

Current Estimates

From the Health Interview Survey:

United States-1978

Estimates of incidence of acute conditions, number of persons reporting limitation of activity, number of persons injured, hospital episodes, disability days, and frequency of dental and physician visits. Based on data collected in the Health Interview Survey during 1978.

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In accordance with specifications established by the Division of Health Interview Statistics, the Bureau of the Census, under a contractual arrangement, participated in planning the survey and collecting the data.

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SYMBOLS

Data not available-----	---
Category not applicable-----	...
Quantity zero-----	-
Quantity more than 0 but less than 0.05-----	0.0
Figure does not meet standards of reliability or precision (more than 30 percent relative standard error)-----	*

CURRENT ESTIMATES FROM THE HEALTH INTERVIEW SURVEY

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INTRODUCTION

National estimates of acute illnesses and injuries, disability days, limitation of activity due to chronic conditions, and measures of health care utilization for 1978 are presented in this report. These variables represent the basic health items for which data were collected in the 1978 Health Interview Survey of the civilian noninstitutionalized population of the United States.

The detailed tables in this report contain data limited to age and sex categories of the population. More detailed analyses of similar data by other social, economic, and demographic categories will be presented in later reports. The text tables present data that indicate recent trends for the major health items collected in 1978 as well as for the 2 previous years. Other Current Estimates reports in Series 10 (Numbers 119 and 126) present detailed data for these 2 years comparable to the data shown in this report for 1978.

Although published reports are the primary vehicle for disseminating statistical estimates from the Health Interview Survey, data are also available in the form of standardized microdata tapes. Special tabulations can also be obtained for public use. Questions pertaining to cost, delivery time, and availability of data should be

directed to the Division of Health Interview Statistics.

HIGHLIGHTS FOR THE PERIOD

Acute Conditions

Acute conditions are defined as those illnesses and injuries that have lasted less than 3 months and that have involved either medical attention or 1 day or more of restricted activity. However, to counteract the effect of memory decay, which impairs the validity of the estimates, the annual incidence of acute conditions is calculated by including only those conditions that had their onset during the 2 weeks prior to the interview.

During 1978 an estimated 466.5 million acute illnesses and injuries occurred among the civilian noninstitutionalized population of the United States (tables 1 and 2). The incidence rate of 218.2 acute conditions per 100 persons for 1978 was similar to the rates for the 2 previous years (table A).

Comparison of the 1978 rates for the major classifications of acute conditions with those of 1977 shows no significant changes. The higher reported incidence rate for influenza in 1978 appears to be primarily responsible for the fluctuation in the incidence rate for acute respiratory conditions.

Table A. Incidence of acute conditions, associated disability days, and persons injured: United States, 1976-78

Item	1976	1977	1978
Acute conditions			
Number of acute conditions per 100 persons per year			
All acute conditions	219.0	218.8	218.2
Infective and parasitic diseases	25.0	27.2	24.7
Respiratory conditions	119.0	109.7	115.8
Upper respiratory conditions	60.6	63.2	59.1
Influenza	52.4	40.4	50.3
Other respiratory conditions	6.0	6.2	6.3
Digestive system conditions	10.4	11.2	10.7
Injuries	32.1	36.4	33.1
All other acute conditions	32.5	34.2	33.9
Days of disability associated with acute conditions			
Days of disability per 100 persons per year			
Restricted-activity days	956.5	940.8	989.7
Bed-disability days	442.7	417.3	444.7
Work-loss days (ages 17 years and over) ¹	374.3	346.6	376.6
School-loss days (ages 6-16 years)	497.3	491.2	480.7
Class of accident			
Number of persons injured per 100 persons per year			
All classes of accident	31.1	34.8	31.6
Moving motor vehicle	2.2	2.4	2.1
While at work	4.4	5.4	4.9
Home	12.3	13.9	11.9
Other	13.1	14.8	13.9

¹For currently employed population.

Although there was a flu epidemic in the North Central Region of the country during the early part of 1978,¹ the effect was not substantial enough to cause an increase in the yearly incidence rates for acute respiratory conditions.

During 1978 acute illnesses and injuries caused an average of 9.9 days of restricted activity per person (tables A, 3, and 5)—a rate similar to that of 1977. The rate of 4.4 days in bed per person for 1978 (tables A, 4, and 6) was about the same as the rate for the previous

¹For further details and quarterly estimates, see Series 10, Number 130.

year. The rate of 4.8 school-loss days per child aged 6-16 is similar to the rate for 1977 (tables A and 7). The number of days lost from work because of acute conditions among the currently employed population was similar for 1978 (table 8) and 1977—about 3½ days per person.

During 1978, there were approximately 68 million persons injured (table 9)—a rate of 31.6 persons injured per 100 persons (table A). The rates tended to decrease with age, from 38.3 for children 6-16 years of age to 21.9 for adults 65 years of age and over (table 9). Associated with these injuries were 341.6 days of restricted activity (table 10) and 86.4 days of bed disability (table 11) per 100 persons per year. Although the rate of persons injured decreased with age, the number of restricted-activity and bed-disability days per person per year associated with injuries increased with age.

Days of Disability

Table B shows days of disability per person per year for both acute and chronic conditions for 1976 through 1978. "Days of disability" refers both to temporary and long-term reduction of a person's activity due to acute or chronic conditions. The four types of disability days (restricted-activity, bed-disability, work-loss, and school-loss days) are reported in the health interview in association with specific acute and chronic conditions. Although it is possible for a particular day of disability to be attributed to multiple conditions, the person-day measure, used in table B, counts each day of

Table B. Days of disability per person per year, by type of disability day: United States, 1976-78

Type of disability day	1976	1977	1978
Days of disability			
Days of disability per person per year			
Restricted-activity days	18.2	17.8	18.8
Bed-disability days	7.1	6.9	7.1
Work-loss days (ages 17 years and over) ¹	5.3	5.0	5.2
School-loss days (ages 6-16 years)	5.2	5.4	5.4

¹For currently employed population.

disability only once, regardless of the number of conditions causing disability on that day. A day of restricted activity is one during which a person reduces his or her normal activity for all or most of the day because of an illness or injury. Each day spent in bed for all or most of the day is counted as a day of restricted activity. Similarly, each day lost from work or school is a day of restricted activity. Days on which people cut down on the things that they usually do for the whole day, but which were neither bed days, work-loss days, nor school-loss days, are also counted as restricted-activity days.

In 1978 there were an estimated 18.8 days of restricted activity per person as a result of chronic and acute illnesses or injuries—a rate similar to that of 1977. The number of restricted-activity days per person per year ranged from 11.3 days for children under 17 years of age to 40.3 for adults 65 years of age and over (table 12). The average number of bed-disability days per person during 1978 (7.1) was similar to that in 1977 (table B). There were an estimated 486 million days lost from work due to illness or injury—5.2 days per currently employed person 17 years of age and over per year, a rate similar to that of 1977.

Females reported more restricted-activity, bed-disability, and work-loss days per person than did males during 1978, as in previous years (table 12).

The number of days lost from school for children 6-16 years of age during 1978 was 5.4 days per child, the same as the 1977 rate (table 13).

Limitation of Activity

The concept of limitation of activity used in this report refers to long-term reduction in activity resulting from chronic disease or impairment. The measurement of this concept in the Health Interview Survey (HIS) permits one to distinguish among (1) persons limited in or unable to perform their major activity, (2) persons limited but not in their major activity, and (3) persons not limited. The category of persons limited in their major activity includes those unable to carry on the usual activity for their age-sex group, whether it is working, keeping house, or going to school, and persons restricted in the amount or kind of usual activ-

Table C. Percent of the total population with limitation of activity due to chronic conditions: United States, 1976-78

Limitation of activity	1976	1977	1978
	Percent of total population		
Limited in all activity.....	14.3	13.5	14.2
Limited in major activity ¹	10.8	10.4	10.6
No limitation of activity	85.7	86.5	85.8

¹Major activity refers to ability to work, keep house, or engage in school or preschool activities.

ity for their age-sex group. Persons limited but not in their major activity includes persons restricted in other activities such as civic, church, or recreational activities. Table C shows the percent of the population with limitation of activity for 1976 through 1978.

The 1978 HIS produced an estimate of 14.2 percent of the population as limited in their activities resulting from one or more chronic conditions. At first glance it would appear that the 1978 estimate of 14.2 for persons limited reflects an increase of 5.2 percent over the 1977 estimate of 13.5 percent. However, as indicated in an earlier report (Series 10, Number 126, page 3), there is reason to believe that the estimate for 1977 reflected, not a true decrease from 1976, but a procedural change in the questionnaire. In 1977, the regular HIS questions on limitation of activity were used to screen respondents according to whether or not they would receive a special supplement on disability. The apparent 5.6-percent decline between 1976 and 1977 in the proportion of the population classified as limited in activity appears to have been due to a change in data collection procedure.

In general, the direction of the relationships between limitation of activity and age and sex characteristics is similar in 1978 (table 14) to the direction observed in earlier years.

Utilization of Medical Services

Measures of the utilization of health services as reported in HIS are shown in tables 15-21 and highlighted in table D.

Information is obtained in HIS on the hospitalization experience of each household

Table D. Selected measures of health care utilization: United States, 1976-78

Measure of utilization	1976	1977	1978
<u>Hospitalization</u>			
Number of discharges per 100 persons per year	14.1	14.0	14.0
Average length of stay in days.....	7.9	7.8	7.9
Percent of persons with 1 hospital episode or more.....	10.6	10.4	10.4
<u>Dental visits</u>			
Number per person per year.....	1.6	1.6	1.6
Percent of persons with visits in past year.....	48.7	49.7	49.9
<u>Physician visits</u>			
Number per person per year.....	4.9	4.8	4.8
Percent of persons with visits in past year.....	75.5	75.1	75.4

member during the 12-month period prior to the interview. Two measures of hospitalization are derived from this information—hospital discharges and hospital episodes. Differences in the estimating procedures for these two measures are described in appendix I. Information on hospital discharges from hospital records is collected through the NCHS Hospital Discharge Survey (HDS). Estimates from HDS, published in Series 13 of Vital and Health Statistics, will be somewhat higher than those presented here because of differences in collection procedures, population sampled, and definitions used.

During 1978, there were an estimated 14.0 discharges from short-stay hospitals per 100 persons—the same as the rate for 1977 (tables D and 15). The rate of discharges per 100 persons for those 65 years of age and over (26.8) was about 4 times as high as that for children under 17 years of age (6.9). The average length of stay in days per hospital discharge was 7.9, or about the same as reported for the previous year. Children and adults under 35 years of age experienced hospital stays averaging about 5½ days; older persons had increasingly longer stays, with those aged 65 years and over averaging about 11.9 days. Except for persons under 17 years of age, males experienced longer stays than did females.

Approximately 10.4 percent of the population were hospitalized at least once during the year preceding the interview (table 16). About 82 percent of these persons had only one stay in a hospital. In 1978, persons with one hospital episode or more spent an average of about 9.7 days per person in the hospital (table 17).

There were an estimated 342.5 million dental visits in 1978 (table 18), or 1.6 visits per person. This is the same rate as for 1977 (table D). As in the past, females continued to make slightly more dental visits per person than did males—1.7 and 1.4 visits per person per year, respectively (table 18).

The percent of the population with at least one annual dental visit in 1978 was similar to the 1977 proportion, 49.9 and 49.7 respectively. Detailed data on the time interval since the last dental visit are shown in table 19. More extensive data on dental visits can be found in the report entitled "Dental Visits: Volume and Interval Since Last Visit, United States, 1969" (Series 10, Number 76).

During 1978, there were approximately 1 billion contacts with medical doctors, excluding visits to inpatients in the hospital—an average of 4.8 visits per person (table 20). This rate is consistent with those for the 2 previous years (table D). The number of visits per person per year ranged from 4.1 for children under 17 years of age to 6.4 visits for persons 75 years of age and over. For persons aged 17 through 74 years, females had more contacts with physicians than did males. For the younger and older age groups (under age 17 and 75 years and over), the rates were similar for both sexes.

Approximately 75 percent of the civilian noninstitutionalized population saw a medical doctor at least once during the 12 months preceding the interview (table 21). This percent has changed little over the past 3 years (table D). An estimated 3.3 percent of the population had not contacted a physician in 5 years or more. More extensive data on physician visits can be found in the report entitled "Physician Visits: Volume and Interval Since Last Visit, United States, 1975" (Series 10, Number 128).

Seasonal Variation

Tables 22-24 present quarterly estimates of acute conditions, persons injured, and dis-

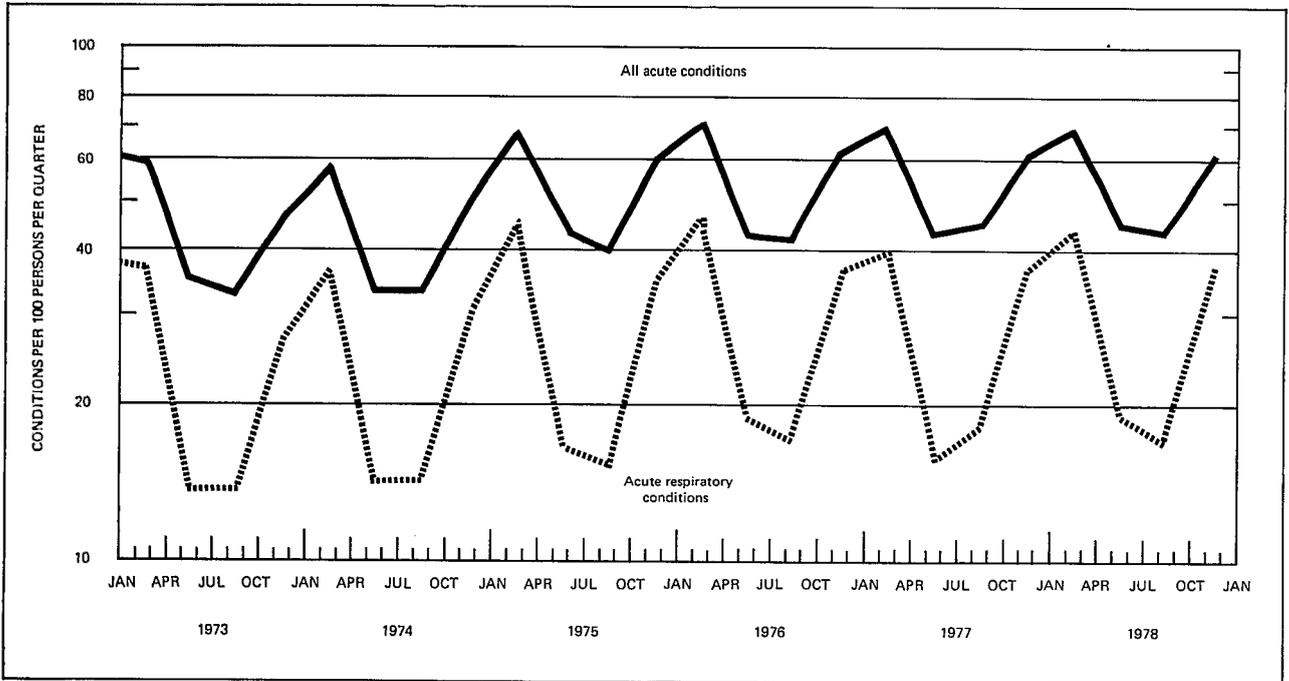


Figure 1. Incidence of all acute conditions and acute respiratory conditions per 100 persons per quarter

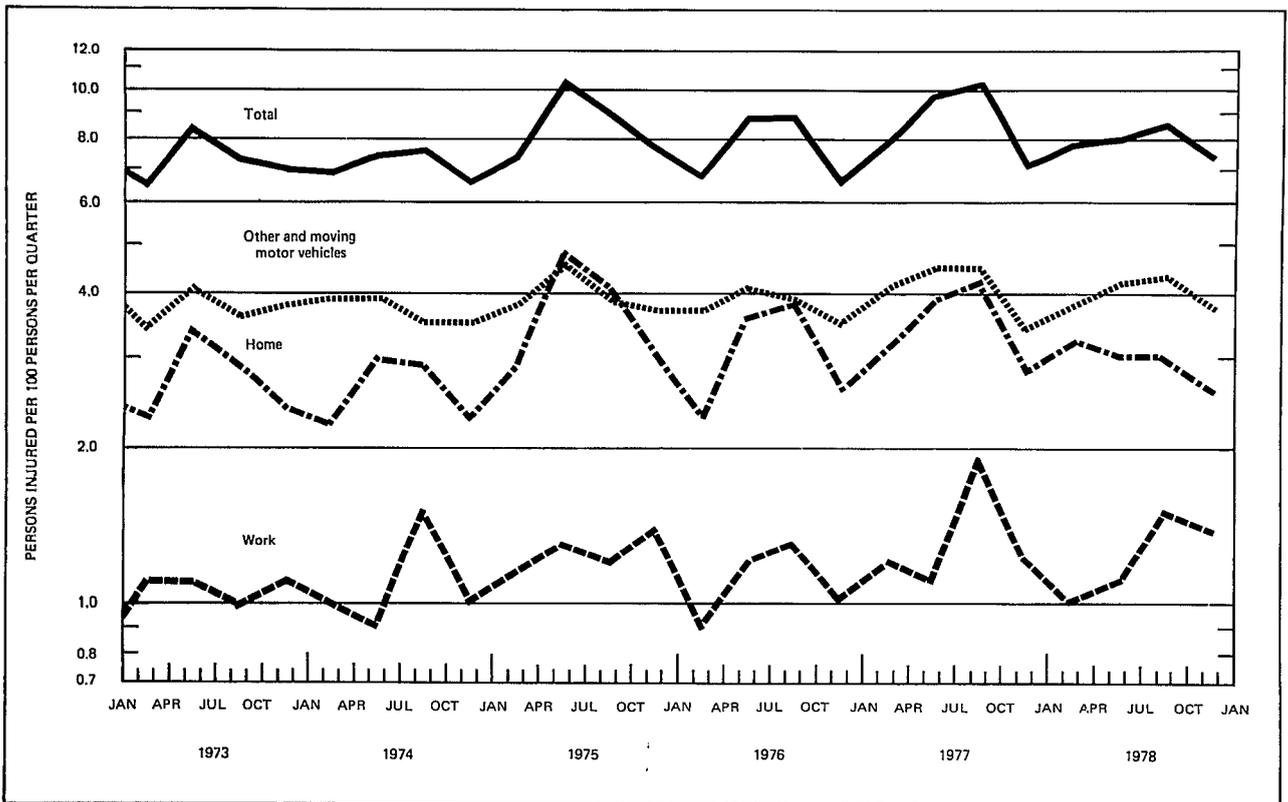


Figure 2. Persons injured per 100 persons per quarter, by class of accident

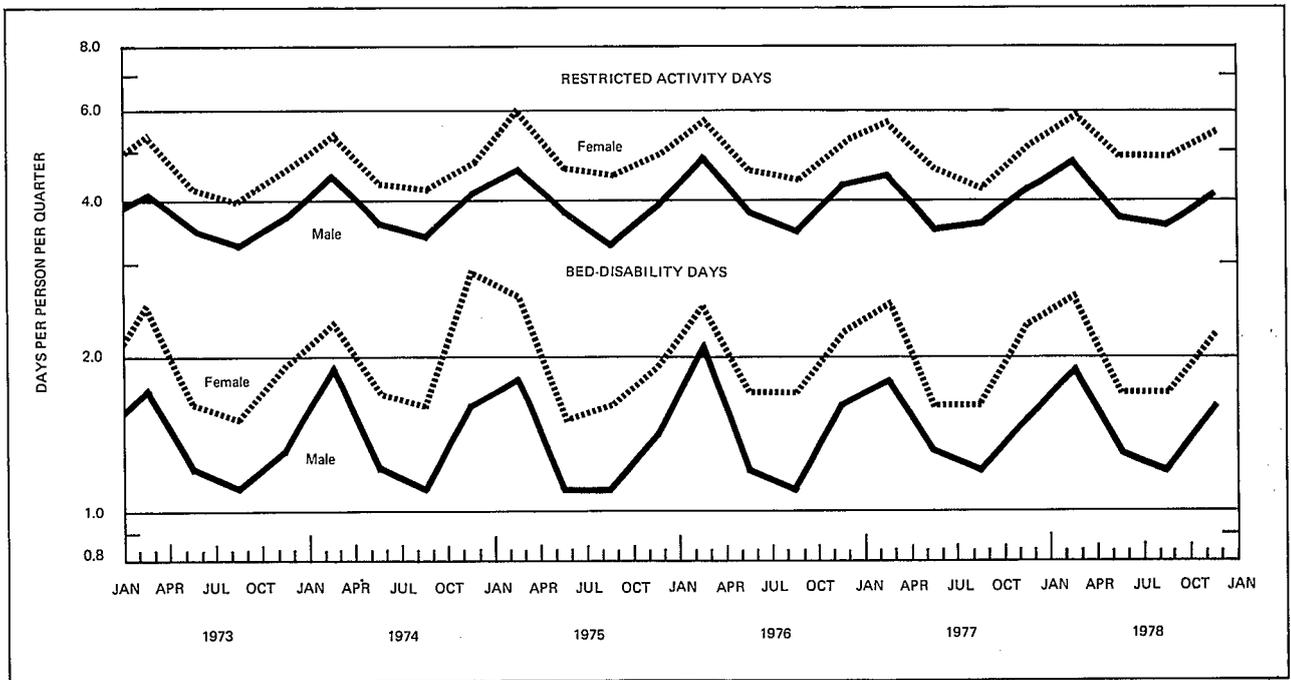


Figure 3. Disability days per person per quarter, by type of disability and sex

ability days. Figures 1-3 show these data for the past 6 years. The quarterly estimates of acute conditions for 1978 closely resemble the estimates of 1977, 1976 and 1975, but not those of 1973 and 1974 (figure 1) because of changes in survey procedures during the latter 2 years.² The high rates consistently shown for persons injured during 1975 (figure 2) probably reflect the greater yield of reported injuries that resulted from the inclusion of an extensive accident probe question added to that year's questionnaire, but which was not included in the questionnaires of the other years shown. Modifications to the questionnaire do not appear to account, however, for the fact that the 1977 and 1978 rates of persons injured resemble those for 1975. Restricted-activity days and bed-disability days continued to

fluctuate in a pattern similar to that of previous years (figure 3).

CONTENTS OF THE 1978 QUESTIONNAIRE

Data on the incidence of acute conditions, limitation of activity, persons injured, hospitalizations, disability days, dental visits, and physician visits as well as the prevalence of selected chronic conditions are collected annually in the Health Interview Survey. A list of publications containing detailed data on these items for previous years is shown at the end of the text.

The 1978 Health Interview Survey questionnaire contained several topics for which data were not collected every year. Topics (periodically included) surveyed during 1978 were: out-of-pocket health expenditures, health insurance coverage, and blood donations. Additionally, the 1978 questionnaire included the following new topics: usual source of medical care, immunization for selected childhood

²For a more detailed explanation of the problem associated with the data collection procedure for acute conditions used during 1973 and 1974, see Series 10, Number 100, page 1, and Series 10, Number 102, pages 2-4.

diseases, and disability connected with military service.

SOURCE AND LIMITATIONS OF THE DATA

The information from the Health Interview Survey presented in this report is based on data collected in a continuing nationwide survey by household interview. Each week a probability sample of households is interviewed by trained personnel of the U.S. Bureau of the Census to obtain information about the health and other characteristics of each member of the household in the civilian noninstitutionalized population of the United States.

During the 52 weeks in 1978, the sample was composed of approximately 41,000 households containing about 110,000 persons living at the time of the interview. The total non-interview rate was about 3.8 percent—of which 2.1 percent was due to respondent refusal, and the remainder was primarily due to the failure to locate an eligible respondent at home after repeated calls.

The population figures used in computing annual rates shown in this report appear in table 25.

A description of the design of the survey, the methods used in estimation, and general qualifications of the data obtained from this survey is presented in appendix I. Because the estimates shown in this report are based on a sample of the population, they are subject to sampling error. Therefore particular attention should be paid to the section entitled, "Reliability of Estimates." Sampling errors for most of the estimates are relatively low. However, where an estimated number or the numerator or denominator of a rate or percentage is small, the sampling error may be high. Charts of relative sampling errors and instructions for their use are shown in appendix I.

Certain terms used in this report are defined in appendix II. Some of the terms have specified meanings for the purpose of the survey. For example, estimates of the incidence of acute conditions include, with certain exceptions, those conditions that had started

during the 2-week period prior to the interview and that involved either medical attention or restricted activity. The exceptions, listed in appendix II, are certain conditions, such as heart trouble and diabetes, that are always considered to be chronic regardless of duration or onset.

Estimates of the number of disability days associated with acute conditions are derived from the number of days of disability experienced during the 2-week period prior to the week of interview and include all such days reported even if the acute condition causing the disability had its onset prior to the 2-week period. Disability days associated with acute conditions are recorded on a condition basis. If an individual reports more than one illness or injury on the same day, the count of disability days will exceed the actual number of days disabled, that is, person-days of disability.

Appendix III contains the questionnaire used in the interview. Also shown are the cards used by the interviewer for asking certain questions.

In this report, terms such as "similar" and "the same" mean that no statistically significant difference exists between the statistics being compared. Terms relating to difference (i.e., "greater," "less," etc.) indicate that differences are statistically significant. The *t*-test with a critical value of 1.96 (0.05 level of significance) was used to test all comparisons that are discussed. Lack of comment regarding the difference between any two statistics does *not* mean the difference was tested and found to be not significant.

RELATED PUBLICATIONS IN SERIES 10

Series 10 Number	
76	Dental Visits: Volume and Interval Since Last Visit, United States, 1969
82	Acute Conditions, Incidence and Associated Disability, United States, July 1970-June 1971

83	Prevalence of Selected Chronic Digestive Conditions, United States, July-December 1968	109	Prevalence of Chronic Conditions of the Genitourinary, Nervous, Endocrine, Metabolic, and Blood and Blood-Forming Systems and of Other Selected Chronic Conditions, United States, 1973
84	Prevalence of Selected Chronic Respiratory Conditions, United States, 1970	111	Limitation of Activity due to Chronic Conditions, United States, 1974
85	Current Estimates From the Health Interview Survey, United States, 1972	112	Health Characteristics of Persons With Chronic Activity Limitation, United States, 1974
87	Impairments Due to Injury, United States, 1971	114	Acute Conditions, Incidence and Associated Disability, United States, July 1974-June 1975.
88	Acute Conditions, Incidence and Associated Disability, United States, July 1971-June 1972	115	Current Estimates From the Health Interview Survey, United States, 1975
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94	Prevalence of Selected Chronic Circulatory Conditions, United States, 1972	118	Disability Days, United States, 1975
95	Current Estimates From the Health Interview Survey, United States, 1973	119	Current Estimates From the Health Interview Survey, United States, 1976
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98	Acute Conditions, Incidence and Associated Disability, United States, July 1972-June 1973	124	Prevalence of Selected Chronic Skin and Musculoskeletal Conditions, United States, 1976
99	Prevalence of Selected Impairments, United States, 1971	125	Acute Conditions, Incidence and Associated Disability, United States, July 1976-June 1977
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[Data are based on household interviews of the civilian noninstitutionalized population. The survey design, general qualifications, and information on the reliability of the estimates are given in appendix I. Definitions of terms are given in appendix II]

CONDITION GROUP	BOTH SEXES	MALE	FEMALE	BOTH SEXES	MALE	FEMALE	BOTH SEXES	MALE	FEMALE
	INCIDENCE OF ACUTE CONDITIONS IN THOUSANDS			PERCENT DISTRIBUTION			NUMBER OF ACUTE CONDITIONS PER 100 PERSONS PER YEAR		
ALL ACUTE CONDITIONS-----	466,547	213,670	252,877	100.0	100.0	100.0	218.2	207.1	228.5
INFECTIVE AND PARASITIC DISEASES---	52,869	23,558	29,311	11.3	11.0	11.6	24.7	22.8	26.5
COMMON CHILDHOOD DISEASES-----	3,798	1,868	1,930	0.8	0.9	0.8	1.8	1.8	1.7
VIRUS, N.O.S.-----	23,982	11,107	12,876	5.1	5.2	5.1	11.2	10.8	11.6
OTHER INFECTIVE AND PARASITIC DISEASES-----	25,089	10,584	14,505	5.4	5.0	5.7	11.7	10.3	13.1
RESPIRATORY CONDITIONS-----	247,551	113,154	134,398	53.1	53.0	53.1	115.8	109.7	121.5
UPPER RESPIRATORY CONDITIONS-----	126,446	57,092	69,354	27.1	26.7	27.4	59.1	55.3	62.7
COMMON COLD-----	97,480	43,730	53,749	20.9	20.5	21.3	45.6	42.4	48.6
OTHER UPPER RESPIRATORY CONDITIONS-----	28,966	13,362	15,604	6.2	6.3	6.2	13.5	13.0	14.1
INFLUENZA-----	107,585	49,800	57,785	23.1	23.3	22.9	50.3	48.3	52.2
INFLUENZA WITH DIGESTIVE MANIFESTATIONS-----	5,607	2,316	3,291	1.2	1.1	1.3	2.6	2.2	3.0
OTHER INFLUENZA-----	101,978	47,484	54,494	21.9	22.2	21.5	47.7	46.0	49.2
OTHER RESPIRATORY CONDITIONS-----	13,520	6,261	7,259	2.9	2.9	2.9	6.3	6.1	6.6
PNEUMONIA-----	3,419	1,308	2,111	0.7	0.6	0.8	1.6	1.3	1.9
BRONCHITIS-----	5,773	2,633	3,140	1.2	1.2	1.2	2.7	2.6	2.8
OTHER RESPIRATORY CONDITIONS-----	4,329	2,320	2,009	0.9	1.1	0.8	2.0	2.2	1.8
DIGESTIVE SYSTEM CONDITIONS-----	22,878	10,398	12,480	4.9	4.9	4.9	10.7	10.1	11.3
DENTAL CONDITIONS-----	6,067	2,671	3,395	1.3	1.3	1.3	2.8	2.6	3.1
FUNCTIONAL AND SYMPTOMATIC UPPER GASTROINTESTINAL DISORDERS, N.E.C.-----	7,783	3,284	4,499	1.7	1.5	1.8	3.6	3.2	4.1
OTHER DIGESTIVE SYSTEM CONDITIONS-----	9,028	4,442	4,585	1.9	2.1	1.8	4.2	4.3	4.1
INJURIES-----	70,741	39,628	31,113	15.2	18.5	12.3	33.1	38.4	28.1
FRACTURES, DISLOCATIONS, SPRAINS, AND STRAINS-----	23,999	13,761	10,238	5.1	6.4	4.0	11.2	13.3	9.3
FRACTURES AND DISLOCATIONS-----	7,834	4,542	3,292	1.7	2.1	1.3	3.7	4.4	3.0
SPRAINS AND STRAINS-----	16,165	9,219	6,946	3.5	4.3	2.7	7.6	8.9	6.3
OPEN WOUNDS AND LACERATIONS-----	17,422	11,154	6,268	3.7	5.2	2.5	8.1	10.8	5.7
CONTUSIONS AND SUPERFICIAL INJURIES-----	14,065	7,024	7,041	3.0	3.3	2.8	6.6	6.8	6.4
OTHER CURRENT INJURIES-----	15,256	7,690	7,566	3.3	3.6	3.0	7.1	7.5	6.8
ALL OTHER ACUTE CONDITIONS-----	72,507	26,932	45,576	15.5	12.6	18.0	33.9	26.1	41.2
DISEASES OF THE EAR-----	16,401	8,465	7,936	3.5	4.0	3.1	7.7	8.2	7.2
HEADACHES-----	4,892	2,380	2,512	1.0	1.1	1.0	2.3	2.3	2.3
GENITOURINARY DISORDERS-----	12,989	1,547	11,442	2.8	0.7	4.5	6.1	1.5	10.3
DELIVERIES AND DISORDERS OF PREGNANCY AND THE PUERPERIUM-----	4,482	...	4,482	1.0	...	1.8	2.1	...	4.1
DISEASES OF THE SKIN-----	3,637	1,894	1,743	0.8	0.9	0.7	1.7	1.8	1.6
DISEASES OF THE MUSCULOSKELETAL SYSTEM-----	6,859	3,395	3,464	1.5	1.6	1.4	3.2	3.3	3.1
ALL OTHER ACUTE CONDITIONS-----	23,248	9,250	13,998	5.0	4.3	5.5	10.9	9.0	12.7

NOTES: EXCLUDED FROM THESE STATISTICS ARE ALL CONDITIONS INVOLVING NEITHER RESTRICTED ACTIVITY NOR MEDICAL ATTENTION.

N.O.S.--NOT OTHERWISE SPECIFIED; N.E.C.--NOT ELSEWHERE CLASSIFIED.

The appropriate relative standard errors of the estimates shown in this table are found in appendix I, figures I and VI.

TABLE 2. INCIDENCE OF ACUTE CONDITIONS AND NUMBER OF ACUTE CONDITIONS PER 100 PERSONS PER YEAR, BY AGE, SEX, AND CONDITION GROUP: UNITED STATES, 1978

[Data are based on household interviews of the civilian noninstitutionalized population. The survey design, general qualifications, and information on the reliability of the estimates are given in appendix I. Definitions of terms are given in appendix II]

SEX AND CONDITION GROUP	ALL AGES	UNDER 6 YEARS	6-16 YEARS	17-44 YEARS	45 YEARS & OVER	ALL AGES	UNDER 6 YEARS	6-16 YEARS	17-44 YEARS	45 YEARS & OVER
BOTH SEXES	INCIDENCE OF ACUTE CONDITIONS IN THOUSANDS					NUMBER OF ACUTE CONDITIONS PER 100 PERSONS PER YEAR				
ALL ACUTE CONDITIONS----	466,547	71,354	110,815	198,942	85,436	218.2	387.6	272.9	224.5	129.1
INFECTIVE AND PARASITIC DISEASES-----	52,869	11,881	14,992	19,794	6,203	24.7	64.5	36.9	22.3	9.4
RESPIRATORY CONDITIONS----	247,551	38,038	62,028	103,344	44,142	115.8	206.6	152.8	116.6	66.7
UPPER RESPIRATORY CONDITIONS-----	126,446	24,645	32,572	49,521	19,708	59.1	133.9	80.2	55.9	29.8
INFLUENZA-----	107,585	10,318	26,992	49,149	21,127	50.3	56.0	66.5	55.5	31.9
OTHER RESPIRATORY CONDITIONS-----	13,520	3,075	2,464	4,674	3,308	6.3	16.7	6.1	5.3	5.0
DIGESTIVE SYSTEM CONDITIONS-----	22,878	2,580	5,417	9,955	4,926	10.7	14.0	13.3	11.2	7.4
INJURIES-----	70,741	6,159	16,089	32,267	16,226	33.1	33.5	39.6	36.4	24.5
ALL OTHER ACUTE CONDITIONS-----	72,507	12,696	12,289	33,583	13,939	33.9	69.0	30.3	37.9	21.1
MALE										
ALL ACUTE CONDITIONS----	213,670	38,110	54,025	87,079	34,456	207.1	403.5	261.6	202.7	114.4
INFECTIVE AND PARASITIC DISEASES-----	23,558	6,809	7,016	7,404	2,330	22.8	72.1	34.0	17.2	7.7
RESPIRATORY CONDITIONS----	113,154	20,322	29,010	46,244	17,577	109.7	215.1	140.5	107.7	58.3
UPPER RESPIRATORY CONDITIONS-----	57,092	12,706	14,485	21,897	8,004	55.3	134.5	70.1	51.0	26.6
INFLUENZA-----	49,800	5,979	13,070	22,457	8,295	48.3	63.3	63.3	52.3	27.5
OTHER RESPIRATORY CONDITIONS-----	6,261	1,637	1,455	1,891	1,279	6.1	17.3	7.0	4.4	4.2
DIGESTIVE SYSTEM CONDITIONS-----	10,398	1,014	2,892	4,539	1,953	10.1	10.7	14.0	10.6	6.5
INJURIES-----	39,628	3,383	10,074	18,915	7,256	38.4	35.8	48.8	44.0	24.1
ALL OTHER ACUTE CONDITIONS-----	26,932	6,582	5,033	9,977	5,340	26.1	69.7	24.4	23.2	17.7
FEMALE										
ALL ACUTE CONDITIONS----	252,877	33,244	56,790	111,863	50,980	228.5	370.8	284.6	244.9	141.4
INFECTIVE AND PARASITIC DISEASES-----	29,311	5,072	7,976	12,390	3,873	26.5	56.6	40.0	27.1	10.7
RESPIRATORY CONDITIONS----	134,398	17,716	33,018	57,099	26,565	121.5	197.6	165.5	125.0	73.7
UPPER RESPIRATORY CONDITIONS-----	69,354	11,938	18,087	27,624	11,704	62.7	133.2	90.7	60.5	32.5
INFLUENZA-----	57,785	4,339	13,922	26,692	12,832	52.2	48.4	69.8	58.4	35.6
OTHER RESPIRATORY CONDITIONS-----	7,259	1,438	1,009	2,783	2,029	6.6	16.0	5.1	6.1	5.6
DIGESTIVE SYSTEM CONDITIONS-----	12,480	1,566	2,524	5,416	2,973	11.3	17.5	12.7	11.9	8.2
INJURIES-----	31,113	2,777	6,015	13,351	8,970	28.1	31.0	30.1	29.2	24.9
ALL OTHER ACUTE CONDITIONS-----	45,576	6,114	7,257	23,606	8,599	41.2	68.2	36.4	51.7	23.8

NOTES: EXCLUDED FROM THESE STATISTICS ARE ALL CONDITIONS INVOLVING NEITHER RESTRICTED ACTIVITY NOR MEDICAL ATTENTION.

The appropriate relative standard errors of the estimates shown in this table are found in appendix I, figures I and VI.

TABLE 3. DAYS OF RESTRICTED ACTIVITY ASSOCIATED WITH ACUTE CONDITIONS AND DAYS OF RESTRICTED ACTIVITY PER 100 PERSONS PER YEAR, BY SEX AND CONDITION GROUP: UNITED STATES, 1978

[Data are based on household interviews of the civilian noninstitutionalized population. The survey design, general qualifications, and information on the reliability of the estimates are given in appendix I. Definitions of terms are given in appendix II]

CONDITION GROUP	DAYS OF RESTRICTED ACTIVITY IN THOUSANDS			DAYS OF RESTRICTED ACTIVITY PER 100 PERSONS PER YEAR		
	BOTH SEXES	MALE	FEMALE	BOTH SEXES	MALE	FEMALE
ALL ACUTE CONDITIONS-----	2,116,239	876,085	1,240,154	989.7	849.1	1,120.7
INFECTIVE AND PARASITIC DISEASES---	201,097	86,129	114,969	94.0	83.5	103.9
COMMON CHILDHOOD DISEASES-----	24,759	11,228	13,531	11.6	10.9	12.2
VIRUS, N.O.S.-----	72,466	30,710	41,757	33.9	29.8	37.7
OTHER INFECTIVE AND PARASITIC DISEASES-----	103,872	44,191	59,681	48.6	42.8	53.9
RESPIRATORY CONDITIONS-----	947,090	403,827	543,263	442.9	391.4	491.0
UPPER RESPIRATORY CONDITIONS-----	366,149	156,236	209,913	171.2	151.4	189.7
COMMON COLD-----	275,983	117,915	158,068	129.1	114.3	142.8
OTHER UPPER RESPIRATORY CONDITIONS-----	90,166	38,321	51,845	42.2	37.1	46.9
INFLUENZA-----	449,467	194,909	254,558	210.2	188.9	230.0
INFLUENZA WITH DIGESTIVE MANIFESTATIONS-----	16,150	6,398	9,752	7.6	6.2	8.8
OTHER INFLUENZA-----	433,317	188,511	244,806	202.6	182.7	221.2
OTHER RESPIRATORY CONDITIONS-----	131,474	52,681	78,792	61.5	51.1	71.2
PNEUMONIA-----	60,143	20,466	39,677	28.1	19.8	35.9
BRONCHITIS-----	42,762	16,689	26,073	20.0	16.2	23.6
OTHER RESPIRATORY CONDITIONS---	28,569	15,526	13,042	13.4	15.0	11.8
DIGESTIVE SYSTEM CONDITIONS-----	104,414	43,863	60,551	48.8	42.5	54.7
DENTAL CONDITIONS-----	21,747	8,762	12,985	10.2	8.5	11.7
FUNCTIONAL AND SYMPTOMATIC UPPER GASTROINTESTINAL DISORDERS, N.E.C.-----	18,595	6,604	11,991	8.7	6.4	10.8
OTHER DIGESTIVE SYSTEM CONDITIONS-----	64,071	28,496	35,575	30.0	27.6	32.1
INJURIES-----	474,066	225,767	248,299	221.7	218.8	224.4
FRACTURES, DISLOCATIONS, SPRAINS, AND STRAINS-----	262,953	124,573	138,379	123.0	120.7	125.1
FRACTURES AND DISLOCATIONS-----	150,775	68,441	82,334	70.5	66.3	74.4
SPRAINS AND STRAINS-----	112,178	56,132	56,045	52.5	54.4	50.6
OPEN WOUNDS AND LACERATIONS-----	54,591	33,237	21,355	25.5	32.2	19.3
CONTUSIONS AND SUPERFICIAL INJURIES-----	63,337	27,300	36,038	29.6	26.5	32.6
OTHER CURRENT INJURIES-----	93,185	40,658	52,527	43.6	39.4	47.5
ALL OTHER ACUTE CONDITIONS-----	389,571	116,499	273,072	182.2	112.9	246.8
DISEASES OF THE EAR-----	57,288	23,917	33,371	26.8	23.2	30.2
HEADACHES-----	13,682	3,562	10,119	6.4	3.5	9.1
GENITOURINARY DISORDERS-----	70,263	10,717	59,546	32.9	10.4	53.8
DELIVERIES AND DISORDERS OF PREGNANCY AND THE PUERPERIUM---	50,066	...	50,066	23.4	...	45.2
DISEASES OF THE SKIN-----	12,858	6,949	5,909	6.0	6.7	5.3
DISEASES OF THE MUSCULOSKELETAL SYSTEM-----	62,652	24,585	38,067	29.3	23.8	34.4
ALL OTHER ACUTE CONDITIONS-----	122,763	46,769	75,994	57.4	45.3	68.7

NOTES: N.O.S.--NOT OTHERWISE SPECIFIED; N.E.C.--NOT ELSEWHERE CLASSIFIED.

The appropriate relative standard errors of the estimates shown in this table are found in appendix I, figure II.

TABLE 4. DAYS OF BED DISABILITY ASSOCIATED WITH ACUTE CONDITIONS AND DAYS OF BED DISABILITY PER 100 PERSONS PER YEAR, BY SEX AND CONDITION GROUP: UNITED STATES, 1978

[Data are based on household interviews of the civilian noninstitutionalized population. The survey design, general qualifications, and information on the reliability of the estimates are given in appendix I. Definitions of terms are given in appendix II]

CONDITION GROUP	BOTH SEXES	MALE	FEMALE	BOTH SEXES	MALE	FEMALE
	DAYS OF BED DISABILITY IN THOUSANDS			DAYS OF BED DISABILITY PER 100 PERSONS PER YEAR		
ALL ACUTE CONDITIONS-----	950,924	379,886	571,039	444.7	368.2	516.1
INFECTIVE AND PARASITIC DISEASES---	105,948	43,458	62,491	49.5	42.1	56.5
COMMON CHILDHOOD DISEASES-----	13,476	*5,233	8,244	6.3	*5.1	7.5
VIRUS, N.O.S.-----	40,634	17,518	23,116	19.0	17.0	20.9
OTHER INFECTIVE AND PARASITIC DISEASES-----	51,838	20,707	31,131	24.2	20.1	28.1
RESPIRATORY CONDITIONS-----	499,049	215,204	283,845	233.4	208.6	256.5
UPPER RESPIRATORY CONDITIONS-----	160,987	69,496	91,491	75.3	67.4	82.7
COMMON COLD-----	119,713	50,637	69,076	56.0	49.1	62.4
OTHER UPPER RESPIRATORY CONDITIONS-----	41,275	18,859	22,415	19.3	18.3	20.3
INFLUENZA-----	265,512	113,348	152,164	124.2	109.9	137.5
INFLUENZA WITH DIGESTIVE MANIFESTATIONS-----	9,282	*3,862	*5,420	4.3	*3.7	*4.9
OTHER INFLUENZA-----	256,230	109,486	146,744	119.8	106.1	132.6
OTHER RESPIRATORY CONDITIONS-----	72,549	32,359	40,190	33.9	31.4	36.3
PNEUMONIA-----	34,195	13,016	21,179	16.0	12.6	19.1
BRONCHITIS-----	22,751	9,860	12,891	10.6	9.6	11.6
OTHER RESPIRATORY CONDITIONS---	15,603	9,483	6,120	7.3	9.2	5.5
DIGESTIVE SYSTEM CONDITIONS-----	50,503	24,443	26,060	23.6	23.7	23.6
DENTAL CONDITIONS-----	7,593	*3,201	*4,393	3.6	*3.1	*4.0
FUNCTIONAL AND SYMPTOMATIC UPPER GASTROINTESTINAL DISORDERS, N.E.C.-----	9,396	*4,349	*5,047	4.4	*4.2	*4.6
OTHER DIGESTIVE SYSTEM CONDITIONS-----	33,514	16,893	16,620	15.7	16.4	15.0
INJURIES-----	126,931	48,514	78,417	59.4	47.0	70.9
FRACTURES, DISLOCATIONS, SPRAINS, AND STRAINS-----	66,109	26,625	39,484	30.9	25.8	35.7
FRACTURES AND DISLOCATIONS-----	35,675	13,064	22,611	16.7	12.7	20.4
SPRAINS AND STRAINS-----	30,434	13,561	16,873	14.2	13.1	15.2
OPEN WOUNDS AND LACERATIONS-----	11,282	5,573	5,709	5.3	5.4	5.2
CONTUSIONS AND SUPERFICIAL INJURIES-----	19,008	6,715	12,293	8.9	6.5	11.1
OTHER CURRENT INJURIES-----	30,532	9,600	20,932	14.3	9.3	18.9
ALL OTHER ACUTE CONDITIONS-----	168,493	48,268	120,225	78.8	46.8	108.6
DISEASES OF THE EAR-----	26,807	11,816	14,991	12.5	11.5	13.5
HEADACHES-----	7,004	*2,272	*4,732	3.3	*2.2	*4.3
GENITOURINARY DISORDERS-----	30,271	*3,942	26,329	14.2	*3.8	23.8
DELIVERIES AND DISORDERS OF PREGNANCY AND THE PUERPERIUM-----	23,566	...	23,566	11.0	...	21.3
DISEASES OF THE SKIN-----	5,929	*3,405	*2,523	2.8	*3.3	*2.3
DISEASES OF THE MUSCULOSKELETAL SYSTEM-----	19,968	6,350	13,617	9.3	6.2	12.3
ALL OTHER ACUTE CONDITIONS-----	54,948	20,482	34,466	25.7	19.9	31.1

NOTES: N.O.S.--NOT OTHERWISE SPECIFIED; N.E.C.--NOT ELSEWHERE CLASSIFIED.

The appropriate relative standard errors of the estimates shown in this table are found in appendix I, figure II.

TABLE 5. DAYS OF RESTRICTED ACTIVITY ASSOCIATED WITH ACUTE CONDITIONS AND DAYS OF RESTRICTED ACTIVITY PER 100 PERSONS PER YEAR, BY AGE, SEX, AND CONDITION GROUP: UNITED STATES, 1978

[Data are based on household interviews of the civilian noninstitutionalized population. The survey design, general qualifications, and information on the reliability of the estimates are given in appendix I. Definitions of terms are given in appendix II]

SEX AND CONDITION GROUP	ALL AGES	UNDER 6 YEARS	6-16 YEARS	17-44 YEARS	45 YEARS & OVER	ALL AGES	UNDER 6 YEARS	6-16 YEARS	17-44 YEARS	45 YEARS & OVER
BOTH SEXES	DAYS OF RESTRICTED ACTIVITY IN THOUSANDS					DAYS OF RESTRICTED ACTIVITY PER 100 PERSONS PER YEAR				
ALL ACUTE CONDITIONS--	2,116,239	214,086	363,313	851,333	687,508	989.7	162.8	894.8	960.6	1,038.7
INFECTIVE AND PARASITIC DISEASES-----	201,097	40,268	55,626	62,588	42,615	94.0	218.7	137.0	70.6	64.4
RESPIRATORY CONDITIONS--	947,090	123,688	196,316	353,918	273,168	442.9	671.8	483.5	399.3	412.7
UPPER RESPIRATORY										
CONDITIONS-----	366,149	64,472	84,420	137,827	79,431	171.2	350.2	207.9	155.5	120.0
INFLUENZA-----	449,467	42,783	93,443	177,732	135,513	210.2	232.4	230.1	200.5	204.7
OTHER RESPIRATORY										
CONDITIONS-----	131,474	16,436	18,453	38,360	58,225	61.5	89.3	45.4	43.3	88.0
DIGESTIVE SYSTEM										
CONDITIONS-----	104,414	6,770	12,431	44,184	41,029	48.8	36.8	30.6	49.9	62.0
INJURIES-----	474,066	9,261	63,427	209,066	192,312	221.7	50.3	156.2	235.9	290.5
ALL OTHER ACUTE										
CONDITIONS-----	389,571	34,099	35,512	181,577	138,384	182.2	185.2	87.5	204.9	209.1
MALE										
ALL ACUTE CONDITIONS--	876,085	107,166	172,431	346,642	249,846	849.1	134.5	835.0	807.1	829.3
INFECTIVE AND PARASITIC DISEASES-----	86,129	21,583	24,512	25,422	14,612	83.5	228.5	118.7	59.2	48.5
RESPIRATORY CONDITIONS--	403,827	63,394	90,921	148,897	100,615	391.4	671.1	440.3	346.7	334.0
UPPER RESPIRATORY										
CONDITIONS-----	156,236	34,140	37,027	58,308	26,762	151.4	361.4	179.3	135.8	88.8
INFLUENZA-----	194,909	22,642	45,082	76,602	50,583	188.9	239.7	218.3	178.3	167.9
OTHER RESPIRATORY										
CONDITIONS-----	52,681	6,612	8,813	13,987	23,269	51.1	70.0	42.7	32.6	77.2
DIGESTIVE SYSTEM										
CONDITIONS-----	43,863	*2,762	5,783	17,094	18,224	42.5	*29.2	28.0	39.8	60.5
INJURIES-----	225,767	*3,651	38,024	114,839	69,253	218.8	*38.7	184.1	267.4	229.9
ALL OTHER ACUTE										
CONDITIONS-----	116,499	15,776	13,191	40,390	47,143	112.9	167.0	63.9	94.0	156.5
FEMALE										
ALL ACUTE CONDITIONS--	1,240,154	106,921	190,882	504,690	437,661	1,120.7	192.6	956.8	104.9	1,213.6
INFECTIVE AND PARASITIC DISEASES-----	114,969	18,685	31,115	37,166	28,003	103.9	208.4	156.0	81.4	77.7
RESPIRATORY CONDITIONS--	543,263	60,294	105,395	205,021	172,554	491.0	672.5	528.3	448.9	478.5
UPPER RESPIRATORY										
CONDITIONS-----	209,913	30,332	47,394	79,519	52,669	189.7	338.3	237.6	174.1	146.0
INFLUENZA-----	254,558	20,138	48,361	101,129	84,929	230.0	224.6	242.4	221.4	235.5
OTHER RESPIRATORY										
CONDITIONS-----	78,792	9,824	9,640	24,373	34,955	71.2	109.6	48.3	53.4	96.9
DIGESTIVE SYSTEM										
CONDITIONS-----	60,551	*4,008	6,648	27,090	22,806	54.7	*44.7	33.3	59.3	63.2
INJURIES-----	248,299	5,610	25,403	94,227	123,058	224.4	62.6	127.3	206.3	341.2
ALL OTHER ACUTE										
CONDITIONS-----	273,072	18,323	22,321	141,187	91,241	246.8	204.4	111.9	309.1	253.0

The appropriate relative standard errors of the estimates shown in this table are found in appendix I, figure II.

TABLE 6. DAYS OF BED DISABILITY ASSOCIATED WITH ACUTE CONDITIONS AND DAYS OF BED DISABILITY PER 100 PERSONS PER YEAR, BY AGE, SEX, AND CONDITION GROUP: UNITED STATES, 1978

[Data are based on household interviews of the civilian noninstitutionalized population. The survey design, general qualifications, and information on the reliability of the estimates are given in appendix I. Definitions of terms are given in appendix II]

SEX AND CONDITION GROUP	ALL AGES	UNDER 6 YEARS	6-16 YEARS	17-44 YEARS	45 YEARS & OVER	ALL AGES	UNDER 6 YEARS	6-16 YEARS	17-44 YEARS	45 YEARS & OVER
<u>BOTH SEXES</u>	DAYS OF BED DISABILITY IN THOUSANDS					DAYS OF BED DISABILITY PER 100 PERSONS PER YEAR				
ALL ACUTE CONDITIONS--	950,924	102,073	183,496	374,917	290,438	444.7	554.4	451.9	423.0	438.8
INFECTIVE AND PARASITIC DISEASES-----	105,948	20,292	34,558	32,750	18,348	49.5	110.2	85.1	37.0	27.7
RESPIRATORY CONDITIONS--	499,049	58,182	117,016	185,314	138,537	233.4	316.0	288.2	209.1	209.3
UPPER RESPIRATORY CONDITIONS-----	160,987	24,399	44,090	58,029	34,469	75.3	132.5	108.6	65.5	52.1
INFLUENZA-----	265,512	24,582	61,995	104,340	74,596	124.2	133.5	152.7	117.7	112.7
OTHER RESPIRATORY CONDITIONS-----	72,549	9,201	10,931	22,946	29,472	33.9	50.0	26.9	25.9	44.5
DIGESTIVE SYSTEM CONDITIONS-----	50,503	*2,712	5,525	22,636	19,630	23.6	*14.7	13.6	25.5	29.7
INJURIES-----	126,931	*3,245	12,770	54,501	56,415	59.4	*17.6	31.5	61.5	85.2
ALL OTHER ACUTE CONDITIONS-----	168,493	17,641	13,626	79,717	57,509	78.8	95.8	33.6	89.9	86.9
<u>MALE</u>										
ALL ACUTE CONDITIONS--	379,886	52,698	85,024	137,186	104,977	368.2	557.9	411.7	319.4	348.4
INFECTIVE AND PARASITIC DISEASES-----	43,458	9,645	15,755	13,177	*4,881	42.1	102.1	76.3	30.7	*16.2
RESPIRATORY CONDITIONS--	215,204	32,217	54,763	74,163	54,061	208.6	341.1	265.2	172.7	179.4
UPPER RESPIRATORY CONDITIONS-----	69,496	14,644	19,015	23,612	12,226	67.4	155.0	92.1	55.0	40.6
INFLUENZA-----	113,348	13,095	30,493	41,755	28,035	109.9	138.6	147.7	97.2	93.0
OTHER RESPIRATORY CONDITIONS-----	32,359	*4,478	*5,255	8,796	13,830	31.4	*47.4	*25.4	20.5	45.9
DIGESTIVE SYSTEM CONDITIONS-----	24,443	*1,834	*2,975	8,229	11,405	23.7	*19.4	*14.4	19.2	37.9
INJURIES-----	48,514	*1,220	6,556	25,394	15,343	47.0	*12.9	31.7	59.1	50.9
ALL OTHER ACUTE CONDITIONS-----	48,268	7,782	*4,975	16,224	19,287	46.8	82.4	*24.1	37.8	64.0
<u>FEMALE</u>										
ALL ACUTE CONDITIONS--	571,039	49,375	98,472	237,731	185,461	516.1	550.8	493.6	520.5	514.3
INFECTIVE AND PARASITIC DISEASES-----	62,491	10,648	18,803	19,573	13,467	56.5	118.8	94.2	42.9	37.3
RESPIRATORY CONDITIONS--	283,845	25,965	62,254	111,151	84,475	256.5	289.6	312.0	243.3	234.2
UPPER RESPIRATORY CONDITIONS-----	91,491	9,755	25,076	34,417	22,244	82.7	108.8	125.7	75.4	61.7
INFLUENZA-----	152,164	11,487	31,502	62,585	46,591	137.5	128.1	157.9	137.0	129.2
OTHER RESPIRATORY CONDITIONS-----	40,190	*4,723	5,676	14,150	15,641	36.3	*52.7	28.4	31.0	43.4
DIGESTIVE SYSTEM CONDITIONS-----	26,060	*878	*2,550	14,408	8,225	23.6	*9.8	*12.8	31.5	22.8
INJURIES-----	78,417	*2,025	6,214	29,107	41,071	70.9	*22.6	31.1	63.7	113.9
ALL OTHER ACUTE CONDITIONS-----	120,225	9,860	8,651	63,493	38,222	108.6	110.0	43.4	139.0	106.0

The appropriate relative standard errors of the estimates shown in this table are found in appendix I, figure II.

TABLE 7. DAYS LOST FROM SCHOOL ASSOCIATED WITH ACUTE CONDITIONS AND DAYS LOST FROM SCHOOL PER 100 CHILDREN (6-16 YEARS) PER YEAR, BY SEX AND CONDITION GROUP: UNITED STATES, 1978

[Data are based on household interviews of the civilian noninstitutionalized population. The survey design, general qualifications, and information on the reliability of the estimates are given in appendix I. Definitions of terms are given in appendix II]

CONDITION GROUP	DAYS LOST FROM SCHOOL IN THOUSANDS			DAYS LOST FROM SCHOOL PER 100 CHILDREN PER YEAR		
	BOTH SEXES	MALE	FEMALE	BOTH SEXES	MALE	FEMALE
ALL ACUTE CONDITIONS-----	195,153	91,580	103,573	480.7	443.5	519.1
INFECTIVE AND PARASITIC DISEASES-----	30,567	13,506	17,061	75.3	65.4	85.5
RESPIRATORY CONDITIONS-----	122,673	57,608	65,065	302.1	279.0	326.1
UPPER RESPIRATORY CONDITIONS-----	52,213	23,568	28,645	128.6	114.1	143.6
INFLUENZA-----	60,150	28,246	31,904	148.1	136.8	159.9
OTHER RESPIRATORY CONDITIONS-----	10,310	5,794	4,517	25.4	28.1	22.6
DIGESTIVE SYSTEM CONDITIONS-----	8,547	3,952	4,595	21.1	19.1	23.0
INJURIES-----	17,087	9,870	7,217	42.1	47.8	36.2
ALL OTHER ACUTE CONDITIONS-----	16,279	6,643	9,636	40.1	32.2	48.3

The appropriate relative standard errors of the estimates shown in this table are found in appendix I, figure II.

TABLE 8. DAYS LOST FROM WORK ASSOCIATED WITH ACUTE CONDITIONS AND DAYS LOST FROM WORK PER 100 CURRENTLY EMPLOYED PERSONS PER YEAR, BY AGE, SEX, AND CONDITION GROUP: UNITED STATES, 1978

[Data are based on household interviews of the civilian noninstitutionalized population. The survey design, general qualifications, and information on the reliability of the estimates are given in appendix I. Definitions of terms are given in appendix II]

SEX AND CONDITION GROUP	ALL AGES- 17 YEARS & OVER	17-44 YEARS	45 YEARS & OVER	ALL AGES- 17 YEARS & OVER	17-44 YEARS	45 YEARS & OVER
<u>BOTH SEXES</u>	DAYS LOST FROM WORK IN THOUSANDS			DAYS LOST FROM WORK PER 100 CURRENTLY EMPLOYED PERSONS PER YEAR		
ALL ACUTE CONDITIONS-----	350,636	243,165	107,471	376.6	388.6	352.0
INFECTIVE AND PARASITIC DISEASES-----	23,192	18,603	4,589	24.9	29.7	15.0
RESPIRATORY CONDITIONS-----	148,605	102,275	46,330	159.6	163.4	151.8
UPPER RESPIRATORY CONDITIONS-----	47,960	35,198	12,762	51.5	56.2	41.8
INFLUENZA-----	78,358	55,395	22,963	84.2	88.5	75.2
OTHER RESPIRATORY CONDITIONS-----	22,287	11,682	10,605	23.9	18.7	34.7
DIGESTIVE SYSTEM CONDITIONS-----	21,191	15,293	5,898	22.8	24.4	19.3
INJURIES-----	103,213	69,656	33,557	110.9	111.3	109.9
ALL OTHER ACUTE CONDITIONS-----	54,435	37,338	17,098	58.5	59.7	56.0
<u>MALE</u>						
ALL ACUTE CONDITIONS-----	186,980	128,065	58,915	341.3	353.9	316.8
INFECTIVE AND PARASITIC DISEASES-----	13,060	10,475	*2,584	23.8	28.9	*13.9
RESPIRATORY CONDITIONS-----	80,101	53,993	26,108	146.2	149.2	140.4
UPPER RESPIRATORY CONDITIONS-----	26,038	19,537	6,501	47.5	54.0	35.0
INFLUENZA-----	40,964	28,216	12,748	74.8	78.0	68.5
OTHER RESPIRATORY CONDITIONS-----	13,098	6,239	6,859	23.9	17.2	36.9
DIGESTIVE SYSTEM CONDITIONS-----	12,137	8,178	3,959	22.2	22.6	21.3
INJURIES-----	62,454	43,943	18,511	114.0	121.4	99.5
ALL OTHER ACUTE CONDITIONS-----	19,228	11,476	7,752	35.1	31.7	41.7
<u>FEMALE</u>						
ALL ACUTE CONDITIONS-----	163,656	115,100	48,556	427.1	436.2	406.9
INFECTIVE AND PARASITIC DISEASES-----	10,132	8,128	*2,004	26.4	30.8	*16.8
RESPIRATORY CONDITIONS-----	68,505	48,283	20,222	178.8	183.0	169.5
UPPER RESPIRATORY CONDITIONS-----	21,922	15,661	6,261	57.2	59.3	52.5
INFLUENZA-----	37,394	27,179	10,215	97.6	103.0	85.6
OTHER RESPIRATORY CONDITIONS-----	9,189	5,443	3,746	24.0	20.6	31.4
DIGESTIVE SYSTEM CONDITIONS-----	9,054	7,115	*1,939	23.6	27.0	*16.3
INJURIES-----	40,758	25,713	15,045	106.4	97.4	126.1
ALL OTHER ACUTE CONDITIONS-----	35,207	25,861	9,345	91.9	98.0	78.3

The appropriate relative standard errors of the estimates shown in this table are found in appendix I, figure II.

TABLE 9. NUMBER OF PERSONS INJURED AND NUMBER OF PERSONS INJURED PER 100 PERSONS PER YEAR, BY CLASS OF ACCIDENT, SEX, AND AGE: UNITED STATES, 1978

[Data are based on household interviews of the civilian noninstitutionalized population. The survey design, general qualifications, and information on the reliability of the estimates are given in appendix I. Definitions of terms are given in appendix II]

SEX AND AGE	TOTAL	CLASS OF ACCIDENT				
		MOVING MOTOR VEHICLE		WHILE AT WORK	HOME	OTHER
		TOTAL	TRAFFIC			
BOTH SEXES		NUMBER OF PERSONS INJURED IN THOUSANDS				
ALL AGES-----	67,519	4,575	3,827	10,511	25,413	29,747
UNDER 6 YEARS-----	6,110	*44	-	...	3,939	2,312
6-16 YEARS-----	15,542	604	*424	...	5,942	9,224
17-44 YEARS-----	30,861	2,874	2,454	8,252	8,637	12,980
45-64 YEARS-----	10,011	607	*503	2,140	3,960	3,635
65 YEARS AND OVER-----	4,996	*446	*446	*119	2,935	1,595
MALE						
ALL AGES-----	38,102	2,656	2,060	8,359	12,484	16,714
UNDER 6 YEARS-----	3,333	*44	-	...	2,208	1,219
6-16 YEARS-----	9,700	*311	*175	...	3,918	5,606
17-44 YEARS-----	18,408	1,647	1,276	6,627	4,154	7,483
45-64 YEARS-----	5,145	*409	*364	1,732	1,454	1,836
65 YEARS AND OVER-----	1,515	*245	*245	-	751	*570
FEMALE						
ALL AGES-----	29,417	1,919	1,767	2,152	12,928	13,033
UNDER 6 YEARS-----	2,777	-	-	...	1,731	1,093
6-16 YEARS-----	5,841	*293	*249	...	2,024	3,618
17-44 YEARS-----	12,453	1,227	1,179	1,625	4,482	5,497
45-64 YEARS-----	4,865	*198	*139	*408	2,506	1,800
65 YEARS AND OVER-----	3,481	*201	*201	*119	2,184	1,025
BOTH SEXES		NUMBER OF PERSONS INJURED PER 100 PERSONS PER YEAR				
ALL AGES-----	31.6	2.1	1.8	4.9	11.9	13.9
UNDER 6 YEARS-----	33.2	*0.2	-	...	21.4	12.6
6-16 YEARS-----	38.3	1.5	*1.0	...	14.6	22.7
17-44 YEARS-----	34.8	3.2	2.8	9.3	9.7	14.6
45-64 YEARS-----	23.1	1.4	*1.2	4.9	9.1	8.4
65 YEARS AND OVER-----	21.9	*2.0	*2.0	*0.5	12.9	7.0
MALE						
ALL AGES-----	36.9	2.6	2.0	8.1	12.1	16.2
UNDER 6 YEARS-----	35.3	*0.5	-	...	23.4	12.9
6-16 YEARS-----	47.0	*1.5	*0.8	...	19.0	27.1
17-44 YEARS-----	42.9	3.8	3.0	15.4	9.7	17.4
45-64 YEARS-----	24.8	*2.0	*1.8	8.4	7.0	8.9
65 YEARS AND OVER-----	16.1	*2.6	*2.6	-	8.0	*6.1
FEMALE						
ALL AGES-----	26.6	1.7	1.6	1.9	11.7	11.8
UNDER 6 YEARS-----	31.0	-	-	...	19.3	12.2
6-16 YEARS-----	29.3	*1.5	*1.2	...	10.1	18.1
17-44 YEARS-----	27.3	2.7	2.6	3.6	9.8	12.0
45-64 YEARS-----	21.5	*0.9	*0.6	*1.8	11.1	7.9
65 YEARS AND OVER-----	26.0	*1.5	*1.5	*0.9	16.3	7.7

NOTES: EXCLUDED FROM THESE STATISTICS ARE ALL CONDITIONS INVOLVING NEITHER RESTRICTED ACTIVITY NOR MEDICAL ATTENTION.

THE SUM OF DATA FOR THE FOUR CLASSES OF ACCIDENTS MAY BE GREATER THAN THE TOTAL BECAUSE THE CLASSES ARE NOT MUTUALLY EXCLUSIVE.

The appropriate relative standard errors of the estimates shown in this table are found in appendix I, figures I and VI.

TABLE 13. DAYS OF RESTRICTED ACTIVITY ASSOCIATED WITH INJURY AND DAYS OF RESTRICTED ACTIVITY PER 100 PERSONS PER YEAR, BY CLASS OF ACCIDENT, SEX, AND AGE: UNITED STATES, 1978

[Data are based on household interviews of the civilian noninstitutionalized population. The survey design, general qualifications, and information on the reliability of the estimates are given in appendix I. Definitions of terms are given in appendix II]

SEX AND AGE	TOTAL	CLASS OF ACCIDENT				
		MOVING MOTOR VEHICLE		WHILE AT WORK	HOME	OTHER
		TOTAL	TRAFFIC			
<u>BOTH SEXES</u>		DAYS OF RESTRICTED ACTIVITY IN THOUSANDS				
ALL AGES-----	730,427	125,757	112,757	184,031	201,237	266,157
UNDER 6 YEARS-----	10,300	*1,624	*1,314	...	*4,243	*4,743
6-16 YEARS-----	65,364	*5,452	*4,523	...	20,196	40,133
17-44 YEARS-----	296,378	59,083	51,905	100,655	49,750	112,168
45-64 YEARS-----	208,946	39,830	35,980	71,206	50,913	63,300
65 YEARS AND OVER-----	149,439	19,768	19,034	12,171	76,135	45,815
<u>MALE</u>						
ALL AGES-----	351,176	58,686	48,871	126,506	70,630	131,555
UNDER 6 YEARS-----	*3,404	*310	-	...	*2,116	*1,288
6-16 YEARS-----	38,161	*2,579	*1,831	...	11,278	24,395
17-44 YEARS-----	175,106	32,955	27,745	72,529	21,579	68,504
45-64 YEARS-----	95,848	18,514	15,702	45,326	17,074	26,499
65 YEARS AND OVER-----	38,656	*4,328	*3,594	8,651	18,583	10,869
<u>FEMALE</u>						
ALL AGES-----	379,251	67,070	63,886	57,525	130,608	134,602
UNDER 6 YEARS-----	6,896	*1,314	*1,314	...	*2,127	*3,455
6-16 YEARS-----	27,202	*2,872	*2,693	...	8,918	15,738
17-44 YEARS-----	121,272	26,128	24,160	28,126	28,171	43,664
45-64 YEARS-----	113,098	21,316	20,279	25,880	33,840	36,800
65 YEARS AND OVER-----	110,783	15,440	15,440	*3,520	57,552	34,946
<u>BOTH SEXES</u>		DAYS OF RESTRICTED ACTIVITY PER 100 PERSONS PER YEAR				
ALL AGES-----	341.6	58.8	52.7	86.1	94.1	124.5
UNDER 6 YEARS-----	55.9	*8.8	*7.1	...	*23.0	*25.8
6-16 YEARS-----	161.0	*13.4	*11.1	...	49.7	98.8
17-44 YEARS-----	334.4	66.7	58.6	113.6	56.1	126.6
45-64 YEARS-----	481.4	91.8	82.9	164.1	117.3	145.8
65 YEARS AND OVER-----	655.8	86.7	83.5	53.4	334.1	201.0
<u>MALE</u>						
ALL AGES-----	340.4	56.9	47.4	122.6	68.5	127.5
UNDER 6 YEARS-----	*36.0	*3.3	-	...	*22.4	*13.6
6-16 YEARS-----	184.8	*12.5	*8.9	...	54.6	118.1
17-44 YEARS-----	407.7	76.7	64.6	168.9	50.2	159.5
45-64 YEARS-----	462.3	89.3	75.7	218.6	82.3	127.8
65 YEARS AND OVER-----	411.5	*46.1	*38.3	92.1	197.8	115.7
<u>FEMALE</u>						
ALL AGES-----	342.7	60.6	57.7	52.0	118.0	121.6
UNDER 6 YEARS-----	76.9	*14.7	*14.7	...	*23.7	*38.5
6-16 YEARS-----	136.3	*14.4	*13.5	...	44.7	78.9
17-44 YEARS-----	265.5	57.2	52.9	61.6	61.7	95.6
45-64 YEARS-----	498.9	94.0	89.5	114.2	149.3	162.3
65 YEARS AND OVER-----	827.1	115.3	115.3	*26.3	429.7	260.9

NOTES: INCLUDES DISABILITY DAYS ASSOCIATED WITH CURRENT INJURIES AND IMPAIRMENTS DUE TO INJURY.

THE SUM OF DATA FOR THE FOUR CLASSES OF ACCIDENTS MAY BE GREATER THAN THE TOTAL BECAUSE THE CLASSES ARE NOT MUTUALLY EXCLUSIVE.

The appropriate relative standard errors of the estimates shown in this table are found in appendix I, figure II.

TABLE 11. DAYS OF BED DISABILITY ASSOCIATED WITH INJURY AND DAYS OF BED DISABILITY PER 100 PERSONS PER YEAR, BY CLASS OF ACCIDENT, SEX, AND AGE: UNITED STATES, 1978

[Data are based on household interviews of the civilian noninstitutionalized population. The survey design, general qualifications, and information on the reliability of the estimates are given in appendix I. Definitions of terms are given in appendix II]

SEX AND AGE	TOTAL	CLASS OF ACCIDENT				
		MOVING MOTOR VEHICLE		WHILE AT WORK	HOME	OTHER
		TOTAL	TRAFFIC			
BOTH SEXES		DAYS OF BED DISABILITY IN THOUSANDS				
ALL AGES-----	184,747	38,683	34,535	42,593	50,504	65,067
UNDER 6 YEARS-----	*3,245	*298	*166	...	*1,292	*1,788
6-16 YEARS-----	12,762	*2,189	*2,143	...	*4,172	6,447
17-44 YEARS-----	71,666	14,762	13,314	20,640	13,066	29,071
45-64 YEARS-----	60,209	14,940	12,419	19,505	12,577	18,945
65 YEARS AND OVER-----	36,865	6,493	6,493	*2,448	19,397	8,815
MALE						
ALL AGES-----	72,994	12,171	9,307	25,178	14,588	28,993
UNDER 6 YEARS-----	*1,220	*133	-	...	*620	*600
6-16 YEARS-----	6,137	*882	*882	...	*1,878	*3,347
17-44 YEARS-----	32,352	*5,474	*4,346	12,293	*4,745	14,293
45-64 YEARS-----	22,329	*4,723	*3,120	10,667	*4,249	5,750
65 YEARS AND OVER-----	10,985	*959	*959	*2,218	*3,095	*5,002
FEMALE						
ALL AGES-----	111,753	26,512	25,228	17,415	35,916	36,073
UNDER 6 YEARS-----	*2,025	*166	*166	...	*672	*1,187
6-16 YEARS-----	6,655	*1,307	*1,261	...	*2,294	*3,100
17-44 YEARS-----	39,314	9,288	8,968	8,347	8,321	14,778
45-64 YEARS-----	37,879	10,217	9,299	8,837	8,328	13,195
65 YEARS AND OVER-----	25,879	5,534	5,534	*230	16,302	*3,813
BOTH SEXES		DAYS OF BED DISABILITY PER 100 PERSONS PER YEAR				
ALL AGES-----	86.4	18.1	16.2	19.9	23.6	30.4
UNDER 6 YEARS-----	*17.6	*1.6	*0.9	...	*7.0	*9.7
6-16 YEARS-----	31.4	*5.4	*5.3	...	*10.3	15.9
17-44 YEARS-----	80.9	16.7	15.0	23.3	14.7	32.8
45-64 YEARS-----	138.7	34.4	28.6	44.9	29.0	43.6
65 YEARS AND OVER-----	161.8	28.5	28.5	*10.7	85.1	38.7
MALE						
ALL AGES-----	70.7	11.8	9.0	24.4	14.1	28.1
UNDER 6 YEARS-----	*12.9	*1.4	-	...	*6.6	*6.4
6-16 YEARS-----	29.6	*4.3	*4.3	...	*9.1	*16.2
17-44 YEARS-----	75.3	*12.7	*10.1	28.6	*11.0	33.3
45-64 YEARS-----	107.7	*22.8	*15.0	51.4	*20.5	27.7
65 YEARS AND OVER-----	116.9	*10.2	*10.2	*23.6	*33.0	*53.3
FEMALE						
ALL AGES-----	101.0	24.0	22.8	15.7	32.5	32.6
UNDER 6 YEARS-----	*22.6	*1.9	*1.9	...	*7.5	*13.2
6-16 YEARS-----	33.4	*6.6	*6.3	...	*11.5	*15.5
17-44 YEARS-----	86.1	20.3	19.6	18.3	18.2	32.4
45-64 YEARS-----	167.1	45.1	41.0	39.0	36.7	58.2
65 YEARS AND OVER-----	193.2	41.3	41.3	*1.7	121.7	*28.5

NOTES: INCLUDES DISABILITY DAYS ASSOCIATED WITH CURRENT INJURIES AND IMPAIRMENTS DUE TO INJURY.

THE SUM OF DATA FOR THE FOUR CLASSES OF ACCIDENTS MAY BE GREATER THAN THE TOTAL BECAUSE THE CLASSES ARE NOT MUTUALLY EXCLUSIVE.

The appropriate relative standard errors of the estimates shown in this table are found in appendix I, figure II.

TABLE 12. DAYS OF DISABILITY AND DAYS OF DISABILITY PER PERSON PER YEAR, BY SEX AND AGE: UNITED STATES, 1978

[Data are based on household interviews of the civilian noninstitutionalized population. The survey design, general qualifications, and information on the reliability of the estimates are given in appendix I. Definitions of terms are given in appendix II]

SEX AND AGE	RESTRICTED ACTIVITY DAYS	BED- DISABILITY DAYS	WORK-LOSS DAYS
<u>BOTH SEXES</u>			
DAYS OF DISABILITY IN THOUSANDS			
ALL AGES-----	4,011,249	1,524,093	486,036
UNDER 17 YEARS-----	665,610	307,116	...
17-24 YEARS-----	388,993	174,416	91,734
25-44 YEARS-----	920,781	330,333	214,643
45-64 YEARS-----	1,117,812	380,759	167,040
65 YEARS AND OVER-----	918,052	331,469	12,619
<u>MALE</u>			
ALL AGES-----	1,678,570	617,418	266,154
UNDER 17 YEARS-----	323,000	146,171	...
17-24 YEARS-----	161,629	63,846	46,360
25-44 YEARS-----	382,880	122,629	111,182
45-64 YEARS-----	481,518	151,730	103,039
65 YEARS AND OVER-----	329,543	133,042	5,572
<u>FEMALE</u>			
ALL AGES-----	2,332,679	906,675	219,883
UNDER 17 YEARS-----	342,610	160,946	...
17-24 YEARS-----	227,364	110,570	45,374
25-44 YEARS-----	537,901	207,704	103,461
45-64 YEARS-----	636,294	229,029	64,000
65 YEARS AND OVER-----	588,509	198,426	7,047
<u>BOTH SEXES</u>			
DAYS OF DISABILITY PER PERSON PER YEAR			
ALL AGES-----	18.8	7.1	5.2
UNDER 17 YEARS-----	11.3	5.2	...
17-24 YEARS-----	12.3	5.5	4.5
25-44 YEARS-----	16.2	5.8	5.1
45-64 YEARS-----	25.8	8.8	6.1
65 YEARS AND OVER-----	40.3	14.5	4.2
<u>MALE</u>			
ALL AGES-----	16.3	6.0	4.9
UNDER 17 YEARS-----	10.7	4.9	...
17-24 YEARS-----	10.5	4.1	4.2
25-44 YEARS-----	13.9	4.5	4.4
45-64 YEARS-----	23.2	7.3	6.2
65 YEARS AND OVER-----	35.1	14.2	2.9
<u>FEMALE</u>			
ALL AGES-----	21.1	8.2	5.7
UNDER 17 YEARS-----	11.8	5.6	...
17-24 YEARS-----	14.0	6.8	4.9
25-44 YEARS-----	18.3	7.1	6.0
45-64 YEARS-----	28.1	10.1	5.9
65 YEARS AND OVER-----	43.9	14.8	6.5

NOTES: WORK LOSS REPORTED FOR CURRENTLY EMPLOYED PERSONS AGED 17 YEARS AND OVER.

The appropriate relative standard errors of the estimates shown in this table are found in appendix I, figure II.

TABLE 13. DAYS LOST FROM SCHOOL AND DAYS LOST FROM SCHOOL PER CHILD 6-16 YEARS OF AGE PER YEAR, BY SEX: UNITED STATES, 1978

[Data are based on household interviews of the civilian noninstitutionalized population. The survey design, general qualifications, and information on the reliability of the estimates are given in appendix I. Definitions of terms are given in appendix II]

AGE	BOTH SEXES	MALE	FEMALE
	DAYS LOST FROM SCHOOL IN THOUSANDS		
ALL AGES- 6-16 YEARS-----	220,480	104,450	116,030
	NUMBER OF SCHOOL-LOSS DAYS PER CHILD PER YEAR		
ALL AGES- 6-16 YEARS-----	5.4	5.1	5.8

The appropriate relative standard errors of the estimates shown in this table are found in appendix I, figure II.

TABLE 14. NUMBER AND PERCENT DISTRIBUTION OF PERSONS WITH LIMITATION OF ACTIVITY DUE TO CHRONIC CONDITIONS, BY DEGREE OF LIMITATION ACCORDING TO SEX AND AGE: UNITED STATES, 1978

[Data are based on household interviews of the civilian noninstitutionalized population. The survey design, general qualifications, and information on the reliability of the estimates are given in appendix I. Definitions of terms are given in appendix II]

SEX AND AGE	TOTAL POPULATION	WITH ACTIVITY LIMITATION	WITH LIMITATION IN MAJOR ACTIVITY	WITH NO ACTIVITY LIMITATION	TOTAL POPULATION	WITH ACTIVITY LIMITATION	WITH LIMITATION IN MAJOR ACTIVITY	WITH NO ACTIVITY LIMITATION
<u>BOTH SEXES</u>	NUMBER IN THOUSANDS				PERCENT DISTRIBUTION			
ALL AGES-----	213,828	30,306	22,598	183,523	100.0	14.2	10.6	85.8
UNDER 17 YEARS-----	59,012	2,309	1,178	56,703	100.0	3.9	2.0	96.1
17-44 YEARS-----	88,627	7,501	4,621	81,126	100.0	8.5	5.2	91.5
45-64 YEARS-----	43,403	10,244	8,063	33,159	100.0	23.6	18.6	76.4
65 YEARS AND OVER---	22,788	10,252	8,736	12,535	100.0	45.0	38.3	55.0
<u>MALE</u>								
ALL AGES-----	103,174	14,748	11,182	88,425	100.0	14.3	10.8	85.7
UNDER 17 YEARS-----	30,096	1,271	652	28,825	100.0	4.2	2.2	95.8
17-44 YEARS-----	42,951	3,909	2,378	39,041	100.0	9.1	5.5	90.9
45-64 YEARS-----	20,734	5,038	4,093	15,696	100.0	24.3	19.7	75.7
65 YEARS AND OVER---	9,393	4,530	4,059	4,863	100.0	48.2	43.2	51.8
<u>FEMALE</u>								
ALL AGES-----	110,655	15,557	11,416	95,097	100.0	14.1	10.3	85.9
UNDER 17 YEARS-----	28,916	1,038	526	27,878	100.0	3.6	1.8	96.4
17-44 YEARS-----	45,676	3,591	2,243	42,085	100.0	7.9	4.9	92.1
45-64 YEARS-----	22,668	5,206	3,969	17,462	100.0	23.0	17.5	77.0
65 YEARS AND OVER---	13,394	5,722	4,678	7,673	100.0	42.7	34.9	57.3

NOTES: MAJOR ACTIVITY REFERS TO ABILITY TO WORK, KEEP HOUSE, OR ENGAGE IN SCHOOL OR PRESCHOOL ACTIVITIES.

FOR OFFICIAL POPULATION ESTIMATES FOR MORE GENERAL USE, SEE BUREAU OF THE CENSUS REPORTS ON THE CIVILIAN POPULATION OF THE UNITED STATES, IN CURRENT POPULATION REPORTS: SERIES P-20, P-25, AND P-60.

The appropriate relative standard errors of the estimates shown in this table are found in appendix I, figures IV and VII.

TABLE 15. NUMBER OF DISCHARGES FROM SHORT-STAY HOSPITALS, NUMBER OF DISCHARGES PER 100 PERSONS PER YEAR, NUMBER OF HOSPITAL DAYS, AND AVERAGE LENGTH OF STAY, BY SEX AND AGE: UNITED STATES, BASED ON DATA COLLECTED IN HEALTH INTERVIEWS IN 1978

[Data are based on household interviews of the civilian noninstitutionalized population. The survey design, general qualifications, and information on the reliability of the estimates are given in appendix I. Definitions of terms are given in appendix II]

AGE	BOTH SEXES	MALE	FEMALE	BOTH SEXES	MALE	FEMALE
	NUMBER OF DISCHARGES IN THOUSANDS			NUMBER OF DISCHARGES PER 100 PERSONS PER YEAR		
ALL AGES-----	29,996	12,406	17,590	14.0	12.0	15.9
UNDER 17 YEARS-----	4,057	2,100	1,957	6.9	7.0	6.8
17-24 YEARS-----	4,030	1,248	2,782	12.7	8.1	17.1
25-34 YEARS-----	5,058	1,492	3,567	15.3	9.3	21.0
35-44 YEARS-----	3,107	1,205	1,901	13.0	10.5	15.3
45-64 YEARS-----	7,644	3,567	4,077	17.6	17.2	18.0
65 YEARS AND OVER-----	6,101	2,794	3,306	26.8	29.7	24.7
	NUMBER OF HOSPITAL DAYS IN THOUSANDS			AVERAGE LENGTH OF STAY		
ALL AGES-----	236,417	114,067	122,350	7.9	9.2	7.0
UNDER 17 YEARS-----	20,928	11,010	9,918	5.2	5.2	5.1
17-24 YEARS-----	20,733	8,308	12,425	5.1	6.7	4.5
25-34 YEARS-----	30,364	11,775	18,589	6.0	7.9	5.2
35-44 YEARS-----	21,474	9,015	12,459	6.9	7.5	6.6
45-64 YEARS-----	70,166	35,531	34,635	9.2	10.0	8.5
65 YEARS AND OVER-----	72,753	38,428	34,325	11.9	13.8	10.4

NOTES: THESE STATISTICS ARE BASED ON DATA COLLECTED IN HOUSEHOLD HEALTH INTERVIEWS. THEY WILL DIFFER FROM THOSE REPORTED BY THE NCHS'S HOSPITAL DISCHARGE SURVEY AND OTHER STUDIES BECAUSE OF DIFFERENCES IN THE POPULATION COVERED, THE SOURCES OF DATA, AND TYPES OF HOSPITALS INCLUDED, E.G., DATA IN THIS REPORT INCLUDE VETERANS ADMINISTRATION AND OTHER FEDERAL HOSPITALS, BUT EXCLUDE PERSONS WHO DIED IN THE HOSPITAL, AND PERSONS WITH STAYS OF LESS THAN ONE DAY.

The appropriate relative standard errors of the estimates shown in this table are found in appendix I, figure III.

TABLE 16. NUMBER AND PERCENT DISTRIBUTION OF PERSONS WITH SHORT-STAY HOSPITAL EPISODES DURING THE PAST YEAR BY NUMBER OF EPISODES, ACCORDING TO SEX AND AGE: UNITED STATES, BASED ON DATA COLLECTED IN HEALTH INTERVIEWS IN 1978

[Data are based on household interviews of the civilian noninstitutionalized population. The survey design, general qualifications, and information on the reliability of the estimates are given in appendix I. Definitions of terms are given in appendix II]

SEX AND AGE	POPULATION	NUMBER OF HOSPITAL EPISODES				POPULATION	NUMBER OF HOSPITAL EPISODES			
		NONE	1	2	3+		NONE	1	2	3+
<u>BOTH SEXES</u>	NUMBER OF PERSONS IN THOUSANDS					PERCENT DISTRIBUTION				
ALL AGES-----	213,828	191,540	18,308	2,952	1,029	100.0	89.6	8.6	1.4	0.5
UNDER 17 YEARS-----	59,012	55,871	2,746	287	107	100.0	94.7	4.7	0.5	0.2
17-24 YEARS-----	31,731	28,360	2,937	342	93	100.0	89.4	9.3	1.1	0.3
25-34 YEARS-----	33,012	28,908	3,605	408	92	100.0	87.6	10.9	1.2	0.3
35-44 YEARS-----	23,883	21,571	1,931	285	96	100.0	90.3	8.1	1.2	0.4
45-64 YEARS-----	43,403	38,148	4,050	856	349	100.0	87.9	9.3	2.0	0.8
65 YEARS AND OVER----	22,788	18,682	3,039	774	292	100.0	82.0	13.3	3.4	1.3
<u>MALE</u>										
ALL AGES-----	103,174	94,389	7,188	1,139	458	100.0	91.5	7.0	1.1	0.4
UNDER 17 YEARS-----	30,096	28,416	1,487	141	52	100.0	94.4	4.9	0.5	0.2
17-24 YEARS-----	15,443	14,482	844	84	*33	100.0	93.8	5.5	0.5	*0.2
25-34 YEARS-----	16,028	14,959	924	112	*34	100.0	93.3	5.8	0.7	*0.2
35-44 YEARS-----	11,480	10,647	687	100	46	100.0	92.7	6.0	0.9	0.4
45-64 YEARS-----	20,734	18,297	1,905	374	159	100.0	88.2	9.2	1.8	0.8
65 YEARS AND OVER----	9,393	7,589	1,341	329	134	100.0	80.8	14.3	3.5	1.4
<u>FEMALE</u>										
ALL AGES-----	110,655	97,152	11,119	1,813	571	100.0	87.8	10.0	1.6	0.5
UNDER 17 YEARS-----	28,916	27,456	1,259	147	55	100.0	95.0	4.4	0.5	0.2
17-24 YEARS-----	16,288	13,878	2,093	258	59	100.0	85.2	12.8	1.6	0.4
25-34 YEARS-----	16,985	13,949	2,681	296	58	100.0	82.1	15.8	1.7	0.3
35-44 YEARS-----	12,404	10,925	1,244	184	50	100.0	88.1	10.0	1.5	0.4
45-64 YEARS-----	22,668	19,851	2,145	482	191	100.0	87.6	9.5	2.1	0.8
65 YEARS AND OVER----	13,394	11,093	1,698	446	158	100.0	82.8	12.7	3.3	1.2

NOTES: FOR OFFICIAL POPULATION ESTIMATES FOR MORE GENERAL USE, SEE BUREAU OF THE CENSUS REPORTS ON THE CIVILIAN POPULATION OF THE UNITED STATES, IN CURRENT POPULATION REPORTS: SERIES P-20, P-25, AND P-60.

The appropriate relative standard errors of the estimates shown in this table are found in appendix I, figures IV and VII.

TABLE 17. NUMBER OF SHORT-STAY HOSPITAL DAYS DURING THE PAST YEAR AND NUMBER OF DAYS PER PERSON WITH ONE HOSPITAL EPISODE OR MORE, BY NUMBER OF EPISODES, SEX, AND AGE: UNITED STATES, BASED ON DATA COLLECTED IN HEALTH INTERVIEWS IN 1978

[Data are based on household interviews of the civilian noninstitutionalized population. The survey design, general qualifications, and information on the reliability of the estimates are given in appendix I. Definitions of terms are given in appendix II]

SEX AND AGE	NUMBER OF HOSPITAL EPISODES							
	ALL EPISODES	1	2	3+	ALL EPISODES	1	2	3+
<u>BOTH SEXES</u>	HOSPITAL DAYS IN THOUSANDS				DAYS PER PERSON WITH EPISODES			
ALL AGES-----	215,253	124,743	54,169	36,341	9.7	6.8	18.3	35.3
UNDER 17 YEARS-----	20,174	13,317	3,652	3,204	6.4	4.8	12.7	29.9
17-24 YEARS-----	19,584	13,163	4,111	2,311	5.8	4.5	12.0	24.8
25-34 YEARS-----	27,188	19,351	5,494	2,342	6.6	5.4	13.5	25.5
35-44 YEARS-----	19,442	11,680	4,467	3,296	8.4	6.0	15.7	34.3
45-64 YEARS-----	64,879	33,930	17,143	13,806	12.3	8.4	20.0	39.6
65 YEARS AND OVER-----	63,986	33,302	19,303	11,381	15.6	11.0	24.9	39.0
<u>MALE</u>								
ALL AGES-----	97,008	56,228	23,674	17,106	11.0	7.8	20.8	37.3
UNDER 17 YEARS-----	10,736	7,564	1,863	1,309	6.4	5.1	13.2	25.2
17-24 YEARS-----	6,966	4,439	1,221	1,306	7.2	5.3	14.5	29.6
25-34 YEARS-----	9,310	6,513	1,749	1,049	8.7	7.0	15.6	30.9
35-44 YEARS-----	7,623	4,427	1,529	1,667	9.2	6.4	15.3	36.2
45-64 YEARS-----	31,409	16,842	8,535	6,032	12.9	8.8	22.8	37.9
65 YEARS AND OVER-----	30,964	16,444	8,778	5,743	17.2	12.3	26.7	42.9
<u>FEMALE</u>								
ALL AGES-----	118,245	68,514	30,495	19,235	8.8	6.2	16.8	33.7
UNDER 17 YEARS-----	9,438	5,753	1,789	1,896	6.5	4.6	12.2	34.5
17-24 YEARS-----	12,618	8,723	2,890	1,005	5.2	4.2	11.2	17.0
25-34 YEARS-----	17,878	12,839	3,746	1,294	5.9	4.8	12.7	22.3
35-44 YEARS-----	11,820	7,253	2,938	1,629	8.0	5.8	16.0	32.6
45-64 YEARS-----	33,470	17,088	8,608	7,774	11.9	8.0	17.9	40.7
65 YEARS AND OVER-----	33,021	16,858	10,525	5,638	14.4	9.9	23.6	35.7

The appropriate relative standard errors of the estimates shown in this table are found in appendix I, figure IV.

Estimates of the number of hospital days shown above are based on information for the 12-month period prior to the time of interview, and because of memory decay are lower than the estimates of hospital days shown in table 15 which are based on a 6-month reference period.

TABLE 18. NUMBER OF DENTAL VISITS AND NUMBER OF DENTAL VISITS PER PERSON PER YEAR, BY AGE AND SEX: UNITED STATES, 1978

[Data are based on household interviews of the civilian noninstitutionalized population. The survey design, general qualifications, and information on the reliability of the estimates are given in appendix I. Definitions of terms are given in appendix II]

SEX	ALL AGES	UNDER 17 YEARS	17-24 YEARS	25-44 YEARS	45-64 YEARS	65 YEARS AND OVER
NUMBER OF DENTAL VISITS IN THOUSANDS						
BOTH SEXES-----	342,472	95,022	48,386	95,490	75,834	27,740
MALE-----	149,348	44,079	21,053	41,393	33,335	9,487
FEMALE-----	193,124	50,943	27,333	54,096	42,499	18,253
NUMBER OF DENTAL VISITS PER PERSON PER YEAR						
BOTH SEXES-----	1.6	1.6	1.5	1.7	1.7	1.2
MALE-----	1.4	1.5	1.4	1.5	1.6	1.0
FEMALE-----	1.7	1.8	1.7	1.8	1.9	1.4

The appropriate relative standard errors of the estimates shown in this table are found in appendix I, figure V.

TABLE 19. NUMBER AND PERCENT DISTRIBUTION OF PERSONS BY TIME INTERVAL SINCE LAST DENTAL VISIT ACCORDING TO SEX AND AGE: UNITED STATES, 1978

[Data are based on household interviews of the civilian noninstitutionalized population. The survey design, general qualifications, and information on the reliability of the estimates are given in appendix I. Definitions of terms are given in appendix II]

SEX AND AGE	TOTAL POPULATION	TIME INTERVAL SINCE LAST DENTAL VISIT						NEVER	UNKNOWN
		UNDER 6 MONTHS	6-11 MONTHS	1 YEAR	2-4 YEARS	5 YEARS AND OVER			
BOTH SEXES		NUMBER OF PERSONS IN THOUSANDS							
ALL AGES-----	213,828	76,219	30,400	28,483	27,306	28,993	19,417	3,011	
UNDER 17 YEARS-----	59,012	21,690	8,251	6,348	3,817	893	17,352	662	
17-24 YEARS-----	31,731	11,709	5,787	5,553	4,958	2,100	1,014	608	
25-44 YEARS-----	56,895	21,620	9,049	9,451	8,864	6,358	650	903	
45-64 YEARS-----	43,403	15,678	5,485	5,345	6,501	9,555	260	578	
65 YEARS AND OVER-----	22,788	5,522	1,827	1,785	3,165	10,087	141	260	
MALE		NUMBER OF PERSONS IN THOUSANDS							
ALL AGES-----	103,174	35,288	14,505	14,009	13,596	13,936	10,160	1,680	
UNDER 17 YEARS-----	30,096	10,803	4,194	3,350	1,986	467	8,948	347	
17-24 YEARS-----	15,443	5,227	2,835	2,671	2,591	1,180	589	350	
25-44 YEARS-----	27,507	9,823	4,114	4,565	4,535	3,527	411	532	
45-64 YEARS-----	20,734	7,267	2,638	2,691	3,084	4,575	142	337	
65 YEARS AND OVER-----	9,393	2,167	725	732	1,400	4,186	69	114	
FEMALE		NUMBER OF PERSONS IN THOUSANDS							
ALL AGES-----	110,655	40,931	15,894	14,473	13,709	15,058	9,257	1,331	
UNDER 17 YEARS-----	28,916	10,886	4,057	2,998	1,831	426	8,403	315	
17-24 YEARS-----	16,288	6,482	2,952	2,882	2,367	920	425	258	
25-44 YEARS-----	29,388	11,797	4,935	4,887	4,329	2,831	238	371	
45-64 YEARS-----	22,668	8,411	2,847	2,654	3,417	4,980	118	241	
65 YEARS AND OVER-----	13,394	3,355	1,102	1,053	1,765	5,901	72	146	
BOTH SEXES		PERCENT DISTRIBUTION							
ALL AGES-----	100.0	35.6	14.2	13.3	12.8	13.6	9.1	1.4	
UNDER 17 YEARS-----	100.0	36.8	14.0	10.8	6.5	1.5	29.4	1.1	
17-24 YEARS-----	100.0	36.9	18.2	17.5	15.6	6.6	3.2	1.9	
25-44 YEARS-----	100.0	38.0	15.9	16.6	15.6	11.2	1.1	1.6	
45-64 YEARS-----	100.0	36.1	12.6	12.3	15.0	22.0	0.6	1.3	
65 YEARS AND OVER-----	100.0	24.2	8.0	7.8	13.9	44.3	0.6	1.1	
MALE		PERCENT DISTRIBUTION							
ALL AGES-----	100.0	34.2	14.1	13.6	13.2	13.5	9.8	1.6	
UNDER 17 YEARS-----	100.0	35.9	13.9	11.1	6.6	1.6	29.7	1.2	
17-24 YEARS-----	100.0	33.8	18.4	17.3	16.8	7.6	3.8	2.3	
25-44 YEARS-----	100.0	35.7	15.0	16.6	16.5	12.8	1.5	1.9	
45-64 YEARS-----	100.0	35.0	12.7	13.0	14.9	22.1	0.7	1.6	
65 YEARS AND OVER-----	100.0	23.1	7.7	7.8	14.9	44.6	0.7	1.2	
FEMALE		PERCENT DISTRIBUTION							
ALL AGES-----	100.0	37.0	14.4	13.1	12.4	13.6	8.4	1.2	
UNDER 17 YEARS-----	100.0	37.6	14.0	10.4	6.3	1.5	29.1	1.1	
17-24 YEARS-----	100.0	39.8	18.1	17.7	14.5	5.6	2.6	1.6	
25-44 YEARS-----	100.0	40.1	16.8	16.6	14.7	9.6	0.8	1.3	
45-64 YEARS-----	100.0	37.1	12.6	11.7	15.1	22.0	0.5	1.1	
65 YEARS AND OVER-----	100.0	25.0	8.2	7.9	13.2	44.1	0.5	1.1	

NOTES: FOR OFFICIAL POPULATION ESTIMATES FOR MORE GENERAL USE, SEE BUREAU OF THE CENSUS REPORTS ON THE CIVILIAN POPULATION OF THE UNITED STATES, IN CURRENT POPULATION REPORTS: SERIES P-20, P-25, AND P-60.

The appropriate relative standard errors of the estimates shown in this table are found in appendix I, figure V.

TABLE 20. NUMBER OF PHYSICIAN VISITS AND NUMBER OF PHYSICIAN VISITS PER PERSON PER YEAR, BY AGE AND SEX: UNITED STATES, 1978

[Data are based on household interviews of the civilian noninstitutionalized population. The survey design, general qualifications, and information on the reliability of the estimates are given in appendix I. Definitions of terms are given in appendix II]

SEX	ALL AGES	UNDER 17 YEARS	17-24 YEARS	25-44 YEARS	45-64 YEARS	65-74 YEARS	75 YEARS AND OVER
NUMBER OF PHYSICIAN VISITS IN THOUSANDS							
BOTH SEXES-----	1,016,647	242,441	134,897	266,438	229,439	91,203	52,230
MALE-----	417,278	125,626	45,866	94,604	96,538	35,057	19,587
FEMALE-----	599,370	116,816	89,030	171,834	132,901	56,145	32,643
NUMBER OF PHYSICIAN VISITS PER PERSON PER YEAR							
BOTH SEXES-----	4.8	4.1	4.3	4.7	5.3	6.2	6.4
MALE-----	4.0	4.2	3.0	3.4	4.7	5.5	6.4
FEMALE-----	5.4	4.0	5.5	5.8	5.9	6.8	6.4

The appropriate relative standard errors of the estimates shown in this table are found in appendix I, figure V.

TABLE 21. NUMBER AND PERCENT DISTRIBUTION OF PERSONS BY TIME INTERVAL SINCE LAST PHYSICIAN VISIT ACCORDING TO SEX AND AGE: UNITED STATES, 1978

[Data are based on household interviews of the civilian noninstitutionalized population. The survey design, general qualifications, and information on the reliability of the estimates are given in appendix I. Definitions of terms are given in appendix II]

SEX AND AGE	TOTAL POPULATION	TIME INTERVAL SINCE LAST PHYSICIAN VISIT						
		UNDER 6 MONTHS	6-11 MONTHS	1 YEAR	2-4 YEARS	5 YEARS AND OVER	NEVER	UNKNOWN
BOTH SEXES		NUMBER OF PERSONS IN THOUSANDS						
ALL AGES-----	213,828	125,880	35,263	23,332	19,804	7,114	341	2,095
UNDER 17 YEARS-----	59,012	34,328	10,423	7,892	4,521	1,042	191	614
17-24 YEARS-----	31,731	18,058	5,447	3,821	3,177	787	48	393
25-44 YEARS-----	56,895	31,889	10,479	6,203	5,822	1,887	50	565
45-64 YEARS-----	43,403	25,920	6,406	3,994	4,433	2,213	*28	409
65 YEARS AND OVER-----	22,788	15,685	2,507	1,422	1,851	1,185	*24	114
MALE		NUMBER OF PERSONS IN THOUSANDS						
ALL AGES-----	103,174	55,169	17,876	12,555	11,929	4,294	168	1,184
UNDER 17 YEARS-----	30,096	17,478	5,405	4,023	2,272	523	85	310
17-24 YEARS-----	15,443	7,266	2,973	2,231	2,180	523	*30	241
25-44 YEARS-----	27,507	12,898	5,230	3,539	4,044	1,405	*27	364
45-64 YEARS-----	20,734	11,404	3,174	2,116	2,535	1,257	*22	225
65 YEARS AND OVER-----	9,393	6,122	1,094	646	897	586	*4	45
FEMALE		NUMBER OF PERSONS IN THOUSANDS						
ALL AGES-----	110,655	70,712	17,387	10,778	7,875	2,819	173	911
UNDER 17 YEARS-----	28,916	16,850	5,018	3,869	2,249	519	106	305
17-24 YEARS-----	16,288	10,792	2,475	1,590	997	264	*19	152
25-44 YEARS-----	29,388	18,991	5,249	2,665	1,778	482	*23	201
45-64 YEARS-----	22,668	14,515	3,232	1,878	1,898	956	*5	184
65 YEARS AND OVER-----	13,394	9,563	1,413	776	953	599	*20	69
BOTH SEXES		PERCENT DISTRIBUTION						
ALL AGES-----	100.0	58.9	16.5	10.9	9.3	3.3	0.2	1.0
UNDER 17 YEARS-----	100.0	58.2	17.7	13.4	7.7	1.8	0.3	1.0
17-24 YEARS-----	100.0	56.9	17.2	12.0	10.0	2.5	0.2	1.2
25-44 YEARS-----	100.0	56.0	18.4	10.9	10.2	3.3	0.1	1.0
45-64 YEARS-----	100.0	59.7	14.8	9.2	10.2	5.1	*0.1	0.9
65 YEARS AND OVER-----	100.0	68.8	11.0	6.2	8.1	5.2	*0.1	0.5
MALE		PERCENT DISTRIBUTION						
ALL AGES-----	100.0	53.5	17.3	12.2	11.6	4.2	0.2	1.1
UNDER 17 YEARS-----	100.0	58.1	18.0	13.4	7.5	1.7	0.3	1.0
17-24 YEARS-----	100.0	47.1	19.3	14.4	14.1	3.4	*0.2	1.6
25-44 YEARS-----	100.0	46.9	19.0	12.9	14.7	5.1	*0.1	1.3
45-64 YEARS-----	100.0	55.0	15.3	10.2	12.2	6.1	*0.1	1.1
65 YEARS AND OVER-----	100.0	65.2	11.6	6.9	9.5	6.2	*0.0	0.5
FEMALE		PERCENT DISTRIBUTION						
ALL AGES-----	100.0	63.9	15.7	9.7	7.1	2.5	0.2	0.8
UNDER 17 YEARS-----	100.0	58.3	17.4	13.4	7.8	1.8	0.4	1.1
17-24 YEARS-----	100.0	66.3	15.2	9.8	6.1	1.6	*0.1	0.9
25-44 YEARS-----	100.0	64.6	17.9	9.1	6.1	1.6	*0.1	0.7
45-64 YEARS-----	100.0	64.0	14.3	8.3	8.4	4.2	*0.0	0.8
65 YEARS AND OVER-----	100.0	71.4	10.5	5.8	7.1	4.5	*0.1	0.5

NOTES: FOR OFFICIAL POPULATION ESTIMATES FOR MORE GENERAL USE, SEE BUREAU OF THE CENSUS REPORTS ON THE CIVILIAN POPULATION OF THE UNITED STATES, IN CURRENT POPULATION REPORTS: SERIES P-20, P-25, AND P-60.

The appropriate relative standard errors of the estimates shown in this table are found in appendix I, figure V.

TABLE 22. INCIDENCE OF ALL ACUTE CONDITIONS AND ACUTE RESPIRATORY CONDITIONS PER 100 PERSONS PER QUARTER, BY SEX AND AGE: UNITED STATES, 1978

[Data are based on household interviews of the civilian noninstitutionalized population. The survey design, general qualifications, and information on the reliability of the estimates are given in appendix I. Definitions of terms are given in appendix II]

SEX AND AGE	ALL ACUTE CONDITIONS				ACUTE RESPIRATORY CONDITIONS			
	JAN.-MAR.	APR.-JUNE	JULY-SEPT.	OCT.-DEC.	JAN.-MAR.	APR.-JUNE	JULY-SEPT.	OCT.-DEC.
NUMBER OF CONDITIONS PER 100 PERSONS PER QUARTER								
BOTH SEXES, ALL AGES-----	68.7	44.4	43.3	61.8	43.6	19.0	17.0	36.2
UNDER 6 YEARS-----	114.9	83.3	79.2	109.8	70.7	35.9	33.4	66.2
6-16 YEARS-----	97.4	53.3	47.0	75.2	65.6	23.4	19.7	44.1
17-44 YEARS-----	66.7	44.5	49.2	64.2	41.1	19.4	18.8	37.3
45 YEARS AND OVER-----	40.8	27.9	23.3	37.1	25.8	11.2	8.2	21.5
MALE, ALL AGES-----	65.1	42.6	41.8	57.6	42.2	18.8	15.5	33.3
UNDER 6 YEARS-----	120.1	86.1	80.2	116.5	73.9	36.3	34.6	69.7
6-16 YEARS-----	94.9	51.2	45.0	70.5	62.4	22.5	16.8	38.8
17-44 YEARS-----	60.1	41.1	44.6	57.0	39.8	18.3	16.1	33.5
45 YEARS AND OVER-----	34.2	25.5	23.5	31.1	21.5	11.5	7.7	17.7
FEMALE, ALL AGES-----	72.1	46.0	44.7	65.7	45.0	19.2	18.3	38.9
UNDER 6 YEARS-----	109.3	80.5	78.2	102.7	67.4	35.5	32.0	62.5
6-16 YEARS-----	100.0	55.5	49.0	80.0	68.9	24.4	22.7	49.5
17-44 YEARS-----	72.9	47.7	53.5	70.9	42.4	20.3	21.4	41.0
45 YEARS AND OVER-----	46.3	29.9	23.1	42.1	29.4	10.9	8.7	24.7

NOTES: EXCLUDED FROM THESE STATISTICS ARE ALL CONDITIONS INVOLVING NEITHER RESTRICTED ACTIVITY NOR MEDICAL ATTENTION.

The appropriate relative standard errors of the estimates shown in this table are found in appendix I, figure I.

TABLE 23. NUMBER OF PERSONS INJURED PER 100 PERSONS PER QUARTER, BY SEX AND AGE: UNITED STATES, 1978

[Data are based on household interviews of the civilian noninstitutionalized population. The survey design, general qualifications, and information on the reliability of the estimates are given in appendix I. Definitions of terms are given in appendix II]

SEX AND AGE	JAN.-MAR.	APR.-JUNE	JULY-SEPT.	OCT.-DEC.
NUMBER OF PERSONS INJURED PER 100 PERSONS PER QUARTER				
BOTH SEXES, ALL AGES-----	7.8	8.0	8.5	7.4
UNDER 17 YEARS-----	8.8	9.5	10.4	8.0
17 YEARS AND OVER-----	7.4	7.4	7.7	7.1
MALE, ALL AGES-----	8.2	9.0	11.2	8.5
UNDER 17 YEARS-----	10.5	10.4	13.5	9.0
17 YEARS AND OVER-----	7.3	8.4	10.2	8.3
FEMALE, ALL AGES-----	7.3	7.0	5.9	6.3
UNDER 17 YEARS-----	7.0	8.5	7.3	6.9
17 YEARS AND OVER-----	7.4	6.5	5.4	6.1

NOTES: EXCLUDED FROM THESE STATISTICS ARE ALL CONDITIONS INVOLVING NEITHER RESTRICTED ACTIVITY NOR MEDICAL ATTENTION.

The appropriate relative standard errors of the estimates shown in this table are found in appendix I, figure I.

TABLE 24. DAYS OF DISABILITY PER PERSON PER QUARTER, BY SEX, TYPE OF DISABILITY, AND AGE: UNITED STATES, 1978

[Data are based on household interviews of the civilian noninstitutionalized population. The survey design, general qualifications, and information on the reliability of the estimates are given in appendix I. Definitions of terms are given in appendix II]

TYPE OF DISABILITY AND AGE	BOTH SEXES				MALE				FEMALE			
	JAN.- MAR.	APR.- JUNE	JULY- SEPT.	OCT.- DEC.	JAN.- MAR.	APR.- JUNE	JULY- SEPT.	OCT.- DEC.	JAN.- MAR.	APR.- JUNE	JULY- SEPT.	OCT.- DEC.
	DAYS OF DISABILITY PER PERSON PER QUARTER											
DAYS OF RESTRICTED ACTIVITY, ALL AGES----	5.4	4.3	4.3	4.8	4.8	3.7	3.6	4.1	5.9	4.9	4.9	5.4
UNDER 6 YEARS-----	4.0	2.6	2.4	3.6	4.1	2.4	2.3	3.7	3.9	2.8	2.6	3.4
6-16 YEARS-----	3.7	2.3	1.8	2.8	3.6	2.1	1.8	2.5	3.9	2.6	1.9	3.0
17-44 YEARS-----	4.2	3.2	3.6	3.7	3.5	3.0	3.0	3.2	4.8	3.5	4.2	4.2
45-64 YEARS-----	7.3	6.1	5.8	6.5	6.8	5.3	5.7	5.4	7.8	6.8	6.0	7.5
65 YEARS AND OVER-----	10.3	10.1	9.6	10.3	9.5	8.8	7.4	9.4	10.8	10.9	11.2	11.0
DAYS OF BED DISABILITY, ALL AGES-----	2.3	1.5	1.4	1.9	1.9	1.3	1.2	1.6	2.6	1.7	1.7	2.2
UNDER 6 YEARS-----	2.1	1.2	1.0	1.5	2.2	1.1	0.9	1.6	2.0	1.3	1.2	1.5
6-16 YEARS-----	2.0	1.0	0.6	1.3	1.9	0.9	0.5	1.1	2.1	1.1	0.7	1.5
17-44 YEARS-----	1.8	1.2	1.3	1.5	1.3	0.9	1.0	1.2	2.2	1.4	1.6	1.8
45-64 YEARS-----	2.7	1.8	1.8	2.4	2.1	1.5	1.6	2.1	3.2	2.1	2.1	2.7
65 YEARS AND OVER-----	3.9	3.4	3.1	4.0	3.9	3.7	2.6	4.0	3.9	3.3	3.5	4.1
DAYS LOST FROM WORK, 17 YEARS AND OVER---	1.6	1.1	1.2	1.3	1.6	1.0	1.1	1.2	1.7	1.3	1.3	1.4
17-44 YEARS-----	1.5	1.0	1.2	1.2	1.4	0.9	1.1	1.1	1.7	1.2	1.4	1.4
45-64 YEARS-----	1.9	1.4	1.3	1.4	2.1	1.3	1.3	1.5	1.7	1.6	1.1	1.4
65 YEARS AND OVER-----	1.2	*0.8	*0.8	1.3	*0.9	*0.9	*0.5	*0.6	*1.8	*0.7	*1.7	*2.2
DAYS LOST FROM SCHOOL, 6-16 YEARS-----	2.2	1.2	0.4	1.6	2.1	1.1	0.4	1.5	2.4	1.3	0.5	1.7

The appropriate relative standard errors of the estimates shown in this table are found in appendix I, figure II.

TABLE 25. POPULATION USED IN COMPUTING ANNUAL RATES SHOWN IN THIS PUBLICATION, BY SEX AND AGE: UNITED STATES, 1978

[Data are based on household interviews of the civilian noninstitutionalized population. The survey design, general qualifications, and information on the reliability of the estimates are given in appendix I. Definitions of terms are given in appendix II]

AGE	BOTH SEXES	MALE	FEMALE
	POPULATION IN THOUSANDS		
ALL AGES-----	213,828	103,174	110,655
UNDER 17 YEARS-----	59,012	30,096	28,916
UNDER 6 YEARS-----	18,411	9,446	8,965
6-16 YEARS-----	40,601	20,650	19,951
17-44 YEARS-----	88,627	42,951	45,676
17-24 YEARS-----	31,731	15,443	16,288
25-44 YEARS-----	56,895	27,507	29,388
25-34 YEARS-----	33,012	16,028	16,985
35-44 YEARS-----	23,883	11,480	12,404
45 YEARS AND OVER-----	66,190	30,127	36,063
45-64 YEARS-----	43,403	20,734	22,668
65 YEARS AND OVER-----	22,788	9,393	13,394
65-74 YEARS-----	14,596	6,342	8,254
75 YEARS AND OVER-----	8,191	3,051	5,140
	CURRENTLY EMPLOYED POPULATION		
ALL AGES-17 YEARS AND OVER-----	93,107	54,786	38,321
17-44 YEARS-----	62,577	36,189	26,389
17-24 YEARS-----	20,338	11,120	9,218
25-44 YEARS-----	42,240	25,069	17,171
45 YEARS AND OVER-----	30,530	18,597	11,932
45-64 YEARS-----	27,515	16,672	10,843
65 YEARS AND OVER-----	3,015	1,926	1,089

NOTES: FOR OFFICIAL POPULATION ESTIMATES FOR MORE GENERAL USE, SEE BUREAU OF THE CENSUS REPORTS ON THE CIVILIAN POPULATION OF THE UNITED STATES, IN CURRENT POPULATION REPORTS: SERIES P-20, P-25, AND P-60; AND BUREAU OF LABOR STATISTICS MONTHLY REPORT, EMPLOYMENT AND EARNINGS.

The appropriate relative standard errors of the currently employed estimates shown in this table are found in appendix I, figure IV. The number of persons in each age-sex category of the total population is adjusted to official Bureau of the Census figures and is not subject to sampling error.

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APPENDIX I

TECHNICAL NOTES ON METHODS

Background of This Report

This report is one of a series of statistical reports prepared by the National Center for Health Statistics (NCHS). It is based on information collected in a continuing nationwide sample of households in the Health Interview Survey (HIS).

The Health Interview Survey utilizes a questionnaire which obtains information on personal and demographic characteristics, illnesses, injuries, impairments, chronic conditions, and other health topics. As data relating to each of these various broad topics are tabulated and analyzed, separate reports are issued which cover one or more of the specific topics.

The population covered by the sample for the Health Interview Survey is the civilian, non-institutionalized population of the United States living at the time of the interview. The sample does not include members of the Armed Forces or U.S. nationals living in foreign countries. It should also be noted that the estimates shown do not represent a complete measure of any given topic during the specified calendar period since data are not collected in the interview for persons who died during the reference period. For many types of statistics collected in the survey, the reference period covers the 2 weeks prior to the interview week. For such a short period, the contribution by decedents to a total inventory of conditions or services should be very small. However, the contribution by decedents during a long reference period (e.g., 1 year) might be sizable, especially for older persons.

Statistical Design of the Health Interview Survey

General plan.—The sampling plan of the survey follows a multistage probability design which permits a continuous sampling of the civilian noninstitutionalized population of the United States. The sample is designed in such a way that the sample of households interviewed each week is representative of the target population and that weekly samples are additive over time. This feature of the design permits both continuous measurement of characteristics of samples and more detailed analysis of less common characteristics and smaller categories of health-related items. The continuous collection has administrative and operational advantages as well as technical assets since it permits fieldwork to be handled with an experienced, stable staff.

The overall sample was designed so that tabulations can be provided for each of the four major geographic regions and for selected places of residence in the United States.

The first stage of the sample design consists of drawing a sample of 376 primary sampling units (PSU's) from approximately 1,900 geographically defined PSU's. A PSU consists of a county, a small group of contiguous counties, or a standard metropolitan statistical area. The PSU's collectively cover the 50 States and the District of Columbia.

With no loss in general understanding, the remaining stages can be combined and treated in this discussion as an ultimate stage. Within PSU's, then, ultimate stage units called segments are defined in such a manner that each segment

contains an expected six households. Three general types of segments are used.

Area segments which are defined geographically.

List segments, using 1970 census registers as the frame.

Permit segments, using updated lists of building permits issued in sample PSU's since 1970.

Census address listings were used for all areas of the country where addresses were well defined and could be used to locate housing units. In general the list frame included the larger urban areas of the United States from which about two-thirds of the HIS sample was selected.

The usual HIS sample consists of approximately 12,000 segments containing about 50,000 assigned households, of which 9,000 were vacant, demolished, or occupied by persons not in the scope of the survey. The 41,000 eligible occupied households yield a probability sample of about 120,000 persons.

Descriptive material on data collection, field procedures, and questionnaire development in the HIS has been published^{3,4} as well as a detailed description of the sample design⁵ and a report on the estimation procedure and the method used to calculate sampling errors of estimates derived from the survey.⁶

³National Center for Health Statistics: Health survey procedure: concepts, questionnaire development, and definitions in the Health Interview Survey. *Vital and Health Statistics*. PHS Pub. No. 1000-Series 1-No. 2. Public Health Service. Washington. U.S. Government Printing Office, May 1964.

⁴National Center for Health Statistics: Health Interview Survey Procedure, 1957-1974. *Vital and Health Statistics*. Series 1-No. 11. DHEW Pub. No. (HRA) 75-1311. Health Resources Administration. Washington. U.S. Government Office, April 1975.

⁵U.S. National Health Survey: The statistical design of the health household interview survey. *Health Statistics*. PHS Pub. No. 584-A2. Public Health Service. Washington, D.C., July 1958.

⁶National Center for Health Statistics: Estimation and sampling variance in the Health Interview Survey. *Vital and Health Statistics*. PHS Pub. No. 1000-Series 2-No. 38. Public Health Service. Washington. U.S. Government Printing Office, June 1970.

Collection of data.—Field operations for the survey are performed by the U.S. Bureau of the Census under specifications established by the National Center for Health Statistics. In accordance with these specifications the Bureau of the Census participates in survey planning, selects the sample, and conducts the field interviewing as an agent of NCHS. The data are coded, edited, and tabulated by NCHS.

Estimating procedures.—Since the design of the HIS is a complex multistage probability sample, it is necessary to use complex procedures in the derivation of estimates. Four basic operations are involved.

1. *Inflation by the reciprocal of the probability of selection.*—The probability of selection is the product of the probabilities of selection from each step of selection in the design (PSU, segment, and household).
2. *Nonresponse adjustment.*—The estimates are inflated by a multiplication factor which has as its numerator the number of sample households in a given segment and as its denominator the number of households interviewed in that segment.
3. *First-stage ratio adjustment.*—Sampling theory indicates that the use of auxiliary information which is highly correlated with the variables being estimated improves the reliability of the estimates. To reduce the variability between PSU's within a region, the estimates are ratio adjusted to the 1970 populations within 12 color-residence classes.
4. *Poststratification by age-sex-color.*—The estimates are ratio adjusted within each of 60 age-sex-color cells to an independent estimate of the population of each cell for the survey period. These independent estimates are prepared by the Bureau of the Census. Both the first-stage and poststratified ratio adjustments take the form of multiplication factors applied to the weight of each elementary unit (person, household, condition, and hospitalization).

The effect of the ratio-estimating process is to make the sample more closely representative

of the civilian noninstitutionalized population by age, sex, color, and residence, which thereby reduces sampling variance.

As noted, each week's sample represents the population living during that week and characteristics of the population. Consolidation of samples over a time period, e.g., a calendar quarter, produces estimates of average characteristics of the U.S. population for the calendar quarter. Similarly, population data for a year are averages of the four quarterly figures.

For prevalence statistics, such as number of persons with speech impairments or number of persons classified by time interval since last physician visit, figures are first calculated for each calendar quarter by averaging estimates for all weeks of interviewing in the quarter. Prevalence data for a year are then obtained by averaging the four quarterly figures.

For other types of statistics—namely those measuring the number of occurrences during a specified time period—such as incidence of acute conditions, number of disability days, or number of visits to a doctor or dentist, a similar computational procedure is used, but the statistics are interpreted differently. For these items, the questionnaire asks for the respondent's experience over the 2 calendar weeks prior to the week of interview. In such instances the estimated quarterly total for the statistic is 6.5 times the average 2-week estimate produced by the 13 successive samples taken during the period. The annual total is the sum of the four quarters. Thus the experience of persons *interviewed during a year*—experience which actually occurred for each person in a 2-calendar-week interval prior to week of interview—is treated as though it measured the total of such experience *during the year*. Such interpretation leads to no significant bias.

Explanation of hospital recall.—The survey questionnaire uses a 12-month-recall period for hospitalizations. That is, the respondent is asked to report hospitalizations which occurred during the 12 months prior to the week of interview. Information is also obtained as to the date of entry into the hospital and duration of stay. Analysis of this information, and also the results of special studies, has shown that there is an increase in underreporting of hospitalizations

with increase in time interval between the discharge and the interview. Exclusive of the hospital experience of decedents, the net underreporting with a 12-month recall is in the neighborhood of 10 percent, but underreporting of discharges within 6 months of the week of interview is estimated to be less than 5 percent. For this reason hospital discharge data in this report are based on hospital discharges reported to have occurred within 6 months of the week of interview. Since the interviews were evenly distributed according to weekly probability samples throughout any interviewing year, no seasonal bias was introduced by doubling the 6-month-recall data to produce an annual estimate for that year of interviewing. Doubling the 6-month data in effect imputes to the entire year preceding the interview the rate of hospital discharges actually observed during the 6 months prior to interview. However, estimates of the number of persons with hospital episodes (as opposed to estimates of the number of hospital discharges) are based on 12-month recall data since a person's 12-month experiences cannot be obtained by doubling his most recent 6-month experience.

General Qualifications

Nonresponse.—Data were adjusted for nonresponse by a procedure which imputes to persons in a household who were not interviewed the characteristics of persons in households in the same segment who were interviewed.

The interview process.—The statistics presented in this report are based on replies obtained in interviews with persons in the sample households. Each person 19 years of age and over present at the time of interview was interviewed individually. For children and for adults not present in the home at the time of the interview, the information was obtained from a related household member such as a spouse or the mother of a child.

There are limitations to the accuracy of diagnostic and other information collected in household interviews. For diagnostic information, the household respondent can usually pass on to the interviewer only the information the physician has given to the family. For condi-

tions not medically attended, diagnostic information is often no more than a description of symptoms. However, other facts, such as the number of disability days caused by the condition, can be obtained more accurately from household members than from any other source since only the persons concerned are in a position to report this information.

Rounding of numbers.—The original tabulations on which the data in this report are based show all estimates to the nearest whole unit. All consolidations were made from the original tabulations using the estimates to the nearest unit. In the final published tables, the figures are rounded to the nearest thousand, although these are not necessarily accurate to that detail. Devise statistics such as rates and percent distributions are computed after the estimates on which these are based have been rounded to the nearest thousand.

Population figures.—Some of the published tables include population figures for specified categories. Except for certain overall totals by age, sex, and color, which are adjusted to independent estimates, these figures are based on the sample of households in the HIS. These are given primarily to provide denominators for rate computation, and for this purpose are more appropriate for use with the accompanying measures of health characteristics than other population data that may be available. With the exception of the overall totals by age, sex, and color mentioned above, the population figures differ from figures (which are derived from different sources) published in reports of the Bureau of the Census. Official population estimates are presented in Bureau of the Census reports in Series P-20, P-25, and P-60.

Reliability of Estimates

Since the statistics presented in this report are based on a sample, they will differ somewhat from the figures that would have been obtained if a complete census had been taken using the same schedules, instructions, and interviewing personnel and procedures.

As in any survey, the results are also subject to reporting and processing errors and errors due to nonresponse. To the extent possible, these types of errors were kept to a minimum by

methods built into survey procedures.⁷ Although it is very difficult to measure the extent of bias in the Health Interview Survey, a number of studies have been conducted to study this problem. The results have been published in several reports.⁸⁻¹¹

The standard error is primarily a measure of sampling variability, that is, the variations that might occur by chance because only a sample of the population is surveyed. As calculated for this report, the standard error also reflects part of the variation which arises in the measurement process. It does not include estimates of any biases which might be in the data. The chances are about 68 out of 100 that an estimate from the sample would differ from a complete census by less than the standard error. The chances are about 95 out of 100 that the difference would be less than twice the standard error and about 99 out of 100 that it would be less than 2½ times as large.

Standard error charts.—The relative standard error of an estimate is obtained by dividing the standard error of the estimate by the estimate itself and is expressed as a percentage of the esti-

⁷National Center for Health Statistics: Quality control and measurement of nonsampling error in the Health Interview Survey. *Vital and Health Statistics*. Series 2-No. 54. DHEW Pub. No. (HSM) 73-1328. Health Services and Mental Health Administration. Washington. U.S. Government Printing Office, Mar. 1973

⁸National Center for Health Statistics: Health interview responses compared with medical records. *Vital and Health Statistics*. PHS Pub. No. 1000-Series 2-No. 7. Public Health Service. Washington. U.S. Government Printing Office, July 1965.

⁹National Center for Health Statistics: Comparison of hospitalization reporting in three survey procedures. *Vital and Health Statistics*. PHS Pub. No. 1000-Series 2-No. 8. Public Health Service. Washington. U.S. Government Printing Office, July 1965.

¹⁰National Center for Health Statistics: Interview data on chronic conditions compared with information derived from medical records. *Vital and Health Statistics*. PHS Pub. No. 1000-Series 2-No. 23. Public Health Service. Washington. U.S. Government Printing Office, May 1967.

¹¹National Center for Health Statistics: The influence of interviewer and respondent psychological and behavioral variables on the reporting in household interviews. *Vital and Health Statistics*. PHS Pub. No. 1000-Series 2-No. 26. Public Health Service. Washington. U.S. Government Printing Office, Mar. 1968.

mate. For this report, asterisks are shown for any cell with more than a 30-percent relative standard error. Included in this appendix are charts from which the relative standard errors can be determined for estimates shown in the report. In order to derive relative errors which would be applicable to a wide variety of health statistics and which could be prepared at a moderate cost, a number of approximations were required. As a result, the charts provide an estimate of the approximate relative standard error rather than the precise error for any specific aggregate or percentage.

Three classes of statistics for the health survey are identified for purposes of estimating variances.

1. *Narrow range.*—This class consists of (1) statistics which estimate a population attribute, e.g., the number of persons in a particular income group, and (2) statistics for which the measure for a single individual during the reference period used in data collection is usually either 0 to 1 on occasion may take on the value 2 or very rarely 3.
2. *Medium range.*—This class consists of other statistics for which the measure for a single individual during the reference period used in data collection will rarely lie outside the range 0 to 5.
3. *Wide range.*—This class consists of statistics for which the measure for a single individual during the reference period used in data collection can range from 0 to a number in excess of 5, e.g., the number of days of bed disability.

In addition to classifying variables according to whether they are narrow-, medium-, or wide-range, statistics in the survey are further classified as to whether they are based on a reference period of 2 weeks, 6 months, or 12 months.

General rules for determining relative standard errors.—The following rules will enable the reader to determine approximate relative standard errors from the charts for estimates presented in this report. These charts represent

standard errors of HIS data. They should be used in preference to the charts which have appeared in all previous Series 10 publications.

- Rule 1. *Estimates of aggregates:* Approximate relative standard errors for estimates of aggregates such as the number of persons with a given characteristic are obtained from appropriate curves, figures I-V. The number of persons in the total U.S. population or in an age-sex-color class of the total population is adjusted to official Bureau of the Census figures and is not subject to sampling error.
- Rule 2. *Estimates of percentages in a percent distribution:* Relative standard errors for percentages in a percent distribution of a total are obtained from appropriate curves, figures VI and VII. For values which do not fall on one of the curves presented in the chart, visual interpolation will provide a satisfactory approximation.
- Rule 3. *Estimates of rates where the numerator is a subclass of the denominator:* This rule applies for prevalence rates or where a unit of the numerator occurs, with few exceptions, only once in the year for any one unit in the denominator. For example, in computing the rate of visual impairments per 1,000 population, the numerator consisting of persons with the impairment is a subclass of the denominator, which includes all persons in the population. Such rates if converted to rates per 100 may be treated as though they were percentages and the relative standard errors obtained from the percentage charts for population estimates. Rates per 1,000, or on any other base, must first be converted to rates per 100; then the percentage chart will provide the relative standard error per 100.
- Rule 4. *Estimates of rates where the numerator is not a subclass of the denominator:* This rule applies where a unit of the numerator often occurs more than once

for any one unit in the denominator. For example, in the computation of the number of persons injured per 100 currently employed persons per year, it is possible that a person in the denominator could have sustained more than one of the injuries included in the numerator. Approximate relative standard errors for rates of this kind may be computed as follows:

- (a) Where the denominator is the total U.S. population or includes all persons in one or more of the age-sex-color groups of the total population, the relative error of the rate is equivalent to the relative error of the numerator, which can be obtained directly from the appropriate chart.
- (b) In other cases the relative standard error of the numerator and of the denominator can be obtained from the appropriate curve. Square each of these relative errors, add the resulting values, and extract the square root of the sum. This procedure will result in an upper bound on the standard error and often will overstate the error.

Rule 5. *Estimates of difference between two statistics (mean, rate, total, etc.):* The standard error of a difference is approximately the square root of the sum of the squares of each standard error considered separately. A formula for the standard error of a difference,

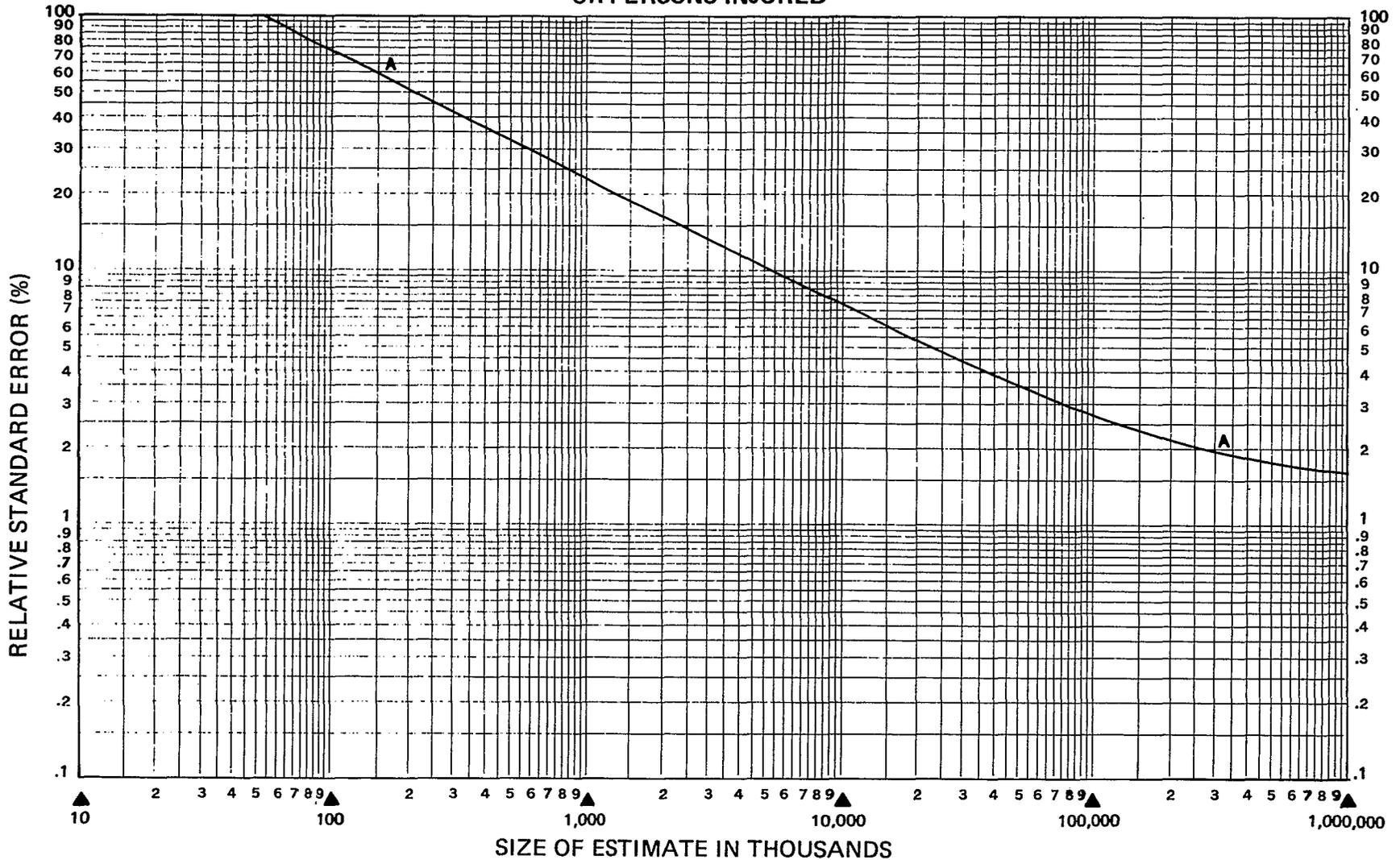
$$d = X_1 - X_2$$

is

$$\sigma_d = \sqrt{(X_1 V_{x1})^2 + (X_2 V_{x2})^2}$$

where X_1 is the estimate for class 1, X_2 is the estimate for class 2, and V_{x1} and V_{x2} are the relative errors of X_1 and X_2 respectively. This formula will represent the actual standard error quite accurately for the difference between separate and uncorrelated characteristics although it is only a rough approximation in most other cases. The relative standard error of each estimate involved in such a difference can be determined by one of the four rules above, whichever is appropriate.

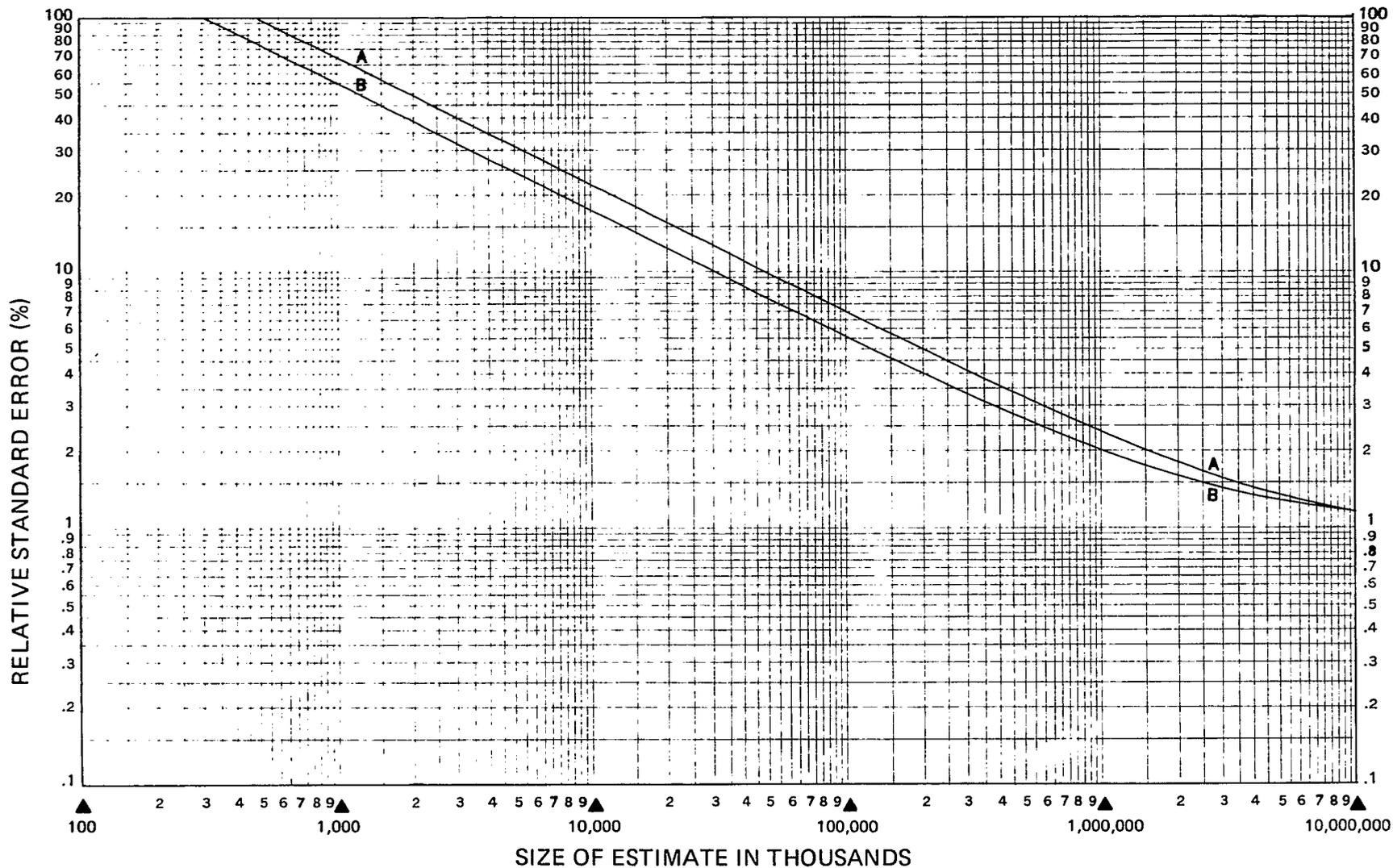
Figure I. RELATIVE STANDARD ERRORS FOR NUMBER OF ACUTE CONDITIONS OR PERSONS INJURED¹



¹This curve represents estimates of relative standard errors based on 1 to 4 quarters of data collection for narrow range estimates of aggregates using a 2-week reference period.

Example of use of chart: An estimate of 1,000,000 acute respiratory conditions (on scale at bottom of chart) has a relative standard error of 23 percent (read from scale at left side of chart), or a standard error of 230,000 (23 percent of 1,000,000).

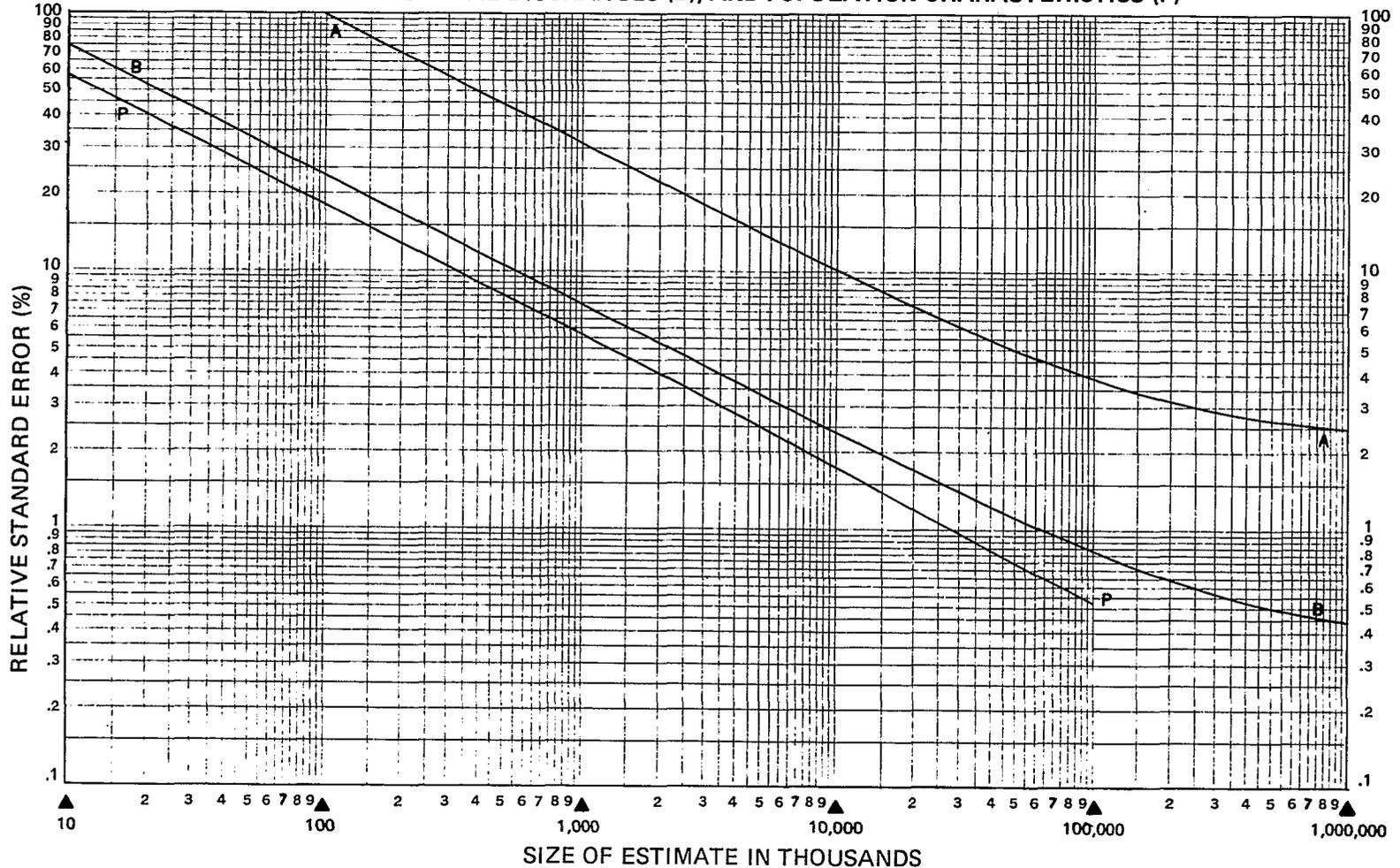
Figure II. RELATIVE STANDARD ERRORS FOR DAYS OF RESTRICTED ACTIVITY OR BED DISABILITY (A) AND FOR DAYS LOST FROM WORK OR SCHOOL (B)¹



¹ These curves represent estimates of relative standard errors based on 1 to 4 quarters of data collection for wide range estimates of aggregates using a 2-week reference period.

Example of use of chart: An estimate of 10,000,000 days of restricted activity (on scale at bottom of chart) has a relative standard error of 22 percent (read from curve A on scale at left side of chart), or a standard error of 2,200,000 (22 percent of 10,000,000).

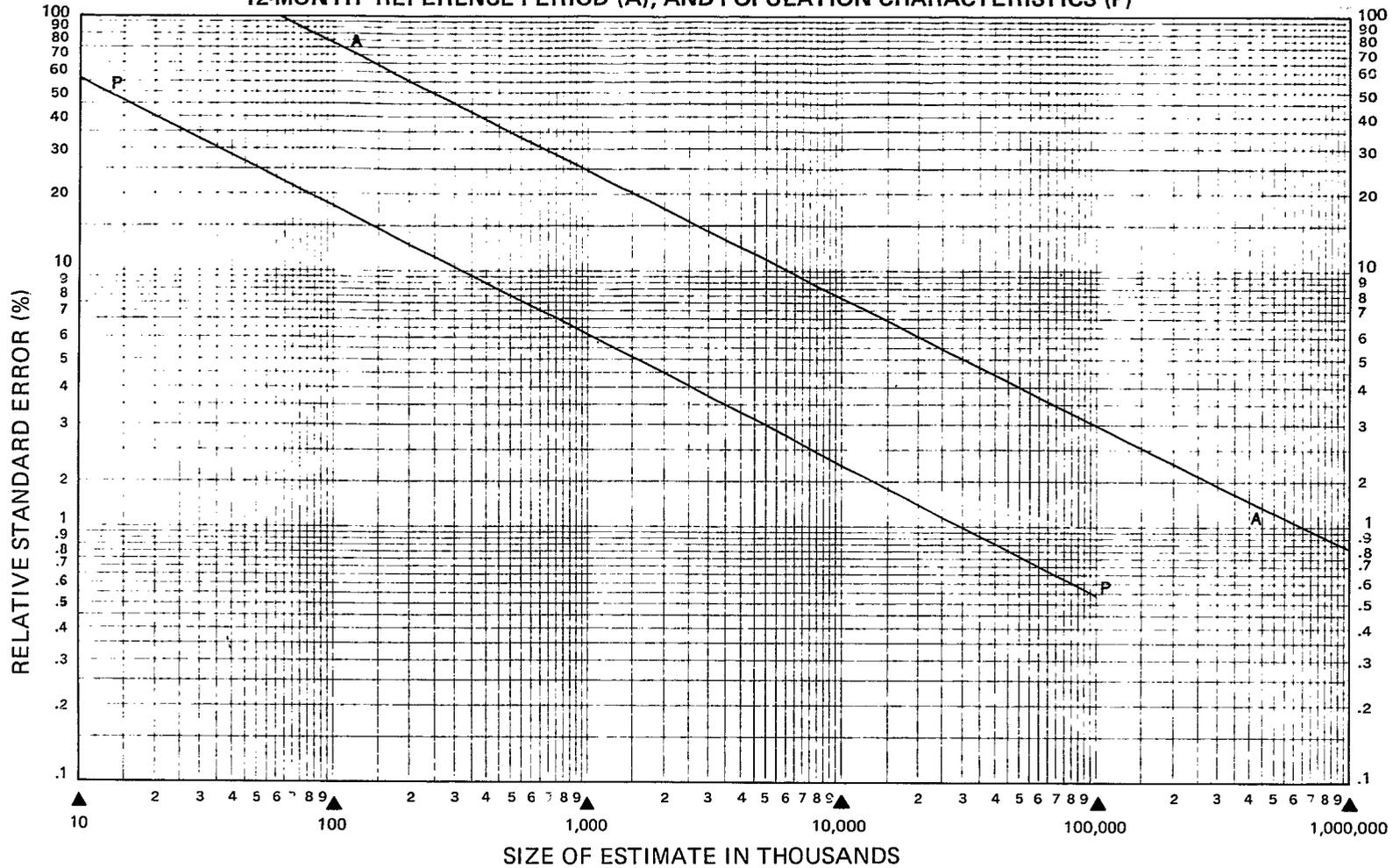
Figure III. RELATIVE STANDARD ERRORS FOR NUMBER OF SHORT-STAY HOSPITAL DAYS (A); SHORT-STAY HOSPITAL DISCHARGES (B), AND POPULATION CHARACTERISTICS (P)¹



¹The curves related to short-stay hospital days and discharges are based on 4 quarters of data collection for wide and narrow range estimates of aggregates using a 6-month reference period; the curve for population characteristics is based on 4 quarters of data collection for narrow range estimates of aggregates.

Example of use of chart: An estimate of 10,000,000 hospital days (on scale at bottom of chart) has a relative standard error of 10.2 percent (read from curve A on scale at left side of chart), or a standard error of 1,020,000 (10.2 percent of 10,000,000). An estimate of 1,000,000 discharges from short-stay hospitals (curve B) has a relative standard error of 7.4 percent. An estimate of 1,000,000 persons in the Northeast Region (curve P) has a relative standard error of 5.7 percent.

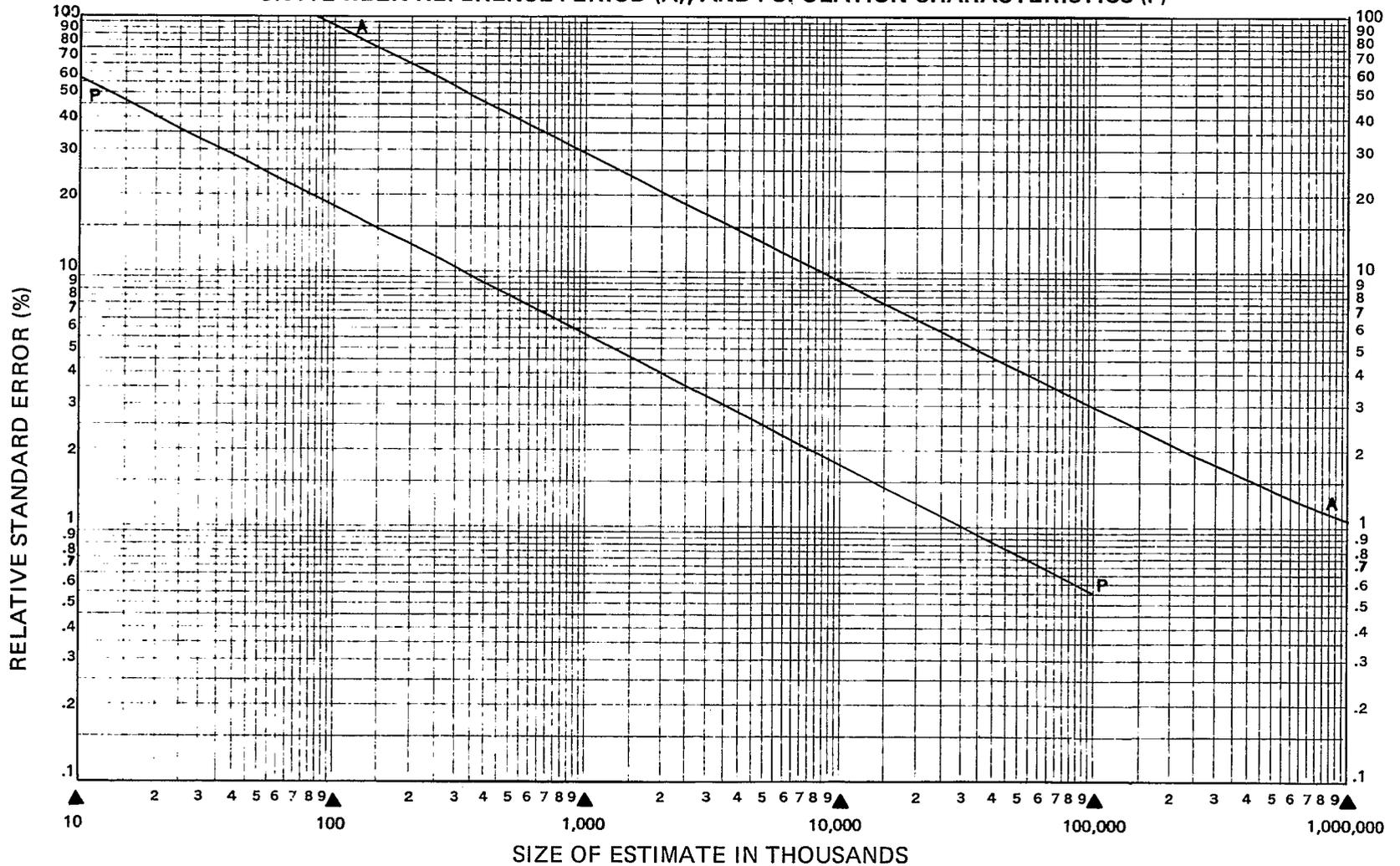
Figure IV. RELATIVE STANDARD ERRORS FOR SHORT-STAY HOSPITAL DAYS BASED ON A 12-MONTH REFERENCE PERIOD (A), AND POPULATION CHARACTERISTICS (P)¹



¹The curve related to hospital days is based on 4 quarters of data collection for wide range estimates of aggregates using a 12-month reference period; the curve for population characteristics is based on 4 quarters of data collection for narrow range estimates of aggregates.

Example of use of chart: An estimate of 10,000,000 days of hospitalization in the past year (on scale at bottom of chart) has a relative standard error of 7.8 percent (read from curve A on scale at left side of chart), or a standard error of 780,000 (7.8 percent of 10,000,000). An estimate of 1,000,000 persons with 1 hospital episode or more (curve P) has a relative standard error of 5.7 percent.

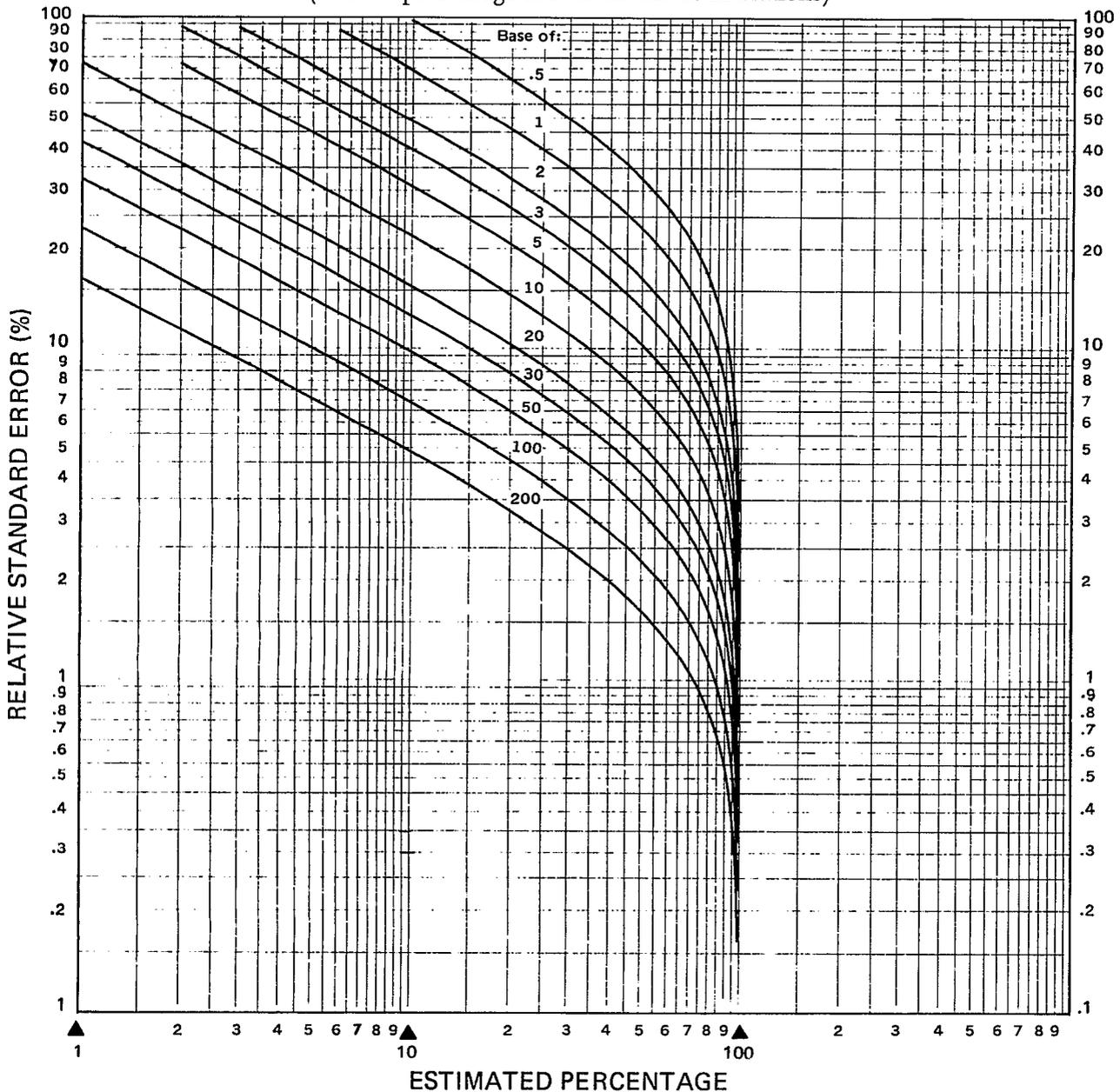
Figure V. RELATIVE STANDARD ERRORS FOR NUMBER OF PHYSICIAN OR DENTAL VISITS BASED ON A 2-WEEK REFERENCE PERIOD (A), AND POPULATION CHARACTERISTICS (P)¹



¹The curve related to physician or dental visits is based on 1 to 4 quarters of data collection for medium range estimates of aggregates using a 2-week reference period; the curve for population characteristics is based on 4 quarters of data collection for narrow range estimate of aggregates.

Example of use of chart: An estimate of 10,000,000 dental visits (on scale at bottom of chart) has a relative standard error of 9.2 percent (read from curve A on scale at left side of chart), or a standard error of 920,000 (9.2 percent of 10,000,000). An estimate of 1,000,000 persons in the Northeast Region (curve P) has a relative standard error of 5.7 percent.

Figure VI. RELATIVE STANDARD ERRORS OF PERCENTAGES OF ACUTE CONDITIONS OR PERSONS INJURED¹
 (Base of percentage shown on curves in millions)

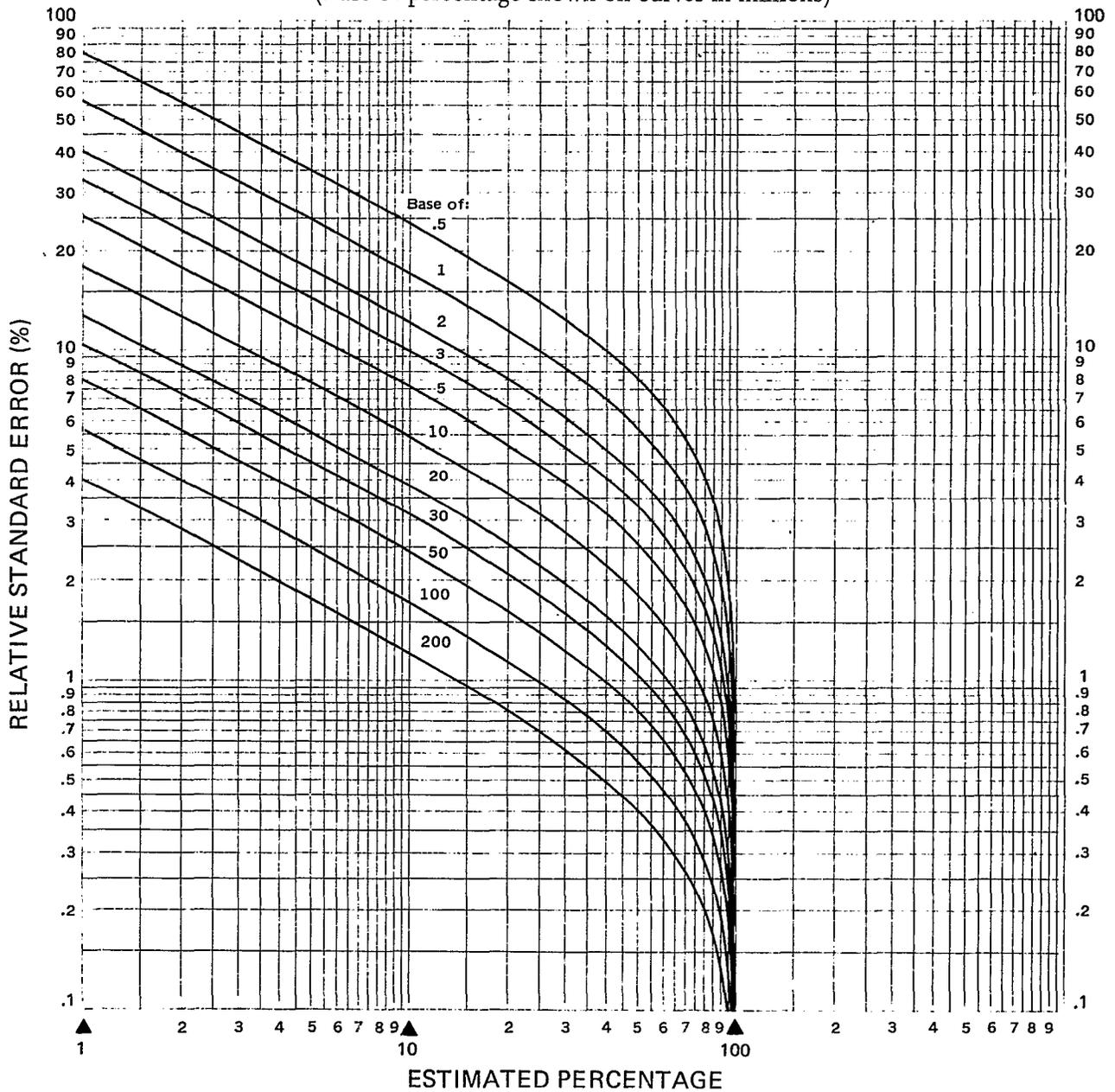


¹These curves represent estimates of relative standard errors of percentages of acute conditions or persons injured based on 1 to 4 quarters of data collection for narrow range data using a 2-week reference period.

Example of use of chart: An estimate of 20 percent (on scale at bottom of chart) based on an estimate of 10,000,000 has a relative standard error of 14.5 percent (read from the scale at the left side of chart), the point at which the curve for a base of 10,000,000 intersects the vertical line for 20 percent. The standard error in percentage points is equal to 20 percent \times 14.5 percent, or 2.9 percentage points.

Figure VII. RELATIVE STANDARD ERRORS OF PERCENTAGES OF POPULATION CHARACTERISTICS¹

(Base of percentage shown on curves in millions)



¹These curves represent estimates of relative standard errors of percentages of population characteristics based on 4 quarters of data collection for narrow range estimates.

Example of use of chart: An estimate of 20 percent (on scale at bottom of chart) based on an estimate of 10,000,000 has a relative standard error of 3.6 percent (read from the scale at the left side of chart), the point at which the curve for a base of 10,000,000 intersects the vertical line for 20 percent. The standard error in percentage points is equal to 20 percent X 3.6 percent, or 0.72 percentage points.

APPENDIX II

DEFINITIONS OF CERTAIN TERMS USED IN THIS REPORT

Terms Relating to Conditions

Condition.—A morbidity condition, or simply a condition, is any entry on the questionnaire which describes a departure from a state of physical or mental well-being. It results from a positive response to one of a series of “medical-disability impact” or “illness-recall” questions. In the coding and tabulating process conditions are selected or classified according to a number of different criteria such as whether they were medically attended, whether they resulted in disability, or whether they were acute or chronic, or according to the type of disease, injury, impairment, or symptom reported. For the purposes of each published report or set of tables, only those conditions recorded on the questionnaire which satisfy certain stated criteria are included.

Conditions except impairments are classified by type according to the *Eighth Revision International Classification of Diseases, Adapted for Use in the United States*,¹² with certain modifications adopted to make the code more suitable for a household interview survey.

Acute condition.—An acute condition is defined as a condition which has lasted less than 3 months and which has involved either medical attention or restricted activity. Because of the procedures used to estimate incidence, the acute conditions included in this report are the conditions which had their onset during the 2 weeks prior to the interview week and which involved

either medical attention or restricted activity during the 2-week period. However, excluded are some conditions which are always classified as chronic even though the onset occurred within 3 months prior to week of interview. These are listed below. The codes refer to the eighth revision of the *ICDA*, as modified by the *HIS Medical Coding Manual*.

- All X-codes (special HIS impairment codes)
- 010-018—Tuberculosis
 - 140-239—Neoplasms (benign and malignant)
 - 240-246—Diseases of the thyroid gland
 - 250—Diabetes
 - 274—Gout
 - 290-304, 305.0, 305.3, 305.5, 305.6, 308 and 309—Psychosis and certain other mental disturbances
 - 340, 342, 345, and 346—Multiple sclerosis and certain other diseases of the central nervous system
 - 360, 362, 370, 374-376, and 377.3—Certain diseases and conditions of the eye
 - 390-409, 412-435, 438, 440, and 454-456—Certain diseases of the circulatory system (includes rheumatic fever, hypertension, stroke, and all heart conditions)
 - 492, 493, 507, and 518—Emphysema, asthma, hay fever, and bronchiectasis
 - 530-535—Ulcers and certain other diseases of the esophagus, stomach, and duodenum
 - 550-553—Hernia of abdominal cavity (includes rupture)
 - 561—Gastroenteritis and colitis (with exceptions)
 - 592 and 594—Calculus of kidney, uterine, and other parts of the urinary system
 - 600-602—Diseases of the prostate
 - 610—Chronic cystic diseases of the breast

¹²National Center for Health Statistics: *Eighth Revision International Classification of Diseases, Adapted for Use in the United States*. PHS Pub. No. 1693. Public Health Service. Washington. U.S. Government Printing Office, 1967.

685, 691, 692, and 706.2—Eczema and certain other dermatitis

710-718 (excludes 717.2)—Arthritis and rheumatism

723.3—Cyst of bone (except jaw)

740-759—All congenital anomalies

(NOTE: Certain codes in this range are not used by the HIS, however conditions classified as congenital anomalies will always

be considered chronic and are coded to the HIS X-codes.)

Acute condition groups.—In this report all tables which have data classified by type of condition employ a 5-category regrouping plus several selected subgroups. The condition groups and the International Classification code num-

<i>Condition Group</i>	<i>International Classification Code Number</i>
Infective and parasitic diseases	000-136
Common childhood diseases	033, 052, 055, 056, 072
Virus not otherwise specified	079.9
Other infective and parasitic diseases	000-032, 034-051, 053, 054, 057-071, 073-136
Respiratory conditions	460-486, 501, 508-516, 519, 783
Upper respiratory conditions	460-465, 501, 508
Common cold	460
Other upper respiratory conditions	461-465, 501, 508
Influenza	470-474
Influenza with digestive manifestations	473
Other influenza	470-472, 474
Other respiratory conditions	466, 480-486, 510-516, 519, 783
Pneumonia	480-486
Bronchitis	466
Other respiratory conditions	510-516, 519, 783
Digestive system conditions	520.6-521.5, 521.7-523.9, 525-530, 535-543, 560, 561, 564-577, 784, 785
Dental conditions	520.6-521.5, 521.7-523.9, 525
Functional and symptomatic upper gastrointestinal disorders not elsewhere classifiable	536, 784.0, 784.1, 784.3, 784.7, 785.4 pt.
Other digestive system conditions	526-530, 535, 537, 540-543, 560, 561, 564-577, 784.2, 784.4-784.6, 785 pt.
Injuries	800-870, 872-884, 890-894, 900-994, 996-999
Fractures, dislocations, sprains, and strains	800-848
Fractures and dislocations	800-839
Sprains and strains	840-848
Open wounds and lacerations	870, 872-884, 890-894, 900-907
Contusions and superficial injuries	910-929
Other current injuries	850-869, 930-994, 996-999
All other acute conditions	All other acute code numbers
Diseases of the ear	380-387, 745.0-745.3, 781.3
Headaches	791
Genitourinary disorders	580-629, 786, 789
Deliveries and disorders of pregnancy and the puerperium	630-678
Diseases of the skin	680-709
Diseases of the musculoskeletal system	717-733, 787
All other acute conditions	Other acute code numbers

Figure VIII. Acute condition groups with subgroups and ICDA codes

bers included in each category are shown in figure VIII.

Chronic condition.—A condition is considered chronic if (1) the condition is described by the respondent as having been first noticed more than 3 months before the week of the interview or (2) it is one of the conditions always classified as chronic regardless of the onset (see list under the definition of acute condition).

Impairment.—Impairments are chronic or permanent defects, usually static in nature, resulting from disease, injury, or congenital malformation. They represent decrease or loss of ability to perform various functions, particularly those of the musculoskeletal system and the sense organs. All impairments are classified by means of a special supplementary code for impairments. Hence code numbers for impairments in the International Classification of Diseases are not used. In the Supplementary Code, impairments are grouped according to type of functional impairment and etiology. The impairment classification is shown in *Vital and Health Statistics*, Series 10, No. 48.

Incidence of conditions.—The incidence of conditions is the estimated number of conditions having their onset in a specified time period. As previously mentioned, minor acute conditions involving neither restricted activity nor medical attention are excluded from the statistics. The incidence data shown in some reports are further limited to various subclasses of conditions, such as “incidence of conditions involving bed disability.”

Onset of condition.—A condition is considered to have had its onset when it was first noticed. This could be the time the person first felt sick or became injured, or it could be the time when the person or his family was first told by a physician that he had a condition of which he was previously unaware.

Activity-restricting condition.—An activity-restricting condition is one which had its onset in the past 2 weeks and which caused at least 1 day of restricted activity during the 2 calendar weeks before the interview week. (See “Restricted-activity day” under “Terms Relating to Disability.”)

Bed-disabling condition.—A condition with onset in the past 2 weeks involving at least 1 day of bed disability is called a bed-disabling condi-

tion. (See “Bed-disability day” under “Terms Relating to Disability.”)

Medically attended condition.—A condition with onset in the past 2 weeks is considered medically attended if a physician has been consulted about it either at its onset or at any time thereafter. However, when the first medical attention for a condition does not occur until after the end of the 2-week period, the case is treated as though there was no medical attention. Medical attention includes consultation either in person or by telephone for treatment or advice. Advice from the physician transmitted to the patient through the nurse is counted as well as visits to physicians in clinics or hospitals. If during the course of a single visit the physician is consulted about more than one condition for each of several patients, each condition of each patient is counted as medically attended.

Discussions of a child’s condition by the physician and a responsible member of the household are considered as medical attention even if the child was not seen at that time.

For the purpose of this definition the term “physician” includes doctors of medicine and osteopathic physicians.

Terms Relating to Disability

Disability.—Disability is the general term used to describe any temporary or long-term reduction of a person’s activity as a result of an acute or chronic condition.

Disability day.—Short-term disability days are classified according to whether they are days of restricted activity, bed days, hospital days, work-loss days, or school-loss days. All hospital days are, by definition, days of bed disability; all days of bed disability are, by definition, days of restricted activity. The converse form of these statements is, of course, not true. Days lost from work and days lost from school are special terms which apply to the working and school-age populations only, but these too are days of restricted activity. Hence “days of restricted activity” is the most inclusive term used to describe disability days.

Restricted-activity day.—A day of restricted activity is one on which a person cuts down on his usual activities for the whole of that day because of an illness or an injury. The term “usual activities” for any day means the

things that the person would ordinarily do on that day. For children under school age, usual activities depend on whatever the usual pattern is for the child's day, which will in turn be affected by the age of the child, weather conditions, and so forth. For retired or elderly persons, usual activities might consist of almost no activity, but cutting down on even a small amount for as much as a day would constitute restricted activity. On Sundays or holidays, usual activities are the things the person usually does on such days—going to church, playing golf, visiting friends or relatives, or staying at home and listening to the radio, reading, looking at television, and so forth. Persons who have permanently reduced their usual activities because of a chronic condition might not report any restricted-activity days during a 2-week period. Therefore absence of restricted-activity days does *not* imply normal health.

Restricted activity does not imply complete inactivity, but it does imply only the minimum of usual activities. A special nap for an hour after lunch does not constitute cutting down on usual activities, nor does the elimination of a heavy chore such as cleaning ashes out of the furnace or hanging out the wash. If a farmer or housewife carries on only the minimum of the day's chores, however, this is a day of restricted activity.

A day spent in bed or a day home from work or school because of illness or injury is, of course, a restricted-activity day.

Bed-disability day.—A day of bed disability is one on which a person stays in bed for all or most of the day because of a specific illness or injury. All or most of the day is defined as more than half of the daylight hours. All hospital days for inpatients are considered to be days of bed disability even if the patient was not actually in bed at the hospital.

Work-loss day.—A day lost from work is a day on which a person did not work at his job or business for at least half of his normal workday because of a specific illness or injury. The number of days lost from work is determined only for persons 17 years of age and over who reported that at any time during the 2-week period covered by the interview they either worked at or had a job or business. (See "Cur-

rently employed" persons under "Demographic Terms.")

School-loss day.—A day lost from school is a normal school day on which a child did not attend school because of a specific illness or injury. The number of days lost from school is determined only for children 6-16 years of age.

Person-day.—Person-days of restricted activity, bed disability, and so forth are days of the various forms of disability experienced by any one person. The sum of days for all persons in a group represents an unduplicated count of all days of disability for the group.

Condition-day.—Condition-days of restricted activity, bed disability, and so forth are days of the various forms of disability associated with any one condition. Since any particular day of disability may be associated with more than one condition, the sum of days for conditions may add to more than the total number of person-days.

Chronic activity limitation.—Persons are classified into four categories according to the extent to which their activities are limited at present as a result of chronic conditions. Since the usual activities of preschool children, school-age children, housewives, and workers and other persons differ, a different set of criteria is used for each group. There is a general similarity between them, however, as will be seen in the following descriptions of the four categories:

1. *Persons unable to carry on major activity for their group* (major activity refers to ability to work, keep house, or engage in school or preschool activities)

Preschool children:

Inability to take part in ordinary play with other children.

School-age children:

Inability to go to school.

Housewives:

Inability to do any housework.

Workers and all other persons:

Inability to work at a job or business.

2. *Persons limited in amount or kind of major activity performed* (major activity refers to

ability to work, keep house, or engage in school or preschool activities)

Preschool children:

Limited in amount or kind of play with other children, e.g., need special rest periods, cannot play strenuous games, or cannot play for long periods at a time.

School-age children:

Limited to certain types of schools or in school attendance, e.g., need special schools or special teaching or cannot go to school full time or for long periods at a time.

Housewives:

Limited in amount or kind of housework, e.g., cannot lift children, wash or iron, or do housework for long periods at a time.

Workers and all other persons:

Limited in amount or kind of work, e.g., need special working aids or special rest periods at work, cannot work full time or for long periods at a time, or cannot do strenuous work.

3. *Persons not limited in major activity but otherwise limited* (major activity refers to ability to work, keep house, or engage in school or preschool activities)

Preschool children:

Not classified in this category.

School-age children:

Not limited in going to school but limited in participation in athletics or other extracurricular activities.

Housewives:

Not limited in housework but limited in other activities such as church, clubs, hobbies, civic projects, or shopping.

Workers and all other persons:

Not limited in regular work activities but limited in other activities such as church, clubs, hobbies, civic projects, sports, or games.

4. *Persons not limited in activities* (includes persons whose activities are not limited in any of the ways described above)

Chronic mobility limitation.—Persons are classified into five categories according to the extent to which their mobility is limited at present as a result of chronic conditions. The categories are as follows:

Stays in bed.—Must stay in bed all or most of the time.

Stays in the house.—Must stay in the house, but not in bed, all or most of the time.

Needs help getting around.—Able to go outside but needs the help of another person or of a special aid such as a cane or wheelchair in getting around.

Has trouble getting around freely.—Does not need the help of another person or a special aid but has trouble in getting around freely.

Is not limited in mobility.—Not limited in any of the ways described above.

Terms Relating to Persons Injured

Injury condition.—An injury condition, or simply an injury, is a condition of the type that is classified according to the nature of injury code numbers (N800-N999) in the International Classification of Diseases. In addition to fractures, lacerations, contusions, burns, and so forth, which are commonly thought of as injuries, this group of codes includes effects of exposure, such as sunburn; adverse reactions to immunization and other medical procedures; and poisonings. Unless otherwise specified, the term injury is used to cover all of these.

Since a person may sustain more than one injury in a single accident, e.g., a broken leg and laceration of the scalp, the number of injury conditions may exceed the number of persons injured.

Statistics of acute injury conditions include only those injuries which involved at least 1 full day of restricted activity or medical attendance.

Person injured.—A person injured is one who has sustained one or more injuries in an accident or in some type of nonaccidental violence. (See definition of injury condition.) Each time a person is involved in an accident or in

nonaccidental violence causing injury that results in at least 1 full day of restricted activity or medical attention he is included in the statistics as a separate person injured; hence one person may be included more than once.

The number of persons injured is not equivalent to the number of accidents for several reasons: (1) the term "accident" as commonly used may not involve injury at all, (2) more than one injured person may be involved in a single accident, so the number of accidents resulting in injury would be less than the number of persons injured in accidents, and (3) the term "accident" ordinarily implies an accidental origin whereas "persons injured" as used in the Health Interview Survey includes persons whose injuries resulted from certain nonaccidental violence.

The number of persons injured in a specified time interval is always equal to or less than the incidence of injury conditions since one person may incur more than one injury in a single accident.

Terms Relating to Class of Accident

Class of accident.—Injuries, injured persons, and resulting days of disability may be grouped according to class of accident. This is a broad classification of the types of events which resulted in personal injuries. Most of these events are accidents in the usual sense of the word, but some are other kinds of mishap, such as overexposure to the sun or adverse reactions to medical procedures, and others are nonaccidental violence, such as attempted suicide. The classes of accident are (1) moving motor vehicle accidents, (2) accidents occurring while at work, (3) home accidents, and (4) other accidents. These categories are not mutually exclusive. For example, a person may be injured in a moving motor vehicle accident which occurred while the person was at home or at work. The accident class "moving motor vehicle" includes "home-moving motor vehicle" and "while at work-moving motor vehicle." Similarly, the classes "while at work" and "home" include duplicated counts, e.g., "moving motor vehicle-while at work" is included under "while at work."

Motor vehicle.—A motor vehicle is any mechanically or electrically powered device, not operated on rails, upon which or by which any

person or property may be transported or drawn upon a land highway. Any object, such as a trailer, coaster, sled, or wagon, being towed by a motor vehicle is considered a part of the motor vehicle. Devices used solely for moving persons or materials within the confines of a building and its premises are not counted as motor vehicles.

Moving motor vehicle accident.—The accident is classified as "moving motor vehicle" if at least one of the motor vehicles involved in the accident was moving at the time of the accident. This category is subdivided into "traffic" and "nontraffic" accidents.

Traffic moving motor vehicle accident.—The accident is in the "traffic" category if it occurred on a public highway. It is considered to have occurred on the highway if it occurred wholly on the highway, if it originated on the highway, if it terminated on the highway, or if it involved a vehicle partially on the highway. A public highway is the entire width between boundary lines of every way or place of which any part is open to the use of the public for the purposes of vehicular traffic as a matter of right or custom.

Nontraffic moving motor vehicle accident.—The accident is in the "nontraffic" category if it occurred entirely in any place other than a public highway.

Nonmoving motor vehicle accident.—If the motor vehicle was not moving at the time of the accident, the accident is considered a "non-moving motor vehicle" accident and is classified in the "other accident" category.

Accident while at work.—The class of accident is "while at work" if the injured person was 17 years of age or over and was at work at a job or a business at the time the accident happened.

Home accident.—The class of accident is "home" if the injury occurred either inside or outside the house. "Outside the house" refers to the yard, buildings, and sidewalks on the property. "Home" includes not only the person's own home but also any other home in which he may have been when he was injured.

Other accident.—The class of accident is "other" if the occurrence of injury cannot be classified in one or more of the first three class-of-accident categories (e.g., moving motor vehi-

cle, while at work, or home). This category therefore includes persons injured in public places (e.g., tripping and falling in a store or on a public sidewalk) and also nonaccidental injuries such as homicidal and suicidal attempts. The survey does not cover the military population, but current disability of various types resulting from prior injury occurring while the person was in the Armed Forces is covered and is included in this class. The class also includes mishaps for which the class of accident could not be ascertained.

Terms Relating to Hospitalization

Hospital.—For this survey a hospital is defined as any institution meeting one of the following criteria: (1) named in the listing of hospitals in the current *American Hospital Association, Guide to the Health Care Field* or (2) found on the Master Facility Inventory List maintained by the National Center for Health Statistics.

Short-stay hospital.—A short-stay hospital is one in which the type of service provided by the hospital is general; maternity; eye, ear, nose, and throat; children's; or osteopathic; or it may be the hospital department of an institution.

Hospital day.—A hospital day is a day on which a person is confined to a hospital. The day is counted as a hospital day only if the patient stays overnight. Thus a patient who enters the hospital on Monday afternoon and leaves Wednesday noon is considered to have had 2 hospital days.

Hospital days during the year.—The number of hospital days during the year is the total number for all hospital episodes in the 12-month period prior to the interview week. For the purposes of this estimate, episodes overlapping the beginning or end of the 12-month period are subdivided so that only those days falling within the period are included.

Hospital episode.—A hospital episode is any continuous period of stay of 1 night or more in a hospital as an inpatient except the period of stay of a well newborn infant. A hospital episode is recorded for a family member whenever any part of his hospital stay is included in the 12-month period prior to the interview week.

Hospital discharge.—A hospital discharge is the completion of any continuous period of stay of 1 or more nights in a hospital as an inpatient except the period of stay of a well newborn infant. A hospital discharge is recorded whenever a present member of the household is reported to have been discharged from a hospital in the 12-month period prior to the interview week. (Estimates were based on discharges which occurred during the 6-month period prior to the interview.)

Length of hospital stay.—The length of hospital stay is the duration in days, exclusive of the day of discharge, of a hospital discharge. (See definition of "hospital discharge.")

Average length of stay.—The average length of stay per discharged patient is computed by dividing the total number of hospital days for a specified group by the total number of discharges for the same group.

Terms Relating to Dental Visits

Dental visit.—A dental visit is defined as any visit to a dentist's office for treatment or advice, including services by a technician or hygienist acting under a dentist's supervision.

Interval since last dental visit.—The interval since the last dental visit is the length of time prior to the week of interview since a dentist or dental hygienist was last visited for treatment or advice of any type.

Terms Relating to Physician Visits

Physician visit.—A physician visit is defined as consultation with a physician, in person or by telephone, for examination, diagnosis, treatment, or advice. The visit is considered to be a physician visit if the service is provided directly by the physician or by a nurse or other person acting under a physician's supervision. For the purpose of this definition "physician" includes doctors of medicine and osteopathic physicians. The term "doctor" is used in the interview rather than "physician" because of popular usage. However, the concept toward which all instructions are directed is that which is described here.

Physician visits for services provided on a

mass basis are not included in the tabulations. A service received on a mass basis is defined as any service involving only a single test (e.g., test for diabetes) or a single procedure (e.g., smallpox vaccination) when this single service was administered identically to all persons who were at the place for this purpose. Hence obtaining a chest X-ray in a tuberculosis chest X-ray trailer is not included as a physician visit. However, a special chest X-ray given in a physician's office or in an outpatient clinic is considered a physician visit.

Physician visits to hospital inpatients are not included.

If a physician is called to a house to see more than one person, the call is considered a separate physician visit for each person about whom the physician was consulted.

A physician visit is associated with the person about whom the advice was sought, even if that person did not actually see or consult the physician. For example, if a mother consults a physician about one of her children, the physician visit is ascribed to the child.

Interval since last physician visit.—The interval since the last physician visit is the length of time prior to the week of interview since a physician was last consulted in person or by telephone for treatment or advice of any type whatever. A physician visit to a hospital inpatient may be counted as the last time a physician was seen.

Demographic Terms

Age.—The age recorded for each person is the age at last birthday. Age is recorded in single years and grouped in a variety of distributions depending on the purpose of the table.

Currently employed.—Persons 17 years of age and over who reported that at any time during the 2-week period covered by the interview they either worked at or had a job or business are currently employed. Current employment in-

cludes paid work as an employee of someone else; self-employment in business, farming, or professional practice; and unpaid work in a family business or farm. Persons who were temporarily absent from a job or business because of a temporary illness, vacation, strike, or bad weather are considered as currently employed if they expected to work as soon as the particular event causing the absence no longer existed.

Free-lance workers are considered currently employed if they had a definite arrangement with one employer or more to work for pay according to a weekly or monthly schedule, either full time or part time.

Excluded from the currently employed population are persons who have no definite employment schedule but work only when their services are needed. Also excluded from the currently employed population are (1) persons receiving revenue from an enterprise but not participating in its operation, (2) persons doing housework or charity work for which they receive no pay, (3) seasonal workers during the portion of the year they were not working, and (4) persons who were not working, even though having a job or business, but were on layoff or looking for work.

The number of currently employed persons estimated from the Health Interview Survey (HIS) will differ from the estimates prepared from the Current Population Survey (CPS) of the U.S. Bureau of the Census for several reasons. In addition to sampling variability they include three primary conceptual differences, namely: (1) HIS estimates are for persons 17 years of age and over; CPS estimates are for persons 16 years of age and over. (2) HIS uses a 2-week reference period, while CPS uses a 1-week reference period. (3) HIS is a continuing survey with separate samples taken weekly; CPS is a monthly sample taken for the survey week which includes the 12th of the month.



APPENDIX III. QUESTIONNAIRE AND FLASH CARDS

O.M.B. No. 68-R1600; Approval Expires March 31, 1979

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 the establishment in accordance with section 308(d) of the Public Health Service Act (42 USC 242m).

1. Book _____ of _____ books

FORM HIS-1 (1978)
U.S. DEPARTMENT OF COMMERCE
BUREAU OF THE CENSUS
ACTING AS COLLECTING AGENT FOR THE
U.S. PUBLIC HEALTH SERVICE

U.S. HEALTH INTERVIEW SURVEY

2. R.O. number _____ 3. Sample _____ 4. Segment type
 Area
 Permit
 Address
 Cen-Sup
 Special Place

5. Control number
 PSU _____ Segment _____ Serial _____

6a. What is your exact address? (Include House No., Apt. No., or other identification and ZIP code)

 City _____ State _____ ZIP code _____

b. Is this your mailing address? Same as 6a
 Mark box or specify if different. Include ZIP code.

 City _____ State _____ ZIP code _____

c. Special place name _____ Sample unit number _____ Type code _____

7. YEAR BUILT Ask Do NOT Ask
 When was this structure originally built?
 Before 4-1-70 After 4-1-70 (Go to 9c, complete if required and end interview)
 (Continue interview)

8. Type of living quarters Housing unit OTHER unit

9. Area segments ONLY
 a. Are there any occupied or vacant living quarters besides your own in this building?
 Y (fill Table X) N
 b. Are there any occupied or vacant living quarters besides your own on this floor?
 Y (fill Table X) N
 c. Is there any other building on this property for people to live in - either occupied or vacant?
 Y (fill Table X) N
 d. None

GO TO PROBE PAGE 2

10. Land use RURAL URBAN (13)
 -- Regular units and Special Place units coded 85-88 in 6c, go to 11.
 -- Special Place units not coded 85-88 in 6c, go to 13.

11. Do you own or rent this place? Own Rent Rent for free

12a. Does this place you (own/rent/rent for free) have 10 acres or more? 1 Y (12b) 2 N (12c)
 b. During the past 12 months did sales of crops, livestock, and other farm products from this place amount to \$50 or more? 1 Y (13) 2 N (13)
 c. During the past 12 months did sales of crops, livestock, and other farm products from this place amount to \$250 or more? 1 Y 2 N

13. How many rooms are in this --? Rooms _____ 14. How many bedrooms are in this --? Bedrooms _____
 Count the kitchen but not the bathroom. If "None" describe in footnotes.

15. What is the telephone number here? Area code: Number _____ 2 None
 16. Was this interview observed? 1 Y 2 N

17. Interviewer's name _____ Code _____

18. Noninterview reason

TYPE A
 1 Refusal - Describe in a footnote } Fill items 1-6a, 7, 8, 10, 12a-c as applicable, 16-19
 2 No one at home - repeated calls
 3 Temporarily absent - Footnote
 4 Other (Specify) _____

TYPE B
 1 Vacant - nonseasonal } Fill items 1-6a, 7-10, 12a-c as applicable, 16-19
 2 Vacant - seasonal
 3 Usual residence elsewhere
 4 Armed Forces
 5 Other (Specify) _____

TYPE C
 1 Unused line of listing sheet } Fill items 1-6a, 6c if required, 9c if marked, 16-19. Send Inter-Comm.
 2 Demolished
 3 Merged
 4 Outside segment
 5 Built after April 1, 1970
 6 Other (Specify) _____

19. Record of calls

Month	Date	Beginning time	Ending time	Completed Mark (X)
1		a.m. p.m.	a.m. p.m.	
2		a.m. p.m.	a.m. p.m.	
3		a.m. p.m.	a.m. p.m.	
4		a.m. p.m.	a.m. p.m.	
5		a.m. p.m.	a.m. p.m.	
6		a.m. p.m.	a.m. p.m.	
7		a.m. p.m.	a.m. p.m.	
8		a.m. p.m.	a.m. p.m.	

FOOTNOTES

<p>1a. What is the name of the head of this household? - Enter name in first column</p> <p>b. What are the names of all other persons who live here? - List all persons who live here. Yes * No <input type="checkbox"/> <input type="checkbox"/></p> <p>c. I have listed (Read names). Is there anyone else staying here now, such as friends, relatives, or roomers? <input type="checkbox"/> <input type="checkbox"/></p> <p>d. Have I missed anyone who USUALLY lives here but is now away from home? <input type="checkbox"/> <input type="checkbox"/></p> <p>e. Do any of the people in this household have a home anywhere else? <input type="checkbox"/> <input type="checkbox"/></p> <p>f. Are any of the persons in this household now on full-time active duty with the Armed Forces of the United States? 1 Y Col(s).....(Delete) 2 N *Apply household membership rules.</p>		<p>1a. First name 1</p> <p>AGE</p> <p>RACE</p> <p>1 W</p> <p>2 B</p> <p>3 OT</p> <p>Last name</p>																		
<p>2. How is -- related to -- (Head of household)?</p>		<p>2. Relationship</p> <p>SEX</p> <p>1 M</p> <p>2 F</p> <p>HEAD</p>																		
<p>3. What is --'s date of birth? (Enter date and Age, and circle Race and Sex)</p>		<p>3. Month Date Year</p>																		
<p>L Ask Condition list _____.</p> <p>C 1. Record the number of Bed Days, Doctor Visits, and Hospitalizations</p> <p>2. Record each condition in the person's column, with the question number(s) where it was reported.</p> <p>Reference dates</p> <p>2-week period _____, _____</p> <p>12-month Bed Days and Doctor visit probe _____</p> <p>Hospital probe _____</p>		<p>C</p> <p>BED DAYS DV HOSP.</p> <p><input type="checkbox"/> None (NP) <input type="checkbox"/> None (NP) <input type="checkbox"/> None (NP)</p> <p>____ (NP) ____ (NP) ____ (NP)</p> <table border="1"> <thead> <tr> <th>Q. No.</th> <th>Condition</th> </tr> </thead> <tbody> <tr><td> </td><td> </td></tr> </tbody> </table>	Q. No.	Condition																
Q. No.	Condition																			
<p>If 17+, ask:</p> <p>4. Is -- now married, widowed, divorced, separated, or never married?</p>		<p>4.</p> <p>0 <input type="checkbox"/> Under 17</p> <p>1 <input type="checkbox"/> Married - spouse present</p> <p>6 <input type="checkbox"/> Married - spouse absent</p> <p>2 <input type="checkbox"/> Widowed</p> <p>4 <input type="checkbox"/> Divorced</p> <p>5 <input type="checkbox"/> Separated</p> <p>3 <input type="checkbox"/> Never married</p>																		
<p>H If related persons 17 years old or over are listed in addition to the respondent, say:</p> <p>We would like to have all adults who are at home take part in the interview. Is your --, your --, etc., at home now? If "Yes," ask: Please ask them to join us.</p>		<p>H</p> <p>0 <input type="checkbox"/> Under 17</p> <p>1 <input type="checkbox"/> At home</p> <p>2 <input type="checkbox"/> Not at home</p>																		
<p>This survey is being conducted to collect information on the Nation's health. I will ask about visits to doctors and dentists, illness in the family, and other health related items. (Hand calendar)</p> <p>The next few questions refer to the past 2 weeks, the 2 weeks outlined in red on that calendar, beginning Monday, _____ (date), and ending this past Sunday, _____ (date).</p> <p>5a. During those 2 weeks, did -- stay in bed because of any illness or injury?</p> <p>b. During that 2-week period, how many days did -- stay in bed all or most of the day?</p>		<p>5a. 00 N } If age: 17+ (6)</p> <p>5b. ____ Days } 6-16 (7)</p> <p>Under 6 (9)</p>																		
<p>6. During those 2 weeks, how many days did illness or injury keep -- from work? (For females): not counting work around the house?</p>		<p>6. ____ WL days (8)</p> <p>00 <input type="checkbox"/> None (9)</p>																		
<p>7. During those 2 weeks, how many days did illness or injury keep -- from school?</p>		<p>7. ____ SL days</p> <p>00 <input type="checkbox"/> None (9)</p>																		
<p>If one or more days in 5b, ask 8; otherwise go to 9</p> <p>8. On how many of these -- days lost from { work school } did -- stay in bed all or most of the day?</p>		<p>8. ____ Days</p> <p>00 <input type="checkbox"/> None</p>																		
<p>9a. (NOT COUNTING the day(s) { in bed lost from work lost from school })</p> <p>Were there any (other) days during the past 2 weeks that -- cut down on the things he usually does because of illness or injury?</p> <p>b. (Again, not counting the day(s) { in bed lost from work lost from school })</p> <p>During that period, how many (other) days did he cut down for as much as a day?</p>		<p>9a. 1 Y</p> <p>2 N (10)</p> <p>b. ____ Days</p> <p>00 <input type="checkbox"/> None</p>																		
<p>If one or more days in 5-9, ask 10; otherwise go to next person.</p> <p>10a. What condition caused -- to { stay in bed miss work miss school cut down } during the past 2 weeks?</p> <p>b. Did any other condition cause him to { stay in bed miss work miss school cut down } during that period?</p> <p>c. What condition?</p>		<p>10a. Enter condition in Item C Ask 10b</p> <p>b. Y</p> <p>N (NP)</p> <p>c. Enter condition in Item C (10b)</p>																		
<p>Fill item C, (BED DAYS), from 5b for all persons.</p>																				

<input type="checkbox"/> Under 17 <input type="checkbox"/> Married – spouse present <input type="checkbox"/> Married – spouse absent <input type="checkbox"/> Widowed <input type="checkbox"/> Divorced <input type="checkbox"/> Separated <input type="checkbox"/> Never married	4.	<input type="checkbox"/> Under 17 <input type="checkbox"/> Married – spouse present <input type="checkbox"/> Married – spouse absent <input type="checkbox"/> Widowed <input type="checkbox"/> Divorced <input type="checkbox"/> Separated <input type="checkbox"/> Never married	<input type="checkbox"/> Under 17 <input type="checkbox"/> Married – spouse present <input type="checkbox"/> Married – spouse absent <input type="checkbox"/> Widowed <input type="checkbox"/> Divorced <input type="checkbox"/> Separated <input type="checkbox"/> Never married	4.	<input type="checkbox"/> Under 17 <input type="checkbox"/> Married – spouse present <input type="checkbox"/> Married – spouse absent <input type="checkbox"/> Widowed <input type="checkbox"/> Divorced <input type="checkbox"/> Separated <input type="checkbox"/> Never married	<input type="checkbox"/> Under 17 <input type="checkbox"/> Married – spouse present <input type="checkbox"/> Married – spouse absent <input type="checkbox"/> Widowed <input type="checkbox"/> Divorced <input type="checkbox"/> Separated <input type="checkbox"/> Never married
<input type="checkbox"/> Under 17 <input type="checkbox"/> At home <input type="checkbox"/> Not at home	H	<input type="checkbox"/> Under 17 <input type="checkbox"/> At home <input type="checkbox"/> Not at home	<input type="checkbox"/> Under 17 <input type="checkbox"/> At home <input type="checkbox"/> Not at home	H	<input type="checkbox"/> Under 17 <input type="checkbox"/> At home <input type="checkbox"/> Not at home	<input type="checkbox"/> Under 17 <input type="checkbox"/> At home <input type="checkbox"/> Not at home
Y (5b) 00 N } If age: ____ Days } 17+ (6) } 6–16 (7) } Under 6 (9)	5a.	Y (5b) 00 N } If age: ____ Days } 17+ (6) } 6–16 (7) } Under 6 (9)	Y (5b) 00 N } If age: ____ Days } 17+ (6) } 6–16 (7) } Under 6 (9)	5a.	Y (5b) 00 N } If age: ____ Days } 17+ (6) } 6–16 (7) } Under 6 (9)	Y (5b) 00 N } If age: ____ Days } 17+ (6) } 6–16 (7) } Under 6 (9)
____ WL days (8) 00 None (9)	6.	____ WL days (8) 00 None (9)	____ WL days (8) 00 None (9)	6.	____ WL days (8) 00 None (9)	____ WL days (8) 00 None (9)
____ SL days 00 None (9)	7.	____ SL days 00 None (9)	____ SL days 00 None (9)	7.	____ SL days 00 None (9)	____ SL days 00 None (9)
____ Days 00 None	8.	____ Days 00 None	____ Days 00 None	8.	____ Days 00 None	____ Days 00 None
1 Y 2 N (10) ____ Days 00 None	9a.	1 Y 2 N (10) ____ Days 00 None	1 Y 2 N (10) ____ Days 00 None	9a.	1 Y 2 N (10) ____ Days 00 None	1 Y 2 N (10) ____ Days 00 None
Enter condition in item C Ask 10b	10a.	Enter condition in item C Ask 10b	Enter condition in item C Ask 10b	10a.	Enter condition in item C Ask 10b	Enter condition in item C Ask 10b
Y N (NP)	b.	Y N (NP)	Y N (NP)	b.	Y N (NP)	Y N (NP)
Enter condition in item C (10b)	c.	Enter condition in item C (10b)	Enter condition in item C (10b)	c.	Enter condition in item C (10b)	Enter condition in item C (10b)

Fill item C, (BED DAYS), from 5b for all persons.

<p>11a. During the past 2 weeks, did anyone in the family, that is you, your —, etc., have any (other) accidents or injuries? Y N (12)</p> <p>-----</p> <p>b. Who was this? — Mark "Accident or injury" box in person's column.</p> <p>-----</p> <p>c. What was the injury?</p> <p>-----</p> <p>d. Did anyone have any other accidents or injuries during that period? Y (Reask 11b and c) N</p> <p>If "Accident or injury," ask:</p> <p>e. As a result of the accident, did — see a doctor or did he cut down on the things he usually does?</p>	<p>11b. <input type="checkbox"/> Accident or injury</p> <p>Injury</p> <p>c.</p> <p>e. Y (Enter Injury in Item C) N</p>
<p>12a. During the past 2 weeks, did anyone in the family go to the dentist? Y N (13)</p> <p>-----</p> <p>b. Who was this? — Mark "Dental visit" box in person's column.</p> <p>-----</p> <p>c. During the past 2 weeks, did anyone else in the family go to a dentist? Y (Reask 12b and c) N</p> <p>If "Dental visit," ask:</p> <p>d. During the past 2 weeks, how many times did — go to a dentist?</p>	<p>12b. <input type="checkbox"/> Dental visit</p> <p>d. _____ No. of dental visits (NP)</p>
<p>Do not ask for children 1 yr. old and under.</p> <p>Mark box or ask:</p> <p>13. ABOUT how long has it been since — LAST went to a dentist?</p>	<p>13. <input type="checkbox"/> 2-week dental visit</p> <p>-----</p> <p>2 <input type="checkbox"/> Past 2 weeks not reported (12)</p> <p>3 <input type="checkbox"/> 2 weeks—6 months</p> <p>4 <input type="checkbox"/> Over 6—12 months</p> <p>5 <input type="checkbox"/> 1 year</p> <p>6 <input type="checkbox"/> 2—4 years</p> <p>7 <input type="checkbox"/> 5+ years</p> <p>8 <input type="checkbox"/> Never/age 1 or under</p>
<p>FOOTNOTES</p>	

<input type="checkbox"/> Accident or injury injury	11b. c.	<input type="checkbox"/> Accident or injury injury	<input type="checkbox"/> Accident or injury injury	11b. c.	<input type="checkbox"/> Accident or injury injury	<input type="checkbox"/> Accident or injury injury
Y (Enter injury in item C) N	e.	Y (Enter injury in item C) N	Y (Enter injury in item C) N	e.	Y (Enter injury in item C) N	Y (Enter injury in item C) N
<input type="checkbox"/> Dental visit	12b.	<input type="checkbox"/> Dental visit	<input type="checkbox"/> Dental visit	12b.	<input type="checkbox"/> Dental visit	<input type="checkbox"/> Dental visit
____ No. of dental visits (NP)	d.	____ No. of dental visits (NP)	____ No. of dental visits (NP)	d.	____ No. of dental visits (NP)	____ No. of dental visits (NP)
1 <input type="checkbox"/> 2-week dental visit	13.	1 <input type="checkbox"/> 2-week dental visit	1 <input type="checkbox"/> 2-week dental visit	13.	1 <input type="checkbox"/> 2-week dental visit	1 <input type="checkbox"/> 2-week dental visit
2 <input type="checkbox"/> Past 2 weeks not reported (12)		2 <input type="checkbox"/> Past 2 weeks not reported (12)	2 <input type="checkbox"/> Past 2 weeks not reported (12)		2 <input type="checkbox"/> Past 2 weeks not reported (12)	2 <input type="checkbox"/> Past 2 weeks not reported (12)
3 <input type="checkbox"/> 2 weeks-6 months		3 <input type="checkbox"/> 2 weeks-6 months	3 <input type="checkbox"/> 2 weeks-6 months		3 <input type="checkbox"/> 2 weeks-6 months	3 <input type="checkbox"/> 2 weeks-6 months
4 <input type="checkbox"/> Over 6-12 months		4 <input type="checkbox"/> Over 6-12 months	4 <input type="checkbox"/> Over 6-12 months		4 <input type="checkbox"/> Over 6-12 months	4 <input type="checkbox"/> Over 6-12 months
5 <input type="checkbox"/> 1 year		5 <input type="checkbox"/> 1 year	5 <input type="checkbox"/> 1 year		5 <input type="checkbox"/> 1 year	5 <input type="checkbox"/> 1 year
6 <input type="checkbox"/> 2-4 years		6 <input type="checkbox"/> 2-4 years	6 <input type="checkbox"/> 2-4 years		6 <input type="checkbox"/> 2-4 years	6 <input type="checkbox"/> 2-4 years
7 <input type="checkbox"/> 5+ Years		7 <input type="checkbox"/> 5+ years	7 <input type="checkbox"/> 5+ years		7 <input type="checkbox"/> 5+ years	7 <input type="checkbox"/> 5+ years
8 <input type="checkbox"/> Never/age 1 or under		8 <input type="checkbox"/> Never/age 1 or under	8 <input type="checkbox"/> Never/age 1 or under		8 <input type="checkbox"/> Never/age 1 or under	8 <input type="checkbox"/> Never/age 1 or under
FOOTNOTES						

14. During the past 2 weeks (the 2 weeks outlined in red on that calendar) how many times did --- see a medical doctor? Do not count doctors seen while a patient in a hospital.	14.	00 <input type="checkbox"/> None ____ Number of visits } NP
(Besides those visits)		
15a. During that 2-week period did anyone in the family go to a doctor's office or clinic for shots, X-rays, tests, or examinations?		
b. Who was this? - Mark "Doctor visit" box in person's column.	15b.	<input type="checkbox"/> Doctor visit
c. Anyone else?		
If "Doctor visit," ask:		
d. How many times did --- visit the doctor during that period?	d.	____ Number of visits (NP)
16a. During that period, did anyone in the family get any medical advice from a doctor over the telephone?		
b. Who was the phone call about? - Mark "Phone call" box in person's column.	16b.	<input type="checkbox"/> Phone call
c. Any calls about anyone else?		
If "Phone call," ask:		
d. How many telephone calls were made to get medical advice about --- ?	d.	____ Number of calls (NP)
<p>Fill item C, (DV), from 14-16 for all persons. Ask 17a for each person with visits in DV box.</p>		
17a. For what condition did --- see or talk to a doctor during the past 2 weeks?	17a.	<input type="checkbox"/> Condition (Item C THEN 17d) <input type="checkbox"/> Pregnancy (17e) <input type="checkbox"/> No condition
b. Did --- see or talk to a doctor about any specific condition?	b.	Y N (NP)
c. What condition?	c.	Enter condition in item C Ask 17d
d. During that period, did --- see or talk to a doctor about any other condition?	d.	Y (17c) N (NP)
e. During the past 2 weeks was --- sick because of her pregnancy?	e.	Y N (17d)
f. What was the matter?	f.	Enter condition in item C (17d)
18a. During the past 12 months, (that is since ___(date)___ a year ago), about how many times did --- see or talk to a medical doctor? (Do not count doctors seen while a patient in a hospital.) (Include the --- visits you already told me about.)	18a.	000 <input type="checkbox"/> Only when in hospital 000 <input type="checkbox"/> None ____ Number of visits
b. ABOUT how long has it been since --- LAST saw or talked to a medical doctor? Include doctors seen while a patient in a hospital.	b.	1 <input type="checkbox"/> 2-week DV 2 <input type="checkbox"/> Past 2 weeks not reported (14 and 17) 3 <input type="checkbox"/> 2 wks.-6 mos. 4 <input type="checkbox"/> Over 6-12 mos. 5 <input type="checkbox"/> 1 year 6 <input type="checkbox"/> 2-4 years 7 <input type="checkbox"/> 5+ years 8 <input type="checkbox"/> Never

00 <input type="checkbox"/> None ____ Number of visits } NP	14.	00 <input type="checkbox"/> None ____ Number of visits } NP	00 <input type="checkbox"/> None ____ Number of visits } NP	14.	00 <input type="checkbox"/> None ____ Number of visits } NP	00 <input type="checkbox"/> None ____ Number of visits } NP
<input type="checkbox"/> Doctor visit	15b.	<input type="checkbox"/> Doctor visit	<input type="checkbox"/> Doctor visit	15b.	<input type="checkbox"/> Doctor visit	<input type="checkbox"/> Doctor visit
____ Number of visits (NP)	d.	____ Number of visits (NP)	____ Number of visits (NP)	d.	____ Number of visits (NP)	____ Number of visits (NP)
<input type="checkbox"/> Phone call	16b.	<input type="checkbox"/> Phone call	<input type="checkbox"/> Phone call	16b.	<input type="checkbox"/> Phone call	<input type="checkbox"/> Phone call
____ Number of calls (NP)	d.	____ Number of calls (NP)	____ Number of calls (NP)	d.	____ Number of calls (NP)	____ Number of calls (NP)
<input type="checkbox"/> Condition (Item C THEN 17d) <input type="checkbox"/> Pregnancy (17e) <input type="checkbox"/> No condition	17a.	<input type="checkbox"/> Condition (Item C THEN 17d) <input type="checkbox"/> Pregnancy (17e) <input type="checkbox"/> No condition	<input type="checkbox"/> Condition (Item C THEN 17d) <input type="checkbox"/> Pregnancy (17e) <input type="checkbox"/> No condition	17a.	<input type="checkbox"/> Condition (Item C THEN 17d) <input type="checkbox"/> Pregnancy (17e) <input type="checkbox"/> No condition	<input type="checkbox"/> Condition (Item C THEN 17d) <input type="checkbox"/> Pregnancy (17e) <input type="checkbox"/> No condition
Y N (NP)	b.	Y N (NP)	Y N (NP)	b.	Y N (NP)	Y N (NP)
Enter condition in item C Ask 17d	c.	Enter condition in item C Ask 17d	Enter condition in item C Ask 17d	c.	Enter condition in item C Ask 17d	Enter condition in item C Ask 17d
Y (17c) N (NP)	d.	Y (17c) N (NP)	Y (17c) N (NP)	d.	Y (17c) N (NP)	Y (17c) N (NP)
Y N (17d)	e.	Y N (17d)	Y N (17d)	e.	Y N (17d)	Y N (17d)
Enter condition in item C (17d)	f.	Enter condition in item C (17d)	Enter condition in item C (17d)	f.	Enter condition in item C (17d)	Enter condition in item C (17d)
000 <input type="checkbox"/> Only when in hospital 000 <input type="checkbox"/> None ____ Number of visits	18a.	000 <input type="checkbox"/> Only when in hospital 000 <input type="checkbox"/> None ____ Number of visits	000 <input type="checkbox"/> Only when in hospital 000 <input type="checkbox"/> None ____ Number of visits	18a.	000 <input type="checkbox"/> Only when in hospital 000 <input type="checkbox"/> None ____ Number of visits	000 <input type="checkbox"/> Only when in hospital 000 <input type="checkbox"/> None ____ Number of visits
1 <input type="checkbox"/> 2-week DV	b.	1 <input type="checkbox"/> 2-week DV	1 <input type="checkbox"/> 2-week DV	b.	1 <input type="checkbox"/> 2-week DV	1 <input type="checkbox"/> 2-week DV
2 <input type="checkbox"/> Past 2 weeks not reported (14 and 17)		2 <input type="checkbox"/> Past 2 weeks not reported (14 and 17)	2 <input type="checkbox"/> Past 2 weeks not reported (14 and 17)		2 <input type="checkbox"/> Past 2 weeks not reported (14 and 17)	2 <input type="checkbox"/> Past 2 weeks not reported (14 and 17)
3 <input type="checkbox"/> 2 wks.-6 mos.		3 <input type="checkbox"/> 2 wks.-6 mos.	3 <input type="checkbox"/> 2 wks.-6 mos.		3 <input type="checkbox"/> 2 wks.-6 mos.	3 <input type="checkbox"/> 2 wks.-6 mos.
4 <input type="checkbox"/> Over 6-12 mos.		4 <input type="checkbox"/> Over 6-12 mos.	4 <input type="checkbox"/> Over 6-12 mos.		4 <input type="checkbox"/> Over 6-12 mos.	4 <input type="checkbox"/> Over 6-12 mos.
5 <input type="checkbox"/> 1 year		5 <input type="checkbox"/> 1 year	5 <input type="checkbox"/> 1 year		5 <input type="checkbox"/> 1 year	5 <input type="checkbox"/> 1 year
6 <input type="checkbox"/> 2-4 years		6 <input type="checkbox"/> 2-4 years	6 <input type="checkbox"/> 2-4 years		6 <input type="checkbox"/> 2-4 years	6 <input type="checkbox"/> 2-4 years
7 <input type="checkbox"/> 5+ years		7 <input type="checkbox"/> 5+ years	7 <input type="checkbox"/> 5+ years		7 <input type="checkbox"/> 5+ years	7 <input type="checkbox"/> 5+ years
8 <input type="checkbox"/> Never		8 <input type="checkbox"/> Never	8 <input type="checkbox"/> Never		8 <input type="checkbox"/> Never	8 <input type="checkbox"/> Never

Ages 17+	19a. What was -- doing MOST OF THE PAST 12 MONTHS -- (For males): working or doing something else? If "something else," ask: b. What was -- doing? If 45+ years and was not "working," "keeping house," or "going to school," ask: c. Is -- retired? d. If "retired," ask: Did he retire because of his health?	19. & 20.	1 <input type="checkbox"/> Working (24a) 2 <input type="checkbox"/> Keeping house (24b) 3 <input type="checkbox"/> Retired, health (23) 4 <input type="checkbox"/> Retired, other (23) 5 <input type="checkbox"/> Going to school (26) 6 <input type="checkbox"/> 17+ something else (23) 7 <input type="checkbox"/> 6-16 something else (25)
Ages 6-16	20a. What was -- doing MOST OF THE PAST 12 MONTHS -- going to school or doing something else? If "something else," ask: b. What was -- doing?		
Ages under 6			0 <input type="checkbox"/> 1-5 years (21) 0 <input type="checkbox"/> Under 1 (22)
21a. Is -- able to take part at all in ordinary play with other children?	21a.	Y	1 N (28)
b. Is he limited in the kind of play he can do because of his health?	b.	2 Y (28)	N
c. Is he limited in the amount of play because of his health?	c.	2 Y (28)	N (27)
22a. Is -- limited in any way because of his health?	22a.	1 Y	5 N (NP)
b. In what way is he limited? Record limitation, not condition.	b.	_____ (28)	
23a. Does -- health now keep him from working?	23a.	1 Y (28)	N
b. Is he limited in the kind of work he could do because of his health?	b.	2 Y (28)	N
c. Is he limited in the amount of work he could do because of his health?	c.	2 Y (28)	N
d. Is he limited in the kind or amount of other activities because of his health?	d.	3 Y (28)	N (27)
24a. Does -- NOW have a job?	24a.	Y (24c)	N
b. In terms of health, is -- NOW able to (work - keep house) at all?	b.	Y	1 N (28)
c. Is he limited in the kind of (work - housework) he can do because of his health?	c.	2 Y (28)	N
d. Is he limited in the amount of (work - housework) he can do because of his health?	d.	2 Y (28)	N
e. Is he limited in the kind or amount of other activities because of his health?	e.	3 Y (28)	N (27)
25. In terms of health would -- be able to go to school?	25.	Y	1 N (28)
26a. Does (would) -- have to go to a certain type of school because of his health?	26a.	2 Y (28)	N
b. Is he (would he be) limited in school attendance because of his health?	b.	2 Y (28)	N
c. Is he limited in the kind or amount of other activities because of his health?	c.	3 Y (28)	N
27a. Is -- limited in ANY WAY because of a disability or health?	27a.	4 Y	5 N (NP)
b. In what way is he limited? Record limitation, not condition.	b.	_____	
28a. About how long has he { been limited in -- been unable to -- had to go to a certain type of school? }	28a.	000 <input type="checkbox"/> Less than 1 month 1 _____ Mos. 2 _____ Yrs.	
b. What (other) condition causes this limitation?	b.	Enter condition in item C Ask 28c	
If "old age" only, ask: Is this limitation caused by any specific condition?		<input type="checkbox"/> Old age only (NP)	
c. Is this limitation caused by any other condition?	c.	Y (Reask 28b and c)	N
Mark box or ask:		<input type="checkbox"/> Only 1 condition	
d. Which of these conditions would you say is the MAIN cause of his limitation?	d.	Enter main condition	

1 <input type="checkbox"/> Working (24a) 2 <input type="checkbox"/> Keeping house (24b) 3 <input type="checkbox"/> Retired, health (23) 4 <input type="checkbox"/> Retired, other (23) 5 <input type="checkbox"/> Going to school (26) 6 <input type="checkbox"/> 17+ something else (23) 7 <input type="checkbox"/> 6-16 something else (25)	19. & 20.	1 <input type="checkbox"/> Working (24a) 2 <input type="checkbox"/> Keeping house (24b) 3 <input type="checkbox"/> Retired, health (23) 4 <input type="checkbox"/> Retired, other (23) 5 <input type="checkbox"/> Going to school (26) 6 <input type="checkbox"/> 17+ something else (23) 7 <input type="checkbox"/> 6-16 something else (25)	1 <input type="checkbox"/> Working (24a) 2 <input type="checkbox"/> Keeping house (24b) 3 <input type="checkbox"/> Retired, health (23) 4 <input type="checkbox"/> Retired, other (23) 5 <input type="checkbox"/> Going to school (26) 6 <input type="checkbox"/> 17+ something else (23) 7 <input type="checkbox"/> 6-16 something else (25)	19. & 20.	1 <input type="checkbox"/> Working (24a) 2 <input type="checkbox"/> Keeping house (24b) 3 <input type="checkbox"/> Retired, health (23) 4 <input type="checkbox"/> Retired, other (23) 5 <input type="checkbox"/> Going to school (26) 6 <input type="checkbox"/> 17+ something else (23) 7 <input type="checkbox"/> 6-16 something else (25)	1 <input type="checkbox"/> Working (24a) 2 <input type="checkbox"/> Keeping house (24b) 3 <input type="checkbox"/> Retired, health (23) 4 <input type="checkbox"/> Retired, other (23) 5 <input type="checkbox"/> Going to school (26) 6 <input type="checkbox"/> 17+ something else (23) 7 <input type="checkbox"/> 6-16 something else (25)
0 <input type="checkbox"/> 1-5 years (27) 0 <input type="checkbox"/> Under 1 (22)		0 <input type="checkbox"/> 1-5 years (27) 0 <input type="checkbox"/> Under 1 (22)	0 <input type="checkbox"/> 1-5 years (27) 0 <input type="checkbox"/> Under 1 (22)		0 <input type="checkbox"/> 1-5 years (27) 0 <input type="checkbox"/> Under 1 (22)	0 <input type="checkbox"/> 1-5 years (27) 0 <input type="checkbox"/> Under 1 (22)
Y 1 N (28)	21a.	Y 1 N (28)	Y 1 N (28)	21a.	Y 1 N (28)	Y 1 N (28)
2 Y (28) N	b.	2 Y (28) N	2 Y (28) N	b.	2 Y (28) N	2 Y (28) N
2 Y (28) N (27)	c.	2 Y (28) N (27)	2 Y (28) N (27)	c.	2 Y (28) N (27)	2 Y (28) N (27)
1 Y 5 N (NP)	22a.	1 Y 5 N (NP)	1 Y 5 N (NP)	22a.	1 Y 5 N (NP)	1 Y 5 N (NP)
_____ (28)	b.	_____ (28)	_____ (28)	b.	_____ (28)	_____ (28)
1 Y (28) N	23a.	1 Y (28) N	1 Y (28) N	23a.	1 Y (28) N	1 Y (28) N
2 Y (28) N	b.	2 Y (28) N	2 Y (28) N	b.	2 Y (28) N	2 Y (28) N
2 Y (28) N	c.	2 Y (28) N	2 Y (28) N	c.	2 Y (28) N	2 Y (28) N
3 Y (28) N (27)	d.	3 Y (28) N (27)	3 Y (28) N (27)	d.	3 Y (28) N (27)	3 Y (28) N (27)
Y (24c) N	24a.	Y (24c) N	Y (24c) N	24a.	Y (24c) N	Y (24c) N
Y 1 N (28)	b.	Y 1 N (28)	Y 1 N (28)	b.	Y 1 N (28)	Y 1 N (28)
2 Y (28) N	c.	2 Y (28) N	2 Y (28) N	c.	2 Y (28) N	2 Y (28) N
2 Y (28) N	d.	2 Y (28) N	2 Y (28) N	d.	2 Y (28) N	2 Y (28) N
3 Y (28) N (27)	e.	3 Y (28) N (27)	3 Y (28) N (27)	e.	3 Y (28) N (27)	3 Y (28) N (27)
Y 1 N (28)	25.	Y 1 N (28)	Y 1 N (28)	25.	Y 1 N (28)	Y 1 N (28)
2 Y (28) N	26a.	2 Y (28) N	2 Y (28) N	26a.	2 Y (28) N	2 Y (28) N
2 Y (28) N	b.	2 Y (28) N	2 Y (28) N	b.	2 Y (28) N	2 Y (28) N
3 Y (28) N	c.	3 Y (28) N	3 Y (28) N	c.	3 Y (28) N	3 Y (28) N
4 Y 5 N (NP)	27a.	4 Y 5 N (NP)	4 Y 5 N (NP)	27a.	4 Y 5 N (NP)	4 Y 5 N (NP)
_____	b.	_____	_____	b.	_____	_____
000 <input type="checkbox"/> Less than 1 month	28a.	000 <input type="checkbox"/> Less than 1 month	000 <input type="checkbox"/> Less than 1 month	28a.	000 <input type="checkbox"/> Less than 1 month	000 <input type="checkbox"/> Less than 1 month
1 _____ Mos. 2 _____ Yrs.	b.	1 _____ Mos. 2 _____ Yrs.	1 _____ Mos. 2 _____ Yrs.	b.	1 _____ Mos. 2 _____ Yrs.	1 _____ Mos. 2 _____ Yrs.
Enter condition in item C Ask 28c		Enter condition in item C Ask 28c	Enter condition in item C Ask 28c		Enter condition in item C Ask 28c	Enter condition in item C Ask 28c
<input type="checkbox"/> Old age only (NP)		<input type="checkbox"/> Old age only (NP)	<input type="checkbox"/> Old age only (NP)		<input type="checkbox"/> Old age only (NP)	<input type="checkbox"/> Old age only (NP)
Y (Reask 28b and c) N	c.	Y (Reask 28b and c) N	Y (Reask 28b and c) N	c.	Y (Reask 28b and c) N	Y (Reask 28b and c) N
<input type="checkbox"/> Only 1 condition		<input type="checkbox"/> Only 1 condition	<input type="checkbox"/> Only 1 condition		<input type="checkbox"/> Only 1 condition	<input type="checkbox"/> Only 1 condition
_____ Enter main condition	d.	_____ Enter main condition	_____ Enter main condition	d.	_____ Enter main condition	_____ Enter main condition

29a. Was -- a patient in a hospital at any time since (date) a year ago?	29a.	Y N (Item C)
b. How many times was -- in a hospital since (date) a year ago?	b.	____ Times (Item C)
30a. Was anyone in the family in a nursing home, convalescent home, or similar place since (date) a year ago? Y N (31)		
b. Who was this? - Circle "Y" in person's column.	30b.	Y
If "Y," ask: c. During that period, how many times was -- in a nursing home or similar place?	c.	____ Times (Item C)
Ask for each child 1 year old or under if date of birth is on or after reference date.		
31a. Was -- born in a hospital? If "Yes," and no hospitalizations entered in his and/or mother's column, enter "1" in 29b and item C. If "Yes," and a hospitalization is entered for the mother and/or baby, ask 31b for each.	31a.	Y N (NP)
b. Is this hospitalization included in the number you gave me for --? If "No," correct entries in 29 and item C for mother and/or baby.	b.	Y N
FOOTNOTES		

Y N (Item C)	29a.	Y N (Item C)	Y N (Item C)	29a.	Y N (Item C)	Y N (Item C)
___ Times (Item C)	b.	___ Times (Item C)	___ Times (Item C)	b.	___ Times (Item C)	___ Times (Item C)
Y	30b.	Y	Y	30b.	Y	Y
___ Times (Item C)	c.	___ Times (Item C)	___ Times (Item C)	c.	___ Times (Item C)	___ Times (Item C)
Y N (NP)	31a.	Y N (NP)	Y N (NP)	31a.	Y N (NP)	Y N (NP)
Y N	b.	Y N	Y N	b.	Y N	Y N

FOOTNOTES

1	<p>32a. DURING THE PAST 12 MONTHS, did anyone in the family (you, your --, etc.) have --</p> <p>If "Yes," ask 32b and c.</p> <p>b. Who was this? Enter name of condition and letter of line where reported in appropriate person's column in item C.</p> <p>c. During the past 12 months, did anyone else have . . . ?</p> <p>Conditions affecting the digestive system.</p> <p>Make no entry in item C for cold, flu, or gripe even if reported in question 32.</p>	A. Gallstones?	I. Any disease of the pancreas?
		B. Any other gallbladder trouble?	J. Ulcer?
		C. Cirrhosis of the liver?	K. Hernia or rupture?
		D. Fatty liver?	L. A disease of the esophagus?
		E. Hepatitis?	M. Gastritis?
		F. Yellow jaundice?	N. FREQUENT indigestion?
		G. Any other liver trouble?	O. Any other stomach trouble?
		H. Diabetes?	P. Enteritis?
2	<p>32a. Does anyone in the family (you, your --, etc.) NOW have --</p> <p>If "Yes," ask 32b and c.</p> <p>b. Who is this? Enter name of condition and letter of line where reported in appropriate person's column in item C.</p> <p>c. Does anyone else have . . . ?</p> <p>32d. DURING THE PAST 12 MONTHS, did anyone in the family (you, your --, etc.) have -- If "Yes," ask 32e and f.</p> <p>e. Who was this? Enter name of condition and letter of line where reported in appropriate person's column in item C.</p> <p>f. During the past 12 months, did anyone else have . . . ?</p> <p>Conditions C-N and V are conditions affecting the bone and muscle.</p>	A. Permanent stiffness or any deformity of the foot, leg, fingers, arm or back? (Permanent stiffness -- joints will not move at all)	
		B. Paralysis of any kind?	
		C. Arthritis of any kind or Rheumatism?	I. Trick knee?
		D. Gout?	J. A slipped or ruptured disc?
		E. Lumbago?	K. Curvature of the spine?
		F. Osteomyelitis? (os-tee-oh-my-uh-lite-iss)	L. REPEATED trouble with neck, back, or spine?
		G. A bone cyst or bone spur?	M. Bursitis or Synovitis? (sin-uh-vite-iss)
		H. Any other disease of the bone or cartilage?	N. Any disease of the muscles or tendons?
3	<p>32a. DURING THE PAST 12 MONTHS, did anyone in the family (you, your --, etc.) have --</p> <p>If "Yes," ask 32b and c.</p> <p>b. Who was this? Enter name of condition and letter of line where reported in appropriate person's column in item C.</p> <p>c. During the past 12 months, did anyone else have . . . ?</p>	A. Goiter or other thyroid trouble?	} Glandular disorders
		B. Diabetes?	
		C. Cystic fibrosis?	
		D. Anemia?	} Blood disorder
		E. Epilepsy?	} Conditions affecting the nervous system
		F. Multiple sclerosis?	
		G. Migraine?	

1	<p>32a. DURING THE PAST 12 MONTHS, did anyone in the family have - If "Yes," ask 32b and c.</p> <p>b. Who was this? Enter in item C.</p> <p>c. During the past 12 months, did anyone else have . . . ?</p> <p>Conditions affecting the digestive system.</p> <p>Make no entry in item C for cold, flu, or grippe even if reported in question 32.</p>	Q. Diverticulitis?	<p>W. Cancer of the stomach, colon or rectum?</p> <p>X. During the past 12 months, did anyone in the family have any other condition of the digestive system? If "Yes," ask: Who was this? - What was the condition? (Enter in item C)</p>
		R. Colitis?	
		S. Spastic colon?	
		T. FREQUENT constipation?	
		U. Any other bowel trouble?	
		V. Any other intestinal trouble?	
2	<p>32d. DURING THE PAST 12 MONTHS, did anyone in the family have - If "Yes," ask 32e and f.</p> <p>e. Who was this? Enter in item C.</p> <p>f. During the past 12 months, did anyone else have . . . ?</p> <p>Conditions O-U and W-Z are conditions affecting the skin.</p>	O. A tumor, cyst or growth of the skin?	U. Dermatitis or any other skin trouble?
		P. Eczema or psoriasis? (so-rye-uh-sis)	V. TROUBLE with fallen arches, flatfeet or clubfoot?
		Q. TROUBLE with dry or itching skin?	W. TROUBLE with ingrown toenails or fingernails?
		R. TROUBLE with acne?	X. TROUBLE with bunions, corns, or calluses?
		S. A skin ulcer?	Y. A disease of the hair or scalp?
		T. Any kind of skin allergy?	Z. Any disease of the lymph or sweat glands?
3	<p>32a. DURING THE PAST 12 MONTHS, did anyone in the family have - If "Yes," ask 32b and c.</p> <p>b. Who was this? Enter in item C.</p> <p>c. During the past 12 months, did anyone else have . . . ?</p>	H. Neuralgia or neuritis?	} Conditions affecting the nervous system
		I. Sciatica?	
		J. Nephritis?	} Genito-urinary conditions
		K. Kidney stones?	
		L. Any other kidney trouble?	
		M. Bladder trouble?	
		N. Prostate trouble?	
O. Disease of the uterus or ovary?			
P. Any other female trouble?			

4	<p>32a. Does anyone in the family (you, your --, etc.) NOW have -- If "Yes," ask 32b and c.</p> <p>b. Who is this? -- Enter name of condition and letter of line where reported in appropriate person's column in item C.</p> <p>c. Does anyone else have . . . ?</p> <p>A--L are conditions affecting hearing vision speech</p>	A. Deafness in one or both ears?	H. A detached retina or any other condition of the retina?
		B. Any other trouble hearing with one or both ears?	I. Any other trouble seeing with one or both eyes even when wearing glasses?
		C. Tinnitus or ringing in the ears?	J. A cleft palate or harelip?
		D. Blindness in one or both eyes?	K. Stammering or stuttering?
		E. Cataracts?	L. Any other speech defect?
		F. Glaucoma?	M. A missing finger, hand, or arm, toe, foot, or leg?
		G. Color blindness?	N. A missing (breast), kidney or lung?
5	<p>32a. Has anyone in the family (you, your --, etc.) EVER had -- If "Yes," ask 32b and c.</p> <p>b. Who was this? -- Enter name of condition and letter of line where reported in appropriate person's column in item C.</p> <p>c. Has anyone else ever had. . . ? Conditions affecting the heart and circulatory system.</p>	A. Rheumatic fever?	G. Stroke or a cerebrovascular accident?
		B. Rheumatic heart disease?	H. Hemorrhage of the brain?
		C. Hardening of the arteries or arteriosclerosis?	I. Angina pectoris?
		D. Congenital heart disease?	J. Myocardial infarction?
		E. Coronary heart disease?	K. Any other heart attack?
		F. High blood pressure?	
6	<p>32a. DURING THE PAST 12 MONTHS, did anyone in the family (you, your --, etc.) have -- If "Yes," ask 32b and c.</p> <p>b. Who was this? -- Enter name of condition and letter of line where reported in appropriate person's column in item C.</p> <p>c. During the past 12 months did anyone else have . . . ? Conditions affecting the respiratory system.</p>	A. Bronchitis?	F. Sinus trouble?
		B. Bronchiectasis? (brong ke-ek tah-sis)	G. Deflected or deviated nasal septum?
		C. Asthma?	H. *Tonsillitis or enlargement of the tonsils or adenoids?
		D. Hay fever?	I. *Laryngitis?
		E. Nasal polyp?	
		<p>*If reported in question 32 only, ask:</p> <p>1. How many times did -- have . . . in the past 12 months? -- If 2+ enter in item C. If only 1 time, ask:</p> <p>2. How long did it last? -- If 1 month or longer, enter in item C. If less than 1 month, do not record.</p> <p>If tonsils or adenoids removed during the past 12 months, enter condition causing removal in item C. Make no entry in item C for cold; flu; red, sore, or strep throat; or "virus" reported in answer to question 32.</p>	

4	<p>32a. Does anyone in the family NOW have – If "Yes," ask 32b and c.</p> <p>b. Who is this? Enter in item C.</p> <p>c. Does anyone else have . . . ? Conditions O–W are impairments. Conditions Y and Z affect the nervous system.</p>	<p>O. Palsy or cerebral palsy?</p> <p>P. Paralysis of any kind?</p> <p>Q. Curvature of the spine?</p> <p>R. REPEATED trouble with back or spine?</p> <p>S. Any TROUBLE with fallen arches or flatfeet?</p> <p>T. A clubfoot?</p>	<p>U. PERMANENT stiffness or any deformity of the back, foot, or leg? (Permanent stiffness – joints will not move at all)</p> <p>V. PERMANENT stiffness or any deformity of the fingers, hand, or arm?</p> <p>W. Mental retardation?</p> <p>X. Any condition caused by an old accident or injury? If "Yes," ask: What is the condition?</p> <p>Y. Epilepsy?</p> <p>Z. REPEATED convulsions, seizures, or blackouts?</p>	
5	<p>32a. DURING THE PAST 12 MONTHS, did anyone in the family (you, your —, etc.) have – If "Yes," ask 32b and c.</p> <p>b. Who was this? Enter in item C.</p> <p>c. During the past 12 months did anyone else have . . . ? Conditions affecting the heart and circulatory system.</p>	<p>L. Damaged heart valves?</p> <p>M. Tachycardia or rapid heart?</p> <p>N. Heart murmur?</p> <p>O. Any other heart trouble?</p> <p>P. Aneurysm?</p> <p>Q. Any blood clots?</p>	<p>R. Gangrene?</p> <p>S. Varicose veins?</p> <p>T. Hemorrhoids or piles?</p> <p>U. Phlebitis or thrombophlebitis?</p> <p>V. Any other condition affecting blood circulation?</p>	
6	<p>32a. DURING THE PAST 12 MONTHS, did anyone in the family have – If "Yes," ask 32b and c.</p> <p>b. Who was this? Enter in item C.</p> <p>c. During the past 12 months, did anyone else have . . . ? Make no entry in item C for cold; flu; red, sore, or strep throat; or "virus" reported in answer to question 32. Conditions affecting the respiratory system.</p>	<p>J. Tumor, cyst, or growth of the bronchial tube or lung?</p> <p>K. Emphysema?</p> <p>L. Pleurisy?</p> <p>M. Tuberculosis?</p> <p>N. Abscess of the lung?</p>	<p>O. Tumor, cyst, or growth of the throat, larynx, or trachea?</p> <p>P. Any work-related respiratory condition such as dust on the lungs, silicosis or pneu-mo-co-ni-o-sis?</p> <p>Q. During the past 12 months did anyone in the family have any other respiratory, lung, or pulmonary condition? If "Yes," ask: Who was this? – What was the condition? (Enter in item C)</p>	

33. Compared to other persons --'s age, would you say that his health is excellent, good, fair, or poor?		33.	1 E 2 G 3 F 4 P
BD	Mark box(es) from item C.	BD	1 <input type="checkbox"/> 1+ Bed Days 2 <input type="checkbox"/> 1+ Hospital Stays 3 <input type="checkbox"/> No Bed Days
34. During the past 12 months (that is since _____ (date) _____ a year ago), ABOUT how many days did illness or injury keep -- in bed all or most of the day? (Include the days in the past 2 weeks.) (Include the days while a patient in a hospital.) (Was it more than 7 days or less than 7 days?) (Was it more than 30 days or less than 30 days?) (Was it more than half the year or less than half the year?)		34.	0 <input type="checkbox"/> None 1 <input type="checkbox"/> 1-7 2 <input type="checkbox"/> 8-30 3 <input type="checkbox"/> 31-180 (1-6 months) 4 <input type="checkbox"/> 181+ (6 months +)
R Q's 4-34	For persons 17 years or over, show who responded for (or was present during the asking of) Questions 4-34. If persons responded for self, show whether entirely or partly. For persons under 17, show who responded for them.	R	1 <input type="checkbox"/> Responded for self-entirely 2 <input type="checkbox"/> Responded for self-partly Person__was respondent
FOOTNOTES			

1 E 2 G 3 F 4 P	33,	1 E 2 G 3 F 4 P	1 E 2 G 3 F 4 P	33,	1 E 2 G 3 F 4 P	1 E 2 G 3 F 4 P
1 <input type="checkbox"/> 1+ Bed Days 2 <input type="checkbox"/> 1+ Hospital Stays 3 <input type="checkbox"/> No Bed Days	BD	1 <input type="checkbox"/> 1+ Bed Days 2 <input type="checkbox"/> 1+ Hospital Stays 3 <input type="checkbox"/> No Bed Days	1 <input type="checkbox"/> 1+ Bed Days 2 <input type="checkbox"/> 1+ Hospital Stays 3 <input type="checkbox"/> No Bed Days	BD	1 <input type="checkbox"/> 1+ Bed Days 2 <input type="checkbox"/> 1+ Hospital Stays 3 <input type="checkbox"/> No Bed Days	1 <input type="checkbox"/> 1+ Bed Days 2 <input type="checkbox"/> 1+ Hospital Stays 3 <input type="checkbox"/> No Bed Days
0 <input type="checkbox"/> None 1 <input type="checkbox"/> 1-7 2 <input type="checkbox"/> 8-30 3 <input type="checkbox"/> 31-180 (1-6 months) 4 <input type="checkbox"/> 181+ (6 months +)	34,	0 <input type="checkbox"/> None 1 <input type="checkbox"/> 1-7 2 <input type="checkbox"/> 8-30 3 <input type="checkbox"/> 31-180 (1-6 months) 4 <input type="checkbox"/> 181+ (6 months +)	0 <input type="checkbox"/> None 1 <input type="checkbox"/> 1-7 2 <input type="checkbox"/> 8-30 3 <input type="checkbox"/> 31-180 (1-6 months) 4 <input type="checkbox"/> 181+ (6 months +)	34,	0 <input type="checkbox"/> None 1 <input type="checkbox"/> 1-7 2 <input type="checkbox"/> 8-30 3 <input type="checkbox"/> 31-180 (1-6 months) 4 <input type="checkbox"/> 181+ (6 months +)	0 <input type="checkbox"/> None 1 <input type="checkbox"/> 1-7 2 <input type="checkbox"/> 8-30 3 <input type="checkbox"/> 31-180 (1-6 months) 4 <input type="checkbox"/> 181+ (6 months +)
1 <input type="checkbox"/> Responded for self-entirely 2 <input type="checkbox"/> Responded for self-partly Person ___ was respondent	R	1 <input type="checkbox"/> Responded for self-entirely 2 <input type="checkbox"/> Responded for self-partly Person ___ was respondent	1 <input type="checkbox"/> Responded for self-entirely 2 <input type="checkbox"/> Responded for self-partly Person ___ was respondent	R	1 <input type="checkbox"/> Responded for self-entirely 2 <input type="checkbox"/> Responded for self-partly Person ___ was respondent	1 <input type="checkbox"/> Responded for self-entirely 2 <input type="checkbox"/> Responded for self-partly Person ___ was respondent
FOOTNOTES						

AA

1 Missing extremity (A4)
 2 Condition in C2 does not have a letter as source (A4)
 3 Condition in C2 has a letter as source, Doctor seen (11)
 4 Condition in C2 has a letter as source, Doctor not seen (15)

11a. Does -- NOW take any medicine or treatment for his . . . ?
 1 Y
 2 N (12)

b. Was any of this medicine or treatment recommended by a doctor?
 1 Y
 2 N

12. Has he ever had surgery for this condition?
 1 Y
 2 N

13. Was he ever hospitalized for this condition?
 1 Y
 2 N

14. During the past 12 months, about how many times has -- seen or talked to a doctor about his . . . ?
 (Do not count visits while a patient in a hospital.) ___ Times
 000 None

15a. About how many days during the past 12 months has this condition kept him in bed all or most of the day?
 ___ Days
 000 None

Ask if 17+ years:

b. About how many days during the past 12 months has this condition kept him from work?
 ___ Days
 For females: Not counting work around the house? 000 None

16a. How often does his . . . bother him -- all of the time, often, once in a while, or never?
 1 All the time 2 Often 3 Once in a while
 4 Never (16c) 5 Other -- Specify _____

b. When it does bother him, is he bothered a great deal, some, or very little?
 1 Great deal 2 Some 3 Very little
 4 Other -- Specify _____

All the time in 16a OR condition list 4 asked (A4)

c. Does -- still have this condition?
 1 Y. (A4) N

d. Is this condition completely cured or is it under control?
 2 Cured 3 Under control (A4)
 4 Other -- Specify _____ (A4)

e. About how long did -- have this condition before it was cured?
 0 Less than one month ___ Months ___ Years

A4 Accident or injury Other (NC)

17a. Did the accident happen during the past 2 years or before that time?
 During the past 2 years Before 2 years (18a)

b. When did the accident happen?
 Last week Over 3-12 months
 Week before 1-2 years
 2 weeks-3 months

18a. At the time of the accident what part of the body was hurt?
 What kind of injury was it? Anything else?

Part(s) of body	Kind of injury

If accident happened more than 3 months ago, ask:

b. What part of the body is affected now?
 How is his -- affected? Is he affected in any other way?

Part(s) of body	Present effects

19. Where did the accident happen?
 1 At home (inside house)
 2 At home (adjacent premises)
 3 Street and highway (includes roadway and public sidewalk)
 4 Farm
 5 Industrial place (includes premises)
 6 School (includes premises)
 7 Place of recreation and sports, except at school
 8 Other -- Specify _____

20. Was -- at work at his job or business when the accident happened?
 1 Y 3 While in Armed Services
 2 N 4 Under 17 at time of accident

21a. Was a car, truck, bus, or other motor vehicle involved in the accident in any way? 1 Y 2 N (NC)

b. Was more than one vehicle involved? Y N

c. Was it (either one) moving at the time? 1 Y 2 N

1. Person number _____	1. Person number _____	1. Person number _____
2a. _____ OR { 7777 [] Last week 8888 [] Week before Month _____ Date _____	2a. _____ OR { 7777 [] Last week 8888 [] Week before Month _____ Date _____	2a. _____ OR { 7777 [] Last week 8888 [] Week before Month _____ Date _____
b. Y (Reask 2a and b) N (Ask 3-8 for each visit)	b. Y (Reask 2a and b) N (Ask 3-8 for each visit)	b. Y (Reask 2a and b) N (Ask 3-8 for each visit)
3. 0 [] While inpatient in hospital (Next DV) 1 [] Doctor's office (group practice or doctor's clinic) 2 [] Telephone 3 [] Hospital Outpatient Clinic 4 [] Home 5 [] Hospital Emergency Room 6 [] Company or Industry Clinic 7 [] Other (Specify) _____	3. 0 [] While inpatient in hospital (Next DV) 1 [] Doctor's office (group practice or doctor's clinic) 2 [] Telephone 3 [] Hospital Outpatient Clinic 4 [] Home 5 [] Hospital Emergency Room 6 [] Company or Industry Clinic 7 [] Other (Specify) _____	3. 0 [] While inpatient in hospital (Next DV) 1 [] Doctor's office (group practice or doctor's clinic) 2 [] Telephone 3 [] Hospital Outpatient Clinic 4 [] Home 5 [] Hospital Emergency Room 6 [] Company or Industry Clinic 7 [] Other (Specify) _____
4. 01 [] General practitioner [] Specialist - What kind of specialist is he? _____	4. 01 [] General practitioner [] Specialist - What kind of specialist is he? _____	4. 01 [] General practitioner [] Specialist - What kind of specialist is he? _____
5. 1 Y 2 N	5. 1 Y 2 N	5. 1 Y 2 N
6a. _____ 1 [] Diag. or treatment (6c) 3 [] General checkup (6b) 2 [] Pre or Postnatal care 4 [] Eye exam. (glasses) 5 [] Immunization 6 [] Other _____ } (7)	6a. _____ 1 [] Diag. or treatment (6c) 3 [] General checkup (6b) 2 [] Pre or Postnatal care 4 [] Eye exam. (glasses) 5 [] Immunization 6 [] Other _____ } (7)	6a. _____ 1 [] Diag. or treatment (6c) 3 [] General checkup (6b) 2 [] Pre or Postnatal care 4 [] Eye exam. (glasses) 5 [] Immunization 6 [] Other _____ } (7)
b. Y (Enter condition in 6a and change to "Diag. or treatment") N (7) [] Condition reported in 6a	b. Y (Enter condition in 6a and change to "Diag. or treatment") N (7) [] Condition reported in 6a	b. Y (Enter condition in 6a and change to "Diag. or treatment") N (7) [] Condition reported in 6a
c. _____	c. _____	c. _____
7. City _____ County _____ State _____	7. City _____ County _____ State _____	7. City _____ County _____ State _____
8. _____ Minutes	8. _____ Minutes	8. _____ Minutes
PI A Condition page is required for the condition in question 6. If there is no Condition page, enter condition in item C and fill a page for it after completing columns for all required doctor visits.		

HOSPITAL PAGE		1. Person number _____		
<p>You said that -- was in the hospital (nursing home) during the past year. USE YOUR CALENDAR</p> <p>2. When did -- enter the hospital (nursing home) (the last time)? Make sure the YEAR is correct</p>		2. Month	Date	Year 19 ____
3. What is the name and address of this hospital (nursing home)?		3. Name _____ Street _____ City (or county) _____ State _____		
4. How many nights was -- in the hospital (nursing home)?		4. _____ Nights		
5a. How many of these -- nights were during the past 12 months? <i>(Complete 5 from entries in 2 and 4; if not clear, ask the questions.)</i>		5a. _____ Nights		
b. How many of these -- nights were during the past 2 weeks?		b. _____ Nights		
c. Was -- still in the hospital (nursing home) last Sunday night for this hospitalization (stay)?		c. Y _____ N _____		
<p>6. For what condition did -- enter the hospital (nursing home) - do you know the medical name? If medical name unknown, enter an adequate description.</p> <p>For delivery ask: } If "NO," ask: Show CAUSE, KIND, and PART OF BODY in same detail as required for the Condition page. Was this a normal delivery? } What was the matter? For newborn, ask: } Was the baby normal at birth? }</p>		<p>6. <input type="checkbox"/> Normal delivery <input type="checkbox"/> Normal at birth</p> <p>Condition _____</p> <p>Cause _____ On Card C <input type="checkbox"/> Acc. or Inj. _____</p> <p>Kind _____</p> <p>Part of body _____</p>		
7a. Were any operations performed on -- during this stay at the hospital (nursing home)?		7a. Y _____ N (8) _____		
b. What was the name of the operation? If name of operation is not known, describe what was done.		b. _____ Y (Describe) _____ N _____		
c. Any other operations during this stay?		c. _____		
8. At the time -- entered the hospital was he living at this address? <i>(If newborn go to next hosp; otherwise ask:)</i>		8. 1 Y (10) _____ 2 N _____		
9. In what city (town), county, and State was -- living?		9. City _____ County _____ State _____		
10. About how long did it take -- to get to the hospital on (date in 2)? (Was it less than 30 minutes or more than 30 minutes?) (Was it less than one hour or more than one hour?)		10. 1 Less than 30 minutes 2 30-59 minutes 3 60-89 minutes 4 90+ minutes		
P2	A Condition page is required if there is an entry of "1" or more nights in 5b. If there is no Condition page, enter condition in item C and fill a page for it after completing columns for all required hospitalizations.			

1. Person number _____	1. Person number _____	1. Person number _____
2. Month _____ Date _____ Year 19 ____	2. Month _____ Date _____ Year 19 ____	2. Month _____ Date _____ Year 19 ____
3. Name _____ Street _____ City (or county) _____ State _____	3. Name _____ Street _____ City (or county) _____ State _____	3. Name _____ Street _____ City (or county) _____ State _____
4. _____ Nights	4. _____ Nights	4. _____ Nights
5a. _____ Nights	5a. _____ Nights	5a. _____ Nights
b. _____ Nights	b. _____ Nights	b. _____ Nights
c. Y _____ N _____	c. Y _____ N _____	c. Y _____ N _____
6. <input type="checkbox"/> Normal delivery <input type="checkbox"/> Normal at birth Condition Cause <input type="checkbox"/> On Card C <input type="checkbox"/> Acc. or Inj. Kind _____ Part of body _____	6. <input type="checkbox"/> Normal delivery <input type="checkbox"/> Normal at birth Condition Cause <input type="checkbox"/> On Card C <input type="checkbox"/> Acc. or Inj. Kind _____ Part of body _____	6. <input type="checkbox"/> Normal delivery <input type="checkbox"/> Normal at birth Condition Cause <input type="checkbox"/> On Card C <input type="checkbox"/> Acc. or Inj. Kind _____ Part of body _____
7a. Y _____ 0 N (8)	7a. Y _____ 0 N (8)	7a. Y _____ 0 N (8)
b. _____	b. _____	b. _____
c. Y (Describe) _____ N _____	c. Y (Describe) _____ N _____	c. Y (Describe) _____ N _____
8. 1 Y (10) 2 N	8. 1 Y (10) 2 N	8. 1 Y (10) 2 N
9. City _____ County _____ State _____	9. City _____ County _____ State _____	9. City _____ County _____ State _____
10. 1 <input type="checkbox"/> Less than 30 minutes 2 <input type="checkbox"/> 30-59 minutes 3 <input type="checkbox"/> 60-89 minutes 4 <input type="checkbox"/> 90+ minutes	10. 1 <input type="checkbox"/> Less than 30 minutes 2 <input type="checkbox"/> 30-59 minutes 3 <input type="checkbox"/> 60-89 minutes 4 <input type="checkbox"/> 90+ minutes	10. 1 <input type="checkbox"/> Less than 30 minutes 2 <input type="checkbox"/> 30-59 minutes 3 <input type="checkbox"/> 60-89 minutes 4 <input type="checkbox"/> 90+ minutes
P2	A Condition page is required if there is an entry of "1" or more nights in 5b. If there is no Condition page, enter condition in item C and fill a page for it after completing columns for all required hospitalizations.	

HEALTH INSURANCE PAGE

Medicare is a Social Security health insurance program for disabled persons and for persons 65 years old and over. People covered by Medicare have a card that looks like this. Show card

1a. Is anyone in this family covered by Medicare? Y N (4) DK

b. Is --- covered? Mark box in person's column.

1b. 1 Cov. 2 Not cov. 9 DK

Ask for each person with "Covered" in 1b.

2a. Is --- covered by that part of Social Security Medicare which pays for hospital bills? Mark box in person's column.

2a. 1 Cov. Hosp. 2 No 9 DK

b. Is --- covered by that part of Medicare which pays for doctor's bills, that is, the Medicare plan for which he or some agency must pay a certain amount each month? Mark box in person's column.

b. 1 Cov. Med. 2 No 9 DK

Ask for each person with "DK" in 2 and for each person under 65 with "Covered" in 1b.

3. May I please see the Social Security Medicare card(s) for --- (and ---) to determine the (type/dates) of coverage? Transcribe the information from the card or mark the "Card N.A." box.

3. 1 Cov. Hosp. 3 Card N.A.
2 Cov. Med.

We are interested in all kinds of health insurance plans except those which pay only for accidents.

4a. (Not counting Medicare) Is anyone in the family covered by hospital insurance, that is, a health insurance plan which pays any part of a hospital bill? Y N (4d)

b. What is the name of the plan? (Record in Table H.I.)

c. Is anyone in the family covered by any other hospital insurance plan? Y (Reask 4b and c) N

d. Is anyone in the family covered by any (other) health insurance plan which pays any part of a DOCTOR'S or SURGEON'S bill? Y N (5)

e. What is the name of the plan? (Record in Table H.I., reask 4d)

TABLE H.I.

PLAN	3c. Does this plan pay any part of hospital expenses?	6a. Is --- covered under this (name) plan?	6a.
PLAN 1 5a. Was this (name) plan obtained through an employer or union? 1 Y (c) 2 N 9 DK b. Was it obtained through some other group? 1 Y 2 N 9 DK	3c. Does this plan pay any part of hospital expenses? 1 Y 2 N 9 DK d. Does this plan pay any part of doctor's or surgeon's bills for operations? 1 Y 2 N 9 DK	6a. Is --- covered under this (name) plan? b. During the past 12 months did --- receive medical care which has been or will be paid for by this plan? 1 Y 2 N 9 DK	6a. 1 <input type="checkbox"/> Cov. 2 <input type="checkbox"/> Not cov. (NP) b. 1 Y 2 N 9 DK
PLAN 2 5a. Was this (name) plan obtained through an employer or union? 1 Y (c) 2 N 9 DK b. Was it obtained through some other group? 1 Y 2 N 9 DK	3c. Does this plan pay any part of hospital expenses? 1 Y 2 N 9 DK d. Does this plan pay any part of doctor's or surgeon's bills for operations? 1 Y 2 N 9 DK	6a. Is --- covered under this (name) plan? b. During the past 12 months did --- receive medical care which has been or will be paid for by this plan? 1 Y 2 N 9 DK	6a. 1 <input type="checkbox"/> Cov. 2 <input type="checkbox"/> Not cov. (NP) b. 1 Y 2 N 9 DK
PLAN 3 5a. Was this (name) plan obtained through an employer or union? 1 Y (c) 2 N 9 DK b. Was it obtained through some other group? 1 Y 2 N 9 DK	3c. Does this plan pay any part of hospital expenses? 1 Y 2 N 9 DK d. Does this plan pay any part of doctor's or surgeon's bills for operations? 1 Y 2 N 9 DK	6a. Is --- covered under this (name) plan? b. During the past 12 months did --- receive medical care which has been or will be paid for by this plan? 1 Y 2 N 9 DK	6a. 1 <input type="checkbox"/> Cov. 2 <input type="checkbox"/> Not cov. (NP) b. 1 Y 2 N 9 DK
I For each person review 1, 2, 3, and 6 for each plan and determine if "Covered" by either Medicare or insurance, or "Not covered."			
Ask for each person "Not covered," Circle all reasons given → Many people do not carry health insurance for various reasons. Hand Card N 7a. Which of those statements describes why --- is not covered by any health insurance plan? Any other reason? Mark box or ask: b. What is the MAIN reason --- is not covered by any health insurance plan?			
			7a. 1 <input type="checkbox"/> Cov. (NP) 2 <input type="checkbox"/> Not cov. (NP) 1 2 3 4 5 6 7 8 9 <input checked="" type="checkbox"/> (Specify) 00 <input type="checkbox"/> Only one reason b. 1 2 3 4 5 6 7 8 9 <input checked="" type="checkbox"/> (Specify)

1 <input type="checkbox"/> Cov. 2 <input type="checkbox"/> Not cov. 9 <input type="checkbox"/> DK	1b.	1 <input type="checkbox"/> Cov. 2 <input type="checkbox"/> Not cov. 9 <input type="checkbox"/> DK	1 <input type="checkbox"/> Cov. 2 <input type="checkbox"/> Not cov. 9 <input type="checkbox"/> DK	1b.	1 <input type="checkbox"/> Cov. 2 <input type="checkbox"/> Not cov. 9 <input type="checkbox"/> DK	1 <input type="checkbox"/> Cov. 2 <input type="checkbox"/> Not cov. 9 <input type="checkbox"/> DK
1 <input type="checkbox"/> Cov. Hosp. 2 <input type="checkbox"/> No 9 <input type="checkbox"/> DK	2a.	1 <input type="checkbox"/> Cov. Hosp. 2 <input type="checkbox"/> No 9 <input type="checkbox"/> DK	1 <input type="checkbox"/> Cov. Hosp. 2 <input type="checkbox"/> No 9 <input type="checkbox"/> DK	2a.	1 <input type="checkbox"/> Cov. Hosp. 2 <input type="checkbox"/> No 9 <input type="checkbox"/> DK	1 <input type="checkbox"/> Cov. Hosp. 2 <input type="checkbox"/> No 9 <input type="checkbox"/> DK
1 <input type="checkbox"/> Cov. Med. 2 <input type="checkbox"/> No 9 <input type="checkbox"/> DK	b.	1 <input type="checkbox"/> Cov. Med. 2 <input type="checkbox"/> No 9 <input type="checkbox"/> DK	1 <input type="checkbox"/> Cov. Med. 2 <input type="checkbox"/> No 9 <input type="checkbox"/> DK	b.	1 <input type="checkbox"/> Cov. Med. 2 <input type="checkbox"/> No 9 <input type="checkbox"/> DK	1 <input type="checkbox"/> Cov. Med. 2 <input type="checkbox"/> No 9 <input type="checkbox"/> DK
1 <input type="checkbox"/> Cov. Hosp. 3 <input type="checkbox"/> Card N.A. 2 <input type="checkbox"/> Cov. Med.	3.	1 <input type="checkbox"/> Cov. Hosp. 3 <input type="checkbox"/> Card N.A. 2 <input type="checkbox"/> Cov. Med.	1 <input type="checkbox"/> Cov. Hosp. 3 <input type="checkbox"/> Card N.A. 2 <input type="checkbox"/> Cov. Med.	3.	1 <input type="checkbox"/> Cov. Hosp. 3 <input type="checkbox"/> Card N.A. 2 <input type="checkbox"/> Cov. Med.	1 <input type="checkbox"/> Cov. Hosp. 3 <input type="checkbox"/> Card N.A. 2 <input type="checkbox"/> Cov. Med.
1 <input type="checkbox"/> Cov. 2 <input type="checkbox"/> Not cov. (NP)	6a.	1 <input type="checkbox"/> Cov. 2 <input type="checkbox"/> Not cov. (NP)	1 <input type="checkbox"/> Cov. 2 <input type="checkbox"/> Not cov. (NP)	6a.	1 <input type="checkbox"/> Cov. 2 <input type="checkbox"/> Not cov. (NP)	1 <input type="checkbox"/> Cov. 2 <input type="checkbox"/> Not cov. (NP)
1 Y 2 N 9 DK	b.	1 Y 2 N 9 DK	1 Y 2 N 9 DK	b.	1 Y 2 N 9 DK	1 Y 2 N 9 DK
1 <input type="checkbox"/> Cov. 2 <input type="checkbox"/> Not cov. (NP)	6a.	1 <input type="checkbox"/> Cov. 2 <input type="checkbox"/> Not cov. (NP)	1 <input type="checkbox"/> Cov. 2 <input type="checkbox"/> Not cov. (NP)	6a.	1 <input type="checkbox"/> Cov. 2 <input type="checkbox"/> Not cov. (NP)	1 <input type="checkbox"/> Cov. 2 <input type="checkbox"/> Not cov. (NP)
1 Y 2 N 9 DK	b.	1 Y 2 N 9 DK	1 Y 2 N 9 DK	b.	1 Y 2 N 9 DK	1 Y 2 N 9 DK
1 <input type="checkbox"/> Cov. 2 <input type="checkbox"/> Not cov. (NP)	6a.	1 <input type="checkbox"/> Cov. 2 <input type="checkbox"/> Not cov. (NP)	1 <input type="checkbox"/> Cov. 2 <input type="checkbox"/> Not cov. (NP)	6a.	1 <input type="checkbox"/> Cov. 2 <input type="checkbox"/> Not cov. (NP)	1 <input type="checkbox"/> Cov. 2 <input type="checkbox"/> Not cov. (NP)
1 Y 2 N 9 DK	b.	1 Y 2 N 9 DK	1 Y 2 N 9 DK	b.	1 Y 2 N 9 DK	1 Y 2 N 9 DK
1 <input type="checkbox"/> Cov. (NP) 2 <input type="checkbox"/> Not cov. (NP)	I	1 <input type="checkbox"/> Cov. (NP) 2 <input type="checkbox"/> Not cov. (NP)	1 <input type="checkbox"/> Cov. (NP) 2 <input type="checkbox"/> Not cov. (NP)	I	1 <input type="checkbox"/> Cov. (NP) 2 <input type="checkbox"/> Not cov. (NP)	1 <input type="checkbox"/> Cov. (NP) 2 <input type="checkbox"/> Not cov. (NP)
1 2 3 4 5 6 7 8 9 <input type="checkbox"/>	7a.	1 2 3 4 5 6 7 8 9 <input type="checkbox"/>	1 2 3 4 5 6 7 8 9 <input type="checkbox"/>	7a.	1 2 3 4 5 6 7 8 9 <input type="checkbox"/>	1 2 3 4 5 6 7 8 9 <input type="checkbox"/>
(Specify)		(Specify)	(Specify)		(Specify)	(Specify)
00 <input type="checkbox"/> Only one reason		00 <input type="checkbox"/> Only one reason	00 <input type="checkbox"/> Only one reason		00 <input type="checkbox"/> Only one reason	00 <input type="checkbox"/> Only one reason
1 2 3 4 5 6 7 8 9 <input type="checkbox"/>	b.	1 2 3 4 5 6 7 8 9 <input type="checkbox"/>	1 2 3 4 5 6 7 8 9 <input type="checkbox"/>	b.	1 2 3 4 5 6 7 8 9 <input type="checkbox"/>	1 2 3 4 5 6 7 8 9 <input type="checkbox"/>
(Specify)		(Specify)	(Specify)		(Specify)	(Specify)

USUAL SOURCE OF CARE			
1. Is there a particular clinic, health center, doctor's office or other place that -- usually goes to if he is sick or needs advice about his health?	1.	1 Y	2 N (7)
2. What kind of place is it -- a clinic, a health center, a hospital, a doctor's office, or some other place? IF HOSPITAL: Is this an outpatient clinic or the emergency room? IF CLINIC: Is this a hospital outpatient clinic, a company clinic, or some other kind of clinic?	2.	<input type="checkbox"/> 1 Doctor's office (group practice or doctor's clinic) <input type="checkbox"/> 2 Hospital outpatient clinic <input type="checkbox"/> 3 Home <input type="checkbox"/> 4 Hospital emergency room <input type="checkbox"/> 5 Company or industry clinic <input type="checkbox"/> 6 Health center <input checked="" type="checkbox"/> 7 Other (Specify) <u>7</u>	
3. Is there ONE particular doctor -- usually sees at (place in 2)? If "Home" in 2, go to 6; otherwise ask:	3.	1 Y	2 N
4. In what city (town), county and State is the (place in 2) located?	4.	City _____ County _____ State _____	
5. About how long does it usually take -- to get to the (place in 2)?	5.	_____ Minutes	
6. The LAST time -- saw a doctor was it at the SAME (place in 2) or some other place?	6.	1 <input type="checkbox"/> Same place (NP)	2 <input type="checkbox"/> Other place (B)
Hand Card P 7. Many people do not have a particular place they usually go when they are sick or need advice about their health. Could you please give me the number of the statement which is the MAIN reason -- does not have a particular place he usually goes? 1 -- Have two or more usual doctors or places depending on what is wrong. 2 -- Haven't needed a doctor. 3 -- Previous doctor no longer available. 4 -- Haven't been able to find the right doctor. 5 -- Recently moved to area. 6 -- Other reason -- Please specify	7.	1 2 3 4 5 6 (Specify) <u>7</u> _____ _____	
Mark box or ask: 8. The LAST time -- saw a doctor was it at a clinic, a health center, a hospital, a doctor's office, or some other place? IF HOSPITAL: Is this an outpatient clinic or the emergency room? IF CLINIC: Is this a hospital outpatient clinic, a company clinic, or some other kind of clinic?	8.	<input type="checkbox"/> 1 2 week DV in CI (NP) <input type="checkbox"/> 1 Doctor's office (group practice or doctor's clinic) <input type="checkbox"/> 2 Hospital outpatient clinic <input type="checkbox"/> 3 Home <input type="checkbox"/> 4 Hospital emergency room <input type="checkbox"/> 5 Company or industry clinic <input type="checkbox"/> 6 Health center <input checked="" type="checkbox"/> 7 Other (Specify) <u>7</u>	

1 Y 2 N (7)		1. 1 Y 2 N (7)		1 Y 2 N (7)		1. 1 Y 2 N (7)		1 Y 2 N (7)					
1 <input type="checkbox"/> Doctor's office (group practice or doctor's clinic) 2 <input type="checkbox"/> Hospital outpatient clinic 3 <input type="checkbox"/> Home 4 <input type="checkbox"/> Hospital emergency room 5 <input type="checkbox"/> Company or industry clinic 6 <input type="checkbox"/> Health center 7 <input type="checkbox"/> Other (Specify) <u> </u>		2.		1 <input type="checkbox"/> Doctor's office (group practice or doctor's clinic) 2 <input type="checkbox"/> Hospital outpatient clinic 3 <input type="checkbox"/> Home 4 <input type="checkbox"/> Hospital emergency room 5 <input type="checkbox"/> Company or industry clinic 6 <input type="checkbox"/> Health center 7 <input type="checkbox"/> Other (Specify) <u> </u>		1 <input type="checkbox"/> Doctor's office (group practice or doctor's clinic) 2 <input type="checkbox"/> Hospital outpatient clinic 3 <input type="checkbox"/> Home 4 <input type="checkbox"/> Hospital emergency room 5 <input type="checkbox"/> Company or industry clinic 6 <input type="checkbox"/> Health center 7 <input type="checkbox"/> Other (Specify) <u> </u>		2.		1 <input type="checkbox"/> Doctor's office (group practice or doctor's clinic) 2 <input type="checkbox"/> Hospital outpatient clinic 3 <input type="checkbox"/> Home 4 <input type="checkbox"/> Hospital emergency room 5 <input type="checkbox"/> Company or industry clinic 6 <input type="checkbox"/> Health center 7 <input type="checkbox"/> Other (Specify) <u> </u>		1 <input type="checkbox"/> Doctor's office (group practice or doctor's clinic) 2 <input type="checkbox"/> Hospital outpatient clinic 3 <input type="checkbox"/> Home 4 <input type="checkbox"/> Hospital emergency room 5 <input type="checkbox"/> Company or industry clinic 6 <input type="checkbox"/> Health center 7 <input type="checkbox"/> Other (Specify) <u> </u>	
1 Y 2 N		3. 1 Y 2 N		1 Y 2 N		3. 1 Y 2 N		1 Y 2 N					
City _____ County _____ State _____		4. City _____ County _____ State _____		City _____ County _____ State _____		4. City _____ County _____ State _____		City _____ County _____ State _____					
_____ Minutes		5. _____ Minutes		_____ Minutes		5. _____ Minutes		_____ Minutes					
1 <input type="checkbox"/> Same place (NP) 2 <input type="checkbox"/> Other place (B)		6. 1 <input type="checkbox"/> Same place (NP) 2 <input type="checkbox"/> Other place (B)		1 <input type="checkbox"/> Same place (NP) 2 <input type="checkbox"/> Other place (B)		6. 1 <input type="checkbox"/> Same place (NP) 2 <input type="checkbox"/> Other place (B)		1 <input type="checkbox"/> Same place (NP) 2 <input type="checkbox"/> Other place (B)					
7. 1 2 3 4 5 6 (Specify) <u> </u>		7. 1 2 3 4 5 6 (Specify) <u> </u>		1 2 3 4 5 6 (Specify) <u> </u>		7. 1 2 3 4 5 6 (Specify) <u> </u>		1 2 3 4 5 6 (Specify) <u> </u>					
<input type="checkbox"/> 2 week DV in CI (NP) 1 <input type="checkbox"/> Doctor's office (group practice or doctor's clinic) 2 <input type="checkbox"/> Hospital outpatient clinic 3 <input type="checkbox"/> Home 4 <input type="checkbox"/> Hospital emergency room 5 <input type="checkbox"/> Company or industry clinic 6 <input type="checkbox"/> Health center 7 <input type="checkbox"/> Other (Specify) <u> </u>		8. <input type="checkbox"/> 2 week DV in CI (NP) 1 <input type="checkbox"/> Doctor's office (group practice or doctor's clinic) 2 <input type="checkbox"/> Hospital outpatient clinic 3 <input type="checkbox"/> Home 4 <input type="checkbox"/> Hospital emergency room 5 <input type="checkbox"/> Company or industry clinic 6 <input type="checkbox"/> Health center 7 <input type="checkbox"/> Other (Specify) <u> </u>		<input type="checkbox"/> 2 week DV in CI (NP) 1 <input type="checkbox"/> Doctor's office (group practice or doctor's clinic) 2 <input type="checkbox"/> Hospital outpatient clinic 3 <input type="checkbox"/> Home 4 <input type="checkbox"/> Hospital emergency room 5 <input type="checkbox"/> Company or industry clinic 6 <input type="checkbox"/> Health center 7 <input type="checkbox"/> Other (Specify) <u> </u>		8. <input type="checkbox"/> 2 week DV in CI (NP) 1 <input type="checkbox"/> Doctor's office (group practice or doctor's clinic) 2 <input type="checkbox"/> Hospital outpatient clinic 3 <input type="checkbox"/> Home 4 <input type="checkbox"/> Hospital emergency room 5 <input type="checkbox"/> Company or industry clinic 6 <input type="checkbox"/> Health center 7 <input type="checkbox"/> Other (Specify) <u> </u>		<input type="checkbox"/> 2 week DV in CI (NP) 1 <input type="checkbox"/> Doctor's (group practice or doctor's clinic) 2 <input type="checkbox"/> Hospital outpatient clinic 3 <input type="checkbox"/> Home 4 <input type="checkbox"/> Hospital emergency room 5 <input type="checkbox"/> Company or industry clinic 6 <input type="checkbox"/> Health center 7 <input type="checkbox"/> Other (Specify) <u> </u>					

BLOOD DONOR		D	1 <input type="checkbox"/> 17-64 (1) 2 <input type="checkbox"/> Other (NP)																																																								
1a. During the past 12 months, has -- given or sold any blood to a blood bank, a hospital, the Red Cross, or anywhere else?		1a.	1 Y 2 N (2)																																																								
b. During the past 12 months, how many times has -- given or sold blood? Hand Card B For each time reported in 1b, ask:		b.	_____ Times																																																								
c. Which of the reasons listed on this card best describes why -- gave blood (the last time/the time before that, etc.)? Please give me the number of the reason. 1 - Sold blood. 2 - Replaced blood used by a relative or friend. 3 - Unpaid donation to a blood bank to assure free blood for this family in the future. 4 - Other unpaid blood donation which was NOT for replacement and did NOT assure free blood for this family in the future. 5 - Some other reason - Specify		c.	<table border="0" style="width: 100%;"> <tr> <td style="width: 5%;">(Last time)</td> <td style="width: 10%;">1</td> <td style="width: 10%;">2</td> <td style="width: 10%;">3</td> <td style="width: 10%;">4</td> <td style="width: 10%;">5</td> <td style="width: 10%; text-align: right;">7</td> </tr> <tr> <td></td> <td colspan="5" style="text-align: center;">(Specify)</td> <td></td> </tr> <tr> <td></td> <td>1</td> <td>2</td> <td>3</td> <td>4</td> <td>5</td> <td style="text-align: right;">7</td> </tr> <tr> <td></td> <td colspan="5" style="text-align: center;">(Specify)</td> <td></td> </tr> <tr> <td></td> <td>1</td> <td>2</td> <td>3</td> <td>4</td> <td>5</td> <td style="text-align: right;">7</td> </tr> <tr> <td></td> <td colspan="5" style="text-align: center;">(Specify)</td> <td></td> </tr> <tr> <td></td> <td>1</td> <td>2</td> <td>3</td> <td>4</td> <td>5</td> <td style="text-align: right;">7</td> </tr> <tr> <td></td> <td colspan="5" style="text-align: center;">(Specify)</td> <td></td> </tr> </table>	(Last time)	1	2	3	4	5	7		(Specify)							1	2	3	4	5	7		(Specify)							1	2	3	4	5	7		(Specify)							1	2	3	4	5	7		(Specify)					
(Last time)	1	2	3	4	5	7																																																					
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	(Specify)																																																										
	1	2	3	4	5	7																																																					
	(Specify)																																																										
2a. Has -- EVER given or sold blood to a blood bank, a hospital, the Red Cross or anywhere else?		2a.	1 Y 2 N (4) 9 DK (4)																																																								
b. About how long has it been since -- LAST gave or sold blood? (Was it more than 5 years or less than 5 years?) (Was it more than 10 years or less than 10 years?)		b.	_____ Years 99 <input type="checkbox"/> DK																																																								
3. About how many times has -- EVER given or sold blood?		3.	_____ Times 99 <input type="checkbox"/> DK																																																								
4. Has -- EVER been asked in person, either face-to-face or over the telephone, to give or sell blood?		4.	1 Y 2 N 9 DK																																																								
R1 Q's 1-4	For persons aged 17-64, show who responded for (or was present during the asking of) Questions 1-4. If persons responded for self, show whether entirely or partly.	R1	1 <input type="checkbox"/> Responded for self-entirely 2 <input type="checkbox"/> Responded for self-partly Person _____ was respondent																																																								
FOOTNOTES																																																											

<input type="checkbox"/> 17-64 (1) <input type="checkbox"/> Other (NP)	D	<input type="checkbox"/> 17-64 (1) <input type="checkbox"/> Other (NP)	<input type="checkbox"/> 17-64 (1) <input type="checkbox"/> Other (NP)	D	<input type="checkbox"/> 17-64 (1) <input type="checkbox"/> Other (NP)	<input type="checkbox"/> 17-64 (1) <input type="checkbox"/> Other (NP)
1 Y 2 N (2)	1a.	1 Y 2 N (2)	1 Y 2 N (2)	1a.	1 Y 2 N (2)	1 Y 2 N (2)
_____ Times	b.	_____ Times	_____ Times	b.	_____ Times	_____ Times
(Last time) 1 2 3 4 5 $\overline{\text{P}}$ 1 _____ (Specify) 1 2 3 4 5 $\overline{\text{P}}$ 2 _____ (Specify) 1 2 3 4 5 $\overline{\text{P}}$ 3 _____ (Specify) 1 2 3 4 5 $\overline{\text{P}}$ 4 _____ (Specify)	c.	(Last time) 1 2 3 4 5 $\overline{\text{P}}$ 1 _____ (Specify) 1 2 3 4 5 $\overline{\text{P}}$ 2 _____ (Specify) 1 2 3 4 5 $\overline{\text{P}}$ 3 _____ (Specify) 1 2 3 4 5 $\overline{\text{P}}$ 4 _____ (Specify)	(Last time) 1 2 3 4 5 $\overline{\text{P}}$ 1 _____ (Specify) 1 2 3 4 5 $\overline{\text{P}}$ 2 _____ (Specify) 1 2 3 4 5 $\overline{\text{P}}$ 3 _____ (Specify) 1 2 3 4 5 $\overline{\text{P}}$ 4 _____ (Specify)	c.	(Last time) 1 2 3 4 5 $\overline{\text{P}}$ 1 _____ (Specify) 1 2 3 4 5 $\overline{\text{P}}$ 2 _____ (Specify) 1 2 3 4 5 $\overline{\text{P}}$ 3 _____ (Specify) 1 2 3 4 5 $\overline{\text{P}}$ 4 _____ (Specify)	(Last time) 1 2 3 4 5 $\overline{\text{P}}$ 1 _____ (Specify) 1 2 3 4 5 $\overline{\text{P}}$ 2 _____ (Specify) 1 2 3 4 5 $\overline{\text{P}}$ 3 _____ (Specify) 1 2 3 4 5 $\overline{\text{P}}$ 4 _____ (Specify)
1 Y 2 N (4) 9 DK (4)	2a.	1 Y 2 N (4) 9 DK (4)	1 Y 2 N (4) 9 DK (4)	2a.	1 Y 2 N (4) 9 DK (4)	1 Y 2 N (4) 9 DK (4)
_____ Years 99 <input type="checkbox"/> DK	b.	_____ Years 99 <input type="checkbox"/> DK	_____ Years 99 <input type="checkbox"/> DK	b.	_____ Years 99 <input type="checkbox"/> DK	_____ Years 99 <input type="checkbox"/> DK
_____ Times 99 <input type="checkbox"/> DK	3.	_____ Times 99 <input type="checkbox"/> DK	_____ Times 99 <input type="checkbox"/> DK	3.	_____ Times 99 <input type="checkbox"/> DK	_____ Times 99 <input type="checkbox"/> DK
1 Y 2 N 9 DK	4.	1 Y 2 N 9 DK	1 Y 2 N 9 DK	4.	1 Y 2 N 9 DK	1 Y 2 N 9 DK
1 <input type="checkbox"/> Responded for self-entirely 2 <input type="checkbox"/> Responded for self-partly Person ___ was respondent	R1	1 <input type="checkbox"/> Responded for self-entirely 2 <input type="checkbox"/> Responded for self-partly Person ___ was respondent	1 <input type="checkbox"/> Responded for self-entirely 2 <input type="checkbox"/> Responded for self-partly Person ___ was respondent	R1	1 <input type="checkbox"/> Responded for self-entirely 2 <input type="checkbox"/> Responded for self-partly Person ___ was respondent	1 <input type="checkbox"/> Responded for self-entirely 2 <input type="checkbox"/> Responded for self-partly Person ___ was respondent

FOOTNOTES

IMMUNIZATION PAGE		5	1 <input type="checkbox"/> Under 17 2 <input type="checkbox"/> 17+ (NP)
1a. Since the first of (month) 1978, has -- received a DPT shot?— A DPT shot is to prevent diphtheria, tetanus, and pertussis or whooping cough.		1a.	1 Y 2 N (2) 9 DK (2)
b. When did -- receive the DPT shot?		b.	Mo. _____ Date _____
c. Where did -- receive the DPT shot — at a clinic, hospital, school, doctor's office, or some other place? If clinic: Was it a hospital outpatient clinic, a company clinic, a public health clinic or some other kind of clinic? 1 — Doctor's office (Group practice or doctor's clinic) 3 — Public Health Clinic 8 — Other — Specify 2 — Hospital outpatient clinic or emergency room 4 — School		c.	1 2 3 4 8 7 (Specify) _____
2a. Since the first of (month) 1978, has -- received a polio shot or polio vaccine by mouth?		2a.	1 Y 2 N (3) 9 DK (3)
b. Was it a shot or did -- receive the vaccine by mouth?		b.	1 <input type="checkbox"/> Vaccine by mouth 2 <input type="checkbox"/> Shot
c. When did -- receive the polio (vaccine/shot)?		c.	Mo. _____ Date _____
d. Where did -- receive the polio (vaccine/shot) — at a clinic, hospital, school, doctor's office, or some other place? If clinic: Was it a hospital outpatient clinic, a company clinic, a public health clinic or some other kind of clinic? 1 — Doctor's office (Group practice or doctor's clinic) 3 — Public Health Clinic 8 — Other — Specify 2 — Hospital outpatient clinic or emergency room 4 — School		d.	1 2 3 4 8 7 (Specify) _____
3a. Since the first of (month) 1978, has -- received a mumps shot?		3a.	1 Y 2 N (4) 9 DK (4)
b. When did -- receive the mumps shot?		b.	Mo. _____ Date _____
c. Where did -- receive the mumps shot — at a clinic, hospital, school, doctor's office, or some other place? If clinic: Was it a hospital outpatient clinic, a company clinic, a public health clinic or some other kind of clinic? 1 — Doctor's office (Group practice or doctor's clinic) 3 — Public Health Clinic 8 — Other — Specify 2 — Hospital outpatient clinic or emergency room 4 — School		c.	1 2 3 4 8 7 (Specify) _____
There are two basic types of measles for which shots can be received: German measles, sometimes known as Rubella or 3-day measles AND Red measles, sometimes known as 8-day measles.			
4a. Since the first of (month) 1978, has -- received any kind of measles shot?		4a.	1 Y 2 N (NP) 9 DK (NP)
b. What types of measles shots did -- receive? (Was it for German measles, sometimes known as Rubella or 3-day measles, OR was it for Red measles, sometimes known as 8-day measles, OR did -- receive shots for both?)		b.	1 <input type="checkbox"/> Both Red and German (6) 2 <input type="checkbox"/> Red measles (8-day) only 3 <input type="checkbox"/> German measles (Rubella, 3-day) only 9 <input type="checkbox"/> DK kind
5a. When did -- receive the measles shot?		5a.	Mo. _____ Date _____
b. Where did -- receive the measles shot — at a clinic, hospital, school, doctor's office, or some other place? If clinic: Was it a hospital outpatient clinic, a company clinic, a public health clinic or some other kind of clinic? 1 — Doctor's office (Group practice or doctor's clinic) 3 — Public Health Clinic 8 — Other — Specify 2 — Hospital outpatient clinic or emergency room 4 — School		b.	1 2 3 4 8 7 } (NP) (Specify) _____
6a. When did -- receive the shot for Red measles, sometimes known as 8-day measles?		6a.	Mo. _____ Date _____
b. Where did -- receive this shot — at a clinic, hospital, school, doctor's office, or some other place? If clinic: Was it a hospital outpatient clinic, a company clinic, a public health clinic or some other kind of clinic? 1 — Doctor's office (Group practice or doctor's clinic) 3 — Public Health Clinic 8 — Other — Specify 2 — Hospital outpatient clinic or emergency room 4 — School		b.	1 2 3 4 8 7 (Specify) _____
7a. When did -- receive the shot for German measles, sometimes known as Rubella or 3-day measles?		7a.	Mo. _____ Date _____
b. Where did -- receive this shot — at a clinic, hospital, school, doctor's office, or some other place? If clinic: Was it a hospital outpatient clinic, a company clinic, a public health clinic or some other kind of clinic? 1 — Doctor's office (Group practice or doctor's clinic) 3 — Public Health Clinic 8 — Other — Specify 2 — Hospital outpatient clinic or emergency room 4 — School		b.	1 2 3 4 8 7 (Specify) _____

1 <input type="checkbox"/> Under 17 2 <input type="checkbox"/> 17 + (NP)	S	1 <input type="checkbox"/> Under 17 2 <input type="checkbox"/> 17 + (NP)	1 <input type="checkbox"/> Under 17 2 <input type="checkbox"/> 17 + (NP)	S	1 <input type="checkbox"/> Under 17 2 <input type="checkbox"/> 17 + (NP)	1 <input type="checkbox"/> Under 17 2 <input type="checkbox"/> 17 + (NP)
1 Y 2 N (2) 9 DK (2)	1a.	1 Y 2 N (2) 9 DK (2)	1 Y 2 N (2) 9 DK (2)	1a.	1 Y 2 N (2) 9 DK (2)	1 Y 2 N (2) 9 DK (2)
Mo. _____ Date _____	b.	Mo. _____ Date _____	Mo. _____ Date _____	b.	Mo. _____ Date _____	Mo. _____ Date _____
1 2 3 4 8 7 _____ (Specify)	c.	1 2 3 4 8 7 _____ (Specify)	1 2 3 4 8 7 _____ (Specify)	c.	1 2 3 4 8 7 _____ (Specify)	1 2 3 4 8 7 _____ (Specify)
1 Y 2 N (3) 9 DK (3)	2a.	1 Y 2 N (3) 9 DK (3)	1 Y 2 N (3) 9 DK (3)	2a.	1 Y 2 N (3) 9 DK (3)	1 Y 2 N (3) 9 DK (3)
1 <input type="checkbox"/> Vaccine by mouth 2 <input type="checkbox"/> Shot	b.	1 <input type="checkbox"/> Vaccine by mouth 2 <input type="checkbox"/> Shot	1 <input type="checkbox"/> Vaccine by mouth 2 <input type="checkbox"/> Shot	b.	1 <input type="checkbox"/> Vaccine by mouth 2 <input type="checkbox"/> Shot	1 <input type="checkbox"/> Vaccine by mouth 2 <input type="checkbox"/> Shot
Mo. _____ Date _____	c.	Mo. _____ Date _____	Mo. _____ Date _____	c.	Mo. _____ Date _____	Mo. _____ Date _____
1 2 3 4 8 7 _____ (Specify)	d.	1 2 3 4 8 7 _____ (Specify)	1 2 3 4 8 7 _____ (Specify)	d.	1 2 3 4 8 7 _____ (Specify)	1 2 3 4 8 7 _____ (Specify)
1 Y 2 N (4) 9 DK (4)	3a.	1 Y 2 N (4) 9 DK (4)	1 Y 2 N (4) 9 DK (4)	3a.	1 Y 2 N (4) 9 DK (4)	1 Y 2 N (4) 9 DK (4)
Mo. _____ Date _____	b.	Mo. _____ Date _____	Mo. _____ Date _____	b.	Mo. _____ Date _____	Mo. _____ Date _____
1 2 3 4 8 7 _____ (Specify)	c.	1 2 3 4 8 7 _____ (Specify)	1 2 3 4 8 7 _____ (Specify)	c.	1 2 3 4 8 7 _____ (Specify)	1 2 3 4 8 7 _____ (Specify)
1 Y 2 N (NP) 9 DK (NP)	4a.	1 Y 2 N (NP) 9 DK (NP)	1 Y 2 N (NP) 9 DK (NP)	4a.	1 Y 2 N (NP) 9 DK (NP)	1 Y 2 N (NP) 9 DK (NP)
1 <input type="checkbox"/> Both Red and German (6) 2 <input type="checkbox"/> Red measles (8-day) only 3 <input type="checkbox"/> German measles (Rubella, 3-day) only 9 <input type="checkbox"/> DK kind	b.	1 <input type="checkbox"/> Both Red and German (6) 2 <input type="checkbox"/> Red measles (8-day) only 3 <input type="checkbox"/> German measles (Rubella, 3-day) only 9 <input type="checkbox"/> DK kind	1 <input type="checkbox"/> Both Red and German (6) 2 <input type="checkbox"/> Red measles (8-day) only 3 <input type="checkbox"/> German measles (Rubella, 3-day) only 9 <input type="checkbox"/> DK kind	b.	1 <input type="checkbox"/> Both Red and German (6) 2 <input type="checkbox"/> Red measles (8-day) only 3 <input type="checkbox"/> German measles (Rubella, 3-day) only 9 <input type="checkbox"/> DK kind	1 <input type="checkbox"/> Both Red and German (6) 2 <input type="checkbox"/> Red measles (8-day) only 3 <input type="checkbox"/> German measles (Rubella, 3-day) only 9 <input type="checkbox"/> DK kind
Mo. _____ Date _____	5a.	Mo. _____ Date _____	Mo. _____ Date _____	5a.	Mo. _____ Date _____	Mo. _____ Date _____
1 2 3 4 8 7 } (NP) _____ (Specify)	b.	1 2 3 4 8 7 } (NP) _____ (Specify)	1 2 3 4 8 7 } (NP) _____ (Specify)	b.	1 2 3 4 8 7 } (NP) _____ (Specify)	1 2 3 4 8 7 } (NP) _____ (Specify)
Mo. _____ Date _____	6a.	Mo. _____ Date _____	Mo. _____ Date _____	6a.	Mo. _____ Date _____	Mo. _____ Date _____
1 2 3 4 8 7 _____ (Specify)	b.	1 2 3 4 8 7 _____ (Specify)	1 2 3 4 8 7 _____ (Specify)	b.	1 2 3 4 8 7 _____ (Specify)	1 2 3 4 8 7 _____ (Specify)
Mo. _____ Date _____	7a.	Mo. _____ Date _____	Mo. _____ Date _____	7a.	Mo. _____ Date _____	Mo. _____ Date _____
1 2 3 4 8 7 _____ (Specify)	b.	1 2 3 4 8 7 _____ (Specify)	1 2 3 4 8 7 _____ (Specify)	b.	1 2 3 4 8 7 _____ (Specify)	1 2 3 4 8 7 _____ (Specify)

Mark box or ask: 1. Did -- ever serve in the Armed Forces of the United States?	<input type="checkbox"/> Under 17 (NP) 1. 1 Y 2 N (NP)
2a. In which branch or branches of the Armed Forces did --serve? Mark all that apply ----- If only one entry in 2a, mark corresponding box; otherwise ask: b. In which did -- serve most recently? ----- c. When did -- serve in the <u>(entry in 2b)</u> ? Circle code in descending order of priority. Thus if person served in Vietnam and in Korea, circle VN. Vietnam Era (Aug. '64 to April '75) VN Korean War (June '50-Jan.'55). KW World War II (Sept. '40-July '47) WW II World War I (April '17-Nov. '18) WW I Post Vietnam (May '75 to present) PVN Other Service (all other periods). OS ----- d. In what year did -- leave the <u>(entry in 2b)</u>? ----- e. How many total years did -- serve on active duty in the <u>(entries in 2a)</u>? ----- f. Does -- have a service connected disability?	2a. 1 <input type="checkbox"/> Air Force 2 <input type="checkbox"/> Army 3 <input type="checkbox"/> Navy 4 <input type="checkbox"/> Marines 5 <input type="checkbox"/> Coast Guard b. 1 <input type="checkbox"/> Air Force 2 <input type="checkbox"/> Army 3 <input type="checkbox"/> Navy 4 <input type="checkbox"/> Marines 5 <input type="checkbox"/> Coast Guard c. 1 VN 5 PVN 2 KW 6 OS 3 WW II 9 DK 4 WW I d. 19 _____ (Year) e. _____ Years f. 1 Y 2 N
3a. Does -- get retirement payments or a pension from the <u>(entry in 2b)</u> or the Veterans Administration? ----- b. From which does -- get the retirement payments or the pension?	3a. Y 5 N (NP) b. 1 <input type="checkbox"/> Service 2 <input type="checkbox"/> VA
FOOTNOTES:	

<input type="checkbox"/> Under 17 (NP) 1 Y 2 N (NP)		<input type="checkbox"/> Under 17 (NP) 1 Y 2 N (NP)		<input type="checkbox"/> Under 17 (NP) 1 Y 2 N (NP)		<input type="checkbox"/> Under 17 (NP) 1 Y 2 N (NP)		<input type="checkbox"/> Under 17 (NP) 1 Y 2 N (NP)	
1 <input type="checkbox"/> Air Force		2a.	1 <input type="checkbox"/> Air Force	1 <input type="checkbox"/> Air Force		2a.	1 <input type="checkbox"/> Air Force	1 <input type="checkbox"/> Air Force	
2 <input type="checkbox"/> Army			2 <input type="checkbox"/> Army	2 <input type="checkbox"/> Army			2 <input type="checkbox"/> Army	2 <input type="checkbox"/> Army	
3 <input type="checkbox"/> Navy			3 <input type="checkbox"/> Navy	3 <input type="checkbox"/> Navy			3 <input type="checkbox"/> Navy	3 <input type="checkbox"/> Navy	
4 <input type="checkbox"/> Marines			4 <input type="checkbox"/> Marines	4 <input type="checkbox"/> Marines			4 <input type="checkbox"/> Marines	4 <input type="checkbox"/> Marines	
5 <input type="checkbox"/> Coast Guard			5 <input type="checkbox"/> Coast Guard	5 <input type="checkbox"/> Coast Guard			5 <input type="checkbox"/> Coast Guard	5 <input type="checkbox"/> Coast Guard	

1 <input type="checkbox"/> Air Force		b.	1 <input type="checkbox"/> Air Force	1 <input type="checkbox"/> Air Force		b.	1 <input type="checkbox"/> Air Force	1 <input type="checkbox"/> Air Force	
2 <input type="checkbox"/> Army			2 <input type="checkbox"/> Army	2 <input type="checkbox"/> Army			2 <input type="checkbox"/> Army	2 <input type="checkbox"/> Army	
3 <input type="checkbox"/> Navy			3 <input type="checkbox"/> Navy	3 <input type="checkbox"/> Navy			3 <input type="checkbox"/> Navy	3 <input type="checkbox"/> Navy	
4 <input type="checkbox"/> Marines			4 <input type="checkbox"/> Marines	4 <input type="checkbox"/> Marines			4 <input type="checkbox"/> Marines	4 <input type="checkbox"/> Marines	
5 <input type="checkbox"/> Coast Guard			5 <input type="checkbox"/> Coast Guard	5 <input type="checkbox"/> Coast Guard			5 <input type="checkbox"/> Coast Guard	5 <input type="checkbox"/> Coast Guard	

1 VN 5 PVN		c.	1 VN 5 PVN	1 VN 5 PVN		c.	1 VN 5 PVN	1 VN 5 PVN	
2 KW 6 OS			2 KW 6 OS	2 KW 6 OS			2 KW 6 OS	2 KW 6 OS	
3 WW II 9 DK			3 WW II 9 DK	3 WW II 9 DK			3 WW II 9 DK	3 WW II 9 DK	
4 WW I			4 WW I	4 WW I			4 WW I	4 WW I	

19 _____		d.	19 _____	19 _____		d.	19 _____	19 _____	
(Year)			(Year)	(Year)			(Year)	(Year)	

_____ Years		e.	_____ Years	_____ Years		e.	_____ Years	_____ Years	

1 Y 2 N		f.	1 Y 2 N	1 Y 2 N		f.	1 Y 2 N	1 Y 2 N	

Y 5 N (NP)		3a.	Y 5 N (NP)	Y 5 N (NP)		3a.	Y 5 N (NP)	Y 5 N (NP)	
1 <input type="checkbox"/> Service 2 <input type="checkbox"/> VA		b.	1 <input type="checkbox"/> Service 2 <input type="checkbox"/> VA	1 <input type="checkbox"/> Service 2 <input type="checkbox"/> VA		b.	1 <input type="checkbox"/> Service 2 <input type="checkbox"/> VA	1 <input type="checkbox"/> Service 2 <input type="checkbox"/> VA	

FOOTNOTES

4a. Does anyone in this family receive assistance through the "Aid to Families with Dependent Children" Program, sometimes called "AFDC" or "ADC"?	Y N (5)		
b. Which (other) family members are included in the AFDC assistance payment? Mark "AFDC" box in person's column.		4b.	1 <input type="checkbox"/> AFDC
c. Are any other family members included in this program?	Y (Reask 4b and c) N		
5a. Does anyone in this family receive the "Supplemental Security Income" or "SSI" gold-colored check?	Y N (6)		
b. Who receives this check? Mark "SSI" box in person's column.		5b.	1 <input type="checkbox"/> SSI
c. Anyone else?	Y (Reask 5b and c) N		
6a. There is a national program called Medicaid which pays for health care for persons in need. (In this State it is also called _____.) During the past 12 months, has anyone in this family received health care which has been or will be paid for by Medicaid (or _____)?	Y N (7)		
b. Who was this? Mark "Medicaid" box in person's column.		6b.	1 <input type="checkbox"/> Medicaid
c. Anyone else?	Y (Reask 6b and c) N		
7a. Does anyone in the family now have a Medicaid (or _____) card which looks like this? Show Medicaid card.	Y N (8)		
b. Who is this? Mark "Card" box in person's column.		7b.	1 <input type="checkbox"/> Card
c. Anyone else?	Y (Reask 7b and c) N		
If "Card," ask: d. May I please see --'s (and --) card(s)? Mark appropriate box(es) in person's column.		d.	<input type="checkbox"/> Medicaid card seen <input checked="" type="checkbox"/> 1 <input type="checkbox"/> Current 2 <input type="checkbox"/> Expired 3 <input type="checkbox"/> No card seen 4 <input type="checkbox"/> Other card seen <input checked="" type="checkbox"/> _____ (Specify)
8a. During the past 12 months, has anyone in the family received health care provided or paid for by the Veterans Administration?	Y N (9)		
b. Who was this? Mark "VA" box in person's column.		8b.	1 <input type="checkbox"/> VA
c. Anyone else?	Y (Reask 8b and c) N		
FOOTNOTES			

<input type="checkbox"/> AFDC	4b.	<input type="checkbox"/> AFDC	<input type="checkbox"/> AFDC	4b.	<input type="checkbox"/> AFDC	<input type="checkbox"/> AFDC
<input type="checkbox"/> SSI	5b.	<input type="checkbox"/> SSI	<input type="checkbox"/> SSI	5b.	<input type="checkbox"/> SSI	<input type="checkbox"/> SSI
<input type="checkbox"/> Medicaid	6b.	<input type="checkbox"/> Medicaid	<input type="checkbox"/> Medicaid	6b.	<input type="checkbox"/> Medicaid	<input type="checkbox"/> Medicaid
<input type="checkbox"/> Card	7b.	<input type="checkbox"/> Card	<input type="checkbox"/> Card	7b.	<input type="checkbox"/> Card	<input type="checkbox"/> Card
<input type="checkbox"/> Medicaid card seen <input checked="" type="checkbox"/> 1 <input type="checkbox"/> Current 2 <input type="checkbox"/> Expired 3 <input type="checkbox"/> No card seen 8 <input type="checkbox"/> Other card seen <input checked="" type="checkbox"/> _____ (Specify)	d.	<input type="checkbox"/> Medicaid card seen <input checked="" type="checkbox"/> 1 <input type="checkbox"/> Current 2 <input type="checkbox"/> Expired 3 <input type="checkbox"/> No card seen 8 <input type="checkbox"/> Other card seen <input checked="" type="checkbox"/> _____ (Specify)	<input type="checkbox"/> Medicaid card seen <input checked="" type="checkbox"/> 1 <input type="checkbox"/> Current 2 <input type="checkbox"/> Expired 3 <input type="checkbox"/> No card seen 8 <input type="checkbox"/> Other card seen <input checked="" type="checkbox"/> _____ (Specify)	d.	<input type="checkbox"/> Medicaid card seen <input checked="" type="checkbox"/> 1 <input type="checkbox"/> Current 2 <input type="checkbox"/> Expired 3 <input type="checkbox"/> No card seen 8 <input type="checkbox"/> Other card seen <input checked="" type="checkbox"/> _____ (Specify)	<input type="checkbox"/> Medicaid card seen <input checked="" type="checkbox"/> 1 <input type="checkbox"/> Current 2 <input type="checkbox"/> Expired 3 <input type="checkbox"/> No card seen 8 <input type="checkbox"/> Other card seen <input checked="" type="checkbox"/> _____ (Specify)
<input type="checkbox"/> VA	8b.	<input type="checkbox"/> VA	<input type="checkbox"/> VA	8b.	<input type="checkbox"/> VA	<input type="checkbox"/> VA
FOOTNOTES						

<p>Mark box or ask:</p> <p>9a. About how tall is -- without shoes?</p> <p>-----</p> <p>b. About how much does -- weigh without shoes?</p>	<p>9a.</p> <p>b.</p>	<p><input type="checkbox"/> Under 17 (NP)</p> <p>____ Feet ____ Inches</p> <p>____ Pounds</p>
<p>Mark box or ask:</p> <p>10a. What is the highest grade or year -- attended in school?</p> <p>-----</p> <p>b. Did -- finish the -- grade (year)?</p>	<p>10a.</p> <p>b.</p>	<p><input type="checkbox"/> Under 17 (NP)</p> <p>00 <input type="checkbox"/> None (NP)</p> <p>Elem: 1 2 3 4 5 6 7 8</p> <p>High: 9 10 11 12</p> <p>College: 1 2 3 4 5 6+</p> <p>1 Y 2 N</p>
<p>Hand Card R</p> <p>Mark box or ask:</p> <p>11a. Please give me the number of the group or groups which describes --'s racial background.</p> <p>Circle all that apply.</p> <p>1 - Alaskan Native or American Indian</p> <p>2 - Asian or Pacific Islander</p> <p>3 - Black</p> <p>4 - White</p> <p>5 - Another group not listed - Please specify.</p> <p>-----</p> <p>If multiple entries ask:</p> <p>b. Which of those groups, that is, (entries in 11a) would you say BEST describes --'s racial background?</p>	<p>11a.</p> <p>b.</p>	<p><input type="checkbox"/> Under 17 (NP)</p> <p>1 2 3 4 5 <input checked="" type="checkbox"/></p> <p>_____ (Specify)</p> <p>1 2 3 4 5 <input checked="" type="checkbox"/></p> <p>_____ (Specify)</p>
<p>Hand Card O</p> <p>Mark box or ask:</p> <p>12a. Are any of those groups --'s national origin or ancestry? (Where did --'s ancestors come from?)</p> <p>-----</p> <p>b. Please give me the number of the group.</p> <p>Circle all that apply.</p> <p>1 - Puerto Rican</p> <p>2 - Cuban</p> <p>3 - Mexican</p> <p>4 - Mexicano</p> <p>5 - Mexican-American</p> <p>6 - Chicano</p> <p>7 - Other Latin American</p> <p>8 - Other Spanish</p>	<p>12a.</p> <p>b.</p>	<p><input type="checkbox"/> Under 17 (NP)</p> <p>1 Y 2 N (NP)</p> <p>1 2 3 4 5 6 7 8</p>
<p>FOOTNOTES</p>		

<input type="checkbox"/> Under 17 (NP) _____ Feet _____ Inches _____ Pounds	9a.	<input type="checkbox"/> Under 17 (NP) _____ Feet _____ Inches _____ Pounds	<input type="checkbox"/> Under 17 (NP) _____ Feet _____ Inches _____ Pounds	9a.	<input type="checkbox"/> Under 17 (NP) _____ Feet _____ Inches _____ Pounds	<input type="checkbox"/> Under 17 (NP) _____ Feet _____ Inches _____ Pounds
<input type="checkbox"/> Under 17 (NP) <input type="checkbox"/> None (NP) Elem: 1 2 3 4 5 6 7 8 High: 9 10 11 12 College: 1 2 3 4 5 6+ 1 Y 2 N	10a.	<input type="checkbox"/> Under 17 (NP) <input type="checkbox"/> None (NP) Elem: 1 2 3 4 5 6 7 8 High: 9 10 11 12 College: 1 2 3 4 5 6+ 1 Y 2 N	<input type="checkbox"/> Under 17 (NP) <input type="checkbox"/> None (NP) Elem: 1 2 3 4 5 6 7 8 High: 9 10 11 12 College: 1 2 3 4 5 6+ 1 Y 2 N	10a.	<input type="checkbox"/> Under 17 (NP) <input type="checkbox"/> None (NP) Elem: 1 2 3 4 5 6 7 8 High: 9 10 11 12 College: 1 2 3 4 5 6+ 1 Y 2 N	<input type="checkbox"/> Under 17 (NP) <input type="checkbox"/> None (NP) Elem: 1 2 3 4 5 6 7 8 High: 9 10 11 12 College: 1 2 3 4 5 6- 1 Y 2 N
<input type="checkbox"/> Under 17 (NP) 1 2 3 4 5 7 _____ (Specify)	11a.	<input type="checkbox"/> Under 17 (NP) 1 2 3 4 5 7 _____ (Specify)	<input type="checkbox"/> Under 17 (NP) 1 2 3 4 5 7 _____ (Specify)	11a.	<input type="checkbox"/> Under 17 (NP) 1 2 3 4 5 7 _____ (Specify)	<input type="checkbox"/> Under 17 (NP) 1 2 3 4 5 7 _____ (Specify)
1 2 3 4 5 7 _____ (Specify)	b.	1 2 3 4 5 7 _____ (Specify)	1 2 3 4 5 7 _____ (Specify)	b.	1 2 3 4 5 7 _____ (Specify)	1 2 3 4 5 7 _____ (Specify)
<input type="checkbox"/> Under 17 (NP) 1 Y 2 N (NP)	12a.	<input type="checkbox"/> Under 17 (NP) 1 Y 2 N (NP)	<input type="checkbox"/> Under 17 (NP) 1 Y 2 N (NP)	12a.	<input type="checkbox"/> Under 17 (NP) 1 Y 2 N (NP)	<input type="checkbox"/> Under 17 (NP) 1 Y 2 N (NP)
1 2 3 4 5 6 7 8	b.	1 2 3 4 5 6 7 8	1 2 3 4 5 6 7 8	b.	1 2 3 4 5 6 7 8	1 2 3 4 5 6 7 8
FOOTNOTES						

<p>Mark box or ask:</p> <p>13a. Did -- work at any time last week or the week before -- not counting work around the house?</p> <p>b. Even though -- did not work during these 2 weeks, does he have a job or business?</p> <p>c. Was he looking for work or on layoff from a job?</p> <p>d. Which -- looking for work or on layoff from a job?</p>		<p><input type="checkbox"/> Under 17 (NP)</p> <p>13a. 1 Y (14) 2 N</p> <p>b. 1 Y 2 N</p> <p>c. 1 Y 2 N (14)</p> <p>d. 1 <input type="checkbox"/> Looking 3 <input type="checkbox"/> Both 2 <input type="checkbox"/> Layoff</p>
<p>Ask for all persons with a "Yes" in 13a, b, or c.</p> <p>If "Yes" in 13c only, questions 14a through 14e apply to this person's LAST full-time civilian job.</p>	<p>14a. For whom did -- work? Name of company, business, organization, or other employer</p>	<p>14a. Employer</p>
	<p>b. What kind of business or industry is this? For example, TV and radio manufacturing, retail shoe store, State Labor Dept., farm</p>	<p>b. Industry</p>
	<p>c. What kind of work was -- doing? For example, electrical engineer, stock clerk, typist, farmer</p>	<p>c. Occupation</p>
	<p>d. What were --'s most important activities or duties? For example, types, keeps account books, files, sells cars, operates printing press, finishes concrete</p>	<p>d. Duties</p>
	<p>Complete from entries in 14a-d; if not clear, ask:</p> <p>e. Was -- an employee of PRIVATE company, business, or individual for wages, salary, or commission? P -- a FEDERAL government employee? F -- a STATE government employee? S -- a LOCAL government employee? L -- self-employed in OWN business, professional practice, or farm? If not a farm, ask: Is the business incorporated? Yes I No (or farm) SE -- working WITHOUT PAY in family business or farm? WP -- NEVER WORKED. NEV</p>	<p>Class of worker</p> <p>e. 1 <input type="checkbox"/> P 5 <input type="checkbox"/> I 2 <input type="checkbox"/> F 6 <input type="checkbox"/> SE 3 <input type="checkbox"/> S 7 <input type="checkbox"/> WP 4 <input type="checkbox"/> L 8 <input type="checkbox"/> NEV</p>
<p>Hand Card I</p> <p>15. Which of those income groups represents your total combined family income for the past 12 months -- that is, yours, your -- s, etc.? Include income from all sources such as wages, salaries, social security or retirement benefits, help from relatives, rent from property, and so forth.</p>		<p>15. 00 <input type="checkbox"/> A 04 <input type="checkbox"/> E 08 <input type="checkbox"/> I 01 <input type="checkbox"/> B 05 <input type="checkbox"/> F 09 <input type="checkbox"/> J 02 <input type="checkbox"/> C 06 <input type="checkbox"/> G 10 <input type="checkbox"/> K 03 <input type="checkbox"/> D 07 <input type="checkbox"/> H</p>
<p>16a. Which (other) family members received some income during the past 12 months? Mark "Income" box in person's column.</p> <p>b. Did any other family members receive any income during the past 12 months? Y (Reask 16a and b) N</p>		<p>16a. <input type="checkbox"/> Income</p>
<p>If only one person with "Income" box marked, go to Household page. If 2 or more persons with "Income" box marked, ask 17 for each.</p> <p>17. Which of those income groups represents --'s income for the past 12 months?</p>		<p>17. 00 <input type="checkbox"/> A 04 <input type="checkbox"/> E 08 <input type="checkbox"/> I 01 <input type="checkbox"/> B 05 <input type="checkbox"/> F 09 <input type="checkbox"/> J 02 <input type="checkbox"/> C 06 <input type="checkbox"/> G 10 <input type="checkbox"/> K 03 <input type="checkbox"/> D 07 <input type="checkbox"/> H</p>

First name (2)			AGE	10.	First name (3)			AGE	First name (4)			AGE	10.	First name (5)			AGE	First name (6)			AGE														
Last name			RACE 1 W 2 B 3 OT		Last name			RACE 1 W 2 B 3 OT		Last name			RACE 1 W 2 B 3 OT		Last name			RACE 1 W 2 B 3 OT		Last name			RACE 1 W 2 B 3 OT												
Relationship			SEX 1 M 2 F	2.	Relationship			SEX 1 M 2 F		Relationship			SEX 1 M 2 F		Relationship			SEX 1 M 2 F		Relationship			SEX 1 M 2 F												
Month	Date	Year	3.			Month	Date	Year	3.			Month	Date	Year	3.			Month	Date	Year	3.														
BED DAYS			DV	HOSP.	BED DAYS			DV	HOSP.	BED DAYS			DV	HOSP.	BED DAYS			DV	HOSP.	BED DAYS			DV	HOSP.											
None (NP)			None (NP)	None (NP)	None (NP)			None (NP)	None (NP)	None (NP)			None (NP)	None (NP)	None (NP)			None (NP)	None (NP)	None (NP)			None (NP)	None (NP)											
Q. No.			Condition			Q. No.			Condition			Q. No.			Condition			Q. No.			Condition														
Under 17 (NP)			1 Y (14)	2 N	13a.			Under 17 (NP)			1 Y (14)	2 N	13a.			Under 17 (NP)			1 Y (14)	2 N	13a.			Under 17 (NP)			1 Y (14)	2 N							
1 Y			2 N			b.			1 Y			2 N			b.			1 Y			2 N			b.			1 Y			2 N					
1 Y			2 N (14)			c.			1 Y			2 N (14)			c.			1 Y			2 N (14)			c.			1 Y			2 N (14)					
1 Looking			3 Both			d.			1 Looking			3 Both			d.			1 Looking			3 Both			d.			1 Looking			3 Both					
2 Layoff									2 Layoff									2 Layoff									2 Layoff								
Employer			14a.			Employer			Employer			14a.			Employer			Employer			Employer			Employer			Employer								
Industry			b.			Industry			Industry			b.			Industry			Industry			Industry			Industry			Industry								
Occupation			c.			Occupation			Occupation			c.			Occupation			Occupation			Occupation			Occupation			Occupation								
Duties			d.			Duties			Duties			d.			Duties			Duties			Duties			Duties			Duties								
Class of worker			e.			Class of worker			Class of worker			e.			Class of worker			Class of worker			Class of worker			Class of worker			Class of worker								
1 P			5 I			1 P			5 I			1 P			5 I			1 P			5 I			1 P			5 I								
2 F			6 SE			2 F			6 SE			2 F			6 SE			2 F			6 SE			2 F			6 SE								
3 S			7 WP			3 S			7 WP			3 S			7 WP			3 S			7 WP			3 S			7 WP								
4 L			8 NEV			4 L			8 NEV			4 L			8 NEV			4 L			8 NEV			4 L			8 NEV								
Income			16a.			Income			Income			16a.			Income			Income			Income			Income			Income								
00 A			04 E			08 I			00 A			04 E			08 I			00 A			04 E			08 I			00 A			04 E			08 I		
01 B			05 F			09 J			01 B			05 F			09 J			01 B			05 F			09 J			01 B			05 F			09 J		
02 C			06 G			10 K			02 C			06 G			10 K			02 C			06 G			10 K			02 C			06 G			10 K		
03 D			07 H			03 D			07 H			03 D			07 H			03 D			07 H			03 D			07 H			03 D			07 H		

E	If this questionnaire is for an EXTRA unit, enter Control Number of original sample unit →					If in AREA SEGMENT, also enter for FIRST unit listed on property →		LISTING SHEET			
	Sheet number		Line number								
TABLE X – LIVING QUARTERS DETERMINATIONS AT LISTED ADDRESS											
Line No.	LOCATION OF UNIT		If listed, enter sheet and line number, STOP Table X, and continue interview for original sample unit. ● If unlisted, – And Area Segment, go to (4). – And another type of Segment, go to (5) (3)	If outside Area Segment boundary, mark box below, STOP and – ● Go to next line of Table X, if additional quarters determined. OR ● Go to Household page, item 9, or Probe page, question 1 (as applicable). (4)	Are these (Specify location) quarters for more than one group of people? If "Yes," fill one line for each group. (5)	USE OR CHARACTERISTICS				CLASSIFICATION	
	(1)	(2)				(3)	(4)	(5)	OCCUPIED Do the occupants of these (Specify location) quarters live and eat with any other group of people? (6)		ALL QUARTERS Do these quarters in (Specify location) have: Direct access from the outside or through a common hall? (7)
1		S ___ L ___	<input type="checkbox"/> Outside segment boundary	Yes No	Yes – Go to (9) and circle N No	Yes No	Yes No	Yes No	N HU OT		
2		S ___ L ___	<input type="checkbox"/> Outside segment boundary	Yes No	Yes – Go to (9) and circle N No	Yes No	Yes No	Yes No	N HU OT		
3		S ___ L ___	<input type="checkbox"/> Outside segment boundary	Yes No	Yes – Go to (9) and circle N No	Yes No	Yes No	Yes No	N HU OT		
<p>NOTE: Be sure to continue interview for original sample unit.</p> <p>FOOTNOTES</p>											

CARD B

1. Sold blood.
2. Replaced blood used by a relative or friend.
3. Unpaid donation to a blood bank to assure free blood for this family in the future.
4. Other unpaid blood donation which was not for replacement and did not assure free blood for this family in the future.
5. Some other reason – Specify

CARD E2

Show detail in question 3e, Condition page and/or question 6, Hospital page for these IMPAIRMENTS.

- Deafness
- Trouble hearing
- Other ear condition
- Blindness
- Trouble seeing
- Other eye condition
- Missing hand – all or part
- Missing arm – all or part
- Missing foot – all or part
- Missing leg – all or part
- Trouble, stiffness or any deformity of – foot, leg, fingers, arm, or back

CARD C

Conditions reported for which questions 3a–3e need not be asked:

Acne	Hemorrhoids or piles (any kind)
Appendicitis	Hernia (any type)
Arteriosclerosis	Kidney stones
Arthritis (any kind)	Laryngitis
Athlete's foot	Migraine (any kind)
Bronchitis (any kind)	Mumps
Bunions	Normal delivery
Bursitis	Phlebitis (Thrombophlebitis)
Calluses	Pneumonia
Chickenpox	Pregnancy
Cold	Sciatica
Corns	Sinus (any kind)
Croup	Strep (Streptococcus) throat
Diabetes (any type)	Tonsillitis
Epilepsy (any kind)	Ulcer (duodenal, stomach, peptic or gastric only)
Gallstones	Vasectomy
Golter	Warts
Hardening of the arteries	Whooping cough
Hay fever	

CARD I

Under \$1,000 (including loss)	Group A
\$ 1,000 – \$ 1,999	Group B
\$ 2,000 – \$ 2,999	Group C
\$ 3,000 – \$ 3,999	Group D
\$ 4,000 – \$ 4,999	Group E
\$ 5,000 – \$ 5,999	Group F
\$ 6,000 – \$ 6,999	Group G
\$ 7,000 – \$ 9,999	Group H
\$10,000 – \$14,999	Group I
\$15,000 – \$24,999	Group J
\$25,000 and over	Group K

CARD N

CARD P

1. Care received through Medicaid or Welfare.
2. Unemployed, or reasons related to unemployment.
3. Can't obtain insurance because of poor health, illness, or age.
4. Too expensive, can't afford health insurance.
5. Dissatisfied with previous insurance.
6. Don't believe in insurance.
7. Have been healthy, not much sickness in the family, haven't needed health insurance.
8. Military dependent, (CHAMPUS), veterans' benefits.
9. Some other reason – Specify

1. Have two or more usual doctors or places, depending on what is wrong.
2. Haven't needed a doctor.
3. Previous doctor no longer available.
4. Haven't been able to find the right doctor.
5. Recently moved to area.
6. Other reason – Please specify.

CARD O

CARD R

1. Puerto Rican
2. Cuban
3. Mexican
4. Mexicano
5. Mexican–American
6. Chicano
7. Other Latin American
8. Other Spanish

1. Alaskan Native or American Indian
2. Asian or Pacific Islander
3. Black
4. White
5. Another group not listed – Specify.

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