BEHAVIORAL RISK FACTOR SURVEILLANCE SYSTEM

(Project Title)

1993 - Final	Data	Layout		Page	1
(Project Year)			Date	3-18-	94

Field Size	Columns	Question	Comments
28	1-28	IDENTIFICATION INFORMATION	
2	1-2	Fips State Code	
1	3	Stratum Code	
5	4-8	PSU Number	
1	9	Record Number	
6	10-15	Date of Interview	
2	16-17	Interviewer Identification	
8	18-25	Telephone Number	First Eight Digits of Telephone Number
2	26-27	Final Disposition of Telephone Call	<pre>01= Completed Interview 02= Refused Interview 03= Non-Working Number 04= No Answer 05= Business Telephone 06= No Eligible Respondent at this number 07= No Eligible Respondent could be reached during time period 08= Language barrier prevented completion of interview 09= Interview terminated within questionnaire 10= Line Busy 11= Selected Respondent unable to respond because of physical or mental impairment</pre>

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Field Size	Columns	Questions	Comments
1	28	Winddown	Blank= Regular Mode 9= Winddown Mode
2	29-30	Number of Adults in Household	01-18= Number of adults, 18 years plus in household
1	31	Number of Adult Men in Household	0-9= Number of adult men, 18 years plus in household
1	32	Number of Adult Women in Household	0-9= Number of adult women, 18 Years Plus in household
		SECTION A: HEALTH STATUS	
1	33	Q1: Would you say that in general your health is:	<pre>1= Excellent 2= Very good 3= Good 4= Fair 5= Poor 7= Don't know/Not sure 9= Refused</pre>
2	34-35	Q2: Now thinking about your physical health, which includes physical illness and injury, for how many days during the past 30 days was your physical health not good?	01-30= Number of days 88= None 77= Don't know/Not sure 99= Refused
2	36-37	Q3: Now thinking about your mental health, which includes stress, depression, and problems with emotions, for how many days during the past 30 days was your mental health not good?	01-30= Number of days 88= None 77= Don't know/Not sure 99= Refused
2	38-39	Q4: During the past 30 days, for about how many days did poor physical or mental health keep you from doing your usual activities, such as self-care, work, or recreation?	01-30= Number of days 88= None 77= Don't know/Not sure 99= Refused
		SECTION B: HEALTH CARE	

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Field Size	Columns	Questions	Comments
	1	ACCESS	Γ
1	40	Q5: Do you have any kind of health care coverage, including health insurance, prepaid plans such as HMOs, or government plans such as Medicare?	1= Yes 2= No 7= Don't know/Not sure 9= Refused
1	41	Q6: About how long has it been since you had health care coverage?	<pre>1= Within the past 6 months (1 to 6 months ago) 2= Within the past year (7 to 12 months ago) 3= Within the past 2 years (1 to 2 years ago) 4= Within the past 5 years (2 to 5 years ago) 5= 5 or more years ago 7= Don't know/Not sure 8= Never 9= Refused</pre>
1	42	Q7: Was there a time during the last 12 months when you needed to see a doctor, but could not because of the cost?	1= Yes 2= No 7= Don't know/Not sure 9= Refused
1	43	Q8: Is there one particular clinic, health center, doctor's office, or other place that you usually go to if you are sick or need advice about your health?	<pre>1= Yes, one particular place 2= Yes, more than one particular place 3= No 7= Don't know/Not sure 9= Refused</pre>
1	44	Q9: About how long has it been since you last visited a doctor for a routine checkup?	<pre>1= Within the past year (1 to 12 months ago) 2= Within the past 2 years (1 to 2 years ago) 3= Within the past 5 years (2 to 5 years ago) 4= 5 or more years ago 7= Don't know/Not sure 8= Never 9= Refused</pre>

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Field			
Size	Columns	Questions	Comments
	1	AWARENESS	
1	45	Q10: About how long has it been since you last had your blood pressure taken by a doctor, nurse, or other health professional?	<pre>1= Within the past 6 months (1 to 6 months ago) 2= Within the past year (7 to 12 months ago) 3= Within the past 2 years (1 to 2 years ago) 4= Within the past 5 years (2 to 5 years ago) 5= 5 or more years ago 7= Don't know/Not sure 8= Never 9= Refused</pre>
1	46	Q11: Have you ever been told by a doctor, nurse, or other health professional that you have high blood pressure?	1= Yes 2= No 7= Don't know/Not sure 9= Refused
1	47	Q12: Have you been told on more than one occasion that your blood pressure was high, or have you been told this only once?	1= More than once 2= Only once 7= Don't know/Not sure 9= Refused
		SECTION D: CHOLESTEROL AWARENESS	
1	48	Q13: Have you ever had your blood cholesterol checked?	1= Yes 2= No 7= Don't know/Not sure 9= Refused
1	49	Q14: About how long has it been since you last had your blood cholesterol checked?	
1	50	Q15: Have you ever been told by a doctor or other health professional that your blood cholesterol is high?	1= Yes 2= No 7= Don't know/Not sure 9= Refused

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Field Size	Columns	Questions	Comments
5126	COLUMITS	~	Conunerres
		SECTION E: DIABETES	
1	51	Q16: Have you ever been told by a doctor that you have diabetes?	1= Yes 2= No 7= Don't know/Not sure 9= Refused
		SECTION F: INJURY CONTROL	
1	52	Q17: How often do you use seatbelts when you drive or ride in a car?	<pre>1= Always 2= Nearly always 3= Sometimes 4= Seldom 5= Never 7= Don't know/Not sure 8= Never drive or ride in a</pre>
2	53-54	Q18: How many children less than 18 years of age live in your household?	01-25= Number of children 88= None 99= Refused
2	55-56	Q19: What is the age of the oldest child in your household under the age of 15?	01-14= Age in years 88= No children under age 15 77= Don't know/Not sure 99= Refused
1	57	Q20: How often does the oldest child (of children under age 15) in your household use a car safety seat (child under 5) seatbelt (child 5 or older) when they ride in a car?	<pre>1= Always 2= Nearly always 3= Sometimes 4= Seldom 5= Never 7= Don't know/Not sure 8= Never rides in a car 9= Refused</pre>
1	58	Q21: Can you swim or tread water for 5 minutes in water that is over your head?	1= Yes 2= No 7= Don't know/Not sure 9= Refused
1	59	Q22: Do you have a specific plan for how you would escape from your house or apartment in case of fire?	1= Yes 2= No 7= Don't know/Not sure 9= Refused

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Field				
Size	Columns	Questions	Comments	
		SECTION G: TOBACCO USE		
1	60	Q23: Have you smoked at least 100 cigarettes in your entire life?	1= Yes 2= No 7= Don't know/Not sure 9= Refused	
1	61	Q24: Do you smoke cigarettes now?	1= Yes 2= No 9= Refused	
2	62-63	Q25: On the average, about how many cigarettes a day do you now smoke?	01-87= Number of cigarettes (1 pack = 20 cigarettes) 88= Don't smoke regularly 99= Refused	
1	64	Q26: During the past 12 months, have you quit smoking for 1 day or longer?	1= Yes 2= No 7= Don't know/Not sure 9= Refused	
1	65	Q27: Would you like to stop smoking?	1= Yes 2= No 7= Don't know/Not sure 9= Refused	
1	66	Q28: About how long has it been since you last smoked cigarettes regularly (that is, daily)?	<pre>1= Within the past month (0</pre>	
	SECTION H: ALCOHOL CONSUMPTION			
1	67	Q29: During the past month, have you had at least one drink	1= Yes 2= No	

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Field			
Size	Columns	Questions	Comments
		of any alcoholic beverage such as beer, wine, wine coolers, or liquor?	7= Don't know/Not sure 9= Refused
3	68-70	Q30: During the past month, how many days per week or per month did you drink any alcoholic beverages, on the average?	101-107= Number days per week 201-231= Number days per month 777= Don't know/Not sure 999= Refused
2	71-72	Q31: On the days when you drank, about how many drinks did you drink on the average?	01-76= Number of drinks 77= Don't know/Not sure 99= Refused
2	73-74	Q32: Considering all types of alcoholic beverages, how many times during the past month did you have 5 or more drinks on an occasion?	01-76= Number of times 88= None 77= Don't know/Not sure 99= Refused
2	75-76	Q33: During the past month, how many times have you driven when you've had perhaps too much to drink?	01-76= Number of times 88= None 77= Don't know/Not sure 99= Refused
2	77-78	Q34: During the past month, how many times have you ridden with a driver who has had perhaps too much to drink?	01-76= Number of times 88= None 77= Don't know/Not sure 99= Refused
		SECTION I: DEMOGRAPHICS	
2	79-80	Q35: What is your age?	18-99= Age of respondent 07= Don't know/Not sure 09= Refused
1	81	Q36: What is your race?	<pre>1= White 2= Black 3= Asian, Pacific Islander 4= American Indian, Alaska Native 5= Other 7= Don't know/Not sure 9= Refused</pre>
1	82	Q37: Are you of Spanish/	l= Yes

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Field			
Size	Columns	Questions	Comments
		Hispanic origin?	2= No 7= Don't know/Not sure 9= Refused
1	83	Q38: Are you:	<pre>1= Married 2= Divorced 3= Widowed 4= Separated 5= Never been married 6= A member of an unmarried</pre>
1	84	Q39: What is the highest grade or year of school you completed?	<pre>1= Never attended school <u>or</u> kindergarten only 2= Grades 1 through 8 (Elementary) 3= Grades 9 through 11 (Some high school) 4= Grade 12 <u>or</u> GED (High school graduate) 5= College 1 year to 3 years (Some college <u>or</u> technical school) 6= College 4 years or more (College graduate) 9= Refused</pre>
1	85	Q40: Are you currently:	<pre>1= Employed for wages 2= Self-employed 3= Out of work for more than 1 year 4= Out of work for less than 1 year 5= Homemaker 6= Student 7= Retired 8= Unable to work 9= Refused</pre>
1	86	Q41: Which of the following categories best describes your annual household income from all sources?	<pre>1= Less than \$10,000 2= \$10,000 to less than \$15,000 3= \$15,000 to less than \$20,000 4= \$20,000 to less than \$25,000</pre>

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Field Size	Columns	Questions	Comments
			<pre>5= \$25,000 to less than \$35,000 6= \$35,000 to \$50,000 7= Over \$50,000 8= Don't know/Not sure 9= Refused</pre>
3	87-89	Q42: About how much do you weigh without shoes?	050-776= Code in pounds 777= Don't know/Not sure 999= Refused
3	90-92	Q43: About how tall are you without shoes?	200-805= Code in feet and inches 777= Don't know/Not sure 999= Refused
3	93-95	Q44: What county do you live in?	XXX= Code County code 777= Don't know/Not sure 999= Refused
1	96	Q45: Do you have more than one telephone number in your household?	1= Yes 2= No 9= Refused
1	97	Q46: How many residential telephone numbers do you have?	1-8= Total residential telephone numbers 9= Refused
1	98	Q47: Indicate sex of respondent.	1= Male 2= Female
		SECTION J: WOMEN'S HEALTH	
1	99	Q48: Have you ever had a mammogram?	1= Yes 2= No 7= Don't know/Not sure 9= Refused
1	100	Q49: How long has it been since you had your last mammogram?	<pre>1= Within the past year (1 to 12 months ago) 2= Within the past 2 years (1 to 2 years ago) 3= Within the past 3 years (2 to 3 years ago) 4= Within the past 5 years (3 to 5 years ago)</pre>

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Field			
Size	Columns	Questions	Comments
			5= 5 or more years ago 7= Don't know/Not sure 9= Refused
1	101	Q50: Was your last mammogram done as part of a routine checkup, because of a breast problem other than cancer, or because you've already had breast cancer?	<pre>1= Routine checkup 2= Breast problem other than cancer 3= Had breast cancer 7= Don't know/Not sure 9= Refused</pre>
1	102	Q51: Have you ever had a clinical breast exam?	1= Yes 2= No 7= Don't know/Not sure 9= Refused
1	103	Q52: How long has it been since your last breast exam?	<pre>1= Within the past year (1 to 12 months ago) 2= Within the past 2 years (1 to 2 years ago) 3= Within the past 3 years (2 to 3 years ago) 4= Within the past 5 years (3 to 5 years ago) 5= 5 or more years ago 7= Don't know/Not sure 9= Refused</pre>
1	104	Q53: Was your last breast exam done as part of a routine checkup, because of a breast problem other than cancer, or because you've already had breast cancer?	<pre>1= Routine checkup 2= Breast problem other than cancer 3= Had breast cancer 7= Don't know/Not sure 9= Refused</pre>
1	105	Q54: Have you ever had a Pap smear?	1= Yes 2= No 7= Don't know/Not sure 9= Refused
1	106	Q55: How long has it been since you had your last Pap smear?	<pre>1= Within the past year (1 to 12 months ago) 2= Within the past 2 years (1 to 2 years ago) 3= Within the past 3 years (2 to 3 years ago) 4= Within the past 5 years</pre>

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Field Size	Columns	Questions	Comments		
			(3 to 5 years ago) 5= 5 or more years ago 7= Don't know/Not sure 9= Refused		
1	107	Q56: Was your last Pap smear done as part of a routine exam, or to check a current or previous problem?	<pre>1= Routine exam 2= Check current or previous problem 3= Other 7= Don't know/Not sure 9= Refused</pre>		
1	108	Q57: Have you had a hysterectomy?	1= Yes 2= No 7= Don't know/Not sure 9= Refused		
1	109	Q58: To your knowledge, are you now pregnant?	1= Yes 2= No 7= Don't know/Not sure 9= Refused		
		SECTION K: IMMUNIZATION			
1	110	Q59: During the past 12 months, have you had a flu shot?	1= Yes 2= No 7= Don't know/Not sure 9= Refused		
1	111	Q60: Have you ever had a pneumonia vaccination?	1= Yes 2= No 7= Don't know/Not sure 9= Refused		
	SECTION L: COLORECTAL CANCER SCREENING				
1	112	Q61: A digital rectal exam is when a doctor or other health professional inserts a finger in the rectum to check for cancer and other health problems. Have you ever had this exam?	1= Yes 2= No 7= Don't know/Not sure 9= Refused		
1	113	Q62: When did you have your last digital rectal exam?	1= Within the past year (1 to 12 months ago) 2= Within the past 2 years		

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Field Size	Columns	Questions	Comments
			<pre>(1 to 2 years ago) 3= Within the past 5 years (2 to 5 years ago) 4= 5 or more years ago 7= Don't know/Not sure 9= Refused</pre>
1	114	Q63: A proctoscopic exam is when a tube is inserted in the rectum to check for cancer and other health problems. Have you ever had this exam?	1= Yes 2= No 7= Don't know/Not sure 9= Refused
1	115	Q64: When did you have your last proctoscopic exam?	<pre>1= Within the past year (1 to 12 months ago) 2= Within the past 2 years (1 to 2 years ago) 3= Within the past 5 years (2 to 5 years ago) 4= 5 or more years ago 7= Don't know/Not sure 9= Refused</pre>
		SECTION M: AIDS KNOWLEDGE AND TESTING	
1	116	Q65: Can you tell by looking at a person if he or she has the AIDS virus?	1= Yes 2= No 7= Don't know/Not sure 9= Refused
1	117	Q66: Would you be willing to work next to or near a person who you know is infected with the AIDS virus?	1= Yes 2= No 7= Don't know/Not sure 9= Refused
1	118	Q67: If you had a child in school, would you allow him or her to be in the same classroom with another child who is infected with the AIDS virus?	1= Yes 2= No 3= Don't have children 7= Don't know/Not sure 9= Refused
1	119	Q68: If you had a teenager who was sexually active, would you encourage him or her to use a condom?	1= Yes 2= No 7= Don't know/Not sure 9= Refused
1	120	Q69: Some people use condoms	1= Very effective

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Field			
Size	Columns	Questions	Comments
		to keep from getting the AIDS virus through sexual activity. How effective do you think a properly used condom is for this purpose?	<pre>2= Somewhat effective 3= Not at all effective 4= Don't know how effective 5= Don't know method 9= Refused</pre>
1	121	Q70: To your knowledge is there medical treatment available that may help a person who is infected with the AIDS virus live longer?	1= Yes 2= No 7= Don't know/Not sure 9= Refused
1	122	Q71: What are your chances of getting the AIDS virus?	<pre>1= High 2= Medium 3= Low 4= None 7= Don't know/Not sure 9= Refused</pre>
1	123	Q72: In the past five years (that is, since 1988), have your chances of getting the AIDS virus increased, decreased, or stayed the same?	<pre>1= Increased 2= Decreased 3= Stayed the same 7= Don't know/Not sure 9= Refused</pre>
1	124	Q73: Except for donating or giving blood, have you ever had your blood tested for the AIDS virus infection?	1= Yes 2= No 7= Don't know/Not sure 9= Refused
4	125-128	Q74: When was your last test?	0180-1293= Code month and year of last test 7777= Don't know/Not sure 9999= Refused
2	129-130	Q75: What was the main reason you had your last AIDS blood test?	<pre>01= For hospitalization or surgical procedure 02= To apply for health insurance 03= To apply for life insurance 04= For employment 05= To apply for a marriage license 06= For military induction</pre>

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Field Size	Columns	Questions	Comments
			or military service 07= For immigration 08= Just to find out if you were infected 09= Because of referral by a doctor 10= Because of referral by the Health Department 11= Referred by your sex partner 12= Because it was part of a blood donation process 13= For routine checkup 14= Because of occupational exposure 15= Because of illness 87= Other 77= Don't know/Not sure 99= Refused
2	131-132	Q76: Where did you have your last blood test for the AIDS virus?	<pre>01= Private Doctor, HMO 02= Blood Bank, Plasma Center, Red Cross 03= Health Department 04= AIDS Clinic, Counseling, Testing Site 05= Hospital, Emergency Room, Outpatient Clinic 06= Family Planning Clinic 06= Family Planning Clinic 07= Prenatal Clinic 08= Tuberculosis Clinic 09= STD Clinic 10= Community Health Clinic 11= Clinic Run By Employer 12= Insurance Company Clinic 13= Other Public Clinic 14= Drug Treatment Facility 15= Military Induction or Military Service Site 16= Immigration Site 17= At Home, Home Visit By</pre>

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Field Size	Columns	Questions	Comments
			Nurse Or Health Worker 87= Other 77= Don't Know/Not Sure 99= Refused
1	133	Q77: If you received the results of your last test, did you receive counseling or talk with a health care professional about how to lower your chances of becoming infected with the AIDS virus or how to avoid passing it on to another person?	<pre>1= Yes (received results and was counseled) 2= No (received results and was not counseled) 3= Did not get results 7= Don't know/Not sure 9= Refused</pre>
		MODULE 1: SMOKELESS TOBACCO USE	
1	134	Q1: Have you ever used or tried any smokeless tobacco products such as chewing tobacco or snuff?	<pre>1= Yes, chewing tobacco 2= Yes, snuff 3= Yes, both 4= No, neither 7= Don't know/Not sure 9= Refused</pre>
1	135	Q2: Do you currently use any smokeless tobacco products such as chewing tobacco or snuff?	<pre>1= Yes, chewing tobacco 2= Yes, snuff 3= Yes, both 4= No, neither 7= Don't know/Not sure 9= Refused</pre>
		MODULE 2: RADON TESTING	
1	136	Q1: Have you heard of radon, which is a radioactive gas that occurs in nature?	1= Yes 2= No 7= Don't know/Not sure 9= Refused
1	137	Q2: Has your household air been tested for the presence of radon gas?	1= Yes 2= No 7= Don't know/Not sure 9= Refused
1	138	Q3: Do you know how to test your home for the presence of radon?	1= Yes 2= No 7= Don't know/Not sure 9= Refused

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Field			
Size	Columns	Questions	Comments
1	139	Q4: Do you, or does anyone in your home plan to have your household air tested for radon within the next year?	2= No
1	140	Q5: Prolonged exposure to radon gas can be harmful to your health. Do you agree or disagree?	1= Agree 2= Disagree 7= Don't know/Not sure 9= Refused
1	141	Q6: Which, if any, of the following conditions do you think can be caused by prolonged radon exposure? A. Headache?	1= Yes 2= No 7= Don't know/Not sure 9= Refused
1	142	B. Asthma?	1= Yes 2= No 7= Don't know/Not sure 9= Refused
1	143	C. Arthritis?	1= Yes 2= No 7= Don't know/Not sure 9= Refused
1	144	D. Lung Cancer?	1= Yes 2= No 7= Don't know/Not sure 9= Refused
1	145	E. Other cancers besides lung?	1= Yes 2= No 7= Don't know/Not sure 9= Refused
1	146	Q7: Which of the following best describes your residence?	<pre>1= Single family home, duplex, or townhouse 2= Apartment or condominium at basement level, or on lst or 2nd floor 3= Apartment or condominium above 2nd floor 4= Trailer or mobile home 5= Other 7= Don't know/Not sure 9= Refused</pre>

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Field	~]		
Size	Columns	Questions	Comments
		MODULE 3: DIETARY FAT	
3	147-149	Q1: How often do you eat hot dogs or lunch meats such as ham or other cold cuts?	101-199= Per Day 201-299= Per Week 301-399= Per Month 401-499= Per Year 555= Never 777= Don't Know/Not Sure 999= Refused
3	150-152	Q2: How often do you eat bacon or sausage?	101-199= Per Day 201-299= Per Week 301-399= Per Month 401-499= Per Year 555= Never 777= Don't Know/Not Sure 999= Refused
3	153-155	Q3: How often do you eat pork other than ham, bacon, or sausage?	101-199= Per Day 201-299= Per Week 301-399= Per Month 401-499= Per Year 555= Never 777= Don't Know/Not Sure 999= Refused
3	156-158	Q4: How often do you eat hamburgers, cheeseburgers, or meat loaf?	101-199= Per Day 201-299= Per Week 301-399= Per Month 401-499= Per Year 555= Never 777= Don't Know/Not Sure 999= Refused
3	159-161	Q5: How often do you eat beef other than hamburgers, cheeseburgers, or meat loaf?	101-199= Per Day 201-299= Per Week 301-399= Per Month 401-499= Per Year 555= Never 777= Don't Know/Not Sure 999= Refused

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Field			
Size	Columns	Questions	Comments
3	162-164	Q6: How often do you eat fried chicken?	101-199= Per Day 201-299= Per Week 301-399= Per Month 401-499= Per Year 555= Never 777= Don't Know/Not Sure 999= Refused
3	165-167	Q7: How often do you eat french fries or fried potatoes?	101-199= Per Day 201-299= Per Week 301-399= Per Month 401-499= Per Year 555= Never 777= Don't Know/Not Sure 999= Refused
3	168-170	Q8: How often do you eat cheese or cheese spreads, not including cottage cheese?	101-199= Per Day 201-299= Per Week 301-399= Per Month 401-499= Per Year 555= Never 777= Don't Know/Not Sure 999= Refused
3	171-173	Q9: How often do you eat doughnuts, cookies, cake, pastry, or pies?	101-199= Per Day 201-299= Per Week 301-399= Per Month 401-499= Per Year 555= Never 777= Don't Know/Not Sure 999= Refused
3	174-176	Q10: How often do you usually eat snacks, such as chips or popcorn?	101-199= Per Day 201-299= Per Week 301-399= Per Month 401-499= Per Year 555= Never 777= Don't Know/Not Sure 999= Refused
3	177-179	Q11: How often do you usually add butter or margarine to	101-199= Per Day 201-299= Per Week

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Field			
Size	Columns	Questions	Comments
		bread, rolls, or vegetables?	301-399= Per Month 401-499= Per Year 555= Never 777= Don't Know/Not Sure 999= Refused
3	180-182	Q12: How many eggs do you usually eat?	101-199= Per Day 201-299= Per Week 301-399= Per Month 401-499= Per Year 555= Never 777= Don't Know/Not Sure 999= Refused
3	183-185	Q13: How many glasses (8 oz.) of whole milk do you usually drink? Remember to include drinks made with whole milk or milk on cereal. Do not include low-fat milk, such as skim milk or 2% milk.	
		MODULE 4: FRUITS AND VEGETABLES	
3	186-188	Q1: How often do you drink fruit juices such as orange, grapefruit, or tomato?	101-199= Per Day 201-299= Per Week 301-399= Per Month 401-499= Per Year 555= Never 777= Don't Know/Not Sure 999= Refused
3	189-191	Q2: Not counting juice, how often do you eat fruit?	101-199= Per Day 201-299= Per Week 301-399= Per Month 401-499= Per Year 555= Never 777= Don't Know/Not Sure 999= Refused
3	192-194	Q3: How often do you eat green	101-199= Per Day

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1			
Field Size	Columns	Questions	Comments
		salad?	201-299= Per Week 301-399= Per Month 401-499= Per Year 555= Never 777= Don't Know/Not Sure 999= Refused
3	195-197	Q4: How often do you eat potatoes (not including french fries, fried potatoes, or potato chips?)	101-199= Per Day 201-299= Per Week 301-399= Per Month 401-499= Per Year 555= Never 777= Don't Know/Not Sure 999= Refused
3	198-200	Q5: How often do you eat carrots?	101-199= Per Day 201-299= Per Week 301-399= Per Month 401-499= Per Year 555= Never 777= Don't Know/Not Sure 999= Refused
3	201-203	Q6: Not counting carrots, potatoes, or salad, how many servings of vegetables do you usually eat?	101-199= Per Day 201-299= Per Week 301-399= Per Month 401-499= Per Year 555= Never 777= Don't Know/Not Sure 999= Refused
		MODULE 5: DIABETES	
2	204-205	Q1: How old were you when you were told you have diabetes?	01-76= Code age in years 77= Don't know/Not sure 99= Refused
1	206	Q2: Are you now taking insulin?	1= Yes 2= No 9= Refused
1	207	Q3: In general, how would you rate your vision when wearing glasses or contacts if needed?	1= Excellent 2= Very good 3= Good

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1			
Field Size	Columns	Questions	Comments
			4= Fair 5= Poor 7= Don't know/Not sure 9= Refused
1	208	Q4: How often do you have trouble telling the difference between a one dollar bill and a five dollar bill? (This means when wearing glasses or contacts if needed.)	<pre>1= All of the time 2= Most of the time 3= Some of the time 4= A little bit of the time 5= None of the time 7= Don't know/Not sure 9= Refused</pre>
1	209	Q5: While stopped in a vehicle at a traffic light, how often do you have trouble reading the license plate on the car in front of you? (This means when wearing glasses or contacts if needed.)	<pre>1= All of the time 2= Most of the time 3= Some of the time 4= A little bit of the time 5= None of the time 7= Don't know/Not sure 9= Refused</pre>
		MODULE 6: EXERCISE	
1	210	Q1: During the past month, did you participate in any physical activities or exercises such as running, calisthenics, golf, gardening, or walking for exercise?	1= Yes 2= No 7= Don't know/Not sure 9= Refused
2	211-212	Q2: What type of physical activity or exercise did you spend the most time doing during the past month?	<pre>XX= See Last Page, Coding List A for Activity Code 99= Refused</pre>
3	213-215	Q3: How far did you usually walk/run/jog/swim?	001-150= Code Miles and Tenths (One Implied Decimal Place) 777= Don't know/Not sure 999= Refused
3	216-218	Q4: How many times per week or per month did you take part in this activity during the past month?	101-199= Code Times Per Week 201-299= Code Times Per Month 777= Don't know/Not

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Field Size	Columns	Questions	Comments
			sure 999= Refused
3	219-221	Q5: And when you took part in this activity, for how many minutes or hours did you usually keep at it?	001-959= Code Hours and Minutes 777= Don't know/Not sure 999= Refused
1	222	Q6: Was there another physical activity or exercise that you participated in during the last month?	1= Yes 2= No 7= Don't know/Not sure 9= Refused
2	223-224	Q7: What other type of physical activity gave you the next most exercise during the past month?	XX= See Last Page, Coding List A for Activity Code 99= Refused
3	225-227	Q8: How far did you usually walk/run/jog/swim?	001-150= Code Miles and Tenths (One Implied Decimal Place) 777= Don't know/Not sure 999= Refused
3	228-230	Q9: How many times per week or per month did you take part in this activity?	101-199= Code Times Per Week 201-299= Code Times Per Month 777= Don't know/Not sure 999= Refused
3	231-233	Q10: And when you took part in this activity, for how many minutes or hours did you usually keep at it?	001-959= Code in Hours and Minutes 777= Don't Know/Not sure 999= Refused
		MODULE 7: WEIGHT CONTROL	
1	234	Q1: Are you now trying to lose weight?	1= Yes 2= No 9= Refused
1	235	Q2: Are you eating fewer	l= Yes

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Field Size	Columns	Questions	Comments
		calories to lose weight?	2= No 7= Don't know/Not sure 9= Refused
1	236	Q3: Have you increased your physical activity to lose weight?	1= Yes 2= No 7= Don't know/Not sure 9= Refused
		MODULE 8: ACTIVITY LIMITATIONS	
1	237	Q1: What were you doing MOST of the past 12 months?	<pre>1= Working at a job or business 2= Keeping house 3= Going to school 4= Something else 7= Don't know/Not sure 9= Refused</pre>
1	238	Q2: Does any impairment or health problem NOW keep you from working at a job or business?	1= Yes 2= No 7= Don't know/Not sure 9= Refused
1	239	Q3: Are you limited in the kind or amount of work you can do because of any impairment or health problem?	1= Yes 2= No 7= Don't know/Not sure 9= Refused
1	240	Q4: Does any impairment or health problem NOW keep you from doing any housework at all?	1= Yes 2= No 7= Don't know/Not sure 9= Refused
1	241	Q5: Are you limited in the kind or amount of housework you can do because of any impairment or health problem?	1= Yes 2= No 7= Don't know/Not sure 9= Refused
1	242	Q6: Does any impairment or health problem keep you from working at a job or business?	1= Yes 2= No 7= Don't know/Not sure 9= Refused
1	243	Q7: Are you limited in the kind or amount of work you could do because of any impairment or	1= Yes 2= No 7= Don't know/Not sure

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Field Size	Columns	Questions	Comments
		health problem?	9= Refused
1	244	Q8: Are you limited in any way in any activities because of any impairment or health problem?	1= Yes 2= No 7= Don't know/Not sure 9= Refused
1	245	Q9: Because of any impairment or health problem, do you need the help of other persons with your PERSONAL CARE needs, such as eating, bathing, dressing, or getting around the house?	1= Yes 2= No 7= Don't know/Not sure 9= Refused
1	246	Q10: Because of any impairment or health problem, do you need the help of other persons in handling your ROUTINE needs, such as everyday household chores, doing necessary business, shopping, or getting around for other purposes?	1= Yes 2= No 7= Don't know/Not sure 9= Refused
1	247	Q11: Because of any impairment or health problem, do you need the help of other persons with your PERSONAL CARE needs, such as eating, bathing, dressing, or getting around the house?	1= Yes 2= No 7= Don't know/Not sure 9= Refused
1	248	Q12: Because of any impairment or health problem, do you need the help of other persons in handling your ROUTINE needs, such as everyday household chores, doing necessary business, shopping, or getting around for other purposes?	1= Yes 2= No 7= Don't know/Not sure 9= Refused
1	249	Q13: Are you limited in any way in any activities because of any impairment or health problem?	1= Yes 2= No 7= Don't know/Not sure 9= Refused
10	250-259	BLANK	
141	260-400	State added questions	

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Field Size	Columns	Questions	Comments
2	401-402	New race code	<pre>01= White, Non-Hispanic 02= Black, Non-Hispanic 03= Hispanic, White 04= Hispanic, Black 05= Other Hispanic 06= Asian or Pacific Islander 07= Aleutian, Eskimo, or American Indian 08= Other 99= Unknown/Refused</pre>
1	403	Computed smoking status	<pre>1= Current smoker 2= Former smoker 3= Never smoked 4= Irregular smoker 9= Refused</pre>
4	404-407	Total number drinks a month	0001-1000= # of Drinks 8888= Did not drink in the past month 9999= Refused
5	408-412	Weight for Height Percent of Median	<pre>####################################</pre>
3	413-415	Body mass index	<pre>###= (1 implied decimal place) 999= Unknown</pre>
1	416	Physical activity level	<pre>1= Physically inactive (Yr. 2000 Obj. 1.5) 2= Irregular and/or not sustained activity 3= Regular and not intensive 4= Regular and intensive (Yr. 2000 Obj. 1.4) Note: Prior to 1992, code 4 represented a measure of a 1990 Objective for physical activity.</pre>
1	417	Computed smokeless status	1= Current user

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Field			
Size	Columns	Questions	Comments
			2= Former user 3= Never used 9= Unknown
6	418-423	Total grams of fat consumed per day	######= (2 implied decimal places) 999999= Unknown
1	424	Summary index for dietary fat	<pre>1= Less than or equal to 25th percentile 2= 25th-75th Percentile 3= Greater than 75th percentile 9= Unknown</pre>
5	425-429	Total number of servings of fruits and vegetables consumed per day	#####= (2 implied decimal places) 99999= Unknown
1	430	Summary index for fruits and vegetables	<pre>1= Less than once per day or never 2= Once but less than 3 times per day 3= 3 but less than 5 times per day 4= 5 or more times per day 9= Unknown</pre>
15	431-445	Risk factors	0= Not at risk 1= At risk 9= Unknown
1	431	At risk for seatbelt use (1) (seldom or never)	0= Not at risk 1= At risk 9= Unknown
1	432	At risk for seatbelt use (2) (sometimes, seldom, or never)	0= Not at risk 1= At risk 9= Unknown
1	433	At risk for seatbelt use (3) (nearly always, sometimes, seldom, or never)	0= Not at risk 1= At risk 9= Unknown
1	434	At risk for hypertension (2) (told blood pressure high)	0= Not at risk 1= At risk 9= Unknown
1	435	At risk for smoking	0= Not at risk

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Field			
Size	Columns	Questions	Comments
		(current regular smokers only)	1= At risk 9= Unknown
1	436	At risk for smoking (2) (current regular and irregular smokers)	0= Not at risk 1= At risk 9= Unknown
1	437	At risk for acute drinking (reported having 5+ drinks at least once on an occasion)	0= Not at risk 1= At risk 9= Unknown
1	438	At risk for drinking and driving (reported having driven at least once when perhaps had too much to drink)	0= Not at risk 1= At risk 9= Unknown
1	439	At risk for riding with a drunk driver (reported having ridden at least once with a driver who perhaps had too much to drink)	0= Not at risk 1= At risk 9= Unknown
1	440	At risk for chronic drinking (having 60+ drinks a month)	0= Not at risk 1= At risk 9= Unknown
1	441	At risk for sedentary lifestyle (sedentary or irregular physical activity profile)	0= Not at risk 1= At risk 9= Unknown
1	442	Physical activity level - Frequent Regular (Yr. 2000 Obj. 1.3)	<pre>0= Does not engage in very regular and sustained activity 1= Engages in very regular and sustained activity 9= Unknown</pre>
1	443	At risk for obesity (greater than 120% of weight for height percent median)	0= Not at risk 1= At risk 9= Unknown
1	444	At risk for overweight based on BMI (at risk defined as ≥ 27.8 for males and ≥ 27.3 for females)	0= Not at risk 1= At risk 9= Unknown
1	445	At risk for smokeless tobacco (current user)	0= Not at risk 1= At risk 9= Unknown

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Field Size	Columns	Questions	Comments
4	446-449	Raw weighting factor unequal selection probability weight (number of adults in household/the number of phone # reaching houshold)	<pre>#####= (2 implied decimal</pre>
4	450-453	Cluster size adjustment (CSA) (Expected cluster size divided by the actual cluster size)	<pre>#####= (2 implied decimal</pre>
4	454-457	WT1 (Raw * CSA) The product of unequal selection probability weight and cluster size adjustment	<pre>####= (2 implied decimal</pre>
10	458-467	Post stratification (frequency by age/race/sex distribution from 1990 census divided by the weighted sample frequency by age/race/sex)	<pre>########### (2 implied</pre>
10	468-477	Final weight: Post stratifi-cation multiplied by the product of stratum adjustment and the product of unequal selection probability weight and cluster size adjustment	<pre>########### (2 implied</pre>
1	478	Age group codes used in post-stratification	<pre>1= 18 - 24 2= 25 - 34 3= 35 - 44 4= 45 - 54 5= 55 - 64 6= 65+ NOTE: If cell sizes are too small, age categories may</pre>
1	479	Race group codes used in post-stratification	have been collapsed. 1= White 2= Other than white NOTE: If cell sizes are too small, race categories may have been collapsed.

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Field Size	Columns	Questions	Comments
1	480	Sex group codes used in post-stratification	CODES 1-2 1= Male 2= Female
2	481-482	Age value used to determine age groups	18-99= Reported or imputed ages*
			*This value is the reported age or an imputed age, if the respondent refused to give an age.
			The imputed age value is only used to estimate the age group used to compute the final weight. It will not be recorded as the respondent's age.
			The value of the imputed age will be an average age computed from the sample if the respondent refused to give an age.
18	483-500	Blank	

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