured hip. Have you had another fractured hip since then?

YES	1 (Q.B-56)
NO	2 (Q.B-58)
DISCREPANCY	96 (Q.B-53)
DK	8 (Q.B-58)

[IF PROXY, ASK:] Since (MONTH/YEAR) has (SUBJECT) had a broken or fractured hip?

YES	1 (Q.B-56)
NO	2 (Q.B-58)
DK	8 (Q.B-58)

|__|

B-53. (Have you/Has SUBJECT) ever been told by the doctor that (you/he/she) had a broken or fractured hip?

YES	1
NO	2 (Q.B-58)
DK	8 (Q.B-58)

B-54. In what year (were you/was he/she) first told that (you/he/she) had a broken or fractured hip?

YEAR:	19 __ __
DK	98

B-55. (Have you/Has he/she) had an additional fractured hip since then?

YES	1
NO	2 (Q.B-57)
DK	8 (Q.B-57)

B-56. In what year did (you/he/she) have that break or fracture of (your/his/her) hip? [PROBE: Did (you/SUBJECT) have any others since then? PROBE FOR ALL YEARS.]

YEAR:	19 __ __
YEAR:	19 __ __
YEAR:	19 __ __
YEAR:	19 __ __
DK	98

B-57. Since (1980/1970), (were you/was he/she) hospitalized for a broken or fractured hip? [PROBE: (Were you/Was he/she) there for more than a day?]

YES	1 (CHART)
NO	2

B-58. Since 1970, (have you/has SUBJECT) broken or fractured any bones (other than a hip)?

YES 1
 NO 2 (Q.B-62)
 DK 8 (Q.B-62)

		1ST BREAK/FRACTURE	2ND BREAK/FRACTURE	3RD BREAK/FRACTURE
B-59. Which bone? [PROBE: (Have you/ Has he/she) broken or fractured any other bones?]	WRIST	1	WRIST	1
	LEG, KNEE, ANKLE, FOOT	2	LEG, KNEE, ANKLE, FOOT	2
	ARM, ELBOW, SHOULDER	3	ARM, ELBOW, SHOULDER	3
	HAND	4	HAND	4
	BACK	5	BACK	5
	RIBS	6	RIBS	6
	PELVIS	7	PELVIS	7
	OTHER BONE (SPECIFY)	91	OTHER BONE (SPECIFY)	91
	_____		_____	
	_____		_____	
B-60. In what year (was this (<u>BONE</u>) break or fracture? (PROBE FOR ALL YEARS)	YEAR: 19 __ __	YEAR: 19 __ __	YEAR: 19 __ __	
	YEAR: 19 __ __	YEAR: 19 __ __	YEAR: 19 __ __	
	YEAR: 19 __ __	YEAR: 19 __ __	YEAR: 19 __ __	
	YEAR: 19 __ __	YEAR: 19 __ __	YEAR: 19 __ __	
	DK 98	DK 98	DK 98	

B-61. Since 1980, (where you/was he/she) hospitalized for any broken or fractured bones (other than a hip)?
 [PROBE: (Were you/Was he/she) there for more than a day?]

YES 1 (CHART)
 NO 2

B-62. Since (1980/1970), (have you/has he/she) been hospitalized for pneumonia or the flu? [PROBE: (Were you/Was he/she) there for more than a day?]

YES 1 (CHART)
NO 2

B-63. (Aside from the hospitalizations you have mentioned,) (Have you/Has SUBJECT) been hospitalized for any surgical procedure or operation since (1980/1970)? [PROBE: (Were you/Was he/she) there for more than a day?]

YES 1 (CHART)
NO 2

B-64 AND B-65 NOT ASKED THIS VERSION.

B-66. [I have recorded that (you were/SUBJECT was) hospitalized (READ DATES, CONDITIONS AND FACILITY NAMES FROM CHART).]

Now, I would like you to think back over the time between (1980/1970) and the present. (You/He/She) would have been about (AGE) in (1980/1970). (Have you/Has he/she) stayed in a hospital for any (other) reason including tests or for observation since (you were/he/she was) (AGE)? [PROBE: (Were you/Was he/she) there for more than a day?]

YES 1
 NO 2 (Q.B-69)

	CONDITION # 1	CONDITION # 2	CONDITION # 3
B-67. For what condition was that? (PROBE: Did (you/he/she) have any other hospitalizations since (1980/1970)?] [GO TO CHART AFTER CODING CONDITION.]	TESTS AND/OR OBSERVATION 1 DIGESTIVE PROBLEMS 2 RESPIRATORY/ BREATHING PROBLEMS 3 INFECTIONS 4 OTHER (SPECIFY) 91 _____ _____ (CHART)	TESTS AND/OR OBSERVATION 1 DIGESTIVE PROBLEMS 2 RESPIRATORY/ BREATHING PROBLEMS 3 INFECTIONS 4 OTHER (SPECIFY) 91 _____ _____ (CHART)	TESTS AND/OR OBSERVATION 1 DIGESTIVE PROBLEMS 2 RESPIRATORY/ BREATHING PROBLEMS 3 INFECTIONS 4 OTHER (SPECIFY) 91 _____ _____ (CHART)

B-68. NOT ASKED THIS VERSION.

B-69. Since (1980/1970), (have you/has SUBJECT) ever stayed in a rest home, a nursing home, a mental health facility, or anything like that? [PROBE: (Were you/Was he/she) there for more than a day?]

YES 1
 NO 2 (Q.B-77)

	ADMISSION# 1	ADMISSION# 2	ADMISSION# 3
B-70. To what type of place was the (most recent/this admission?)	REST HOME 1 NURSING HOME 2 MENTAL HEALTH FACILITY 3 HEALTH CARE REHABILITATION CENTER 4 OTHER (SPECIFY) 91	REST HOME 1 NURSING HOME 2 MENTAL HEALTH FACILITY 3 HEALTH CARE REHABILITATION CENTER 4 OTHER (SPECIFY) 91	REST HOME 1 NURSING HOME 2 MENTAL HEALTH FACILITY 3 HEALTH CARE REHABILITATION CENTER 4 OTHER (SPECIFY) 91
B-71. Did (you/he/she) enter the (TYPE OF FACILITY) directly from (your/his/her) own home, from a hospital, or from some other place?	OWN HOME 01 HOSPITAL 02 NURSING HOME 03 REST HOME 04 MENTAL HEALTH FACILITY 05 HEALTH CARE REHABILITATION CENTER 06 OTHER (SPECIFY) 91	OWN HOME 01 HOSPITAL 02 NURSING HOME 03 REST HOME 04 MENTAL HEALTH FACILITY 05 HEALTH CARE REHABILITATION CENTER 06 OTHER (SPECIFY) 91	OWN HOME 01 HOSPITAL 02 NURSING HOME 03 REST HOME 04 MENTAL HEALTH FACILITY 05 HEALTH CARE REHABILITATION CENTER 06 OTHER (SPECIFY) 91
B-72. In what year did (you/he/she) enter the (TYPE OF FACILITY)?	YEAR: 19 __ __	YEAR: 19 __ __	YEAR: 19 __ __

	ADMISSION# 1	ADMISSION# 2	ADMISSION# 3	
B-73. There are many reasons why people enter a (TYPE OF FACILITY). Please tell me if (you/SUBJECT) entered the (TYPE OF FACILITY) for any of the following reasons. (CIRCLE YES OR NO FOR EACH.)	YES NO Required skilled nursing care? 1 2 Recuperation from surgery? 1 2 Needed help with bathing, eating, or dressing? 1 2 Required special medical or physical therapy? 1 2 Too confused to live independently? 1 2	YES NO Required skilled nursing care? 1 2 Recuperation from surgery? 1 2 Needed help with bathing, eating, or dressing? 1 2 Required special medical or physical therapy? 1 2 Too confused to live independently? 1 2	YES NO Required skilled nursing care? 1 2 Recuperation from surgery? 1 2 Needed help with bathing, eating, or dressing? 1 2 Required special medical or physical therapy? 1 2 Too confused to live independently? 1 2	
	B-74. Please tell me the name of the disease or condition that (you/he/she) had at the time of admission that affected (your/his/her) ability to live independently? (CIRCLE ALL THAT APPLY)	ALCOHOLISM 01	ALCOHOLISM 01	ALCOHOLISM 01
		ALZHEIMER'S DISEASE 02	ALZHEIMER'S DISEASE 02	ALZHEIMER'S DISEASE 02
		ARTHRITIS 03	ARTHRITIS 03	ARTHRITIS 03
		CANCER 04	CANCER 04	CANCER 04
DEPRESSION 05		DEPRESSION 05	DEPRESSION 05	
DISRUPTIVE BEHAVIOR 06		DISRUPTIVE BEHAVIOR 06	DISRUPTIVE BEHAVIOR 06	
FRACTURE OTHER THAN HIP 07		FRACTURE OTHER THAN HIP 07	FRACTURE OTHER THAN HIP 07	
FRAIL/OLD AGE 08		FRAIL/OLD AGE 08	FRAIL/OLD AGE 08	
HARDENING OF THE ARTERIES OR ARTERIOSCLEROSIS 09		HARDENING OF THE ARTERIES OR ARTERIOSCLEROSIS 09	HARDENING OF THE ARTERIES OR ARTERIOSCLEROSIS 09	
HEART ATTACK (MI) 10		HEART ATTACK (MI) 10	HEART ATTACK (MI) 10	
HIP FRACTURE 11		HIP FRACTURE 11	HIP FRACTURE 11	
INCONTINENCE 12		INCONTINENCE 12	INCONTINENCE 12	
MENTAL ILLNESS 13		MENTAL ILLNESS 13	MENTAL ILLNESS 13	
NO MEDICAL CONDITION 14		NO MEDICAL CONDITION 14	NO MEDICAL CONDITION 14	
OSTEOPOROSIS (FRAGILE OR SOFT BONES) 15		OSTEOPOROSIS (FRAGILE OR SOFT BONES) 15	OSTEOPOROSIS (FRAGILE OR SOFT BONES) 15	
SENILITY 16		SENILITY 16	SENILITY 16	
STROKE 17		STROKE 17	STROKE 17	
OTHER DISEASE OR CONDITION (SPECIFY) 91	OTHER DISEASE OR CONDITION (SPECIFY) 91	OTHER DISEASE OR CONDITION (SPECIFY) 91		
_____	_____	_____		
_____	_____	_____		
_____	_____	_____		

	ADMISSION# 1	ADMISSION# 2	ADMISSION# 3
B-75. How long did (you/he/she) stay? (GO TO CHART AFTER CODING LENGTH OF STAY.)	#: __ __ OF WKS 1 MOS 2 YRS 3 STILL THERE 94 LESS THAN ONE WEEK 95 (CHART)	#: __ __ OF WKS 1 MOS 2 YRS 3 STILL THERE 94 LESS THAN ONE WEEK 95 (CHART)	#: __ __ OF WKS 1 MOS 2 YRS 3 STILL THERE 94 LESS THAN ONE WEEK 95 (CHART)
B-76. Since (1980/1970) were there other admissions to a rest home, a nursing home, a mental health facility, a rehabilitation center or any place like that?	YES 1 (Q.B-70) NO 2	YES 1 (Q.B-70) NO 2	YES 1 (Q.B-70) NO 2

B-77. [IF Q.A-3 IS NOT CODED 2, ASK:]

What has been happening to (your/his/her) health during the past 12 months? Has it improved, remained the same, gradually worsened, or suddenly worsened?

- IMPROVED 1
- REMAINED THE SAME 2
- GRADUALLY WORSENERD 3 (PART C)
- SUDDENLY WORSENERD 4
- OTHER 5

B-78. [IF Q.A-3 IS CODED 2, ASK:]

During the month before (your/SUBJECT'S) admission to the nursing home, was there a significant change in (your/his/her) health?

- YES 1
- NO 2

B-79. During the 12 months prior to that, what was happening to (your/his/her) health? Had it improved, remained the same, gradually worsened, or suddenly worsened?

- IMPROVED 1
- REMAINED THE SAME 2
- GRADUALLY WORSENERD 3
- SUDDENLY WORSENERD 4
- OTHER 5

TIME ENDED: _____ AM
PM

PART C: ACTIVITIES OF DAILY LIVING

TIME BEGAN: _____ AM
PM

NURSING HOME INSTRUCTIONS:	CIRCLE ONE:
RESPONDENT CAN ANSWER THIS SECTION	1
RESPONDENT <u>CANNOT</u> ANSWER THIS SECTION	
ASK OF NURSING HOME STAFF	2 (RECORD NAME, ADDRESS AND TELEPHONE NUMBER ON IS. THEN, GO TO PART D.)

These next questions ask about physical problems you may have. First . . .

C-1. (Do you/Does SUBJECT) usually have to stay in bed for most of the day?

YES 1
NO 2 (Q.C-2a)

C-2. How long (have you/has he/she) had to stay in bed?

NUMBER OF MONTHS: |__|__| GO TO C-3a
OR
NUMBER OF YEARS: |__|__| AND ASK *
QUESTIONS ONLY
LESS THAN ONE MONTH 95

C-2a. (Do you/Does he/she) have any paralysis or other problem that prevents the use of one or more of (your/his/her) limbs?

YES 1
NO 2 (Q.C-3a)

C-2b. Is this due to . . .

	<u>YES</u>	<u>NO</u>
a. Paralysis?	1	2
b. Amputation?	1	2
c. Severe arthritis?	1	2
d. Some other reason?	1	2
(SPECIFY)		

C-2c. [IF YES TO Q.C-2ba, ASK:]
Which limbs are paralyzed?

	<u>YES</u>	<u>NO</u>
a. RIGHT HAND/ARM	1	2
b. LEFT HAND/ARM	1	2
c. RIGHT FOOT/LEG	1	2
d. LEFT FOOT/LEG	1	2

C-2d. [IF YES TO Q.C-2bb, ASK:]
Which limbs have been amputated?

	<u>YES</u>	<u>NO</u>
a. RIGHT HAND/ARM	1	2
b. LEFT HAND/ARM	1	2
c. RIGHT FOOT/LEG	1	2
d. LEFT FOOT/LEG	1	2

C-2e. [IF YES TO Q.C-2bc OR C-2bd, ASK:]
Which limbs are involved?

	<u>YES</u>	<u>NO</u>
a. RIGHT HAND/ARM	1	2
b. LEFT HAND/ARM	1	2
c. RIGHT FOOT/LEG	1	2
d. LEFT FOOT/LEG	1	2

INTERVIEWER: REVIEW Q.C-2c, Q.C-2d, AND Q.C-2e AND CIRCLE ONE:

- | | |
|--|------------------------------------|
| ALL CATEGORIES IN Q.C-2c, Q.C-2d
OR Q.C-2e ARE CODED YES | 1 (PART D) |
| AT LEAST ONE "c" CATEGORY <u>AND</u> ONE
"d" CATEGORY IS CODED IN Q.C-2c,
Q.C-2d AND/OR Q.C-2e | 2 (ASK * AND **
QUESTIONS ONLY) |
| ALL OTHERS | 3 (Q.C-3a) |

INTERVIEWER INSTRUCTIONS: ASK Q.C-3 THROUGH Q.C-28. IF ANY RESPONSE TO b = 3 OR 4 OR ANY RESPONSE TO a = 3, ASK Q.C-3c/Q.C-3d THROUGH Q.C-28c/Q.C-28d. IF c OR d = YES (USES HELP EITHER FROM ANOTHER PERSON OR AN AID) ASK Q.C-3e THROUGH Q.C-28e WHERE INDICATED.

a.		b.			
I am going to read a list of activities. Please tell me if (you have/ <u>SUBJECT</u> has) any difficulty doing these things when (you are/ <u>SUBJECT</u> is) by (yourself/himself/herself) and not using an aid. [PROBE, IF NECESSARY: (Do you/ Does he/she) have any difficulty when (you/he/she (ACTIVITY)?)]		[IF YES (CODE 1) IN a, ASK:] (Do you/Does <u>SUBJECT</u>) have some difficulty, much difficulty, or (are you/is he/she) unable to do this?			
[ENTER ONE CODE FOR EACH ACTIVITY] 1 = YES (DIFFICULTY): ASK b 2 = NO DIFFICULTY 3 = NEVER DOES WITHOUT HELP 4 = NEVER DOES ACTIVITY 5 = INAPPROPRIATE ACTIVITY		SOME DIFFI- CULTY	MUCH DIFFI- CULTY	UNABLE TO DO	DK
**	C-3. Dress (yourself/himself/herself), including tying shoes, working zippers and doing buttons? <input type="text"/>	2	3	4	8
	C-4. NOT ASKED THIS VERSION.				
**	C-5. Stand up from an armless straight chair (such as a dining room chair)? <input type="text"/>	2	3	4	8
**	C-6. Get into and out of bed? <input type="text"/>	2	3	4	8
**	C-7. Prepare meals? <input type="text"/>	2	3	4	8
*	C-8. Cut (your/his/her) meat? <input type="text"/>	2	3	4	8
*	C-9. Lift a full cup or glass to (your/his/her) mouth? <input type="text"/>	2	3	4	8
*	C-10. Open a new milk carton? <input type="text"/>	2	3	4	8
	C-11. Walk a quarter mile (that is, two or three blocks)? <input type="text"/> (IF CODE 2, GO TO Q.C13)	2 (Q.C13)	3	4	8
**	C-12. Walk from one room to another (on the same floor)? <input type="text"/>	2	3	4	8
**	C-13. Walk up and down at least two steps? <input type="text"/>	2	3	4	8
	C-14. NOT ASKED THIS VERSION.				
**	C-15. Get in and out of the bathtub? <input type="text"/>	2	3	4	8
**	C-16. Wash and dry (your/his/her) whole body? <input type="text"/>	2	3	4	8
**	C-17. Get on and off the toilet? <input type="text"/>	2	3	4	8
*	C-18. Comb (your/his/her) hair? <input type="text"/>	2	3	4	8
**	C-19. Reach and get down a 5 lb. object (bag of sugar) from just above (your/his/her) head? <input type="text"/>	2	3	4	8
	C-20. Bend down and pick up clothing from the floor? <input type="text"/>	2	4	8	
	C-21. NOT ASKED THIS VERSION.				
**	C-22. Open jars which have been previously opened? <input type="text"/>	2	3	4	8
*	C-23. Use a pen or pencil to write with? <input type="text"/>	2	3	4	8
**	C-24. Get in and out of a car? <input type="text"/>	2	3	4	8
	C-25. Run errands and shop? <input type="text"/>	2	3	4	8
	C-26. Do light chores (such as vacuuming)? <input type="text"/>	2	3	4	8
	C-27. Lift and carry a full bag of groceries? <input type="text"/>	2	3	4	8
	C-28. Do heavy chores around the house or yard (such as washing windows, walls or floors)? <input type="text"/>	2	3	4	8

BOX E

INTERVIEWER: REVIEW C-3a/C-3b THROUGH C-28a/C-28b AND CIRCLE ONE:

ANY RESPONSE IN Q.C-3a THROUGH Q.C-28a = 3 1 (Q.C-3c)
 ANY RESPONSE IN Q.C-3b THROUGH Q.C-28b = 3 OR 4 2 (Q.C-3c)
 ALL RESPONSES, Q.C-3b THROUGH Q.C-28b = BLANK, 2, OR 8 3 (PART D)

[IF CODE 3 IN a, ASK:] You said that you never (ACTIVITY) without help. [IF R IS SUBJECT AND CODE 3 OR 4 IN b, ASK:] You said that you (have difficulty/are unable to) (ACTIVITY) by yourself. [IF R IS PROXY AND CODE 3 OR 4 IN b, ASK:] You said that (he/she) (has difficulty/Is unable to) (ACTIVITY) by (himself/herself).				e.				
				[ASK ONLY IF HAVE HELP:] With help how much difficulty (do you/does SUBJECT) have (doing this activity)? (Do you/Does he/she) have no difficulty, some difficulty, much difficulty, or (are you/is he/she) unable to do it?				
c. (Do you/Does he/she) have help from another person?*		d. (Do you/Does he/she) have help from a mechanical aid or device, such as a cane?		NO DIFFI- CULTY	SOME DIFFI- CULTY	MUCH DIFFI- CULTY	UNABLE TO DO	
YES	NO	YES	NO					
C-3.	1	2	1	2	1	2	3	4
C-4.								
C-5.	1	2	1	2	1	2	3	4
C-6.	1	2	1	2	1	2	3	4
C-7.	1	2	1	2	1	2	3	4
C-8.	1	2	1	2	1	2	3	4
C-9.	1	2	1	2	1	2	3	4
C-10.	1	2	1	2	1	2	3	4
C-11.	1	2	1	2	1	2	3	4
C-12.	1	2	1	2	1	2	3	4
C-13.	1	2	1	2	1	2	3	4
C-14.								
C-15.	1	2	1	2	1	2	3	4
C-16.	1	2	1	2	1	2	3	4
C-17.	1	2	1	2	1	2	3	4
C-18.	1	2	1	2	1	2	3	4
C-19.	1	2	1	2	1	2	3	4
C-20.	1	2	1	2	1	2	3	4
C-21.								
C-22.	1	2	1	2	1	2	3	4
C-23.	1	2	1	2	1	2	3	4
C-24.	1	2	1	2	1	2	3	4
C-25.	1	2	1	2	1	2	3	4
C-26.	1	2	1	2	1	2	3	4
C-27.	1	2	1	2	1	2	3	4
C-28.	1	2	1	2	1	2	3	4

TIME ENDED: _____ AM
 _____ PM

PART D: SMOKING AND ALCOHOLIC BEVERAGES

BOX A	
INTERVIEWER: CIRCLE ONE:	
S PREVIOUSLY INTERVIEWED	1 (PART E)
S NEVER INTERVIEWED	2

TIME BEGAN: _____ AM
PM

These next few questions are about (your/SUBJECT'S) smoking and drinking habits.

D-1. Did (you/SUBJECT) ever smoke at least 100 cigarettes in (your/his/her) lifetime?

YES 1
NO 2 (Q.D-8)

D-2. (Do you/Does he/she) smoke cigarettes now?

YES 1
NO 2 (Q.D-5)

D-3. About how many cigarettes a day (do you/does he/she) now smoke? [IF ANSWER IS NUMBER OF PACKS, MULTIPLY BY 20 AND VERIFY.]

NUMBER OF CIGARETTES: |__|__|__|
LESS THAN ONE A DAY 995

D-4. For how many years (have you/has he/she) smoked cigarettes?

NUMBER OF YEARS: |__|__| (Q.D-8)

D-5. When did (you/he/she) stop smoking cigarettes?

MONTH: |__|__|
AND
YEAR: 19 |__|__|

D-6. During the years when (you were/he/she was) smoking, about how many cigarettes a day did (you/he/she) smoke? [IF ANSWER IS NUMBER OF PACKS, MULTIPLY BY 20 AND VERIFY.]

NUMBER OF CIGARETTES: |__|__|__|
LESS THAN ONE A DAY 995

D-7. For how many years (did you/has he/she) smoke cigarettes?

NUMBER OF YEARS: |__|__|

D-8. Now I would like to talk to you about drinking alcoholic beverages. By alcoholic beverages I mean beer, or wine, or liquor. (Have you/Has SUBJECT) had at least one drink of beer, wine, or liquor during the past year?

YES 1
NO 2 (PART E)

D-9. During the past year, on the average, how often (did you/did he/she) drink alcoholic beverages, that is, beer, or wine, or liquor?

NUMBER OF DAYS: |__|__| PER: WEEK 1
MONTH 2
MORE THAN 3 BUT LESS THAN 12 TIMES PER YEAR 94
NO MORE THAN 3 TIMES PER YEAR 95

D-10. During the past year, on the average, how many cans or bottles of beer (did you/did he/she) drink per day, week, month or year?

NUMBER OF DRINKS: |__|__| PER: DAY 1
WEEK 2
MONTH 3
YEAR 4
NONE 0

D-11. During the past year, on the average, how many glasses of wine (did you/did he/she) drink per day, week, month, or year?

NUMBER OF DRINKS: |__|__| PER: DAY 1
WEEK 2
MONTH 3
YEAR 4
NONE 0

D-12. During the past year, on the average, how many shots or drinks of hard liquor, either straight or in a mixed drink, (did you/did SUBJECT) drink per day, week, month or year?

NUMBER OF DRINKS: |__|__| PER: DAY 1
WEEK 2
MONTH 3
YEAR 4
NONE 0

TIME ENDED: _____ AM
PM

PART E: EXERCISE AND WEIGHT

TIME BEGAN: _____ AM
 _____ PM

BOX B	
INTERVIEWER: CHECK Q.C-1, Q.C-2c, Q.C-2d, Q.C-2e, AND Q.C-12 AND CIRCLE ONE:	
C-1 = YES (<u>S</u> IS BEDRIDDEN) <u>OR</u> Q.C-12 = 4 (UNABLE TO DO)	1 (BOX C)
Q.2cc OR C-2dc OR C-2ec = YES <u>AND</u> Q.C-2cd OR Q.C-2dd OR	
Q.C-2ed = YES (<u>S</u> UNABLE TO USE LOWER LIMBS)	2 (BOX C)
ALL OTHERS	3

The next few questions are about physical activity.

E-1. How often (do you/does he/she) walk outside in good weather? [PROBE WITH CATEGORIES IF NECESSARY.]

- NEVER 1 (BOX C)
- LESS THAN ONCE A MONTH 2
- LESS THAN ONCE A WEEK 3
- 1 TO 2 TIMES A WEEK 4
- 3 TO 6 TIMES A WEEK 5
- DAILY 6

E-2. When (you/he/she) walk(s) in good weather, how long (do you/does he/she) usually keep at it? [PROBE WITH CATEGORIES IF NECESSARY.]

- LESS THAN 15 MINUTES 1
- 15 MINUTES 2
- 30 MINUTES 3
- 45 MINUTES 4
- 1 HOUR OR LONGER 5

BOX C	
INTERVIEWER: CIRCLE ONE:	
<u>R</u> IS SUBJECT	1
<u>R</u> IS PROXY	2 (Q.E-4a)

E-3. People find that they sometimes have more trouble remembering things as they get older. In the past year, about how often did you have trouble remembering things? Would you say ...

- Frequently, 1
- Sometimes, 2
- Rarely, or 3
- Never? 4 (Q.E-4a)

E-4. Compared with a year ago, do you have trouble remembering ...

- More often, 1
- Less often, or 2
- About the same? 3

E-4a. People sometimes have difficulty controlling urination as they get older. During the past few months, how often (have you/has he/she) lost control over (your/his/her) urine? Would you say ...

- Often, 1
- Occasionally, or 2 (Q.E-4b)
- Never? 3 (Q.E-4b)

E-4a1. Would you say that's daily, at least once a week, or less often?

- DAILY 1
- AT LEAST ONCE A WEEK 2
- LESS OFTEN 3

E-4b. How often (do you/does he/she) dribble, leak or lose urine when (you/he/she) laugh(s), strain(s) or cough(s)? Would you say ...

- Often, 1
- Occasionally, or 2
- Never? 3 (Q.E-4d)

E-4c. (Do you/Does he/she) dribble or leak urine only when (you/he/she) laugh(s), strain(s) or cough(s)?

- YES 1
- NO 2

E-4d. [IF Q.E-4a = 1] OR (Q.E-4a = 2 AND Q.E-4b = 1 OR 2 AND Q.E-4c = 2), ASK:]
When (you/he/she) feel(s) the urge to pass urine, how long can (you/he/she) usually wait ...

- 5 minutes or more, 1
- Less than 5 minutes but more than a few seconds 2
- A few seconds, or 3
- (Do you/Does he/she) wet without warning? 4

E-4e. [IF Q.E-4a = 1) OR (Q.E-4a = 2 AND Q.E-4b = 1 AND Q.E-4c = 2), ASK:]
 Can (you/he/she) usually go more than half an hour during the day without leaking urine?

YES 1
 NO 2

BOX D	
INTERVIEWER: CIRCLE ONE:	
<u>S</u> PREVIOUSLY INTERVIEWED	1
<u>S</u> NEVER INTERVIEWED AND <u>R</u> IS SUBJECT	2 (Q.E-6)
<u>S</u> NEVER INTERVIEWED AND <u>R</u> IS PROXY	3 (Q.E-8)

E-5. About how much (do you/does SUBJECT) weigh now?

NUMBER OF POUNDS: |__|__|__| (PART F)
 DK 998 (PART F)

E-6. These next questions are about your weight, height, and diet. When you were about 12 to 13 years old, compared to other (boys/girls) of the same age, were you considered to be . . .

Skinny, 1
 Somewhat slender, 2
 Average, 3
 Chubby, or 4
 Very heavy? 5
 DK 8

E-7. When you were about 12 to 13 years old, compared to other (boys/girls) of the same age, were you considered to be . . .

Very tall, 1
 Somewhat taller than average, 2
 About average, 3
 Somewhat shorter than average, or 4
 Very short? 5
 DK 8

E-8. How does (your/SUBJECT'S) weight now compare to (your/his/her) weight 6 months ago? Is it ...

At least 10 pounds more, 1
 At least 10 pounds less, or 2
 About the same? 3
 DK 8

E-9. About how much (do you/does he/she) weigh now?

NUMBER OF POUNDS: |__|__|__|
DK 998

E-10. What was (your/his/her) usual weight at the age of 25?

NUMBER OF POUNDS: |__|__|__|
DK 998

E-11. [IF S IS 41 OR OLDER, ASK:] What was (your/his/her) usual weight at the age of 40?

NUMBER OF POUNDS: |__|__|__|
DK 998

E-12. [IF S IS 66 OR OLDER, ASK:] What was (your/his/her) usual weight at the age of 65?

NUMBER OF POUNDS: |__|__|__|
DK 998

TIME ENDED: _____ AM
PM

PART F: VISION AND HEARING

TIME BEGAN: _____ AM
 _____ PM

These next few questions concern (your/SUBJECT'S) vision and hearing.

BOX E	
INTERVIEWER: REVIEW HHCF CHART AND CIRCLE ONE:	
<u>S</u> HAD CATARACT SURGERY	1
OTHERWISE	2 (Q.F-2)

F-1. You mentioned previously that (you/SUBJECT) had cataract surgery. What year did (you/he/she) have (your/his/her) cataract surgery? [PROBE: Did (you/he/she) have any other cataract surgery? RECORD ALL YEARS.]

YEAR: 19 |__|__| (Q.F-6)
 YEAR: 19 |__|__| (Q.F-6)
 DK 98 (Q.F-6)

F-2. Has a doctor ever told (you/SUBJECT) that (you/he/she) had cataracts?

YES 1
 NO 2 (Q.F-6)

F-3. (Have you/Has he/she) ever had surgery for (your/his/her) cataracts?

YES 1
 NO 2 (Q.F-6)

F-4. What year did (you/he/she) have (your/his/her) cataract surgery? [PROBE: Did (you/he/she) have any other cataract surgery? RECORD ALL YEARS.]

YEAR: 19 |__|__|
 YEAR: 19 |__|__|
 DK 98

F-5. [IF S PREVIOUSLY INTERVIEWED AND YEAR IN Q.F-4 IS 1980 OR LATER OR IF S NEVER INTERVIEWED AND YEAR IN Q.F-4 IS 1970 OR LATER, ASK:]

Since (1980/1970), (were you/was he/she) hospitalized for (your/his/her) cataract surgery? [PROBE: (Were you/Was he/she) there for more than a day?]

YES 1 (CHART)
 NO 2

F-6. (Do you/Does SUBJECT) wear eyeglasses or contact lenses? [PROBE YES RESPONSE]

- EYEGASSES 1
- CONTACT LENSES 2
- BOTH 3
- NEITHER 4

F-7. (When wearing eyeglasses/contact lenses/eyeglasses or contact lenses,) Can (you/he/she) see well enough to recognize a friend across the street?

- YES 1
- NO 2

F-8. (When wearing eyeglasses/contact lenses/eyeglasses or contact lenses,) Can (you/he/she) see well enough to recognize the letters in ordinary newspaper print?

- YES 1
- NO 2

F-9. (Have you/Has he/she) ever worn a hearing aid?

- YES 1 (Q.F-11)
- NO 2

F-10. Can (you/he/she) usually hear and understand what a person says if that person talks to (you/him/her) in a normal voice from across a quiet room?

- YES 1 (PART G)
- NO 2 (PART G)

F-11. Without a hearing aid, can (you/he/she) usually hear and understand what a person says if that person talks to (you/him/her) in a normal voice from across a quiet room?

- YES 1
- NO 2

TIME ENDED: _____ AM
PM

PART G: PREGNANCY AND MENSTRUAL HISTORY

BOX F	
INTERVIEWER: CIRCLE ONE.	
<u>S</u> IS MALE	1 (PART H)
<u>S</u> IS FEMALE AND PREVIOUSLY INTERVIEWED	2 (PART H)
<u>S</u> IS FEMALE AND <u>NEVER</u> INTERVIEWED	3

TIME BEGAN: _____ AM
PM

The next few questions are about (your/SUBJECT'S) pregnancy and menstrual history.

G-1. (Have you/Has SUBJECT) ever been pregnant? Include live births, stillbirths, miscarriages and abortions.

YES 1
NO 2 (Q.G-7)

G-2. How old (were you/was she) when (your/her) first child was born? This means the first child born alive or stillborn.

AGE: |_|_|
 OR
S HAD NO BIRTHS 0 (Q.G-5)

G-3. How old (were you/was she) when (your/her) last child was born? Include stillbirths.

AGE: |_|_|

G-4. How many live births (have you/has she) had?

NUMBER OF LIVE BIRTHS: |_|_|
S HAD NO LIVE BIRTHS 0

G-5. (Have you/Has she) ever had a miscarriage?

YES 1
NO 2 (Q.G-7)

G-6. How many miscarriages (have you/has she) had?

NUMBER OF MISCARRIAGES: |_|_|

G-7. At what age did (you/she) have (your/her) last period?

AGE: |__|__|
NEVER HAD PERIOD 95

G-8. Did (your/her) periods stop naturally, because of surgery, or for some other reason?

NATURALLY 1
SURGERY 2
RADIATION 3
OTHER (SPECIFY) 91

G-9. Did (you/she) ever take female hormone pills for reasons related to menopause, including hot flashes or mood changes around the time (you were/she was) beginning the change of life? This would include hormone pills taken for natural change of life or because (your/her) periods stopped due to an operation.

YES 1
NO 2 (Q.G-13)
DK 8 (Q.G-13)

G-10. How old (were you/was she) when (you/she) first took hormone pills?

AGE: |__|__|
DK 98

G-11. How old (were you/was she) when (you/she) last took hormone pills?

AGE: |__|__|
STILL TAKING 95
DK 98

G-12. Altogether for about how many years (have you/has she) taken hormone pills?

NUMBER OF YEARS: |__|__|
OR
NUMBER OF MONTHS: |__|__|
LESS THAN ONE MONTH 95
DK 98

G-13. (Have you/Has she) ever taken birth control pills for any reason?

YES 1
NO 2 (PART H)
DK 8 (PART H)

PART H: COMMUNITY SERVICES

TIME BEGAN: _____ AM
 _____ PM

Now we are going to talk about community programs for the elderly that some communities have available.

INTERVIEWER INSTRUCTIONS: READ COLUMN a. IF THE ANSWER TO COLUMN a IS "YES", ASK COLUMNS b AND c. IF "NO", ASK COLUMN a FOR THE NEXT SERVICE.

In the past 12 months ...	How many months of the past 12 months (have you/has he/she) used this service? [PROBE WITH CATEGORIES IF NECESSARY.]	When (you were/he/she was) using this service most heavily, how often did (you/he/she) use it? [PROBE WITH CATEGORIES IF NECESSARY.]
H-1a. Did (you/ <u>SUBJECT</u>) use a senior citizen's center? YES 1 NO 2 (Q.H-2a)	H-1b. 1 OR 2 MONTHS 1 3 TO 5 MONTHS 2 6 TO 8 MONTHS 3 9 OR MORE MONTHS 4	H-1c. LESS THAN ONCE A WEEK 1 1 OR 2 TIMES A WEEK 2 3 OR MORE TIMES A WEEK 3
H-2a. Did (you/he/she) use special transportation for the elderly? YES 1 NO 2 (Q.H-3a)	H-2b. 1 OR 2 MONTHS 1 3 TO 5 MONTHS 2 6 TO 8 MONTHS 3 9 OR MORE MONTHS 4	H-2c. LESS THAN ONCE A WEEK 1 1 OR 2 TIMES A WEEK 2 3 OR MORE TIMES A WEEK 3
H-3a. Did (you/he/she) eat meals in a senior center or in some place with a special meal program for the elderly? YES 1 NO 2 (Q.H-4a)	H-3b. 1 OR 2 MONTHS 1 3 TO 5 MONTHS 2 6 TO 8 MONTHS 3 9 OR MORE MONTHS 4	H-3c. LESS THAN ONCE A WEEK 1 1 OR 2 TIMES A WEEK 2 3 OR MORE TIMES A WEEK 3
H-4a. Did (you/he/she) have meals delivered to (your/his/her) home by an agency or organization like Meals on Wheels? YES 1 NO 2 (Q.H-5a)	H-4b. 1 OR 2 MONTHS 1 3 TO 5 MONTHS 2 6 TO 8 MONTHS 3 9 OR MORE MONTHS 4	H-4c. LESS THAN ONCE A WEEK 1 1 OR 2 TIMES A WEEK 2 3 OR MORE TIMES A WEEK 3
H-5a. Did (you/he/she) use a visiting nurse service? YES 1 NO 2 (Q.H-6a)	H-5b. 1 OR 2 MONTHS 1 3 TO 5 MONTHS 2 6 TO 8 MONTHS 3 9 OR MORE MONTHS 4	H-5c. LESS THAN ONCE A WEEK 1 1 OR 2 TIMES A WEEK 2 3 OR MORE TIMES A WEEK 3
H-6a. Did (you/he/she) use a health aide or homemaker service who comes into the home? YES 1 NO 2 (Q.H-7a)	H-6b. 1 OR 2 MONTHS 1 3 TO 5 MONTHS 2 6 TO 8 MONTHS 3 9 OR MORE MONTHS 4	H-6c. LESS THAN ONCE A WEEK 1 1 OR 2 TIMES A WEEK 2 3 OR MORE TIMES A WEEK 3
H-7a. Did (you/he/she) use adult day care for the elderly? YES 1 NO 2 (Q.H-8a)	H-7b. 1 OR 2 MONTHS 1 3 TO 5 MONTHS 2 6 TO 8 MONTHS 3 9 OR MORE MONTHS 4	H-7c. LESS THAN ONCE A WEEK 1 1 OR 2 TIMES A WEEK 2 3 OR MORE TIMES A WEEK 3
H-8a. Did (you/he/she) use a service where daily contacts are made to check on the health of elderly people? YES 1 NO 2 (PART I)	H-8b. 1 OR 2 MONTHS 1 3 TO 5 MONTHS 2 6 TO 8 MONTHS 3 9 OR MORE MONTHS 4	

PART I: SOCIAL SECURITY NUMBER

TIME ENDED: _____ AM
PM

I-1.

[READ ONLY IF CHECKED ():]

As part of this survey, I'd like to have (your/SUBJECT'S) social security number. Provision of this number is voluntary and not providing the number will not have any effect on (your/his/her) receipt of benefits from the Federal Government. This number will be useful in conducting future followup studies. It will be used to match against future mortality records. This information is collected under the authority of Section 306 of the Public Health Service Act. What is (your/SUBJECT'S) social security number?

SOCIAL SECURITY #: |_|_|_|_| - |_|_|_| - |_|_|_|_|_|

I-2.

[READ ONLY IF CHECKED ():]

[FEMALE ONLY, ASK:] Please tell me (your/SUBJECT'S) father's last name.

FATHER'S LAST NAME: _____

TIME ENDED: _____ AM
PM

PART J: CLOSING STATEMENTS

BOX G	
INTERVIEWER: CIRCLE ONE:	
<input type="radio"/> IS SUBJECT	1
<input type="radio"/> IS PROXY	2 (Q.J-2)

PLEASE CHECK THE HHCf CHART.	
ARE THERE ANY STAYS RECORDED?	
YES	1
NO	2 (Q.J-6)

J-1. As part of this survey, I would like to send you a form that authorizes the United States Public Health Service to obtain information from hospital or nursing home records. To do this I need to confirm your name and address. [VERIFY SPELLING]

NAME: _____

FIRST	MIDDLE	LAST
-------	--------	------

ADDRESS: _____

STREET NAME AND NUMBER	APT. NUMBER
------------------------	-------------

CITY	STATE	ZIP CODE
------	-------	----------

And I need to confirm your telephone number.

TELEPHONE: () _____

When you receive the form please sign your name. Then return the form in the postage paid envelope.

BOX H	
INTERVIEWER: CIRCLE ONE:	
<input type="checkbox"/> AGREES TO SIGN	1 (J-6)
<input type="checkbox"/> REFUSES TO SIGN	2 (J-6)

And I need to confirm your telephone number.

TELEPHONE: () _____

J-4. Will (SUBJECT) be able to sign this form?

YES 1
NO (EXPLAIN) 2 (BOX I)

[IF YES:] When you receive the form please have (SUBJECT) sign (his/her) name. Then return the form in the postage paid envelope. [IF P WANTS FORM TO GO DIRECTLY TO SUBJECT RECORD ON IS.].

Q.J-6

BOX I
INTERVIEWER: CIRCLE ONE:
P IS RELATIVE 1
P IS NON-RELATIVE 2 (Q.J-5)

When you receive the form please sign your name. Then return the form in the postage paid envelope.

BOX J
INTERVIEWER: CIRCLE ONE:
P AGREES TO SIGN 1 (J-6)
P REFUSES TO SIGN 2 (J-6)

J-5. Do you know a relative of (SUBJECT) who could sign this authorization?

YES 1
NO 2 (Q.J-6)

I need to have the name, address and relationship of a relative of (SUBJECT) who could sign this authorization. [VERIFY ALL SPELLING.]

NAME: _____

ADDRESS: _____

STREET NAME AND NUMBER

APT. NUMBER

CITY

STATE

ZIP CODE

TELEPHONE: () _____

What is (RELATIVE's) relationship to (SUBJECT)?

HUSBAND/WIFE 1
FATHER/MOTHER 2
FATHER IN-LAW/MOTHER IN-LAW 3
GRANDPARENT 4
SON/DAUGHTER 5
SON IN-LAW/DAUGHTER IN-LAW 6
GRANDCHILD 7
BROTHER/SISTER 8
BROTHER IN-LAW/SISTER IN-LAW 9
AUNT/UNCLE/COUSIN 10
NIECE/NEPHEW 11
ROOMMATE/FRIEND/NEIGHBOR 12
OTHER RELATIVE (SPECIFY) 91

OTHER NON-RELATIVE (SPECIFY) 92

J-6. Please give me the name, address, and telephone number of a relative or friend who would know how to get in touch with you in case we need to contact you again and have a hard time getting ahold of you? [DO NOT PROBE FOR APT. NUMBER OR ZIP CODE.]

NAME: _____

ADDRESS: _____

STREET NAME AND NUMBER

APT. NUMBER

CITY

STATE

ZIP CODE

TELEPHONE: () _____

<p>INTERVIEWER: CIRCLE ONE:</p> <p><u>R</u> WAS SUBJECT 1</p> <p><u>R</u> WAS PROXY 2 (PART K)</p>
--

J-7. DID THE SUBJECT RECEIVE ASSISTANCE?

YES 1

NO 2 (CONCLUSION)

HOW MANY ASSISTANTS?

ONE 1

MORE THAN ONE 2

RECORD NAME AND TELEPHONE NUMBER OF (EACH) ASSISTANT AND ASK RELATIONSHIP.

ASSISTANT #1

NAME: _____

FIRST LAST

TELEPHONE: (_____) _____

How is (ASSISTANT) related to (SUBJECT)?

HUSBAND/WIFE 1

FATHER/MOTHER 2

FATHER IN-LAW/MOTHER IN-LAW 3

GRANDPARENT 4

SON/DAUGHTER 5

SON IN-LAW/DAUGHTER IN-LAW 6

GRANDCHILD 7

BROTHER/SISTER 8

BROTHER IN-LAW/SISTER IN-LAW 9

AUNT/UNCLE/COUSIN 10

NIECE/NEPHEW 11

ROOMMATE/FRIEND/NEIGHBOR 12

OTHER RELATIVE (SPECIFY) 91

OTHER NON-RELATIVE (SPECIFY) 92

PART K: OBSERVATION SHEET

(TO BE COMPLETED AT CONCLUSION OF INTERVIEW)

BOX I

INTERVIEWER: IF S WITH ASSISTANCE, ANSWER Q.A AND Q.B; IF P, ANSWER Q.B.

A. IF ASSISTANCE: WHO WAS THE PRIMARY RESPONDENT:

SUBJECT 1
 ASSISTANT #1 2
 ASSISTANT #2 3

B. IF PROXY OR ASSISTANCE: WHY WAS (PROXY/ASSISTANT) NEEDED? [CODE YES OR NO FOR EACH CATEGORY]

	<u>YES</u>	<u>NO</u>
HEARING PROBLEM	1	2
SPEECH PROBLEM	1	2
LANGUAGE PROBLEM (INTERPRETER)	1	2
POOR MEMORY, SENILITY, OR CONFUSION	1	2
INSTITUTIONALIZED	1	2
ALZHEIMER'S DISEASE	1	2
OTHER MENTAL CONDITION (SPECIFY)		
_____	1	2
OTHER PHYSICAL ILLNESS AND/OR DISABILITY (SPECIFY)		
_____	1	2
OTHER NON-HEALTH (SPECIFY)		
_____	1	2
OTHER (SPECIFY) _____		
_____	1	2

K-6b. WAS THE (SUBJECT/PROXY) HARD OF HEARING?

YES 1
NO 2

K-6c. WAS THE INTERVIEW CONDUCTED IN SPANISH?

YES 1
NO 2

K-7. RECORD ANY RELEVANT COMMENTS OR IMPRESSIONS YOU MAY HAVE HAD ABOUT THIS INTERVIEW.

NHANES I EPIDEMIOLOGIC FOLLOWUP STUDY
CONTINUED FOLLOWUP OF THE ELDERLY
PROXY - DECEASED QUESTIONNAIRE

WESTAT ID: |__|__|_|-|__|__|__|_|-|__|

Hello, may I please speak to (RESPONDENT)?

- IF RESPONDENT NOT AVAILABLE, ASK: Can you suggest a convenient time when I could reach (him/her)? TERMINATE CONTACT AND RECORD RESULTS ON CALL RECORD.
- IF RESPONDENT NOT AT THIS TELEPHONE NUMBER, VERIFY NUMBER AND REDIAL.
- IF RESPONDENT AVAILABLE, CONTINUE.

My name is (YOUR NAME) and I am calling from Washington, D.C. on behalf of the United States Public Health Service with regard to the National Health and Nutrition Examination Survey. Recently you were sent a letter from the Public Health Service explaining that someone would contact you. Did you receive our letter?

YES 1
NO 2 (BOX 1)

I would like to conduct the interview now if it is convenient.

(It will take approximately 30 minutes. In order to evaluate my performance, my supervisor may monitor this interview.)

BOX 1

(IF RESPONDENT DID NOT RECEIVE LETTER, READ:)

Let me tell you what it says. In (YEAR), (SUBJECT) participated in the National Health and Nutrition Examination Survey. At this time, we are contacting relatives (or friends) of persons who participated who are now deceased to conduct a very short interview by telephone. Questions will be asked about illnesses, disabilities and hospitalizations. This study is authorized by the Public Health Service Act. The information you give me will be kept strictly confidential and will be used for statistical purposes only. The interview is completely voluntary and there are no penalties for refusing to answer any questions. (CHECK BOX: |__|)

I would like to conduct the interview now if it is convenient.

(It will take approximately 30 minutes. In order to evaluate my performance, my supervisor may monitor this interview.)

PART A: BACKGROUND INFORMATION

TIME BEGAN: _____ AM
 _____ PM

A-1. First, I would like to verify (SUBJECT'S) name. (His/Her) first name was (FIRST NAME), middle name (MIDDLE NAME), and last name was (LAST NAME).

NAME IS CORRECT 1

OR

FIRST NAME	MIDDLE NAME	LAST NAME
------------	-------------	-----------

A-2. How were you related to (SUBJECT)?

- HUSBAND/WIFE/SPOUSE EQUIVALENT 01
- FATHER/MOTHER 02
- FATHER IN-LAW/MOTHER IN-LAW 03
- SON/DAUGHTER 05
- SON IN-LAW/DAUGHTER IN-LAW 06
- BROTHER/SISTER 08
- BROTHER IN-LAW/SISTER IN-LAW 09
- FRIEND/NEIGHBOR/ROOMMATE 12
- OTHER RELATIVE (SPECIFY) 91

OTHER RELATIVE IN-LAW (SPECIFY) 92

OTHER NON-RELATIVE (SPECIFY) 93

A-3. In the year prior to (SUBJECT'S) death, where did (he/she) live most of the time: in a private home or apartment, a nursing home or rest home, or did (he/she) have some other arrangement?

- HOUSE OR APARTMENT 1
- NURSING OR CONVALESCENT OR REST HOME 2 (Q.A-3c)
- RETIREMENT HOME 3
- BOARDING HOUSE, ROOMING HOUSE OR RENTED ROOM 4
- FAMILY OR FOSTER CARE HOME 5
- ANOTHER HEALTH FACILITY 6 (Q.A-3c)
- OTHER ARRANGEMENT (SPECIFY) 91

OTHER INSTITUTION (SPECIFY) 92 (Q.A-3c)

A-3a. Was (SUBJECT) living in a nursing home or other health care facility at the time of (his/her) death?

YES 1
NO 2

A-3b. In the year prior to (SUBJECT'S) death, did you live in the same household with (him/her)?

YES 1 (BOX 2)
NO 2

A-3c. In the year before (SUBJECT) died, about how frequently did you visit or talk to (him/her)? [PROBE WITH CATEGORIES IF NECESSARY.]

EVERYDAY 1
LESS THAN DAILY BUT AT LEAST
ONCE A WEEK 2
LESS THAN WEEKLY BUT MORE
THAN ONCE A MONTH 3
LESS THAN ONCE A MONTH 4

BOX 2

INTERVIEWER: REVIEW Q.A-3 AND Q.A-3a AND CIRCLE ONE:

A-3 CODED 2, 6, OR 8 (INSTITUTION)
OR Q.A-3a CODED YES 1 (Q.A-6)
ALL OTHERS (NON-INSTITUTION) 2

A-4. At the time of (his/her) death, how many people lived in (his/her) household including (SUBJECT)?

ONE 01 (Q.A-5)

NUMBER OF PEOPLE: |__|__|

A-4a. What relationship to (SUBJECT) (was/were) the other person(s) who lived in (his/her) household? [PROBE FOR SEX IF NOT OBVIOUS: Was (his/her) (RELATIONSHIP) male or female?]

PERSON #	SEX	RELATIONSHIP
1	__	__
2	__	__
3	__	__
4	__	__
5	__	__
6	__	__
7	__	__
8	__	__
9	__	__
10	__	__

SEX: 1 = MALE
2 = FEMALE

RELATIONSHIP: 1 = HUSBAND/WIFE
2 = FATHER/MOTHER (INCLUDING IN-LAWS)
3 = GRANDPARENT
4 = SON/DAUGHTER (INCLUDING IN-LAWS)
5 = GRANDCHILD
6 = BROTHER/SISTER (INCLUDING IN-LAWS)
7 = AUNT/UNCLE/COUSIN
8 = OTHER RELATIVE
9 = FRIEND
10 = OTHER NON-RELATIVE

GO TO Q.A-8

A-5. How long had (he/she) lived alone?

NUMBER OF MONTHS: |__|__| (Q.A-8)

OR

NUMBER OF YEARS: |__|__| (Q.A-8)

LESS THAN ONE MONTH 95 (Q.A-8)

DON'T KNOW 98 (Q.A-8)

A-6. At the time (he/she) entered the (TYPE OF FACILITY IN Q.A-3): nursing home or rest home/health facility/ institution), how many people lived in (his/her) household including (SUBJECT)?

ONE 01 (Q.A-7)

NUMBER OF PEOPLE: |__|__|

A-6a. What relationship to (SUBJECT) (was/were) the other person(s) who lived in (his/her) household? [PROBE FOR SEX IF NOT OBVIOUS: Was (his/her) (RELATIONSHIP) male or female?]

PERSON #	SEX	RELATIONSHIP
1	__	__
2	__	__
3	__	__
4	__	__
5	__	__
6	__	__
7	__	__
8	__	__
9	__	__
10	__	__

SEX: 1 = MALE
2 = FEMALE

RELATIONSHIP: 1 = HUSBAND/WIFE
2 = FATHER/MOTHER (INCLUDING IN-LAWS)
3 = GRANDPARENT
4 = SON/DAUGHTER (INCLUDING IN-LAWS)
5 = GRANDCHILD
6 = BROTHER/SISTER (INCLUDING IN-LAWS)
7 = AUNT/UNCLE/COUSIN
8 = OTHER RELATIVE
9 = FRIEND
10 = OTHER NON-RELATIVE

GO TO Q.A-8

A-7. How long had (he/she) lived alone?

NUMBER OF MONTHS: |__|__|

OR

NUMBER OF YEARS: |__|__|

LESS THAN ONE MONTH 95

DON'T KNOW 98

A-8. [IF R IS SPOUSE, CODE 1 AND GO TO PART B. OTHERWISE, ASK:]

At the time of (SUBJECT'S) death, was (he/she) married, widowed, divorced, separated, or had (he/she) never been married?

- MARRIED 1
- WIDOWED 2
- DIVORCED 3
- SEPARATED 4
- NEVER MARRIED 5

A-9. [READ ONLY IF CHECKED ():]

Which of these categories best described (SUBJECT) – Alaskan Native, American Indian, Asian, Pacific Islander, Black or White? Are you of Hispanic origin or descent?

- ALASKAN NATIVE OR AMERICAN INDIAN - NOT HISPANIC 1
 - ASIAN/PACIFIC ISLANDER - NOT HISPANIC 2
 - BLACK - NOT HISPANIC 3
 - WHITE - NOT HISPANIC 4
 - ALASKAN NATIVE OR AMERICAN INDIAN - HISPANIC 5
 - ASIAN/PACIFIC ISLANDER - HISPANIC 6
 - BLACK - HISPANIC 7
 - WHITE - HISPANIC 8
 - OTHER (SPECIFY) 91
-

TIME ENDED: _____ AM
PM

PART B: MEDICAL CONDITIONS

TIME BEGAN: _____ AM
PM

B-0. [IF R IS NOT RELATIVE, ASK:]

Do you think you can answer questions about (his/her) medical history?

YES 1
NO 2 (Q.B-83)
DK 8

B-1 NOT ASKED THIS VERSION.

B-2. Did a doctor ever say that (he/she) had arthritis?

YES 1
NO 2 (Q.B-14)
DK 8 (Q.B-14)

B-3. There are different kinds of arthritis. Did a doctor every say which kind (he/she) had?

YES 1
NO 2 (Q.B-13a)
DK 8 (Q.B-13a)

B-4. What type of arthritis did (he/she) have? (READ CATEGORIES IF NECESSARY.)

	<u>YES</u>	<u>NO</u>	<u>DK</u>
RHEUMATOID	1	2	8
OSTEOARTHRITIS	1	2	8
LUPUS	1	2	8
GOUT	1	2	8
DEGENERATIVE	1	2	8
SOME OTHER TYPE (SPECIFY)	1	2	8

B-5 THROUGH B-13 NOT ASKED THIS VERSION.

B-13a. Since (1980/1970), was (he/she) hospitalized for (his/her) arthritis? [PROBE: Was (he/she) there for more than a day?]

YES 1 (CHART)
NO 2

INTERVIEWER INSTRUCTIONS: FOR EACH CONDITION IN Q.B14 THROUGH Q.B-57, WITHIN EACH SECTION READ FIRST CHECKED () ITEM. THEN, FOLLOW APPROPRIATE SKIPS.

|__|

B-14. Since (MONTH/YEAR) did (SUBJECT) have a heart attack (sometimes called coronary thrombosis or myocardial infarction)?

- YES 1 (Q.B-18)
- NO 2 (Q.B-19b)
- DK 8 (Q.B-19b)

|__|

B-15. Did a doctor ever say that (he/she) had a heart attack (sometimes called coronary thrombosis or myocardial infarction)?

- YES 1
- NO 2 (Q.B-19b)
- DK 8 (Q.B-19b)

B-16. In what year was (he/she) first told that (he/she) had a heart attack (coronary thrombosis or myocardial infarction)?

- YEAR: 19 |__|__|
- DK 98

B-17. Did (he/she) have an additional heart attack since then?

- YES 1
- NO 2 (Q.B-19a)
- DK 8 (Q.B-19a)

B-18. In what year was that heart attack? [PROBE: Did (SUBJECT) have any others since then? PROBE FOR ALL YEARS.]

- YEAR: 19 |__|__|
- YEAR: 19 |__|__|
- YEAR: 19 |__|__|
- YEAR: 19 |__|__|
- DK 98

B-19a. Since (1980/1970), was (he/she) hospitalized for (his/her) heart attack? [PROBE: Was (he/she) there for more than a day?]

- YES 1 (CHART)
- NO 2

B-19b. Since (1980/1970), was (he/she) hospitalized for any type of heart condition (other than a heart attack)?
[PROBE: Was (he/she) there for more than a day?]

YES 1 (CHART)
NO 2

[IF CHECKED () OR IF Q.B-15 OR Q.B-19b = YES, ASK:]

|__|
B-20a. Did (he/she) have coronary by-pass surgery?

YES 1
NO 2 (Q.B-20c)

B-20b. Since (1980/1970), was (he/she) hospitalized for coronary by-pass surgery? [PROBE: Was (he/she) there for more than a day?]

YES 1 (CHART)
NO 2

B-20c. Did (he/she) ever have pacemaker replacement, insertion or repair?

YES 1
NO 2 (Q.B-21)

B-20d. Since (1980/1970), was (he/she) hospitalized for pacemaker replacement, insertion or repair? [PROBE: Was (he/she) there for more than a day?]

YES 1 (CHART)
NO 2

|__|
B-21. Since (MONTH/YEAR) did (SUBJECT) have a small stroke, sometimes known as TIA (transient ischemic attack)?

YES 1 (Q.B-25)
NO 2 (Q.B-27)
DK 8 (Q.B-27)

|__|
B-22. Did a doctor ever say that (he/she) had a small stroke, sometimes known as a TIA (transient ischemic attack)?

YES 1
NO 2 (Q.B-27)
DK 8 (Q.B-27)

B-23. In what year was (he/she) first told that (he/she) had a small stroke?

YEAR: 19 |__|__|
DK 98

B-24. Did (he/she) have an additional small stroke since then?

YES 1
NO 2 (Q.B-26)
DK 8 (Q.B-26)

B-25. In what year was that small stroke? [PROBE: Did (SUBJECT) have any others since then? PROBE FOR ALL YEARS.]

YEAR: 19 |__|__|
YEAR: 19 |__|__|
YEAR: 19 |__|__|
YEAR: 19 |__|__|
DK 98

B-26. Since (1980/1970), was (he/she) hospitalized for a small stroke? [PROBE: Was (he/she) there for more than a day?]

YES 1 (CHART)
NO 2

|__|
B-27. Since (MONTH/YEAR), did (SUBJECT) have a stroke (sometimes called a CVA)?

YES 1 (Q.B-31)
NO 2 (Q.B-34)
DK 8 (Q.B-34)

|__|
B-28. Did a doctor every say that (he/she) had a stroke (sometimes called a CVA)?

YES 1
NO 2 (Q.B-34)
DK 8 (Q.B-34)

B-29. In what year was (he/she) first told that (he/she) had a stroke?

YEAR: 19 |__|__|
DK 98

B-30. Did (he/she) have an additional stroke since then?

YES 1
NO 2 (Q.B-32)
DK 8 (Q.B-32)

B-31. In what year was that stroke? [PROBE: Did (he/she) have any others since then? PROBE FOR ALL YEARS.]

YEAR: 19 |__|__|
YEAR: 19 |__|__|
DK 98

B-32. Since (1980/1970), was (he/she) hospitalized for a stroke? [PROBE: Was (he/she) there for more than a day?]

YES 1 (CHART)
NO 2

B-33 NOT ASKED THIS VERSION.

CAN RESPONDENT ANSWER MORE QUESTIONS ABOUT SUBJECT'S HEALTH?	
YES	1
NO	2 (Q.B-83)

|__|
B-34. In the year prior to (his/her) death, was (he/she) taking medication for diabetes?

YES 1 (Q.B-37)
NO 2 (Q.B-39)
DK 8 (Q.B-39)

|__|
B-35. Did a doctor ever say that (he/she) had diabetes or sugar diabetes?

YES 1
NO 2 (Q.B-40)
DK 8 (Q.B-40)

B-36. In what year was (he/she) first told that (he/she) had diabetes or sugar diabetes?

YEAR: 19 |__|__|
DK 98

B-37. In the year prior to (his/her) death, was (he/she) taking insulin injections for (his/her) diabetes?

YES 1 (Q.B-39)
NO 2
DK 8

B-38. In the year prior to (his/her) death, was (he/she) taking oral medication for (his/her) diabetes?

YES 1
NO 2
DK 8

B-39. Since (1980/1970), was (he/she) hospitalized for diabetes? [PROBE: Was (he/she) there for more than a day?]

YES 1 (CHART)
NO 2

|__|
B-40. Did the doctor ever prescribe medicine for (him/her) for high blood pressure?

YES 1 (Q.B-45)
NO 2 (Q.B-45)
DK 8 (Q.B-45)

|__|
B-41. Had (SUBJECT) ever been told by the doctor that (he/she) had high blood pressure or hypertension?

YES 1
NO 2 (Q.B-46)
DK 8 (Q.B-46)

B-42. In what year was (he/she) first told that (he/she) had high blood pressure or hypertension?

YEAR: 19 |__|__|
DK 98

B-43. Did the doctor ever prescribe medicine for (his/her) high blood pressure?

YES 1
NO 2 (Q.B-45)
DK 8 (Q.B-45)

B-44 NOT ASKED THIS VERSION.

B-45. Since (1980/1970), was (he/she) hospitalized for high blood pressure? [PROBE: Was (he/she) there for more than a day?]

YES 1 (CHART)
NO 2

|__|
B-46. Since (MONTH/YEAR) did (SUBJECT) have any type of cancer diagnosed?

YES 1 (Q.B-49)
NO 2 (Q.B-48)
DK 8 (Q.B-48)

|__|
B-47. Did a doctor ever say that (he/she) had cancer of any sort?

YES 1 (Q.B-49)
NO 2 (Q.B-52)
DK 8 (Q.B-52)

B-48. Since 1980, was (he/she) hospitalized for any cancer condition? [PROBE: Was (he/she) there for more than a day?]

YES 1 (CHART. THEN
GO TO Q.B-52)
NO 2 (Q.B-52)

	1ST DIAGNOSIS	2ND DIAGNOSIS	3RD DIAGNOSIS
B-49. Where was the cancer or what type of cancer was it? [PROBE: Did (he/she) have any other cancer diagnosed]?	LUNG 1 COLON 2 BREAST 3 SKIN (MELANOMA) 4 SKIN (NON-MELANOMA) 5 UTERUS 6 PROSTATE 7 STOMACH 8 LEUKEMIA 9 OTHER (SPECIFY) 91 SITE: _____ <u>OR</u> TYPE: _____	LUNG 1 COLON 2 BREAST 3 SKIN (MELANOMA) 4 SKIN (NON-MELANOMA) 5 UTERUS 6 PROSTATE 7 STOMACH 8 LEUKEMIA 9 OTHER (SPECIFY) 91 SITE: _____ <u>OR</u> TYPE: _____	LUNG 1 COLON 2 BREAST 3 SKIN (MELANOMA) 4 SKIN (NON-MELANOMA) 5 UTERUS 6 PROSTATE 7 STOMACH 8 LEUKEMIA 9 OTHER (SPECIFY) 91 SITE: _____ <u>OR</u> TYPE: _____
B-50. In what year was (he/she) first told that (he/she) had (CANCER)?	YEAR: 19 __ __ DK 98	YEAR: 19 __ __ DK 98	YEAR: 19 __ __ DK 98
B-51. Since (1980/1970), was (he/she) hospitalized for (CANCER)? [PROBE: Was (he/she) there for more than a day?]	YES 1 (CHART) NO 2	YES 1 (CHART) NO 2	YES 1 (CHART) NO 2

CAN THE RESPONDENT ANSWER MORE QUESTIONS ABOUT THE SUBJECT'S HEALTH?

YES 1
 NO 2 (Q.B-83)

|__|
B-52. Since (MONTH/YEAR) did (SUBJECT) have a broken or or fractured hip?

YES 1 (Q.B-56)
NO 2 (Q.B-62)
DK 8 (Q.B-62)

|__|
B-53. Had (SUBJECT) ever told by the doctor that (he/she) had a broken or fractured hip?

YES 1
NO 2 (Q.B-62)
DK 8 (Q.B-62)

B-54. In what year was (he/she) first told that (he/she) had a broken or fractured hip?

YEAR: 19 |__|__|
DK 98

B-55. Did (he/she) had an additional fractured hip since then?

YES 1
NO 2 (Q.B-57)
DK 8 (Q.B-57)

B-56. In what year did (he/she) have that break or fracture of (his/her) hip? [PROBE: Did (SUBJECT) have any others since then? PROBE FOR ALL YEARS.]

YEAR: 19 |__|__|
YEAR: 19 |__|__|
YEAR: 19 |__|__|
YEAR: 19 |__|__|
DK 98

B-57. Since (1980/1970), was (he/she) hospitalized for a broken or fractured hip? [PROBE: Was (he/she) there for more than a day?]

YES 1 (CHART)
NO 2

B-58 THROUGH B-61 NOT ASKED THIS VERSION.

B-62. Since (1980/1970), had (he/she) been hospitalized for pneumonia or the flu? [PROBE: Was (he/she) there for more than a day?]

YES 1 (CHART)
NO 2

B-63. (Aside from the hospitalizations you have mentioned,) Had (SUBJECT) been hospitalized for any surgical procedure or operation since (1980/1970)? [PROBE: Was (he/she) there for more than a day?]

YES 1 (CHART)
NO 2

B-64 AND B-65 NOT ASKED THIS VERSION.

B-66. [I have recorded that (SUBJECT) was hospitalized (READ DATES, CONDITIONS AND FACILITY NAMES FROM CHART).] Now, I would like you to think back over the time between (1980/1970) and the time (he/she) died. (He/She) would have been about (AGE) in (1980/1970). Had (he/she) stayed in a hospital for any (other) reason including tests or for observation since (he/she) was (AGE)? [PROBE: Was (he/she) there for more than a day?]

YES 1
 NO 2 (Q.B-69)

	CONDITION # 1	CONDITION # 2	CONDITION # 3
B-67. For what condition was that? (PROBE: Did (he/she) have any other hospitalizations since (1980/1970)? [GO TO CHART AFTER CODING CONDITION.]	TESTS AND/OR OBSERVATION 1 DIGESTIVE PROBLEMS 2 RESPIRATORY/BREATHING PROBLEMS 3 INFECTIONS 4 OTHER (SPECIFY) 91 _____ _____ (CHART)	TESTS AND/OR OBSERVATION 1 DIGESTIVE PROBLEMS 2 RESPIRATORY/BREATHING PROBLEMS 3 INFECTIONS 4 OTHER (SPECIFY) 91 _____ _____ (CHART)	TESTS AND/OR OBSERVATION 1 DIGESTIVE PROBLEMS 2 RESPIRATORY/BREATHING PROBLEMS 3 INFECTIONS 4 OTHER (SPECIFY) 91 _____ _____ (CHART)

B-68. NOT ASKED THIS VERSION.

B-69. Since (1980/1970), had (SUBJECT) ever stayed in a rest home, a nursing home, a mental health facility, or anything like that? [PROBE: Was (he/she) there for more than a day?]

YES 1
 NO 2 (Q.B-78)

	ADMISSION# 1	ADMISSION# 2	ADMISSION# 3
B-70. To what type of place was the (most recent/this admission?)	REST HOME 1 NURSING HOME 2 MENTAL HEALTH FACILITY 3 HEALTH CARE REHABILITATION CENTER 4 OTHER (SPECIFY) 91	REST HOME 1 NURSING HOME 2 MENTAL HEALTH FACILITY 3 HEALTH CARE REHABILITATION CENTER 4 OTHER (SPECIFY) 91	REST HOME 1 NURSING HOME 2 MENTAL HEALTH FACILITY 3 HEALTH CARE REHABILITATION CENTER 3 OTHER (SPECIFY) 91
B-71. Did (he/she) enter the (TYPE OF FACILITY) directly from (his/her) own home, from a hospital, or from some other place?	OWN HOME 01 HOSPITAL 02 NURSING HOME 03 REST HOME 04 MENTAL HEALTH FACILITY 05 HEALTH CARE REHABILITATION CENTER 06 FRIEND/RELATIVE'S HOME 07 OTHER (SPECIFY) 91	OWN HOME 01 HOSPITAL 02 NURSING HOME 03 REST HOME 04 MENTAL HEALTH FACILITY 05 HEALTH CARE REHABILITATION CENTER 06 FRIEND/RELATIVE'S HOME 07 OTHER (SPECIFY) 91	OWN HOME 01 HOSPITAL 02 NURSING HOME 03 REST HOME 04 MENTAL HEALTH FACILITY 05 HEALTH CARE REHABILITATION CENTER 06 FRIEND/RELATIVE'S HOME 07 OTHER (SPECIFY) 91
B-72. In what year did (he/she) enter the (TYPE OF FACILITY)?	YEAR: 19 __ __ DK 98	YEAR: 19 __ __ DK 98	YEAR: 19 __ __ DK 98

		ADMISSION# 1		ADMISSION# 2		ADMISSION# 3	
B-73.	There are many reasons why people enter a (TYPE OF FACILITY). Please tell me if (SUBJECT) entered the (TYPE OF FACILITY) for any of the following reasons. (CIRCLE YES OR NO FOR EACH.)		<u>YES</u> <u>NO</u>		<u>YES</u> <u>NO</u>		<u>YES</u> <u>NO</u>
		Required skilled nursing care?	1 2	Required skilled nursing care?	1 2	Required skilled nursing care?	1 2
		Recuperation from surgery?	1 2	Recuperation from surgery?	1 2	Recuperation from surgery?	1 2
		Needed help with bathing, eating, or dressing?	1 2	Needed help with bathing, eating, or dressing?	1 2	Needed help with bathing, eating, or dressing?	1 2
		Required special medical or physical therapy?	1 2	Required special medical or physical therapy?	1 2	Required special medical or physical therapy?	1 2
		Too confused to live independently?	1 2	Too confused to live independently?	1 2	Too confused to live independently?	1 2
B-74.	Please tell me the name of the disease or condition that (he/she) had at the time of admission that affected (his/her) ability to live independently? (CIRCLE ALL THAT APPLY)	ALCOHOLISM	01	ALCOHOLISM	01	ALCOHOLISM	01
		ALZHEIMER'S DISEASE	02	ALZHEIMER'S DISEASE	02	ALZHEIMER'S DISEASE	02
		ARTHRITIS	03	ARTHRITIS	03	ARTHRITIS	03
		CANCER	04	CANCER	04	CANCER	04
		DEPRESSION	05	DEPRESSION	05	DEPRESSION	05
		DISRUPTIVE BEHAVIOR	06	DISRUPTIVE BEHAVIOR	06	DISRUPTIVE BEHAVIOR	06
		FRACTURE OTHER THAN HIP	07	FRACTURE OTHER THAN HIP	07	FRACTURE OTHER THAN HIP	07
		FRAIL/OLD AGE	08	FRAIL/OLD AGE	08	FRAIL/OLD AGE	08
		HARDENING OF THE ARTERIES OR ARTERIOSCLEROSIS	09	HARDENING OF THE ARTERIES OR ARTERIOSCLEROSIS	09	HARDENING OF THE ARTERIES OR ARTERIOSCLEROSIS	09
		HEART ATTACK (MI)	10	HEART ATTACK (MI)	10	HEART ATTACK (MI)	10
		HIP FRACTURE	11	HIP FRACTURE	11	HIP FRACTURE	11
		INCONTINENCE	12	INCONTINENCE	12	INCONTINENCE	12
		MENTAL ILLNESS	13	MENTAL ILLNESS	13	MENTAL ILLNESS	13
		NO MEDICAL CONDITION	14	NO MEDICAL CONDITION	14	NO MEDICAL CONDITION	14
		OSTEOPOROSIS (FRAGILE OR SOFT BONES)	15	OSTEOPOROSIS (FRAGILE OR SOFT BONES)	15	OSTEOPOROSIS (FRAGILE OR SOFT BONES)	15
		SENILITY	16	SENILITY	16	SENILITY	16
		STROKE	17	STROKE	17	STROKE	17
OTHER DISEASE OR CONDITION (SPECIFY)	91	OTHER DISEASE OR CONDITION (SPECIFY)	91	OTHER DISEASE OR CONDITION (SPECIFY)	91		
		_____		_____		_____	
		_____		_____		_____	
		_____		_____		_____	

	ADMISSION# 1	ADMISSION# 2	ADMISSION# 3
B-75. How long did (he/she) stay? GO TO CHART AFTER CODING LENGTH OF STAY.)	#: __ __ OF WKS 1 MOS 2 YRS 3 LESS THAN ONE WEEK 95 DK 98 (CHART)	#: __ __ OF WKS 1 MOS 2 YRS 3 LESS THAN ONE WEEK 95 DK 98 (CHART)	#: __ __ OF WKS 1 MOS 2 YRS 3 LESS THAN ONE WEEK 95 DK 98 (CHART)
B-76. Since (1980/1970) were there other admissions to a rest home, a nursing home, a mental health facility, a rehabilitation center or any place like that?	YES 1 (Q.B-70) NO 2	YES 1 (Q.B-70) NO 2	YES 1 (Q.B-70) NO 2

B-77 NOT ASKED THIS VERSION.

B-78. During the month before (his/her) death, was there significant change in (his/her) health?

YES 1
NO 2

B-79. During the 12 months prior to that, what was happening to (his/her) health? Had it improved, remained the same, gradually worsened, or suddenly worsened?

IMPROVED 1
REMAINED THE SAME 2
GRADUALLY WORSENERD 3
SUDDENLY WORSENERD 4
OTHER 5

B-79a. People sometimes have difficulty controlling urination as they get older. In the few months before (his/her) death, how often did (he/she) lose control over (his/her) urine? Would you say ...

Often; 1
Occasionally; or 2
Never? 3

B-80. Did (SUBJECT) die in a hospital or nursing home?

YES 1 (CHART)
NO 2

B-81. What was the cause of (SUBJECT'S) death?

HEART ATTACK 01
OTHER HEART CONDITION 02
SMALL STROKE 03
STROKE 04
DIABETES 05
HIGH BLOOD PRESSURE 06
CANCER 07
PNEUMONIA OR FLU 08
OLD AGE 09
OTHER 10 (PART D)
DK 98

B-82. [IF Q.B-81 CODED 1 THROUGH 8, ASK:]

Did a doctor say that (CONDITION) was the cause of death?

YES 1
NO 2 (PART D)
DON'T KNOW 8

B-83. [I have recorded that (SUBJECT) was hospitalized (READ DATES, CONDITIONS AND FACILITY NAMES FROM CHART).] Now, I would like you to think back over the time between (1980/1970) and the time (he/she) died. (He/She) would have been about (AGE) in (1980/1970). Had (he/she) stayed in a hospital for any (other) reason including tests or for observation since (he/she) was (AGE)? [PROBE: Was (he/she) there for more than a day?]

YES 1 (CHART)
 NO 2

B-84. Since (1980/1970), had (SUBJECT) ever stayed in a rest home, a nursing home, a mental health facility, or anything like that? [PROBE: Was (he/she) there for more than a day?]

YES 1 (CHART)
 NO 2

B-85. Did (SUBJECT) die in a hospital or nursing home?

YES 1 (CHART)
 NO 2

B-86. What was the cause of (SUBJECT'S) death?

HEART ATTACK 01
 OTHER HEART CONDITION 02
 SMALL STROKE 03
 STROKE 04
 DIABETES 05
 HIGH BLOOD PRESSURE 06
 CANCER 07
 PNEUMONIA OR FLU 08
 OLD AGE 09
 OTHER 10
 DK 98

TIME ENDED: _____ AM
 PM

PART C NOT ASKED THIS VERSION.

PART D: SMOKING AND ALCOHOLIC BEVERAGES

BOX A	
INTERVIEWER: CIRCLE ONE:	
<u>S</u> PREVIOUSLY INTERVIEWED	1 (PART G)
<u>S</u> NEVER INTERVIEWED	2

TIME BEGAN: _____ AM
PM

These next few questions are about (SUBJECT'S) smoking and drinking habits.

D-0. [IF R IS NOT RELATIVE, ASK:]

Do you think you can answer questions about this subject?

- YES 1
- NO 2 (PART G)
- DK 8

D-1. Did (SUBJECT) ever smoke at least 100 cigarettes in (his/her) lifetime?

- YES 1
- NO 2 (Q.D-8)

D-2. During the year prior to (his/her) death, did (he/she) smoke cigarettes?

- YES 1
- NO 2 (Q.D-5)
- DON'T KNOW 8 (Q.D-11)

D-3. About how many cigarettes a day did (he/she) smoke? [IF ANSWER IS NUMBER OF PACKS, MULTIPLY BY 20 AND VERIFY.]

- NUMBER OF CIGARETTES: |__|__|__| (Q.D-7)
- LESS THAN ONE A DAY 995 (Q.D-7)
- DON'T KNOW 998 (Q.D-7)

D-4 NOT ASKED THIS VERSION.

D-5. When did (he/she) stop smoking cigarettes?

MONTH: |__|__|
AND
YEAR: 19 |__|__|
DK 9998

D-6. During the years when (he/she) was smoking, about how many cigarettes a day did (he/she) smoke? [IF ANSWER IS NUMBER OF PACKS, MULTIPLY BY 20 AND VERIFY.]

NUMBER OF CIGARETTES: |__|__|__|
LESS THAN ONE A DAY 995
DK 998

D-7. For how many years did (he/she) smoke cigarettes?

NUMBER OF YEARS: |__|__|
DK 98

D-8. Now I would like to talk to you about drinking alcoholic beverages. By alcoholic beverages I mean beer, or wine, or liquor. Did (SUBJECT) have at least one drink of beer, wine, or liquor during the year prior to (his/her) death?

YES 1
NO 2 (PART G)

D-9. In the year prior to (his/her) death, on the average, how often did (he/she) drink alcoholic beverages, that is, beer or wine, or liquor?

NUMBER OF DAYS A WEEK: |__|__|
OR
NUMBER OF DAYS A MONTH: |__|__|
MORE THAN 3 BUT LESS
THAN 12 TIMES A YEAR 94
NO MORE THAN 3 TIMES A YEAR 95
DK 98

D-10. In the year prior to (his/her) death, on the average, how many cans or bottles of beer did (he/she) drink per day, week, month or year?

NUMBER OF DRINKS: |__|__| PER: DAY 1
WEEK 2
MONTH 3
YEAR 4
NONE 00
DK 98

D-11. In the year prior to (his/her) death, on the average, how many glasses of wine did (he/she) drink per day, week, month, or year?

NUMBER OF DRINKS: |__|__| PER: DAY 1
WEEK 2
MONTH 3
YEAR 4
NONE 00
DK 98

D-12. In the year prior to (his/her) death, on the average, how many shots or drinks of hard liquor, either straight or in a mixed drink, did (SUBJECT) drink per day, week, month or year?

NUMBER OF DRINKS: |__|__| PER: DAY 1
WEEK 2
MONTH 3
YEAR 4
NONE 00
DK 98

TIME ENDED: _____ AM
PM

PARTS E AND F NOT ASKED THIS VERSION.

PART G: PREGNANCY AND MENSTRUAL HISTORY

BOX F	
INTERVIEWER: CIRCLE ONE.	
§ IS MALE	1 (PART I)
§ WAS FEMALE AND PREVIOUSLY INTERVIEWED	2 (PART I)
§ WAS FEMALE AND <u>NEVER</u> INTERVIEWED	3

TIME BEGAN: _____ AM
 _____ PM

These next questions are about (SUBJECT'S) pregnancy and menstrual history.

G-0. [IF R IS NOT RELATIVE, ASK:]

Do you think you can answer questions about this subject?

YES 1
 NO 2 (PART I)
 DK 8

G-1. Was (SUBJECT) ever pregnant? Include live births, stillbirths, miscarriages and abortions.

YES 1
 NO 2 (Q.G-9)

G-2. How old was she when her first child was born? This means the first child born alive or stillborn.

AGE: |__|__|
 OR
 § HAD NO BIRTHS 0 (Q.G-5)
 DK 98

G-3. How old was she when her last child was born? Include stillbirths.

AGE: |__|__|
 DK 98

G-4. How many live births did she have?

NUMBER OF LIVE BIRTHS: |__|__|
 § HAD NO LIVE BIRTHS 0
 DK 98

G-5. Did she ever have a miscarriage?

YES 1
NO 2 (Q.G-9)
DK 8 (Q.G-9)

G-6. How many miscarriages did she have?

NUMBER OF MISCARRIAGES: |__|__|
DK 98

G-7 AND G-8 NOT ASKED THIS VERSION.

G-9. Did she ever take female hormone pills for reasons related to menopause, including hot flashes or mood changes around the time she was beginning the change of life? This would include hormone pills taken for natural change of life or because her periods stopped due to an operation.

YES 1
NO 2 (Q.G-13)
DK 8 (Q.G-13)

G-10 AND G-11 NOT ASKED THIS VERSION.

G-12. Altogether for about how many years did she take hormone pills?

NUMBER OF YEARS: |__|__|
OR
NUMBER OF MONTHS: |__|__|
LESS THAN ONE MONTH 95
DK 98

G-13. Did she ever take birth control pills for any reason?

YES 1
NO 2 (PART I)
DK 8 (PART I)

G-14 AND G-15 NOT ASKED THIS VERSION.

G-16. Altogether for about how many years did she take birth control pills?

NUMBER OF YEARS: |__|__|
OR
NUMBER OF MONTHS: |__|__|
LESS THAN ONE MONTH 95
DK 98

TIME ENDED: _____ AM
PM

PART H NOT ASKED THIS VERSION.

PART I: DEATH CERTIFICATE INFORMATION AND UPDATES

TIME BEGAN: _____ AM
PM

I-1 NOT ASKED THIS VERSION.

BOX 3	
INTERVIEWER:	CHECK PROBLEM SHEET TO SEE IF DEATH CERTIFICATE WAS OBTAINED AND CIRCLE ONE:
DEATH CERTIFICATE <u>WAS</u> OBTAINED	1 (BOX 4)
DEATH CERTIFICATE <u>WAS NOT</u> OBTAINED BUT SUF <u>WAS</u> COMPLETED RIGHT BEFORE THIS INTERVIEW	2 (BOX 4)
DEATH CERTIFICATE <u>WAS NOT</u> OBTAINED AND SUF <u>WAS NOT</u> COMPLETED RIGHT BEFORE THIS INTERVIEW.....	3

I-A. As part of this survey, we are contacting vital records agencies and requesting death certificates on participants who have died. At present, we have been unable to locate (SUBJECT'S) certificate. I would like to reconfirm some information with you. When did (SUBJECT) die?

MONTH: |__|__|
DAY: |__|__|
YEAR: 19 |__|__|

I-B. In what city, county, and state did (SUBJECT) die? [IF LOUISIANA, PROBE FOR PARISH.]

CITY: _____

COUNTY/PARISH: _____

STATE: _____

I-C. Was (he/she) buried in the same city?

YES 1
NO 2
DK 8

I-2 [FEMALE ONLY, ASK:] Please tell me (SUBJECT's) father's last name.

NAME: _____

BOX 4

INTERVIEWER: CIRCLE ONE:

PROXY ANSWERED ALL QUESTIONS 1 (PART J)

PROXY COULD NOT ANSWER ALL QUESTIONS 2

I-D. Is there anyone else who might be able to answer some of the questions about (SUBJECT) that you were unable to answer?

YES 1 (PART J)

NO 2

I need this person's name, address, telephone number and relationship to (SUBJECT).

NAME: _____

ADDRESS: _____

STREET NAME AND NUMBER

APT. NUMBER

CITY

STATE

ZIP CODE

TELEPHONE: () _____

What was (SECOND PROXY's) relationship to (SUBJECT)?

HUSBAND/WIFE 1

FATHER/MOTHER 2

FATHER IN-LAW/MOTHER IN-LAW 3

GRANDPARENT 4

SON/DAUGHTER 5

SON IN-LAW/DAUGHTER IN-LAW 6

GRANDCHILD 7

BROTHER/SISTER 8

BROTHER IN-LAW/SISTER IN-LAW 9

AUNT/UNCLE/COUSIN 10

NIECE/NEPHEW 11

ROOMMATE/FRIEND/NEIGHBOR 12

OTHER RELATIVE (SPECIFY) 91

OTHER NON-RELATIVE (SPECIFY) 92

TIME ENDED: _____ AM
PM

PART J: CLOSING STATEMENTS

TIME ENDED: _____ AM
PM

BOX G, J-1, BOX H, AND J-2 NOT ASKED THIS VERSION.

PLEASE CHECK THE HHCF CHART.	
ARE THERE ANY STAYS RECORDED?	
YES	1
NO	2 (Q.J-7)

BOX I	
INTERVIEWER: CIRCLE ONE:	
P IS RELATIVE	1
P IS NON-RELATIVE ...	2 (Q.J-5)

J-3. Thank you very much for taking the time to participate in this survey. As part of this survey, I would like to send you a form that authorizes the United States Public Health Service to obtain information from hospital or nursing home records. To do this I need to (confirm/have) your name and address.

NAME: _____

ADDRESS: _____

STREET NAME AND NUMBER

APT. NUMBER

CITY

STATE

ZIP CODE

And I need to confirm your telephone number.

TELEPHONE: (_____) _____

When you receive the form please sign your name. Then return the form in the postage paid envelope.

J-4 NOT ASKED THIS VERSION.

BOX J	
INTERVIEWER: CIRCLE ONE:	
P AGREES TO SIGN	1 (TERMINATE)
P REFUSES TO SIGN	2 (TERMINATE)

J-5. As part of this survey, it may be necessary to obtain information from hospital or nursing home records. To do this, we must have written authorization from someone related to (SUBJECT). Do you know a relative of (SUBJECT) who could sign this authorization?

YES 1
NO 2 (Q.J-7)

I need this person's name, address, telephone number and relationship to (SUBJECT). [VERIFY ALL SPELLING.]

NAME: _____

ADDRESS: _____
STREET NAME AND NUMBER APT. NUMBER

_____ CITY STATE ZIP CODE

TELEPHONE: () _____

What was (SECOND PROXY's) relationship to (SUBJECT)?

HUSBAND/WIFE 1
FATHER/MOTHER 2
FATHER IN-LAW/MOTHER IN-LAW 3
GRANDPARENT 4
SON/DAUGHTER 5
SON IN-LAW/DAUGHTER IN-LAW 6
GRANDCHILD 7
BROTHER/SISTER 8
BROTHER IN-LAW/SISTER IN-LAW 9
AUNT/UNCLE/COUSIN 10
NIECE/NEPHEW 11
ROOMMATE/FRIEND/NEIGHBOR 12
OTHER RELATIVE (SPECIFY) 91

_____ OTHER NON-RELATIVE (SPECIFY) 92

J-6 NOT ASKED THIS VERSION.

J-7. Thank you very much for taking the time to participate in this interview. In case we need to contact you again for some reason, I would like to confirm your name and telephone number.

NAME: _____

TELEPHONE: () _____

TIME ENDED: _____ AM
PM

PART K: RESPONDENT AND OBSERVATION SHEET
(TO BE COMPLETED AT CONCLUSION OF INTERVIEW)

BOX I NOT ASKED THIS VERSION.

K-1. DO YOU FEEL THAT THE INFORMATION PROVIDED BY THE PROXY WAS SATISFACTORY?

YES 1 (Q.K-4)
NO 2

K-2. WHY NOT?

K-3 NOT ASKED THIS VERSION.

K-4. IN REGARD TO THE QUESTIONNAIRE, DO YOU FEEL IT ...

	<u>YES</u>	<u>NO</u>	<u>UNCERTAIN</u>
a. HELD THE RESPONDENT'S ATTENTION THROUGHOUT THE INTERVIEW?	1	2	3
b. WAS UPSETTING OR DEPRESSING TO THE RESPONDENT?	1	2	3
c. WAS BORING OR UNINTERESTING TO THE RESPONDENT?	1	2	3

K-5. WITH REGARD TO THE PROXY, DO YOU FEEL THE ...

	<u>YES</u>	<u>NO</u>	<u>UNCERTAIN</u>
a. RESPONDENT WAS INTELLECTUALLY CAPABLE OF RESPONDING?	1	2	3
b. RESPONDENT'S ANSWERS WERE REASONABLY ACCURATE?	1	2	3
c. RESPONDENT UNDERSTOOD THE QUESTIONS?	1	2	3

K-6a. (IF YES TO K-4b OR K-4c, OR IF NO TO K-5a, K-5b OR K-5c:) WAS THERE A SECTION THAT SEEMED TO BE PARTICULARLY UPSETTING OR PROBLEMATIC FOR THE PROXY?

YES 1
NO 2 (Q.K-6b)

WHICH SECTION AND WHY?

K-6b. WAS THE PROXY HARD OF HEARING?

YES 1
NO 2

K-6c. WAS THE INTERVIEW CONDUCTED IN SPANISH?

YES 1
NO 2

K-7. RECORD ANY RELEVANT COMMENTS OR IMPRESSIONS YOU MAY HAVE HAD ABOUT THIS INTERVIEW.

NHANES 1 EPIDEMIOLOGIC FOLLOWUP STUDY
QUESTIONNAIRE A

PLEASE READ INSTRUCTIONS FIRST

- A. Please complete the following questions either by placing a check (✓) in the box next to the answer that best fits your situation or by writing your answer in the space provided.
- B. Unless the instructions tell you otherwise, check only one box.
- C. Some questions have instructions next to the answer telling you to skip questions which do not apply to you. First check the box, then follow the skip as directed.
- D. Please follow all instructions carefully. Instructions are in CAPITAL letters.
- E. If you are filling out this questionnaire for a person who is too ill to answer for herself/himself, when reading the questions please substitute the participant's name for the word "your." For example, A-3 would read, "Does Mr. Jones currently live in a private home or apartment, a nursing home or rest home, or does he have some other arrangement?"
- F. If the person named in A-1 is deceased, do not fill out this form. Instead fill out Questionnaire B.
- G. Some people will receive Questionnaire A Supplement. If a Questionnaire A supplement is enclosed, please fill it out.
- H. If you have any questions about how to fill out the questionnaire, please call our toll-free number, 800-638-8778, and ask for the National HANES Survey Supervisor.

ASSURANCE OF CONFIDENTIALITY

All information which would provide identification of the individual will be held in strict confidence, will be used only for purposes of and by persons engaged in the survey, and will not be disclosed or released to others for any purposes in accordance with Section 308(d) of the Public Health Service Act (42 USC 242m).

A. GENERAL INFORMATION

A-1. Please review the information in the box below and correct any data that is incorrect or missing.

NAME OF PARTICIPANT:	FIRST	MIDDLE	LAST
CURRENT ADDRESS:	STREET		
	CITY	STATE	ZIP
TELEPHONE NUMBER:	()		

CORRECTIONS: (RECORD CORRECTIONS OR MISSING DATA BELOW)			
NAME OF PARTICIPANT:	FIRST	MIDDLE	LAST
CURRENT ADDRESS:	STREET		
	CITY	STATE	ZIP
TELEPHONE NUMBER:	()		

A-2. What is your date of birth?

 MONTH DAY YEAR

A-3. Do you currently live in a private home or apartment, a nursing home or rest home, or do you have some other arrangement?

1 <input type="checkbox"/> Private house or apartment	3 <input type="checkbox"/> Boarding house, rooming house or rented room
2 <input type="checkbox"/> Nursing or convalescent or rest home	4 <input type="checkbox"/> Some other arrangement (DESCRIBE)

↓

A-4. Do you live alone?

1 Yes

2 No (SKIP TO QUESTION A-6)

A-5. How long have you lived alone?

OF YEARS: _____ (SKIP TO QUESTION A-7)

OR # OF MONTHS: _____ (SKIP TO QUESTION A-7)

A-6. What is the sex and relationship to you of the other people who live in your household? If you do not live in a household (for example, you live in a nursing home), tell us who you lived with before you entered the nursing home.

HOUSEHOLD MEMBERS (e.g., HUSBAND)	SEX (MALE OR FEMALE)
1. _____	_____
2. _____	_____
3. _____	_____
4. _____	_____
5. _____	_____
6. _____	_____
7. _____	_____
8. _____	_____

A-7. Are you currently married, widowed, divorced, separated, or have you never been married?

- | | |
|-------------------------------------|--|
| 1 <input type="checkbox"/> Married | 4 <input type="checkbox"/> Separated |
| 2 <input type="checkbox"/> Widowed | 5 <input type="checkbox"/> Never married |
| 3 <input type="checkbox"/> Divorced | |

A-8. As part of this survey, we would like to have your social security number. Provision of this number is voluntary and not providing the number will not have any effect on your receipt of benefits from the Federal Government. This number will be useful in conducting future followup studies. It will be used to match against future mortality records. This information is collected under the authority of Section 306 of the Public Health Service Act. What is your social security number?

Social Security #: --

B. YOUR HEALTH

These next questions are about your health.

B-1. Would you say that your health in general is excellent, very good, good, fair or poor?

- | | |
|--------------------------------------|---------------------------------|
| 1 <input type="checkbox"/> Excellent | 4 <input type="checkbox"/> Fair |
| 2 <input type="checkbox"/> Very good | 5 <input type="checkbox"/> Poor |
| 3 <input type="checkbox"/> Good | |

B-2. Did a doctor ever tell you that you have arthritis?

- | |
|--|
| 1 <input type="checkbox"/> Yes |
| 2 <input type="checkbox"/> No (SKIP TO QUESTION B-4) |
| 8 <input type="checkbox"/> Don't know (SKIP TO QUESTION B-4) |

B-3. What type of arthritis do you have?

- | | |
|---|--|
| 1 <input type="checkbox"/> Rheumatoid | 5 <input type="checkbox"/> Degenerative |
| 2 <input type="checkbox"/> Osteoarthritis | 6 <input type="checkbox"/> Another type (DESCRIBE)
↓
_____ |
| 3 <input type="checkbox"/> Lupus | |
| 4 <input type="checkbox"/> Gout | 8 <input type="checkbox"/> Don't know |

B-4. Since _____ has a doctor told you that you had any of the following conditions. If you have, please also tell us the years you had the condition. (CHECK ALL THAT APPLY.)

CONDITION		YEARS HAD CONDITION
1	<input type="checkbox"/> Heart attack	_____
2	<input type="checkbox"/> <u>Small</u> stroke (sometimes known as TIA)	_____
3	<input type="checkbox"/> Stroke (sometimes called a CVA)	_____
4	<input type="checkbox"/> Broken or fractured hip	_____

B-5. Have you ever had coronary by-pass surgery?

- 1 Yes
- 2 No
- 8 Don't know

B-6. Have you ever had pacemaker replacement, insertion or repair?

- 1 Yes
- 2 No
- 8 Don't know

B-7. Did a doctor ever tell you you have diabetes or sugar diabetes?

- 1 Yes
- 2 No (SKIP TO QUESTION B-11)
- 8 Don't know (SKIP TO QUESTION B-11)

B-8. In what year were you first told that you had diabetes or sugar diabetes?

YEAR

B-9. Are you now taking insulin injections for your diabetes?

- 1 Yes
- 2 No
- 8 Don't know

B-10. Are you now taking oral medication for your diabetes?

- 1 Yes
- 2 No
- 8 Don't know

B-11. Have you ever been told by the doctor that you had high blood pressure or hypertension?

- 1 Yes
- 2 No (SKIP TO QUESTION B-15)
- 8 Don't know (SKIP TO QUESTION B-15)

B-12. In what year were you first told that you had high blood pressure or hypertension?

YEAR

B-13. Has the doctor ever prescribed medicine for your high blood pressure?

- 1 Yes
- 2 No (SKIP TO QUESTION B-15)
- 8 Don't know (SKIP TO QUESTION B-15)

B-14. Do you currently take this medicine regularly?

- 1 Yes
- 2 No
- 8 Don't know

B-15. Since _____ have you had any type of cancer diagnosed?

- 1 Yes
- 2 No (SKIP TO QUESTION B-17)
- 8 Don't know (SKIP TO QUESTION B-17)

B-16. Where was the cancer or what type of cancer was it? In what year were you first told that you had this type of cancer?

	TYPE OF CANCER	YEAR FIRST TOLD
1.	_____	_____
2.	_____	_____
3.	_____	_____

B-17. Since 1970, have you broken or fractured any bones other than a hip?

- 1 Yes
- 2 No (SKIP TO QUESTION B-19)
- 8 Don't know (SKIP TO QUESTION B-19)

B-18. Which bones have you fractured since 1970 and in what year was the break or fracture?

	BONE	YEAR BROKEN
1.	_____	_____
2.	_____	_____
3.	_____	_____

B-20. Since _____, have you ever stayed overnight or longer in a rest home, a nursing home, a mental health facility, or anything like that? For each stay, please record the date you went into the facility, the reason you went to the facility, the type of facility (e.g., nursing home) and the name and address of the facility.

- 1 Yes - RECORD ALL STAYS BELOW
2 No (SKIP TO QUESTION B-21)

STAY #1: DATE OF ADMISSION: _____ / _____ / _____
MO DA YR
REASON FOR STAY: _____
TYPE OF FACILITY: _____
NAME OF FACILITY: _____
ADDRESS OF FACILITY: _____
STREET
CITY STATE
OTHER COMMENTS: _____

STAY #2: DATE OF ADMISSION: _____ / _____ / _____
MO DA YR
REASON FOR STAY: _____
TYPE OF FACILITY: _____
NAME OF FACILITY: _____
ADDRESS OF FACILITY: _____
STREET
CITY STATE
OTHER COMMENTS: _____

STAY #3: DATE OF ADMISSION: _____ / _____ / _____
MO DA YR
REASON FOR STAY: _____
TYPE OF FACILITY: _____
NAME OF FACILITY: _____
ADDRESS OF FACILITY: _____
STREET
CITY STATE
OTHER COMMENTS: _____

STAY #4: DATE OF ADMISSION: _____ / _____ / _____
MO DA YR
REASON FOR STAY: _____
TYPE OF FACILITY: _____
NAME OF FACILITY: _____
ADDRESS OF FACILITY: _____
STREET
CITY STATE
OTHER COMMENTS: _____

(IF YOU HAVE STAYED IN ANY HEALTH CARE FACILITY OVERNIGHT OR LONGER FOR MORE THAN FOUR TIMES, PLEASE CONTINUE RECORDING INFORMATION ABOUT STAYS ON A SHEET OF PAPER AND INCLUDE IT IN THE RETURN ENVELOPE.)

B-21. (IF YOU ARE CURRENTLY IN A NURSING HOME, ANSWER B21 AND B22; OTHERWISE, SKIP TO B-23.)

During the month before your admission to the nursing home, was there a significant change in your health?

- 1 Yes
2 No

B-22. During the 12 months prior to that, what was happening to your health? Had it improved, remained the same, gradually worsened, or suddenly worsened?

- 1 Improved
2 Remained the same
3 Gradually worsened
4 Suddenly worsened

B-23. (IF YOU ARE NOT CURRENTLY IN A NURSING HOME, ANSWER B-23; OTHERWISE SKIP TO B-24.)

What has been happening to your health during the past 12 months? Has it improved, remained the same, gradually worsened, or suddenly worsened?

- 1 Improved
2 Remained the same
3 Gradually worsened
4 Suddenly worsened

B-24. As part of this survey, it may be necessary to obtain additional information from hospital or nursing home records. The enclosed form entitled "Authorization to Obtain Information from Medical Records" authorizes the U.S. Public Health Service to obtain this information. Please read the form and record any other names under which hospital or in-patient health facility records could be listed. If the records would not be listed under any other name, check the box. Sign your name on the signature of subject line if you are answering the questionnaire for yourself. If you are answering the questionnaire on behalf of the participant because he/she is incapacitated, please have the participant fill out his/her name. Also, be sure to date the form.

Please return all forms in the postage-paid envelope.

B-25. Please give me the name, address, and telephone number of a relative or friend who would know how to get in touch with you in case we need to contact you again and have a hard time getting hold of you.

NAME: _____
ADDRESS: _____
STREET NAME AND NUMBER APT. NUMBER
CITY STATE ZIP CODE
TELEPHONE: () _____ - _____
How is that person related to you? _____

B-26. (IF YOU ARE ANSWERING THIS QUESTIONNAIRE FOR ANOTHER PERSON):

Please record your name, address and telephone number and your relationship to the participant.

NAME: _____
ADDRESS: _____
STREET NAME AND NUMBER APT. NUMBER
CITY STATE ZIP CODE
TELEPHONE: () _____ - _____
RELATIONSHIP TO PARTICIPANT: _____

Thank you very much for taking the time to participate in this interview.

NHANES 1 EPIDEMIOLOGIC FOLLOWUP STUDY
QUESTIONNAIRE A - SUPPLEMENT

C. SMOKING AND ALCOHOLIC BEVERAGES

C-1. Did you ever smoke at least 100 cigarettes in your lifetime?

- 1 Yes
2 No (SKIP TO QUESTION C-8)

C-2. Do you smoke cigarettes now?

- 1 Yes
2 No (SKIP TO QUESTION C-5)

C-3. About how many cigarettes a day do you now smoke?

_____ /
PER DAY

C-4. For how many years have you smoked cigarettes?

_____ (SKIP TO C-8)
YEARS

C-5. When did you stop smoking cigarettes?

_____/_____
MONTH YEAR

C-6. During the years when you were smoking, about how many cigarettes a day did you smoke?

_____ /
PER DAY

C-7. For how many years did you smoke cigarettes?

_____ /
YEARS

C-8 These next questions are about alcoholic beverages, that is, beer or wine or liquor. Have you had at least one drink of beer, wine or liquor during the past year?

- 1 Yes
2 No (SKIP TO END)

C-9. During the past year, on the average, how often did you drink alcoholic beverages, that is, beer, or wine, or liquor?

OF DAYS per 1 Week
2 Month

C-10. During the past year, on the average, how many cans or bottles of beer did you drink per day, week, month or year? (IF NONE, RECORD ON LINE BELOW.)

OF DRINKS per 1 Day
2 Week
3 Month
4 Year

C-11. During the past year, on the average, how many glasses of wine did you drink per day, week, month, or year? (IF NONE, RECORD ON LINE BELOW.)

OF DRINKS per 1 Day
2 Week
3 Month
4 Year

C-12. During the past year, on the average, how many shots or drinks of hard liquor, either straight or in a mixed drink, did you drink per day, week, month or year? (IF NONE, RECORD ON LINE BELOW.)

OF DRINKS per 1 Day
2 Week
3 Month
4 Year

NHANES 1 EPIDEMIOLOGIC FOLLOWUP STUDY
QUESTIONNAIRE A - SUPPLEMENT

D. FEMALE MEDICAL HISTORY

D-1. Have you ever been pregnant? (INCLUDE LIVE BIRTHS, STILLBIRTHS, MISCARRIAGES AND ABORTIONS.)

- 1 Yes
2 No (SKIP TO QUESTION D-7)

D-2. How old were you when your first child was born? This means the first child born alive or stillborn. (IF NONE, RECORD NONE ON LINE BELOW.)

AGE

D-3. How old were you when your last child was born? Include stillbirths.

AGE

D-4. How many live births have you had? (IF NONE, RECORD NONE ON LINE BELOW.)

LIVE BIRTHS

D-5. Have you ever had a miscarriage?

- 1 Yes
2 No (SKIP TO QUESTION D-7)

D-6. How many miscarriages have you had?

OF MISCARRIAGES

D-7. At what age did you have your last period?

AGE

D-8. Did your periods stop naturally, because of surgery, or for some other reason?

- 1 Naturally
2 Surgery
3 Some other reason (DESCRIBE)

D-9. Did you ever take female hormone pills for reasons related to menopause, including hot flashes or mood changes around the time you were beginning the change of life? This would include hormone pills taken for natural change of life or because your periods stopped due to an operation.

- 1 Yes
2 No (SKIP TO QUESTION D-13)
8 Don't know (SKIP TO QUESTION D-13)

D-10. How old were you when you first took hormone pills?

AGE

D-11. How old were you when you last took hormone pills?

_____ OR STILL TAKING HORMONE PILLS
AGE

D-12. Altogether for about how many years have you taken hormone pills?

OF YEARS

D-13. Have you ever taken birth control pills for any reason?

- 1 Yes
2 No (SKIP TO END)
8 Don't know (SKIP TO END)

D-14. How old were you when you first took birth control pills?

AGE

D-15. How old were you when you last took birth control pills?

_____ OR STILL TAKING BIRTH CONTROL PILLS
AGE

D-16. Altogether for about how many years have you taken birth control pills?

OF YEARS

NHANES 1 EPIDEMIOLOGIC FOLLOWUP STUDY
QUESTIONNAIRE B

PLEASE READ INSTRUCTIONS FIRST

- A. Please complete the following questions only if the person named in the box below is deceased.
- B. Please complete the following questions either by placing a check (✓) in the box next to the answer that best fits the situation or by writing your answer in the space provided.
- C. Unless the instructions tell you otherwise, check only one box.
- D. Some questions have instructions next to the answer telling you to skip questions which do not apply to you. First check the box, then follow the skip as directed.
- E. Please follow all instructions carefully. Instructions are in CAPITAL letters.
- F. If you have any questions about how to fill out the questionnaire, please call our toll-free number, 800-638-8778, and ask for the National HANES Survey Supervisor.

1. Please review the information in the box below and correct if incorrect or missing.

NAME OF DECEASED PARTICIPANT:	_____	_____	_____
	FIRST	MIDDLE	LAST
DATE OF BIRTH:	____/____/____		
	MONTH	DAY	YEAR

<u>CORRECTIONS (RECORD CORRECTIONS OR MISSING DATA BELOW)</u>			
NAME OF DECEASED PARTICIPANT:	_____	_____	_____
	FIRST	MIDDLE	LAST
DATE OF BIRTH:	____/____/____		
	MONTH	DAY	YEAR

ASSURANCE OF CONFIDENTIALITY

All information which would provide identification of the individual will be held in strict confidence, will be used only for purposes of and by persons engaged in the survey, and will not be disclosed or released to others for any purposes in accordance with Section 308(d) of the Public Health Service Act (42 USC 242m).

3. Since _____, had the participant ever stayed overnight or longer in a rest home, a nursing home, a mental health facility, or anything like that? For each stay, please record the date he/she went into the facility, the reason he/she went to the facility, the type of facility (e.g., nursing home) and the name and address of the facility.

1 Yes - RECORD ALL STAYS BELOW

2 No (SKIP TO QUESTION 4)

STAY #1: DATE OF ADMISSION: _____ / _____ / _____
MO DA YR

REASON FOR STAY: _____

TYPE OF FACILITY: _____

NAME OF FACILITY: _____

ADDRESS OF FACILITY: _____
STREET

_____ CITY STATE

OTHER COMMENTS: _____

STAY #2: DATE OF ADMISSION: _____ / _____ / _____
MO DA YR

REASON FOR STAY: _____

TYPE OF FACILITY: _____

NAME OF FACILITY: _____

ADDRESS OF FACILITY: _____
STREET

_____ CITY STATE

OTHER COMMENTS: _____

STAY #3: DATE OF ADMISSION: _____ / _____ / _____
MO DA YR

REASON FOR STAY: _____

TYPE OF FACILITY: _____

NAME OF FACILITY: _____

ADDRESS OF FACILITY: _____
STREET

_____ CITY STATE

OTHER COMMENTS: _____

STAY #4: DATE OF ADMISSION: _____ / _____ / _____
MO DA YR

REASON FOR STAY: _____

TYPE OF FACILITY: _____

NAME OF FACILITY: _____

ADDRESS OF FACILITY: _____
STREET

_____ CITY STATE

OTHER COMMENTS: _____

(IF HE/SHE HAD STAYED IN ANY HEALTH CARE FACILITY OVERNIGHT OR LONGER FOR MORE THAN FOUR TIMES, PLEASE CONTINUE RECORDING INFORMATION ABOUT STAYS ON A SHEET OF PAPER AND INCLUDE IT IN THE RETURN ENVELOPE.)

4. Did the participant die in either a hospital or nursing home?

- 1 Yes
2 No (SKIP TO QUESTION 6)
3 Don't know (SKIP TO QUESTION 6)

5. Please record the name and address of the hospital or nursing home.

NAME: _____

ADDRESS: _____

STREET

CITY

STATE

6. What was his/her date of death?

MONTH

DAY

YEAR

7. In what city, county and state did he/she die?

CITY: _____

COUNTY OR PARISH: _____

STATE: _____

8. As part of this survey, it may be necessary to obtain additional information from hospital or nursing home records. The enclosed form entitled "Authorization to Obtain Information from Medical Records" authorizes the U.S. Public Health Service to obtain this information. Please read the form and record any other names under which hospital or in-patient health facility records could be listed. If the records would not be listed under any other name, check the box. Sign your name on the signature of next-of-kin line. Also record the date you signed the form and the date, county and state of death of the participant.

Please return all forms in the postage-paid envelope.

9. Please record your name, address and telephone number and your relationship to the participant.

NAME: _____

ADDRESS: _____

STREET NAME AND NUMBER

APT. NUMBER

CITY

STATE

ZIP CODE

TELEPHONE: () _____

RELATIONSHIP TO PARTICIPANT: _____

10. FEMALE ONLY: Please record the participant's father's last name.

FATHER'S LAST NAME: _____

Thank you very much for taking the time to participate in this interview.

NHANES I EPIDEMIOLOGIC
FOLLOWUP STUDY

Verbal Authorization to Obtain Information
From Medical Records

SUBJECT

This is to certify that _____ has verbally consented
SUBJECT NAME
to sign a medical authorization form thereby authorizing the release of
pertinent information regarding hospitalizations, illnesses and health
care.

INTERVIEWER'S SIGNATURE

DATE

NEXT-OF-KIN

This is to certify that _____, who is the
RESPONDENT NAME
_____ of _____, has verbally
RELATIONSHIP TO SUBJECT SUBJECT NAME
consented to sign a medical authorization form, thereby authorizing the
release of pertinent information regarding hospitalizations, illnesses and
health care.

INTERVIEWER'S SIGNATURE

DATE

U.S. Department of Health and Human Services
National Center for Health Statistics
National Institute on Aging
NHANES I Epidemiologic Followup Survey

NOTICE - Information contained on this form which would permit identification of any individual or establishment has been collected with a guarantee that it will be held in strict confidence, will be used only for purposes stated for this study, and will not be disclosed or released to others without the consent of the individual or establishment in accordance with Section 308(d) of the Public Health Service Act (42 USC 242m).

AUTHORIZATION TO OBTAIN INFORMATION
FROM MEDICAL RECORDS

In connection with the health history of _____ given as part of the National Health and Nutrition Examination Followup Survey, it may be necessary to obtain additional information from records and staff of hospitals or other inpatient health facilities. I hereby authorize the release of such information as the U.S. Public Health Service may need to request from any of these sources. I understand that I may revoke this consent at any time except to the extent that action has already been taken. I also understand that this authorization expires one year from the date of signature.

I understand that all information obtained will be held strictly confidential.

My records may also be listed under the following first and last names (e.g., name change due to marriage):

OR

Check box if records would not be listed under any other name.

SIGNATURE OF NEXT-OF-KIN

SIGNATURE OF SUBJECT

DATE

DATE

RELATIONSHIP

This authorization expires one year from date of signature.

DATE OF DEATH (MO/DAY/YEAR)

COUNTY AND STATE OF DEATH

STAY FACILITY NAME:
DATE: ^{Month} ^{Day} 19 AHA/MFI #:
ADDRESS: _____
STREET
CITY STATE
Q#: - CONDITION:
Q#: - CONDITION:
Q#: - CONDITION:
Q#: - CONDITION:
COMMENTS: _____

STAY FACILITY NAME:
DATE: ^{Month} ^{Day} 19 AHA/MFI #:
ADDRESS: _____
STREET
CITY STATE
Q#: - CONDITION:
Q#: - CONDITION:
Q#: - CONDITION:
Q#: - CONDITION:
COMMENTS: _____

STAY FACILITY NAME:
DATE: ^{Month} ^{Day} 19 AHA/MFI #:
ADDRESS: _____
STREET
CITY STATE
Q#: - CONDITION:
Q#: - CONDITION:
Q#: - CONDITION:
Q#: - CONDITION:
COMMENTS: _____

STAY FACILITY NAME:
DATE: ^{Month} ^{Day} 19 AHA/MFI #:
ADDRESS: _____
STREET
CITY STATE
Q#: - CONDITION:
Q#: - CONDITION:
Q#: - CONDITION:
Q#: - CONDITION:
COMMENTS: _____



National Center for Health Statistics
3700 East-West Highway
Hyattsville, MD 20782

Dear Administrator:

I am writing to inform you of a request which has been made to your Medical Records department. The NHANES I Epidemiologic Followup Study: Continued Followup of the Elderly is being carried out by the National Center for Health Statistics (NCHS), the National Institute on Aging, and other components of the National Institutes of Health.

A selected sample of the United States population volunteered to participate in the first National Health and Nutrition Examination Survey which NCHS conducted from 1971-1975. We have recently contacted these participants to provide new information about the etiology of chronic disease. A crucial component of the study is a very limited hospital record data collection to augment information obtained from these participants. Participants who have been hospitalized have signed authorization forms to permit the release of diagnostic information from their hospital records.

NCHS has contracted with Westat, a national survey organization, to conduct the data collection operations of this survey. Westat has, therefore, sent a packet to your Director of Medical Records on behalf of the patients in the study. This survey is authorized by Title 42, United States Code 242k. Participation in this survey is completely voluntary. There are no penalties for refusing to answer any question. All information obtained will be held strictly confidential. No information that could be used to identify your hospital or any individual will be released or published. Results of this study will be published only as statistical summaries.

The American Hospital Association has endorsed this study and urges your cooperation. Dr. Ross Mullner of the Association may be reached at (312) 280-6519 if you have any questions concerning this endorsement. If you have any questions concerning the data collection, don't hesitate to call Kathleen Parkes at (301)251-4351.

Sincerely yours,

A handwritten signature in cursive script that reads "M Feinleib".

Manning Feinleib, M.D., Dr.P.H.
Director



National Center for Health Statistics
3700 East-West Highway
Hyattsville, MD 20782

Director of Medical Records:

A new research study is being carried out by the National Center for Health Statistics (NCHS), National Institute on Aging and other components of the National Institutes of Health.

A selected sample of the United States population volunteered to participate in the first National Health and Nutrition Examination Survey which NCHS conducted from 1971-1975. We have recently reinterviewed these participants to provide new information about the etiology of chronic disease. A crucial component of the study is a very limited hospital record data collection to augment information obtained from these participants. Enclosed are signed authorization forms specifically permitting us to obtain diagnostic data from their medical record.

This survey is authorized by Title 42, United States Code 242k. Participation in this survey is completely voluntary. There are no penalties for refusing to answer any question. NCHS has contracted with Westat, a national survey organization, to conduct the data collection operations of this survey. All information obtained will be held strictly confidential and will be used for statistical purposes only. No information that could be used to identify the participants or your hospital will be released or published. Results of this study will be published only as statistical summaries.

The American Hospital Association (AHA) has endorsed this study and urges your cooperation. Your hospital's participation is vital to the success of this study. If you have any questions concerning this project, please feel free to call Kathleen Parkes collect at (301) 251-4351.

Sincerely yours,

A handwritten signature in black ink, reading "M Feinleib". The signature is written in a cursive style with a large, prominent initial "M".

Manning Feinleib, M.D., Dr.P.H.
Director

Enclosure

6. WHAT WERE THE DIAGNOSES ESTABLISHED AT TIME OF DISCHARGE? [Principal diagnosis is the condition after study chiefly responsible for the hospital stay.] (If more space is needed for additional diagnoses, write the diagnoses and the Westat ID number on a separate sheet of paper and attach to this form.)

Principal Diagnosis:

1.) _____

Other Diagnoses:

2.) _____

3.) _____

4.) _____

5.) _____

6.) _____

7.) _____

8.) _____

9.) _____

10.) _____

OFFICE USE ONLY				
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				
9.				
10.				

7. WHAT WERE THE SURGICAL PROCEDURES PERFORMED DURING THIS ADMISSION? (Include all biopsy and surgical procedures discussed or listed in the discharge summary.)

SURGICAL PROCEDURES:

Check if none

1. _____

2. _____

3. _____

4. _____

5. _____

OFFICE USE ONLY			
1.			
2.			
3.			
4.			
5.			

8. PLEASE ATTACH A PHOTOCOPY OF THE THIRD DAY EKG IF MYOCARDIAL INFARCTION DIAGNOSED DURING THIS STAY. PLEASE ATTACH A PHOTOCOPY OF THE PATHOLOGY REPORT CONFIRMING THE DIAGNOSIS OF CANCER MADE DURING THIS STAY. (Write the Westat I.D. number on each photocopied page.)

Attachments

	yes	no	N/A	
a. Third Day EKG	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(Reason No/NA) _____
b. Pathology Report	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(Reason No/NA) _____

9. PLEASE ATTACH A PHOTOCOPY OF THE FACE SHEET AND THE DISCHARGE SUMMARY FOR THIS INPATIENT STAY. (Write the Westat I.D. number on each photocopied page.)

Attachments

	Yes	No	N/A	
a. Face Sheet	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(Reason No/NA) _____
b. Discharge Summary	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(Reason No/NA) _____

COMPLETED BY _____

DATE _____



National Center for Health Statistics
3700 East-West Highway
Hyattsville MD 20782

Dear Administrator:

The National Center for Health Statistics (NCHS) is conducting a followup study of the participants in the first National Health and Nutrition Examination Survey (NHANES I) to provide new information about the etiology of chronic disease. We need your assistance.

A selected sample of the United States population volunteered to participate in the first National Health and Nutrition Examination Survey which NCHS conducted from 1971-1975. NCHS is now tracing and reinterviewing those 14,407 persons to study the relationship between physical measures (e.g., blood pressure or functional vital capacity), behavioral variables (e.g., smoking or dietary intake), and other risk factors identified in the NHANES I Survey and subsequent disease reported by the person at followup.

A crucial component of the study is a very limited nursing home record data collection. Diagnostic information from the nursing home record will be used to verify and supplement each respondent's self-reported medical history. Each person or next of kin (in cases of death or disability) has signed a form requesting the release of his/her nursing home care records to the survey researchers. (Copies of these authorizations are enclosed.) Nursing homes will be reimbursed for the cost incurred.

This survey is authorized by Title 42, United States Code 242k. Participation in this survey is completely voluntary. There are no penalties for refusing to answer any question. NCHS has contracted with Westat a national survey organization to conduct the data collection operations of this survey. All information obtained will be held strictly confidential and will be used for statistical purposes only. No information that could be used to identify the participants or your nursing home will be released or published. Results of this study will be published only as statistical summaries.

Your participation is vital to the success of this study. If you have any questions concerning this project, please feel free to call Kathleen Parkes collect at (301) 251-4351.

Sincerely yours,

A handwritten signature in cursive script that reads "M Feinleib".

Manning Feinleib, M.D., Dr.P.H.
Director

Enclosures

NOTICE: - Information contained on this form which would permit identification of any individual or establishment has been collected with a guarantee that it will be held in strict confidence, will be used only for purposes stated for this study, and will not be disclosed or released to others without the consent of the individual or establishment in accordance with Section 308(d) of the Public Health Service Act (42 USC 242m).

Information shown on label agrees with nursing home records. Other (specify) _____

U.S. Department of Health and Human Services
National Center for Health Statistics
National Institute on Aging
NHANES I Epidemiologic Followup Survey

NURSING HOME/PERSONAL CARE HOME RECORD FORM
(TO BE COMPLETED BY MEDICAL RECORDS DEPARTMENT)

1. PATIENT MEDICAL RECORD NUMBER _____

2. DATE OF ADMISSION ___/___/___ DATE OF DISCHARGE ___/___/___
MONTH DAY YEAR MONTH DAY YEAR

3. PATIENT ADMITTED FROM: (Check One)

Private residence Chronic disease hospital (SPECIFY BELOW)
Acute care hospital (SPECIFY BELOW) Other nursing home (SPECIFY BELOW)

NAME OF FACILITY: _____ CITY/STATE: _____

4. OTHER HOSPITALS PROVIDING CARE DURING NURSING HOME/PERSONAL CARE HOME STAY

Name: _____ City/State: _____ Year: _____
Name: _____ City/State: _____ Year: _____
Name: _____ City/State: _____ Year: _____

5. DISPOSITION OF PATIENT (Check One)

Not discharged/still inpatient Died
Discharged to private residence/referral to organized home care services Discharged to private residence/no referral
Transferred to another health care facility (SPECIFY BELOW)
Acute care hospital facility or organization Chronic disease hospital
Other nursing home Other (SPECIFY) _____

NAME OF FACILITY: _____ CITY/STATE: _____

6. WHAT WERE THE DIAGNOSES ESTABLISHED AT ADMISSION?

Principal Diagnosis at Admission :

1. _____

Other Major Diseases or Conditions Present
 at Time of Admission :

2. _____

3. _____

4. _____

5. _____

6. _____

OFFICE USE ONLY					
1.					
2.					
3.					
4.					
5.					
6.					

7. PLEASE ATTACH A PHOTOCOPY OF THE ADMISSION SHEET. (Write the Westat I.D. number on each photocopied page. If you do not have photocopying capabilities, please transcribe the information from the admission sheet onto a separate sheet, record the Westat ID Number on that sheet, and staple it to THIS form.)

Admission Sheet Included: Yes No
 (Why not? _____)

 COMPLETED BY

 DATE

Appendix II Corrections and revisions to the NHANES I baseline data

Three demographic data items (date of birth, sex, and race) from the NHANES I baseline data tapes were corrected for a small number of subjects based on updated information received during the 1982–84 NHANES I Epidemiologic Followup Study (NHEFS). Consequently, the 1982–84 Followup and the 1986 Followup Public Use Data Tapes, as will all subsequent NHEFS Followup Public Use Data Tapes, reflect the corrections noted in this section.

Date of birth

Initially, the date of birth for each NHANES I respondent was recorded during the household interview and subsequently coded on the NHANES I data tapes. The household interview usually was conducted with one member (or more) of the household providing social and demographic information for all household members. The NHANES I sample was then drawn from these household listings. On arrival at the Mobile Examination Center (MEC), the subject was asked to supply his or her date of birth, which was entered on a record and later microfilmed. The date of birth on the MEC record was provided by the subject but was not coded on the NHANES I data tape. Thus, the original NHANES I date of birth is the one obtained during the household interview.

During the field work for the Followup Study, the MEC record (when available) was used to update the date of birth for all lost-to-followup respondents in the hope that it would improve tracing results. In addition, the MEC record was used to update the date of birth for decedents and incapacitated subjects who had been interviewed by proxy. Date of birth information was also updated for all confirmed respondents who, during tracing, supplied a date of birth that differed from the date of birth provided at baseline. As a result, date of birth information was corrected for 677 of the 14,407 subjects in the NHEFS cohort.

The age given at baseline examination was then recalculated based on these corrected dates of birth. The recalculations of age at baseline examination resulted in 224 age changes of 1 year or more. For 31 respondents, recalculation resulted in ages outside the designated age range of 25–74 years (two subjects were determined to be 24 years of age, 26 were 75 years of age, one was 76 years of age, and two were 77 years of age). Nonetheless, these respondents will continue to be included in the cohort and are

treated as 25 and 74 years of age in cases in which age is categorized. A cross-tabulation of the recalculated age at baseline examination by the original age at examination is presented below.

Original age at baseline examination	Revised age at baseline examination				
	25–34 years	35–44 years	45–54 years	55–64 years	65–74 years
25–34 years	3,508	4	1	–	–
35–44 years	1	2,937	8	–	–
45–54 years	–	–	2,268	15	–
55–64 years	–	–	3	1,804	1
65–74 years	–	–	–	5	3,852

Information on date of birth was collected if the respondent was administered the tracing questionnaire in the 1986 NHEFS. This information, though, was not used to amend date of birth or the age at NHANES I variables generated from data from the 1982–84 NHEFS. In other words, date of birth and the age at NHANES I variables were *not* revised using data collected from the 1986 NHEFS. Furthermore, these variables will never be updated from any information collected from the 1987 NHEFS or other followups of the NHEFS.

Sex

The baseline sex code was changed from female to male for one subject. The original sex code was an error in the NHANES I data set. This subject was not included in the cohort of NHEFS subjects who were ages 55 years and over at NHANES I.

Race

A revised race variable was created to resolve discrepancies between the baseline interviewer-observed race and the followup respondent-reported race. These race codes are determined on a case-by-case adjudication of baseline and followup ethnicity responses and, in the case of deceased subjects, race as coded on the death certificate. Race was changed for 186 subjects. A cross-tabulation of revised race by the original baseline race variable follows. (For a number of subjects, however, although race was revised, baseline race and revised race still remain grouped in the “Other” category.)

<i>Baseline race</i>	<i>Revised race</i>		
	<i>White</i>	<i>Black</i>	<i>Other</i>
White	11,998	25	30
Black	11	2,174	10
Other	27	-	132

Information on race of the subject was collected during the interview in the 1986 NHEFS if the subject did not have

an interview in the 1982-84 NHEFS. This information, however, was not used to amend the revised race variable generated from data in the 1982-84 NHEFS. In other words, the revised race variable was *not* updated using data collected from the 1986 NHEFS. Furthermore, this variable will never be updated from any information collected in the 1987 NHEFS or other followups of the NHEFS.

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